

4400 SUNSET DR

13706209

1/11/2008

duponbj

Groundwater and Wastewater Services File Imaging Project
May 2007
Barcode Font = IDAutomationHC39M

Groundwater & Wastewater Services
Well Project File & Data Review Worksheet

GWS File #: 71278 WASPS App #: 2296

Primary ES assigned to project: Josh Sellers

Secondary ES assigned to project: _____

Project Type: New Well ☐ Well Abandonment ☑ Major Repair ☐

Septic System Status: Permit in progress ☐ System installation completed ☐ N/A-Sewer ☑

I. File Review:

Completed application	Yes ☑	No ☐		
ARGU review report	Yes ☑	No ☑	N/A ☐	
Signed permit	Yes ☑	No ☐		
Notification of disinfection	Yes ☐	No ☐	N/A ☑	
Sample Results	TC ☐	Nitrate/Nitrite ☐	Other ☐	N/A ☑
GW-1 Form / GW-30 Form	Yes ☑	No ☐		
Other related documentation	Yes ☐	No ☐	N/A ☐	

Items requiring correction/modification: _____

Comments:

_____

_____

_____

_____

_____

II. WASPS Review:

Completed application w/ valid address	Yes ☑	No ☐	
ARGU review completed	Yes ☑	No ☐	N/A ☐
Permit issued	Yes ☑	No ☐	
Activity checklist completed	Yes ☑	No ☐	
Appropriate comments included	Yes ☑	No ☐	
Site information record completed	Yes ☑	No ☐	
Well detail record completed	Yes ☑	No ☐	

Items requiring correction/modification: _____

Comments:

_____

_____

_____

_____

_____

Application received date: 5/15/07 ES assigned date: 5/15/07 Permit issued date: 5/16/07

Well approval date: 6/5/07 Number of days to complete project: _____

Review performed by: J. L. Sellers Date performed: 6/6/07

WITHERS & RAVENEL
ENGINEERS | PLANNERS | SURVEYORS

111 MacKenan Drive
CARY, NORTH CAROLINA, 27511
(919) 469-3340
FAX (919) 467-6008

LETTER OF TRANSMITTAL

DATE May 29, 2007	JOB NO. 02060496.37
ATTENTION Joshua Sellers	
PHONE #	
RE: 4400 Sunset Drive	
Charlotte, Mecklneburg County	

TO: Mr. Joshua Sellers
Mecklenburg County Health Dept
700 N. Tryon St, #211
Charlotte, NC 28202

WE ARE SENDING YOU ☒ Attached via USPS the following items:
☐ Shop Drawings ☐ Prints ☐ Plans ☐ Samples ☐ Specifications
☐ Copy of Letter ☐ Change order ☐ Diskette ☐ _____

COPIES	DATE	NO.	DESCRIPTION
1	05/22/07		Well Abandonment Record

THESE ARE TRANSMITTED as checked below:
☐ For approval ☐ Approved as submitted ☐ Resubmit _____ copies for approval
☒ For your use ☐ Approved as noted ☐ Submit _____ copies for distribution
☐ As requested ☐ Returned for corrections ☐ Return _____ corrected prints
☐ For review and comment ☐ _____
☐ FOR BIDS DUE _____ 20____ ☐ PRINTS RETURNED AFTER LOAN TO US

REMARKS:

COPY TO: File, NCDENR, Mecklenburg County, owner SIGNED: Michael D. Fekete

If enclosures are not as noted, kindly notify us at once.

71273.

