IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 112018 PIN# 4626-63-7315.47 4626-74-9250 DATE July 10, 03

OWNER OR CONTRACTOR Crescent Resources dba/Lake Forest Estates LLC / KEARY CONST. PHONE: Business _____ Home _____

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

LOCATION Brawley Sch Rd TR SouthFork Been Right on Agnew TR Caldwell Creek TR Magnolia Farms to end- pt w/ Dennis Ross Ct. Lot on South Side Ext. SFE 47A on North Side Ext

SUBDIVISION The Farms BLOCK / SECTION 1 LOT 47/47A LOT AREA 1.051 + .446 ac SITE CLASS PS SFE 47A DESIGN FLOW 480gpd L.T.A.R. .025-.3 — SFE 47A

Septic Tank: 1000-1500 Gallons; STB 444 Date 3/21/06

Pump Tank: 1000 Gallons; PT 283 Date 2/28/06

Pump Make: Cowles Model WED-1012 Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1320 Linear Feet 440

No Lines 4 @ 110' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: pm 25% Reduction

Repair System Description: LPPPBPS

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees ____

☐ Other _____

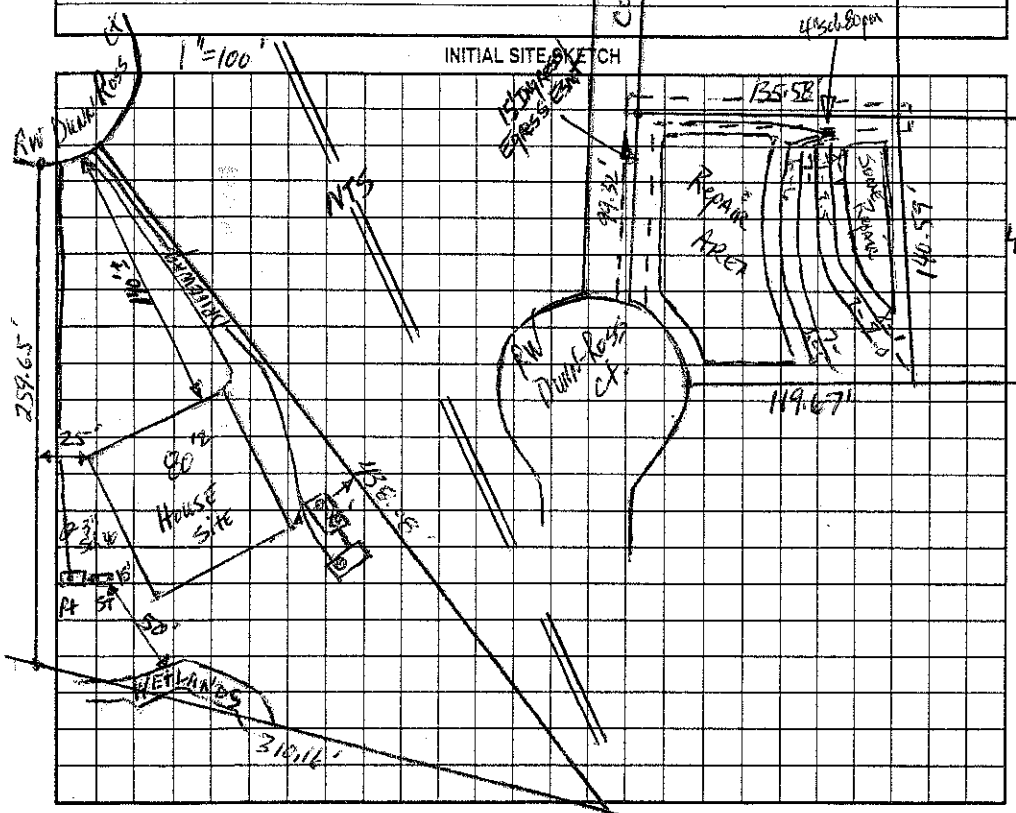
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☑ Community

Comments/Conditions:

Comments/Conditions: 11:00 Note: Okay to relocate tanks if additional pump used for basement plumbing. 2" line

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 7-14-03 Installed by: FJ Evans

Improvement Permit by: _____ date 7-10-03 Operation Permit by: _____ date 9/11/06

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