ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704)-878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 318935

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

PIN # 4736 -03-2903

APPLICANT/OWNER: Zachary Daily APPLICANT ADDRESS: 158 Huntington Lane Mooresville NC 28117.

SITE ADDRESS: 2311 Wilkesboro Hwy Statesville NC 28625 PHONE: ALT. PHONE

SITE DIRECTIONS: In between old & New Highway SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: SECTION: LOT # LOT AREA: 1.846 AC DESIGN FLOW: 360 L.T.A.R.: .30

Septic Tank	1000	(gal)	STB 760	Date	6/23/22	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank		(gal)	PT	Date		System Description:	Gravity - 25% Reduction			☐ Business	No. Persons 6
Pump Make		Model		Serial #		Repair System Description:	V-PPBS - 50% Reduction			☐ Other	No. Employees
# Nitrification Fields	1	# Lines	6	Linear Ft	300	Maintenance Agreement Required:	☐ YES	☒ NO		☒ Slab	☐ Crawl Space
Trench Width	36 in	Trench Bottom Depth(Low side)	22 in	Gravel Depth	—	☒ GRAVITY	☐ PRESSURE			☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ☒ Public ☐ Community

Comments / Conditions: * Property Combined BK 2871 PG 1428

INITIAL SITE SKETCH

This permit is issued pursuant to Section 11.(c) of S.L. 2018-114 using the signed & Sealed LSS Evaluation by:

Michael G Wood, LSS# 1219
Dated Oct 27, 2021.

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: Zachary E Daily Date: 11-17-2021 Installed by: Chris Frye

IMPROVEMENT PERMIT by: Benjamin A Bell Date: 11-4-2021 OPERATION PERMIT by: Matt Wilson Date: 9/29/22

AUTHORIZATION TO CONSTRUCT by: Benjamin A Bell Date: 11-16-2021 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? _____	

Michael G. Wood, LSS
620 Lee Fox Lane
Hillsborough, NC 27278

PROPERTY ID #: 4736033745
COUNTY: IREDELL
4736031987

SOIL/SITE EVALUATION
***for* ON-SITE WASTEWATER SYSTEM**

OWNER: ZACHARY DAILY
ADDRESS: 158 HUNTINGTON LN, MOORESVILLE, NC 28117
PROPOSED FACILITY: RES. PROPOSED DESIGN FLOW (.1949): 480
LOCATION OF SITE: 2315 WILKESBORO HWY

DATE EVALUATED: 1/27/21
PROPERTY SIZE: 1.84 + 0.92
PROPERTY RECORDED:

WATER SUPPLY: ☐ Private ☒ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	T / 2%	0-3	SBK/scl	FR/S	–	42+	–	–	PS 0.3 IV
		3-18	SBK/C	FI-VFE/S					
		18-42+	SBK/C	FI FR/S					
2	LS / 4%	0-5	SBK/scl	FR/S	–	42+	–	–	PS 0.4 III
		5-20	SBK/cl	FI/S					
		20-32	SBK/cl	FR/S					
		32-42+	SBK/sl	FR/–					
3	LS / 8%	0-28	SBK/scl	FR-FI/S	–	42+	–	–	PS 0.4 III
		28-42+	SBK/sl	FR/S					
4	LS / 7	0-4	SBK/cl	FR/S	–	42+	–	–	PS 0.4 III
		4-42+	SBK/C	FI/S					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	PPBPS	PPBPS
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): NONE
SITE CLASSIFICATION (.1948): PROVISIONALLY SUITABLE
EVALUATED BY: M. WOOD
OTHER(S) PRESENT:

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

4736033745

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH
ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

PROPERTY ID #: 4736031987
DATE OF EVALUATION: 1-27-21
COUNTY: IREDELL

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
5	LS 7%	0-38	C / SBK	FI / S	35" 10YR 6/2	—	—	—	PS 0.3 IV
6	LS 10%	0-5	scl / SBK	FR / S	40" 10YR 6/2	—	—	—	PS 0.3 IV
		5-35	C / SBK	FR / S					
		35-42+	scl / SBK	FR / S					

COMMENTS:

RECEIVED JUN 18 2021

AP- 318935

Paid $1200.00

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM* IP AUTHORIZATION TO CONSTRUCT

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment ( ) Septic Improvement Permit (X) 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.

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

The following optional attachments may also be submitted: (X) 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)

Applicant Name: Zachary Dailey Address: 158 Huntington Ln Zip: 28117

Applicant Email: edisondailey@gmail.com Phone: 704-870-1223 Alt. Phone: _____

Owner Name: Same Address: _____ Zip: _____

Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 2315 Wilkesboro Hwy, Statesville NC 28625

Subdivision Name: _____ Section/Phase: _____ Lot Number: _____

Driving Directions: Inbetween old + new highway, logs at entrance.

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

CHECK FOUNDATION TYPE

( ) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____

Maximum Number of Bedrooms: _____
Maximum Number of Occupants: _____
( ) Swimming Pool
(X) Other Addition/Structure: new septic

( ) Crawl Space Foundation
(X) 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 ( ) City Water (X) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: 1972

(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: _____ June 14 2021

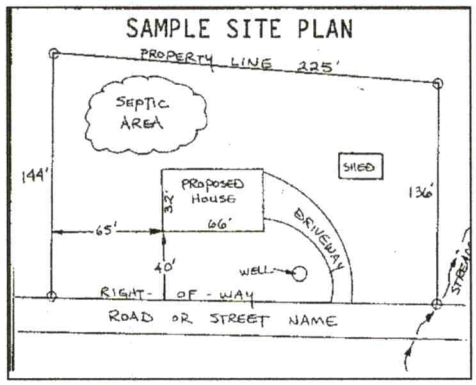
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

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:

- X **Property Line measurements are clearly identified**
- X **All proposed structures are indicated**
- X **Front and side setbacks from property line**
- X **Preferred driveway location and well location**
- X **Area you prefer your septic system to be placed**
- X **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

See Attached doc from soil engineer

Signature: _____
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

June 18
DATE

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

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*) Zachary Dailey

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, Zachary Dailey, am the legal owner(s) of the property located at 2315 Wilkesboro Hwy, identified as PIN (Parcel Identification Number) ~~[illegible]~~ 4736033745, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Zachary Dailey, Applicant and Owner, 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.

Zachary G Dailey
Signature of Owner(s)

June 14, 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

LSS Evaluation
Residential Subsurface Wastewater Treatment and Disposal System Proposal

for

2315 Wilkesboro Highway
Statesville, Iredell County, NC

Tax PIN: 4736033745.000 / 4736031987.000
October 27, 2021

Prepared For:

Zachary Daily
158 Huntington Lane
Mooresville, NC 28711

Prepared By:

Michael G. Wood, LSS
620 Lee Fox Lane
Hillsborough, NC 27278
Phone: 919-417-8027
Mgw4343334@gmail.com



The LSS Evaluation attached to this application is to be used to produce design and construction features for permitting in accordance with SL 2018-114 Section 11.(c).

- *Septic drainfield area must be protected from construction traffic and grading throughout the life of the project. Orange barrier fencing is recommended to protect the septic drainfield area.*

Details

Zachary Daily has contracted Michael Wood, LSS to prepare Session Law 2018-114 Section 11 (c) septic proposal for a joint septic system for a 2-bedroom house and a detached studio located at 2315 Wilkesboro Highway, Statesville, North Carolina (Iredell County Parcel Number: 4736033745). The daily design flow is 360 gallon/day (GPD). Two adjacent parcels have been recombined and the septic field is located on what was once the adjoining parcel (Iredell County Parcel Number: 4736031987). The two dwellings, while currently abandoned, had a joint septic system and field. This system is to replace and update the existing system and components.

Based upon a soils investigation performed by Michael Wood, it has been determined that a sufficient amount of "Suitable" Group IV soils is available for the installation of **Gravity Accepted System** with a 25% reduction for the initial system at a 0.30 GPD/ft. sq. long term acceptance rate (LTAR). The repair system is a **Vertical Pre-Fabricated Permeable Block Panel System** (PPBPS) at a 0.30 GPD/ft. sq. LTAR. The property is served by a public water.

It is anticipated that Iredell County Environmental Health (ICEH) will issue the appropriate permits for a subsurface wastewater treatment and disposal system based upon the following proposal and the enclosed Licensed Soil Scientist Evaluation, which is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11. (c).

Location

From Front Street in Downtown Statesville, take Wilkesboro Highway (NC 115) north approximately 4.5 miles. 2315 is on the left.

Existing Conditions

There are two abandoned buildings. The two building shared a septic system that was permitted by ICEH in 1972 (Permit attached). The existing system will be abandoned and septic tank removed. The new septic tank and will be installed in approximately the same location. The new drainlines are in a new location on what was once an adjoining parcel, but has been recombined as one.

