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14 FEB '20 AM 9:52

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: Alva Charles Madsen III
ADDRESS: 15025 Shigle Oak Rd
CITY: Mint Hill shingle
STATE: NC ZIP: 28227
PHONE: (980) 253-6996
ALTERNATE PHONE:
E-MAIL: acm3@gci.net

PROPERTY OWNER: [✓] SAME AS PERSON FILING APPLICATION
NAME:
ADDRESS:
CITY:
STATE: ZIP:
PHONE:
ALTERNATE PHONE:
E-MAIL:

JOB LOCATION INFORMATION
TAX PARCEL #: 19521209
STREET ADDRESS: 15025 Shingle Oak Rd
CITY: Mint Hill
STATE: NC **ZIP:** 28227

SUBDIVISION OR MOBILE HOME PARK NAME:
Farington Oaks Subdivision
LOT #: SR15025

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 Finish Basement

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.

C. C. Madsen III
Owner's/Agent's Signature

2-14-2020
Date

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

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208 OFFICE: (980) 314-1680, FAX: 704-336-6894

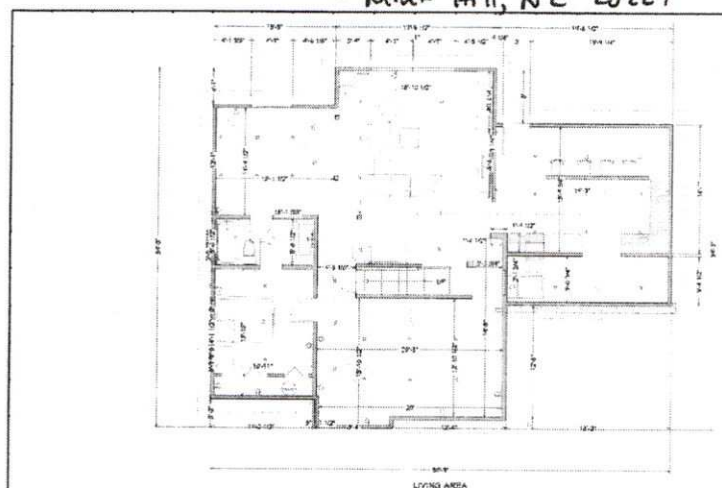
Revised on: 03/27/19

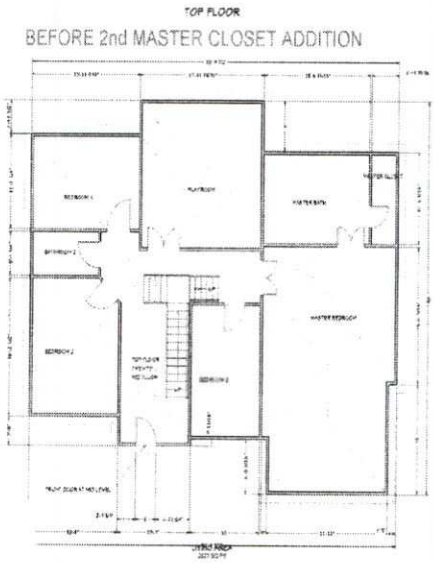
File #: _____

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: 15025 Shingle Oak Rd Mint Hill, NC 28227 Tax Parcel #: 19521209







*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.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

Customer meets requirements of the Septic System

Bryan Dorsett 2/25/20

REHS Signature Date

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208 OFFICE: (980) 314-1680, FAX: 704-336-6894

Revised on: 03/27/19

Ellis, Loretta

From:	acm3@gci.net
Sent:	Friday, February 14, 2020 9:21 AM
To:	WellReg
Subject:	[External]MADSEN 15025 Shingle Oak Rd Mint Hill, NC 28227. Basement Finish P# B3692172
Attachments:	Existing System Use Application - Septic and Well 15025 Shingle Oak Rd with extra docs small.pdf; Existing System Use Application - Septic and Well 15025 Shingle Oak Rd Signed.pdf

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

To whom it May Concern,

My name is Alva "Chuck" Madsen III and I have been communicating with Jeremy Michelone. I am unsure if I need to fill out the attached document so I am leaving the decision in your hands.

I am in the planing stage of finishing an unfinished basement. When we bought the house it was listed with 5 bedrooms. We have converted the bedroom next to the Master bedroom into a "Hers" master closet. In doing so I am planning to regain the bedroom we lost to the closet by building a bedroom and bath in the basement when we finish the project.

I have attached the before and after floor plans of the top floor where we converted the bedroom to a closest. I have also included the plan for the basement.

I have started a Permit with the county and the Permit number is B3692172.

Please advise as to what is my next step and/or if you need any more documentation/information.

Sincerely,

A. Chuck Madsen III

980-253-6996

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 02/14/20
Receipt #: 120802
Check / Auth #: VISA 604604
Received By: ELLISLW

Amount: 100.00
Tendered: 100.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: MADSEN III, ALVA CHARLES
Attn:
Address: 1932 SOUTH SALEM DR
Address:
City/State/Zip: ANCHORGE, AK 99508

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	Use Existing System 15025 SHINGLE OAK RD		1	100.00	100.00

Mecklenburg
Environmental Health
3205 Freedom Drive
Charlotte, NC, 28208
Phone: (980) 314-1651
02/14/20 10:50

Sale

Merchant ID: 153629
Sequence #: 001
Card Type : VISA
Auth. Code: 604604
Acct. No: **********1745

Amount : 100.00

APPROVED

OP

Signature

I agree to pay the above total amount according to the card issuer agreement (Merchant agreement if credit voucher)

We appreciate your payment!
Thank You Very Much!

Merchant Copy

----------Outstanding Balances----------

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance