#13071

18 APR '22 PM 4:50

MECKLENBURG COUNTY
HEALTH DEPARTMENT 113733

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: 031-43-109
STREET ADDRESS: 9534 Lawing School Rd
CITY: Charlotte
STATE: NC **ZIP:** 28214
SUBDIVISION NAME:
LOT #: **LOT SIZE (acres):** 1.56
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: 2,000
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 5
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

8A. RANK: 1 2 3 4

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? ☑ N/A

12. PROPERTY OWNER:

NAME: AMDM Investment (Oscar Agurs)
ADDRESS: PO Box 502
CITY: Harrisburg
STATE: NC ZIP: 28075
WORK PHONE: (704) 408-1374
MOBILE PHONE: (704) 408-1374
FAX:
E-MAIL: oagurs@yahoo.com

13. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:

**Owner's Authorization form is required if legal representative is submitting application*

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

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

Revised on: 03/27/19

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.

OA (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.

[redacted] (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.

Oscar Aguirre — Property Owner's or Owner's Legal Representative Signature

4/18/20 — Date

OFFICE USE ONLY

○ SURVEY PLAT TO SCALE SUBMITTED ○ SCALED SITE PLAN SUBMITTED ○ 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
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208 OFFICE: (980) 314-1680, FAX: 704-336-6894

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: 9534 Lawing School Rd Tax Parcel #: 031-43-109

Subdivision Name: _____ Lot #: _____

Oscar Aguirs
Property Owner's or Owner's Legal Representative Signature

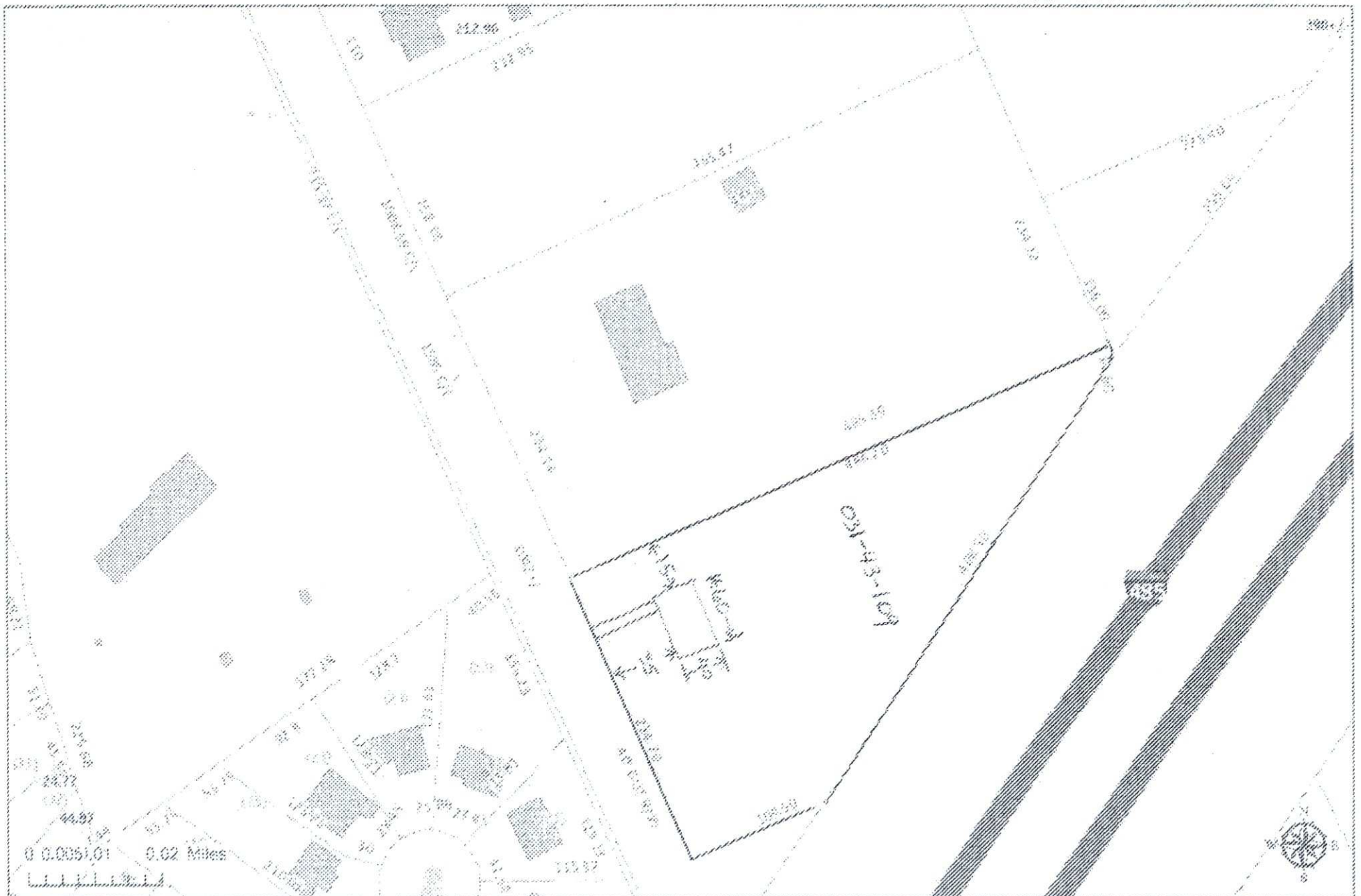
4/18/20
Date

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

Revised on: 03/27/19

Polaris 3G Map – Mecklenburg County, North Carolina
9534 Lawing School Rd Parcel # 031-43-109

Date Printed: 11/26/2021 10:38:57 PM



This map or report is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, planimetric maps, and other public records and data. Users of this map or report are hereby notified that the aforementioned public primary information sources should be consulted for verification. Mecklenburg County and its mapping contributors assume no legal responsibility for the information contained herein.

8-Apr-2022 12:45 Aplus Realty 7044690404 p.5

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	04/19/22	**Amount:**	250.00
Receipt #:	135303	**Tendered:**	250.00
Check / Auth #:	VISA 045313	**Returned:**	0.00
Received By:	CABANLA		

Account Information

Account #: 200000
Contractor: AGURS, OSCAR
Attn:
Address:
Address:
City/State/Zip: ,

Item	Description	Permit#	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 9534 LAWING SCHOOL RD		1	250.00	250.00

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
232.00					

DENR/DEH

ON-SITE WASTEWATER SECTION

Sheet ___

PROPERTY ID #: ___

COUNTY: Cinco de Mayo

SOIL/SITE EVALUATION FOR ON-SITE WASTEWATER SYSTEM

Lawing School

APPLICATION DATE: ___

DATE EVALUATED: ___

OWNER: ___

ADDRESS: ___

PROPERTY SIZE: ___

PROPOSED FACILITY: ___ PROP[illegible] FLOW (1940): ___ PROPERTY RECORDED: ___

LOCATION OF SITE: ___

WATER SUPPLY: ▫ Private ▫ Public ▫ Well ▫ Spring ▫ Other ___ TYPE OF WASTEWATER: ▫ Sewage ▫ Industrial Process ▫ [illegible]

EVALUATION METHOD: ▫ Auger Boring ▫ Pit ▫ Cut

PROFILE NO.	1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS 1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS 1945 SOIL DEPTH	OTHER PROFILE FACTORS 1956 HAPRO CLASS	OTHER PROFILE FACTORS 1944 RESTR. HORIZ.	PROFILE CLASS. & LTAR
1	10-14 EXPC	0-3 3-10 10-42	gr SL sbk scl w/ EXPC incl. saprolite SL		Potential Schroma @ 36"				
2		0-4 4-36	gr SL saprolite		Short lived Perched Schroma @ 28"				
3		0-13 13-18 18-28	sbk SCL sbk C mass SCL	SSPF SVPVFSEXA Sap	Potential Schroma @ 27"				
4		0-5 5-36	[illegible] gr SL sbk C	FSP	Need pit some EXP mixed in				

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		

OTHER FACTORS (.1946): ___

SITE CLASSIFICATION (.1948): ___

EVALUATED BY: ___

OTHER(S) PRESENT: ___

5) 2 chrome @ 13-15
then grinding on Sapphire WR
0-3 gr SC
3-12 soft SCC
12-26 soft C VFL VP 2 chrome 13-25r

6) 0-5 gr SC
5-17 mass EXP C
17 Rock