Groundwater & Wastewater Services
Septic Project File & Data Review Worksheet

GWS File #: 7604B WASPS App #: 3212

Primary ES assigned to project: PW

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: 7 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)	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?			
.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: _____

OP issued date: _____

Review performed by: _____

Date performed: 2-6-08

FILE NUMBER 7604B acct. 41849

SEPTIC FEE: 200
DATE: 2/4/08 pc

Revised On: January 3, 2007

APPLICATION NUMBER: 3212

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: _____
DATE: _____

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: 00308308
STREET ADDRESS: 19927 Callaway Hills Lane
CITY: Davidson
STATE: NC ZIP: 28036
SUBDIVISION NAME:
LOT #: 34 LOT SIZE (acres): 1.21 ~~0.79~~ acres
TOWNSHIP:
☐ 0-MECKLENBURG ☐ 3-CORNELIUS ☐ 6-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: 4000
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 4
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 ____ ____ ____ ____

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	☐ YES	☐ NO
EASEMENTS OR RIGHT-OF-WAYS	☑ YES	☐ NO	WASTEWATER OTHER THAN DOMESTIC SEWAGE	☐ YES	☐ NO

10. PROPERTY OWNER:

NAME: Troy + Jennifer Raby
ADDRESS: ~~5604~~ Rockhill Dr
CITY: Charlotte
STATE: NC ZIP: 282~~77~~
HOME PHONE: (704) 814-9240 WORK PHONE:
MOBILE PHONE: FAX:

11. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:

NAME: Roger Neal
ADDRESS: 2923 Island point Dr. NW
CITY: Concord
STATE: NC ZIP: 28027
HOME PHONE: (704) 712-8255 WORK PHONE:
MOBILE PHONE: 795-9984 FAX: 409-4987

12. WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 1994
13 WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY? 3/13/07

. SEPTIC SYSTEM PERMIT APPLICATION SIGNATURE SECTION:

he information in this application is falsified, changed, or the site is altered, en the Improvement Permit and Authorization to Construct shall become alid. I have read this application and certify that the information provided rein is true, complete and correct. Authorized county and state officials are anted right of entry to conduct necessary inspections to determine mpliance with applicable laws and rules. I understand that I am solely sponsible for the proper identification and labeling of all property lines and rners and making the site accessible so that a complete site evaluation can performed. The permit is valid for either 60 months or is non-expiring pending upon the documentation submitted: complete site plan = 60 nths, complete plat = non-expiring.

2/1/09
operty Owner's or Owner's Legal Representative Signature Date

15. 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 certif 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.

Roger B Neal 2/1/08
Property Owner's or Owner's Legal Representative Signature Date

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

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

Sheet:
Property ID: 003-083-08
Lot #: 34
File #: 7604B
AppID: 3212

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Troy & Jennifer Raby
Applicant: Roger Neal
Address: 5804 Rockhill Lane, Charlotte, N. C. 28277
Date Evaluated: 2/25/2008
Proposed Facility: Residence
Design Flow (.1949) 480gpd
Property Size: 1.21a
Location of Site: 19927 Callaway Hills Lane
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, 12	0-5	GR/SCL	FR/SEXP/SS/SP	>32" TO SOIL WETNESS	32	N/A	NONE	US, III .35GPD/FT^2
		5-25	SBK/CL	"					
		25-32	SBK/SCL	"					
2	"	0-11	GR/SCL	"	>34" TO SOIL WETNESS	34	"	"	US, IV .275GPD/FT^2
		11-34	SBK/SC	FI/SEXP/S/P					
3	LS, 6	0-4	GR/SCL	FR/SEXP/SS/SP	>40" TO SOIL WETNESS	40	"	"	PS, IV .3GPD/FT^2
		4-30	SBK/C	FI/SEXP/S/P					
		30-40	SBK/SCL	FR/SEXP/SS/SP					
4	LS, 10	0-8	GR/SL	FR/SEXP/NS/NP	>48" TO SOIL WETNESS	48	"	"	"
		8-12	SBK/SCL	FR/SEXP/SS/SP					
		12-43	SBK/SC	FI/SEXP/S/P					
		43-48	SBK/SCL	FR/SEXP/SS/SP					
5	"	0-6	GR/SCL	"	"	"	"	"	"
		6-25	SBK/C	FI/SEXP/S/P					
		25-48	SBK/SCL	FR/SEXP/SS/SP					
6	LS, 6	0-6	GR/SCL	"	"	"	"	"	"
		6-48	SBK/C	FI/SEXP/S/P					
7	"	0-5	GR/SCL	FR/SEXP/SS/SP	"	"	"	"	"
		5-40	SBK/C	FI/SEXP/S/P					
		40-48	SBK/SCL	FR	SITE LTAR .3GPD/FT^2				

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	IIIb	IIIb
Site LTAR	0.3	0.3

Other Factors (.1946):
Soil Evaluation By: W. R. Marlin, LSS, 2/26/2008,
Others Present:
Site Classification (.1948): PS
Site Evaluation By: PHILO WALKER RS 2/27/2008
Others Present: STEVE ZEPP

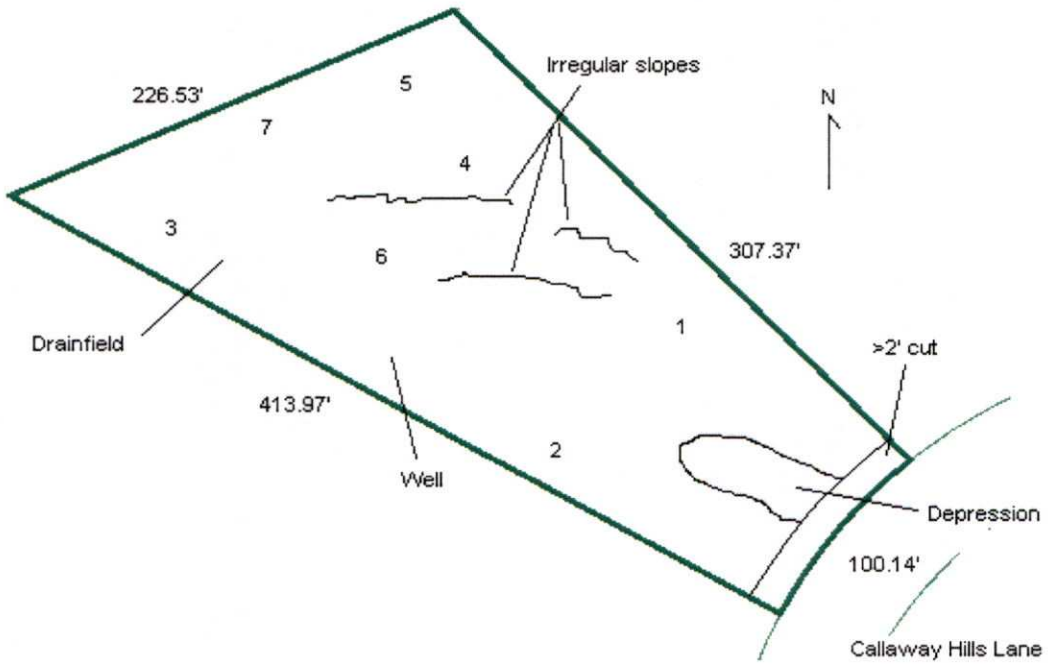
COMMENTS:

100% repair, well and drainfield from 19919 Callaway Hills Lane on lot

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



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

Sheet:
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Lot #: 34
File #: 7604B
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		5-25	SBK/CL	"					.35GPD/FT^2
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2	"	0-11	GR/SCL	"	>34" TO SOIL WETNESS	34	"	"	US, IV
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		12-43	SBK/SC	FI/SEXP/S/P					
		43-48	SBK/SCL	FR/SEXP/SS/SP					
5	"	0-6	GR/SCL	"	"	"	"	"	"
		6-25	SBK/C	FI/SEXP/S/P					
		25-48	SBK/SCL	FR/SEXP/SS/SP					
6	LS, 6	0-6	GR/SCL	"	"	"	"	"	"
		6-48	SBK/C	FI/SEXP/S/P					
7	"	0-5	GR/SCL	FR/SEXP/SS/SP	"	"	"	"	"
		5-40	SBK/C	FI/SEXP/S/P					
		40-48	SBK/SCL	FR	SITE LTAR .3GPD/FT^2				

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

Other Factors (.1946):
Soil Evaluation By: W. R. Marlin, LSS, 2/26/2008, W. R. Marlin
Others Present:
Site Classification (.1948):
Site Evaluation By:
Others Present:

COMMENTS:

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	IV	SC-Sandy Clay	0.4 - 0.1
		SIC-Silty Clay	
		C-Clay	

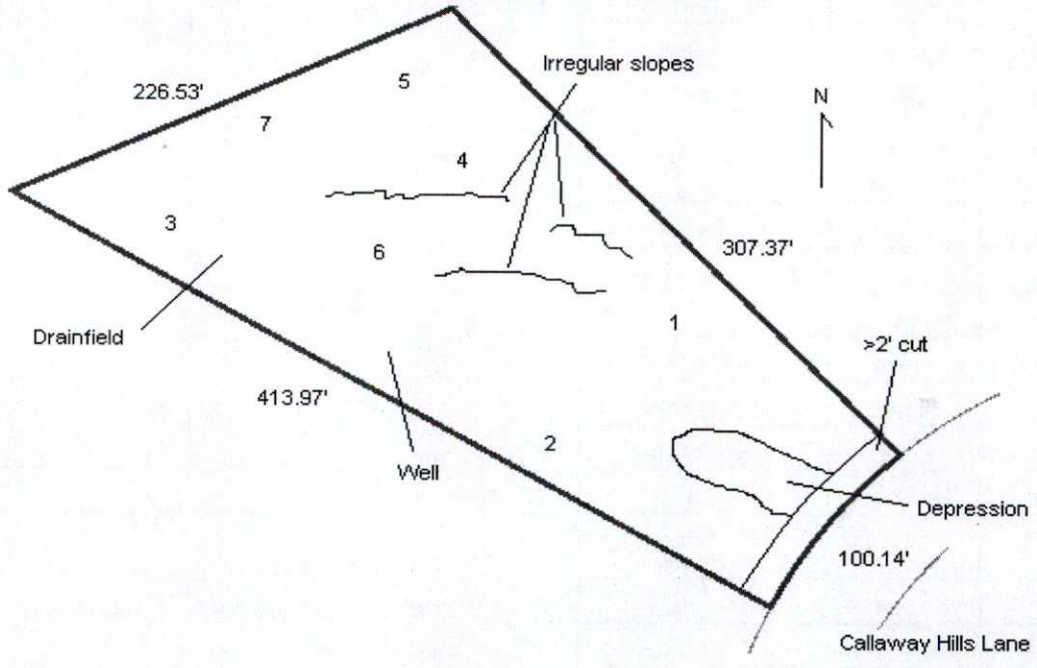
Structure
SG-Single Grain
M-Massive
CR-Crumb
GR-Granular
SBK-Subangular Blocky
ABK-Angular Blocky
PL-Platy
PR-Prismatic

Consistence Moist
VFR-Very Friable
FR-Friable
FI-Firm
VFI-Very Firm
EFI-Extremely Firm

Consistence Wet
NS-Non-Sticky
SS-Slightly Sticky
S-Sticky
VS-Very Sticky
NP-Non-Plastic
SP-Slightly Plastic
P-Plastic
VP-Very Plastic

Mineralogy
SEXP-Slightly Expansive
EXP-Expansive

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 #: **30003212** GWS File #: **7604B** Tax Parcel #: **003-083-08**

- 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):** 3/7/2013

Type of Installation: Residential - New System Lot Number: 34

Structure Type: HOUSE Size (ft^2): 4000 # Bedrooms: 4 # Occupants: 4

Building Foundation: Basement With Plumbing Water Supply: Private Well

II. Initial System Type: Conventional **System Classification:** IIIb

Initial 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):	1600	Total Trench Length (ft):	533
Maximum Trench Depth (in):	24	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

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

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):	1200	Total Trench Length (ft):	400
Maximum Trench Depth (in):	24	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 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: Philo Walker

Signature: Philo Walker RS

Date Issued: 3/7/2008

Owner/Legal Agent: Roger L. Neal
Print Name

Signature: Roger L. Neal

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 #: **30003212** GWS File #: **7604B**

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 components of the septic system must be located at least 100 ft. (50 ft. minimum) from all private wells.
- All waterlines must be located a minimum of 10 ft. from any part of the septic system.
- The system must be water tested during the final inspection to verify proper operation and set system pressure.
- SEE COMMENTS ON PLOT PLAN

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:

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DENR Authorized Agent: Philo Walker

Signature: Philo Walker

Date Issued: 3/7/2008

Owner/Legal Agent: Roger L. Neal
Print Name

Signature: Roger L Neal

Lot 34
7604 B

MB 24 P.963

SHEARER ROAD

COMMON AREA

N 20°10'13" W 356.80'

229.36'

N 20°22'28" W 127.44'

72.28'

S 81°44'58" E 316.51'

S79°30'41"W 254.34'

64.96'

COMMON AREA

65°34'52" E 291.49'

226.53'

Use existing 4 drainfield lines

Cut off 1 existing drainfield line

Add 1 new drainfield line (100' long)

413.72'

New pressure manifold

sq.ft.

1.22 ac

Keep drainfield 25' away

35'

25'

Crawl Space

4 Bedroom House

Basement

DT

ST

Garage

1 STORY BRICK #1997

WOOD DECK

CONC.

Existing well

S 59°41'

DRIVEWAY

Neighbors well

Keep the septic system > 50' from neighbors well

New well

Keep House foundation 25' from existing well. Keep new septic system > 50' from existing well

S43°23'47"E 307.49'

LOT 35

Chd. =S16°30'54"W 81.48'

R=250.00' L=81.84'

Chd. =S03°55'4 95.98'

R=250.00' L=96.58'

Chd. =S37°27'16"W 99.48'

R=250.00' L=100.15'

18" PLASTIC PIPE

CALLAWAY HILLS LANE

50' PUBLIC R/W

RETAINING WALL OVER 1.0'

N22°38'11"W 223.27'

INTERSECTION OF CALLAWAY HILLS LN. AND LEORVAL LN.

OT 37

ND

PIPE

COMMENTS

4 Bedroom House w/ partial basement. • 3 LTAR 1500 ST, 1000 DT, pressure manifold distribution to 4 existing drainfield lines and 1 new 100' line. Cut off 1 existing drainfield line 180' from back of house to back left property line. Existing well on lot to be utalized. Keep the new septic system > 50' from the existing well and keep the foundation > 25' from existing well

GRAPHIC SCALE

40 0 20 40 80 160

(IN FEET)

1 inch = 40 ft.

BOUNDARY SURVEY FOR

LOT 34, 35, and 36
RUNNEYMEDE PHASE 1 MAP 1

NORTH CAROLINA PROFESSIONAL SEAL L-2624