SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

NEW SEPTIC ☐ NEW WELL ☐ USE EXISTING ☐ MODIFIED PLOT PLAN ☐

New Septic Fees Paid

IP ($250.00) _____ Initial/Date

CA ($200.00) _____ Initial/Date

OP ($200.00) _____ Initial/Date

Repair - Septic file Complete

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

New Well Fees Paid: $550.00 _____ Initial/Date

Use Existing Fees Paid: $100.00 _____ Initial/Date

Alteration Fees Paid: $300 Total $200 _____ Initial/Date (If use existing was part of payment)

Modified Plot Plan Fees Paid: $100.00 _____ Initial/Date

Floor plans need to be submitted and reviewed before CA can be issued ☐ Review ☐

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

Septic file complete ☐_____ Well complete ☐ _____

Send permit for signature ☐ Signature received ☐ _____

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

Certified operator contract is on file ☐ _____

MECKLENBURG COUNTY
HEALTH DEPARTMENT

10979B
#12138

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: 10802111
STREET ADDRESS: 7913 JOHNSON CREEK ROAD
CITY: CHARLOTTE
STATE: NC ZIP: 28215
SUBDIVISION NAME: NONE
LOT #: 6 LOT SIZE (acres): 0.51
TOWNSHIP:
◉ MECKLENBURG ○ CORNELIUS ○ HUNTERSVILLE
○ DAVIDSON ○ CHARLOTTE ○ PINEVILLE
○ MATTHEWS ○ MINT HILL

4. **BUILDING INFORMATION:**

BUILDING TYPE:
○ SINGLE MOBILE HOME ○ MODULAR HOME
○ DOUBLE WIDE ○ MULTIPLE FAMILY
◉ HOUSE ○ OTHER
HEATED SQUARE FOOTAGE: 5,651
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 4
FOUNDATION TYPE:
○ CONCRETE SLAB ◉ BASEMENT WITH PLUMBING
○ CRAWL SPACE ○ BASEMENT 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: 2

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:** 3 4 1 4 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?** 10/26/95 ☐ UNKNOWN

11. **WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?** _____ ☑ N/A

12. **PROPERTY OWNER:**

NAME: TOMMY RAYNES
ADDRESS: 7913 JOHNSON CREEK ROAD
CITY: CHARLOTTE
STATE: NC ZIP: 28215
WORK PHONE: (704) 886-4162
MOBILE PHONE: (704) 907-7194
FAX: (704) 631-4824
E-MAIL: TRAYNES2@GMAIL.COM

13. **OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:**

NAME:
ADDRESS:
CITY:
STATE: ZIP:
WORK PHONE:
MOBILE PHONE:
FAX:
E-MAIL:

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208 OFFICE: (980) 314-1680, FAX: 704-336-6894

Revised on: 03/27/19

MECKLENBURG COUNTY
HEALTH DEPARTMENT

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: 10802111
STREET ADDRESS: 7913 JOHNSON CREEK ROAD
CITY: CHARLOTTE
STATE: NC ZIP: 28215
SUBDIVISION NAME: NONE
LOT #: 6 LOT SIZE (acres): 0.51
TOWNSHIP:
◉ MECKLENBURG ○ CORNELIUS ○ HUNTERSVILLE
○ DAVIDSON ○ CHARLOTTE ○ PINEVILLE
○ MATTHEWS ○ MINT HILL

4. **BUILDING INFORMATION:**

BUILDING TYPE:
○ SINGLE MOBILE HOME ○ MODULAR HOME
○ DOUBLE WIDE ○ MULTIPLE FAMILY
◉ HOUSE ○ OTHER
HEATED SQUARE FOOTAGE: 5,651
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 4
FOUNDATION TYPE:
○ CONCRETE SLAB ◉ BASEMENT WITH PLUMBING
○ CRAWL SPACE ○ BASEMENT 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: 2

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:** 3 4 1 4 5

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

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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?** 10/26/95 ☐ UNKNOWN

11. **WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?** _____ ☑ N/A

12. **PROPERTY OWNER:**

NAME: TOMMY RAYNES
ADDRESS: 7913 JOHNSON CREEK ROAD
CITY: CHARLOTTE
STATE: NC ZIP: 28215
WORK PHONE: (704) 886-4162
MOBILE PHONE: (704) 907-7194
FAX: (704) 631-4824
E-MAIL: TRAYNES2@GMAIL.COM

13. **OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:**

NAME: _____
ADDRESS: _____
CITY: _____
STATE: _____ ZIP: _____
WORK PHONE: _____
MOBILE PHONE: _____
FAX: _____
E-MAIL: _____

