

5505 BRICKSTONE DR

10931218

6/27/08

marliwr

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: 12084 DATE: 5-14-04

TC: 109-312-18 ☒ L ☐ CRT

SERIAL 19335

Hold not releasing for final release 5/19/04 JC

Name of Owner ALEX DRAGA Juris.:

Address of Property 5505 BRICKSTONE

Inspection Data:

Tank Material 1500 ST

Total Length of Drainfield 300

Number of Lines 5 @ VARIABLE LENGTHS

Cover Depth 12"

Water Supply Source WELL, NOT INSTALLED

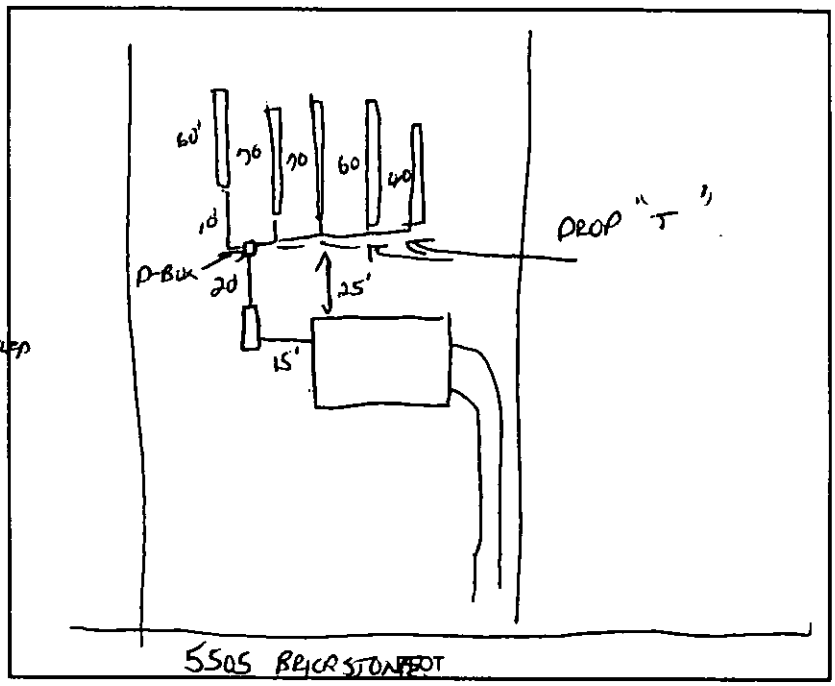
Distance to Water Source NOT INSTALLED

Excavation Inspected 5-14-04

Tank(s) Inspected 5-15-04

Wash Line Inspected

High Water Alarm Inspected



Design 1500 ST 1200 SFT INNOVATIVE, EZ F CTR# BOB McCARVER

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: TYPE FF-6" EZ" FLOW,

DROP "T"'S USED FOR SERIAL DISTRIBUTION,

Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

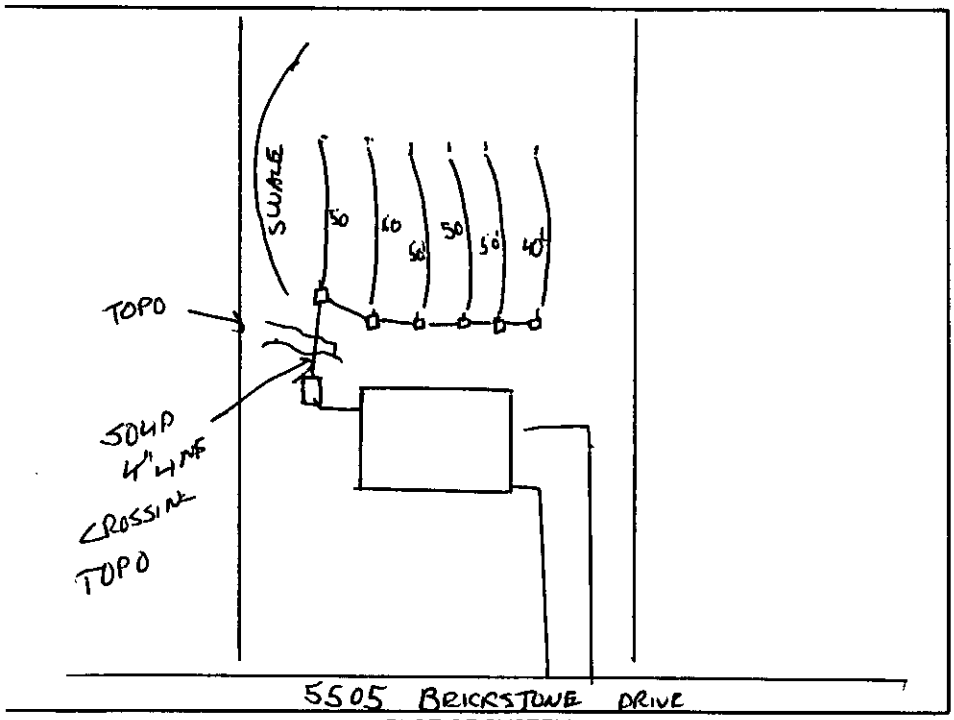
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 12084 DATE: 4-29-04

