ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) [illegible] PERMIT # [illegible] -- 58 -- 7494

SEPTIC: IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM / Repair PIN # 4738

APPLICANT/OWNER: Lentz Westewater
APPLICANT ADDRESS: 463 Lentz Rd, Statesville, NC 28625
SITE ADDRESS: 3568 S Chipley Ford Rd, Statesville, NC 28625
PHONE: (980) 529-3278
ALT. PHONE
SITE DIRECTIONS: I-15 N, (R) S Chipley Ford Rd, Turn (R)
SAP CONTROLLED: ☐ YES ☐ NO
SUBDIVISION:
SECTION: - LOT # - LOT AREA: 2.077 ac
DESIGN FLOW: Ext L.T.A.R.: Ext

Septic Tank 1000 (gal) STB 160 Date 2/8/23
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields Ext # Lines Ext Linear Ft Ext
Trench Width Ext Trench Bottom Depth(Low side) Ext Gravel Depth Ext

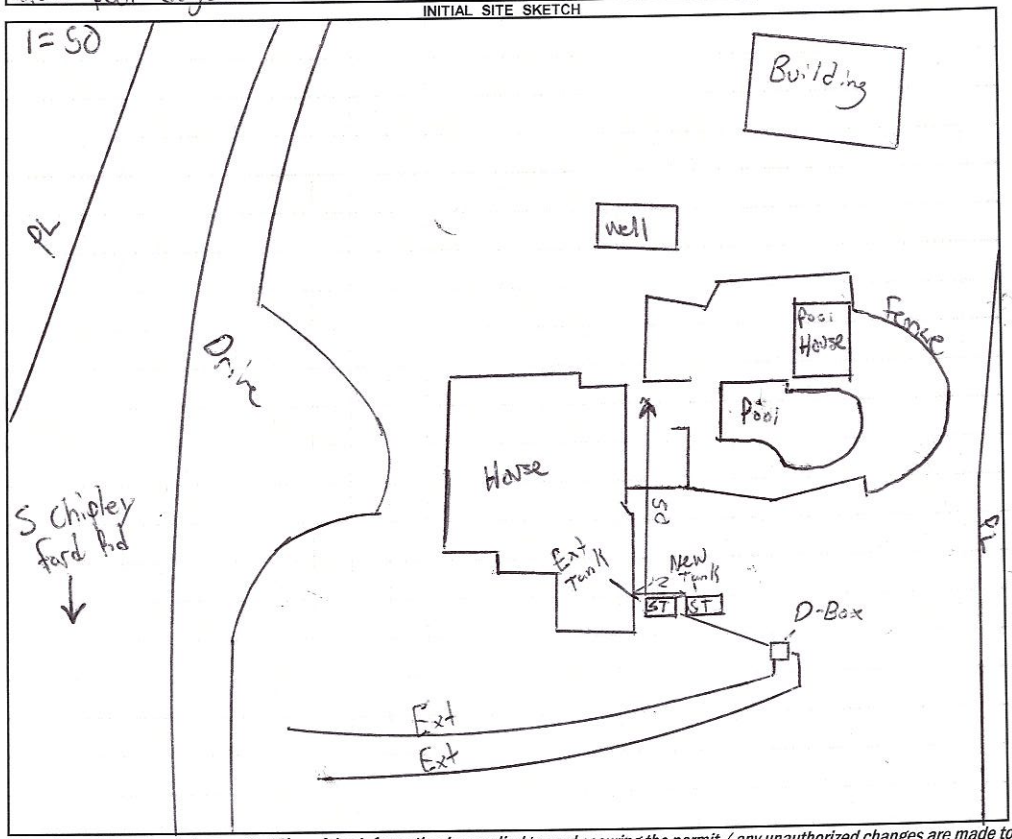
☐ New System ☑ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description:
Repair System Description: Tank Replacement
Maintenance Agreement Required: ☐ YES ☑ NO
☑ GRAVITY ☐ PRESSURE

☑ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing
No. Bedrooms 3 No. Persons 6 No. Employees
☑ Crawl Space ☐ Basement w/o plumbing

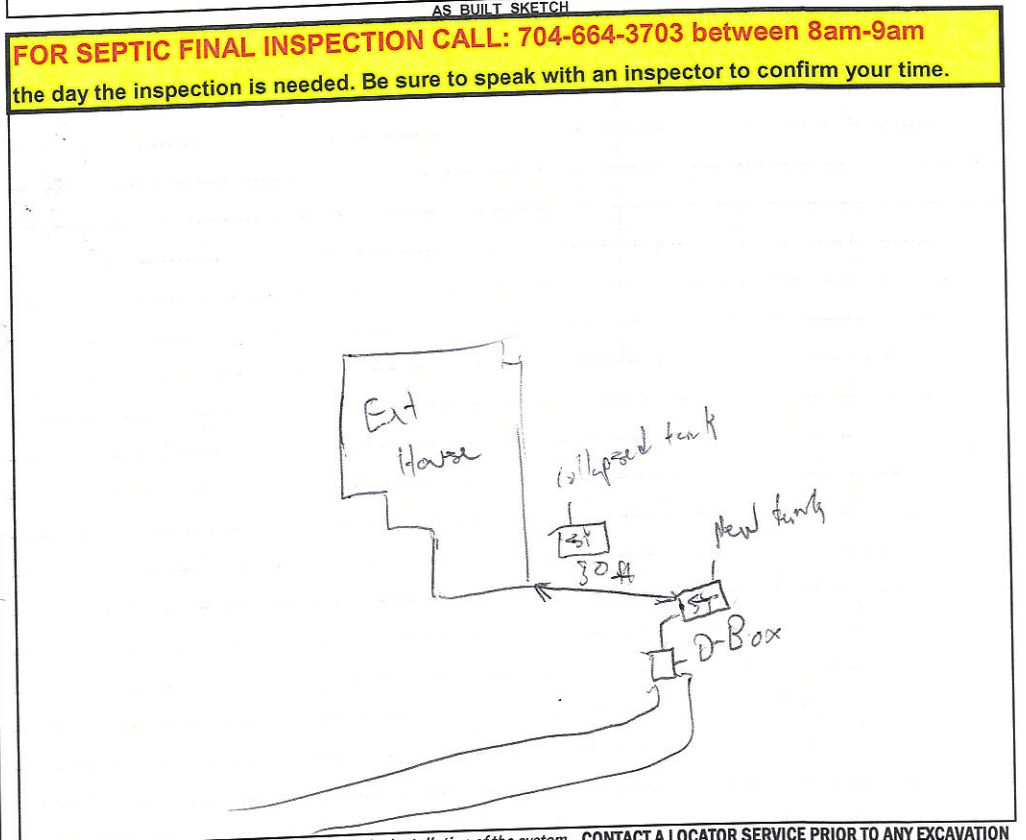
Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions: Pump, crush, fill old tank. Place new tank at least 5ft off Bricks surrandig AC unit. Stay 50 ft off well and 15ft from pool edge.

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 Wilson Date: 2/8/23
OPERATION PERMIT by: Matt Wilson Date: 3/29/23
AUTHORIZATION TO CONSTRUCT by: Matt Wilson Date: 2/8/23
Existing System Inspected by: Date:

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

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 Steele DATE 4-28-87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 145 N – 1 Rt on SR 1907 (Tighty Tad Rd) Cross Yadkin River – TR on Private Drive S. R. No. _____

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

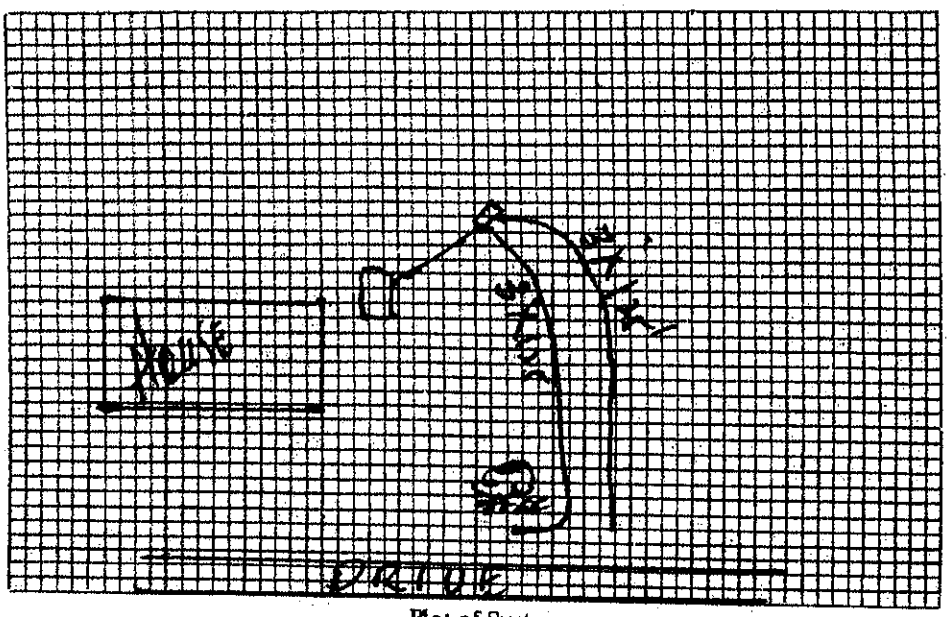
House ✓ Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area _____

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank Existing Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 750 Linear Ft. 250
Depth of Stone in Lines 10"

Water Supply: Individual (✓)
Public ( )

Installed by Ray Lentz

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 4/28/87

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

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

3568 S. Chipley Ford



Address: 3568 S Chipley Ford Rd STVL
Current HO: Julia Steele **HO #:** 912-604-6157
# of Bed: 3 **# of Occupants:** 4
Foundation Type: (Crawlspace) Slab B/WP B/WOP
Water supply: Public (Well) **Other:** _____
Year Installed: _____



Tax Map Information

• PIN	4738887494,000
• Address	3568 S CHIPLEY FORD RD
• Account #	Acct 77405417
• Tax Owner	STEELE JOHN S
• Mailing Address	3568 S CHIPLEY FORD RD
•	STATESVILLE, NC 28625
• GIS Owner	STEELE JOHN S
• Deed Info	1179 / 646 - WD - 19991228
• Tax Acres	2.0777 AC
• Lot #	
• Description	OFF E SIDE CHIPLEY FORD RD
• Zoning	RA
• Old Parcel #	
• Bldg Value	$398,010
• OBXF Value	$12,600
• Land Value	$15,560
• Total Value	$426,170
• 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.

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

Julia Steele call about well
(912) 604-6157