IREDELL COUNTY HEALTH DEPARTMENT

Auth. Application to Construct (660-5190) - Kevin

ATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / ~~CERTIFICATE OF COMPLETION~~ / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 20154 DATE March 4, 95 TAX MAP NO. 2CA3 (part of) Watershed: ☑ Yes ☐ No WSIV

OWNER OR CONTRACTOR Crescent Resources Inc Sammy Barlow PHONE: Business 4626-40-9550 Home

ADDRESS PO Box 1003 Charlotte

LOCATION Brawley Sch Rd TR Bay Harbour Rd. on Right

SUBDIVISION The Harbour BLOCK / SECTION ~~Harbor~~ LOT 75 LOT AREA 25,000 ft²+ SITE CLASS. PSpan/Bas DESIGN FLOW 480 gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 534

No Lines 5 Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth 12"

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

System Description: gravity conventional

Repair System Description: (Gravity pumped MOD

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 4/3

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees

☐ Other

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

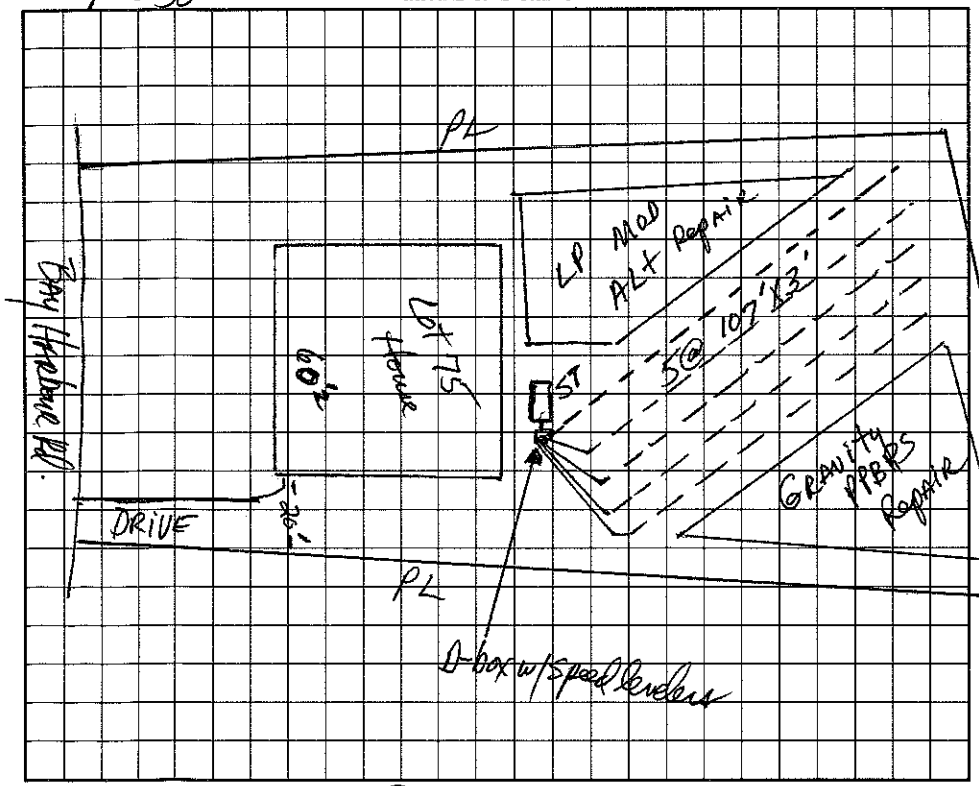
Water Supply: ☐ Individual ☑ Community ☐ Public

Comments:

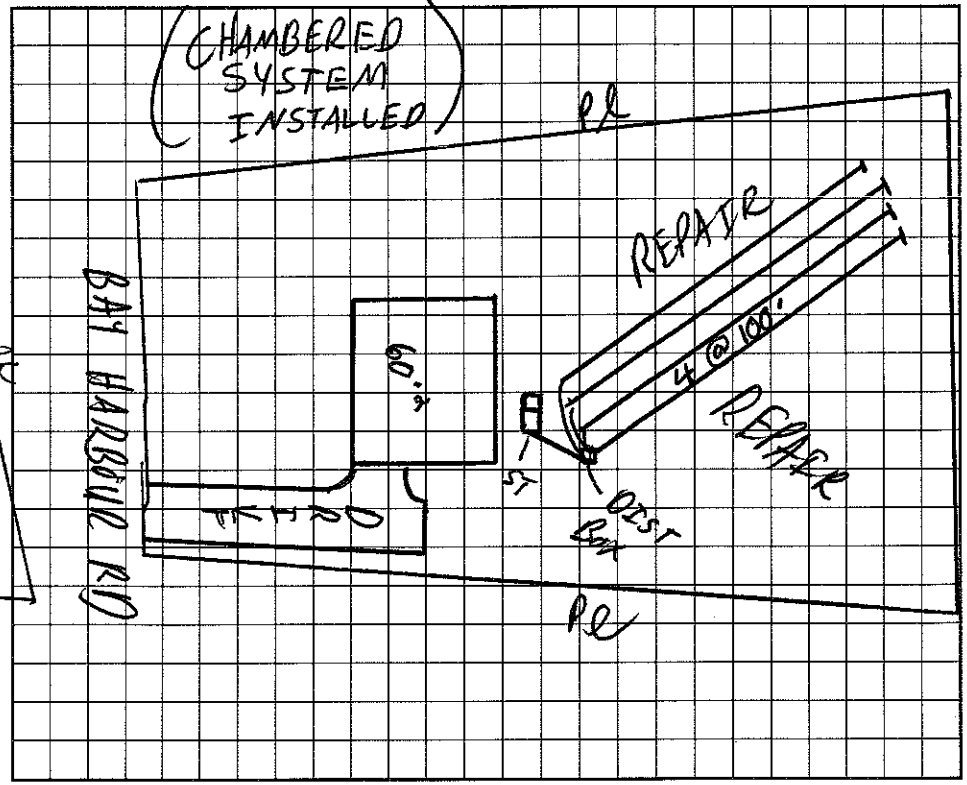
Comments: DEVELOPER PERMIT

1"=50'

INITIAL SITE SKETCH



AS BUILT SKETCH



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 is valid for 60 months from date of issuance.

Signed: Agent

Improvement Permit by: date 3/4/95

Existing System Inspection by: date 4/16/96

Installed by: BARRY THOMPSON

Certificate of Completion by: date

Operation Permit by: EHS date 11/8/96

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