6347B C5

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

1. SEPTIC / TYPE APPLICATION: ☐ N/A ☐ NEW SYSTEM ☐ ALTERATION ☐ REPAIR ☒ MODIFIED PLOT PLAN

2. WELL / TYPE APPLICATION: ☒ N/A ☐ NEW WELL ☐ MAJOR REPAIR ☐ ABANDONMENT

3. JOB LOCATION INFORMATION:

TAX PARCEL NUMBER: 199-353-42
STREET ADDRESS: 10512 GREEN HERON COURT
CITY: CHARLOTTE
STATE: NC ZIP: 28278
SUBDIVISION NAME:
LOT #: 108 LOT SIZE (acres): 2.174
TOWNSHIP:
☒ 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: 4682
NUMBER OF BEDROOMS: 5
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 SEPTIC 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 ☐ PRIVATE WELL ☐ PUBLIC WELL ☐ SHARED WELL ☐ OTHER _____

7. PROPOSED USE OF WELL: ☐ N/A ☐ IRRIGATION ☐ POTABLE (DRINKING WATER) ☐ OTHER _____

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

☐ N/A ☐ ANY TYPE ☒ CONVENTIONAL ☐ ACCEPTED ☐ INNOVATIVE ☐ ALTERNATIVE ☐ OTHER _____

8A. RANK: 1 4 2 3 5

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 (SEPTIC) 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
CHEMICAL/PETROLEUM STORAGE TANKS	☐ YES	☒ NO	KNOWN UNDERGROUND CONTAMINATION	☐ YES	☒ NO
WASTE STORAGE	☐ YES	☒ NO	GROUNDWATER USE RESTRICTIONS/VARIANCES	☐ YES	☒ NO

10. WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____ ☒ UNKNOWN

11. WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY? 7-1-09 ☐ N/A

12. PROPERTY OWNER:

NAME: RON + KIT SHAW
ADDRESS: 2010 PILGRAM ROAD
CITY: BELMAR
STATE: NJ ZIP: 07719
HOME PHONE: 732-556-6712
WORK PHONE:
MOBILE PHONE:
FAX:

13. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:

NAME: REGAL CUSTOM HOME BUILDERS
ADDRESS: 16151 LANCASTER HWY. SUITE E
CITY: CHARLOTTE
STATE: NC ZIP: 28277
HOME PHONE: (o) 704-542-4830
WORK PHONE:
MOBILE PHONE: (c) 704-201-6254
FAX: 704-542-4832

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6984

Revised on: 7/1/08

14. SEPTIC SYSTEM PERMIT APPLICATION:

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 sixty (60) months or is non-expiring depending upon the documentation submitted: complete site plan = 60 months, complete plat = non-expiring.

JJH (Initial here for septic system applications)

15. WELL PERMIT APPLICATION:

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 twelve (12) months from the date of issuance.

_____ (Initial here for well applications)

16. APPLICATION SIGNATURE SECTION:

ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. A proper signature is required in order to process your application. Please review the application carefully and sign in the space provided below.

Joan J. Hight
Property Owner's or Owner's Legal Representative Signature

7-1-08
Date

OFFICE USE ONLY

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

SEPTIC APPLICATION FEES RECEIVED: $ 100 per acre DATE FEE RECEIVED: 7/1/08

WELL APPLICATION FEES RECEIVED: $ _____ DATE FEE RECEIVED: _____

APPLICATION PROCESSED BY: JC

GWS FILE NUMBER ASSIGNED: 063478

APPLICATION ID NUMBER ASSIGNED: 3673

COMMENTS:

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6984

1" = 50'
S12°00'43"E
230.86'
5' SIDEYARD
292 CAPPED
35 LOOK
293 LOOK
294 NL-MAG EX
66 LOOK
57.17'
57.21'
40' MBS
repair area
primary
57.93'
LOT 108
#10512
PIPE
80.97'
52.55'
Drive
20' SETBACK
30' MBS
NL324
SIDEWALK EXIT
EDGE OF PAVEMENT
GREEN HERON COURT
R: 649.15'
SIDE
CUT BANK
old Bill Marlin Boring
Drop Boxes
#5a
80'
100'
130'
100'
93' Repair
91' Repair
86' Repair
55' Repair
63' Repair
801
#10512
94,687 SF
30' REARYARD
628.56'
334.76'
Kill Gully

S&ME

GWS Septic System Design Review

GWS File #: 6347B **Approved** **Disapproved**

Design Review: CMS 7/3/08 ☑ ☐

Field Review: CMS 7/3/08 ☑ ☐

***Projects are not considered "APPROVED" until both sections above are completed and indicate an APPROVED status.**

Date: June 27, 2008

To: Mr. Chris Sherrill, RS, LSS
Mecklenburg County Health Department

Re: Request for a Revision to the Septic Improvement Permit and a Septic Construction Authorization for Lot 108 at The Sanctuary at Lake Wylie

Mecklenburg County Health Department (MCHD) File #6347B

Regal Custom Home Builders, LLC is requesting the original Improvement Permit for the above referenced lot be revised for a new house and driveway plan, and a Construction Authorization be issued for a five bedroom house (see attached Site Plan). Mr. Bill Marlin, LSS with the MCHD had evaluated the soils and approved the proposed septic area at a 0.3 gpd/sqft LTAR in the original system area (see attached S&ME packet and MCHD soil notes). S&ME, Inc. (S&ME) has since evaluated the soils and flagged the primary system and repair area in the new proposed septic area on the lot. The attached sketch and specifications are not an Improvement Permit or Construction Authorization and are intended only to assist the MCHD in permitting the referenced lot at The Sanctuary.

S&ME is proposing a gravity fed 25% Reduction initial system and an LP PPBPS repair at a 0.3 gpd/sqft. LTAR. Neither the soils nor the system design has been reviewed on site by the MCHD at this time. We understand that a building permit cannot be issued until your office issues an Authorization to Construct (ATC). **No grading shall take place on the lot prior to obtaining the ATC from the MCHD.**

Tri-County Wastewater (TCWW) is under contract to supply maintenance services for each septic system installed at The Sanctuary. TCWW will have a list of preferred septic contractors for the subdivision and will also have requirements for septic system installation that are greater than the MCHD and State requirements. It will be the responsibility of TCWW to enforce any requirements above State requirements or the MCHD conditions on the Improvement Permit.

Please review the attached system sketch and design specifications for the Improvement Permit and Construction Authorization. Any additions or revisions you feel are necessary can be made on the Improvement Permit. Please call if you have any questions or comments.

Sincerely,

S&ME, Inc.

