


10436 KERNS RD

01701205

1/7/2008

duponbj

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

# CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 48158 DATE: 12/30/02

TC: 017-012-05 ☒ L ☒ CRT

SERIAL 19082

Name of Owner Mark Ebersold Juris.: _____

Address of Property 10436 Kerns Road

**Inspection Data:**

Tank Material PCC

Total Length of Drainfield 400, 50'

Number of Lines 4 @ 100

Cover Depth 18"

Water Supply Source well

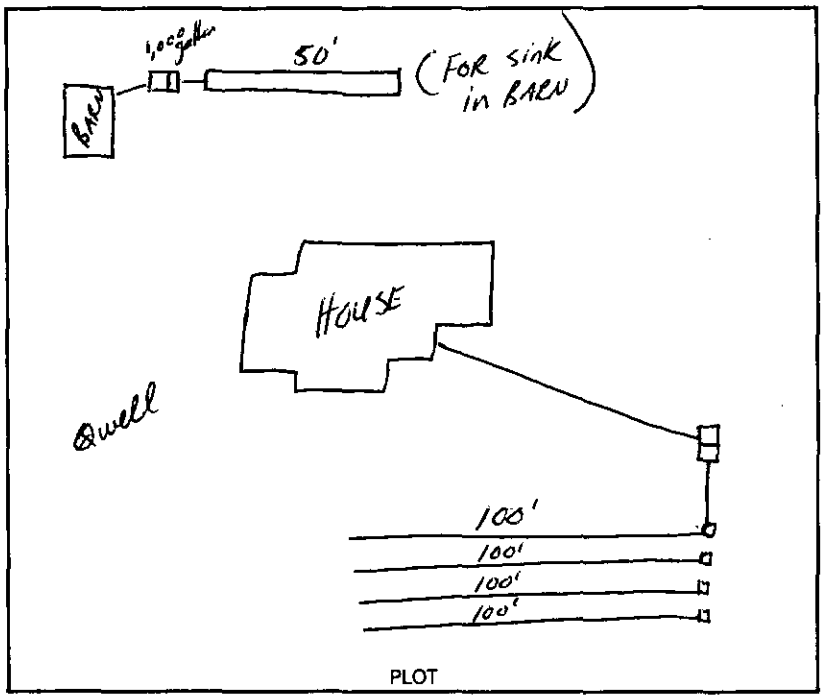
Distance to Water Source >100'

Excavation Inspected 12/30/02

Tank(s) Inspected 12/30/02

Wash Line Inspected NA

High Water Alarm Inspected NA



PLOT

Design 1500 ST, 1200 SFT, INN (Chambers) CTR# _____

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 I5A 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 I5A 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: Four Bedroom House

4 lines x 100' x 3' for House

1000 gallon tank and 1 line x 50 for Barn sink

Type IIIg innovative system

Tony Mechuka R.S.
Environmental Health Specialist

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

# INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

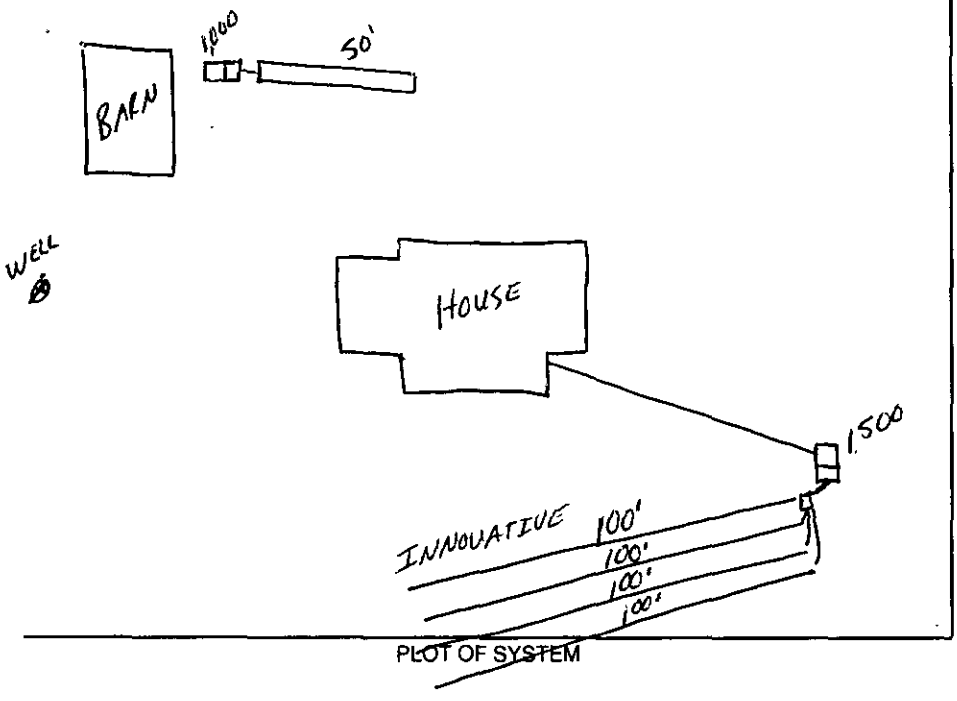
**HEALTH DEPARTMENT**
**ENVIRONMENTAL HEALTH DIVISION**
**700 NORTH TRYON ST., SUITE 211**
**CHARLOTTE, NC 28202**
**PHONE (704) 336-5102**

FILE: 4815B DATE: 12/18/02

TC: 017-012-05 ☐ L

SERIAL 19195

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 12/31/01. All work shall be completed on or before 1/18/03, 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.




Liquid Capacity of Septic Tank 1500, 1000 gallons

Liquid Capacity of Dosing Tank NA gallons

Tank Construction PCC

Trench Depth 30"

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Trench Walls Scored and Porous yes

Total Line Length 400, 50 feet

Number of Lines 4x100', 1x50'

Depth of Stone NA inches

Distance from House >15' 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 Mark Ebersold

LOCATION OF PROPERTY 10436 Kerns Road

Comments: Four Bedroom House

Install 4 lines x100'x3 for House

Install 1000 gallon septic tank and 1 line x50' for Barn

Type IIIg Innovative system

Tony Medlin R.S.
Environmental Health Specialist

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

Barn on ~~Engaged~~ Proposed P.P.P.

dated 11/15/02

signature

LIBERTY PRESS, RUTHERFORDTON, NC

# PLOT PLAN FOR PERMIT APPLICATION
## ONE/TWO FAMILY, MODULAR, MOBILE HOME OR ZONING USE

**LOCATION**

STREET # (N,S,E,W): 10436 | STREET NAME: Kerns | (AV,RD,ST, etc): Rd.

