IREDELL COUNTY HEALTH DEPARTMENT

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

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

$325 11:00

PERMIT# 094920 PIN# ~~4625-94-1684~~ (pt) 4625-73-2299 DATE June 13, 01

OWNER OR CONTRACTOR Crescent Resources Inc. / Dierst Custom Homes PHONE: Business _____ Home _____

ADDRESS P.O. Box 1003 Charlotte NC 28201

LOCATION Brawley Sch RD. TR Athleboro TR Marbury on left

SUBDIVISION The Point BLOCK / SECTION 7 LOT 702/702A LOT AREA 30587 + 18794 ft² SITE CLASS. PSSFE DESIGN FLOW 480 gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 238 Date 9-17-02

Pump Tank: 1000 Gallons; PT ~~283~~ 338 Date 9-11-02

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 520/840 Linear Feet 280+

No Lines 3-4 Trench Width 24" min 8'oc Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: LPPPBBS

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: OR 36" MAX 9'oc

Comments:/Conditions:

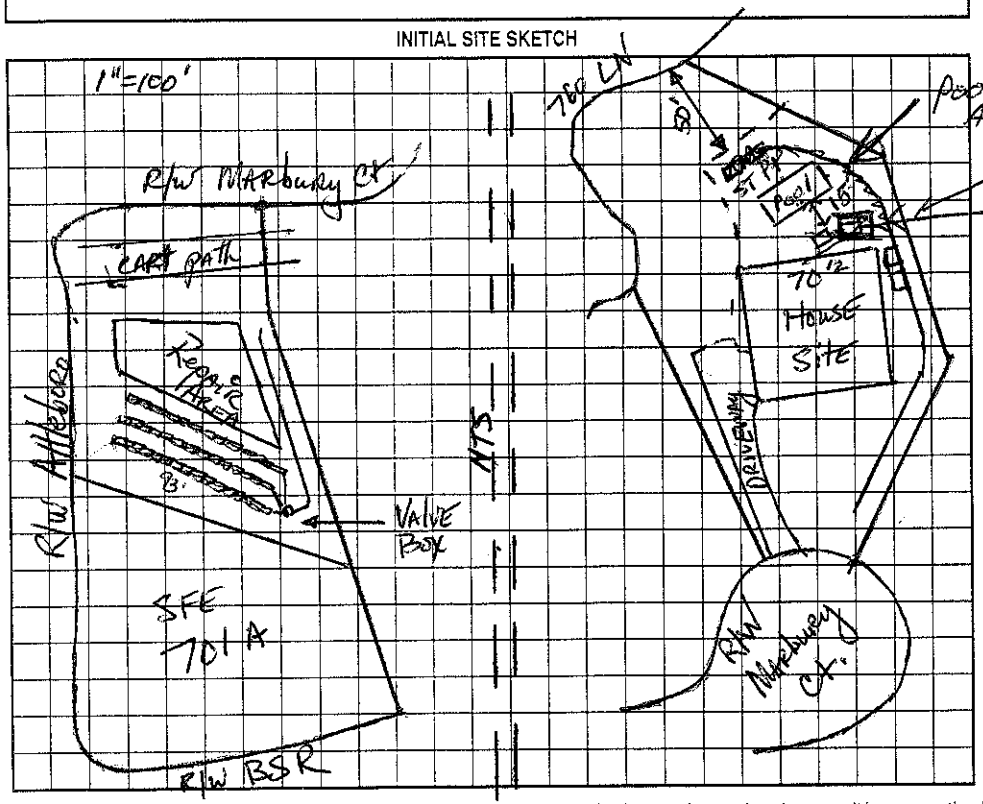
Plans Reviewed 3/13/02 GM

Checked lines, 6/26/2002

Tanks checked 11/4/02

Pres, Elected Alarm 11/18/2002

INITIAL SITE SKETCH



AS BUILT SKETCH

Pool Added

Tank Location changed

Outdoor Kitchen (No Plumbing)

The proposed / existing Outdoor Kitchen addition does not appear to impact the existing septic system.

**NOTE: Must be at least 5ft From Septic Tanks

Pump tank Maria Dotson R.S.

Date: 3/13/2012

ICHD-Environmental Health Division

*Owner says No plumbing in Outdoor kitchen

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 6-15-01 Installed by: R & H R.S.

Improvement Permit by: _____ R.S. date 6-13-01 Operation Permit by: Maria H Dotson R.S. date 11/18/2002

Authorization to Construct by: _____ R.S. date 3/13/02 Existing System Inspection by: _____ date _____

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