SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

☑ NEW SEPTIC ☐ REPAIR ☐ USE EXISTING ☐ MODIFIED PLOT PLAN ☐ ALTERATION

File Number: 11623B

Assigned Inspector: _____

☑ IP $250.00: SEOL Initial/Date 3/7/23

☐ IP Commercial $450.00: _____ Initial/Date

☑ CA & OP $400.00: MO 8/23/23 Initial/Date

☐ Alteration Fees $300: _____ Initial/Date

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

☐ Use Existing Fees $100.00: _____ Initial/Date

☐ Use Existing Approved ☐ Use Existing Denied

☑ Send IP permit for signature: _____ ☐ Signature received: _____

☑ Floor plans reviewed

☑ Generate CA ☑ Approve as Noted in Winchester

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

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

☐ Certified operator contract is on file: _____

☑ Septic file complete: 4/10/24

☑ Release final hold in Winchester: 4/10/24

AOWE (Eric Batey) did the final inspection

Comments:

Please send Permit for signatures. I already reviewed the plans. OK to "Approve As Noted" Once the remaining #400 fees are Paid.

#1 0-5 scl
5-10 scl - sap
10-12 chroma 2 mottles
sap

#2 0-5 l
5-16 scl
16-30 scl chroma 2 mottles
30-36 scl " sap (massive?)

(5) 0-20' cl sap inclusions
rock

(4) 0-17 clay sandy loam, gran
17-39" c w/ chroma 1 5
water @ 39"

0-17 - clay sticky chroma 2
17-24 - clay - sap inc. - sat wtr

(5)

11623B

MECKLENBURG COUNTY
HEALTH DEPARTMENT #13698

6 MAR '23 PM 1:27

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: 019-321-02
STREET ADDRESS: 11737 Everett Keith Road
CITY: Huntersville
STATE: NC ZIP: 28078
SUBDIVISION NAME: N/A
LOT #: N/A LOT SIZE (acres): 4.43

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: 2,251
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 2

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: _____

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 uphill pump needed

8A. **RANK:** ____ ____ ____ ____ ____

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?** _____ ☑ UNKNOWN

11. **WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?** 5/26/20 ☐ N/A

12. **PROPERTY OWNER:**

NAME: Victor Alfonso Ramirez Solis, Cristina Angelica Echevarria
ADDRESS: 6908 Daisybee Court
CITY: Charlotte
STATE: NC ZIP: 28216
WORK PHONE: _____
MOBILE PHONE (704) 662-2743 K Alondra
FAX: _____
E-MAIL: AlondrA.Ramirez@remax.net / Eric D'Aintolo (704) 858-2778

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

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

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 980-314-1680, FAX: 704-336-6894
Email: Wellreg@MecklenburgCountyNC.gov

Revised on: 4/20/17

14. SEPTIC SYSTEM PERMIT APPLICATION:

If the information in this application is falsified, changed, or the site is altered, then the Improvement Permit and Authorization to Construct shall become invalid. I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed. The permit is valid for either sixty (60) months or is non-expiring depending upon the documentation submitted: complete site plan = 60 months, complete plat = non-expiring.

_____ (Initial here for septic system applications)

15. WELL PERMIT APPLICATION:

If the information in this application is falsified, changed, or the site is altered, then the Well Permit shall become invalid. I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed. The permit is valid for a period of twelve (12) months from the date of issuance.

_____ (Initial here for well applications)

16. APPLICATION SIGNATURE SECTION:

ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. A proper signature is required in order to process your application. Please review the application carefully and sign in the space provided below. A PROPOSED PLOT PLAN is required to be submitted with each application.

_____ 3.3.23

Property Owner's or Owner's Legal Representative Signature — Date

---

OFFICE USE ONLY

O SURVEY PLAT TO SCALE SUBMITTED O SCALED SITE PLAN SUBMITTED O UN-SCALED SITE PLAN SUBMITTED

SEPTIC APPLICATION FEE RECEIVED: $ _____ DATE FEE RECEIVED: _____

WELL APPLICATION FEE RECEIVED: $ _____ DATE FEE RECEIVED: _____

APPLICATION PROCESSED BY: _____

GWS FILE NUMBER ASSIGNED: _____

APPLICATION ID NUMBER ASSIGNED: _____

COMMENTS:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 980-314-1680, FAX: 704-336-6894
Email: Wellreg@MecklenburgCountyNC.gov

Revised on: 4/20/17

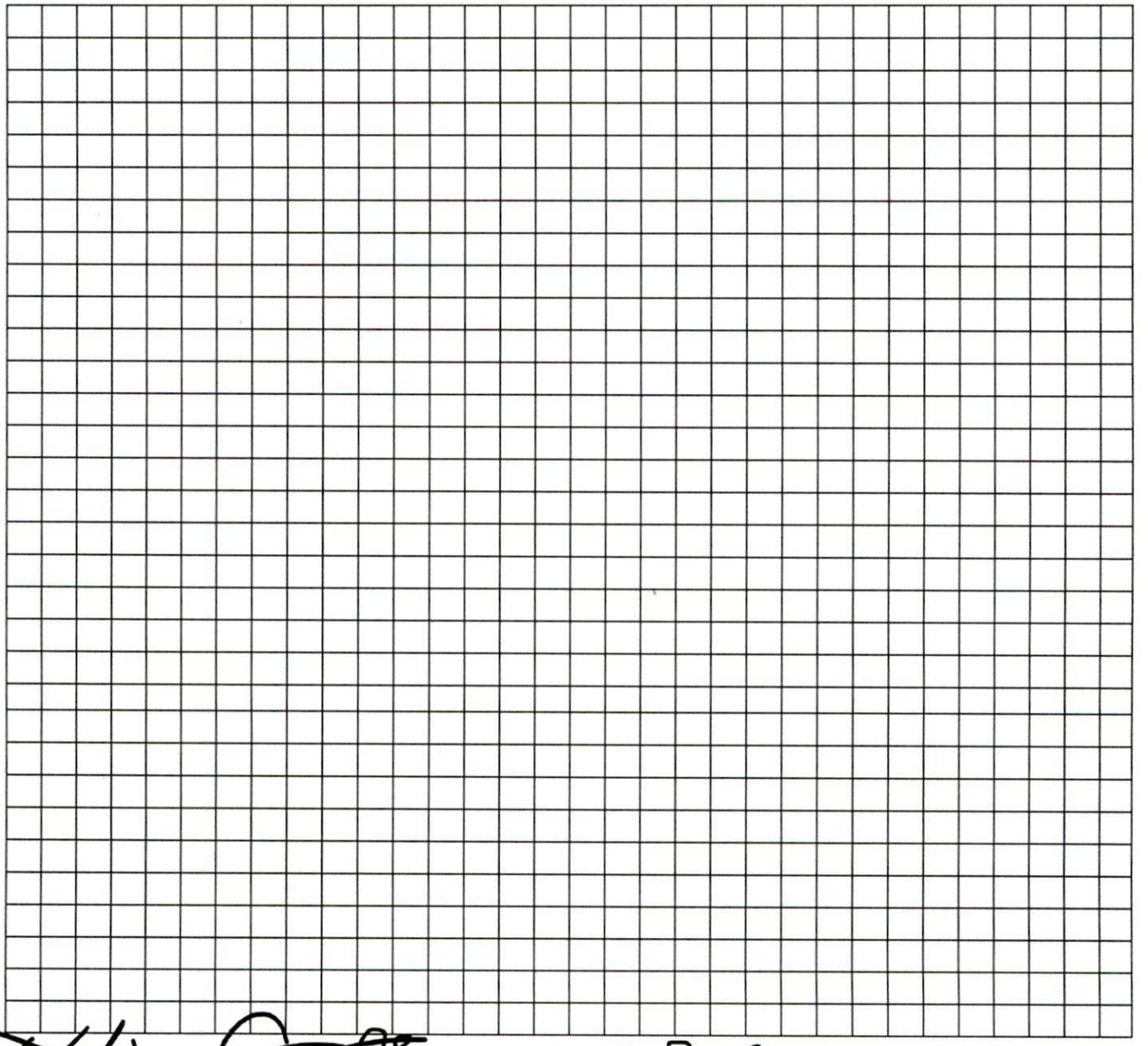
File #: _____

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: _____ Tax Parcel #: _____

Subdivision Name: _____ Lot #: _____



Property Owner's or Owner's Legal Representative Signature

3.3.23
Date

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 980-314-1680, FAX: 704-336-6894
Email: Wellreg@MecklenburgCountyNC.gov

Revised on: 4/20/17

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	03/07/23	**Amount:**	250.00
Receipt #:	141438	**Tendered:**	250.00
Check / Auth #:	VISA 01295D	**Returned:**	0.00
Received By:	GALLOSE		

Account Information

Account #: 200000
Contractor: D'AIUTOLO ERIC
Attn: 11737 EVERETT KEITH RD
Address:
Address:
City/State/Zip: ,

Item	Description	Permit#	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 11737 EVERETT KEITH RD	11623B	1	250.00	250.00

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
305.00					

Payment Receipt

Mecklenburg County

Environmental Health
3205 Freedom Drive, Suite 8000
Charlotte, NC 28208
Phone: 980-314-1651

Bill To:

ERIC D'AIUTOLO

Single Payment

Transaction Date: 03/07/2023 10:07 AM Pacific Time
Pay Method: VISA **********4318
Approval #: 01295D
Trace Number: 2ffee462-3c17-465f-a7d9-f20f51a039fd
Amount: $250.00

Payment Amount: $250.00

Total: $250.00

Thank you for your payment.

PIEDMONT
ENVIRONMENTAL
ASSOCIATES, P.A.

July 7, 2023

Project # 4482

SL 2022-11 SB 372

Client:

Michelle D'Aiutolo

Site:

11737 Everett Keith Road

Mecklenburg County, NC

PIN: 01932102

Prepared by:

Eric Bailey

NC Licensed Soil Scientist # 1305

NC Onsite Wastewater Evaluator #10026E

216 S. Swing Rd, Suite 1, Greensboro, NC 27409

Table of Contents:

Documents	
Owner Statement	1
Parameters and Conditions	2
Disclaimer	3
Setbacks	4
IP-CA Fillable Form GS	5-8
130A-335 Soil Map/Site Plan	9-10
Soil Profile Descriptions	11
System Specifications	12-13

PIEDMONT
ENVIRONMENTAL
ASSOCIATES, P.A.

7/7/2023 Project # 4482

Mecklenberg County Env. Health Department
Attn: Onsite Supervisor
3205 Freedom Drive, Suite 8000
Charlotte, NC 28208

To whom it may concern,

In accordance with Session Law 2022-11 (S372) Section 5.(a), this statement is submitted respectfully to satisfy signed and dated statement requirement from the property owner or owner's legal representative:

"The LSS evaluation attached to this application is to be used to issue an Improvement Permit in accordance with G.S. 130A-335(a2) and (a3)."

"The plans or evaluations attached to this application are to be used to issue a Construction Authorization in accordance with G.S. 130A-335(a2), (a5) and (a6)."

Sincerely,

Michelle D'Aiutolo

216 S. Swing Rd., Suite 1 Greensboro, NC 27409 (336) 870-7096

Permit Parameters and Conditions

- Design flow with residential systems utilizes the number of bedrooms and assumes no more than two residents per bedroom at 60 gallons per resident or 120 gallons per bedroom. This is how the design flow of gallons per day is calculated. The wastewater system is designed to handle a maximum flow of gallons per day. This flow should not be maintained for any sustained length of time or oversaturation can occur in the trenches. An average daily water usage of 50% is recommended for peak performance.
- No garbage disposals should be added to the wastewater stream.
- Water softener waste should not be added to the wastewater stream.
- Fats, oils and greases or FOG should not be added to the wastewater stream and can cause premature failure. Dispose of fats, oils, greases and garbage properly in household waste.
- There should be no traffic over the wastewater system area.
- Piedmont Environmental recommends a preconstruction conference prior to any installation to ensure that the system is placed in the correct area once the site is cleared of vegetation.
- Please note that mechanical clearing that is done in wet conditions or done by someone not following best management practices can render an otherwise usable site unsuitable.
- Piedmont Environmental Associates, PA highly recommends using a reputable septic system installer that is licensed in North Carolina to perform or oversee any clearing.
- All installation work shall be performed by a licensed Wastewater System Installer
- Do not install during wet conditions
- Pump tank every three years all record shall be kept
- Landscape promptly to obtain a good grass cover to prevent erosion over new part of system
- All setbacks listed in this packet
- All tanks are 1500 gallons
- Serial distribution on distal ends
- All dams shall have the last 3 inches of earth removed with a shovel

Disclaimer

This report discusses the general location of potentially usable soils for on-site wastewater disposal and the soil and site limitations on the property that exists at the time of the evaluation. Piedmont Environmental Associates, PA ("Piedmont") provides professional consulting specializing in the practice of soil science and wastewater management. Piedmont is therefore hired for its professional opinion regarding these matters. This report is being prepared as part of a packet to obtain an improvement permit SL2022-11 and GS 130A-335 and GS 130A-336. Piedmont Environmental Associates provides no warranty either written or implied regarding the lifespan of any type of septic system. Piedmont Environmental Associates utilizes accepted soil science practices and assigns LTAR's and proposes trench depths based on field observation, law, rule, published data and accepted practice of the profession. Piedmont Environmental Associates however cannot guarantee the life span of any type of septic system component, trench media, pretreatment device, distribution device, distribution method, or installation method as there are simply too many variables that are not within the control of Piedmont Environmental Associates.

If you have any further questions, please feel free to call 336-596-7585. Thank you for the opportunity to serve.

Sincerely,





Eric Bailey
NC Licensed Soil Scientist
NC Licensed Onsite Wastewater Evaluator
Piedmont Environmental Associates, PA

15A NCAC 18A .1950 LOCATION OF SANITARY SEWAGE SYSTEMS

(a) Every sanitary sewage treatment and disposal system shall be located at least the minimum horizontal distance from the following:

(1) Any private water supply source, including any well or spring 100 feet;
(2) Any public water supply source 100 feet;
(3) Streams classified as WS-I 100 feet;
(4) Waters classified as S.A. 100 feet, from mean high water mark;
(5) Other coastal waters 50 feet, from mean high water mark;
(6) Any other stream, canal, marsh, or other surface waters 50 feet;
(7) Any Class I or Class II reservoir 100 feet, from normal pool elevation;
(8) Any permanent storm water retention pond 50 feet, from flood pool elevation;
(9) Any other lake or pond 50 feet, from normal pool elevation;
(10) Any building foundation 5 feet;
(11) Any basement 15 feet;
(12) Any property line 10 feet;
(13) Top of slope of embankments or cuts of 2 feet or more vertical height 15 feet;
(14) Any water line 10 feet;
(15) Drainage Systems:
(A) Interceptor drains, foundation drains, and storm water diversions
(i) upslope 10 feet,
(ii) sideslope 15 feet, and
(iii) downslope 25 feet;
(B) Groundwater lowering ditches and devices 25 feet;
(16) Any swimming pool 15 feet;
(17) Any other nitrification field (except repair area) 20 feet;

(b) Ground absorption sewage treatment and disposal systems may be located closer than 100 feet from a private water supply, except springs and uncased wells located downslope and used as a source of drinking water, for repairs, space limitations, and other site-planning considerations but shall be located the maximum feasible distance and in no case less than 50 feet.

(c) Nitrification fields and repair areas shall not be located under paved areas or areas subject to vehicular traffic. If effluent is to be conveyed under areas subject to vehicular traffic, ductile iron or its equivalent pipe shall be used. However, pipe specified in Rule .1955 (e) may be used if a minimum of 30 inches of compacted cover is provided over the pipe.

(d) In addition to the requirements of Paragraph (a) of this Rule, sites to be used for subsurface disposal for design units with flows over 3,000 gallons per day, will require more stringent setback requirements.

County: Mecklenburg

IMPROVEMENT PERMIT FOR G.S. 130A-335(a2)/SL2022-11

PIN/Lot Identifier: 01932102

Issued To: Michelle D'Aiutolo

Property Location: 11737 Everett Keith Road

Subdivision: _____ Lot #: _____ Block: _____ Section: _____

LSS Report Provided: Yes ☑ No ☐

If yes, name and license number of LSS: Eric Bailey #1305

New ☑ Repair ☐ Expansion ☐ System Relocation ☐

Proposed Structure: Single family dwelling

Proposed Wastewater System Type: IQ4 Chamber (Initial) PPBPS (Repair)

Fill System: ☐ Yes ☑ No If yes, specify: ☐ New ☐ Existing (when adding more than 6 inches of fill to system area please provide a fill plan)

Proposed Design Daily Flow: 480 GPD Proposed LTAR (Initial): 0.25 Proposed LTAR (Repair): 0.25

Design Wastewater Strength: ☑ domestic ☐ high strength ☐ industrial process

Number of bedrooms: 4 Number of Occupants: 8 max Other: _____

Pump Required: ☑ Yes ☐ No ☐ May be required based upon final location and elevations of facilities

Artificial Drainage Required: ☐ Yes ☑ No If yes, please specify details: _____

Type of Water Supply: ☑ Private well ☐ Public well ☐ Municipal Supply ☐ Spring ☐ Other: _____

Drainfield location meets requirements of Rule .1945: Yes ☑ No ☐

Drainfield location meets requirements of Rule .1950: Yes ☑ No ☐

Permit valid for: ☑ Five years [site plan submitted pursuant to GS 130A-334(13a)] ☐ No expiration [plat submitted pursuant to GS 130A-334(7a)]

Permit conditions:

See the attached documents.

Licensed Soil Scientist Print Name: Eric Bailey

Licensed Soil Scientist Signature: Eric Bailey Date: 7/14/23

The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2).

See attached site sketch

County: Mecklenburg

This Section for Local Health Department Use Only

Initial submittal received: 8/17/23 (Date) by KSG (Initials)

Permit Number: 30013698

G.S. 130A-335(a4) states the following: *'If a local health department fails to act on an application for an improvement permit submitted pursuant to subsection (a3) of the section within 10 business days of receipt of a complete application, the local health department shall issue the improvement permit.'*

In accordance with G.S. 130A-335(a3) the improvement permit application is:

☐ Incomplete (If box is checked, information in this section is required.)

The following items are missing:

_____

_____

Copies of this were sent to the LSS and the Owner on _____ (Date)

State Authorized Agent: _____ Date: _____

☐ Denied (See attached report.)

Copies of this were sent to the LSS and the Owner on _____ (Date)

State Authorized Agent: _____ Date: _____

☒ Complete

State Authorized Agent: Kim Garnett Date of Issuance: 8/17/23

This Improvement Permit is issued pursuant to G.S. 130A-335 (a2), (a3), and (a4) using the signed and sealed LSS/LG evaluation(s) attached here. The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes, or if information submitted in the application was falsified, inaccurate or misleading. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit. The location and identification of all property lines, easements, water lines, and other appropriate utilities shall be the responsibility of the owner.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to evaluations, submittals, or actions from a licensed soil scientist or licensed geologist pursuant to GS 130A-335(a2).

Improvement Permit Expiration Date: 8/17/28

See attached site sketch

County: Mecklenburg

CONSTRUCTION AUTHORIZATION FOR G.S. 130A-335(a2)/SL2022-11

PIN/Lot Identifier: 01932102

Issued To: Michelle D'Aiutolo

Property Location: 11737 Everett Keith Road

AOWE/PE Plans/Evaluations Provided: Yes ☑ No ☐ If yes, name and license number of AOWE/PE: Eric Bailey #10026E

Facility Type: Single family dwelling

☑ New ☐ Expansion ☐ Repair ☐ System Relocation

Basement? ☑ Yes ☐ No Basement Fixtures? ☑ Yes ☐ No

Type of Wastewater System** IQ4 Chamber (Initial) PPBPS (Repair)

Design Daily Flow: 480 GPD Wastewater Strength: ☑ domestic ☐ high strength ☐ industrial process

Session Law 2014-120 Section 53, Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies? ☐ Yes ☑ No

Installation Requirements/Conditions

Septic Tank Size: 1500 gallons Total Trench/Bed Length: 483 feet Trench/Bed Spacing: 9 feet on center

Drainfield square footage: 1449 Trench/Bed Width: 36 inches LTAR: 0.25 gpd/ft²

Soil Cover: 4" cap inches Slope Adjusted Maximum Trench/Bed Depth: 14 inches

Aggregate Depth: n/a inches above pipe n/a inches below pipe n/a inches total

Pump Tank Size (if applicable): 1500 gallons Requires more than 1 pump? ☐ Yes ☑ No

Pump Requirements: 28.0 ft. TDH vs. 21 GPM Grease Trap Size (if applicable): _____ gallons

Distribution Method: ☑ Serial ☐ D-Box or Parallel ☐ Pressure Manifold(s) ☐ LPP ☐ Other: _____

Artificial Drainage Required: Yes ☐ No ☑ If yes, please specify details: _____

Legal Agreements *(If the answer is "Yes" to any type of legal agreements, please attach a copy of the agreement.)*

Multi-party Agreement Required [.1937(h)]: ☐ Yes ☑ No

Easement, Right-of-Way, or Encroachment Agreement Required [.1938(j)]: ☐ Yes ☑ No

Declaration of Restrictive Covenants: ☐ Yes ☑ No

****If applicable:**

I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.

Owner/Legal Representative Print Name: _____

Owner/Legal Representative Signature: _____ Date: _____

Pre-Construction Conference Required: Yes ☑ No ☐

Conditions: See the attached documents.

The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

AOWE/PE Print Name: Eric Bailey

AOWE/PE Signature: Eric Bailey Date: 7/14/23

This AOWE/PE submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a5).

See attached site sketch

County: Mecklenburg

This Section for Local Health Department Use Only

Initial submittal received: 8|17|23 (Date) by KS6 (Initials)

Permit Number: 30013698

G.S. 130A-335(a6) states the following: *'If a local health department fails to act on an application for a construction authorization submitted pursuant to subsection (a5) of the section within 10 business days of receipt of a complete application, the local health department shall issue the construction authorization.'*

In accordance with G.S. 130A-335(a5) the construction authorization application is:

☐ Incomplete (If box is checked, information in this section is required.)

The following items are missing: _____

_____

Copies of this were sent to the AOWE/PE and the Owner on _____ (Date)

State Authorized Agent: _____ Date: _____

☐ Denied (See attached report.)

Copies of this were sent to the AOWE/PE and the Owner on _____ (Date)

State Authorized Agent: _____ Date: _____

☑ Complete

State Authorized Agent: Kim Stamey Date of Issuance: 8|17|23

This Construction Authorization is issued pursuant to G.S. 130A-335(a2), (a5), and (a6) using the signed and sealed plans or evaluations attached here. This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes, or if information submitted in the application was falsified, inaccurate or misleading. The Construction Authorization shall not be affected by a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. The location and identification of all property lines, easements, water lines, and other appropriate utilities shall be the responsibility of the owner. Final landscaping shall be constructed to divert water and establish vegetative cover.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to plans, evaluations, preconstruction conference findings, submittals, or actions from a person licensed pursuant to Chapter 89C of the General Statutes as a licensed engineer or a person certified pursuant to Article 5 of Chapter 90A of the General Statutes as an Authorized On-Site Wastewater Evaluator in GS 130A-335(a2), (a5), and (a7). The Department, the Department's authorized agents, and the local health departments shall be responsible and bear liability for their actions and evaluations and other obligations under State law or rule, including the issuance of the operations permit pursuant to GS 130A-337.

Construction Authorization Expiration Date: 8|17|28

See attached site sketch

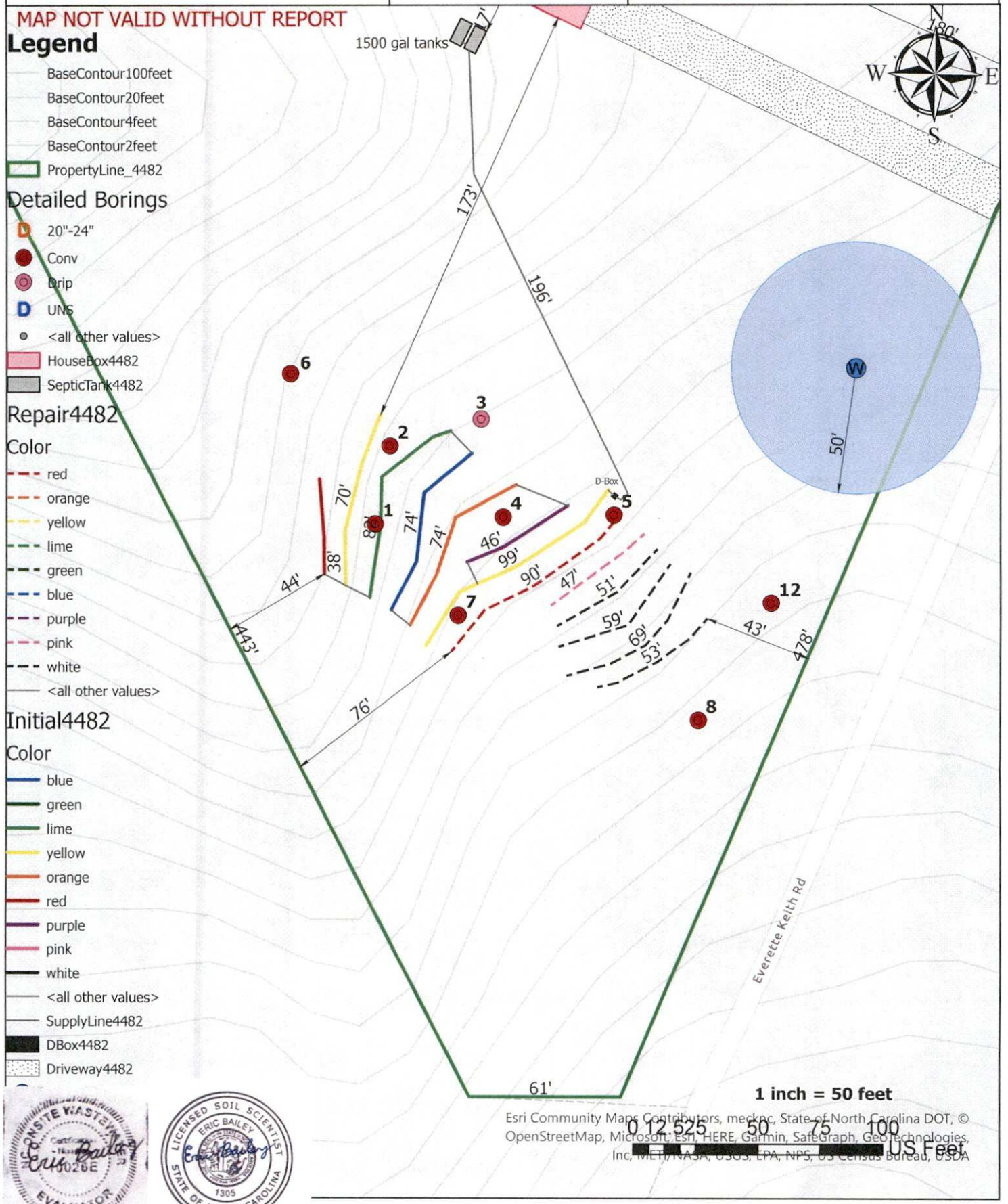
PIEDMONT ENVIRONMENTAL ASSOCIATES, P.A.

Layout Diagram/Site Plan - 11737 Everett Keith Rd.

216 S. Swing Rd. Suite 1
Greensboro, NC 27409
piedmontsoil.com

Job# 4482
Date: 7/12/2023
Client: Michelle D'Aiutolo
County: Mecklenberg

MAP NOT VALID WITHOUT REPORT



Legend

- BaseContour100feet
- BaseContour20feet
- BaseContour4feet
- BaseContour2feet
- PropertyLine_4482

Detailed Borings

- 20"-24"
- Conv
- Drip
- UNS
- <all other values>
- HouseBox4482
- SepticTank4482

Repair4482

Color

- red
- orange
- yellow
- lime
- green
- blue
- purple
- pink
- white
- <all other values>

Initial4482

Color

- blue
- green
- lime
- yellow
- orange
- red
- purple
- pink
- white
- <all other values>
- SupplyLine4482
- DBox4482
- Driveway4482

1 inch = 50 feet

0 12.525 50 75 100 US Feet

Esri Community Maps Contributors, meckpc, State of North Carolina DOT, © OpenStreetMap, Microsoft, Esri, HERE, Garmin, SafeGraph, GeoTechnologies, Inc, METI/NASA, USGS, EPA, NPS, US Census Bureau, USDA

