N.C. Department of Environment & Natural Resources / Division of Environmental Health

NOTICE OF VIOLATION
ON-SITE WASTEWATER SYSTEM

☒ Certified Mail (Return Receipt) ☐ First Class Mail ☐ Hand Deliver

Owner: Terry Bennett

Mailing Address: 4330 Hillside Drive
Mint Hill, Nc 28227

Occupant:

Location: 4330 Hillside Drive
Mint Hill, NC 28227

☒ Residence ☐ Business ☐ Other

You are hereby notified that you are violating the Rules adopted by the North Carolina Commission for Health Services or Article 11 of Chapter 130A of the General Statutes of North Carolina by owning or controlling a residence, place of business, or place of public assembly which is not provided with an approved wastewater system. Your wastewater system is not in compliance.

On April 8, 2019 an inspection of the wastewater system by the Mecklenburg County Health Department indicated the following violations:

Violation/s

Observed a discharge of sewage to the surface of the ground or surface water.
[G.S. 130A-335(a) 15A NCAC 18A. 1961(a)(1)(A)]

You are hereby ordered to bring your wastewater system into compliance by completing the following:

☐ Install / Repair wastewater system. You must obtain a repair permit from the local health department prior to the repair of your system.

☐ Other Repairs *(Specify):*

☒ Eliminate wastewater discharge and connect to an approved wastewater system.

☐ Perform Maintenance *(Specify):*

If the wastewater violation is not brought into compliance by **May 13, 2019** appropriate legal action will be taken.

Failure to comply with laws, rules, and this notice will subject you to the following legal remedies; Injunction Relief [G.S. 130A-18], Administrative Penalties [G.S. 130A-22], Suspension or Revocation of Permits [G.S. 130A-23], and Criminal Penalties [G.S. 130-25].

For questions regarding this notice you should contact Heather Ray at 704-280-1485.

Notice Issued: 4-9-19 (Date) — Heather Ray, DENR/DEH Authorized Agent

Compliance: 5-3-19 (Date) — Heather Ray, DENR/DEH Authorized Agent

Preformed maintenance

Mecklenburg County – Groundwater & Wastewater Services
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

9785
#10297

MECKLENBURG COUNTY
HEALTH DEPARTMENT

APPLICATION FOR A RESIDENTIAL SITE IMPROVEMENT PERMIT/ CONSTRUCTION AUTHORIZATION FOR AN ON-SITE WASTEWATER SYSTEM, NEW WELL INSTALLATION, OR REPAIR OF EXISTING WELL

1. SEPTIC / TYPE APPLICATION: ○ N/A ○ NEW SYSTEM ○ ALTERATION ◉ REPAIR ○ MODIFIED PLOT PLAN

2. WELL / TYPE APPLICATION: ○ N/A ○ NEW WELL OR REPAIR DONMENT

3. JOB LOCATION INFORMATION:
TAX PARCEL NUMBER: 13706301
STREET ADDRESS: 4330 Hillside DR.
CITY: Mint Hill
STATE: NC ZIP: 28227
SUBDIVISION NAME: Olivers
LOT #: _____ LOT SIZE (acres): _____
TOWNSHIP:
○ MECKLENBURG ○ CORNELIUS ○ HUNTERSVILLE
○ DAVIDSON ○ CHARLOTTE ○ PINEVILLE
○ MATTHEWS ◉ MINT HILL

4. BUILDING INFORMATION:
BUILDING TYPE:
○ SINGLE MOBILE HOME ○ MODULAR HOME
○ DOUBLE WIDE ○ MULTIPLE FAMILY
◉ HOUSE ○ OTHER _____
HEATED SQUARE FOOTAGE: 1156
NUMBER OF BEDROOMS: 2
NUMBER OF OCCUPANTS: 3 To 4 - Most of The Time
IS -2
FOUNDATION TYPE:
○ CONCRETE SLAB ○ BASEMENT WITH PLUMBING
◉ CRAWL SPACE ○ BASEMENT WITH NO PLUMBING

5. IF PLANNING TO EXPAND OR ALTER THE EXISTING SEPTIC SYSTEM PLEASE COMPLETE THE FOLLOWING SECTION: ☑ N/A
NUMBER OF BEDROOMS TO BE ADDED: 2 NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: _____

6. WATER SUPPLY: ○ MUNICIPAL ○ PRIVATE WELL ◉ PUBLIC WELL ○ SHARED WELL ○ OTHER _____

7. PROPOSED USE OF WELL: ○ N/A ◉ IRRIGATION ○ POTABLE (DRINKING WATER) ○ OTHER [redacted]

8. PLEASE INDICATE AND RANK DESIRED SEPTIC SYSTEM TYPE(S) IN ORDER OF PREFERENCE *(1-MOST DESIRED 5-LEAST DESIRED)*:
☐ N/A ☐ ANY TYPE ☐ CONVENTIONAL ☑ ACCEPTED ☐ INNOVATIVE ☐ ALTERNATIVE ☐ OTHER _____

8A. RANK: ___ 1 ___ ___ ___ ___

9. DO ANY OF THE FOLLOWING APPLY TO THE PROPERTY IN QUESTION? IF "YES" PLEASE ATTACH SUPPORTING DOCUMENTATION.

BURIED CABLES, LANDFILLS, STUMPHOLES	○ YES ◉ NO	GRADING/SOIL REMOVAL PERFORMED	◉ YES ○ NO
EXISTING WASTEWATER (SEPTIC) SYSTEMS		CTIONAL WETLANDS	◉ YES ○ NO
WELLS, SPRINGS, OR WATER		AL REQUIRED BY ANY OTHER PUBLIC AGENCY	○ YES ◉ NO
EASEMENTS OR RIGHT-OF-WA		ATER OTHER THAN DOMESTIC SEWAGE	○ YES ◉ NO
CHEMICAL/PETROLEUM STORA		NDERGROUND CONTAMINATION	○ YES ◉ NO
WASTE STORAGE		WATER USE RESTRICTIONS/VARIANCES	○ YES ◉ NO

Heather

10. WHAT DATE WAS THE PROP ED? 1949 ☐ UNKNOWN

11. WHAT IS THE ANTICIPATED (es ☐ N/A

12. PROPERTY OWNER:
NAME: WALTER R Rudolph Bennett
ADDRESS: 4330 Hillside DR.
CITY: Mint Hill
STATE: N.C. ZIP: 28227
WORK PHONE: _____
MOBILE PHONE: He died, I'm the son
FAX: _____
E-MAIL: _____

13. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:
NAME: Terry Bennett
ADDRESS: 4330 Hillside DR.
CITY: Mint Hill
STATE: NC ZIP: 28227
WORK PHONE: 704-545-4622 (H)
MOBILE PHONE: 704-363-2697 (C)
FAX: 704-545-7034
E-MAIL: _____

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208 OFFICE: (980) 314-1650, FAX: 704-336-5824

Revised on: 03/27/19

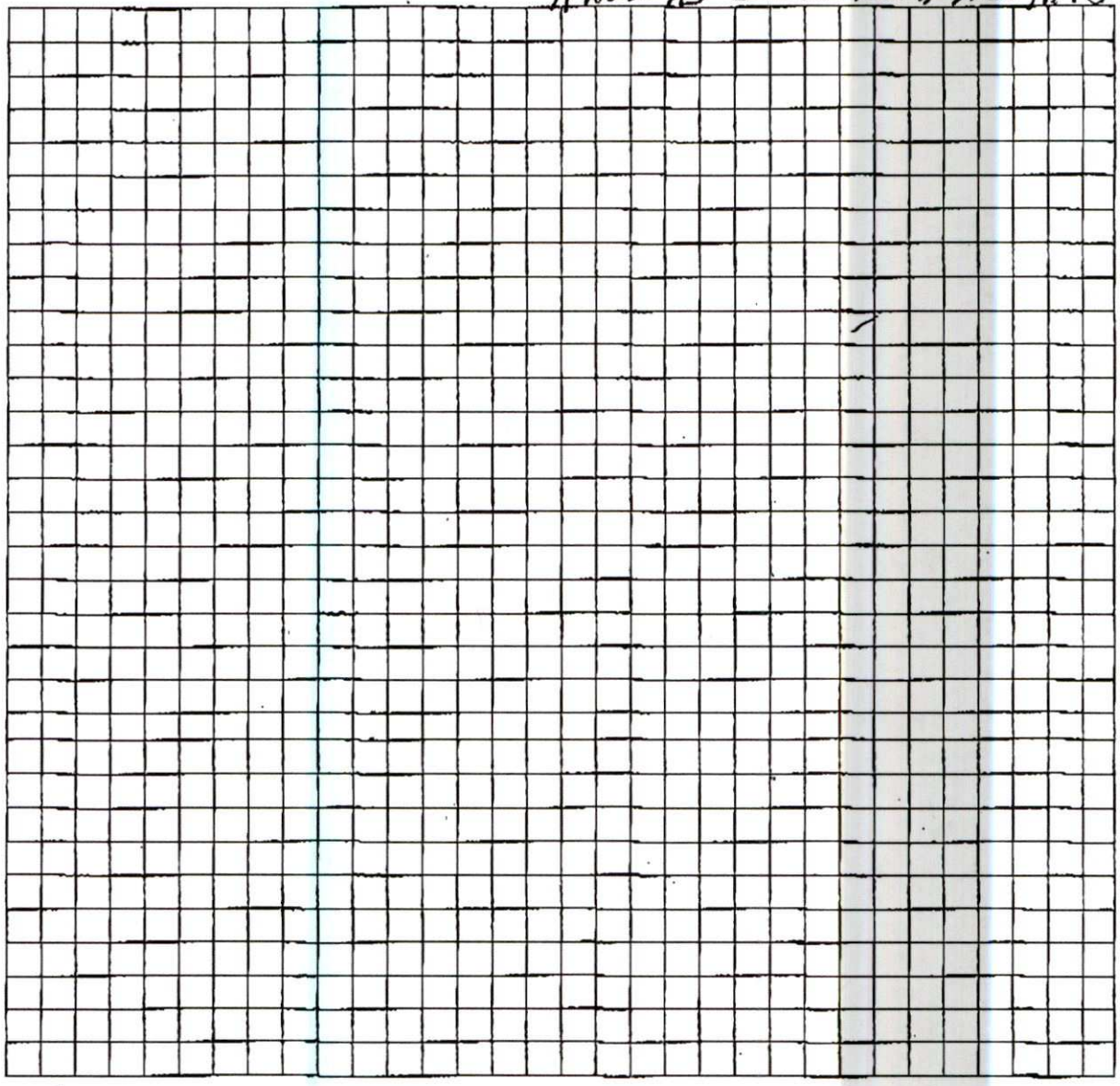
File #: _____

PROPOSED PLOT PLAN

A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

Street Address: 4330 HILLSIDE DR. Tax Parcel #: 137-063-01

~~Subdivision Name~~: _____ Lot #: 11 IN BLOCK 2 OF THE SUBDIVISION KNOW AS COMMUNITH HEIGHTS



Terry Bonner
Property Owner's or Owner's Legal Representative Signature

4-4-2019
Date

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Dr. Suite 6000, Charlotte, NC 28208. OFFICE: (980) 314-1660, FAX: 704-336-6894

Revised on: 03/27/19

14. SEPTIC SYSTEM PERMIT APPLICATION:

If the information in this application is falsified, changed, or the site is altered, then the Improvement Permit and Authorization to Construct shall become invalid. 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. The permit is valid for either sixty (60) months or is non-expiring depending upon the documentation submitted: complete site plan = 60 months, complete plat = non-expiring. TB (Initial here for septic system applications)

15. WELL PERMIT APPLICATION:

If the information in this application is falsified, changed, or the site is altered, then the Well Permit shall become invalid. 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. The permit is valid for a period of twelve (12) months from the date of issuance. TB (Initial here for well applications)

18. APPLICATION SIGNATURE SECTION:

ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. A proper signature is required in order to process your application. Please review the application carefully and sign in the space provided below. A PROPOSED PLOT PLAN is required to be submitted with each application.

Terry Benner — Property Owner's or Owner's Legal Representative Signature

4-4-2019 — Date

OFFICE USE ONLY

○ SURVEY PLAT TO SCALE SUBMITTED ○ SCALED SITE PLAN SUBMITTED ○ UN-SCALED SITE PLAN SUBMITTED

SEPTIC APPLICATION FEE RECEIVED: $ _____ DATE FEE RECEIVED: _____

WELL APPLICATION FEE RECEIVED: $ _____ DATE FEE RECEIVED: _____

APPLICATION PROCESSED BY: _____

GWS FILE NUMBER ASSIGNED: _____

APPLICATION ID NUMBER ASSIGNED: _____

COMMENTS:

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Dr. Suite 6000, Charlotte, NC 28208 OFFICE: (980) 314-1660, FAX: 704-336-6894

WHEREAS, the above named Administratrix CTA does hereby join in the Deed to evidence her consent to the transfer of the real property described below as required by the North Carolina General Statutes Section 28A-17-12, the first notice to creditors having been published on December 20, 2002.

NOW, THEREFORE, Grantors, for and inconsideration of the sum of [redacted] and other good and valuable consideration to them in hand paid by Grantee, the receipt of which is hereby acknowledged, have given, granted, bargained, sold and conveyed and by these presents do give, grant, bargain, sell, convey and confirm unto Grantees, their heirs and/or successors and assigns, as follows: A life estate to Terry Lee Bennett and wife, Rebecca Mullis Bennett, and on the death of the surviving life tenant, then to Lisa Annette Bennett and Tara Leigh Bennett, their heirs and assigns forever, all the following described property, located at 4330 Hillside Drive, Mint Hill, in Mecklenburg County, North Carolina and more fully described as:

BEING known and designated as all of Lot 11 in Block 2 of the Subdivision known as COMMUNITY HEIGHTS, Section 1 as shown on map thereof recorded in Map Book 4, at Page 471 in the Mecklenburg County Public Registry.

BEING in all respects the same property conveyed to W.R. Bennett and wife, Mary M. Bennett by Deed recorded in Book 1332, at Page 366, Mecklenburg County Public Registry.

W.R. Bennett, husband of Mary M. Bennett, died on November 1, 1997.

This conveyance is subject to easements, rights of way and restrictive covenants of record, if any, and to ad valorem taxes for the current year.

The above-described property was conveyed to Mary Malone Bennett by deed recorded in Book 1332, Page 366, Mecklenburg County Registry.

TO HAVE AND TO HOLD the above described premises, with all appurtenances thereunto belonging unto Grantees, their heirs and/or successors and assigns.

Dennis Wayne Bennett, Terry Lee Bennett and Kenneth Dean Bennett covenant with Grantees that they are seized of the premises if fee simple, have the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances and that they will warrant and defend the title against the lawful claims of all persons whomsoever except for the exceptions state above.

The Administratrix gives no warranties of title.

IN WITNESS WHEREOF, Grantors have hereunto set their hands and seal the day and year first above written.

Dennis Wayne Bennett (Seal)
Dennis Wayne Bennett

Terry Lee Bennett (Seal)
Terry Lee Bennett

FROM 4

TERRY BENNETT

EMIL # TERRY@CAROLINAFRAMERS.COM

5-PAGES

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

Sheet ____ *of* ____
PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
***for* ON-SITE WASTEWATER SYSTEM**
(Complete all fields in full)

OWNER: _____ APPLICATION DATE _____
ADDRESS: _____ DATE EVALUATED: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: _____ PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
1		0-6	Top Soil						
		6-17	SBK, C	SS, P, FR, SEPP					
		17-32	SBK, C	S, P, FR,					
2									
3									
4									

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____

EVALUATED BY: _____
OTHER(S) PRESENT: _____

COMMENTS: _____

Updated February 2014

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	M / CON	ERALOGY/ STENCE	STRUCTURE
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	SEXP	lightly Expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)			EXP (	pansive)	M (Massive)
D (Drainage Way)							CR (Crumb)
DS (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3			GR (Granular)
FP (Flood Plain)		L (Loam)					SBK (Subangular Blocky)
FS (Foot Slope)							ABK (Angular Blocky)
H (Head Slope)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15			PL (Platy)
L (Linear Slope)		SiCL (Silty Clay Loam)					PR (Prismatic)
N (Nose Slope)		CL (Clay Loam)					
R (Ridge)		SCL (Sandy Clay Loam)			M	IST	WET
S (Shoulder Slope)		SiL (Silt Loam)					
T (Terrace)					VFR (V	Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Fri	)	SS (Slightly Sticky)
		SiC (Silty Clay)			FI (Firr		S (Sticky)
		C (Clay)			VFI (V	Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None	None	EFI (E	nely Firm)	NP (Non-plastic)
							SP (Slightly Plastic)
							P (Plastic)
							VP (Very Plastic)

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality

NOTES

HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - ord Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft^2

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

