1813B #8505

MECKLENBURG COUNTY HEALTH DEPARTMENT

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM / WATER SUPPLY WELL

APPLICATION TYPE: ○ SEPTIC ONLY ○ WELL ONLY ○ SEPTIC & WELL
○ ADDITION OR RENOVATION WITH OCCUPANCY INCREASE ○ EXCHANGE MOBILE HOME (SAME # BEDROOMS)
☑ ADDITION OR RENOVATION WITH NO OCCUPANCY INCREASE ○ COMMERCIAL OR INDUSTRIAL

PERSON FILING APPLICATION:
NAME: Jack Harmon
ADDRESS: 22818 Torrence Chapel Rd
CITY: Cornelius
STATE: NC ZIP: 28031
PHONE: 704-277-3960
ALTERNATE PHONE: 704-277-3960
E-MAIL: Jackharmon@polytec.net

PROPERTY OWNER: ☑ SAME AS PERSON FILING APPLICATION
NAME:
ADDRESS:
CITY:
STATE: ZIP:
PHONE:
ALTERNATE PHONE:
E-MAIL:

JOB LOCATION INFORMATION
TAX PARCEL #: 00155115
STREET ADDRESS: 22818 Torrence Chapel Rd
CITY: Cornelius
STATE: NC ZIP: 28031

SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #:

WATER SUPPLY:
○ MUNICIPAL ☑ PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER

RESIDENTIAL PROPERTY TYPE: ○ N/A
☑ HOUSE ○ MODULAR HOME ○ MULTIPLE FAMILY
○ SINGLE MOBILE HOME ○ DOUBLE WIDE
○ OTHER

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 2

COMMERCIAL / INDUSTRIAL PROPERTY TYPE: ☐ N/A
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:

INDUSTRIAL WASTES? ○ YES ○ NO
UNDERGROUND STORAGE TANKS? ○ YES ○ NO

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:
☐ BEDROOM ☐ BATHROOM ☐ KITCHEN ☑ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☐ SUNROOM ☐ PORCH ☐ DECK ☐ OTHER

ADDITION/RENOVATION TYPE DETACHED FROM EXISTING STRUCTURE:
☐ DETACHED GARAGE ☐ DETACHED GARAGE WITH PLUMBING ☐ POOL HOUSE ☐ SHOP ☐ BARN

O.K. TO USE TO EXPAND THE DINING ROOM ON THE second floor.

Jerry M. REHS

9/19/16

Fax Cover Sheet

SPECK BUILDERS INC.
1625 Miller Rd
China Grove NC 28023
704-857-6622

Date: 9/14/2016
To: Meck Co. Enviromental Hea
Attention: Loretta W. Ellis
Fax number used: 704-336-6894
From: Wesley B Stokes
Return fax number: 704-857-6622
Project name: Jack Harmon

Number of pages including the cover sheet: 3

If any of these fax copies are illegible, or you do not receive the same number of pages stated above, please contact us immediately at telephone number: 704-202-4983

Remarks:

* * * Error Report (Sep. 16. 2016 4:17PM) * * *

1)
2)

File No.	User Name	Destination	Mode	Time	Page	Result
0548			G3RED	1'09"	P. 2	E

Page not received

P. 2

Quick Service Code

00-21

: Batch
M : Memory
S : Standard
> : Reduction
Q : RX Notice Req.
<-> : IP-FAX

C : Confidential
L : Send later
D : Detail
H : Stored/D. Server
A : RX Notice
🗀 : Folder

$: Transfer
@ : Forwarding
F : Fine
* : LAN-Fax
N : NGN

P : SEP Code
E : ECM
U : Super Fine
+ : Delivery
✉ : Mail

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	09/15/16	**Amount:**	100.00
Receipt #:	101814	**Tendered:**	100.00
Check / Auth #:	MC 00648C	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: 200000
Contractor: STOKES,WESLEY
Attn:
Address: 1625 MILLER RD
Address:
City/State/Zip: CHINA GROVE, NC 28023

Item	Description	Permit#	Quantity	Unit Price	Total Price
0704	Change in Plot Plan 22818 TORRENCE CHAPEL RD		1	100.00	100.00

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

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

Payment Receipt

Mecklenburg County POS

Environmental Health
700 N. Tryon Street
Charlotte, NC 28202
Phone: 704-336-5100

Enter Account # or Customer Name Here:
WESLEY STOKES

Bill To:

WESLEY STOKES
1625 MILLER RD

China Grove, NC 28023

Single Payment

Transaction Date: 09/15/2016 8:49 AM Pacific Time
Pay Method: **********0039
Approval #: 00648C
Trace Number: 9038384e-578c-47c5-9535-9aff08c648fd
Amount: $100.00

Payment Amount: $100.00

Total: **$100.00**

Thank you for your payment.

MECKLENBURG COUNTY
HEALTH DEPARTMENT

1813B # 8502

15 SEP '16 AM 9:3

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: A ○ NEW SYSTEM ○ ALTERATION ○ REPAIR ● MODIFIED PLOT PLAN

2. WELL / TYPE APPLICATION: (\ ○ NEW WELL ○ MAJOR REPAIR ○ ABANDONMENT

3. JOB LOCATION INFORMATION:
TAX PARCEL NUMBER: 00155115
STREET ADDRESS: 22818 Torrence Chapel Rd
CITY: Cornelius
STATE: NC ZIP: 28031
SUBDIVISION NAME: None
LOT #: _____ LOT SIZE (acres): .573 Ac.
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 New Dining Room Addition
HEATED SQUARE FOOTAGE: 1805q Ft
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 2
FOUNDATION TYPE:
○ CONCRETE SLAB ◉ BASEMENT WITH PLUMBING
○ CRAWL SPACE ○ BASEMENT WITH NO PLUMBING

5. IF PLANNING TO EXPAND OR ALTER THE EXISTING SEPTIC SYSTEM PLEASE COMPLETE THE FOLLOWING SECTION: ☑ N/A
NUMBER OF BEDROOMS TO BE ADDED: _____ NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: _____

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

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

8. PLEASE INDICATE AND RANK DESIRED SEPTIC SYSTEM TYPE(S) IN ORDER OF PREFERENCE *(1-MOST DESIRED 5-LEAST DESIRED)*:
☒ N/A ☐ ANY TYPE ☐ CONVENTIONAL ☐ ACCEPTED ☐ INNOVATIVE ☐ ALTERNATIVE ☐ OTHER _____

8A. RANK: ____ ____ ____ ____ ____

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: Jack Harmon
ADDRESS: 22818 Torrence Chapel Rd
CITY: Cornelius
STATE: N.C ZIP: 28031
WORK PHONE: 704-277-3960
MOBILE PHONE: 704-277-3960
FAX: _____
E-MAIL: jackharmon@polytecinc.net

13. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:
NAME: Wesley B Stokes
ADDRESS: 1625 Miller Rd
CITY: China Grove ~~NC~~ SC
STATE: N.C ZIP: 28023
WORK PHONE: 704-857-6622
MOBILE PHONE: 704-202-4963
FAX: 704-857-6622
E-MAIL: wesleybstokes@hotmail.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

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. WBS (initial here for septic system applications)

16. 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. WBS (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.

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

9/14/16 — Date

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:

_____

Fax Cover Sheet

SPECK BUILDERS INC.
1625 Miller Rd
China Grove NC 28023
704-857-6622

Date: 9/14/2016
To: Meek Co. Enviromental Heal
Attention: Loretta W. Ellis
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Q : RX Notice Req.	A : RX Notice	N : NGN	: Mail
: IP-FAX	: Folder		

MECKLENBURG COUNTY
Health Department

E. Winters Mabry, MD
Director

(704) 432-3199

Addendum to Application for
New Well or Septic System Installation
Abandonment or Repair of Existing Well or Septic System

Your signature below confirms the following:

1. The information on the application is true, complete and accurate.
2. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliances with applicable laws and rules.
3. I acknowledge that Wesley Stokes is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at 22818 Torrence Chapel Rd, Cornelius, N.C. 28036
   Number Street Town
   (Or Parcel Number)

Jack Harmon
Property Owner (print name)

Property Owner (signature)

9/15/16
Date

Supervisor/Administrative Professional Checklist

New Septic ☐ New Well ☐ Use Existing ☐ - Alteration ☐ Modified Plot Plan ☒

New Septic Fees Paid:

IP ($250.00) _____ 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 LE 9/16/14 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. ☐ _____

POLARIS 3G PARCEL OWNERSHIP AND GIS SUMMARY

Date Printed: 09/16/2016

Identity	
Parcel ID	GIS ID
00155115	00155115

Property Characteristics	
Legal desc	L1 M56-755
Land Area	0.573 AC
Fire District	CORNELIUS
Special District	FIRE SERVICE B
Account Type	INDIVIDUAL
Municipality	CORNELIUS
Property Use	SINGLE FAMILY RESIDENTIAL - WATERFRONT

Zoning
Contact appropriate Planning Department or see Map.

Water Quality Buffer	
Parcel Inside Water Quality Buffer	No

FEMA and Community Floodplain	
FEMA Panel#	3710463400K
FEMA Panel Date	03/02/2009
FEMA Flood Zone	IN:VIEW FEMA FLOODPLAIN TO VERIFY
Community Flood Zone	OUT:VIEW COMMUNITY FLOODPLAIN TO VERIFY

Situs Addresses Tied to Parcel
22818 TORRENCE CHAPEL RD CORNELIUS



01/03/2014 from Mecklenburg County

Ownership	
Owner Name	Mailing Address
JACK WESLEY HARMON	22818 TORRENCE CHAPEL RD CORNELIUS NC 28031
LAVEETA N HARMON	22818 TORRENCE CHAPEL RD CORNELIUS NC 28031

Deed Reference(s) and Sale Price		
Deed	Sale Date	Sale Price
12158-531	04/27/2001	$0.00
08964-658	03/11/1997	$39,500.00

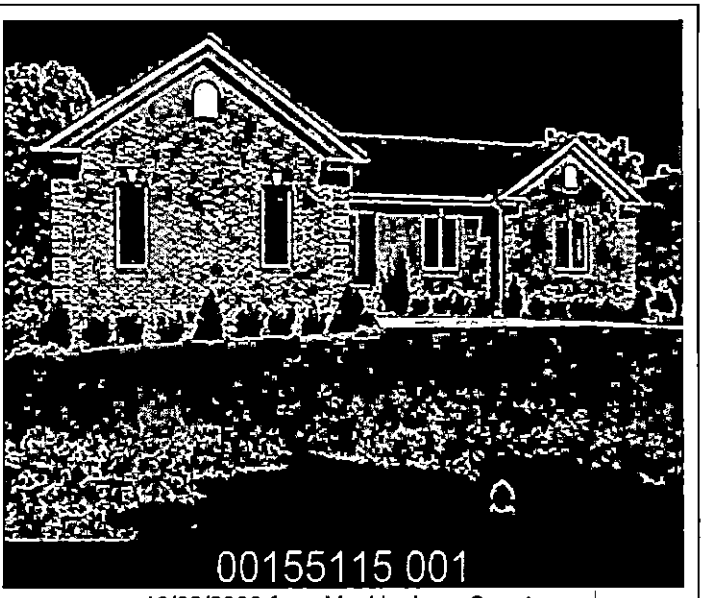
Site Location	
ETJ Area	Cornelius
Charlotte Historic District	No
Charlotte 6/30/2011 Annexation Area	No
Census Tract #	62.03

Post Construction District	
Jurisdiction	Cornelius
District	Cornelius

Stream Watershed Districts	
Stream Watershed Name	LAKE NORMAN

Regulated Drinking Watershed Districts	
Watershed Name	LAKE NORMAN
Watershed Class	CA

Built-Upon Area Restriction	
Limit on amount of Built-Upon Area	Yes



10/03/2000 from Mecklenburg County

This map or report is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps,



Print
Close

Parcel Information

Parcel ID	Account	Parent	Previous
00155115	INDIVIDUAL		

Owner(s)

Owner Name	Mailing Address	City/State
HARMON JACK WESLEY	22818 TORRENCE CHAPEL RD	CORNELIUS NC 28031
HARMON LAVEETA N WIFE	22818 TORRENCE CHAPEL RD	CORNELIUS NC 28031

Legal Information

Legal	Municipality	Date Annexed	Special District	Fire District	Acreage
L1 M56-755	CORNELIUS		FIRE SERVICE B	CORNELIUS	0.573

Total Parcel Assessment

Building	Land	Features	Total
301100	700000	6100	1007200

Exemptions

Exemption	Year Approved	Review Date	Amount

Sales Information

Sale	Price	Stamps	Qualify	VI	Type	Legal Ref.	Grantor
Apr 27 2001	0		LESS $3000	IMP	DEED STAMPS	12158-531	HARMON JACK WESLEY
Mar 11 1997	39500		RELATED	VAC	DEED STAMPS	08964-658	HARMON MARGARET T (B

Land Use

Use	Units	Type	Neighborhood	Assessment
R122	1	WF	A101	700000

Building Information

Bldg	Description	Type	Year	Property Location
1	Single-Fam	RES	1998	22818 TORRENCE CHAPEL RD CORNELIUS

Bldg	Story	Units	Total SqFt	Heated SqFt	Foundation	Ext. Wall	Grade	Value
1	1 STORY	1	6262	4236	CRAWL SPACE	FACE BRICK -	AVERAGE 06	301100

Bldg	Heat	Fuel	Fire Place	AC	Fixtures	Bedrooms	Full Baths	3/4 Baths	1/2 Baths
1	AIR-DUCTED	GAS	1 - FP3	AC-CENTRAL	0	3	2	0	1

Sub Area

Bldg	Description	Size
1	PORCH - OPEN - FINISHED	30
1	GARAGE - UNFINISHED	800
1	BASEMENT - OPEN-ENDED FINISHED	1718
1	PORCH - OPEN - FINISHED	612
1	GARAGE - FINISHED	584
1	BASE (FIRST FLOOR)	2518

Depreciation

Bldg	Physical	Functional	Economic	Special	Override
1	AV - 13.00%	- 0.00%	- 0.00%	- 0.00%	- 0.00%

Special Features & Yard Items

Bldg	Built	Type	Quantity	Units	Value
1	2000	DOCK	1	256.00000	2300
1	1998	PATIO	1	180.00000	400
1	2000	PIER	1	256.00000	1700
1	2000	PIER	1	240.00000	1600
1	2000	BOAT RAMP	1	80.00000	100

Notes

Tax Year	Notes	Note Date
2011	Informal Review Request Received	04/13/2011

Value Changes

Notice Date	Tax Year	Reason	Changed To	Deferred
Nov 25 2013	2013	Revaluation Review	1007200	0
Feb 8 2011	2011	Countywide Revaluation	1007200	0
Jan 17 2003	2003	Countywide Revaluation	537100	0
Apr 2 2001	2001	Remodeled and/or New Addition	500090	
Apr 2 2001	2001	Remodeled Improvements and/or New Additi	500090	
Jan 5 1998	1998	Countywide Revaluation	225000	
Mar 26 1993	1993	Division of Land and/or New Parcel	225000	
Mar 26 1993	1993	Division of Real Estate and/or New Parce	225000	

Notice Date	Tax Year	Reason	Changed To	Deferred
Jan 2 1991	1991	Countywide Revaluation	574920	



Print
Close

Parcel Information

Parcel ID	Account	Parent	Previous
00155115	INDIVIDUAL		

Owner(s)

Owner Name	Mailing Address	City/State
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Bldg	Heat	Fuel	Fire Place	AC	Fixtures	Bedrooms	Full Baths	3/4 Baths	1/2 Baths
1	AIR-DUCTED	GAS	1 - FP3	AC-CENTRAL	0	3	2	0	1

Sub Area

Bldg	Description	Size
1	PORCH - OPEN - FINISHED	30
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1	BASEMENT - OPEN-ENDED FINISHED	1718
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Bldg	Physical	Functional	Economic	Special	Override
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Special Features & Yard Items

Bldg	Built	Type	Quantity	Units	Value
1	2000	DOCK	1	256.00000	2300
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1	2000	PIER	1	256.00000	1700
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Notes

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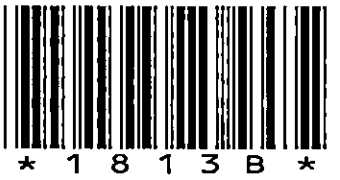
Notice Date	Tax Year	Reason	Changed To	Deferred
Jan 2 1991	1991	Countywide Revaluation	574920	

Polaris 3G Map – Mecklenburg County, North Carolina

Date Printed: 9/16/2016 10:36:09 AM



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



22818 TORRENCE CHAPEL RD

00155115

12/26/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 813-B DATE: 12-10-98

TC: 001-551-15 ☐ L ☒ CRT

SERIAL № 17912

Name of Owner JACK HARMON Juris.: _____

Address of Property 22810 Torrence Chapel Rd

Inspection Data:

Tank Material PLC

Total Length of Drainfield 200

Number of Lines 4 @ 50

Cover Depth 6"

Water Supply Source well

Distance to Water Source 50 FT

Excavation Inspected 12-10-98

Tank(s) Inspected 12-10-98

Wash Line Inspected —

High Water Alarm Inspected —

PLOT

Design 1498 1500 ST MOD 400 SFT TYPE III PPBPS CTR# BOBBY MITCHELL

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☐ installed or constructed ☐ altered or repaired

☐ in accordance with the permit issued ☐ as detailed in the plot above

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. This issuance of this

☐ Certificate of Completion ☐ 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. 1990 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/revocation of this permit.

COMMENTS: _____

Environmental Health Specialist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 1813B DATE: 10-15-98

TC: 001-551-15 ☐L

SERIAL Nº 17793

Permission is hereby given to ✓ Install or Construct, _____ Alter or Repair the individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge as specified herein at the described location. This permit is granted based upon the information supplied in the application dated 3-11-97. All work shall be completed on or before 11-15-98, after which date this permit 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 the granting of this permit. A Certificate of Completion or 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 or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

* Install accoding to scaled drawing found with improvement permit.
* Foundation drains must be routed down left property line in solid pipe – do NOT cross any portion of drainfield with these pipe.

PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank _____ gallons

Tank Construction PCC

Trench Depth 28"

Absorption and/or Nitrification Lines:

Trench Width 2 feet

Trench Walls Scored and Porous Yes

Total Line Length 200 feet

Number of Lines 4

Depth of Stone N/A 28" SAND inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well >50 feet

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

NAME OF OWNER Jack Wesley Harmon

LOCATION OF PROPERTY 22818 Torrence Chapel Road

Comments: Type IIIe PPBPS 3 bedrooms
(4) 2'w x 28"d x 50'l

Larry B. Thompson, Jr., R.S.
Environmental Health Specialist

WHITE - HEALTH DEPARTMENT's COPY • CANARY - E.H.S. COPY • PINK - OWNER OR AGENT's COPY

Paid #4800

FEE: _____ **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION** Dark1
DATE: _____ **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: 5-13-97 **PERMIT NO:** 1813 B
PARCEL NO: 001-551-15

JOB LOCATION ADDRESS: 22818 Torrence Chapel Road
PROPERTY OWNER: Jack W. Harmon
BUILDING CONTRACTOR: _____
SUBDIVISION NAME: Country Club Shores #1
AUTHORIZATION ISSUED BY: Larry B. Thompson Jr. R.S. **DATE:** 5-13-97
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 1813 B, 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 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 AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: See Conditions Of Improvement Permit.

OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITIONS OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

Jack W. Harmon 5/23/97
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

Permit Number: 1813 B

CONDITIONS OF IMPROVEMENT PERMIT

Tax Number: 001-551-15

- 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	360 Max gallons/day wastewater flow	600 Absorption Area (sq ft)	8' Trench spacing (min. on centers)
Yes Serviced by private well	1500 Gallon septic tank	200 Total trench length (ft)	28" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
3 Bedrooms in residence	N/A Gallon pump tank	N/A Depth of stone	

Any surface waters present: Type: Minimum separation distance:

Site modifications required:

Additional Conditions:
- Install PPBPS system according to manufacturer's recommendations
- Keep all parts of system at least 50' off of any well.
- Keep new well at least 50' off of septic system and it's repair area.
- Agreement forms Required

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

600 Absorption Area (Sq ft) 200 Total Trench Length (Ft)	N/A Depth of Stone Trench	8' Trench spacing (min. on centers)	36" 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 the 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 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.

Larry B. Thompson, Jr. RS 5-13-97
DEHNR Authorized Agent / Date

Jack W. Summers 5/23/97
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

18.63'
25.45'
10.06'
36.58'
17.64'
18.00'
21.47'
31.53'
11.12'
4.25'

COMMENTS
- 1500 gallon Septic Tank
- D-Box
- (4) 2'w x 50'L x ≤ 28"d
- Stay 50' off 760 contour and any well with all parts of system.
- Keep new well 50' off of any part of the septic system and the designated repair area.
- Repair area will be a Type IV PPBPS system.

John W. Harmon

NORTH

BOOK 12, PAGE 19

File # 1813B
Jack Harmon
5-13-97
File Copy/Plot Plan

LAKE NORMAN

RAMP
PIER
NIP
L1
L2
L3
L4
L5
L6
L7
L8
L9
L10
L11
L12
L13
760 CONTOUR
30' VEGETATIVE BUFFER
118.40'
N23° 40' 00" W
8' x 50'
50' LAKE SETBACK LINE
PLANTERS
D-Box
Sch 40 Supply line
Septic Tank
8' SIDE SETBACKS
EIP
EXISTING WELL (50' RADIUS)
NOW OR FORMERLY
ROBERT J. RAVICH
& WIFE
LUCY A. RAVICH
DEED BOOK 6934 PAGE 19
MAP BOOK 22 PAGE 645
1
0.573 ACRES
(BY COORDINATES)
12.33'
14.49'
2
0.468 ACRES
(BY COORDINATES)
PROPOSED FOUNDATION
PATIO
ONE STORY BRICK
WITH FULL BASEMENT
N34° 17' 00" E
146.99'±
194.68'
N14° 06' 34" E
137.63'
30' FRONT SETBACK
Type IV
PPBPS Repair
32.29'
124.98'
DRIVE
EXISTING WELL
(50' RADIUS)
EIP
NIP
105.75'
L15
R/W
N80° 48' 00" W
N75° 17' 00" W
EIP

TORRENCE CHAPEL ROAD
(60' PUBLIC RIGHT OF WAY)

BK: 09070 PG: 0435/0437 #:0350 13.05
JUDITH A GIBSON REG OF DEEDS MECK NC
FILED FOR REGISTRATION 05/23/97 15:12

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 # 1813 B
PARCEL # 001-551-15

The undersigned, Jack Wesley Harmon, owner of property located at Torrence Chapel Road, (the "site") and described in an instrument recorded in Book 27 at Page 460, 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:

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

This instrument was prepared by: Jack Wesley Harmon
Mail after recording to: 22808 Torrence Chapel Rd. Cornelius, N.C. 28031

- 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 the Department, 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 23 day of May, 1995.

