

12/21/2007

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Groundwater and Wastewater Services File Imaging Project

May 2007

Barcode Font = IDAutomationHC39M

FEE: 100.00 ck#3479

DATE: 5/16/96

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

PAR 13698

[ ] 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 #: 1428B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION: 139-191-02 PO

TAX/PARCEL NUMBER: 435-432 PO

STREET ADDRESS: McMANUS Rd

SUBDIVISION OR MOBILE HOME PARK NAME: N/A

LOT NUMBER: #3

TYPE OF BUILDING (CHECK ONE):

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

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 4,000 ± +-

NUMBER OF BEDROOMS: 4 | NUMBER OF OCCUPANTS: 4

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:

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	WELL, SPRINGS OR WATERLINES	__ YES ✓ NO
EXISTING WASTEWATER SYSTEMS	__ YES ✓ NO	DESIGNATED WETLANDS	__ YES ✓ NO
EASTMENTS OR RIGHT-OF-WAYS	__ YES ✓ NO		

PROPERTY OWNER:

NAME: GADDY (LAST) MILDRED (FIRST) (MI)

ADDRESS: 13610 Willow Breeze

CITY: HUNTERSVILLE STATE: NC ZIP: 28078

DAYTIME PHONE: (704-896-0061

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: SMITH (LAST) TEDD (FIRST) A. (MI)

DAYTIME PHONE: (704-573-3412

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: Todd A. Smith DATE: 5-16-96

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

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

Sheet
PROPERTY ID #:
COUNTY: ~~Bun~~ 1426B

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

#27 PO 139-191-02 Lot 3

OWNER: Mildred Hadley
APPLICANT:
ADDRESS: 13610 Willow Breeze Hunterdale APPLICATION DATE: DATE EVALUATED:
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949): 480gpd PROPERTY SIZE: ~~#~~ 1.5 Ac.
LOCATION OF SITE: Mc Manus Acres PROPERTY RECORDED:
WATER SUPPLY: ☑ ~~Private~~ ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☑ ~~Auger Boring~~ ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	Slopes 5-10% .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	0-6"	gr/sil	Fr/SEXP/NS/NP	>47" to Chroma 2 colors	47"	N/A	None	PS .39/F2 LE
		6-47"	SBK/sic	Fr-Fi/SEXP/SP					
2	LS	0-4"	gr/sil	Fr/SEXP/NS/NP	>36" to Chroma 2 colors	30"	N/A	None	PS .39/F2 LE
		4-30"	SBK/sic	Fr-Fi/SEXP/SP					
		30-36"	SBK/sicl	Fr/SEXP/SS/SP					
3	LS	0-6"	gr/sicl	Fr/SEXP/SS/SP	>43" to Chroma 2 colors	43"	N/A	None	PS .39/F2 LE
		6-30"	SBK/sic	Fr-Fi/SEXP/SP					
		30-43"	SBK/sicl	Fr/SEXP/SS/SP					
4	LS	0-6"	gr/sicl	Fr/SEXP/SS/SP	>49" to Chroma 2 colors	49"	N/A	None	PS .39/F2 LE
		6-38"	SBK/sic	Fr-Fi/SEXP/SP					
		38"-44"	SBK/sicl	Fr/SEXP/SS/SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	45	45
System Type(s)		

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): unsuitable
EVALUATED BY: William R. Mullin 6-19-9
OTHER(S) PRESENT:

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

Sheet
PROPERTY ID #:
COUNTY:
~~1376~~ 1428B

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: _____ APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: _____ PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LAND-SCAPE POSITION/ SLOPE %	HORI-ZON DEPTH # (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
5	LS	0-4"	gr/sicl	Fv/SEXP/SS/SP	>26" to chroma 2 colors	26"	N/A	None	US IV .12-.15
		4-24"	SBK/sicl	Fv-Fi/SEXP/SS/P					
		24-26"	SBK/sicl	Fv/SEXP/SS/SP					
6	LS	0-3"	gr/sicl	Fv/SEXP/SS/SP	>30" to chroma 2 colors	30"	N/A	None	US IV .12-.15 P2
		3-24"	SBK/sicl	Fv-Fi/SEXP/SS/P					
		24-30"	SBK/sicl	Fv/SEXP/SS/SP					
7	LS	0-3"	gr/sicl	Fv/SEXP/SS/SP	>24" to chroma 2 colors	24"	N/A	None	US IV .12-.15
		3-21"	SBK/sicl	Fv-Fi/SEXP/SS/P					
		21-24"	SBK/sicl	Fv/SEXP/SS/SP					
8	LS	0-6"	gr/sicl	Fv/SEXP/SS/SP	>33" to chroma 2 colors	33"	N/A	None	US .39 P IV
		6-33"	SBK/sicl	Fv-Fi/SEXP/SS/P					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: _____
OTHER(S) PRESENT: _____

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

Sheet
PROPERTY ID #:
COUNTY:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

~~[illegible]~~ 1428B

OWNER: _____ APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: _____ 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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
9	LS 10-15%	0-4"	gr/sicl	Fr/SEXP/SS/SP	>41" To Chroma 2 colors	41"	N/A	None	.3/1/F2 IV PS
		4-36"	SBK/sicl	Fr-Fi/SEXP/SS/P					
		36-41"	SBK/sicl	Fr/SEXP/SS/SP					
10	LS 10-15%	0-3"	gr/sicl	Fr/SEXP/SS/SP	>30" To Chroma 2 colors	30"	N/A	None	US IV ~~12-16~~ .3/1
		3-27"	SBK/sicl	Fr-Fi/SEXP/SS/P					
		27-30"	SBK/sicl	Fr/SEXP/SS/SP					
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: _____
OTHER(S) PRESENT: _____

1006 Repair

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR	LPR .1957 LTAR	MINERALOGY/ CONSISTENCE	STRUCTURE
C (Concave Slope) V (Convex Slope) (Drainage Way) S (Debris Slump) P (Flood Plain) S (Foot Slope) (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 Block 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		
	IV	SC (Sandy Clay) SIC (Silty Clay)	0.4 - 0.1	0.2 - 0.05		
		O (Organic)	None			

MOIST	WET
VFR (Very Friable)	NS (Non-sticky)
FR (Friable)	SS (Slightly Sticky)
FI (Firm)	S (Sticky)
VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
EFI (Extremely Firm)	NP (Non-plastic)
	SP (Slightly Plastic)
	P (Plastic)
	VP (Very Plastic)

OTES

ORIZON DEPTH In inches below natural soil surface

EPTH OF FILL In inches from land surface

ESTRUCTIVE HORIZON Thickness and depth from land surface

APROLITE S(suitable) or U(unsuitable)

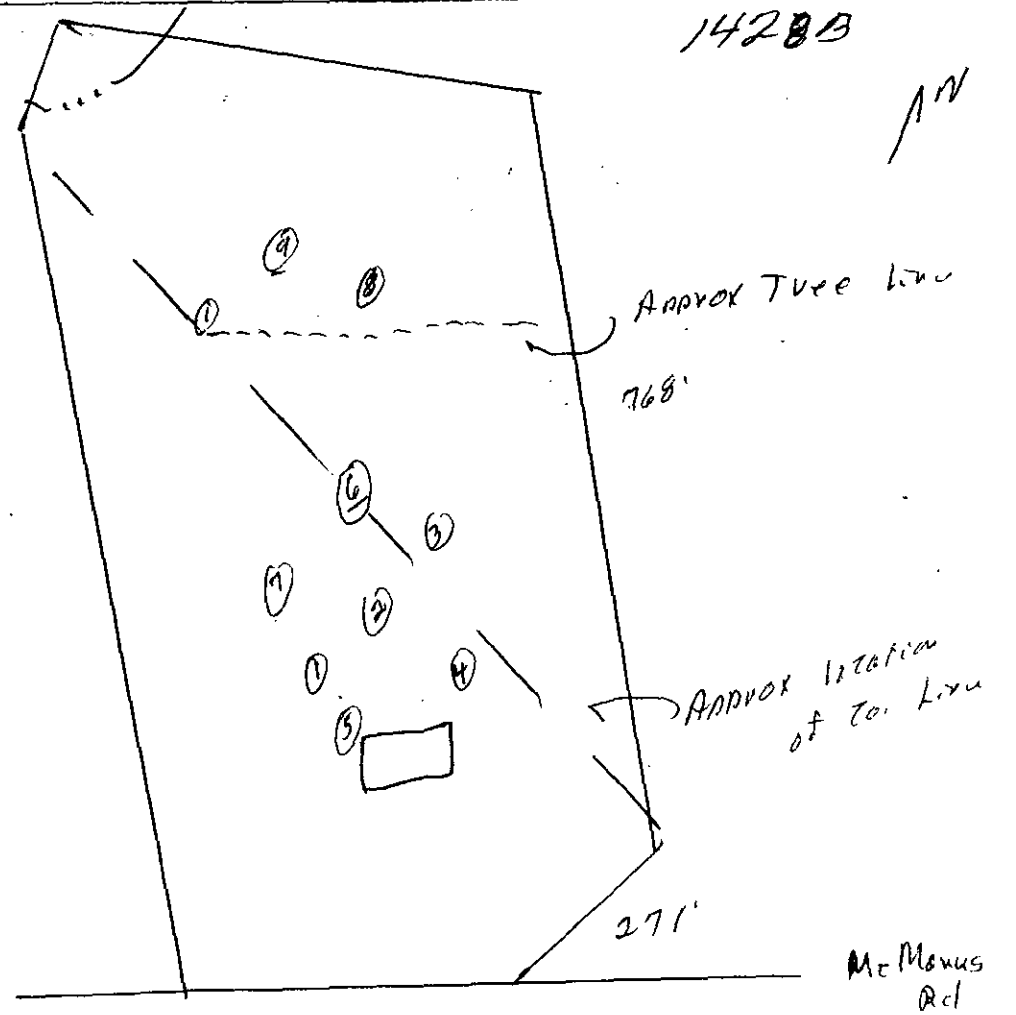
OIL WETNESS Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designat

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).



Permit Number: 1428B

CONDITIONS OF IMPROVEMENT PERMIT

Tax Number: 139 191 02 Po

- 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 mus ...ing Permit. The Construction Authorization is **NOT** transferable. Do not clear, grade, fill or disturb soil prior to
- Domestic-type wastewater only. No indust ...d into the system.

Please have owner sign copy of IP
Thanks
TRW

Basement ___ Ye ___ Partial Basement

Type Primary Wastewater System
Type (circle one): I (II) III IV V VI

___ C
___ P
block pa...
___ Shallow Placed Conventional
...w Pressure Pipe
...arge Diameter Pipe
...ill
___ Other

___ Innovative or Experimental:
___ IWWS-93-1
___ IWWS-93-2
___ IWWS-94-1

.3 Long-term acceptance rate	480 Max gallons/day wastewater flow	1610' Absorption Area (sq ft)	9' Trench spacing (min. on centers)
Yes Serviced by private well	1500 Gallon septic tank	535' Total trench length (ft)	24" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
4 Bedrooms in residence	NA Gallon pump tank	12" Depth of stone	

Any surface waters present: yes Type: creek Minimum separation distance: >50'

Site modifications required:

Additional Conditions: Additional Repair Area located on Cabarrus Co. portion of lot

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

1610' Absorption Area (Sq ft) 535' 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 eff... 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 Departme...
- This Improvement permit is transferable.

Philo A. Walker R.S. 6/28/96
DEHNR Authorized Agent Date

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

IWWS:100195

PROPOSED PLOT PLAN

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

FILE: 1428B

TG: ~~435-432~~ 139-191-02P0

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.

COMMENTS 4 bedroom

1500 ST

5 lines x 107' long x 3' wd x 12" stone
535 TLF

Keep septic system > 100' (50' min) from proposed well

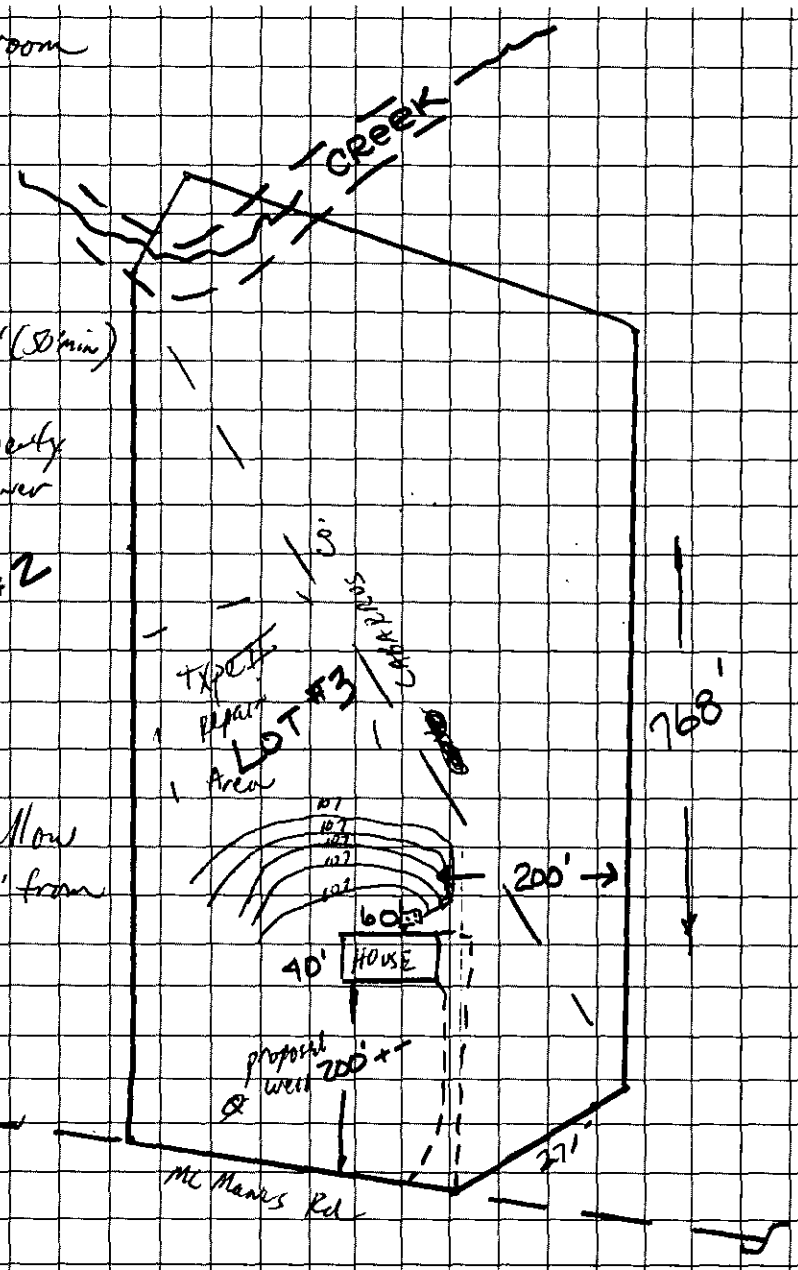
200' from front right property line to front right house corner

200' from front right house corner to

~~Additional Repair~~ LOT #2 located on Cabarrus Co. portion of lot

Keep septic system shallow

Keep septic system > 50' from creek



OWNER/AGENT SIGNATURE

DATE 5-16-96

APPROVAL DATE PSW 6/28/96

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

PROPOSED PLOT PLAN

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

FILE: 1428B

TC: ~~425 432~~ 139-191-02 fa

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.

