Supervisor/Administrative Professional Checklist

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

New Septic Fees Paid

IP ($250.00) LE 11/6/18 Initials/Date

CA ($200.00) _____ Initials/Date

OP ($200.00) _____ Initials/Date

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

New Well Fee Paid: $550.00 _____ Initials/Date

Use Existing Fee Paid: $100.00 _____ Initials/Date

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

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

Floor plans need to be submitted and reviewed before CA can be issued. ☐ Reviewed ☐ ____

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

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

Send permit for signature. ☐ Signature received. ☐ _____

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

Certified operator contract is on file. ☐ _____

11/15/18 Refunded. did not proceed with Soil Test

6 NOV '18 AM10:40

7437A
#9997

MECKLENBURG COUNTY
HEALTH DEPARTMENT

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

1. SEPTIC / TYPE APPLICATION: ○ N/A ● 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: 19715409
STREET ADDRESS: 11900 Brief Rd.
CITY: Mint Hill
STATE: NC ZIP: 28227
SUBDIVISION NAME: _____
LOT #: 5 LOT SIZE (acres): 0.41
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: _____
NUMBER OF BEDROOMS: 5
NUMBER OF OCCUPANTS: 10
FOUNDATION TYPE:
○ CONCRETE SLAB ○ BASEMENT WITH PLUMBING
● CRAWL SPACE ○ BASEMENT WITH NO PLUMBING

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

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

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

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

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

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

8A. RANK: ____ ____ ____ ____ ____

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

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

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

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

12. PROPERTY OWNER:
NAME: Most investments 2 LLC
ADDRESS: 1600 Fulton Ave #120
CITY: Charlotte
STATE: NC ZIP: 28205
WORK PHONE: (704) 379-7492
MOBILE PHONE: (704) 998-9520
FAX: _____
E-MAIL: _____

13. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:
NAME: Erika Y. Alvarez Vallejo
ADDRESS: 14013 Maple Hollow Ln
CITY: Mint Hill
STATE: NC ZIP: 28227
WORK PHONE: _____
MOBILE PHONE: (704) 930-5370
FAX: _____
E-MAIL: yeseniaalvarez@yahoo.com

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

WellReg@meckNC.gov

CREDIT MEMO

Credit Memo Number: CM32292

Credit Memo Date: 11/06/18

Credit
To: CASH CUST (LAST NAME FIRST)

Ship
To:

Customer ID 200000
P.O. Number

Ship Date
Apply to Type
Apply to Number

SalesPerson

Item No.	Description	Unit	Quantity	Unit Price	Total Price
4701	Improv Permit App-Residen Adj 11900 BRIEF RD	Each	1	250.00	250.00

Amount Subject to Sales Tax	Amount Exempt from Sales Tax
0.00	250.00

Subtotal:	250.00
Invoice Discount:	0.00
Tax:	0.00
Total:	250.00

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	11/06/18	**Amount:**	250.00
Receipt #:	113635	**Tendered:**	250.00
Check / Auth #:	CASH	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: 200000
Contractor: ALVAREZ VALLEJO, ERIKA Y
Attn:
Address: 14013 MAPLE HOLLOW LN
Address:
City/State/Zip: MINT HILL, NC 28227

Item	Description	Permit#	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 11900 BRIEF ROAD		1	250.00	250.00

Outstanding Balances

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

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. E.A. (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. E.A. (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.

Erika Y. Alvarez Vallejo — 11/6/18

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

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OFFICE USE ONLY

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

SEPTIC APPLICATION FEE RECEIVED: $ _____ DATE FEE RECEIVED: _____

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

APPLICATION PROCESSED BY: _____

GWS FILE NUMBER ASSIGNED: _____

APPLICATION ID NUMBER ASSIGNED: _____

COMMENTS:

