IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 073862 / 136226 PIN# ~~4625944684~~ 4625955609.000 DATE Oct. 15, '98

OWNER OR CONTRACTOR Crescent Resources Inc. / Dienst Builderz PHONE: Business _____ Home _____

ADDRESS P.O. Box 1003, Charlotte

LOCATION Brawley Sch Rd. TR Chatham Road immediately on Right

SUBDIVISION The Point BLOCK / SECTION 1-B LOT 2 LOT AREA 63,549 ft² SITE CLASS. PS DESIGN FLOW 460gpd L.T.A.R. .03

Septic Tank: 1000+ Gallons; STB 338 Date 11-28-06
Pump Tank: 1000 Gallons; PT 27 Date 1-19-07
Pump Make: Myers Model ME50052 Serial No. _____
Nitrification Field: No fields 1 Square Feet 1200 Linear Feet 400
No Lines 4@100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

☑ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: pumped-pm- 25% Reduction
Repair System Description: LP Panel Block
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

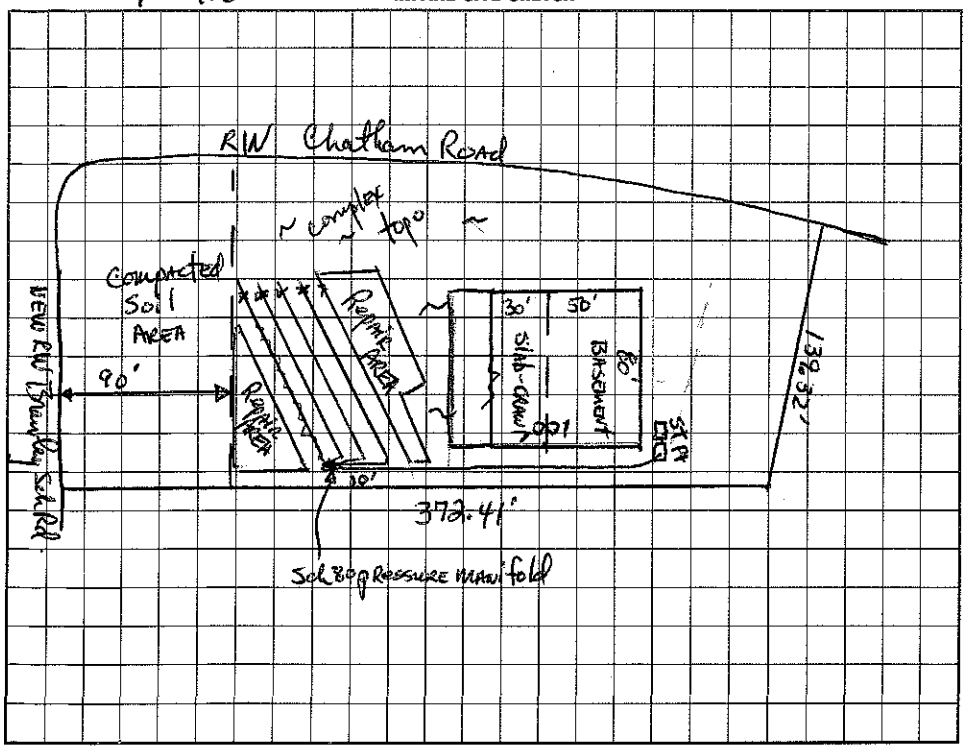
Water Supply: ☐ Individual ☑ Public ☑ Community

Comments:/Conditions: Remove any old burnes, terraces
* ONE INspection port per LATERAL.

Comments:/Conditions (PARTIAL) Checked lines 7/12/06
Checked tanks 2/23/07

1" = 100'

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed EZ Flow as Drawn

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 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 10/15/98 Installed by: R&H RS

Improvement Permit by: _____ date 10-15-98 Operation Permit by: _____ date 4/23/07

Authorization to Construct by: _____ date 6-2-06 Existing System Inspection by: _____ date _____

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