ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 (12) Mooresville Office (704) 660-3625 (BB)

PERMIT # AP2022-4687

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

PIN # 4747 -- 42 -- 9500

APPLICANT/OWNER: Jeanie Lentz

APPLICANT ADDRESS: 463 Lentz Rd Statesville 28625

SITE ADDRESS: 117 Doe Run Ln Statesville 28625

PHONE: (704) 402-3497

ALT. PHONE: –

SITE DIRECTIONS: US-21 N, R on Shumaker Dr, L Doe Run Ln

SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: Graystone Meadow ~~160~~

SECTION: 1 LOT # 2 LOT AREA: .97AC

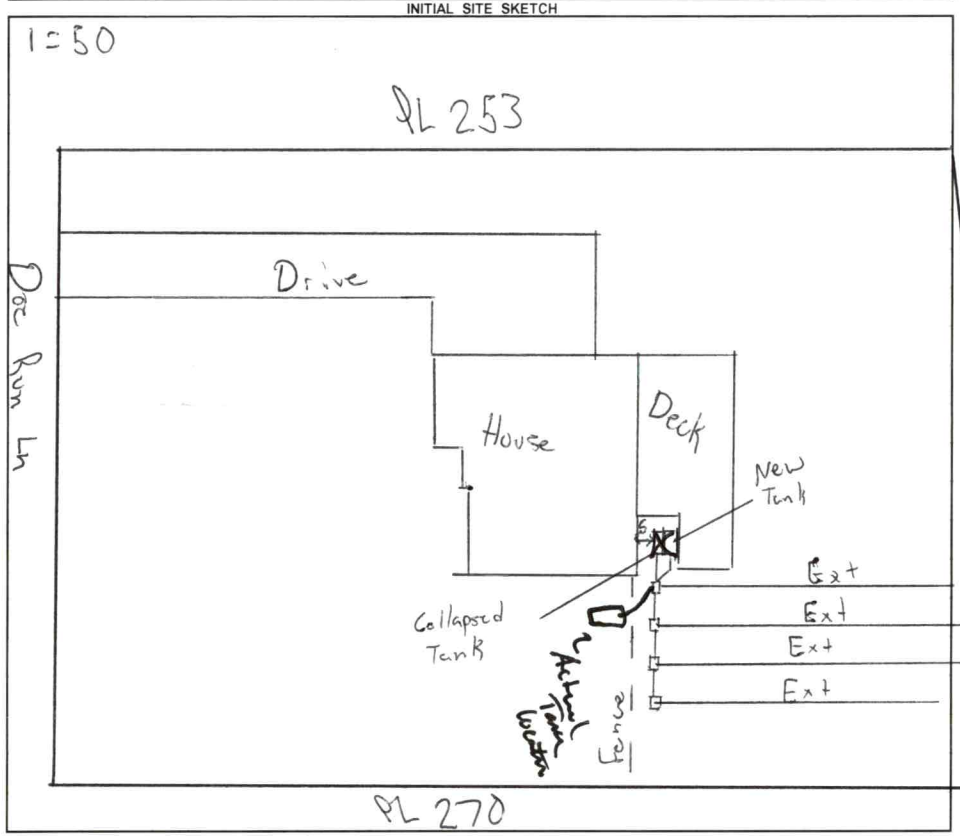
DESIGN FLOW: Ext L.T.A.R.: Ext

Septic Tank	1000 (gal)	STB ~~2~~ ~~160~~	Date 9-21-22	☐ New System	☑ Repair	☐ Expansion	System Type: I II (III) IV V VI	☑ Residence	No. Bedrooms 3
Pump Tank	(gal)	PT	Date	System Description:				☐ Business	No. Persons 6
Pump Make	Model		Serial #	Repair System Description:	Tank Replacement			☐ Other	No. Employees
# Nitrification Fields	Ext # Lines Ext		Linear Ft Ext	Maintenance Agreement Required:	☐ YES	☑ NO		☐ Slab	☑ Crawl Space
Trench Width Ext	Trench Bottom Depth(Low side) Ext		Gravel Depth N/A		☑ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ☑ Public ☐ Community

Comments / Conditions: Pump, crush, fill old tank. New tank may need to go in the same hole as the old tank.

