3816 PW

MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES

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: 01125105
STREET ADDRESS: 14901 BLACK FARMS RD
CITY: HUNTERSVILLE
STATE: NC ZIP: 28078
SUBDIVISION NAME: N/A
LOT #: LOT SIZE (acres): 493,260 (11.32)
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: 8800 ±
NUMBER OF BEDROOMS: 8
NUMBER OF OCCUPANTS:
FOUNDATION TYPE:

☐ CONCRETE SLAB ☐ BASEMENT WITH PLUMBING
☒ CRAWL SPACE ☐ 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: 4 NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: _____

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: 2 ___ 1 ___ ___

9. DO ANY OF THE FOLLOWING APPLY TO THE PROPERTY IN QUESTION? IF "YES" PLEASE ATTACH SUPPORTING DOCUMENTATION.

BURIED CABLES, LANDFILLS, STUMPHOLES	☐ YES ☒ NO	GRADING/SOIL REMOVAL PERFORMED	☐ YES ☒ NO
EXISTING WASTEWATER (SEPTIC) SYSTEMS	☒ YES ☐ NO	JURISDICTIONAL WETLANDS	☐ YES ☒ NO
WELLS, SPRINGS, OR WATER LINES	☐ YES ☒ NO	APPROVAL REQUIRED BY ANY OTHER PUBLIC AGENCY	☐ YES ☒ NO
EASEMENTS OR RIGHT-OF-WAYS	☐ YES ☒ NO	WASTEWATER OTHER THAN DOMESTIC SEWAGE	☐ YES ☒ NO
CHEMICAL/PETROLEUM STORAGE TANKS	☐ YES ☒ NO	KNOWN UNDERGROUND CONTAMINATION	☐ YES ☒ NO
WASTE STORAGE	☐ YES ☒ NO	GROUNDWATER USE RESTRICTIONS/VARIANCES	☐ YES ☒ NO

10. WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____ ☒ UNKNOWN

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

12. PROPERTY OWNER:

NAME: DEAN & SHELLEY BELK
ADDRESS: 14901 BLACK FARMS RD
CITY: HUNTERSVILLE NC
STATE: NC ZIP: 28078
HOME PHONE: 704 896-7900
WORK PHONE:
MOBILE PHONE: 704 618-0313
FAX:

13. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:

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

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

Revised on: 7/1/08

14. SEPTIC SYSTEM PERMIT APPLICATION:

If the information in this application is falsified, changed, or the site is altered, then the Improvement Permit and Authorization to Construct shall become invalid. I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed. The permit is valid for either sixty (60) months or is non-expiring,depending upon the documentation submitted: complete site plan = 60 months, complete plat = non-expiring.

PB (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.

Dean Robb
Property Owner's or Owner's Legal Representative Signature

8/21/08
Date

OFFICE USE ONLY

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

SEPTIC APPLICATION FEES RECEIVED: $ 360.00 DATE FEE RECEIVED: 8-21-08

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

APPLICATION PROCESSED BY: Annette G

GWS FILE NUMBER ASSIGNED: 912B

APPLICATION ID NUMBER ASSIGNED: 3876

COMMENTS:

