# IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 075007 PIN# 4625944684 4635-17-0702 DATE Oct 21, '98

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

ADDRESS P.O. Box 1003, Charlotte

LOCATION Brawley Sch Rd. TR Quaker Rd on Right at End

SUBDIVISION The Point BLOCK / SECTION 1-C LOT 12 LOT AREA 33,307 ft² SITE CLASS. PS DESIGN FLOW 480 gpd L.T.A.R. ~.25

Septic Tank: ~~1000~~ 1500 Gallons; STB 338 Date 7-10-2001

Pump Tank: 1000 Gallons; PT 283 Date 2-15-01

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1020 Linear Feet 340

No Lines 4 @ 85' Trench Width 36" Max Trench Bottom Depth ~30" Gravel Depth N/A

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

System Description: LPP 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

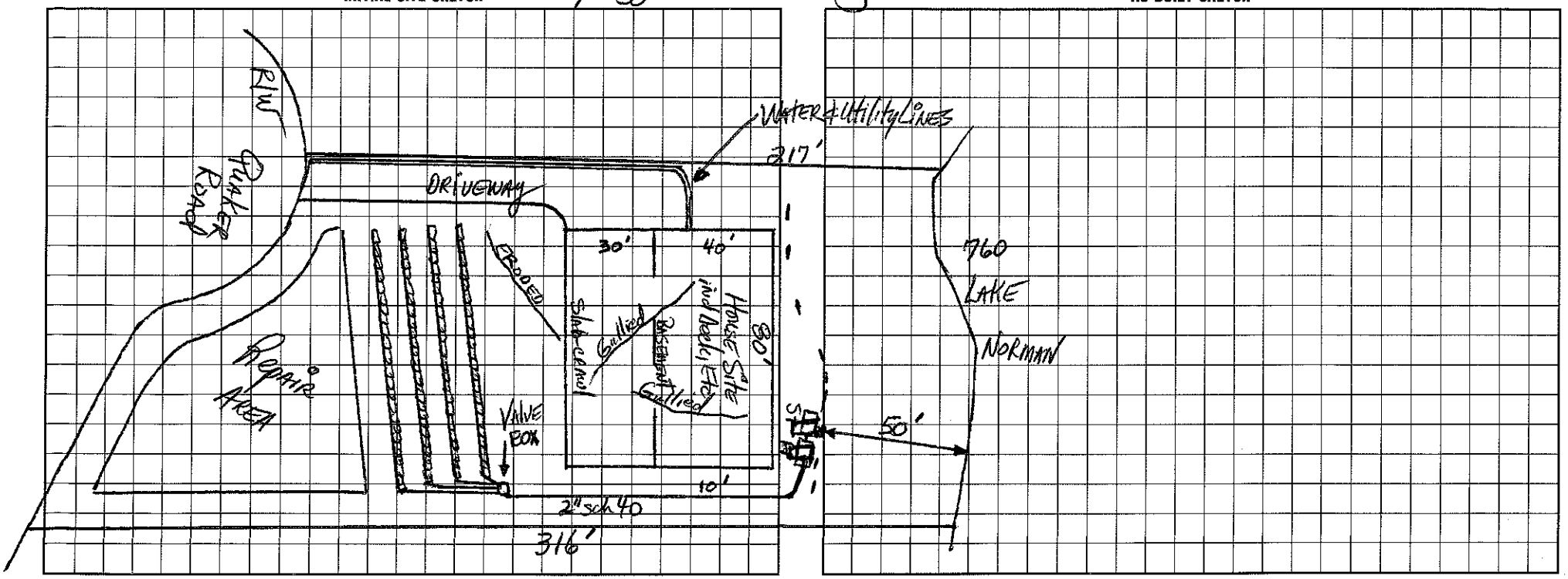
Water Supply: ☐ Individual ☐ ~~Public~~ ☑ Community

Comments:/Conditions: Properly fill ERODED & Gullied AREAS. Remove any old berms, terraces.

Comments:/Conditions: (PARTIAL) 12/1/00 - Revised plan, essentially complies with D.H.I.P. rules.

Checked tanks 8/21/2001, filter not installed yet

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 10-30-98 Installed by: R & H Inc.

Improvement Permit by: _____ date 10-29-98 Operation Permit by: _____ date 11/9/01

Authorization to Construct by: _____ RS. date 12/1/00 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