IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 073882 PIN# ~~4625941684 (pt)~~ 4635-06-8227 DATE Sept. 12, '98

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

ADDRESS P.O. Box 1003 Charlotte

LOCATION Brawley School Rd. TL Chatham Rd. TL Mayfair Rd TR Forestdale Loop immediately on Right

SUBDIVISION The Pointe BLOCK / SECTION 1-B LOT 21 LOT AREA 33,190 ft² SITE CLASS. RS DESIGN FLOW 480gpd L.T.A.R. ~.3

Septic Tank: ~~1000~~ 1500 Gallons; STB 338 Date 9/8/98

Pump Tank: ___ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 2 Square Feet 1260 Linear Feet 420

No Lines 3+3 Trench Width 36" Max Trench Bottom Depth ~30" Gravel Depth NA

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

System Description: GRAVITY 25% Reduction

Repair System Description: LP Panel/Block

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms 4 No. Employees ____

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

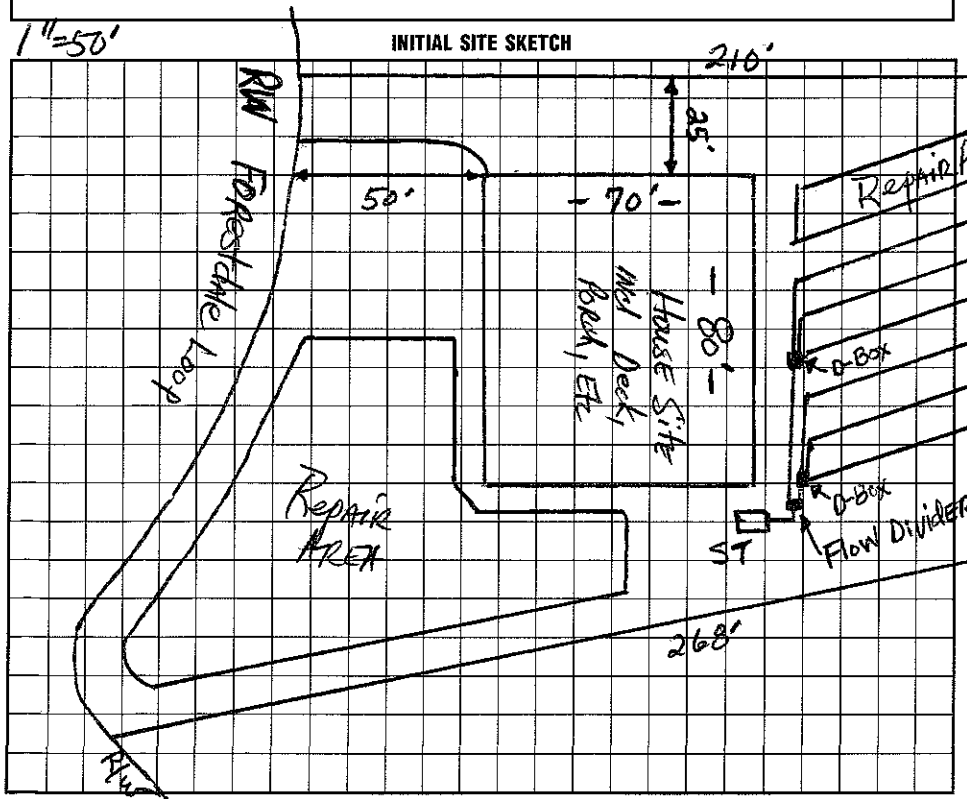
Water Supply: ☐ Individual ~~☐ Public~~ ~~☑ Community~~

Comments/Conditions: Use Flow Divider to 2-D Boxes.
6/20/01 Received site plan which eventfield complies with I.P. Aws

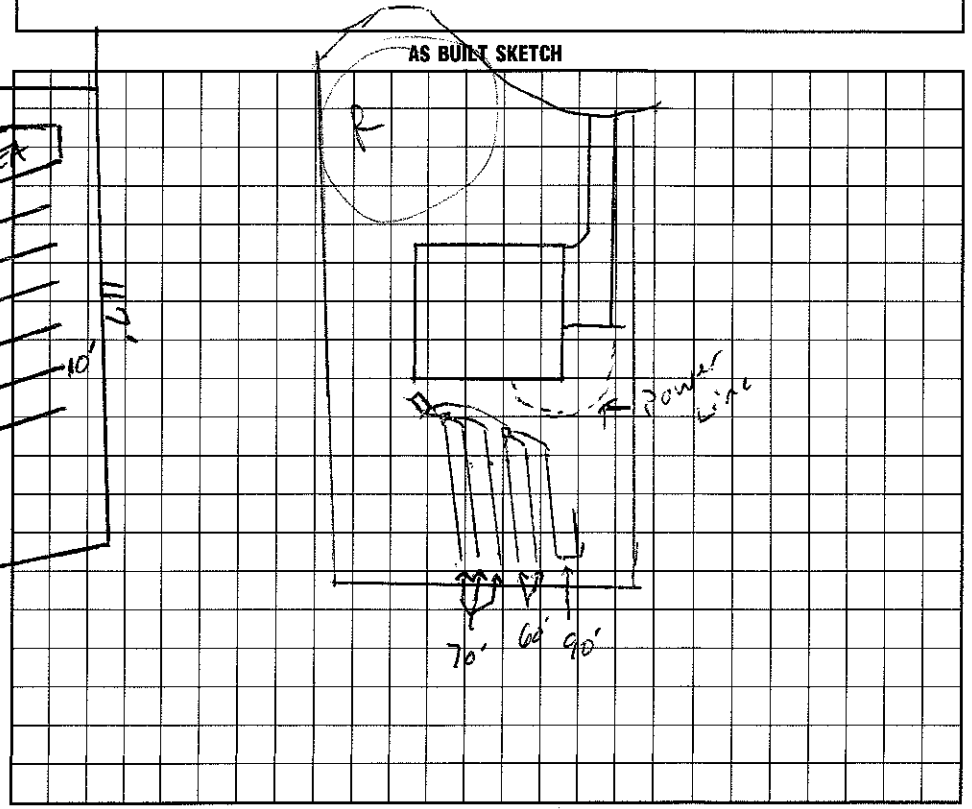
Comments/Conditions:

1"=50'

INITIAL SITE SKETCH



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: Tony C Spell (POSS) date 10-15-98 Installed by: Hallman Const.

Improvement Permit by: _____ date 9-12-98 Operation Permit by: _____ RS date 1/11/02

Authorization to Construct by: Wesley Sparks RS date 6/20/01 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