IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 82353 PIN# ~~4625944654 PT~~ 4625-78-7173 DATE 1/13/00

OWNER OR CONTRACTOR CRESCENT RESOURCES/DIGNST CUSTOM PHONE: Business 663 6905 Home

ADDRESS PO BOX 1003 CHARLOTTE NC 28202

LOCATION BRAWLEY SCHOOL RD - TR MARSONS MILL - TL WHITE HORSE - TL BALLSTINE ON FT

SUBDIVISION POINT BLOCK / SECTION 4 LOT 430 LOT AREA .58269 SITE CLASS. PS DESIGN FLOW 480 GPD L.T.A.R. .25 GAD/FT²

Septic Tank: 1000+ Gallons; STB 338 Date 5-12-02

Pump Tank: 1000 T Gallons; PT 238 Date 2-14-02

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 940 Linear Feet 330

No Lines 4 Trench Width 36" 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 No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees

☐ Other

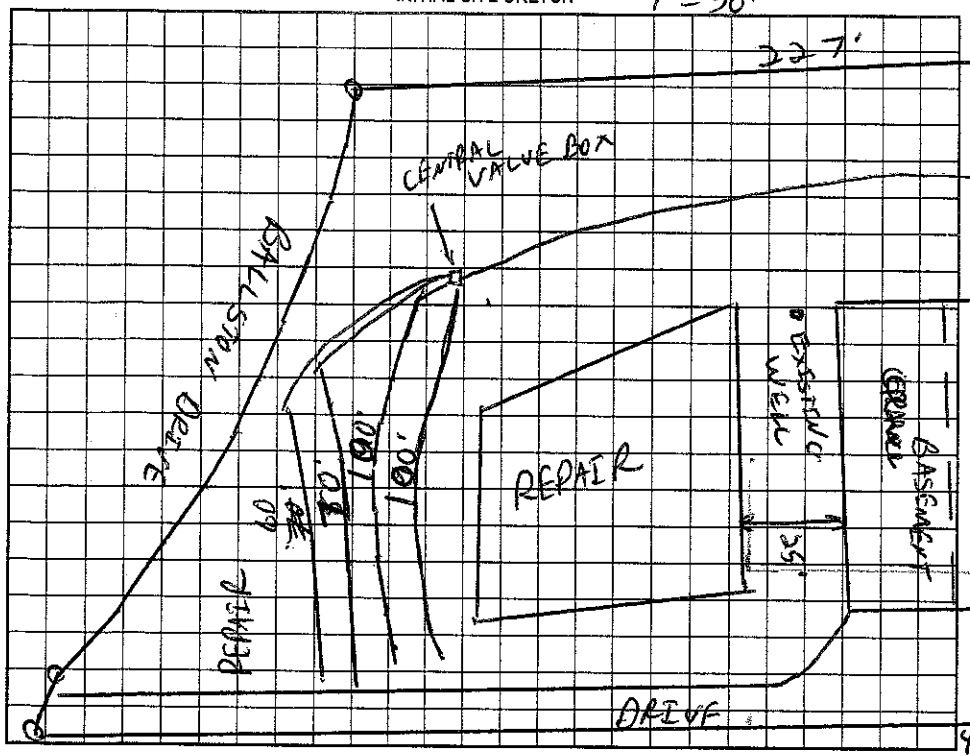
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☑ ~~Community~~

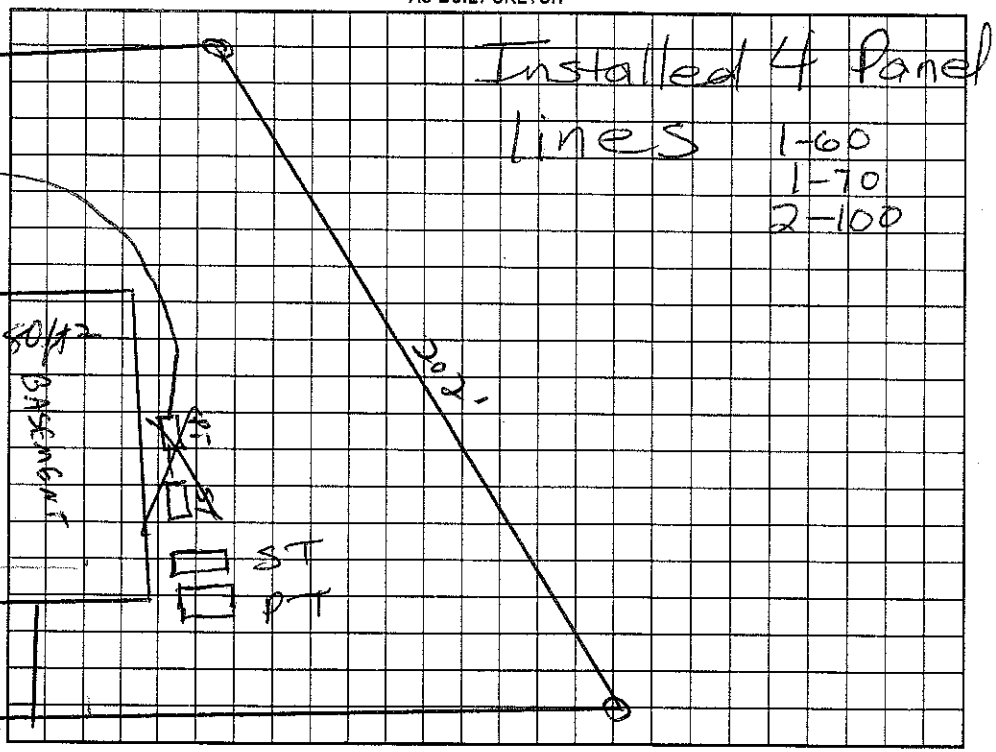
Comments:/Conditions: WELL IS TO BE ABANDONED PROPERLY BEFORE OPERATIONS PERMIT CAN BE ISSUED.
REMOVE ALL TERRACES AND BERMS.

Comments:/Conditions: REMOVE OLD TERRACES AND BERMS
Checked tanks & lines

INITIAL SITE SKETCH 1"=50'



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 1-25-02 Installed by: R & H Inc

Improvement Permit by: RS date 1/13/00 Operation Permit by: date 7/30/02

Authorization to Construct by: RS date 1/1/02 Existing System Inspection by: date

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