5862B

Supervisor/Administrative Professional Checklist

New Septic ☑ **New Well** ☐ **Use Existing** ☐ **Alteration** ☐ **Modified Plot Plan** ☐

New Septic Fees Paid:

IP ($250.00) lwo 9/25/14 Initials/Date

CA ($200.00) lwo 10/3/14 Initials/Date

OP ($200.00) lwo 10/3/14 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 ☑ 10/3/14 AMY

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. ☑ 10/3/14

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

Certified operator contract is on file. ☐ _____

File Complete ; Please upload Plot Plan in addition to IA & OP

Groundwater & Wastewater Services
Septic Project File & Data Review Worksheet

GWS File #: 5862B WASPS App #: 2067

Primary ES assigned to project: Philo Walker

Secondary ES assigned to project:

Project Type: New System ☑ Alteration ☐ Repair ☐ Modified Plot Plan ☐

I. File Review:

Rule or Law	Permit Application			
.1937(d)	Is the Application complete	Yes ☑	No ☐	N/A ☐
.1937(d)	Is there a Site plan/Plat with application	Yes ☑	No ☐	N/A ☐
.1937(d)	Is the Facility shown?	Yes ☑	No ☐	N/A ☐
.1937(d)	Are appurtenances shown	Yes ☑	No ☐	N/A ☐
		Setback line on plat		
	Site Evaluation Information			
.1939 (a)(1)	Topography and Landscape Position Recorded?	Yes ☑	No ☐	N/A ☐
.1940 (a-g)	Slope % Recorded?	Yes ☑	No ☐	N/A ☐
.1939 (a)(2)	Texture Class Recorded?	Yes ☑	No ☐	N/A ☐
.1939 (a)(2)	Structure type Recorded?	Yes ☑	No ☐	N/A ☐
.1939 (a)(2)	Consistence Recorded?	Yes ☑	No ☐	N/A ☐
.1939 (a)(2)	Mineralogy Recorded?	Yes ☑	No ☐	N/A ☐
.1939 (a)(3)	Soil Wetness Condition Recorded?	Yes ☑	No ☐	N/A ☐
.1939 (a)(4)	Soil Depth to Rock or Parent Material Recorded When Encountered	Yes ☑	No ☐	N/A ☐
.1939 (a)(5)	Depth to Restrictive Horizons Recorded When Encountered?	Yes ☑	No ☐	N/A ☐
.1939 (a)(6)	Sufficient Available Space Recorded?	Yes ☑	No ☐	N/A ☐
.1937(m)	Are the Profile Locations Shown?			
.1939(a)	Are the S/PS Profiles in system & in repair area?	Yes ☑	No ☐	N/A ☐
& .1945(b)	Number of auger borings made: 4			
	Were sufficient auger borings made?	Yes ☑	No ☐	N/A ☐
.1939(d), .1955, .1956, .1957	LTAR 0.3	Yes ☑	No ☐	N/A ☐
	Improvement Permit/Construction Authorization			
.1937(g) 130A-336(a)	Proposed System Type stated-Initial	Yes ☑	No ☐	N/A ☐
.1945(b)	Proposed System Type stated-Repair	Yes ☑	No ☐	N/A ☐
130A-336 (a)(3)	System location identifiable by setbacks - Initial	Yes ☑	No ☐	N/A ☐
.1937(g) .1945(b)	System components shown – Initial	Yes ☑	No ☐	N/A ☐
.1945(b)	Repair area shown	Yes ☑	No ☐	N/A ☐
.1937 (f)(g)	Does System design match facility, flow & WWcharacteristics?	Yes ☑	No ☐	N/A ☐
.1937 (f)(g)	Is System design consistent with soil/site conditions?	Yes ☑	No ☐	N/A ☐
.1937 (f)(g)	Is the System located in the approved area?	Yes ☑	No ☐	N/A ☐
130A-336(a)	Is the Design flow (gpd) indicated?	Yes ☑	No ☐	N/A ☐

130A-336(a)	Number of Bedrooms, employees, seats, etc. indicated?	Yes ☑	No ☐	N/A ☐
.1937(g)	Trench depth indicated?	Yes ☑	No ☐	N/A ☐
.1937(g)	Trench width indicated?	Yes ☐	No ☐	N/A ☐
.1937(g)	Trench length indicated?	Yes ☑	No ☐	N/A ☐
130A-336(a)(1)	Proposed/existing well shown?	Yes ☐	No ☐	N/A ☑
130A-336(a)(1)	Property line lengths shown?	Yes ☑	No ☐	N/A ☐
130A-336(a)	Facility/appurtenance setbacks shown from fixed points?	Yes ☑	No ☐	N/A ☐

setback line on plot

Operation Permit

.1937(i)	System type as described in table V(a) of rule .1961	Yes ☐	No ☐	N/A ☐
.1937(i)	Conditions for system performance, operation, maintenance, monitoring and reporting.	Yes ☐	No ☐	N/A ☐

II. WASPS Review:

Construction authorization issued	Yes ☐	No ☐	N/A ☐
Installation approval issued	Yes ☐	No ☐	N/A ☐
Operation permit issued	Yes ☐	No ☐	N/A ☐
Other related documentation	Yes ☐	No ☐	N/A ☐

Items requiring correction/modification: _____

Comments:

_____

_____

_____

_____

_____

IA issued date: 12-10-15

OP issued date: 2-17-16

Review performed by: DBM _____ Date performed: _____

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.

_____ 9/25/14

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

---

OFFICE USE ONLY

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

SEPTIC APPLICATION FEE RECEIVED: $ 250 DATE FEE RECEIVED: 9/25/14

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

APPLICATION PROCESSED BY: Dwa

GWS FILE NUMBER ASSIGNED: 5862B

APPLICATION ID NUMBER ASSIGNED: 7067

COMMENTS:

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

5862B

MECKLENBURG COUNTY
HEALTH DEPARTMENT

App # 7067

APPLICATION FOR A RESIDENTIAL SITE IMPROVEMENT PERMIT/ CONSTRUCTION AUTHORIZATION FOR AN ON-SITE WASTEWATER SYSTEM, NEW WELL INSTALLATION, OR REPAIR OF EXISTING WELL

1. **SEPTIC / TYPE APPLICATION:** ○ N/A ● NEW SYSTEM ○ ALTERATION ○ REPAIR ○ MODIFIED PLOT PLAN

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

3. **JOB LOCATION INFORMATION:**

TAX PARCEL NUMBER: 19936109
STREET ADDRESS: 14321 Roe Buck Meadow Lane
CITY: Charlotte
STATE: NC ZIP: 28278
SUBDIVISION NAME: Sanctuary at Lake Wylie
LOT #: 152 LOT SIZE (acres): 5.4
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: 6,500
NUMBER OF BEDROOMS: 5
NUMBER OF OCCUPANTS: 2
FOUNDATION TYPE:

○ CONCRETE SLAB ● BASEMENT WITH PLUMBING
○ CRAWL SPACE ○ BASEMENT WITH NO PLUMBING

5. **IF PLANNING TO EXPAND OR ALTER THE EXISTING SEPTIC SYSTEM PLEASE COMPLETE THE FOLLOWING SECTION:** ☑ N/A

NUMBER OF BEDROOMS TO BE ADDED: _____ NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: _____

6. **WATER SUPPLY:** ● MUNICIPAL ○ PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER _____

7. **PROPOSED USE OF WELL:** ● N/A ○ IRRIGATION ○ POTABLE (DRINKING WATER) ○ OTHER _____

8. **PLEASE INDICATE AND RANK DESIRED SEPTIC SYSTEM TYPE(S) IN ORDER OF PREFERENCE** *(1-MOST DESIRED 5-LEAST DESIRED)*:

☐ N/A ☐ ANY TYPE ☑ CONVENTIONAL ☑ ACCEPTED ☑ INNOVATIVE ☐ ALTERNATIVE ☐ OTHER _____

8A. **RANK:** #1 #3 #5 #4 #2

9. **DO ANY OF THE FOLLOWING APPLY TO THE PROPERTY IN QUESTION? IF "YES" PLEASE ATTACH SUPPORTING DOCUMENTATION.**

BURIED CABLES, LANDFILLS, STUMPHOLES	○ YES ● NO	GRADING/SOIL REMOVAL PERFORMED	○ YES ● NO
EXISTING WASTEWATER (SEPTIC) SYSTEMS	○ YES ● NO	JURISDICTIONAL WETLANDS	○ YES ● NO
WELLS, SPRINGS, OR WATER LINES	○ YES ● NO	APPROVAL REQUIRED BY ANY OTHER PUBLIC AGENCY	○ YES ● NO
EASEMENTS OR RIGHT-OF-WAYS	○ YES ● NO	WASTEWATER OTHER THAN DOMESTIC SEWAGE	○ YES ○ NO
CHEMICAL/PETROLEUM STORAGE TANKS	○ YES ● NO	KNOWN UNDERGROUND CONTAMINATION	○ YES ● NO
WASTE STORAGE	○ YES ● NO	GROUNDWATER USE RESTRICTIONS/VARIANCES	○ YES ● NO

10. **WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?** _____ ☑ UNKNOWN

11. **WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?** Closed on Nov 2013 ☐ N/A

12. **PROPERTY OWNER:**

NAME: Terrance & Natalie Stringer
ADDRESS: 2724 Rozzelles Landing Dr
CITY: Charlotte, NC
STATE: NC ZIP: 28214
WORK PHONE: 704. 412. 8044
MOBILE PHONE: 706. 580. 5850
FAX: _____
E-MAIL: tg-stringer@gmail.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

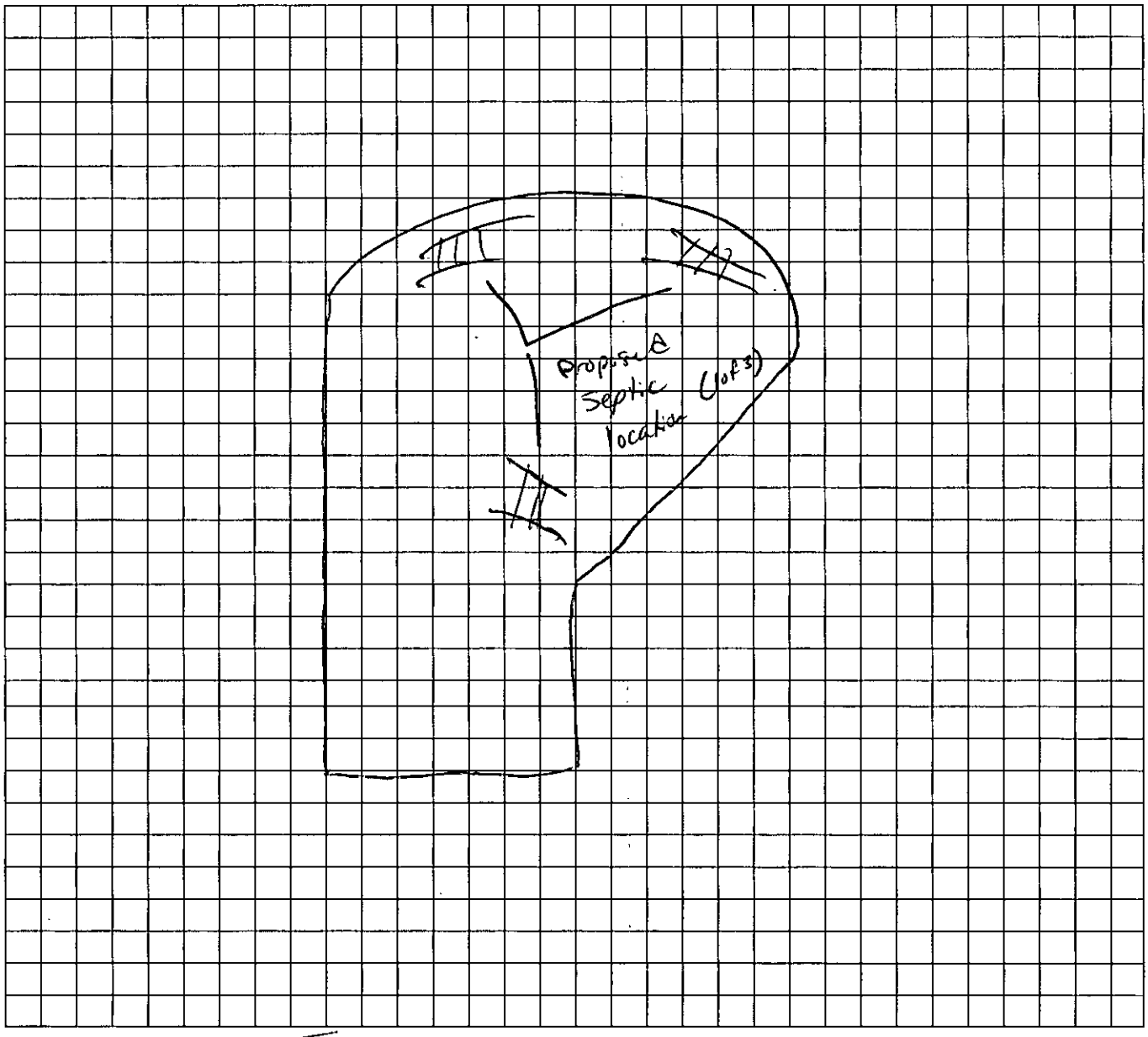
File #: _____

PROPOSED PLOT PLAN

A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

Street Address: 14321 Roe Buck Meadow Lane Tax Parcel #: 19936109

Subdivision Name: Sanctuary at Lake Wylie Lot #: 152



Property Owner's or Owner's Legal Representative Signature

9/25/14
Date

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

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

Sheet: 1 of 2
Property ID: 199-361-09
Lot #: 152
File #: 5862B
AppID: 7067

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Property Owner: Terrance & Natalie Stringer
Applicant: owner
Address: 2724 Rozzelles Landing Dr, Charlotte, NC 28214
Date Evaluated: 9/30/2014
Proposed Facility: 5 Bedroom House
Design Flow (.1949): 600 GPD
Property Size: 5.4 ac
Location of Site: 14321 Roe Buck Meadow Ln, Charlotte, NC 28278
Property Recorded: Unknown
Water Supply: [X] Public [X] 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 Structure/ Texture	SOIL MORPHOLOGY 1941 Consistence Mineralogy	PROFILE FACTORS 1942 Soil Wetness/ Color	PROFILE FACTORS 1943 Soil Depth (IN.)	PROFILE FACTORS 1956 Sapro Class	PROFILE FACTORS 1944 Restr. Horiz	General Comments	Profile Class & LTAR	Maximum Trench Bottom Depth for 3' Wide Conventional Trench
Boring #1	LS 26%	0 - 4	gr SL	FR SEXP	>54"	54	NA	NA		PS IV 0.3	33"
		4 - 14	wfsbk SCL	FR SEXP							
		14 - 54	wfsbk C	FR SEXP							
Boring #2	LS 25%	0 - 2	gr SL	FR SEXP	>54"	54	NA	NA	saprolite inclusions 35 - 54"	PS IV 0.325	33"
		2 - 14	wfsbk C	FI SEXP							
		14 - 35	wfsbk CL	FR SEXP							
		35 - 54	wfsbk L	FR SEXP							
Boring #3	LS 13%	0 - 3	gr SL	FR SEXP	>53"	53	NA	NA		PS IV 0.3	36"
		3 - 40	wfsbk SC	FR SEXP							
		40 - 53	wfsbk SCL	FR SEXP							
Boring #4	LS 10%	0 - 4	gr SL	FR SEXP	>52"	52	NA	NA		PS IV 0.3	36"
		4 - 34	wfsbk SC	FR SEXP							
		34 - 52	wfsbk SCL	FR SEXP							

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	III b	III b
Site LTAR (gpd/sq ft)	0.3	0.3

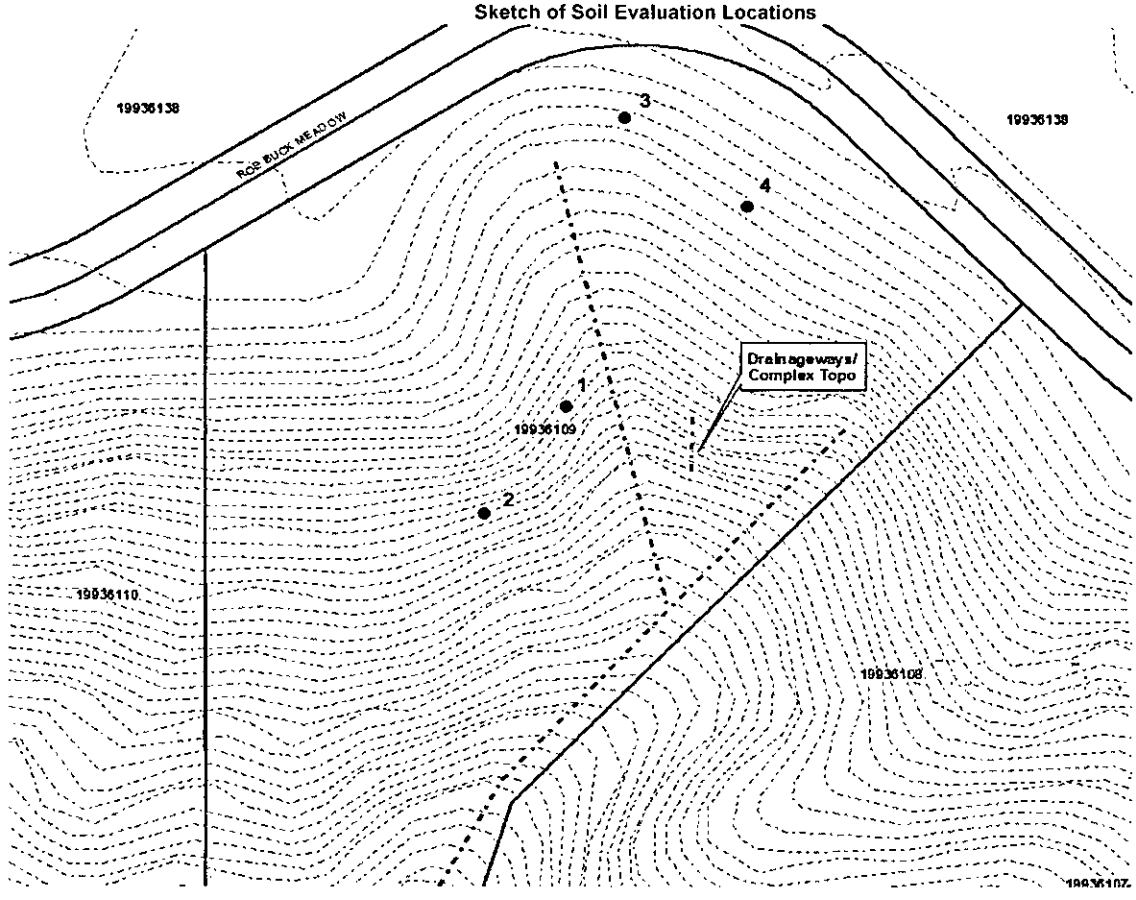
Other Factors (.1946):
Soil Evaluation By: Jacob Presley, REHSI, LSS
Others Present:
Site Classification (.1948): PS
Site Evaluation By: Philo Walker, Philo Walker
Others Present:

COMMENTS:

Landscape Position	Group	Texture	.1955 LTAR	Structure
R-Ridge	I	S-Sand	1.2 - 0.8	sg-Single Grain
SS-Shoulder Slope		LS-Loamy Sand		mass-Massive
LS-Linear Slope				cr-Crumb
FS-Foot Slope	II	SL-Sandy Loam	0.8 - 0.6	gr-Granular
NS-Nose Slope		L-Loam		sbk-Subangular Blocky
HS-Head Slope				abk-Angular Blocky
CC-Concave Slope	III	Si-Silt	0.6 - 0.3	pl-Platy
CV-Convex Slope		SiCL-Silty Clay Loam		pr-Prismatic
T-Terrace		CL-Clay Loam		Sap-Saprolite
FP-Flood Plain		SCL-Sandy Clay Loam		**Structure Prefixes**
D-Drainage Way		SiL-Silt Loam		w-weak
				m-moderate
				s-strong
				f-fine
	IV	SC-Sandy Clay	0.4 - 0.1	m-medium
		SiC-Silty Clay		c-coarse
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	SS-Slightly Sticky	SEXP-Slightly Expansive
FR-Friable	S-Sticky	EXP-Expansive
FI-Firm	VS-Very Sticky	
VFI-Very Firm	NP-Non-Plastic	**Classification**
EFI-Extremely Firm	SP-Slightly Plastic	US-Unsuitable
	P-Plastic	PS-Provisionally Suitable
	VP-Very Plastic	S-Suitable
		NA-Not Applicable

Sketch of Soil Evaluation Locations



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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: 30007067 GWS File #: 5862B Tax Parcel #: 199-361-09

- 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):** 10/2/2019

Type of Installation: Residential - New System Lot Number: 152

Structure Type: HOUSE Size (ft^2): 6500 # Bedrooms: 5 # Occupants: 2

Building Foundation: Basement With Plumbing Water Supply: Municipal

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

Initial System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1500	Total Trench Length (ft):	500
Maximum Trench Depth (in):	30	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

III. Repair System Type: Pump to Accepted **System Classification:** IIIb

Repair System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1500	Total Trench Length (ft):	500
Maximum Trench Depth (in):	30	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

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: Philo Walker

Signature: Philo Walker REHS

Date Issued: 10/2/2014

Owner/Legal Agent: Terrance Stringer
Print Name

Signature:

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St, Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-8894

NC DENR
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: 30007067 GWS File #: 5862B

IV. Permit Conditions/Comments:

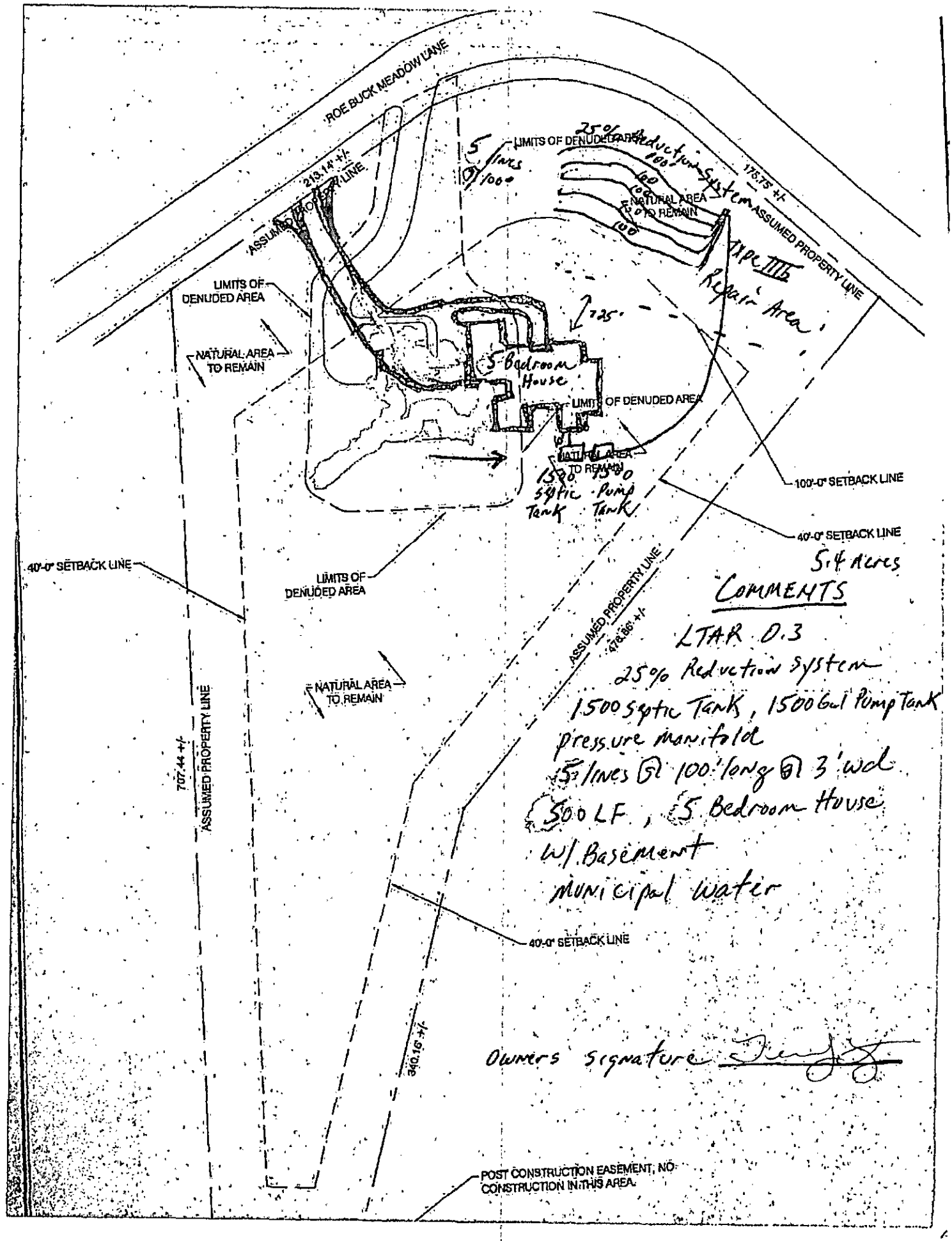
- This type of septic system requires an inspection once every 5 years by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- All waterlines must be located a minimum of 10 ft. from any part of the septic system.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.
- Foundation drains shall be constructed not to discharge water onto or across any part of the septic system.
- The septic system shall be located at least 25 feet from any foundation drain.