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

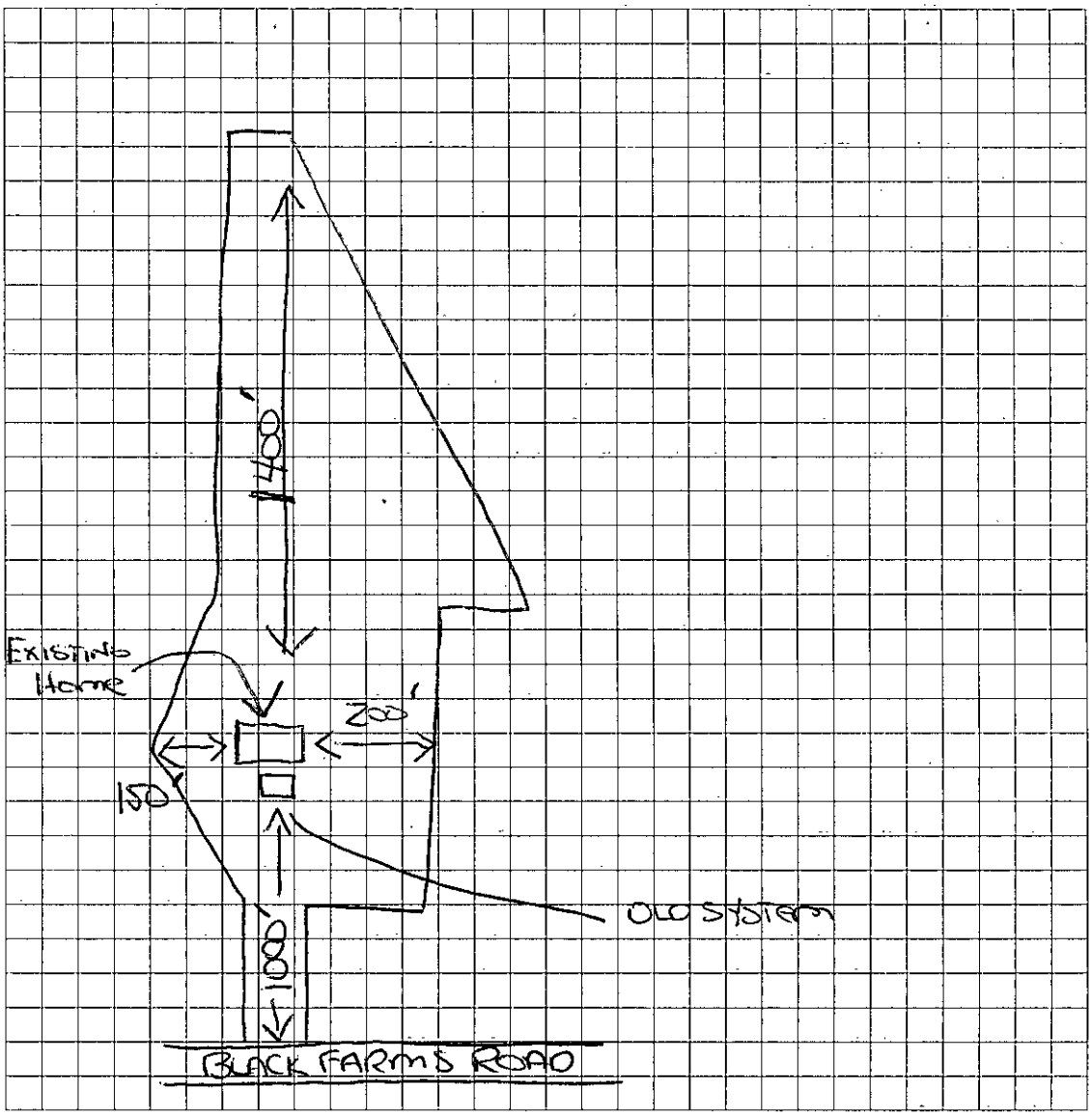
Revised on: 7/1/08

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 #_____
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	Dean Bell
Date	8/21/08

LBC 12/15/04

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

Sheet: 1 of 2
Property ID: 011-251-05
Lot #:
File #: 912B
AppID: 3816

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Dean & Shelly Belk
Applicant:
Address: 14901 Black Farms Road, Huntersville, N. C. 28078
Date Evaluated: 9/18/08
Proposed Facility: Residence Design Flow (.1949) 480gpd- add 4 BR
Property Size: 13a
Location of Site: 14901 Black Farms Road
Property Recorded:
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 Structure/ Texture	SOIL MORPHOLOGY 1941 Consistence Mineralogy	b PROFILE FACTORS 1942 Soil Wetness/ Color	1943 Soil Depth (IN.)	1956 Sapro Class	1944 Restr Horiz	Profile Class & LTAR
1	LS, 6	0-7	GR/SCL	FR/SEXP/SS/SP	>59" TO SOIL WETNESS	39	PS	NONE	PS, IV .3GPD/FT^2
		7-34	SBK/C	FI/SEXP/S/P					
		34-39	SBK/SCL	FR/SEXP/SS/SP					
		39-63	M/SL	FR/SEXP/NS/NP					
2	LS, 10	0-10	GR/SCL	FR/SEXP/SS/SP	>63" TO SOIL WETNESS	30	"	"	"
		10-30	SBK/C	FI/SEXP/S/P					
		30-63	M/SL	FR/SEXP/NS/NP					
3	"	0-11	GR/SCL	FR/SEXP/SS/SP	>55" TO SOIL WETNESS	55	N/A	"	"
		11-55	SBK/SC	FI/SEXP/S/P					
4	"	0-9	GR/CL	FR/SEXP/SS/SP	>52" TO SOIL WETNESS	53	"	"	"
		9-27	SBK/C	FI/SEXP/S/P					
		27-52	SBK/SC	"					
					SITE LTAR .3GPD/FT^2				

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	IIIb	IIIe
Site LTAR	0.3	0.3

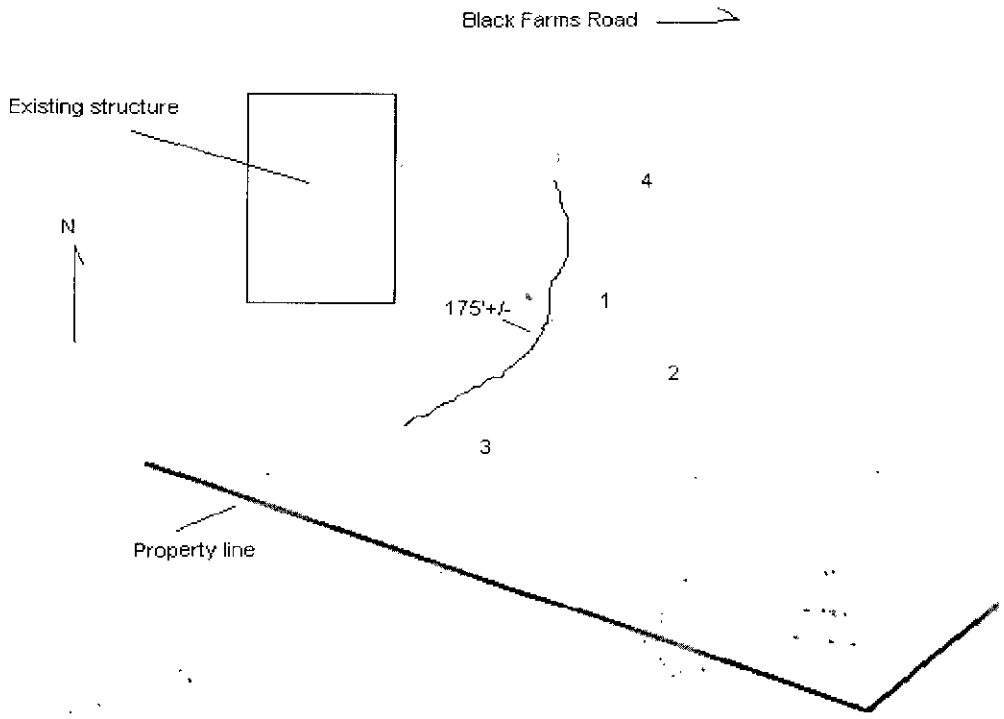
Other Factors (.1946):
Soil Evaluation By: W. R. Marlin, LSS, 9/22/2008, W. R. Marlin
Others Present: P. Walker, A. Rollans
Site Classification (.1948): PS
Site Evaluation By: Phil Walker 9/18/08
Others Present: Ashley Rollins, Bill Marlin
Dean Belk

COMMENTS:
100% repair

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	

Sketch of Soil Evaluation Locations



File # 912B
App ID 3816

ROLLANS *Soil & Environmental Services, Inc.*
470 N Broad Street, Suite D, Mooresville, NC 28115 Phone: (704) 658-1723 Fax: (704) 658-1724

Ashley Rollans, NC Licensed Soil Scientist
Mobile: (704) 746-5046
Email: rollans.ashley@yahoo.com

Brady Freeman, Registered Sanitarian
Mobile: (704) 746-6497
Email: bfree209@yahoo.com

Attached is a proposed design for an Accepted (25% reduction) Septic System with pump to Drop box distribution for an 8 bedroom single family residence for Dean & Shelly Belk, Black Farms Road, Mecklenburg County, North Carolina.

Contents: **Page**

Information for the Installer---------- 1

Design Information
Design Specifications---------- 2-3
Layout Specifications---------- 4

Site Plan/System Plan---------- 5

Calculations---------- 6

Profile Descriptions---------- 7

October 10, 2008
Project #: 01-1336
Design By: Rollans Soil and Environmental Services

INFORMATION FOR THE INSTALLER:

- The permit should be read very carefully prior to bidding. The following are details that must be considered along with all other considerations.
- Tanks shall be approved by NC DENR, and certification supplied by the manufacturer.
- Tanks shall be water tested prior to installation.
- The installer shall be responsible to the owner for placement of the tanks and to insure that final grades are returned to the original natural grade, with exception of added structural features.
- The supply trench shall be compacted to eliminate cavities left during initial fill placement.
- Installation of the system shall be during dry conditions in order to protect the soil structure.
- All fittings shall be pressure rated fittings.
- All joints shall be cleaned with PVC pipe cleaner and a heavy bodied glue applied to weld all joints.
- Where required by the county health department, post installation inspections by the designer must be scheduled 5 week days in advance.
- Trenches shall be carefully excavated so the bottom is within 2" from the highest to the lowest points of elevation within the trench. If the bottom elevation needs adjusting after it has been trenched, it will be done by removing high points rather than filling low points. It is extremely important to insure that trenches are not over excavated during initial trenching. All fine grading within the trench will be hand done with a shovel. No loose material will be left in the trench
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- All tanks shall be properly back filled and compacted to prevent slump at a later date.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral.
- No heavy equipment shall be used on the field during or after installation. The use of a small loader (i.e. Bobcat) or a trencher (i.e. Ditch Witch 2300/2310) may be used for installation.
- Elevations at pinflag locations should be checked by the installer prior to beginning trenches
- Pumptank riser should be 6" above grade, control panel should be 12" above grade.
- Septic tank riser shall be a minimum of 6" above finished grade.
- Design precludes use of foundation drains on the residence.
- System is specified as an accepted 25% reduction system with drop box distribution.
- Repair area has available space but system type is undesignated.
- Rake trench walls, line sidewalls, install trenches 36" wide and have no more than 1/4" fall in 10 feet.
- Install 4" sch 40 pvc for the last 10 feet of supply line prior to D-box to reduce flow.

Gravity 25% Reduction
FOR WASTEWATER TREATMENT

Owner:	Shelly Belk
Address:	14901 Black Farms Road Huntersville, NC 28078
Phone:	704-896-7900
County:	Mecklenburg
Location:	BLACK FARMS ROAD
Source of Wastewater Flow:	8 Bedroom Single Family Residence
Estimated Gallons Per Day Flow:	960
System Flow:	NA

Design Specifications

Drainfield Size:	800
Loading Rate (gpd/ft.^{2}):	0.30
Depth of Gravel in Trench:	NA (25% reduction)
Gravel Size:	NA (25% reduction)
Trench Depth:	36 in.
Trench Width:	36 in.
Septic Tank Size:	2000
Pump Tank Size:	2000
Estimated Supply Line Length:	109
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	18.97
Dosing Volume:	365.68
Supply Manifold:	DROP-BOX
Supply Manifold Length:	NA
Supply Manifold Volume:	N/A
Recommended Float Controls:	NA
Recommended Control Panel:	NA
Pressure Head:	NA
Friction Head:	NA
Elevation Head:	NA
Total Dynamic Head:	NA
Threaded Union:	NA
Gate Valves:	NA
	NA
Check Valves:	NA
Anti-Siphon Hole:	NA
Additional Comments:	Soil suitability was performed by Rollans Soil & Environmental Services.

BLACK FARMS ROAD
GRAVITY DISTRIBUTION

DESIGN FLOW (gpd):	960
SOIL APPLICATION RATE (gpd/ft.^{2}):	0.3
TOTAL AREA TRENCH BOTTOM:	2400
TOTAL LATERAL LENGTH:	800
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	800
SUPPLY LINE LENGTH:	109
TOTAL DYNAMIC HEAD:	NA
MANIFOLD SIZE:	NA
DOSING VOLUME:	365.68
PUMP TANK DRAW DOWN*:	9.4
SEPTIC TANK SIZE:	2000
PUMP TANK SIZE:	2000

BLACK FARMS ROAD

Project #: 01-1336

LAYOUT FOR 8 BEDROOM HOME

October 10, 2008

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM		NA			NA		
INSTR. #			NA				
HOUSE CRN				NA	NA		
P. TANK				NA	NA		
1	PINK			NA	NA	25	25
2	*RED*			*NA*	*NA*	*68*	*64*
3	*ORANGE*			*NA*	*NA*	*164*	*120*
4	*BLUE*			*NA*	*NA*	*112*	*108*
5	*PINK*			*NA*	*NA*	*114*	*110*
6	*RED*			*NA*	*NA*	*112*	*108*
7	*ORANGE*			*NA*	*NA*	*104*	*100*
8	*BLUE*			*NA*	*NA*	*100*	*90*
9	*PINK*			*NA*	*NA*	*104*	*100*
					Total	903	825

	LINE LENGTH	LTAR GPD/FT²	SYSTEM TYPE	SOIL LTAR GPD/FT²	TRENCH SYSTEM	DISTRIBUTION
** System*	*800*	*0.30*	*ACCEPT.*	*0.30*	*25% RED.*	PUMP TO DROP BOXES
Repair	4 @ 100'	0.30	*CONV.*	0.30	GRAVEL	GRAVITY
	4@50'	0.30	PPBPS	0.30	PPBPS	PPBPS

Notes:

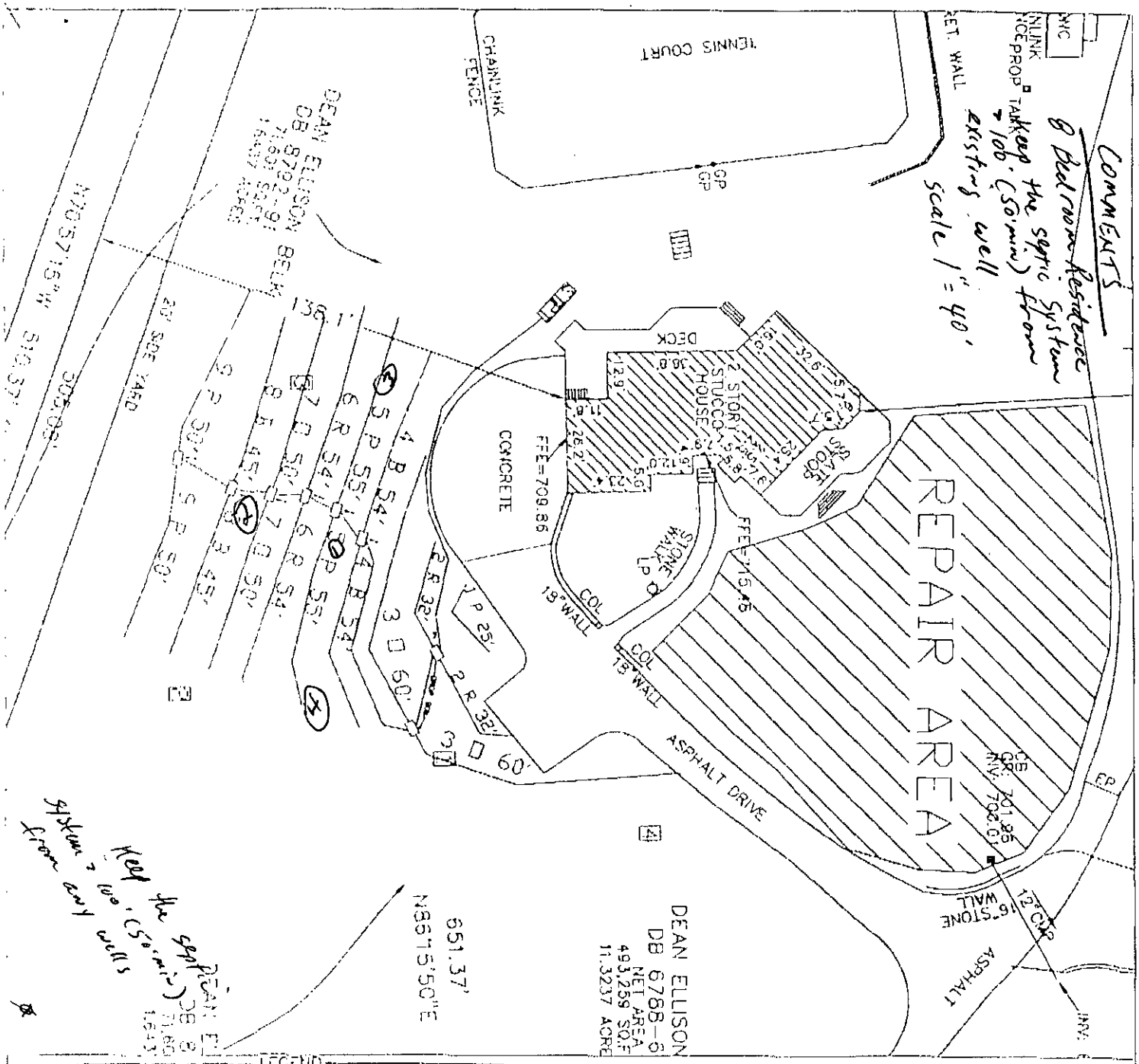
** TBM Is Not Required.

**All measures in feet

**Nitrification lines are demonstrated on contour via colored pin flags

**BS, HI, and FS indicate rod readings

**Repair area has existing septic lines plus additional square footage.



LEGEND

House Box.

System lines.

Repair lines.

GRAPHIC SCALE
1" = 40'
40 0 40 80

FOR PRELIMINARY PLANNING PURPOSES ONLY. ALL LOTS WILL REQUIRE FINAL APPROVAL BY THE COUNTY HEALTH DEPARTMENT ON A LOT BY LOT BASIS. THIS MAP SHOULD BE USED AS A GENERAL GUIDE. SOME ADJUSTMENTS WILL BE NECESSARY IN THE FIELD DUE TO SOIL VARIABILITY AND COMPLEX TOPOGRAPHIC FEATURES. THIS MAP ONLY REFLECTS EXISTING SOIL SUITABILITY FOR ON-SITE SEPTIC TANK SYSTEMS.

PLEASE REFER TO ATTACHED SOIL REPORT FOR ADDITIONAL SITE SPECIFIC INFORMATION

ROLLANS SOIL & ENVIRONMENTAL SERVICES

MAP TITLE: SITE PLAN — DRAINFIELD AREAS

PROJECT NAME: SHELLY BELK

LOCATION/DATE: BLACK FARM ROAD, IREDELL COUNTY, NORTH CAROLINA, OCTOBER 2008

JOB #: 01-1330
FILE: C:\ums\01-1330
PROJECT MGR.: S.A.R.
FIELD WORK: S.A.R. & A.B.F.
DRAWN BY: S.A.R. & A.B.F.

CALCULATIONS

Location BLACK FARMS ROAD

Project Number 01-1336

Lot No:

No. of Bedrooms	8	
Design Flow	960	$^{gal}/_{day}$
LTAR	0.30	$^{gal}/_{ft^2\ day}$
25% RED.? (YES OR NO)	YES	
Supply Line Length	109	ft.
Supply Line Volume	18.966	gal.
Required Feet of Line	800	ft.
Amount of Line from Layout	800	ft.
Gallons per Minute	36.6 - 73.1	$^{gal}/_{min}$
Required Septic Tank Capacity	2000	gal.
Minimum Standard Tank Size	2000	
Lateral Line Volume	522.4	gal.
Dosing Volume	365.68	gal.

Note: Dosing Volume based on70% of lateral line volume

Tank Draw Down	9.4	*Generic Draw Down of 39 gal.per in.*
Pump Run Time	~5-10	minutes
Elevation Head	NA	ft.
Pressure Head	NA	ft.
Friction Factor	NA	ft./100 ft. *(From the interpolater.)*
Friction Head	NA	ft.
Total Dynamic Head (+15%)	NA	ft.

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

GPM	f
20	0.84
	-0.88
25	1.27
	-1.28
30	1.78
	-1.76
35	2.37
	-2.25
40	3.03
43.07	3.48
45	3.77
48.14	4.28
50	4.58
57.11	5.89
60	6.42

CONDITIONS OF IMPROVEMENT PERMIT for an ALTERATION TO AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit Number: **912B** Tax Number: **01125105**

- 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

Primary Wastewater System

Type: ☐ I ☐ II ☒ III ☐ IV ☐ V ☐ VI

☐ Conventional
☐ Prefabricated, permeable block panel system
☐ Shallow Placed Conventional
☐ Low Pressure Pipe
☐ Large Diameter Pipe
☐ Fill
☒ Other ACCEPTED
☐ Innovative or Experimental:

0.3 Long-term acceptance rate (GPD/ft^2)	**960** Max gallons/day wastewater flow	**2400** Absorption Area (ft^2)	**9** Trench spacing (min. on centers) (ft)
Serviced by private well: ☒ Yes ☐ No	**2000** Gallon septic tank	**800** Total trench length (ft)	**30** Maximum trench depth (in) (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions.)
8 Bedrooms in residence	**2000** Gallon pump tank	**12** Depth of media (in)	

Any surface water present: **NO** Type: Minimum separation distance (ft):

Additional conditions: **REPAIR AREA 400 FT EXISTING GRAVEL SYSTEM PLUS 200 FT PPBPS**

Repair Area System

Type: ☐ I ☐ II ☐ III ☒ IV ☐ V ☐ VI

☐ Conventional
☒ Prefabricated, permeable block panel system
☐ Shallow Placed Conventional
☐ Low Pressure Pipe
☐ Large Diameter Pipe
☐ Fill
☐ Other
☐ Innovative or Experimental:

2400 Absorption Area (ft^2) **800** Total trench length (ft)	**NA** Depth of media (in)	**9** Trench spacing (min. on centers) (ft)	**30** Maximum trench depth (in)

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. The approval is granted in accordance with the provisions of Laws and Rules For Sewage Treatment, and Disposal Systems 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 Approval is granted by this Department.

*** This Improvement permit is transferable.

Phyllis L. Walkins 10/22/08
DENR Authorized Agent Date

Dean Bell 10/31/08
Owner/Agent Signature Date

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

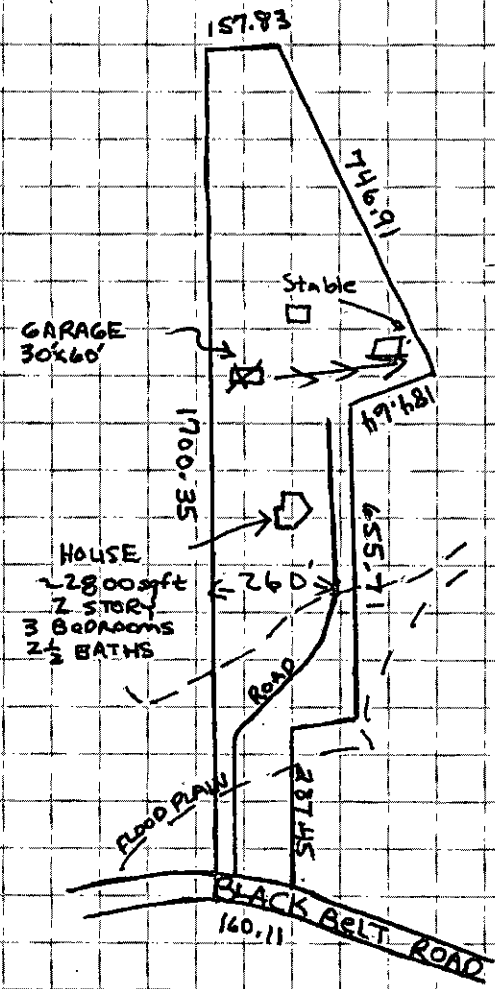
PROPOSED PLOT PLAN

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

FILE: 912B/8783A ~~7661A~~

TC: 011-061-01

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.



VOID

* Garage to be relocated with Plumbing. (Bathrm.)

TAX MAP
011-061-01
11.368 AC

Signed: Dean E. Bell

Date: 5/2/92

PROPOSED PLOT PLAN

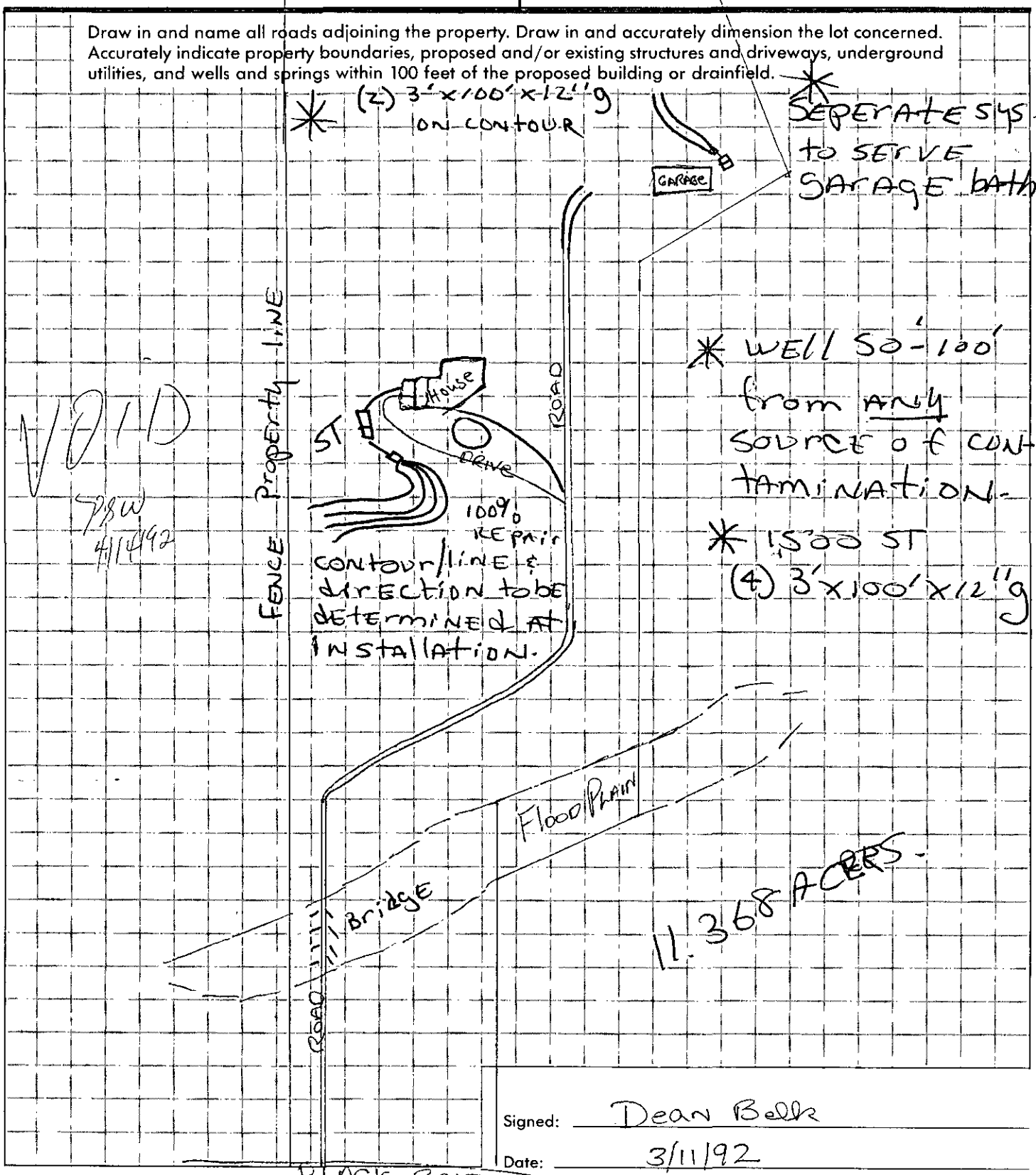
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

912B/8783A

FILE: ~~7661-A~~

TC: 011 06101

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.



Signed: Dean Belk

Date: 3/11/92

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

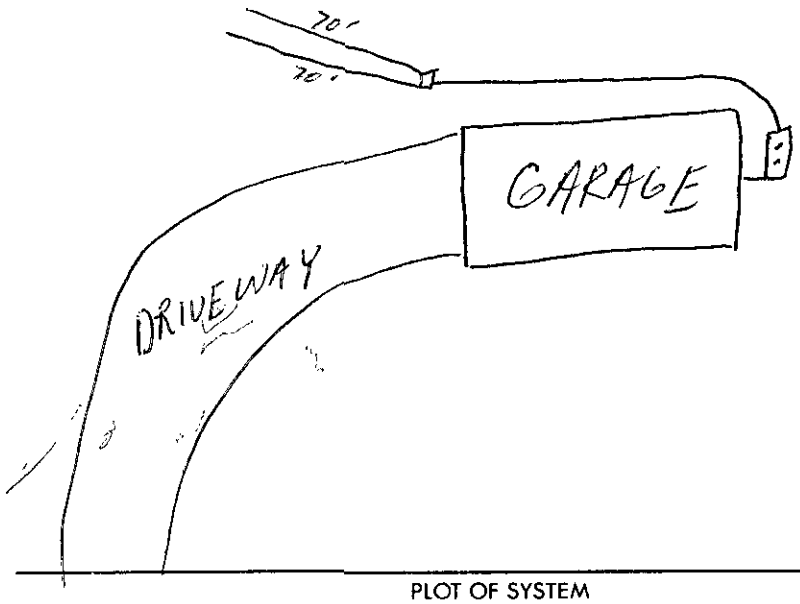
9128/8783A

FILE: ~~7661-A~~ DATE: 6/5/92

TC: 011-061-01+02 ☐ L

SERIAL Nº 15271

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 2/92. All work shall be completed on or before 7/5/92, 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 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 1000 gallons

Liquid Capacity of Dosing Tank – gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 140 feet

Number of Lines 2 (70')

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 5 feet

Distance from Well >50 feet

NAME OF OWNER Dean & Shelley Belk

LOCATION OF PROPERTY 14901 Black Belk Rd

Comments: 1000 ST, 2 lines x 70' long x 3' x 12" stone
Keep lines on contor of land

Division or Section Head

Philo S. Walker R.S.
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 Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER OR AGENT'S COPY

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

Garage Only

FILE: 912B/8783A DATE: 6/29/92

TC: 011-061-01 ☐ L ☑ CRT

SERIAL № 14156

Name of Owner Dean & Shelley Belk Juris.:

Address of Property 14901 Black Belt Rd

Inspection Data:

Tank Material PCC 12006

Total Length of Drainfield 140

Number of Lines 2 @ 70

Cover Depth 8"

Water Supply Source well

Distance to Water Source 750

Excavation Inspected 6/29/92

Tank(s) Inspected 6/29/92

Wash Line Inspected NA

High Water Alarm Inspected NA

PLOT

Design: 1992, 1500ST, CON, 420 SFT, 12" stone Ceci l CTR# Ollie Cornelius

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: System designed for garage. (Bath)

ST 2

Philo S. Walker R.S.
Environmentalist

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

400 ✓

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

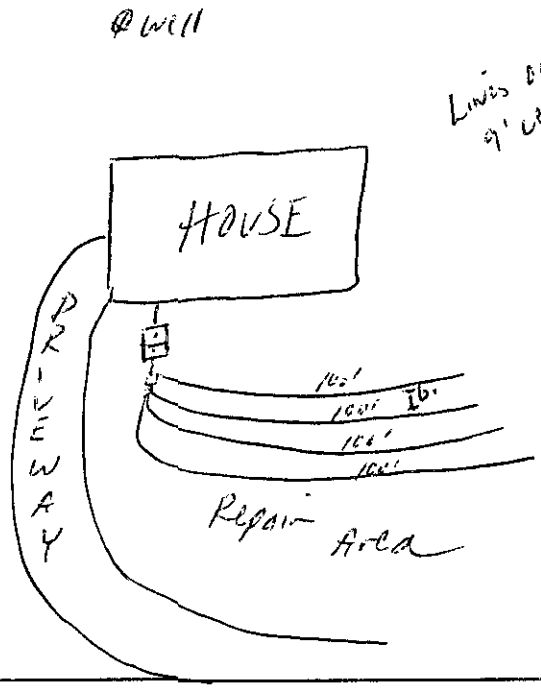
912B/8783A

FILE: ~~704-FR~~ DATE: 3/15/93

TC: 011 061 01~~5~~ ☐ L

SERIAL Nº 15334

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 3/9/2. All work shall be completed on or before 4/15/93 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 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 PCC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 400' feet

Number of Lines 4 (100')

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well > 50 feet

NAME OF OWNER Dean & Shelly Belk

LOCATION OF PROPERTY 14901 Black Belt Rd

Comments: 4 lines x 100' long x 3' wide x 12" stone | Keep lines on contour of land | Keep septic system > 50 from existing well

Judy C. Rice RS
Division or Section Head

Phil J. Walker R.S.
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 Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER OR AGENT'S COPY

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 912B/8783A DATE: 5/17/93

TC: 011-061-01-02 ☒ L ☒ CRT

SERIAL Nº 15219

Name of Owner Dean & Shelly Belk Juris.:

Address of Property 14901 Black Belt Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400'

Number of Lines 4 @ 100'

Cover Depth 18"-24"

Water Supply Source Well

Distance to Water Source >50

Excavation Inspected 5/17/93

Tank(s) Inspected 5/17/93

Wash Line Inspected -

High Water Alarm Inspected -

PLOT

Design: 1993, 1500ST, 1200SFT, CONV 12"stone ccc.l CTR# A. Cornelius

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: Septic System designed for 3 bedroom house

Type II

Philo J. Walker R.S.
Environmentalist

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