IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 209338

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

PIN # 4749808897

APPLICANT: Jarrid Lentz APPLICANT ADDRESS: 459 Lentz Rd.

SITE ADDRESS: 463 Lentz Rd. - Stat 28625 PHONE: 704-902-4602 ALT. PHONE: N/A

SITE DIRECTIONS: Hwy 21 N TL Jennings Rd. TR Lentz Rd. Property on Left behind 459 Lentz Rd.

SUBDIVISION: Jarrid Lentz + Jeanie Lentz SECTION: N/A LOT # TRACT 2 LOT AREA: 11.12 acres DESIGN FLOW: 360gpd L.T.A.R.: 0.3

Septic Tank 1000 (gal) STB 760 Date 7-31-15
Pump Tank (gal) PT N/A Date N/A
Pump Make N/A Model Pol4/01 Serial # PL-6P
Nitrification Fields 1 # Lines 4 Linear Ft: 400
Trench Width 36" Max. Trench Bottom Depth 24" Gravel Depth N/A

☑ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: ~~CONVENTIONAL~~
Repair System Description: 25% Reduction
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:

INITIAL SITE SKETCH

See attached plan by:
Rollans Soil & Environmental Services, PA.

AS BUILT SKETCH

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: Date:

IMPROVEMENT PERMIT by: Justin Henderson Date: 4-14-15

AUTHORIZATION TO CONSTRUCT by: Justin Henderson Date: 4-14-15

Installed by: Lentz Wastewater

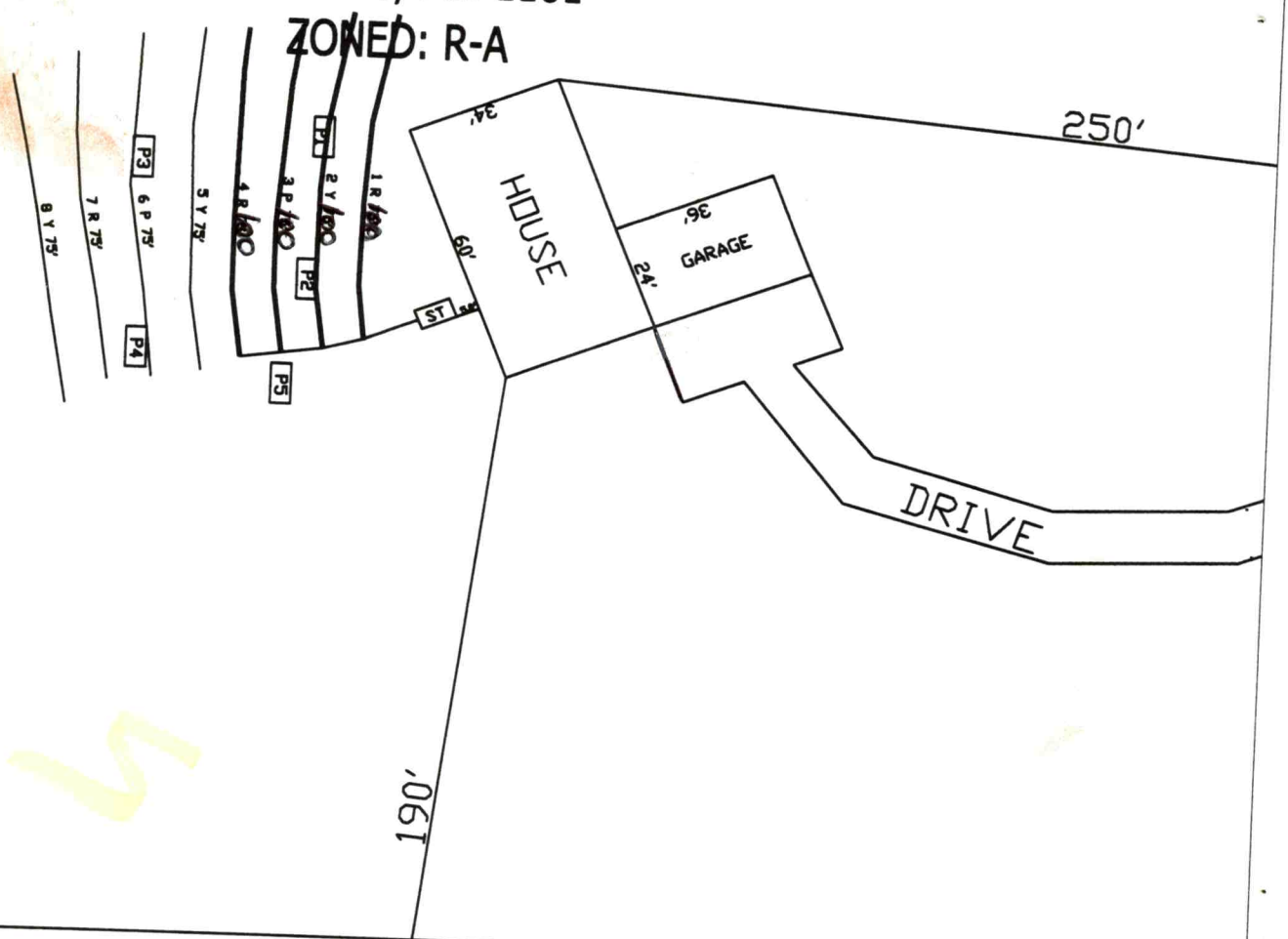
OPERATION PERMIT by: Date: 03/02/15

Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

ct 2
,68 Sq Ft
5 Acres

PIN: 4749-80-8950
JARRID M. LENTZ &
JEANIE F. LENTZ
D.B. 2070, PG. 1101
ZONED: R-A



LEGEND

- House Footprint
- Primary System Lines
- Repair System Lines

GRAPHIC SCALE
1" = 40'

40 0 40 80

FOR PRELIMINARY PLANNING PURPOSES ONLY. ALL LOTS WILL REQUIRE FINAL APPROVAL BY THE COUNTY HEALTH DEPARTMENT ON A LOT BY LOT BASIS. THIS MAP SHOULD BY USED AS A GENERAL GUIDE, SOME ADJUSTMENTS WILL BE NECESSARY IN THE FIELD DUE TO SOIL VARIABILITY AND COMPLEX TOPOGRAPHIC FEATURES. THIS MAP ONLY REFLECTS EXISTING SOIL SUITABILITY FOR ON-SITE SEPTIC TANK SYSTEMS.

ROLLANS SOIL & ENVIRONMENTAL SERVICES, PA
P.O. BOX 832
MOORESVILLE, NC 28115
PHONE/FAX: (704) 278 - 0989
ASHLEY ROLLANS, NC LICENSED SOIL SCIENTIST
MOBILE: (704) 746 - 5046
EMAIL: rollans.ashley@yahoo.com

MAP TITLE: SITE PLAN & DRAINFIELD AREAS

PROJECT NAME: JARRID LENTZ / 463 LENTZ ROAD

LOCATION/DATE: 463 LENTZ ROAD, IREDELL COUNTY, NORTH CAROLINA, APRIL 2015

JOB # : 01-3005
FILE: C:\JOBS\01-3005
PROJECT MGR.: S.A.R.
FIELD WORK: S.A.R.
DRAWN BY: S.A.R.

ROLLANS ***Soil & Environmental Services, PA.***
P.O. Box 832 Mooresville, NC 28115 Phone: (704) 658-1723 Fax: (704) 278-0989

Ashley Rollans, NC Licensed Soil Scientist
Mobile: (704) 746-5046
Email: rollans.ashley@yahoo.com

Attached is a proposed design for an 25% Reduction Septic System with gravity distribution for a 3 bedroom single family residence at 463 Lentz Rd, Iredell County, North Carolina.

Contents:

	Page
Information for the Installer	1
Design Information	
Design Specifications	2-3
Layout Specifications	4
Site Plan/System Plan	5
Calculations	6
Profile Descriptions	7

April 10, 2015
Project #: 01-3005
Design By: Rollans Soil & Environmental Services, PA

INFORMATION FOR THE INSTALLER:

The permit should be read very carefully prior to bidding. The following are details that must be considered along with all other considerations.

- Tanks shall be approved by NC DENR, and certification supplied by the manufacturer.
- Tanks shall be water tested prior to installation.
- The installer shall be responsible to the owner for placement of the tanks and to insure that final grades are returned to the original natural grade, with exception of added structural features.
- The supply trench shall be compacted to eliminate cavities left during initial fill placement.
- Installation of the system shall be during dry conditions in order to protect the soil structure.
- All fittings shall be pressure rated fittings.
- All joints shall be cleaned with PVC pipe cleaner and a heavy bodied glue applied to weld all joints.
- Where required by the county health department, post installation inspections by the designer must be scheduled 5 week days in advance.
- Trenches shall be carefully excavated so the bottom is within 2" from the highest to . the lowest points of elevation within the trench. If the bottom elevation needs adjusting after it has been trenched, it will be done by removing high points rather than filling low points. It is extremely important to insure that trenches are not over excavated during initial trenching. All fine grading within the trench will be hand done with a shovel. No loose material will be left in the trench
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- All tanks shall be properly back filled and compacted to prevent slump at a later date.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral.
- No heavy equipment shall be used on the field during or after installation. The use of a small loader (i.e. Bobcat) or a trencher (i.e. Ditch Witch 2300/2310) may be used for installation.
- Elevations at pinflag locations should be checked by the installer prior to beginning trenches.
- Septic tank riser shall be a minimum of 6" above finished grade.
- System is specified as a gravity 25% reduction (Accepted) installation.
- Repair is specified as a gravity 25% reduction (Accepted) installation.

GRAVITY ACCEPTED SYSTEM FOR WASTEWATER TREATMENT

Owner/Applicant: Jarrid Lentz

Address: 459 Lentz Rd
Statesville, NC 28625

Phone: 704.902.4602

County: Iredell

Location: 463 Lentz Rd

Source of Wastewater Flow: 3 Bedroom Single Family Residence

Estimated Gallons Per Day Flow: 360

System Flow: N/A

Design Specifications

Drainfield Size: 300

Loading Rate (gpd/ft.^{2}): 0.3

Depth of Gravel in Trench: N/a

Gravel Size: N/A

Trench Depth: 24 in.

Trench Width: 36 in.

Septic Tank Size: 1000

Estimated Supply Line Length: 15

Supply Line Diameter: 4 in. SCH 40 PVC

Supply Line Volume: 9.80

Dosing Volume: N/A

Supply Manifold: N/A

Supply Manifold Length: N/A

Supply Manifold Volume: N/A

Recommended Float Controls: N/A

Recommended Control Panel: N/A

Pressure Head: N/A

Friction Head: N/A

Elevation Head: N/A

Total Dynamic Head: N/A

Threaded Union: N/A

Gate Valves: N/A

Check Valves: N/A

Anti-Siphon Hole: N/A

Additional Comments: Soil suitability was performed by Rollans Soil & Environmental Services

463 Lentz Rd

ACCEPTED SYSTEM

DESIGN FLOW (gpd):	360
SOIL APPLICATION RATE (gpd/ft.^{2}):	0.3
TOTAL AREA TRENCH BOTTOM:	900
TOTAL LATERAL LENGTH:	300
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	300
SUPPLY LINE LENGTH:	15
TOTAL DYNAMIC HEAD:	N/A
MANIFOLD SIZE:	N/A
DOSING VOLUME:	N/A
PUMP TANK DRAW DOWN*:	N/A
SEPTIC TANK SIZE:	1000

JARRID LENTZ / 463 LENTZ ROAD

Project #: 01-3005

LAYOUT FOR 3 BEDROOM HOME

April 10, 2015

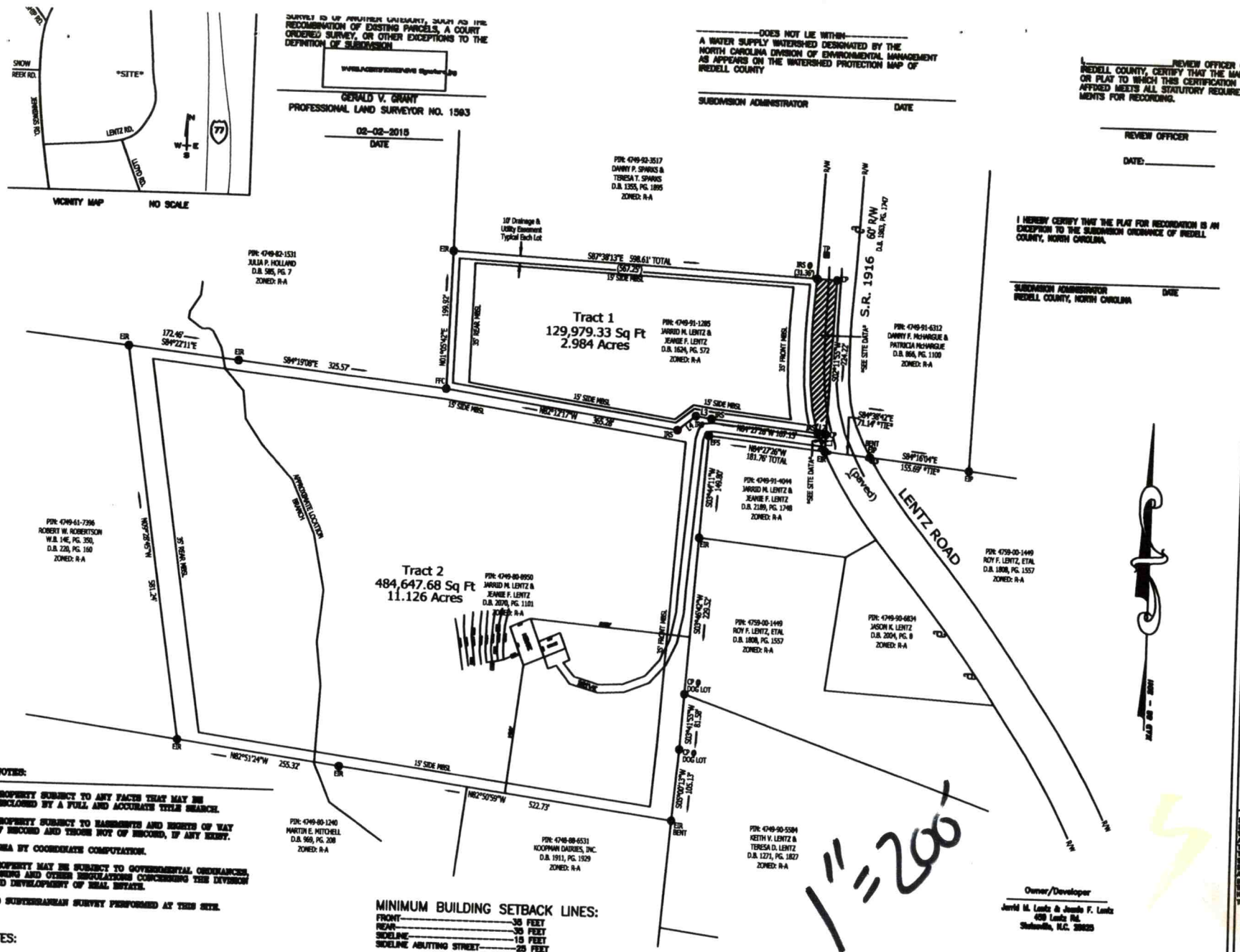
LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM							
INSTR. 1							
1	***RED***						
2	***YELLOW***					*75*	*75*
3	***PINK***					*75*	*75*
4	***RED***					*75*	*75*
5	YELLOW					*75*	*75*
6	PINK					75	75
7	RED					75	75
8	YELLOW					75	75
						75	75
					Total	**600**	**600**

	LINE LENGTH	LTAR GPD/FT2	SYSTEM TYPE	SOIL LTAR GPD/FT2	TRENCH SYSTEM	DISTRIBUTION
****System***	***300***	***0.300***	***ACCEPT.***	***0.300***	***25% RED.***	***GRAVITY***
Repair	300	0.300	***ACCEPT.***	0.300	***25% RED.***	***GRAVITY***

Notes: **All measures in feet

**Nitrification lines are demonstrated on contour via colored pin flags

**BS, HI, and FS indicate rod readings



SURVEY IS OF ANOTHER CATEGORY, SUCH AS THE RECOMBINATION OF EXISTING PARCELS, A COURT ORDERED SURVEY, OR OTHER EXCEPTIONS TO THE DEFINITION OF SUBDIVISION

GERALD V. GRANT
PROFESSIONAL LAND SURVEYOR NO. 1563

02-02-2015
DATE

DOES NOT LIE WITHIN A WATER SUPPLY WATERSHED DESIGNATED BY THE NORTH CAROLINA DIVISION OF ENVIRONMENTAL MANAGEMENT AS APPEARS ON THE WATERSHED PROTECTION MAP OF IREDELL COUNTY

SUBDIVISION ADMINISTRATOR DATE

REVIEW OFFICER OF IREDELL COUNTY, CERTIFY THAT THE MAP OR PLAT TO WHICH THIS CERTIFICATION IS AFFIXED MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING.

REVIEW OFFICER

DATE:

I HEREBY CERTIFY THAT THE PLAT FOR RECORDATION IS AN EXCEPTION TO THE SUBDIVISION ORDINANCE OF IREDELL COUNTY, NORTH CAROLINA.

SUBDIVISION ADMINISTRATOR DATE
IREDELL COUNTY, NORTH CAROLINA

KNOW ALL MEN BY THESE PRESENTS, THAT WE HEREBY CERTIFY THAT WE ARE THE OW THE PROPERTY SHOWN AND DESCRIBED HI AND THAT WE HEREBY ACKNOWLEDGE THI PLAT AND ALLOTMENT TO BE OUR FREE ACT AND DEED.

JARRID M. LENTZ

DATE

JEANIE F. LENTZ

DATE

NORTH CAROLINA, IREDELL COUNTY,
I, STEPHEN M. SHARPE
A NOTARY PUBLIC OF THE COUNTY AND STATE AFORESAID, CERTIFY THAT JARRID M. LENTZ & JEANIE F. LENTZ
PERSONALLY APPEARED BEFORE ME THIS ACKNOWLEDGED THE EXECUTION OF TH FOREGOING INSTRUMENT. WITNESS M AND OFFICIAL STAMP OR SEAL,
THIS ____ DAY OF FEBRUARY, 2015.

STATE OF NORTH CAROLINA, IREDELL C
I, GERALD V. GRANT, CERTIFY THAT
DEED DESCRIBED HEREON (BOOK 1624
ACTUAL SURVEY MADE UNDER MY SUP
(OTHER); THAT THE RATIO OF PRECISION
SURVEY AS CALCULATED IS 1:1 (
WITNESS MY ORIGINAL SIGNATURE, REGI
SEAL THIS 2nd DAY OF FEBRUARY, 2015.

NOTES:

PROPERTY SUBJECT TO ANY FACTS THAT MAY BE DISCLOSED BY A FULL AND ACCURATE TITLE SEARCH.

PROPERTY SUBJECT TO EASEMENTS AND RIGHTS OF WAY OF RECORD AND THOSE NOT OF RECORD, IF ANY EXIST.

AREA BY COORDINATE COMPUTATION.

PROPERTY MAY BE SUBJECT TO GOVERNMENTAL ORDINANCES, ZONING AND OTHER REGULATIONS CONCERNING THE DIVISION AND DEVELOPMENT OF REAL ESTATE.

NO SUBTERRANEAN SURVEY PERFORMED AT THIS SITE.

OTES:

HERE IS A TEN FOOT DRAINAGE AND UTILITIES EASEMENT ACROSS THE FRONT, REAR, AND EACH DELINE OF EACH LOT.

HE SURVEYED PROPERTY DOES NOT LIE WITHIN A FLOOD HAZARD AREA AS DETERMINED BY FLOOD AP 3710474800J, EFFECTIVE DATE 3/18/2008.

HE LOTS IN THIS SUBDIVISION WILL BE SERVED WATER BY IREDELL WATER CORPORATION & SEPTIC R INDIVIDUAL SEPTIC TANKS.

ON PINS ARE SET AT ALL PROPERTY CORNERS UNLESS OTHERWISE NOTED.
HE SURVEYED PROPERTY AND ALL ADJACENT PROPERTY IS ZONED R-A.
HE SURVEYED PROPERTY DOES NOT LIE WITHIN THE U.S. DEPARTMENTS OF INTERIOR'S TIONAL REGISTER OF HISTORIC PLACES.
HE SURVEYED PROPERTY DOES NOT LIE WITHIN 2000 FEET OF A NORTH CAROLINA RIZONTAL GRID MARKER.
OF THE DATE OF THIS RECORDING, THE LOTS REPRESENTED ON THIS PLAT HAVE NOT BEEN SPECTED OR APPROVED BY THE IREDELL COUNTY HEALTH DEPARTMENT. UNTIL INSPECTED,

MINIMUM BUILDING SETBACK LINES:

FRONT	35 FEET
REAR	35 FEET
SIDELINE	15 FEET
SIDELINE ABUTTING STREET	25 FEET

LINE TABLE		
LINE	LENGTH	BEARING
L1	25.04	S02°11'55"W
L2	12.68	N84°27'26"W
L3	24.51	N82°12'17"W
L4	35.36	S52°47'43"W

SITE DATA:

TRACT #	TOTAL AREA	AREA INSIDE ROAD R/W	AREA OUTSIDE ROAD R/W
TRACT 1	129,979.33 Sq Ft 2.984 Acres	6,532.51 sq. ft. 0.150 acre	123,446.82 sq. ft. 2.834 acre
TRACT 2	484,647.68 Sq Ft 11.126 Acres	175.67 sq. ft.	484,472.01 sq. ft.

LEGEND:

MBSL - MINIMUM BUILDING SETBACK LINE
EIP - EXISTING IRON PIPE
EIR - EXISTING IRON REBAR
IRS - IRON REBAR SET
FFC - FLAGGED FENCE CORNER
EFS - EXISTING FLAGGED STONE
R/W - RIGHT OF WAY
CP - COMPUTED POINT
TP - TELEPHONE PEDESTAL

1"=200'

GRAPHIC SCALE

Owner/Developer
Jarrid M. Lentz & Jeanie F. Lentz
420 Lentz Rd.
Statesville, N.C. 28625

RECOMBINATION OF EXISTING PARCELS SURVEY FOR
Jarrid M. Lentz & Jeanie F. Lentz

OLIN TOWNSHIP | IREDELL COUNTY | NORTH CAROLINA

PIN NO: 4749-91-1285 & 4749-80-8950
DEED REF.: 1624-572 & 2070-1101
SCALE: 1"=100'
DRAWN BY: SMS
DATE OF SURVEY: 01-29-15
DRAWING NO: 615007-RSUB
DATE OF PLAT: 01-31-15

SURVEYOR

NORTH CAROLINA PROFESSIONAL SEAL L-1563 LAND SURVEYOR GERALD V. GRANT

GVG & A
GERALD V. GRANT & ASSOCIATES



CALCULATIONS

Location 463 Lentz Rd

Project Number #01-3005

Lot No: Tract 2

No. of Bedrooms 3

Design Flow 360 $^{gal}/_{day}$

LTAR 0.300 $^{gal}/_{ft^2\,day}$

PPBPS? (YES OR NO) NO

Supply Line Length 15 ft.

Supply Line Volume 9.795 gal.

Required Feet of Line 300 ft.
Amount of Line from Layout 300 ft.

Gallons per Minute N/A $^{gal}/_{min}$

Required Septic Tank Capacity 1000 gal.
Septic Tank Size 1000 gal.

Panel Volume N/A gal.
# of Panels N/A
Dosing Volume N/A gal.

Tank Draw Down N/A

Pump Run Time

Elevation Head N/A ft.
Pressure Head N/A ft.
Friction Factor N/A ft./100 ft. *(From the interpolater.)*
Friction Head N/A ft.

Total Dynamic Head (+15%) N/A ft.

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

GPM	*f*
20	0.84
	-0.88
25	1.27
	-1.28
30	1.78
	-1.76
35	2.37
	-2.25
40	3.03
43.07	3.48
45	3.77
48.14	4.28
50	4.58
57.11	5.89
60	6.42

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Soils ok JH

Sheet 1 of 2
PROPERTY ID #: 4749809
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Jarrid Lentz
ADDRESS: 459 Lentz Rd, Statesville, NC 28625 APPLICATION DATE: March 2015
PROPOSED FACILITY: 3 BR PROPOSED DESIGN FLOW (.1949): 360 gpd DATE EVALUATED: 4/6/15
LOCATION OF SITE: 463 Lentz Rd, Statesville NC 28625 PROPERTY SIZE: 11.126 AC
WATER SUPPLY: ☐ Private ☒ Public ☐ Well ☐ Spring ☐ Other PROPERTY RECORDED:
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	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
P 1	✓ 4/10%	0 - 8	RBc l wfsbk	FrSSSPSExP		55	—	—	PS 0.3
		8 - 33	Rc mmsbk/Abk	" " " "					
		33 - 45	Rc wmsbk	" " " "					
		45 - 55	Rc l wfsbk	" " " "	-fsap				
P 2	✓ 4/10%	0 - 3	B l sr	FrSSSPSExP		52	—	—	PS 0.3
		3 - 7	RBc l wfsbk	" " " "					
		7 - 35	Rc wfsbk/Abk	" " " "					
		35 - 52	RBc l wfsbk	" " " "	-fsap				
P 3	✓ 4/10%	0 - 10	B sl sr	FrSSSPSExP		60	—	—	PS 0.3
		10 - 16	BRc l wmsbk	" " " "					
		16 - 46	RBc mmsbk	" " " "					
		60	Rc l-c wmsbk	" " " "	-fsap				
P 4	✓ 4/12%	0 - 3	B l sr	FrSSSPSExP		53	PS	—	PS 0.3
		3 - 8	RBc l wfsbk	" " " "					
		8 - 40	Rc mfsbk	" " " "					
		40 - 53	Rc l wmsbk	" " " "	-fsap				
		53 - 66	var l mass	" " " "					

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

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: S. Ashley Rollans
OTHER(S) PRESENT:

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

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

Sheet 2 of 2

PROPERTY ID #: 9749809849
DATE OF EVALUATION: 4/6/15
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
P5	Side of Pit toward Drainfield 4/12%	0-6	B l sr	FrSSSPSExP	-f- Rock incl, <50% -c, WR incl.	Avg ~30"		24-36" on step side	PS on one side of Pit Avoided with Layout
		6-9	BRc l wkmsbk	" " " "					
		9-30	Rc wmsbk/Abk	" " " "					
		30-48	RCL wmsbk	" " " "					
		other side of Pit is shallow	to Rock/ UN	"					

COMMENTS: _____

dated February 2014

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAGE 1: *APPLICATION FORM*

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: ( ) 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:

Applicant Name: Jarrid m Lentz Address: 459 Lentz RD Statesville Phone: 704-902-4602

Owner Name: Jarrid m Lentz Address: Same Phone: Same

Property Information:

Street Address: Property behind 459 Lentz RD

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

Driving Directions: I-77 N - Exit 59 Tomlin Mill RD - Turn Left - 1st RD on Left Lentz RD

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

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 3
Maximum Number of Occupants: _____
( ) Swimming Pool
( ) Other Addition/Structure: _____

(X) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Non-Residential Site Development:
Type of Business: _____
Square Footage of Building: _____
Maximum Number of Employee: _____
Maximum Number of Seats/Beds/Other: _____

Water Supply:

( ) 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: _____

( ) No Preference ( ) Alternative (X) 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: _____ 3-25-15
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

AUTHORIZATION TO ACT AS AGENT FOR OWNER

Any application/document/permit requiring a signature must be signed by the property owner or their authorized agent. This form shall be provided by the owner to allow specified individuals to act as agents for the owner. This form allows the specified individuals to sign or receive any application/document/permit on behalf of the owner. This form allows the authorized agent to make decisions on behalf of the owner pertaining to modifications of permits in the field. It is the responsibility of the owner to assure that any/all permit conditions specified on permits issued by this Division are followed.

I, Jarrid M Leutz, am the legal owner of the property located at 463 Leutz RD, identified as PIN(Parcel Identification Number) 4749809849, located in Iredell County, North Carolina.

I do hereby authorize (print authorized agent/company name) Ashley Rollins, _____, _____, _____, _____, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

1. Improvement Permit (IP)/ Authorization to Construct (AC).
2. Application for soil-site evaluation (new/repair).
3. Application/permit for water well/well abandonment.
4. Application for existing system.
5. Application for Improvement Permit (IP)/ Authorization to Construct (AC).

I agree to abide by any and all decisions and/or conditions between the agent acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division. This form must be fully executed before the individual's specified above will be recognized as the authorized agent.

_____ 4-13-15
Signature of Owner Date

_____ _____
Signature of Witness Date

Please return this signed form to the appropriate office:

Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115
or
Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

IREDELL COUNTY HEALTH DEPARTMENT

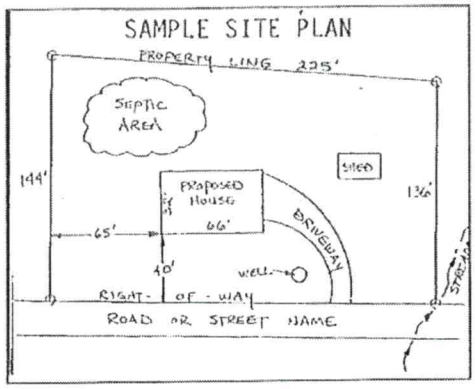
ENVIRONMENTAL HEALTH DIVISION

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

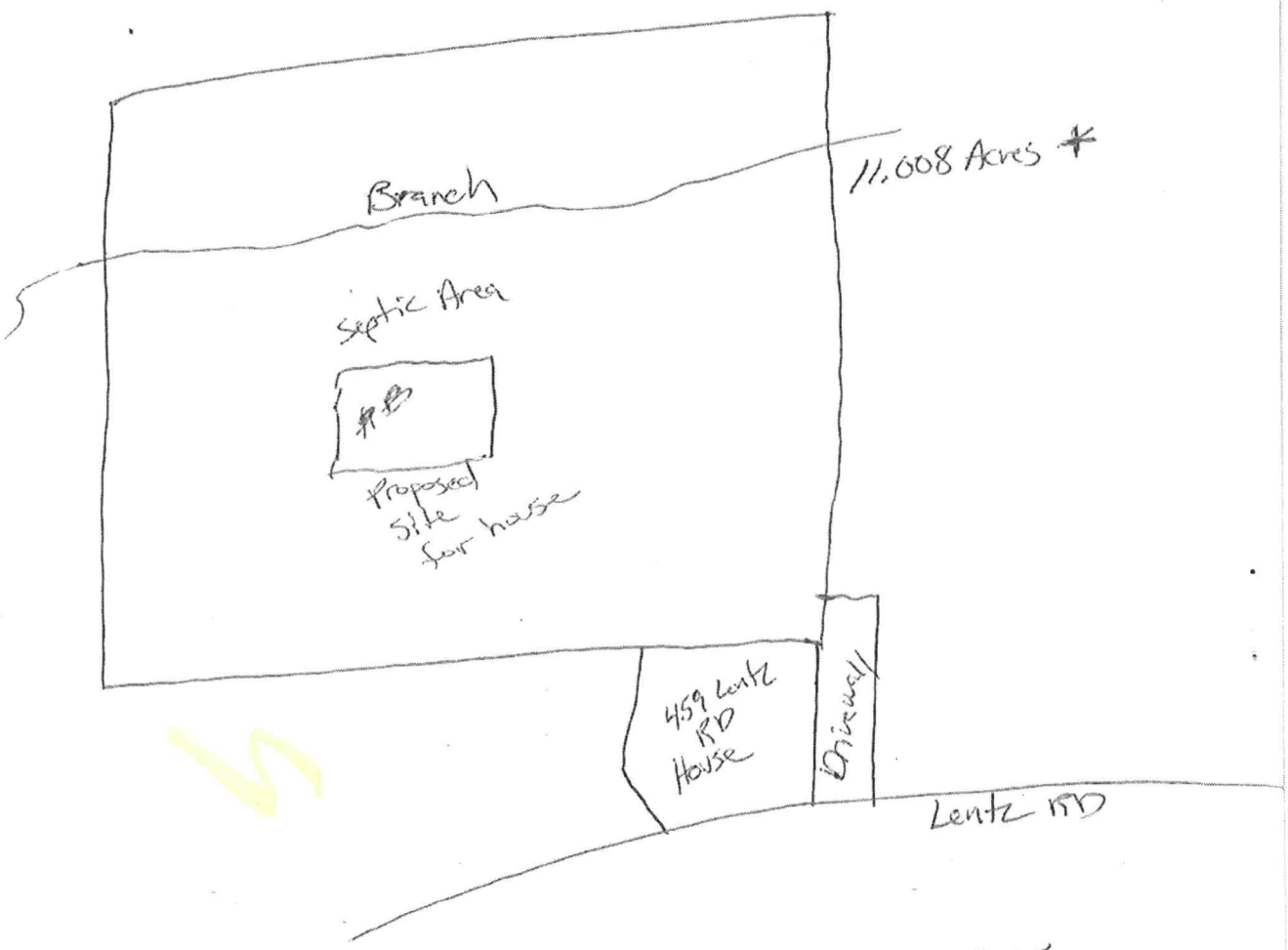


Circle N/A on the following if appropriate:

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: Jami m Jones
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

3-25-15
DATE

IREDELL COUNTY

PO Box 788
349 North Center St.
Statesville, NC 28677

APPLICATION NUMBER
209338
Issue Date: 03/27/2015

FILE COPY

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4749809849.000	463 LENTZ ROAD, STATESVILLE, NC 28625	STATESVILLE

Owner Information	Applicant Information
Owner: LENTZ JARRID M+JEANIE F	Applicant: LENTZ JARRID M+JEANIE
Address: 459 LENTZ RD STATESVILLE, NC 28625	Address: 459 LENTZ RD STATESVILLE, NC 28625
Phone:	Phone:

Use Requested	Zone Code
SFD	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
	35.00	35.00	15.00	15.00	NOT	X

Remarks:

PAID
#2926
3-27-15

The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

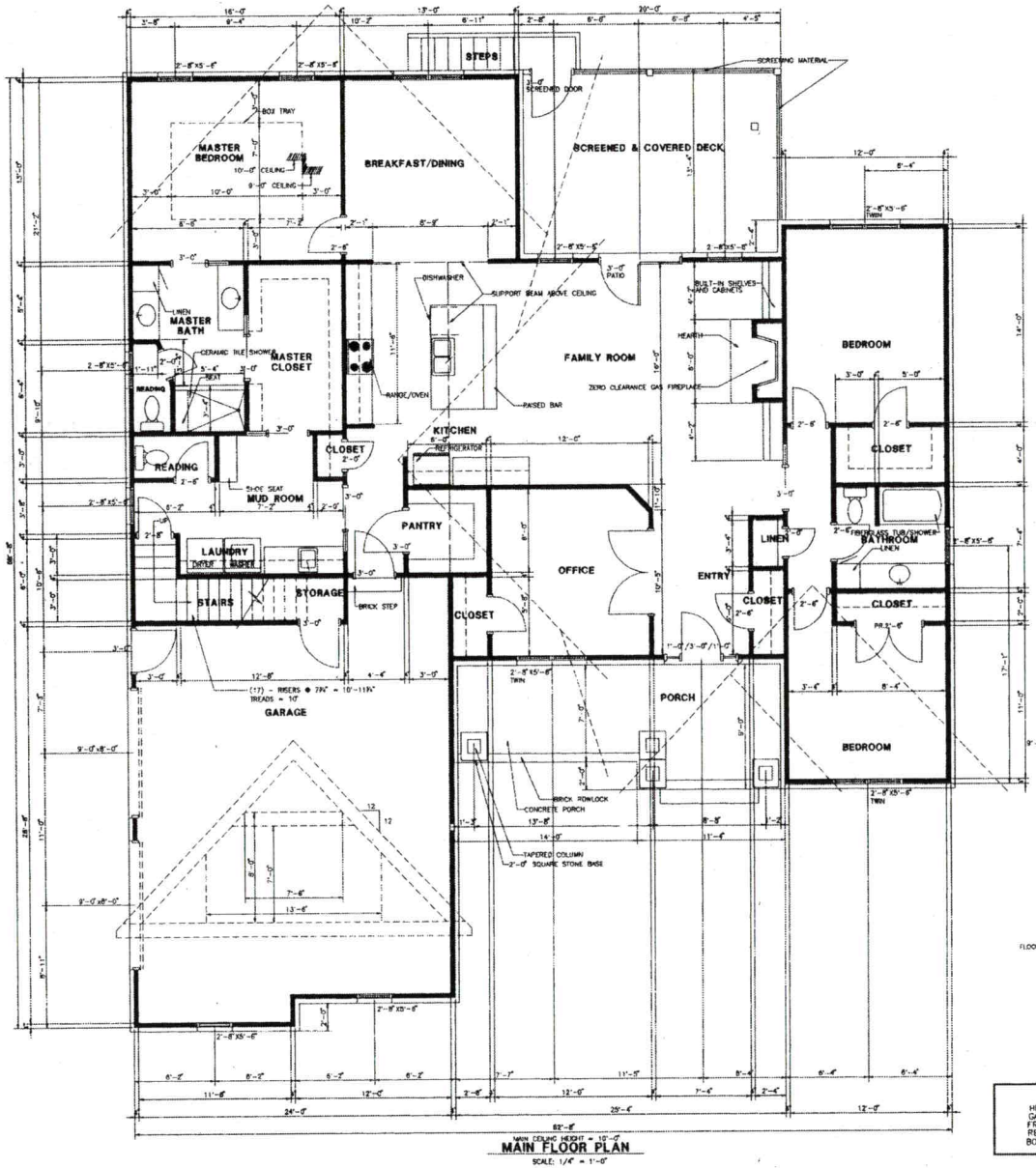
Applicant: See Attached Date: _____

Permit Number	34535	TOTAL FEES:	$ 77.25

Acknowledgement Of Plans Submittal ONLY!

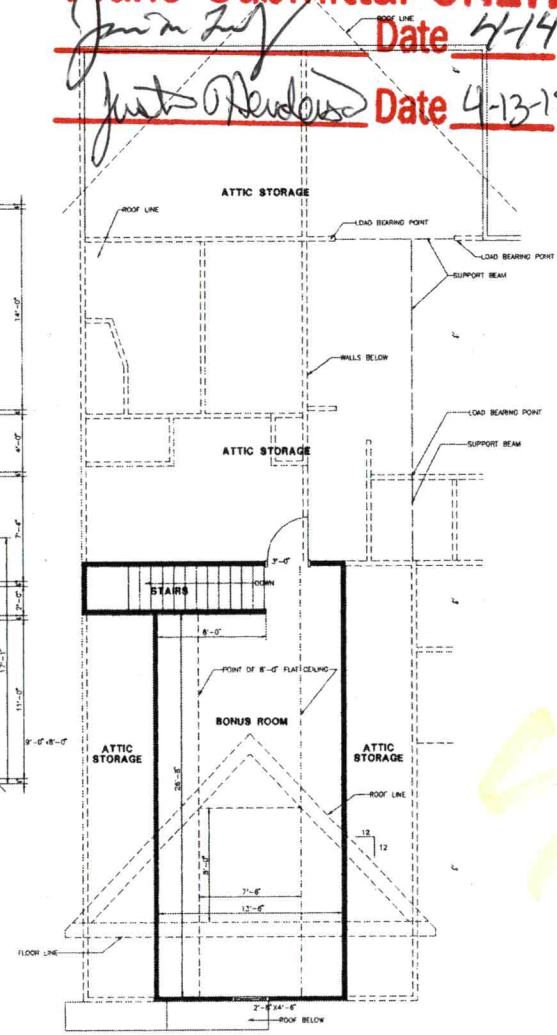
Date 4-14-15

Date 4-13-15



MAIN FLOOR PLAN

SCALE: 1/4" = 1'-0"



BONUS ROOM FLOOR PLAN

SCALE: 1/4" = 1'-0"

AREAS IN SQ. FEET

HEATED FLOOR AREA:	2219 SQ. FT.
GARAGE FLOOR AREA:	745 SQ. FT.
FRONT PORCH AREA:	201 SQ. FT.
REAR DECK AREA:	268 SQ. FT.
BONUS ROOM AREA:	381 SQ. FT.

NANTZ DRAFTING & DESIGN
DRAFTING SERVICES & RESIDENTIAL DESIGN
147 NANTZ WOODS LANE
TROUTMAN, N. C. 28166
TELE. 704-528-6043

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NO.	DATE	DESCRIPTION	BY
		REVISIONS	

A NEW HOME FOR
JARRID and JEANIE LENTZ & FAMILY
LOT 7 SUTTON ROAD
STATESVILLE, NORTH CAROLINA

MAIN FLOOR PLAN
BONUS ROOM FLOOR PLAN

DRAWN: NANTZ
DATE: 7-17-14
SCALE: 1/4" = 1'-0"

SHEET NO. 2