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: Philo Walker
Signature: Philo Walker REHS
Date Issued: 10/2/2014

Owner/Legal Agent: Terrance Stringer
Print Name
Signature: Terrance Stringer



5.4 Acres

COMMENTS

LTAR 0.3

25% Reduction System

1500 Septic Tank, 1500 Gal Pump Tank

pressure manifold

5 lines @ 100' long @ 3' wd.

500 LF, 5 Bedroom House

W/ Basement

Municipal Water

Owners Signature

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 # 58628 App # 7067 Tax Parcel # 199-361-09

Property Owner: Terrance & Natalie Stringer

Job Location Address: 14321 Red Buck Meadow Lane

City: Charlotte State: NC Zip Code: 28278

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

   ☒ YES ☐ NO

   Comments: _____

2. **Is there sufficient available space for the septic systems initial and repair areas?**

   ☒ YES ☐ NO

   Comments: _____

3. **Can the septic system be installed per the permit conditions and drawing on file?**

   ☒ YES ☐ NO

   Comments: _____

*** 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.

RCMS
Authorized Agent

12/10/15
Date

Kenneth C Dillinger Jr
Others Present

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 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 #: 5862B Permit #: 7067 Tax Parcel #: 19936109

Property Owner: Terrance & Natalie Stringer

Job Location Address: 14321 Roe Buck Meadow Lane

City: Charlotte State: NC Zip Code: 28278

Operation Permit Issuance Date: 2-17-16 Contractor Name: Kenny Dellinger

Permitted Design Flow: 600 GPD Liquid Capacity of Dosing Tank: 1500 gallons 115V/1PH

Liquid Capacity of Septic Tank: 1500 gallons Manufacture: Dellingers Effluent Pump Model: Zoller ½hp

Drainfield Installation ☐ N/A

Trench Depth: 30 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 500 feet

# of Lines: 5 @ 100 feet

Depth of Media: 12 inches (Type) Chambers 213

Depth of Cover: 18 inches

Distribution Device: pressure manifold

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 10' Tanks 25' drainfield

Distance from Building Foundation: _____ feet

Distance from Property Line: 10 feet

Distance from Water Supply Source: 10 feet

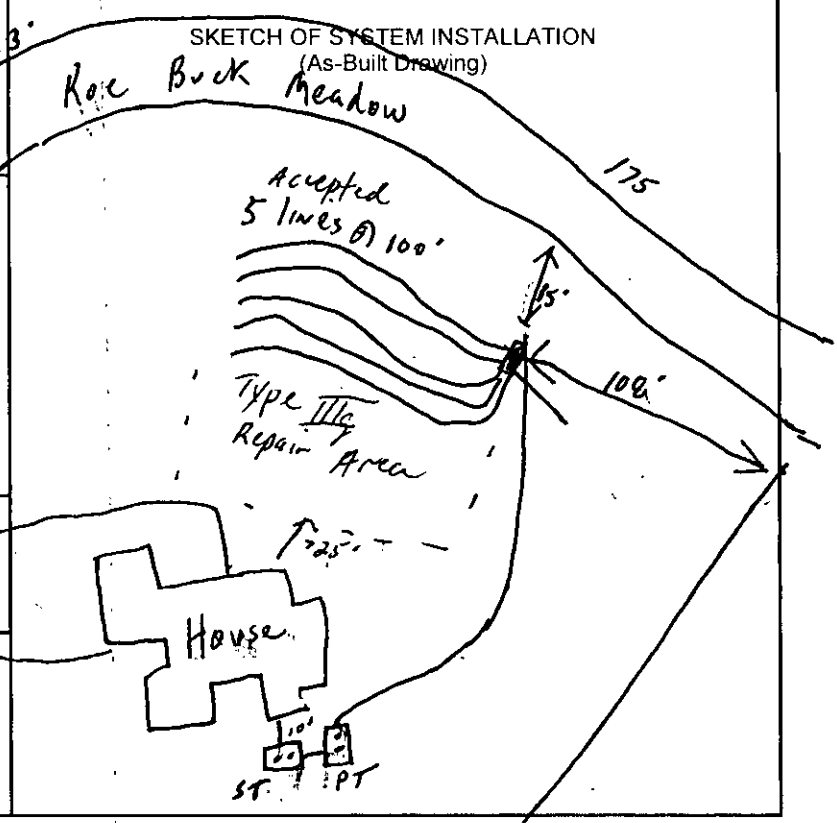
Inspection Dates

Tank(s) Inspected: 12/11/15

Excavation Inspected: 12/11/15

Pump & Controls Inspected: 2/17/16

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)

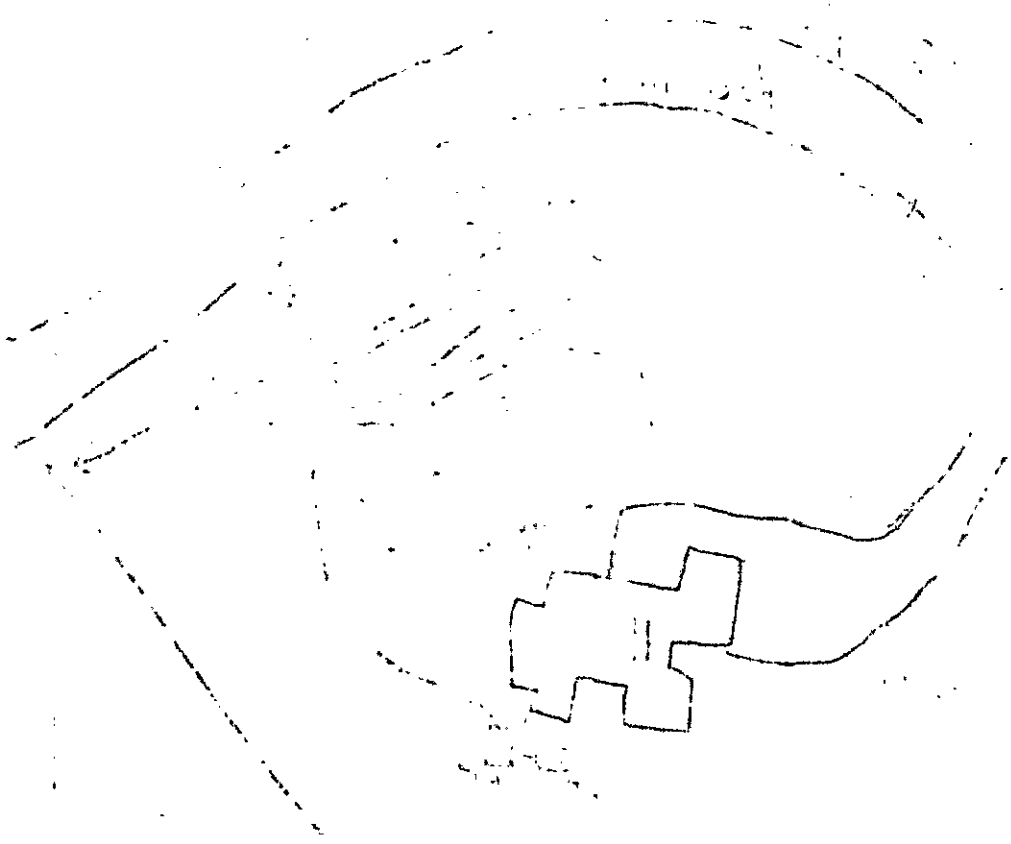


The undersigned has inspected the Septic Tank System described above, and certifies it has been ☒ installed ☐ altered ☐ repaired ☒ as detailed in the plot above ☐ in accordance with the permit issued and meets the provisions of 15A NCAC 18A. 1900, "Laws and Rules for Sewage Treatment and Disposal Systems" 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 Pump to chambers IR4, P, NA, NA

DENR Authorized Agent: Philo Walker Signature: Philo Walker REHS



Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 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 #: 5862B Permit #: 7067 Tax Parcel #: 199 36109

Property Owner: Terrance + Natalie Stringer

Job Location Address: 14321 Roe Buck Meadow Ln

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.

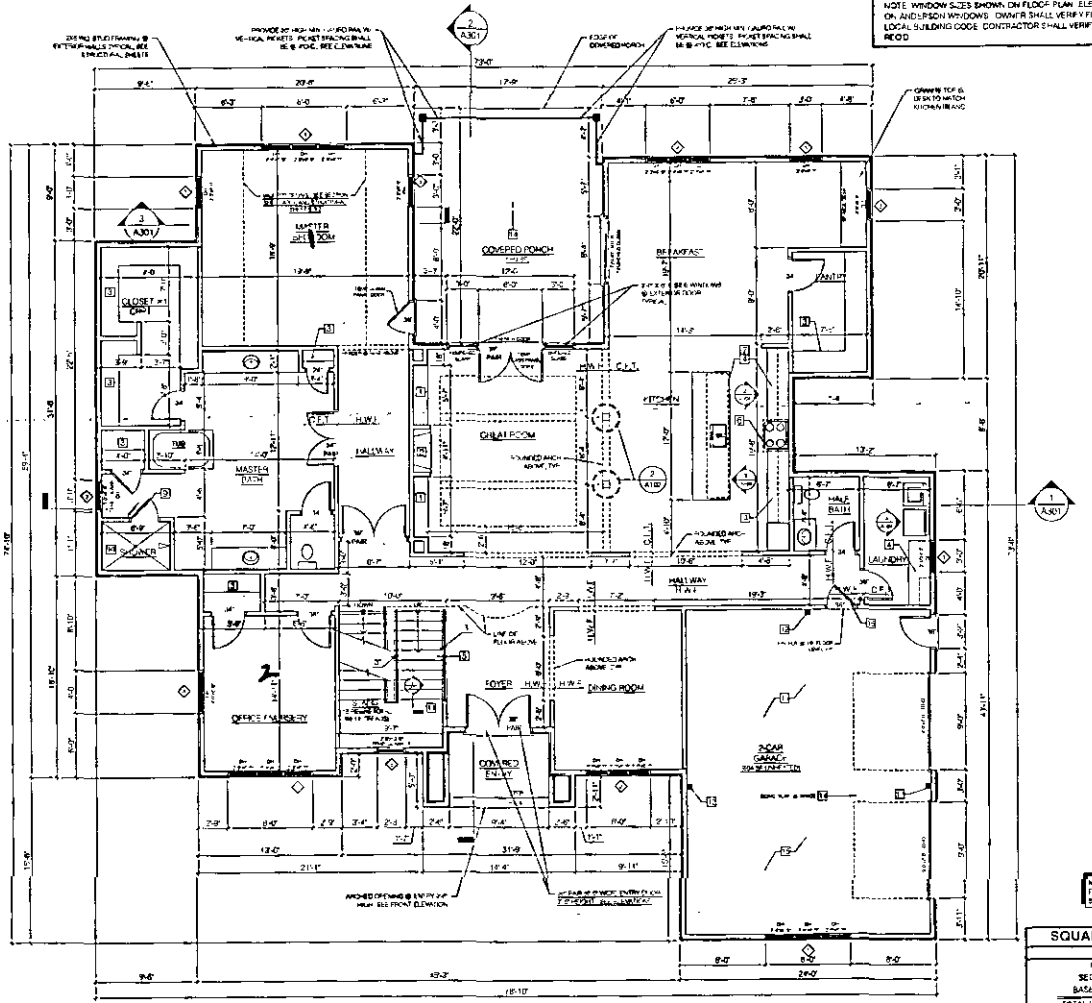
☐ System requires inspection by GWS once every twelve (12) months. The system owner is responsible for all fees associated with the inspection.

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

V. Other: Pump to chambers

DENR Authorized Agent: Philo Walker Date: 2/17/16

Signature: Philo Walker



WINDOW SCHEDULE

TYPE MARK	SIZE	SILL HEIGHT
W	6'-0"W x 6'-0"H (3) 2'-0" x 6'-0" WINDOWS	2'-0" A.F.F.
W1	6'-0"W x 6'-0"H (3) 2'-0" x 6'-0" WINDOWS	2'-0" A.F.F.
W2	3'-0"W x 4'-0"H & 2'-0" x 6'-0"H (SEE PLAN NOTES FOR SIZE VARIATION)	SEE ELEVATIONS
W3	6'-0"W x 6'-0"H (3) 2'-0" x 6'-0" WINDOWS W/ 2'-0" x 6'-0" FIXED TEMPERED GLASS SIDELIGHTS	2'-0" A.F.F.
W4	2'-0"W x 12'-0"H @ STAIRS (FIXED TEMPERED GLASS)	
W5	2'-0"W x 6'-0"H (SEE FRONT ELEVATION)	

NOTE: WINDOW SIZES SHOWN ON FLOOR PLAN, ELEVATIONS AND SCHEDULE ABOVE ARE BASED ON ANDERSON WINDOWS. OWNER SHALL VERIFY FINAL SIZING AND MANUFACTURER PER LOCAL BUILDING CODE. CONTRACTOR SHALL VERIFY & PROVIDE TEMPERED GLAZING WHERE REQD.

