

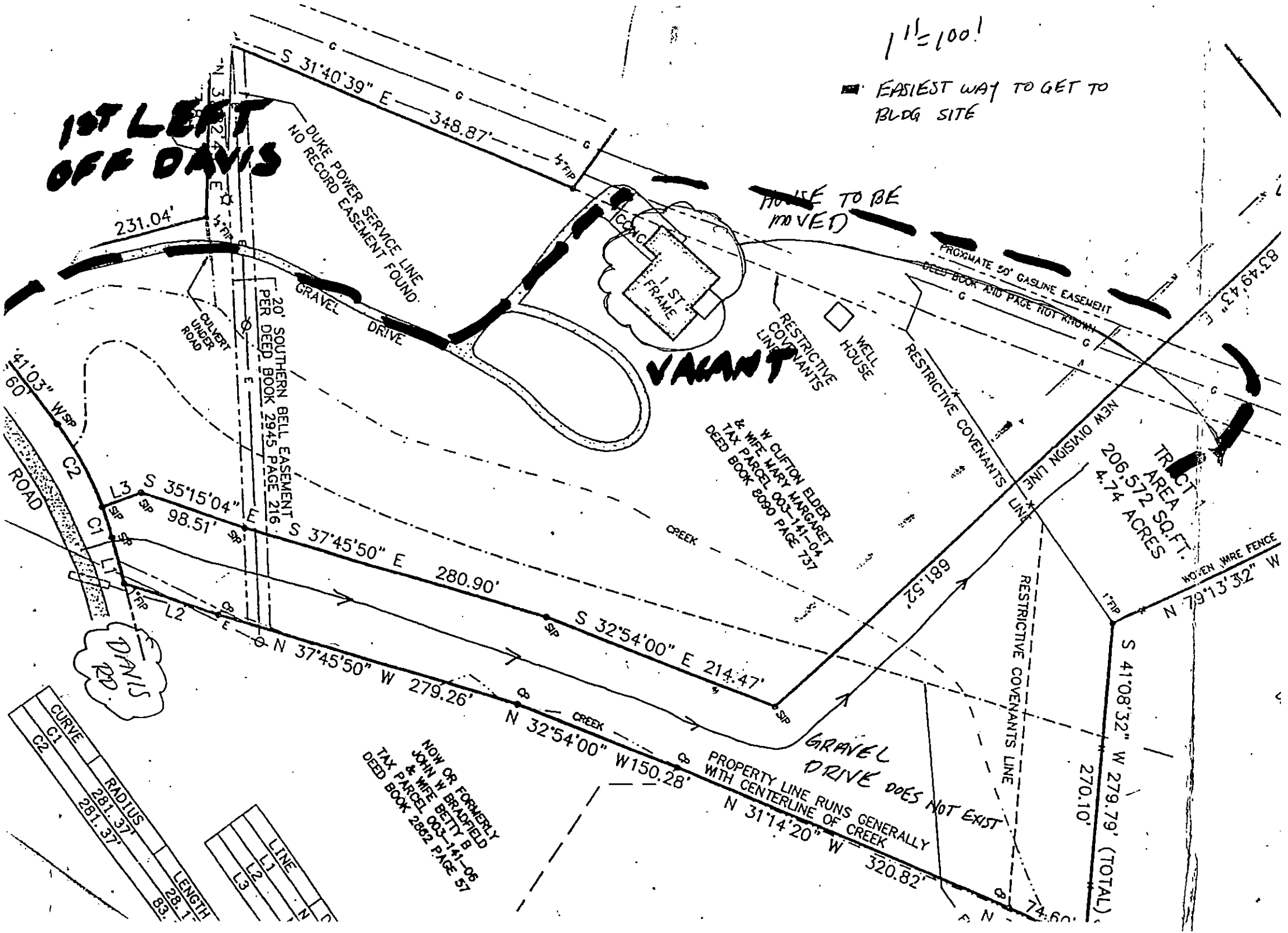

2009 DAVIS RD

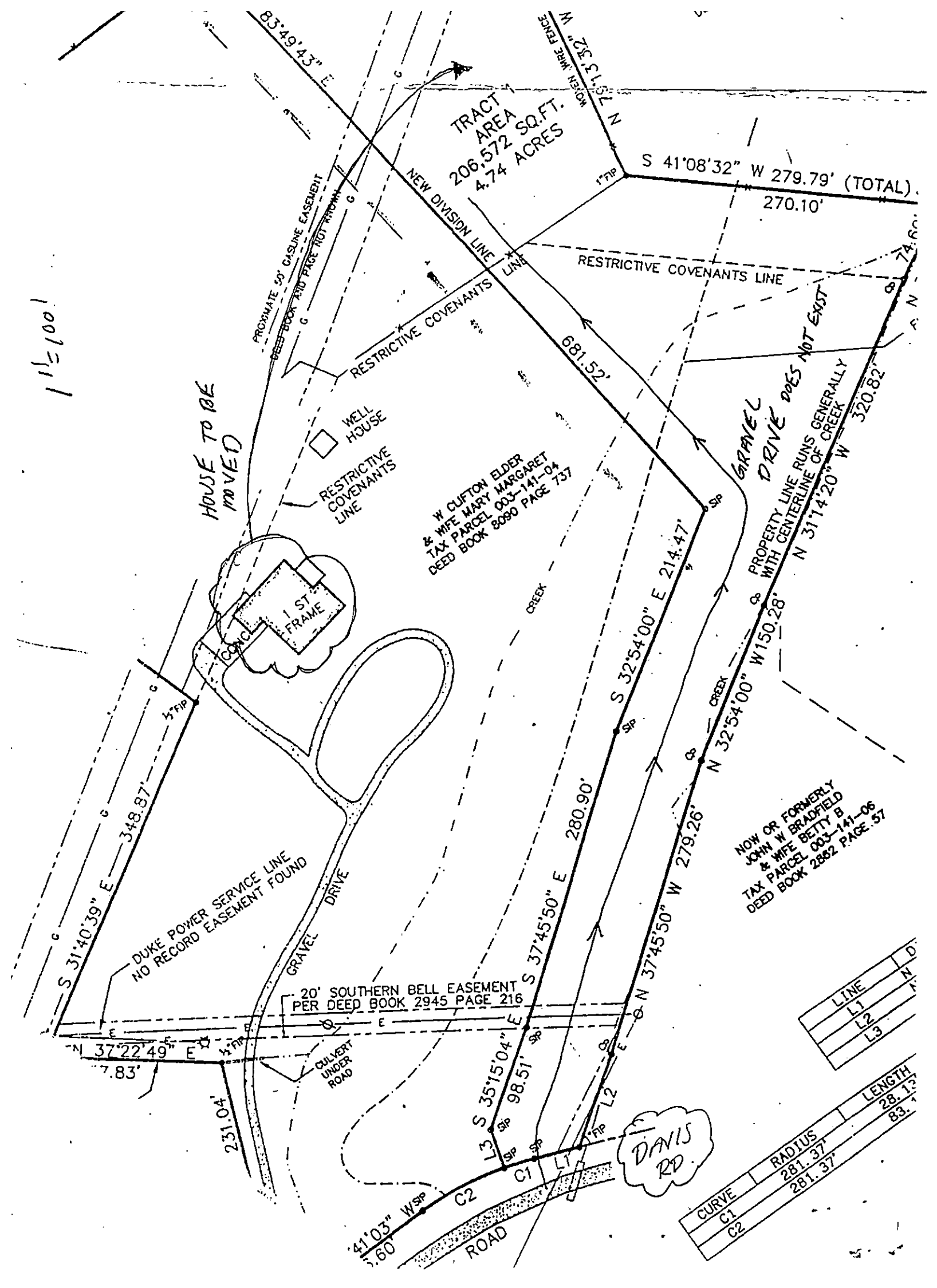
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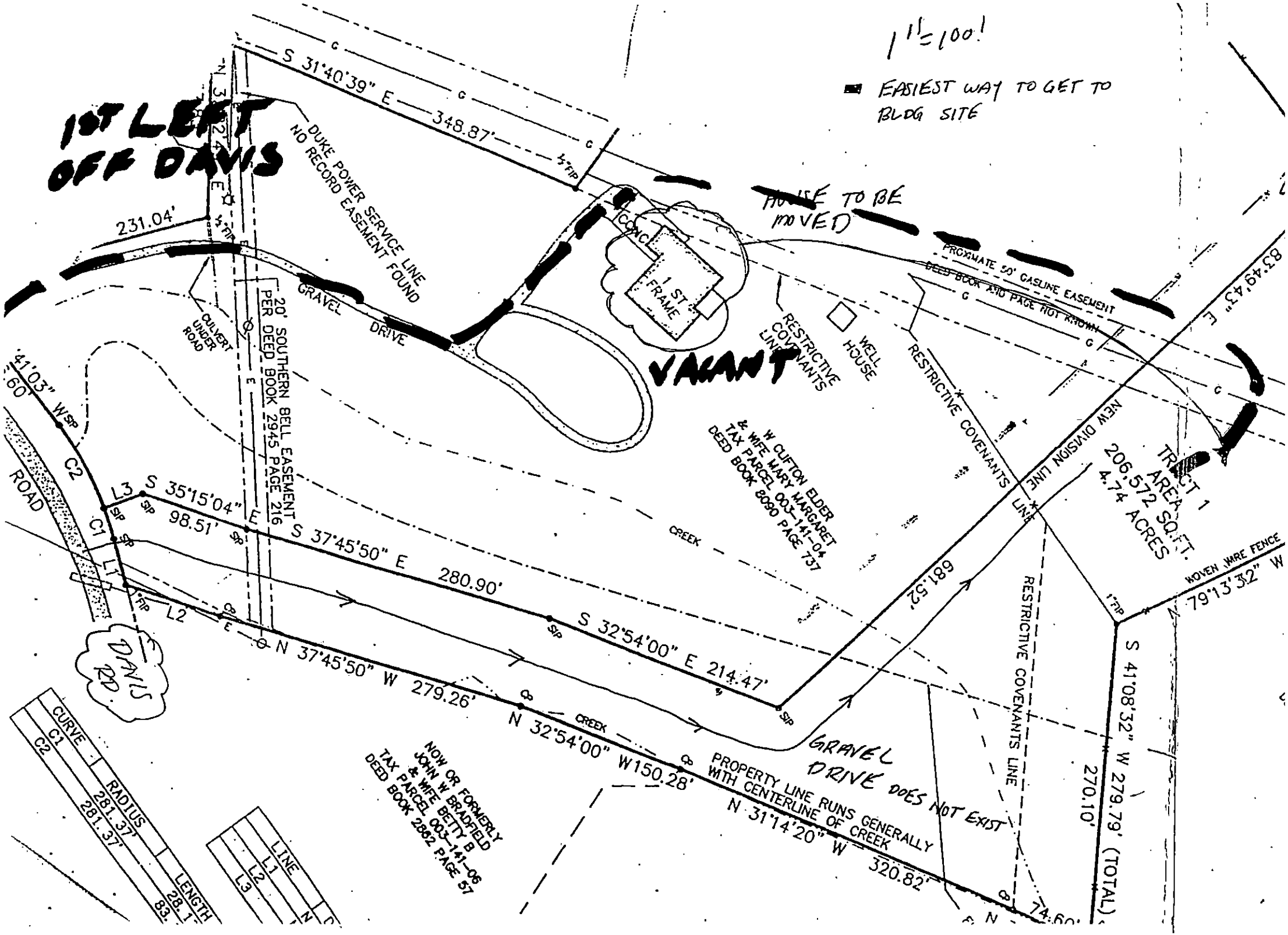
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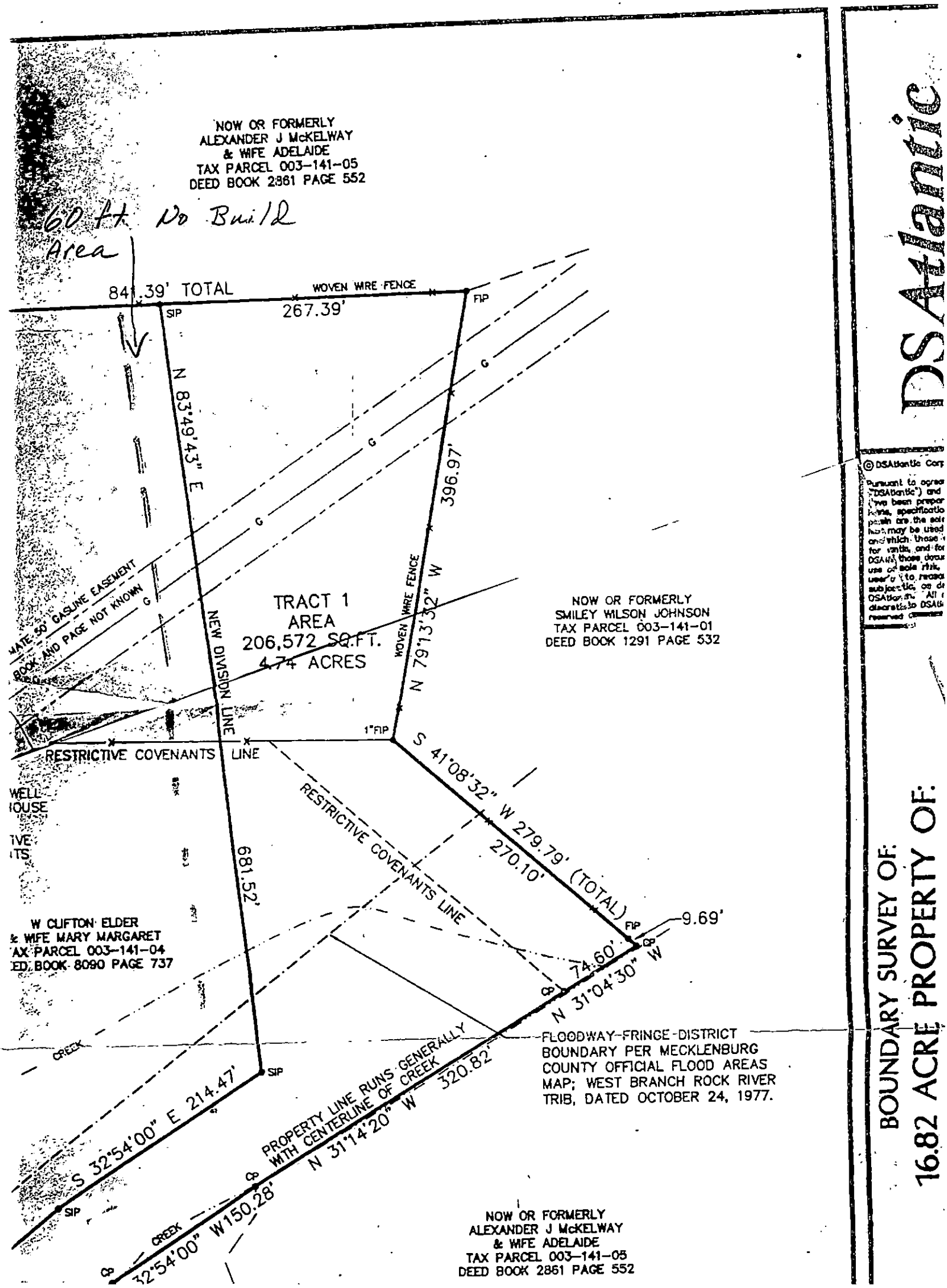
duponbj

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


1" = 100'
EASIEST WAY TO GET TO BLDG SITE
1ST LEFT OFF DAVIS
S 31°40'39" E 348.87'
4"TIP
DUKE POWER SERVICE LINE NO RECORD EASEMENT FOUND
231.04'
HOUSE TO BE MOVED
CONC
1 ST FRAME
VACANT
WELL HOUSE
RESTRICTIVE COVENANTS LINE
RESTRICTIVE COVENANTS
PROXIMATE 50' GASLINE EASEMENT DEED BOOK AND PAGE NOT KNOWN
83°49'43" E
GRAVEL DRIVE
CULVERT UNDER ROAD
20' SOUTHERN BELL EASEMENT PER DEED BOOK 2945 PAGE 216
W CLIFTON ELDER & WIFE MARY MARGARET TAX PARCEL 003-141-04 DEED BOOK 8090 PAGE 737
NEW DIVISION LINE
TRACT AREA 206,572 SQ.FT. 4.74 ACRES
41°03" W
60'
ROAD
C2
C1
L3
S 35°15'04" E
98.51'
S 37°45'50" E 280.90'
S 32°54'00" E 214.47'
CREEK
681.52'
HOVEN WIRE FENCE
N 79°13'32" W
1"TIP
L2
N 37°45'50" W 279.26'
N 32°54'00" W 150.28'
N 31°14'20" W 320.82'
PROPERTY LINE RUNS GENERALLY WITH CENTERLINE OF CREEK
GRAVEL DRIVE DOES NOT EXIST
RESTRICTIVE COVENANTS LINE
S 41°08'32" W 279.79' (TOTAL)
270.10'
74.60'
DAVIS RD.
NOW OR FORMERLY JOHN W BRADFIELD & WIFE BETTY B TAX PARCEL 003-141-06 DEED BOOK 2862 PAGE 57
CURVE
C1
C2
RADIUS
281.37'
281.37'
LENGTH
28.1
83.
LINE
L1
L2
L3


1" = 100'
TRACT AREA 206,572 SQ.FT. 4.74 ACRES
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CULVERT UNDER ROAD
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281.37
281.37
LENGTH
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83.
LINE
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L2
L3




DSAtlantic

BOUNDARY SURVEY OF:
16.82 ACRE PROPERTY OF:

© DSAtlantic Corp
Pursuant to agree
("DSAtlantic") and
have been prepar
forms, specificatio
plans are the sole
that may be used
and which those
for clarity, and for
DSAtl those docu
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subject to, as d
DSAtlantic. All
discretion to DSAtl
reserved

22005

## COMMENTS

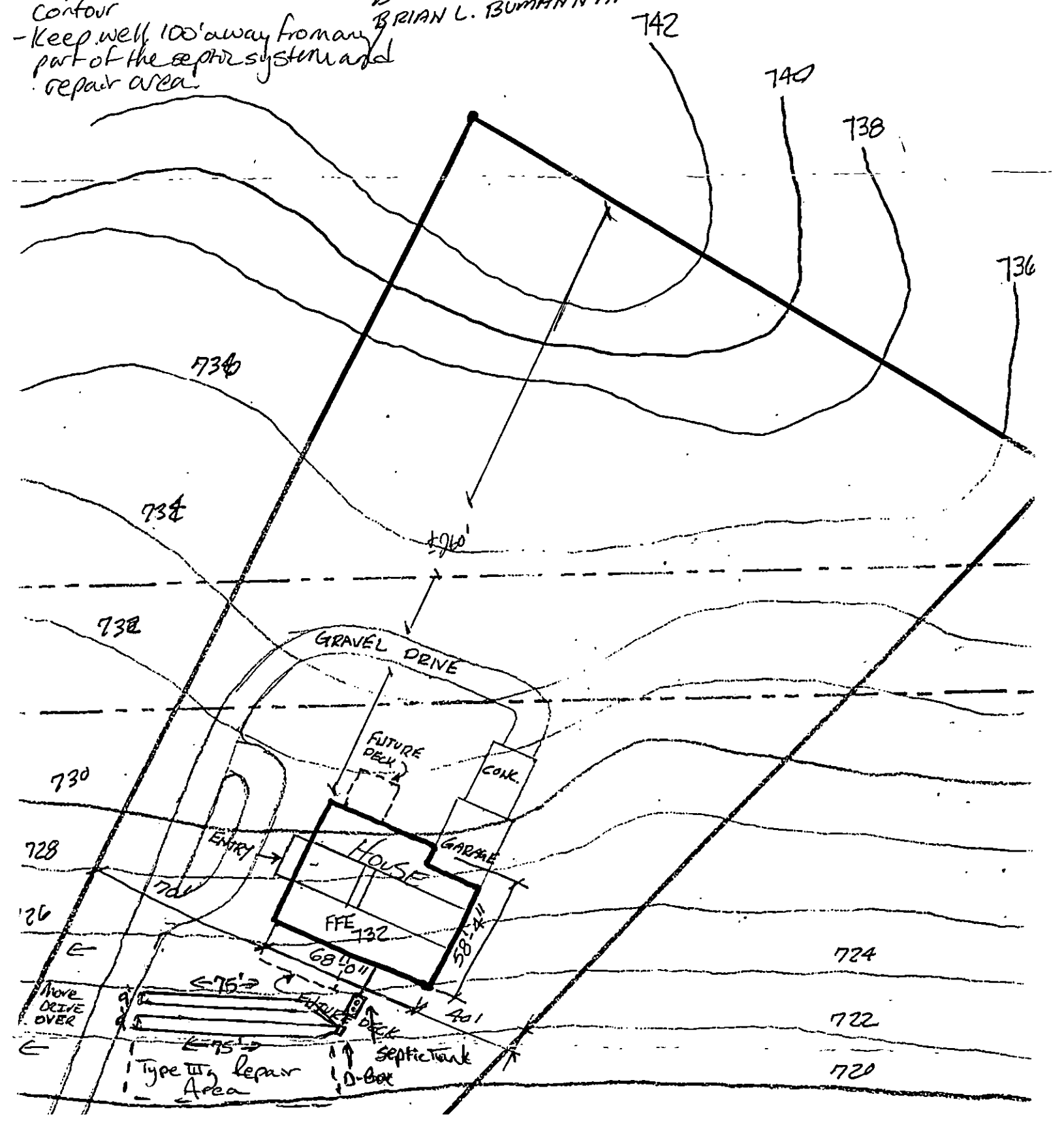
- 1500 gallon septic tank
- D-Box
- (4) 3'w x 75'L x 36" deep max.
- Use innovative system for initial at owner's request 8-15-97
  - repair would be innovative due to space limitations
- Keep drainlines level and on contour
- Keep well 100' away from any part of the septic system and repair area

4.74 AC ADJOINING PARCEL # 003-141-4
ORIGINALLY PART OF 16 AC TRACT

1" = 50'

Brian J. Bumann

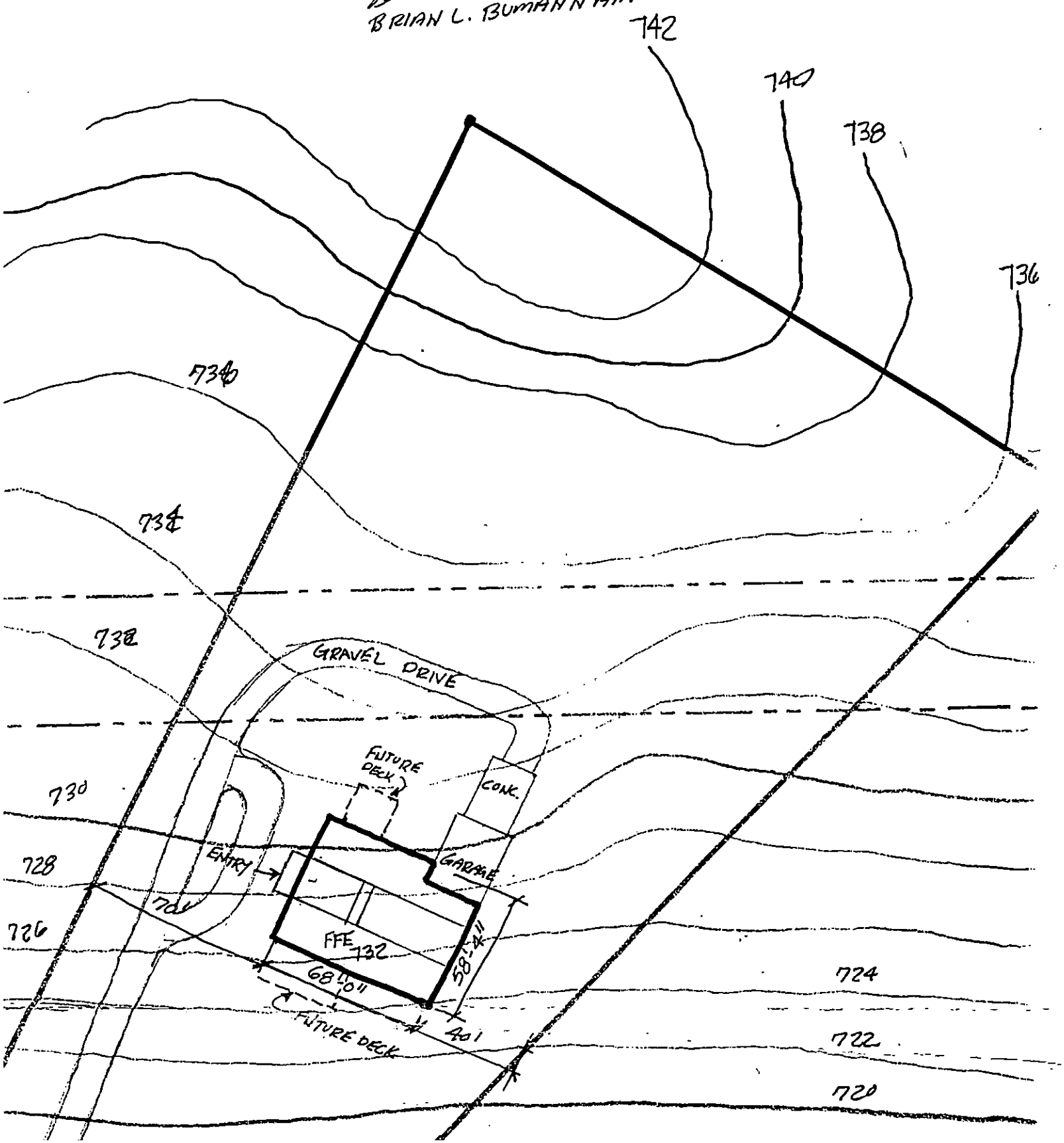
BRIAN L. BUMANN AIA



220B

4.74 AC ADJOINING PARCEL # 003-141-4
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8-15-97
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Brian J. Bumann
BRIAN L. BUMANN AIA

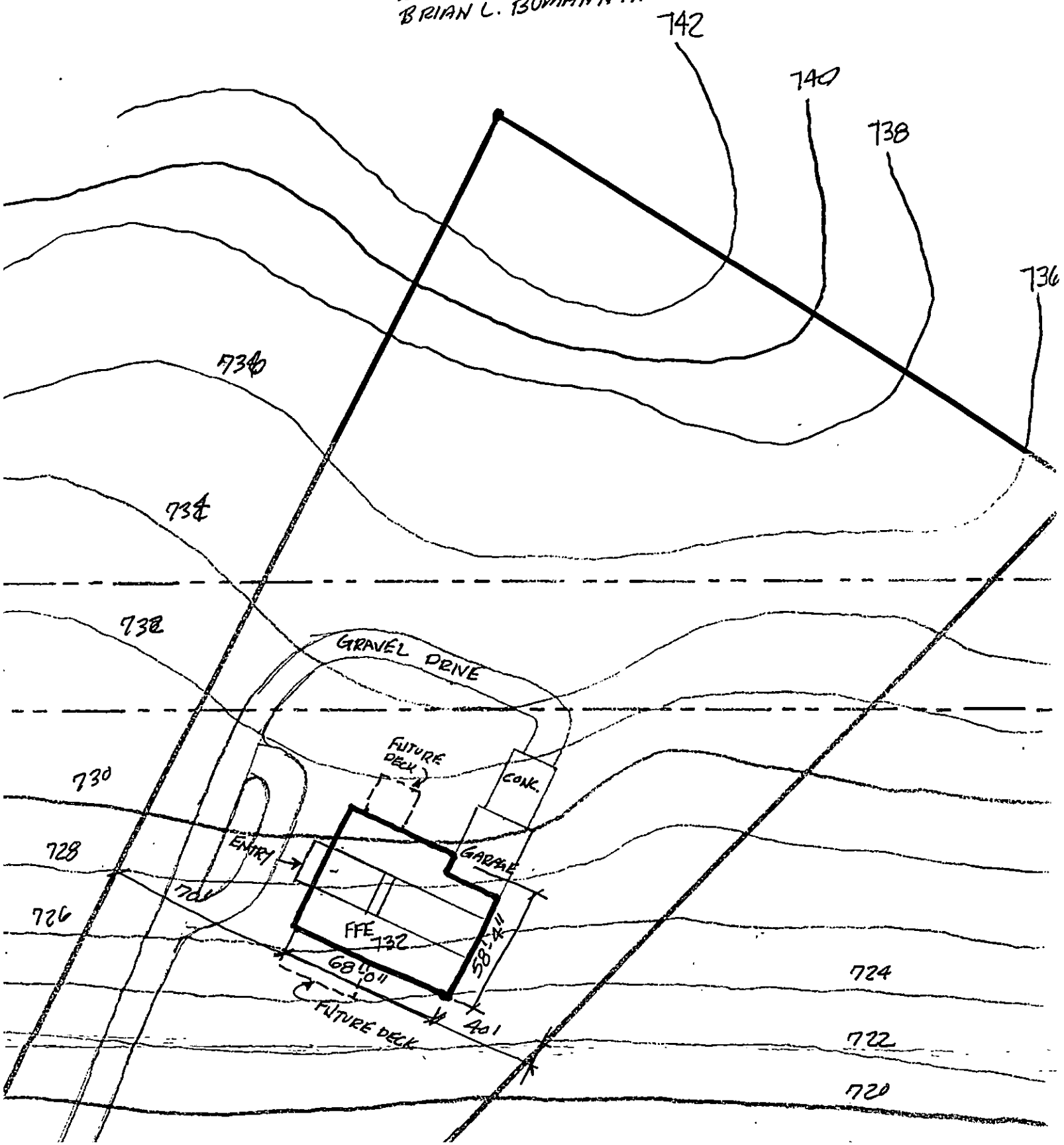


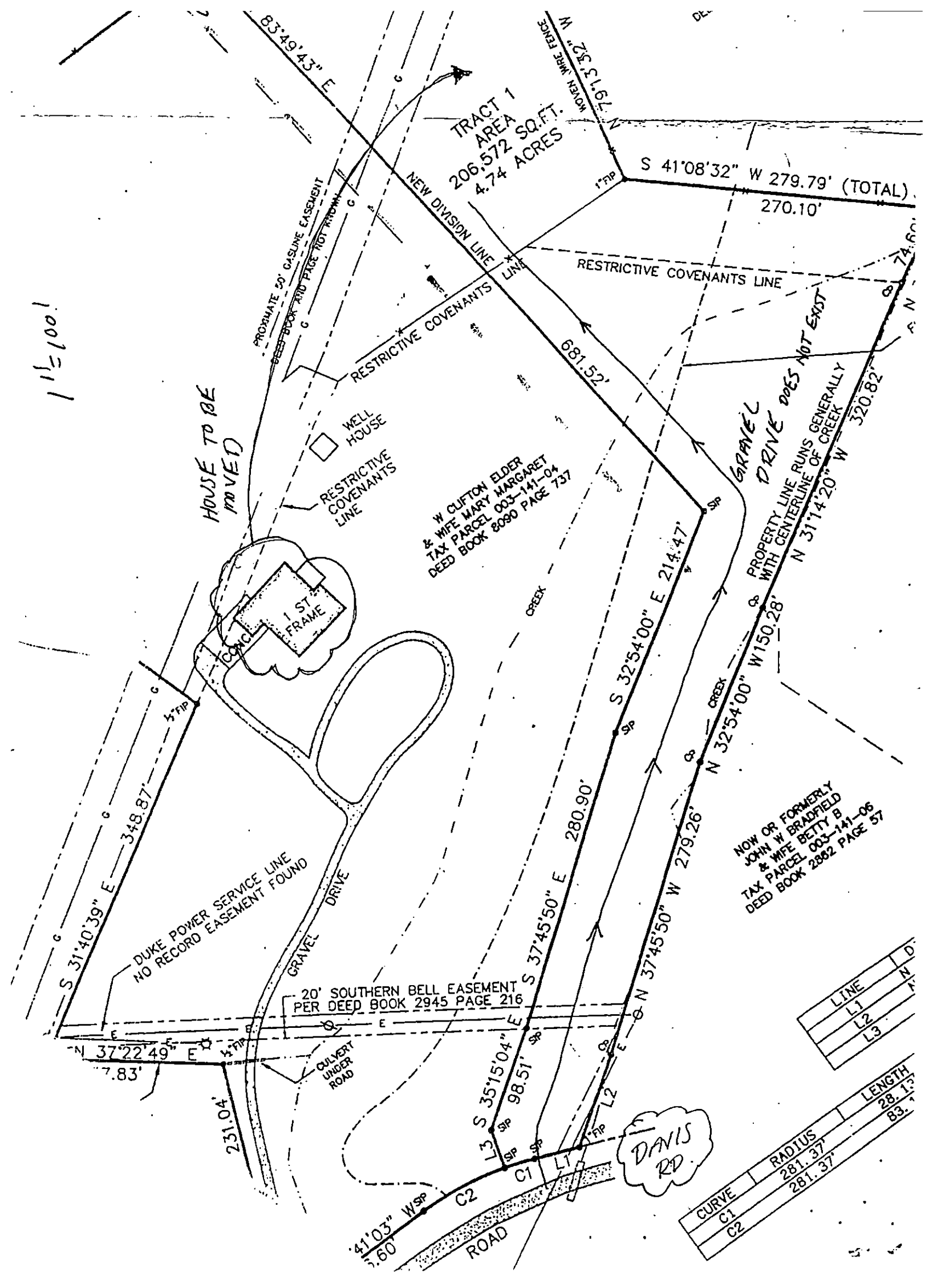
2200B

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8-15-97
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C1
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28.1
C2
281.37'
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2200B pd 10/14/10 site visit 7/14/10

**MECKLENBURG COUNTY**
**GROUNDWATER & WASTEWATER SERVICES**

4682 JJ.

# 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: 003/4104
STREET ADDRESS: 2009 DAVIS RD
CITY: DAVIDSON
STATE: NC ZIP: 28036
SUBDIVISION NAME:
LOT #: LOT SIZE (acres):
TOWNSHIP:

☐ 0-MECKLENBURG ☐ 3-CORNELIUS ☐ 6-HUNTERSVILLE
☐ 1-CHARLOTTE ☐ 4-PINEVILLE ☐ 7-MINT HILL
☒ 2-DAVIDSON ☐ 5-MATTHEWS

4. **BUILDING INFORMATION:**

BUILDING TYPE:
☐ SINGLE MOBILE HOME ☐ MODULAR HOME
☐ DOUBLE WIDE ☐ MULTIPLE FAMILY
☒ HOUSE ☐ OTHER _____
HEATED SQUARE FOOTAGE: 3,500 EXIST 1,100 NEW
NUMBER OF BEDROOMS: 3 EXIST 1 NEW
NUMBER OF OCCUPANTS: 4 1
FOUNDATION TYPE: CMU
☒ CONCRETE SLAB NEW ☐ BASEMENT WITH PLUMBING
☒ CRAWL SPACE EXIST ☐ BASMENT WITH NO PLUMBING

5. **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: 1

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?** Oct 9 1997 ☐ UNKNOWN

11. **WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?** _____ ☒ N/A

12. **PROPERTY OWNER:**

NAME: BRIAN & EMILY BUMANN
ADDRESS: 2009 DAVIS RD
CITY: DAVIDSON
STATE: NC ZIP: 28036
HOME PHONE: 704-896-2707
WORK PHONE:
MOBILE PHONE: 704-918-7546
FAX:

13. **OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:**

NAME: SAME
ADDRESS:
CITY:
STATE: ZIP:
HOME PHONE:
WORK PHONE:
MOBILE PHONE:
FAX:

**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 be invalid. I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials ~~the applicant rights of entry for consistent 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. BLB (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.

[signature] 6-25-10

Property Owner's or Owner's Legal Representative Signature — Date

*OFFICE USE ONLY*

☐ SURVEY PLAT TO SCALE SUBMITTED ☑ SCALED SITE PLAN SUBMITTED ☐ UN-SCALED SITE PLAN SUBMITTED

SEPTIC APPLICATION FEES RECEIVED: $ 350 CK 5138 100 CCS — DATE FEE RECEIVED: 5/17/10

WELL APPLICATION FEES RECEIVED: $ _____ Add'l Site 7/14/10 — DATE FEE RECEIVED: _____

APPLICATION PROCESSED BY: _____

GWS FILE NUMBER ASSIGNED: 2200B

APPLICATION ID NUMBER ASSIGNED: _____

COMMENTS:

CA = 150 0734 fd 7/17/10 All Fees Paid

OP 300 0703



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

**COMMENTS:**

| Landscape Position | Group | Texture | .1955 LTAR | Structure |
|---|---|---|---|---|
| R-Ridge | I | S-Sand | 1.2 - 0.8 | SG-Single Grain |
| SS-Shoulder Slope | | LS-Loamy Sand | | M-Massive |
| LS-Linear Slope | | | | CR-Crumb |
| FS-Foot Slope | II | SL-Sandy Loam | 0.8 - 0.6 | GR-Granular |
| NS-Nose Slope | | L-Loam | | SBK-Subangular Blocky |
| HS-Head Slope | | | | ABK-Angular Blocky |
| CC-Concave Slope | III | SI-Silt | 0.6 - 0.3 | PL-Platy |
| CV-Convex Slope | | SICL-Silty Clay Loam | | PR-Prismatic |
| T-Terrace | | | | |
| FP-Flood Plain | | CL-Clay Loam | | |
| | | SCL-Sandy Clay Loam | | |
| | IV | SC-Sandy Clay | 0.4 - 0.1 | |
| | | SIC-Silty Clay | | |
| | | C-Clay | | |

| Consistence Moist | Consistence Wet | Mineralogy |
|---|---|---|
| VFR-Very Friable | NS-Non-Sticky | SEXP-Slightly Expansive |
| FR-Friable | SS-Slightly Sticky | EXP-Expansive |
| FI-Firm | S-Sticky | |
| VFI-Very Firm | VS-Very Sticky | |
| EFI-Extremely Firm | NP-Non-Plastic | |
| | SP-Slightly Plastic | |
| | P-Plastic | |
| | VP-Very Plastic | |

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

# IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30004682** GWS File #: **2200B** Tax Parcel #: **003-141-04**

- This 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.

**I. This Improvement Permit Shall:** Expire in Five (5) Years **Expiration Date (If Applicable):** 7/23/2015

Type of Installation: Residential - New System Lot Number: 0

Structure Type: HOUSE Size ($ft^2$): 1100 # Bedrooms: 1 # Occupants: 1

Building Foundation: Concrete Slab Water Supply: Shared Well

**II. Initial System Type:** Pump to Approved **System Classification:** IIIb

Initial System Specifications:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Design Flow (gpd): | 240 | LTAR ($gpd/ft^2$): | 0.275 | Septic Tank Size (gal): | 1500 | Pump Tank Size (gal): | 1000 |
| Trench Width (ft): | 3 | Trench Spacing (ft): | 9 | Absorption Area ($ft^2$): | 655 | Total Trench Length (ft): | 218 |
| Maximum Trench Depth (in): | 29 | Depth of Media (in): | 12 | Distribution Device: | Pressure Manifold | | |

**III. Repair System Type:** PPBPS (pressurized) **System Classification:** IVa

Repair System Specifications:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Design Flow (gpd): | 240 | LTAR ($gpd/ft^2$): | 0.275 | Septic Tank Size (gal): | 1500 | Pump Tank Size (gal): | 1000 |
| Trench Width (ft): | 3 | Trench Spacing (ft): | 9 | Absorption Area ($ft^2$): | 436 | Total Trench Length (ft): | 145 |
| Maximum Trench Depth (in): | 26 | Depth of Media (in): | N/A | Distribution Device: | Manifold (LPP Distri | | |

**IV. Permit Conditions/Comments:**

*(Please See the Following Page for Permit Conditions.)*

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment, and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until an INSTALLATION APPROVAL is granted by the Department.
- The septic system installer shall be a registered septic contractor with Mecklenburg County Health Department.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

DENR Authorized Agent: Jeremy Michelone Owner/Legal Agent: _____
Print Name

Signature: Jeremy Michelone R.S. Signature: _____

Date Issued: 7/23/2010

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

## IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30004682** GWS File #: **2200B**

**IV. Permit Conditions/Comments:**

- This type of septic system requires an inspection once every 5 years by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- This type of repair system requires the property owner to obtain a contract with a Certified Operator to perform routine inspections and maintenance on the system.
- This Improvement Permit is being issued based on a supplemental soil investigation performed by staff from our office.
- All components of the septic system must be installed in accordance with the required setbacks listed on the corresponding plot plan.
- Keep lumbing as high as possible.

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment and Disposal Systems* and is subject to the following provisions:

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- The septic system installer shall be a registered septic contractor with Mecklenburg County Health Department.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

DENR Authorized Agent: Jeremy Michelone

Signature: Jeremy Michelone R.S.

Date Issued: 7/23/2010

Owner/Legal Agent: _____
Print Name

Signature: _____

FEE: 200 CK
DATE: 6/17/10
CRT I 1

4875

**APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM**
**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 06/07

FILE #: 2200B

**TYPE APPLCATION:** JPM 4673

- [X] 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: BRIAN BUMANN
ADDRESS: 2009 DAVIS RD
CITY: DAVIDSON NC
STATE: ZIP: 28036
PHONE: 704-896-2709
ALTERNATE PHONE: 704-918-7546

**PROPERTY OWNER:**
NAME:
ADDRESS: SAME
CITY:
STATE: ZIP:
PHONE:
ALTERNATE PHONE:

**JOB LOCATION INFORMATION**
**TAX/PARCEL #:** 003-141-04
**STREET ADDRESS:** 2009 DAVIS RD
**CITY:** DAVIDSON
**STATE:** NC **ZIP:** 28036
**SUBDIVISION OR MOBILE HOME PARK NAME:**
**LOT #:**

**TOWNSHIP:**
- [ ] 0-MECKLENBURG
- [ ] 1-CHARLOTTE
- [X] 2-DAVIDSON
- [ ] 3-CORNELIUS
- [ ] 4-PINEVILLE
- [ ] 5-MATTHEWS
- [ ] 6-HUNTERSVILLE
- [ ] 7-MINT HILL

**WATER SUPPLY:**
- [ ] MUNICIPAL (M)
- [ ] COMMUNITY (C)
- [X] PRIVATE WELL (P)
- [ ] SHARED WELL (S)
- [ ] OTHER 'SPRINGS' (O)

**RESIDENTIAL PROPERTY TYPE:**
- [X] 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 EXISTING 1 NEW
NUMBER OF OCCUPANTS: 4 EXISTING 1 NEW

**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
- [X] ~~OTHER ADDING DETACHED HOUSE FOR MOM~~

**ADDITION TYPE DETACHED FROM EXISTING STRUCTURE:**
- [ ] DETACHED GARAGE
- [ ] DETACHED GARAGE WITH PLUMBING
- [ ] POOL HOUSE
- [ ] SHOP
- [ ] BARN
- [ ] STORAGE SHED
- [ ] DETACHED PORCH / DECK
- [X] OTHER ADDING DETACHED HOUSE FOR MOTHER

*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: 6-17-10

*The undersigned, an authorized agent of the Mecklenburg County Health Departme... Job Location contained in this document. This approval is granted in accordance with the... Treatment and Disposal in effect at the time of issuance of the permit and is subject t...

- 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

Needs to apply for an I.P. and pay additional $150.00

FEE: $100
DATE: 8-18-97 (80)
EF 1334

**APPLICATION FOR IMPROVEMENT PERMIT FOR RESIDENTIAL SITE INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM**

I J CRT

TYPE APPLICATION: ✓ NEW SYSTEM __ EXPANSION/ ALTERATION 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 #: 2200 B (also see o H File 20166)

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 003-141-04 4.74 AC OF ORIGINAL 16

STREET ADDRESS: 2008 DAVIS RD. ORIGINAL ADDRESS

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

TYPE OF BUILDING (CHECK ONE):

__ SINGLE MOBILE HOME(S)
__ DOUBLE WIDE (D)
✓ HOUSE (H)
__ MODULAR HOME (M)
__ MULTIPLE FAMILY (U)
__ OTHER (O)

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 3600

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 3

CLOSING DATE TO BE DETERMINED

FOUNDATION FOR RESIDENCE:

__ WITHOUT BASEMENT
__ ON SLAB
✓ CRAWL SPACE
__ WITH BASEMENT /PLUMBING
__ WITH BASEMENT /NO PLUMBING

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION: THE HOUSE WILL BE MOVED TO ADJACENT 4.74 AC TRACT SEE ATTACHED

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: __ YES ✓ NO TYPE: _____

WATER SUPPLY (CHECK ONE):

__ COMMUNITY (C)
__ MUNICIPAL (M)
✓ PRIVATE WELL (P)
__ 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
EXISTING WASTEWATER SYSTEMS ✓ YES __ NO
EASTMENTS OR RIGHT-OF-WAYS ✓ YES __ NO
WELL, SPRINGS OR WATERLINES __ YES __ NO
DESIGNATED WETLANDS __ YES __ NO
→ LOCATION TO BE DETERMINED

| PROPERTY OWNER: MARY MARGARET & CLIFTON ELDER | LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE: |
|---|---|
| NAME: ELDER (LAST) MARY (FIRST) M (MI) | NAME: BUMANN (LAST) BRIAN (FIRST) L (MI) |
| ADDRESS: 375 GREEN COVE RD. | DAYTIME PHONE: ( ) 379 - 1919 |
| CITY: BANNER ELK STATE: NC ZIP: 28604 | |
| DAYTIME PHONE: ( ) — | |

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. 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: Brian L Bumann DATE: 8-18-97

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

2200B

Aug 14, 1997

Cliff Elder
375 Green Cove R
Banner Elk
N.C. 28604
704-898-4719

Re: 2005 Davis Rd.
4.75 remaining Ac.
of TAX MAP parcel
Book 03 page 14 OR
003-141-4

To Whom it may Concern
Mecklenburg County Health Department
OR ANY other AGENCY has my
PERMISSION to access drill holes.
OR Conduct ANY other test
Necessitated by my Agent.
Brian Bumann
212 Chesterfield Ave.
Charlotte N.C. 28205
704-375 9889 Home
379 1920 FAX

Sincerly
W. Cliff Elder

DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

COUNTY: _____

# SOIL/SITE EVALUATION — #2 22008
## for ON-SITE WASTEWATER SYSTEM

PO 003-141-041

OWNER: Mary M. Ebeler ET. APPLICANT: _____
ADDRESS: 375 Treetop Rd; Banner Elk APPLICATION DATE: _____ DATE EVALUATED: _____
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949): 300gpd PROPERTY SIZE: 1.0 ±
LOCATION OF SITE: 2009 Davis Rd PROPERTY RECORDED: _____
WATER SUPPLY: ☑ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

| PROFILE # | slopes 6-15% 1940 LAND-SCAPE POSITION/ SLOPE % | HORI-ZON 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 | 0-5" | gr l s cl | SEXPl ss/sp Fr/ vfr | > 48" TO soil wetness | 48" | N/A | None | PS .39/F2 IV |
| | | 5-48" | sBK/c | Fi/SEXP/SP | | | | | |
| 2 | LS | 0-10" | gr/cl | Fr/SEXP/ SS/SP | > 48" TO soil Wetness | 48" | N/A | None | PS .39/F2 IV |
| | | 10-48" | sBK/c | Fi/SEXP/SP | | | | | |
| 3 | LS | 0-6" | gr/cl | Fr/SEXP/SS/SP | > 48" TO soil wetness | 48" | N/A | None | PS .39/F2 IV |
| | | 6-48" | sBK/sc | Fi/SEXP/SP | | | | | |
| 4 | LS | 0-5" | gr/cl | Fr/SEXP/SS/SP | > 48" TO soil wetness | 48" | N/A | None | PS .39/F2 IV |
| | | 5-48" | sBK/c | Fi/SEXP/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. Marlin 8-25-99
OTHER(S) PRESENT: LSS

COMMENTS: 100% Repair

# LEGEND

*use the following standard abbreviations*

| LANDSCAPE POSITION | GROUP | SOIL TEXTURE | CONVENTIONAL 1955 LTAR | LPP 1957 LTAR | MINERALOGY/ CONSISTENCE | STRUCTURE |
|---|---|---|---|---|---|---|
| C (Concave Slope) | I | S (Sand) | 1.2 - 0.8 | 0.6 - 0.4 | NEXP (Non-expansive) | G (Single Grain) |
| V (Convex Slope) | | LS (Loamy Sand) | | | SEXP (Slightly Expansive) | M (Massive) |
| (Drainage Way) | | | | | EXP (Expansive) | CR (Crumb) |
| S (Debris Slump) | II | SL (Sandy Loam) | 0.8 - 0.6 | 0.4 - 0.3 | | GR (Granular) |
| P (Flood Plain) | | L (Loam) | | | | SBK (Subangular Blocky) |
| S (Foot Slope) | | | | | | ABK (Angular Blocky) |
| (Head Slope) | III | SI (Silt) | 0.6 - 0.3 | 0.3 - 0.15 | | PL (Platy) |
| (Linear Slope) | | SICL (Silty Clay Loam) | | | | PR (Prismatic) |
| (Nose Slope) | | CL (Clay Loam) | | | MOIST | WET |
| (Ridge) | | SCL (Sandy Clay Loam) | | | | |
| (Shoulder Slope) | | SLC (Silt Loam Clay) | | | VFR (Very Friable) | NS (Non-sticky) |
| (Terrace) | | | | | FR (Friable) | SS (Slightly Sticky) |
| | IV | SC (Sandy Clay) | 0.4 - 0.1 | 0.2 - 0.05 | FI (Firm) | S (Sticky) |
| | | SIC (Silty Clay) | | | VFI (Very Firm v. Very Sticky) | VS (Very Sticky) |
| | | | | | EFI (Extremely Firm) | NP (Non-plastic) |
| | | O (Organic) | None | | | SP (Slightly Plastic) |
| | | | | | | P (Plastic) |
| | | | | | | VP (Very Plastic) |

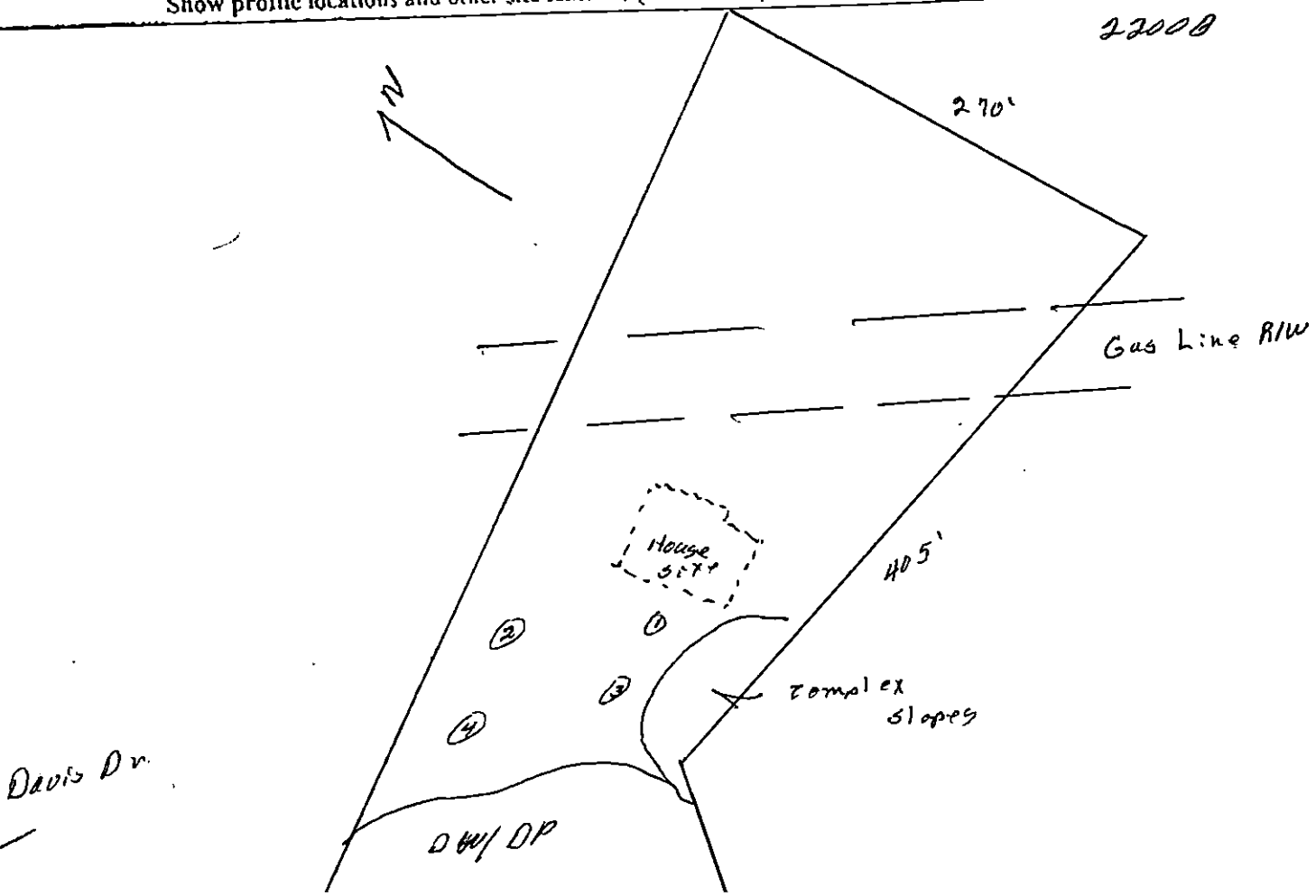
*OTES*

| | |
|---|---|
| *ORIZON DEPTH* | In inches below natural soil surface |
| *EPTH OF FILL* | In inches from land surface |
| *ESTRICTIVE HORIZON* | Thickness and depth from land surface |
| *PROLITE* | S(suitable) or U(unsuitable) |
| *OIL WETNESS* | Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation |
| *LASSIFICATION* | S (Suitable), PS (Provisionally Suitable), or U (Unsuitable) |

valuation of saprolite shall be by pits.

ong-term Acceptance Rate (LTAR): gal/day/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).



CONDITIONS OF IMPROVEMENT PERMIT

Permit Number: 2200B

Tax Number: 003-141-04

- 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 | ✓ No | ___ Partial Basement | |
| Type Primary Wastewater System<br>Type (circle one):<br>I II (III) IV V VI | ___ Conventional<br>___ Prefabricated, permeable block panel system<br>___ Shallow Placed Conventional | ___ Low Pressure Pipe<br>___ Large Diameter Pipe<br>___ Fill<br>___ Other | ✓ Innovative or Experimental:<br>___ IWWS-93-1<br>___ IWWS-93-2<br>___ IWWS-94-1 | |
| 13 Long-term acceptance rate | 360 Max gallons/day wastewater flow | 900 Absorption Area (sq ft) | 9' Trench spacing (min. on centers) | |
| Yes Serviced by private well | 500 Gallon septic tank | 300 Total trench length (ft) | 36" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions) | |
| 3 Bedrooms in residence | N/A Gallon pump tank | N/A Depth of stone INNOVATIVE | | |
| Any surface waters present: | Type: | Minimum separation distance: | | |
| Site modifications required: | | | | |
| Additional Conditions: - Keep well 100' away from any part of the septic system and repair area.<br>- Group I, II, or III backfill required around any "chamber" type system. | | | | |
| Repair Area System Type<br>Type (circle one):<br>I II (III) IV V VI | ___ Conventional<br>___ Prefabricated, permeable block panel system<br>___ Shallow Placed Conventional | ___ Low Pressure Pipe<br>___ Large Diameter Pipe<br>___ Fill<br>___ Other | ✓ Innovative or Experimental:<br>___ IWWS-93-1<br>___ IWWS-93-2<br>___ IWWS-94-1 | |
| 900 Absorption Area (Sq ft)<br>300 Total Trench Length (Ft) | N/A Depth of Stone Trench | 9' Trench spacing (min. on centers) | 36" 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.

Larry B. Thompson Jr. R.S. 8-28-97

DEHNR Authorized Agent Date

10-10-97

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

pd 10/10/97 CK 08884

YED

**FEE:** $100.00 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
**DATE:** _____ **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

**DATE:** 8-28-97 **PERMIT NO:** 2200B

**PARCEL NO:** 003-141-04

**JOB LOCATION ADDRESS:** 2009 Davis Road

**PROPERTY OWNER:** Brian L. Bumann

**BUILDING CONTRACTOR:** _____

**SUBDIVISION NAME:** _____

**AUTHORIZATION ISSUED BY:** Tony B. Monteith Jr. R.S. **DATE:** 8-28-97

DEHNR AUTHORIZED AGENT

## AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. _____, 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 Improvement Permit.

## 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.

10-10-97

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE — DATE

* Using Innovative System as initial system at property owners request.

**MECKLENBURG COUNTY HEALTH DEPARTMENT**
**ENVIRONMENTAL HEALTH DIVISION**

## OWNER'S ACKNOWLEDGMENT OF MODIFIED/ALTERNATIVE REPLACEMENT SYSTEM REQUIREMENT

Site Address: 2009 Davis Road

File Number: 2200 B

Parcel Number: 003-141-04

Owner/Agent Name: Brian L. Bumann
(Please print)

Date: 8-27-97 Number of Bedrooms: 3

Receipt of the plan and specifications for a conventional system of sewage disposal for the above property is hereby acknowledged. Upon receipt of the information, a review was made of the material on file and a site evaluation was conducted. The plan was then reviewed in conjunction with provisions of 15A NCAC 18A .1900 - "Sewage Treatment and Disposal Systems." The plan as submitted is disapproved because there is not sufficient available space for a repair area for a conventional replacement system.

This site may be developed if the repair area is found to be acceptable for either a modified system (Rule .1956) or an alternative system (Rule .1957) for the replacement system as allowed by the following Rule 15A NCAC 18A .1945(b).

(b) Sites shall have sufficient available space for a repair area separate from the area determined in Paragraph (a) of this Rule. The repair area shall be based upon the area of the nitrification field required to accommodate the installation of a replacement system as specified in Rule .1955, .1956, or .1957 of this Section. Prior to issuance of the initial Improvement Permit for a site, the local health department shall designate on the permit the original system layout, the repair area, and the type of replacement system.

Please be advised that you have the right of an informal review by this Department and the right of appeal under G.S. 130A-335(g) and 130A-24, which appeal can be held in Mecklenburg County.

By signing this form, and signing and recording in the Mecklenburg County Register of Deeds Office the attached reclassification form entitled, **"ACKNOWLEDGEMENT OF REQUEST BY OWNER FOR RECLASSIFICATION OF SITE FROM *"UNSUITABLE" TO "PROVISIONALLY SUITABLE"* UNDER 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c)**, you, the property owner,

understand and acknowledge your option to develop this site initially with a conventional sewage system and when needed, subsequently to repair or replace said system with a modified or alternative system as described in Rules .1956 "Modification to Septic Tank Systems," or .1957(a), (b), or (c) "Design Criteria for Design of Alternative Sewage Systems." The completed reclassification form must be approved by this office before it can be recorded.

In addition, you the property owner, also understand that the following conditions will apply:

- Any changes on the property may make the Improvement Permit null and void and may make the Improvement Permit subject to revocation.

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement system.

Larry B. Thompson, R.S. 8-27-97

Environmental Health Specialist — Date

I have reviewed this document and understand its provisions and implications concerning the issuance of the Improvement Permit for the above-referenced site.

[signature] 8-27-97

Property Owner Signature — Date

700 North Tryon Street, Suite 211, Charlotte, North Carolina 28202,
(704) 336-5102

Already BRIAN BUMANN
Mail To: 1401 WEST MOREHEAD ST. SUITE 100
CHARLOTTE NC 28208

FILE COPY

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

WASTEWATER TREATMENT AND DISPOSAL SYSTEM DESIGN AGREEMENT: 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c); OR .1969

JUDITH A GIBSON REG OF DEEDS MECK NC
FILED FOR REGISTRATION 10/13/97 16:46
BK: 09298 PG: 0722/0724 #:0465 13.05

FILE # 2200 B
PARCEL # TRACT 1 PORTION OF 003-141-04

The undersigned, BRIAN L. BUMANN, owner of property located at TRACT 1 PORTION OF 003-141-04, (the "site") and described in an instrument recorded in Book 8090 at Page 737, Mecklenburg Public Registry, hereby acknowledges that the undersigned applied to the Mecklenburg County Health Department (the "Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 15A NCAC 18A .1900 et seq.; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data, and other information which indicate to the Department that the septic tank system proposed by the undersigned is allowed by the rules; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is the responsibility of the designer, owner, developer, installer, or user of the system, as applicable, and that neither the Department nor its officials, employees, or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further acknowledges that the following conditions will apply to the site:

- Any changes on the property may make the Improvement Permit Null and void and may make the Improvement Permit subject to revocation.

*This instrument was prepared by:* BRIAN L. BUMANN AIA
*Mail after recording to:* BRIAN L. BUMANN 1401 WEST MOREHEAD ST. SUITE 100 CHARLOTTE NC 28208

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees, and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, this 13th day of October, 1997.

_____ (SEAL)
(Corporate Name)

_____ (SEAL)

By: _____ _____ (SEAL)

_____ President _____ (SEAL)

ATTEST:

_____

_____ Secretary

(Corporate Seal)

STATE OF NORTH CAROLINA
COUNTY OF Mecklenburg

I, Polly Ann Davenport, a Notary Public for said County and State, do hereby certify that Brian L. Baumann personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 13th day of October, 1997.

Polly Ann Davenport
Notary Public

My Commission Expires:
May 18, 2002

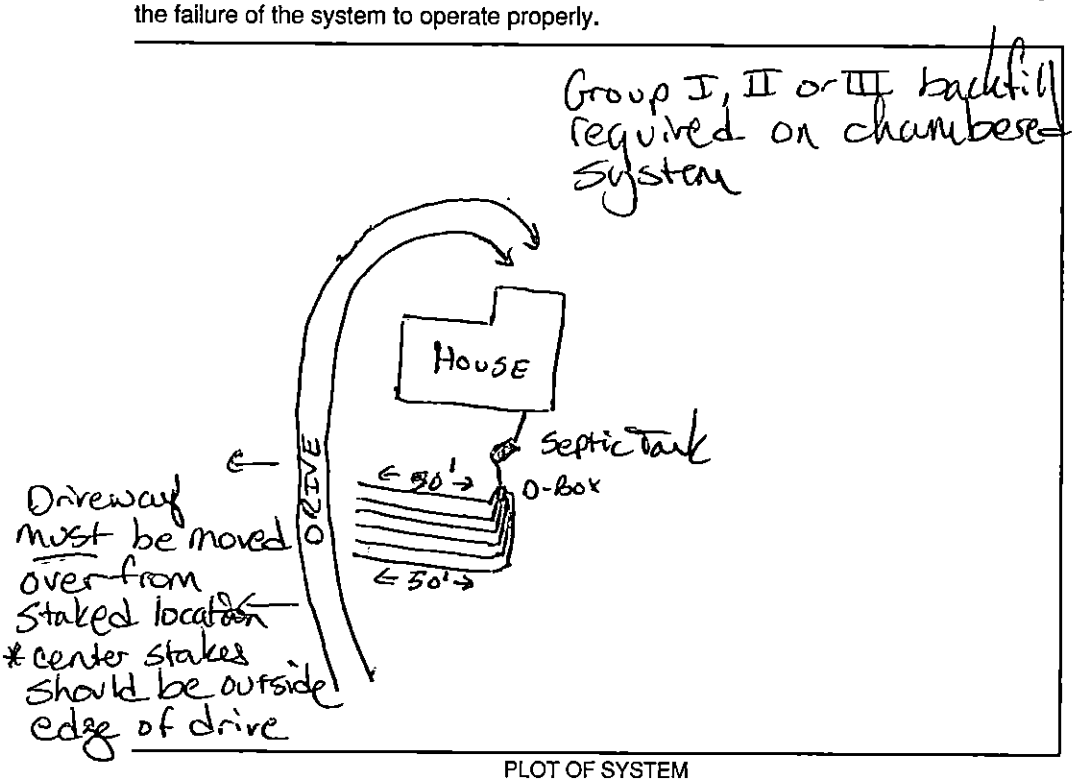
POLLY ANN DAVENPORT NOTARY PUBLIC MECKLENBURG COUNTY, NC

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

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

FILE: 2200B DATE: 1-2-98
TC: 003-141-04 ☒ L
SERIAL Nº 17503

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 6-18-97. All work shall be completed on or before 2-2-98, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 15A 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 1500 gallons
Liquid Capacity of Dosing Tank — gallons
Tank Construction PVC
Trench Depth max 36"
Absorption and/or Nitrification Lines:
Trench Width 3 feet
Trench Walls Scored and Porous Yes
Total Line Length 300 feet
Number of Lines 6
Depth of Stone Group I, II, III backfill inches
Distance from House 5 feet
Distance from Property Line 10 feet
Distance from Well 750 feet

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

NAME OF OWNER Brian L. Burman

LOCATION OF PROPERTY 2009 Davis Road

Comments: Type III 3 bedrooms
(6) 3'w x 30'L x 36"d max

Larry B. Thompson, Jr. R.S.
Environmental Health Specialist

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

# CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 2200-S DATE: 2-25 98

TC: 003141-OA ☒ L ☒ CRT

SERIAL Nº 17482

Name of Owner MARY ELDER Juris.: _____

Address of Property 2009 DAVIS DR

**Inspection Data:**

Tank Material PCC

Total Length of Drainfield 300

Number of Lines 5 @ varies

Cover Depth 12"

Water Supply Source well

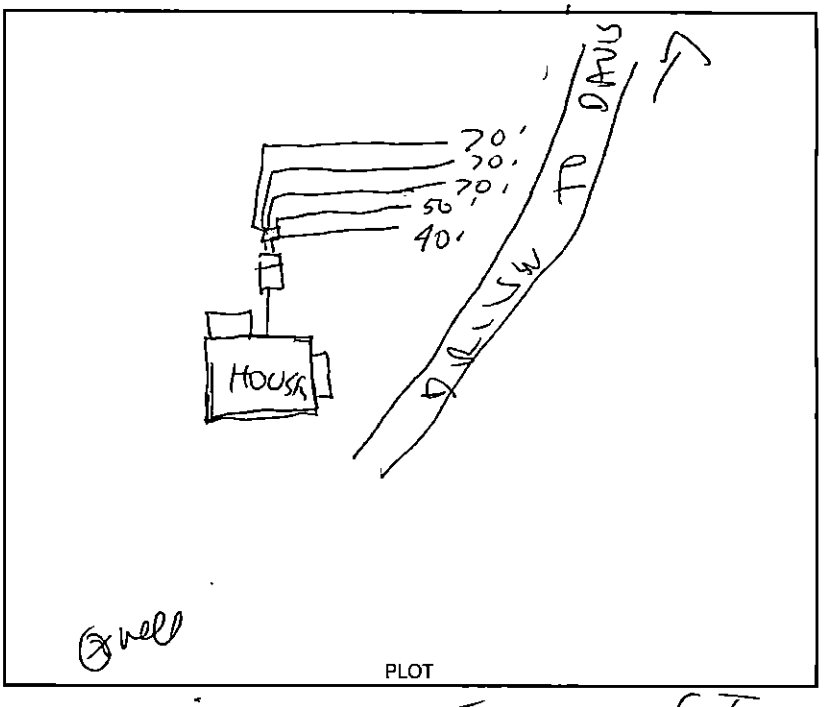
Distance to Water Source 100'+

Excavation Inspected 2-25-98

Tank(s) Inspected 2-25-98

Wash Line Inspected —

High Water Alarm Inspected ✓




Design 1998 1500ST INV CECIC TYPE III CTR# FJ 8RCUIT

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: _____

Kelly Randall
Environmental Health Specialist

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

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

# OPERATION PERMIT for an ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 2200B Permit #: 4682 Tax Parcel #: 003-141-04

Property Owner: BRIAN BUMANN

Job Location Address: 2009 DAVIS ROAD

City: DAVIDSON State: NC Zip Code: 28036

**Operation Permit Issuance Date:** 3/26/12 Contractor Name: FJ ERVIN

Permitted Design Flow: 240 GPD

Liquid Capacity of Septic Tank: 1500 gallons

Liquid Capacity of Dosing Tank: 1000 gallons

Effluent Pump Model: GOULDS 3/4 HORSE

Drainfield Installation ☐ N/A

Trench Depth: 24 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 218 feet

# of Lines: 3 @ 73 feet

Depth of Media: 12 inches (Type) IQ4W

Depth of Cover: 12 inches

Distribution Device: P. MANIFOLD

Bed Installation *(For Repair Installations ONLY.)* ☒ N/A

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Depth of Cover: _____ inches

Distribution Device: _____

Water Supply Source

☐ Municipal ☒ Private Well ☐ Community Well

☐ Other _____

System Installation Setbacks

Distance from Building Foundation: 5' feet

Distance from Property Line: >10' feet

Distance from Water Supply Source: >100' feet

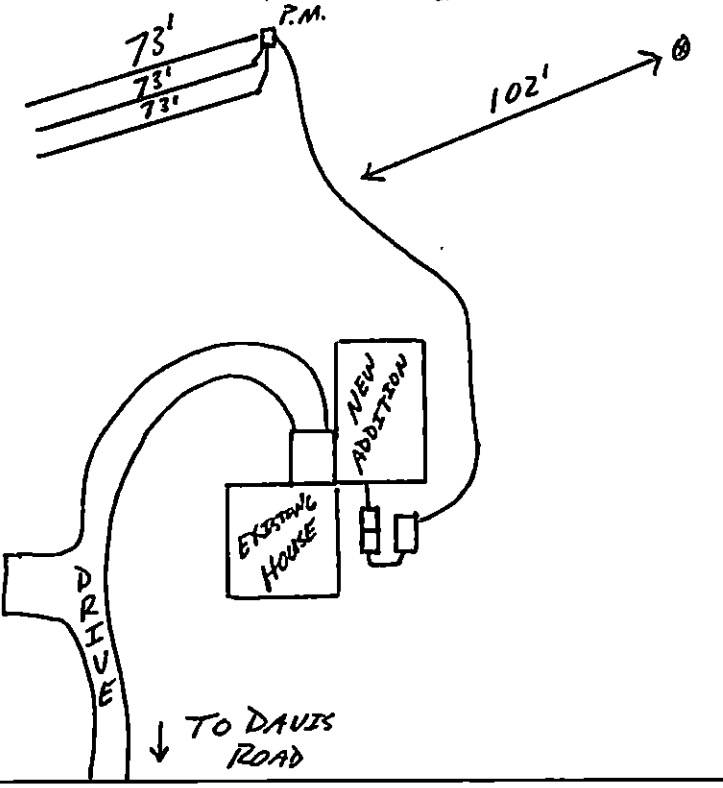
Inspection Dates

Tank(s) Inspected: 5/31/11

Excavation Inspected: 5/31/11

Pump & Controls Inspected: 3/26/12

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)




The undersigned has inspected the Septic Tank System described above, and certifies it has been ☒ installed ☐ altered ☐ repaired ☒ as detailed in the plot above ☐ in accordance with the permit issued 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. The issuance of this 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. 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.

**Notice: Disturbance of the designated repair area may result in the Suspension or Revocation of this permit.**

Comments: System Classification & Type: III6, IQ4W, Pressure, NA, NA

DENR Authorized Agent: Jeremy Michelson, REHS Signature: Jeremy Mich. REHS



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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

**OPERATION PERMIT for an**
**ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM**

File #: 22008 Permit #: 4682 Tax Parcel #: 003-141-04

Property Owner: BRIAN BUMAN

Job Location Address: 2009 DAVIS ROAD

City: DAVIDSON State: NC Zip Code: 28036

**OPERATION PERMIT CONDITIONS:**

I. Performance: System shall perform in accordance with 15A NCAC 18A .1961.

II. Monitoring: System shall be monitored as required by 15A NCAC 18A .1961.

III. Maintenance: Ground absorption sewage treatment and disposal systems shall be checked, and the contents of the septic tank removed, periodically from all compartments, to ensure proper operation of the system. The contents shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.

IV. Operation: System shall be operated in accordance with 15A NCAC 18A .1961.

System Classification: III-6

*Operation Permits for Type V and VI systems expire five (5) years from the date of issuance (in accordance with Table V(a)). The system owner must contact GWS six (6) months prior to expiration for permit renewal.

Subsurface system operator required: Yes ☐ No ☒

☐ This type of system requires the system owner to maintain a contract with a certified operator to perform system inspection, maintenance, and reporting as required in 15A NCAC 18A .1961. and Table V(a). The system owner is responsible for all fees associated with these services.

☐ System does not require inspection by GWS on a routine frequency.

☒ System requires inspection by GWS once every five (5) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every three (3) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every twelve (12) months. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every six (6) months. The system owner is responsible for all fees associated with the inspection.

V. Other:

DENR Authorized Agent: Jeremy Mickelson, REHS Date: 3/26/12

Signature: Jeremy Mick. REHS

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

# INSTALLATION APPROVAL for an ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 220018 Permit #: 4682 Tax Parcel #: 003-141-04

Property Owner: Brian Bumann

Job Location Address: 2009 Davis Road

City: Davidson State: NC Zip Code: 28036

**Installation Approval Issuance Date:** 5/26/11

Permission is hereby given to ☒ install ☐ alter ☐ repair an on-site wastewater treatment & and disposal system, with subsurface soil absorption and effluent discharge, as specified herein at the described location. This approval is granted based upon the application information submitted to our office. All work shall be completed on or before 5/26/11, after which date this approval shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A. 1900 which are in effect on the date of granting this approval. 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 of hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

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

Permitted Design Flow: 240 GPD

Site LTAR: 0.275 GPD/ft² (For new installations only.)

Liquid Capacity of Septic Tank: 1500 gallons

Liquid Capacity of Dosing Tank: 1000 gallons

Drainfield Design ☐ N/A

Trench Depth: 29 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 218 feet

# of Lines: 3 @ 73 feet

Depth of Media: 12 inches (Type) 25% Rd.

Distribution Device: P. Manifold

Bed Design *(For Repair Installations ONLY.)* ☒ N/A

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Distribution Device: _____

Water Supply Source

☐ Municipal ☒ Private Well ☐ Community Well

☐ Other _____

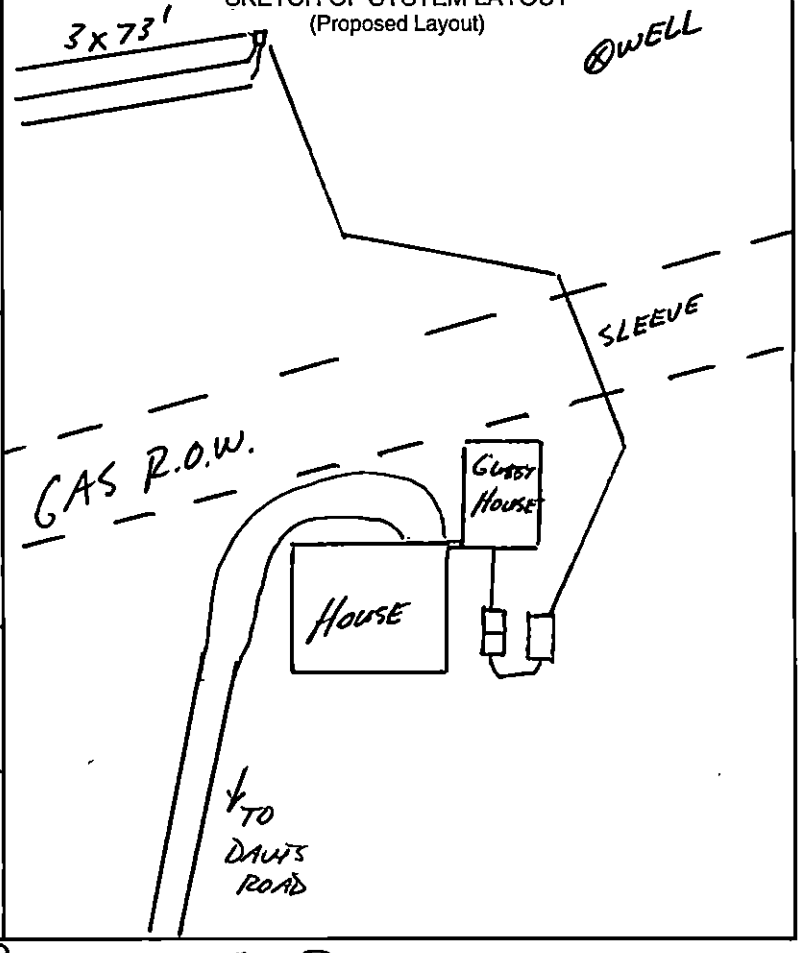
Minimum System Setbacks

Distance from Building Foundation: 75' feet

Distance from Property Line: 710' feet

Distance from Water Supply Source: 7100' feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)




Comments: System Classification & Type: III b Pump to 25% Rd. System

Guest House had to be attached to main residence per Davidson Zoning.

DENR Authorized Agent: Jeremy Michelow, R.S. Signature: Jeremy Mich. R.S.

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section


Property ID: 314104
Lot #:
File #: 2200B
AppID: 4682

# SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Brian & Emily Bumann
Applicant: Brian Bumann
Address: 2009 Davis Road Davidson, NC 28036
Date Evaluated: 7/22/10
Proposed Facility: Residence
Design Flow (.1949) 240 GPD
Property Size:
Location of Site: 2009 Davis Road Davidson, NC 28036
Property Recorded: 10/9/97
Water Supply: [ ] Public [x] Individual [x] Well [ ] Spring [ ] Other
Evaluation Method: [ ] Auger Boring [x] Pit [ ] Cut
Type of Wastewater: [x] Sewage [ ] Industrial Process [ ] Mixed

| PROFILE # | .1940 Landscape Position/ Slope% | Horizon Depth (IN.) | SOIL MORPHOLOGY .1941 .1941 Structure/ Texture | .1941 Consistence Mineralogy | b PROFILE FACTORS .1942 Soil Wetness/ Color | .1943 Soil Depth (IN.) | .1956 Saprō Class | .1944 Restr Horiz | Profile Class & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| 1 | LS | 0-8 | SCL/GR | FR/SS/SP/SEXP | >46" TO SOIL WETNESS | 46" | NA | NA | PS, IV |
| | 5% | 8-35 | C/SBK | FI/S/P/SEXP | | | | | 0.3 GPD/FT2 |
| | | 35-46 | CL/SBK | FR/SS/SP/SEXP | | | | | |
| 2 | LS | 0-8 | CL/GR | FR/SS/SP/SEXP | >46" TO SOIL WETNESS | 46" | NA | NA | PS, IV |
| | 5% | 8-32 | C/SBK | FI/S/P/SEXP | | | | | 0.3 GPD/FT2 |
| | | 32-46 | CL/SBK | FR/SS/SP/SEXP | | | | | |
| 3 | LS | 0-2 | CL/GR | FR/SS/SP/SEXP | >42" TO SOIL WETNESS | 42" | NA | NA | PS, IV |
| | 5% | 2-18 | C/SBK | FI/S/P/SEXP | | | | | 0.275GPD/FT2 |
| | | 18-42 | CL/SBK | FR/SS/SP/SEXP | | | | | |
| 4 | LS | 0-2 | CL/GR | FR/SS/SP/SEXP | >38" TO SOIL WETNESS | 38" | NA | NA | PS, IV |
| | | 2-25 | C/SBK | FI/S/P/SEXP | | | | | 0.275GPD/FT2 |
| | | 25-38 | CL/SBK | FR/SS/SP/SEXP | | | | | |
| | | | | | | | | | |

| Description | Initial System | Repair System |
|---|---|---|
| Available Space (.1945) | PS | PS |
| System Type(s) | III b | IV a |
| Site LTAR | 0.275 | 0.275 |

Other Factors (.1946):
Soil Evaluation By: Jeremy Michelone, R.S.
Others Present: Bill Marlin, LSS, Bryan Bumann
Site Classification (.1948): Provisionably Suitable
Site Evaluation By: Jeremy Michelone, R.S.
Others Present: Bryan Bumann

Jeremy Mich. R.S. 7/23/10

*MECKLENBURG COUNTY*
*LAND USE AND ENVIRONMENTAL SERVICES*
***Payment Receipt***

**Receipt Information**

| | | | |
|---|---|---|---|
| **Date:** | 05/17/11 | **Amount:** | 150.00 |
| **Receipt #:** | 72831 | **Tendered:** | 150.00 |
| **Check / Auth #:** | CHECK 5138 | **Returned:** | 0.00 |
| **Received By:** | CRAIGGY | | |

**Account Information**

| | |
|---|---|
| **Account #:** | 200000 |
| **Contractor:** | BUMAN BRIAN LEE |
| **Attn:** | |
| **Address:** | 2009 DAVIS RD |
| **Address:** | |
| **City/State/Zip:** | DAVIDSON, NC 28036 |

| Item | Description | Permit# | Quantity | Unit Price | Total Price |
|---|---|---|---|---|---|
| 0734 | Auth for Waste Wtr Sys Constr<br>2009 DAVIS RD/FILE 2200B | | 1 | 150.00 | 150.00 |

**Outstanding Balances**

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

Piedmont Natural Gas

# APPLICATION FOR PERMIT TO CROSS RIGHT OF WAY AND FACILITIES OF PIEDMONT NATURAL GAS NCE-2011-09 Parcel Number 1-ME-3; 1B-ME-8A

Brian Bumann hereby requests a PERMIT TO CROSS THE RIGHT OF WAY AND PIPELINE FACILITIES OF PIEDMONT NATURAL GAS ("PNG") with a 2" sewer line. This installation is located at or near 2009 Davis Rd, Davidson, Mecklenburg County, NC Line 1 Pipeline Sta. 168+17; Line 1B Pipeline Sta. 162+93. If said permit is granted, applicant agrees its facilities will be installed pursuant to the following specifications unless specific written waivers are granted by PNG:

NOTE: **Prior to construction, plans must be submitted to PNG, which involve our right of way (easement), as well as, avoiding any conflicts or schedule impacts.**

## PART I. SPECIFICATIONS OF ALL CROSSINGS

1. Applicant, or its agent, will give the following PNG's District Office representatives a two working day notice of the day on which the crossing(s) will be made, in order that arrangements can be made for necessary representatives of PNG to be present. Owner shall insure construction plans reference PNG contact requirement.

   Mark Frodge in our Indian Trail Office at 704-225-0846 (o)

2. To the extent allowed by law Applicant shall investigate and defend PNG, its officers, employees, agents, and representatives from all claims, loss, liability, attorney fees, cost and expense, including death, personal injury, and property damage occurring to Applicant, its Contractor, Subcontractors or PNG, their respective officers, employees, agents, and representatives, or to third parties which arise out of or in connection with, or by reason of, performance of the work herein contemplated or the existence of said installations, thereafter, (excluding those claims which have been caused by the sole or concurrent intentional or negligent acts or omissions of PNG, its contractors(s), agent(s), and/or representative(s)), but which arise out of, or in connection with, or by reason of, performance of the work development herein contemplated or the existence of said installations thereafter; however, nothing herein shall be construed as expanding, creating, imposing, or granting Applicant any authority greater than it already possesses pursuant to applicable law.

3. It is further understood and agreed between Applicant and PNG:

   A. That PNG does not, by consenting to the proposed installation of this underground facility across its pipeline confinement strip and its facilities, assume any responsibility for the protection of Applicant's facilities. Furthermore, all work performed in connection with these installations will be without expense, risk, or liability to PNG or any of its directors, officers, agents, representatives, or employees except as otherwise expressly provided herein.

   B. That PNG reserves the right to maintain and repair the existing pipelines or to construct additional pipelines, without liability for restoring the installation or for the interruption of service in the use of such installations to the extent allowed by law, at such time and in such manner as PNG determines in its reasonable discretion to be necessary for the proper operation of its pipeline system.

   C. That except to the extent made necessary by the construction and maintenance of such permitted crossings and encroachments, and the reasonable use thereof, the exercise of any rights permitted to applicant shall not interfere with or supersede the rights of PNG under its easements.

   D. That the condition of the right of way after construction shall be restored to its original condition.

4. To the extent allowed by law this agreement shall be binding upon the parties hereto and their respective successors in title; however, nothing herein shall be construed as expanding, creating, imposing, or granting any successor in title, successor, or assignee (a "Successor") any authority greater than such Successor already possesses pursuant to applicable law.

5. Execution below by Applicant acknowledges agreement and acceptance of the conditions expressed herein both as to Specifications for all crossings and Specifications for Applicant's particular type crossing and Applicant agrees not to begin any work within the confines of the confinement strip until this permit has been executed by the Parties.

6. That this permit may only be terminated by mutual consent or for Applicant's failure to cure a material breach of the terms of this permit within 30 days (or such additional time as PNG may approve after written notice by PNG to Applicant of the default, including a description of the default.

7. This agreement is based on PNG's representation to Applicant that PNG's easement is exclusive and that the Applicant cannot cross PNG's easement without PNG's agreement as expressed herein. Nothing herein shall be construed to constitute an acceptance of such representation by Applicant or to waive any right which the Applicant may have to dispute such representation. If it should be determined by the final decision of a court of competent jurisdiction that PNG's easement rights

are not exclusive, the investigation and defense obligations of the Applicant and any Successor as are set forth in Paragraph 2 and 4 of this Part I shall have no force or effect.

8. Crossings are to be scheduled during PNG's normal working hours. If Applicant, or its agent, requests crossing to be done outside of PNG's normal working hours, Applicant shall reimburse PNG at overtime rate for all hours required for crossing and travel time.

## PART II. SPECIFICATIONS FOR ROAD CROSSINGS & PARKING AREAS

1. Road(s), street(s), driveway(s), or sidewalk(s) shall cross as nearly as possible at right angles to PNG's line(s). The existing cover will be maintained over the line(s) at all points including side ditches, after construction is completed. If cutting is permitted, a minimum of 48 inches of cover shall remain. Any fill added over PNG's right of way in the future must have specific prior PNG approval, unless otherwise expressly approved by PNG.

2. Only PNG approved brick/concrete pavers for any continuous paved surface shall be used by the developer/owner (excluding road and sidewalk crossings at right angles) within the right of way. Pavers shall not be joined to allow for easy removal and replacement when needed during pipeline emergencies, inspections and/or maintenance.

## PART III. SPECIFICATIONS FOR UTILITY CROSSINGS

1. No excavating machinery will be operated upon PNG's confinement strip until PNG's representative is present at the crossing site, and further, no mechanical excavation will be permitted within five (5) feet of any pipeline absent the express authorization of a PNG on-site representative, which authorization will be given after visual inspection of the pipeline. All utility installations shall be excavated and not bored.

2. The line crossing PNG's line(s) will be laid with a minimum clearance of twenty-four (24) inches. PNG's representative at the crossing will determine if the line crossing PNG's line(s) is to be installed over or under PNG's line; unless this decision has been made by PNG prior to the date of the crossing. The depth of the line crossing PNG's line(s) is to be maintained for the full distance across the pipeline confinement strip, and the crossing is to be made as nearly as possible at right angles to PNG's line(s).

3. No storm drainage structures, fire hydrants, electrical transformers, utility poles, telephone/cable TV boxes, or other aboveground facilities shall be allowed within the easement.

4. Electrical power and telephone cables will be encased for the entire width of PNG's right of way. A non-conducting casing will be used for the encasement unless otherwise approved by PNG.

5. Water lines crossing PNG's line(s) will be PVC unless previously approved by PNG. Such approval will require additional review due to cathodic protection concerns if metallic material is proposed. Issuance of permit may be delayed accordingly.

6. The use of explosives will not be permitted within the pipeline confinement strip and any use of explosives in the general area of the pipeline will be conducted in a manner as to avoid any damage to PNG's pipeline facilities.

7. No parallel encroachment of utilities within the easement is allowed.

## PART IV. SPECIFICATIONS FOR FENCE AND LANDSCAPING INSTALLATION

1. No trees or shrubs are to be planted within our easement. Federal Code applicable to natural gas companies specifies that we must protect our transmission facilities from third party damage.

2. Fencing installed crossing the easement is permitted, however, parallel installation within the easement is prohibited. A minimum of three (3) feet of horizontal and vertical clearance shall be maintained between the pipeline and the edge of the fencing or any fencing appurtenances such as fence posts.

3. In addition, gates must be installed to provide access for PNG vehicles with a minimum opening width of twelve feet. The gate shall be locked with PNG lock so that PNG will always have access to fenced area. In the event of an emergency, PNG reserves the right to remove, knock down, or gain access through fencing, as needed, and PNG will not be held liable for any damages.

## PART V. SUBDIVISIONS / MULTIPLE HOUSING DEVELOPMENTS

1. PNG highly recommends that property lines are not placed parallel with our right of way, as parallel fence installation within the right of way will not be allowed.

2. Multiple common fences are not allowed within pipeline right of way.

APPLICATION FOR PERMIT TO CROSS RIGHT OF WAY
AND FACILITIES OF PIEDMONT NATURAL GAS
NCE-2011-08 Parcel Number 5B-GR-25

3. Developer/Builder/Owner shall be responsible for conveying right of way (easement) restriction information to future homeowner.

PART VI. EXECUTION

1. This agreement shall be binding upon the parties hereto and their respective successors in title.

2. Execution below by Applicant acknowledges agreement and acceptance of the conditions expressed herein both as to Specifications for all crossings and Specifications for Applicant's particular type crossing and Applicant agrees not to begin any work within the confines of the confinement strip until this permit has been executed by all Parties.

| | |
|---|---|
| BRIAN BUMANIY | 2009 DAVIS RD bbumanne bellsouth.net |
| (Applicant's Name) | (Address) E-MAIL |
| " " PROP. OWNER | DAVIDSON NC 28036 |
| (Print Signer's Name and Title) | (City) (State) (Zip) |
| BY: | 3-10-11 704-896-2707 |
| (Signature of Signer) | (Date) (Telephone) |

PART VII. APPROVAL

To the extent of its rights or interest and without warranty, PIEDMONT NATURAL GAS hereby approves this permit for the crossing described in this request for Permit to Cross Right of Way and Facilities of Piedmont Natural Gas.

Signature Date
HERB JEANS
Director – Technical Field Operations

PLEASE RETURN SIGNED DOCUMENT TO:

PAT LYONS
patricia.lyons@piedmontng.com
PIEDMONT NATURAL GAS
1069 Wilkes Rd
Fayetteville, NC 28306
910-321-2957

## Groundwater & Wastewater Services
### Septic Project File & Data Review Worksheet

Pass 3/18/14 per revised 3/17/11

GWS File #: 2200B WASPS App #: 4602

Primary ES assigned to project: OJ

Secondary ES assigned to project:

Project Type: New System ☑ Alteration ☐ Repair ☐ Modified Plot Plan ☐

**I. File Review:**

| Rule or Law | Permit Application | | | |
|---|---|---|---|---|
| .1937(d) | Is the Application complete | Yes ☑ | No ☐ | N/A ☐ |
| .1937(d) | Is there a Site plan/Plat with application | Yes ☑ | No ☐ | N/A ☐ |
| .1937(d) | Is the Facility shown? | Yes ☑ | No ☐ | N/A ☐ |
| .1937(d) | Are appurtenances shown | Yes ☑ | No ☐ | N/A ☐ |
| | **Site Evaluation Information** | | | |
| .1939 (a)(1) | Topography and Landscape Position Recorded? | Yes ☑ | No ☐ | N/A ☐ |
| .1940 (a-g) | Slope % Recorded? | Yes ☑ | No ☐ | N/A ☐ |
| .1939 (a)(2) | Texture Class Recorded? | Yes ☑ | No ☐ | N/A ☐ |
| .1939 (a)(2) | Structure type Recorded? | Yes ☑ | No ☐ | N/A ☐ |
| .1939 (a)(2) | Consistence Recorded? | Yes ☑ | No ☐ | N/A ☐ |
| .1939 (a)(2) | Mineralogy Recorded? | Yes ☑ | No ☐ | N/A ☐ |
| .1939 (a)(3) | Soil Wetness Condition Recorded? | Yes ☐ | No ☐ | N/A ☑ |
| .1939 (a)(4) | Soil Depth to Rock or Parent Material Recorded When Encountered | Yes ☐ | No ☐ | N/A ☑ |
| .1939 (a)(5) | Depth to Restrictive Horizons Recorded When Encountered? | Yes ☐ | No ☐ | N/A ☑ |
| .1939 (a)(6) | Sufficient Available Space Recorded? | Yes ☑ | No ☐ | N/A ☐ |
| .1937(m) | Are the Profile Locations Shown? | | | |
| .1939(a) | Are the S/PS Profiles in system & in repair area? | Yes ☑ | No ☐ | N/A ☐ |
| & .1945(b) | Number of auger borings made: 4 | | | |
| | Were sufficient auger borings made? | Yes ☑ | No ☐ | N/A ☐ |
| .1939(d), .1955, .1956, .1957 | LTAR .275 | Yes ☑ | No ☐ | N/A ☐ |
| | **Improvement Permit/Construction Authorization** | | | |
| .1937(g) 130A-336(a) | Proposed System Type stated-Initial | Yes ☑ | No ☐ | N/A ☐ |
| .1945(b) | Proposed System Type stated-Repair | Yes ☑ | No ☐ | N/A ☐ |
| 130A-336 (a)(3) | System location identifiable by setbacks - Initial | Yes ☑ | No ☐ | N/A ☐ |
| .1937(g) .1945(b) | System components shown – Initial | Yes ☑ | No ☐ | N/A ☐ |
| .1945(b) | Repair area shown | Yes ☑ | No ☐ | N/A ☐ |
| .1937 (f)(g) | Does System design match facility, flow & WWcharacteristics? | Yes ☑ | No ☐ | N/A ☐ |
| .1937 (f)(g) | Is System design consistent with soil/site conditions? | Yes ☑ | No ☐ | N/A ☐ |
| .1937 (f)(g) | Is the System located in the approved area? | Yes ☑ | No ☐ | N/A ☐ |
| 130A-336(a) | Is the Design flow (gpd) indicated? | Yes ☑ | No ☐ | N/A ☐ |

| | | | | |
|---|---|---|---|---|
| 130A-336(a) | Number of Bedrooms, employees, seats, etc. indicated? | Yes ☑ | No ☐ | N/A ☐ |
| .1937(g) | Trench depth indicated? | Yes ☑ | No ☐ | N/A ☐ |
| .1937(g) | Trench width indicated? | Yes ☑ | No ☐ | N/A ☐ |
| .1937(g) | Trench length indicated? | Yes ☑ | No ☐ | N/A ☐ |
| 130A-336(a)(1) | Proposed/existing well shown? | Yes ☑ | No ☐ | N/A ☐ |
| 130A-336(a)(1) | Property line lengths shown? | Yes ☑ | No ☐ | N/A ☐ |
| 130A-336(a) | Facility/appurtenance setbacks shown from fixed points? | Yes ☑ | No ☐ | N/A ☐ |
| | **Operation Permit** | | | |
| .1937(i) | System type as described in table V(a) of rule .1961 | Yes ☑ | No ☐ | N/A ☐ |
| .1937(i) | Conditions for system performance, operation, maintenance, monitoring and reporting. | Yes ☑ | No ☐ | N/A ☐ |

**II. WASPS Review:**

| | | | |
|---|---|---|---|
| Construction authorization issued | Yes ☑ | No ☐ | N/A ☐ |
| Installation approval issued | Yes ☑ | No ☐ | N/A ☐ |
| Operation permit issued | Yes ☑ | No ☐ | N/A ☐ |
| Other related documentation | Yes ☐ | No ☐ | N/A ☐ |

# Items requiring correction/modification: _____

Comments:

_____

_____

_____

_____

_____

IA issued date: 5-26-11

OP issued date: _____

Review performed by: KR JM Date performed: 5-29-10

3-28-2012

*MECKLENBURG COUNTY*
*LAND USE AND ENVIRONMENTAL SERVICES*
***Payment Receipt***

**Receipt Information**

| | | | |
|---|---|---|---|
| **Date:** | 05/17/11 | **Amount:** | 200.00 |
| **Receipt #:** | 72832 | **Tendered:** | 200.00 |
| **Check / Auth #:** | CHECK 5138 | **Returned:** | 0.00 |
| **Received By:** | CRAIGGY | | |

**Account Information**

| | |
|---|---|
| **Account #:** | 200000 |
| **Contractor:** | BUMANN BRIAN L |
| **Attn:** | |
| **Address:** | 2009 DAVIS RD |
| **Address:** | |
| **City/State/Zip:** | DAVIDSON, NC 28036 |

| Item | Description | Permit# | Quantity | Unit Price | Total Price |
|---|---|---|---|---|---|
| 0703 | Installation/Final Approval<br>2009 DAVIS RD/FILE 2200B | | 1 | 200.00 | 200.00 |

