IREDELL COUNTY HEALTH DEPARTMENT

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

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 18702 DATE April 30, '95 TAX MAP NO. part of 2FB10 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR Crescent Resources Inc ~~CHENEY~~ PAUL SNIDER PHONE: Business _____ Home 948-1995 / 649-5365 ~~5712~~

ADDRESS PO Box 1003, Charlotte 46360-21-1758

LOCATION Brawley Sch Rd TR Isle of Pines TR Cove Creek Rd TR Mussel Ct on right at end

SUBDIVISION North Shore BLOCK / SECTION II L3 LOT 69 LOT AREA 40,899 sq ft SITE CLASS. RS per 1886 DESIGN FLOW 480 gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 6/16/97

Pump Tank: 1000 Gallons; PT 27 Date 7/6/97

Pump Make: HYDROMATIC Model SK.50 A1 Serial No. 8-97

Nitrification Field: No Fields 1 Square Feet _____ Linear Feet 270 +

No Lines 3 Trench Width ~~18~~ 24" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: LPP BRS

Repair System Description: same

Maintenance Agreement Required: ☑ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4/4

☐ Mobile Home No. Bathrooms _____

☐ Business No. Employees _____

☐ Other _____

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

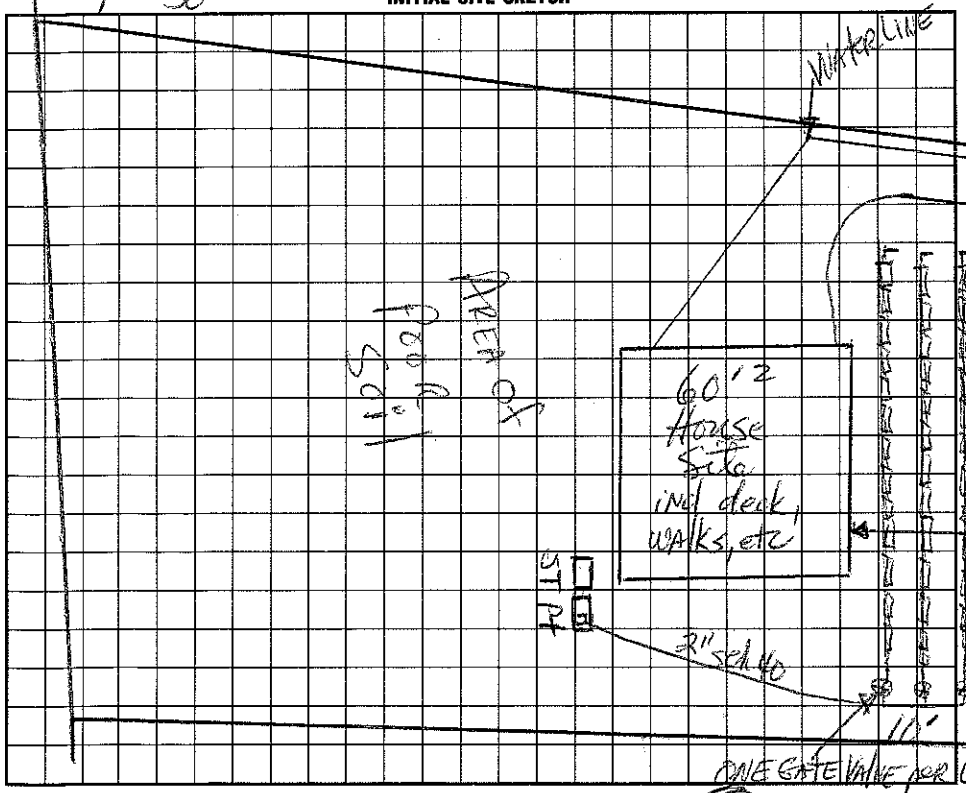
Water Supply: ☐ Individual ☐ ~~Community~~ ☐ Public

Comments: Recommend house site be moved further off street (up to 100' off R/W) to provide more area available for septic system and future repair.

Comments: DEVELOPER PERMIT

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 is ~~valid for 60 months~~ from date of issuance.

Signed: _____

Improvement Permit by: _____ date 4/30/95

Existing System Inspection by: _____ date _____

Installed by: Bob Mayhew

Certificate of Completion by: Wesley Sparks RS date 10/13/97

Operation Permit by: Wesley Sparks RS date 10/13/97

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