BLW

# ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT : OSWP 2024-47642

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

PIN # 4726 -71 -3770

APPLICANT/OWNER: Jeanie Lentz APPLICANT ADDRESS: 463 Lentz Rd Statesville, NC 28625

SITE ADDRESS: 119 Doe Trail Ln Statesville, NC 28625 PHONE: (980)829-3278 ALT. PHONE (704)880-0092

SITE DIRECTIONS: Scotts Creek, Miller Farm, Doe Trail SAP CONTROLLED: ☐ YES ☐ NO

SUBDIVISION: Deercroft at Greenville Grant SECTION: - LOT # 28 LOT AREA: .4836 DESIGN FLOW: Ext L.T.A.R.(Initial): Ext L.T.A.R (Repair): Ext

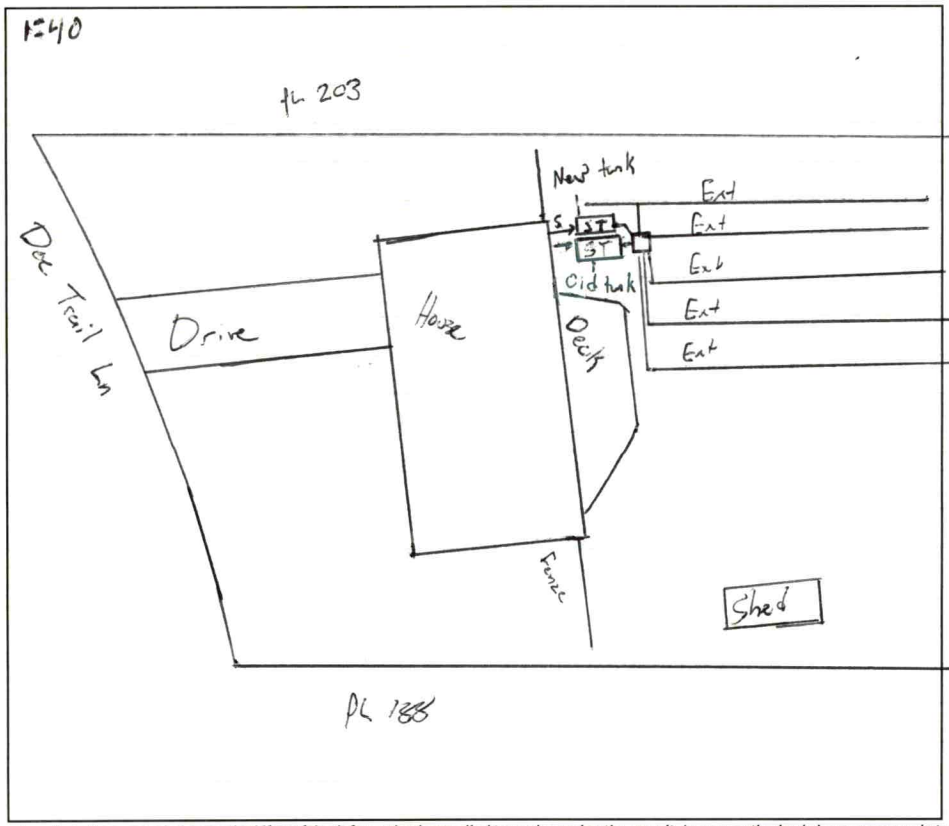
| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank 1000 (gal) | STB 1012 | Date INFILTRATOR | ☐ New System ☑ Repair ☐ Expansion | System Type: I (II) III IV V VI | ☑ Residence | No. Bedrooms Ext | **Water Supply** |
| Pump Tank (gal) | PT | Date | System Description: - | | ☐ Business | No. Persons Ext | ☐ Private |
| Pump Make | Model | Serial # | Repair System Description: Tank Replacement | | ☐ Other | No. Employees | ☑ Public |
| # Nitrification Fields Ext | # Lines Ext | Linear Ft Ext | Maintenance Agreement Required: ☐ YES ☑ NO | | ☐ Slab | ☑ Crawl Space | ☐ Community |
| Trench Width Ext | *Max. Trench Depth(Initial) Ext | *Max. Trench Depth(Repair) Ext | Gravel Depth Ext | ☑ GRAVITY ☐ PRESSURE | ☐ Basement w/plumbing | ☐ Basement w/o plumbing | |
| * Measured on the downhill side of the trench | Effluent Standard: ☑ DSE ☐ HSE ☐ TS-I ☐ TS-II ☐ RCW ☐ NSF/ANSI 40 | | Usable Depth to LC (Initial): Ext | | Usable Depth to LC (Repair): Ext | | *Limiting Condition* |

Comments / Conditions: Pump, crush, fill old tank. Place new tank where proper fall can be achieved. Replace distribution if necessary. System appears to be working during inspection.

Try to avoid top line during install of new tank.

INITIAL SITE SKETCH

1:40




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 Wiz Date: 2/28/24 OPERATION PERMIT by: Sarah K Williams Date: 3/11/2024

AUTHORIZATION TO CONSTRUCT by: Matt Wiz Date: 2/28/24 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-2024-47642 FOR IREDELL COUNTY

| | | | | | |
|---|---|---|---|---|---|
| **Permit Type** | Environmental Health OSWP | **Project:** | | **App Date:** | 02/22/2024 |
| **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:** | Wilkinson, Matthew | **Approval Expire Date:** | |

**Description:** The septic tank is cracked. The septic tank is uncovered and cracks are visible.

| | | |
|---|---|---|
| **Parcel:** 4726713770.000 Main | **Address:** 119 Doe Trail Ln Statesville, NC 28625 Main | **Zone:** RA(Residential Agricultural District) |

| | | |
|---|---|---|
| Applicant/Authorized Agent<br>Jeanie Lentz<br>Home: (980) 829-3278 | Property Owner<br>Darrin Whitener<br>Home: (704) 880-0092 | Applicant/Authorized Agent<br>Jeanie Lentz<br>463 Lentz Road<br>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 | 0 | Foundation Type | Crawl Space Foundation | Water Supply | Other Public Water |
| Desired Septic System Type | Conventional (most common) | Additional Unique Setbacks Apply | No | | |

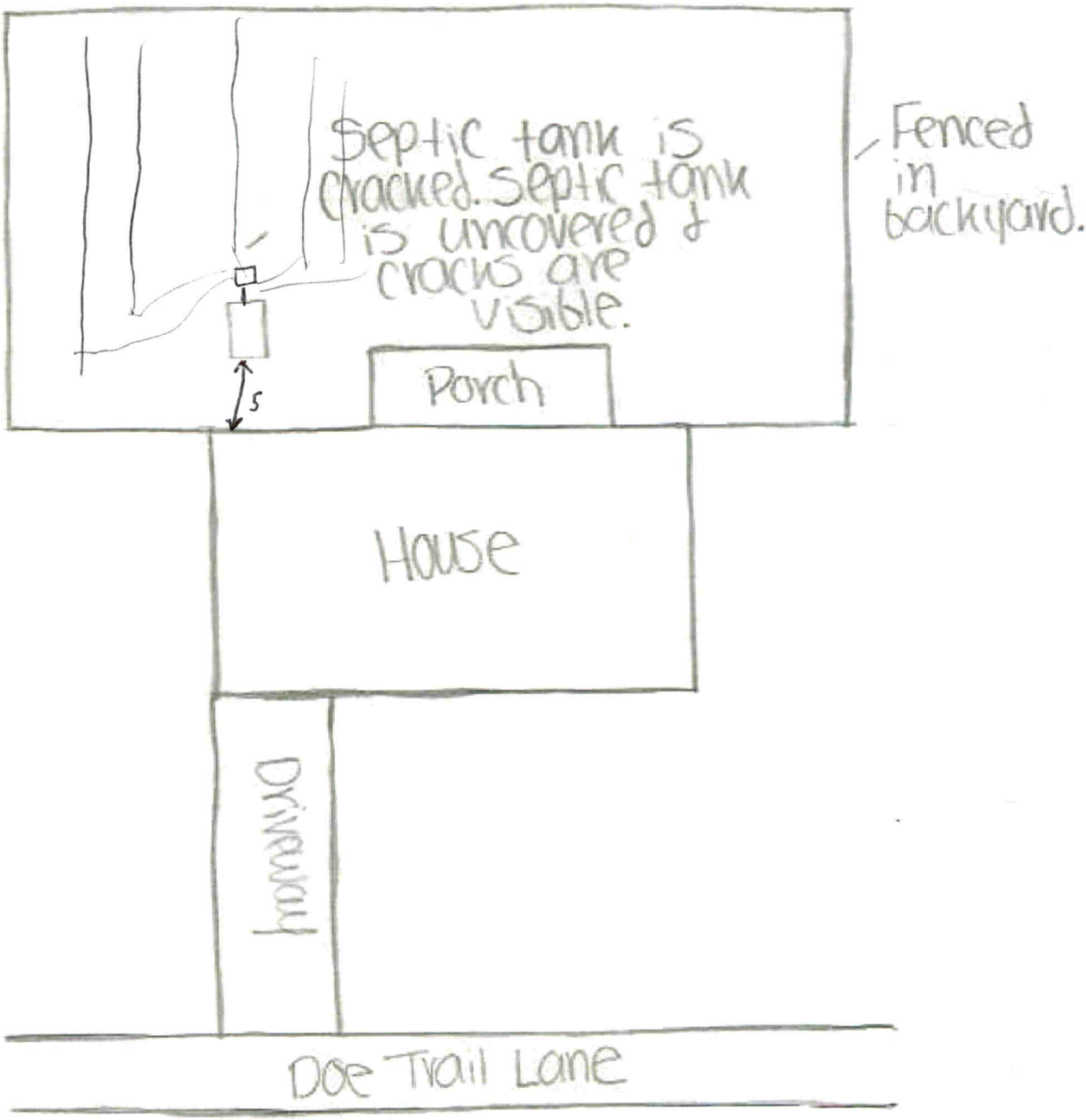
| Attachment File Name | Added On | Added By | Attachment Group | Notes |
|---|---|---|---|---|
| Signature_Jeanie_Lentz_2/22/2024.jpg | 02/22/2024 10:10 | Lentz, Jeanie | | Uploaded via CSS |
| 119_Doe_Trail_Lane_-_Authorize_Legal_Representative-d_whitener_bellsouth.net_v1.pdf | 02/22/2024 10:51 | Lentz, Jeanie | Available Online | |

| Workflow Step / Action Name | Action Type | Start Date | End Date |
|---|---|---|---|
| **Application Completeness Check v.1** | | 02/22/2024 10:52 | 02/22/2024 10:52 |
| Confirm application complete v.1 | Generic Action | | 02/22/2024 10:52 |
| ~~**Zoning Review v.1**~~ | | | 02/22/2024 10:52 |
| ~~Floodplain Admin Overview v.1~~ | Task | | 02/22/2024 10:52 |
| ~~Issue Invoice v.1~~ | Generic Action | | 02/22/2024 10:52 |
| ~~Fees Paid v.1~~ | Generic Action | | 02/22/2024 10:52 |
| 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 | | | |

# PERMIT SNAPSHOT REPORT (OSWP-2024-47642)

| | |
|---|---|
| Application for Construction Permit | Create Sub Permit |
| Permit Authorization to Construct | Generic Action |

# 119 Doe Trail Lane




**Address:** 119 Doe Trail Ln Statesville 28625
**Current HO:** Dakrin Whitener
**HO #:** 704-880-0092
**# of Bed:** 3 **# of Occupants:** ____
**Foundation Type:** Crawlspace Slab B/WP B/WOP
**Water supply:** Public Well **Other:** ____

# IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

55021

## IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 20583 DATE 3/20/95 TAX MAP NO. 9A-9-A-28 Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR RICK DYSON PHONE: Business Home 528-6649

ADDRESS 120 HICKORY POINT COURT STATESVILLE NC 28677

LOCATION NC 115 N, TL SCOTTS CREEK, TL MILLER FARM, TR DOE TRAIL 4TH LOT ON LEFT

SUBDIVISION DEERCROFT BLOCK / SECTION I LOT 28 LOT AREA 119x203x119x188 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.35 GPD/FT²

Septic Tank: 1000 Gallons; STB 794 Date 3/22/95

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1035 Linear Feet 345

No Lines 5 Trench Width 36" Max Trench Bottom Depth 18-36" Gravel Depth 12"

☒ New System ☐ Repair System Type: ☐ I ☒ III, IV, V, VI

System Description: CONV GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other

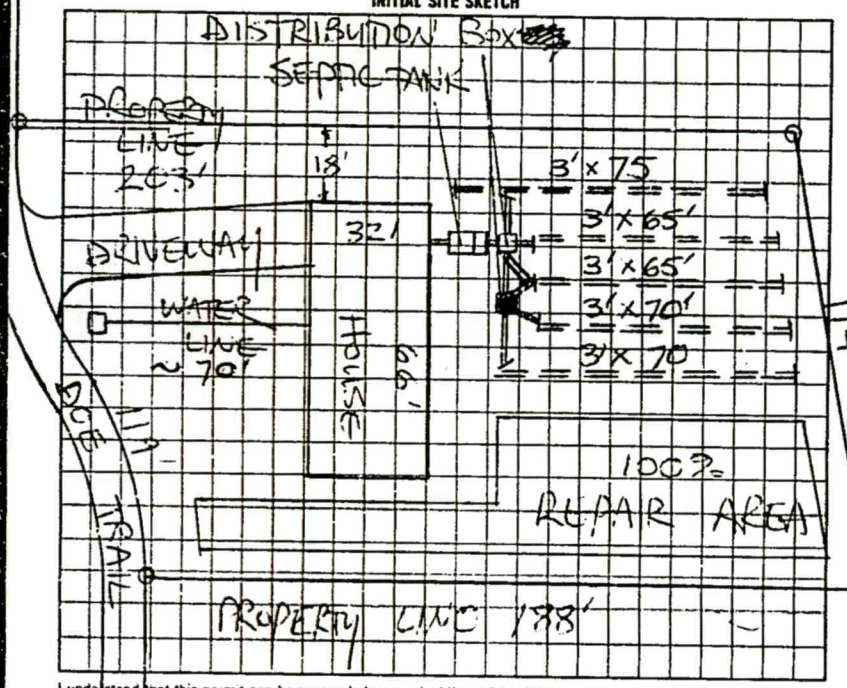
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☒ Public

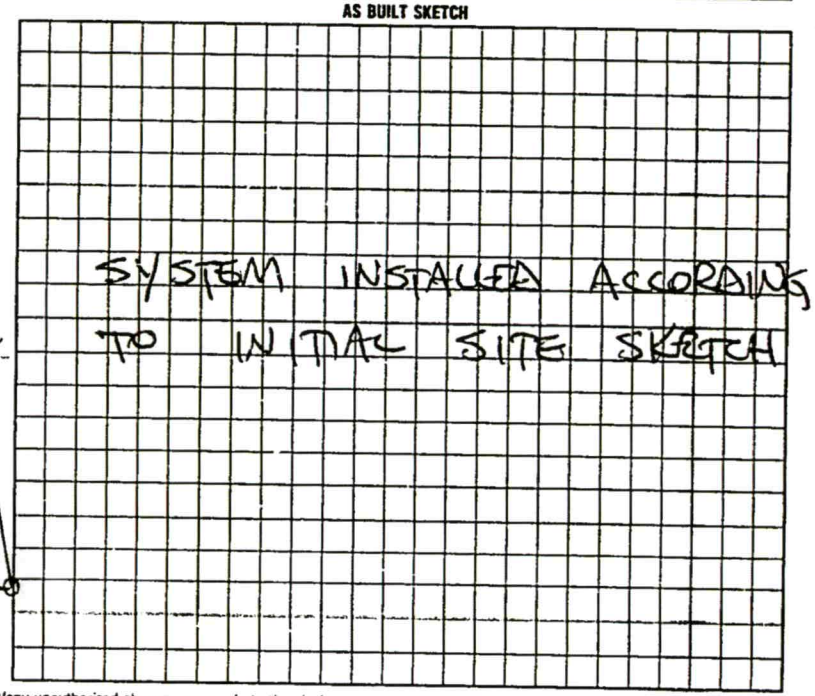
Comments:

Comments:

**INITIAL SITE SKETCH**




**AS BUILT SKETCH**




I understand that this 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 is valid for 60 months from date of issuance.

Signed: _____

Improvement Permit by: STEVE HEDRICK date 3/20/95

Existing System Inspection by _____ date _____

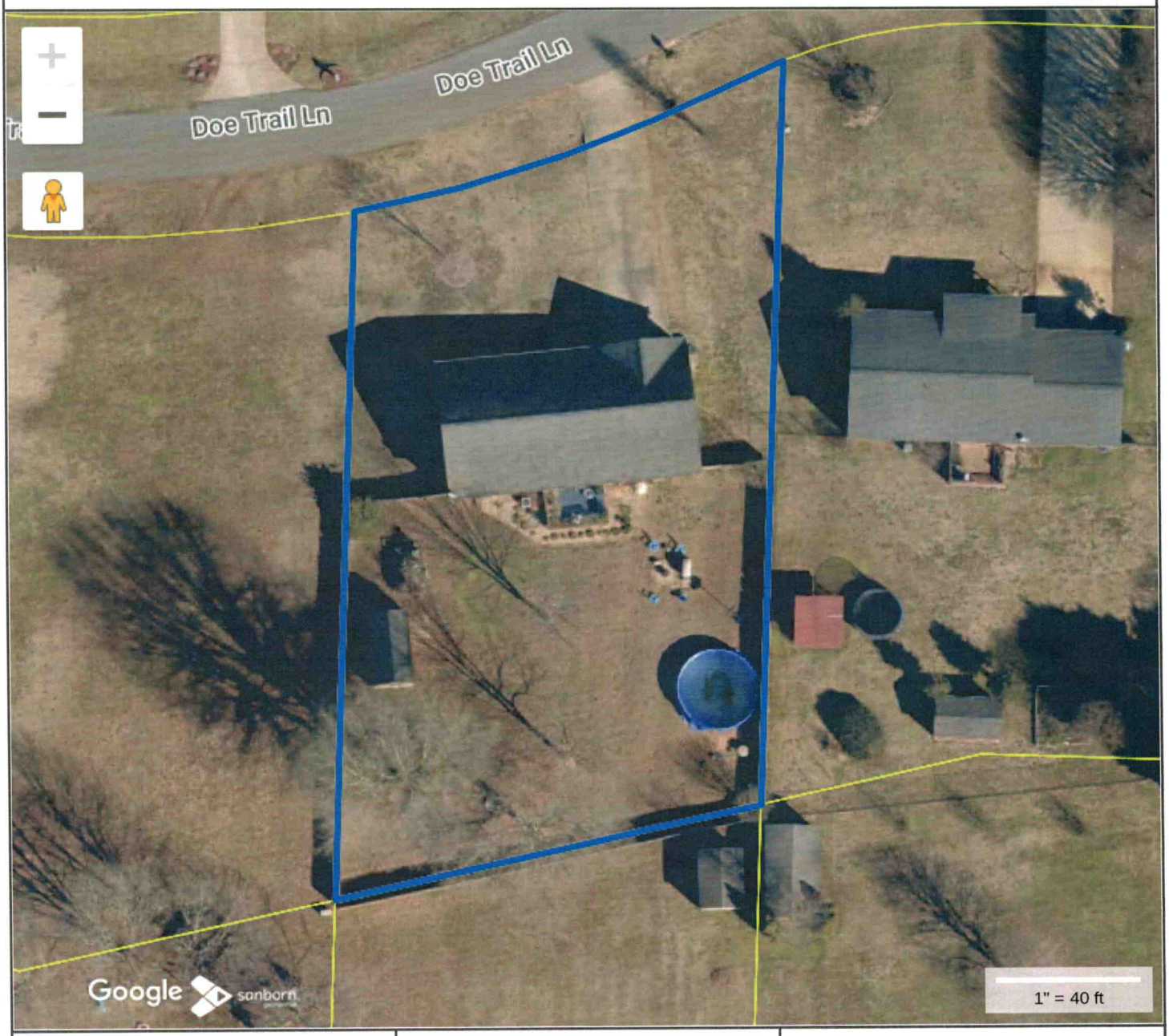
Installed by: WEB LYTTON

Certificate of Completion by: STEVE HEDRICK date 5/31/95

Operation Permit by _____ date _____

HEALTH DEPT COPY: WHITE INSPECTION COPY (FINAL): GREEN OWNER COPY (FINAL): YELLOW INSPECTION COPY (INITIAL): PINK OWNER COPY (INITIAL): GOLD

ES 1000




**Tax Map Information**

| | |
|---|---|
| • PIN | 4726713770.000 |
| • Address | 119 DOE TRAIL LN |
| • Account # | Acct 77378055 |
| • Tax Owner | WHITENER DARRIN P |
| • Mailing Address | 119 DOE TRAIL LN |
| • | STATESVILLE, NC 28625 |
| • GIS Owner | WHITENER DARRIN P+DONNA L |
| • Deed Info | 958 / 1873 - WD - 19950830 |
| • Tax Acres | 0.4856 AC |
| • Lot # | 28 |
| • Description | DEERECROFT AT GRANVILLE GRANT PB23-16 |
| • Zoning | RA |
| • Old Parcel # | 1009A09000A028 |
| • Bldg Value | $209,520 |
| • OBXF Value | $5,900 |
| • Land Value | $43,500 |
| • Total Value | $258,920 |
| • 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 02/20/2024
Data updated 11/14/2023

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




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