SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

☐ NEW SEPTIC ☐ REPAIR ☑ USE EXISTING ☐ MODIFIED PLOT PLAN ☐ ALTERATION

File Number: 12426B

Assigned Inspector: Bradeen

☐ IP $250.00: _____ Initial/Date

☐ IP Commercial $450.00: _____ Initial/Date

☐ CA & OP $400.00: _____ Initial/Date

☐ Alteration Fees $300: _____ Initial/Date

☐ Modified Plot Plan Fees $100.00: _____ Initial/Date

☐ Use Existing Fees $100.00: _____ Initial/Date

☒ Use Existing Approved ☐ Use Existing Denied

☐ Send IP permit for signature: _____ ☐ Signature received: _____

☐ Floor plans reviewed

☐ Generate CA ☐ Approve as Noted in Winchester

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

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

☐ Certified operator contract is on file: _____

☐ Septic file complete: _____

☐ Release final hold in Winchester: _____

Comments:

Public Health

12426B

EXISTING SYSTEM APPROVAL

☑ Existing System Approval
- ☑ Site modification (e.g., storage shed) or footprint addition with no DDF or wastewater strength increase
- ☐ Reconnection when the proposed facility is in the same footprint as existing/previous facility

☐ Construction Authorization/Notice of Intent to Construct

[issued for reconnection when the proposed facility is not in the same footprint as existing/previous facility pursuant to Session Law 2023-77, Section 5.(c)]

[certified inspectors are not authorized to approve reconnections outside of footprint pursuant to Session Law 2023-77, Section 5.(c)]

Applicant: John Clevenger
Mailing Address: 6423 Manitoba Ln
City: Charlotte
State: NC Zip: 28277
Phone #: 6154779315
Email: john@probuildcarolinas.com

Owner: John Evans
Mailing Address: 5431 Eagle Lake Drive
City: Charlotte
State: NC Zip: 28217
Phone #: 7046613149
Email: johnevans@mvalaw.com

Parcel #: 14108236
Property Location/Address: 5431 Eagle Lake Drive Charlotte, NC 28217

Facility Type: ☑ House/Modular ☐ Mobile/Manufactured Home ☐ Business ☐ Other: _____

Operation Permit/ATO #: _____ Design Daily Flow: _____ GPD
Number of Bedrooms: 2 Max # Occupants: 4 Other: _____
Wastewater Strength: ☐ Domestic ☐ High Strength ☐ Industrial Process Wastewater
Water Supply: ☐ Private well ☐ Public well ☐ Shared well ☑ Municipal Supply ☐ Spring ☐ Other: _____

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:

☐ BEDROOM ☐ BATHROOM ☐ KITCHEN ☐ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☐ SUNROOM ☐ PORCH ☑ DECK ☐ OTHER

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:

☐ DETACHED GARAGE ☐ DETACHED GARAGE WITH PLUMBING ☐ POOL HOUSE ☐ SHOP ☐ BARN
☐ STORAGE SHED ☐ DETACHED PORCH / DECK ☐ OTHER

Site plan or plat showing the locations of the existing and proposed facilities, existing wastewater systems and repair areas, existing and proposed water supplies, easements, rights-of-way, encroachments, artificial drainage, and all appurtenances is attached:

☑ Yes ☐ No

IF THE INFORMATION IN THE APPLICATION FOR AN EXISITING SYSTEM AUTHORIZATION (ESA) IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE ESA 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 the 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. I understand that if the information in the application is falsified, changed, or the site is altered, then the Existing System Approval shall be invalid.

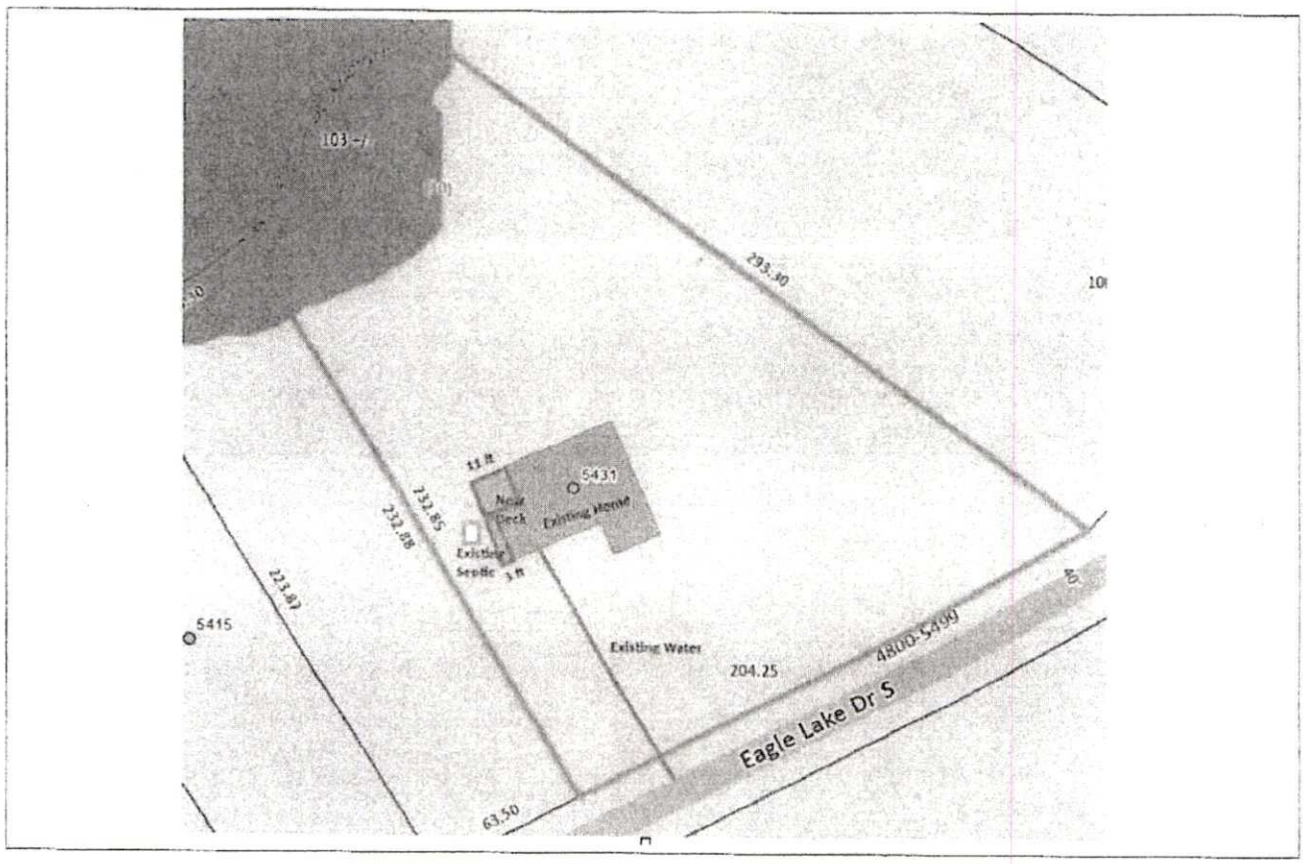
Property owner's signature (required) — Date: 8/20/26

Applicant's signature (required) — Date: 8/19/2026

SITE PLAN

Please include on this site plan:

- locations of the existing and proposed facilities;
- existing wastewater systems and repair areas;
- existing and proposed water supplies; and
- easements, rights-of-way, encroachments, artificial drainage, and all appurtenances.



ll the following must be checked for approval:

- [x] No current or past uncorrected malfunction of the system as described in 15A NCAC 18E .1303(a)(2)
- [x] DDF and wastewater strength for the proposed facility or site modification do not exceed that of the existing system
- [x] Proposed facility or site modification meets the setbacks in Section .0600 of 15A NCAC 18E

Approval Conditions: Approved. Deck footers are 5 ft from septic TANK (footers were already dug).

Inspector's Printed Name: Braedon Shelton Inspector Certification #: 2661

Inspector's Signature: Braedon Shelton Date: 8/25/26

The existing system approval expires one year after the date of issuance.

See attached site sketch

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	08/20/26	**Amount:**	100.00
Receipt #:	163009	**Tendered:**	100.00
Check / Auth #:	MC 261688	**Returned:**	0.00
Received By:	PLACILJ		

Account Information

Account #: 200000
Contractor: PROBUILD OF THE CAROLINAS
Attn: ERIN BUZZELLI
Address:
Address:
City/State/Zip: ,

Item	Description	Quantity	Unit Price	Total Price
0705	Use Existing System 5431 EAGLE LAKE DR			

Permit#

SALE
Mecklenburg Co Permit
2145 Suttle Avenue
4th Floor
Charlotte, NC 28208
980-314-2971

08/20/26	17:21:09
Merchant ID :	404164
Terminal :	451-778-578
Sequence # :	000001
Auth Number	261688

AMOUNT:	$ 100.00
CONVENIENCE FEE:	$ 2.50
TOTAL:	$ 102.50

CARD ENTRY MODE MANUAL
MasterCard ··· 7116

x Phone Payment
SIGNATURE

I agree to pay above total amount in accordance with card issuer's agreement (merchant agreement if credit voucher). Retain this copy for statement verification.

Thank you!

MERCHANT COPY

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
75.00					

8/25/26

* old TANK 5' from footer holds

- ~~[illegible]~~ How far will Deck extend from footers ??

- Have affidavit signed ??