

9330 ARDREY WOODS DR

22937503

1/10/2008

duponbj

Groundwater and Wastewater Services File Imaging Project

May 2007

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FEE: 0.00

DATE: 9/17/2007

CONSTRUCTION AUTHORIZATION FOR AN ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

MECKLENBURG COUNTY

GROUNDWATER & WASTEWATER SERVICES

FILE NUMBER: 6917B

PERMIT NUMBER: 30001851

PARCEL NUMBER: 19507323

JOB LOCATION INFORMATION

ADDRESS: 6426 BASCALE LN

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

ISSUED TO: SCHREINER DEVELOPMENT, LLC

CONSTRUCTION AUTHORIZATION ISSUANCE DATE: 9/17/2007

CONSTRUCTION AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 30001851, 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. AN INSTALLATION APPROVAL MUST BE SECURED PRIOR TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH THE MECKLENBURG COUNTY HEALTH DEPARTMENT.

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.
   *CONSTRUCTION AUTHORIZATION EXPIRATION DATE: 3/27/2012

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

PERMIT TO CONSTRUCT A WATER SUPPLY WELL

Permit #: 10001284 **File #:** 6717B **Tax Parcel #:** 229-375-03
Property Owner: CROSLAND ARDREY WOODS
Job Location Address: 9330 ARDREY WOODS DR
City/ETJ: CHARLOTTE **State:** NC **Zip Code:** 28277
Permit Issuance Date: 8/24/2006
Use of Well: Irrigation
Type of Facility Served by Well: House
Sewage System Type: None

Area of Regulated Groundwater Usage Restrictions Apply: NO

Replacement for Existing Well: If Yes, see requirements in Other Conditions of This Permit.

General Conditions of This Permit:

- Water Supply Well construction must meet all requirements set forth in the *Mecklenburg County Groundwater Well Regulations* and any other applicable rules and laws.
- A North Carolina Certified Well Contractor must perform the well construction activities.
- The permitted Water Supply Well shall be located in accordance with the attached SITE PLAN.
- Any alteration of the site (including location of structures and appurtenances) or modification in use of the well, may subject this Permit to revocation.
- The Department will collect an initial sample of water from the Water Supply Well and analyze the sample for total coliform bacteria, nitrate, and nitrite. A review of the analysis by the Department must find the sample to meet the groundwater quality standards specified in Chapter 5 of the Mecklenburg County Groundwater Well Regulations before the Water Supply Well can be placed in service.
- This Permit shall be VALID for a period not to exceed 12 months from the date of issuance.

Specific Conditions of This Permit (Check all that apply):

☐ Grout must be placed the full extent of the casing. ☐ Casing to bedrock

☐ Initial water sample to be taken and analyzed for (check all that apply):

☐ Volatile Organic Compounds (VOC's) ☐ Semi-volatile Compounds ☐ Metals (Specify in Other Conditions)

☐ Pesticides ☐ Herbicides ☐ Other (See Below)

The analysis must be submitted to the Department for review and approval prior to the Water Supply well being placed in service.

Other Conditions of This Permit:

Chris Sherrill, RS, LSS
Authorized Agent: Print Name

Signature:

Owner/Legal Agent: Print Name

Signature:

08/17/2006 THU 8:46 FAX 704 596 0599 ABM Landscape Services 229-061-04 002/003

08/15/2006 15:32 FAX #1284 002

08/15/2006 TUE 7:53 FAX 704 596 0599 ABM Landscape Services 002/003

AUG-14-2006 15:58 MECKLENBURG CO EMS 704 336 8599 P.02/02

SEPTIC FEE: 400.00
DATE: 8/17/06
CRT [ ] MC JKA

PERMIT APPLICATION FOR A RESIDENTIAL SITE IMPROVEMENT PERMIT / CONSTRUCTION AUTHORIZATION FOR ON-SITE WASTEWATER SYSTEM NEW WELL INSTALLATION OR REPAIR OF EXISTING WELL MECKLENBURG COUNTY GROUNDWATER & WASTEWATER SERVICES

FILE # 67117B

WELL FEE: 400.00
DATE: 8/17/06
CRT [ ] MC JKA

SEPTIC / TYPE APPLICATION: [X] NONE [ ] NEW SYSTEM [ ] ALTERATION [ ] REPAIR [ ] MODIFY PLOT PLAN

WELL / TYPE APPLICATION: [ ] NONE [X] NEW WELL [ ] MAJOR REPAIR [ ] ABANDONMENT

JOB LOCATION INFORMATION:
TAX/PARCEL #: 22937503
STREET ADDRESS: 9330 Ardrey Woods Drive
CITY: Pineville
STATE: NC ZIP: 28277
SUBDIVISION OR MOBILE HOME PARK NAME: Ardrey Woods
LOT #:
TOWNSHIP:
[X] 0-MECKLENBURG [ ] 4-PINEVILLE
[ ] 1-CHARLOTTE [ ] 5-MATTHEWS
[ ] 2-DAVIDSON [ ] 6-HUNTERSVILLE
[ ] 3-CORNELIUS [ ] 7-MINT HILL

BUILDING INFORMATION: N/A
TYPE OF BUILDING:
[ ] SINGLE MOBILE HOME (S) [ ] MODULAR HOME (M)
[ ] DOUBLE WIDE (D) [ ] MULTIPLE FAMILY (U)
[ ] HOUSE (H) [ ] OTHER
HEATED SQUARE FOOTAGE:
NUMBER OF BEDROOMS:
NUMBER OF OCCUPANTS:

FOUNDATION FOR RESIDENCE:
[ ] CONCRETE SLAB [ ] BASEMENT WITH PLUMBING
[ ] CRAWLSPACE [ ] BASEMENT WITH NO PLUMBING

IF PLANNING TO EXPAND/ALTER THE EXISTING SYSTEM INDICATE THE FOLLOWING CHANGES: N/A
NUMBER OF BEDROOMS TO BE ADDED: NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE:
WILL THERE BE A HOME BUSINESS IN THE RESIDENCE? [ ] YES [ ] NO TYPE:

WATER SUPPLY:
[ ] MUNICIPAL (M) [ ] PUBLIC (C) [X] PRIVATE WELL (P) [ ] SHARED WELL (S) [ ] OTHER SPRINGS (O)
PROPOSED USE OF WELL: [ ] N/A [X] IRRIGATION [ ] POTABLE [ ] GEOTHERMAL [ ] OTHER

ARE ANY OF THE FOLLOWING LOCATED ON THE PROPERTY? IF SO, PLEASE SHOW LOCATION ON SITE PLAN/PLAT.

BURIED CABLES, LANDFILLS, STUMPHOLES	[X] YES	[ ] NO	WELLS, SPRINGS, OR WATER LINES	[X] YES	[ ] NO
EXISTING WASTEWATER SYSTEMS	[ ] YES	[X] NO	DESIGNATED WETLANDS	[ ] YES	[X] NO
EASEMENTS OR RIGHT-OF-WAYS	[X] YES	[ ] NO	GRADING/SOIL REMOVAL PERFORMED	[X] YES	[ ] NO

PROPERTY OWNER:
NAME: Crossland Ardrey Woods, LLC
ADDRESS: 227 W. Trade St., Suite 800
CITY: Charlotte
STATE: NC ZIP: 28202
HOME PHONE: WORK PHONE: 704 676 1577
MOBILE PHONE: FAX: 704 531 5181

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:
NAME:
ADDRESS:
CITY:
STATE: ZIP:
HOME PHONE: WORK PHONE:
MOBILE PHONE: FAX:

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? June 6, 2005 Book/page: 18540-843
WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY: Closed June 6, 2005

*An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. 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

NORTH CAROLINA DEPARTMENT OF
ENVIRONMENT & NATURAL RESOURCES DIVISION
OF ENVIRONMENTAL HEALTH ON-SITE
WASTEWATER SECTION

*A Well Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. 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.

William A. Dalenz III 8/15/06
Owner's/Agent's Signature Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
GROUNDWATER & WASTE-WATER SERVICES
700 N. TRYON ST., SUITE 211
CHARLOTTE, NC 28202 704 336-5103 / FAX: 704 336 5894

TOTAL P.02

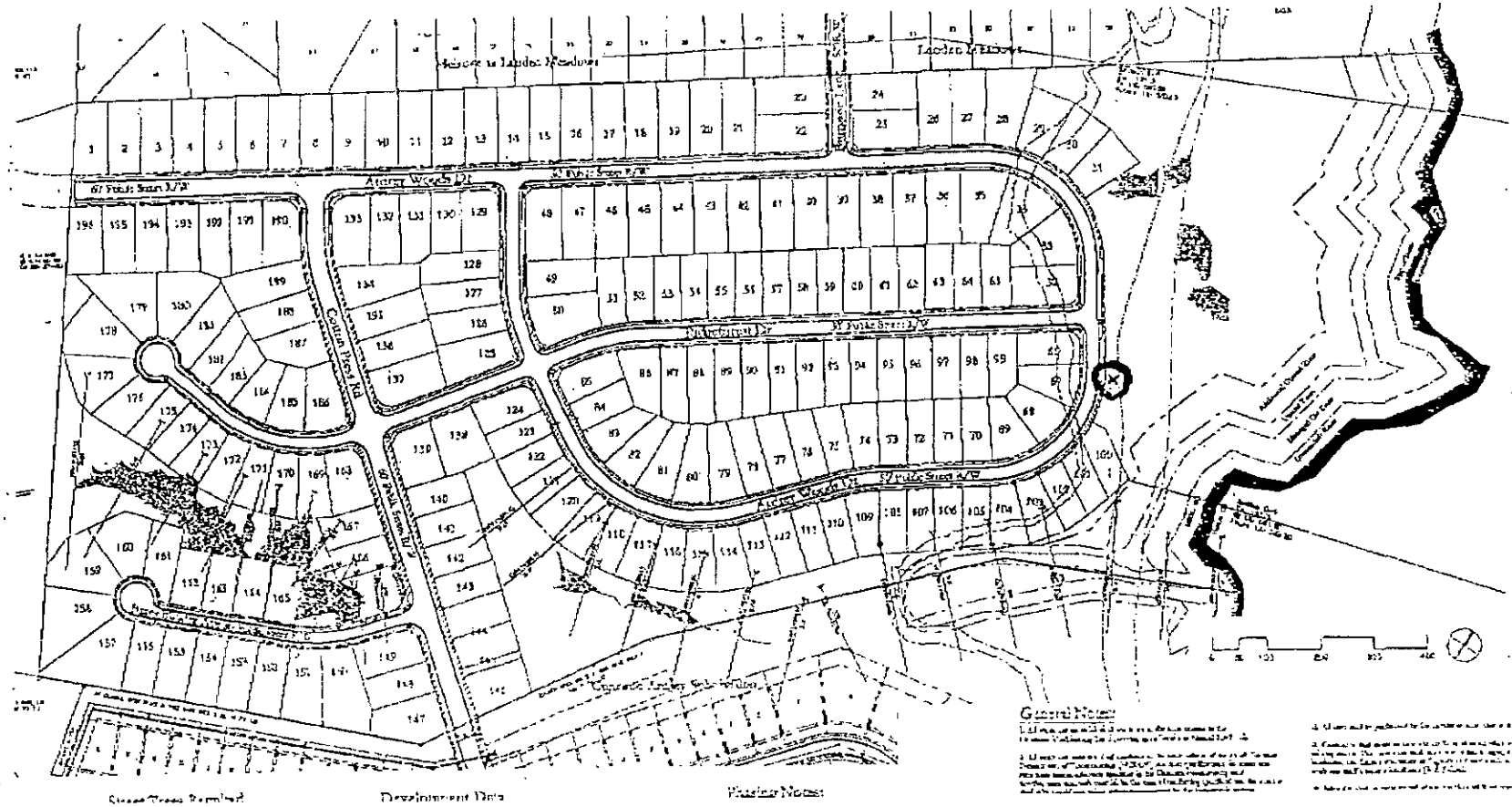
08/17/2006 THU 8:46 FAX 704 596 0599 ABM Landscape Services 003/003

ARDREY WOODS

CHARLOTTE, NORTH CAROLINA

PREPARED FOR:

CROSLAND ARDREY WOODS, LLC



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General Notes:

Street Trees Required

Development Data

Project Notes: