As Built attached

IREDELL COUNTY HEALTH DEPARTMENT

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

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

DATE October 1, 01

PERMIT# 101225 PIN# 4625-94-1684.824 4625500616

OWNER OR CONTRACTOR Crescent Resources Dve. / Gm Helms PHONE: Business _____ Home _____

ADDRESS P.O. Box 1003, Charlotte NC 28201

LOCATION Brawley Sch Rd. TR Lightship DRIVE on Right

SUBDIVISION The Point BLOCK / SECTION 8 LOT 824 LOT AREA 49714ft² SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 338 Date 7-22-05

Pump Tank: 1000 Gallons; PT 283 Date 7-29-05

Pump Make: Myers Model ME 50 Serial No. _____

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

No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth _____

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

System Description: PM - Innovative -25% Red.

Repair System Description: LD. ~~Same~~ Panel Blk

Maintenance Agreement Required: ☐ Yes ☑ No

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

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

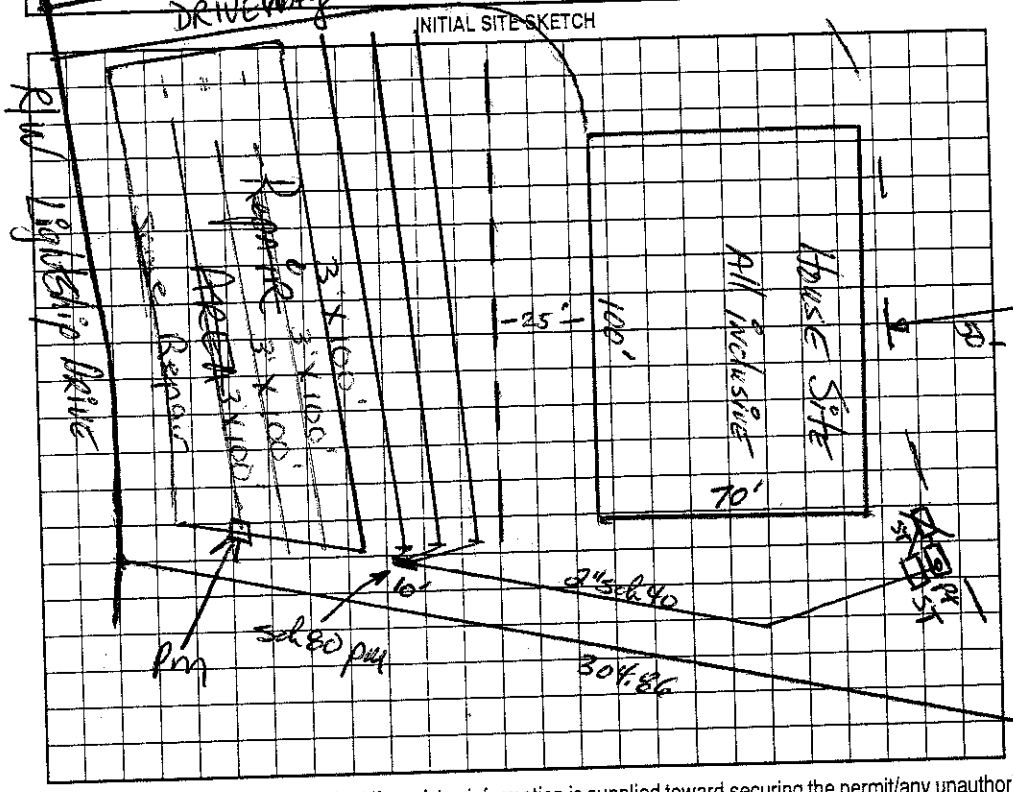
No. Bedrooms 4 No. Bathrooms 4 No. Employees _____

Water Supply: ☐ Individual ☑ Public ☑ Community

Comments:/Conditions: 1"=50'

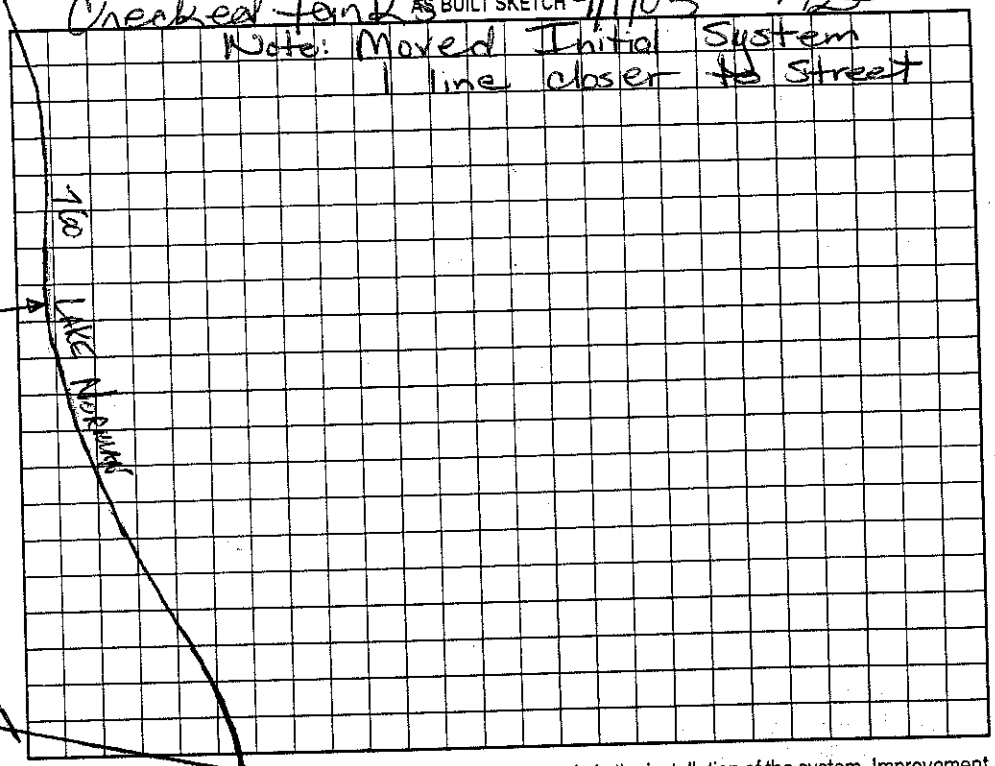
Comments:/Conditions: Reviewed House plans & site plan 10/27/04; essentially in Compliance with I.P. Installed in 4-100' lines, Checked lines & Checked tanks

INITIAL SITE SKETCH



AS BUILT SKETCH 9/1/05 MD

Note: Moved Initial System 1 line closer to Street



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 10/1/01

Improvement Permit by: _____ date 10-1-01

Authorization to Construct by: _____ date 10/27/04

Installed by: R&H RS date 11/9/05

Operation Permit by: _____ date _____

Existing System Inspection by: _____ date _____

OWNER COPY (INITIAL): PINK