ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # OSWP-2022-12520

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

PIN # 4733-87-0043

APPLICANT / OWNER: All Pro Enviro | APPLICANT ADDRESS: 518 lakeview drive, Mcadenville, NC 28101

SITE ADDRESS: 1903 LYNNWOOD DR, STATESVILLE, NC 28677 | PHONE: (704) 502-1263 | ALT. PHONE:

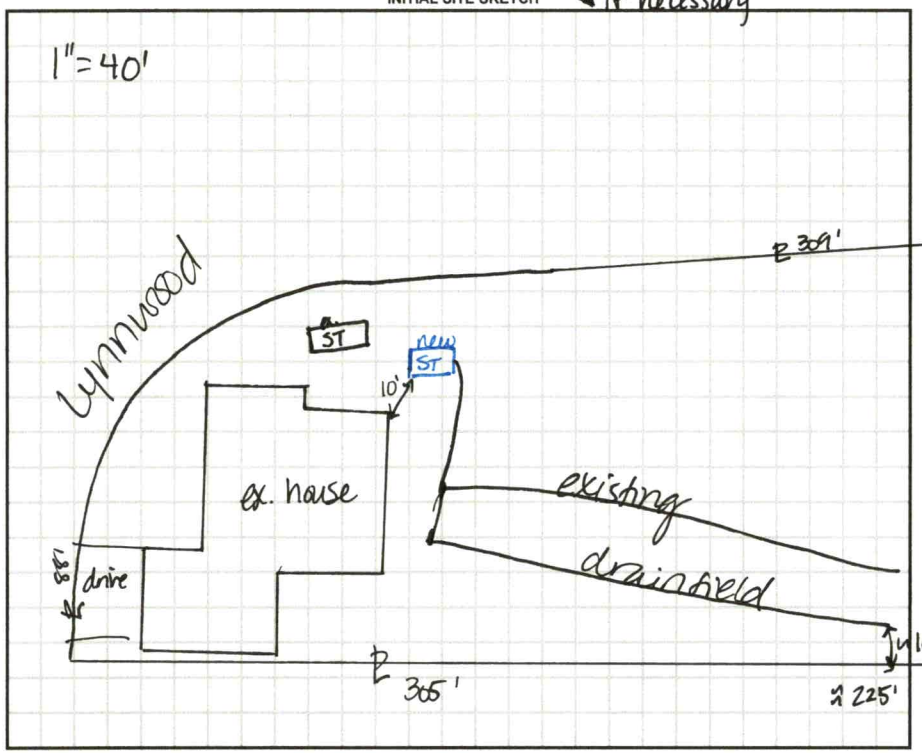
SITE DIRECTIONS: N NC 115/21 -> L Wilson Lee -> L Fayetteville -> L Lynnwood -> lot on L | SAP CONTROLLED: YES ☐ NO ☐

