

15257 HUS MCGINNIS RD

02120102

1/9/2008

duponbj

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

Groundwater & Wastewater Services
Septic Project File & Data Review Worksheet

GWS File #: 5724 B WASPS App #: 224

Primary ES assigned to project: OJ

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: 3			
	Were sufficient auger borings made?	Yes ☑	No ☐	N/A ☐
.1939(d), .1955, .1956, .1957	LTAR .4	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 ☐

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 ☐

Comments: # Items requiring correction/modification: _____

IA issued date: 5-3-07

OP issued date: 5/9/07

Review performed by: RL Date performed: 5-10-07

1855

FEE: 200.00
DATE: 9/27/04
JKA VISA

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

#724

1 1 CRT

TYPE APPLICATION: ✓ NEW SYSTEM ___ EXPANSION/ ALTERATION OF EXISTING SYSTEM ___ REPAIR OF EXISTING SYSTEM

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

FILE #: 5724B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION: 021-032-03

TAX/PARCEL NUMBER: 021-201-02 (new ID not assigned)

STREET ADDRESS: 15218 Hus McGinnis Rd

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: 2 (see attached)

TYPE OF BUILDING (CHECK ONE):

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

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE:

NUMBER OF BEDROOMS: 4

NUMBER OF OCCUPANTS: 4

CLOSING DATE _____

FOUNDATION FOR RESIDENCE:

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

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

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

WATER SUPPLY (CHECK ONE):

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

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

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

PROPERTY OWNER:

NAME: (LAST) Lally (FIRST) Jeffrey (MI) Buyer

ADDRESS: 4613 Saxonbury Way

CITY: Charlotte STATE: NC ZIP: 28269

DAYTIME PHONE: (704) 593 - 0941 704-201-9731(m)

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) Beasley (FIRST) Donnie (MI) F.

DAYTIME PHONE: ( ) —

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

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: Jeffrey Lally DATE: 9/27/04

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

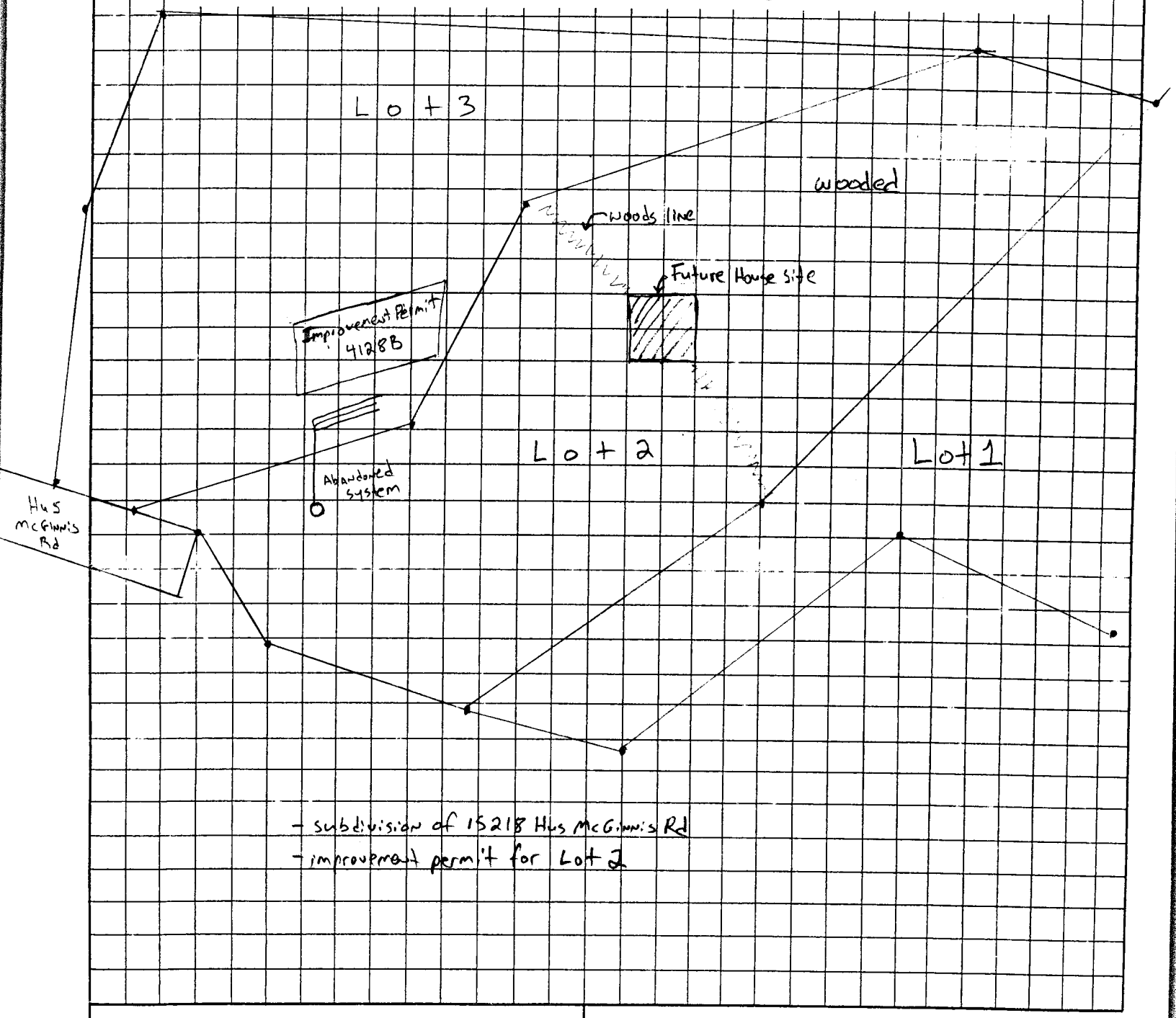
PROPOSED PLOT PLAN

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

FILE: 5724B

TC: 021-201-02

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.



- subdivision of 15218 Hys McGinnis Rd
- improvement permit for Lot 2

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 of 2
Property ID: PO 021-201-02
Lot #: 2
File #: 5724B
Code: 3

AOS

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Donnie F. Beasley
Address: 15218 Hus McGinnis Road, Huntersville, N. C.
Proposed Facility: Residence Design Flow (.1949): 480gpd
Location of Site: 15218 Hus McGinnis Road, Huntersville, N. C., 28078
Water Supply: [x] Public [ ] Individual [ ] Well
Evaluation Method: [x] Auger Boring ~~[ ] Pit~~ SEE CONSULTANTS REPORT
Type of Wastewater: [x] Sewage [ ] Industrial Process

Applicant: Jeffrey Lally
Date Evaluated: 10/18/2004
Property Size: 1.0a. Inv.
Property Recorded:
[ ] Spring [ ] Other
[ ] Cut
[ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	OTHER PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS, 10	0-3	GR/SCL	FR/SEXP/SS/SP	>46" TO SOIL WETNESS	43	N/A	NONE	~~II~~ PS
		3-24	M/SC	FI/SEXP/S/P					
		24-43	M/SCL	FR/SEXP/SS/SP					
		43-46	M/SL	FR/SEXP/NS/NP					
2	"	0-3	GR/SL	"	>41" TO SOIL WETNESS	18	"	"	PS
		3-18	SBK/SC	VFI/EXP/VS/VP					
		18-41	M/SCL	FR/SEXP/SS/SP					
3	LS, 15	0-3	GR/SL	FR/SEXP/NS/NP	>29" TO SOIL WETNESS	22	"	"	PS
		3-22	SBK/SC	VFI/EXP/VS/VP					
		22-29	M/SL	FR/SEXP/NS/NP					

Description	Initial System	Repair System
Available Space (.1945)	0S	0S
System Type(s)	II	II
Site LTAR	-4	-4

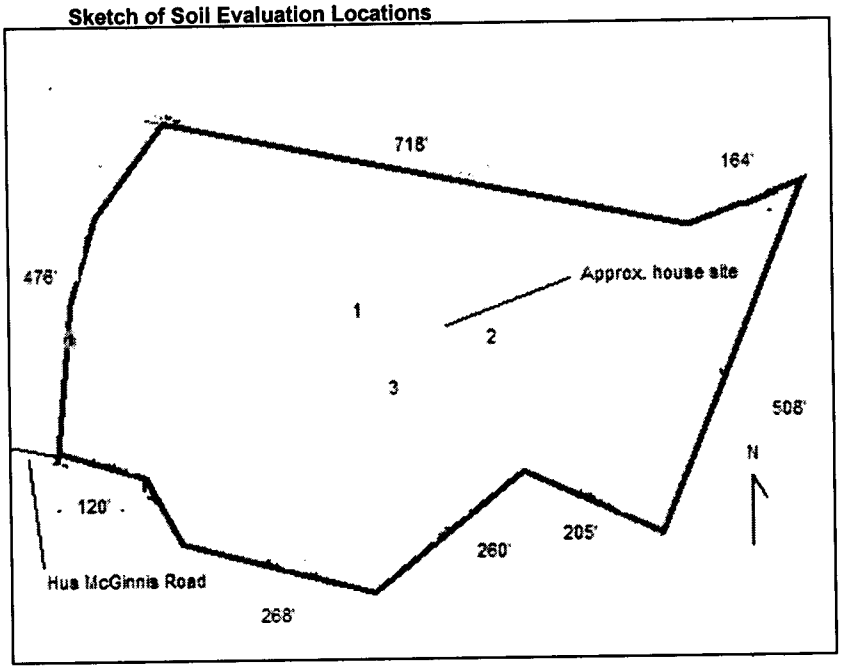
Other Factors (.1946):
Site Classification (.1948): ~~UNSUITABLE~~ PROV SUITABLE
Evaluated By: W. R. Marlin, LSS, 10/19/2004, W. R. Marlin
Others Present:

COMMENTS:
100% repair

Landscape Position	Group	Texture	.1955 LTAR	Structure
R-Ridge	I	S-Sand	1.2 - 0.8	SG-Single Grain
SS-Shoulder Slope		LS-Loamy Sand		M-Massive
LS-Linear Slope				CR-Crumb
FS-Food Slope	II	SL-Sandy Loam	0.8 - 0.6	GR-Granular
NS-Nose Slope		L-Loam		SBK-Subangular Blocky
HS-Head Slope				ABK-Angular Blocky
CC-Concave Slope	III	SI-Silt	0.6 - 0.3	PL-Platy
CV-Convex Slope		SICL-Silty Clay Loam		PR-Prismatic
T-Terrace		CL-Clay Loam		
FP-Flood Plain		SCL-Sandy Clay Loam		
	IV	SC-Sandy Clay	0.4 - 0.1	
		SIC-Silty Clay		
		C-Clay		

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

Sketch of Soil Evaluation Locations



Permit Number: 57248 **CONDITIONS OF IMPROVEMENT PERMIT / CONSTRUCTION AUTHORIZATON**

Tax Number: **02120102 PO**

- 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:

0.4 Long-term acceptance rate (GPD/ft^2)	600 Max gallons/day wastewater flow	1200 Absorption Area (ft^2)	9 Trench spacing (min. on centers) (ft)
Serviced by private well: ☐ Yes ☒ No	1500 Gallon septic tank	400 Total trench length (ft)	42 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	12 Depth of stone (in)	

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

Additional conditions: **Agreement forms on file before CA release.**
Install system according to approved designed plans on file.
Leave pin flags in place until system is installed.

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:

1275 Absorption Area (ft^2) 425 Total trench length (ft)	12 Depth of stone (in)	9 Trench spacing (min. on centers) (ft)	42 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.

Tammy Mecklenburg R.S. 1/14/05
DENR Authorized Agent Date

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

X Jeffrey Talley 1/25/05
Owner/Agent Signature Date

NC DENR
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

IWWS-100195

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 05/04/06
Receipt #: 43737
Check / Auth #: CHARGE
Received By: CRAIGGY

Amount: 150.00
Tendered: 0.00
Returned: 0.00

Account Information

Account #: X34348
Contractor: YOUNGBLOOD HOMES INC
Attn:
Address: 8422 BRENTFIELD RD
Address:
City/State/Zip: HUNTERSVILLE, NC 28078

Item	Description	Permit#	Quantity	Unit Price	Total Price
0734	Auth for Waste Wtr Sys Constr 15257 HUS MCGINNIS RD		1	150.00	150.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
150.00	200.94	0.93	92.39		

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 05/04/06
Receipt #: 43738
Check / Auth #: CHARGE
Received By: CRAIGGY

Amount: 150.00
Tendered: 0.00
Returned: 0.00

Account Information

Account #: X34348
Contractor: YOUNGBLOOD HOMES INC
Attn:
Address: 8422 BRENTFIELD RD
Address:
City/State/Zip: HUNTERSVILLE, NC 28078

Item	Description	Permit#	Quantity	Unit Price	Total Price
0703	Installation/Final Approval 15257 HUS MCGINNIS RD		1	150.00	150.00

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
300.00	200.94	0.93	92.39		

Jeff Lally-Hus McGinnis Road

Project No. 5-1482s1

Layout for 4 bedroom home

4-Nov

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LENGTH	DESIGN LENGTH
TBM		0.6			100.0		
INSTR. 1			100.6				
			SYSTEM				
1	Orange			3.40	97.2	100	100
2	Blue			4.00	96.6	180	90 + 90
3	Yellow			4.70	95.9	170	100 + 70
4	Pink			6.00	94.6	125	100
5	Red			6.60	94.0	142	100
6	Orange			7.60	93.0	120	100
7	Yellow			9.00	91.6	75	75
					Total	**912**	

	LINE LENGTH	LTAR GPD/FT^2	SYSTEM TYPE	TRENCH BOTTOM	INNOVATIVE TYPE	DISTRIBUTN
* System	400	0.40	CONV	42"	N/A	MANIFOLD
Repair	425	0.4	CONV	42"	N/A	MANIFOLD

Notes:

** TBM is stake at eip
**TBM is assumed to be 100'
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags
**BS and FS indicate rod readings

SOILS VERIFIED BY BILL MARLIN.

Jeff Lally-Hus McGinnis Road

REPAIR

Tap Sheet

Line #	Color	Elevation	Length	Hole Size	Flow/Tap	gpd	Trench Area	Line LTAR
1	Orange	97.20	100	SCH 40 1/2	**7.11**	105.69	300	0.352
2a	Blue	96.60	90	SCH 40 1/2	**7.11**	105.69	270	0.391
2b	Blue	96.60	90	SCH 40 1/2	**7.11**	105.69	270	0.391
3	Yellow	95.90	70	SCH 80 1/2	**5.48**	81.46	210	0.388
7	Yellow	91.60	75	SCH 80 1/2	**5.48**	81.46	225	0.362
	total	**feet =**	**425**	**gal/min =**	**32.29**			
			Des. Flow	**480**				
			Pump Run=	14.87				
			soil LTAR	**0.4**				

Profile Description

3.5 Ac lot Mecklenburg County
Job #5-1482s1

Pit 1 Profile Description

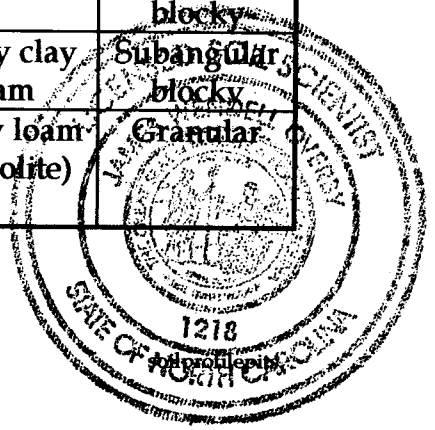
Horizon	Depth	Color	Mottles	Texture	Structure
A	0-5″	10YR 4/3		Sandy loam	Granular
B	5-20″	5YR 4/6	2.5YR 5/8	Clay	Angular Blocky
BC	20-42″	5YR 5/8	10YR 8/6	Sandy clay loam	Subangular Blocky
C	42-67″	7.5YR 4/3	10YR 8/4	Sandy loam (saprolite)	Fine granular

Pit 2 Profile Description

Horizon	Depth	Color	Mottles	Texture	Structure
A	0-4″	7.5YR 4/3		Sandy loam	Granular
B	4-20″	2.5YR 4/8	5YR 4/4	Clay	Angular blocky
BC	20-40	2.5YR 5/8	5YR 4/4 10YR 8/6	Clay loam	Subangular blocky
C	42-67″	2.5Y8/4	2.5YR 4/8	Sandy loam (saprolite)	Granular

Pit 3 Profile Description

Horizon	Depth	Color	Mottles	Texture	Structure
A	0-4″	10YR 5/4		Sandy loam	Granular
B	4-18″	5YR 5/8	5YR 5/4	Clay	Angular blocky
BC	18-42″	5YR 5/8	2.5Y 7/4 5YR 4/4	Sandy clay loam	Subangular blocky
C	42-70		2.5y 5/4 7.5YR 5/8 2.5Y 8/4	Sandy loam (saprolite)	Granular



Pit 4 Profile Description

Horizon	Depth	Color	Mottles	Texture	Structure
A	0-4″	10YR 5/4		Sandy clay	Granular
B	4-22″	2.5Y 7/6 2.5Y 5/4		Sandy clay loam	Massive
C	22-35″	2.5Y 6/8		Sandy loam (saprolite)	Granular
C	35-67″	2.5Y 7/6	2.5Y 5/4	Sandy loam (saprolite)	Granular

Pit 5 Profile Description

Horizon	Depth	Color	Mottles	Texture	Structure
A	0-10″	10YR 4/2		Sandy loam	Granular
Bt1	10-32	5YR 4/6	10YR 5/4	Clay	Massive
Bt2	32-42	2.5Y 5/6	5YR 5/6	Clay loam	Subangular blocky
C	42-62	10YR 7/6		Sandy loam	Granular

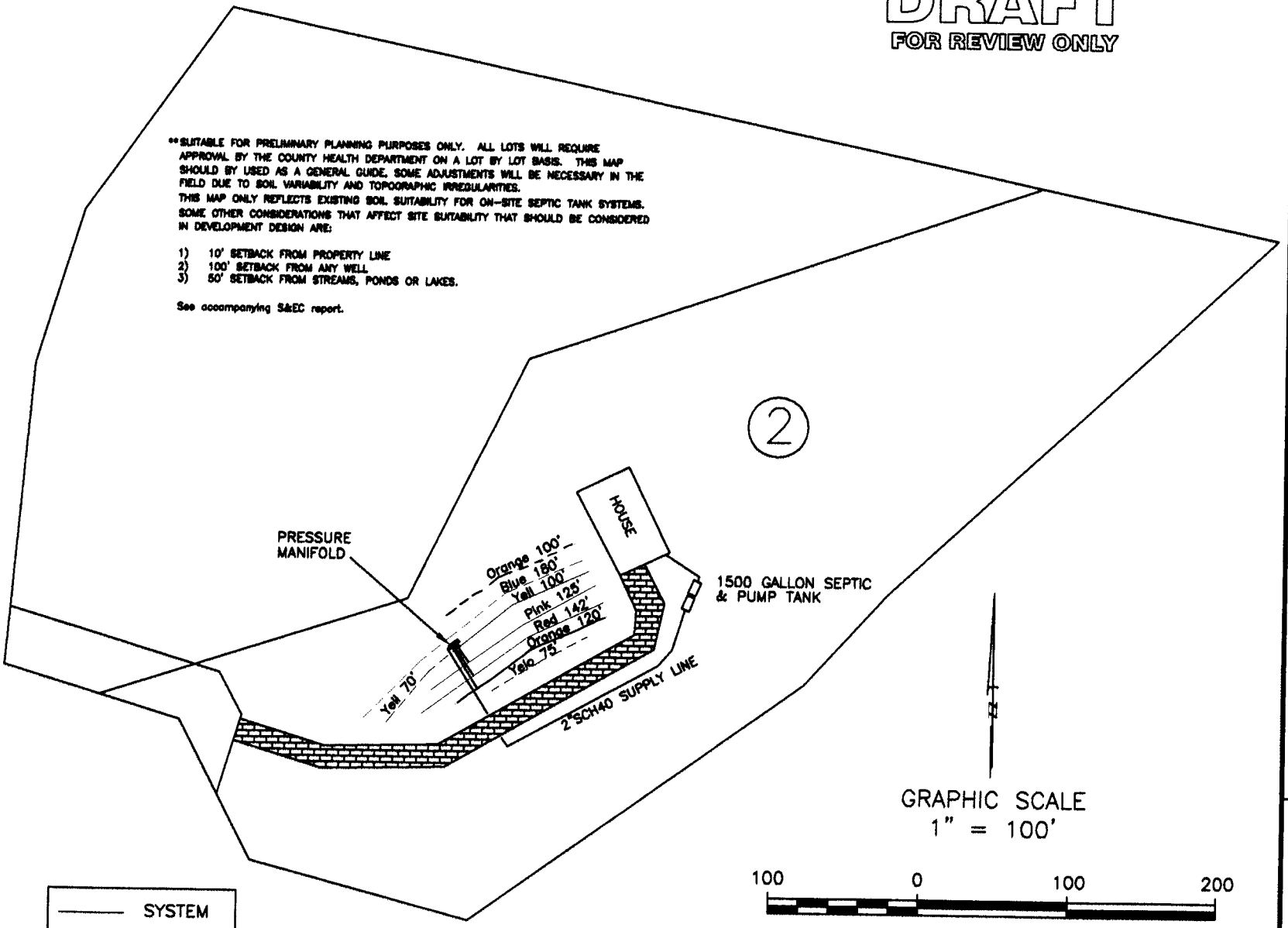


DRAFT
FOR REVIEW ONLY

**SUITABLE FOR PRELIMINARY PLANNING PURPOSES ONLY. ALL LOTS WILL REQUIRE APPROVAL BY THE COUNTY HEALTH DEPARTMENT ON A LOT BY LOT BASIS. THIS MAP SHOULD BY USED AS A GENERAL GUIDE. SOME ADJUSTMENTS WILL BE NECESSARY IN THE FIELD DUE TO SOIL VARIABILITY AND TOPOGRAPHIC IRREGULARITIES.
THIS MAP ONLY REFLECTS EXISTING SOIL SUITABILITY FOR ON-SITE SEPTIC TANK SYSTEMS. SOME OTHER CONSIDERATIONS THAT AFFECT SITE SUITABILITY THAT SHOULD BE CONSIDERED IN DEVELOPMENT DESIGN ARE:

