Supervisor/Administrative Professional Checklist

New Septic ☐ New Well ☐ Use Existing ☒ Alteration ☐ Modified Plot Plan ☐

New Septic Fees Paid

IP ($250.00) _____ Initials/Date

CA ($200.00) _____ Initials/Date

OP ($200.00) _____ Initials/Date

(CA and OP fees need to be paid before a building permit can be issued)

New Well Fee Paid: $550.00 _____ Initials/Date

Use Existing Fee Paid: $100.00 LE 11/29/17 Initials/Date

Alteration Fee Paid: $300.00 (Total) $200 (If use existing was paid)_____ Initials/Date

Modified Plot Plan Fee Paid: $100.00 _____ Initials/Date

Floor plans need to be submitted and reviewed before CA can be issued. ☐ Reviewed ☐ _____

This site is served by septic and well. Verify each is complete before final hold is released. ☐

Septic file completed. ☐ _____ Well file completed. ☐ _____

Send permit for signature. ☐ Signature received. ☐ _____

This septic system requires a certified operator contract before final hold is released. ☐

Certified operator contract is on file. ☐ _____

5698B #9316

27 NOV '17 AM 9:51

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: Andy Mazzucco
ADDRESS: 700 Cavendish Ln
CITY: Waxhaw
STATE: NC ZIP: 28173
PHONE: (704) 831-0211
ALTERNATE PHONE:
E-MAIL: amazzucco@carolina.rr.com

PROPERTY OWNER: ( ) SAME AS PERSON FILING APPLICATION
NAME: Robert & Aeron Plooy
ADDRESS: 3850 Oakdale Rd
CITY: Charlotte
STATE: NC ZIP: 28216
PHONE: (704) 439-7975
ALTERNATE PHONE: (704) 641-5285
E-MAIL: bobplooy@outlook.com

JOB LOCATION INFORMATION
TAX PARCEL #: 03312217
STREET ADDRESS: 3850Oakdale Rd
CITY: Charlotte
STATE: NC ZIP: 28216

SUBDIVISION OR MOBILE HOME PARK NAME:
N/A
LOT #: N/A

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: 4
NUMBER OF OCCUPANTS: 2

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

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.

Owner's/Agent's Signature

11/23/17
Date

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

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

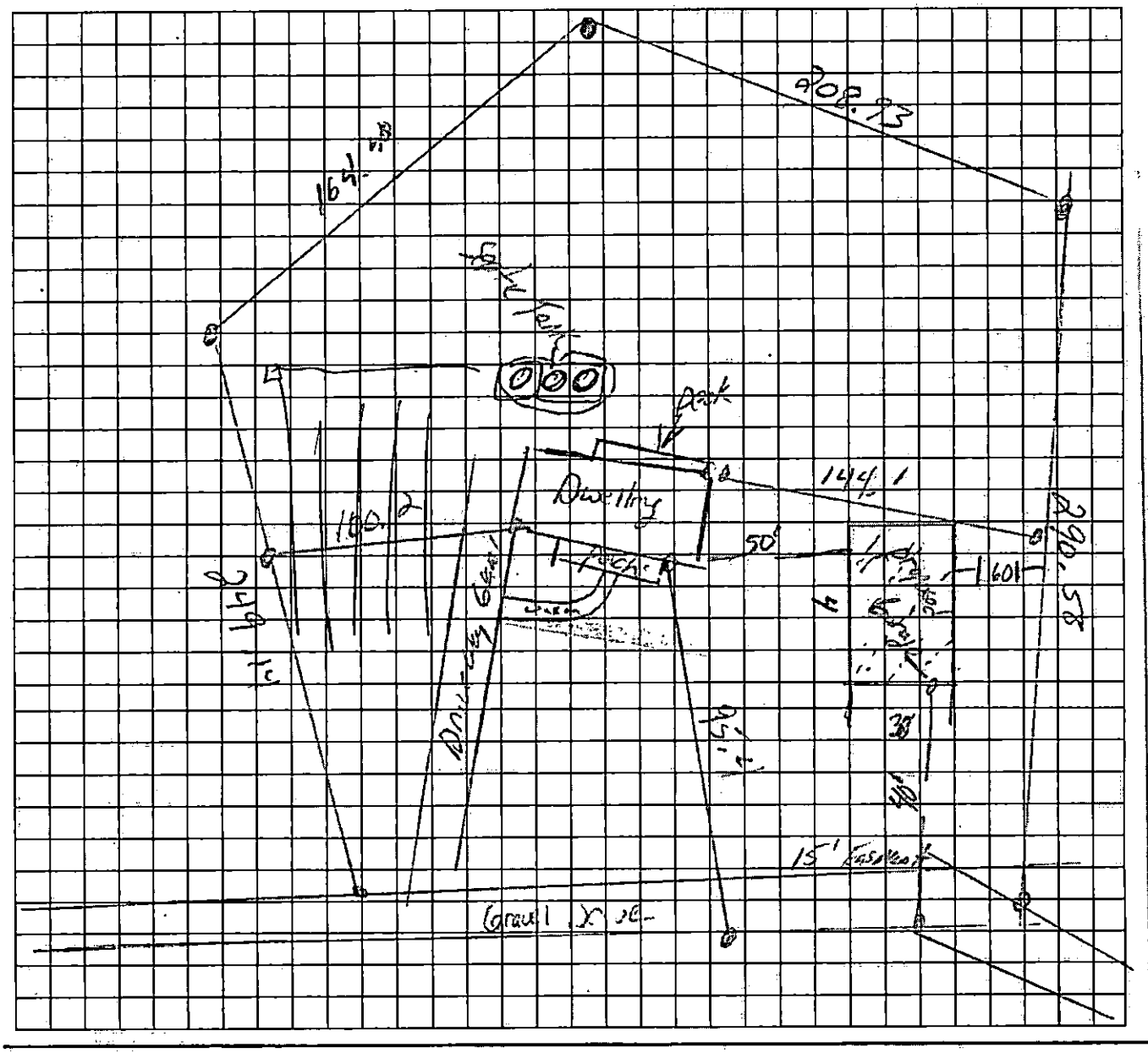
Revised on: 01/03/11

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: 3850 Oakdale Rd Tax Parcel #: 03312217



*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.
- This permit is not transferable.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

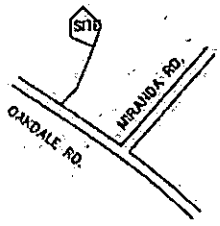
O.K. TO USE FOR A Detached garage addition

REHS Signature _____ Date 11/29/17

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

Revised on: 01/03/11

VICINITY MAP



I certify that this map was drawn under my supervision from an actual survey made under my supervision (deed description in Book 16291, page 261 or other reference source _____); that the boundaries not surveyed are indicated as drawn from information in Book _____, page _____ or other reference source _____; that the ratio of precision or positional accuracy is 1:20000; and that this map meets the requirements of the Standards of Practice for Land Surveying in North Carolina (21 NCAC 56. 1600).

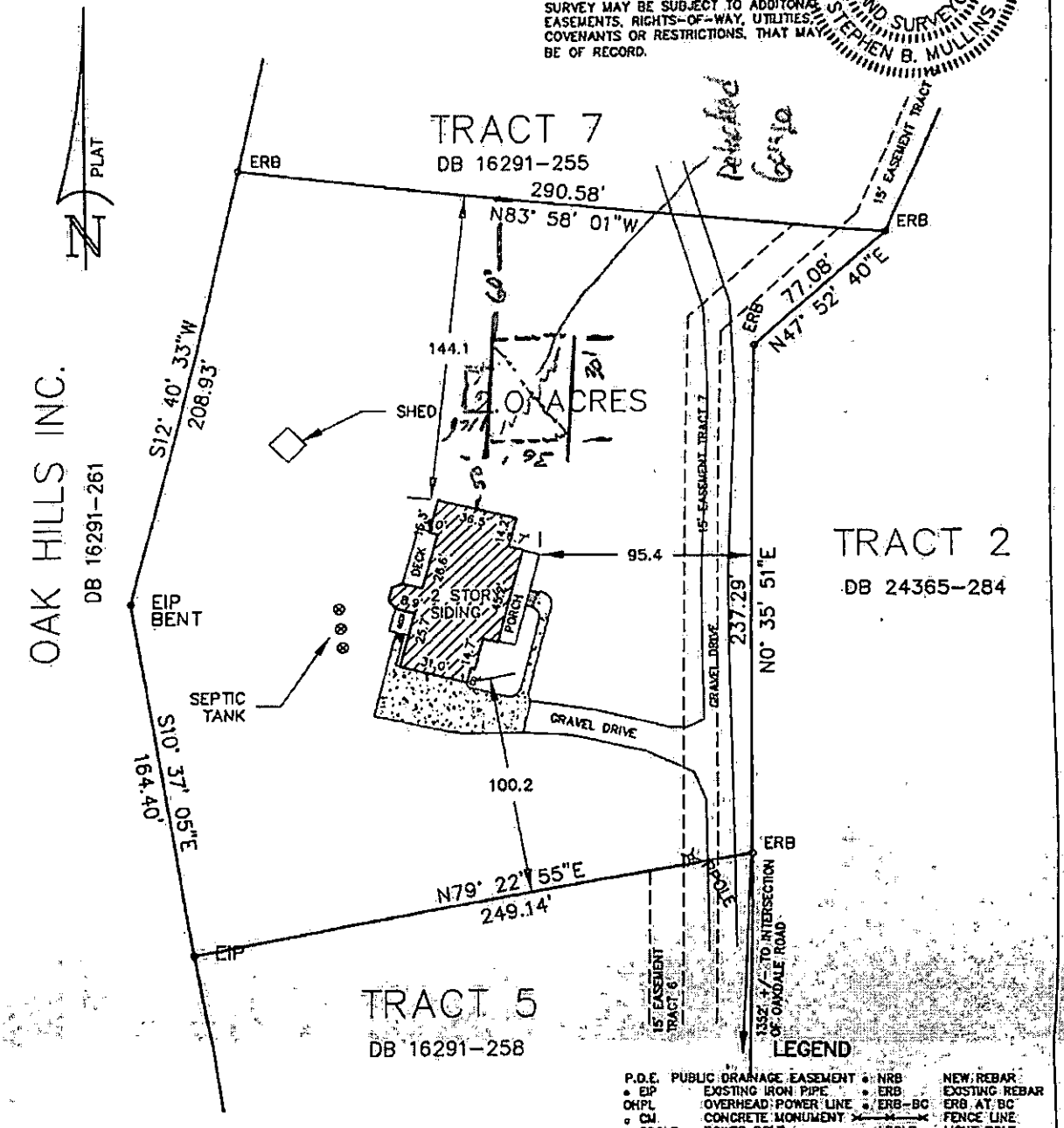
This 7 day of DECEMBER, 2016

SIGNED _____

STEPHEN B. MULLINS PLS
N.C.P.L.S. L-3059 S.C.R.L.S 10780
C-0640

NORTH CAROLINA PROFESSIONAL SEAL L-3059 LAND SURVEYOR STEPHEN B. MULLINS

SURVEY MAY BE SUBJECT TO ADDITIONAL EASEMENTS, RIGHTS-OF-WAY, UTILITIES, COVENANTS OR RESTRICTIONS, THAT MAY BE OF RECORD.



LEGEND

P.D.E.	PUBLIC DRAINAGE EASEMENT	• NRB	NEW REBAR
• EIP	EXISTING IRON PIPE	• ERB	EXISTING REBAR
OHPL	OVERHEAD POWER LINE	• ERB-BC	ERB AT BC
○ CM	CONCRETE MONUMENT	×——×——×	FENCE LINE
PPOLE	POWER POLE	LPOLE	LIGHT POLE
□ PB	TRANSFORMER	● MH	MANHOLE
○ PHONE	TELEPHONE BOX	● CATV	CABLE TV BOX
			PROPERTY LINE NOT SURVEYED

DRAWN BY: SM
AREA COMPUTED BY COORDINATE METHOD

0' 60'

SCALE 1" = 60'

PHYSICAL SURVEY
TRACT 6 SEWELL CRAIG LAWING PROPERTY
LONG CREEK TOWNSHIP
MECKLENBURG CO., NORTH CAROLINA

STREET ADDRESS: 3850 OAKDALE ROAD
TAX PIN: 03312217
OWNED BY: JOEL DOUGLAS STEVENS JR. & KELLY COLLINS STEVENS
CONVEYED TO: BOB & AERON POOLY
RECORDED IN MAP BOOK 29 PAGE 169
19077 DEED BOOK 16291 PAGE 261

PREPARED BY:
STEPHEN B. MULLINS AND ASSOCIATES, P.A.
REGISTERED LAND SURVEYORS
226 WESTINGHOUSE BLVD. SUITE 302
CHARLOTTE, N.C. 28273-6248
(704)583-1800
FAX (704)583-4118

MECKLENBURG COUNTY
Public Health

Gibbie Harris, MSPH, BSN
Health Director

(704) 336-4700

Addendum to Application for
New Well or Septic System Installation
Abandonment or Repair of Existing Well or Septic System

Your signature below confirms the following:

1. The information on the application is true, complete and accurate.

2. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliances with applicable laws and rules.

3. I acknowledge that Champion Window Co. is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at

6031 Donna Dr. Charlotte
Number Street Town
(Or parcel Number)

Property Owner (print name)

Property Owner (signature)

11/27/17
Date

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 11/27/17
Receipt #: 108315
Check / Auth #: VISA 161725
Received By: ELLISLW

Amount: 100.00
Tendered: 100.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: MAZZUCCO, ANDY
Attn:
Address: 700 CAVENDISH LN
Address:
City/State/Zip: WAXHAW, NC 28173

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	Use Existing System 3850 OAKDALE RD		1	100.00	100.00

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

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

Payment Receipt

Mecklenburg County POS

Environmental Health
700 N. Tryon Street
Charlotte, NC 28202
Phone: 704-336-5100

Enter Account # or Customer Name Here: ANDY MAZZUCCO

Bill To:

ANDY MAZZUCCO
700 CAVENDISH LN

Waxhaw, NC 28173

Single Payment

Transaction Date: 11/27/2017 1:12 PM Pacific Time
Pay Method: VISA **********0043
Approval #: 161725
Trace Number: 73313a9b-554d-4f49-a241-7130d591f0ea
Amount: $100.00

Payment Amount: $100.00

Total: $100.00

Thank you for your payment.

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 56988 DATE: 7/22/05

TC: 033-122-17 ☒ L ☒ CRT

SERIAL 19653

Name of Owner JOEL STEVENS Juris.: _____

Address of Property 3850 OAKDALE ROAD

Inspection Data:

Tank Material PCC

Total Length of Drainfield 500'

Number of Lines 5 @ 100'

Cover Depth 16"

