...LL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 073952 PIN# 4625-94-4669 (6th) 4635-06-5329 DATE April 26, '99

OWNER OR CONTRACTOR Crescent Resources Inc. (John R. Pierce Bldr.) PHONE: Business 847-0496 Home

ADDRESS P.O. Box 1003, Charlotte / P.O. Box 437 Matthews

LOCATION Bayley Sch. Rd. TL Chatham Rd. TL Mayfair Rd. on left

SUBDIVISION The Resort BLOCK / SECTION 4-B LOT 51 LOT AREA 26,596 sq ft SITE CLASS. PS DESIGN FLOW 440 gpd L.T.A.R. .25-.3

Septic Tank: 1500 gal Gallons; STB 338 Date 9/18/99

Pump Tank: 1000 Gallons; PT 27 Date 12/16/99

Pump Make: MYERS Model ME3E-21 Serial No. 26229D001

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 4 Trench Width 36" Max Trench Bottom Depth ~30" Gravel Depth NA

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

System Description: LPP Panel Block

Repair System Description: Same

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

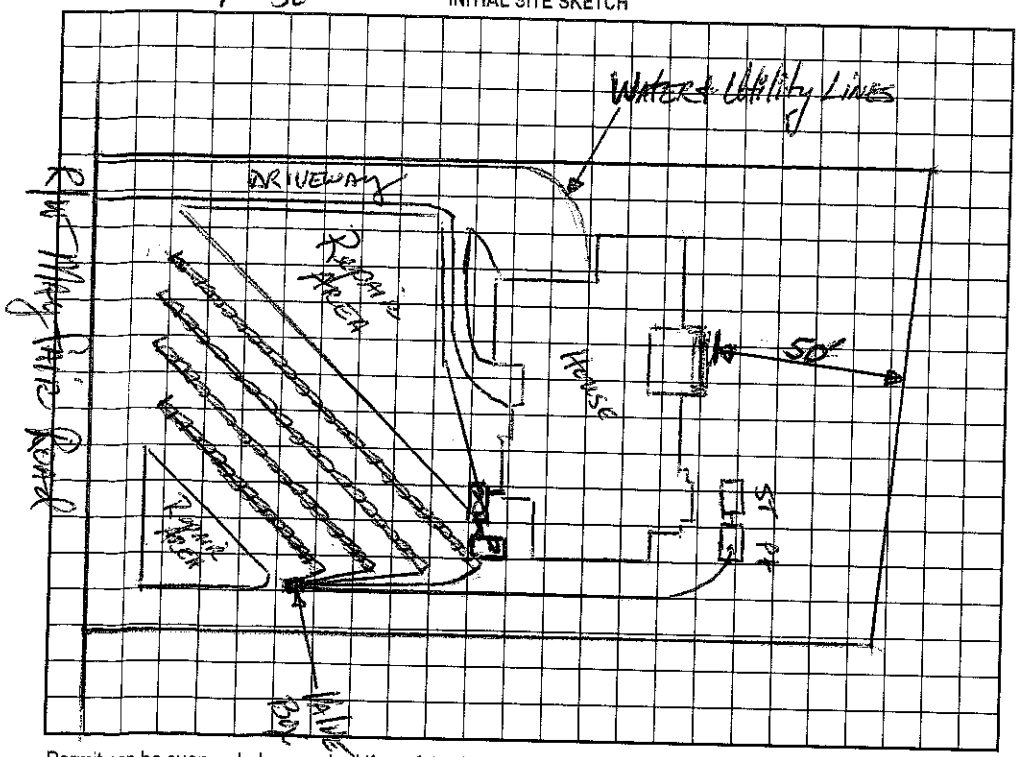
Water Supply: ☐ Individual ☑ Public ☑ Community

Comments/Conditions:

Comments/Conditions: House staked out wrong place —

1" = 50'

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: FOR JEFFREY PACE RSR date 7-2-99

Improvement Permit by: RS date 4-26-99

Authorization to Construct by: RS date 4-26-99

Installed by: Hawley Septic Tanks

Operation Permit by: Marian H. Dixon R.S. date 3/15/2000

Existing System Inspection by: date

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