

11700 MCCORD RD

01101234

5/5/08

thomatc

Groundwater and Wastewater Services File Imaging Project
May 2007
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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 #: 4426A Permit #: _____ Tax Parcel #: 011-012-34

Property Owner: Bob Council (by 84 Lumber)

Job Location Address: 11700 McCord Rd.

City: Huntersville State: NC Zip Code: 28078

Operation Permit Issuance Date: 7/13/06 Contractor Name: A-1 Backhoe - Dennis Gallager

Permitted Design Flow: 200 GPD

Liquid Capacity of Septic Tank: 1500 gallons

Liquid Capacity of Dosing Tank: N/A gallons

Effluent Pump Model: _____

Drainfield Installation ☐ N/A

Trench Depth: 36+ inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 201 feet

# of Lines: 3 @ 67 feet

Depth of Media: _____ inches (Type) innovative chamber

Depth of Cover: 18 inches

Distribution Device: D-Box

Inspection Dates

Tank(s) Inspected: 7/13/06

Excavation Inspected: 7/13/06

Pump & Controls Inspected: _____

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 _____

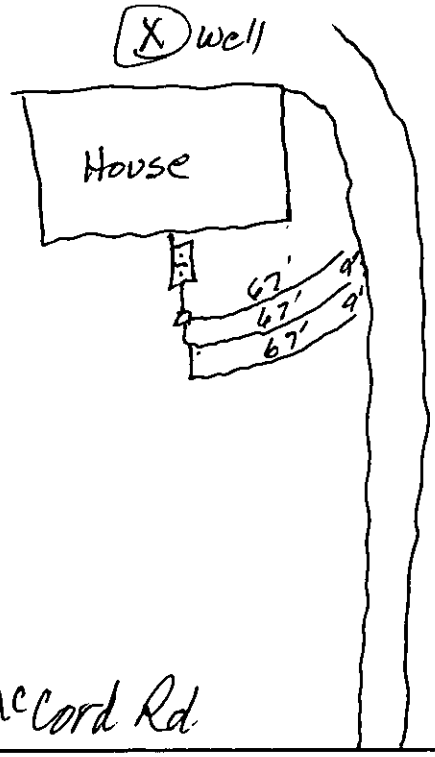
System Installation Setbacks

Distance from Building Foundation: 5 feet

Distance from Property Line: 10 feet

Distance from Water Supply Source: >50 feet

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: Type III-g innovative septic system with 3 lines @ 67' each designed for business w/ 200 GPD flow

DENR Authorized Agent: Gina Buchanan, RS Signature: Gina Buchanan, RS

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

Revised

NC DENR
Division of Environmental Health
On-Site Wastewater Section

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

File #: 4426 A Permit #: _____ Tax Parcel #: 011-012-34

Property Owner: Bob Council (by 84-Lumber)

Job Location Address: 11700 McCord Rd

City: Huntersville State: NC Zip Code: 28078

Installation Approval Issuance Date: 7/13/06

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 8/15/06, 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: 200 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: 36 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 201 feet

# of Lines: 3 @ 67 feet

Depth of Media: _____ inches (Type) Innovative

Distribution Device: D-Box

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 _____

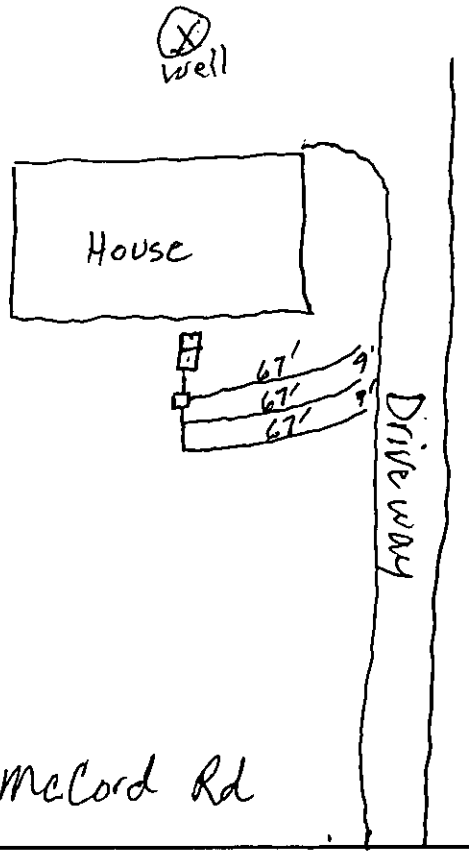
Minimum System Setbacks

Distance from Building Foundation: 5 feet

Distance from Property Line: 10 feet

Distance from Water Supply Source: >50 feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)



Comments: System Classification & Type: Type III g innovative system designed for business with 200 GPD flow rate.

DENR Authorized Agent: Gina Buchanan, RS Signature: Gina Buchanan, RS

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 #: 4426A Permit #: _____ Tax Parcel #: 011-012-34

Property Owner: Bob Council

Job Location Address: 11700 (previously 11608) McCord Road

City: Huntersville State: NC Zip Code: 28078

Installation Approval Issuance Date: 3/31/06

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 4/28/06, 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: 200 GPD

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

Liquid Capacity of Septic Tank: _____ 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: 201 feet

# of Lines: 3 @ 67' feet

Depth of Media: N/A inches (Type) Innovative

Distribution Device: Distribution box

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

Bed Depth: 30 inches

Bed Width: 3 feet

Total line length: 204 feet

# of Lines: 3 @ 67' feet

Depth of Media: N/A inches (Type) Innovative

Distribution Device: Distribution box

Water Supply Source

☐ Municipal ☒ Private Well ☐ Community Well

☐ Other _____

Minimum System Setbacks

Distance from Building Foundation: >5 feet

Distance from Property Line: >10 feet

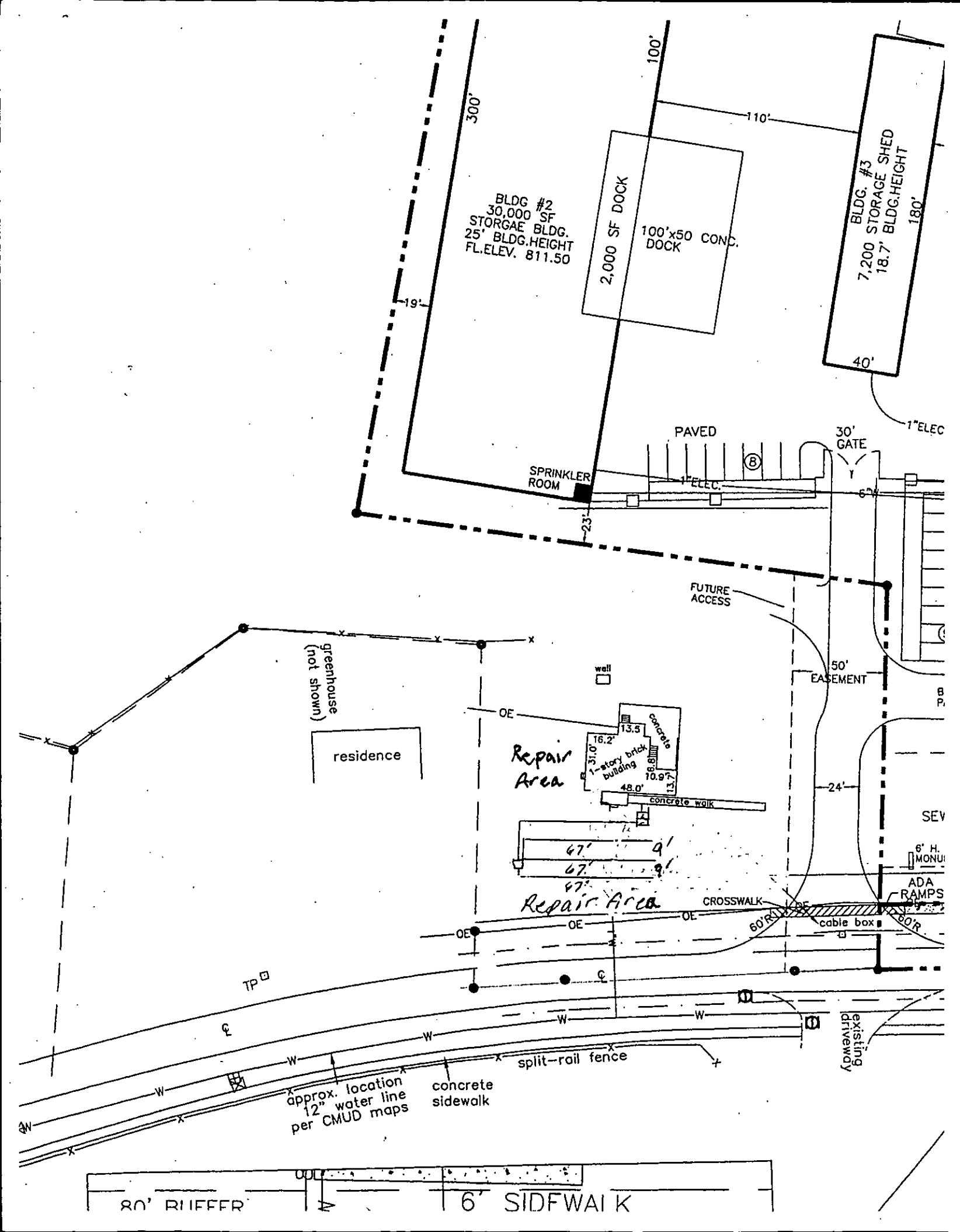
Distance from Water Supply Source: >100/50 min feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)

See attached

Comments: System Classification & Type: System design for a 3 employee business operating M-F 8:00A to 5:00P. Type IIIg innovative system (initial and repair) 3 lines @ 67' x 42" Stone.

DENR Authorized Agent: Cina Buchanan, RS Signature: Cina Buchanan, RS


BLDG #2
30,000 SF
STORGAE BLDG.
25' BLDG.HEIGHT
FL.ELEV. 811.50
2,000 SF DOCK
100'x50 CONC. DOCK
BLDG. #3
7,200 STORAGE SHED
18.7' BLDG.HEIGHT
300'
100'
110'
180'
40'
19'
23'
PAVED
30' GATE
SPRINKLER ROOM
1"ELEC.
FUTURE ACCESS
50' EASEMENT
greenhouse (not shown)
residence
well
OE
Repair Area
1-story brick building
concrete
16.2'
13.5
31.0'
10.9'
13.7
48.0'
concrete walk
24'
67'
9'
Repair Area
CROSSWALK
cable box
60'R
ADA RAMPS
6' H.
TP
W
split-rail fence
approx. location 12" water line per CMUD maps
concrete sidewalk
existing driveway
80' BUFFER
6' SIDEWALK

CONDITIONS OF IMPROVEMENT PERMIT / CONSTRUCTION AUTHORIZATION

Permit Number: 4426A

Tax Number: 011-012-34

- The 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.

Basement: ☐ Yes ☒ No ☐ Partial Basement

Primary Wastewater System

Type: ☐ I ☒ II ☐ III ☐ IV ☐ V ☐ VI

☒ Conventional
☐ Prefabricated, permeable block panel system
☐ Shallow Placed Conventional
☐ Low Pressure Pipe
☐ Large Diameter Pipe
☐ Fill
☐ Other
☐ Innovative or Experimental:

.3 Long-term acceptance rate (GPD/ft^2)	180 Max gallons/day wastewater flow	600 Absorption Area (ft^2)	9 Trench spacing (min. on centers) (ft)
Serviced by private well: ☒ Yes ☐ No	1500 Gallon septic tank	201 Total trench length (ft)	30 Maximum trench depth (in) (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions.)
NA Bedrooms in residence	NA Gallon pump tank	12 Depth of stone (in)	

Any surface water present: No Type: Minimum separation distance (ft):

Additional conditions: This IP is issued for an system alteration resulting from the owner giving the area of existing septic field to allow for a road easement for 84 Lumber.

Repair Area System

Type: ☐ I ☒ II ☐ III ☐ IV ☐ V ☐ VI

☒ Conventional
☐ Prefabricated, permeable block panel system
☐ Shallow Placed Conventional
☐ Low Pressure Pipe
☐ Large Diameter Pipe
☐ Fill
☐ Other
☐ Innovative or Experimental:

600 Absorption Area (ft^2) 201 Total trench length (ft)	12 Depth of stone (in)	9 Trench spacing (min. on centers) (ft)	30 Maximum trench depth (in)

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. The approval is granted in accordance with the provisions of Laws and Rules For Sewage Treatment and Disposal Systems 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 Improvement permit is transferable.

Cindy Buchanan, Ld 3/31/06
DENR Authorized Agent Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 N. TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE: (704) 336-5103
FAX: (704) 336-6894

6/1/06
Owner/Agent Signature Date

NC DENR
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

IWWS-100195

CONDITIONS OF IMPROVEMENT PERMIT / CONSTRUCTION AUTHORIZATON

Permit Number: **4426A** Tax Number: **011-012-34**

- The 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.

