4625-28-7075

IREDELL COUNTY HEALTH DEPARTMENT Const. Auth. STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / ~~CERTIFICATE OF COMPLETION~~ / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 24379 DATE Aug. 26, '96 TAX MAP NO. part of 2CA3 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR Crescent Resources thru Whitley & Co. PHONE: Business 455-7725 Home 361-9880

ADDRESS PO Box 1003, Charlotte

LOCATION Brawley Sch Rd. TR Bay Harbour RD. TR ~~Hamlet Pt. Ln.~~ TL Pointe Harbour Ln. on left @ cul-d-sac

SUBDIVISION The Harbour BLOCK / SECTION 5 LOT 35 LOT AREA 35,318 ft² SITE CLASS. PB pg. 1956 DESIGN FLOW 480 gpd L.T.A.R. n.a.3

Septic Tank: 1000 Gallons; STB 794 Date 2/02

Pump Tank: 1000 Gallons; PT 293 Date 2/02

Pump Make: HYDROMATIC Model SHEF50A1 Serial No. 10/15/2001

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4@100' Trench Width 36" Max Trench Bottom Depth ± 30" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, (III), IV, V, VI

System Description: pump-out-for-chambered

Repair System Description: Same

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms 4 No. Employees ____

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

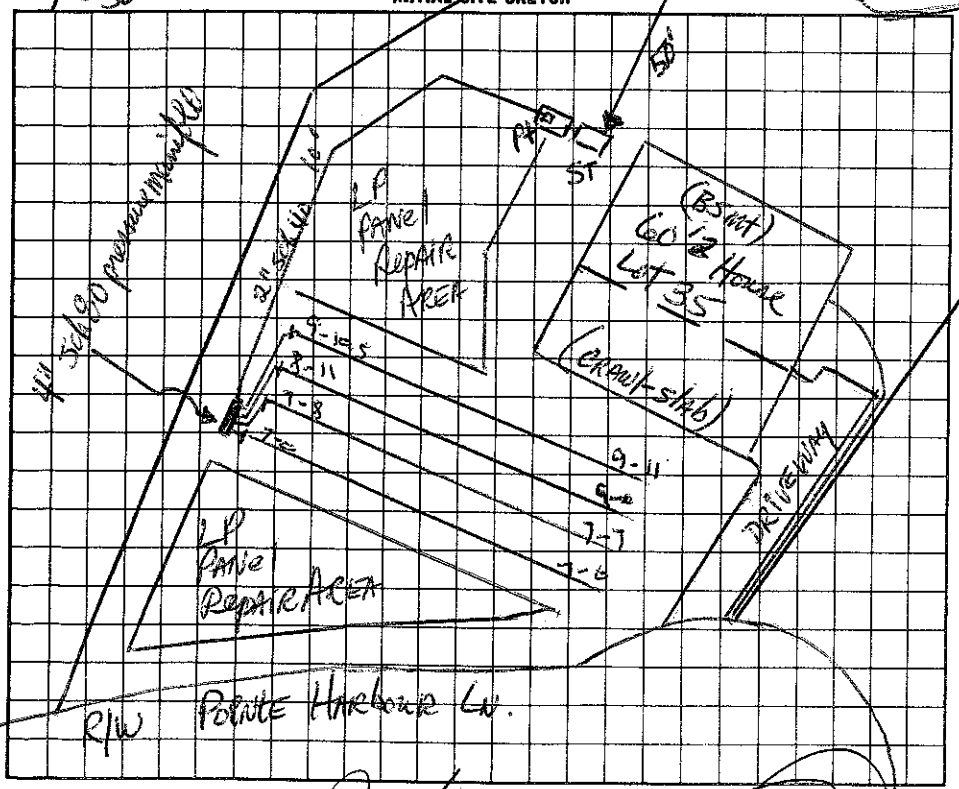
Water Supply: ☐ Individual ☐ Community ☑ Public

Comments:

Comments: (PARTIAL) Reviewed Building plans 8/30/2001 MD Essentially in Compliance with Permit. Bonus room is ~~not~~ bedroom. House will be tilted slightly.

1"=50'

INITIAL SITE SKETCH



AS BUILT SKETCH

I understand that this 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.

Signed: [signature] (Agent)

Improvement Permit by: [signature] RS date 8-26-96

~~Construction/Existing System Inspection by:~~ [signature] RS date 8-30-2001

Installed by: Curt Dunning RS

Certificate of Completion by: [signature] RS date 8/12/02

Operation Permit by: [signature] date 8/15/02

~~Authorization~~ HEALTH DEPT. COPY: WHITE INSPECTION COPY (FINAL): GREEN OWNER COPY (FINAL): YELLOW INSPECTION COPY (INITIAL): PINK OWNER COPY (INITIAL): GOLD