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 #: 8646B Permit #: 5953 Tax Parcel #: 011-251-07

Property Owner: Steve Black

Job Location Address: 15101 Black Farms Road

City: Huntersville State: NC Zip Code: 28078

Operation Permit Issuance Date: 7/23/14 Contractor Name: A-1

Permitted Design Flow: 360 GPD

Liquid Capacity of Septic Tank: 1500 gallons

Liquid Capacity of Dosing Tank: — gallons

Effluent Pump Model: —

Drainfield Installation ☐ N/A

Trench Depth: 24 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 400 feet

# of Lines: 3 @ 133 feet

Depth of Media: 12 inches (Type) IRYW

Depth of Cover: 12 inches

Distribution Device: END-CAPS

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: _____

Water Supply Source

☐ Municipal ☒ Private Well ☐ Community Well

☐ Other _____

System Installation Setbacks

Distance from Building Foundation: >75' feet

Distance from Property Line: 710' feet

Distance from Water Supply Source: NOT YET DRILLED feet

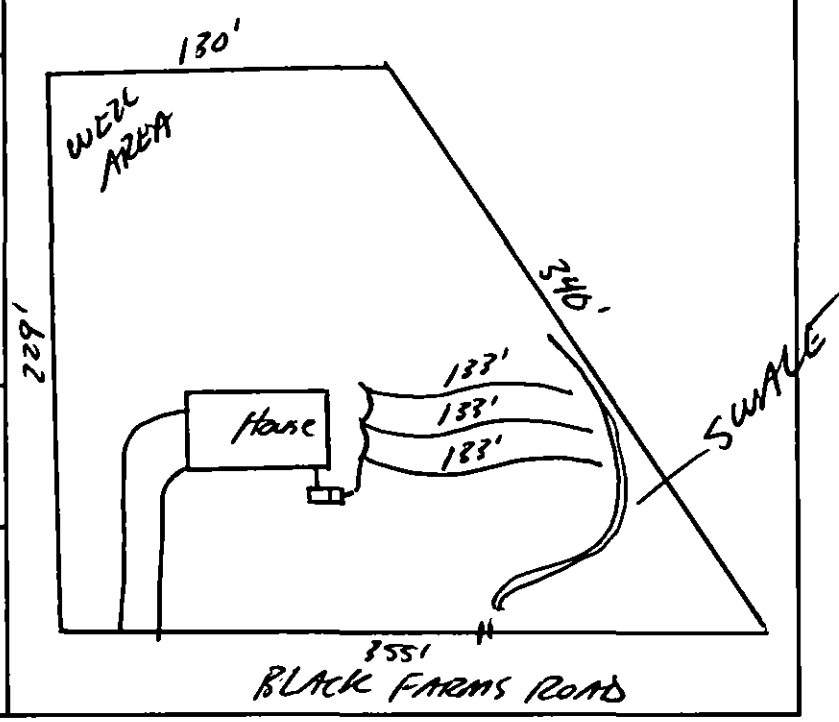
Inspection Dates

Tank(s) Inspected: 7/23/14

Excavation Inspected: 7/23/14

Pump & Controls Inspected: —

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)



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: Htg, IRYW, GRAVITY, NA, NA

DENR Authorized Agent: Jeremy Nicholas Reits Signature: Jeremy Nicholas Reits

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NC DENR
Division of Environmental Health
On-Site Wastewater Section

OPERATION PERMIT for an
ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 8646B Permit #: 5753 Tax Parcel #: 011-251-07

Property Owner: Steve Black

Job Location Address: 15101 Black Farms Road

City: Huntersville State: NC Zip Code: 28078

OPERATION PERMIT CONDITIONS:

I. Performance: System shall perform in accordance with 15A NCAC 18A .1961.

II. Monitoring: System shall be monitored as required by 15A NCAC 18A .1961.

III. Maintenance: Ground absorption sewage treatment and disposal systems shall be checked, and the contents of the septic tank removed, periodically from all compartments, to ensure proper operation of the system. The contents shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.

IV. Operation: System shall be operated in accordance with 15A NCAC 18A .1961.

System Classification: IIIg

*Operation Permits for Type V and VI systems expire five (5) years from the date of issuance (in accordance with Table V(a)). The system owner must contact GWS six (6) months prior to expiration for permit renewal.

Subsurface system operator required: Yes ☐ No ☒

☐ This type of system requires the system owner to maintain a contract with a certified operator to perform system inspection, maintenance, and reporting as required in 15A NCAC 18A .1961. and Table V(a). The system owner is responsible for all fees associated with these services.

☒ System does not require inspection by GWS on a routine frequency.

☐ System requires inspection by GWS once every five (5) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every three (3) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every twelve (12) months. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every six (6) months. The system owner is responsible for all fees associated with the inspection.

V. Other:

DENR Authorized Agent: Jeremy Michelson REHS Date: 7/23/14

Signature: Jeremy Michelson REHS

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 #: 16468 Permit #: 5953 Tax Parcel #: 011-251-07

Property Owner: STEVE BLACK

Job Location Address: 15101 Black Farms Road

City: Huntersville State: NC Zip Code: 28078

Installation Approval Issuance Date: 7/21/14

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 _____, 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: 360 GPD

Site LTAR: 0.225 GPD/ft² (For new installations only.)

Liquid Capacity of Septic Tank: 1500 gallons

Liquid Capacity of Dosing Tank: NA gallons

Drainfield Design ☐ N/A

Trench Depth: 24 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 400 feet

# of Lines: 3 @ 133 feet

Depth of Media: 12 inches (Type) 25% RED

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 _____

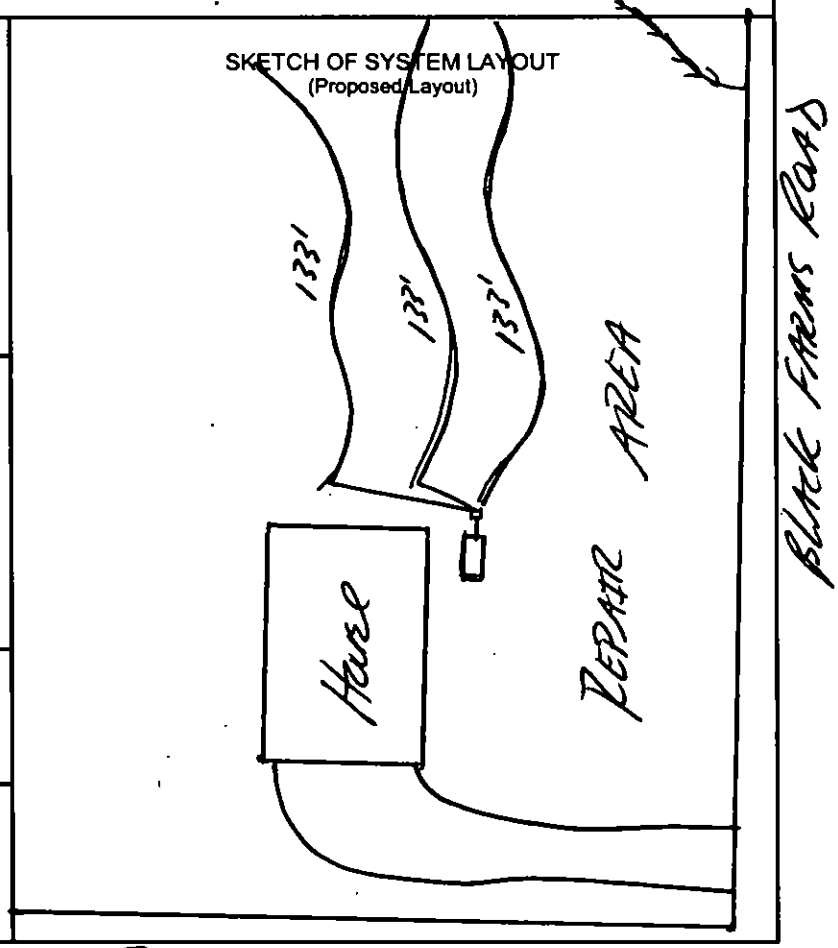
Minimum System Setbacks

Distance from Building Foundation: >5' feet

Distance from Property Line: >10' feet

Distance from Water Supply Source: >100' feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)



Comments: System Classification & Type: IIIg 25% Red. System

INSTALL SWALE AROUND THE SYSTEM

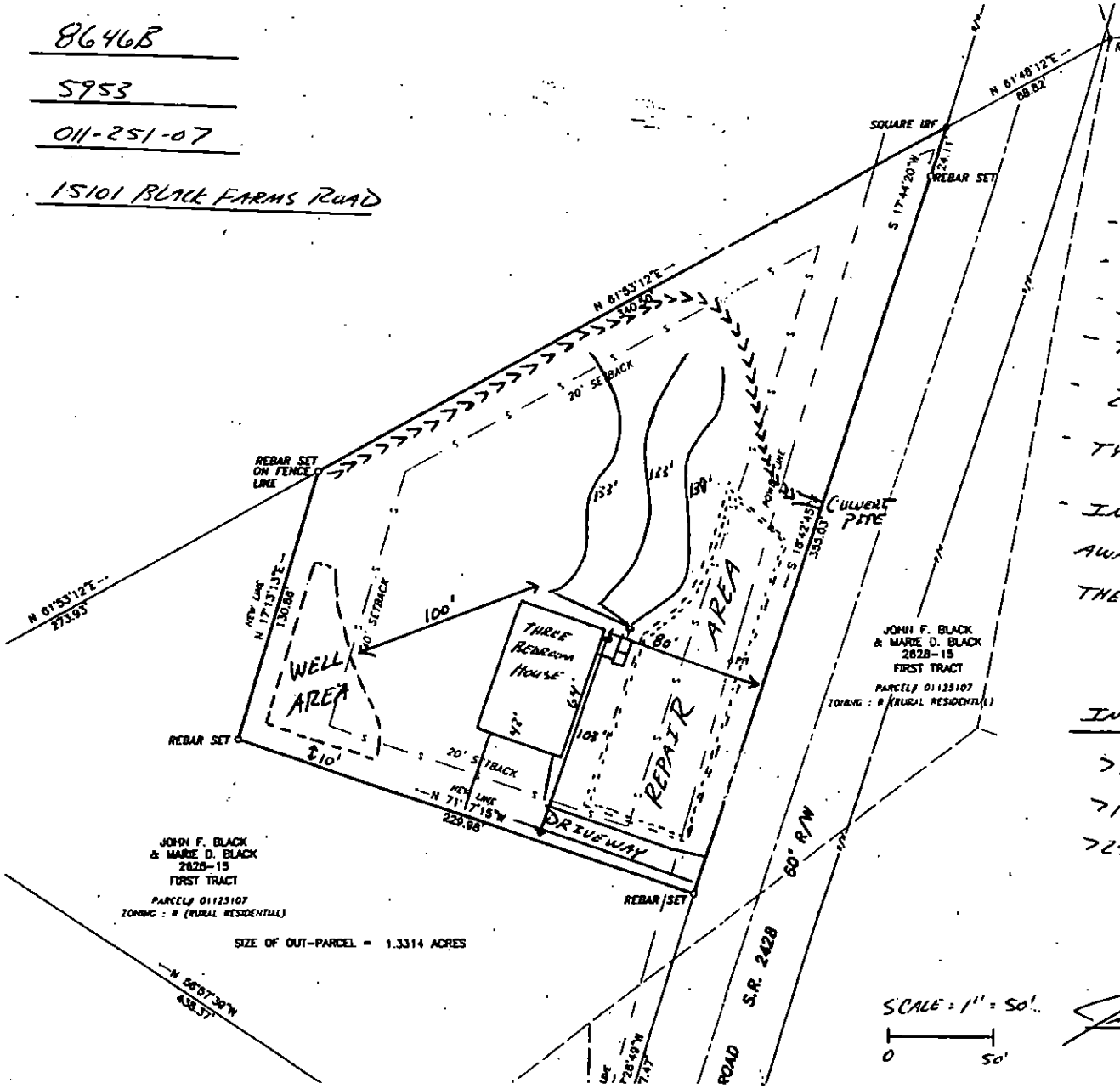
DENR Authorized Agent: Jeremy Mitchell Reeves Signature: Jeremy Mitchell Reeves

8646B

5953

011-251-07

15101 BLACK FARMS ROAD



COMMENTS:

- 3 BEDROOM HOUSE
- 1500 SEPTIC TANK
- 0.225 LTAR
- INSTALL 3 LINES X 133' X 3' (400 TLF)
- TYPE IIIg 25% RED. SYSTEM
- 24" MAX TRENCH DEPTH
- TYPE IIIb PUMP TO 25% RED. REPAIR
- INSTALL A SWALE TO CARRY ALL STORM WATER AWAY FROM THE SEPTIC SYSTEM AS SHOWN ON THE PLOT PLAN

INSTALL THE WELL:

>10' FROM PROPERTY LINES

>100' FROM SEPTIC SYSTEM

>25' FROM BUILDING FOUNDATIONS

Jimmy Nobles, REHS 6/9/14

8646B

MECKLENBURG COUNTY
HEALTH DEPARTMENT

App #5953

COPY

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

1. **SEPTIC / TYPE APPLICATION:** ○ N/A ● NEW SYSTEM ○ ALTERATION ○ REPAIR ○ MODIFIED PLOT PLAN

2. **WELL / TYPE APPLICATION:** ○ N/A ● NEW WELL ○ MAJOR REPAIR ○ ABANDONMENT

3. **JOB LOCATION INFORMATION:**

TAX PARCEL NUMBER: 011-251-07
STREET ADDRESS: Black Farms Road
CITY: Huntersville
STATE: NC ZIP: 28078
SUBDIVISION NAME: _____
LOT #: _____ LOT SIZE (acres): _____
TOWNSHIP:

○ MECKLENBURG ○ CORNELIUS ○ HUNTERSVILLE
○ DAVIDSON ○ CHARLOTTE ○ PINEVILLE
○ MATTHEWS ○ MINT HILL

4. **BUILDING INFORMATION:**

BUILDING TYPE:
○ SINGLE MOBILE HOME ● MODULAR HOME
○ DOUBLE WIDE ○ MULTIPLE FAMILY
○ HOUSE ○ OTHER _____
HEATED SQUARE FOOTAGE: 1977
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: NONE NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: NONE

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: JOHN F. Black
ADDRESS: 15100 Black Farms Road
CITY: Huntersville
STATE: NC ZIP: 28078
WORK PHONE: 704-892-1320
MOBILE PHONE: N/A
FAX: N/A
E-MAIL: N/A

13. **OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:**

NAME: Steve Black
ADDRESS: 7931 Mariner's Pointe Circle
CITY: Denver
STATE: NC ZIP: 28037
WORK PHONE: 704-596-7260
MOBILE PHONE: 704-577-1996
FAX: N/A
E-MAIL: jsblack55@att.net

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. JSB (Initial here for septic system applications)

15. WELL PERMIT APPLICATION:

If the information in this application is falsified, changed, or the site is altered, then the Well Permit shall become invalid. I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed. The permit is valid for a period of twelve (12) months from the date of issuance. JSB (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.