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

Revised on: 12/15/10

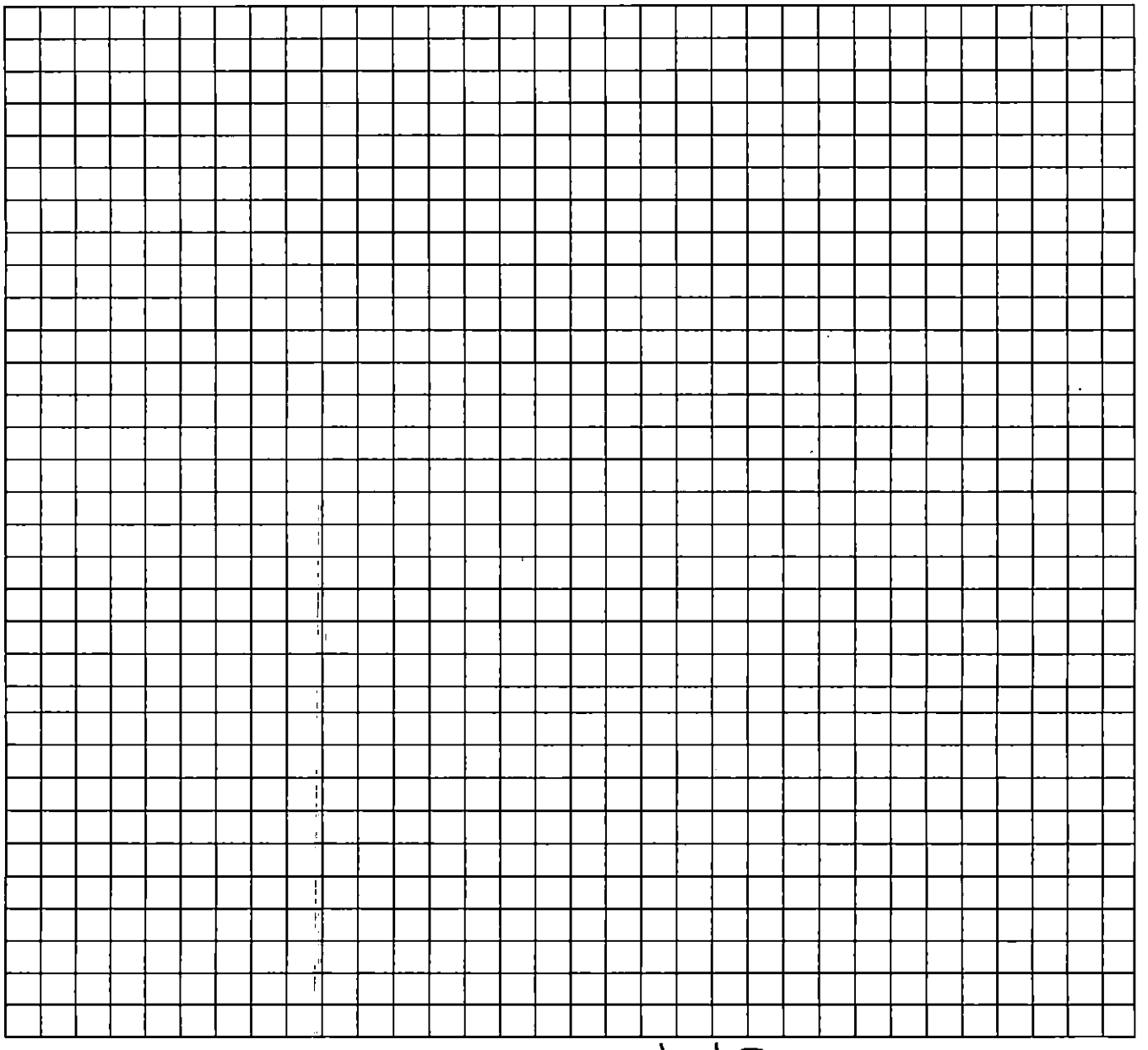
File #: _____

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: 11900 Brief Rd. Tax Parcel #: _____