Kathleen Saunders, LSSIT
Project Manager/Soil Scientist

Paul G. Penninger, LSS
Senior Soil Scientist

Attachments:
1. System Specifications
2. Site Plan
3. S&ME packet for Current Septic Improvement Permit

Cc: Jason Hughes
Regal Custom Home Builders, LLC

Design Specifications for Lot 108 at The Sanctuary
MCHD File # 6347B

Daily Design Flow:	600 gpd
Number Bedrooms:	5 bedroom
Basement or Crawl Space:	Crawl Space
Septic Tank Size:	1500 gal
Primary System Loading Rate:	**0.3 gpd/ft^2**
Primary System:	**25% Reduction**
Number and length of laterals:	1 @ 80 ft. 1 @ 90 ft. 2 @ 100 ft. 1 @ 130 ft.
Total ft. of primary system:	500 ft.
Distribution Device:	Drop Boxes
Repair System Loading Rate:	**0.3 gpd/ft^2**
Repair System:	**LP PPBPS**

)ENR/DEH

)N-SITE WASTEWATER SECTION

Sheet ___ of ___
PROPERTY ID #: ___
COUNTY: ___

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

)WNER: Lot 108 The Sanctuary — APPLICATION DATE ___
\DDRESS: ___ — DATE EVALUATED: ___
'ROPOSED FACILITY: ___ PROPOSED DESIGN FLOW (.1949): ___ — PROPERTY SIZE: ___
.OCATION 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) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	# 6 L	0-4	WK SBK SCL	FR SS/SP	Red Br				0.3 PS
		4-36	MO SBK C	FI S/P	DK Red				
		36-48	WK SBK C	FR SS/SP	DK Red				
2	# 5 → Bill Marlin's old Boring #1				5, See	engineered	MCHD Soil Sheet		
3									
4									

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

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

COMMENTS: ___

)ENR/DEH

)N-SITE WASTEWATER SECTION

Sheet ____ *of* ____
PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

)WNER: Lot 108 The Sanctuary _____ APPLICATION DATE _____
\DDRESS: _____ DATE EVALUATED: _____
'ROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
.OCATION OF SITE: _____ PROPERTY RECORDED: _____
VATER SUPPLY: • Private • Public • Well • Spring • Other _____
:VALUATION METHOD: • Auger Boring • Pit • Cut TYPE OF WASTEWATER: • Sewage • Industrial Process • Mixed

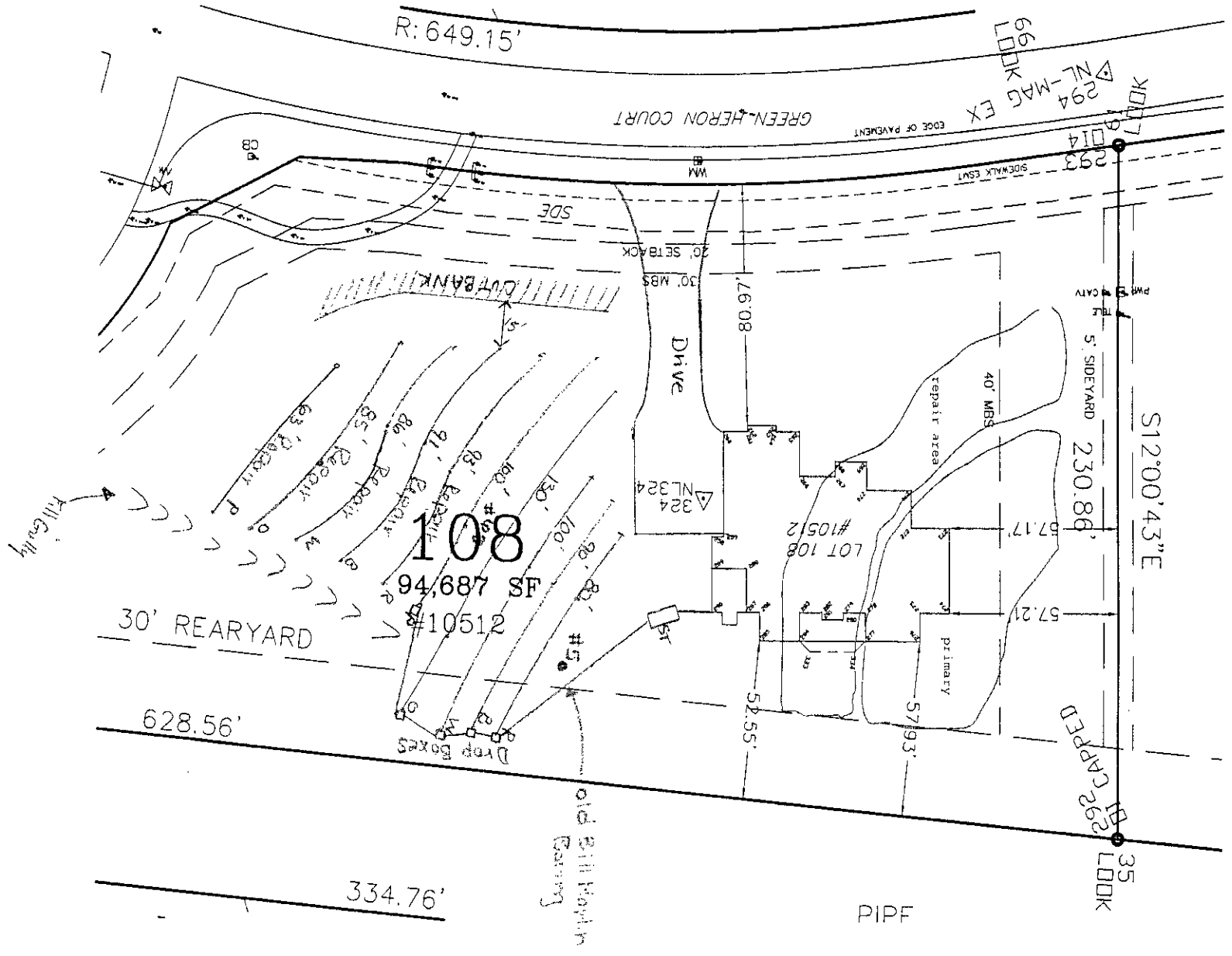
PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	#6 L	0-4	WK SBK SCL	FR SS/SP	Red Br				0.3 RS
		4-36	Mo SBK C	Fi S/P	DK Red				
		36-48	WK SBK C	FR SS/SP	DK Red				
2	#5 → Bill Marlin's old Bermuda #5. See original MCHD soil sheet.								
3									
4									

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____

EVALUATED BY: _____
OTHER(S) PRESENT: _____

)MMENTS: _____


R: 649.15'
GREEN-HERON COURT
EDGE OF PAVEMENT
SIDEWALK ESMT
CB
WM
SDE
20' SETBACK
30' MBS
OUTBANK
Drive
80.97'
5' SIDEYARD
40' MBS
repair area
primary
LOT 108
#10512
108
94,687 SF
#10512
30' REARYARD
628.56'
334.76'
S12°00'43"E
230.86'
57.17'
57.21'
52.55'
57.93'
Drop Boxes
Hillcrest
PIPF
CAPPED
LOOK
NL-MAG EX
NL324
293
294
99
35



S&ME
ENGINEERING · TESTING
ENVIRONMENTAL SERVICES

LOT 108
THE SANCTUARY
MECKLENBURG COUNTY, NORTH CAROLINA

SCALE:	DRAWN BY:	CHECKED BY:
AS SHOWN	JBP	PGP
JOB NO.	DATE:	FIGURE NO.
1588-05-067	JUNE, 2006	1

of Environment, Health, and Natural Resources
Environmental Health
Wastewater Section

Sheet: 1 of 2
Property ID: PO 199-353-02
Lot #: 108
File #: 6347B
Code: 1

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: The Sanctuary of Lake Wylie
Applicant: Paul Penninger
Address: 11104 Limehurst Place, Charlotte, N. C. 28278
Date Evaluated: 3/2/06
Proposed Facility: Residence
Design Flow (.1949): 600gpd
Property Size: 1.0a inv.
Location of Site: Green Heron Court
Property Recorded:
Water Supply: [x] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [x] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [x] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	1946 Landscape Position Slope %	Horizon Depth (IN.)	SOILMORPHOLOGY .1941 Structure Texture	.1941 Consistence Mineralogy	OTHER PROFILE FACTORS .1942 Soil Wetness Color	.1943 Soil Depth (IN.)	.1955 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS, 8	0-8	GR/CL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48+	N/A	NONE	PS, IV
		8-48	SBK/C	FI/SEXP/S/P					.3GPD/FT^2
2	"	0-3	GR/CL	FR/SEXP/SS/SP	"	"	"	"	"
		3-48	SBK/C	FI/SEXP/S/P					
3	"	0-3	GR/CL	FR/SEXP/SS/SP	"	"	"	"	"
		3-48	SBK/C	FI/SEXP/S/P					
4	"	0-3	GR/CL	FR/SEXP/SS/SP	"	"	"	"	"
		3-48	SBK/C	FI/SEXP/S/P					
5	"	0-8	GR/CL	FR/SEXP/SS/SP	"	"	"	"	"
		8-48	SBK/C	FI/SEXP/S/P					

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	III	IIIa
Site LTAR	.3GPD/FT^2	.3GPD/FT^2

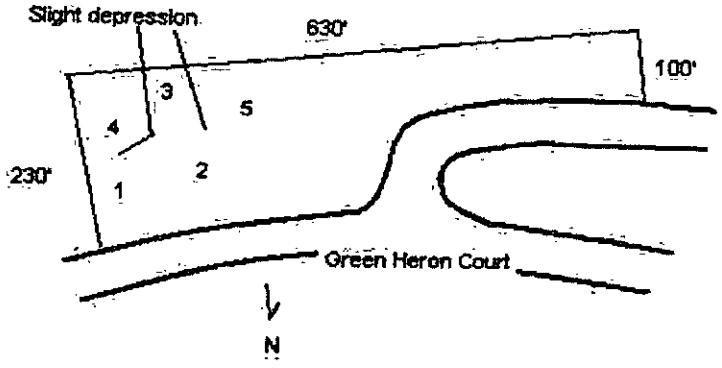
Other Factors (.1946):
Site Classification (.1948): PROVISIONALLY SUITABLE
Evaluated By: W. R. Marlin, LSS, 3/2/20
Others Present:

MENTS:
0% repair, do not install system when soils are wet

Landscape Position	Group	Texture	.1955 LTAR	Structure
R-Ridge	I	S-Sand	1.2 - 0.8	SG-Single Grain
SS-Shoulder Slope		LS-Loamy Sand		M-Massive
LS-Linear Slope				CR-Crumb
FS-Food Slope	II	SL-Sandy Loam	0.8 - 0.6	GR-Granular
NS-Nose Slope		L-Loam		SBK-Subangular Blocky
HS-Head Slope				ABK-Angular Blocky
CC-Concave Slope	III	SI-Silt	0.6 - 0.3	PL-Platy
CV-Convex Slope		SICL-Silty Clay Loam		PR-Prismatic
T-Terrace		CL-Clay Loam		
FP-Flood Plain		SCL-Sandy Clay Loam		
	IV	SC-Sandy Clay	0.4 - 0.1	
		SIC-Silty Clay		
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	NS-Non-Sticky	SEXP-Slightly Expansive
FR-Friable	SS-Slightly Sticky	EXP-Expansive
FI-Firm	S-Sticky	
VFI-Very Firm	VS-Very Sticky	
EFI-Extremely Firm	NP-Non-Plastic	
	SP-Slightly Plastic	
	P-Plastic	
	VP-Very Plastic	

Sketch of Soil Evaluation Locations



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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30003673** GWS File #: **6347B** Tax Parcel #: **199-353-42**

- This 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 must be obtained prior to receiving a Building Permit. The Construction Authorization is **NOT** transferable. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.
- Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

I. This Improvement Permit Shall: Expire in Five (5) Years **Expiration Date (If Applicable):** 7/3/2013

Type of Installation: Residential - Modified Plot Plan Lot Number: 108

Structure Type: HOUSE Size (ft^2): 4682 # Bedrooms: 5 # Occupants: 4

Building Foundation: Crawl Space Water Supply: Municipal

II. Initial System Type: Approved **System Classification:** IIIg

Initial System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	N/A
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1500	Total Trench Length (ft):	500
Maximum Trench Depth (in):	30	Depth of Media (in):	12	Distribution Device:	Drop Boxes		

III. Repair System Type: PPBPS (gravity) **System Classification:** IVa

Repair System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1000	Total Trench Length (ft):	333
Maximum Trench Depth (in):	30	Depth of Media (in):	24	Distribution Device:	Manifold (LPP Distri		

IV. Permit Conditions/Comments:

(Please See the Following Page for Permit Conditions.)

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment, and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until an INSTALLATION APPROVAL is granted by the Department.
- The septic system installer shall be a registered septic contractor with Mecklenburg County Health Department.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

DENR Authorized Agent: Chris Sherrill Owner/Legal Agent: JASON J. HUGHES
Print Name

Signature: Signature:

Date Issued: 7/3/2008

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: 30003673 GWS File #: 6347B

IV. Permit Conditions/Comments:

- This type of repair system requires the installation of a pump tank and all associated components. This type of system will require routine inspections by our office. The system owner is responsible for all fees associated with these inspections.
- This type of repair system requires the property owner to obtain a contract with a Certified Operator to perform routine inspections and maintenance on the system.
- This type of repair system requires periodic inspections by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- The septic system shall be installed in accordance with the plans submitted by the wastewater system design consultant.
- All waterlines must be located a minimum of 10 ft. from any part of the septic system.