WELL ABANDONMENT RECORD

North Carolina Department of Environment and Natural Resources- Division of Water Quality

WELL CONTRACTOR CERTIFICATION # 3462

1. WELL CONTRACTOR:

Michael D. Fekete
Well Contractor (Individual) Name

Withers & Ravenel
Well Contractor Company Name

STREET ADDRESS 111 MacKenan Drive

Cary | NC | 27511
City or Town | State | Zip Code

(919) 469-3340
Area code - Phone number

2. WELL INFORMATION:

SITE WELL ID # (if applicable) NA

STATE WELL PERMIT # (if applicable) NA

COUNTY WELL PERMIT # (if applicable) 10002296

DWQ or OTHER PERMIT # (if applicable) NA

WELL USE (Check applicable use): ☐ Monitoring ☑ Residential

☐ Municipal/Public ☐ Industrial/Commercial ☐ Agricultural

☐ Recovery ☐ Injection ☐ Irrigation

☐ Other (list use) _____

3. WELL LOCATION:

COUNTY Mecklenburg QUADRANGLE NAME Charlotte

NEAREST TOWN: Charlotte

4400 Sunset Drive, Charlotte, NC 28227
(Street/Road Name, Number, Community, Subdivision, Lot No., Parcel, Zip Code)

TOPOGRAPHIC / LAND SETTING:

☐ Slope ☐ Valley ☑ Flat ☐ Ridge ☐ Other _____
(Check appropriate setting)

LATITUDE 35 10 55.59

LONGITUDE 80 39 08.25

May be in degrees, minutes, seconds, or in a decimal format

Latitude/longitude source:– ☑ GPS — ☐ Topographic map

(Location of well must be shown on a USGS topo map and attached to this form if not using GPS.)

4a. FACILITY- The name of the business where the well is located. Complete 4a and4b. (If a residential well, skip 4a; complete 4b, well owner information only.)

FACILITY ID #(if applicable) _____

NAME OF FACILITY _____

STREET ADDRESS _____

_____
City or Town | State | Zip Code

4b. CONTACT PERSON/WELL OWNER:

NAME Walter Kenneth Hamrick

STREET ADDRESS 4400 Sunset Dr, Charlotte, NC 28227

5. WELL DETAILS:

a. Total Depth: 125 ft. Diameter: 2 in.

b. Water Level (Below Measuring Point): 18.5 ft.

Measuring point is 0 ft. above land surface.

6. CASING:

	Length	Diameter
a. Casing Depth (if known):	_____ ft.	_____ in.
b. Casing Removed:	_____ ft.	_____ in.

7. DISINFECTION: +/- 0.6 oz

(Amount of 65%-75% calcium hypochlorite used)

8. SEALING MATERIAL:

Neat Cement	Sand Cement
Cement _____ lb.	Cement _____ lb.
Water _____ gal.	Water _____ gal.

Bentonite

Bentonite 120 lb.

Type: ☐ Slurry ☑ Pellets

Water _____ gal.

Other

Type material _____

Amount _____

9. EXPLAIN METHOD OF EMPLACEMENT OF MATERIAL:

Placed 3/8" bentonite pellets into the supply well casing with tremmie pipe. Bentonite was hydrated. Placed 8" cement seal on top of the bentonite.

10. WELL DIAGRAM: Draw a detailed sketch of the well on the back of this form showing total depth, depth and diameter of screens (if any) remaining in the well, gravel interval, intervals of casing perforations, and depths and types of fill materials used.

11. DATE WELL ABANDONED 5/21/07

I DO HEREBY CERTIFY THAT THIS WELL WAS ABANDONED IN ACCORDANCE WITH 15A NCAC 2C, WELL CONSTRUCTION STANDARDS, AND THAT A COPY OF THIS RECORD HAS BEEN PROVIDED TO THE WELL OWNER.

[signature] 5/22/07

SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE

_____

SIGNATURE OF PRIVATE WELL OWNER ABANDONING THE WELL DATE

(The private well owner must be an individual who personally abandons his/her residential well in accordance with 15A NCAC 2C .0113.)

MICHAEL D. FEKETE

PRINTED NAME OF PERSON ABANDONING THE WELL

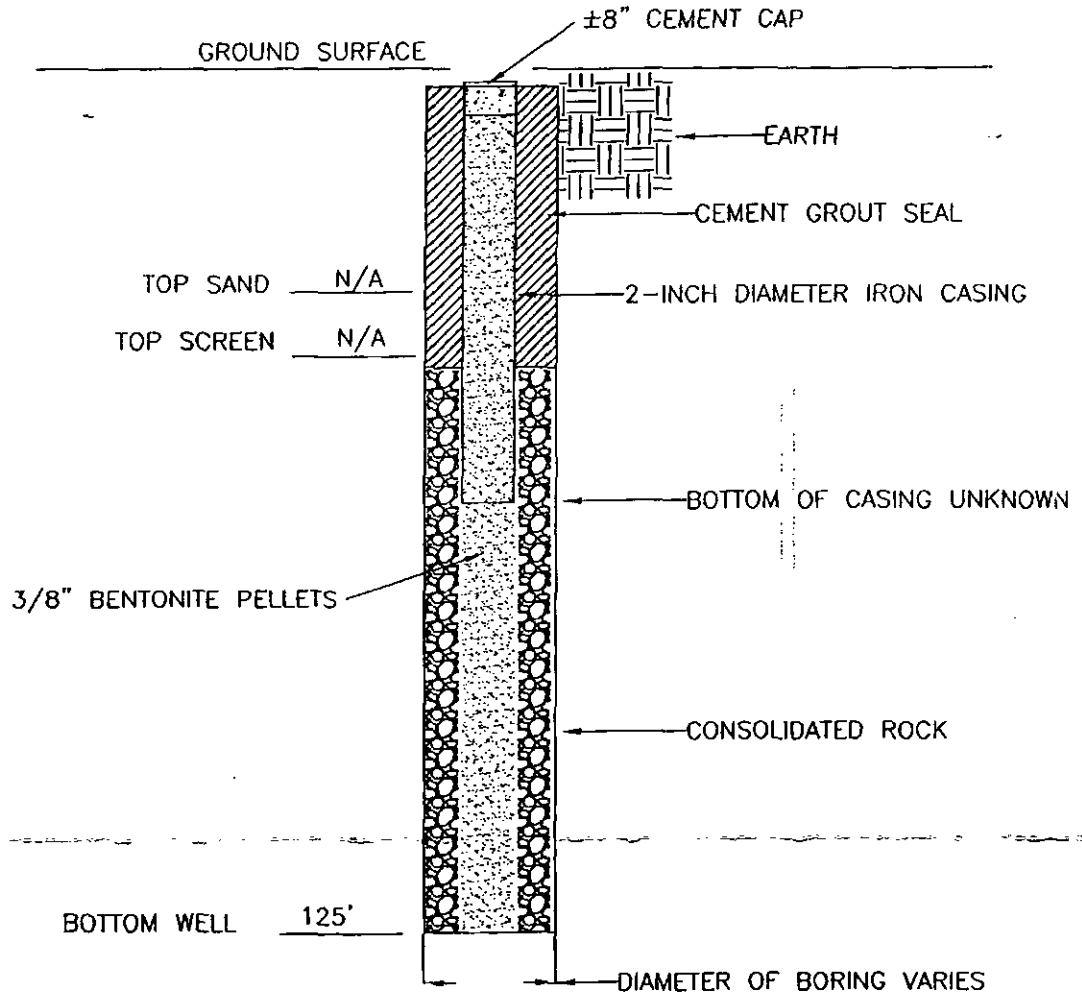
Submit a copy to the owner and the original to the Division of Water Quality within 30 days.
Attn: Information Management, 1617 Mail Service Center – Raleigh, NC 27699-1617, Phone No. (919) 733-7015 ext 568.

Form GW-30
Rev. 5/06

WELL NO. NA

NOTE:

WELL ABANDONED BY FILLING WITH 3/8" BENTONITE PELLETS USING TREMMIE PIPE. ±8" CEMENT CAP WAS PLACED ON TOP OF BENTONITE.



WITHERS & RAVENEL
ENGINEERS | PLANNERS | SURVEYORS
111 MacKenan Drive Cary, North Carolina 27511 www.withersravenel.com
tel: 919-460-6006 fax: 919-535-4545

WALTER HAMRICK PROPERTY
MINT HILL, NORTH CAROLINA

ABANDONED SUPPLY WELL SCHEMATIC

DRAWN BY:	SCALE:	FIGURE NO.
MDF	NTS	
APPROVED BY:	DATE:	JOB NO:
	5/22/07	02061496.37

7127B

Mecklenburg County Health Department
Groundwater & Wastewater Services
700 N. Tryon St, Suite 211
Charlotte, NC 28202
Phone: (704) 336-5103
Fax: (704) 336-6894

PERMIT TO CONDUCT MAJOR REPAIR AND/OR ABANDON A WATER SUPPLY WELL

Permit#: 10002296 **Tax Parcel #:** 137-062-09
Property Owner: Walter Kenneth Hamrick
Job Location Address:4400 SUNSET DR
City/ETJ:CHARLOTTE **State:** NC **Zip Code:** 28227
Permit Issuance Date: 5/16/2007
Use of Well:
Type of Facility Served by Well: House
Sewage System Type: None

Type of Repair/Abandonment

- ○ Major Repair Before Placing the Well in Service
- ○ Major Repair Before Temporary Abandonment
- ○ Temporary Abandonment
- ◉ Permanent Abandonment

Area of Regulated Groundwater Usage Restrictions Apply: YES

If Yes, see requirements in Specific Conditions of This Permit.

General Conditions of This Permit:

- The Water Supply Well repair and abandonment must meet all requirements set forth in the *Mecklenburg County Groundwater Well Regulations* and any other applicable rules and laws.
- A North Carolina Certified Well Contractor must perform the well construction activities.
- Repair of any Water Supply Well with the well head terminating below ground surface (buried seal) shall include extending the well casing at least twelve inches above the surface.
- This Permit shall be VALID for a period not to exceed 12 months from the date of issuance.

Specific Conditions of This Permit (Check all that apply):

- [X] Grout must be placed the full extent of the casing.
- [ ] Initial water sample to taken and analyzed for (check all that apply):
  - [ ] Volatile Organic Compounds (VOC's)
  - [ ] Semi-volatile Compounds
  - [ ] Metals (Specify in Other Conditions)
  - [ ] Pesticides
  - [ ] Herbicides
  - [ ] Other (See Below)

Other Conditions of This Permit:

Recommend full grouting of casing to surface.

Joshua R. Sellers R.S. — Authorized Agent: Print Name
Joshua R. Sellers R.S. — Signature:

Michael Fekete — Owner/Legal Agent: Print Name
Michael Fekete — Signature:

FILE NUMBER: 7127B

Revised On: January 3, 2007

APPLICATION NUMBER: 2296

SEPTIC FEE: _____
DATE: _____

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

WELL FEE: _____
DATE: _____

1. SEPTIC / TYPE APPLICATION: ☐ NONE ☐ NEW SYSTEM ☐ ALTERATION ☐ REPAIR ☐ MODIFIED PLOT PLAN

2. WELL / TYPE APPLICATION: ☐ NONE ☐ NEW WELL ☐ MAJOR REPAIR ☒ ABANDONMENT

3. JOB LOCATION INFORMATION:

TAX PARCEL NUMBER: 13706209
STREET ADDRESS: 4400 Sunset Drive
CITY: Charlotte
STATE: NC ZIP: 28227
SUBDIVISION NAME: 1964
LOT #: 32-35+31 LOT SIZE (acres): 0.97
TOWNSHIP: MINT HILL

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

4. BUILDING INFORMATION:

BUILDING TYPE:
☐ SINGLE MOBILE HOME ☐ MODULAR HOME
☐ DOUBLE WIDE ☐ MULTIPLE FAMILY
☒ HOUSE ☐ OTHER _____
HEATED SQUARE FOOTAGE: 1468
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS:
FOUNDATION TYPE:
☐ CONCRETE SLAB ☐ BASEMENT WITH PLUMBING
☒ CRAWL SPACE ☐ BASMENT WITH NO PLUMBING

5. IF PLANNING TO EXPAND OR ALTER THE EXISTING SYSTEM PLEASE COMPLETE THE FOLLOWING SECTION: ☐ N/A

NUMBER OF BEDROOMS TO BE ADDED: _____ NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: _____

6. WATER SUPPLY: ☐ MUNICIPAL ☐ PUBLIC WELL ☒ PRIVATE WELL ☐ SHARED WELL ☐ SPRING

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

8. PLEASE INDICATE AND RANK DESIRED SEPTIC SYSTEM TYPE(S) IN ORDER OF PREFERENCE *(1-MOST DESIRED 5-LEAST DESIRED)*:

☐ ANY TYPE ☐ CONVENTIONAL ☐ ACCEPTED ☐ INNOVATIVE ☐ ALTERNATIVE ☐ OTHER _____

8A. RANK: ____ ____ ____ ____ ____

9. DO ANY OF THE FOLLOWING APPLY TO THE PROPERTY IN QUESTION? IF "YES" PLEASE ATTACH SUPPORTING DOCUMENTATION.

BURIED CABLES, LANDFILLS, STUMPHOLES	☐ YES	☒ NO	GRADING/SOIL REMOVAL PERFORMED	☐ YES	☒ NO
EXISTING WASTEWATER SYSTEMS	☐ YES	☒ NO	JURISDICTIONAL WETLANDS	☐ YES	☒ NO
WELLS, SPRINGS, OR WATER LINES	☒ YES	☐ NO	APPROVAL REQUIRED BY ANY OTHER PUBLIC AGENCY	☐ YES	☒ NO
EASEMENTS OR RIGHT-OF-WAYS	☐ YES	☒ NO	WASTEWATER OTHER THAN DOMESTIC SEWAGE	☐ YES	☒ NO

10. PROPERTY OWNER:

NAME: Walter Kenneth Hamrick
ADDRESS: 4400 Sunset Drive
CITY: Charlotte
STATE: NC ZIP: 28227
HOME PHONE: 704-545-5707 WORK PHONE:
MOBILE PHONE: FAX:

11. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:

NAME: WITHERS + RAVENEL
ADDRESS: 111 MACKENAN DRIVE
CITY: CARY
STATE: NC ZIP: 27511
HOME PHONE: WORK PHONE: 919-469-3340
MOBILE PHONE: FAX: 919-535-4545

12. WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 1/1/1975
13 WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY? 5/17/07

14. SEPTIC SYSTEM PERMIT APPLICATION SIGNATURE SECTION:
If the information in this application is falsified, changed, or the site is altered, then the Improvement Permit and Authorization to Construct shall become invalid. I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed. The permit is valid for either 60 months or is non-expiring depending upon the documentation submitted: complete site plan = 60 months, complete plat = non-expiring.

_____
Property Owner's or Owner's Legal Representative Signature Date

15. WELL PERMIT APPLICATION SIGNATURE SECTION:
If the information in this application is falsified, changed, or the site is altered, then the Well Permit shall become invalid. I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed. The permit is valid for a period of 12 months from the date of issuance.

Walter Hamrick 5/14/07
Property Owner's or Owner's Legal Representative Signature Date

☐ SURVEY PLAT TO SCALE SUBMITTED ☐ SCALED SITE PLAN SUBMITTED ☐ UN-SCALED SITE PLAN SUBMITTED

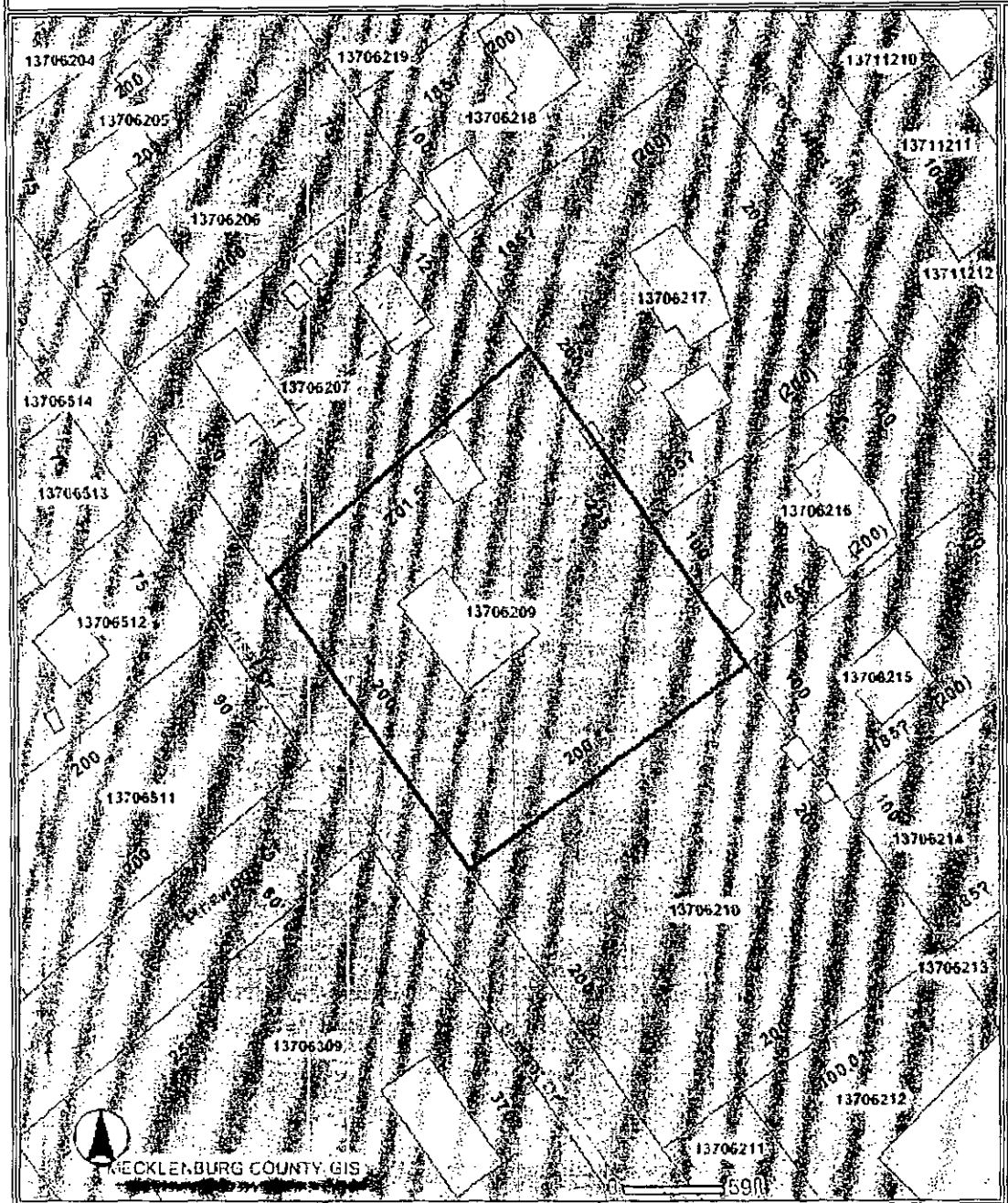
Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Mon May 14 11:11:56 EDT 2007

Walter Hamrick Well Abandonment



Legend

- Highlighted Feature
- Parcel Number Labels
- Lot Dimensions
- County Boundary
- Utility ROW
- Railroad ROW
- Tax Parcel Easements
- Miscellaneous Parcel Lines
- Original Lot Lines
- Private Roads
- Private Roads
- Pipelines
- Condo Outlines
- Condo Outlines
- Parcel Lines in other county
- Rights of Way in other county
- Air Rights Parcels
- Streets
- Interstates
- Major Roads
- Minor Roads
- Streams
- Water Bodies
- Building Footprints
- Jurisdictions
- Charlotte
- Cornelius
- Davidson
- Huntersville
- Matthews
- Mecklenburg
- Mint Hill
- Pineville
- Stallings
- Tax Parcels

This map is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, planimetric maps, and other public records and data. Users of this map are hereby notified that the aforementioned public primary information sources should be consulted for verification. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.



Print

Close

Parcel Information

Parcel ID	Account	Parent	Previous
13706209	INDIVIDUAL		

Owner(s)

Owner Name	Mailing Address	City/State
HAMRICK WALTER KENNETH	4400 SUNSET DR	CHARLOTTE NC 28227
HAMRICK DORIS M WIFE	4400 SUNSET DR	CHARLOTTE NC 28227

Legal Information

Legal	Municipality	Annexed	Special District	Fire District	Acreage
L32-35 &P31 B5 M6-49	MINT HILL		FIRE SERVICE F	MINT HILL	0

Total Parcel Assessment & Exemptions

Building	Land	Features	Total	Exemption	Year Approved	Review Date	Amount
61800	29600	10800	102200				

Sales Information

Sale	Price	Stamps	Qualify	V/I	DeedBook	Type	Legal Ref.	Grantor
Jan 1 1975	0			IMP	02441 - 232		02441-232	

Land Use

Use	Units	Type	Neighborhood	Assessment
1000	0.97	AC	N701	29600

Building Information

Bldg	Description	Type	Year Built	Property Location
1	Single-Fam	RES	1964	4400 SUNSET DR MINT HILL

Bldg	Story	Units	Total SqFt	Heated	Foundation	Ext. Wall	Grade	Value
1	1 STORY	1	2046	1468	CRAWL SPACE	FACE BRICK -	AVERAGE 03	61800

Bldg	Heat	Fuel	FirePlace	AC	Fixtures	Bedrooms	Full Baths	3/4 Baths	1/2 Baths
1	AIR-DUCTED	OIL/WD/COAL		AC-CENTRAL		3	1		0

Sub Areas

Bldg	Description	Size
1	BASE (FIRST FLOOR)	1168
1	UTILITY - UNFINISHED	98
1	BASE - SEMI-FINISHED	280
1	CARPORT - UNFINISHED	480

Depreciation

Bldg	Physical	Functional	Economic	Special	Override
1	AV - 39%				

Special Features & Yard Items

Bldg	Built	Type	Quantity	Units	Value
1	1964	TERRACE	1	4X6	100
1	1974	GARAGE	1	24X32	7100
1	1995	CARPORT	1	20X24	3600

Value Changes

Notice Date	Tax Year	Reason	Changed To	Deferred
Jan 17 2003	2003	Countywide Revaluation	102200	0
Jan 5 1998	1998	Countywide Revaluation	90660	
Jan 2 1991	1991	Countywide Revaluation	80650	

WITHERS & RAVENEL

ENGINEERS | PLANNERS | SURVEYORS

-FAX TRANSMITTAL-

TO: Mecklenburg County Groundwater Services

DATE: 5/14/2007

FROM: Mike Fekete

# of Sheets: 4 Including Cover

JOB #: 02060496.37

FAX #: (704)336-6894

PROJECT NAME: Walter Hamrick Property Well Abandonment

ORIGINAL TO FOLLOW BY MAIL: ☐ YES ☒ NO

Withers & Ravenel (W&R) has been contacted by the North Carolina Dry-Cleaning Solvent Cleanup Program (DSCA) to abandon the water supply well on the Walter Hamrick propert at 4400 Sunset Drive in Charlotte, NC due to low levels of chlorinated hydrocarbons detected in the water. W&R met with Dennis Tindall of Mecklenburg County to make arrangements to have the residence connected to municipal water. W&R is submitting this application for the abandonment of the water supply well at the property referenced above.

MICHAEL FEKETE
(919) 535-5230
mfekete@withersravenel.com