IREDELL

# ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT #OSWP 2024-00040

PIN #4722 - 85 - 5014

APPLICANT/OWNER: Lentz Wastewater APPLICANT ADDRESS: 463 Lentz Rd, Statesville

SITE ADDRESS: 598 Old Mountain Rd, Statesville 28677 PHONE: 704-692-8500 ALT. PHONE

SITE DIRECTIONS: 1155 - Old Mountain SAP CONTROLLED: ☐ YES ☐ NO

SUBDIVISION: - SECTION: - LOT # - LOT AREA: 0.8 DESIGN FLOW: Ex L.T.A.R.(Initial): Ex L.T.A.R (Repair): Ex

Septic Tank 1000 (gal) STB Infiltrator Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

# Nitrification Fields Ex # Lines Ex Linear Ft Ex

Trench Width Ex *Max. Trench Depth(Initial) Ex *Max. Trench Depth(Repair) Ex Gravel Depth Ex

* Measured on the downhill side of the trench

☐ New System ☒ Repair ☐ Expansion System Type: I (II) III IV V VI

System Description: -

Repair System Description: Tank Replacement

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

Effluent Standard: ☒ DSE ☐ HSE ☐ TS-I ☐ TS-II ☐ RCW ☐ NSF/ANSI 40

Usable Depth to LC (Initial): Ex

☒ Residence No. Bedrooms Ex

☐ Business No. Persons Ex

☐ Other No. Employees

☐ Slab ☐ Crawl Space

☒ Basement w/plumbing ☐ Basement w/o plumbing

Usable Depth to LC (Repair): Ex *Limiting Condition*

**Water Supply**

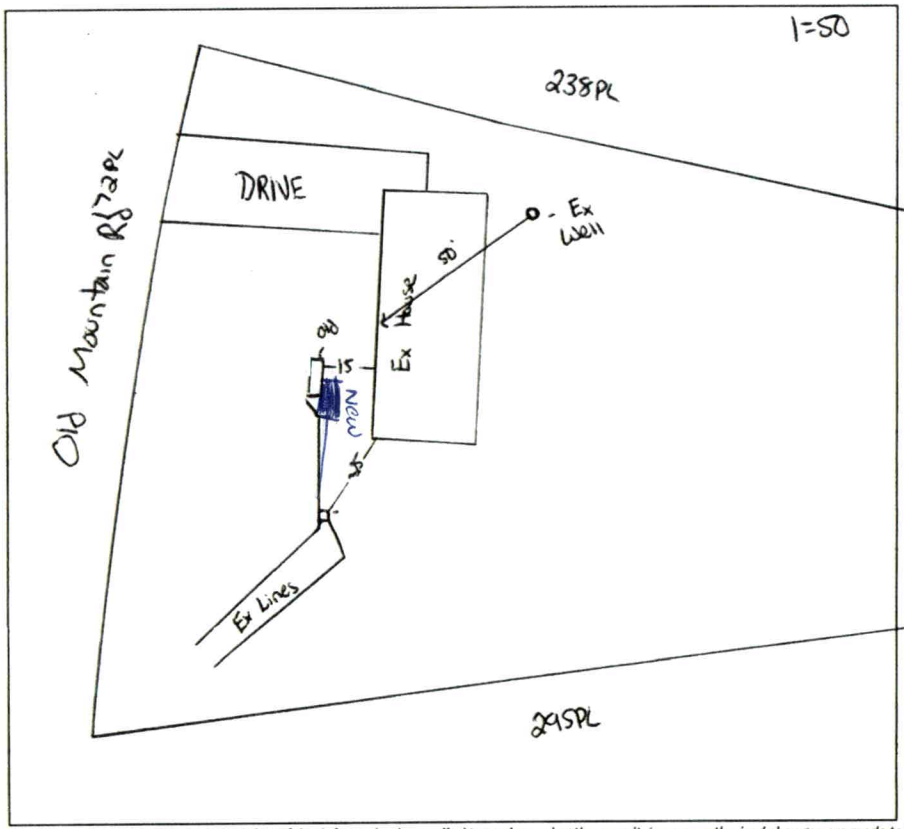
☒ Private

☐ Public

☐ Community

Comments / Conditions: Pump, crush, & fill old tank. Replace distribution if necessary.

INITIAL SITE SKETCH




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.

As Built tank location in blue

*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: -

IMPROVEMENT PERMIT by: Cory Hill Date: 5/1/24

AUTHORIZATION TO CONSTRUCT by: Cory Hill Date: 5/1/24

Installed by: Ryan Byers

OPERATION PERMIT by: D. Mebane Date: 5/20/24

Existing System Inspected by: Date:

# ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 x3456 Mooresville Office (704) 660-3625 SW

PERMIT : OSWP 2024-522410

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

PIN # 4722 -- 85 -- 5014

APPLICANT/OWNER: Lentz Wastewater APPLICANT ADDRESS: 463 Lentz Rd, Statesville

SITE ADDRESS: 598 Old Mountain Rd, Statesville 28677 PHONE: 704-692-8500 ALT. PHONE

SITE DIRECTIONS: 1155 - Old Mountain SAP CONTROLLED: ☐ YES ☐ NO

SUBDIVISION: - SECTION: - LOT # - LOT AREA: 0.8 DESIGN FLOW: Ex L.T.A.R.(Initial): Ex L.T.A.R (Repair): Ex

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 | (gal) | STB | | Date | | | | | | |
| Pump Tank | | (gal) | PT | | Date | | | | | | |
| Pump Make | | | Model | | Serial # | | | | | | |
| # Nitrification Fields | Ex | | # Lines | Ex | Linear Ft | Ex | | | | | |
| Trench Width | Ex | *Max. Trench Depth(Initial) | Ex | *Max. Trench Depth(Repair) | Ex | Gravel Depth | Ex | | | | |

* Measured on the downhill side of the trench

☐ New System ☒ Repair ☐ Expansion System Type: I (II) III IV V VI

System Description: -

Repair System Description: Tank Replacement

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

Effluent Standard: ☒ DSE ☐ HSE ☐ TS-I ☐ TS-II ☐ RCW ☐ NSF/ANSI 40

Usable Depth to LC (Initial): Ex

☒ Residence No. Bedrooms Ex

☐ Business No. Persons Ex

☐ Other No. Employees

☐ Slab ☐ Crawl Space

☒ Basement w/plumbing ☐ Basement w/o plumbing

Usable Depth to LC (Repair): Ex *Limiting Condition*

**Water Supply**

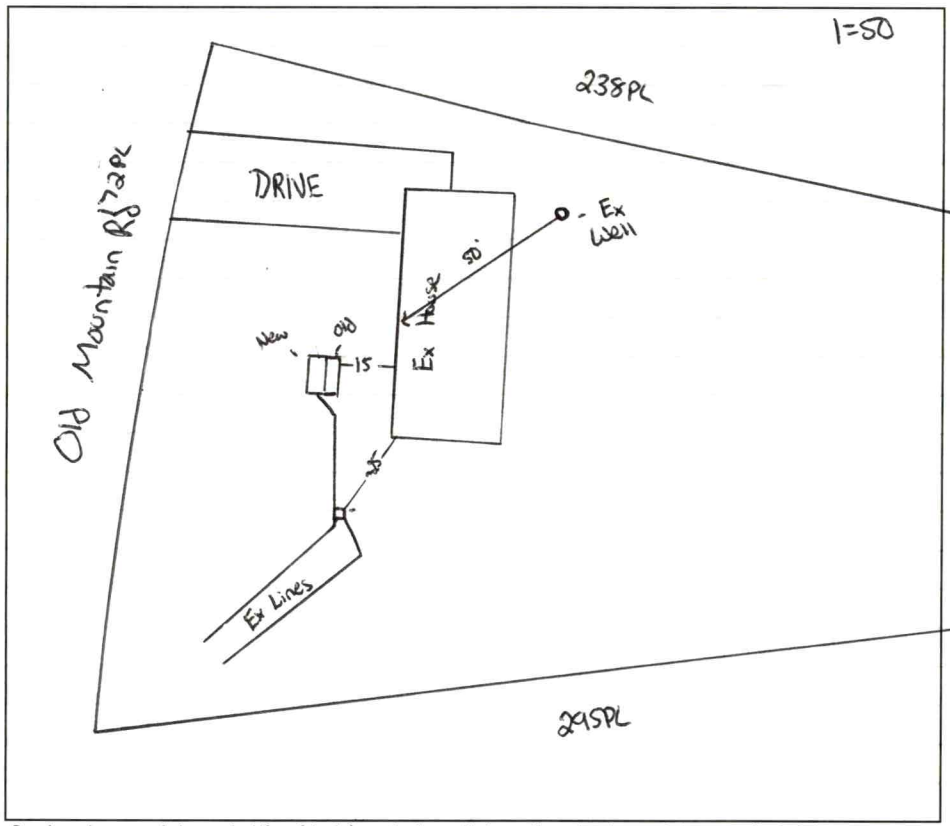
☒ Private

☐ Public

☐ Community

Comments / Conditions: Pump, crush, & fill old tank. Replace distribution if necessary.

INITIAL SITE SKETCH




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.**

*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: -

IMPROVEMENT PERMIT by: Cory Hill Date: 5/1/24

AUTHORIZATION TO CONSTRUCT by: Cory Hill Date: 5/1/24

Installed by:

OPERATION PERMIT by: Date:

Existing System Inspected by: Date:

| 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? _____ | |

# PERMIT SNAPSHOT REPORT OSWP-2024-52240 FOR IREDELL COUNTY

| | | | | | |
|---|---|---|---|---|---|
| **Permit Type:** | Environmental Health OSWP | **Project:** | | **App Date:** | 04/26/2024 |
| **Work Class:** | EH Septic Permit | **District:** | Iredell County | **Exp Date:** | NOT AVAILABLE |
| **Status:** | PRIORITY PERMIT | **Square Feet:** | 0.00 | **Completed:** | NOT COMPLETED |
| **Valuation:** | $0.00 | **Assigned To:** | Whicker, Cory | **Approval Expire Date:** | |

**Description:** The septic tank is cracked. Cory Whicker looked at on-site before covering up.

| | | |
|---|---|---|
| **Parcel:** 4722855014.000 Main | **Address:** 598 Old Mountain Rd Statesville, NC 28677 Main | **Zone:** RA(Residential Agricultural District) |

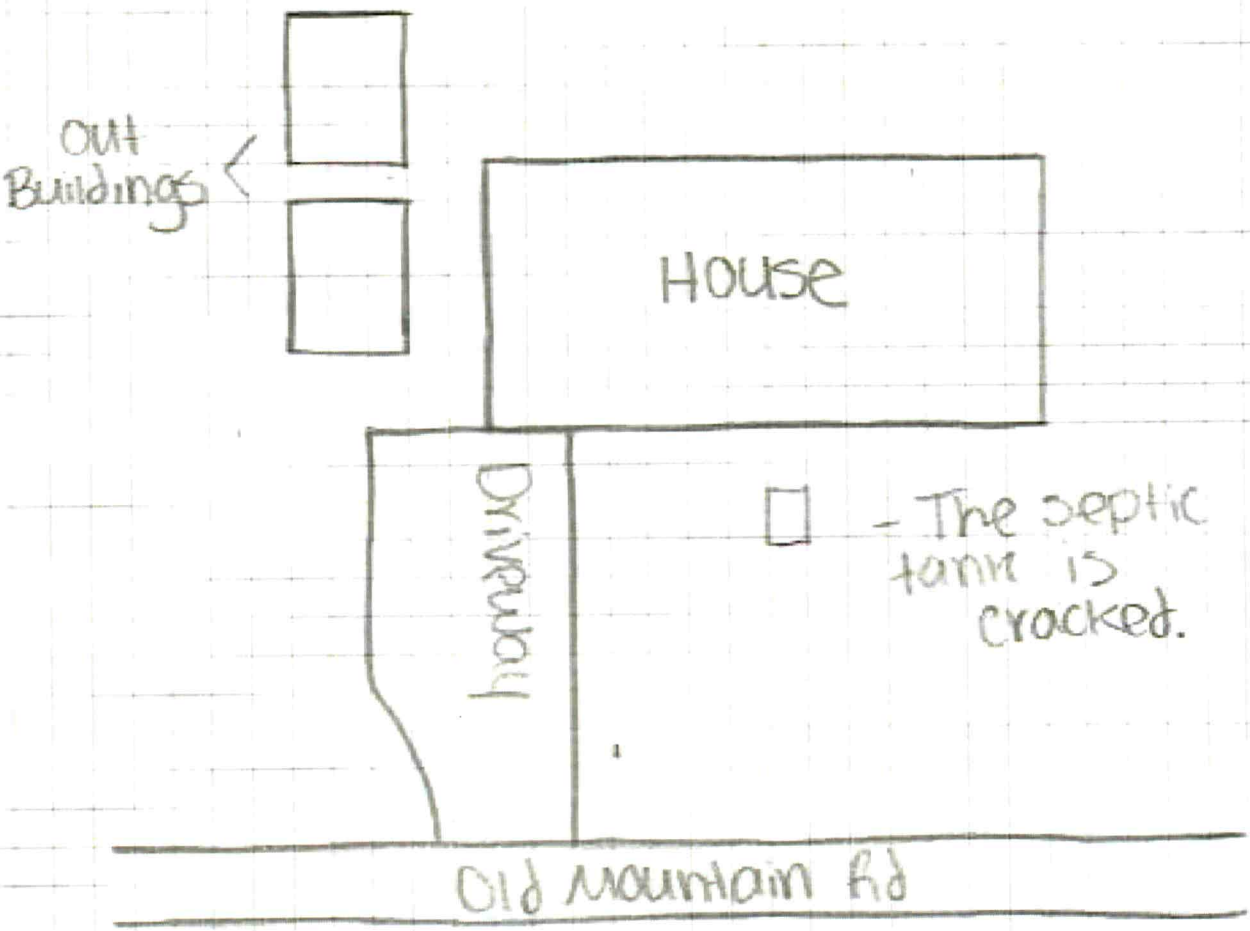
| Property Owner | Applicant/Authorized Agent |
|---|---|
| Katrina Potts | Jeanie Lentz |
| Home: (704) 692-8500 | 463 Lentz Road |
| | Statesville, NC 28625 |

