17078 #8846 Permit B31012 73
Project # 3737.35

MECKLENBURG COUNTY
HEALTH DEPARTMENT

23 MAR '17 AM 8:28

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: Mike Westhafer
ADDRESS: 13802 Bramborough Road
CITY: Huntersville
STATE: NC ZIP: 28078
PHONE: (980) 721-7345
ALTERNATE PHONE: (704) 992-0449
E-MAIL: mwesthafer@msn.com

PROPERTY OWNER: ☐ SAME AS PERSON FILING APPLICATION
NAME: Jeff & Jennifer Shue
ADDRESS: 15833 Pineknoll Lane
CITY: Huntersville
STATE: NC ZIP: 28078
PHONE: (817) 253-0046
ALTERNATE PHONE: (980) 531-7853
E-MAIL: ndoorweather@yahoo.com

JOB LOCATION INFORMATION
TAX PARCEL #: 001-014-35
STREET ADDRESS: 15833 Pineknoll Lane
CITY: Huntersville
STATE: NC ZIP: 28078

SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #:

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: 3
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 Extend Great Room Area

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 — Date: 3/21/17

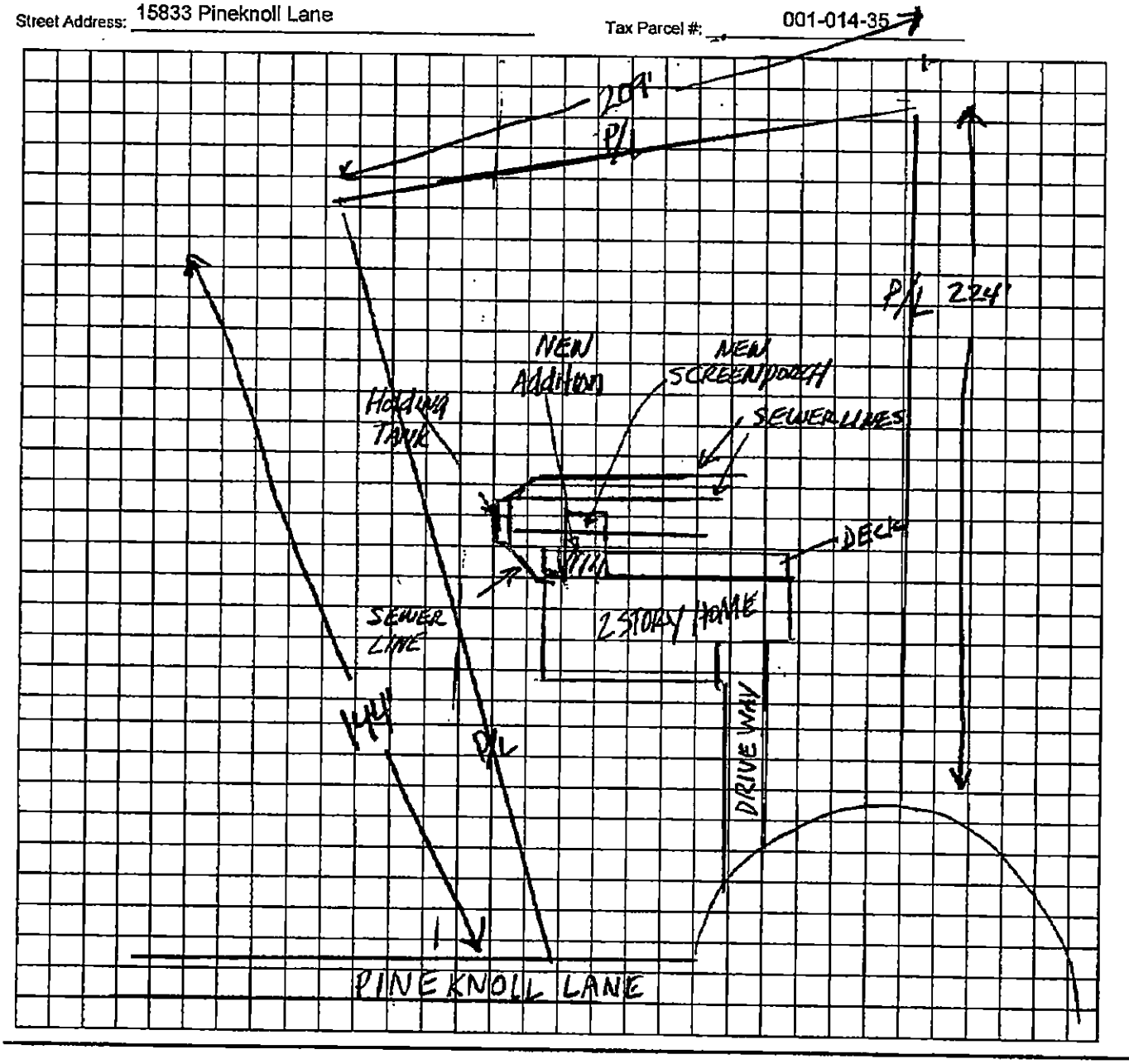
A PROPOSED PLOT PLAN (see page 2) is required to be submitted with each application.

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: 15833 Pineknoll Lane Tax Parcel #: 001-014-35



*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 DECK & TO Extend the great Room. House is in the process to hook up to city Sewer

REHS Signature Date 3/28/17

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

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 03/23/17
Receipt #: 105013
Check / Auth #: VISA 094286
Received By: ELLISLW

Amount: 100.00
Tendered: 100.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: WESTHAFTER, LESA
Attn:
Address: 13802 BRAMBOROUGH ROAD
Address:
City/State/Zip: HUNTERSVILLE, NC 28078

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	Use Existing System 15833 PINKNOLL LANE		1	100.00	100.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
	90.00				

Payment Receipt

Mecklenburg County POS

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

Enter Account # or Customer Name Here: LESA WESTHAFTER

Bill To:

LESA WESTHAFTER
13802 BRAMBOROUGH ROAD

Huntersville, NC 28078

Single Payment

Transaction Date: 03/23/2017 5:44 AM Pacific Time
Pay Method: VISA **********7650
Approval #: 094286
Trace Number: 7da66572-822e-45e9-8c11-c1ebf7efa25b
Amount: $100.00

Payment Amount: $100.00

Total: $100.00

Thank you for your payment.

MECKLENBURG COUNTY
Health Department

E. Winters Mabry, MD
Director

(704) 432-3199

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 Mike Westhafer is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at 15833 Pineknoll Lane, Huntersville, NC 28078
   Number Street Town
   (Or Parcel Number)

Property Owner (print name)

Jeffery Shue
Property Owner (signature)

3-24-17
Date

SEE INSTRUCTIONS ON BACK OF THIS FORM

Date Received 8-22-83

RECEIVED

Application No. 17078

T. C. No. 201-014-35

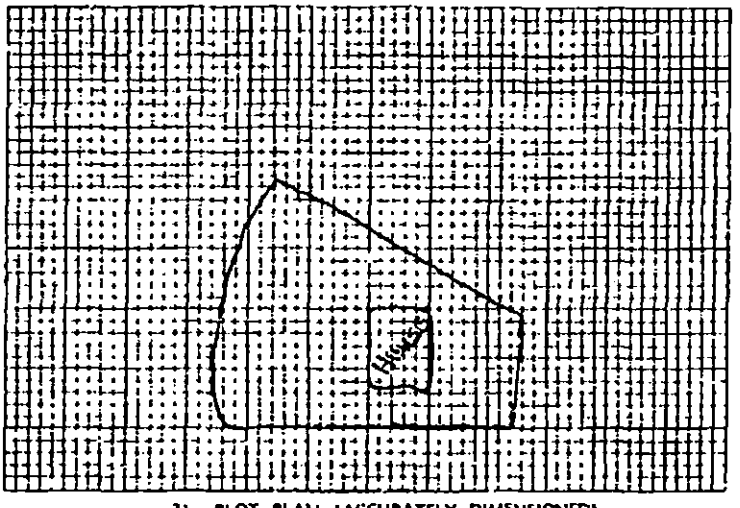
Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

Application for an
Installation, Construction, Alteration, and/or Repair Permit
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

The owner of that property described hereinafter hereby applies to the Mecklenburg County Department of Environmental Health for a permit to

1) ✓ Install or Construct 2) _____ Alter or Repair an individual septic tank wastewater treatment system with a subsurface, soil absorption, effluent discharge.



3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ___ Yes ___ No
Residence ✓ Yes ___ No

4) No of Bedrooms 3

5) Business Use — Max No Employees ___

6) Washing Machine ✓ Yes ___ No

7) Garbage Disposal ___ Yes ✓ No

8) Dishwasher ✓ Yes ___ No

9) Water Supply
- A) Individual Well ✓
- B) Governmental System ___
- C) Community System
  - 1. Well source ___
  - 2 Governmental source ___

10) Sewage System
House located within 200 feet of public sewer ___ Yes ✓ No
House located within 200 feet of community sewer ___ Yes ✓ No

11) FHA Case No ___

12) VA Case No. ___

13) NAME OF OWNER VAN DRESSER (LAST) ROBYN (FIRST) SILVERSTEIN (MIDDLE)

14) ADDRESS OF OWNER 5719 DONCASTER DR. CHARLOTTE, N.C. 28211

15) PHONE NO. Home 366-5443 Office 366-6181 EXT 3009

16) LOCATION OF SYSTEM N 833 PINEHALL LANE (STREET OR COUNTY ROAD)

17) SUBDIVISION BAYSHORE #2 Lot No. 10 Block No. B

Map Book No. ___ Page No. ___

18) DEED REFERENCE — DEED BOOK 4596 AT PAGE 384

19) HAS A SOIL INVESTIGATION BEEN RUN? YES ✓ NO DATE RUN ___

20) PTR NUMBER (See Instructions) ___

The undersigned person hereby agrees that he has read the foregoing application and that the contents of same are true. It is understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

DATE OF APPLICATION _____

Robyn S. Van Dresser
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

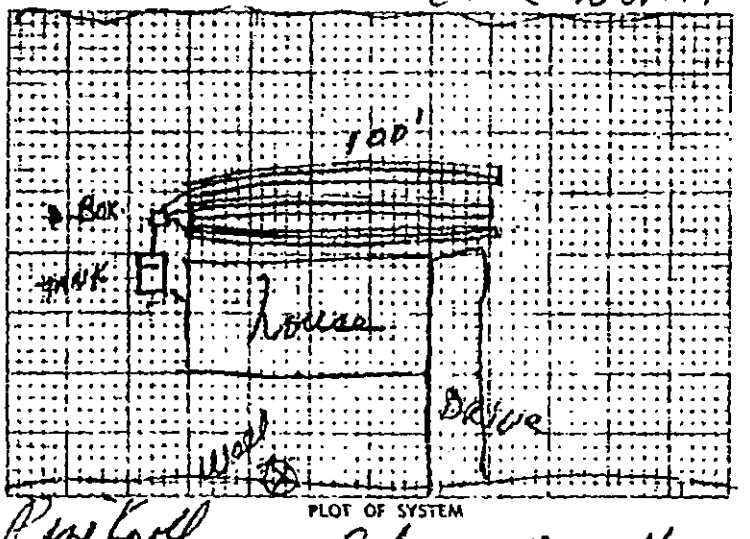
Date Issued 8-26-83 Serial No. 6562 ICAR(S) Permit No. 17078

T C No. 001-014-35

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

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 application 17078 dated 8-22-83 and this permit shall be void and of no effect if the information provided in the application is not true or is erroneous. All work shall be completed on or before 9-26-83, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate P.S.

Liquid Capacity of Tank 1500 gal

Tank Construction p/c Concrete

Absorption and/or Nitrification Lines:

Total Line Length 300'

Number of Lines 3

Distance from House 5'+

Distance from Property Line 10'+

Distance from Well 50'+

NAME OF OWNER Robyn S Van Pruven

LOCATION OF PROPERTY 15833 Pinkerell Cove

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Health Commission which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Environmental Health Director before any system can be covered up or otherwise rendered uninspectable or can be used. 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.

3-100' x 3' x 12" Stone Trenches on 9' centers

Comments:

Division or Section Head

Environmentalist R P Kaylor

* If this permit is for the installation or construction of a new system, it must be signed by the division or a section head of the Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

BT 8-9-83

C of A (s) No. 17078

Date Issued 9-1-83 Serial 6098 T. C. No. 001-014-35

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF COMPLETION
CERTIFICATE OF APPROVAL
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner Van Dresser (LAST) Robyn (FIRST) S (MIDDLE)

Location of Property 15833 Pine Knoll Lane

Application Number 17078 Permit Number 17078

Inspection Data:

Liquid Capacity of Tank 1508 gal Tank Material p/c Concrete

Total Length of Drain Tile 500' Number of Lines 3

Depth of Filter Material 12" Cover Depth 1½'

Water Supply Source well Distance from Water Source 50'+

Excavation Inspected ——— (DATE) Tank Inspected 9-1-83 (DATE)

Nitrification Field Inspected 9-1-83 (DATE)

Washing Machine Line Inspected, If Applicable ——— (DATE) ———

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been ——— installed or constructed, ——— altered or repaired in accordance with the permit issued and the regulations of the Mecklenburg County Health Commission in effect on the date of issuance of the permit. The issuance of this Certificate of Approval 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 Certificate of Approval is issued subject to those restrictions and conditions shown on the permit(s) in addition to those listed below under comments. This Certificate of Approval 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

Comments

R P Helms
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY