ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP2022-7518

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

PIN # 4731 -- 32 -- 7293

APPLICANT/OWNER: Kurt Wolff APPLICANT ADDRESS: 6161 Denver Industrial Park Rd Denver, NC 28037

SITE ADDRESS: 142 Lytton Farm Rd Trotttman, NC 28166 PHONE: (704) 661-2603 ALT. PHONE —

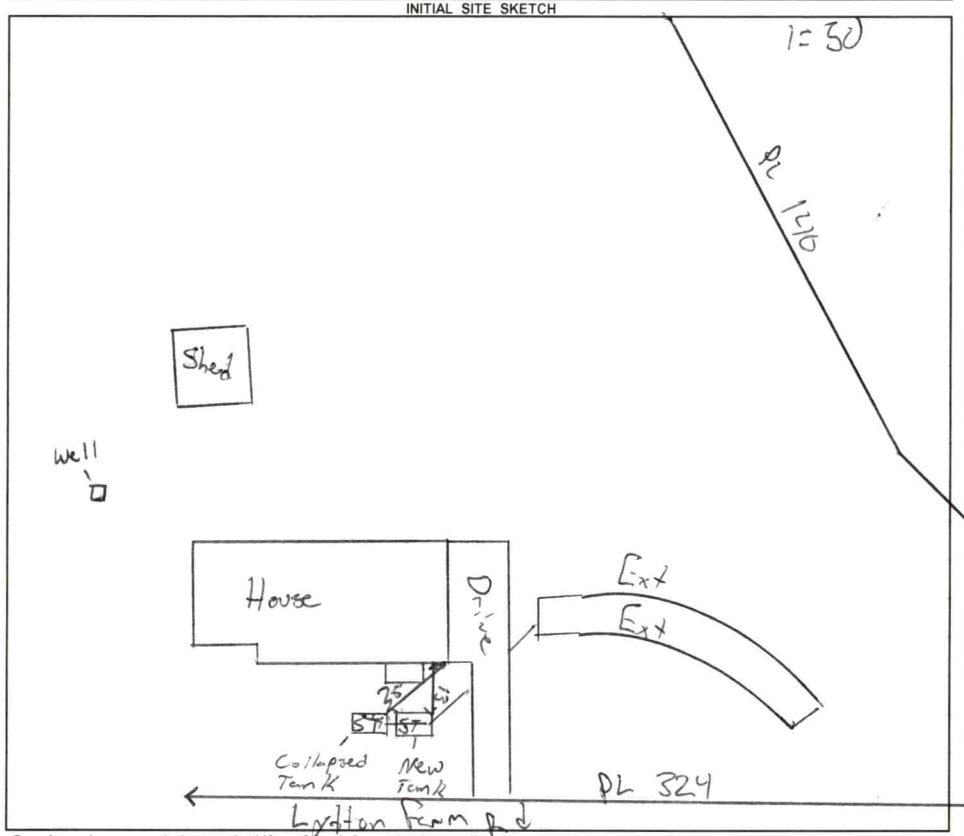
SITE DIRECTIONS: Ⓑ N Center St, Ⓑ Talley St, Ⓛ Lytton Farm Rd SAP CONTROLLED: ☐ YES ☐ NO

SUBDIVISION: - SECTION: - LOT # - LOT AREA: 2.01 Ac DESIGN FLOW: Ext L.T.A.R.: Ext

Septic Tank	1000	(gal)	STB	760	Date	10/6/22	☐ New System	☑ Repair	☐ Expansion	System Type: I II III IV V VI	☑ Residence	No. Bedrooms	3	Water Supply	
Pump Tank		(gal)	PT		Date		System Description: —				☐ Business	No. Persons	6	☑ 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	Trench Bottom Depth(Low side)		Ext	Gravel Depth	Ext	☑ GRAVITY	☐ PRESSURE			☐ Basement w/plumbing		☐ Basement w/o plumbing		

Comments / Conditions: Pump, crush, fill old tank. Place new tank 10ft off house.

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: Installed by: Lentz Wastewater

IMPROVEMENT PERMIT by: Matt Wilkie Date: 10/28/22 OPERATION PERMIT by: Matt Wilkie Date: 11/10/22

AUTHORIZATION TO CONSTRUCT by: Matt Wilkie Date: 10/28/22 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	4731327293.000
• Address	142 LYTTON FARM RD
• Account #	Acct 80087045
• Tax Owner	WIZ PROPERTIES LLC
• Mailing Address	6161 DENVER INDUSTRIAL PARK RD
•	DENVER, NC 28037
• GIS Owner	WIZ PROPERTIES LLC
• Deed Info	2866 / 1340 - WD - 20211029
• Tax Acres	2.01 AC
• Lot #	
• Description	CAVIN SR1323
• Zoning	RS
• Old Parcel #	1503H00000A001
• Bldg Value	$83,400
• OBXF Value	$1,600
• Land Value	$38,750
• Total Value	$123,750
• Defer Value	$0
• Tax Districts	-ALLCOUNTY 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.

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

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 Ray Rimmer DATE 3-18-76 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 21 S. T.R. at B+H Amoco on Rd 1324 - T.L. on Rd 1323 - 2nd House on Rt. S. R. No. _____

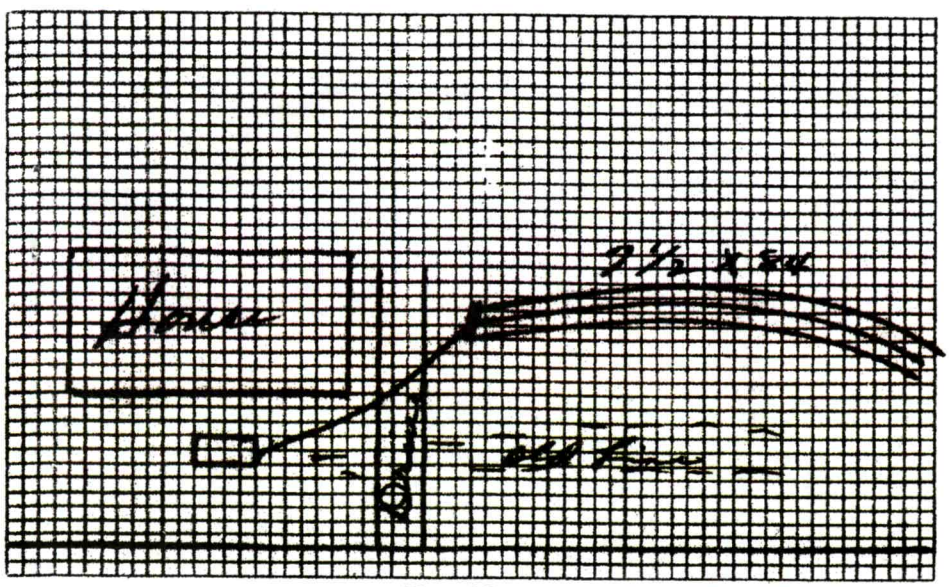
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms _____ No. Bathrooms _____

Garbage Disposal Unit	Yes ( )	No ( )	Character & Porosity of Soil	_____
Auto. Dishwasher	Yes ( )	No ( )	Percolation Rate	_____
Auto. Wash. Machine	Yes ( )	No ( )	Topography	Repair
Site Suitable	Yes ( )	No ( )	Depth to Water Table	_____
			Rock or other impervious formations	_____

Lot Area _____



Plot of System

Size of Tank Repair Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 10"

Water Supply: Individual (✓)
Public ( )

Installed by Sam Ostwalt

IMPROVEMENTS PERMIT BY _____

COMMENTS: Hookup to tank not made at time of inspection. Be sure tank is pumped and tee checked.

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 3-18-76

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