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IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 0'14961 PIN# 4625941684 4635064831 DATE Nov. 3, 98

OWNER OR CONTRACTOR Crescent Resources Inc. PHONE: Business Home

ADDRESS 4523 Charlotte

LOCATION Brumley Gap Rd. TL Quaker Rd ON right

SUBDIVISION The Point BLOCK / SECTION 1-C LOT 3/3A LOT AREA 37,809 + SFC 3A SITE CLASS. B&B DESIGN FLOW 480 gpd L.T.A.R. .02

Septic Tank: 1000+ Gallons; STB 338 Date 12/3/04

Pump Tank: 1000 Gallons; PT .27 Date 12/20/04

Pump Make: Gould's Model WE05124HM Serial No.

Nitrification Field: No Fields 1 Square Feet 1800 Linear Feet 600

No Lines 6@100' Trench Width 36" Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: Pumped-pm-25% Red. w/ Innovative

Repair System Description: 480 GPD SITE (3A) 25-50% Red.

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4/4

☑ Mobile Home No. Bathrooms

☐ Business No. Employees

☐ Other

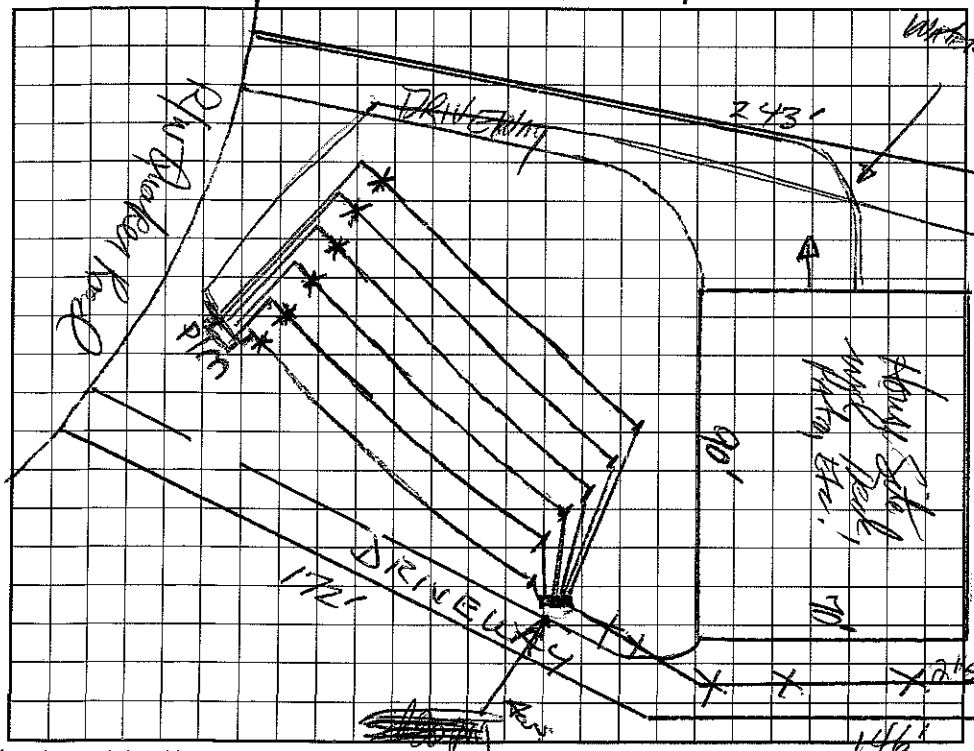
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☐ Community

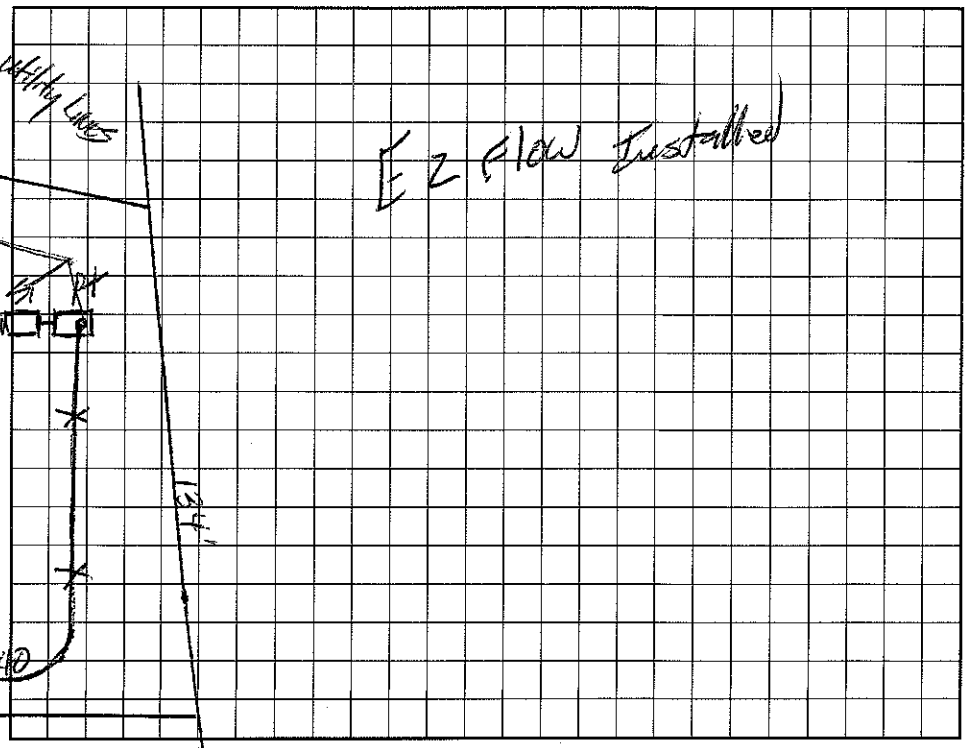
Comments/Conditions: * ONE INSPECTION port per Lateral. Remove any old burnt, Enhanced.

Comments/Conditions:

INITIAL SITE SKETCH 1"=50'



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. 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 11/10/98 Installed by: Hallman Const

Improvement Permit by: [signature] RS date 11-3-98 Operation Permit by: [signature] RS date 3/24/05

Authorization to Construct by: [signature] RS date 7/12/04 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