References

Laws and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A, Section .1900, Department of Environment and Natural Resources, Division of Environmental Health, On-site Wastewater Section, December 6, 2018.

Accepted Wastewater System No. AWWS-2005-02-R6; North Carolina Department of Environment and Natural Resources, Division of Environmental Health, On-Site Wastewater Section, August 21, 2015.

Primary Investigator's Credentials

NC Licensed Soil Scientist No. 1219
SC Certified Professional Soil Classifier No. 114

Plans and Specifications

A. Septic Tank

1. The septic tank shall be State approved (Section .1953 of 15A NCAC 18A), watertight, structurally sound, and minimum 1,000 gallons in capacity.
2. The septic tank will be fitted with an approved effluent filter and riser for easy access and periodic maintenance.
3. It is the responsibility of the septic contractor to thoroughly inspect the septic tank prior to accepting delivery to assure that the tank has had time to properly cure and is free of cracks or other structural deficiencies.

B. Pipes and Fittings

1. All discharge piping, connectors and supply lines should be made of SCH 40 PVC.
2. All joints must be properly "welded" utilizing the appropriate PVC cement for each application.
3. The supply line from septic tank to Line 2 shall be 3-inch Schedule 40 PVC (approximate length of supply line is 125 feet).

C. Distribution Method – Serial

1. The drainlines will be fed via a serial distribution.

D. Drainfield Installation

1. The drainfield has been previously laid out on-site utilizing metal stemmed flags. The property owner/builder should mark this area and isolate it as much as possible from construction traffic.
2. Under no circumstances shall any construction take place within the drainfield area while the soil is in a wet condition.
3. The specified system the shallow placed innovative wastewater system Infiltrator Quick4 Chamber System or any other system with a state-approved 25% reduction in required drainline length.

4. The drainfield consists of six (6) lateral trenches 3-foot wide and 40, 47, 47, 60, 45, and 60 feet long. Total drainline length is 300 feet.
5. The trench depth for this system shall be **22 inches on the low-side of the trench**.
6. The laterals are to be installed on contour with the land, keeping the individual trench bottoms level from beginning to end.
7. The trenches should be left open for the final inspection by the County.

Initial & Repair Systems - 2315 Wilkesboro Highway

Field Line #	Color	Initial/Repair	Field Length	System Length	Setup #1	Relative Elevation
1	Y	Extra	30	30	16.0	90.70
2	B	Initial	40	40	16.6	90.10
3	W	Initial	47	47	17.5	89.20
4	P	Initial	47	47	18.3	88.40
5	Y	Initial	60	60	19	87.70
6	B	Initial	75	46	19.8	86.90
7	W	Repair	75	75	20.8	85.90
8	P	Repair	75	75	21.7	85.00
9	Y	Repair	60	60	22.3	84.40
10	B	Initial	60	60	23.2	83.50
				Proposed Septic Tank:	6.9	99.80
	Bottom Corner of Utility Box along Spring Blossom Lane:				6.7	100

E. Final Landscaping

1. Final cover over the drainfield shall be at least 6-inches deep. Additional soil cover may be required to achieve the 6-inch requirement.
2. The drainfield shall be shaped to shed rainwater and be free from low spots.
3. The entire area of the drainfield should be planted with grass as soon as possible to prevent erosion. The soil should be properly tilled, limed (if necessary) and fertilized prior to planting. After applying grass seed, the area should be heavily mulched with straw or other suitable material.

Maintenance

G. <u>In General</u>

The designed system does not require ongoing maintenance via a person certified (Certified Subsurface System Operator) by the North Carolina Department of Environment and Natural Resources to operate subsurface wastewater systems (Section .1961 Maintenance of Sewage Systems). However, the following maintenance should be considered by the owner.

1. The homeowner must maintain the drainfield area through periodic mowing. The drainfield must not be allowed to become overgrown.
2. The septic tank should be pumped every 4 years or when the solids within the septic tank reach an elevation that is equivalent to 25% of the volume of the tank. In some

situations, the tanks may need to be pumped more frequently. If you are using a garbage disposal, it is recommended that the septic and pump tanks be cleaned out annually.

3. When it becomes necessary to clean the effluent filters, the filters should be removed, and the accumulated debris washed back into the septic or pump tank – not onto the lawn.
4. Any damp areas, leakages or malfunctions in the drainfield should be addressed immediately.
5. Divert gutter downspouts and surface water runoff away from the drainfield and septic and pump tanks.

Initial System Design Specifics

Daily Design Flow:	360 GPD
Effluent Loading Rate:	0.300 GPD per sq. ft.
Drainfield Type:	Accepted (25 % Reduction)
Maximum Trench Depth:	22 Inches low-side of Trench
Supply Size:	3 Inch
Supply Line Length:	Approximately 125 feet
Number of Drainlines:	6
**Drain Lines:	(6) 3' Wide x 40, 47, 47, 60, 46, 60' Long
**Drainline Spacing:	9 Foot on Centers
Total Trench Length:	300 Linear Feet
Distribution Method:	Serial
Final Cover Requirement:	6 Inches

** See drainfield layout for site locations and more details.

Repair System Design Specifics

Effluent Loading Rate:	0.300 GPD per sq. ft.
Drainfield Type:	Vertical PPBPS (50 % Reduction)
Installation Trench Depth:	28 Inches low-side of Trench
Number of Drainlines:	3
**Drain Lines:	(3) 75, 75, 60' Wide x 100' Long
**Drainline Spacing:	9 Foot on Centers
Total Trench Length:	200 Linear Feet

** See drainfield layout for site locations and more details.

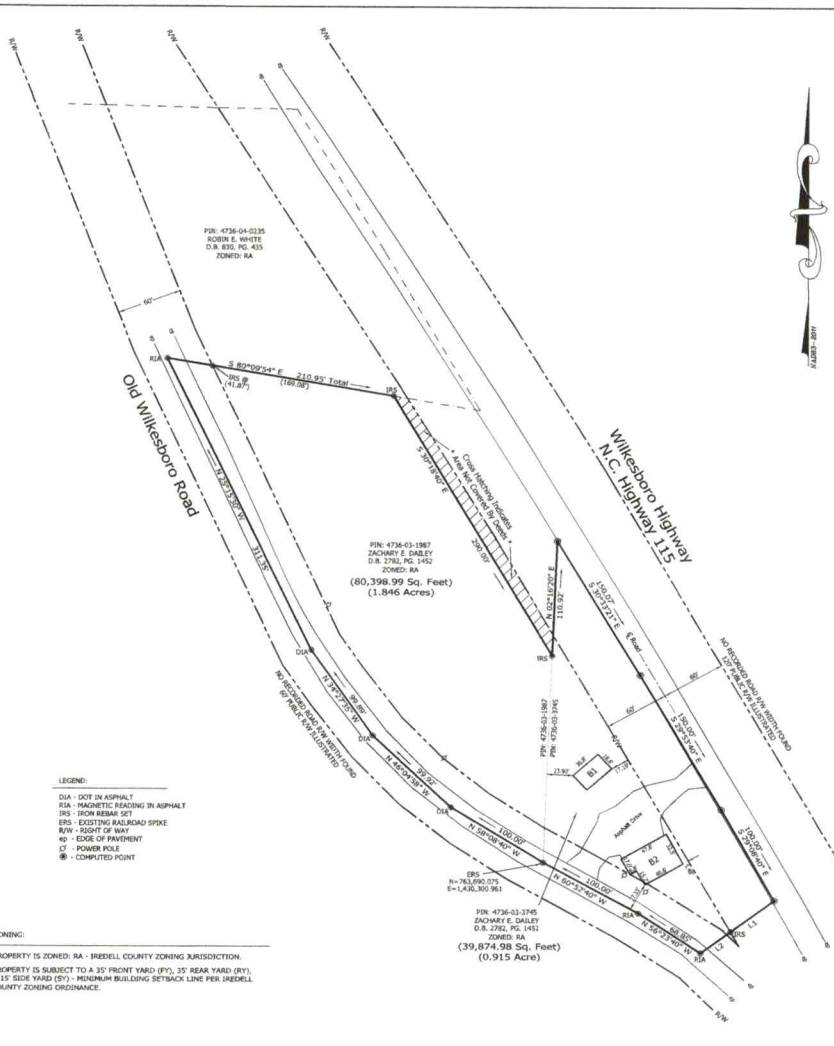
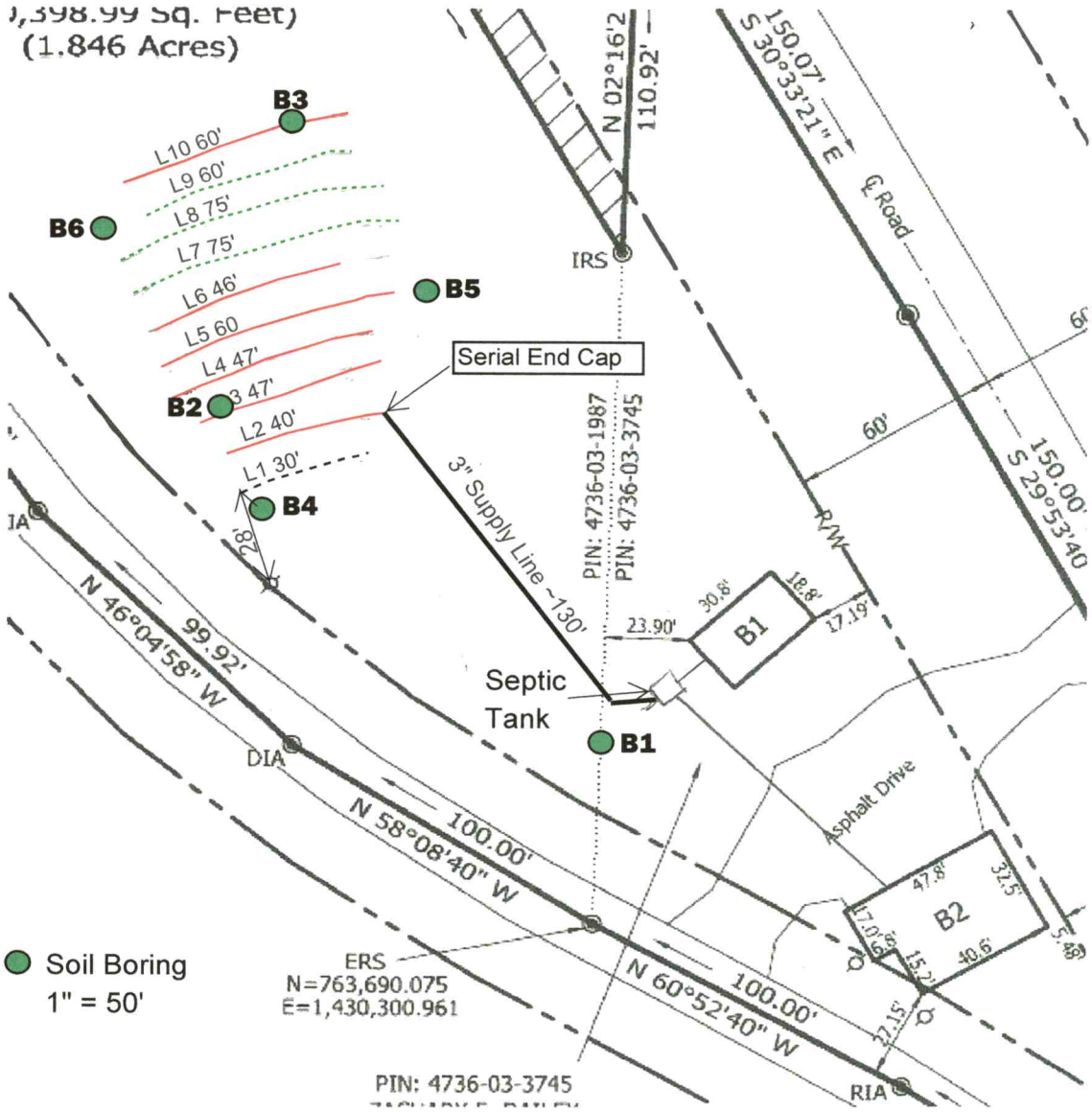
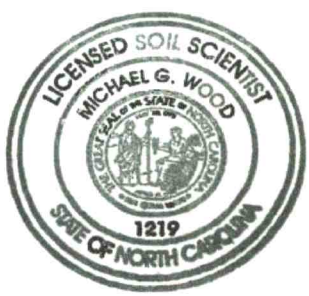

Old Wilkesboro Road
Wilkesboro Highway
N.C. Highway 115
PIN: 4736-04-0235
ROBIN E. WHITE
D.B. 830, PG. 435
ZONED: RA
S 80°09'54" E 210.92' Total
(169.00')
IRS @
(41.87')
S 30°17'40" E
Cross Hatching Indicates
Area Not Covered by Deed
200.00'
PIN: 4736-03-1987
ZACHARY E. DAILEY
D.B. 2782, PG. 1452
ZONED: RA
(80,398.99 Sq. Feet)
(1.846 Acres)
N 59°43'00" W
311.35'
N 02°16'00" E
110.92'
S 30°17'40" E
S 59°43'00" W
100.00'
N 30°17'40" W
100.00'
N 59°43'00" E
100.00'
S 30°17'40" E
100.00'

Figure 2. 2315 Wilkesboro Hwy





IREDELL COUNTY HEALTH DEPARTMENT

Statesville Phone TR 3-7271 Mooresville Phone NO 3-1271

PERMIT TO INSTALL SEPTIC TANK

Permit No._____ Permit Date_____ 19___

Owner J.C. Webber Address _____

Installed By Herman Gibson ~~Webber~~

Location of Property N. 115 past Webbers Carlot.

This installation serves two buildings. This was Approved by R.W. Johnson. Installation was installed illegally.

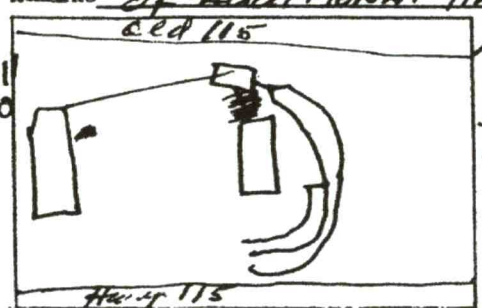
Tank		Capacity		Length of Lines		Fixtures	
Block	( )	1000	( )	225'	( )	No. of Baths	(2)
Precast	(X)	1250	( )	250'	( )	Dishwasher	( )
		1500	( )	Other_____		Garbage Grdr.	( )
		Other_____				Other	

Corrected by Additio

NOTIFY HEALTH DEPARTMENT AT LEAST EIGHT HOURS BEFORE TANK IS TO BE INSPECTED

Final Inspection 5-24 1972 Approved (X) Disapproved ( ) of 125

Remarks of additional line before system was put in use. Designed for clothing store and gas station. No food service establishment is to ever go into these buildings without APPROVAL OF Health Dept.



Installation

Sanitarian

AGENT AUTHORIZATION FORM

SL-2018-114 LSS Evaluation

PROPERTY LEGAL DESCRIPTION:

Lot No. N/A Phase: N/A PIN: 4736033745 / 4736031987

STREET ADDRESS: 2315 Wilkesboro Highway

Statesville, NC

Please print:

Property Owner: Zachary Daily

Property Owner: _____

The undersigned, registered property owner(s) of the above noted property, do hereby authorize

Michael G. Wood, LSS

(Contractor / Agent)

To act on my behalf and take all actions necessary for the processing, issuance, and acceptance of the permit or certification and any and all standard and special conditions attached.

Property Owners Address (if different than property above):

158 Huntington Lane, Mooresville, NC 28711

Telephone: _____

We hereby certify the above information submitted in this application is true and accurate to the best of our knowledge.

The LSS Evaluation attached to this application is to be used to produce design and construction features for permitting in accordance with SL 2018-114 Section 11.(c).

Zachary G Daily 10/29/2021

Owner's Signature Date

_____

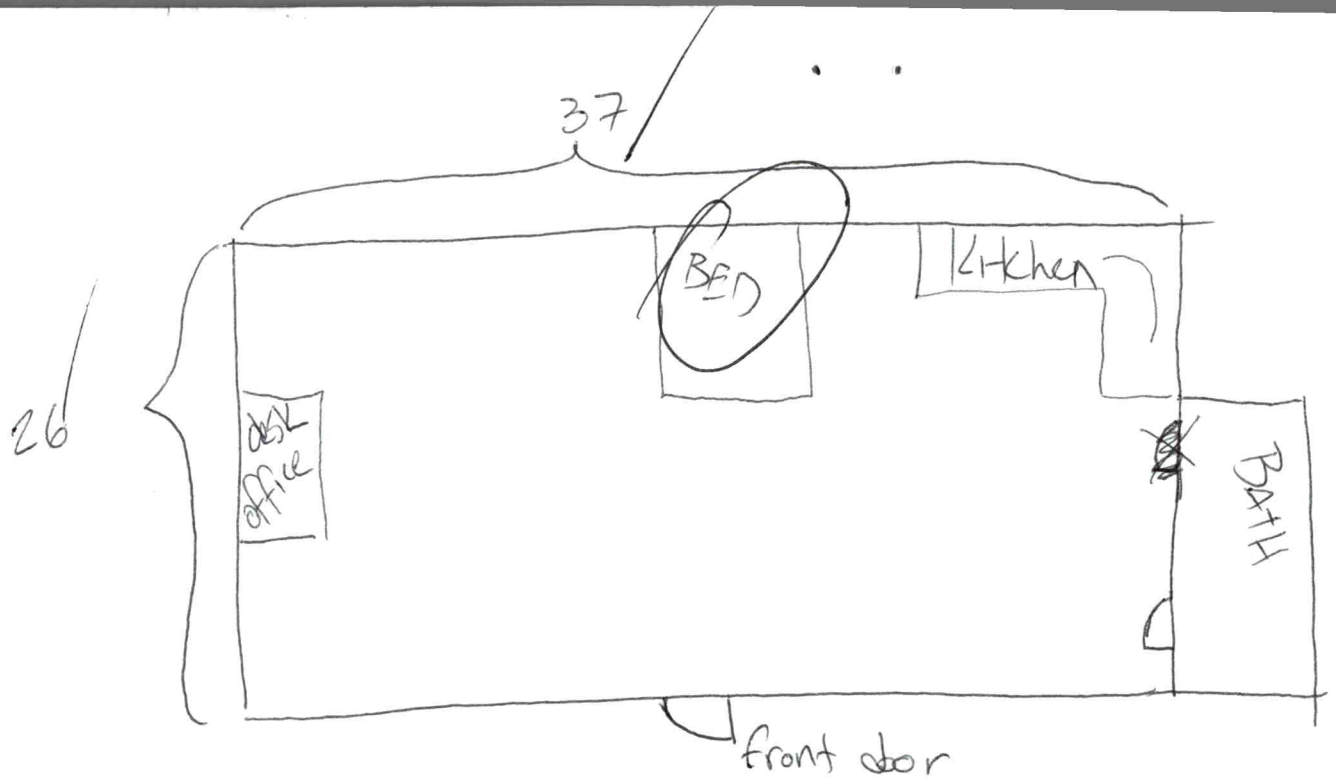
Owner's Signature Date

_____

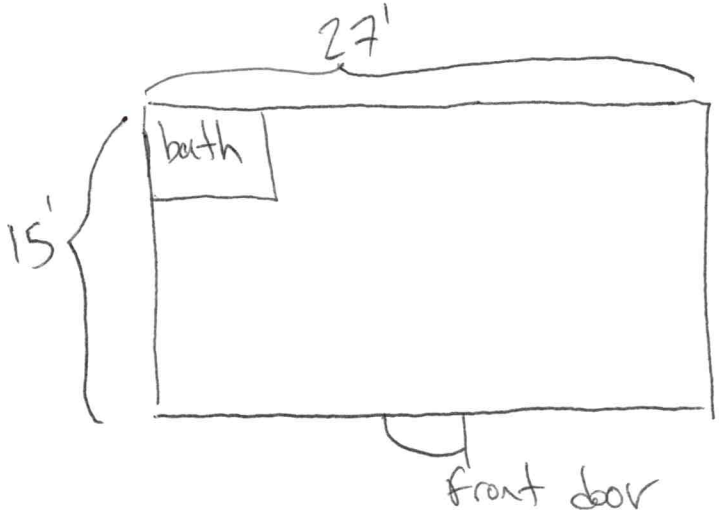
Owner's Legal Representative Signature Date

Michael G. Wood 10/29/2021

LSS Signature Date



2311 Wilkesboro Hwy



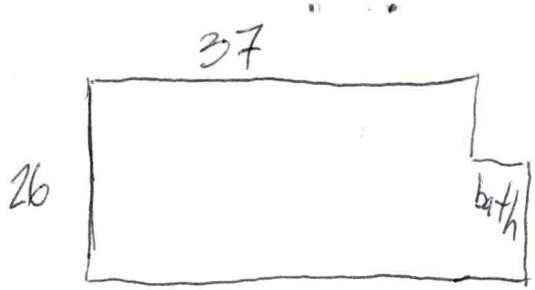
2315 Wilkesboro Hwy

Acknowledgement Of
Plans Submittal ONLY!

Date 11-10-21

Date 11-15-21

2311 →



2315 →

