$125 4625865473

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 081174 (128739) PIN# 4625944684 (pt) DATE June 22, 99

OWNER OP. CONTRACTOR Crescent Resources aka The Point on Norman PHONE: Business 660-1165 Home

ADDRESS 2214 Brawley Sch Rd. Mooresville

LOCATION Brawley Sch Rd. TR Polaris Road on Right

SUBDIVISION The Point BLOCK / SECTION 5 LOT 510 LOT AREA 39,574 SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .3

Septic Tank: 1000+1500 Gallons; STB 338 Date 9/4/05

Pump Tank: 1000 Gallons; PT 283 Date 8/30/05

Pump Make: Goulds Model 3CP5 5121HU Serial No 6055440

Nitrification Field: No. Fields 1 Square Feet 1200 Linear Feet 400

No. Lines 5@80' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: DM - Innovative - 25% Reduction

Repair System Description: LP Panel Block

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms 4 No. Bathrooms 4 No. Employees

Water Supply: ☐ Individual ☑ Public ☐ Community

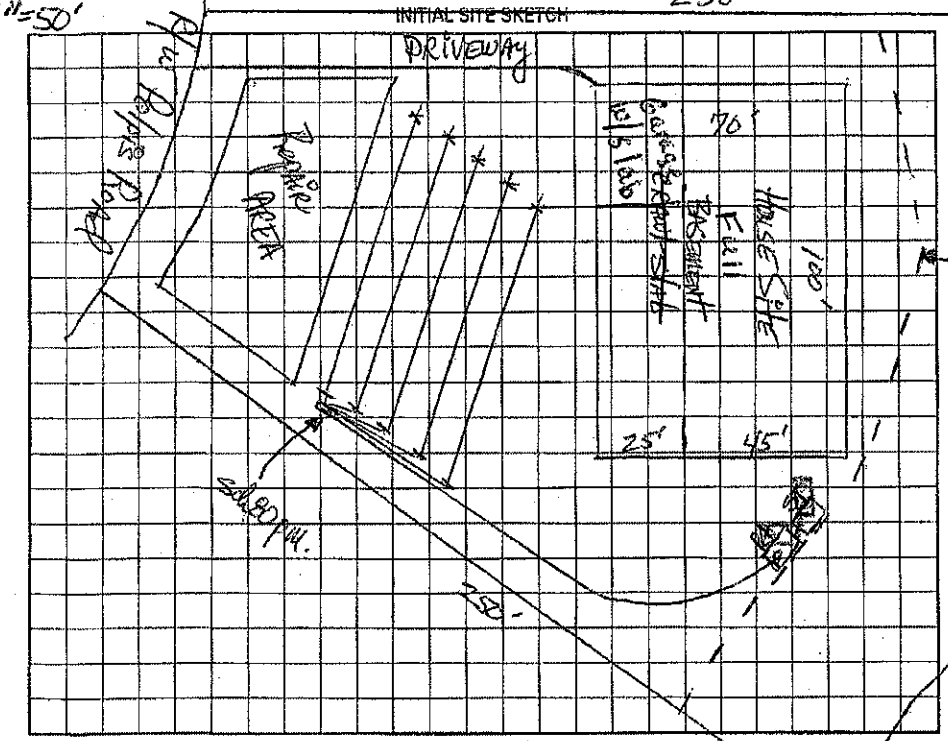
☑ Slab ☑ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Comments/Conditions: *ONE Inspection port per Lateral
Remove old terraces.

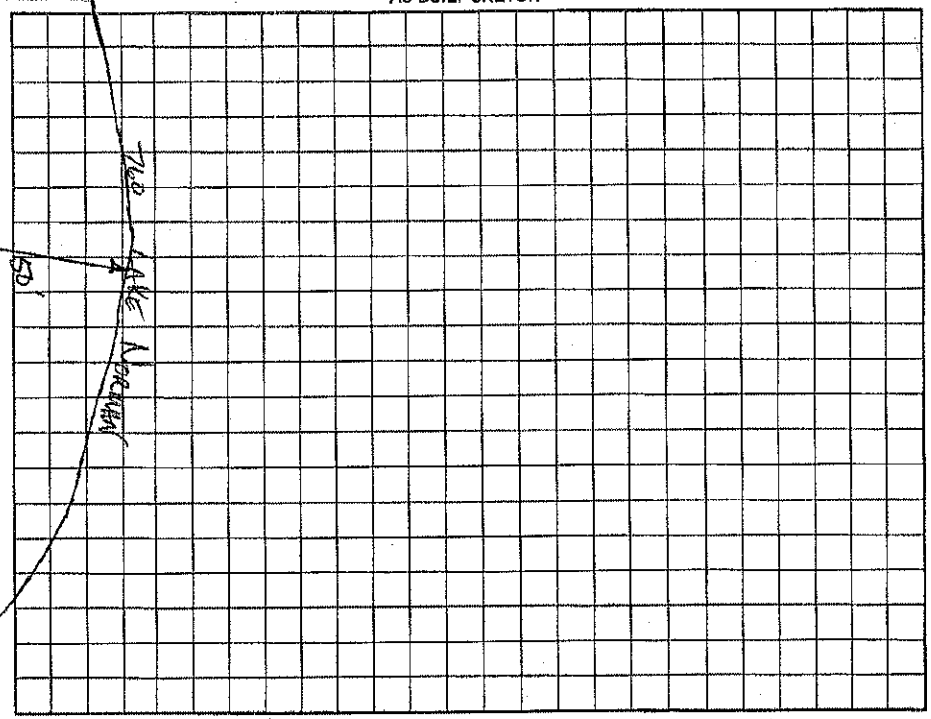
Comments/Conditions: (partial)
Installed Quick 4 5 x 80' as per initial site sketch. 27' from foundation drain to drain field

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: _____ date _____ Installed by: Onbourson + Sons

Improvement Permit by: _____ date 6-22-99 Operation Permit by: Wesley Sparks R.S. date 2/9/06

Authorization to Construct by: _____ date 4/22/05 Existing System Inspection by: _____ date _____

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