(ACP)
ST 780 - 4-29-93 1500
Pt 104 - 4-29-93 1500

Goulds WE0511 HH
½ HP

IREDELL COUNTY HEALTH DEPARTMENT

16200

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

OWNER OR CONTRACTOR M I Homes DATE May 6, '93 PERMIT NO. 26-23A78

PHONE: Business _____ Home _____

LOCATION Highview Rd. 1100 TR 1113 3rd lot on left TR Watford Dr. TL

S.R. No. _____

SUBDIVISION NAME Pine Vale LOT NO. 78 SECTION OR BLOCK NO. _____

House ☑ Mobile Home ☐ Business ☐ Other _____

No. Bedrooms 4 No. Bathrooms 2.5

Garbage Disposal Unit Yes ☑ No ☐

Auto. Dishwasher Yes ☑ No ☐

Auto. Wash. Machine Yes ☑ No ☐

Lot Area 20,000 sq ft

Soil Characteristics fi-sic

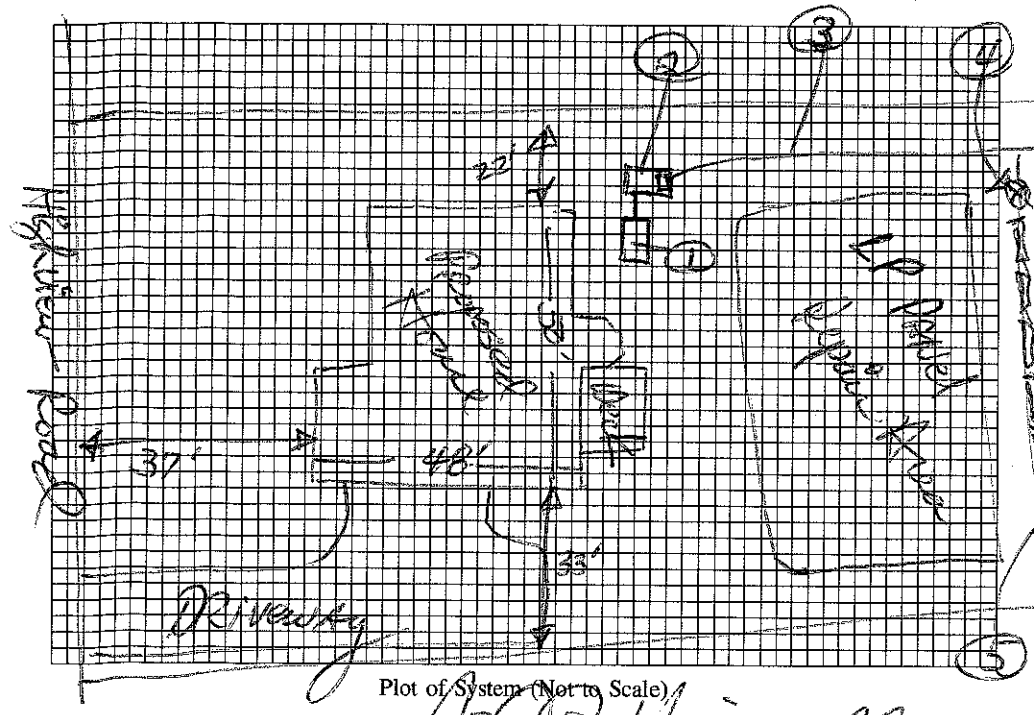
Application Rate .3 gal/sq ft/day

Topography 4% - 4%

Depth to Water Table _____

Rock or other impervious formations None obs.

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



Plot of System (Not to Scale)

Size of Tank 1500 / 1500 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. _____ Linear Ft. 270' of

Depth of Stone in Lines 16" PPBPS

Water Supply: Individual ☐ pressure

Public CWS ☑ / closed

Installed by _____

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

Signed: X Mat E Miller

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

IMPROVEMENT PERMIT BY Harold R. Hinson, RS

Pump Specs: 37 gal/min @ approx 20' head.
DOSE 1200 gal/5½ min cycle

COMMENTS (1) Septic Tank (2) Pump tank w/ 4" riser (3) 2" Sch 40 pumpline/manifold (4) Ball/Gate valve per lateral (5) PPBPS lateral / 1¼" Sch 40 threaded nipples w/ ONE 3/16" hole per panel turned up (6) Standpipe w/ below grade adaptor & cover. 62 panels total. Follow contour.

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY _____ 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 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