SB

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625

PERMIT # OSWP-2023-22888

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

PIN # 4751 -- 22 -- 3393

APPLICANT/OWNER: JAMES TRENT PATTERSON | APPLICANT ADDRESS: 438 OSTWALT AMITY ROAD, TROUTMAN, N.C. 28166

SITE ADDRESS: 438 OSTWALT AMITY ROAD, TROUTMAN, N.C. 28166 | PHONE: 704-528-4069 | ALT. PHONE 704-437-3060

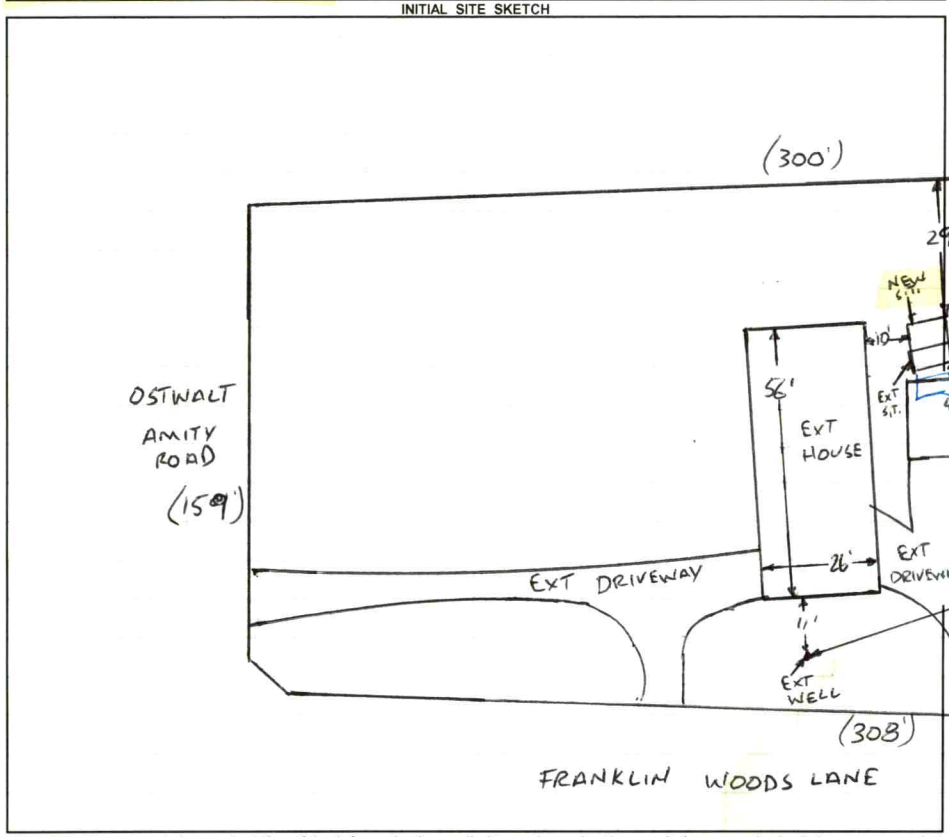
SITE DIRECTIONS: (S) ON 21, (L) ON OSTWALT AMITY, LOT ON (R) | SAP CONTROLLED: ☐ YES ☐ NO EXT

SUBDIVISION: — 4/14/24 | SECTION: — | LOT # — | LOT AREA: 1.553 AC | DESIGN FLOW: EXT | L.T.A.R.: EXT

Septic Tank	1000	(gal)	STB 1012	Date 7-22-24	☐ New System	☑ Repair	☐ Expansion	System Type: I (II) III IV V VI	☑ Residence	No. Bedrooms	EXT	Water Supply
Pump Tank	—	(gal)	PT —	Date —	System Description:	EXT- CONVENTIONAL			☐ Business	No. Persons	EXT	☑ Private EXT
Pump Make	—	Model	—	Serial # —	Repair System Description:	TANK REPLACEMENT			☐ Other	No. Employees	—	☐ Public
# Nitrification Fields	EXT	# Lines	EXT	Linear Ft EXT	Maintenance Agreement Required:	☐ YES	☑ NO		☐ Slab	☐ Crawl Space		☐ Community
Trench Width	EXT	Trench Bottom Depth(Low side)	EXT	Gravel Depth EXT	☑ GRAVITY	☐ PRESSURE			☑ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: PUMP, CRUSH, AND FILL EXISTING SEPTIC TANK, DRAINFIELD APPEARED TO BE FUNCTIONING AT TIME OF INSPECTION, DO NOT EXCEED 36IN of COVER ON NEW SEPTIC TANK, MAINTAIN 50FT FROM ALL WELLS

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 IN = 40 FT
S.T. = SEPTIC TANK
EXT = EXISTING

D-BOX - SW 7/1/24

tank shown in blue, carport moved.

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: Jason Yountz

IMPROVEMENT PERMIT by: Burnet C. White | Date: 5-22-2023 | OPERATION PERMIT by: D. Nieberg | Date: 7/3/24

AUTHORIZATION TO CONSTRUCT by: Burnet C. White | Date: 5-22-2023 | 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? _____	

PERMIT SNAPSHOT REPORT OSWP-2023-22888 FOR IREDELL COUNTY

Permit Type: Environmental Health OSWP
Work Class: EH Septic Improvement Permit Repair
Status: PRIORITY PERMIT
Valuation: $0.00
Description: Cracked tank

Project:
District: Iredell County
Square Feet: 0.00
Assigned To: White, Bryant

App Date: 04/21/2023
Exp Date: NOT AVAILABLE
Completed: NOT COMPLETED
Approval Expire Date:

Parcel: 4751223393.000 Main
Address: 438 Ostwalt Amity Rd Troutman, NC 28166 Main
Zone: RA(Residential Agricultural District)

Applicant/Authorized Agent
JAMES T PATTERSON
438 Ostwalt Amity Road
Troutman, NC 28166
Mobile: (704) 437-3060

Property Owner
JAMES "Trent" PATTERSON
Home: (704) 437-3060
Business: (704) 437-3060
Mobile: (704) 437-3060

Project Contact
Trent Patterson
Home: (704) 528-4069
Business: (704) 437-3060
Mobile: (704) 437-3060

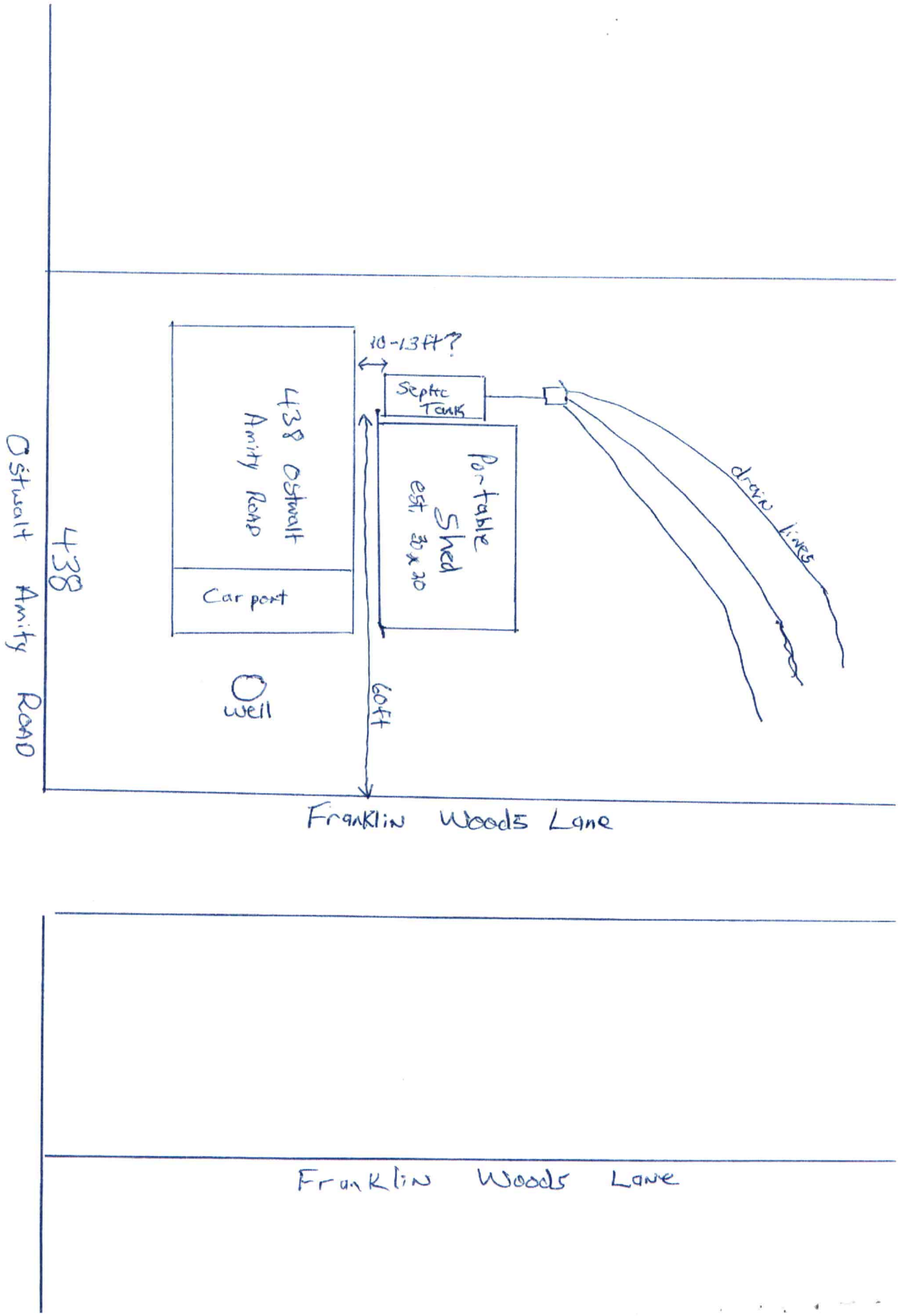
Permit Custom Fields

How is your site plan being submitted	Custom Site Plan	Does the site contain any jurisdictional wetlands	No	Non-domestic Sewage Generated	No
Other Public Agency	No	What are the proposed structures	New Single Family Residence	Maximum Number of Bedrooms	3
Number of Occupants	5	Foundation Type	Basement with Plumbing	Water Supply	Existing Well
Desired Septic System Type	Conventional (most common)	If other septic system type, please explain		Additional Unique Setbacks Apply	No

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_JAMES_PATTERSON_4/21/2023.jpg	04/21/2023 13:39	PATTERSON, JAMES		Uploaded via CSS
BHWC Parsonage Septic both files_v1.PDF	04/21/2023 16:10	Nebel, Barbara	Available Online	Site Plan
Xerox Scan_04212023132806_v1.PDF	04/21/2023 16:10	Nebel, Barbara	Available Online	Authorize to Act as Agent

Invoice No.	Fee	Fee Amount	Amount Paid
NOT INVOICED	Existing System Septic Repair Permit	$150.00	$0.00
	Total for Invoice NOT INVOICED	$150.00	$0.00
	Grand Total for Permit	**$150.00**	**$0.00**

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		04/21/2023 16:10	04/21/2023 16:10
Confirm application complete v.1	Generic Action		04/21/2023 16:10
~~Zoning Review v.1~~			04/21/2023 16:10
~~Floodplain Admin Overview v.1~~	Task		04/21/2023 16:10
~~Iredell County Zoning Approval v.1~~	Task		04/21/2023 16:10
~~Issue Invoice v.1~~	Generic Action		04/21/2023 16:10
~~Fees Paid v.1~~	Generic Action		04/21/2023 16:10
Assign v.1			
Case Assigned v.1	Generic Action		
Lot Readiness Verification v.1			
OSWP Septic Preliminary Site Visit v.1	Inspection		
OSWP Site Evaluation v.1	Inspection		
Permit Ready v.1			
Issue Permit v.1			
Issue Invoice v.1	Generic Action		


10-13ft?
Septic Tank
438 Ostwalt Amity Road
Portable Shed est. 30 x 20
drain lines
Car port
Well
60ft
438 Ostwalt Amity Road
Franklin Woods Lane
Franklin Woods Lane

Public Health
Prevent Promote Protect
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
Prevent Promote Protect
Iredell County Health Department

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*) James Trent Patterson
Pastor - Beulah Heights Wesleyan Church

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, _____, am the legal owner(s) of the property located at _____, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**)

_____, _____, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

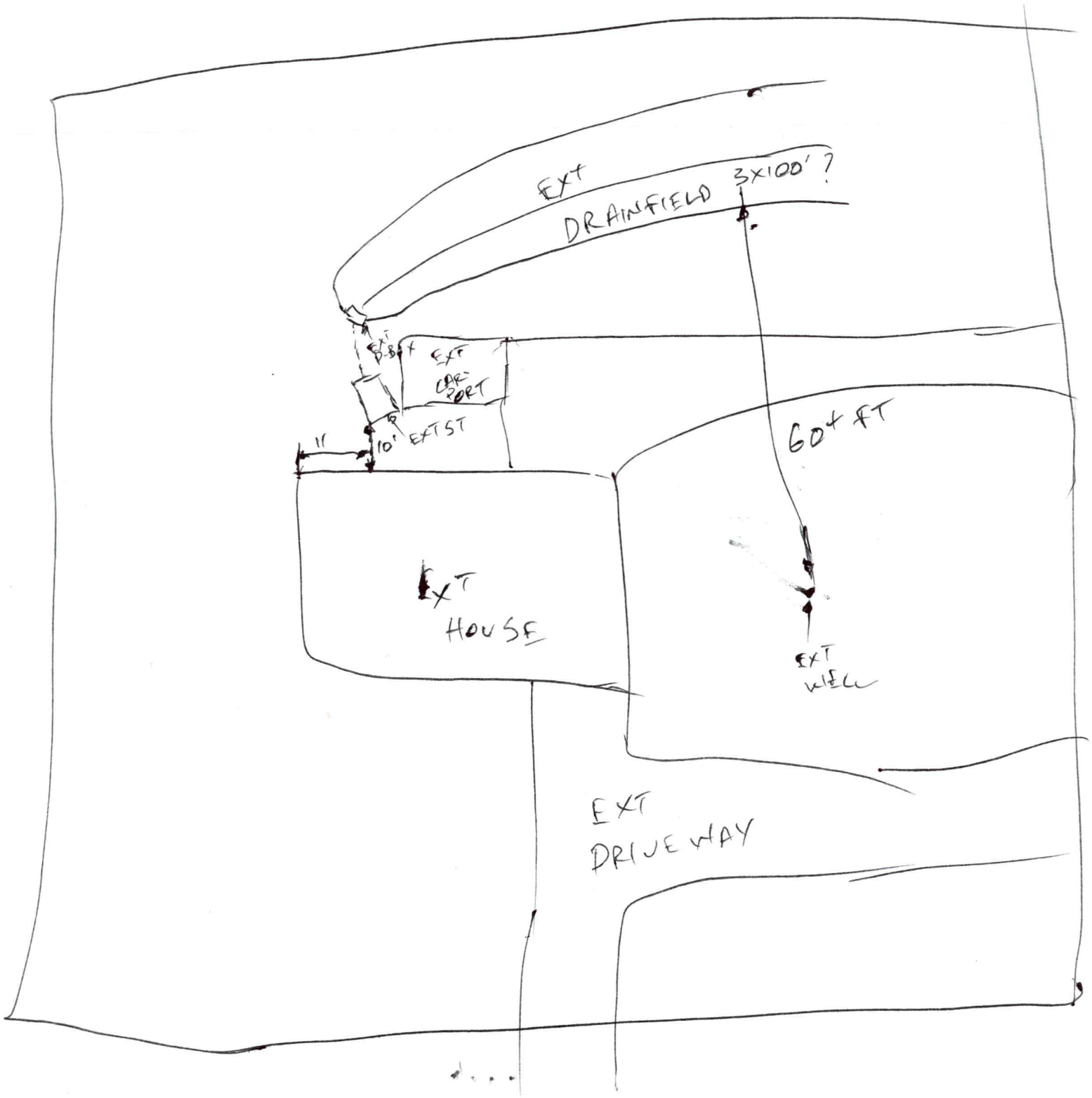
- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

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.

_____ _____
Signature of Owner(s) Date

Mooresville - Environmental Health
barbara.nebel@co.iredell.nc.us
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


EXT
DRAINFIELD 3X100'?
EXT
CARPORT
10'
EXT ST
11'
60+ FT
EXT
HOUSE
EXT
WELL
EXT
DRIVEWAY