0426

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 Brad Davis DATE May 18, '88 PERMIT NO.

PHONE: Business Home

LOCATION 1303 N. TL 1300 (Fawn Hill) TR 1449 (Riverbend) TR 2nd street (Cherokee) on left

SUBDIVISION NAME CL&T Lake Norman LOT NO. 966 SECTION OR BLOCK NO. 15 S. R. No.

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

No. Bedrooms 4 No. Bathrooms ^3

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable/S Yes (✓) No ( )

Lot Area 1Ac +

Area of Drainfield

Character & Porosity of Soil silty clay transition to SAP

Percolation Rate N.3

Topography 8-10% comply

Depth to Water Table 41+

Rock or other impervious formations none obs

(✓) Basement with Plumbing ____ Basement without Plumbing ____ No Basement

1500 gal pump tank

Size of Tank 1500 Gals.

Nitrification Field:

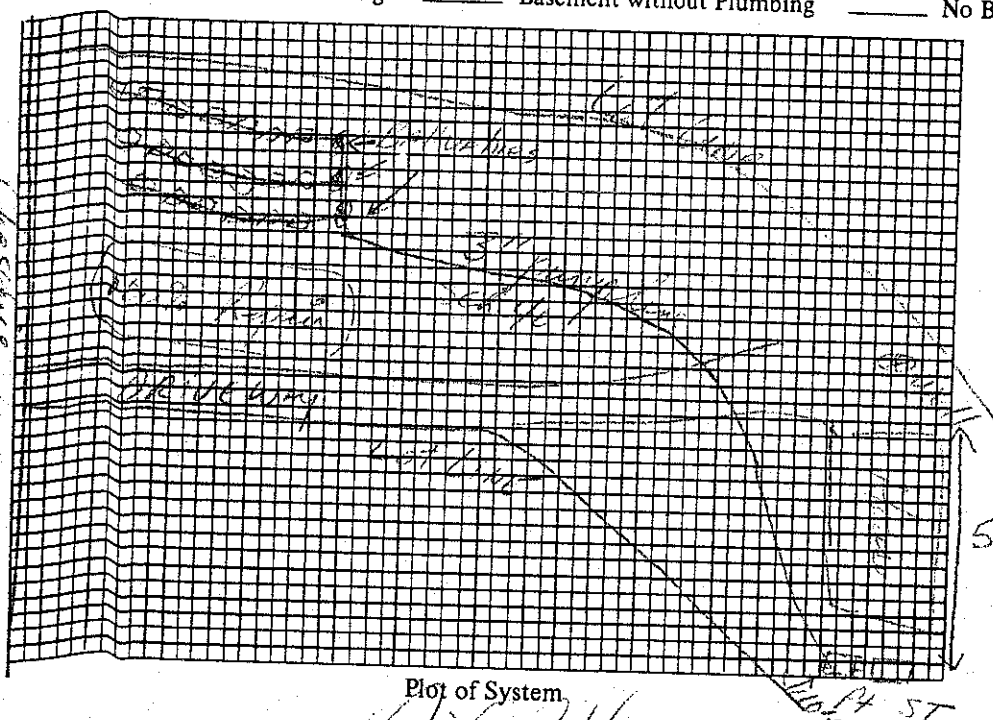
No. of Lines 3-4

Sq. Ft. ____ Linear Ft. 270 ea

Depth of Stone in Lines 16" Td I

Water Supply: Individual (✓) Public ( )

panels pressure dosed



Plot of System

Installed by

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

Signed: ✗

+ Pump needed ⇒ 50 gal min at 45' head

IMPROVEMENTS PERMIT BY

COMMENTS:

Area of drainfield to be slightly shaped. Panel drainfield must be installed shallow & on contour. Use 1¼" sch 40, pvc Thru check with two 5/32" holes as req'd. Need a pump capable of giving 50 gal/min at approx 45' 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