

13628 PINE HARBOR RD

19908570

7/10/08

marliwr

Groundwater and Wastewater Services File Imaging Project
May 2007
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Groundwater & Wastewater Services
Septic Project File & Data Review Worksheet

GWS File #: 14435 WASPS App #: 2559

Primary ES assigned to project: CS

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 ☐
	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: 5			
	Were sufficient auger borings made?	Yes ☐	No ☐	N/A ☐
.1939(d), 1955, 1956, .1957	LTAR 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) 130A-336	Proposed System Type stated-Repair	Yes ☑	No ☐	N/A ☐
(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) 130A-336(a)	Is the System located in the approved area?	Yes ☑	No ☐	N/A ☐
	Is the Design flow (gpd) indicated?	Yes ☑	No ☐	N/A ☐

130A-336(a)	Number of Bedrooms, employees, seats, etc. indicated?			
.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 ☐
1937(i)	Operation Permit	Yes ☑	No ☐	N/A ☐
.1937(i)	System type as described in table V(a) of rule .1961	Yes ☐	No ☐	N/A ☐
	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 ☐

Comments: # Items requiring correction/modification: _____

IA issued date: _____

OP issued date: _____

Review performed by: VL Date performed: 8/10/07

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 #: 30002559 GWS File #: 14435 Tax Parcel #: 199-085-70

- 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):** 8/9/2012

Type of Installation: Residential - New System Lot Number: 4

Structure Type: HOUSE Size (ft^2): 3353 # Bedrooms: 4 # Occupants: 2

Building Foundation: Crawl Space Water Supply: Private Well

II. Initial System Type: Approved **System Classification:** IIIg

Initial System Specifications:

Design Flow (gpd): 480 LTAR (gpd/ft^2): 0.3 Septic Tank Size (gal): 1500 Pump Tank Size (gal): N/A

Trench Width (ft): 3 Trench Spacing (ft): 9 Absorption Area (ft^2): 1200 Total Trench Length (ft): 400

Maximum Trench Depth (in): 30 Depth of Media (in): 12 Distribution Device: Drop Boxes

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

Repair System Specifications:

Design Flow (gpd): 480 LTAR (gpd/ft^2): 0.3 Septic Tank Size (gal): 1500 Pump Tank Size (gal): 1000

Trench Width (ft): 3 Trench Spacing (ft): 9 Absorption Area (ft^2): 800 Total Trench Length (ft): 267

Maximum Trench Depth (in): 30 Depth of Media (in): 24 Distribution Device: Manifold (LPP Distri

IV. Permit Conditions/Comments:

(Please See the Following Page for Permit Conditions.)

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, 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 an INSTALLATION APPROVAL is granted by the Department
- The septic system installer shall be a registered septic contractor with Mecklenburg County Health Department.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

DENR Authorized Agent: Chris Sherrill Owner/Legal Agent:

Signature: Signature: Print Name Jesse Beasley

Date Issued: 8/9/2007

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St, Suite 211 Charlotte, NC 28202
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IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: 30002559 GWS File #: 14435

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- 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.
- All components of the septic system must be located at least 100 ft. (50 ft. minimum) from all private wells.

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DENR Authorized Agent: Chris Shurtill

Signature: [signature]

Date Issued: 8/9/2007

Owner/Legal Agent: Jesse Boasley

Print Name

Signature: [signature]

http://hmc-ms-zone1/WASPS/ImprovementPermitOutputForm2b.aspx?appid=2559 8/9/2007
MAR-11-2008 14:07 NEFF CHARLOTTE P.04

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Maximum Trench Depth (in):	30	Depth of Media (in):	12	Distribution Device:	Drop Boxes		

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Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	800	Total Trench Length (ft):	267
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DENR Authorized Agent: Chris Sherrill Owner/Legal Agent: _____
Print Name

Signature: _____ Signature: _____

Date Issued: 8/9/2007

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DENR Authorized Agent: Chris Sherrill

Signature: Chris Sherrill

Date Issued: 8/9/2007

Owner/Legal Agent: _____
Print Name

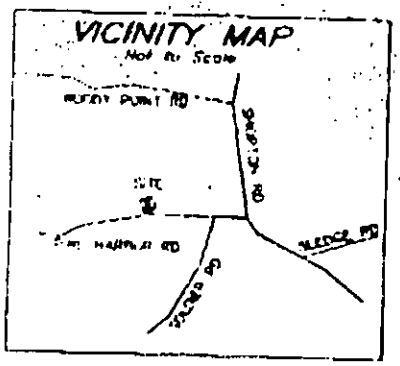
Signature: _____

THIS IS TO CERTIFY THAT ON THE 25TH DAY OF JUNE 2007 AN ACTUAL SURVEY WAS MADE UNDER MY SUPERVISION OF THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE BOUNDARY LINES AND THE IMPROVEMENTS, IF ANY, ARE AS SHOWN HEREON.

SIGNED _____ REGISTERED SURVEYOR

NORTH CAROLINA PROFESSIONAL SEAL L-2646 LAND SURVEYOR HUGH E. WHITE, JR.

VICINITY MAP
Not to Scale



LINE TABLE		
LINE	LENGTH	BEARING
L1	23.02	N34°39'43"E
L2	14.31	N33°54'38"E

NOTE: IRON PINS AT ALL CORNERS UNLESS OTHERWISE NOTED.
THIS PROPERTY MAY BE SUBJECT TO ADDITIONAL RECORDED OR UNRECORDED EASEMENTS, RIGHTS-OF-WAY, OR RESTRICTIVE COVENANTS, OTHER THAN SHOWN.
THIS PROPERTY LIES WITHIN THE LOWER LAKE WYLIE WATERSHED CRITICAL AREA.
PID#19908570

8/9/07

LOT 5
MB:19 PG:149

LOT 2
MB:19 PG:149

S02°36'28"E 134.55'

IV a PPBPS REPAIR AREA

EXISTING WELL

AREA FOR WELL

LOT 4
40,107 sq. ft.

N08°10'18"E 308.79'

S84°05'26"W 261.85'

4-BEDROOM HOUSE SITE

75' DRIVE

OLD WELL

CONCRETE

PAVEMENT

(TIE) N36°43'01"W 97.55'

(TIE) N47°15'32"W 96.47'

15' P.D.E (PER PLAT)

15" PIPE

N12°23'38"E 207.49'

(177.49')

S11°42'49"W 157.14'

(128.61')

S35°33'W (28.53')

ROAD

- 1"=50'
- 4BR - 480 GPD
- LTAR 0.3 GPD/FT²
- TYPE IIP INITIAL
- GRAVITY 25% RED.
- INSTALL ON DROP BOXES
- TYPE IV a PPBPS (LP) REPAIR AREA
- MAINTAIN SETBACKS
  - -> 10' FROM PROPERTY LINES
  - -> 50' FROM WELLS
  - -> 5' FROM FOUNDATION
- INSTALL PER .1961

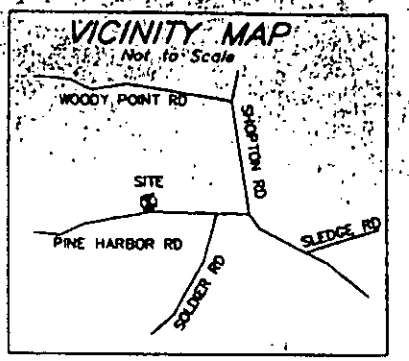
IMPERVIOUS CALCULATIONS:
LOT AREA: 49,07 sq. ft.
49,107 sq. ft. X 24%=
11,785 sq. ft. OF ALLOWABLE IMPERVIOUS AREA
[illegible] sq. ft. OF EXISTING

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VICINITY MAP
Not to Scale



LINE TABLE		
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NOTE: IRON PINS AT ALL CORNERS UNLESS OTHERWISE NOTED.
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THIS PROPERTY LIES WITHIN THE LOWER LAKE WYLIE WATERSHED CRITICAL AREA.
PID#19908570

8/9/07

LOT 5
MB:19 PG:149

LOT 2
MB:19 PG:149

S02°36'28"E 134.55'

EIP

(TREE FENCE)

(WOOD FENCE)

10'

IV a well proposed

LPP BPS REPAIR AREA

50'

EXISTING WELL AREA FOR WELL

25'

LOT 4
1.11 ac. sq. ft.

4-BEDROOM HOUSE SITE

N78°10'18"E 308.79'

(TIE) N78°10'12"E 300.18'

S84°05'26"W 261.86'

71.21'

66'2"

75' DRIVE

OLD WELL

CONCRETE

ELE

PAVEMENT

(TIE) N36°43'01"W 97.55'

(TIE) N47°16'32"W 96.47'

L1

L2

15' P.D.E (PER PLAT)

15" PIPE

N12°23'38"E 207.49'

(177.49')

S11°42'49"W 157.14'

(128.61')

(28.53')

S67°35'33"W

MB:19 PG:149

- 1"=50'
- 4BR-480 GPD
- LTAR 0.3 GPD/FT²
- TYPE III INITIAL GRAVITY 25% RED.
- INSTALL ON DROP BOXES
- TYPE IV a PPBPS (LP) REPAIR AREA
- MAINTAIN SETBACKS
  - -> 10' FROM PROPERTY LINES
  - -> 50' FROM WELLS
  - -> 5' FROM FOUNDATION
- INSTALL PER. 1961

IMPERVIOUS CALCULATIONS:
LOT AREA 49,07 sq. ft.
49,107 sq. ft. X 24% =
11,785 sq. ft. OF ALLOWABLE IMPERVIOUS AREA
minus 4,042 sq. ft. OF EXISTING

OR ROAD

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

Sheet: 1 of 2
Property ID: 199-085-70
Lot #: 4
File #: 14435
AppID: 2559

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Jesse Beasley
Applicant:
Address: 14550 Waterside Dr., Charlotte, NC 28278
Date Evaluated: 8/8/2007
Proposed Facility: Residence
Design Flow (.1949): 480 gpd
Property Size:
Location of Site: 13628 Pine Harbor Rd
Property Recorded:
Water Supply: [ ] Public [x] Individual [x] Well [ ] Spring [ ] Other
Evaluation Method: [x] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [x] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	b PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS,10	0-3	GR/CL	FR/SS/SP/SEXP	>42" TO SOIL WETNESS	42	NA	NONE	PS,IV
		3-42	SBK/C	FI/S/P/SEXP					.3 GPD/FT^2
		42+	M/SAP						
2	"	0-2	GR/CL	FR/SS/SP/SEXP	>45" TO SOIL WETNESS	45	"	"	"
		2-45	SBK/C	FI/S/P/SEXP					
		45+	M/SAP						
3	"	0-3	GR/CL	FR/SS/SP/SEXP	>48" TO SOIL WETNESS	48	"	"	"
		3-48	SBK/C	FI/S/P/SEXP					
4	"	0-6	GR/CL	FR/SS/SP/SEXP	"	"	"	"	"
		6-48	SBK/C	FI/S/P/SEXP					
5	"	0-3	GR/CL	FR/SS/SP/SEXP	"	"	"	"	"
		3-48	SBK/C	FI/S/P/SEXP					
					SITE LTAR				.3 GPD/FT^2

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	IIIg	IV a
Site LTAR	.3 gpd/ft2	.3 gpd/ft2

Other Factors (.1946): None
Soil Evaluation By: Chris Sherrill, RS, LSS
Others Present: No
Site Classification (.1948): PS
Site Evaluation By: Chris Sherrill, RS, LSS
Others Present: J.Beasley

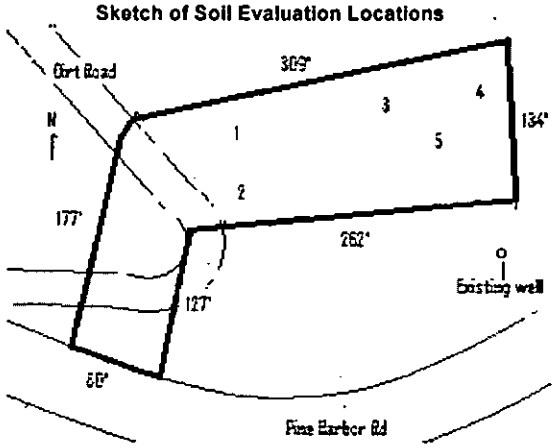


COMMENTS: 100% Repair Area Required FILE #: 14435

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				
FP-Flood Plain		CL-Clay Loam		
		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



FILE NUMBER: 14435

APPLICATION NUMBER: 2559

SEPTIC FEE: 200
DATE: 7/3/07
CHK 1466

Revised On: January 3, 2007

MECKLENBURG COUNTY GROUNDWATER & WASTEWATER SERVICES

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

WELL FEE: 100
DATE: 7/31/07
CHK 1466

1. SEPTIC / TYPE APPLICATION: ☐ NONE ☒ NEW SYSTEM ☐ ALTERATION ☐ REPAIR ☐ MODIFIED PLOT PLAN

2. WELL / TYPE APPLICATION: ☐ NONE ☒ NEW WELL ☐ MAJOR REPAIR ☐ ABANDONMENT

3. JOB LOCATION INFORMATION:

TAX PARCEL NUMBER: 19908570
STREET ADDRESS: 13628 Pinchorbor Rd
CITY: Charlotte
STATE: NC ZIP: 28278
SUBDIVISION NAME: Pinchorbor Estates
LOT #: LOT 4 LOT SIZE (acres): 1.3

TOWNSHIP:
☒ 9-MECKLENBURG ☐ 3-CORNELIUS ☐ 8-HUNTERSVILLE
☐ 1-CHARLOTTE ☐ 4-PINEVILLE ☐ 7-MINT HILL
☐ 2-DAVIDSON ☐ 5-MATTHEWS

4. BUILDING INFORMATION:

BUILDING TYPE:
☐ SINGLE MOBILE HOME ☐ MODULAR HOME
☐ DOUBLE WIDE ☐ MULTIPLE FAMILY
☒ HOUSE ☐ OTHER _____

HEATED SQUARE FOOTAGE: 3,353
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 2

FOUNDATION TYPE:
☐ CONCRETE SLAB ☐ BASEMENT WITH PLUMBING
☒ CRAWL SPACE ☐ BASMENT WITH NO PLUMBING

5. IF PLANNING TO EXPAND OR ALTER THE EXISTING 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 ☐ PUBLIC WELL ☒ PRIVATE WELL ☐ SHARED WELL ☐ SPRING

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

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

☒ ANY TYPE ☐ CONVENTIONAL ☐ ACCEPTED ☐ INNOVATIVE ☐ ALTERNATIVE ☐ OTHER _____

8A. RANK: 1 2 3 4 5

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 SYSTEMS	☐ YES ☒ NO	JURISDICTIONAL WETLANDS	☐ YES ☒ NO
WELLS, SPRINGS, OR WATER LINES	☐ YES ☒ NO	APPROVAL REQUIRED BY ANY OTHER PUBLIC AGENCY (Building Permit)	☒ YES ☐ NO
EASEMENTS OR RIGHT-OF-WAYS	☒ YES ☐ NO	WASTEWATER OTHER THAN DOMESTIC SEWAGE	☐ YES ☒ NO

10. PROPERTY OWNER:

NAME: Jesse Beasley
ADDRESS: 14550 Waterside Drive
CITY: Charlotte,
STATE: NC ZIP: 28278
HOME PHONE: 704-499-3742 WORK PHONE: 704-599-0113
MOBILE PHONE: 704-201-9137 FAX: 704-599-0173

11. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:

NAME:
ADDRESS:
CITY:
STATE ZIP:
HOME PHONE: WORK PHONE:
MOBILE PHONE: FAX:

12. WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? Feb. 6th 2007
13 WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY? already sold, purchase date Feb 6th 2007

14. SEPTIC SYSTEM PERMIT APPLICATION SIGNATURE SECTION:

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 60 months or is non-expiring depending upon the documentation submitted: complete site plan = 60 months, complete plat = non-expiring.

