IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C) MOORESVILLE 704-664-5281

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

PERMIT# 086073 PIN# 4639734457 (pt) DATE Dec. 20, '99

OWNER OR CONTRACTOR Crescent Resources Inc. PHONE: Business ______ Home ______

ADDRESS P.O. Box 1003 Charlotte

LOCATION State Park Rd. TL Morrison Farm Rd. TR April Lane on Right

SUBDIVISION Hawkes Bay BLOCK / SECTION ______ LOT 19, 19A LOT AREA 60,590 + 20,247 ft² SITE CLASS PS SFE DESIGN FLOW 480 gpd L.T.A.R. ~.3

Septic Tank: 1000 Gallons; STB 1012 Date 8-17-01
Pump Tank: 1000 Gallons; PT 17 Date 2-19-01
Pump Make: Little Giant Model 145CIm Serial No. AJA04289
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 4@100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

☑ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: PM-Innovative-25% Red ON SFE 19A
Repair System Description: LP Panel BLK / Innovative-25% Red ON SFE 19A
Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☑ Other ______
No. Bedrooms 4 No. Bathrooms 4 No. Employees 1

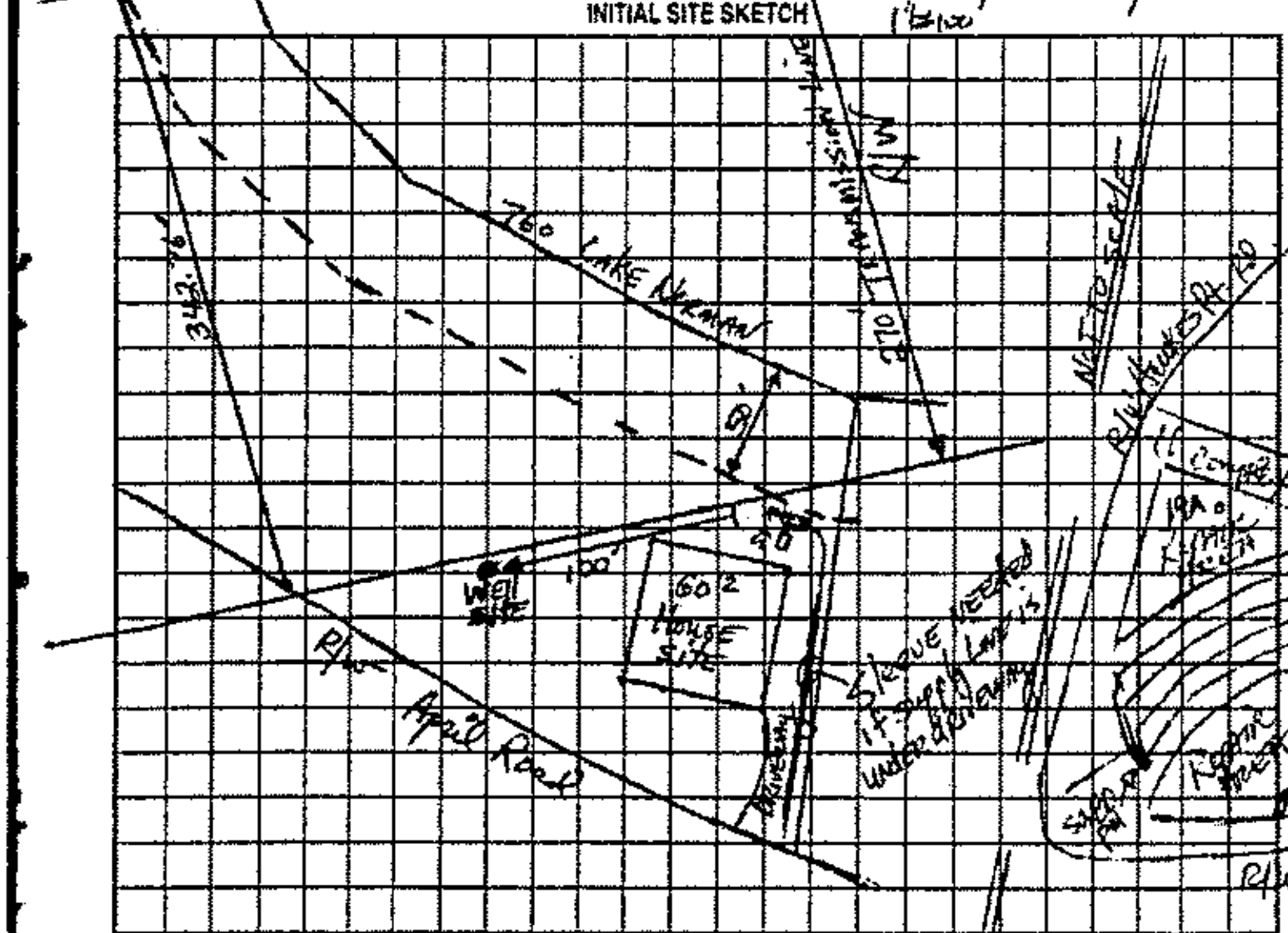
Water Supply: ☑ Individual ☐ Public ☐ Community

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

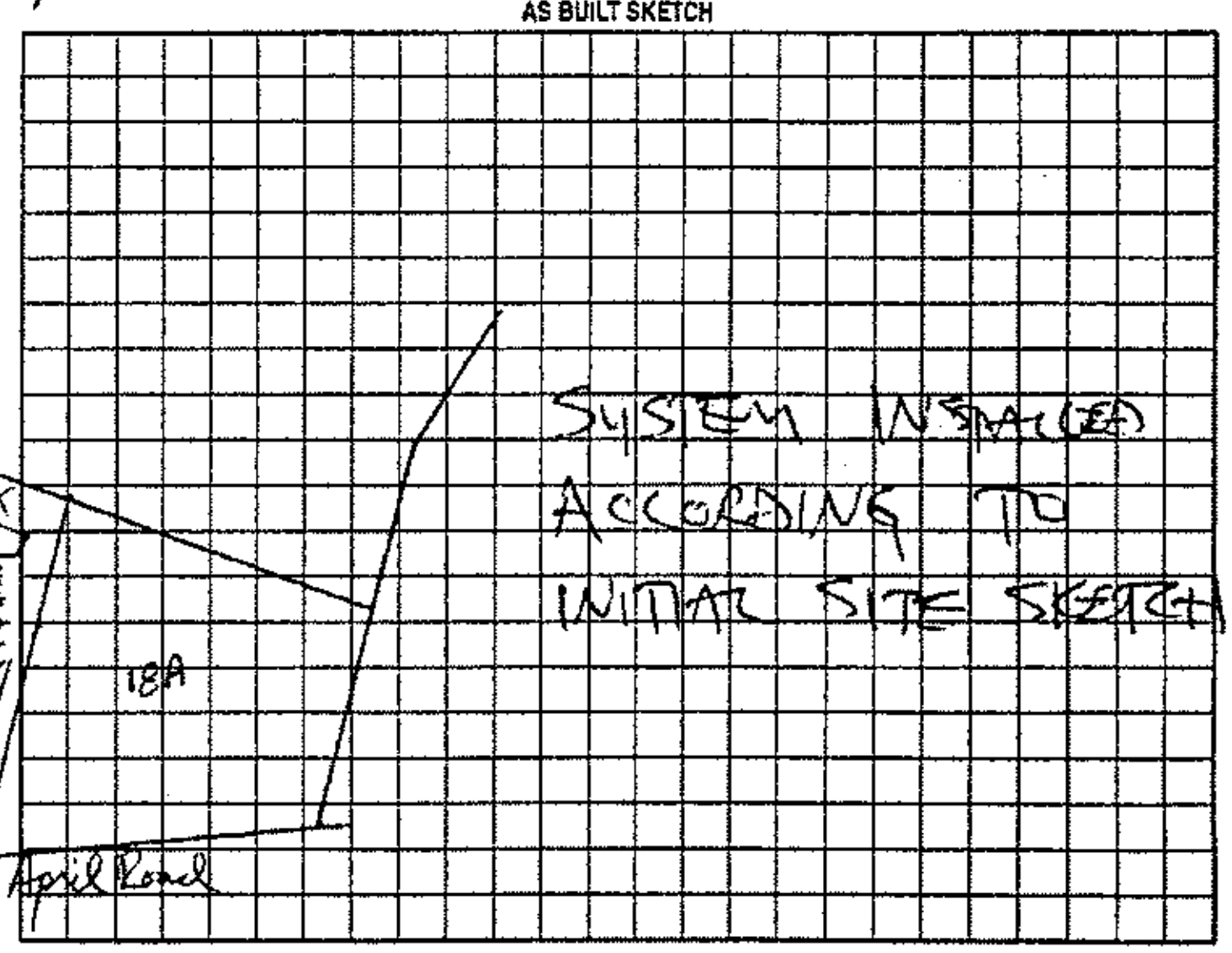
Comments/Conditions: *One inspection port per lateral. Maintain 100' from well on lot 18 with septic tank + pump tank. PLD

Comments/Conditions: - poly lok filter ST Marker Installed Infiltrator Chambers Installed - 1/3/02

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: [signature] date 12-21-99 Installed by: Craig Thompson

Improvement Permit by: [signature], RS date 12-20-99 Operation Permit by: Steve Hedrick date 5-1-02

Authorization to Construct by: Steve Hedrick date 8-10-01 Existing System Inspection by: ______ date ______

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