Approved MD 4/27/16

CL&T 1129 Fast Track Septic Spec Sheet

Number of Bedrooms	**4**
Basement or Crawl	**Basement with Plumbing**
Design Flow (gpd)	**480**
Primary System LTAR (gpd/ft2)	**0.25**
Primary System Type	**25% Reduction**
No. Lines	6 (See Table)
Total Linear Feet	480
Trench Width	3' min.
Trench Spacing	9' min.
Max Trench Depth	18"
Pump Required	Yes
Distribution Device	Pressure Manifold
Maintenance Agreement Required	No
Length and Diameter of Supply Pipe	190' of 2" SCH 40 PVC
Flow Rate through the system	33 gpm
Elevation head	Approx. 30.6'
Pressure head	2.0'
Friction head	4.5'
20% Contingency	7.4'
Total Head	44.5'
Pump Requirements	33 gpm @ 44.5' of head To be designed by installer.
Maximum Dosing Volume	240 gal -2.0 doses/day @ design flow
Volume of water pumped per dose	Calculated to specific tank by measure or dealer engineering *specifications* (1 cubic ft. of water equals 7.48 gal.)
Pump Run per dose	7.3
Repair System	**Subsurface Drip**
Total Linear Feet	5,000+ SqFt
Repair Loading Rate	0.1

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Table: Summary of Primary and Repair Nitrification Line Specifications

Line No.	Use	Line Color	System Type	Line Length (Ft.)	Elevation (Ft.)
1	System	Blue	25% Reduction	80 endfed	4.92
2	System	Red	25% Reduction	80 endfed	7.44
3	System	Pink	25% Reduction	80 endfed	10.27
4	System	Orange	25% Reduction	80 endfed	13.46
5	System	Blue	25% Reduction	80 endfed	16.91
6	System	Red	25% Reduction	80 endfed	19.93
				Total System: 480'	
				Total Repair: xxx'	

Tank	orange	1000 gal (2 compartment)	29.53
Pump Tank	orange	1000	
House	blue		18.91

Manifold Information	
Tap Size (In.)	1/2
Tap Material	SCH 80 PVC
No. Taps	6
Barrel Size (In.)	4
Barrel Material	SCH 80 PVC
Flow (gpm)/Tap	5.5

Note: **All rod readings should be verified by installer prior to installation**
Tank Locations and distribution devices may be altered at the discretion of the ICHD
Use proper setbacks if foundation drains are used
System is in previously permitted area, uses LTAR and trench depth from existing permit
Repair area has been moved to new area.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

Approved 4/27/16 MS

Sheet ___ of ___
PROPERTY ID #: ___
COUNTY: Iredell

SOIL/SITE EVALUATION
***for* ON-SITE WASTEWATER SYSTEM**
(Complete all fields in full)

OWNER: Ray Short
ADDRESS: 149 Hermance
PROPOSED FACILITY: SFR
PROPOSED DESIGN FLOW (.1949): 480
LOCATION OF SITE: same
APPLICATION DATE ___
DATE EVALUATED: 4/19/16
PROPERTY SIZE: ___
PROPERTY RECORDED: ___
WATER SUPPLY: ☒ Private ☐ Public ☒ Well ☐ Spring ☐ Other ___
EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	L ~14%	0-6	mo GR SL	FR ns/np	Br				0.1 Drip
		6-25	mo SBK C	FR ss/sp	R; F 4c1 Br				
		25-43	WK SBK C	FR ss/sp	R; C 4c1 Br				
		43"	2 Chroma						
2	L	0-24"	mo GR SL	FR ns/np	Br				0.3 Drip
		* Dug new hole 4/25/16 & verified soil depth for Drip.							

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)	25% Red	Sub. drip
Site LTAR	0.25	0.1

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: KMS
OTHER(S) PRESENT: ELH

COMMENTS: ___