Subdivision Name: _____ Lot #: 5



Erika Y. Alvarez Vallejo 11/6/18

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

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

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Listing Information

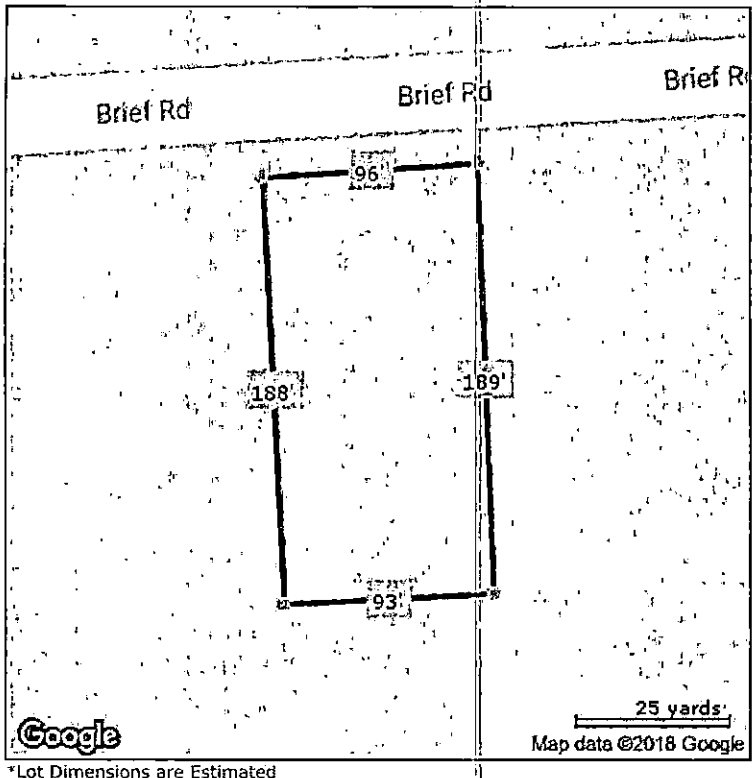
MLS Listing # :	**3408807**	MLS Current List Price :	**$34,900**
MLS Status :	**Active**	MLS Orig. List Price :	**$18,000**
MLS Status Change Date :	**08/02/2018**	Listing Agent Name:	**29253-Kathryn Cook Crespo**
MLS Listing Date :	**06/30/2018**	Listing Broker Name:	**BOTTOM LINE REALTY & MGMT LLC**

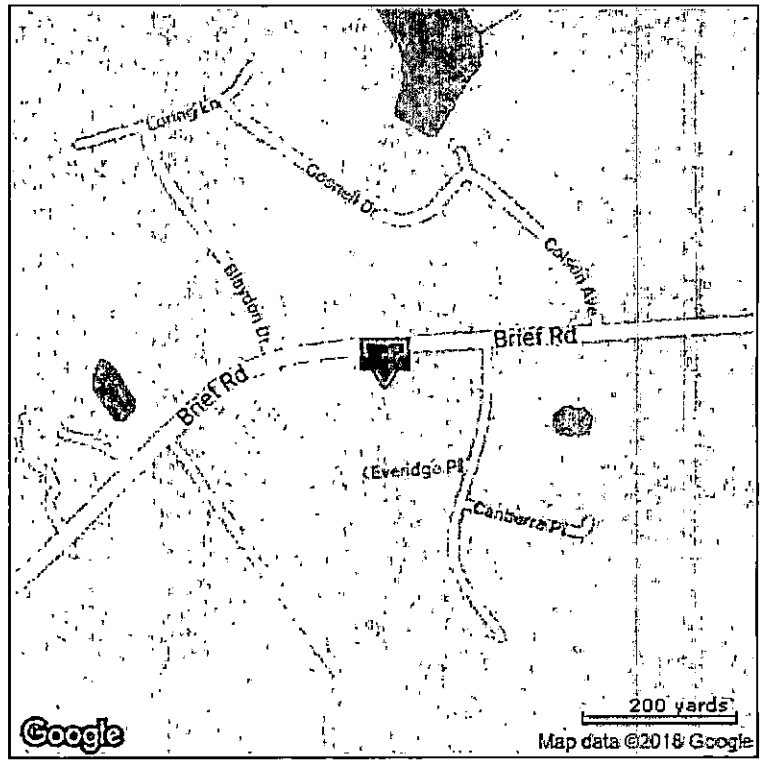
Last Market Sale & Sales History

Sale Date:	**08/09/2016**	Seller:	**Lamb George R & Jean H**
Recording Date:	**08/09/2016**	Deed/Page:	**31064-331**
Sale Price:	**$15,000**	Deed Type:	**Warranty Deed**
Owner:	**Most Investments 2 LLC**		

Sale Date	08/09/2016	01/1986	00/1973
Recording Date	08/09/2016		
Sale Price	$15,000		
Multi/Split Sale Type	Multi	Multiple	
Buyer Name	Most Investments 2 LLC	Lamb George R	
Seller Name	Lamb George R & Jean H		
Deed/Page	31064-331	5176-177	3607-20
Document Type	Warranty Deed	Warranty Deed	Deed (Reg)

Property Map





*Lot Dimensions are Estimated

Courtesy of Carolina Flores, CAROLINA MULTIPLE LISTING SERVICES INC
The data within this report is compiled by CoreLogic from public and private sources. The data is deemed reliable, but is not guaranteed. The accuracy of the data contained herein can be independently verified by the recipient of this report with the applicable county or municipality.