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until an INSTALLATION APPROVAL is granted by the Department.
- The septic system installer shall be a registered septic contractor with Mecklenburg County Health Department.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

DENR Authorized Agent: Chris Sherrill
Signature: Christopher M Sherrill
Date Issued: 7/3/2008

Owner/Legal Agent: JASON J. HUGHES
Print Name
Signature: Jason J. Hughes

FEE: 400.00
DATE: 7/17/2008

CONSTRUCTION AUTHORIZATION FOR AN ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES

FILE NUMBER: 6347B

PERMIT NUMBER: 30003673

PARCEL NUMBER: 19935342

JOB LOCATION INFORMATION

ADDRESS: 10512 GREEN HERON CT

CITY: CHARLOTTE **STATE: NC** **ZIP:** 28278

ISSUED TO: Ron & Kit Shaw

CONSTRUCTION AUTHORIZATION ISSUANCE DATE: 7/17/2008

CONSTRUCTION AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 30003673, AND THE ATTACHED SITE PLAN WITH SYSTEM DETAILS. CONSTRUCTION AND INSTALLATION MUST ALSO MEET ALL REQUIREMENTS SET FORTH IN THE RULES GOVERNING SANITARY SEWAGE COLLECTION, TREATMENT, AND DISPOSAL AND ANY OTHER APPLICABLE RULES AND LAWS.

2. AN INSTALLATION APPROVAL MUST BE SECURED PRIOR TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH THE MECKLENBURG COUNTY HEALTH DEPARTMENT.

3. ANY ALTERATION IN SITE OR SOIL CONDITIONS (INCLUDING LOCATION OF STRUCTURES AND APPURTENANCES) OR MODIFICATION IN USE, DESIGN WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS AS SPECIFIED IN THE ASSOCIATED IMPROVEMENT PERMIT AND APPLICATION, MAY SUBJECT THIS CONSTRUCTION AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. THIS CONSTRUCTION AUTHORIZATION AS PROVIDED IN G.S. 130A-335(f) AND G.S. 130A-336(b) SHALL BE VALID FOR A PERIOD EQUAL TO THE VALIDITY OF THE IMPROVEMENT PERMIT, NOT TO EXCEED 60 MONTHS.
   *CONSTRUCTION AUTHORIZATION EXPIRATION DATE: 7/3/2013

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

INSTALLATION APPROVAL for an
ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 6347B Permit #: 3673 Tax Parcel #: 199-353-42

Property Owner: RON + KIT SHAW

Job Location Address: 10512 GREEN HERON COURT (LOT #108)

City: CHARLOTTE State: NC Zip Code: 28278

Installation Approval Issuance Date: 10/28/08

Permission is hereby given to ☑ install ☐ alter ☐ repair an on-site wastewater treatment & and disposal system, with subsurface soil absorption and effluent discharge, as specified herein at the described location. This approval is granted based upon the application information submitted to our office. All work shall be completed on or before 11/28/08, after which date this approval 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 granting this approval. 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 of hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

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

Permitted Design Flow: 600 GPD

Site LTAR: .3 GPD/ft² (For new installations only.)

Liquid Capacity of Septic Tank: 1500 gallons

Liquid Capacity of Dosing Tank: N/A gallons

Drainfield Design ☐ N/A

Trench Depth: 30 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 500 feet

# of Lines: 5 @ VAR feet

Depth of Media: 12 inches (Type) INNOVATIVE

Distribution Device: DROP BOXES

Bed Design *(For Repair Installations ONLY.)* ☑ N/A

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Distribution Device: _____

Water Supply Source

☑ Municipal ☐ Private Well ☐ Community Well

☐ Other _____

Minimum System Setbacks

Distance from Building Foundation: 5 feet

Distance from Property Line: 10 feet

Distance from Water Supply Source: 10 feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)

* INSTALL IN ACCORDANCE W/ PLANS SUBMITTED BY S+ME, INC.

CMS 10/28/08

Comments: System Classification & Type: IIIg

DENR Authorized Agent: Chris Sherrill, RS, LSS Signature: Chris Sherrill

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

OPERATION PERMIT for an ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 63473 Permit #: 3673 Tax Parcel #: 199-353-42

Property Owner: RON & KIT SHAW

Job Location Address: 10512 GREEN HERON COURT

City: CHARLOTTE State: NC Zip Code: 28278

Operation Permit Issuance Date: 3/20/09 Contractor Name: STANLEY

Permitted Design Flow: 600 GPD

Liquid Capacity of Septic Tank: 1500 gallons

Liquid Capacity of Dosing Tank: — gallons

Effluent Pump Model: —

Drainfield Installation ☐ N/A

Trench Depth: 30 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 500 feet

# of Lines: 5 @ VARY feet

Depth of Media: 12 inches (Type) IQ4W

Depth of Cover: 18 inches

Distribution Device: DROP BOXES

Bed Installation *(For Repair Installations ONLY.)* ☒ N/A

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Depth of Cover: _____ inches

Distribution Device: _____

Water Supply Source

☒ Municipal ☐ Private Well ☐ Community Well

☐ Other _____

System Installation Setbacks

Distance from Building Foundation: >5' feet

Distance from Property Line: 710' feet

Distance from Water Supply Source: >100 feet

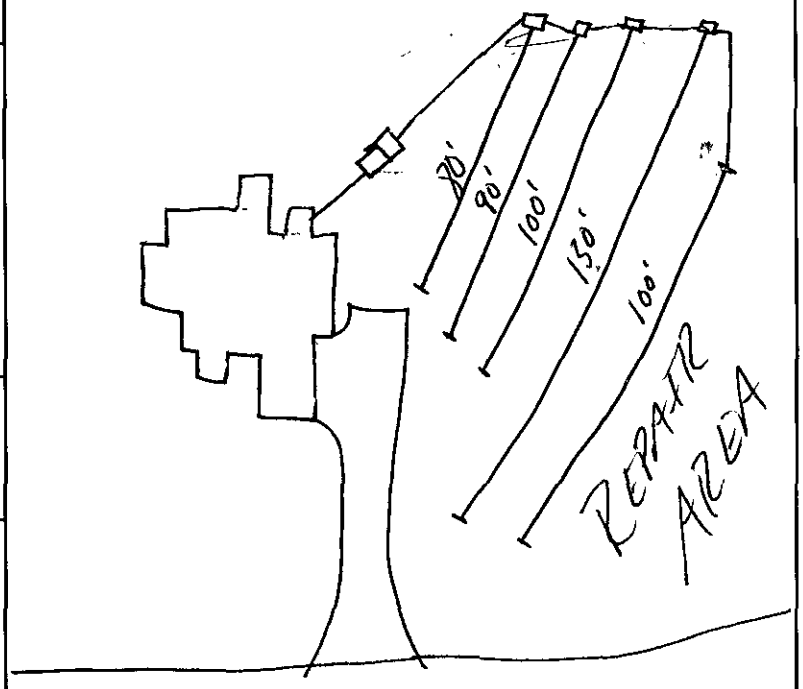
Inspection Dates

Tank(s) Inspected: 3/19/09

Excavation Inspected: 3/20/09

Pump & Controls Inspected: —

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)



The undersigned has inspected the Septic Tank System described above, and certifies it has been ☒ installed ☐ altered ☐ repaired ☒ as detailed in the plot above ☐ in accordance with the permit issued and meets the provisions of 15A NCAC 18A. 1900, "Laws and Rules for Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. The issuance of this 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 15A NCAC 18A. 1900 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 or Revocation of this permit.

Comments: System Classification & Type: III g, IQ4W, GRAVITY, NA, NA

DENR Authorized Agent: Jeremy Michelow, R.S. Signature: Jeremy Michelow, R.S.

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

OPERATION PERMIT for an
ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 6347B Permit #: 3673 Tax Parcel #: 199-353-42

Property Owner: Ron + Kit Shaw

Job Location Address: 10512 Green Heron Court

City: Charlotte State: NC Zip Code: 28278

OPERATION PERMIT CONDITIONS:

I. Performance: System shall perform in accordance with 15A NCAC 18A .1961.

II. Monitoring: System shall be monitored as required by 15A NCAC 18A .1961.

III. Maintenance: Ground absorption sewage treatment and disposal systems shall be checked, and the contents of the septic tank removed, periodically from all compartments, to ensure proper operation of the system. The contents shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.

IV. Operation: System shall be operated in accordance with 15A NCAC 18A .1961.

System Classification: IIIg

*Operation Permits for Type V and VI systems expire five (5) years from the date of issuance (in accordance with Table V(a)). The system owner must contact GWS six (6) months prior to expiration for permit renewal.

Subsurface system operator required: Yes ☐ No ☒

☐ This type of system requires the system owner to maintain a contract with a certified operator to perform system inspection, maintenance, and reporting as required in 15A NCAC 18A .1961. and Table V(a). The system owner is responsible for all fees associated with these services.

☒ System does not require inspection by GWS on a routine frequency.

☐ System requires inspection by GWS once every five (5) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every three (3) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every twelve (12) months. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every six (6) months. The system owner is responsible for all fees associated with the inspection.

V. Other:

DENR Authorized Agent: Tommy Michaux, R.S. Date: 3/20/09

Signature: Tommy Michaux, R.S.

GWS – RES. APP 07/05

SEPTIC FEE: 200 ~~
DATE: 2/14/06
CRT [ ] Check # 001425
JKA

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

FILE # 60347B

WELL FEE: _____
DATE: _____
CRT [ ]

SEPTIC / TYPE APPLICATION: ☐ NONE ☐ NEW SYSTEM ☐ ALTERATION ☐ REPAIR ☐ MODIFY PLOT PLAN

WELL / TYPE APPLICATION: ☐ NONE ☐ NEW WELL ☐ MAJOR REPAIR ☐ ABANDONMENT

JOB LOCATION INFORMATION:

TAX/PARCEL #: 19935302
STREET ADDRESS: Sage Thrasher Lane
CITY: Charlotte
STATE: NC ZIP: 28278
SUBDIVISION OR MOBILE HOME PARK NAME: The Sanctuary
LOT #: 108
TOWNSHIP:

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

BUILDING INFORMATION:

TYPE OF BUILDING:

☐ SINGLE MOBILE HOME (S) ☐ MODULAR HOME (M)
☐ DOUBLE WIDE (D) ☐ MULTIPLE FAMILY (U)
☒ HOUSE (H) ☐ OTHER

HEATED SQUARE FOOTAGE:
NUMBER OF BEDROOMS: 5
NUMBER OF OCCUPANTS:

FOUNDATION FOR RESIDENCE:

☐ CONCRETE SLAB ☒ BASEMENT WITH PLUMBING
☐ CRAWLSPACE ☐ BASEMENT WITH NO PLUMBING

IF PLANNING TO EXPAND/ALTER THE EXISTING SYSTEM INDICATE THE FOLLOWING CHANGES:

NUMBER OF BEDROOMS TO BE ADDED: NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE:
WILL THERE BE A HOME BUSINESS IN THE RESIDENCE? ☐ YES ☐ NO TYPE:

WATER SUPPLY:

☐ MUNICIPAL (M) ☒ PUBLIC (C) ☐ PRIVATE WELL (P) ☐ SHARED WELL (S) ☐ OTHER 'SPRINGS' (O)

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

ARE ANY OF THE FOLLOWING LOCATED ON THE PROPERTY? IF SO, PLEASE SHOW LOCATION ON SITE PLAN/PLAT.

BURIED CABLES, LANDFILLS, STUMPHOLES	☐ YES ☒ NO	WELLS, SPRINGS, OR WATER LINES	☐ YES ☒ NO
EXISTING WASTEWATER SYSTEMS	☐ YES ☒ NO	DESIGNATED WETLANDS	☐ YES ☐ NO
EASEMENTS OR RIGHT-OF-WAYS	☐ YES ☒ NO	GRADING/SOIL REMOVAL PERFORMED	☐ YES ☒ NO

PROPERTY OWNER:

NAME: The Sanctuary of Lake Wylie, LLC
ADDRESS: 11104 Limehurst Place
CITY: Charlotte
STATE: NC ZIP: 28278
HOME PHONE: — WORK PHONE: 295-1106
MOBILE PHONE: — FAX: —

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: Paul Penninger, S&ME, Inc
ADDRESS: 385 Timber Rd suite 104
CITY: Mooresville
STATE: NC ZIP: 28115
HOME PHONE: WORK PHONE: 662-8625
MOBILE PHONE: 996-6330 FAX: 662-8735

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 2005
WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY? ~ 120 days

*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 the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

