

ALABAMA DEPARTMENT OF PUBLIC HEALTH

PERMIT TO INSTALL(REPAIR) AN ONSITE SEWAGE DISPOSAL SYSTEM

Lauderdale County Health Department Phone (256) 764-7453

16073

Permit Number

FLOW TYPE: Small SYSTEM TYPE: Conventional

INSTALLATION TYPE: New

PERMITTEE PHONE: 281-796-7926

PERMITTEE NAME: ANDREW FINGER

ADDRESS: 616 County Road 263, Florence, Alabama, 35633

DEVELOPMENT NAME:

LOT: 11

INSTALLATION CRITERIA

Disposal Type:

Trench - 36 Inch Width @ 8 Inch Depth Below Natural Ground

Distribution:

See Plans

Treatment:

Septic Tank

Square Feet:

Disposal Product: Infiltrator Chamber - Quick 4 Plus LP

Linear Feet:

180

Tank Capacity:

Approved Condition: Add required fill, then excavate trenches to required depth from top of fill. Landscape area for adequate drainage.

Other Requirements: NSF 46 Outlet filter and risers

Comment:

See engineer's note sheet before beginning any work to OSS. Maintain setback distances. EDF and REDF shall be protected at all times. Any cut or fill in EDF area will void this permit.

ISSUE DATE:

10-30-2024

EXPIRATION DATE: 10-30-2029

Public Health Environmentalist Signature

Any person who installs, repairs, manages, and/or certifies an Onsite Sewage Disposal System (OSS) shall be licensed by the Alabama Onsite Wastewater Board (AOWB) or be exempt from such licensure pursuant to § 34-21A-1 et seq., Code of Alabama 1975. Call the local county health department (LHD) PRIOR to beginning the installation at (256) 764-7453.

Except as allowed in Rule 420-3-1 Onsite Treatment and Disposal, no part of any installation shall be covered or used until the LHD is afforded an opportunity to inspect and any necessary changes are made. Any part of the installation which has been covered prior to inspection or authorization by the LHD shall be uncovered, if necessary, upon direction by the LHD.

No changes shall be made to the design of the system without prior written approval from the soil professional. This Permit to Install (Repair) is null and void if: (a) conditions are changed from those shown on the application or the approved plot/ construction plan; and/or (b) conditions of this permit are not followed.

Issuance of the Permit to Install (Repair) an Onsite Sewage Disposal System, and subsequent approval (if any) of same by representatives of the Alabama Department of Public Health or county health departments, shall not be construed as a guarantee that such systems will function satisfactorily for any given period of time; furthermore, the health department does not assume any liability for damages which are caused, or may be caused, by the malfunction of such a system.

CEP-2/3 PART-C SITE EVALUATION DATA

		26 10					
ation/A	Address		222.74				
			Evalua	ator			
		Land Surveyor	☐ Soil Classi	fier Geologist [PHESS (CE	P-2 Only)	
			Method	Used			
		Percolation	☑ Unified [Mapping Morph	ology		
Note: A	All percolation result	s shall be reported. A	ll testing methods an	d results are subject to verifi	cation by the Ll	HD and/or th	e ADPH
			Morphology / Per ttach additional sl	rcolation Soil Boring Data neets if necessary)			
Hole No.	Layer ID/Horizon *	Depth of Upper/Lower Boundary	Dominant Color of Each Layer	Mottles, Redox, etc.	Texture*	Texture Group *	Othe
		0-4"	7.5yr 3/3		SM	III	
		4-32"	7.5yr 4/6		SC	III	
1		32-38"	5.yr 4/6		ML-CL	III	
		32-38" 15%	10yr 7/1	ashes at 32"	CL	III	
					-		
	Field Sizing 60 mpi @		Restriction Depth (in.)	Restriction Type per Table 7	Minimum Vertical Separa Distance per Table 7		
	Depth (in.)		32"	ashes	18(in.)		(in.)
Hole No.	Layer ID/Horizon *	Depth of Upper/Lower Boundary	Dominant Color of Each Layer	Mottles, Redox, etc.	Texture*	Texture Group *	Othe
		0-4"	7.5yr 3/3		SM	III	
		4-20"	7.5yr 4/6		SC	III	
		20-38"	5yr 4/6		ML-CL	III	
		26-38" 15%	10yr 7/1	ashes at 26"	CL	III	
	Field Sizing 60 mpi @		Restriction Depth (in.)	Restriction Type per Table 7	Minimum Vertical Separat Distance per Table 7		
			2611		10 (in)		

ashes

18 (in.)

Hole No.	Layer ID/Horizon *		Depth of Upper/Lower Boundary	Dominant Color of Each Layer	Mottles, Re	Mottles, Redox, etc.		Texture Group *	
									+
		Field Sizing mpi @		Restriction Depth (in.)	Restriction Type per Table 7		Minimum Vertical Separation Distance per Table 7		
			Depth (in.)			(in.)			
Required	for U	nified / Morp	2. Percolation	lly. Fest Data (Attach	additional shee	ts if necessary)		
Extend Saturat Proced Testin	ion ure Percolation Hole No.		Percolation	Beginning / End Time of Saturation	Beginning / End Time of Testing	Total Depth of Hole (in.)			Stabilized Percolation Rate in Minutes per Inch
							-		
			3. Profession	nal Soil Classifier	Mapping Data	attached			
				SITE EVA	LUATOR				
wimawy E	DE de	seian is limita	ed by the most restr	ictive test result a	as recorded for h	ole number _	2		
		Larry V		, do hereby	certify that the a				l tests were
	- 2		W Blue			0/24 R	egistration l	No. PE	11294
ignature .	-(/ /		City _					
ddress	0.50								
hone (256)		Fax L Solutions, LLC						

NOTE SHEET

No property survey was conducted. Property line locations are approximate. Elevations shown are assumed and are for comparison purposes only. Curve field lines to best fit field conditions. Keep heavy equipment off the field line placement area.

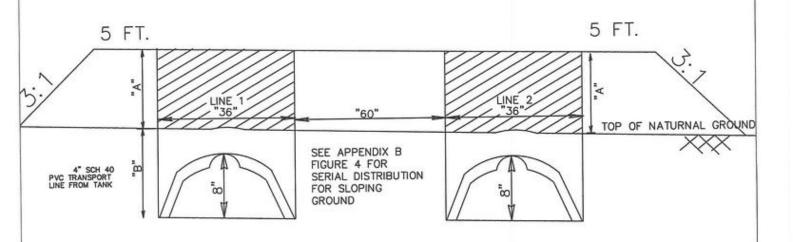
RECOMMENDATIONS:

() Place 1 - 100 () 10" grav () 36" grav () infiltrato	0 gallovel les vel tre or pipe	I pump chamber (see pump spec's) on septic tank and _180 linear feet of ss pipe (or equal) nch (or equal) s (or equal) (
using		 (✓) serial distribution () level header (✓) shallow placement
Place field lines	8	inches deep.

ADDITIONAL NOTES: INSTALL AS PER SPEC. BOUNDARY OF EDF & REDF SHALL BE STAKED & FLAGGED. THE OWNER SHALL MAINTAIN THESE AREAS & PREVENT DAMAGE FROM HEAVY EQUIPMENT.

TYPICAL DRAWING SPECIAL DETAILS FOR PLACING INFILTRATOR PIPE FOR SHALLOW PLACEMENT





NOTE: "A" = 12 INCHES
"B" = 8 INCHES

PLACE FIELD LINES 60" APART SIDE WALL TO SIDE WALL (8 FT. ON CENTERS)

TRENCH SHALL BE EXCAVATED AS DETAILED AND BACKFILL USING SAME EXCAVATED MATERIAL