1) 10' SETBACK FROM PROPERTY LINE
2) 100' SETBACK FROM ANY WELL
3) 50' SETBACK FROM STREAMS, PONDS OR LAKES.

See accompanying S&EC report.



GRAPHIC SCALE
1" = 100'

100 0 100 200

Tommy Mickel, R.S. 1/14/05

PROJECT NO. 5-1482
PROJECT MGR. WO
DRAWN BY BF
FIELD WORK WO
SCALE 1" = 100'
FILE C:\JOBS\5-1482

Soil & Environmental Consultants, PA
230 Lafferty Ct. STE C • Concord, North Carolina 28025 • Phone (704)720-9455 • Fax (704) 720-9456

S&EC

PROJECT NAME: HUS MCGINNIS ROAD
JEFF LALLY
- HUS MCGINNIS ROAD -
MECKLENBURG COUNTY, NORTH CAROLINA
DECEMBER 2004

SHEET TITLE:
SEPTIC SYSTEM LAYOUT SKETCH MAP

SHEET 1 OF 1

FEE: 300.00 paid
DATE: 5/4/04 JC

AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION

PERMIT NUMBER: 5724B
PARCEL NUMBER: 02120102 PO

AC's CD

JOB LOCATION ADDRESS: ~~15218~~ 15257 Lot #2 Hus McGinnis Road
PROPERTY OWNER: Jeffrey Lally
BUILDING CONTRACTOR:
SUBDIVISION NAME: Lot #2
AUTHORIZATION ISSUED BY: Jeremy Michelone, R.S. DATE: 01/14/05

Jeremy Michelone, R.S.
DENR/DEH AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 5724B, 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:
   See Conditions of IP.

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

INSTALLATION APPROVAL for an ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 5724B Permit #: _____ Tax Parcel #: 021-201-02 P.O.

Property Owner: JEFF CALLY

Job Location Address: 15257 HUS McCINNIS ROAD

City: HUNTERSVILLE State: NC Zip Code: 28078

Installation Approval Issuance Date: 5/3/07

Permission is hereby given to ☒ install ☐ alter ☐ repair an on-site wastewater treatment & and disposal system, with subsurface soil absorption and effluent discharge, as specified herein at the described location. This approval is granted based upon the application information submitted to our office. All work shall be completed on or before 6/3/07, after which date this approval shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A. 1900 which are in effect on the date of granting this approval. An **Operation Permit** must be obtained from the Mecklenburg County Health Department before any system can be covered up or placed into service. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed will operate properly, or relieve any person now of hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

***NOTICE: This system shall not be installed while soils are in a wet condition.**

Permitted Design Flow: 480 GPD

Site LTAR: 0.4 GPD/ft² (For new installations only.)

Liquid Capacity of Septic Tank: 1500 gallons

Liquid Capacity of Dosing Tank: — gallons

Drainfield Design ☐ N/A

Trench Depth: 42 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 400 feet

# of Lines: 4 @ 100 feet

Depth of Media: 12 inches (Type) STONE

Distribution Device: D-BOX

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

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Distribution Device: _____

Water Supply Source

☒ Municipal ☐ Private Well ☐ Community Well

☐ Other _____

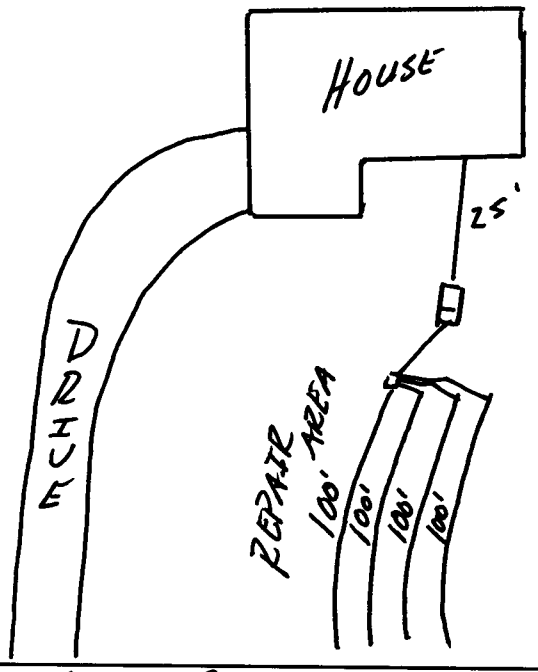
Minimum System Setbacks

Distance from Building Foundation: >25' feet

Distance from Property Line: >10' feet

Distance from Water Supply Source: >100' feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)



Comments: System Classification & Type: II Conventional System
42" TRENCH BOTTOMS
COMERCIAC FILTER

DENR Authorized Agent: Jeremy Micklone R.S. Signature: Jeremy Micklone, R.S.

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

INSTALLATION APPROVAL for an
ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 5724B Permit #: _____ Tax Parcel #: 021-201-02 Po

Property Owner: Jeffrey Lally

Job Location Address: 15257 Hos McGinnis Rd

City: Huntersville State: NC Zip Code: 28078

Installation Approval Issuance Date: 8/22/06

Permission is hereby given to ☑ install ☐ alter ☐ repair an on-site wastewater treatment & and disposal system, with subsurface soil absorption and effluent discharge, as specified herein at the described location. This approval is granted based upon the application information submitted to our office. All work shall be completed on or before 9/22/06, after which date this approval shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A. 1900 which are in effect on the date of granting this approval. An **Operation Permit** must be obtained from the Mecklenburg County Health Department before any system can be covered up or placed into service. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed will operate properly, or relieve any person now of hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

***NOTICE: This system shall not be installed while soils are in a wet condition.**

Permitted Design Flow: 480 GPD Site LTAR: .4 GPD/ft² (For new installations only.)

Liquid Capacity of Septic Tank: 1500 gallons Liquid Capacity of Dosing Tank: 1000 gallons

Drainfield Design ☐ N/A

Trench Depth: _____ inches

Trench Width: _____ feet

Line Spacing: _____ feet (O.C.)

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Distribution Device: _____

Bed Design *(For Repair Installations ONLY.)* ☑ N/A

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Distribution Device: _____

Water Supply Source

☑ Municipal ☐ Private Well ☐ Community Well

☐ Other _____

Minimum System Setbacks

Distance from Building Foundation: 15 feet

Distance from Property Line: 10 feet

Distance from Water Supply Source: >100 feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)

Install according to design Consultants plan.

Comments: System Classification & Type: Type III b conventional system. designed for a 4 bedroom residence. Install according to design consultant's plans.

DENR Authorized Agent: Cina Buchanan, RS Signature: Cina Buchanan, RS

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 #: 5724B Permit #: _____ Tax Parcel #: 021-201-02PO

Property Owner: JEFF LALLY

Job Location Address: 15257 HUS MCGINNIS ROAD

City: HUNTERSVILLE State: NC Zip Code: 28078

Operation Permit Issuance Date: 5/9/07 Contractor Name: R+H

Permitted Design Flow: 480 GPD

Liquid Capacity of Septic Tank: 1500 gallons

Liquid Capacity of Dosing Tank: — gallons

Effluent Pump Model: —

Drainfield Installation ☐ N/A

Trench Depth: 42 inches (SAP.)

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 400 feet

# of Lines: 4 @ 100 feet

Depth of Media: 12 inches (Type) STONE

Depth of Cover: 30 inches

Distribution Device: D-BOX

Inspection Dates

Tank(s) Inspected: 5/9/07

Excavation Inspected: 5/9/07

Pump & Controls Inspected: —

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

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

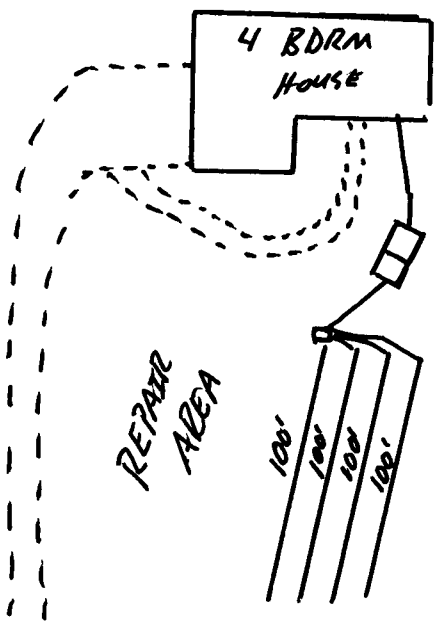
# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Depth of Cover: _____ inches

Distribution Device: _____

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)



Water Supply Source

☒ Municipal ☐ Private Well ☐ Community Well

☐ Other _____

System Installation Setbacks

Distance from Building Foundation: 25' feet

Distance from Property Line: >10' feet

Distance from Water Supply Source: >100' feet

☒ 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: II Conventional System

COMMERCIAL FILTER 1937(i) TABLE V(a) N/A

DENR Authorized Agent: Jeremy Nicholson, R.S. Signature: Jeremy Nicholson, R.S.

