28 MAR '16 PM 2:29

15767 # 8139

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
ADDITION OR RENOVATION WITH NO OCCUPANCY INCREASE
EXCHANGE MOBILE HOME (SAME # BEDROOMS)
COMMERCIAL OR INDUSTRIAL

PERSON FILING APPLICATION:
NAME: Francisco J Garcia
ADDRESS: 16325 Peach Grove LN
CITY: Charlotte
STATE: NC ZIP: 28277
PHONE: 704-858-0510
ALTERNATE PHONE:
E-MAIL: Smashburgersfg@Gmail.com

PROPERTY OWNER: SAME AS PERSON FILING APPLICATION
NAME: Francisco J Garcia
ADDRESS: 16325 Peach Grove LN
CITY: Charlotte
STATE: NC ZIP: 28277
PHONE: 704-858-0510
ALTERNATE PHONE:
E-MAIL: Smashburgersfg@Gmail.com

JOB LOCATION INFORMATION
TAX PARCEL #: 22327111
STREET ADDRESS: 16325 Peach Grove LN
CITY: Charlotte
STATE: NC ZIP: 28277

SUBDIVISION OR MOBILE HOME PARK NAME: Farming
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: 5
NUMBER OF OCCUPANTS: 3

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.

Francisco J Garcia — Owner's/Agent's Signature
3/28/16 — Date

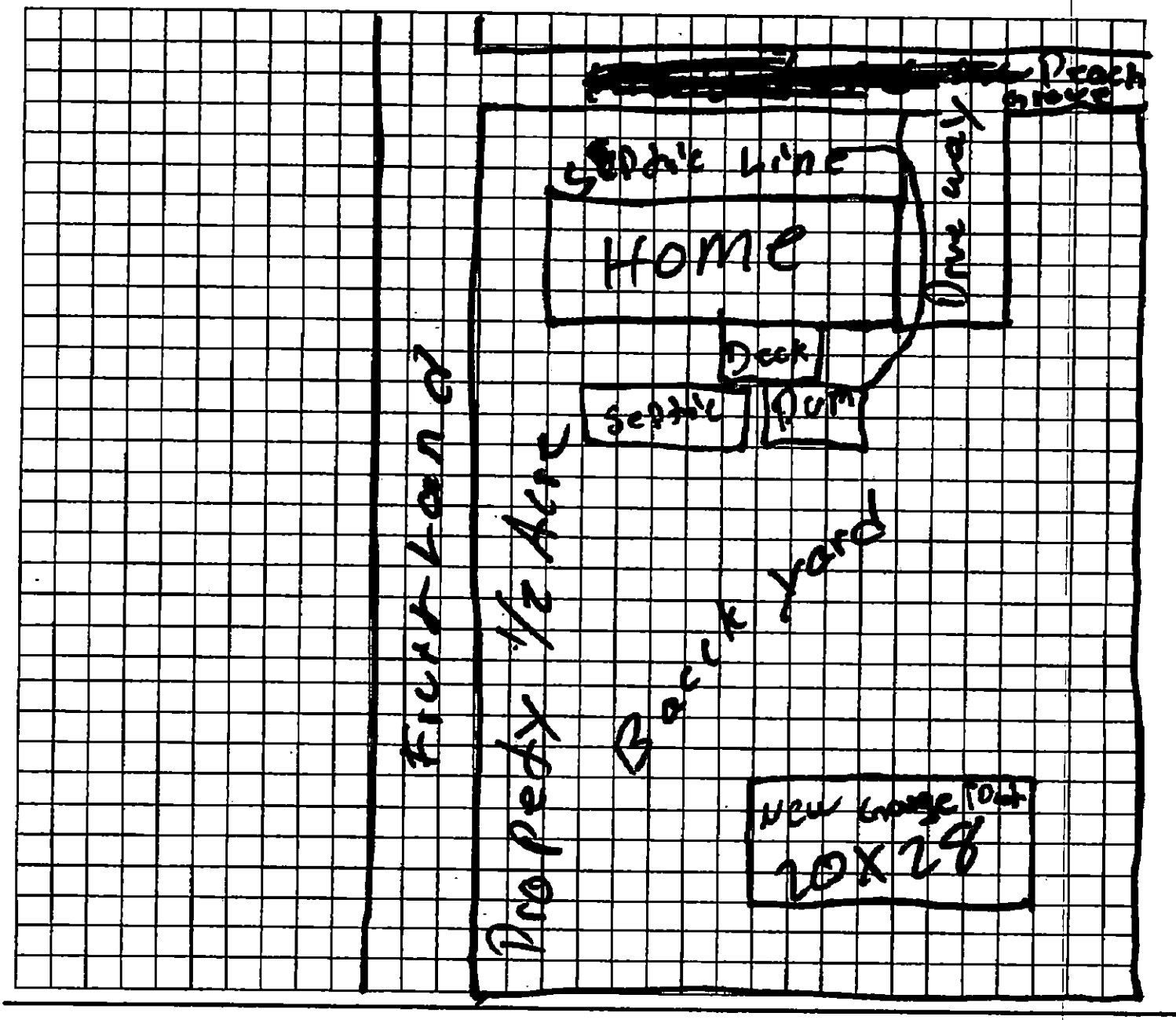
A PROPOSED PLOT PLAN (see page 2) is required to be submitted with each application.

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: 10325 Peach Grove LN Tax Parcel #: _____



"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

Permit approved. Construction meets required setback to wastewater system

~~Approved~~ ~~Date~~ 3/28/16

REHS Signature Date

4/6/16

Bradley W. Hallman

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

Revised on: 01/03/11

Payment Receipt

Mecklenburg County POS

Environmental Health
700 N. Tryon Street
Charlotte, NC 28202
Phone: 704-336-5100

Enter Account # or Customer Name Here:
FRANCISCO GARCIA

Bill To:

FRANCISCO GARCIA
16325 PEACH GROVE LN

Charlotte, NC 28277

Single Payment

Transaction Date: 04/01/2016 12:29 PM Pacific Time
Pay Method: VISA **********2840
Approval #: 122098
Trace Number: 56681c16-24fb-43d9-8454-6dc5cb4a6728
Amount: $100.00

Payment Amount: $100.00

Total: $100.00

Thank you for your payment.

Supervisor/Administrative Professional Checklist

New Septic ☐ New Well ☐ Use Existing ☑ Alteration ☐ Modified Plot Plan ☐

New Septic Fees Paid:

IP ($250.00) _____ Initials/Date

CA ($200.00) _____ Initials/Date

OP ($200.00) _____ Initials/Date

(CA and OP fees need to be paid before a building permit can be issued)

New Well Fee Paid: $550.00 _____ Initials/Date

Use Existing Fee Paid: $100.00 4/4/16 LE Initials/Date

Alteration Fee Paid: $300.00 (Total) $200 (If use existing was paid) _____ Initials/Date

Modified Plot Plan Fee Paid: $100.00 _____ Initials/Date

Floor plans need to be submitted and reviewed before CA can be issued. ☐ Reviewed ☐ ____

This site is served by septic and well. Verify each is complete before final hold is released. ☐

Septic file completed. ☐ _____ Well file completed. ☐ _____

Send permit for signature. ☐ Signature received. ☐ _____

This septic system requires a certified operator contract before final hold is released. ☐

Certified operator contract is on file. ☐ _____