

10328 PLAZA RD EXT

10812103

12/26/2007

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: 1910 B DATE: 7-25-05

TC: 108-121-03 ☐ L ☐ CRT

SERIAL 19564

Name of Owner IGLESIA DE DIOS NUEVA VIDA Juris.:

Address of Property 10328 PLAZA ROAD EXTENSION

Inspection Data:

Tank Material EXISTING

Total Length of Drainfield ADDED 4 LINES

Number of Lines 4 @ 101'

Cover Depth 12"

Water Supply Source

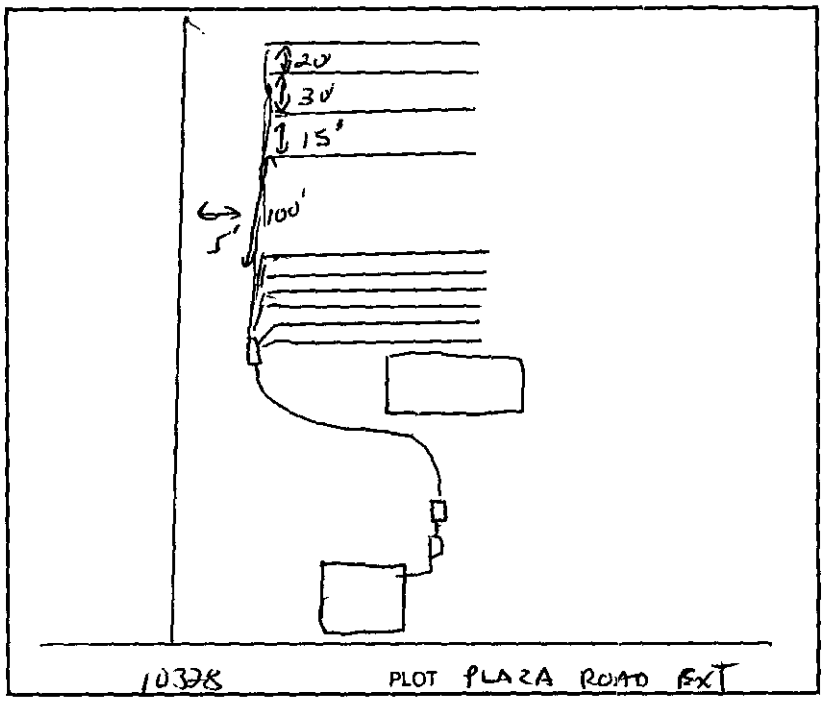
Distance to Water Source >100'

Excavation Inspected 7-25-05

Tank(s) Inspected EXISTING 11/21/06

Wash Line Inspected N/A

High Water Alarm Inspected 11/21/06



Design 2006, III B,G, INW. ; EZ, 404', EXISTING ST & PT. CTR# ROBBIE RAY

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: TYPE III-B, G. 4 LINES added @ 101' EACH., 5 EXISTING 133' CUT OFF. NEW RISER INSTALLED. ALL ELECTRICAL COMPONETS ENCLOSED. SUPPLY LINE ENCLOSED.

Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

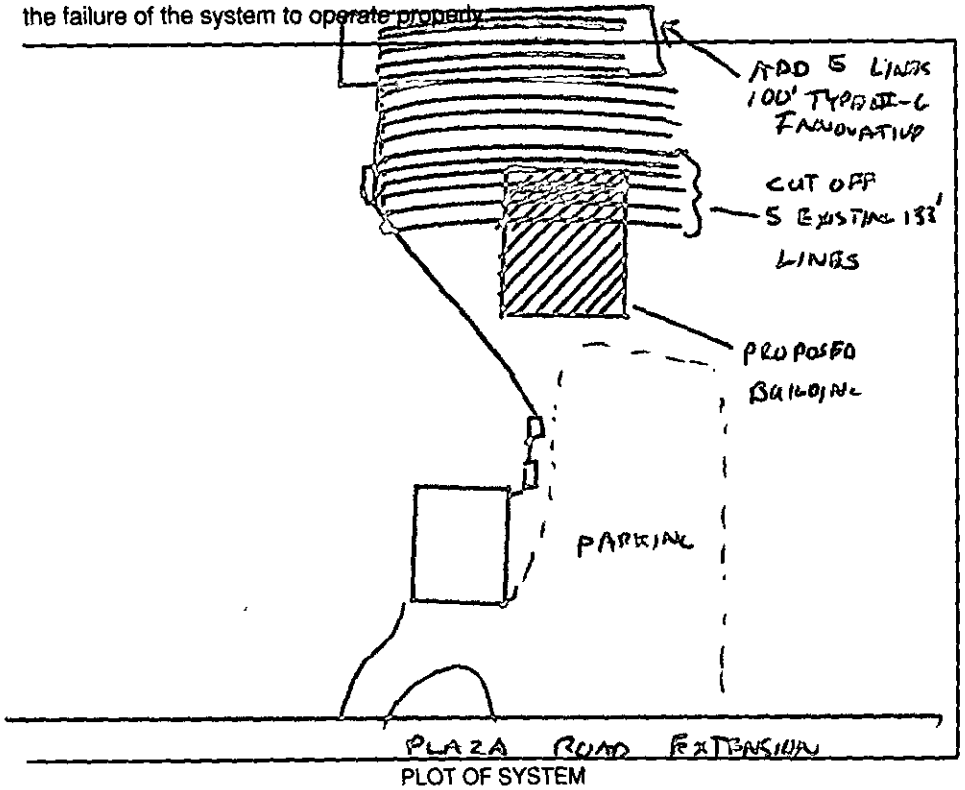
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5103

FILE: 19108 DATE: 6-29-05

TC: 108-121-03 ☐ L

SERIAL № 20032

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 3-23-05. All work shall be completed on or before _____, 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 EXISTING gallons

Liquid Capacity of Dosing Tank EXISTING gallons

Tank Construction -

Trench Depth 30"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous YES

Total Line Length 500 feet

Number of Lines 5

Depth of Stone AIA inches

Distance from House 5' feet

Distance from Property Line 10 feet

Distance from Well >50' feet

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

NAME OF OWNER IGLESIA DE DIOS NUEVA VIDA

LOCATION OF PROPERTY 10328 PLAZA ROAD EXTENSION.