Commerce 4 bedroom

1500 sf

5 lines x 107'/ea. lg.
x 3' wd x 12" stone
535 TLF

Long septic system > 100' (50' min) from proposed well

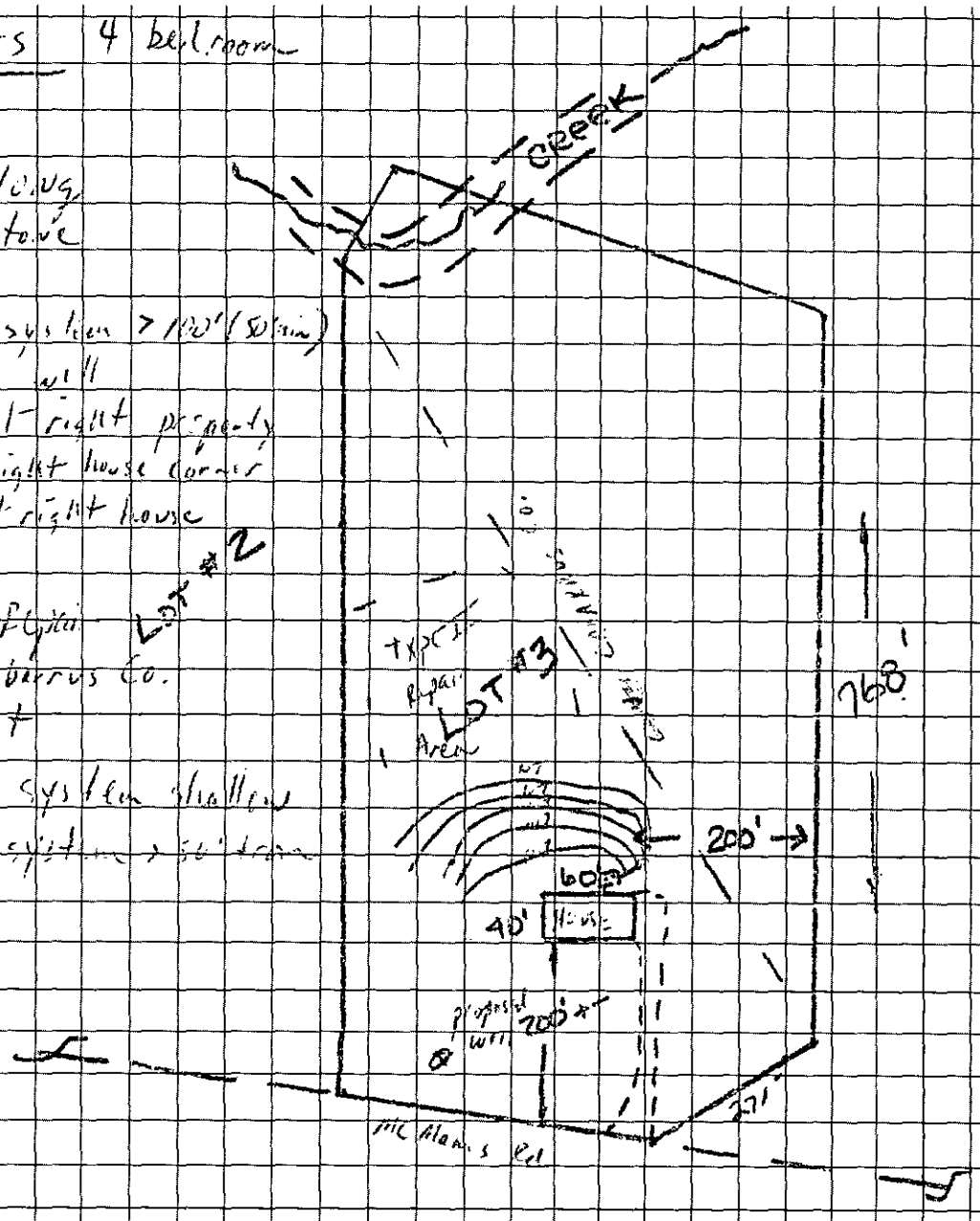
20' from front right property line to front right house corner

20' from front right house corner to

Additional Equity Lot #2 located in Cabarrus Co. portion of lot

Keep septic system shallow

Keep septic system > 50' from creek



OWNER/AGENT SIGNATURE

DATE 5-16-96

APPROVAL DATE Pkd 6/24/96

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy