13284
12180

MECKLENBURG COUNTY
HEALTH DEPARTMENT

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

11 MAY '21 AM10:43

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

PERSON FILING APPLICATION:
NAME: B2L Construction
ADDRESS: 13000 South Tryon St Ste F378
CITY: Charlotte
STATE: NC ZIP: 28278
PHONE: (704) 559-9573
ALTERNATE PHONE:
E-MAIL: jamel@b2lconstructions.com

PROPERTY OWNER: ☐ SAME AS PERSON FILING APPLICATION
NAME: Jake Colletta
ADDRESS: 14321 Thompson Road
CITY: Mint Hill
STATE: NC ZIP: 28227
PHONE: (860) 713-9889
ALTERNATE PHONE:
E-MAIL: jakecollettafilms@gmail.com

JOB LOCATION INFORMATION
TAX PARCEL #: 19506126
STREET ADDRESS: 14321 Thompson Road
CITY: Mint Hill
STATE: NC ZIP: 28227

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: 3

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) 5-10-2021
Owner's/Agent's Signature Date

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

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208 OFFICE: (980) 314-1680, FAX: 704-336-6894

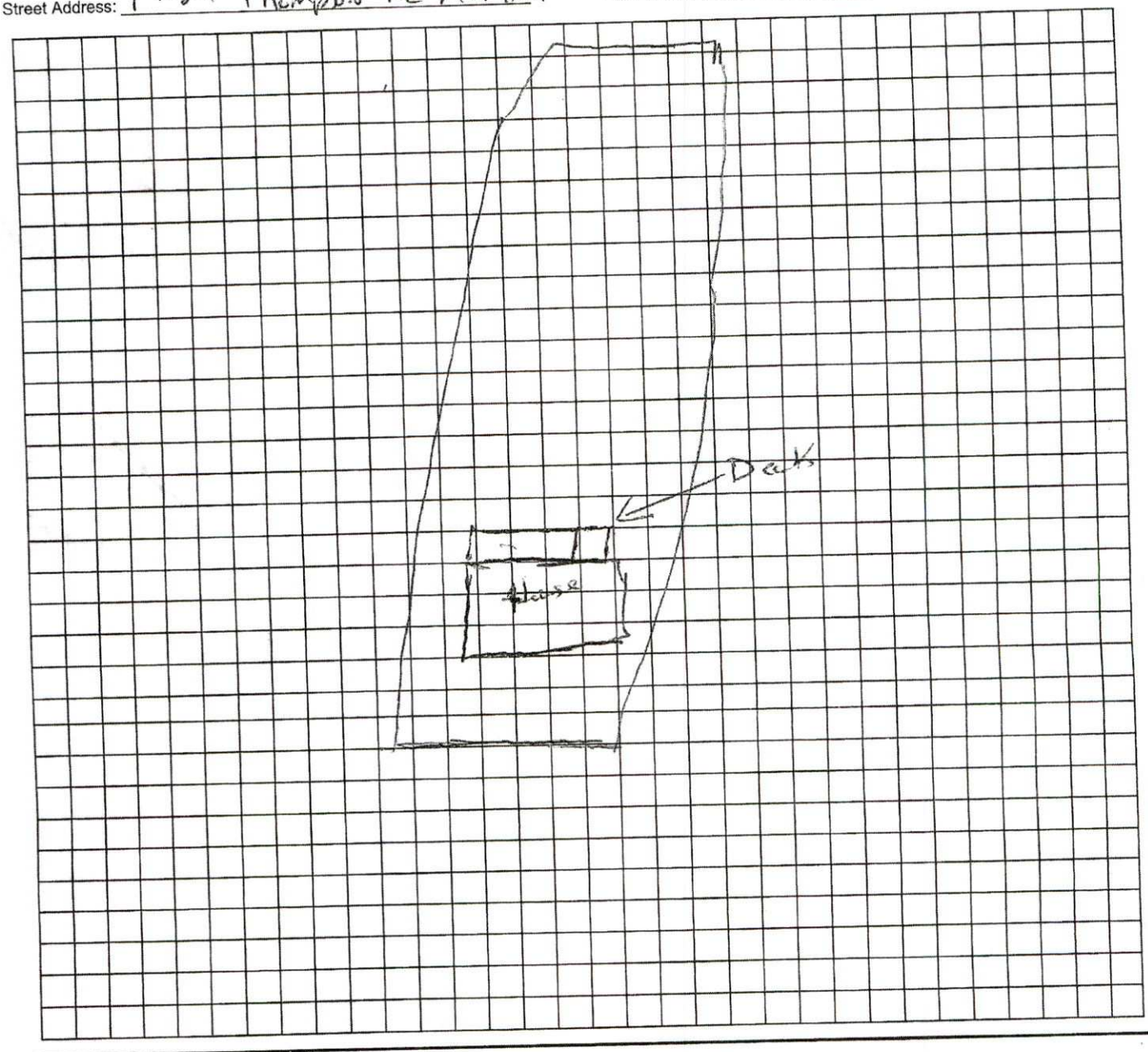
Revised on: 03/27/19

PROPOSED PLOT PLAN

File #: _____

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: 14321 Thompson Rd Matthews Tax Parcel #: 19506126



*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.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

Customer meets required set backs.

REHS Signature

5-10-2021
Date

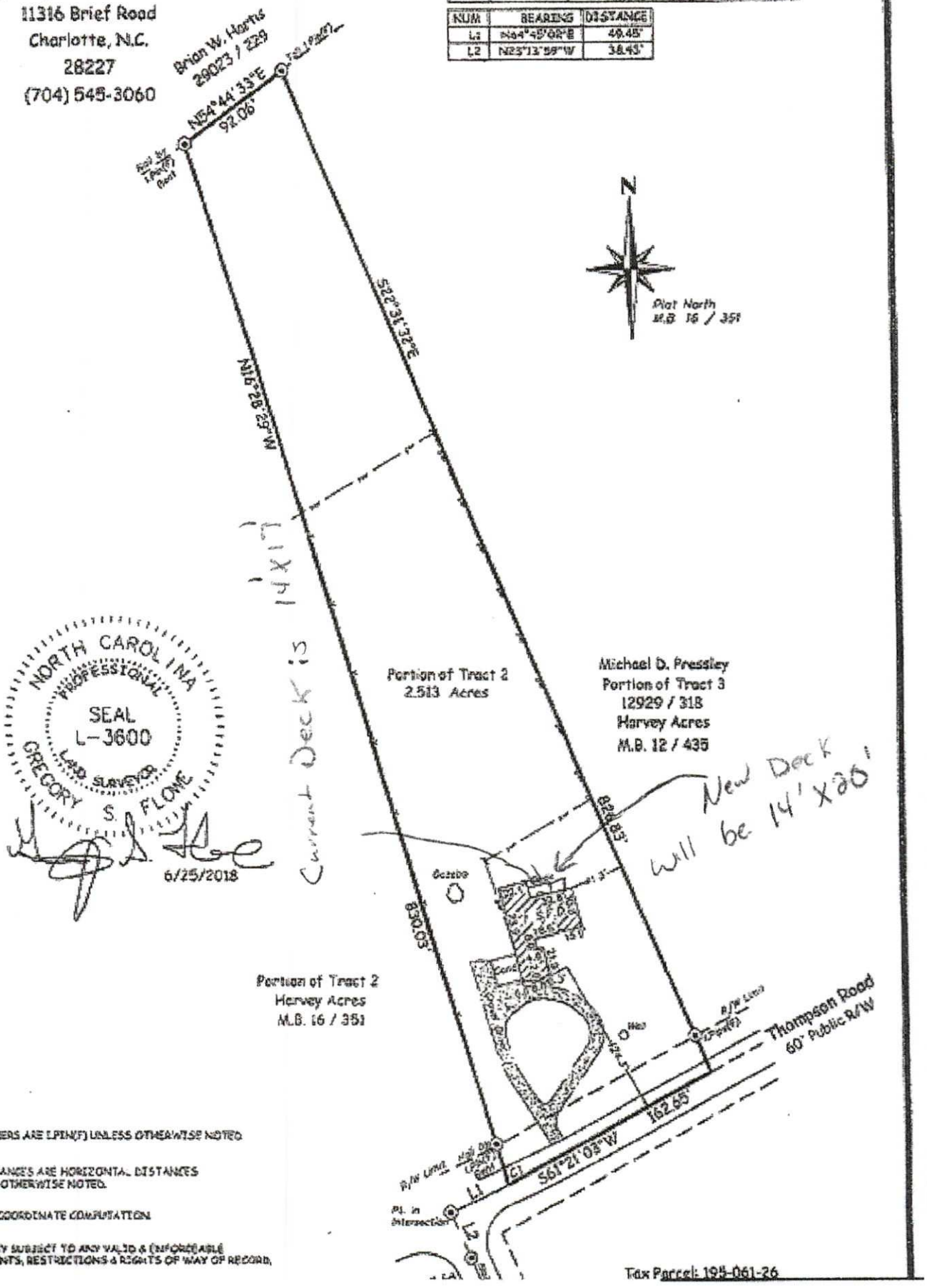
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Revised on: 03/27/19

Surveyed By: Ben M. Flowe & Son
11316 Brief Road
Charlotte, N.C.
28227
(704) 545-3060

NUM	ARC	RADIUS	BEARING	DISTANCE
C1	15.64'	778.98'	N61°55'38"E	15.64'

NUM	BEARING	DISTANCE
L1	N64°45'08"E	40.45'
L2	N23°13'59"W	38.45'



NORTH CAROLINA PROFESSIONAL SEAL L-3600 LAND SURVEYOR GREGORY S. FLOWE
6/25/2018

NOTE:
ALL CORNERS ARE I.P.IN(F) UNLESS OTHERWISE NOTED.

NOTE:
ALL DISTANCES ARE HORIZONTAL DISTANCES UNLESS OTHERWISE NOTED.

NOTE:
AREA BY COORDINATE COMPUTATION.

NOTE:
PROPERTY SUBJECT TO ANY VALID & ENFORCEABLE EASEMENTS, RESTRICTIONS & RIGHTS OF WAY OF RECORD.

Tax Parcel: 195-061-26

MECKLENBURG COUNTY
Health Department

Gibbie Harris, MSPH, BSN
Director

(980) 314-9020

Addendum to Application for
New Well or Septic System Installation
Abandonment or Repair of Existing Well or Septic System

Your signature below confirms the following:

1. The information on the application is true, complete and accurate.
2. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliances with applicable laws and rules.
3. I acknowledge that Jamel Dixon, B2L Construction, LLC is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at 14321 Thompson Rd Mint Hill.
   Number Street Town
   (Or Parcel Number)

Jake Colletta
Property Owner (print name)

Jake Colletta
Property Owner (signature)

May 10, 2021
Date

Owners Authorization

Final Audit Report 2021-05-10

Created:	2021-05-10
By:	jamel dixon (JAMEL.DIXON@IKATLE.COM)
Status:	Signed
Transaction ID:	CBJCHBCAABAAqn3N3-WW_JJq33loG78xD-SouJfkBDDF

"Owners Authorization" History

Document created by jamel dixon (JAMEL.DIXON@IKATLE.COM)
2021-05-10 - 6:50:02 PM GMT- IP address: 76.203.141.229

Document emailed to Jake Colletta (jakecollettafilms@gmail.com) for signature
2021-05-10 - 6:51:12 PM GMT

Email viewed by Jake Colletta (jakecollettafilms@gmail.com)
2021-05-10 - 6:51:53 PM GMT- IP address: 71.71.148.115

Document e-signed by Jake Colletta (jakecollettafilms@gmail.com)
Signature Date: 2021-05-10 - 6:52:29 PM GMT - Time Source: server- IP address: 71.71.148.115

Agreement completed.
2021-05-10 - 6:52:29 PM GMT

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	05/11/21	**Amount:**	100.00
Receipt #:	128704	**Tendered:**	100.00
Check / Auth #:	VISA 06123G	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: 200000
Contractor: DIXON, JAMEL
Attn:
Address:
Address:
City/State/Zip: ,

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	Use Existing System 14321 THOMPSON ROAD		1	100.00	100.00

Outstanding Balances

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