PLAN NOTES:

1. INSTALL CASE WORK SHELVING AS SHOWN. SEE INTERIOR ELEVATIONS & BUILDING SECTION 2 A301 FOR DETAILS
2. INSTALL VENTLESS GAS - WB FIRE PLACE AS SHOWN BY MONESSEN HEARTH SYSTEMS, MODEL NO. "DSF36CT", OR APPROVED EQUAL BY OWNER
3. INSTALL CLOSET AND/OR PANTRY SHELVING SYSTEM BY RUBBERMAID OR APPROVED EQUAL. OWNER VERIFIED
4. INSTALL BASE AND WALL CABINETS AS SHOWN. SEE INTERIOR ELEVATIONS SHEET A104
5. INSTALL WOOD STEPS AND RAILING AS SHOWN. OWNER TO SELECT RAILING TYPE, CONTRACTOR INSTALL 13 RISERS W/ 11" TREADS (7" RISER W/ 11" TREADS - TYP.)
6. INSTALL RANGE HOOD AS SHOWN FOR VENTILATION. OWNER SELECTED CONTRACTOR TO INSTALL
7. INSTALL KITCHEN CABINETS AND ASSOCIATED CASEWORK AS SHOWN. OWNER TO PICK FINISH AND ASSOCIATED HARDWARE. SEE SHEET A104 FOR ELEVATION
8. CONTRACTOR SHALL INSTALL PROPER ELECTRICAL OUTLETS FOR ASSOCIATED APPLIANCES AND/OR USES. CONSULT ELECTRICIAN FOR VOLTAGE REQUIREMENTS
9. INSTALL TEMPERED GLASS DOOR & SHOWER IN MASTER BATH. OWNER TO SELECT TYPE
10. INSTALL TILE ON FLOOR AND WALL IN SHOWER IN MASTER BATH. SLOPE TILE TO FLOOR DRAIN AS REQ'D
11. INSTALL OAK RAILS WITH OWNER SELECTED BALUSTERS AT STAIRS
12. INSTALL 6" X 6" X 1/4" TUBE STEEL COLUMN SUPPORT FOR BEAM FRAMING IN GARAGE AS SHOWN. SEE STRUCTURAL SHEET S1.0 FOR DETAILS
13. OWNER TO SUPPLY ALL APPLIANCES AS SHOWN. AND CONTRACTOR TO INSTALL. CONTRACTOR SHALL COORDINATE LOCATION FOR CONNECTION FOR GAS RANGE AS SHOWN.
14. SLOPE CONCRETE AWAY, 1/8" MIN. TO PROMOTE POSITIVE DRAINAGE
15. INSTALL 5/8" TYPE 'X' GYP. BD. MINIMUM @ GARAGE CEILING PER NC RESIDENTIAL CODE TABLE R302.6
16. INSTALL SOLID WOOD 1 3/8" MIN. DOOR AS SHOWN PER NC RESIDENTIAL CODE FOOT § 1

ROOM FINISH NOTES

A. INSTALL TILE FLOOR THROUGHOUT, OR APPROVED EQUAL IN ALL BATHROOMS, KITCHEN, LAUNDRY AND PANTRY AREAS. SEE FLOOR PLAN FOR CUT OFF. OWNER TO VERIFY TILE SELECTION

B. INSTALL HARD WOOD FLOOR THROUGHOUT ALL SPACES ON FLOOR PLAN UNLESS OTHERWISE LISTED IN NOTE ABOVE. OWNER TO VERIFY

C. INSTALL 6" CROWN MOLDING IN ALL SPACES AS DESIRED BY OWNER. SEE BUILDING SECTIONS FOR GENERAL SCOPE

D. INSTALL 6" WOOD BASE THROUGHOUT IN ALL HEATED SPACES. SEE BUILDING SECTIONS FOR GENERAL SCOPE

E. INSTALL 1/2" GYP. BD. @ ALL INTERIOR WALLS. CONTRACTOR/OWNER OPTION TO INSTALL 5/8" GYP. BD. AS DESIRED

PLAN LEGEND

- NEW 3'-0"W x 6'-8"H DOOR UNLESS OTHERWISE NOTED. SEE FLOOR PLAN
- H.W.F. — HARD WOOD FLOOR FINISH
- C.F.T. — CERAMIC FLOOR TILE FINISH
- CRPT. — CARPET FLOOR FINISH
- W — WINDOW TYPES
- INTERIOR ELEVATION. SEE SHEET A104
- EXTERIOR ELEVATION MARK. SEE ELEVATIONS SHEET A201 A202
- BUILDING SECTION CUT MARK. SEE SECTIONS SHEET A301
- GF — GROUND FAULT ELECTRICAL OUTLET
- ELECTRICAL OUTLET

SQUARE FOOTAGE SUMMARY

HEATED	
FIRST FLOOR HEATED	3,190 SQ FT.
SECOND FLOOR HEATED	1,330 SQ FT.
BASEMENT LEVEL HEATED	1,870 SQ FT.
TOTAL HEATED SQ FOOTAGE	6,390 SQ FT.

UNHEATED	
FIRST FLOOR UNHEATED	694 SQ FT.
SECOND FLOOR UNHEATED	515 SQ FT.
BASEMENT LEVEL UNHEATED	371 SQ FT.
TOTAL UNHEATED SQ FOOTAGE	1,378 SQ FT.

NOTE: EXTERIOR WOOD STUD WALL FRAMING SHALL BE 2"x6" @ 16" O.C. SEE 1&2, S1.1 STRUCTURAL SHEET

1 FIRST FLOOR PLAN — SCALE: 3/16" = 1'-0"

REVISIONS

NO.	DATE	TYPE	BY

NEW RESIDENTIAL DESIGN
STRINGER RESIDENCE
14321 ROE BUCK MEADOW LANE
CHARLOTTE, NORTH CAROLINA 28278

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PAGE NAME: FIRST FLOOR PLAN

DESIGNED BY: CWC
DRAWN BY: CWC
DATE: AUG 4 17
SCALE: AS NOTED
JOB: STRINGER RESIDENCE

A102

FEE: 200.00
DATE:10/21/2014

MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES

FILE NUMBER: 5862B

PERMIT NUMBER: 30007067

PARCEL NUMBER: 19936109

JOB LOCATION INFORMATION

ADDRESS: 14321 ROE BUCK MEADOW LN

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

ISSUED TO: Terrance & Natalie Stringer

CONSTRUCTION AUTHORIZATION ISSUANCE DATE: 10/3/2014

CONSTRUCTION AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 30007067, 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 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 THE 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 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, NOT TO EXCEED 60 MONTHS.
   *CONSTRUCTION AUTHORIZATION EXPIRATION DATE: 10/2/2019

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30007067** GWS File #: **5862B** Tax Parcel #: **199-361-09**

- 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):** 10/2/2019

Type of Installation: Residential - New System Lot Number: 152

Structure Type: HOUSE Size (ft^2): 6500 # Bedrooms: 5 # Occupants: 2

Building Foundation: Basement With Plumbing Water Supply: Municipal

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

Initial System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1500	Total Trench Length (ft):	500
Maximum Trench Depth (in):	30	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

III. Repair System Type: Pump to Accepted **System Classification:** IIIb

Repair System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1500	Total Trench Length (ft):	500
Maximum Trench Depth (in):	30	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

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: Philo Walker

Signature: Philo Walker REHS

Date Issued: 10/2/2014

Owner/Legal Agent: _____
Print Name

Signature: _____

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30007067** GWS File #: **5862B**

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.
- All waterlines must be located a minimum of 10 ft. from any part of the septic system.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.
- Foundation drains shall be constructed not to discharge water onto or across any part of the septic system.
- The septic system shall be located at least 25 feet from any foundation drain.

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.

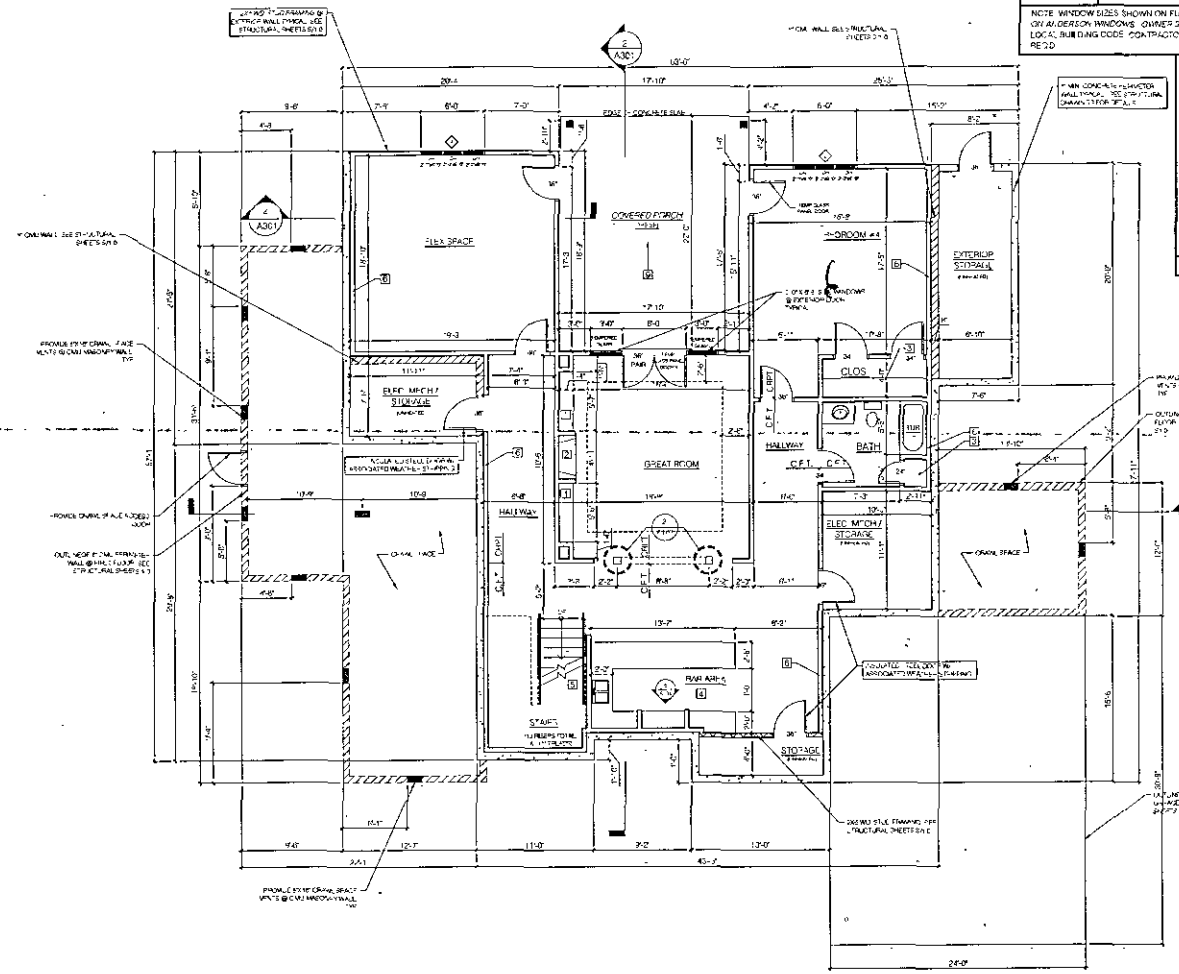
Authorized Agent: Rhilo Walker

Signature: Rhilo Walker REHS

Date Issued: 10/2/2014

Owner/Legal Agent: _____
Print Name

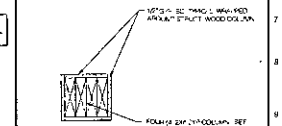
Signature: _____



WINDOW SCHEDULE

TYPE MARK	SIZE	SILL HEIGHT
◇	4-0"W X 4'-6"H (3'-2 ½ " X 4'-4½" R.O.) WINDOWS	2'-6" A.F.F.
◇	6-0"W X 5'-6"H (5'-7 ½" X 5'-4½" R.O.) WINDOWS	2'-0" A.F.F.
◇	3-0"W X 4'-6"H X 2'-0" X 6'-0" HIGH ELEVATION STOR SIZE VARIATION	SEE ELEVATIONS
◇	4'-0"W x 6'-0"H - 4 at W X 1 at mulled to rectangle window @ 2nd with	2'-6" A.F.F.
◇	2'-6" X 12'-0"H @ STAIRS	
◇	2'-6"W X 6'-6"H @ FRONT ELEVATION	

NOTE: WINDOW SIZES SHOWN ON FLOOR PLAN, ELEVATIONS AND SCHEDULE ABOVE ARE BASED ON ANDERSON WINDOWS. OWNER SHALL VERIFY FINAL SIZING AND MANUFACTURER PER LOCAL BUILDING CODE. CONTRACTOR SHALL VERIFY & PROVIDE TEMPERED GLAZING WHERE REQ'D.