John Stevenson Black — 12/19/2012

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

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OFFICE USE ONLY

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

SEPTIC APPLICATION FEE RECEIVED: $ 250 DATE FEE RECEIVED: 12/19/12

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

APPLICATION PROCESSED BY: lwa

GWS FILE NUMBER ASSIGNED: 8646B

APPLICATION ID NUMBER ASSIGNED: 5953

COMMENTS:

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

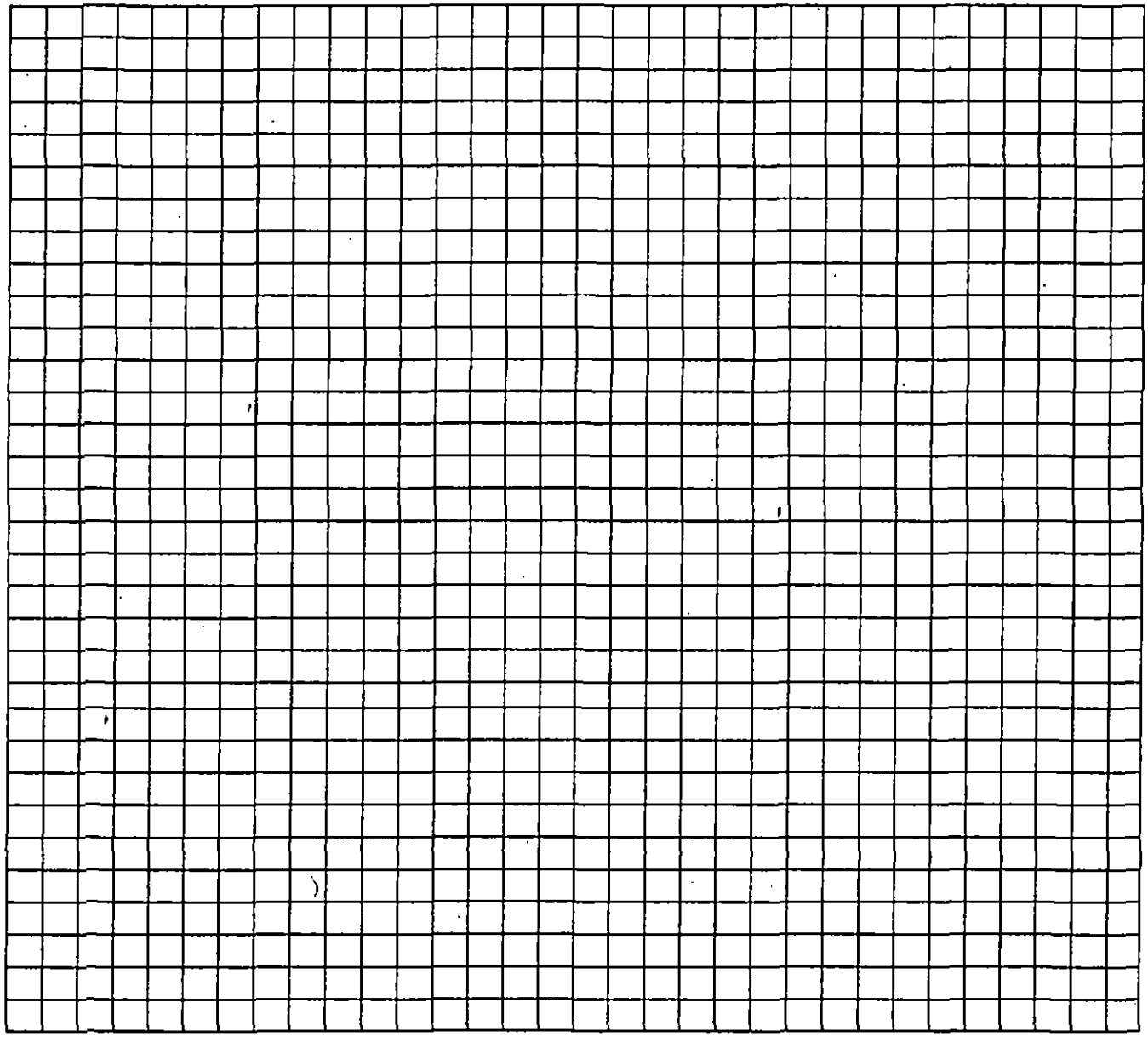
File #: _____

PROPOSED PLOT PLAN

A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

Street Address: _____ Tax Parcel #: _____

Subdivision Name: _____ Lot #: _____



_____ _____

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

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

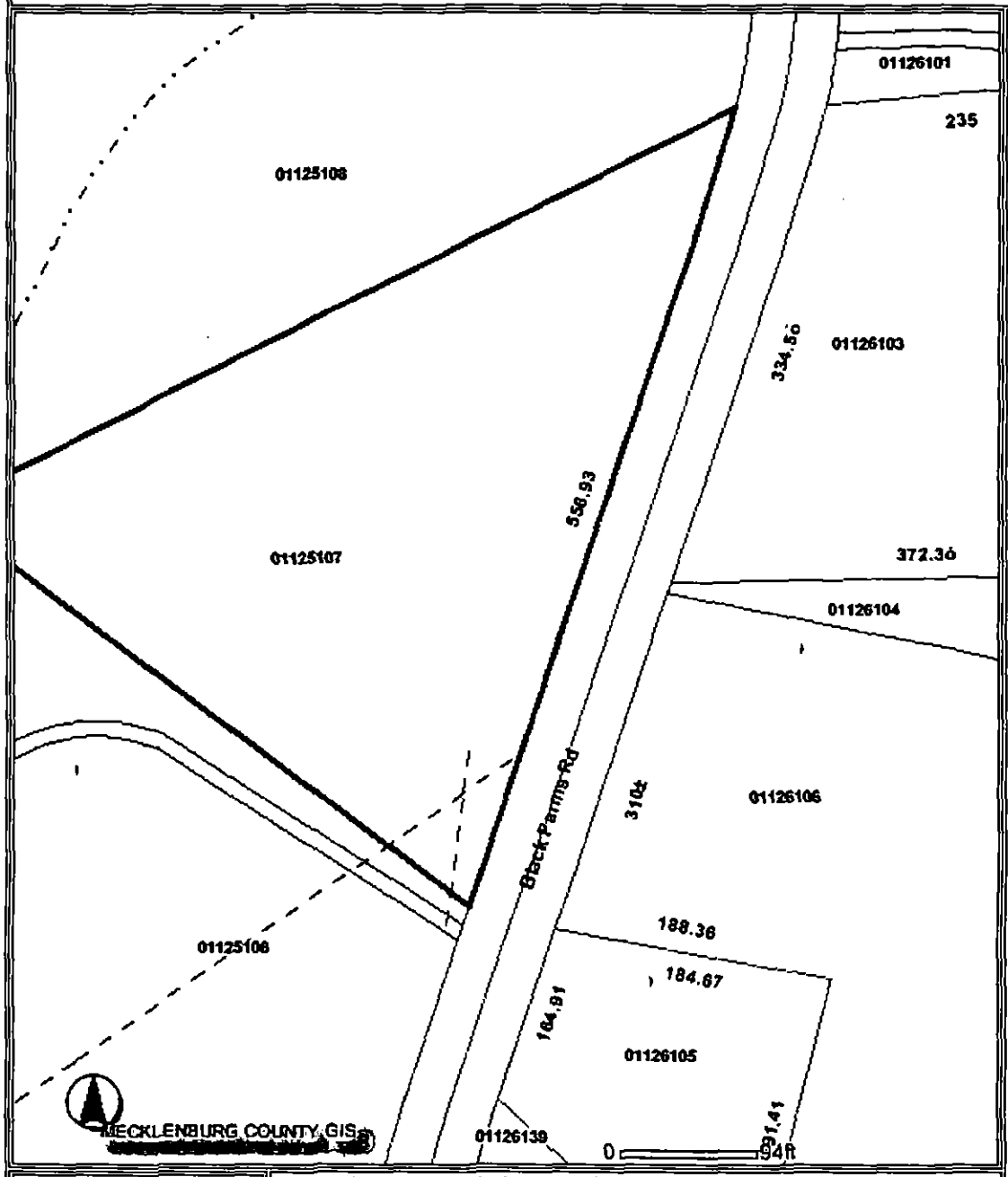
Revised on: 12/15/10

Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Wed Dec 19 14:46:09 EST 2012





This map 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 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.

