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IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 112026 PIN# 4626-63-7315.53 4626-74-7989 DATE July 2, 03

OWNER OR CONTRACTOR Crescent Resources Dev/Lake Forest Est LLC / GREG ROBBINS PHONE: Business _____ Home _____

ADDRESS P.O. Box 1003 Charlotte N.C.

LOCATION Brawley School Rd. TR 'South Fork Bear Right on Agnew TR Caldwell Creek Dr. TR Magnolia Farms TL Dunn Ross Ct. At End

SUBDIVISION The Farms BLOCK / SECTION 1 LOT 53 LOT AREA 1.54/Ac SITE CLASS PS DESIGN FLOW 460gpd L.T.A.R. 2.03

Septic Tank: ~~1000~~ 500 Gallons; STB 338 Date 5/21/05

Pump Tank: 1000 Gallons; PT 27 Date 5/21/05

Pump Make: Cowans Model 512 HHH Serial No. F0563918

Nitrification Field: No Fields ___ Square Feet ___ Linear Feet 280

No. Lines 4@70' Trench Width 24"min 8'oc Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: LP PPBPS

Repair System Description: LP PPBPS

Maintenance Agreement Required: ☑ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees ___

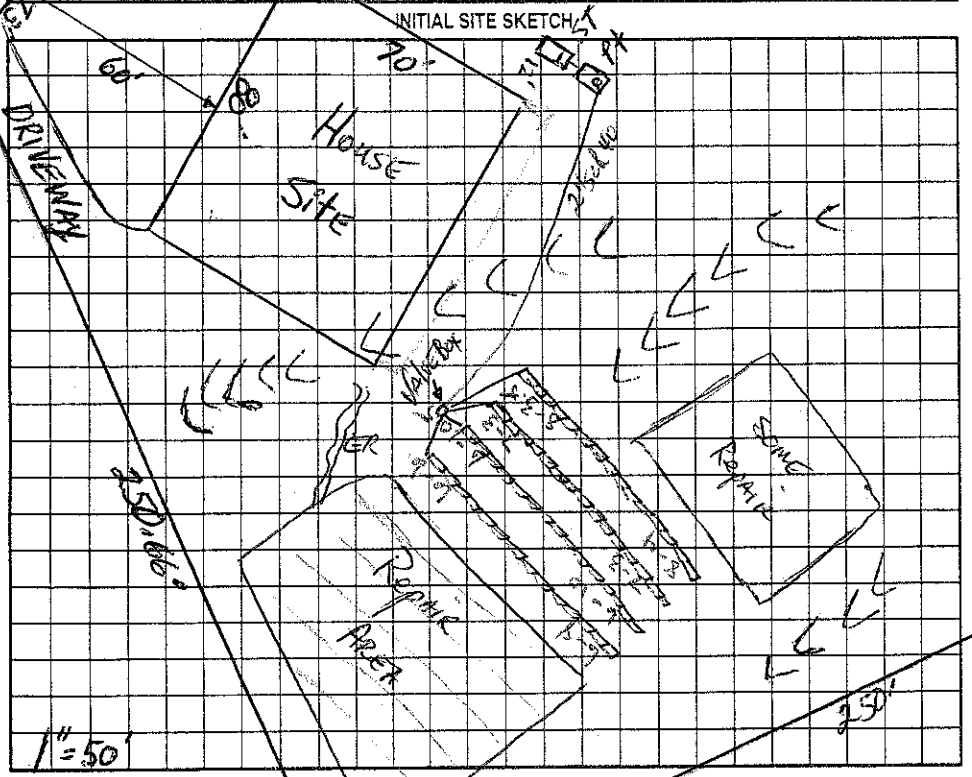
☐ Other ___

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

Water Supply: ☐ Individual ☑ Public ☑ Community

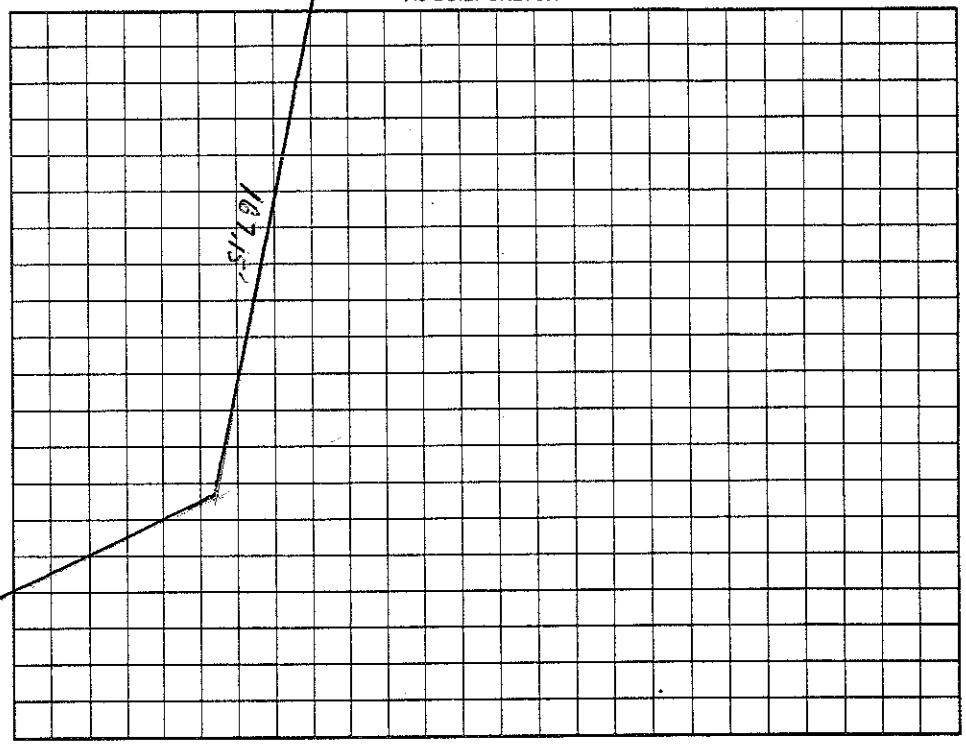
Comments/Conditions: ~~OC 36" MAX 9'OC~~ 337.28'

INITIAL SITE SKETCH



Comments/Conditions: LP - 5.5 Deadman 3' PH Tanks Equip Pressure Ramp Installed as shown on AC

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 7-14-03 Installed by: Hallman Construction

Improvement Permit by: _____ date 7-2-03 Operation Permit by: _____ date 10/13/05

Authorization to Construct by: _____ date 11/30/05 Existing System Inspection by: _____ date _____

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