Supervisor/Administrative Professional Checklist

New Septic ☐ New Well ☐ Use Existing ☐ Alteration ☐ Modified Plot Plan ☒

New Septic Fees Paid

IP ($250.00) ✓ ____ Initials/Date

CA ($200.00) ✓ ____ Initials/Date

OP ($200.00) ✓ ____ Initials/Date

(CA and OP fees need to be paid before a building permit can be issued)

New Well Fee Paid: $550.00 ____ Initials/Date

Use Existing Fee Paid: $100.00 ____ Initials/Date

Alteration Fee Paid: $300.00 (Total) $200 (If use existing was paid) ____ Initials/Date

Modified Plot Plan Fee Paid: $100.00 9/7/17 LE Initials/Date

Floor plans need to be submitted and reviewed before CA can be issued. ☐ Reviewed ☒ SWM ok to generate ep

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

Septic file completed. ☐ ____ Well file completed. ☐ ____

Send permit for signature. ☑ Signature received. ☑ ____

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

Certified operator contract is on file. ☐ ____

Completed 1/9/18
Bodd

Supervisor/Administrative Professional Checklist

New Septic ☒ New Well ☐ Use Existing ☐ Alteration ☐ Modified Plot Plan ☐

New Septic Fees Paid

IP ($250.00) _____ Initials/Date

CA ($200.00) LE 8/21/17 Initials/Date

OP ($200.00) LE 8/21/17 Initials/Date

(CA and OP fees need to be paid before a building permit can be issued)

New Well Fee Paid: $550.00 _____ Initials/Date

Use Existing Fee Paid: $100.00 _____ Initials/Date

Alteration Fee Paid: $300.00 (Total) $200 (If use existing was paid)_____ Initials/Date

Modified Plot Plan Fee Paid: $100.00 _____ Initials/Date

Floor plans need to be submitted and reviewed before CA can be issued. ☑ Reviewed ☑ JAM 9-14-17

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

Septic file completed. ☐ _____ Well file completed. ☐ _____

Send permit for signature. ☑ Signature received. ☑ _____

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

Certified operator contract is on file. ☐ _____

Groundwater & Wastewater Services: Septic Project File & D

Finish Cancel

GWS File #:

49678

WASPS App #:

9142

Primary ES assigned to project:

Brad Hallman

Secondary ES assigned to project:

Project Type:

- ○ New System
- ○ Alteration
- ○ Repair
- ◉ Modified Plot Plan

Site Evaluation Information:
.1939(a)(1) - Topography and Landscape Position Recorded?

- ◉ Yes
- ○ No
- ○ N/A

Site Evaluation Information:
.1940(a-g) - Slope % Recorded?

- ◉ Yes
- ○ No
- ○ N/A

Site Evaluation Information:
.1939(a)(2) - Texture Class Recorded?

- ◉ Yes
- ○ No
- ○ N/A

Site Evaluation Information:
.1939(a)(2) - Structure Type Recorded?

- ◉ Yes
- ○ No
- ○ N/A

Site Evaluation Information:
.1939 (a)(2) - Consistence Recorded?

- ◉ Yes
- ○ No
- ○ N/A

Site Evaluation Information:
.1939(a)(2) - Mineralogy Recorded?

- ◉ Yes
- ○ No
- ○ N/A

Site Evaluation Information:
.1939(a)(3) - Soil Wetness Condition Recorded?

- ◉ Yes
- ○ No
- ○ N/A

Site Evaluation Information:
.1939(a)(4) - Soil Depth to Rock or Parent Material Recorded when Encountered?

- ◉ Yes
- ○ No
- ○ N/A

Site Evaluation Information:
.1939(a)(5) - Depth to Restrictive Horizons Recorded when Encountered?

- (•) Yes
- ( ) No
- ( ) N/A

Site Evaluation Information:
.1939(a)(6) - Sufficient Available Space Recorded?

- (•) Yes
- ( ) No
- ( ) N/A

Site Evaluation Information:
.1937(m) - Are the Profile Locations Shown?

- (•) Yes
- ( ) No
- ( ) N/A

Site Evaluation Information:
.1939(a) - Are the S/PS Profiles in system & in repair area?

- (•) Yes
- ( ) No
- ( ) N/A

Site Evaluation Information:
.1939(d), .1955, .1956, .1957 - LTAR

- (•) Yes
- ( ) No
- ( ) N/A

Improvement Permit/Construction Authorization:
.1937(g), 130A-336(a) - Proposed System Type stated - Initial

- (•) Yes
- ( ) No
- ( ) N/A

Improvement Permit/Construction Authorization:
.1945(b) - Proposed System Type stated - Repair

- (•) Yes
- ( ) No
- ( ) N/A

Improvement Permit/Construction Authorization:
130A-336(a)(3) - System location identifiable by setbacks - Initial

- (•) Yes
- ( ) No
- ( ) N/A

Improvement Permit/Construction Authorization:
.1937(g), .1945(b) - System components shown - Initial

- (•) Yes
- ( ) No
- ( ) N/A

Information Permit/Construction Authorization:
.1945(b) - Repair area shown

- (•) Yes
- ( ) No
- ( ) N/A

Improvement Permit/Construction Authorization:
.1937(f)(g) - Does System design match facility, flow & WW characteristics?

- (•) Yes
- ( ) No
- ( ) N/A

Improvement Permit/Construction Authorization:
.1937(f)(g) - Is System design consistent with soil/site conditions?

- (•) Yes
- ( ) No
- ( ) N/A

Improvement Permit/Construction Authorization:
.1937(f)(g) - Is the System located in the approved area?

- (●) Yes
- ( ) No
- ( ) N/A

Improvement Permit/Construction Authorization:
130A-336(a) - Number of Bedrooms, employees, seats, etc. indicated?

- (●) Yes
- ( ) No
- ( ) N/A

Improvement Permit/Construction Authorization:
.1937 (g) - Trench depth correct?

- (●) Yes
- ( ) No
- ( ) N/A

Improvement Permit/Construction Authorization:
.1937(g) - Trench width correct?

- (●) Yes
- ( ) No
- ( ) N/A

Improvement Permit/Construction Authorization:
.19379(g) - Trench length correct?

- (●) Yes
- ( ) No
- ( ) N/A

Improvement Permit/Construction Authorization:
130A-336(a)(1) - Proposed/existing well shown?

- (●) Yes
- ( ) No
- ( ) N/A

Improvement Permit/Construction Authorization:
130A-336(a)(1) - Property line lengths shown?

- (●) Yes
- ( ) No
- ( ) N/A

Improvement Permit/Construction Authorization:
130A-336(a) - Facility/appurtenance setbacks shown from fixed points?

- (●) Yes
- ( ) No
- ( ) N/A

Corrections/modifications needed?

- ( ) Yes
- (●) No

Comments:

IA issued date:

OP Issued date:

Review performed by:

Jeremy Michael

Date performed:

9/14/2017

Finish Cancel

7 SEP '17 PM12:25

4967B
#9142

MECKLENBURG COUNTY
HEALTH DEPARTMENT

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 ○ EW SYSTEM ○ LTERATION ○ REPAIR ☒ MODIFIED PLOT PLAN
TO OLD PERMIT

2. WELL / TYPE APPLICATION: ○ N/A ○ NEW WELL ○ MAJOR REPAIR ○ ABANDONMENT

3. JOB LOCATION INFORMATION:
TAX PARCEL NUMBER: 217-172-06
STREET ADDRESS: 17837 NEW MARK AVE
CITY: CHARLOTTE
STATE: NC ZIP: 28278
SUBDIVISION NAME: _____
LOT #: _____ LOT SIZE (acres): 0.783
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: 2,971
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 3
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: ____ ____ ____ ____ ____

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? 2/19/16 ☐ UNKNOWN

11. WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY? _____ ☒ N/A

12. PROPERTY OWNER:
NAME: KIPP CHEEK
ADDRESS: 6207 CREST LIN CREST
CITY: INDIAN TRAIL
STATE: NC ZIP: 28079
WORK PHONE: _____
MOBILE PHONE: 704.363.6676
FAX: _____
E-MAIL: kcheek@eckhartConstruction.com

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: 704-336-5103, FAX: 704-336-6894

Revised on: 12/15/10

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.

_____ 9.7.17

Property Owner's or Owner's Legal Representative Signature — 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: _____

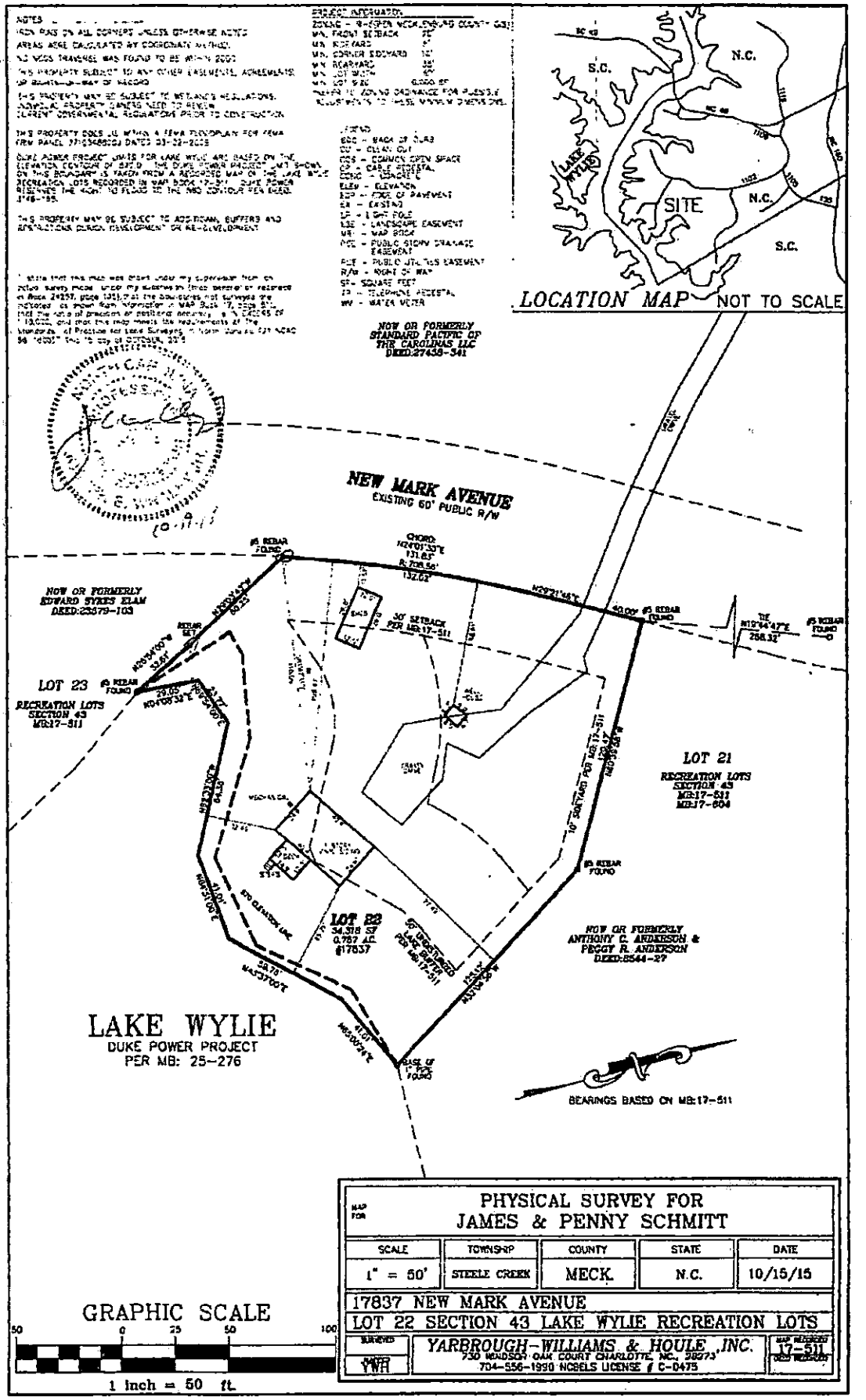
WELL APPLICATION FEE RECEIVED: $ _____ DATE FEE RECEIVED: _____

APPLICATION PROCESSED BY: _____

GWS FILE NUMBER ASSIGNED: _____

APPLICATION ID NUMBER ASSIGNED: _____

COMMENTS:


LOCATION MAP NOT TO SCALE
S.C.
N.C.
SITE
LAKE WYLIE
NEW MARK AVENUE
EXISTING 60' PUBLIC R/W
NOW OR FORMERLY STANDARD PACIFIC OF THE CAROLINAS LLC DEED:27458-341
NOW OR FORMERLY EDWARD SYKES ELAM DEED:23579-103
LOT 23
RECREATION LOTS SECTION 43 MB:17-511
LOT 22
34,318 SF
0.787 AC.
#17837
LOT 21
RECREATION LOTS SECTION 43 MB:17-511 MB:17-604
NOW OR FORMERLY ANTHONY C. ANDERSON & PEGGY R. ANDERSON DEED:8544-27
30' SETBACK PER MB:17-511
40' DRAINAGE PER MB:17-511
LAKE WYLIE
DUKE POWER PROJECT
PER MB: 25-276
BEARINGS BASED ON MB:17-511
GRAPHIC SCALE
1 inch = 50 ft.
PHYSICAL SURVEY FOR
JAMES & PENNY SCHMITT
SCALE 1" = 50'
TOWNSHIP STEELE CREEK
COUNTY MECK.
STATE N.C.
DATE 10/15/15
17837 NEW MARK AVENUE
LOT 22 SECTION 43 LAKE WYLIE RECREATION LOTS
YARBROUGH-WILLIAMS & HOULE, INC.
730 WINDSOR OAK COURT CHARLOTTE, NC., 28273
704-556-1990 NCBELS LICENSE # C-0475
MAP RECORDED 17-511

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

Sheet: 1 of 2
Property ID: 217-172-06
Lot #: NA
File #: 4967B
AppID: 8003

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Property Owner: Jeffrey Lee Onley
Address: 17837 New Mark Ave, Charlotte, NC 28278
Proposed Facility: 3 Bedroom House
Design Flow (.1949): 360 GPD
Location: 17837 New Mark Ave, Charlotte, NC 28278
Water Supply: [ ] Public [X] Individual [X] Well
Evaluation Method: [ ] Auger Boring [X] Pit
Type of Wastewater: [X] Sewage [ ] Industrial Process

Applicant: Miller Homes, LLC
Date Evaluated: 2/2/16
Property Size: 0.78 ac
Property Recorded: Unknown
[ ] Spring [ ] Municipal
[ ] Cut
[ ] 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 Conventional Trench
Pit #1	LS 8%	0 - 9	gr L	SS SP FR SEXP	>70"	56	NA	NA	4 chroma mottles around root channels 43 - 56"	PS IV 0.275	36"
		9 - 43	sbk C	S P FR SEXP							
		43 - 56	abk CL	S P FR SEXP							
		56 - 70	sap L	SS SP FR SEXP							
Pit #2	LS 10%	0 - 17	gr SCL	SS SP FR SEXP	>62"	62	NA	NA	4 chroma mottles around root channels 36 - 52"	PS IV 0.275	36"
		17 - 30	sbk SCL	S SP FR SEXP							
		30 - 52	abk C	S P FR SEXP							
		52 - 62	sbk SCL	SS SP FR SEXP							
Pit #3	LS 8%	0 - 8	gr L	SS SP FR SEXP	>74"	64	NA	NA		PS IV 0.3 drip 0.125	36"
		8 - 48	sbk C	S P FR SEXP							
		48 - 64	sbk SCL	S SP FR SEXP							
		64 - 74	sap L	SS SP FR SEXP							
Pit #4	LS 6%	0 - 6	gr L	SS SP FR SEXP	>44"	44	NA	NA		PS IV 0.3 drip 0.125	30"
		6 - 36	sbk C	S P FR SEXP							
		36 - 44	sbk CL	SS SP FR SEXP							

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	IIIbe	Vd
Site LTAR (gpd/sq ft)	0.275	0.125

Other Factors (.1946): NA
Soil Evaluation By: Jacob Presley, REHS, LSS
Others Present: Steve Melin, LSS
Site Classification (.1948): Provisionally Suitable
Site Evaluation By: Jeremy Michael, REHS
Others Present: Brad Hallman, REHS

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St, Suite 211 Charlotte, NC 28202
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 #: 30009142 GWS File #: 4967B Tax Parcel #: 217-172-06

- 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. 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.

I. This Improvement Permit Shall: Expire in Five (5) Years **Expiration Date (If Applicable):** 9/12/2022

Type of Installation: Residential - Modified Plot Plan Lot Number: 0

Structure Type: HOUSE Size (ft^2): 2971 # Bedrooms: 3 Max. Occup.: 6

Building Foundation: Crawl Space Water Supply: Private Well

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

Initial System Specifications:

Design Flow (gpd):	360	LTAR (gpd/ft^2):	0.275	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	1000
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	982	Total Trench Length (ft):	327
Maximum Trench Depth (in):	36	Depth of Media (in):	12	Distribution Device:	Distribution Box		

III. Repair System Type: Pretreatment with Drip Irrigation **System Classification:** Vd

Repair System Specifications:

Design Flow (gpd):	360	LTAR (gpd/ft^2):	0.125	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	1000
Trench Width (ft):	1	Trench Spacing (ft):	2	Absorption Area (ft^2):	2880	Total Trench Length (ft):	2880
Maximum Trench Depth (in):	12	Depth of Media (in):	N/A	Distribution Device:	Headworks (Drip Irr.		

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: Brad Hallman Owner/Legal Agent: KIRK W LHEEK
Print Name

Signature: Signature:

Date Issued: 9/12/2017

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St, Suite 211 Charlotte, NC 28202
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 #: 30009142 GWS File #: 4967B

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.
- This type of repair system requires the installation of a pump tank and all associated components. This type of system will require routine inspections by our office. The system owner is responsible for all fees associated with these inspections.
- This type of repair system requires the property owner to obtain a contract with a Certified Operator to perform routine inspections and maintenance on the system.
- This type of repair system requires periodic inspections by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- Proper well abandonment is required prior to receiving an Installation Approval from our office to install the septic system.
- 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.
- All waterlines must be located a minimum of 10 ft. from any part of the septic system.
- 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.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.

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.
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- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: Brad Hallman
Signature:
Date Issued: 9/12/2017

Owner/Legal Agent: KIPP W CHEEK
Print Name
Signature:

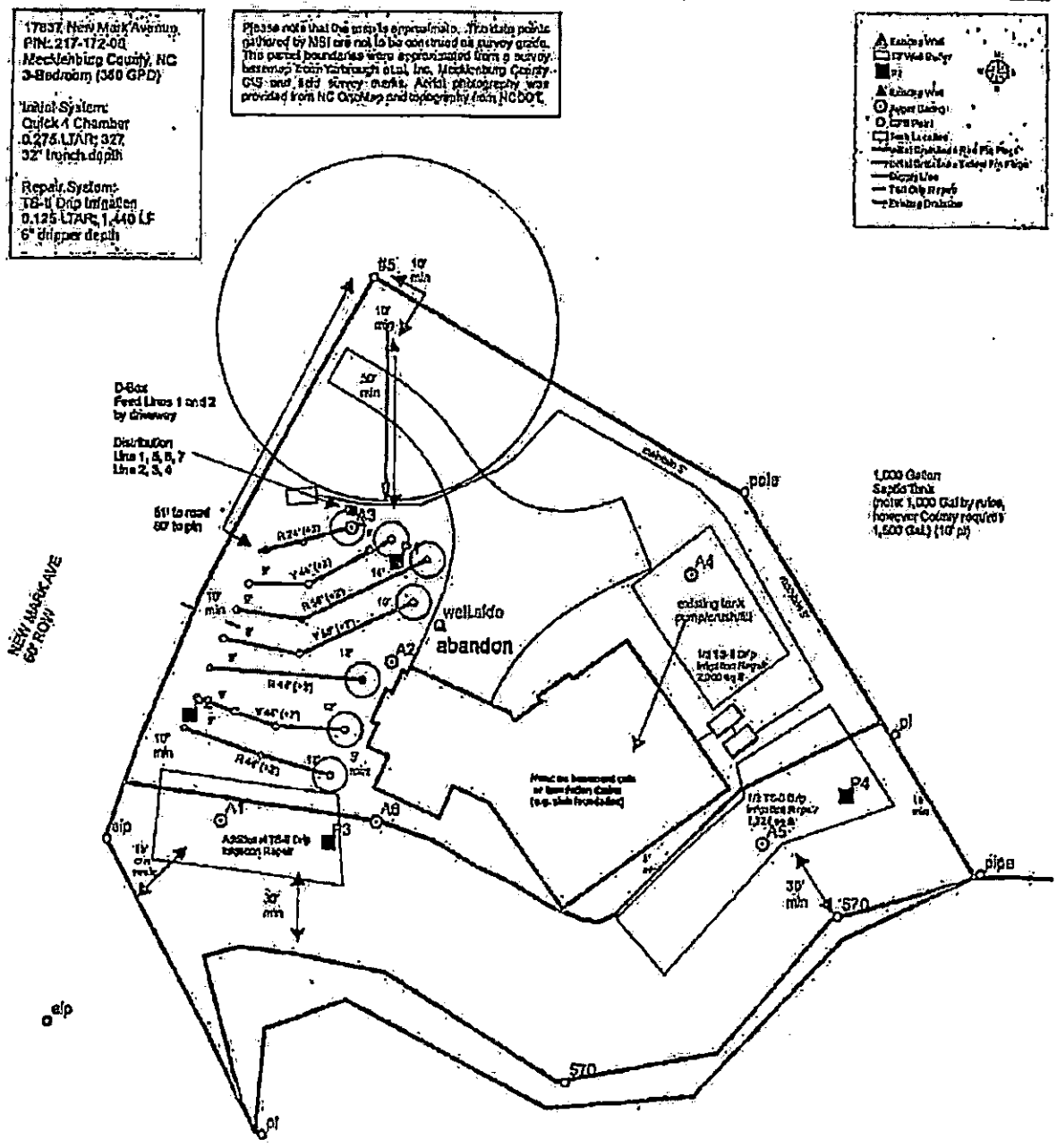
Soil and Onsite Wastewater Investigation Map- 17837 New Mark Avenue, PIN# 217-172-06, Lake Wylie (Meck. Co.), NC. (MSI (Sept. 2017))

17837 New Mark Avenue
PIN: 217-172-06
Mecklenburg County, NC
3-Bedroom (360 GPD)

Initial System:
Quick 4 Chamber
0.275 LTAR; 327
32" trench depth

Repair System:
TS-II Drip Irrigation
0.125 LTAR; 1,440 LF
6" dripper depth

Please note that the maps is approximate. The data points gathered by NSI are not to be construed as survey grade. The parcel boundaries were approximated from a survey basemap from Yarbrough et al, Inc, Mecklenburg County GIS, and field survey marks. Aerial photography was provided from NC OneMap and topography from NCDOT.



Signature

1 inch = 40 feet

0 40 80 160 240 Feet

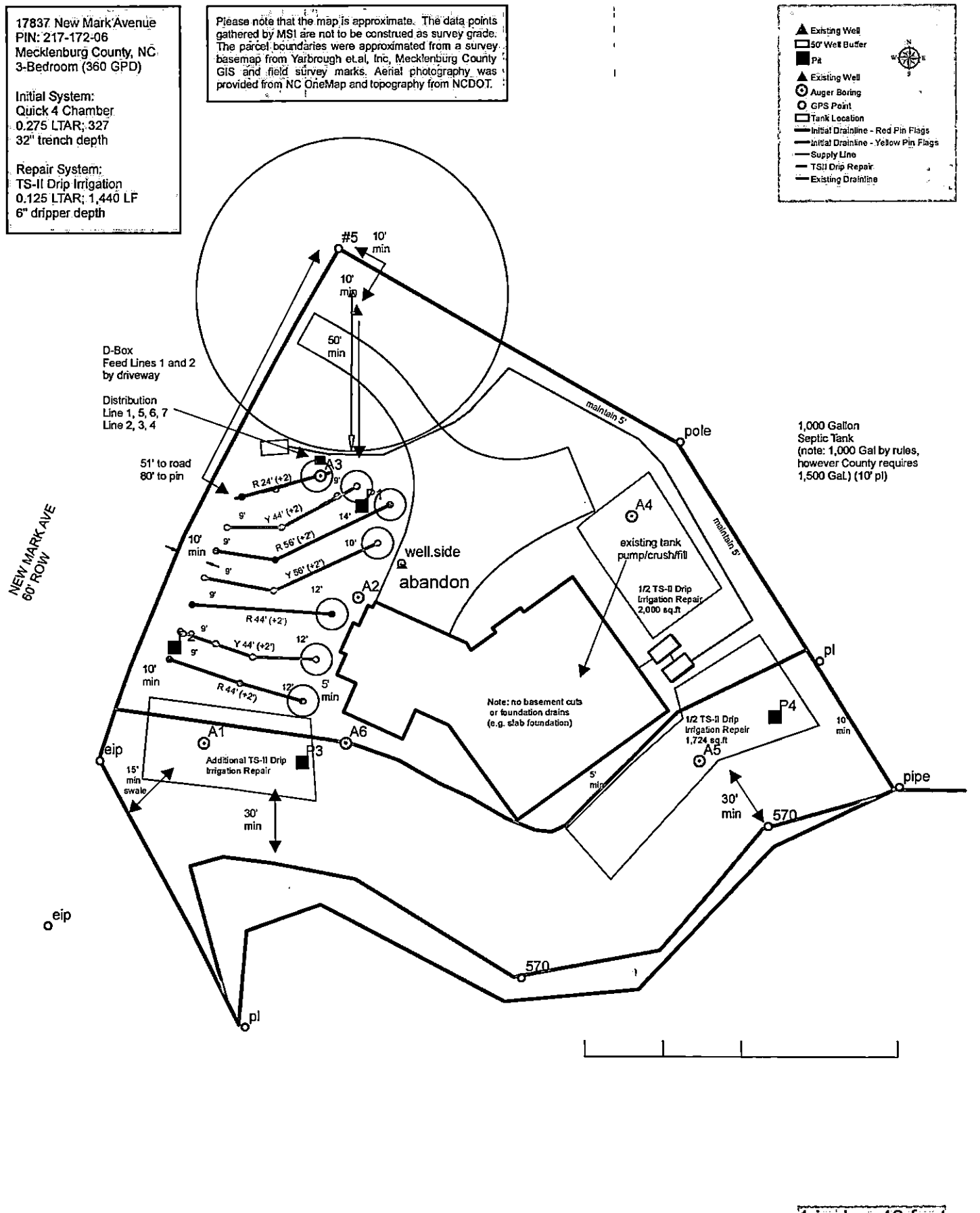
Soil and Onsite Wastewater Investigation Map. 17837 New Mark Avenue, PIN# 217-172-06, Lake Wylie (Meck. Co.), NC. (MSI (Sept. 2017))

17837 New Mark Avenue
PIN: 217-172-06
Mecklenburg County, NC
3-Bedroom (360 GPD)

Initial System:
Quick 4 Chamber
0.275 LTAR; 327
32" trench depth

Repair System:
TS-II Drip Irrigation
0.125 LTAR; 1,440 LF
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Please note that the map is approximate. The data points gathered by MSI are not to be construed as survey grade. The parcel boundaries were approximated from a survey basemap from Yarbrough et.al, Inc, Mecklenburg County GIS and field survey marks. Aerial photography was provided from NC OneMap and topography from NCDOT.



Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St, Suite 211 Charlotte, NC 28202
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 #: **30009142** GWS File #: **4967B** Tax Parcel #: **217-172-06**

- 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. 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.

I. This Improvement Permit Shall: Expire in Five (5) Years **Expiration Date (If Applicable):** 9/12/2022

Type of Installation: Residential - Modified Plot Plan Lot Number: 0

Structure Type: HOUSE Size (ft^2): 2971 # Bedrooms: 3 Max. Occup.: 6

Building Foundation: Crawl Space Water Supply: Private Well

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

Initial System Specifications:

Design Flow (gpd):	360	LTAR (gpd/ft^2):	0.275	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	1000		
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	982	Total Trench Length (ft):	327		
Maximum Trench Depth (in):	36	Depth of Media (in):	12	Distribution Device:	Distribution Box				

III. Repair System Type: Pretreatment with Drip Irrigation **System Classification:** Vd

Repair System Specifications:

Design Flow (gpd):	360	LTAR (gpd/ft^2):	0.125	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	1000		
Trench Width (ft):	1	Trench Spacing (ft):	2	Absorption Area (ft^2):	2880	Total Trench Length (ft):	2880		
Maximum Trench Depth (in):	12	Depth of Media (in):	N/A	Distribution Device:	Headworks (Drip Irr.				

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: Brad Hallman Owner/Legal Agent: _____
Print Name

Signature: _____ Signature: _____

Date Issued: 9/12/2017

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St, Suite 211 Charlotte, NC 28202
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 #: **30009142** GWS File #: **4967B**

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.
- This type of repair system requires the installation of a pump tank and all associated components. This type of system will require routine inspections by our office. The system owner is responsible for all fees associated with these inspections.
- This type of repair system requires the property owner to obtain a contract with a Certified Operator to perform routine inspections and maintenance on the system.
- This type of repair system requires periodic inspections by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- Proper well abandonment is required prior to receiving an Installation Approval from our office to install the septic system.
- 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.
- All waterlines must be located a minimum of 10 ft. from any part of the septic system.
- 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.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.

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: Brad Hallman Owner/Legal Agent: _____
Print Name

Signature: _____ Signature: _____

Date Issued: 9/12/2017

MOUNTAIN SOILS, INCORPORATED

71 LEDFORD DRIVE FRANKLIN, NC 28734
EMAIL: SJMELIN@EARTHLINK.NET WEBSITE: WWW.MOUNTAINSOILS.COM
CELL: (828) 551-9903 OFFICE/FAX: (828) 524-5962

May 9, 2018

Mr. Jeremy Michael, REHS
Mecklenburg County Public Health
700 N. Tryon Street, Suite 208
Charlotte, NC 28202

Re: 17837 New Mark Avenue – Drainfield Distribution (PIN# 217-172-06)

Dear Mr. Michael,

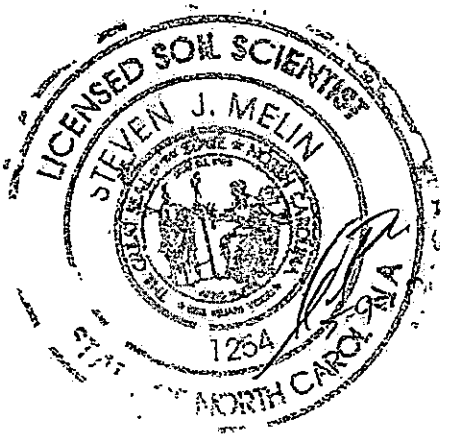
This letter is intended document that I am in support of utilizing a distribution box instead of a pressure manifold at 17837. Please note that my previous proposal in September of 2017 illustrated a distribution box. I have attached this map to the email.

I greatly appreciate your time. Please feel free to contact me if additional information is required.

Kind Regards,

1254
5-9-18
LSS

Steven J. Melin, LSS
Project Manager – Environmental Services
Mountain Soils, Inc.



MOUNTAIN SOILS, INCORPORATED

71 LEDFORD DRIVE FRANKLIN, NC 28734
EMAIL: MOUNTAINSOILS@FRONTIER.COM WEBSITE: WWW.MOUNTAINSOILS.COM
OFFICE/FAX: (828) 524-5962 CELL: (828) 421-3149

ON-SITE SOIL AND SITE EVALUATION

17837 New Mark Avenue
Soil Scientist Report
Lake Wylie (Mecklenburg County), North Carolina
Tax ID# 217-172-06
3-Bedroom Home

Prepared by:
MOUNTAIN SOILS, INC.
15 Lone Coyote Ridge
Fletcher, NC 28732
828-551-9903
sjmelin@earthlink.net

GWS Septic System Design Review
GWS File #: 49678 Approved Disapproved
Design Review:
Field Review:
*Projects are not considered "APPROVED" until both sections above are completed and indicate an APPROVED status.

LICENSED SOIL SCIENTIST
STEVEN J. MELIN
1254
STATE OF NORTH CAROLINA

Steven J. Melin #1254

Steven J. Melin, LSS

September 11, 2017

MOUNTAIN SOILS, INCORPORATED

71 LEDFORD DRIVE FRANKLIN, NC 28734
EMAIL: MOUNTAINSOILS@FRONTIER.COM WEBSITE: WWW.MOUNTAINSOILS.COM
OFFICE/FAX: (828) 524-5962 CELL: (828) 421-3149

17837 New Mark Avenue **updated 09/11/2017**
Lake Wylie (Mecklenburg County), NC (PIN# 217-172-06)

Onsite Wastewater Septic System Overview:

The following report has been prepared by Mountain Soils, Inc. (MSI) for 17837 New Mark Avenue in Huntersville (Mecklenburg County), North Carolina. Please note that the following report is intended to be permitted by Mecklenburg County, and not under the EOP route.

Application Type:	IP/AC (5-BDR)					
Number of Bedrooms:	Proposed Septic System	**GPD**	**Soil Group**	**Soil Texture**	**LTAR**	**Linear Feet Required Calculation (in Square and Linear Feet)**
Initial Septic System:	Quick 4 Chambers	360	III	Clay	0.275	360 gpd / 0.275 gpd/ft^2 = 1,309 ft^2 1,309 ft^2/ 4 ft. trench eq. = 327 ft. (See calculations below)
Repair Septic System:	TS-II Aerobic Drip Irrigation	360	III	Clay	0.125	360 gpd / 0.125 gpd/ft^2 = 2,880 ft^2 or 1,440 linear feet of drip tubing 2' o/c (See calculations below)
Easement Required:	NO					

\

Onsite Wastewater Septic System Configuration:

The following system type/design has been prepared by MSI 17837 New Mark Avenue in Huntersville (Mecklenburg County), North Carolina. The onsite system design/layout

MOUNTAIN SOILS, INCORPORATED

71 LEDFORD DRIVE FRANKLIN, NC 28734
EMAIL: MOUNTAINSOILS@FRONTIER.COM WEBSITE: WWW.MOUNTAINSOILS.COM
OFFICE/FAX: (828) 524-5962 CELL: (828) 421-3149

is for three-bedrooms. The septic area has been evaluated and determined to contain Group IV soils (the most restrictive texture being clay). A long-term acceptance rate (LTAR) of 0.275 has been assigned to these soils (0.125 TS-II aerobic drip irrigation) *(See attached soil descriptions).*

MSI recommends utilizing a Quick 4 Chamber system for the septic drainfield. The (initial) septic system will require 327 linear feet of material to accommodate the 3-bedroom septic system. The trench depth will need to be 32-inches deep (low side of trench). It is anticipated that a pump tank set-up will be required to supply effluent to the drainfield. The square and linear footage required for installation of this system is illustrated below.

3 bedrooms x 120 gallon per bedroom per day = 360 gallons per day (gpd)
Group IV, Clay, 0.275 gallons per square foot per day (LTAR)
Square Footage required: 360 gpd / 0.275 LTAR = 1,309 square feet
1,309 ft^2/4' trench equivalency= 327 Linear Feet

MSI recommends utilizing a TS-II aerobic drip irrigation type system for the repair septic drainfield. The repair septic system will require 1,440 linear feet of drip irrigation tubing to accommodate the 3-bedroom septic system. The recommended drip tubing depth is 6-inches. The square and linear footage required for installation of this system is illustrated below.

3 bedrooms x 120 gallon per bedroom per day = 360 gallons per day (gpd)
Group IV, Clay, 0.275 gallons per square foot per day (0.125 TS-II Drip LTAR)
Square Footage required: 360 gpd / 0.125 LTAR = 2,880 square feet or 1,440 linear feet 2' o/c

The proposed septic system area has been delineated in the field. It is proposed to utilize 327 linear feet of Quick 4 Chamber material for the septic drainfield. *(See attached site plan for detail.)* It is also recommended to delineate the system again prior to installation.

MOUNTAIN SOILS, INCORPORATED

71 LEDFORD DRIVE FRANKLIN, NC 28734
EMAIL: MOUNTAINSOILS@FRONTIER.COM WEBSITE: WWW.MOUNTAINSOILS.COM
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Onsite Wastewater Septic System Setbacks (Buffers) and Site Recommendations:

The following items are recommended by MSI to preserve the integrity of the proposed site and surrounding area.

1. MSI recommends encasing all septic system supply lines where they cross roads, drives and/or power lines (*pursuant to Laws and Rules for Sewage Treatment, and Disposal Systems 15A NCAC 18A .11,440*)

2. MSI recommends diverting stormwater runoff away from all proposed septic areas.

3. A 1,000 gallon septic tank and 1,000 gallon pump tank are recommended. The pump tank is proposed to feed a distribution box which will feed three-hundred twenty-seven feet (327') of drainline by serial distribution (see attached site plan). Please note that credit is provided for the end caps of chamber drainlines.

4. The proposed MSI septic system designs/layouts are based on dodging large trees or other obstacles that may hinder the installation or operation of the septic system.

5. The proposed initial septic system and repair system must maintain a setback (Buffer), specified by North Carolina Department of Environment and Natural Resources (NCDENR), including: 5' horizontal from the house and all foundations, 50' horizontal from any surface water, 100' horizontal minimum from all wells (can be reduced to 50' in circumstances), 10' horizontal from all property lines and water lines, 20' horizontal from any other septic system (except repair) and 15' horizontal from cut banks (unless filled and compacted, 5' horizontal setback)

Soil and Onsite Wastewater Investigation Map. 17837 New Mark Avenue, PIN# 217-172-06. Lake Wylie (Meck. Co.), NC. (MSI (Sept. 2017))

17837 New Mark Avenue
PIN: 217-172-06
Mecklenburg County, NC
3-Bedroom (360 GPD)

Initial System:
Quick 4 Chamber
0.275 LTAR; 327 LF
32" trench depth

Repair System:
TS-II Drip Irrigation
0.125 LTAR; 1,440 LF
6" dripper depth

Please note that the map is approximate. The data points gathered by MSI are not to be construed as survey grade. The parcel boundaries were approximated from a survey basemap from Yarbrough et.al, Inc., Mecklenburg County GIS and field survey marks. Aerial photography was provided from NC OneMap and topography from NCDOT.

- Existing Well
- 50' Well Buffer
- Pit
- Existing Well
- Auger Boring
- GPS Point
- Tank Location
- Initial Drainline - Red Pin Flags
- Initial Drainline - Yellow Pin Flags
- Supply Line
- TSII Drip Repair
- Existing Drainline

50' min

D-Box
Feed Lines 1 and 2 by driveway

Distribution
Line 1, 5, 6, 7 (165')
Line 2, 3, 4 (165')

5' min

A3

R 24' (+2)

10' min

9'

P1

51' to road
80' to pin

9'

14'

Y 44' (+2)

5' min cross-over

9'

10'

R 56' (+2')

well.side

9'

Y 56' (+2')

9'

12'

A2

R 44' (+2')

9'

10' min

12'

5' min

P2

Y 44' (+2')

9'

R 44' (+2')

12'

A1

A6

P3

1 inch = 15 feet

0 15 30 60 90 Feet

MOUNTAIN SOILS, INCORPORATED

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18737 New Mark Avenue 9/11/2017
Mecklenburg County, NC (PIN# 217-172-06)
3-BDR (360 GPD)

Septic System Calculation Worksheet

Initial System: Quick 4 Chamber

Trench Bottom Depth: 32" (low side of trench)

Gal / Day	Trench Width (Inches)	Trench Equivalency (Feet)	Soil Depth on 0% Slope
360	36	4	44

Slope	Auger #	Soil Depth (in.)	Total Suitable Pit Depth/ Sap. Depth (in.)	Soil Needed (slope adjusted) (in.)	[1] Total Depth of Saprolite Required (2:1 ratio) factoring Soil Depth (in.)	Fill Material Required (in.)	Morphological Based Field LTAR
8%	A1	48	48	46.9	N/A	0	0.3
9%	A2	48	48	47.2	N/A	0	0.3
8%	A3	48	48	46.9	N/A	0	0.3
9%	A4	47	47	47.2	N/A	0	0.3
					LTAR Utilized		0.28
					Linear Feet Required		327

Repair System: Aerobic Drip Irrigation
Recommended Drip Tubing Depth: 6"

Gal / Day	Trench Width (Inches)	Trench Equivalency (Feet)	Soil Depth on 0% Slope
360			18

Slope	Pit#	Soil Depth (in.)	Total Suitable Pit Depth/ Sap. Depth (in.)	Soil Needed (slope adjusted) (in.)	[1] Total Depth of Saprolite Required (2:1 ratio) factoring Soil Depth (in.)	Fill Material Required (in.)	Morphological Based Field LTAR
8%	A1	48	48	18.0	N/A	0	0.3
9%	A2	48	48	18.0	N/A	0	0.3
8%	A3	48	48	18.0	N/A	0	0.3
9%	A4	45	45	18.0	N/A	0	0.3
					LTAR Utilized		0.13
					Linear Feet Required		1440

[1] [(soil depth needed-soil depth) x 2] + Soil depth = sap. Depth needed.
Above equation only to be used if the difference in soil depth needed and actual soil depth present = 12" or less.

SOIL/SITE EVALUATION

(Continuation Sheet)

Sheet ___ of ___

DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

17837 New Mark Ave (Lakewyld)

PROPERTY ID #:
DATE OF EVALUATION: 2-2-16
COUNTY: Moore

LICENSED SOIL SCIENTIST STEVEN J. MEIER 1254 STATE OF SOUTH CAROLINA

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %		HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
A 5	Lwfs 10+	Ap	0-4	1mgr /cL	FR	10YR 3/3	>44"			IV 0.3 >27" Depth
		Bt	4-18	2m ABK /C	FR (ST/B) Mi	10YR 5/4				
		Bt	18-27	2msbk /C	FR (ST/M)	2.5YR 4/6				
		Bt	27-44	2msbk /CL	FR (ST/PL)	2.5YR 5/6 mottles			-	
A 6	Lwfs 1+	Ap	0-6	1mgr /L	FR	5YR 3/4	44" / >48"	L	-	IV 0.3
		Bt	6-22	2msbk /C	FR (ST/PL)	2.5YR 4/6				
		BC	22-32	1to2 msbk /CL/L	FR	2.5YR 5/6				
		BC2	32-44	1msbk /SL	FR	5YR 5/6 +pm				
		CB	44-48	pMa /SL	FR	pm + 5YR 5/6				
P 1	Lwfs 9%	Ap	0-9	2mgr /L	FR	10YR 3/3	56" / >70"	L	-	IV 0.35 SJM 0.27S
		Bt	9-43	2msbk /C	FR (ST/M)	10YR 4/3				
		BC	43-56	2 1m 2msbk 4LK /CK	FR	2.5YR 5/1				
		CB	56-70	pm /L	FR	pm				
				Initial						
P 2	Lwfs 10%	Ap	0-6	1mgr /L	FR	5YR 3/2	>64"		L	IV 0.35 SJM 0.27S
		Bt	6-18	1msbk /SCL	FR (SS/ST)	5YR 5/6				
		Bt	18-64	2m ABK /C	FR (ST/PL)	10R 5/4				
				chroma 4's on						
				Init. root channels						
P 3	Lwfs 10+	Ap	0-6	1mgr /L	FR	5YR 3/3	48" / >60"	L		0.3 0.12S drip
		Bt	6-37	2msbk /C	FR/FI (ST/PL)	2.5YR 3/6				
		BC	37-48	1msbk /CL	FR	2.5YR 5/6 +pm				
		B/E/A	48-60	MA to 1sbk /L	FR	pm + 5YR 5/6				
		CB		Redox	Acc					

COMMENTS:

P4 - Ap 0-4 L 0.12S 10YR 2/2 2mgr FR 0.3 LTAR
Bt 1 4-27 C 36" CL 10R 4/6 2m ABK FI 0.12S drip
Bt 2 27-42 CL 2.5YR 4/6 1to2msbk FR w/TS II (setbacks)
BC 42-52 CL/L 5YR 5/6 1msbk FR

SOIL/SITE EVALUATION

(Continuation Sheet)

Sheet ____ of ____

DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

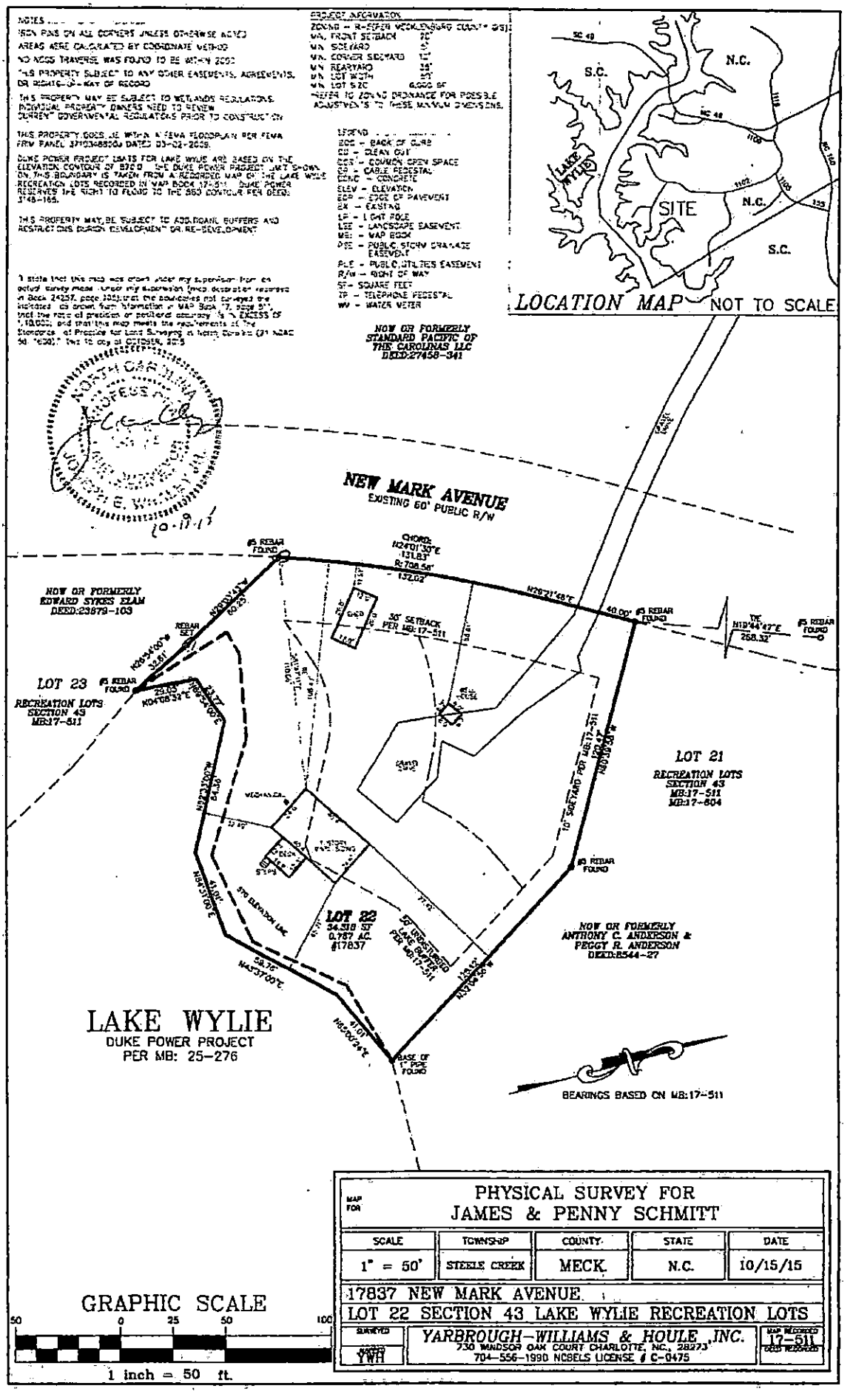
17837 New Mark Ave (Lake Wylie)

PROPERTY ID #: ____
DATE OF EVALUATION: 1-21-16
COUNTY: Mecklenburg

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %		HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
A 1	(Coss) Cc 8+	Ap	0-4	1 mgr /sL	Fr	5YR 3/3	>48"			IV 0.3 @ 44"
		Bt	4-18	1 ms blk /scL	Fr	5YR 4/4				
		Bt	18-27	2 m sbk /sc	Fr	5R 3/4				
		Bt	27-48"	2m sbk /c	Fr/Fi (3%) slip partings	2.5YR 4/6 + pm — some chroma 4's (pm?)				
A 2	(Coss) 9+	BA	0-4	1 F sbk /sL	Fr	5YR 4/4	>48"			IV 0.3+
		Bt	4-13	2 m ABk /c	Fi (3% pf)	10R 4/6				
		Bt	13-33	2 m sbk /cL	Fr (5% pf)	10R 5/6 + pm				
		Bt	33-48"	1 m sbk /scL	Fr (10-15%)	10R 5/6 + pm				
A 3	(Coss) 8+	Ap	0-8	1 mgr /sL	Fr	5YR 3/2	>48"			IV 0.3+
		Bt	8-16	2 m ABk /c	Fi (3% pf)	10R 4/6				
		Bt	16-31	2 m sbk /cL	Fr	2.5YR 5/6				
		Bt	31-48"	1 to 2 m sbk /scL	Fr	2.5YR 5/6				
A 4	Ln 9+	Ap	0-6	1 mgr /L	Fr		>45"			IV 0.3+
		Bt	6-33	2 m sbk /c	Fr (3% pf)	7.5YR 5/4				
		Bt	33-45"	1 to 2 m sbk /scL	Fr	7.5YR 5/6 +sap.				

LICENSED SOIL SCIENTIST
STEVEN J. MELIN
1254
STATE OF NORTH CAROLINA
1/21/16

COMMENTS: ____


NOTES
IRON PINS ON ALL CORNERS UNLESS OTHERWISE NOTED
AREAS WERE CALCULATED BY COORDINATE METHOD
NO NGS TRAVERSE WAS FOUND TO BE WITHIN 2000'
THIS PROPERTY SUBJECT TO ANY OTHER EASEMENTS, AGREEMENTS, OR RIGHTS-OF-WAY OF RECORD
THIS PROPERTY MAY BE SUBJECT TO WETLANDS REGULATIONS. POTENTIAL PROPERTY OWNERS NEED TO REVIEW CURRENT GOVERNMENTAL REGULATIONS PRIOR TO CONSTRUCTION
THIS PROPERTY DOES LIE WITHIN A FEMA FLOODPLAIN PER FEMA FIRM PANEL 3710348850J DATED 03-02-2009.
DUKE POWER PROJECT LIMITS FOR LAKE WYLIE ARE BASED ON THE ELEVATION CONTOUR OF 570.0'. THE DUKE POWER PROJECT LIMIT SHOWN ON THIS BOUNDARY IS TAKEN FROM A RECORDED MAP OF THE LAKE WYLIE RECREATION LOTS RECORDED IN MAP BOOK 17-511. DUKE POWER RESERVES THE RIGHT TO FLOOD TO THE 580 CONTOUR PER DEED: 3148-165.
THIS PROPERTY MAY BE SUBJECT TO ADDITIONAL BUFFERS AND RESTRICTIONS DURING DEVELOPMENT OR RE-DEVELOPMENT
I state that this map was drawn under my supervision from an actual survey made under my supervision (deed description recorded in Book 24257, page 305); that the boundaries not surveyed are indicated as drawn from information in MAP Book 17, page 511; that the ratio of precision or positional accuracy is 1 in EXCESS OF 10,000; and that this map meets the requirements of "the Standards of Practice for Land Surveying in North Carolina (21 NCAC 56 .1604)." This 19 day of OCTOBER, 2015
PROJECT INFORMATION
ZONING - R-15PEN MECKLENBURG COUNTY (RS)
MIN. FRONT SETBACK 30'
MIN. SIDEYARD 5'
MIN. CORNER SIDEYARD 10'
MIN. REARYARD 35'
MIN. LOT WIDTH 50'
MIN. LOT SIZE 6,000 SF
REFER TO ZONING ORDINANCE FOR POSSIBLE ADJUSTMENTS TO THESE MINIMUM DIMENSIONS.
LEGEND
BOC - BACK OF CURB
CO - CLEAN OUT
CSP - COMMON OPEN SPACE
CT - CABLE TELEVISION
CONC - CONCRETE
ELEV - ELEVATION
EOP - EDGE OF PAVEMENT
EX - EXISTING
LP - LIGHT POLE
LSE - LANDSCAPE EASEMENT
MB: - MAP BOOK
PSE - PUBLIC STORM DRAINAGE EASEMENT
PUE - PUBLIC UTILITIES EASEMENT
R/W - RIGHT OF WAY
SF - SQUARE FEET
TP - TELEPHONE PEDESTAL
WM - WATER METER
NOW OR FORMERLY STANDARD PACIFIC OF THE CAROLINAS LLC DEED:27458-341
LOCATION MAP NOT TO SCALE
S.C.
N.C.
SITE
LAKE WYLIE
NC 49
SC 49
NEW MARK AVENUE
EXISTING 60' PUBLIC R/W
#5 REBAR FOUND
#5 REBAR SET
CHORD: N24°01'30"E 131.83'
R:708.54'
132.02'
N78°21'48"E
40.00'
NOW OR FORMERLY EDWARD SYKES ELAM DEED:23879-103
N20°34'00"W 60.25'
N20°34'00"W 32.61'
LOT 23
RECREATION LOTS SECTION 43 MB:17-511
N24°08'32"E 29.03'
N23°31'00"W 64.36'
30' SETBACK PER MB:17-511
N78°21'48"E 258.32'
LOT 21
RECREATION LOTS SECTION 43 MB:17-511 MB:17-804
N10°08'28"W 120.47'
10' SIDEYARD PER MB:17-511
WOODSHED
1 STORY BRICK DWG
EP
CONC
LOT 22
34,318 SF
0.787 AC.
#17837
575' ELEVATION LINE
50' UNDISTURBED LAKE BUFFER PER MB:17-511
N10°08'28"W 135.15'
N43°37'00"E 58.76'
N65°00'24"E 41.01'
BASE OF 1" PIPE FOUND
NOW OR FORMERLY ANTHONY C. ANDERSON & PEGGY R. ANDERSON DEED:8544-27
LAKE WYLIE
DUKE POWER PROJECT
PER MB: 25-276
BEARINGS BASED ON MB:17-511
GRAPHIC SCALE
50 0 25 50 100
1 inch = 50 ft.
MAP FOR
PHYSICAL SURVEY FOR
JAMES & PENNY SCHMITT
SCALE 1" = 50'
TOWNSHIP STEELE CREEK
COUNTY MECK.
STATE N.C.
DATE 10/15/15
17837 NEW MARK AVENUE
LOT 22 SECTION 43 LAKE WYLIE RECREATION LOTS
SURVEYED
DRAWN YWH
YARBROUGH-WILLIAMS & HOULE, INC.
730 WINDSOR OAK COURT CHARLOTTE, NC., 28273
704-556-1990 NCBELS LICENSE # C-0475
MAP RECORDED 12-511
DEED REFERENCE

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

Septic System Pre-Construction Meeting Checklist

File # 496713 App # 9142 Tax Parcel # 217-172-06

Property Owner: Kipp Cheek

Job Location Address: New Mark Ave 17837 New Mark Ave.

City: Charlotte State: NC Zip Code: 28278

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

   ☑ YES ☐ NO

   Comments: Closet in 4th Bedroom removed

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:

*** 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.

Bradley W. Hallman
Authorized Agent

5/15/18
Date

Steve Autry
Others Present

FEE: 200.00
DATE: 9/18/2017

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

MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES

FILE NUMBER: 4967B

PERMIT NUMBER: 30009142

PARCEL NUMBER: 21717206

JOB LOCATION INFORMATION

ADDRESS: 17837 NEW MARK AVE

CITY: CHARLOTTE **STATE: NC** **ZIP:** 28278

ISSUED TO: KIPP CHEEK

CONSTRUCTION AUTHORIZATION ISSUANCE DATE: 9/14/2017

CONSTRUCTION AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 30009142, 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 Bradley W. Hallman

MOUNTAIN SOILS, INCORPORATED

71 LEDFORD DRIVE FRANKLIN, NC 28734
EMAIL: SJMELIN@EARTHLINK.NET WEBSITE: WWW.MOUNTAINSOILS.COM
CELL: (828) 551-9903 OFFICE/FAX: (828) 524-5962

June 27, 2018

Mr. Bradley Hallman, REHS
Mecklenburg County Public Health
700 N. Tryon Street, Suite 208
Charlotte, NC 28202

Re: 17837 New Mark Avenue – (Soil Scientist) Septic Installation Verification;
(PIN# 217-172-06)

Dear Mr. Hallman,

This letter is intended satisfy the requirement that the system at 17837 New Mark Avenue was installed according to recommendations in the Soils Report.

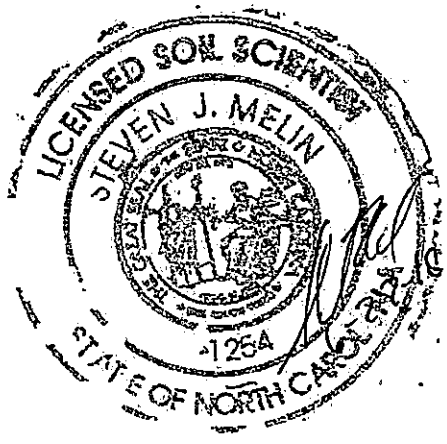
I hereby certify that the system was designed and installed consistent with the Soils Report. This included installing a 1,000 gallon septic tank and 1,000 gallon pump tank. Please note that the 0.30 LTAR and 32" trench depth were utilized as specified in the Soils Report for the 3-bedroom septic system, which feeds 300 linear feet of 25% Reduction material.

I greatly appreciate your time. Please feel free to contact me if additional information is required.

Kind Regards,

, LSS # 1254 6-27-18

Steven J. Melin, LSS
Project Manager – Environmental Services
Mountain Soils, Inc.



Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

OPERATION PERMIT for an ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 49670 Permit #: 9142 Tax Parcel #: 217-172-06

Property Owner: Kipp Cheek

Job Location Address: 17837 New Mark Ave

City: Charlotte State: NC Zip Code: 28278

Operation Permit Issuance Date: 7/9/18 Contractor Name: Steve Autry

Permitted Design Flow: 360 GPD Liquid Capacity of Dosing Tank: 1000 gallons

Liquid Capacity of Septic Tank: 1000 gallons Manufacture Dellinger Effluent Pump Model: Myers ME45

Drainfield Installation ☐ N/A

Trench Depth: _____ inches

Trench Width: _____ feet

Line Spacing: _____ feet (O.C.)

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) IIIb

Depth of Cover: _____ inches

Distribution Device: _____

Bed Installation *(For Repair Installations ONLY.)* ☒ N/A

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Depth of Cover: _____ inches

Distribution Device: _____

Water Supply Source

☐ Municipal ☒ Private Well ☐ Community Well

☐ Other _____

System Installation Setbacks

Distance from Building Foundation: _____ feet

Distance from Property Line: _____ feet

Distance from Water Supply Source: _____ feet

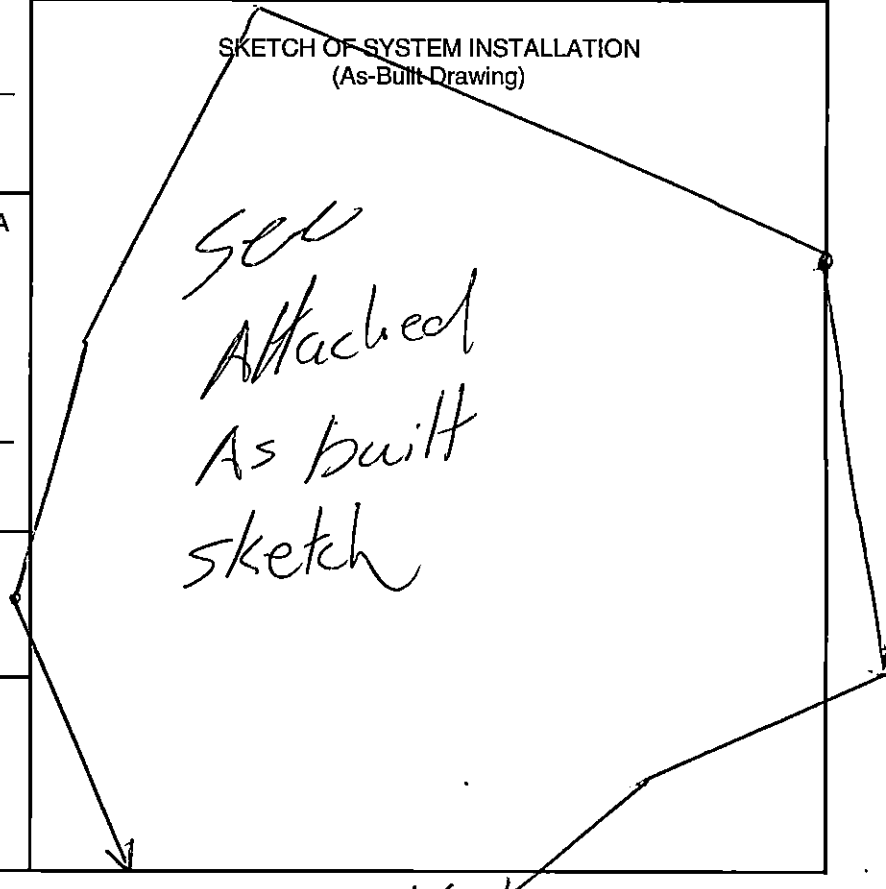
Inspection Dates

Tank(s) Inspected: 5/23/18

Excavation Inspected: 5/23/18

Pump & Controls Inspected: 6/27/18

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)



☒ The undersigned has inspected the Septic Tank System described above, and certifies it has been ☒ installed ☐ altered ☐ repaired ☒ as detailed in the plot above ☐ in accordance with the permit issued and meets the provisions of 15A NCAC 18A. 1900, "Laws and Rules for Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. The issuance of this Operation Permit does not in any way guarantee that the system will operate properly or relieve any person now or hereafter owning, controlling, or using such system from any liability resulting from the failure of the system to operate properly. This document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 15A NCAC 18A. 1900 in addition to those listed below under "Comments." This document shall be null and void if any information contained in the application is untrue or if any additions are made to the property which would increase the requirements for said system.

Notice: Disturbance of the designated repair area may result in the Suspension or Revocation of this permit.

Comments: System Classification & Type: IIIb IQ4/P/NA/NA

DHHS Authorized Agent: Bradley W. Hallman Signature: _____

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DENR
Division of Environmental Health
On-Site Wastewater Section

OPERATION PERMIT for an
ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 49673 Permit #: 9142 Tax Parcel #: 217-172-06

Property Owner: Kipp Cheek

Job Location Address: 17832 New Mark Ave

City: Charlotte State: NC Zip Code: 28278

OPERATION PERMIT CONDITIONS:

I. Performance: System shall perform in accordance with 15A NCAC 18A .1961.

II. Monitoring: System shall be monitored as required by 15A NCAC 18A .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.

IV. Operation: System shall be operated in accordance with 15A NCAC 18A .1961.

System Classification: IIIb

*Operation Permits for Type V and VI systems expire five (5) years from the date of issuance (in accordance with Table V(a)). The system owner must contact GWS six (6) months prior to expiration for permit renewal.

Subsurface system operator required: Yes ☐ No ☒

☐ This type of system requires the system owner to maintain a contract with a certified operator to perform system inspection, maintenance, and reporting as required in 15A NCAC 18A .1961. and Table V(a). The system owner is responsible for all fees associated with these services.

☐ System does not require inspection by GWS on a routine frequency.

☒ System requires inspection by GWS once every five (5) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every three (3) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every twelve (12) months. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every six (6) months. The system owner is responsible for all fees associated with the inspection.

V. Other:

DENR Authorized Agent: Bradley W. Hallman Date: 7/9/18

Signature:

Soil and Onsite Wastewater Investigation Map- 17837 New Mark Avenue, PIN# 217-172-06. Lake Wylie (Meck. Co.), NC. (MSI (Sept. 2017))

17837 New Mark Avenue
PIN: 217-172-06
Mecklenburg County, NC
3-Bedroom (360 GPD)

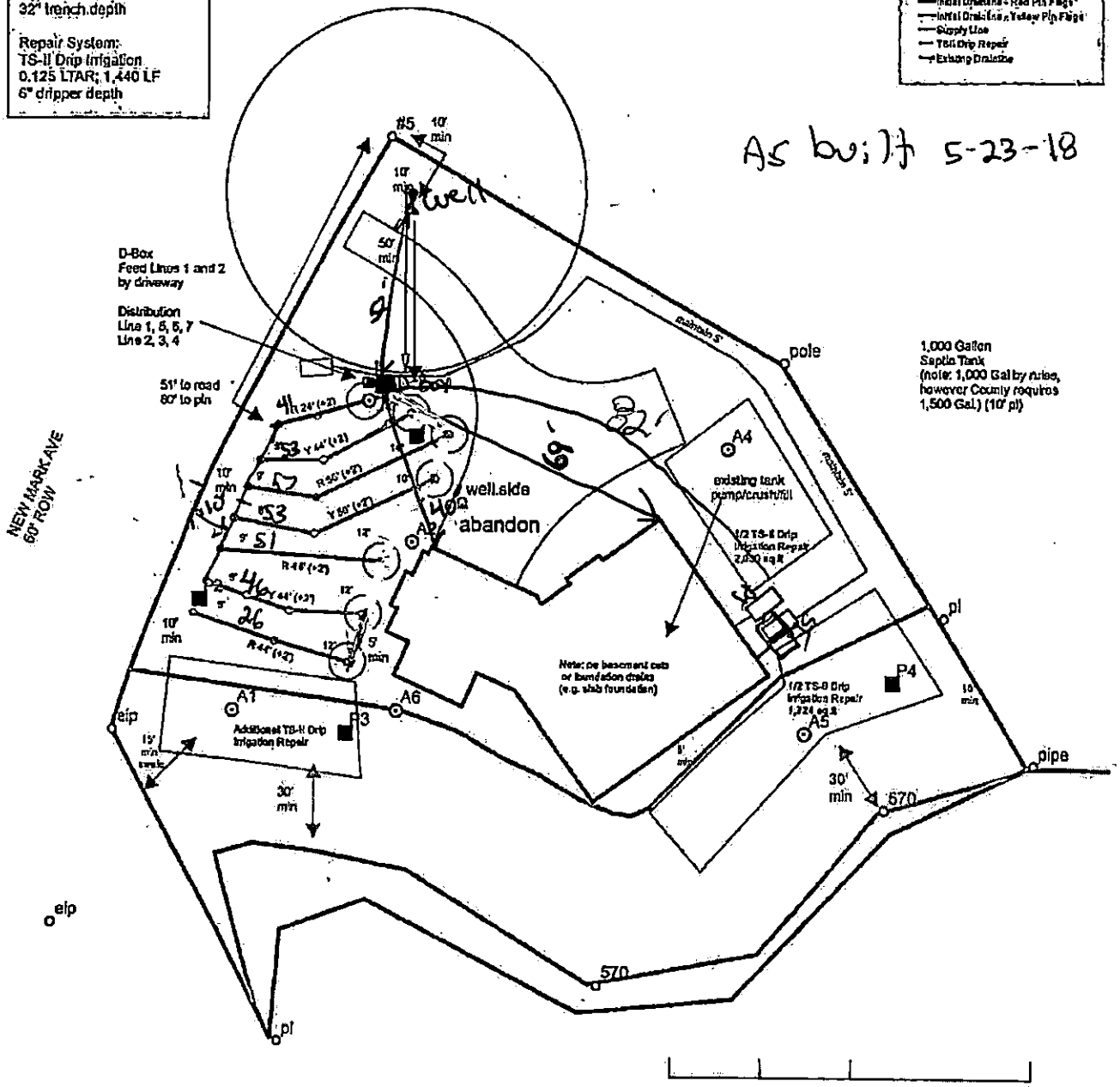
Initial System:
Quick 4 Chamber
0.275 LTAR; 327
32" trench depth

Repair System:
TS-II Drip Irrigation
0.125 LTAR; 1,440 LF
6" dripper depth

Please note that the map is approximate. The data points gathered by MSI are not to be construed as survey grade. The parcel boundaries were approximated from a survey basemap from Yarbrough et.al, Inc, Mecklenburg County GIS and field survey marks. Aerial photography was provided from NC OneMap and topography from NCDOT.

Existing Well
50' Well Buffer
P4
Existing Well
Auger Boring
DPD Point
Tank Location
Initial Drainline - Red Pin Flags
Initial Drainline - Yellow Pin Flags
Supply Line
TS-II Drip Repair
Existing Drainline

As built 5-23-18



X
signature

1 inch = 40 feet

0 40 80 160 240 Feet

13 41
13 53
13 57
58
51
46
26

Dellinger 1000.

myeres ME 45



Old Permit

MECKLENBURG COUNTY
Public Health

Gibbie Harris, MSPH, BSN
Interim Health Director

(704) 336-4700

September 12, 2017

Kipp Cheek
6207 Creft Cir.
Indian Trail, NC 28079

RE: **Notice of Intent to Revoke Improvement Permit**

Dear Mr. Cheek:

The Mecklenburg County Health Department inspected the site for the on-site wastewater system located at **17837 New Mark Ave.**, File # 4967B for compliance with the Laws (Article 11 of Chapter 130A of the North Carolina General Statutes), Rules (15A NCAC 18A .1900 et seq.), and Improvement Permit # **30008003** conditions. As a result of this inspection, the Department has determined the following conditions:

> ***System type has been modified by design consultant from PPBPS to an Accepted System (25%) reduction***

This is to notify you that based on these changes, the Department intends to revoke your Improvement Permit 30 days from the date of this notice.

If the health department determines that all of the violations have been corrected before thirty (30) days expire, the revocation will not go into effect. If the permit is revoked, you must apply for a new Improvement Permit and meet the current laws and rules necessary to obtain a new permit.

You have a right to an informal review of this decision. You may request an informal review by the environmental health supervisor at the local health department. You may also request an informal review by the N. C. Department of Health and Human Services Regional Soil Scientist. A request for informal review must be made in writing to the local health department.

You have the right to a formal appeal of this decision by filing a petition for a contested case hearing with the Office of Administration Hearings, 6714 Mail Service Center, Raleigh, NC, 27699-6714. To obtain a petition form (H-06), you may write the Office of Administrative Hearings, call that office at (919) 431-3000 or get a copy of the petition form from their web site at www.ncoah.com/forms.html. The petition for a contested case hearing must be filed in accordance with the provisions of North Carolina General Statutes 130A-24, 150B-23, and all other applicable provisions of Chapter 150B. N.C. General Statute 130A-335(g) provides that your hearing would be held in the county where your property is located.

If you wish to pursue a formal appeal, you must file the petition form with the Office of Administrative Hearings **WITHIN 30 DAYS OF THE DATE OF THIS LETTER.** The date of this letter is September 12, 2017. Meeting the 30 day deadline is critical to your right to a formal appeal. Beginning a formal appeal within 30 days will not interfere with any informal review that you may request.

If you file a petition for a contested case with the Office of Administrative Hearings, you are required by law (NCGS 150B-23) to serve a copy of your petition on the Office of General Counsel, NC Department of Health and Human Services, 2001 Mail Service Center, Raleigh, NC 27699-2001.

MECKLENBURG COUNTY
Public Health

Gibbie Harris, MSPH, BSN
Interim Health Director

(704) 336-4700

Do not serve the petition on your local health department. Sending a copy of your petition to the local health department will not satisfy the legal requirement in NC General Statute 150B-23 that you send a copy to the Office of General Counsel, 2001 Mail Service Center, NC Department of Health and Human Services.

You may call or write the local health department if you need additional information or assistance.

Sincerely,

Bradley W Hallman, R.E.H.S.
Environmental Health Specialist
704-201-7983

MECKLENBURG COUNTY
Public Health

Gibbie Harris, MSPH, BSN
Interim Health Director

(704) 336-4700

Voluntary Relinquishment of Administrative Appeal Rights
(Completion of Form by Property Owner)

September 12, 2017

Kipp Cheek
6207 Creft Cir.
Indian Trail, NC 28079

Subject: Voluntary Relinquishment of Administrative Appeal Rights

(Specify Permit ID/owner's name/property location/site legal description): Permit ID 30008003/ Kipp Cheek/ 17837 New Mark Ave., NC Tax ID # 217-172-06

I, Kipp Cheek, voluntarily relinquish my rights to pursue a formal appeal through the Office of Administrative Hearings pursuant to NC General Statute 130A-24 and 150B-23 and all other applicable provisions of Chapter 150B for the above referenced permit in order for the authorized agent/local health department to issue the applicable permit (new IP and/or CA) for the site. I understand by completing this form the previous permit issued on 8/14/07 for a system located on the above site will be "revoked" immediately by the authorized agent/local health department.

Signature of Property Owner

MECKLENBURG COUNTY
Public Health

Gibbie Harris, MSPH, BSN
Interim Health Director

(704) 336-4700

September 12, 2017

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MECKLENBURG COUNTY
Public Health

Gibbie Harris, MSPH, BSN
Interim Health Director

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Sincerely,

Bradley W Hallman, R.E.H.S.
Environmental Health Specialist
704-201-7983

MECKLENBURG COUNTY
Public Health

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Interim Health Director

(704) 336-4700

Voluntary Relinquishment of Administrative Appeal Rights
(Completion of Form by Property Owner)

September 12, 2017

Kipp Cheek
6207 Creft Cir.
Indian Trail, NC 28079

Subject: Voluntary Relinquishment of Administrative Appeal Rights

(Specify Permit ID/owner's name/property location/site legal description): Permit ID 30008003/ Kipp Cheek/ 17837 New Mark Ave., NC Tax ID # 217-172-06

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_____
Signature of Property Owner

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	08/21/17	**Amount:**	200.00
Receipt #:	107165	**Tendered:**	200.00
Check / Auth #:	CHARGE	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: B74900
Contractor: MILLER HOMES LLC
Attn:
Address: 16450 SHALLOW POND RD
Address:
City/State/Zip: CHARLOTTE, NC 28278

Item	Description	Permit#	Quantity	Unit Price	Total Price
0734	Septic Construction Authorizat 17537 NEW MARK AVE		1	200.00	200.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
744.64					

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	08/21/17	**Amount:**	200.00
Receipt #:	107164	**Tendered:**	200.00
Check / Auth #:	CHARGE	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: B74900
Contractor: MILLER HOMES LLC
Attn:
Address: 16450 SHALLOW POND RD
Address:
City/State/Zip: CHARLOTTE, NC 28278

Item	Description	Permit#	Quantity	Unit Price	Total Price
0703	Septic Operational Permit 17837 NEW MARK AVE		1	200.00	200.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
544.64					

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	09/07/17	**Amount:**	100.00
Receipt #:	107331	**Tendered:**	100.00
Check / Auth #:	VISA 02483D	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: 200000
Contractor: CHEEK, KIPP
Attn:
Address: 6207 CREFT CIR
Address:
City/State/Zip: INDIAN TRAIL, NC 28079

Item	Description	Permit#	Quantity	Unit Price	Total Price
0704	Change in Plot Plan 17837 NEW MARK AVE		1	100.00	100.00

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

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

Payment Receipt

Mecklenburg County POS

Environmental Health
700 N. Tryon Street
Charlotte, NC 28202
Phone: 704-336-5100

Enter Account # or Customer Name Here: KIPP CHEEK

Bill To:

KIPP CHEEK
6207 CREFT CIR

Indian Trail, NC 28079

Single Payment

Transaction Date: 09/07/2017 9:27 AM Pacific Time
Pay Method: VISA **********9336
Approval #: 02483D
Trace Number: c3f1fc82-8158-4a6d-ab10-0d4d060ab2b6
Amount: $100.00

Payment Amount: $100.00

Total: $100.00

Thank you for your payment.