


15906 YOUNGBLOOD RD

21702165

1/7/2008

duponbj

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

# INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 50758 DATE: 3/10/04

TC: 217-021-65 L

SERIAL 19682

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 the application dated 9/13/02. All work shall be completed on or before _____, after which date this permit 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 the granting of this permit. A Certificate of Completion or 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 or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

SEE PLOT FOR OPERATION PERMIT

PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank 1000 gallons

Tank Construction PCC

Trench Depth 24"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous Y

Total Line Length 400 feet

Number of Lines 5@80'

Depth of Stone N/A inches

Distance from House 75 feet

Distance from Property Line 210 feet

Distance from Well 750 feet

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

NAME OF OWNER CAROLINA GENERAL CONTRACTORS, INC

LOCATION OF PROPERTY 15906 YOUNGBLOOD RD

Comments: TYPE IIIg INNOVATIVE 25% REDUCTION SYSTEM, 5 LINES@80' PRESSURE MANIFOLD, 1500 GAL ST, 1000 GAL DT, 75' FROM HOUSE, 710' FROM PROPERTY LINES, 750' FROM WELL

MWD, 3/10/04

Environmental Health Specialist

WHITE - HEALTH DEPARTMENT's COPY • CANARY - E.H.S. COPY • PINK - OWNER OR AGENT's COPY

# CERTIFICATE OF COMPLETION/OPERATION PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

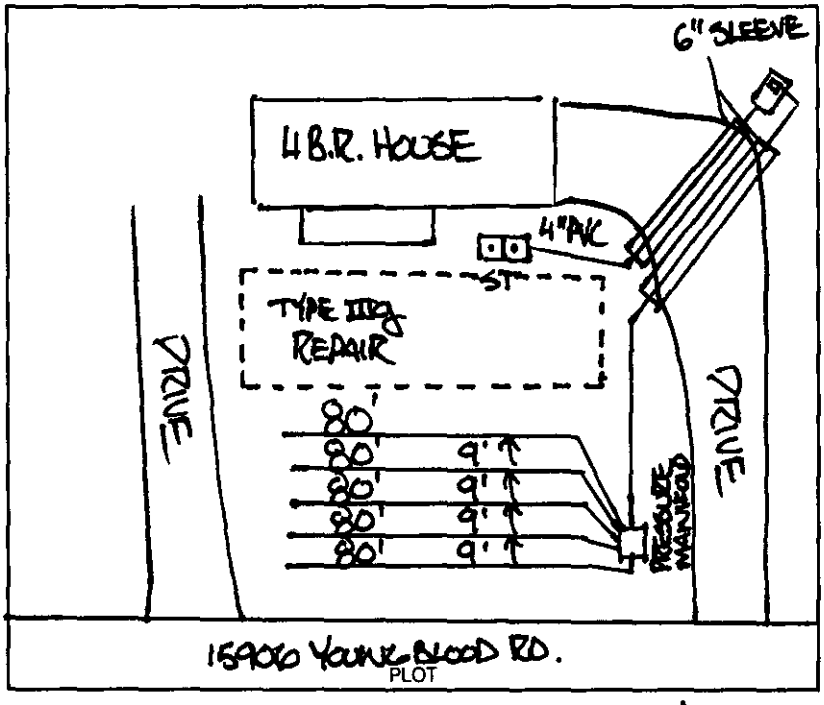
FILE: 5075B DATE: 3/10/04
TC: Z17-021-65 ☒ L ☒ CRT
SERIAL 19507

Name of Owner CAROLINA GENERAL CONTRACTORS, INC Juris.: _____

Address of Property 15906 YOUNGBLOOD RD.

**Inspection Data:**

Tank Material PCC
Total Length of Drainfield 400'
Number of Lines 5 @ 80'
Cover Depth 16"
Water Supply Source WELL
Distance to Water Source 750'
Excavation Inspected 1/7/04
Tank(s) Inspected 1/6/04
Wash Line Inspected N/A
High Water Alarm Inspected 3/10/04




Design 2004, 1500ST, 1000DT, P1, INN, 1200SF, T CTR# AUTRY

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☒ installed or constructed ☐ altered or repaired
☐ in accordance with the permit issued ☒ as detailed in the plot above

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. This issuance of this

☐ Certificate of Completion ☒ 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. 1990 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/revocation of this permit.

COMMENTS: TYPE IIIg INNOVATIVE, 25% REDUCTION SYSTEM, E-Z FLOW FOR A FOUR BEDROOM HOUSE, 400TLF; 5 LINES @ 80', 6" SLEEVE (A/C) OVER 4" PVC UNDER DRIVE.

3/10/04
Environmental Health Specialist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

FOR REGISTRATION JUDITH A. GIBSON
REGISTER OF DEEDS
MECKLENBURG COUNTY, NC
2004 MAR 10 03:49 PM
BK:16884 PG:212-215 FEE:$20.00

INSTRUMENT # 2004055593

2004055593

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

**WASTEWATER TREATMENT AND DISPOSAL SYSTEM DESIGN AGREEMENT: 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c); OR .1969**

FILE # 50578
PARCEL # 217-021-65

The undersigned, Carolina General Contractors, Inc., owner of property located at 15906 Youngblood Rd, Charlotte, NC 28278 (the "site") and described in an instrument recorded in Book _____ at Page _____, Mecklenburg Public Registry, hereby acknowledges that the undersigned applied to the Mecklenburg County Health Department (the "Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 15A NCAC 18A .1900 et seq.; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data, and other information which indicate to the Department that the septic tank system proposed by the undersigned is allowed by the rules; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is the responsibility of the designer, owner, developer, installer, or user of the system, as applicable, and that neither the Department nor its officials, employees, or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further acknowledges that the following conditions will apply to the site:

This instrument was prepared by: Paul C Suddreth II
Mail after recording to: 16105 Langston Dr Charlotte, NC 28278



Returned to customer

- Any changes on the property may make the Improvement Permit null and void and may make the Improvement Permit subject to revocation.

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless theDepartment, its employees, and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, this 10 day of March 20 04.

Carolina General Contractors, Inc. _____ (SEAL)
(Corporate Name)

_____ (SEAL)

By: Ann C Suddreth _____ (SEAL)

Ann C. Suddreth President _____ (SEAL)

ATTEST:

David C. Suddreth

David C. Suddreth, Secretary

(Corporate Seal)

STATE OF NORTH CAROLINA
COUNTY OF Mecklenburg

I, Annette Stubbs, a Notary Public for said County and State, do hereby certify that David C Suddreth II & Ann C Suddreth personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 10 day of March, 2004.

Annette Stubbs
Notary Public

My Commission Expires:

20 October 2007

NOTARY PUBLIC

STATE OF NORTH CAROLINA
COUNTY OF Mecklenburg

I, Annette Stubbs, a Notary Public for said County and State, do hereby certify that David C. Suddreth, II personally came before me this day and acknowledged that he is the Secretary of Carolina General Contractors, Inc., a North Carolina corporation, and that by authority duly given and as the act and deed of said corporation, the foregoing instrument was signed in its name by its Current President, sealed with its corporate seal, and attested by David C Suddreth, II as its Current Secretary.

