IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 078212 / 114356 PIN# 4625842807 (pt.) Young Builders 4625999831 DATE March 30, '99

OWNER OR CONTRACTOR Crescent Resources LLC // The Point on Norman // PHONE: Business Home

ADDRESS 2214 Brawley Sch Rd, Mooresville

LOCATION Brawley Sch Rd. TL Brawley Harbor Place ON left

SUBDIVISION The Point BLOCK / SECTION II LOT 261 LOT AREA 40,577 sf SITE CLASS PS DESIGN FLOW 480gpd L.T.A.R. .03

Septic Tank: ~~1000~~ 1500 Gallons; STB 338 Date 2/2-/04

Pump Tank: 1000 Gallons; PT 238 Date 1/24/04

Pump Make: Goulds Model 4505 1HP4U Serial No.

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

No Lines 3@134' Trench Width 36" Max Trench Bottom Depth 36"

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

System Description: pumped pw - INNOVATIVE/125% Red.

Repair System Description: LP Pave / Block

Maintenance Agreement Required: ☐ Yes ☑ No

Gravel Depth N/A

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees

☐ Other

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

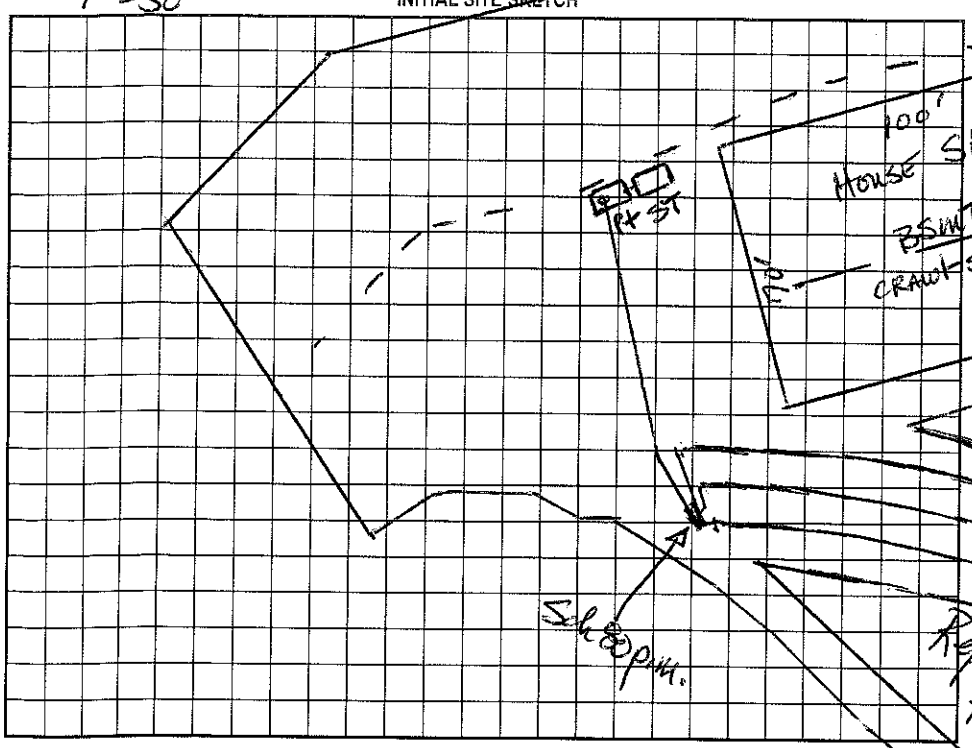
Water Supply: ☐ Individual ☑ ~~Public~~ ☑ ~~Community~~

Comments:/Conditions: * ONE inspection goes per LATERAL

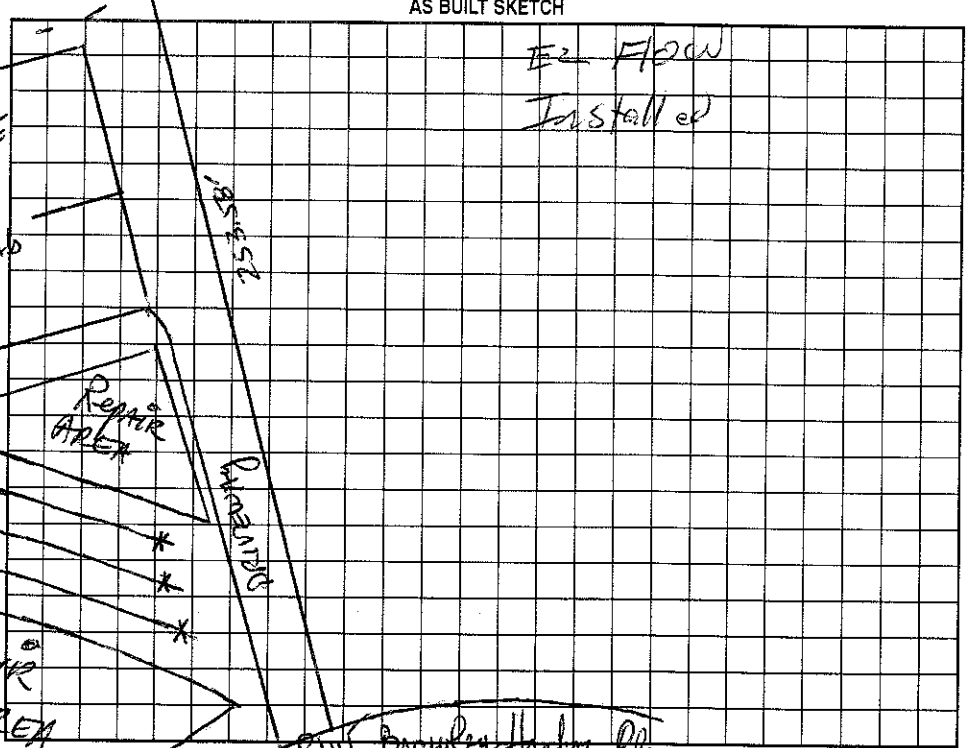
Comments:/Conditions: (PARTIAL)

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 4-22-99 Installed by: ORBison

Improvement Permit by: [signature] RS date 3-30-99 Operation Permit by: [signature] RS date 5/19/04

Authorization to Construct by: [signature] RS date 7-10-03 Existing System Inspection by: date

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