MECKLENBURG COUNTY HEALTH DEPARTMENT

#13981 Application #7687

3 AUG '15 AM11:26

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: Brad Moore
ADDRESS: 7845 Colony Rd Suite C4-230
CITY: Charlotte
STATE: NC ZIP: 28226
PHONE: (704) 507-9525
ALTERNATE PHONE:
E-MAIL: bradmoorecharlotte@gmail.com

PROPERTY OWNER: ☐ SAME AS PERSON FILING APPLICATION
NAME: Jason Mink
ADDRESS: 5712 Lancelot Dr
CITY: Charlotte
STATE: NC ZIP: 28270
PHONE:
ALTERNATE PHONE:
E-MAIL:

JOB LOCATION INFORMATION
TAX PARCEL #: 22710105
STREET ADDRESS: 5712 Lancelot Dr
CITY: Charlotte
STATE: NC ZIP: 28270

SUBDIVISION OR MOBILE HOME PARK NAME: Providence Plantation
LOT #: 6

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: ~~5~~ 3+1 4 Total
NUMBER OF OCCUPANTS: 5

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 finish "pre-plumbed" basement

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 8/3/15 Date

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

Date Received 4/28/78

APT No 13981

T. C. No 227-101-01 PO 04 05

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER (LAST) Providence Acres (FIRST) Inc. (MIDDLE)

2) ADDRESS OF OWNER % Henry G Newsom, PO Box 6113 ZIP 28207 (Charlotte)

3) PHONE NO Home 332-6404 Office 334-9705

4) LOCATION OF PROPERTY Long Valley Rd (STREET OR COUNTY ROAD)

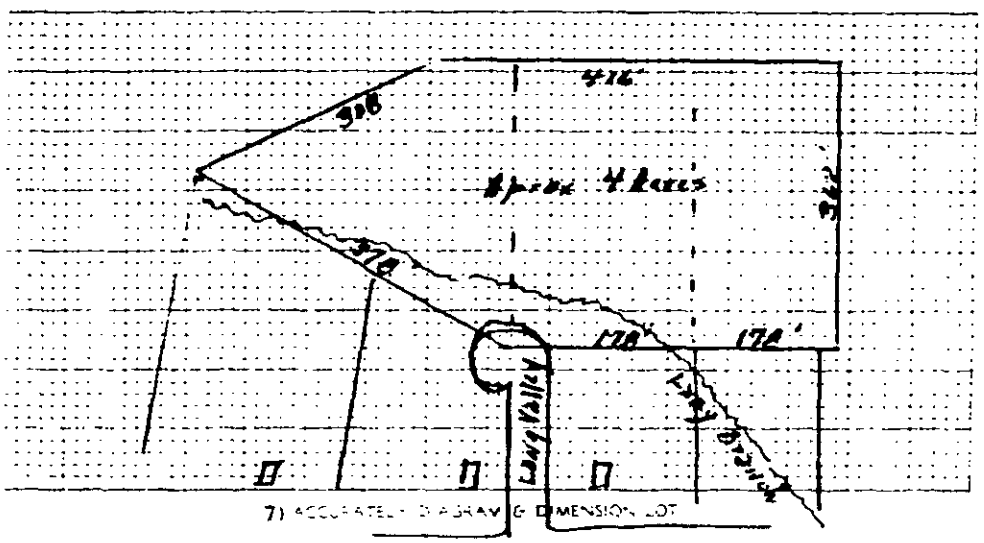
5) SUBDIVISION Prov. Plantation LOT NO 1-4-5 BLOCK NO. 3 *
(Portions of above lots)

MAP BOOK NO 11 PAGE NO. 213

6) DEED REFERENCE DEED BOOK PAGE NO

* Original access off Lancelot Drive.

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation on the property indicated on the plat hereinafter described for the purpose of determining the suitability of the soil thereon for the use of subsurface sewage disposal system with subsurface absorption of effluent disposal.



7) ACCURATELY DIAGRAM & DIMENSION LOT

HIGH RIDGE RD

OWNER Prov. Acres, Inc

By: Henry G Newsom, Pres

EHD-5-76

Environmental Health Department's Copy

NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX H
SITE EVALUATION
(Ground Absorption Sewage Disposal)

[redacted] 13481
PO 327-101-01, 04, 05
4PLS 6, 4, 5

OWNER: Sunshine Acres - Lee
ADDRESS: % Henry L. Nixon
COUNTY: Polk Co. Charlotte, N.C.
LOCATION OF SITE: Long Valley Rd.

DATE REQUESTED:
PLAT NO.:
LOT SIZE: 123 x 160

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) 2-6% PS 10-20% U	(S) 2-6% PS U	S PS U	S PS U +
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S Clay (PS) U	S Rl. clay PS (U)	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S Blocky (PS) U	S [illegible] PS (U)	S PS U	S PS U
4. SOIL DEPTH (In.)	(S) 48" PS U	S Depth PS Unsuitable (U)	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock)	(S) Rock PS U	(S) Rock PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) Well PS Moderate U Water	S Perched PS Water Table (U)	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S Moderate (PS) U	S Very PS Slow (U)	S PS U	S PS U
8. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	Provisionally Suitable	Unsuitable		
SOIL SERIES	Cecil	Chewacla		

S - Suitable PS - Provisionally Suitable U - Unsuitable

* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

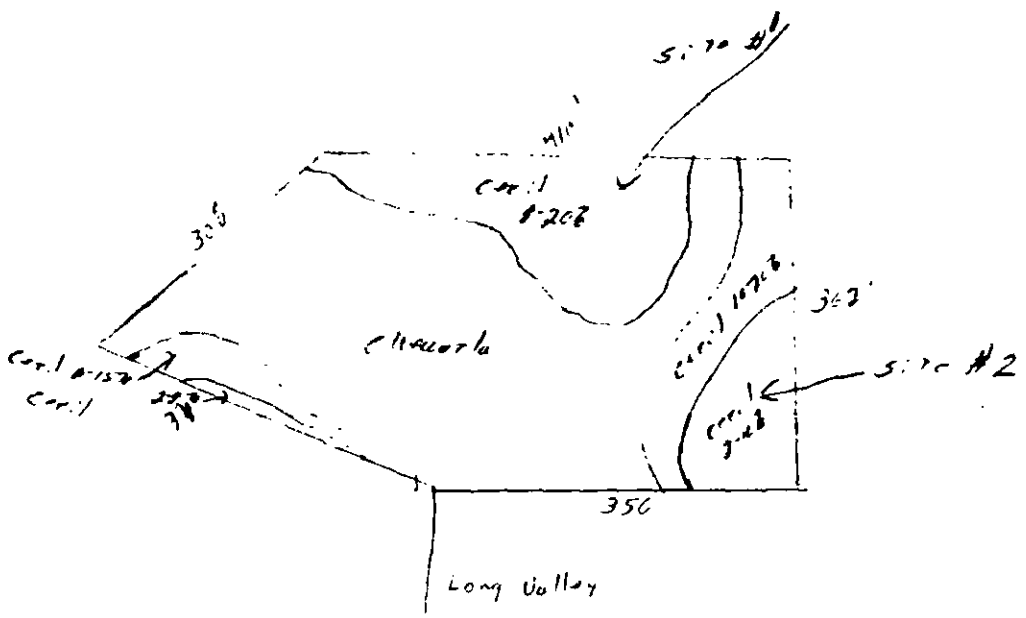
Recommendations/Comments: Note - Plans for [redacted] Innovative system location [redacted] should be reviewed before permit is issued for Lot #2

Described By: William B. Mack

Title: Soil Scientist Date: 5-31-78

DHS Form 2601 (2/77)
Sanitation

✓


Site #1
410'
Cont
0-20%
300'
Chaparral
Cont 10-20%
362'
Site #2
Cont
0-15%
Cont
Cont
3-8%
350'
Long Valley

Serial No. 1338

PTR No. 13981

T C No P.O. 227-101-01

Date Issued 5-31-78

Mod Date -----

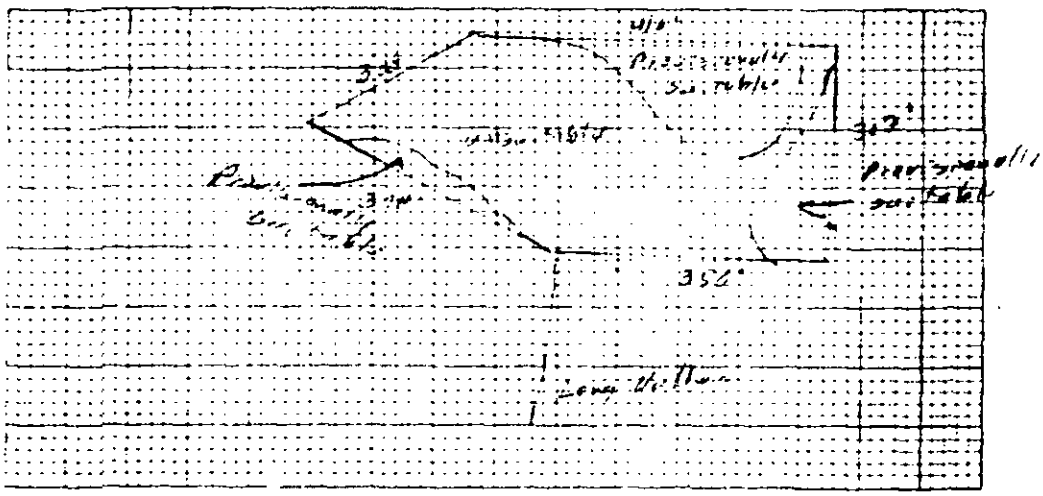
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Providence Acres Inc
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER c/o Henry G. Newsom, P.O. Box 6113 Charlotte ZIP 28207

LOCATION OF PROPERTY Long Valley Road
(STREET OR CO. RTY ROAD)

SUBDIVISION Providence Plantation LOT NO 1,4,5(portions) BLOCK NO 3



PLOT PLAN

This lot was evaluated and inspected by the Mecklenburg County Department of Environmental Health. The investigation was conducted in accordance with the information contained in this report.

The permit for septic tank installation on this lot is **PROVISIONALLY SUITABLE**. The said lot is approved for the installation of one single family residence with subsurface soil absorption effluent disposal subject to the following terms and conditions:

1. [illegible] the Mecklenburg County Department of Environmental Health [illegible] wastewater treatment [illegible]
2. The [illegible] determined by the Mecklenburg County Department of Environmental Health [illegible] the rate obtained above, and in the [illegible]
3. [illegible] system installation [illegible]
4. The [illegible] performed on the [illegible] which [illegible] Department of Environmental Health [illegible] located as acceptable for [illegible] system.

This approval is granted based on the laws of the State of North Carolina and the rules and regulations of the North Carolina Department of Human Resources, Division of Health Services and the Mecklenburg County Health Commission which were in effect on the date of issuance and is void if at any time in the future prior to completion of the system these laws, rules and regulations are changed such that this approval would not have been granted had the new or revised laws, rules, and regulations been in effect on the issue date.

William M. Hankins
Soil Scientist

John R. Hinson
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Received 9/[illegible]/[illegible]

ICAR(S) Application No. 13981

T C No. [illegible]

Map Date ____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

Application for an
Installation, Construction, Alteration, and/or Repair Permit
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

The owner of that property described hereinafter hereby applies to the Mecklenburg County Department of Environmental Health for a permit to:

1) ✓ Install or Construct 2) ____ Alter or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption, effluent discharge

3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ___Yes___No
Residence ✓Yes ___No
4 No. of Bedrooms 4
5 Business Use — Max No Employees ___
6 Washing Machine ✓Yes ___No
7 Garbage Disposal ✓Yes ___No
8 Dishwasher ✓Yes ___No
9 Water Supply ✓
A Individual Well ___
B Governmental System ___
C Community System
1 Well source ___
2 Governmental source ___
10 Sewage System
House located within 200 feet of public sewer ___Yes ✓No
House located within 200 feet of community sewer ___Yes ___No
11 FHA Case No ___
12 VA Case No ___

13) NAME OF OWNER Stuart C. K.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 3[illegible] Indian Rock Rd Pineville NC 28165

15) PHONE NO Home 527-[illegible] Office 527-5217

16) LOCATION OF SYSTEM Lot 3 Blk 3 Ivy Valley Rd.
STREET OR COUNTY ROAD

17) SUBDIVISION Indian Rock Lot No 1 Block No. 3

Map Book No ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES NO DATE RUN 5-1-75

20) PTR NUMBER (See instructions) [illegible]

The undersigned person hereby agrees that he has read the foregoing application and that the contents of same are true. It is understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

DATE OF APPLICATION 5-26-75

OWNER C. K. Stuart

EHD-5-74

Environmental Health Department's Copy

Serial No. 2262

LA No. 13981

Date Issued September 26, 1978

T C No. P.0.221-101-01,04,05

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

IMPROVEMENT PERMIT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Stewart (LAST) C. (FIRST) L. (MIDDLE)

ADDRESS OF OWNER 3103 Indian Rock Road, Matthews, NC ZIP 28105

LOCATION OF LOT Long Valley Road (STREET OR COUNTY ROAD)

SUBDIVISION Providence Plantation LOT NO PO 1,4,5 BLOCK NO. 3

MAP BOOK NO. PAGE NO

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, on an on-site inspection of the said lot; and upon the information supplied in the "Application for an Installation, Construction, Alteration, and/or Repair Permit", number 13981. This approval is subject to the following terms and conditions

1. That the nitrification field be installed, constructed, altered and/or repaired in the same area where the soil investigation was run
2. That an "Installation, Construction, Alteration, and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altred, and/or repaired and that the system be installed in accordance with same

This approval may be revoked and the building inspection department requested to revoke any building permits which have been issued to authorize construction on the said lot if at any time it is determined that any information contained in the "Application for an Installation, Construction, Alteration, and or Repair Permit" is not correct or is untrue or that the septic-tank system is not being installed, constructed, altered and or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit

Stephen J. Wood
Environmentalist

John R. Adkisson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

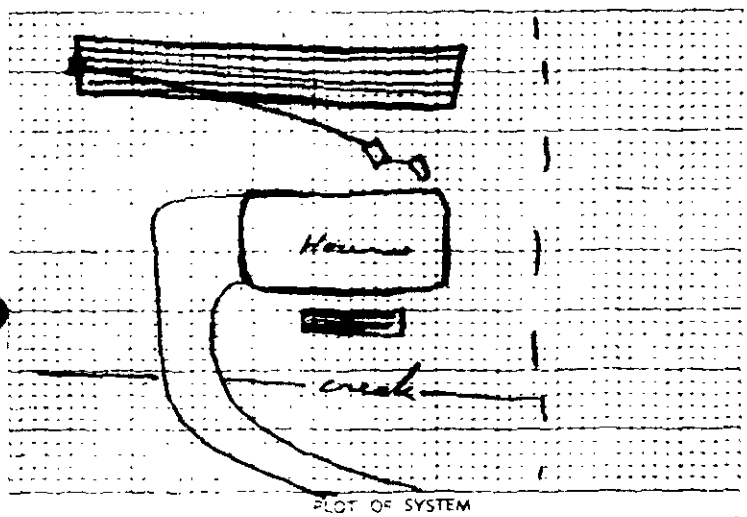
Date Issued 7 Nov. 78 Serial No. 2163 ICAR(S) Permit No 13981

T C No 227-101-01

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Permission is hereby granted to ✓ Install or Construct, ___ Alter or Repair the individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge as specified herein at the described location. This permit is granted based upon the information supplied on application 13981, dated 9/26/78. This permit shall be void and of no effect if the information provided in the application is found to be incorrect in any respect. All work shall be completed on or before 7 Dec after which date this permit shall be null and void.



PLOT OF SYSTEM

Permitted Flow P.S.

Septic Tank Size 1500 gal (compartment)

Type Distribution PC Conc.

Absorption Area Information

Total Length 660' & 167'

Number of Lines 5 & 4

Distance from Water Line 10'

Distance from Property Line 10'

Distance to Well city

Owner's Name Cecil Leon Stewart

Location of Property 3220 Long Valley Rd.

This permit is issued subject to the requirements as set forth in the Regulations of the Mecklenburg County Board of Health and is effective from the date of the granting of this permit. A certificate of approval must be obtained from the Environmental Health Director before any system can be covered up or otherwise rendered inaccessible for inspection and use. **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 or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.**

COMMENTS: (15' x 132' x 17" stone) 12' x 42' x 17" stone

pump to cycle 250 gal

Date of Site Visit

Environmentalist Steve Wood

* If this permit is for the installation or construction of a new system, it must be signed by the division or a section head of the Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

EHD-5-76

Environmental Health Department's Copy

Date Issued Jan. 5, 1978 Serial No. 2205 C of A (s) No 13981

T C No 227-101-01

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner Stewart (LAST), Cecil (FIRST) Leon (MIDDLE)

Location of Property 3220 Long Valley Road

Application Number 13981 Permit Number 13981

Inspection Data:

Liquid Capacity of Tank 1500 gallons + 1000 gallon pump station Tank Material precast concrete

Total Length of Drain Tile 660' + 167' Number of Lines 5 + 3

Depth of Filter Material 17" Cover Depth 15-24"

Water Supply Source well Distance from Water Source 200'

Excavation Inspected — (DATE) Tank Inspected Jan. 5, 1978 (DATE)

Nitrification Field Inspected Jan. 5, 1978 (DATE)

Washing Machine Line Inspected, If Applicable Jan. 5, 1978 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been ✓ installed or constructed altered or repaired in accordance with the permit issued and the regulations of the Mecklenburg County Health Commission in effect on the date of issuance of the permit. The issuance of this Certificate of Approval does not in any way guarantee that the system will operate properly or relieve any person now or hereafter owning, utilizing or using such system from any and all liability resulting from the failure of the system to operate properly. This Certificate of Approval is issued subject to those restrictions and conditions shown on the permit and in addition to those listed below under comments. This Certificate of Approval 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.

Comments moved Jan 11, 1978 after checking pump and re-checking connection between tanks. Ok'd

Michael B. Sexton
Environmentalist

EHD-S-76

Environmental Health Department's Copy

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	08/06/15	**Amount:**	100.00
Receipt #:	95644	**Tendered:**	100.00
Check / Auth #:	VISA 006044	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: 200000
Contractor: MOORE, BRAD
Attn:
Address: 6900 PROVIDENCE LANE WEST
Address:
City/State/Zip: CHARLOTTE, NC 28226

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	Use Existing System 5712 LANCELOT DR		1	100.00	100.00

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: BRAD MOORE

Bill To:

BRAD MOORE
6900 PROVIDENCE LANE W

Charlotte, NC 28226

Single Payment

Transaction Date:	08/06/2015 7:10 AM Pacific Time
Pay Method:	VISA **********5016
Approval #:	006044
Trace Number:	4499db16-a0d8-45c1-89b5-d6c0877a4244
Amount:	$100.00

Payment Amount:	$100.00
Total:	**$100.00**

Thank you for your payment.

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 LE 8/6/15 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. ☐

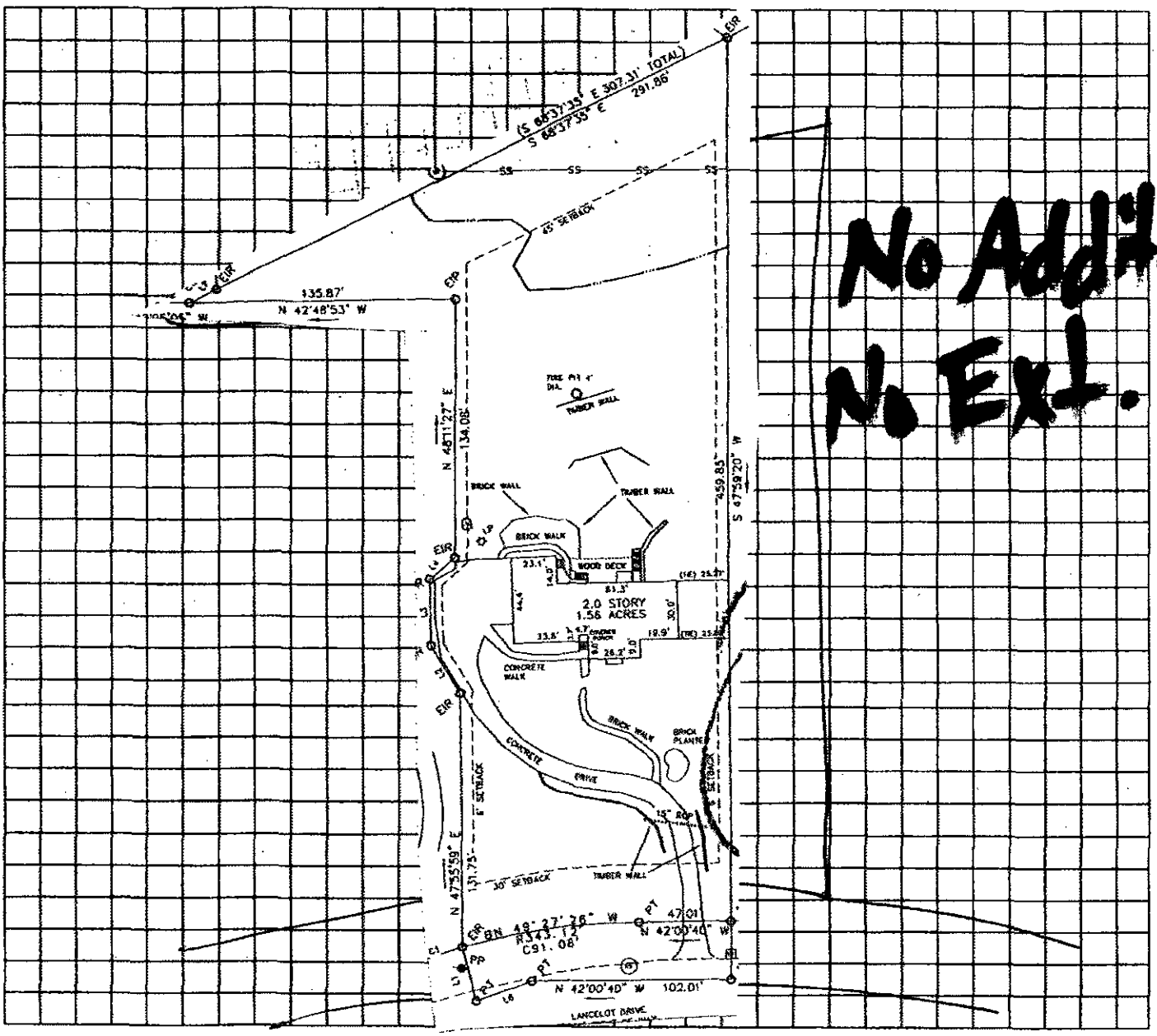
Certified operator contract is on file. ☐ _____

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: 5712 Lancelot Tax Parcel #: 22710105



*The undersigned, an authorized agent of the Mecklenburg County Health Department, certifies that the Department has approved the Request for the "Job Location" contained in this document. This approval is granted in accordance with the provisions of Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal and Water Supply Wells in effect at the time of issuance of the permit and is subject to the following provisions:

- *No work shall be conducted on the septic tank system until* an installation, construction, alteration and/or repair approval is granted by this Department.
- This permit is not transferable.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

Permit approved. Existing sys. is large enough to handle additional bedroom based on 0.2LTA

REHS Signature 8/20/15 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: 01/03/11

Fax Transmission

To:	Meck Environmental Dept	**From:**	Brad Moore
Fax:	+1 (704) 3366894	**Date:**	8/3/2015 9:39:52 AM
RE:	Fax sponsored by Clicktofax.com	**Pages:**	3

Comments: