IREDELL COUNTY HEALTH DEPARTMENT

4625 69 6977

TROUTMAN 704-528-5305 STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PROPERTY DESCRIPTION NO. 18383 DATE JULY 12 1994 TAX MAP NO. PT OF 2C A3 Watershed: ☒ Yes ☐ No LN

OWNER OR CONTRACTOR CRESCENT RESOURCES INC PHONE: Business _____ Home _____

ADDRESS PO BOX 1004 CHARLOTTE NC 28201

LOCATION entrance on west side of SR1100 ¼ mi south of SR1177 is Bay Harbour Rd, left onto Lake Mist Dr., left onto Jonquil Ct

SUBDIVISION The Harbour BLOCK / SECTION 1 LOT 6 LOT AREA 21,780 SITE CLASS. P DESIGN FLOW 480 L.T.A.R. 0.3

Septic Tank: 1000 Gallons; STB 794 Date 11/21/96

Pump Tank: 1000 Gallons; PT 37 Date 1/6/97

Pump Make: HYDROMATIC Model SHEF 50A1 Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1600 eq. Linear Feet 267

No Lines 5 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: LPP PPBPS

Repair System Description: OFF-SITE - SEE ATTACHED

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

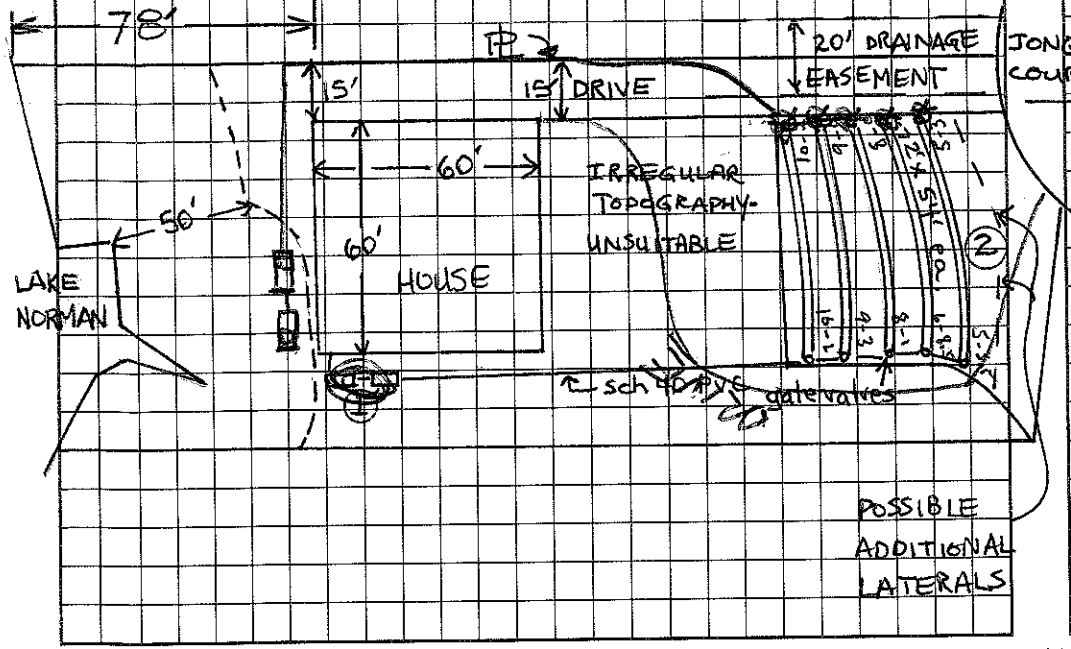
Water Supply: ☐ Individual ☒ Community ☐ Public

Comments: (1) check valve after quick release joint. Floats on float tree. lift station design per 1952. (2) 2" sch 40 PVC distribution line. one 3/16" hole per panel. Total 62 panels, 12 per lateral. distribution lines terminated in valve boxes finished at grade. 2' pressure head

Comments: 2/27/97 - Drainfield approved - AWS. 8" downstream

DEVELOPED TO PERMANENT

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: Terry Watson, Agent Wesley Sparks 9/4/95

Improvement Permit by: Andrea Lemon Wesley Sparks date 7/13/94

Existing System Inspection by: _____ date _____

Installed by: Macleod Const Co.

Certificate of Completion by: Wesley Sparks RS. date 5/5/97

Operation Permit by: Wesley Sparks RS date 5/5/97

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