SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

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

File Number: 122366

Assigned Inspector: Patrick / Heather

☑ IP $250.00: CP 5/2/25 Initial/Date

☐ IP Commercial $450.00: _____ Initial/Date

☐ CA & OP $400.00: _____ Initial/Date

☐ Alteration Fees $300: _____ Initial/Date

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

☐ Use Existing Fees $100.00: _____ Initial/Date

☐ Use Existing Approved ☐ Use Existing Denied

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

☐ Floor plans reviewed

☐ Generate CA ☐ Approve as Noted in Winchester

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

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

☐ Certified operator contract is on file: _____

☐ Septic file complete: _____

☐ Release final hold in Winchester: _____

Comments:

dotloop signature verification:

12236B
#1559

MECKLENBURG COUNTY
HEALTH DEPARTMENT

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: 015-264-57
STREET ADDRESS: 9029 Miriam Dr
CITY: Huntersville
STATE: NC ZIP: 28078
SUBDIVISION NAME: Westminister Park
LOT #: L10 M29-486 LOT SIZE (acres): 0.53
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: 1,944
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 1

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

HAS 811 BEEN CONTACTED AND IDENTIFIED ANY UNDERGROUND UTILITIES ON THE PROPERTY IF YES, ○ YES ● NO
PLEASE LIST TICKET REFERENCE NUMBER: _____ VISIT BY DATE: _____

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: Harry and Linda Smith
ADDRESS: 9036 Miriam Dr
CITY: Huntersville
STATE: NC ZIP: 28078
WORK PHONE: _____
MOBILE PHONE: _____
FAX: _____
E-MAIL: _____

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

**Owner's Authorization form is required if legal representative is submitting application*

NAME: Frank Oppong
ADDRESS: 900 Fenway Pl SW
CITY: Concord
STATE: NC ZIP: 28027
WORK PHONE: _____
MOBILE PHONE: 615-546-2429
FAX: _____
E-MAIL: kofi.n.oppong@gmail.com

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Drive, Suite 8000, Charlotte, NC 28208
OFFICE: 980-314-1680, FAX: 704-336-6894 Email: Wellreg@MecklenburgCountyNC.gov

Revised on: 4/20/17

dotloop signature verification:

14. SEPTIC SYSTEM PERMIT APPLICATION:

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. **I understand that if the information in the application is falsified, changed, or the site is altered, then the Improvement Permit and/or Construction Authorization shall be invalid. I understand that the permit is valid for either 60 months or without expiration depending upon documentation submitted. (complete site plan = 60 months; complete plat = without expiration)**

FO 04/29/25 7:32 PM EDT dotloop verified ____ (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

---

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: _____

GWS FILE NUMBER ASSIGNED: _____

APPLICATION ID NUMBER ASSIGNED: _____

COMMENTS:

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Drive, Suite 8000, Charlotte, NC 28208
OFFICE: 980-314-1680, FAX: 704-336-6894 Email: Wellreg@MecklenburgCountyNC.gov

dotloop signature verification:

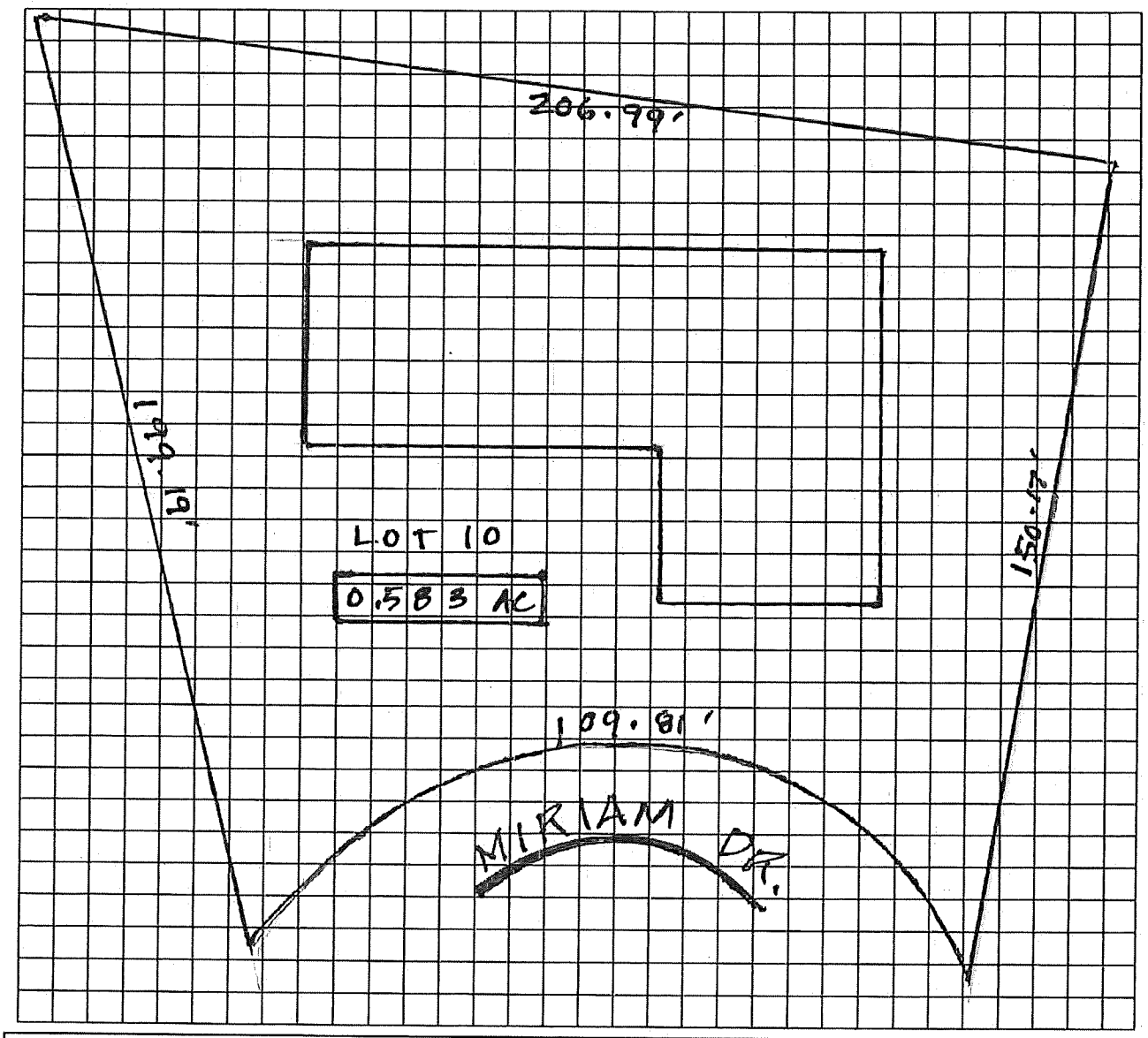
File #: _____

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: 9029 Miriam Dr Huntersville NC 28078 Tax Parcel #: 015-264-57

Subdivision Name: _____ Lot #: 10



Frank Oppong — dotloop verified 04/29/25 7:32 PM EDT FR0E-RPEC-XYZ6-MDCF

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

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Drive, Suite 8000, Charlotte, NC 28208
OFFICE: 980-314-1680, FAX: 704-336-6894 Email: Wellreg@MecklenburgCountyNC.gov

#240

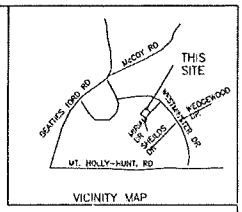
MAP BOOK 29 PAGE 486

FILED FOR REGISTRATION
AUG 18 1998
AT 11:44
MECKLENBURG N. C.

REGISTERED
AUG 18 1998
AT 11:44
BOOK 29 PAGE 486
JOBNER L. [illegible], REGISTER OF DEEDS
BY: Rebecca M.K. Jones

NORTH A. CARSON
REGISTER
OF
DEEDS
MECKLENBURG COUNTY, N.C.

BASIS OF BEARINGS UNRECORDED MAP BY J. E. DAVIS DATED 6-8-61



VICINITY MAP

Wm. Laura Wilson
DB 860-87
Tax Parcel: 015-264-43

Exist Iron Pin

N 59°33'47" W 234.87'

S 49°52'29" E 210.99'

N 43°39'46" W 249.88'

S 80°22'58" W 100.07'

LOT 10
0.0861 AC

LOT 11
0.683 AC

LOT 9

LOT 2

LOT 1

LOT 4

R=200.00'
L=119.45'
Chd Bear: N 24°29'09" W
Chd Dist=106.44'

R=200.00'
L=168.72'
Chd Bear: N 67°16'16" W
Chd Dist=163.78'

N 40°24'10" E 170.17'

S 49°35'50" E 169.37'

S 49°35'50" E 231.30'

TIE LINES

Exist Rebar

MIRIAM DRIVE
var. WIDTH & PAGE 43
N 09°55'37" W 159.58'

PEMBROKE ROAD
S.R. #1121

B.L.O.W.K.
MAP BOOK 6-427

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, STUART MULLEN, REVIEW OFFICER OF MECKLENBURG COUNTY, CERTIFY THAT THE MAP TO WHICH THIS CERTIFICATION IS AFFIXED MEETS ALL THE STATUTORY REQUIREMENTS FOR RECORDING.

DATE REVIEW OFFICER

Reviewed K-Jones
8-18-98

STATE OF NORTH CAROLINA, MECKLENBURG COUNTY
I, RICHARD E. NAVY, CERTIFY THAT THIS PLAT WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION, DEED DESCRIPTION RECORDED AT BOOK AS NOTED; THAT THE ERROR OF CLOSURE AS CALCULATED BY LATITUDES AND DEPARTURES IS 1:10,000 AND THE MAXIMUM FIELD ERROR OF ANGULAR CLOSURE IS 1" PARCELS THAT LINES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION RECORDED IN BOOKS AS NOTED; THAT THIS PLAT WAS PREPARED IN ACCORDANCE WITH GS 47-30 AS AMENDED.

WITNESS MY ORIGINAL SIGNATURE, REGISTRATION NUMBER, AND SEAL THIS 17th DAY OF AUGUST, 1998.

Richard E. Navy
RICHARD E. NAVY
NCRLS L-1336

NORTH CAROLINA REGISTERED SEAL L-1336 LAND SURVEYOR RICHARD E. NAVY

Surveying Consultants

Prepared By:
Surveying Consultants, P.A.
105 Ervin Woods Drive
Kannapolis, N.C. 28081
704-933-7114

NOTES

1. THIS SURVEY ORIGINALLY PERFORMED JUNE 29, 1990 AND REPRESENTS CONDITIONS AS THEY WERE ON THAT DATE.
2. THE ORIGINAL MAP IS HEREBY REVISED TO REMOVE THE CALL FOR THE MINIMUM BLDG. SETBACK TO BE 40'. THE SETBACKS ARE TO BE AS DETERMINED BY THE TOWN OF HUNTERSVILLE
3. CORRECTED BEARING TO NW OF LOT 2
4. CORRECTED AND LENGTH FOR LOT 11
5. ADDED VICINITY MAP
6. ADDED OFFSITE TIES
7. ADDED REVIEW OFFICER CERTIFICATE
8. ADDED SURVEY CLASSIFICATION STATEMENT

THIS SURVEY IS OF EXISTING PARCELS OF LAND AND DOES NOT CREATE OR CHANGE AN EXISTING STREET

REVISION TO MAP RECORDED AT MAP BOOK 23-998

BOUNDARY SURVEY
FOR
HARRY M. SMITH and wife LINDA W. SMITH
DEED REFERENCE: DB 6206-155
LONG CREEK TOWNSHIP MECK. CO., N.C.
SCALE 1"=50' JUNE 29, 1990

0 25 50 100 150 200
GRAPHIC SCALE

A-2-73R

MECKLENBURG COUNTY
Health Department

Gibbie Harris, MSPH, BSN
Director

(980) 314-9020

Addendum to Application for
New Well or Septic System Installation
Abandonment or Repair of Existing Well or Septic System

Your signature below confirms the following:

1. The information on the application is true, complete and accurate.
2. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliances with applicable laws and rules.
3. I acknowledge that Frank Oppong is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at

9029 Miriam Dr. Huntersville
Number Street Town
(Or Parcel Number)

Harry M Smith
Property Owner (print name)

Linda W. Smith
Property Owner (signature)

5-29-25
Date

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	05/01/25	**Amount:**	250.00
Receipt #:	154972	**Tendered:**	250.00
Check / Auth #:	VISA 184222	**Returned:**	0.00
Received By:	PLACILJ		

Account Information

Account #: 200000
Contractor: FRANK OPPONG
Attn:
Address: 900 FENWAY PL SW
Address:
City/State/Zip: CONCORD, NC 28027

Item	Description	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 9029 MIRIAM DR	1	250.00	250.00

Permit#

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
3,000.00					

Department of Health and Human Services
Environmental Health Section
On-site Water Protection Branch

Property ID: 01526457
Lot #: 10
File #: 12236B
AppID: 15459

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Harry & Linda Smith
Applicant: Frank Oppong
Address: 9029 Miriam Dr.
Date Evaluated: 5/15/2025
Proposed Facility: 3 BR SFR
Design Flow (.0400): 360 GPD
Property Size: 0.53 ac.
Location of Site: See file
Property Recorded: After Jan. 1, 1983
Water Supply: [X] Public [ ] Single Family Well [ ] Spring [ ] Other:
Evaluation Method [X] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [X] Domestic [ ] Industrial Process [ ] High Strength

PROFILE #	.0502 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .0503 Structure/ Texture	.0503 Consistence/ Mineralogy	PROFILE FACTORS Matrix Soil Color	.0504 Soil Wetness/ Color	.0505 Soil Depth (IN.)	.0506 Sapro Class	.0507 Restr Horiz	General Comments / Other	0.0509 Profile Class & LTAR	0.0502 Slope Correction *(Low Side of trench)*
1	FS ~16%	0 - 4	Mo, Sbk, L	Fr, SS, NP	B	F: Chroma 3-4 deplet. @ 17"+	18" ?	N/A	N/A	C: Rock floaters throughout	US @ 18"	Drip (6" max)
		4 - 18	Mo, Sbk, C	Fr, SS, SP, SE	RB							
		18	Auger refusal									
2	L / FS ~15%	0 - 4	Mo, Sbk, L	Fr, SS, NP	B	F: YB deplet. @ 20"+ F-C: Chroma 3-4 @ 23"+	30" ?	N/A	N/A	C: Rock floaters @ 0-16"	US @ 30"	- 6" Drip or at grade (12" max)
		4 - 9	Mo, Sbk, CL	Fr, SS, SP	RB							
		9 - 25	Mo, Sbk, C	Fr, SS, P, SE	R							
		25 - 30	Wk, Sbk, CL	Fr, SS, SP	YB							
		30	Auger refusal									
3	L / FS ~15%	0 - 3	Mo, Sbk, L	Fr, SS, NP	B	F: B Mn concen. @ 16"+ F-C: Chroma 2-3 @ 23"+	~26"	US	N/A	F-C: Rock floaters throughout C: Weathered Rock inclus. @ 24"+	US @ 23"	- 6" Drip (11" max)
		3 - 15	Mo, Sbk, CL	Fr, SS, SP	RB							
		15 - 24	Mo, Sbk, C	Fr, SS, P, SE	R							
		24 - 29	Wk, Abk, CL & Sap.	mix Fr, SS, SP	R							
		29	Auger refusal									
4	L ~14%	0 - 2	Mo, Sbk, L	Fr, SS, NP	B	N/A	~24"	S L-Sap. Need Pits to confirm	N/A	C-M: Sap. inclus. @ 16-20" F: Weathered Rock inclus. @ 24"+	S 0.30	- 5"
		2 - 16	Mo, Sbk, C	Fr, SS, SP, SE	R							
		16 - 20	Mo, Sbk, CL	Fr, SS, SP	R							
		20 - 24	Wk, Abk, CL & Sap.	mix Fr, SS, SP	R							
		24 - 48	M, L- Sap.	Fi-Fr, SS, SP	M							
5	L ~14%	0 - 9	Mo, Sbk, C	Fr, SS, SP, SE	RB	F: YB mottles @ 18-25"	42"	S L-Sap. Need Pits to confirm	N/A	C-M: Sap. inclus. @ 25-37" C: CL soil inclus. @ 42"+	S 0.30	- 5"
		9 - 25	Mo, Abk/Sbk, C	Fr, SS, SP, SE	R							
		25 - 37	Mo-Wk, Sbk, CL	Fr, SS, SP	R							
		37 - 42	Wk, Abk, CL & Sap.	mix Fr, SS, SP	R							
		42 - 48	M, L- Sap.	Fr, SS, SP	M							
6	L ~16%	0 - 5	Mo, Sbk, C	Fr, SS, SP, SE	RB	F: Chroma 3-4 mottles @ 30"+ C: Chroma 2 deplet. @ 40"+	42"	US Need Pits to confirm	N/A	F-C: Sap. inclus. @ 30-42" C: CL soil inclus. @ 42"+	S 0.25	- 6" (22" max)
		5 - 30	Mo, Abk/Sbk, C	Fr, SS, SP, SE	R							
		30 - 42	Wk, Abk, CL & Sap.	mix Fr, SS, SP	R							
		42 - 48	M, L- Sap.	Fr, SS, SP	M							
7	L ~14%	0 - 4	Mo, Sbk, C	Fr, SS, SP, SE	RB	N/A	41"	S L-Sap. Need Pits to confirm	N/A	C-M: Sap. inclus. @ 30-36" BC horizon @ 36-41"	S 0.30	- 5"
		4 - 25	Mo, Abk/Sbk, C	Fr, SS, SP, SE	R							
		25 - 41	Mo-Wk, Sbk, CL	Fr, SS, SP	R							
		41 - 48	M, L- Sap.	Fr, SS, SP	M							

Description	Initial System	Repair System
Available Space (.0508)		
System Type(s)		
Site LTAR	Need Pits to Confirm	
Maximum Trench Depth (low side of trench)	Need Pits to Confirm	

Soil Evaluation By: P. Mitchell, REHS, LSS
Soil Classification (.0502 - .0507) Need Pits to Confirm
Other(s) Present:
Site Classification (.0509):

Comments: Need soil pits excavated to confirm saprolite suitability, to determine depths to soils wetness vs litho, and to determine US soil depth boundary for system area. The lot appears to be US due to insufficient space resulting from proposed house, setbacks to the following: neighboring well, stream on back of lot, & a stormwater ditch, and US soil depths in borings #1, #2, & #3. In addition, the proposed house is a slab or basement foundation which will have an increased side setback required. Site could potentially be suitable if the proposed house is moved and the size is altered around the suitable soils area and system layout.

Soil & Site Evaluation Map



Map Created by: P. Mitchell
Date: 5/15/2025

PROPERTY INFO
Address: 9029 Miriam Dr.
PID No.: 01526457

1 inch = 40 feet

Mecklenburg County
Groundwater & Wastewater Services