

11732 ABERNATHY RD

02310206

12/27/2007

duponbj

Groundwater and Wastewater Services File Imaging Project
May 2007
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Add. 50
CK #1052
VLD
4-22-99

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

410

X CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102 2307B

Date: 4/22/99

PERSON FILING APPLICATION:
NAME: DEASON (last) CONNIE (first) B (mi) 201-[redacted]1625
ADDRESS: PO Box 645 PHONE: 704 948-4003
CITY: ALEXIS STATE: NC ZIPCODE: 28006

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 023102027O
STREET ADDRESS: 11732 Abernethy Rd

PROPERTY OWNER:
NAME: Mustin (last) LESLIE (first) H (mi)
ADDRESS: 1700 Tench St PHONE: (704) 394-0870
CITY: CHARLOTTE STATE: NC ZIPCODE: 28216

ZONING:

Township (check one):
[] 0 Mecklenburg County [] 2 Davidson [] 4 Pineville [] 6 Huntersville
[] 1 Charlotte [] 3 Cornelius [] 5 Matthews [] 7 Mint Hill

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: LOT SIZE (in acres):

TYPE APPLICATION (check one):

[redacted]

[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (N)

[X] ADDITION GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
Cabana

[redacted]

RESIDENTIAL PROPERTY (Type Building, check one):
[] SINGLE MOBILE HOME (S) [] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [] MODULAR HOME (M) [X] OTHER CABANA (O)

NUMBER BEDROOMS: 04 NUMBER OCCUPANTS:

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ___ Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type _____

WATER SUPPLY (check one):
[] Community (C) [] Shared Well (S)
[X] Municipal (M) [] Other 'spring' (O)
[] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[] Swimming Pool [] Jacuzzi [] Stable/Barn [] Workshop [] None
[] Garage [] Storage Building [] Deck/Patio [] Bedrooms [] 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 agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Connie B Deason Date: 4-22-99

NOTICE:

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 by this Department.

...This permit is not transferable.

... O.K. to use existing system.

[] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Jeff Knight 4/26/99
Environmentalist Date

WWATER : 12279

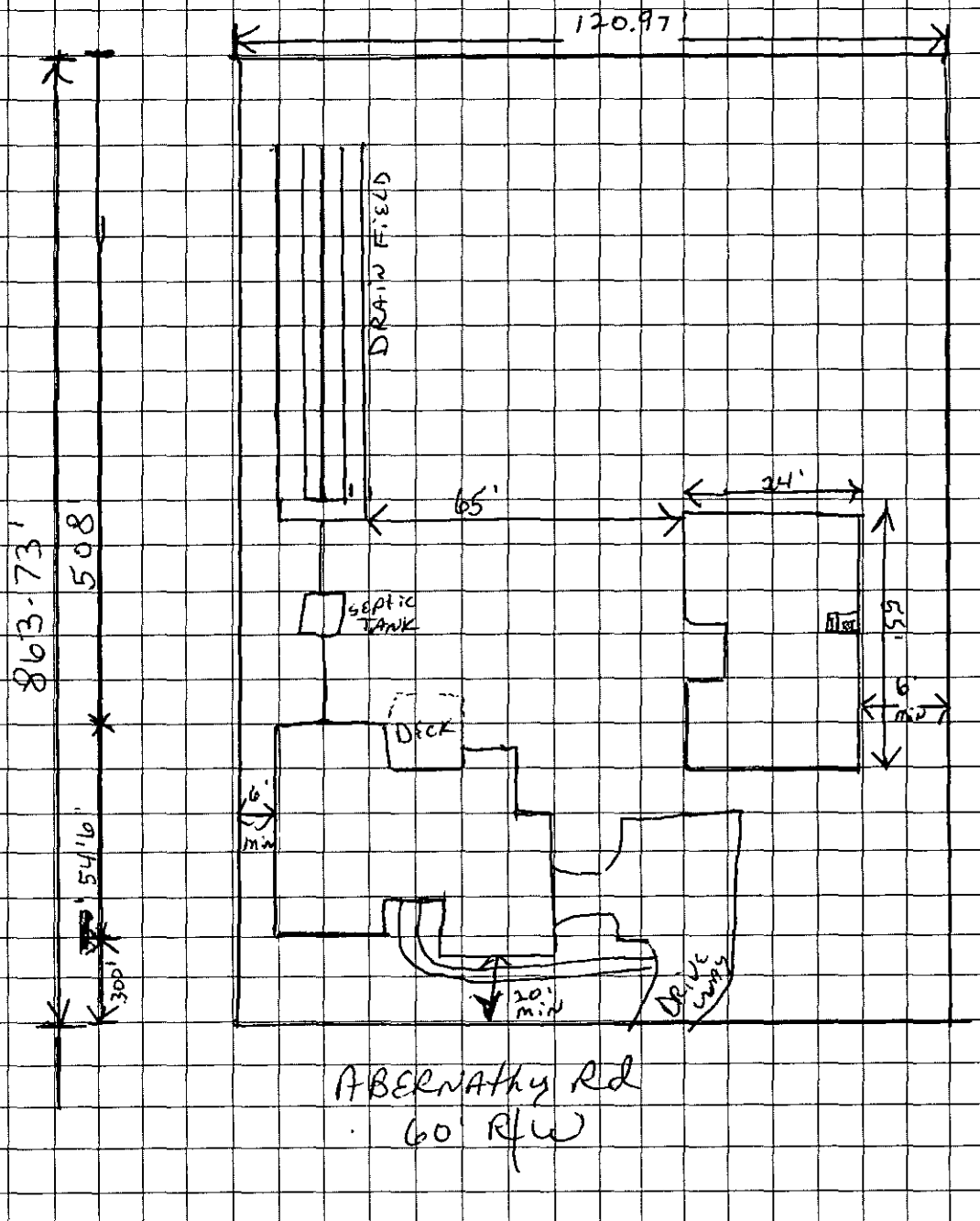
PROPOSED PLOT PLAN

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

FILE: 2307B

TC: 023-102-02

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.



Connie B Ocasio
OWNER/AGENT SIGNATURE

DATE 4-22-99

APPROVAL DATE _____

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

pd. 100.00 ck# 10529 pd in full VLW 4/22/99

CERTIFICATE OF COMPLETION/OPERATION PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 2307B DATE: 3/31/99

TC: 023-102-02 ☒ L ☐ CRT

SERIAL Nº 17850

Name of Owner Connie B. Deason Juris.: Meck.

Address of Property 11732 Abernathy Rd.

Inspection Data:

Tank Material P.C.C.

Total Length of Drainfield 535 ft.

Number of Lines 5 @ 107 ft.

Cover Depth 12"

Water Supply Source Municipal

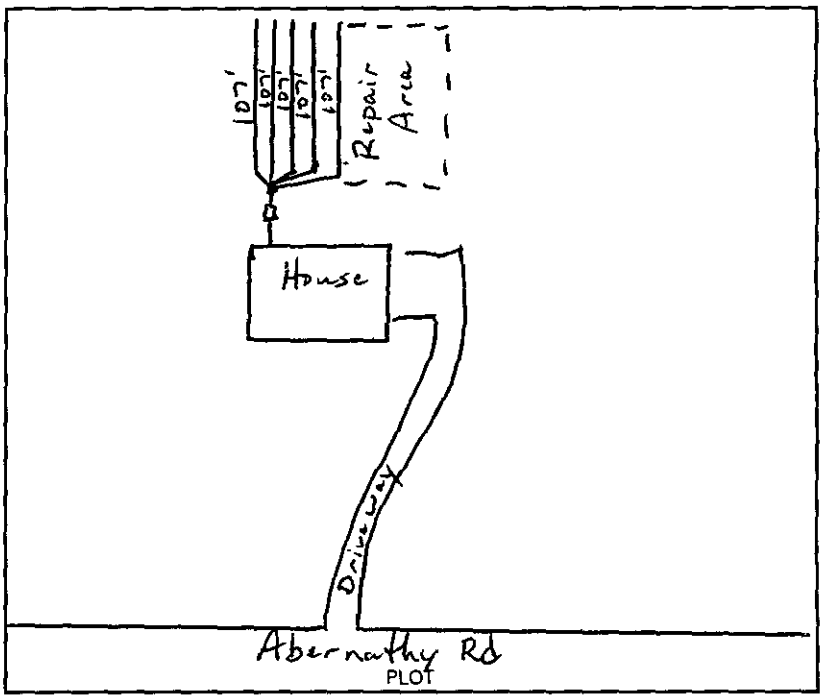
Distance to Water Source >100 ft.

Excavation Inspected 3/26/99
D-Box checked 3/31/99

Tank(s) Inspected 3/26/99

Wash Line Inspected N/A

High Water Alarm Inspected N/A.



Design 1500 S.T. Conv, 1600 S.F.T. 12 G. CTR# Thornton & Thornton

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☒ installed or constructed ☐ altered or repaired

☒ in accordance with the permit issued ☒ as detailed in the plot above

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. This issuance of this

☒ Certificate of Completion ☒ 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. 1990 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/revocation of this permit.

COMMENTS: Designed for 4 bedroom residence. Type II c.

Jeff A. Knight
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

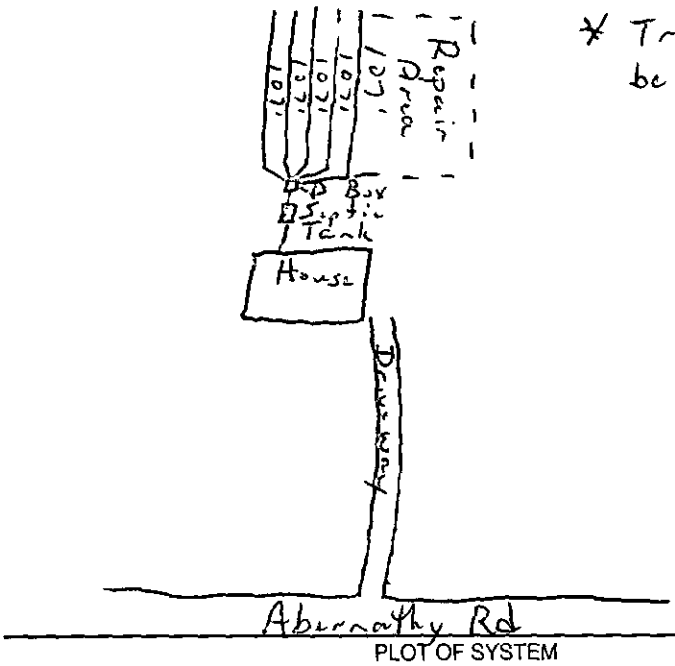
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 2307 B DATE: 3/25/99

TC: 023-102-02 X L

SERIAL Nº 18053

Permission is hereby given to ✓ (Install or Construct) Alter or Repair the individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge as specified herein at the described location. This permit is granted based upon the information supplied in the application dated 11/4/97. All work shall be completed on or before April 25, 1999, after which date this permit 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 the granting of this permit. A Certificate of Completion or 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 or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank N/A gallons

Tank Construction P.C.C.

Trench Depth As shallow as possible

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous Yes

Total Line Length 535 feet

Number of Lines 5

Depth of Stone 12 inches

Distance from House >5 feet

Distance from Property Line >10 feet

Distance from Well >100 feet

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

NAME OF OWNER Connie B. Deason

LOCATION OF PROPERTY 11732 Abernathy Rd

Comments: 1) No more than 1/4" fall per 10 ft in trenches. 2) Stepdowns may be necessary to maintain proper trench depth and cover depth. 3) System designed for a 4 bedroom residence

Jeff A. Knight
Environmental Health Specialist

WHITE - HEALTH DEPARTMENT's COPY • CANARY - E.H.S. COPY • PINK - OWNER OR AGENT's COPY

chk # 811

FEE: 100.00 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: 11/17/97 **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

100 A

DATE: 11-17-97

PERMIT NO: 2307B
PARCEL NO: 023-102-02 80

JOB LOCATION ADDRESS: 11732 Abernathy Road
PROPERTY OWNER: Connie B Jenston
BUILDING CONTRACTOR: Same
SUBDIVISION NAME:
AUTHORIZATION ISSUED BY: Randy B. Thomas Jr. RS DATE: 11-17-97
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 2307B, 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: See Conditions of Improvement Permit

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.

x Connie B Jenston 11-17-97
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

CK# 811

FEE: 100 AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION
DATE: 11/17/97 VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE 11/22/02

DATE: 11-17-97 PERMIT NO: 2307B
PARCEL NO: 023-102-02 to

JOB LOCATION ADDRESS: 11732 Abermarle Road
PROPERTY OWNER: Connie B Gordon
BUILDING CONTRACTOR: Same
SUBDIVISION NAME:
AUTHORIZATION ISSUED BY: Larry B. Dixon Jr RS DATE: 11-17-97
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 2307B, 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: See Conditions Of Improvement Permit

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.

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE 11-17-97 DATE

FEE: 180.00 CK# 808
DATE: 11/4/97 gc

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 #: 23078

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 023-102-02 P.O.

STREET ADDRESS: 11732 Abernathy Rd

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: 6

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: 3017

NUMBER OF BEDROOMS: 4 NUMBER OF OCCUPANTS:

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: L. H. Mustin

NAME: Mustin (LAST) Leslie (FIRST) H. (MI)

ADDRESS: 1700 Tenel st

CITY: Charlotte STATE: NC ZIP 28211

DAYTIME PHONE: (704) -394-0870

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: Deason (LAST) Connie (FIRST) B (MI)

DAYTIME PHONE: (704) 581-2797

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: Connie B Deason DATE: 11-4-97

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

Permit Number: 23076 CONDITIONS OF IMPROVEMENT PERMIT Tax Number: 023-102-02 (8)

The 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.

Basement	___ Yes	✓ No	___ Partial Basement	
Type Primary Wastewater System Type (circle one): 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: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1	
3 Long-term acceptance rate	480 Max gallons/day wastewater flow	1605 Absorption Area (sq ft)	9' Trench spacing (min. on centers)	
N/A MUNICIPAL Serviced by private well	1500 Gallon septic tank	535 Total trench length (ft)	36" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)	
4 Bedrooms in residence	___ Gallon pump tank	12 Depth of stone		
Any surface waters present:	Type:	Minimum separation distance:		
Site modifications required:				
Additional Conditions: If system cannot be installed as shown on plot plan and bottom of trench be less than 3 feet deep and pump will be required.				
Repair Area System Type Type (circle one): 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: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1	
1605 Absorption Area (Sq ft) 535 Total Trench Length (Ft)	12 Depth of Stone Trench	9' Trench spacing (min. on centers)	36" Maximum Trench Depth	
For existing system, enter the year originally installed:				

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 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.

Larry L. Thompson, RS. 11-17-97
DEHNR Authorized Agent Date

Connie B. Dejesus 11-17-97
Owner/Agent Signature Date

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

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

PROPOSED PLOT PLAN

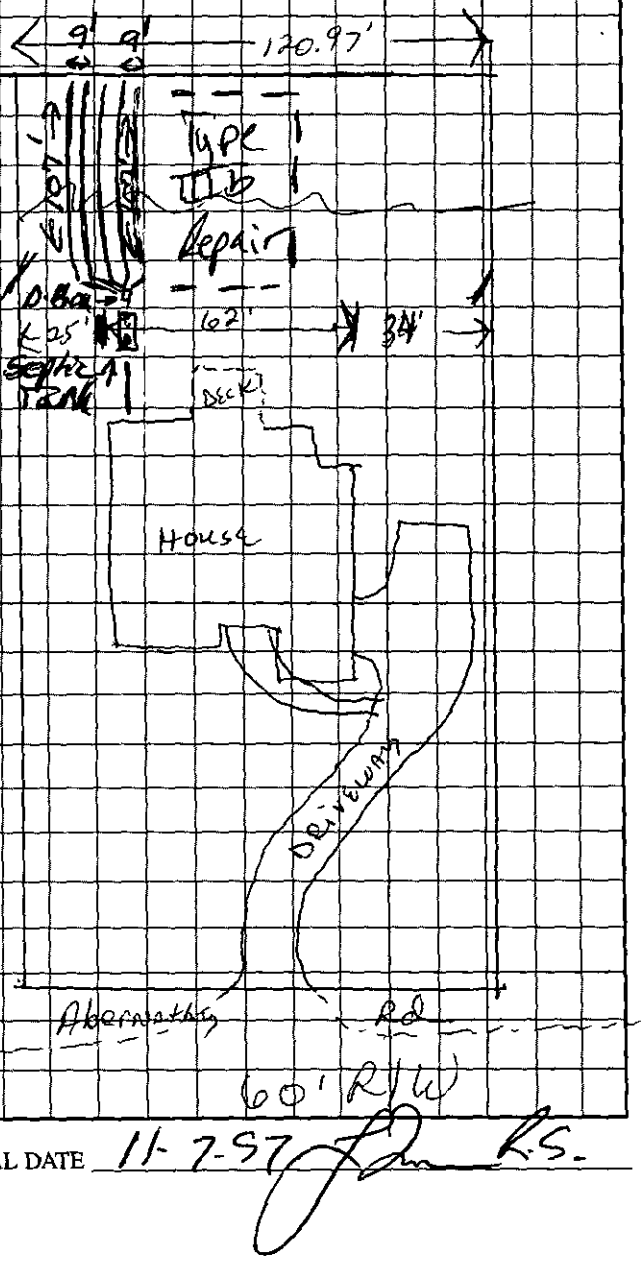
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 2307B

TC: 023-102-02 P8

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.

- 1500 gallon septic tank
- D-Box
- (5) 3'w x 10?'l x 12" stone
- Keep drainlines level and on contour
- Max trench depth of 36"
- Plumbing from house must be held high enough to allow the installation of this system to be ≤ 3' deep. A.I.A station will be required if this cannot be achieved.



Connie B Deaso
OWNER/AGENT SIGNATURE

DATE 11-4-97

APPROVAL DATE 11-7-97 K.S.

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

ON-SITE WASTEWATER SECTION

COUNTY:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM (New)

#/ 230713
PO 023-102-02

OWNER: L. K. Mueller APPLICANT:
ADDRESS: 1220 Tench St; Charlotte APPLICATION DATE: DATE EVALUATED:
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949): 480gpd PROPERTY SIZE: Approx. 34
LOCATION OF SITE: 11732 Abernathy Pkwy 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 % (Slopes 2-8%)	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	A	0-6"	gr/scl	Fr/SEXPlss/SP	7 46" TO soil wetness	48"	N/A	None	PS .39 1F2 IV
		6-48"	sBK/lC	Fi/SEXPlsP					
2	A	0-5"	gr/scl	Fr/SEXPlss/SP	7 48" TO soil wetness	48"	N/A	None	PS .39 1F2 IV
		5-46"	sBK/C	Fi/SEXPlsP					
3	A	0-6"	gr/scl	Fr/SEXPlss/SP	7 48" TO soil wetness	48"	N/A	None	PS .39 1F2 IV
		6-48"	sBK/C	Fi/SEXPlsP					
4	A	0-5"	gr/scl	Fr/SEXPlss/SP	7 48" TO soil wetness	48"	N/A	None	PS .39 1F2 IV
		5-48"	sBK/sC	Fi/SEXPlsP					
5	A	0-3"	gr/scl	Fr/SEXPlss/SP	7 48" TO soil wetness	48"	N/A	None	PS .39 1F2 IV
		3-34"	sBK/sC	Fi/SEXPlsP					
		34-48"	sBK/scl	Fr/SEXPlss/SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): Provisionally Suitable

EVALUATED BY: W. A. Marlin 11-13-97
OTHER(S) PRESENT: LSS

COMMENTS: 100% Repair

LEGEND

use the following standard abbreviations

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

OTES

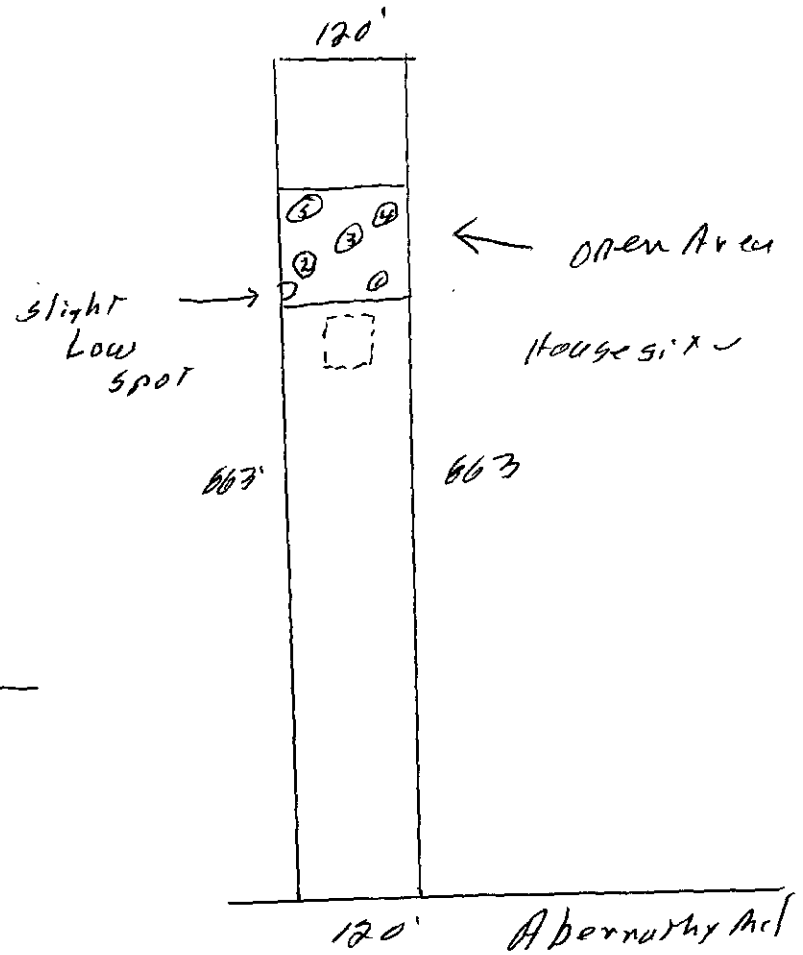
ORIZON DEPTH	In inches below natural soil surface
EPTH OF FILL	In inches from land surface
ESTRICTIVE HORIZON	Thickness and depth from land surface
PROLITE	S(suitable) or U(unsuitable)
OIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designatic
LASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

valuation of saprolite shall be by pits.

ong-term Acceptance Rate (LTAR): gal/day/ft²

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

230713



ON-SITE WASTEWATER SECTION

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

COUNTY: _____ # 23013 PO 023-102-02

OWNER: L. H. Mueller APPLICANT: _____
ADDRESS: 1720 Tower Dr, Charlotte APPLICATION DATE: _____ DATE EVALUATED: _____
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949): 480gpd PROPERTY SIZE: Approx. 3 A
LOCATION OF SITE: 11732 Abernathy Hwy 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 % (Slopes 2-8%)	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	R	0-6"	gr/scl	Fr/SEXPlss/sp	7 46" TO soil wetness	48"	N/A	None	PS .391 IV
		6-48"	SBK/C	Fi/SEXPlS/P					
2	R	0-5"	gr/scl	Fr/SEXPlss/sp	7 48" TO soil wetness	48"	N/A	None	PS .391 IV
		5-46"	SBK/C	Fi/SEXPlS/P					
3	R	0-6"	gr/scl	Fr/SEXPlss/sp	7 48" TO soil wetness	48"	N/A	None	PS .391 IV
		6-48"	SBK/C	Fi/SEXPlS/P					
4	R	0-5"	gr/scl	Fr/SEXPlss/sp	7 48" TO soil wetness	48"	N/A	None	PS .391 IV
		5-46"	SBK/SC	Fi/SEXPlS/P					
5	R	0-3"	gr/scl	Fr/SEXPlss/sp	7 46" TO soil wetness	48"	N/A	None	PS .391 IV
		3-34"	SBK/SC	Fi/SEXPlS/P					
		34-48"	SBK/scl	Fr/SEXPlss/sp					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): Provisionally Suitable
EVALUATED BY: W. A. Mueller 11-13-9
OTHER(S) PRESENT: LSS

COMMENTS: 100% Repair

LEGEND

use the following standard abbreviations

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

OTES

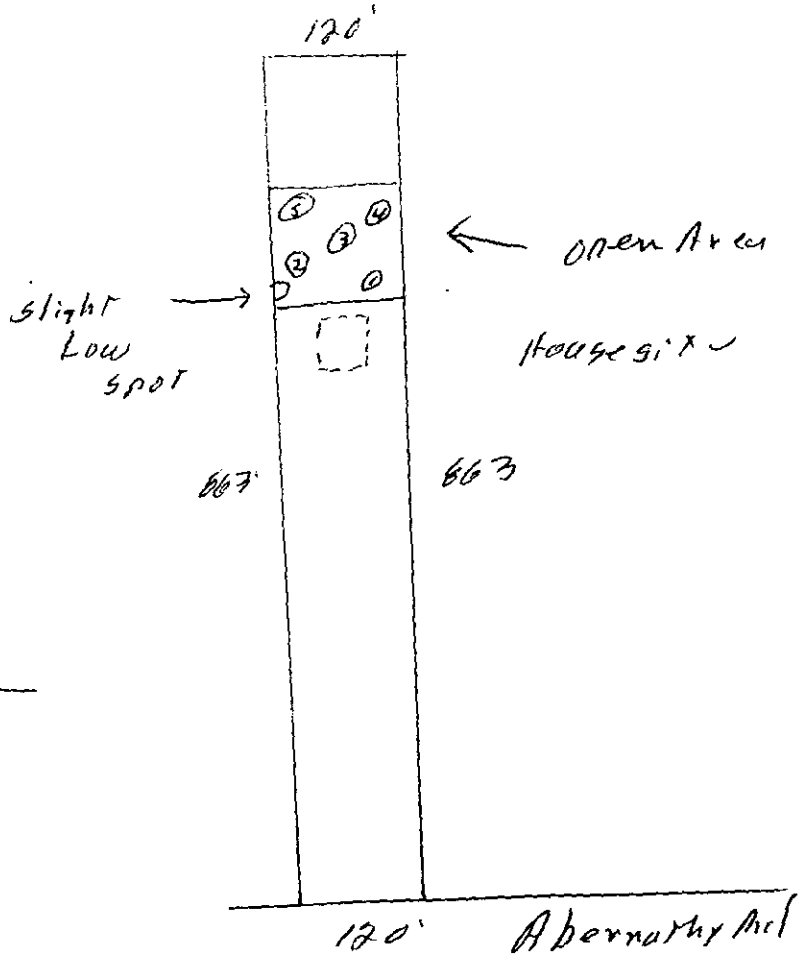
ORIZON DEPTH	In inches below natural soil surface
EPTH OF FILL	In inches from land surface
ESTRICTIVE HORIZON	Thickness and depth from land surface
APROLITE	S(suitable) or U(unsuitable)
OIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip design
LASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

valuation of saprolite shall be by pits.

ong-term Acceptance Rate (LTAR): gal/day/ft²

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

23073



GROUND
TECHNOLOGICAL
SERVICES
INC.

March 23, 1999

Mr. Charlie Thornton
Thornton and Thornton
2024 Colony Hill Drive
Charlotte, N.C. 28216

RE: 1179 Abernathy Road
Septic Suitability
Mecklenburg County, North Carolina
GTSI-90357

Dear Mr. Thornton,

Per your request, Ground Technological Services, Inc. (GTSI) has performed an evaluation for feasibility of on-site sewage treatment and disposal for the referenced project. These services consisted of hand auger borings and site reconnaissance at the referenced site for the period March 15, 1999. Parameters were evaluated using the systematic approach adopted by the State of N.C. "Laws and Rules For Sewage Treatment and Disposal Systems" guidelines.

The residential lot contained a multi-story single family residence under construction at the time of our reconnaissance. The nitrification field was also under construction in the rear of the residence, with the trenches filled with washed stone.

The rear of the referenced lot is relatively flat, with the trenches excavated to depths of approximately 3.5 to 4.0 feet in depth. No water supply wells were observed within 100 feet of the drainfield. No low areas, gullies or creeks were noted within 50 feet of the septic area. The referenced lot is considered SUITABLE with respect to topography and available space.

On March 15, 1999 a GTSI geologist performed a total of three (3) hand auger borings. Due to the above mentioned stone installation within the trenches, the borings were advanced at opposite ends of the trenches. The borings were plotted on the attached "Boring Location Plan" (Figure #1). Boring depths ranged from 42 to 48" below the trench bottom.

The soils were evaluated in the field with respect to soil morphology, soil depth, and soil wetness conditions. Soils encountered in the borings were predominately red sandy loams below a 2-4" surface layer of sandy clay to sandy clay loam.

According to the North Carolina Department of Environment and Natural Resources (NCDENR) septic guidelines, the soils encountered in the upper four feet were classified mostly as COARSE LOAMY TEXTURE SOILS (Soil Group II) and are considered SUITABLE with respect to soil texture. Near surface soils can be classified as CLAYEY TEXTURE SOILS (Group IV) and are PROVISIONALLY SUITABLE with respect to texture. The clayey soils near the surface of the trenches did not appear to be plastic, restrictive or expansive.

The referenced lot is considered SUITABLE with respect to soil depth, soil wetness conditions and restrictive horizons.

We understand a more detailed assessment was performed by the Mecklenburg County Health Department and an Improvement Permit was issued.

GTSI appreciates the opportunity to provide these services. If you should have any questions, please call us at your convenience.

Sincerely,
Ground Technological Services, Inc.

Geoff Underwood
Staff Geologist

Gary L. Gechter P.G.

NORTH CAROLINA LICENSED SEAL 996 GEOLOGIST GARY L. GECHTER

GTSI GROUND TECHNOLOGICAL SERVICES INC.

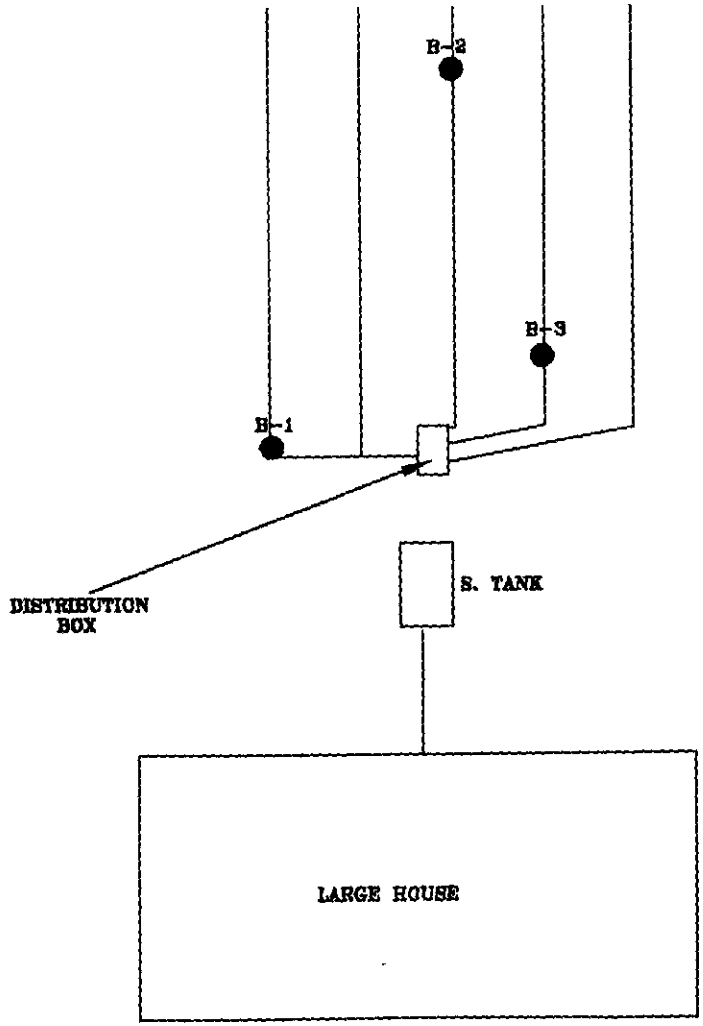
HAND AUGER BORING LOG

PROJECT: 1179 ABERNATHY ROAD
MECKLENBURG COUNTY, NC

PROJECT NO. GTSI-90357

1998 DATE	TEST LOC.	DEPTH INCHES	SOIL DESCRIPTION
03/15	B-1	0.0 to 4.0	RED CLAY W/SAND, MICA
			.....
		4.0 to 11.0	YELLOW SANDY LOAM MIXED W/RED SANDY CLAY
			.....
		11.0 to 48.0	RED SANDY LOAM W/MICA
			.....
03/15	B-2	0.0 to 2.0	RED SANDY CLAYEY LOAM (MOIST)
			.....
		2.0 to 17.0	YELLOW SANDY LOAM MIXED W/RED SANDY CLAY
			.....
		17.0 to 42.0	RED SANDY LOAM T/MICA
			.....
03/15	B-3	0.0 to 3.0	DARK RED GREY SANDY CLAY (MOIST)
			.....
		3.0 to 48.0	RED SANDY LOAM
			.....

GTSI GROUND TECHNOLOGICAL SERVICES INC.



LEGEND:

1 BORING TEST NUMBER AND APPROXIMATE LOCATION

ABERNATHY ROAD
MECKLENBURG COUNTY, NORTH CAROLINA
BORING LOCATION PLAN

SCALE: NTS DWG: JM

FOR: THORNTON AND THORNTON

BY: GROUND TECHNOLOGICAL SERVICES INC.

PROJ: 90367 DATE: 03/23/99 FIG: 1

GROUND TECHNOLOGICAL SERVICES INC.