

PERMIT # NA

Operation Permit

521429

New Installation Septic Tank Nitrification Line Repair Expansion

PROPERTY LOCATION: 170 OLD HEAD WAY (CHAUBENE RD)

Name: (owner) LCI HOMES NC LLC SUBDIVISION ADVENT POND III LOT # 90

System Installer: THORNTONS PLUMBING Registration # _____

Basement with plumbing: Garage Number of Bedrooms 3

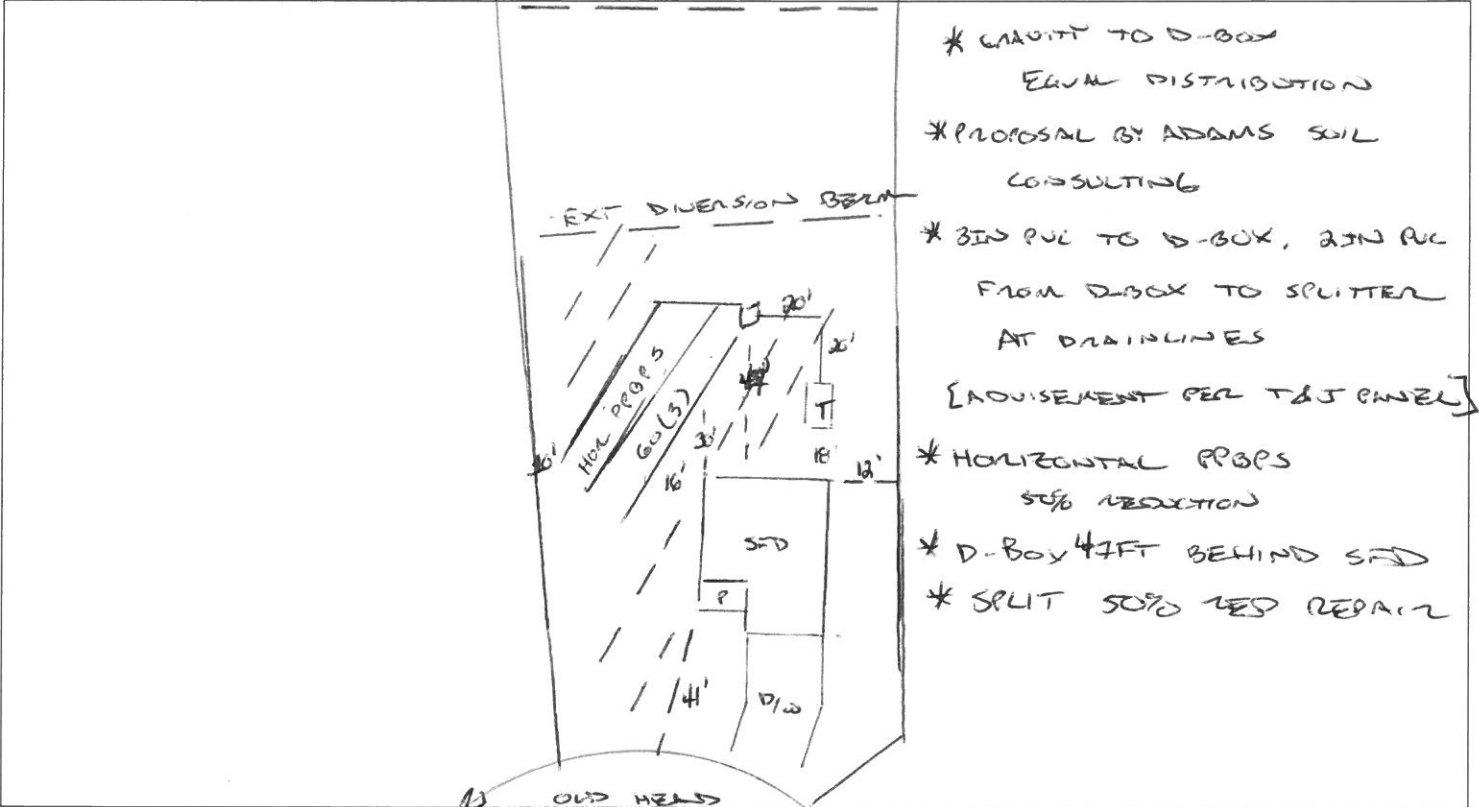
Type of Water Supply: Community Public Well Distance from well NA feet

System Type: 50% REDUCTION S.S. IIIg 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.



- * CAPACITY TO D-BOX
- EQUAL DISTRIBUTION
- * PROPOSAL BY ADAMS SOIL CONSULTING
- * 3IN PUC TO D-BOX, 2IN PUC FROM D-BOX TO SPLITTER AT DRAINLINES
- [ADJUSTMENT PER T&J PANEL]
- * HORIZONTAL PPOPS
- 50% REDUCTION
- * D-BOX 4FT BEHIND S/T
- * SPLIT 50% RED REPAIR

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 50% RED PPOPS HORIZONTAL Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface No. of exact length width of depth of
Drainage Field ditches 3 of each ditch 60 feet ditches 3 feet ditches 20 inches

French Drain Required: _____ Linear feet

Authorized State Agent [Signature] Date 10/21/2020