

13015 NINEBARK TL

19937150

1/8/2008

duponbj

Groundwater and Wastewater Services File Imaging Project

May 2007

Barcode Font = IDAutomationHC39M

CONDITIONS OF IMPROVEMENT PERMIT

Permit Number: **5419B**

Tax Number: **199-521-01**

- The IMPROVEMNET 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.

Basement: ☒ Yes ☐ No ☐ Partial Basement

Primary Wastewater System

Type: ☐ I ☐ II ☒ III ☐ IV ☐ V ☐ VI

☐ Conventional
☐ Prefabricated, permeable block panel system
☐ Shallow Placed Conventional
☐ Low Pressure Pipe
☐ Large Diameter Pipe
☐ Fill
☐ Other
☒ Innovative or Experimental:

0.3 Long-term acceptance rate (GPD/ft^2)	**600** Max gallons/day wastewater flow	**1500** Absorption Area (ft^2)	**9** Trench spacing (min. on centers) (ft)
Serviced by private well: ☐ Yes ☒ No	**1500** Gallon septic tank	**500** Total trench length (ft)	**24** Maximum trench depth (in) (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions.)
5 Bedrooms in residence	**na** Gallon pump tank	**24** Depth of stone (in)	

Any surface water present: **No** Type: Minimum separation distance (ft):

Additional conditions: **Install according to plans on file submitted by Toney Jacobs and associates.**

Repair Area System

Type: ☐ I ☐ II ☒ III ☐ IV ☐ V ☐ VI

☐ Conventional
☐ Prefabricated, permeable block panel system
☐ Shallow Placed Conventional
☐ Low Pressure Pipe
☐ Large Diameter Pipe
☐ Fill
☐ Other
☒ Innovative or Experimental:

1500 Absorption Area (ft^2) **500** Total trench length (ft)	**na** Depth of stone (in)	**9** Trench spacing (min. on centers) (ft)	**24** Maximum trench depth (in)

The undersigned, an authorized agent of the MECKLENBURG COUNTY HELTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. The approval is granted in accordance with the provisions of Laws and Rules For Sewage, 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 Improvement permit is transferable.

R.S. 8/10/04

DENR Authorized Agent Date

Owner/Agent Signature Date

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR.
SUITE 211
700 N. TRYON ST.
CHARLOTTE, NC 28202
(704) 336-5103

NORTH CAROLINA DEPARTMENT OF
ENVIRONMENTAL, HEALTH, AND
NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

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

Sheet: 1
Property ID: PO 199-521-01
Lot #: 7
File #: 5419B
Code: 1

ACS

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: The Sanctuary at Lake Wylie
Applicant: Toney Jacobs
Address: 10933 Ballantyne Crossing Ave., Charlotte, N. C. 28277
Date Evaluated: 11/20/2003
Proposed Facility: Residence
Design Flow (.1949): 840gpd
Property Size:
Location of Site: Ninebark Trail
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	OTHER PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS, 8	0-4	GR/CL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48	N/A	NONE	PS, IV .3GPD/FT^2
		4-48	SBK/ABK/C	FI/SEXP/S/P					
2	"	0-5	GR/CL	FR/SEXP/SS/SP	"	"	"	"	"
		5-48	SBK/ABK/C	FI/SEXP/SS/SP					
3	"	0-4	GR/CL	FR/SEXP/SS/SP	>50" TO SOIL WETNESS	50	"	"	"
		4-50	SBK/ABK/C	FI/SEXP/S/P					
4	"	0-3	GR/CL	FR/SEXP/SS/SP	>49" TO SOIL WETNESS	49	"	"	"
		3-49	SBK/C	FI/SEXP/S/P					

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR	.3GPD/FT^2	.3GPD/FT^2

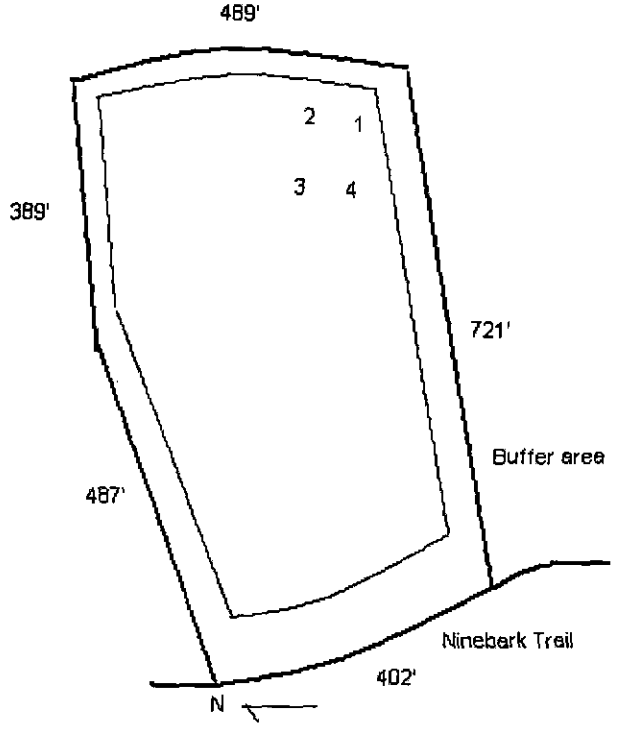
Other Factors (.1946): _____
Site Classification (.1948): PROVISIONALLY SUITABLE
Evaluated By: W. R. Marlin, LSS, 11/21/2003, W. R. Marlin
Others Present:

FILE # 5419B

COMMENTS: 100% repair

LANDSCAPE POSITIONS	GROUP	TEXTURES	.1955 LTAR	CONSISTENCE MOIST	WET
R-RIDGE	I	S-SAND	1.2 - 0.8		
S-SHOULDER SLOPE		LS-LOAMY SAND		VFR-VERY FRIABLE	NS-NON-STICKY
L-LINEAR SLOPE				FR-FRIABLE	SS-SLIGHTLY STICKY
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8 – 0.6	FI-FIRM	S-STICKY
N-NOSE SLOPE		L-LOAM		VFI-VERY FIRM	VS-VERY STICKY
H-HEAD SLOPE				EFI-EXTREMELY FIRM	NP-NON-PLASTIC
CC-CONCLAVE SLOPE	III	SI-SILT-	0.6 – 0.3		SP-SLIGHTLY STICKY
CV-CONVEX SLOPE		SIL-SILT LOAM			P-PLASTIC
T-TERRACE		CL-CLAY LOAM			VP-VERY PLASTIC
FP-FLOOD PLAN		SCL-SANDY CLAY LOAM			
		SICL-SILTY CLAY LOAM			
	IV	SIC-SILTY CLAY	0.4 – 0.1		
		C-CLAY			
		SC-SANDY CLAY			

STRUCTURE	MINERALOGY
SG-SINGLE GRAIN	SLIGHTLY EXPANSIVE
M-MASSIVE	
CR-CRUMB	EXPANSIVE
GR-GRANULAR	
SBK-SUBANGULAR BLOCKY	
ABK-ANGULAR BLOCKY	
PL-PLATY	
PR-PRISMATIC	



FEE: _____ **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: _____ **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: 4/26/04 PERMIT NO: 54198
PARCEL NO: 199-521-01

JOB LOCATION ADDRESS: THE SANCTUARY @ LAKE WYLIE
PROPERTY OWNER: THE SANCTUARY @ LAKE WYLIE LOT #7
BUILDING CONTRACTOR: _____
SUBDIVISION NAME: THE SANCTUARY @ LAKE WYLIE
AUTHORIZATION ISSUED BY: PAUL L. CORNELIUS DATE: 4/26/04
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 54198, AND THE ATTACHED SITE PLAN WITH SYSTEM DETAILS. CONSTRUCTION AND INSTALLATION MUST ALSO MEET ALL REQUIREMENTS SET FORTH IN THE RULES GOVERNING SANITARY SEWAGE COLLECTION, TREATMENT, AND DISPOSAL AND ANY OTHER APPLICABLE RULES AND LAWS.

2. AN INSTALLATION, CONSTRUCTION, ALTERATION AND/OR REPAIR APPROVAL MUST BE SECURED **PRIOR** TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH MECKLENBURG COUNTY HEALTH DEPARTMENT.

3. ANY ALTERATION IN SITE OR SOIL CONDITIONS (INCLUDING LOCATION OF STRUCTURES AND APPURTENANCES) OR MODIFICATION IN USE, DESIGN WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS AS SPECIFIED IN THE ASSOCIATED IMPROVEMENT PERMIT AND APPLICATION, MAY SUBJECT THIS AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: INSTALL ACCORDING TO PLANS SUBMITTED BY TONEY JACOBS & ASSOCIATES.

OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITIONS OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

Tony C. Jacobs

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE

4/27/04

DATE

TONEY C. JACOBS & ASSOCIATES, INC.

Consulting Soil Scientists
Licensed by the North Carolina Board for Licensing of Soil Scientists
Certified by the American Registry of Certified Professionals in Agronomy, Crops and Soils

168 Broadbill Drive
Mooresville, NC 28117
Phone (704) 663-6905
Fax (704) 662-9845 E-mail jacobs@i-america.net

April 15, 2004

To: Mr. David Cornelius, R.S.
Mecklenburg County Env. Health Dept.

From : Samuel A. Rollans, L.S.S.
Toney C. Jacobs & Associates, Inc.

RE: Request for an Improvement Permit for Lot 7 at The Sanctuary:
MCHD file # 5419B

Crescent Resources is requesting an Improvement Permit for lot 7 at The Sanctuary Subdivision for a 5 bedroom, basement home. Mr. Bill Marlin of the MCHD evaluated the soils on 11-20-03 and determined the primary and repair areas are PS at a 0.30 gpd/ft^2 LTAR. Toney C. Jacobs and Associates, Inc. has flagged a 5 bedroom 25% reduction septic system and 25% reduction repair system on the lot, as shown on the attached sketch.

We understand a building permit cannot be issued until your office issues an Authorization to Construct (ATC). The buyer of the lot will apply for the ATC. If the buyer's house pad does not fit in the "building envelope" shown on the Improvement Permit, we understand the proposed system may have to be modified prior to your office issuing the ATC.

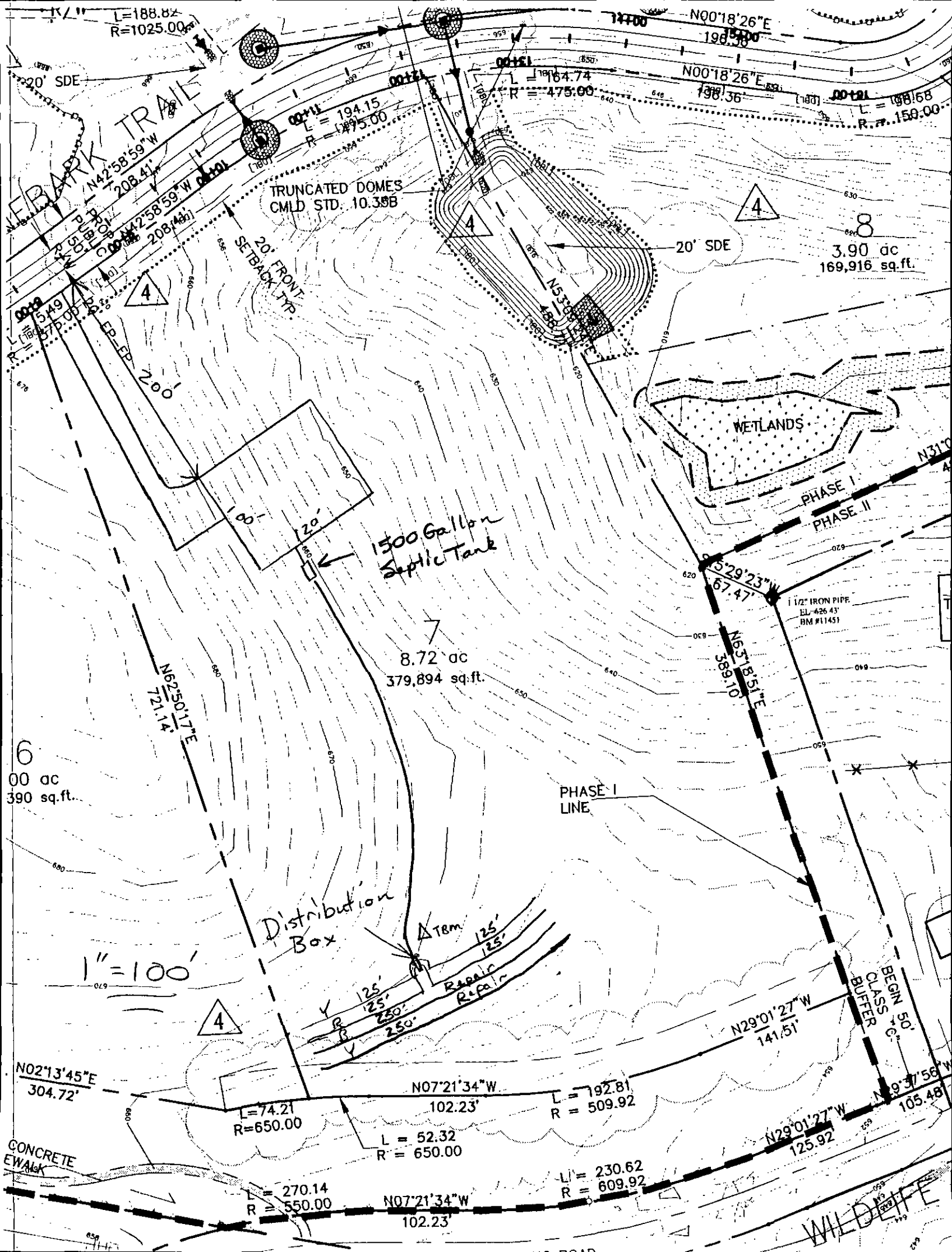
Tri-County Wastewater (TCWW) is under contract to supply maintenance services for each septic system installed at The Sanctuary. TCWW will have a list of preferred septic contractors for the subdivision and will also have requirements for the installation of the septic systems that are greater that the state requirements. It will be the responsibility of TCWW to enforce any requirements above state requirements or the conditions on the Improvement Permit or ATC.

Please review the attached system sketch and design specifications for the Improvement Permit for Lot 7. Please call if you have and questions, comments, or corrections.

Design Specifications for Lot 7 at

The Sanctuary, MCHD File # 5419B

System Type:	primary: repair:	gravity , 25% reduction gravity, 25% reduction
Daily design flow:		600 gpd.
Septic tank size:		1500 gal. (2 compartments)
Pumping tank size:		N/A
Effluent loading rate:		0.30 gpd/ft^2 for primary and repair
Total length and diameter of supply pipe:		N/A
Number and length of laterals:		4@ 125 ft. 25% reduction primary
Flow rate through the system:		N/A
Pump requirements:		N/A
Dosing volume:		on demand
Depth of water pumped per dose:		N/A
Check valve:		N/A
Siphon break hole:		N/A
Distribution device		Distribution Box


L=188.82
R=1025.00
20' SDE
N00°18'26"E
198.36'
L = 164.74
R = 475.00
N00°18'26"E
198.36'
L = 98.68
R = 150.00
L = 194.15
R = 475.00
N42°58'59"W
208.41'
N42°58'59"W
208.41'
TRUNCATED DOMES
CMLD STD. 10.3B
20' FRONT SETBACK TYP.
20' SDE
8
3.90 ac
169,916 sq.ft.
N53°05'14"E
486.11'
WETLANDS
PHASE I
PHASE II
S29°29'23"W
67.47'
1 1/2" IRON PIPE
EL=426.43'
BM #11451
N63°18'51"E
389.10'
1500 Gallon
Septic Tank
120'
100'
7
8.72 ac
379,894 sq.ft.
N62°50'17"E
721.14'
6
00 ac
390 sq.ft.
PHASE I
LINE
Distribution
Box
TBM
1"=100'
125'
125'
125'
250'
250'
Repair
Repair
N29°01'27"W
141.51'
BEGIN 50'
CLASS
BUFFER
N02°13'45"E
304.72'
N07°21'34"W
102.23'
L=74.21
R=650.00
L = 52.32
R = 650.00
L = 192.81
R = 509.92
N29°01'27"W
125.92'
N29°37'56"W
105.48'
CONCRETE
SIDEWALK
L = 270.14
R = 550.00
N07°21'34"W
102.23'
L = 230.62
R = 609.92
WILDFIRE

=188.82'
=1025.00'

TRAIL

8'59"W
08.41'

N42°58'59"W
208'[480']

TRUNCATED DOMES
CMLD STD. 10.35B

20' FRONT SETBACK TYP.

L = 194.15
R = 475.00

L = 164.74
R = 475.00

N00°18'26"E
196.36'

20' SDE

N53°05'54"E
480'

4

200'

100'

120'

1500 Gallon Septic Tank

8.72 ac
379,894 sq.ft.

WETLANDS

PHASE I

PHASE

S3°29'23"W
67.47'

1 1/2" IRON PIPE
EL=626.43'
BM #11451

N63°18'51"E
389.10'

N62°50'17"E
721.14'

PHASE I
LINE

Distribution Box

TBM

25'
25'
25'
25'
25'

Repair
Repair

Y
B
B
Y

250'
250'

1"=60'

N29°01'27"W
141.51'

N07°21'34"W
102.23'

L=74.21
R=650.00

L = 192.81
R = 509.92

L = 52.32

N29°01'27"W

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

Sheet: 1
Property ID: PO 199-521-01
Lot #: 7
File #: 5419B
Code: 1

ACS

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: The Sanctuary at Lake Wylie
Applicant: Toney Jacobs
Address: 10933 Ballantyne Crossing Ave., Charlotte, N. C. 28277
Date Evaluated: 11/20/2003
Proposed Facility: Residence
Design Flow (.1949): 840gpd
Property Size:
Location of Site: Ninebark Trail
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	OTHER PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS, 8	0-4	GR/CL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48	N/A	NONE	PS, IV
		4-48	SBK/ABK/C	FI/SEXP/S/P					.3GPD/FT^2
2	"	0-5	GR/CL	FR/SEXP/SS/SP	"	"	"	"	"
		5-48	SBK/ABK/C	FI/SEXP/SS/SP					
3	"	0-4	GR/CL	FR/SEXP/SS/SP	>50" TO SOIL WETNESS	50	"	"	"
		4-50	SBK/ABK/C	FI/SEXP/S/P					
4	"	0-3	GR/CL	FR/SEXP/SS/SP	>49" TO SOIL WETNESS	49	"	"	"
		3-49	SBK/C	FI/SEXP/S/P					

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR	.3GPD/FT^2	.3GPD/FT^2

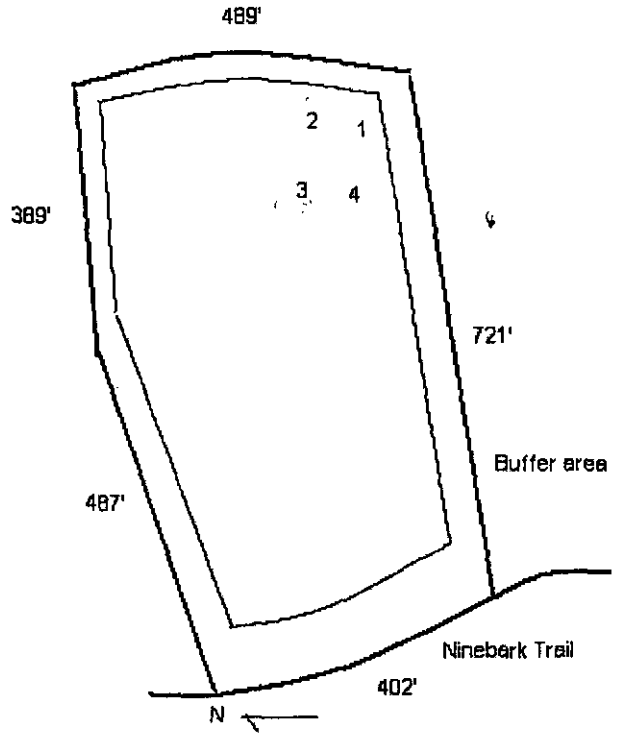
Other Factors (.1946): _____
Site Classification (.1948): PROVISIONALLY SUITABLE
Evaluated By: W. R. Marlin, LSS, 11/21/2003. W. R. Marlin
Others Present:

FILE # 5419B

COMMENTS: 100% repair

LANDSCAPE POSITIONS	GROUP	TEXTURES	.1955 LTAR	CONSISTENCE MOIST	WET
R-RIDGE	I	S-SAND	1.2 - 0.8		
S-SHOULDER SLOPE		LS-LOAMY SAND		VFR-VERY FRIABLE	NS-NON-STICKY
L-LINEAR SLOPE				FR-FRIABLE	SS-SLIGHTLY STICKY
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8 – 0.6	FI-FIRM	S-STICKY
N-NOSE SLOPE		L-LOAM		VFI-VERY FIRM	VS-VERY STICKY
H-HEAD SLOPE				EFI-EXTREMELY FIRM	NP-NON-PLASTIC
CC-CONCLAVE SLOPE	III	SI-SILT-	0.6 – 0.3		SP-SLIGHTLY STICKY
CV-CONVEX SLOPE		SIL-SILT LOAM			P-PLASTIC
T-TERRACE		CL-CLAY LOAM			VP-VERY PLASTIC
FP-FLOOD PLAN		SCL-SANDY CLAY LOAM			
		SICL-SILTY CLAY LOAM			
	IV	SIC-SILTY CLAY	0.4 – 0.1		
		C-CLAY			
		SC-SANDY CLAY			

STRUCTURE	MINERALOGY
SG-SINGLE GRAIN	SLIGHTLY EXPANSIVE
M-MASSIVE	
CR-CRUMB	EXPANSIVE
GR-GRANULAR	
SBK-SUBANGULAR BLOCKY	
ABK-ANGULAR BLOCKY	
PL-PLATY	
PR-PRISMATIC	



FEE: 210.00 CK

DATE: 10/27/03 pc

APPLICATION FOR IMPROVEMENT PERMIT FOR RESIDENTIAL SITE INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM

[ ] CRT

TYPE APPLICATION: ___ NEW SYSTEM ___ EXPANSION/ ALTERATION OF EXISTING SYSTEM ___ REPAIR OF EXISTING SYSTEM

NORTH CAROLINA
DEPARTMENT OF ENVIRONMENT,
HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

FILE #: 54198

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 199-521-01

STREET ADDRESS: off Eastland Point Rd

SUBDIVISION OR MOBILE HOME PARK NAME: The Sanctuary At Lake Wylie, LLC

LOT NUMBER: 7

TYPE OF BUILDING (CHECK ONE):

___ SINGLE MOBILE HOME(S)
___ DOUBLE WIDE (D)
___ HOUSE (H)
___ MODULAR HOME (M)
___ MULTIPLE FAMILY (U)
___ OTHER (O)

TOWNSHIP (CHECK ONE):

✓ 0 MECKLENBURG
___ 1 CHARLOTTE
___ 2 DAVIDSON
___ 3 CORNELIUS
___ 4 PINEVILLE
___ 5 MATTHEWS
___ 6 HUNTERSVILLE
___ 7 MINT HILL

CLOSING DATE _____

HEATED SQUARE FOOTAGE:

NUMBER OF BEDROOMS:

NUMBER OF OCCUPANTS:

FOUNDATION FOR RESIDENCE:

___ WITHOUT BASEMENT
___ ON SLAB
___ CRAWL SPACE
___ WITH BASEMENT /PLUMBING
___ WITH BASEMENT /NO PLUMBING

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: ___ YES ✓ NO TYPE: _____

WATER SUPPLY (CHECK ONE):

___ COMMUNITY (C)
✓ MUNICIPAL (M)
___ PRIVATE WELL (P)
___ SHARED WELL (S)
___ OTHER 'SPRINGS' (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES ___ YES ✓ NO
EXISTING WASTEWATER SYSTEMS ___ YES ✓ NO
EASTMENTS OR RIGHT-OF-WAYS ✓ YES ___ NO
WELL, SPRINGS OR WATERLINES ___ YES ✓ NO
DESIGNATED WETLANDS ___ YES ✓ NO

PROPERTY OWNER:

NAME: The Sanctuary At Lake Wylie, LLC (LAST) (FIRST) (MI)

ADDRESS: 10933 Ballantyne Corporate Ave

CITY: Charlotte STATE: NC ZIP: 28277

DAYTIME PHONE: 704 544-0201 ext 226

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: Jacobs (LAST) Tonya (FIRST) C (MI)

DAYTIME PHONE: 704 663-6905

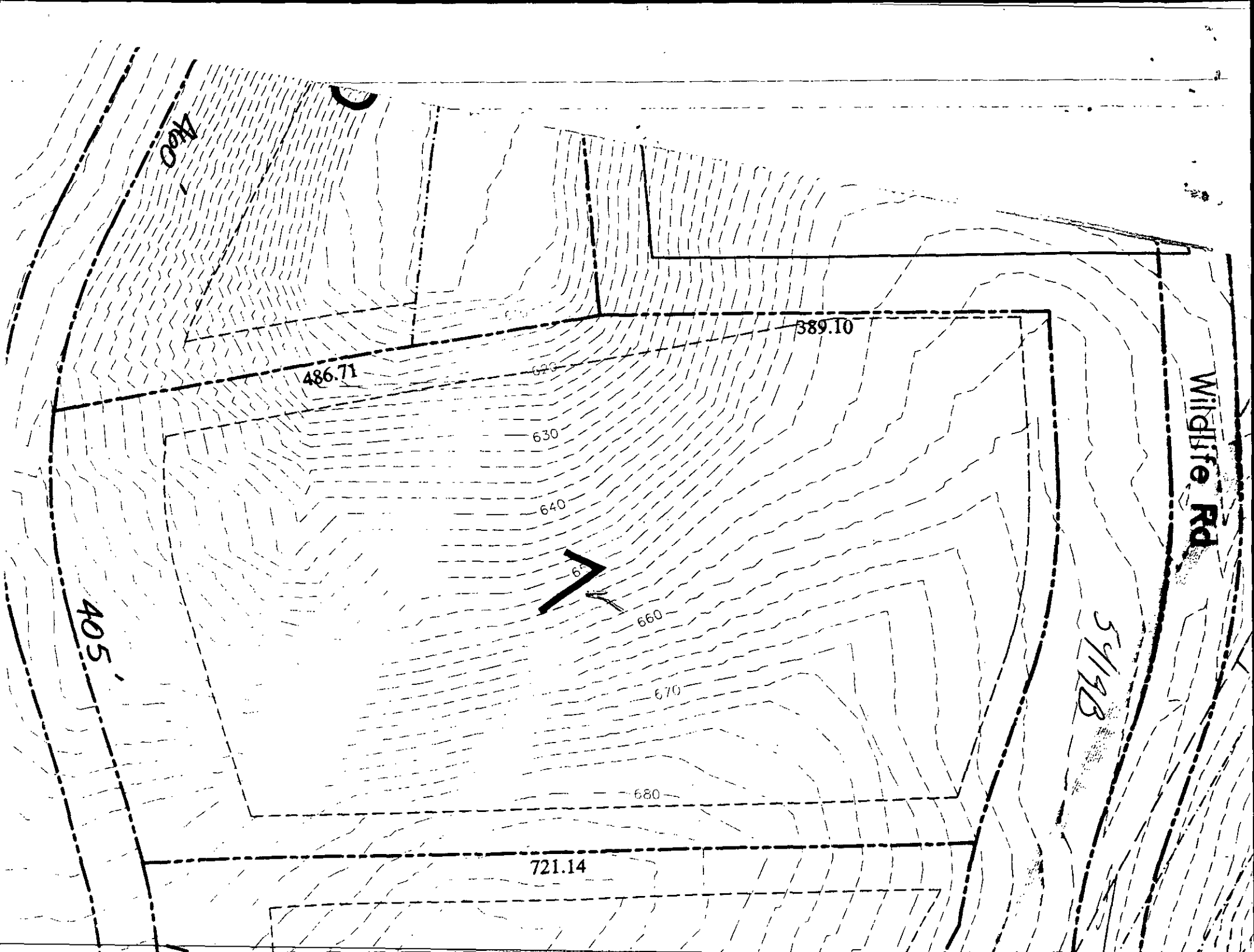
m 704 582 9219

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. 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: Tonya C Jacobs, CPSS (Agent) DATE: 10/23/03

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102


Wildlife Rd
389.10
486.71
405'
721.14
630
640
660
670
680

PROPOSED PLOT PLAN

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

FILE: _____

TC: _____

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.

"See Attached"

OWNER/AGENT SIGNATURE

DATE 10/23/03

APPROVAL DATE _____

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

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

Sheet: 1 of 2
Property ID: PO 199-371-03
Lot #: 7
File #: 5558B ACS
Code: 1 54198

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: The Sanctuary at Lake Wylie
Applicant: Toney Jacobs
Address: 10933 Ballantyne Crossing Ave., Charlotte, N. C. 28277
Date Evaluated: 04/22/2004
Proposed Facility: Residence
Design Flow (.1949): 600gpd
Property Size: .75a inv.
Location of Site: Ninebark Trail
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	OTHER PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS, 8	0-7	GR/CL	FR/SEXP/SS/SP	>49" TO SOIL WETNESS	49	N/A	NONE	PS, IV
		7-49	SBK/C	FI/SEXP/S/P					.3GPD/FT^2
2	"	0-9	GR/CL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48	"	"	"
		9-48	SBK/C	FI/SEXP/S/P					
3	"	0-6	GR/CL	FR/SEXP/SS/SP	>49" TO SOIL WETNESS	49	"	"	"
		6-13	SBK/CL	FR/SEXP/SS/SP					
		13-49	SBK/CL	FI/SEXP/S/P					
4	"	0-3	GR/CL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48	"	"	"
		3-48	SBK/C	FI/SEXP/S/P					
5	"	0-4	GR/CL	FR/SEXP/SS/SP	>49" TO SOIL WETNESS	49	"	"	"
		4-49	SBK/C	FI/SEXP/S/P					
6	"	0-3	GR/CL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48	"	"	"
		3-48	SBK/C	FI/SEXP/S/P					

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR	.3GPD/FT^2	.3GPD/FT

Other Factors (.1946):
Site Classification (.1948): PROVISIONALLY SUITABLE
Evaluated By: W. R. Marlin, LSS, 4/26/2004. W. R. Marlin
Others Present:

COMMENTS:

100% repair, do not install system when soils are wet

Landscape Position	Group	Texture	.1955 LTAR
R-Ridge	I	S-Sand	1.2 - 0.8
SS-Shoulder Slope		LS-Loamy Sand	
LS-Linear Slope			
FS-Food Slope	II	SL-Sandy Loam	0.8 - 0.6
NS-Nose Slope		L-Loam	
HS-Head Slope			
CC-Concave Slope	III	SI-Silt	0.6 - 0.3
CV-Convex Slope		SICL-Silty Clay Loam	
T-Terrace		CL-Clay Loam	
FP-Flood Plain		SCL-Sandy Clay Loam	
	IV	SC-Sandy Clay	0.4 - 0.1
		SIC-Silty Clay	
		C-Clay	

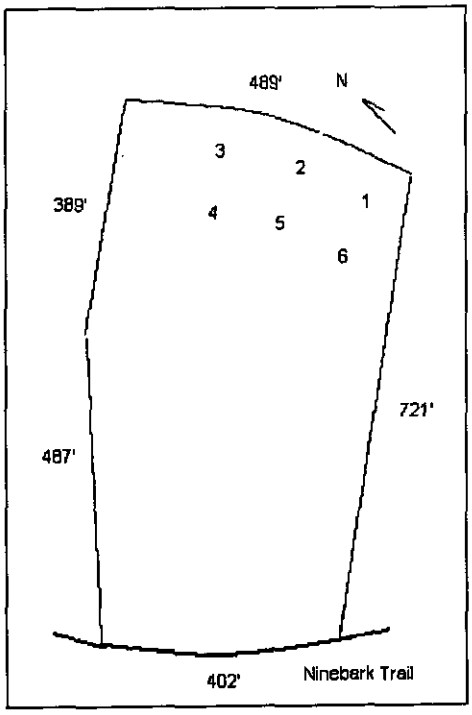
Structure
SG-Single Grain
M-Massive
CR-Crumb
GR-Granular
SBK-Subangular Blocky
ABK-Angular Blocky
PL-Platy
PR-Prismatic

Consistence Moist
VFR-Very Friable
FR-Friable
FI-Firm
VFI-Very Firm
EFI-Extremely Firm

Consistence Wet
NS-Non-Sticky
SS-Slightly Sticky
S-Sticky
VS-Very Sticky
NP-Non-Plastic
SP-Slightly Plastic
P-Plastic
VP-Very Plastic

Mineralogy
SEXP-Slightly Expansive
EXP-Expansive

Sketch of Soil Evaluation Locations



FEE: 200.00
DATE: 5/6/04
Credit applied

APPLICATION FOR IMPROVEMENT PERMIT FOR RESIDENTIAL SITE INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM

[ ] CRT

TYPE APPLICATION: ___ NEW SYSTEM ___ EXPANSION/ ALTERATION OF EXISTING SYSTEM ___ REPAIR OF EXISTING SYSTEM

NORTH CAROLINA
DEPARTMENT OF ENVIRONMENT,
HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

FILE #: 55582

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION: PO 199-371-03

TAX/PARCEL NUMBER: PO 199-521-01

STREET ADDRESS: Nine Back Trail

SUBDIVISION OR MOBILE HOME PARK NAME: Sanctuary

LOT NUMBER: 17

TYPE OF BUILDING (CHECK ONE):

___ SINGLE MOBILE HOME(S)
___ DOUBLE WIDE (D)
___ HOUSE (H)
___ MODULAR HOME (M)
___ MULTIPLE FAMILY (U)
___ OTHER (O)

TOWNSHIP (CHECK ONE):

✓ 0 MECKLENBURG
___ 1 CHARLOTTE
___ 2 DAVIDSON
___ 3 CORNELIUS
___ 4 PINEVILLE
___ 5 MATTHEWS
___ 6 HUNTERSVILLE
___ 7 MINT HILL

HEATED SQUARE FOOTAGE:

NUMBER OF BEDROOMS: 5 NUMBER OF OCCUPANTS: 10

CLOSING DATE _____

FOUNDATION FOR RESIDENCE:

✓ WITHOUT BASEMENT
___ ON SLAB
___ CRAWL SPACE
___ WITH BASEMENT /PLUMBING
___ WITH BASEMENT /NO PLUMBING

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: ___ YES ✓ NO TYPE: _____

WATER SUPPLY (CHECK ONE):

___ COMMUNITY (C)
✓ MUNICIPAL (M)
___ PRIVATE WELL (P)
___ SHARED WELL (S)
___ OTHER 'SPRINGS' (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES ___ YES ✓ NO
EXISTING WASTEWATER SYSTEMS ___ YES ✓ NO
EASTMENTS OR RIGHT-OF-WAYS ___ YES ✓ NO
WELL, SPRINGS OR WATERLINES ___ YES ✓ NO
DESIGNATED WETLANDS ___ YES ___ NO

PROPERTY OWNER:

NAME: (LAST) Sanctuary at Lake Wylie (FIRST) (MI)
ADDRESS: 10933 Ballantyne Commons Ave
CITY: Charlotte STATE: NC ZIP: 28277
DAYTIME PHONE: ( ) —

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) Jacobs (FIRST) Jovey C (MI)
DAYTIME PHONE: (704) 463-6905

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. 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: _____ DATE: 5/6/04

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102