IREDELL COUNTY HEALTH DEPARTMENT

Paid 50.00 DT

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

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

PERMIT# 73945 PIN# 4625944168XX PT 4635172014 DATE 7/24/00

OWNER OR CONTRACTOR CRESCENT RESOURCES / SEGAL PHONE: Business Home

ADDRESS PO BOX 1003 - CHARLOTTE NC

LOCATION BRAWLEY SCHOOL - TL CHATHAM RD - TL MAYFAIR RD - ON LT PAST FORESTDALE Loop.

SUBDIVISION POINT BLOCK / SECTION 1-B LOT 44 LOT AREA 42789 ft² SITE CLASS. PS DESIGN FLOW 480 gpd T.A.R. .3 gal/ft²

Septic Tank: 1000 Gallons; STB 338 Date 2/26/01

Pump Tank: 1000 Gallons; PT 285 Date 3/9/01

Pump Make: Myers Model ME505 Serial No. 2/01

Nitrification Field: No Fields 1 Square Feet 1350 Linear Feet 450

No Lines 5 @ 90' 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: PUMP INNOVATIVE

Repair System Description: PUMP PANEL

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees

☐ Other

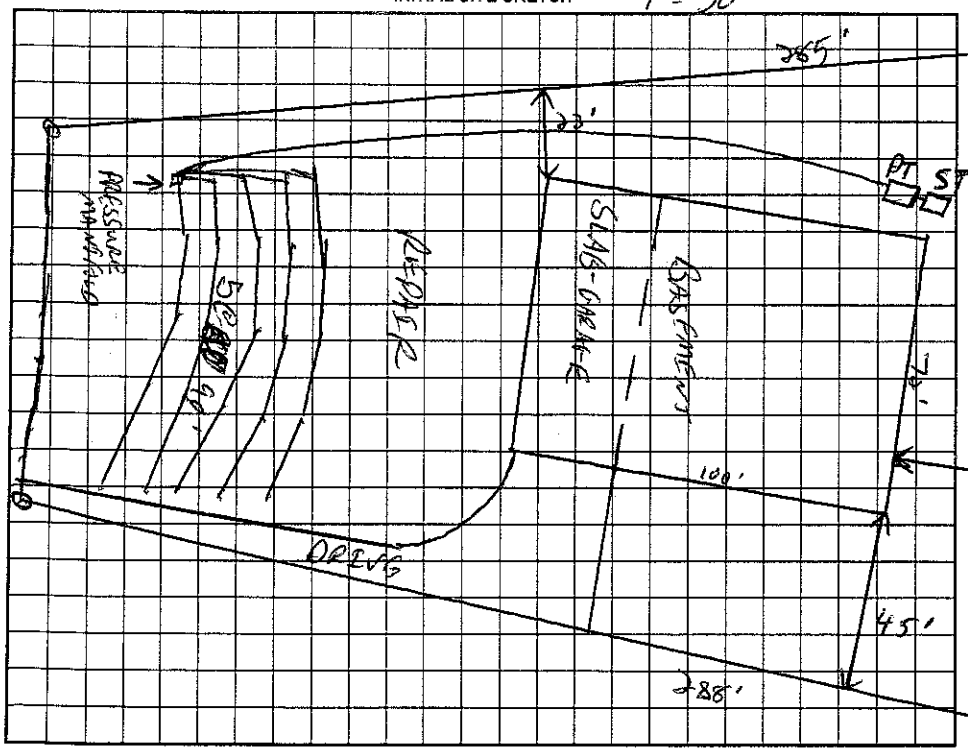
☐ Slab ☑ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☑ Community

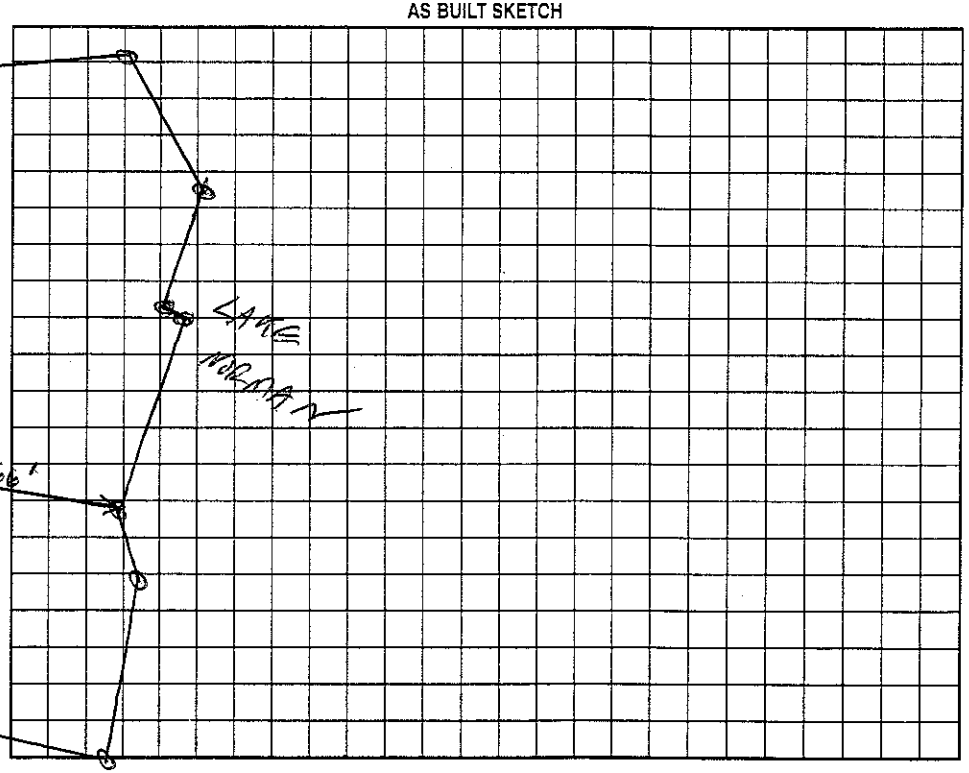
Comments:/Conditions:

Comments:/Conditions: Lines inspected 11/1/2000. EZ Flow installed. MPD

INITIAL SITE SKETCH 1" = 50'



AS BUILT SKETCH



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: [signature] date 7-25-00 Installed by: R & H

Improvement Permit by: [signature] ES date 7/24/00 Operation Permit by: [signature] R.S date 6/22/2001

Authorization to Construct by: [signature] ES date 7/24/00 Existing System Inspection by: date

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