2:00 pm

IREDELL COUNTY HEALTH DEPARTMENT

12962

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Geoffrey Davidson DATE June 27, '91 PERMIT NO. 2K-9-A-124

PHONE: Business _____ Home _____

LOCATION 1100 TL 1179 (Canvasback) TR Spring Run Dr. ~ ¼ mile on Right S. R. No. _____

SUBDIVISION NAME Ballard Head LOT NO. 124 SECTION OR BLOCK NO. _____

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

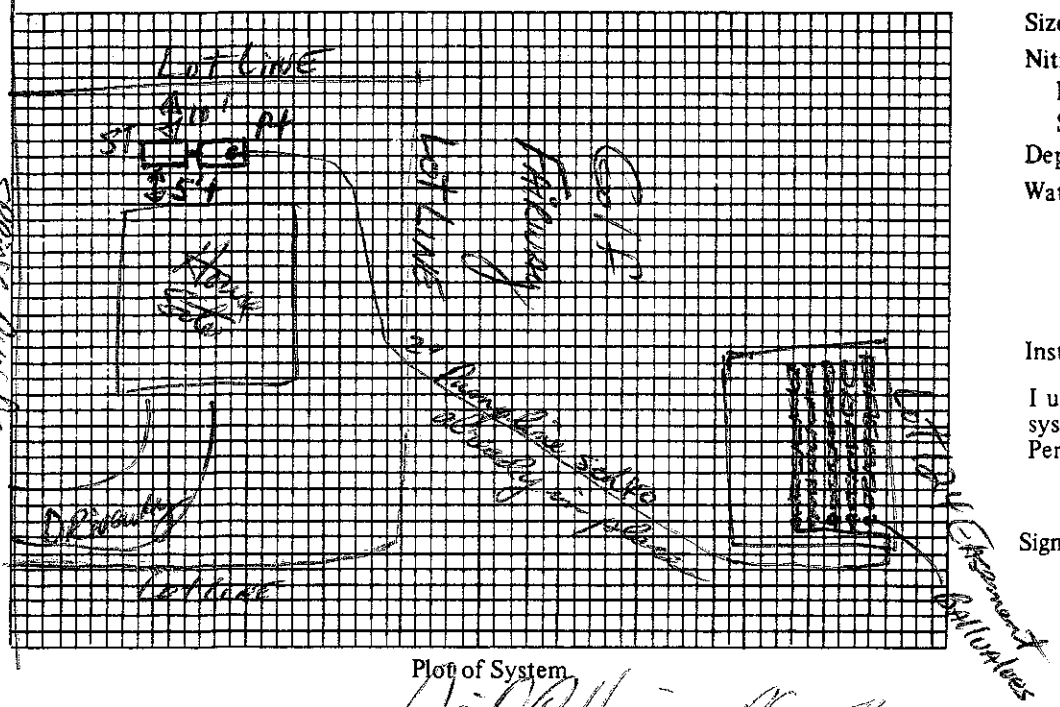
No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes	(✓)	No	( )	
Auto. Dishwasher	Yes	(✓)	No	( )	
Auto. Wash. Machine	Yes	(✓)	No	( )	
Site ~~Suitable~~ PS Easement	Yes	(✓)	No	( )	

Lot Area 20,000

Character & Porosity of Soil Easementarea ps clay
Percolation Rate ps 25
Topography 2%
Depth to Water Table 4'+
Rock or other impervious formations none obs.

✓ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

1250+ pump tank
Size of Tank 1250+ Gals.
Nitrification Field:
No. of Lines 5 @ 45
Sq. Ft. _____ Linear Ft. 225'
Depth of Stone in Lines 16" T&J
Water Supply: Individual ( ) panels prepare closed
CW Public (✓)

Installed by _____

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

Signed: _____

52 panels total

IMPROVEMENTS PERMIT BY David R. Hanson, RS, CHC

COMMENTS: 1¼" sch 40 through panels with one 7/32" hole per panel. 2' pressure head per trench. 30" trench bottom depth. Pump specs: 22 gal/min at approx. 32' total head.

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 false information is supplied in making Improvements Permit.

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