Water Supply Source Municipal

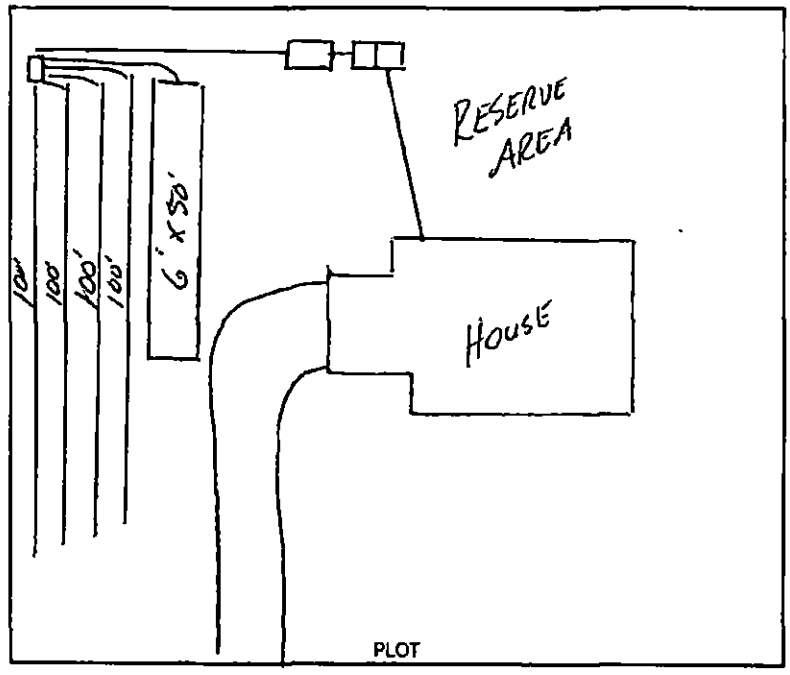
Distance to Water Source NA

Excavation Inspected 7/22/05

Tank(s) Inspected 7/22/05

Wash Line Inspected —

High Water Alarm Inspected 7/22/05



Design 1500ST, 1000DT, PI, 1500SFT, INV CTR# Bobby McArver

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 I5A 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 I5A 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: Five Bedroom House

5 Lines x 100' x 3'

Type IIIb Pump to Innovative System

Tommy Mucci, 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

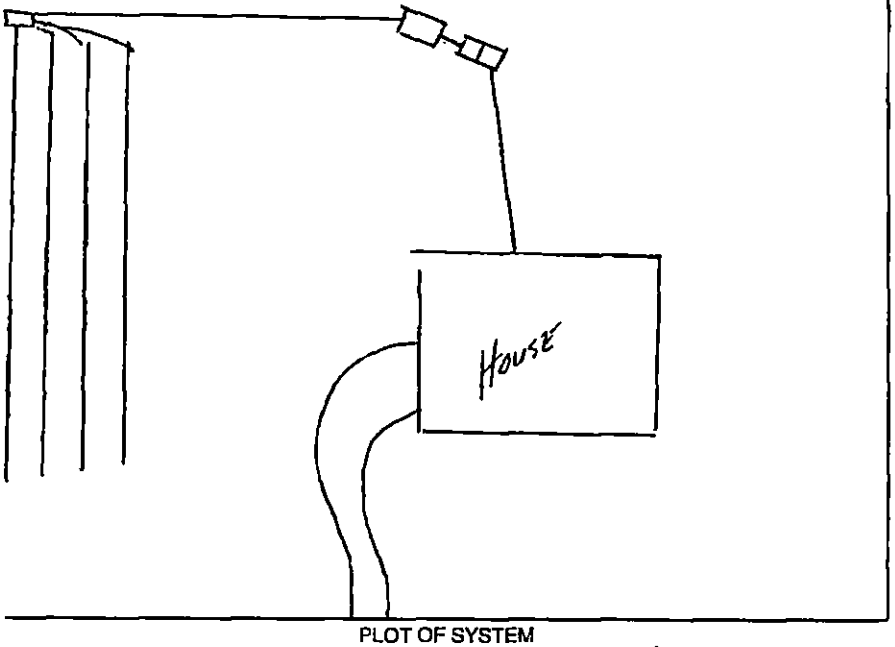
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 56988 DATE: 7/20/05

TC: 033-122-17 ✓L

SERIAL 19852

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 8-18-04. All work shall be completed on or before 8/20/05, 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

← TO OAKDALE ROAD

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank 1000 gallons

Tank Construction PCC

Trench Depth 24-30"

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Trench Walls Scored and Porous yes

Total Line Length 500' feet

Number of Lines 5 x 100 or 4 x 125'

Depth of Stone NA inches

Distance from House >5' feet

Distance from Property Line >10' feet

Distance from Well > 100' feet

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

NAME OF OWNER Joel Stevens

LOCATION OF PROPERTY 3850 Oakdale Road

Comments: Five Bedroom House

5 lines x 100' x 3' or 4 lines x 125' x 3'

Type III b Pump to Innovative System

Pressure Manifold

Environmental Health Specialist R.S.

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