Supervisor/Administrative Professional Checklist

New Septic ☑ New Well ☐ Use Existing ☐ Alteration ☐ Modified Plot Plan ☐

New Septic Fees Paid:

IP ($250.00) 2/25/16 LE Initials/Date

CA ($200.00) 5/24/17 LE Initials/Date

OP ($200.00) 5/24/17 Initials/Date

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

New Well Fee Paid: $550.00 _____ Initials/Date

Use Existing Fee Paid: $100.00 _____ Initials/Date

Alteration Fee Paid: $300.00 (Total) $200 (If use existing was paid)_____ Initials/Date

Modified Plot Plan Fee Paid: $100.00 _____ Initials/Date

Floor plans need to be submitted and reviewed before CA can be issued. ☑ Reviewed ☑ JAM 6-25-17

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

Septic file completed. ☐ _____ Well file completed. ☐ _____

Send permit for signature. ☑ Signature received. ☑ _____

Also have them initial application for 5 Bedroom Change.

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

Certified operator contract is on file. ☐ _____

MECKLENBURG COUNTY
HEALTH DEPARTMENT

9404B 8052 23 FEB '16 PM12:14

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: 13928252
STREET ADDRESS: 8314 Aspen Court
CITY: Mint Hill
STATE: NC ZIP: 28227
SUBDIVISION NAME: Oakbridge at Waterleaf
LOT #: 11 LOT SIZE (acres): 0.70

TOWNSHIP:
◉ MECKLENBURG ○ CORNELIUS ○ HUNTERSVILLE
○ DAVIDSON ○ CHARLOTTE ○ PINEVILLE
○ MATTHEWS ○ MINT HILL

4. BUILDING INFORMATION:

BUILDING TYPE:
○ SINGLE MOBILE HOME ○ MODULAR HOME
○ DOUBLE WIDE ○ MULTIPLE FAMILY
◉ HOUSE ○ OTHER _____
HEATED SQUARE FOOTAGE: 4,000
NUMBER OF BEDROOMS: 4 5 CB
NUMBER OF OCCUPANTS: 6

FOUNDATION TYPE:
○ CONCRETE SLAB ○ BASEMENT WITH PLUMBING
◉ CRAWL SPACE ○ BASEMENT 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: _____ 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: 4 1 2 3 ____

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: True Homes
ADDRESS: 2649 Brekonridge Center Drive
CITY: Monroe
STATE: NC ZIP: 28079
WORK PHONE: (704) 238-1229
MOBILE PHONE: _____
FAX: _____
E-MAIL: cbryant@truehomesusa.com

13. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:

NAME: Septic Environmental Solutions, Inc. Kenneth Owens
ADDRESS: 3019 Spring Fancy Lane
CITY: Indian Trail
STATE: NC ZIP: 28079
WORK PHONE: (704) 502-5588
MOBILE PHONE: (704) 502-5588
FAX: (704) 684-1469
E-MAIL: septicenvsol@yahoo.com

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

Revised on: 12/15/10

MECKLENBURG COUNTY
HEALTH DEPARTMENT

9404B 8052 23 FEB '16 PM12:14

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: 13928252
STREET ADDRESS: 8314 Aspen Court
CITY: Mint Hill
STATE: NC ZIP: 28227
SUBDIVISION NAME: Oakbridge at Waterleaf
LOT #: 11 LOT SIZE (acres): 0.70

TOWNSHIP:
◉ MECKLENBURG ○ CORNELIUS ○ HUNTERSVILLE
○ DAVIDSON ○ CHARLOTTE ○ PINEVILLE
○ MATTHEWS ○ MINT HILL

4. **BUILDING INFORMATION:**

BUILDING TYPE:
○ SINGLE MOBILE HOME ○ MODULAR HOME
○ DOUBLE WIDE ○ MULTIPLE FAMILY
◉ HOUSE ○ OTHER _____

HEATED SQUARE FOOTAGE: 4,000
NUMBER OF BEDROOMS: 4 5
NUMBER OF OCCUPANTS: 6

FOUNDATION TYPE:
○ CONCRETE SLAB ○ BASEMENT WITH PLUMBING
◉ CRAWL SPACE ○ BASEMENT 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: _____ 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:** 4 1 2 3 ____

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: True Homes
ADDRESS: 2649 Brekonridge Center Drive
CITY: Monroe
STATE: NC ZIP: 28079
WORK PHONE: (704) 238-1229
MOBILE PHONE: _____
FAX: _____
E-MAIL: cbryant@truehomesusa.com

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

NAME: Septic Environmental Solutions, Inc. Kenneth Owens
ADDRESS: 3019 Spring Fancy Lane
CITY: Indian Trail
STATE: NC ZIP: 28079
WORK PHONE: (704) 502-5588
MOBILE PHONE: (704) 502-5588
FAX: (704) 684-1469
E-MAIL: septicenvsol@yahoo.com

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

Revised on: 12/15/10

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.

KLO (Initial here for septic system applications)

15. WELL PERMIT APPLICATION:

If the information in this application is falsified, changed, or the site is altered, then the Well Permit shall become invalid. I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed. The permit is valid for a period of twelve (12) months from the date of issuance.

_____ (Initial here for well applications)

16. APPLICATION SIGNATURE SECTION:

ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. A proper signature is required in order to process your application. Please review the application carefully and sign in the space provided below. A PROPOSED PLOT PLAN is required to be submitted with each application.

