Attn: Groundwater

72793
#9319

29 NOV '17 AM 10:17

MECKLENBURG COUNTY
HEALTH DEPARTMENT

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

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

PERSON FILING APPLICATION:
NAME: Eddie Biggers
ADDRESS: 15324 Beatties Ford Rd
CITY: Huntersville
STATE: NC ZIP: 28078
PHONE: 704 965-8116 (965-8116)
ALTERNATE PHONE: 704-309-2021 **
E-MAIL: wanda@lakeside LKN.com

JOB LOCATION INFORMATION
TAX PARCEL #: 01501167
STREET ADDRESS: 15324 Beatties Ford Rd
CITY: Huntersville
STATE: NC ZIP: 28078

PROPERTY OWNER: (X) SAME AS PERSON FILING APPLICATION
NAME: _____
ADDRESS: _____
CITY: _____
STATE: _____ ZIP: _____
PHONE: _____
ALTERNATE PHONE: _____
E-MAIL: _____

SUBDIVISION OR MOBILE HOME PARK NAME: _____
LOT #: _____

WATER SUPPLY:
(X) MUNICIPAL ( ) PRIVATE WELL ( ) PUBLIC WELL ( ) SHARED WELL ( ) OTHER _____

RESIDENTIAL PROPERTY TYPE: ( ) N/A
(X) HOUSE ( ) MODULAR HOME ( ) MULTIPLE FAMILY
( ) SINGLE MOBILE HOME ( ) DOUBLE WIDE
( ) OTHER _____

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 2

COMMERCIAL / INDUSTRIAL PROPERTY TYPE: (X) N/A
TYPE OF BUSINESS: _____
EMPLOYEES PER SHIFT: _____
OF SHIFTS: _____
INDUSTRIAL WASTES? ( ) YES (X) NO
UNDERGROUND STORAGE TANKS? ( ) YES (X) NO

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:
[ ] BEDROOM [ ] BATHROOM [ ] KITCHEN [ ] DINING ROOM [ ] LIVING ROOM [ ] DEN
[ ] GARAGE [ ] SUNROOM [ ] PORCH [ ] DECK [ ] OTHER NONE

ADDITION/RENOVATION TYPE DETACHED FROM EXISTING STRUCTURE:
[X] 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 11/29/17

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: 980-314-1680, FAX: 704-336-8894
Email: Wellreg@MecklenburgCountyNC.gov

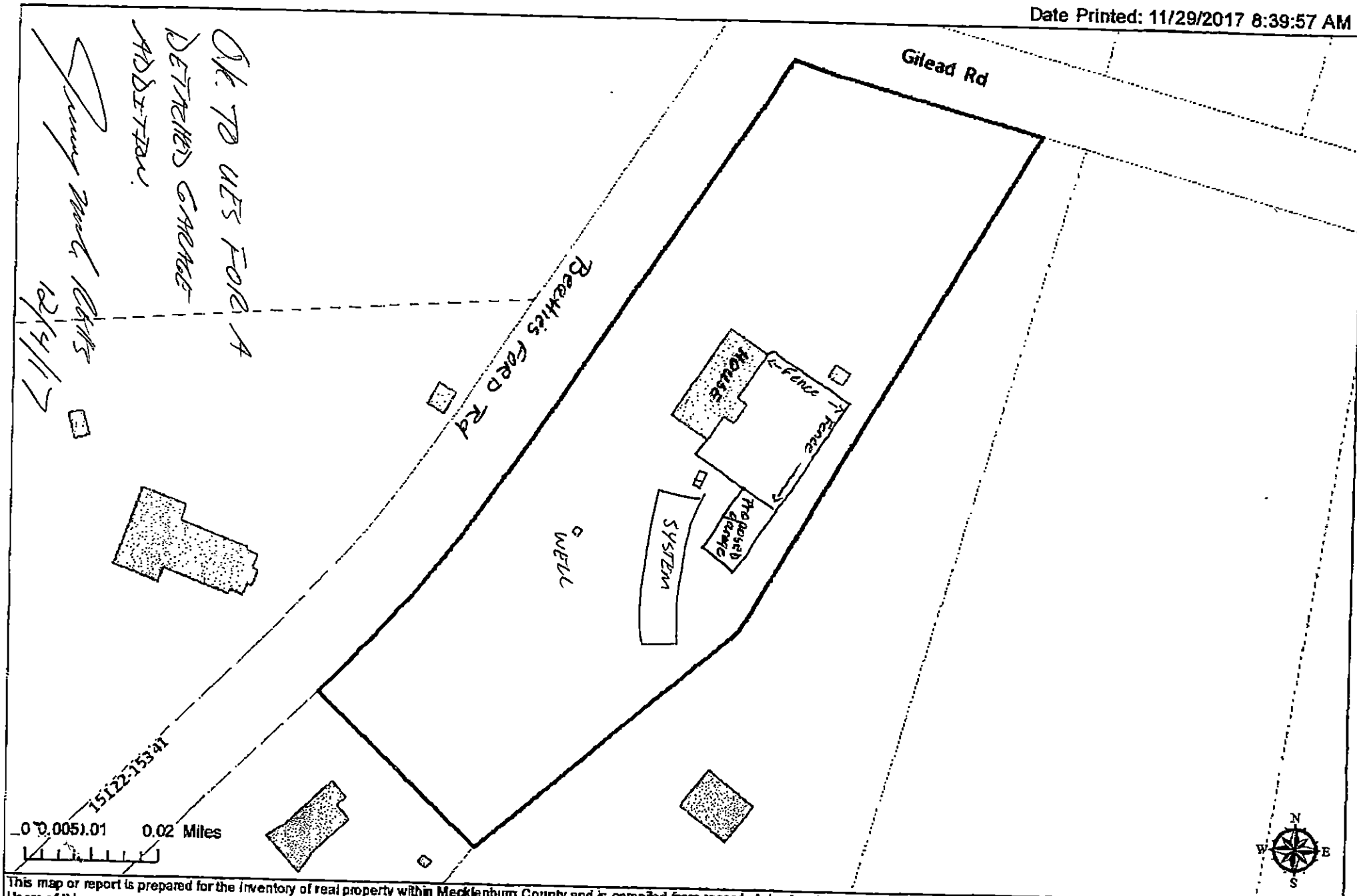
Revised on: 4/20/17

11/29/2017 10:03 FAX 704 892 3123 TERRY STAMP 001

Polaris 3G Map – Mecklenburg County, North Carolina

11/29/2017 10:03 FAX 704 892 3123 TERRY STAMP 002

Date Printed: 11/29/2017 8:39:57 AM



This map or report is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, planimetric maps, and other public records and data. Users of this map or report are hereby notified that the aforementioned public primary information sources should be consulted for verification. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.

Payment Receipt

Mecklenburg County POS

Environmental Health
700 N. Tryon Street
Charlotte, NC 28202
Phone: 704-336-5100

Enter Account # or Customer Name Here: WANDA STAMP

Bill To:

WANDA STAMP
17115 GRENACHE CT

Cornelius, NC 28031

Single Payment

Transaction Date: 11/29/2017 10:42 AM Pacific Time
Pay Method: VISA **********0109
Approval #: 017231
Trace Number: 798a6c29-8075-468b-8bc7-277a30ecc6b4
Amount: $100.00

Payment Amount: $100.00

Total: $100.00

Thank you for your payment.

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	11/29/17	**Amount:**	100.00
Receipt #:	108368	**Tendered:**	100.00
Check / Auth #:	VISA 017231	**Returned:**	0.00
Received By:	ABDUSAI		

Account Information

Account #: 200000
Contractor: STAMP, WANDA
Attn:
Address: 17115 GRENACHE CT
Address:
City/State/Zip: CORNELIUS, NC 28031

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	Use Existing System 15234 BEATTIES FORD RD		1	100.00	100.00

----------Outstanding Balances----------

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance

Supervisor/Administrative Professional Checklist.

New Septic ☐ New Well ☐ Use Existing ☐ Alteration ☐ Modified Plot Plan ☐

New Septic Fees Paid

IP ($250.00) _____ Initials/Date

CA ($200.00) _____ Initials/Date

OP ($200.00) _____ Initials/Date

(CA and OP fees need to be paid before a building permit can be issued)

New Well Fee Paid: $550.00 _____ Initials/Date

Use Existing Fee Paid: $100.00 QS 11/29/17 Initials/Date

Alteration Fee Paid: $300.00 (Total) $200 (If use existing was paid)_____ Initials/Date

Modified Plot Plan Fee Paid: $100.00 _____ Initials/Date

Floor plans need to be submitted and reviewed before CA can be issued. ☐ Reviewed ☐ ____

This site is served by septic and well. Verify each is complete before final hold is released. ☐

Septic file completed. ☐ _____ Well file completed. ☐ _____

Send permit for signature. ☐ Signature received. ☐ _____

This septic system requires a certified operator contract before final hold is released. ☐

Certified operator contract is on file. ☐ _____