IREDELL COUNTY HEALTH DEPARTMENT

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

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

PROPERTY DESCRIPTION NO. 22071 DATE Dec 29, 195 TAX MAP NO. part of 2NA20 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR Crescent Resources Inc // Chris Strom PHONE: Business _____ Home _____ WS4CA

ADDRESS PO Box 1003, Charlotte 4628-62-0154

LOCATION 150W IR Pinnacle Shores Dr. TL Plantation DR. on left

SUBDIVISION Pinnacle Shores BLOCK / SECTION 1 LOT 86 LOT AREA 220,000 ft² SITE CLASS. Bpm. 1956 DESIGN FLOW 480gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 825 Date 9/1/98
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet _____ Linear Feet 270
No Lines 5 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth NA

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: gravity panel
Repair System Description: pm- Infiltrator Lot 86A off site
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

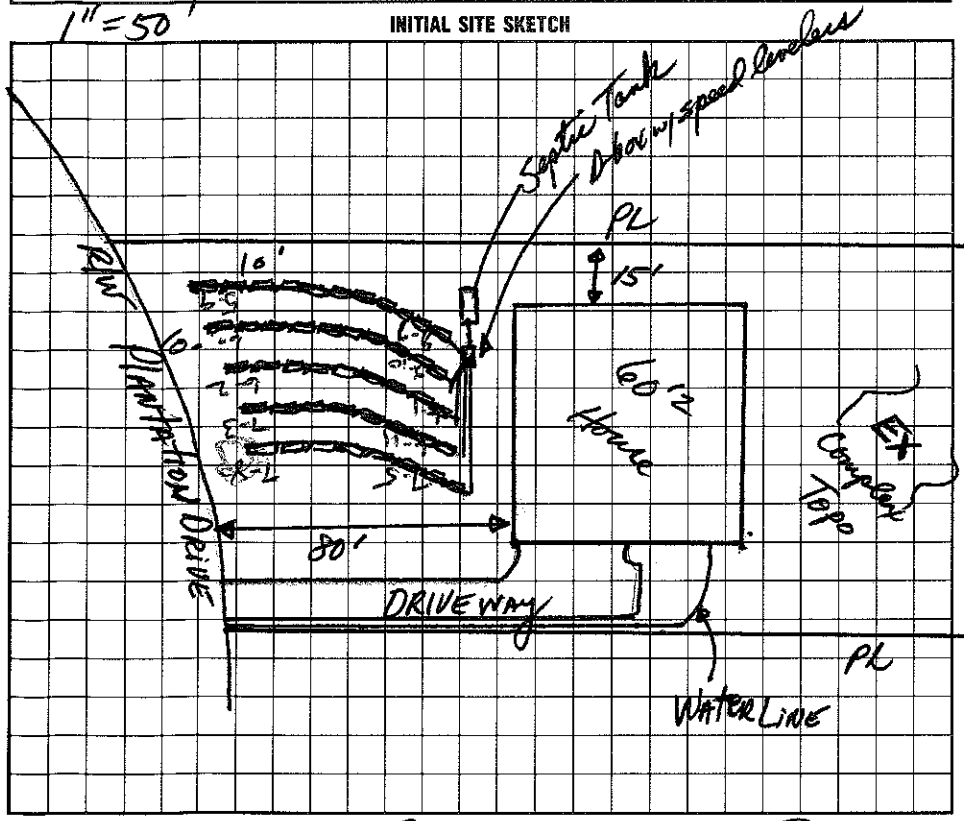
Water Supply:
☐ Individual
☑ Community
☐ Public

Comments:

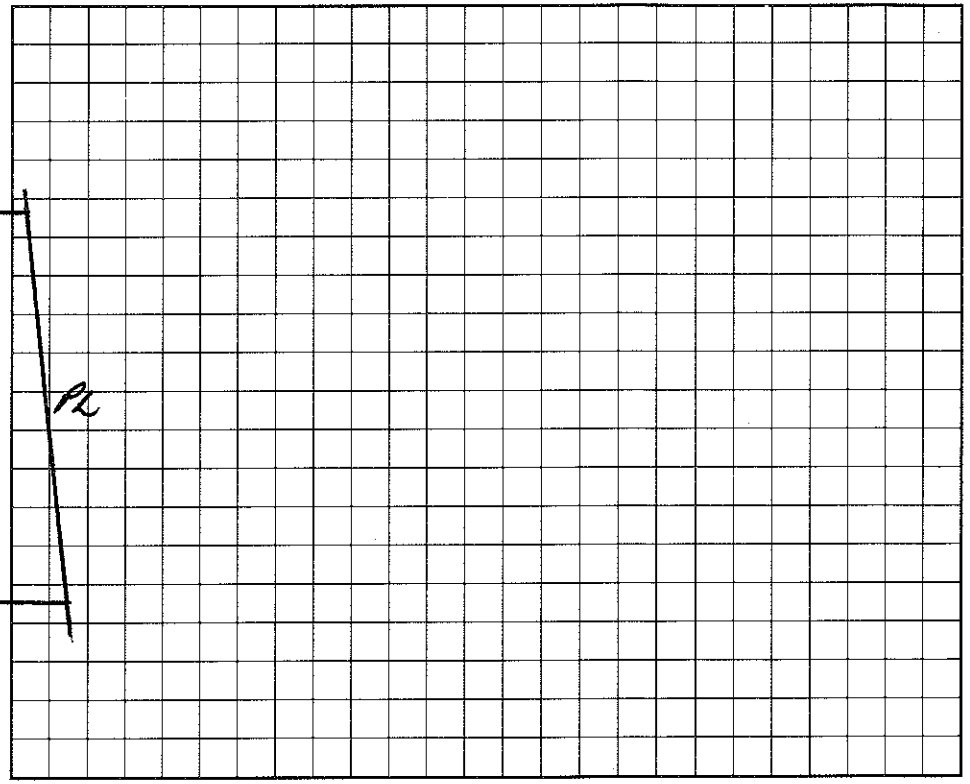
Comments:

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.

Signed: _____

Improvement Permit by: _____ date 12-29-95

Existing System Inspection by: _____ date 5-7-98

Installed by: Rowan Septic Tank

Certificate of Completion by: _____ date _____

Operation Permit by: Wesley Sparks RS date 10/29/98

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