

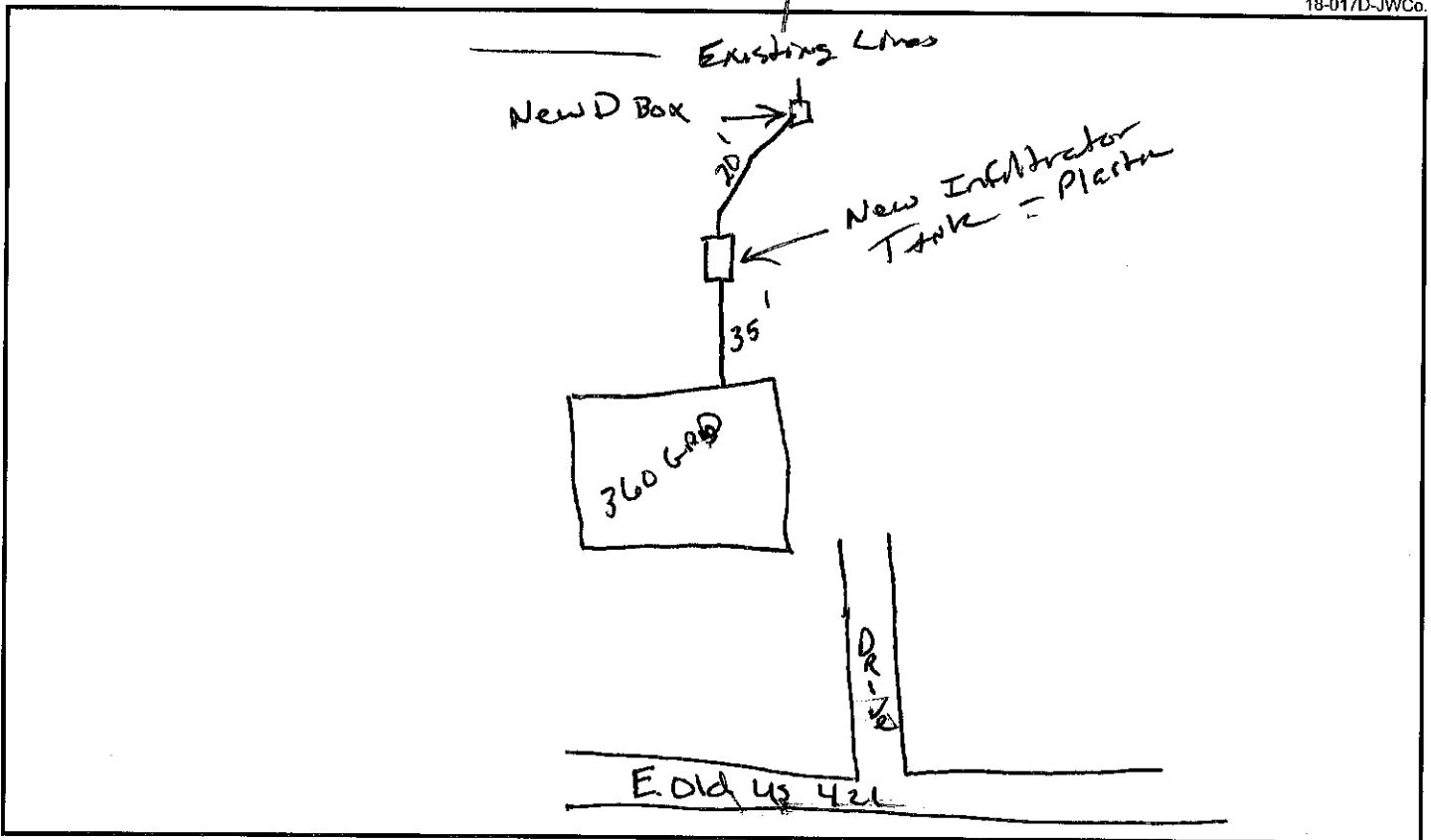


YADKIN COUNTY ENVIRONMENTAL HEALTH
OPERATION PERMIT FOR WASTEWATER SYSTEMS

OWNER/APPLICANT: Christopher Hauser PERMIT #: 015834-2022
ADDRESS: 5608 E. Old US 421 East Bend PARCEL ID: 5856975414
NEW _____ EXPANSION _____ REPAIR ☒ WATER SUPPLY: Well LOT SIZE: _____
FACILITY TYPE: SFO # BEDROOMS: 3 # MAX OCCUPANTS/EMPLOYEES: 6 FLOW: 360 gpd
SYSTEM TYPE: INITIAL: Conv. LTAR: _____ REPAIR: Tank Replacement LTAR: Only
PRODUCT TYPE: _____ MANUFACTURER: _____
Plastic
SEPTIC TANK #: Infiltrator SIZE: 1000 gal PUMP TANK #: _____ SIZE: _____ gal
cm 1660
TOTAL TRENCH LENGTH: _____ ft. TRENCH DEPTH (LOWER SIDE): _____ ft. SOIL COVER: _____ in. STONE DEPTH: _____ in.
PUMP REQUIREMENTS: _____ ft. TDH vs. _____ gpm PUMP INFO: _____ INSTALLER: H. Johnson

AS-BUILT DIAGRAM (Not to Scale)

18-017D-JWCo.



This system has been installed in compliance with applicable NC General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvements Permit and Construction Authorization. The system shall perform in accordance with Rule .1961. Ground absorption sewage treatment and disposal systems shall be checked and the sewage in the tank removed periodically from all compartments to ensure proper operation of the system. The contents of the tank shall be pumped whenever the solids level is found to be more than 1/3 of the liquid in any compartment. Any questions pertaining to the system should be directed to Yadkin County Environmental Health at (336) 849-7905.

CONDITIONS:

ISSUED BY:

Shane Walker

AUTHORIZED STATE AGENT DATE:

11-3-22

YADKIN COUNTY ENVIRONMENTAL HEALTH SEPTIC SYSTEM LAYOUT FORM

☒ IMPROVEMENT PERMIT

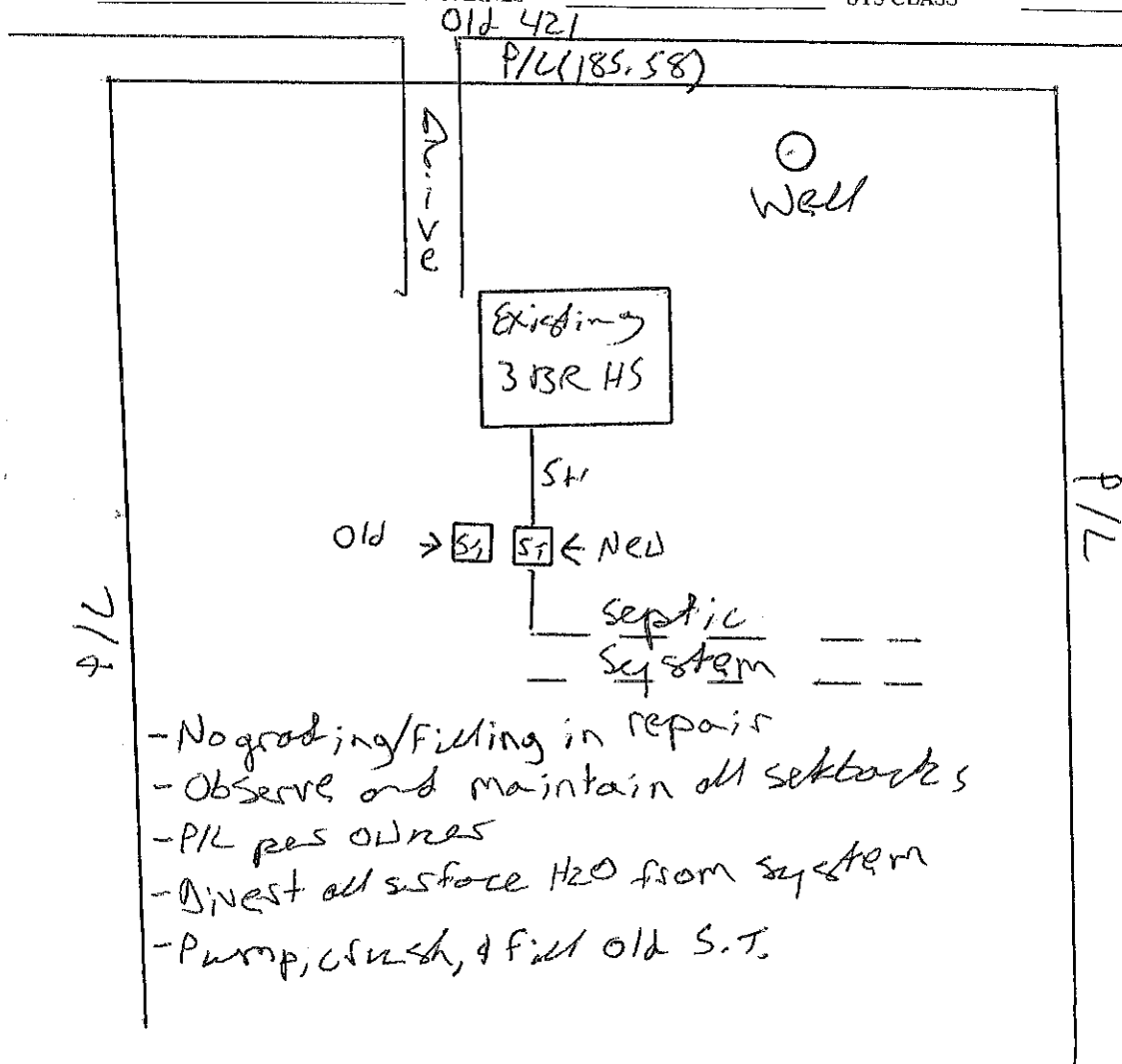
☒ ATC

☐ OPERATION PERMIT

NAME Christopher Hanser DATE 09-12-2022
ADDRESS 5608 E Old US 421 Hwy, East Bend, NC 27018
PERMIT # OSHW-015834-2022 PIN# 5856975414 LTAR _____

STS SPECS

NEW OR REPAIR <u>Repair</u>	SEPTIC TANK <u>New 1000gal</u>	TRENCH DEPTH _____
SYSTEM TYPE _____	PUMP TANK _____	COVER DEPTH _____
REPAIR TYPE <u>S.T. Only</u>	LINEAR FT. _____	STONE DEPTH _____
INSTALLER _____	NO. LINES _____	SYS CLASS _____



- No grading/Filling in repair
- Observe and maintain all setbacks
- P/L per owner
- Divert all surface H₂O from system
- Pump, crush, & fill old S.T.

The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.

This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. Any reference points must be maintained until system is installed.

COMMENTS/CONDITIONS: Repaired using best professional judgement.

BY: Jane Green REHS DATE: 09-12-2022