TC: 1093218 ☐ L

SERIAL 19620

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 _____. All work shall be completed on or before _____, after which date this permit shall be null and void. The system shall meet all of the construction requirements of I5A 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank — gallons

Tank Construction PCC

Trench Depth 30"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous _____

Total Line Length 300' feet

Number of Lines 6'

Depth of Stone NA inches

Distance from House 315' 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 ALEX ORAGA

LOCATION OF PROPERTY 5505 BRICKSTONE DRIVE,

Comments: (1) CONTRACTOR TO USE TYPE III-G INNOVATIVE, (2) USE SERIAL DISTRIBUTION; DROP BOXES DUE TO DIFFERENT LINE LENGTHS AND GRAD, (3) AREAS OF BAD TOPO TO BE COMPACTED & FILLED (4) NO PUMP TANK IS NECESSARY

Environmental Health Specialist

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

Land

FEE: 300- AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION +CS X
DATE: 6/3/02 VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

DATE: 2-25-02 PERMIT NO: 12084
PARCEL NO: 109-312-15

JOB LOCATION ADDRESS: 5505 BRICKSTONE DRIVE
PROPERTY OWNER:
BUILDING CONTRACTOR:
SUBDIVISION NAME:
AUTHORIZATION ISSUED BY: [signature] DATE: 2-25-02
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. _____, 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:
(1) REQUIRES AGREEMENT FORMS
(2) REQUIRES INSPECTION ONCE EVERY 5 YEARS
(3) REQUIRES PRESSURE MANIFOLD.
(4) INSTALL SWELL AND FRENCH DRAIN

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.

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE [signature] DATE 02/25/02

CONDITIONS OF IMPROVEMENT PERMIT

Permit Number 12084 Tax Number: 104 31218

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	X Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1	
3 Long-term acceptance rate	360 Max gallons/day wastewater flow	1200 Absorption Area (sq ft)	9' Trench spacing (min. on centers)	
NO Serviced by private well	1500 Gallon septic tank	300 Total trench length (ft)	18' Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)	
3 Bedrooms in residence	1000 Gallon pump tank	N/A Depth of stone		
Any surface waters present:	Type:	Minimum separation distance:		
Site modifications required:				
Additional Conditions: (1) SEE PLAN - (2) THIS IS A TYPE III-B;G THAT IS REQUIRED BY STATE LAW TO BE INSPECTED BY THE LOCAL HEALTH DEPT. ONCE EVERY 5 YEARS WITH THE HOME OWNER RESPONSIBLE FOR ANY FEES; BE AS DETERMINED BY THE BOARD OF COMMISSIONERS.				
Repair Area System Type NOT REQUIRED. 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	
___ Absorption Area (Sq ft) ___ Total Trench Length (Ft)	___ Depth of Stone Trench	___ Trench spacing (min. on centers)	___ 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 th 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 effec 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 Departmen
- This Improvement permit is transferable.

DEHNR Authorized Agent — Date 2-25-02

Owner/Agent Signature — Date 02/25/02

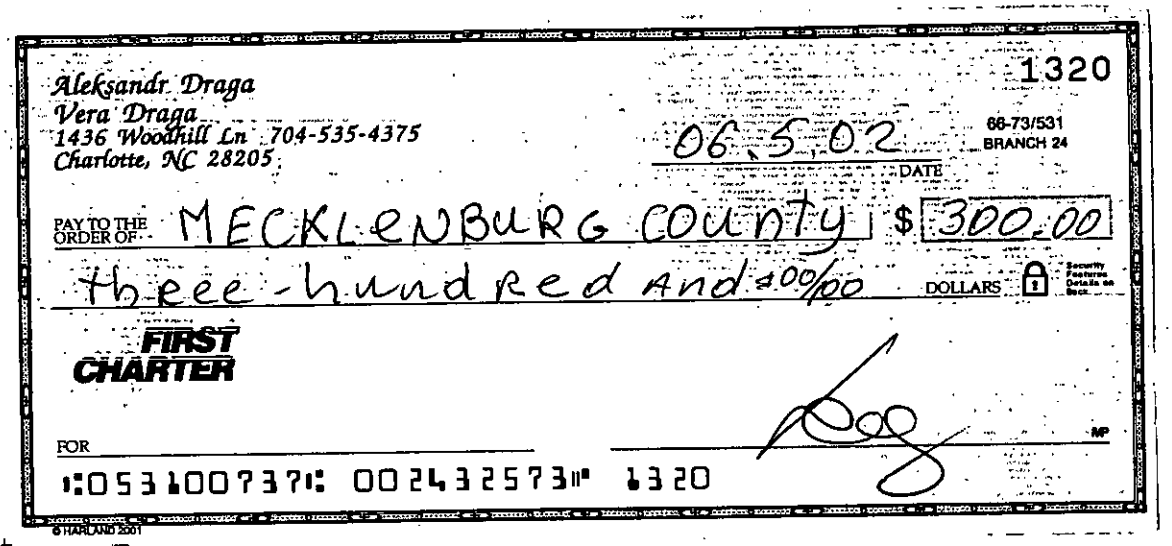
MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR.
SUITE 211
700 N. TRYON ST.
CHARLOTTE, N.C. 28202.
(704) 336-5102