SUITE/UNIT(S):

**PERMIT #**

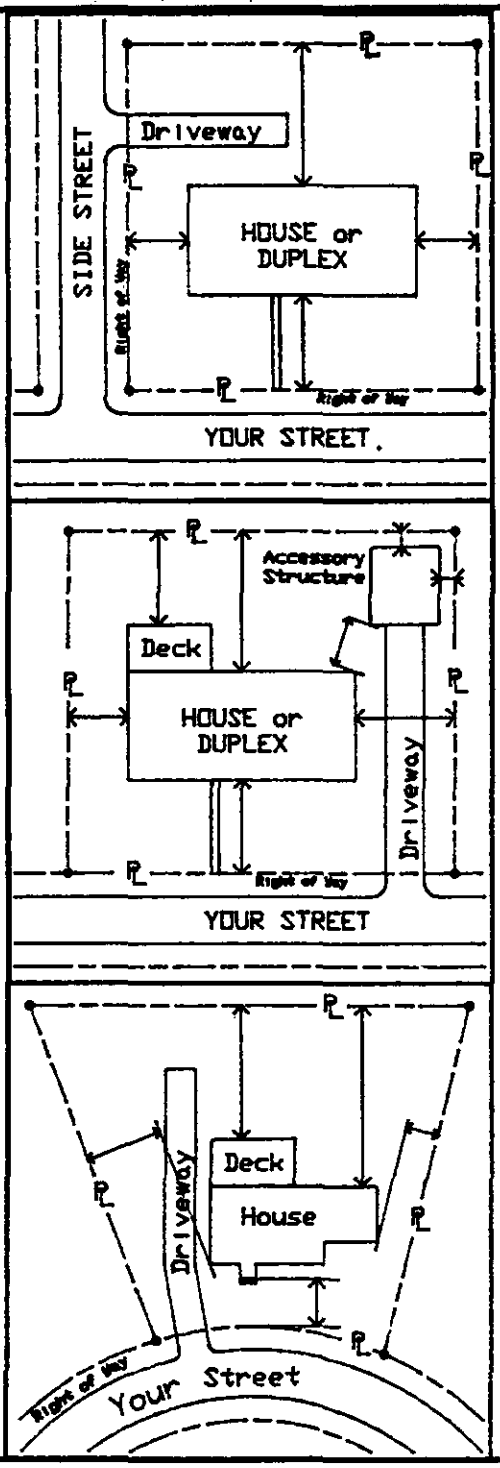
TAX JURISDICTION: *(Check One)*

- ☐ 0-Mecklenburg
- ☐ 1-Charlotte
- ☐ 2-Davidson
- ☐ 3-Cornelius
- ☐ 4-Pineville
- ☐ 5-Matthews
- ☑ 6-Huntersville
- ☐ 7-Mint Hill

**TAX PARCEL #**

**JOB #**

**EXAMPLES/PLOT PLAN**

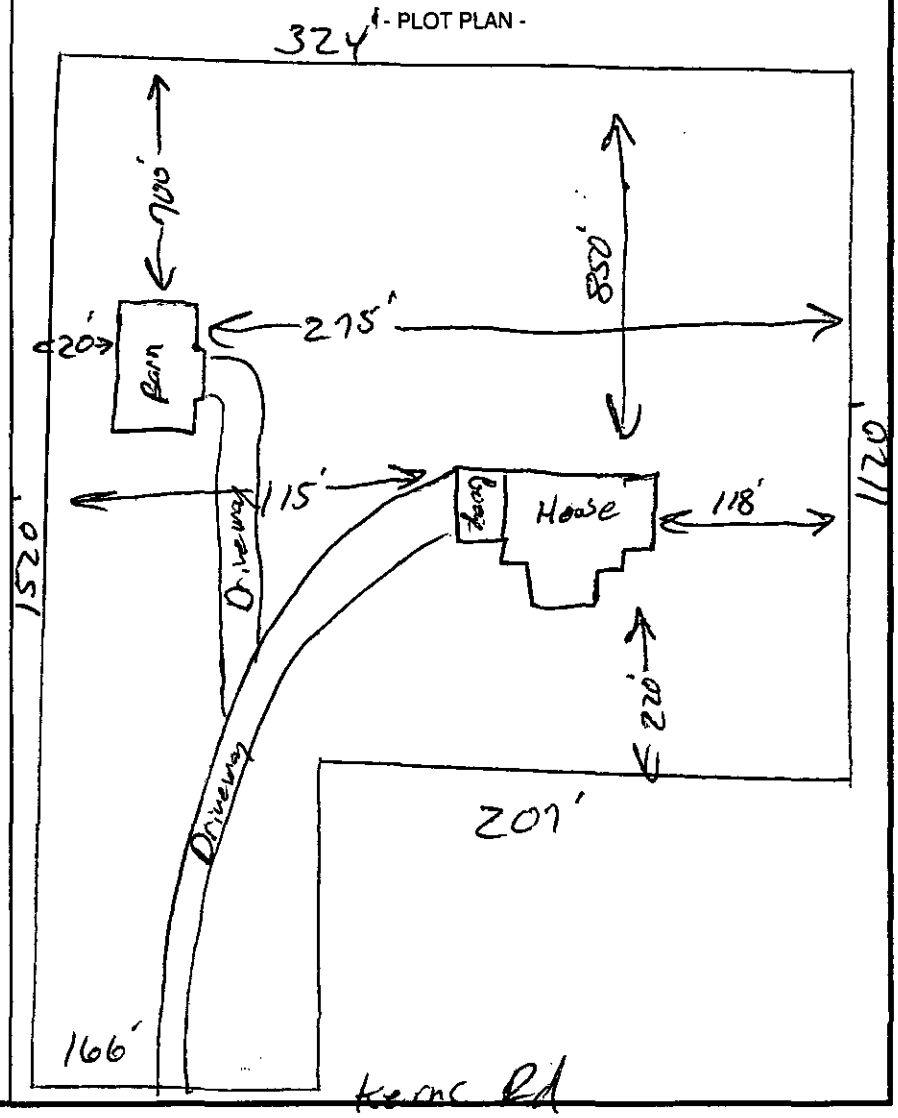



- INSTRUCTIONS -

In the space provided below, draw plot plan as neatly and accurately as possible, from survey if available.

1. Draw street(s) and right-of-way(s).
2. Draw property lines with dimensions.
3. Draw proposed and existing buildings showing any attached porch(es), deck(s), chimney(s), carport(s), or garage(s), etc...
4. Show distances of buildings from property lines or other structures.
5. Separate application and plot plan required for each building.

- PLOT PLAN -




ALL EXISTING AND PROPOSED BUILDING(S) ON LOT ARE SHOWN WITH MEASUREMENTS INDICATED

Timothy D. Feeney — 8-29-02 — Timothy D. Feeney

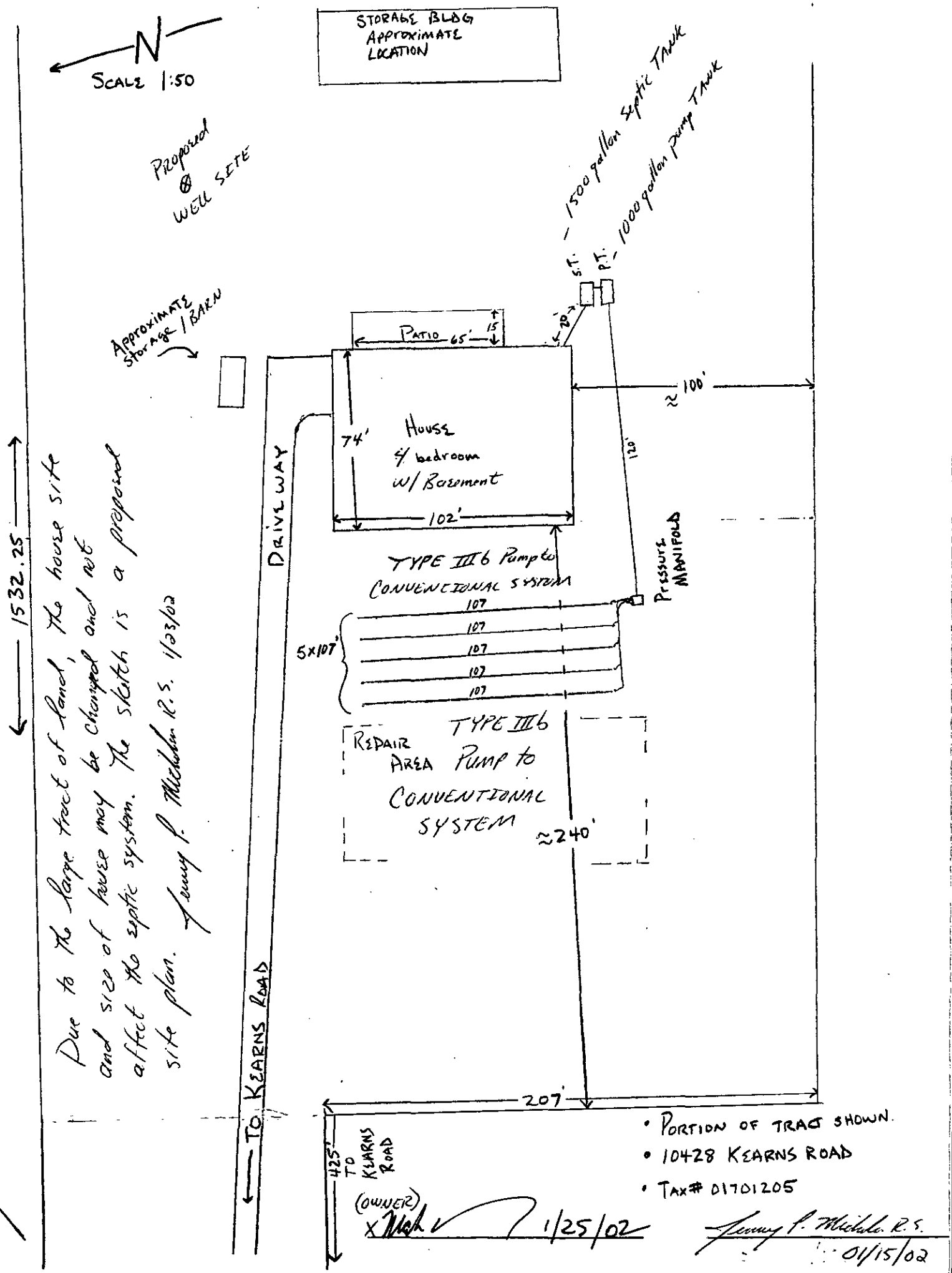
APPLICANT'S SIGNATURE — DATE — PRINT APPLICANT'S NAME

APPROVED BY

CHARLOTTE-MECKLENBURG BUILDING STANDARDS DEPARTMENT

~~10428~~ KEARNS ROAD
10436

FILE 4815B
T.C. 017-012-05




- PORTION OF TRACT SHOWN.
- 10428 KEARNS ROAD
- TAX# 01701205

(OWNER) X [signature] 1/25/02

Jenny P. Michalec R.S.
01/15/02

FEE: 300 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION** ACS X
DATE: 1/25/02 **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: _____ PERMIT NO: 4815B
10436 PARCEL NO: 017-012-05
JOB LOCATION ADDRESS: ~~10428~~ Kerns Road
PROPERTY OWNER: Mark S. Ebersold
BUILDING CONTRACTOR: _____
SUBDIVISION NAME: NA
AUTHORIZATION ISSUED BY: Tommy F. Mecklenburg R.S. DATE: 01/15/02
~~DEHNR~~ AUTHORIZED AGENT

## AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 4815B, 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: Type III b Pump to Conventional System
Permit Valid for 5 years

## 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.

Mark S. Ebersold 1/25/02
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

# CONDITIONS OF IMPROVEMENT PERMIT

Permit Number 4815 B

Tax Number: 017-012-05

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<br>Type (circle one):<br>I (II) III IV V VI | ✓ Conventional<br>___ Prefabricated, permeable block panel system<br>___ Shallow Placed Conventional | ___ Low Pressure Pipe<br>___ Large Diameter Pipe<br>___ Fill<br>___ Other | ___ Innovative or Experimental:<br>___ IWWS-93-1<br>___ IWWS-93-2<br>___ IWWS-94-1 |

| | | | |
|---|---|---|---|
| 0.3 Long-term acceptance rate | 480 Max gallons/day wastewater flow | 1600 Absorption Area (sq ft) | 9' Trench spacing (min. on centers) |
| YES Serviced by private well | 1500 Gallon septic tank | 535 Total trench length (ft) | 30" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions) |
| 5 / 4 Bedrooms in residence | 1000 Gallon pump tank | 12" Depth of stone | |

Any surface waters present: NO Type: Minimum separation distance:

Site modifications required:

Additional Conditions: Type III b Pump to Conventional System
5 lines x 107 x 3' x 12" Stone

| | | | |
|---|---|---|---|
| Repair Area System Type<br>Type (circle one):<br>I II (III) IV V VI | ✓ Conventional<br>___ Prefabricated, permeable block panel system<br>___ Shallow Placed Conventional | ___ Low Pressure Pipe<br>___ Large Diameter Pipe<br>___ Fill<br>___ Other | ___ Innovative or Experimental:<br>___ IWWS-93-1<br>___ IWWS-93-2<br>___ IWWS-94-1 |

| | | | |
|---|---|---|---|
| 1600 Absorption Area (Sq ft)<br>535 Total Trench Length (Ft) | 12" Depth of Stone Trench | 9' Trench spacing (min. on centers) | 30" 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.

Terry L. Miller R.S. 01/15/02
DEHNR Authorized Agent Date

Owner/Agent Signature 1/25/02
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

DATE: 06/06/2002

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION: MECK

017-012-05

PARCEL NUMBER

10436 Kerns Rd

ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

N/A

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

N/A

PROJECT NAME (IF APPLICABLE)

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

| | | |
|---|---|---|
| 1. SUBDIVISION REGULATIONS | ____ APPROVED | ____NOT APPROVED |
| 2. FLOODWAY REGULATIONS | ____ APPROVED | ____NOT APPROVED |
| 3. WATERSHED PROTECTION | ____ APPROVED | ____NOT APPROVED |
| 4. COMERCIAL DRAINAGE PLAN | ____ APPROVED | ____NOT APPROVED |
| 5. PUBLIC UTILITY EASEMENT | ____ PRESENT | ____NOT PRESENT |
| 6. PROPERTY FRONTS ON THOROUGHFARE | ____ YES | ____NO |
| 7. DRIVEWAY PERMIT REQUIRED | ____ YES | ____NO |
| 8. DOES PROJECT CONFLICT WITH ROAD PROJECT? | ____ YES | ____NO |

Remarks:

new residence

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE WHEN PAYING PERMIT FEE. CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

ALL OTHER FORMAS OBSOLETE
— NEW ADDRESS
REVISED 1/91

SIGNED: BL

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

Sheet: 1
Property ID: 017-012-05
Lot #:
File #: 4815B
Code: 1

RW

# SOIL/SITE EVALUATION
## for ON-SITE WASTEWATER SYSTEM

Owner: Doris Hogue
Applicant: Mark Ebersold
Address: 1608 Sunset Road, Charlotte, N. C. 28216
Date Evaluated: 1/9/02
Proposed Facility: Residence
Design Flow (.1949): 480gpd
Property Size: approx. 1a. Inv.
Location of Site: ~~10428~~ 10430 Kerns Road
Property Recorded:
Water Supply: [ ] Public [ x ] Individual [ x ] Well [ ] Spring [ ] Other
Evaluation Method: [ x ] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [ ] Sewage [ ] Industrial Process [ ] Mixed

| PROFILE # | .1940 Landscape Position/ Slope% | Horizon Depth (IN.) | SOIL MORPHOLOGY .1941 .1941 Structure/ Texture | .1941 Consistence Mineralogy | OTHER PROFILE FACTORS .1942 Soil Wetness/ Color | .1943 Soil Depth (IN.) | .1956 Sapro Class | .1944 Restr Horiz | Profile Class & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| | 5-15 | | | | | | | | |
| 1 | LS | 0-5 | GR/SCL | FR/SEXP/SS/SP | >48" TO SOIL WETNESS | 48 | N/A | NONE | PS, IV .2G/DAY/FT$^2$ |
| | | 5-39 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 39-48 | SBK/CL | FR/SEXP/SS/SP | | | | | |
| 2 | " | 0-8 | GR/SCL | FR/SEXP/SS/SP | 2.5Y7/2@35" | 42 | " | " | US, IV .2G/DAY/FT$^2$ |
| | | 8-37 | SBK/SC | FI/SEXP/S/P | | | | | |
| | | 37-42 | SBK/SCL | FR/SEXP/SS/SP | | | | | |
| 3 | " | 0-7 | GR/SCL | FR/SEXP/SS/SP | 2.5Y7/1@28" | 34 | " | " | US, IV |
| | | 7-34 | SBKSC | FI/SEXP/S/P | | | | | |
| 4 | " | 0-8 | GR/SCL | FR/SEXP/SS/SP | >26" TO SOIL WETNESS | 26 | " | " | US, IV |
| | | 8-26 | SBK/C | FI//SEXP/S/P | | | | | |
| | | Some | platy structure | 22-24" | | | | | |
| 5 | " | 0-5 | GR/SCL | FR/SEXP/SS/SP | >42" TO SOIL WETNESS | 42 | " | " | PS, IV .275G/DAY/FT$^2$ |
| | | 5-37 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 37-42 | SBK/CL | FR/SEXP/SS/SP | | | | | |
| 6 | " | 0-7 | GR/SCL | FR/SEXP/SS/SP | >47" TO SOIL WETNESS | 47 | " | " | " |
| | | 7-47 | SBK/C | FI/SEXP/S/P | | | | | |
| 7 | " | 0-6 | GR/SCL | FR/SEXP/S/P | >48" TO SOIL WETNESS | 48 | " | " | PS, IV .3G/DAY/FT$^2$ |
| | | 6-48 | SBK/C | FI/SEXP/S/P | | | | | |
| 8 | " | 0-7 | GR/SCL | FR/SEXP/SS/SP | " | " | " | " | " |
| | | 7-48 | SBK/C | FI/SEXP/S/P | | | | | |

| Description | Initial System | Repair System |
|---|---|---|
| Available Space (.1945) | PS | PS |
| System Type(s) | | |
| Site LTAR | .3G/DAY/FT$^2$ | .3G/DAY/FT$^2$ |

Other Factors (.1946): _____
Site Classification (.1948): PROVISIONALLY SUITABLE
Evaluated By: W. R. Marlin, LSS, 1/10/02, W. R. Marlin
Others Present:

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

Sheet: 2
Property ID: 017-012-05
Lot #:
File #: 4815B
Code: 1

# SOIL/SITE EVALUATION
# for ON-SITE WASTEWATER SYSTEM

Owner: Applicant:
Address: Date Evaluated:
Proposed Facility: Design Flow (.1949): Property Size:
Location of Site: Property Recorded:
Water Supply: [ ] Public [x ] 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 | .1941 Consistence Mineralogy | OTHER PROFILE FACTORS .1942 Soil Wetness/ Color | .1943 Soil Depth (IN.) | .1956 Sapro Class | .1944 Restr Horiz | Profile Class & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| | 5-15 | | | | | | | | |
| 9 | LS | 0-6 | GR/SCL | FR/SEXP/SS/SP | >48' TO SOIL WETNESS | 48+ | N/A | NONE | PS, IV .3G/DAY/FT$^2$ |
| | | 6-48 | SBK/C | FI/SEXP/S/P | | | | | |
| 10 | R | 0-5 | GR/SCL | FR/SEXP/SS/SP | >43" TO SOIL WETNESS | 43 | " | " | " |
| | | 5-37 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 37-43 | SBK/SCL | FR/SEXP/SS/SP | | | | | |
| 11 | " | 0-4 | GR/SCL | FR/SEXP/SS/SP | >48" TO SOIL WETNESS | 48+ | " | " | " |
| | | 4-33 | SBK/C | FI/SEXP/SS/SP | | | | | |
| | | 33-48+ | SBK/SCL | FR/SEXP/SS/SP | | | | | |
| 12 | " | 0-5 | GR/SCL | FR/SEXP/SS/SP | >45" TO SOIL WETNESS | 45 | " | " | " |
| | | 5-31 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 31-45 | SBK/SCL | FR/SEXP/SS/SP | | | | | |
| 13 | LS | 0-3 | GR/SCL | FR/SEXP/SS/SP | >31" TO SOIL WETNESS | 31 | " | " | US, IV .3G/DAY/FT$^2$ |
| | | 3-28 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 28-31 | SBK/SCL | FR/SEXP/SS/SP | | | | | |
| 14 | LS | 0-5 | GR/SCL | FR/SEXP/SS/SP | .48" TO SOIL WETNESS | 48+ | " | " | PS, IV .3G/DAY/FT$^2$ |
| | | 5-39 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 39-48+ | SBK/SCL | FR/SEXP/SS/SP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| Description | Initial System | Repair System |
|---|---|---|
| Available Space (.1945) | | |
| System Type(s) | | |
| Site LTAR | | |

Other Factors (.1946): _____
Site Classification (.1948):
Evaluated By:
Others Present:

FILE # 4815B

COMMENTS 100% Repair

| LANDSCAPE POSITION | GROUP | TEXTURE | .1955 LTAR |
|---|---|---|---|
| R-RIDGE | I | S-SAND | 1.2-0.8 |
| S-SHOULDER SLOPE | | LS-LOAMY SAND | |
| L-LINEAR SLOPE | | | |
| FS-FOOT SLOPE | II | SL-SANDY LOAM | 0.8-0.6 |
| N-NOSE SLOPE | | L-LOAM | |
| H-HEAD SLOPE | | | |
| CC-CONCLAVE SLOPE | III | SI-SILT | 0.6-0.3 |
| CV-CONVEX SLOPE | | SICL-SILTY CLAY LOAM | |
| T-TERRACE | | CL-CLAY LOAM | |
| FP-FLOOD PLAIN | | SCL-SANDY CLAY LOAM | |
| | IV | SC-SANDY CLAY | 0.4-0.1 |
| | | SIC-SILTY CLAY | |
| | | O-ORGANIC | |

| CONSISTENCE | |
|---|---|
| MOIST | WET |
| VFR-VERY FRIABLE | NS-NON-STICKY |
| FR-FRIABLE | SS-SLIGHTLYSTICKY |
| FI-FIRM | S-STICKY |
| VFI-VERY FIRM | VS-VERY STICKY |
| EFI-EXTREMELY FIRM | NP-NON-PLASTIC |
| | SP-SLIGHTLYSTICKY |
| | P-PLASTIC |
| | VP-VERY PLASTIC |

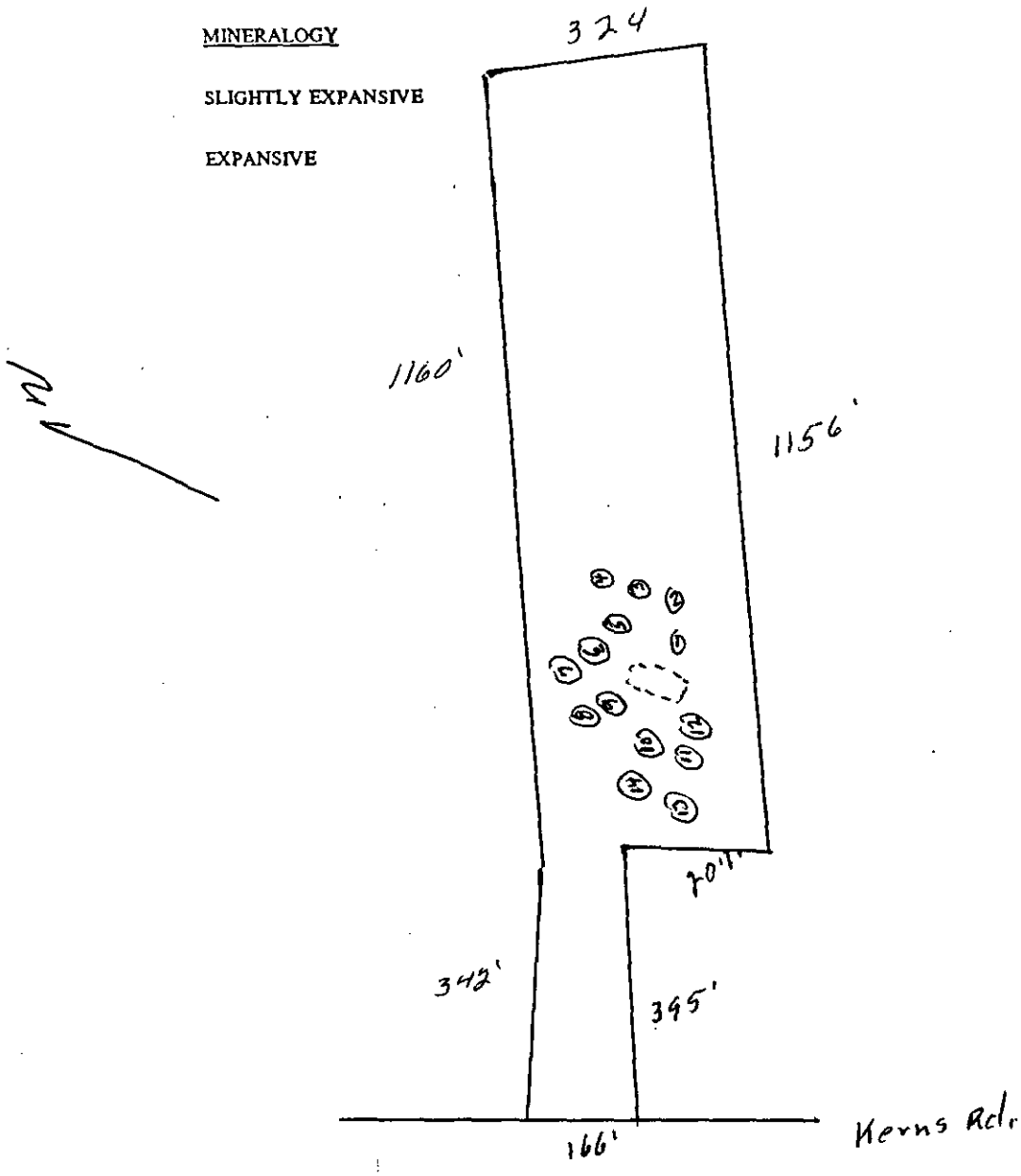
STRUCTURE

SG-SINGLE GRAIN
M-MASSIVE
CR-CRUMB
GR-GRANULAR
SBK-SUBANGULAR BLOCKY
ABK-ANGULAR BLOCKY
PL-PLATY
PR-PRISMATIC

MINERALOGY

SLIGHTLY EXPANSIVE

EXPANSIVE



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

Sheet: 1
Property ID: 017-012-05
Lot #:
File #: 4815B
Code: 1

# SOIL/SITE EVALUATION
# for ON-SITE WASTEWATER SYSTEM

Owner: Doris Hogue
Applicant: Mark Ebersold
Address: 1608 Sunset Road, Charlotte, N. C. 28216
Date Evaluated: 1/9/02
Proposed Facility: Residence
Design Flow (.1949): 480gpd
Property Size: approx. 1a. Inv.
Location of Site: ~~10428~~ 10436 Kerns Road
Property Recorded:
Water Supply: [ ] Public [ x ] Individual [ x ] Well [ ] Spring [ ] Other
Evaluation Method: [ x ] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [ ] Sewage [ ] Industrial Process [ ] Mixed

| PROFILE # | .1940 Landscape Position/ Slope% | Horizon Depth (IN.) | SOIL MORPHOLOGY .1941 Structure/ Texture | SOIL MORPHOLOGY .1941 Consistence Mineralogy | OTHER PROFILE FACTORS .1942 Soil Wetness/ Color | .1943 Soil Depth (IN.) | .1956 Sapro Class | .1944 Restr Horiz | Profile Class & LTAR |
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| 2 | " | 0-8 | GR/SCL | FR/SEXP/SS/SP | 2.5Y7/2@35" | 42 | " | " | US, IV .2G/DAY/FT$^2$ |
| | | 8-37 | SBK/SC | FI/SEXP/S/P | | | | | |
| | | 37-42 | SBK/SCL | FR/SEXP/SS/SP | | | | | |
| 3 | " | 0-7 | GR/SCL | FR/SEXP/SS/SP | 2.5Y7/1@28" | 34 | " | " | US, IV |
| | | 7-34 | SBKSC | FI/SEXP/S/P | | | | | |
| 4 | " | 0-8 | GR/SCL | FR/SEXP/SS/SP | >26" TO SOIL WETNESS | 26 | " | " | US, IV |
| | | 8-26 | SBK/C | FI//SEXP/S/P | | | | | |
| | | Some | platy structure | 22-24" | | | | | |
| 5 | " | 0-5 | GR/SCL | FR/SEXP/SS/SP | >42" TO SOIL WETNESS | 42 | " | " | PS, IV .275G/DAY/FT$^2$ |
| | | 5-37 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 37-42 | SBK/CL | FR/SEXP/SS/SP | | | | | |
| 6 | " | 0-7 | GR/SCL | FR/SEXP/SS/SP | >47" TO SOIL WETNESS | 47 | " | " | " |
| | | 7-47 | SBK/C | FI/SEXP/S/P | | | | | |
| 7 | " | 0-6 | GR/SCL | FR/SEXP/S/P | >48" TO SOIL WETNESS | 48 | " | " | PS, IV .3G/DAY/FT$^2$ |
| | | 6-48 | SBK/C | FI/SEXP/S/P | | | | | |
| 8 | " | 0-7 | GR/SCL | FR/SEXP/SS/SP | " | " | " | " | " |
| | | 7-48 | SBK/C | FI/SEXP/S/P | | | | | |

| Description | Initial System | Repair System |
|---|---|---|
| Available Space (.1945) | PS | PS |
| System Type(s) | | |
| Site LTAR | .3G/DAY/FT$^2$ | .3G/DAY/FT$^2$ |

Other Factors (.1946):
Site Classification (.1948): PROVISIONALLY SUITABLE
Evaluated By: W. R. Marlin, LSS, 1/10/02, W. R. Marlin
Others Present:

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

Sheet: 2
Property ID: 017-012-05
Lot #:
File #: 4815B
Code: 1

# SOIL/SITE EVALUATION
# for ON-SITE WASTEWATER SYSTEM

Owner: Applicant:
Address: Date Evaluated:
Proposed Facility: Design Flow (.1949): Property Size:
Location of Site: Property Recorded:
Water Supply: [ ] Public [x ] 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 | .1941 Consistence Mineralogy | OTHER PROFILE FACTORS .1942 Soil Wetness/ Color | .1943 Soil Depth (IN.) | .1956 Sapro Class | .1944 Restr Horiz | Profile Class & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| 9 | 5-15 LS | 0-6 | GR/SCL | FR/SEXP/SS/SP | >48' TO SOIL WETNESS | 48+ | N/A | NONE | PS, IV .3G/DAY/FT$^2$ |
| | | 6-48 | SBK/C | FI/SEXP/S/P | | | | | |
| 10 | R | 0-5 | GR/SCL | FR/SEXP/SS/SP | >43" TO SOIL WETNESS | 43 | " | " | " |
| | | 5-37 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 37-43 | SBK/SCL | FR/SEXP/SS/SP | | | | | |
| 11 | " | 0-4 | GR/SCL | FR/SEXP/SS/SP | >48" TO SOIL WETNESS | 48+ | " | " | " |
| | | 4-33 | SBK/C | FI/SEXP/SS/SP | | | | | |
| | | 33-48+ | SBK/SCL | FR/SEXP/SS/SP | | | | | |
| 12 | " | 0-5 | GR/SCL | FR/SEXP/SS/SP | >45" TO SOIL WETNESS | 45 | " | " | " |
| | | 5-31 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 31-45 | SBK/SCL | FR/SEXP/SS/SP | | | | | |
| 13 | LS | 0-3 | GR/SCL | FR/SEXP/SS/SP | >31" TO SOIL WETNESS | 31 | " | " | US, IV .3G/DAY/FT$^2$ |
| | | 3-28 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 28-31 | SBK/SCL | FR/SEXP/SS/SP | | | | | |
| 14 | LS | 0-5 | GR/SCL | FR/SEXP/SS/SP | .48" TO SOIL WETNESS | 48+ | " | " | PS, IV .3G/DAY/FT$^2$ |
| | | 5-39 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 39-48+ | SBK/SCL | FR/SEXP/SS/SP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| Description | Initial System | Repair System |
|---|---|---|
| Available Space (.1945) | | |
| System Type(s) | | |
| Site LTAR | | |

Other Factors (.1946): _____
Site Classification (.1948):
Evaluated By:
Others Present:

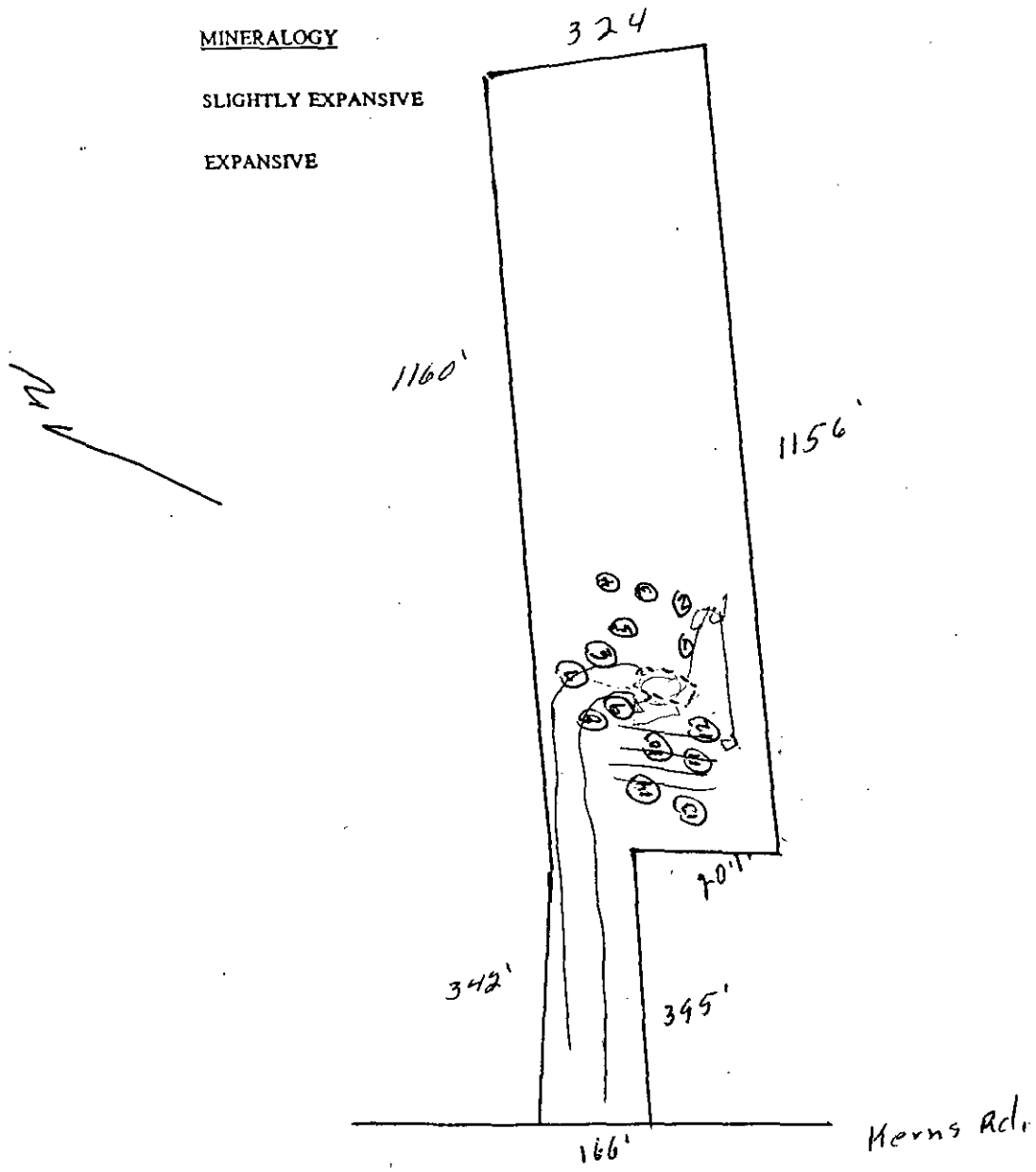
FILE # 4915B

COMMENTS 100% Repair

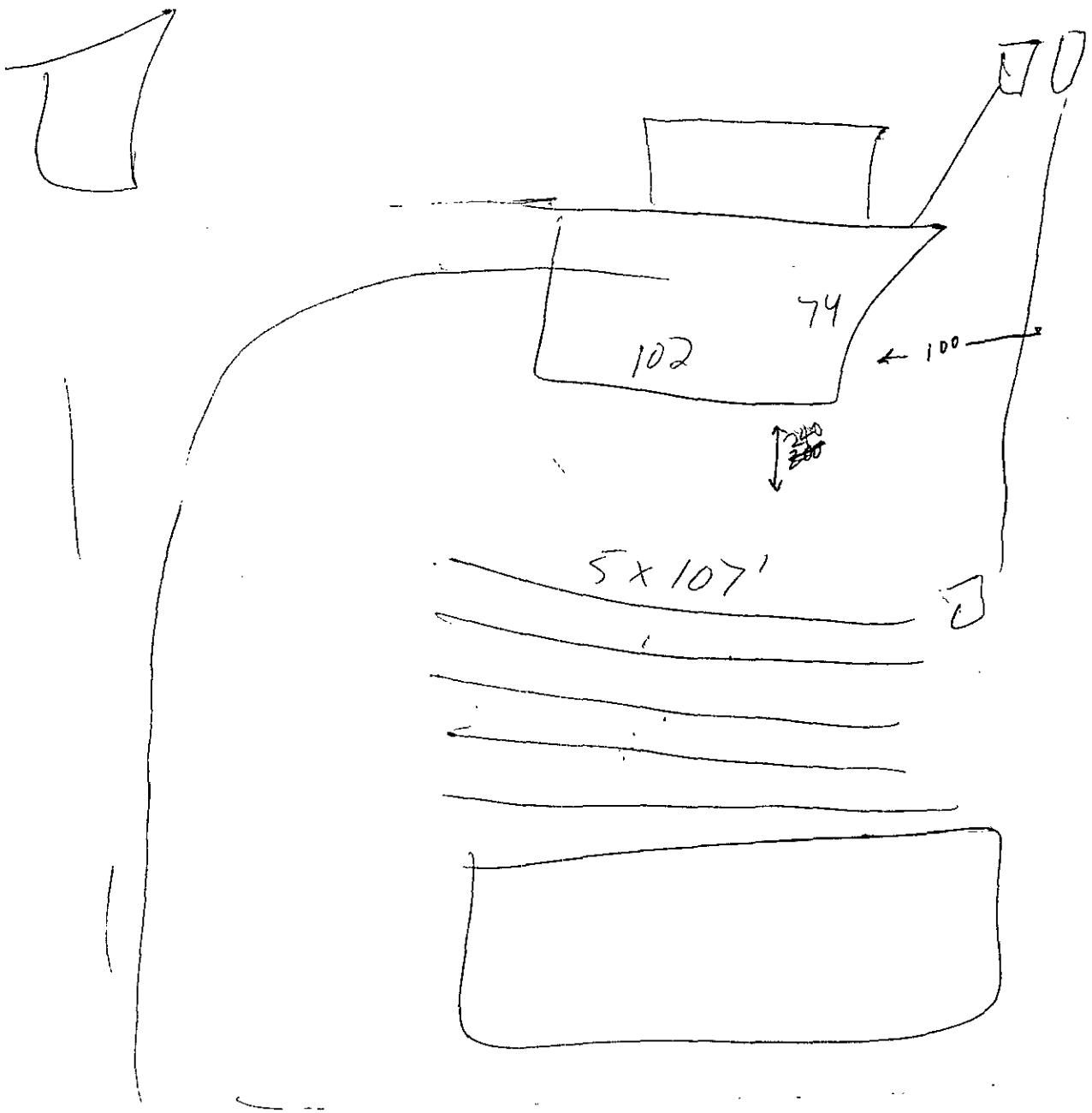
| LANDSCAPE POSITION | GROUP | TEXTURE | .1955 LTAR |
|---|---|---|---|
| R-RIDGE | I | S-SAND | 1.2-0.8 |
| S-SHOULDER SLOPE | | LS-LOAMY SAND | |
| L-LINEAR SLOPE | | | |
| FS-FOOT SLOPE | II | SL-SANDY LOAM | 0.8-0.6 |
| N-NOSE SLOPE | | L-LOAM | |
| H-HEAD SLOPE | | | |
| CC-CONCLAVE SLOPE | III | SI-SILT | 0.6-0.3 |
| CV-CONVEX SLOPE | | SICL-SILTY CLAY LOAM | |
| T-TERRACE | | CL-CLAY LOAM | |
| FP-FLOOD PLAIN | | SCL-SANDY CLAY LOAM | |
| | IV | SC-SANDY CLAY | 0.4-0.1 |
| | | SIC-SILTY CLAY | |
| | | O-ORGANIC | |

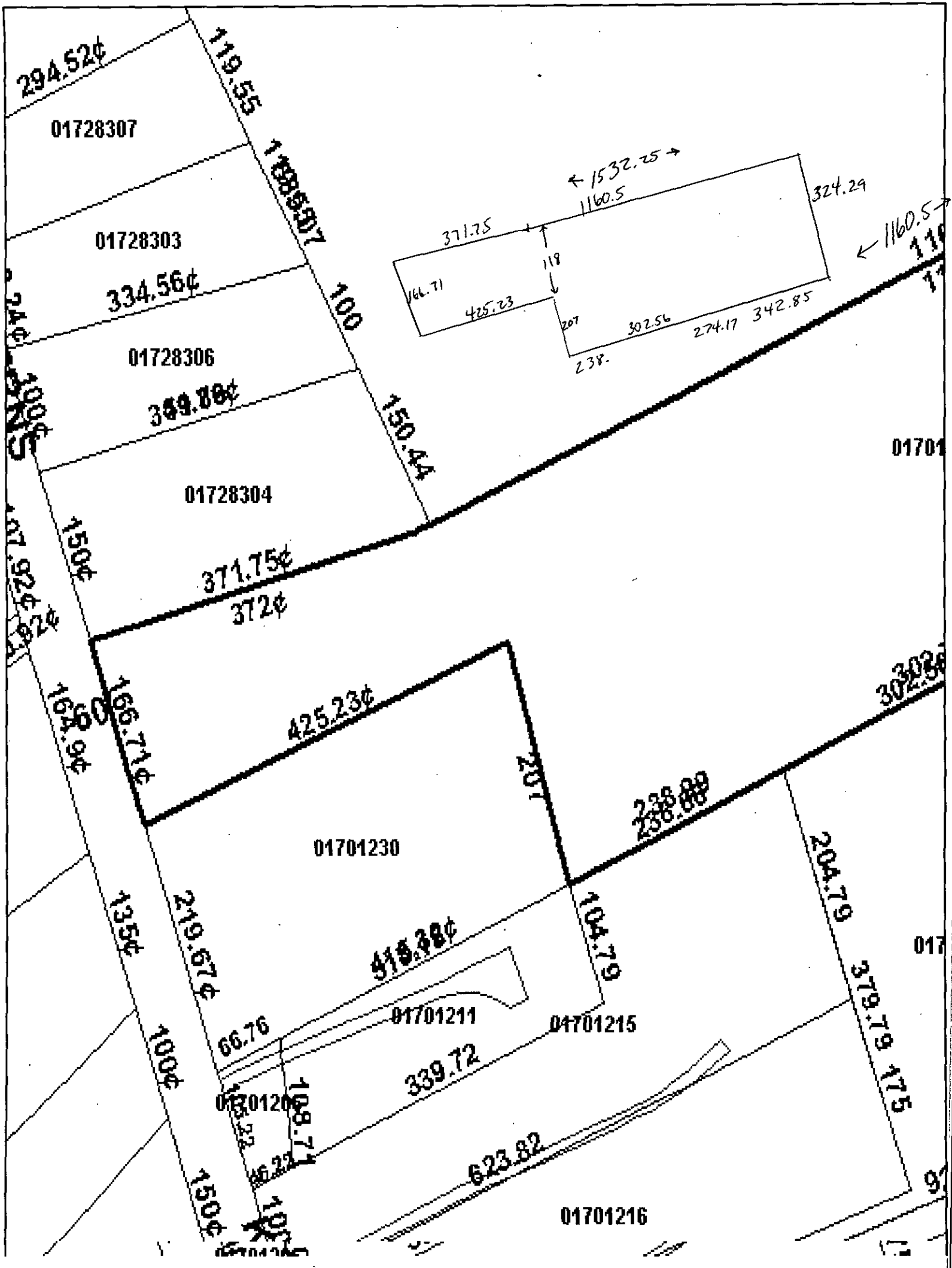
| CONSISTENCE MOIST | CONSISTENCE WET |
|---|---|
| VFR-VERY FRIABLE | NS-NON-STICKY |
| FR-FRIABLE | SS-SLIGHTLYSTICKY |
| FI-FIRM | S-STICKY |
| VFI-VERY FIRM | VS-VERY STICKY |
| EFI-EXTREMELY FIRM | NP-NON-PLASTIC |
| | SP-SLIGHTLYSTICKY |
| | P-PLASTIC |
| | VP-VERY PLASTIC |

| STRUCTURE | MINERALOGY |
|---|---|
| SG-SINGLE GRAIN | SLIGHTLY EXPANSIVE |
| M-MASSIVE | |
| CR-CRUMB | EXPANSIVE |
| GR-GRANULAR | |
| SBK-SUBANGULAR BLOCKY | |
| ABK-ANGULAR BLOCKY | |
| PL-PLATY | |
| PR-PRISMATIC | |



