Supervisor/Administrative Professional Checklist

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

New Septic Fees Paid:

IP ($250.00) LWS 2/6/15 Initials/Date

CA ($200.00) LE 6/16/15 Initials/Date

OP ($200.00) LE 6/16/15 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 _____ 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 ☑ JAM 9/2/15
OK to issue CA w. Approved as noted in POSSE

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

Septic file completed. ☑ JAM 12-21-15 Well file completed. ☐ _____

Send permit for signature. ☑ Signature received. ☑ LE 6/16/15

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

Certified operator contract is on file. ☐ _____

Groundwater & Wastewater Services
Septic Project File & Data Review Worksheet

GWS File #: 9107B WASPS App #: 7293

Primary ES assigned to project: B. Hallman

Secondary ES assigned to project:

Project Type: New System ☑ Alteration ☐ Repair ☐ Modified Plot Plan ☐

I. File Review:

Rule or Law	Permit Application			
.1937(d)	Is the Application complete	Yes ☑	No ☐	N/A ☐
.1937(d)	Is there a Site plan/Plat with application	Yes ☑	No ☐	N/A ☐
.1937(d)	Is the Facility shown?	Yes ☑	No ☐	N/A ☐
.1937(d)	Are appurtenances shown	Yes ☑	No ☐	N/A ☐
	Site Evaluation Information			
.1939 (a)(1)	Topography and Landscape Position Recorded?	Yes ☑	No ☐	N/A ☐
.1940 (a-g)	Slope % Recorded?	Yes ☑	No ☐	N/A ☐
.1939 (a)(2)	Texture Class Recorded?	Yes ☑	No ☐	N/A ☐
.1939 (a)(2)	Structure type Recorded?	Yes ☑	No ☐	N/A ☐
.1939 (a)(2)	Consistence Recorded?	Yes ☑	No ☐	N/A ☐
.1939 (a)(2)	Mineralogy Recorded?	Yes ☑	No ☐	N/A ☐
.1939 (a)(3)	Soil Wetness Condition Recorded?	Yes ☑	No ☐	N/A ☐
.1939 (a)(4)	Soil Depth to Rock or Parent Material Recorded When Encountered	Yes ☐	No ☐	N/A ☐
.1939 (a)(5)	Depth to Restrictive Horizons Recorded When Encountered?	Yes ☑	No ☐	N/A ☐
.1939 (a)(6)	Sufficient Available Space Recorded?	Yes ☑	No ☐	N/A ☐
.1937(m)	Are the Profile Locations Shown?			
.1939(a)	Are the S/PS Profiles in system & in repair area?	Yes ☑	No ☐	N/A ☐
& .1945(b)	Number of auger borings made: 9			
	Were sufficient auger borings made?	Yes ☑	No ☐	N/A ☐
.1939(d), .1955, .1956, .1957	LTAR 0.225	Yes ☑	No ☐	N/A ☐
	Improvement Permit/Construction Authorization			
.1937(g) 130A-336(a)	Proposed System Type stated-Initial	Yes ☑	No ☐	N/A ☐
.1945(b)	Proposed System Type stated-Repair	Yes ☑	No ☐	N/A ☐
130A-336 (a)(3)	System location identifiable by setbacks - Initial	Yes ☑	No ☐	N/A ☐
.1937(g) .1945(b)	System components shown – Initial	Yes ☑	No ☐	N/A ☐
.1945(b)	Repair area shown	Yes ☑	No ☐	N/A ☐
.1937 (f)(g)	Does System design match facility, flow & WWcharacteristics?	Yes ☑	No ☐	N/A ☐
.1937 (f)(g)	Is System design consistent with soil/site conditions?	Yes ☑	No ☐	N/A ☐
.1937 (f)(g)	Is the System located in the approved area?	Yes ☑	No ☐	N/A ☐
130A-336(a)	Is the Design flow (gpd) indicated?	Yes ☑	No ☐	N/A ☐

130A-336(a)	Number of Bedrooms, employees, seats, etc. indicated?	Yes ☑	No ☐	N/A ☐
.1937(g)	Trench depth indicated?	Yes ☑	No ☐	N/A ☐
.1937(g)	Trench width indicated?	Yes ☑	No ☐	N/A ☐
.1937(g)	Trench length indicated?	Yes ☑	No ☐	N/A ☐
130A-336(a)(1)	Proposed/existing well shown?	Yes ☑	No ☐	N/A ☐
130A-336(a)(1)	Property line lengths shown?	Yes ☑	No ☐	N/A ☐
130A-336(a)	Facility/appurtenance setbacks shown from fixed points?	Yes ☑	No ☐	N/A ☐

Operation Permit

.1937(i)	System type as described in table V(a) of rule .1961	Yes ☑	No ☐	N/A ☐
.1937(i)	Conditions for system performance, operation, maintenance, monitoring and reporting.	Yes ☑	No ☐	N/A ☐

II. WASPS Review:

Construction authorization issued	Yes ☐	No ☐	N/A ☐
Installation approval issued	Yes ☐	No ☐	N/A ☐
Operation permit issued	Yes ☐	No ☐	N/A ☐
Other related documentation	Yes ☐	No ☐	N/A ☐

Items requiring correction/modification: _____

Comments:

_____

_____

_____

_____

_____

IA issued date: 11-18-15

OP issued date: 12-18-15

Review performed by: P Walker Date performed: 6/10/15

9107B

MECKLENBURG COUNTY HEALTH DEPARTMENT

APP# 7293

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: 19715505

STREET ADDRESS: 11428 Brief Rd

CITY: Charlotte

STATE: NC ZIP: 28227

SUBDIVISION NAME: N/A

LOT #: N/A LOT SIZE (acres): 6.608

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: 3,243

NUMBER OF BEDROOMS: 4

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: Brian E. Carroll

ADDRESS: 467 Lake Sandy Plains Rd.

CITY: Tryon

STATE: NC ZIP: 28782

WORK PHONE: _____

MOBILE PHONE: _____

FAX: _____

E-MAIL: _____

13. **OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:**

NAME: Carl Chambers

ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

WORK PHONE: _____

MOBILE PHONE: 704-957-7971

FAX: _____

E-MAIL: Carl.Chambers34@yahoo.com

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

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. CC (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.

Brian S Carroll — Property Owner's or Owner's Legal Representative Signature

2-5-15 — Date

OFFICE USE ONLY

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

SEPTIC APPLICATION FEE RECEIVED: $ 250 00 DATE FEE RECEIVED: 2/4/15

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

APPLICATION PROCESSED BY: BA

GWS FILE NUMBER ASSIGNED: 9107B

APPLICATION ID NUMBER ASSIGNED: 7293

COMMENTS:

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

J. Presley

File #: _____

PROPOSED PLOT PLAN

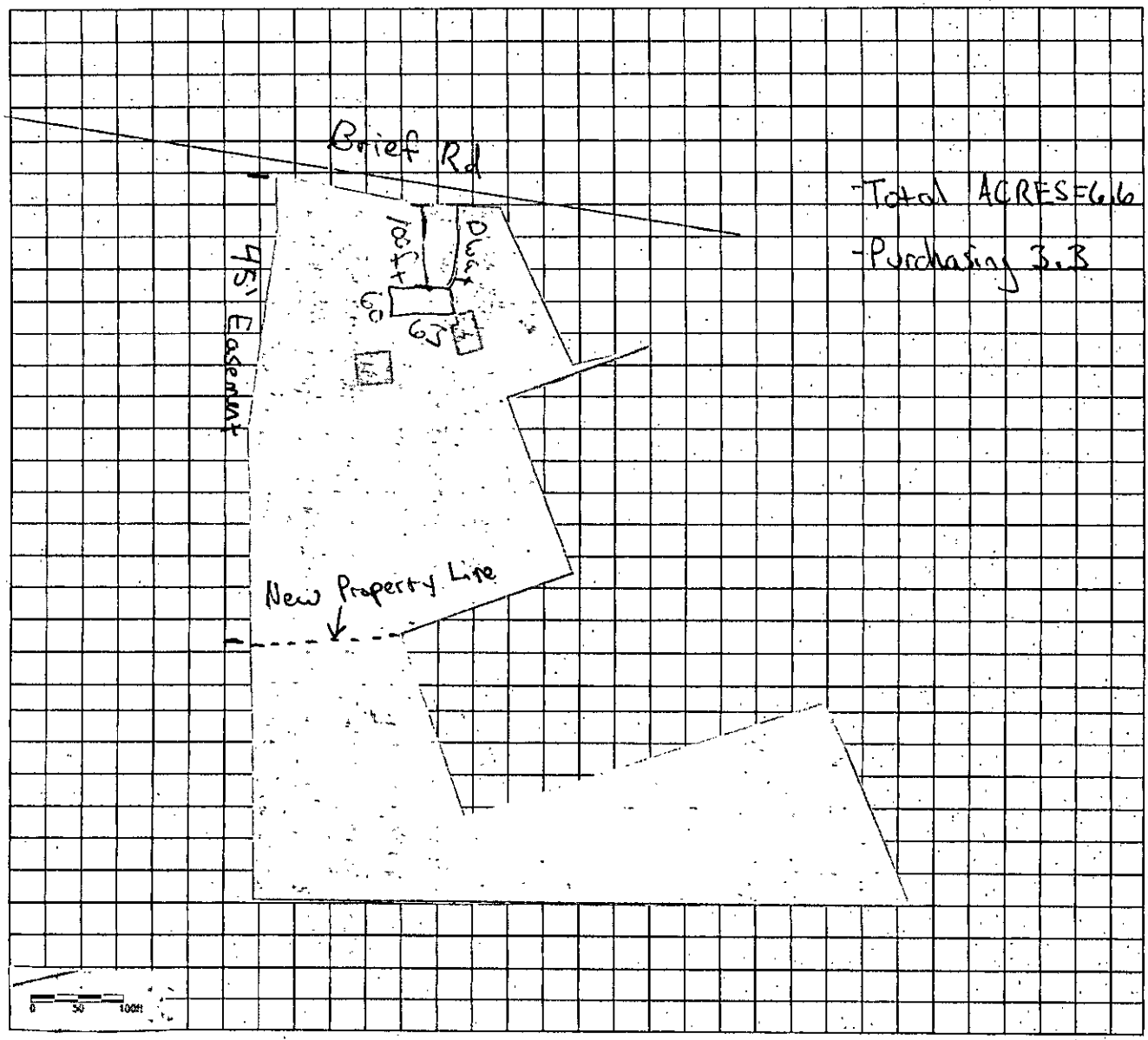
A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), 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: 11428 Brief Rd

Tax Parcel #: 19715505

Subdivision Name: N/A

Lot #: N/A



Brian E Carroll

Property Owner's or Owner's Legal Representative Signature

2-5-15

Date

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

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Sheet: 1 of 3
Property ID: 197-155-05
Lot #: NA
File #: 9107B
AppID: 7293

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Property Owner: Brian E. Carroll
Applicant: owner
Address: 467 Lake Sandy Plains Rd, Tryon, NC 28782
Date Evaluated: 2/19/2015
Proposed Facility: 4 Bedroom House
Design Flow (.1949): 480 GPD
Property Size: 6.608 ac
Location: 11428 Brief Rd, Charlotte, NC 28227
Property Recorded: Unknown
Water Supply: [ ] Public [X] Individual [X] Well [ ] Spring [ ] Other
Evaluation Method: [X] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [X] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY 1941 1941 Structure/ Texture	1941 Consistence Mineralogy	b PROFILE FACTORS 1942 Soil Wetness/ Color	1943 Soil Depth (IN.)	1956 Sapro Class	1944 Restr Horiz	General Comments	Profile Class & LTAR	Maximum Trench Bottom Depth for 3' Wide Conventional Trench
Boring #1	LS 6%	0 - 11	wfsbk SICL	SS SP FR SEXP					saprolite inclusions		
		11 - 26	mfsbk SIC	S P FI SEXP	2 chroma	36	NA	NA	26 - 36"	PS IV	14"
		26 - 36	wfsbk SICL	SS P FR SEXP	@ 28"					0.225	(Need Cover)
Boring #2	LS 5%	0 - 10	wfsbk SICL	SS SP FR SEXP					saprolite and		
		10 - 20	mfsbk SIC	S P FI SEXP	2 chroma	32	NA	NA	weathered rock	PS IV	14"
		20 - 32	wfsbk SICL	SS P FR SEXP	@ 28"				inclusions 20 - 32"	0.225	(Need Cover)
Boring #3	LS 5%	0 - 8	wfsbk SICL	SS SP FR SEXP					lithochromic mottles		
		8 - 38	mfsbk SIC	S P FR SEXP	>48"	48	NA	NA	34 - 48"	PS IV	34"
		38 - 48	wfsbk SICL	SS P FR SEXP						0.25	
Boring #4	LS 5%	0 - 4	wfsbk SICL	SS SP FR SEXP					lithochromic mottles		
		4 - 48	mfsbk SIC	S P FR SEXP	>48"	48	NA	NA	40 - 48"	PS IV	34"
										0.275	
Boring #5	LS 5%	0 - 7	wfsbk SICL	SS SP FR SEXP					lithochromic mottles		
		7 - 16	wmsbk SIC	S P FR SEXP	>36"	32	NA	NA	7 - 32"	PS IV	18"
		16 - 32	wmsbk SICL	SS P FR SEXP					saprolite inclusions	0.225	
		32 - 36	Saprolite	Need Pit to evaluate					7 - 32"		
Boring #6	LS 6%	0 - 7	wfsbk SICL	SS SP FR SEXP					lithochromic mottles		
		7 - 41	mfsbk SIC	S P FR SEXP	>48"	48	NA	NA	41 - 48"	PS IV	34"
		41 - 48	wfsbk SICL	SS P FR SEXP						0.25	

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	IIIb	IIIb
Site LTAR (gpd/sq ft)	0.225	0.225

Other Factors (.1946):
Soil Evaluation By: Jacob Presley, REHS, LSS
Others Present:
Site Classification (.1948): PS
Site Evaluation By:
Others Present:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
CONTINUED

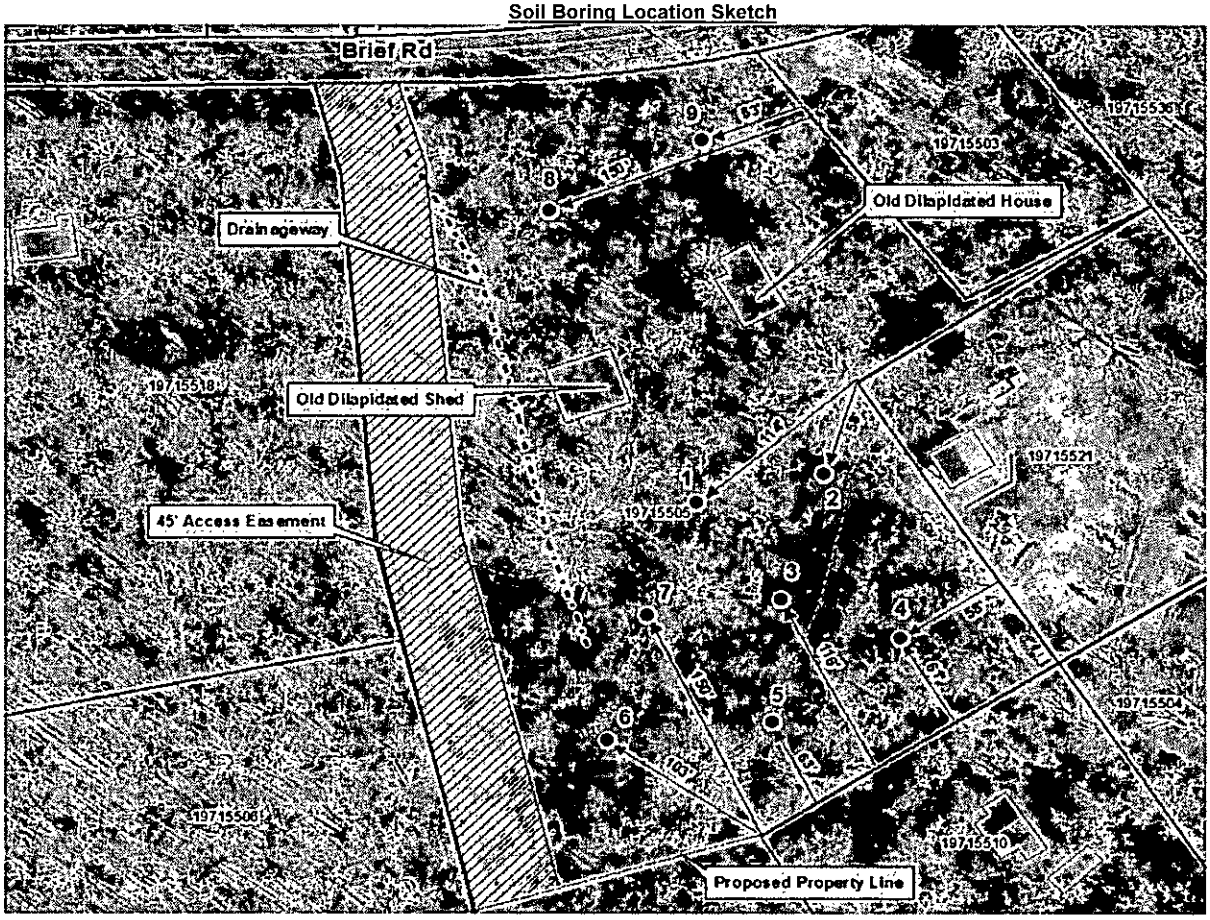
PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	b PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	General Comments	Profile Class & LTAR	Maximum Trench Bottom Depth for 3' Wide Conventional Trench
Boring #7	LS 6%	0 - 3	wfsbk SICL	SS SP FR SEXP	>44"	32	NA	NA	lithochromic mottles 25 - 44" saprolite inclusions 25 - 44"	PS IV 0.25	25"
		3 - 25	mfsbk SIC	S P FR SEXP							
		25 - 39	wmsbk SICL	SS P FR SEXP							
		39 - 44	Saprolite	Need Pit to evaluate							
Boring #8	NS 5%	0 - 12	Saprolite and Weathered Rock		2 chroma @ 8"	0	NA	NA		US	NA
Boring #9	NS 5%	0 - 6	wfsbk SICL	SS SP FR SEXP	2 chroma @ 15"	18	NA	NA		US	NA
		6 - 18	wfsbk SIC	S P FI SEXP							

COMMENTS:

Landscape Position	Group	Texture	.1955 LTAR	Structure
R-Ridge	I	S-Sand	1.2 - 0.8	sg-Single Grain
SS-Shoulder Slope		LS-Loamy Sand		mass-Massive
LS-Linear Slope				cr-Crumb
FS-Foot Slope	II	SL-Sandy Loam	0.8 - 0.6	gr-Granular
NS-Nose Slope		L-Loam		sbk-Subangular Blocky
HS-Head Slope				abk-Angular Blocky
CC-Concave Slope	III	Si-Silt	0.6 - 0.3	pl-Platy
CV-Convex Slope		SiCL-Silty Clay Loam		pr-Prismatic
T-Terrace				Sap-Saprolite
FP-Flood Plain		CL-Clay Loam		**Structure Prefixes**
D-Drainage Way		SCL-Sandy Clay Loam		w-weak
				m-moderate
		SiL-Silt Loam		s-strong
				f-fine
	IV	SC-Sandy Clay	0.4 - 0.1	m-medium
		SiC-Silty Clay		c-coarse
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	SS-Slightly Sticky	SEXP-Slightly Expansive
FR-Friable	S-Sticky	EXP-Expansive
FI-Firm	VS-Very Sticky	
VFI-Very Firm	NP-Non-Plastic	**Classification**
EFI-Extremely Firm	SP-Slightly Plastic	US-Unsuitable
	P-Plastic	PS-Provisionally Suitable
	VP-Very Plastic	S-Suitable
		NA-Not Applicable

Soil Boring Location Sketch



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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: 30007293 GWS File #: 9107B Tax Parcel #: 197-155-05

- This 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.

I. This Improvement Permit Shall: Expire in Five (5) Years **Expiration Date (If Applicable):** 6/3/2020

Type of Installation: Residential - New System Lot Number: 0

Structure Type: HOUSE Size (ft^2): 3243 # Bedrooms: 4 # Occupants: 2

Building Foundation: Crawl Space Water Supply: Private Well

II. Initial System Type: Pump to Accepted **System Classification:** IIIb

Initial System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.225	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	1000
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1600	Total Trench Length (ft):	533
Maximum Trench Depth (in):	18	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

III. Repair System Type: Pump to Accepted **System Classification:** IIIb

Repair System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.225	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	1000
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1600	Total Trench Length (ft):	533
Maximum Trench Depth (in):	18	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

IV. Permit Conditions/Comments:

(Please See the Following Page for Permit Conditions.)

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment, and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: Brad Hallman Owner/Legal Agent: Carl Chambers
Print Name

Signature: Signature:

Date Issued: 6/3/2015

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: 30007293 GWS File #: 9107B

IV. Permit Conditions/Comments:

- This type of septic system requires an inspection once every 5 years by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- This type of repair system requires the installation of a pump tank and all associated components. This type of system will require routine inspections by our office. The system owner is responsible for all fees associated with these inspections.
- This type of repair system requires periodic inspections by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- All components of the septic system must be located at least 100 ft. (50 ft. minimum) from all private wells.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.
- Foundation drains shall be constructed not to discharge water onto or across any part of the septic system.

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment and Disposal Systems* and is subject to the following provisions:

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- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: Brad Hallman

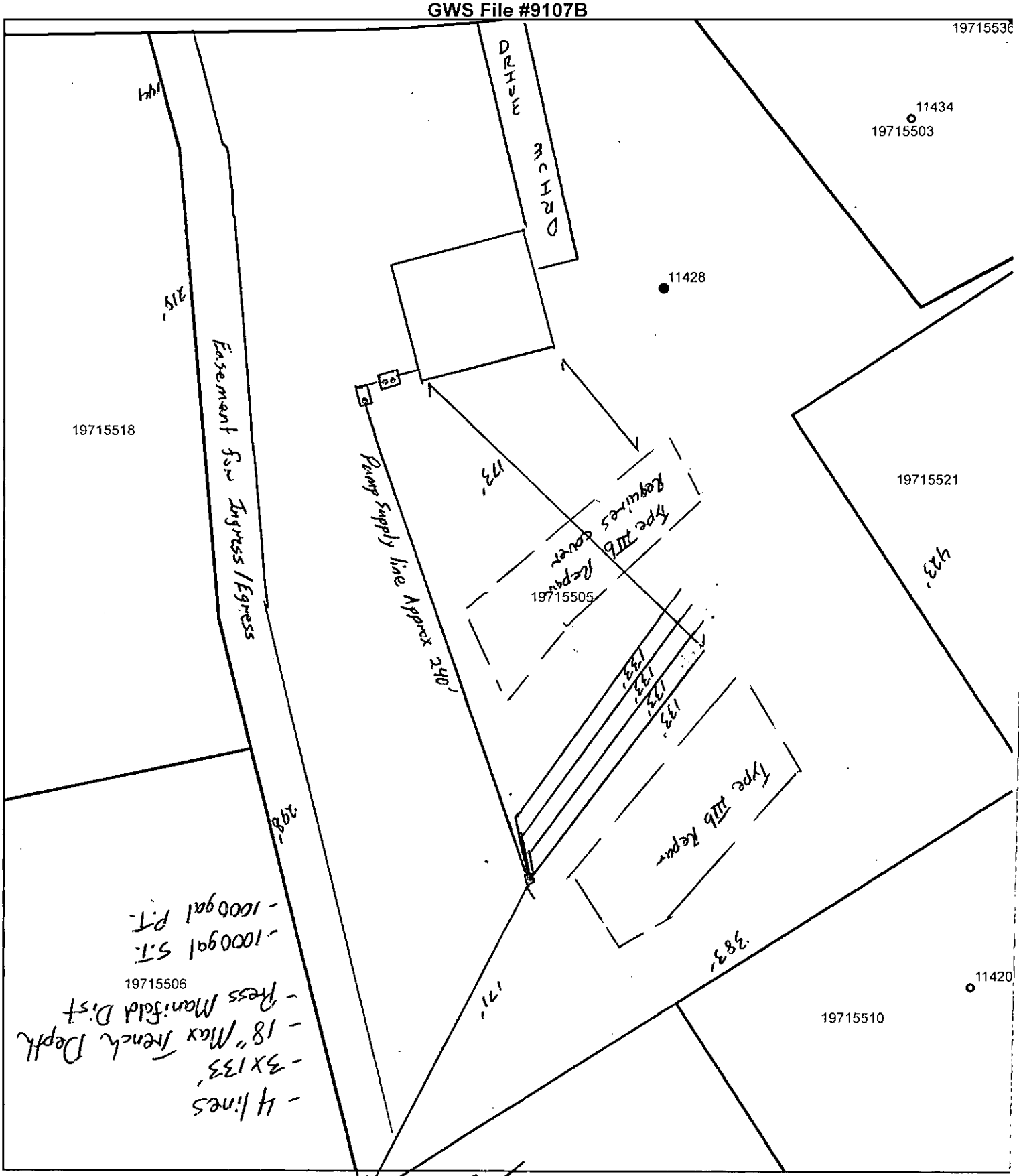
Signature:

Date Issued: 6/3/2015

Owner/Legal Agent: Carl Chambers
Print Name

Signature:

On-site Wastewater Improvement Permit Diagram
PARCEL #: 197-155-05
WAPSPS APPLICATION #: 30007293
GWS File #9107B



Authorized Agent: Bradley W. Hallman

Owner/Legal Agent: _____

0 15 30 60 90 Feet

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30007293** GWS File #: **9107B** Tax Parcel #: **197-155-05**

- This 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.

I. This Improvement Permit Shall: Expire in Five (5) Years **Expiration Date (If Applicable):** 6/3/2020

Type of Installation: Residential - New System Lot Number: 0

Structure Type: HOUSE Size (ft^2): 3243 # Bedrooms: 4 # Occupants: 2

Building Foundation: Crawl Space Water Supply: Private Well

II. Initial System Type: Pump to Accepted **System Classification:** IIIb

Initial System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.225	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	1000
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1600	Total Trench Length (ft):	533
Maximum Trench Depth (in):	18	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

III. Repair System Type: Pump to Accepted **System Classification:** IIIb

Repair System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.225	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	1000
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1600	Total Trench Length (ft):	533
Maximum Trench Depth (in):	18	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

IV. Permit Conditions/Comments:

(Please See the Following Page for Permit Conditions.)

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment, and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: Brad Hallman Owner/Legal Agent: _____
Print Name

Signature: _____ Signature: _____

Date Issued: 6/3/2015

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30007293** GWS File #: **9107B**

IV. Permit Conditions/Comments:

- This type of septic system requires an inspection once every 5 years by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- This type of repair system requires the installation of a pump tank and all associated components. This type of system will require routine inspections by our office. The system owner is responsible for all fees associated with these inspections.
- This type of repair system requires periodic inspections by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- All components of the septic system must be located at least 100 ft. (50 ft. minimum) from all private wells.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.
- Foundation drains shall be constructed not to discharge water onto or across any part of the septic system.

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: Brad Hallman

Signature: _____

Date Issued: 6/3/2015

Owner/Legal Agent: _____
Print Name

Signature: _____

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

Septic System Pre-Construction Meeting Checklist

File # 9107B App # 7293 Tax Parcel # 197-155-05

Property Owner: Brian Carroll

Job Location Address: 11428 Brief Rd

City: Charlotte State: NC Zip Code: 28227

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

   ☑ YES ☐ NO

   Comments: _____

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.**

Bradley W. Hallman
Authorized Agent

11/18/15
Date

Others Present

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 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 #: 9107B Permit #: 7293 Tax Parcel #: 197-155-05

Property Owner: Brian Carroll

Job Location Address: 11428 Brief Rd

City: Charlotte State: NC Zip Code: 28227

Operation Permit Issuance Date: 12/18/15 Contractor Name: Jamie O'Daniels

Permitted Design Flow: 480 GPD Liquid Capacity of Dosing Tank: 1000 gallons

Liquid Capacity of Septic Tank: 1000 gallons Manufacture Dellinger Effluent Pump Model: Myers ME40 1/2hp

STB-477 10/12/15 PF 383 10/12/15

Drainfield Installation ☐ N/A

Trench Depth: 18" inches

Trench Width: 3 feet

Line Spacing: 9'+ feet (O.C.)

Total line length: 532 feet

# of Lines: 4 @ 133 feet

Depth of Media: 12" inches (Type) IIIb

Depth of Cover: 6'+ inches

Distribution Device: P. Manifold

Inspection Dates

Tank(s) Inspected: 11/18/15

Excavation Inspected: 11/23/15

Pump & Controls Inspected: 12/18/15

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

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Depth of Cover: _____ inches

Distribution Device: _____

Water Supply Source

☐ Municipal ☒ Private Well ☐ Community Well

☐ Other _____

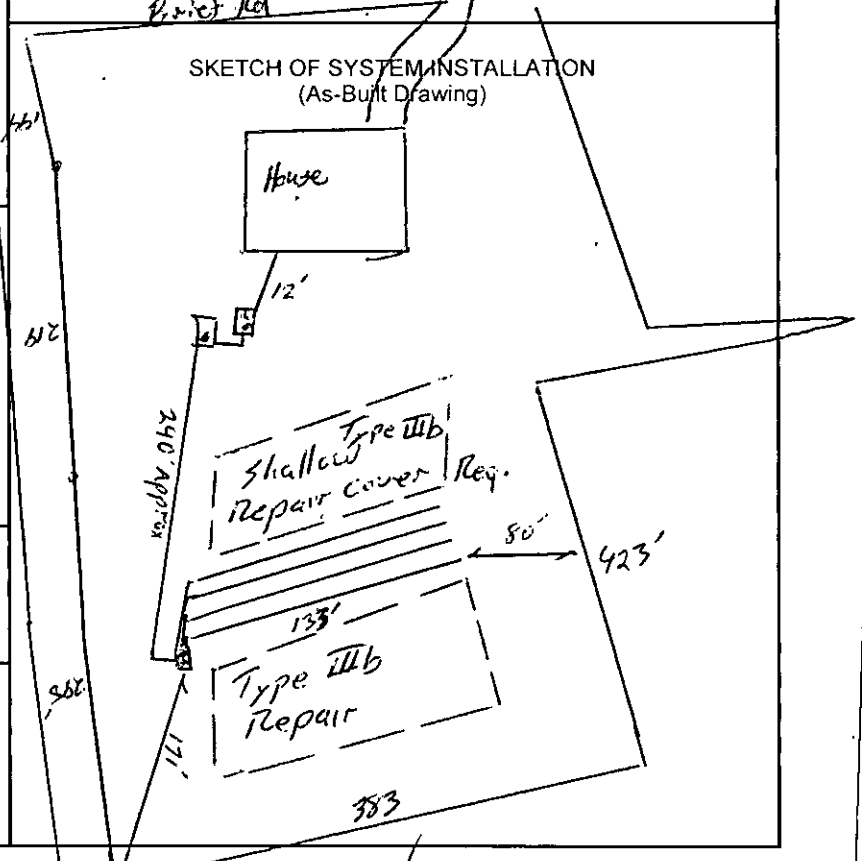
System Installation Setbacks

Distance from Building Foundation: 12' feet

Distance from Property Line: 10'+ feet

Distance from Water Supply Source: Not Installed feet 50' min

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: IIIb Rule 4 / P / NA / NA

Draw Down: 42 gal/min

DENR Authorized Agent: Bradley W. Hallman Signature: _____

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

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

File #: 9107B Permit #: 7293 Tax Parcel #: 197-155-05

Property Owner: Brian Carroll

Job Location Address: 11428 Brief Rd

City: Charlotte State: NC Zip Code: 28227

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: III b

*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.

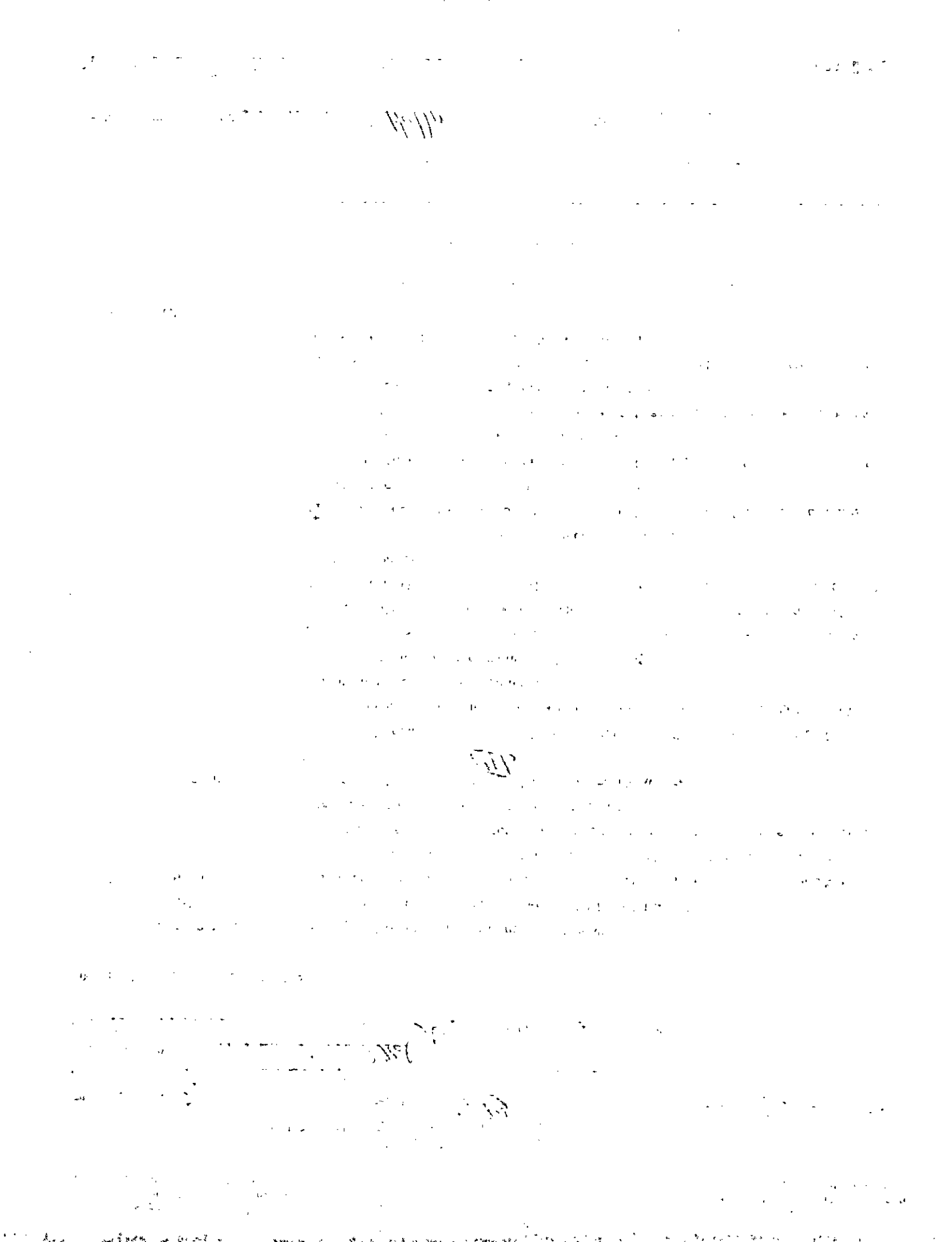
☐ System requires inspection by GWS once every twelve (12) months. The system owner is responsible for all fees associated with the inspection.

☐ 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: Bradley W. Hallman Date: 12/18/15

Signature:



S

FEE: 200.00
DATE:9/9/2015

MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES

FILE NUMBER: 9107B

PERMIT NUMBER: 30007293

PARCEL NUMBER: 19715505

JOB LOCATION INFORMATION

ADDRESS: 11428 BRIEF RD

CITY: CHARLOTTE **STATE: NC** **ZIP:** 28227

ISSUED TO: Brian E Carroll

CONSTRUCTION AUTHORIZATION ISSUANCE DATE: 9/9/2015

CONSTRUCTION AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 30007293, 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. A PRE-CONSTRUCTION MEETING MUST BE SECURED PRIOR TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A LICENSED SEPTIC TANK CONTRACTOR WITH THE NORTH CAROLINA ONSITE WASTEWATER CONTRACTOR INSPECTOR CERTIFICATION BOARD.

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 CONSTRUCTION AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. THIS CONSTRUCTION AUTHORIZATION AS PROVIDED IN G.S. 130A-335(f) AND G.S. 130A-336(b) SHALL BE VALID FOR A PERIOD EQUAL TO THE VALIDITY OF THE IMPROVEMENT PERMIT, NOT TO EXCEED 60 MONTHS.

NOTES :

1. THE PURPOSE OF THIS SURVEY, IS TO RECOMBINE PARCELS 19715505 AND 19715510
2. AREA COMPUTED BY COORDINATE METHOD.
3. THIS PROPERTY MAY BE SUBJECT TO ADDITIONAL EASEMENTS OR RIGHT-OF-WAYS.
4. SUBJECT TRACT IS NOT LOCATED IN A SPECIAL FLOOD ZONE.
5. ALL DISTANCES SHOWN ARE HORIZONTAL MEASUREMENTS.
6. THIS SURVEY DOES NOT CONSTITUTE A TITLE SEARCH BY THE SURVEYOR. NO INVESTIGATIONS FOR EASEMENTS, ENCUMBRANCES, RESTRICTIVE COVENANTS, OWNERSHIP TITLE EVIDENCE, OR ANY OTHER FACTS HAVE BEEN MADE THAT AN ACCURATE AND CURRENT TITLE SEARCH MAY DISCLOSE.
7. NO NCGS CONTROL STATION WITHIN 2000'.
8. THE SURVEY IS OF AN EXISTING PARCEL OR PARCELS OF LAND AND DOES NOT CREATE A NEW STREET OR CHANGE AN EXISTING STREET
9. REFERENCE: DEED BK 6268

I_____ REVIEW OFFICER OF MECKLENBURG COUNTY, CERTIFY THAT THE MAP OR PLAT TO WHICH THIS CERTIFICATION IS AFFIXED MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING.

REVIEW OFFICER DATE

CERTIFICATE OF OWNERSHIP AND DEDICATION

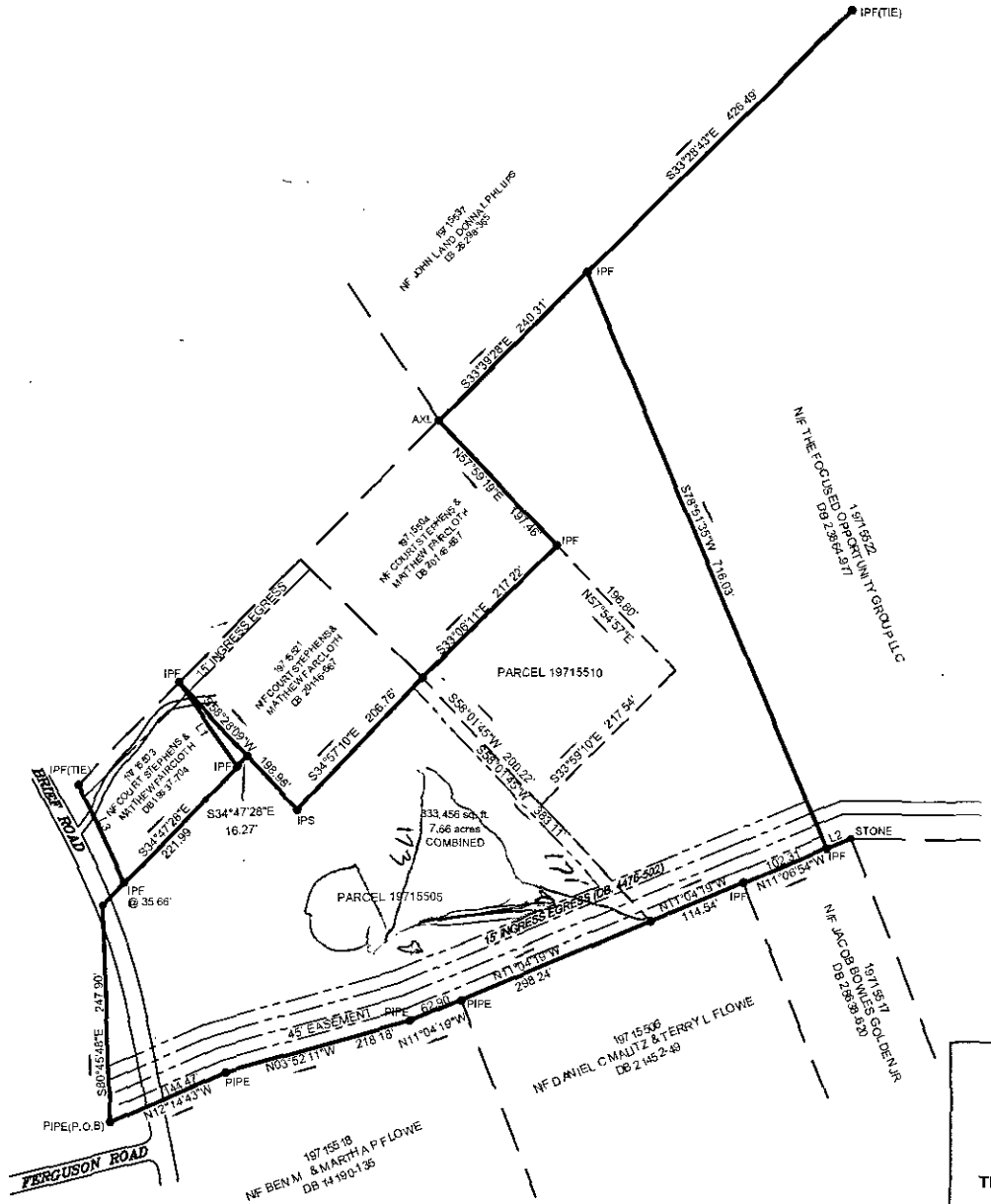
I HEREBY CERTIFY THAT I AM THE OWNER OF THE PROPERTY SHOWN AND *DESCRIBED HEREON WHICH IS LOCATED IN THE SUBDIVISION JURISDICTION* OF MECKLENBURG COUNTY AND THAT I HEREBY ADOPT THIS PLAN OF SUBDIVISION WITH MY FREE CONSENT AND ESTABLISH MINIMUM LOT SIZE AND BUILDING SETBACK LINES AS NOTED.

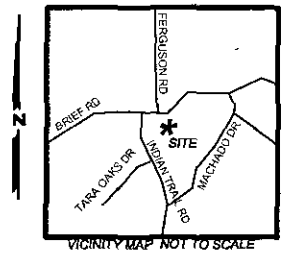
OWNER DATE

THIS SURVEY IS OF *ANOTHER CATEGORY, SUCH AS THE RECOMBINATION OF* EXISTING PARCELS, A COURT-ORDERED SURVEY, OR OTHER EXCEPTION TO THE DEFINITION OF SUBDIVISION.

APPROVED IN ACCORDANCE WITH THE PROVISIONS OF THE SUBDIVISION ORDINANCE OF THE TOWN OF MINT HILL, NORTH CAROLINA

PLANNING BOARD CHAIRMAN DATE





BASIS OF BEARINGS: NAD 1983 NC GRID

LINE TABLE		
LINE	LENGTH	BEARING
L1	117.83	N66°20'48"E
L2	30.02	S11°07'45"E
L3	125.56	S76°31'36"W

LEGEND:
IPF IRON PIN FOUND
IPS IRON PIN SET

GRAPHIC SCALE
0 50 100 200
SCALE IN FEET

I, MOHAMMAD E. ZAMANI, certify that this plat was drawn under my supervision from an actual survey made under my supervision; that the ratio of precision as calculated is 1: 10,000. Witness my original signature, registration number and seal this 11 day of MARCH, A.D., 2015

NORTH CAROLINA PROFESSIONAL SEAL L-4325 LAND SURVEYOR MOHAMMAD E. ZAMANI

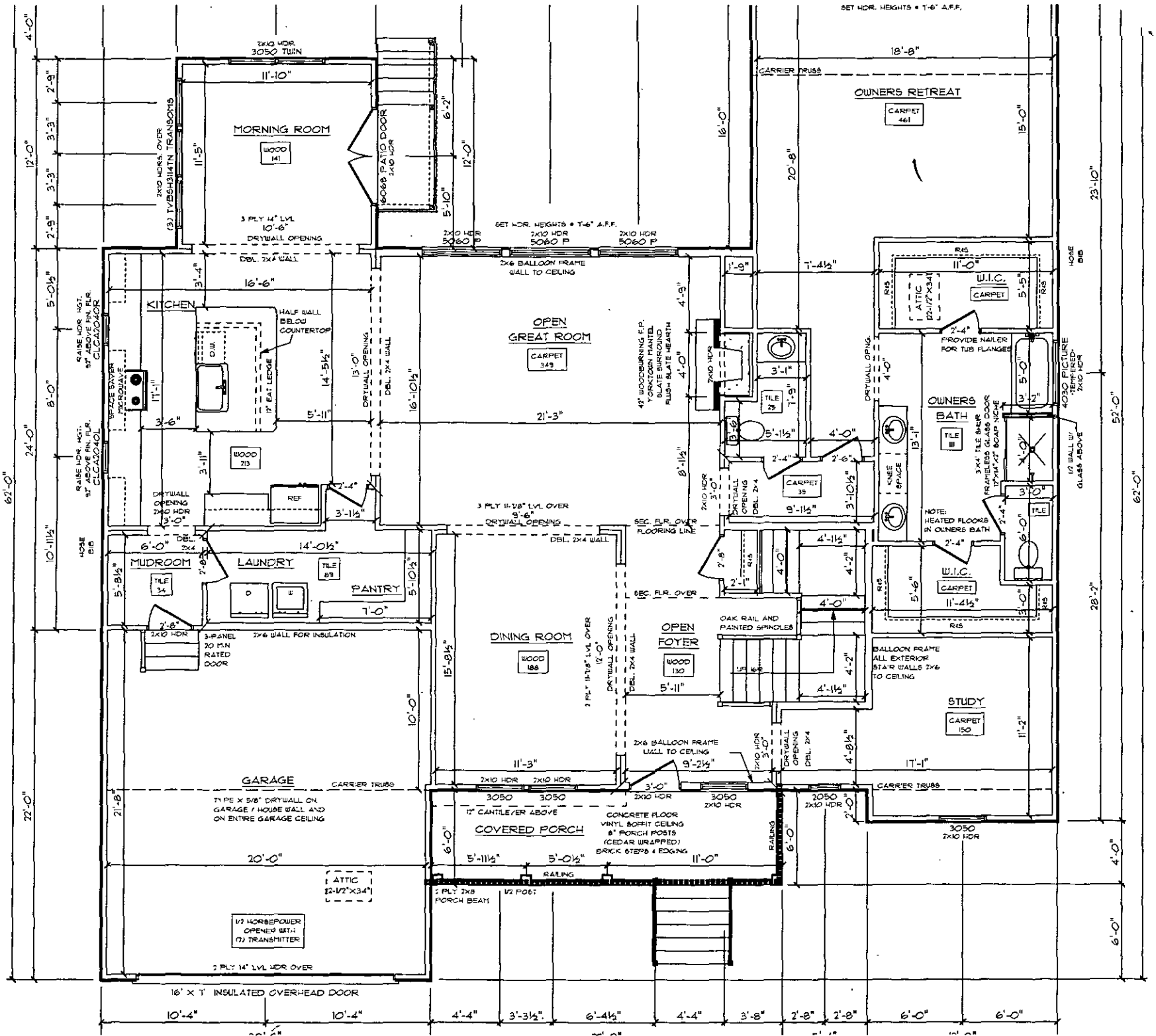
Surveyor
Registration Number—4325

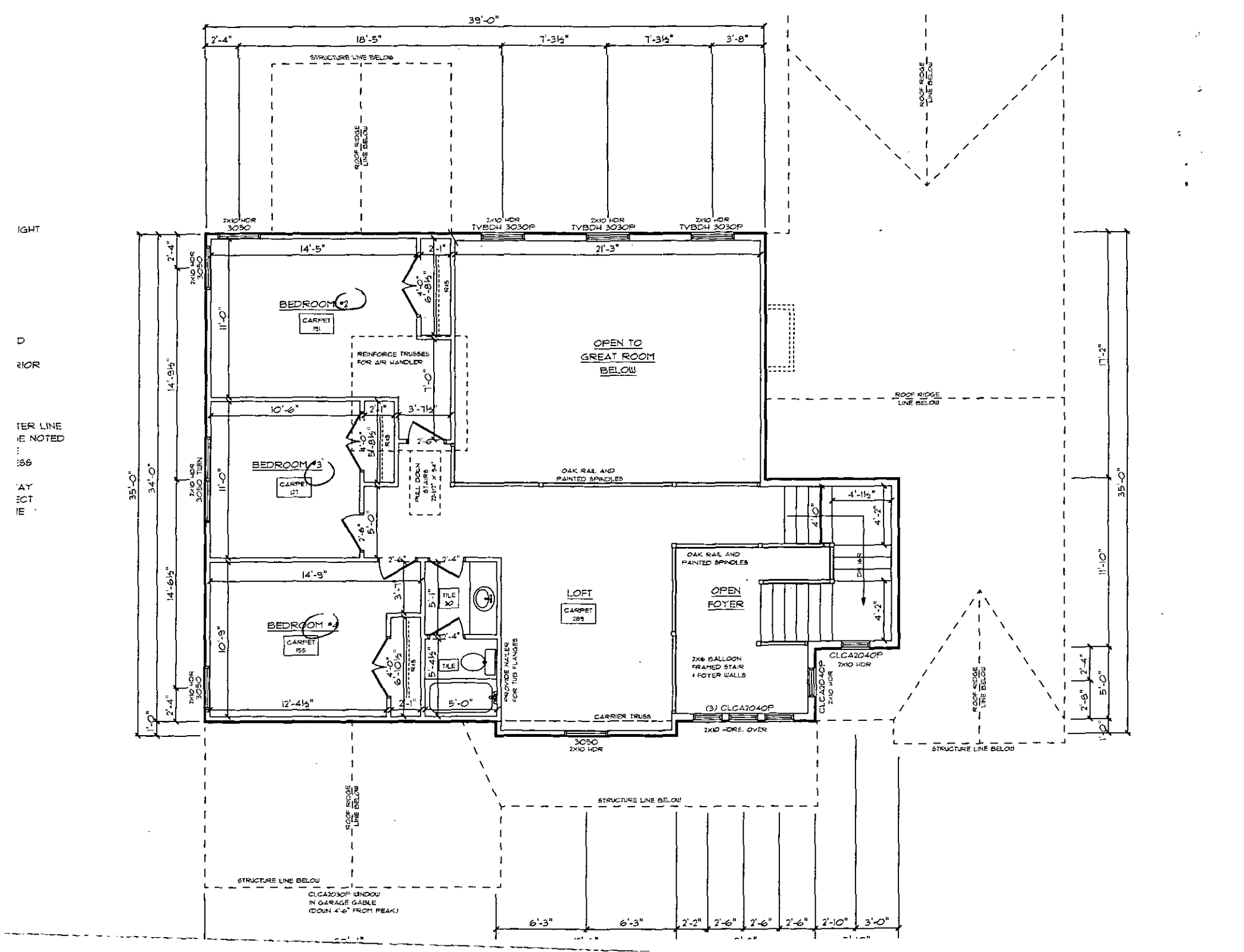
RECOMBINATION PLAT
PARCEL 19715505 AND 19715510
ON BRIEF ROAD
MINT HILL
MECKLENBURG COUNTY, NORTH CAROLINA

OWNER:
THE FOCUSED OPPORTUNITY GROUP LLC

CSC of NC PC
P.O. BOX 691150
CHARLOTTE, N.C. 28227
(704) 573-0112
FIRM LICENSE No. C-2350

SCALE:	DATE:	JOB NO.:	DRAWN BY:
1"=100'	MARCH 11, 2015	CH252A-03-15	M. SMITH


MORNING ROOM
WOOD 141
KITCHEN
OPEN GREAT ROOM
CARPET 349
OWNERS RETREAT
CARPET 461
OWNERS BATH
MUDROOM
LAUNDRY
PANTRY
DINING ROOM
WOOD 186
OPEN FOYER
WOOD 130
STUDY
CARPET 150
W.I.C.
GARAGE
COVERED PORCH
ATTIC
22-1/2"X34"
1/2 HORSEPOWER OPENER WITH (2) TRANSMITTER
16' X 7' INSULATED OVERHEAD DOOR
2X10 HDR. 3050 TWIN
6068 PATIO DOOR 2X10 HDR
3 PLY 14" LVL 10'-6" DRYWALL OPENING
2X6 BALLOON FRAME WALL TO CEILING
42" WOODBURNING F.P. YORKTOWN MANTEL SLATE SURROUND PLUSH SLATE HEARTH
3'-1" TILE 24 T-9" 5'-1½" 4'-0" 13'-1"
3'-6" 1'-1" 5'-11" 21'-3"
3 PLY 11-7/8" LVL OVER 9'-6" DRYWALL OPENING
SEC. FLR. OVER FLOORING LINE
DBL. 2X4 WALL
14'-0½"
6'-0" DBL. 2X4
2'-8" 2X10 HDR
3-PANEL 20 MIN RATED DOOR
2X6 WALL FOR INSULATION
5'-8½" 5'-10½" 7'-0"
TILE 34 TILE 69
D E
15'-8½" 10'-0"
2 PLY 11-7/8" LVL OVER 12'-0" DRYWALL OPENING
11'-3" 9'-2½" 3'-0" 2X10 HDR
3050 3050 3050 2X10 HDR
12" CANTILEVER ABOVE
CONCRETE FLOOR VINYL SOFFIT CEILING 8" PORCH POSTS (CEDAR WRAPPED) BRICK STEPS & EDGING
5'-11½" 5'-0½" 11'-0"
RAILING
2 PLY 2X8 PORCH BEAM
1/2 POST
20'-0"
2 PLY 14" LVL HDR OVER
CARRIER TRUSS
TYPE X 5/8" DRYWALL ON GARAGE / HOUSE WALL AND ON ENTIRE GARAGE CEILING
21'-8"
22'-0"
10'-4" 10'-4" 4'-4" 3'-3½" 6'-4½" 4'-4" 3'-8" 2'-8" 2'-8" 6'-0" 6'-0"
62'-0"
24'-0"
12'-0"
8'-0"
5'-0½"
3'-3"
2'-9"
4'-0"
RAISE HDR. HGT. 93" ABOVE FIN. FLR. CLG4204OR
RAISE HDR. HGT. 93" ABOVE FIN. FLR. CLG4204OL
SPACE SAVER MICROWAVE
11'-1"
3'-11"
14'-5½"
13'-0" DRYWALL OPENING
DBL. 2X4 WALL
16'-10½"
REF
2'-4"
3'-1½"
DRYWALL OPENING 2X10 HDR 3'-0"
HOSE BIB
SET HDR. HEIGHTS @ T-6" A.F.F.
2X10 HDR 5060 P
2X10 HDR 5060 P
2X10 HDR 5060 P
18'-8"
CARRIER TRUSS
16'-0"
20'-8"
15'-0"
23'-10"
52'-0"
28'-2"
4'-0"
6'-0"
1'-9"
7'-4½"
11'-0"
R15
W.I.C. CARPET
ATTIC 22-1/2"X34"
5'-5"
2'-4" PROVIDE NAILER FOR TUB FLANGES
4030 PICTURE TEMPERED 2X10 HDR
3'-2"
5'-0"
3'-0"
1/2 WALL W/ GLASS ABOVE
3'-0"
TILE
3'-0"
6'-0"
3'-0"
3'-10½"
4'-8½"
4'-1½"
4'-2"
4'-0"
2'-8"
2'-1"
4'-1½"
4'-2"
4'-0"
4'-1½"
4'-2"
4'-0"
2'-6"
KNEE SPACE
CARPET 35
9'-1½"
3'-10½"
2'-4"
2'-6"
DRYWALL OPNG. DBL. 2X4
2X10 HDR 3'-0"
8'-1½"
4'-9"
4'-0"
2X10 HDR
DRYWALL OPNG.
4'-0"
3'-1"
TILE 28
T-9"
5'-1½"
TILE 18
3'-4" TILE SHWR FRAMELESS GLASS DOOR 12"X14"X2" SOAP NICHE
NOTE: HEATED FLOORS IN OWNERS BATH
2'-4"
5'-6"
11'-4½"
OAK RAIL AND PAINTED SPINDLES
BALLOON FRAME ALL EXTERIOR STAIR WALLS 2X6 TO CEILING
17'-1"
11'-2"
2050 2X10 HDR
2'-0"
3050 2X10 HDR
CARRIER TRUSS
DRYWALL OPENING DBL. 2X4
2X10 HDR 3'-0"
SEC. FLR. OVER
4'-0"
4'-1½"
4'-2"
4'-0"
4'-1½"
4'-2"
4'-0"
5'-11"
1'-9"
16'-8"
6'-0"
6'-0"
4'-0"
6'-0"
RAILING
HOSE BIB


39'-0"
2'-4"
18'-5"
7'-3½"
7'-3½"
3'-8"
STRUCTURE LINE BELOW
ROOF RIDGE LINE BELOW
2X10 HDR 3050
2X10 HDR TVBDH 3030P
2X10 HDR TVBDH 3030P
2X10 HDR TVBDH 3030P
14'-5"
2'-1"
21'-3"
BEDROOM #2
CARPET 151
11'-0"
4'-0" 6'-8½" R15
REINFORCE TRUSSES FOR AIR HANDLER
OPEN TO GREAT ROOM BELOW
7'-0"
10'-6"
2'-1"
3'-7½"
4'-0" 5'-8½" R15
2'-6"
BEDROOM #3
CARPET 121
PULL DOWN STAIRS 22"x 54"
OAK RAIL AND PAINTED SPINDLES
2'-6" 5'-0"
4'-1½"
4'-10"
4'-2"
2'-6"
2'-4"
14'-9"
3'-7"
5'-1"
TILE 30
LOFT
CARPET 289
OPEN FOYER
OAK RAIL AND PAINTED SPINDLES
DN 16R
4'-2"
BEDROOM #4
CARPET 155
10'-9"
2'-4"
5'-4½"
TILE
4'-0" 6'-10½" R15
2'-1"
5'-0"
PROVIDE NAILER FOR TUB FLANGES
2X6 BALLOON FRAMED STAIR & FOYER WALLS
CLCA2040P 2X10 HDR
12'-4½"
CARRIER TRUSS
(3) CLCA2040P
2X10 HDRS. OVER
CLCA2040P 2X10 HDR
3050 2X10 HDR
35'-0"
34'-0"
14'-9½"
14'-6½"
2'-4"
1'-0"
2X10 HDR 3050
2X10 HDR 3050 TWIN
17'-2"
11'-10"
2'-8"
5'-0"
STRUCTURE LINE BELOW
ROOF RIDGE LINE BELOW
CLCA2030P WINDOW IN GARAGE GABLE (DOWN 4'-6" FROM PEAK)
6'-3"
6'-3"
2'-2"
2'-6"
2'-6"
2'-6"
2'-10"
3'-0"

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	06/16/15	**Amount:**	200.00
Receipt #:	95076	**Tendered:**	200.00
Check / Auth #:	MC 32046Y	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: 200000
Contractor: CHAMBERS,CARL
Attn:
Address: 13210 OLD CEDAR LN
Address:
City/State/Zip: CHARLOTTE, NC 28215

Item	Description	Permit#	Quantity	Unit Price	Total Price
0734	Septic Construction Authorizat 11428 BRIEF ROAD		1	200.00	200.00

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

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

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	06/16/15	**Amount:**	200.00
Receipt #:	95077	**Tendered:**	200.00
Check / Auth #:	MC 32046Y	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: 200000
Contractor: CHAMBERS, CARL
Attn:
Address: 13210 OLD CEDAR LN
Address:
City/State/Zip: CHARLOTTE, NC 28215

Item	Description	Permit#	Quantity	Unit Price	Total Price
0703	Septic Operational Permit 11428 BRIEF ROAD		1	200.00	200.00

Outstanding Balances

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

Payment Receipt

Mecklenburg County POS

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

Enter Account # or Customer Name Here: CARL CHAMBERS

Bill To:

CARL CHAMBERS
13210 OLD CEDAR LN

Charlotte, NC 28215

Single Payment

Transaction Date:	06/16/2015 9:32 AM Pacific Time
Pay Method:	**********4334
Approval #:	32046Y
Trace Number:	e9cfebd4-875c-4fec-8f9c-eaf521066d13
Amount:	$400.00

Payment Amount:	$400.00
Total:	**$400.00**

Thank you for your payment.

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 02/06/15
Receipt #: 92640
Check / Auth #: VISA 108068
Received By: SADERLW

Amount: 250.00
Tendered: 250.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: CHAMBERS CARL
Attn:
Address: 13210 OLD CEDAR LN
Address:
City/State/Zip: CHARLOTTE, NC 28215

Item	Description	Permit#	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 11428 BRIEF RD		1	250.00	250.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
10.00					

MECKLENBURG COUNTY
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