Comments: (1) RE-ROUTE 2" SUPPLY LINE IF IT IS UNDER PROPOSED BUILDING (2) CUT-OFF 5 EXISTING 133' LINES AND REPLACE WITH (5) 100' TYPE II-C INNOVATIVE LINES. (3) NEW PRESSURE MANIFOLD MAY BE REQUIRED (4) INSTALL NEW RISER OVER PUMP TANK

Frank A. Adler
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

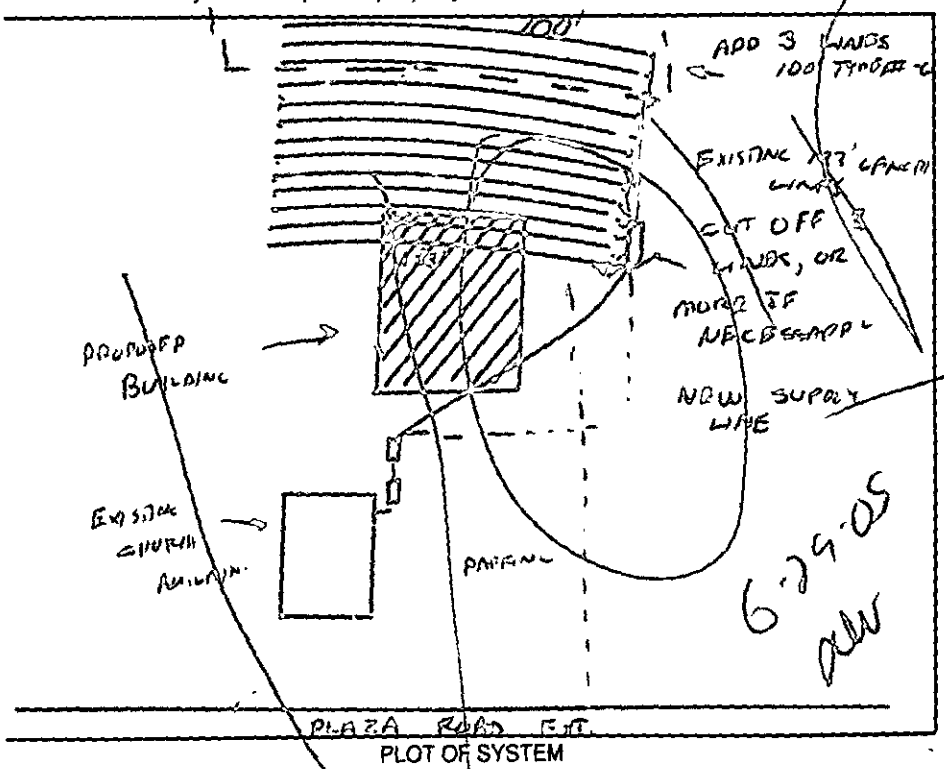
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5103

FILE: 1910 B DATE: 4-27-05

TC: 108-01-03 ☐ L

SERIAL Nº 20037

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 3-22-05. All work shall be completed on or before _____, 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 EXISTING gallons

Liquid Capacity of Dosing Tank _____ gallons

Tank Construction _____

Trench Depth 30'

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous YES

Total Line Length ~~300~~ 300 feet

Number of Lines 3

Depth of Stone NA inches

Distance from House 5' feet

Distance from Property Line 10' feet

Distance from Well > 100' feet

* TYPE III-6 INNOVATOR *

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

NAME OF OWNER IGLESIA DE DIOS NUEVA VIDA

LOCATION OF PROPERTY 10328 PLAZA ROAD EXT.

Comments: (1) REROUTE 2" SUPPLY LINE

(2) CUT OFF 3 LINES, MORE IF NECESSARY AND RE-LOCATE AS SHOWN

(3) NEW PRESSURE MANIFOLD MAY BE NECESSARY

(4) INSTALL NEW RISER OVER PUMP TANK W/ SECURE LID.

(5) CONTRACTOR

Environmental Health Specialist

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

GWS- COM. APP 12/04

JKA
SEPTIC FEE: 300.00
DATE: 3/23/05
CK # / Check 25836

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

FILE # 19108

WELL FEE:
DATE:
CK #

SEPTIC / TYPE APPLICATION: ☐ NONE ☐ NEW SYSTEM EXISTING SYSTEM ☑ EXPANSION/ALTERATION ☐ REPAIR

WELL / TYPE APPLICATION: ☐ NONE ☐ NEW WELL ☐ MAJOR REPAIR ☐ ABANDONMENT

3-24-05

OSU NOP -

I FLAGGED FIRST LINE/CLOSEST TO PROPOSED BUILDING - BUILDING NOT MARKED OR STAKED OFF -

RET
3/24/05 P.C. TO DANIEL L.M.
3-25
4-1-05 P.C. TO DANIEL L.M.

INESS:
NASIUM
☐ INDUSTRIAL
ACILITY: 8220
S PER SHIFT:

USTRIAL PROCESS WASTEWATER
SED IN THE FACILITY?:
☐ BASEMENT WITH PLUMBING
☐ BASEMENT WITH NO PLUMBING

EASED WASTEWATER FLOW AND/OR

☐ OTHER 'SPRINGS' (O)
☐ OTHER

PROPOSED USE OF WELL: ☐ N/A ☐ IRRIGATION ☐ POTABLE ☐ GEOTHERMAL

ARE ANY OF THE FOLLOWING LOCATED ON THE PROPERTY? IF SO, PLEASE SHOW LOCATION ON SITE PLAN/PLAT.

BURIED CABLES, LANDFILLS, STUMPHOLES	☐ YES	☑ NO	WELLS, SPRINGS, OR WATER LINES	☑ YES	☐ NO
EXISTING WASTEWATER SYSTEMS	☐ YES	☑ NO	DESIGNATED WETLANDS	☐ YES	☑ NO
EASEMENTS OR RIGHT-OF-WAYS	☐ YES	☑ NO	GRADING/SOIL REMOVAL PERFORMED	☑ YES	☐ NO

PROPERTY OWNER:
NAME: IGLESIA DE DIOS NUEVA VIDA (NEW LIFE CHURCH OF GOD)
ADDRESS: 10324 PLAZA RD. EXT.
CITY: CHARLOTTE,
STATE: NC ZIP: 28270
HOME PHONE: WORK PHONE: 704-
MOBILE PHONE: FAX:

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:
NAME: CRESCENT METAL STRUCTURES, INC.
ADDRESS: PO BOX 847
CITY: LOWELL
STATE: NC ZIP: 28098
HOME PHONE: 704-824-20 WORK PHONE:
MOBILE PHONE: 704-913-8984 FAX: 704-824-2049

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?
WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY? ASAP

*An Improvement Permit is subject to suspension or revocation if the 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 the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Daniel R. Ortiz III 3/23/05
Owner's/Agent's Signature Date

NORTH CAROLINA DEPARTMENT OF
ENVIRONMENT & NATURAL RESOURCES DIVISION
OF ENVIRONMENTAL HEALTH ON-SITE
WASTEWATER SECTION

*A Well Permit is subject to suspension or revocation if the 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 the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Owner's/Agent's Signature Date

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

SEE REVERSE SIDE

COPY

Type III Repair Area

Repression

Repair Area

133'
133'
133'
133'
133'
133'
133'
133'
133'

Laterals @ 133'/lng

S39°25'52"W
849.73'

pressure manifold

S07°45'49"W
942.68'

MAYFIELD P

GRAVEL PARKING

1500 ST
1500 PT

60.0'

CHURCH BLDG.
110.0'

SIDEWALK

H/C H/C

GRAVEL PARKING

69 SPACES

GRAVEL PARKING

Existing well

EXIST HOME

15.0' RAD.

SILT FENCE

proposed well if needed

GRAVEL PAD 20' X 80'

NOTE: SILT FENCE TO BE PLACED AT ADDITIONAL LOCATIONS AS NEEDED.

EXISTING DRIVE

5" RC

PLAZA ROAD EXT.

