SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

☒ NEW SEPTIC ☐ REPAIR ☐ USE EXISTING ☐ MODIFIED PLOT PLAN ☐ ALTERATION

File Number: 11837B

Assigned Inspector: Heather W.

☒ IP $250.00: HW 12/20/23 Initial/Date

☐ IP Commercial $450.00: _____ Initial/Date

☐ CA & OP $400.00: _____ Initial/Date

☐ Alteration Fees $300: _____ Initial/Date

☐ Modified Plot Plan Fees $100.00: _____ Initial/Date

☐ Use Existing Fees $100.00: _____ Initial/Date

☐ Use Existing Approved ☐ Use Existing Denied

☐ Send IP permit for signature: _____ ☐ Signature received: _____

☐ Floor plans reviewed

☐ Generate CA ☐ Approve as Noted in Winchester

☐ This site is served by septic and well. Verify each is complete before final hold is released

☐ This septic system requires a certified operation contract before final hold is released

☐ Certified operator contract is on file: _____

☐ Septic file complete: _____

☐ Release final hold in Winchester: _____

Comments:

System denied due to available space. Please mail a copy of the denial letter.

11837B/14317

MECKLENBURG COUNTY
HEALTH DEPARTMENT

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: 04303722
STREET ADDRESS: 5618 Douglas street
CITY: Charlotte
STATE: NC ZIP: 28269
SUBDIVISION NAME:
LOT #: 16 LOT SIZE (acres): 4980sqft

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: 1807
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 5

FOUNDATION TYPE:
◉ CONCRETE SLAB ○ BASEMENT WITH PLUMBING
○ CRAWL SPACE ○ BASEMENT WITH NO PLUMBING

5. **IF PLANNING TO EXPAND OR ALTER THE EXISTING SEPTIC SYSTEM PLEASE COMPLETE THE FOLLOWING SECTION:** ☑ N/A

NUMBER OF BEDROOMS TO BE ADDED: _____ NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: _____

6. **WATER SUPPLY:** ○ MUNICIPAL ◉ PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER

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

8. **PLEASE INDICATE AND RANK DESIRED SEPTIC SYSTEM TYPE(S) IN ORDER OF PREFERENCE** *(1-MOST DESIRED 5-LEAST DESIRED):*

☐ N/A ☐ ANY TYPE ☐ CONVENTIONAL ☑ ACCEPTED ☐ INNOVATIVE ☐ ALTERNATIVE ☐ OTHER

8A. **RANK:** ____ ____ ____ ____ ____

9. **DO ANY OF THE FOLLOWING APPLY TO THE PROPERTY IN QUESTION? IF "YES" PLEASE ATTACH SUPPORTING DOCUMENTATION.**

BURIED CABLES, LANDFILLS, STUMPHOLES	○ YES ○ NO	GRADING/SOIL REMOVAL PERFORMED	○ YES ○ NO
EXISTING WASTEWATER (SEPTIC) SYSTEMS	○ YES ○ NO	JURISDICTIONAL WETLANDS	○ YES ○ NO
WELLS, SPRINGS, OR WATER LINES	○ YES ○ NO	APPROVAL REQUIRED BY ANY OTHER PUBLIC AGENCY	○ YES ○ NO
EASEMENTS OR RIGHT-OF-WAYS	○ YES ○ NO	WASTEWATER OTHER THAN DOMESTIC SEWAGE	○ YES ○ NO
CHEMICAL/PETROLEUM STORAGE TANKS	○ YES ○ NO	KNOWN UNDERGROUND CONTAMINATION	○ YES ○ NO
WASTE STORAGE	○ YES ○ NO	GROUNDWATER USE RESTRICTIONS/VARIANCES	○ YES ○ NO

10. **WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?** 08/14/2023 ☐ UNKNOWN

11. **WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?** _____ ☑ N/A

12. **PROPERTY OWNER:**

NAME: TONY ODION BONENO
ADDRESS: 5618 Douglas street
CITY: Charlotte
STATE: NC ZIP: 28269
WORK PHONE: 7047337423
MOBILE PHONE: 7047337423
FAX:
E-MAIL: tboneno504@gmail.com

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

NAME:
ADDRESS:
CITY:
STATE: ZIP:
WORK PHONE:
MOBILE PHONE:
FAX:
E-MAIL:

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 980-314-1680, FAX: 704-336-6894
Email: Wellreg@MecklenburgCountyNC.gov

Revised on: 4/20/17

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.

TOB (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.

TOB (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.

TONY ODION BONENO — Property Owner's or Owner's Legal Representative Signature

12/20/23 — Date

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: 12/20/23

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

APPLICATION PROCESSED BY: AD

GWS FILE NUMBER ASSIGNED: 1183713

APPLICATION ID NUMBER ASSIGNED: 14317

COMMENTS:

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 980-314-1680, FAX: 704-336-6894
Email: Wellreg@MecklenburgCountyNC.gov

File #: 118378

PROPOSED PLOT PLAN

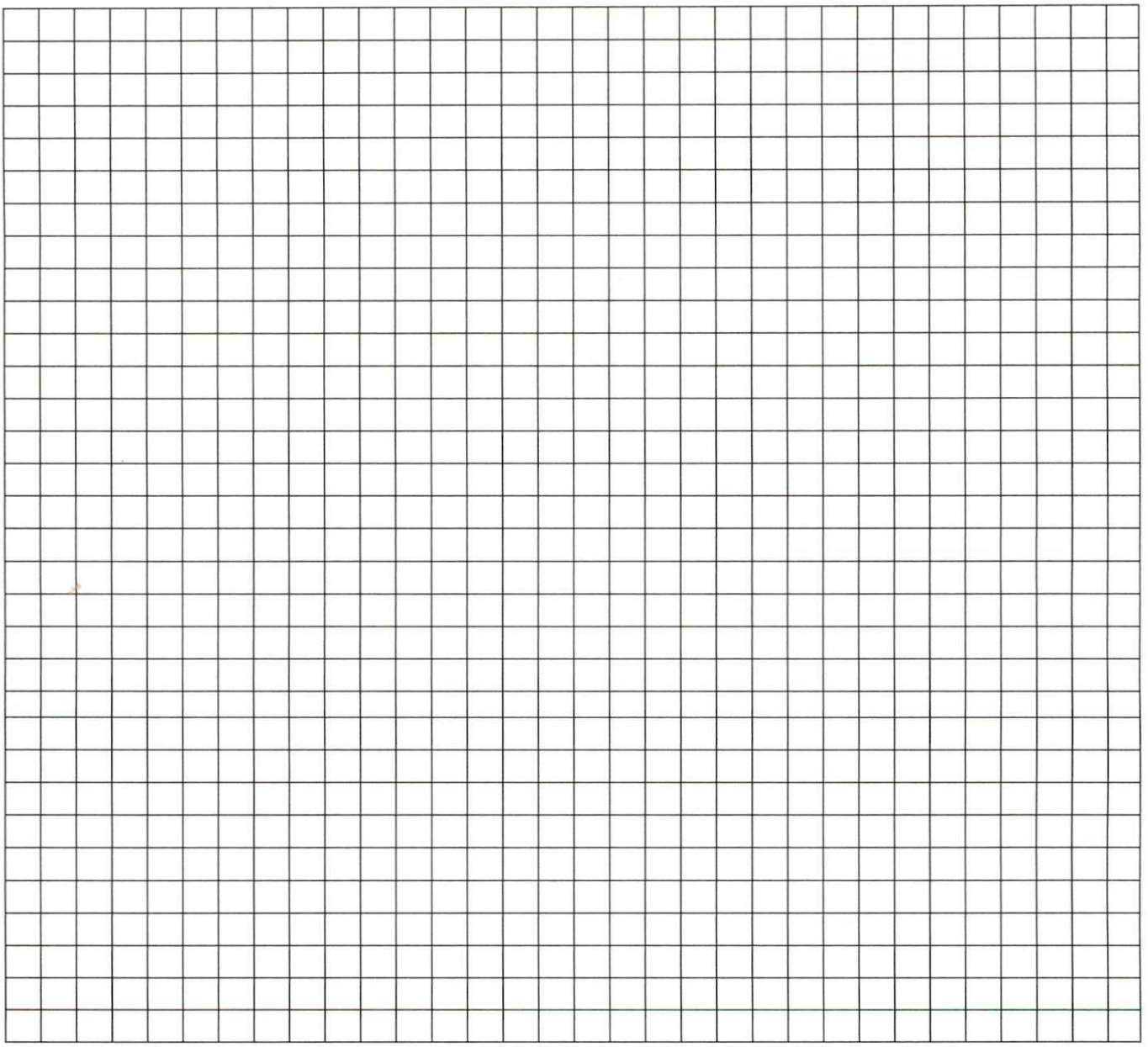
A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), 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: 5618 Douglas street

Tax Parcel #: 04303722

Subdivision Name: Charlotte

Lot #: 16



TONY ODION BONENO

Property Owner's or Owner's Legal Representative Signature

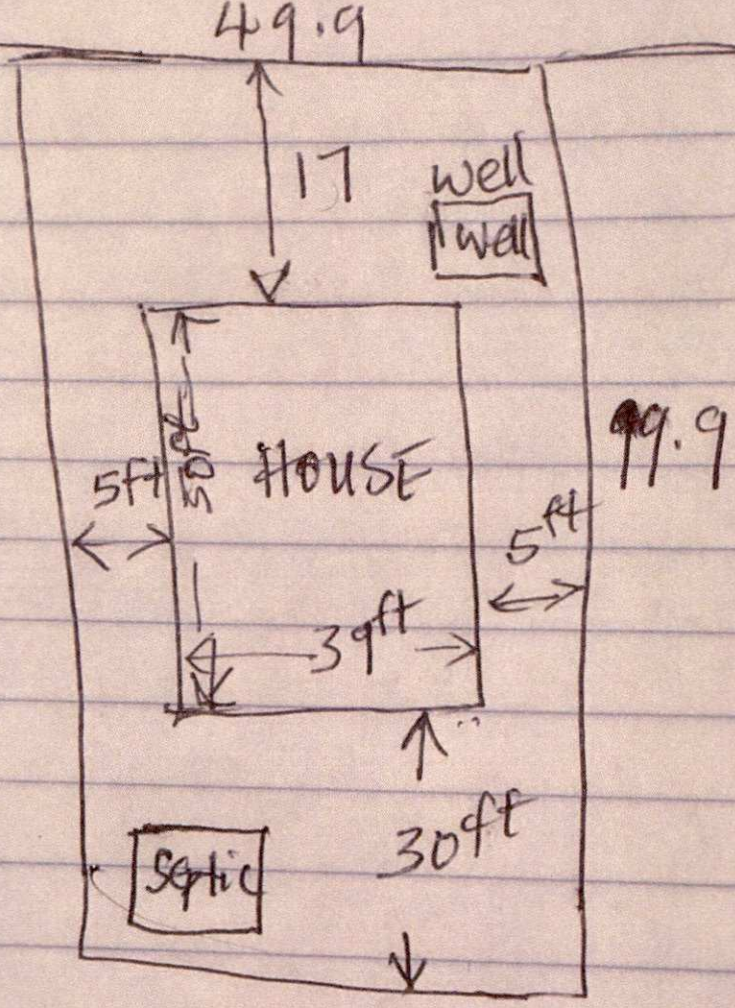
12/20/23

Date

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 980-314-1680, FAX: 704-336-6894
Email: Wellreg@MecklenburgCountyNC.gov

Revised on: 4/20/17

5618 Douglas Street Charlotte NC 28269



MECKLENBURG COUNTY
Environmental Health
Groundwater & Wastewater Services

BASIC STEPS FOR A NEW SEPTIC SYSTEM

Submit a complete application for an **Improvement Permit** to Mecklenburg County Groundwater & Wastewater Services (GWS). A proposed site plan of the property must accompany the application (refer to page 2 for additional information). If available, a survey may be used in place of the site plan. **However, a survey of the property is not required in order to apply for an Improvement Permit**. If a legal agent is representing the property owner, written documentation of representation must accompany the application. All required fees must be submitted with the application in order for GWS to process your request. Please refer to the current fee schedule for fee amounts.

Next, a representative from GWS will visit the site to conduct a soil investigation. Upon completion of the investigation the applicant will be provided with the results of the investigation. The application will then be assigned to an Environmental Specialist for completion. If the site is deemed suitable or provisionally suitable for a septic system, GWS will issue an **Improvement Permit**.

The Improvement Permit:

- Approves the site for installation of a septic system;
- Is transferable to a new owner;
- Is valid for 5 years from the date of issuance;
- May be valid beyond 5 years upon request by the applicant. Additional specific documentation is required for these approvals.
- **MAY BE REVOKED IF SITE PLANS OR INTENDED USE CHANGE.**

Prior to receiving a Building Permit, the current property owner must receive an Authorization for Septic System Construction from GWS. The **Authorization for Construction** may be requested and completed at the same time the Improvement Permit is issued. If the Authorization for Construction is issued at a later time an additional site visit may be required prior to issuing the Authorization for Construction.

The Authorization for Construction:

- Is required in order to obtain a building permit;
- Is not transferable;
- Is valid for a period equal to the validity of the Improvement Permit, not to exceed 5 years; and
- Requires payment of remaining permit fees

When the site is ready for installation of the septic system, the septic system contractor must contact GWS to receive an **Installation Approval**. The contractor is required to have this approval **before** beginning system installation. All septic system contractors must be licensed by the North Carolina On-Site Wastewater Contractors and Inspectors Certification Board (NCOWCICB). A list of licensed septic tank contractors registered in Mecklenburg County is available upon request.

3205 Freedom Drive, Suite 8000 • Charlotte, NC 28208 • 980-314-1680 • FAX (704) 336-6894
www.charmeck.org http://groundwater.charmeck.org

Once the system has been installed, the septic system contractor will contact GWS to schedule a final inspection. When the system has been inspected and approved, GWS will issue an **Operation Permit** and the system may be placed into service.

Please contact GWS at 980-314-1680 if you have questions concerning permitting procedures.

Fees may be paid in person, by mail, or by telephone. The check should be made payable to Mecklenburg County Health Department. Fees may be charged to an account. Visa and MasterCard accounts are currently accepted. Please include the file number, tax parcel number, address and/or job location with all payments.

SITE PLAN DRAWING REQUIREMENTS TO BE SUBMITTED WITH APPLICATION FOR IMPROVEMENT PERMIT

A proposed site plan drawing of the property is required before the application for an Improvement Permit can be processed. It is the responsibility of the applicant to provide the proposed site plan to GWS when the permit application is submitted. Forms are provided by GWS.

The proposed site plan drawing must include the following:

- The tax parcel number of the property
- Property lines and dimensions
- The specific proposed location of the building or structure. Include building dimensions, porches, decks, garages, driveways, pool, storage sheds, etc.
- Show the road the property fronts or the road where the proposed driveway originates and any other roads that adjoin the property
- Wells or other water supplies
- Streams, ponds or other surface waters
- Location of any of the following:
  - --buried cables, landfills, stumpholes
  - --existing wastewater systems
  - --easements or right-of-ways
  - --wells, springs or waterlines
  - --designated wetlands
  - --drainage ditches/culverts on or adjacent to property

Mecklenburg County

Environmental Health

Groundwater & Wastewater Services

How to Prepare Your Property for an Improvement Permit:

The following items must be done before a Mecklenburg County Health Department representative can visit your site:

- Identity and mark all property corners
    - **Note: For tracts larger than 2 acres contact this department for specific instructions relating to identifying property lines.**
- All property lines should be marked every 50 feet.
- You are responsible for marking all structures to be built on site.
- Clearing excessive underbrush (i.e., thick briars, pine thickets, broom sage bushes, kudzu, honeysuckle, weeds, etc.) is required to allow thorough inspection for soil and wastewater system layout.
    - **Note: Absolutely no grading, filling, or cutting shall occur on site prior to evaluation for permit issuance.**
- When lot is clearly marked as above instructions require, give our office a call at 980-314-1680. We will then connect you with the inspector who will complete the soil test.

Note: Failure to follow these instructions properly can result in a 2-week delay in processing your application. If the lot is improperly marked and results in an additional trip a $100 extra trip fee may apply.

By signing below, I acknowledge that I have fully read and understand this document.

TONY ODION BONENO — 12/20/23

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

3205 Freedom Dr. Suite 8000 J, Charlotte NC • 28208 • (980) 314-1680 • Fax (704) 336-6894

Last Modified: 8/7/23

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	12/20/23	**Amount:**	250.00
Receipt #:	145561	**Tendered:**	250.00
Check / Auth #:	MC 183602	**Returned:**	0.00
Received By:	ORTIZMP		

Account Information

Account #:	200000
Contractor:	TONY ODION BONENO
Attn:	
Address:	5618 DOUGLAS ST
Address:	
City/State/Zip:	CHARLOTTE, NC 28269

Item	Description	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 5618 DOUGLAS ST	1	250.00	250.00

Permit#

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
				555.00	

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

Sheet: 1 of 2
Property ID: 04303722
Lot #: NA
File #:11837b
AppID: 14317

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Property owner:Tony Boneno
Address5618 Douglas Street
Proposed Facility: 34 bedroom
Location of Site:5618 Douglas St
Water Supply: [ ] Public [X] Individual
Evaluation Method: [x] Auger Boring
Type of Wastewater: [X] Sewage

Design Flow (.1949): 480
[X] Well
[ ] Pit
[ ] Industrial Process

Applicant: sandra blythe edens
Date Evaluated: 1/3/24
Property Size:
Property Recorded:
[ ] Spring [ ] Municipal
[ ] Cut
[ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	SOIL MORPHOLOGY .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
Boring #1	SS 2%	0 - 6	sbk CL	SS SP FR SEXP	>48	48	NA	NA	yellow brown modling 30	PS IV .275
		6 - 35	sbk C	S P FI SEXP						
		35-48	sbk CL	SS SP FR SEXP						
Boring #2	SS 2%	0 - 4	sbk CL	SS SP FR SEXP	>48	48	NA	NA	yellow borwn modling	PS IV .275
		4 - 38	sbk C	S P FI SEXP						
		38 - 48	sbk CL	SS SP FR SEXP						

Description	Initial System	Repair System
Available Space (.1945)	us	
System Type(s)		
Site LTAR (gpd/sq ft)	.275	

Other Factors (.1946):
Soil Evaluation By: Heather Ray
Others Present: Applicants
Site Classification (.1948):
Site Evaluation By: Heather Ray
Others Present:

COMMENTS:

Landscape Position	Group	Texture	.1955 LTAR	Structure
R-Ridge	I	S-Sand	1.2 - 0.8	sg-Single Gra
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-Subangul
HS-Head Slope				abk-Angular B
CC-Concave Slope	III	Si-Silt	0.6 - 0.3	pl-Platy
CV-Convex Slope		SiCL-Silty Clay Loam		pr-Prismatic
T-Terrace				Sap-Saprolite
FP-Flood Plain		CL-Clay Loam		**Structure Pre**
D-Drainage Way		SCL-Sandy Clay Loam		w-weak
				m-moderate
		SiL-Silt Loam		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
FR-Friable	S-Sticky	EXP-Expansiv
FI-Firm	VS-Very Sticky	
VFI-Very Firm	NP-Non-Plastic	**Classificatior**
EFI-Extremely Firm	SP-Slightly Plastic	US-Unsuitable
	P-Plastic	PS-Provisiona
	VP-Very Plastic	S-Suitable
		NA-Not Applic

Sketch of Soil Evaluation Locations



MECKLENBURG COUNTY

Raynard Washington, PhD, MPH
Health Director

Health Department

(704) 336-4700

January 4, 2024

Re: Application for improvement permit for:
Property Location: 5618 Douglas St
Health Department File Number: **11837b**

Dear Property Owner or Owner's Agent:

The Mecklenburg County Health Department, Environmental Health Division on January 3, 2024 evaluated the above-referenced property at the site designated on the site plan that accompanied your improvement permit application. According to your application the site is to serve a 3 bedroom, with a daily design flow of 360 gallons per day. The evaluation was done in accordance with the laws and rules governing wastewater systems in North Carolina General Statute 130A-333 and related statutes and Title 15A, Subchapter 18A, of the North Carolina Administrative Code, Rule .l900 and related rules.

Based on the criteria set out in Title 15A, Subchapter 18A, of the North Carolina Administrative Code, Rules .1940 through .1948, the evaluation indicated that the site is **UNSUITABLE** for a ground absorption sewage system. Therefore, your request for an improvement permit is **DENIED.** A copy of the site evaluation is enclosed. The site is unsuitable based on the following:

- ☐ Unsuitable soil topography and/or landscape position (Rule .1940)
- ☐ Unsuitable soil characteristics (structure or clay mineralogy) (Rule .1941)
- ☐ Unsuitable soil wetness condition (Rule .1942)
- ☐ Unsuitable soil depth (Rule .1943)
- ☐ Presence of restrictive horizon (Rule .1944)
- ☒ Insufficient space for septic system and repair area (Rule .1945)
- ☐ Unsuitable for meeting required setbacks (Rule .1950)
- ☐ Other (Rule .1946)

These severe soil or site limitations could cause premature system failure, leading to the discharge of untreated sewage on the ground surface, into surface waters, directly to ground water or inside your structure.

The site evaluation included consideration of possible site modifications, and modified, innovative or alternative systems. However, the Health Department has determined that none of the above options will overcome the severe conditions on this site. A possible option might be a system designed to dispose of sewage to another area of suitable soil or off-site to additional property.

MECKLENBURG COUNTY
Raynard Washington, PhD, MPH **Health Department** (704) 336-4700
Health Director

For the reasons set out above, the property is currently classified **UNSUITABLE,** and an improvement permit shall not be issued for this site in accordance with Rule .1948 (c).

However, the site classified as **UNSUITABLE** may be classified as **PROVISIONALLY SUITABLE** if written documentation is provided that meets the requirements of Rule .1948(d). A copy of this rule is enclosed. You may hire a consultant to assist you if you wish to try to develop a plan under which your site could be reclassified as **PROVISIONALLY SUITABLE.**

You have a right to an informal review of this decision. You may request an informal review by the soil scientist or environmental health supervisor at the local health department. You may also request an informal review by the N. C. Department of Health and Human Services regional soil specialist. A request for informal review must be made in writing to the local health department.

You also have a right to a formal appeal of this decision. To pursue a formal appeal, you must file a petition for a contested case hearing with the Office of Administrative Hearings, 6714 Mail Center, Raleigh, NC 27699-6714. To get a copy of a petition form, you may write the Office of Administrative Hearings or call the office at (919) 431-3000 or from the OAH web site at http://www.oah.state.nc.us/hearings. The petition for a contested case hearing must be filed in accordance with the provision of North Carolina General Statutes 130A-24 and 150B-23 and all other applicable provisions of Chapter 150B. N. C. General Statue 130A-335(g) provides that your hearing would be held in the county where your property is located.

Please note: If you wish to pursue a formal appeal, you must file the petition form with the Office of Administrative Hearings **WITHIN 30 DAYS OF THE DATE OF THIS LETTER.** The date of this letter is January 4, 2024. Meeting the 30-day deadline is critical to your right to a formal appeal. Beginning a formal appeal within 30 days will not interfere with any informal review that you might request. Do not wait for the outcome of any informal review if you wish to file a formal appeal.

If you file a petition for a contested case hearing with the Office of Administrative Hearings, you are required by law (N.C. General Statute 150B-23) to send a copy of your petition to the North Carolina Department of Environment and Natural Resources. Send the copy to: Office of General Counsel, N. C. Department of Environment and Natural Resources, 1601 Mail Service Center, Raleigh, NC. 27699-1601. Do **NOT** send the copy of the petition to your local health department. Sending a copy of your petition to the local health department will **NOT** satisfy the legal requirement in N.C. General Statute 150B-23 that you send a copy to the Office of General Counsel, NCDENR.

You may call or write the local health department if you need any additional information or assistance.

Sincerely,

Heather Ray , REHS
Environmental Specialist