SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

NEW SEPTIC ☐ NEW WELL ☐ USE EXISTING ☐ MODIFIED PLOT PLAN ☐

New Septic Fees Paid

IP ($250.00) _____ Initial/Date

CA ($200.00) _____Initial/Date

OP ($200.00) _____Initial/Date

(CA and OP fees need to be paid before a building permit can be issued)

New Well Fees Paid: $550.00 _____ Initial/Date

Use Existing Fees Paid: $100.00 _____Initial/Date

Alteration Fees Paid: $300 Total $200 8/15/19 LE Initial/Date (If use existing was part of payment)

Modified Plot Plan Fees Paid: $100.00 _____Initial/Date

Floor plans need to be submitted and reviewed before CA can be issued ☐ Review ☐

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

Septic file complete ☒ SM 12/11/19 Well complete ☐ _____

Send permit for signature ☐ Signature received ☐ _____

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

Certified operator contract is on file ☐ _____

* NO ALTERATION NEEDED. The existing system is large enough to handle the (1) Bedroom addition. OK to release hold. SM

NOTE TO FILE:

August 26, 2019

Roger Smith applied for an Alteration permit on 7/18/19 to upgrade the existing septic system from a 2 bedroom house to a 3 bedroom house. The old file existing file was located and shows that the system that was installed and inspected on 5/14/82 is enough to handle a 3 bedroom house. The system that was installed is 15'X45'X24" with a washer line 12'X30'X24".

April Bumgarner, REHS

April Bumgarner, REHS

10397B
10639

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: 11331108
STREET ADDRESS: 8532 LILYBET LANE
CITY: CHARLOTTE
STATE: NC ZIP: 28278
SUBDIVISION NAME: BROWNS COVE
LOT #: 516 LOT SIZE (acres): 0.78
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: 2144
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 3
FOUNDATION TYPE:
○ CONCRETE SLAB ☑ BASEMENT WITH PLUMBING
○ CRAWL SPACE ○ BASEMENT WITH NO PLUMBING

6. IF PLANNING TO EXPAND OR ALTER THE EXISTING SEPTIC SYSTEM PLEASE COMPLETE THE FOLLOWING SECTION: ☐ N/A
NUMBER OF BEDROOMS TO BE ADDED: 1 NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: 0

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? ___ ☑ UNKNOWN

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

12. PROPERTY OWNER:
NAME: ROGER C SMITH
ADDRESS: 8532 LILYBET LANE
CITY: CHARLOTTE
STATE: NC ZIP: 28278
WORK PHONE: (703) 488-4814
MOBILE PHONE: (703) 625-5515
FAX:
E-MAIL: rog.sm@outlook.com

13. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:
NAME:
ADDRESS:
CITY:
STATE: ZIP:
WORK PHONE:
MOBILE PHONE:
FAX:
E-MAIL:

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.

NCL (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.

_____ (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.

Roger C Smith
Property Owner's or Owner's Legal Representative Signature

7/18/19 2019
Date

OFFICE USE ONLY

○ SURVEY PLAT TO SCALE SUBMITTED ○ SCALED SITE PLAN SUBMITTED ○ UN-SCALED SITE PLAN SUBMITTED

SEPTIC APPLICATION FEE RECEIVED: $ _____ DATE FEE RECEIVED: _____

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

APPLICATION PROCESSED BY: _____

GWS FILE NUMBER ASSIGNED: _____

APPLICATION ID NUMBER ASSIGNED: _____

COMMENTS:

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 Trent Campbell T. Campbell Builders, LLC is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at

8532 LILYBET LANE CHARLOTTE
Number Street Town
(Or Parcel Number)

ROGER C SMITH
Property Owner (print name)

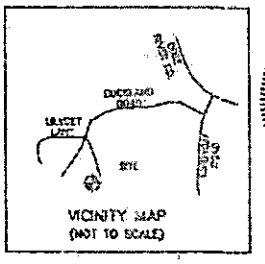
Roger C Smith
Property Owner (signature)

7/18/2019
Date

I CERTIFY THAT THIS MAP WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION (MAP RECORDED IN BOOK 18, PAGE 48; THAT THE BOUNDARIES NOT SURVEYED ARE INDICATED AS DRAWN FROM INFORMATION AS SHOWN ON PLAT; THAT THE RATIO OF PRECISION OR POSITIONAL ACCURACY IS 1:10,000+; AND THAT THIS MAP MEETS THE REQUIREMENTS OF THE STANDARDS OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA (21 NCAC 56. 1600). THIS 27th DAY OF MARCH, 2017.

SIGNED _____

JOHN D. SKIDMORE III, NCPLS L-3837



NORTH CAROLINA PROFESSIONAL SEAL L-3837 LAND SURVEYOR JOHN D. SKIDMORE III

LEGEND

R/W = RIGHT OF WAY
● = IRON PIN
O = IRON PIPE
⊕ = COMPUTED POINT
= UTILITY POLE
⊡ = CONCRETE MONUMENT
Ⓢ = SANITARY SEWER MANHOLE
Ⓓ = STORM DRAIN MANHOLE
PROPERTY LINE
ADJOINER LINE
RIGHT OF WAY
SEWER EASEMENT
STORM DRAIN ESMT.
SETBACK LINE

CURVE TABLE				
CURVE	LENGTH	RADIUS	DIRECTION	CHORD
C1	75.00	192.48	N53°43'15"W	74.53
C2	18.00	50.00	S75°11'48"E	17.90
C3	81.61	192.48	N30°23'59"W	81.00

NOTES:

- AREA BY COORDINATE METHOD
- THIS IS A SURVEY OF AN EXISTING PARCEL OR PARCELS OF LAND AND DOES NOT CREATE A NEW STREET OR CHANGE AN EXISTING STREET
- THIS MAP IS NOT INTENDED TO MEET G.S. 47-30 AND IS NOT TO BE RECORDED AS A PLAT
- SUBJECT PROPERTY MAY BE SUBJECT TO RECORDED OR UNRECORDED EASEMENTS, RIGHT OF WAYS, SETBACKS AND/OR RESTRICTIVE COVENANTS NOT SHOWN HEREON

LINE TABLE		
LINE	LENGTH	BEARING
L1	41.47	S78°45'00"E
L2	46.00	N89°08'00"E
L3	11.82	N31°20'00"E
L4	30.83	N41°12'00"E
L5	29.87	N52°11'00"E
L6	30.73	N79°29'00"E

GRAPHIC SCALE

60 0 30 60

(IN FEET)

1 inch = 60 ft.

PHYSICAL SURVEY

8532 LILYBET LANE
A PORTION OF LOTS 5 AND 6
RECREATION LOTS - SECTION 37
STEELE CREEK TOWNSHIP, MECKLENBURG COUNTY, NORTH CAROLINA

TO BE DEEDED TO:
ROGER C. SMITH and wife, SUSAN P. SMITH

SURVEY DATE 3/22/2017	D.B. 15879 PG. 172 D.B. 24244 PG. 42
TAX No. 11331108	DRAWN BY: JDS
MAP BOOK 18 PAGE 48	DRAWING 17-062.DWG

SKIDMORE SURVEYING, INC.
LICENSE NO. C-1876
5347 HIGHWAY 74 WEST
MONROE, N.C.
704-289-4855

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 08/15/19
Receipt #: 118271
Check / Auth #: VISA 81609D
Received By: ELLISLW

Amount: 300.00
Tendered: 300.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: SMITH, ROGER C
Attn:
Address: 300 SAMANTHA DR
Address:
City/State/Zip: STERLING, VA 20164

Item	Description	Permit#	Quantity	Unit Price	Total Price
0706	Septic Alteration Permit 8532 LILYBET LANE		1	300.00	300.00

Outstanding Balances

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

Payment Receipt

Mecklenburg County

Environmental Health
3205 Freedom Drive, Suite 8000
Charlotte, NC 28208
Phone: 980-314-1651

Enter Account # or Customer Name Here: ROGER C SMITH

Bill To:

ROGER C SMITH
300 SAMANTHA DR

Sterling, VA 20164

Single Payment

Transaction Date: 08/15/2019 7:05 AM Pacific Time
Pay Method: VISA **********6176
Approval #: 81609D
Trace Number: f1078808-bcb7-4f67-8dff-d19f776cc977
Amount: $300.00

Payment Amount: $300.00

Total: $300.00

Thank you for your payment.

B25-49-82

C of A (s) No. 17599

Date Issued 5/14/82 **Serial** 5128 T C No 113-302.06

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner Hauk (LAST) Lynda (FIRST) H (MIDDLE)

Location of Property 45 Kenbert Lane

Application Number 17599 Permit Number 17599

Inspection Date:

Liquid Capacity of Tank 1000 Gal Tank Material Concrete

Total Length of Drain Tile 220 Ft Number of Lines 4

Depth of Filter Material 2 Ft Cover Depth 1 Ft

Water Supply Source Well Distance from Water Source 50 Ft

Excavation Inspected 5/14/82 (DATE) Tank Inspected 5/14/82 (DATE)

Nitrification Field Inspected 5/14/82 (DATE)

Washing Machine Line Inspected If Applicable 5/14/82 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption of effluent disposal as described above and it has been installed or constructed altered or repaired in accordance with the permit issued and the regulations of the Mecklenburg County Health Commission in effect on the date of issuance of the permit. The issuance of this Certificate of Approval does not in any way guarantee that the system will operate properly or release 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 Certificate of Approval is issued subject to those restrictions and conditions shown on the permit in addition to those listed below under comments. This Certificate of Approval 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.

Comments

Environmentalist

EHO-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

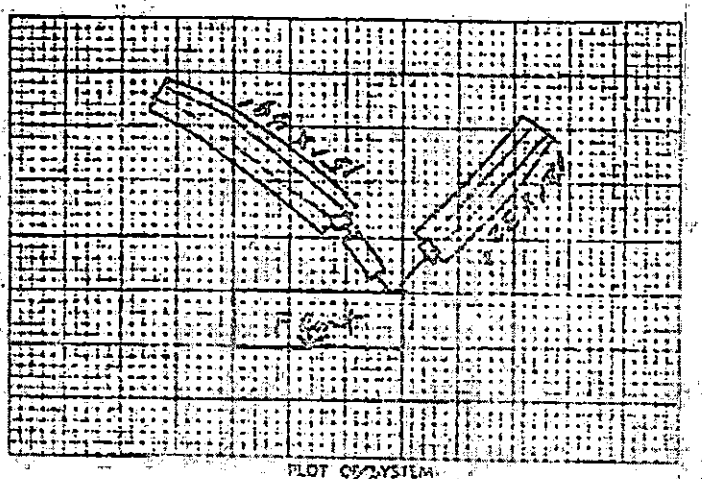
Date Issued 5-12-82 Serial No. 5440 ICAR(S) Permit No. 17599

T. C. No. 113-302-05

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

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 application 17599 dated 2-3-82 and this permit shall be void and of no effect if the information provided in the application is not true or is erroneous. All work shall be completed on or before 5/30/82, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate 25

Liquid Capacity of Tank 1000 gal

Tank Construction CC

Absorption and/or Nitrification Lines:

Total Line Length 270' + 135'

Number of Lines 5 + 3

Distance from House 10'

Distance from Property Line 10'

Distance from Well 50'

NAME OF OWNER Linda A Clark

LOCATION OF PROPERTY 4E Sulphur Rd

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Health Commission which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Environmental Health Director before any system can be covered up or otherwise rendered incapable of use. The issuance of this permit does not in any way guarantee that the system will properly be constructed or will function properly, or relieve any person now or hereafter owning, controlling or occupying the same from any liability from the failure of the system to operate properly.

Comments: Soil & Water Conservation

Division or Section Head

Environmentalist

* If this permit is for the installation or construction of a new system, it must be signed by the division or section head of the Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

Environmental Health Section, Mecklenburg

NOTE TO FILE:

August 26, 2019

Roger Smith applied for an Alteration permit on 7/18/19 to upgrade the existing septic system from a 2 bedroom house to a 3 bedroom house located at 8532 Lilybet LN. The old file existing file (17599) was located and shows that the system that was installed and inspected on 5/14/82 is enough to handle a 3 bedroom house. The system that was installed is 15'X45'X24" with a washer line 12'X30'X24".

April Bumgarner, REHS

April Bumgarner, REHS