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208 OFFICE: (980) 314-1680, FAX: 704-336-6894

Revised on: 03/27/19

Excise Tax $0.00

Tax Lot No. Parcel Identifier No. 108-021-11 and 108-021-10

Mail after recording to: Grantee
This instrument was prepared by: Yates W. Faison, III, Attorney at Law (no title examination requested or undertaken)
Brief description for the Index:

NORTH CAROLINA NON-WARRANTY DEED

THIS DEED made this 25th day of February, 2021, by and between

---

GRANTOR	GRANTEE
TOMMY S. RAYNES, II and wife, MUSU P. RAYNES (formerly Musu P. Varpilah)	TOMMY S. RAYNES, II and wife, MUSU P. VARPILAH
7913 Johnson Creek Road Charlotte, NC 28215	7913 Johnson Creek Road Charlotte, NC 28215
(hereinafter Grantor)	(hereinafter Grantee)

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all her right, title and interest in that certain lot or parcel of land situated in the City of Charlotte, Mecklenburg County, State of North Carolina, and more particularly described as follows:

BEING all of Lots 6 and 7 of DOUBLE V ACRES, as shown on map thereof recorded in Map Book 8, Page 221 (heretofore sometimes incorrectly referred to as Map Book 8, Page 211) of the Mecklenburg County Public Registry

Being the same properties conveyed to Grantors by deeds recorded in Book 18352, Page 742 and Book 20143, Page 251 of the Mecklenburg County Public Registry.

The purpose of this Deed is to consolidate the two adjoining properties into one parcel for property tax purposes.

All or a portion of the property herein conveyed __x__ includes or ___does not include the primary residence of a Grantor.

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple.

Grantor makes no warranty, express or implied, as to the title to the property above-described.

IN WITNESS WHEREOF, the Grantor has hereunto set her hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officer, this the day and year first above written.

Tommy S Raynes II (SEAL)
Tommy S. Raynes, II

Musu P. Raynes (SEAL)
Musu P. Raynes

STATE OF NORTH CAROLINA, MECKLENBURG COUNTY

I, Yates W. Faison, III, a Notary Public for the County and State aforesaid, certify that Tommy S. Raynes, II and Musu P. Raynes, either being personally known to me or proven by satisfactory evidence, personally appeared before me this day and acknowledged the voluntary due execution of the foregoing instrument by her for the purposes stated therein. Witness my hand and official stamp or seal, this 25th day of February, 2021.

Yates W. Faison, III
Yates W. Faison, III Notary Public

My commission expires: 2/20/2023

YATES W. FAISON, III
NOTARY PUBLIC
Mecklenburg County, North Carolina

Yates W. Faison, III
Attorney at Law
19701-B West Catawba Avenue
Cornelius, NC 28031

(704) 896-2216

Fax (704) 896-2218

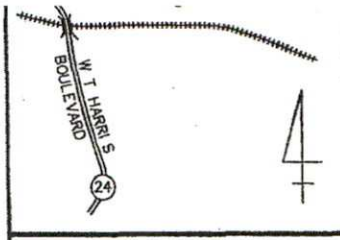
October 20, 2020

Tommy and Musu Raynes
7913 Johnson Creek Road
Charlotte, NC 28215

Re: Lots 6 and 7, Double V Acres (7901 and 7913 Johnson Creek Road)

Preparation, execution and recording of deed to consolidate two tracts into one for property tax purposes

	$150.00
Recording Fee to Register of Deeds	26.00
Total Due:	$176.00



VICINITY MAP
NOT TO SCALE

RATIO OF PRECISION OF THE UNADJUSTED SURVEY IS 1:10,000 AND THAT THIS SURVEY AND PLAT COMPLIES WITH THE STANDARDS OF PRACTICE FOR LAND SURVEYING IN THE STATE OF NORTH CAROLINA (21 NCAC 56.1600)

Feb. 22, 2021
ROBERT C. RHYNE L-4191

NORTH CAROLINA PROFESSIONAL SEAL L-4191 2-22-21 LAND SURVEYOR ROBERT C. RHYNE

MB 8 PG 221
DEC. 1957

TRACT No. 5
MB 6 PG 875

TRACT No. 6
MB 6 PG 875

HASKELL M. THOMPSON REVOCABLE LIVING TRUST
DB 33727
PG 511

S 86°24'00" E 142.50'

S 86°25'36" E 90.03'

1/2"IPF

#4RBF

42.23'

19.00'

0.49' INSIDE LINE

KLEEMAN
DB 9845
PG 20

N 01°07'44" E 170.73'

109.50'

OLD LOT 7
MB 8 PG 221
22,513 sq.ft.
0.517 acres

N 11°44'32" E 189.01'
(OLD LOT LINE TO BE ELIMINATED)

OLD LOT 6
MB 8 PG 221
21,930 sq.ft.
0.503 acres

LOT 5
MB 8
PG 221

S 00°35'41" E 205.81'

LOT 6R
(RECOMBINED PARCEL)
1.020 acres
1.020 acres

N 77°43'27" W 109.62'

N 77°43'27" W 100.24'

C1

#3RBF

N82°42'29"E
125.15'(TIE N.T.S.)

#4RBF

N01°29'37"W
29.85'(TIE)

NAIL SET

JOHNSON CREEK DRIVE
(60' PUBLIC R/W - SEE NOTE #4)
(MB 8 PG 221)

LEGEND:
RBF - REBAR FOUND
N.T.S. - NOT TO SCALE
R/W - RIGHT-OF-WAY
IPF - IRON PIPE FOUND
DB PG - DEED BOOK AND PAGE
MB PG - MAP BOOK AND PAGE
O PROPERTY CORNER
——— LINES SURVEYED BY US
— — — LINES NOT SURVEYED BY US

CURVE TABLE				
CURVE	LENGTH	BEARING	CHORD	RADIUS
C1	32.92	N81°11'09"W	32.90	242.33

NOTES:
1) NO RECOVERABLE NCGS MONUMENTS WITHIN 2000' OF SITE.
2) THIS PROPERTY IS DESIGNATED TAX PARCELS #108-021-10 & 11.
3) SUBJECT PROPERTY IS CURRENTLY ZONED R-3.
4) JOHNSON CREEK DRIVE WAS NEVER ACCEPTED FOR MAINTENENCE (PER PAROLE EVIDENCE).
5) PARCEL SHOWN IS SUBJECT TO EASEMENTS RESTRICTIONS OF RECORD.
6) #4 REBARS AT ALL CORNERS UNLESS OTHERWISE NOTED.

40 0 40 80
BAR SCALE

RECOMBINATION EXHIBIT PLAT OF
LOTS 6 & 7 OF DOUBLE V. ACRES
AS SHOWN ON MAP RECORDED IN MB 8 PG 221
CITY OF CHARLOTTE
MECKLENBURG COUNTY, NORTH CAROLINA

EXHIBIT MAP

SURVEY DATE:	SCALE: 1" = 40'	RHYNE LAND SURVEYING F-1432
JANUARY 15, 2021		7023 STREAMSIDE DRIVE CHARLOTTE, NC 28212 PHONE (704) 333-0169

1940.com

0.com

* Repair

DENR/DEH

ON-SITE WASTEWATER SECTION

Sheet ___ of ___

PROPERTY ID #: 1080-2111

COUNTY: ___

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Tommy Raynes

ADDRESS: 7913 Johnson Creek Rd

APPLICATION DATE: /

DATE EVALUATED: 12/2/20

PROPOSED FACILITY: existing House PROPERTY DEDICATED (1940): ___

PROPERTY SIZE: ___

LOCATION OF SITE: Same

PROPERTY RECORDED: ___

WATER SUPPLY: ▫ Private ▫ Public ▫ Well ▫ Spring ▫ Other ___

EVALUATION METHOD: ▫ Auger Boring ▫ Pit ▫ Cut

TYPE OF WASTEWATER: ▫ Sewage ▫ Industrial Process ▫ Mixe

PROFILE	1940 LANDSCAPE POSITION / SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (1941) 1941 STRUCTURE / TEXTURE	SOIL MORPHOLOGY (1941) 1941 CONSISTENCE / MINERALOGY	OTHER PROFILE FACTORS 1947 SOIL WETNESS / COLOR	OTHER PROFILE FACTORS 1948 SOIL DEPTH	OTHER PROFILE FACTORS 1956 SAPRO CLASS	OTHER PROFILE FACTORS 1947 RESTR HORIZ	PROFILE CLASS & LTAR
1	L 3%	0-6"	wblk, SiCl	Smp, fi, ss, sp	/	6+	U	/	U
2	L 3%	0-42"	wblk, C	Smp, fi, s, p	/	/	/	/	.3 Ps
		42-48"	wblk, BC/C	Smp, fi, ss, sp					
3									
4									

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

OTHER FACTORS (.1946): * Repair

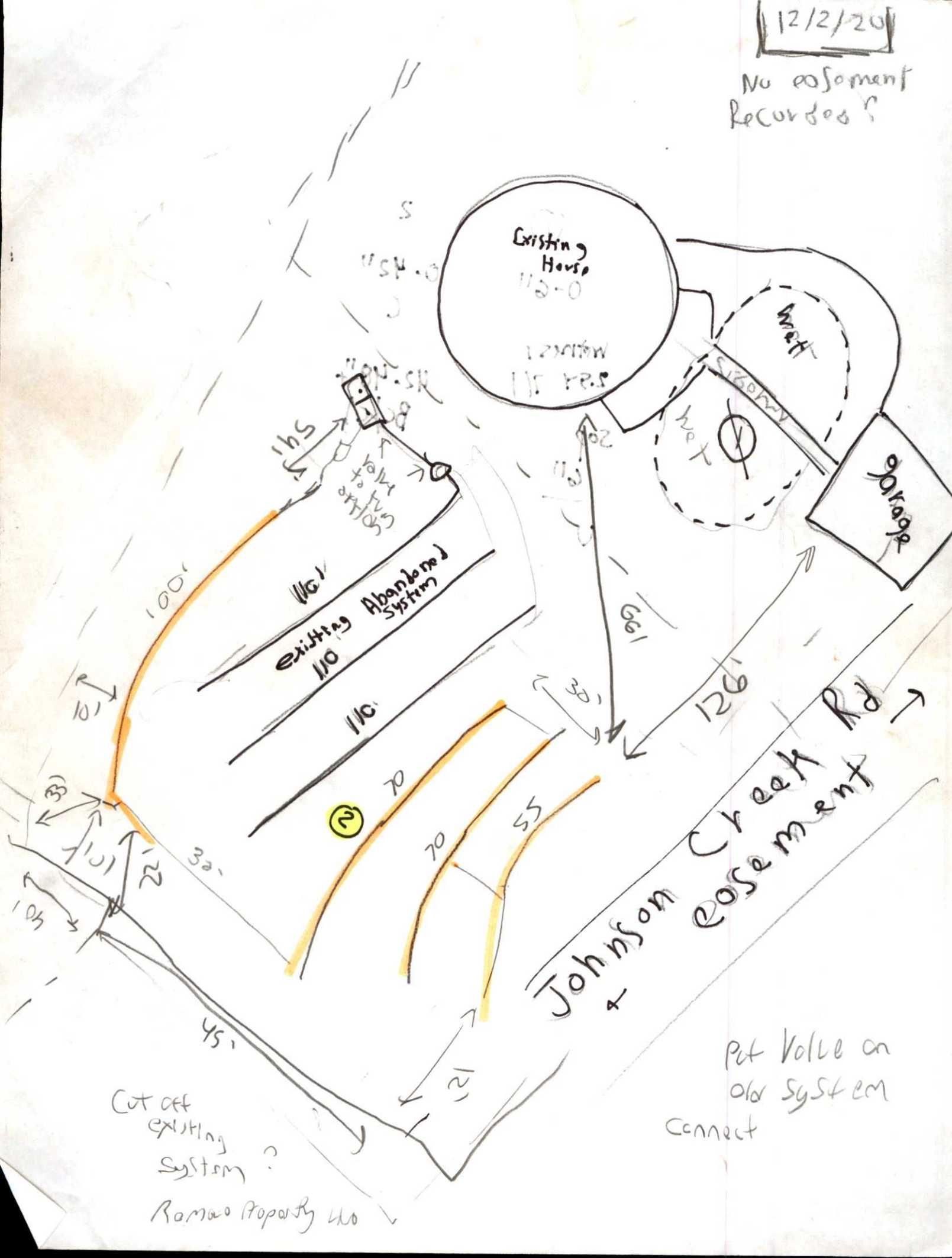
SITE CLASSIFICATION (.1948): ___

EVALUATED BY: Brock Shutt

OTHER(S) PRESENT: ___

12/2/20

No easement Recorded?

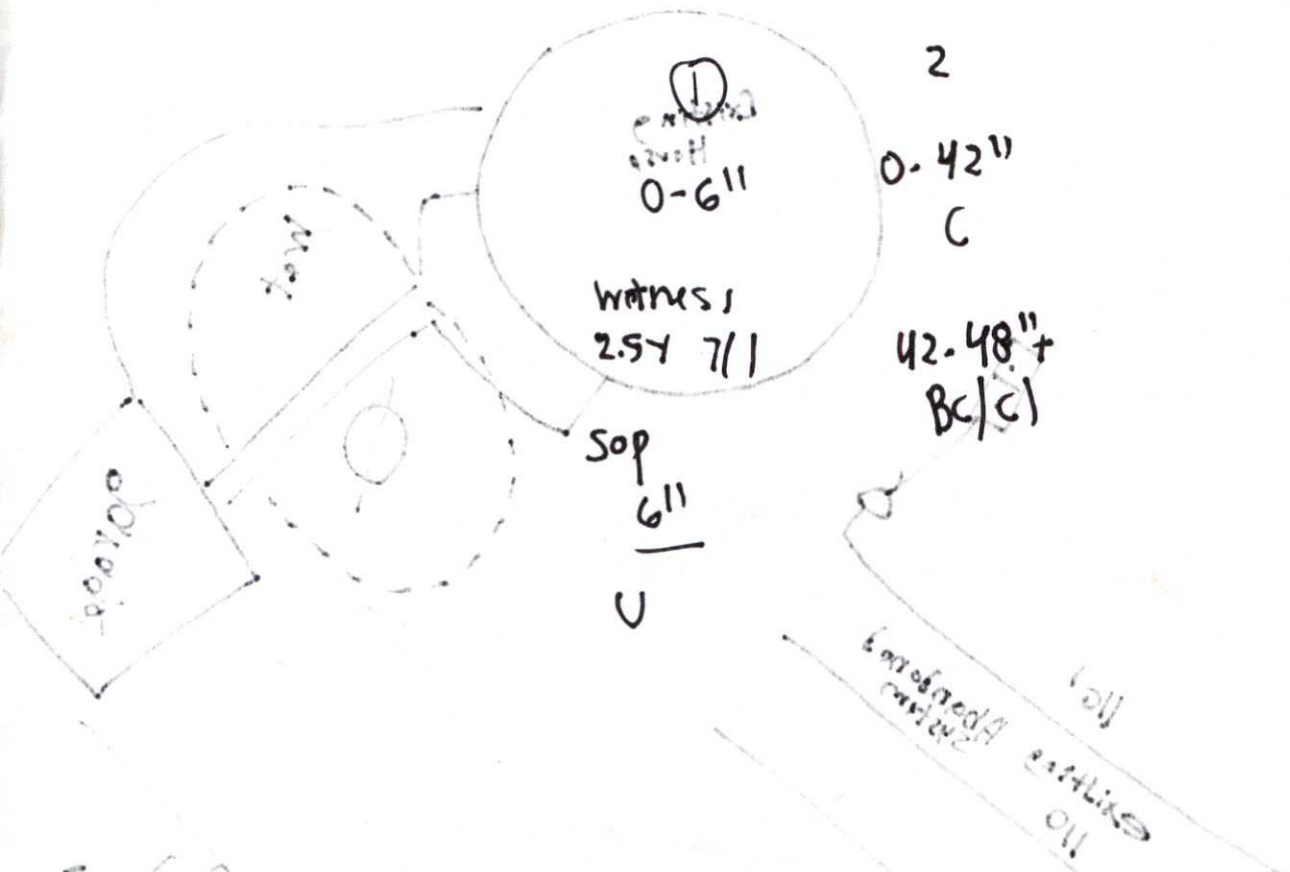


Cut off existing system?

Romano Property Line

Put Valve on old system

Connect



- Email
- Need property line dissolved prior to releasing permit for repair
- Destroyer 300' of Line
- Pit valve on old system - (5)

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000 Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT/CONSTRUCTION AUTHORIZATION for REPAIRING an ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: _____ Permit #: _____ Tax Parcel #: 10802111

Property Owner: Tommy Raynes

Job Location Address: 7913 Johnson Creek Rd.

City: Charlotte State: NC Zip Code: 28215

Improvement Permit Issuance Date: 3/1/21 **Construction Authorization Issuance Date:** _____

Permission is hereby given to **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 As Soon as Possible. 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.

Permitted Design Flow: 360 GPD Site LTAR: .3 GPD/ft²

Liquid Capacity of Septic Tank: Existing gallons Liquid Capacity of Dosing Tank: _____ gallons

Drainfield Design ☐ N/A

Trench Depth: 32 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.) (100', 75', 70', 55')

Total line length: 300 feet

# of Lines: 4 @ 300 feet

Depth of Media: 12 inches (Type) (Accepted)

Distribution Device: Serial

* Attach Valve to existing supply Line, To have the option to use existing drainfield.