**Permit Custom Fields**

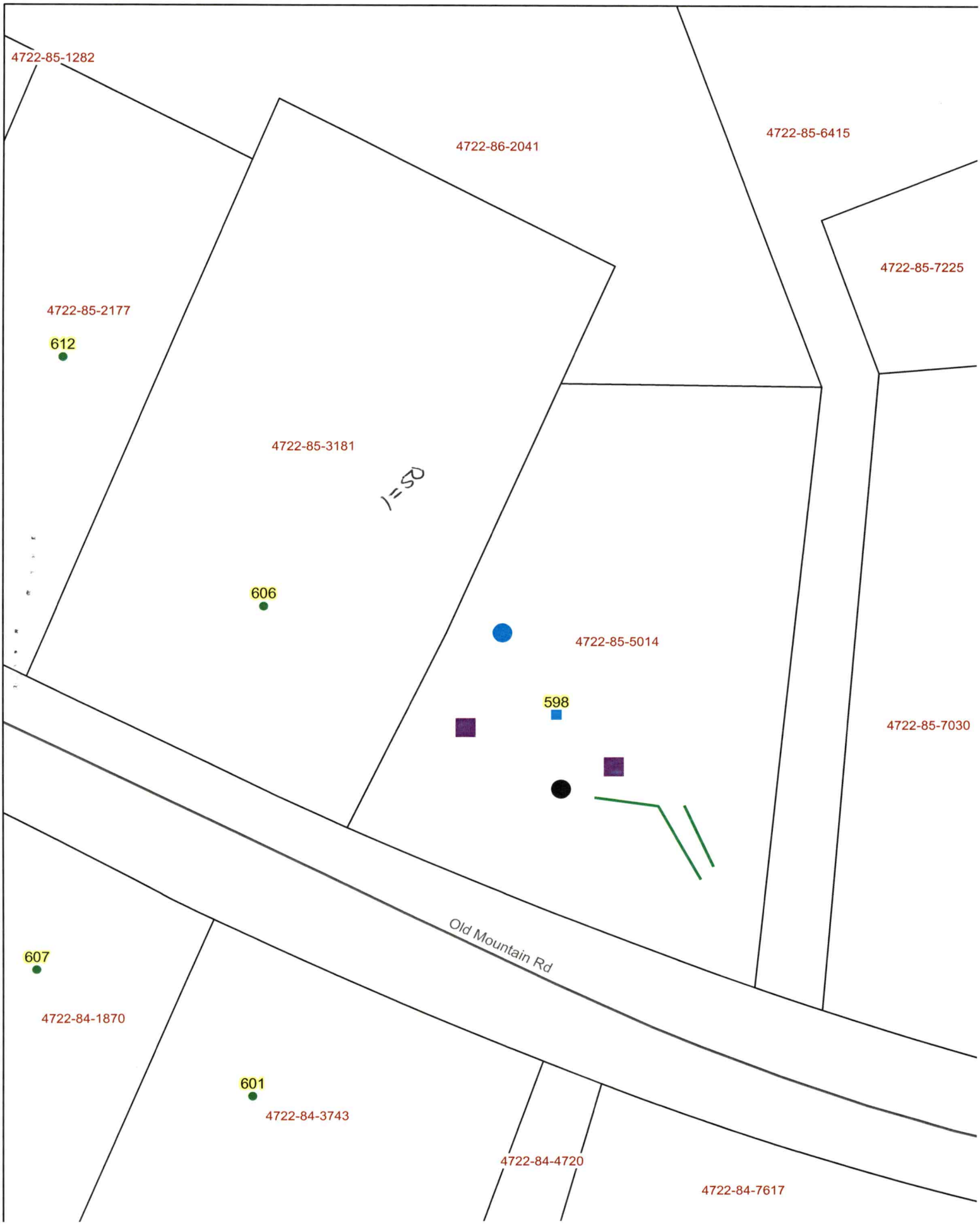
| | | | | | |
|---|---|---|---|---|---|
| How is your site plan being submitted | Custom Site Plan | Septic Application/Permit Type | Repair | Does the site contain any jurisdictional wetlands | No |
| Non-domestic Sewage Generated | No | Other Public Agency | No | All proposed structure dimensions | N/A |
| What are the proposed structures | Other Addition/Structure | Maximum Number of Bedrooms | 3 | If other Addition/Structure, please explain | |
| Number of Occupants | 3 | Foundation Type | Basement with Plumbing | Water Supply | Existing Well |
| Desired Septic System Type | Conventional (most common) | Additional Unique Setbacks Apply | No | | |

| Attachment File Name | Added On | Added By | Attachment Group | Notes |
|---|---|---|---|---|
| Signature_Jeanie_Lentz_4/26/2024.jpg | 04/26/2024 16:01 | Lentz, Jeanie | | Uploaded via CSS |
| 598_Old_Mountain_Rd_-_Authorize_Legal_Representative-3kpotts_gmail.com_v1.pdf | 04/29/2024 12:35 | Lentz, Jeanie | Available Online | |

| Workflow Step / Action Name | Action Type | Start Date | End Date |
|---|---|---|---|
| **Application Completeness Check v.1** | | 04/29/2024 12:35 | 04/29/2024 12:35 |
| Confirm application complete v.1 | Generic Action | | 04/29/2024 12:35 |
| ~~**Zoning Review v.1**~~ | | | 04/29/2024 12:35 |
| ~~Floodplain Admin Overview v.1~~ | Task | | 04/29/2024 12:35 |
| ~~Issue Invoice v.1~~ | Generic Action | | 04/29/2024 12:35 |
| ~~Fees Paid v.1~~ | Generic Action | | 04/29/2024 12:35 |
| Fees v.1 | | | |
| Issue Invoice v.1 | Generic Action | | |
| Fees Paid v.1 | Generic Action | | |
| Lot Readiness Verification v.1 | | | |
| OSWP Septic Preliminary Site Visit v.1 | Inspection | | |
| OSWP Site Evaluation v.1 | Inspection | | |
| Issue Improvement Permit v.1 | | | |
| Issue Invoice v.1 | Generic Action | | |
| Fees Paid v.1 | Generic Action | | |
| Issue Permit v.1 | Generic Action | | |
| Permit Completion Process v.1 | | | |
| Authorization to Construct Permit v.1 | Create Sub Permit | | |
| Issue Authorization to Construct v.1 | Generic Action | | |




**Address:** 598 Old Mountain Rd STVL
**Current HO:** Bobby Wilhelm
**HO #:** 704-692-8500 - Daughter
**# of Bed:** 3 **# of Occupants:** 3
**Foundation Type:** Crawlspace Slab (B/WP) B/WOP
**Water supply:** Public (Well) **Other:** _____


4722-85-1282
4722-86-2041
4722-85-6415
4722-85-7225
4722-85-2177
612
4722-85-3181
606
4722-85-5014
598
4722-85-7030
Old Mountain Rd
607
4722-84-1870
601
4722-84-3743
4722-84-4720
4722-84-7617