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. 065645 DATE July 7 '97 TAX MAP NO. 4625341684 (pt.) 4625 29 1878 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR Crescent Resources Inc // Bill Whitley PHONE: Business _____ Home _____

ADDRESS PO Box 1003 Charlotte LOCATION Brawley Sch Rd TR Bay Harbour TR Shipyard Pt TR Cedar Bluff on Right

SUBDIVISION The Harbour BLOCK / SECTION C LOT 30/30A LOT AREA 1 / 26,858+/- SITE CLASS. PS DESIGN FLOW 480 gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 744 Date 5/28/02 ☑ New System ☐ Repair System Type: I, II, (III), IV, V, VI

Pump Tank: 1000 Gallons; PT 283 Date 7/30/02 System Description: pumped-pm-chamber

Pump Make: MYERS Model ME-50511 Serial No. 2532506097 Repair System Description: None

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

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

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

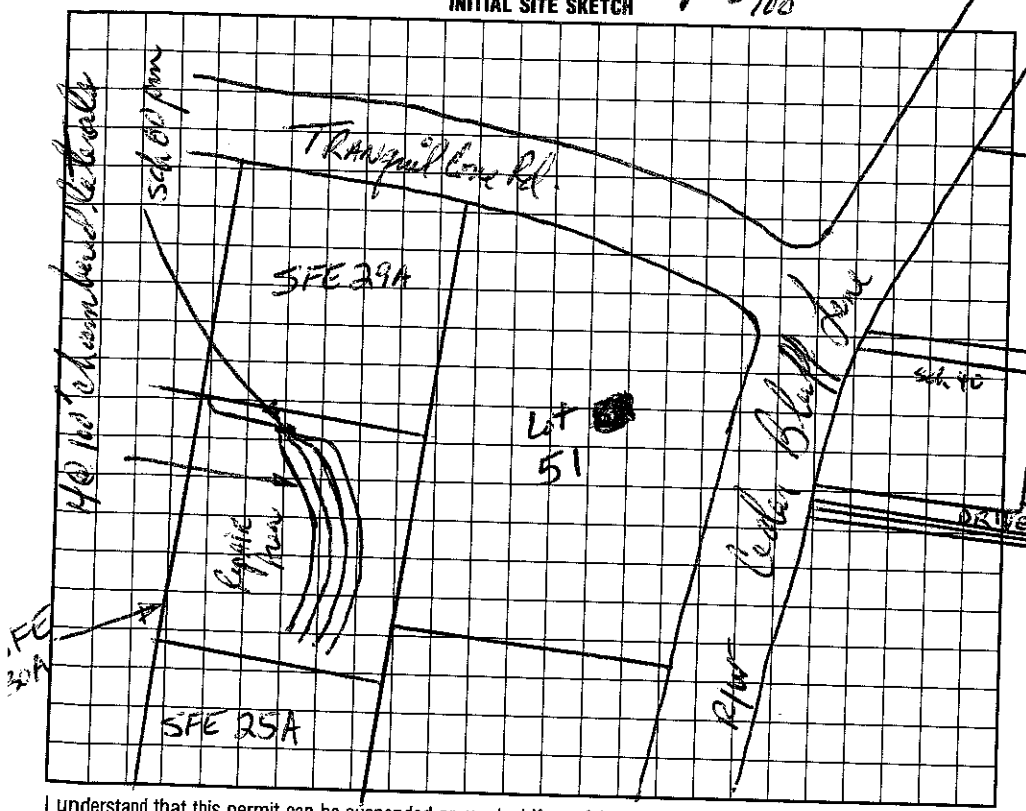
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Community ☐ Public

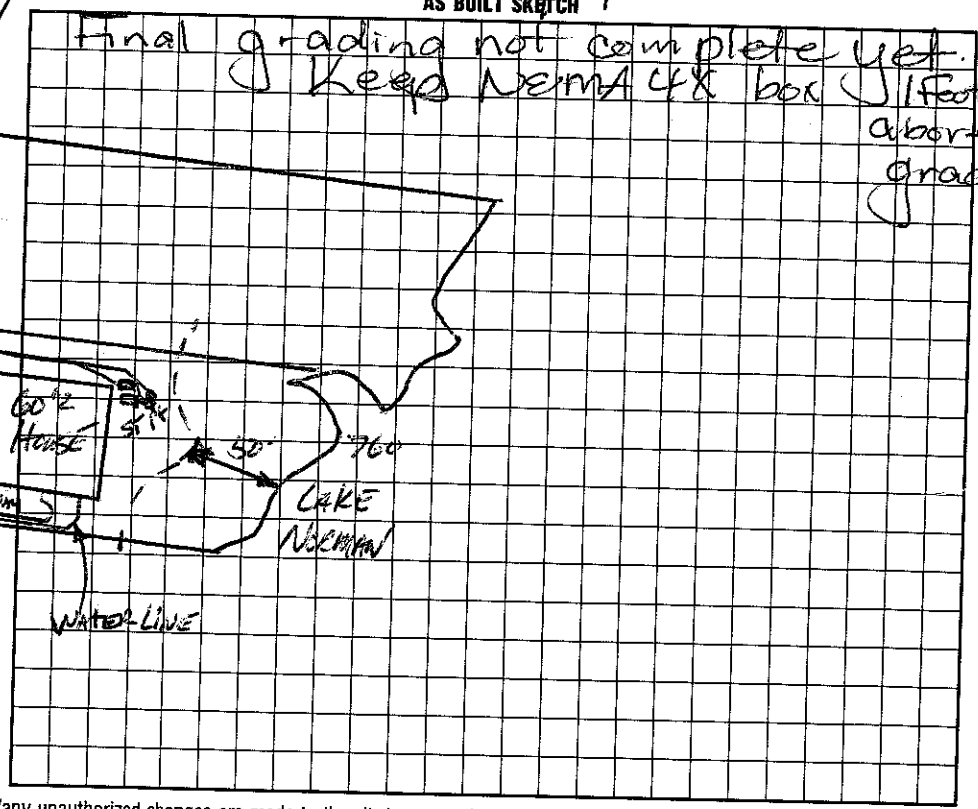
Comments:
4-10-01 Removed house site plan; appears in compliance w/ I.P. JHH

Comments: Tanks, lines & pressure checked by WS. lines 6/27/02 Tanks & press. 9/4&9/5/02 Alarm & elect. 9/19/02

INITIAL SITE SKETCH 1" = 100'



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. Improvement Permit is valid for 60 months from date of issuance.

Signed: X

Improvement Permit by: D Johnson, RS date 7-7-97

~~Existing System Inspection~~ CONSTRUCTION AUTHORIZATION by: D Johnson, RS date 4-10-01

Installed by: Cent Dumps

Certificate of Completion by: Malia H Dotson RS date 9/19/02

Operation Permit by: Malia H Dotson RS date 9/19/02

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