SUBDIVISION: — | SECTION: — | LOT #: — | LOT AREA: ± 0.59 ac | DESIGN FLOW: EXISTING | L.T.A.R.: EXISTING

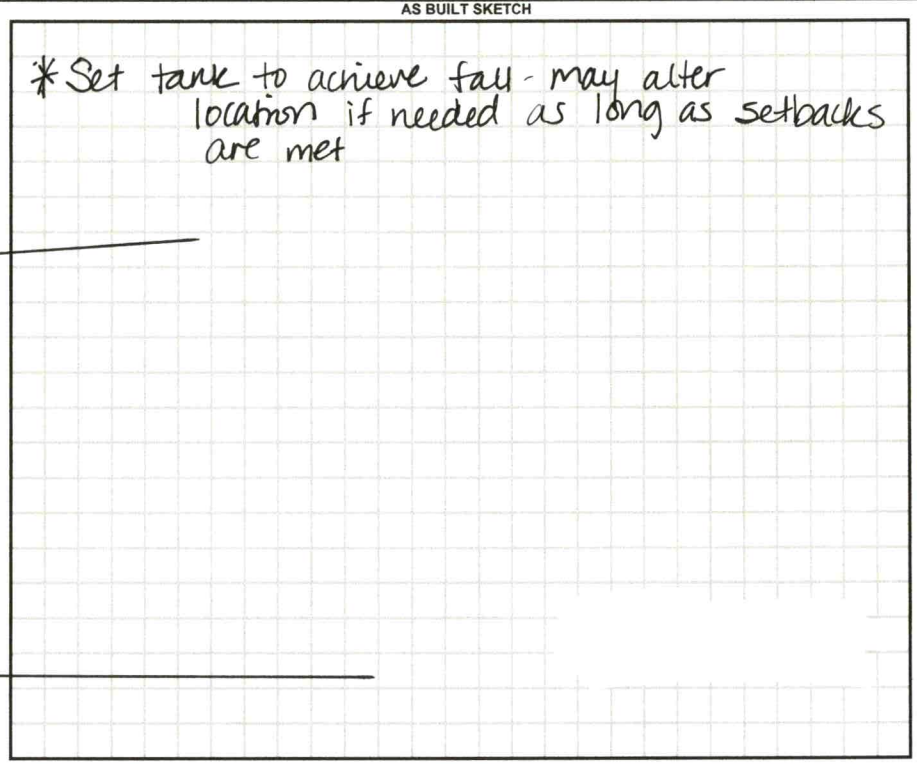
Septic Tank: (gal)	STB:	Date:	☑ New System ☒ Repair ☐ Expansion	System Type: II	☑ Residence	No. Bedrooms: EX	Water Supply: Other Public Water
Pump Tank: (gal)	PT:	Date:	System Description: Existing		☐ Business	No. Persons: EX	
Pump Make:	Model:	Serial #:	Repair System Description: New Tank		☐ Other	No. Employees: 0	
# Nitrification Fields: EX	# Lines: 2	Linear Ft.: EXISTING	Maintenance Agreement Required: ☐ YES ☒ NO		☐ Slab	☑ Crawl Space	
Trench Width: EXISTING	Trench Bottom Depth (Low side): EXISTING		Gravel Depth: EXISTING	☑ GRAVITY ☐ PRESSURE	☐ Basement w/ Plumbing	☐ Basement w/o Plumbing	

Comments / Conditions: Pump, crush & fill old tank. Replace distribution device. May move tank location if it meets all setbacks - mark property line along road if tank moved in that direction.

INITIAL SITE SKETCH ↓ if necessary



AS BUILT SKETCH



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

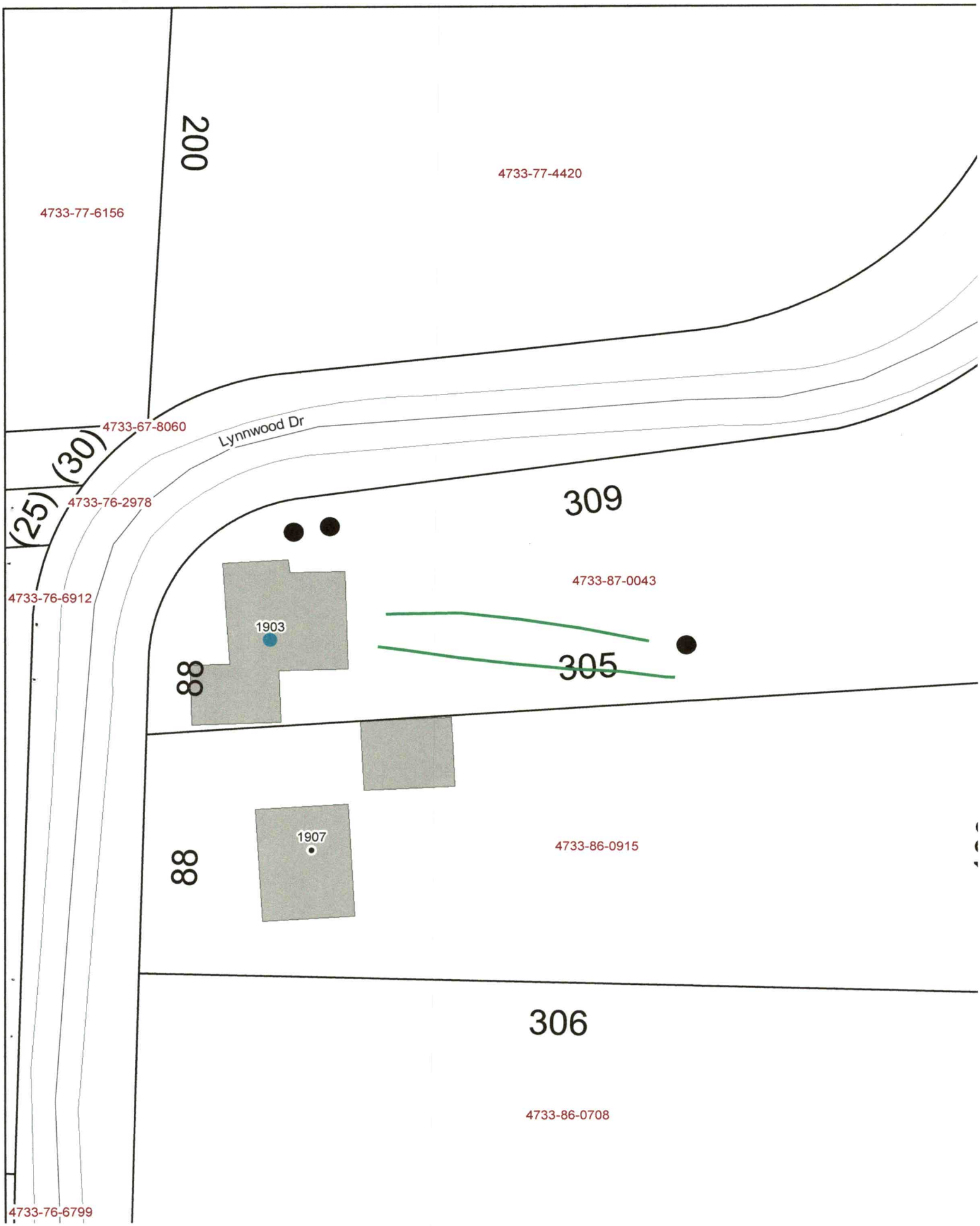
☐ IMPROVEMENT PERMIT with plat valid without expiration. ☑ IMPROVEMENT PERMIT with site plan valid for 60 mos. ☑ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT–not to exceed 60 mo.

Owner / Applicant Signature: [signature] Date: | Installed By:

IMPROVEMENT PERMIT by: D. Weber Date: 1/9/23 | OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: D. Weber Date: 1/9/23 | Existing System Inspected By: Date:

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


200
4733-77-4420
4733-77-6156
4733-67-8060
Lynnwood Dr
(30)
(25)
4733-76-2978
309
4733-87-0043
4733-76-6912
1903
88
305
1907
88
4733-86-0915
306
4733-86-0708
4733-76-6799

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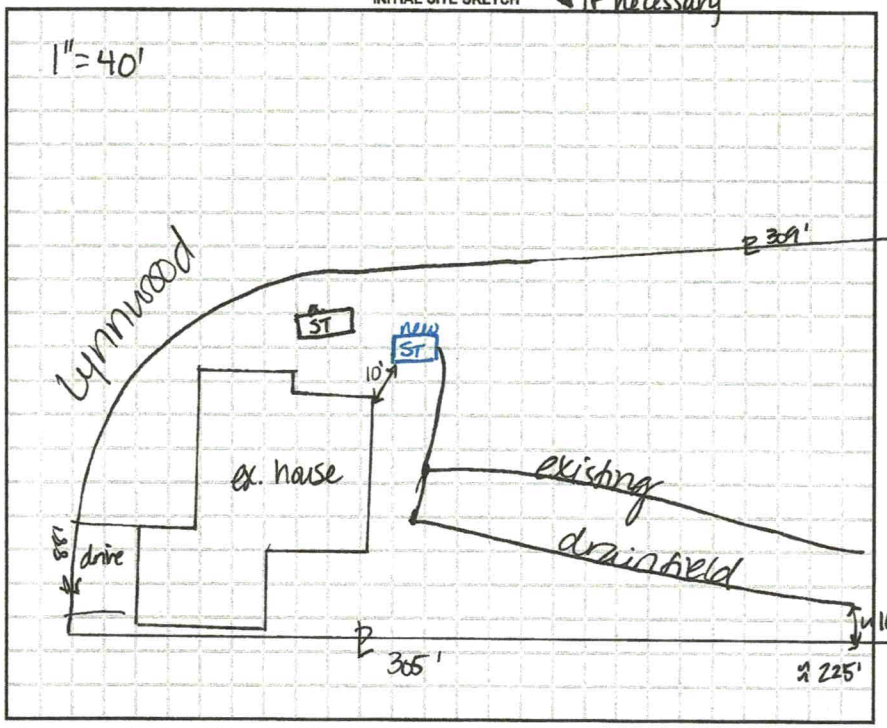
SITE DIRECTIONS: N NC 115/21 -> L Wilson Lee -> L Fayetteville -> L Lynnwood -> lot on L | SAP CONTROLLED: YES ☐ NO ☐

SUBDIVISION: — | SECTION: — | LOT #: — | LOT AREA: ± 0.59 ac | DESIGN FLOW: EXISTING | L.T.A.R.: EXISTING

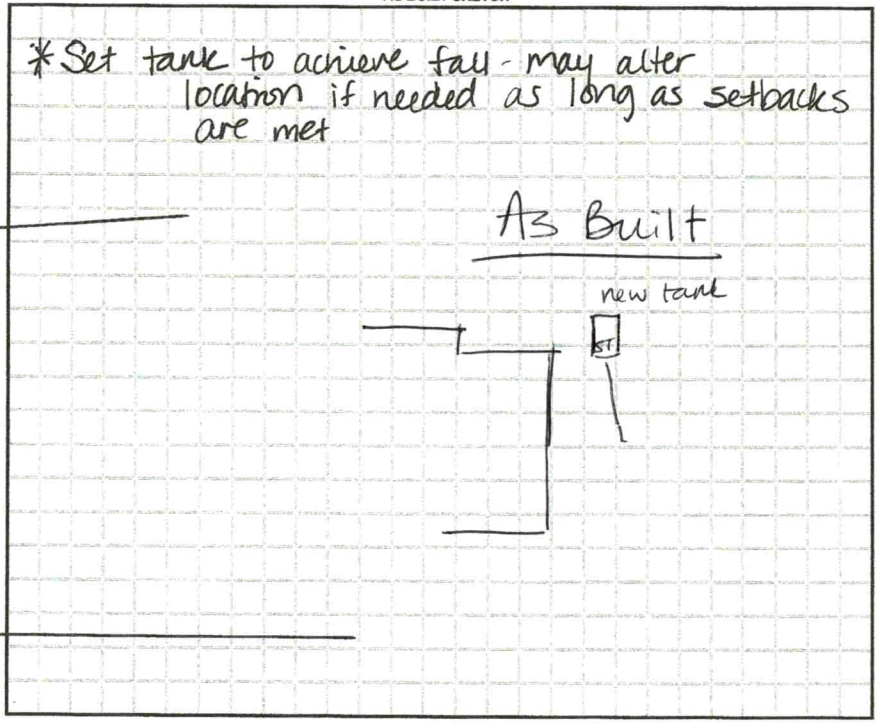
Septic Tank: (gal) 1000	STB: Infiltrator	Date: —	☑ New System ☒ Repair ☐ Expansion	System Type: II	☑ Residence	No. Bedrooms: EX	Water Supply: Other Public Water
Pump Tank: (gal)	PT:	Date:	System Description: Existing		☐ Business	No. Persons: EX	
Pump Make:	Model:	Serial #:	Repair System Description: New Tank		☐ Other	No. Employees: 0	
# Nitrification Fields: EX	# Lines: 2	Linear Ft.: EXISTING	Maintenance Agreement Required: ☐ YES ☒ NO		☐ Slab	☑ Crawl Space	
Trench Width: EXISTING	Trench Bottom Depth (Low side): EXISTING		Gravel Depth: EXISTING	☑ GRAVITY ☐ PRESSURE	☐ Basement w/ Plumbing	☐ Basement w/o Plumbing	

Comments / Conditions: Pump, crush & fill old tank. Replace distribution device. May move tank location if it meets all setbacks - mark property line along road if tank moved in that direction.

INITIAL SITE SKETCH ↓ if necessary



AS BUILT SKETCH



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Owner / Applicant Signature: [signature] Date:

IMPROVEMENT PERMIT by: D.Wieben Date: 1/9/23

AUTHORIZATION TO CONSTRUCT by: D. Wieben Date: 1/9/23

Installed By: All Pro Environmental

OPERATION PERMIT by: D.Wieben Date: 11/13/23

Existing System Inspected By: Date:

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



PERMIT SNAPSHOT REPORT OSWP-2022-10719
FOR IREDELL COUNTY

Permit Type: Environmental Health OSWP
Project:
App Date: 12/05/2022

Work Class: EH Septic Relocation Improvement Permit
District: Statesville
Exp Date: NOT AVAILABLE

Status: PRIORITY PERMIT
Square Feet: 0.00
Completed: NOT COMPLETED

Valuation: $0.00
Assigned To: Wieberg, Danielle
Approval Expire Date:

Description: REPAIR PERMIT Septic tank is collapsing. Will repair with a tank replacement.

Parcel: 4733870043.000 Main	**Address:** 1903 Lynnwood Dr Statesville, NC 28677 Main	**Zone:** R-5MFM(R-5MFM)

Applicant/Authorized Agent
Cameron Foust
518 lakeview drive
Mcadenville, NC 28101
Business: (704) 502-1263

Property Owner
AUGUSTINE PROPERTIES LLC

Pending tank exposure

Permit Custom Fields

How is your site plan being submitted	Custom Site Plan	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
If other Addition/Structure, please explain	This is a repair to an existing home.	Maximum Number of Bedrooms	3	Number of Occupants	6
Foundation Type	Crawl Space Foundation	Residential/Business/Other	Residential	Number of Employees	2
Total number of seats	0	Water Supply	Other Public Water	Desired Septic System Type	Conventional (most common)
If other septic system type, please explain		Additional Unique Setbacks Apply	No		

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_Cameron_Foust_12/5/2022.jpg	12/05/2022 11:39	Foust, Christa		Uploaded via CSS
Authorize 1903 Lynnwood_v1.pdf	12/06/2022 11:26	Nebel, Barbara	Available Online	Authorize to Act as Agent
Site Plan 1903 Lynnwood_v1.pdf	12/06/2022 11:26	Nebel, Barbara	Available Online	Site Plan

Invoice No.	Fee	Fee Amount	Amount Paid
NOT INVOICED	New Gravity System	$500.00	$0.00
	Total for Invoice NOT INVOICED	**$500.00**	**$0.00**
	Grand Total for Permit	**$500.00**	**$0.00**

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		12/06/2022 0:00	12/06/2022 11:26
Confirm application complete v.1	Generic Action		12/06/2022 11:26
~~**Zoning Review v.1**~~			12/06/2022 11:27
~~Statesville Zoning Approval v.1~~	Task		12/06/2022 11:27
~~Issue Invoice v.1~~	Generic Action		12/06/2022 11:27
~~Fees Paid v.1~~	Generic Action		12/06/2022 11:27
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		

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 John Henry Mills DATE 10/4/78 PERMIT NO. _____

PHONE Business _____ Home _____

LOCATION 1903 Lynwood Drive

SUBDIVISION NAME _____ S. R. No. _____

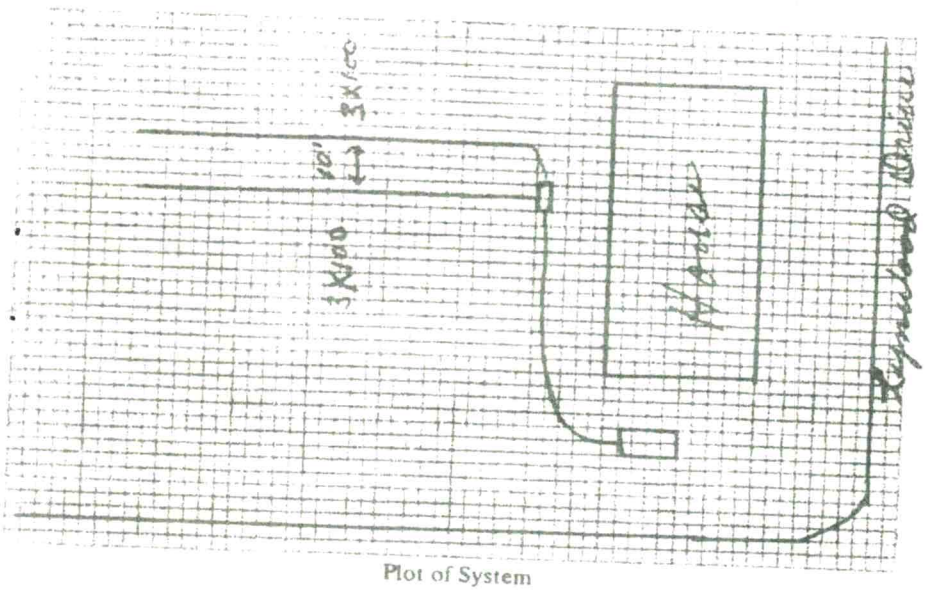
LOT NO. _____ SECTION OR BLOCK NO. _____

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 _____
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 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 10"
Water Supply: Individual ( )
Public (✓)

Installed by Henry Sigmon

IMPROVEMENTS PERMIT BY _____

COMMENTS: Lines are deep at start of ditches

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 10/4/78

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS

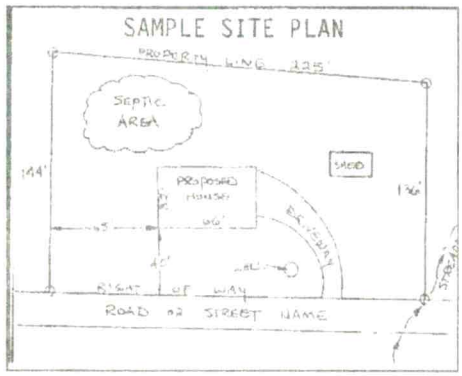
Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *SITE PLAN WORKSHEET*

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR 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:

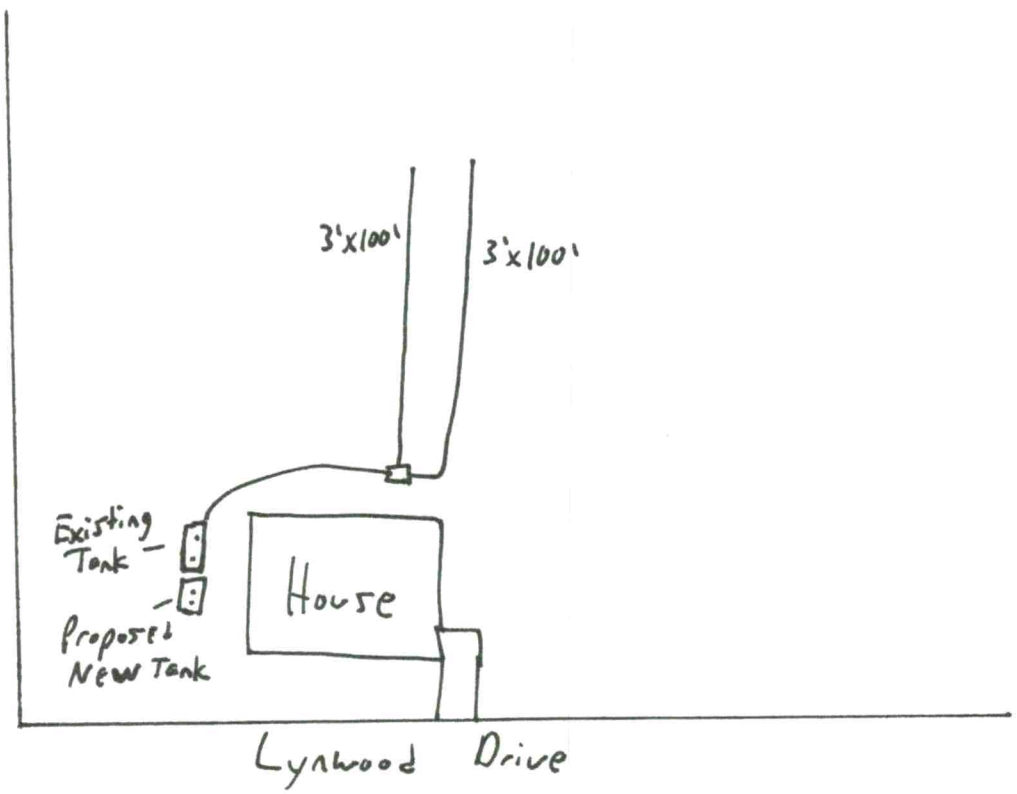
- ( ) **Property Line measurements are clearly identified**
- ( ) **All proposed structures are indicated**
- ( ) **Front and side setbacks from property line**
- ( ) **Preferred driveway location and well location**
- ( ) **Area you prefer your septic system to be placed**
- ( ) **North arrow, or other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

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

CONNECTGIS WEB HOSTING

North Carolina
Iredell County

1:50

Search



Excel 2000/2003

	Address	City	State	Zip	Street Name
1	1903 LYNNWOOD DR	STATESVILLE	NC	28677	LYNNWOOD