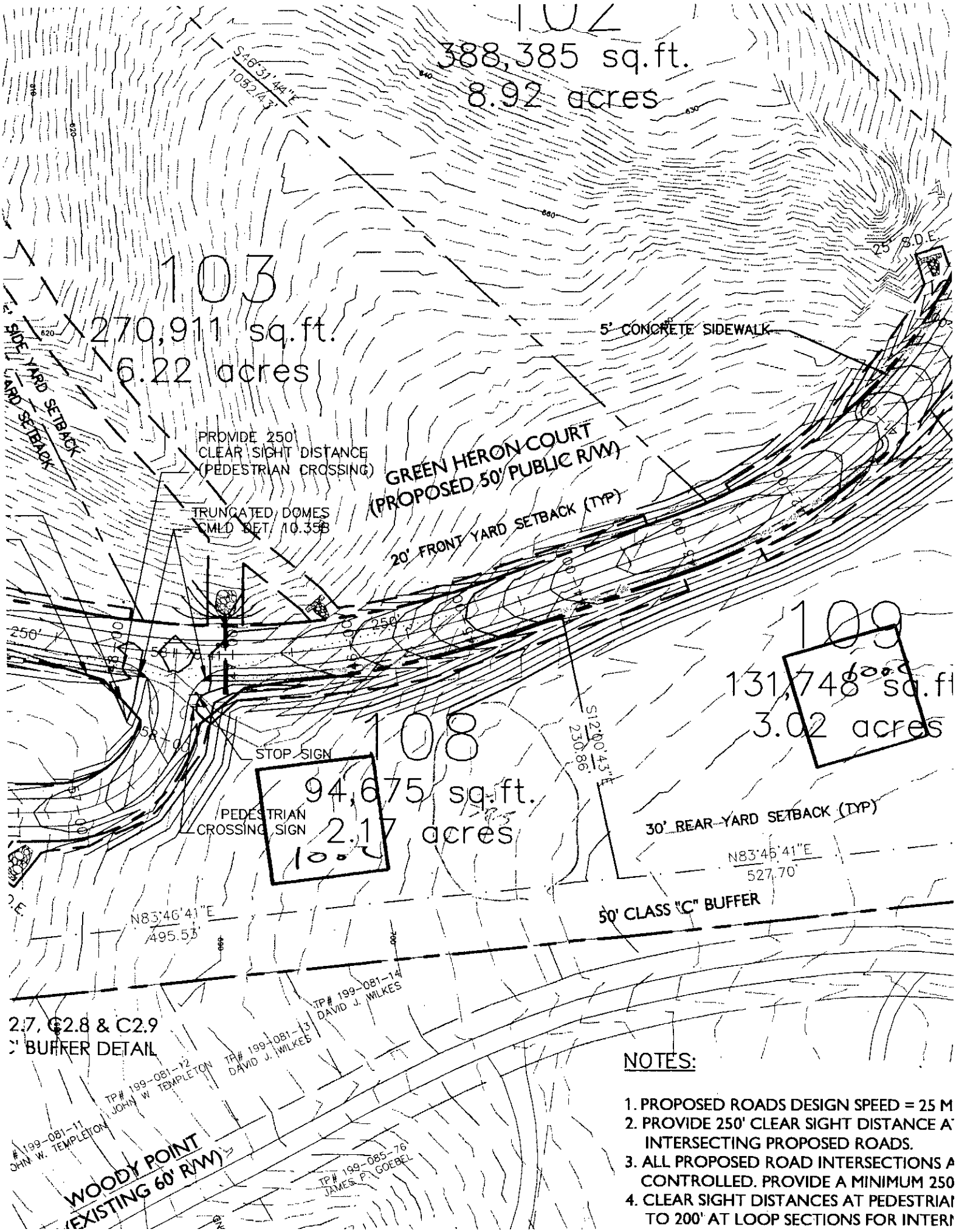
2-13-06
Owner's/Agent's Signature Date

NORTH CAROLINA DEPARTMENT OF
ENVIRONMENT & NATURAL RESOURCES DIVISION
OF ENVIRONMENTAL HEALTH ON-SITE
WASTEWATER SECTION

*A Well 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 the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Owner's/Agent's Signature Date

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



2.7, C2.8 & C2.9
' BUFFER DETAIL

NOTES:

1. PROPOSED ROADS DESIGN SPEED = 25 M
2. PROVIDE 250' CLEAR SIGHT DISTANCE A
   INTERSECTING PROPOSED ROADS.
3. ALL PROPOSED ROAD INTERSECTIONS A
   CONTROLLED. PROVIDE A MINIMUM 250
4. CLEAR SIGHT DISTANCES AT PEDESTRIAI
   TO 200' AT LOOP SECTIONS FOR INTERI

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Sheet: 1 of 2
Property ID: PO 199-353-02
Lot #: 108
File #: 6347B
Code: 1

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: The Sanctuary of Lake Wylie
Applicant: Paul Penninger
Address: 11104 Limehurst Place, Charlotte, N. C., 28278
Date Evaluated: 3/2/06
Proposed Facility: Residence
Design Flow (.1949): 600gpd
Property Size: 1.0a inv.
Location of Site: Green Heron Court
Property Recorded:
Water Supply: [x] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [x] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [x] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY 1941		OTHER PROFILE FACTORS				
			1941 Structure/ Texture	1941 Consistence Mineralogy	1942 Soil Wetness/ Color	1943 Soil Depth (IN.)	1956 Sapro- Class	1944 Restr Horiz	Profile Class & LTAR
1	LS, 8	0-8	GR/CL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48+	N/A	NONE	PS, IV
		8-48	SBK/C	FI/SEXP/S/P					.3GPD/FT^2
2	"	0-3	GR/CL	FR/SEXP/SS/SP	"	"	"	"	"
		3-48	SBK/C	FI/SEXP/S/P					
3	"	0-3	GR/CL	FR/SEXP/SS/SP	"	"	"	"	"
		3-48	SBK/C	FI/SEXP/S/P					
4	"	0-3	GR/CL	FR/SEXP/SS/SP	"	"	"	"	"
		3-48	SBK/C	FI/SEXP/S/P					
5	"	0-8	GR/CL	FR/SEXP/SS/SP	"	"	"	"	"
		8-48	SBK/C	FI/SEXP/S/P					

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR	.3GPD/FT^2	.3GPD/FT^2

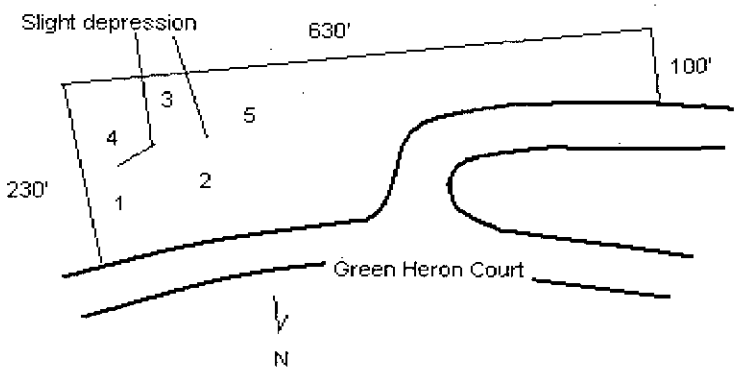
Other Factors (.1946):
Site Classification (.1948): PROVISIONALLY SUITABLE
Evaluated By: W. R. Marlin, LSS, 3/2/20 W. R. Marlin
Others Present:

COMMENTS:
100% repair, do not install system when soils are wet

Landscape Position	Group	Texture	.1955 LTAR	Structure
R-Ridge	I	S-Sand	1.2 - 0.8	SG-Single Grain
SS-Shoulder Slope		LS-Loamy Sand		M-Massive
LS-Linear Slope				CR-Crumb
FS-Food Slope	II	SL-Sandy Loam	0.8 - 0.6	GR-Granular
NS-Nose Slope		L-Loam		SBK-Subangular Blocky
HS-Head Slope				ABK-Angular Blocky
CC-Concave Slope	III	SI-Silt	0.6 - 0.3	PL-Platy
CV-Convex Slope		SICL-Silty Clay Loam		PR-Prismatic
T-Terrace				
FP-Flood Plain		CL-Clay Loam		
		SCL-Sandy Clay Loam		
	IV	SC-Sandy Clay	0.4 - 0.1	
		SIC-Silty Clay		
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	NS-Non-Sticky	SEXP-Slightly Expansive
FR-Friable	SS-Slightly Sticky	EXP-Expansive
FI-Firm	S-Sticky	
VFI-Very Firm	VS-Very Sticky	
EFI-Extremely Firm	NP-Non-Plastic	
	SP-Slightly Plastic	
	P-Plastic	
	VP-Very Plastic	

Sketch of Soil Evaluation Locations



S&ME

Date: June 23, 2006

To: Mr. Zach Petersen, R.S.
Mecklenburg County Env. Health Dept.

From: Paul G. Penninger, LSS
Kathleen Saunders, LSSIT

RE: Request for an Improvement Permit for Lot 108 at The Sanctuary:
MCHD File #6347B

The Sanctuary at Lake Wylie is requesting an Improvement Permit for the above referenced lot. Mr. Bill Marlin has evaluated the soils (see attached MCHD soil sheets) and S&ME, Inc. has flagged the system and repair on the lot. The septic lines have been located by the surveyor and are shown on the attached maps provided by LandDesign Engineering. The attached sketch and specifications are not an Improvement Permit and are intended only to assist the MCHD in permitting the referenced lot at The Sanctuary.

We understand that a building permit cannot be issued until your office issues an Authorization to Construct (ATC). The buyer will apply for the ATC. If the buyer's house pad does not fit in the "building envelope" shown on the Improvement Permit, we understand that the proposed system may have to be modified prior to your office issuing the ATC. **No grading shall take place on the lot prior to obtaining the ATC from the MCHD.**

Tri-County Wastewater (TCWW) is under contract to supply maintenance services for each septic system installed at The Sanctuary. TCWW will have a list of preferred septic contractors for the subdivision and will also have requirements for septic system installation that are greater than the MCHD and State requirements. It will be the responsibility of TCWW to enforce any requirements above State requirements or the MCHD conditions on the Improvement Permit.

Please review the attached system sketch and design specifications for the Improvement Permit. Any additions or revisions you feel are necessary can be made on the Improvement Permit. Please call in you have and questions or comments.

Design Specifications for Lot 108 at The Sanctuary
MCHD File # 6347B

Daily Design Flow:	600 gpd
Number Bedrooms:	5 bedroom
Basement or Crawl Space:	Crawl Space
Septic Tank Size:	1500 gal
Pump Tank Size:	1500 gal
Primary System Loading Rate:	**0.3 gpd/ft^2**
Primary System:	**25% reduction**
Number and length of laterals:	4 @ 125 ft. endfed
Total ft. of primary system:	500 ft.
Flow Rate through system:	22 gpm – use ½ in. SCH 80 taps with 2 ft. head pressure on pressure manifold (5.5 gpm per tap)
Pump Requirements:	to be calculated by installer when specific house and pump tank locations are available
Dosing Volume:	approx. 270 gal. – 2.2 doses/day at design flow
Depth of effluent pumped per dose:	calculated to specific tank by measure or dealer engineering specifications (1 cubic ft. of water equals 7.48 gal.)
Check Valve:	yes
Siphon break hole:	no
Repair System Loading Rate:	**0.3 gpd/ft^2**
Repair System:	**LP PPBPS**
Total ft. of repair	400 ft. (334 required)

Notes:



S&ME
ENGINEERING · TESTING
ENVIRONMENTAL SERVICES

LOT 108

THE SANCTUARY

MECKLENBURG COUNTY, NORTH CAROLINA

SCALE: AS SHOWN	DRAWN BY: JBP	CHECKED BY: PGP	
JOB NO. 1588-05-067	DATE: JUNE, 2006	FIGURE NO. 1	

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30000416** GWS File #: **6347B** Tax Parcel #: **199-353-02**

- This 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 must be obtained prior to receiving a Building Permit. The Construction Authorization is **NOT** transferable. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.
- Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

I. This Improvement Permit Shall: Expire in Five (5) Years **Expiration Date (If Applicable):** 7/17/2011

Type of Installation: Residential - New System Lot Number: 108

Structure Type: HOUSE Size (ft^2): 0 # Bedrooms: 5 # Occupants: 10

Building Foundation: Basement With Plumbing Water Supply: Community

II. Initial System Type: Pump to Innovative or Experimental **System Classification:** IIIb

Initial System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1500	Total Trench Length (ft):	500
Maximum Trench Depth (in):	30	Depth of Media (in):	N/A	Distribution Device:	Pressure Manifold		

III. Repair System Type: PPBPS (pressurized) **System Classification:** IVb

Repair System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	999	Total Trench Length (ft):	333
Maximum Trench Depth (in):	40	Depth of Media (in):	N/A	Distribution Device:	N/A		

IV. Permit Conditions/Comments:

(Please See the Following Page for Permit Conditions.)

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment, and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until an INSTALLATION APPROVAL is granted by the Department.
- The septic system installer shall be a registered septic contractor with Mecklenburg County Health Department.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

DENR Authorized Agent: Zach Petersen Owner/Legal Agent: Paul Pennington

Print Name

Signature: Signature:

Date Issued: 7/17/2006

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30000416** GWS File #: **6347B**

IV. Permit Conditions/Comments:

- This type of septic system requires an inspection once every 5 years by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- The septic system shall be installed in accordance with the plans submitted by the wastewater system design consultant.
- All components of the septic system must be installed in accordance with the required setbacks listed on the corresponding plot plan.

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until an INSTALLATION APPROVAL is granted by the Department.
- The septic system installer shall be a registered septic contractor with Mecklenburg County Health Department.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

DENR Authorized Agent: Zach Petersen Owner/Legal Agent: PAUL PENNINGTON
Print Name

Signature: Signature:

Date Issued: 7/17/2006



10512 GREEN HERON CT

19935342

1/10/2008

duponbj

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

LD start

Posse LD finish

Groundwater & Wastewater Services
Septic Project File & Data Review Worksheet

GWS File #: 6347B WASPS App #: CS 3673

Primary ES assigned to project: CS

Secondary ES assigned to project:

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

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: 5			
	Were sufficient auger borings made?	Yes ☑	No ☐	N/A ☐
.1939(d), .1955, .1956, .1957	LTAR .3	Yes ☑	No ☐	N/A ☐
	Improvement Permit/Construction Authorization			
.1937(g) 130A-336(a)	Proposed System Type stated-Initial	Yes ☑	No ☐	N/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) .1945(b)	System components shown – Initial	Yes ☑	No ☐	N/A ☐
.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: IP-6347B

INSTALLATION APPROVAL - 10/28/08

IA issued date: 10-28-08

OP issued date: 1-20-09

Review performed by: IR Date performed: 1.30.09

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	02/14/06	**Amount:**	1,000.00
Receipt #:	41267	**Tendered:**	1,000.00
Check / Auth #:	CHECK 9425	**Returned:**	0.00
Received By:	AIDOOJK		

Account Information

Account #: 200000
Contractor: S&ME
Attn:
Address: 3718 OLD BATTLEGROUND ROAD
Address:
City/State/Zip: GREENSBORO, NC 27410

Item	Description	Permit#	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen THE SANTUARY LOT 106-110		1	1,000.00	1,000.00

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

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

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	07/17/08	**Amount:**	200.00
Receipt #:	58248	**Tendered:**	0.00
Check / Auth #:	CHARGE	**Returned:**	0.00
Received By:	CRAIGGY		

Account Information

Account #: B90310
Contractor: REGAL CUSTOM HOME BUILDERS L
Attn:
Address: 1615 LANCASTER HWY
Address: SUITE E
City/State/Zip: CHARLOTTE, NC 28277

Item	Description	Permit#	Quantity	Unit Price	Total Price
0734	Auth for Waste Wtr Sys Constr 10512 GREEN HERON CT/FILE 6347B		1	200.00	200.00

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
300.00	515.60				

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	07/17/08	**Amount:**	200.00
Receipt #:	58249	**Tendered:**	0.00
Check / Auth #:	CHARGE	**Returned:**	0.00
Received By:	CRAIGGY		

Account Information

Account #: B90310
Contractor: REGAL CUSTOM HOME BUILDERS L
Attn:
Address: 1615 LANCASTER HWY
Address: SUITE E
City/State/Zip: CHARLOTTE, NC 28277

Item	Description	Permit#	Quantity	Unit Price	Total Price
0703	Installation/Final Approval 10512 GREEN HERON CT/FILE 6347B		1	200.00	200.00

----------**Outstanding Balances**----------

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
500.00	515.60				

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	07/01/08	**Amount:**	100.00
Receipt #:	58042	**Tendered:**	0.00
Check / Auth #:	CHARGE	**Returned:**	0.00
Received By:	CRAIGGY		

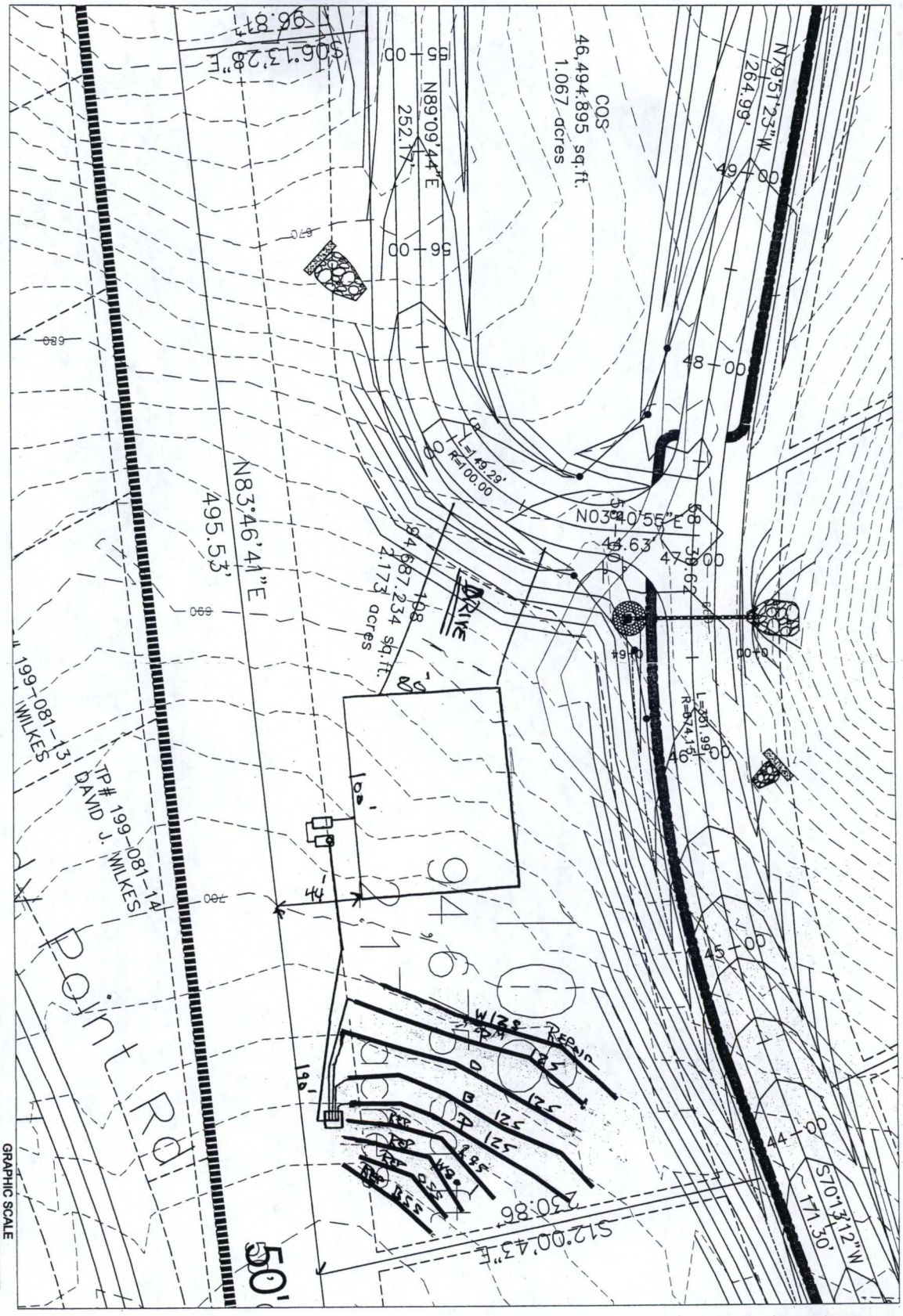
Account Information

Account #: B90310
Contractor: REGAL CUSTOM HOME BUILDERS L
Attn:
Address: 1615 LANCASTER HWY
Address: SUITE E
City/State/Zip: CHARLOTTE, NC 28277

Item	Description	Permit#	Quantity	Unit Price	Total Price
0704	Change in Plot Plan 10512 Green Heron Ct./file 6347B		1	100.00	100.00

----------**Outstanding Balances**----------

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
100.00	515.60				



S&ME
ENGINEERING · TESTING
ENVIRONMENTAL SERVICES

LOT 108
THE SANCTUARY
MECKLENBURG COUNTY, NORTH CAROLINA

SCALE:	DRAWN BY:	CHECKED BY:
AS SHOWN	JBP	PGP
JOB NO.	DATE:	FIGURE NO.
1588-05-067	JUNE, 2006	1