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: Date: 9/23/22

OPERATION PERMIT by: Date: 10-5-22

AUTHORIZATION TO CONSTRUCT by: Date: 9/23/22

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? _____	

BROOK VIEW MHP LOT 24A

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PERMIT# _____ PIN# _____ DATE 4-30-01

OWNER OR CONTRACTOR BROOKVIEW MHP NEW MEXICO DRIVE PHONE Business MANAGER 450-7467 Home _____

ADDRESS LOT 24A-137 [redacted], STATESVILLE, NC 28625

LOCATION HWY 21A, ⓐ JANESDOWCRS, ② CRAWFORD, ③ BROOKVIEW, ON LEFT DOWN ARIZONA DRIVE

SUBDIVISION BROOKVIEW MHP BLOCK / SECTION _____ LOT 24A LOT AREA _____ SITE CLASS _____ DESIGN FLOW _____ L.T.A.R. _____

Septic Tank: EXISTING Gallons: STB _____ Date _____

Pump Tank: _____ Gallons: PT _____ Date _____

Pump Make: _____ Model _____ Serial No _____

Nitrification Field: No Fields 1 Square Feet _____ Linear Feet 190'

No Lines 2 Trench Width 36" Max Trench Bottom Depth _____

☐ New System ☒ Repair System Type: I Ⓘ III IV V VI

System Description: CONV GRAV

Repair System Description: _____

Maintenance Agreement Required: ☐ Yes ☐ No

Gravel Depth (24") ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other

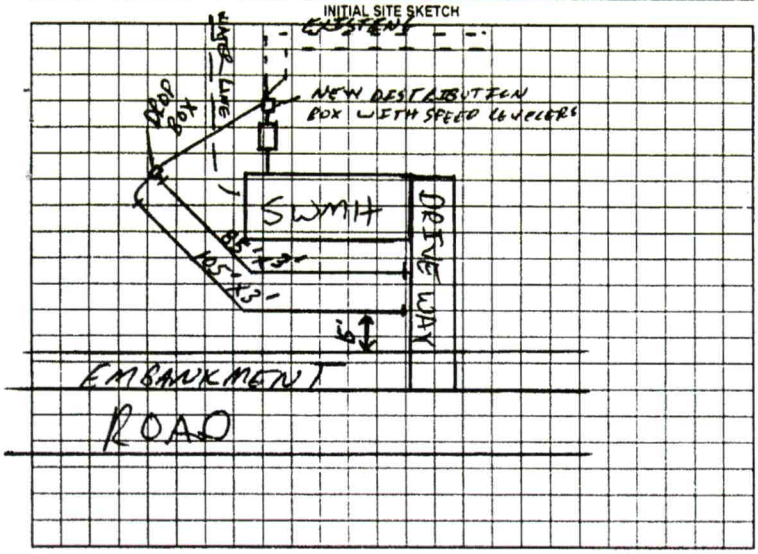
No. Bedrooms ____ No. Bathrooms ____ No. Employees ____

Water Supply: ☐ Individual ☒ Public ☐ Community

Comments/Conditions: ① INSTALL NEW SANITARY TEE IN TANK ② SYSTEM IS FLAGGED OUT ③ STAY 15' off the embankment ④ REROUTE H2O LINE TO MAINTAIN 10' SEPERATION BETWEEN THEM & SEPTIC SISTEM IF POSSIBLE.

Comments/Conditions: ⑤ IF HAVE ANY QUESTIONS, I WILL MEET YOU OUT THERE PRIOR TO CONSTRUCTION. 704-928-2030 LORNE LOCK REI

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM REPAIRED ACCORDING TO INITIAL SITE SKETCH

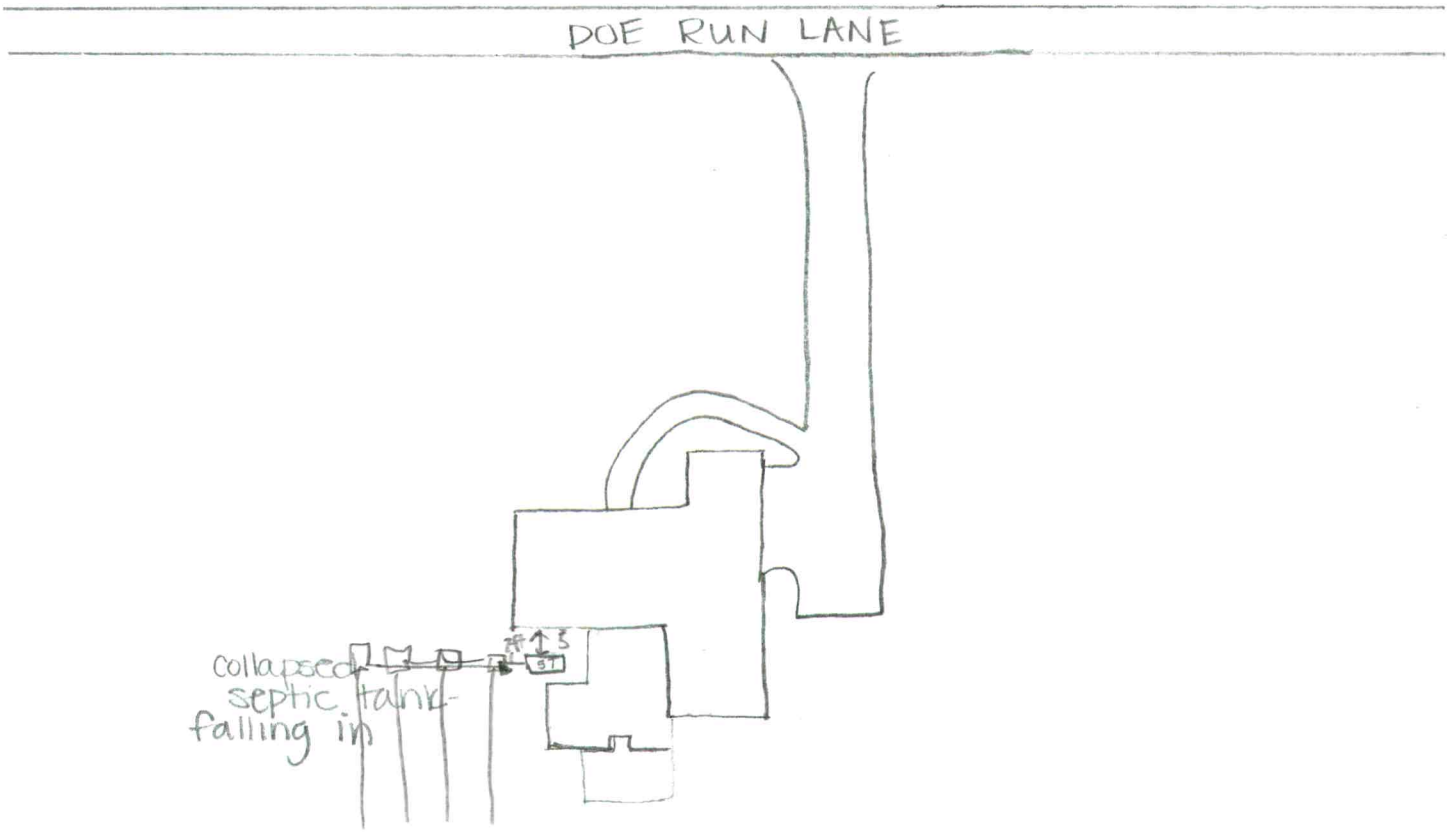
Permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: Tracy D. Pope date 5/9/01 Installed by: STEVE JORDAN

Improvement Permit by: Jim Cook REI date 4-30-01 Operation Permit by: STEVE HEDRICK date 7-5-01

Authorization to Construct by: Jim Cook REI date 4-30-01 Existing System Inspection by: _____ date _____

HEALTH DEPT COPY WHITE OWNER COPY (FINAL) YELLOW OWNER COPY (INITIAL) PINK



Address: 117 Doe Run Ln
Current HO: Toume Raja **HO #:** 704 402-3497
# of Bed: 3 **# of Occupants:** 4
Foundation Type: Crawlspace Slab B/WP B/WOP
Water supply: Public Well **Other:** _____
Year Installed: 2007

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (CI) MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PERMIT# 118152 PIN# 4747-42-9500 DATE 2/12/04

OWNER OR CONTRACTOR Rob Wright PHONE: Business (704) 902-1443 Home —

ADDRESS 229 Tomlin Road Olin N.C. 28660

LOCATION Hwy 21 N to Moore Shoemaker Drive to White Farm Rd to Doe Run Rd (Last lot on left)

SUBDIVISION Gray Stone Meadow BLOCK / SECTION — LOT 2 LOT AREA .97 Acre SITE CLASS 3 DESIGN FLOW 360 L.T.A.R. .25 ge 3/442

Septic Tank: 4000 Gallons; STB 577 Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet Eq. 40/440 Linear Feet 360

No Lines 4 Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth NA

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: Gravity, 25% Reduction

Repair System Description: Pump, 25% Reduction

Maintenance Agreement Required: ☐ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

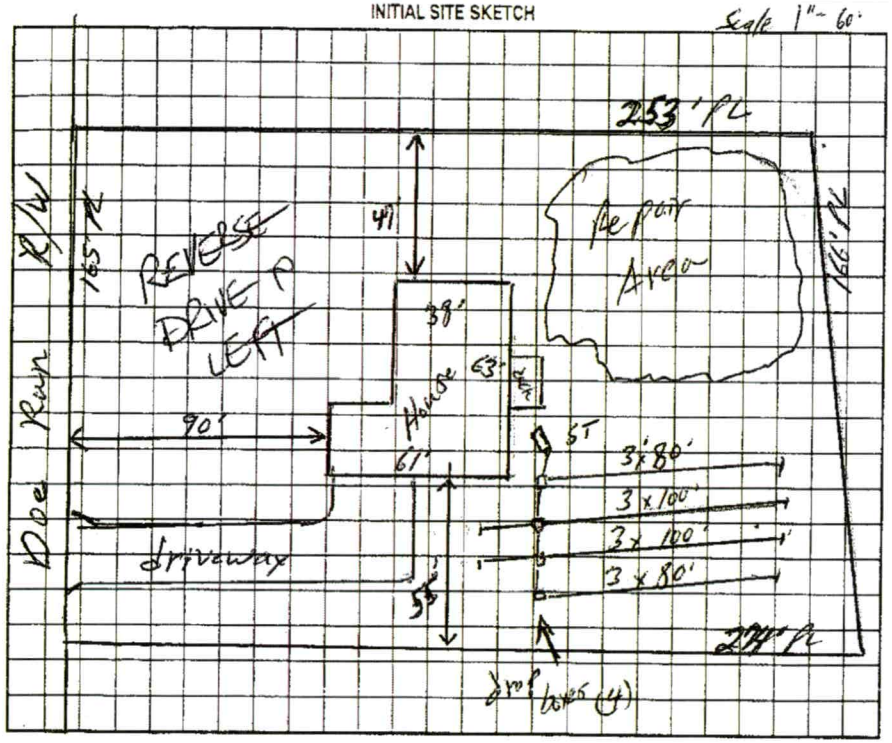
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

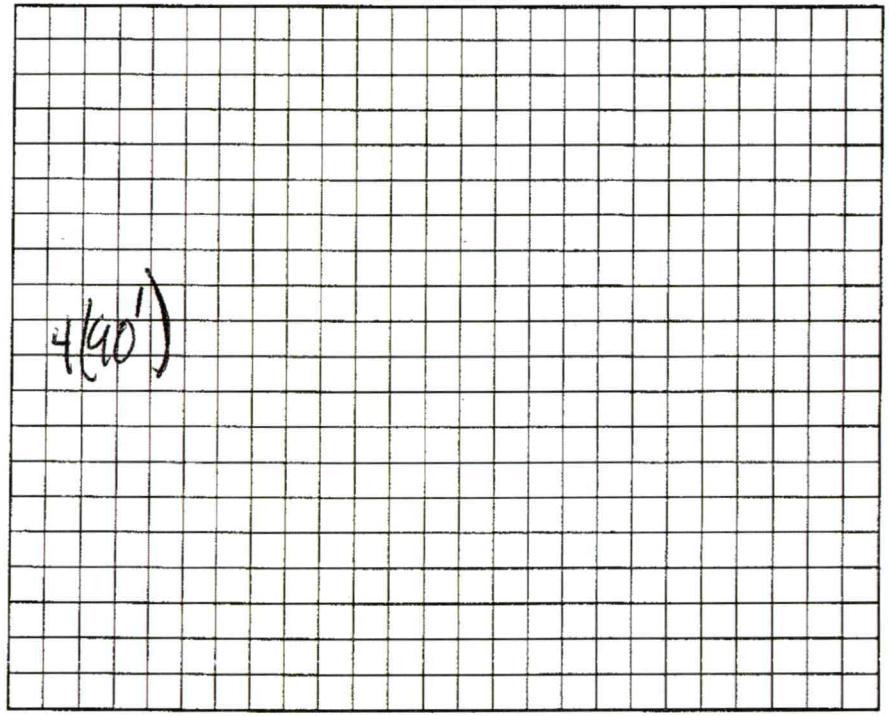
Comments:/Conditions: SEE ATTACHED CHANGE TO FLOORPLAN

Comments:/Conditions: White Filter

INITIAL SITE SKETCH Scale 1" = 60'



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. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: date 2-17-04 Installed by: Tommy Faye

Improvement Permit by: William A. Johnson date 2/12/04 Operation Permit by: date 11/1/06

Authorization to Construct by: William A. Johnson date 2/12/04 Existing System Inspection by: date

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK



Tax Map Information

• PIN	4747429500.000
• Address	117 DOE RUN LN
• Account #	Acct 77446976
• Tax Owner	RAJAPHO VIRADETH
• Mailing Address	117 DOE RUN LN
•	STATESVILLE, NC 28625
• GIS Owner	RAJAPHO VIRADETH+SOMHACK
• Deed Info	1745 / 1997 - WD - 20060508
• Tax Acres	0.97 AC
• Lot #	2
• Description	GRAYSTONE MEADOW S1 SHT1 PB19-17-17A
• Zoning	R20
• Old Parcel #	1110F05000A002
• Bldg Value	$231,310
• OBXF Value	$4,900
• Land Value	$40,000
• Total Value	$276,210
• 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.