

ARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

16801

HTE 04-5-11078

OPERATIONS PERMIT

Name: (owner) Clark Lawford

☒ New Installation

☒ Septic Tank

Property Location: SR# 1553 LIVE OAK

☐ Repairs

☒ Nitrification Line

Subdivision _____

Lot # _____

Tax ID # _____

Quadrant # _____

Contractor: Kenneth Weeks

Registration # _____

Basement with Plumbing: ☐

Garage: ☐

Water Supply: ☐ Well

☒ Public

☐ Community

Distance From Well: 50 ft.

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

Type of system:

☒ Conventional

☐ Other _____

Size of tank:

Septic Tank: 1000 gallons

Pump Tank: _____ gallons

Subsurface
Drainage Field

No. of
ditches 3

exact length
of each ditch 80 ft.

width of
ditches 3 ft.

depth of
ditches 24-18 in.

French Drain Required: - Linear feet

Date: 2-15-05

Inspected by: James E. Montfort
Environmental Health Specialist

PERMIT NO. 21392

