10:00

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 109530 PIN# 4624-27-5705 .1116 4624-57-8813 DATE Jan 27,03

OWNER OR CONTRACTOR Crescent Resources clo Jeff Pinton Norman HHZ PHONE: Business _____ Home _____

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

LOCATION Brawley Sch Rd. TL Torrence Chapel TL Shelburne on Right

SUBDIVISION The Point BLOCK / SECTION II LOT 1116 LOT AREA 34,327sf SITE CLASS RS DESIGN FLOW 460gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 338 Date 6-28-04
Pump Tank: 1000 Gallons; PT 27 Date 7-6-04
Pump Make: Goulds Model WE03J2M16 Serial No. 4-13-04
Nitrification Field: No Fields 1 Square Feet 540/810 Linear Feet 270
No Lines 4 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: LPPPBPS
Repair System Description: LPPPBPS
Maintenance Agreement Required: ☑ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees ____
☐ Other ____

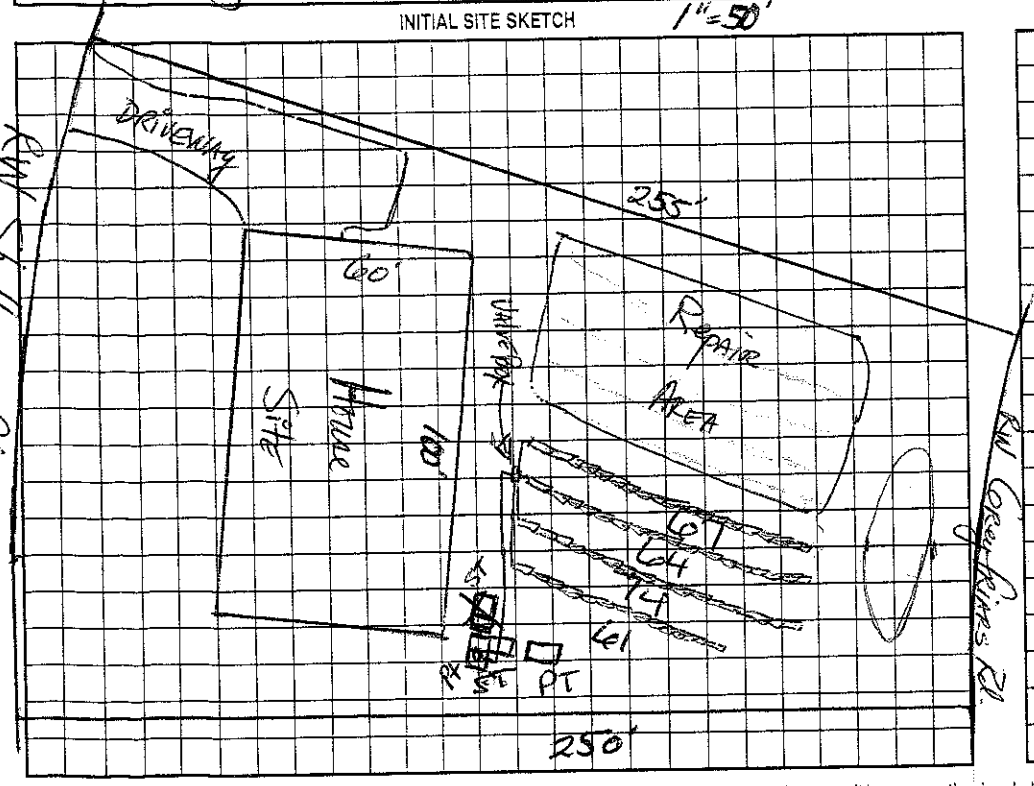
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ~~☐ Public~~ ☑ Community

Comments:/Conditions: OR 36" max 9'oc
Renewed Building plans & Site plans 3/24/04
Essentially in Compliance with IP.

Comments:/Conditions: Checked tanks & lines 8/27/04 MP
Pressure, ~~Elect~~ & Alarm 9/23/04 MP
Elect needs to be changed

INITIAL SITE SKETCH 1"=50'



AS BUILT SKETCH

Installed essentially as Drawn

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 4/8/03 Installed by: Bobby Mayhew RS

Improvement Permit by: _____ date Jan 27,03 Operation Permit by: _____ date 9/23/04

Authorization to Construct by: _____ date 3/24/04 Existing System Inspection by: _____ date _____

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