

5125 MT OLIVE CHURCH RD

11337101

6/13/08

marliwr

Groundwater and Wastewater Services File Imaging Project
May 2007
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N.C. Department of Environment and Natural Resources
Division of Environmental Health

Inspection of Engineered Subsurface Wastewater System

Mecklenburg County	Mt. Olive United Presbyterian Church	10429
Health Department	**Name of Establishment**	**Permit/Project No.**
5125 Mt. Olive Church Rd., Charlotte NC	Mulit-Purpose Bldg.	1875 GPD
Location	**Type of Establishment**	**Design Flow**
Mt. Olive United Presbyterian Church	Same as location address	
Owner/Agent	**Address**	**Phone**
N/A		
Operator	**Address**	**Phone**
IIIb	06/15/2006	June 2011
System Type	**Date of Inspection**	**Next Inspection Due**

	Yes	No	N/A	Comments:
1. ESTABLISHMENT:				
a. Type, size, and sewage flow in accordance with permit?	☒	☐	☐	
2. COLLECTION SYSTEM:				
a. No evidence of leaks into or out from sewer lines/manholes?	☒	☐	☐	
b. Free of blockages/solids buildup in lines or manholes?	☒	☐	☐	
3. TANKAGE: (Grease Traps/Lift Stations/Septic/Dosing Tanks)				
a. Tank risers accessible and surface water diverted?	☒	☐	☐	
b. Tanks and access manholes structurally sound, watertight?	☒	☐	☐	
c. Sanitary tee(s) in good working condition?.....	☒	☐	☐	
d. Tanks pumped, cleaned out as needed?.....	☒	☐	☐	3.d. Recommend pumping tanks.
4. RAW SEWAGE LIFT STATION (if present):				
a. Required pumps present, operating, and cycling properly	☐	☐	☒	
b. High-water alarm present and operating properly?	☐	☐	☒	
c. Floats/pipe/valves/disconnects in good condition?	☐	☐	☒	
5. EFFLUENT DOSING SYSTEM:				
a. Effluent appears clear, free of excess solids?	☒	☐	☐	5.a. Measured 4"of solids in the dosing tank.
A. PUMP SYSTEMS:				
a. Required pumps present, operating, and cycling properly?	☒	☐	☐	
b. High-water alarm present and operating properly?	☐	☒	☐	5.A.b. High water alarm is not
c. Floats/pipe/valves/disconnects in good working condition?	☒	☐	☐	functioning.
d. Control panel enclosure/components in good condition?	☒	☐	☐	
e. Elapsed time readings: _____ _____ _____ _____				
B. SIPHON SYSTEMS:				
a. No evidence of overflow or siphon leakage?	☐	☐	☒	
b. Siphon(s) appear to be working/alternating properly?	☐	☐	☒	
c. Bells and vents free of debris and in good condition?	☐	☐	☒	

6. GROUND ABSORPTION FIELDS:

a. No evidence of effluent surfacing/reaching surface waters?	☒	☐	☐	Drainfield is in good condition.
b. Minimal ponding in subsurface trenches?	☒	☐	☐	
c. Surface water being effectively diverted away?	☒	☐	☐	
d. Diversions/ditches/swales/tiles drains properly maintained?	☒	☐	☐	
e. Line cover/vegetation adequate/maintained as needed?	☒	☐	☐	6.e. Establish grass cover and keep area
f. Protected from traffic, destructive uses?	☒	☐	☐	mowed on a regular basis.
g. Distribution devices in good condition, working properly?	☒	☐	☐	
h. Repair area properly reserved, maintained?	☒	☐	☐	

A. LOW PRESSURE PIPE DRAIN FIELDS:

a. Turnups/cleanouts/valves intact and accessible?	☐	☐	☒
b. No effluent standing in lower laterals?	☐	☐	☒
c. Laterals free of excess solids, cleaned out as needed?	☐	☐	☒
d. Pressure head is properly adjusted?	☐	☐	☒

OVERALL CONDITION AND OPERATION OF SYSTEM:

1. System functioning within normal limits at time of inspection.
2. No sewage observed on ground surface at time of inspection.

SUMMARY OF REPAIRS REQUIRED AT THIS TIME:

1. Repair high water alarm in dosing tank. May require installation of a new control float.
2. Pump both tanks (3,000 gal. septic & 3,000 gal. dosing) to remove excess solids (preventative maintenance).

***REPAIR WITHIN 30 DAYS.**

SYSTEM MAINTENANCE/IMPROVEMENTS REQUIRED:

*The MCHD recommends having the tanks (septic & dosing) pumped out every 3 to 5 years to remove excess solids.

*Please visit http://groundwater.charmeck.org for additional information.

DATE: 06/15/2006

SIGNED: _____, R.S., AGENT

Division of Environmental Health

Trevor Thomason, (704) 336-5568

Mecklenburg County, North Carolina
POLARIS
Parcel Ownership and GIS Summary

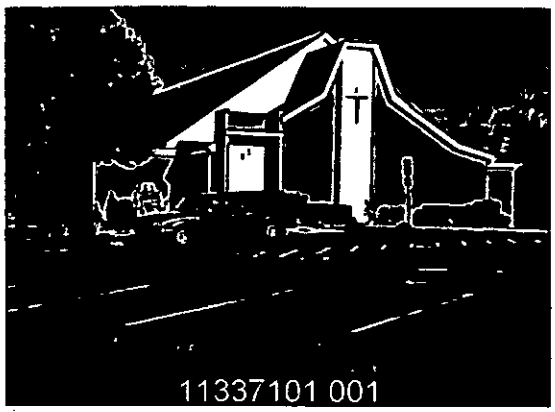
10429

Date and Time: 5/26/2006 12:26:18 PM

Parcel ID #: 11337101 GIS ID #: 11337101	
Owner Name:	PRESBYTERIAN CHURCH MT OLIVE UNITED
Mailing Address:	5125 MOUNT OLIVE CHURCH RD CHARLOTTE, NC 28278-9624
Property Characteristics	
Legal Desc.:	NA
Land Area:	4.5AC
Fire District:	14-STEELE CREEK #1
Special District:	FIRE SERVICE A
Account Type:	EXEMPT
Municipality:	0-MECKLENBURG COUNTY-UNINCORPORATED
Property Use:	GOVT-INST
Deed Reference(s) and Sales Price	
03813-319 (1/2/1976) $0.00	
Situs Addresses Tied to This Parcel	
5125 MT OLIVE CHURCH RD	
Site Location Information	
Zoning Boundaries:	Contact Appropriate Planning Department or See Map.
ETJ Area: CHARLOTTE	
Charlotte Historic Districts: NO	
Within Charlotte 6/30/2005 Annexation Area: NO	
Census Tract #: 59.01	
Parcel Falls Inside SWIM Buffer?: NO	
FEMA Flood Information	
FEMA Panel #:	3701590183E
FEMA Flood Zone:	OUT
FEMA Panel Date:	02/04/2004
Community Flood Information	
Community Flood Zone:	OUT
Regulated Watershed Information	
Watershed Name:	Lower Lake Wylie
Watershed Class:	PA AND CA

Building Photography

PHOTO #1
Location: 5125 MT OLIVE CHURCH RD



Information contained within this photo may be used as a visual aid and to generally locate, identify, and inventory parcels in Mecklenburg County, North Carolina. There are inherent errors and limitations associated with this type of electronic medium. Mecklenburg County cannot warrant or guarantee the information contained herein including but not limited to its accuracy or completeness.

Powered by

MECKLENBURG COUNTY GIS

Tommy Greer
704-572-8114

REV. SHACKLEFORD

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

MECKLENBURG COUNTY

Land Use and Environmental Serivces Agengy

Groundwater and Wastewater Services

May 30, 2006

Presbyterian Church Mt. Olive United

5125 Mt. Olive Church Road

Charlotte NC 28278

Dear Property Owner:

The North Carolina Administrative Code [G.S. 130A-335(a) 15A NCAC 18A .1961(a)(2)(b)(j)] requires Groundwater and Wastewater Services to conduct routine inspections for all Type IIIb, IV, V, and VI septic systems installed or repaired, in Mecklenburg County, after July 1, 1992. You may obtain a copy of the regulations by visiting our web site at http://groundwater.charmeck.org. A copy of the regulations may also be purchased at our office.

Our records indicate that the Type **IIIb** septic system serving the property located at:

5125 Mt. Olive Church Road
Charlotte NC 28278
MCHD File Number: 10429

is due for inspection on: **6/17/06**

The fee for this inspection is $85.00. Your payment should be received in our office no later than June 13, 2006. The system inspection will not be scheduled until payment is received in our office. Failure to comply with these requirements may result in legal action being taken against you.

Please mail payment or present in person to:
Mecklenburg County Health Department, 700 N. Tryon Street, Suite 211, Charlotte, NC 28202
Make checks payable to the Mecklenburg County Health Department. Please include your phone number and the MCHD File Number listed above on the check. Do not mail CASH payment.

After submitting your payment, please contact me at (704) 336-5568 to schedule an inspection time. I encourage you to be present during the inspection. This will allow an opportunity for you to observe the inspection process, receive information regarding your septic system, and ask any questions you may have about your system.

Upon completion of the inspection you will be supplied with a copy of the inspection report. The report will include an assessment of the system's operation and recommendations to ensure your septic system operates in a safe and efficient manner. In addition, if you are served by a private well, a bacteriological sample will be collected and analyzed to assess the quality of your water supply source. This water analysis will be performed at no additional cost.

The septic system inspection and private well sampling programs are important initiatives intended to protect the public's health and groundwater resources in our community. Your cooperation in these efforts is greatly appreciated. Please contact me at (704) 336-5568 if you have any questions regarding this matter.

Sincerely,

Tm Thomas

Trevor Thomason, R.S.
Sr. Environmental Specialist

pd. 6/4/06
check # 4296

Bldg Permit
issued without septic
being added to
Project Scope
Septic release to be
done or address
memo sewer per
Conv w/ J. Waldo + J
Cruz 6/13/01

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 10429 DATE: 6/18/01

TC: 113-371-01 ☒ L ☒ CRT

SERIAL Nº 18612

Name of Owner Mt. Olive Presbyterian Church Juris.: _____

Address of Property 5125 Mt. Olive Church Road

Inspection Data:

Tank Material PCC

Total Length of Drainfield 1662

Number of Lines 12 @ Varying

Cover Depth 16"

Water Supply Source well

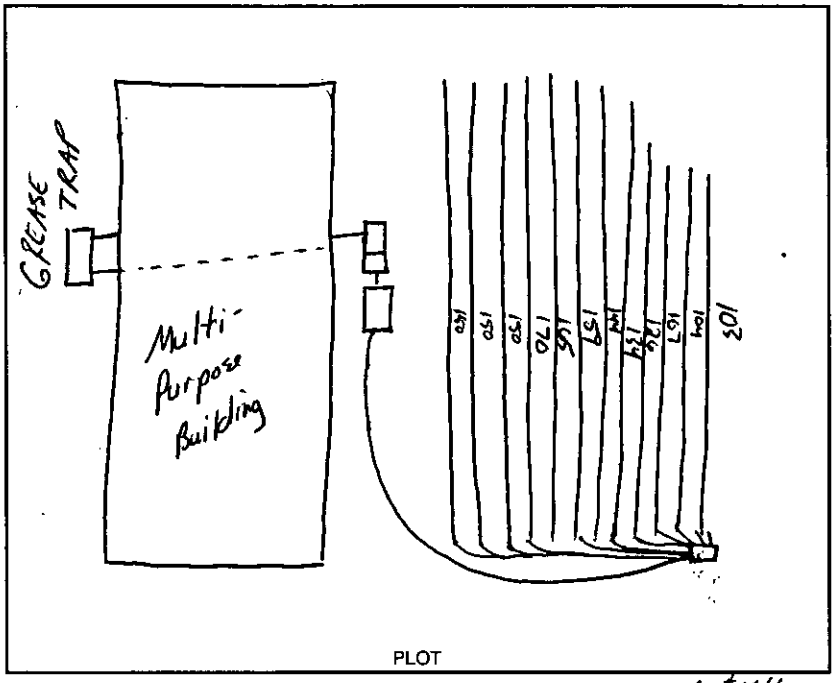
Distance to Water Source >100'

Excavation Inspected 6/18/01

Tank(s) Inspected 6/15/01

Wash Line Inspected NA

High Water Alarm Inspected 6/18/01



Design 3000ST, 3000AT, 2000GT, 4986SFT, CON, 12" Stone, P. Manifold, PI CTR# Wiley Christenbury

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: Church Multi-Purpose Building w/ Day Care
12 lines at varying lengths x 3' x 12" Stone
Type III b Pump to Conventional System
NEMA 4X Simplex Control Panel
Pressure Manifold

Tammy P. Mecklenburg RS
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

Project # 3569650 82

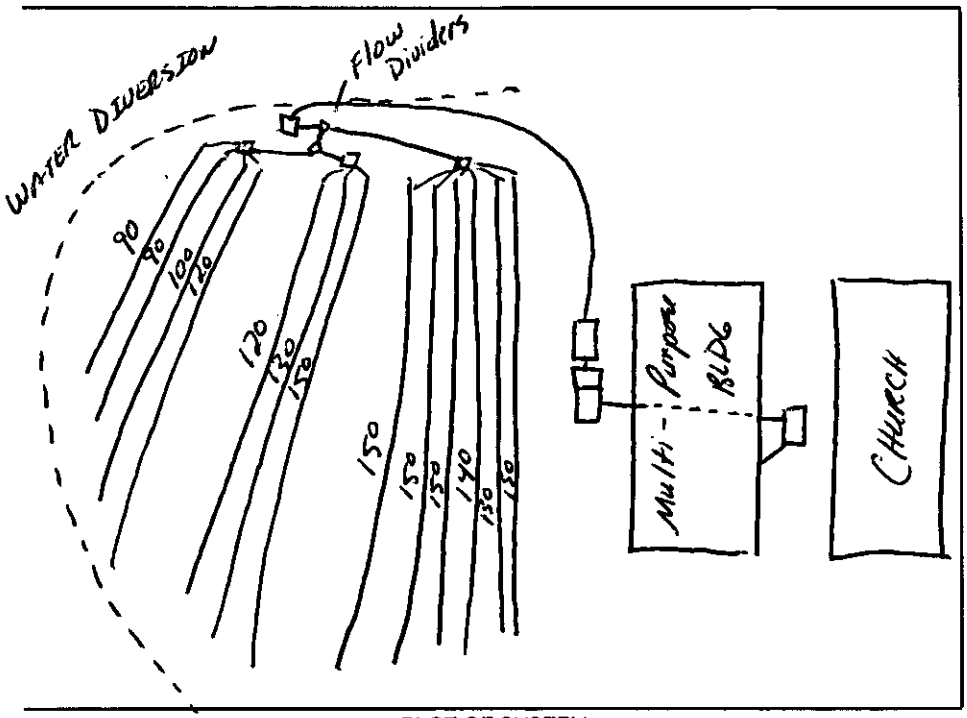
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 10429 DATE: 6/8/01

TC: 113-371-01 L

SERIAL Nº 18654

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 9-11-00. All work shall be completed on or before 7/8/01, 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 3,000 gallons

Liquid Capacity of Dosing Tank 3,000 gallons

Tank Construction AC

Trench Depth 30"

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Trench Walls Scored and Porous yes

Total Line Length 1650 feet

Number of Lines 13

Depth of Stone 12" inches

Distance from House >5' feet

Distance from Property Line >10' feet

Distance from Well >100' feet

2,000 Gallon Grease Trap

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

NAME OF OWNER Mt. Olive Presbyterian Church (Rev. Shackleford)

LOCATION OF PROPERTY 5125 Mt. Olive Church Road

Comments: Church Multi-Purpose Building w/ Day Care
Install 13 lines of varying length w/ Flow Dividers (1650 TLF)
Type IIIb pump to Conventional System

Tammy P. Michalec RS
Environmental Health Specialist

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

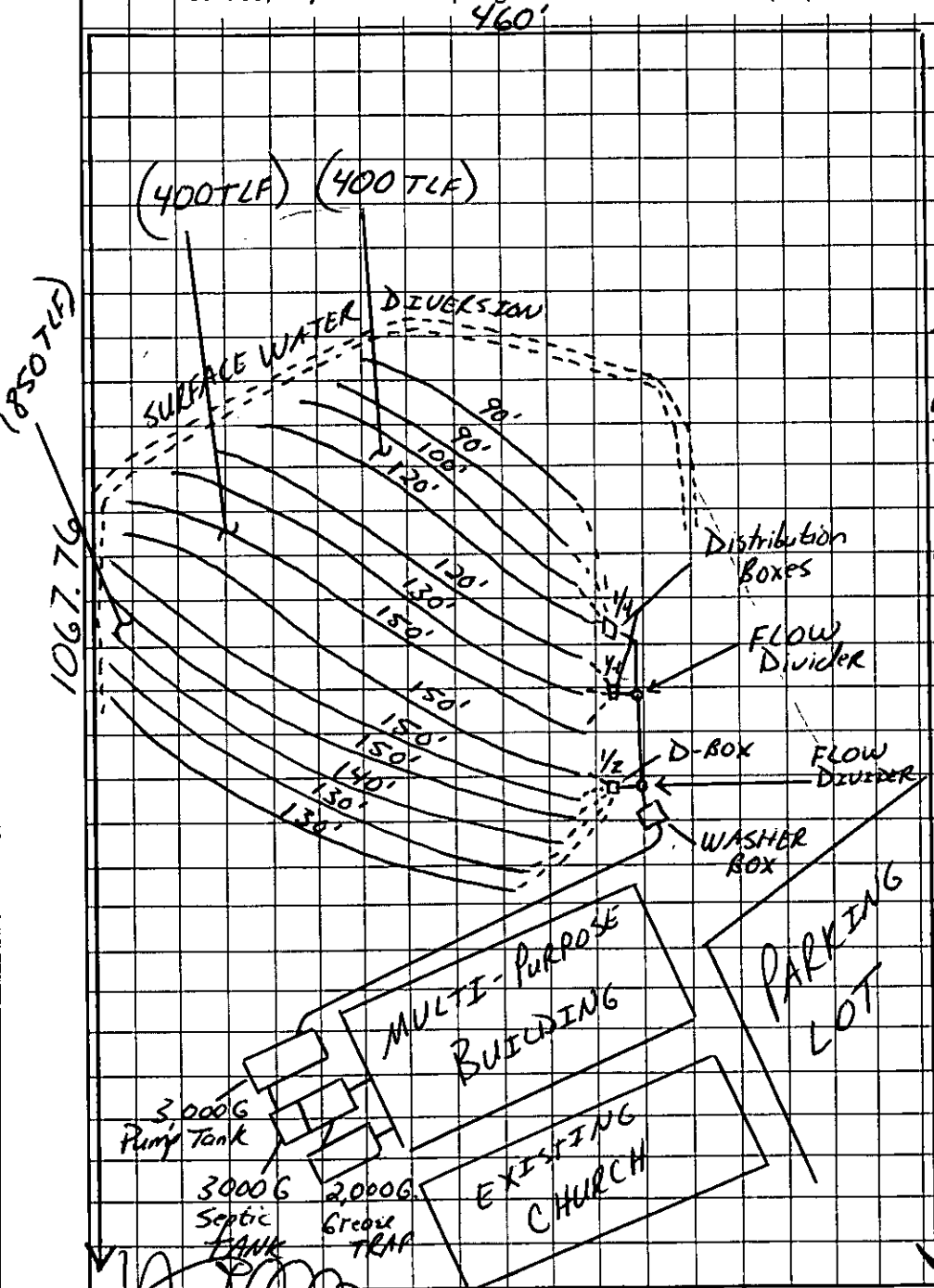
PROPOSED PLOT PLAN

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

FILE: 10429

TC: 113-371-01

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.



COMMENTS

→ Drawing Not to Scale
→ System designed for:
- 300 Members (1500 GPD)
- 25 student day care (375 GPD)

- 2,000 Gallon Grease Trap
- 3,000 Gallon Septic Tank
- 3,000 Gallon Pump Tank
- Install 2 Flow Dividers w/ 3 distribution boxes.
- Install 1650' of drainfield as shown.
- Type III b Pump to Conventional System
- Type III b Repair System - Repair area located at rear of property behind the Cemetery.

OWNER/AGENT SIGNATURE

DATE NOVEMBER 17, 2000

APPROVAL DATE Jimmy P. Mullis 11/16/00

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

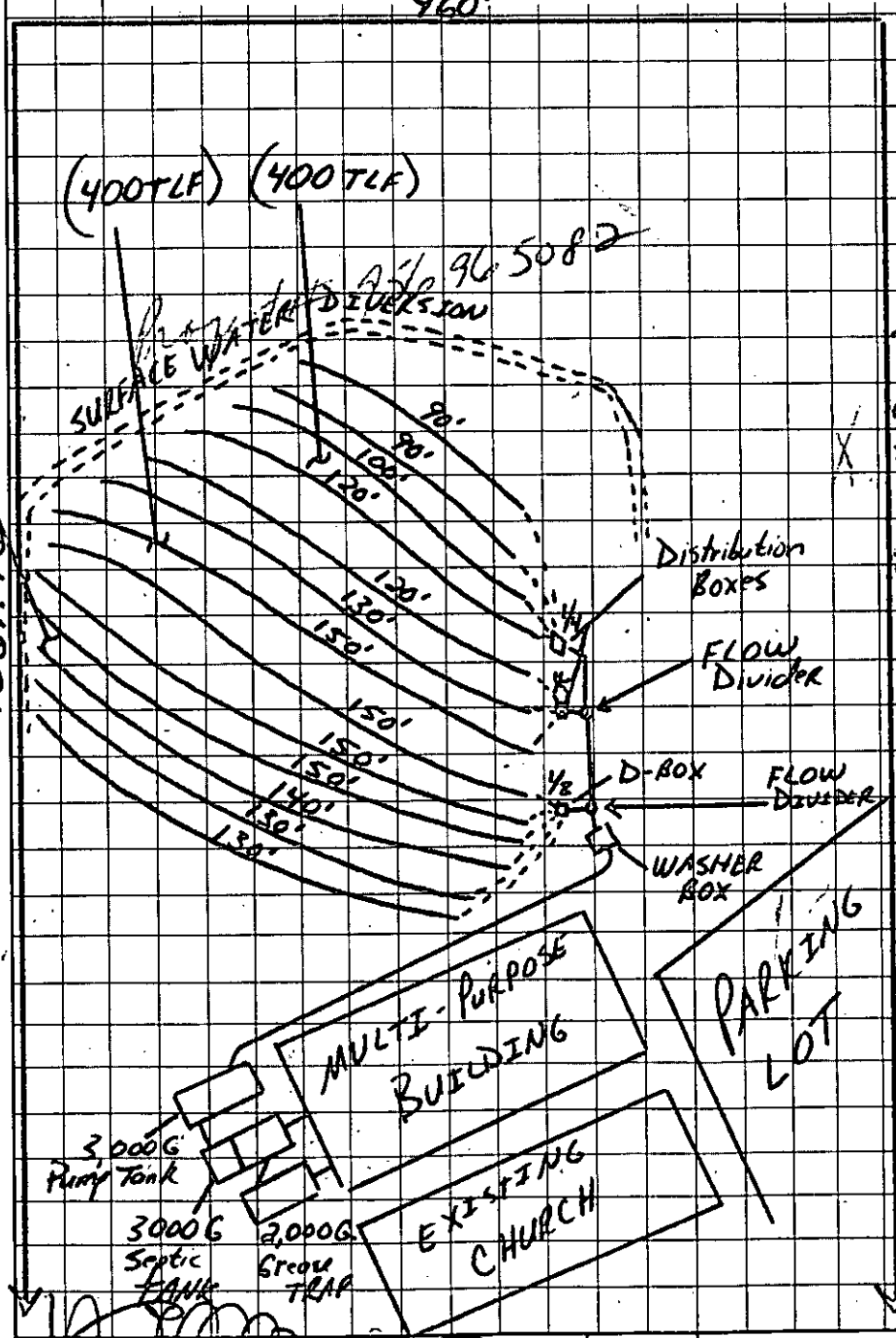
PROPOSED PLOT PLAN

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

FILE: 10429

TC: 113-371-01

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.



COMMENTS

- Drawing Not to Scale
- System designed for 8
- 300 Members (1500 GPD)
- 25 student day care (375 GPD)
- 2,000 Gallon Grease Trap
- 3,000 Gallon Septic Tank
- 3,000 Gallon Pump Tank
- Instal 2 Flow Diverters w/ 3 distribution boxes.
- Install 1650' of drainfield as shown.
- Type III b Pump to Conventional System
- Type III b Repair System - Repair area located at rear of property behind the Cemetery.

OWNER/AGENT SIGNATURE

DATE DECEMBER 17, 2000

APPROVAL DATE Jimmy P. Mulkey 11/16/00

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

Permit Number 10429 Tax Number: 113-371-01

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	X 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	
0.4 Long-term acceptance rate	1875 Max gallons/day wastewater flow	4950 Absorption Area (sq ft)	9' Trench spacing (min. on centers)	
yes Serviced by private well	3,000 Gallon septic tank	1650' Total trench length (ft)	24" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)	
___ ~~Bedrooms in residence~~ 300 Members, 25 staff, day care	3000 Gallon pump tank 2,000 G. Grease Trap	12" Depth of stone		
Any surface waters present: NO Type:		Minimum separation distance:		
Site modifications required:				
Additional Conditions: - Install 13 lines at varying lengths as shown on plot plan (1650 TLF) - Install French drains to divert surface water				
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	
4950 Absorption Area (Sq ft) 1650' 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.

Jeanny P. Medlin 11/16/00
DEHNR Authorized Agent Date

11/17/00
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

00 Rev + Call for AOS

FEE: 300 AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION
DATE: 11/17/00 VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

DATE: _____ PERMIT NO: 10429

PARCEL NO: 113-371-01

JOB LOCATION ADDRESS: 5125 Mt. Olivo Church Road

PROPERTY OWNER: Mt. Olivo Presbyterian Church

BUILDING CONTRACTOR: Dennis Norwood

SUBDIVISION NAME: NA

AUTHORIZATION ISSUED BY: Jeremy P. Mechtis DATE: 11/16/00

DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 10429, AND THE ATTACHED SITE PLAN WITH SYSTEM DETAILS. CONSTRUCTION AND INSTALLATION MUST ALSO MEET ALL REQUIREMENTS SET FORTH IN THE RULES GOVERNING SANITARY SEWAGE COLLECTION, TREATMENT, AND DISPOSAL AND ANY OTHER APPLICABLE RULES AND LAWS.

2. AN INSTALLATION, CONSTRUCTION, ALTERATION AND/OR REPAIR APPROVAL MUST BE SECURED PRIOR TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH MECKLENBURG COUNTY HEALTH DEPARTMENT.

3. ANY ALTERATION IN SITE OR SOIL CONDITIONS (INCLUDING LOCATION OF STRUCTURES AND APPURTENANCES) OR MODIFICATION IN USE, DESIGN WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS AS SPECIFIED IN THE ASSOCIATED IMPROVEMENT PERMIT AND APPLICATION, MAY SUBJECT THIS AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: See Conditions of I.P.

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] 11/17/00

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

MECKLENBURG COUNTY HEALTH DEPARTMENT
Environmental Health Fees

RM

Requestor (please print): KENNY NORWOOD Phone #: 573 5234 Date Requested: 11/17/00 Date Filled:

Account Name: METROLINA BUILDERS, INC Cash Charge Account No.: 43.1750

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

Signature: [signature] Printed Name: KENNY B. NORWOOD Date: 11/17/00

T.C.	Qty	Description	Unit Cost	Total Cost
0701		Improvement Permit Application - Residential	$ 200.00	
0735		Improvement Permit Application - Commercial	$ 400.00	
0702		Optional Site Evaluations	$ 100.00	
0703	1	Installation and Final Approval	$ 150.00	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	1	Authorization for Wastewater System Construction	$ 150.00	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:

4/2000

White-AUDIT Canary-CUSTOMER Pink-DIVISION

FEE: 400

DATE: 9/15/00 Rec'd

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

[ ] CRT

TYPE APPLICATION: [X] 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 #: 10429

PROJECT TRACKING #:

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 113-371-01

STREET ADDRESS: 5125 MT. OLIVE CHURCH RD; CHARLOTTE, NC

LOT NUMBER:

TOWNSHIP (CHECK ONE): MECKLENBURG 1996

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

[✓] RELIGIOUS
[ ] COMMERICAL [ ] INDUSTRIAL

DESCRIBE TYPE OF BUSINESS:
CHURCH MULTI-PURPOSE BLDG.
Square Footage of Facility: 15,260 SF

NUMBER OF EMPLOYEES: _____
PER SHIFT: ___ ___ ___

HOW WILL WATER BE USED IN THE FACILITY:

[✓] TOILETS/URINALS
[✓] HANDSINK
[✓] SHOWERS
[✓] FLOOR DRAINS (IN TOILET ROOMS)

OTHER, PLEASE DESCRIBE:

TYPE OF WASTEWATER:
[✓] 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) [ ] MUNICIPAL (M) [✓] PRIVATE WELL (P) NEW
[ ] 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	WELL SPRINGS OR WATERLINES	[✓] YES [ ] NO
EXISTING WASTE WATER SYSTEMS	[✓] YES [ ] NO	DESIGNATED WETLANDS	[ ] YES [✓] NO
EASEMENTS OR RIGHT-OF-WAYS	[✓] 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: MT. OLIVE PRESBYTERIAN CHURCH

NAME: REV. SHACKLEFORD
(LAST) (FIRST) (MI)

ADDRESS: 5125 MT. OLIVE CHURCH RD

CITY: CHARLOTTE STATE: NC ZIP:

DAYTIME PHONE: ( ) 394-8814

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

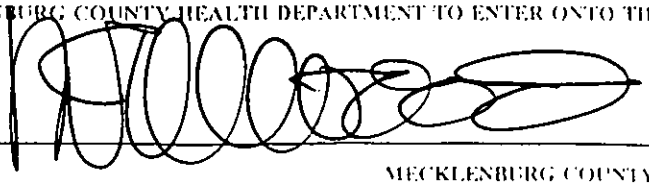
NAME: NORWOOD DENNIS E.
(LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) 953-0834

METROLINA BUILDERS, INC.
FOR THE OWNER

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: 

DATE: 9/11/00

MECKLENBURG COUNTY HEALTH DEPARTMENT
Environmental Health Fees

Requestor (please print): METROLINA Builders Phone #: Date Requested: 9/15/06 Date Filled:

Account Name: Cash Charge Account No.:

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

Signature: Printed Name: 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

5125 MT. OLIVE CHURCH Rd.

4/2000

White-AUDIT Canary-CUSTOMER Pink-DIVISION

S&ME

October 17, 2000

Metrolina Builders
425 Hebron Street
Charlotte, North Carolina 28273

Attention: Mr. Dennis Norwood

Reference: **LABORATORY TEST RESULTS**
Soil Samples
Mount Olive Presbyterian Church
Charlotte, North Carolina
S&ME Project No. 1351-00-738

Gentlemen and Ladies:

S&ME, Inc. has completed the laboratory testing services for the above soil samples. The soil samples were obtained from Mr. William Marlin with the Mecklenburg County Health Department and delivered to our office. Attached are the results of the grain-size with hydrometer analyses performed on the samples.

S&ME, Inc. appreciates the opportunity to assist you during this phase of the project. If you should have any questions concerning this letter and analysis or if we may be of further assistance, please contact us.

Very truly yours,
S&ME, Inc.

Jason S. Reeves, P.E.
Project Engineer

Attachments: Gradation Analyses (S-1 through S-4)

Copies submitted (2)

cc: Mr. William Marlin, L.S.S. (1) - Mecklenburg County Health Dept.
700 N. Tryon Street
Charlotte, NC 28202

S&ME, Inc.
9751 Southern Pine Blvd.
Charlotte, North Carolina 28273

Mailing address:
P.O. Box 7668
Charlotte, North Carolina 28241-7668

(704) 523-4726
(704) 525-3953 fax
www.smeinc.com

Particle Size Distribution Report



	% COBBLES	% GRAVEL		% SAND			% FINES	
		CRS.	FINE	CRS.	MEDIUM	FINE	SILT	CLAY
○	0.0	0.0	0.0	0.0	21.3	20.5	41.4	16.8

	LL	PL	D_{85}	D_{60}	D_{50}	D_{30}	D_{15}	D_{10}	C_c	C_u
○			0.575	0.0985	0.0247	0.0107	0.0043	0.0023	0.50	42.57

MATERIAL DESCRIPTION	USCS	AASHTO
○ WHITE RED ORANGE FINE TO MEDIUM SANDY SILT		

Project No. 1351-00-738 **Client:**

Project: MT. OLIVE PRESBYTERIAN CHURCH

○ **Location:** PIT #6

Remarks:

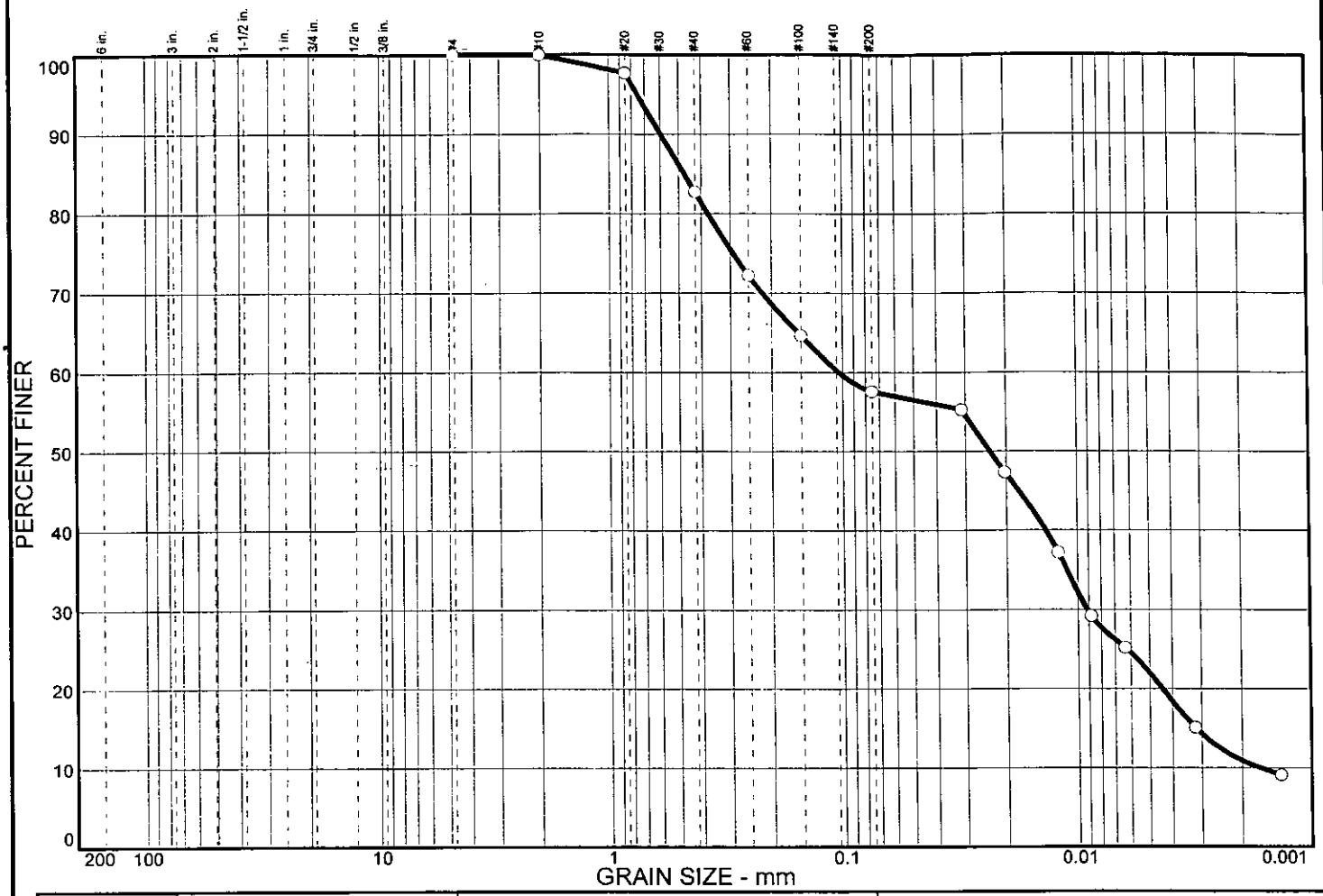
○ TESTED BY JLO

Particle Size Distribution Report

S & ME, INC.

SAMPLE S-1

Particle Size Distribution Report



	% COBBLES	% GRAVEL		% SAND			% FINES	
		CRS.	FINE	CRS.	MEDIUM	FINE	SILT	CLAY
○	0.0	0.0	0.0	0.0	17.3	25.1	35.6	22.0

	LL	PL	D_{85}	D_{60}	D_{50}	D_{30}	D_{15}	D_{10}	C_c	C_u
○			0.473	0.103	0.0235	0.0091	0.0032	0.0017	0.48	61.51

MATERIAL DESCRIPTION	USCS	AASHTO
○ WHITE RED ORANGE MEDIUM TO FINE SANDY SILT		

Project No. 1351-00-738 **Client:**

Project: MT. OLIVE PRESBYTERIAN CHURCH

○ **Location:** PIT #7

Remarks:

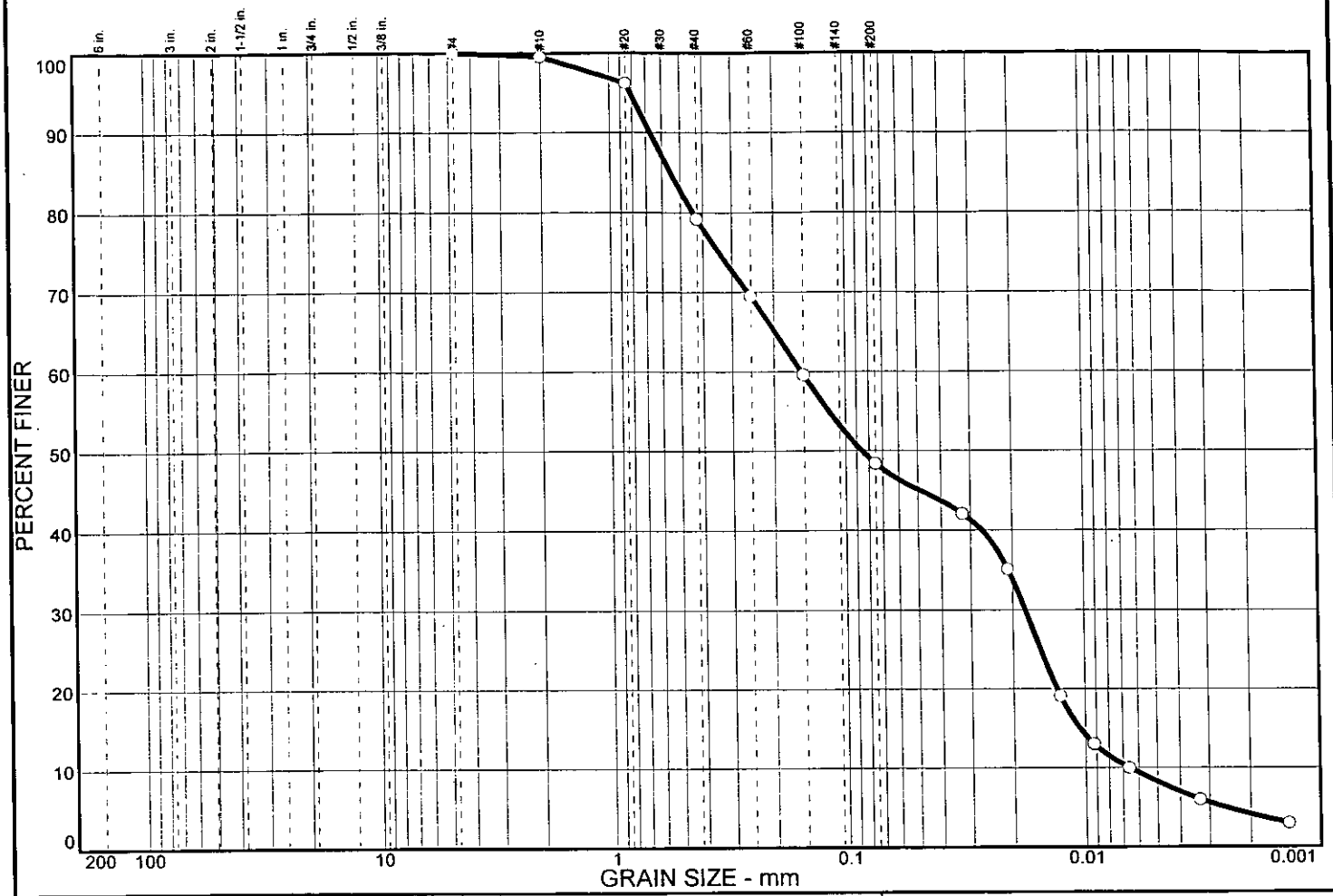
○ TESTED BY JLO

Particle Size Distribution Report

S & ME, INC.

SAMPLE S-2

Particle Size Distribution Report



	% COBBLES	% GRAVEL		% SAND			% FINES	
		CRS.	FINE	CRS.	MEDIUM	FINE	SILT	CLAY
○	0.0	0.0	0.0	0.4	20.4	30.8	40.2	8.2

	LL	PL	D_{85}	D_{60}	D_{50}	D_{30}	D_{15}	D_{10}	C_c	C_u
○			0.550	0.153	0.0855	0.0177	0.0105	0.0066	0.31	23.34

MATERIAL DESCRIPTION	USCS	AASHTO
○ WHITE TAN SILTY MEDIUM TO FINE SAND		

Project No. 1351-00-738 **Client:**

Project: MT. OLIVE PRESBYTERIAN CHURCH

○ **Location:** PIT #9

Remarks:

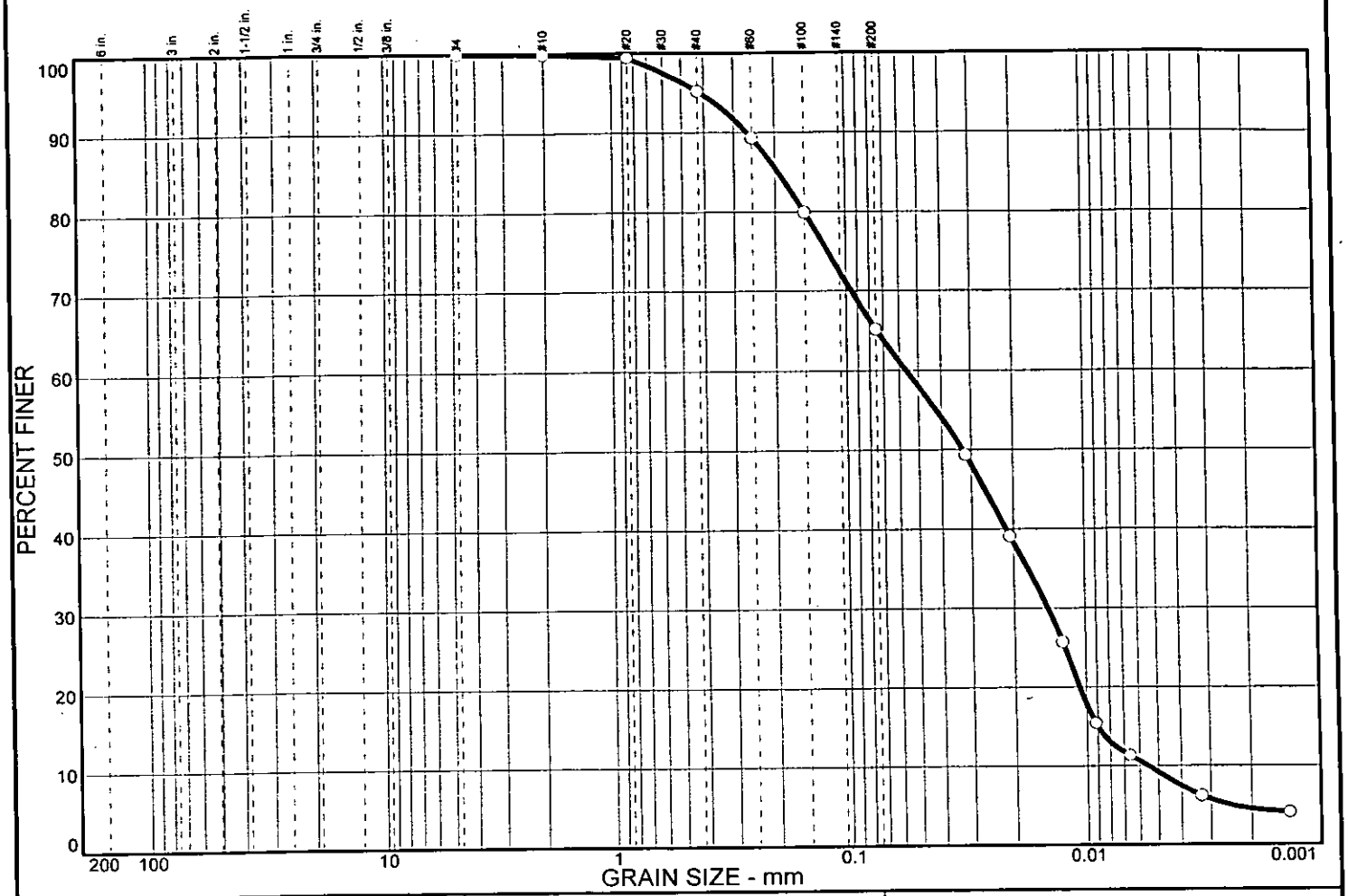
○ TESTED BY JLO

Particle Size Distribution Report

S & ME, INC.

SAMPLE S-3

Particle Size Distribution Report



	% COBBLES	% GRAVEL		% SAND			% FINES	
		CRS.	FINE	CRS.	MEDIUM	FINE	SILT	CLAY
○	0.0	0.0	0.0	0.1	4.7	30.0	56.0	9.2

	LL	PL	D_{85}	D_{60}	D_{50}	D_{30}	D_{15}	D_{10}	C_c	C_u
○			0.194	0.0560	0.0326	0.0145	0.0090	0.0055	0.67	10.10

MATERIAL DESCRIPTION	USCS	AASHTO
○ TAN MEDIUM TO FINE SANDY SILT		

Project No. 1351-00-738 **Client:**

Project: MT. OLIVE PRESBYTERIAN CHURCH

○ **Location:** PIT #11

Remarks:

○ TESTED BY JLO

Particle Size Distribution Report

S & ME, INC.

SAMPLE S-4

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

AS #2

Sheet: _____
Property ID: 113-371-01
Lot #: _____
File #: 10429

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Mt. Olive Presbyterian Church APPLICANT: Dennis Norwood
ADDRESS: 5125 Mt. Olive Church Road, Oakdale DATE EVALUATED: 10-6-00
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949) 1500gpd PROPERTY SIZE: Approx. 15 ac
LOCATION OF SITE: 5125 Mt. Olive Church Road PROPERTY RECORDED: _____
WATER SUPPLY: ☑Private ☐Public ☑Well ☐Spring ☐Other _____
EVALUATION METHOD: ~~☐Augur Boring~~ ~~☐Pit~~ ☐Cut
TYPE OF WASTEWATER: ☐Sewage ☐Industrial Process ☐Mixed

PROFILE #	3 slopes 0-5% 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	0-3"	M/cl	Fr/SEXP/SS/SP	752" TO SOIL WETNESS	52"	PS	None	.3gpf2 II PS
		3-52"	M/L	Fr/SEXP/SS/SP					
2	LS	0-5"	M/scl	Fr/SEXP/SS/SP	762" TO SOIL WETNESS	62"	PS	None	.4gpf2 II PS
		5-62"	M/SL	Fr/SEXP/NS/NP					
3	LS	0-4"	M/scl	Fr/SEXP/SS/SP	751" TO SOIL WETNESS	51"	PS	None	.4gpf2 II PS
		4-51"	M/SL	Fr/SEXP/NS/NP					
4	LS	0-3"	M/scl	Fr/SEXP/SS/SP	764" TO SOIL WETNESS	64"	N/A	None	.4gpf2 II PS
		3-64"	M/SL	Fr/SEXP/NS/NP					
5	LS	0-10"	M/C	Fr/SEXP/SP	750" TO SOIL WETNESS	50"	~~N/A~~ US	None	US
		10-50"	M/cl	Fr/SEXP/SS/SP					
6	LS	0-3"	M/scl	Fr/SEXP/SP	752" TO SOIL WETNESS	52"	US	None	US
		3-52"	M/cl	Fr/SEXP/SS/SP					
7	LS	0-12"	M/scl	Fr/SEXP/SS/SP	760" TO SOIL WETNESS	60"	US	None	US
		12-60"	M/cl	Fr/SEXP/SS/SP					
8	LS	0-6"	M/scl	Fr/SEXP/SS/SP	754" TO SOIL WETNESS	54"	US	None	US
		6-29"	M/cl	Fr/SEXP/SS/SP					
		29-54"	M/cl	VFr/SEXP/SS/SP					

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): Unsuitable
EVALUATED BY: W.A. Mundis LSS 10-6-00
OTHER(S) PRESENT: _____

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

Sheet: #2
Property ID: 113-371-01
Lot #:
File #: 10429

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
9	LS	0-3"	M/SL	F:/SEXPl SS/SP	>54" TO SOIL WETNESS	54"	US	None	US
		3-54"	M/SL	Fr/SEXPl SS/SP					
10	LS	0-4"	M/SL	Fr/SEXPl SS/SP	>52" TO SOIL WETNESS	52"	PS	None	.4gl F2 PS II
		4-52"	M/SL	Fr/SEXPl SS/SP					
11	LS	0-3"	M/SL	Fr/SEXPl SS/SP	>51" TO SOIL WETNESS	51"	US	None	US
		3-51"	M/SL	Fr/SEXPl SS/SP					
12	LS	0-6"	M/SC	VF:/SEXPl SS/P	>50" TO SOIL WETNESS	50"	PS	None	PS .3gl F2 IV
		6-23"	SAM/SC	F:/SEXPl SS/P					
		23-50"	M/L	Fr/SEXPl WS/WP					
1-A	LS	0-24"	SAM/SC	F:/SEXPl SS/P	>43" TO SOIL WETNESS	43"	N/A	None	PS .3gl F2 IV
		24-43"	SAM/SCL	Fr/SEXPl SS/SP					
2-A	LS	0-39"	SAM/SCL	Fr/SEXPl SS/SP	>39" TO SOIL WETNESS	39"	N/A	None	PS .4gl F2 III

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 # 10429

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

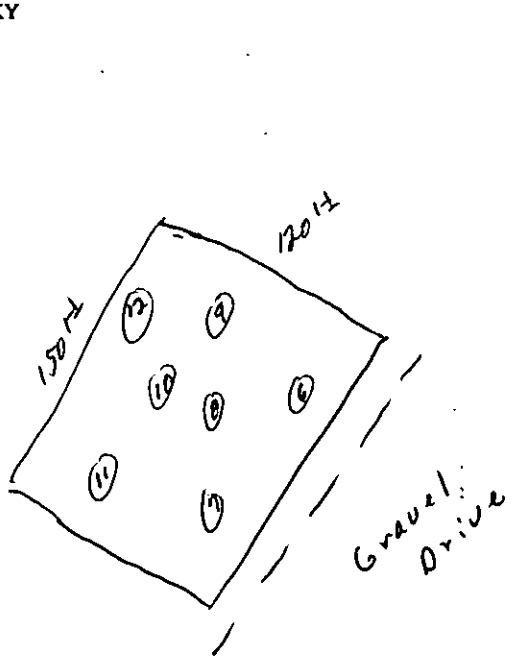
STRUCTURE

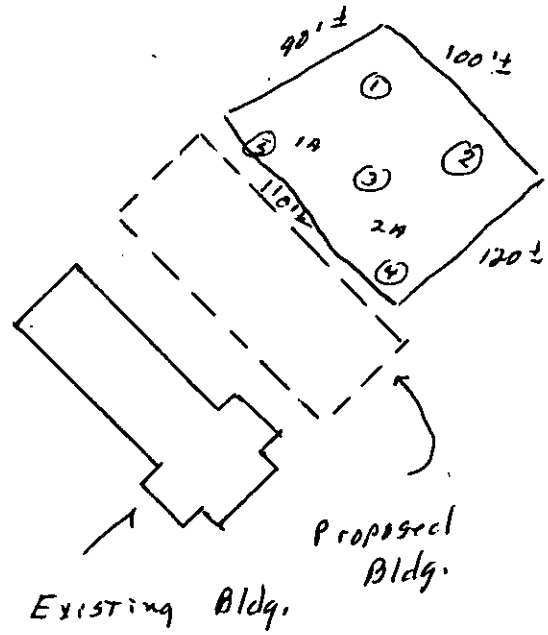
SG-SINGLE GRAIN
M-MASSIVE
CR-CRUMB
GR-GRANULAR
SBK-SUBANGULAR BLOCKY
ABK-ANGULAR BLOCKY
PL-PLATY
PR-PRISMATIC

MINERALOGY

SLIGHTLY EXPANSIVE

EXPANSIVE





Mt. Olive Church Road

FAX TRANSMITTAL COVER SHEET

S&ME
ENGINEERING • TESTING
ENVIRONMENTAL SERVICES

S&ME, Inc.
9751 Southern Pine Boulevard
Charlotte, North Carolina 28273
(704) 523-4726
Fax (704) 525-3953

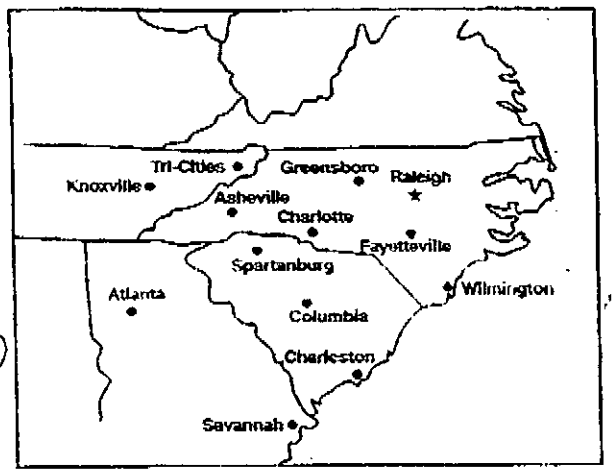
TO: Mr. Bill Marlin

FIRM: Mecklenburg County Heath Dept.

LOCATION: Charlotte, NC

RECIPIENT FAX NUMBER: 336- 6894

FROM: Jason Reeves
CHARLOTTE, NORTH CAROLINA



DATE: 10/16/00 TIME: 3:45 am (pm)

RETURN FAX NUMBER: (704) 525-3953

NUMBER OF PAGES INCLUDING COVER SHEET: 5
(If all pages not received, call (704) 523-4726)

COMMENTS: Re: Mt. Olive Presbyterian Church

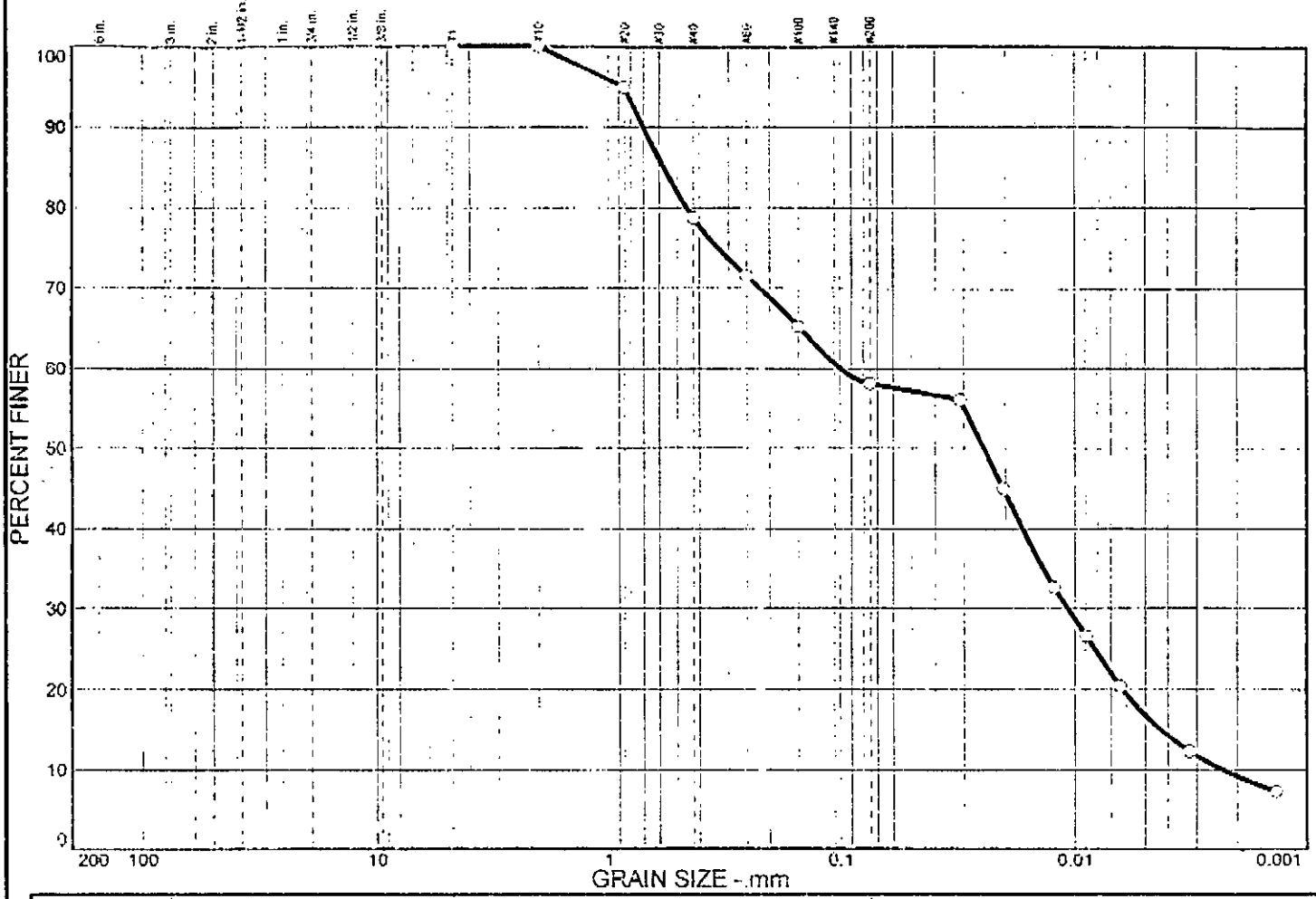
Attached are grainsize analyses results w/ hydrometer for the above referenced project.

Thanks,
Jason Reeves

S&ME Project Number: 1351-00-738

This cover sheet and the documents accompanying this telephony transmission contain information from S&ME, Inc., which is confidential and legally privileged. The information is intended only for use of the individual or entity named on this transmission sheet. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or the taking of any action in reliance on these documents is strictly prohibited.

Particle Size Distribution Report



	% COBBLES	% GRAVEL		% SAND			% FINES	
		CRS.	FINE	CRS.	MEDIUM	FINE	SILT	CLAY
○	0.0	0.0	0.0	0.0	21.3	20.5	41.4	16.8

	LL	PL	D_{85}	D_{60}	D_{50}	D_{30}	D_{15}	D_{10}	C_C	C_u
○			0.575	0.0985	0.0247	0.0107	0.0043	0.0023	0.50	42.57

	MATERIAL DESCRIPTION	USCS	AASHTO
○	WHITE RED ORANGE FINE TO MEDIUM SANDY SILT		

Project No. 1351-00-738 **Client:**

Project: MT. OLIVE PRESBYTERIAN CHURCH

○ **Location:** PIT #6

Remarks:

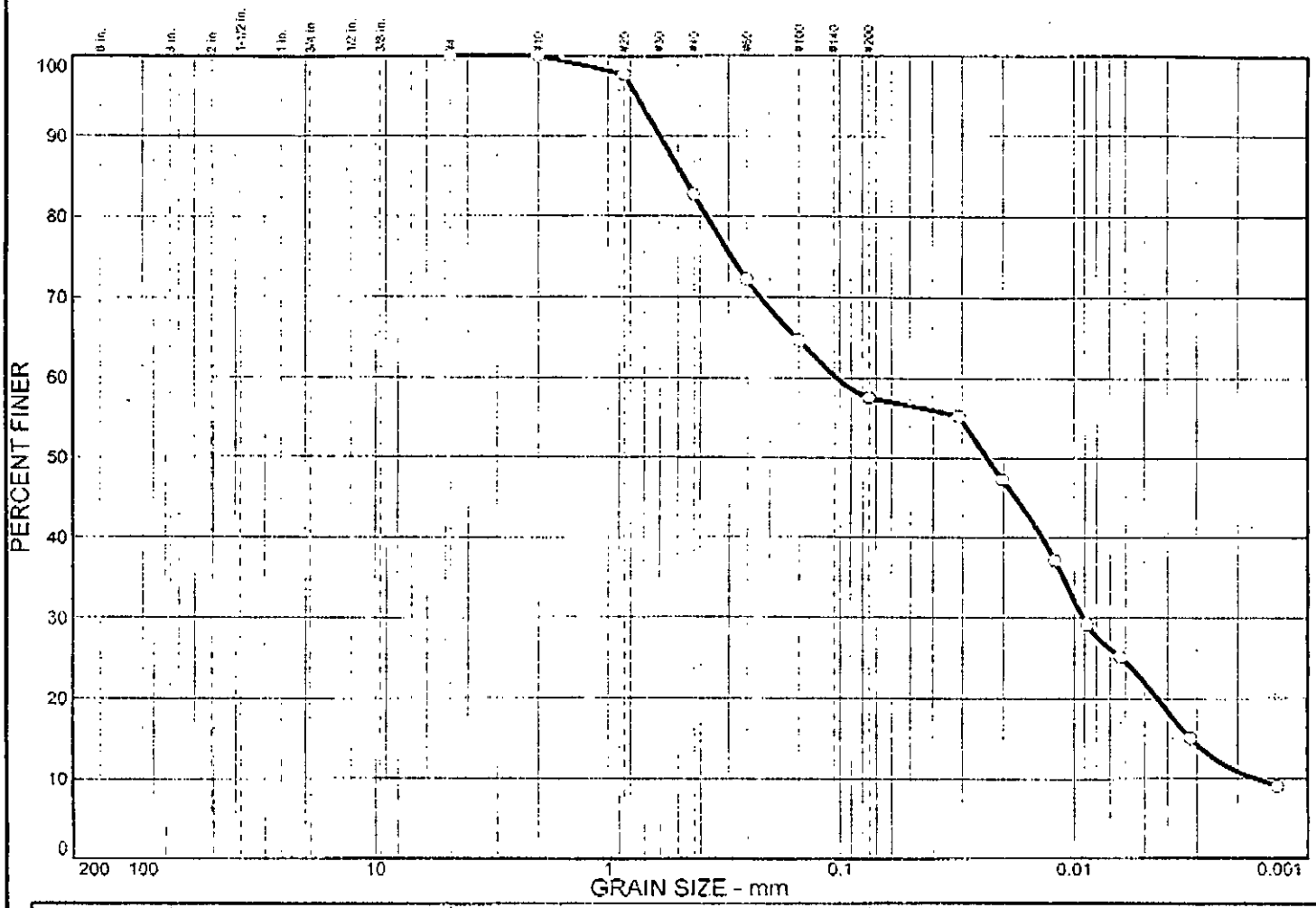
○ TESTED BY JLO

Particle Size Distribution Report

S & ME, INC.

SAMPLE S-1

Particle Size Distribution Report



	% COBBLES	% GRAVEL		% SAND			% FINES	
		CRS.	FINE	CRS.	MEDIUM	FINE	SILT	CLAY
○	0.0	0.0	0.0	0.0	17.3	25.1	35.6	22.0

	LL	PL	D_{85}	D_{60}	D_{50}	D_{30}	D_{15}	D_{10}	C_c	C_u
○			0.473	0.103	0.0235	0.0091	0.0032	0.0017	0.48	61.51

MATERIAL DESCRIPTION	USCS	AASHTO
○ WHITE RED ORANGE MEDIUM TO FINE SANDY SILT		

Project No. 1351-00-738 **Client:**

Project: MT. OLIVE PRESBYTERIAN CHURCH

○ **Location:** PIT #7

Remarks:

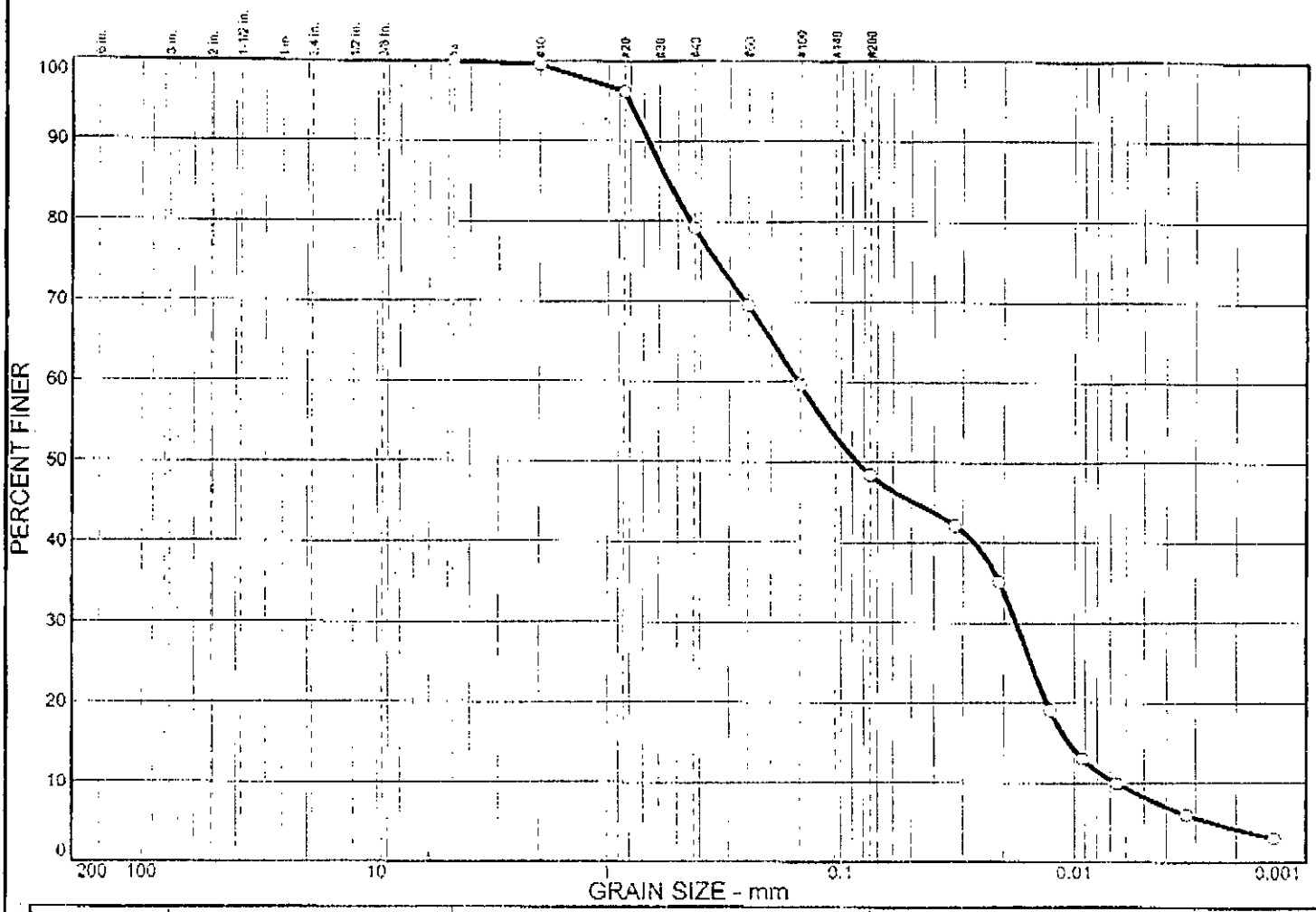
○ TESTED BY JLO

Particle Size Distribution Report

S & ME, INC.

SAMPLE S-2

Particle Size Distribution Report



	% COBBLES	% GRAVEL		% SAND			% FINES	
		CRS.	FINE	CRS.	MEDIUM	FINE	SILT	CLAY
○	0.0	0.0	0.0	0.4	20.4	30.8	40.2	8.2

	LL	PL	D_{85}	D_{60}	D_{50}	D_{30}	D_{15}	D_{10}	C_c	C_u
○			0.550	0.153	0.0855	0.0177	0.0105	0.0066	0.31	23.34

MATERIAL DESCRIPTION	USCS	AASHTO
○ WHITE TAN SILTY MEDIUM TO FINE SAND		

Project No. 1351-00-738 **Client:**

Project: MT. OLIVE PRESBYTERIAN CHURCH

○ **Location:** PIT #9

Remarks:

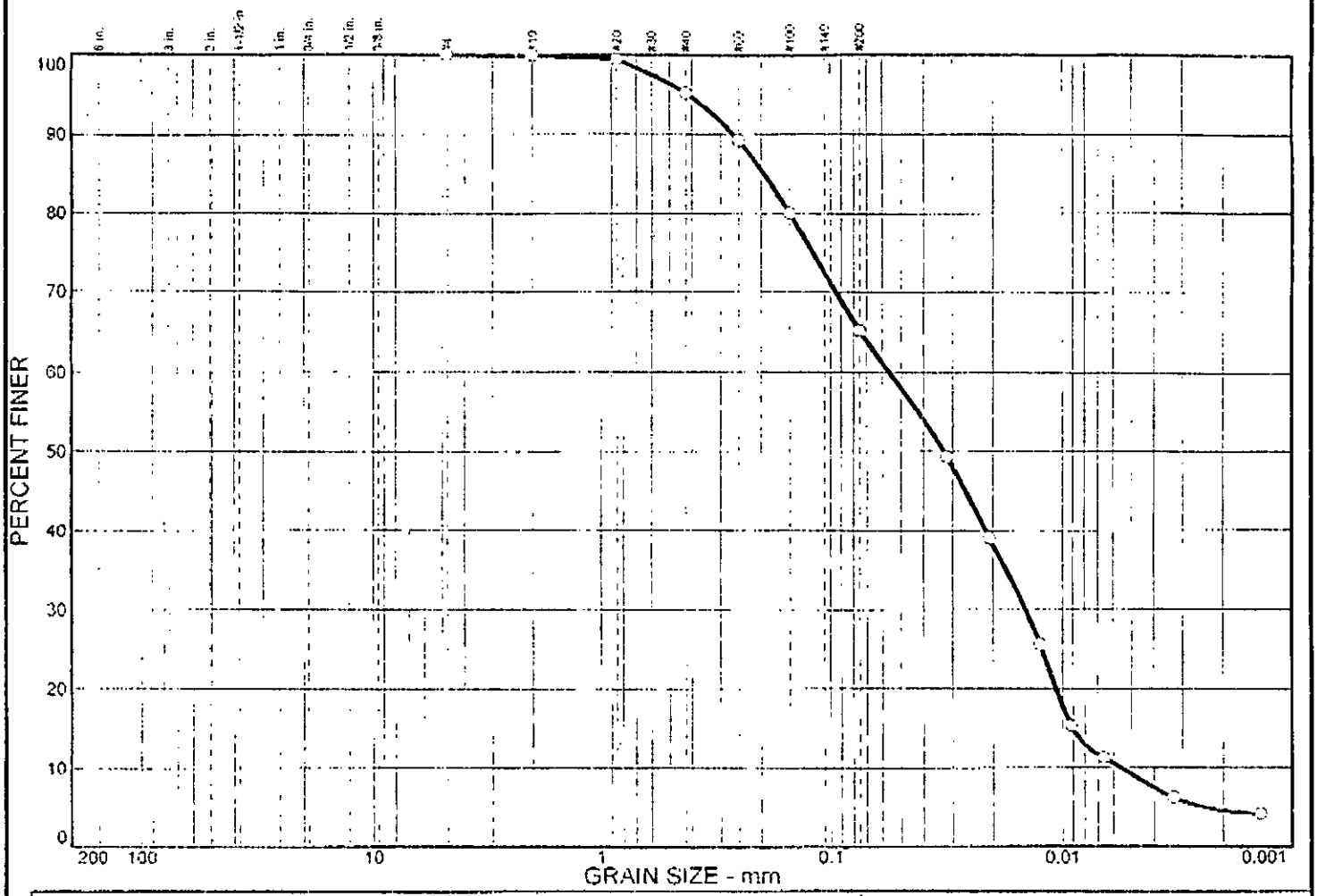
○ TESTED BY JLO

Particle Size Distribution Report

S & ME, INC.

SAMPLE S-3

Particle Size Distribution Report



	% COBBLES	% GRAVEL		% SAND			% FINES	
		CRS.	FINE	CRS.	MEDIUM	FINE	SILT	CLAY
○	0.0	0.0	0.0	0.1	4.7	30.0	56.0	9.2

	LL	PL	D_{85}	D_{60}	D_{50}	D_{30}	D_{15}	D_{10}	C_c	C_u
○			0.194	0.0560	0.0326	0.0145	0.0090	0.0055	0.67	10.10

MATERIAL DESCRIPTION	USCS	AASHTO
○ TAN MEDIUM TO FINE SANDY SILT		

Project No. 1351-00-738 **Client:**

Project: MT. OLIVE PRESBYTERIAN CHURCH

○ **Location:** PIT #11

Remarks:

○ TESTED BY JLO

Particle Size Distribution Report

S & ME, INC.

SAMPLE S-4

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**

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