Legend

- Selected Features
- Charlotte-Douglas Airport
- Open Space
- Airport Terminal
- Runway
- Parcel Number Labels
- TEXT Lot Dimensions
- County Boundary
- Utility ROW
- Railroad ROW
- Tax Parcel Easements

Miscellaneous Parcel Lines

- Original Lot Lines
- Private Roads
- Private Roads
- Pipelines
- Condo Outlines
- Condo Outlines
- Parcel Lines in other county
- Rights of Way in other county
- Air Rights Parcels

Streets

- Interstates
- Major Roads
- Minor Roads
- Streams
- Water Bodies

Jurisdictions

- Charlotte
- Cornelius
- Davidson
- Huntersville
- Matthews
- Mecklenburg
- Mint Hill
- Pineville
- Stallings
- Tax Parcels

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

Sheet: 1 of 2
Property ID: 011-251-07
Lot #: NA
File #: 8646B
AppID: 5953

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: John F. Black
Address: 15100 Black Farms Rd., Huntersville, NC 28078
Proposed Facility: 3BR Home
Design Flow (.1949): 360 GPD
Location of Site: 15101 Black Farms Rd., Huntersville, NC 28078
Water Supply: [ ] Public [X] Individual [X] Well [ ] Spring [ ] Other
Evaluation Method: [X] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [X] Sewage [ ] Industrial Process [ ] Mixed

Applicant: Steve Black
Date Evaluated: 12/27/2012 & 1/2/2013
Property Size: 2.9 ac approximately
Property Recorded: NA

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	General Comments	Profile Class & LTAR	Maximum Trench Bottom Depth for 3' Wide Conventional Trench
Boring #1	LS 3%	0 - 19	wfgr SCL	FR SEXP	2.5 Y 7/1 @ 31"	40	NA	PS		PS IV 0.225	18"
		19 - 34	wfsbk C	FI SEXP							
		34 - 40	mass C	VFI EXP							
Boring #2	LS 3%	0 - 8	wfgr SL	VFR SEXP	2.5 Y 7/1 @ 35"	42	NA	PS		PS IV 0.225	22"
		8 - 42	wfabk C	FI SEXP							
Boring #3	LS 10%	0 - 12	wfabk C	VFI EXP	2.5 Y 7/1 @ 12"	12	NA	NA		US	US
		12 - 24	mass CL SAP	FI SEXP							
Boring #4	LS 4%	0 - 12	wfgr SCL	VFR SEXP	2.5 Y 7/1 @ 18"	30	NA	PS		US	US
		12 - 24	wfabk C	FI SEXP							
		24 - 30	mass C	VFI EXP							
Boring #5	LS 4%	0 - 10	wfgr SCL	FR SEXP	2.5 Y 7/1 @ 31"	40	NA	PS		PS IV 0.225	18"
		10 - 31	wfsbk SCL	FR SEXP							
		31 - 40	wfabk C	FI SEXP							

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	IIIg	IIIb
Site LTAR	0.225	0.225

Other Factors (.1946):
Soil Evaluation By: Jacob Presley, LSS
Others Present:
Site Classification (.1948):PS
Site Evaluation By:Jeremy Michelone, REHS
Others Present: Jacob Presley, LSS , Jeremy M

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
CONTINUED

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	General Comments	Profile Class & LTAR	Maximum Trench Bottom Depth for 3' Wide Conventional Trench
Boring #6	LS 5%	0 - 12 12 - 25 25 - 40	wfgr SCL wfsbk C wfabk C	FR SEXP FR SEXP FI SEXP	2.5 Y 7/1 @ 30"	40	NA	PS		**PS IV 0.225**	**16"** Additional 2" of cover needed
Boring #7	LS 4%	0 - 10 10 - 28	wfgr SCL wfabk C	FR SEXP FI SEXP	2.5 Y 7/1 @ 22"	28	NA	NA		**US**	**US**
Boring #8	LS 15%	0 - 5 5 - 28	wfgr SCL wfabk C	FR SEXP FI SEXP	2.5 Y 7/1 @ 23"	28	NA	NA		**US**	**US**
Boring #9	LS 4%	0 - 13 13 - 40	wfgr SCL wfsbk/abk C	FR SEXP FI SEXP	2.5 Y 7/1 @ 35"	40	NA	PS		**PS IV 0.225**	**22"**
Boring #10	LS 3%	0 - 9 9 - 38 38 - 48	wfgr SCL wfabk C wfabk CL	FR SEXP FI SEXP FR SEXP	>48"	48	NA	PS	Saprolite inclusions from 20 - 48"	**PS IV 0.25**	**35"**
Boring #11	LS 4%	0 - 12 12 - 18 18 - 44	wfgr SL wfsbk SCL wfabk/sbk SC	VFR SEXP FR SEXP FI SEXP	2.5 Y 7/1 @ 34"	44	NA	PS		**PS IV 0.225**	**21"**
Boring #12	LS 3%	0 - 8 8 - 29 29 - 42 42 - 48	wfgr SCL wfsbk/abk C wfsbk CL mass L Sap	FR SEXP FI SEXP FR SEXP	>48"	42	NA	PS	Saprolite inclusions from 18 - 42"	**PS IV 0.25**	**29"**

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
CONTINUED

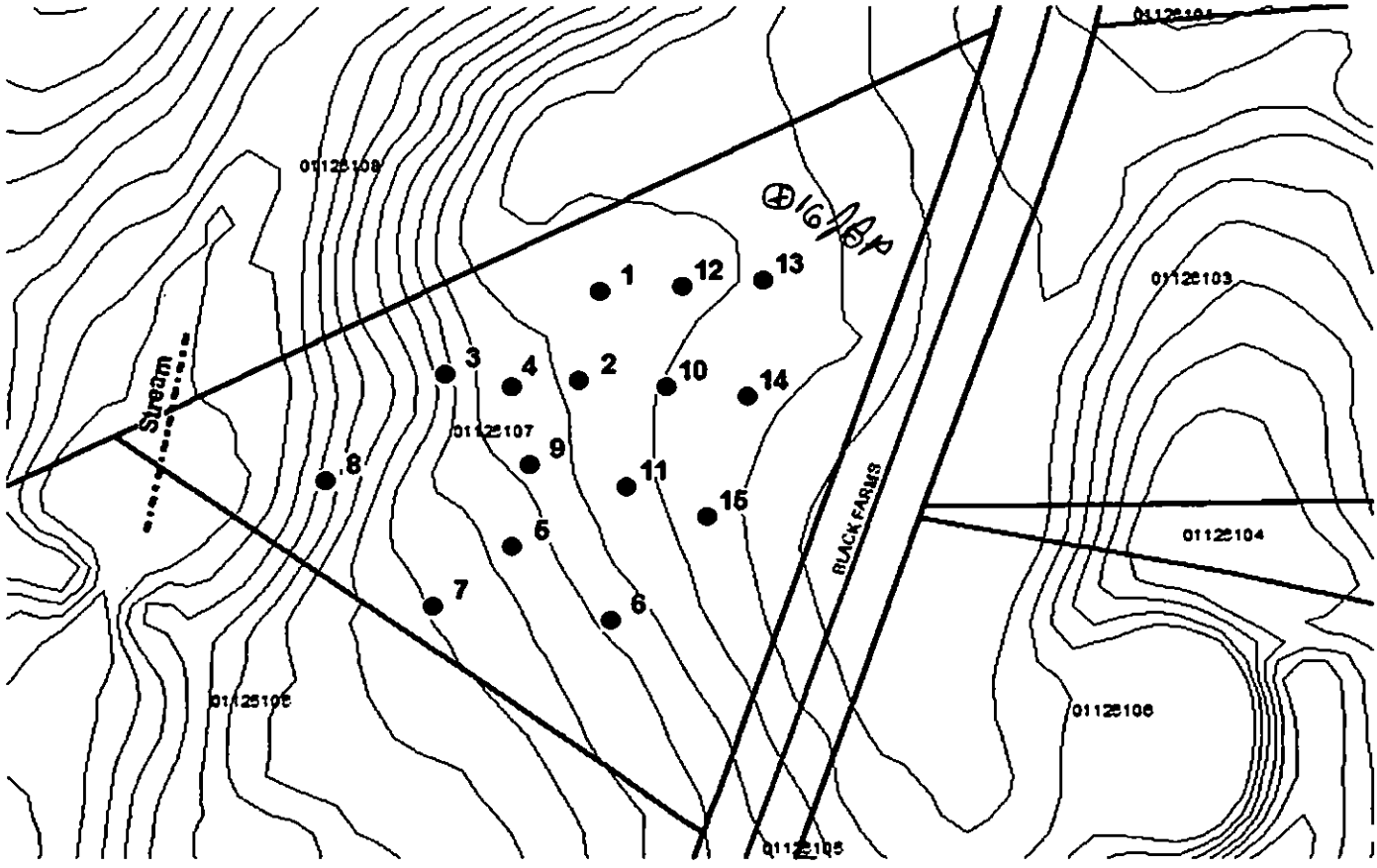
PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	b PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	General Comments	Profile Class & LTAR	Maximum Trench Bottom Depth for 3' Wide Conventional Trench
Boring #13	LS 3%	0 - 9	wfgr SCL	FR SEXP	>48"	37	NA	PS	Saprolite inclusions from 18 - 37"	PS IV 0.25	24"
		9 - 30	wfsbk/abk C	FI SEXP							
		30 - 37	wfsbk CL	FR SEXP							
		37 - 48	mass CL Sap	FR SEXP							
Boring #14	LS 4%	0 - 13	wfgr SCL	FR SEXP	>48"	48	NA	PS	Saprolite inclusions from 35 - 48"	PS IV .225	35"
		13 - 35	wfabk C	FI SEXP							
		35 - 48	wfabk CL	FR SEXP							
Boring #15	LS 5%	0 - 6	wfgr SL	FR SEXP	2.5 Y 7/1 @ 36"	42	NA	PS		PS IV 0.225	22"
		6 - 20	wfsbk SCL	FR SEXP							
		20 - 42	wfabk C	FI SEXP							
Boring #16	LS 3%	0 - 10	wfgr SCL	FR SEXP	2.5 Y 7/1 @ 44"	39	NA	PS	Saprolite inclusions from 18 - 44"	PS IV 0.225	31"
		10 - 26	wfsbk/abk C	FI SEXP							
		26 - 44	wfsbk CL	FR SEXP							

