

12647 RAMAH CHURCH RD

01120708

12/26/2007

duponbj

Groundwater and Wastewater Services File Imaging Project
May 2007
Barcode Font = IDAutomationHC39M

Proj # 05-96-2957

400 ☑

FEE: 200.00 CHK # 1195

DATE: 9/27/96 FC

AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION

VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

DATE: 9/27/96

PERMIT NO: 1555B

PARCEL NO: 011-131-04 PO

JOB LOCATION ADDRESS: 1647 Ramah Church Road

PROPERTY OWNER: Robert C. Rhein Industries Inc.

BUILDING CONTRACTOR: Souther Construction

SUBDIVISION NAME: North Stone

AUTHORIZATION ISSUED BY: Joe B. Mialik, RS DATE: 9/27/96

DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 1555B, AND THE ATTACHED SITE PLAN WITH SYSTEM DETAILS. CONSTRUCTION AND INSTALLATION MUST ALSO MEET ALL REQUIREMENTS SET FORTH IN THE RULES GOVERNING SANITARY SEWAGE COLLECTION, TREATMENT, AND DISPOSAL AND ANY OTHER APPLICABLE RULES AND LAWS.

2. AN INSTALLATION, CONSTRUCTION, ALTERATION AND/OR REPAIR APPROVAL MUST BE SECURED **PRIOR** TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH MECKLENBURG COUNTY HEALTH DEPARTMENT.

3. ANY ALTERATION IN SITE OR SOIL CONDITIONS (INCLUDING LOCATION OF STRUCTURES AND APPURTENANCES) OR MODIFICATION IN USE, DESIGN WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS AS SPECIFIED IN THE ASSOCIATED IMPROVEMENT PERMIT AND APPLICATION, MAY SUBJECT THIS AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: See conditions of improvement permit & associated plot plan.
*Maintenance facility must be connected to Charlotte-Mecklenburg Utility Dept. sewer line prior to construction of sewer to proposed road in area of sewage disposal system.

OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITIONS OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

Thomas M Kelly 9/27/96

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

CONDITIONS OF IMPROVEMENT PERMIT

Permit Number: 19555B

Tax Number: 011-181-04 PO

12647 Harrah Church Road

- The IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be NO grading, filling or disturbance of the soil in the area of the septic tank system or repair area.
- CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a Building Permit. The Construction Authorization is NOT transferable. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.
- Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

Basement	___ Yes	✓ No	___ Partial Basement

Type Primary Wastewater System Type (circle one): I II (III) IV V VI	✓ Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1

3 Long-term acceptance rate	300 Max gallons/day wastewater flow	1000 Absorption Area (sq ft)	9' Trench spacing (min. on centers)
YES Serviced by private well	1500 Gallon septic tank	333 Total trench length (ft)	29" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
NA Bedrooms in residence 12 employees	1000 Gallon pump tank	12" Depth of stone	

Any surface waters present: No Type: Minimum separation distance:

Site modifications required:

Additional Conditions: ① Plumb building as high as possible.
② Well shall be 100' from sewage disposal system & its designated repair area or the maximum feasible distance; however, no less than 50'.
* ③ Building to be connected to CMUD municipal sewer line prior to construction of proposed road & sewer line construction in septic system repair area.

Repair Area System Type Type (circle one): I II (III) IV V VI	✓ Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1

1000 Absorption Area (Sq ft) 333 Total Trench Length (Ft)	12" Depth of Stone Trench	9' Trench spacing (min. on centers)	29" Maximum Trench Depth

For existing system, enter the year originally installed:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws and Rules For Sewage, Treatment and Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

- No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair Approval is granted by this Department.
- Improvement Valid 5 years from date of issuance
- This Improvement permit is transferable.

Lisa B. Mialik, RS — 9/27/96

DEHNR Authorized Agent — Date

Owner/Agent Signature — Date

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR.
SUITE 211
700 N. TRYON ST.
CHARLOTTE, N.C. 28202.
(704) 336-5102

NORTH CAROLINA DEPARTMENT OF
ENVIRONMENTAL, HEALTH,
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

IWWS-100195

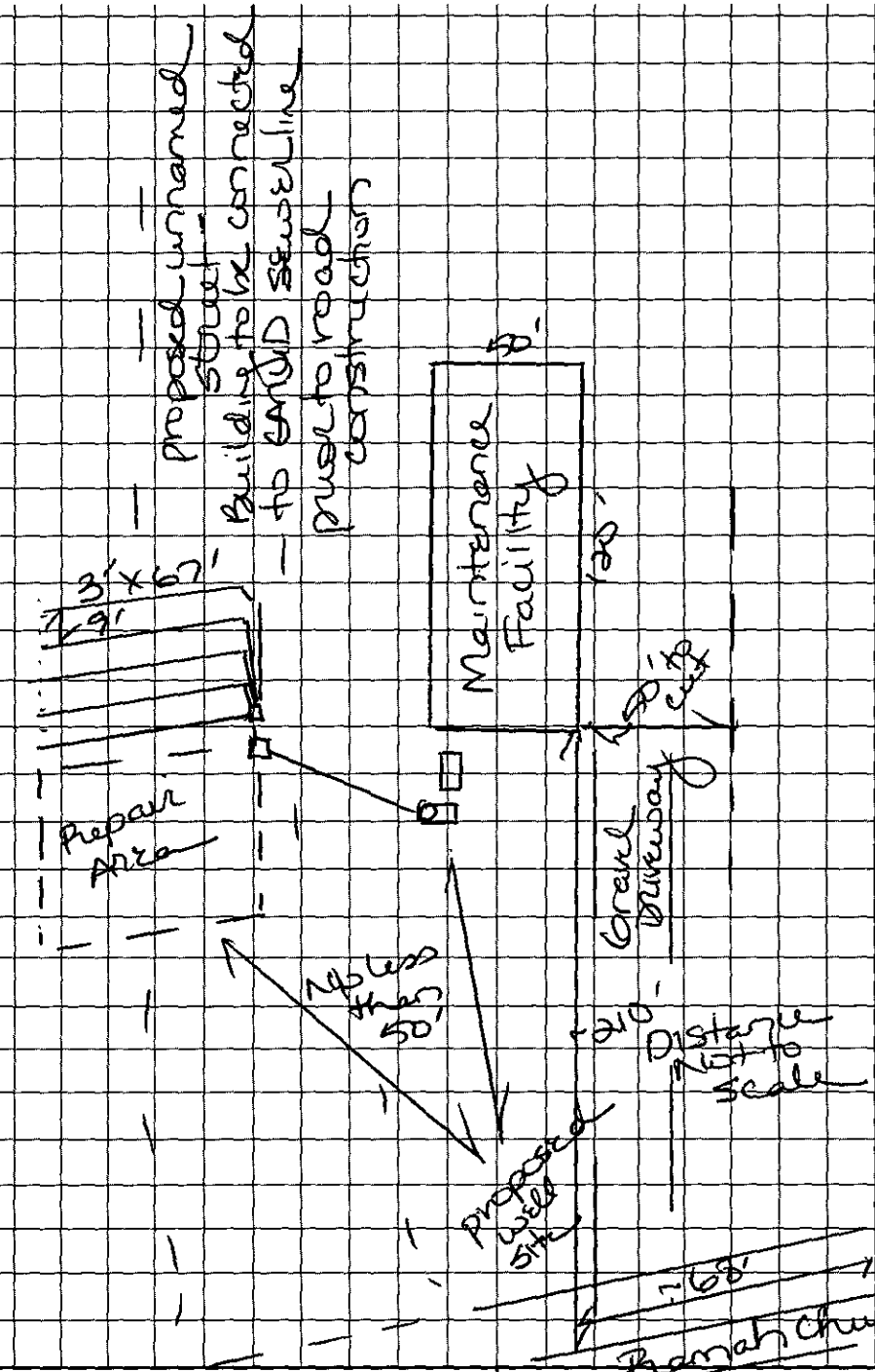
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 15555B

TC: 011-181-04 PO

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Installation for maintenance facility - No floor drains, No industrial process wastewater - Domestic wastewater ONLY

to be located @ 12647 Ramah Church Road.

N/A

Thomas M Kelly Bm
OWNER/AGENT SIGNATURE

DATE 9/27/96

APPROVAL DATE 9/27/96 Joa B. Mialik RS

PB 1082

White - Health Department's Copy | Canary - E.H.S. Copy | Pink - Owner's Copy

PROJ # 052-98297

FEE: 200.00
DATE: 8/26/96
CK. # 12850

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR IMPROVEMENT PERMIT
FOR COMMERCIAL/INDUSTRIAL SITE

[redacted]

[ ] CRT

TYPE APPLICATION: X NEW SYSTEM ___ EXPANSION OF EXISTING SYSTEM ___ REPAIR OF EXISTING SYSTEM

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

FILE #: 1555 B

PROJECT TRACKING #:

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 011-181-04

___ COMMERICAL ___ INDUSTRIAL

STREET ADDRESS: 12647 RAMAH CHURCH ROAD

DESCRIBE TYPE OF BUSINESS:
MAINTENANCE SHOP
Square footage of facility: 6000SF

LOT NUMBER: N/A

NUMBER OF EMPLOYEES: 12 @ 1 Shift
PER SHIFT: 200

TOWNSHIP (CHECK ONE):

___ 0 MECKLENBURG ___ 4 PINEVILLE
___ 1 CHARLOTTE ___ 5 MATTHEWS
___ 2 DAVIDSON ✓ 6 HUNTERSVILLE
___ 3 CORNELIUS ___ 7 MINT HILL

HOW WILL WATER BE USED IN THE FACILITY:

✓ TOLIETS/URINALS
✓ HANDSINK
___ SHOWERS
___ FLOOR DRAINS

OTHER, PLEASE DESCRIBE:

An IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change.

TYPE OF WASTEWATER:
✓ SEWAGE
___ INDUSTRIAL PROCESS WASTE WATER

IF EXPANSION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED ADDITION:

WATER SUPPLY (CHECK ONE):
___ COMMUNITY (C) ___ MUNICIPAL (M) ✓ PRIVATE WELL (P)
___ SHARED WELL (S) ___ OTHER 'SPRINGS' (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES	___ YES ✓ NO	WELL SPRINGS OR WATERLINES	___ YES ✓ NO
EXISTING WASTE WATER SYSTEMS	___ YES ✓ NO	DESIGNATED WETLANDS	___ YES ✓ NO
EASEMENTS OR RIGHT-OF-WAYS	___ YES ✓ NO		

BUILDING PLANS TO INCLUDE ALL PLUMBING, FLOOR DRAINS AND ALL SOURCES OF WASTEWATER DISCHARGE AND GRADING PLANS MAY BE REQUIRED DURING THE EVALUATION STAGE.

PROPERTY OWNER:	LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:
NAME: ROBERT C. RHEIN INTERESTS, INC. (LAST) (FIRST) (MI)	NAME: (LAST) (FIRST) (MI)
ADDRESS: 5250 77 CENTER DR. SUITE 2370	DAYTIME PHONE: ( ) --
CITY: CHARLOTTE STATE: NC ZIP: 28217	
DAYTIME PHONE: ( ) 704-945-4256	

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? DEED 3897-0958 RECORDED 7/17/95

THE UNDERSIGNED, OWNER, OR LEGAL AGENT FOR THE OWNER, OF THE PROPERTY DESCRIBED ABOVE AS THE "JOB LOCATION" HAS READ THE FOREGOING APPLICATION, ACKNOWLEDGES THAT THE CONTENTS OF SAME ARE TRUE, AND AUTHORIZES AGENTS OF THE MECKLENBURG COUNTY HEALTH DEPARTMENT TO ENTER ONTO THE PROPERTY FOR THE PURPOSE OF PROCESSING THIS REQUEST.

SIGNED: Thomas M. Kelly GM of Northside Club DATE: 8/22/96

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102

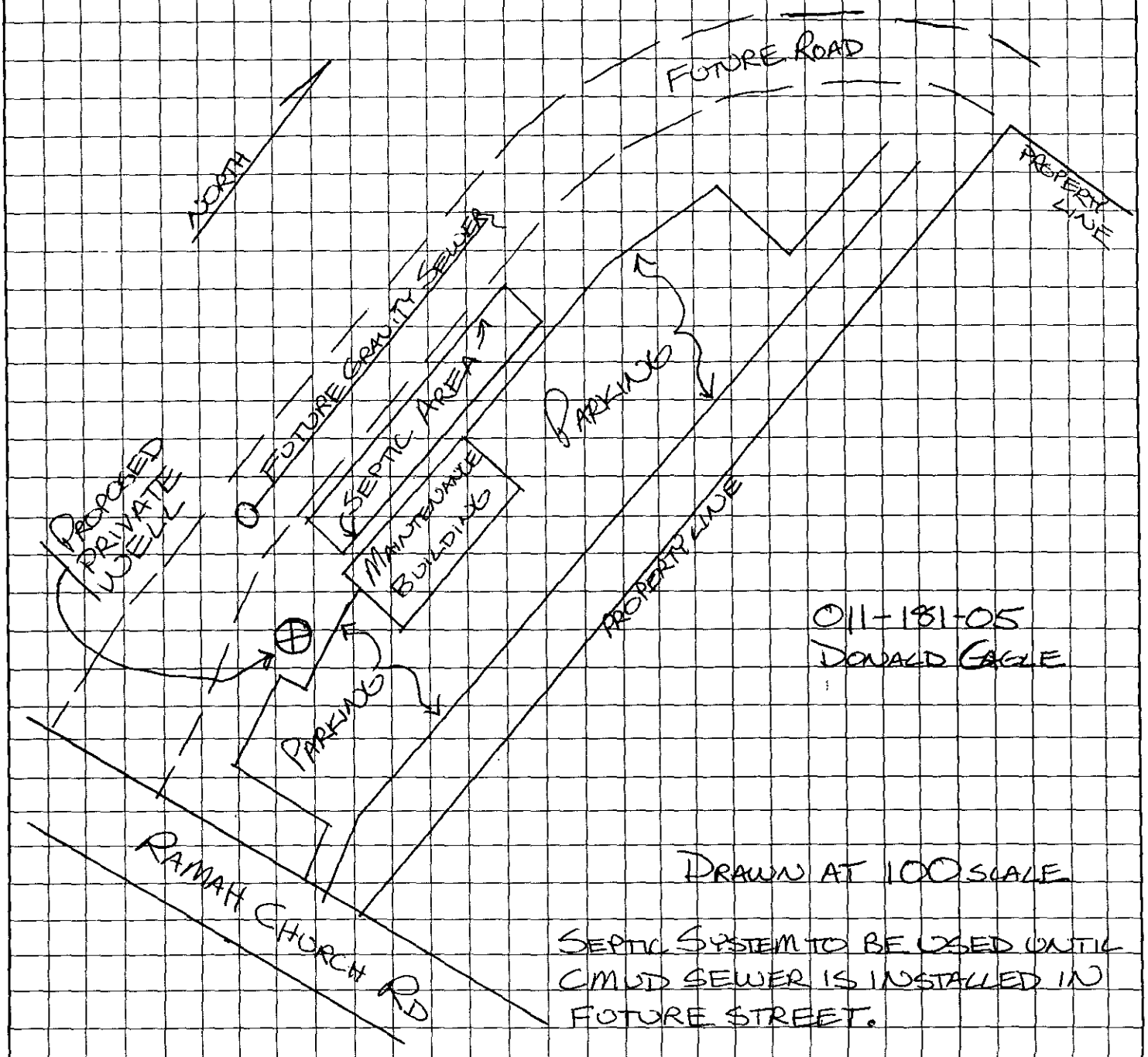
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ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 1555B

TC: 011-181-04 PO

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Thomas M Kelly
OWNER/AGENT SIGNATURE

DATE 5/22/96

APPROVAL DATE _____

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

APPLICATION FOR BUILDING PERMIT

TYPE PERMIT ☐ Single Family ☐ Two Family ☐ Commercial ☐ Mobile Home ☐ Modular

PERMIT #

ADDRESS

STREET # (N,S,E,W) 12647 STREET NAME RAMAH CHURCH RD (AV,RD,ST, etc)

SUITE/UNIT(S): Northstone Golf Club

TAX JURISDICTION (Check One): ☐ 0-Mecklenburg ☐ 1-Charlotte ☐ 2-Davidson ☒ 6-Huntersville ☐ 3-Cornelius ☐ 4-Pineville ☐ 5-Matthews ☐ 7-Mint Hill

SITE DATA

PROJECT/SUBDIVISION NAME NORTHSTONE PHASE SECTION PROJECT # 052 9/2997

OWNER ROBERT C. RHEIN INTERESTS ADDRESS 5250 77 CENTER DR SUITE 2370

CITY CHARLOTTE STATE NC ZIP 28217 PHONE # 527-2333

TAX PARCEL # LOT # BLOCK # LAND AREA (sq. ft.)

CENSUS ZONING: JURIS MAP # R/W

SPECIAL (Circle) C D N P S FLOOD PLAIN ☐ Yes FLOOD ELEV. FIRE DIST. ☐ Yes APR'D

LOT: ☐ CORNER ☐ THROUGH FRONT STREET (if different)

MINIMUM SETBACKS: FRONT LEFT SIDE RIGHT SIDE REAR REQ. PARK'G

PROJECT

JOB # TYPE WORK: ☒ New ☐ Addition ☐ Accessory ☐ Upfit ☐ Shell ☐ Demolish ☐ Other

USDC # PROJECT DESCRIPTION (Residence, Office, etc.) Mobile Home: include Yr./Make & Serial # MAINT FAC.

PURPOSE AREA (sq. ft.): Heated 6000 Unheated Deck(s) # STORIES 1 BASEMENT ☐ Yes

OCC. TYPE ONE/TWO FAMILY, MODULAR, OR MOBILE HOME: TOTAL # ROOMS # BEDROOMS # BATHS

Work includes: ☐ Attached Carport ☐ Attached Garage ☐ Masonry Fireplace(s)

CONST SPRINKLERS ☐ Yes # UNITS MULTI-FAMILY: # HANDICAP UNITS

SERVICES

ELECTRICAL:

Power Company Service: ☐ New ☐ Existing Total Amps # Circuits

Connections 120 Volts # Connections over 120 Volts

MECHANICAL:

Gas Company # Gas Conn # Appliances ☐ Heat Only ☐ Central A/C Only ☐ Heat and A/C

☐ 1-Heat Pump ☐ 2-Central A/C ☐ 3-Elect. Baseboard ☐ 4-Elect. Furnace ☐ 5-Elect. Ceiling ☐ 6-Gas/Oil Furnace

☐ 7-Gas/Oil Steam ☐ 8-Gas Pack ☐ 9-Pre-Fab Fireplace ☐ 10-Chimney ☐ 11-Stove

PLUMBING: # of Fixtures (Sink, Water Closet, etc...) # of Appliances (Dishwasher, Water Heater, etc.)

UTILITIES: ☐ New ☐ Existing

Public 1-Individual Meter/Connection ☐ Water ☐ Sewer Private 3-Individual ☒ Well ☒ Septic

2-Master Meter/Connection ☐ Water ☐ Sewer 4-Community ☐ Well ☐ Septic

CONTRACTORS

ACCT #	CONTRACTOR(S): (Name/Address as appears on license)				CONTRACT COST Nearest $100
	Bldg. SOUTHERN CONSTRUCTORS	Phone 663-1563	Lic #		Bldg. $
	Add P.O. BOX 686	City/St MOORESVILLE NC	Zip 28115		
	Elect.	Phone	Lic #		Elect. $
	Add	City/St	Zip		
	Mech.	Phone	Lic #		Mech. $
	Add	City/St	Zip		
	Plbg.	Phone	Lic #		Plbg. $
	Add	City/St	Zip		
PLANS ☐	Arch./Eng HARBRAUGH-WILLIAMS	Phone 556-1990	Lic #		Total Const. Cost $
	Add 730 WINDSOR OAK CT	City/St CHARLOTTE NC	Zip 28273		

OTHER

FT ☐ TOTAL ESTIMATED PROJECT COST FOR FAST TRACK OR MODULAR $

REMARKS:

FAX 556 0505

THE UNDERSIGNED HEREBY CERTIFIES THAT HE/SHE IS EITHER THE OWNER OR THE AUTHORIZED AGENT OF THE OWNER AND HEREBY MAKES APPLICATION FOR PERMIT AND INSPECTION OF WORK DESCRIBED AND AGREES TO COMPLY WITH ALL APPLICABLE LAWS REGULATING THE WORK.

APPLICANT'S SIGNATURE DATE PRINT APPLICANT'S NAME METHOD OF PAYMENT ☐ CASH/CHECK ☐ ACCOUNT

HOLDS	PROCESSED BY	APPROVED BY	VALIDATED BY

CHARLOTTE-MECKLENBURG BUILDING STANDARDS DEPARTMENT
P.O. BOX 31097 • CHARLOTTE, NC 28231-1097 • 704/336-2831

File 1555B

Yarbrough-Williams & Associates, Inc.

PLANNING • SURVEYING • ENGINEERING
801 CLANTON ROAD SUITE 110 CHARLOTTE, NORTH CAROLINA 28217
(704) 525-6024 FAX 525-8768

September 23, 1996

Ms. Lisa Mialik
Mecklenburg County Health Department
700 North Tryon Street, Suite 211
Charlotte, North Carolina 28202

Re: Northstone Subdivision
Maintenance Facility
12647 Ramah Church Road

Dear Ms. Mialik:

This letter is to confirm our conversation regarding the proposed septic system to serve the referenced project. As the Project Engineer for Northstone Subdivision, we have studied the future development for the area surrounding the referenced project. The Maintenance Facility will ultimately be served by a CMUD gravity sewer main extension from the golf course. The sanitary sewer main will be extended from below the proposed septic system such that the septic system can remain in service until the extension is complete. Once the sanitary sewer main is in service, the remaining improvements to the area will be completed. If you should have any questions, feel free to give me a call.

Sincerely,

Marc A. Houle, P.E.
Vice President

MAH/ir
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File 1955B

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Vice President

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

Sheet
PROPERTY ID #:
COUNTY:

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

#1

1555B
PO 011-161-04

OWNER: Robert C. Rhein Interests, Inc. APPLICANT:
ADDRESS: 5250 77 Center Dr. Suite 230, Char APPLICATION DATE: DATE EVALUATED:
PROPOSED FACILITY: Shop PROPOSED DESIGN FLOW (.1949): 50g/emp PROPERTY SIZE: .11
LOCATION OF SITE: 12647 Research Cha Rom PROPERTY RECORDED:
WATER SUPPLY: ☑ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	5-10% Slopes .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
1	LS	0-51"	SBK/C	Fr-F/SE&P/SP	75" to Chroma 2 colors	51"	N/A	None	PS IV .39/F2
2	LS	0-46"	SBK/C	Fr-F/SE&P/SP	46" to Chroma 2 colors	48"	N/A	None	PS IV .39/F2
3	LS		same as Boring #2						PS IV 139/F2
4	LS	0-41"	SBK/C	Fr-F/SE&P	41" to Chroma 2 colors	41"	N/A	None	PS IV .39/A2

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)		

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): Provisionally Suitable
EVALUATED BY: W. A. Mauli 9-16-96
OTHER(S) PRESENT: Jeanine Soil Scientist

OMMENTS:

1602 Repair, may need Repair

LEGEND

use the following standard abbreviations

ANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL 1955 LTAR	LPP 1957 LTAR	MINERALOGY/ CONSISTENCE	STRUCTURE
C (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive)	G (Single Grain)
V (Convex Slope)		LS (Loamy Sand)			SEXP (Slightly Expansive)	M (Massive)
(Drainage Way)					EXP (Expansive)	CR (Crumb)
S (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
P (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
S (Foot Slope)						ABK (Angular Blocky)
(Head Slope)	III	SI (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
(Linear Slope)		SICL (Silty Clay Loam)				PR (Prismatic)
(Nose Slope)		CL (Clay Loam)			MOIST	WET
(Ridge)		SCL (Sandy Clay Loam)				
(Shoulder Slope)		SLC (Silt Loam Clay)			VFR (Very Friable)	NS (Non-sticky)
(Terrace)					FR (Friable)	SS (Slightly Sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FI (Firm)	S (Sticky)
		SIC (Silty Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
					EFI (Extremely Firm)	NP (Non-plastic)
		O (Organic)	None			SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

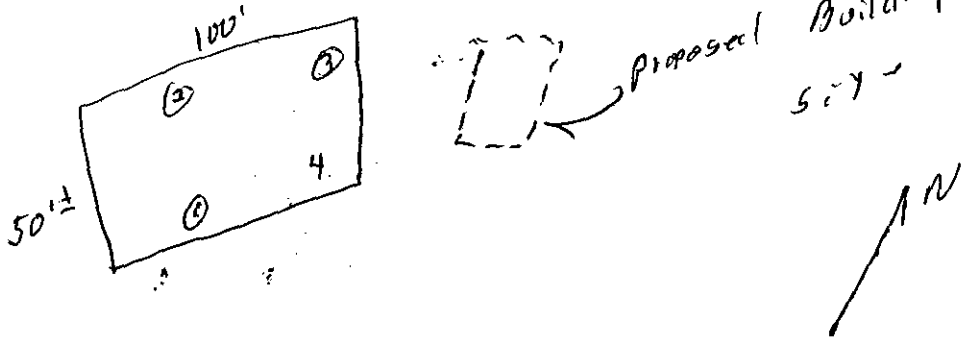
OTES

ORIZON DEPTH	In inches below natural soil surface
EPTH OF FILL	In inches from land surface
ESTRICTIVE HORIZON	Thickness and depth from land surface
APROLITE	S(suitable) or U(unsuitable)
IL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
LASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

valuation of saprolite shall be by pits.

ong-term Acceptance Rate (LTAR): gal/day/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).



Ramesh Chandel

FEE: 100.00
DATE: 8/26/96
CK. # 12850

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR IMPROVEMENT PERMIT
FOR COMMERCIAL/INDUSTRIAL SITE

[redacted] | CRT

TYPE APPLICATION: X NEW SYSTEM ___ EXPANSION OF EXISTING SYSTEM ___ REPAIR OF EXISTING SYSTEM

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

COPY

___ COMMERICAL ___ INDUSTRIAL

DESCRIBE TYPE OF BUSINESS:
MAINTENANCE SHOP
Square footage of facility: 6000SF

NUMBER OF EMPLOYEES: 2
PER SHIFT: 2 0 0

HOW WILL WATER BE USED IN THE FACILITY:

✓ TOILETS/URINALS
✓ HANDSINK
___ SHOWERS
___ FLOOR DRAINS

OTHER, PLEASE DESCRIBE:

TYPE OF WASTEWATER:
✓ SEWAGE
___ INDUSTRIAL PROCESS WASTE WATER

FILE #: 1555 B

PROJECT TRACKING #:

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 011-181-04

STREET ADDRESS: 12647 RAMAH CHURCH ROAD

LOT NUMBER: N/A

TOWNSHIP (CHECK ONE):

___ 0 MECKLENBURG
___ 1 CHARLOTTE
___ 2 DAVIDSON
___ 3 CORNELIUS
___ 4 PINEVILLE
___ 5 MATTHEWS
✓ 6 HUNTERSVILLE
___ 7 MINT HILL

An IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change.

IF EXPANSION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED ADDITION:

WATER SUPPLY (CHECK ONE):
___ COMMUNITY (C) ___ MUNICIPAL (M) ✓ PRIVATE WELL (P)
___ SHARED WELL (S) ___ OTHER 'SPRINGS' (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES	___ YES ✓ NO	WELL SPRINGS OR WATERLINES	___ YES ✓ NO
EXISTING WASTE WATER SYSTEMS	___ YES ✓ NO	DESIGNATED WETLANDS	___ YES ✓ NO
EASEMENTS OR RIGHT-OF-WAYS	___ YES ✓ NO		

BUILDING PLANS TO INCLUDE ALL PLUMBING, FLOOR DRAINS AND ALL SOURCES OF WASTEWATER DISCHARGE AND GRADING PLANS MAY BE REQUIRED DURING THE EVALUATION STAGE.

PROPERTY OWNER:

NAME: ROBERT C. RHEIN INTERESTS, INC.
(LAST) (FIRST) (MI)

ADDRESS: 5250 77 CENTER DR. SUITE 2370

CITY: CHARLOTTE STATE: NC ZIP: 28217

DAYTIME PHONE: ( ) 704-945-4256

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME:
(LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) -

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? DEED 3897-0958 RECORDED 7/17/95

THE UNDERSIGNED, OWNER, OR LEGAL AGENT FOR THE OWNER, OF THE PROPERTY DESCRIBED ABOVE AS THE "JOB LOCATION" HAS READ THE FOREGOING APPLICATION, ACKNOWLEDGES THAT THE CONTENTS OF SAME ARE TRUE, AND AUTHORIZES AGENTS OF THE MECKLENBURG COUNTY HEALTH DEPARTMENT TO ENTER ONTO THE PROPERTY FOR THE PURPOSE OF PROCESSING THIS REQUEST.

SIGNED: Thomas M. Kelly GM

DATE: 8/22/96

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102

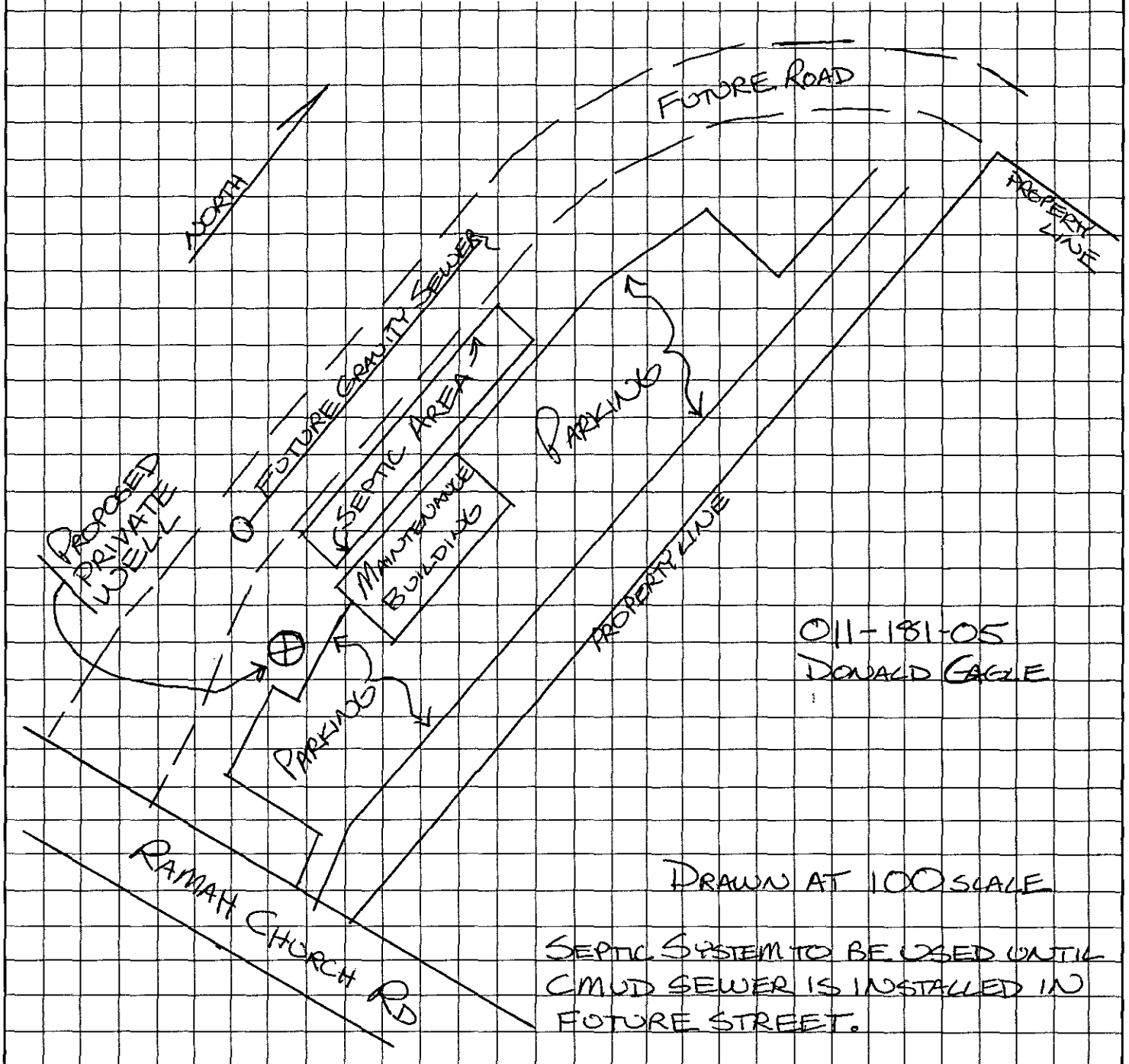
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 1555B

TC: 011-181-04 PO

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Thomas M Kelly
OWNER/AGENT SIGNATURE

DATE 5/22/96

APPROVAL DATE _____

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

APPLICATION FOR BUILDING PERMIT

TYPE PERMIT ☐ Single Family ☐ Two Family ☐ Commercial ☐ Mobile Home ☐ Modular

PERMIT #

ADDRESS

STREET # (N,S,E,W) 12647 STREET NAME RAMAH CHURCH RD (AV,RD,ST, etc)

SUITE/UNIT(S): Northstone Golf Club

TAX JURISDICTION (Check One): ☐ 0-Mecklenburg ☐ 1-Charlotte ☐ 2-Davidson ☒ 6-Huntersville ☐ 3-Cornelius ☐ 4-Pineville ☐ 5-Matthews ☐ 7-Mint Hill

SITE DATA

PROJECT/SUBDIVISION NAME NORTHSTONE PHASE ____ SECTION ____ PROJECT # 052 98-0997

OWNER ROBERT C. RHEIN INTERESTS ADDRESS 5250 77 CENTER DR SUITE 270

CITY CHARLOTTE STATE NC ZIP 28217 PHONE # 527-2333

TAX PARCEL # ____ CENSUS ____ LOT # ____ BLOCK # ____ LAND AREA (sq. ft.) ____

ZONING: ____ JURIS ____ MAP # ____ F/W ____

SPECIAL (Circle) C D N P S FLOOD PLAIN: ☐ Yes FLOOD ELEV ____ FIRE DIST: ☐ Yes APR'D

LOT: ☐ CORNER ☐ THROUGH FRONT STREET (if different) ____

MINIMUM SETBACKS: FRONT ____ LEFT SIDE ____ RIGHT SIDE ____ REAR ____ REQ. PARK'G ____

PROJECT

JOB # ____ USDC # ____ PURPOSE ____ OCC. TYPE ____ CONST ____

TYPE WORK: ☒ New ☐ Addition ☐ Accessory ☐ Upfit ☐ Shell ☐ Demolish ☐ Other

PROJECT DESCRIPTION (Residence, Office, etc.) Mobile Home: include Yr./Make & Serial # MAINT FAC.

AREA (sq. ft.): Heated 6000 Unheated ____ Deck(s) ____ # STORIES 1 BASEMENT ☐ Yes

ONE/TWO FAMILY, MODULAR, OR MOBILE HOME: TOTAL # ROOMS ____ # BEDROOMS ____ # BATHS ____

Work includes: ☐ Attached Carport ☐ Attached Garage ☐ Masonry Fireplace(s)

SPRINKLERS ☐ Yes # UNITS ____ MULTI-FAMILY: # HANDICAP UNITS ____

SERVICES

ELECTRICAL:

Power Company ____ Service: ☐ New ☐ Existing Total Amps ____ # Circuits ____

Connections 120 Volts ____ # Connections over 120 Volts ____

MECHANICAL:

Gas Company ____ # Gas Conn. ____ # Appliances ____ ☐ Heat Only ☐ Central A/C Only ☐ Heat and A/C

☐ 1-Heat Pump ☐ 2-Central A/C ☐ 3-Elect. Baseboard ☐ 4-Elect. Furnace ☐ 5-Elect. Ceiling ☐ 6-Gas/Oil Furnace

☐ 7-Gas/Oil Steam ☐ 8-Gas Pack ☐ 9-Pre-Fab Fireplace ☐ 10-Chimney ☐ 11-Stove

PLUMBING: # of Fixtures (Sink, Water Closet, etc...) # of Appliances (Dishwasher, Water Heater, etc.)

UTILITIES: ☐ New ☐ Existing

Public 1-Individual Meter/Connection ☐ Water ☐ Sewer Private 3-Individual ☒ Well ☒ Septic

2-Master Meter/Connection ☐ Water ☐ Sewer 4-Community ☐ Well ☐ Septic

CONTRACTORS

ACCT #	CONTRACTOR(S): (Name/Address as appears on license)	CONTRACT COST Nearest $100
	Bldg. SOUTHERN CONSTRUCTORS Phone 663-1563 Lic # ____ Add P.O. Box 686 City/St MOORESVILLE NC Zip 28115	Bldg. $
	Elect. ____ Phone ____ Lic # ____ Add ____ City/St ____ Zip ____	Elect. $
	Mech. ____ Phone ____ Lic # ____ Add ____ City/St ____ Zip ____	Mech. $
	Plbg. ____ Phone ____ Lic # ____ Add ____ City/St ____ Zip ____	Plbg. $
PLANS ☐	Arch./Eng. HARBRAXH-WILLIAMS Phone 556-1990 Lic # ____ Add 730 WINDSOR OAK CT City/St CHARLOTTE NC Zip 28273	Total Const. Cost $

OTHER

FT ☐ TOTAL ESTIMATED PROJECT COST FOR FAST TRACK OR MODULAR $

REMARKS:

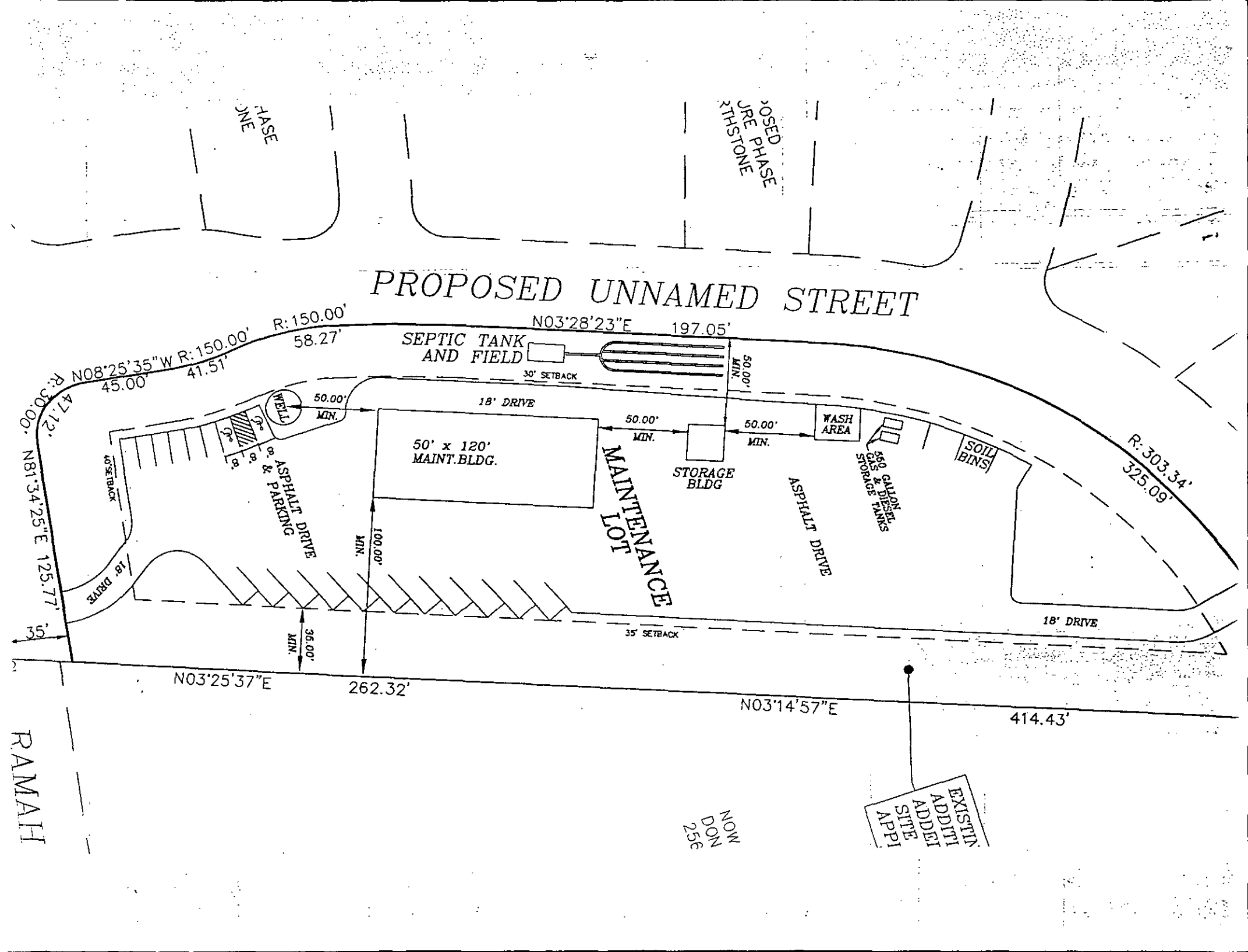
FAX 556 0505

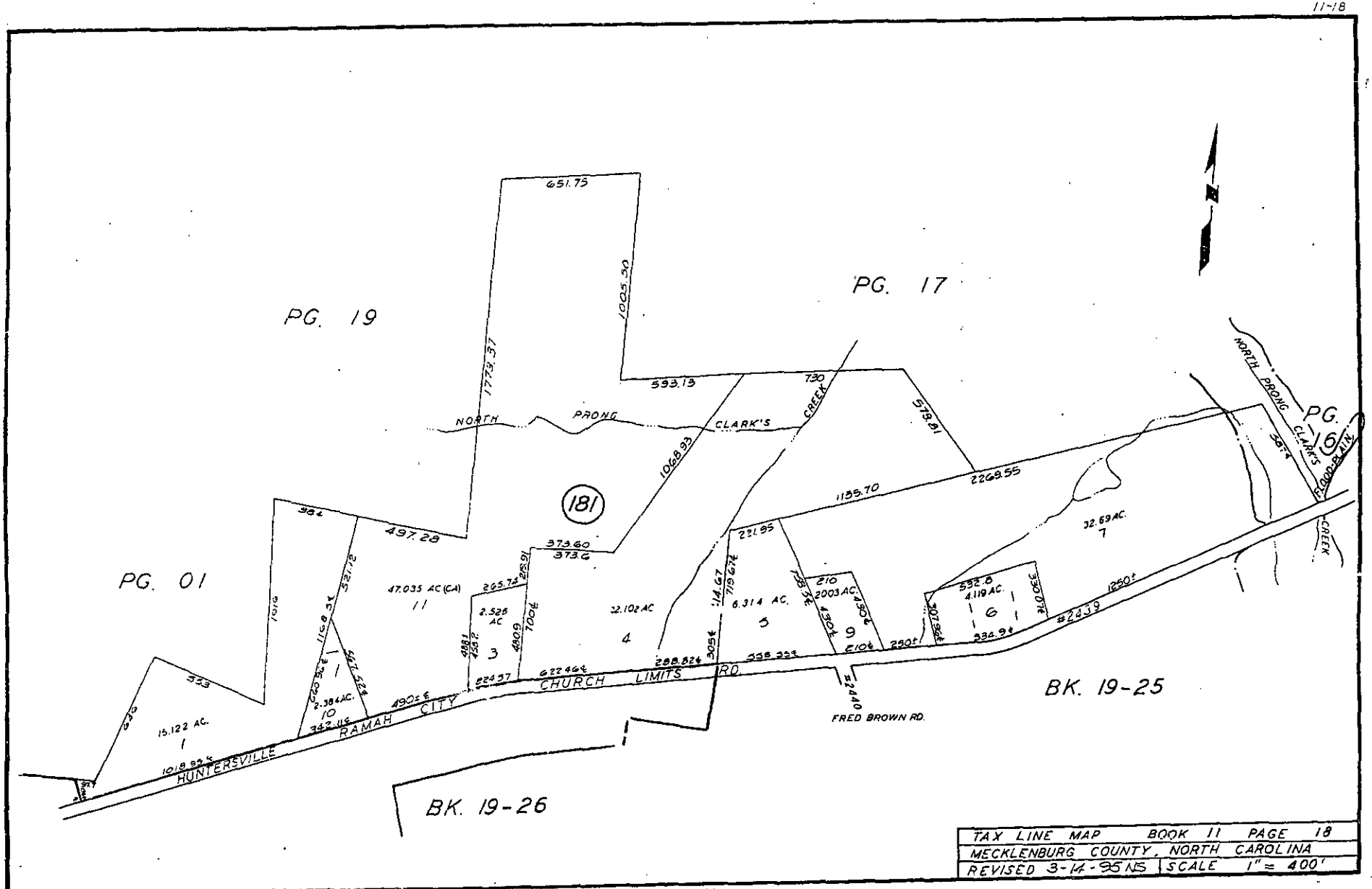
THE UNDERSIGNED HEREBY CERTIFIES THAT HE/SHE IS EITHER THE OWNER OR THE AUTHORIZED AGENT OF THE OWNER AND HEREBY MAKES APPLICATION FOR PERMIT AND INSPECTION OF WORK DESCRIBED AND AGREES TO COMPLY WITH ALL APPLICABLE LAWS REGULATING THE WORK.

APPLICANT'S SIGNATURE ____ DATE ____ PRINT APPLICANT'S NAME ____ METHOD OF PAYMENT ☐ CASH/CHECK ☐ ACCOUNT

CHARLOTTE-MECKLENBURG BUILDING STANDARDS DEPARTMENT
[illegible] CHARLOTTE, NC 28231-0997 · 704-336-2831

HOLDS	PROCESSED BY	APPROVED BY	VALIDATED BY


PROPOSED UNNAMED STREET
R:150.00'
58.27'
N03°28'23"E 197.05'
SEPTIC TANK AND FIELD
30' SETBACK
50.00' MIN.
18' DRIVE
WELL
50.00' MIN.
50.00' MIN.
50.00' MIN.
WASH AREA
50' x 120' MAINT.BLDG.
STORAGE BLDG
MAINTENANCE LOT
ASPHALT DRIVE
550 GALLON GAS & DIESEL STORAGE TANKS
SOIL BINS
R:303.34'
325.09'
N08°25'35"W R:150.00'
41.51'
45.00'
R:30.00'
47.12'
N81°34'25"E 125.77'
40' SETBACK
18' DRIVE
ASPHALT & PARKING
ASPHALT DRIVE
100.00' MIN.
35' SETBACK
18' DRIVE
35'
36.00' MIN.
N03°25'37"E 262.32'
N03°14'57"E 414.43'
RAMAH
NOW DON 256
EXISTIN ADDITI ADDEI SITE APPI



TAX LINE MAP	BOOK 11	PAGE 18
MECKLENBURG COUNTY, NORTH CAROLINA		
REVISED 3-14-95 NS	SCALE	1" = 400'