IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 142315 PIN# 4625740180, Brian Hall DATE 6-8-07

OWNER OR APPLICANT Simonini Builders Inc/ PHONE: Business 358-9940 ~~Home~~ Cell (704) 309-3253

ADDRESS 1900 South Blvd Ste #200 Charlotte, NC 28203

LOCATION Brawley School Rd TR, Stonewall Beach on left

SUBDIVISION Point BLOCK / SECTION 6 LOT 628 LOT AREA ~~0.2848~~ Acre SITE CLASS. P5 DESIGN FLOW 600gpd L.T.A.R. .25gpd

Septic Tank: 1500 Gallons; STB 4441 Date 3-22-08 [X] New System [ ] Repair [ ] Expansion System Type: I II III IV V VI [X] House/Mod. Home No. Bedrooms 5 Water Supply: [ ] Individual

Pump Tank: 1500 Gallons; PT 417 Date 3-15-08 System Description: Pump-Lt-Panel Blk [ ] Mobile Home No. Persons ___ [X] Public [X] Community

Pump Make: Myers Model ME50 Serial No. ___ Repair System Description: Same [ ] Business No. Employees ___

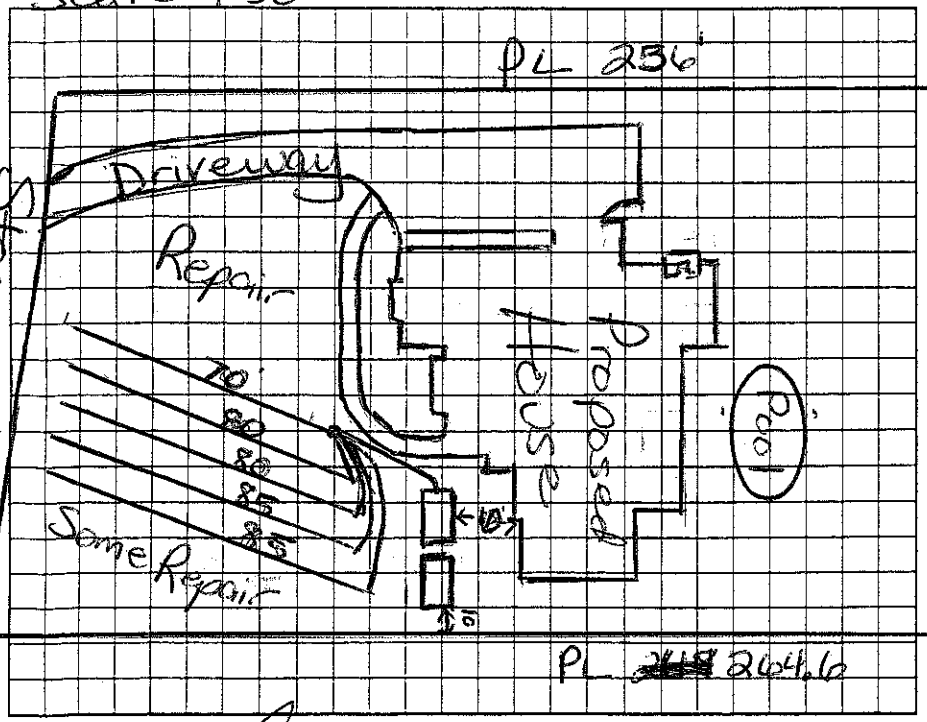
Nitrification Field No. Fields 1 Square Feet 1200 Linear Feet 400' Maintenance Agreement Required: [X] Yes [ ] No [ ] Other ___

No Lines 5 Trench Width ~~X~~ See Note Max Trench Bottom Depth 36" Gravel Depth N/A [ ] Gravity [X] Pressure [ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

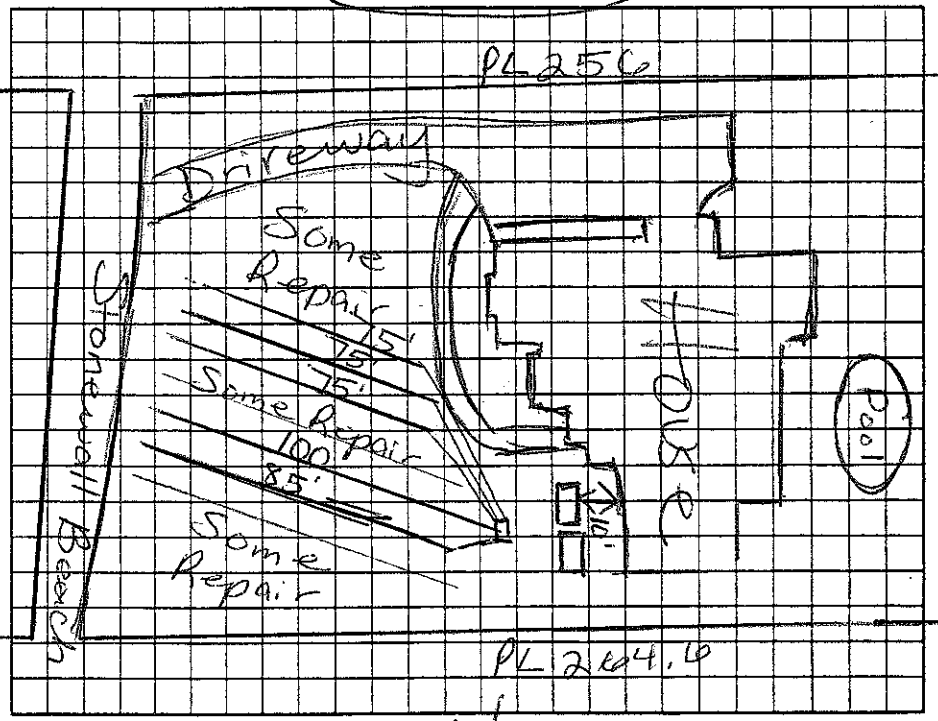
Comments/Conditions: Note: Use trench width as Specified in Crescent Communities Manual

Comments/Conditions: 6/6/08 Checked tanks

Scale 1:50' INITIAL SITE SKETCH



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: [signature] date 6/8/07 Installed by: [signature] RS

Improvement Permit by: [signature] RS date 6/8/07 Operation Permit by: [signature] date 11/18/2008

Authorization to Construct by: [signature] RS date 6/8/07 Existing System Inspection by: ___ date ___

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