ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 2023-12735

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

PIN # 4742 -- 78 -- 2695

APPLICANT/OWNER: Joanna VanDeWater APPLICANT ADDRESS: 2622 Amity Hill Rd, Statesville 28677

SITE ADDRESS: 2622 Amity Hill Rd, Statesville 28677 PHONE: 704-579-2719 ALT. PHONE -

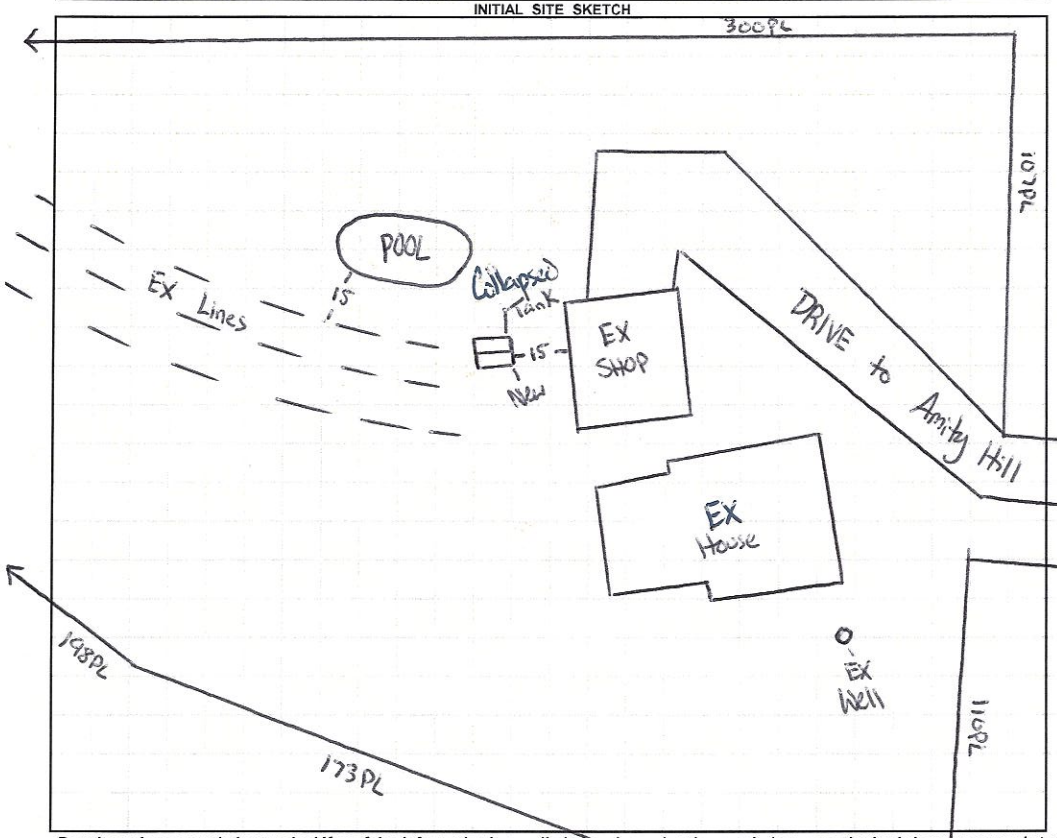
SITE DIRECTIONS: 115 S - Amity Hill SAP CONTROLLED: ☐ YES ☐ NO

SUBDIVISION: - SECTION: - LOT # - LOT AREA: 4.83 acres DESIGN FLOW: EX L.T.A.R.: EX

Septic Tank	1000	(gal)	STB 2071	Date INFILTRATOR	☐ New System	☒ Repair	☐ Expansion	System Type: I (II) III IV V VI	☒ Residence	No. Bedrooms	4	Water Supply	
Pump Tank		(gal)	PT	Date	System Description:	EXISTING			☐ Business	No. Persons	8	☒ Private	
Pump Make		Model		Serial #	Repair System Description:	Tank replacement			☐ Other	No. Employees		☐ Public	
# Nitrification Fields	EX	# Lines	EX	Linear Ft EX	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☐ Crawl Space		☐ Community	
Trench Width	EX	Trench Bottom Depth(Low side)	EX	Gravel Depth EX	☒ GRAVITY	☐ PRESSURE			☒ Basement w/plumbing			☐ Basement w/o plumbing	

Comments / Conditions: Pump, crush, & fill old tank. Replace distribution if necessary.

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.

1=50

INSTALLED AS SHOWN

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: Cary Hil Date: 1/10/23 OPERATION PERMIT by: Burnett C. White Date: 1-20-2023

AUTHORIZATION TO CONSTRUCT by: Cary Hil Date: 1/10/23 Existing System Inspected by: Date:

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



Tax Map Information

• PIN	4742782695.000
• Address	2622 AMITY HILL RD
• Account #	Acct 80073935
• Tax Owner	VANDEWATER NATHAN
• Mailing Address	2622 AMITY HILL RD
•	STATESVILLE, NC 28677
• GIS Owner	VANDEWATER NATHAN+JOANNA
• Deed Info	2721 / 599 - WD - 20200803
• Tax Acres	4.83 AC
• Lot #	
• Description	WISE SR2342 OFF
• Zoning	RA
• Old Parcel #	0206A00000A042
• Bldg Value	$239,540
• OBXF Value	$23,710
• Land Value	$38,250
• Total Value	$301,500
• 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.

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 Robert A. Campbell DATE 10-11-79 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION I-77 S TR on Amity Hill Rd go 1/10 mi house on left off Rd. S. R. No. _____

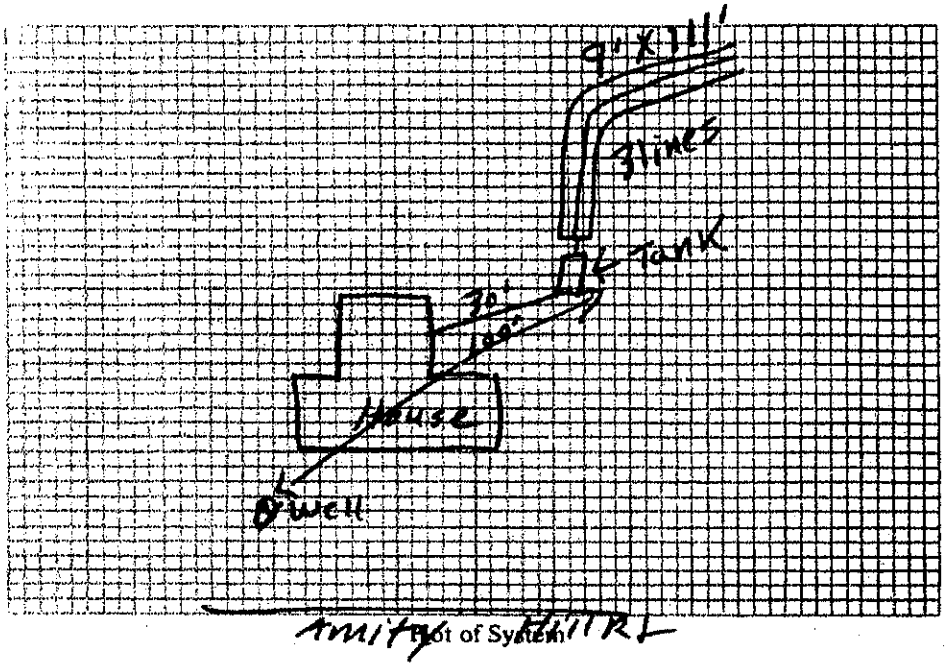
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 4 No. Bathrooms 3

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Cecil clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	20 min/inch
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2 to 10%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	10'+
			Rock or other impervious formations	none

Lot Area acreage



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 1000 Linear Ft. 333
Depth of Stone in Lines 16"
Water Supply: Individual (✓)
Public ( )

Installed by Harlee Lackey

IMPROVEMENTS PERMIT BY Andrew Causey

COMMENTS: _____

CERTIFICATE OF COMPLETION BY J. C. Moore DATE 10-11-79

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