IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 200.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 20746 PIN# ~~4625-64-6654-PT~~ 4625-63-0892 DATE 4/25/01

OWNER OR CONTRACTOR CRESCENT RESOURCES / ELROD CUSTOM HOMES PHONE: Business _____ Home _____

ADDRESS PO BOX 100 3 CHARLOTTE NC 28201

LOCATION BRANLEY SCHOOL - TR STONEWALL BEACH TR STANDISH - ON RT 142 Standish 700

SUBDIVISION POINT BLOCK / SECTION 6 LOT 618 LOT AREA 5821 ft± SITE CLASS. PS DESIGN FLOW 600 L.T.A.R. .3600/FT±

Septic Tank: 1500 Gallons: STB 338 Date 11/30/01

Pump Tank: 1500 Gallons: PT 338 Date 11/4/01

Pump Make: Gowlds Model WE67 1/2 HU Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 400

No Lines 4@100' Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: LP PANEL

Repair System Description: SAME

Maintenance Agreement Required: ☑ Yes ☐ No

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

No. Bedrooms 5 No. Bathrooms 6 No. Employees _____

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

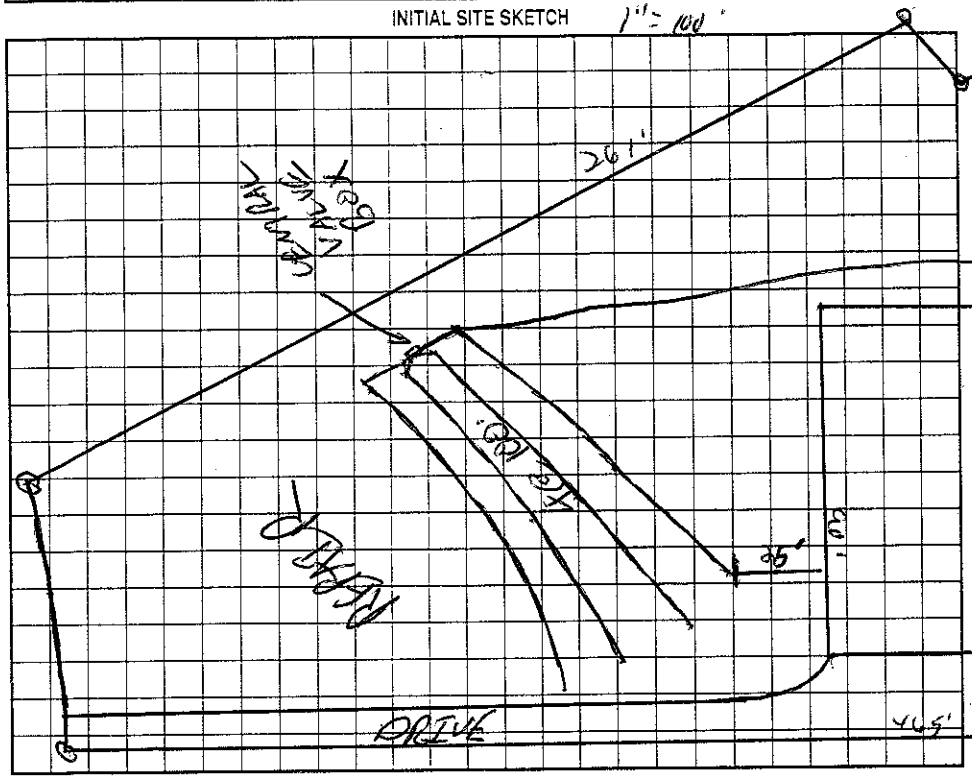
Water Supply: ☐ Individual ☐ Public ☑ Community

Comments:/Conditions: Jon Elrod -

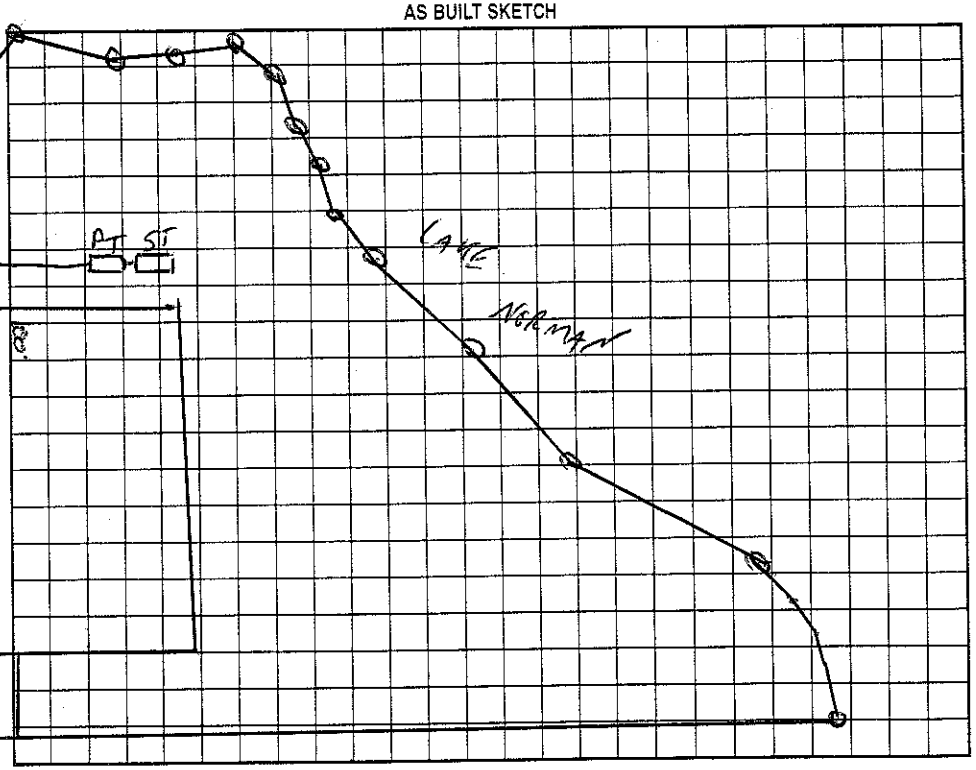
Comments:/Conditions:

1/11/02 - Soil to be reduced over S/T and P/T to a suitable depth according to Elrod Homes - Aws

INITIAL SITE SKETCH 1" = 100'



AS BUILT SKETCH



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 _____

Improvement Permit by: C. Zan RS date 4/25/01

Authorization to Construct by: C. Zan RS date 4/25/01

Installed by: Orbison & Sons Inc.

Operation Permit by: RS date 5/23/02

Existing System Inspection by: _____ date _____

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