


15626 OXYDENDRUM HILL LN

00335110

5/30/2007

duponbj

Groundwater and Wastewater Services File Imaging Project
May 2007
*Barcode Font = IDAutomationHC39M*

FEE: $100 CK 1039
DATE: 11/3/10
CRT [ ]

**APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM / WATER SUPPLY WELL**
**MECKLENBURG COUNTY - GROUNDWATER & WASTEWATER SERVICES**
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103, Fax: (704) 336-6894

GWS – UES.APP 04/10

FILE #: 5112A

pmt by KR

4844 JBM

**TYPE APPLCATION:** ☐ SEPTIC ONLY ☐ WELL ONLY ☑ SEPTIC & WELL
☐ ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A / M)
☑ ADDITION - RENOVATION OR GARAGE WITH NO MAJOR CHANGES (X)
☐ EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
☐ COMMERCIAL OR INDUSTRIAL (N)

**PERSON FILING APPLICATION:**
NAME: Robert Zalnoch
ADDRESS: 19111 Lea Point Court
CITY: Huntersville
STATE: NC ZIP: 28078
PHONE: 704 232-3712
ALTERNATE PHONE: 704 992-5981

**PROPERTY OWNER:**
NAME: Peter & Mississi Piskutz
ADDRESS: 15626 Oxydendrum Drive Hill Rd
CITY: Davidson
STATE: NC ZIP: 28036
PHONE: 704-655-9321
ALTERNATE PHONE:

**JOB LOCATION INFORMATION**
TAX/PARCEL #: 00335110
STREET ADDRESS: 15626 Oxydendrum Hill Road
CITY: Davidson
STATE: NC ZIP: 28036

SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #: 4

**WATER SUPPLY:**
☐ MUNICIPAL (M) ☐ COMMUNITY (C) ☑ PRIVATE WELL (P) ☐ SHARED WELL (S) ☐ OTHER 'SPRINGS' (O)

**RESIDENTIAL PROPERTY TYPE:**
☑ HOUSE (H) ☐ MODULAR HOME (M) ☐ MULTIPLE FAMILY (U)
☐ SINGLE MOBILE HOME (S) ☐ DOUBLE WIDE (D)
☐ OTHER (O)

**OCCUPANCY (both fields are required):**
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 2

**COMMERCIAL / INDUSTRIAL PROPERTY TYPE:**
TYPE OF BUSINESS:
# EMPLOYEES PER SHIFT:
# OF SHIFTS:
INDUSTRIAL WASTES? ☐ YES ☐ NO
UNDERGROUND STORAGE TANKS? ☐ YES ☐ NO

**ADDITION TYPE ATTACHED TO EXISTING STRUCTURE:**
☐ BEDROOM ☐ BATHROOM ☐ KITCHEN ☐ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☐ SUNROOM ☐ PORCH ☐ DECK ☑ OTHER Laundry Room

**ADDITION 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 — 10-5-2010 Date

*The undersigned, an authorized agent of the Mecklenburg County Health Departme[illegible], certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with th[illegible] provisions of Laws and Rules for Sanitary Sewage Collection, Treatment and Disposal and Water Supply Wells in effect at the time of issuance of he 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 y this Department.
- This permit is not transferable.

☐ ADDITION / RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE
☐ MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE

O.K. for County Comm & Bathroom renovation

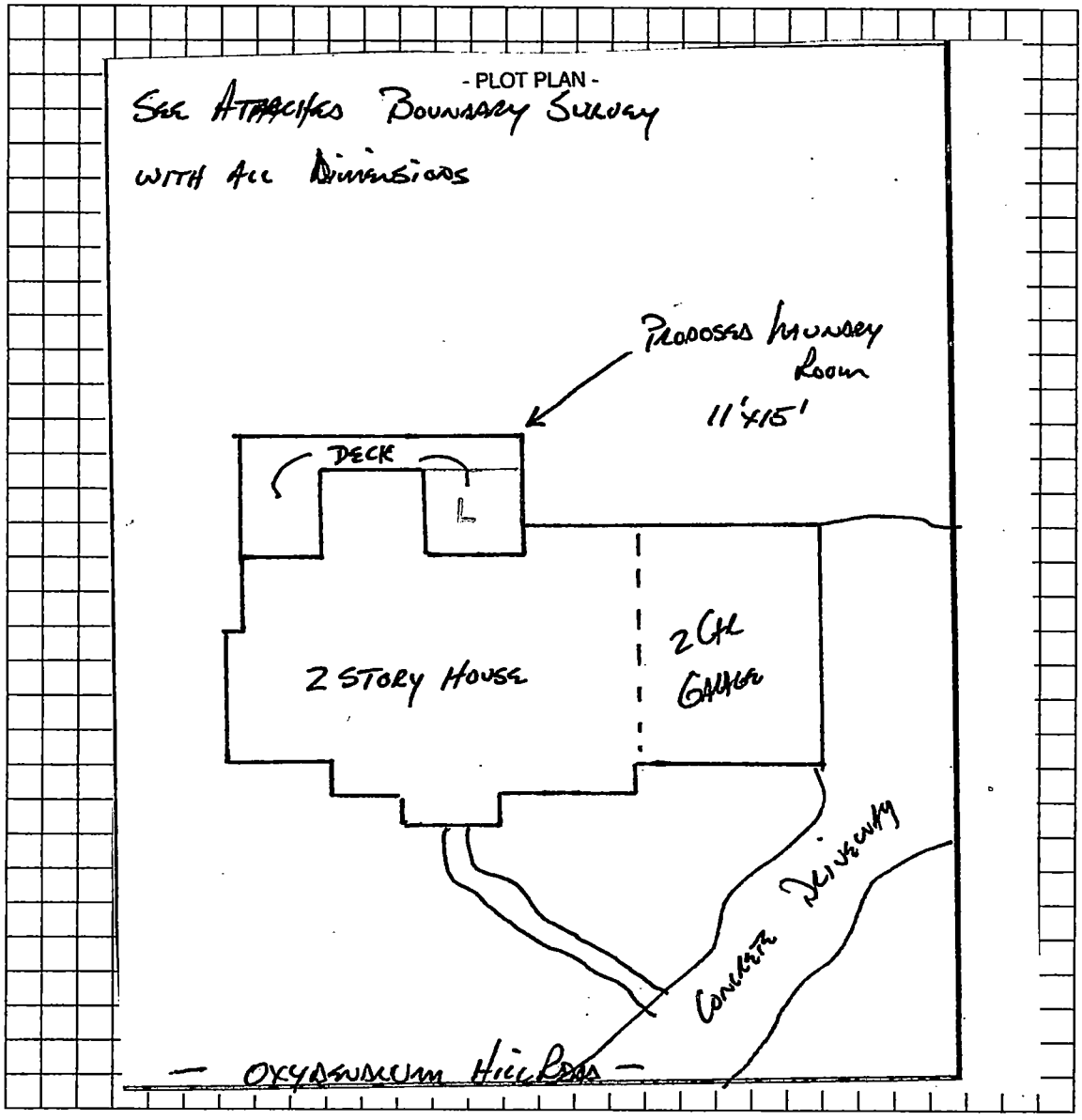
ES Signature — Date 11/10/11

Mecklenburg County
Land Use & Environmental Service Agency
Groundwater & Wastewater Services
700 N. Tryon St., Suite 211
Charlotte, NC 28202
Phone: (704) 336-5103
Fax: (704) 336-6894

File # 5112A
Date_____

# PROPOSED PLOT PLAN

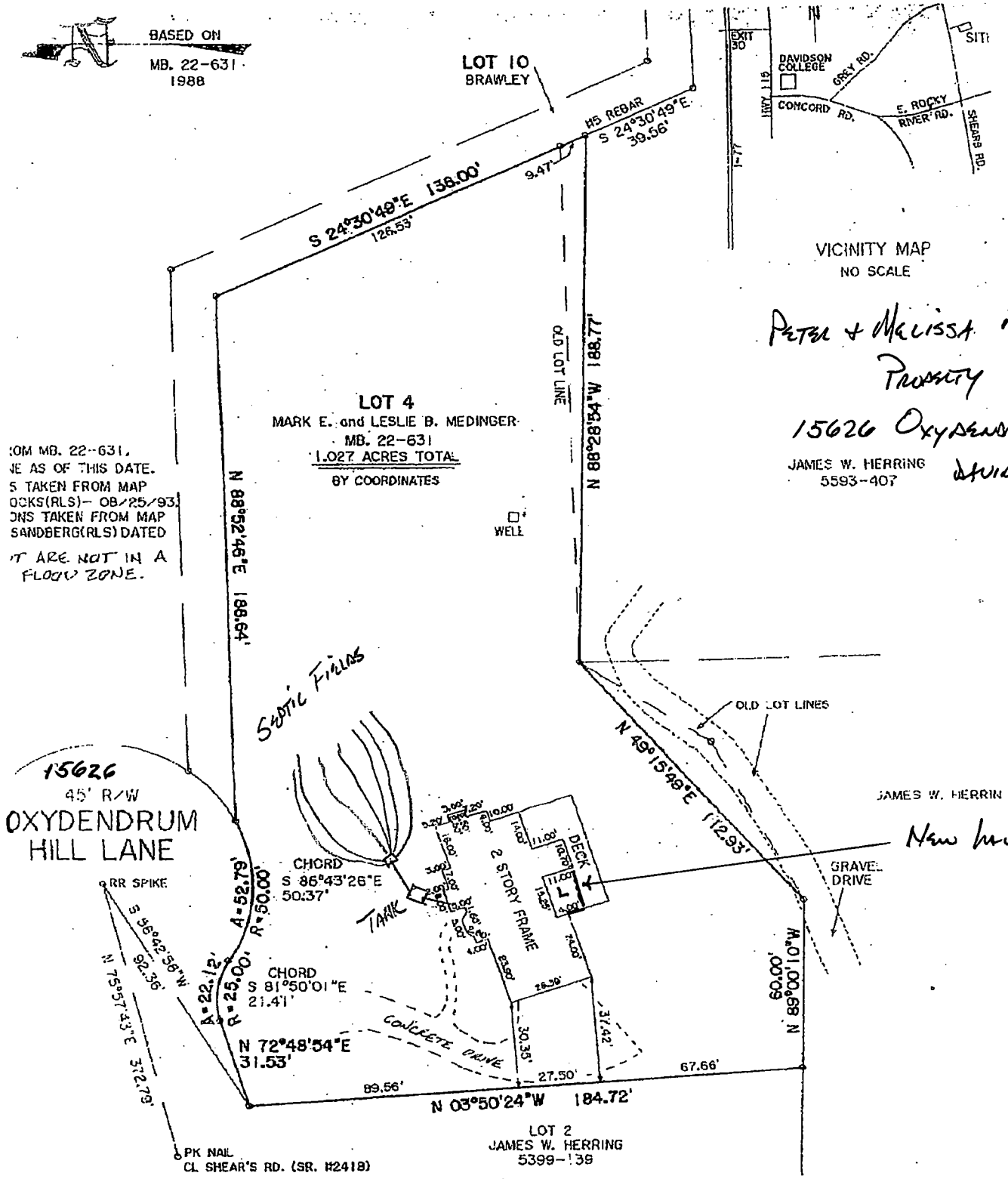
A map showing existing and proposed property lines and easements with dimensions, the location of the single family residence, non-single family residence, or other facility, and appurtenances, the site for the proposed well, and the location of existing or proposed sewer lines and/or sewage disposal systems, surface water bodies, aboveground or underground storage tanks. Name all roads adjoining the property. If this a repair indicate the type of repair.




| | |
|---|---|
| Owner/Agent Signature | ROBERT ZARNOCH |
| Date | |

LBC 12/15/04

File # 5112A




CKSON LOVE CERTIFY THAT THIS MAP WAS DRAWN FROM AN ACTUAL SURVEY MADE UNDER MY DIRECT SUPERVISION, RROR OF CLOSURE IS 1:10,000+ BEFORE ADJUSTMENTS; AND THAT THE ANGULAR ERROR WAS < 7.5 SECONDS PER TURN

HAND AND OFFICIAL SEAL THIS 23rd DAY OF SEPTEMBER, 1993.

-2844
).

REGISTERED LAND SURVEYOR

NORTH CAROLINA REGISTERED L.S. L-2844 LAND SURVEYOR PUBLIC WORKS

# BOUNDARY SURVEY

FOR

MARK E MEDINGER & wf. LESLIE B.

150.00

# APPLICATION FOR AN IMPROVEMENT PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

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

(OFFICE USE ONLY)

FILE: 5112A

TC: _____

SERIAL: № 17396 ☐ L ☑ CRT

**JOB LOCATION**

① ADDRESS: 15626 (STREET NO.) Oxydendrum Hill Lane (STREET) Lot #4 ② FILE: 5112A

③ JURISDICTION: Meck ④ TAX PARCEL NO.: 00308104

⑤ SUBDIVISION: Oxydendrum ⑥ LOT: _____ ⑦ BLOCK: _____

**OWNER**

⑧ NAME: Leslie & Mark (FIRST) (MIDDLE) Medinger (LAST)

⑨ MAILING ADDRESS: 6915 Norchester Ct

⑩ CITY: Char. ⑪ STATE: NC ⑫ ZIP: 28212

⑬ PHONE: (WORK) 333-0171 ⑭ (HOME) 568-9046

**REQUEST**

This request is for a(n):

⑮ ☒ New permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify) _____

**DESIGN CRITERIA**

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 4 ㉕ Type? _____

㉓ Maximum occupancy? 5 ㉖ Maximum number of employees? _____

㉔ Basement? ☐ yes ☒ no ㉗ Maximum number of seats? _____

**WATER SUPPLY**

㉘ Water supply from (present or (proposed)):

A ☒ Individual well

B ☐ Municipal system

C ☐ Community well

D ☐ Community system

㉙ The undersigned, 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:* Leslie B. Medinger

Date: _____

## IMPROVEMENT PERMIT

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 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 permit is issued by this Department.

... This permit is not transferable and shall become null and void 36 months from the date of issuance.

Lot Location required for system

Karla W Johnson, RS 12/19/88
Environmentalist Date

D R Dail, RS 12/19/88
Director or Authorized Section Head Date

*This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.

# PROPOSED PLOT PLAN

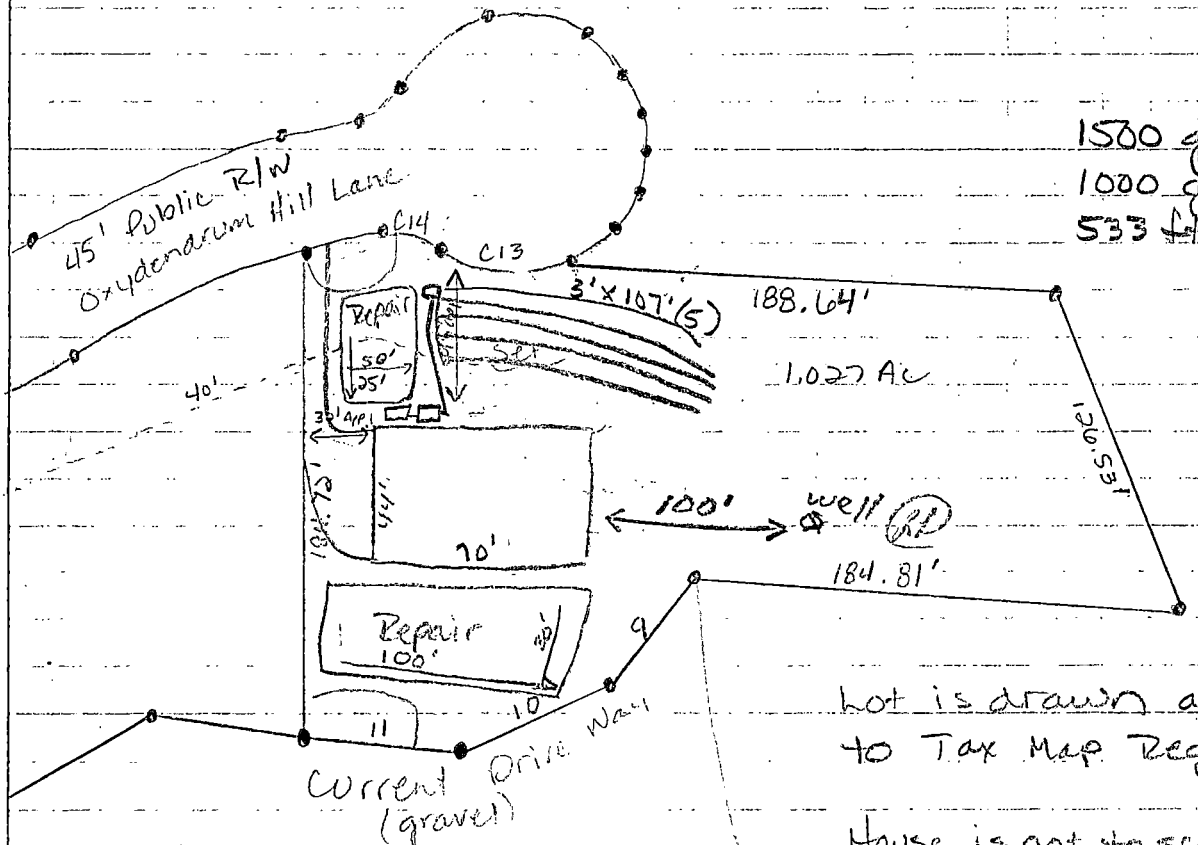
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 5112-A

TC: _____

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. (porches + everything)




1500 gallon Septic Tank
1000 gallon Lift-Station
533 ft of Drainfield

Lot is drawn according to Tax Map Registration.

House is not to scale but dimension are correct

Signed: Ronald B Mraidan

Date: 12-19-88

BOOK - 22 MAP - 651

PRESENTED FOR REGISTRATION
SEP 9 1 18 PM '88
CHARLES E. CROWDER
REGISTER OF DEEDS
MECKLENBURG CO. N.C.

| TA | RADIUS | ARC | TAN | CHD. BRG. | CHORD | NO |
|---|---|---|---|---|---|---|
| '47" | 1,371.21 | 145.10 | 72.62' | S00°07'41"W | 145.04 | C-1 |
| '24" | 127.50 | 86.69 | 45.10' | N74°37'18"E | 85.03 | C-2 |
| '18" | 347.99 | 107.33 | 54.09' | N63°58'45"E | 106.91 | C-3 |
| '11" | 25.00 | 22.12 | 11.84' | N47°27'48"E | 21.41 | C-4 |
| '35" | 50.00 | 43.89 | 23.47' | N47°15'27"E | 42.49 | C-5 |
| '00" | 50.00 | 36.93 | 19.35' | S86°26'13"E | 36.09 | C-6 |
| '17" | 50.00 | 23.81 | 12.14' | S51°38'04"E | 23.59 | C-7 |
| '44" | 50.00 | 16.94 | 8.55' | S28°17'03"E | 16.86 | C-8 |
| '27" | 50.00 | 15.23 | 7.68' | S09°50'58"E | 15.18 | C-9 |
| '27" | 50.00 | 15.23 | 7.68' | S07°36'30"W | 15.18 | C-10 |
| '44" | 50.00 | 16.94 | 8.55' | S26°02'36"W | 16.86 | C-11 |
| '17" | 50.00 | 23.81 | 12.14' | S49°23'36"W | 23.59 | C-12 |
| '50" | 50.00 | 52.78 | 29.15' | N86°43'17"W | 50.36 | C-13 |
| '11" | 25.00 | 22.12 | 11.84' | N81°50'00"W | 21.41 | C-14 |
| '18" | 302.99 | 93.45 | 47.10' | S63°58'45"W | 93.08 | C-15 |
| '24" | 172.50 | 117.29 | 61.01' | S74°37'18"W | 115.04 | C-16 |
| '42" | 1,371.21 | 54.13 | 27.07' | S06°10'16"W | 54.13 | C-17 |
| '50" | 846.42 | 50.68 | 25.35' | S05°36'02"W | 50.67 | C-18 |

L.B. DEATON
1060-336

L.B. DEATON
5597-804

J.W. HERRING
5593-407

W.A. CHESTER I
096-515
CABARRUS CO.

N59°32'37"E 97.96
N65°09'59"E 255.07'
N64°49'03"E 178.53'
N36°39'13"E 80.76'
N87°15'56"E, 400.71'
280.97'
N74°25'42"E 324.86'
N82°34'14"E 296.55'
N86°02'58"E 365.05'
N86°02'58"E 526.88'
S08°56'14"W 269.84'
S10°43'11"W 153.28'
S21°04'08"W 137.29'
S01°24'49"W 112.56'
S16°27'20"W 58.98'
N29°30'49"W 175.56'
S88°52'46"W 227.64'
219.71'
202.16'
190.08'
182.45'
180.09'
186.04'
184.81'
S88°52'46"W 145.61'
166.45'
275.00'
309.82'
S88°52'46"W 45.03'
59.95'
N29°07'02"W 188.35'
S82°39'00"W, 484.06' TOTAL
S14°19'50"E 543.61' TOTAL
S70°09'29"W 539.70'
N02°21'18"E 126.32'
S73°56'22"W 194.88'
S64°03'50"W 157.76'
S33°59'25"E 281.10'
N42°20'58"W 396.79'
N29°34'44"W 402.29'
S66°02'10"W 128.97'
N08°56'24"W 184.72'
N87°57'W 108.14'
41.32'
119.74'
90.00'
128.00'
325.61'
400'
650'
800'
550' BLDG. SET BACK
250' SET BACK
40'
30'
10'
BLDG.
SET BACK
LANE
45' PUBLIC R/W
OXYDENDRUM HILL
BASED ON DB 5309-139

1 — 0.923 Ac. — 15607
2 — 0.838 Ac. — 15606
3 — 0.717 Ac. — 15629
4 — 1.027 Ac. — 15626
5 — 1.846 Ac. — 15633
6 — 2.983 Ac. — 15639
7 — 2.933 Ac. — 15645
8 — 3.307 Ac. — 15644
9 — 3.426 Ac. — 15638
10 — 3.566 Ac. — 15632

7600' TO EAST ROCKY RIVER Rd.

10' STORM DRAIN ESMT.

CHARLES E. CROWDER REGISTER OF DEEDS MECKLENBURG COUNTY N.C.

DEPARTMENT OF TRANSPORTATION
DIVISION OF HIGHWAYS
PROPOSED SUBDIVISION RTG
CONSTRUCTION STANDARDS CERTIFICATION
APPROVED _____ DISTRICT ENGINEER
DATE 9-7-88

APPROVED IN ACCORDANCE WITH THE

DATE: 12-16-88

TO: HEALTH DEPARTMENT - ENVIRONMENTAL HEALTH

FROM: COUNTY ENGINEERING

EHD FILE _____ JURISDICTION CODE Meck

PARCEL NUMBER 003-081-06po

ASSIGNED ADDRESS 15626 Oxydendrum Hill Ln

EXISTING ADDRESS lot 4

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

| | APPROVED | NOT APPROVED |
|---|---|---|
| 1. SUBDIVISION REGULATIONS | ☑ | ☐ * |
| 2. FLOODWAY REGULATIONS | ☑ | ☐ * |
| 3. EROSION CONTROL REGULATIONS | ☑ | ☐ * |
| 4. COMMERCIAL DRAINAGE PLAN | ☑ | ☐ * |

| | PRESENT | NOT PRESENT |
|---|---|---|
| 5. PUBLIC UTILITY EASEMENT | ☐ * | ☑ |

| | YES | NO |
|---|---|---|
| 6. PROPERTY FRONTS ON THOROUGHFARE | ☐ * | ☑ |
| 7. DRIVEWAY PERMIT REQUIRED | ☐ * | ☑ |

* If checked, further investigation will be required to determine whether a building permit may be issued by Building Standards for the site.

REMARKS: Septic tank

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE AT BUILDING STANDARDS WHEN PAYING PERMIT FEES.
A CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL THE TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

SIGNED: [signature]

OPWEAR 02/86

# INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

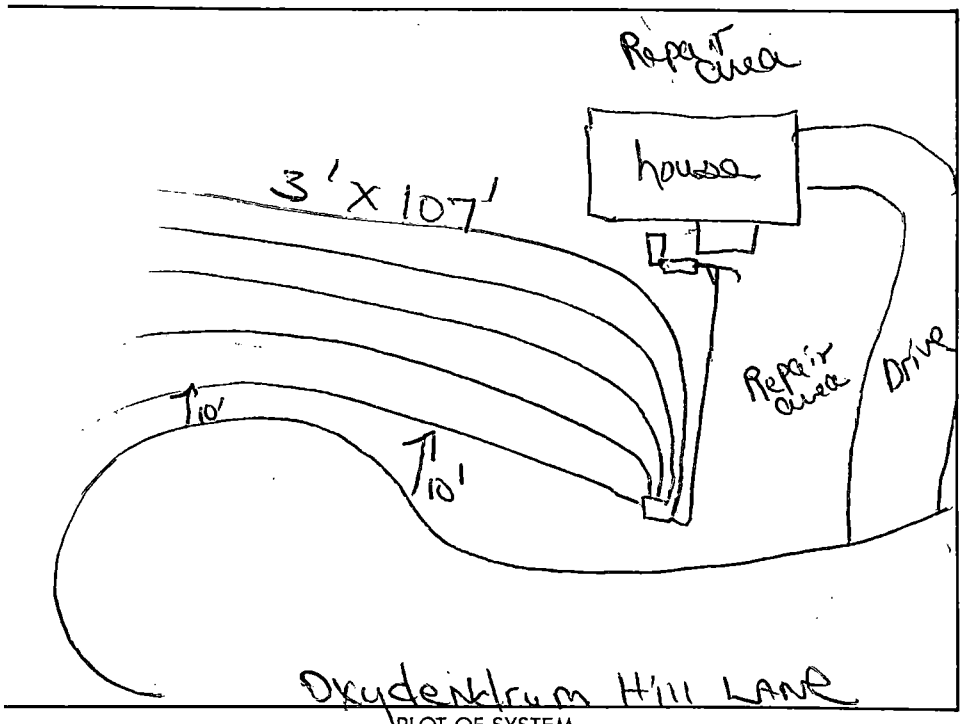
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 5112A DATE: 6/21/89

TC: 003-081-04 ☐ L

SERIAL № 12741

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 12/19/88. All work shall be completed on or before 7/2/89, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .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 Department of Environmental Health 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 1500 gallons

Liquid Capacity of Dosing Tank 1000 gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 533' feet

Number of Lines 5

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well Not IN 100' required feet

NAME OF OWNER Medinger Leslie + Mark

LOCATION OF PROPERTY 15626 Oxydendrum Hill LANE

Comments: INSTALL 5 Trenches 3'x 107' 12" Stone

Straw Cover

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 a 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.

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER OR AGENTS COPY

# CERTIFICATE OF COMPLETION/OPERATION PERMIT

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 5112A DATE: 7-19-89

TC: 003-681-04 ☑ ☐ CRT

SERIAL № 12054

Name of Owner Leslie & Mark Medinger Juris.:

Address of Property 15626 Oxydendrum Hill Lane

**Inspection Data:**

Tank Material Concrete

Total Length of Drainfield 533

Number of Lines 5 @ 107

Cover Depth 12-15

Water Supply Source Well

Distance to Water Source 84'

Excavation Inspected 9/19/89

Tank(s) Inspected 9/19/89

Wash Line Inspected NA

High Water Alarm Inspected 9/19/89

PLOT

Design: 1989 1500GT/1000DT, Pl/Con, 1599 S.F., T, 126, PS Sec I CTR# 68

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 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The 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 10 NCAC 10A .1900 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.

COMMENTS: Maple & Elm Trees IN Drain Field Area

W. B. Ramsey
Environmentalist

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

# APPLICATION FOR SOIL INVESTIGATION

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

FILE: 5112A

TC: 003-081-04

☐ PC ☐ REPT

**JOB LOCATION**

① ADDRESS: OXYDENDRUM HILL LN.

② SUBDIVISION: Oxydendrum ③ LOT: 4 ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: _____ PAGE NO.: _____ PARCEL NO.: _____

⑥ DEED REFERENCE: BOOK NO.: _____ PAGE NO.: _____

**OWNER**

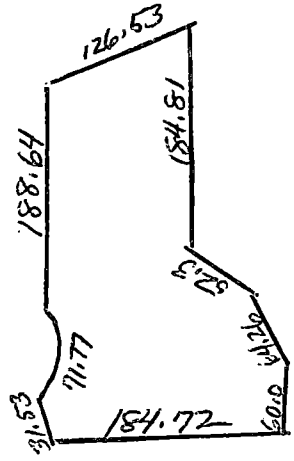
⑦ NAME: James (FIRST) W. (MIDDLE) Herring (LAST)

⑧ MAILING ADDRESS: Box 699

⑨ CITY: Davidson ⑩ STATE: NC ⑪ ZIP: 28036

⑫ PHONE: (WORK) 892-7228 (HOME) 892-1093

⑬ Accurately diagram and dimension lot.




⑭ The undersigned, 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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: James Herring

Date: OCT 13 1988

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

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY

**MECKLENBURG COUNTY ENVIRONMENTAL HEALTH**
**SITE EVALUATION REPORT**
**SERIAL NUMBER** 15712

File: 5112A Action A

Parcel: 00308104 ☐ PC

Location: Oxydendrum Hill Lane

Subdivision:

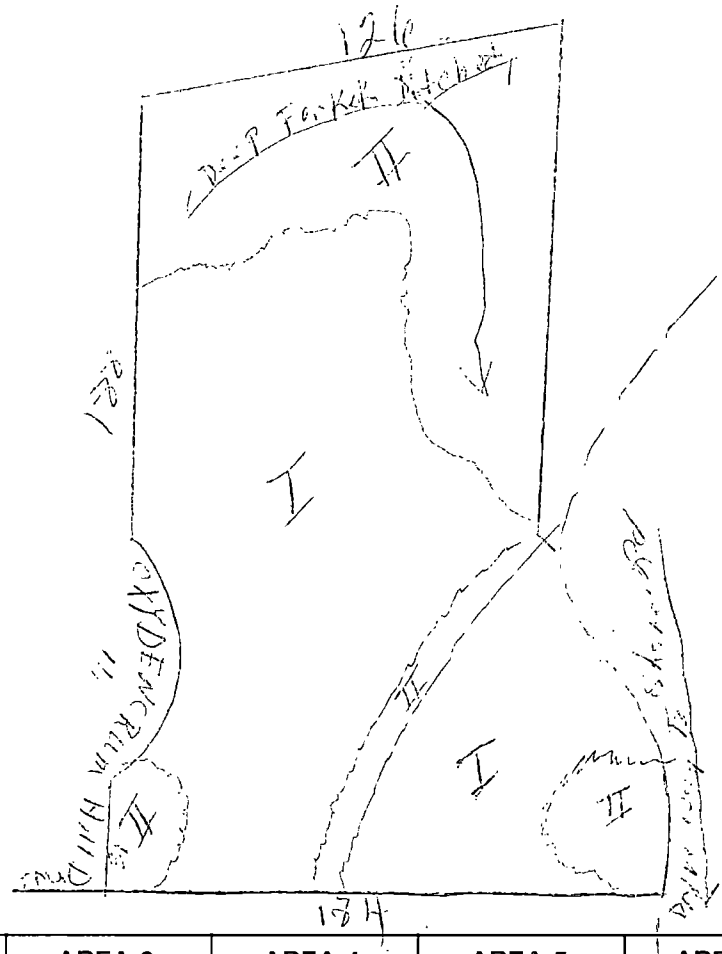
Lot: 4 Block: Acres: 1.097

Owner: James W. Herring
Address: Box 699
Davidson, NC 28036

Comments: Lift Station may be Required

Described by: W. B. Ramsey

Date: 11-9-82




***** EVALUATION KEY *****

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

| FACTORS | AREA 1 | AREA 2 | AREA 3 | AREA 4 | AREA 5 | AREA 6 |
|---|---|---|---|---|---|---|
| Topography | S (PS) U 2—6 | S PS (U) complex | S PS U | S PS U | S PS U | S PS U |
| Texture | S (PS) U | S (PS) U | S PS U | S PS U | S PS U | S PS U |
| Structure | S (PS) U | S (PS) U | S PS U | S PS U | S PS U | S PS U |
| Drainage | S (PS) U | S (PS) U | S PS U | S PS U | S PS U | S PS U |
| Depth | S (PS) U 44"-46" | S PS (U) Variable | S PS U | S PS U | S PS U | S PS U |
| Restrictive Horizons | S (PS) U | S (PS) U | S PS U | S PS U | S PS U | S PS U |
| Available Space Limited Space | S (PS) U | S PS (U) | S PS U | S PS U | S PS U | S PS U |
| Other (specify) | S PS U | S PS U | S PS U | S PS U | S PS U | S PS U |
| Soil Group/Series | IIc Cecil | IIIc Appling | | | | |
| Area Classification | S (PS) U | S PS (U) | S PS U | S PS U | S PS U | S PS U |

# Mecklenburg County
# Health Department

Basil G. Delta, M.D., M.P.H.
Health Director

November 15th, 1988

James W. Herring
Box 699
Davidson, NC 28036

RE: Property located at Oxydendrum Hill Lane 4
FILE: 5112A
PARCEL: 00308104

Dear Sir:

At your request, a field investigation was conducted on the property designated above for the purpose of determining site suitability for the installation of a ground absorption sewage disposal system. The property was found to contain a limited area of soils which were classified as provisionally suitable for such an installation. A copy of the Site Evaluation Report (Serial Number 15712) is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit an Application For An Improvement Permit with an ACCURATELY dimensioned plot plan detailing the location of current and/or proposed buildings, wells and sewage disposal systems to this office. The plan will be reviewed and if it is found that the area of provisionally suitable soils is adequate for the proposed construction, an Improvement Permit will be issued by this Department.

If I may be of assistance, please do not hesitate to contact me.

Very truly yours,

Sylvia D. Daniel, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure

Environmental Health Division
1200 Blythe Boulevard • Charlotte, North Carolina 28203 • (704) 376-4603