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

File 12084

Mecklenburg County
Health Department

June 5th 2002



Ruby Foster

I will mail the receipt to the address listed on your check!

PEOPLE • PRIDE • PROGRESS

Environmental Health Division

700 North Tryon Street • Suite 211 • Charlotte, North Carolina 28202-2236

FOR REGISTRATION JUDITH A. GIBSON
REGISTER OF DEEDS
MECKLENBURG COUNTY, NC
2002 FEB 25 01:28 PM
BOOK:13293 PAGE:599-602 FEE:$20.00
INSTRUMENT # 2002036954

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 # 12084
PARCEL # 109-312-18

The undersigned, Draga Aleksander, owner of property located at 5505 Brickstone Drive, (the "site") and described in an instrument recorded in Book _____ at Page _____, 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: ALEX DRAGA
Mail after recording to: ALEKSANDR DRAGA
1436 Woodhill Dr, Charlotte, NC 28205-6525

S&EC

Soil & Environmental Consultants, PA

PMB 291, 3020-I Prosperity Church Road · Charlotte, North Carolina 28269-7197 · Phone: (704) 720-9405 · Fax: (704) 720-9406
www.SandEC.com

2-18-02 APPROVED BY Drew Udell
WITH 2-16-02 SE PLAN FOR PRESSURE MANIFOLD

FACSIMILE SHEET
FAX NO. (704) 720-9406

DATE: 2/12/02 Project Number: 5-1082

TO: NAME: BILL MARLIN CC: _____

COMPANY: MECK CO. ENV HEALTH _____

FAX NUMBER: (704)336-6894 _____

FROM: WENDELL OVERBY SUBJECT: BRICKSTONE LOT

The following items are being faxed. Number of pages including transmittal sheet: 5

___ For Your Comments/Approval
X Per Our Conversation
___ Please Advise
___ Would Like To Discuss

X For Your Information
___ Per Your Request
___ Please Call
___ Please Handle

HARD COPY SENT:
___ US Regular Mail
___ Overnight

___ Hand Delivery
X No Hard Copy Sent

REMARKS: BILL / DREW:

ATTACHED FIND INFO ON BRICKSTONE LAYOUT. LET ME KNOW IF YOU WANT TO MEET OR IF YOU NEED ANY MORE INFO.

WENDELL

IF YOU HAVE ANY QUESTIONS OR PROBLEMS WITH THIS TRANSMISSION, PLEASE CONTACT _____ AT (704) 720-9405.

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www.SandEC.com

February 12, 2002
Project #5-1082

Alex Draga
1436 Woodhill Lane
Charlotte, NC 28205

Re: Septic System Layout at 5505 Brickstone Road – Mecklenburg County, NC

Dear Mr. Draga:

This letter details the initial findings of Soil & Environmental Consultants, PA (S&EC) regarding on-site wastewater suitability on the above referenced property.

INITIAL FIELDWORK

On February 11, 2002 S&EC performed a septic system layout on the aforementioned property. The soils were evaluated during moist soil conditions. The soil/site evaluation criteria used was that contained in 15 A NCAC 18A .1900 "Laws and Rules for Sewage Treatment and Disposal Systems".

FINDINGS

This site is located near Mint Hill in eastern Mecklenburg County. S&EC evaluated soil areas toward the back of the lot. Soil areas at the front of the lot (near Brickstone Road) were unsuitable due to unacceptable topography. The area evaluated by S&EC contained 30 inches of usable soil material. A brief description of the usable soils finds red (2.5YR 4/8), friable, non-expansive clay subsoils with subangular blocky structure. The usable area contained soil derived from weathering of acid crystalline parent materials. In all, 4 borings were made in the evaluated area. The minimum usable soil depth was 30 inches to usable saprolite. Based on the slope, S&EC recommends an at-grade conventional septic system for the lot (bring in minimum 6" soil cap).