_____ _____ (SEAL)
(Corporate Name)

_____ (SEAL)

By: Jack Wesley Harmon _____ (SEAL)

_____ President _____ (SEAL)

ATTEST:

_____

_____ Secretary

(Corporate Seal)

STATE OF NORTH CAROLINA
COUNTY OF Mecklenburg

I, Vermell S. Rush, a Notary Public for said County and State, do hereby certify that Jack Wesley Harmon personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 23rd day of May, 1997

Vermell S. Rush
Notary Public

My Commission Expires:
5/1/2000

VERMELL S. RUSH NOTARY PUBLIC MECKLENBURG COUNTY, N.C.

State of North Carolina, County of Mecklenburg

The foregoing certificate(s) of _____

_____

_____

Notary(ies) Public is/are certified to be correct.

This _____ day of _____, 19 _____.

JUDITH A. GIBSON, REGISTER OF DEEDS

By: _____ Deputy Register of Deeds

RBCWM:24751_1/8-30-95

DATE 05-23-97

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION CORN.

001-551-15
PARCEL NUMBER

22818 TORRENCE CHAPEL RD
ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

PROJECT NAME (IF APPLICABLE)

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

1. SUBDIVISION REGULATIONS	**_____APPROVED**	**_____NOT APPROVED**
2. FLOODWAY REGULATIONS	**_____APPROVED**	**_____NOT APPROVED**
3. WATERSHED PROTECTION	**_____APPROVED**	**_____NOT APPROVED**
4. COMMERCIAL DRAINAGE PLAN	**_____APPROVED**	**_____NOT APPROVED**
5. PUBLIC UTILITY EASEMENT	**_____PRESENT**	**_____NOT PRESENT**
6. PROPERTY FRONTS ON THOROUGHFARE	**_____YES**	**_____NO**
7. DRIVEWAY PERMIT REQUIRED	**_____YES**	**_____NO**
8. DOES PROJECT CONFLICT WITH ROAD PROJECT?	**_____YES**	**_____NO**

REMARKS:

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE WHEN PAYING PERMIT FEE. CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

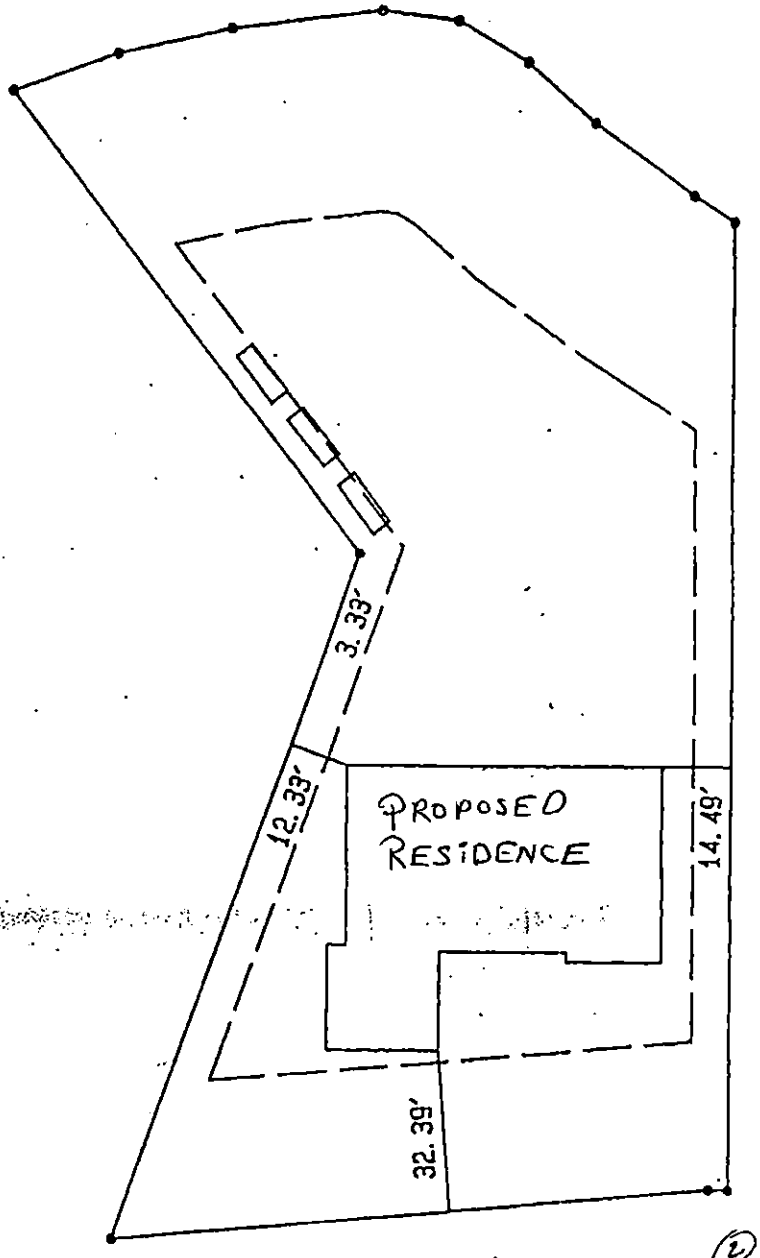
ALL OTHER FORMS OBSOLETE

☐ NEW ADDRESS

SIGNED: Martha Vaca

REVISED 1/91

18|3B



1" = 40'

5/20/96

PROPOSED PLOT PLAN

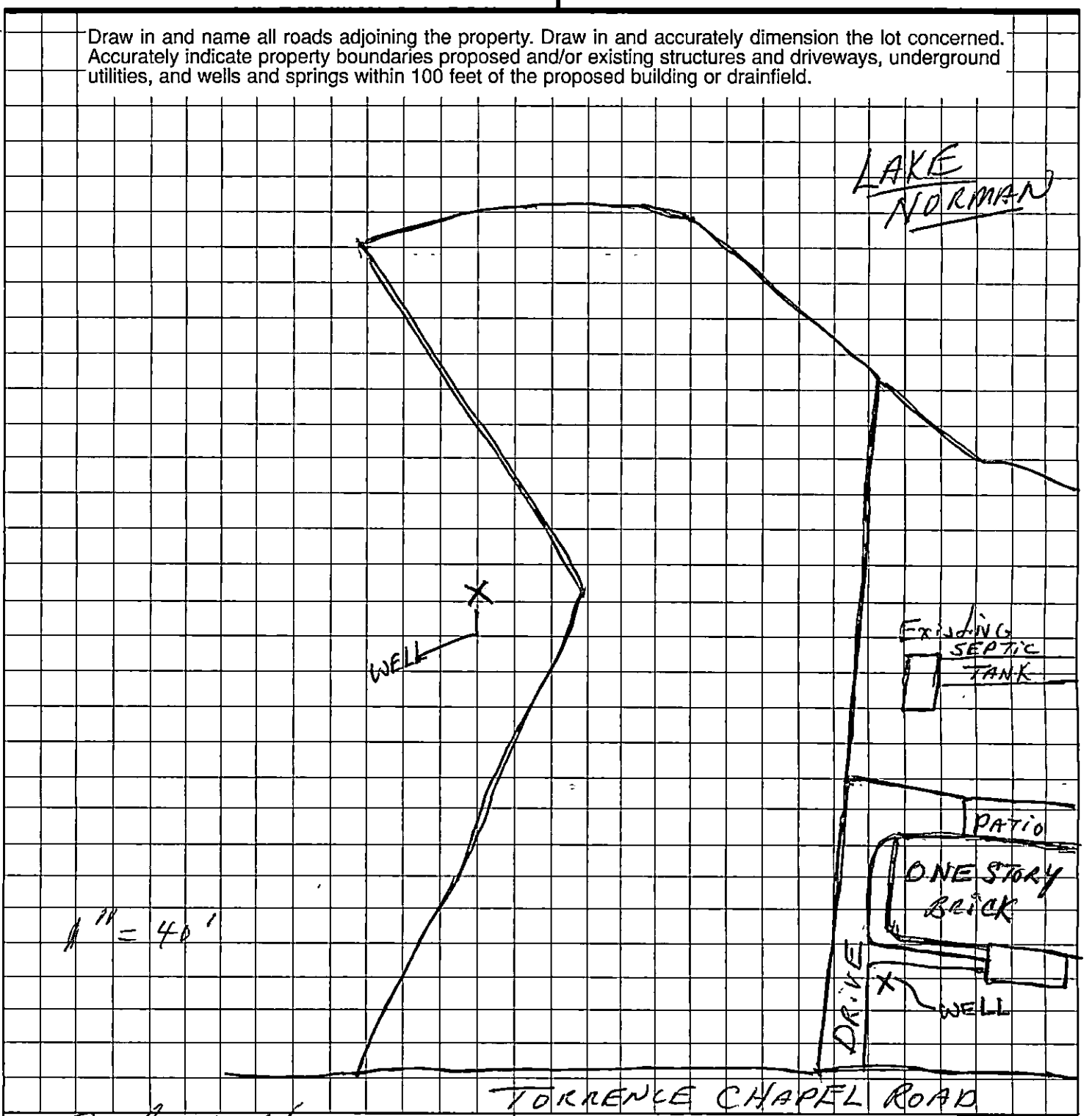
1813B

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

FILE: _____

TC: 001-551-15

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.



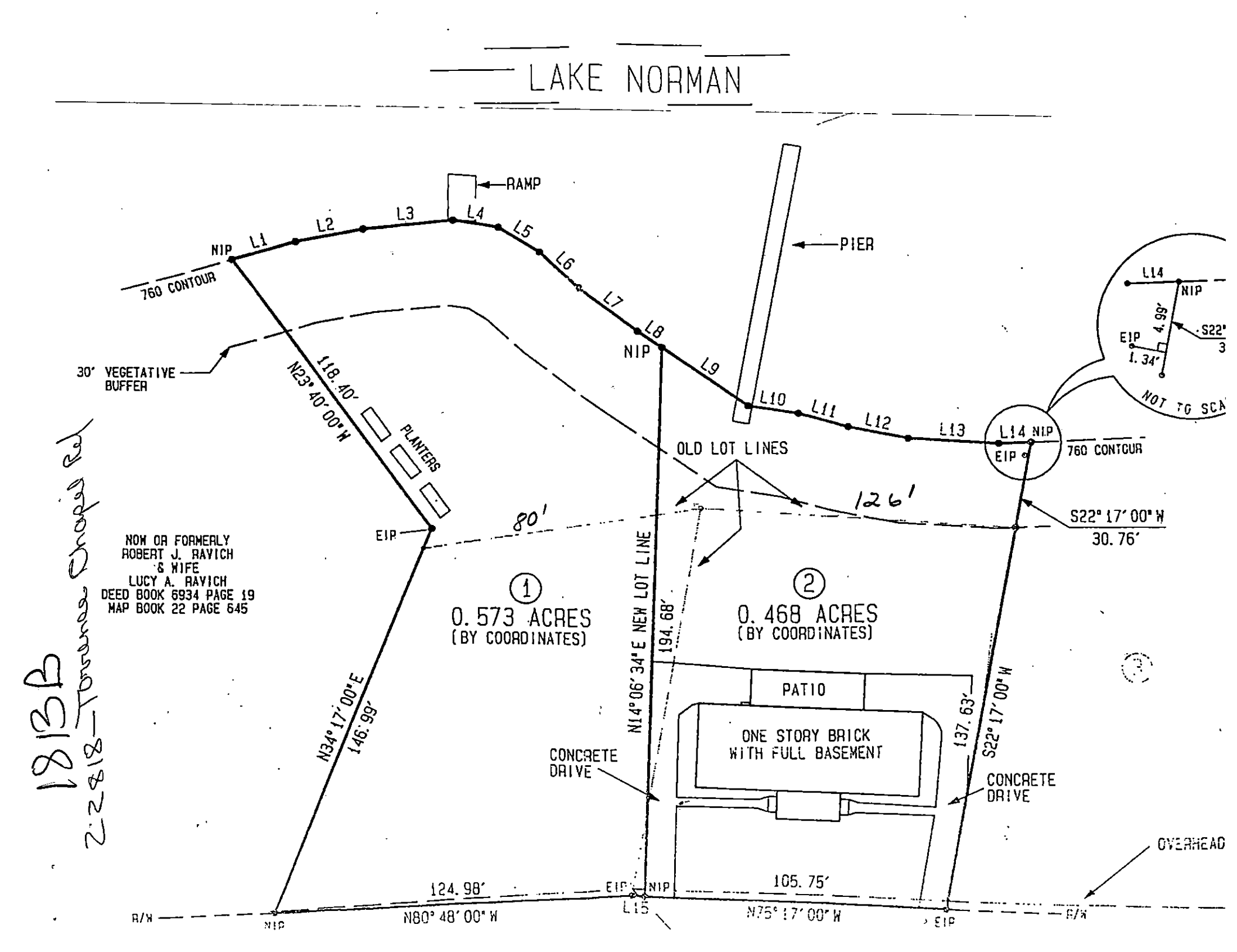
Jack W. Thomas

OWNER/AGENT SIGNATURE

DATE 3/11/92

APPROVAL DATE _____

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


LAKE NORMAN
RAMP
PIER
L1
L2
L3
L4
L5
L6
L7
L8
L9
L10
L11
L12
L13
L14
NIP
760 CONTOUR
30' VEGETATIVE BUFFER
N23° 40' 00" W
118.40'
PLANTERS
OLD LOT LINES
126'
80'
S22° 17' 00" W
30.76'
EIP
NOW OR FORMERLY
ROBERT J. RAVICH
& WIFE
LUCY A. RAVICH
DEED BOOK 6934 PAGE 19
MAP BOOK 22 PAGE 645
1
0.573 ACRES
(BY COORDINATES)
2
0.468 ACRES
(BY COORDINATES)
N14° 06' 34" E NEW LOT LINE
194.68'
PATIO
ONE STORY BRICK
WITH FULL BASEMENT
137.63'
S22° 17' 00" W
CONCRETE DRIVE
CONCRETE DRIVE
N34° 17' 00" E
146.99'
124.98'
N80° 48' 00" W
105.75'
N75° 17' 00" W
R/W
OVERHEAD
1813B
2.2818 Tonneau Chord Rd

JACK HARMON
22808 TORRENCE CHAPEL ROAD
CORNELIUS, NC 28031
HOME PHONE: 704-892-6370
HOME FAX: 704-896-0174
OFFICE PHONE: 704-660-5195

FAX MESSAGE

DATE: 4/21/97

TO: LARRY THOMPSON - ENVIRONMENTAL HEALTH SPECIALIST

FROM: JACK HARMON

SUBJECT: SEPTIC TANK LAYOUT

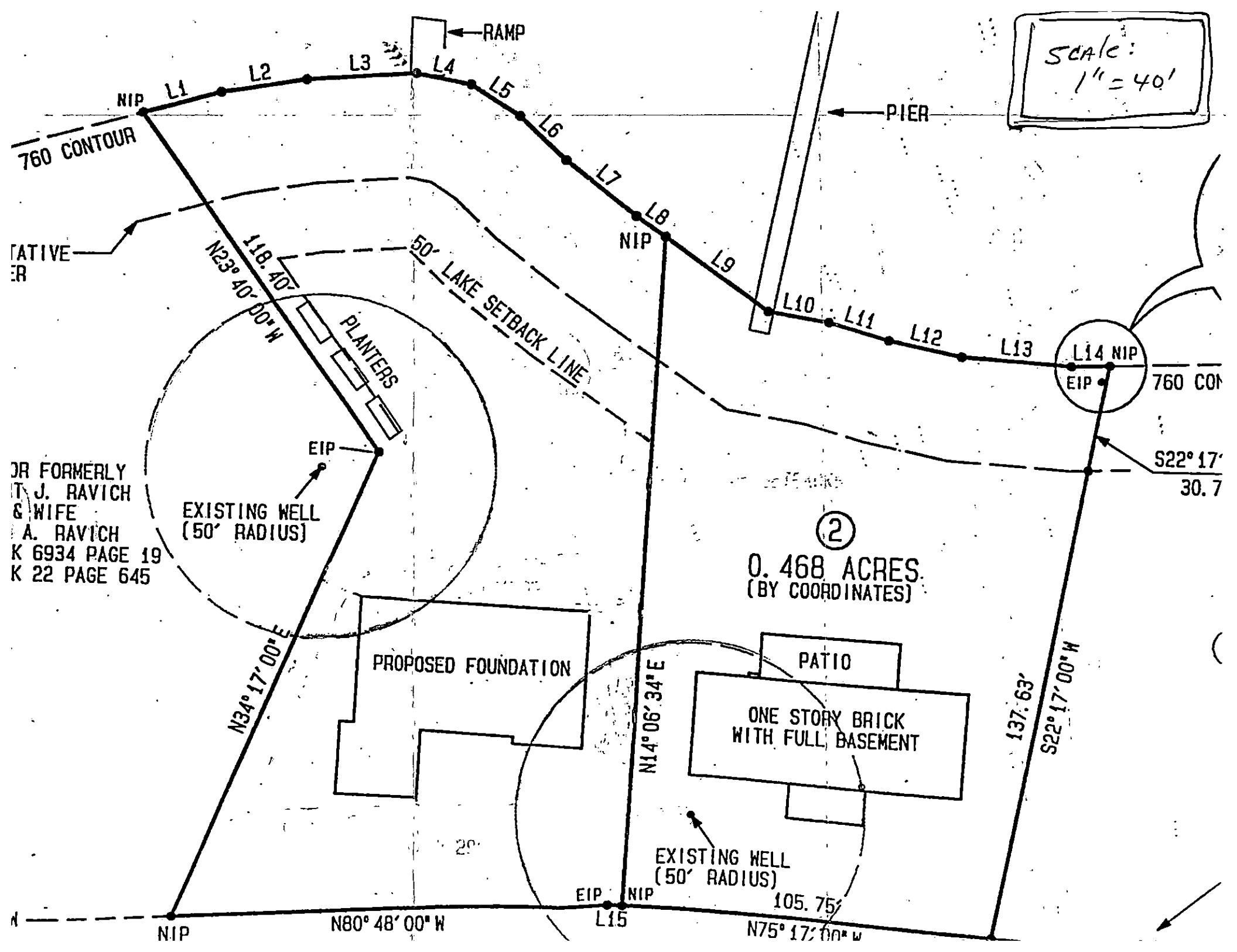
NUMBER OF PAGES INCLUDING THIS ONE: 2

DEAR LARRY,

IT WAS A PLEASURE MEETING WITH YOU AND KELLY THE PREVIOUS WEEK AT MY LAKE LOT. SINCE WE MET, I HAD MY SURVEYOR TO SURVEY THE LOT AND MARK THE POSITIONS OF THE WELLS ON THE ADJACENT LOTS. FROM THESE POINTS AND FROM THE 760 CONTOUR OF THE LAKE, HE HAS MADE US A MAP FOR FIGURING THE SEPTIC TANK LAYOUT. YOU SHOULD RECEIVE THE FULL MAP TOMORROW BY MAIL. ATTACHED IS AN ENLARGED PORTION OF THIS MAP THAT YOU CAN USE FOR ESTIMATING THE LAYOUT. IF YOU AND KELLY NEED TO LOOK AT THE LOT AGAIN, I HAVE THE STAKES STILL IN POSITION FROM THE SURVEY. PLEASE LET ME KNOW IF YOU HAVE ANY QUESTIONS OR IF THERE IS ANYTHING ELSE YOU MAY NEED.

BEST REGARDS,

JACK HARMON


RAMP
PIER
SCALE: 1" = 40'
NIP
L1
L2
L3
L4
L5
L6
L7
L8
L9
L10
L11
L12
L13
L14 NIP
EIP
760 CONTOUR
760 CON
TATIVE
ER
118.40'
N23° 40' 00" W
50' LAKE SETBACK LINE
PLANTERS
EIP
EXISTING WELL
(50' RADIUS)
OR FORMERLY
T. J. RAVICH
& WIFE
A. RAVICH
K 6934 PAGE 19
K 22 PAGE 645
S22° 17'
30.7
2
0.468 ACRES.
(BY COORDINATES)
PROPOSED FOUNDATION
PATIO
ONE STORY BRICK
WITH FULL BASEMENT
N34° 17' 00" E
N14° 06' 34" E
137.63'
S22° 17' 00" W
EXISTING WELL
(50' RADIUS)
EIP
NIP
L15
105.75'
N80° 48' 00" W
N75° 17' 00" W
NIP

Mecklenburg County
Health Department

TELECOPIER TRANSMITTAL COVER SHEET

NOTICE

THE INFORMATION CONTAINED IN THIS TELECOPY MAY BE PRIVILEGED AND/OR CONFIDENTIAL AND IS INTENDED ONLY FOR THE USE OF THE PERSON TO WHOM IT IS ADDRESSED. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT (OR SUCH RECIPIENT'S EMPLOYEE OR AGENT), YOU ARE HEREBY NOTIFIED NOT TO READ, DISTRIBUTE OR COPY THE MATERIALS ATTACHED HERETO WITHOUT THE PRIOR WRITTEN CONSENT OF THE SENDER. IF YOU HAVE RECEIVED THIS TELECOPY IN ERROR, PLEASE NOTIFY THE SENDER BY TELEPHONE CALL AND RETURN THE ORIGINAL TELECOPY TO US BY MAIL AND WE WILL REIMBURSE YOU FOR THE REQUIRED POSTAGE. THANK YOU.

TO: Jack W. Harmon TELECOPIER # 662-3498

FROM: L. Thompson DATE 4.29.97

NUMBER OF PAGES TRANSMITTED: 2 (including cover sheet)

COMMENTS: Septic Proposal

If you do not receive all pages, please call us as soon as possible at the following number: (704)336-5102.

[✓] Original will not follow [ ] Original will follow via:

[ ] U.S. Mail [ ] Hand Delivery [ ] _____

16.63'
25.45'
10.06'
36.58'
17.64'
18.00'
21.47'
31.53'
11.12'
4.25'

File # 18136
Jack W. Harmon
662-3498
(Septic Proposal)
Type III Innovative System

NORTH
BOOK 12, PAGE 19

LAKE NORMAN

RAMP
PIER
NIP
L1
L2
L3
L4
L5
L6
L7
L8
L9
L10
L11
L12
L13
760 CONTOUR
30' VEGETATIVE BUFFER
N23° 40' 00" W
118.40'
50' LAKE SETBACK LINE
50'
50'
50'
50'
19'
19'
19' on centers
PLANTERS
Supply Lines
EIP
(5' off foundation)
Septic Tank
1
8' SIDE SETBACKS
2
0.468 ACRES
(BY COORDINATES)
0.572 ACRES
(BY COORDINATES)
12.33'
125.49'
Distribution Box
PROPOSED FOUNDATION
PATIO
ONE STORY BRICK WITH FULL BASEMENT
N14° 06' 34" E
194.68'
137.63'
N34° 17' 00" E
146.99'±
NOW OR FORMERLY
ROBERT J. RAVICH
& WIFE
LUCY A. RAVICH
DEED BOOK 6934 PAGE 19
MAP BOOK 22 PAGE 645
EXISTING WELL
(50' RADIUS)
EXISTING WELL
(50' RADIUS)
Panel Block Repair
(3) 3'w x 6'L
30' FRONT SETBACK
67'
67'
32.29'
8'
8'
on center
124.98'
EIP
NIP
105.75'
L15
N75° 17' 00" W
EIP
R/W
NIP
N80° 48' 00" W

TORRENCE CHAPEL ROAD
(60' PUBLIC RIGHT OF WAY)

Mecklenburg County
Health Department

TELECOPIER TRANSMITTAL COVER SHEET

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TO: Jack Harmon TELECOPIER # 896-0174

FROM: Larry Thompson DATE 5-8-97

NUMBER OF PAGES TRANSMITTED: 2 (including cover sheet)

COMMENTS: * Plans for a gravity dosed panel block system
Please let me know if this is suitable and I will
prepare the proper permits for you. Thanks
LT.

If you do not receive all pages, please call us as soon as possible at the following number: (704)336-5102.

☐ Original will not follow ☐ Original will follow via:

☐ U.S. Mail ☐ Hand Delivery ☐ _____

0°W 36.58'
0°W 17.64'
0°W 18.00'
0°W 21.47'
0°W 31.53'
0°W 11.12'
0°W 4.25'

File # 18.13 B
Jack W. Harmon

NORTH

2 PAGE 19

LAKE NORMAN

RAMP

PIER

NIP L1 L2 L3 L4 L5 L6 L7 L8 NIP L9 L10 L11 L12

760 CONTOUR

30' VEGETATIVE BUFFER

Septic Drainfield
(4) 2'w x 50'L x 8' on centers
PPBPS Gravity Dosed

N23° 40' 00" W 118.40'

50' LAKE SETBACK LINE

PLANTERS

D-Box

50' PVC Supply Line

EIP

EXISTING WELL (50' RADIUS)

NOW OR FORMERLY
ROBERT J. RAVICH
& WIFE
LUCY A. RAVICH
DEED BOOK 6934 PAGE 19
MAP BOOK 22 PAGE 645

8' SIDE SETBACKS

Septic Panels

1

0.573 ACRES (BY COORDINATES)

12.33'

14.49'

2

0.468 ACRES (BY COORDINATES)

PROPOSED FOUNDATION

PATIO

ONE STORY BRICK WITH FULL BASEMENT

N34° 17' 00" E 146.99'±

194.68'

N14° 06' 34" E

30' FRONT SETBACK

Drive

PPBPS Repair Area
(3) 2'w x 67'L pressure panel lines 8' on centers

EXISTING WELL (50' RADIUS)

124.98'

N80° 48' 00" W

EIP NIP L15 105.75'

N75° 17' 00" W

R/W

NIP

TORRENCE CHAPEL ROAD
(60' PUBLIC RIGHT OF WAY)

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

PROPERTY ID #: _____ of _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

#2 1/6/13
001-351-15

OWNER: Mark W. Hausman condeleus APPLICANT: _____
ADDRESS: 22805 Torrence Chapel Rd APPLICATION DATE: _____ DATE EVALUATED: _____
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949): 360gpd PROPERTY SIZE: .57
LOCATION OF SITE: Torrence Chapel Road PROPERTY RECORDED: _____
WATER SUPPLY: ☒ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	3-5% slopes 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	1956 SAPRO CLASS	1944 RESTR HORIZ	PROP CL & L
1	LS	0-6"	gr/sc/	Fv/SEXPISSP	>40" TO soil wetness	40"	N/A	None	PS .39/F LV
		6-40"	SBK/C	Fi/SEXPISP					
2	LS	0-4"	gr/sc/	Fv/SEXPISSP	>48" TO soil wetness	48"	N/A	None	PS .39/F LV
		4-48"	SBK/C	Fi/SEXPISP					
3	LS	0-5"	gr/sc/	Fv/SEXPISSP	>48" TO soil wetness	48"	N/A	None	PS .39/F LV
		5-48"	SBK/C	Fi/SEXPISP					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	us	us
System Type(s)		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): unsuitable
EVALUATED BY: A.A. Mullis 4-4-97
OTHER(S) PRESENT: LSS

COMMENTS: Probably 100% Repair

LEGEND

use the following standard abbreviations

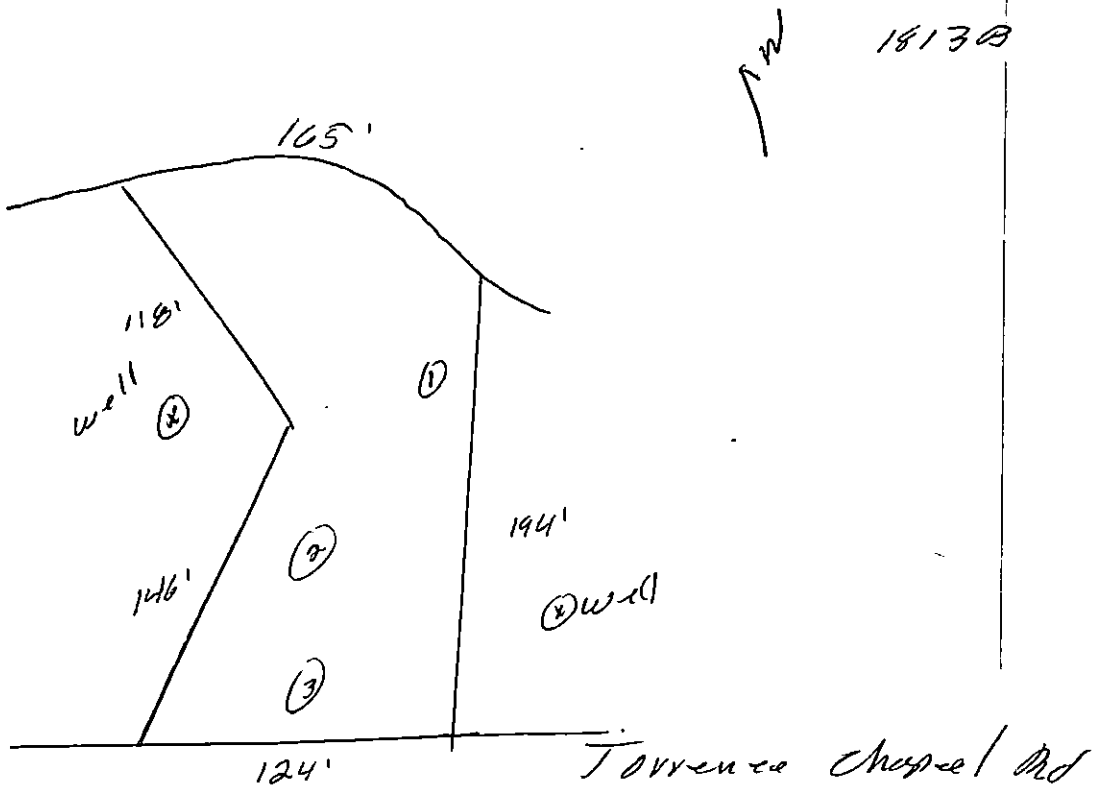
LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR	LPP .1957 LTAR	MINERALOGY/ CONSISTENCE	STRUCTURE
C (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive)	G (Single Grain)
V (Convex Slope)		LS (Loamy Sand)			SEXP (Slightly Expansive)	M (Massive)
(Drainage Way)					EXP (Expansive)	CR (Crumb)
S (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
P (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
S (Foot Slope)						ABK (Angular Blocky)
(Head Slope)	III	SI (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
(Linear Slope)		SICL (Silty Clay Loam)				PR (Prismatic)
(Nose Slope)		CL (Clay Loam)			MOIST	WET
(Ridge)		SCL (Sandy Clay Loam)				
(Shoulder Slope)		SLC (Silt Loam Clay)			VFR (Very Friable)	NS (Non-sticky)
(Terrace)					FR (Friable)	SS (Slightly Sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FI (Firm)	S (Sticky)
		SIC (Silty Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
					EFI (Extremely Firm)	NP (Non-plastic)
		O (Organic)	None			SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

NOTES

HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.
Long-term Acceptance Rate (LTAR): gal/day/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).



FEE: 105 — DATE: 3/11/97 — 0963

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

[ ] 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 #: 18313

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 001-551-15

STREET ADDRESS: 22818 Torrence Chapel Road

SUBDIVISION OR MOBILE HOME PARK NAME: Country Club Shores

LOT NUMBER: Lot #1 Country Club Shores

TYPE OF BUILDING (CHECK ONE):

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

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 2465 Ft²

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 2

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) __ MUNICIPAL (M) ✓ 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 ✓ NO
EXISTING WASTEWATER SYSTEMS __ YES ✓ NO
EASTMENTS OR RIGHT-OF-WAYS __ YES ✓ NO
WELL, SPRINGS OR WATERLINES __ YES ✓ NO
DESIGNATED WETLANDS __ YES ✓ NO

PROPERTY OWNER:

NAME: HARMON JACK W
(LAST) (FIRST) (MI)

ADDRESS: 22808 Torrence Chapel Rd.

CITY: Cornelius STATE: NC ZIP: 28031

DAYTIME PHONE: (704) 892 - 6370 660-5195 (work)

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME:
(LAST) (FIRST) (MI)

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: Jack W. Harmon DATE: 3/11/97

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

4-8-97

Met with buyer Heather and K. Landall on-site.

Gave buyer septic options which hinge on house site. Buyer is to mark a definite house site before a permit can be issued.

LT

JACK HARMON
22808 TORRENCE CHAPEL ROAD
CORNELIUS, NC 28031
HOME PHONE: 704-892-6370
HOME FAX: 704-896-0174
OFFICE PHONE: 704-660-5195

(F/c # 1813B)

FAX MESSAGE

DATE: 5/4/97

TO: LARRY THOMPSON - MECKLENBURG COUNTY HEALTH DEPT.

FROM: JACK HARMON

SUBJECT: SEPTIC TANK

NUMBER OF PAGES INCLUDING THIS ONE: 1

LARRY,

I HAVE LOOKED AT YOUR DIAGRAM FOR THE SEPTIC SYSTEM FOR MY LOT AND SEE THAT A DECK WILL HAVE PROBLEMS FITTING INTO THE PICTURE. I WOULD LIKE FOR YOU TO DESIGN A PANEL BLOCK SYSTEM FOR THE BACK YARD AND SEE IF A 15' DECK OFF OF THE BACK OF THE HOUSE WILL WORK WITH THIS SYSTEM DESIGN. PLEASE FAX ME THE DIAGRAM AT MY HOME OFFICE AT 704-896-0174. ALSO, PLEASE SEND ME THE AGREEMENT WE DISCUSSED, ONCE WE HAVE SETTLED ON THE SEPTIC SYSTEM DESIGN. I APPRECIATE YOUR HELP ON THIS.

BEST REGARDS,

JACK HARMON

JACK HARMON
22808 TORRENCE CHAPEL ROAD
CORNELIUS, NC 28031
HOME PHONE: 704-892-6370
HOME FAX: 704-896-0174
OFFICE PHONE: 704-660-5195

FAX MESSAGE

DATE: 5/12/97

TO: LARRY THOMPSON - MECKLENBURG COUNTY HEALTH DEPT

FROM: JACK HARMON

SUBJECT: SEPTIC SYSTEM

NUMBER OF PAGES INCLUDING THIS ONE: 1

DEAR LARRY,

IT WAS A PLEASURE TALKING WITH YOU LAST WEEK AND I HOPE YOU HAD A GOOD WEEKEND. I HAVE REVIEWED YOUR PLANS FOR A GRAVITY PANEL BLOCK SYSTEM FOR MY LOT AND IT LOOKS GOOD TO ME. AS WE DISCUSSED, I HAVE BEEN IN CONTACT WITH TOM BACH AT CMUD. ACCORDING TO TOM, CMUD IS PLANNING TO EXTEND THE WATER AND SEWER SYSTEM DOWN TO THE END OF OUR PENINSULA. CONSTRUCTION IS TO START BY LATE SUMMER OR EARLY FALL WITH A COMPLETION DATE OF EARLY SPRING IN 1998. LARRY, SHOULD THIS PROJECT MATERIALIZE, WE WILL PROBABLY TIE ON TO THE CMUD SYSTEM INSTEAD OF USING A SEPTIC TANK SYSTEM. FOR OUR AGREEMENT, I WOULD LIKE FOR YOU TO INCLUDE THIS AS AN OPTION FOR SEWAGE TREATMENT. THIS COULD ALSO BE AN OPTION FOR THE REPAIR FIELD IN THE FRONT YARD IF CMUD IS AVAILABLE. PLEASE GO AHEAD AND DRAW UP AN AGREEMENT AND FAX IT TO ME TO REVIEW. I APPRECIATE YOUR HELP

BEST REGARDS,

JACK HARMON