08679

IREDELL COUNTY HEALTH DEPARTMENT

4646 21 1062

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

OWNER OR CONTRACTOR David L. Christenbury DATE Oct. 18, '89 PERMIT NO. 26-5-B-12

PHONE: Business _____ Home _____

LOCATION 215 x 77 TL Alcove (1206) TR 1110 (Catalina Rd) TR Rainbow Lane ~1/4 mile on left

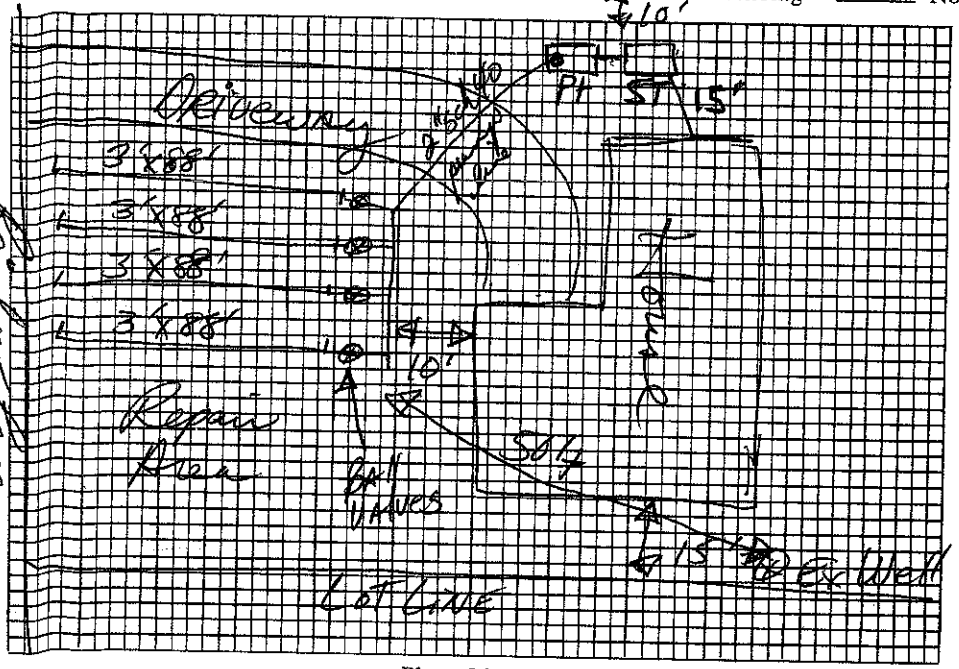
SUBDIVISION NAME Catalina Cove LOT NO. 12 SECTION OR BLOCK NO. _____ RD. S. R. No. _____

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 ½ Ac +

Character & Porosity of Soil clay
Percolation Rate 35
Topography 2-4%
Depth to Water Table 3½'+
Rock or other impervious formations none obs.

✓ Basement with Plumbing ____ Basement without Plumbing ____ No Basement



Plot of System

1000 p.T.
Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 1050 Linear Ft. 350
Depth of Stone in Lines 12"
Water Supply: Individual (✓) Existing
Public ( )

Installed by _____

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

Signed: Bill Hudson

Pump specs: 29 gal/min at approx. 18' TDH.

IMPROVEMENTS PERMIT BY Jarold R. Hinson, RS.

COMMENTS: Follow contour with drainfield. Maximum trench bottom depth for all trenches is 30". Use 1½" sch 40 laterals with one 5/32" hole drilled every 5 feet. Two feet pressure head per ditch.

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