# SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

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

File Number: 12169B

Assigned Inspector: Braedon

☐ IP $250.00: _____ 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: SM 2/10/25 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:**

05309217

4400

Charlie Hipp

121693

**MECKLENBURG COUNTY**
**HEALTH DEPARTMENT**

## APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM / WATER SUPPLY WELL

**APPLICATION TYPE:** ○ SEPTIC ONLY ○ WELL ONLY ◉ SEPTIC & WELL
○ ADDITION OR RENOVATION WITH OCCUPANCY INCREASE ○ EXCHANGE MOBILE HOME (SAME # BEDROOMS)
◉ ADDITION OR RENOVATION WITH NO OCCUPANCY INCREASE ○ COMMERCIAL OR INDUSTRIAL

**PERSON FILING APPLICATION:**
NAME: KENNETH L ROMINGER JR
ADDRESS: 4400 CHARLIE HIPP RD
CITY: CHARLOTTE
STATE: NC ZIP: 28214
PHONE: (704) 309-6672
ALTERNATE PHONE: (980) 402-2134
E-MAIL: KENNETHL.ROMINGER@CMS.K12.NC.US

**PROPERTY OWNER:** ☑ SAME AS PERSON FILING APPLICATION
NAME: _____
ADDRESS: _____
CITY: _____
STATE: _____ ZIP: _____
PHONE: _____
ALTERNATE PHONE: _____
E-MAIL: _____

**JOB LOCATION INFORMATION**
**TAX PARCEL #:** ~~4400~~ 05309217
**STREET ADDRESS:** CHARLIE HIPP RD 4400
**CITY:** CHARLOTTE
**STATE:** NC **ZIP:** 28214

**SUBDIVISION OR MOBILE HOME PARK NAME:** _____
**LOT #:** _____

**WATER SUPPLY:**
○ MUNICIPAL ◉ PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER _____

**RESIDENTIAL PROPERTY TYPE:** ○ N/A
◉ HOUSE ○ MODULAR HOME ○ MULTIPLE FAMILY
○ SINGLE MOBILE HOME ○ DOUBLE WIDE
○ OTHER _____

**OCCUPANCY (both fields are required):**
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 2

**COMMERCIAL / INDUSTRIAL PROPERTY TYPE:** ☐ N/A
TYPE OF BUSINESS: _____
# EMPLOYEES PER SHIFT: _____
# OF SHIFTS: _____
INDUSTRIAL WASTES? ○ YES ○ NO
UNDERGROUND STORAGE TANKS? ○ YES ○ NO

**ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:**
☒ BEDROOM ☒ BATHROOM ☐ KITCHEN ☐ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☐ SUNROOM ☐ PORCH ☐ DECK ☐ OTHER _____

**ADDITION/RENOVATION 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.

KENNETH L ROMINGER JR — Owner's/Agent's Signature
2/4/20 — Date

A PROPOSED PLOT PLAN (see page 2) is required to be submitted with each application.



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

Revised on: 01/03/11

- 3 Bed

↓

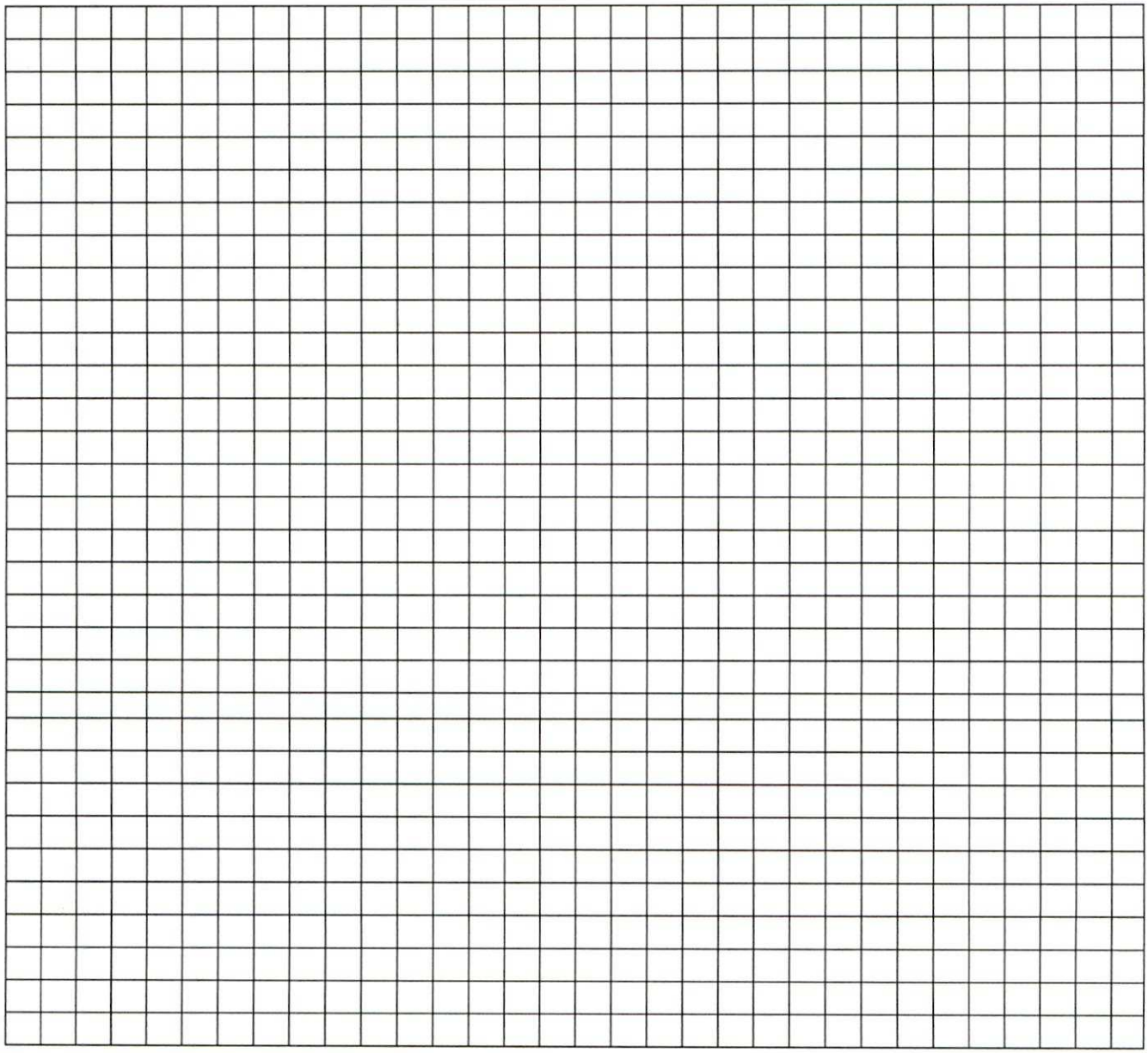
- foot print )

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: 4400 CHARLIE HIPP RD Tax Parcel #: 4400



*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 and Water Supply Wells 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.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

Approved, meets setbacks off the Septic System (tank drainfield)
According to owner, old Hester Line has abandoned >10 years ago, Laundry into S.T

Brandon Shelton 2/14/25
REHS Signature Date



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

Revised on: 01/03/11

## Moore, Samantha

**From:** Rominger, Kenneth L. <kennethl.rominger@cms.k12.nc.us>
**Sent:** Saturday, February 8, 2025 5:50 PM
**To:** Moore, Samantha
**Subject:** RE: [External]RE: Mecklenburg County - Use Existing Septic System Application Form
**Attachments:** House plans.pdf

**Follow Up Flag:** Follow up
**Flag Status:** Flagged

**CAUTION:** This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Samantha,

Here are the house plans for our remodel.
We are almost ready to submit to the engineer. I do not have any older house plans. Just the ones we are making for this remodel.
The well is under the far right wall where the laundry room is. The septic is off the northwest corner of the back deck.

Thanks.

KENNETH ROMINGER JR
TECHNICIAN II
ELECTRONICS DEPARTMENT
980-402-2134

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**From:** Moore, Samantha <Samantha.Moore@mecklenburgcountync.gov>
**Sent:** Wednesday, February 5, 2025 8:13 AM
**To:** Rominger, Kenneth L. <kennethl.rominger@cms.k12.nc.us>
**Subject:** RE: [External]RE: Mecklenburg County - Use Existing Septic System Application Form

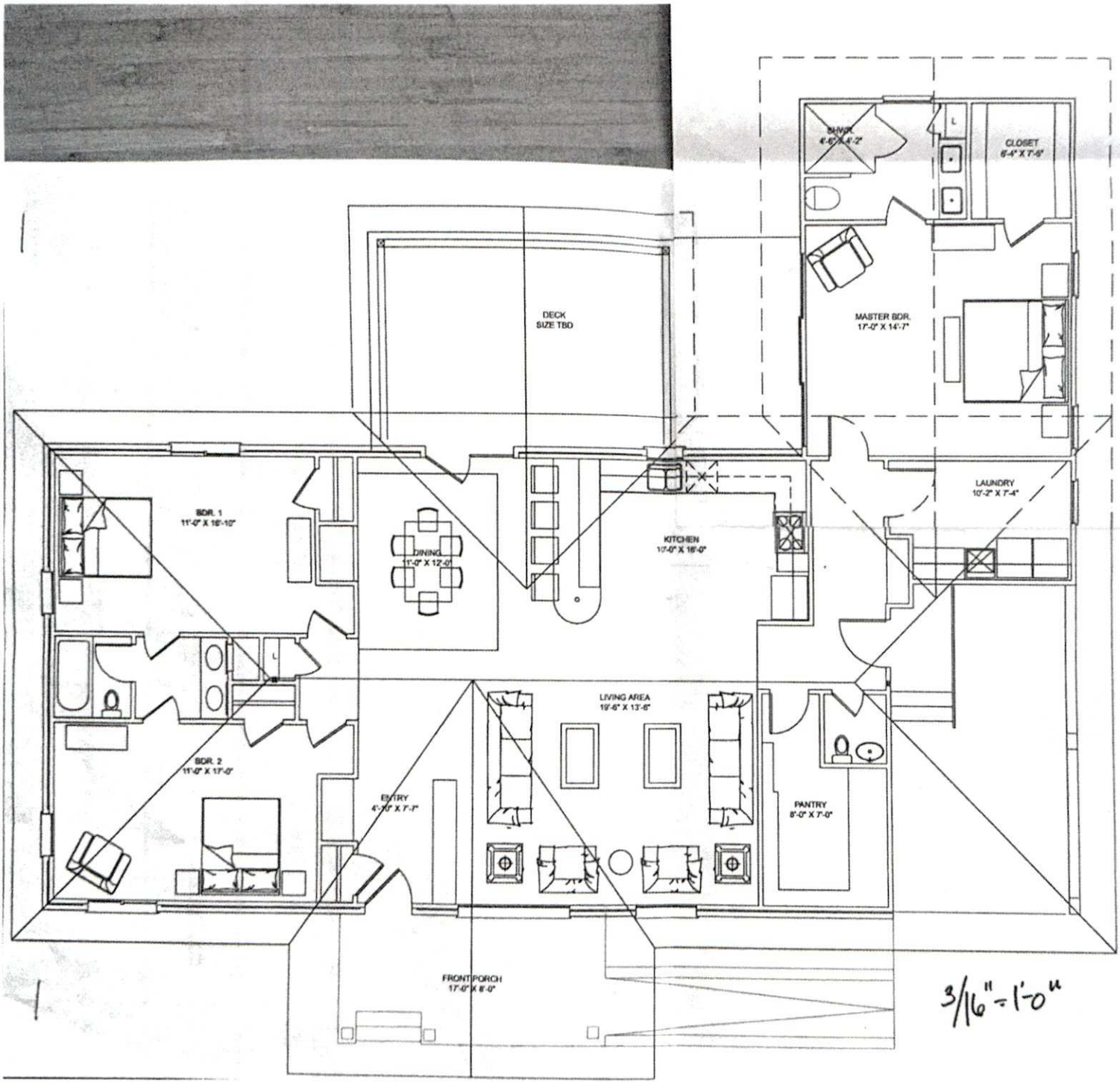
You don't often get email from samantha.moore@mecklenburgcountync.gov. Learn why this is important

**CAUTION: This email originated from outside the CMS organization. Do not click links, give sensitive information, or open attachments unless verified. Forward all suspicious email to spam@cms.k12.nc.us.**

Good morning

Yes, please forward me the plot plan

thanks


DECK
SIZE TBD
MASTER BDR.
17'-0" X 14'-7"
CLOSET
6'-4" X 7'-6"
LAUNDRY
10'-2" X 7'-4"
KITCHEN
10'-0" X 16'-0"
DINING
11'-0" X 12'-0"
BDR. 1
11'-0" X 16'-10"
LIVING AREA
19'-6" X 13'-6"
BDR. 2
11'-0" X 17'-0"
ENTRY
4'-7" X 7'-7"
PANTRY
8'-0" X 7'-0"
FRONT PORCH
17'-0" X 6'-0"

3/16" = 1'-0"

*MECKLENBURG COUNTY*
*LAND USE AND ENVIRONMENTAL SERVICES*
*Payment Receipt*

**Receipt Information**

| | | | |
|---|---|---|---|
| **Date:** | 02/10/25 | **Amount:** | 100.00 |
| **Receipt #:** | 152911 | **Tendered:** | 100.00 |
| **Check / Auth #:** | VISA 036695 | **Returned:** | 0.00 |
| **Received By:** | MOORES | | |

**Account Information**

**Account #:** 200000
**Contractor:** KENNETH ROMINGER
**Attn:**
**Address:**
**Address:**
**City/State/Zip:** ,

| Item | Description | Quantity | Unit Price | Total Price |
|---|---|---|---|---|
| 0705 | Use Existing System<br>4400 CHARLIE HIPP | 1 | 100.00 | 100.00 |

Permit#

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

| Month-To-Date | Prior Month | 30 Days | 60 Days | 90 Days | Balance |
|---|---|---|---|---|---|
| | | 507.50 | | 3,317.50 | |

*well under the house*