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IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 094944 PIN# 4625 94 1684 (pt) 4625528465 DATE June 14, 01

OWNER OR CONTRACTOR Crescent Resources Inc. / Augusta Homes PHONE: Business _____ Home _____

ADDRESS P.O. Box 1003 Charlotte NC 28201

LOCATION Brawley Sch Rd. TR Asheboro TL Rehoboth on Right

SUBDIVISION The Point BLOCK / SECTION 7 LOT 723/723A LOT AREA 36153 + 21524 ft² SITE CLASS. PS SFE DESIGN FLOW 480 gpd L.T.A.R. 0.25

Septic Tank: 1000 Gallons; STB 338 Date 1-4-01
Pump Tank: 1000 Gallons; PT 27 Date 12-17-06
Pump Make: Myers Model P102 Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1500 Linear Feet 500
No Lines 6 Trench Width 36" Trench Bottom Depth 36" Gravel Depth NA

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: 9m- INNOVATIVE - 25% Red. on
Repair System Description: LP INNOVATIVE 723A
Maintenance Agreement Required: ☐ Yes ☑ No

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

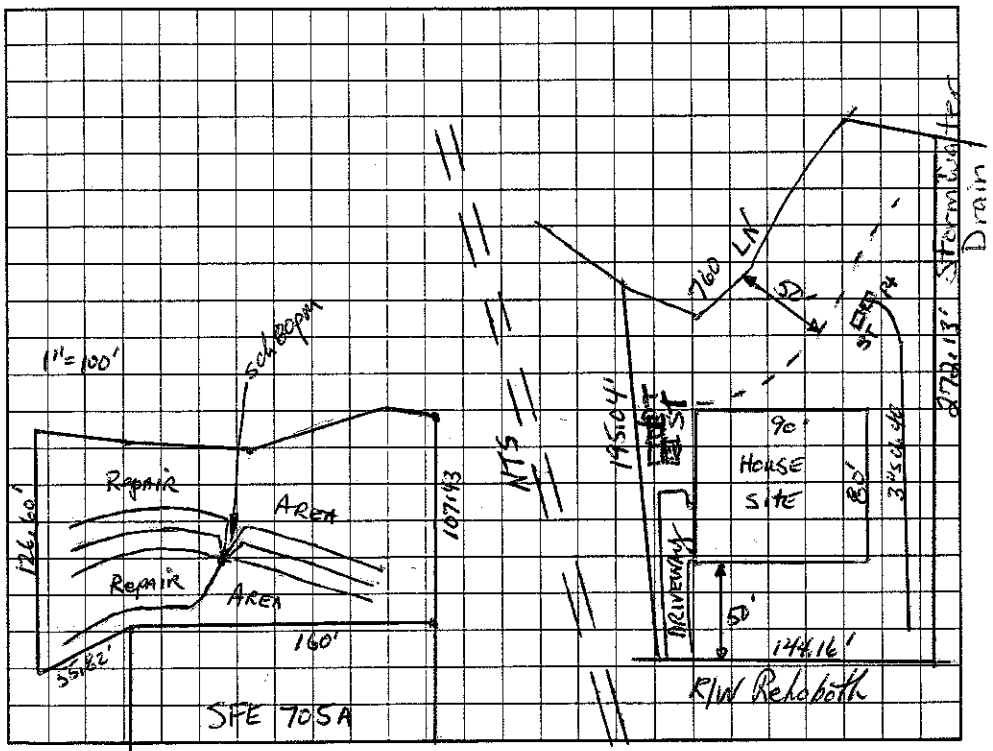
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☑ Community

Comments/Conditions: 36" Minimum trench bottom depth.

Comments/Conditions: 8/25/06 Checked EZ Flow lines
2/8/07 Moved tanks to other side due to Storm drain

INITIAL SITE SKETCH



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 6-15-01 Installed by: R&H

Improvement Permit by: _____ date 6-14-01 Operation Permit by: Wesley Sparks RS. date 4/9/07

Authorization to Construct by: _____ RS date 4/10/06 Existing System Inspection by: _____ date _____

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