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

Ok To Release
Hold for A
Deck Addition.

(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 LP 1/21/20 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 ☐ _____

10529B
#10965

MECKLENBURG COUNTY
HEALTH DEPARTMENT

21 JAN '20 AM 8:59

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: Lake Vision Development, Inc.
ADDRESS: 2242 Longcove Court
CITY: Sherrill's Ford
STATE: NC ZIP: 28673
PHONE: 704.402.0463
ALTERNATE PHONE: 704.506.0807
E-MAIL: office@lakevisiondevelopment.com

PROPERTY OWNER: ☐ SAME AS PERSON FILING APPLICATION
NAME: Amy Kurtz
ADDRESS: 20730 Eastpoint Dr
CITY: Cornelius
STATE: NC ZIP: 28031
PHONE: 704 500 8489
ALTERNATE PHONE:
E-MAIL: akharvath81@att.net

JOB LOCATION INFORMATION
TAX PARCEL #: 00172104
STREET ADDRESS: 20730 Eastpoint Dr.
CITY: Cornelius
STATE: NC ZIP: 28031

SUBDIVISION OR MOBILE HOME PARK NAME:
Island Forest
LOT #: 72 & 73

WATER SUPPLY:
● MUNICIPAL ○ PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER

RESIDENTIAL PROPERTY TYPE: ○ N/A
● HOUSE ○ MODULAR HOME ○ MULTIPLE FAMILY
○ SINGLE MOBILE HOME ○ DOUBLE WIDE
○ OTHER

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 3

COMMERCIAL / INDUSTRIAL PROPERTY TYPE: ☐ N/A
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:
INDUSTRIAL WASTES? ○ YES ○ NO
UNDERGROUND STORAGE TANKS? ○ YES ○ NO

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:
☐ BEDROOM ☐ BATHROOM ☐ KITCHEN ☐ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☐ SUNROOM ☐ PORCH ☑ DECK ☐ OTHER

ADDITION/RENOVATION TYPE DETACHED FROM EXISTING STRUCTURE:
☐ DETACHED GARAGE ☐ DETACHED GARAGE WITH PLUMBING ☐ POOL HOUSE ☐ SHOP ☐ BARN
☐ STORAGE SHED ☐ DETACHED PORCH / DECK ☐ OTHER

*The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application, acknowledges that the contents of same are true, and authorizes the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Owner's/Agent's Signature

01.16.2020
Date

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: 20730 EASTPOINT DR., CORNELIUS Tax Parcel #: 00172104A

Please See Attached

"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.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

OK TO USE FOR A Deck Addition

REHS Signature

1/22/20
Date

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

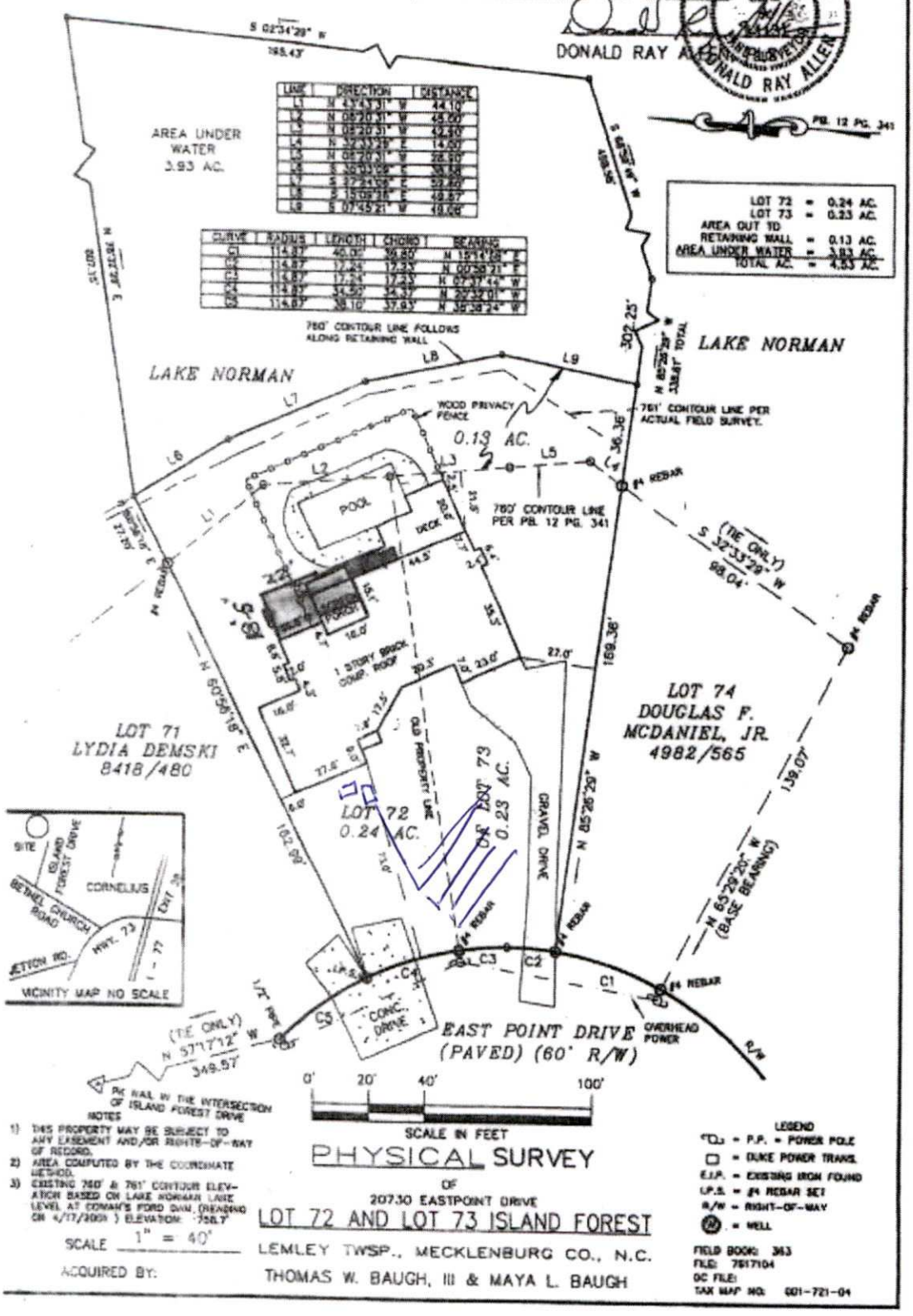
Revised on: 03/27/19

(704) 664-7029 (704) 664-8041 Fax

I, certify that this map was drawn under my supervision from an actual survey made under my supervision recorded in deed book 6680, page 583, and/or plat book 12, page 341, that the ratio of precision is 1':10,000+, and that the map was prepared in accordance with the General Statutes of North Carolina. Witness my hand and seal on the 20, day of APRIL A.D. 20 01

DONALD RAY ALLEN

NORTH CAROLINA PROFESSIONAL SEAL DONALD RAY ALLEN L-3390 LAND SURVEYOR



PB. 12 PG. 341

LOT 72	= 0.24 AC.
LOT 73	= 0.23 AC.
AREA OUT TO RETAINING WALL	= 0.13 AC.
AREA UNDER WATER	= 3.93 AC.
TOTAL AC.	= 4.53 AC.

NOTES

1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENT AND/OR RIGHTS-OF-WAY OF RECORD.
2) AREA COMPUTED BY THE COORDINATE METHOD.
3) EXISTING 760' & 761' CONTOUR ELEVATION BASED ON LAKE NORMAN LAKE LEVEL AT DUKE'S FORD DAM (READING ON 4/17/2001) ELEVATION: 758.7'

LEGEND

P.P. = POWER POLE
D = DUKE POWER TRANS.
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY
W = WELL

PHYSICAL SURVEY

OF

20730 EASTPOINT DRIVE

LOT 72 AND LOT 73 ISLAND FOREST

LEMLEY TWSP., MECKLENBURG CO., N.C.

SCALE 1" = 40'

ACQUIRED BY: THOMAS W. BAUGH, III & MAYA L. BAUGH

FIELD BOOK: 363
FILE: 7517104
DC FILE:
TAX MAP NO: 001-721-04

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 Lake Vision Development is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at

20730 Eastpoint Dr, Cornelius.
Number Street Town
(Or Parcel Number)

Gerald T. Kurtz
Property Owner (print name)

Gerald T. Kurtz
Property Owner (signature)

1/18/20
Date

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	01/21/20	**Amount:**	100.00
Receipt #:	120223	**Tendered:**	100.00
Check / Auth #:	CHARGE	**Returned:**	0.00
Received By:	PLACILJ		

Account Information

Account #: X38080
Contractor: LAKE VISION DEVELOPMENT INC
Attn:
Address: 2242 LONG COVE CT
Address:
City/State/Zip: SHERRILLS FORD, NC 28673

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	Use Existing System 20730 EASTPOINT DR		1	100.00	100.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
827.43	269.63				