Groundwater & Wastewater Services: Septic Project File & D

GWS File #:	10312B
WASPS App #:	10459
Primary ES assigned to project:	APRIL BUMGARNER
Secondary ES assigned to project:	
Project Type:	Repair
Site Evaluation Information: .1939(a)(1) - Topography and Landscape Position Recorded?	Yes
Site Evaluation Information: .1940(a-g) - Slope % Recorded?	Yes
Site Evaluation Information: .1939(a)(2) - Texture Class Recorded?	Yes
Site Evaluation Information: .1939(a)(2) - Structure Type Recorded?	Yes
Site Evaluation Information: .1939 (a)(2) - Consistence Recorded?	Yes
Site Evaluation Information: .1939(a)(2) - Mineralogy Recorded?	Yes
Site Evaluation Information: .1939(a)(3) - Soil Wetness Condition Recorded?	Yes
Site Evaluation Information: .1939(a)(4) - Soil Depth to Rock or Parent Material Recorded when Encountered?	Yes
Site Evaluation Information: .1939(a)(5) - Depth to Restrictive Horizons Recorded when Encountered?	Yes
Site Evaluation Information: .1939(a)(6) - Sufficient Available Space Recorded?	Yes
Site Evaluation Information: .1937(m) - Are the Profile Locations Shown?	Yes
Site Evaluation Information: .1939(a) - Are the S/PS Profiles in system & in repair area?	Yes
Site Evaluation Information: .1939(d), .1955, .1956, .1957 - LTAR	Yes
Improvement Permit/Construction Authorization: .1937(g), 130A-336(a) - Proposed System Type stated - Initial	N/A
Improvement Permit/Construction Authorization: .1945(b) - Proposed System Type stated - Repair	Yes
Improvement Permit/Construction Authorization: 130A-336(a)(3) - System location identifiable by setbacks - Initial	N/A
Improvement Permit/Construction Authorization: .1937(g), .1945(b) - System components shown - Initial	N/A
Information Permit/Construction Authorization: .1945(b) - Repair area shown	N/A
Improvement Permit/Construction Authorization: .1937(f)(g) - Does System design match facility, flow & WW characteristics?	Yes
Improvement Permit/Construction Authorization: .1937(f)(g) - Is System design consistent with soil/site conditions?	Yes
Improvement Permit/Construction Authorization: .1937(f)(g) - Is the System located in the approved area?	Yes
Improvement Permit/Construction Authorization: 130A-336(a) - Number of Bedrooms, employees, seats, etc. indicated?	Yes
Improvement Permit/Construction Authorization: .1937 (g) - Trench depth correct?	Yes
Improvement Permit/Construction Authorization: .1937(g) - Trench width correct?	Yes
Improvement Permit/Construction Authorization: .19379(g) - Trench length correct?	Yes
Improvement Permit/Construction Authorization: 130A-336(a)(1) - Proposed/existing well shown?	Yes

Improvement Permit/Construction Authorization: 130A-336(a)(1) - Property line lengths shown?	Yes
Improvement Permit/Construction Authorization: 130A-336(a) - Facility/appurtenance setbacks shown from fixed points?	Yes
Corrections/modifications needed?	No
Comments:	
IA issued date:	
OP Issued date:	6/20/2019
Review performed by:	H. RAY
Date performed:	12/13/2019

Created at 12/13/2019 12:50 PM by Ray, Heather A
Last modified at 12/13/2019 12:50 PM by Ray, Heather A

Close

10312B
10459

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 ○ MAJOR REPAIR ○ ABANDONMENT

3. **JOB LOCATION INFORMATION:**
TAX PARCEL NUMBER: 19946178
STREET ADDRESS: 14120 Pine Harbor Rd
CITY: Charlotte
STATE: NC ZIP: 28278
SUBDIVISION NAME: None
LOT #: _____ LOT SIZE (acres): 1.00
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: 1,300
NUMBER OF BEDROOMS: 2
NUMBER OF OCCUPANTS: 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: _____ 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 _____

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:** ____ ____ ____ ____ ____

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	◉ YES ○ NO	JURISDICTIONAL WETLANDS	○ YES ◉ NO
WELLS, SPRINGS, OR WATER LINES	◉ YES ○ NO	APPROVAL REQUIRED BY ANY OTHER PUBLIC AGENCY	○ YES ◉ NO
EASEMENTS OR RIGHT-OF-WAYS	◉ YES ○ NO	WASTEWATER OTHER THAN DOMESTIC SEWAGE	○ YES ◉ NO
CHEMICAL/PETROLEUM STORAGE TANKS	◉ YES ○ NO	KNOWN UNDERGROUND CONTAMINATION	○ YES ● NO
WASTE STORAGE	○ YES ◉ NO	GROUNDWATER USE RESTRICTIONS/VARIANCES	○ YES ◉ NO

10. **WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?** _____ ☑ UNKNOWN

11. **WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?** _____ ☑ N/A

12. **PROPERTY OWNER:**
NAME: Allen L Trout
ADDRESS: 223 Point au Roche Rd
CITY: Plattsburgh
STATE: NY ZIP: 12901
WORK PHONE: _____
MOBILE PHONE: (518) 593-7501
FAX: _____
E-MAIL: feelingr8@live.com
Allentrout@live.com

13. **OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:**
NAME: _____
ADDRESS: _____
CITY: _____
STATE: _____ ZIP: _____
WORK PHONE: _____
MOBILE PHONE: _____
FAX: _____
E-MAIL: _____

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208 OFFICE: (980) 314-1680, 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.

ALT (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.

_____ (initial here for well applications)

16. 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.

_____ 6/3/19

Property Owner's or Owner's Legal Representative Signature — 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 8000, Charlotte, NC 28208 OFFICE: (980) 314-1680, FAX: 704-336-6894

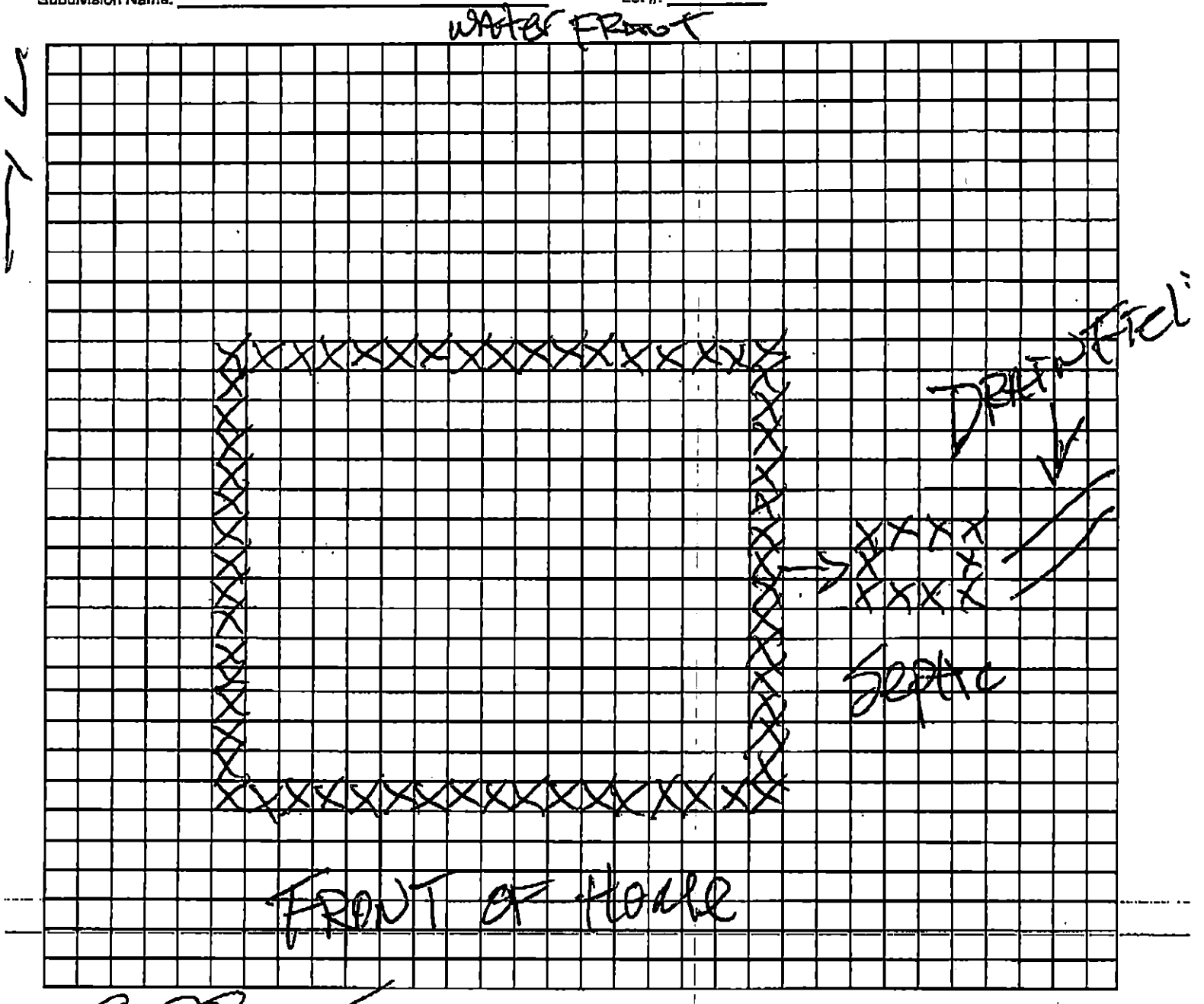
File #: _____

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: 14120 Pine Harbor Rd Tax Parcel #: 9946178

Subdivision Name: None Lot #: _____

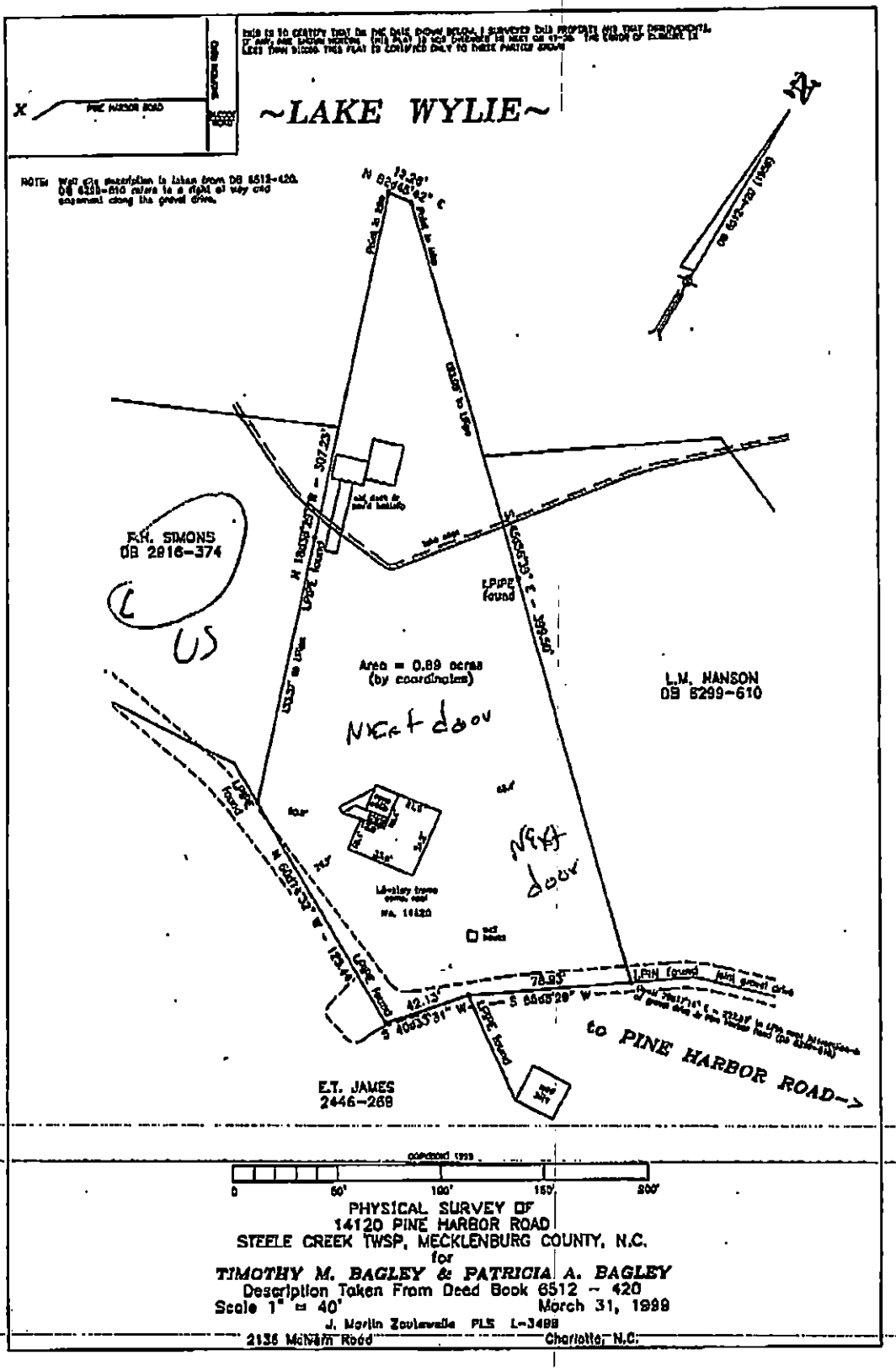


Property Owner's or Owner's Legal Representative Signature

6/3/19
Date

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Dr. Suite 6000, Charlotte, NC 28208, OFFICE: (980) 314-1680, FAX: 704-336-6894

Revised on: 03/27/19



PHYSICAL SURVEY OF
14120 PINE HARBOR ROAD
STEELE CREEK TWSP, MECKLENBURG COUNTY, N.C.
for
TIMOTHY M. BAGLEY & PATRICIA A. BAGLEY
Description Taken From Deed Book 6512 - 420
Scale 1" = 40' March 31, 1999
J. Martin Zoulewalle PLS L-3498
2135 McMinn Road Charlotte, N.C.

EXHIBIT A

BEGINNING at an iron pin marking the southeastern corner of the property described herein, and the southwestern corner of property owned by L.M. Hanson (now or formerly) as described in a deed recorded in Book 6299 at page 610 in the Mecklenburg Public Registry, which point is also located in the center of a gravel drive that runs along the southern property line of the Hanson property and the property described herein, and which point is located in the northern property line of property owned by E.T. Janes (now or formerly) as described in a deed recorded in Book 2448 at page 259 in the Mecklenburg Public Registry, and thence with the northern property lines of the Janes property, three courses and distances: (1). S. 55-08-29 W. 76.93 feet to an iron pipe, and (2). S. 40-33-31 W. 42.13 feet to an iron pipe; and (3). N. 60-14-32 W. 125.40 feet to an iron pipe, said pipe marking the southeastern corner of property owned by F.H. Simons (now or formerly) as described in a deed recorded in Book 2916 at page 374 in the Mecklenburg public Registry; thence with the eastern property line of the Simons property, N. 18-38-29 W. 307.23 feet to a point in Lake Wylie; thence N. 82-48-42 E. 13.26 feet to a point in said Lake; thence S. 45-56-39 E. 399.50 feet, which line is also the western property line of the Hanson property as referenced hereinabove, to an iron pin which is the point and place of Beginning, all according to a survey by J. Martin Zoutewelle, N.C. Registered Land Surveyor, dated March 31, 1999, reference to which is hereby made for a more particular description.

This conveyance also includes the right-of-way and easement into and over the gravel roadway leading to the state maintained terminus of Pine Harbor Road (State Road 1113) in common with others entitled to use thereof.

Property of Allen L. Trout
14120 Pine Harbor Road

EXHIBIT B

BEGINNING at an old iron in a ten foot wide gravel drive, near the intersection of said driveway with Pine Harbor Road (State Road 1113) thence with the line of Riverside Joint venture (Deed Book 5007, Page 268) North 30-21-10 West 16.11 feet to an old iron; thence North 44-19-50 West 183.00 feet to a point in Lake Wylie; thence North 84-14-00 West 79.81 feet to a point; thence North 66-22-30 West 114.11 feet to a point: thence South 55-10-00 West 115.00 feet to a point in the boundary of F & R Coal and Oil Company; thence South 45-56-40 East 269.44 feet to an old iron in the center of the gravel roadway; thence North 55-06-50 East 31.22 feet to an old iron; thence North 73-15-50 East 100 feet to an old iron; thence North 85-48-50 East 100.00 feet to the point of BEGINNING and containing 1.194 acres according to a plat of survey prepared by Hugh E. White, Registered Land Surveyor, dated June 1, 1990.

Conveyance includes the right of way and easement into and over the gravel roadway leading to the state maintained terminus of Pine Harbor Road (State Road 1113) in common with others entitled to use thereof.

Property of Lucille M. Hanson and husband Michael W. Odegaard

14114 Pine Harbor Road

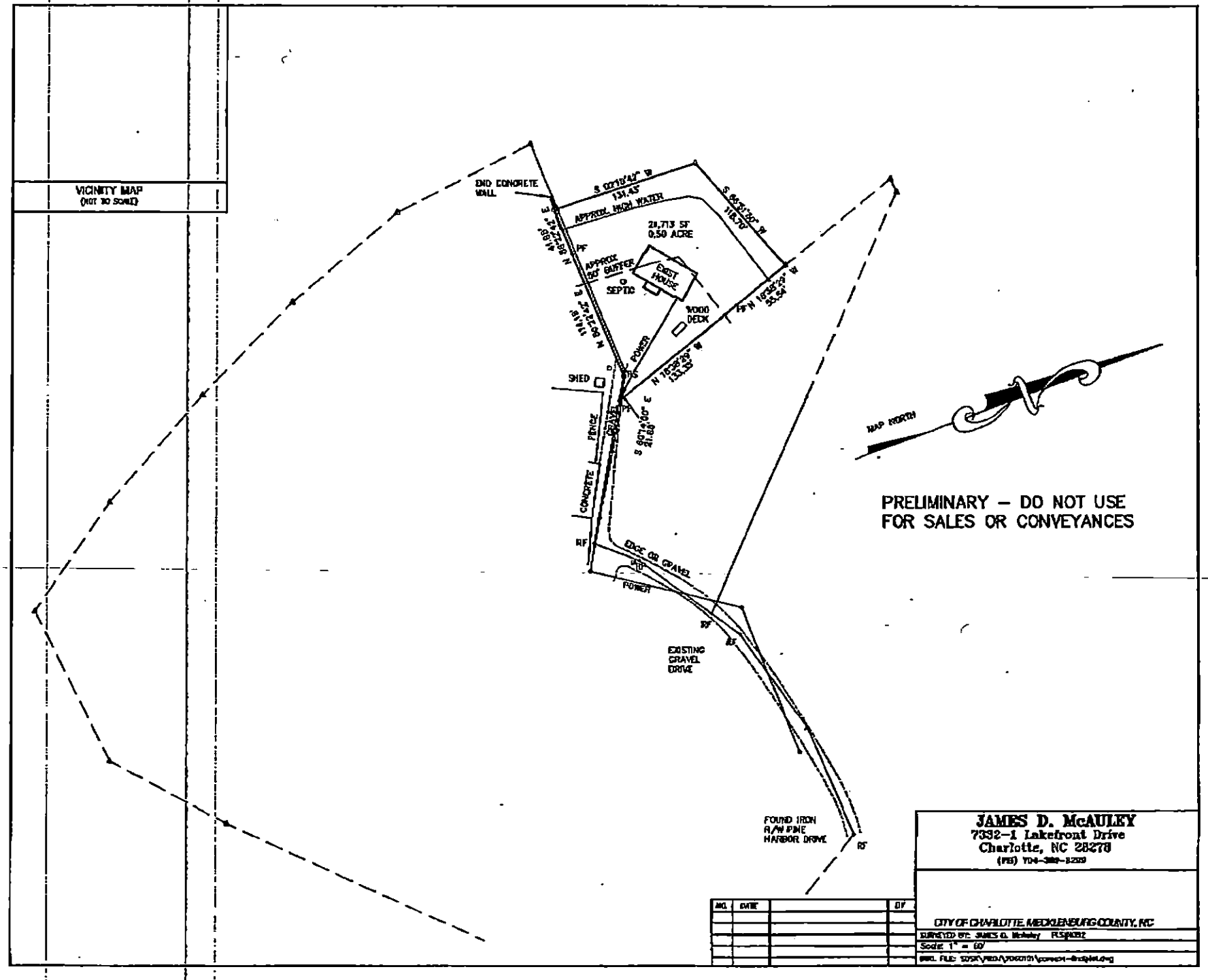
EXHIBIT C

Being all of the certain tract or parcel of land located in Steele Creek Township, Mecklenburg County, North Carolina and more particularly described as follows:

BEGINNING at a point, which is the following courses and distances from the BEGINNING point of Tract #2, as described in that certain Deed to R.S. Smith and wife, Evelyn L. Smith, which Deed is duly recorded in the Mecklenburg Public Registry in Book 2102 at Page 393, reference to which is hereby expressly made; (1) S. 30-21-10 E. 16.11' to an iron, (2) then S. 85-48-50 W. 100' to an iron, (3) thence S. 73-15-50 W. 100' to an iron, (4) thence S. 55-06-50 W. 110.37' to an iron, (5) thence S. 40-09-50 W. 42.14' to an iron, (6) thence N. 60-10-40 W. 148.78' to point at the Southwesterly corner of J.R. King property, which point is the BEGINNING point for this conveyance; thence from said BEGINNING point N. 60-10-40 W. 21.88 feet to an iron; thence running S. 86-26 W. 156.07 feet to a point; thence N. 2-08 E. 131.43' to a point; thence N. 66-59-30 E. 118.70' to a point on the westerly line of the J. R. King property; thence with the Westerly line of the J. R. King property S. 18-42-50 E. 188.89' to the point and place of BEGINNING; containing .50 acres, more or less, and all as shown on map and survey by J.W. Spratt, County Surveyor, dated 1959, reference to which is hereby expressly made, and reference is also hereby expressly made to that certain map recorded in the Office of the Register of Deeds for Mecklenburg County, North Carolina, in Map Book 8, Page 191.

14126 Pine Harbor Road

SUBJECT to the right of way and easment into and over the gravel roadway leading to the state maintained terminus of Pine Harbor Road (State Road 1113) in common with others entitled to use thereof. as recorded in Book _____, Page _____ in the Mecklenburg County Registry



06/04/2019 07:20 ISS DEPT @ CVPH (FAX) P.010/011

AUTRY'S

8918 BYRUM DRIVE CHARLOTTE, N.C. 28217
PHONE: 704-357-1250 **** FAX: 704-357-9727

On-Site Waste System Inspection Report

** this report based on water usage at time of inspection**

Customer: Re Max Metro Realty Date: 5-18-05

Address: 14120 Pine Harbor road Charlotte, N.C. 28278

System Age: 50yrs Occupied ( ) yes (✓) no Length of time vacant: 4 MONTHS

Number of bedrooms: 3 Last pump date: UNKNOWN Pumped today (✓) yes ( ) no

Type of System:
(✓) Septic Tank
( ) Septic Tank with Pump
( ) Other

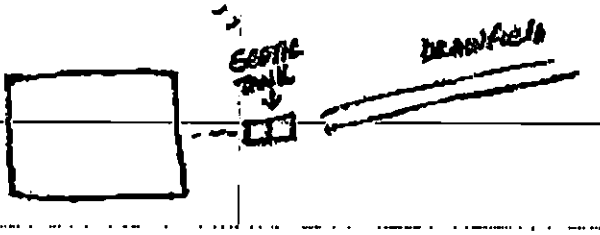
Type of Tank:
( ) Steel
(✓) Concrete
( ) Fiberglass
Tank Size: 1500 gallons

Liquid level in tank is: ( ) above normal (✓) normal ( ) below normal
Maintenance appears: (✓) good ( ) fair ( ) poor
Sludge depth: 24" Depth of tank lid: 24"

Item:	Condition:	Comments:
Tank	(✓) acceptable ( ) unacceptable	
Holding Tank	( ) acceptable ( ) unacceptable (✓) not applicable	
Pump	( ) acceptable ( ) unacceptable (✓) not applicable	
Leachfield	( ) acceptable ( ) unacceptable	LINES ARE DRY - DUE MOST LIKELY TO VACANCY

Recommended Repairs:

Sketch of location of system:



front of Home

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: Allen Trout _____ APPLICATION DATE _____
ADDRESS: 14120 Pine Harbor Rd _____ DATE EVALUATED: 6-18-19
PROPOSED FACILITY: Residence PROPOSED DESIGN FLOW (.1949): 240 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) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	L 10%	0-6	SCL WSBK	Fr SS SP	N/A	48	NA	NA	.3 PS
		6-48"	Cl SBK	Fr SS SP					
2									
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		PS
System Type(s)		IIa
Site LTAR		.3

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: April Bumgarner
OTHER(S) PRESENT: Steve Autry

COMMENTS: _____

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)			EXP (Expansive)	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)			MOIST	WET
S (Shoulder Slope)		SiL (Silt Loam)				
T (Terrace)					VFR (Very Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Friable)	SS (Slightly Sticky)
		SiC (Silty Clay)			FI (Firm)	S (Sticky)
		C (Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None	None	EFI (Extremely 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.

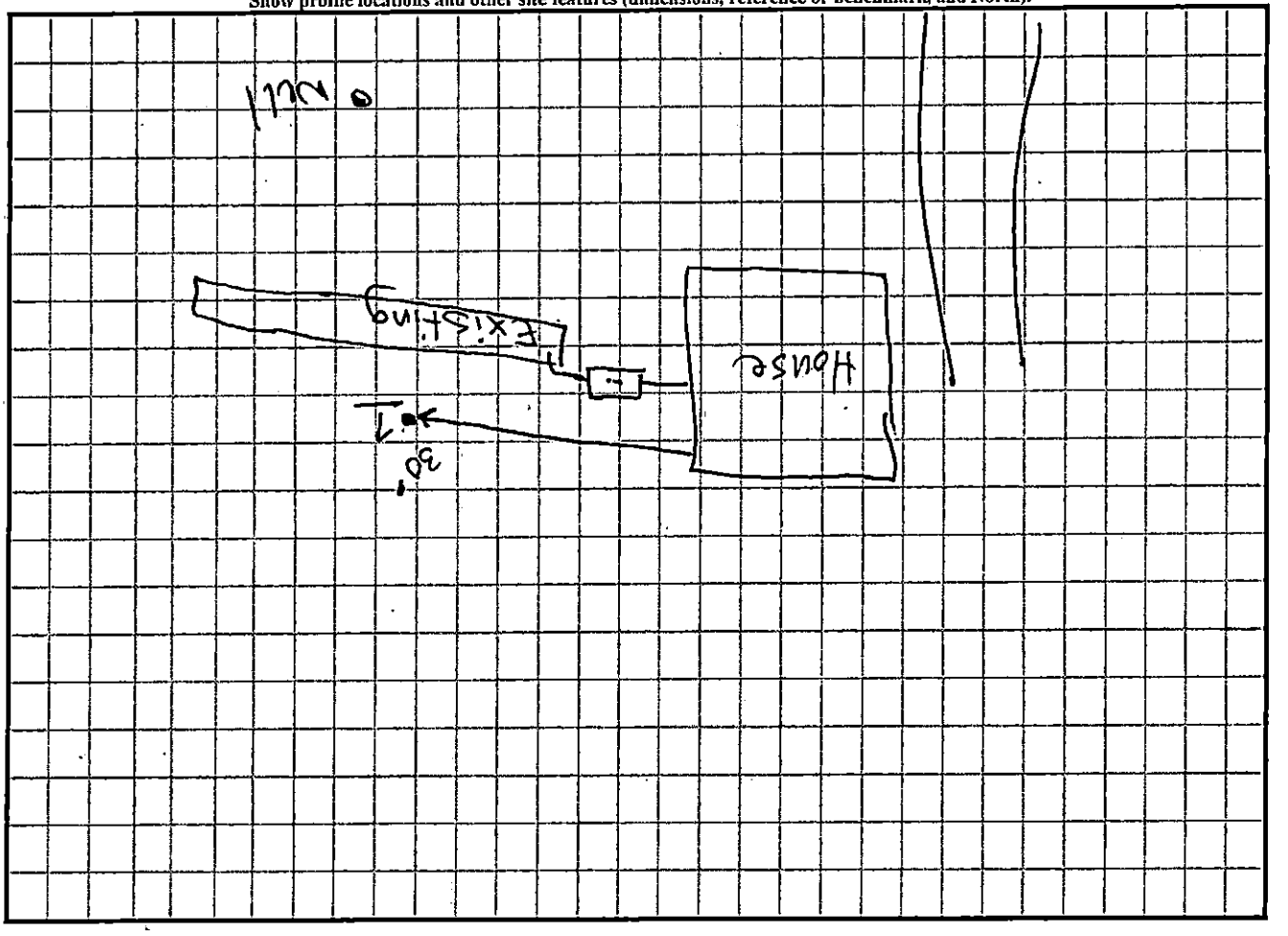
NOTES

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 - record 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 North).



Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000 Charlotte, NC 28208
Phone: (980) 314-1660 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT/CONSTRUCTION AUTHORIZATION for REPAIRING an ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 10312B Permit #: 10459 Tax Parcel #: 197-461-78

Property Owner: Allen Trout

Job Location Address: 14120 Pine Harbor Rd

City: Charlotte State: NC Zip Code: 28278

Improvement Permit Issuance Date: NA **Construction Authorization Issuance Date:** 6-19-19

Permission is hereby given to **repair** an on-site wastewater treatment & and disposal system, with subsurface soil absorption and effluent discharge, as specified herein at the described location. This approval is granted based upon the application information submitted to our office. All work shall be completed on or before 6-20. The system shall meet all of the construction requirements of 15A NCAC 18A. 1900 which are in effect on the date of granting this approval. An **Operation Permit** must be obtained from the Mecklenburg County Health Department before any system can be covered up or placed into service. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed will operate properly, or relieve any person now of hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

Permitted Design Flow: 240 GPD Site LTAR: .3 GPD/ft²

Liquid Capacity of Septic Tank: Existing gallons Liquid Capacity of Dosing Tank _____ gallons

Drainfield Design ☒ N/A

Trench Depth: _____ inches

Trench Width: _____ feet

Line Spacing: _____ feet (O.C.)

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Distribution Device: _____

Bed Design *(For Repair Installations ONLY.)* ☐ N/A

Bed Depth: 36 inches

Bed Width: 9 feet

Total line length: 50 feet

# of Lines: 3 @ 50 feet

Depth of Media: 12 inches (Type) 2B / Reduction

Distribution Device: D Box / Entrapo

Water Supply Source

☐ Municipal ☒ Private Well ☐ Community Well

☐ Other _____

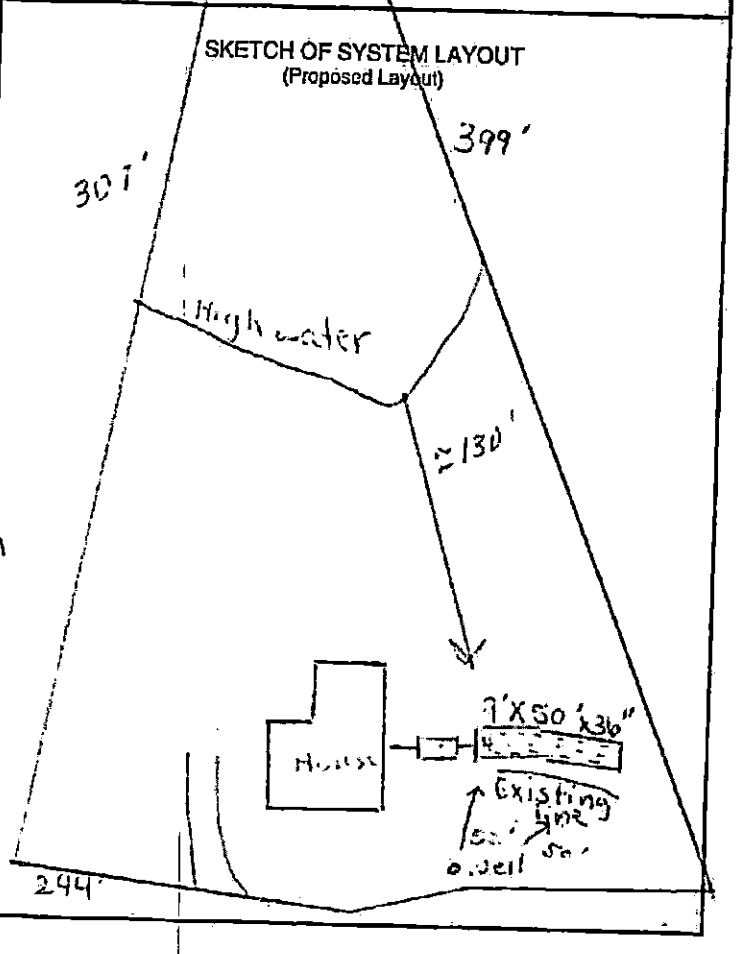
Minimum System Setbacks

Distance from Building Foundation: 10 feet

Distance from Property Line: 5 feet

Distance from Water Supply Source: 50 feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)



Comments: System Classification & Type: II

Authorized Agent: April Bumgarner Signature: April Bumgarner

Owner Signature: _____ Date: 6/19/19

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000 Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

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Permitted Design Flow: 240 GPD Site LTAR: .3 GPD/ft²

Liquid Capacity of Septic Tank: Existing gallons Liquid Capacity of Dosing Tank: _____ gallons

Drainfield Design ☒ N/A

Trench Depth: _____ inches

Trench Width: _____ feet

Line Spacing: _____ feet (O.C.)

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Distribution Device: _____

Bed Design *(For Repair Installations ONLY.)* ☐ N/A

Bed Depth: 36 inches

Bed Width: 9 feet

Total line length: 50 feet

# of Lines: 3 @ 50 feet

Depth of Media: 12 inches (Type) 25% Reduction

Distribution Device: D-Box / Endcaps

Water Supply Source

☐ Municipal ☒ Private Well ☐ Community Well

☐ Other _____

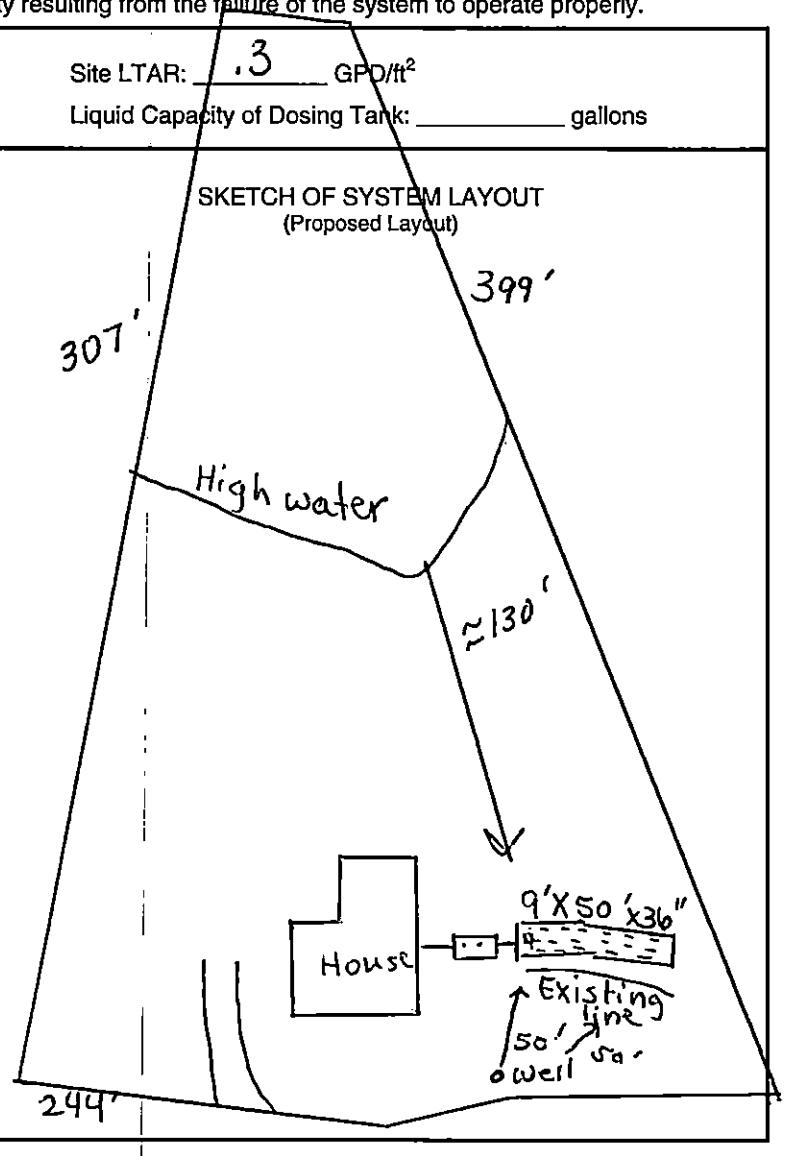
Minimum System Setbacks

Distance from Building Foundation: 10' feet

Distance from Property Line: 5' feet

Distance from Water Supply Source: 50' feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)



Comments: System Classification & Type: IIa

Authorized Agent: April Bumgarner Signature: April Bumgarner

Owner Signature: _____ Date: _____

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000 Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

Septic System Pre-Construction Meeting Checklist

File # 103128 App# 10459 Tax Parcel# 199-461-78

Property Owner: Allen Trout

Job Location Address: 14120 Pine Harbor Rd

City: Charlotte State: NC Zip Code: 28278

1. Does System design match facility, flow & wastewater characteristics?

   ☑ YES ☐ NO

   Comments: Repair no walk through of house

2. Is there sufficient available space for the septic systems initial and repair areas?

   ☑ YES ☐ NO

   Comments:

3. Can the septic system be installed per the permit conditions and drawing on file?

   ☑ YES ☐ NO

   Comments:

*If "NO" is checked for any of the above the existing permit may need to be revoked.

Permission is hereby given to ☐ install ☐ alter ☑ repair an on-site wastewater treatment & and disposal system, with subsurface soil absorption and effluent discharge meeting all of the construction requirements of 15A NCAC 18A .1900 which are in effect on the date of granting this approval. System shall not be installed while soils are in wet condition.

April Bumgarner
Authorized Agent

6-20-19
Date

Steve Autry
Others Present

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

OPERATION PERMIT for an ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 10312B Permit #: 10459 Tax Parcel #: 199-461-78

Property Owner: Allen Trout

Job Location Address: 14120 Pine Harbor Rd

City: Charlotte State: NC Zip Code: 28278

Operation Permit Issuance Date: 6/20/19 Contractor Name: Steve Autry

Permitted Design Flow: 240 GPD Liquid Capacity of Dosing Tank: N/A gallons

Liquid Capacity of Septic Tank: Existing gallons Tank Manufacture Existing Effluent Pump Model: N/A

Drainfield Installation ☒ N/A

Trench Depth: _____ inches

Trench Width: _____ feet

Line Spacing: _____ feet (O.C.)

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Depth of Cover: _____ inches

Distribution Device: _____

Bed Installation *(For Repair Installations ONLY.)* ☐ N/A

Bed Depth: 30 inches

Bed Width: 9 feet

Total line length: 50 feet

# of Lines: 3 @ 50 feet

Depth of Media: 12 inches (Type) IQ4

Depth of Cover: 18 inches

Distribution Device: End Caps

Water Supply Source

☐ Municipal ☒ Private Well ☐ Community Well

☐ Other _____

System Installation Setbacks

Distance from Building Foundation: 10' feet

Distance from Property Line: 10' feet

Distance from Water Supply Source: 50' feet

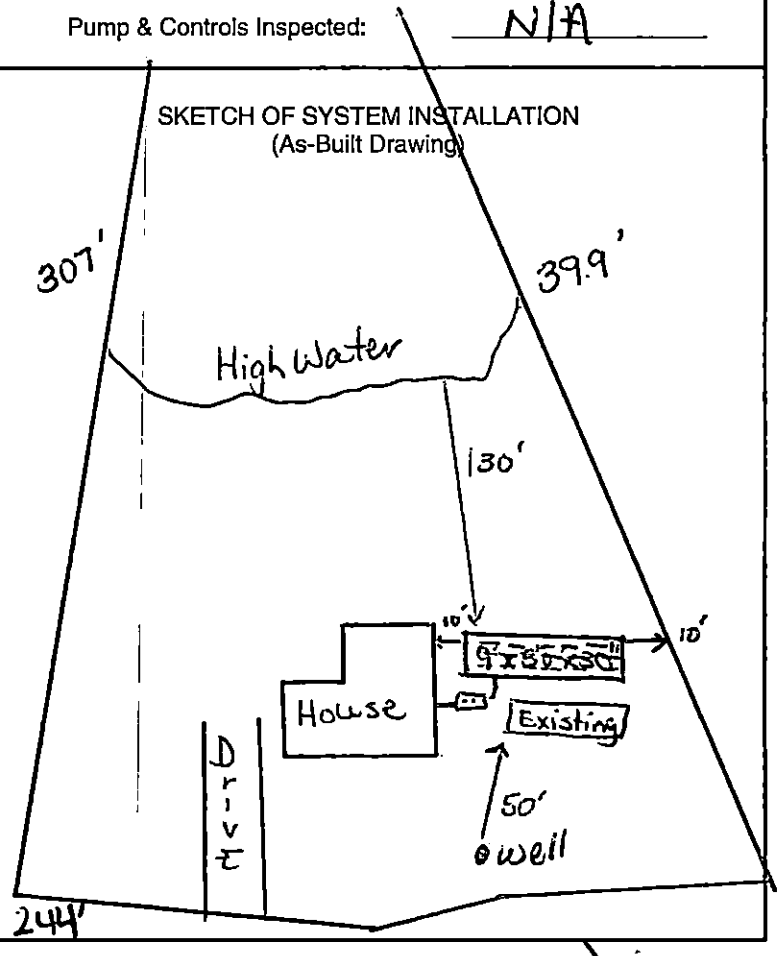
Inspection Dates

Tank(s) Inspected: N/A

Excavation Inspected: 6/20/19

Pump & Controls Inspected: N/A

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)



The undersigned has inspected the Septic Tank System described above, and certifies it has been ☐ installed ☐ altered ☑ repaired ☐ as detailed in the plot above ☐ in accordance with the permit issued and meets the provisions of 15A NCAC 18A. 1900, "Laws and Rules for Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. The issuance of this Operation Permit does not in any way guarantee that the system will operate properly or relieve any person now or hereafter owning, controlling, or using such system from any liability resulting from the failure of the system to operate properly. This document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 15A NCAC 18A. 1900 in addition to those listed below under "Comments." This document shall be null and void if any information contained in the application is untrue or if any additions are made to the property which would increase the requirements for said system.

Notice: Disturbance of the designated repair area may result in the Suspension or Revocation of this permit.

Comments: System Classification & Type: IIa | IQ4 | g | NA | NA

DENR Authorized Agent: April Bumgarner Signature: April Bumgarner

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

OPERATION PERMIT for an
ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 10312B Permit #: 10459 Tax Parcel #: 199-461-78

Property Owner: Allen Trout

Job Location Address: 14120 Pine Harbor Rd

City: Charlotte State: NC Zip Code: 28270

OPERATION PERMIT CONDITIONS:

I. Performance: System shall perform in accordance with 15A NCAC 18A .1961.

II. Monitoring: System shall be monitored as required by 15A NCAC 18A .1961.

III. Maintenance: Ground absorption sewage treatment and disposal systems shall be checked, and the contents of the septic tank removed, periodically from all compartments, to ensure proper operation of the system. The contents shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.

IV. Operation: System shall be operated in accordance with 15A NCAC 18A .1961.

System Classification: IIa

*Operation Permits for Type V and VI systems expire five (5) years from the date of issuance (in accordance with Table V(a)). The system owner must contact GWS six (6) months prior to expiration for permit renewal.

Subsurface system operator required: Yes ☐ No ☒

☐ This type of system requires the system owner to maintain a contract with a certified operator to perform system inspection, maintenance, and reporting as required in 15A NCAC 18A .1961. and Table V(a). The system owner is responsible for all fees associated with these services.

☒ System does not require inspection by GWS on a routine frequency.

☐ System requires inspection by GWS once every five (5) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every three (3) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every twelve (12) months. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every six (6) months. The system owner is responsible for all fees associated with the inspection.

V. Other:

DENR Authorized Agent: April Bumgarner Date: 6-20-19

Signature: April Bumgarner