WITNESS my hand and notarial seal, this 10 day of March, 2004.

Annette Stubbs
Notary Public

My Commission Expires:

20 October 2007

REVISED 8-13-02

X32477 JKA

#2

**FEE:** 300.00 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
**DATE:** 8-18-03 **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

**DATE:** 8/6/03 **PERMIT NO:** 5075B

**PARCEL NO:** ~~217-62107~~ 217-021-65

**JOB LOCATION ADDRESS:** ~~15520~~ 15906 Cowapasture Rd

**PROPERTY OWNER:**

**BUILDING CONTRACTOR:** Randy Sedreth

**SUBDIVISION NAME:**

**AUTHORIZATION ISSUED BY:** _____ **DATE:** 8/6/03
DEHNR AUTHORIZED AGENT

## AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. _____, 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, CONSTRUCTION, ALTERATION AND/OR REPAIR 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 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 AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: Stay >100' from Lot 6 well
No encroachment forms on Recorded Map in Rec Trench
3-11-04

## OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITIONS OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

Permit Number: 5075-B

Tax Number: ~~217-02-109~~ 217-021-65

- 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 | X Yes | ___ No | ___ Partial Basement | |
| Type Primary Wastewater System<br>Type (circle one):<br>I II (III) IV V VI | ___ Conventional<br>___ Prefabricated, permeable block panel system<br>___ Shallow Placed Conventional | ___ Low Pressure Pipe<br>___ Large Diameter Pipe<br>___ Fill<br>___ Other | X Innovative or Experimental:<br>___ IWWS-93-1<br>___ IWWS-93-2<br>___ IWWS-94-1 | |
| .3 Long-term acceptance rate | 420 Max gallons/day wastewater flow | 1600 Absorption Area (sq ft) | 91' Trench spacing (min. on centers) | |
| YES Serviced by private well | 1500 Gallon septic tank | 400 Total trench length (ft) | 36" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions) | |
| 4 Bedrooms in residence | 1000 Gallon pump tank | N/A Depth of stone | | |
| Any surface waters present: NO | Type: | Minimum separation distance: | | |
| Site modifications required: NO | | | | |
| Additional Conditions: Stay >100' from any well<br>AGREEMENT FORMS RECORDED AND TO IWWS FILE ON OR BEFORE 3-11-04 | | | | |
| Repair Area System Type<br>Type (circle one):<br>I II III (IV) V VI | ___ Conventional<br>✓ Prefabricated, permeable block panel system<br>___ Shallow Placed Conventional | ___ Low Pressure Pipe<br>___ Large Diameter Pipe<br>___ Fill<br>___ Other | ___ Innovative or Experimental:<br>___ IWWS-93-1<br>___ IWWS-93-2<br>___ IWWS-94-1 | |
| 798 Absorption Area (Sq ft)<br>266 Total Trench Length (Ft) | IV/A Depth of Stone Trench | 91 Trench spacing (min. on centers) | 394 Maximum Trench Depth | |
| For existing system, enter the year originally installed: | | | | |

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for th Job Location contained in this document. This approval is granted in accordance with the provisions of Laws and Rules For Sewage, Treatment and Disposal in effe 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 Departmen
- This Improvement permit is transferable.

DEHNR Authorized Agent — Date 8/6/03

Owner/Agent Signature — Date

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR.
SUITE 211
700 N. TRYON ST.
CHARLOTTE, N.C. 28202.
(704) 336-5102

NORTH CAROLINA DEPARTMENT OF
ENVIRONMENTAL, HEALTH,
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

*MECKLENBURG COUNTY*
*LAND USE AND ENVIRONMENTAL SERVICES*
*Payment Receipt*

**Receipt Information**

| | | | |
|---|---|---|---|
| **Date:** | 03/10/04 | **Amount:** | 150.00 |
| **Receipt #:** | 24073 | **Tendered:** | 0.00 |
| **Check / Auth #:** | CHARGE | **Returned:** | 0.00 |
| **Received By:** | AIDOOJK | | |

**Account Information**

**Account #:** X32477
**Contractor:** CAROLINA GENERAL CONTRAC INC
**Attn:**
**Address:** 16105 LANGSTON DRIVE
**Address:**
**City/State/Zip:** CHARLOTTE, NC 28278

| Item | Description | Permit# | Quantity | Unit Price | Total Price |
|---|---|---|---|---|---|
| 0734 | Auth for Waste Wtr Sys Constr<br>15906 YOUNGBLOOD ROAD | | 1 | 150.00 | 150.00 |

**Outstanding Balances**

| Month-To-Date | Prior Month | 30 Days | 60 Days | 90 Days | Balance |
|---|---|---|---|---|---|
| 479.35 | 1,870.48 | 110.00 | | | |

*MECKLENBURG COUNTY*
*LAND USE AND ENVIRONMENTAL SERVICES*
*Payment Receipt*

**Receipt Information**

| | | | |
|---|---|---|---|
| **Date:** | 03/10/04 | **Amount:** | 150.00 |
| **Receipt #:** | 24075 | **Tendered:** | 0.00 |
| **Check / Auth #:** | CHARGE | **Returned:** | 0.00 |
| **Received By:** | AIDOOJK | | |

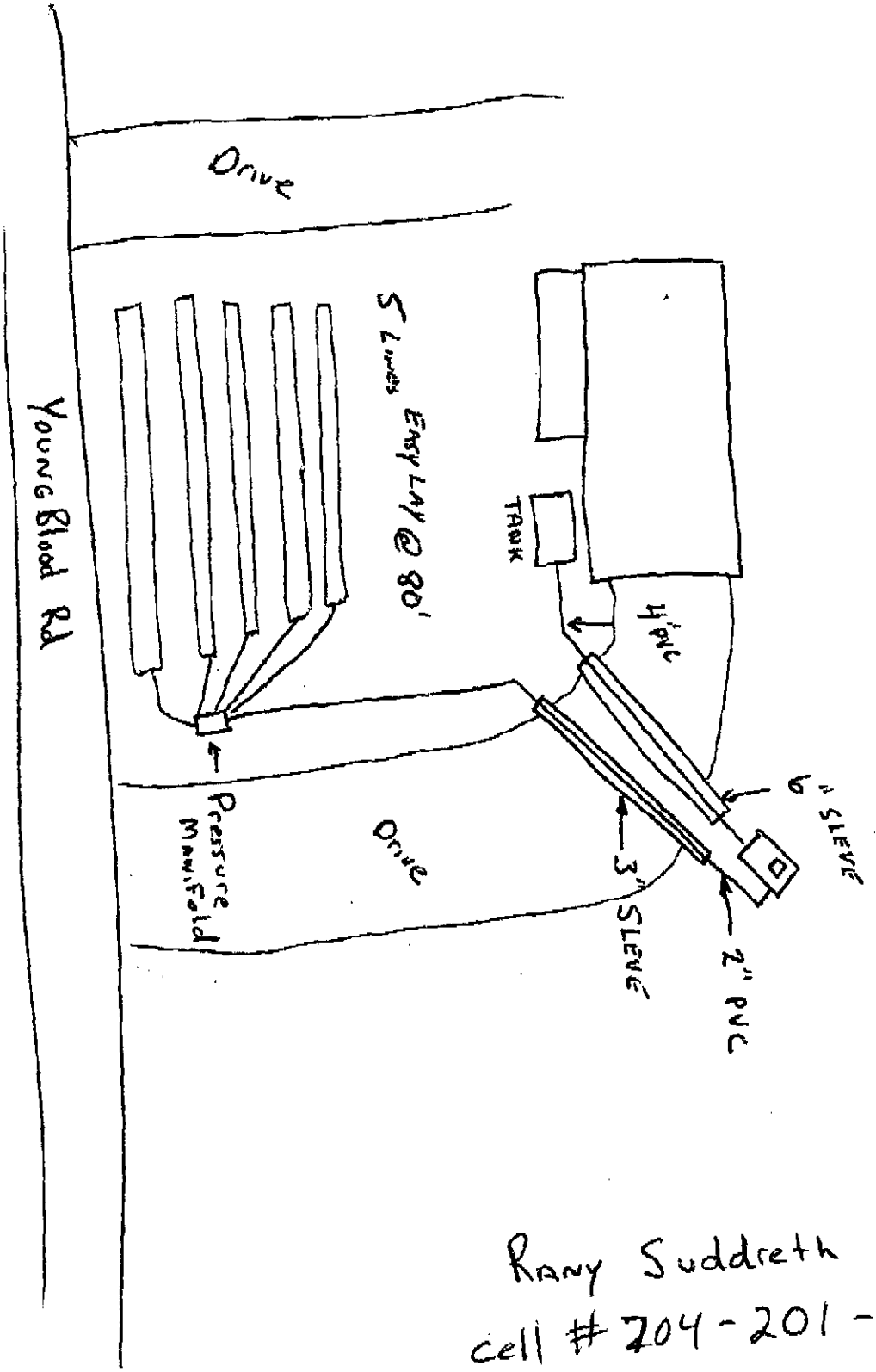
**Account Information**

**Account #:** X32477
**Contractor:** CAROLINA GENERAL CONTRAC INC
**Attn:**
**Address:** 16105 LANGSTON DRIVE
**Address:**
**City/State/Zip:** CHARLOTTE, NC 28278

| Item | Description | Permit# | Quantity | Unit Price | Total Price |
|---|---|---|---|---|---|
| 0703 | Installation/Final Approval<br>15906 YOUNGBLOOD ROAD | | 1 | 150.00 | 150.00 |

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

| Month-To-Date | Prior Month | 30 Days | 60 Days | 90 Days | Balance |
|---|---|---|---|---|---|
| 629.35 | 1,870.48 | 110.00 | | | |




Rany Suddreth
cell # 704-201-1363

**Autry Concrete Products**
**8918 Byrum Dr.**
**Charlotte, NC 28217**
**Phone**
**704-357-1250**
**Fax**
**704-357-9727**

**Fax Cover Sheet**

**Date:** 3-10-02

**To:** David Cornelius

**From:** Jack

**Subject:** 15906 Youngblood rd

**Number Of Pages:** 2

1/7/04

**Additional Comments:**

DATE: 9/23/02 pd $200-RC

FOR RESIDENTIAL SITES
INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM

[ ] CRT

TYPE APPLICATION: ___ NEW SYSTEM ___ EXPANSION/ ALTERATION OF EXISTING SYSTEM ___ REPAIR OF EXISTING SYSTEM

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

$110 Add'l Info Req'd 10/17 12/17

FILE #: 30758

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 21702109 PO

STREET ADDRESS: 15820 Youngblood Rd

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

TOWNSHIP (CHECK ONE):

X 0 MECKLENBURG
___ 1 CHARLOTTE
___ 2 DAVIDSON
___ 3 CORNELIUS
___ 4 PINEVILLE
___ 5 MATTHEWS
___ 6 HUNTERSVILLE
___ 7 MINT HILL

CLOSING DATE_____

TYPE OF BUILDING (CHECK ONE):

___ SINGLE MOBILE HOME(S)
___ DOUBLE WIDE (D)
X HOUSE (H)
___ MODULAR HOME (M)
___ MULTIPLE FAMILY (F)
___ OTHER (O)

12/17

HEATED SQUARE FOOTAGE: 4000

NUMBER OF BEDROOMS: 5 NUMBER OF OCCUPANTS: 4

FOUNDATION FOR RESIDENCE:

___ WITHOUT BASEMENT
___ ON SLAB
___ CRAWL SPACE
X WITH BASEMENT /PLUMBING
___ WITH BASEMENT /NO PLUMBING

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: ___ YES X NO TYPE: _____

WATER SUPPLY (CHECK ONE):
___ COMMUNITY (C)
___ MUNICIPAL (M)
X PRIVATE WELL (P)
___ SHARED WELL (S)
___ OTHER 'SPRINGS' (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES ___ YES X NO
EXISTING WASTEWATER SYSTEMS ___ YES X NO
EASTMENTS OR RIGHT-OF-WAYS X YES ___ NO
WELL, SPRINGS OR WATERLINES ___ YES X NO
DESIGNATED WETLANDS ___ YES X NO

| PROPERTY OWNER: | LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE: |
|---|---|
| NAME: (LAST) Trotter (FIRST) Jim (MI) / Was Philemon | NAME: (LAST) Suddreth (FIRST) David (MI) C |
| ADDRESS: 15203 Wiltshire Manor Dr | DAYTIME PHONE: 704 777 - 1979 |
| CITY: Charlotte STATE: NC ZIP: 28278 | cell # 777.1975 |
| DAYTIME PHONE: 704 777 - 1979 | |

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 4/28/1999

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

SIGNED: D. Suddreth DATE: 9/13/02

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102

9/23 Plans info Rec'd 11:30 AM

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

Sheet: 1
Property ID: PO 217-021-09
Lot #:
File #: 5075B
Code: 1

site 2

AES

# SOIL/SITE EVALUATION
## for ON-SITE WASTEWATER SYSTEM

Owner: Jim Trotter
Applicant: Randy Suddreth
Address: 15203 Wiltshire Manor Drive, Charlotte, N. C. 28278
Date Evaluated: 10/23/2002
Proposed Facility: Residence
Design Flow (.1949): 360gpd
Property Size: .1 a. inv.
Location of Site: Youngblood Road
Property Recorded:
Water Supply: [ ] Public [ x ] Individual [ x ] Well [ ] Spring [ ] Other
Evaluation Method: [ ] Auger Boring [ x ] Pit [ ] Cut
Type of Wastewater: [ x ] 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 (IN.) | .1956 Sapro Class | .1944 Restr Horiz | Profile Class & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| 1 | LS, 8 | 0-3 | GR/SCL | FR/SEXP/SS/SP | >53" TO SOIL WETNESS | 15 | PS | NONE | PS, SAP II .3GPD/FT$^2$ |
| | | 3-15 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 15-53 | M/L | FR/SEXP/NS/NP | | | | | |
| 2 | " | 0-4 | GR/SCL | FR/SEXP/SS/SP | >51" TO SOIL WETNESS | 24 | " | " | " |
| | | 4-24 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 24-51 | M/L | FR/SEXP/NS/NP | | | | | |

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

Other Factors (.1946): _____
Site Classification (.1948): PROVISIONALLY SUITABLE
Evaluated By: W. R. Marlin, LSS, 10/24/02. W. R. Marlin
Others Present: B. Summey, R. Suddreth

FILE # 5075B

COMMENTS 100% Repair

| LANDSCAPE POSITION | GROUP | TEXTURE | .1955 LTAR |
|---|---|---|---|
| R-RIDGE | I | S-SAND | 1.2-0.8 |
| S-SHOULDER SLOPE | | LS-LOAMY SAND | |
| L-LINEAR SLOPE | | | |
| FS-FOOT SLOPE | II | SL-SANDY LOAM | 0.8-0.6 |
| N-NOSE SLOPE | | L-LOAM | |
| H-HEAD SLOPE | | | |
| CC-CONCLAVE SLOPE | III | SI-SILT | 0.6-0.3 |
| CV-CONVEX SLOPE | | SICL-SILTY CLAY LOAM | |
| T-TERRACE | | CL-CLAY LOAM | |
| FP-FLOOD PLAIN | | SCL-SANDY CLAY LOAM | |
| | IV | SC-SANDY CLAY | 0.4-0.1 |
| | | SIC-SILTY CLAY | |
| | | O-ORGANIC | |

| CONSISTENCE MOIST | WET |
|---|---|
| VFR-VERY FRIABLE | NS-NON-STICKY |
| FR-FRIABLE | SS-SLIGHTLYSTICKY |
| FI-FIRM | S-STICKY |
| VFI-VERY FIRM | VS-VERY STICKY |
| EFI-EXTREMELY FIRM | NP-NON-PLASTIC |
| | SP-SLIGHTLYSTICKY |
| | P-PLASTIC |
| | VP-VERY PLASTIC |

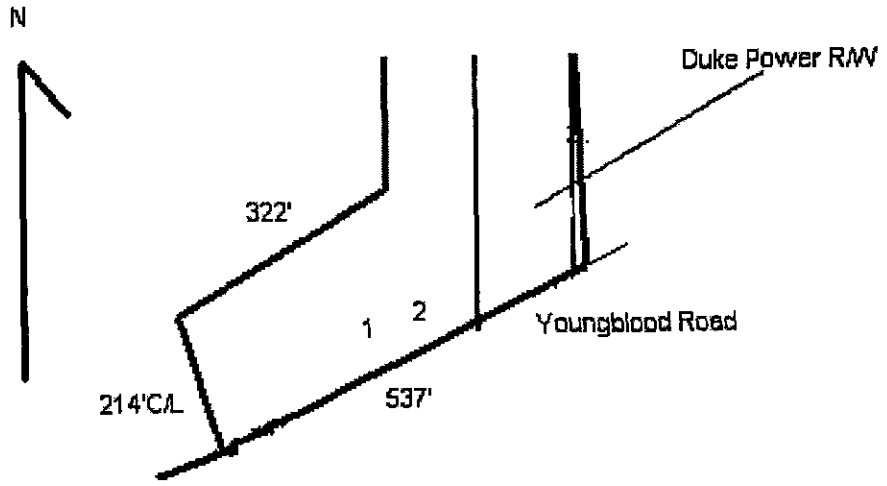
STRUCTURE

SG-SINGLE GRAIN
M-MASSIVE
CR-CRUMB
GR-GRANULAR
SBK-SUBANGULAR BLOCKY
ABK-ANGULAR BLOCKY
PL-PLATY
PR-PRISMATIC

MINERALOGY

SLIGHTLY EXPANSIVE

EXPANSIVE



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

Sheet: 1
Property ID: Po217-021-09
Lot #:
File #: 5075B
Code: 2

Site 1
ACS

# SOIL/SITE EVALUATION
# for ON-SITE WASTEWATER SYSTEM

Owner: Jim Trotter
Applicant: David C. Suddreth
Address: 15203 Wiltshire Manor Drive, Charlotte, N. C. 28278
Date Evaluated: 10/09/2002
Proposed Facility: Residence
Design Flow (.1949): 600gpd
Property Size: 1.5a. Inv.
Location of Site: Youngblood Road
Property Recorded:
Water Supply: [ ] Public [x] Individual [x] 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 | | | | Profile Class & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| | | | .1941 Structure/ Texture | .1941 Consistence Mineralogy | .1942 Soil Wetness/ Color | .1943 Soil Depth (IN.) | .1956 Sapro Class | .1944 Restr Horiz | |
| 1 | LS, 10 | 0-6 | GR/SCL | FR/SEXP/SS/SP | >48" TO SOIL WETNESS | 48 | N/A | NONE | PS, IV .3GPD/FT$^2$ |
| | | 6-17 | SBK/SCL | " | | | | | |
| | | 17-48 | SBK/C | FI/SEXP/S/P | | | | | |
| 2 | " | 0-3 | GR/SCL | FR/SEXP/SS/SP | >33" TO SOIL WETNESS | 33 | " | " | US, IV .3GPD/FT$^2$ |
| | | 3-25 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 25-33 | WKSBK/SCL | FR/SEXP/SS/SP | | | | | |
| 3 | LS, 8 | 0-3 | GR/SCL | " | >15" TO SOIL WETNESS | 15 | " | " | US, III |
| | | 3-15 | WKSBK/SCL | " | | | | | |
| 4 | " | 0-4 | GR/SCL | " | >27" TO SOIL WETNESS | 27 | " | " | US, IV .15GPD/FT$^2$ LPP |
| | | 4-27 | SBK/SC | FI/SEXP/S/P | | | | | |
| | | | | | | | | | |
| 5 | " | 0-8 | GR/SCL | FR/SEXP/SS/SP | >33" TO SOIL WETNESS | 33 | " | " | US, IV .3GPD/FT$^2$ |
| | | 8-24 | SBK/SC | FI/SEXP/S/P | | | | | |
| | | 24-33 | WKSBK/SCL | FR/SEXP/SS/SP | | | | | |
| 6 | " | 0-3 | GR/SCL | " | >48" TO SOIL WETNESS | 48 | " | " | PS, IV .3GPD/FT$^2$ |
| | | 3-16 | SBK/SCL | " | | | | | |
| | | 16-30 | SBK/SC | FI/SEXP/S/P | | | | | |
| | | 30-48 | WKSBK/SCL | FR/SEXP/SS/SP | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

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

Other Factors (.1946): _____
Site Classification (.1948): UNSUITABLE
Evaluated By: W. R. Marlin, LSS, 10/9/02, W. R. Marlin
Others Present: B. Summey

FILE # 307513

COMMENTS 100% Recruit

LANDSCAPE POSITION

R-RIDGE
S-SHOULDER SLOPE
L-LINEAR SLOPE
FS-FOOT SLOPE
N-NOSE SLOPE
H-HEAD SLOPE
CC-CONCLAVE SLOPE
CV-CONVEX SLOPE
T-TERRACE
FP-FLOOD PLAIN

| GROUP | TEXTURE | .1955 LTAR |
|---|---|---|
| I | S-SAND<br>LS-LOAMY SAND | 1.2-0.8 |
| II | SL-SANDY LOAM<br>L-LOAM | 0.8-0.6 |
| III | SI-SILT<br>SICL-SILTY CLAY LOAM<br>CL-CLAY LOAM<br>SCL-SANDY CLAY LOAM | 0.6-0.3 |
| IV | SC-SANDY CLAY<br>SIC-SILTY CLAY<br>O-ORGANIC | 0.4-0.1 |

CONSISTENCE

MOIST

VFR-VERY FRIABLE
FR-FRIABLE
FI-FIRM
VFI-VERY FIRM
EFI-EXTREMELY FIRM

WET

NS-NON-STICKY
SS-SLIGHTLYSTICKY
S-STICKY
VS-VERY STICKY
NP-NON-PLASTIC
SP-SLIGHTLYSTICKY
P-PLASTIC
VP-VERY PLASTIC

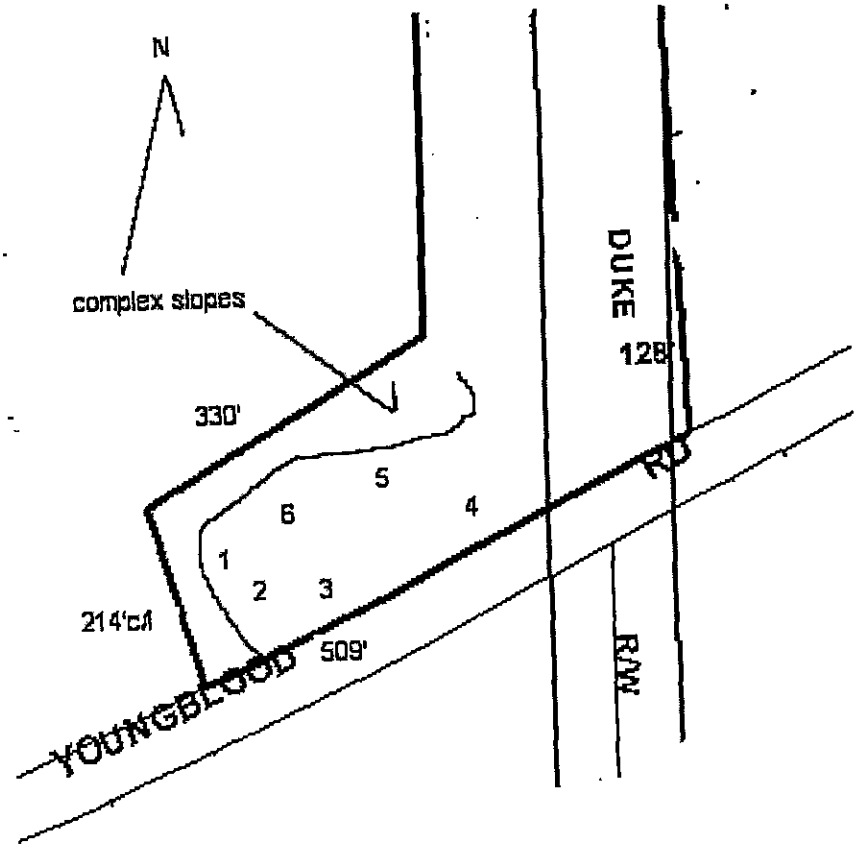
STRUCTURE

SG-SINGLE GRAIN
M-MASSIVE
CR-CRUMB
GR-GRANULAR
SBK-SUBANGULAR BLOCKY
ABK-ANGULAR BLOCKY
PL-PLATY
PR-PRISMATIC

MINERALOGY

SLIGHTLY EXPANSIVE

EXPANSIVE



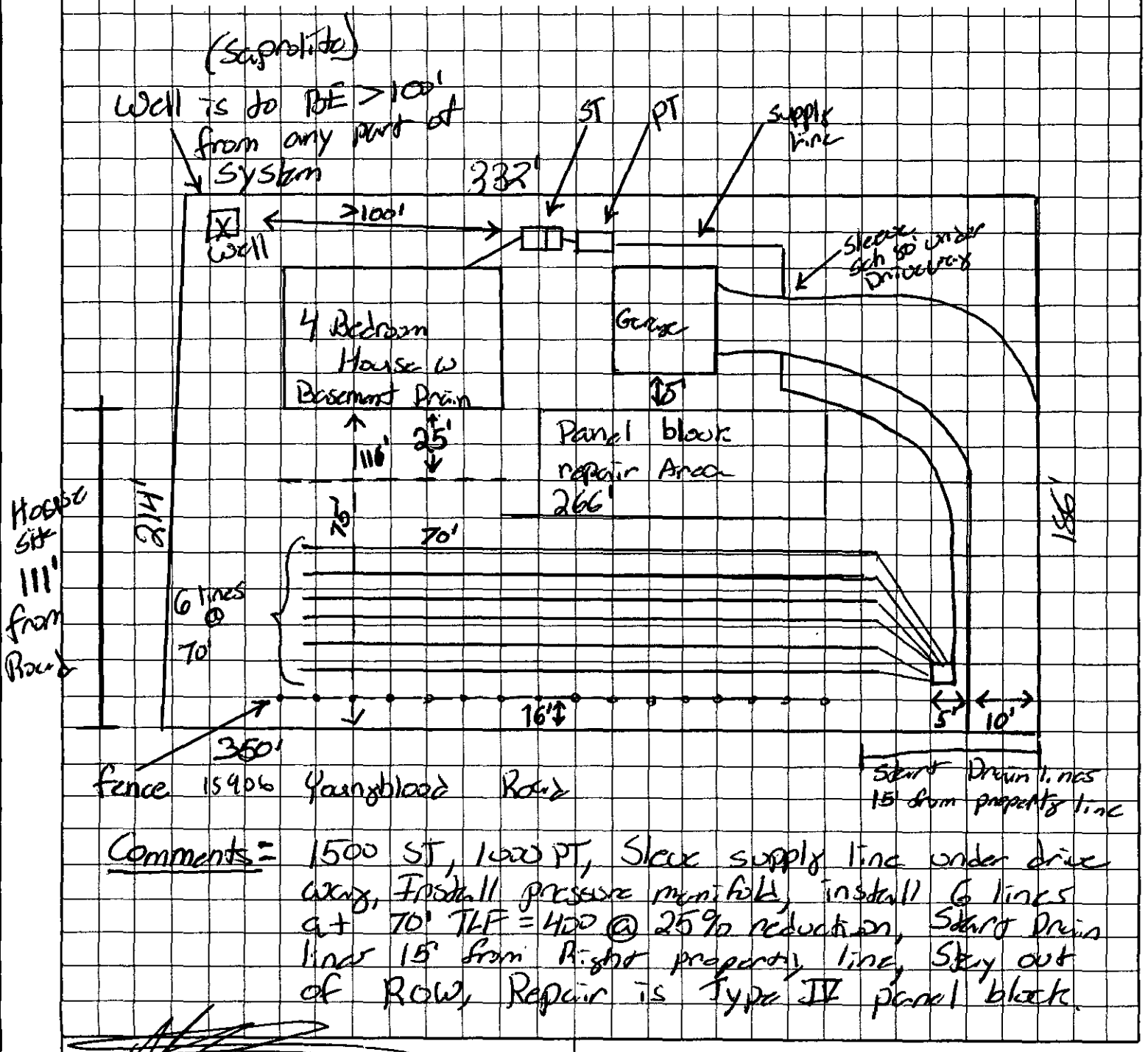
# PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 5075-B

TC: 217-021-65

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.




1506 Youngblood Road

Comments: 1500 ST, 1000 PT, Sleeve supply line under drive ways, Install pressure manifold, Install 6 lines at 70' TLF = 400 @ 25% reduction, Start Drain lines 15' from Right property line, Stay out of ROW, Repair is Type IV panel block.

OWNER/AGENT SIGNATURE

DATE

APPROVAL DATE

White - Health Department's Copy  Canary - E.H.S. Copy  Pink - Owner's Copy

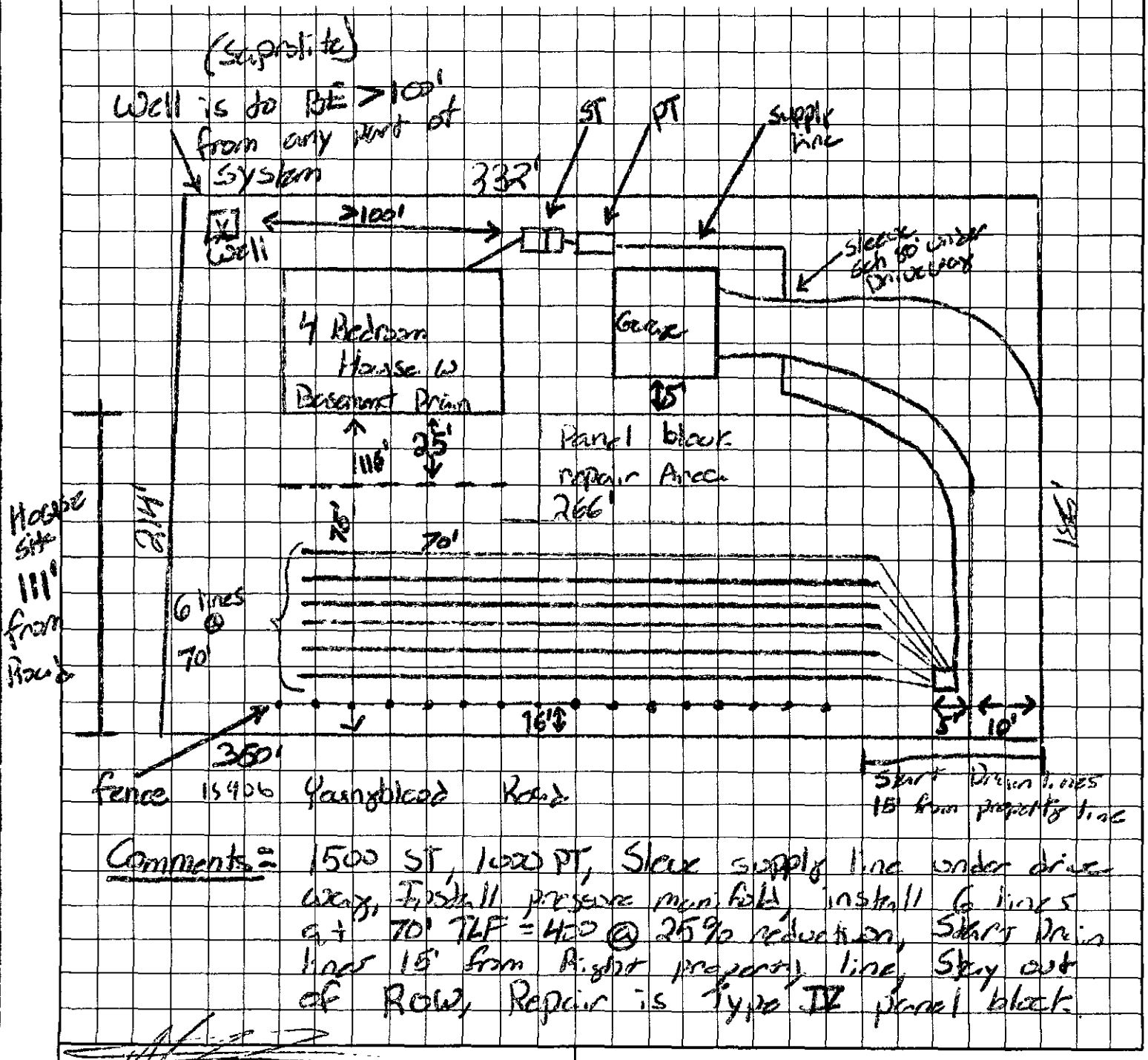
# PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 5075-B

TC: 217-021-65

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



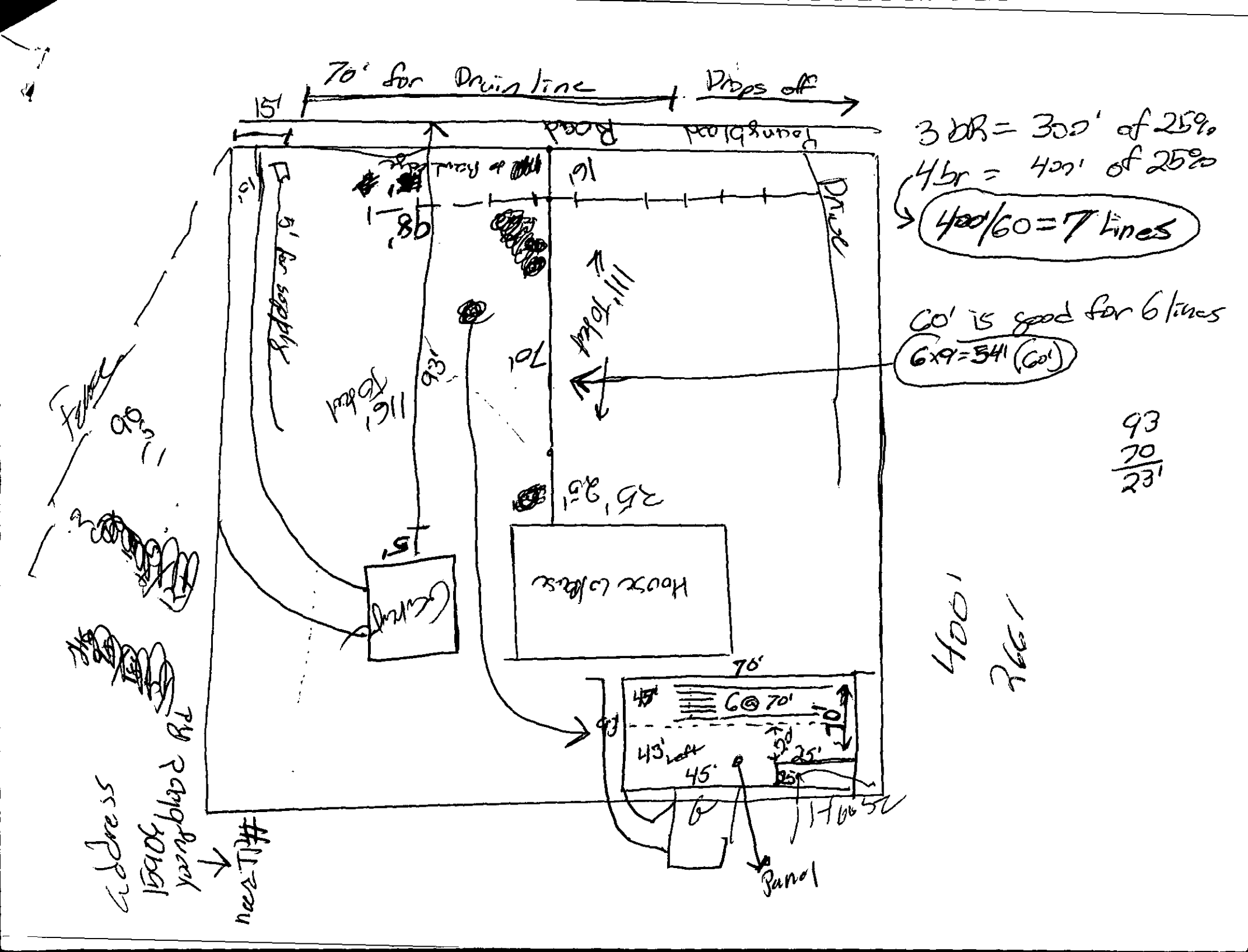

Comments: 1500 ST, 1000 PT, Sleeve supply line under drive-way, Install pressure manifold, install 6 lines @ 70' TLF = 420 @ 25% reduction, Start Drain lines 15' from Right property line, Stay out of Row, Repair is Type IV panel block.

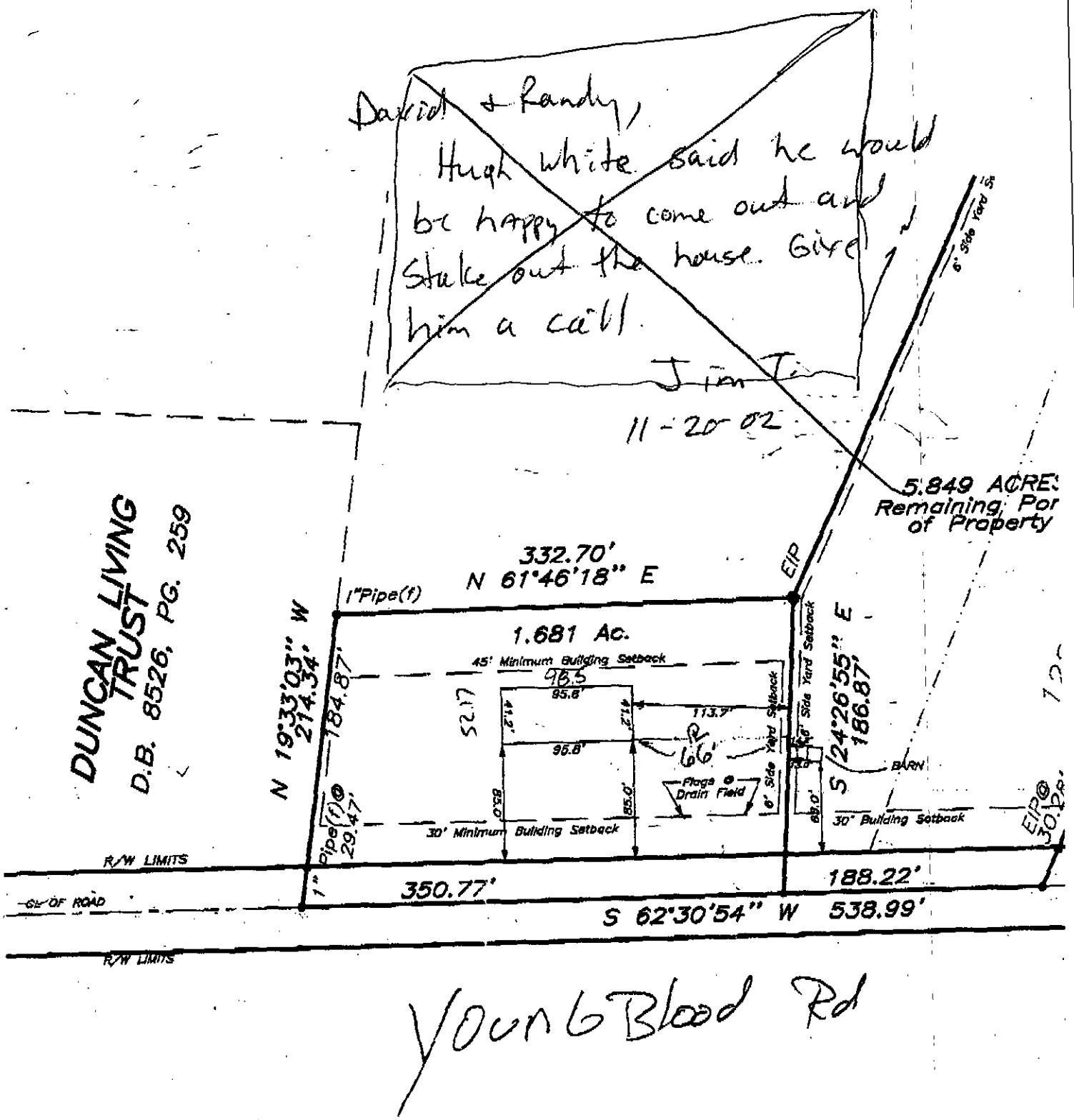
OWNER/AGENT SIGNATURE

DATE

APPROVAL DATE

White - Health Department's Copy  Canary - E.H.S. Copy  Pink - Owner's Copy


70' for Drain line
Drops off
15'
Pool
Pool Pump
3 BR = 300' of 25%
4 Br = 400' of 25%
400/60 = 7 Lines
Drive
60' is good for 6 lines
6x9 = 54' (60')
111' Total
93'
70'
25' 25'
House Address
Fence
Curb
House Address
70'
45'
60 @ 70'
45' left
45'
25'
Panel
#1 Drain
Address
93
70
23'
400'
396'


David + Randy,
Hugh White said he would be happy to come out and Stake out the house. Give him a call.
Jim T.
11-20-02
DUNCAN LIVING TRUST
D.B. 8526, PG. 259
N 19°33'03" W
214.34'
184.87'
1"Pipe(f)
332.70'
N 61°46'18" E
EIP
5.849 ACRES
Remaining Por of Property
1.681 Ac.
45' Minimum Building Setback
95.8'
113.7'
166'
95.8'
52.17'
85.0'
30' Minimum Building Setback
Plage Drain Field
6' Side Yard Setback
BARN
S 24°26'55" E
186.87'
30' Building Setback
EIP
1" Pipe(f)
29.47'
R/W LIMITS
-CL OF ROAD
350.77'
188.22'
S 62°30'54" W 538.99'
R/W LIMITS
Youngblood Rd

15906 Youngblood
21702109 Part OF
Will Sub-Divided Lot
for 2 Homes if possible

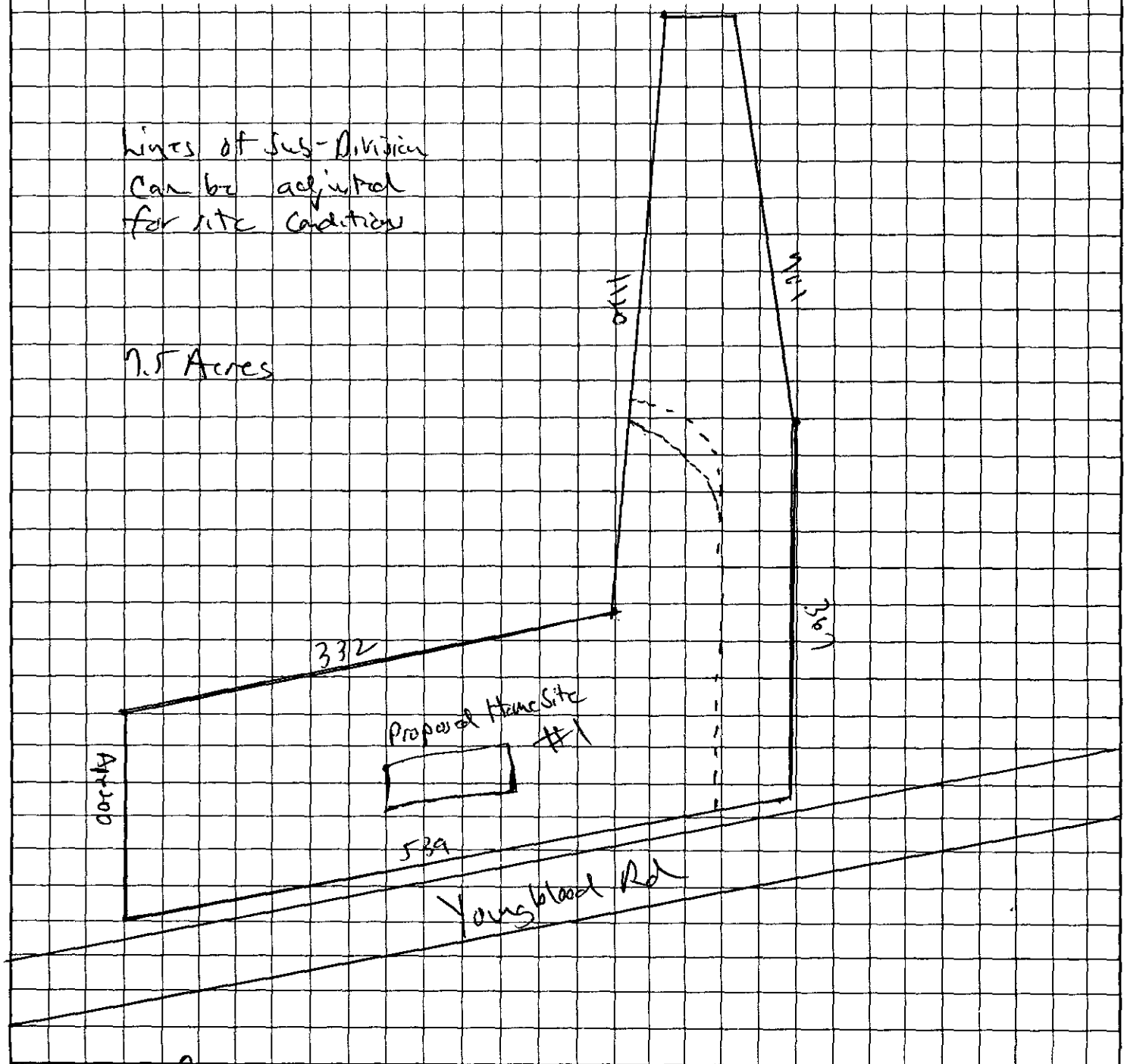
# PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 5075-B

TC: _____

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.




OWNER/AGENT SIGNATURE

DATE 9/18/02

APPROVAL DATE _____

White - Health Department's Copy  Canary - E.H.S. Copy  Pink - Owner's Copy

*MECKLENBURG COUNTY*
*LAND USE AND ENVIRONMENTAL SERVICES*
***Payment Receipt***

**Receipt Information**

| | | | |
|---|---|---|---|
| **Date:** | 09/23/02 | **Amount:** | 300.00 |
| **Receipt #:** | 10570 | **Tendered:** | 0.00 |
| **Check / Auth #:** | CHARGE | **Returned:** | 0.00 |
| **Received By:** | FOSTERV | | |

**Account Information**

**Account #:** X32477
**Contractor:** CAROLINA GENERAL CONTRAC INC
**Attn:**
**Address:** 16105 LANGSTON DRIVE
**Address:**
**City/State/Zip:** CHARLOTTE, NC 28278

| Item | Description | Permit# | Quantity | Unit Price | Total Price |
|---|---|---|---|---|---|
| 0702 | Optional Site Evaluations<br>15906 Youngblood Rd. | | 1 | 100.00 | 100.00 |
| 0701 | Improvment Permit App-Residen<br>15906 Youngblood Rd. 2nd site | | 1 | 200.00 | 200.00 |

**Outstanding Balances**

| Month-To-Date | Prior Month | 30 Days | 60 Days | 90 Days | Balance |
|---|---|---|---|---|---|
| 1,454.42 | | | | | |

*MECKLENBURG COUNTY*
*LAND USE AND ENVIRONMENTAL SERVICES*
*Payment Receipt*

**Receipt Information**

| | | | |
|---|---|---|---|
| **Date:** | 10/21/02 | **Amount:** | 100.00 |
| **Receipt #:** | 11095 | **Tendered:** | 0.00 |
| **Check / Auth #:** | CHARGE | **Returned:** | 0.00 |
| **Received By:** | CRAIGGY | | |

**Account Information**

**Account #:** X32477
**Contractor:** CAROLINA GENERAL CONTRAC INC
**Attn:**
**Address:** 16105 LANGSTON DRIVE
**Address:**
**City/State/Zip:** CHARLOTTE, NC 28278

| Item | Description | Permit# | Quantity | Unit Price | Total Price |
|---|---|---|---|---|---|
| 0702 | Optional Site Evaluations<br>YOUNGBLOOD RD/FILE 5075B | | 1 | 100.00 | 100.00 |

**Outstanding Balances**

| Month-To-Date | Prior Month | 30 Days | 60 Days | 90 Days | Balance |
|---|---|---|---|---|---|
| 100.00 | 1,454.42 | | | | |