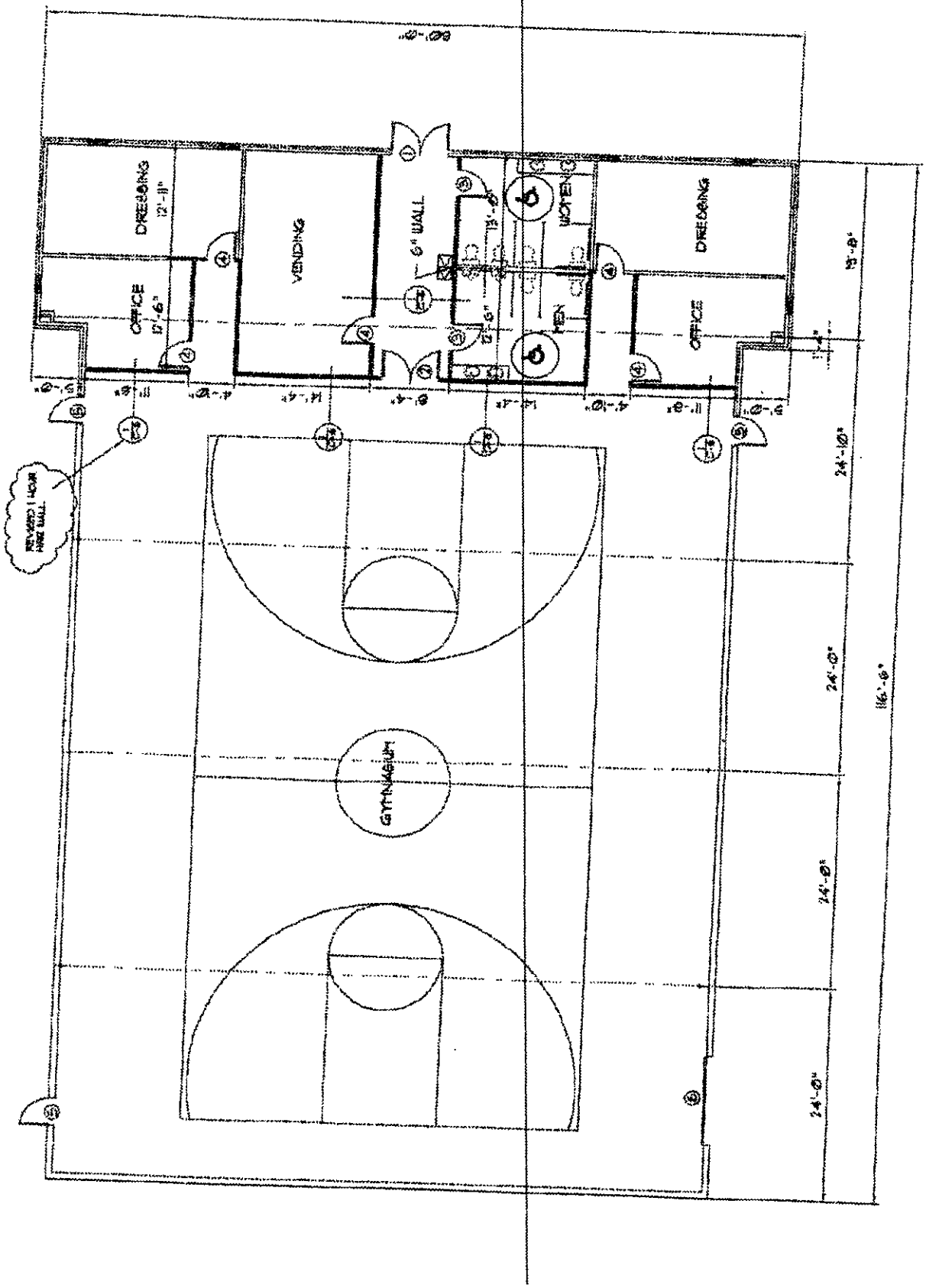
N59°30'00"W
500.97'

20.0' PAVED DRIVE

COMMENTS Septic system Designed for 240 seat church w/ Kitchen, Pressure Manifold Septic Design 1500 ST, 1500 DT, PI, Keep supply line > 30" under parking pavement / 10 lines x 133'long x 3'wd x 12"stone, 1333 TLF, TYPE III Repair Area, Municipal Water Keep septic system > 100' from any wells. Keep lines on contour of land

6/4/97

ATTN. Drew Walker



FLOOR PLAN

SCALE 1/8" = 1'-0"

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

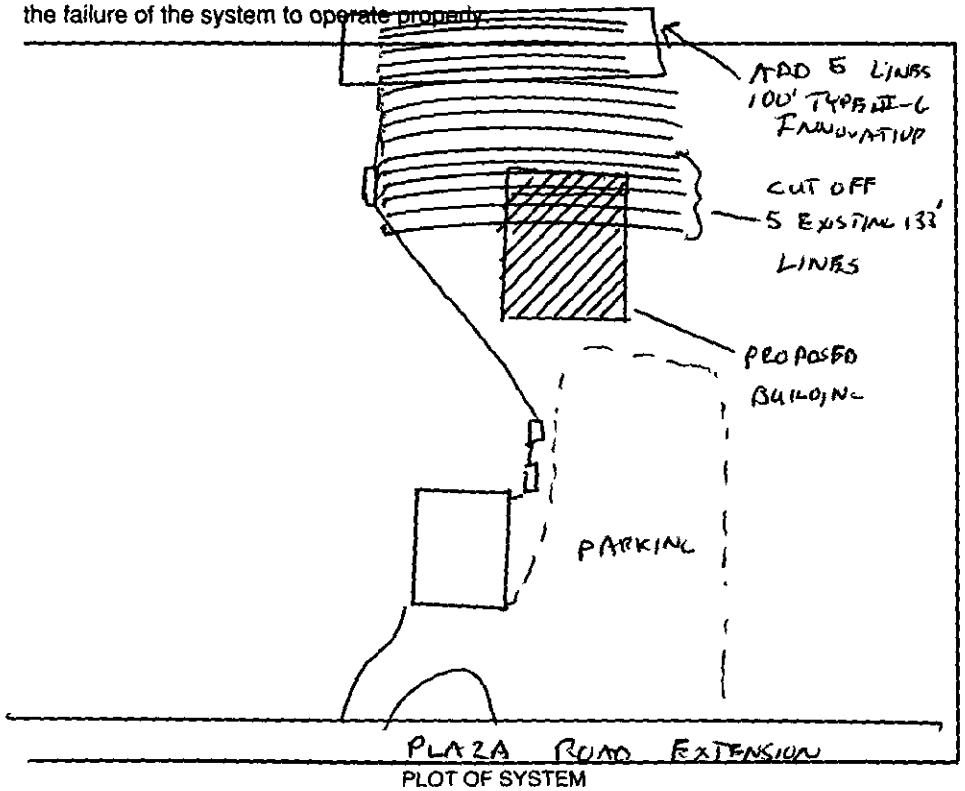
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5103

FILE: 1910B DATE: 6-29-05

TC: 108-121-03 ☐ L

SERIAL Nº 20032

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 3-23-05. All work shall be completed on or before _____, 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 EXISTING gallons

