Septic File # 13564

pd $100 3/16/11 Jam

USE EXISTING SYSTEM

MECKLENBURG COUNTY
HEALTH DEPARTMENT

APPLICATION FOR APPROVAL TO USE AN EXISTING
ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM / WATER SUPPLY WELL

APPLICATION TYPE: ☒ SEPTIC ONLY ○ WELL ONLY ○ SEPTIC & WELL
☒ ADDITION OR RENOVATION WITH OCCUPANCY INCREASE ○ EXCHANGE MOBILE HOME (SAME # BEDROOMS)
○ ADDITION OR RENOVATION WITH NO OCCUPANCY INCREASE ○ COMMERCIAL OR INDUSTRIAL

PERSON FILING APPLICATION:
NAME: ~~Jay Everette~~ Neal Crites
ADDRESS: ~~1916 Davis Rd.~~ 21318 Ade Quarry
CITY: ~~Davidson~~ Cornelius. NC
STATE: ~~NC~~ ZIP: ~~28036~~ 28031
PHONE: ~~704 904 3535~~ 704-840-4004
ALTERNATE PHONE:
E-MAIL: critesrealestate@aol.com

PROPERTY OWNER: ☐ SAME AS PERSON FILING APPLICATION
NAME: Jay Everette
ADDRESS: 1916 Davis Rd.
CITY: Davidson
STATE: NC ZIP: 28036
PHONE: 704-904-3535
ALTERNATE PHONE:
E-MAIL: jayeverette@aol.com

JOB LOCATION INFORMATION
TAX PARCEL #: 01314114
STREET ADDRESS: 1916 Davis Rd.
CITY: Davidson
STATE: NC ZIP: 28036

SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #:

WATER SUPPLY:
○ MUNICIPAL ☒ PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER

RESIDENTIAL PROPERTY TYPE: ○ N/A
☒ HOUSE ○ MODULAR HOME ○ MULTIPLE FAMILY
○ SINGLE MOBILE HOME ○ DOUBLE WIDE
○ OTHER

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 1

COMMERCIAL / INDUSTRIAL PROPERTY TYPE: ☐ N/A
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:
INDUSTRIAL WASTES? ○ YES ○ NO
UNDERGROUND STORAGE TANKS? ○ YES ○ NO

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:
☒ BEDROOM ☒ BATHROOM ☐ KITCHEN ☐ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☐ SUNROOM ☐ PORCH ☐ DECK ☐ OTHER

ADDITION/RENOVATION TYPE DETACHED FROM EXISTING STRUCTURE:
☐ DETACHED GARAGE ☐ DETACHED GARAGE WITH PLUMBING ☐ POOL HOUSE ☐ SHOP ☐ BARN
☐ STORAGE SHED ☐ DETACHED PORCH / DECK ☐ OTHER

*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 the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Owner's/Agent's Signature — Date: 3/23/11

A PROPOSED PLOT PLAN (see page 2) is required to be submitted with each application.

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

Revised on: 01/03/11

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. AJE (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.

A Jay Ence — 03/16/2011

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: $ 100 LUESA North DATE FEE RECEIVED: 3/16/11

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

APPLICATION PROCESSED BY: JC

GWS FILE NUMBER ASSIGNED: 13566

APPLICATION ID NUMBER ASSIGNED: 4980

COMMENTS:

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

Septic File #13566

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: 314114
STREET ADDRESS: 1916 Davis Road
CITY: Davidson
STATE: NC ZIP: 28036
SUBDIVISION NAME:
LOT #: _____ LOT SIZE (acres): 3.08
TOWNSHIP:
☒ MECKLENBURG ○ CORNELIUS ○ HUNTERSVILLE
☒ DAVIDSON (ETF) ○ CHARLOTTE ○ PINEVILLE
○ MATTHEWS ○ MINT HILL

4. **BUILDING INFORMATION:**
BUILDING TYPE:
○ SINGLE MOBILE HOME ○ MODULAR HOME
○ DOUBLE WIDE ○ MULTIPLE FAMILY
☒ HOUSE ○ OTHER _____
HEATED SQUARE FOOTAGE: 2277
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 1
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: 1 NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: 3

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
#13566 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?** 1978 ☐ UNKNOWN

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

12. **PROPERTY OWNER:**
NAME: Jay Everette
ADDRESS: 1916 Davis Rd.
CITY: Davidson
STATE: NC ZIP: 28036
WORK PHONE:
MOBILE PHONE: 704-904-3535
FAX:
E-MAIL: jayeverettc@aol.com

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

* APPLICATION IS TO ACCOMODATE PROPOSED 4TH BEDROOM ADDITION.

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

Revised on: 12/15/10

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_____ (Initial here for well applications)

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A Jay Sauer
Property Owner's or Owner's Legal Representative Signature

03/16/2011
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: O.K. to Use Existing System for a bedroom & Bathroom ADDITION. The ORIGINAL SEPTIC SYSTEM WAS INSTALLED WITH 620' of DRAIN FIELD. THIS WILL ACCOMODATE AN ADDED BEDROOM & BATHROOM ADDITION.

Jimmy Mullis, R.S.
3/23/11

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
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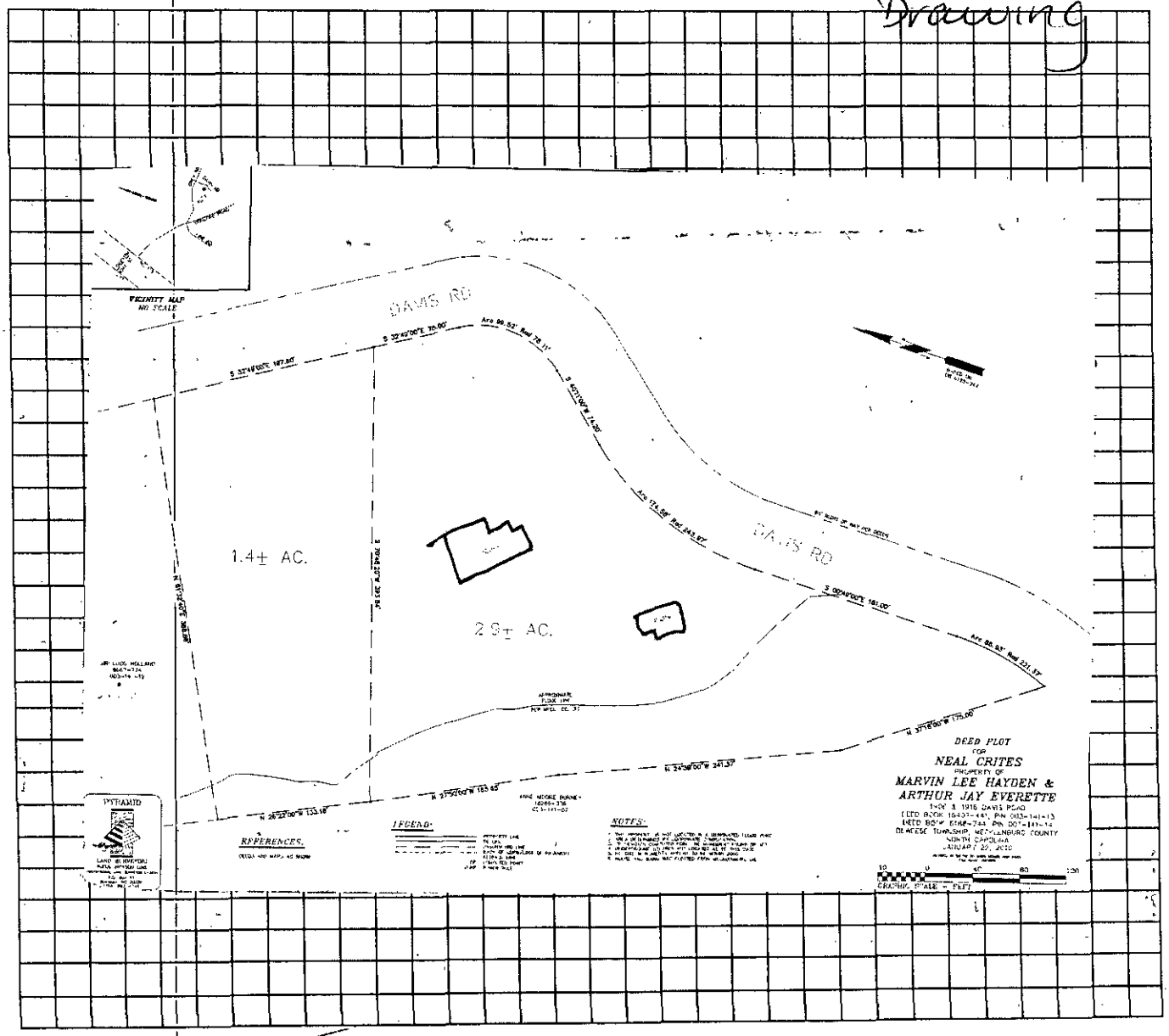
File #: _____

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: 1916 Davis Rd Tax Parcel #: 314114

Subdivision Name: Davidson NC 28036 Lot #: _____ * See attached Drawing

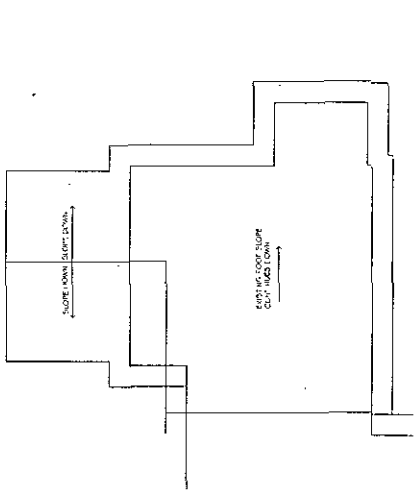


Property Owner's or Owner's Legal Representative Signature

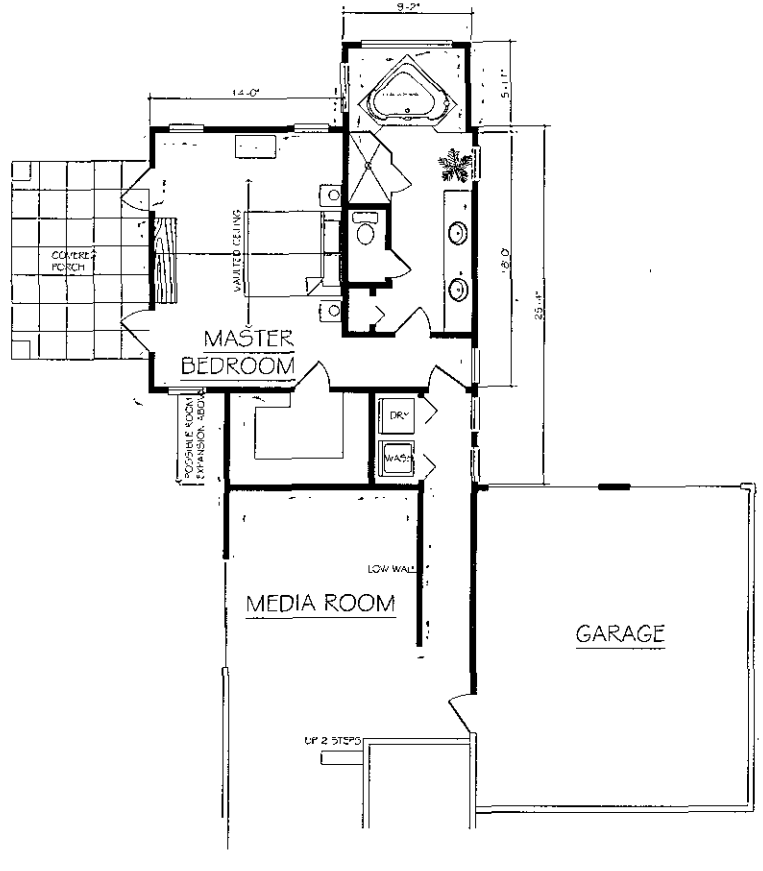
03/16/2011
Date

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
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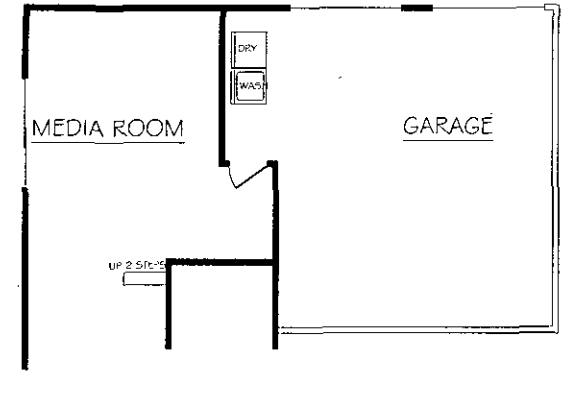
Brian Burnam
NC Registered
Architect
LEED AP
2009 Davis Road
Davidson, NC 28036
704 918 7546
bburnam@bellsouth.net



3 A102 ROOF PLAN
SCALE: 3/16" = 1'



2 A102 MASTER BEDROOM STUDY A
SCALE: 1/4" = 1'



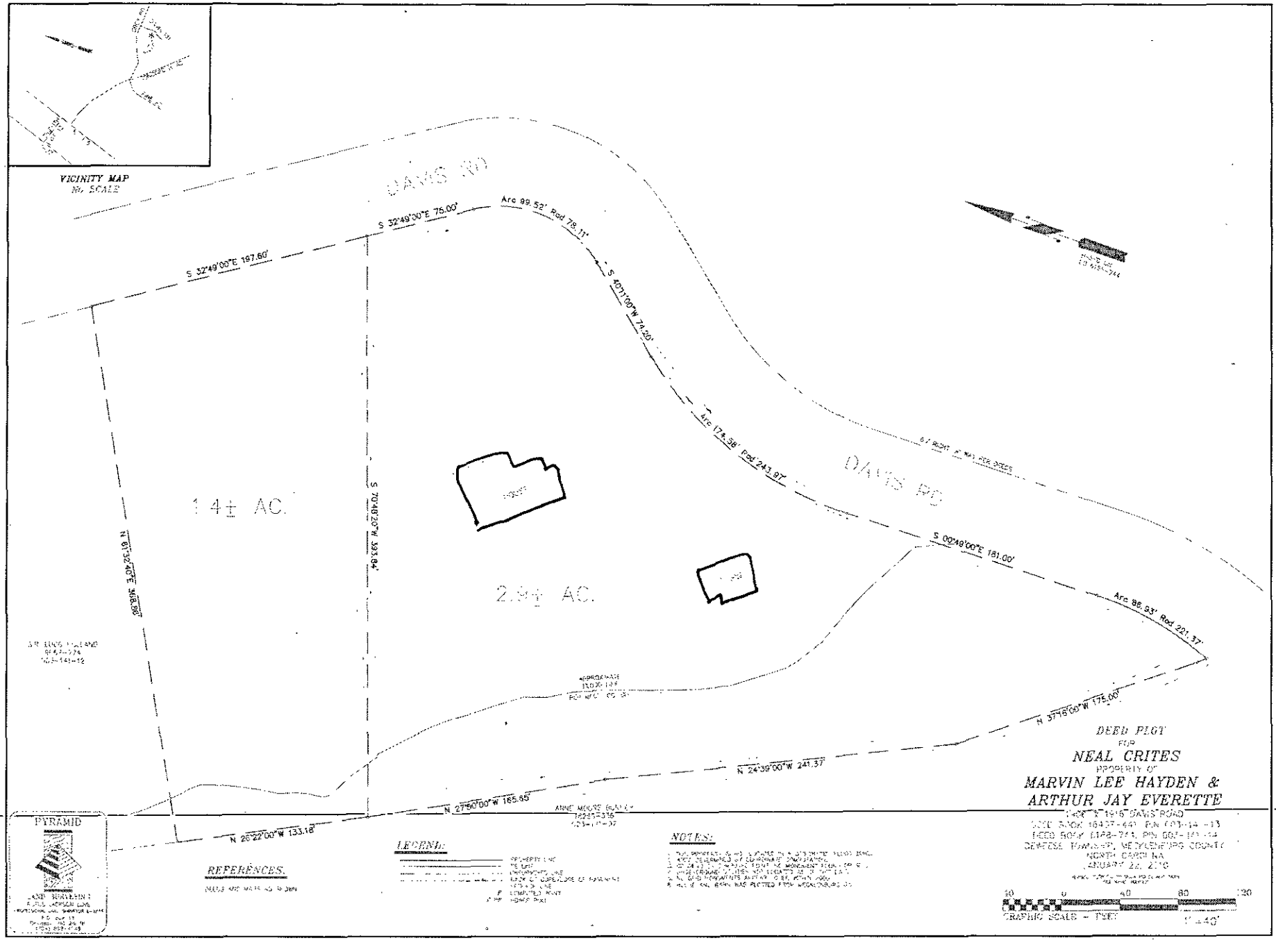
1 A102 EXISTING FLOOR PLAN
SCALE: 1/4" = 1'

drawing title.

Existing & New Floor Plan

sheet number.

A-102


VICINITY MAP
NO SCALE
DAVIS RD
S 32°49'30"E 75.00'
Arc 99.52' Rad 78.11'
S 32°49'00"E 187.60'
S 40°11'00"W 74.20'
Arc 174.38' Rad 243.97'
DAVIS RD
1.4± AC.
2.3± AC.
S 70°48'20"W 393.84'
N 19°26'40"E 368.80'
S 00°48'00"E 181.00'
Arc 86.93' Rad 221.37'
N 37°48'00"W 175.00'
N 24°39'00"W 241.37'
N 27°50'00"W 185.65'
N 26°22'00"W 133.18'
ANNE MOORE (N/A)
DEED BOOK 1425 PAGE 339
TAX PARCEL 037
PYRAMID
REFERENCES.
LEGEND:
NOTES:
DEED PLOT
FOR
NEAL CRITES
PROPERTY OF
MARVIN LEE HAYDEN &
ARTHUR JAY EVERETTE
1408 & 1416 DAVIS ROAD
DEED BOOK 1643T-641 P.I.N. 007-14 -13
DEED BOOK 1468-741 P.I.N. 007-14 -14
CENTERSE TOWNSHIP, MECKLENBURG COUNTY
NORTH CAROLINA
JANUARY 22, 2018
0 40 80 120
GRAPHIC SCALE - FEET
1" = 40'