IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625

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

PERMIT # 177591

PIN # 4635220865

APPLICANT: Plattner Custom Builders LLC APPLICANT ADDRESS: P.O. Box 1138 Davidson, NC 28036

SITE ADDRESS: 104 Waterhouse Ct Mooresville, NC PHONE: 704 987-2111 ALT. PHONE: 704 363-6005

SITE DIRECTIONS: Brawley School Rd Around traffic circle 2nd R The Point Dr TL Meeting Tree TR Easton to Old Post to Falmouth

SUBDIVISION: The Pointe SECTION: A LOT # 27 LOT AREA: .99 Acre DESIGN FLOW: 480gpd L.T.A.R.: .3 Waterways

Septic Tank ~~1000~~ (gal) STB 444 Date 1-28-14

Pump Tank 500 (gal) PT Date

Pump Make 1500 Model Serial #

Nitrification Fields # Lines Linear Ft:

Trench Width Max. Trench Bottom Depth Gravel Depth

[X] New System [ ] Repair [ ] Expansion System Type: I II [III] IV V VI

System Description: Gravity - 25% Reduction

Repair System Description: Pump LP - 50% Reduction

Maintenance Agreement Required: [ ] YES [X] NO

[X] GRAVITY [ ] PRESSURE

[X] Residence No. Bedrooms 4

[ ] Business No. Persons

[ ] Other No. Employees

[ ] Slab [X] Crawl Space

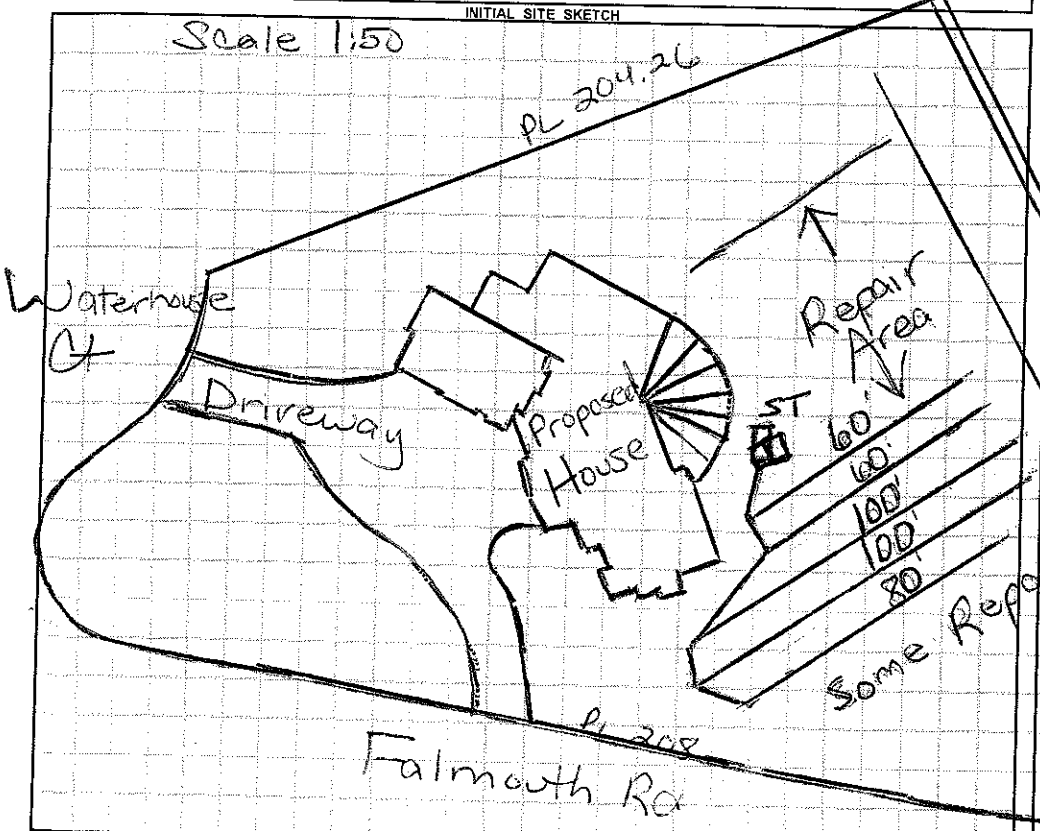
[ ] Basement w/ plumbing [ ] Basement w/o plumbing

Water Supply: [ ] Private [ ] Public [X] Community

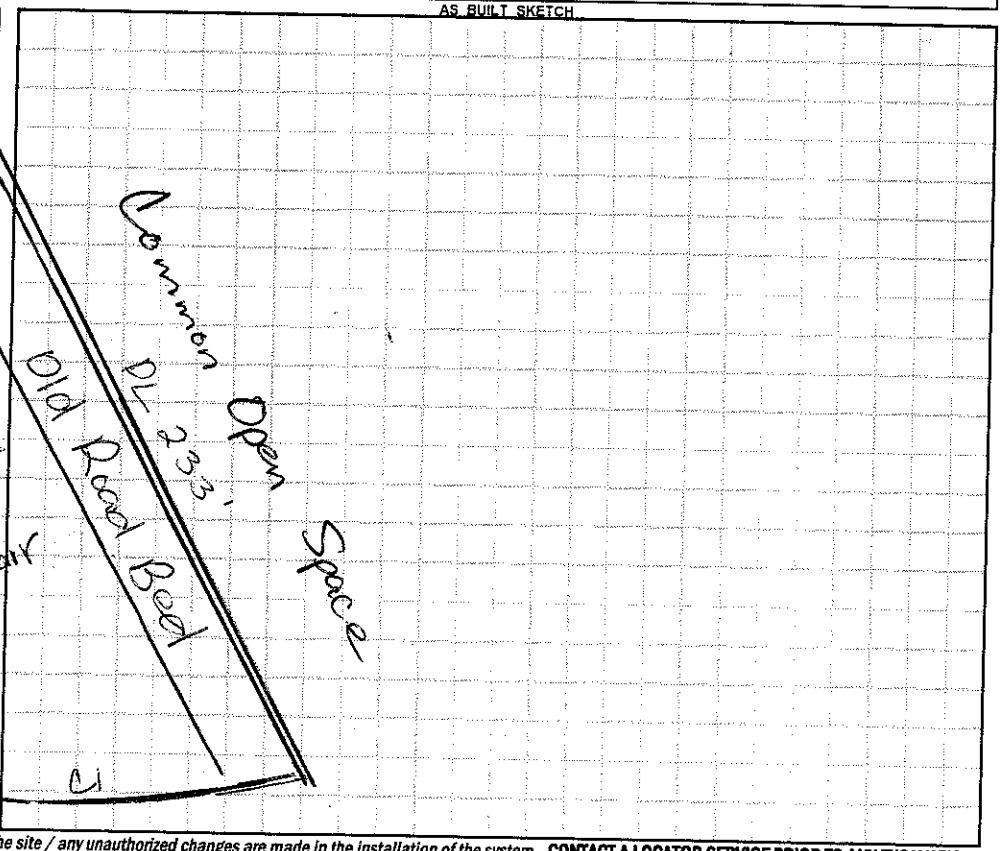
Comments / Conditions: Follow requirements in Crescent Communities Manuel

Must keep Septic at least 15Ft from any Cut 2Ft or greater

INITIAL SITE SKETCH



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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

[ ] **IMPROVEMENT PERMIT** *with plat valid without expiration.* [ ] **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* [ ] **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 5/1/13 Installed by: TD Lawing Grading

IMPROVEMENT PERMIT by: Date: 4/30/13 OPERATION PERMIT by: Date: 2-25-14

AUTHORIZATION TO CONSTRUCT by: Date: 4/30/13 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK