

HTE# 07-500-17660R Halifax County Department of Public Health 20016

PERMIT # 24156

Operation Permit

New Installation Septic Tank Repair Nitrification Line Expansion

PROPERTY LOCATION: NC 24

Name: (owner) Pine Grove Occ. SUBDIVISION NATURCI CROSSROADS LOT # 20

System Installer: Teal Beam Registration # _____

Basement with plumbing: Garage Number of Bedrooms _____

Type of Water Supply: Community Public Well Distance from well 50 feet

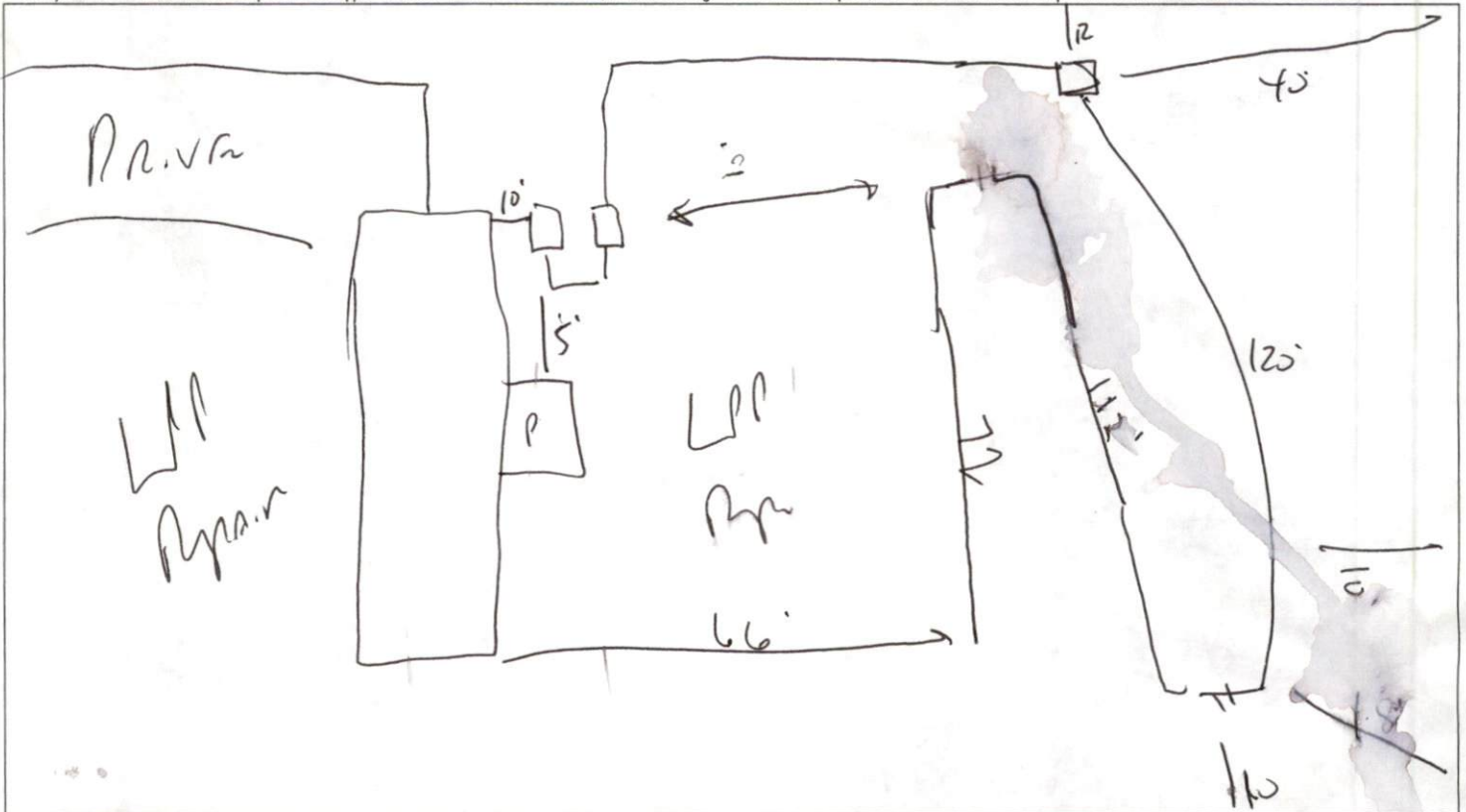
System Type: Pump & Infiltrator Unit 4 177b Types V and VI Systems expire in 5 years.

(In accordance with Table V a)

Owner must contact Health Department 6 months prior to expiration for permit renewal.

Zone 2 side line as shown by T. Beam

This system has been installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.



PERMIT CONDITIONS:

- I. Performance: System shall perform in accordance with Rule .1961.
- II. Monitoring: As required by Rule .1961.
- III. Maintenance: As required by Rule .1961. Other: _____
Subsurface system operator required? Yes No
If yes, see attached sheet for additional operation conditions, maintenance and reporting.
- IV. Operation: _____
- V. Other: _____

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: Conventional Other _____ Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons
 Subsurface No. of _____ exact length 300 feet width of _____ depth of _____
 Drainage Field ditches 1 of each ditch 300 feet ditches 3 feet ditches 18.24 inches
 French Drain Required: _____ Linear feet

Authorized State Agent [Signature] Date 5.28.08