7-26-07
Property Owner's or Owner's Legal Representative Signature Date

16. WELL PERMIT APPLICATION SIGNATURE SECTION:

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 12 months from the date of issuance.

7-26-07
Property Owner's or Owner's Legal Representative Signature Date

☒ SURVEY PLAT TO SCALE SUBMITTED ☐ SCALED SITE PLAN SUBMITTED ☐ UN-SCALED SITE PLAN SUBMITTED

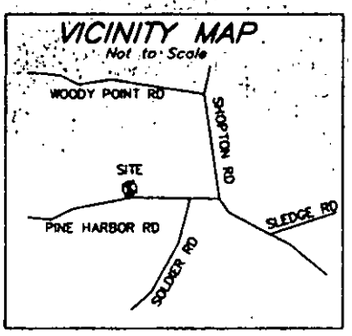
MECKLENBURG COUNTY-GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST., SUITE 211, CHARLOTTE, NC 28202 PHONE: (704) 336-5103 FAX: (704) 336-6894

0701
0753

THIS IS TO CERTIFY THAT ON THE 25TH DAY OF JUNE 2007, AN ACTUAL SURVEY WAS MADE UNDER MY SUPERVISION OF THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE BOUNDARY LINES AND THE IMPROVEMENTS, IF ANY, ARE AS SHOWN HEREON.

SIGNED _____
REGISTERED SURVEYOR

NORTH CAROLINA PROFESSIONAL SEAL L-2646 LAND SURVEYOR HUGH E. WHITE, JR.



LINE TABLE		
LINE	LENGTH	BEARING
L1	23.02	N34°39'43"E
L2	14.31	N33°54'58"E

NOTE: IRON PINS AT ALL CORNERS UNLESS OTHERWISE NOTED.
THIS PROPERTY MAY BE SUBJECT TO ADDITIONAL RECORDED OR UNRECORDED EASEMENTS, RIGHTS-OF-WAY, OR RESTRICTIVE COVENANTS, OTHER THAN SHOWN.
THIS PROPERTY LIES WITHIN THE LOWER LAKE WYLIE WATERSHED CRITICAL AREA.
PID#19908570

LOT 2
MB:19 PG:149

EIP
S02°36'28"E 134.55'
(WIRE FENCE)
(WOOD FENCE)
EIP
TELE
Well Proposed

LOT 4
49,107 sq. ft.
1.13 acres

(TIE)
N78°10'12"E 300.18'
N78°10'18"E 308.79'
S84°05'26"W 261.86'
1/2 Wide
66' = 2 Across

LOT 5
MB:19 PG:149

LOT 3
MB:19 PG:149

CONCRETE
PAVEMENT
TELE
(TIE)
N36°43'01"W 97.55'
EIP
(TIE)
EIP
L7
EIP
15" PIPE
15' P.D.E (PER PLAT)
(TIE)
N47°16'32"W 96.47'
EIP
N12°23'38"E 207.49'
(177.49')
S11°42'49"W 157.14'
(128.61')
EIP
(28.53')
MB:19 PG:149
SIP
(30.00')
N67°35'33"W 79.62'
PAVEMENT
PINE HARBOR ROAD
(60' PUBLIC R/W)

IMPERVIOUS CALCULATIONS:
LOT AREA: 49,07 sq. ft.
49,107 sq. ft. X 24%=
11,785 sq. ft. OF ALLOWABLE IMPERVIOUS AREA
minus 4,042 sq. ft. OF EXISTING IMPERVIOUS AREA

7,743 sq. ft. OF BUILDABLE AREA REMAINING

THIS IS TO CERTIFY THAT THE SUBJECT PROPERTY IS NOT LOCATED IN A SPECIAL FLOOD HAZARD AREA AS SHOWN ON MAPS PREPARED BY THE F.E.M.A. AND FEDERAL INSURANCE ADMINISTRATION.

PHYSICAL SURVEY
OF

#13628 PINE HARBOR ROAD
CHARLOTTE, MECKLENBURG CO. NORTH CAROLINA

SCALE 1" = 50'

SURVEYED FOR JESSIE & LINDSEY BEASLEY

CAROLINA SURVEYORS, INC
P.O. BOX 267
PINEVILLE, N.C. 28134
(704) 889-7601
FAX:(704) 889-7614

MAP RECORDED IN BOOK 19 AT PAGE 149 DEED RECORDED BOOK 21740 PAGE 190

DRAWN BY JGM FIELD WORK DA/CU FIELD BOOK # IN-FILE

LDD/2007/BAT/PINEHARBOR
DATA/2007/P/PINEHARBOR

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	07/31/07	**Amount:**	200.00
Receipt #:	52005	**Tendered:**	200.00
Check / Auth #:	CHECK 1466	**Returned:**	0.00
Received By:	CRAIGGY		

Account Information

Account #:	200000
Contractor:	BEASLEY JESSE W
Attn:	
Address:	14550 WATERSIDE DR
Address:	
City/State/Zip:	CHARLOTTE, NC 28278

Item	Description	Permit#	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 13628 PINE HARBOR RD/FILE 14435		1	200.00	200.00

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
25.00					

Permit Number: 14435

CONDITIONS OF IMPROVEMENT PERMIT

Tax Number: 199-085-70

The IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be NO grading, filling or disturbance of the soil in the area of the septic tank system or repair area.

CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a Building Permit. The Construction Authorization is NOT transferable. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.

Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

Basement: ✓ Yes ___ No ___ Partial Basement

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

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

.3 Long-term acceptance rate	480 Max gallons/day wastewater flow	1600 Absorption Area (sq ft) 25% Red = 1200	4' Trench spacing (min. on centers)
Yes Serviced by private well	1500 Gallon septic tank	400 Total trench length (ft)	36" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
4 Bedrooms in residence	N/A Gallon pump tank	N/A Depth of stone	

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

Site modifications required:

Additional Conditions: 25% Reduction System, Innovative Agreement Forms must be on file prior to Authorization to Construct. Keep well >50' from any part of Septic System

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

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

___ Absorption Area (Sq ft) ___ Total Trench Length (Ft)	___ Depth of Stone Trench	___ Trench spacing (min. on centers)	___ Maximum Trench Depth

For existing system, enter the year originally installed:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for th Job Location contained in this document. This approval is granted in accordance with the provisions of Laws and Rules For Sewage, Treatment and Disposal in effe 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 Departmer

... This Improvement permit is transferable.

