IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PERMIT# 109602 PIN# 4624-27-5705 4624-48-8320 DATE 2/6/03

OWNER OR CONTRACTOR Crescent Resources c/o/ The Pointe Norman Simonini Blades Business Home

ADDRESS 2214 Brawley Sch Rd. Mooresville N.C. 28117

LOCATION Brawley Sch Rd TL Torrence Chapel TL Shelburne TL Cape Cod TL Hyannis at end on left

SUBDIVISION The Point BLOCK / SECTION II LOT 1171 LOT AREA 53652 Ft² SITE CLASS: PS DESIGN FLOW 480 gpd L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 338 Date 6-5-05
Pump Tank: 1000 Gallons; PT 283 Date 6-11-05
Pump Make: Myers Model ME50S2T Serial No. 253270
Nitrification Field: No. Fields 1 Square Feet 640/960 Linear Feet 320
No Lines 3 Trench Width 24" Min 36" Max Trench Bottom Depth 36" Gravel Depth NA

☑ New System ☐ Repair System Type: I II III IV V VI
System Description: LPP BPS
Repair System Description: LPP BPS
Maintenance Agreement Required: ☑ Yes ☐ No

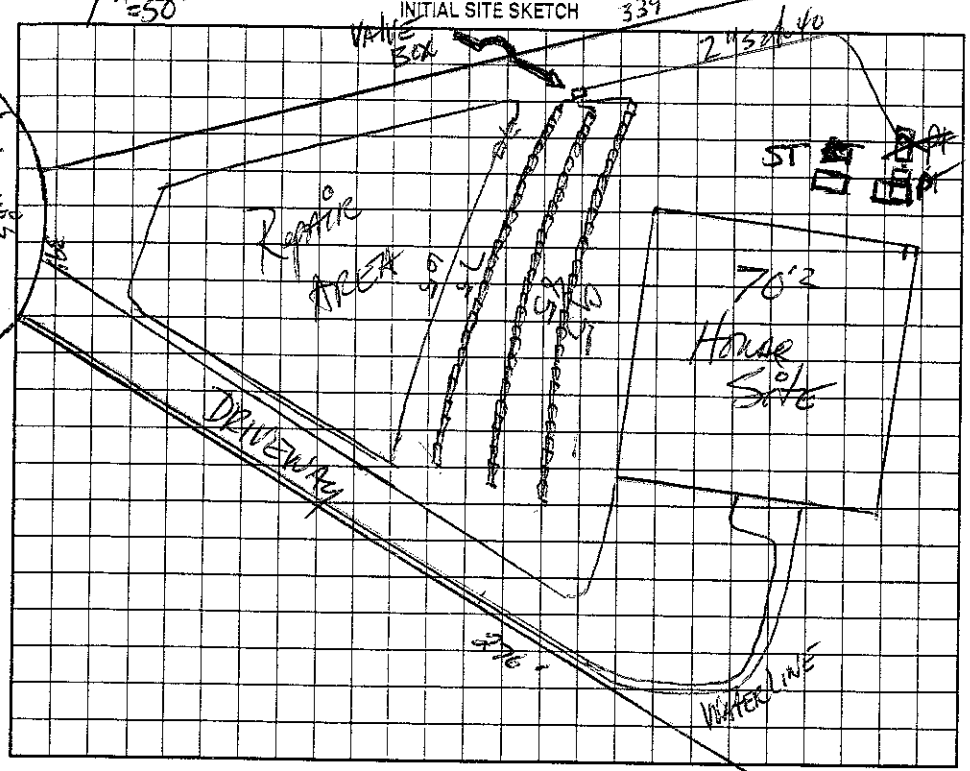
☐ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees
☐ Other
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☑ Community

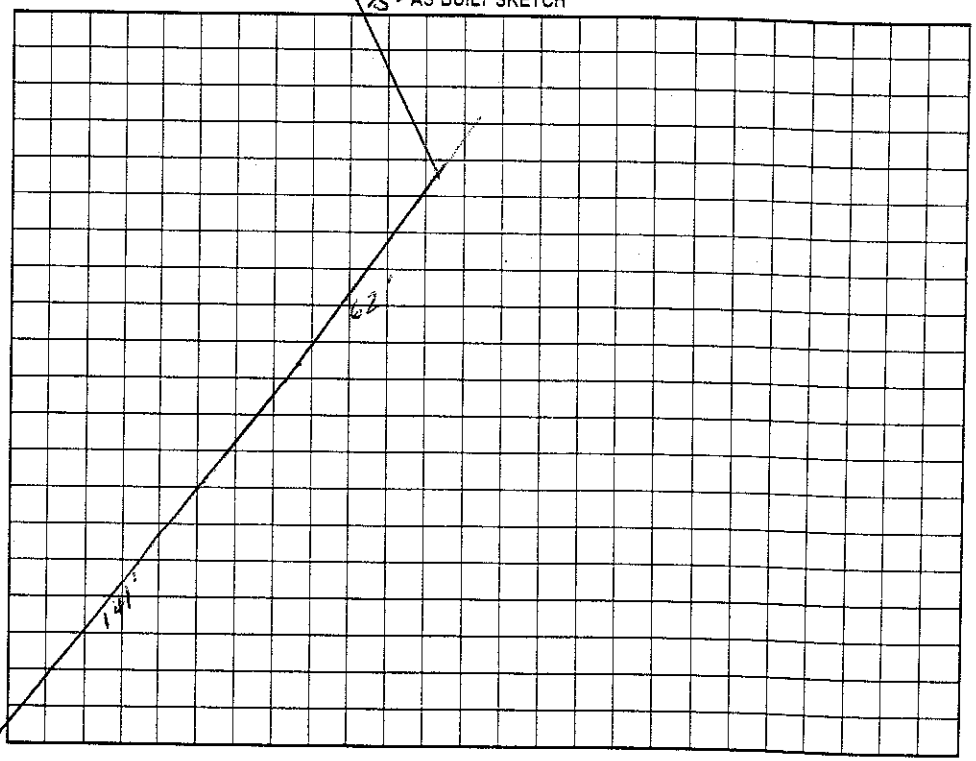
Comments:/Conditions: OR 36" MAX 9'oc

Comments:/Conditions: Checked tanks & lines 7/14/05
See "As Built" Drawing

1"=50' INITIAL SITE SKETCH



AS BUILT SKETCH



Permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: [signature] date 2/6/03 Installed by: R & H

Improvement Permit by: Mark R. Harrison RS date 2-6-03 Operation Permit by: Marina A. Dotson RS date 1/12/06

Authorization to Construct by: [signature] RS date 3/24/05 Existing System Inspection by: date

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK