ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625

PERMIT # OSWP-2023-25523

SEPTIC: IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM

PIN # 4627-61-8467

APPLICANT / OWNER: IQ CUSTOM CONSTRUCTION INC- USE THIS ONE | APPLICANT ADDRESS: 113 N Center St Ste 103, Statesville, NC 28677

SITE ADDRESS: 351 GRASSHOPPER CIR, MOORESVILLE, NC 28117 | PHONE: 7044006472 | ALT. PHONE:

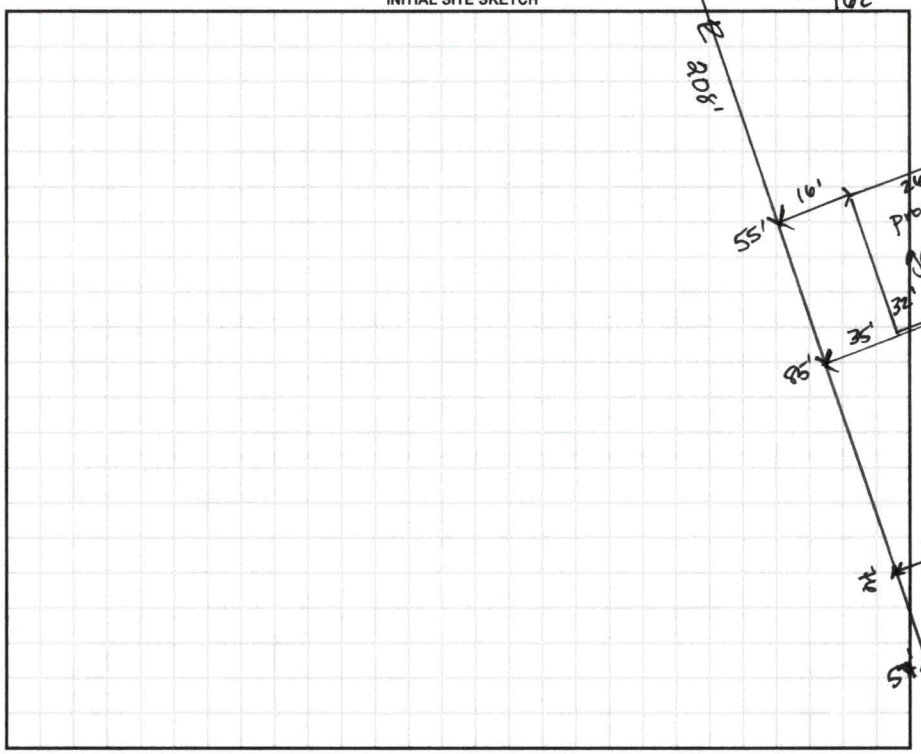
SITE DIRECTIONS: W Brawley School Rd -> R McKendree -> R Grasshopper -> R to stay on Grasshopper -> lot on R | SAP CONTROLLED: YES ☐ NO ☐

SUBDIVISION: CL&T | SECTION: 8 | LOT #: 450 | LOT AREA: 0.67 | DESIGN FLOW: 240 | L.T.A.R.: EXISTING

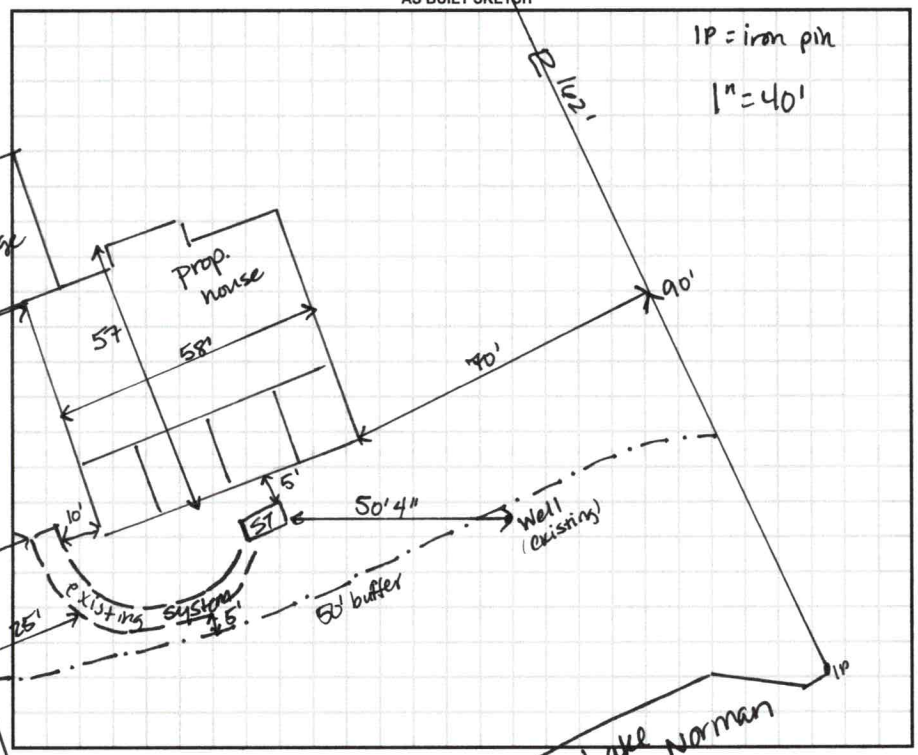
Septic Tank: (gal) EX	STB:	Date:	☐ New System ☐ Repair ☐ Expansion	System Type: II	☑ Residence	No. Bedrooms: 2	Water Supply: Existing Well
Pump Tank: (gal)	PT:	Date:	System Description: EXISTING		☐ Business	No. Persons: 4	
Pump Make:	Model:	Serial #:	Repair System Description:		☐ Other	No. Employees:	
# Nitrification Fields: 1	# Lines: EXISTING	Linear Ft.: EXISTING	Maintenance Agreement Required: ☐ YES ☑ NO		☐ Slab	☐ Crawl Space	
Trench Width: EXIST	Trench Bottom Depth (Low side): EXISTING		Gravel Depth: EXISTING	☑ GRAVITY ☐ PRESSURE	☑ Basement w/ Plumbing	☐ Basement w/o Plumbing	

Comments / Conditions: Do not pave, grade, drive, park, or bury utilities in drain field area. Keep slab at least 5' off all parts of septic system, any foundation drains must be 10' off. Recommend removing drainage pipes over septic system.

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. CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

☐ IMPROVEMENT PERMIT with plat valid without expiration. ☐ IMPROVEMENT PERMIT with site plan valid for 60 mos. ☐ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

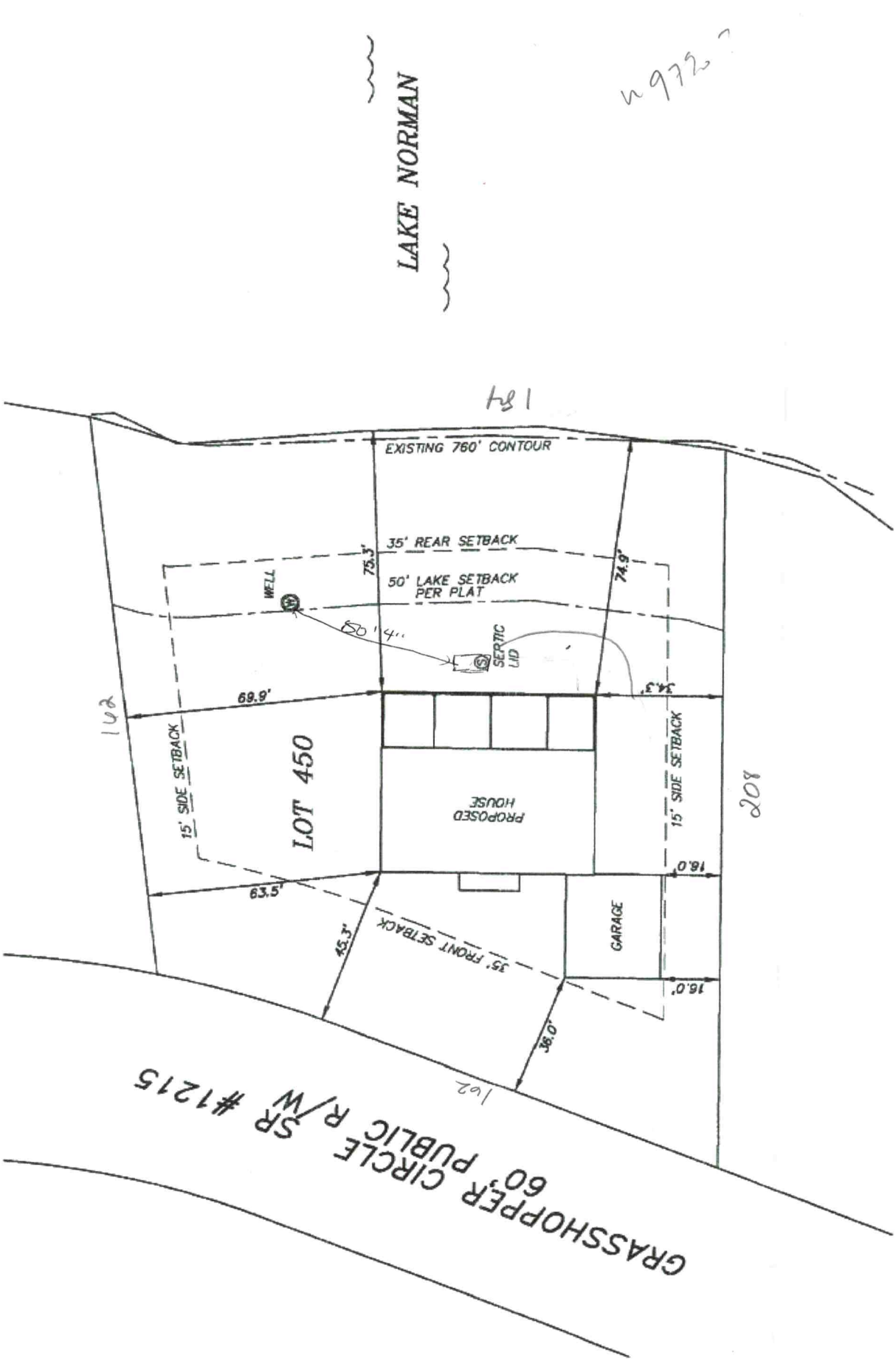
Owner / Applicant Signature: Natalie Russell | Date: | Installed By:

IMPROVEMENT PERMIT by: | Date: | OPERATION PERMIT by: | Date:

AUTHORIZATION TO CONSTRUCT by: | Date: | Existing System Inspected By: D. Mebery | Date: 6/22/23

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 BETWEEN 8am-9am the day the inspection is needed.


GRASSHOPPER CIRCLE SR #1215
60' PUBLIC R/W
162
36.0'
16.0'
35' FRONT SETBACK
45.3'
63.5'
GARAGE
16.0'
15' SIDE SETBACK
PROPOSED HOUSE
LOT 450
15' SIDE SETBACK
208
182
34.3'
69.9'
SEPTIC
LID
WELL
50' LAKE SETBACK PER PLAT
74.9'
75.3'
35' REAR SETBACK
EXISTING 760' CONTOUR
184
LAKE NORMAN


LAKE NORMAN
EXISTING 760' CONTOUR
35' REAR SETBACK
50' LAKE SETBACK PER PLAT
75.3'
74.9'
WELL
SEPTIC LID
69.9'
15' SIDE SETBACK
LOT 450
PROPOSED HOUSE
15' SIDE SETBACK
16.0'
63.5'
15.3'
35' FRONT SETBACK
GARAGE
16.0'
36.0'
GRASSHOPPER CIRCLE SR 60' PUBLIC R/W #1215

4627618467

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Jerry Pilcher DATE 12-6-78 PERMIT NO. 72

PHONE: Business _____ Home _____

LOCATION 1100 TRon 1115 TR on 1215

S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 450 SECTION OR BLOCK NO. 8

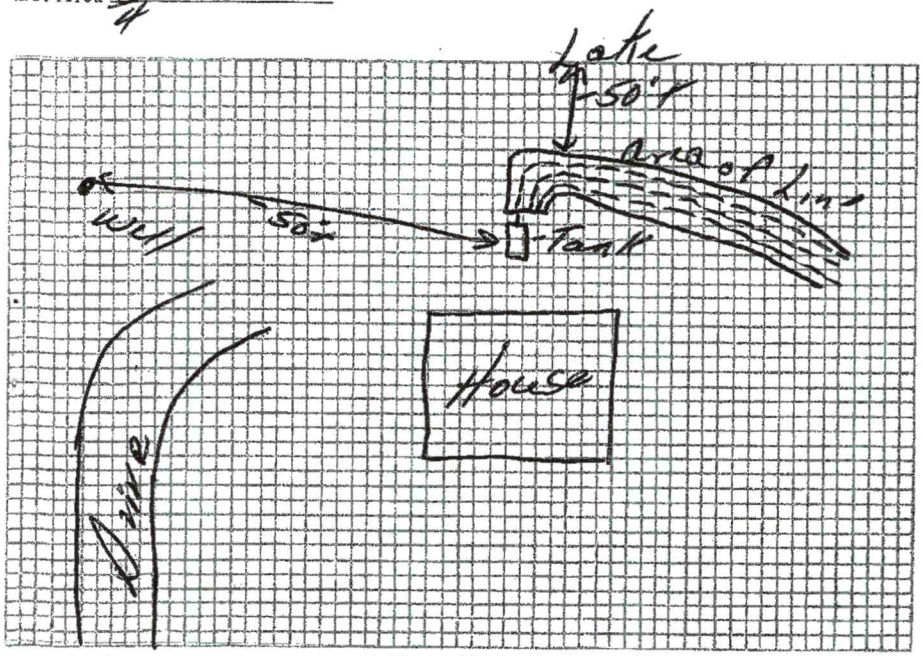
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	
Auto. Dishwasher	Yes (✓)	No ( )	
Auto. Wash. Machine	Yes (✓)	No ( )	
Site Suitable	Yes (✓)	No ( )	

Character & Porosity of Soil Existing System
Percolation Rate _____
Topography _____
Depth to Water Table _____
Rock or other impervious formations _____

Lot Area 3/4 ac



Plot of System

Size of Tank Existing Gals.
Nitrification Field:
No. of Lines Existing
Sq. Ft. _____ Linear Ft. _____
Depth of Stone in Lines _____
Water Supply: Individual ( )
Public ( )

Installed by _____

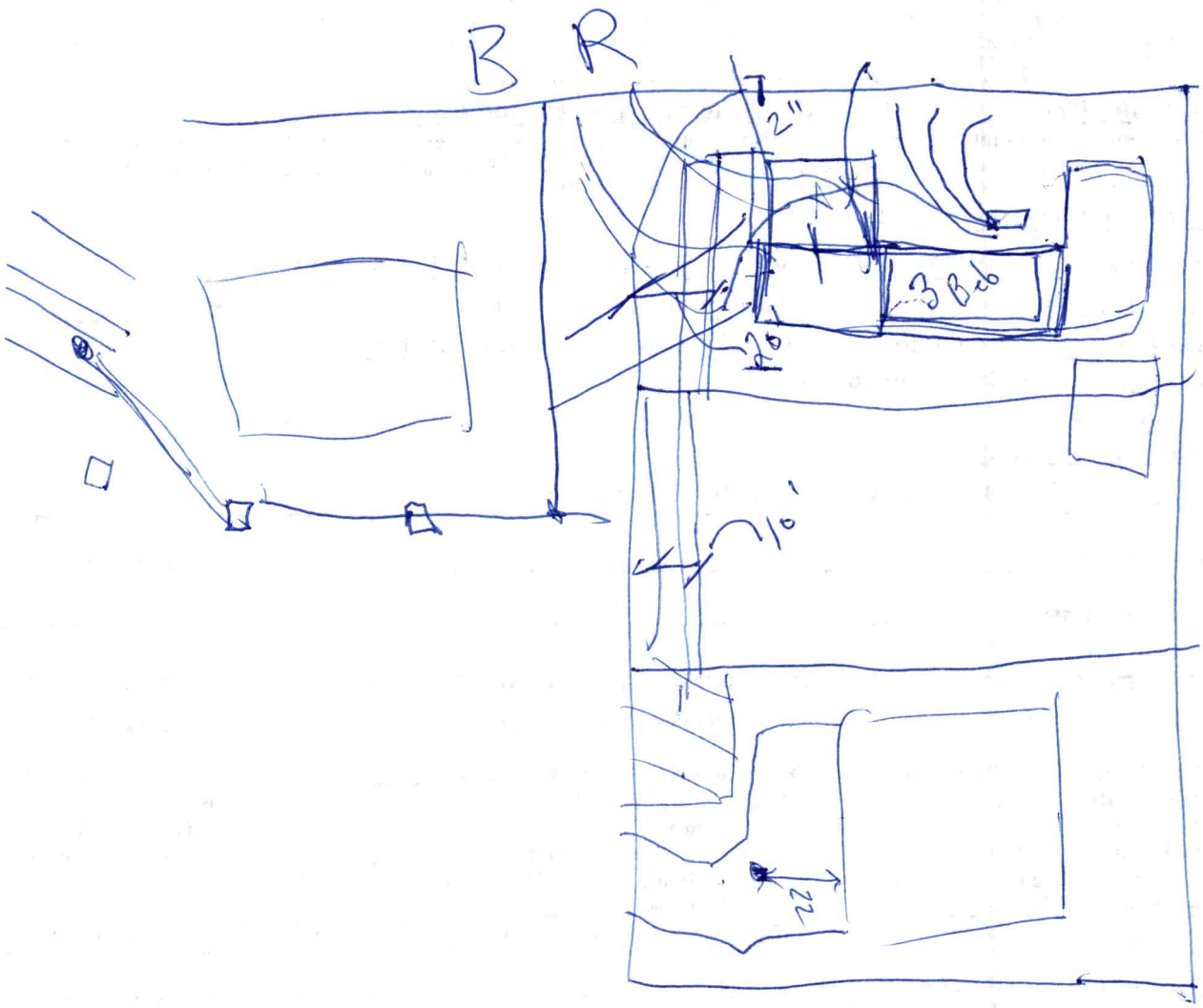
IMPROVEMENTS PERMIT BY _____

COMMENTS: System Working OK at Time of This Inspection

CERTIFICATE OF COMPLETION BY John Houston DATE 12-6-78

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold


B R
2"
3 Bo
20
10'
22