IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 072154 PIN# 4625941684 4635-13-1636 DATE Jan. 7, 99

OWNER OR CONTRACTOR Crescent Resources Chas. / Young Bld. PHONE: Business _____ Home _____

ADDRESS P.O. Box 1003, Charlotte

LOCATION Brawley Sch Rd. TL The Point Dr. Queen Anne Circle to Vineyard Dr. to Falmouth Rd - immediately on left.

SUBDIVISION The Point BLOCK / SECTION 1A LOT 37 LOT AREA 30,071 ft² SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .25 initial / .3 repair

Septic Tank: 1000 + Gallons; STB 797 Date 3/29/99

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1500 Linear Feet 500

No Lines 5 @ 100' Trench Width 36" Max Trench Bottom Depth 24"

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

System Description: Graveity 25% Red / Innovative

Repair System Description: LP Pave / Block

Maintenance Agreement Required: ☐ Yes ☒ No

Gravel Depth N/A

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees 1

☐ Other _____

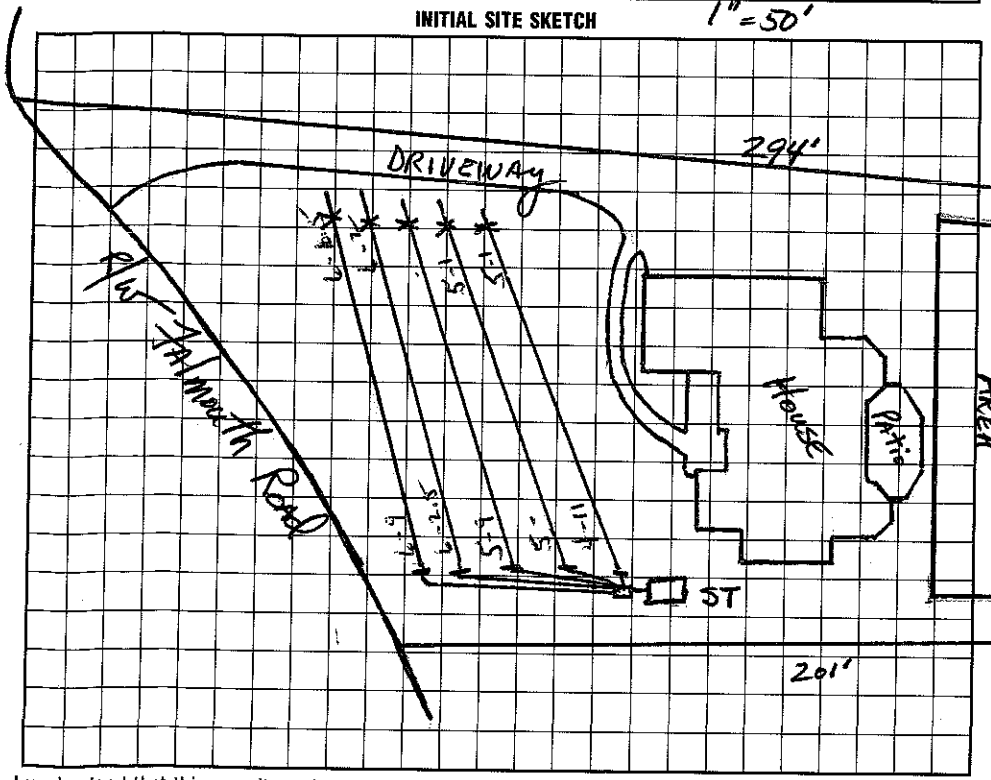
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☑ Community

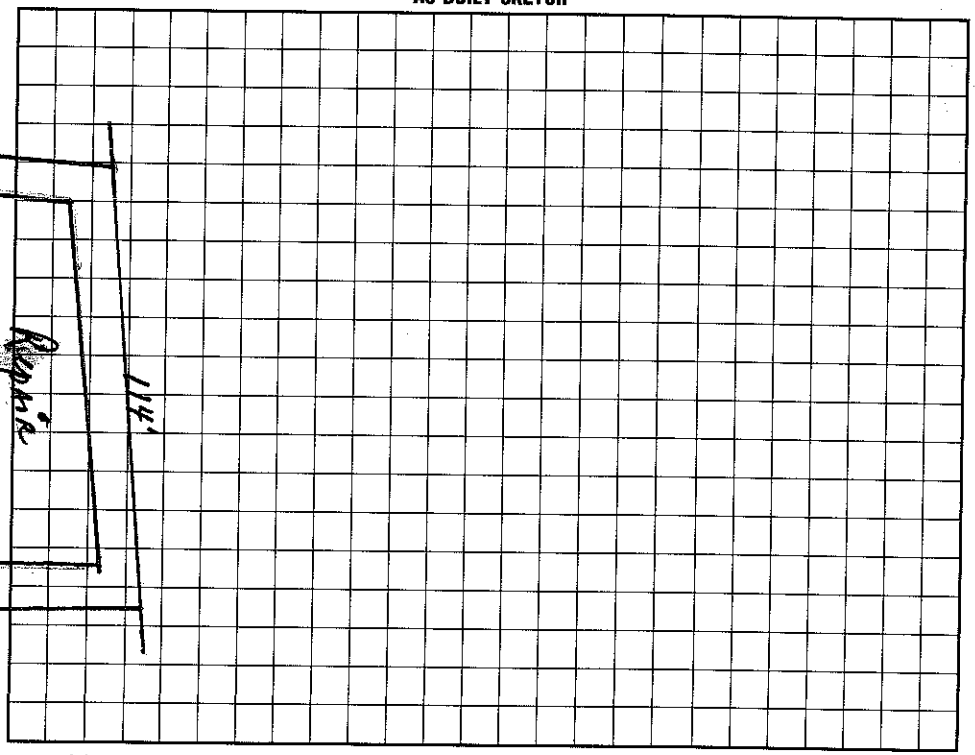
Comments:/Conditions: * ONE INSPECTION PORT PER LATERAL. This permit replaces previous I.P./AC.

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: _____ date 5-19-99 Installed by: Orlison Const. Co.

Improvement Permit by: _____ date 1-2-99 Operation Permit by: Wesley Sparks RS. date 7/26/99

Authorization to Construct by: _____ date 1-2-99 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