2008 OS OK

Groundwater & Wastewater Services
Septic Project File & Data Review Worksheet

GWS File #: 7069A WASPS App #: 3814

Primary ES assigned to project: _____

Secondary ES assigned to project: _____

Project Type: New System ☐ Alteration ☐ Repair ☐ Modified Plot Plan ☐ OTS ☑

I. File Review:

Rule or Law	Permit Application			
.1937(d)	Is the Application complete	Yes ☑	No ☐	N/A ☐
.1937(d)	Is there a Site plan/Plat with application	Yes ☑	No ☐	N/A ☐
.1937(d)	Is the Facility shown?	Yes ☑	No ☐	N/A ☐
.1937(d)	Are appurtenances shown	Yes ☐	No ☐	N/A ☐
	Site Evaluation Information			
.1939 (a)(1)	Topography and Landscape Position Recorded?	Yes ☐	No ☐	N/A ☐
.1940 (a-g)	Slope % Recorded?	Yes ☐	No ☐	N/A ☐
.1939 (a)(2)	Texture Class Recorded?	Yes ☐	No ☐	N/A ☐
.1939 (a)(2)	Structure type Recorded?	Yes ☐	No ☐	N/A ☐
.1939 (a)(2)	Consistence Recorded?	Yes ☐	No ☐	N/A ☐
.1939 (a)(2)	Mineralogy Recorded?	Yes ☐	No ☐	N/A ☐
.1939 (a)(3)	Soil Wetness Condition Recorded?	Yes ☐	No ☐	N/A ☐
.1939 (a)(4)	Soil Depth to Rock or Parent Material Recorded When Encountered	Yes ☐	No ☐	N/A ☐
.1939 (a)(5)	Depth to Restrictive Horizons Recorded When Encountered?	Yes ☐	No ☐	N/A ☐
.1939 (a)(6)	Sufficient Available Space Recorded?	Yes ☐	No ☐	N/A ☐
.1937(m)	Are the Profile Locations Shown?			
.1939(a)	Are the S/PS Profiles in system & in repair area?	Yes ☐	No ☐	N/A ☐
& .1945(b)	Number of auger borings made: _____ Were sufficient auger borings made?	Yes ☐	No ☐	N/A ☐
.1939(d), .1955, .1956, .1957	LTAR	Yes ☐	No ☐	N/A ☐
	Improvement Permit/Construction Authorization			
.1937(g) 130A-336(a)	Proposed System Type stated-Initial	Yes ☐	No ☐	N/A ☐
.1945(b)	Proposed System Type stated-Repair	Yes ☐	No ☐	N/A ☐
130A-336 (a)(3)	System location identifiable by setbacks - Initial	Yes ☐	No ☐	N/A ☐
.1937(g) .1945(b)	System components shown – Initial	Yes ☐	No ☐	N/A ☐
.1945(b)	Repair area shown	Yes ☐	No ☐	N/A ☐
.1937 (f)(g)	Does System design match facility, flow & WWcharacteristics?	Yes ☐	No ☐	N/A ☐
.1937 (f)(g)	Is System design consistent with soil/site conditions?	Yes ☐	No ☐	N/A ☐
.1937 (f)(g)	Is the System located in the approved area?	Yes ☐	No ☐	N/A ☐
130A-336(a)	Is the Design flow (gpd) indicated?	Yes ☐	No ☐	N/A ☐

130A-336(a)	Number of Bedrooms, employees, seats, etc. indicated?	Yes ☐	No ☐	N/A ☐
.1937(g)	Trench depth indicated?	Yes ☐	No ☐	N/A ☐
.1937(g)	Trench width indicated?	Yes ☐	No ☐	N/A ☐
.1937(g)	Trench length indicated?	Yes ☐	No ☐	N/A ☐
130A-336(a)(1)	Proposed/existing well shown?	Yes ☐	No ☐	N/A ☐
130A-336(a)(1)	Property line lengths shown?	Yes ☐	No ☐	N/A ☐
130A-336(a)	Facility/appurtenance setbacks shown from fixed points?	Yes ☐	No ☐	N/A ☐
	Operation Permit			
.1937(i)	System type as described in table V(a) of rule .1961	Yes ☐	No ☐	N/A ☐
.1937(i)	Conditions for system performance, operation, maintenance, monitoring and reporting.	Yes ☐	No ☐	N/A ☐

II. WASPS Review:

Construction authorization issued	Yes ☐	No ☐	N/A ☐
Installation approval issued	Yes ☐	No ☐	N/A ☐
Operation permit issued	Yes ☐	No ☐	N/A ☐
Other related documentation	Yes ☐	No ☐	N/A ☐

Items requiring correction/modification: _____

Comments:

_____

_____

_____

_____

_____

IA issued date: _____

OP issued date: _____

Review performed by: KL

Date performed: 9-408

3814 J Michelone

FEE: 100.00
DATE: 8-21-08
CRT I : Visa-appr 203948

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM
MECKLENBURG COUNTY - GROUNDWATER & WASTEWATER SERVICES
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

GWS – UES.APP 06/07

FILE #: 7069A

TYPE APPLCATION:

- [x] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A / M)
- [ ] ADDITION - RENOVATION OR GARAGE WITH NO MAJOR CHANGES (X)
- [ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
- [ ] COMMERCIAL OR INDUSTRIAL (N)

PERSON FILING APPLICATION:

NAME: MEL HYDER
ADDRESS: 16102 CRAMUR DRIVE
CITY: HUNTERSVILLE
STATE: NC ZIP: 28078
PHONE: 704 875 9560
ALTERNATE PHONE: 704 706 4400

PROPERTY OWNER:

NAME: MELVIN + SANDY HYDER
ADDRESS: SAME
CITY:
STATE: ZIP:
PHONE:
ALTERNATE PHONE:

JOB LOCATION INFORMATION

TAX/PARCEL #: 001-023-27
STREET ADDRESS: 16102 CRAMUR DRIVE
CITY: HUNTERSVILLE NC
STATE: NC ZIP: 28078
SUBDIVISION OR MOBILE HOME PARK NAME: NORMAN SHORES
LOT #: 10, PART OF LOT 11

TOWNSHIP:

- [ ] 0-MECKLENBURG
- [ ] 1-CHARLOTTE
- [ ] 2-DAVIDSON
- [ ] 3-CORNELIUS
- [ ] 4-PINEVILLE
- [ ] 5-MATTHEWS
- [x] 6-HUNTERSVILLE
- [ ] 7-MINT HILL

WATER SUPPLY:

- [x] MUNICIPAL (M)
- [ ] COMMUNITY (C)
- [ ] PRIVATE WELL (P)
- [ ] SHARED WELL (S)
- [ ] OTHER 'SPRINGS' (O)

RESIDENTIAL PROPERTY TYPE:

- [x] HOUSE (H)
- [ ] MODULAR HOME (M)
- [ ] MULTIPLE FAMILY (U)
- [ ] SINGLE MOBILE HOME (S)
- [ ] DOUBLE WIDE (D)
- [ ] OTHER (O)

OCCUPANCY (both fields are required):

NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 2

COMMERCIAL / INDUSTRIAL PROPERTY TYPE:

TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:

INDUSTRIAL WASTES? [ ] YES [ ] NO
UNDERGROUND STORAGE TANKS? [ ] YES [ ] NO

ADDITION TYPE ATTACHED TO EXISTING STRUCTURE:

- [x] BEDROOM
- [x] BATHROOM
- [ ] KITCHEN
- [ ] DINING ROOM
- [ ] LIVING ROOM
- [ ] DEN
- [ ] GARAGE
- [ ] SUNROOM
- [ ] PORCH
- [ ] DECK
- [ ] OTHER

ADDITION TYPE DETACHED FROM EXISTING STRUCTURE:

- [ ] DETACHED GARAGE
- [ ] DETACHED GARAGE WITH PLUMBING
- [ ] POOL HOUSE
- [ ] SHOP
- [ ] BARN
- [ ] STORAGE SHED
- [ ] DETACHED PORCH / DECK
- [ ] OTHER

*The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application, acknowledges that the contents of same are true, and authorizes the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Owner's/Agent's Signature — Date: 8/21/08

*The undersigned, an authorized agent of the Mecklenburg County Health Department, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws and Rules for Sanitary Sewage Collection, Treatment and Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

- No work shall be conducted on the septic tank system until an installation, construction, alteration and/or repair approval is granted y this Department.
- This permit is not transferable.

