IREDELL COUNTY HEALTH DEPARTMENT

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

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

PROPERTY DESCRIPTION NO. 065691 DATE July 7, '97 TAX MAP NO. 4625941684 (pt.) 4625298387 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR Crescent Resources Inc PHONE: Business _____ Home _____ LWBRCA

ADDRESS PO Box 1003 Charlotte

LOCATION Brawley School Rd TR Bay Harbour TR Shipyard Pt TR Cedar Bluff TR Tranquil Cove at end on Right

SUBDIVISION The Harbour BLOCK / SECTION 6 LOT 47 LOT AREA 25533+ SITE CLASS 4S DESIGN FLOW 480gpd L.T.A.R. .03

Septic Tank: 1000 Gallons; STB 794 Date 8/20/99

Pump Tank: 1000 Gallons; PT _____ Date 8/1/99

Pump Make: _____ Model _____ Serial No. _____

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

No Lines 4@100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NR

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

System Description: pumped-pressurized

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

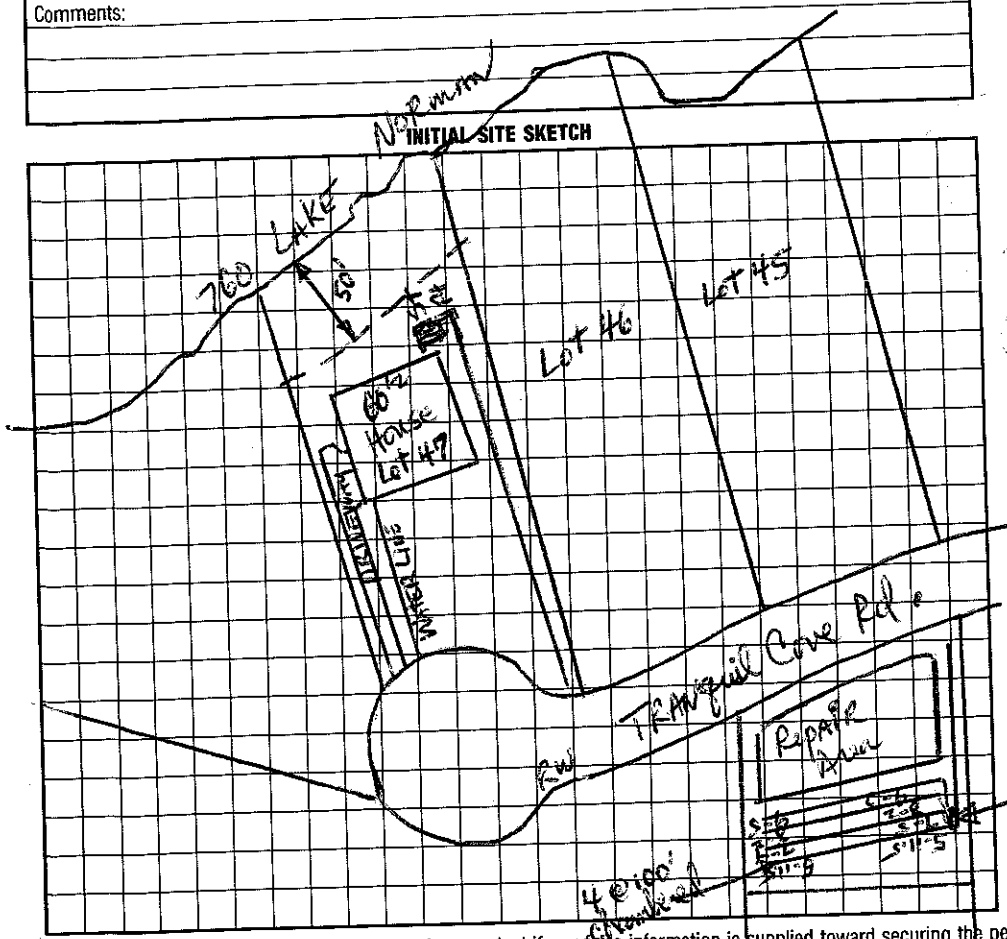
Water Supply: ☐ Individual ☑ Community ☐ Public

Comments:

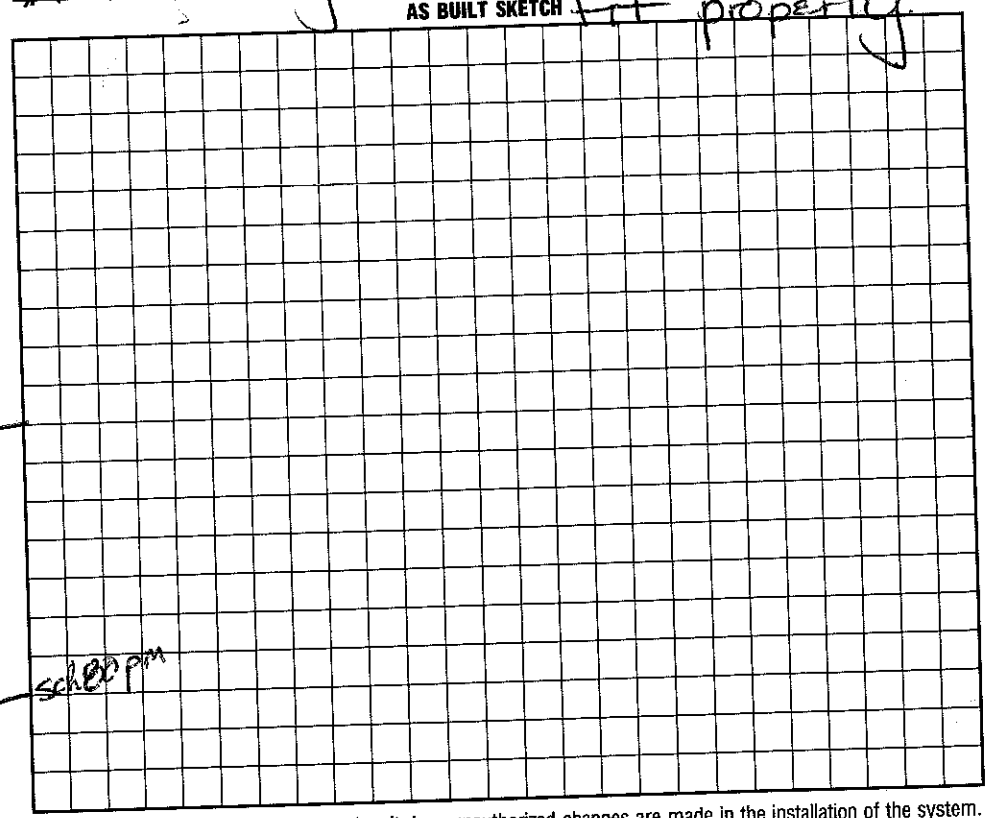
Comments: Building plans & site map reviewed. MD

*Need to adjust cover on NEMA Box (Electrical) to fit properly.

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

Signed: _____

Improvement Permit by: D.R. Thurman REHS date 7-7-97

Existing System Inspection by: Maria H.H. Dotson R.S date 5/12/99

Installed by: Larry Beam

Certificate of Completion by: Maria H.H. Dotson R.S date 11/15

Operation Permit by: Maria H.H. Dotson R.S date 11/

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