122319

IREDELL COUNTY HEALTH DEPARTMENT

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

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

7/30 175

PERMIT# ~~5805~~ PIN# ~~4635-17-84~~ 4635-17-3732 DATE Nov. 5, '98

OWNER OR CONTRACTOR Crescent Resources c/o /Hughes, Hamel & Zande PHONE: Business _____ Home _____

ADDRESS P.O. Box 1003, Charlotte

LOCATION Brawley Sch RD TL Quaker Road at end

SUBDIVISION The Point BLOCK / SECTION I-C LOT 14 LOT AREA 55041 ~~ft²~~ + SF 14A SITE CLASS. RS DESIGN FLOW 480gpd L.T.A.R. 2-0.3

Septic Tank: 1000 Gallons; STB 338 Date 11-17-04

Pump Tank: 1000 Gallons; PT 27 Date 11-17-04

Pump Make: Goulds Model WE0312M Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1050 Linear Feet 350

No Lines 7 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: pm - 25% Red-Tan on 14A

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

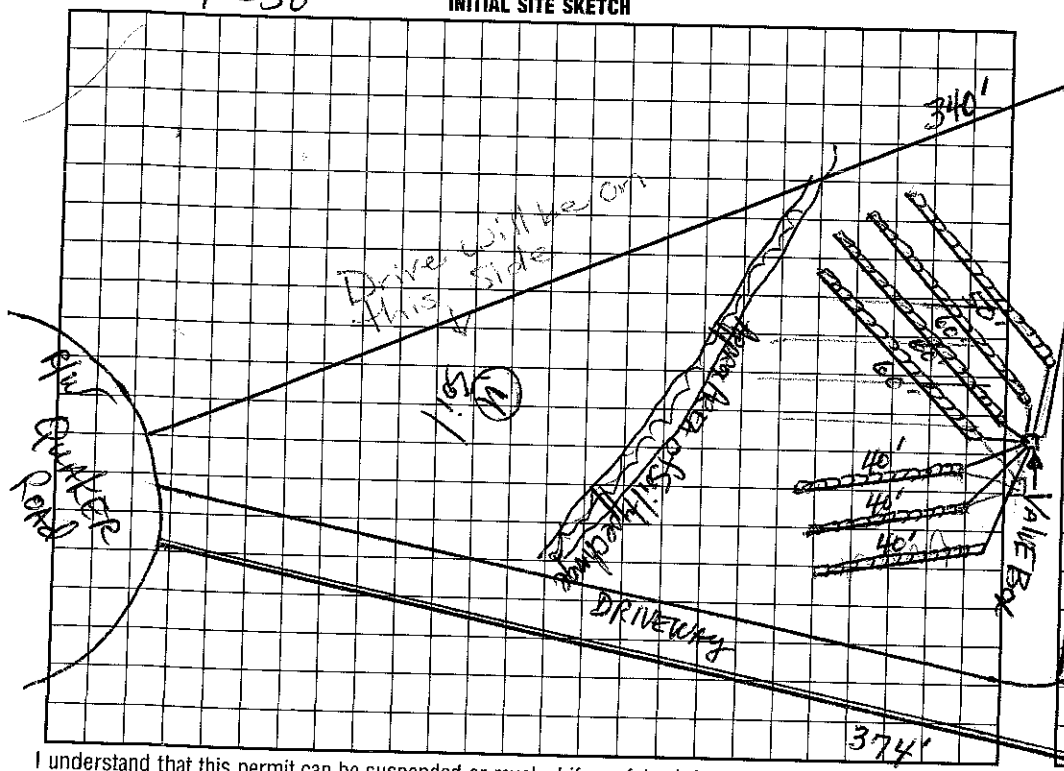
Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions: Reviewed Building plans & site plan 10/16/04, essentially in compliance with I.P. Drive is on other side of house

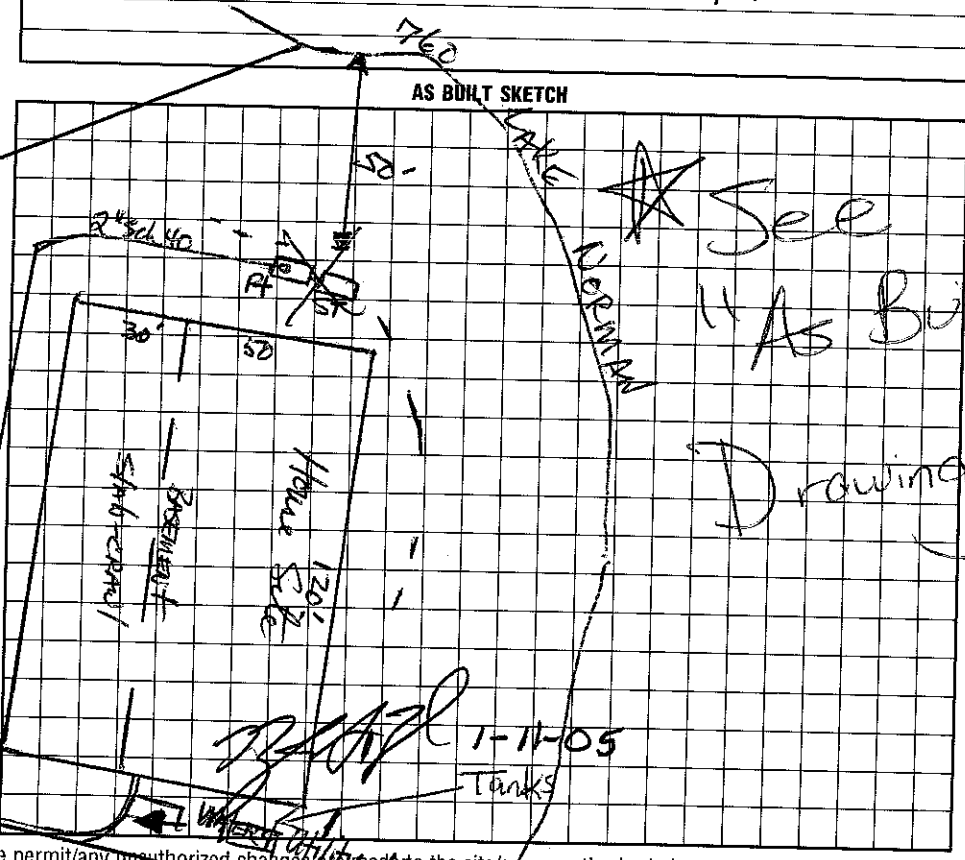
Comments:/Conditions: Tanks & lines checked 1/4/05 MD

1"=50'

INITIAL SITE SKETCH



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 10/04/98

Improvement Permit by: _____ date 11-5-98

Authorization to Construct by: _____ date 11/16/04

Installed by: Bobby Mayhew

Operation Permit by: _____ date 1/12/05

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