ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # OSWP 2023-42795

SEPTIC: IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM Repair PIN # 4713 -- 56 -- 1835

APPLICANT/OWNER: Lentz Wastewater Management, Inc APPLICANT ADDRESS: 463 Lentz Rd, Statesville, NC 28625

SITE ADDRESS: 151 Doubletree Dr, Statesville, NC 28677 PHONE: (541) 761-9297 ALT. PHONE (980) 829-3278

SITE DIRECTIONS: Old Mountain, Bethlehem, Doubletree SAP CONTROLLED: ☐ YES ☐ NO

SUBDIVISION: Mountain Road Village SECTION: P2 LOT # 26 LOT AREA: .57 AC DESIGN FLOW: Ext L.T.A.R.: Ext

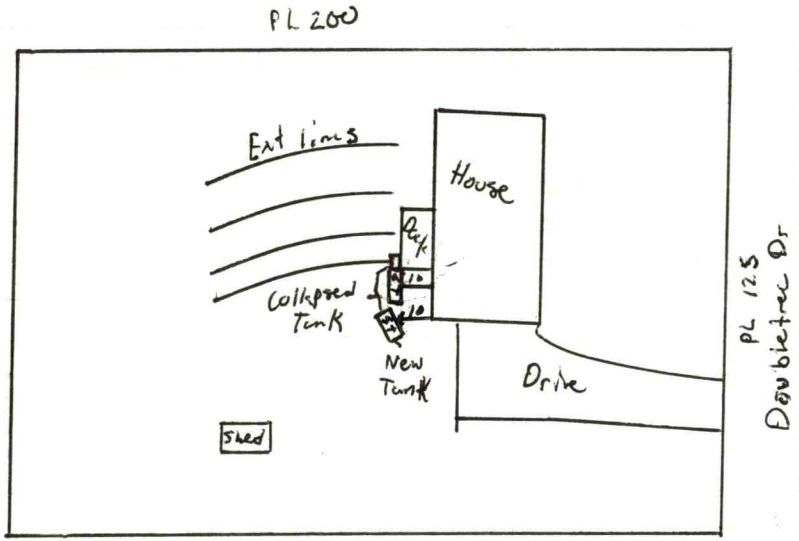
Septic Tank	1000	(gal)	STB	7160	Date	11/16/23	☐ New System	☑ Repair	☐ Expansion	System Type: I II III IV V VI	
Pump Tank		(gal)	PT		Date		System Description:				
Pump Make			Model		Serial #		Repair System Description:	Tank Replacement			
# Nitrification Fields	Ext	# Lines	Ext		Linear Ft	Ext	Maintenance Agreement Required:	☐ YES	☑ NO		
Trench Width	Ext	Trench Bottom Depth(Low side)		Ext	Gravel Depth	Ext	☑ GRAVITY	☐ PRESSURE			

☑ Residence	No. Bedrooms	3	**Water Supply**
☐ Business	No. Persons	6	☐ Private
☐ Other	No. Employees		☑ Public
☐ Slab	☐ Crawl Space		☐ Community
☐ Basement w/plumbing			☐ Basement w/o plumbing

Comments / Conditions: Pump, crush, fill old tank. Place new tank where proper fall can be met.

INITIAL SITE SKETCH

1=50



AS BUILT SKETCH

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 between 8am-9am
the day the inspection is needed. Be sure to speak with an inspector to confirm your time.

Installed as drawn.

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: Online Signature Date: Installed by: Lentz Wastewater

IMPROVEMENT PERMIT by: Matt Wilkie Date: 12/19/23 OPERATION PERMIT by: Sarah Williams Date: 1/12/2024

AUTHORIZATION TO CONSTRUCT by: Matt Wilkie Date: 12/19/23 Existing System Inspected by: Date:

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

Item	Date	Initials
Drain Lines Checked		
Tanks Checked		
Pressure Manifold or Valve Box Checked		
Pressure Head Set		
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract Needed? Y / N		
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	



Tax Map Information

• PIN	4713561835.000
• Address	151 DOUBLETREE DR
• Account #	Acct 80102387
• Tax Owner	CHANDLER WAYNE
• Mailing Address	151 DOUBLETREE DR
•	STATESVILLE, NC 28677
• GIS Owner	CHANDLER WAYNE
• Deed Info	23E / 549 - WB - 20230308
• Tax Acres	0.57 AC
• Lot #	26
• Description	MOUNTAIN RD VILLAGE P2 PB21-72-72A
• Zoning	RA
• Old Parcel #	1408K08000A026
• Bldg Value	$95,020
• OBXF Value	$9,000
• Land Value	$30,000
• Total Value	$134,020
• Defer Value	$0
• Tax Districts	-ALLCNTY FIRE- -

IREDELL COUNTY NC

MAP FOR REFERENCE ONLY
NOT A LEGAL DOCUMENT

Iredell County, North Carolina makes no claims and no warranties, expressed or implied, concerning the validity or accuracy of the GIS data presented on this map.

Geometry updated 11/15/2023
Data updated 11/14/2023

Print map scale is approximate. Critical layout or measurement activities should not be done using this resource.

13420.

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 BEN STIKELEATHER DATE 9-30-91 PERMIT NO. BK-8-A-26.

PHONE: Business _____ Home _____

LOCATION Bethlehem Rd. off Old Mtn. Rd. go 1/8 mi. Rt. L. on paved st. go 1/8 mi. on left. S. R. No. _____

SUBDIVISION NAME MOUNTAIN ROAD VILLAGE. LOT NO. 26. SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes ( ) No (✓)

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area Ample.

Character & Porosity of Soil Prov. Suitable.

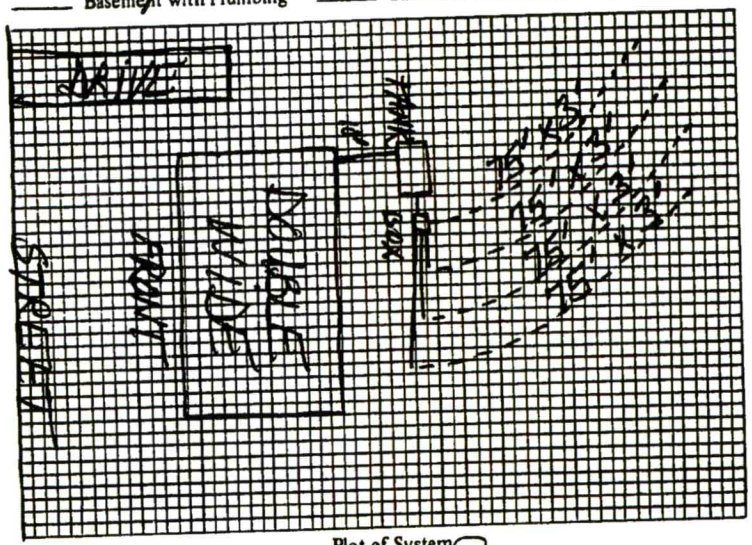
Percolation Rate 40 Min/1 in. Sq. Ft.

Topography 2

Depth to Water Table 10'

Rock or other impervious formations none observed.

_____ Basement with Plumbing _____ Basement without Plumbing (✓) No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field: 4

No. of Lines 4

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual ( )

Public (✓)

Installed by Claffin Farms

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Brown DATE 9-30-91.

EXISTING SYSTEM CHECKED BY: _____ DATE _____

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

Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making