COMMENTS:

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		mass-Massive
LS-Linear Slope				cr-Crumb
FS-Foot Slope	II	SL-Sandy Loam	0.8 - 0.6	gr-Granular
NS-Nose Slope		L-Loam		sbk-Subangular Blocky
HS-Head Slope				abk-Angular Blocky
CC-Concave Slope	III	Si-Silt	0.6 - 0.3	pl-Platy
CV-Convex Slope		SiCL-Silty Clay Loam		pr-Prismatic
T-Terrace				
FP-Flood Plain		CL-Clay Loam		**Structure Prefixes**
D-Drainage Way		SCL-Sandy Clay Loam		w-weak
		SiL-Silt Loam		m-moderate
				s-strong
				f-fine
	IV	SC-Sandy Clay	0.4 - 0.1	m-medium
		SiC-Silty Clay		c-coarse
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	SS-Slightly Sticky	SEXP-Slightly Expansive
FR-Friable	S-Sticky	EXP-Expansive
FI-Firm	VS-Very Sticky	
VFI-Very Firm	NP-Non-Plastic	**Classification**
EFI-Extremely Firm	SP-Slightly Plastic	US-Unsuitable
	P-Plastic	PS-Provisionally Suitable
	VP-Very Plastic	S-Suitable
		NA-Not Applicable

Sketch of Soil Evaluation Locations



FEE: 200.00
DATE:6/12/2014

MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES

FILE NUMBER: 8646B

PERMIT NUMBER: 30005953

PARCEL NUMBER: 01126103

JOB LOCATION INFORMATION

ADDRESS: 15100 BLACK FARMS RD

CITY: HUNTERSVILLE **STATE: NC** **ZIP:** 28078

ISSUED TO: John F Black

CONSTRUCTION AUTHORIZATION ISSUANCE DATE: 6/9/2014

CONSTRUCTION AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 30005953, 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 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.

***CONSTRUCTION AUTHORIZATION EXPIRATION DATE:** 6/9/2019

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 #: 30005953 GWS File #: 8646B Tax Parcel #: 011-251-07

- 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):** 6/9/2019

Type of Installation: Residential - New System Lot Number: 0

Structure Type: MODULAR HOME Size (ft^2): 1977 # Bedrooms: 3 # Occupants: 2

Building Foundation: Crawl Space Water Supply: Private Well

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

Initial System Specifications:

Design Flow (gpd):	360	LTAR (gpd/ft^2):	0.225	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	N/A
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1200	Total Trench Length (ft):	400
Maximum Trench Depth (in):	24	Depth of Media (in):	12	Distribution Device:	Distribution Box		

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

Repair System Specifications:

Design Flow (gpd):	360	LTAR (gpd/ft^2):	0.225	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: Jeremy Michelone Owner/Legal Agent: David Strother

Signature: Jeremy Michelone REHS Signature: David Strother

*Print Name

Date Issued: 6/9/2014

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 #: 30005953 GWS File #: 8646B

IV. Permit Conditions/Comments:

- All drainage improvements (swales, interceptor drains, etc.) noted on the plot plan must be inspected and approved prior to issuance of an Operation Permit.
- This type of repair system requires the installation of a pump tank and all associated components. This type of system will require routine inspections by our office. The system owner is responsible for all fees associated with these inspections.
- All components of the septic system must be installed in accordance with the required setbacks listed on the corresponding plot plan.
- All components of the septic system must be located at least 100 ft. (50 ft. minimum) from all private wells.
- The invert of the sewer pipe exiting the structrue should be kept as high as possible in order to achieve gravity flow to the drain field. A dosing tank will be required if gravity flow to the drain field can not be achieved.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.

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DENR Authorized Agent: Jeremy Michelone Owner/Legal Agent: David Strother
Print Name

Signature: Jeremy Mich, REHS Signature: David Strother

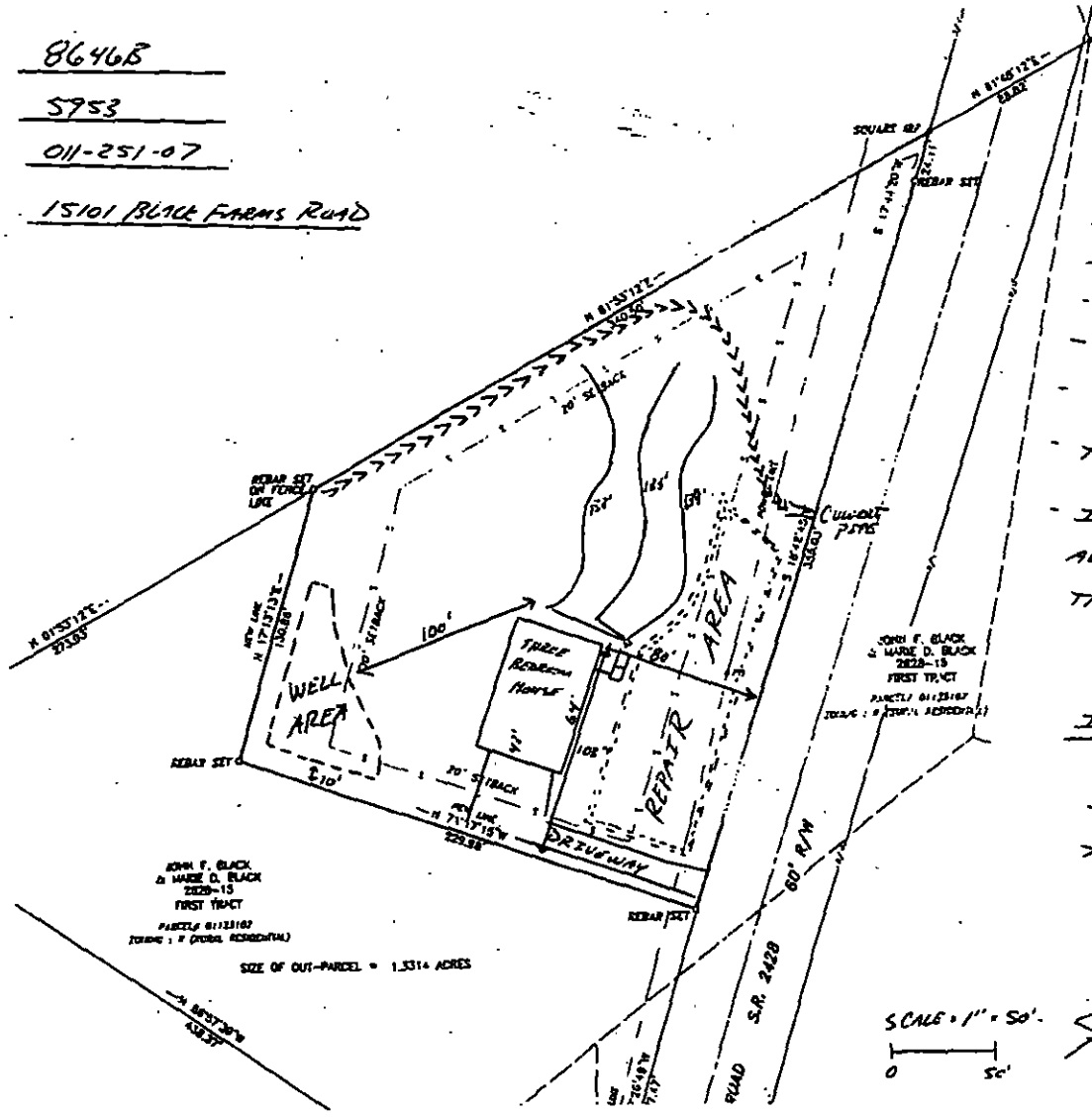
Date Issued: 6/9/2014

8646B

5953

011-251-07

15101 BLACK FARMS ROAD



COMMENTS:

