

4919 BEATTIES FORD RD

03929122

6/26/2007

duponbj

Groundwater and Wastewater Services File Imaging Project
May 2007
Barcode Font = IDAutomationHC39M

Mecklenburg County
Health Department

June 13, 2002

Joseph Powell
926 Plumstead Road
Charlotte, NC 28216

Dear Mr. Powell:

The State required inspection of the Type IIIb septic system, which serves as the wastewater treatment and disposal system for Rameses Temple located at 4919 Beatties Ford Road, Charlotte, North Carolina, was completed on 5/6/02. The results of this inspection are enclosed.

Thank you for your time and cooperation. If you have any further questions you can contact me at (704) 336-5571.

Sincerely,

David Cornelius, R.S.I, Coordinator
Managed Systems Program
Individual Water and Wastewater Systems

Enclosure: Inspection Report
Septic System Owner's Guide

N. C. Department of Environment and Natural Resources
Division of Environmental Health

INSPECTION OF ENGINEERED SUBSURFACE WASTEWATER SYSTEM

MECKLENBURG COUNTY — Health Department
Name of Establishment — MENS LODGE
7238A — Permit/Project No.
4919 BEATTIES FORD RD. — Location
Type of Establishment
Design Flow
DAMESES TEMPLE — Owner/Agent
4919 BEATTIES FORD RD. CHARLOTTE — Address
Phone
N/A — Operator
Address
Phone
Remarks III b

	Yes	No	REMARKS
1. ESTABLISHMENT:			
Type, size, and sewage flow in accordance with permit?	☑	☐	
2. COLLECTION SYSTEM:			
No evidence of leaks into or out from sewer lines/manholes?	☐	☐	
Free of blockages/solids buildup in lines or manholes?	☐	☐	
3. TANKAGE (Grease Traps/Lift Stations/Septic/Dosing Tanks):			
Tank risers accessible and surface water diverted?	☑	☐	
Tanks and access manholes structurally sound, watertight?	☑	☐	
Sanitary tee(s) in good working condition?	☐	☑	
Tanks pumped, cleaned out as needed?	☐	☑	
4. RAW SEWAGE LIFT STATION (if present):			
Required pumps present, operating, and cycling properly?	☐	☐	
High-water alarm present and operating properly?	☐	☐	
Floats/pipe/valves/disconnects in good working condition?	☐	☐	
Control panel enclosure/components in good condition?	☐	☐	
5. EFFLUENT DOSING SYSTEM:			
Effluent appears clear, free of excess solids?	☑	☐	UNABLE TO DETERMINE IF HIGH WATER ALARM IS OPERATING PROPERLY.
PUMP SYSTEMS:			
Required pumps present, operating, and cycling properly?	☑	☐	
High-water alarm present and operating properly?	☐	☐	
Floats/pipe/valves/disconnects in good working condition?	☑	☐	
Control panel enclosure/components in good condition?	☑	☐	
Elapsed time readings: _____ _____ _____			
SIPHON SYSTEMS:			
No evidence of overflow or siphon leakage?	☐	☐	
Siphon(s) appear to be working/alternating properly?	☐	☐	
Bells and vents free of debris and in good condition?	☐	☐	
6. GROUND ABSORPTION FIELDS:			
No evidence of effluent surfacing/reaching surface waters?	☑	☐	
Minimal ponding in subsurface trenches?	☑	☐	
Surface water being effectively diverted away?	☑	☐	
Diversions/ditches/swales/tile drains properly maintained?	☑	☐	
Line cover/vegetation adequate/maintained as needed?	☑	☐	
Protected from traffic, destructive uses?	☑	☐	
Distribution devices in good condition, working properly?	☑	☐	
Repair area properly reserved, maintained?	☑	☐	
LOW-PRESSURE PIPE DRAIN FIELDS:			
Turnups/cleanouts/valves intact and accessible?	☐	☐	
No effluent standing in lower laterals?	☐	☐	
Laterals free of excess solids, cleaned out as needed?	☐	☐	
Pressure head is properly adjusted?	☐	☐	

OVERALL CONDITION AND OPERATION OF SYSTEM: NO EFFLUENT SURFACING

SUMMARY OF IMPROVEMENTS NEEDED:

Improvement	Repair Within (Days)

DATE: 5/6/02 SIGNED: [signature] RST. AGENT
Division of Environmental Health

DENR 3702 (Revised 3/98)
On-Site Wastewater Section (Review 12/98)

– over –

INSPECTION STATEMENT
MECKLENBURG COUNTY HEALTH DEPARTMENT

Rameses Temple/ Elliot Martin
926 Plumstead Rd.
Charlotte, NC 28216

Please Make Check Payable To:

Mecklenburg County Health Department
700 N. Tryon Street Suite 211
Charlotte, NC 28202

Note: THIS COMPLETED FORM MUST ACCOMPANY PAYMENT!

DESCRIPTION OF PROPERTY

Name	Site Address	Tax Parcel	File Number	System Type
Rameses Temple	4919 Beatties Ford Rd.	03929122	7238A	IIIb
				Total Amount Due: $85.00

Please use the following space below, to make any corrections to property information.

Name JOSEPH M. POWELL

Site Address 4919 BEATTIES FORD RD.
CHARLOTTE, NC 28216

# of Bedrooms _____

Paid $85 Chk# 2491 6/12/02 JC

BILL INFORMATION

Billing Date: 4/5/02

Payment Due Date: 5/5/02

Direct Questions Concerning This Bill to .....(704) 336-5571

☐ *Please check if you have a well.*

Make Check Payable To Mecklenburg County Health Department
Your Cancelled Check Is Your Receipt

DO NOT SEND CASH

0743

Rameses

Temple

Buttin Ford

Road

CERTIFICATE OF COMPLETION/OPERATION PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 7239-A DATE: 8-21-96

TC: 034-29-1-22 ☐ L ☑ CRT

SERIAL No 16842

Name of Owner RAMESES TEMPLE Juris.: _____

Address of Property 4919 BEATTIES FORD RD.

Inspection Data:

Tank Material PCC

Total Length of Drainfield 756

Number of Lines 8 @ see plan

Cover Depth 12"

Water Supply Source CMUD

Distance to Water Source _____

Excavation Inspected 8-20-96

Tank(s) Inspected 8-20-96

Wash Line Inspected —

High Water Alarm Inspected 9-20-96

PLOT

Design 1.996, 2000 ST, 2000 DT, P1 INV CECIL CTR# see grading 67

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☑ installed or constructed ☐ altered or repaired
☑ in accordance with the permit issued ☐ as detailed in the plot above

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. This issuance of this

☐ Certificate of Completion ☑ 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. 1990 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/revocation of this permit.

COMMENTS: _____

Type III

Environmental Health Specialist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

Bill 6/7-1897 10:00 Thurs 2400 PL 300 CHT Randy Neal CHA

W-7238A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

11/6/92 DJ.F.

Prop # 141-99-4285 [ ] CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102 Roger Browne

Date: 6/7-1883

PERSON FILING APPLICATION:

NAME: Amos (last) MARVIN (first) O (mi)

ADDRESS: 2517 TANGLE BROOK LU PHONE: (704) 391-2530

CITY: CHARLOTTE STATE: N.C. ZIPCODE: 28216

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 039-291-22

STREET ADDRESS: 4919 BEATTIES FD. RD.

CHARLOTTE, N.C. 28210

ZONING:

PROPERTY OWNER: Elliot Mallon 392-1723 (trustee?) Walter Lewis 394-9585

NAME: RAMESES TEMPLE #21 (last) (first) (mi)

c/o mr Elliot Mallon

ADDRESS: 926 PLUMSTEAD RD PHONE: (__) 391-2530

CITY: CHARLOTTE STATE: N.C. ZIPCODE: 28216

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
[X] 0 Mecklenburg County [ ] 2 Davidson [ ] 4 Pineville [ ] 6 Huntersville
[ ] 1 Charlotte [ ] 3 Cornelius [ ] 5 Matthews [ ] 7 Mint Hill

TYPE APPLICATION (check one):

LOT NUMBER: LOT SIZE (in acres): 3.44

[ ] SOIL TEST - INDIVIDUAL LOT (D)
[X] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
[ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[ ] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[ ] COMMERCIAL OR INDUSTRIAL (N)
[ ] SOIL TEST DEVELOPMENT (P)
[ ] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
[ ] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[ ] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
[ ] SINGLE MOBILE HOME (S) [ ] HOUSE (H) [ ] MULTIPLE FAMILY (U)
[ ] DOUBLE WIDE (D) [ ] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: NUMBER OCCUPANTS:

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business TEMPLE # Employees NA Per Shift
Industrial Wastes (Y/N)
Underground Storage Tanks On Property (Y/N) Type 300 gal Septic

WATER SUPPLY (check one):
[ ] Community (C) [ ] Shared Well (S)
[X] Municipal (M) [ ] Other 'spring' (O)
[ ] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[ ] Swimming Pool [ ] Jacuzzi [ ] Stable/Barn [ ] Workshop [X] None
[ ] Garage [ ] Storage Building [ ] Deck/Patio [ ] Bedrooms [ ] 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 agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: M.O. Amos Date: 10/30/92 Per OC w/Marilyn - Elec. - will schedule for Mon. ha my compleene

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the 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 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.

...Lift pump required

Of required

TYPE III classification

[ ] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[ ] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[ ] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Philip S. Walker R.S. 11/17/92
Environmentalist Date

Director or Authorized Section Head 11/25/92 Date

9/10 Rec. PC from builder. Paul Reeves 537-7715 stated concerned that space for ST system not adequate

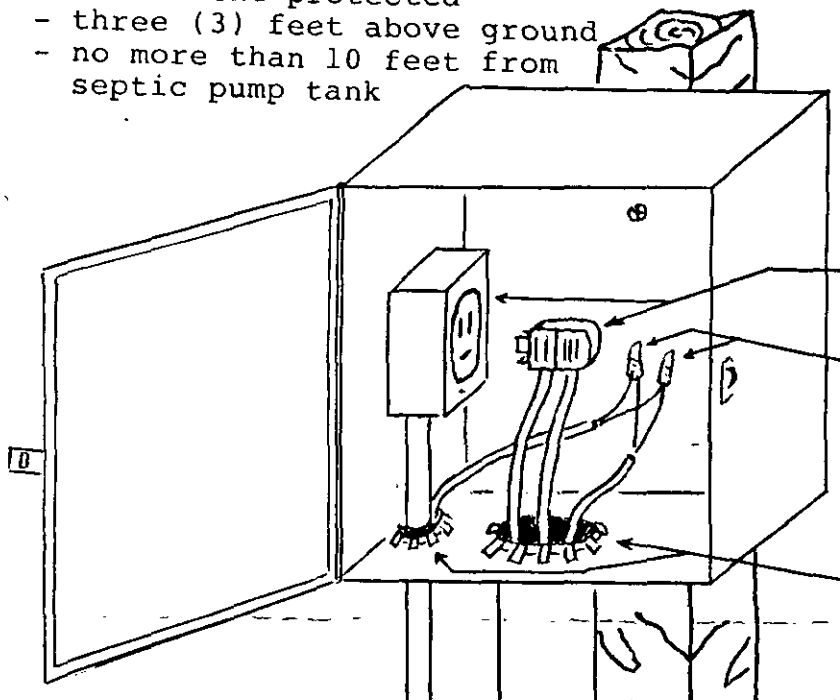
9/11/95 CSV. Bldg. appears to be ~90' from front property line. Some grading has been done

WATER : 122791

Randy Neal 6/7/1895

NEMA 4X ENCLOSURE must be:

- water tight
- corrosion resistant
- solar heat protected
- three (3) feet above ground
- no more than 10 feet from septic pump tank



Pump Power Connection

Low Voltage Alarm:
- for audible
- for visual

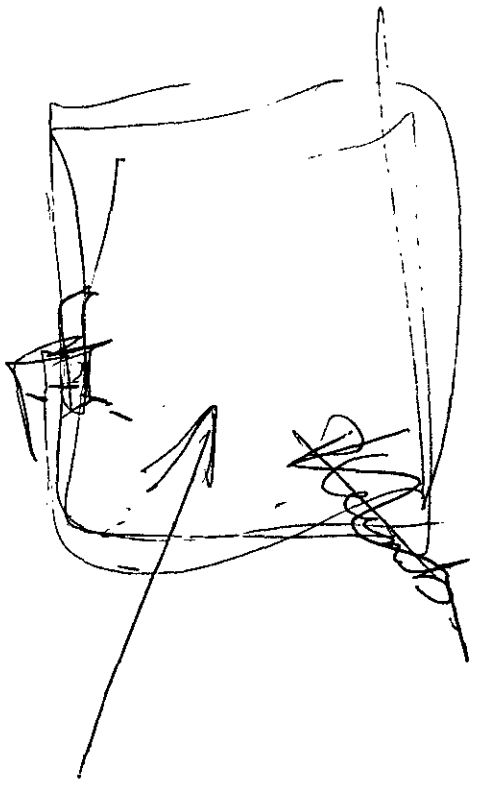
Duct Seal

4X4 Pressure Treated Post or the equivalent:
- may be attached to dwelling if not more than 10 feet from septic pump tank

Conduit: waterproof, gas-proof, corrosion resistant (no splices in conduit line)

to dwelling

to pump tank



W&S W&S PD 300.00 CK

W-7238A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

11/6/92 DJA

Map # 141-99-4285

[ ] CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

Date:

PERSON FILING APPLICATION:

NAME: Amos (last) Marvin (first) O (mi)

ADDRESS: 2517 Tangle Brook Ln PHONE: (704) 391-2530

CITY: Charlotte STATE: N.C. ZIPCODE: 28216

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 039-291-22

STREET ADDRESS: 4919 Beatties Ford Rd.

Charlotte, N.C. 28210

ZONING:

PROPERTY OWNER:

NAME: Rameses Temple (last) (first) (mi)

ADDRESS: 926 Plumstead PHONE: (__) 391-2530

CITY: Charlotte STATE: N.C. ZIPCODE: 28216

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
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[ ] SINGLE MOBILE HOME (S) [ ] HOUSE (H) [ ] MULTIPLE FAMILY (U)
[ ] DOUBLE WIDE (D) [ ] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: NUMBER OCCUPANTS:

SYSTEM CLASSIFICATION: III

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business Temple # Employees N/A Per Shift __ __ __
Industrial Wastes (Y/N) __
Underground Storage Tanks On Property (Y/N) __ Type 300 max seats

WATER SUPPLY (check one):
[ ] Community (C) [ ] Shared Well (S)
[X] Municipal (M) [ ] Other 'spring' (O)
[ ] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
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Signed: M. O. Amos Date: 10/30/92

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...This permit is not transferable.

...Lift pump required

Of required

TYPE III classification

[ ] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[ ] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[ ] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Philip L. Walker R.S. 11/17/92
Environmentalist Date

Judy Klein R.S. 11/20/92
Director or Authorized Section Head Date

WWATER : 122791

RAMESES TEMPLE #51

4919 BEATTIES FORD ROAD

MECKLENBURG COUNTY, NORTH CAROLINA

(MCHD File #7238A TC 039-291-22)

by

Toney C. Jacobs & Associates, Inc.
Consulting Soil Scientists
168 Broadbill Drive

Mooresville, N. C. 28115

December 6, 1995





To: Mr. Paul Bowers
General Contractor
Charlotte, N. C.

Mr. Kelly Randall, R. S.
Mecklenburg County Health Department
Charlotte, N. C.

Toney C. Jacobs, CPSS

Ramses Temple #51-4919 Beatties Ford Road

Modified Conventional System (Infiltrator)

Design Considerations

This system is proposed for a commercial lot (approximately 3.5 Ac) in a suburban area of Mecklenburg County. The system is designed for a 300 seat Shrine meeting hall. The proposed drainfield system does require a repair area and this has been designated. The soil on most of the tract is shallow and unsuitable for ground absorption by a conventional system. The area has been evaluated by Toney C. Jacobs & Associates and the Mecklenburg County Health Department and was judged to be provisionally suitable for an Infiltrator with pressure manifold septic system. The repair area, should it ever be utilized, will have to be installed as an LPP or modified T & J Panel system. Ample area is available for the system and reserved for the repair. Overall, the soil accepting the wastewater has a clay texture (soil description enclosed).

An Infiltrator system was considered permittable with minor grading or site modifications. A warning to the installer includes caution in cutting or leveling, and only to a minimum.

Location

The approximately 3.5 acre building lot is on the left of Beatties Ford Road, just south of Sunset Road, Mecklenburg County, N. C.

Reference Material

(1) *Design and Installation of Low Pressure Pipe Wastewater Treatment Systems,* by Craig Cogger, Bobby L. Carlisle, Dennis Osborne, and Ed Holland. UNC Sea Grant UNC-SC-82-03, May 1982.

(2) *Laws and Rules for Ground Absorption Sewage Disposal Systems 15A NCAC 18A. 1900,* NCDEHNR-DEH.

(3) Infiltrator product information

(4) *Pressure Manifold Design for Ground Absorption Systems,* by Steven J. Berkowitz, 1986.

Recommendation

Seven hundred and fifty (750) lineal feet of Infiltrator lines with equal repair.

Ownership Responsibility for System

Conservation measures should be undertaken in plumbing fixture specifications to minimize the volume of wastewater entering the disposal system, including, but not limited to the following precautions:

(a) Provide water conserving plumbing fixtures within the facility. Waterclosets should be 1.6 gal. flush, per code. Use of residential kitchen or bar should keep water use to a minimum. If food is served it should be with single service (disposable) goods and catered food containers should be taken home to be cleaned.

(b) Develop conservative water use habits. If weekends are the time of significantly more water use and weekdays less, the system should be reworked with timer rather than floats for flow equalization. This can be modified at any time with minimal cost and effort.

(c) Monitor and maintain the system as necessary for proper operation. An Operation Permit will not require a maintenance contract to be filed with the Mecklenburg County Health Department, but it is highly recommended that the owner subscribe to and utilize this service because of its importance to system longevity. If you decide to do this, the management entity should be a part of the installation process.

System must be properly installed by a qualified and competent contractor following the requirements of the Mecklenburg County Department of Environmental Health, DEH, the N. C. Building Code, Plumbing Code, and Electrical Code. This plan, as any, is a guide to a minimum standard, but cannot take the place of experience and common sense.

Components of System

1. Two compartment septic tank - 2000 gal.
2. Pumping tank - 2000 gal.
3. Submersible effluent pump and level controls - SSOMA certified
4. High water alarm signals which are UL approved
5. Supply pipe
6. Gate valve and ball cutoffs
7. Laterals with ground absorption trenches, 3 ft. wide, level end to end, and placed to the appropriate specifications in plan.

Construction Sequence

1. Lines have been flagged as noted on drawing.

2. Clear the area of and shape with minor soil disturbance (grade with caution). Backfill minor low areas with clean imported loam from off-site and tamp to surrounding compaction and look.

