

12012 PUMP STATION RD

02310127

1/8/2008

duponbj

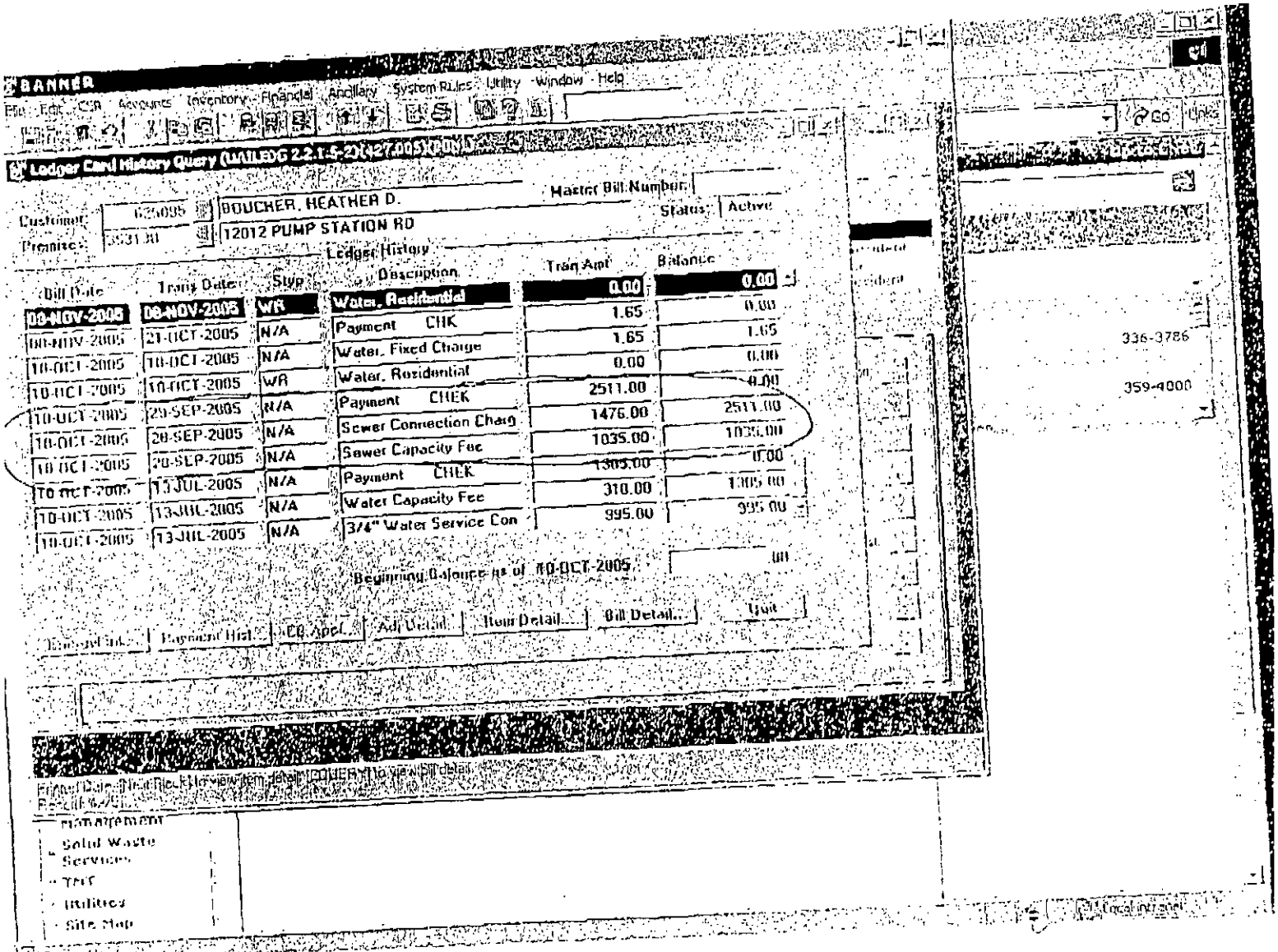
Groundwater and Wastewater Services File Imaging Project
May 2007
Barcode Font = IDAutomationHC39M

file # ~~13~~ 5296B

Attention: Jay
704 336 6894

Re: Heather Boucher
12012 Pump Station Rd
(704) 451-4717

Charlotte Mecklenburg Utilities



CHARLOTTE-MECKLENBURG UTILITIES

7821

DATE: 9-13-05

RECEIVED FROM: Heather D. Boucher 00/100 $ 2511

Two Thousand five hundred eleven dollars

FOR: 12012 Pump Station Rd
tap sewer

Catherine E Pruitt
RECEIVED BY:

CASH ☐

CHECK ☐ 1076

MECKLENBURG COUNTY LAND USE AND ENVIRONMENTAL SERVICES AGENCY
CREDIT/REFUND APPLICATION & ADJUSTMENT FORM

****See back for completion instructions and the Credit/Refund Schedule****

PVQ LUE 000

SECTION I - IF CREDIT OR REFUND *(To Be Completed By Requestor)*

CREDIT ☐

OR

REFUND ☑

1. Property Owner's Name: Heather Boucher 2. Permit Number: _____
3. Address: 9535 Chastain Walk Dr 4. Date Issued: 6/17/06
5. Reason for Request: (✓one) ☑ Plan Change ☑ Not Doing Work ☐ Other (Specify) _____ ☐ Duplicate Permit _____ Duplicate Permit # _____ Date of Duplicate _____
6. Account Name: _____ Account # _____
7. *If Refund*, Check payable to: Heather Boucher (Please Print) 8. Phone 704-451-4717
9. Address: _____ Street _____ City _____ State _____ Zip _____
10. Signature: Jay for Heather Boucher 11. Printed Name Heather Boucher 12. Date: 8/29/06

For Departmental use only - Do not write below this line

SECTION II - IF ADJUSTMENT *(To Be Completed By Employee & Supervisor)*

Incorrect Entry	Correct Entry	Reason	Emp Initials	Date	Superv Initials	Date

SECTION III - INSPECTION COUNT AND PURGING *(To Be Completed By Applicable Core Process)*

	B	E	M	P	F	L
# Of made Inspections						

Purging: ☐B ☐E ☐M ☐P ☐S ☐F ☐L

Initials _____ Date _____

Expired Permit ☐

SECTION IV - CALCULATIONS *(To Be Completed By Applicable Core Process)*

Plan Review? (Y/ N)	Inspection Info	Credit/Refund%	Min Fee? (Y/N)	Permit Fee	Credit/Refund Amount
N %	%	100 %	$ 150.00	$ 150.00	$ 150.00
Y=80%, N=90%	ea. Insp=10%	PR % - Insp %	Initials JKA	Date 8/29/06	Permit Fee X CR% or Min Fee Whichever is greater

SECTION V - VERIFICATION *(To Be Completed By Revenue Collection)*

If Refund, Org/Account	Refund with Credit Balance	If Credit, Trans #	Account #	Initials	Entry Date
	8_03=0 9004=$				
8_03 = 0	Refund Charge on account	88---			

Section VI - APPROVALS *(To Be Completed By Department And Finance Representatives)*

Department Approval: _____ Date _____

Finance Approval: _____ Date _____

_____ Refund from Account #

_____ Check #

Daily Cash Drawer Balancing

Printed On: August 29, 2006 3:27:48PM
Printed By: aidoojk
Page 1

User ID: AIDOOJK, Posting Date: 06/17/05

Customer No.	Description	Permit ID	Comments	Remarks	Amount	Check No / Auth No	Source Code/Loc	Journal Batch Name	Payment Meth Code	User ID
AIDOOJK										
200000	Invoice 35222		16026 SUNSET DRIVE	Improvment Permit App-Re	-200.00	1220	SALES - ENH		CHECK	AIDOOJK
TOTAL FOR PAYMENT METHOD CODE **CHECK**			1 -200.00							
200000	Invoice 35237		12012 PUMP STATION	Auth for Waste Wtr Sys Co	-150.00	015376	SALES - ENH		VISA	AIDOOJK
200000	Invoice 35238		12012 PUMP STATION	Installation/Final Approval	-150.00	015376	SALES - ENH		VISA	AIDOOJK
TOTAL FOR PAYMENT METHOD CODE **VISA**			2 -300.00							
*** Total for User ID AIDOOJK			*3 -500.00*							

VISA JKA

LD 131504

FEE: 300.00 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION** ACS
DATE: 9/17/03 **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: _____ **PERMIT NO:** 5296B

PARCEL NO: 023-101-27

JOB LOCATION ADDRESS: 12012 Pump Station Road

PROPERTY OWNER: Bruce Boucher

BUILDING CONTRACTOR: _____

SUBDIVISION NAME: _____

AUTHORIZATION ISSUED BY: Jenny Mathis R.S. **DATE:** 10/31/03

DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 5296B, 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: DPM ~~Agreement forms on file before Cert Release~~

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.

Kenton Boucher 11/7/03

TURE OF OWNER/OWNER'S REPRESENTATIVE DATE

CONDITIONS OF IMPROVEMENT PERMIT

Permit Number: 5296B

Tax Number: 023-101-27

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: ✓ Yes ___ No ___ Partial Basement

Type Primary Wastewater System
Type (circle one): I II (III) IV V VI

___ Conventional
___ Prefabricated, permeable block panel system
___ Shallow Placed Conventional
___ Low Pressure Pipe
___ Large Diameter Pipe
___ Fill
___ Other
✓ Innovative or Experimental:
___ IWWS-93-1
___ IWWS-93-2
___ IWWS-94-1

.25 Long-term acceptance rate	360 Max gallons/day wastewater flow	1080 Absorption Area (sq ft)	9' Trench spacing (min. on centers)
NO Serviced by private well	1500 Gallon septic tank	360' Total trench length (ft)	24" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
3 Bedrooms in residence	1000 Gallon pump tank	NA Depth of stone	

Any surface waters present: NO Type: Minimum separation distance:

Site modifications required:

Additional Conditions:

Repair Area System Type
Type (circle one): I II (III) IV V VI

___ Conventional
___ Prefabricated, permeable block panel system
___ Shallow Placed Conventional
___ Low Pressure Pipe
___ Large Diameter Pipe
___ Fill
___ Other
✓ Innovative or Experimental:
___ IWWS-93-1
___ IWWS-93-2
___ IWWS-94-1

1080 Absorption Area (Sq ft) 360' Total Trench Length (Ft)	NA Depth of Stone Trench	9' Trench spacing (min. on centers)	24" 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 the 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 effect at the time of issuance of the permit and is subject to the following provisions:

... No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair Approval is granted by this Department.

