Frommie on Terminal

43796

IREDELL COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

14808

OWNER OR CONTRACTOR ROBERT FROMMIE DATE 6/22/92 PT PERMIT NO. 12D-A-78

PHONE: Business 872-6533 Home

LOCATION OLD MOCKSVILLE ROAD NE, TR SOCIETY CHURCH ROAD, TR SUNFLOWER ROAD, ON (R) ~ 1.5 MILES S.R. No.

SUBDIVISION NAME LOT NO. 78 SECTION OR BLOCK NO.

MODULAR

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 [ ]

Lot Area ACREAGE

Soil Characteristics PS

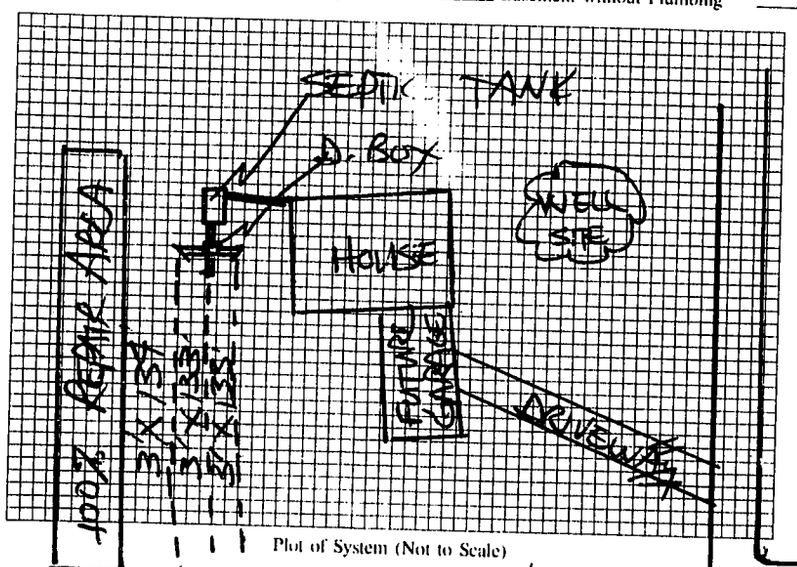
Application Rate 0.40 GPD/FT2

Topography 4-6% LINEAR SLOPE

Depth to Water Table 54"

Rock or other impervious formations NONE

[✓] Basement with Plumbing [ ] Basement without Plumbing [ ] No Basement [ ] Crawl Space



Plot of System (Not to Scale)

Size of Tank (1250) 1250 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 1200 Linear Ft. 400

Depth of Stone in Lines 12"

Water Supply: Individual [✓] WELL

Public [ ]

Installed by

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

Signed: X Mary Anne Fromme

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

IMPROVEMENT PERMIT BY STEVE HENDRICK

COMMENTS (1) KEEP SYSTEM MINIMUM 5' FROM HOUSE, 10' FROM PROPERTY LINE, 100' FROM WELL (2) INSTALL LINES ON CONTOUR, NO DEEPER THAN 24" 9' ON CENTER (3) REPAIR AREA IS 100% CONVENTIONAL GRAVITY-FED

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