- 3 BEDROOM HOUSE
- 1500 SEPTIC TANK
- 0.225 LTAR
- INSTALL 3 LINES X 135' X 3' (405 TLF)
- TYPE IIIg 25% RED. SYSTEM
- 24" MAX TRENCH DEPTH
- TYPE IIIb PUMP TO 25% RED. REPAIR
- INSTALL A SWALE TO CARRY ALL STORM WATER AWAY FROM THE SEPTIC SYSTEM AS SHOWN ON THE PLOT PLAN

INSTALL THE WELL:

- >10' FROM PROPERTY LINES
- >100' FROM SEPTIC SYSTEM
- >25' FROM BUILDING FOUNDATIONS

Jimmy Mike, REHS 6/9/17

Signature

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 #: **30005953** GWS File #: **8646B** Tax Parcel #: **011-251-07**

- 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.
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Maximum Trench Depth (in):	24	Depth of Media (in):	12	Distribution Device:	Distribution Box		

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

Repair System Specifications:

Design Flow (gpd):	360	LTAR (gpd/ft^2):	0.225	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
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(Please See the Following Page for Permit Conditions.)

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- This IMPROVEMENT PERMIT is transferable.

DENR Authorized Agent: Jeremy Michelone Owner/Legal Agent: _____
Print Name

Signature: Jeremy Michelone REHS Signature: _____

Date Issued: 6/9/2014

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 #: **30005953** GWS File #: **8646B**

IV. Permit Conditions/Comments:

- All drainage improvements (swales, interceptor drains, etc.) noted on the plot plan must be inspected and approved prior to issuance of an Operation Permit.
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- All components of the septic system must be located at least 100 ft. (50 ft. minimum) from all private wells.
- The invert of the sewer pipe exiting the structrue should be kept as high as possible in order to achieve gravity flow to the drain field. A dosing tank will be required if gravity flow to the drain field can not be achieved.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.

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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- 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: Jeremy Michelone

Signature: Jeremy Mic, REHS

Date Issued: 6/9/2014

Owner/Legal Agent: _____
Print Name

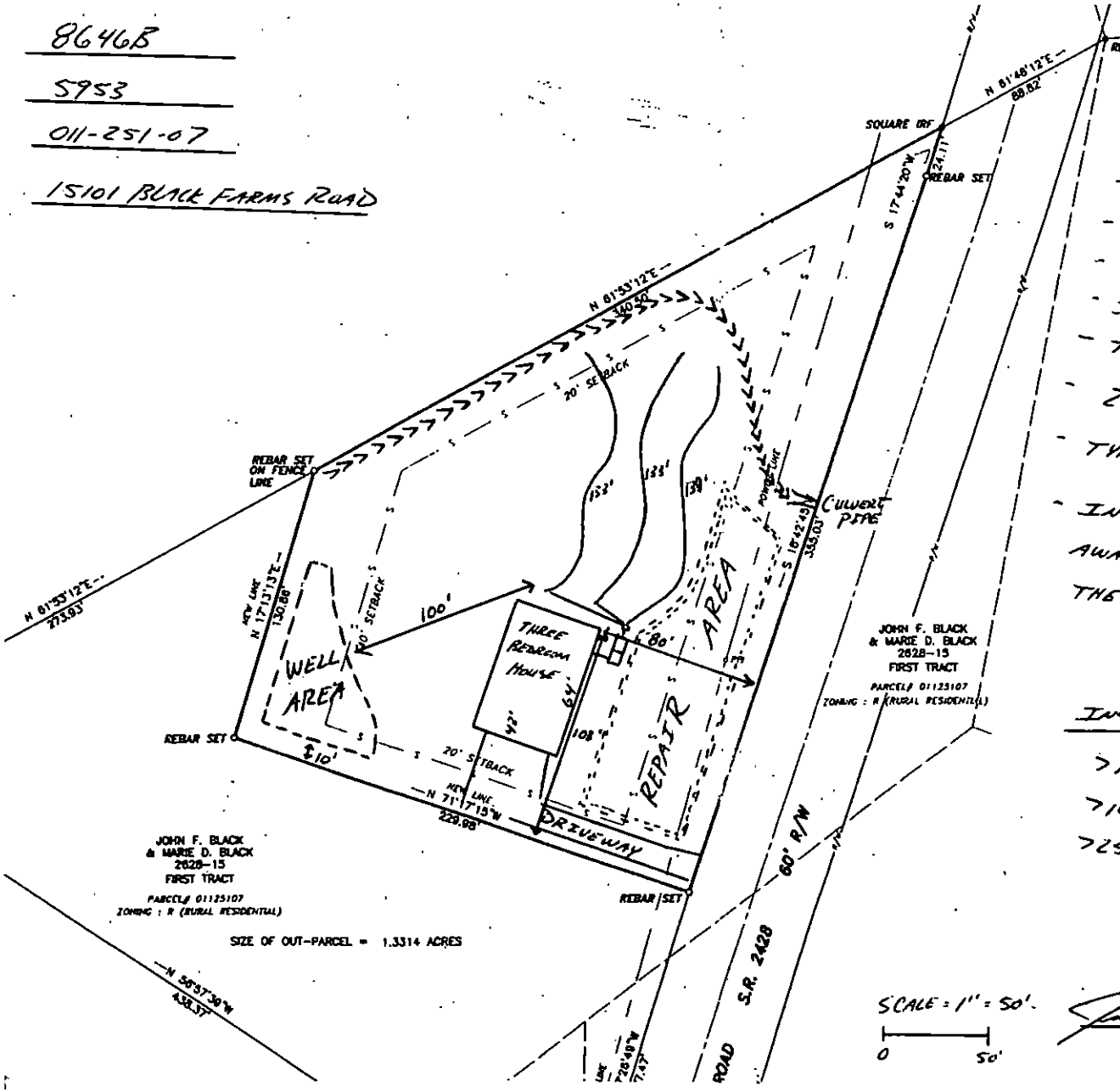
Signature: _____

8646B

5953

011-251-07

15101 BLACK FARMS ROAD



SCALE : 1" = 50'

0 50'

COMMENTS:

- 3 BEDROOM HOUSE
- 1500 SEPTIC TANK
- 0.225 LTAR
- INSTALL 3 LINES x 133' x 3' (400 TLF)
- TYPE IIIg 25% RED. SYSTEM
- 24" MAX TRENCH DEPTH
- TYPE IIIb PUMP TO 25% RED. REPAIR
- INSTALL A SWALE TO CARRY ALL STORM WATER AWAY FROM THE SEPTIC SYSTEM AS SHOWN ON THE PLOT PLAN

INSTALL THE WELL:

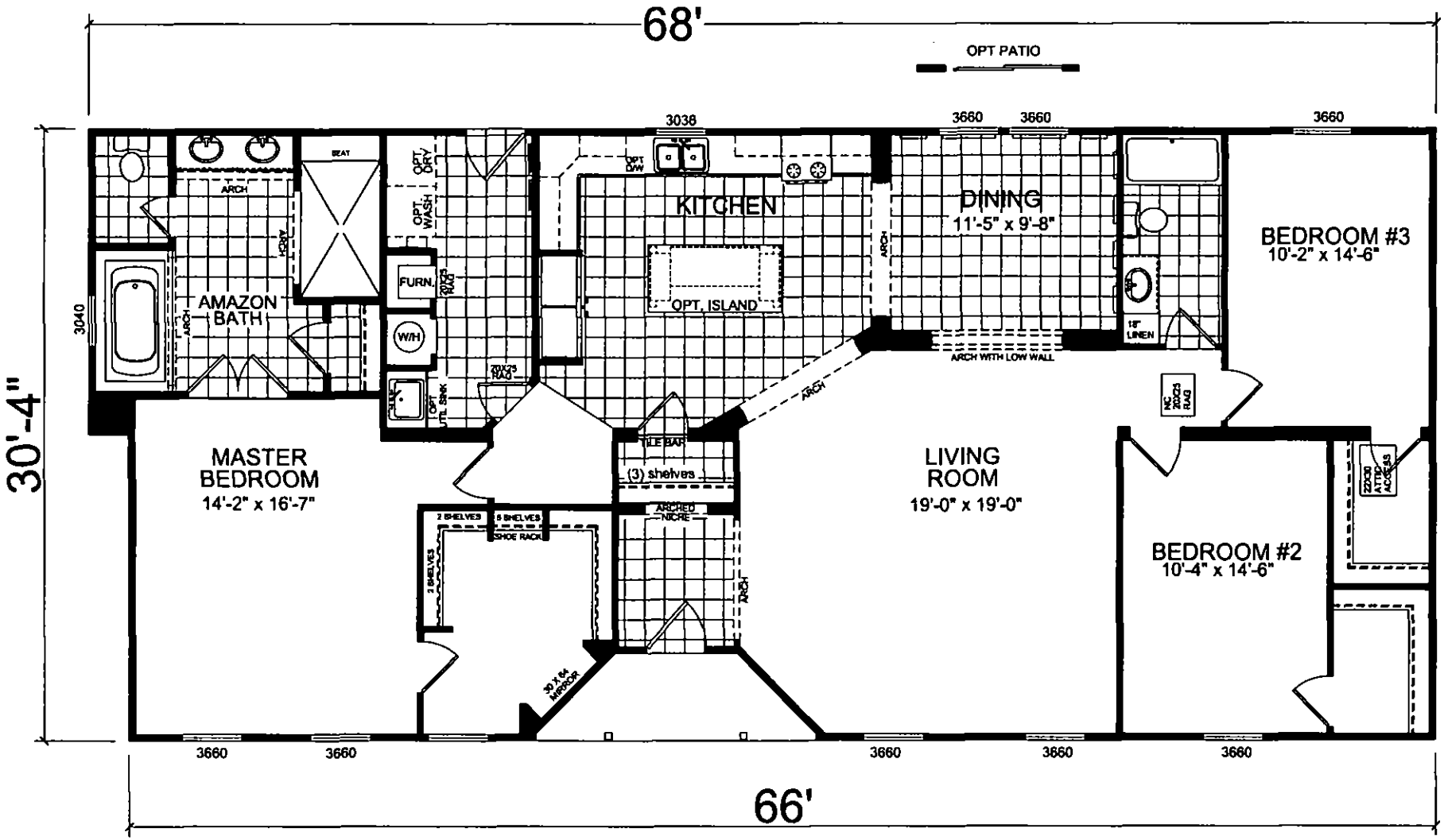
- >10' FROM PROPERTY LINES
- >100' FROM SEPTIC SYSTEM
- >25' FROM BUILDING FOUNDATIONS

Jimmy Wike, REHS 6/9/17

X _____
Signature

MODEL 23-3266-01

3 BDRM, 2 BATH
ACTUAL SIZE: 68'-0"X 30'-4"
TOTAL AREA: 1986 SQ.FT. EXCLUDING PORCH



MATERIALS AND SPECIFICATIONS SUBJECT TO CHANGE WITHOUT NOTICE FOR PRODUCTION AND CODE PURPOSES. ALL DIMENSIONS ARE NOMINAL AND APPROXIMATE. SQUARE FOOTAGE IS MEASURED FROM EXTERIOR WALL TO EXTERIOR WALL AND IS A APPROXIMATE FIGURE. THIS DRAWING IS A RENDERING AND IS MEANT FOR SALE PURPOSES ONLY.

CHAMPION

PROJECT

TITLE: LITERATURE PLAN

MODEL: 23-3266-01

DATE: 08-28-12

SCALE:

DRAWN BY: JP1

REVISED:

REVISIONS

SHEET NO: L-101

PAGE:

4 BEDROOM
711 Conv.
583 25% Red.

SOIL EVALUATION LOCATIONS FOR PARCEL #: 011-251-07 WASPS APPLICATION #: 5953

3 BEDROOM
537 Conv.
400 25% Red.


N3
12
24"
15
16"
24"
5x
5"
2"
11
24"
5x
5"
24"
24"
24

8646B

MECKLENBURG COUNTY
HEALTH DEPARTMENT

App #5953

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

1. **SEPTIC / TYPE APPLICATION:** ○ N/A ● NEW SYSTEM ○ ALTERATION ○ REPAIR ○ MODIFIED PLOT PLAN

2. **WELL / TYPE APPLICATION:** ○ N/A ● NEW WELL ○ MAJOR REPAIR ○ ABANDONMENT

3. **JOB LOCATION INFORMATION:**
TAX PARCEL NUMBER: 011-254-07 12
STREET ADDRESS: 15001 Black Farms Road
CITY: Huntersville
STATE: NC ZIP: 28078
SUBDIVISION NAME: _____
LOT #: _____ LOT SIZE (acres): _____
TOWNSHIP:
○ MECKLENBURG ○ CORNELIUS ○ HUNTERSVILLE
○ DAVIDSON ○ CHARLOTTE ○ PINEVILLE
○ MATTHEWS ○ MINT HILL

4. **BUILDING INFORMATION:**
BUILDING TYPE:
○ SINGLE MOBILE HOME ● MODULAR HOME
○ DOUBLE WIDE ○ MULTIPLE FAMILY
○ HOUSE ○ OTHER _____
HEATED SQUARE FOOTAGE: 1977
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: NONE NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: NONE

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: JOHN F. Black
ADDRESS: 15100 Black Farms Road
CITY: Huntersville
STATE: NC ZIP: 28078
WORK PHONE: 704-892-1320
MOBILE PHONE: N/A
FAX: N/A
E-MAIL: N/A

13. **OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:**
NAME: Steve Black
ADDRESS: 7931 Mariner's Pointe Circle
CITY: Denver
STATE: NC ZIP: 28037
WORK PHONE: 704-596-7260
MOBILE PHONE: 704-577-1996
FAX: N/A
E-MAIL: jsblack55@att.net

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. JSB (Initial here for septic system applications)

15. WELL PERMIT APPLICATION:

If the information in this application is falsified, changed, or the site is altered, then the Well Permit shall become invalid. I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed. The permit is valid for a period of twelve (12) months from the date of issuance. JSB (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.

John Stevenson Black — 12/19/2012

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

---

OFFICE USE ONLY

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

SEPTIC APPLICATION FEE RECEIVED: $ 250 DATE FEE RECEIVED: 12/19/12

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

APPLICATION PROCESSED BY: lwr

GWS FILE NUMBER ASSIGNED: 86466

APPLICATION ID NUMBER ASSIGNED: 5953

COMMENTS:

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

Revised on: 12/15/10

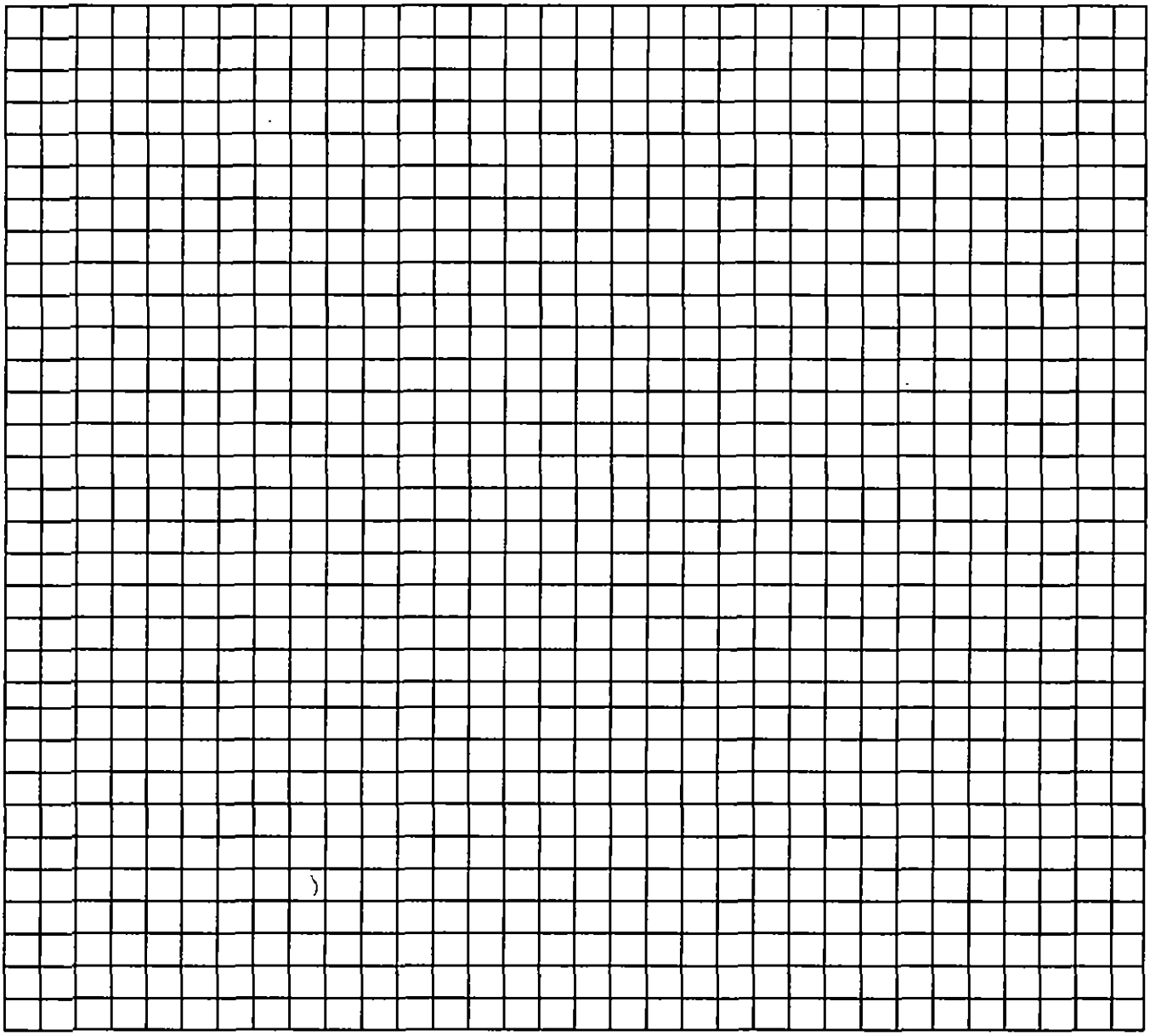
File #: _____

PROPOSED PLOT PLAN

A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

Street Address: _____ Tax Parcel #: _____

Subdivision Name: _____ Lot #: _____



_____ _____

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

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

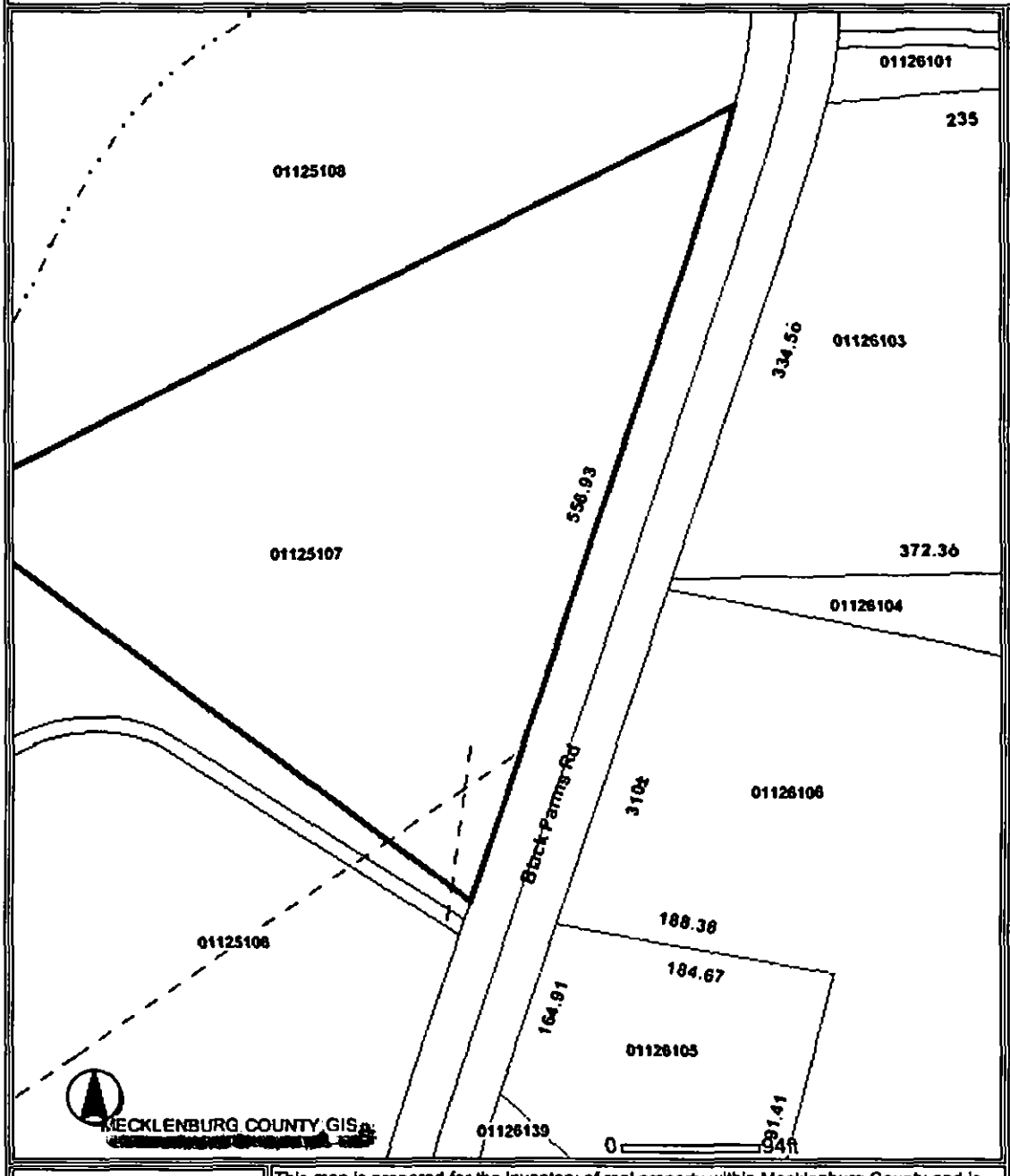
Revised on: 12/15/10

Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Wed Dec 19 14:46:09 EST 2012





This map 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 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.

Legend

- Selected Features
- Charlotte-Douglas Airport
- Open Space
- Airport Terminal
- Runway
- Parcel Number Labels
- TEXT Lot Dimensions
- County Boundary
- Utility ROW
- Railroad ROW
- Tax Parcel Easements

Miscellaneous Parcel Lines

- Original Lot Lines
- Private Roads
- Private Roads
- Pipelines
- Condo Outlines
- Condo Outlines
- Parcel Lines in other county
- Rights of Way in other county
- Air Rights Parcels

Streets

- Interstates
- Major Roads
- Minor Roads
- Streams
- Water Bodies

Jurisdictions

- Charlotte
- Cornelius
- Davidson
- Huntersville
- Matthews
- Mecklenburg
- Mint Hill
- Pineville
- Stallings
- Tax Parcels