IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 073403 PIN# 4625941684 4635-04-0384 DATE Aug 3, '98

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

ADDRESS P.O. Box 1003, Charlotte, N.C. 28201

LOCATION Bawley Sch Rd TL The Pointe Dr. Queen Anne Circle to Vineyard Dr. on left

SUBDIVISION The Pointe BLOCK / SECTION 1A LOT 51 LOT AREA 34,788 ft² SITE CLASS. PS DESIGN FLOW 480 gpd L.T.A.R. 3 initial

Septic Tank: ~~1000~~/500 Gallons; STB 797 Date 7/2/99

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 5@80' Trench Width 36" Max Trench Bottom Depth _____ Gravel Depth _____

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

System Description: GRAVITY 25% Reduction

Repair System Description: GRAV/pumped Panel Block

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 4/4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees _____

☐ Other _____

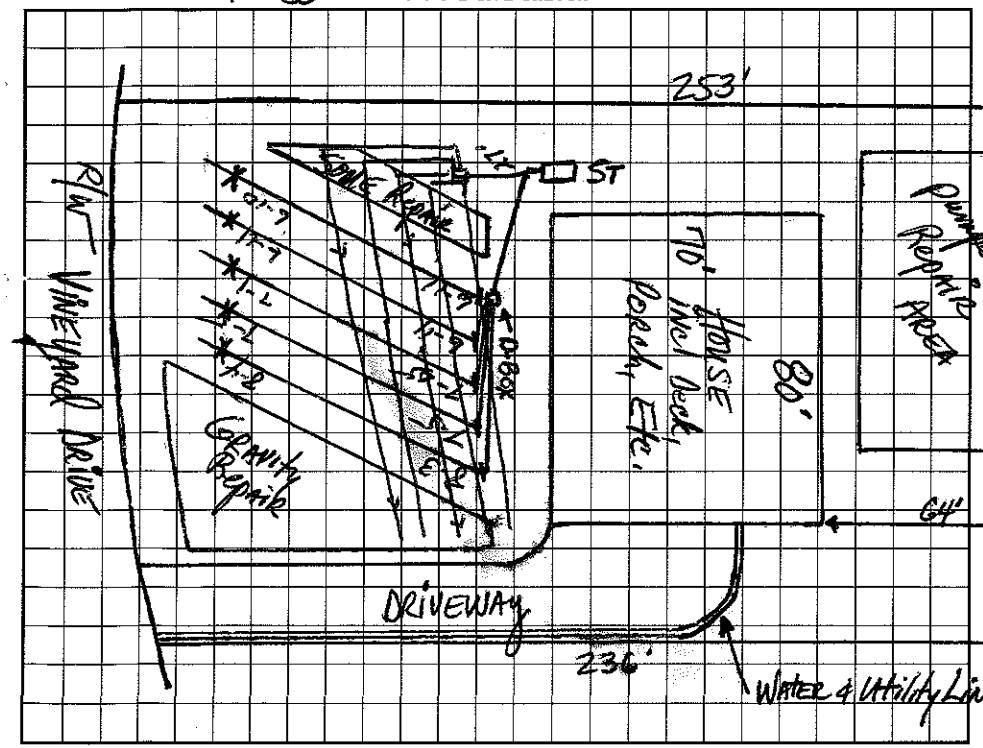
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☑ ~~Community~~

Comments:/Conditions: Remove old Burns/TERRACES. *ONE INSPECTION/ observation port per LATERAL.

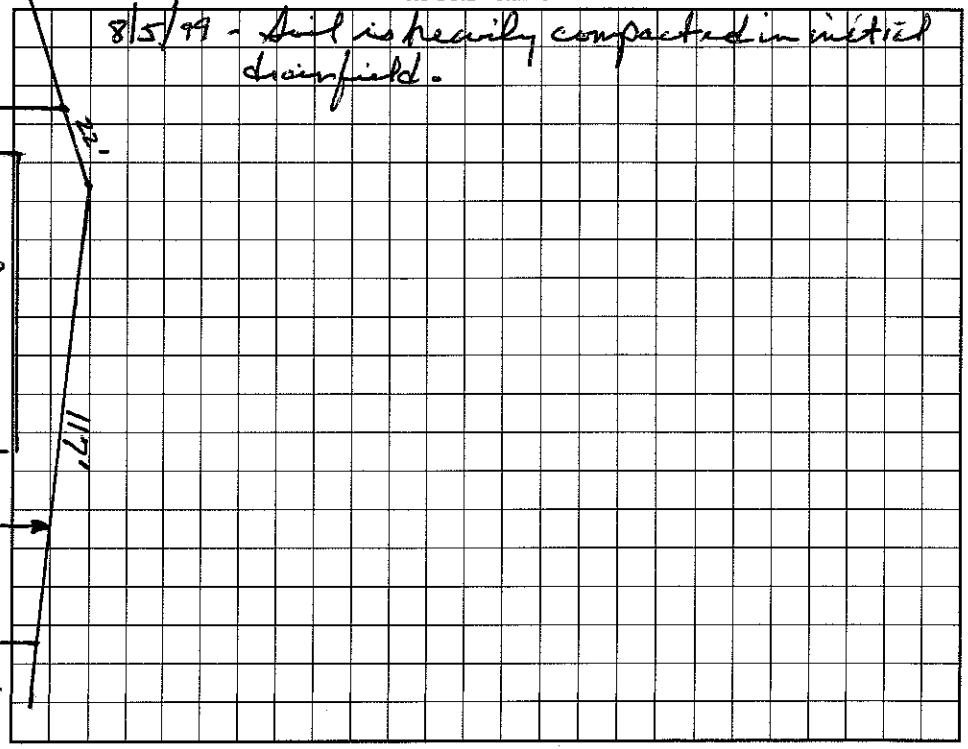
Comments:/Conditions: 1-22-99 Floor (Home) plan reviewed-OK. Site plan slightly different but should work if sidewalk is constructed closer to house. DRF

1"=50' INITIAL SITE SKETCH



AS BUILT SKETCH

8/5/99 - Soil is heavily compacted in initial drainfield.



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: _____ date 8-20-98 Installed by: Mayhew Septic Services

Improvement Permit by: _____ date 8-3-98 Operation Permit by: Wesley Sparks RS. date 8/5/99

Authorization to Construct by: _____ date 1-22-99 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