FOR REGISTRATION JUDITH A. GIBSON
REGISTER OF DEEDS
MECKLENBURG COUNTY NC
2006 MAY 02 04:02 PM
BK:20376 PG:348-351 FEE $20.00
INSTRUMENT # 2006085091
2006085091

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

WASTEWATER TREATMENT AND DISPOSAL SYSTEM DESIGN AGREEMENT: 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c); OR .1969

FILE # ~~5702B~~ 5724B
PARCEL # 021-201-02 [illegible]

The undersigned, Jeffrey Lally, owner of property located at 15257 Hus McGinnis Road, (the "site") and described in an instrument recorded in Book 11793 at Page 125, Mecklenburg Public Registry, hereby acknowledges that the undersigned applied to the Mecklenburg County Health Department (the "Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 15A NCAC 18A .1900 et seq.; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data, and other information which indicate to the Department that the septic tank system proposed by the undersigned is allowed by the rules; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is the responsibility of the designer, owner, developer, installer, or user of the system, as applicable, and that neither the Department nor its officials, employees, or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further acknowledges that the following conditions will apply to the site:

This instrument was prepared by: Jeffrey Lally
Mail after recording to: 4613 Saxonbury Way
Charlotte, NC 28269

- Any changes on the property may make the Improvement Permit null and void and may make the Improvement Permit subject to revocation.

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

-- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

-- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

-- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless theDepartment, its employees, and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, this 1st day of May, 2006.

_____ _____ (SEAL)
(Corporate Name)

_____ (SEAL)

By: Jeffrey Tally _____ (SEAL)

_____ President _____ (SEAL)

ATTEST:

_____

_____ Secretary

(Corporate Seal)

STATE OF NORTH CAROLINA
COUNTY OF Mecklenburg

I, Lindsay L. Walters, a Notary Public for said County and State, do hereby certify that Jeffrey Tally personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 19 day of May, 2006.

Lindsay L. Walters
Notary Public

My Commission Expires:

10/12/2008

OFFICIAL SEAL
LINDSAY L. WALTERS
NOTARY PUBLIC-NORTH CAROLINA
COUNTY OF MECKLENBURG
My Commission Expires October 12, 2008

STATE OF NORTH CAROLINA
COUNTY OF _____

I, _____, a Notary Public for said County and State, do hereby certify that _____ personally came before me this day and acknowledged that he is _____ Secretary of _____, a North Carolina corporation, and that by authority duly given and as the act and deed of said corporation, the foregoing instrument was signed in its name by its _____ President, sealed with its corporate seal, and attested by _____ as its _____ Secretary.

WITNESS my hand and notarial seal, this _____ day of _____, 20____.

_____
Notary Public

My Commission Expires:

_____

REVISED 6-13-02

Contract For Land Sale

This Agreement is made and entered by and between:

Donnie Franklin Beasley (seller) whose address is:
1356 Horneytown Rd High Point, NC 27265
hereinafter called the Vendor and

Jeff Lally (buyer) whose address is:
4613 Saxonbury Way Charlotte, NC 28269
hereinafter called the Vendee.

Witnesseth: The Vendor, for himself, his heirs and assigns, does hereby agree to sale to the Vendee the following real estate commonly known as:

Lot 2 of MB 37-453 at 15218 Hus McGinnis Rd Huntersville, NC 28078 (see attached survey) which is 3.51 acres.

Vendee understands that there will be a deed restriction on the property outlining one single family, non-modular residence on the property greater than 2000 square feet and meeting all local zoning requirements.

1. Contract Price
The agreed purchase price is $95,000.

2. Special Provisions
This contract is contingent on the soil being suitable to support a septic system for a four bedroom house.

3. Closing
The purchase will close on October _____, 2004. If this date passes without purchase by the Vendee, then the Vendor no longer is bound by this contract.

Seller: [signature] 9-6-04 Kenneth F. Beasley for Donnie F. Beasley

Buyer: