STB-797-1500 BT 7-1-93
STB-797-1500 -6-19-93

LONG GRADING IRON HORSE

3/16" 2.80 x 8.00 ALTERNATIVE 6 @ 45' x 2' MIDDLE FED

16109

# IREDELL COUNTY HEALTH DEPARTMENT

## IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

OWNER OR CONTRACTOR Robert C Ingraham Homes DATE April 22, '93 PERMIT NO. part of 2FB-10

PHONE: Business _____ Home _____

LOCATION 1100 TL 1113 TR Cove Creek Rd. on left

_____ S.R. No. _____

SUBDIVISION NAME Pine Vale LOT NO. 79 & 79A SECTION OR BLOCK NO. _____

House ☑ Mobile Home ☐ Business ☐ Other _____

No. Bedrooms 4 No. Bathrooms 2

Garbage Disposal Unit Yes ☑ No ☐

Auto. Dishwasher Yes ☑ No ☐

Auto. Wash. Machine Yes ☑ No ☐

Lot Area Easement Area for Septic Drainfield → 79A (~14,000 ft²)

Soil Characteristics PS clay (Easement Area)

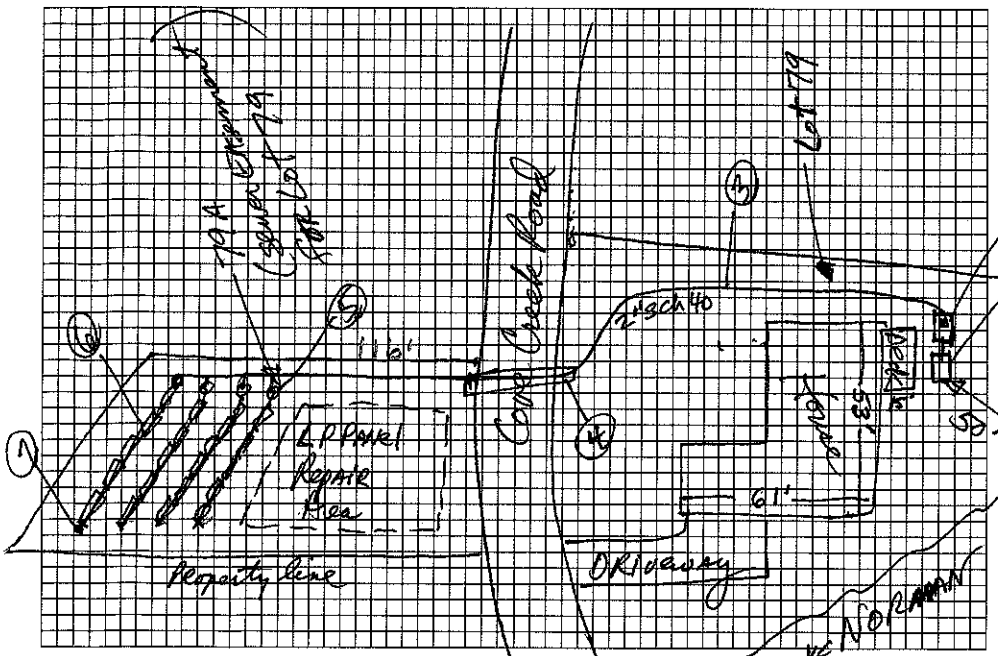
Application Rate .3 gal/ft²/day

Topography 2490

Depth to Water Table 74'

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 ST 1500 / PT 1500 Gals.

Nitrification Field:

No. of Lines ~4

Sq. Ft. _____ Linear Ft. 270' of 16" PPBPS

Depth of Stone in Lines pressure dosed

Water Supply: Individual ☐ CW Public ☑

Installed by _____

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 _____

Pump Specs: 37 gal/min at approx. 30' head

COMMENTS

① Septic Tank, ② Pump Tank, ③ 2" sch 40 pump line, ④ Sleeve under street for pump line ⑤ Ball/Gate Valves ⑥ PPBPS Laterals ⑦ Below grade adaptor on stand pipe. 62 panels total; 1 1/4" sch 40 through panels; ONE 3/16" hole per panel located midways & turned up. 2' pH

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

This permit requires a maintenance contract.