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. 18877 DATE Dec 2, '94 TAX MAP NO. 2SA51 Watershed: ☑ Yes ☐ No WSIV

OWNER OR CONTRACTOR Crescent Resources Corp PHONE: Business Home

ADDRESS PO box 1003, Charlotte

LOCATION Ramah Hill Road TR Bullfinch on left

SUBDIVISION Beacon Pointe BLOCK / SECTION 1 LOT 20 LOT AREA 1.95 ac SITE CLASS. PS on 1/3 DESIGN FLOW 480 gpd L.T.A.R. .03

Septic Tank: 1000 Gallons; STB Date

Pump Tank: 1000 Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet Linear Feet 280

No Lines 4 Trench Width 24" Max Trench Bottom Depth 28" Gravel Depth NA

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

System Description: LPPBPS

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

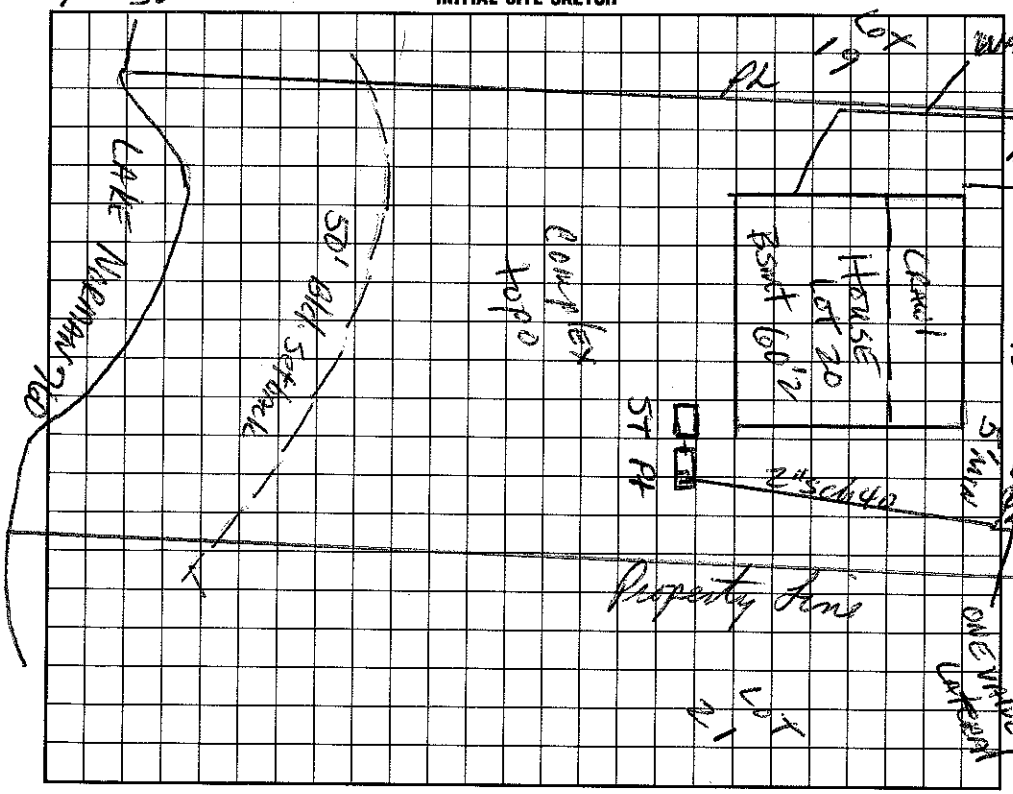
Water Supply: ☐ Individual ☑ Community ☐ Public

Comments: House located in old roadbed, Laterals to be installed on contour and shallow trench bottom depth.

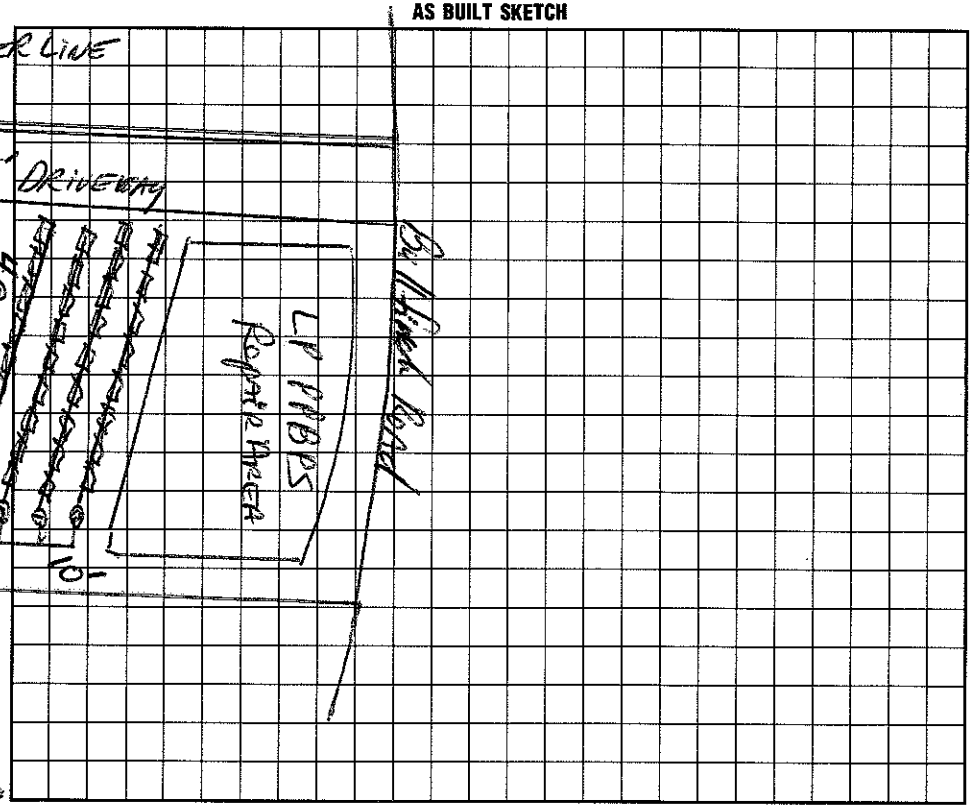
Comments: DEVELOPER PERMIT

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 is valid for 60 months from date of issuance.

Signed: [signature] 12/5/94

Improvement Permit by: [signature] date 12/2/94

Existing System Inspection by: date

Installed by:

Certificate of Completion by: date

Operation Permit by: date

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