IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 50.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 072123 PIN# 4625941684 4635-13-5347 DATE 6/29/2000

OWNER OR CONTRACTOR Crescent Resources Inc/David Bibble PHONE: Business 309-0784 David Home 892-8730

ADDRESS P.O. Box 1003 Charlotte NC

LOCATION Brawley School Rd TL the Point Dr/Meeting House TL Easton Drive to Old Poston Rt

SUBDIVISION The Point BLOCK / SECTION 1A LOT 22 LOT AREA 38361 SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 799 Date 9/28/99

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 1440' Linear Feet 480'

No Lines 5 @ 96' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth ____

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

System Description: Gravity - 25% Reduction

Repair System Description: Panel Block

Maintenance Agreement Required: ☐ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 4 + Bonus Room

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees ____

☐ Other ____

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

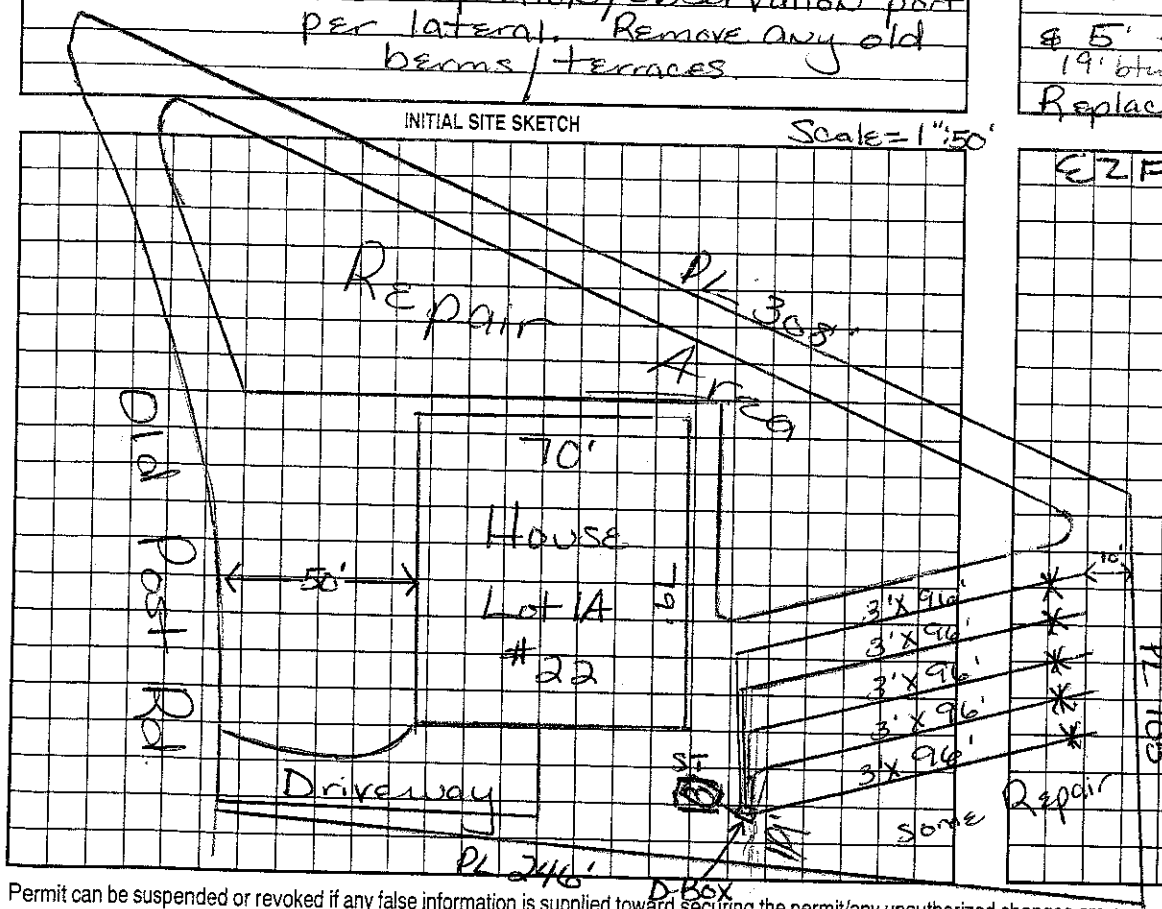
Water Supply: ☐ Individual ☒ Public ☒ Community

Comments:/Conditions: X One inspection/observation port per lateral. Remove any old berms/terraces.

Comments:/Conditions: Keep Septic System at least 10' From PL & 5' From house. 19' btw PL & D-box 8' from ST, 5T-10' to house. Replaces permit issued 7/28/98

INITIAL SITE SKETCH

Scale = 1":50'



AS BUILT SKETCH

EZ Flow Installed

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: C. Dobson date 7/5/00 Installed by: Dobson Const.

Improvement Permit by: Mark H. Dobson R.S. date 6/29/00 Operation Permit by: Wesley Sparks R.S. date 12/12/00

Authorization to Construct by: Mark H. Dobson date 6/29/00 Existing System Inspection by: ____ date ____

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