# ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP-317170

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

PIN # ✓ 4724 -- 95 -- 2200

APPLICANT/OWNER: JACKIE DORTY | APPLICANT ADDRESS: P.O. BOX 39047, CHARLOTTE, N.C. 28278

SITE ADDRESS: ✓ 2324 CLINE STREET, STATESVILLE, N.C. 28677 | PHONE: 704-906-7044 | ALT. PHONE 980-721-9810

SITE DIRECTIONS: (W) ON 70, (R) ON 64/90, (L) ON WOOTEN, (L) ON CLINE, LOT ON (R) | SAP CONTROLLED: ☐ YES ☐ NO EXT

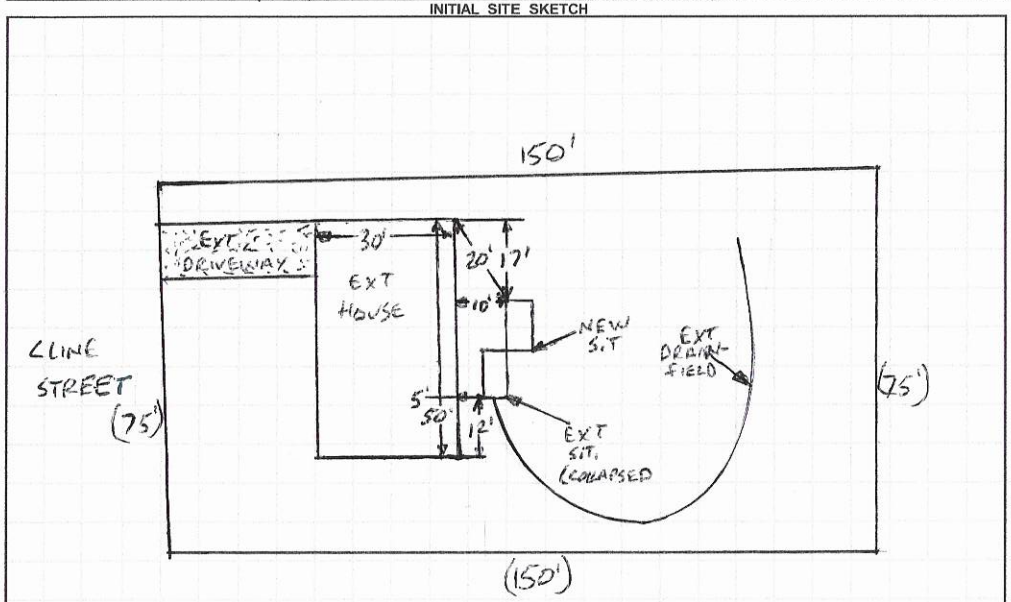
SUBDIVISION: ✓ WESLEY HEIGHTS | SECTION: – | LOT # 36-38 ✓ | LOT AREA: 0.26 AC | DESIGN FLOW: EXT | L.T.A.R.: EXT

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 (gal) | STB | 760 | Date | 4-12-21 | ☐ New System | ☑ Repair | ☐ Expansion | System Type: I (II) III IV V VI |
| Pump Tank | – (gal) | PT | – | Date | – | System Description: | EXT | | |
| 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 | EXT | **Water Supply** |
| ☐ Business | No. Persons | EXT | ☐ Private |
| ☐ Other | No. Employees | – | ☑ Public |
| ☐ Slab | ☑ Crawl Space | | ☐ Community |
| ☐ Basement w/plumbing | ☐ Basement w/o plumbing | | |

Comments / Conditions: PUMP, CRUSH, AND FILL EXISTING TANK, MAINTAIN SOFT FROM ALL WELLS, SYSTEM APPEARED TO BE FUNCTIONING AT TIME OF INSPECTION

INITIAL SITE SKETCH




*Installed as permitted*

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.**

1 IN = 40FT
S.T. = SEPTIC TANK
EXT = EXISTING

*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: [signature] Date: | Installed by: Lake Worthington

IMPROVEMENT PERMIT by: Burkett C. White Date: 5-6-2021 | OPERATION PERMIT by: Benjamin A Bell Date: 5-21-2021

AUTHORIZATION TO CONSTRUCT by: Burkett C. White Date: 5-6-2021 | Existing System Inspected by: Date:

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

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment

( ) Septic Improvement Permit ( ) Authorization to Construct ( ) Existing System Inspection (✓) Septic System Repair

*THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED. APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS.*

Repair Evaluation - No Chas.

