IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (O) MOORESVILLE 704-664-5281

11:30

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

PERMIT# 127518 PIN# 4646.37902 DATE 5-16-05

OWNER OR CONTRACTOR James Ratliff/Crescent Home Bldr PHONE: Business 231-5862 ~~Home~~ Wk 951-2460

ADDRESS 1326 Grovewood Rd Charlotte NC 28208

LOCATION Williamson Rd TR Sundown Rd TL Brookway TR Elysian on right

SUBDIVISION More land Est BLOCK / SECTION ____ LOT 45 LOT AREA .449 Acre SITE CLASS. RS DESIGN FLOW 480 gpd L.T.A/R. .3

Septic Tank: 1000 Gallons; STB 820 Date 5/5/06

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No. Fields 1 Square Feet 1200' Linear Feet 400'

No. Lines 5@80' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description Gravity - 25% Reduction

Repair System Description Partial Repair

Maintenance Agreement Required: [ ] Yes [ ] No

[X] House/Mod. Home [ ] Mobile Home [ ] Business [ ] Other

No. Bedrooms 4 No. Bathrooms 2 No. Employees ____

[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

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

Comments:/Conditions:

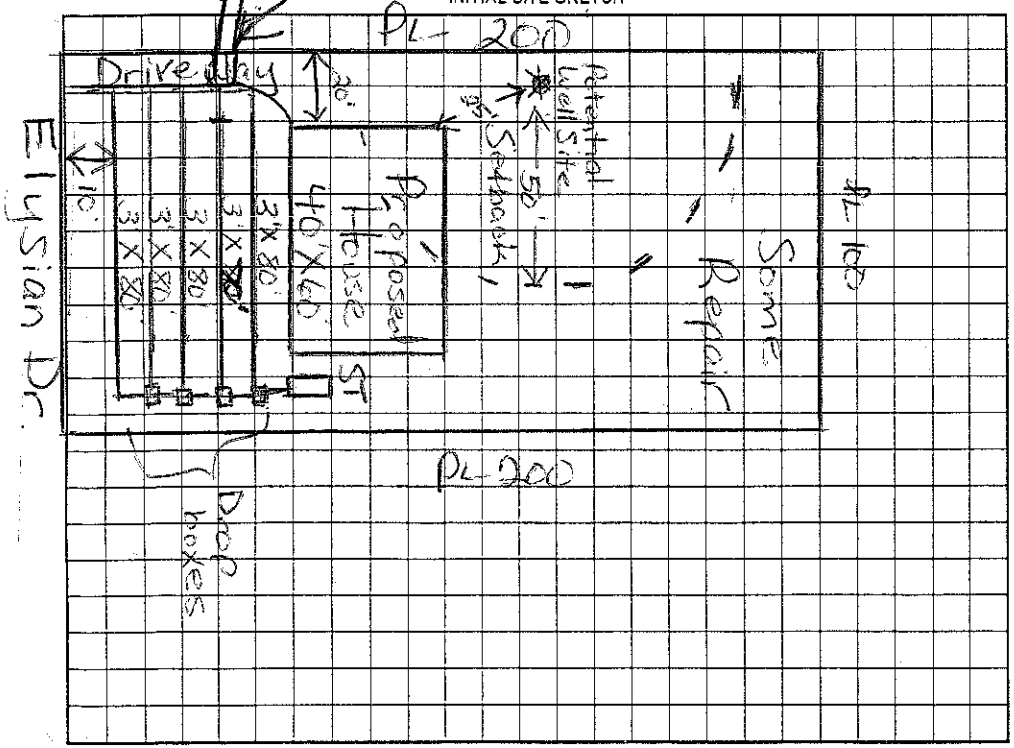
Neighbor's septic crossed P/L. Cut off at P/L and Backfilled w/ soil

Comments:/Conditions:

Lot deeded prior to 1983

INITIAL SITE SKETCH

Scale 1:50



AS BUILT SKETCH

EZ Flow Installed

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: James E. Ratliff date 6-17-05 Installed by: Dennis Willis

Improvement Permit by: Maria H. Dotson RS date 5/16/05 Operation Permit by: RS date 5/31/06

Authorization to Construct by: RS date 2/22/06 Existing System Inspection by: ____ date ____

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