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#113.20

MECKLENBURG COUNTY
HEALTH DEPARTMENT

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM / WATER SUPPLY WELL

APPLICATION TYPE: (●) SEPTIC ONLY ( ) WELL ONLY (X) SEPTIC & WELL
(●) ADDITION OR RENOVATION WITH OCCUPANCY INCREASE
( ) ADDITION OR RENOVATION WITH NO OCCUPANCY INCREASE
( ) EXCHANGE MOBILE HOME (SAME # BEDROOMS)
( ) COMMERCIAL OR INDUSTRIAL

PERSON FILING APPLICATION:
NAME: Freedom Homes / Kimberly Sneed
ADDRESS: 1124 Charlotte Hwy
CITY: Troutman
STATE: NC ZIP: 28166
PHONE: 704881-2326
ALTERNATE PHONE: 704-528-7960
E-MAIL: KimSneed.Sneed04@gmail.com

PROPERTY OWNER: ☐ SAME AS PERSON FILING APPLICATION
NAME: John Eicher
ADDRESS: 12328 New Bond Drive
CITY: Huntersville
STATE: NC ZIP: 28078
PHONE: 704-490-5057
ALTERNATE PHONE:
E-MAIL:

JOB LOCATION INFORMATION
TAX PARCEL #: 01301338
STREET ADDRESS: 12328 New Bond Dr
CITY: Huntersville, NC 28078
STATE: NC ZIP: 28078

SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #:

WATER SUPPLY:
( ) MUNICIPAL ( ) PRIVATE WELL ( ) PUBLIC WELL (●) SHARED WELL ( ) OTHER

RESIDENTIAL PROPERTY TYPE: ( ) N/A
( ) HOUSE (●) MODULAR HOME ( ) MULTIPLE FAMILY
( ) SINGLE MOBILE HOME ( ) DOUBLE WIDE
(●) OTHER Wanting to install a 1BR modular Home and hook into Existing Septic (Will Be A Inlaw Suit)

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 1
NUMBER OF OCCUPANTS: 1

COMMERCIAL / INDUSTRIAL PROPERTY TYPE: ☐ N/A
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:
INDUSTRIAL WASTES? ( ) YES ( ) NO
UNDERGROUND STORAGE TANKS? ( ) YES ( ) NO

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:
☐ BEDROOM ☐ BATHROOM ☐ KITCHEN ☐ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☐ SUNROOM ☐ PORCH ☐ DECK ☒ OTHER Inlaw Suit...

ADDITION/RENOVATION TYPE DETACHED FROM EXISTING STRUCTURE:
☐ DETACHED GARAGE ☐ DETACHED GARAGE WITH PLUMBING ☐ POOL HOUSE ☐ SHOP ☐ BARN
☐ STORAGE SHED ☐ DETACHED PORCH / DECK ☐ OTHER

*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 the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Kimberly Sneed
Owner's/Agent's Signature

6-4-2020
Date

A PROPOSED PLOT PLAN (see page 2) is required to be submitted with each application.

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208 OFFICE: (980) 314-1680, FAX: 704-336-6894

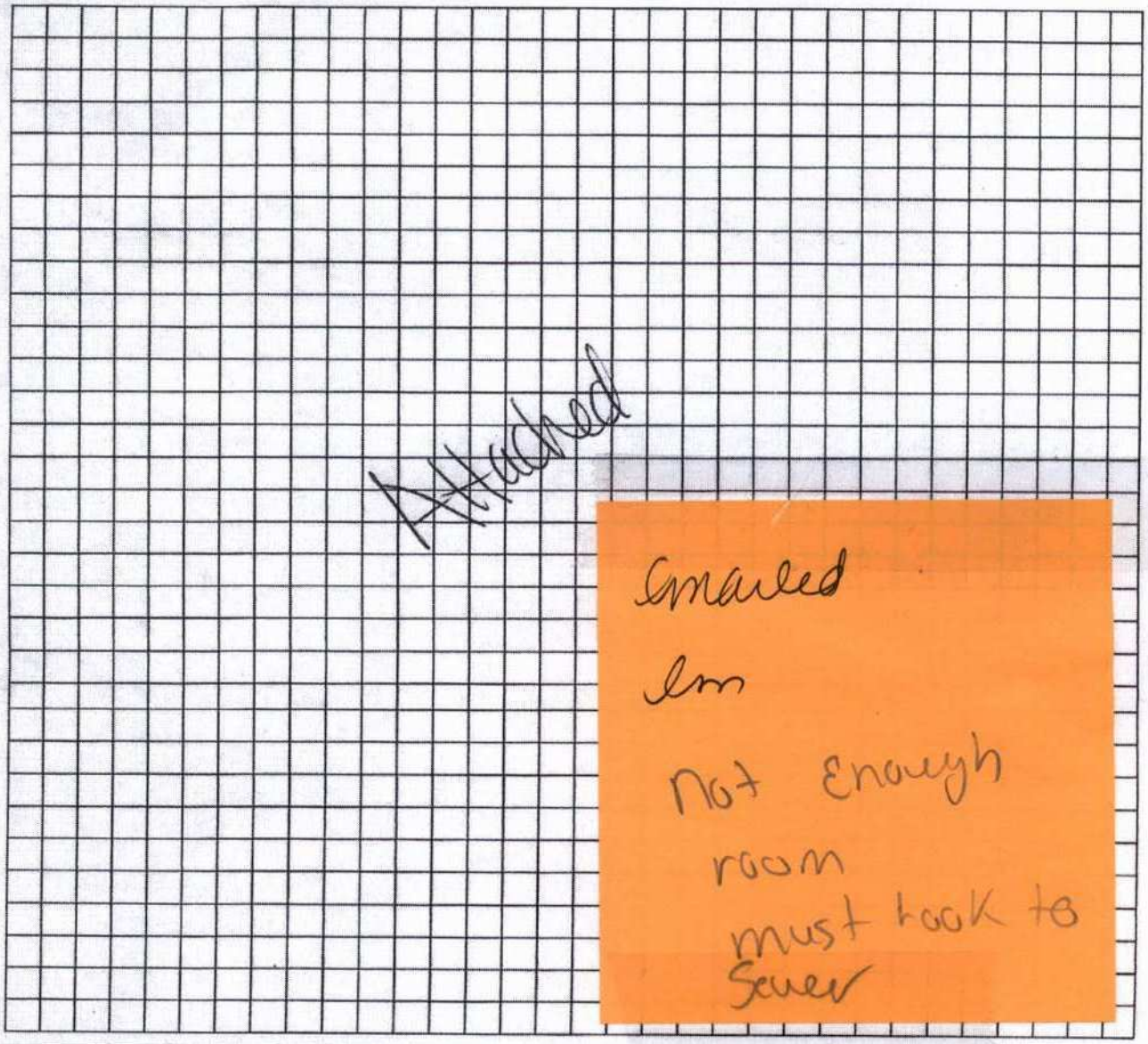
Revised on: 03/27/19

File #: _____

PROPOSED PLOT PLAN

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

Street Address: 12328 New Bond Dr Tax Parcel #: 01301338



*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 Sanitary Sewage Collection, Treatment, and Disposal and Water Supply Wells 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.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

_____

_____

_____ _____

REHS Signature Date

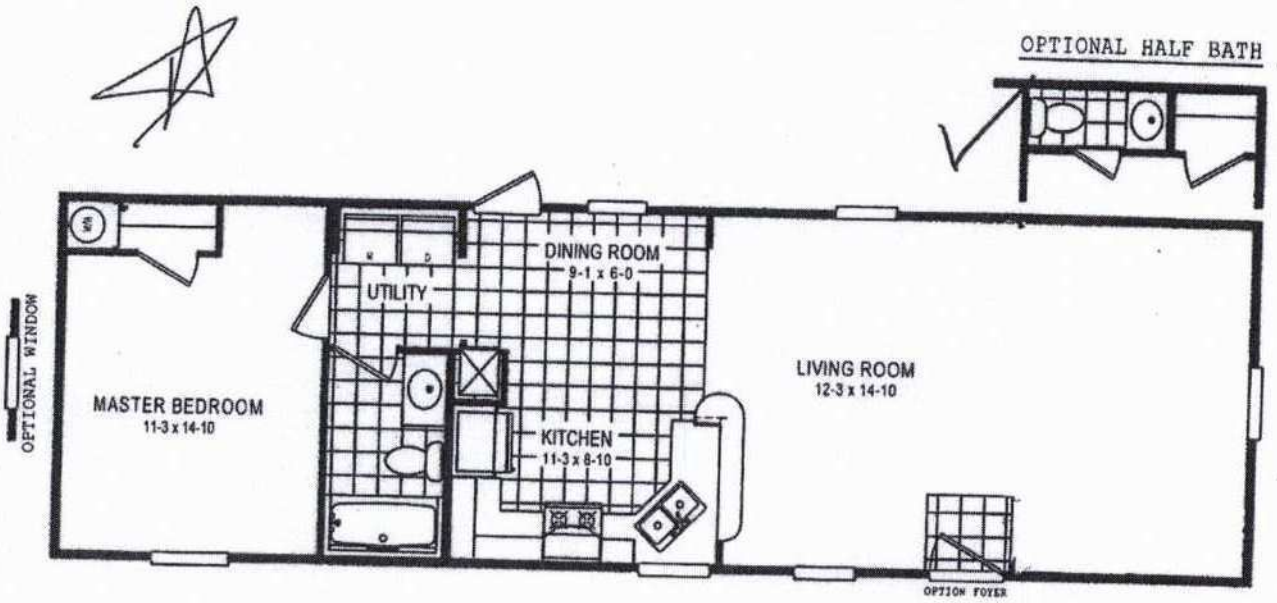
MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
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Revised on: 03/27/19

New Bond St. 60' R/W
N 07°31'00"W 149.86'
Pamela L. Landingham
DB 26886 pg 742
Gravel Drive
40' Front Setback
Well
68.5'
S 84°17'46"W 150.02'
Joseph H. Sterman
DB 31790 pg 365
Existing 1 Sty. Fr. Dwelling
Proposed
10' Side Setback
Septic
BLOCK "D"
N 84°15'45"E 299.70'
0.860 Acre
50' Rear Setback
Fr. Bldg
S 07°32'07"E 49.96'
S 84°15'44"W 150.00'
Ronald Hoffman
21238 pg 381
S 07°41'16"E 100.00'
EIR
NIR

Eicher

APPROVED
SIGNATURE:
DATE: 5-15-20



MODEL# : **3032** | **806 sq. ft.** DESCRIPTION : **16x52 | 2 BED 1 BATH**

** NOT AVAILABLE AS 14' WIDE **

E. Winters Mabry, MD
Director

MECKLENBURG COUNTY
Health Department

(704) 432-3199

Addendum to Application for
New Well or Septic System Installation
Abandonment or Repair of Existing Well or Septic System

Your signature below confirms the following:

1. The information on the application is true, complete and accurate.
2. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliances with applicable laws and rules.
3. I acknowledge that Kimberly Sneed is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at

12328 New Bond Dr. Huntersville .
Number Street Town
(Or Parcel Number)

John Eicher
Property Owner (print name)

Property Owner (signature)

05-15-20
Date

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 3105-B DATE: 10 20 98

TC: 013-013-3039 ~~4 0 6 9~~ ~~D~~ ~~ORT~~

SERIAL Nº 17733

Name of Owner American Park Inc. Juris.: _____

Address of Property 12320 New Bold Dr

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400

Number of Lines 6 @ _____

Cover Depth 6-10"

Water Supply Source well

Distance to Water Source 100'+

Excavation Inspected 9-18 98

Tank(s) Inspected 9-18 98

Wash Line Inspected ✓

High Water Alarm Inspected 10-29-98

PLOT

Design 1998 1500ST 1000 DT P1 CON 126 CECI CTR# WT NORWOOD

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☑ installed or constructed ☐ altered or repaired

☑ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 15A NCAC 18A. 1900, "Laws And Rules For Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. This issuance of this

☐ Certificate of Completion ☐ ~~Operation~~ Permit

does not in any way guarantee that the system will operate properly or relieve any person now or hereafter owning, controlling, or using such system from any liability resulting from the failure of the system to operate properly. This document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 15A NCAC 18A. 1990 in addition to those listed below under "COMMENTS." This document shall be null and void if any information contained in the application is untrue or if any additions are made to the property which would increase the requirements for said system.

Notice: Disturbance of the designated repair area may result in the suspension/revocation of this permit.

COMMENTS: TYPE III

Environmental Health Specialist

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

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	06/04/20	**Amount:**	100.00
Receipt #:	122645	**Tendered:**	100.00
Check / Auth #:	VISA 06592D	**Returned:**	0.00
Received By:	CABANLA		

Account Information

Account #: 200000
Contractor: SNEED, KIMBERLY
Attn:
Address: 1124 CHARLOTTE HWY
Address:
City/State/Zip: TROUTMAN, NC 28166

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	Use Existing System 12328 NEW BOND DR		1	100.00	100.00

Outstanding Balances

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