Liquid Capacity of Dosing Tank EXISTING gallons

Tank Construction -

Trench Depth 30"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous YES

Total Line Length 500 feet

Number of Lines 5

Depth of Stone NA inches

Distance from House 5' feet

Distance from Property Line 10 feet

Distance from Well 250' feet

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

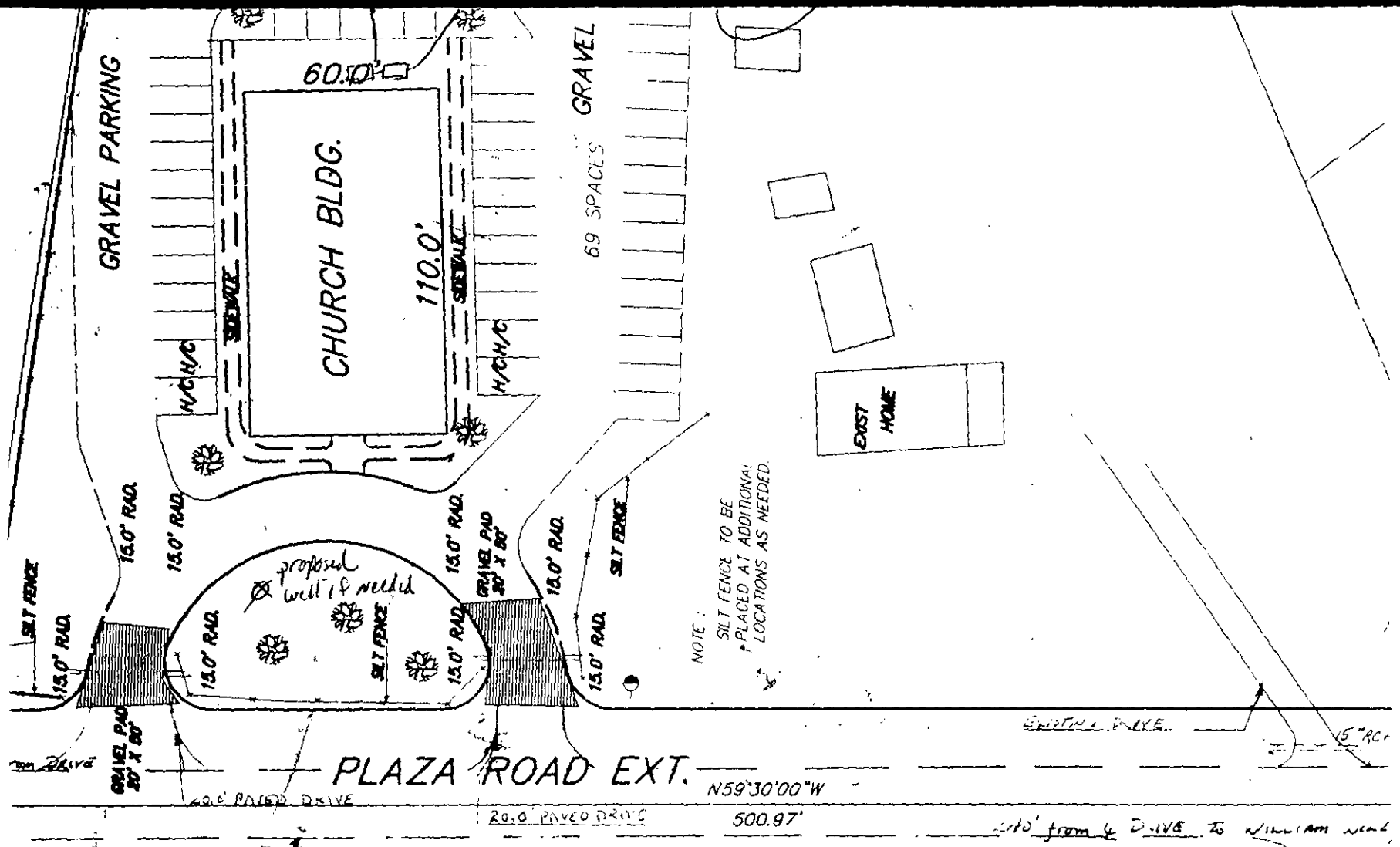
NAME OF OWNER IGLESIA DE DIOS NUEVA VIDA

LOCATION OF PROPERTY 10328 PLAZA ROAD EXTENSION,

Comments: (1) RE-ROUTE 2" SUPPLY LINE IF IT IS UNDER PROPOSED BUILDING (2) CUT-OFF 5 EXISTING 133' LINES AND REPLACE WITH (5) 100' TYPE III-C INNOVATIVE LINES. (3) NEW PRESSURE MANIFOLD MAY BE REQUIRED (4) INSTALL NEW RISER OVER PUMP TANK

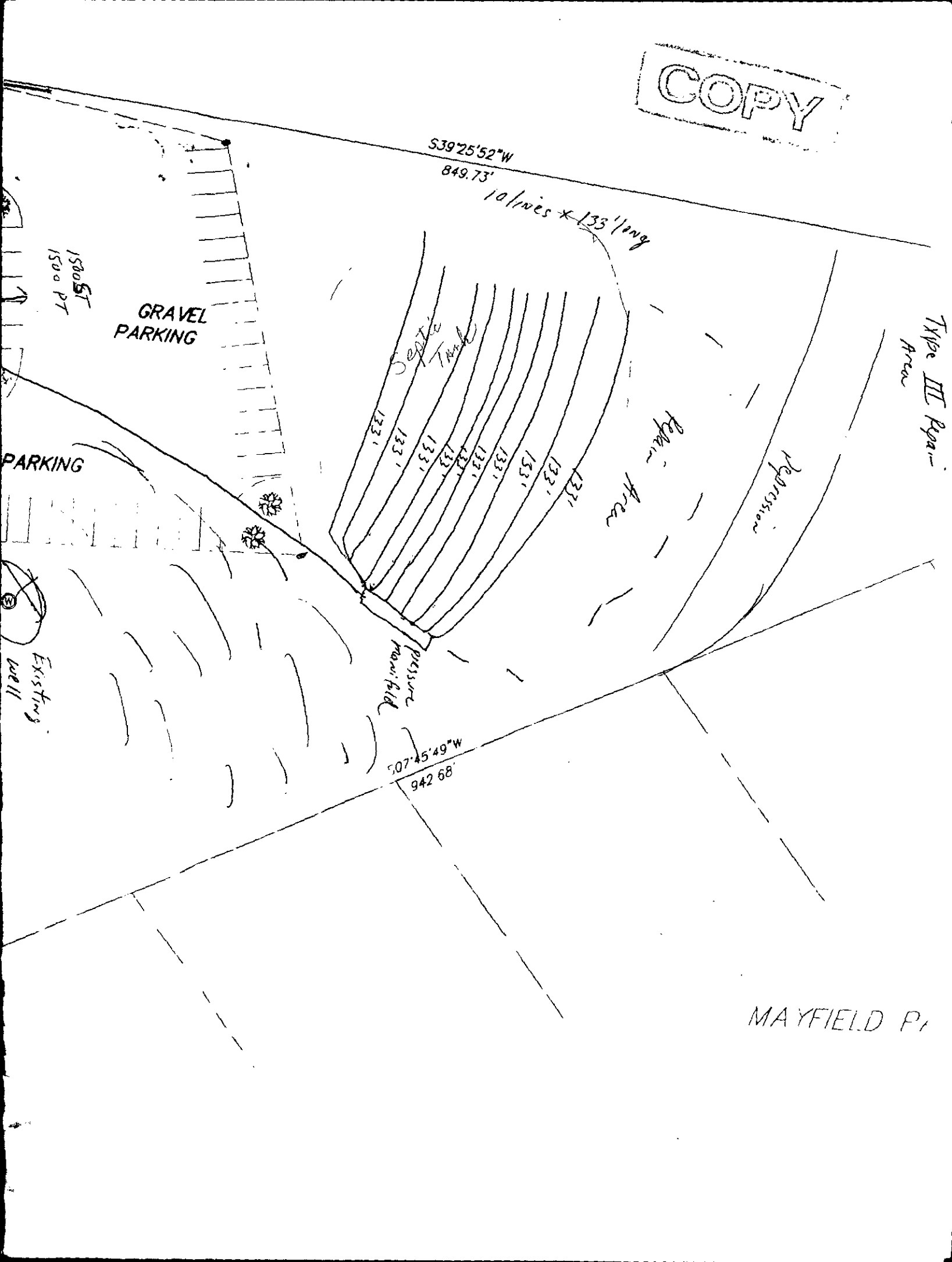
Environmental Health Specialist

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



COMMENTS Septic system designed for 240 seat church w/ Kitchen, Pressure Manifold Septic Design 1500 ST, 1500 DT, PI, Keep supply line > 30" under parking pavement / 10 lines x 133'long x 3'wd x 12" stone, 1333 TLF, Type III Repair Area, Municipal Water, Keep septic system > 100' from any wells. Keep lines on contour of land

6/4/97


COPY
S39°25'52"W
849.73'
10 lines @ 133' long
GRAVEL PARKING
PARKING
Septic Tank
133'
Repair Area
Depression
Type III Repair Area
Existing Well
Possible Mound Field
S07°45'49"W
942.68'
MAYFIELD PL

FEE: _____
DATE: _____

AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION

ACS JD

PERMIT NUMBER: 1910-B
PARCEL NUMBER: 10812103

JOB LOCATION ADDRESS: 10328 Plaza Road Extension
PROPERTY OWNER: Iglesia De Dios Nueva Vioa (New Life Church of God)
BUILDING CONTRACTOR: Cresent Metal Structures
SUBDIVISION NAME: _____
AUTHORIZATION ISSUED BY: Jackson A. Walker DATE: 05/03/05

DENR/DEH AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 1919-B, 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 THE 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 CONSTRUCTION AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. THIS CONSTRUCTION AUTHORIZATION AS PROVIDED IN G.S. 130A-335(f) AND G.S. 130A-336(b) SHALL BE VALID FOR A PERIOD EQUAL TO THE VALIDITY OF THE IMPROVEMENT PERMIT, NOT TO EXCEED 60 MONTHS.

5. OTHER CONDITIONS:
This is for an alteration to the septic tank system. No additional water usage.

GWS- COM. APP 12/04

JKA

SEPTIC FEE: 300.00
DATE: 3/23/15
CK [ ] Check 25836

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

FILE # 19108

WELL FEE: _____
DATE: _____
CRT [ ]

SEPTIC / TYPE APPLICATION: ☐ NONE ☐ NEW SYSTEM EXISTING SYSTEM : ☑ EXPANSION/ALTERATION ☐ REPAIR

WELL / TYPE APPLICATION: : ☐ NONE ☐ NEW WELL ☐ MAJOR REPAIR ☐ ABANDONMENT

JOB LOCATION INFORMATION

PROJECT TRACKING #:
TAX/PARCEL #:
STREET ADDRESS: 10324 PLAZA RD. EXT.
CITY: CHARLOTTE, NC
STATE: NC ZIP: 28270
LOT #:
TOWNSHIP:

☑ 1-MECKLENBURG ☐ 4-PINEVILLE
☐ 2-CHARLOTTE ☐ 5-MATTHEWS
☐ 2-DAVIDSON ☐ 6-HUNTERSVILLE
☐ 3-CORNELIUS ☐ 7-MINT HILL

BUILDING INFORMATION:

DESCRIBE TYPE OF BUSINESS: CHURCH GYMNASIUM
☑ COMMERCIAL ☐ INDUSTRIAL
SQUARE FOOTAGE OF FACILITY: 8220
NUMBER OF EMPLOYEES PER SHIFT:
NUMBER OF SHIFTS:
TYPE OF WASTEWATER:
☑ SEWAGE ☐ INDUSTRIAL PROCESS WASTEWATER
HOW WILL WATER BE USED IN THE FACILITY?:
☑ CONCRETE SLAB ☐ BASEMENT WITH PLUMBING
☐ CRAWLSPACE ☐ BASEMENT WITH NO PLUMBING

IF PLANNING TO EXPAND/ALTER THE EXISTING SYSTEM, INFORMATION DOCUMENTING THE INCREASED WASTEWATER FLOW AND/OR A JUSTIFICATION FOR SYSTEM ALTERATION WILL BE REQUIRED.

WATER SUPPLY:
☐ MUNICIPAL (M) ☑ PUBLIC (C) ☐ PRIVATE WELL (P) ☐ SHARED WELL (S) ☐ OTHER 'SPRINGS' (O)

PROPOSED USE OF WELL: ☐ N/A ☐ IRRIGATION ☐ POTABLE ☐ GEOTHERMAL ☐ OTHER

ARE ANY OF THE FOLLOWING LOCATED ON THE PROPERTY? IF SO, PLEASE SHOW LOCATION ON SITE PLAN/PLAT.

BURIED CABLES, LANDFILLS, STUMPHOLES	☐ YES	☑ NO	WELLS, SPRINGS, OR WATER LINES	☑ YES	☐ NO
EXISTING WASTEWATER SYSTEMS	☐ YES	☑ NO	DESIGNATED WETLANDS	☐ YES	☑ NO
EASEMENTS OR RIGHT-OF-WAYS	☐ YES	☑ NO	GRADING/SOIL REMOVAL PERFORMED	☑ YES	☐ NO

PROPERTY OWNER:

NAME: IGLESIA DE DIOS NUEVA VIDA (NEW LIFE CHURCH OF GOD)
ADDRESS: 10324 PLAZA RD. EXT.
CITY: CHARLOTTE,
STATE: NC ZIP: 28270
HOME PHONE: WORK PHONE: 704-
MOBILE PHONE: FAX :

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: CRESCENT METAL STRUCTURES, INC
ADDRESS: PO BOX 847
CITY: LOWELL
STATE: NC ZIP: 28098
HOME PHONE: 704-824-2049 WORK PHONE:
MOBILE PHONE: 704-913-8984 FAX: 704-824-2049

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?
WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?

*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 the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

David R. Crews III 3/23/15
Owner's/Agent's Signature Date

NORTH CAROLINA DEPARTMENT OF
ENVIRONMENT & NATURAL RESOURCES DIVISION
OF ENVIRONMENTAL HEALTH ON-SITE
WASTEWATER SECTION

*A Well 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 the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Owner's/Agent's Signature

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

COPY

Type III Repair Area

Depression

Repair Area

MAYFIELD PL

S39°25'52"W
849.73'

1 at lines @ 133' long

133'
133'
133'
133'
133'
133'
133'
133'
133'

Septic Tank

pressure manifold

N70°45'49"W
968.98'

GRAVEL PARKING

1500 ST
1500 PT

60.0'

CHURCH BLDG.

110.0'

SIDEWALK

H/C

GRAVEL PARKING

69 SPACES

GRAVEL PARKING

Existing well

EXIST HOME

15.0' RAD.

SILT FENCE

proposed well if needed

GRAVEL PAD 20' X 80'

NOTE: SILT FENCE TO BE PLACED AT ADDITIONAL LOCATIONS AS NEEDED

EXISTING DRIVE

5" RCP

PLAZA ROAD EXT.

N59°30'00"W

20.0' PAVED DRIVE

500.97'

240' from ℄ DRIVE to WILLIAM WAY

5' R.O.W.

COMMENTS Septic system designed for 240 seat church w/ Kitchen, Pressure Manifold Septic Design 1500 ST, 1500 DT, PI, Keep supply line > 30" under parking pavement, 10 lines x 133' long x 3' wd x 12" stone, 1333 TLF, Type III Repair Area, Municipal Water, Keep septic system > 100' from any wells. Keep lines on contour of land

6/4/97

COPY

Type III Repair Area

Repression

Repair Area

133'
133'
133'
133'
133'
133'
133'
133'
133'
133'

Laterals @ 133'/lng

S39°25'52"W
849.73'

pressure manifold

S07°45'49"W
942.69'

MAYFIELD P

GRAVEL PARKING

GRAVEL PARKING

GRAVEL PARKING

1500 ST
1500 PT

60.0'

CHURCH BLDG.

110.0'

SIDEWALK

H/C H/C

69 SPACES

Existing well

EXIST HOUSE

SILT FENCE

15.0' RAD.

proposed well if needed

GRAVEL PAD 20' X 80'

NOTE: SILT FENCE TO BE PLACED AT ADDITIONAL LOCATIONS AS NEEDED.

PLAZA ROAD EXT.

N59°30'00"W

500.97'

20.0' PAVED DRIVE

EXISTING DRIVE

15" RCP

COMMENTS Septic system designed for 240 seat church w/ Kitchen, Pressure Manifold Septic Design 1500 ST, 1500 DT, PI, Keep supply line > 30" under parking pavement / 10 lines x 133'/lng x 3'wd x 12" stone, 1333 TLF, Type III Repair Area, Municipal Water. Keep septic system > 100' from any wells. Keep lines on contour of land

6/4/97

MECKLENBURG COUNTY
Health Department

February 11, 2003

Jose Chacon
10324 Plaza Road Extension
Charlotte, NC 28215

Dear Mr. Chacon:

Our records indicate that the fee payment for the required inspection of the Type IIIb septic system, which serves as the wastewater treatment and disposal system for the New Life Church of God located at 10324 Plaza Road Extension, Charlotte, NC is past due.

Please return the enclosed bill with payment by 3/11/03.

Thank you for your time and cooperation. If you have any further questions you can contact me at (704) 336-5571.

Sincerely,

David Cornelius, R.S.I, Coordinator
Managed Systems Program
Individual Water and Wastewater Systems

Enclosure: Inspection Statement

INSPECTION STATEMENT
MECKLENBURG COUNTY HEALTH DEPARTMENT

Payment Past Due

Jose Chacon
10324 Plaza Road Extension
Charlotte, NC 28215

Please Make Check Payable To:

Mecklenburg County Health Department
700 N. Tryon Street Suite 211
Charlotte, NC 28202

Note: THIS COMPLETED FORM MUST ACCOMPANY PAYMENT!

DESCRIPTION OF PROPERTY

Name	Site Address	Tax Parcel	File Number	System Type
Jose Chacon	10324 Plaza Rd. Extension	10812103	1910B	IIIb
				Total Amount Due: $85.00

Please use the following space below, to make any corrections to property information.

Name _____

Site Address _____

_____

# of Bedrooms _____

BILL INFORMATION

Billing Date: 9/17/02

Payment Due Date: 3/10/03 **Past Due**

Direct Questions Concerning This Bill to .....(704) 336-5571

☐ *Please check if you have a well.*

Make Check Payable To Mecklenburg County Health Department
Your Cancelled Check Is Your Receipt

DO NOT SEND CASH

Parcel ID #: 10812103 GIS ID #: 10812103

Owner Name:	NEW LIFE CHURCH OF GOD
Mailing Address:	10324 PLAZA ROAD EXT CHARLOTTE, NC 28215-7726

Property Characteristics

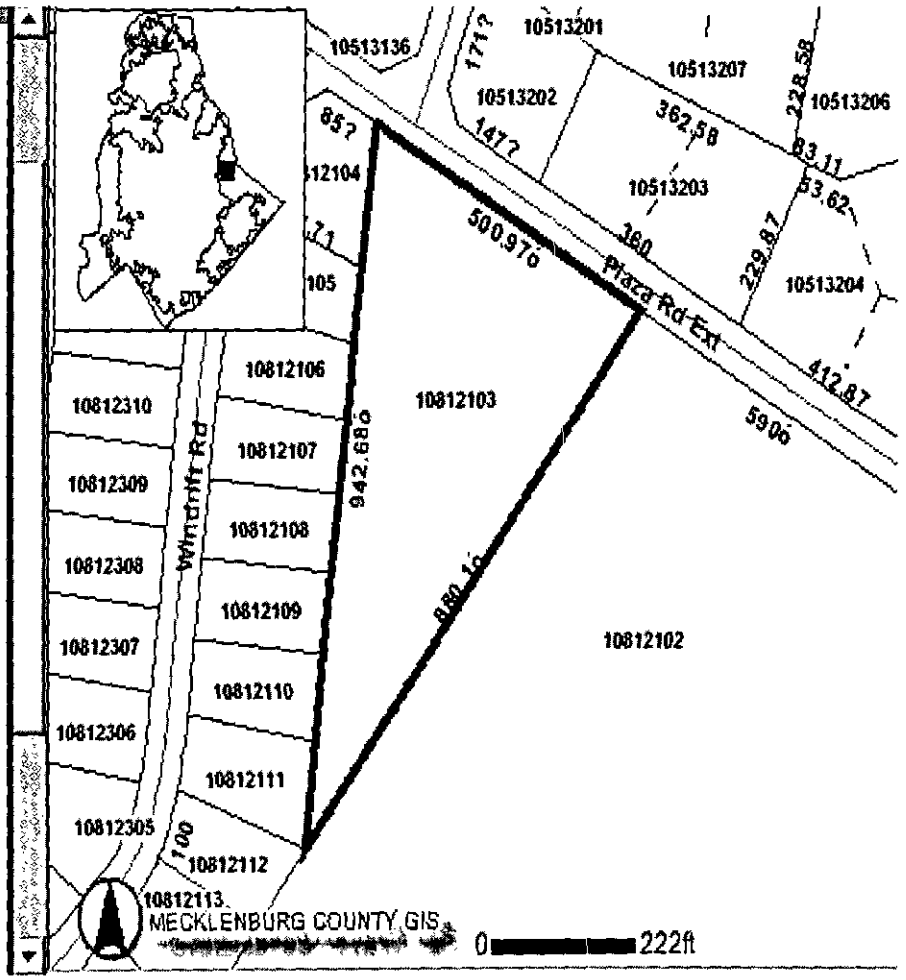
Legal Desc.:	NA
Land Area:	5AC
Fire District:	12-ROBINSON
Special District:	FIRE SERVICE A
Account Type:	EXEMPT
Municipality:	0-MECKLENBURG COUNTY-UNINCORP.
Property Use:	MANUFACTURED

Deed Reference(s) and Sales Price

08178-472 (6/15/1995) $85,000.00

Situs Addresses Tied to This Parcel

- (•) 10324
- ( ) 10324 PLAZA RD EXT



COPY

Mecklenburg County
Health Department

September 17, 2002

Jose Chacon
10324 Plaza Road Extension
Charlotte, NC 28215

Dear Mr. Chacon:

The North Carolina Administrative Code requires routine maintenance and inspections of certain septic tank systems that utilize pumps. Our records indicate that the required inspection of the Type IIIb septic system, which serves as the wastewater treatment and disposal system for the church located at 10324 Plaza Road Ext., Charlotte, NC is due.

> In accordance with Section .1900 of the North Carolina Administrative Code, North Carolina Department of Environment and Natural Resources, Division of Environmental Health, On-Site Wastewater Section, Subchapter 10A, Sanitation, states in part: " System management in accordance with Tables V(a) and V(b) of this Rule shall be required for all systems installed or repaired after July 1, 1992."

This department will be making inspections on all systems that fall under this requirement. The fee for this service is $85.00. In addition, if you have a well, a bacterial sample will be collected to help assess the quality of your water supply source. The water analysis will be performed at no additional cost.

The inspection program and the water analysis are very important initiatives intended to protect the public's health while improving and preserving our groundwater resources. We highly recommend and prefer that you contact our office to make an appointment for the inspection of your system. If we have not heard from you by October 2, 2002 we will proceed with our inspection activities on your property. You will be apprised of our assessments and recommendations for the continued efficient operation of your septic tank system.

To set up an appointment for an inspection, or if you should have any questions regarding this matter, please feel free to contact me at (704) 336-5571.

Sincerely,

David Cornelius, R.S.I., Coordinator
Managed Systems Program
Individual Water and Wastewater Systems

INSPECTION STATEMENT
MECKLENBURG COUNTY HEALTH DEPARTMENT

Jose Chacon
10324 Plaza Road Extension
Charlotte, NC 28215

Please Make Check Payable To:

Mecklenburg County Health Department
700 N. Tryon Street Suite 211
Charlotte, NC 28202

Note: THIS COMPLETED FORM MUST ACCOMPANY PAYMENT!

DESCRIPTION OF PROPERTY

Name	Site Address	Tax Parcel	File Number	System Type
Jose Chacon	10324 Plaza Road Extension	10812103	1910B	IIIb
				Total Amount Due: $85.00

Please use the following space below, to make any corrections to property information.

Name _____

Site Address _____

_____

# of Bedrooms _____

BILL INFORMATION

Billing Date: 9/17/02

Payment Due Date: 10/17/02

Direct Questions Concerning This Bill to .....(704) 336-5571

☐ *Please check if you have a well.*

Make Check Payable To Mecklenburg County Health Department
Your Cancelled Check Is Your Receipt

DO NOT SEND CASH

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 1910 B DATE: 11/5/97

TC: 108 12103 ☒ L ☒ CRT

SERIAL Nº 17380

Name of Owner Jose Chacon Juris.: _____

Address of Property 10328 Plaza Rd Ext.

Inspection Data:

Tank Material PCC

Total Length of Drainfield 1333

Number of Lines 10 @ 133'

Cover Depth 12"

Water Supply Source well

Distance to Water Source >100'

Excavation Inspected 8/28/97

Tank(s) Inspected 8/28/97

Wash Line Inspected NA

High Water Alarm Inspected 11/5/97

PLOT

Design 1997, 1500ST, 1500DT, PI, 3999SFT, Pressure manifold, 12 stone cecil CTR# B. McLaurin 112

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: Septic System designed for 240 seat church w/ Kitchen Type III

Philo J. Walker 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: 1910B DATE: 8/20/97

TC: 108 12/03 PO ☒ L

SERIAL Nº 17331

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 5/2/97. All work shall be completed on or before 9/20/97, 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.

Grease Trap 1000 gallons

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank 1500 gallons

Tank Construction PCC

Trench Depth 24"

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Trench Walls Scored and Porous Yes

Total Line Length 1333 feet

Number of Lines 10 (133')

Depth of Stone 12" inches

Distance from House >5' feet

Distance from Property Line >10' feet

Distance from Well >100' feet

septic system to be installed in accordance with approved plot plan

PLOT OF SYSTEM

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

NAME OF OWNER Jose Chacon

LOCATION OF PROPERTY 10328 Plaza Rd Ext.

Comments: Keep septic system >100' from any wells
Septic system to be installed in accordance with approved plot plan.

Phila S. Walker R.S.
Environmental Health Specialist

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

Permit Number: 19013

CONDITIONS OF IMPROVEMENT PERMIT

Tax Number 108 121 03 P0

- 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	1200 Max gallons/day wastewater flow	4000 Absorption Area (sq ft)	9' Trench spacing (min. on centers)	
NO Serviced by private well	1500 Gallon septic tank	1,333 Total trench length (ft)	24" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)	
___ Bedrooms in residence 240 seat church	1500 Gallon pump tank	12" Depth of stone		
Any surface waters present: NO Type:		Minimum separation distance:		
Site modifications required:				
Additional Conditions: Lift pump required, Pressure Manifold System Design; Septic system designed for 240 seat church w/kitchen. Keep proposed well & neighbors well >100' from septic System.				

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	
4000' Absorption Area (Sq ft) 1,333 Total Trench Length (Ft)	12" Depth of Stone Trench	9' Trench spacing (min. on centers)	24" 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 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 ef 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 Departm
- This Improvement permit is transferable.

Philip A. Walker R.S. 6/6/97
DEHNR Authorized Agent — Date

× _____ 6/4/97
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

Page ___ of ___

Mecklenburg County
Health Department

September 10, 1997

Jose Chacon
10324 Plaza Road Ext.
Charlotte, NC 28215

Re: 10328 Plaza Road Extension
File: 1910B
Parcel: 108-121-03PO

Dear Mr. Chacon:

At your request an inspection was made at the above referenced property to facilitate the issuance of an Operation Permit for the Sewage Treatment and Disposal system. During the inspection it was found that the following items did not meet the regulations set forth in the "Laws and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A .1900;.1952 Septic Tank, Dosing, Dosing Tank and Lift Station Design." Our comments follow:

1) (6) Pump and control circuits shall be provided with manual circuit disconnects within a watertight, corrosion-resistant, outside enclosure (NEMA 4X or equivalent) adjacent to the pump tank, securely mounted at least 12 inches above the finished grade. The pump(s) shall be manually operable without requiring the use of special tools or entrance into the tank for testing purposes. Conductors shall be conveyed to the disconnect enclosure through water proof, gasproof, and corrosion-resistant conduits, with no splices or junction boxes provided inside the tank. Wire grips, duct seal, or other suitable material shall be used to seal around wire and wire conduit openings inside the pump tank and disconnect enclosure.

2) (9) The pump tank shall have a properly functioning high-water alarm. The alarm circuit shall be supplied ahead of any pump overload and short circuit protective devices. The alarm shall be audible and visible by system users and weatherproof if installed outdoors in an enclosure (NEMA 4X or equivalent).

The above mentioned items must be installed and inspected prior to the Operation Permit being issued. The Operation Permit is <u>required</u> for the Certificate of Occupancy and the permanent electric hook-ups. Please schedule the inspections at least five (5) working days in advance to ensure no delays in the Operation Permit issuance.

Please call me at 336-5570 to discuss any question you may have concerning this matter.

Sincerely,

Philo S Walker R.S.

Philo S. Walker, R.S.
Individual Water and Wastewater Systems

980857

CHK# 1653 Project # 33-400B X

FEE: 200.00 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: 6/4/97 SC **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: 6/5/97 **PERMIT NO:** 1910B

PARCEL NO: 108 121 03 P0

JOB LOCATION ADDRESS: 10328 Plaza Rd Ext.
PROPERTY OWNER: Jose Chacon
BUILDING CONTRACTOR: Custom Building systems
SUBDIVISION NAME: NA
AUTHORIZATION ISSUED BY: Phila S. Walker R.S. **DATE:** 6/5/97
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 1910B, 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: Lift pump required, Septic system designed for 240 seat church w/ Kitchen.

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] 6/4/97
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

FEE: 1060.00 CK# 1346
DATE: 5/2/97 JC

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR IMPROVEMENT PERMIT FOR COMMERCIAL/INDUSTRIAL SITE

[redacted]

| | CRT

TYPE APPLICATION: ✓ NEW SYSTEM ___ EXPANSION 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 #: 1910B

PROJECT TRACKING #:

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 108-121-03 PO

✓ COMMERICAL ___ INDUSTRIAL

STREET ADDRESS: 10328 Plaza Rd Ext

DESCRIBE TYPE OF BUSINESS: CHURCH

Square footage of facility:

LOT NUMBER:

TOWNSHIP (CHECK ONE):

NUMBER OF EMPLOYEES: _____
PER SHIFT: ___ ___ ___

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

HOW WILL WATER BE USED IN THE FACILITY:

✓ TOILETS/URINALS
✓ HANDSINK
___ SHOWERS
___ FLOOR DRAINS

OTHER, PLEASE DESCRIBE:

An IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change.

TYPE OF WASTEWATER:
✓ SEWAGE
___ INDUSTRIAL PROCESS WASTE WATER

IF EXPANSION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED ADDITION:

200 seats

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	WELL SPRINGS OR WATERLINES	✓ YES ___ NO
EXISTING WASTE WATER SYSTEMS	___ YES ✓ NO	DESIGNATED WETLANDS	___ YES ✓ NO
EASEMENTS OR RIGHT-OF-WAYS	___ YES ✓ NO		

BUILDING PLANS TO INCLUDE ALL PLUMBING, FLOOR DRAINS AND ALL SOURCES OF WASTEWATER DISCHARGE AND GRADING PLANS MAY BE REQUIRED DURING THE EVALUATION STAGE.

PROPERTY OWNER:	LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:
NAME: CHACON, JOSE (LAST) (FIRST) (MI)	NAME: HOWE JEFF K (LAST) (FIRST) (MI)
ADDRESS: 10324 PLAZA RD EXT.	DAYTIME PHONE: (704) 865 – 2479
CITY: CHARLOTTE STATE: N.C. ZIP:	CUSTOM BUILDING SYSTEMS
DAYTIME PHONE: (704) 536 – 8619	DIV. OF QUINN SALES

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

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: [signature] DATE: 5/2/97

SP 0857

rLK# 1653 Project #

FEE: 200.00 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: 6/4/97 SC **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: 6/5/97 **PERMIT NO:** 1910B
PARCEL NO: 108 121 03 PO
JOB LOCATION ADDRESS: 10328 Plaza Rd Ext.
PROPERTY OWNER: Josi Chacon
BUILDING CONTRACTOR: Custom Building Systems
SUBDIVISION NAME: NA
AUTHORIZATION ISSUED BY: Phila S. Walker R.S. **DATE:** 6/5/97
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 1910B, 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.

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4. OTHER CONDITIONS: Lift pump required, Septic system designed for 240 seat church w/ Kitchen.

OWNER CERTIFICATION

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SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE — DATE 6/4/97

COPY

SILT FENCE
15.0' RAD.
GRAVEL PAD 20' X 80'
15.0' RAD.
15.0' RAD.
15.0' RAD.
SILT FENCE
15.0' RAD.
15.0' RAD.
GRAVEL PAD 20' X 80'
15.0' RAD.
15.0' RAD.
SILT FENCE

GRAVEL PARKING

H/C H/C
SIDEWALK
CHURCH BLDG.
60.0'
110.0'
SIDEWALK
H/C H/C

69 SPACES GRAVEL PARKING

NOTE :
SILT FENCE TO BE PLACED AT ADDITIONAL LOCATIONS AS NEEDED

EXIST HOME

PLAZA ROAD EXT.
20.0' PAVED DRIVE
N59°30'00"W
500.97'

S39°25'52"W
849.73'

GRAVEL PARKING

Septic Tank

S07°45'49"W
942.68'

MAYFIELD P.

1.25 acres
160.00
100.0
500.0

41

4.

Williams Winter Dr.

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

D1605 #2

Sheet 1 of
PROPERTY ID #:
COUNTY:

1910B
PO 105- 121-03

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

OWNER: Jose Munoz
ADDRESS: 10324 Pluza Rd Ext.
APPLICANT:
APPLICATION DATE:
DATE EVALUATED:
PROPOSED FACILITY: church
PROPOSED DESIGN FLOW (.1949): 600gpd
PROPERTY SIZE: 1.0±
LOCATION OF SITE: 10326 Pluza Rd Ext
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 %	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	LS 3 lower 2-6%	0-6" 6-34" 34-46"	gr/sc/ sbk/sc sbk/c	Fr/SEXP/SS/SP Fr/SEXP/SS/P Fr/SEXP/SS/SP	746" TO soil wetness	46"	N/A	None	PS .39/F2 IV
2	LS	0-4" 4-26" 26-36"	gr/sc/ sbk/c sbk/sc/	Fr/SEXP/SS/SP Fr/SEXP/S/P Fr/SEXP/SS/SP	736" TO soil wetness	36"	N/A	None	PS .39/F2 IV
3	LS	0-4" 4-27" 27-32"	gr/sc/ sbk/c sbk/sc/	Fr/SEXP/SS/SP Fr/SEXP/S/P Fr/SEXP/SS/SP	732" TO soil wetness	32"	N/A	None	LS .39/F2 IV
4	LS	0-4" 4-38" 38-46"	gr/c/ sbk/c sbk/c/	Fr/SEXP/SS/SP Fr/SEXP/S/P Fr/SEXP/SS/SP	746" TO soil wetness	46"	N/A	None	PS .39/F2 IV

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

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): Unsuitable
EVALUATED BY: W.R. Medlin 5-30-97
OTHER(S) PRESENT: LSS

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

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 designation
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).

1910B

