INSPECTION AND MAINTENANCE AGREEMENT

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

This agreement is made and entered into this 22 day of OCTOBER, 2014 by and between _____ (hereinafter referred to as the "Owner") and HUTAY SEPTIC SERVICE (hereinafter referred to as the "Contractor").

WITNESSETH

WHEREAS, the Owner owns or controls the property upon which a ground absorption sewage treatment system (hereinafter "system") is installed, such system being designated a Type III B system under the Rules for Sanitary Sewage Collection, Treatment and Disposal found at 15A N.C. Administrative Code 18A.1900 et seq.; and

WHEREAS, 15A N.C. Administrative Code 18A.1961 requires a contract to be executed between the system owner and a management entity prior to the issuance of an Operation Permit for said system; and

WHEREAS, 15A N.C. Administrative Code 18A.1961 requires that a condition of the Operation Permit for said system be that a properly executed contract between the system owner and a management entity, shall be in effect for as long as the system is in use; and

WHEREAS, the Contractor is a management entity, of a type authorized by 15A N.C. Administrative Code 18A.1961 to manage a Type III B system.

NOW THEREFORE, in consideration of the premises and of the mutual covenants and promises contained in this Agreement, it is hereby agreed by and between the Owner and the Contractor as stipulated below.

1. The Contractor's Obligations. The Contractor shall perform the following services on the Owner's system located at
14015 Thompson Rd
Mint Hill, N.C.

a) The contractor shall inspect the system at least at the frequency, required in Table V(b) of 15A N.C. Admin. Code 18A.1961(b) for a Type III B System.

b) The Contractor shall perform the following routine maintenance procedures in accordance with the conditions of the Operation Permit:

1) [from operation permit]
2) INSPECT 2 X'S PER YR
3) SEND COPY OF REPORT TO CMHD

c) The Contractor shall report the results of its inspections to the local health department at the frequency specified in Table V (b) of 15A N.C. Administrative Code 18A.1961(b) for a Type III B System.

d) If an inspection indicates the need for system repairs, the Contractor shall notify the local health

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department within 48 hours of the inspection.

e) The Contractor shall notify the Owner of needed repairs, which are outside of the scope of routine maintenance described in subparagraph (b) above. The Contractors shall perform necessary repairs to the system at the request of the Owner and shall be entitled to payment therefor at the Contractor's normal charge for services and materials.

f) The Contractors shall employ or shall contract with a certified operator(s) if required by Table V (b) of 15A N.C. Admin. Code 18A.1961(b) for a Type III B System.

g) The Contractor shall respond to a request for a nonscheduled service or maintenance call within 24 hours after receipt of such request.

2. The Owner's Obligations.

a) The Owner shall pay to the Contractor the sum of $ 400.00 per year for periodic inspections, routine maintenance procedures and periodic reports. The annual fee may be amended upon sixty (60) days advance notice to the Owner but may not be increased more than 5 percent per year. The Owner shall pay to the Contractor his normal and customary fees for any work performed on the system as a result of nonscheduled service or maintenance calls. All fees are due and payable within thirty (30) days of billing. Payments due to the Contractor and unpaid by the Owner after thirty (30) days shall accrue interest from the due date until paid at a rate of _ percent per month.

b) Within 10 days of receipt of notice of needed repairs pursuant to paragraph 1.e. above, the Owner shall request the Contractor to complete needed repairs or shall provide to the Contractor evidence that the needed repairs were satisfactorily completed by another entity.

c) The Owner shall provide the Contractor with such access to the system as is reasonably necessary for the Contractor to comply with the terms of this Agreement.

3. Term. This Agreement shall remain in effect until terminated.

a) Automatic Termination.
This agreement shall automatically terminate if the Operation Permit for the system is revoked and all appeals of the revocation are exhausted or the time for taking an appeal has passed.

b) Termination by Mutual Consent.
The Parties may mutually agree to terminate this Agreement by giving written notice of termination by mutual consent to the local health department thirty (30) days in advance of the date of termination.

c) Termination by the Owner.
The Owner may terminate this Agreement by giving notice to the Contractor and to the local health department thirty (30) days in advance of the date of termination.

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d) Termination by the Contractor.

1) The Contractor may terminate this Agreement for cause by giving written notice of intent to terminate this Agreement to the Owner and to the local health department thirty (30) days in advance of the date of termination. Cause shall be defined as:

a) failure to remit payment for any bill for services performed under and in accordance with this Agreement if said bill is not paid within thirty (30) days of receipt by the Owner of the bill. If said bill is paid after notice of termination of this Agreement, the Agreement shall continue in effect; or

b) failure of the Owner to provide to the Contractor authorization to complete needed repairs or satisfactory evidence that needed repairs to the system were completed by another entity within 30 days of receipt of notice of needed repairs pursuant to paragraph 1.e. above. If said authorization to complete needed repairs or evidence of completion of said repairs is provided after notice of termination is given but prior to the date of termination of this Agreement, this Agreement shall continue in effect; or

c) failure of the Owner to allow the Contractor such access to the system as is reasonably necessary in order for the Contractor to comply with the terms of this Agreement.

2) The Contractor may not terminate this Agreement without cause, but may assign its rights and duties under this Agreement as provided in paragraph 4, below.

4. Assignment.

a) Assignment by the Owner.
The Owner shall notify the Contractor of the name and address of any purchaser of the property on which the system is located. The Owner shall also notify any purchaser of the property on which the system is located of the existence of this Agreement and shall assign all rights and duties under this Agreement to said purchaser.

b) Assignment by the Contractor.
The Contractor may assign its rights and duties under this Agreement to another management entity, which is qualified pursuant to 15A N.C. Admin. Code 18A.1961 to manage a Type III system upon thirty (30) days written notice to the Owner and to the local health department.

5. Use of Subcontractors. The Contractor may subcontract with such manufacturers, suppliers and contractors as it deems desirable to perform any of the Contractor's duties under this Agreement. The Contractor shall at all times remain responsible for the performance of and payment for all work performed by all subcontractors.

6. Representations. The Parties represent to each other that each has the power, authority and legal right to enter into and perform its obligations as set forth in this Agreement.

INSPECTION AND MAINTENANCE AGREEMENT

7. Regulatory Amendments. References in this Agreement to sections of the Administrative Code shall include such rules as they may be amended in the future.

8. No Implied Waiver. The waiver by either Party, of the default or a breach by the other Party of any provision of this Agreement shall not operate or be construed to operate as a waiver of any subsequent default or breach. The failure at any time of either Party to enforce any provision of this Agreement (a) shall not be construed to be a waiver of such provisions, or of any other provision; and (b) shall not in any way affect the validity of this Agreement, or any part of this Agreement, or the right of either Party thereafter to enforce each and every provision of this Agreement.

9. Notice. Every notice required under this Agreement shall be in writing and shall be deemed sufficiently given if delivered in person or sent by certified or registered mail, return receipt requested, postage prepaid to the Party to be notified and addressed as follows:

To the Owner: Rep. James Scruggs.

To the Contractor: Autry's 1309 Culp Rd Pineville, N.C. 28134

To the Local Health Department: Mecklenburg Co Env. Health

The date of any Notice shall be the date of personal delivery or the date shown on the return receipt as the date of delivery or attempted deliver, as the case may be. Changes in the respective addresses to which notice may be directed may be made from time to time by either Party by notice to the other party.

10. Place of Agreement. This Agreement and any questions concerning its validity, the system construction or performance shall be governed by the laws of the State of North Carolina. notwithstanding the place of execution, or the order in which the signatures of the Parties are affixed.

11. Entire Agreement and Amendment. This Agreement supersedes all prior negotiations, agreements and understandings between the Parties with respect to the subject matter hereof and constitutes the entire Agreement between the Parties with respect to the subject matter hereof. To be effective, any amendment or modification to this Agreement must be in writing and must be signed by the Parties.

12. Severability. In the event that any provision of this Agreement shall, for any reason, be determined to be invalid, illegal or unenforceable in any respect, the Parties shall negotiate in good faith and agree to such amendments, modifications or supplements of or to this Agreement or such other appropriate actions as shall, to the maximum practicable in light of such determination, implement and give effect to the intentions of the Parties as reflected in this Agreement, and the

[redacted] AND MAINTENANCE AGREEMENT

[redacted] shall provisions of this Agreement shall, as so amended, modified, supplemented or otherwise affected by such actions, remain in full force and effect.

IN TESTIMONY WHEREOF, the Parties hereto have executed this Agreement in duplicate originals, one of which is retained by each of the Parties, the day and year first above written.

(Owner)

Attest:

(Company)

Attest:

Unlimited Possibilities
Licensed Residential Care Facility

13451 Thompson Road, Mint Hill, NC

McCLURE NICHOLSON MONTGOMERY

SHEET TITLE
FLOOR PLAN

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

OPERATION PERMIT for an ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 8540B Permit #: 5709 Tax Parcel #: 195-017-33

Property Owner: Unlimited Possibilities Family Care Home; James Scruggs.

Job Location Address: 14015 Thompson Rd.

City: Mint Hill State: NC Zip Code: _____

Operation Permit Issuance Date: 10/24/14 Contractor Name: Steve Autry

Permitted Design Flow: 720 GPD

Liquid Capacity of Septic Tank: 2000 gallons

Liquid Capacity of Dosing Tank: 1500 gallons

Effluent Pump Model: Myers ME75 3/4 hp

Drainfield Installation ☐ N/A

Trench Depth: 34 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 600 feet

# of Lines: 3 @ 200 feet

Depth of Media: 12" inches (Type) IIIb

Depth of Cover: 12"+ inches

Distribution Device: Press. Man.

Bed Installation *(For Repair Installations ONLY.)* ☒ N/A

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Depth of Cover: _____ inches

Distribution Device: _____

Water Supply Source

☒ Municipal ☐ Private Well ☐ Community Well

☐ Other _____

System Installation Setbacks

Distance from Building Foundation: 10'+ feet

Distance from Property Line: 10'+ feet (off site)

Distance from Water Supply Source: 10' feet from all supply lines

Inspection Dates

Tank(s) Inspected: 9/4/14

Excavation Inspected: 9/9/14

Pump & Controls Inspected: 10/22/14

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)

- Lot #2 off site installed per consultant/Eng. design.
- Easement recorded with Reg. of Deeds.
- Design plan on file w/ MCHD
- Sys. will have certified operator per consultant requirements

The undersigned has inspected the Septic Tank System described above, and certifies it has been ☒ installed ☐ altered ☐ repaired ☐ as detailed in the plot above ☒ in accordance with the permit issued 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. The issuance of this 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. 1900 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 or Revocation of this permit.

Comments: System Classification & Type: IIIb EZ1203TG/P/NA/NA

DENR Authorized Agent: _____ Signature: _____

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

OPERATION PERMIT for an
ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 8540 B Permit #: 5709 Tax Parcel #: 195-017-33

Property Owner: James Scruggs.

Job Location Address: 14015 Thompson Rd.

City: Mint Hill State: NC Zip Code: _____

OPERATION PERMIT CONDITIONS:

I. Performance: System shall perform in accordance with 15A NCAC 18A .1961.

II. Monitoring: System shall be monitored as required by 15A NCAC 18A .1961.

III. Maintenance: Ground absorption sewage treatment and disposal systems shall be checked, and the contents of the septic tank removed, periodically from all compartments, to ensure proper operation of the system. The contents shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.

IV. Operation: System shall be operated in accordance with 15A NCAC 18A .1961.

System Classification: IIIb

*Operation Permits for Type V and VI systems expire five (5) years from the date of issuance (in accordance with Table V(a)). The system owner must contact GWS six (6) months prior to expiration for permit renewal.

Subsurface system operator required: Yes ☒ No ☐

☐ This type of system requires the system owner to maintain a contract with a certified operator to perform system inspection, maintenance, and reporting as required in 15A NCAC 18A .1961. and Table V(a). The system owner is responsible for all fees associated with these services.

☐ System does not require inspection by GWS on a routine frequency.

☐ System requires inspection by GWS once every five (5) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every three (3) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every twelve (12) months. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every six (6) months. The system owner is responsible for all fees associated with the inspection.

V. Other: Per consultant design, system is required to maintain certified operator

DENR Authorized Agent: Bradley W. Hallman Date: 10/24/14

Signature: _____

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

INSTALLATION APPROVAL for an
ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 850413 Permit #: _____ Tax Parcel #: 195-017-33

Property Owner: Unlimited Possibilities Family Care Home; James Scruggs

Job Location Address: 14015 Thompson Rd

City: Mint Hill State: NC Zip Code: _____

Installation Approval Issuance Date: 9/4/14

Permission is hereby given to ☒ install ☐ alter ☐ repair an on-site wastewater treatment & and disposal system, with subsurface soil absorption and effluent discharge, as specified herein at the described location. This approval is granted based upon the application information submitted to our office. All work shall be completed on or before _____, after which date this approval 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 granting this approval. 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 of hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

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

Permitted Design Flow: 720 GPD

Site LTAR: .3 GPD/ft² (For new installations only.)

Liquid Capacity of Septic Tank: 2000 gallons

Liquid Capacity of Dosing Tank: 1500 gallons

Drainfield Design ☐ N/A

Trench Depth: 34" inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 600 feet

# of Lines: 3 @ 200 feet

Depth of Media: 12" inches (Type) IIIb

Distribution Device: Press. Man.

Bed Design *(For Repair Installations ONLY.)* ☐ N/A

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Distribution Device: _____

Water Supply Source

☒ Municipal ☐ Private Well ☐ Community Well

☐ Other _____

Minimum System Setbacks

Distance from Building Foundation: 5' min feet

Distance from Property Line: 10' min feet

Distance from Water Supply Source: 10' from all supply lines feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)

- Install system per Consultant Design
- System approved off site

Comments: System Classification & Type: IIIb

DENR Authorized Agent: Bradley W. Hallman Signature: _____

LandDesign.

urban design planning civil engineering branding landscape architecture

October 23, 2014

Mecklenburg County Ground Water and Wastewater Services
700 N. Tryon Street, Suite 211
Charlotte, NC 28202
Attn: Mr. Brad Hallman

Reference: Residential low pressure manifold distribution to remote drainfield with approved 25% reduction subsurface wastewater disposal for 14015 Thompson Road - **LOT 2**
Unlimited Possibilities Family Care Home - Mint Hill

Dear Mr. Hallman:

This letter is to certify, based upon inspection by myself, and/or others under my supervision, the above referenced pressure closed septic system was completed in substantial conformance with the approved design. The inspection was performed on October 22, 2014, tanks are well marked and the system is operational.

Very truly yours,

Frank J. McMahan, PE
Senior Associate

NORTH CAROLINA PROFESSIONAL SEAL 037773 ENGINEER FRANK J. MCMAHAN

10/23/14

223 North Graham Street
Charlotte, NC 28202

V: 704.333.0325
F: 704.332.3246

www.LandDesign.com

Washington DC
Charlotte NC
Raleigh NC
Dallas TX

FOR REGISTRATION
J. David Granberry
REGISTER OF DEEDS
Mecklenburg County, NC
2014 OCT 03 12:09:15
BK:29489 PG:757-760
FEE:$26.00
INSTRUMENT # 2014115735

TAYLORD

2014115735

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

SEPTIC SYSTEM EASEMENT AGREEMENT

This EASEMENT made this 24 day of September, 20 14, by and between

GRANTOR	GRANTEE
Unlimited Possibilities Family Home Care, LLC	**Unlimited Possibilities Family Home Care, LLC** 7245 City View Drive Charlotte, NC 28212

Enter in appropriate block for each party: name, address, and, if appropriate, character or entity, e.g., corporation or partnership.

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee an easement as hereinafter described, to run with the land upon that certain lot or parcel of land owned by Grantor and located in the City of Charlotte, Mint Hill Township, Mecklenburg County, North Carolina, and more particularly described as follows:

Mecklenburg Tax Parcel No. 19501708 recorded In Map Book 54 Page 606.

See the plat attached hereto as Exhibit B and the parcel shown thereon identified with Grantor's name for the legal description of Grantor's parcel and of the Septic System Easement Area located thereon, said parcel labeled threon and hereinafter referred to as the "Easement Parcel."

Grantor hereby imposes said easement for the benefit of Grantee as the present owner and for the benefit of future owners of the following lot or parcel of land, situated in the City of Charlotte, Mint Hill Township, Mecklenburg County, North Carolina, and more particularly described as follows:

Mecklenburg Tax Parcel No. 19501733 recorded In Map Book 54 Page 606

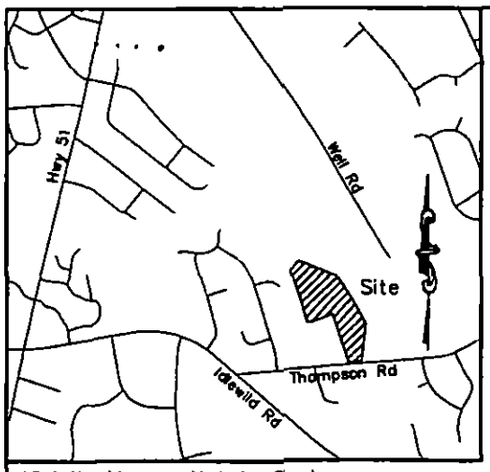
See the plat attached hereto as Exhibit B and the parcel shown thereon identified with Grantee's name for the legal description of Grantee's parcel, said parcel labeled thereon and hereinafter referred to as the "Benefited Parcel."

Said Easement shall enable the Grantee to place, if, as and when needed, such need to be determined by the Grantee in his sole discretion, a septic tank and drain field or portions thereof, upon the Septic System Easement Area on the Easement Parcel and to inspect, maintain, repair and replace components of said septic system at any time and from time to time. If the Easement Area also includes a connector strip for ingress and egress, Grantee shall have the right to use said connector strip for access as needed. *This Easement may not be altered, amended or cancelled without the express written permission of the Mecklenburg County Health Department, which written permission must be part of any document recorded to alter, amend or cancel this Easement.* This Easement shall automatically expire, however, should Grantee ever hook up the structure located or to be located on the Benefited Parcel to a public or community sanitary sewage system but shall otherwise be perpetual.

Grantor acknowledges that the Septic Tank System Easement Area cannot be used and will not be used for any of the following activities or in any of the following ways:

- Grading or filling
- Parking or driving heavy equipment in the area or in any other way compacting the soil in the Area
- Excavating soil from the Area
- Placing footings or foundations or engaging in any other construction activity in the Area
- Placing in-ground or above-ground swimming pools in the Area
- Placing irrigation systems in the Area
- Placing underground utility lines or cables in the Area
- Planting trees or gardens in the Area
- Removing any large trees in the Area unless dead or diseased
- Using the Area for the burial of stumps, trash, or any other type of construction material
- Using the Area for gravesites
- Diverting the natural flow of water onto the Area by way of drainage ditches or diversion ditches or using the Area to receive water from any gutter or downspout discharges

Exhibit B



Vicinity Map – Not to Scale

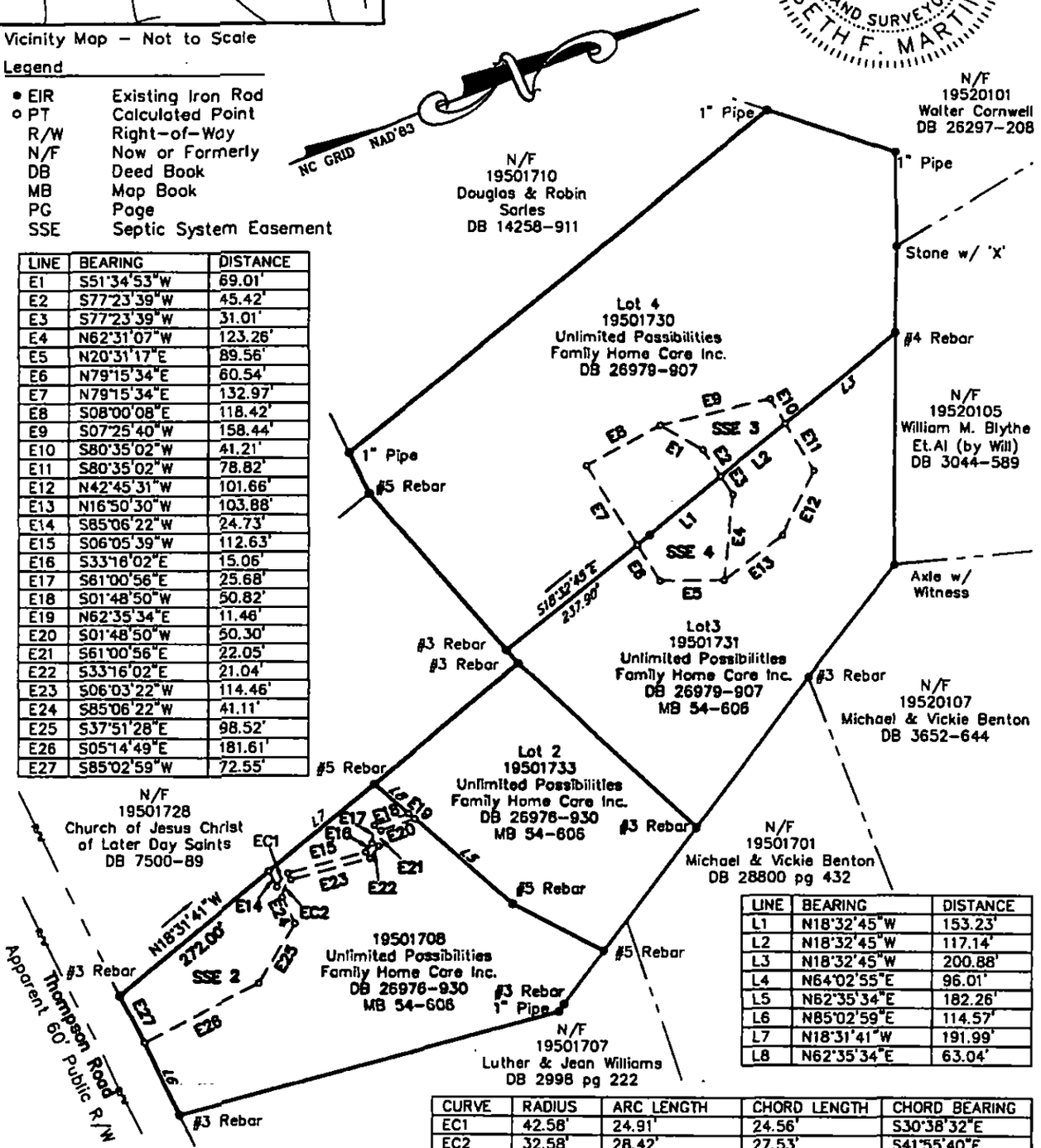
I, Seth F. Martin, certify that this map was drawn under my supervision from an actual survey made under my supervision; that the boundaries not surveyed are indicated as drawn from information in Book See Map, page See Map; that the ratio of precision is 1:10,000+; and that this map meets the requirements of The Standards of Practice for Land Surveying in North Carolina (21 NCAC 56.1600).

This 19th day of September, 2014

NORTH CAROLINA PROFESSIONAL SEAL L-4719 LAND SURVEYOR SETH F. MARTIN

Legend

•	EIR	Existing Iron Rod
o	PT	Calculated Point
	R/W	Right-of-Way
	N/F	Now or Formerly
	DB	Deed Book
	MB	Map Book
	PG	Page
	SSE	Septic System Easement



LINE	BEARING	DISTANCE
E1	S51°34'53"W	69.01'
E2	S77°23'39"W	45.42'
E3	S77°23'39"W	31.01'
E4	N62°31'07"W	123.26'
E5	N20°31'17"E	89.56'
E6	N79°15'34"E	60.54'
E7	N79°15'34"E	132.97'
E8	S08°00'08"E	118.42'
E9	S07°25'40"W	158.44'
E10	S80°35'02"W	41.21'
E11	S80°35'02"W	78.82'
E12	N42°45'31"W	101.66'
E13	N16°50'30"W	103.88'
E14	S85°06'22"W	24.73'
E15	S06°05'39"W	112.63'
E16	S33°16'02"E	15.06'
E17	S61°00'56"E	25.68'
E18	S01°48'50"W	50.82'
E19	N62°35'34"E	11.46'
E20	S01°48'50"W	50.30'
E21	S61°00'56"E	22.05'
E22	S33°16'02"E	21.04'
E23	S06°03'22"W	114.46'
E24	S85°06'22"W	41.11'
E25	S37°51'28"E	98.52'
E26	S05°14'49"E	181.61'
E27	S85°02'59"W	72.55'

LINE	BEARING	DISTANCE
L1	N18°32'45"W	153.23'
L2	N18°32'45"W	117.14'
L3	N18°32'45"W	200.88'
L4	N64°02'55"E	96.01'
L5	N62°35'34"E	182.26'
L6	N85°02'59"E	114.57'
L7	N18°31'41"W	191.99'
L8	N62°35'34"E	63.04'

CURVE	RADIUS	ARC LENGTH	CHORD LENGTH	CHORD BEARING
EC1	42.58'	24.91'	24.56'	S30°38'32"E
EC2	32.58'	28.42'	27.53'	S41°55'40"E

Notes:
1. Tax Parcel ID – 19501708; 19501733; 19501731; 19501730
2. Bearing base is referenced to NC NAD83 (2007) Grid derived by Real Time Kinematic GPS observations using Trimble R8 Receivers and the NC VRS Network.
3. All distances are shown horizontal.
4. Total Area in Septic System Easement – SSE 2: ±0.633 Acres; SSE 3: ±0.555 Acres; SSE 4: ±0.676 Acres

LDSI
Phone: (704) 337-8329
Fax: (704) 376-2448

Septic System Easement Exhibit

14009 Thompson Road

Mecklenburg County, North Carolina

SepticEasement 9-19-14.dwg, 9/19/2014 8:53:29 AM

8540B

MECKLENBURG COUNTY HEALTH DEPARTMENT App# 5709

APPLICATION FOR A RESIDENTIAL SITE IMPROVEMENT PERMIT/ CONSTRUCTION AUTHORIZATION FOR AN ON-SITE WASTEWATER SYSTEM, NEW WELL INSTALLATION, OR REPAIR OF EXISTING WELL

1. **SEPTIC / TYPE APPLICATION:** ○ N/A ⊘ NEW SYSTEM ○ ALTERATION ○ REPAIR ○ MODIFIED PLOT PLAN

2. **WELL / TYPE APPLICATION:** ○ N/A ○ NEW WELL ○ MAJOR REPAIR ○ ABANDONMENT

3. **JOB LOCATION INFORMATION:**
TAX PARCEL NUMBER: 195 017 33
STREET ADDRESS: 3931 Thompson Rd
CITY: Mint Hill
STATE: NC ZIP: 28227
SUBDIVISION NAME: _____
LOT #: 2 LOT SIZE (acres): ~ 7AC
TOWNSHIP:
○ MECKLENBURG ○ CORNELIUS ○ HUNTERSVILLE
○ DAVIDSON ○ CHARLOTTE ○ PINEVILLE
○ MATTHEWS ⊘ MINT HILL

4. **BUILDING INFORMATION:**
BUILDING TYPE:
○ SINGLE MOBILE HOME ○ MODULAR HOME
○ DOUBLE WIDE ○ MULTIPLE FAMILY
○ HOUSE ⊘ OTHER 6BR care home
HEATED SQUARE FOOTAGE: 4800
NUMBER OF BEDROOMS: 6
NUMBER OF OCCUPANTS: 6 1/3BR by state charter
FOUNDATION TYPE:
○ CONCRETE SLAB ○ BASEMENT WITH PLUMBING
⊘ CRAWL SPACE ○ BASEMENT WITH NO PLUMBING

5. **IF PLANNING TO EXPAND OR ALTER THE EXISTING SEPTIC SYSTEM PLEASE COMPLETE THE FOLLOWING SECTION:** ☑ N/A

NUMBER OF BEDROOMS TO BE ADDED: _____ NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: _____

6. **WATER SUPPLY:** ⊘ MUNICIPAL ○ PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER _____

7. **PROPOSED USE OF WELL:** ○ N/A ○ IRRIGATION ○ POTABLE (DRINKING WATER) ○ OTHER _____

8. **PLEASE INDICATE AND RANK DESIRED SEPTIC SYSTEM TYPE(S) IN ORDER OF PREFERENCE** *(1-MOST DESIRED 5-LEAST DESIRED)*:
☐ N/A ☐ ANY TYPE ☐ CONVENTIONAL ☑ ACCEPTED ☐ INNOVATIVE ☐ ALTERNATIVE ☐ OTHER 25% reduction

8A. **RANK:** ___ 1 ___ ___ ___

9. **DO ANY OF THE FOLLOWING APPLY TO THE PROPERTY IN QUESTION? IF "YES" PLEASE ATTACH SUPPORTING DOCUMENTATION.**

BURIED CABLES, LANDFILLS, STUMPHOLES	○ YES ⊘ NO	GRADING/SOIL REMOVAL PERFORMED	○ YES ⊘ NO
EXISTING WASTEWATER (SEPTIC) SYSTEMS	○ YES ⊘ NO	JURISDICTIONAL WETLANDS	○ YES ⊘ NO
WELLS, SPRINGS, OR WATER LINES	○ YES ⊘ NO	APPROVAL REQUIRED BY ANY OTHER PUBLIC AGENCY	○ YES ⊘ NO
EASEMENTS OR RIGHT-OF-WAYS	○ YES ⊘ NO	WASTEWATER OTHER THAN DOMESTIC SEWAGE	○ YES ⊘ NO
CHEMICAL/PETROLEUM STORAGE TANKS	○ YES ⊘ NO	KNOWN UNDERGROUND CONTAMINATION	○ YES ⊘ NO
WASTE STORAGE	○ YES ⊘ NO	GROUNDWATER USE RESTRICTIONS/VARIANCES	○ YES ⊘ NO

10. **WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?** _____ ☐ UNKNOWN

11. **WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?** _____ ☐ N/A

12. **PROPERTY OWNER:**
NAME: Unlimited Possibilities Inc
ADDRESS: 5003 Tewkesbury Rd
CITY: Charlotte
STATE: NC ZIP: 28269
WORK PHONE: 704 453-4753
MOBILE PHONE: _____
FAX: _____
E-MAIL: jAmes@upfamilycarehome.com

13. **OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:**
NAME: Tovey C. Jacobs, CSS
ADDRESS: 168 Boathill Dr
CITY: Mooresville
STATE: NC ZIP: 28117
WORK PHONE: 704 662 9845
MOBILE PHONE: 704 582 9219
FAX: _____
E-MAIL: toveycjacobs@gmail.com

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

Revised on: 12/15/10

14. SEPTIC SYSTEM PERMIT APPLICATION:

If the information in this application is falsified, changed, or the site is altered, then the Improvement Permit and Authorization to Construct shall become invalid. I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed. The permit is valid for either sixty (60) months or is non-expiring depending upon the documentation submitted: complete site plan = 60 months, complete plat = non-expiring. TCJ (initial here for septic system applications)

15. WELL PERMIT APPLICATION:

If the information in this application is falsified, changed, or the site is altered, then the Well Permit shall become invalid. I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed. The permit is valid for a period of twelve (12) months from the date of issuance.

_____ (initial here for well applications)

16. APPLICATION SIGNATURE SECTION:

ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. A proper signature is required in order to process your application. Please review the application carefully and sign in the space provided below. A PROPOSED PLOT PLAN is required to be submitted with each application.

Property Owner's or Owner's Legal Representative Signature — Date: 7/30/12

OFFICE USE ONLY

O SURVEY PLAT TO SCALE SUBMITTED O SCALED SITE PLAN SUBMITTED O UN-SCALED SITE PLAN SUBMITTED

SEPTIC APPLICATION FEE RECEIVED: $ 250.00 DATE FEE RECEIVED: 7/30/12

WELL APPLICATION FEE RECEIVED: $ _____ DATE FEE RECEIVED: _____

APPLICATION PROCESSED BY: Lisa

GWS FILE NUMBER ASSIGNED: 8540B

APPLICATION ID NUMBER ASSIGNED: 5709

COMMENTS:

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

File #: 8540B

PROPOSED PLOT PLAN

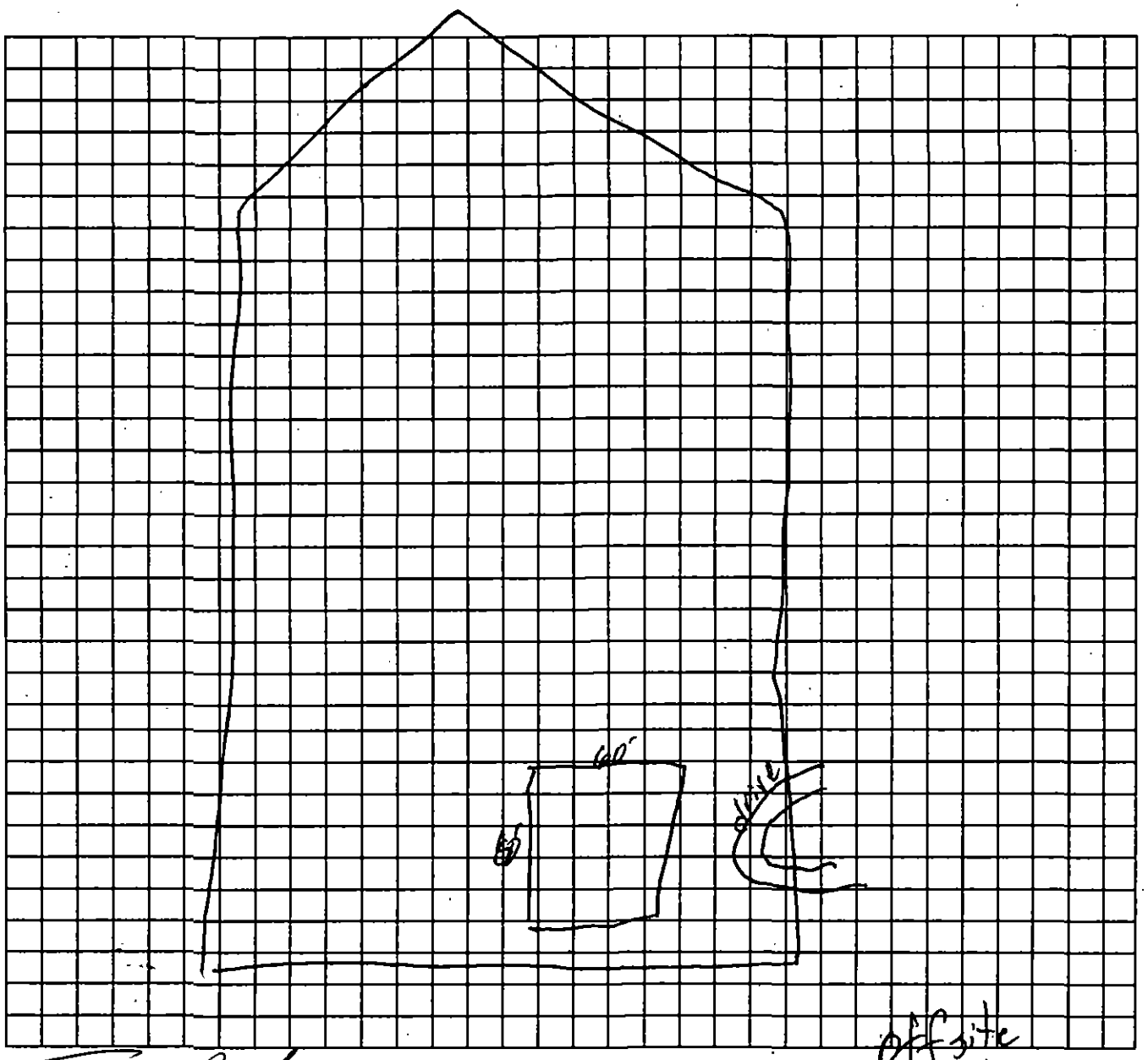
A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

Street Address: Thompson Rd

Tax Parcel #: 195-017-90

Subdivision Name: _____

Lot #: 4



offsite septic next to Thompson Rd

Property Owner's or Owner's Legal Representative Signature

7/20/12
Date

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

Revised on: 12/15/10

FOR REGISTRATION
J. David Granberry
REGISTER OF DEEDS
Mecklenburg County, NC
2013 JUN 17 12:22:31
BK:28434 PG:156-159
FEE:$26.00
INSTRUMENT # 2013093801
TAYLORD



STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

SEPTIC SYSTEM
EASEMENT AGREEMENT

This EASEMENT made this _____ day of _____, 20_____, by and between

GRANTOR	GRANTEE
Unlimited Possibilities Family Home Care, LLC	**Unlimited Possibilities Family Home Care, LLC** 7245 City View Drive Charlotte, NC 28212

Enter in appropriate block for each party: name, address, and, if appropriate, character or entity, e.g., corporation or partnership.

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee an easement as hereinafter described, to run with the land upon that certain lot or parcel of land owned by Grantor and located in the City of Charlotte, Mint Hill Township, Mecklenburg County, North Carolina, and more particularly described as follows:

Mecklenburg Tax Parcel No. 19501708 recorded In Map Book 54 Page 606

See the plat attached hereto as Exhibit B and the parcel shown thereon identified with Grantor's name for the legal description of Grantor's parcel and of the Septic System Easement Area located thereon, said parcel labeled threon and hereinafter referred to as the "Easement Parcel."

This instrument was prepared by: Mecklenburg County Land Use & Environmental Services Agency Groundwater & Wastewater Services

Mail after recording to: LandDesign 223 N. Graham St. Charlotte, NC 28202

Grantor hereby imposes said easement for the benefit of Grantee as the present owner and for the benefit of future owners of the following lot or parcel of land, situated in the City of Charlotte, Mint Hill Township, Mecklenburg County, North Carolina, and more particularly described as follows:

Mecklenburg Tax Parcel No. 19501733 recorded In Map Book 54 Page 606

See the plat attached hereto as Exhibit B and the parcel shown thereon identified with Grantee's name for the legal description of Grantee's parcel, said parcel labeled thereon and hereinafter referred to as the "Benefited Parcel."

Said Easement shall enable the Grantee to place, if, as and when needed, such need to be determined by the Grantee in his sole discretion, a septic tank and drain field or portions thereof, upon the Septic System Easement Area on the Easement Parcel and to inspect, maintain, repair and replace components of said septic system at any time and from time to time. If the Easement Area also includes a connector strip for ingress and egress, Grantee shall have the right to use said connector strip for access as needed. *This Easement may not be altered, amended or cancelled without the express written permission of the Mecklenburg County Health Department, which written permission must be part of any document recorded to alter, amend or cancel this Easement.* This Easement shall automatically expire, however, should Grantee ever hook up the structure located or to be located on the Benefited Parcel to a public or community sanitary sewage system but shall otherwise be perpetual.

Grantor acknowledges that the Septic Tank System Easement Area cannot be used and will not be used for any of the following activities or in any of the following ways:

- Grading or filling
- Parking or driving heavy equipment in the area or in any other way compacting the soil in the Area
- Excavating soil from the Area
- Placing footings or foundations or engaging in any other construction activity in the Area
- Placing in-ground or above-ground swimming pools in the Area
- Placing irrigation systems in the Area
- Placing underground utility lines or cables in the Area
- Planting trees or gardens in the Area
- Removing any large trees in the Area unless dead or diseased
- Using the Area for the burial of stumps, trash, or any other type of construction material
- Using the Area for gravesites
- Diverting the natural flow of water onto the Area by way of drainage ditches or diversion ditches or using the Area to receive water from any gutter or downspout discharges

IN WITNESS WHEREOF, the Grantor and Grantee have hereunto set their hands and seals, or if corporate, have caused this instrument to be signed in their corporate names by their duly authorized officers and their seals to be hereunto affixed by authority of their Boards of Directors, the day and year first above written.

GRANTOR

Unlimited Possibilities Family Homecare, LLC _____ (SEAL)
(Corporate Name)

BY: James H. Scruggs _____ (SEAL)
James H Scruggs President

ATTEST: _____ (SEAL)

Kevin D. Monds _____ (SEAL)
Kevin D. Monds Secretary (Corporate Seal)

MASON L GREESON
Notary Public, North Carolina
Mecklenburg County
My Commission Expires
March 06, 2016

SEAL-STAMP North Carolina, Mecklenburg County

I, Mason L. Greeson, a Notary Public of the County and State aforesaid, certify that James H. Scruggs, Grantor, personally appeared before me this day and acknowledged the execution of the foregoing instrument. WITNESS my hand and official stamp or seal, this 22 day of May, 2013.

My Commission Expires: March 6, 2016 Mason L Greeson
(Notary Public)

GRANTEE

Unlimited Possibilities Family Homecare, LLC _____ (SEAL)
(Corporate Name)

BY: James H. Scruggs _____ (SEAL)
James H Scruggs President

ATTEST: _____ (SEAL)

Kevin D. Monds _____ (SEAL)
Kevin D. Monds Secretary (Corporate Seal)

MASON L GREESON
Notary Public, North Carolina
Mecklenburg County
My Commission Expires
March 06, 2016

SEAL-STAMP North Carolina, Mecklenburg County

I, MASON L. GREESON, a Notary Public of the County and State aforesaid, certify that ~~Kevin D. Monds~~ NO James H. Scruggs. Grantee, personally appeared before me this day and acknowledged the execution of the foregoing instrument. WITNESS my hand and official stamp or seal, this 22 day of May, 2013.

My Commission Expires: March 6, 2016 Mason L Greeson
(Notary Public)

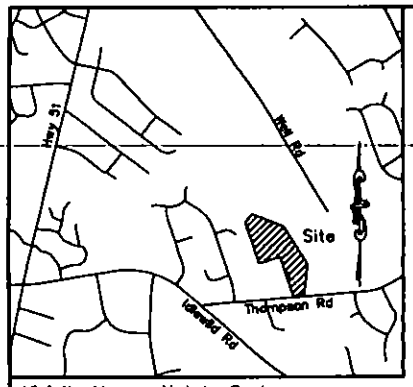
Approval by the Mecklenburg County Health Department does not certify or extend to matters of title. The purchaser of property subject to or affected by this easement is responsible for ascertaining all matters affecting the validity and enforceability of this instrument.

Exhibit B

I, Seth F. Martin, certify that this map was drawn under my supervision from an actual survey made under my supervision; that the boundaries not surveyed are indicated as drawn from information in Book See Map, page See Map; that the ratio of precision is 1:10,000+; and that this map meets the requirements of The Standards of Practice for Land Surveying in North Carolina (21 NCAC 56.1600).

This 13th day of June, 2013

NORTH CAROLINA PROFESSIONAL SEAL L-4719 LAND SURVEYOR SETH F. MARTIN

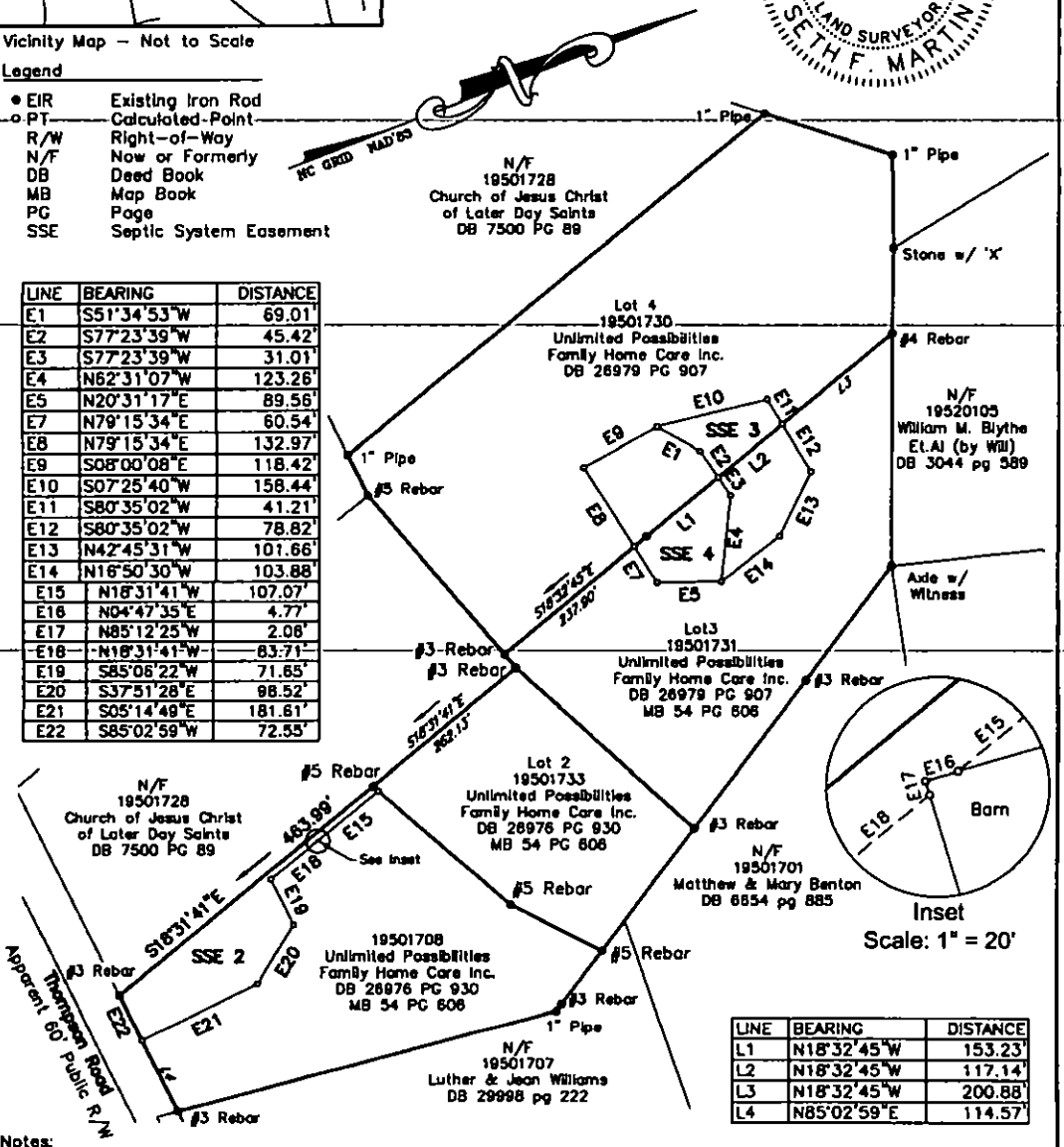


Vicinity Map – Not to Scale

Legend

● EIR	Existing Iron Rod
o PT	Calculated Point
R/W	Right-of-Way
N/F	Now or Formerly
DB	Deed Book
MB	Map Book
PG	Page
SSE	Septic System Easement

LINE	BEARING	DISTANCE
E1	S51°34'53"W	69.01'
E2	S77°23'39"W	45.42'
E3	S77°23'39"W	31.01'
E4	N62°31'07"W	123.26'
E5	N20°31'17"E	89.56'
E7	N79°15'34"E	60.54'
E8	N79°15'34"E	132.97'
E9	S08°00'08"E	118.42'
E10	S07°25'40"W	158.44'
E11	S80°35'02"W	41.21'
E12	S80°35'02"W	78.82'
E13	N42°45'31"W	101.66'
E14	N16°50'30"W	103.88'
E15	N18°31'41"W	107.07'
E16	N04°47'35"E	4.77'
E17	N85°12'25"W	2.08'
E18	N18°31'41"W	83.71'
E19	S85°06'22"W	71.65'
E20	S37°51'28"E	98.52'
E21	S05°14'49"E	181.61'
E22	S85°02'59"W	72.55'



LINE	BEARING	DISTANCE
L1	N18°32'45"W	153.23'
L2	N18°32'45"W	117.14'
L3	N18°32'45"W	200.88'
L4	N85°02'59"E	114.57'

Notes:
1. Tax Parcel ID – 19501708; 19501733; 19501731; 19501730
2. Bearing base is referenced to NC-NAD83-(2007) Grid derived by Real-Time Kinematic GPS observations using Trimble R8 Receivers and the NC VRS Network.
3. All distances are shown horizontal.
4. Total Area in Septic System Easement – SSE 2: ±0.624 Acres; SSE 3: ±0.555 Acres; SSE 4: ±0.676 Acres;

LDSI
Phone: (704) 337-8329
Fax: (704) 376-2448
508 West 5th St., Suite 125
Charlotte, NC 28202
License No.: C-1925

Septic System Easement Exhibit

14009 Thompson Road

Mecklenburg County, North Carolina

Current Owner: Unlimited Possibilities Family Home Care Inc.
Deed Reference: DB 26979 PG 907; MB 54 PG 606

200 100 0 200

Project #: 4112043 | Drawn By: JDB | Dated: April 10, 2013 | Revised: June 13, 2013

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Sheet: 1 of 3
Property ID: 19501730
Lot #:
File #: 8540B
AppID: 5709

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Unlimited Possibilities Inc
Applicant: Toney C Jacobs
Address: 5003 Tewkesbury Rd, Charlotte, NC 28269
Date Evaluated: 8/6/2012
Proposed Facility: Care Home Design Flow (.1949) 720 GPD
Property Size: 7ac
Location of Site: 13931 Thompson Road Mint Hill, NC 28277 (Building 1)
Property Recorded:
Water Supply: [X] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [X] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [X] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	b PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS	0-48	mmsbk C	ss sp fi sexp	>48	48	NA	PS	PS IV
	5%								0.3
2	LS	0-1	wfgr SCL	ss sp fr sexp	>48	48	NA	PS	PS IV
	5%	1-35	mmsbk C	ss sp fi sexp					0.3
		35-43	mfsbk C	ss sp fr sexp					
3	LS	0-2	wfgr SCL	ss sp fr sexp	>48	48	NA	PS	PS IV
	7%	2-48	mmsbk C	ss sp fi sexp					0.3
					Whites 39"+				
4	LS	0-2	wfgr SL	ss sp fr sexp	>46	46	NA	PS	PS IV
	8%	2-33	mmsbk C	ss sp fi sexp					0.3
		33-46	wfsbk C	ss sp fi sexp	2-33 Yel. and White mottles	AR at 46"			

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	IIIb	IIIb
Site LTAR	0.3	0.3

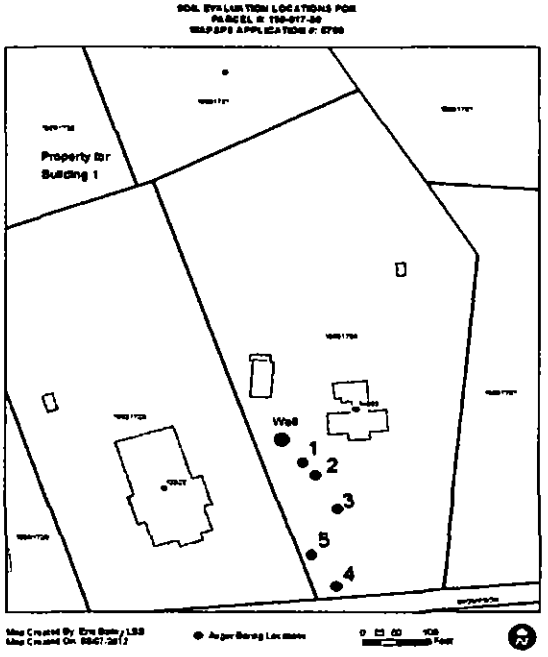
Other Factors (.1946):
Soil Evaluation By: Eric Bailey LSS
Others Present:
Site Classification (.1948):
Site Evaluation By: Jerry Mitchell REHS
Others Present:

COMMENTS:

Landscape Position	Group	Texture	.1955 LTAR	Structure
R-Ridge	I	S-Sand	1.2 - 0.8	SG-Single Grain
SS-Shoulder Slope		LS-Loamy Sand		M-Massive
LS-Linear Slope				CR-Crumb
FS-Foot Slope	II	SL-Sandy Loam	0.8 - 0.6	GR-Granular
NS-Nose Slope		L-Loam		SBK-Subangular Blocky
HS-Head Slope				ABK-Angular Blocky
CC-Concave Slope	III	Si-Silt	0.6 - 0.3	PL-Platy
CV-Convex Slope		SiCL-Silty Clay Loam		PR-Prismatic
T-Terrace		CL-Clay Loam		
FP-Flood Plain		SCL-Sandy Clay Loam		
D-Drainage Way		SiL- (Silt Loam)		
	IV	SC-Sandy Clay	0.4 - 0.1	
		SiC-Silty Clay		
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	NS-Non-Sticky	NEXP-(Non-expansive)
FR-Friable	SS-Slightly Sticky	SEXP-Slightly Expansive
FI-Firm	S-Sticky	EXP-Expansive
VFI-Very Firm	VS-Very Sticky	
EFI-Extremely Firm	NP-Non-Plastic	
	SP-Slightly Plastic	
	P-Plastic	
	VP-Very Plastic	

Sketch of Soil Evaluation Locations



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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30005709** GWS File #: **8540B** Tax Parcel #: **195-017-33**

- This IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be **NO** grading, filling, or disturbance of the soil in the area of the septic tank system or repair area.
- CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a Building Permit. The Construction Authorization is **NOT** transferable. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.
- Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

I. This Improvement Permit Shall: Expire in Five (5) Years **Expiration Date (If Applicable):** 7/2/2018

Type of Installation: Residential - New System Lot Number: 2

Structure Type: OTHER Size (ft^2): 4800 # Bedrooms: 6 # Occupants: 6

Building Foundation: Crawl Space Water Supply: Municipal

II. Initial System Type: Pump to Approved **System Classification:** IIIb

Initial System Specifications:

Design Flow (gpd):	720	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1800	Total Trench Length (ft):	600
Maximum Trench Depth (in):	34	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

III. Repair System Type: Pump to Approved **System Classification:** IIIb

Repair System Specifications:

Design Flow (gpd):	720	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	34	Trench Spacing (ft):	9	Absorption Area (ft^2):	1800	Total Trench Length (ft):	53
Maximum Trench Depth (in):	34	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

IV. Permit Conditions/Comments:

(Please See the Following Page for Permit Conditions.)

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment, and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until an INSTALLATION APPROVAL is granted by the Department.
- The septic system installer shall be a registered septic contractor with Mecklenburg County Health Department.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

DENR Authorized Agent: Jeremy Michael Owner/Legal Agent: Trevor C Jacks
Print Name

Signature: Jeremy Michael Signature: Trevor C Jacks

Date Issued: 7/2/2013

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30005709** GWS File #: **8540B**

IV. Permit Conditions/Comments:

- This type of septic system requires an inspection once every 5 years by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- Proper well abandonment is required prior to receiving an Installation Approval from our office to install the septic system.
- The septic system shall be installed in accordance with the plans submitted by the wastewater system design consultant.
- All components of the septic system must be installed in accordance with the required setbacks listed on the corresponding plot plan.
- All components of the septic system must be located at least 100 ft. (50 ft. minimum) from all private wells.
- All waterlines must be located a minimum of 10 ft. from any part of the septic system.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.
- Foundation drains shall be constructed not to discharge water onto or across any part of the septic system.
- The septic system shall be located at least 10 feet from any foundation drain.

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until an INSTALLATION APPROVAL is granted by the Department.
- The septic system installer shall be a registered septic contractor with Mecklenburg County Health Department.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

DENR Authorized Agent: Jeremy Michael

Signature: Jeremy Michael

Date Issued: 7/2/2013

Owner/Legal Agent: Print Name

Signature:

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Sheet: 1 of 3
Property ID: 19501730
Lot #:
File #: 8540B
AppID: 5709

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Unlimited Possibilities Inc
Applicant: Toney C Jacobs
Address: 5003 Tewkesbury Rd. Charlotte, NC 28269
Date Evaluated: 8/6/2012
Proposed Facility: Care Home
Design Flow (.1949) 720 GPD
Property Size: 7ac
Location of Site: 13931 Thompson Road Mint Hill, NC 28277 (Building 1)
Property Recorded:
Water Supply: [X] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [X] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [X] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	b PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS	0-48	mmsbk C	ss sp fi sexp	>48	48	NA	PS	PS IV
	5%								0.3
2	LS	0-1	wfgr SCL	ss sp fr sexp	>48	48	NA	PS	PS IV
	5%	1-35	mmsbk C	ss sp fi sexp					0.3
		35-43	mfsbk C	ss sp fr sexp					
3	LS	0-2	wfgr SCL	ss sp fr sexp	>48	48	NA	PS	PS IV
	7%	2-48	mmsbk C	ss sp fi sexp					0.3
					Whites 39"+				
4	LS	0-2	wfgr SL	ss sp fr sexp	>46	46	NA	PS	PS IV
	8%	2-33	mmsbk C	ss sp fi sexp					0.3
		33-46	wfsbk C	ss sp fi sexp	2-33 Yel. and White mottles	AR at 46"			

Description	Initial System	Repair System
Available Space (.1945)		
System Type(s)		
Site LTAR	0.3	0.3

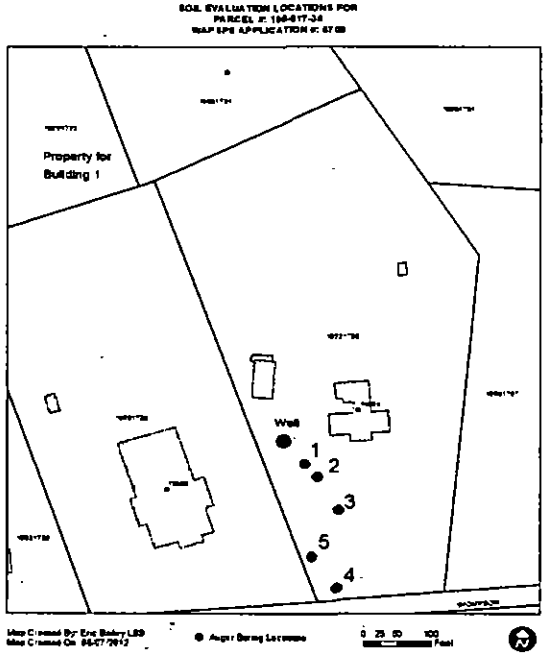
Other Factors (.1946):
Soil Evaluation By: Eric Bailey LSS Eric Bailey
Others Present:
Site Classification (.1948):
Site Evaluation By:
Others Present:

COMMENTS:

Landscape Position	Group	Texture	.1955 LTAR	Structure
R-Ridge	I	S-Sand	1.2 - 0.8	SG-Single Grain
SS-Shoulder Slope		LS-Loamy Sand		M-Massive
LS-Linear Slope				CR-Crumb
FS-Foot Slope	II	SL-Sandy Loam	0.8 - 0.6	GR-Granular
NS-Nose Slope		L-Loam		SBK-Subangular Blocky
HS-Head Slope				ABK-Angular Blocky
CC-Concave Slope	III	Si-Silt	0.6 - 0.3	PL-Platy
CV-Convex Slope		SiCL-Silty Clay Loam		PR-Prismatic
T-Terrace				
FP-Flood Plain		CL-Clay Loam		
D-Drainage Way		SCL-Sandy Clay Loam		
		SiL- (Silt Loam)		
	IV	SC-Sandy Clay	0.4 - 0.1	
		SiC-Silty Clay		
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	NS-Non-Sticky	NEXP-(Non-expansive)
FR-Friable	SS-Slightly Sticky	SEXP-Slightly Expansive
FI-Firm	S-Sticky	EXP-Expansive
VFI-Very Firm	VS-Very Sticky	
EFI-Extremely Firm	NP-Non-Plastic	
	SP-Slightly Plastic	
	P-Plastic	
	VP-Very Plastic	

Sketch of Soil Evaluation Locations



Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Sheet: 3 of 3
File #: 8540B

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
CONTINUED

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 :1941 Structure/ Texture	SOIL MORPHOLOGY .1941 .1941 Consistence Mineralogy	OTHER PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
5	LS	0-1	wfgr SL	ns np fr nexp	>48	48	NA	PS	PS IV
	7%	1-48	mmsbk C	ss sp fi sexp					0.3

RESIDENTIAL LOW PRESSURE MANIFOLD DISTRIBUTION
TO REMOTE DRAINFIELD WITH APPROVED 25% REDUCTION SEPTIC SYSTEM
FOR
SUBSURFACE WASTEWATER DISPOSAL
14015 Thompson Road – **Lot 2**
Mint Hill, North Carolina

MCHD FILE # 8540B - Tax #195-017-33

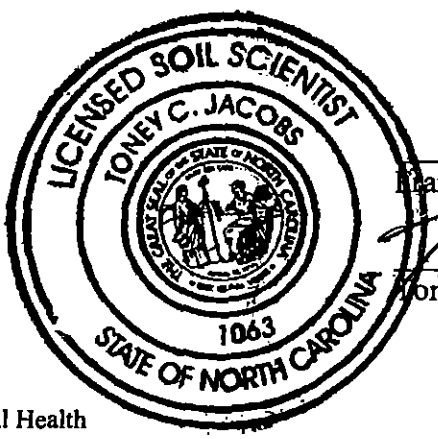
Prepared for:
Unlimited Possibilities Family Care Home
James H. Scruggs, Adm., President
5003 Tewkesbury Road
Charlotte, North Carolina 28269
james@upfamilycarehome.com
704-453-6753

Prepared by:
Jacobs On-Site Development, Inc.
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Mooresville, North Carolina 28117
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office 704-662-9845
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August 15, 2012
Revised: February 21, 2013





Frank McMahan, PE

Toney C. Jacobs, LSS

Copy to: Philo Walker, REHS
Jacob Presley, REHS, LSS
Mecklenburg County Environmental Health
700 N. Tryon Street
Charlotte, NC 28202

RESIDENTIAL LOW PRESSURE MANIFOLD DISTRIBUTION TO REMOTE DRAINFIELD WITH APPROVED 25% REDUCTION SEPTIC SYSTEM FOR SUBSURFACE WASTEWATER DISPOSAL

14015 Thompson Road – **Lot 2**
Mint Hill, North Carolina

MCHD FILE # 8540B - Tax #195-017-33

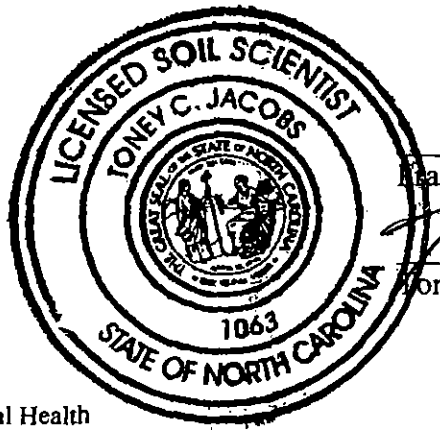
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cc: Philo Walker, REHS
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Charlotte, NC 28202

BACKGROUND

This tract was reconfigured from an acreage parcel into 4 lots in 2008. At the request of Mint Hill it was reconfigured again in December 2012. Easements for septic areas were located by Land Design Surveying and all are surveyed, drawn, and recorded as required. Lot 2 has limited suitable soil making on-site impossible. The entire parcel was purchased by Unlimited Possibilities (UP) for use as a free standing 6 bedroom unit to care for dementia residents. State charter only allows for a maximum of 6 residents per unit. Three care providers work in 8 hour shifts and are not housed at the facility. Since there is no request for flow reduction on the 6 bedroom-6 resident facility, no added flow is included in the design for the caregivers. A copy of this restriction is provided. The caregivers and residents function very much as a family. Should this facility ever become a traditional residential home, the design and installation are covered for the 6-bedroom structure. The lot will get water from CMUD or a new well. The existing well will be properly permitted and abandoned. The soil was evaluated to a depth of 48 inches and found to have usable soil, not saprolite. Soils were evaluated and described by Eric Bailey with MCHD and Toney Jacobs, LSS. Both sets of soil descriptions are available. The LTAR of the soil described was 0.3 gpd/ft^2. The system was located to utilize the best soil and topo on the off-site area. Pump was used to overcome gravity and add to system performance by giving better distribution and a dose/rest cycle between pump cycles.

The proposed system will be a Type III(b). In accordance to this plan and the new draft rules for remote drainfields a certified operator is required.

Appendix 1 - site plan drawn over the utility plan
Appendix 2 - easement exhibit map
Appendix 3 - statute concerning resident capacity

APPLICATION INFORMATION

1. Prepared for:

Owner:	James Scruggs, Adm., President Unlimited Possibilities Family Care home 5003 Tewkesbury Road Charlotte, North Carolina 28269
Soil Scientist and Designer:	Toney C. Jacobs, LSS Jacobs On-Site Development, Inc. 168 Broadbill Drive Mooresville, NC 28117
Engineer and Designer:	Dale Stewart, PE LandDesign 223 N. Graham St. Charlotte, NC 28202

2. Water supply is provided by CMUD or on-site well depending on availability when needed.
3. Facility to be served by the proposed system is a 6-bedroom single family residence.

LOCATION

The property is located at 14015 Thompson Road which is approximately ¼ mile east of Idlewild Road.

REFERENCES

1. Law and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A, Section 1900, Department of Environment Health and Natural Resources, August 1, 1998.
2. Berkowitz, S., Pressure Manifold Design for Ground Absorption Sewage System. Feb, 1986.

CONSTRUCTION NOTES

The areas for both the initial and repair systems are fenced off and should need no additional protection. This should preserve this valuable asset during home construction. Should questions arise about this report, ask!

PLANS AND SPECIFICATIONS FOR SPECIFIC SYSTEM COMPONENTS

Septic Tank

1. The 2000 gallon State approved septic tank receives wastewater directly from the house.
2. A septic tank shall be watertight, structurally sound, and not subject to excessive corrosion or decay.
3. The septic tank must be of two-compartment design for maximum solids retention. The inlet compartment of two-compartment tank shall hold between two-thirds and three-fourths of the total tank capacity.
4. Effluent from the two-compartment septic tank flows by gravity through a State approved effluent filter and a four-inch solid PVC pipe to the pumping tank.
5. Both the septic tank and pumping tank must be provided with above ground approved manhole risers to provide easy access for clean-out and pump service.
6. When prefabricated concrete tanks or tanks of other material are used, they shall be constructed in accordance with the plans which have been approved by the State and shall comply with all requirements of Section .1953 of 15A NCAC 18A.
7. On the outlet tee of the septic tank an effluent filter must be installed. This filter should be equivalent to a Zabel Model A1800 or other State approved unit supplied by the tank manufacturer.

Pumping Tank

1. The 1500 gallon State approved pumping tank shall have an access manhole extending at least 6 inches above finished grade.
2. A septic tank effluent pump that will not be corroded by sewage shall be used in the pumping tank.
3. The pump must be placed on two concrete blocks set next to each other on the bottom of the tank. This prevents the pumping of any solid particles that can clog the system.

4. 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.
5. The lower level control or "pump-off" must be positioned above the pump, so that the pump remains submerged at all time.
6. The pump outlet pipe should be connected to the supply manifold with a threaded PVC union to allow quick removal.
7. Pump and Simplex control circuits shall be provided with manual circuit disconnects within a watertight, corrosion-resistant, outside enclosure (NEMA 4X or equivalent) adjacent to the pump tank, securely mounted at least 12 inches above finished grade. Pump control (Simplex) may be mounted on side of house if long cord pump is used. The pump shall be manually operable without requiring the use of special tools or entrance into the tank for testing purposes. Conductors shall be conveyed to the disconnect enclosure through water proof, gas proof, and corrosion-resistant conduits, with no splices or junction boxes provided inside the tank. Wire grips, duct seal or other suitable material shall be used to seal around wire and wire conduit openings inside the pump tank and disconnect enclosure. There shall be two electric circuits for controls: one for pump power, one for the alarm. These will require 2 circuit breakers.
8. The pump tank shall have a properly functioning high-water alarm. The alarm circuit shall be supplied ahead of any pump overload and short circuit protective devices. It should be on a separate electrical circuit from the pump power line. The alarm shall be audible and visible by system users and included in the pump and control enclosure (Simplex Panel). The alarm is activated if the water level in the pump tank rises above the "pump-on" float control. The tank provides at least one day or more of excess storage capacity (depending on water use in the home) during which time the system must be repaired.
9. Float switch for the high water alarm shall be set no more than 3 inches above the high water level of pump cycle.
10. Float switch tie downs to be made of corrosion resistant material, no tape or metal hose clamps. For maintenance flexibility, tree must be used to set floats.
11. Approved pressure bell may be used with compatible panel 8, 9, 10 above.
12. Watertight testing per .1900 rules shall be required on two piece pump tanks.
13. Wiring between the pumping tank and the house should meet State and local code requirements.

Pipe and Fittings

1. All pipes and fitting should be made of SCH 40 PVC.
2. All joints must be sealed with appropriate PVC-solvent cement.
3. There should be a threaded PVC union above the pump to allow easy removal or replacement.
4. A gate valve for final pressure adjustment is installed in the supply line inside the manifold box.
5. Approved manifold and valve box, either constructed or commercially purchased. Reference upon request.

CONSTRUCTION INSTALLATION

Site Preparation

1. One of the most important concerns for an on-site system is to protect the site from soil disturbance. No leveling should be required. There are no trees to be removed. Because the site is on a lineal slope, no special drainage needs are required.
2. The absorption field area has been designed. It should be protected from construction traffic by the existing fence.
3. The site is clear and the vegetation will not have to be removed. No additional site disturbance should be necessary.

Tank Installation

1. The two-compartment septic tank is installed.
2. The pumping tank is installed next to the septic tank.
3. The tanks are connected with an appropriate length of solid, four-inch PVC pipe.

Supply Manifold

1. The supply manifold conveys effluent from the pump to the distribution laterals.
2. Design of the manifold is shown on attached diagrams.
3. After the supply manifold has been placed in its trench and lateral lines connected, it should be backfilled with tightly tamped soil. The supply manifold trench must not be backfilled with gravel, or the trench may become a conduit for downslope flow effluent from the laterals.

25% Reduction Laterals

1. Install per cited reference material and this plan.
2. Trenches shall be 36" wide equivalent, and 9' minimum on center. Trenches shall be "level" from end to end. Observation port 30' from end of each line.

PROPER OPERATION CHECK AND PRESSURE HEAD ADJUSTMENT

1. After all connections have been installed and connected, the system should be checked for proper operation. With electrical power turned off, fill the pump tank with a garden hose until the liquid rises to the level of the high-water alarm float.
2. Turn on the electrical power. The alarm light should go off when the liquid level falls below the high-water float. The pump should turn off when the liquid reaches the lowest float control. Be sure the pump is still completely submerged.
3. The pressure head is measured as the height liquid will rise above the manifold.

FINAL LANDSCAPING

1. After the system is installed, the following should be checked to ensure that the system will not be overloaded with excess rainwater and runoff. The distribution field is shaped to shed rainwater and is free of low areas.
2. Finally, the entire area should be replanted with grass in order to prevent erosion. The soil should be properly tilled, limed (if necessary) and fertilized before planting. After applying an appropriate grass seed, the area should be heavily mulched with straw or other suitable material.

QUALITY ASSURANCE REQUIREMENTS

The system must be installed by a qualified and competent contractor. Critical stages of the installation which should be checked are:

1. System layout to get a consistent slope on the landscape.
2. Septic and pump tank installation prior to backfilling.
3. Manifold and lateral installation prior to backfilling.
4. Final landscaping, operation and pressure head check.

The system design is based on a maximum waste flow of 720 gallons per day. Special attention should be given to the section titled Caregiver (staff) Suggestions for ways to minimize the burden on the system.

OPERATION AND MAINTENANCE PROCEDURE

The system is classified as Type III(b) and because of the remote drainfield does require a maintenance contract with a certified operator.

- Septic system shall be pumped every 4 years or when solids accumulate to 1/3 the volume of the tank.
- At 6-month intervals, inspect the effluent filter. When washing the filter, debris must be sprayed directly back into the septic tank and not onto the lawn.
- Pressure head for manifold should be checked and adjusted after installation and semi-annually thereafter.
- All piping and fittings shall be checked annually for damage and/or proper operation and corrections made immediately.
- The property should be inspected to insure all surface water is diverted away from the fields and tank. Any ponding of surface water should be corrected.
- Grasses shall be mowed and maintained and any erosion shall be corrected promptly.
- The nitrification field area shall be checked for leakages, blowouts or malfunction, indications of damp or mushy areas compared to surrounding area or evidence of noticeable odor of sewage. Repairs shall be made immediately.
- The pump electrical should be checked to insure tight, clean connections with no corrosion and proper operation.
- Pump switches shall be checked for free operation and proper level set.

- Pump draw down depth and delivery rate shall be checked each year.
- Check septic tank and pump tank for evidence of damage or leakage. Check the quality of effluent including grease and sludge accumulation.

CAREGIVER (STAFF) SUGGESTIONS

All staff should be reminded frequently that these homes are on septic systems. Then the following should be reviewed with any personnel change or no less than quarterly.

Most systems do not require much effort to operate and maintain. Even though the effort is small, the system must be maintained properly so that it operates reliably and at a minimum cost. Following are suggestions for the homeowner to minimize the burden on the septic system.

1. Garbage disposals should not be used in on-site systems. The ground garbage adds large amounts of solids to a septic tank, causing sludge to build up at a quicker rate than without. If disposal is installed, use should be limited.
2. Grease, cooking oils and coffee grounds should never be put into a septic tank.
3. Items such as disposable diapers, cigarettes, facial tissues and other solid or paper wastes should not be flushed into the on-site system.
4. Used motor oil and other such oily liquids should not be put into a septic tank.
5. Using less water can reduce the amount of water flowing to the treatment and disposal field.
6. Water-saving fixtures and devices can be installed on sinks, toilets and showers to reduce the rate at which the water flows from the fixture.
7. Dishwashers and washing machines should only be run with full loads.
8. Leaky faucets and toilets can add large volumes of water to the daily flow of water into the on-site system. Repair the leaks to save water and give the treatment and disposal field a rest. Report any water leaks or toilets with hang-ups to the owner immediately!

FINAL INSPECTION

As of January 2013 the Mecklenburg County Health Department has instituted a new policy which requires the following: *Upon completion of the project the system designer shall provide Groundwater and Wastewater Services with a letter certifying that the system was installed in accordance with the approved design. If these designs were required to be stamped by a Registered Professional Engineer then the completion letter also needs to be stamped by the Registered Profession Engineer. The Hold will not be released for the project until this letter is received.*

This inspection should be scheduled **3 days before the planned installation completion**. Time incurred on this on-site inspection will be billed to the owner or builder at prevailing rate.

DESIGN SPECIFICATIONS

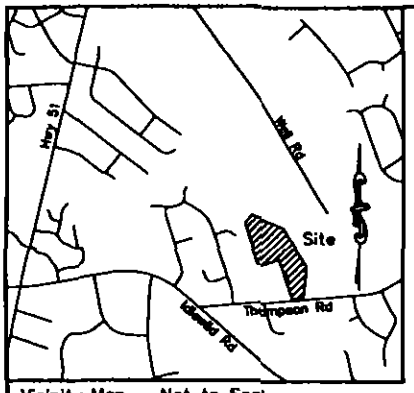
14015 Thompson Road – Lot 2

file #8540B

Daily design flow:	720 gpd. (6 bedroom)
Septic tank size:	2000 gal. (2 compartments)
Pumping tank size:	1500 gal.
Effluent loading rate, Initial system	0.3 gpd/ft^2
Effluent loading rate, Repair system	0.3 gpd/ft^2
Total length and diameter of supply pipe:	approx. 620 ft. 2" SCH 40 PVC
Number and length of laterals:	3 @200' end-fed with total of 600'
Flow rate through the system:	21.3 gpm- from three (3) ½" SCH40 taps from a 4" manifold
Elevation head:	Approx. 30' (to be verified by installer)
Pressure head:	2.0'
Friction head:	9.6'
20% contingency	8.3'
Total head:	49.9'
Pump requirements:	21.3 gpm at 49.9' of head; use Gould WEO 7L pump or equivalent with compatible electrical
Velocity:	> 2ft/second
Dosing volume:	360 gal. – 2.0 doses/day at design flow
Depth of water pumped per dose:	calculated to specific tank by measure or dealer engineering specifications (1 cubic ft. of water equals 7.48 gal.)
Pump run per dose:	approx. 16.9 min
Check valve:	yes
Siphon break hole:	no

Appendix 2

Exhibit B



Vicinity Map – Not to Scale

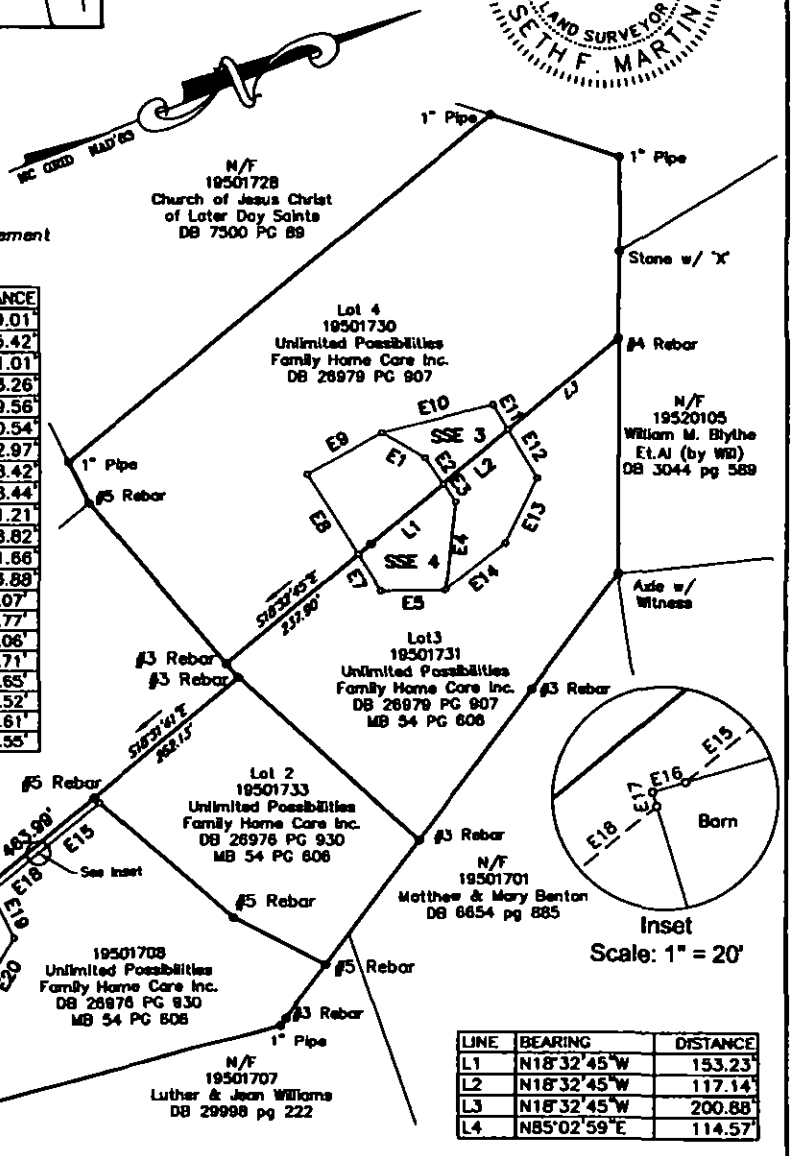
I, Seth F. Martin, certify that this map was drawn under my supervision from an actual survey made under my supervision; that the boundaries not surveyed are indicated as drawn from information in Book See Map, page See Map; that the ratio of precision is 1:10,000+; and that this map meets the requirements of The Standards of Practice for Land Surveying in North Carolina (21 NCAC 56.1600).

This 13th day of June, 2013

NORTH CAROLINA PROFESSIONAL SEAL L-4719 LAND SURVEYOR SETH F. MARTIN

Legend

• EIR	Existing Iron Rod
o PT	Calculated Point
R/W	Right-of-Way
N/F	Now or Formerly
DB	Deed Book
MB	Map Book
PG	Page
SSE	Septic System Easement



LINE	BEARING	DISTANCE
E1	S51°34'53"W	69.01'
E2	S77°23'39"W	45.42'
E3	S77°23'39"W	31.01'
E4	N62°31'07"W	123.26'
E5	N20°31'17"E	89.56'
E7	N79°15'34"E	60.54'
E8	N79°15'34"E	132.97'
E9	S08°00'08"E	118.42'
E10	S07°25'40"W	158.44'
E11	S80°35'02"W	41.21'
E12	S80°35'02"W	78.82'
E13	N42°45'31"W	101.66'
E14	N16°50'30"W	103.88'
E15	N18°31'41"W	107.07'
E16	N04°47'35"E	4.77'
E17	N85°12'25"W	2.06'
E18	N18°31'41"W	83.71'
E19	S85°08'22"W	71.65'
E20	S37°51'28"E	98.52'
E21	S05°14'49"E	181.61'
E22	S85°02'59"W	72.55'

LINE	BEARING	DISTANCE
L1	N18°32'45"W	153.23'
L2	N18°32'45"W	117.14'
L3	N18°32'45"W	200.88'
L4	N85°02'59"E	114.57'

Notes:
1. Tax Parcel ID – 19501708; 19501733; 19501731; 19501730
2. Bearing base is referenced to NC NAD83 (2007) Grid derived by Real Time Kinematic GPS observations using Trimble R8 Receivers and the NC VRS Network.
3. All distances are shown horizontal.
4. Total Area in Septic System Easement – SSE 2: ±0.624 Acres; SSE 3: ±0.555 Acres; SSE 4: ±0.676 Acres;

LDSI
Phone: (704) 337-8329
Fax: (704) 376-2448
508 West 5th St., Suite 125
Charlotte, NC 28202
License No.: C-1925

Septic System Easement Exhibit

14009 Thompson Road

Mecklenburg County, North Carolina

Current Owner: Unlimited Possibilities Family Home Care Inc.
Deed Reference: DB 26979 PG 907; MB 54 PG 606

200 100 0 200

Project #: 4112043 | Drawn By: JDB | Dated: April 10, 2013 | Revised: June 13, 2013

Gmail

Toney Jacobs <toneycjacobs@gmail.com>

Rules for family care homes capacity

1 message

James Scruggs <james@upfamilycarehome.com> Tue, Aug 21, 2012 at 7:30 PM

To: toneycjacobs@gmail.com

10A NCAC 13G .0206 CAPACITY

(a) Pursuant to G.S. 131D-2(a)(5), family care homes have a capacity of two to six residents.

(b) The total number of residents shall not exceed the number shown on the license.

(c) A request for an increase in capacity by adding rooms, remodeling or without any building modifications shall be made to the county department of social services and submitted to the Division of Health Service Regulation, accompanied by two copies of blueprints or floor plans. One plan showing the existing building with the current use of rooms and the second plan indicating the addition, remodeling or change in use of spaces showing the use of each room. If new construction, plans shall show how the addition will be tied into the existing building and all proposed changes in the structure.

(d) When licensed homes increase their designed capacity by the addition to or remodeling of the existing physical plant, the entire home shall meet all current fire safety regulations.

(e) The licensee or the licensee's designee shall notify the Division of Health Service Regulation if the overall evacuation capability of the residents changes from the evacuation capability listed on the homes license or of the addition of any non-resident that will be residing within the home. This information shall be submitted through the county department of social services and forwarded to the Construction Section of the Division of Health Service Regulation for review of any possible changes that may be required to the building.

James H. Scruggs

President/Owner

Unlimited Possibilities Family Care Home

Tel: (704) 249-7718

Web: www.upfamilycarehome.com

Email: james@upfamilycarehome.com