IREDELL COUNTY HEALTH DEPARTMENT

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

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

$325

PERMIT# 092-382 PIN# ~~4639-73-4457 (pt.)~~ 4639-44-2172 DATE Feb 12, 01

OWNER OR CONTRACTOR Crescent Resources, Inc. / KW NICHOLSON CO. PHONE: Business _____ Home _____

ADDRESS P.O. Box 10003 Charlotte N.C. 28201

LOCATION Perth Rd. N. TL Fernhill Rd. TL Wildwood Cove Dr. 3rd Lot on left SFE on Right

SUBDIVISION Wildwood Cove BLOCK / SECTION _____ LOT 3 LOT AREA SFE 41,933 ft² SITE CLASS. PS DESIGN FLOW 480 gpd L.T.A.R. .03 3 AWS

Septic Tank: 1000 Gallons; STB 1012 Date 7/19/04

Pump Tank: 1000 Gallons; PT 17 Date 12/13/04

Pump Make: Gould Model WE0512 Serial No. MU4520L3

Nitrification Field: No Fields 1 Square Feet _____ Linear Feet 200 Rock

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

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

System Description: LPP AS on SFE 3A

Repair System Description: Same

Maintenance Agreement Required: ☑ Yes ☐ No

☑ House/Mod. Home No. Bedrooms ~~3~~ 4

☐ Mobile Home No. Bathrooms ~~3~~ 4

☐ Business No. Employees _____

☐ Other _____

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

Water Supply: ☑ Individual ☐ Public ☐ Community

Comments:/Conditions: * Recommend 36" wide trenches, 9' on center

8/9/04 - Plans reviewed, House is 3BORM. AWS

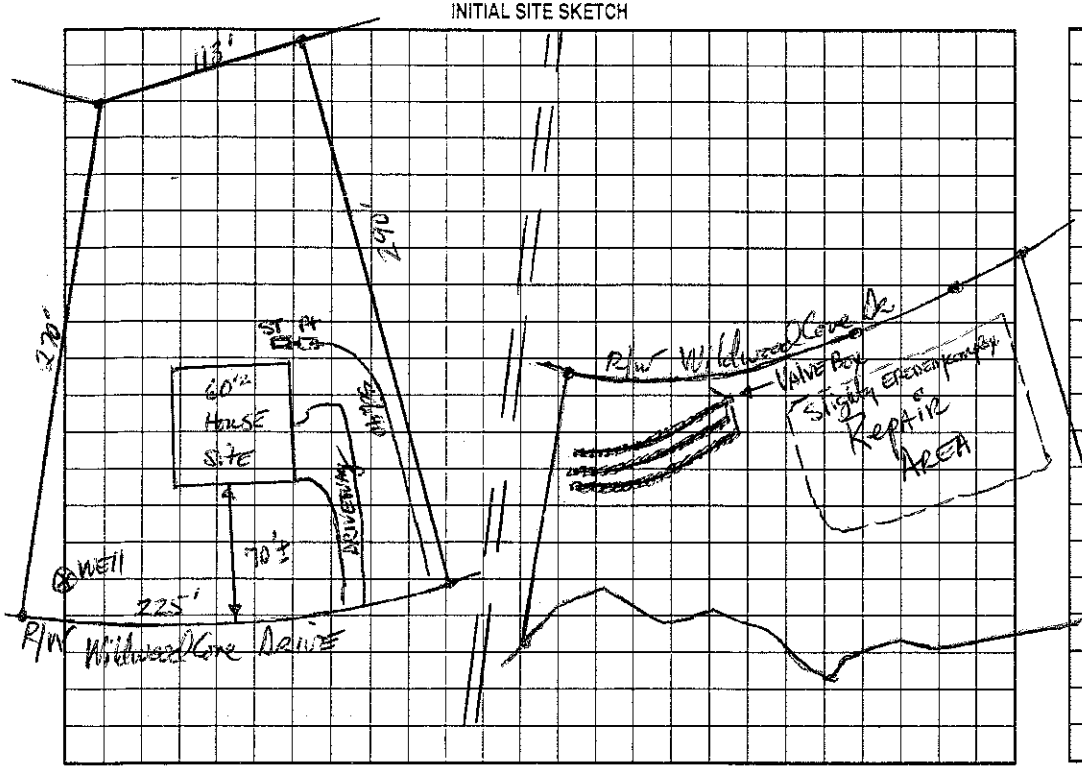
Use 200' of Pres Dosed 16" PPBPS. AWS.

Comments:/Conditions:

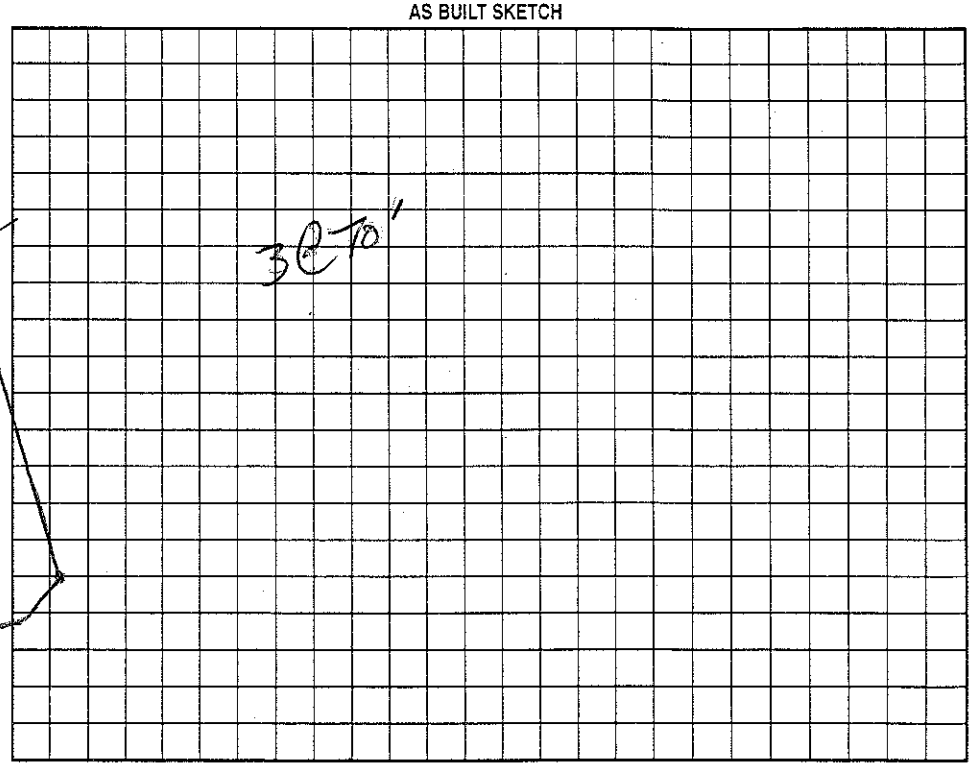
48 Panels

3/16" holes

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. 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 3-21-01 Installed by: Yount

Improvement Permit by: _____ date 2-12-04 Operation Permit by: Wesley Sparks RS. date 3/14/05

Authorization to Construct by: Wesley Sparks RS date 8/9/04 Existing System Inspection by: _____ date _____

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