IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 073868 PIN# 4625944684 (pt) 4635-15-1526 DATE Sept. 11, 98

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

ADDRESS P.O. Box 1003, Charlotte

LOCATION Brawley Sch. Rd. Tr Chatham Rd. Tr Kingsbury Ct. immediately on Right

SUBDIVISION The Pointe BLOCK / SECTION 1-B LOT 9 LOT AREA 48,449 ft² SITE CLASS. PS DESIGN FLOW 4 bdrm L.T.A.R. ~.3

Septic Tank: 1000 + Gallons; STB 312 Date 5/27/00
Pump Tank: 1000 Gallons; PT 338 Date 7/14/00
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines 4@75' Trench Width 36" Max Trench Bottom Depth ~30" Gravel Depth NA

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: LP Panel Block
Repair System Description: SAME
Maintenance Agreement Required: ☑ Yes ☐ No

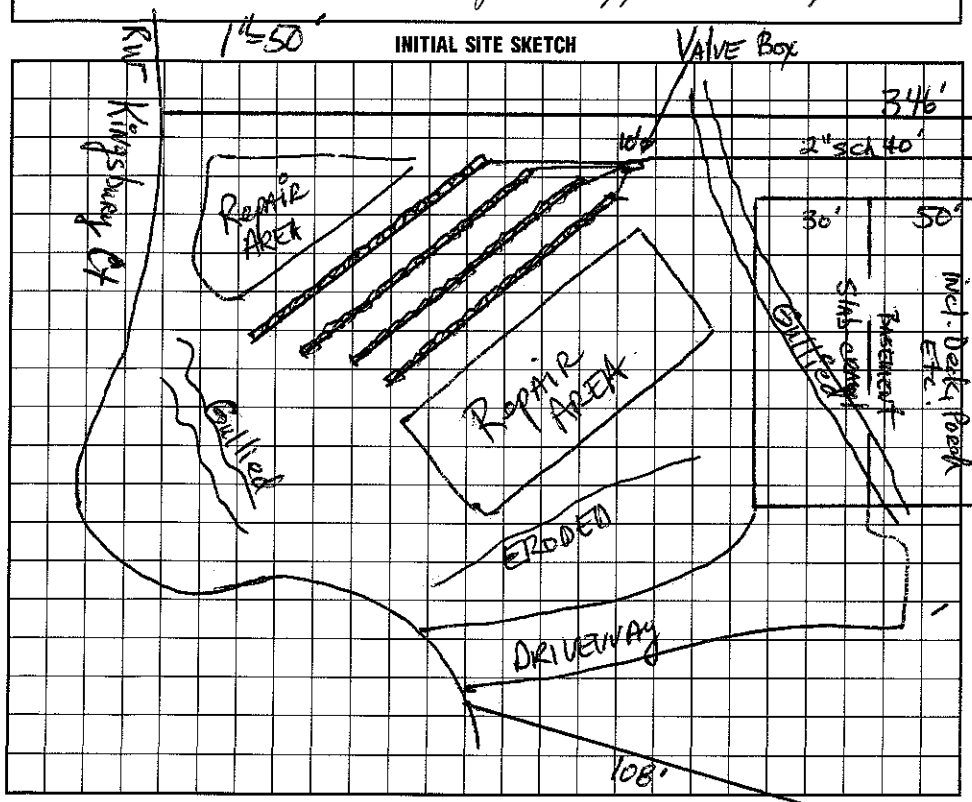
☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees _____
☐ Other _____
☑ Slab ☑ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☐ Individual
☑ Public
☑ Community

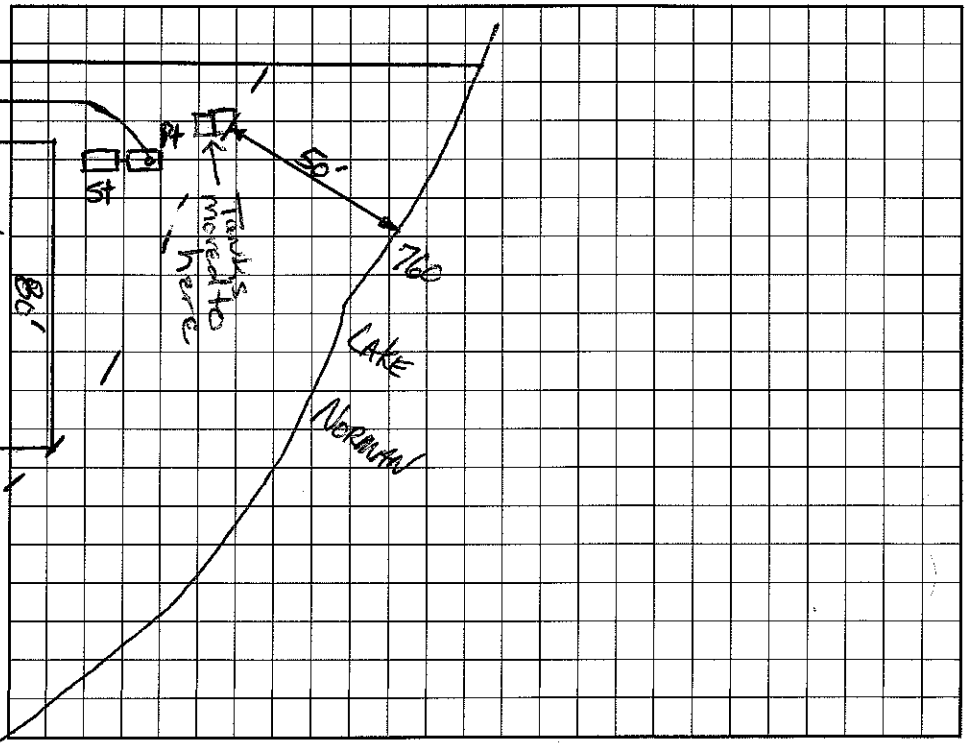
Comments:/Conditions: Fill gullied and Eroded Areas. Remove any old berms, terraces.
12-6-99 Reviewed house & siteplan; appears in compliance w/ IP

Comments:/Conditions: (PARTIAL)

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: Tony C Gee CPSS date 10-15-98 Installed by: R + H

Improvement Permit by: _____ date 9-11-98

Authorization to Construct by: _____ date 12-6-99

Operation Permit by: _____ date 10/20/2000

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