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

O.K. to use existing system for a bedroom + bathroom addition. House will remain 4 Bedrooms

EHS Signature — Date: 9/2/08

TO: Jeremy Michelone, R.S,

FROM: Mel Hyder
16102 CRAMUR DRIVE
HUNTERSVILLE, NC 28078

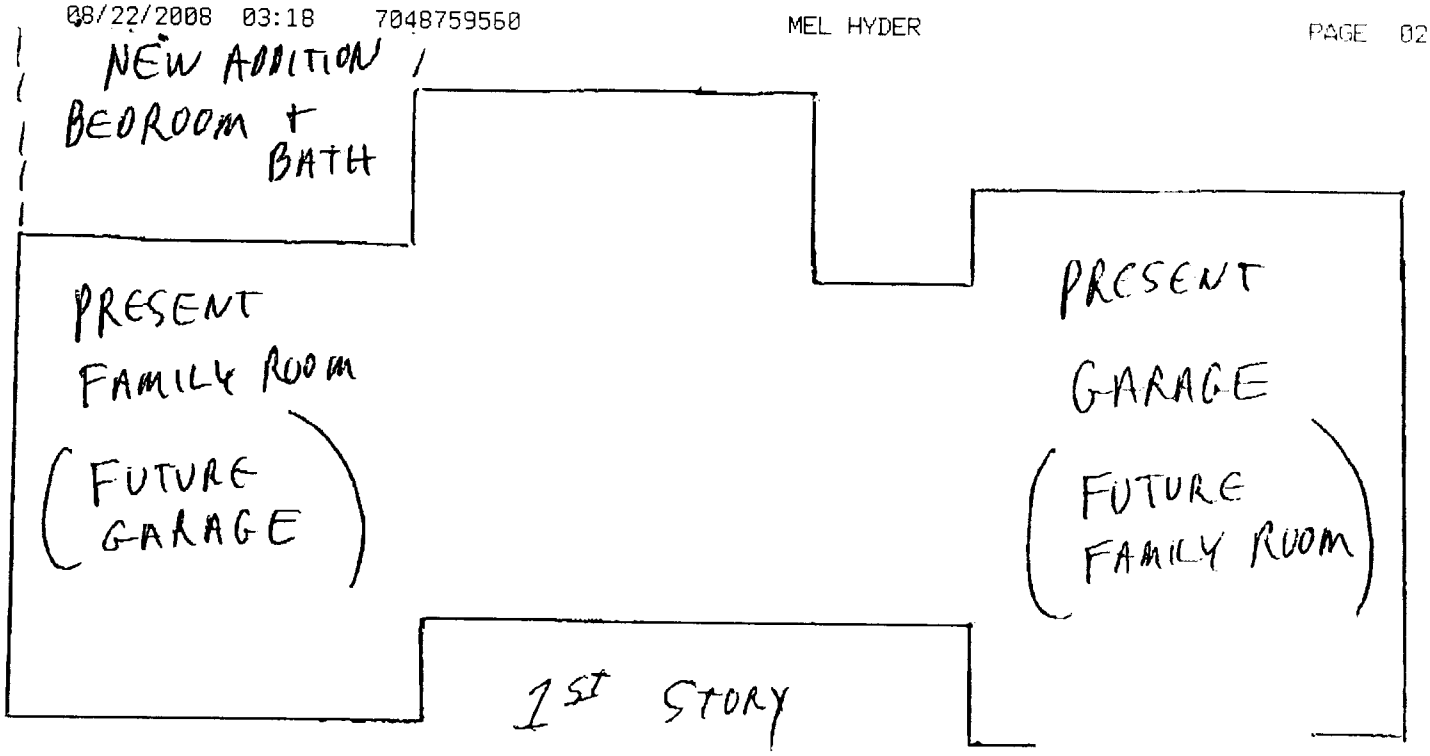
Jeremy,

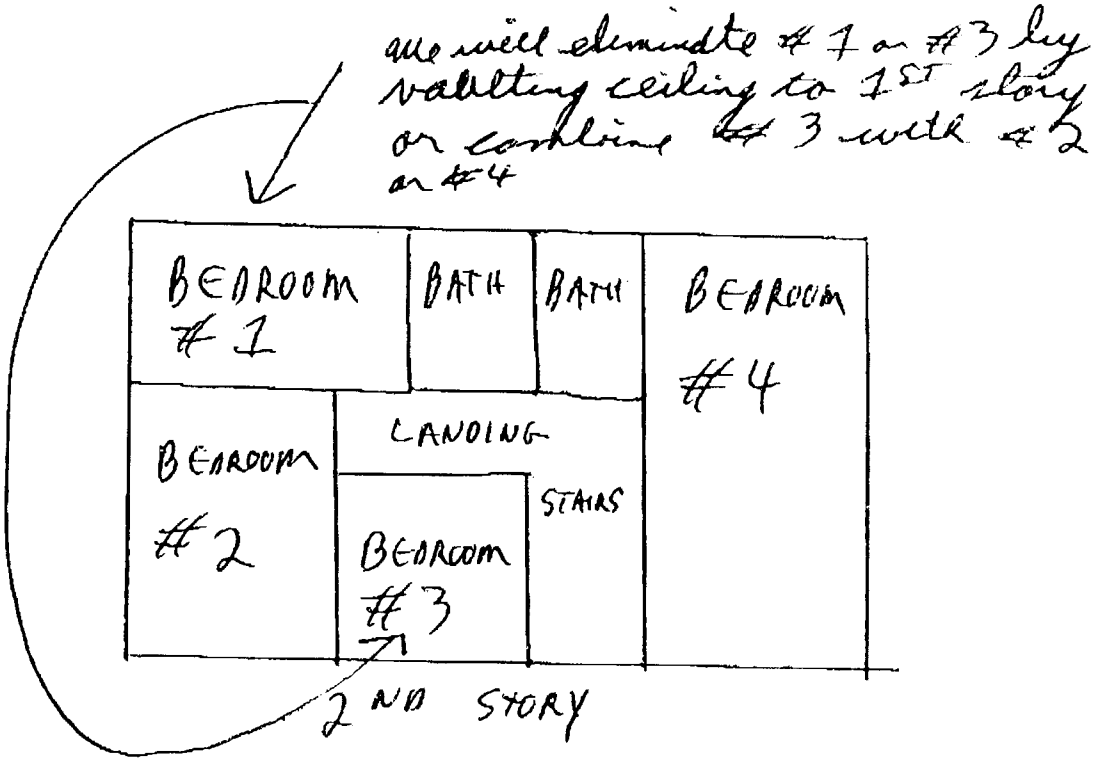
Here are rough sketches of our house and our plans.

We will call you next Friday for an appointment when we return to town.

Have a great weekend,

MH





Jeremy,

We have not engaged an architect yet because we need to be sure what we can do before we go to all of that expense. We plan to eliminate bedroom #1 or #3 and vault the ceiling to the 1st story. Or we will combine #3 with #2 or #4. But we will only have 4 bedrooms in final plans regardless of which plan we ultimately use.

