

235 GREY RD

00315623

1/9/2008

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Groundwater and Wastewater Services File Imaging Project
May 2007
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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 ( ) 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: Michael J. McMillan Sr.
ADDRESS: 3611 Mt. Holly Huntersville Rd
CITY: Charlotte
STATE: NC ZIP: 8216
PHONE: 704-280-2650
ALTERNATE PHONE:
E-MAIL: mike@McMillanBuilders.com

PROPERTY OWNER: SAME AS PERSON FILING APPLICATION
NAME: Dale and Laurie Gillmore
ADDRESS: 235 Grey Rd
CITY: Davidson
STATE: NC ZIP: 28036
PHONE: 704-778-2043
ALTERNATE PHONE:
E-MAIL: l.gillmore@yahoo.com

JOB LOCATION INFORMATION
TAX PARCEL #: 00315623
STREET ADDRESS: 235 Grey Rd
CITY: Davidson
STATE: NC ZIP: 28216

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

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 5

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

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.

Owner's/Agent's Signature — Date: 10-28-16

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

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

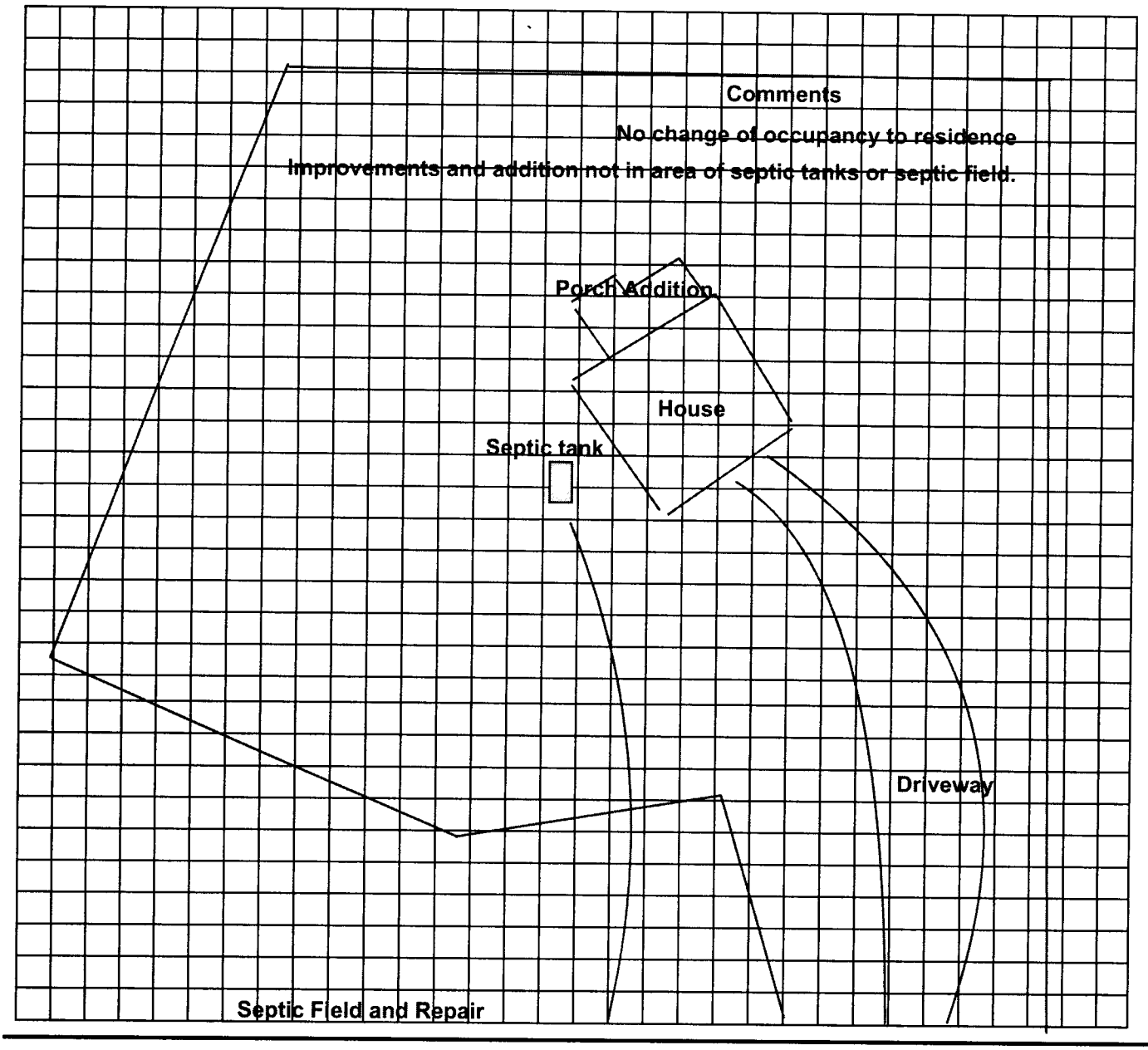
Revised on: 01/03/11

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: 235 Grey Rd _____ Tax Parcel #: 00315623 _____



*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.
- This permit is not transferable.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

Porch addition and storage building
Out the septic tank. Approved

REHS Signature _____ Date 11/8/16

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

Revised on: 01/03/11

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	11/02/16	**Amount:**	100.00
Receipt #:	102344	**Tendered:**	100.00
Check / Auth #:	MC 882238	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: 200000
Contractor: MCMILLAN,MICHAEL SR
Attn:
Address: 3611 MT HOLLY HUNTERSVILLE RD
Address:
City/State/Zip: CHARLOTTE, NC 28216

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	Use Existing System 235 GREY RD		1	100.00	100.00

----------**Outstanding Balances**----------

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

Payment Receipt

Mecklenburg County POS

Environmental Health
700 N. Tryon Street
Charlotte, NC 28202
Phone: 704-336-5100

Enter Account # or Customer Name Here:
MICHAEL MCMILLAN SR

Bill To:

MICHAEL MCMILLAN SR
3611 MT HOLLY HUNTERSVILLE RD

Charlotte, NC 28216

Single Payment

Transaction Date:	11/02/2016 11:59 AM Pacific Time
Pay Method:	**********4554
Approval #:	882238
Trace Number:	7c51df66-ff5f-4daa-b244-24d13dc600f4
Amount:	$100.00

Payment Amount:	$100.00
Total:	**$100.00**

Thank you for your payment.

MECKLENBURG COUNTY
Health Department

E. Winters Mabry, MD
Director

(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 Mike McMillan is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at

235 Greyed Davidson
Number Street Town
(Or Parcel Number)

Laurie Gillmore
Property Owner (print name)

Property Owner (signature)

11-6-16
Date

