HTE# 07.500-18862R H: Itt County Department of Publ. Health 20259	
PERMIT # 23573 Operation Permit	
New Installation Septic Tank Repair Nitrification Line Expans	ion
Name: (owner) Property LOCATION: NCQY SUBDIVISION NATURE) CROWROOD LOT # 44	
System Installer: Ted Brown Registration #	
Basement with plumbing: Garage Mumber of Bedrooms	
Type of Water Supply: Community Public Well Distance from well 100 feet System Type: 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.	
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.	
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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:	
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 Ounce U Septic Tank: 1000 gallons Pump Tank: 1000 gall	ons
Subsurface No. of exact length width of depth of Drainage Field ditches feet ditches inches	
French Drain Required: Linear feet	134
10000	
Authorized State Agent Date 1008 Date	