Groundwater & Wastewater Services
Septic Project File & Data Review Worksheet

GWS File #: 81898 WASPS App #: 4676

Primary ES assigned to project: Thilo Walker

Secondary ES assigned to project: _____

Project Type: New System ☐ Alteration ☐ Repair ☐ Modified Plot Plan ☐

WES

I. File Review:

Rule or Law	Permit Application			
.1937(d)	Is the Application complete	Yes ☐	No ☐	N/A ☐
.1937(d)	Is there a Site plan/Plat with application	Yes ☐	No ☐	N/A ☐
.1937(d)	Is the Facility shown?	Yes ☐	No ☐	N/A ☐
.1937(d)	Are appurtenances shown	Yes ☐	No ☐	N/A ☐
	Site Evaluation Information			
.1939 (a)(1)	Topography and Landscape Position Recorded?	Yes ☐	No ☐	N/A ☐
.1940 (a-g)	Slope % Recorded?	Yes ☐	No ☐	N/A ☐
.1939 (a)(2)	Texture Class Recorded?	Yes ☐	No ☐	N/A ☐
.1939 (a)(2)	Structure type Recorded?	Yes ☐	No ☐	N/A ☐
.1939 (a)(2)	Consistence Recorded?	Yes ☐	No ☐	N/A ☐
.1939 (a)(2)	Mineralogy Recorded?	Yes ☐	No ☐	N/A ☐
.1939 (a)(3)	Soil Wetness Condition Recorded?	Yes ☐	No ☐	N/A ☐
.1939 (a)(4)	Soil Depth to Rock or Parent Material Recorded When Encountered	Yes ☐	No ☐	N/A ☐
.1939 (a)(5)	Depth to Restrictive Horizons Recorded When Encountered?	Yes ☐	No ☐	N/A ☐
.1939 (a)(6)	Sufficient Available Space Recorded?	Yes ☐	No ☐	N/A ☐
.1937(m)	Are the Profile Locations Shown?			
.1939(a)	Are the S/PS Profiles in system & in repair area?	Yes ☐	No ☐	N/A ☐
& .1945(b)	Number of auger borings made: _____ Were sufficient auger borings made?	Yes ☐	No ☐	N/A ☐
.1939(d), .1955, .1956, .1957	LTAR	Yes ☐	No ☐	N/A ☐
	Improvement Permit/Construction Authorization			
.1937(g)	Proposed System Type stated-Initial	Yes ☐	No ☐	N/A ☐
130A-336(a) .1945(b)	Proposed System Type stated-Repair	Yes ☐	No ☐	N/A ☐
130A-336 (a)(3)	System location identifiable by setbacks - Initial	Yes ☐	No ☐	N/A ☐
.1937(g)	System components shown – Initial	Yes ☐	No ☐	N/A ☐
.1945(b) .1945(b)	Repair area shown	Yes ☐	No ☐	N/A ☐
.1937 (f)(g)	Does System design match facility, flow & WWcharacteristics?	Yes ☐	No ☐	N/A ☐
.1937 (f)(g)	Is System design consistent with soil/site conditions?	Yes ☐	No ☐	N/A ☐
.1937 (f)(g)	Is the System located in the approved area?	Yes ☐	No ☐	N/A ☐
130A-336(a)	Is the Design flow (gpd) indicated?	Yes ☐	No ☐	N/A ☐

130A-336(a)	Number of Bedrooms, employees, seats, etc. indicated?	Yes ☐	No ☐	N/A ☐
.1937(g)	Trench depth indicated?	Yes ☐	No ☐	N/A ☐
.1937(g)	Trench width indicated?	Yes ☐	No ☐	N/A ☐
.1937(g)	Trench length indicated?	Yes ☐	No ☐	N/A ☐
130A-336(a)(1)	Proposed/existing well shown?	Yes ☐	No ☐	N/A ☐
130A-336(a)(1)	Property line lengths shown?	Yes ☐	No ☐	N/A ☐
130A-336(a)	Facility/appurtenance setbacks shown from fixed points?	Yes ☐	No ☐	N/A ☐
	Operation Permit			
.1937(i)	System type as described in table V(a) of rule .1961	Yes ☐	No ☐	N/A ☐
.1937(i)	Conditions for system performance, operation, maintenance, monitoring and reporting.	Yes ☐	No ☐	N/A ☐

II. WASPS Review:

Construction authorization issued	Yes ☐	No ☐	N/A ☐
Installation approval issued	Yes ☐	No ☐	N/A ☐
Operation permit issued	Yes ☐	No ☐	N/A ☐
Other related documentation	Yes ☐	No ☐	N/A ☐

Items requiring correction/modification: _____

Comments: UES FOR 2 BEDROOM HOUSE UPGRADE.

IA issued date: _____

OP issued date: _____

Review performed by: Jerry Mick, R.S. Date performed: 6/29/10

Cont # X33477

FEE: 100
DATE: 6/21/10
CRT: 1

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM
MECKLENBURG COUNTY - GROUNDWATER & WASTEWATER SERVICES
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6694

GWS – UES APP 06/07

FILE #: 8/898

TYPE APPLICATION: Enlarge Bedrooms PW 4676

[X] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A/ M)
[ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[ ] ADDITION - RENOVATION OR GARAGE WITH NO MAJOR CHANGES (X)
[ ] COMMERCIAL OR INDUSTRIAL (N)

PERSON FILING APPLICATION:
NAME: Randy Suddreth
ADDRESS: 16125 Langston Dr
CITY: Charlotte
STATE: NC ZIP: 28278
PHONE: 704-504-1733
ALTERNATE PHONE:

PROPERTY OWNER:
NAME: Steve Waddell
ADDRESS: 13224 Steele Creek Rd
CITY: Charlotte
STATE: NC ZIP: 28278
PHONE: 704-400-3699
ALTERNATE PHONE:

JOB LOCATION INFORMATION
TAX/PARCEL #: 21719139
STREET ADDRESS: 17829 Theran Ln
CITY: Charlotte
STATE: NC ZIP: 28278
SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #: 135 SCC 43 1951

TOWNSHIP:
[X] 0-MECKLENBURG [ ] 4-PINEVILLE
[ ] 1-CHARLOTTE [ ] 5-MATTHEWS
[ ] 2-DAVIDSON [ ] 6-HUNTERSVILLE
[ ] 3-CORNELIUS [ ] 7-MINT HILL

WATER SUPPLY:
[ ] MUNICIPAL (M) [ ] COMMUNITY (C) [X] PRIVATE WELL (P) [ ] SHARED WELL (S) [ ] OTHER "SPRINGS" (O)

RESIDENTIAL PROPERTY TYPE:
[X] HOUSE (H) [ ] MODULAR HOME (M) [ ] MULTIPLE FAMILY (U)
[ ] SINGLE MOBILE HOME (S) [ ] DOUBLE WIDE (D)
[ ] OTHER (O)

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 2
NUMBER OF OCCUPANTS: 3

COMMERCIAL / INDUSTRIAL PROPERTY TYPE:
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:
INDUSTRIAL WASTES? [ ] YES [ ] NO
UNDERGROUND STORAGE TANKS? [ ] YES [ ] NO

ADDITION TYPE ATTACHED TO EXISTING STRUCTURE:
[ ] BEDROOM [ ] BATHROOM [ ] KITCHEN [ ] DINING ROOM [ ] LIVING ROOM [ ] DEN
[ ] GARAGE [ ] SUNROOM [ ] PORCH [ ] DECK [X] OTHER

ADDITION 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.

Owner's/Agent's Signature — 6-21-2010 Date

"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 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 y this Department.
- This permit is not transferable.

[ ] ADDITION / RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE
[ ] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE

Approval for 2 bedroom house upgrade & detached garage

Approval for 2 bedroom house upgrade
Use existing system
Phelo Walker RS 6/25/10 PSW
EHS Signature Date

Use existing system - see revised plan Phelo Walker 3/1/11

3/1/11

THIS IS TO CERTIFY THAT ON THE 25TH DAY OF MARCH, 2009, AN ACTUAL SURVEY WAS MADE UNDER MY SUPERVISION OF THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE BOUNDARY LINES AND THE IMPROVEMENTS, IF ANY, ARE AS SHOWN HEREON.

SIGNED _____
PROFESSIONAL LAND SURVEYOR

NOTES:

1. PID 21719139
2. PROPERTY ZONED: R-5
3. THIS PROPERTY MAY BE SUBJECT TO ADDITIONAL RECORDED OR UNRECORDED EASEMENTS, RIGHTS-OF-WAY, OR RESTRICTIVE COVENANTS, OTHER THAN SHOWN.
4. THIS PROPERTY IS LOCATED IN A SPECIAL FLOOD HAZARD AREA PER FEMA MAP # 3710348800J, EFFECTIVE DATE MARCH 2, 2009.
5. LOWER LAKE WYLIE CRITICAL AREA.

LEGEND:

EIP = EXISTING IRON PIN
SIP = SET IRON PIN
PWR = POWER PAD
CP = COVERED PORCH
R/W = RIGHT OF WAY

~LAKE WYLIE~

DOCK
SHORELINE
RETAINING WALL
N31°37'00"W 39.54
N02°15'00"W 50.57
N49°21'00"W 23.46
N51°25'00"W 37.48
N 57°55'00" E 125.38
N 78°50'00" W 76.84
S 54°05'00" W 126.11
S 63°00'00" E 100.72
S 31°14'57" E C=99.00 R=50.00 L=142.90
S 89°08'20" E C=68.73 R=100.00 L=68.41
WOOD DECK
PHYSICAL #17827
ONE STORY MASONITE COMPOSITION ROOF
DRIVEWAY
WOOD DECK
TIMBERS
TIMBERS
50' BUFFER
50' BUFFER
10' SETBACK
10' SETBACK
30' SETBACK
GRAVEL DRIVEWAY
WELL
PWR
EIP
EIP
EIP
EIP
SIP
LOT 135
28,438 SQ.FT.
0.65 ACRES
LOT 136
50' BUFFER
TANK
Lines
THERAN LANE
60' PUBLIC R/W
PID: 21719162
LOT 1 MB: 32 PG.208
1.62 ACRES
VICINITY MAP
NOT TO SCALE
SITE
Youngblood Rd
Grand Palisades Pkwy
NORTH PER MB: 17-518

PHYSICAL SURVEY
OF
LOT 135, LAKE WYLIE RECREATION, SECTION 43
CITY OF CHARLOTTE, MECKLENBURG CO. NORTH CAROLINA

SCALE 1"=30'

SURVEYED FOR STEVE R. & SHARON L. WADDELL

MAP RECORDED IN BOOK 17 AT PAGE 518 DEED RECORDED BOOK ____ PAGE ____

DRAWN BY DH FIELD WORK JM,TM FIELD BOOK # IN FOLDER

CAROLINA SURVEYORS, INC
P.O. BOX 267
PINEVILLE, N.C. 28134
(704) 889-7601
FAX:(704) 889-7614

LID 2008LHC:THERAN LANE
CDDD 2008T:THERAN LANE

Would like to cover this Deck area.

Covered porch would like to make this a Heated living Space.

Future Add on.

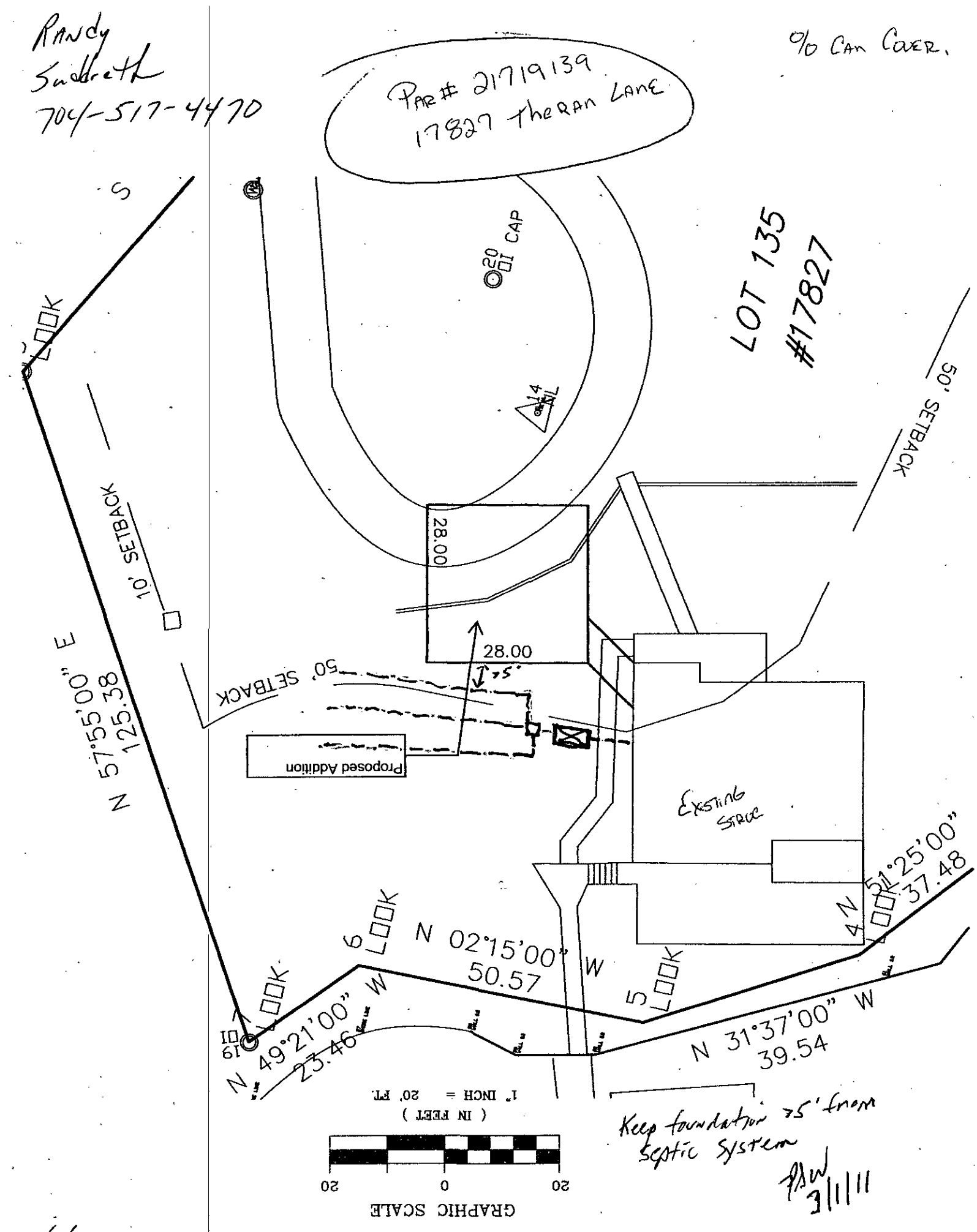
ARE NOT Adding Bedrooms

Asking To MAKE B/R's Larger & Cover Deck

File # 8188

Randy
Sudbrath
704-517-4470

% Can Cover.



Keep foundation >5' from Septic System

RSW
3/1/11

3/1/11 New plan for approval