ONSITE WASTEWATER EVALUATOR

LICENSED SOIL SCIENTIST ERIC BAILEY 1305 STATE OF NORTH CAROLINA

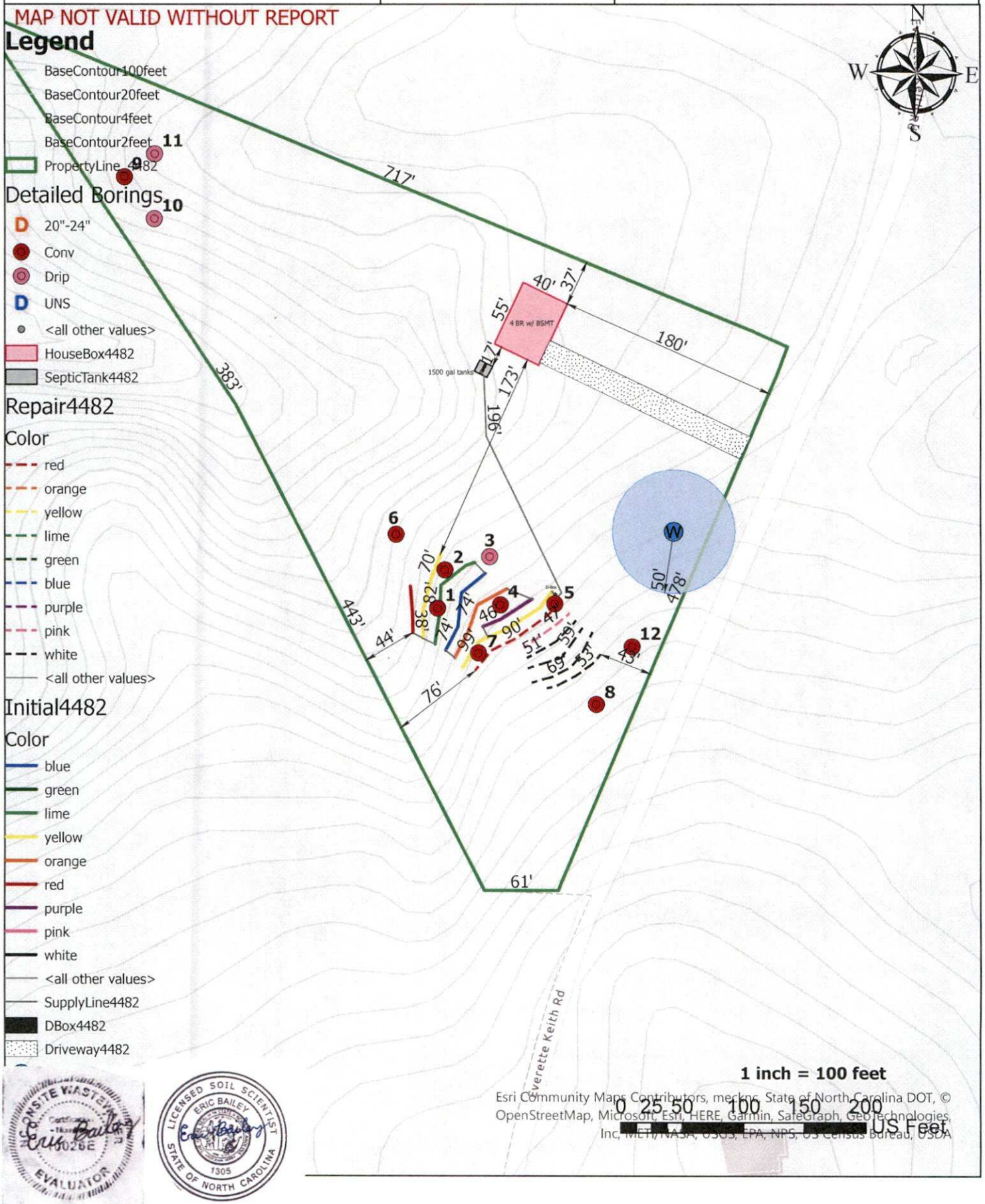
PIEDMONT ENVIRONMENTAL ASSOCIATES, P.A.

Layout Diagram/Site Plan - 11737 Everett Keith Rd.

216 S. Swing Rd. Suite 1
Greensboro, NC 27409
piedmontsoil.com

Job# 4482
Date: 7/12/2023
Client: Michelle D'Aiutolo
County: Mecklenberg

MAP NOT VALID WITHOUT REPORT



Client: Michelle D'Aiutolo
Lot Number: -
Parcel#: 1932102
DATE: 7/7/2023
LSS: Eric Bailey
Eval Method: Auger
Facility/Flow: 4BR/ 480 GPD

Site Classification: PS
Initial System: IQ4 Chamber
Initial System LTAR: 0.25
Repair System: PPBPS
Repair System LTAR: 0.25
Others Present: -
Water Supply: Municipal

PIEDMONT ENVIRONMENTAL ASSOCIATES, P.A.

Number	UsableDep	LTAR	Boring Type	Horizon1	Horizon2	Horizon3	Landscape	Slope
1	45	0.3	Conv	0-6 scl wfgr ss sp fr se	6-29 c mfsbk s p fi se	29-48 cl wfsbk ss sp se	ls	8
2	36	0.3	Conv	0-7 scl wfgr ss sp fr se	7-39 c mfsbk s p fi se		ls	8
3	19	0.1	Drip	0-6 scl wfgr	6-19 c mfsbk s p se		ls	8
4	26	0.25	Conv	0-6 scl wfgr ss sp fr se	6-29 c mfsbk s p fi se		ls	8
5	27	0.25	Conv	0-7 scl wfgr ss sp fr se	7-16 c wfsbk s p fi se	16-30 scl wfgr ss sp se	ls	8
6	45	0.275	Conv	0-5 scl wfgr ss sp fr se	5-26 c wfsbk s p fi se	26-48 scl wfgr ss sp se	ls	8
7	45	0.3	Conv	0-6 scl wfgr ss sp fr se	6-31 c mfsbk s p fi se	31-48 cl wfsbk ss sp se	ls	8
8	45	0.3	Conv	0-7 scl wfg ss sp fr sexp	7-27 c mfsbk s p fi sexp	27-48 scl wfsbk ss sp fr sexp	ls	8
9	26	0.25	Conv	0-8 scl wfgr ss sp fr se	8-29 c wfsbk s p fi se	massive	ls	8
10	20	0.1	Drip	0-6 scl wfgr	6-24 c wfsbk s p fi se	24+ 10yr 7/2	ls	10
11	21	0.1	Drip	0-6 scl wfgr	6-25 c wfsbk s p fi se		ls	10
12	45	0.3	Conv	0-7 scl wfg ss sp fr sexp	7-27 c mfsbk s p fi sexp	27-48 scl wfsbk ss sp fr sexp	ls	8

Notes: Soil Wetness - Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - Record Munsell color chip designation.
Classification - S - Suitable, PS - Provisionally Suitable, U - Unsuitable
LTAR - Long Term Acceptance Rate
Landscape Position: SU - summit, SH - shoulder, BS - backslope, FS - footslope, TS - toeslope, SS - sideslope, HS - headslope
Mineralogy: SE - slightly expansive, EXP - expansive

Septic System Layout Specifications

11737 Everett Keith Rd, Davidson County, NC

Piedmont Environmental Associates Job # 4482

Layout for a 4-BR home

LINE #	FLAG COLOR		DESIGN LINE LENGTH (ft)
TBM			
INSTR. 1			
1	**yellow**		**99**
2	**purple**		**46**
3	**orange**		**74**
4	**blue**		**74**
5	**lime**		**82**
6	**yellow**		**70**
7	**red**		**38**
8	phantom		53
9	phantom		69
10	phantom		59
11	phantom		51
12	pink		47
13	red		90
		Total:	**852**

	DESIGN LINE LENGTH (ft)	SOIL LTAR GPD/FT^2	SYSTEM TYPE	DISTRIBUTION MEDIA	DISTRIBUTION METHOD	DESIGN FLOW (GPD)
System	**483**	**0.25**	**Accepted**	**IQ4 Chamber**	**Pump to serial**	**480**
Repair	369	0.25	Graveless	PPBPS	Pump. to serial	480

Notes:

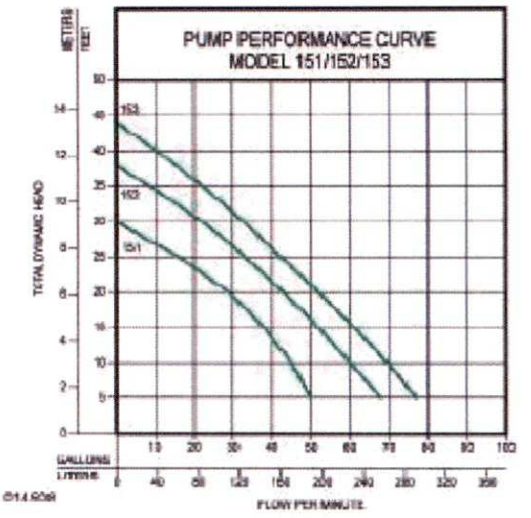
**All measures in feet.

**Nitrification lines are demonstrated on contour via colored pin flags.

**Soil evaluated by private LSS

Pump Sizing Sheet, Pump to Serial Distribution

Site Information		
Bedrooms:	4	
LTAR:	0.25	
Daily Flow (gpd):	480	
25% Reduction?	Yes	
Trench Length (ft):	483	
Septic Tank Size (gal):	1000	
Pump Tank Size (gal):	1000	
Supply Line Length (ft):	196	
Supply Line Dia. (in):	2	
Total Design Flow:	480	
Total Drainfield Length:	483	
4" Pipe:	0.65079	
Total Drainfield Vol.:	314.33	
Percent of Dose Vol.:	0.66	(from .1900 rules)
Dosing Vol. (gal):	207.5	
Pump Tank (gal/in):	21.0	(average)
Drawdown (in):	9.9	
Ground Elev. at Pump Tank (ft):	800	
Pump Tank Install Depth (ft):	1	
Pump Tank Elevation (ft):	799	
Pump Elev. Difference (ft):	5	(typical configuration)
Pump Elev. (ft):	794	
Elev. of Highest Drainline (ft):	819	
Elev. Head (ft):	**25.0**	
Friction Head (ft):	**2.99**	
Pressure Head (ft):	**0.0**	
Total Dynamic Head:	**28.0**	
TDH Capacity (ft):	**28.0**	
Flow Capacity (GPM):	**21**	(typical value)
Pump Run (min./dose):	**9.88**	
Recommended Pump:	**Zoeller Model 152**	**or approved equivalent**



Michelone, Jeremy

From: Lori Thorn <lori@piedmontsoil.com>
Sent: Wednesday, August 23, 2023 12:19 PM
To: Michelone, Jeremy
Subject: [External]Fwd: 4482 11737 Everett Keith Rd

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

---------- Forwarded message ---------
From: **Lori Thorn** <lori@piedmontsoil.com>
Date: Wed, Aug 23, 2023 at 12:00 PM
Subject: 4482 11737 Everett Keith Rd
To: <jeremy.michelone@mecknc.gob>

Hi Jeremy,

Our client contacted us about you needing the maximum trench depth for repair area for the following property:

Michelle D'Aiutolo
11737 Everett Keith Road
01932102

Repair area Maximum usuable soil is 45 inches, min trench depth is 28 inches, max trench depth is 33 inches. If you have any questions,please let me know.

Lori
336-870-7096

--
Lori Thorn
Piedmont Environmental Associates, PA
216 S. Swing Rd, Suite 1
Greensboro, NC 27409
(336) 870-7096
www.piedmontsoil.com



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

Sheet: 1 of 3
Property ID: 019-321-02
Lot #: NA
File #: 11623B
AppID: 13698

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Victor Alfonzo Ramirez Solis & Christina Angelica Echevarria
Applicant: owner

Address: 6908 Daisybee, Charlotte, NC 28216
Date Evaluated: 5/5/2023

Proposed Facility: 4 Bedroom House
Design Flow (.1949): 480 GPD
Property Size: 4.43 ac

Location of Site: 11737 Everitt Keith Rd, Huntersville, NC 28078
Property Recorded: Unknown

Water Supply: [ ] Public [X] Individual [X] Well [ ] Spring [ ] Municipal

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	.1941 Consistence Mineralogy	b PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	General Comments	Profile Class & LTAR	Maximum Trench Bottom Depth for 3' Wide Trench Low Side
Pit 1	HS 12%	0 - 4	gr SL	SS SP FR SEXP							
		4 - 13	sbk SCL	SS SP FR SEXP	10YR 7/2	32	NA	NA		US	NA
		13 - 32	sbk SC	S P P FI SEXP	at 17"						
Pit 2	LS 10%	0 - 4	gr CL	SS SP FR SEXP							
		4 - 22	sbk C	S P FI SEXP	10YR 7/2	22	US	NA		US	NA
		22 - 38	mass CL/L Sap	SS SP FI SEXP	at 17"						
Pit 3	LS 6%	0 - 4	Fill	NA							
		4 - 22	abk SCL	SS SP FR SEXP	>32"	22	US	NA	saprolite inclusion 4-22'	US	NA
		22 - 32	Rock/mass L/SCL	SS SP FI/VFI SEXP					Rock is Weathered Rock		
Pit 4	LS 6%	0 - 5	Fill	NA							
		5 - 34	sbk C	S P FI SEXP	10YR 7/2	34	NA	NA		US	NA
					at 22"						
Pit 5	LS 8%	0 - 3	gr L	SS SP FR SEXP							
		3 - 36	abk/sbk C	S P FI SEXP	10YR 7/2	36	NA	NA		PS IV 0.25	19"
					at 33"						
Pit 6	LS 6%	0 - 12	Disturbed CL	SS SP FR SEXP						PS IV	
		12 - 44	sbk C	S P FI SEXP	>44"	44	NA	NA		0.275	30"
Pit 7	LS 6%	0 - 4	Disturbed CL	SS SP FR SEXP						PS IV	
		4 - 26	sbk C	S P FI SEXP	>40"	40	NA	NA		0.25	26"
		26 - 40	sbk CL	SS SP FR SEXP							

Description	Initial System	Repair System
Available Space (.1945)		
System Type(s)		
Site LTAR (gpd/sq ft)	**0.25**	**Drip 0.1**

Other Factors (.1946):

Soil Evaluation By: Jacob Presley, LSS, REHS

Others Present:

Site Classification (.1948):

Site Evaluation By:

Others Present:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
CONTINUED

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	b PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	General Comments	Profile Class & LTAR	Maximum Trench Bottom Depth for 3' Wide Conventional Trench
Pit	LS	0 - 8	Disturbed CL	SS SP FR SEXP						**PS IV**	
8	6%	8 - 26	sbk C	S P FI SEXP	>42"	42	NA	NA		**0.275**	**28"**
		26 - 42	sbk CL	SS SP FR SEXP							
Pit	LS	0 - 4	Disturbed CL	SS SP FR SEXP						**PS IV**	
9	5%	4 - 20	sbk C	S P FI SEXP	>40"	40	NA	NA		**0.25**	**26"**
		20 - 40	sbk CL	SS SP FR SEXP							
Pit	LS	0 - 3	gr SCL	SS SP FR SEXP							
10	8%	3 - 17	sbk SCL	SS SP FR SEXP	>24"	17	US	NA		**US**	**NA**
		17 - 24	mass SCL	SS SP FI/VFI SEXP							
Pit	LS	0 - 3	gr SCL	SS SP FR SEXP							
11	6%	3 - 17	sbk SCL	SS SP FR SEXP	>24"	17	US	NA		**US**	**NA**
		17 - 24	mass SCL	SS SP FI/VFI SEXP							

COMMENTS:

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		mass-Massive
LS-Linear Slope				cr-Crumb
FS-Foot 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		**Structure Prefixes**
FP-Flood Plain		SCL-Sandy Clay Loam		w-weak
D-Drainage Way		SiL-Silt Loam		m-moderate
				s-strong
				f-fine
	IV	SC-Sandy Clay	0.4 - 0.1	m-medium
		SiC-Silty Clay		c-coarse
		C-Clay		

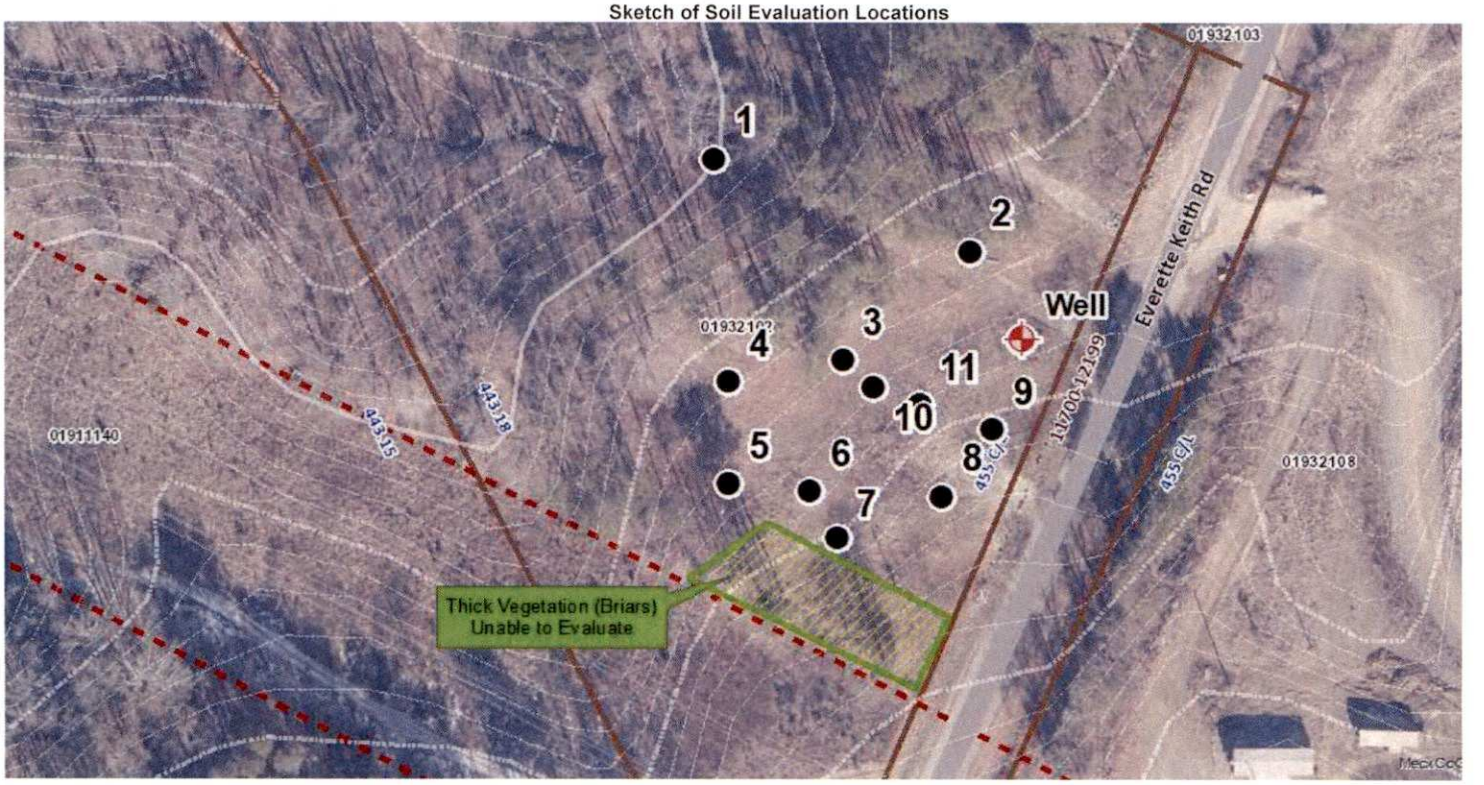
Consistence
Moist
VFR-Very Friable
FR-Friable
FI-Firm
VFI-Very Firm
EFI-Extremely Firm

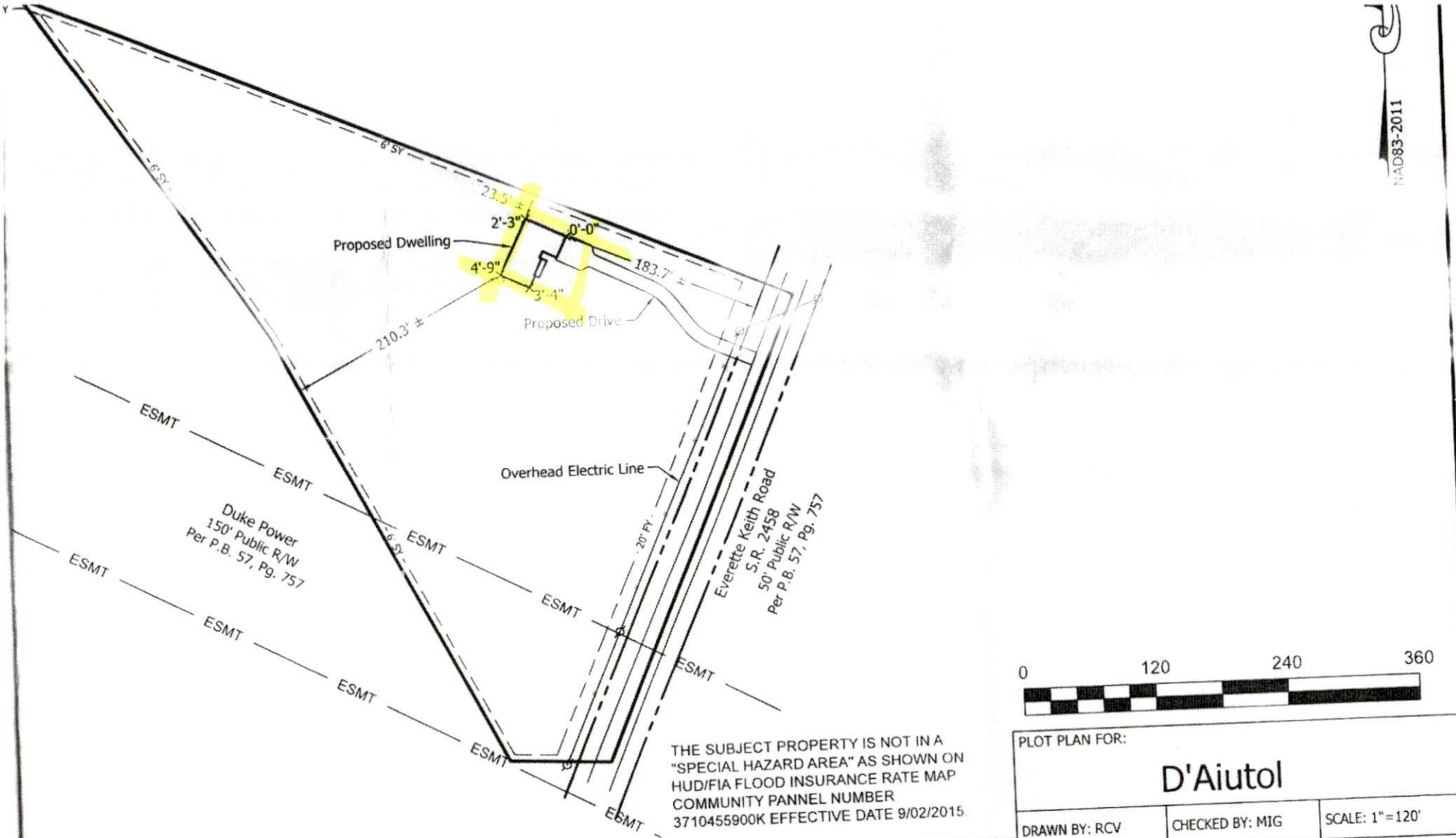
Consistence
Wet
SS-Slightly Sticky
S-Sticky
VS-Very Sticky
NP-Non-Plastic
SP-Slightly Plastic
P-Plastic
VP-Very Plastic

Mineralogy
SEXP-Slightly Expansive
EXP-Expansive

Classification
US-Unsuitable
PS-Provisionally Suitable
S-Suitable
NA-Not Applicable

Sketch of Soil Evaluation Locations





THE SUBJECT PROPERTY IS NOT IN A "SPECIAL HAZARD AREA" AS SHOWN ON HUD/FIA FLOOD INSURANCE RATE MAP COMMUNITY PANNEL NUMBER 3710455900K EFFECTIVE DATE 9/02/2015

JORDAN GRANT
ENGINEERING • SURVEYING • PLANNING
JORDAN GRANT & ASSOCIATES, PLLC
2351 SIMONTON RD, STATESVILLE, NC 28625
MATT.GRANT@JORDAN-GRANT.COM
704-928-7919
FIRM # P-1227

PLOT PLAN FOR:

D'Aiutol

DRAWN BY: RCV	CHECKED BY: MIG	SCALE: 1"=120'
PIN NO: 01932102		
DEED REF: 34827-23		
DATE OF MAP: 3-1-23	SURVEY DATE: 2-21-23	
REVISION:	DRAWING FILE: 20230245_03-01-23	

11737 Everette Keith Rd, Huntersville, NC 28078
Huntersville TWSP - Mecklenburg County - NC

SHEET TITLE

Preliminary Soil Map

SHEET 1 of 1

Everette Keith Rd

Victor Ramirez

Mecklenburg Co. NC

July 2020

Carolina Environmental Consultants, Inc., P.A.

Lexington Office

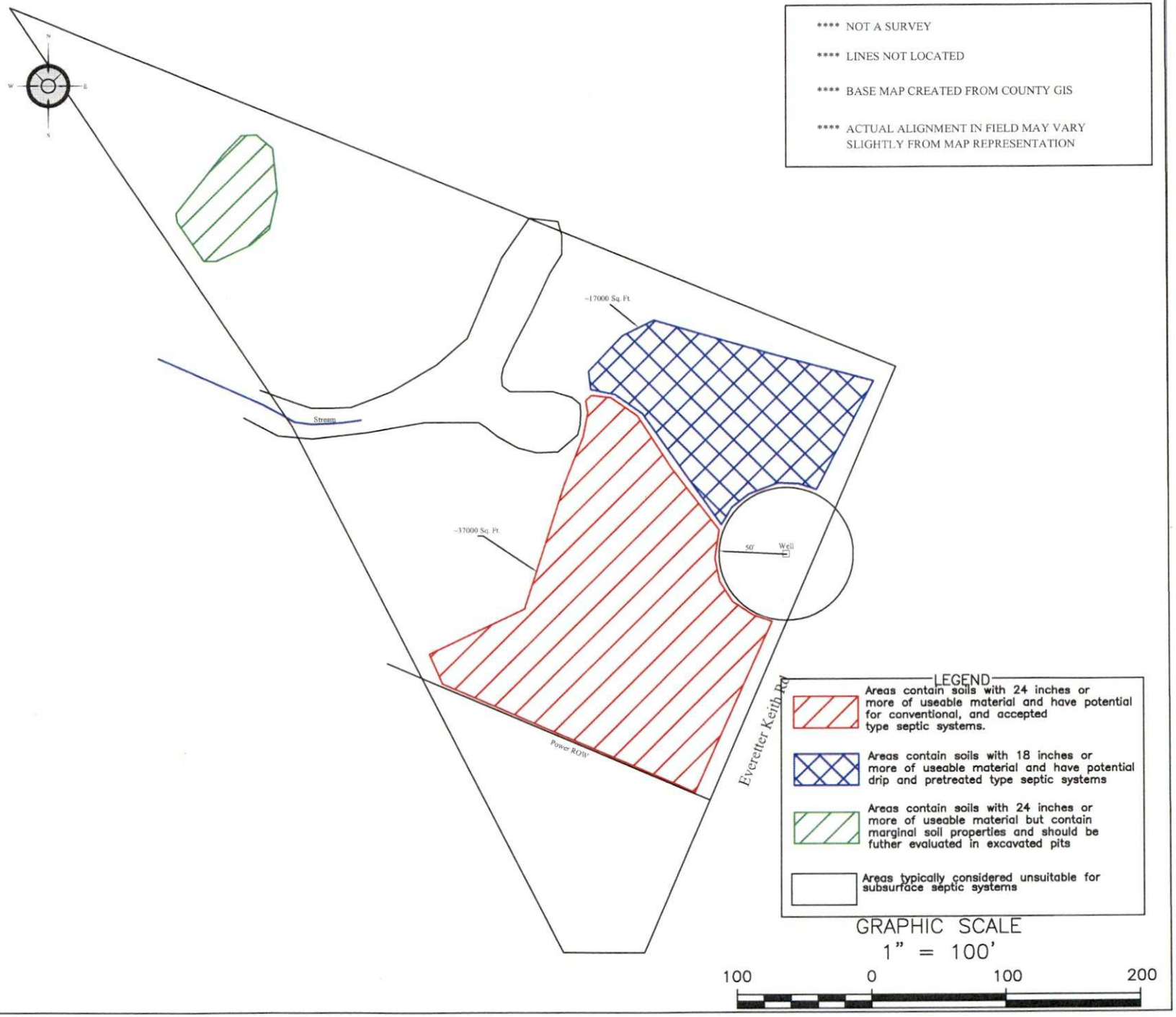
1753 Holloway Church Rd

Lexington, NC 27292

336-596-7585

REVISIONS

JOB NO.
PROJECT MGR. EB
DRAWN EB
FIELD WORK EB GB
SCALE 1" = 100'



MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	08/23/23	**Amount:**	200.00
Receipt #:	144046	**Tendered:**	200.00
Check / Auth #:	VISA 06683D	**Returned:**	0.00
Received By:	ORTIZMP		

Account Information

Account #: 200000
Contractor: D'AIUTOLO, MICHELLE
Attn: 11737 EVERETT KEITH RD
Address:
Address:
City/State/Zip: ,

Item	Description	Permit#	Quantity	Unit Price	Total Price
0734	Septic Construction Authorizat 11737 EVERETT KEITH RD		1	200.00	200.00

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
			555.00		

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	08/23/23	**Amount:**	200.00
Receipt #:	144047	**Tendered:**	200.00
Check / Auth #:	VISA 06683D	**Returned:**	0.00
Received By:	ORTIZMP		

Account Information

Account #: 200000
Contractor: D'AIUTOLO, MICHELLE
Attn: 11737 EVERETT KEITH RD
Address:
Address:
City/State/Zip: ,

Item	Description	Permit#	Quantity	Unit Price	Total Price
0703	Septic Operational Permit 11737 EVERETT KEITH RD		1	200.00	200.00

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
			555.00		

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 for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30013698** GWS File #: **11623B** Tax Parcel #: **019-321-02**

- This 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. 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.

I. This Improvement Permit Shall: Expire in Five (5) Years **Expiration Date (If Applicable):** 8/23/2028

Type of Installation: Residential - New System Lot Number: 0

Structure Type: HOUSE Size (ft^2): 2251 # Bedrooms: 4 Max. Occup.: 8

Building Foundation: Basement With Plumbing Water Supply: Private Well

II. Initial System Type: Pump to Accepted **System Classification:** IIIb

Initial System Specifications:

Design Flow (gpd): 480 LTAR (gpd/ft^2): .25 Septic Tank Size (gal): 1500 Pump Tank Size (gal): 1500

Trench Width (ft): 3 Trench Spacing (ft): 9 Absorption Area (ft^2): 1440 Total Trench Length (ft): 480

Maximum Trench Depth (in): 14 Depth of Media (in): 12 Distribution Device: Distribution Box

III. Repair System Type: PPBPS (pressurized) **System Classification:** IIIe

Repair System Specifications:

Design Flow (gpd): 480 LTAR (gpd/ft^2): .25 Septic Tank Size (gal): 1500 Pump Tank Size (gal): 1500

Trench Width (ft): 2 Trench Spacing (ft): 8 Absorption Area (ft^2): 960 Total Trench Length (ft): ~~480~~ 369'

Maximum Trench Depth (in): 33 Depth of Media (in): N/A Distribution Device: Distribution Box

IV. Permit Conditions/Comments:

(Please See the Following Page for Permit Conditions.)

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment, and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: Kim Garrett Owner/Legal Agent: _____
Print Name

Signature: _____ Signature: _____

Date Issued: 8/23/2023

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 for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30013698** GWS File #: **11623B**

IV. Permit Conditions/Comments:

- This type of septic system requires an inspection once every 5 years by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- Additional soil cover, as specified on the plot plan, required over the drain field must be inspected and approved prior to issuance of an Operation Permit.
- The septic system shall be installed in accordance with the plans submitted by the wastewater system design consultant.
- All components of the septic system must be installed in accordance with the required setbacks listed on the corresponding plot plan.
- All components of the septic system must be located at least 100 ft. (50 ft. minimum) from all private wells.
- Upon completion of the project the system designer shall provide Groundwater & Wastewater Services with a letter certifying that the system was installed in accordance with the approved design.
- This permit is issued pursuant to GS 130a-335(a2)/SL2022-11

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: Kim Garrett

Signature: _____

Date Issued: 8/23/2023

Owner/Legal Agent: _____
Print Name

Signature: _____

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 for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: 30013698 GWS File #: 11623B Tax Parcel #: 019-321-02

- This 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. 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.

I. This Improvement Permit Shall: Expire in Five (5) Years **Expiration Date (If Applicable):** 8/23/2028

Type of Installation: Residential - New System Lot Number: 0

Structure Type: HOUSE Size (ft^2): 2251 # Bedrooms: 4 Max. Occup.: 8

Building Foundation: Basement With Plumbing Water Supply: Private Well

II. Initial System Type: Pump to Accepted **System Classification:** IIIb

Initial System Specifications:

Design Flow (gpd): 480 LTAR (gpd/ft^2): 25 Septic Tank Size (gal): 1500 Pump Tank Size (gal): 1500

Trench Width (ft): 3 Trench Spacing (ft): 9 Absorption Area (ft^2): 1440 Total Trench Length (ft): 480

Maximum Trench Depth (in): 14 Depth of Media (in): 12 Distribution Device: Distribution Box

III. Repair System Type: PPBPS (pressurized) **System Classification:** IIIe

Repair System Specifications:

Design Flow (gpd): 480 LTAR (gpd/ft^2): 25 Septic Tank Size (gal): 1500 Pump Tank Size (gal): 1500

Trench Width (ft): 2 Trench Spacing (ft): 8 Absorption Area (ft^2): 960 Total Trench Length (ft): ~~480~~ 369'

Maximum Trench Depth (in): 33 Depth of Media (in): N/A Distribution Device: Distribution Box

IV. Permit Conditions/Comments:

(Please See the Following Page for Permit Conditions.)

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment, and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: Kim Garrett

Signature:

Date Issued: 8/23/2023

Owner/Legal Agent: Michelle D'Aigfolo
Print Name

Signature:

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 for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30013698** GWS File #: **11623B**

IV. Permit Conditions/Comments:

- This type of septic system requires an inspection once every 5 years by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- Additional soil cover, as specified on the plot plan, required over the drain field must be inspected and approved prior to issuance of an Operation Permit.
- The septic system shall be installed in accordance with the plans submitted by the wastewater system design consultant.
- All components of the septic system must be installed in accordance with the required setbacks listed on the corresponding plot plan.
- All components of the septic system must be located at least 100 ft. (50 ft. minimum) from all private wells.
- Upon completion of the project the system designer shall provide Groundwater & Wastewater Services with a letter certifying that the system was installed in accordance with the approved design.
- This permit is issued pursuant to GS 130a-335(a2)/SL2022-11

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: Kim Garrett

Signature: [signature]

Date Issued: 8/23/2023

Owner/Legal Agent: Michelle D'Aiutolo
Print Name

Signature: [signature]

FEE: 200.00

DATE: 8/24/2023

CONSTRUCTION AUTHORIZATION FOR AN ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES

FILE NUMBER: 11623B

PERMIT NUMBER: 30013698

PARCEL NUMBER: 01932102

JOB LOCATION INFORMATION

ADDRESS: 11737 EVERETTE KEITH RD

CITY: HUNTERSVILLE **STATE: NC** **ZIP:** 28078

ISSUED TO: VICTOR A RAMIREZ SOLIS & CRISTINA A ECHEVARRIA

CONSTRUCTION AUTHORIZATION ISSUANCE DATE: 8/24/2023

CONSTRUCTION AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 30013698, 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. A PRE-CONSTRUCTION MEETING MUST BE SECURED PRIOR TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A LICENSED SEPTIC TANK CONTRACTOR WITH THE NORTH CAROLINA ONSITE WASTEWATER CONTRACTOR INSPECTOR CERTIFICATION BOARD.

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 CONSTRUCTION AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. THIS CONSTRUCTION AUTHORIZATION AS PROVIDED IN G.S. 130A-335(f) AND G.S. 130A-336(b) SHALL BE VALID FOR A PERIOD EQUAL TO THE VALIDITY OF THE IMPROVEMENT PERMIT, AND MAY BE ISSUED AT THE SAME TIME THE IMPROVEMENT PERMIT IS ISSUED.

Authorized Agent Signature _____

DocuSign Envelope ID: 7B383034-2CCC-4BA9-9223-61FC896D639E

PART 3: Authorization to Operate (ATO)

Except for date received, the Section below is to be completed by the Owner.

LHD USE ONLY: Initial submittal of request for ATO received: 4/8/24 (Date) by JPM (Initials)

Date of Post-construction Conference: 7

T

The following items are included in this submittal for an Authorization to Operate under an AOWE permit:

1. Signed and sealed copy of the AOWE's report that includes the information in G.S. 130A-336.2(k) — ☐ Yes ☑ No
2. Operation and management program — ☐ Yes ☑ No
3. Fee (as applicable) — ☑ Yes ☐ No
4. Notarized letter documenting Owner's acceptance of the system from the AOWE — ☑ Yes ☐ No
5. On-site Wastewater Contractor name: Christopher Stevens License number: 1761

   Mailing address: 3317 New Salem Rd City: Monroe State: NC Zip: 28110

   Telephone number: 704-201-9849 E-mail Address: mysepticneeds@gmail.com
6. Proof of Errors and Omissions or other appropriate liability insurance for the On-site Wastewater Contractor is attached and includes the name of the insurer, name of the insured, and the effective dates of coverage.
   ☑ Yes ☐ No

Attestation by the Owner for Authorization to Operate

I, Michelle D'Aiutolo (*Print name of Owner*) hereby attest that all items indicated above have been provided to the Mecklenburg County LHD and the system shall meet applicable federal, State, and local laws, regulations, Federal and local ordinances.

DocuSigned by: Michelle D'Aiutolo 0AF9FBA013F4415... (*Signature of Owner*) 4/8/2024 (*Date*)

This section for LHD Use Only.

LHD Review of required information for the ATO

☐ INCOMPLETE

Based upon review of information submitted in the Section above, the following items are missing from the information required for an Authorization to Operate for an AOWE permit: _____.

Copies of this signed form were sent to the AOWE and the Owner on _____ (*Date*) via _____ (*Email, FAX, USPS, Hand-delivered*).

_____ (*Print name of authorized Agent of the LHD*) _____ (*Signature of authorized Agent of the LHD*) _____ (*Date*)

☑ COMPLETE

Based upon review of information submitted in the Section above, this Authorization to Operate is hereby issued in accordance with G.S. 130A-336.2(m).

A copy of this complete NOI/ATO with tracking information was sent to the State on _____ (*Date*) via _____ (*Email, FAX, USPS, Hand-delivered*).

Jeremy Mechlare (*Print name of authorized Agent of the LHD*) Jeremy Mechlare REHS (*Signature of authorized Agent of the LHD*) 4/10/24 (*Date*)

ISSUANCE OF CERTIFICATE OF OCCUPANCY: Once the LHD determines completeness based upon the ATO submission, the owner may apply to the local permitting agency for permanent electrical service to a residence, place of business or place of public assembly pursuant to G.S. 130A-339.

DocuSign Envelope ID: 7B383034-2CCC-4BA9-9223-61FC896D639E

AS BUILT - 11737 Everett Keith Rd.

PIEDMONT ENVIRONMENTAL ASSOCIATES, P.A.
216 S. Swing Rd. Suite 1
Greensboro, NC 27409
piedmontsoil.com

Job# 4482
Date: 4/8/2024
Client: Michelle D'Aiutolo
County: Mecklenberg

MAP NOT VALID WITHOUT REPORT

Legend

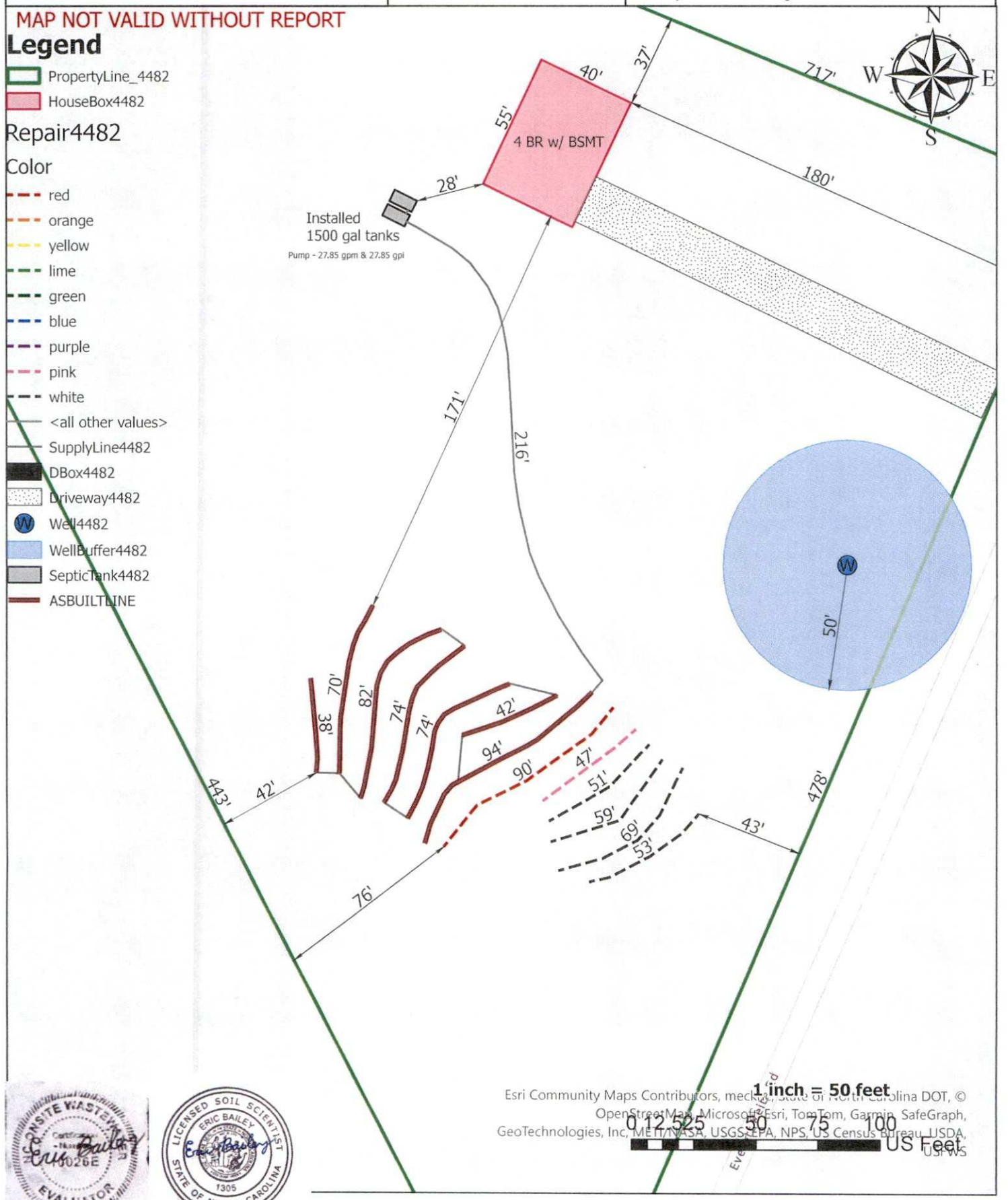
- PropertyLine_4482
- HouseBox4482

Repair4482

Color

- red
- orange
- yellow
- lime
- green
- blue
- purple
- pink
- white
- <all other values>

- SupplyLine4482
- DBox4482
- Driveway4482
- Well4482
- WellBuffer4482
- SepticTank4482
- ASBUILTLINE



ONSITE WASTEWATER Certified Eric Bailey 5026E EVALUATOR

LICENSED SOIL SCIENTIST ERIC BAILEY 1305 STATE OF NORTH CAROLINA

Esri Community Maps Contributors, mecklenburg, State of North Carolina DOT, © OpenStreetMap, Microsoft, Esri, TomTom, Garmin, SafeGraph, GeoTechnologies, Inc, METI/NASA, USGS, EPA, NPS, US Census Bureau, USDA, USFWS

1 inch = 50 feet
0 12.525 50 75 100 US Feet

DocuSign Envelope ID: 7B383034-2CCC-4BA9-9223-61FC896D639E

PIEDMONT ENVIRONMENTAL ASSOCIATES, P.A.

Date: 4/8/2024 Project# 4482

Permit#

Operation Permit Checklist

Site Information

Address: 11737 Everett Keith Rd

Subdivision: na Lot Number na

County: Mecklenburg PIN: 01932102

Number Bedrooms: 4 Daily Design Flow: 480 gpd

System Type: IQ4 Chamber IIIb Installer: _____

Date Installed: _____

Location and Separation Distances: System meets Rule .0601 setback requirements Y ☒ N ☐

Distance to Wells: >50ft Distance from tank to foundation: >15ft

Distance from system to property lines: >10ft -

Supply Line: 2" PVC

Tanks:

Septic Tank Serial Number: STB 964 Pump Tank Serial Number PT 353

Septic Tank Date: 10-23

Septic Tank Size (gal): 1500 Pump Tank Site (gal): 1500

Septic Tank Condition: NEW Pump Tank Condition: NEW

Filter: Plastic Risers: Polylok

System:

Trench Media/Product: IQ4 Chamber (IIIb) Distribution Type: serial

Nitrification Lines: Trench width 36" Trench Spacing 9" Aggregate Depth 14"

Line#	length	depth	fall
1	**94'**	**14**	**L**
2	**42'**	**14**	**L**

DocuSign Envelope ID: 7B383034-2CCC-4BA9-9223-61FC896D639E

3	74'	14	L
4	74'	14	L
5	82'	14	L
6	70'	14	L
7	38'	14	L

Total

Soil Cover: 4 INCH CAP Trench Conditions: NEW

Stepdowns:

Constructed of minimum 2 linear feet of undisturbed soil Y ☒ N ☐

Proper rise over stepdowns Y ☒ N ☐

Constructed height fully utilizes the upstream trench Y ☒ N ☐

Solid (non-perforated) pipe used between stepdowns Y ☒ N ☐

Top of trench outlet 2" below supply pipe outlet invert Y ☒ N ☐

Operation Permit Conditions:

I. Performance: System shall perform in accordance with Rule .1961.

II. Monitoring: As required by Rule .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.

Other: Establish good grass cover as soon as possible. No traffic over drainfield

Subsurface system operator required? Yes _____ NoX

If yes, see attached sheet for additional operation conditions, maintenance and reporting.

IV. Operation: _____

V. Other: _____

1.

DocuSign Envelope ID: BCB5469F-3E4F-41CF-AD8C-558C0D515ED3

PIEDMONT ENVIRONMENTAL ASSOCIATES, P.A.

April 8, 2024 Project # 4482

Mecklenburg County Environmental Health
700 N Tryon St.
Charlotte, NC 28202

To Whom it May Concern,

I, Michelle D'Aiutolo have reviewed the material included within this package and acknowledge that I am aware of the operation procedures and maintenance of the septic system installed at 111737 Everette Keith Rd in Mecklenburg County, NC. I accept the system that has been installed on my property and that I am aware that the system was permitted through the process outlined by G.S. 130A-336.2(l).

Signed DocuSigned by: Michelle D'Aiutolo 9AF3FBA613F4416 Date 4/8/2024

DocuSign Envelope ID: 38C22BDD-6ED9-492E-AD25-F1B9A628B2D6

Date: 4/8/2024

Installer Certification

This letter certifies that Chris Stephens (Installer)

installed a IQ4 Chamber (IIIb) system, installed at

11737 Everett Keith Rd.

The system was installed in conformance with the original construction documents to meet all local and state regulations. The system was installed in February 2024.

Signed DocuSigned by: Chris Stephens C8AA7D467F7A410... Date 4/8/2024

Installer Certification Number: 1761 I

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 6/2/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME: Valerie Leonard	
Younts Insurance Agency Inc 121 N Talbert Blvd Lexington NC 27292	PHONE (A/C, No, Ext): 336-238-1053	FAX (A/C, No): 336-238-1054
	E-MAIL ADDRESS: valerie@yountsinsurance.com	

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Continental Casualty Company	20443
INSURER B : Penn National Mutual Casualty Insurance Company	14990
INSURER C : Ohio Casualty Insurance Company	24074
INSURER D :	
INSURER E :	
INSURER F :	

INSURED PIEDENV-02
Piedmont Environmental Associates, PA
216-1 S. Swing Road
Greensboro NC 27409

COVERAGES **CERTIFICATE NUMBER:** 2140715557 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
B	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO-JECT LOC OTHER:			BP9 0741038	6/1/2023	6/1/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG $	$ 2,000,000 $ 300,000 $ 10,000 $ 2,000,000 $ 4,000,000 $ 4,000,000 $
B	AUTOMOBILE LIABILITY X ANY AUTO OWNED AUTOS ONLY X HIRED AUTOS ONLY X 19 SCHEDULED AUTOS X NON-OWNED AUTOS ONLY			AU90741038	6/1/2023	6/1/2024	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) Medical Payments	$ 1,000,000 $ $ $ $ 2,000
B	X UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION $ 0			UL9 0741038	6/1/2023	6/1/2024	EACH OCCURRENCE AGGREGATE $	$ 1,000,000 $ 1,000,000 $
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		XWO55203240	6/1/2023	6/1/2024	X PER STATUTE OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ 1,000,000 $ 1,000,000 $ 1,000,000
A	Professional Liability			EEH288330253	6/1/2023	6/1/2024	Each Claim Aggregate Deductible	2,000,000 2,000,000 5,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

*****FOR CLIENT PURPOSES ONLY*****

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE
Diana Evans

© 1988-2015 ACORD CORPORATION. All rights reserved.

The ACORD name and logo are registered marks of ACORD

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

Septic System Pre-Construction Meeting Checklist

File # 116233 App# 13698 Tax Parcel# 019-321-02

Property Owner: _____

Job Location Address: 11737 Everette keith

City: Huntersville State: NC Zip Code: 28078

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

   ☑ YES ☐ NO

   Comments: _____

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: Flagged system appears to be unable to be installed at permitted 14" trench bottom, given the topography of the hillside.

*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.**

Matthew Hall
Authorized Agent

2/22/24
Date

Stevens Septic
Others Present

Notified the AOWE that he is responsible for the final inspection.