ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT : OSWP 2025-71094

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

PIN # 4776 -- 15 -- 5351

APPLICANT/OWNER: Yatenia White | APPLICANT ADDRESS: 110 Luangthep Ln, Statesville 28625

SITE ADDRESS: 110 Luangthep Ln, Statesville 28625 | PHONE: 336-999-1002 | ALT. PHONE -

SITE DIRECTIONS: 64 E - River Hill - Luangthep | SAP CONTROLLED: ☐ YES ☐ NO

SUBDIVISION: Clover Downs | SECTION: - | LOT # 6 | LOT AREA: 0.943 | DESIGN FLOW: 480 gpd | L.T.A.R.(Initial): Ex | L.T.A.R (Repair): Ex

Septic Tank	1000 (gal)	STB 760	Date	☐ New System	☒ Repair	☐ Expansion	System Type: I (II) III IV V VI
Pump Tank	(gal)	PT	Date	System Description:	EXISTING		
Pump Make	Model		Serial #	Repair System Description:	* Tank Replacement *		
# Nitrification Fields	Ex	# Lines	Ex	Linear Ft	Ex	Maintenance Agreement Required:	☐ YES ☒ NO
Trench Width	Ex	*Max. Trench Depth(Initial)	Ex	*Max. Trench Depth(Repair)	Ex	Gravel Depth	Ex
* Measured on the downhill side of the trench	Effluent Standard: ☒ DSE ☐ HSE ☐ TS-I ☐ TS-II ☐ RCW ☐ NSF/ANSI 40			Usable Depth to LC (Initial):	Ex	☒ GRAVITY	☐ PRESSURE

☒ Residence	No. Bedrooms	4	Water Supply
☐ Business	No. Persons	8	☐ Private
☐ Other	No. Employees		☒ Public
☐ Slab	☒ Crawl Space		☐ Community
☐ Basement w/plumbing	☐ Basement w/o plumbing		

Usable Depth to LC (Repair): Ex — *Limiting Condition*

Comments / Conditions: Pump, crush, & fill old tank. Replace distribution as needed. Place new tank where proper fall can be achieved, as well as 10ft off house and 5ft off concrete slab.

INITIAL SITE SKETCH

See attached Plan by ICHD

AS BUILT SKETCH

Installed as drawn

+ Replaced 2 D-Box

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:

IMPROVEMENT PERMIT by: Matt Wilkie Date: 3/5/25

AUTHORIZATION TO CONSTRUCT by: Matt Wilkie Date: 3/5/25

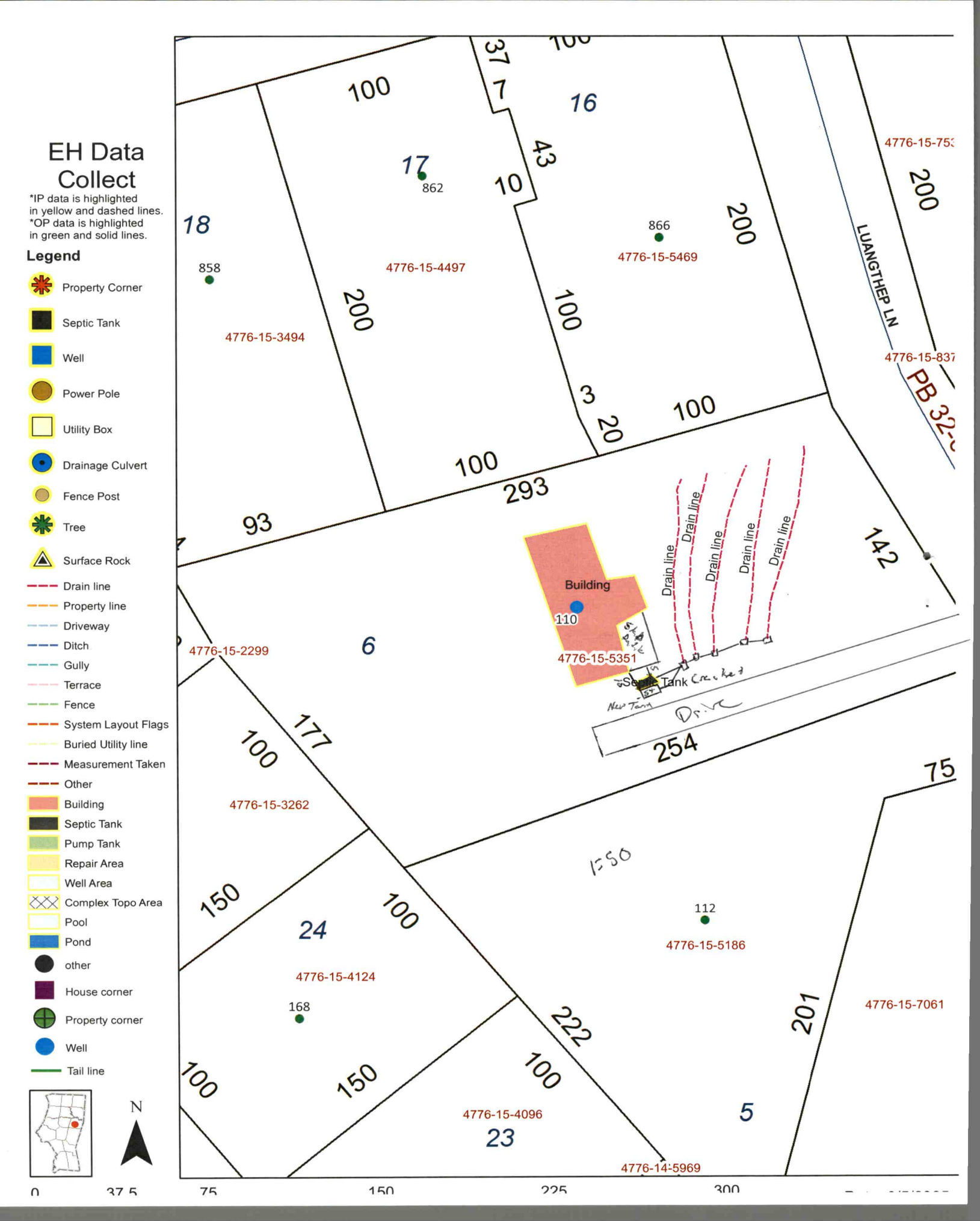
Installed by: Lentz Wastewater

OPERATION PERMIT by: Matt Wilkie Date: 3/05/25

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? _____	


EH Data Collect
*IP data is highlighted in yellow and dashed lines.
*OP data is highlighted in green and solid lines.
Legend
Property Corner
Septic Tank
Well
Power Pole
Utility Box
Drainage Culvert
Fence Post
Tree
Surface Rock
Drain line
Property line
Driveway
Ditch
Gully
Terrace
Fence
System Layout Flags
Buried Utility line
Measurement Taken
Other
Building
Septic Tank
Pump Tank
Repair Area
Well Area
Complex Topo Area
Pool
Pond
other
House corner
Property corner
Well
Tail line
N
0
37.5
75
150
225
300
LUANGTHEP LN
4776-15-753
4776-15-837
PB 32-
4776-15-4497
4776-15-3494
4776-15-5469
4776-15-2299
4776-15-5351
4776-15-3262
4776-15-5186
4776-15-4124
4776-15-4096
4776-15-7061
4776-14-5969
Building
Drain line
Septic Tank
Drive
858
862
866
110
112
168
16
17
18
6
24
23
5
100
200
293
93
142
177
254
75
150
222
201
43
37
10
3
20
1:50

PERMIT SNAPSHOT REPORT OSWP-2025-71094 FOR IREDELL COUNTY

Permit Type	Environmental Health OSWP	**Project:**		**App Date:**	03/03/2025
Work Class:	EH Septic Permit	**District:**	Iredell County	**Exp Date:**	NOT AVAILABLE
Status:	PRIORITY PERMIT	**Square Feet:**	0.00	**Completed:**	NOT COMPLETED
Valuation:	$0.00	**Assigned To:**	Wilkinson, Matthew	**Approval Expire Date:**	

Description: septic repair. i was in process of getting name change while purchasing home and the deed is currently in my marriage name "Thomas".

Parcel: 4776155351.000 Main	**Address:** 110 Luangthep Ln Statesville, NC 28625 Main	**Zone:** RA(Residential Agricultural District)

Property Owner	Applicant/Authorized Agent
yateria white	yateria white
110 luangthep ln	110 luangthep ln
statesville, NC 28625	statesville, NC 28625
Mobile: (336) 999-1002	Mobile: (336) 999-1002

Permit Custom Fields

How is your site plan being submitted	Custom Site Plan	Septic Application/Permit Type	Repair	Does the site contain any jurisdictional wetlands	No
Non-domestic Sewage Generated	No	Other Public Agency	No	All proposed structure dimensions	n/a
Maximum Number of Bedrooms	4	If other Addition/Structure, please explain		Number of Occupants	4
Foundation Type	Crawl Space Foundation	Water Supply	Other Public Water	Desired Septic System Type	No Preference
If other septic system type, please explain		Pump Make		# of Nitrification Fields	
Model		Serial #		System Description	
Repair System Description		Comments/Conditions		Additional Unique Setbacks Apply	No

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_yateria_white_3/3/2025.jpg	03/03/2025 11:59	white, yateria		Uploaded via CSS
71094 site plan.pdf	03/03/2025 12:13	Horton, Amanda	Available Online	
71094 authorization.pdf	03/03/2025 12:13	Horton, Amanda	Available Online	
71094 deed.pdf	03/03/2025 12:13	Horton, Amanda		

Invoice No.	Fee	Fee Amount	Amount Paid
INV-00041760	Existing System Septic Repair Permit	$150.00	$150.00
	Total for Invoice INV-00041760	$150.00	$150.00
	Grand Total for Permit	**$150.00**	**$150.00**

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		03/03/2025 12:15	03/03/2025 12:15
Confirm application complete v.1	Generic Action		03/03/2025 12:15
Lot Readiness Verification v.1			
~~OSWP Septic Preliminary Site Visit v.1~~	Inspection		03/03/2025 12:15
OSWP Site Evaluation v.1	Inspection		
~~**Zoning Review v.1**~~			03/03/2025 12:15
~~Floodplain Admin Overview v.1~~	Task		03/03/2025 12:15
~~Iredell County Zoning Approval v.1~~	Task		03/03/2025 12:15

PERMIT SNAPSHOT REPORT (OSWP-2025-71094)

~~Issue Invoice v.1~~	Generic Action	03/03/2025 12:15
~~Fees Paid v.1~~	Generic Action	03/03/2025 12:15
Fees v.1		
Issue Invoice v.1	Generic Action	
Fees Paid v.1	Generic Action	
Issue Improvement Permit v.1		
Issue Invoice v.1	Generic Action	
Fees Paid v.1	Generic Action	
Issue Permit v.1	Generic Action	
Permit Completion Process v.1		
Authorization to Construct Permit v.1	Create Sub Permit	
Issue Authorization to Construct v.1	Generic Action	

IREDELL COUNTY HEALTH DEPARTMENT

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

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 70513 DATE 12-9-97 TAX MAP NO. 4776156175 PT Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR Khampheanh Chanthabouryy PHONE: Business Home 878 0586

ADDRESS 479 Old Mocksville Rd Statesville

LOCATION 64E TL Riverhill Rd past Chestnut Grove Rd TR Luangthep Lane Rt

SUBDIVISION BLOCK / SECTION LOT LOT AREA 1 acres SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 9-16-97

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 533

No Lines 5 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: Conv Gravity

Repair System Description: Gravity Chambers

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home No. Bedrooms 4

☑ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

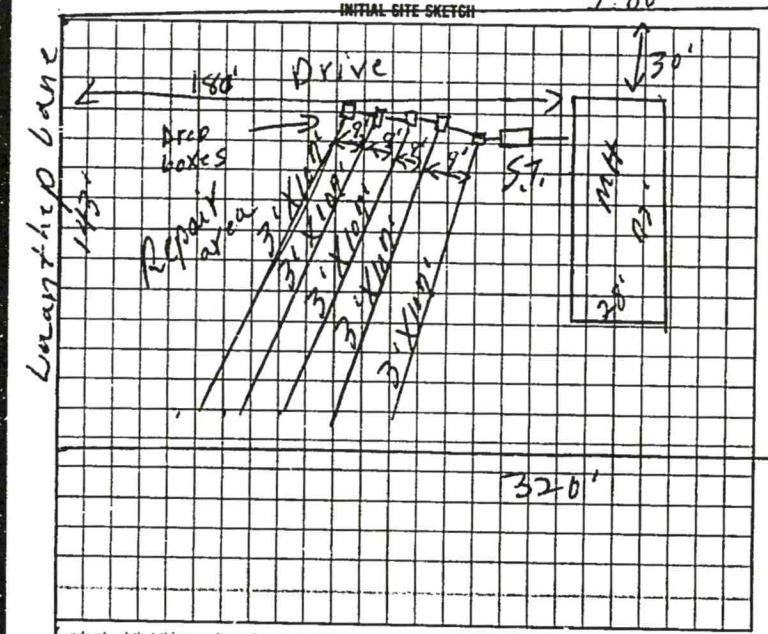
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☐ Public

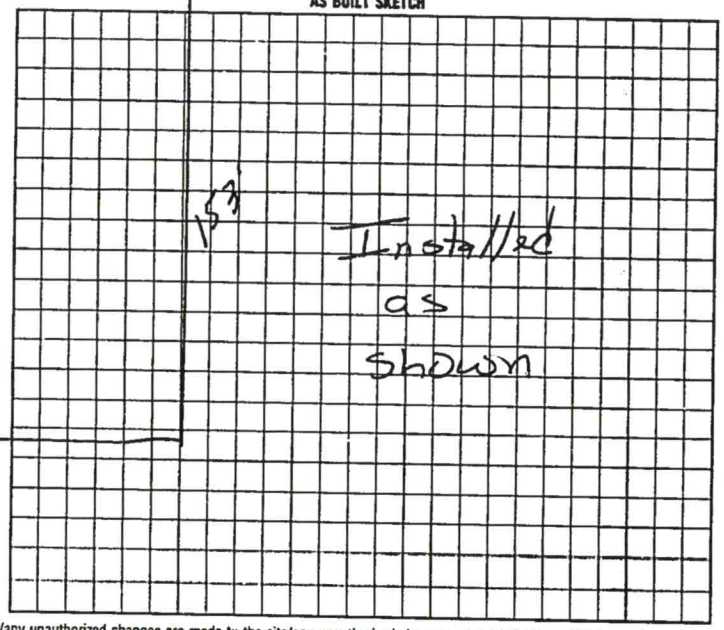
Comments:

Comments:

INITIAL SITE SKETCH



AS BUILT SKETCH



I understand that this 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 is valid for 60 months from date of issuance.

Signed: x Khampheanh Chanthabouryy Installed by: A-1

Improvement Permit by: R. C. Moore date 12-9-97 Certificate of Completion by: date

Authorization to cont. Existing System Inspection by: R. C. Moore date 12-9-97 Operation Permit by Mary C Ott RS date 12-23-97

HEALTH DEPT COPY: WHITE INSPECTION COPY (FINAL): GREEN OWNER COPY (FINAL): YELLOW INSPECTION COPY (INITIAL): PINK OWNER COPY (INITIAL): GOLD

to cont. Authorization to cont. EXPIRED 6 months from issue