2130

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. 2945 DATE Aug 28, 95 TAX MAP NO. part of 2LA2E 4628-80-3430 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR Crescent Resources Inc PHONE: Business _____ Home _____ WS4

ADDRESS PO Box 1003 Charlotte

LOCATION 150 W TR Indigo Lane 2nd lot on Right

SUBDIVISION Pinnacle Pines BLOCK / SECTION II LOT 16 LOT AREA ± 20,000 ft² SITE CLASS. B perk56 DESIGN FLOW 480 gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 312 Date 11-20-99

Pump Tank: 1000 Gallons; PT 27 Date 1-18-00

Pump Make: Goulds Model K99100-26 Serial No. WE0712H

Nitrification Field: No Fields 1 Square Feet 536 Linear Feet 267

No Lines 4@67' Trench Width 24" 36" Max Trench Bottom Depth ± 30" Gravel Depth N/A

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

System Description: LPPPBPS

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 ☑ Community ☐ Public

Comments: Extensive surface/storm water drainage diversion will be necessary at house site. Old road bed to be removed & properly filled. 36" trenches installed.

Comments: DEVELOPER 4/30/99 Bonus Room closet to be eliminated - PERMIT by Builder - Check before Completion Permit Tanks, lines & pressure checked 2/24/2000

INITIAL SITE SKETCH

1" = 50'

Clean out organic debris & fill properly

Water Line Installation to left of driveway

Driveway

Indigo Lane

LPPPBPS Repair Area

Gate Valve

Crawl Space

Prop. Line

AS BUILT SKETCH

Needs Maint. agreement

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 8/28/95

Existing System Inspection by: Wesley Parks RS date 4/30/99

Installed by: F.J. Ervin

Certificate of Completion by: _____ RS date 3/24/00

Operation Permit by: _____ RS date 3/24/00

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