122235

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 101233 PIN# 4625-94-1684.830 GM Helms DATE Oct 2,01

OWNER OR CONTRACTOR Crescent Resources Inc. / Brookshire Const. PHONE: Business Home

ADDRESS P.O. Box 1003, Charlotte N.C.

LOCATION Brawley Sch Rd. TR Lightship Dr. TL Swayne St on Right at site / Thurston Ct

SUBDIVISION The Point BLOCK / SECTION 8 LOT 830 LOT AREA 65,731 ft2 SITE CLASS. PS DESIGN FLOW 480 gpd L.T.A.R. .3

Septic Tank: 1000-1500 Gallons; STB 338 Date 6-30-04 ☑ New System ☐ Repair System Type: I, II, III, IV, V, VI

Pump Tank: 1000 Gallons; PT 27 Date 7-21-04 System Description: PM Innovative-25% Red

Pump Make: Model Serial No. Repair System Description: LPP PBPS

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400 Maintenance Agreement Required: ☐ Yes ☑ No initially

No Lines 30 @ 34' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☐ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees

☐ Other

☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

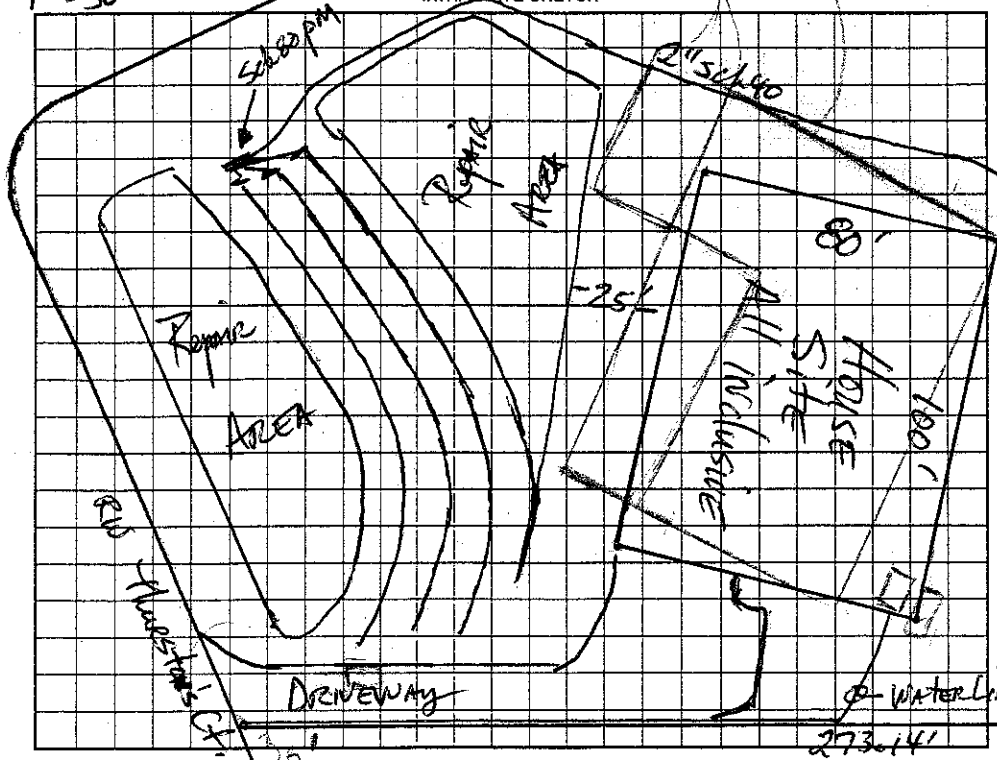
Water Supply: ☐ Individual ☑ Public ☑ Community

Comments/Conditions:

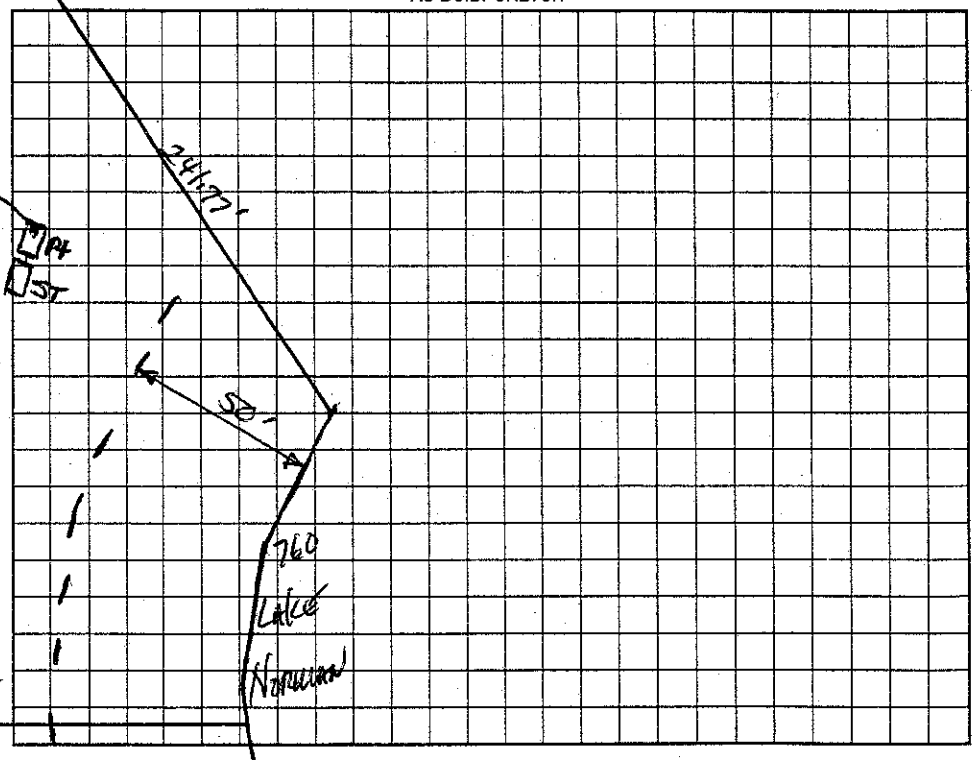
Comments/Conditions: Note: Permit Switched From Brookshire to GM Helms

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: date 10/10/01

Improvement Permit by: date 10-2-01

Authorization to Construct by: Wesley Sparks R.S. date 11/4/03

Installed by: R & H R.S.

Operation Permit by: Mark H. Dobson date 3/30/05

Existing System Inspection by: date

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