

16131 OLD STATESVILLE RD

00911119

8/25/08

marliwr

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

New Restroom Building

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 20040 DATE: 10/3/01

TC: 009 111 19 ☒ L ☒ CRT

SERIAL Nº 18583

Name of Owner Meck Co. / Town of Huntersville Juris.: North Meck Park

Address of Property 16130 Old Statesville Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 535

Number of Lines 4 @ 133'

Cover Depth 12"

Water Supply Source Municipal

Distance to Water Source >10'

Excavation Inspected 8/29/01

Tank(s) Inspected 8/29/01

Wash Line Inspected NA

High Water Alarm Inspected 10/3/01

PLOT

Design 2001, 1500 ST, 1000 DT, P2, INO 535 chamber CTR# Cornelius Grading

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 I5A 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 I5A 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: Dual pumps installed, Septic System designed for a 100 parking space addition to the existing park. Type IIIg Innivative Septic System (Chambers Installed)

Phillip S. Walker RS
Environmental Health Specialist

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

New Restroom Buildings

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

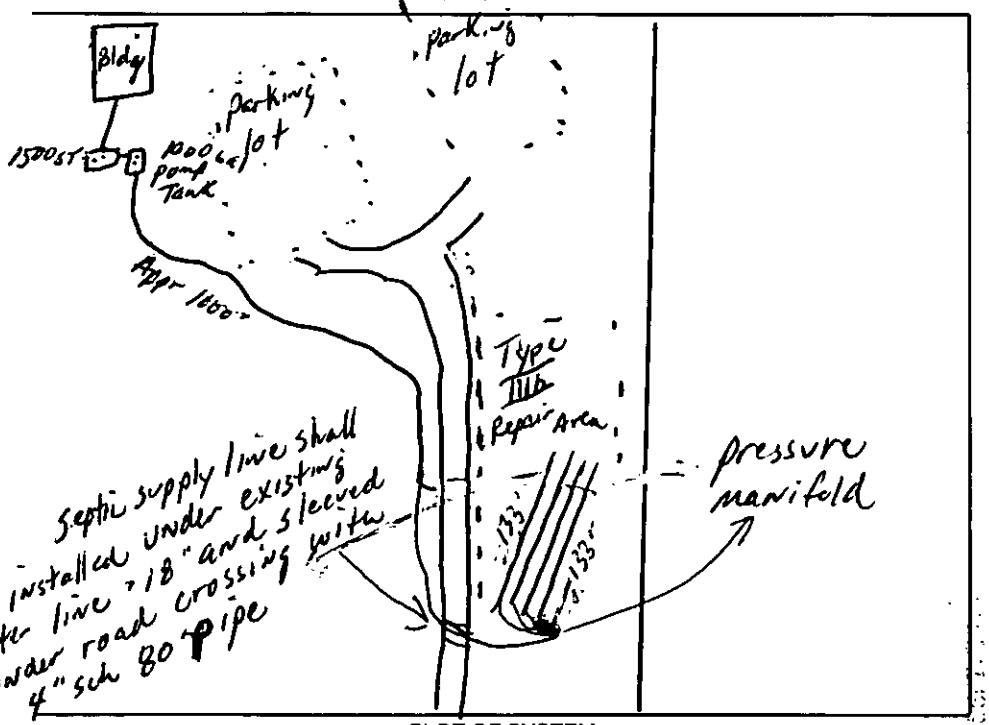
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 20040 DATE: 4/20/01

TC: 009 111 19 PL

SERIAL Nº 18690

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 1/12/01, _____. All work shall be completed on or before 5/20/01, 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank 1000 gallons

Tank Construction PCC

Trench Depth 24"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous Yes

Total Line Length 535' feet

Number of Lines 5 (107')

Depth of Stone NA inches

Distance from House 5' feet

Distance from Property Line 10' feet

Distance from Well Municipal feet
140'

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

NAME OF OWNER Meck Co./Town of Huntersville North Meck. Park

LOCATION OF PROPERTY 16130 Old Statesville Rd

Comments: Innovative Septic System, 1500 ST, 1000 DT, PI, pressure manifold, Appr 1000' supply line, 5 lines x 133' long x 3' wd innovative, Septic supply line shall be installed under existing water line >18" and sleeved under road crossing w/ 4" sch 80 pipe, Dual pumps to be installed.

Philo A. Walker R.S.
Environmental Health Specialist

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

Existing Restroom Building

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 20040 DATE: 10/3/01

TC: 009 111 19 ☒ L ☒ CRT

SERIAL Nº 17773

Name of Owner Meck Co. / Town of Huntersville Juris.: North Meck. Mark

Address of Property 16131 Old Statesville Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield Existing

Number of Lines existing @

Cover Depth existing

Water Supply Source Municipal

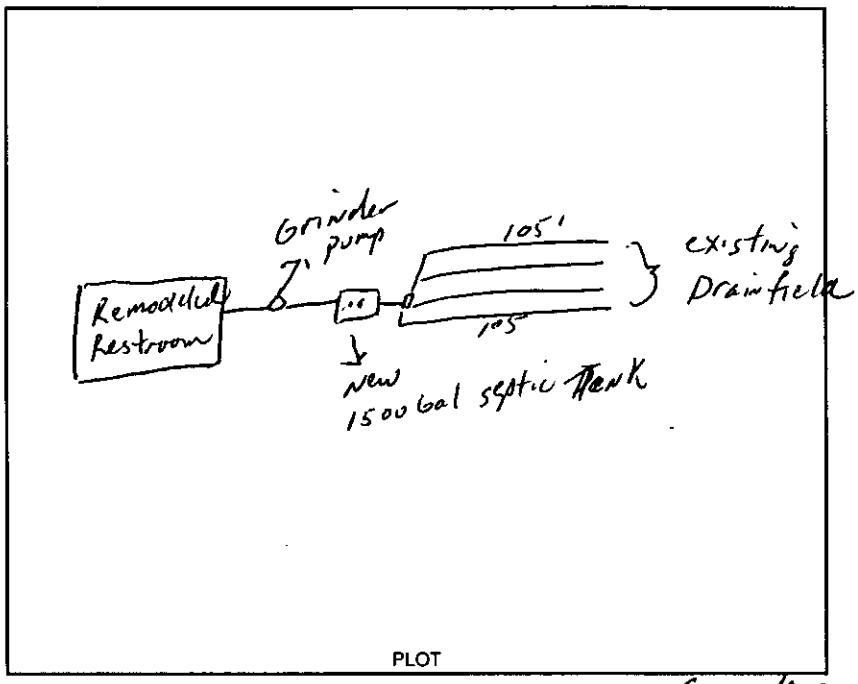
Distance to Water Source > 10'

Excavation Inspected Tank 9/18/01

Tank(s) Inspected 9/18/01

Wash Line Inspected NA

High Water Alarm Inspected NA



PLOT

2001, Design 1500ST, Grinder pump CTR# Cornelius Grading

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 I5A 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 I5A 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: Grinder pump added to alteration installation (Plumbing installed too deep) Installed 1500 ST Type IIa

Philo S. Walker R.S.
Environmental Health Specialist

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

Existing Restroom Building

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

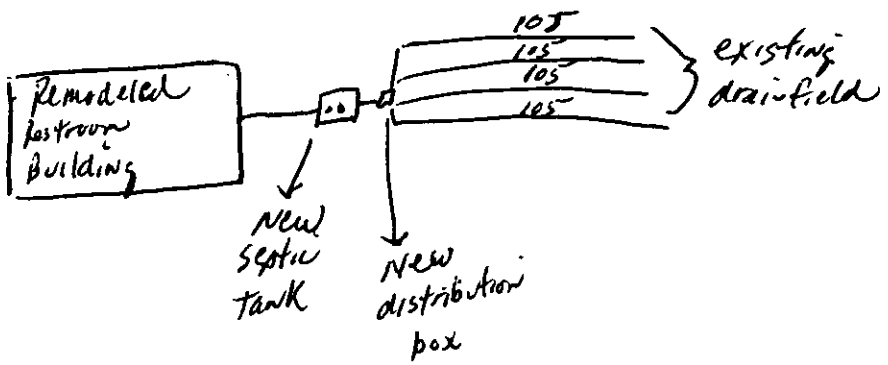
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 20040 DATE: 2/20/01

TC: 009 111 19 R L

SERIAL Nº 18689

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 1/17/01. All work shall be completed on or before 3/20/01, 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank NA gallons

Tank Construction PCC

Trench Depth NA

Absorption and/or Nitrification Lines:

Trench Width Existing feet

Trench Walls Scored and Porous NA

Total Line Length Existing feet

Number of Lines Existing

Depth of Stone NA inches

Distance from House ~5' feet

Distance from Property Line ~10' feet

Distance from Well ~100' feet

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

NAME OF OWNER Mecklenburg Co. / Town of Huntersville

LOCATION OF PROPERTY 16131 Old Statesville Rd North Meck. Park

Comments: Install 1500 ST, Replace D-Box and reconnect to the existing drainfield

Philo S. Walker RS.

Environmental Health Specialist

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

FEE: 400.00 to date
DATE: 1/23/01

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR IMPROVEMENT PERMIT FOR COMMERCIAL/INDUSTRIAL SITE

[ ] CRT

TYPE APPLICATION: ___ NEW SYSTEM X EXPANSION 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 #: 20040

PROJECT TRACKING #:

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION: NORTH MECK PARK

TAX/PARCEL NUMBER: 00911119

STREET ADDRESS: 16131 OLD STATESVILLE RD. HUNTERSVILLE NC

LOT NUMBER:

TOWNSHIP (CHECK ONE):

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

X COMMERICAL ___ INDUSTRIAL

DESCRIBE TYPE OF BUSINESS: PUBLIC PARK RESTROOM / CONCESSION BUILDING

Square Footage of Facility: 2100 SF

NUMBER OF EMPLOYEES: _____ PER SHIFT: ___ ___ ___

HOW WILL WATER BE USED IN THE FACILITY:

X TOILETS/URINALS
X HANDSINK
___ SHOWERS
X FLOOR DRAINS

OTHER, PLEASE DESCRIBE:

Site visited 1-31-01 No need for soil eval. at that time. WAM - 1-31-01

An IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change.

TYPE OF WASTEWATER:
X SEWAGE
___ INDUSTRIAL PROCESS WASTE WATER

IF EXPANSION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED ADDITION: THE EXISTING RESTROOM IS BEING COMPLETELY RENOVATED & ENLARGED. A CONCESSIONS/VENDING ROOM IS BEING ADDED. SEE ATTACHED PLANS.

WATER SUPPLY (CHECK ONE): ___ COMMUNITY (C) X 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	X YES ___ NO	WELL SPRINGS OR WATERLINES	X YES ___ NO
EXISTING WASTE WATER SYSTEMS	X YES ___ NO	DESIGNATED WETLANDS	___ YES X NO
EASEMENTS OR RIGHT-OF-WAYS	X YES ___ NO		

BUILDING PLANS TO INCLUDE ALL PLUMBING, FLOOR DRAINS AND ALL SOURCES OF WASTEWATER DISCHARGE AND GRADING PLANS MAY BE REQUIRED DURING THE EVALUATION STAGE.

PROPERTY OWNER: MECK CO. / TOWN OF HUNTERSVILLE	LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:
NAME: KINCAID, MARK (LAST) (FIRST) (MI)	NAME: KINCAID, MARK (LAST) (FIRST) (MI)
ADDRESS: 101 HUNTERSVILLE - CONCORD RD.	DAYTIME PHONE: (704) 875 - 7000
CITY: HUNTERSVILLE STATE: NC ZIP: 28070	
DAYTIME PHONE: (704) 875 - 7000	

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 6/23/83

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: Mark Kincaid DATE: 1.17.01

MECKLENBURG COUNTY HEALTH DEPARTMENT
Environmental Health Fees

Requestor (please print): United Construction Phone #: Date Requested: 1/23/01 Date Filled: LM

Account Name: Cash Charge Account No.: X31958

I certify that I am authorized to charge this account for this service:

Signature: Hassan Famm Printed Name: HASSAN-FAMM Date:

T.C.	Qty	Description	Unit Cost	Total Cost
0701		Improvement Permit Application - Residential	$ 200.00	
0735	1	Improvement Permit Application - Commercial	$ 400.00	400—
0702		Optional Site Evaluations	$ 100.00	
0703		Installation and Final Approval	$ 150.00	
0704		Change in Plot Plan	$ 100.00	
0705		MH Exc/Add/Repl without System Modification	$ 100.00	
0706		MH Exc/Add/Repl with System Modification	$ 300.00	
0707		Site Consultation Visit	$ 100.00	
0734		Authorization for Wastewater System Construction	$ 150.00	
0708		Realty Closing - Conventional	$ 85.00	
0709		Realty Closing - FHA with water	$ 135.00	
0710		Additional Trips	$ 65.00	
0711		Well Water Analysis-Bacteriological with regular parameters	$ 50.00	
0712		Well Water Analysis -Nitrates and Nitrites	$ 15.00	
0714		Well Water Analysis - Organic Analysis	$ 200.00	
0715		Admin. Fee - Field Activity Letter	$ 25.00	
0718		Residential Pool Permit	$ 50.00	
0719		Public Pool Permit - operating	$ 240.00	
0720		Seasonal Pool Permit - operating	$ 120.00	
0736		Pool Late Fee	$ 120.00	
0733		Permit to Construct a Public Pool	$ 200.00	
0721		Home Day Care Evaluation and Permit	$ 70.00	
0722		Home Day Care Evaluation and Annual Fee	$ 40.00	
0723		Eval and Report Non-Permit Facility	$ 50.00	
0724		Private Pool-Testing	$ 15.00	
0731		Garbage Hauler Permit - (1-9 vehicles)	$ 30.00	
0736		Garbage Hauler Permit - (each over 9)	$ 20.00	
0725		Document Copies	$ 0.05	

Payment received by: Date: Total: 400—

16131 OLD STATESVILLE RD.

4/2000

White-AUDIT Canary-CUSTOMER Pink-DIVISION

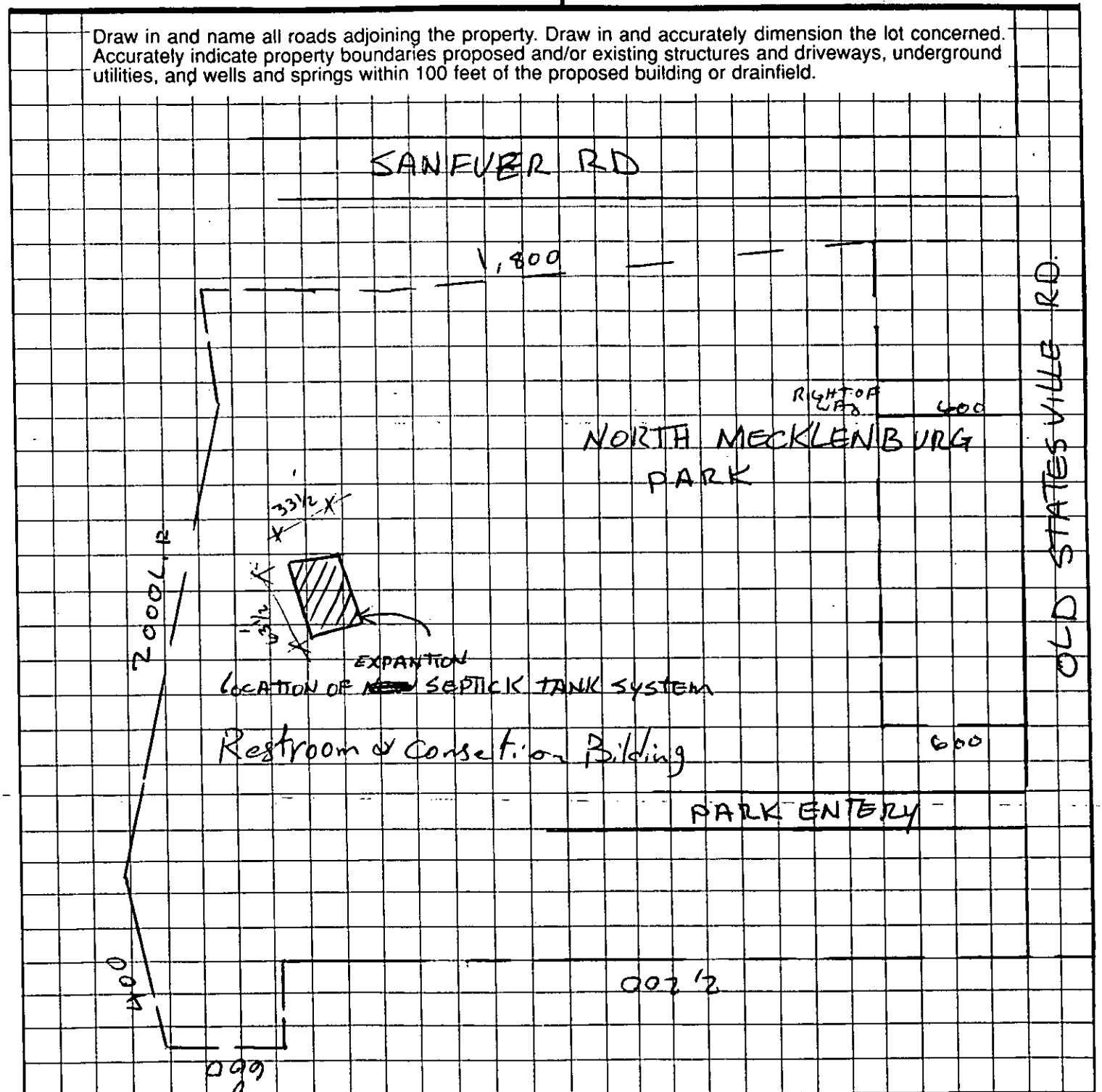
PROPOSED PLOT PLAN

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

FILE: 20040

TC: 009-111-19

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.



OWNER/AGENT SIGNATURE

DATE 01/23/01

APPROVAL DATE _____

White - Health Department's Copy

Canary - E.H.S. Copy

Pink - Owner's Copy

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 20040 DATE: 7/17/02

TC: 009 111 19 ☒ L ☐ CRT

SERIAL Nº 18749

Name of Owner Meck Co. / Town of Huntersville Juris.: _____

Address of Property 16131 Old Statesville Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 200'

Number of Lines 2 @ 100'

Cover Depth 12" - 18"

Water Supply Source Municipal

Distance to Water Source >10'

Excavation Inspected 7/17/02

Tank(s) Inspected 7/16/02

Wash Line Inspected NA

High Water Alarm Inspected Existing

PLOT

Design Alteration, 2002, 3000Gal Septic Tank, CON, 600SFT CTR# Cornelius Grading

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 I5A 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 I5A 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: Alteration to the existing system due to increase # of visitors (Park tournaments, ect)

Philo S. Walker

Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

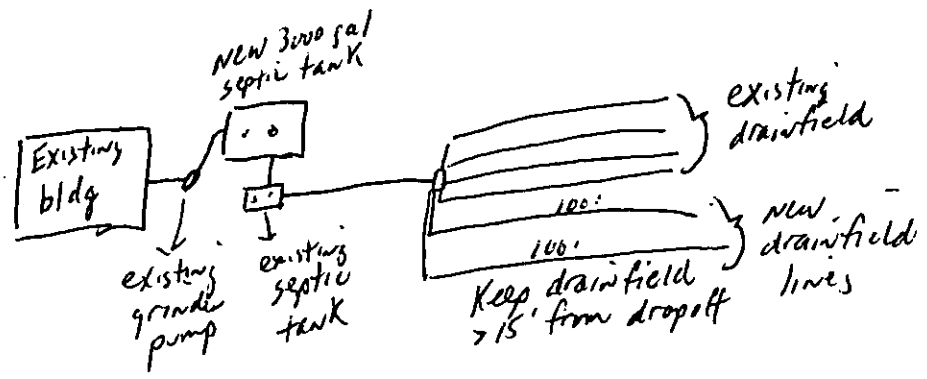
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 20040 DATE: 6/25/02

TC: 009 111 19 ☐ L

SERIAL Nº 18874

Permission is hereby given to _____ Install or Construct, ___V___ 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 6/24/02. All work shall be completed on or before 7/25/02, 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 3000 gallons

Liquid Capacity of Dosing Tank existing grinder pump gallons

Tank Construction PCC

Trench Depth 36"

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Trench Walls Scored and Porous yes

Total Line Length 200' feet

Number of Lines 2 (100')

Depth of Stone 12" inches

Distance from House 5' feet

Distance from Property Line 10' feet

Distance from Well CMUD water feet

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

NAME OF OWNER Mecklenburg County / Town of Huntersville

LOCATION OF PROPERTY 16131 Old Statesville Rd

Comments: Install 3000 gal septic tank, 2 lines x 100'/long x 3' wd x 12" stone. Keep the septic system >15' from dropoff.

Paula D Walker
Environmental Health Specialist

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

Repair to existing system

FEE: _____
DATE: _____

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR IMPROVEMENT PERMIT
FOR COMMERCIAL/INDUSTRIAL SITE

[redacted] Commercial / JCRT

TYPE APPLICATION: ___ NEW SYSTEM ___ EXPANSION 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 #: 20040

PROJECT TRACKING #:

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 009-111-19

STREET ADDRESS:

LOT NUMBER:

TOWNSHIP (CHECK ONE):

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

✓ COMMERICAL ___ INDUSTRIAL

DESCRIBE TYPE OF BUISNESS:
Parks and Recreation
Square Footage of Facility:

NUMBER OF EMPLOYEES: _____
PER SHIFT: _____

HOW WILL WATER BE USED IN THE FACILITY:

✓ TOILETS/URINALS
✓ HANDSINK
___ SHOWERS
✓ FLOOR DRAINS

OTHER, PLEASE DESCRIBE:

An IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change.

TYPE OF WASTEWATER:
✓ SEWAGE
___ INDUSTRIAL PROCESS WASTE WATER

IF EXPANSION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED ADDITION:
add 3,000 gal septic tank, Add 2 lines x 100' long

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 WASTE WATER SYSTEMS ___ YES ___ NO
EASEMENTS OR RIGHT-OF-WAYS ___ YES ___ NO
WELL SPRINGS OR WATERLINES ___ YES ___ NO
DESIGNATED WETLANDS ___ YES ___ NO

BUILDING PLANS TO INCLUDE ALL PLUMBING, FLOOR DRAINS AND ALL SOURCES OF WASTEWATER DISCHARGE AND GRADING PLANS MAY BE REQUIRED DURING THE EVALUATION STAGE.

PROPERTY OWNER: Mecklenburg County Cleared by Huntersville

NAME: Jaycocks (LAST) Michael (FIRST) K (MI)

ADDRESS: 16131 Old Statesville Rd.

CITY: Huntersville STATE: NC ZIP 28078

DAYTIME PHONE: (704) 622 -- 0218

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) --

Mecklenburg County
6000 4th St. 28202

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

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: Michael K Jaycocks

DATE: 7/1/02

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

JUL-01-2002 04:51PM FROM-HUNTERSVILLE TOWN HALL 704-875-6546 T-163 P.002/002 F-236

pd receipt X31958

FEE: 300 | AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION
DATE: 2/22/01 qc | VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

DATE: _____ PERMIT NO: 20040

PARCEL NO: 009 111 19

JOB LOCATION ADDRESS: 16131 Old Statesville Rd

PROPERTY OWNER: Meck Co. / Town of Huntersville

BUILDING CONTRACTOR: _____

SUBDIVISION NAME: NA

AUTHORIZATION ISSUED BY: Phil S. Walker RS. DATE: 2/19/01

DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 20040, 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: Approval granted for a 100 parking ~~place~~ space addition to the existing park. New pathroom to be added

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.

X _____

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

MECKLENBURG COUNTY
ENGINEERING & BUILDING STANDARDS DEPARTMENT

Miscellaneous Fees

w/ Wyatt & Assoc

Requestor (Please print): Jay Higginbotham	Phone #:	Date Requested: 2/22/01	Date Filled: 2/22/01
Account Name: United Construction	☐ Cash ☒ Charge	Account No.: X 31958	

I certify that I am authorized to charge this account for this service.

Signature: per instruction from Requestor Printed Name: Date:

Fee or Charge

T.C.	Qty.	Type	Unit Cost	Total Cost
021		Single Lot Grading Permit (Please list address below)		
112		Zoning Board of Adjustment ☐ Residential Variance Request ☐ Commercial Variance Request ☐ Residential Interpretation ☐ Commercial Interpretation		
113		Zoning Citation(s) # _____		
		☐ 117: Certificate of Compliance* ☐ 118: Certificate of Occupancy* (original is free)	$10.00 ea.	
119		Change of Contractor*	$10.00 ea.	
121		Letters of Certification/Verification	$10.00 ea.	
122		Monthly Statistical Reports	$10.00 ea.	
124		Research & Retrieval of Documents		
125		Temporary Utilities/Occupancy*	$30.00/insp.	
		Local License Card/Exam ☐ 128: Mechanical ☐ 129: Plumbing ☐ 132: Electrical		
		Development Activities Plan Review ☐ 002: Commercial Drainage ☐ 005: Erosion Control ☐ 016: Subdivision ☐ 006: Final Plat Review		
425		City of Charlotte Fire - Plan Review		
		Map Sales		
734	1	Other: Audit to Contract	150	150
703	1	Other: Interpretation + Appeal	150	150
Payment received by: Vivian Irby		Date: 2/22/01 By: JC	Total:	300.00

* Please list all permit numbers/addresses that relate to your request. A request for temporary utilities (gas and electric) would require two permit numbers.

16131 Old Statesville Rd		
file # 20040		

B-216NS 8/95

WHITE – AUDIT CANARY – CUSTOMER PINK – DIVISION

CONDITIONS OF IMPROVEMENT PERMIT

Permit Number: 20040 Tax Number: 009 111 19

- 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 NA ___ 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	600 Max gallons/day wastewater flow	1783 Absorption Area (sq ft)	9' Trench spacing (min. on centers)
NO Serviced by private well	1500 Gallon septic tank	535 Total trench length (ft)	24" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
NA Bedrooms in residence	1000 Gallon pump tank	NA Depth of stone	

Any surface waters present: NO Type: Minimum separation distance:

Site modifications required:

Additional Conditions: Innovative Septic System Approval, Agreement forms shall be recorded and on file prior to operations permit release. Install 4 lines x 134'long x 3'wd pressure manifold distribution. Approval granted for a new 100 parking space and new bathroom addition to the existing park

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

1783 Absorption Area (Sq ft) 535 Total Trench Length (Ft)	12" Depth of Stone Trench	9' Trench spacing (min. on centers)	24" 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.

Phila A Walker RS. 2/19/01
DEHNR Authorized Agent Date

X ___
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

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

Sheet: 1
Property ID: 009-111-19
Lot #:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

File #: 20040

OWNER: Meck Co / Town of Huntersville APPLICANT:
ADDRESS: 101 Huntersville Concord Road, Huntersville DATE EVALUATED: 2-1-01
PROPOSED FACILITY: park PROPOSED DESIGN FLOW (.1949) 480 gpd (EST) PROPERTY SIZE:
LOCATION OF SITE: 16131 Old Statesville Road PROPERTY RECORDED:
WATER SUPPLY: ☐Private ☒Public ☐Well ☐Spring ☐Other
EVALUATION METHOD: ☒Augur Boring ☐Pit ☐Cut
TYPE OF WASTEWATER: ☒Sewage ☐Industrial Process ☐Mixed

PROFILE #	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	PROFILE CLASS &LTAR
1	LS 5-15%	0-12"	gr/sl	Fr/SExPl/NS/NP	2.5Y 7/1 @ 27"	47"	US	None	US
		12-40"	SBK/sc	vFi/Mixed/VS/VP					
		40-47"	SBK/scl	Fr/SExPl/SS/SP					
2	LS	0-19"	gr/sl	Fr/SExPl/NS/NP	750" To soil wetness	50"	US	None	US
		19-36"	SBK/sc	vFi/Mixed/VS/VP					
		36-50"	SBK/cl	Fr/SExPl/SS/SP					
3	LS	0-3"	gr/scl	Fr/SExPl/SS/SP	759" To soil wetness	59"	US	None	US
		3-26"	SBK pris/sc	vFi/Mixed/VS/VP					
		26-59"	M/sc/	Fr/SExPl/SS/SP					
4	LS	0-11"	gr/scl	Fr/SExPl/SS/SP	735" To soil wetness	35"	N/A	None	US IV .39 f2
		11-30"	SBK/c	Fi/SExPl/S/P					
		30-35"	SBK/scl	Fr/SExPl/SS/SP					
5	LS	0-3"	gr/scl	Fr/SExPl/SS/SP	748" To soil wetness	48"+	N/A	None	PS IV .39 f2
		3-39"	SBK/c	Fi/SExPl/S/P					
		39-48"	SBK/cl	Fr/SExPl/SS/SP					
6	LS	0-3"	gr/scl	Fr/SExPl/SS/SP	748" To soil wetness	48"+	N/A	None	PS IV .39 f2
		3-48"	SBK/sc	Fi/SExPl/S/P					
7	LS	0-3"	gr/scl	Fr/SExPl/SS/SP	748" To wetness	48"+	N/A	None	PS IV .39 f2
		3-48"	SBK/sc	Fi/SExPl/S/P					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	US
System Type(s)		
Site LTAR	.39 f2	.39 f2

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): Unsuitable
EVALUATED BY: W.A. Marlin LSS 2-9-01
OTHER(S) PRESENT:

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

Sheet: 2
Property ID:
Lot #:
File #: 20040

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: APPLICANT:
ADDRESS: DATE EVALUATED:
PROPOSED FACILITY: PROPOSED DESIGN FLOW (.1949) PROPERTY SIZE:
LOCATION OF SITE: PROPERTY RECORDED:
WATER SUPPLY: ☐Private ☐Public ☐Well ☐Spring ☐Other
EVALUATION METHOD: ☐Augur Boring ☐Pit ☐Cut
TYPE OF WASTEWATER: ☐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 DEPTH	1956 SAPRO CLASS	1944 RESTR HORIZ	PROFILE CLASS &LTAR
8	LS	0-6"	gr/scl	Fr/SEXPlSS/SP	7 48" to soil wetness	48"+	N/A	None	PS .391 F2 IV
		6-48"	SBMSC	Fi/SEXPlSlP					
9	LS	0-4"	gr/ scl	Fr/SEXPlSS/SP	7 48" to soil wetness	48"+	N/A	None	PS .391 F2 IV
		4-48"	SBMSC	Fi/SEXPlSlP					
10	LS	0-5"	gr/ scl	Fr/SEXPlSS/SP	7 48" to soil wetness	48"+	N/A	None	PS .391 F2 IV
		5-36"	SBMl C	Fi/SEXPlSlP					
		36-46"	SBMl cl	Fr/SEXPlSS/SP					
11	LS	0-3"	gr/scl	Fr/SEXPlSS/SP	7 48" to soil wetness	48"+	N/A	None	PS .391 F2 IV
		3-39"	SBMl SC	Fi/SEXPl SlP					
		39-48"	SBMl scl	Fr/SEXPlSS/SP					
12	LS	0-2"	gr/ scl	FR/SEXPlSS/SP	7 46" to soil wetness	46"	N/A	None	PS .391 F2 IV
		2-35"	SBMl C	Fi/SExPlSlP					
		35-46"	SBMlscl	Fr/SEXCl-SSlP					

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

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY:
OTHER(S) PRESENT:

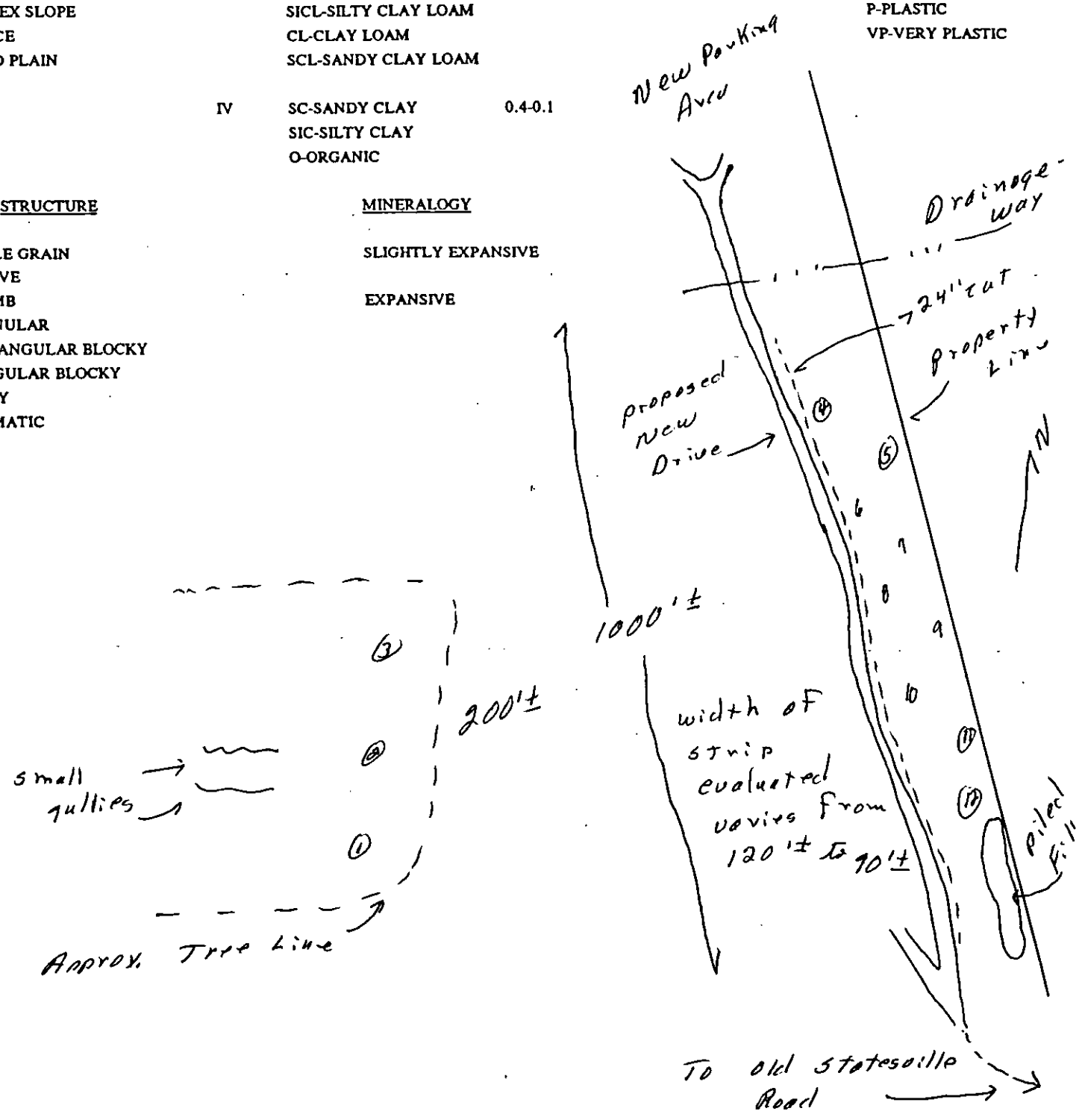
FILE # 20040

COMMENTS 100% Repair, pits used as profiles 1, 2, 3
~~East~~ Exact location of property line not determined at
time of investigation 2-07-01

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	



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

Sheet: _____

Property ID: 009-111-19

Lot #: _____

File #: 20040

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Meck Co/Town of Huntersville APPLICANT: Mark Honeycutt

ADDRESS: 101 Huntersville Concord Road, Huntersville DATE EVALUATED: 1-31-01

PROPOSED FACILITY: addition to facility PROPOSED DESIGN FLOW (.1949) 300 gpd/person/day PROPERTY SIZE: .75

LOCATION OF SITE: 16131 Old Statesville Road PROPERTY RECORDED: _____

WATER SUPPLY: ☐Private ☑Public ☐Well ☐Spring ☐Other _____

EVALUATION METHOD: ☑Augur Boring ☐Pit ☐Cut

TYPE OF WASTEWATER: ☑Sewage ☐Industrial Process ☐Mixed

PROFILE #	5-15% 1940 Landscape Position/ Slope %	Horizon Depth (IN.)	SOIL MORPHOLOGY (.1941) 1941 STRUCTURE/ TEXTURE	1941 CONSISTENCE MINERALOGY	OTHER PROFILE FACTORS 1942 SOIL WETNESS/ COLOR	1943 SOIL DEPTH	1956 SAPRO CLASS	1944 RESTR HORIZ	PROFILE CLASS &LTAR
1	LS	0-2"	gr/scl	Fr/SEXPl/SS/SP	2.5Y 6/2 @ 23"	26"	N/A	None	US
		2-6"	SBK/scl	Fr/SEXPl/SS/SP					
		6-12"	SBK/sc	VF:/Mixed/VS/VP					
		18-26"	SBK/c	VF:/EXPl/VS/VP					
2	LS	0-18"	gr/sc SL	Fr/SEXPl/NS/NP	>37" to soil wetness	37"	N/A	None	US
		18-37"	SBK/c	VF:/Mixed/VS/VP					
3	LS	0-2"	gr/scl	Fr/SEXPl/SS/SP	>24" to soil wetness	24"	N/A	None	US
		2-24"	SBK/c	VF:/Mixed/VS/VP					
4	LS	0-3"	gr/sl	Fr/SEXPl/NS/NP	>30" to soil wetness	30"	N/A	None	US
		3-6"	SBK/scl	Fr/SEXPl/SS/SP					
		6-30"	SBK/sc	VF:/Mixed/VS/VP					
5	LS	0-4"	gr/scl	Fr/SEXPl/SS/SP	>24" to soil wetness	24"	N/A	None	US
		4-24"	SBK/c	VF:/Mixed/VS/VS					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	US	US
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____

SITE CLASSIFICATION (.1948): Unsuitable

EVALUATED BY: W. R. Marlin LSS 1-31-01

OTHER(S) PRESENT: _____

FILE # 20040

COMMENTS 100% Repair

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

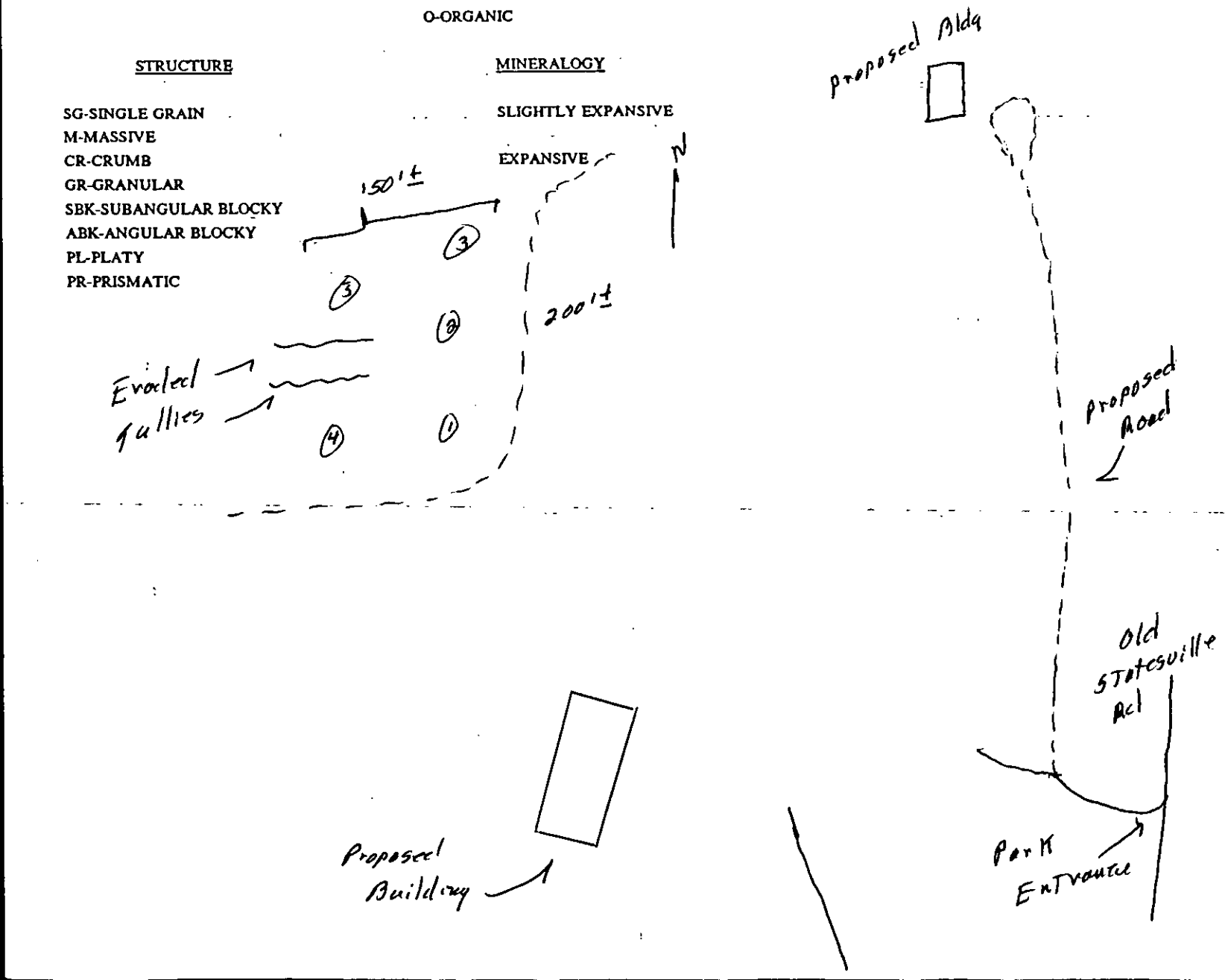
STRUCTURE

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

MINERALOGY

SLIGHTLY EXPANSIVE

EXPANSIVE



FEE: $400 on Acct
DATE: 1/23/01 Ck#

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR IMPROVEMENT PERMIT FOR COMMERCIAL/INDUSTRIAL SITE

and site eval, Applicable Transfer $400 on prior App. [ ] CRT

TYPE APPLICATION: X NEW SYSTEM ___ EXPANSION OF EXISTING SYSTEM Alteration of Application ___ REPAIR OF EXISTING SYSTEM

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

FILE #: 1120040 1/23/01 gc

PROJECT TRACKING #:

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION: NORTH MECK PARK

TAX/PARCEL NUMBER: 00911119

STREET ADDRESS: 16131 OLD STATESVILLE RD. HUNTERSVILLE NC

X COMMERICAL ___ INDUSTRIAL

DESCRIBE TYPE OF BUSINESS: PUBLIC PARK RESTROOM BUILDING / PICNIC SHELTER

Square Footage of Facility: 900 SF

NUMBER OF EMPLOYEES: 100 additional parking spaces PER SHIFT: ___ ___ ___

LOT NUMBER:

TOWNSHIP (CHECK ONE):

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

HOW WILL WATER BE USED IN THE FACILITY:

X TOLIETS/URINALS
X HANDSINK
___ SHOWERS
X FLOOR DRAINS

OTHER, PLEASE DESCRIBE:

TYPE OF WASTEWATER:
X SEWAGE
___ INDUSTRIAL PROCESS WASTE WATER

An IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change.

IF EXPANSION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED ADDITION:

WATER SUPPLY (CHECK ONE): ___ COMMUNITY (C) X 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	X YES ___ NO	WELL SPRINGS OR WATERLINES	X YES ___ NO
EXISTING WASTE WATER SYSTEMS	X YES ___ NO	DESIGNATED WETLANDS	___ YES X NO
EASEMENTS OR RIGHT-OF-WAYS	X YES ___ NO		

BUILDING PLANS TO INCLUDE ALL PLUMBING, FLOOR DRAINS AND ALL SOURCES OF WASTEWATER DISCHARGE AND GRADING PLANS MAY BE REQUIRED DURING THE EVALUATION STAGE.

PROPERTY OWNER: MECK CO / Town of Huntersville	LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:
NAME: KINCAID, MARK (LAST) (FIRST) (MI)	NAME: KINCAID, MARK (LAST) (FIRST) (MI)
ADDRESS: 101 HUNTERSVILLE - CONCORD RD.	DAYTIME PHONE: ( ) 875 - 7000
CITY: HUNTERSVILLE STATE: NC ZIP: 28070	
DAYTIME PHONE: (704) 875 - 7000	

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 6/23/83

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: Mark Kincaid DATE: 1-17-01

MECKLENBURG COUNTY HEALTH DEPARTMENT
Environmental Health Fees

Requestor (please print): UNITED CONSTRUCTION Phone #: Date Requested: 1/23/01 Date Filled:

Account Name: Cash Charge Account No.: X31958

I certify that I am authorized to charge this account for this service:

Signature: Hassan Fahm Printed Name: HASSAN. FAHM Date:

T.C.	Qty	Description	Unit Cost	Total Cost
0701		Improvement Permit Application - Residential	$ 200.00	
0735	1	Improvement Permit Application - Commercial	$ 400.00	400
0702		Optional Site Evaluations	$ 100.00	
0703		Installation and Final Approval	$ 150.00	
0704		Change in Plot Plan	$ 100.00	
0705		MH Exc/Add/Repl without System Modification	$ 100.00	
0706		MH Exc/Add/Repl with System Modification	$ 300.00	
0707		Site Consultation Visit	$ 100.00	
0734		Authorization for Wastewater System Construction	$ 150.00	
0708		Realty Closing - Conventional	$ 85.00	
0709		Realty Closing - FHA with water	$ 135.00	
0710		Additional Trips	$ 65.00	
0711		Well Water Analysis-Bacteriological with regular parameters	$ 50.00	
0712		Well Water Analysis -Nitrates and Nitrites	$ 15.00	
0714		Well Water Analysis - Organic Analysis	$ 200.00	
0715		Admin. Fee - Field Activity Letter	$ 25.00	
0718		Residential Pool Permit	$ 50.00	
0719		Public Pool Permit - operating	$ 240.00	
0720		Seasonal Pool Permit - operating	$ 120.00	
0736		Pool Late Fee	$ 120.00	
0733		Permit to Construct a Public Pool	$ 200.00	
0721		Home Day Care Evaluation and Permit	$ 70.00	
0722		Home Day Care Evaluation and Annual Fee	$ 40.00	
0723		Eval and Report Non-Permit Facility	$ 50.00	
0724		Private Pool Testing	$ 15.00	
0731		Garbage Hauler Permit - (1-9 vehicles)	$ 30.00	
0736		Garbage Hauler Permit - (each over 9)	$ 20.00	
0725		Document Copies	$ 0.05	

Payment received by: Date: Total: 400

16131 OLD STATESVILLE RD.

4/2000

White-AUDIT Canary-CUSTOMER Pink-DIVISION

FOR REGISTRATION JUDITH A. GIBSON
REGISTER OF DEEDS
MECKLENBURG COUNTY, NC
2001 OCT 24 01:16 PM
BOOK:12796 PAGE:511-514 FEE:$12.00
INSTRUMENT # 2001183324

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 # _____
PARCEL # 009 111 19

The undersigned, MECKLENBURG COUNTY, owner of property located at 16131 N. Old Statesville Rd., Huntersville, (the "site") and described in an instrument recorded in Book 04680 at Page 0554, 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: Robert M. May, Senior Proj. Mgr.
Mail after recording to: Robert May, Real Estate Services Dept./Meck Co.
700 North Tryon St., Charlotte, NC 28202
Ph 704-336-7044

- 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 _____ day of _____, 199__.

Parks and Recreation
Mecklenburg County
(Corporate Name)

By: R. Wayne Weston 3/22/01
Director

ATTEST:

Secretary

(Corporate Seal)

X _____ (SEAL)

_____ (SEAL)

_____ (SEAL)

_____ (SEAL)

STATE OF NORTH CAROLINA
COUNTY OF _____

I, Tangela A. White, a Notary Public for said County and State, do hereby certify that R. Wayne Weston, Director, Mecklenburg County Park & Rec. personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 29th day of March, 2001.

TANGELA A. WHITE NOTARY PUBLIC MECKLENBURG COUNTY, N.C.

Tangela A. White
Notary Public

My Commission Expires:
January 5, 2005

JUDITH A. GIBSON
REGISTER OF DEEDS , MECKLENBURG COUNTY
COUNTY & COURTS OFFICE BUILDING
720 EAST FOURTH STREET
CHARLOTTE NC 28202

****

Filed For Registration: 10/24/2001 01:16 PM

Book: RE 12796 Page: 511-514

Document No.: 2001183324

PRMIT 4 PGS $12.00

Recorder: F. RAY BAKER JR.

****

State of North Carolina, County of Mecklenburg

The foregoing certificate of TANGELA A WHITE Notary is certified to be correct. This 24TH of October 2001

JUDITH A. GIBSON, REGISTER OF DEEDS By: F. Ray Baker Jr.
Deputy/Assistant Register of Deeds

****

2001183324

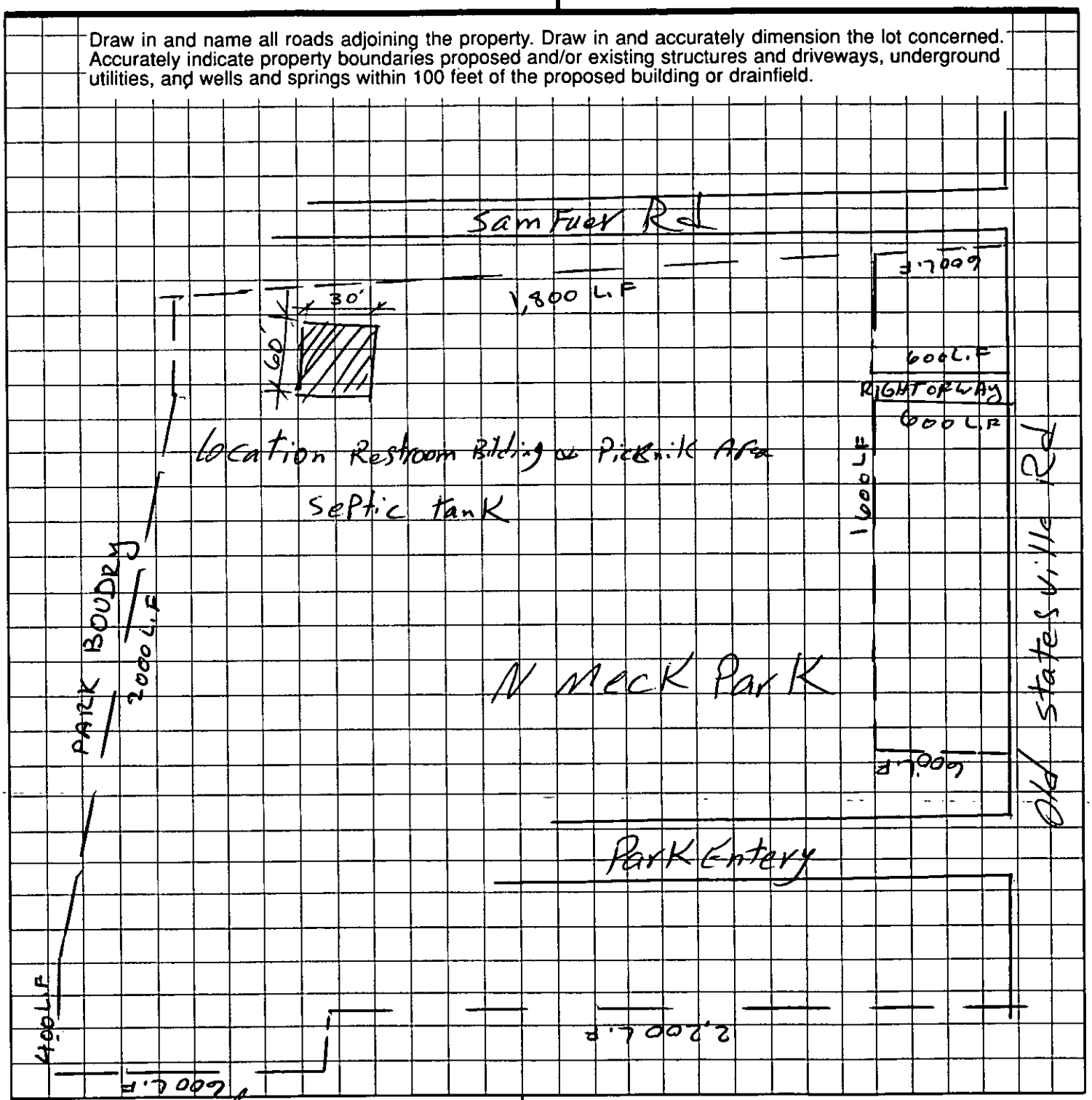
PROPOSED PLOT PLAN

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

FILE: 20040

TC: 009-111-19

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.



OWNER/AGENT SIGNATURE

DATE 01/23/01

APPROVAL DATE _____

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

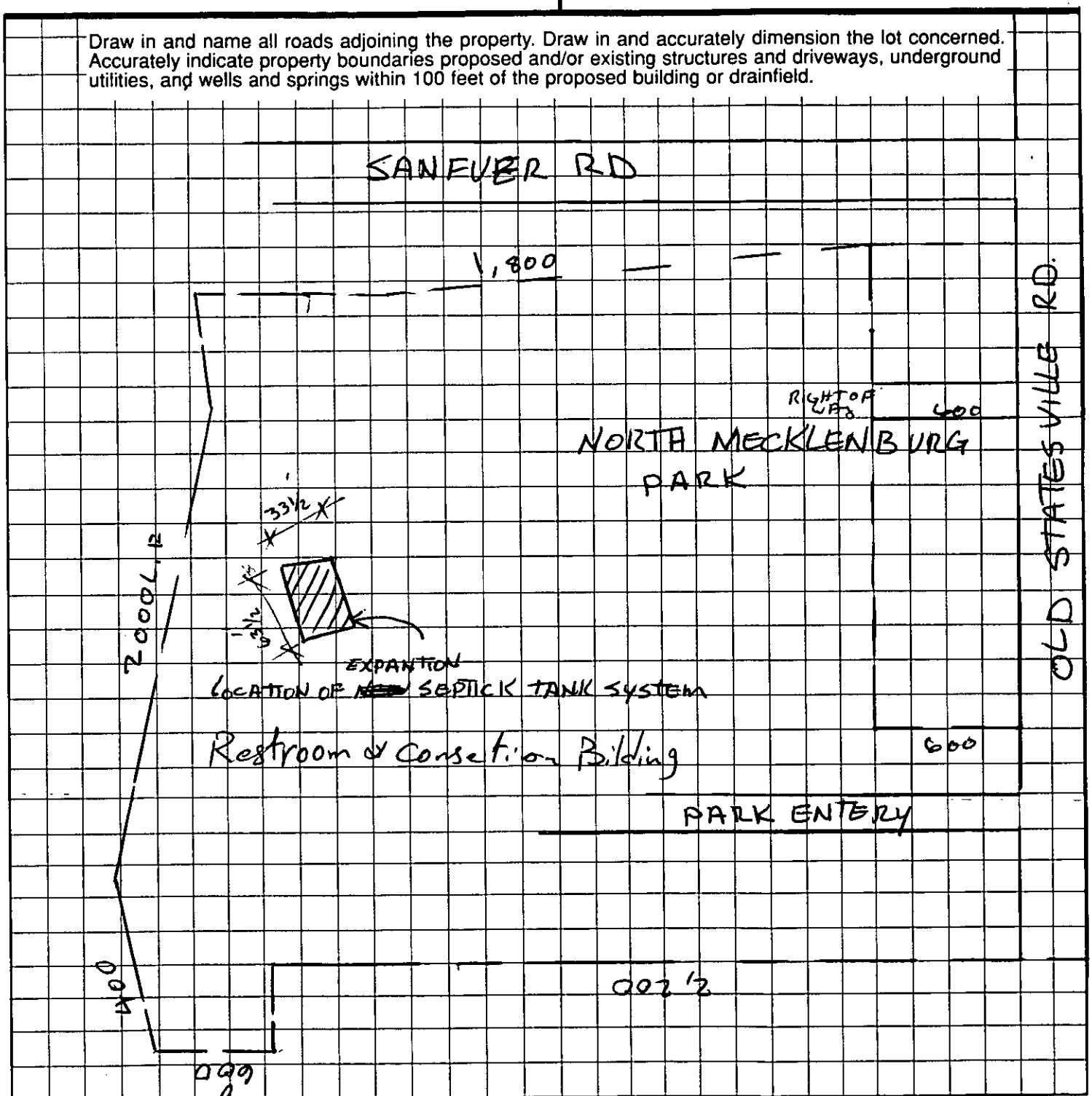
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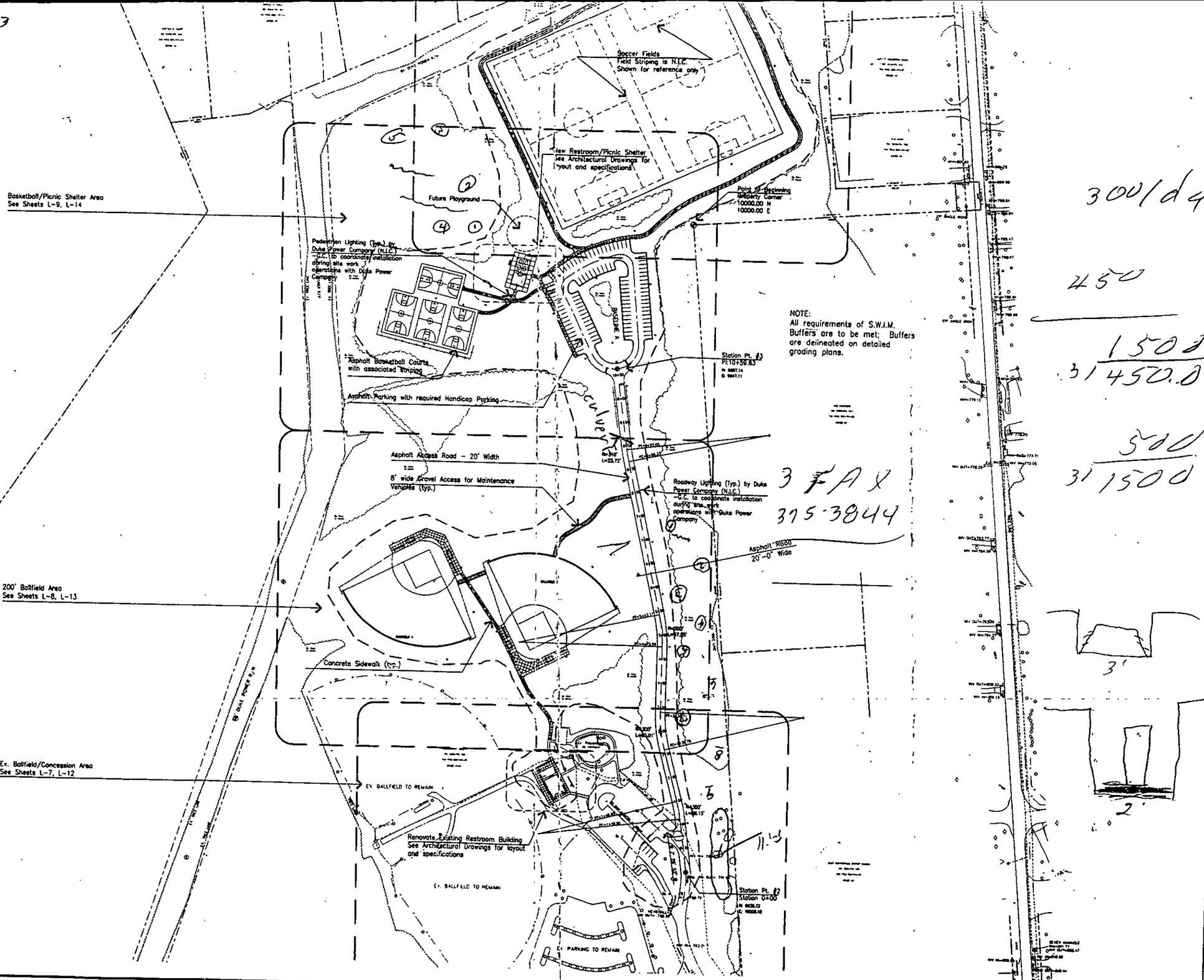
DATE 01/23/01

APPROVAL DATE _____

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

1.0- 2'3x1 g 2.5%12@ 23
8-6"SC150 ~
6-16"SC M1
16-26"C EXP
2-0- 17"S1
17- 37"C MX
3-0-2"S21
2-24"C MX
4-0-6"
0-31-S1
3-6"S21
6-30SC MX
3-0-4"S21
4-24"C MX

300/d4
450
1502
31450.0
500
31500



3 FAX
315-3844

The Natural Place To Be...
Mecklenburg Coun
Park and Recreatic

PROJECT:
NORTH MECKLENBURG PARK - PHASE

PREPARED BY:
Wirth & Associa
LANDSCAPE ARCHITECTS AND LAND P
910 East Blvd. Suite 253
Charlotte, NC 28203
Phone/Fax: 704-375-1588

NORTH

NORTH CAROLINA REGISTERED LANDSCAPE ARCHITECT 429 GARY N. WIRTH

DRAWN BY: SF
CHECKED BY: GN
SCALE: 1" = 100'-0
DATE: 12/1/9
REVISIONS:

NO:	DATE:	DESCRIPTION:	BY
1	1/25/00	PER REVIEW COMMENTS	JH
	6-6-00	ISSUED FOR BIDS	

SHEET TITLE:
SITE LAYOUT CONTROL PLAN

SHEET NO.:
L-6

PROJECT NO.: 98043

Jay Higginbotham

375-1586

ADD ALTERNATE #2: Soccer Field Athletic Lighting
-Provide and install complete new athletic field lighting for the new soccer fields as delineated on drawing sheets E-1 and E-2. Work shall include but not be limited to electrical conduits and hook-ups, connection to Main Distribution Panel, light poles and fixtures, and all other labor and materials required to complete the work to perform as designed. Base Bid to include empty conduits as shown on the plans.

ADD ALTERNATE #4 :Soccer Field Preparation and Sprigging
-Provide and install complete the Soccer Field fertilization, sub-soil preparation, and sprigging for the two soccer fields as shown on the drawings and as specified herein per Sections 13500 and 02938. Base Bid shall include all rough and fine grading, drainage and permanent seeding as specified in section 02910.

9 / L-19 ADD ALTERNATE #5: Asphalt Walking Trail Around Soccer Fields
-Provide and install complete the asphalt walking trail around the soccer fields as shown on the plans and as specified herein. Alternate to include, but not be limited to, sub-grade preparation, base course, asphalt paving and installation of four park benches w/concrete pads complete in the locations shown. Trail is to be crowned @ 1/4" per ft. typical. Base Bid to include all rough and fine grading, drainage and permanent grassing per section 02910.

Node Pt. #10 (Corner of Soccer Field)
N: 10000.30
E: 9733.02

Future Playground Area (N.I.C.)
-Base Bid to include grading, drainage, and permanent seeding

5 / L-20 Concrete Paving Around Picnic Shelter

2 Picnic Grills on Concrete Pad

Picnic Shelter
See Architectural Drawings for layout & specifications

Node Pt. #9 (Corner of Picnic Shelter)
N: 9864.58
E: 9821.24
See Sheet L-6 for POB

Brick Drop Inlet (typ.)
See Sheet L-14

Node Pt. #8 (Corner of Basketball Court)
N: 9828.08
E: 9509.23

Node Pt. #14 (Corner of Soccer Field)
N: 10109.51
E: 9963.45

Node Pt. #11 (Corner of Soccer Field)
N: 10098.66
E: 9938.34

Contractor to purchase and install (2) Picnic Tables and (2) Handicapped Picnic Table in Shelter. Tables shall be permanently mounted to concrete slab. Find locations to be determined by Owner's Representative.

Limit of Field Prep & Sprigging (Add Alternate NO. 4)

7 / L-22 Restroom Sign

6 / L-20 Accessible Park Bench (Typ.)

Limits of Asphalt Trail -Add Alternate #5

Conc. Walk Base Bid

Asphalt Trail Add Alternate

6" Dia. Schedule40 PVC sleeve under pavement- 24" below finished grade. Insert 12" of #4 rebar in each end and cap each end.

Node Pt. #1 (POB: Property Corner)
N: 10000.00
E: 10000.00

Note:
1. All outdoor lighting associated with outdoor recreational facilities shall not shine directly into yards of a residential use nor into the windows of a residential structure.
2. All steet, parking lot, and pedestrian lighting shall not exceed 20' in height.
3. All street, parking lot, and pedestrian lighting should not exceed 6 fc, and should use full spectrum bulbs.

Curve #3
R=26.00'
Arc L=45.00'
Ch. L=39.60'

Curve #2
R=270.00'
Arc L=121.76'
Ch. L=120.73'

Curve #1
R=23.00'
Arc L=30.35'
Ch. L=28.20'

Street Lights by Duke Power Company
-C.C. to coordinate installation w/power company.

20' SHOEBOX STREET LIGHTS PROVIDED AND INSTALLED BY DUKE POWER CO. G.C. TO COORIDINATE INSTALLATION WITH DUKE POWER.

7 / L-21 Asphalt Basketball Court (Typ.)

8 / L-19 Park Bench w/ concrete pad (Typ.) 8 Total around Basketball Courts

10' Ht. Chain Link Fence

1,2,3 / L-22 Required Accessible Parking, Signage, and Ramp (typ.)

Court Color Coating
-Refer to spec.s

8 / L-21 Basketball Court Striping
-Typ. for Ea. Court

Basketball Goal (typ.)
-Refer to spec.s
-Total No. of Goals = 8

Node Pt. #7 (Corner of Basketball Court)
N: 9717.42
E: 9528.96
See Sheet L-6 for POB

Add Alternate No. 6: Color Court Surfacing
-Provide and install complete the color court coatings for the four basketball courts as shown on the drawing and as specified in Section 02512 and as shown on detail #9, sheet L-21. Base Bid to include all court paving, black asphalt sealant, equipment and painted white court striping per the drawings.

4 / L-20 1'-6" Curb & Gutter (typ.)

9 / L-22 Directional Sign-"B"

Node Pt. #3 (Pt. Station 10+39.63)
N: 9887.14
E: 9847.11

End Centerline Striping @ Stop Bar

Painted Stop Bar
-Per DOT/Mutco Stnd.s
-Size = 2'-0" x 11'-6"
-Total Qty = 3

"Stop" Sign
-Per DOT/Mutco Stnd.s
-Total Qty = 3

3 / L-20 Asphalt Road See Sheet L-6 for layout

3 / L-21 Diamond Rail Fence 86 Linear ft each side

1-2.3.4.6.10@ 2.3''
0- 3'' sch 9
3-8' 37/SM
6- 10 1/2'' SC RLA
16-27'' C EXP

22
16
10
10
14
16
96
6
576

The Natural Place To Be...
Mecklenburg County Park and Recreation

PROJECT:
NORTH MECKLENBURG PARK - PHASE 2

PREPARED BY:
Wirth & Associates
LANDSCAPE ARCHITECTS AND LAND PLANNERS
910 East Blvd Suite 203
Charlotte, NC 28203
Phone/Fax: 704-379-1588

NORTH

NORTH CAROLINA REGISTERED LANDSCAPE ARCHITECT 429 CARY N. WIRTH

DRAWN BY:	CKG
CHECKED BY:	GNW
SCALE:	1" = 30'-0"
DATE:	12/1/99

REVISIONS:

NO:	DATE:	DESCRIPTION:	BY:
1	1/25/00	PER REVIEW COMMENTS	JHH
-	6/8/00	ISSUED FOR BIDS	-

SHEET TITLE:
BASKETBALL AREA LAYOUT PLAN

SHEET NO.:
L-9

PROJECT NO.: 98043

Mecklenburg County

This page is left in the original file as a placeholder. The following item(s) were removed from the original file prior to scanning and returned post scanning:

- **Large-format Drawings**

Original File Number: 20040 / 16131

Box Number: 17

Number of pages associated with file: 1

General Comments: _____

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