Septic Environmental Solutions, Inc. Kenny Owens — 2/22/16

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 FEE RECEIVED: $ _____ DATE FEE RECEIVED: _____

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

APPLICATION PROCESSED BY: _____

GWS FILE NUMBER ASSIGNED: _____

APPLICATION ID NUMBER ASSIGNED: _____

COMMENTS:

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

Revised on: 12/15/10

File #: _____

PROPOSED PLOT PLAN

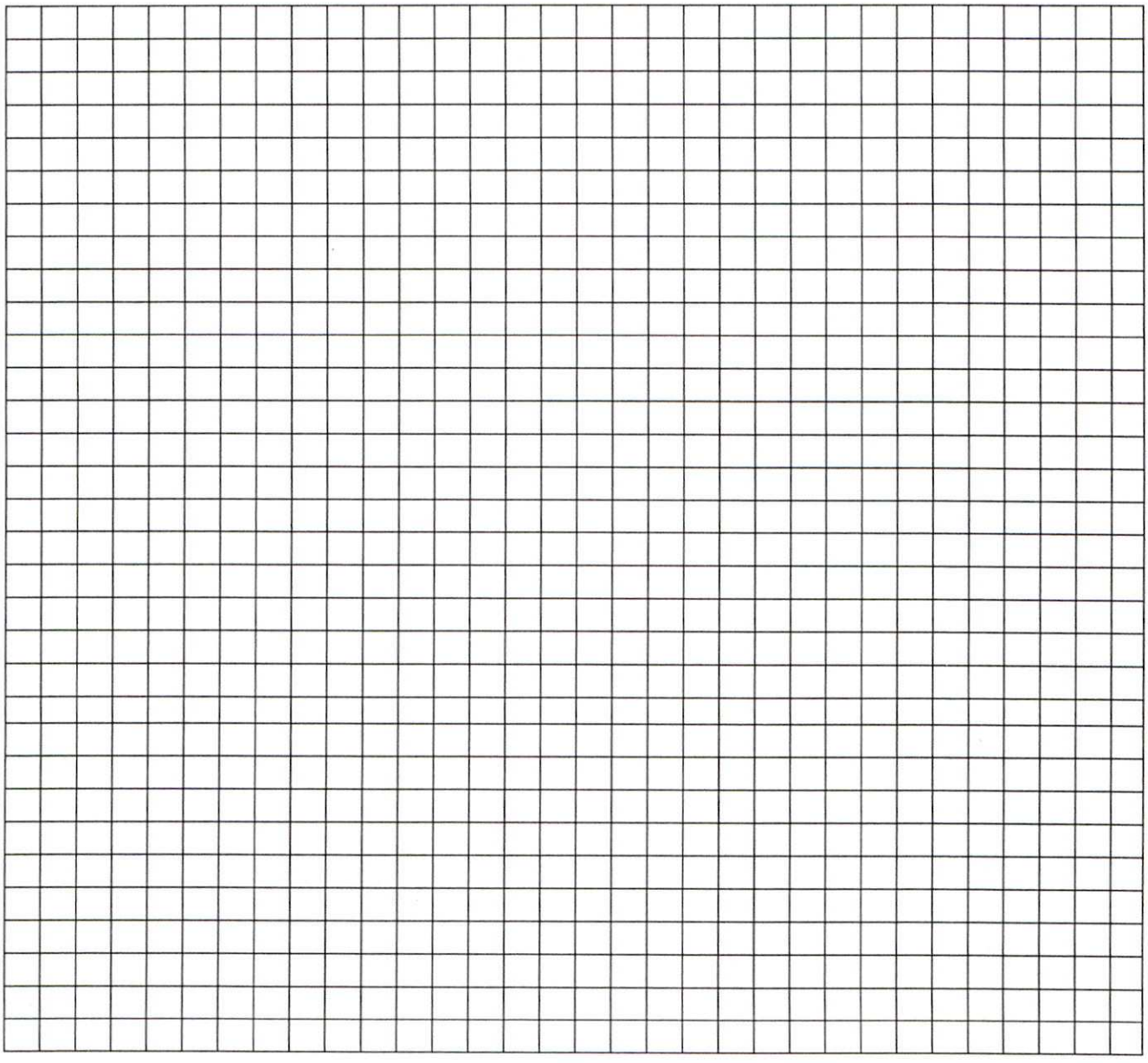
A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

Street Address: 8314 Aspen Court

Tax Parcel #: 13928252

Subdivision Name: Oakbridge at Waterleaf

Lot #: 11



Septic Environmental Solutions, Inc. Kenny Owens

Property Owner's or Owner's Legal Representative Signature

2/22/16

Date

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

Revised on: 12/15/10

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	02/25/16	**Amount:**	250.00
Receipt #:	98687	**Tendered:**	250.00
Check / Auth #:	CHARGE	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: B58730
Contractor: TRUE HOMES LLC
Attn:
Address: 2649 BRECKONRIDGE CENTRE DR
Address:
City/State/Zip: MONROE, NC 28111

Item	Description	Permit#	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 8314 ASPEN CT		1	250.00	250.00

----------Outstanding Balances----------

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
27,540.97					

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

Sheet: 1 of 2
Property ID: 139-282-52
Lot #: 11
File #: 9404B
AppID: 8052

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Property Owner: True Homes
Address: 2649 Brekonridge Center Dr, Monroe, NC 28079
Proposed Facility: 4 Bedroom House
Design Flow (.1949): 480 GPD
Location: 8314 Aspen Ct, Mint Hill, NC 28227
Water Supply: [ ] Public [ ] Individual [ ] Well [ ] Spring [X] Municipal
Evaluation Method: [ ] Auger Boring [X] Pit [ ] Cut
Type of Wastewater: [X] Sewage [ ] Industrial Process [ ] Mixed

Applicant: Septic Environmental Solutions, Inc.
Date Evaluated: 3/9/16
Property Size: 0.7 ac
Property Recorded: Unknown

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 Sapro Class	.1944 Restr Horiz	General Comments	Profile Class & LTAR	Maximum Trench Bottom Depth for 3' Wide Conventional Trench
Pit	R	0 - 8	gr/sbk CL	SS SP FR SEXP							
#1	2%	8 - 30	sbk/abk C	S P FR SEXP	>56"	56	NA	NA		**PS IV**	
		30 - 44	sbk/abk CL	SS P FR SEXP						**0.3**	**36"**
		44 - 56	sap L	SS SP FR SEXP							
Pit	LS	0 - 16	gr CL	SS SP FR SEXP							
#2	4%	16 - 51	sbk/abk C	S P FR SEXP	>51"	51	NA	NA		**PS IV**	
										0.3	**36"**
Pit	LS	0 - 12	gr/sbk CL	SS SP FR SEXP							
#3	9%	12 - 52	sbk/abk C	S P FR SEXP	>52"	52	NA	NA		**PS IV**	
										0.3	**36"**
Pit	R	0 - 12	gr/sbk CL	SS SP FR SEXP							
#4	2%	12 - 55	sbk/abk C	S P FR SEXP	>55"	55	NA	NA		**PS IV**	
										0.3	**36"**
Pit	R	0 - 20	gr/sbk CL	SS SP FR SEXP							
#5	2%	20 - 55	sbk/abk C	S P FR SEXP	>55"	55	NA	NA		**PS IV**	
										0.3	**36"**

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	1116	IVa
Site LTAR (gpd/sq ft)	**0.3**	**0.3**

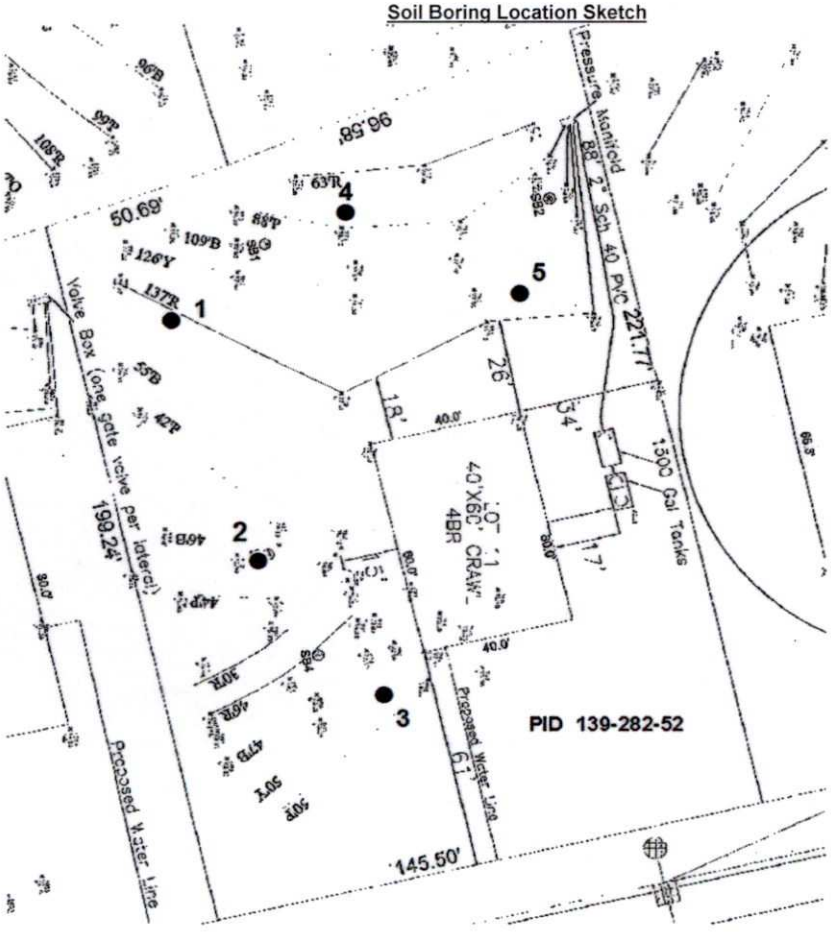
Other Factors (.1946): NA
Soil Evaluation By: Jacob Presley, REHS, LSS
Others Present:
Site Classification (.1948):
Site Evaluation By: April Burrgames, REHS
Others Present: Kenny Owens

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		mass-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
		SiCL-Silty Clay Loam		
CV-Convex Slope				pr-Prismatic
T-Terrace				Sap-Saprolite
FP-Flood Plain		CL-Clay Loam		**Structure Prefixes**
D-Drainage Way		SCL-Sandy Clay Loam		w-weak m-moderate s-strong f-fine m-medium c-coarse
		Silt		
	IV	SC-Sandy Clay	0.4 - 0.1	
		SiC-Silty Clay		
		C-Clay		

Consistence	Consistence	Mineralogy
Moist	**Wet**	SEXP-Slightly Expansive
VFR-Very Friable	SS-Slightly Sticky	EXP-Expansive
FR-Friable	S-Sticky	
FI-Firm	VS-Very Sticky	**Classification**
VFI-Very Firm	NP-Non-Plastic	US-Unsuitable
EFI-Extremely Firm	SP-Slightly Plastic	PS-Provisionally Suitable
	P-Plastic	S-Suitable
	VP-Very Plastic	NA-Not Applicable

Soil Boring Location Sketch



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 #: **30008052** GWS File #: **9404B** Tax Parcel #: **139-282-52**

- 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):** 4/11/2021

Type of Installation: Residential - New System Lot Number: 11

Structure Type: HOUSE Size (ft^2): 4000 # Bedrooms: 5 # Occupants: 6

Building Foundation: Basement With Plumbing Water Supply: Municipal

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

Initial System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1500	Total Trench Length (ft):	500
Maximum Trench Depth (in):	36	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

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

Repair System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1000	Total Trench Length (ft):	333
Maximum Trench Depth (in):	36	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 STATE OF NORTH CAROLINA, 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 a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: April Bumgarner

Signature: April Bumgarner, REHS

Date Issued: 4/11/2016

Owner/Legal Agent: Cherita Bryant
Print Name

Signature: Cherita Bryant

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 #: **30008052** GWS File #: **9404B**

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 type of repair system requires periodic inspections by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- Upon completion of the project the system designer shall provide Groundwater & Wastewater Services with a letter certifying that the system was installed in accordance with the approved design.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.
- Foundation drains shall be constructed not to discharge water onto or across any part of the septic system.
- The septic system shall be located at least 10 feet from any foundation drain.

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, 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 a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: April Bumgarner
Signature: April Bumgarner, REHS
Date Issued: 4/11/2016

Owner/Legal Agent: Cherita Bryant
Print Name
Signature: Cherita Bryant

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 #: 30008052 GWS File #: 9404B Tax Parcel #: 139-282-52

- 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):** 4/11/2021

Type of Installation: Residential - New System Lot Number: 11

Structure Type: HOUSE Size (ft^2): 4000 # Bedrooms: 5 # Occupants: 6

Building Foundation: Basement With Plumbing Water Supply: Municipal

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

Initial System Specifications:

Design Flow (gpd): 600	LTAR (gpd/ft^2): .3	Septic Tank Size (gal): 1500	Pump Tank Size (gal): 1500
Trench Width (ft): 3	Trench Spacing (ft): 9	Absorption Area (ft^2): 1500	Total Trench Length (ft): 500
Maximum Trench Depth (in): 36	Depth of Media (in): 12	Distribution Device: Pressure Manifold	

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

Repair System Specifications:

Design Flow (gpd): 600	LTAR (gpd/ft^2): .3	Septic Tank Size (gal): 1500	Pump Tank Size (gal): 1500
Trench Width (ft): 3	Trench Spacing (ft): 9	Absorption Area (ft^2): 1000	Total Trench Length (ft): 333
Maximum Trench Depth (in): 36	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 STATE OF NORTH CAROLINA, 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 a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: April Bumgarner

Signature: April Bumgarner, REHS

Date Issued: 4/11/2016

Owner/Legal Agent: Cherita Bryant

Print Name

Signature: Cherita Bryant

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 #: **30008052** GWS File #: **9404B** Tax Parcel #: **139-282-52**

- 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):** 4/11/2021

Type of Installation: Residential - New System Lot Number: 11

Structure Type: HOUSE Size (ft^2): 4000 # Bedrooms: 5 # Occupants: 6

Building Foundation: Basement With Plumbing Water Supply: Municipal

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

Initial System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1500	Total Trench Length (ft):	500
Maximum Trench Depth (in):	36	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

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

Repair System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1000	Total Trench Length (ft):	333
Maximum Trench Depth (in):	36	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 STATE OF NORTH CAROLINA, 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 a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: April Bumgarner Owner/Legal Agent:_____
Print Name

Signature: April Bumgarner, REHS Signature:_____

Date Issued: 4/11/2016

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 #: **30008052** GWS File #: **9404B**

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 type of repair system requires periodic inspections by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- Upon completion of the project the system designer shall provide Groundwater & Wastewater Services with a letter certifying that the system was installed in accordance with the approved design.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.
- Foundation drains shall be constructed not to discharge water onto or across any part of the septic system.
- The septic system shall be located at least 10 feet from any foundation drain.

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, 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 a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: April Bumgarner

Signature: April Bumgarner, REHS

Date Issued: 4/11/2016

Owner/Legal Agent: _____
Print Name

Signature: _____

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 #: **30008052** GWS File #: **9404B**

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 type of repair system requires periodic inspections by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- Upon completion of the project the system designer shall provide Groundwater & Wastewater Services with a letter certifying that the system was installed in accordance with the approved design.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.
- Foundation drains shall be constructed not to discharge water onto or across any part of the septic system.
- The septic system shall be located at least 10 feet from any foundation drain.

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, 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 a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: April Bumgarner

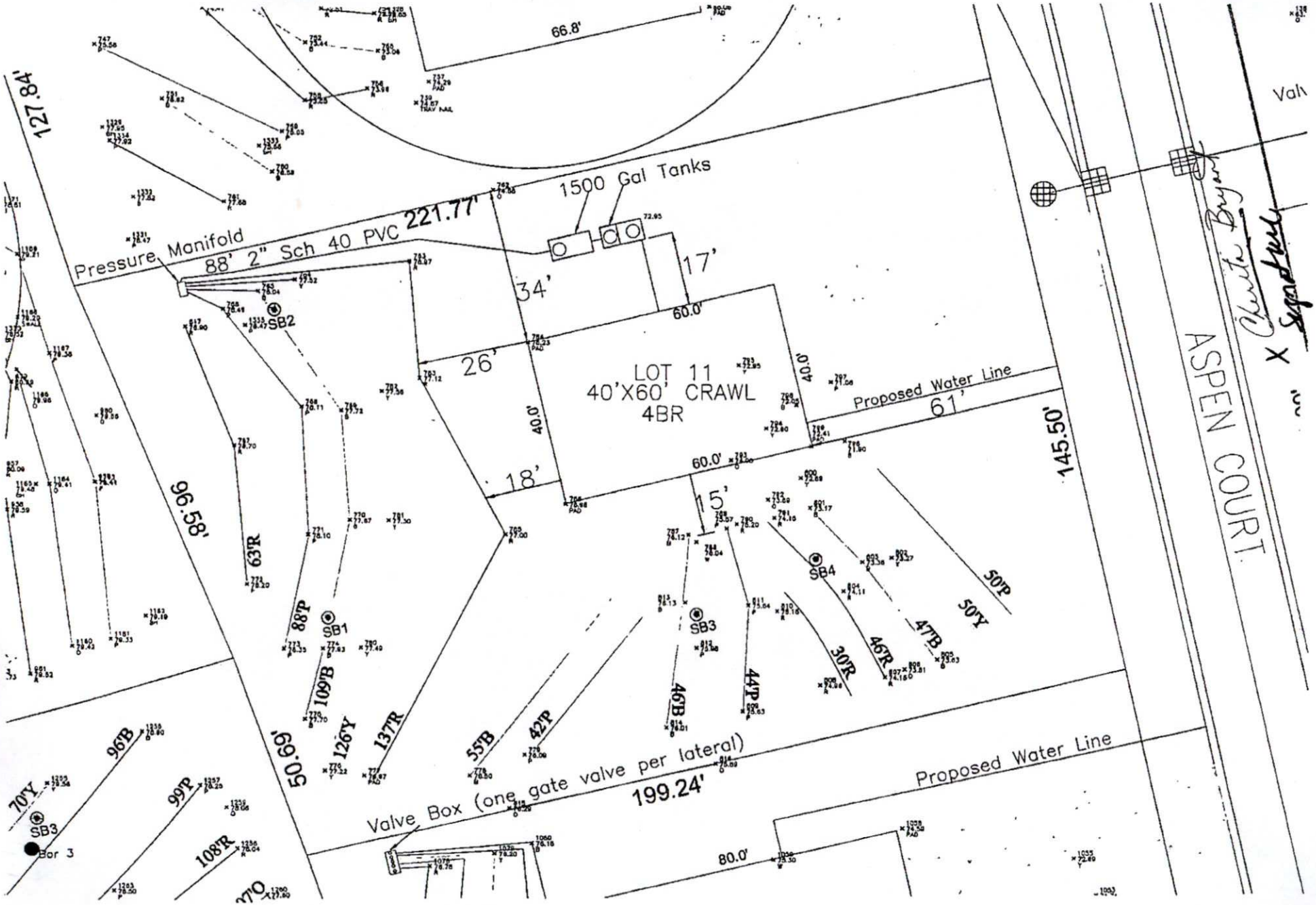
Signature: April Bumgarner, REHS

Date Issued: 4/11/2016

Owner/Legal Agent: Cherita Bryant

Print Name

Signature: Cherita Bryant

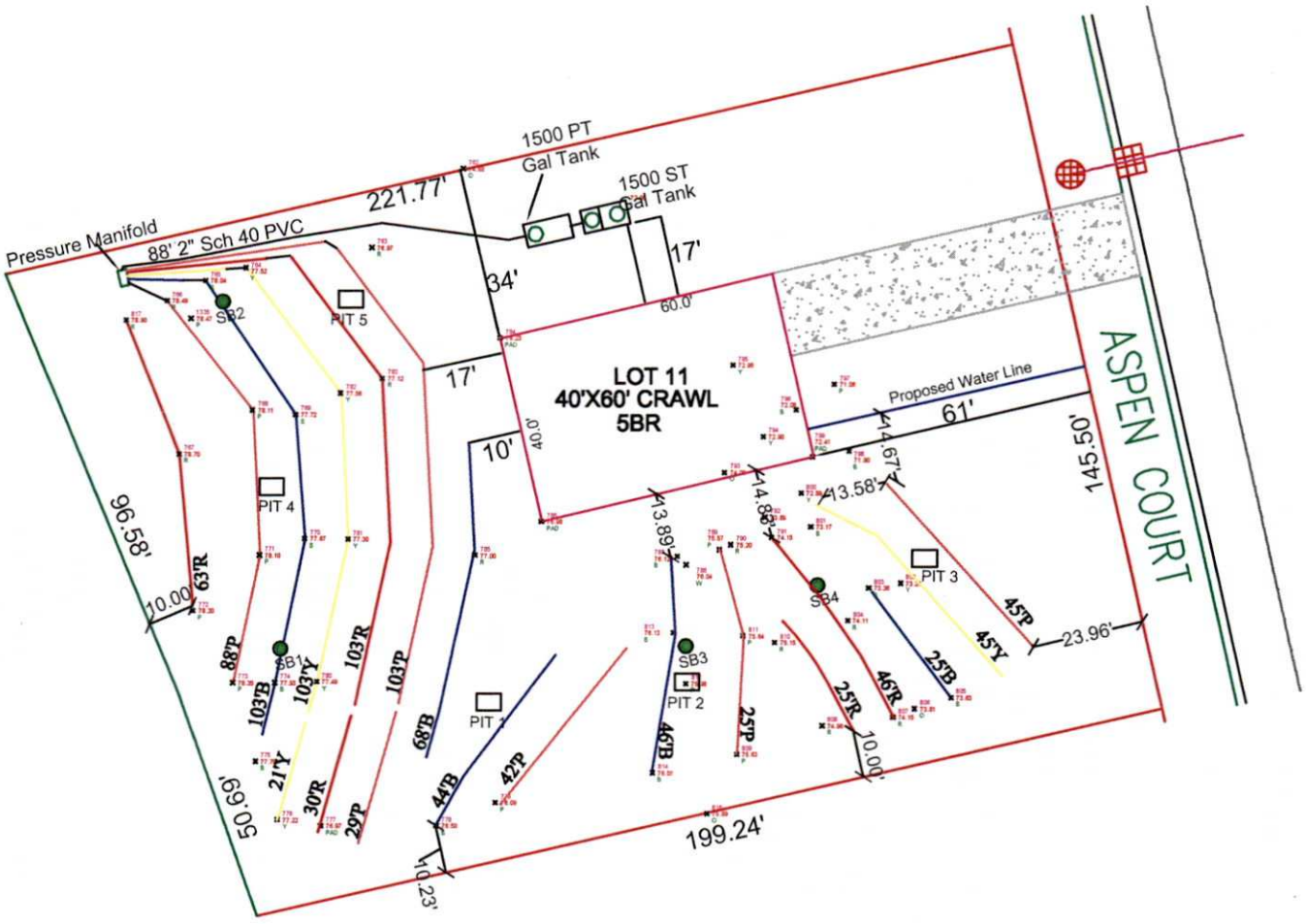

66.8'
127.84'
1500 Gal Tanks
Pressure Manifold
88' 2" Sch 40 PVC
221.77'
72.95
17'
34'
60.0'
SB2
26'
LOT 11
40'X60' CRAWL
4BR
40.0'
40.0'
Proposed Water Line
61'
60.0'
18'
15'
145.50'
ASPEN COURT
96.58'
63'R
88'P
SB1
109'B
126'Y
137'R
50.69'
SB4
SB3
50'P
50'Y
47'B
46'R
30'R
44'P
46'B
55'B
42'P
Valve Box (one gate valve per lateral)
199.24'
Proposed Water Line
80.0'
70'Y
SB3
Bor 3
96'B
99'P
108'R
Curtis Bryant
X Signature

OAKBRIDGE AT WATERLEAF

STOP
DIAL 811 or

Providence
PROVIDENCE LAND GROUP, PLLC
LAND SURVEYING • PLANNING • PROJECT MANAGEMENT
3716 PROVIDENCE ROAD SOUTH WAXHAW NC 28173
704.400.0117 • N.C. FIRM # P-0910 • S.C. FIRM # 4356

Providence Land Group, PLLC has field located the Septic Flags as shown on this plan.



SCALE

40 0 20 40

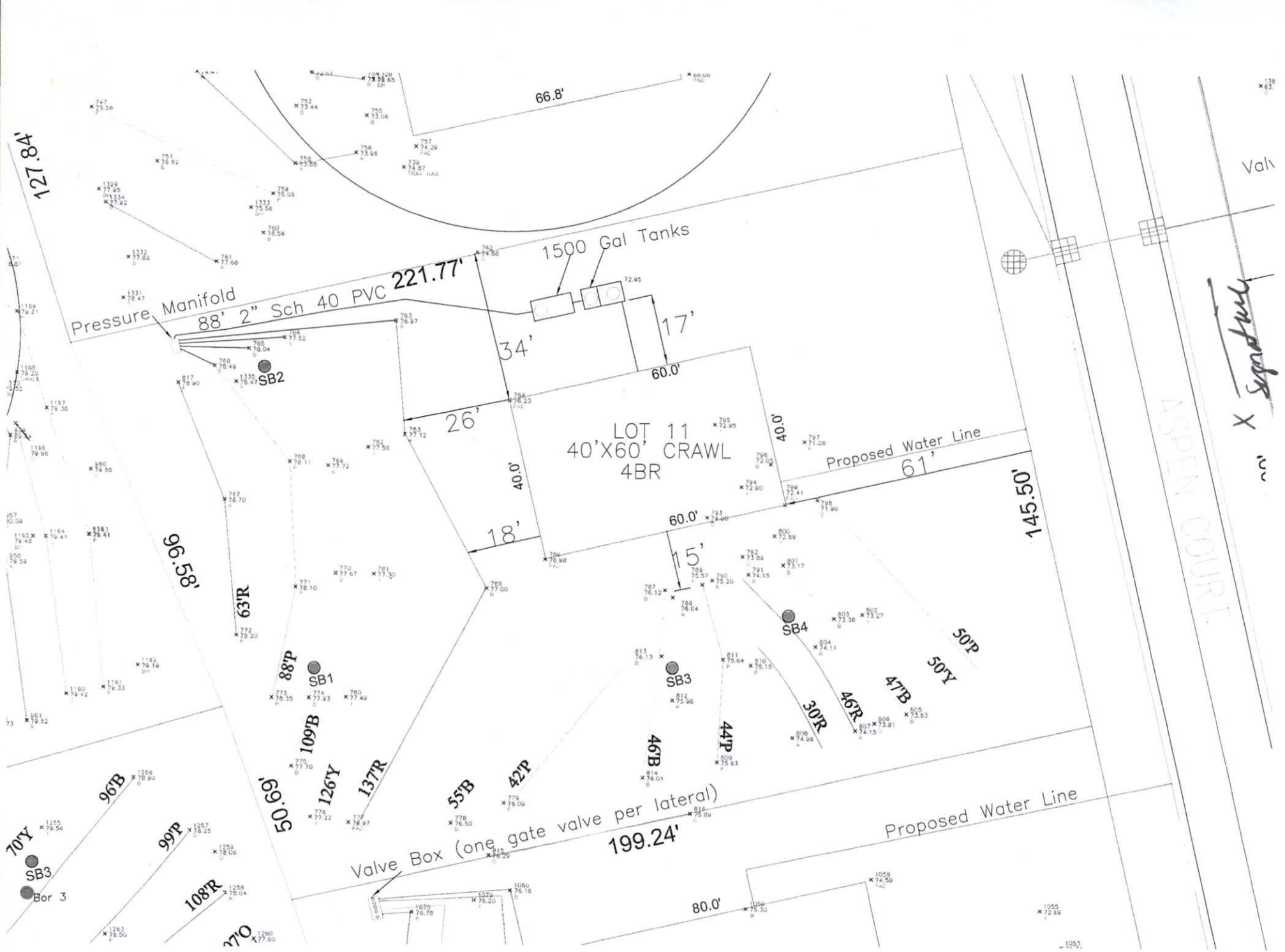
1 inch = 40 ft.

TANK INFORMATION:
1500 GALLON SEPTIC TANK, 1500 GALLON PUMP TANK
INSTALL TANKS TO AVOID SWALES OR LOW LYING AREAS!

NOTE:
ENGINEERING ASPECT OF THE DESIGN WAS COMPLETED UNDER THE DIRECTION OF MR. G. CARTER MOORE III, PE.

SEPTIC ENVIRONMENTAL SOLUTIONS, INC.
3019 SPRING FANCY LANE, INDIAN TRAIL, NORTH CAROLINA, 704-502-5588

PROJECT NAME:	DATE: 3/21/16
True Homes Oakbridge At Waterleaf Lot 11	DATE: DATE:
COUNTY : MECKLENBURG COUNTY, NC	DRAINFIELD LAYOUT MAP
SCALE: 1" = 40'	SHEET: 1 OF 4

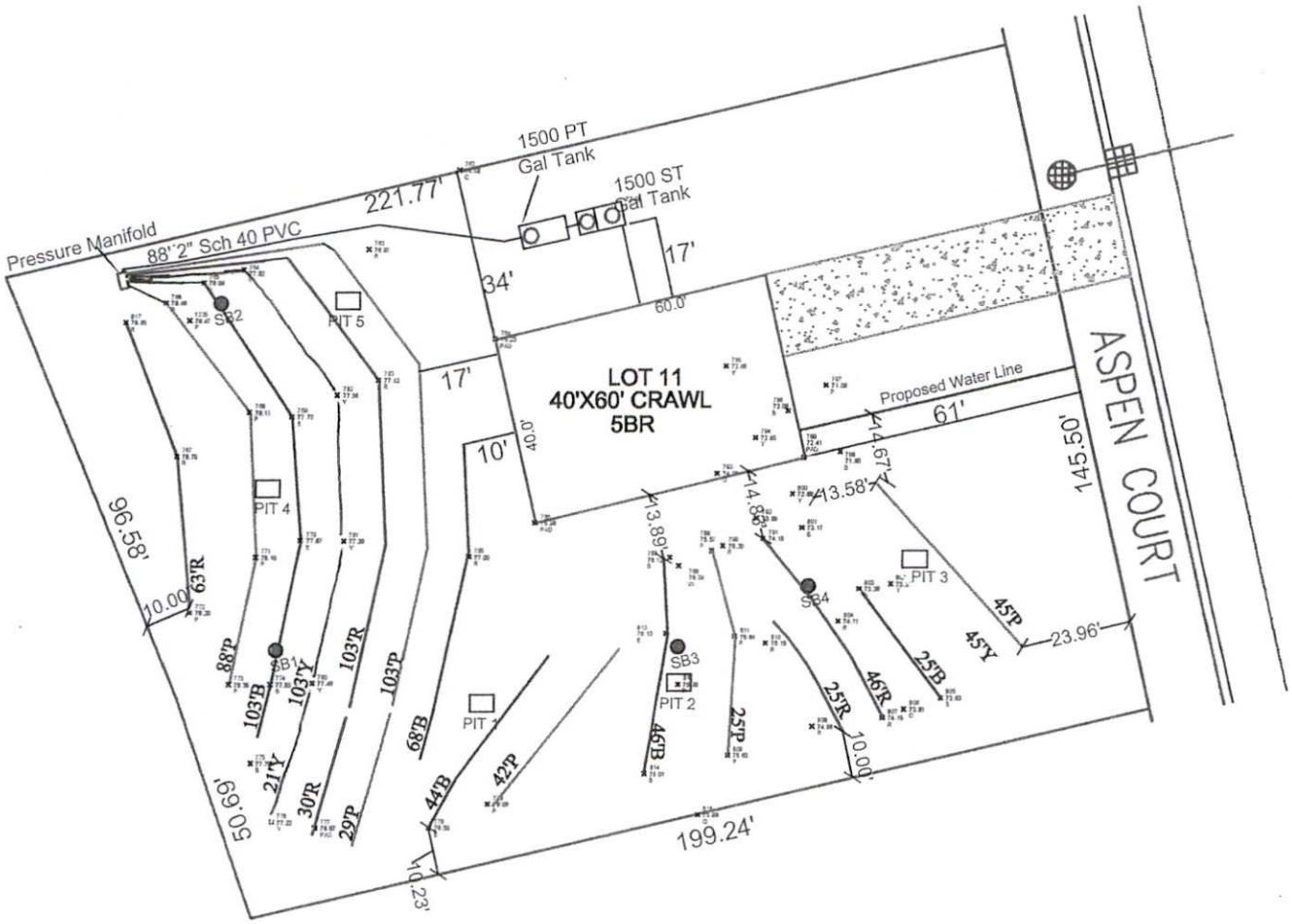

127.84'
66.8'
1500 Gal Tanks
Pressure Manifold
88' 2" Sch 40 PVC
221.77'
SB2
34'
17'
60.0'
26'
LOT 11
40'X60' CRAWL
4BR
40.0'
40.0'
Proposed Water Line
61'
60.0'
18'
15'
145.50'
96.58'
63'R
88'P
SB1
109'B
126'Y
137'R
50.69'
55'B
42'P
SB3
46'B
44'P
SB4
30'R
46'R
47'B
50'Y
50'P
96'B
70'Y
SB3
Bor 3
99'P
108'R
Valve Box (one gate valve per lateral)
199.24'
Proposed Water Line
80.0'
ASPEN COURT

OAKBRIDGE AT WATERLEAF

STOP
DIAL 811 or

Providence
PROVIDENCE LAND GROUP, PLLC
LAND SURVEYING • PLANNING • PROJECT MANAGEMENT
5716 PROVIDENCE ROAD SOUTH WAXHAW NC 28173
704.400.0117 • N.C. FIRM # P-0910 • S.C. FIRM # 4356

Providence Land Group, PLLC has field located the Septic Flags as shown on this plan.



SCALE

40 0 20 40

1 inch = 40 ft.

TANK INFORMATION:
1500 GALLON SEPTIC TANK, 1500 GALLON PUMP TANK
INSTALL TANKS TO AVOID SWALES OR LOW LYING AREAS!

NOTE:
ENGINEERING ASPECT OF THE DESIGN WAS COMPLETED UNDER THE DIRECTION OF MR. G. CARTER MOORE III, PE.

SEPTIC ENVIRONMENTAL SOLUTIONS, INC.
3019 SPRING FANCY LANE, INDIAN TRAIL, NORTH CAROLINA, 704-502-5588

PROJECT NAME: True Homes Oakbridge At Waterleaf Lot 11	DATE: 3/21/16 DATE: DATE:
COUNTY : MECKLENBURG COUNTY, NC	DRAINFIELD LAYOUT MAP
SCALE: 1" = 40'	SHEET: 1 OF 4

S

FEE: 200.00

DATE:5/25/2017

MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES

FILE NUMBER: 9404B

PERMIT NUMBER: 30008052

PARCEL NUMBER: 13928252

JOB LOCATION INFORMATION

ADDRESS: 8314 ASPEN CT

CITY: CHARLOTTE **STATE: NC** **ZIP:** 28227

ISSUED TO: TRUE HOMES

CONSTRUCTION A **ATE:** 5/25/2017

5/25/17
April, Please the Eggs On Tks

CONS **ONDITIONS**

1. WASTEWATER SYSTEM CONSTR **INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 30008052, 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. A PRE-CONSTRUCTION MEETING MUST BE SECURED PRIOR TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A LICENSED SEPTIC TANK CONTRACTOR WITH THE NORTH CAROLINA ONSITE WASTEWATER CONTRACTOR INSPECTOR CERTIFICATION BOARD.

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 CONSTRUCTION AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. THIS CONSTRUCTION AUTHORIZATION AS PROVIDED IN G.S. 130A-335(f) AND G.S. 130A-336(b) SHALL BE VALID FOR A PERIOD EQUAL TO THE VALIDITY OF THE IMPROVEMENT PERMIT, AND MAY BE ISSUED AT THE SAME TIME THE IMPROVEMENT PERMIT IS ISSUED.

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (980) 314-1680 Fax: (704) 336-6894

Septic System Pre-Construction Meeting Checklist

File # 94048 App # 8052 Tax Parcel # 139-282-52

Property Owner: True Homes

Job Location Address: 8314 Aspen Ct

City: Charlotte State: NC Zip Code: 28227

1. **Does System design match facility, flow & wastewater characteristics?**

   ☑ YES ☐ NO

   Comments: 4BR home built 5BR Permit

2. **Is there sufficient available space for the septic systems initial and repair areas?**

   ☑ YES ☐ NO

   Comments:

3. **Can the septic system be installed per the permit conditions and drawing on file?**

   ☑ YES ☐ NO

   Comments:

* If "NO" is checked for any of the above the existing permit may need to be revoked.

Permission is hereby given to ☑ install ☐ alter ☐ repair an on-site wastewater treatment & and disposal system, with subsurface soil absorption and effluent discharge meeting all of the construction requirements of 15A NCAC 18A .1900 which are in effect on the date of granting this approval. System shall not be installed while soils are in wet condition.

April Bumgarner
Authorized Agent

9-13-17
Date

Water Mgt.
Others Present

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

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

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

File #: 9404B Permit #: 8052 Tax Parcel #: 139-282-52

Property Owner: _____

Job Location Address: 8314 Aspen Ct

City: Mint Hill State: NC Zip Code: 28227

Operation Permit Issuance Date: 10-31-17 Contractor Name: Sid Gadskins

Permitted Design Flow: 600 GPD Liquid Capacity of Dosing Tank: 1500 gallons

Liquid Capacity of Septic Tank: 1500 gallons Manufacture Infiltrator Effluent Pump Model: Goulds .5

Drainfield Installation ☐ N/A

Trench Depth: 36 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 500 feet

# of Lines: 5 @ various feet

Depth of Media: 12 inches (Type) Type IIIb chambers

Depth of Cover: 24 inches

Distribution Device: Pressure 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: _____ feet

Distance from Property Line: _____ feet

Distance from Water Supply Source: _____ feet

Inspection Dates

Tank(s) Inspected: 10/13/17

Excavation Inspected: 10/13/17

Pump & Controls Inspected: 10-24-17

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)

See Attached for drawing.

Consultant design

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: IIIb/IV4/p/NA/NA

DENR Authorized Agent: April Bumgarner Signature: April Bumgarner

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (980) 314-1680 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 #: 9404B Permit #: 8052 Tax Parcel #: 139-282-52

Property Owner: _____

Job Location Address: 8314 Aspen Court

City: Mint Hill State: NC Zip Code: 28227

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: IIIb

*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: 4 Bedroom home built 5 bedroom permit

DENR Authorized Agent: April Bumgarner Date: 10-31-17

Signature: April Bumgarner

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 05/24/17
Receipt #: 106011
Check / Auth #: CHARGE
Received By: ELLISLW

Amount: 200.00
Tendered: 200.00
Returned: 0.00

Account Information

Account #: B58730
Contractor: TRUE HOMES LLC
Attn:
Address: 2649 BRECKONRIDGE CENTRE DR
Address:
City/State/Zip: MONROE, NC 28111

Item	Description	Permit#	Quantity	Unit Price	Total Price
0734	Septic Construction Authorizat 8314 ASPEN CT		1	200.00	200.00

----------Outstanding Balances----------

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
22,036.44					

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 05/24/17
Receipt #: 106010
Check / Auth #: CHARGE
Received By: ELLISLW

Amount: 200.00
Tendered: 200.00
Returned: 0.00

Account Information

Account #: B58730
Contractor: TRUE HOMES LLC
Attn:
Address: 2649 BRECKONRIDGE CENTRE DR
Address:
City/State/Zip: MONROE, NC 28111

Item	Description	Permit#	Quantity	Unit Price	Total Price
0703	Septic Operational Permit 8314 ASPEN CT		1	200.00	200.00

----------Outstanding Balances----------

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
21,836.44					

Ellis, Loretta

From: Vicki Phillips <vphillips@truehomesusa.com>
Sent: Wednesday, May 24, 2017 10:10 AM
To: Ellis, Loretta; septicenvsol@yahoo.com
Subject: OBW11 SEPTIC PERMIT-8314 Aspen Court, Charlotte, NC, 28227

Importance: High

Good Morning,

I am submitting the ***Building*** *Permit on lot OBW-11 today. In the past we have been almost 2 months behind in construction due to Groundwater delays, I want to ensure we don't run into issues with this particular lot as the client is already anxious.*

Kenny *– Have you submitted the application on lot OBW-11? If so, may I have a copy.*

Loretta *– What is the status of the application, Lot OBW11-Address:* **8314 Aspen Court, Charlotte, NC, 28227?**

Thank you to you both, I hope this will be an easy process.

Thank you ~

Vicki Phillips
FMS Administrator/Permit Coordinator
vphillips@truehomesusa.com
Scheduling Hotline (704) 238-7620
True Homes
WE VALUE WHAT YOU VALUE

8
9404B