THIS IS TO CERTIFY THAT ON THE 30TH DAY OF NOVEMBER 83
PROPERTY SHOWN ON THIS PLAT AND THAT THE IMPROVEMENTS ON THE
ANY ARE AS SHOWN HEREON. REVISED MARCH 20, 1985 TO UPDATE
APRIL, 18, 1986 UPDATE

REVISED SEPTEMBER 17TH, 1990, TO UPDATE.

R. B. [illegible]
REGISTERED SURVEYORS
212 East Independence Blvd.
Charlotte, N.C. 28204
Tel. (704) 376-2186

NORTH

E.I.P. N 36-30-20E 75.16 E.I.P.

S67-21E 40.10

N.I.P.

S81-19E

LOT 10

LAKE NORMAN

LOT 9

23.3 SCREEN PORCH 12.0 6.0 22.0 6.0

18 x 14.7 OVERHANG 14.7

FRAME UTILITY BLDG. 12.1 10.2 12.1 10.2

38.0

36.0

BRICK & FRAME SPLIT LEVEL # 16102

24.2

CONCRETE DRIVE

N.I.P.

15.0' 22.9 5.8 COV. 37.1 37.1 5.8

9 Ft. From Steps to Side Walk

RIGHT CORNER OF Bdg. 1.0 From Walk

24.6'

232.29

N 60-25-55W

118.0'

DRAIN FIELD

S25-26-10E 152.25

LOT 11

CONCRETE DRIVE

E.I.P.

A = 30.0

R = 400

E.I.P.

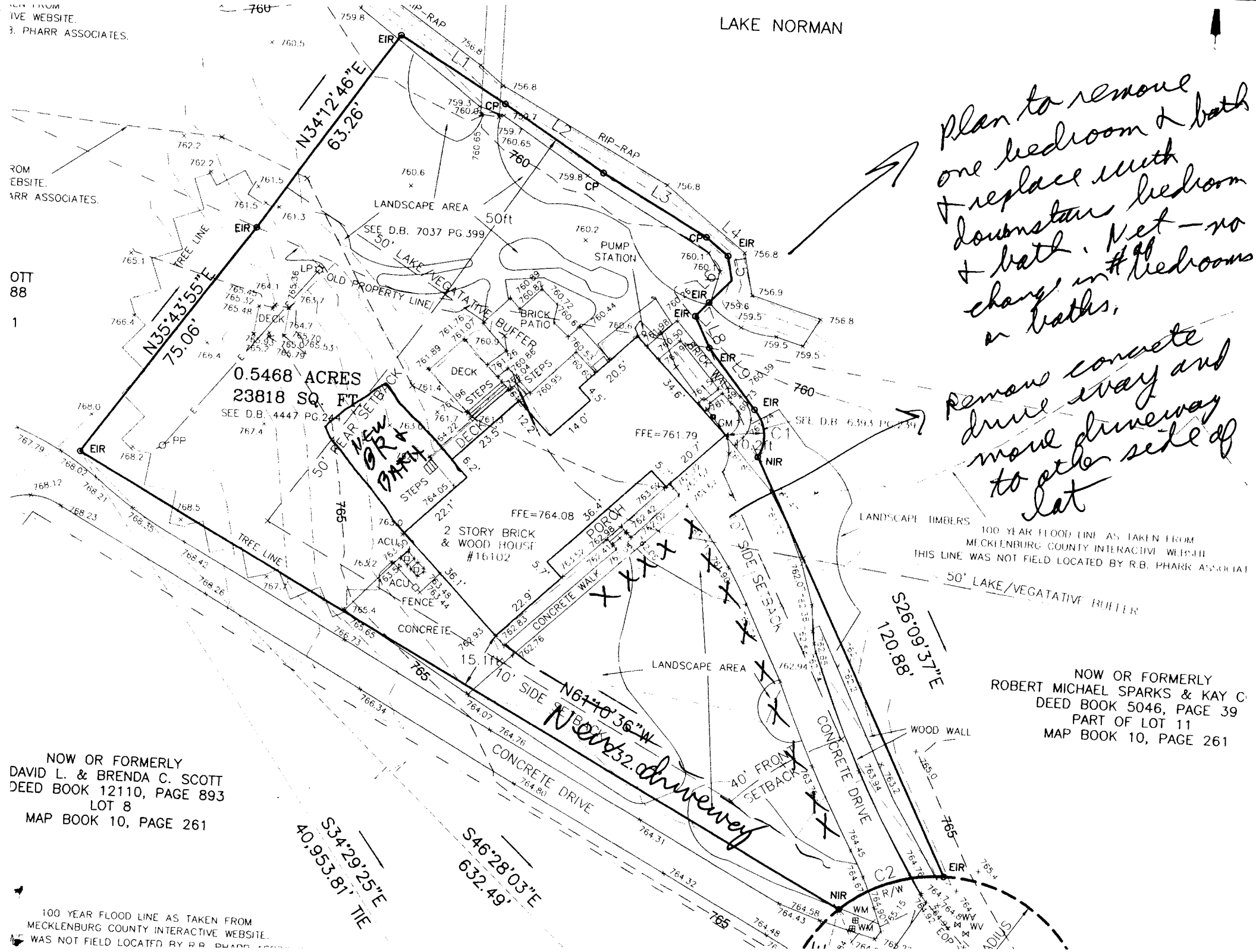
CRAMUR DRIVE

28.5 12.3 22.5 10.5 22.5 18.0 28.5 4.0

2.8

78.0 PIER 78.0 WOOD 6.0

NORTH CAROLINA REGISTERED 2745 LAND SURVEYOR R. B. PHARR


LAKE NORMAN
Plan to remove one bedroom & bath & replace with downstairs bedroom & bath. Net — no change in # bedrooms or baths.
Remove concrete drive way and move driveway to other side of lot
N34°12'46"E
63.26'
N35°43'55"E
75.06'
0.5468 ACRES
23818 SQ. FT.
SEE D.B. 4447 PG.244
SEE D.B. 7037 PG.399
SEE D.B. 6393 PG.739
50' REAR SETBACK
50' LAKE/VEGATATIVE BUFFER
OLD PROPERTY LINE
LANDSCAPE AREA
PUMP STATION
BRICK PATIO
DECK
STEPS
NEW GR+ BATH
2 STORY BRICK & WOOD HOUSE #16102
FFE=764.08
FFE=761.79
PORCH
CONCRETE WALK
BRICK WALK
LANDSCAPE TIMBERS
TREE LINE
FENCE
CONCRETE
CONCRETE DRIVE
WOOD WALL
10' SIDE SETBACK
20' SIDE SETBACK
40' FRONT SETBACK
15.11'
N61°10'36"W
132.driveway
S26°09'37"E
120.88'
S34°29'25"E
40,953.81' TIE
S46°28'03"E
632.49'
100 YEAR FLOOD LINE AS TAKEN FROM MECKLENBURG COUNTY INTERACTIVE WEBSITE.
THIS LINE WAS NOT FIELD LOCATED BY R.B. PHARR ASSOCIATES.
NOW OR FORMERLY
DAVID L. & BRENDA C. SCOTT
DEED BOOK 12110, PAGE 893
LOT 8
MAP BOOK 10, PAGE 261
NOW OR FORMERLY
ROBERT MICHAEL SPARKS & KAY C
DEED BOOK 5046, PAGE 39
PART OF LOT 11
MAP BOOK 10, PAGE 261
C1
C2
EIR
NIR
CP
LP
PP
CM
WM
WV
R/W
EOP

Mecklenburg County
North Office
(LUESA)
704-432-2520

Septic Questions
704-336-5572
(Mecklenburg County)

July 31, 2008

Melvin & Sandra Hyder
16102 Cramur Drive
Huntersville, NC 28078

RE: 16102 Cramur Drive

Dear Mr. & Mrs. Hyder,

This letter is in response to our meeting regarding the regulations for your property as they pertain to renovation of the existing home. There are several sets of regulations that apply to the existing home. These are floodplain regulations, 50' undisturbed buffer from Lake Norman regulations, and non-conforming structure regulations.

The survey for your property dated July 16, 2008, shows that a portion of your property and the existing home is located within the 100 year flood line. Please see attached email correspondence with Mecklenburg County LUESA personnel, Melonee Brock and Tim Ruane. Please contact them for any additional information regarding home restoration in the flood plain and flood certification and flood insurance information. I have also attached the application for amendments to the flood plain that was provided by Tim Ruane.

The property is located in the Lake Norman Watershed Critical Area which requires a 50' undisturbed buffer from the 760 contour of Lake Norman. Article 3.3.3 Lake Norman Watershed Overlay District states:

.2 Exceptions to Applicability:

a) Existing development, as defined in Section 12.2.3, is not subject to the requirements of the Lake Norman Watershed Overlay District. Expansions to structures classified as existing development must meet the requirements of this section, however the built-upon area of the existing development is not required to be included in the impervious area calculations.

Therefore, you may not expand the existing structure, or increase the heated square footage in the 50' undisturbed buffer. This would prohibit expansion of heated square footage in the brick patio area and the portion of the front porch in the buffer area. Further, switching the garage and living room of the home and taking out the existing drive and moving it to the other side would remove impervious area from the 50' buffer and make the property more conforming to the buffer regulations. You would be permitted to make this change.

Because the home is located in the 50' undisturbed buffer and the floodplain, the property is non-conforming and would be subject to the regulations for non-conforming structures in Article 11.5.3 of the Huntersville Zoning Ordinance which states:

> a) Normal repair and maintenance may be performed to allow the continuation of a nonconforming structure; this shall include the replacement of a manufactured home with another manufactured home of same or greater width.

Therefore, you may repair your home so that you can continue to live in it. Raising the sunken areas of the home that contain the living room and garage so that the first floor of the home is flat to allow for wheelchair access is a natural progression of a home which would qualify as normal repair and maintenance.

If you have any questions or need additional information, feel free to contact me at (704) 875-7000.

