ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 x3456 | Mooresville Office (704) 660-3625

BLDR - 2024 - 54642

PERMIT : OSWP 2024-52770

PIN # 4765 -- 47 -- 5546

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

APPLICANT/OWNER: Doug Folding | APPLICANT ADDRESS: 1270 Northside Dr, Statesville

SITE ADDRESS: 271 River Hill Rd, Statesville 28625 | PHONE: 704-995-9987 | ALT. PHONE -

SITE DIRECTIONS: 64 E - River Hill

SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: - | SECTION: - | LOT # - | LOT AREA: 4.72 | DESIGN FLOW: 480 gpd | L.T.A.R.(Initial): 0.25 | L.T.A.R (Repair): 0.25

Septic Tank 1000 (gal) | STB 760 | Date 7/1/24

Pump Tank (gal) | PT | Date

Pump Make | Model | Serial #

Nitrification Fields 1 | # Lines 4 | Linear Ft 360'

Trench Width 36in | *Max. Trench Depth(Initial) 32in | *Max. Trench Depth(Repair) 32in | Gravel Depth -

* Measured on the downhill side of the trench

☒ New System ☐ Repair ☐ Expansion | System Type: I II (III) IV V VI

System Description: 25% reduction

Repair System Description: 25% reduction

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

Effluent Standard: ☒ DSE ☐ HSE ☐ TS-I ☐ TS-II ☐ RCW ☐ NSF/ANSI 40

Usable Depth to LC (Initial): 48 in | Usable Depth to LC (Repair): 48 in

☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

No. Bedrooms 4 | No. Persons 8 | No. Employees | ☒ Crawl Space

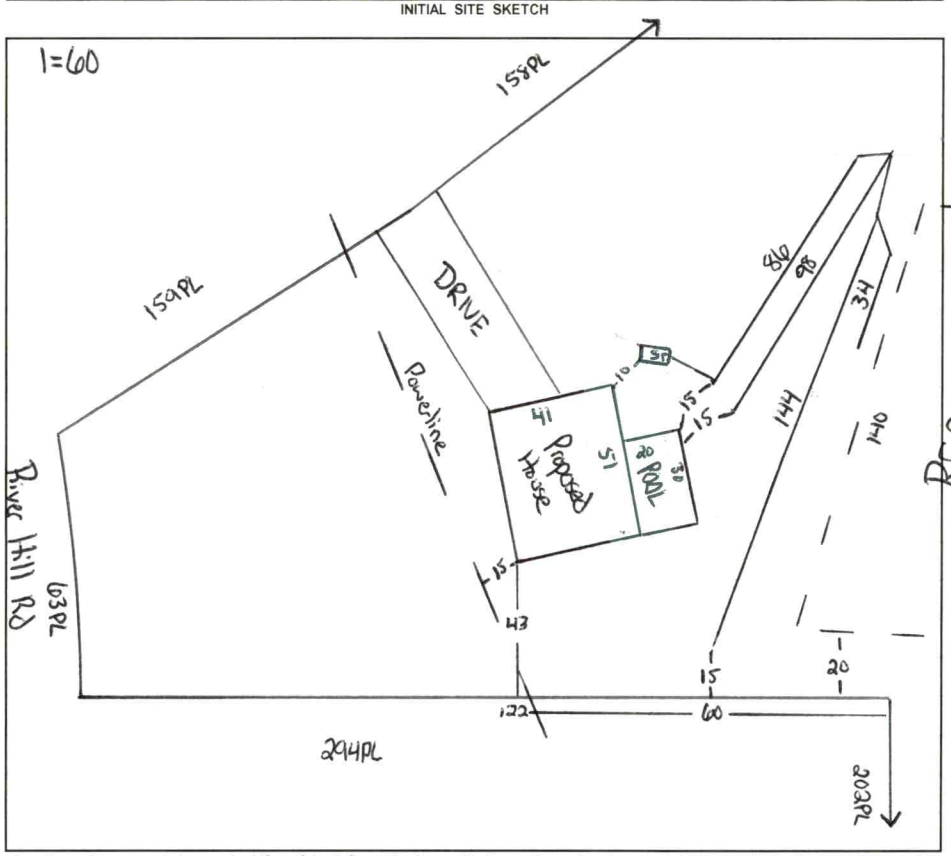
☐ Basement w/o plumbing

Water Supply: ☐ Private ☒ Public ☐ Community

Limiting Condition

Comments / Conditions: Install on contour with the land. Do not drive, park, or grade septic area.

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.

Still flagged @ time of install - as shown @ left.

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.*

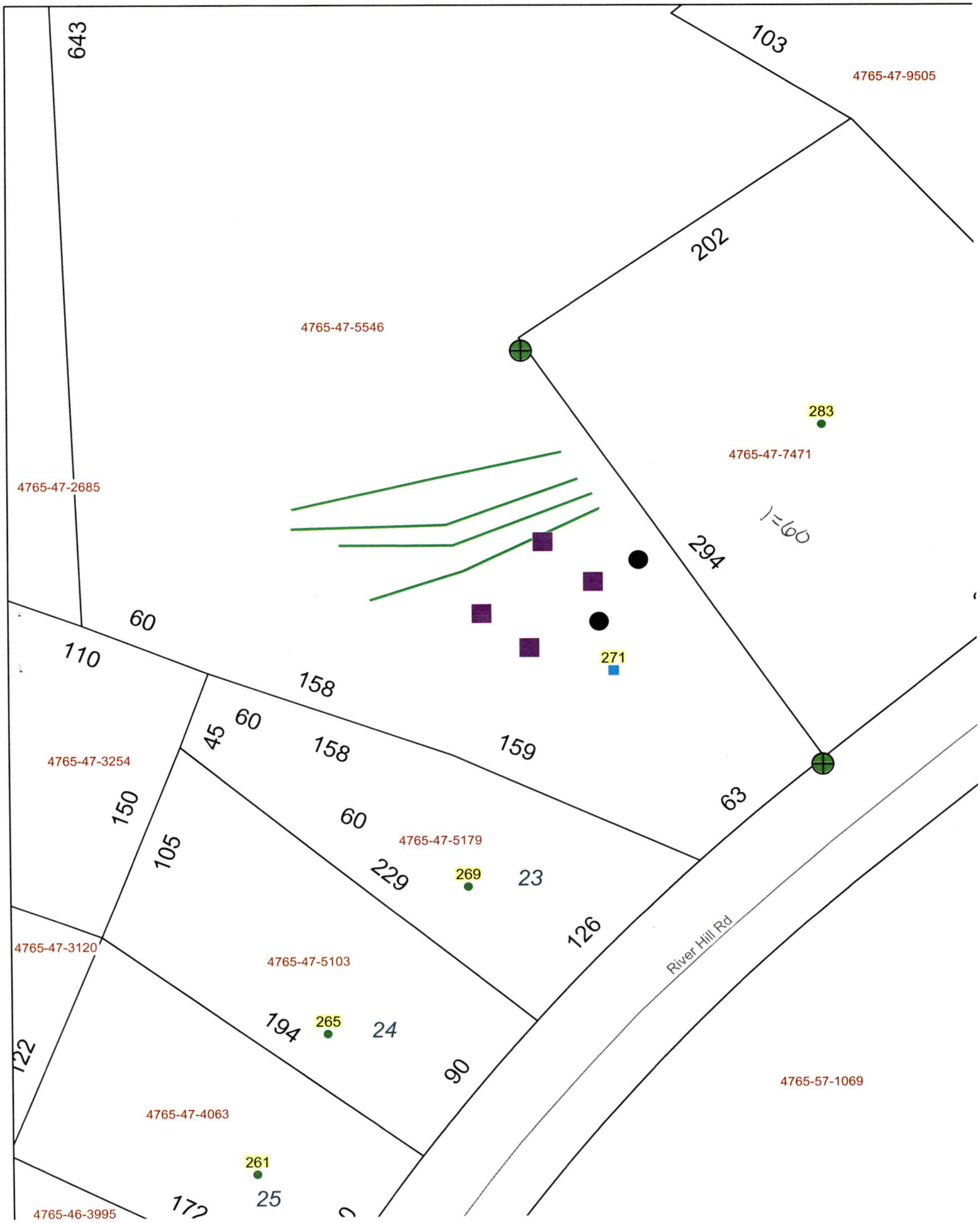
Owner / Applicant Signature: Online Signature | Date: | Installed by: Jake Williams

IMPROVEMENT PERMIT by: Cory Hill ✓ | Date: 5/21/24 | OPERATION PERMIT by: D. Meberg ✓ | Date: 9-5-24

AUTHORIZATION TO CONSTRUCT by: Cory Hill ✓ | Date: 5/21/24 | Existing System Inspected by: | Date:

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? _____	


643
103
4765-47-9505
202
4765-47-5546
283
4765-47-7471
4765-47-2685
294
60
110
158
271
45
60
158
159
4765-47-3254
63
150
60
4765-47-5179
105
229
269
23
126
River Hill Rd
4765-47-3120
4765-47-5103
194
265
24
90
4765-57-1069
122
4765-47-4063
261
25
4765-46-3995