# IREDELL COUNTY HEALTH DEPARTMENT

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

## IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTIO

PERMIT# 072161 PIN# 4625941684 4635-03-7668 DATE Aug 4, '98

OWNER OR CONTRACTOR Crescent Resources clo Hunt MSF Assoc. PHONE: Business Home

ADDRESS PO Box 1003, Charlotte 28202

LOCATION Brawley Sch Rd. TL The Pointe DR. Queen Anne Circle to Vineyard DR. on left

SUBDIVISION The Pointe BLOCK / SECTION IA LOT 42 LOT AREA 34,265 ft² SITE CLASS. RS DESIGN FLOW 480gpd L.T.A.R. .25-.3

Septic Tank: 1000 Gallons; STB 338 Date 2-5-04
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1350 Linear Feet 450
No Lines 5@90' Trench Width 36" Max Trench Bottom Depth 36"

☑ New System ☐ Repair System Type: I, II, (III) IV, V, VI
System Description: Gravity 25% Reduction
Repair System Description: 1 LP Panel Block
Maintenance Agreement Required: ☐ Yes ☑ No initially
Gravel Depth N/A

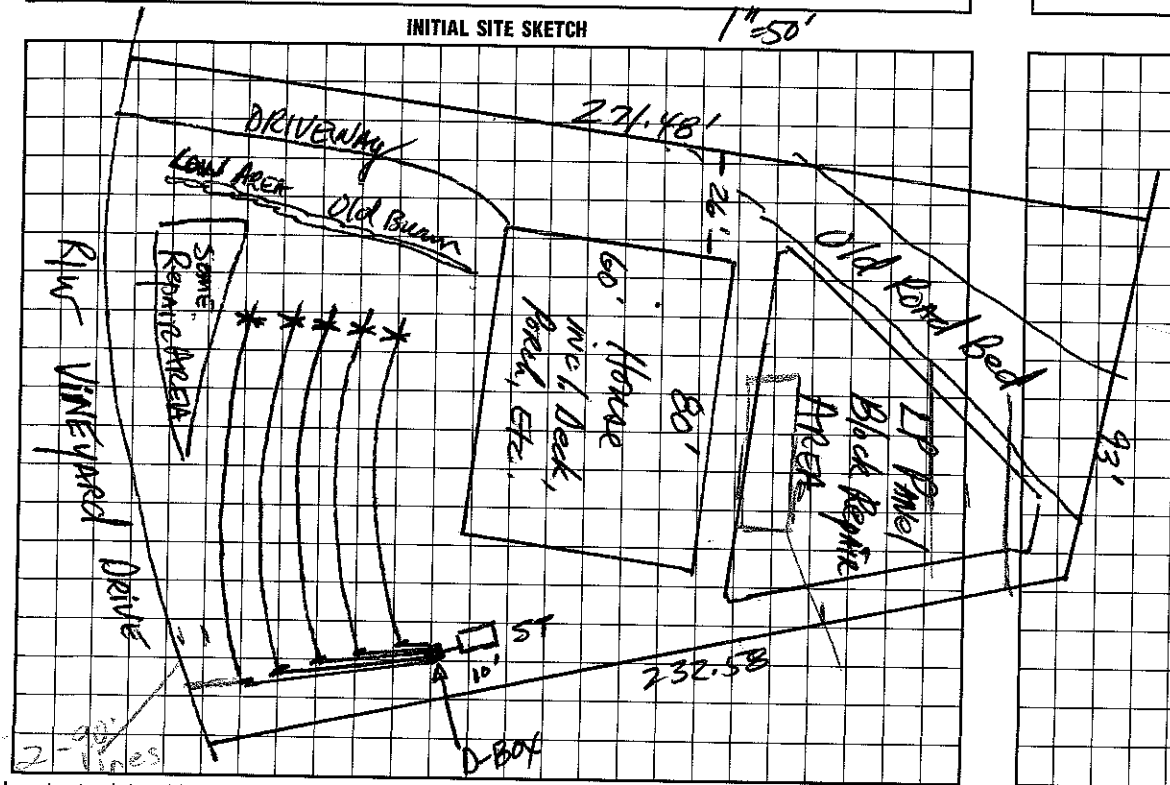
☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees
☐ Other
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☑ Community

Comments:/Conditions: * ONE INSpection/observation port per LATERAL
Remove old Berms/TERRACES

Comments:/Conditions:

INITIAL SITE SKETCH 1"=50'




AS BUILT SKETCH

Installed as Drawn

Used EZ Flow

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. 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 8-2-98 Installed by: R & H R.S

Improvement Permit by: [signature] IRS date 8-1-98 Operation Permit by: [signature] date 3/22/04

Authorization to Construct by: [signature] date 6/24/03 Existing System Inspection by: date

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