... This Improvement permit is transferable.

Tommy Mackie R.S. 10/31/03
DEHNR Authorized Agent Date

Owner/Agent Signature 11/7/03
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

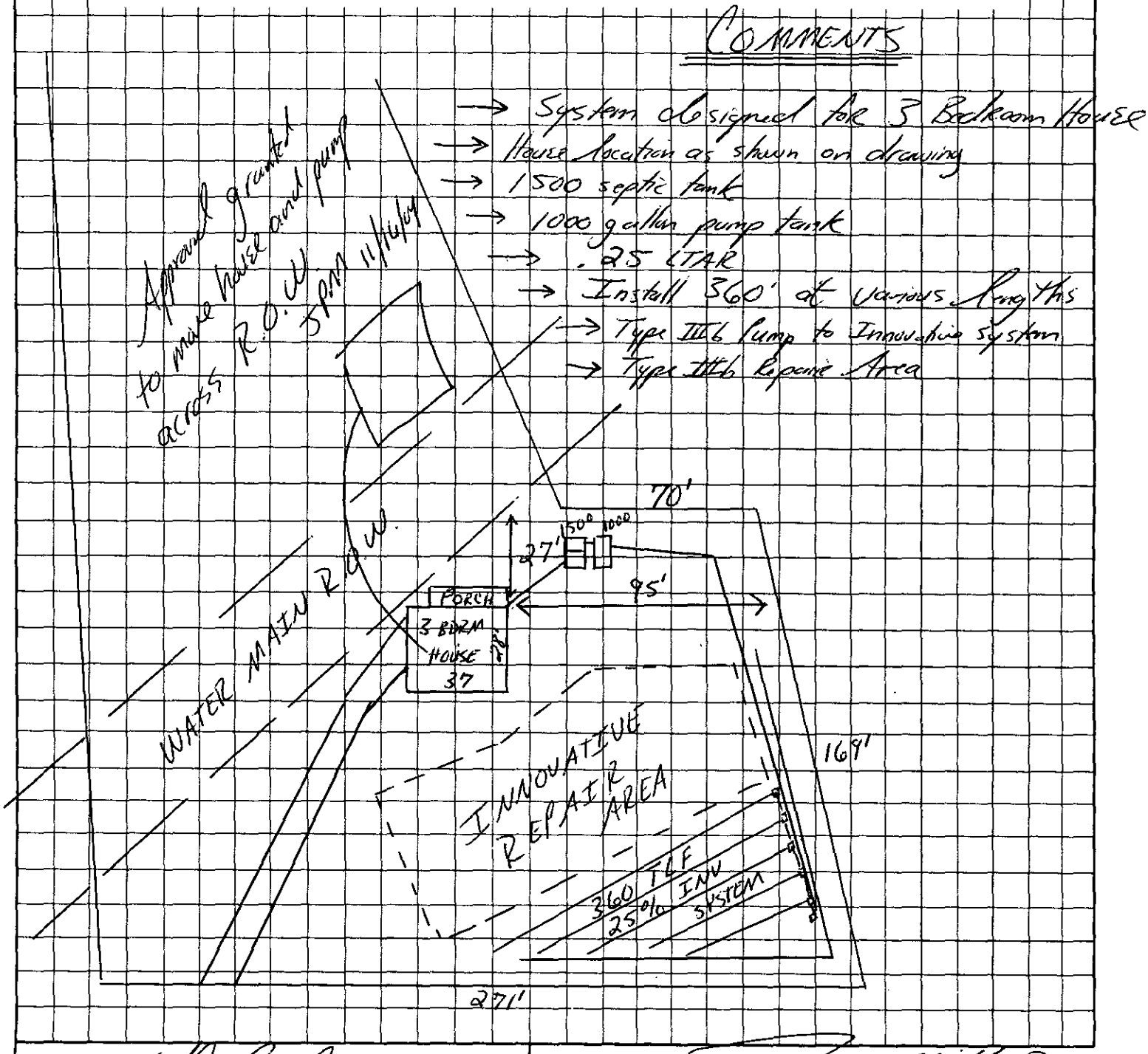
PROPOSED PLOT PLAN

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

FILE: 5296B

TC: 023-101-27

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 12/7/04

APPROVAL DATE Jimmy Mickle R.S. 10/31/05

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

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

Sheet: 1 of 2
Property ID: 023-101-27
Lot #:
File #: 5296B
Code: 2

ACS

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Heather Boucher
Applicant:
Address: 9535 Chastain Walk Drive, Charlotte, N. C. 28216
Date Evaluated: 9/20/2004
Proposed Facility: Residence
Design Flow (.1949): 480gpd
Property Size: .2 a. inv
Location of Site: 12012 Pump Station Road
Property Recorded:
Water Supply: [x] Public [ ] Individual [ ] 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 .1941 Structure/ Texture	.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, 10	0-5	GR/SCL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48+	N/A	NONE	PS, IV
		5-34	SBK/SC	FI/SEXP/S/P					.3GPD/FT^2
		34-48	SBK/SCL	FR/SEXP/SS/SP					
2	NS, 15	0-4	GR/SCL	"	"	"	"	"	PS, IV
		4-48	SBK/SC	FI/SEXP/S/P					.25GPD/FT^2
3	LS, 15	0-4	GR/SCL	FR/SEXP/SS/SP	>35" TO SOIL WETNESS	35	"	"	US, IV
		4-48	SBK/SC	FI/SEXP/S/P					.25GPD/FT^2
4	FS. 5	0-9	GR/SCL	FR/SEXP/SS/SP	2.5Y7/1@33"	38	"	"	US
		9-38	SBK/SC	VFI/EXP/VS/VP					
5	"	0-16	GR/SCL	FR/SEXP/SS/SP	2.5Y7/1@24"	30	"	"	"
		16-30	SBK/SC	VFI/EXP/VS/VP					

Description	Initial System	Repair System
Available Space (.1945)	US	US
System Type(s)		
Site LTAR	.25GPD/FT^2	.25GPD/FT^2

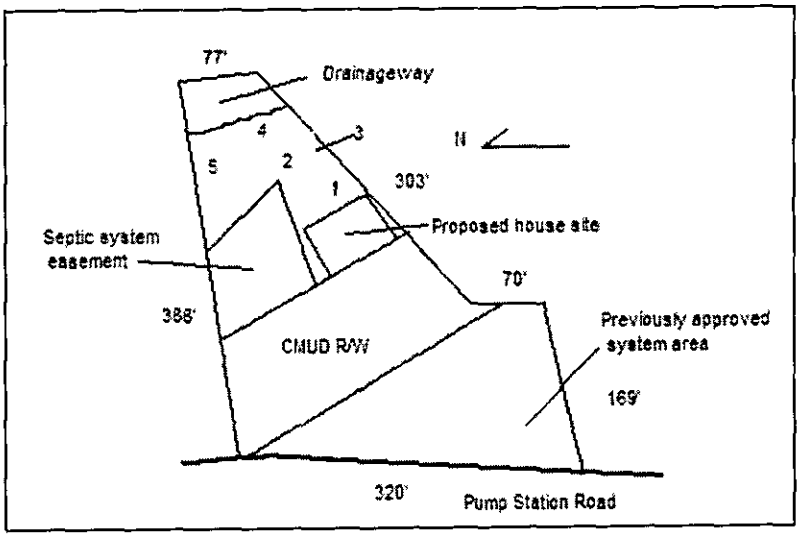
Other Factors (.1946):
Site Classification (.1948): UNSUITABLE
Evaluated By: W. R. Marlin, LSS, 9/20/2004, W. R. Marlin
Others Present:

COMMENTS:
100% repair required

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		M-Massive
LS-Linear Slope				CR-Crumb
FS-Food 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		
FP-Flood Plain		SCL-Sandy Clay Loam		
	IV	SC-Sandy Clay	0.4 - 0.1	
		SIC-Silty Clay		
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	NS-Non-Sticky	SEXP-Slightly Expansive
FR-Friable	SS-Slightly Sticky	EXP-Expansive
FI-Firm	S-Sticky	
VFI-Very Firm	VS-Very Sticky	
EFI-Extremely Firm	NP-Non-Plastic	
	SP-Slightly Plastic	
	P-Plastic	
	VP-Very Plastic	

Sketch of Soil Evaluation Locations



MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	09/07/04	**Amount:**	100.00
Receipt #:	27755	**Tendered:**	0.00
Check / Auth #:	VISA 055263	**Returned:**	0.00
Received By:	CRAIGGY		

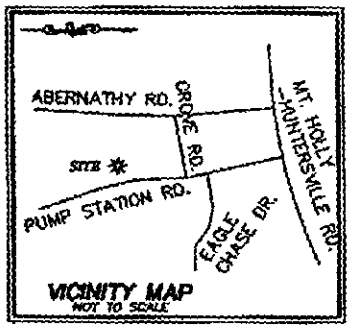
Account Information

Account #:	200000
Contractor:	BOUCHER HEATHER D
Attn:	
Address:	9535 CHASTAIN WALK DRIVE
Address:	
City/State/Zip:	CHARLOTTE, NC 28216

Item	Description	Permit#	Quantity	Unit Price	Total Price
0702	Optional Site Evaluations 12012 PUMP STATION RD/FILE 5296B		1	100.00	100.00

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

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



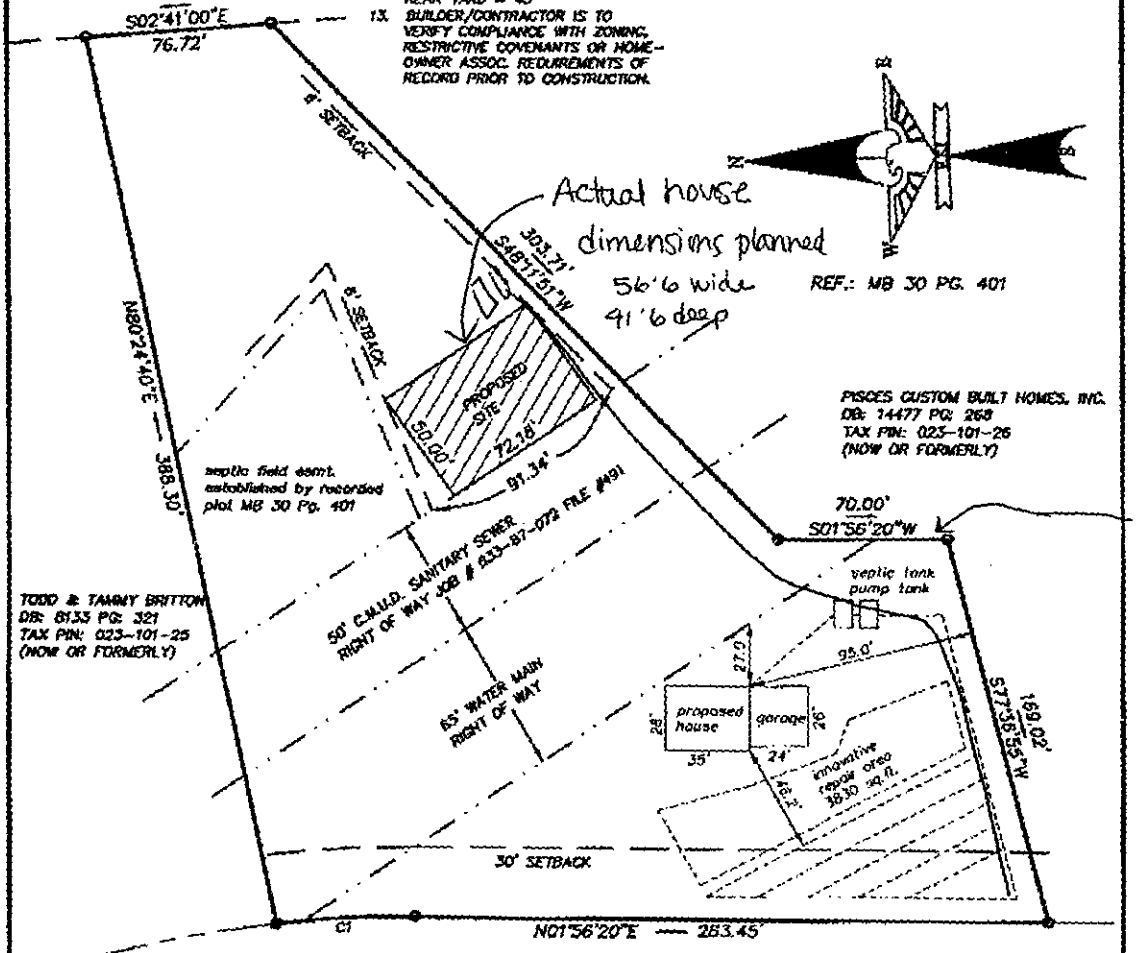
NOTES:
1. NO USGS HORIZONTAL MONUMENTATION FOUND WITHIN 2000 FEET OF SITE.
2. OTHER UTILITIES MAY EXIST, BUT THEIR LOCATIONS ARE NOT KNOWN.
3. PROPERTY SUBJECT TO FULL TITLE SEARCH
4. THIS PROPERTY MAY BE SUB-SUBJECT TO RIGHT OF WAYS, EASEMENTS OR RESTRICTIONS EITHER RECORDED OR IMPLIED
5. ATTORNEY TO VERIFY COMPLIANCE ZONING, RESTRICTIVE COVENANTS OR HOMEOWNERS ASSOCIATION REQUIREMENTS OF RECORD.
6. AREA COMPUTED BY COORDINATE GEOMETRY
7. R/W = RIGHT OF WAY
8. EIR = EXISTING IRON REBAR
9. EIP = EXISTING IRON PIPE
10. NIR = NEW IRON REBAR
11. TAX# 023-101-27
12. ZONING = R-3
SETBACKS PER ZONING
MIN. BLDG. = 30'
SIDE YARD = 6'
REAR YARD = 45'
13. BUILDER/CONTRACTOR IS TO VERIFY COMPLIANCE WITH ZONING, RESTRICTIVE COVENANTS OR HOME-OWNER ASSOC. REQUIREMENTS OF RECORD PRIOR TO CONSTRUCTION.

PRELIMINARY NOT TO BE USED FOR SALES, CONVEYANCE OR RECORDATION

DATE: August 20, 2004

RONALD J. & ELISA J. DUNN
DB: 8545 PG: 344
TAX PIN: 023-101-19
(NOW OR FORMERLY)

CURVE TABLE				
CURVE	LENGTH	RADIUS	BEARING	CHORD
C1	57.36'	475.00'	S86°32'25"W	57.33'



O.K.
5.PM
11/10/04

EAGLE ENGINEERING
310 Indian Trail - Fairview Rd.
Indian Trail, NC 28079
(704) 882-4222
www.eagleonline.net

PRELIMINARY BUILDING SITE

LOT 4 "WILSON HAVEN" MAP 1

PAW CREEK TOWNSHIP, MECKLENBURG COUNTY, NC

SCALE 1" = 60'

FOR THE BENEFIT OF BRUCE BOUCHER

MAP REFERENCE IN BOOK 30 PAGE 401

DEED REFERENCE IN BOOK 10887 PAGE 501

ACAD FILE: W:\1936-S\BOUCHER.dwg EEI PROJECT #: 1936S

File
5296B

Attention: Jeremy Michelone
704-336-6894
From: Heather Boucher

CHARLOTTE.

November 3, 2004

Mrs. Heather D. Boucher
9535 Chastain Walk Drive
Charlotte, North Carolina 28216

Dear Mrs. Boucher:

You have requested that this office provide assistance in obtaining authorization to encroach into the City of Charlotte easements for the raw water pipelines that convey water from the Catawba River Raw Water Pumping Station (located on Mountain Island Lake) off Pump Station Road. You have provided to us a preliminary map of the property described on the map as Lot 4 "Wilson Haven" Map 1 in Paw Creek Township, as surveyed by Eagle Engineering of Indian Trail, North Carolina. The specific parcel recorded in the Mecklenburg County Register of Deeds in Deed Book 10887 Page 501 and Map Book 30 Page 401 is addressed as 12012 Pump Station Road.

It is our understanding that upon application to the Mecklenburg Health Department for a permit to install a septic system on the above lot between the raw water pipelines easements and the existing 60 foot Pump Station Road rights-of-way, you were informed that the area available for installation of a septic system sized to meet the requirements of your specified dwelling was not sufficient without encroaching into the 30 foot setback along Pump Station Road. In order to find a acceptable solution to this limitation, you have proposed to build the previously mentioned single family residence to the northeast of the existing raw water easements in the only other buildable area on the lot. You are asking Charlotte Mecklenburg Utilities for permission to pump septic waste across the raw water easements into a proposed septic field that would be constructed within the boundaries of the raw water easement to the northeast, the parcel property lines to the west and south, and the 30 foot setback line to the east which is parallel and contiguous to the rights-of-way of Pump Station Road (Map attached).

The encroachment authorization is approved for the specified period beginning with the date of this letter until July 1, 2008. The area for which you have requested the encroachment is within the 2005 Annexation area for the City of Charlotte. Sewer service to the annexed area will be in place by June 30, 2007. You may need to apply for an extension of the sanitary sewer system to actually get sanitary sewer service to your lot once the annexation water and sewer trunks are in place and active.

You are requested to contact this office for assistance prior to crossing the raw water easements with your septic drain line. There can be no encroachment of the septic field

CHARLOTTE-MECKLENBURG UTILITIES
Engineering Division
5100 Brookshire Boulevard
Charlotte, NC 28216
PH: 704/399-2551

* 11/16/04 Received Voice Mail message from Barry Shearin stating that this letter gives permission to cross R.O.W. No Encroachment Agreement form is needed.

proper within the raw water easements (a list of restrictions is attached for your information). There are currently 3 major active water mains in the diameters of 54-inch, 60-inch, and 120-inch located within the easements. There are also 2 currently inactive water lines of the diameters of 30-inch and 36-inch located with in the easements. The depths of these lines vary greatly and therefore we need to coordinate closely with your plumbing contractor during the installation of your pump line.

Should you need additional information, or if I may be of further assistance in this regard, please contact me at (704) 391-5137 or Mr. George A. Jones at (704) 391-5133.

Sincerely,

Barry Shearin

Barry D. Shearin, P.E.
Chief Engineer

Attachments

Cc: C. M. Bliss, CMU Design and Construction Manager-CIP
J. Huber, FranklinWTP Superintendent
Angela Lee, Field Operations Manager
Files (CMU Acct. No. 634.41- Catawba P.S. to Franklin WTP Encroachments)

RawWaterEsmtSepticEncroachLtrBoucherPumpStaRd.doc/BDS/gaj

FEE: 9/7/04 $200 cc #065263

DATE: 9/7/04 & 9/14/04 optional

APPLICATION FOR IMPROVEMENT PERMIT
FOR RESIDENTIAL SITE
INDIVIDUAL WATER AND WASTEWATER
SYSTEMS PROGRAM

1304

1] 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

FILE #: 52962

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 023-101-27

STREET ADDRESS: 12012 Pump Station Road

SUBDIVISION OR MOBILE HOME PARK NAME: NA

LOT NUMBER: NA

TYPE OF BUILDING (CHECK ONE):

__ SINGLE MOBILE HOME(S)
__ DOUBLE WIDE (D)
✓ HOUSE (H)
__ MODULAR HOME (M)
__ MULTIPLE FAMILY (U)
__ OTHER (O)

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE:

NUMBER OF BEDROOMS: 4+ bonus NUMBER OF OCCUPANTS: 2

CLOSING DATE TBD - own property - planning to build

FOUNDATION FOR RESIDENCE:

__ WITHOUT BASEMENT
__ ON SLAB
__ CRAWL SPACE
✓ WITH BASEMENT /PLUMBING
__ WITH BASEMENT /NO PLUMBING

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:
NA - new construction

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: __ YES ✓ NO TYPE: _____

WATER SUPPLY (CHECK ONE):
__ COMMUNITY (C)
✓ MUNICIPAL (M)
__ 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 ✓ NO
EXISTING WASTEWATER SYSTEMS __ YES ✓ NO
EASTMENTS OR RIGHT-OF-WAYS ✓ YES __ NO refer to survey
WELL, SPRINGS OR WATERLINES __ YES ✓ NO
DESIGNATED WETLANDS __ YES ✓ NO

PROPERTY OWNER:

NAME: Boucher (LAST) Heather (FIRST) D (MI)

ADDRESS: 9535 Chastain Walk Dr

CITY: Charlotte STATE: NC ZIP: 28216

DAYTIME PHONE: (704) 395-2128

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: NA (LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) —

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? ~~owner~~ NA

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: Heather Boucher DATE: 9-7-04

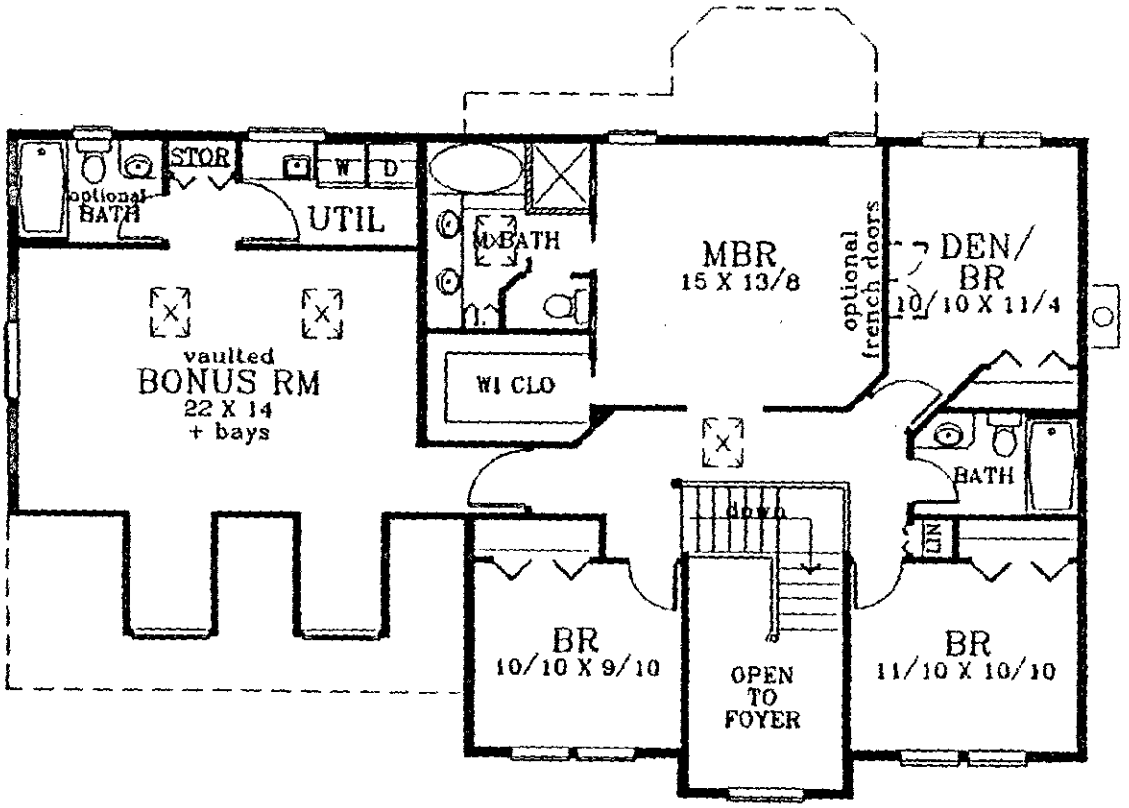
MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102

0702

dream home source

Second Floor

Plan #18120



SECOND FLOOR PLAN

1087 SQUARE FEET N.I.C. BONUS RM
400 SQUARE FOOT BONUS RM

Order online or call now to purchase your dream home plan! 1·800·447·0027

6600 SW 92nd Avenue, Suite 180, Portland, Oregon 97223 www.dreamhomesource.com

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

Sheet: 1
Property ID: 023-101-27
Lot #: 4
File #: 5296B
Code: 1

ACS

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Willie Hardee
Applicant: Bruce Boucher
Address: 5601 Mountain Point Lane, Charlotte, N. C. 28216
Date Evaluated: 07/22/2003
Proposed Facility: Residence
Design Flow (.1949): 360gpd
Property Size: 1.0a. Inv.
Location of Site: Pump Station Road
Property Recorded:
Water Supply: [x] Public [ ] Individual [ ] 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 .1941 Structure/ Texture	.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, 10	0-8	GR/SCL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48	N/A	NONE	PS, IV
		8-48	SBK/SC	FI/SEXP/S/P					.25GPD/FT^2
2	"	0-4	GR/SCL	FR/SEXP/SS/SP	>34" TO SOIL WETNESS	34	"	"	US, IV
		4-34	SBK/SC	FI/SEXP/S/P					.25GPD/FT^2
3	"	0-4	GR/SCL	FR/SEXP/SS/SP	>45" TO SOIL WETNESS	45	"	"	PS, IV
		4-45	SBK/SC	FI/SEXP/S/P					.25GPD/FT^2
4	"	0-5	GR/SCL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48	"	"	PS, IV
		5-24	SBK/SC	FI/SEXP/S/P					.3GPD/FT^2
		24-48	SBK/CL	FR/SEXP/SS/SP					
5	"	0-4	GR/SCL	"	>40" TO SOIL WETNESS	40	"	"	PS, IV
		4-30	SBK/SC	FI/SEXP/S/P					.275GPD/FT^2
		30-40	SBK/SCL	FR/SEXP/SS/SP					

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR	.25GPD/FT^2	.25GPD/FT^2

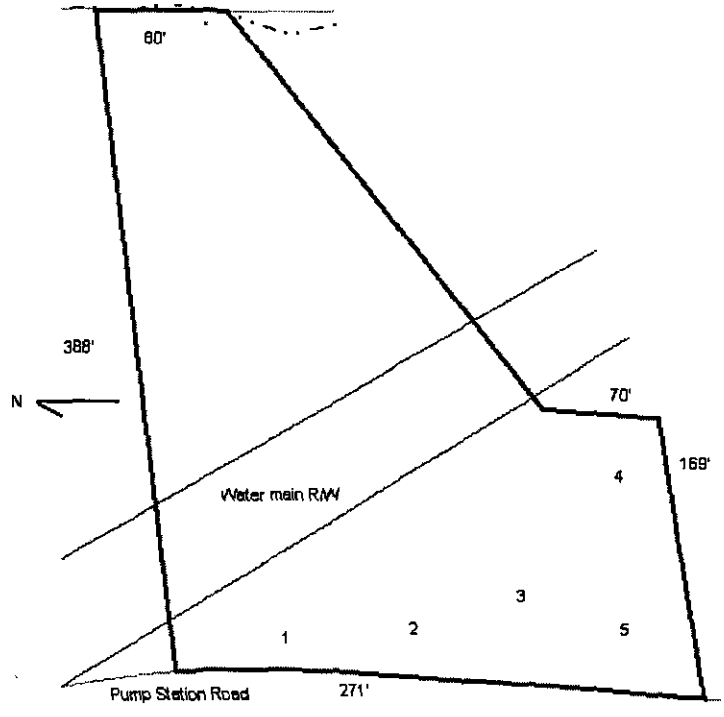
Other Factors (.1946): _____
Site Classification (.1948): PROVISIONALLY SUITABLE
Evaluated By: W. R. Marlin, LSS, 7/23/2003, W. R. Marlin
Others Present:

FILE # 5296B

COMMENTS: 100% Repair, will probably need pump

LANDSCAPE POSITIONS	GROUP	TEXTURES	.1955 LTAR	CONSISTENCE MOIST	WET
R-RIDGE	I	S-SAND	1.2 - 0.8		
S-SHOULDER SLOPE		LS-LOAMY SAND		VFR-VERY FRIABLE	NS-NON-STICKY
L-LINEAR SLOPE				FR-FRIABLE	SS-SLIGHTLY STICKY
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8 – 0.6	FI-FIRM	S-STICKY
N-NOSE SLOPE		L-LOAM		VFI-VERY FIRM	VS-VERY STICKY
H-HEAD SLOPE				EFI-EXTREMELY FIRM	NP-NON-PLASTIC
CC-CONCLAVE SLOPE	III	SI-SILT-	0.6 – 0.3		SP-SLIGHTLY STICKY
CV-CONVEX SLOPE		SIL-SILT LOAM			P-PLASTIC
T-TERRACE		CL-CLAY LOAM			VP-VERY PLASTIC
FP-FLOOD PLAN		SCL-SANDY CLAY LOAM			
		SICL-SILTY CLAY LOAM			
	IV	SIC-SILTY CLAY	0.4 – 0.1		
		C-CLAY			
		SC-SANDY CLAY			

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



SEE: 9/7/04 PDO — Permit #055263

DATE: 9/7/04 — Plans to site 9/7/04

APPLICATION FOR IMPROVEMENT PERMIT FOR RESIDENTIAL SITE INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM

COPY

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

FILE #: 52960

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION: 27

TAX/PARCEL NUMBER: 023-101-19

STREET ADDRESS: 12012 Pump Station Road

SUBDIVISION OR MOBILE HOME PARK NAME: NA

LOT NUMBER: NA

TYPE OF BUILDING (CHECK ONE):

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

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE:

NUMBER OF BEDROOMS: 4+ homes NUMBER OF OCCUPANTS: 2

CLOSING DATE TBD - own property - planning to build

FOUNDATION FOR RESIDENCE:

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

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

NA - new construction

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

WATER SUPPLY (CHECK ONE):

___ COMMUNITY (C)
___ SHARED WELL (S)
✓ MUNICIPAL (M)
___ OTHER 'SPRINGS' (O)
___ PRIVATE WELL (P)

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

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

PROPERTY OWNER:

NAME: Boucher (LAST) Heather (FIRST) D (MI)

ADDRESS: 9535 Chastain Walk Dr

CITY: Charlotte STATE: NC ZIP: 28216

DAYTIME PHONE: (704) 395-2128

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: NA (LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) —

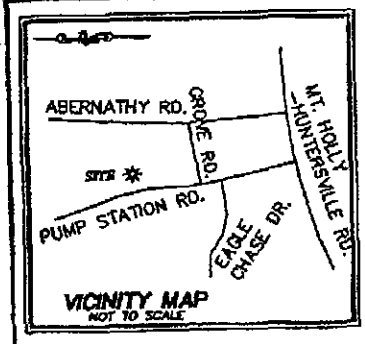
WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? ~~August~~ NA

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: Heather Boucher DATE: 9-7-04

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

070



VICINITY MAP
NOT TO SCALE

NOTES:
1. NO USGS HORIZONTAL MONUMENTATION FOUND WITHIN 2000 FEET OF SITE.
2. OTHER UTILITIES MAY EXIST, BUT THEIR LOCATIONS ARE NOT KNOWN.
3. PROPERTY SUBJECT TO FULL TITLE SEARCH
4. THIS PROPERTY MAY BE SUB-SUBJECT TO RIGHT OF WAYS, EASEMENTS OR RESTRICTIONS EITHER RECORDED OR IMPLIED
5. ATTORNEY TO VERIFY COMPLIANCE ZONING, RESTRICTIVE COVENANTS OR HOMEOWNERS ASSOCIATION REQUIREMENTS OF RECORD.
6. AREA COMPUTED BY COORDINATE GEOMETRY
7. R/W = RIGHT OF WAY
8. EIR = EXISTING IRON REBAR
9. EIP = EXISTING IRON PIPE
10. NIR = NEW IRON REBAR
11. TAX# 023-101-27
12. ZONING = R-5
SETBACKS PER ZONING
MIN. BLDG. = 30'
SIDE YARD = 6'
REAR YARD = 45'
13. BUILDER/CONTRACTOR IS TO VERIFY COMPLIANCE WITH ZONING, RESTRICTIVE COVENANTS OR HOME-OWNER ASSOC. REQUIREMENTS OF RECORD PRIOR TO CONSTRUCTION.

PRELIMINARY NOT TO BE USED FOR SALES, CONVEYANCE OR RECORDATION

DATE: August 26, 2004

COPY

CURVE TABLE				
CURVE	LENGTH	RADIUS	BEARING	CHORD
C1	57.36'	475.00'	S86°32'25"W	57.33'

RONALD J. & ELISA J. DUNN
DB: 6345 PG: 344
TAX PIN: 023-101-19
(NOW OR FORMERLY)

S02°41'00"E
76.72'

6' SETBACK

303.71'
S48°11'51"W

Actual house dimensions planned 56'6 wide 41'6 deep

REF.: MB 30 PG. 401

N02°24'40"E — 388.30'

6' SETBACK

PROPOSED SITE
50.00'
72.18'
91.34'

septic field easmt. established by recorded plat MB 30 Pg. 401

PISCES CUSTOM BUILT HOMES, INC.
DB: 14477 PG: 268
TAX PIN: 023-101-26
(NOW OR FORMERLY)

70.00'
S01°56'20"W

previous permit issued in 2003.

septic tank
pump tank

TODD & TAMMY BRITTON
DB: 8135 PG: 321
TAX PIN: 023-101-25
(NOW OR FORMERLY)

50' C.M.U.D. SANITARY SEWER RIGHT OF WAY JOB # 433-87-072 FILE #491

65' WATER MAIN RIGHT OF WAY

22.0'
95.0'
S77°38'55"W
169.02'

proposed house
garage
innovative repair area 3830 sq. ft.
28'
35'
24'
26'
48.2'

30' SETBACK

C1
N01°56'20"E — 263.45'

Pump Station Road
SR 2001 60' Public R/W

EAGLE ENGINEERING
310 Indian Trail - Fairview Rd.
Indian Trail, NC 28079
(704) 882-4222
www.eagleonline.net

PRELIMINARY BUILDING SITE

LOT 4 "WILSON HAVEN" MAP 1

PAW CREEK TOWNSHIP, MECKLENBURG COUNTY, NC

SCALE 1" = 60'

FOR THE BENEFIT OF BRUCE BOUCHER

MAP REFERENCE IN BOOK 30 PAGE 401

DEED REFERENCE IN BOOK 10887 PAGE 501

ACAD FILE: W:\1936-S\BOUCHER.dwg EEI PROJECT #: 1936S

File 5296B

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

Sheet: 1 of 2
Property ID: 023-101-27
Lot #:
File #: 5296B
Code: 2

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Heather Boucher
Applicant:
Address: 9535 Chastain Walk Drive, Charlotte, N. C. 28216
Date Evaluated: 9/20/2004
Proposed Facility: Residence
Design Flow (.1949): 480gpd
Property Size: .2 a. inv
Location of Site: 12012 Pump Station Road
Property Recorded:
Water Supply: [x] Public [ ] Individual [ ] 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 .1941 Structure/ Texture	.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, 10	0-5	GR/SCL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48+	N/A	NONE	PS, IV .3GPD/FT^2
		5-34	SBK/SC	FI/SEXP/S/P					
		34-48	SBK/SCL	FR/SEXP/SS/SP					
2	NS, 15	0-4	GR/SCL	"	"	"	"	"	PS, IV .25GPD/FT^2
		4-48	SBK/SC	FI/SEXP/S/P					
3	LS, 15	0-4	GR/SCL	FR/SEXP/SS/SP	>35" TO SOIL WETNESS	35	"	"	US, IV .25GPD/FT^2
		4-48	SBK/SC	FI/SEXP/S/P					
4	FS. 5	0-9	GR/SCL	FR/SEXP/SS/SP	2.5Y7/1@33"	38	"	"	US
		9-38	SBK/SC	VFI/EXP/VS/VP					
5	"	0-16	GR/SCL	FR/SEXP/SS/SP	2.5Y7/1@24"	30	"	"	"
		16-30	SBK/SC	VFI/EXP/VS/VP					

Description	Initial System	Repair System
Available Space (.1945)	US	US
System Type(s)		
Site LTAR	.25GPD/FT^2	.25GPD/FT^2

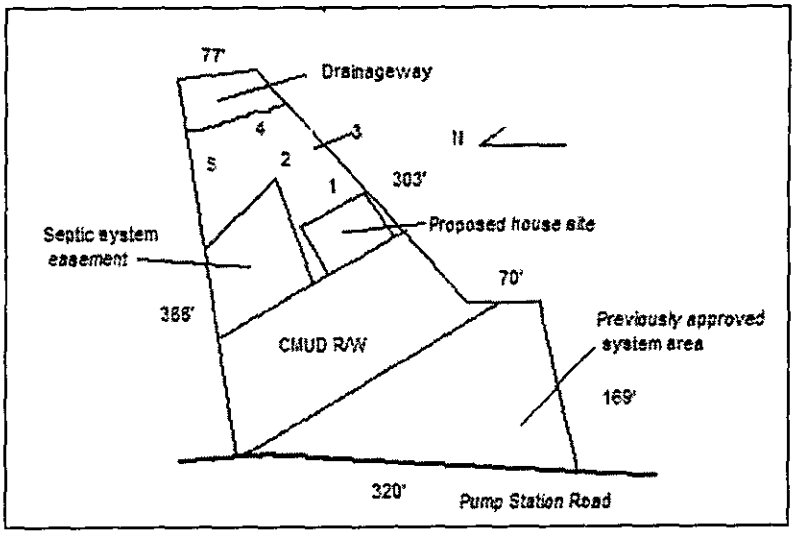
Other Factors (.1946):
Site Classification (.1948): UNSUITABLE
Evaluated By: W. R. Marlin, LSS, 9/20/2004. W.R. Marlin
Others Present:

COMMENTS:
100% repair required

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		M-Massive
LS-Linear Slope				CR-Crumb
FS-Food 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		
FP-Flood Plain		SCL-Sandy Clay Loam		
	IV	SC-Sandy Clay	0.4 - 0.1	
		SIC-Silty Clay		
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	NS-Non-Sticky	SEXP-Slightly Expansive
FR-Friable	SS-Slightly Sticky	EXP-Expansive
FI-Firm	S-Sticky	
VFI-Very Firm	VS-Very Sticky	
EFI-Extremely Firm	NP-Non-Plastic	
	SP-Slightly Plastic	
	P-Plastic	
	VP-Very Plastic	

Sketch of Soil Evaluation Locations

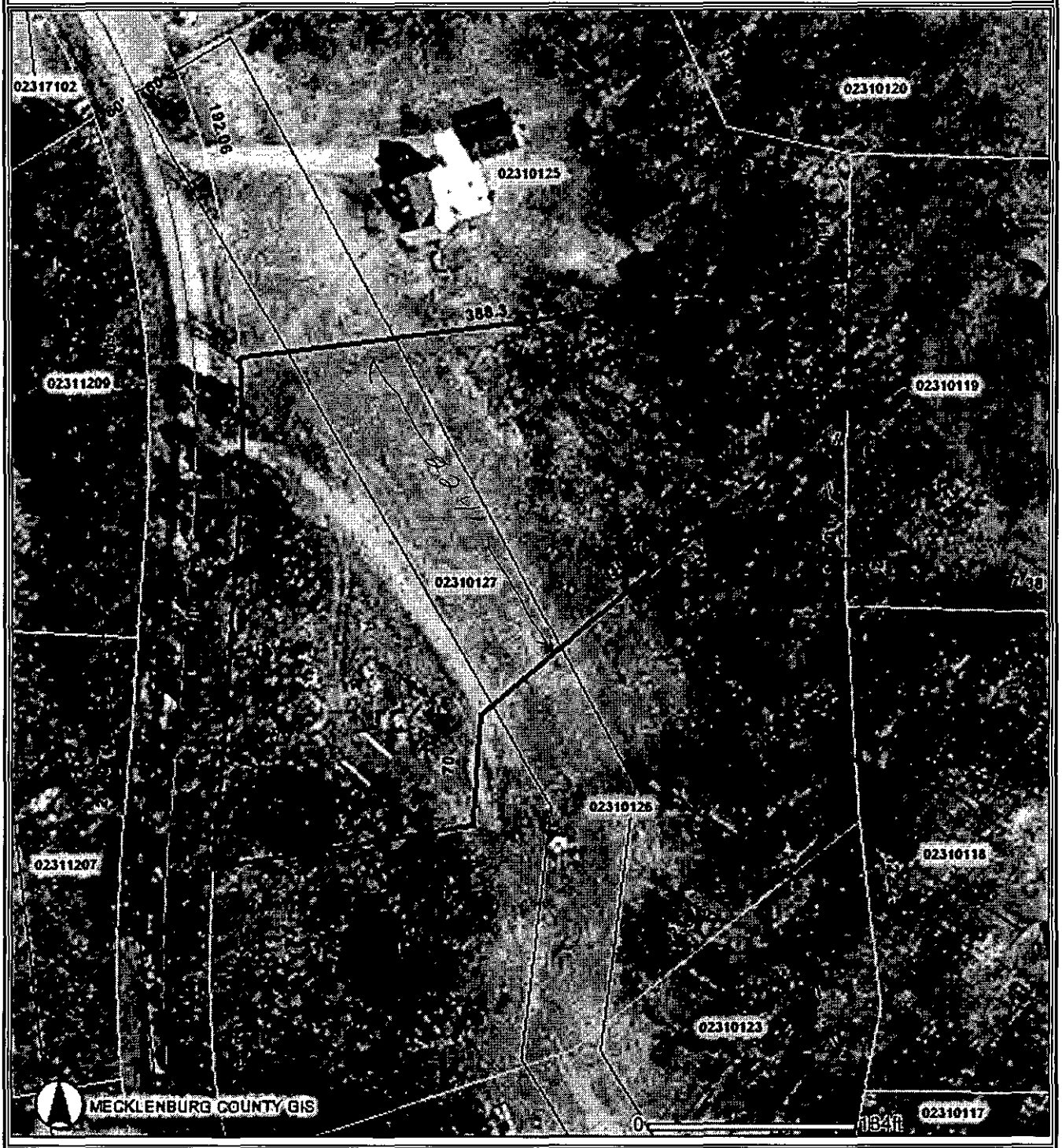


Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Mon Sep 20 09:09:09 EDT 2004



This map 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 are hereby notified that the aforementioned public primary information sources should be consulted for verification. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.

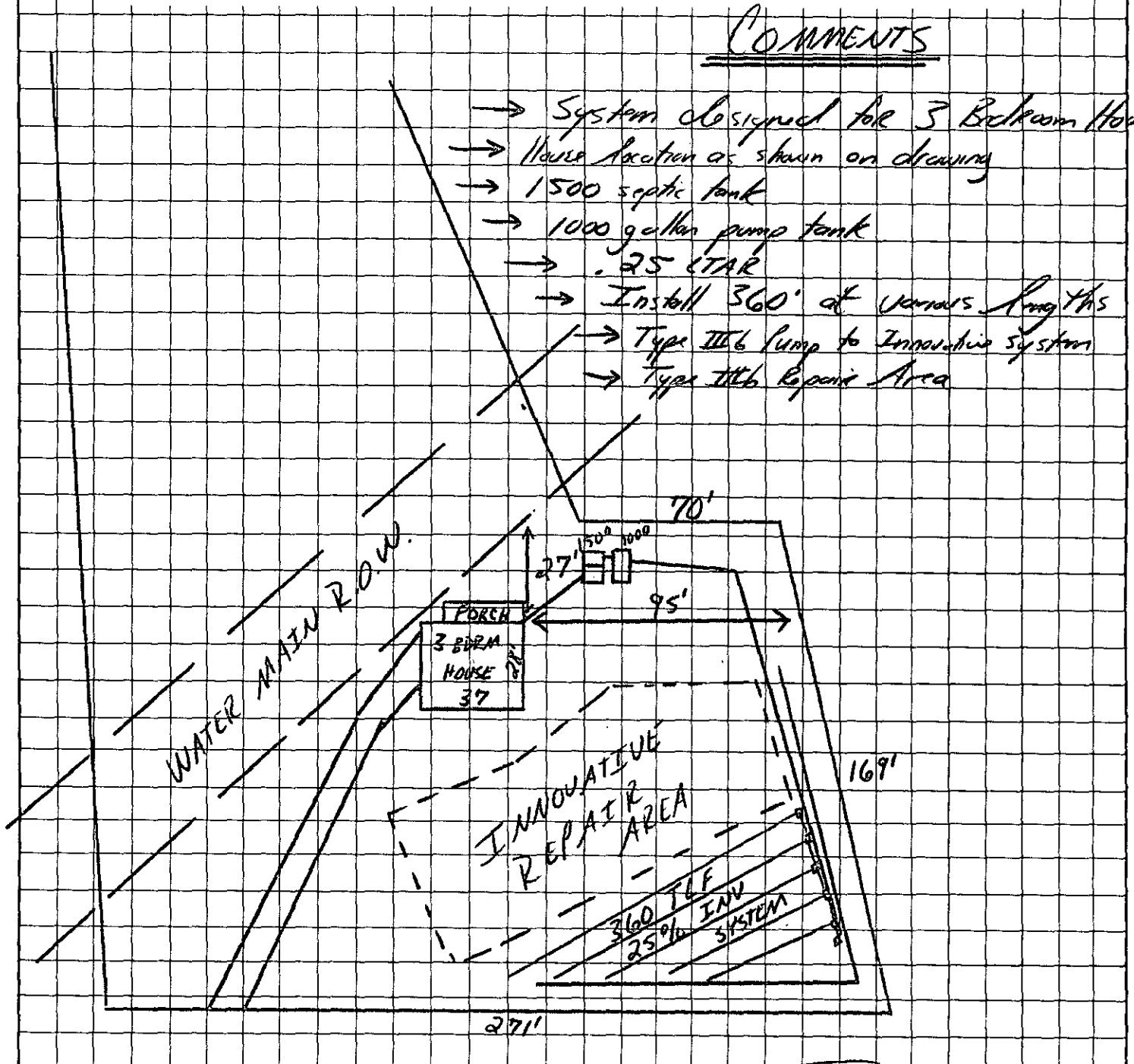
PROPOSED PLOT PLAN

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

FILE: 52968

TC: 023-101-27

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

APPROVAL DATE Tommy Mitchell R.S. 10/31/03

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

FEE: 200.00
DATE: 7/8/03 — TerRMy
YES

APPLICATION FOR IMPROVEMENT PERMIT
FOR RESIDENTIAL SITE
INDIVIDUAL WATER AND WASTEWATER
SYSTEMS PROGRAM

COPY

[ ] 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

FILE #: 5296B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 0231 0127

STREET ADDRESS: Pump Station Rd. Lot 4

SUBDIVISION OR MOBILE HOME PARK NAME: N/A

LOT NUMBER: 16226

TYPE OF BUILDING (CHECK ONE):

__ SINGLE MOBILE HOME(S)
__ DOUBLE WIDE (D)
__ HOUSE (H)
✓ MODULAR HOME (M)
__ MULTIPLE FAMILY (U)
__ OTHER (O)

TOWNSHIP (CHECK ONE):

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

5x96 6x80 480 conv.
360 Inv.
4x90 5x72

HEATED SQUARE FOOTAGE: 2394

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 2

CLOSING DATE 7/20/2003

023-101-23

FOUNDATION FOR RESIDENCE:

__ WITHOUT BASEMENT
__ ON SLAB
__ CRAWL SPACE
✓ WITH BASEMENT /PLUMBING
__ WITH BASEMENT /NO PLUMBING

13918

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

N/A

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: __ YES ✓ NO TYPE: _____

WATER SUPPLY (CHECK ONE):

__ COMMUNITY (C)
__ SHARED WELL (S)
✓ MUNICIPAL (M)
__ OTHER 'SPRINGS' (O)
__ PRIVATE WELL (P)

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

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

PROPERTY OWNER:

NAME: Harden Willie
(LAST) (FIRST) (MI)

ADDRESS: 5601 Mountain Point Lane

CITY: Charlotte STATE: NC ZIP: 28216

DAYTIME PHONE: ( ) —

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: BOUCHER BRUCE P
(LAST) (FIRST) (MI)

DAYTIME PHONE: 704 559-7276

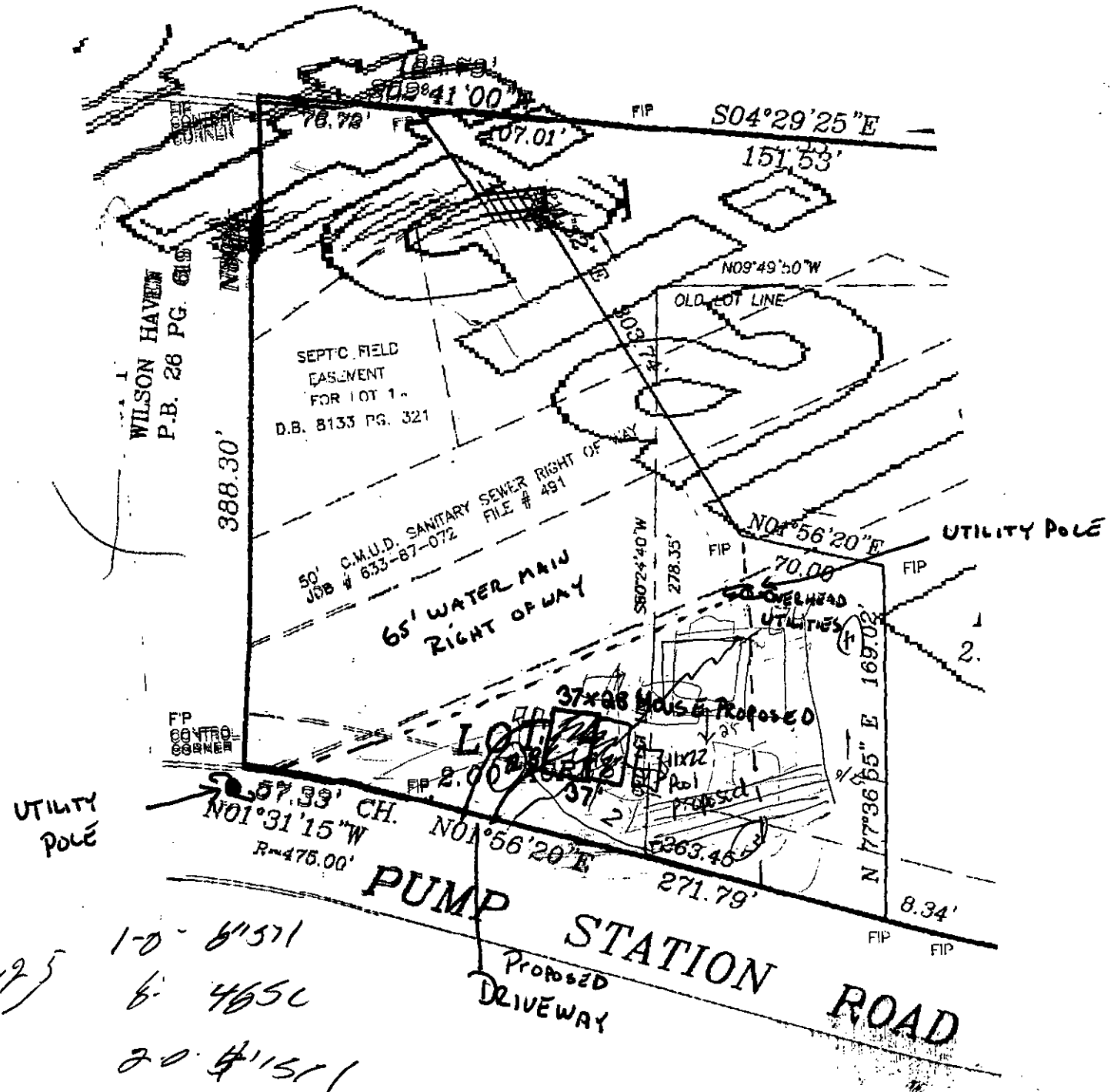
WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 1/15/1999

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.

DATE:

SIGNED:

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



1-0-6"571

125 6-465C

20-$"15C1

125 4-345C File # 5296B

125 3-0-4"15C1

125 4-45"5C

4D-5-15C1

5-24C

5-0-4"5C24-46C1

4-30"5-

38-40

5C1

275

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

Sheet: 1
Property ID: 023-101-27
Lot #: 4
File #: 5296B
Code: 1

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Willie Hardee
Applicant: Bruce Boucher
Address: 5601 Mountain Point Lane, Charlotte, N. C. 28216
Date Evaluated: 07/22/2003
Proposed Facility: Residence
Design Flow (.1949): 360gpd
Property Size: 1.0a. Inv.
Location of Site: Pump Station Road
Property Recorded:
Water Supply: [x] Public [ ] Individual [ ] 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 .1941 Structure/ Texture	.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, 10	0-8	GR/SCL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48	N/A	NONE	PS, IV .25GPD/FT^2
		8-48	SBK/SC	FI/SEXP/S/P					
2	"	0-4	GR/SCL	FR/SEXP/SS/SP	>34" TO SOIL WETNESS	34	"	"	US, IV .25GPD/FT^2
		4-34	SBK/SC	FI/SEXP/S/P					
3	"	0-4	GR/SCL	FR/SEXP/SS/SP	>45" TO SOIL WETNESS	45	"	"	PS, IV .25GPD/FT^2
		4-45	SBK/SC	FI/SEXP/S/P					
4	"	0-5	GR/SCL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48	"	"	PS, IV .3GPD/FT^2
		5-24	SBK/SC	FI/SEXP/S/P					
		24-48	SBK/CL	FR/SEXP/SS/SP					
5	"	0-4	GR/SCL	"	>40" TO SOIL WETNESS	40	"	"	PS, IV .275GPD/FT^2
		4-30	SBK/SC	FI/SEXP/S/P					
		30-40	SBK/SCL	FR/SEXP/SS/SP					

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR	.25GPD/FT^2	.25GPD/FT^2

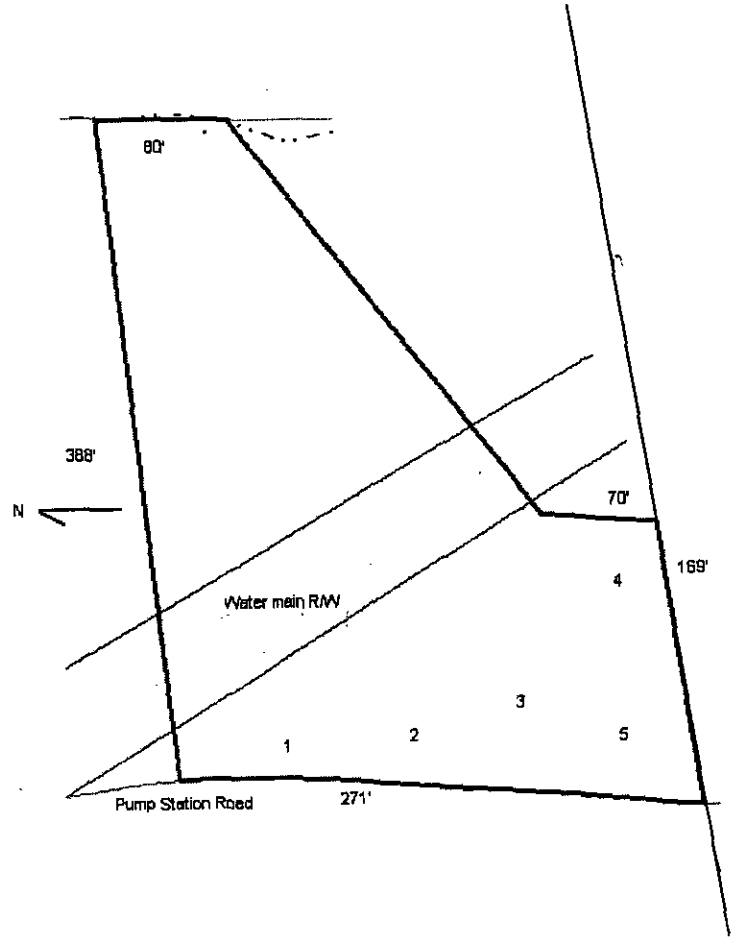
Other Factors (.1946): _____
Site Classification (.1948): PROVISIONALLY SUITABLE
Evaluated By: W. R. Marlin, LSS, 7/23/2003, W. R. Marlin
Others Present:

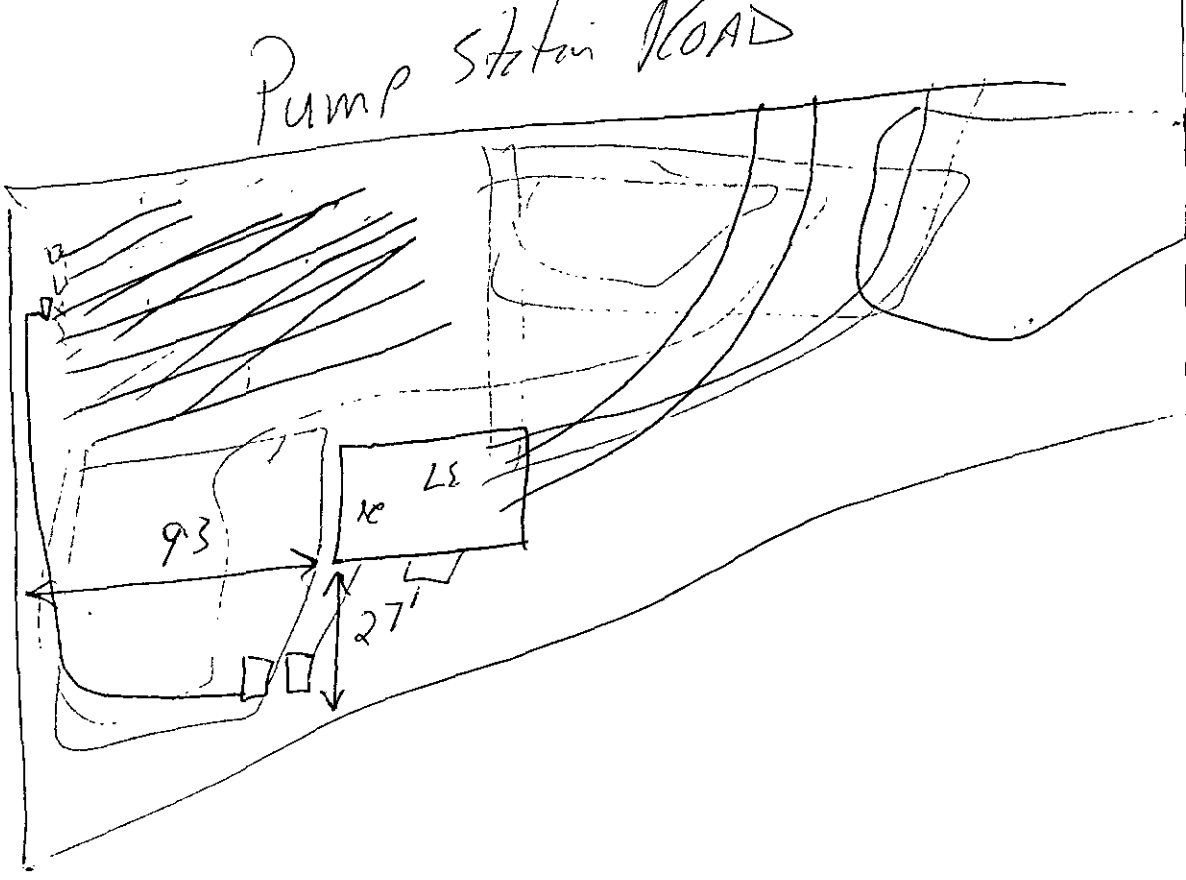
FILE # 5296B

COMMENTS: 100% Repair, will probably need pump

LANDSCAPE POSITIONS	GROUP	TEXTURES	.1955 LTAR	CONSISTENCE MOIST	WET
R-RIDGE	I	S-SAND	1.2 - 0.8	VFR-VERY FRIABLE	NS-NON-STICKY
S-SHOULDER SLOPE		LS-LOAMY SAND		FR-FRIABLE	SS-SLIGHTLY STICKY
L-LINEAR SLOPE				FI-FIRM	S-STICKY
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8 – 0.6	VFI-VERY FIRM	VS-VERY STICKY
N-NOSE SLOPE		L-LOAM		EFI-EXTREMELY FIRM	NP-NON-PLASTIC
H-HEAD SLOPE					SP-SLIGHTLY STICKY
CC-CONCLAVE SLOPE	III	SI-SILT-	0.6 – 0.3		P-PLASTIC
CV-CONVEX SLOPE		SIL-SILT LOAM			VP-VERY PLASTIC
T-TERRACE		CL-CLAY LOAM			
FP-FLOOD PLAN		SCL-SANDY CLAY LOAM			
		SICL-SILTY CLAY LOAM			
	IV	SIC-SILTY CLAY	0.4 – 0.1		
		C-CLAY			
		SC-SANDY CLAY			

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




Pump Station ROAD
93
27'
LS

FEE: 200.00
DATE: 7/8/03
VISA

APPLICATION FOR IMPROVEMENT PERMIT FOR RESIDENTIAL SITE 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

FILE #: 52968

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 0231 0127

STREET ADDRESS: Pump Station Rd. Lot 4

SUBDIVISION OR MOBILE HOME PARK NAME: N/A

LOT NUMBER:

TYPE OF BUILDING (CHECK ONE):

__ SINGLE MOBILE HOME(S)
__ DOUBLE WIDE (D)
__ HOUSE (H)
✓ MODULAR HOME (M)
__ MULTIPLE FAMILY (U)
__ OTHER (O)

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 2394

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 2

CLOSING DATE 7/20/2003

FOUNDATION FOR RESIDENCE:

__ WITHOUT BASEMENT
__ ON SLAB
__ CRAWL SPACE
✓ WITH BASEMENT /PLUMBING
__ WITH BASEMENT /NO PLUMBING

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

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: __ YES ✓ NO TYPE: _____

WATER SUPPLY (CHECK ONE):

__ COMMUNITY (C)
__ SHARED WELL (S)
✓ MUNICIPAL (M)
__ OTHER 'SPRINGS' (O)
__ PRIVATE WELL (P)

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

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

PROPERTY OWNER:

NAME: Hardea Willie
(LAST) (FIRST) (MI)

ADDRESS: 5601 Mountain Point Lane

CITY: Charlotte STATE: NC ZIP: 28216

DAYTIME PHONE: ( ) —

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: BOUCHER BRUCE P
(LAST) (FIRST) (MI)

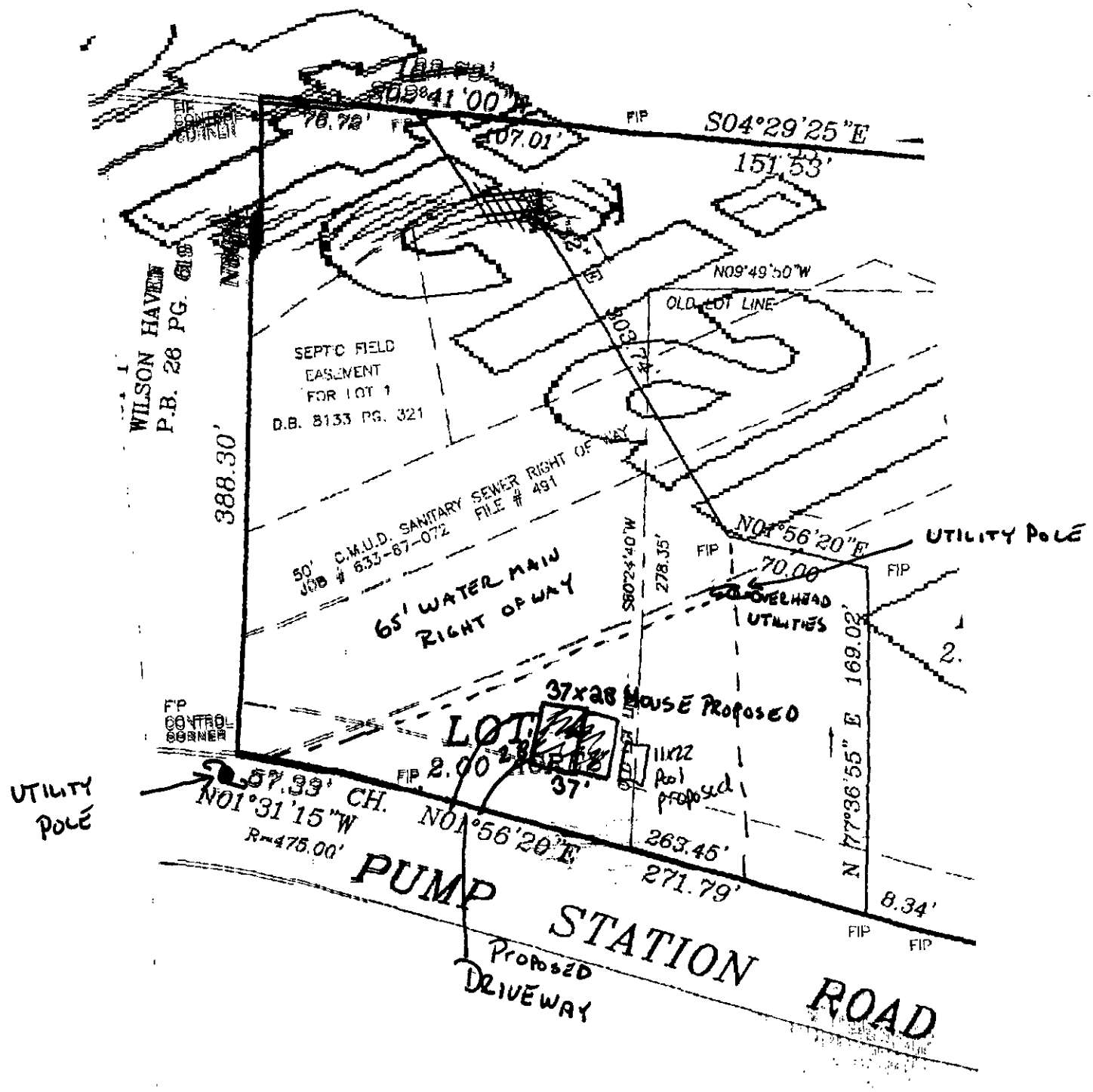
DAYTIME PHONE: 704 559-7276

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 1/15/1999

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: 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


S04°29'25"E
151.53'
S89°41'00"W
76.72'
107.01'
FIP
WILSON HAVEN
P.B. 28 PG. 6
388.30'
SEPTIC FIELD
EASEMENT
FOR LOT 1
D.B. 8133 PG. 321
N09°49'50"W
OLD LOT LINE
50' C.M.U.D. SANITARY SEWER RIGHT OF WAY
JOB # 633-67-072 FILE # 491
65' WATER MAIN
RIGHT OF WAY
S60°24'40"W
278.35'
N01°56'20"E
70.00
UTILITY POLE
OVERHEAD UTILITIES
169.02'
N 77°36'55" E
37x28 House Proposed
LOT 1
11x22 Pool proposed
37'
2.00
57.39' CH.
N01°31'15"W
R=475.00'
N01°56'20"E
263.45'
271.79'
8.34'
PUMP STATION ROAD
Proposed DRIVEWAY
FIP CONTROL CORNER
UTILITY POLE

File # 5296B

PROPOSED PLOT PLAN

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

FILE: 5296-B

TC: 023-101-27

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.

See attached drawing

OWNER/AGENT SIGNATURE

DATE 7/8/03

APPROVAL DATE

Refer to Residential Real Estate Sale Contract

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

Residential Real Estate Sale Contract

This Residential Real Estate Sale Contract (the "Contract") is made by and between Willie Hardee and Linda Hardee ("Seller") and Bruce Boucher and Heather Boucher ("Buyer").

The Effective Date shall be the date of signature by the later party to sign this Contract.

Property to be Sold

A. Buyer agrees to purchase and Seller agrees to sell the real property and the improvements thereon (the "Property") commonly known as: Parcel ID#02310127 located on Pump Station Road.

B. The legal description of the Property is: Land

C. The sale of the Property is owned by Seller free and clear of all liens and encumbrances.

D. The following items are specifically excluded from the sale and shall not be transferred to Buyer as a part of the Property: all physical personal items stored on the property, including but not limited to, vehicles, construction equipment and construction materials.

Purchase Price.

A. The Purchase Price for the Property is $44,000.

B. Buyer shall pay an earnest money deposit ("Earnest Money") of $ 500 to Willie and Linda Hardee upon signing this Contract.

Sale Contingencies.

A. This Contract is contingent upon Buyer securing financing.

B. This Contract is contingent upon Buyer obtaining confirmation of availability of septic services to the Property.

Physical Condition of Property.

A. Buyer acknowledges that Buyer has made at least a casual inspection of the Property. Subject to additional professional inspections, if any, Buyer accepts the Property for purchase in its current condition, except as follows: physical personal items stored on the property, including but not limited to, vehicles, construction equipment and construction materials shall be removed from the Property within a reasonable time subsequent to the sale. Seller can maintain the Property in its present condition through the date of possession. In the event of any material change in the condition of the Property before closing, Seller shall promptly notify Buyer.

Inspections.
A. Buyer, and/or Buyer's representatives shall have the right to conduct inspections of the Property including, but not limited to, environmental hazards, and pest infestation or damage and all other physical matters which may affect the value of the Property. Buyer shall pay for the cost of any inspection and any damage to the Property resulting from any inspection.

Professional Survey.
Buyer may obtain a survey of the Property before the Closing Date (date to be mutually determined by the Seller and Buyer) to assure that there are no defects, encroachments, overlaps, boundary line or acreage disputes, or other such matters, that would be disclosed by a survey ("Survey Problems"). The cost of the survey shall be paid by the Buyer. Buyer shall notify Seller of any Survey Problems before the Closing Date. Each Survey Problem so reported shall be considered a defect in the title to the Property. Seller shall remedy defects that can be remedied prior to the Closing Date. If Seller does not remedy any defect discovered by the survey, Buyer shall have the option of: (i.) completing this purchase and accepting the title Seller is able to convey without reduction in the Purchase Price, or (ii.) canceling this Contract, in which case the Earnest Money shall be returned to the Buyer.

Delivery of Deed.
On or before the Closing Date, Seller shall execute and deliver a warranty deed and take all other steps reasonably necessary to complete the closing. The warranty deed shall convey to Buyer a marketable fee simple title to the Property free and clear of all liens and encumbrances, except as provided in this Contract. On or before the Closing Date, Seller and Buyer agree to deliver to the closing agent a cashier's check, certified check or other good funds sufficient to satisfy their respective obligations in this Contract.

Buyers

Date: 6-20-03

Date: 6-20-03

Sellers

Date: 6/20/03

Date: 6-20-03

Closing date 30 days from date of Contract 7-20-03