Basement: ☐ Yes ☒ No ☐ Partial Basement

Primary Wastewater System

Type: ☐ I ☒ II ☐ III ☐ IV ☐ V ☐ VI

☒ Conventional
☐ Prefabricated, permeable block panel system
☐ Shallow Placed Conventional
☐ Low Pressure Pipe
☐ Large Diameter Pipe
☐ Fill
☐ Other
☐ Innovative or Experimental:

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Serviced by private well: ☒ Yes ☐ No	1500 Gallon septic tank	201 Total trench length (ft)	30 Maximum trench depth (in) (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions.)
NA Bedrooms in residence	NA Gallon pump tank	12 Depth of stone (in)	

Any surface water present: **No** Type: Minimum separation distance (ft):

Additional conditions: **This IP is issued for an system alteration resulting from the owner giving the area of existing septic field to allow for a road easement for 84 Lumber.**

Repair Area System

Type: ☐ I ☒ II ☐ III ☐ IV ☐ V ☐ VI

☒ Conventional
☐ Prefabricated, permeable block panel system
☐ Shallow Placed Conventional
☐ Low Pressure Pipe
☐ Large Diameter Pipe
☐ Fill
☐ Other
☐ Innovative or Experimental:

600 Absorption Area (ft^2) 201 Total trench length (ft)	12 Depth of stone (in)	9 Trench spacing (min. on centers) (ft)	30 Maximum trench depth (in)

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. The approval is granted in accordance with the provisions of Laws and Rules For Sewage Treatment, and Disposal Systems 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 Improvement permit is transferable.

Gina Buchanan, RS 3/31/06
DENR Authorized Agent Date

Owner/Agent Signature Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
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

IWWS-100195

MECKLENBURG COUNTY

Land Use & Environmental Services Agency
Water & Land Resources
Groundwater & Wastewater Services

Fax Coversheet

****NOTICE****

The information contained in this fax may be privileged and/or confidential and is intended only for the use of the person to who it is addressed. If the reader of this message is not the intended recipient (or such recipient's employee or agent), you are hereby notified not to read, distribute, or copy the materials attached hereto without the prior written consent of the sender. If you have received this fax in error, please notify the sender by telephone call and return the original to us by mail and you will be reimbursed for the required postage. Thank you.

To: Phil Errington
84 Lumber

Fax #: 704 871-9211

Phone #: 704 871-1129

From: Cina Buchanan
MCHD

Date: 6/1/06

Number of pages transmitted: 4 (including coversheet)

Comments: Please sign Conditions of Improvement Permit/Construction Authorization and return to me at 704 336-6894 (FAX)

If you do not receive all pages of this fax please call (704) 336-5103.

☐ Original will not follow

☐ Original will follow via: ☐ U.S. Mail ☐ Hand Delivery ☐ _____

700 North Tryon Street • Suite 211 • Charlotte, North Carolina 28202-2236
Office #: (704) 336-5103 • Fax #: (704) 336-6894

365

GWS- COM. APP 07/05

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

SEPTIC FEE: 300
DATE: 2/17/06
CRT [ ] Check # 45501 JBA

FILE # ~~603368~~ 4426A

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

PROJECT TRACKING #: 011-012-34
TAX/PARCEL #: ~~011-012-34~~
STREET ADDRESS: ~~11608 McCord Rd~~
CITY: Huntersville, 11608 McCord Rd
STATE: NC **ZIP:** 28078
LOT #: 1
TOWNSHIP:

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

BUILDING INFORMATION:

DESCRIBE TYPE OF BUSINESS:

☐ COMMERCIAL ☐ INDUSTRIAL
SQUARE FOOTAGE OF FACILITY: 12,000
NUMBER OF EMPLOYEES PER SHIFT: 15
NUMBER OF SHIFTS: 1 7-6
TYPE OF WASTEWATER:
☒ SEWAGE ☐ INDUSTRIAL PROCESS WASTEWATER
HOW WILL WATER BE USED IN THE FACILITY?:
☒ TOILETS/URINALS ☒ HANDSINKS ☐ SHOWERS
☐ FLOOR DRAINS ☐ OTHER

IF PLANNING TO EXPAND/ALTER THE EXISTING SYSTEM, INFORMATION DOCUMENTING THE INCREASED WASTEWATER FLOW AND/OR A JUSTIFICATION FOR SYSTEM ALTERATION WILL BE REQUIRED.

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: ~~HBBB~~ HBB&A Enterprises Inc.
ADDRESS: ~~11608 McCord Rd~~.
CITY: Huntersville NC
STATE: NC ZIP: 28078
HOME PHONE: WORK PHONE: (704) 947-9121
MOBILE PHONE: FAX: (704) 947-9171

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:
NAME: Bob Council
ADDRESS: 11608 McCord Rd
CITY: Huntersville
STATE: NC ZIP: 28078
HOME PHONE: WORK PHONE: (704) 947-9121
MOBILE PHONE: FAX: (704) 947-9171

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 12/03
WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY? N/A

*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.

