13793

IV

IREDELL COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

OWNER OR CONTRACTOR Charlie Bowers DATE Nov 24, '92

PHONE: Business _____ Home _____ PERMIT NO. 2B-7-A-11

LOCATION 115 S. SR 1102 (Sanctuary Rd.) TL into Royal Pointe at end on right - beside boat access lot

SUBDIVISION NAME Royal Pointe LOT NO. 11 S.R. No. _____ SECTION OR BLOCK NO. _____

House ☑ Mobile Home ☐ Business ☐ Other _____

No. Bedrooms _____ No. Bathrooms 2½

Garbage Disposal Unit Yes ☐ No ☑

Auto. Dishwasher Yes ☑ No ☐

Auto. Wash. Machine Yes ☑ No ☐

Lot Area 106' x 205'

Soil Characteristics psclay

Application Rate .3 gal/sq ft/day

Topography rolling

Depth to Water Table 7 ft

Rock or other impervious formations NONE OBS.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement _____ Crawl Space

Size of Tank ST 1500 / PT 1500 Gals.

Nitrification Field:

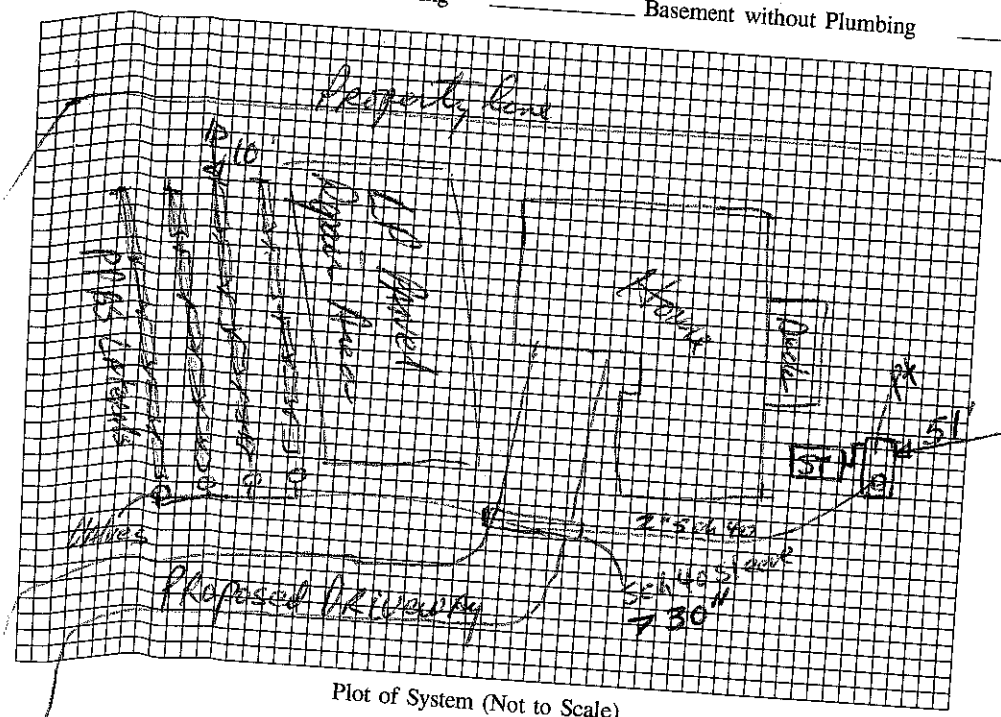
No. of Lines 4

Sq. Ft. _____ Linear Ft. 200' of

Depth of Stone in Lines 16" ABS

Water Supply: Individual ☐

Public ☑ CW



Plot of System (Not to Scale)

Installed by ORBISON

I understand and agree to install a septic tank system as specified on this Improvement Permit.

Signed: _____

(IMPROVEMENT PERMIT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE.)

IMPROVEMENT PERMIT BY DRH

COMMENTS Oct 22, '92 System installed & tested, pressure head set, alarm tested but not permanently mounted; waiting on maintenance agreement DRH

Operation permit

CERTIFICATE OF COMPLETION BY DR Hamrick, RS

EXISTING SYSTEM CHECKED BY _____ DATE 11/24/92

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS DATE _____

Permit is VOID if any unauthorized changes are made in installation of system, and/or if any unapproved changes are made to the site, and/or if any false information is supplied toward securing Improvement Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold

13793

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR: Charlie Bowers

PHONE: Business ______ Home ______ DATE: Dec. 19, '91 PERMIT NO. 2B-7-A-11

LOCATION: 115 S. TR 1102 (Langtree Rd.) TL into Royal Pointe at end on right - beside boat access lot

SUBDIVISION NAME: Royal Pointe S. R. No. ______

LOT NO. 11 SECTION OR BLOCK NO. ______

House (✓) Mobile Home ( ) Business ( ) Other ______

No. Bedrooms 3 No. Bathrooms 2½

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site ~~Suitable~~ PS Yes (✓) No ( )

Lot Area 106' x 205'

Character & Porosity of Soil (area of drainfield): ps. clay trans.

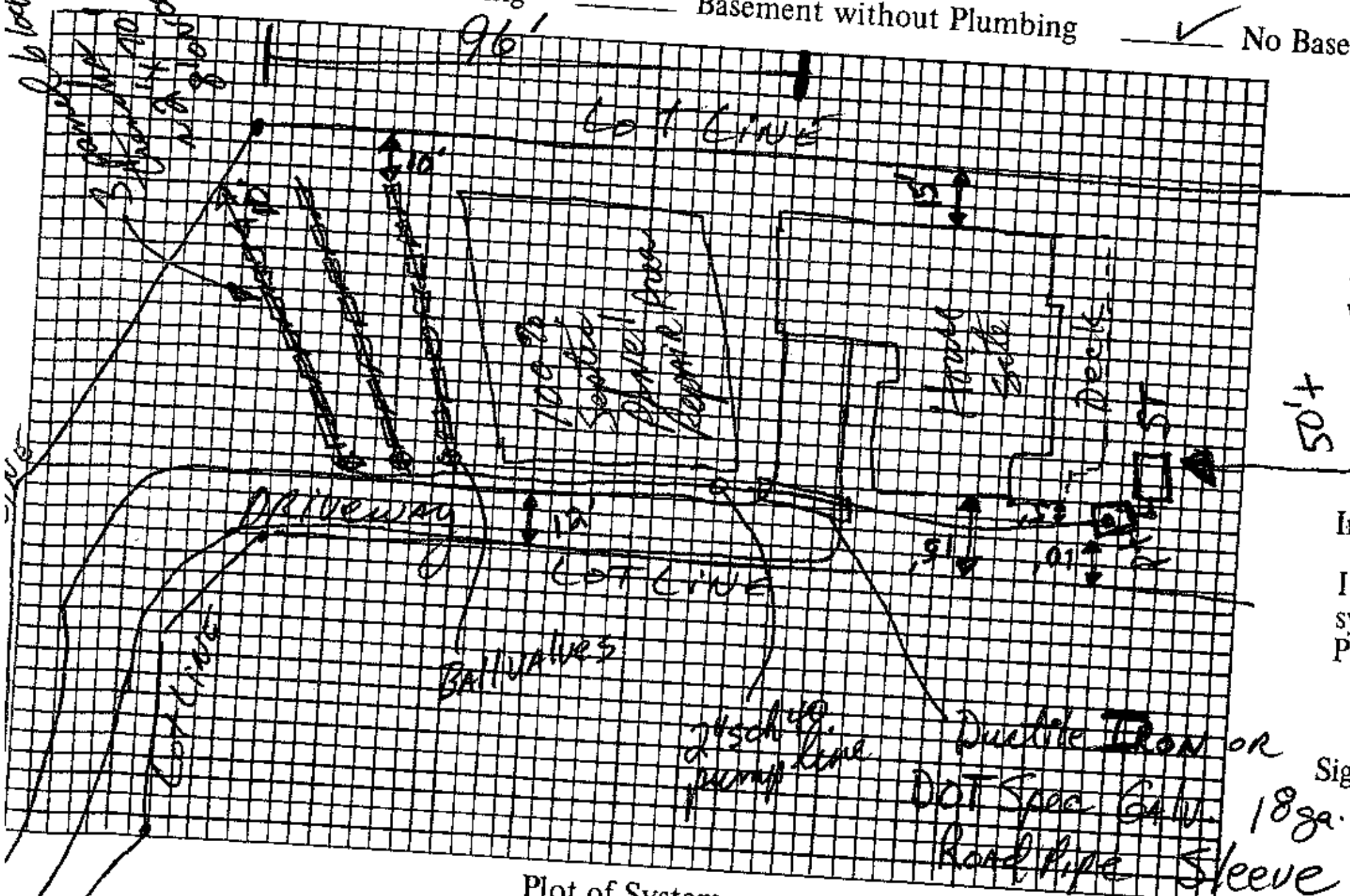
Percolation Rate: .3

Topography: 4-6%

Depth to Water Table: 44"

Rock or other impervious formations: some scattered rock

Basement with Plumbing ______ Basement without Plumbing ✓ No Basement



Plot of System

Septic Tank / Pump Tank

Size of Tank 1000 / 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. ______ Linear Ft. 200 lf

Depth of Stone in Lines 16" panel block pressure dosed

Water Supply: Individual ( )

CW Public (✓)

Installed by ______

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: X Jerry C [illegible]

IMPROVEMENTS PERMIT BY: D R[illegible], RS, EHPC

COMMENTS: Water line to be routed down side lot line. If it crosses septic system, it must be 18" above solid sch 40 pipe. Panel trenches to follow contour. 28" trench bottom depth. 1¼" sch 40 through panels with ONE 3/16" hole per panel. 2' pressure head. Pump specs: 28 gal/min at approx. 22' head.

CERTIFICATE OF COMPLETION BY ______

EXISTING SYSTEM CHECKED BY: ______ DATE ______

______ DATE ______

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold