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 #: 7623 Permit #: 6272 Tax Parcel #: 017-286-01

Property Owner: PAUL & BARBARA ALLEN

Job Location Address: 11924 PACEMAKER LANE

City: HUNTERSVILLE State: NC Zip Code: 28078

Operation Permit Issuance Date: 7/25/13 Contractor Name: UTILITY CONTRACTORS

Permitted Design Flow: 360 GPD

Liquid Capacity of Septic Tank: EXTRA gallons

Liquid Capacity of Dosing Tank: — gallons

Effluent Pump Model: —

Drainfield Installation ☒ N/A

Trench Depth: _____ inches

Trench Width: _____ feet

Line Spacing: _____ feet (O.C.)

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Depth of Cover: _____ inches

Distribution Device: _____

Inspection Dates

Tank(s) Inspected: —

Excavation Inspected: 7/25/13

Pump & Controls Inspected: —

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

Bed Depth: 36 inches

Bed Width: 9 feet

Total line length: 120 feet

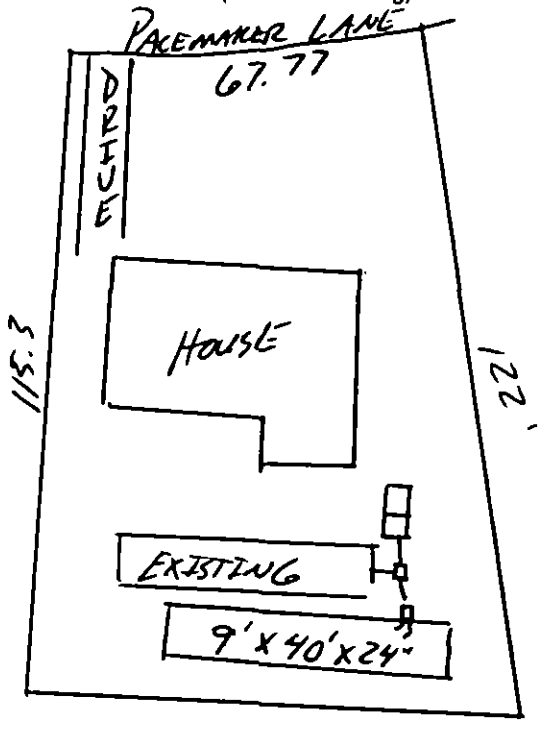
# of Lines: 3 @ 40 feet

Depth of Media: 24 inches (Type) TCHP

Depth of Cover: 12 inches

Distribution Device: D-Box

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)



Water Supply Source

☐ Municipal ☐ Private Well ☒ Community Well

☐ Other _____

System Installation Setbacks

Distance from Building Foundation: >5' feet

Distance from Property Line: >10' feet

Distance from Water Supply Source: >100' feet

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: IIa, GRAVITY, TCHP, NA, NA

DENR Authorized Agent: Jeremy Michelon REHS Signature: Jeremy Michelon REHS

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NC DENR
Division of Environmental Health
On-Site Wastewater Section

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

File #: 7623 Permit #: 6272 Tax Parcel #: 017-286-01

Property Owner: Paul & Barbara Allen

Job Location Address: 11924 Pawmaker Lane

City: Huntersville State: NC Zip Code: 28078

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: Ia

*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:

DENR Authorized Agent: Jeremy Mechler, REHS Date: 7/25/13

Signature: Jeremy Mechler, REHS

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 #: 7623 Permit #: 6272 Tax Parcel #: 017-286-01

Property Owner: PAUL & BARBARA ALLEN

Job Location Address: 11924 PACEMAKER LANE

City: HUNTERSVILLE State: NC Zip Code: 28078

Installation Approval Issuance Date: 6/25/13

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 7/22/13, 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: 360 GPD

Site LTAR: 0.3 GPD/ft² (For new installations only.)

Liquid Capacity of Septic Tank: Existing gallons

Liquid Capacity of Dosing Tank: N/A gallons

Drainfield Design ☒ N/A

Trench Depth: _____ inches

Trench Width: _____ feet

Line Spacing: _____ feet (O.C.)

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Distribution Device: _____

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

Bed Depth: 36 inches

Bed Width: 9 feet

Total line length: 120 feet

# of Lines: 3 @ 40 feet

Depth of Media: 24 inches (Type) TCHP

Distribution Device: D-Box

Water Supply Source

☐ Municipal ☐ Private Well ☒ Community Well

☐ Other _____

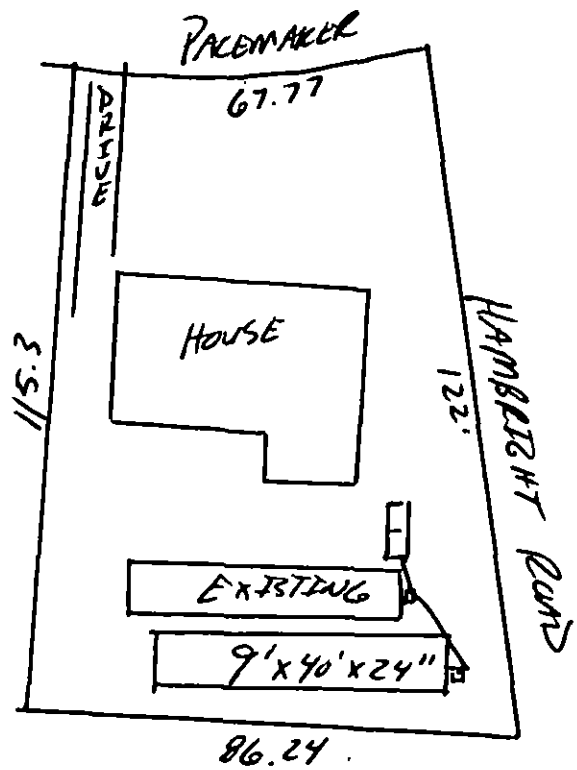
Minimum System Setbacks

Distance from Building Foundation: >5' feet

Distance from Property Line: >10' feet

Distance from Water Supply Source: >100' feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)



Comments: System Classification & Type: Type IIa Conventional System
Repair To Existing 3 Bedroom House

DENR Authorized Agent: Jeremy Mickey REHS Signature: Jeremy Mickey REHS

7623

MECKLENBURG COUNTY
HEALTH DEPARTMENT

App #6272

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: 01728601
STREET ADDRESS: 11924 Pacemaker Ln
CITY: Huntersville
STATE: NC ZIP: 28078
SUBDIVISION NAME: Wildwood Green
LOT #: 20 LOT SIZE (acres): _____
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 _____
HEATED SQUARE FOOTAGE: 1005
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 4
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 _____

8A. **RANK:** ____ ____ ____ ____ ____

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: Paul Dwayne Allen
ADDRESS: 11924 Pacemaker Ln
CITY: Huntersville
STATE: NC ZIP: 28078
WORK PHONE: _____
MOBILE PHONE: 704-875-6945
FAX: _____
E-MAIL: PAllen503@carolina.rr.com

13. **OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:**

NAME: _____
ADDRESS: _____
CITY: _____
STATE: _____ ZIP: _____
WORK PHONE: _____
MOBILE PHONE: _____
FAX: _____
E-MAIL: _____

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.

PA (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.

_____ 6/25/13

Property Owner's or Owner's Legal Representative Signature — Date

---

OFFICE USE ONLY

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

SEPTIC APPLICATION FEE RECEIVED: $ _____ DATE FEE RECEIVED: _____

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

APPLICATION PROCESSED BY: Lwa

GWS FILE NUMBER ASSIGNED: 7623

APPLICATION ID NUMBER ASSIGNED: 6272

COMMENTS:

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

DENR/DEH

ON-SITE WASTEWATER SECTION

Sheet 1 of 2
PROPERTY ID #: 017-286
COUNTY: MECK

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Paul Dwayne Allen — APPLICATION DATE 6/25/13
ADDRESS: 11924 PACEMAKER LANE HUNTERSVILLE, NC 28078 — DATE EVALUATED: 6/25/13
PROPOSED FACILITY: Residence — PROPOSED DESIGN FLOW (.1949): 360 — PROPERTY SIZE: _____
LOCATION OF SITE: 11924 PACEMAKER LANE HUNTERSVILLE, NC 28078 — PROPERTY RECORDED: _____
WATER SUPPLY: • Private • Public • Well • Spring • Other _____
EVALUATION METHOD: • Auger Boring • Pit • Cut — TYPE OF WASTEWATER: • Sewage • Industrial Process • Mixed

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	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LS 3%	0-2	GR/SCL	FR/SS/SP/SMP	>48" TO SOIL WETNESS	48"	NA	NA	P.S. 0.3 G/D/PCT2 IV
		2-48	SBK/C	FI/S/P/SEXP					
2									
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	P.S.	P.S.
System Type(s)	IIa	IIa
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): P.S.
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: Jimmy Mark Reese
OTHER(S) PRESENT: Paul Dwayne Allen

COMMENTS: _____

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)			SEXP (Slightly Expansive)	M (Massive)
D (Drainage Way)					EXP (Expansive)	CR (Crumb)
DS (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
FP (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
FS (Foot Slope)						ABK (Angular Blocky)
H (Head Slope)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
L (Linear Slope)		SiCL (Silty Clay Loam)				PR (Prismatic)
N (Nose Slope)		CL (Clay Loam)				
R (Ridge)		SCL (Sandy Clay Loam)			MOIST	WET
S (Shoulder Slope)		SiL (Silt Loam)				
T (Terrace)					VFR (Very Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Friable)	SS (Slightly Sticky)
		SiC (Silty Clay)			FI (Firm)	S (Sticky)
		C (Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None	None	EFI (Extremely Firm)	NP (Non-plastic)
						SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

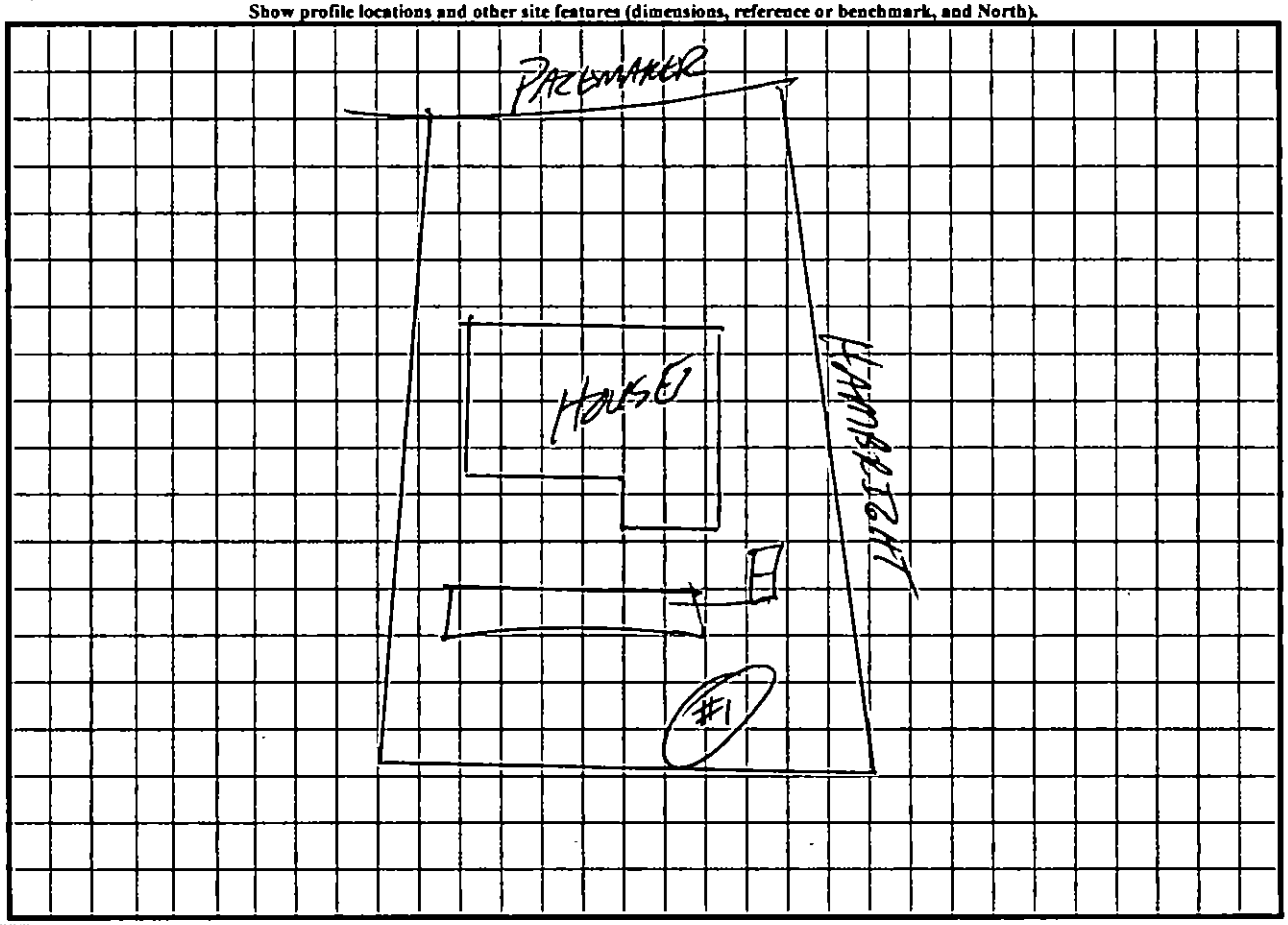
NOTES

HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft^2

Show profile locations and other site features (dimensions, reference or benchmark, and North).



DENR (######)

Review (######)

Mecklenburg County, North Carolina
POLARIS
Parcel Ownership and GIS Summary
Date and Time: 6/25/2013 11:49:19 AM

Parcel ID #: 01728601 GIS ID #: 01728601	
Owner Name:	PAUL DWAYNE ALLEN AND BARBARA RICE ALLEN
Mailing Address:	11924 PACEMAKER LN HUNTERSVILLE, NC 28078
Property Characteristics	
Legal Desc.:	L20 M14-473
Land Area:	1 LT
Fire District:	18-HUNTERSVILLE
Special District:	FIRE SERVICE D
Account Type:	INDIVIDUAL
Municipality:	6-HUNTERSVILLE
Property Use:	VACANT
Deed Reference(s) and Sales Price	
14769-314 (1/31/2003) $0.00 03694-034 (9/26/1974) $0.00	
Situs Addresses Tied to This Parcel	
11924 PACEMAKER LN	
Site Location Information	
Zoning Boundaries:	Contact Appropriate Planning Department or See Map.
ETJ Area: HUNTERSVILLE	
Charlotte Historic Districts: NO	
Within Charlotte 6/30/2011 Annexation Area: NO	
Census Tract #: 62.07	
Parcel Falls Inside a Water Quality Buffer?: NO	
Post Construction District	
Jurisdiction:	Huntersville
District:	Catawba

FEMA Flood Information	
FEMA Panel #:	3710454900J
FEMA Flood Zone:	OUT
FEMA Panel Date:	03/02/2009
Community Flood Information	
Community Flood Zone:	OUT
Regulated Watershed Information	
Watershed Name:	GAR
Watershed Class:	CA-2

Powered by



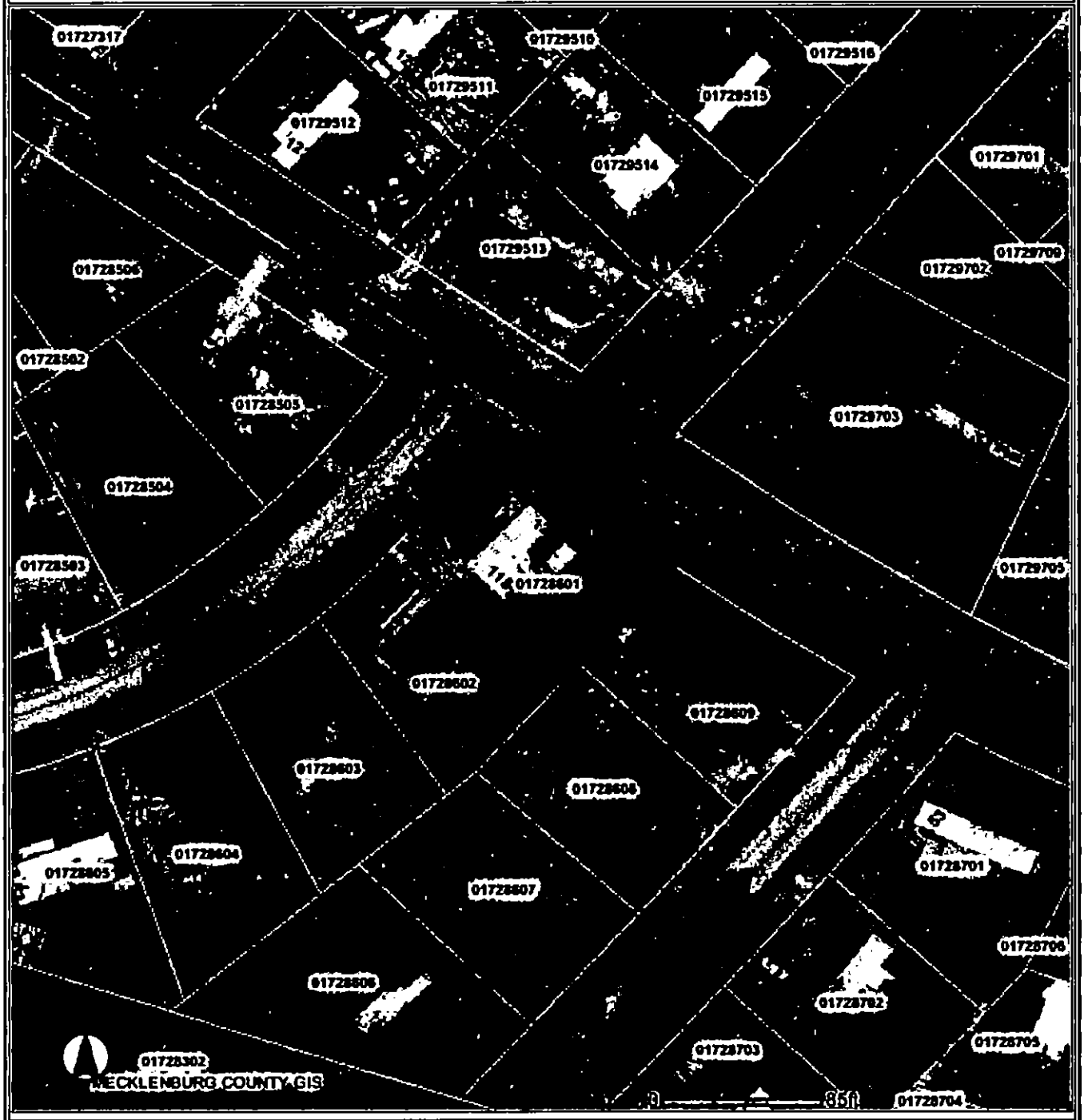
The information provided by this program is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, and other public records and data. Users of this map data are hereby notified that the aforementioned public primary information sources should be consulted for verification of the information. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.

Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Tue Jun 25 11:48:58 EDT 2013



This map is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, planimetric maps, and other public records and data. Users of this map are hereby notified that the aforementioned public primary information sources should be consulted for verification. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.

N.C. Department of Environment & Natural Resources / Division of Environmental Health

NOTICE OF VIOLATION
ON-SITE WASTEWATER SYSTEM

☐ Certified Mail (Return Receipt) ☒ First Class Mail ☐ Hand Deliver

Owner: Paul & Barbara Allen

Mailing Address: 11924 Pacemaker Lane
Huntersville, , NC 28078

Occupant: Allen Residence

Location: 11924 Pacemaker Lane
Huntersville, NC 28078

☒ Residence ☐ Business ☐ Other

COPY

You are hereby notified that you are violating the Rules adopted by the North Carolina Commission for Health Services or Article 11 of Chapter 130A of the General Statutes of North Carolina by owning or controlling a residence, place of business, or place of public assembly which is not provided with an approved wastewater system. Your wastewater system is not in compliance.

On June 29, 2013 an inspection of the wastewater system by the Mecklenburg County Health Department indicated the following violations:

Violation/s

Observed a discharge of sewage to the surface of the ground or surface water.
[G.S. 130A-335(a) 15A NCAC 18A. 1961(a)(1)(A)]

You are hereby ordered to bring your wastewater system into compliance by completing the following:

☒ Install / Repair wastewater system. You must obtain a repair permit from the local health department prior to the repair of your system.

☐ Other Repairs *(Specify):*

☐ Eliminate wastewater discharge and connect to an approved wastewater system.

☒ Perform Maintenance *(Specify):* Check for leaking tiolets.

If the wastewater violation is not brought into compliance by **July 22, 2013** appropriate legal action will be taken.

Failure to comply with laws, rules, and this notice will subject you to the following legal remedies; Injunction Relief [G.S. 130A-18], Administrative Penalties [G.S. 130A-22], Suspension or Revocation of Permits [G.S. 130A-23], and Criminal Penalties [G.S. 130-25].

For questions regarding this notice you should contact Jeremy Michelone, REHS at (704)336-5572.

Notice Issued: 6/21/13
Date

Jeremy Michelone, REHS
DENR/DEH Authorized Agent

Compliance: _____
Date

_____
DENR/DEH Authorized Agent

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

Michelone, Jeremy

From: Priddy, Corey
Sent: Thursday, June 20, 2013 11:21 AM
To: Michelone, Jeremy
Subject: FW: Form submitted: [Code Enforcement Complaint Form] in portal [Town of Huntersville]

-----Original Message-----
From: David Peete [mailto:dpeete@huntersville.org]
Sent: Thursday, June 20, 2013 8:45 AM
To: Sifford, Brian; Davis, Heather; Priddy, Corey
Cc: Claudia Schruhl
Subject: FW: Form submitted: [Code Enforcement Complaint Form] in portal [Town of Huntersville]

Heather / Corey,
In Brian's absence, can you pass this along to the correct person.
Please ask to keep us posted.
Thank you

David F. Peete, AICP
Principal Planner | Town of Huntersville
105 Gilead Road | Third Floor
P.O. Box 664 | Huntersville, North Carolina 28070
PH: 704-766-2216 | FX: 704-992-5528
Email: dpeete@huntersville.org
Web: www.huntersville.org

Email correspondence to and from this sender is subject to the NC Public Records Law and may be disclosed to third parties.

-----Original Message-----
From: System@huntersville.org [mailto:System@huntersville.org]
Sent: Thursday, June 20, 2013 8:39 AM
To: Claudia Schruhl; jerod@graniteskydesign.com; David Peete; samblair@gmail.com
Subject: Form submitted: [Code Enforcement Complaint Form] in portal [Town of Huntersville]

Date:

6/20/2013

Address/Location of Issue:
---
corner of Pacemaker Ln. and Hambright Rd.

Type of Complaint:

Other (Explain below)

If other, please explain:

Septic Tank Spill/Bad odor

Name:

Doug Greene

Address:

12035 BlueMoon Court

Contact Number:

704-320-9202

Email:
---
douggreene28@att.net

Would you like a follow-up contact?:

Yes

Additional Comments:

Leak is in rear of white Double-wide home on Pacemaker lane at corner of Hambright Rd. Address unsure of. Problem can be seen well from my back yard (above).

Date Issued 11 April 74 Serial 4636

C of A (s) No. 7623

T C No CN7-256-01

Map Date 1 Dec 73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner Hudson, Herman (LAST, FIRST, MIDDLE)

Location of Property Hembright Rd (Wildwood Green MHP)

Application Number 7623 Permit Number 7623

Inspection Data:

Liquid Capacity of Tank Repair Tank Material

Total Length of Drain Tile 180' Number of Lines 4 (10' x 45' x 12")

Depth of Filter Material 17" Cover Depth 15"

Water Supply Source Community Distance from Water Source

Excavation Inspected 11 April 74 (DATE) Tank Inspected (DATE)

Nitrification Field Inspected 11 April 74 (DATE)

Washing Machine Line Inspected, If Applicable (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been installed or constructed, repaired, altered or repaired in accordance with the permit issued and the regulations of the Mecklenburg County Board of Health in effect on the date of issuance of the permit. The issuance of this Certificate of Approval 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 Certificate of Approval is issued subject to those restrictions and conditions shown on the permit(s) in addition to those listed below under comments. This Certificate of Approval 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.

Comments Clarkson Manson

Environmentalist

FORM NO. E-6-4-1-71

HEALTH DEPARTMENT'S COPY

Serial No

Date Issued 27 March 74

ICAR'S Permit No 7623

T C No 017-286-01

Map Date 14 Dec 73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

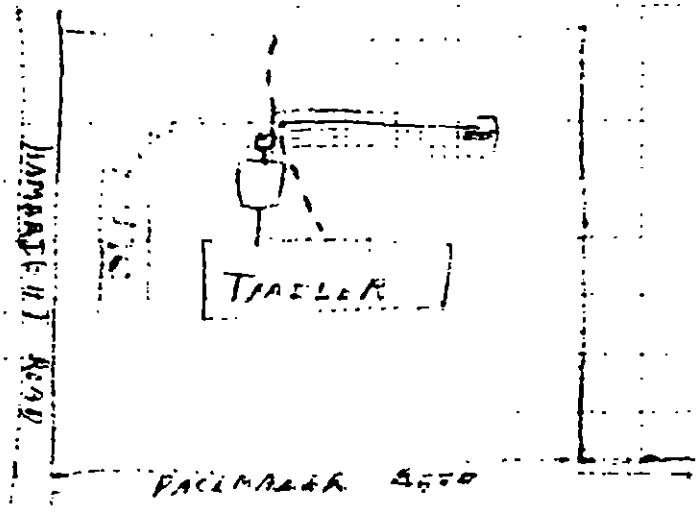
INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT

Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge

A permit for the individual septic tank waste [illegible] herein at the [illegible] 7623

3-7-74

27 April 74



Repair

180'

4(10' x 45' x 17")

10'

10'

Comm

PALMBACK 4000

HUDSON PEARMAN

HAMBRIGHT ROAD (Wilmont Green)

CHARLES

[illegible]

Jerry Sinclair

Environmental Health Specialist

[illegible] by the [illegible] Signature of the [illegible]

[illegible] existing system [illegible] altered or repaired

Date [illegible]