25% Reduction

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 _____

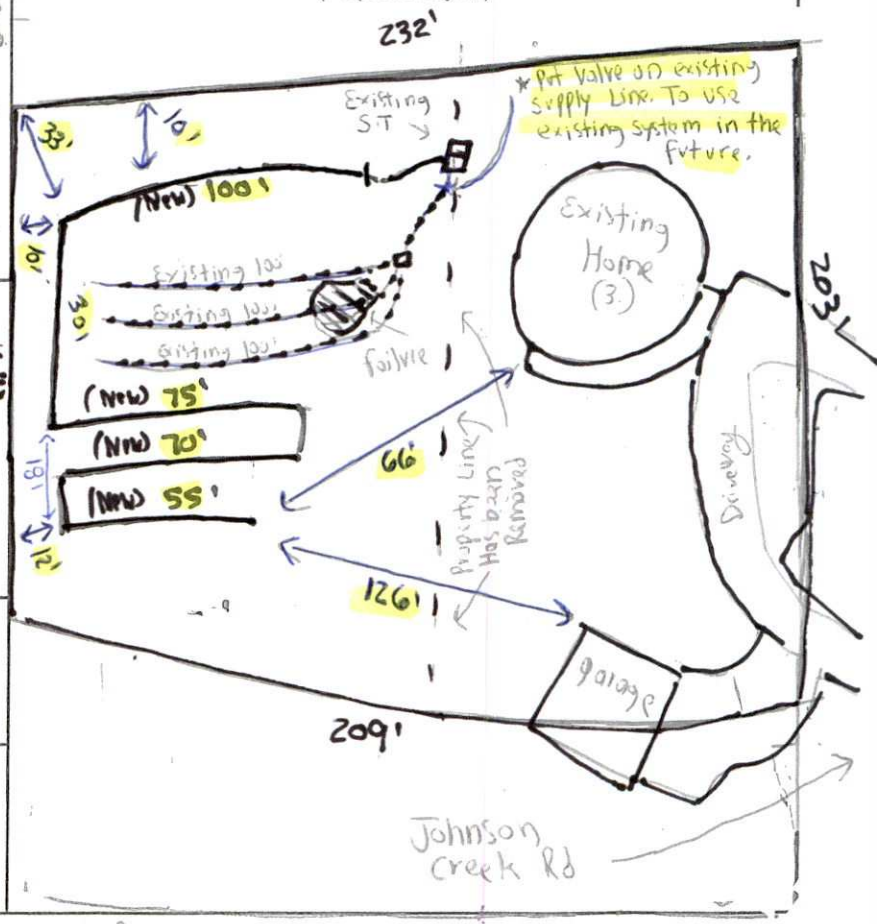
Minimum System Setbacks

Distance from Building Foundation: 10 feet

Distance from Property Line: 10 feet

Distance from Water Supply Source: ≥50 feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)



Comments: System Classification & Type: III 9, Add 4-25% Reduction (Accepted) drain Lines = 300ft.
Check Condition of Existing Septic Tank. Add Valve to existing Supply Line.

Authorized Agent: Braedon Shelton 2661 Signature: Braedon Shelton 2661

Owner Signature: _____ Date: _____

N.C. Department of Environment & Natural Resources / Division of Environmental Health

NOTICE OF VIOLATION
ON-SITE WASTEWATER SYSTEM

☒ Certified Mail (Return Receipt) ☐ First Class Mail ☐ Hand Deliver

Owner: Tommy Raynes

Mailing Address: 7913 JOHNSON CREEK RD
Charlotte, NC 28215

Occupant: same as above

Location: 7913 JOHNSON CREEK RD
Charlotte, NC 28215

☒ Residence ☐ Business ☐ Other

You are hereby notified that you are violating the Rules adopted by the North Carolina Commission for Health Services or Article 11 of Chapter 130A of the General Statutes of North Carolina by owning or controlling a residence, place of business, or place of public assembly which is not provided with an approved wastewater system. Your wastewater system is not in compliance.

On September 14, 2020 an inspection of the wastewater system by the Mecklenburg County Health Department indicated the following violations:

Violation/s

Observed a discharge of sewage to the surface of the ground or surface water.
[G.S. 130A-335(a) 15A NCAC 18A. 1961(a)(1)(A)]

You are hereby ordered to bring your wastewater system into compliance by completing the following:

☒ Install / Repair wastewater system. You must obtain a repair permit from the local health department prior to the repair of your system.

☐ Eliminate wastewater discharge and connect to an approved wastewater system.

☒ Other Repairs *(Specify):* Check for any leaks in the house.

☐ Perform Maintenance *(Specify):*

If the wastewater violation is not brought into compliance by **October 21, 2020** appropriate legal action will be taken.

Failure to comply with laws, rules, and this notice will subject you to the following legal remedies; Injunction Relief [G.S. 130A-18], Administrative Penalties [G.S. 130A-22], Suspension or Revocation of Permits [G.S. 130A-23], and Criminal Penalties [G.S. 130-25].

For questions regarding this notice you should contact Braedon Shelton at 980-297-3719.

Notice Issued: 09/21/20 (Date) — Braedon Shelton 2661 (DENR/DEH Authorized Agent)

Compliance: 4/8/21 (Date) — Braedon Shelton 2661 (DENR/DEH Authorized Agent)

Mecklenburg County – Groundwater & Wastewater Services
3205 Freedom Drive, Suite 8000 Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000 Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

*Repair

Septic System Pre-Construction Meeting Checklist

File # _____ App#_____ Tax Parcel# 108-021-11

Property Owner: Tommy Raynes

Job Location Address: 7913 Johnson Creek Rd

City: Charlotte State: NC Zip Code: 28215

1. Does System design match facility, flow & wastewater characteristics?

   ☒YES ☐ NO

   Comments: Repair

2. Is there sufficient available space for the septic systems initial and repair areas?

   ☒ YES ☐ NO

   Comments: _____

3. Can the septic system be installed per the permit conditions and drawing on file?

   ☒YES ☐ NO

   Comments: _____

*If "NO" is checked for any of the above the existing permit may need to be revoked.

Permission is hereby given to ☒ install ☐ alter ☐ repair an on-site wastewater treatment & and disposal system, with subsurface soil absorption and effluent discharge meeting all of the construction requirements of 15A NCAC 18A .1900 which are in effect on the date of granting this approval. **System shall not be installed while soils are in wet condition.**

Braedon Shelton — Authorized Agent

4/7/21 — Date

_____
Others Present

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

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

File #: 10979B Permit #: 12138 Tax Parcel #: 108-021-11

Property Owner: Tommy Raynes

Job Location Address: 7913 Johnson Creek Rd

City: Charlotte State: NC Zip Code: 28215

Operation Permit Issuance Date: 4/8/21 Contractor Name: Steve Autry

Permitted Design Flow: 360 GPD Liquid Capacity of Dosing Tank: ~ gallons

Liquid Capacity of Septic Tank: Existing gallons Tank Manufacture ~ Effluent Pump Model: ~

Drainfield Installation ☐ N/A

Trench Depth: 16-32" inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.) (123, 50, 62, 60)

Total line length: 300 feet

# of Lines: 4 @ Varied feet

Depth of Media: 12 inches (Type) Infiltrator Quick-4

Depth of Cover: ~ inches

Distribution Device: Serial

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

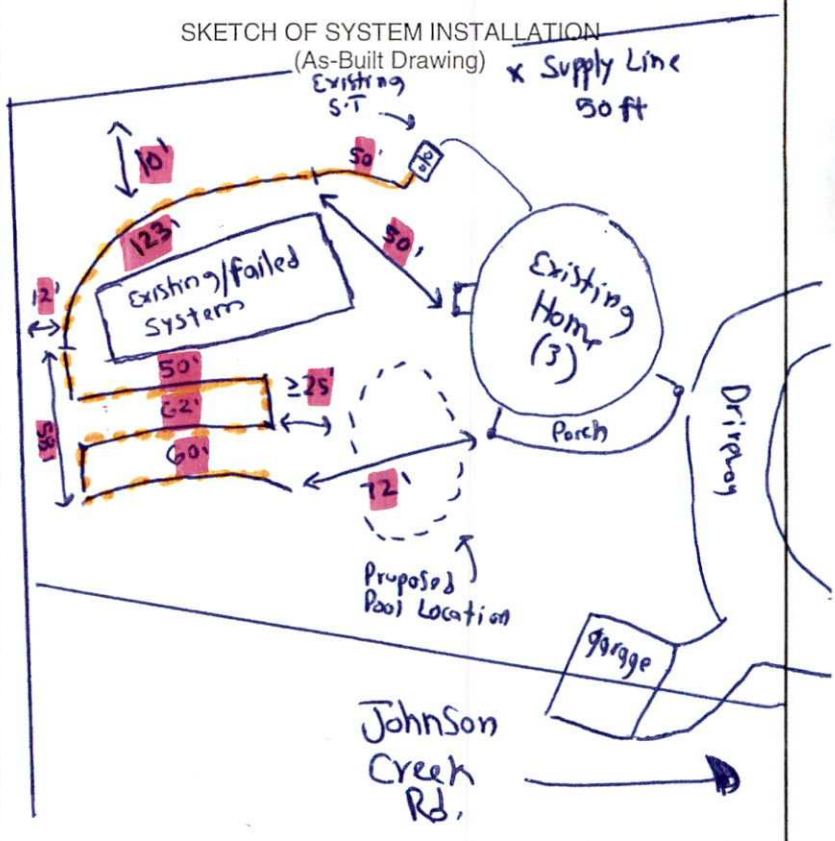
Inspection Dates

Tank(s) Inspected: 4/8/21

Excavation Inspected: 4/8/21

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: IIIg ChM 36

Existing S.T, Serial to 4 Infiltrator Quick-4 Lines (Varied Lengths)

DENR Authorized Agent: Brandon Shelton 2661 Signature: Brandon Shelton 2661

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

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

File #: 10979B Permit #: 12138 Tax Parcel #: 109-021-11

Property Owner: Tommy Raynes

Job Location Address: 7913 Johnson Creek Rd

City: Charlotte State: NC Zip Code: 28215

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 CHM 36

*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: IIIg CHM 36

-Old System Completely Compromised. Therefore new drain field installed.

DENR Authorized Agent: Braedon Shelton Date: 4/9/21

Signature: Braedon Shelton 2661

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

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

File #: _____ Permit #: _____ Tax Parcel #: 108-021-11

Property Owner: Tommy Raynes

Job Location Address: 7913 Johnson Creek Rd

City: Charlotte State: NC Zip Code: 28215

Operation Permit Issuance Date: _____ Contractor Name: Steve Autry

Permitted Design Flow: 360 GPD Liquid Capacity of Dosing Tank: ~ gallons

Liquid Capacity of Septic Tank: Existing gallons Tank Manufacture ~ Effluent Pump Model: ~

Drainfield Installation ☐ N/A

Trench Depth: 16-32" inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.) (123, 50, 62, 60)

Total line length: 300 feet

# of Lines: 4 @ Varied feet

Depth of Media: 12 inches (Type) Infiltrator Quick-4

Depth of Cover: ~ inches

Distribution Device: Serial

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 _____

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Distance from Property Line: ≥ 10 feet

Distance from Water Supply Source: ≥ 50 feet

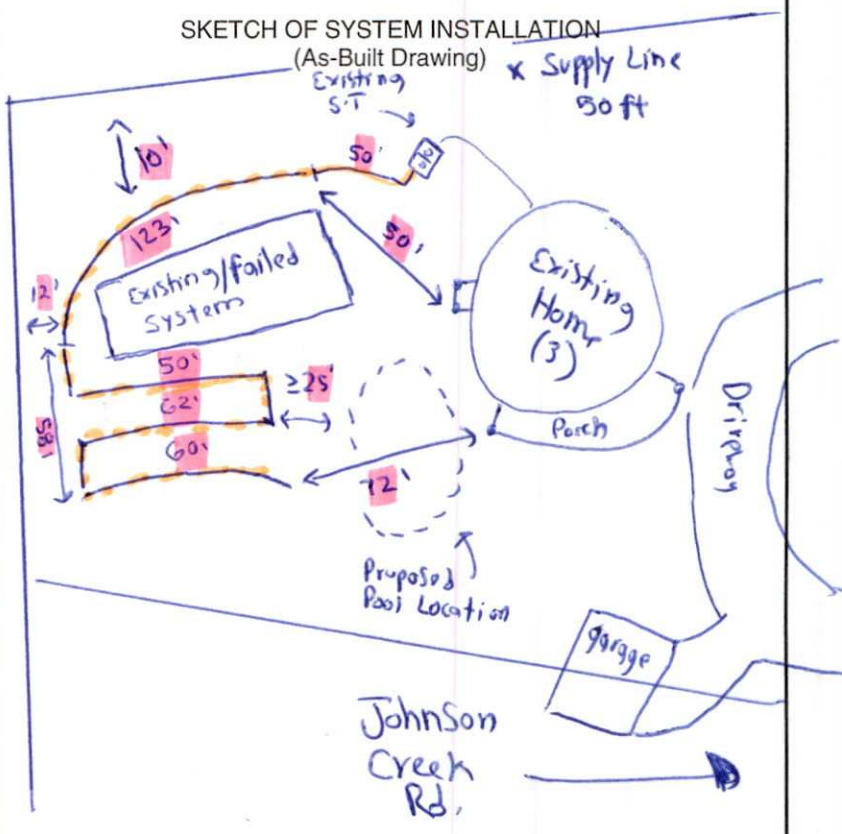
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SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)



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Comments: System Classification & Type: IIIg ChM 36

Existing S.T, Serial to 4 Infiltrator Quick-4 Lines (Varied Lengths)

DENR Authorized Agent: Brandon Shelton 2661 Signature: Brandon Shelton 2661