SCALE: 1 1/2" = 1'-0"

2 STRUCT. WOOD COLUMN DTL.

PLAN NOTES:

1. INSTALL CASE WORK SHELVING AS SHOWN. SEE INTERIOR ELEVATIONS FOR DETAILS
2. INSTALL VENTLESS GAS FIRE PLACE AS SHOWN BY MCALESSEN HEARTH SYSTEMS MODEL NO. DSF36C, OR APPROVED EQUAL BY OWNER
3. INSTALL CLOSET AND/OR PANTRY SHELVING SYSTEM AS SHOWN BY RUBBERMAID OR APPROVED EQUAL. OWNER VERIFIED
4. INSTALL BASE AND WALL CABINETS AS SHOWN. SEE INTERIOR ELEVATIONS SHEET A104
5. INSTALL WOOD STEPS AND RAILING AS SHOWN. OWNER TO SELECT RAILING TYPE. CONTRACTOR INSTALL
6. INSTALL 2X4 W/D STUDS @ 16" O.C. W/ R-13 KRAFT FACED INSULATION AND GYP. BD. FINISH ON INTERIOR SIDE ONLY
7. CONTRACTOR SHALL INSTALL PROPER ELECTRICAL OUTLETS FOR ASSOCIATED APPLIANCES AND/OR USES. CONSULT ELECTRICIAN FOR VOLTAGE REQUIREMENTS
8. *OWNER TO SUPPLY ALL APPLIANCES AS SHOWN AND CONTRACTOR TO INSTALL. CONTRACTOR SHALL COORDINATE LOCATION FOR CONNECTION FOR GAS RANGE AS SHOWN.*
9. *SLOPE CONCRETE @ COVERED PORCH FOR POSITIVE DRAINAGE, 1/16" MIN.*

ROOM FINISH NOTES

A. INSTALL CERAMIC FLOOR THROUGHOUT, OR APPROVED EQUAL IN ALL BATHROOMS, KITCHEN, LAUNDRY, AND PANTRY AREAS. SEE FLOOR PLAN FOR CUT OFF. OWNER TO VERIFY.

B. INSTALL HARD WOOD FLOOR THROUGHOUT ALL SPACES ON FLOOR PLAN UNLESS OTHERWISE LISTED IN NOTE ABOVE. OWNER TO VERIFY.

C. INSTALL 6" CROWN MOLDING IN ALL SPACES AS DESIRED BY OWNER. SEE BUILDING SECTIONS FOR GENERAL SCOPE.

D. INSTALL 6" WOOD BASE THROUGHOUT IN ALL HEATED SPACES. SEE BUILDING SECTIONS FOR GENERAL SCOPE.

PLAN LEGEND

- 3'-0"W X 6'-8"H X 1 ¾" DOOR UNLESS OTHERWISE NOTED. SEE FLOOR PLAN
- H.W.F. HARD WOOD FLOOR FINISH
- C.F.T. CERAMIC FLOOR TILE FINISH
- CRPT CARPET FLOOR FINISH
- W1 WINDOW TYPES
- INTERIOR ELEVATION. SEE SHEET A104; EXTERIOR ELEVATION MARK. SEE ELEVATIONS SHEET A301, A302
- BUILDING SECTION CUT MARK. SEE SECTIONS SHEET A301
- GF GROUND FAULT ELECTRICAL OUTLET
- ELECTRICAL OUTLET

NOTE: EXTERIOR WOOD STUD WALL FRAMING SHALL BE 2X6 @ 16" O.C. SEE SHEET NO.2 ON STRUCTURAL SHEETS

1 BASEMENT LEVEL FLOOR PLAN SCALE: 3/16" = 1'-0"

REVISIONS

NO.	DATE	TYPE	BY

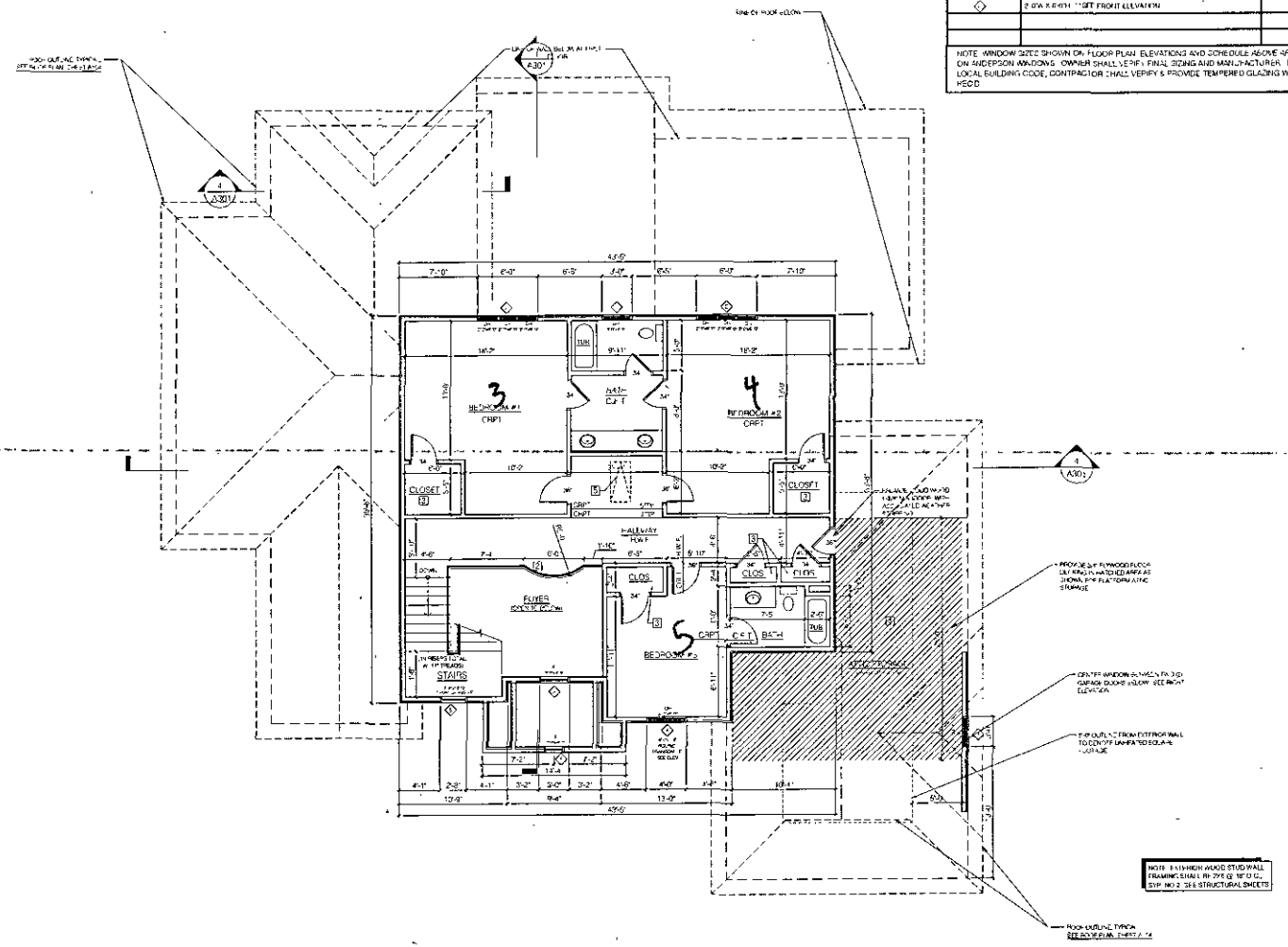
NEW RESIDENTIAL DESIGN
STRINGER RESIDENCE
14321 ROE BUCK MEADOW LANE
CHARLOTTE, NORTH CAROLINA 28278

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PAGE NAME
BASEMENT LEVEL FLOOR PLAN

DESIGNED BY: CMC
DRAWN BY: CMC
DATE: AUG. 4, 2014
SCALE: AS NOTED
JOB: STRINGER RESIDENCE

A101



WINDOW SCHEDULE

TYPE MARK	SIZE	SILL HEIGHT
	6'-0"W X 6'-0"H (3) 2'-0" X 6'-0" AWNINGS	2'-6" A.F.F.
	6'-0"W X 6'-0"H (3) 2'-0" X 6'-0" AWNINGS	2'-6" A.F.F.
	3'-0"W X 4'-0"H & 3'-6" X 6'-0" H SEE ELEVATIONS FOR SIZE VARIATION	SEE ELEVATIONS
	4'-0"W X 4'-0"H / 4'-0"W X 1'-6"H FIXED PICTURE WINDOW W/ 30"W X 2'-6"H SITE FIXED VENT	2'-6" A.F.F.
	2'-0"W X 12'-0"H @ STAIRS	
	2'-0"W X 6'-0"H **SEE FRONT ELEVATION	

NOTE: WINDOW SIZES SHOWN ON FLOOR PLAN, ELEVATIONS AND SCHEDULE ABOVE ARE BASED ON ANDERSON WINDOWS. OWNER SHALL VERIFY FINAL SIZING AND MANUFACTURER PER LOCAL BUILDING CODE, CONTRACTOR SHALL VERIFY & PROVIDE TEMPERED GLAZING WHERE NEED

PLAN NOTES:

1. CONTRACTOR SHALL INSTALL PROPER ELECTRICAL OUTLETS FOR ASSOCIATED APPLIANCES AND/OR LIGHT CONSULT ELECTRICIAN FOR VOLTAGE REQUIREMENTS
2. INSTALL OAK RAILS WITH BALUSTERS. OWNER TO SELECT BALUSTER TYPE
3. INSTALL CLOSET SHELVING SYSTEM BY RUBBERMAID OR APPROVED EQUAL BY OWNER
4. PROVIDE 3/4" PLYWOOD SUBFLOOR AS SHOWN FOR STORAGE PLATFORM
5. PROVIDE 2'-0" X 4'-0" ATTIC ACCESS PANEL AS SHOWN

ROOM FINISH NOTES

A. INSTALL CERAMIC FLOOR THROUGHOUT, OR APPROVED EQUAL IN ALL BATHROOMS, KITCHEN, LAUNDRY, AND PANTRY AREAS. SEE FLOOR PLAN FOR CUT OFF, OWNER TO VERIFY

B. INSTALL HARD WOOD FLOOR THROUGHOUT ALL SPACES AS ON FLOOR PLAN UNLESS OTHERWISE LISTED IN NOTE ABOVE. OWNER TO VERIFY

C. INSTALL 6" CROWN MOLDING IN ALL SPACES AS DESIRED BY OWNER. SEE BUILDING SECTIONS FOR GENERAL SCOPE

D. INSTALL 5 1/4" WOOD BASE THROUGHOUT IN ALL HEATED SPACES. SEE BUILDING SECTIONS FOR GENERAL SCOPE

INTERIOR WALL TYPES

2X4 WOOD STUD WALL @ 16" O.C. W/ 5/8" GYP. BD. ON BOTHS SIDES

PLAN LEGEND

- NEW 3'-0"W X 6'-8"H DOOR UNLESS OTHERWISE NOTED. SEE FLOOR PLAN
- DOOR WIDTH
- HWF — HARD WOOD FLOOR FINISH
- C.F.T. — CERAMIC FLOOR TILE FINISH
- CRPT — CARPET FLOOR FINISH
- W1 — WINDOW TYPES
- INTERIOR ELEVATION. SEE SHEET A104
- EXTERIOR ELEVATION MARK, SEE ELEVATIONS SHEET A201,A202
- BUILDING SECTION CUT MARK. SEE SECTIONS SHEET A301
- GF — GROUND FAULT ELECTRICAL OUTLET
- ELECTRICAL OUTLET

SECOND FLOOR PLAN — **SCALE: 3/16"=1'-0"**

REVISIONS

NO	DATE	TYPE	BY

NEW RESIDENTIAL DESIGN

STRINGER RESIDENCE

14321 ROE BUCK MEADOW LANE
CHARLOTTE, NORTH CAROLINA 28278

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PAGE NAME

SECOND FLOOR PLAN

DESIGNED BY: CMC
DRAWN BY: CMC
DATE: AUG 4 2014
SCALE: AS NOTED
JOB: STRINGER-RESIDENCE

A103

S&ME

Date: July 7, 2005

To: Mr. David Cornelius, R.S.
Mecklenburg County Env. Health Dept.

From: Paul G. Penninger, LSS
Toney C. Jacobs, LSS

RE: Request for an Improvement Permit for Lot 152 at The Sanctuary:
MCHD File #5862B

The Sanctuary at Lake Wylie is requesting an Improvement Permit for the above referenced lot. Mr. Bill Marlin has evaluated the soils (see attached MCHD soil sheets) and S&ME, Inc. has flagged the system and repair on the lot. The septic lines have been located by the surveyor and are shown on the attached maps provided by LandDesign Engineering. The attached sketch and specifications are not an Improvement Permit and are intended only to assist the MCHD in permitting the referenced lot at The Sanctuary.

We understand that a building permit cannot be issued until your office issues an Authorization to Construct (ATC). The buyer will apply for the ATC. If the buyer's house pad does not fit in the "building envelope" shown on the Improvement Permit, we understand that the proposed system may have to be modified prior to your office issuing the ATC. **No grading shall take place on the lot prior to obtaining the ATC from the MCHD.**

Tri-County Wastewater (TCWW) is under contract to supply maintenance services for each septic system installed at The Sanctuary. TCWW will have a list of preferred septic contractors for the subdivision and will also have requirements for septic system installation that are greater than the MCHD and State requirements. It will be the responsibility of TCWW to enforce any requirements above State requirements or the MCHD conditions on the Improvement Permit.

Please review the attached system sketch and design specifications for the Improvement Permit. Any additions or revisions you feel are necessary can be made on the Improvement Permit. Please call in you have and questions or comments.

S&ME, Inc.
105-D Denver Business Park Dr.
Mooresville, North Carolina 28115-7926

(704) 662-8625
(704) 662-8735 fax
www.smeinc.com

Design Specifications for Lot 152 at The Sanctuary
MCHD File # 5862B

Daily Design Flow:	600 gpd
Number Bedrooms:	5 bedroom
Basement or Crawl Space:	Basement
Septic Tank Size:	1500 gal
Pump Tank Size:	1500 gal
Primary System Loading Rate:	**0.3 gpd/ft^2**
Primary System:	**25% reduction**
Number and length of laterals:	4 @ 125 ft.
Total ft. of primary system:	500 ft.
Flow Rate through system:	22 gpm – use ½ in. SCH 80 taps with 2 ft. head pressure on pressure manifold (5.5 gpm per tap)
Pump Requirements:	to be calculated by installer when specific house and pump tank locations are available
Dosing Volume:	approx. 270 gal. – 2.2 doses/day at design flow
Depth of effluent pumped per dose:	calculated to specific tank by measure or dealer engineering specifications (1 cubic ft. of water equals 7.48 gal.)
Check Valve:	yes
Siphon break hole:	no
Repair System Loading Rate:	**0.3 gpd/ft^2**
Repair System:	**25% Reduction**
Total ft. of repair	540 ft.

Notes:

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

Sheet: 1 of 2
Property ID: PO 199-350-32
Lot #: 152
File #: 5862B
Code: 1

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Sanctuary at Lake Wylie
Applicant: Toney Jacobs & Assoc.
Address: PO Box 1003, Charlotte, N. C. 28210
Date Evaluated: 3/15/2005
Proposed Facility: Residence
Design Flow (.1949): 600gpd
Property Size: Approx. .5 a inv.
Location of Site: Roe Buck Meadow Lane
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 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, 5	0-5	GR/SL	FR/SEXP/NS/NP	>48" TO SOIL WETNESS	48	N/A	NONE	PS, IV
		5-8	GR/SCL	FR/SEXP/SS/SP					.3GPD/FT^2
		8-48	SBK/C	FI/SEXP/S/P					
2	"	0-3	GR/CL	FR/SEXP/SS/SP	"	"	"	"	"
		3-48	SBK/C	FI/SEXP/S/P					
3	LS, 15	0-3	GR/CL	FR/SEXP/SS/SP	>49" TO SOIL WETNESS	49	"	"	"
		3-29	SBK/C	FI/SEXP/S/P					
		29-49	SBK/SCL	FR/SEXP/SS/SP					
4	NS, 15	0-4	GR/CL	"	"	"	"	"	"
		4-35	SBK/C	FI/SEXP/S/P					
		35-49	SBK/SCL	FR/SEXP/SS/SP					
5	LS, 20	0-5	GR/CL	"	"	"	"	"	PS, IV
		5-28	SBK/C	FI/SEXP/S/P					.325GPD/FT^2
		28-42	SBK/SCL	FR/SEXP/SS/SP					
		42-49	GR/SL	FR/SEXP/NS/NP					

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

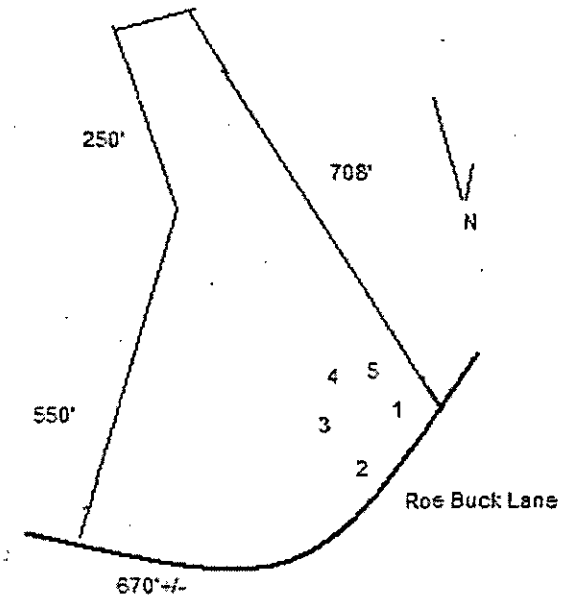
Other Factors (.1946):
Site Classification (.1948): PROVISIONALLY SUITABLE
Evaluated By: W. R. Marlin, LSS, 3/16/2005, W. R. Marlin
Others Present:

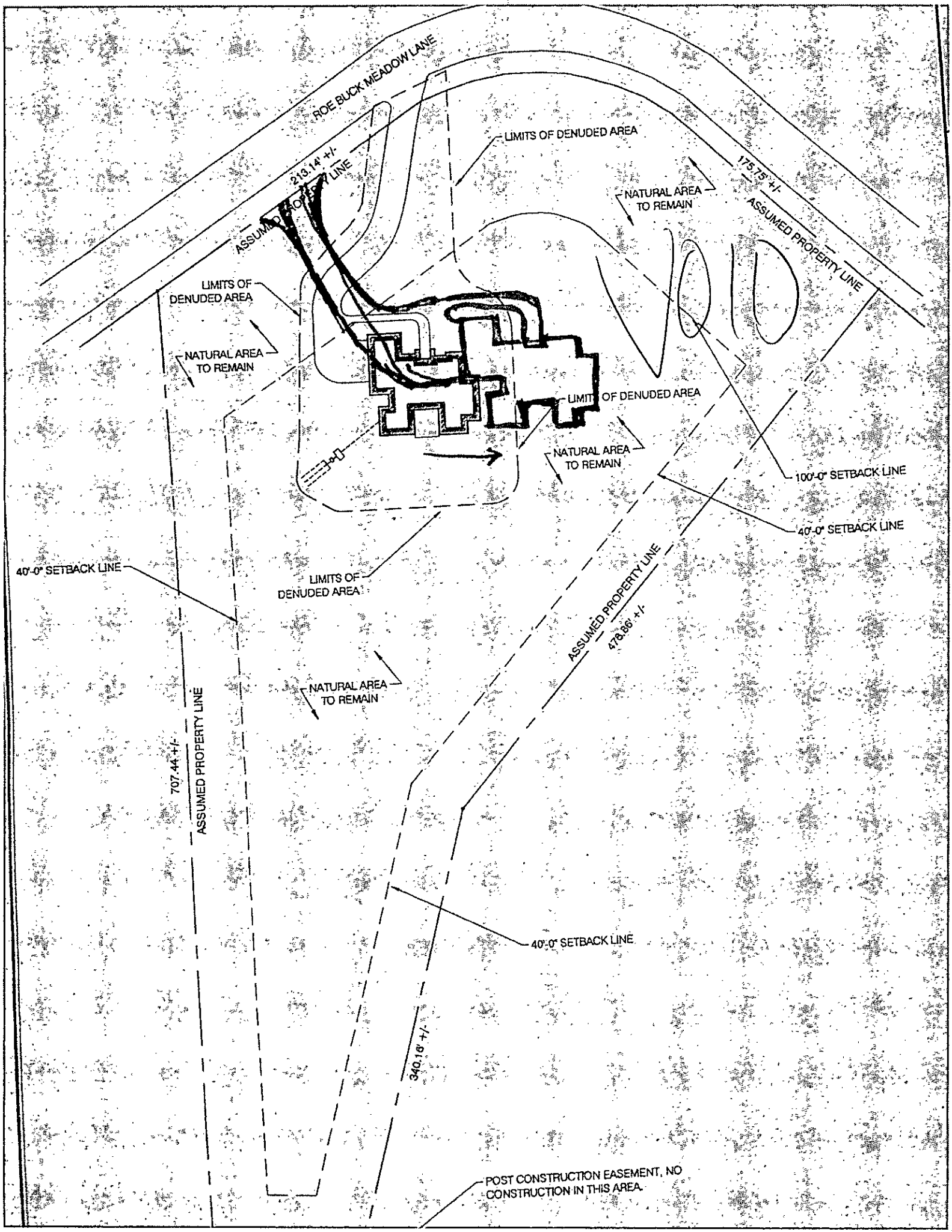
COMMENTS:
100% repair, would need pump

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-Foot Slope	II	SL-Sandy Loam	0.8 - 0.6	GR-Granular
NS-Nose Slope		L-Loam		SBK-Subangular Blocky
HS-Head Slope				ABK-Angular Blocky
CC-Concave Slope	III	SI-Silt	0.6 - 0.3	PL-Platy
CV-Convex Slope		SICL-Silty Clay Loam		PR-Prismatic
T-Terrace		CL-Clay Loam		
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




ROE BUCK MEADOW LANE
213.14' +/-
ASSUMED PROPERTY LINE
LIMITS OF DENUDED AREA
NATURAL AREA TO REMAIN
175.73' +/-
ASSUMED PROPERTY LINE
LIMITS OF DENUDED AREA
NATURAL AREA TO REMAIN
LIMITS OF DENUDED AREA
NATURAL AREA TO REMAIN
100'-0" SETBACK LINE
40'-0" SETBACK LINE
40'-0" SETBACK LINE
LIMITS OF DENUDED AREA
ASSUMED PROPERTY LINE
478.86' +/-
NATURAL AREA TO REMAIN
707.44' +/-
ASSUMED PROPERTY LINE
40'-0" SETBACK LINE
340.18' +/-
POST CONSTRUCTION EASEMENT, NO CONSTRUCTION IN THIS AREA

5. CONTRACTOR TO INSTALL MAILBOX AS REQ'D

6. SITE CONTRACTOR SHALL CLEAR AND GRADE SITE AS REQ'D FOR PROPOSED HOUSE. SEE PLANS FOR ASSOCIATED DIMENSIONS.

GREEN – Sewer or Drain Lines
WHITE – Proposed Excavation
PINK – Temporary Survey Markings
PURPLE – Reclaimed Water, Irrigation or Slurry Line

NOTE:

HOME OWNER ASSOCIATION LOT CALCULATIONS:

TOTAL IMPERVIOUS AREA AS DESIGNED = (TOTAL 1ST FLR SF + DRIVEWAY) ÷ (TOTAL LOT SF)
9,845 ÷ 234, 640 = 4%

TOTAL DENUDED AREA AS DESIGNED = (LOT CLEARING SF) ÷ (TOTAL LOT SF)
34,447 ÷ 234, 640 = 14.6%

ROE BUCK MEADOW LANE

ASSUMED PROPERTY LINE

LIMITS OF DENUDED AREA

NATURAL AREA TO REMAIN

175.75' +/-

ASSUMED PROPERTY LINE

LIMITS OF DENUDED AREA

NATURAL AREA TO REMAIN

100'-0" SETBACK LINE

40'-0" SETBACK LINE

ASSUMED PROPERTY LINE

478.86' +/-

40'-0" SETBACK LINE

340.15' +/-

POST CONSTRUCTION EASEMENT, NO CONSTRUCTION IN THIS AREA.

20'-0" WIDE DRIVEWAY

LAWN

100'-0" FRONT SETBACK

5'-0" CONCRETE WALK

LAWN

NATURAL AREA TO REMAIN

LAWN

PROPOSED HOUSE

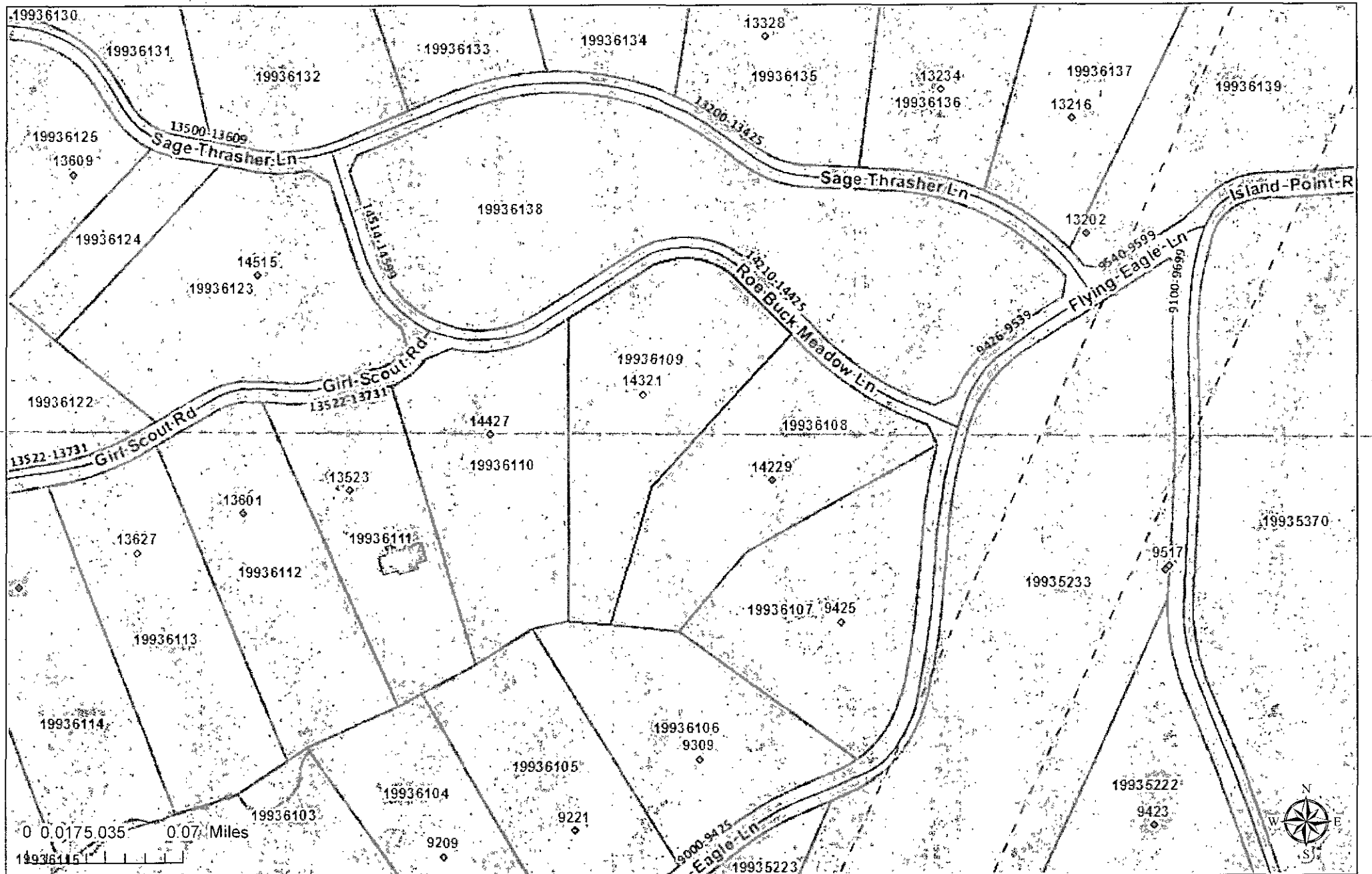
LAWN

NATURAL AREA TO REMAIN

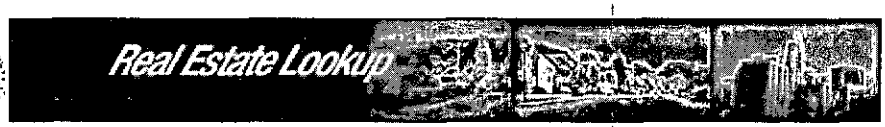
COVERED PORCH, SEE FLOOR PLANS

Polaris 3G Map – Mecklenburg County, North Carolina

Date Printed: 10/2/2014 8:06:35 AM



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



Print

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Parcel Information

Parcel ID	Account	Parent	Previous
19936109	INDIVIDUAL		19936109

Owner(s)

Owner Name	Mailing Address	City/State
CRUMP NATALIE	14321 ROE BUCK MEADOW LN	CHARLOTTE NC 28278
STRINGER TERRANCE	14321 ROE BUCK MEADOW LN	CHARLOTTE NC 28278

Legal Information

Legal	Municipality	Date Annexed	Special District	Fire District	Acreage
L152 M44-608	MECKLENBURG COUNTY-UNINCORPORATED		FIRE SERVICE A	STEELE CREEK #2	5.39

Total Parcel Assessment

Building	Land	Features	Total
Under Reval Review			

Exemptions

Exemption	Year Approved	Review Date	Amount

Sales Information

Sale	Price	Stamps	Qualify	VI	Type	Legal Ref.	Grantor
Nov 8 2013	37000	74	GOV'T/ BANK	IMP	SPEC WARRNTY	28823-149	WELLS FARGO BANK NA,
Dec 3 2012	74500	149	FORECLOSURE	IMP	TRUSTEE DEED	27867-529	PRICE,MICHAEL C
Apr 11 2006	330000	660		VAC	SPEC WARRNTY	20267-294	SANCTUARY AT LAKE WY
Nov 26 2003			UNDER REVIEW	IMP	MULT LISTING	16493-360	CAROLINA CENTERS LLC

Land Use

Use	Units	Type	Neighborhood	Assessment
R100	5.39	AC	T916	

Building Information

Bldg	Description	Type	Year	Property Location
1				14321 ROE BUCK MEADOW LN UNINC

Bldg	Story	Units	Total SqFt	Heated SqFt	Foundation	Ext. Wall	Grade	Value
1								

Bldg	Heat	Fuel	Fire Place	AC	Fixtures	Bedrooms	Full Baths	3/4 Baths	1/2 Baths
1									

Sub Area

Bldg	Description	Size

Depreciation

Bldg	Physical	Functional	Economic	Special	Override
1					

Special Features & Yard Items

Bldg	Built	Type	Quantity	Units	Value

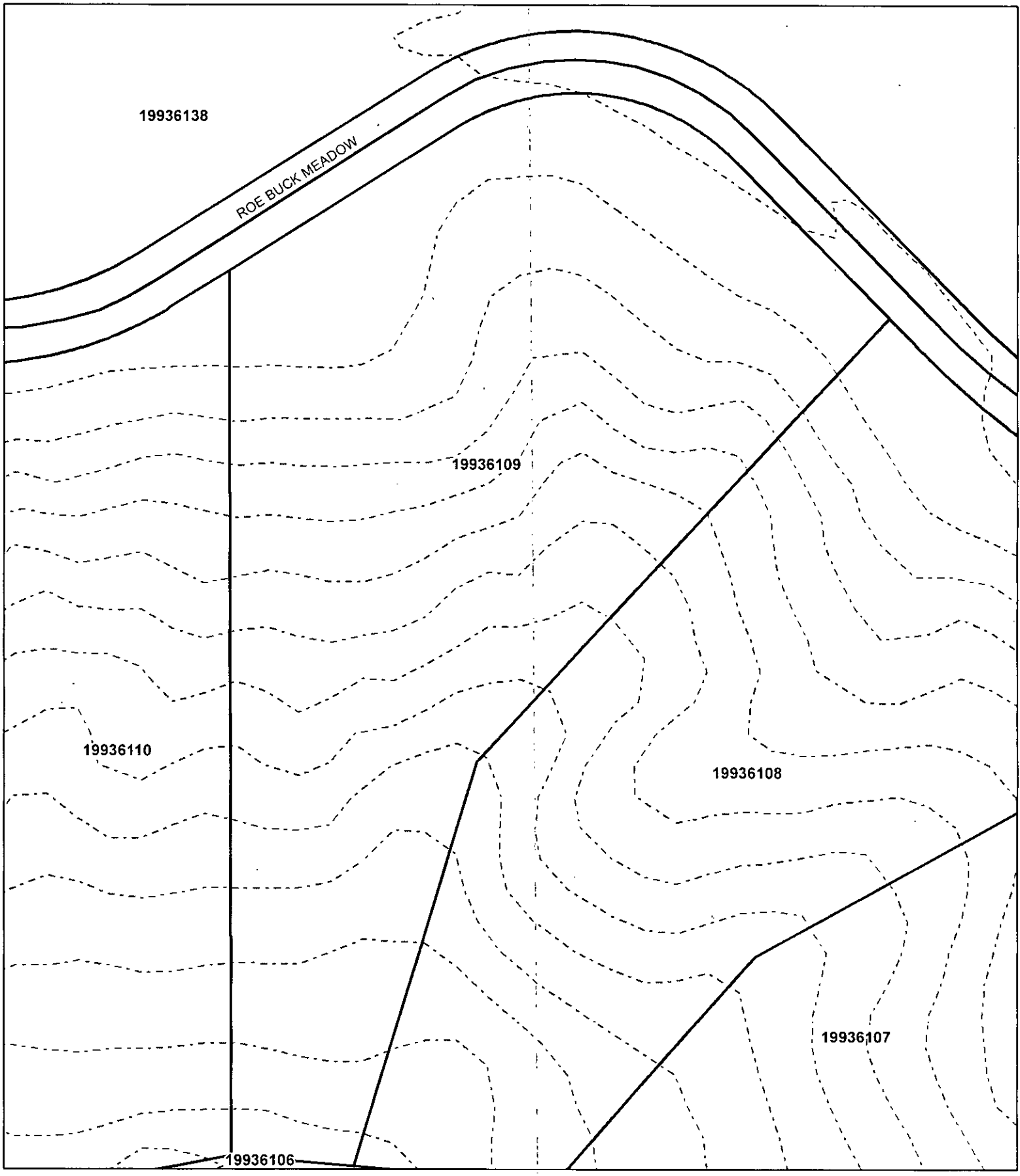
Notes

Tax Year	Notes	Note Date

Value Changes

Notice Date	Tax Year	Reason	Changed To	Deferred
Feb 8 2011	2011	Countywide Revaluation	341600	0
Jul 19 2006	2006	Division of Land and/or New Parcel	279500	0
Jul 19 2006	2006	Division of Real Estate and/or New Parce	279500	0

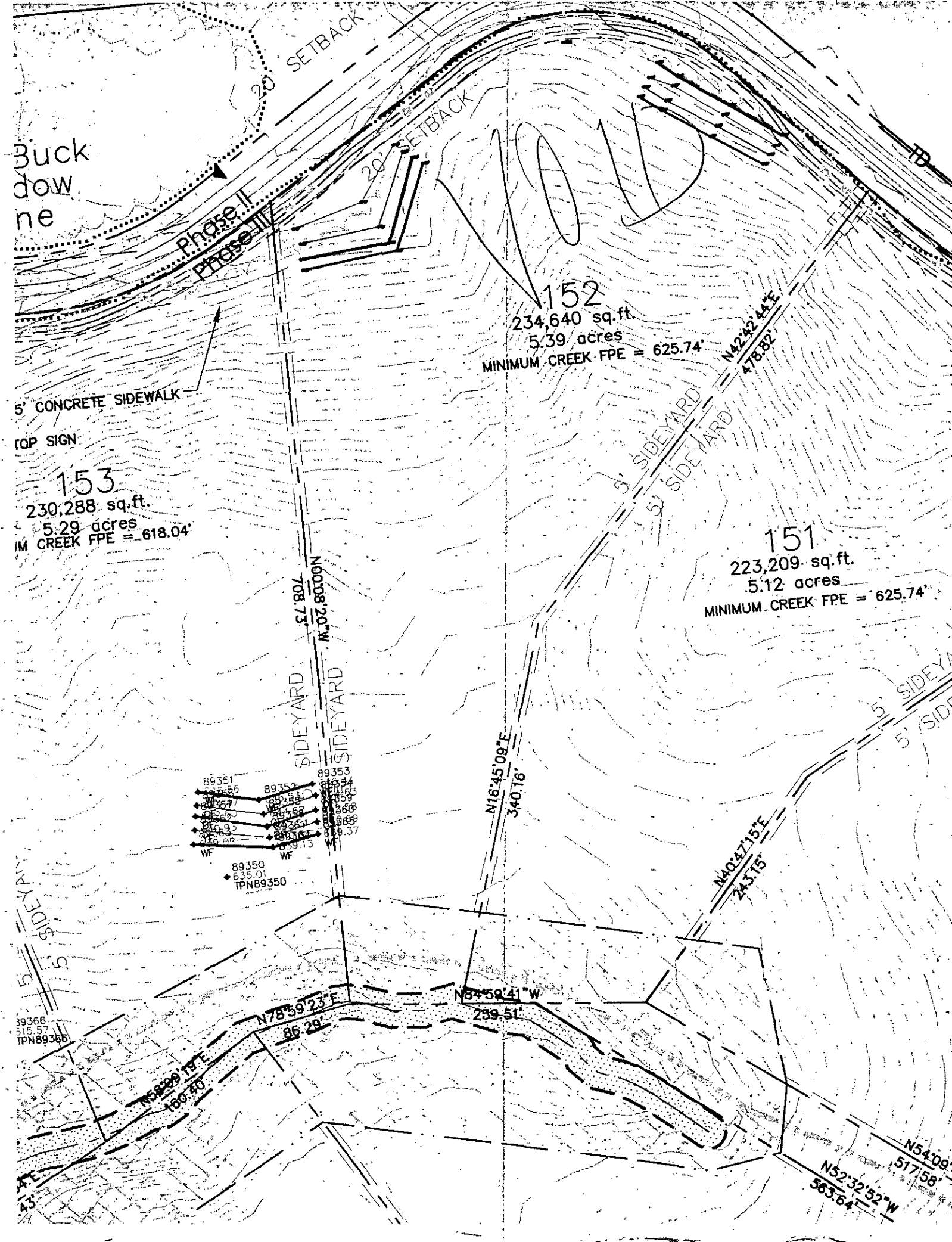
Parcel # 199-361-09
File # 5862B
AppID: 7067



Map Created By:
Map Created On:

0 50 100 Feet

N


20' SETBACK
20' SETBACK
Phase II
Phase III
Buck
dow
ne
5' CONCRETE SIDEWALK
TOP SIGN
153
230,288 sq.ft.
5.29 acres
M CREEK FPE = 618.04'
152
234,640 sq.ft.
5.39 acres
MINIMUM CREEK FPE = 625.74'
151
223,209 sq.ft.
5.12 acres
MINIMUM CREEK FPE = 625.74'
5' SIDEYARD
5' SIDEYARD
5' SIDEYARD
5' SIDEYARD
N42°42'44"E
478.82'
N00°08'20"W
708.73'
N16°45'09"E
340.16'
N40°47'15"E
243.15'
N84°59'41"W
259.51'
N78°59'23"E
86.29'
N58°59'13"E
160.40'
N54°09'
517.58'
N52°32'52"W
563.64'
89351
89352
89353
89350
635.01
TPN89350
89366
615.57
TPN89366
WF

FEE: _____
DATE: _____

AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION

PERMIT NUMBER: 5862B
PARCEL NUMBER: 199-350-32

VOID

JOB LOCATION ADDRESS: Roe Buck Meadoe Lane Lot #152
PROPERTY OWNER: The Sanctuary @ Lake Wylie
BUILDING CONTRACTOR:
SUBDIVISION NAME: The Sanctuary @ Lake Wylie
AUTHORIZATION ISSUED BY: David Cornelius, RS DATE: 07/19/05

DENR/DEH AUTHORIZED AGENT 7/19/05

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 5862B, 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 THE 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 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, NOT TO EXCEED 60 MONTHS.

5. OTHER CONDITIONS:
   Install according to plans on file submitted by S&ME, 7/7/05.
   Lot #152, phase III

CONDITIONS OF IMPROVEMENT PERMIT / CONSTRUCTION AUTHORIZATON

Permit Number: **5862B** Tax Number: **199-350-32**

- 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

Primary Wastewater System

Type: ☐ 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:

0.3 Long-term acceptance rate (GPD/ft^2)	**600** Max gallons/day wastewater flow	**1500** Absorption Area (ft^2)	**9** Trench spacing (min. on centers) (ft)
Serviced by private well: ☐ Yes ☒ No	**1500** Gallon septic tank	**500** Total trench length (ft)	**24** Maximum trench depth (in) *(At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions.)*
5 Bedrooms in residence	**1500** Gallon pump tank	**na** Depth of stone (in)	

Any surface water present: **No** Type: Minimum separation distance (ft):

Additional conditions: **Install according to plans on file submitted by S&ME, 7/7/05. Lot #152, phase III**

Repair Area System

Type: ☐ 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:

1500 Absorption Area (ft^2) **500** Total trench length (ft)	**na** Depth of stone (in)	**9** Trench spacing (min. on centers) (ft)	**24** Maximum trench depth (in)

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. The approval is granted in accordance with the provisions of Laws and Rules For Sewage Treatment, and Disposal Systems 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.

DENR Authorized Agent — Date 7/19/05

Owner/Agent Signature — Date 8-2-05

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 N. TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE: (704) 336-5103
FAX: (704) 336-6894

NC DENR
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

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

Sheet: 1 of 2
Property ID: PO 199-350-32
Lot #: 152
File #: 5862B
Code: 1

ACS

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Sanctuary at Lake Wylie
Applicant: Toney Jacobs & Assoc.
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Evaluation Method: [x] Auger boring [ ] Pit [ ] Cut
Type of Wastewater: [x] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	SOIL MORPHOLOGY 1941			OTHER PROFILE FACTORS				
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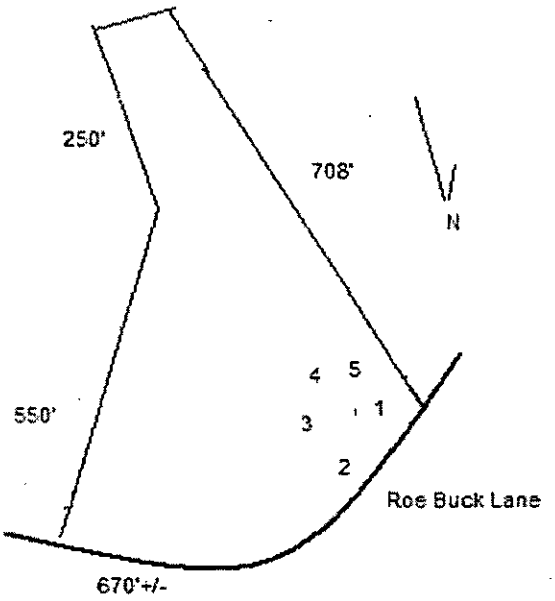
Other Factors (.1946):
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Evaluated By: W. R. Marlin, LSS, 3/16/2005, W. R. Marlin
Others Present:

COMMENTS:
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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



200.00 check 1891 — SEPTIC FEE

DATE: 2/21/05

CRT:

GWS – RES. APP 12/04

PERMIT APPLICATION FOR A RESIDENTIAL SITE IMPROVEMENT PERMIT / CONSTRUCTION AUTHORIZATION

FOR ON-SITE WASTEWATER SYSTEM

NEW WELL INSTALLATION OR REPAIR OF EXISTING WELL

MECKLENBURG COUNTY GROUNDWATER & WASTEWATER SERVICES

WELL FEE

DATE

CRT:

FILE # 5862B

SEPTIC / TYPE APPLICATION: ☐ NONE ☒ NEW SYSTEM EXISTING SYSTEM ☐ EXPANSION/ALTERATION ☐ REPAIR

WELL / TYPE APPLICATION: ☐ NONE ☐ NEW WELL ☐ MAJOR REPAIR ☐ ABANDONMENT

JOB LOCATION INFORMATION:

TAX/PARCEL #: 19935032

STREET ADDRESS: Roe Buck MEADOW

CITY: Charlotte

STATE: NC ZIP: 28278

SUBDIVISION OR MOBILE HOME PARK NAME: SANCTUARY

LOT #: 152

TOWNSHIP:

☒ 0-MECKLENBURG ☐ 4-PINEVILLE

☐ 1-CHARLOTTE ☐ 5-MATTHEWS

☐ 2-DAVIDSON ☐ 6-HUNTERSVILLE

☐ 3-CORNELIUS ☐ 7-MINT HILL

BUILDING INFORMATION:

TYPE OF BUILDING:

☐ SINGLE MOBILE HOME (S) ☐ MODULAR HOME (M)

☐ DOUBLE WIDE (D) ☐ MULTIPLE FAMILY (U)

☒ HOUSE (H) ☐ OTHER

HEATED SQUARE FOOTAGE:

NUMBER OF BEDROOMS: 5

NUMBER OF OCCUPANTS:

FOUNDATION FOR RESIDENCE:

☐ CONCRETE SLAB ☒ BASEMENT WITH PLUMBING

☐ CRAWLSPACE ☐ BASEMENT WITH NO PLUMBING

IF PLANNING TO EXPAND/ALTER THE EXISTING SYSTEM INDICATE THE FOLLOWING CHANGES:

NUMBER OF BEDROOMS TO BE ADDED: NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE? ☐ YES ☐ NO TYPE:

WATER SUPPLY:

☒ MUNICIPAL (M) ☐ PUBLIC (C) ☐ PRIVATE WELL (P) ☐ SHARED WELL (S) ☐ OTHER 'SPRINGS' (O)

PROPOSED USE OF WELL: ☐ N/A ☐ IRRIGATION ☐ POTABLE ☐ GEOTHERMAL ☐ OTHER

ARE ANY OF THE FOLLOWING LOCATED ON THE PROPERTY? IF SO, PLEASE SHOW LOCATION ON SITE PLAN/PLAT.

BURIED CABLES, LANDFILLS, STUMPHOLES	☐ YES	☒ NO	WELLS, SPRINGS, OR WATER LINES	☐ YES	☐ NO
EXISTING WASTEWATER SYSTEMS	☐ YES	☒ NO	DESIGNATED WETLANDS	☐ YES	☐ NO
EASEMENTS OR RIGHT-OF-WAYS	☐ YES	☒ NO	GRADING/SOIL REMOVAL PERFORMED	☐ YES	☒ NO

PROPERTY OWNER:

NAME: SANCTUARY AT LAKE WYLIE, LLC

ADDRESS: P.O. Box 1003

CITY: CHARLOTTE, NC

STATE: NC ZIP: 28201

HOME PHONE: WORK PHONE: 295-0950

MOBILE PHONE: FAX:

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: TONEY JACOBS, + ASSOC INC

ADDRESS: 169 RAMBLE DR.

CITY: MOORESVILLE

STATE: NC ZIP: 28117

HOME PHONE: — WORK PHONE: 663-6705

MOBILE PHONE: — FAX: 662-9545

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? Lots Not RECORDED

WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?

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

2-21-05

Owner's/Agent's Signature Date

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

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

Owner's/Agent's Signature Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST., SUITE 211
CHARLOTTE, NC 28202
704-336-5103 / FAX: 704-336-6894

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 10/03/14
Receipt #: 90977
Check / Auth #: CHARGE
Received By: SADERLW

Amount: 200.00
Tendered: 200.00
Returned: 0.00

Account Information

Account #: X49308
Contractor: STRINGER TERRANCE G
Attn:
Address: 2724 ROZZELLE'S LANDING DRIVE
Address:
City/State/Zip: CHARLOTTE, NC 28214

Item	Description	Permit#	Quantity	Unit Price	Total Price
0703	*Septic Operational Permit* 14321 Roe Buck Meadow Ln		1	200.00	200.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
400.00					

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	10/03/14	**Amount:**	200.00
Receipt #:	90979	**Tendered:**	200.00
Check / Auth #:	CHARGE	**Returned:**	0.00
Received By:	SADERLW		

Account Information

Account #: X49308
Contractor: STRINGER TERRANCE G
Attn:
Address: 2724 ROZZELLE'S LANDING DRIVE
Address:
City/State/Zip: CHARLOTTE, NC 28214

Item	Description	Permit#	Quantity	Unit Price	Total Price
0734	Septic Construction Authorization 14321 Roe Buck Meadow Ln		1	200.00	200.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
400.00					

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 09/25/14
Receipt #: 90884
Check / Auth #: CHECK 1035
Received By: SADERLW

Amount: 250.00
Tendered: 250.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: STRINGER TERRANCE G
Attn:
Address: 2724 ROZZELLES LANDING DR
Address:
City/State/Zip: CHARLOTTE, NC 28214

Item	Description	Permit#	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 14321 ROE BUCK MEADOW LN		1	250.00	250.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
	587.40		270.00	1,859.65	