**Outstanding Balances**

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

*MECKLENBURG COUNTY*
*LAND USE AND ENVIRONMENTAL SERVICES*
*Payment Receipt*

**Receipt Information**

**Date:** 07/14/10
**Receipt #:** 68525
**Check / Auth #:** CASH
**Received By:** CRAIGGY

**Amount:** 100.00
**Tendered:** 100.00
**Returned:** 0.00

**Account Information**

**Account #:** 200000
**Contractor:** BUMANN BRIAN
**Attn:**
**Address:** 2009 DAVIS ROAD
**Address:**
**City/State/Zip:** DAVIDSON, NC 28036

| Item | Description | Permit# | Quantity | Unit Price | Total Price |
|---|---|---|---|---|---|
| 0702 | Optional Site Evaluations<br>2009 DAVIS RD/FILE 2200B | | 1 | 100.00 | 100.00 |

**Outstanding Balances**

| Month-To-Date | Prior Month | 30 Days | 60 Days | 90 Days | Balance |
|---|---|---|---|---|---|
| | 7.21 | | | | |

# *MECKLENBURG COUNTY*
## *LAND USE AND ENVIRONMENTAL SERVICES*
### *Payment Receipt*

**Receipt Information**

| | | | |
|---|---|---|---|
| **Date:** | 06/17/10 | **Amount:** | 100.00 |
| **Receipt #:** | 68284 | **Tendered:** | 100.00 |
| **Check / Auth #:** | CHECK 4875 | **Returned:** | 0.00 |
| **Received By:** | CRAIGGY | | |

**Account Information**

**Account #:** 200000
**Contractor:** BUMANN BRIAN LEE
**Attn:**
**Address:** 2009 DAVIS ROAD
**Address:**
**City/State/Zip:** DAVIDSON, NC 28036

| Item | Description | Permit# | Quantity | Unit Price | Total Price |
|---|---|---|---|---|---|
| 0705 | MH Exc/Add/Repl w/o System Mod<br>2009 DAVIS RD/FILE 2200B | | 1 | 100.00 | 100.00 |

**Outstanding Balances**

| Month-To-Date | Prior Month | 30 Days | 60 Days | 90 Days | Balance |
|---|---|---|---|---|---|
| [redacted] | | | | | |

# *MECKLENBURG COUNTY*
## *LAND USE AND ENVIRONMENTAL SERVICES*
### *Payment Receipt*

**Receipt Information**

| | | | |
|---|---|---|---|
| **Date:** | 06/25/10 | **Amount:** | 200.00 |
| **Receipt #:** | 68393 | **Tendered:** | 200.00 |
| **Check / Auth #:** | CASH | **Returned:** | 200.00 |
| **Received By:** | MULLIVR | | |

**Account Information**

**Account #:** 200000
**Contractor:** BUMANN BRIAN LEE
**Attn:**
**Address:** 2009 DAVID RD
**Address:**
**City/State/Zip:** DAVIDSON, NC 28036

| Item | Description | Permit# | Quantity | Unit Price | Total Price |
|---|---|---|---|---|---|
| 0706 | MH Exc/Add/Repl w/System Mod<br>PN 00314104 2009 DAVIS RD | | 1 | 200.00 | 200.00 |

apply $50 towards CA

Balance for CA + or will be $350

**Outstanding Balances**

| Month-To-Date | Prior Month | 30 Days | 60 Days | 90 Days | Balance |
|---|---|---|---|---|---|
| 7.21 | | | | | |

22005

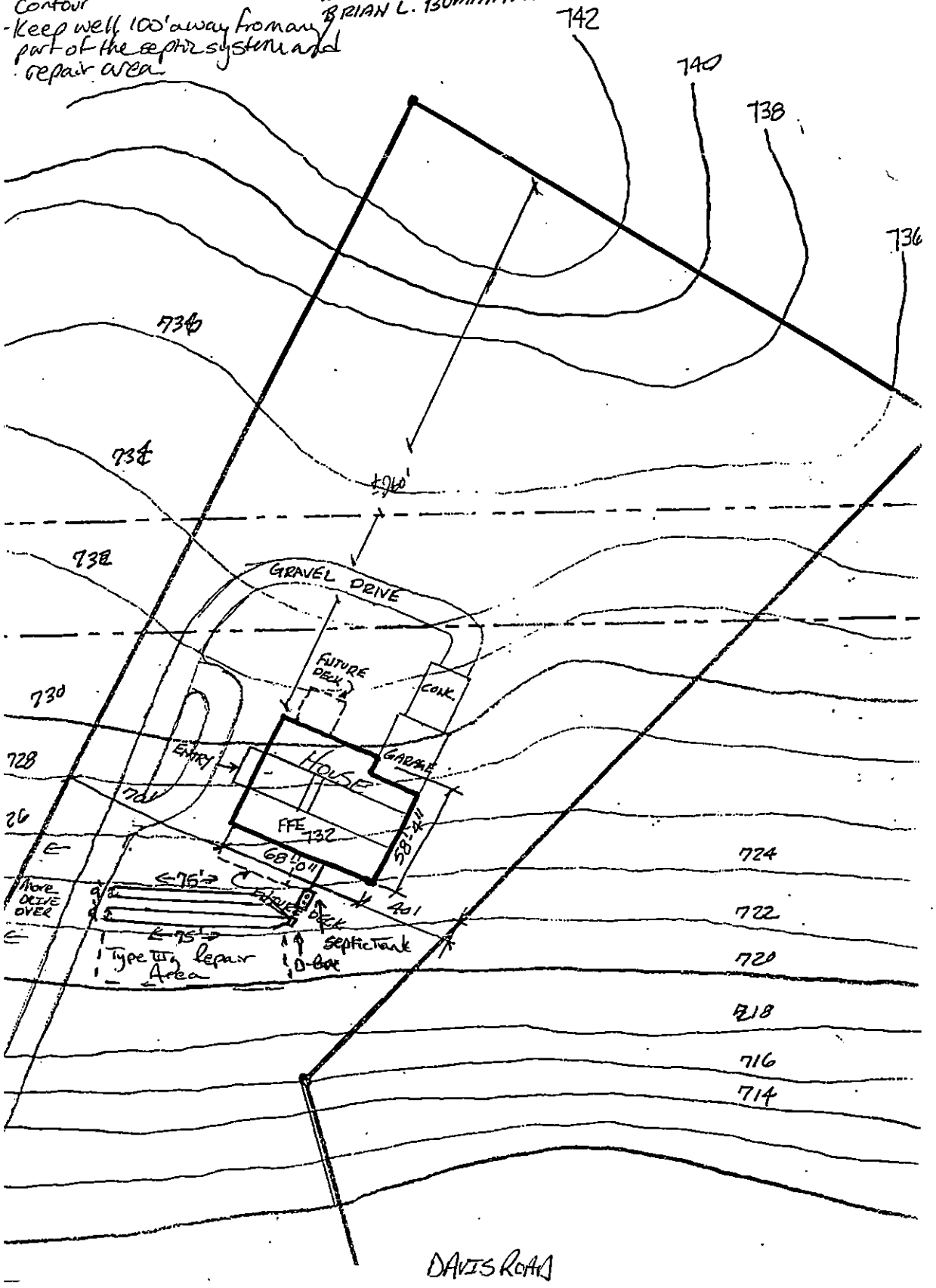
## COMMENTS

1500 gallon septic tank
D-Box
(4) 3'w x 75'L x 36" deep max.
Use innovative system for initial AF owner's request
- repair would be innovative due to space limitations.
Keep drainlines level and on contour
- Keep well 100' away from any part of the septic system and repair area

4.74 AC ADJOINING PARCEL # 003-141-4
ORIGINALLY PART OF 16 AC TRACT

8-15-97
1" = 50'

Brian L. Bumann AIA
BRIAN L. BUMANN AIA

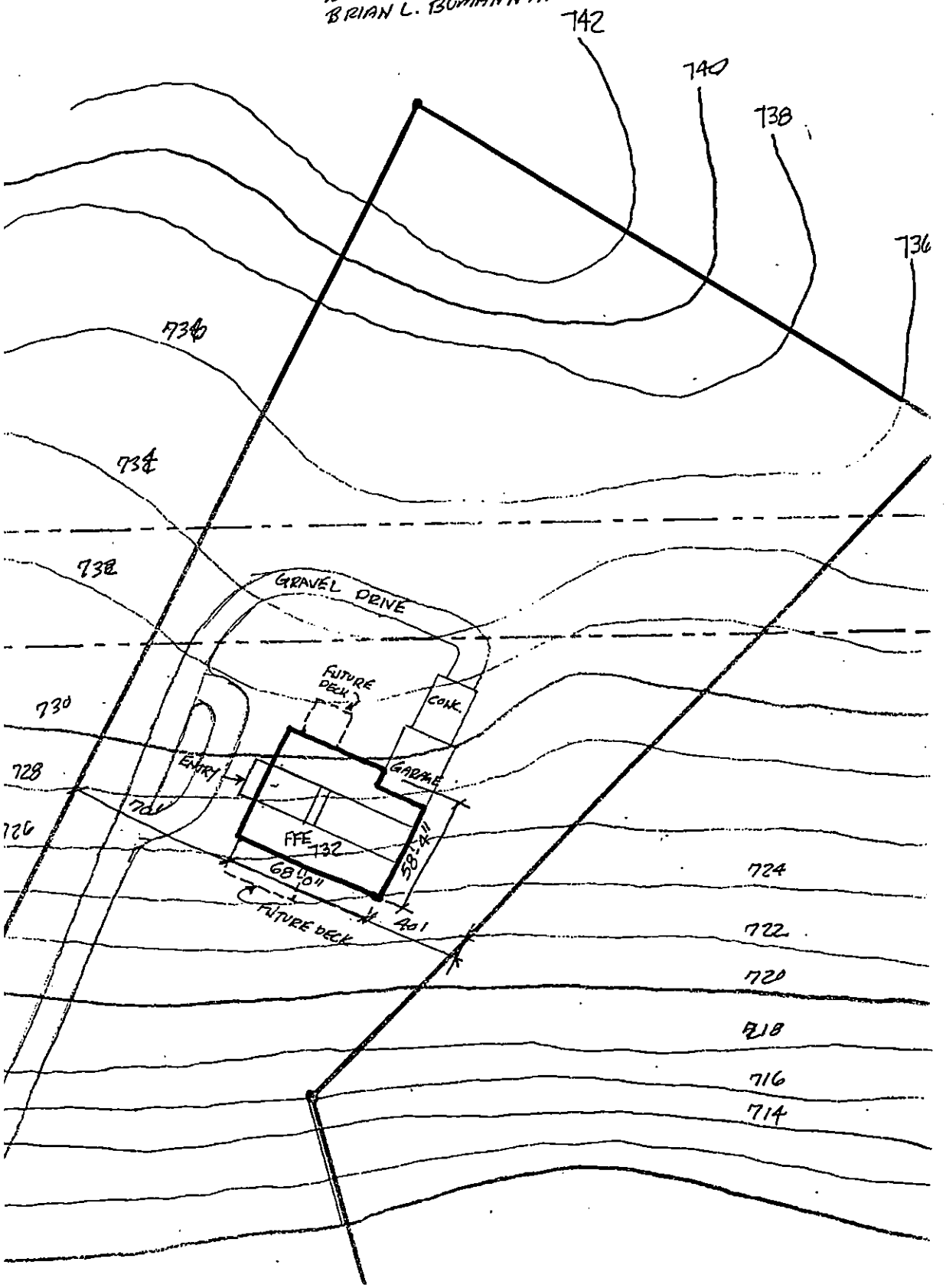


2200B

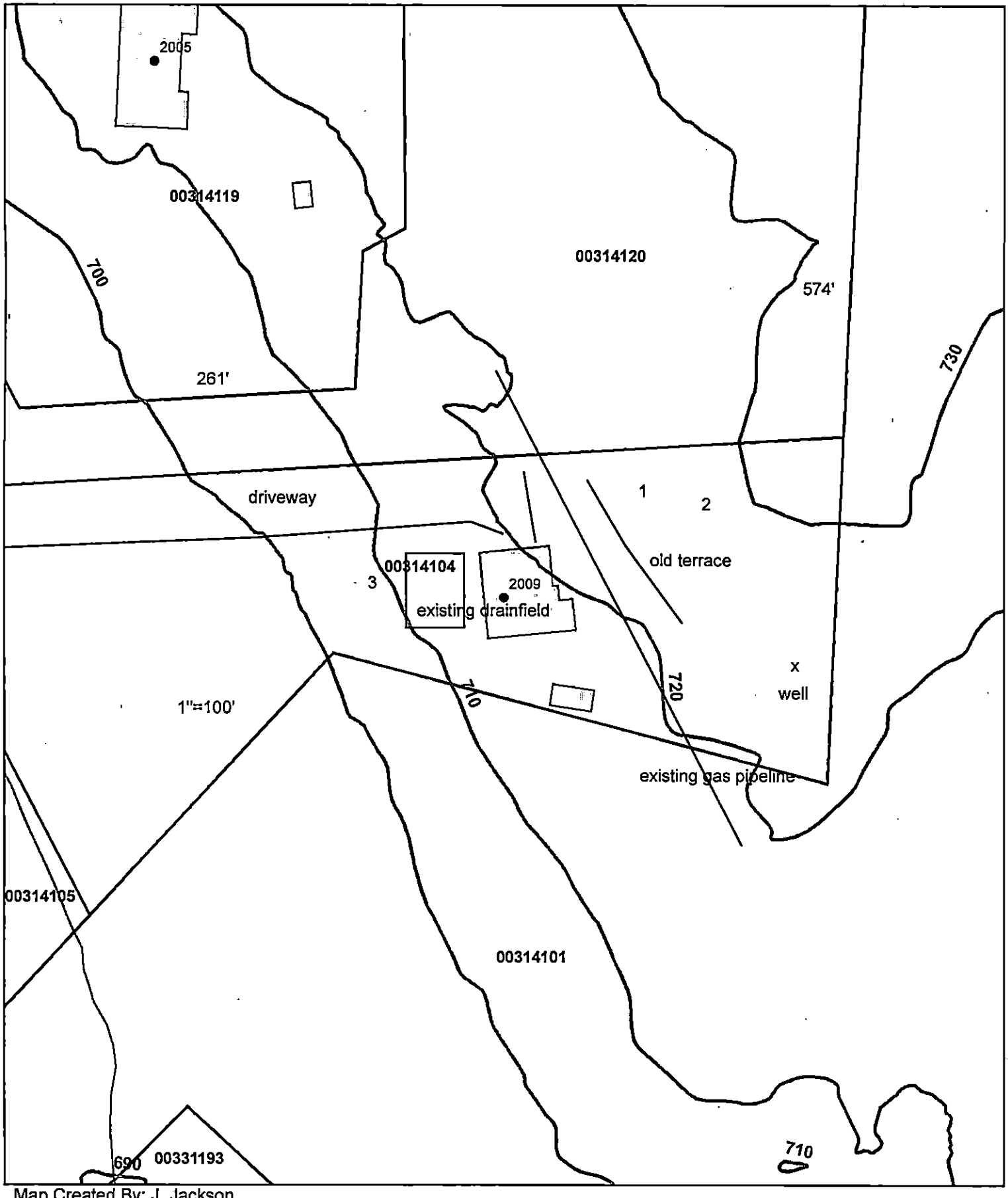
4.74 AC ADJOINING PARCEL # 003-141-4
ORIGINALLY PART OF 16 AC TRACT

8-15-97
1" = 50'

BRIAN L. BUMANN AIA



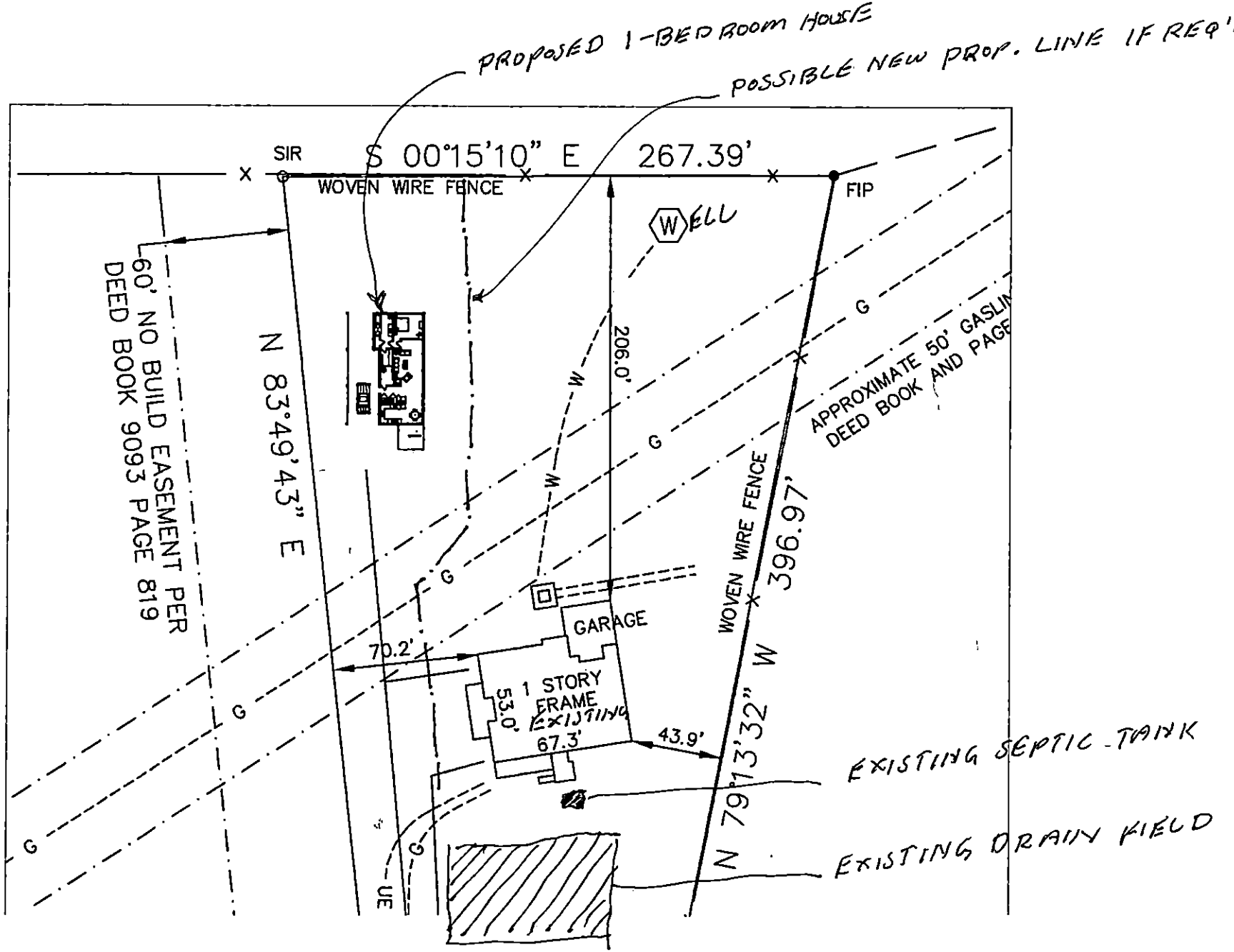
2009 Davis Rd
FILE# 2200B

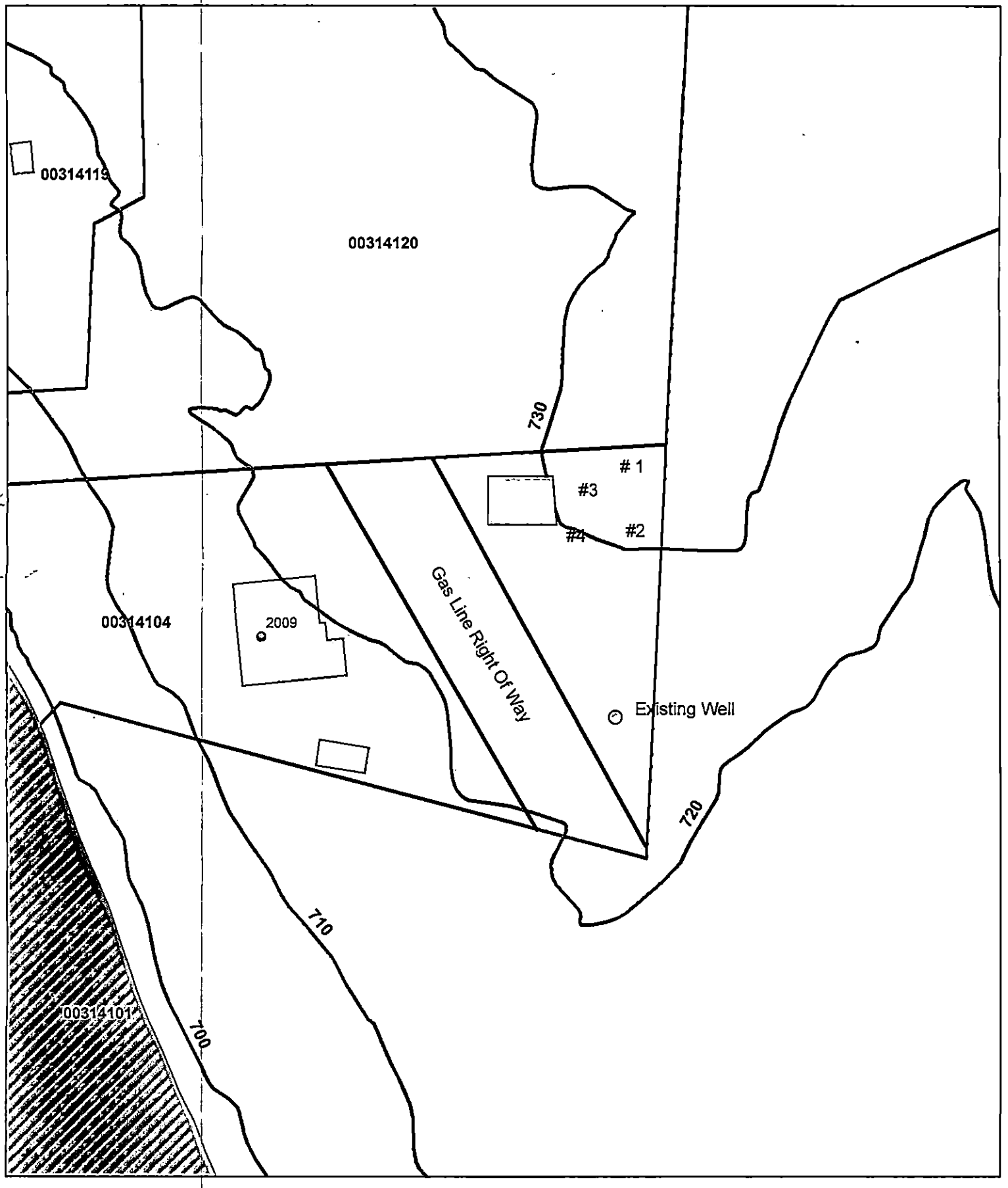



Map Created By: J. Jackson
Map Created On: 6/29/10

0 75 150

File # 2200B


PROPOSED 1-BEDROOM HOUSE
POSSIBLE NEW PROP. LINE IF REQ'D
SIR
S 00°15'10" E 267.39'
WOVEN WIRE FENCE
FIP
WELL
60' NO BUILD EASEMENT PER DEED BOOK 9093 PAGE 819
N 83°49'43" E
206.0'
APPROXIMATE 50' GASLIN
DEED BOOK AND PAGE
WOVEN WIRE FENCE
N 79°13'32" W 396.97'
GARAGE
70.2'
1 STORY FRAME EXISTING
53.0'
67.3'
43.9'
EXISTING SEPTIC TANK
EXISTING DRAIN FIELD
UE
G
W



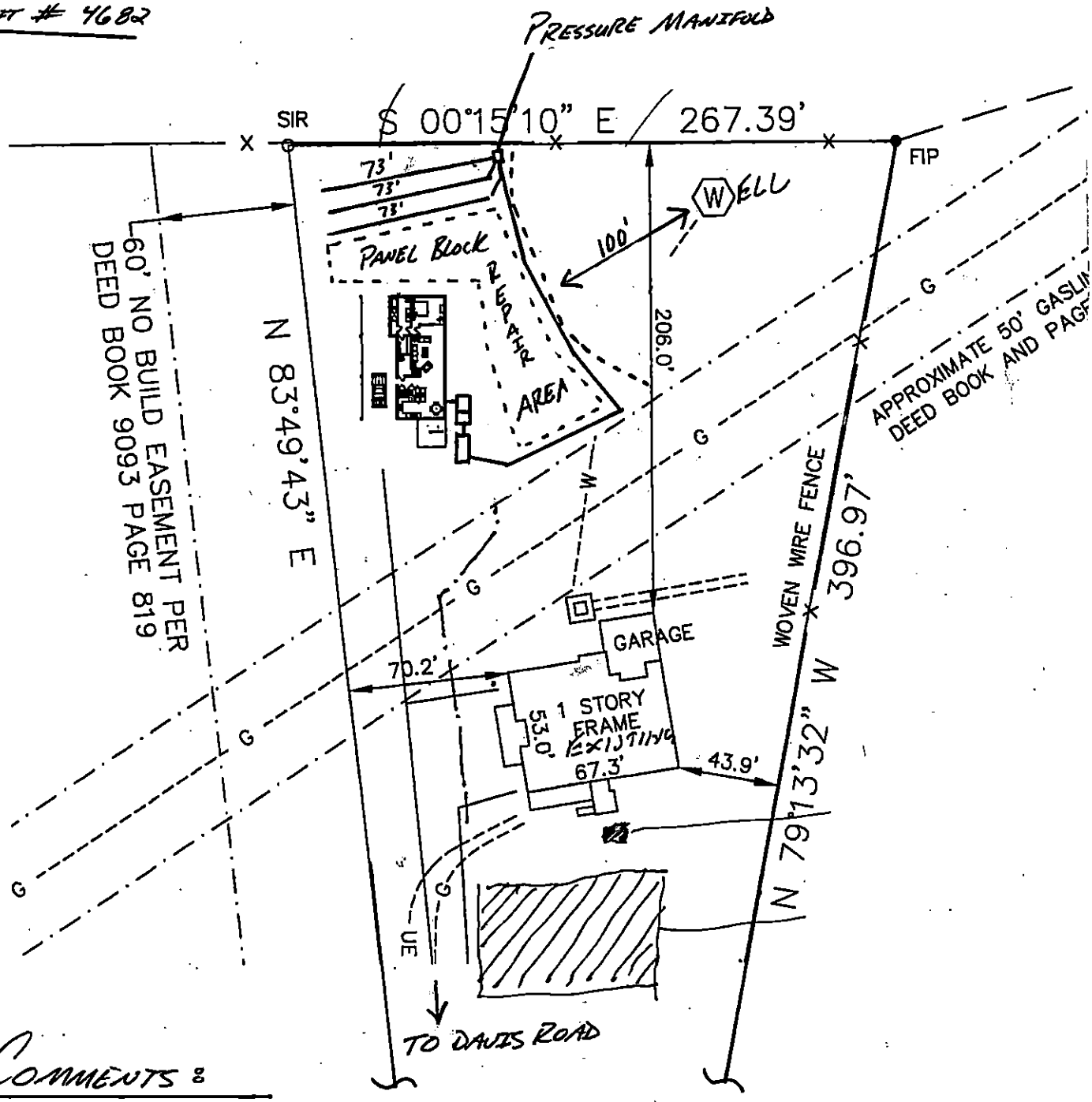

Jeremy Michelone, R.S.
July 23, 2010

0 45 90 180 Feet

FILE # 2200B

PARCEL # 003-141-04

PERMIT # 4682




COMMENTS:

→ System designed for a two bedroom house

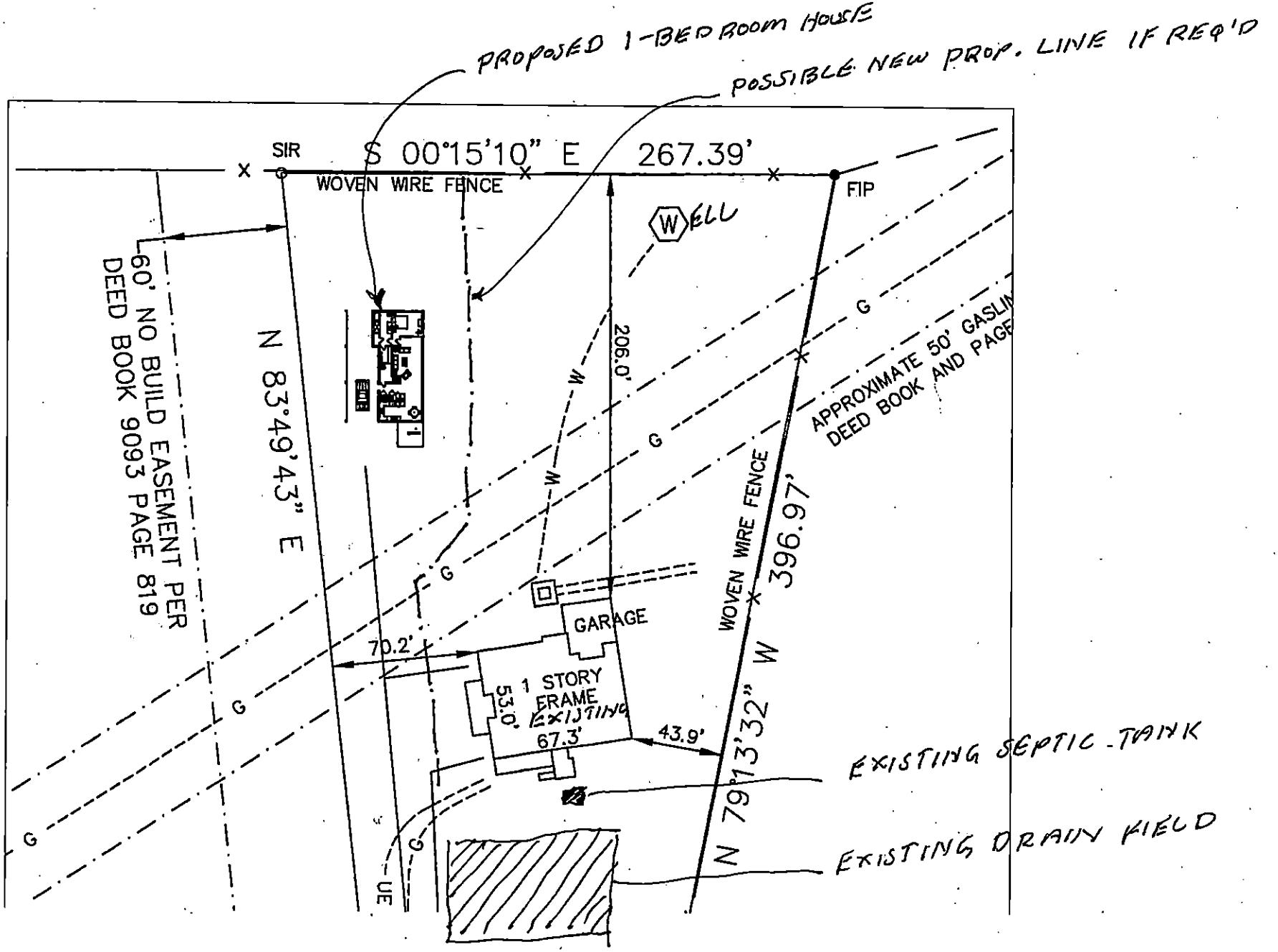
→ 1500 SEPTIC TANK, 1000 Pump Tank

→ 218 TLF (3 lines X 73' X 3') Type III b Pump To 25% Red.

→ Type III a LPP Panel Block Repair

Jerry Mull, R.S. 7/23/10

File # 2200L


PROPOSED 1-BEDROOM HOUSE
POSSIBLE NEW PROP. LINE IF REQ'D
SIR
S 00°15'10" E 267.39'
WOVEN WIRE FENCE
FIP
WELL
60' NO BUILD EASEMENT PER DEED BOOK 9093 PAGE 819
N 83°49'43" E
206.0'
APPROXIMATE 50' GASLI
DEED BOOK AND PAGE
WOVEN WIRE FENCE
N 79°13'32" W 396.97'
GARAGE
70.2'
1 STORY FRAME EXISTING
53.0'
67.3'
43.9'
EXISTING SEPTIC TANK
EXISTING DRAIN FIELD
UE
G
W