RECEIVED APR 26 2021

**Page 2: *Site Plan Worksheet* form MUST accompany this application**

**The following optional attachments may also be submitted:** ( ) Survey Plat, scaled no more than 1 inch = 60 feet

*Place an (X) beside whichever is submitted if applicable* ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

**Applicant Information:** (PRINT CLEARLY)

Charlotte NC AP-317170

**Applicant Name:** Jackie DORTY **Address:** PO Box 39047 ~~Charlotte~~ **Zip:** 28278

**Applicant Email:** dorjac5@yahoo.com **Phone:** 704-906-7044 **Alt. Phone:** 980-721-9810

**Owner Name:** Jackie DORTY **Address:** 15106 Oleander Dr Charlotte NC **Zip:** 28278

**Owner Email:** dorjac5@yahoo.com **Phone:** 704 906 7044 **Alt. Phone:** _____

**Property Information:**

**Street Address:** 2324 Cline St

**Subdivision Name:** N/A **Section/Phase:** _____ **Lot Number:** _____

**Driving Directions:** _____

**Site Development Information:** *(check or complete ALL that apply*

( ) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
(X) Repair to failing septic system

Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 8
( ) Swimming Pool
( ) Other Addition/Structure: _____

✓ Tank ___ Drain lines Describe Problem: Possible collapsed tank

**CHECK FOUNDATION TYPE**

(✓) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

**Non-Residential Site Development:** Type of Business: _____

**Square Footage of Building:** _____ **Max. Number of Employees:** _____ **Max. Number of Seats/Beds/Other:** _____

**Water Supply:** ( ) Replacement Well – Reason: _____

( ) Multi-connection Well **Number of Houses:** _____ **Number of Persons:** _____

( ) New Well ( ) Existing Well ( ) Community Well (X) City Water ( ) Other Public Water

**Desired Septic System Type:** *(you may rank in order of preference)* **Year existing system installed:** Unknown

(X) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

**Please answer the following to the best of your ability:**

( ) Yes (X) No **Does the site contain any jurisdictional wetlands?**

( ) Yes (X) No **Is any non-domestic sewage (i.e. industrial) to be generated?**

( ) Yes (X) No **Is the site subject to approval by any other public agency?**

*I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.*

**Signature:** Jackie Dorty

**Property owner or owner's legal representative signature (SIGNATURE REQUIRED)**

April 23, 2021

**DATE**



No permit in DB

## DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

*(Check and sign only ONE of the options below)*

☐ **1. * APPLICANT AND OWNER ARE THE SAME. *** (*Sign here*) Jackie Dorty

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative: *Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship*
In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:
Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form. If there are multiple property owners, then all property owners must sign the form that designates a legal representative.
**By signing a form that designates a legal representative for purposes of 15A NCAC 18A .1937, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.**

☐ **2.** I, Jackie DORTY, am the legal owner(s) of the property located at 2324 Cline Street, identified as PIN (Parcel Identification Number) 4724952000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) _____,

_____, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

Jackie Dorty
Signature of Owner(s)

4/22/2021
Date

**Mooresville - Environmental Health**

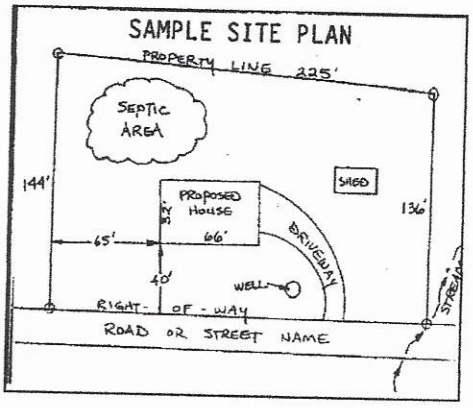
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

**Statesville - Environmental Health**
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

***COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!***

**Place an (X) beside each item as you complete the site plan:**

- ( ) **Property Line measurements are clearly identified**
- ( ) **All proposed structures are indicated**
- ( ) **Front and side setbacks from property line**
- ( ) **Preferred driveway location and well location**
- ( ) **Area you prefer your septic system to be placed**
- ( ) **North arrow, or other sufficient indicator of direction**

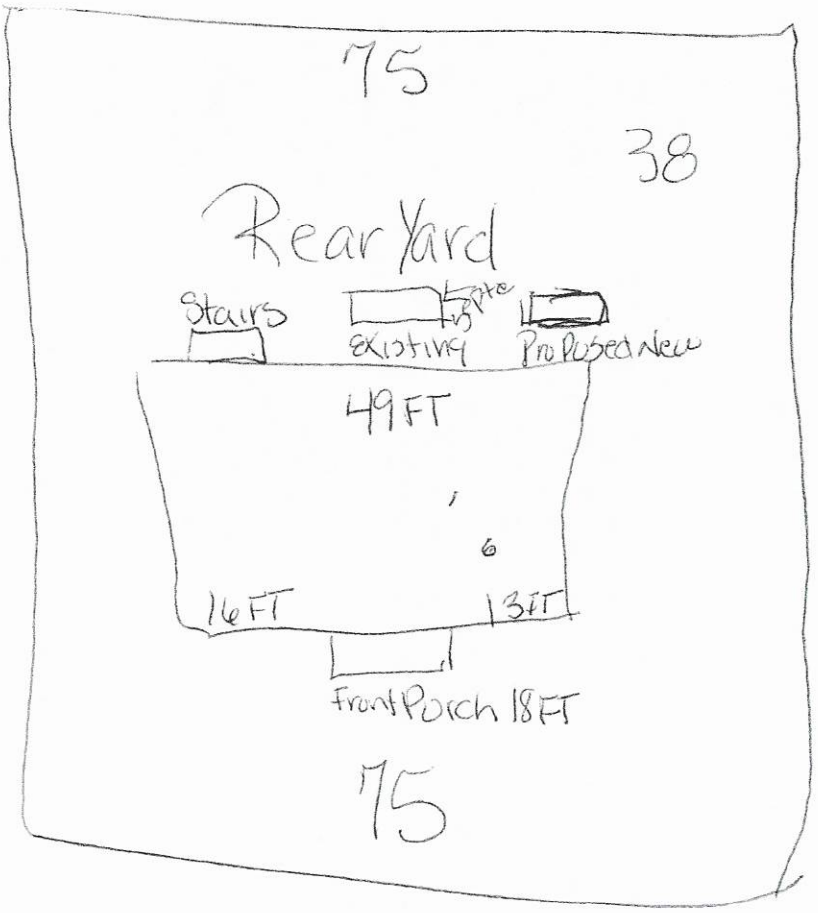



**Circle N/A on the following if appropriate:**

| | |
|---|---|
| **Location of septic systems and wells within 100' of your property** | **N/A** |
| **Location of easements and rights of ways on your property** | **N/A** |
| **Location of any designated wetlands on the property** | **N/A** |

## USE THIS SPACE TO DRAW YOUR SITE PLAN

***Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site***

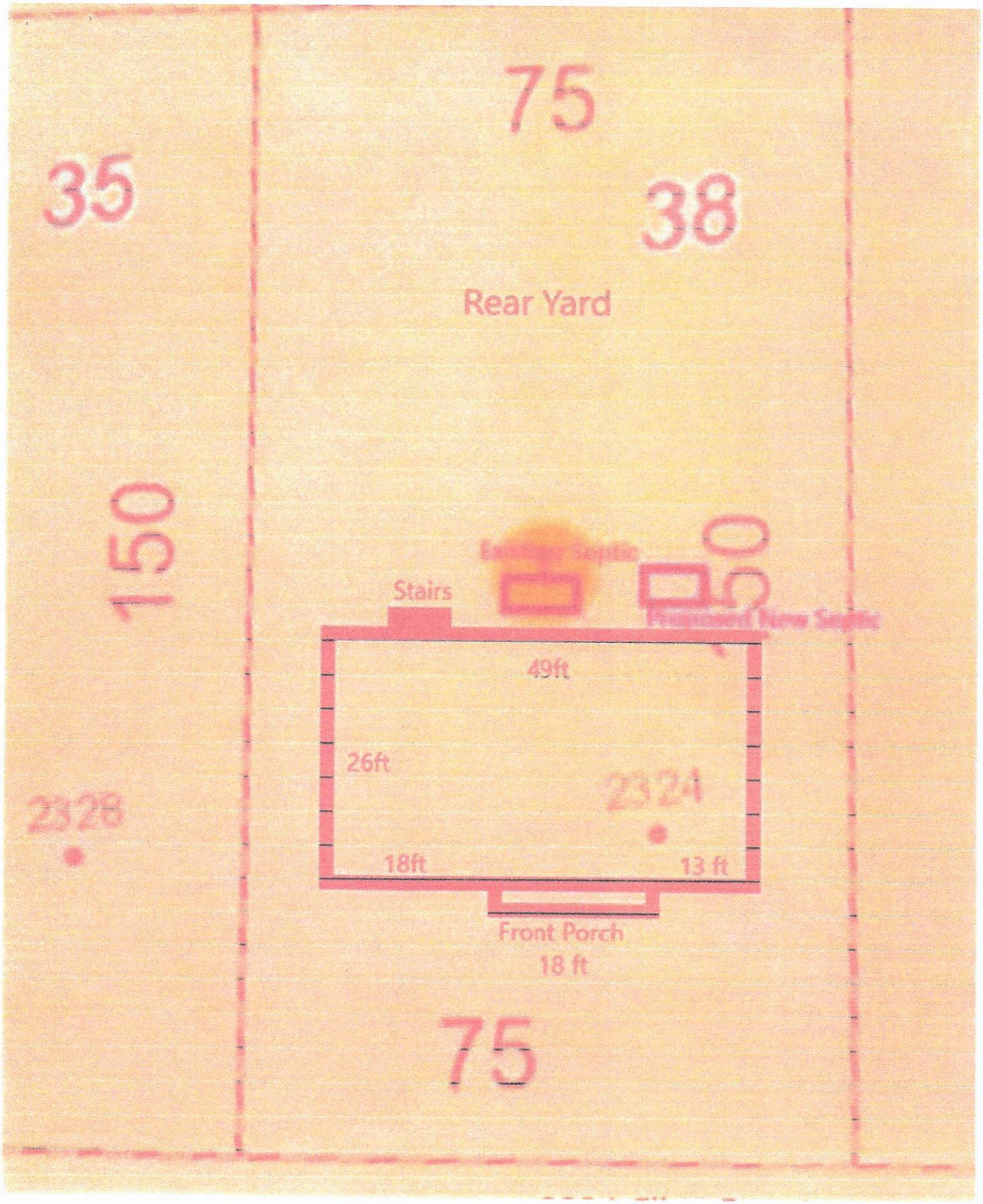



**Signature:** Jackie Darty

**Property owner or owner's legal representative signature (SIGNATURE REQUIRED)**

Apr. 24, 2021

**DATE**


75
35
38
Rear Yard
150
50
Stairs
49ft
26ft
2324
2328
18ft
13 ft
Front Porch
18 ft
75