BS 7/5/02

DEHNR Authorized Agent Date

Owner/Agent Signature Date

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

NORTH CAROLINA DEPARTMENT OF
ENVIRONMENTAL, HEALTH,
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

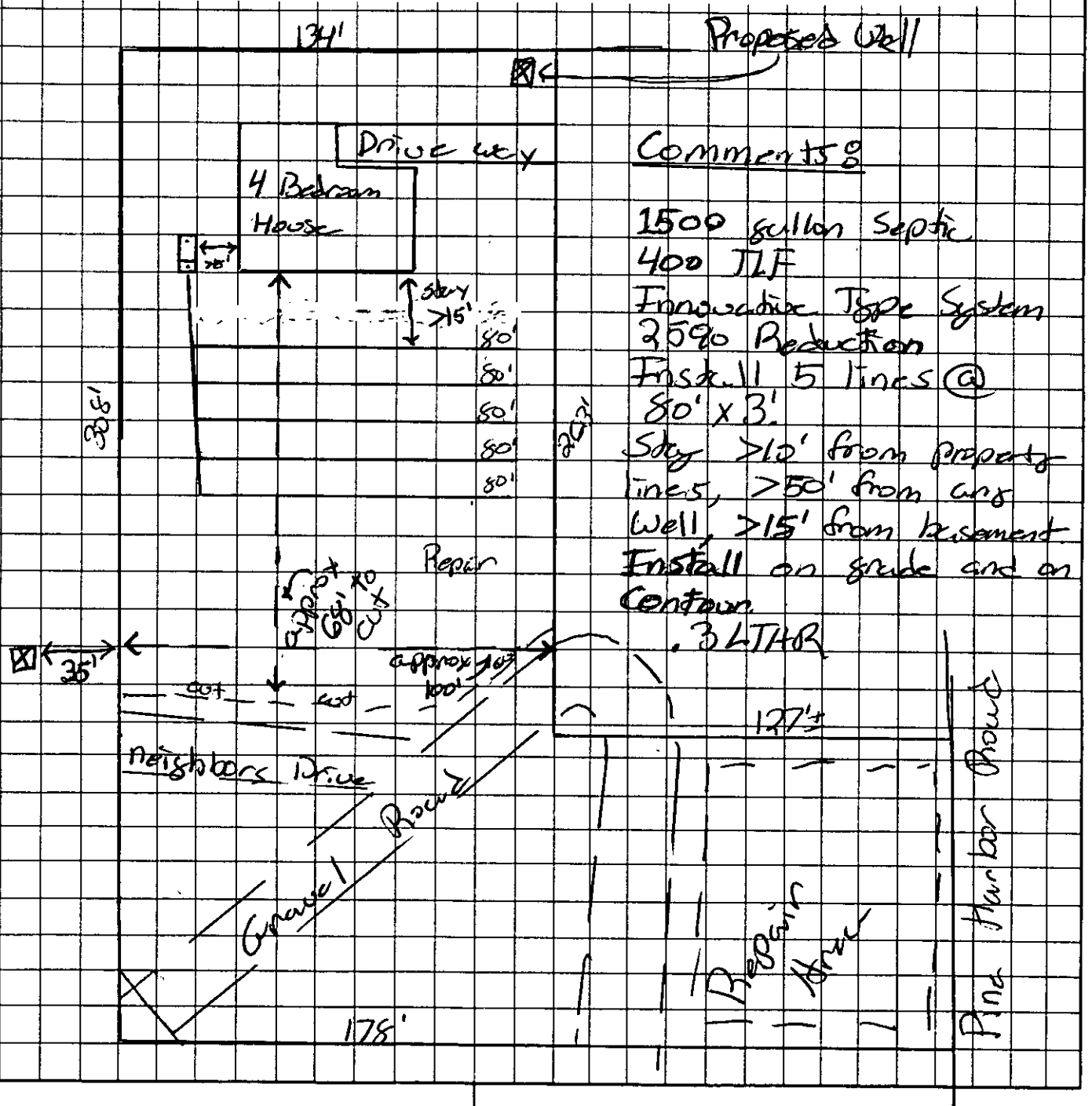
PROPOSED PLOT PLAN

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

FILE: 14435

TC: 199-085-70

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



APPROVAL DATE _____

OWNER/AGENT SIGNATURE

DATE

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

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

Sheet: 1
Property ID: 199-085-70
Lot #: 4
File #: 14435
Code: 1

ACS

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: James H. Watters
Applicant: Christopher C. Horn
Address: 316 Swamp Fox Dr., Fort Mill, N. C. 29715-6701
Date Evaluated: 06/12/2002
Proposed Facility: Residence
Design Flow (.1949): 360gpd
Property Size: 1.06a
Location of Site: 13628 Pine Harbor Road
Property Recorded:
Water Supply: [ ] Public [x] Individual [x] Well [ ] Spring [ ] Other
Evaluation Method: [x] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [x] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	SOIL MORPHOLOGY .1941 .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, 23	0-2	GR/CL	FR/SEXP/SS/SP	>50" TO SOIL WETNESS	50	N/A	NONE	PS, IV .3GPD/FT^2
		2-32	SBK/ABK/C	FI/SEXP/S/P					
		32-50	SBK/CL	FR/SS/SP					
2	LS, 10	0-2	GR/CL	FR/SEXP/SS/SP	>47" TO SOIL WETNESS	47	"	"	"
		2-24	SBK/C	FI/SEXP/S/P					
		24-47	SBK/CL	FR/SEXP/SS/SP					
3	"	0-3	GR/CL	FR/SEXP/SS/SP	"	"	"	"	"
		3-47	SBK/C	FI/SEXP/S/P					
4	LS, 15	0-2	GR/CL	FR/SEXP/SS/SP	>25" TO SOIL WETNESS	25	"	"	US, IV .15GPD/FT^2 LPP
		2-22	SBK/C	FI/SEXP/S/P					
		22+	M/SL	FR/SEXP/NS/NP					
5	LS, 20	0-4	GRCL	FR/SEXP/SS/SP	>43' TO SOIL WETNESS	43	"	"	PS, IV .3GPD/FT^2
		4-35	SBK/C	FI/SEXP/S/P					
		35-43	SBK/CL	FR/SEXP/SS/SP					
6	LS, 15	0-4	GR/CL	FR/SEXP/SS/SP	>49" TO SOIL WETNESS	49	"	"	"
		4-22	SBK/C	FI/SEXP/S/P					
		22-49	SBK/CL	FR/SEXP/SS/SP					
7	LS, 10	0-3	GR/CL	FR/SEXP/SS/sP	>48" TO SOIL WETNESS	48+	"	"	"
		3-30	SBK/C	FI/SEXP/S/P					
		30-48+	SBK/CL	FR/SEXP/SS/SP					

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

Other Factors (.1946): _____
Site Classification (.1948): PROVISIONALLY SUITABLE
Evaluated By: W. R. Marlin, LSS, 6/14/02. W. R. Marlin
Others Present:

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

Sheet: 2
Property ID: 199-085-70
Lot #: 4
File #: 14435
Code: 1

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Applicant:
Address: Date Evaluated:
Proposed Facility: Design Flow (.1949): Property Size:
Location of Site: Property Recorded:
Water Supply: [ ] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [ ] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [ ] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	OTHER PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
8	LS, 10	0-4	GR/CL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48+	N/A	NONE	PS, IV
		4-48+	SNK/C	FI/SEXP/S/P					.3GPD/FT^2

Description	Initial System	Repair System
Available Space (.1945)		
System Type(s)		
Site LTAR		

Other Factors (.1946): _____
Site Classification (.1948):
Evaluated By: WRM, LSS, 6/14/02
Others Present:

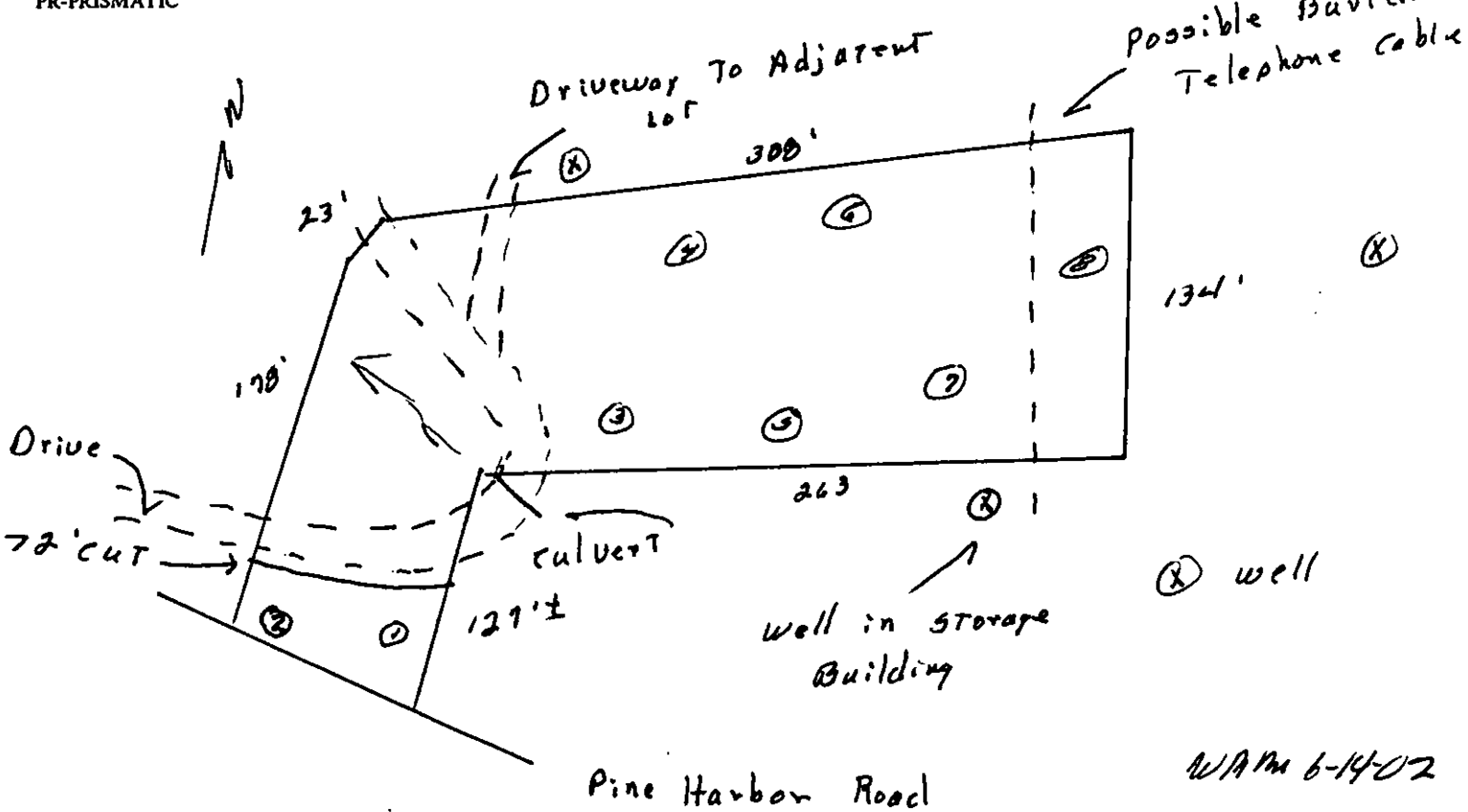
FILE # 14435

COMMENTS Lot out 100% Reserve

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR
R-RIDGE	I	S-SAND	1.2-0.8
S-SHOULDER SLOPE		LS-LOAMY SAND	
L-LINEAR SLOPE			
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6
N-NOSE SLOPE		L-LOAM	
H-HEAD SLOPE			
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM	
T-TERRACE		CL-CLAY LOAM	
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM	
	IV	SC-SANDY CLAY	0.4-0.1
		SIC-SILTY CLAY	
		O-ORGANIC	

CONSISTENCE MOIST	WET
VFR-VERY FRIABLE	NS-NON-STICKY
FR-FRIABLE	SS-SLIGHTLYSTICKY
FI-FIRM	S-STICKY
VFI-VERY FIRM	VS-VERY STICKY
EFI-EXTREMELY FIRM	NP-NON-PLASTIC
	SP-SLIGHTLYSTICKY
	P-PLASTIC
	VP-VERY PLASTIC

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



WAM 6-14-02

FEE: 200.00 ck# 13040
DATE: 6/6/02 SC

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

[ ] CRT

TYPE APPLICATION: X NEW SYSTEM __ EXPANSION/ ALTERATION OF EXISTING SYSTEM __ REPAIR OF EXISTING SYSTEM

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

FILE #: 14778 14435

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: [redacted] 199-05570

STREET ADDRESS: 13628 Pine Harbor Rd

SUBDIVISION OR MOBILE HOME PARK NAME: Pineharbor Estates

LOT NUMBER: 4

TYPE OF BUILDING (CHECK ONE):

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

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 3500

NUMBER OF BEDROOMS: 4 NUMBER OF OCCUPANTS: 2

CLOSING DATE 6/28/02.

FOUNDATION FOR RESIDENCE:

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

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION: none.

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

WATER SUPPLY (CHECK ONE):

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

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

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

PROPERTY OWNER:

NAME: Horn (LAST) Christopher (FIRST) C (MI)
ADDRESS: 760 Monticello Dr.
CITY: Ft. Mill STATE: SC ZIP: 29708
DAYTIME PHONE: (803)258-0502.

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

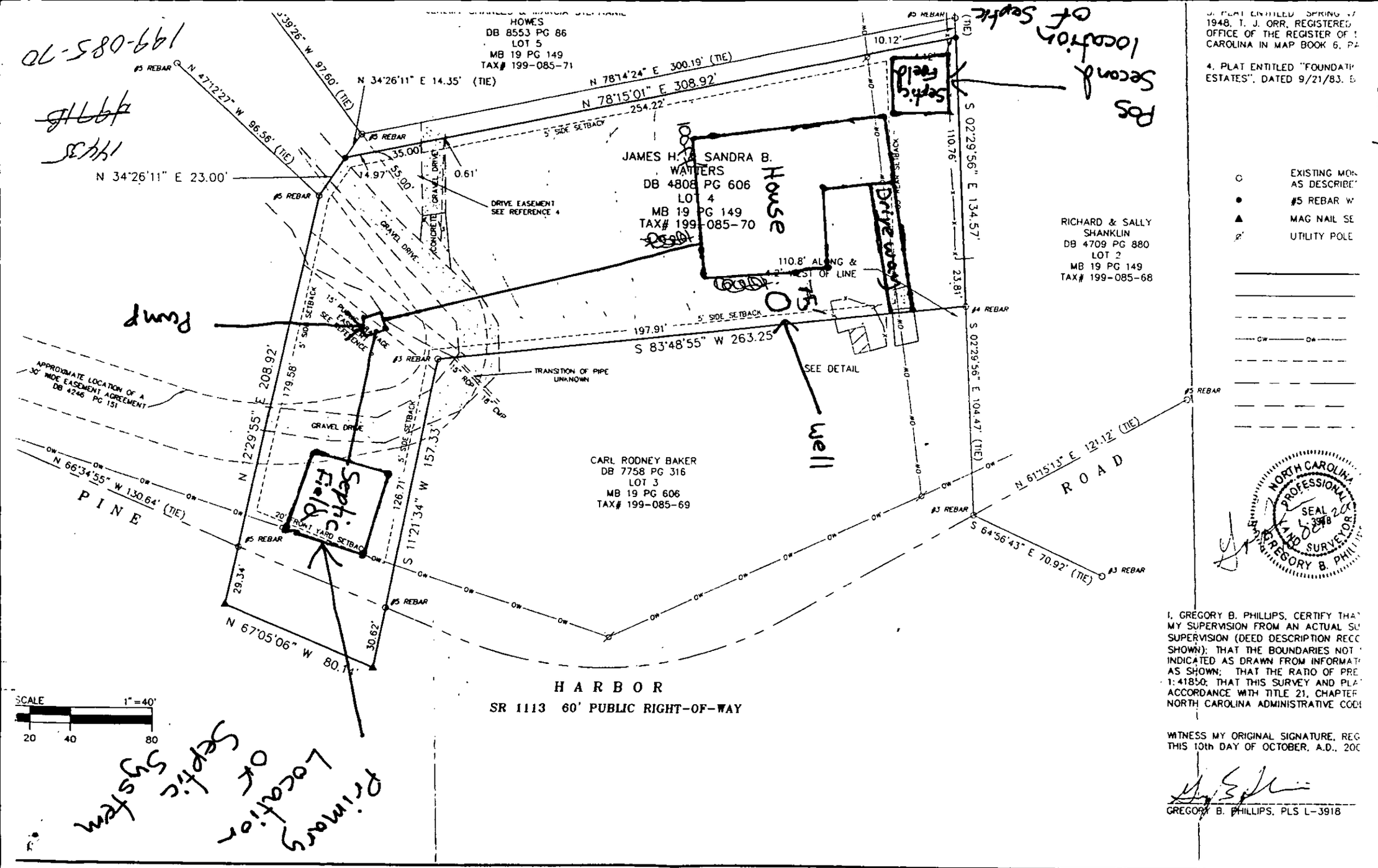
NAME: Pressley (LAST) Joyce. (FIRST) (MI)
DAYTIME PHONE: (704)649-1576.

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 1978.

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

SIGNED: Christopher C. Horn DATE: 6/6/02.

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



J. PLAT ENTITLED "SPRING ... 1948, T. J. ORR, REGISTERED ... OFFICE OF THE REGISTER OF ... CAROLINA IN MAP BOOK 6, PA...

4. PLAT ENTITLED "FOUNDATI... ESTATES", DATED 9/21/83. B...

I, GREGORY B. PHILLIPS, CERTIFY THA... MY SUPERVISION FROM AN ACTUAL SU... SUPERVISION (DEED DESCRIPTION RECO... SHOWN); THAT THE BOUNDARIES NOT ... INDICATED AS DRAWN FROM INFORMAT... AS SHOWN; THAT THE RATIO OF PRE... 1:41850; THAT THIS SURVEY AND PLA... ACCORDANCE WITH TITLE 21, CHAPTER ... NORTH CAROLINA ADMINISTRATIVE COD...

WITNESS MY ORIGINAL SIGNATURE, REG... THIS 10th DAY OF OCTOBER, A.D., 20...

GREGORY B. PHILLIPS, PLS L-3918

516 COLONNADE DRIVE

PREPARED FOR:

TITLE: