IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 072150 PIN# 4625941684 4635-12-8750 DATE July 29, '98

OWNER OR CONTRACTOR Crescent Resources thru // Arcadia Homes PHONE: Business _____ Home _____

ADDRESS P.O. Box 1003, Charlotte 28202

LOCATION Brawley Sch. Rd. to The Pointe Dr. Queens Anne Circle to Eastern Dr. to Old Post Rd. to Falmouth Rd.

SUBDIVISION The Pointe BLOCK / SECTION 1A LOT 29 LOT AREA 37,205 sf SITE CLASS PS DESIGN FLOW 480 gpd L.T.A.R. .3

Septic Tank: ~~1000~~ 1500 Gallons; STB 338 Date 4/12/00

Pump Tank: ~~1000~~ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

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

No Lines 3@134' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: gravity 25% Reduction

Repair System Description: SAME

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

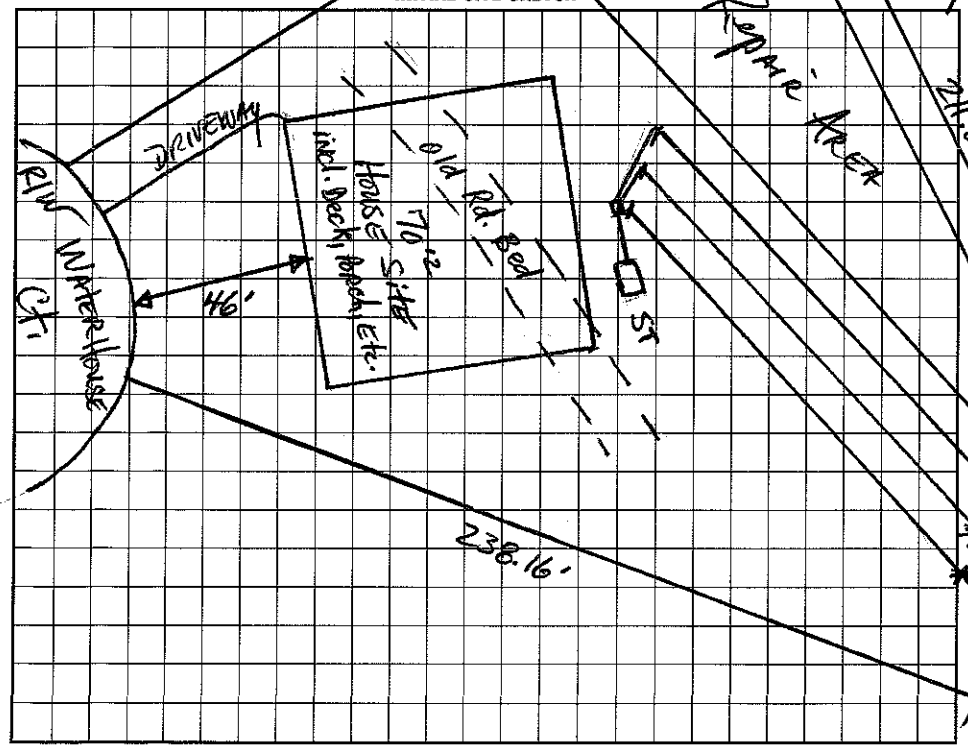
Comments/Conditions:

+ONE INSPECTION PORT for LATERAL
Remove old pavers, Terraces. 2129'

Comments/Conditions:

9-16-99 Renewed house & site plan appears in compliance w/ IP. DRH

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: _____ date 9/6/98

Improvement Permit by: _____ date 7-29-98

Authorization to Construct by: _____ date 9-16-99

Installed by: R & A Construction

Operation Permit by: _____ date 5/19/00

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