LAYOUT

To determine the amount of drainline (and bedrooms) that could be supported in the usable soil area, S&EC performed a septic system layout. Based on information provided by the client the lot was recorded prior to Jan. 1, 1983 and therefore does not require 100% repair area. S&EC was able to layout 302 linear feet of line within the usable soil area (see attached information). Using a long term acceptance rate (LTAR) of 0.3 gpd/ft^2, 300 linear feet of drain line would be required to support a 3 bedroom innovative initial system (EZ Flow or chamber).

SITE PLAN/SEPTIC DESIGN

Attached with this letter please find a proposed site plan/septic design for a 3-bedroom at-grade innovative septic system. The client proposes a 32'x30' house with a full basement. Placement

of the house and driveway are approximate on the attached map. To keep off-site water away from the proposed drainfield, S&EC recommends construction of a surface swale or French Drain above the field (see map).

Soil & Environmental Consultants, PA is pleased to be of service in this matter and we look forward to assisting in any site analysis needs you may have in the future. Please feel free to call with any questions or comments.

Sincerely,



Wendell Overby
NC Licensed Soil Scientist

Encl: Soil/Site Map

Cc: Mecklenburg County Health Dept.
Attn: Drew Walker
Via: Facsimile

Alex Draga\5505 Brickstone

JOB #: 5-1082 February-02

LAYOUT FOR 3 BEDROOM INNOVATIVE SYSTEM

LINE #	FLAG COLOR	BS	HI	FS	ELEV	LINE LENGTH
TBM		7.5	107.5			
INSTR. 1						
1	RED			2.20	105.30	47
2	ORANGE			3.40	104.10	65
3	YELLOW			5.00	102.50	50
4	BLUE			6.50	101.00	45
5	PINK			8.40	99.10	45
6	RED	3.3		9.80	97.70	50
				TOTAL		302

	NEEDED LINE LENGTH	LTAR GPD/FT²	SYSTEM TYPE	PROPOSED LTAR GPD/FT²	INNOVATIVE SYSTEM	DISTRIBUTION
* System	300	0.30	ULTRASH	0.30	EZ FLOW	DROP BOX'

Notes:

**NO REPAIR AREA REQUIRED

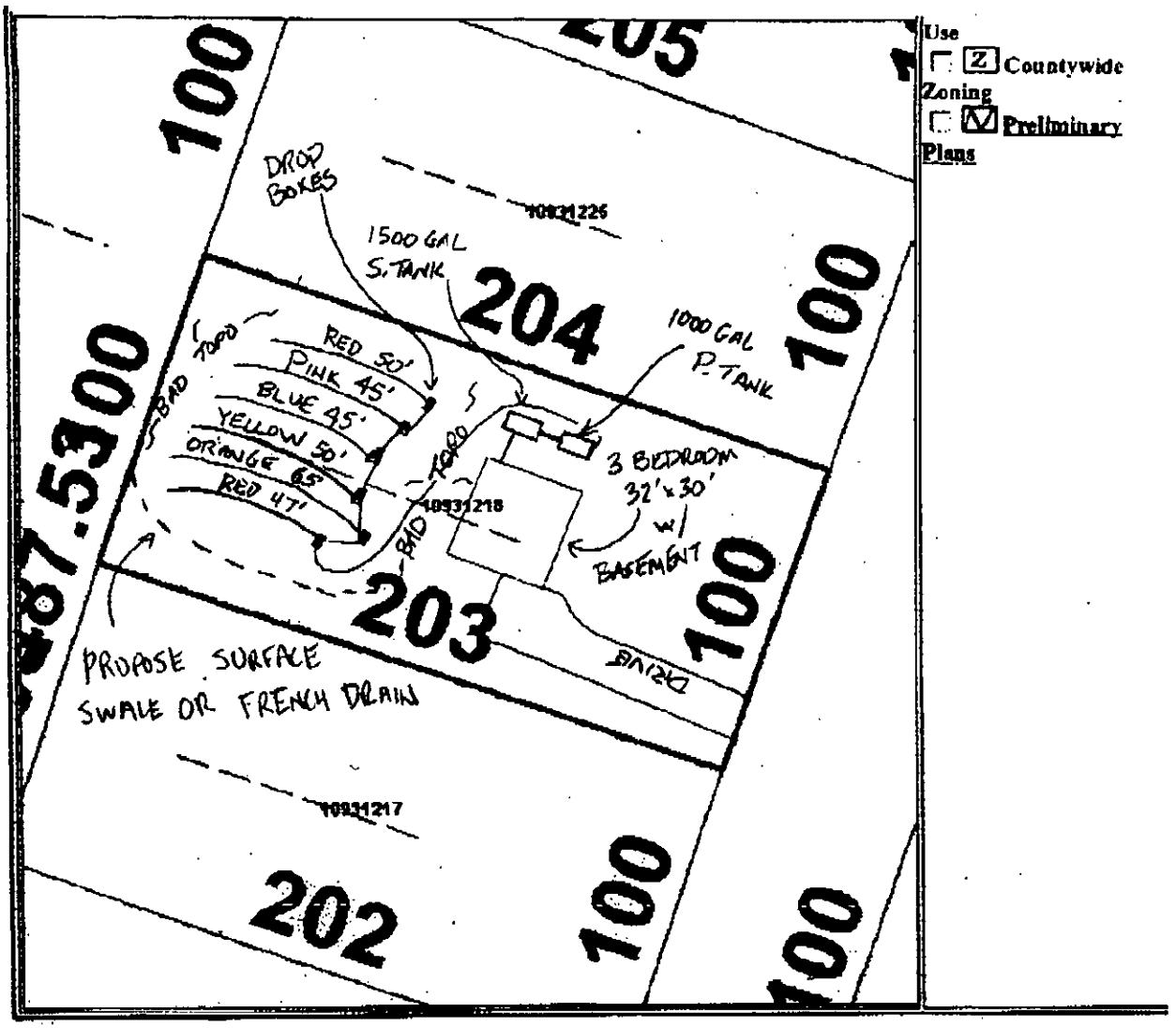
**TBM is top of EIP

**All measures in feet

**Nitrification lines are demonstrated on contour via colored pin flags

** House and driveway location illustrated on the attached map

**BS and FS indicate rod readings



Septic System Layout Sketch Map
Alex Draga / 5505 Brickstone Road
Mecklenburg Co., NC
S&EC #5-1082
February 2002

Soil within the layout area 30 inches or greater in depth with potential for use with at-grade conventional septic systems.

LICENSED SOIL SCIENTIST
JAMES WENDELL OWERBY
1218
STATE OF NORTH CAROLINA

*not a survey
*base map taken from Meck. Co. website

S&EC

Soil & Environmental Consultants, PA

PMB 291, 3020-I Prosperity Church Road • Charlotte, North Carolina 28269-7197 • Phone: (704) 720-9405 • Fax: (704) 720-9406
www.SandEC.com

FACSIMILE SHEET
FAX NO. (704) 720-9406

DATE: 2/18/02 Project Number: 5-1082

TO: NAME: DREW WALKER CC: VLADIMIR

COMPANY: MECK ENV HEALTH

FAX NUMBER: (704) 336-6894

FROM: WENDEL OVERBY SUBJECT: BRICKSTONE LOT

The following items are being faxed. Number of pages including transmittal sheet: 3

___ For Your Comments/Approval
___ Per Our Conversation
___ Please Advise
___ Would Like To Discuss
X For Your Information
___ Per Your Request
___ Please Call
___ Please Handle

HARD COPY SENT:
___ US Regular Mail
___ Overnight
___ Hand Delivery
X No Hard Copy Sent

REMARKS: DREW, ENCLOSED I'VE ATTACHED A PRESSURE MANIFOLD TAP SHEET. BASED ON THE TAP SHEET I BELIEVE WE CAN GET FAIRLY EVEN FLOWS / FOOT. CALL IF YOU NEED MORE INFO. WE CAN REMOVE DROP BOXES AS SHOWN ON MAP. WENDEL

IF YOU HAVE ANY QUESTIONS OR PROBLEMS WITH THIS TRANSMISSION, PLEASE CONTACT _____ AT (704) 720-9405.

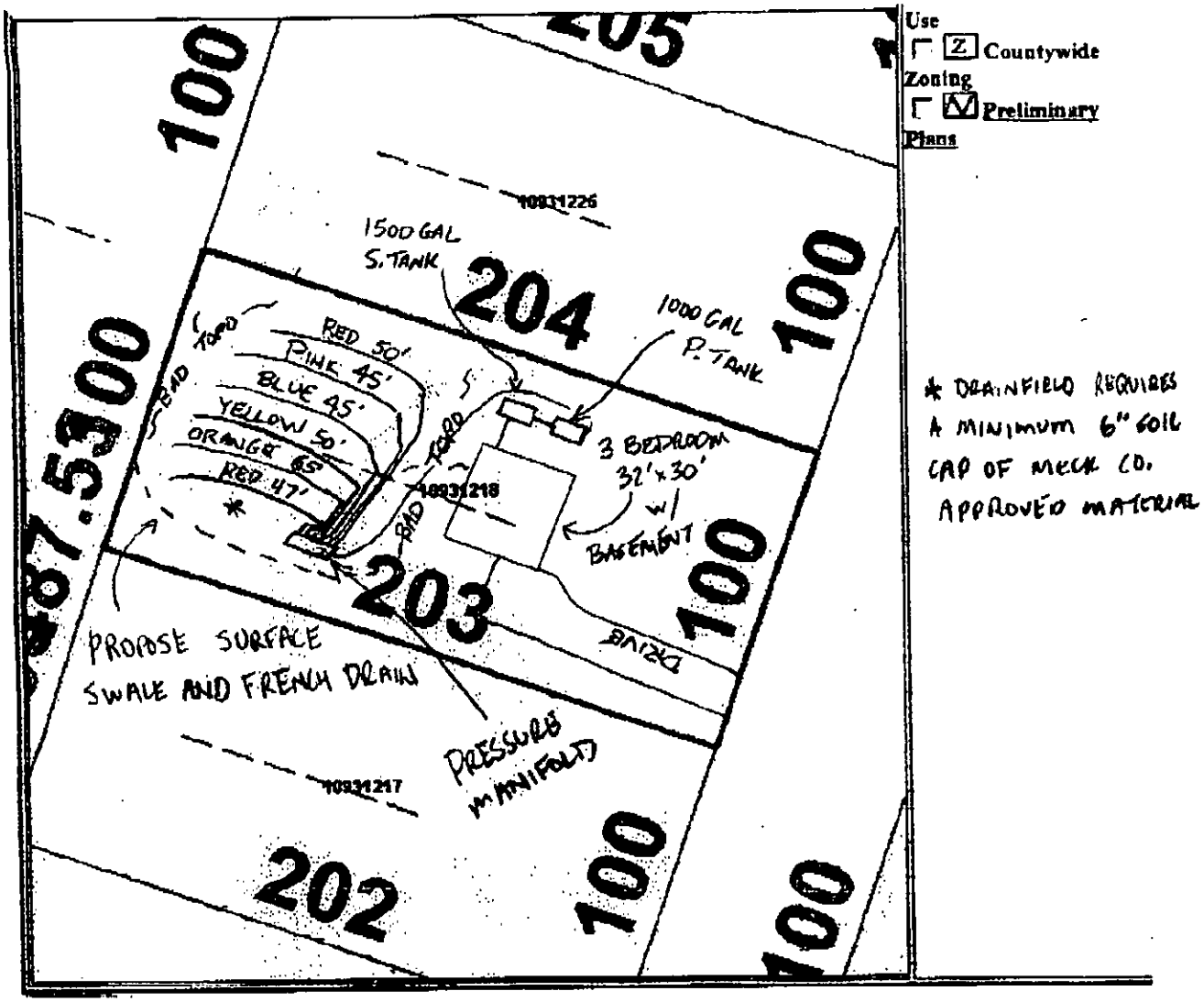
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Greensboro Office:
3817-E Lawndale Drive
Greensboro, NC 27455
Phone: (336) 540-8234
Fax: (336) 540-8235

Hickory Area Office:
710 Boston Road
Taylorsville, NC 28681
Phone: (828) 635-5820
Fax: (828) 635-5820

Raleigh Office:
11010 Raven Ridge Road
Raleigh, NC 27614
Phone (919) 846-5900
Fax (919) 846-9867



Septic System Layout Sketch Map
Alex Draga / 5505 Brickstone Road
Mecklenburg Co., NC
S&EC #5-1082
February 2002

Soil within the layout area 30 inches or greater in depth with potential for use with at-grade conventional septic systems.

*not a survey
*base map taken from Meck. Co. website



5505 Brickstone Drive

Pressure Manifold Design-3 bedroom house

REPAIR

line	color	rod read.	length	hole size	flow/tap	g.p.d.	trench area	LINE LTAR
1	RED	2.2	47	SCH 80 1/2	5.48	57.16604	141	0.405432899
2	ORANGE	3.4	65	SCH 40 1/2	7.11	74.16981	195	0.380357979
3	YELLOW	5	50	SCH 80 1/2	5.48	57.16604	150	0.381106926
4	BLUE	6.5	45	SCH 80 1/2	5.48	57.16604	135	0.423452139
5	PINK	8.4	45	SCH 80 1/2	5.48	57.16604	135	0.423452139
6	RED	9.8	50	SCH 80 1/2	5.48	57.16604	150	0.381106926

total	feet =	302	gal/min =	34.51
		Des. Flow	360	g.p.d.
		Pump Run=	10.43175891	min.
		LTAR W/ FZ lay=	0.4	gpd/ft^2
		(ltar)	0.3	gpd/ft^2
		(ltar+5%)	0.42	gpd/ft^2

LINES MAY BE FLAGGED LONGER IN THE FIELD. INSTALL AT LENGTHS SHOWN ABOVE.

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

Sheet: 12084
Property ID: 109-312-18
Lot #: 18 & 19
File #: 12084
Code: 2

ACS

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Randy Armstrong
Applicant: V. Draga, Vladimir
Address: 5411 Brickstone drive, Charlotte, N. C. 28227-4103
Date Evaluated: 1/2/02
Proposed Facility: Residence
Design Flow (.1949): 360gpd
Property Size: Approx. .5a
Location of Site: 5505 Brickstone drive
Property Recorded:
Water Supply: [x] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [x] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [x] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	OTHER PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Deptj (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS, 15	0-4	GR/CL	FR/SEXP/SS/SP	>30" TO SOIL WETNESS	30	N/A	NONE	US, IV
		4-22	SBK/C	FI/SEXP/SS/SP					.25G/DAY/FT^2
		22-30	SBK/CL	FR/SEXP/SS/SP					

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

Other Factors (.1946): _____
Site Classification (.1948): UNSUITABLE
Evaluated By: W. R. Marlin, LSS, 1/02/02, W. R. Marlin
Others Present:

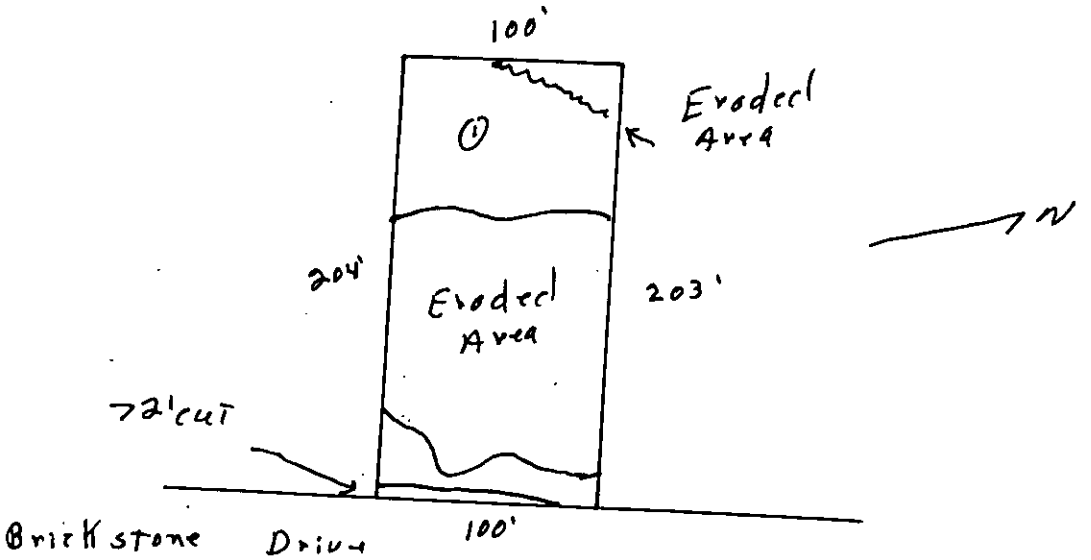
FILE # 12084

COMMENTS _____

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR
R-RIDGE	I	S-SAND	1.2-0.8
S-SHOULDER SLOPE		LS-LOAMY SAND	
L-LINEAR SLOPE			
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6
N-NOSE SLOPE		L-LOAM	
H-HEAD SLOPE			
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM	
T-TERRACE		CL-CLAY LOAM	
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM	
	IV	SC-SANDY CLAY	0.4-0.1
		SIC-SILTY CLAY	
		O-ORGANIC	

CONSISTENCE MOIST	WET
VFR-VERY FRIABLE	NS-NON-STICKY
FR-FRIABLE	SS-SLIGHTLYSTICKY
FI-FIRM	S-STICKY
VFI-VERY FIRM	VS-VERY STICKY
EFI-EXTREMELY FIRM	NP-NON-PLASTIC
	SP-SLIGHTLYSTICKY
	P-PLASTIC
	VP-VERY PLASTIC

STRUCTURE	MINERALOGY
SG-SINGLE GRAIN	SLIGHTLY EXPANSIVE
M-MASSIVE	
CR-CRUMB	EXPANSIVE
GR-GRANULAR	
SBK-SUBANGULAR BLOCKY	
ABK-ANGULAR BLOCKY	
PL-PLATY	
PR-PRISMATIC	



FEE: 200
DATE: 1/25/02

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

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

DEW

FILE #: 12089

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: ID 10931218

STREET ADDRESS: 5505 Brickstone Dr Charlotte

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: Map # 10931218 PT 218 +19

TYPE OF BUILDING (CHECK ONE):

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

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 1000

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 5

CLOSING DATE 02/22/02

FOUNDATION FOR RESIDENCE: no

___ 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:	LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:
NAME: (LAST) DRAGA (FIRST) ALEXANDR (MI)	NAME: (LAST) VLADIMIR (FIRST) (MI)
ADDRESS: 1436 Woodhill Ln.	DAYTIME PHONE: ( ) 704 668 52 42 668 52 42
CITY: Charlotte STATE: NC ZIP: 28205	
DAYTIME PHONE: ( ) - 7045354375	

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: Alex DRAGA DATE: 01/25/02

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

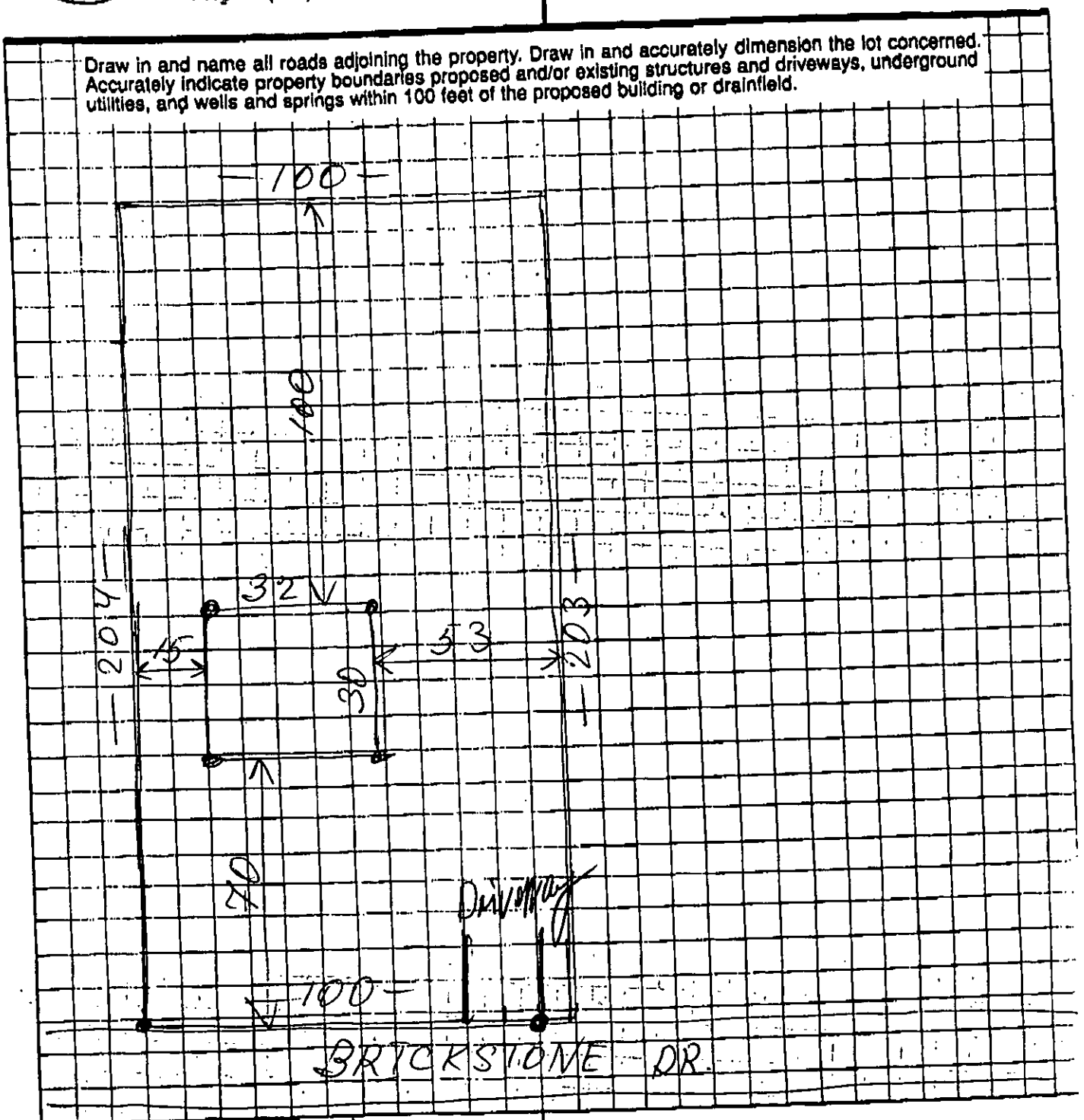
PROPOSED PLOT PLAN

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

FILE: 12084

TC: 109-312-18

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.



R DRAGA
OWNER/AGENT SIGNATURE

DATE 01-25-02

APPROVAL DATE _____

Canary - E.H.S. Copy

Pink - Owner's Cop