J Michelone

FILE NUMBER: 7748B

Revised On: August 31, 2007

APPLICATION NUMBER: 3490

SEPTIC FEE:
DATE: 5-1-08

MECKLENBURG COUNTY GROUNDWATER & WASTEWATER SERVICES
APPLICATION FOR A RESIDENTIAL SITE IMPROVEMENT PERMIT/ CONSTRUCTION AUTHORIZATION FOR AN ON-SITE WASTEWATER SYSTEM, NEW WELL INSTALLATION, OR REPAIR OF EXISTING WELL

WELL FEE:
DATE:

1. **SEPTIC / TYPE APPLICATION:** ☐ NONE ☐ NEW SYSTEM ☐ ALTERATION ☒ REPAIR ☐ MODIFIED PLOT PLAN

2. **WELL / TYPE APPLICATION:** ☒ NONE ☐ NEW WELL ☐ MAJOR REPAIR ☐ ABANDONMENT

3. **JOB LOCATION INFORMATION:**

TAX PARCEL NUMBER: 017-244-08,09
STREET ADDRESS: 12129 HILLCREST LANE
CITY: Huntersville
STATE: NC ZIP: 28078
SUBDIVISION NAME:
LOT #: LOT SIZE (acres):
TOWNSHIP:
☐ 0-MECKLENBURG ☐ 3-CORNELIUS ☒ 6-HUNTERSVILLE
☐ 1-CHARLOTTE ☐ 4-PINEVILLE ☐ 7-MINT HILL
☐ 2-DAVIDSON ☐ 5-MATTHEWS

4. **BUILDING INFORMATION:**

BUILDING TYPE:
☒ SINGLE MOBILE HOME ☐ MODULAR HOME
☐ DOUBLE WIDE ☐ MULTIPLE FAMILY
☐ HOUSE ☐ OTHER
HEATED SQUARE FOOTAGE:
NUMBER OF BEDROOMS: 2
NUMBER OF OCCUPANTS: 3
FOUNDATION TYPE:
☐ CONCRETE SLAB ☐ BASEMENT WITH PLUMBING
☒ CRAWL SPACE ☐ BASMENT WITH NO PLUMBING

5. **IF PLANNING TO EXPAND OR ALTER THE EXISTING SYSTEM PLEASE COMPLETE THE FOLLOWING SECTION:** ☐ N/A
NUMBER OF BEDROOMS TO BE ADDED: 0 NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: 0

6. **WATER SUPPLY:** ☐ MUNICIPAL ☒ PUBLIC WELL ☐ PRIVATE WELL ☐ SHARED WELL ☐ SPRING

7. **PROPOSED USE OF WELL:** ☐ N/A ☐ IRRIGATION ☒ POTABLE ☐ GEOTHERMAL ☐ OTHER

8. **PLEASE INDICATE AND RANK DESIRED SEPTIC SYSTEM TYPE(S) IN ORDER OF PREFERENCE** *(1-MOST DESIRED 5-LEAST DESIRED):*

8A. **RANK:** ☒ ANY TYPE ☐ CONVENTIONAL ☐ ACCEPTED ☐ INNOVATIVE ☐ ALTERNATIVE ☐ OTHER

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

10. **PROPERTY OWNER:**

NAME: KISSIAH PROPERTIES, LLC
ADDRESS: 2827 TEMPLE LANE
CITY: CHARLOTTE
STATE: NC ZIP: 28205
HOME PHONE: WORK PHONE:
MOBILE PHONE: FAX:

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

NAME: Robert Kissiah
ADDRESS: 2827 Temple LN
CITY: Charlotte, N.C.
STATE: N.C. ZIP: 28205
HOME PHONE: 704-536-7446 WORK PHONE:
MOBILE PHONE: FAX:

12. **WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?** _____

13 **WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?** _____

14. **SEPTIC SYSTEM PERMIT APPLICATION SIGNATURE SECTION:**
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 60 months or is non-expiring depending upon the documentation submitted: complete site plan = 60 months, complete plat = non-expiring.

X Robert Kissiah (By PD) 5-1-08
Property Owner's or Owner's Legal Representative Signature Date

15. **WELL PERMIT APPLICATION SIGNATURE SECTION:**
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 12 months from the date of issuance.

Pat Durkin 5-1-08
Property Owner's or Owner's Legal Representative Signature Date

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

MECKLENBURG COUNTY-GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST., SUITE 211, CHARLOTTE, NC 28202 PHONE: (704) 336-5103 FAX: (704) 336-6894

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Sheet: 1 of 2
Property ID: 017-244-09
Lot #: 69
File #: 7748B
AppID:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Kenneth Kissiah
Applicant: Kenneth Kissiah
Address: 2827 Temple Lane Charlotte, NC 28205
Date Evaluated: 6/9/2017
Proposed Facility: Residence
Design Flow (.1949): 240 GPD
Property Size:
Location of Site: 12129 Hillcrest Lane Huntersville, NC 282078
Property Recorded:
Water Supply: [x] Public [ ] Individual [x] Well [ ] Spring [ ] Other
Evaluation Method: [x] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [x] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	SOIL MORPHOLOGY .1941 .1941 Consistence Mineralogy	b PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
		0-4	GR/SCL	FR/SS/SP/SEXP	>48" TO SOIL WETNESS	>48"	NA	NA	PS
#1	LS	4-48	SBK/C	FI/S/P/SEXP					IV
	4%								0.3 G/D/FT2

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	II a	II a
Site LTAR	0.3	0.3

Other Factors (.1946):
Soil Evaluation By: Jeremy Michelone, REHS
Others Present:
Site Classification (.1948): Provisionally Suitable
Site Evaluation By: Jeremy Michelone, REHS
Others Present:

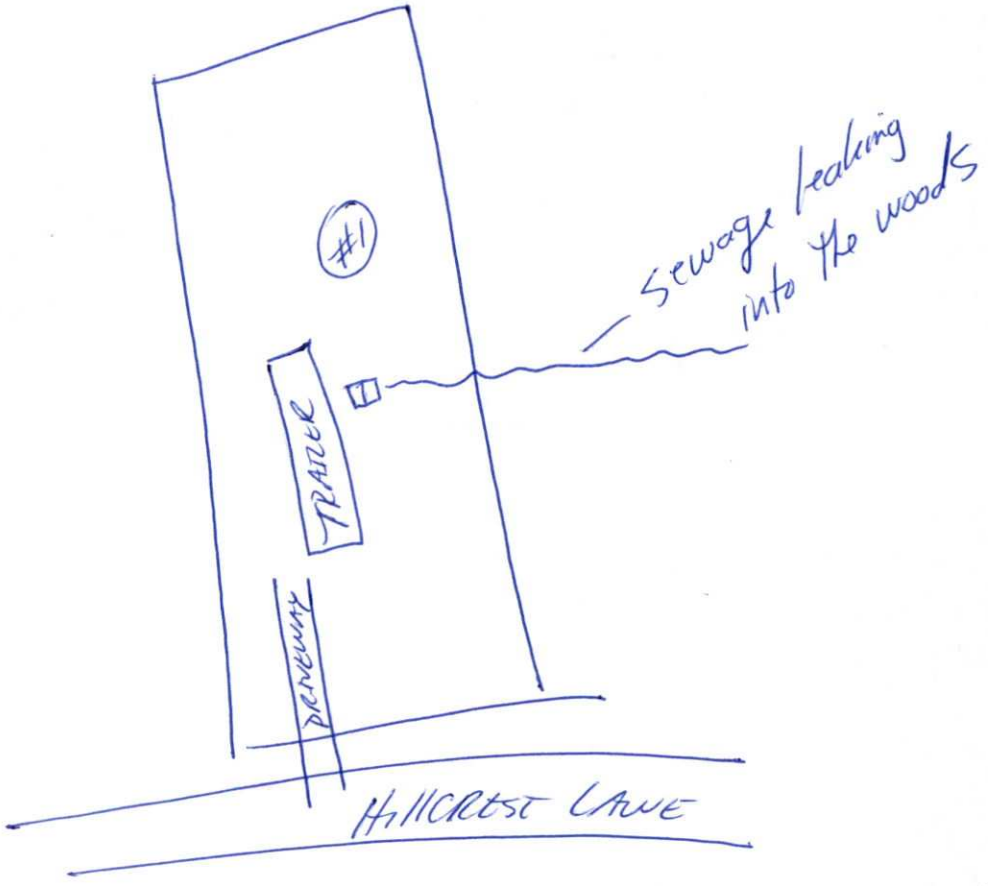
Jeremy Mich. REHS

COMMENTS:
100% repair area required

Landscape Position	Group	Texture	.1955 LTAR	Structure
R-Ridge	I	S-Sand	1.2 - 0.8	SG-Single Grain
SS-Shoulder Slope		LS-Loamy Sand		M-Massive
LS-Linear Slope				CR-Crumb
FS-Foot Slope	II	SL-Sandy Loam	0.8 - 0.6	GR-Granular
NS-Nose Slope		L-Loam		SBK-Subangular Blocky
HS-Head Slope				ABK-Angular Blocky
CC-Concave Slope	III	SI-Silt	0.6 - 0.3	PL-Platy
CV-Convex Slope		SICL-Silty Clay Loam		PR-Prismatic
T-Terrace				
FP-Flood Plain		CL-Clay Loam		
		SCL-Sandy Clay Loam		
	IV	SC-Sandy Clay	0.4 - 0.1	
		SIC-Silty Clay		
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	NS-Non-Sticky	SEXP-Slightly Expansive
FR-Friable	SS-Slightly Sticky	EXP-Expansive
FI-Firm	S-Sticky	
VFI-Very Firm	VS-Very Sticky	
EFI-Extremely Firm	NP-Non-Plastic	
	SP-Slightly Plastic	
	P-Plastic	
	VP-Very Plastic	

Sketch of Soil Evaluation Locations



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 #: _____ Permit #: _____ Tax Parcel #: 017-244-08,0

Property Owner: KISSIAH PROPERTIES, LLC

Job Location Address: 12129 HILLCREST LANE

City: Huntersville State: NC Zip Code: 28078

Installation Approval Issuance Date: 4/30/08

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 5/30/08, 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: 240 GPD

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

Liquid Capacity of Septic Tank: Existing gallons

Liquid Capacity of Dosing Tank: _____ 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: 30 inches

Bed Width: 9 feet

Total line length: 150 feet

# of Lines: 3 @ 50 feet

Depth of Media: 18 inches (Type) STONE

Distribution Device: D-BOX

Water Supply Source

☐ Municipal ☐ Private Well ☒ Community Well

☐ Other _____

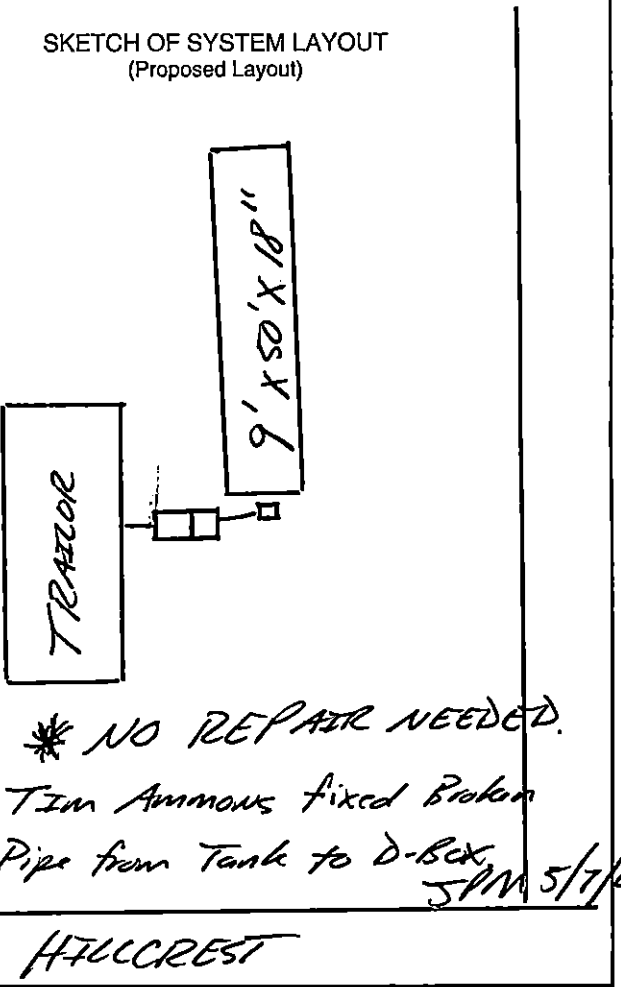
Minimum System Setbacks

Distance from Building Foundation: 75' 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 II Conventional System

2008 REPAIR

DENR Authorized Agent: Jeremy Nichols, R.S. Signature: Jeremy Nichols, R.S.

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

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT/CONSTRUCTION AUTHORIZATION for an ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 77488 Permit #: _____ Tax Parcel #: 017-244-09

Property Owner: Kenneth Kissiah

Job Location Address: 12129 Hillcrest Lane

City: Huntersville State: NC Zip Code: 28078

Improvement Permit Issuance Date: _____ **Construction Authorization Issuance Date** _____

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 permit is granted based upon the application information submitted to our office. This permit expires 5 years from the date it was issued. 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: _____ GPD Site LTAR: 0.3 GPD/ft² (For new installations only.)

Liquid Capacity of Septic Tank: Existing gallons Liquid Capacity of Dosing Tank: _____ 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: 12 feet

Total line length: 200 feet

# of Lines: 4 @ 50 feet

Depth of Media: 24 inches (Type) STONE

Distribution Device: D-Box

Water Supply Source

☐ Municipal ☐ Private Well ☒ Community Well

☐ Other _____

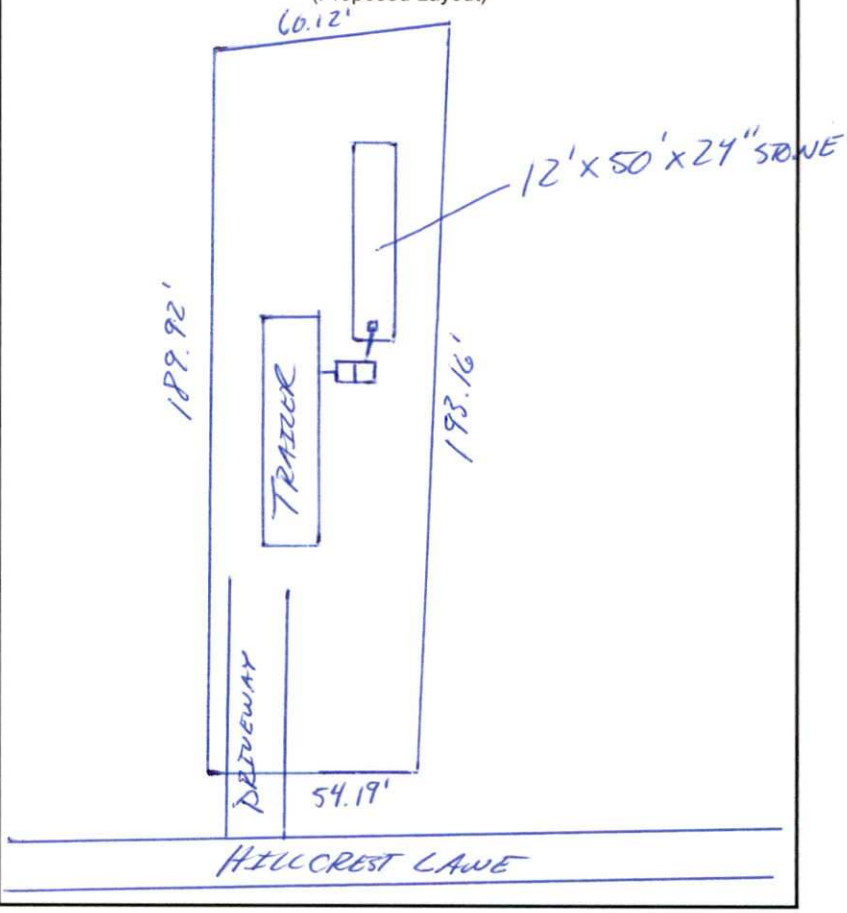
Minimum System Setbacks

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: _____

Authorized Agent: _____ Signature: _____

Owner Signature: _____ Date: _____

Mecklenburg County, North Carolina
POLARIS
Parcel Ownership and GIS Summary

Date and Time: 4/29/2008 9:09:23 AM

Parcel ID #: 01724409 GIS ID #: 01724409	
Owner Name:	KISSIAH PROPERTIES LLC
Mailing Address:	2827 TEMPLE LN CHARLOTTE, NC 28205
Property Characteristics	
Legal Desc.:	L69 M11-219
Land Area:	1 LT
Fire District:	18-HUNTERSVILLE / CRAIGHEAD
Special District:	FIRE SERVICE D
Account Type:	NC CORP
Municipality:	6-HUNTERSVILLE
Property Use:	VACANT
Deed Reference(s) and Sales Price	
23151-807 (12/11/2007) $0.00 08196-966 (6/30/1995) $0.00	
Situs Addresses Tied to This Parcel	
12129 HILLCREST LN	
Site Location Information	
Zoning Boundaries:	Contact Appropriate Planning Department or See Map.
ETJ Area: HUNTERSVILLE	
Charlotte Historic Districts: NO	
Within Charlotte 6/30/2007 Annexation Area: NO	
Census Tract #: 62.07	
S.W.I.M Stream Buffer	
Buffer Distance:	OUT
Post Construction District	
Jurisdiction:	Huntersville
District:	Catawba

FEMA Flood Information	
FEMA Panel #:	370158086E
FEMA Flood Zone:	OUT
FEMA Panel Date:	02/04/2004
Community Flood Information	
Community Flood Zone:	OUT
Regulated Watershed Information	
Watershed Name:	Mtn. Island Lake
Watershed Class:	PA-2

Powered by

MECKLENBURG COUNTY GIS

HEATHER GREEN

574-0445

PAT Dulin 537-2183

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.



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Parcel Information

Parcel ID	Account	Parent	Previous
01724409	NC CORP		

Owner(s)

Owner Name	Mailing Address	City/State
KISSIAH PROPERTIES LLC	2827 TEMPLE LN	CHARLOTTE NC 28205

Legal Information

Legal	Municipality	Annexed	Special District	Fire District	Acreage
L69 M11-219	HUNTERSVILLE	6/30/1997 12:00:00 AM	FIRE SERVICE D	HUNTERSVILLE / CRAIGHEAD	0

Total Parcel Assessment & Exemptions

Building	Land	Features	Total	Exemption	Year Approved	Review Date	Amount
0	15000	2100	17100				

Sales Information

Sale	Price	Stamps	Qualify	V/I	DeedBook	Type	Legal Ref.	Grantor
Dec 11 2007			MULTIPARCEL	IMP	23151 - 807	MULT LISTING	23151-807	KISSAIAH,ROBERT T
Jun 30 1995	0		OTHER	VAC	08196 - 966	DEED STAMPS	08196-966	DAY ICIE E MRS R E B

Land Use

Use	Units	Type	Neighborhood	Assessment
R200	1.00	LT	b711	15000

Building Information

Bldg	Description	Type	Year Built	Property Location
				12129 HILLCREST LN HUNTERSVILLE

Bldg	Story	Units	Total SqFt	Heated	Foundation	Ext. Wall	Grade	Value

Bldg	Heat	Fuel	FirePlace	AC	Fixtures	Bedrooms	Full Baths	3/4 Baths	1/2 Baths

Sub Areas

Bldg	Description	Size

Depreciation

Bldg	Physical	Functional	Economic	Special	Override

Special Features & Yard Items

Bldg	Built	Type	Quantity	Units	Value
1	1900	TERRACE	1	80	200
1	1900	DWELLING	1	8X10	700
1	1900	CARPORT	1	200	800
1	1900	STORAGE	1	100	400

Value Changes

Notice Date	Tax Year	Reason	Changed To	Deferred
Jan 17 2003	2003	Countywide Revaluation	17100	0
Jan 5 1998	1998	Countywide Revaluation	10440	
Jan 2 1991	1991	Countywide Revaluation	6800	

Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Tue Apr 29 09:09:04 EDT 2008



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