Sincerely,

Lisa McCarter

Lisa McCarter
Planner 1
Town of Huntersville

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	08/21/08	**Amount:**	100.00
Receipt #:	58691	**Tendered:**	0.00
Check / Auth #:	VISA 203948	**Returned:**	0.00
Received By:	GLADNAG		

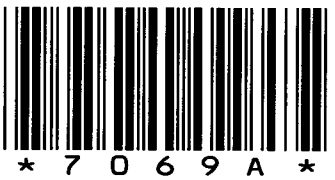
Account Information

Account #:	200000
Contractor:	HYDER MELVIN & SANDY
Attn:	
Address:	16102 CRAMUR DR
Address:	
City/State/Zip:	HUNTERSVILLE, NC 28078

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	MH Exc/Add/Repl w/o System Mod 16102 CRAMUR DR		1	100.00	100.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
50.00					



16102 CRAMUR DR

00102327

6/25/2007

duponbj

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

APPLICATION FOR AN IMPROVEMENT PERMIT

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

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

(OFFICE USE ONLY)
FILE: 7069A
TC: _____
SERIAL: № 20826
☒ L ☒ CRT

JOB LOCATION

① ADDRESS: 16102 Cramer Drive (STREET NO. / STREET) ② FILE: _____
③ JURISDICTION: _____ ④ TAX PARCEL NO.: 001-023-00
⑤ SUBDIVISION: Norman Shores ⑥ LOT: 10 ⑦ BLOCK: _____

OWNER

⑧ NAME: Melvin (FIRST) H. (MIDDLE) Hyder (LAST)
⑨ MAILING ADDRESS: 16102 Cramer Drive
⑩ CITY: Huntersville ⑪ STATE: NC ⑫ ZIP: 28078
⑬ PHONE: (WORK) 383-7535 ⑭ (HOME) 875-9560

REQUEST

This request is for a(n):

⑮ ☐ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☒ Other (specify) attached garage

DESIGN CRITERIA

System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 4
㉕ Type? _____
㉓ Maximum occupancy? 4
㉖ Maximum number of employees? _____
㉔ Basement? ☐ yes ☒ no
㉗ Maximum number of seats? _____

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☑ Individual well
B ☐ Municipal system
C ☐ Community well
D ☐ Community system

㉙ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Melvin H. Hyder
Date: 10/9/90

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

... No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by this Department.

... This permit is not transferable, and shall become null and void 36 60 months from the date of issuance.

use existing system - NP

Tim W Nicholson — Environmentalist — 10/17/90 Date

Director or Authorized Section Head — 10-18-90 Date

*This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 10-9-90

Name/Company: Melvin H. Hyder

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: App. for Imp -- Diff. garage add.
16102 Cramer Dr.

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
OCT 9 1990

File # 1269A
P.P. 001-023-00

Fee: $ 15.00 $130 #125.00

NOTICE:

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

Completed by

Collected by

APPLICATION FOR AN IMPROVEMENT PERMIT

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

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

(OFFICE USE ONLY)
FILE: 7069A
TC: _____
SERIAL: NP 20326
☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 16102 (STREET NO.) Cramur Drive (STREET) ② FILE: _____
③ JURISDICTION: _____ ④ TAX PARCEL NO.: 001-023-00
⑤ SUBDIVISION: Norman Shores ⑥ LOT: 10 ⑦ BLOCK: _____

OWNER

⑧ NAME: Melvin (FIRST) H. (MIDDLE) Hyder (LAST)
⑨ MAILING ADDRESS: 16102 Cramur Drive
⑩ CITY: Huntersville ⑪ STATE: NC ⑫ ZIP: 28078
⑬ PHONE: (WORK) 383-7535 ⑭ (HOME) 875-9560

REQUEST

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⑰ ☐ Authorization for mobile home exchange
⑱ ☑ Other (specify) attached garage

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⑲ ☑ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 4
㉕ Type? _____
㉓ Maximum occupancy? 4
㉖ Maximum number of employees? _____
㉔ Basement? ☐ yes ☐ no
㉗ Maximum number of seats? _____

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☑ Individual well
B ☐ Municipal system
C ☐ Community well
D ☐ Community system

㉙ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Melvin W. Hyder
Date: 10/9/90

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

... No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by this Department.

... This permit is not transferable, and shall become null and void 36 months from the date of issuance.

60

use existing system. NP

Tim W Nicholson 10/17/90
Environmentalist Date

10-18-90
Director or Authorized Section Head Date

*This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.

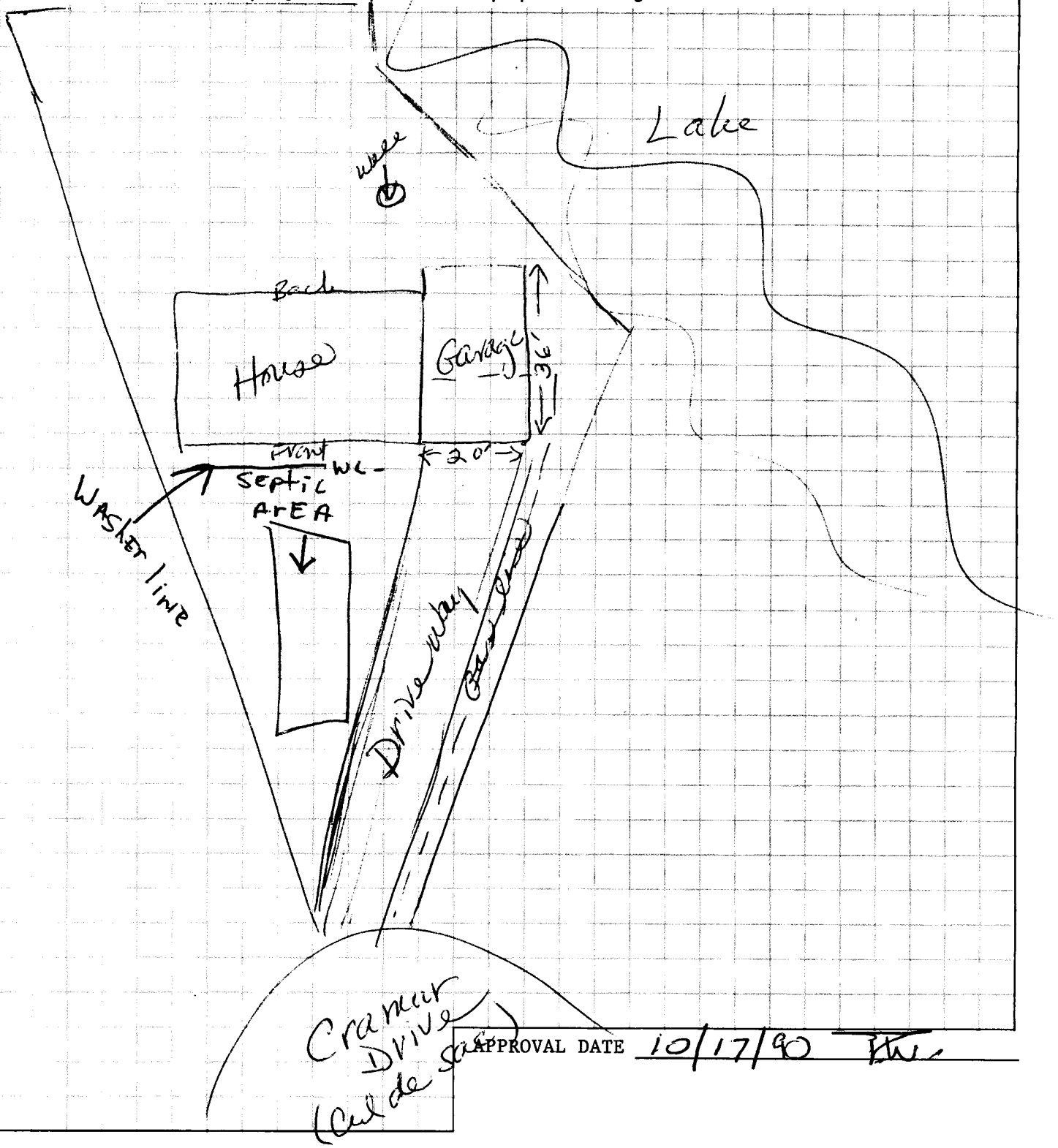
PROPOSED PLOT PLAN

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

FILE: 7069A

TC: 001-023-00

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



APPROVAL DATE 10/17/90

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

Put on LD 9/5/08 11:15

NOT ON LD
9/10/08
1:01 pm