Owner's/Agent's Signature 2/15/06 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

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

Sheet: 1 of 2
Property ID: 011-012-34
Lot #:
File #: 4426A
Code: 1

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: BBB&A Enterprises, LLC
Address: 11608 McCord Rd.
Proposed Facility: Business Design Flow (.1949): 200GPD
Location of Site: 11608 McCord Rd.

Applicant: Bob Council
Date Evaluated: 3/15/06
Property Size:
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 .1941 Structure/ Texture	.1941 Consistence Mineralogy	OTHER PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS,3	0-13	GR/SCL	FR/SEXP/SS/SP	>48" to soil wetness	48"	N/A	None	PS, IV ,3 GPD/FT²
		14-48	SBK/SC	FI/SEXP/S/P					
2	LS,3	0-15	GR/SCL	FR/SEXP/SS/SP	"	48"	N/A	None	PS, IV ,3 GPD/FT²
		16-48	SBK/SC	FI/SEXP/S/P					

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR	.3	.3

Other Factors (.1946):
Site Classification (.1948): Provisionally suitable
Evaluated By: Cina Buchanan, RS
Others Present:

Sheet:

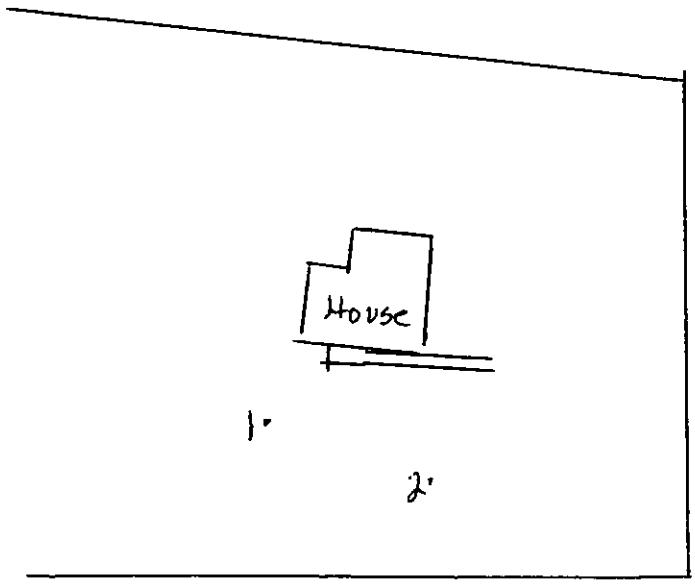
COMMENTS:

FILE #:

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



LUMBER COMPANY

1019 ROUTE 519, BUILDING #5 EIGHTY FOUR, PA 15330
(724) 228-3636

2/15/06

Bill Marlin
700 N. Tryon St.
Suite 211
Charlotte, NC 28202
704-336-5574

RE: Application to amend adjacent owner's septic

Mr. Marlin,

Attached is a check and application to change the septic layout for the 84 Lumber Company site at 11608 McCord Rd. in Huntersville. Please contact Jim Zaunick with any comments that you may have.

Thank you,

Thomas Musgrove
84 Lumber Company

84 LUMBER COMPANY
HARDY MANAGEMENT COMPANY, INC.
P.O. BOX 584
EIGHTY FOUR, PA 15384
(724) 228-3636
FAX (724) 228-2630

FASCIMILE TRANSMITTAL SHEET

TO:	FROM:
Cena Marshall	Tom Musgrove
COMPANY:	DATE:
Mecklenburg County	3/15/2006
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
704-336-6894	2
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
	724-228-3636
RE:	YOUR REFERENCE:
84 Lumber Septic Application	1375

☐ URGENT ☐ PLEASE REPLY ☑ FOR REVIEW ☐ PURCHASE ORDER ATTACHED ☐ CONTRACT ATTACHED

NOTES / COMMENTS:

Ms. Marshall,

Attached is the revised application for Mr. Council's property in Huntersville. I contacted Angela Norwood in the addressing department to assign us a new address. I asked them to keep Mr. Council's address the same. I will forward the address to you as soon as I receive a new one from the county.

If you have any questions, please let me know.

Thanks,

Tom Musgrove

84 Lumber Co.

No Passed
held. EHS
Not on LD

7/19/06