

HTE# 16-53954

## Hart County Department of Public Health

24297

PERMIT # 29013

## Operation Permit

☒ New Installation ☒ Septic Tank ☒ Nitrification Line ☐ Repair ☐ ExpansionPROPERTY LOCATION: JAMES TART RDName: (owner) TIMOTHY EVELING

SUBDIVISION \_\_\_\_\_

LOT # 3System Installer: State Mobile Home Movers

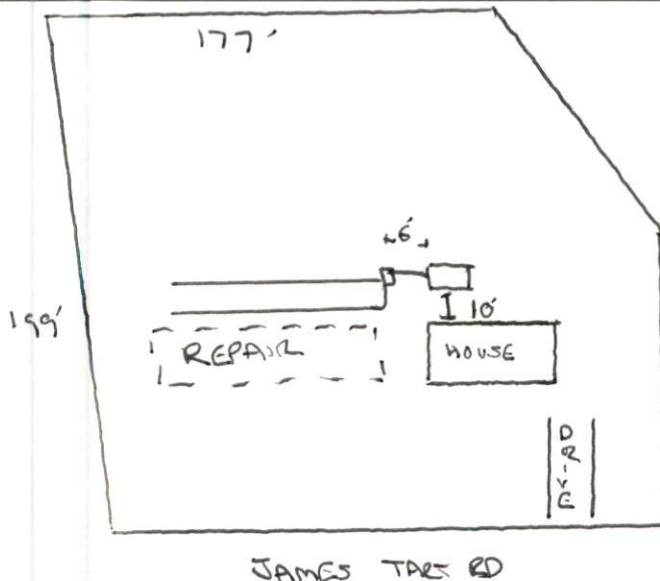
Registration # \_\_\_\_\_

Basement with plumbing: ☐ Garage ☐ Number of Bedrooms 3Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well 100' feetSystem Type: III 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.



## 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: \_\_\_\_\_

☐ D-Box ☐ Pump ☐ Alarm ☐ H2O Line ☐ PWR Line

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

Type of system: ☐ Conventional ☒ Other EZ FLOWSeptic Tank: 1000 gallons Pump Tank: \_\_\_\_\_ gallonsSubsurface Drainage Field No. of ditches 2 exact length of each ditch 90 feetwidth of ditches 3 feet depth of ditches 20-30 inchesFrench Drain Required: Linear feet

Authorized State Agent \_\_\_\_\_

Date 11/3/16