9




294.52¢
01728307
119.55
01728303
334.56¢
100
01728306
369.86¢
150.44
01728304
150¢
371.75¢
372¢
1532.25
1160.5
324.29
371.75
118
166.71
425.23
207
302.56
274.17
342.85
238.
1160.5
425.23¢
166.71¢
01701230
207
236.88
236.88
219.67¢
135¢
415.38¢
104.79
204.79
379.79
175
66.76
01701211
01701215
339.72
108.71
623.82
100¢
150¢
01701216

FEE: _____
DATE: _____

# APPLICATION FOR IMPROVEMENT PERMIT FOR RESIDENTIAL SITE INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM

Received 12/31/01 1 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 #: 4815B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 01701205

STREET ADDRESS: ~~10428~~ 10436 Kerns Rd. Huntersville

SUBDIVISION OR MOBILE HOME PARK NAME: N/A

LOT NUMBER:

TOWNSHIP (CHECK ONE):

__ 0 MECKLENBURG
__ 1 CHARLOTTE
__ 2 DAVIDSON
__ 3 CORNELIUS
__ 4 PINEVILLE
__ 5 MATTHEWS
✓ 6 HUNTERSVILLE
__ 7 MINT HILL

CLOSING DATE Jan. 30 2002

TYPE OF BUILDING (CHECK ONE):

__ SINGLE MOBILE HOME(S)
__ DOUBLE WIDE (D)
✓ HOUSE (H)
__ MODULAR HOME (M)
__ MULTIPLE FAMILY (U)
__ OTHER (O)

Plus barn + storage buildings

HEATED SQUARE FOOTAGE: 7,000 square feet

NUMBER OF BEDROOMS: 5 NUMBER OF OCCUPANTS: 5

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:

N/A

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

To the best of my knowledge

PROPERTY OWNER: (power of attorney)

NAME: (LAST) Hoque (FIRST) Doris (MI) Agent - Laura Moore

ADDRESS: 1608 Sunset Road

CITY: Charlotte STATE: NC ZIP: 28216

DAYTIME PHONE: 704, 399-4848 (Laura Moore)

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) Ebersold (FIRST) mark (MI) S

DAYTIME PHONE: (704) 383-7761

Property is under a sales contract

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? unknown

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: Mark E

DATE: 12/31/01

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

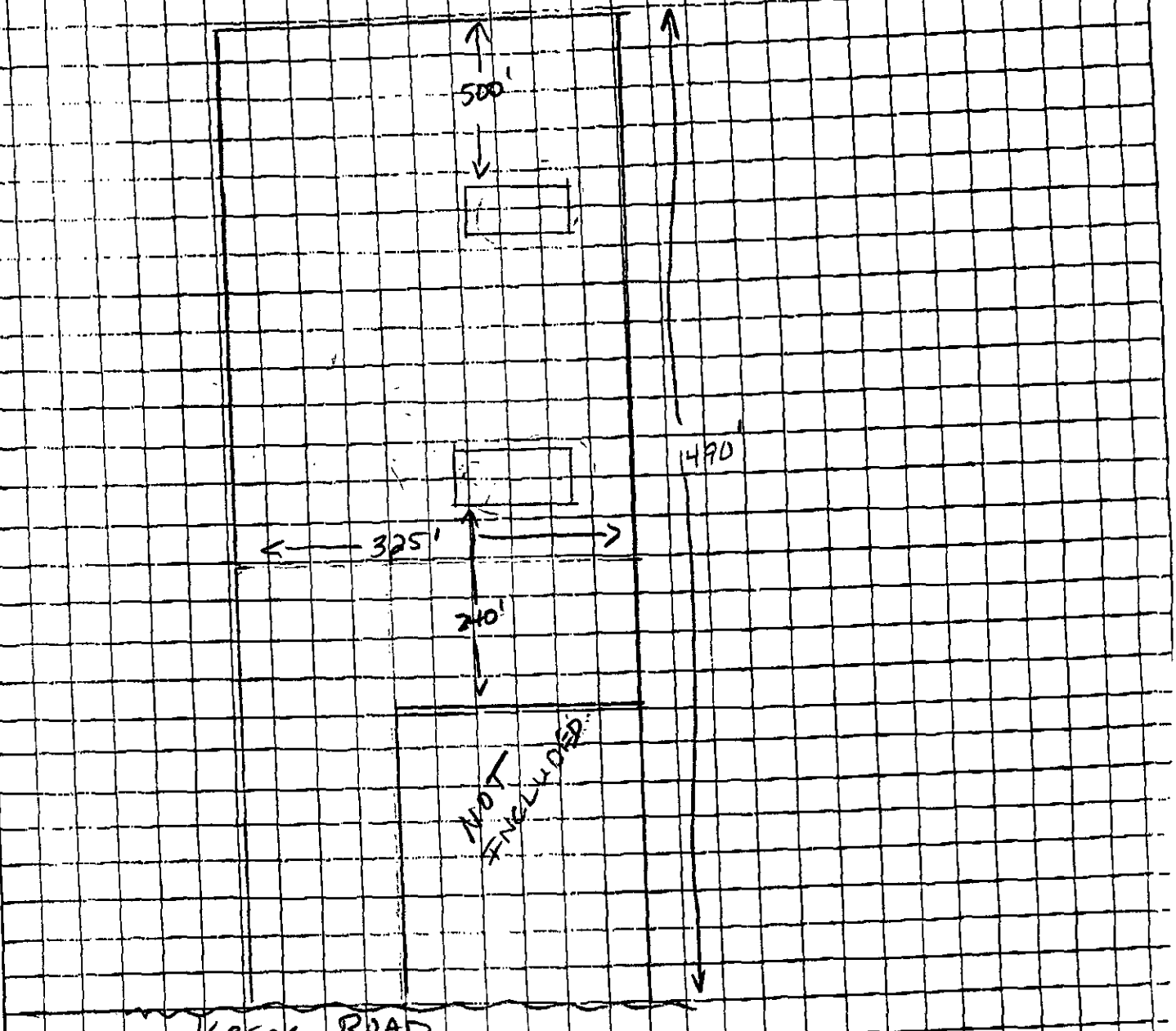
# PROPOSED PLOT PLAN

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

FILE: 4815 B

TC: 017-012-05

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.




OWNER/AGENT SIGNATURE

DATE

APPROVAL DATE

Proposed house approx. 240 ft from front parcel. Proposed barn approx. 500ft from rear boundary line.

Canary - E.H.S. Copy

Pink - Owner's C