3. Install trenches per cited reference material and this plan. Top grade on Infiltrator units to be "level" from end to end.

4. All joints in manifold piping shall be watertight connections to insure that the only source of the water seepage from the system is through the orifices as designed. Carefully install manifold box and manifold with lateral network according to the attached designed layout.

5. Carefully backfill distribution line trenches to grade with clean fill material.

6. The installation contractor shall stabilize the area of construction by planting and mulching with Fescue or Bermuda grass. Area to be limed and fertilized with 0.5 tons lime, 75 units of N, 150 units P, and 100 units of K per acre.

7. The septic tank shall consist of a 2000 gallon capacity reinforced, precast concrete tank with full baffle and shall have easy access to each chamber from ground level for inspection. The first chamber of the septic tank shall consist of 2/3 to 3/4 of the volume of the total tank and the baffle shall contain a horizontal opening across the tank at about midway its height.

8. The dosing tank shall consist of a 2000 gallon capacity, reinforced, precast concrete tank without baffle and shall have a concrete mounting pad (concrete blocks) for accommodating the pump. Provide access for entry into the tank directly over the pump location, and extending 6" above final grade. Use a 30" diameter concrete well casing and concrete well cap or other approved type cover. There must be a seal between well tile and top of tank.

9. All piping and fitting shall be SCH 40 PVC. Glue for all PVC pipe joints shall be as recommended by the pipe manufacturer.

10. Pump: The submerged pump shall be Model ME 50 manufactured by Myers, or equal, ½hp 115v/1ph; capable of pumping 51 gallons per minute at a 18.8' head.

11. Pump controls and alarm to meet specifications of .1952, all being compatible.

12. A "Warning Sign" shall be located within the building to inform the occupants of action to take in case the "High Water Alarm" is activated. This sign shall contain the name, address, telephone number, and emergency telephone number of the person to contact upon malfunction of the system. This is another reason to use the certified operator.

13. Pump and Controls: Details of pump installation are shown in the plan. The pump must be placed on concrete blocks on the bottom of the tank. This prevents the pumping of any solid particles which can clog the pipe system. A piece of nylon rope or other non-corrodible material should be attached to the pump and to the outlet pipe for lifting the pump in and out of the chamber. Controls are fastened to the "tree" or outlet pipe with clamps or brackets supplied by the manufacturer. The lower level control or "pump-off" must be positioned above the pump, so that the pump remains submerged at all times. The level control "pump-on" is positioned to pump a specified volume of effluent. The high water control float is then mounted about 3" above the

upper pump-on control. (Note: Care must be taken to insure that floats do not become fouled by other components in the tank, such as the electric power cord or the lifting rope. It is highly recommended that a telescoping "tree" be used for floats and adjustments.) The pump outlet pipe should be connected to the supply manifold with a threaded PVC union (or dresser coupling) to allow quick removal.

14. Electrical Connections: The pump and high water alarm must be placed on separate electrical circuits. (If the pump circuit fails, the alarm must still be able to operate.) Follow the manufacturers recommendations for the proper fuses or circuit breakers. All electrical connections must be made outside the pumping chamber. Power cords from the pumps and controls should be plugged into a NEMA 4X approved outdoor receptacle mounted outside of the pumping chamber, a minimum of 1 foot above finished grade. The receptacle must not be located inside the pumping chamber due to the corrosive and explosive gasses that may form from the sewage. Electrical connections may be made inside the pumping tank only if wired inside a sealed, watertight box. Some level control switches have a box built into the housing, but are more expensive than the plug-in devices. Wiring between the pumping chamber and the station should meet State and local code requirements. A lightning arrester is recommended to protect the pump and controls from electrical surges. Any outside boxes should be lockable or screwed closed to prevent vandalism.

15. Proper Operation Check: After all components have been installed and connected, the system should be checked for proper operation. With electrical power turned off, fill the pumping chamber with water from a garden hose until the liquid rises to the level of the high-water alarm float. Turn off the electrical power. The alarm light should go on in the house, and the pump should start operating. The alarm light should go off when the liquid reaches the lowest float control. Be sure the pump is still completely submerged.

16. Manifold installation (details enclosed) The pressure head must be adjusted to 2.0. The pressure head is measured as the height liquid will rise above the manifold when the pump is running and valves are open.

17. Final Landscaping: After the system is installed, the distribution field should be shaped to shed rainwater and be free of low areas. This is necessary to insure that the system will not be overloaded with excess rainwater and runoff.

Concluding Note:

This plan was done to facilitate permitting by the Mecklenburg County Health Department as a service to the county by the property owner. Parts of the work are from a plan submitted to Mecklenburg County Health Department on November 17, 1992. Any additions, additional requirement(s), or deletions to enhance design or workability which will facilitate a permit are welcomed and may be made by note on this plan without returning entire design. The designer realizes a plan with as many details as this can be changed and/or improved upon. The installer must realize that this is an exact plan and must be installed with exacting measurements. Final inspection will also require more time and detail than a conventional system.

Design Specifications

Ramses Temple - Beatties Ford Road

Daily design flow:	900 gpd
Septic tank size:	2000 gal (2 compartments)
Pumping tank size	2000 gal
Effluent loading rate:	0.3 gal/sf/d, repair LPP 0.15
Total length and diameter of supply manifold:	app. 75 lf - 3" sch 40 PVC
Number and length of laterals:	System(7) 108', 2 are split Repair 12 at 100' LPP 5' oc
Hole size:	½" from 3" manifold
Hole spacing:	6"
Total number of holes	7
Flow rate through the system	51.0 gpm
Elevation head:	12' max. *subject to change depending on final tank placements
Pressure head:	2'
Friction head:	2'
20% contingency:	2.8'
Total head:	18.8'
Pump requirements:	51.0 gpm at 18.8' of head; use Myers ME50 (½hp) pump or equivalent with compatible electrical
Dosing volume:	900 x .66 = 600 gal. or 1.5 doses/day at design flo
Depth of water pumped per dose:	calculated to specific tank by measure or dealer engineered specifications (1 cubic ft. of water equals 7.5 gal/ft²)
Pump run dose:	approx. 6.0 min.
Check valve:	No
Siphon break hole:	No

Permanent Asphalt Berm

T-3

T-2

EXISTING

N 59°-07'-20"E

EDGE OF PAVEMENT

TEMPORARY DIVERSION DITCH #2

8" W

T.F. ℄

ASPHALT PARKING

4.0

T-4

T-5

T-1

800

27'

TEMPORARY DIVERSION DITCH #1

MATCH EX. T.F. 798

802

804

806

PERMANENT CONCRETE LINED DITCH

GRASSED

LPP REPAIR AREA

108 LF 8" DIP

108 LF 8" DIP

85 LF 8" DIP

5.6%

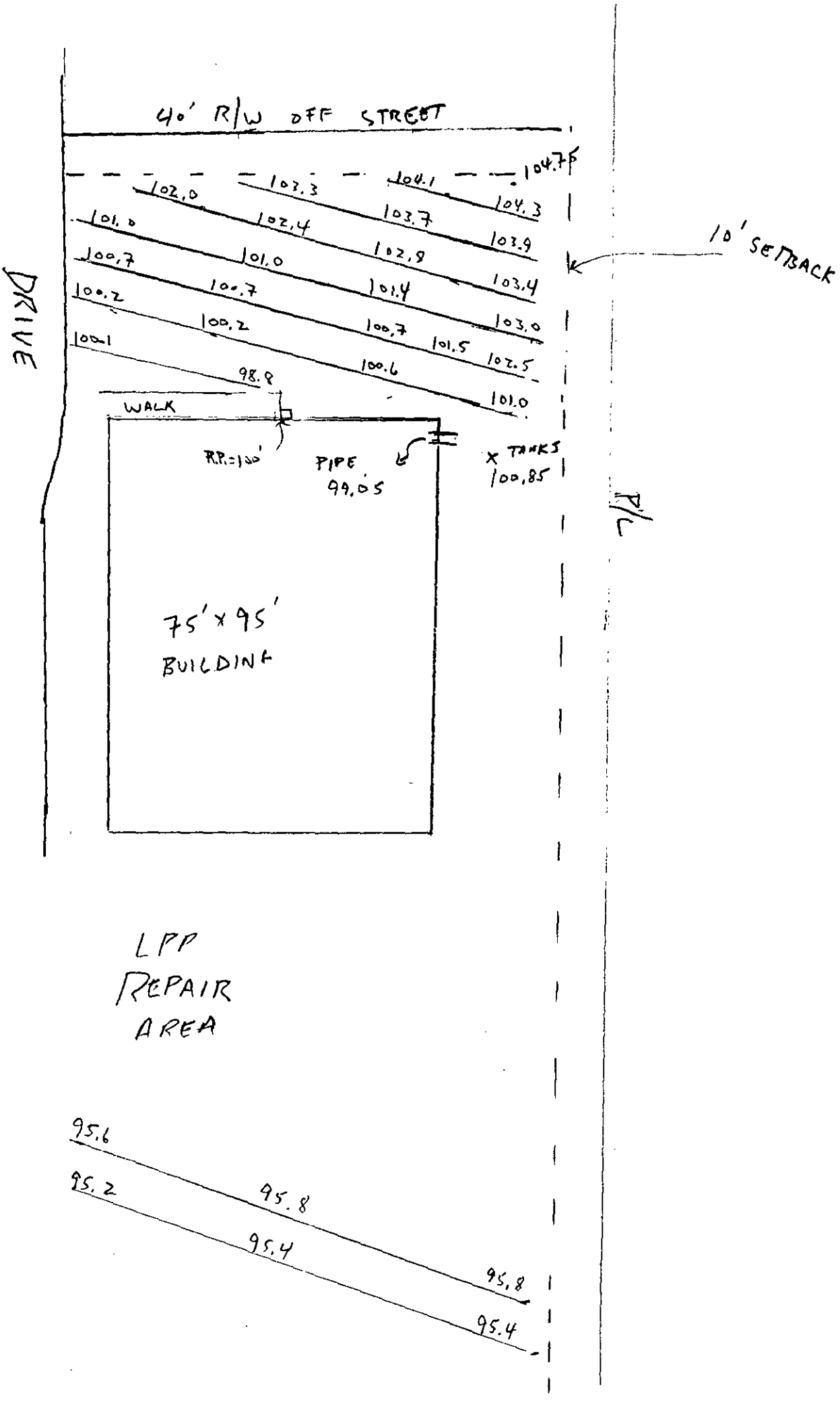
2.4%

2.0%

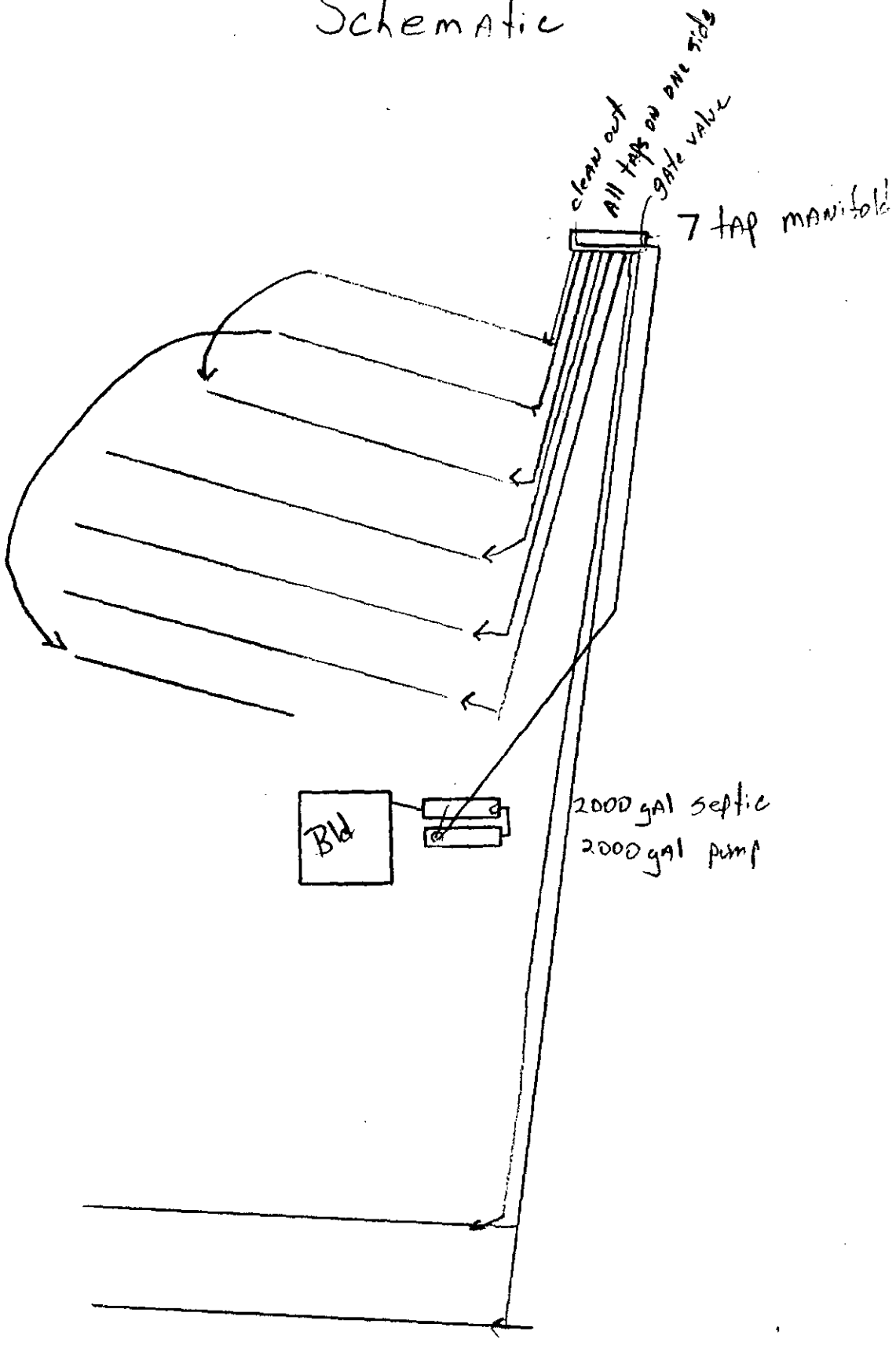
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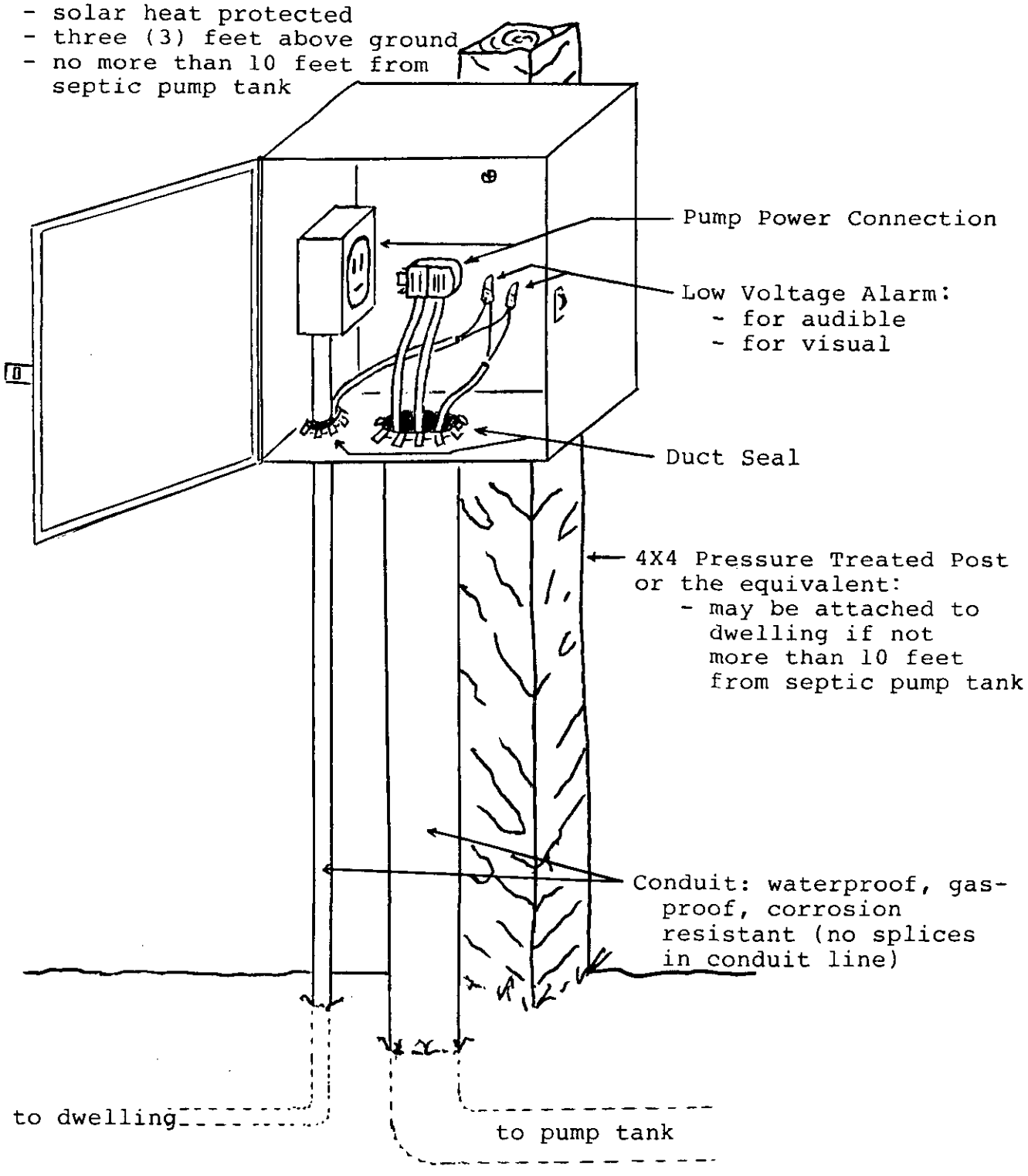

40' R/W OFF STREET
104.7
104.1
103.3
102.0
104.3
103.7
102.4
103.9
101.0
102.9
103.4
101.0
101.4
100.7
103.0
100.7
100.2
101.5
102.5
100.2
100.6
100.1
101.0
98.8
WALK
R.P.=100'
PIPE
99.05
X TANKS
100.85
DRIVE
10' SETBACK
P/L
75' x 95'
BUILDING
LPP
REPAIR
AREA
95.6
95.2
95.8
95.4
95.8
95.4

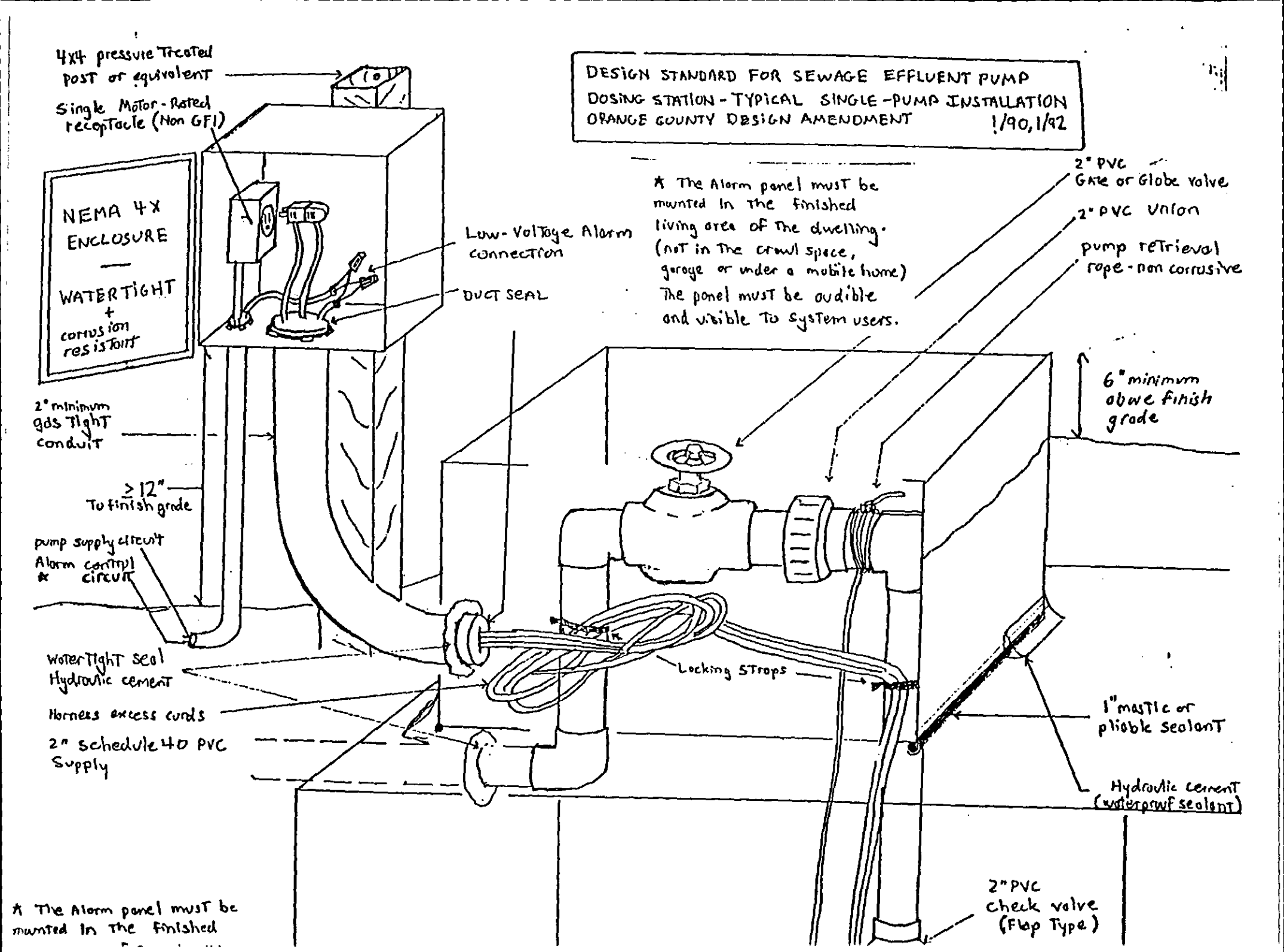
Schematic


clean out
All taps on one side
gate valve
7 tap manifold
Bld
2000 gal septic
2000 gal pump

NEMA 4X ENCLOSURE must be:

- water tight
- corrosion resistant
- solar heat protected
- three (3) feet above ground
- no more than 10 feet from septic pump tank




DESIGN STANDARD FOR SEWAGE EFFLUENT PUMP
DOSING STATION - TYPICAL SINGLE-PUMP INSTALLATION
ORANGE COUNTY DESIGN AMENDMENT 1/90, 1/92
4x4 pressure Treated post or equivalent
Single Motor-Rated receptacle (Non GFI)
NEMA 4X ENCLOSURE — WATERTIGHT + corrosion resistant
Low-Voltage Alarm connection
DUCT SEAL
* The Alarm panel must be mounted in the finished living area of the dwelling. (not in the crawl space, garage or under a mobile home) The panel must be audible and visible to system users.
2" PVC Gate or Globe valve
2" PVC Union
pump retrieval rope - non corrosive
6" minimum above finish grade
2" minimum gas Tight conduit
≥ 12" To finish grade
pump supply circuit
Alarm control * circuit
Watertight seal Hydraulic cement
Harness excess cords
2" schedule 40 PVC Supply
Locking Straps
1" mastic or pliable sealant
Hydraulic cement (waterproof sealant)
2" PVC check valve (Flap Type)
* The Alarm panel must be mounted in the finished

PAUL BOWERS

Sta.	B.S.	H.I.	F.S. or Grade Rod	Elev. or Planned Elev.
		106.95		100
WHITE	42'		6.25	99.8
			6.0	100.05
R 108'			5.1	100.95
			5.5	100.55
			5.9	100.15
			5.9	100.15
B 108'			3.6	102.45
			4.6	101.45
			5.4	100.65
			5.4	100.65
			5.4	100.65
Y 108'			3.1	102.95
			4.7	101.35
			5.1	100.95
			4.1	101.95
W 85'			2.65	103.4
			3.25	102.8
			3.7	102.35
			4.05	102
B St			2.2	103.85
			2.4	103.65
			2.8	103.25

SCS-29 (3-60)

GPO : 1960 OF—550616

PAUL BOWERS

Sta.	B.S.	H.I.	F.S. or Grade Rod	Elev. or Planned Elev.
		106.05		100
Y 25'			1.75	104.3
			2.0	104.05
PIPE			7.0	99.05
TANK	4.6	105.45	5.2	100.85
RED			9.7	95.75
	BEHIND		9.7	95.75
	BUILDING		9.85	95.6
BLUE			10.1	95.35
			10.1	95.35
			10.25	95.2
MANIFOLD		106.05	1.3	104.75

SCS-29 (3-60)

GPO : 1960 OF—550616

PRESSURE MANIFOLD DESIGN FOR GROUND ABSORPTION SEWAGE SYSTEMS

Steven J. Berkowitz
February, 1986

Large subsurface wastewater systems are being used more frequently as alternatives to discharging systems for many public and private facilities.

Dosing effluent periodically and uniformly throughout the drain field improves absorption field performance and increases field longevity (Otis et al. 1977, Harget et al. 1982). Low-pressure distribution of effluent in small diameter, perforated laterals has become a popular design alternative for achieving uniform distribution. Over 2,000 low-pressure pipe systems are now in use at single-family homes in North Carolina. A comprehensive design and installation manual for residential low-pressure pipe systems is available (Cogger et al. 1982). Design criteria and a simplified design procedure have also been published (Otis 1982). Available information, however, does not adequately address some key design parameters for the more extensive low-pressure pipe networks being planned and installed in North Carolina.

Pressure distribution manifolds feeding conventional gravity drain lines is another alternative being used in North Carolina to improve the distribution of effluent in large subsurface fields. This method is applied where soil conditions are favorable for conventional trenches and where the length of drain pipe required and degree of field slope would make it difficult to achieve uniform distribution between laterals in a low-pressure pipe network. Design criteria for such systems have not been previously available.

This paper sets forth some critical design parameters for pressure manifolds and laterals in large conventional and low-pressure pipe ground absorption sewage systems. The justification for these design parameters is presented elsewhere (Berkowitz, 1985).

PRESSURE MANIFOLDS FOR CONVENTIONAL DRAIN FIELDS

The traditional approach to dividing effluent between conventional trenches is with a gravity distribution box. While relatively simple in concept and design, distribution boxes have proven to be generally ineffective in uniformly distributing effluent, especially when the number of trenches to be dosed is large (Mitchell, 1983).

Pressure manifolds can be designed to more effectively split flow between separate conventional trenches while still under pressure from the dosing tank. Schematics are presented below of pressure manifolds designed for level (Fig. 1) and sloping (Fig. 2) sites.

Pressure manifolds must be installed level, although some deviations may not seriously impair flow uniformity. Protective accessible boxes are recommended to be constructed around pressure manifolds installed above the drain field on sloping sites. Note that

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The Author is: Steven J. Berkowitz, Environmental Engineer, On-Site Sewage Branch, Environmental Health Services Section, Division of Environmental Health, N.C. Dept. of Environment, Health, and Natural Resources, P.O. Box 27687, Raleigh, N.C. 27611-7687.

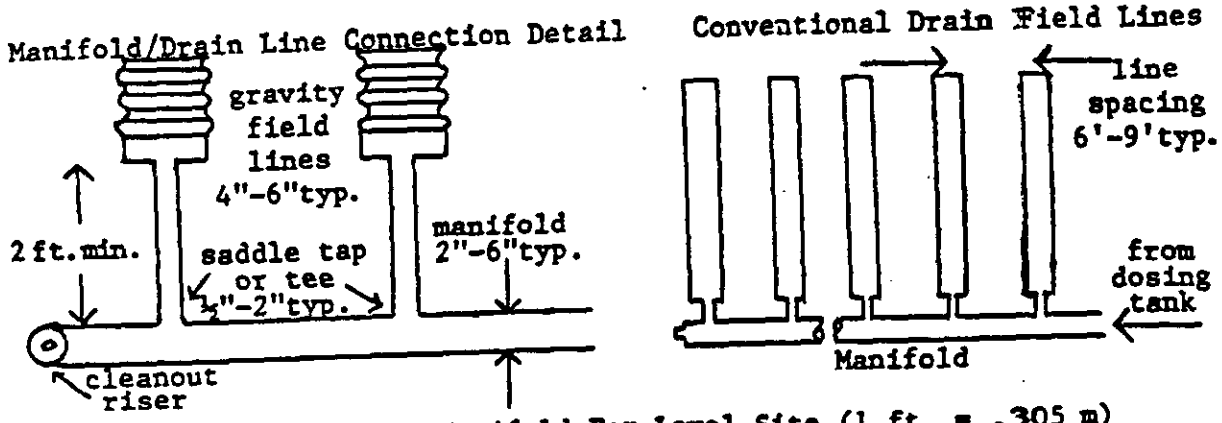


Fig. 1 Pressure Manifold For Level Site (1 ft. = .305 m)

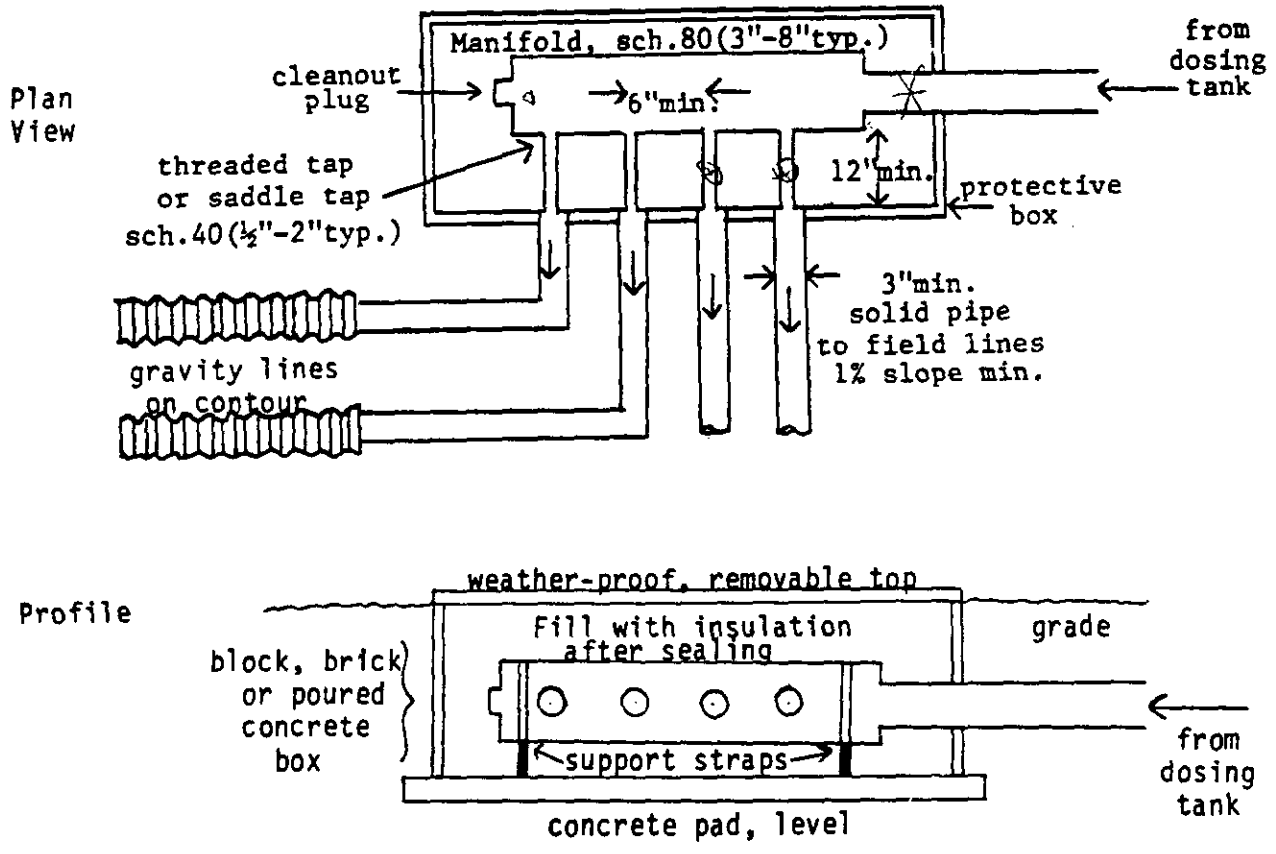


Fig. 2 Pressure Manifold For Sloping Sites

precautions against freezing may be necessary in cold regions if the system is subject to extended periods of disuse unless provisions are made to drain out the manifolds, since they will normally remain about half-full between dosing cycles.

Design criteria for pressure distribution manifolds and laterals are presented in Table 1. Shown are the maximum number of taps by differently sized laterals which can be made out of manifolds of varying sizes, while maintaining no more than a five-percent difference between flow rates into each lateral. An important further assumption is that 1 to 4 feet of pressure head are available at the lateral outlets. Design criteria are presented both for manifolds with lateral taps in one side and for manifolds with lateral taps in adjacent sides.

Recommended design steps utilizing these criteria are as follows:

1. Select Drain Field Configuration: Determine the required field size, number of laterals to be dosed from each pressure manifold, and desired lateral and tap spacing.

2. Choose Lateral Tap Size: For pump dosed systems, pick the largest pressure tap that can be adequately pressurized by a reasonably sized pump. Use the orifice equation[1] to compute required flow per tap, assuming at least 2 feet of pressure head at each lateral opening. Taps less than one-half-inch nominal size are not recommended. For siphon-dosed systems, select a tap size large enough to handle the maximum siphon discharge rate with the head available between the siphon outlet and the pressure manifold, while still maintaining a sufficient pressure head at the minimum siphon discharge rate.

3. Select Manifold Size: Given the desired lateral tap size and spacing, select from Table 1 the minimum size of manifold from which at least the desired number of taps can be made while staying within the five-percent flow variation limit. Selecting the next larger sized manifold will yield an even greater degree of flow distribution uniformity.

from Davey at Charlotte Pipe & Foundry
372-5030

	sch 40		sch 80	
1/2	.840	w.109 (.622)	.840	w (.596) .147
3/4	1.050	.113 (.824)	1.050	(.742) .154
1	1.315	.133 (1.049)	1.315	(.957) .179

d =

---

[1]Orifice equation: $Q = 13\ (d^2)\ (h^{\frac{1}{2}})$
where Q = flow from orifice, gallons per minute
d = diameter of orifice, inches
h = pressure head, feet

Example: Required flow per orifice assuming 2 feet of head and Schedule 40 PVC tap: ½-inch tap--7.1 GPM; 3/4-inch tap--12 GPM; 1-inch tap--20 GPM

5/32 = 0.15625d
r = 0.078125
r^2 = .0061035

Table 1: Pressure Distribution Manifolds for Conventional Septic Systems; Manifold and Lateral Tap Size Criteria[a]

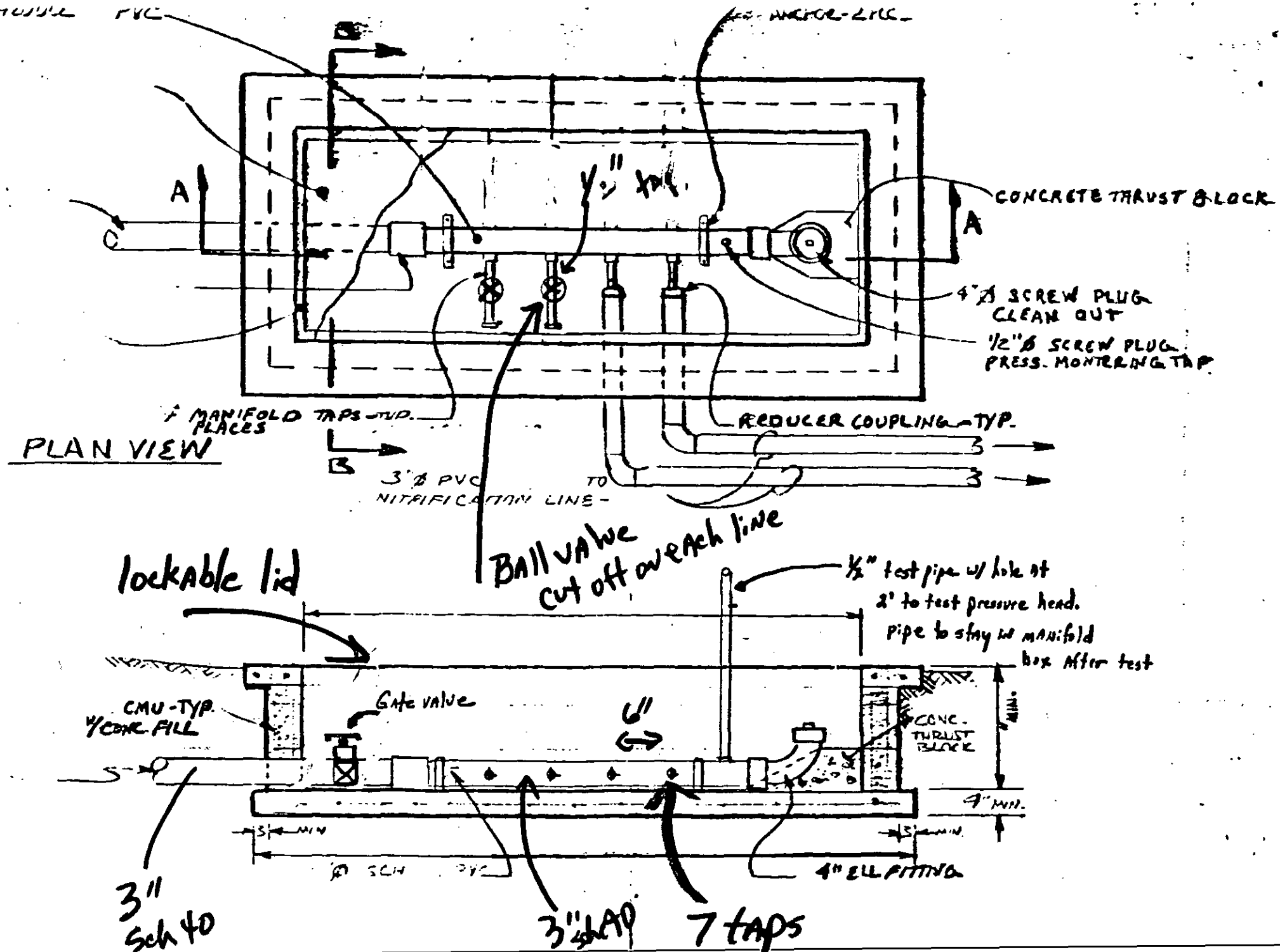
Tap Separation Distance (Feet)	Manifold Size (Inches)	Lateral Taps out of One Side of Manifold — Lateral Tap Size (inches) — Maximum Number of Taps						Lateral Taps out of Both Sides of Manifold — Lateral Tap Size (inches) — Maximum Number of Tap Pairs					
		½	3/4	1	1¼	1½	2	½	3/4	1	1¼	1½	2
0.5[b]	2	4	2					2					
	3	9	5	3	2			4	2				
	4	16	9	5	3	2		7	4	2			
	6	40+	21	12	7	5	3	18	10	6	3	2	
	8		38	22	12	9	5		17	10	6	4	2
3.0[c]	2	8	2					2					
	3	14	12	3	2			6	2				
	4	21	18	6	3	2		16	5	3			
	6	38	30	26	8	5	3	20+	19	7	3	2	
6.0[c]	2	5	4					4					
	3	9	7	6	2			7	3	2			
	4	14	11	9	4	2		10	9	3			
	6	27	20	17	14	7	3	19	15	13	4	3	
9.0[c]	2	4	3	3				3					
	3	7	6	5	2			6	5	2			
	4	12	9	7	6	3		8	7	6	2		
	6	22	16	13	11	10	4	15	12	10	5	3	

[a]Assumptions: 1 to 4 feet (.3 to 1.2 meters) head at lateral outlets; 5% maximum flow differential maintained between laterals; Hazen-Williams "C" factor of 140; taps are of Schedule 40 PVC and manifolds are of Schedule 80 PVC, with the following actual inside diameters:

nominal pipe size (inches)	½	3/4	1	1¼	1½	2	3	4	6	8
actual inside diameter: inches (millimeters)										
Taps	.622(19)	.824(25)	1.049(32)	1.38(42)	1.61(49)	2.067(63)				
Manifolds						1.939(59)	2.90(88)	3.826(117)	5.761(176)	7.625(232)

[b]Use for pressure manifold distribution box designed for sloping lots, located above highest field line.

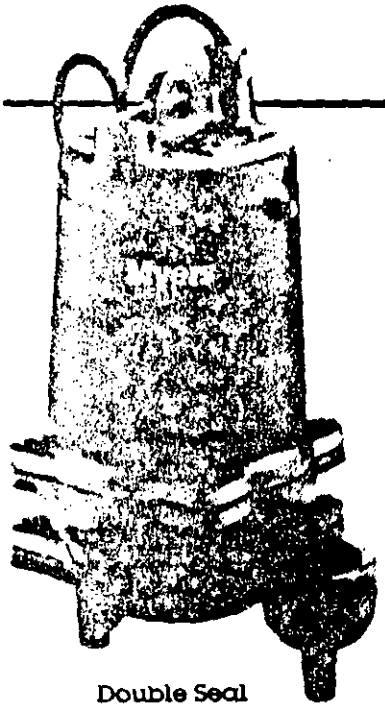
[c]Use for pressure manifold on flat lots, located adjacent to end of each field line.



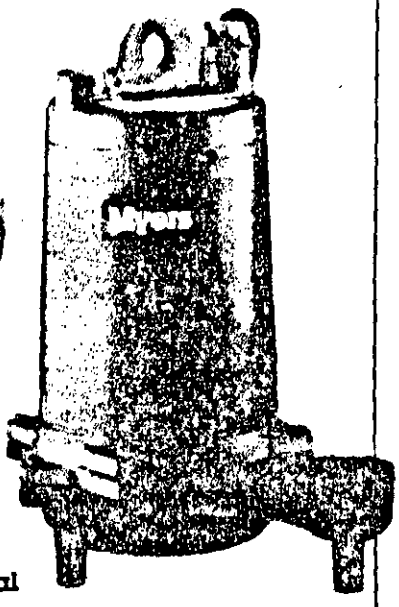
DISTRIBUTION MANIFOLD

ME SERIES

1/3 through 1-1/2 HP
Effluent Pumps



Double Seal



Single Seal

THE MYERS ME SERIES EFFLUENT PUMPS ARE DESIGNED SPECIFICALLY FOR TODAY'S EFFLUENT PRESSURE DISTRIBUTION MOUNDS, TRENCHES AND HIGH FLOW DRAINAGE APPLICATIONS. The ME Series effluent pumps with their efficient two vane, enclosed impellers provide the ideal performance for optimum dosing. ME Series pumps are constructed of only corrosion resistant materials like cast iron, stainless steel and thermoplastics to assure that they will perform for years to come in the harsh effluent environment and drainage applications. For more information, call your Myers distributor today or the Myers Ashland, Ohio sales office at 419/289-1144.

ADVANTAGES BY DESIGN

IDEAL FOR USE IN MOUND AND TRENCH PRESSURE DISTRIBUTION SYSTEMS

- High efficiency, two vane, enclosed impeller provides ideal performance for most efficient dosing.
- Impeller passes full ¾ inch solids.
- Enclosed impeller design eliminates possibility of jamming or corrosion between impeller and volute.

DURABLE MOTOR WILL DELIVER MANY YEARS OF RELIABLE SERVICE

- Oil-filled motor for maximum heat dissipation and constant bearing lubrication.
- High torque, permanent split capacitor (PSC), single phase motors. No starting switches or relays to wear out.
- Optional seal leak probe warns of seal leak condition. (Dual seal motors only.) Helps prevent costly motor damage.
- Motors have on winding current and temperature sensitive overload. (Single phase only.)

THE ME SERIES EFFLUENT PUMPS ARE DESIGNED FOR YEARS OF MAINTENANCE FREE OPERATION

- Volute seal ring is replaceable. Restores pump to original performance if wear should occur.
- Motor is held in place by 4 screws. Easily removed if service is ever needed.

PRODUCT CAPABILITIES

Capacities To	120 GPM	454 LPM
Heads To	98 ft.	29.8 m
Max. Spherical Solids	¾ in.	19 mm
Liquids Handling	domestic effluent & drain water	
Intermittent Liquid Temp.	up to 140° F	up to 60° C
Motor Electrical Data	1/3 & 1/2 HP, 115 volts, 1 ph 1/3 to 1-1/2 HP, 230 volts, 1 ph 208, 230, 460, 575 volts, 3 ph oil-filled, permanent split capacitor type, 1 ph, 3450 rpm, 60 Hz	
Motor Insulation	Class B (130°C)	
Third Party Approvals	Pending	
Acceptable pH Range	6-9	
Specific Gravity	9-11	
Viscosity	28-35 SSU	
Discharge, NPT	2 in.	50.8 mm
Min. Sump Dia. Simplex Duplex	24 in. 36 in.	61 cm 91.4 cm

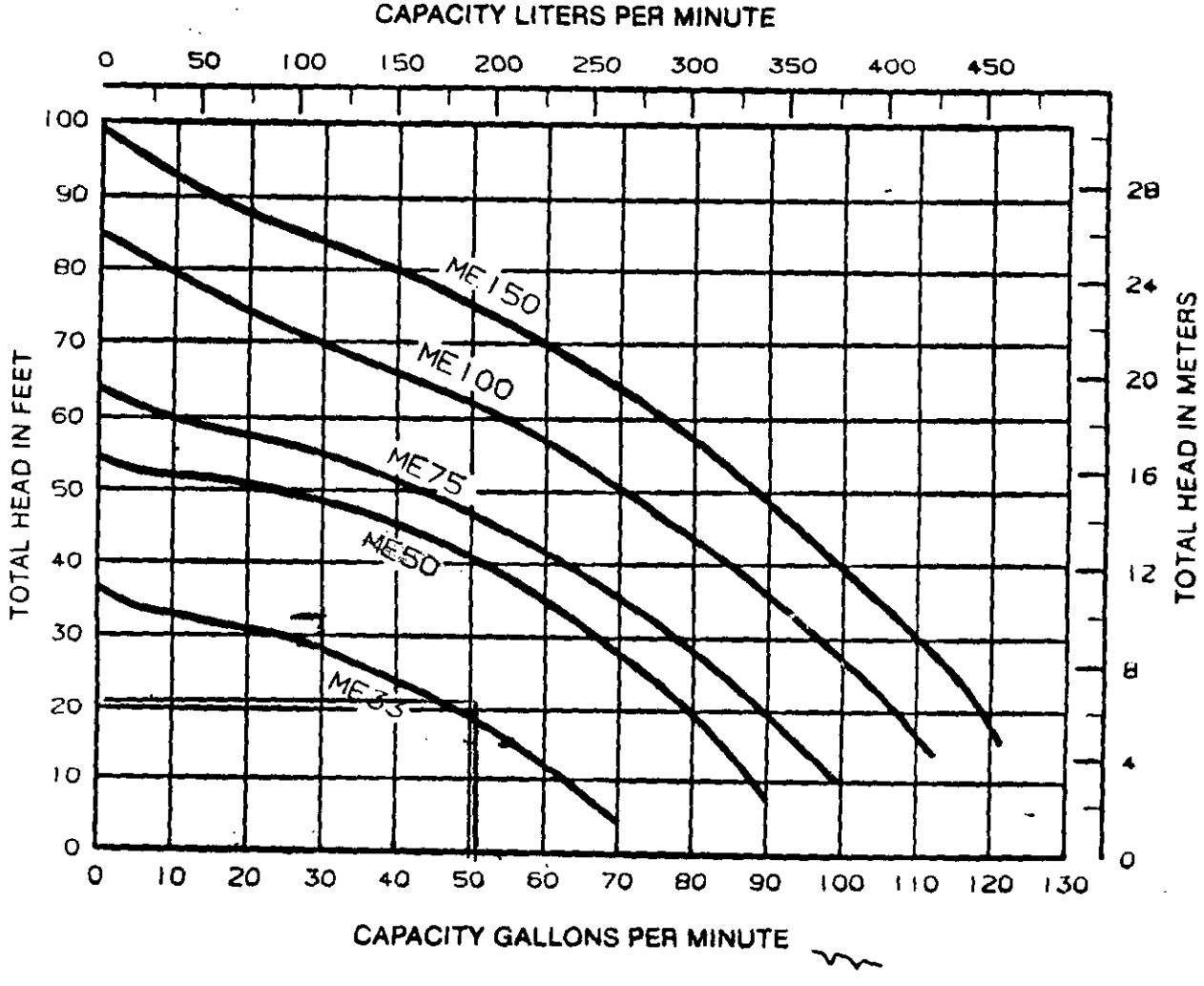
Construction Materials	
Motor Housing, Volute	cast iron, Class 30, ASTM A48-76
Enclosed Two Vane Impeller Standard Optional	engineered thermoplastic bronze
Impeller Wear Ring	304 SST
Volute Sealing Ring	Buna-N
Shaft	416 SST
Power Cord 1/3 & 1/2 HP, 1 Ph 3/4 - 1-1/2 HP, 1 Ph All 3 Ph	 20 ft. 16/3 SJOW/SJOW-A 20 ft. 14/3 SJOW/SJOW-A 20 ft. 14/4 SOW/SOW-A
Shaft Seals Standard Optional Opt. Lower	single carbon & ceramic tandem carbon & ceramic tungsten carbide
Fasteners	300 Series SST

WHERE INNOVATION MEETS TRADITION

Myers

ME Series
1/3 through 1-1/2 HP
Effluent Pumps
Performance Curve

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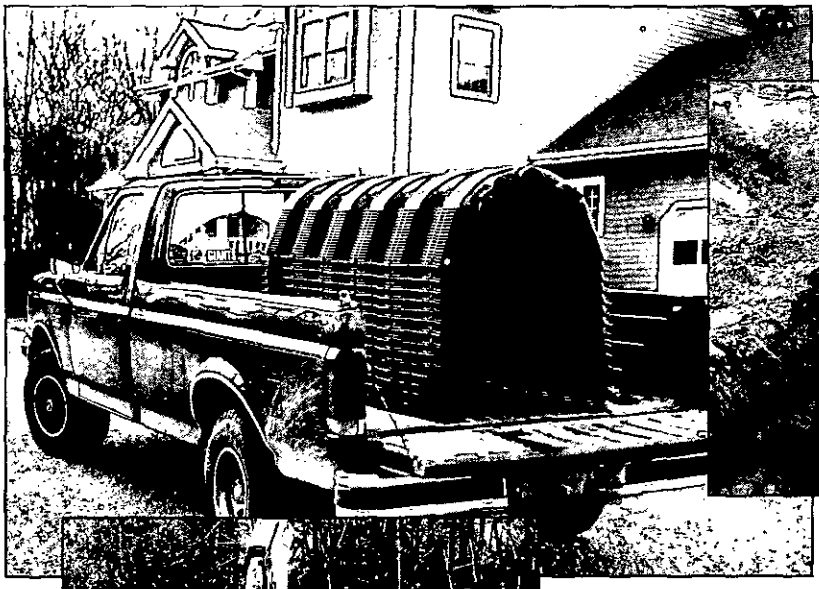
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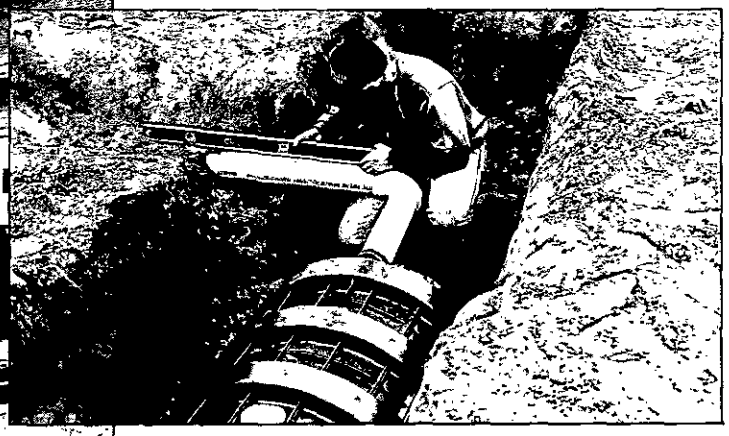
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INFILTRATOR®
SYSTEMS INC

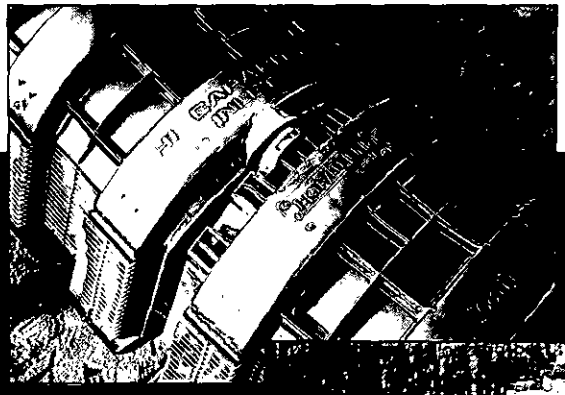
THE INFILTRATOR® Chamber Leach Field System

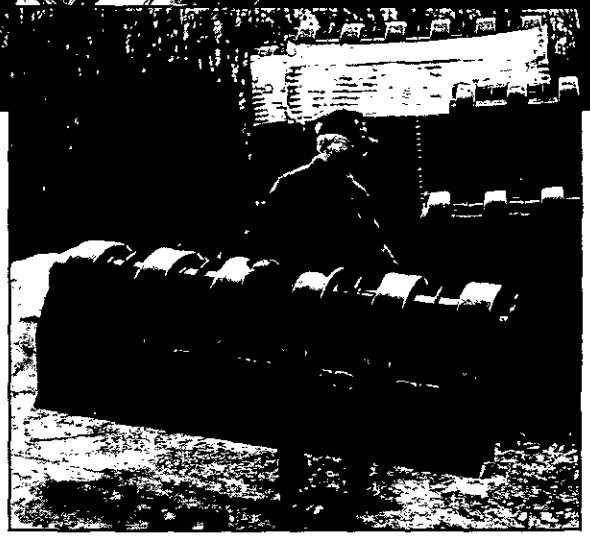
Engineered for Excellence





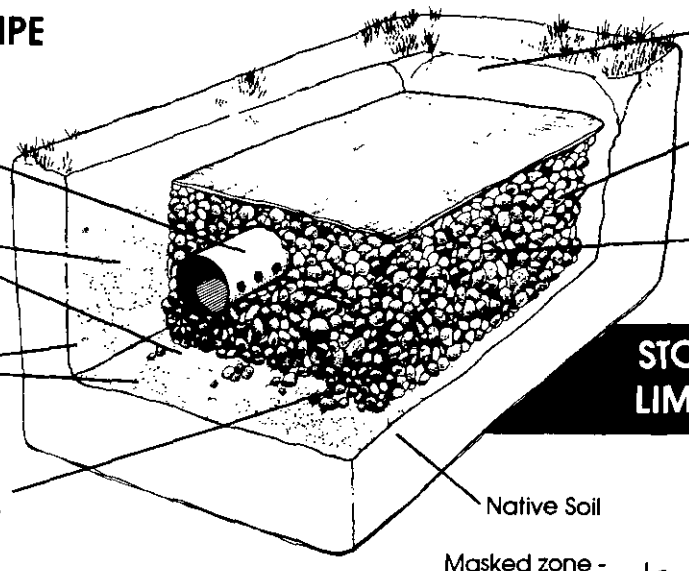






COMPARE THE ADVANTAGES - CHOOSE THE INFILTRATOR®

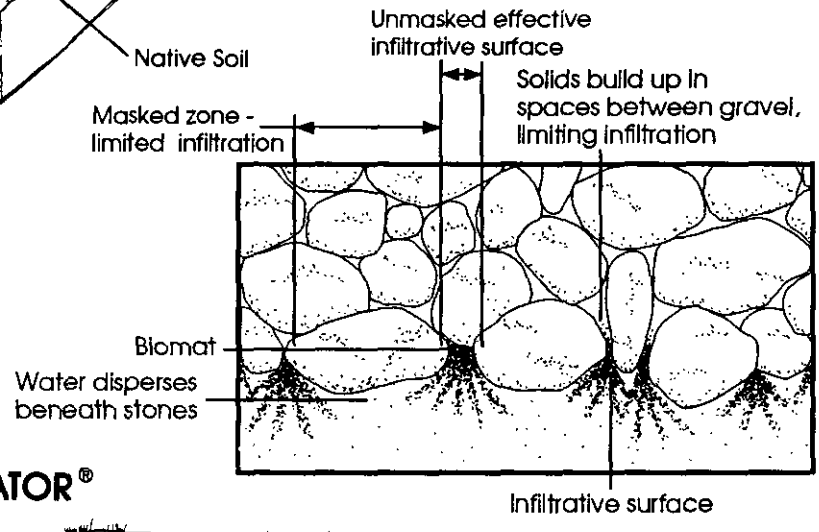
GRAVEL AND PIPE



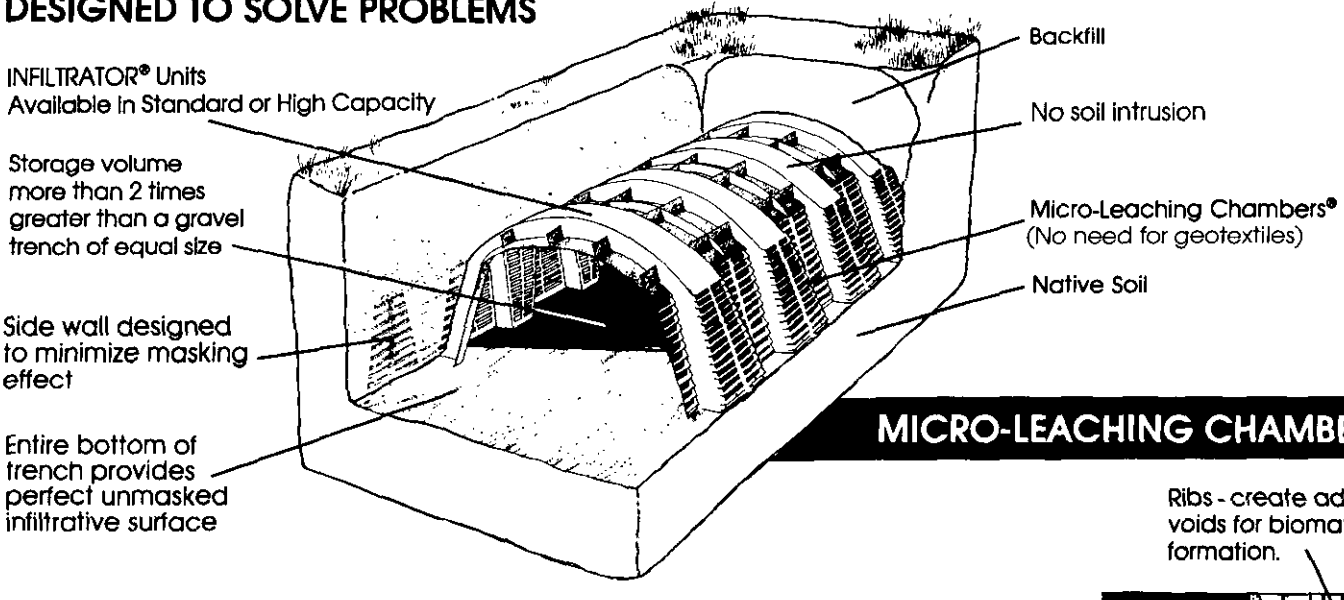
PROBLEMS WITH GRAVEL:

- Reduces infiltration rate 50% to 60% according to experts
- Handling and waste
- Site damage
- Cost

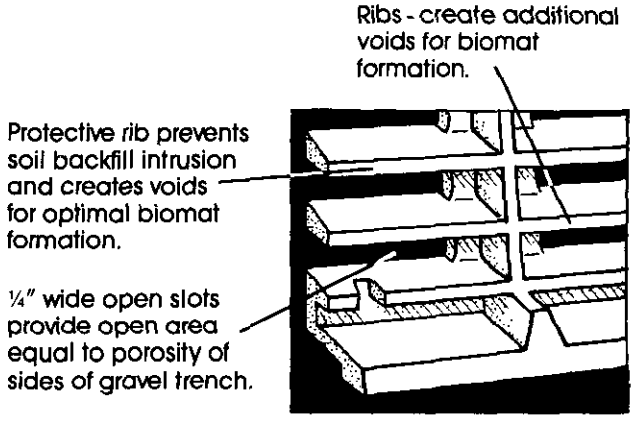
STONE MASKING- LIMITS INFILTRATIVE CAPACITY



THERE IS A BETTER WAY ... THE INFILTRATOR® DESIGNED TO SOLVE PROBLEMS

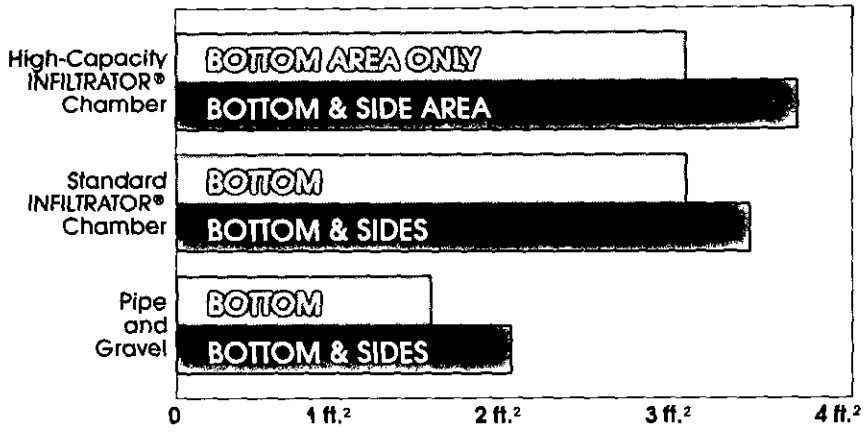


MICRO-LEACHING CHAMBERS®



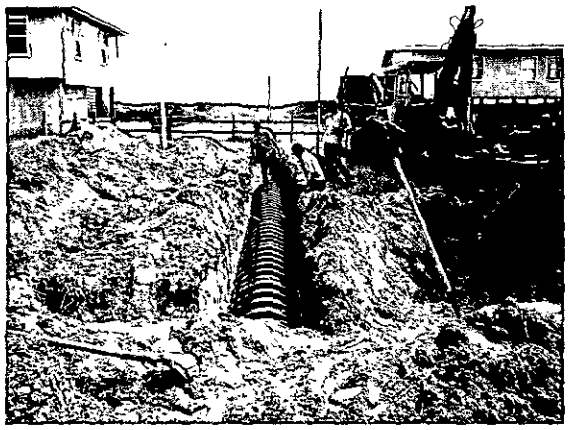
SPECIFICATIONS	STANDARD INFILTRATOR®	HIGH CAPACITY INFILTRATOR®
SIZE	3' x 6.25' x 1'	3' x 6.25' x 1.33'
WEIGHT	25 lbs.	30 lbs.
STORAGE	10.3ft.^{3} (77 gal.)	16.3 ft.^{3} (122 gal.)

COMPARE THE UNMASKED INFILTRATIVE AREA



Documented research has clearly demonstrated that the INFILTRATOR® chamber provides an optimum infiltrative surface for leaching systems. Many states have already recognized this and granted system size reductions accordingly.

The graph shows that INFILTRATOR® chambers have twice the effective infiltrative surface area per linear foot. This is based on a 36" wide trench with 6" of gravel below the pipe assuming 50% gravel masking, compared to Standard and High Capacity INFILTRATOR® chambers with 50% masking for INFILTRATOR® sidewall, and no bottom masking.



INSTALLATION WAS NEVER EASIER!

1. Excavate 3' wide trenches and prepare infiltrative surface.
2. Screw the end plates in place and slip INFILTRATOR® units together to form desired trench length.
3. Run inlet pipe thru inlet end plate (pipe does not extend the entire length of the system), and backfill with native material (18" depth for H-20 and 12" for H-10).

(Detailed instructions available.)

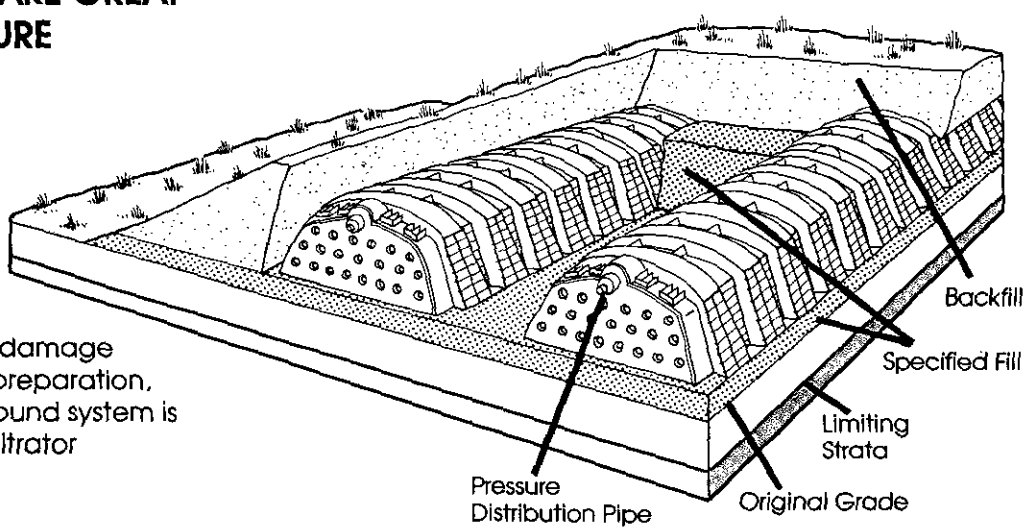
ALTERNATIVE INSTALLATIONS

INFILTRATOR® CHAMBERS ARE GREAT FOR MOUNDS AND PRESSURE DISTRIBUTION TOO!

MOUNDS

INFILTRATORS ® can easily replace the gravel in mound or fill systems, in either a trench or bed configuration.

Installation is much easier with no damage to the infiltrative surface. The site preparation, design and construction of the mound system is prescribed by state code, and Infiltrator Systems' installation instructions.



PRESSURE DISTRIBUTION

INFILTRATOR ® chambers are easily adapted to pressure distribution. Simply suspend a predrilled pressure pipe in the top of the units with simple, foolproof plastic pipe hangers. Supplemental installation instructions are available for complete details.

INFILTRATORS® ARE ENGINEERED AND TESTED FOR INCREDIBLE STRENGTH

INFILTRATOR® chambers are molded from a high density polyethelene and are impervious to all components of wastewater. They have been structurally tested by a Registered Professional Engineer and are available with an AASHTO rating of H-10 (16,000 lbs./axle with 12" of compacted cover) or H-20 (32,000 lbs./axle with 18" of cover).

THE INFILTRATOR® SYSTEM HAS ADVANTAGES FOR EVERYONE

- A high performance, state-of-the-art system.
- Double the unmasked soil interface area compared to gravel systems.
- Complete system delivered in one pickup truck.
- Fast & easy installation.
- Reduced labor & machine costs.
- Eliminates compaction, shadow effect and mess caused from gravel.
- Easy inspection.
- Structurally strong, H-10 and H-20 load ratings.
- Approved by U.S. Department of Housing and Urban Development — Federal Housing Authority.
- Complete technical back-up information is available.

STORMWATER MANAGEMENT- THE INFILTRATOR® ADVANTAGE

The INFILTRATOR® is a complete systems approach to stormwater management that gives the engineer tremendous design freedom to meet the needs of the individual site. The engineer can use units combined with stone for shallow or deep systems that meet any requirement for storage and treatment, require no heavy equipment except a backhoe for installation, and are highly cost effective. A detailed stormwater brochure is available upon request. **For more information, call INFILTRATOR Systems or your local distributor.**

INFILTRATOR® SYSTEMS INC

Leading the way in septic and stormwater chamber systems



LIMITED WARRANTY

(a) The structural integrity of each INFILTRATOR® unit, when installed in accordance with manufacturer's instructions, is warranted to the original purchaser against defective materials and workmanship for one year from date of manufacture. Should a defect appear within the warranty period, purchaser must inform Infiltrator Systems Inc. of the defect within fifteen (15) days. Infiltrator Systems will supply a replacement unit. Infiltrator Systems' liability specifically excludes the cost of removal and/or installation of the units.

(b) THE WARRANTY IN SUBPARAGRAPH (a) IS EXCLUSIVE. THERE ARE NO OTHER WARRANTIES WITH RESPECT TO THE UNITS, INCLUDING NO WARRANTIES OF MERCHANTABILITY OR OF FITNESS FOR A PARTICULAR PURPOSE. THE WARRANTY DOES NOT EXTEND TO INCIDENTAL, CONSEQUENTIAL, SPECIAL OR INDIRECT DAMAGES. THE COMPANY SHALL NOT BE LIABLE FOR PENALTIES OR LIQUIDATED DAMAGES, INCLUDING LOSS OF PRODUCTION AND PROFITS, LABOR AND MATERIALS, OVERHEAD COSTS, OR OTHER LOSS OR EXPENSE INCURRED BY BUYER. SPECIFICALLY EXCLUDED FROM WARRANTY COVERAGE ARE: DAMAGE TO THE UNITS DUE TO ORDINARY WEAR AND TEAR; ALTERATION, ACCIDENT, MISUSE, ABUSE OR NEGLECT OF THE UNITS; THE UNITS BEING SUBJECTED TO STRESSES GREATER THAN THOSE PRESCRIBED IN THE INSTALLATION INSTRUCTIONS; THE PLACEMENT BY BUYER OF IMPROPER MATERIALS INTO BUYER'S SYSTEM; OR ANY OTHER EVENT NOT CAUSED BY THE COMPANY.

FURTHERMORE, IN NO EVENT SHALL THE COMPANY BE RESPONSIBLE FOR ANY LOSS OR DAMAGE TO THE BUYER, THE UNITS OR ANY THIRD PARTY RESULTING FROM ITS INSTALLATION OR SHIPMENT. BUYER SHALL BE SOLELY RESPONSIBLE FOR ENSURING THAT INSTALLATION OF THE SYSTEM IS COMPLETED IN ACCORDANCE WITH ALL APPLICABLE LAWS, CODES, RULES AND REGULATIONS.

(c) NO REPRESENTATIVE OF THE COMPANY HAS THE AUTHORITY TO CHANGE THIS WARRANTY IN ANY MANNER WHATSOEVER, OR TO EXTEND THIS WARRANTY. NO WARRANTY APPLIES TO ANY PARTY OTHER THAN TO THE ORIGINAL BUYER.

Distributed by

4 Business Park Drive ■ Old Saybrook, CT 06475 ■ 203•388•6639 ■ 800•221•4436 ■ FAX 203•388•6810

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TCJ CONSULTING

SITE / SOIL EVALUATION

JOB: Paul Bowen PHONE: DATE: 10/30/95

LOCATION: PIN: COUNTY: Wade PROPERTY SIZE:

PROPOSED FACILITY: WATER SUPPLY: On-Site Well Community Public EVALUATION: Auger Boring Pit Cut

WEATHER: Nice ANTECEDENT MOISTURE: dry SURFACE WATER:

by Kelly Randall

FACTORS	PROFILE	PROFILE	PROFILE	PROFILE
LANDSCAPE POSITION-%	gradual L	L	L	
HORIZON I DEPTH	0-30"	0-18" old fill	0-7"	0-9"
Color - Munsell	red 2.5yr 4/6		redd 2.5yr 5/8 brown	stc. br 7.5yr 4/4
Texture	C		compacted c	cl
Structure	SAB v fine		com fi gravel ab	gran
Consistence	fr			
Plinthite and Fe films	mott few			
	brownish yel 10yr 6/8			
Boundary			7-2	
HORIZON DEPTH II	30"-48	18"-29"	7-25"	9-28"
Color - Munsell	red 2.5y r 5/6	reddish bro	red	7.5yr 5/6
Texture	light c - heavy cl	cl	C	c
Mottles		NONE	None	no
Structure	SAB	gr w SAB	mod-s m-f SAB	mod c SAB
Consistence	fr	fr		firm → fr
Boundary				
HORIZON III DEPTH		29"-45"	25-39"	28"-39
Color - Munsell		red	red	
Texture		cl - c	C	
Mottles		NONE	None	
Structure		wedge f SAB	mod fi weathered rock inclusion mod. SAB	
Consistence		fr	fr	
		few MN conc		
Boundary				
HORIZON IV DEPTH			39-51"	
Color - Munsell				
Texture				
Mottles				
Structure				
Consistence				
			SAP w/ minor inc	
			SOil fewer films	
Boundary				
SOIL WETNESS				
RESTRICTIVE HORIZON				
SAPROLITE				
LTAR				
CLASSIFICATION	PS	PS	PS	

Description by Bill Marlin Kelly Randall Toney Jacobs

LEGEND

LANDSCAPE POSITION
R - Ridge INTER
S - Shoulder
L - Linear slope
S - Foot slope
N - Nose slope
H - Head slope
Cc - Concave slope
Cv - Convex slope
T - Terrace
P - Flood Plain

TEXTURE
s - sand
ls - loamy sand
sl - sandy loam
l - loam
si - silt
sil - silt loam
sicl - silty clay loam
cl - clay loam
scl - sandy clay loam
sc - sandy clay
sic - silty clay
c - clay

CONSISTENCE
MOIST / WET
Ns - non-sticky
Ss - slightly sticky
S - sticky
Vs - very sticky

Np - non-plastic
Sp - slightly plastic
P - plastic
Vp - very plastic

MOIST
vfr - very friable
fr - friable
fi - firm
vfi - very firm
efi - extremely firm

STRUCTURE
sg - single grain
m - massive
cr - crumb
gr - granular
sab - subangular block
ab - angular blocky
pl - platy
pr - prismatic

Bill 6/7-1897 10:00 Thurs 2400 Randy Neal 300 CHR LATA

WP-7238A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

11/6/92 DJ

Prog # 141-9942B5

[ ] CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Cr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102 Roger Browne

Date: 6/7-1883

PERSON FILING APPLICATION:

NAME: Amos (last) MARVIN (first) O (mi)

ADDRESS: 2517 TANGLE BROOK LU PHONE: (704) 391-2530

CITY: CHARLOTTE STATE: N.C. ZIPCODE: 28216

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 039-291-22

STREET ADDRESS: 4919 BEATTIES FD. RD.
CHARLOTTE, N.C. 28210

ZONING:

PROPERTY OWNER: Elliot Martin 392-1723 (trustee?)

NAME: RAMESES TEMPLE #21 (Walter Lewis 394-9585
c/o tr (last) Elliot Martin (first) (mi)

ADDRESS: 926 PLUMSTEAD RD PHONE: (__) 391-2530

CITY: CHARLOTTE STATE: N.C. ZIPCODE: 28216

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
[X] 0 Mecklenburg County [ ] 2 Davidson [ ] 4 Pineville [ ] 6 Huntersville
[ ] 1 Charlotte [ ] 3 Cornelius [ ] 5 Matthews [ ] 7 Mint Hill

TYPE APPLICATION (check one):

LOT NUMBER: LOT SIZE (in acres): 3.44

[ ] SOIL TEST - INDIVIDUAL LOT (D)
[X] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
[ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[ ] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[ ] COMMERCIAL OR INDUSTRIAL (N)
[ ] SOIL TEST DEVELOPMENT (P)
[ ] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
[ ] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[ ] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
[ ] SINGLE MOBILE HOME (S) [ ] HOUSE (H) [ ] MULTIPLE FAMILY (U)
[ ] DOUBLE WIDE (D) [ ] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: NUMBER OCCUPANTS:

SYSTEM CLASSIFICATION: III

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business TEMPLE # Employees N/A Per Shift
Industrial Wastes (Y/N)
Underground Storage Tanks On Property (Y/N) Type 300 gal. Units

WATER SUPPLY (check one):
[ ] Community (C) [ ] Shared Well (S)
[X] Municipal (M) [ ] Other 'spring' (O)
[ ] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[ ] Swimming Pool [ ] Jacuzzi [ ] Stable/Barn [ ] Workshop [X] None
[ ] Garage [ ] Storage Building [ ] Deck/Patio [ ] Bedrooms [ ] 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 agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: M. O. Amos Date: 10/30/92 Per OC w/Marilyn - Elec. - will schedule for Mon. ha my compliance

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the 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 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.

... Lift pump required

Of required

TYPE III classification

[ ] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[ ] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[ ] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Philip J. Walker R.S. 11/17/92
Environmentalist Date

Director or Authorized Section Head 11/25/92 Date

Randy Neal 6/7/1895

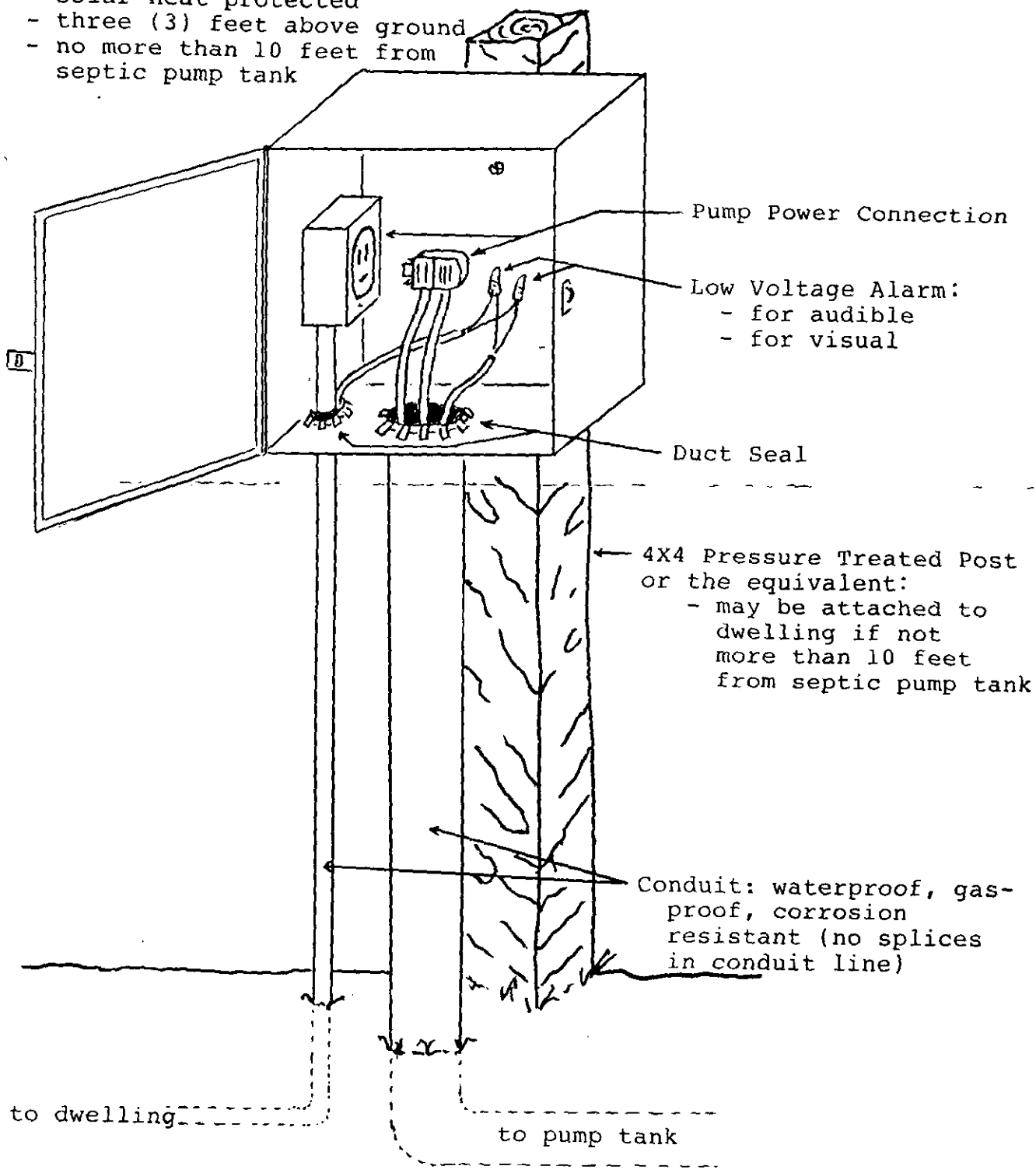
9/16: Rec'd PC from builder Paul Bowers 537-7215; stated concerned that space for 5T system not adequate

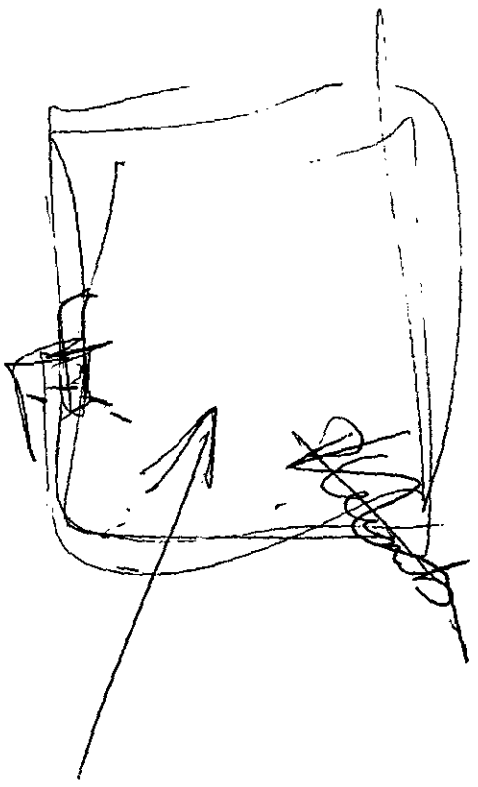
9/11/95 esv. Bldg. appears to be ~90' from front property line. Some grading has been done

WATER : 122791

NEMA 4X ENCLOSURE must be:

- water tight
- corrosion resistant
- solar heat protected
- three (3) feet above ground
- no more than 10 feet from septic pump tank





W400 W400 PD 300 °Chr

W-7238A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

11/6/92 DJA

Proj # 141-9942B5

[ ] CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

Date:

PERSON FILING APPLICATION:

NAME: Amos (last) MARVIN (first) O (mi)

ADDRESS: 2517 TANGLE BROOK LU PHONE: (704) 391-2530

CITY: CHARLOTTE STATE: N.C. ZIPCODE: 28216

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 039-291-22

STREET ADDRESS: 4919 BEATTIES FD. RD.
CHARLOTTE, N.C. 28210

ZONING:

PROPERTY OWNER:

NAME: RAMESES TEMPLE (last) (first) (mi)

ADDRESS: 926 PLUMSTEAD PHONE: (__) 391-2530

CITY: CHARLOTTE STATE: N.C. ZIPCODE: 28216

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
[X] 0 Mecklenburg County [ ] 2 Davidson [ ] 4 Pineville [ ] 6 Huntersville
[ ] 1 Charlotte [ ] 3 Cornelius [ ] 5 Matthews [ ] 7 Mint Hill

TYPE APPLICATION (check one):

LOT NUMBER: LOT SIZE (in acres): 3.44

[ ] SOIL TEST - INDIVIDUAL LOT (D)
[X] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
[ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[ ] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[ ] COMMERCIAL OR INDUSTRIAL (N)
[ ] SOIL TEST DEVELOPMENT (P)
[ ] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
[ ] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[ ] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
[ ] SINGLE MOBILE HOME (S) [ ] HOUSE (H) [ ] MULTIPLE FAMILY (U)
[ ] DOUBLE WIDE (D) [ ] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: NUMBER OCCUPANTS:

SYSTEM CLASSIFICATION: III

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business TEMPLE # Employees N/A Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type 300 max seats

WATER SUPPLY (check one):
[ ] Community (C) [ ] Shared Well (S)
[X] Municipal (M) [ ] Other 'spring' (O)
[ ] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[ ] Swimming Pool [ ] Jacuzzi [ ] Stable/Barn [ ] Workshop [X] None
[ ] Garage [ ] Storage Building [ ] Deck/Patio [ ] Bedrooms [ ] 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 agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: M.O. Amos Date: 10/30/92

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the 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 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.

... Lift pump required

Of required

TYPE III classification

[ ] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[ ] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[ ] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Philo S. Walker R.S. 11/17/92
Environmentalist Date

Judy J. Klein R.S. 11/20/92
Director or Authorized Section Head Date

WWATER : 122791

P-5

Mecklenburg County
Health Department

September 13, 1995

Rameses Temple
c/o Walter Lewis
1500 McAllister Drive
Charlotte, North Carolina 28216

Re: 4919 Beatties Ford Road
File: 7238A
Tax Parcel: 039-291-22

Dear Mr. Lewis:

This is to notify you of our intent to suspend the improvement permit issued for the Rameses Temple's sewage disposal system thirty (30) days from the date of this notice for the following violations:
North Carolina Laws and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A, **.1937 Permits states in part:**

"(a) An Improvement Permit shall be required in accordance with G.S. 130A-336. Rule .1949 of this Section shall be used to determine whether subsequent additions or modifications increase sewage flow.

(b) The local health department shall issue an Improvement Permit only after it has determined that the system is designed and can be installed so as to meet the provisions of these Rules. An Improvement Permit shall be valid for sixty (60) months from the date of issue. If the installation has not been completed during that time period, the information submitted in the application for an Improvement Permit is falsified or changed, or the site is altered, the permit shall become invalid. When an Improvement Permit has become invalid, the installation shall not be commenced or completed until a new Improvement Permit has been obtained."

Due to site alterations, the improvement permit will remain suspended until the Mecklenburg County Health Department Individual Water and Wastewater Systems Program has received a plan for a sewage disposal system to serve the facility which can be reviewed and approved in conjunction with the North Carolina Laws and Rules for Sewage Treatment and Disposal Systems. This plan should include specifications for a replacement system. **Rule .1945 Available Space States in part:**

> "(a) Sites shall have sufficient available space to permit the installation and proper functioning of ground absorption sewage treatment and disposal systems, based upon the square footage of nitrification field required for the long-term acceptance rate determined in accordance with these Rules.
>
> (b) Sites shall have sufficient available space for a repair area separate from the area determined in Paragraph (a) of this Rule. The repair area shall be based upon the area of the nitrification field required to accommodate the installation of a replacement system as specified in Rule .1955, .1956, or .1957 of this Section. Prior to issuance of the initial Improvement Permit for a site, the local health department shall designate on the permit the original system layout, the repair area, and the type of replacement system."

You also have the right to an informal review with this Department. If no resolution can be reached you may request an informal review of this decision by the Department of Environment, Health and Natural Resources by contacting the health department at the above address. You have the right to a formal appeal of this decision if you file a petition for a contested case hearing with the Office of Administrative Hearings, P. O. Drawer 27447, Raleigh, North Carolina 27611-7447. A petition form will be provided to you upon request. The petition must be received by the Office of Administrative Hearings within thirty (30) days after the date of this notice.

If you file a petition for a hearing, you must send a copy of the petition to Mr. Richard Whisnant, Office of General Counsel, P. O. Box 27687, Raleigh, North Carolina 27611-7687.

Please feel free to contact me at 336-5573, if you have any questions at this time.

Sincerely,

Lisa B. Mialik

Lisa B. Mialik, R.S.
Individual Water and Wastewater Systems

LBM:lw

cc: Elliott Martin
Paul Bower, Builder

W100 W100 PW 300' CHK CTA

W: 7238A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

11/6/92 JJ

Prop # 141-994285 [ ] CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

PERSON FILING APPLICATION:

NAME: Amos (last) MARVIN (first) O (mi)

ADDRESS: 2517 TANGLEBROOK LN PHONE: (704) 391-2530

CITY: CHARLOTTE STATE: N.C. ZIPCODE: 28216

Date:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 039-291-22

STREET ADDRESS: 4919 BEATTIES FD. RD.

CHARLOTTE, N.C. 28210

ZONING:

PROPERTY OWNER: Elliot Martin 392-1723 (trustee?) Walter Lewis 394-9585

NAME: RAMESES TEMPLE #51 (last) (first) (mi)

e/o Mr. Elliot Martin

ADDRESS: 926 PLUMSTEAD Rd PHONE: (__) 391-2530

CITY: CHARLOTTE STATE: N.C. ZIPCODE: 28216

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
[X] 0 Mecklenburg County [ ] 1 Charlotte [ ] 2 Davidson [ ] 3 Cornelius [ ] 4 Pineville [ ] 5 Matthews [ ] 6 Huntersville [ ] 7 Mint Hill

LOT NUMBER:

LOT SIZE (in acres): 3.44

TYPE APPLICATION (check one):

[ ] SOIL TEST - INDIVIDUAL LOT (D)
[X] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
[ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[ ] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[ ] COMMERCIAL OR INDUSTRIAL (N)
[ ] SOIL TEST DEVELOPMENT (P)
[ ] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
[ ] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[ ] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
[ ] SINGLE MOBILE HOME (S) [ ] HOUSE (H) [ ] MULTIPLE FAMILY (U)
[ ] DOUBLE WIDE (D) [ ] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: NUMBER OCCUPANTS:

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business TEMPLE # Employees NA Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type 300 gal. Septic

WATER SUPPLY (check one):
[ ] Community (C) [ ] Shared Well (S)
[X] Municipal (M) [ ] Other 'spring' (O)
[ ] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[ ] Swimming Pool [ ] Jacuzzi [ ] Stable/Barn [ ] Workshop [X] None
[ ] Garage [ ] Storage Building [ ] Deck/Patio [ ] Bedrooms [ ] 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 agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: M. O. Amos Date: 10/30/92

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the 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 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.

... Lift pump required

Of required

TYPE III classification

[ ] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[ ] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[ ] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Philo L. Walker R.S. 11/17/92
Environmentalist Date

Director or Authorized Section Head 11/20/92 Date

WWATER : 122791

8/10 Rec. PC from builder. Paul Bowers 537-7715; stated concerned that space for ST system not adequate

8/11/95 OSV. Bldg. appears to be ~90' from front property line. Some grading has been done

8/15/95 PC w/Willie Mayes CMUD. Sewer not available; would require paid extension.

8/15 PC w/ Paul Bowers. Staked Road rt of way change - to 100'(?) - 50' from ctr of road?

8/15 PC to DOT @ 332-3366. Mike MacIntosh. Referred to Rt-of-Way office (704) 982-9181

8/15 PC w/ John Shumaker @ (704) 982-9181 Rt of Way office - to his knowledge no changes should be 60' Meck. Co. Engineering?

8/15 PC w/ Bill COX @ Engineering. Per Zoning - ~~want~~ property owner is responsible for transitional setback (preventing development in areas that will ultimately be taken by DOT) -pgm

8/15 Per Bill COX - 300 Conditional Zoning Plan which means an additional 20' given to public for rt-of-way. ⇒ 50' from centerline of which building setbacks are measured. ext 3745

Petition # 91-23(C) County Petition

8/17 OSV w/ B. Martin Site changes from plot plan:
- conditional zoning plan (50' from centerline)
- Grading @ front & to side ©.
- Driveway on plot plan in conflict w/ blue print delivered 8/12 by Paul Bowers
- Building not per plot plan - built 75' wide - 90' long.

Per B. Martin - possible PB 7@ 5' to rear of bldg; however not repair area.

8/22/95 OC w/ J. Kiser & S. Daniel:
permit invalid - get consultant - Toni Jacobs referral ok.

8/24/95 PC to Mr Bowers @ 537-7715, NC

10:45 " " " " " " N.C. LM w/ wife (?)

8/28/95 PC to Mr Bowers " " " " " " N.C. LM w/ wife (?)

9/28/95 PC w/ Mr Bowers. Advised of road permit.
- grading - bldg elevations - 50' rt of way from centerline;
- parking lot design.
Advised to get consultant (T. Jacobs) or go ahead & tap in.
Repair area @ problem.

~~9/8/95 PCC. VM mess from Mr Bowers~~
~~2 CALLS Mr Bowers. NO answer~~ -pgm

~~9/11/95 PC to Mr Bowers. NO answer~~
1:00

SERVICE REQUEST/WORK ORDER

Date:_____ Log No.:_____

DATE	ACTIVITY REPORT
8/29/95	PC to Elliot Martin (392-1723). Discussed situation.
~3:40 pm	Per Mr Martin - contact Walter Lewis (394-9585)
	- Mr Martin was involved w/initial construction
	only.
8/29/95	PC w/ Mr Walter Lewis (394-9585); Discussed
9:40	situation - permit revocation. Advised - research
	Deed prior to 1/83, contact CMUD, etc. Per Mr
	Lewis - will contact Mr Bowers & then touch
	base w/me.
8/30/95	PC to Mr Martin, NC. LM on machine - contact made to
9:55	Mr Lewis. jsn
9/8/95	Rec. vm mess from Mr Bowers.
	PC to Mr Bowers. No answer
9/11/95	PC to Mr. Bowers, NO answer
1:00	
9/12/95	Rec. PC from Mr Bowers. Per Mr Bowers: mobile 351-2217
	Paul Bowers — Walter Lewis
	4700 Holbrook Dr — 1500 McAllister Dr
	Charlotte 28212 — Charlotte, NC 28216
	PC w/Mr Bowers. Gave correct # for Toni Jacobs 663-6505
9/12/95	PC w/Mr Lewis; Stated Mr Martin no longer key individual -
	send letter to him (Mr Lewis).
9/13/95	Letter.
9/25/95	PC from Toni Jacobs. Discussed problem. T. Jacobs
	to contact me for time to review files @ this office &
	discuss problem. jsn
9/25/95	OC w/Mr Paul Bowers. Advised to consult B. Martin
	regarding his soil report. jsn
10/19/95	PC (vm) from Edward High @ 375-3176.
	PC to Mr High. NC. LM on answer machine.
10/20/95	PC w/ Mr High. Requested informal review regard. situation.
	Recommended we meet OS w/soil scientist (B. Martin).
	I will consult B. Martin to coordinate visit.

SERVICE REQUEST/WORK ORDER

Date:_____ Log No.:_____

DATE	ACTIVITY REPORT
10/30/95	B. Mallon - K. Randall OS w/Tori Jacobs - to submit water use documentation from comparable facility

c:/original/serreqp2.frm

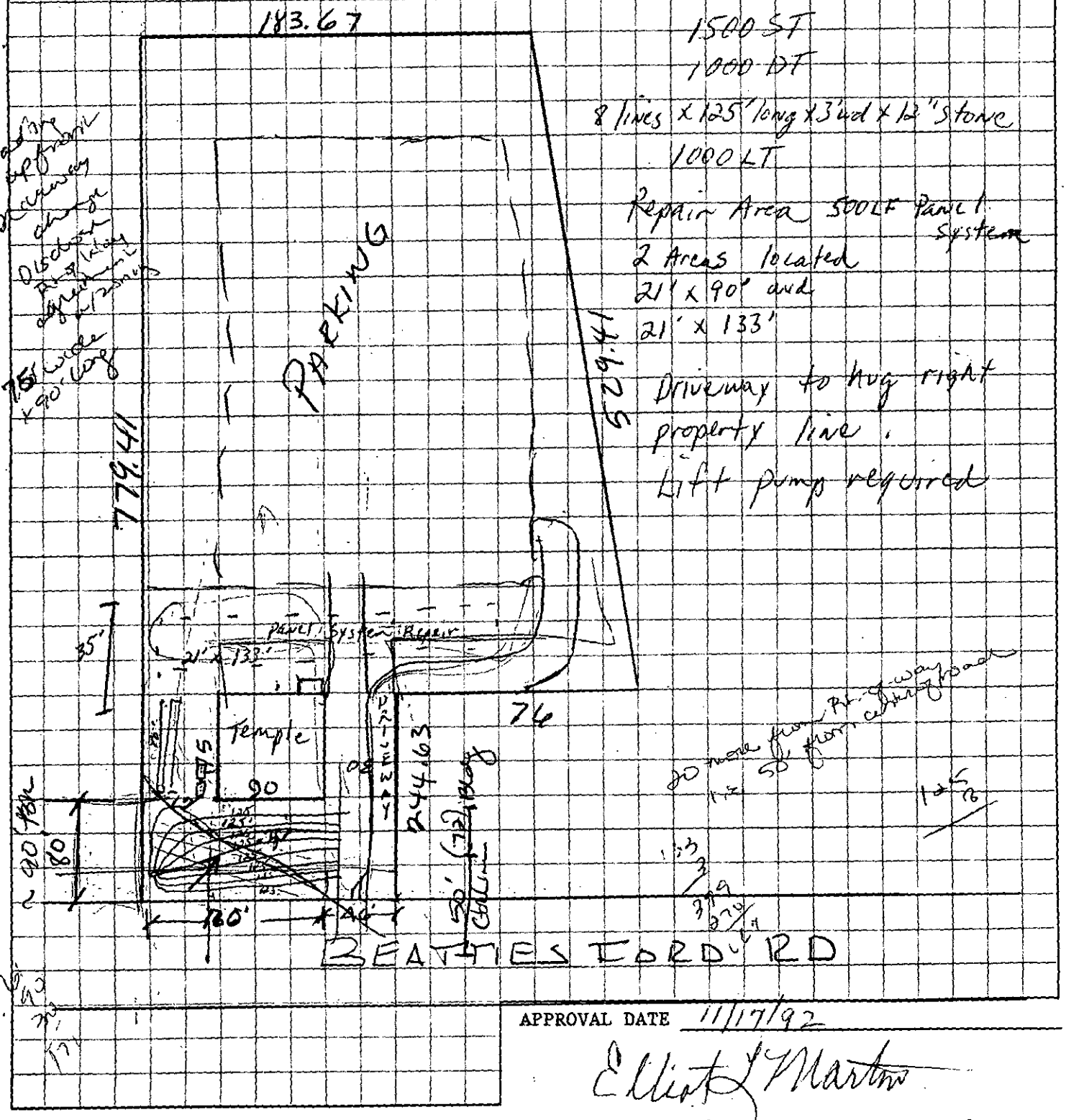
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 7238A

TC: 039-29-22

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



APPROVAL DATE 11/17/92

Elliott L Martin

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 16953

File: Action 1

Parcel: ~~7838A~~ 039-291-22 ☒ PC

Location:

Subdivision:

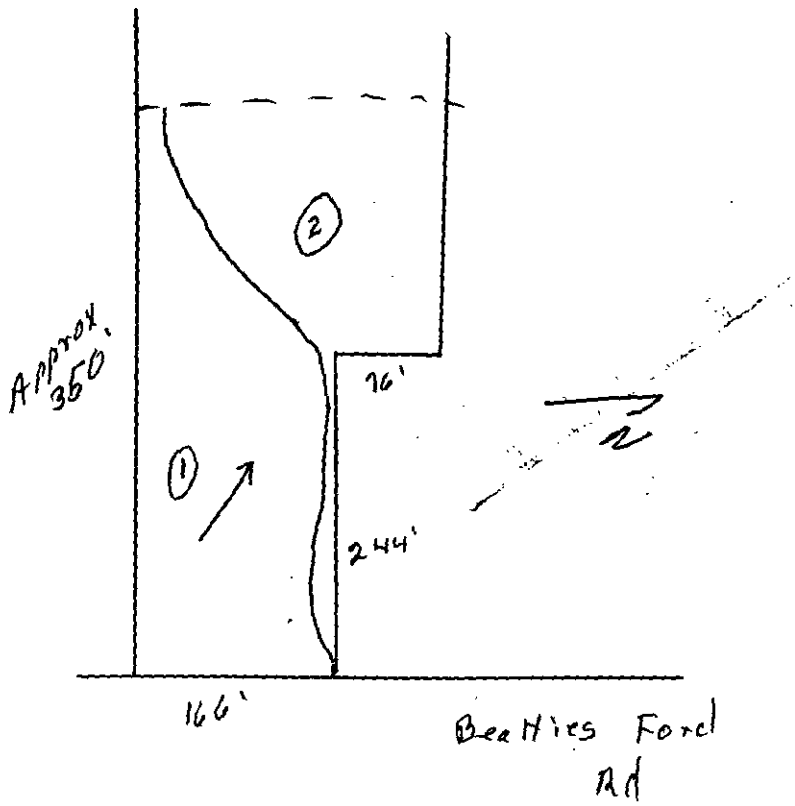
Lot: Beasties Ford ~~Road~~ Block: Approx 1.5

Owner:
Address:

John F. Prim
3706 Plum Grove Court
Comments: ~~Charlotte, NC 28210~~

Described by: William A. Marlin

Date: 2-5-91



***** EVALUATION KEY *****

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	(S) PS U 6-10%	S PS (U) Drainageway Depression	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U Clay	S PS U —	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U —	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U 736" To Water	S PS U —	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 736"	S PS U —	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 736"	S PS U —	S PS U	S PS U	S PS U	S PS U
Available Space	S (PS) U Limited	S PS U —	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	IV Cecil-Lloyd	Drainageway Depression				
Area Classification	S (PS) U	S PS (U)	S PS U	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

FILE: 7238A

TC: 039-291-22

☑ PC ☐ REPT

JOB LOCATION

① ADDRESS: Beatties Ford Road

② SUBDIVISION: None ③ LOT: ④ BLOCK:

⑤ PARCEL REFERENCE: BOOK NO.: 039 PAGE NO.: 291 PARCEL NO.: 22

⑥ DEED REFERENCE: BOOK NO.: PAGE NO.:

OWNER

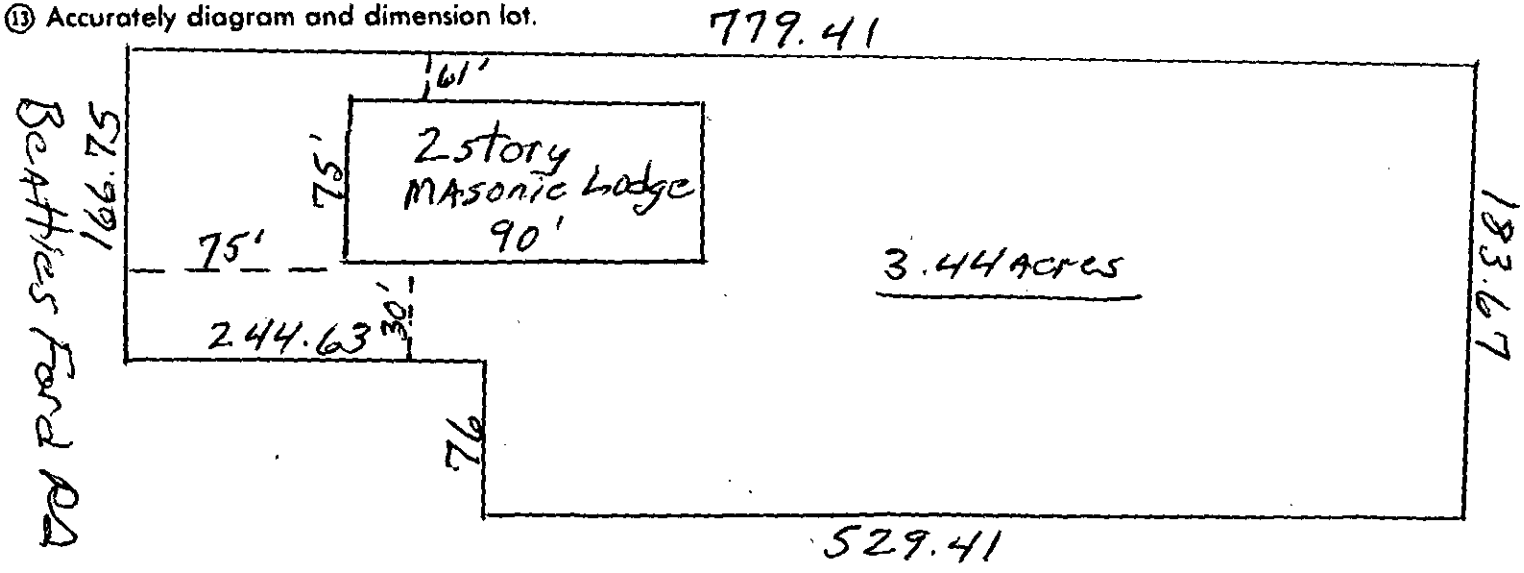
⑦ NAME: John (FIRST) F. (MIDDLE) Prim (LAST)

⑧ MAILING ADDRESS: 3706 Plum Grove Ct.

⑨ CITY: Charlotte ⑩ STATE: NC ⑪ ZIP: 28210

⑫ PHONE: (WORK) 372-4281 (HOME) 554-1243

⑬ Accurately diagram and dimension lot.



3.44 Acres

Mecklenburg County
Health Department

September 13, 1995

Rameses Temple
c/o Walter Lewis
1500 McAllister Drive
Charlotte, North Carolina 28216

Re: 4919 Beatties Ford Road
File: 7238A
Tax Parcel: 039-291-22

Dear Mr. Lewis:

This is to notify you of our intent to suspend the improvement permit issued for the Rameses Temple's sewage disposal system thirty (30) days from the date of this notice for the following violations:
North Carolina Laws and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A, **.1937 Permits states in part:**

> "(a) An Improvement Permit shall be required in accordance with G.S. 130A-336. Rule .1949 of this Section shall be used to determine whether subsequent additions or modifications increase sewage flow.
>
> (b) The local health department shall issue an Improvement Permit only after it has determined that the system is designed and can be installed so as to meet the provisions of these Rules. An Improvement Permit shall be valid for sixty (60) months from the date of issue. If the installation has not been completed during that time period, the information submitted in the application for an Improvement Permit is falsified or changed, or the site is altered, the permit shall become invalid. When an Improvement Permit has become invalid, the installation shall not be commenced or completed until a new Improvement Permit has been obtained."

Due to site alterations, the improvement permit will remain suspended until the Mecklenburg County Health Department Individual Water and Wastewater Systems Program has received a plan for a sewage disposal system to serve the facility which can be reviewed and approved in conjunction with the North Carolina Laws and Rules for Sewage Treatment and Disposal Systems. This plan should include specifications for a replacement system. **Rule .1945 Available Space States in part:**

> "(a) Sites shall have sufficient available space to permit the installation and proper functioning of ground absorption sewage treatment and disposal systems, based upon the square footage of nitrification field required for the long-term acceptance rate determined in accordance with these Rules.
>
> (b) Sites shall have sufficient available space for a repair area separate from the area determined in Paragraph (a) of this Rule. The repair area shall be based upon the area of the nitrification field required to accommodate the installation of a replacement system as specified in Rule .1955, .1956, or .1957 of this Section. Prior to issuance of the initial Improvement Permit for a site, the local health department shall designate on the permit the original system layout, the repair area, and the type of replacement system."

You also have the right to an informal review with this Department. If no resolution can be reached you may request an informal review of this decision by the Department of Environment, Health and Natural Resources by contacting the health department at the above address. You have the right to a formal appeal of this decision if you file a petition for a contested case hearing with the Office of Administrative Hearings, P. O. Drawer 27447, Raleigh, North Carolina 27611-7447. A petition form will be provided to you upon request. The petition must be received by the Office of Administrative Hearings within thirty (30) days after the date of this notice.

If you file a petition for a hearing, you must send a copy of the petition to Mr. Richard Whisnant, Office of General Counsel, P. O. Box 27687, Raleigh, North Carolina 27611-7687.

Please feel free to contact me at 336-5573, if you have any questions at this time.

Sincerely,

Lisa B. Mialik

Lisa B. Mialik, R.S.
Individual Water and Wastewater Systems

LBM:lw

cc: Elliott Martin
Paul Bower, Builder

RECOMMENDED LETTER FOR INTENT TO SUSPEND IMPROVEMENT PERMITS, CERTIFICATES OF COMPLETION OR OPERATION PERMITS:

Sept
Date

Dear Sir/Madam:

~~This is to~~ notify you of our intent to suspend your (improvement permit, operation permit, or certificate of completion) 60 days from the date of this notice for the following violations: 30

(Cite Laws or Rules). The (specify improvement permit, operation permit, or certificate of completion) remains suspended until the health department determines that the violations have been corrected.

You may request an informal review of this decision by the Department of Environment, Health and Natural Resources by contacting the health department at the above address. You have the right to a formal appeal of this decision if you file a petition for a contested case hearing with the Office of Administrative Hearings, P. O. Drawer 27447, Raleigh, N. C. 27611-7447. A petition form will be provided to you upon request. The petition must be received by the Office of Administrative Hearings within ~~60~~ 30 days after the date of this notice.

If you file a petition for a hearing, you must send a copy of the petition to Mr. ~~John C. Hunter~~ Richard Whisnant, Office of General Counsel, P. O. Box 27687, Raleigh, North Carolina 27611-7687.

Sincerely,



LAWS AND RULES FOR SEWAGE TREATMENT AND DISPOSAL SYSTEMS

NORTH CAROLINA

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES

DIVISION OF ENVIRONMENTAL HEALTH

ON-SITE WASTEWATER SECTION

EFFECTIVE JULY 1, 1982
AMENDED EFFECTIVE APRIL 1, 1993

.1937 PERMITS

(a) An Improvement Permit shall be required in accordance with G.S. 130A-336. Rule .1949 of this Section shall be used to determine whether subsequent additions or modifications increase sewage flow.

(b) The local health department shall issue an Improvement Permit only after it has determined that the system is designed and can be installed so as to meet the provisions of these Rules. An Improvement Permit shall be valid for 60 months from the date of issue. If the installation has not been completed during that time period, the information submitted in the application for an Improvement Permit is falsified or changed, or the site is altered, the permit shall become invalid. When an Improvement Permit has become invalid, the installation shall not be commenced or completed until a new Improvement Permit has been obtained.

(c) Application for an Improvement Permit shall be submitted to the local health department. The application shall contain at least the following information: name of owner, mailing address, location of property, plat of property (if not readily available to local health department), type of facility, estimated sewage flow based on number of bedrooms or number of persons served, type of water supply, and signature of owner or authorized agent. The applicant shall be responsible for notifying the local health department of any designated wetland.

(d) Prior to the issuance of an Improvement Permit for a sanitary sewage system to serve a condominium or other multiple-ownership development where the system will be under common or joint control, a draft agreement (tri-party) among the local health department, developer, and a proposed non-profit, incorporated owners association shall be submitted to the local health department for approval. Prior to the issuance of an Operation Permit for a system requiring a tri-party agreement, the agreement shall be properly executed among the local health department, developer, and a non-profit, incorporated owners association and filed with the local register of deeds. The tri-party agreement shall address ownership transfer of ownership, maintenance, repairs, operation, and the necessary funds for the continued satisfactory performance of the sanitary sewage system, including collection, treatment, disposal, and other appurtenances.

(e) No residence, place of business, or place of public assembly shall be occupied nor shall any sanitary sewage system be covered or placed into use until the local health department finds that the system is in compliance with Article 11 of G.S. Chapter 130A, these Rules, and all conditions prescribed by the Improvement Permit, and issues a Certificate of Completion or an Operation Permit. At the review frequency specified in Rule .1961, Table V(a) of this Section, the local health department shall determine whether a system with an Operation Permit is operating properly and complies with the conditions of the Operation Permit. The local health department may suspend or revoke the Operation Permit if it is determined that the system is not operating properly or is not in compliance with Article 11 of G.S. Chapter 130A, these Rules, and all conditions imposed by the Operation Permit.

(f) Upon determining that an existing sanitary sewage system has a valid Operation Permit or a valid Certificate of Completion and is operating satisfactorily in a mobile home park, the local health department shall issue a written authorization for a mobile home to be connected to the existing system and to be occupied.

(g) Any person other than the owner or controller of a residence, place of business, or place of public assembly, who engages in the business of constructing, installing, or repairing sanitary sewage systems shall register with the local health department in each county where he operates before constructing, installing, or repairing sanitary sewage systems.

(h) Systems which exceed 3,000 gallons per day and other systems which are required to be designed by a professional engineer shall be reinspected annually.

(i) The local health department shall prepare a written report with reference to the site and soil conditions required to be evaluated pursuant to this Section. When a permit is denied, the report shall be provided to the applicant. If modifications or alternatives are available, information shall be provided to the applicant. The report shall be signed and dated by the local (authorized) sanitarian.

History Note: Statutory Authority G.S. 130A-335(e) and (f);
Eff. July 1, 1982;
Amended Eff. August 1, 1991; January 1, 1990; January 1, 1984.

.1938 RESPONSIBILITIES

(a) The design, construction, operation, and maintenance of sewage treatment and disposal systems, whether septic tank systems, privies or alternative systems, shall be the responsibility of the designer, owner, developer, installer, or user of the system as applicable.

$300.00

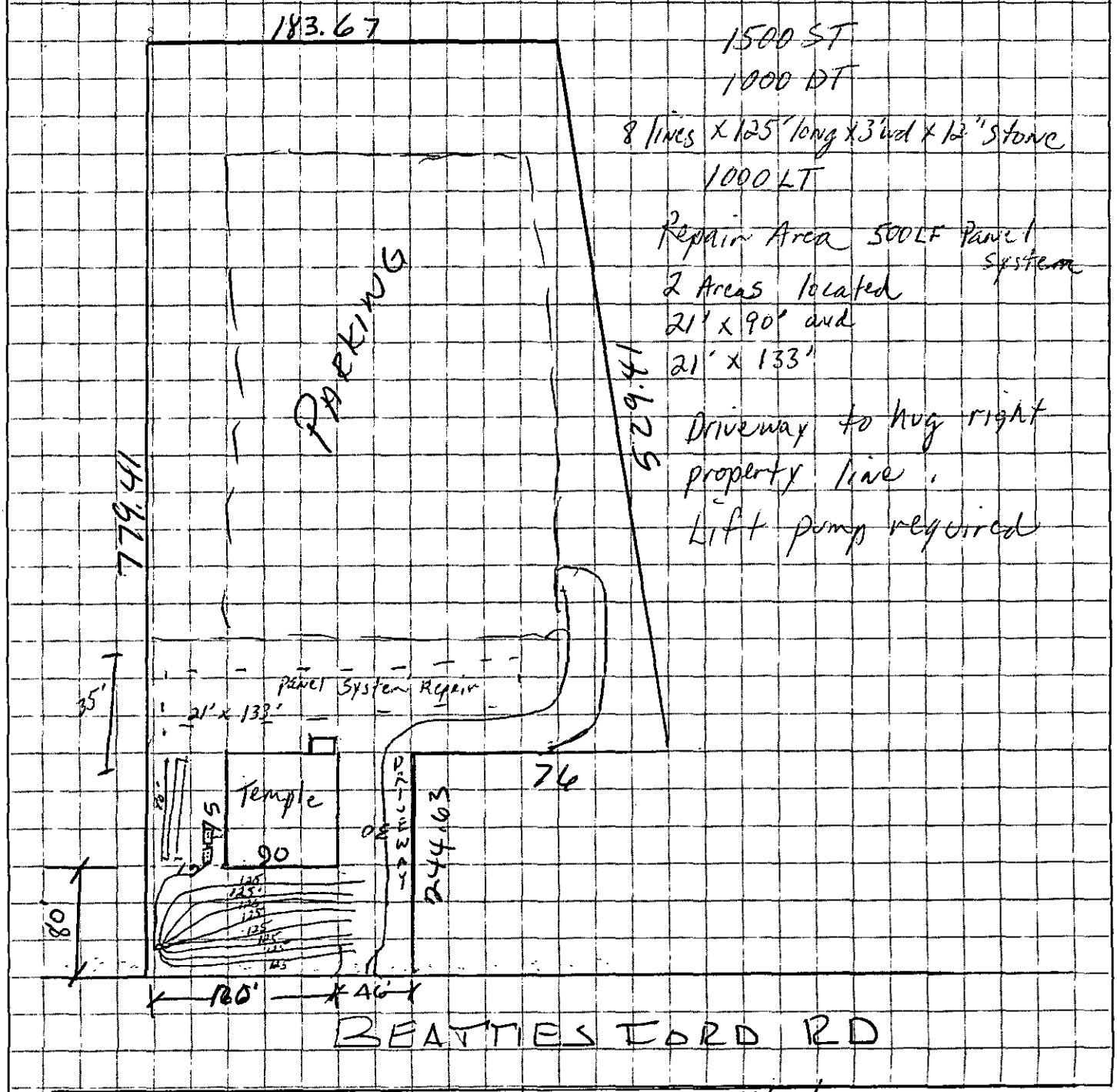
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 7238A

TC: 639-29-22

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. *Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.*



APPROVAL DATE 11/17/92

Elliott L Martin

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy

$ 300.00

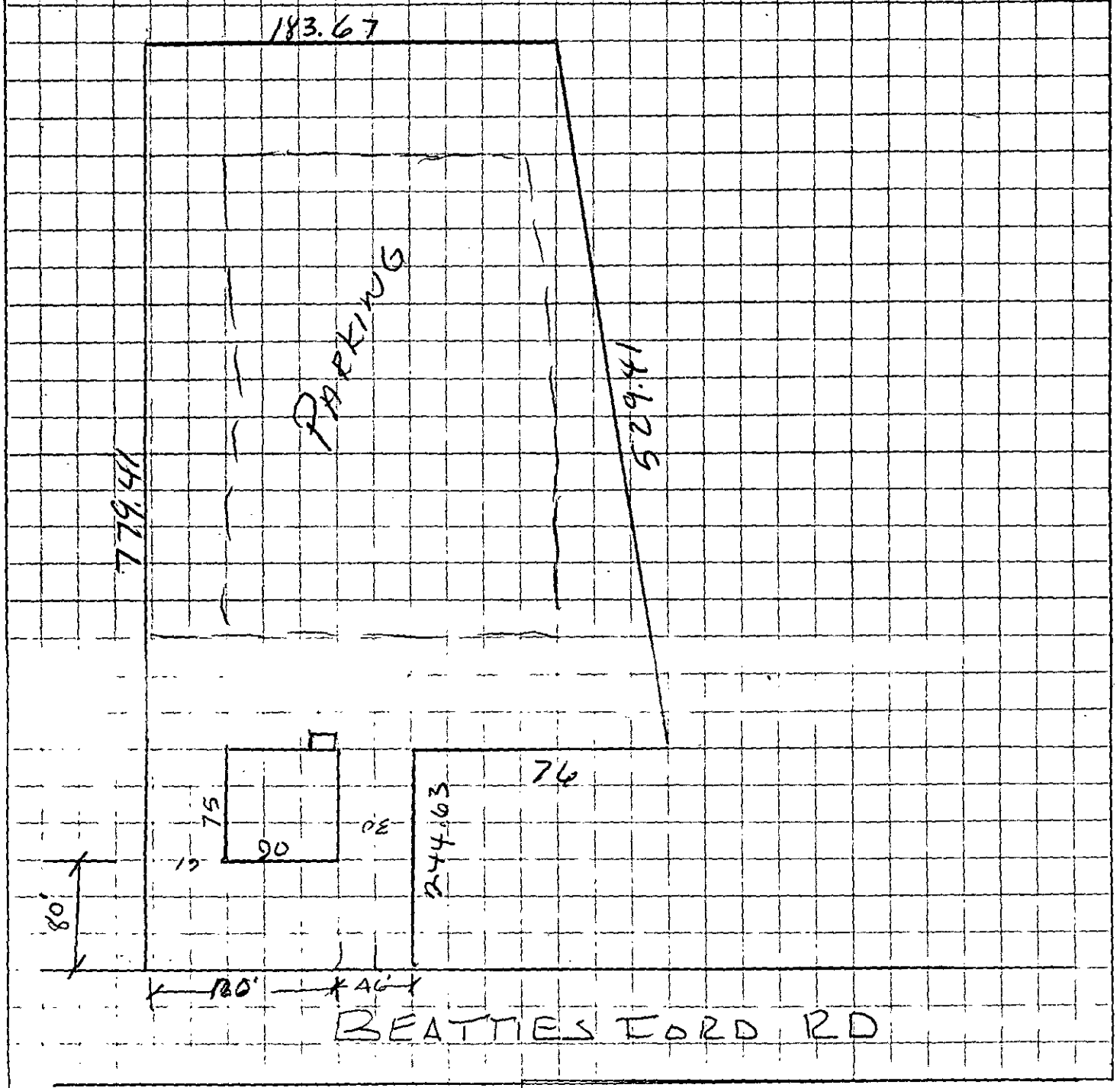
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 7238A

TC: 039-29-22

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



APPROVAL DATE _____

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 7238-A DATE: 2-14-96

TC: 039-291-22L

SERIAL Nº 16609

Permission is hereby given 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 in the application dated 10-30-92. All work shall be completed on or before _____, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A. 1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Health Department before any system can be covered up or placed into service. 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.

INSTALL EXACTLY
W/ PLAN ON FILE

PLOT OF SYSTEM

Liquid Capacity of Septic Tank 2000 gallons

Liquid Capacity of Dosing Tank 2000 gallons

Tank Construction PCC

Trench Depth see plan

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Trench Walls Scored and Porous yes

Total Line Length 756 feet

Number of Lines see plan

Depth of Stone NA inches

Distance from House 5'+ feet

Distance from Property Line 10'+ feet

Distance from Well ~~100'+~~ CMUD feet

NOTICE: This system shall not be installed while soils are in a wet condition.

NAME OF OWNER RAMESES TEMPLE

LOCATION OF PROPERTY 4919 BEATTIES FORD RD

Comments: INSTALL EXACTLY W/ PLAN ON FILE

S Bateman for S Daniel/Program Asst 2-26-96

Environmental Health Specialist

WHITE - HEALTH DEPARTMENT's COPY • CANARY - E.H.S. COPY • PINK - OWNER OR AGENT's COPY

TO: ENVIRONMENTAL HEALTH DEPT.
BUILDING STANDARDS DEPT.
DEPT. OF ENVIRONMENTAL PROTECTION/
SOLID AND HAZARDOUS WASTE

DATE: 10-30-92

FROM: COUNTY ENGINEERING DEPARTMENT

EHD FILE _____ JURISDICTION CODE MECK

PARCEL NUMBER #039-291-22

ASSIGNED ADDRESS 4919 BEATTIES FORD RD

EXISTING ADDRESS _____

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

		APPROVED	DISAPPROVED
1.	SUBDIVISION REGULATIONS	_____	_____*
2.	FLOODWAY REGULATIONS	_____	_____*
3.	EROSION CONTROL REGULATIONS	_____	_____*
4.	PUBLIC UTILITY EASEMENT	_____	_____*

		PRESENT	NOT PRESENT
5.	PUBLIC UTILITY EASEMENT	_____*	_____
6.	PROPERTY FRONTS ON THOROUGHFARE	_____*	_____
7.	DRIVEWAY PERMIT REQUIRED	_____*	_____

*If checked, further investigation will be required to determine whether a building permit can be issued by Building Standards for the site.

REMARKS: New Bldg / Septic Tank

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIER'S OFFICE AT BUILDING STANDARDS WHEN PAYING PERMIT FEES.

A CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL THE TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAYS.

SIGNED: B. McCowan

OPWEAR 06-88

NEW ADDRESS _____*

FORM 100

Mecklenburg County
Health Department

Transfer money ($165) toward new APP

February 6th, 1991

John F. Prim
3706 Plum Grove Court
Charlotte, NC 28210

RE: Property located at Beatties Ford Road
FILE: 7238A
PARCEL: 039-291-22

Dear Sir:

At your request, a field investigation was conducted on the property designated above for the purpose of determining site suitability for the installation of a ground absorption sewage disposal system. The property was found to contain a limited area of soils which were classified as PROVISIONALLY SUITABLE for such an installation. A copy of the Site Evaluation Report (Serial Number 16953) is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit an Application For An Improvement Permit with an ACCURATELY dimensioned plot plan detailing the location of current and/or proposed buildings, wells and sewage disposal systems to this office. The plan will be reviewed and if it is found that the area of provisionally suitable soils is adequate for the proposed construction, an Improvement Permit will be issued by this Department.

If there are any questions concerning this matter, do not hesitate to contact me.

Sincerely,

Gene Vaughan SD

Gene Vaughan, R.S., Supervisor
Individual Water and Wastewater Systems

Enclosure

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 16953

File:

Action 1

Parcel: 7238A

PC

Location:

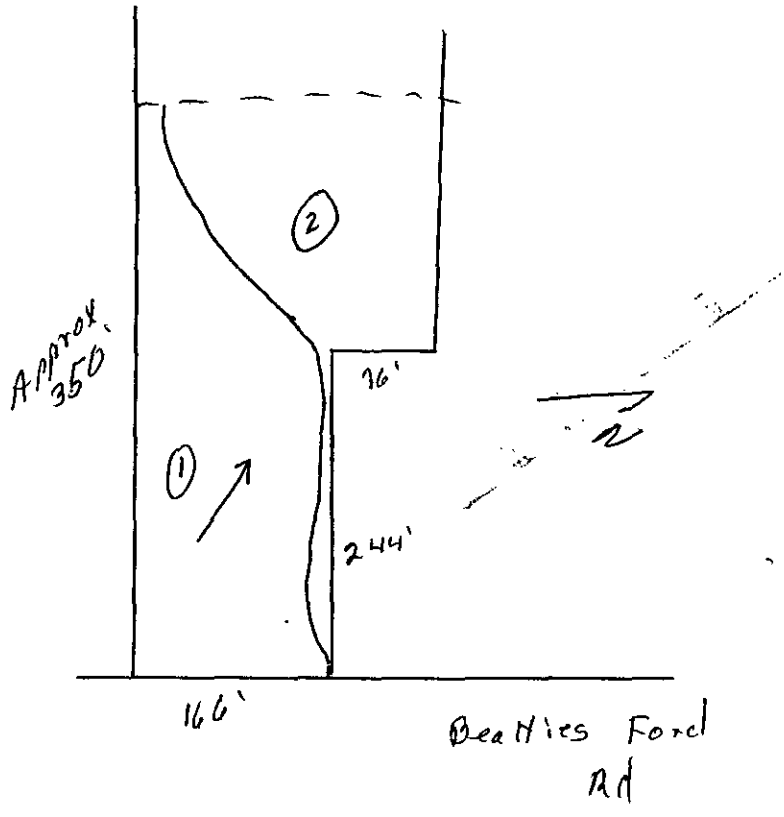
Subdivision:

Lot: Block: Acres: Beatties Ford Road Approx 1.5

Owner:
Address:

Comments: John F. Prim
3706 Plum Grove Court
~~Charlotte, NC 28210~~

039-291-22



Described by: William A. Marlin

Date: 2-5-91

***** EVALUATION KEY *****

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	(S) PS U 6-10%	S PS (U) Drainageway Depression	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U Clay	S PS U —	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U —	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U 736" To water	S PS U —	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 736"	S PS U —	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 736"	S PS U —	S PS U	S PS U	S PS U	S PS U
Available Space	S (PS) U limited	S PS U —	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	IV Cecil-1.4%	Drainageway Depression				
Area Classification	S (PS) U	S PS (U)	S PS U	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

FILE: 7238A

TC: 039-291-22

☑ PC ☐ REPT

JOB LOCATION

① ADDRESS: Beatties Ford Road

② SUBDIVISION: None ③ LOT: ④ BLOCK:

⑤ PARCEL REFERENCE: BOOK NO.: 039 PAGE NO.: 291 PARCEL NO.: 22

⑥ DEED REFERENCE: BOOK NO.: PAGE NO.:

OWNER

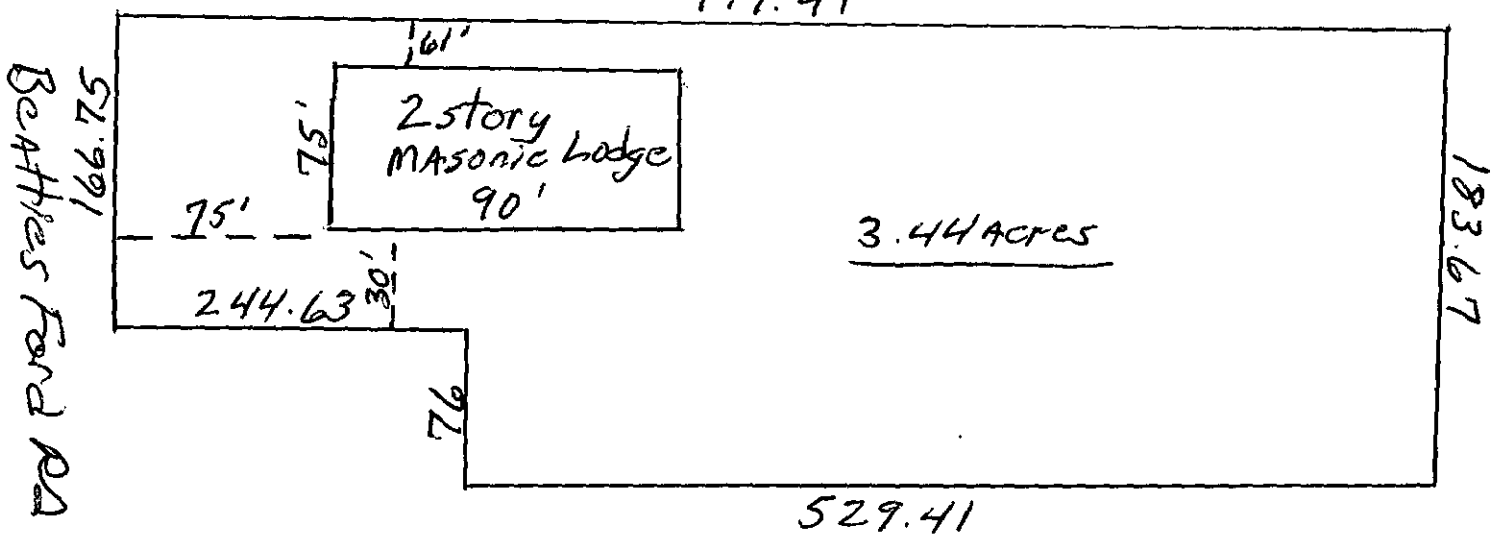
⑦ NAME: John (FIRST) F. (MIDDLE) Prim (LAST)

⑧ MAILING ADDRESS: 3706 Plum Grove Ct.

⑨ CITY: Charlotte ⑩ STATE: NC ⑪ ZIP: 28210

⑫ PHONE: (WORK) 372-4281 (HOME) 554-1243

⑬ Accurately diagram and dimension lot.



⑭ The undersigned, 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 agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: John F Prim

Date: 1/16/91

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER'S COPY

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 1-16-91

Name/Company: Ramseys Temple #51
by Elliott Martin

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Soil Test; 3.44 acres
Beatties Ford Road
Tax # 039-291-22
Lot # 7238A

COUNTY
DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
JAN 16 1991

Cash

Fee: $ 175.00 #175.00

NOTICE:

A processing fee of $15.00 will be charged for all returned checks in accordance with N.C. General Statute 25-3-512.

Completed by

Collected by