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 #: 7910B Permit #: _____ Tax Parcel #: 195-022-53

Property Owner: Essex Homes Southeast Inc.

Job Location Address: 13148 Belle Grove Manor Ln. Lot 29

City: Matthews State: NC Zip Code: 28105

Operation Permit Issuance Date: 8-16-2012 Contractor Name: SID GADSKINS

Permitted Design Flow: 600 GPD

Liquid Capacity of Septic Tank: 1500 gallons

Liquid Capacity of Dosing Tank: N/A gallons

Effluent Pump Model: N/A

Drainfield Installation ☐ N/A

Trench Depth: 30-36 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) Quick 4 Chambers

Depth of Cover: 18 inches

Distribution Device: Flow Divider to End Caps

Inspection Dates

Tank(s) Inspected: 8-16-2012

Excavation Inspected: 8-16-2012

Pump & Controls Inspected: N/A

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 _____

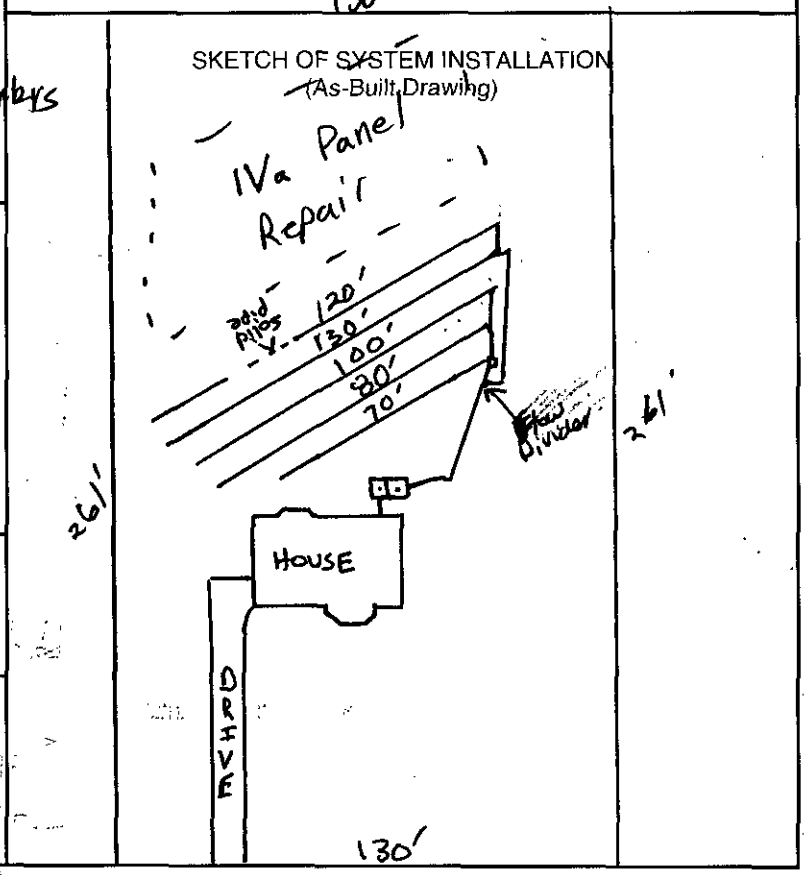
System Installation Setbacks

Distance from Building Foundation: 5 feet

Distance from Property Line: 10 feet

Distance from Water Supply Source: 10 feet

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: III g IQ4, G, NA, NA.

DENR Authorized Agent: Jeremy Michael Signature: Jeremy Michael BEHS

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NC DENR
Division of Environmental Health
On-Site Wastewater Section

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

File #: 7910B Permit #: 5489 Tax Parcel #: 195 022 53

Property Owner: Essex Homes Southeast Inc

Job Location Address: 13148 Belle Grove Manor Ln Lot 29

City: Matthews State: NC Zip Code: 28105

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/G

*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 Michael Date: 8/17/2012

Signature: Jeremy Michael REHS

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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 #: 7910B Permit #: 5489 Tax Parcel #: 195 022 53

Property Owner: Essex Homes Southeast Inc

Job Location Address: 13148 Belle Grove Manor Ln Lot 29

City: Matthews State: NC Zip Code: 28105

Installation Approval Issuance Date: 8/9/12

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 9/9/12, 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: 600 GPD

Site LTAR: .3 GPD/ft² (For new installations only.)

Liquid Capacity of Septic Tank: 1500 gallons

Liquid Capacity of Dosing Tank: NA gallons

Drainfield Design ☐ N/A

Trench Depth: 24 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 500 feet

# of Lines: 5 @ Various lengths feet

Depth of Media: 12 inches (Type) 25% Reduction

Distribution Device: Drop Boxes

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: 10 feet

Distance from Property Line: 10 feet

Distance from Water Supply Source: 10 feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)

Install in accordance with Consultants plan.

Comments: System Classification & Type: Type IIIg

DENR Authorized Agent: Philo Walker Signature: Philo J. Walker REHS

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

Sheet: 1 of 2
Property ID: 195-022-53
Lot #: 29
File #: 7910B
AppID: 5489

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Essex Homes Southeast Inc.
Applicant: Same
Address: 13310 South Ridge Dr. Suite A Charlotte, NC 28273
Date Evaluated: 3/22/2012
Proposed Facility: Residence
Design Flow (.1949): GPD
Property Size: .77 ac
Location of Site: 13148 Belle Grove Manor Ln. Mint Hill, NC 28105
Property Recorded: n/a
Water Supply: [X] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [X] Auger Boring [ ] 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 5%	0-6	SBK/CL	FR/SS/SP/SEXP		48"			PS,IV 0.3 GPD/FT^2
		6-48	SBK/ABK/C	FI/S/P/SEXP					
2	"	0-6	SBK/SCL	FR/SS/SP/SEXP		48"			PS,IV 0.3 GPD/FT^2
		6-48	SBK/ABK/C	FI/S/P/SEXP					
3	"	0-7	SBK/C	FI,S,P,SEXP		48"			PS,IV 0.3 GPD/FT^2
		7-48	SBK/ABK/C	FI,SS,SP,SEXP					
4	"	0-6	SBK/CL	FR,SS,SP,SEXP		48"			PS,IV 0.3 GPD/FT^2
		6-48	SBK/ABK/C	FI,S,P,SEXP					
5	"	0-4	SBK/SCL	FR,SS,SP,SEXP		48"			PS,IV 0.3 GPD/FT^2
		4-40	SBK/ABK/C	FI,S,P,SEXP					

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

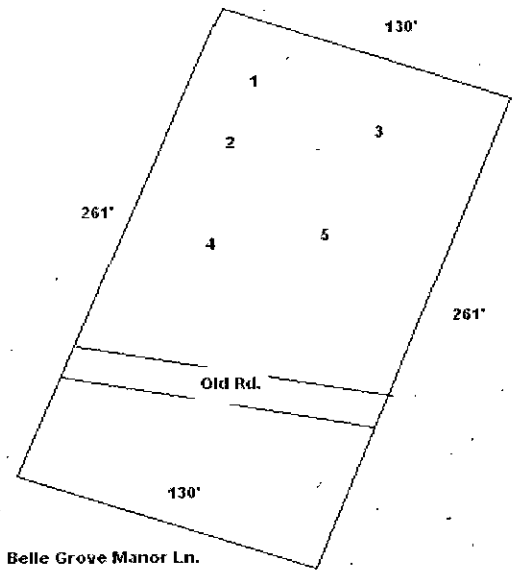
Other Factors (.1946):
Soil Evaluation By: Jeremy Michael Jeremy Michael REHS.
Others Present:
Site Classification (.1948):
Site Evaluation By: Jeremy Michael
Others Present:

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	

Sketch of Soil Evaluation Locations



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NC DENR
Division of Environmental Health
On-Site Wastewater Section

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

Permit #: **30005489** GWS File #: **7910B** Tax Parcel #: **195-022-53**

- *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):** 4/4/2017

Type of Installation: Residential - New System Lot Number: 29

Structure Type: HOUSE Size (ft^2): 3959 # Bedrooms: 5 # Occupants: 2

Building Foundation: Crawl Space Water Supply: Municipal

II. Initial System Type: Approved **System Classification:** IIIg

Initial System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	N/A
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:	Drop Boxes		

III. Repair System Type: PPBPS (gravity) **System Classification:** IIIe

Repair System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	N/A
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:	Drop Boxes		

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 Michael Owner/Legal Agent: _____
Print Name

Signature: Jeremy Michael R.E.H.S. Signature: _____

Date Issued: 4/4/2012

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 #: **30005489** GWS File #: **7910B**

IV. Permit Conditions/Comments:

- The septic system shall be installed in accordance with the plans submitted by the wastewater system design consultant.
- All components of the septic system must be installed in accordance with the required setbacks listed on the corresponding plot plan.
- All waterlines must be located a minimum of 10 ft. from any part of the septic system.
- 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 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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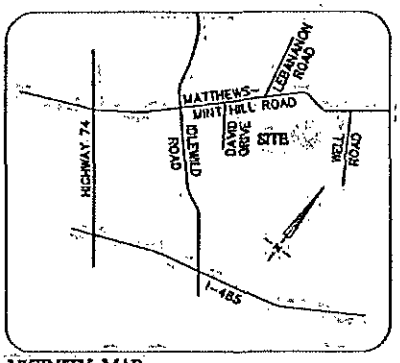
DENR Authorized Agent: Jeremy Michael

Signature: Jeremy Michael REHS

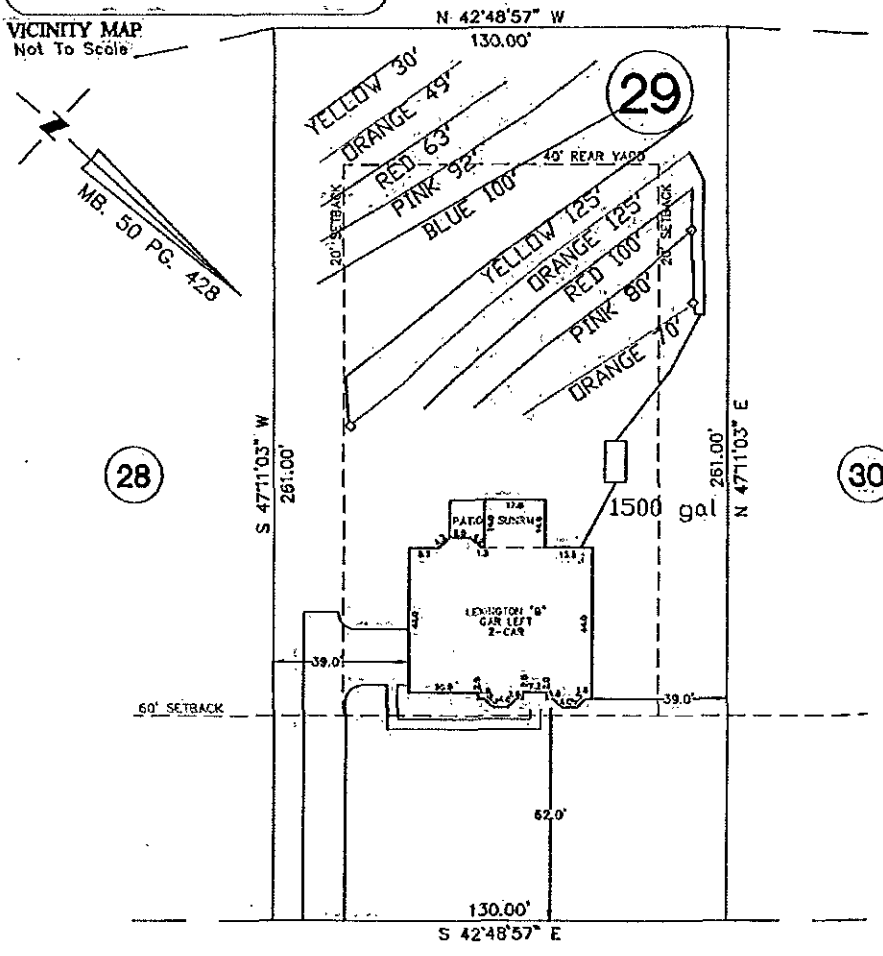
Date Issued: 4/4/2012

Owner/Legal Agent: _____
Print Name

Signature: _____



VICINITY MAP
Not To Scale



BELLE GROVE MANOR LANE

60' PUBLIC R/W

NOTE:
1. BUILDER ASSUMES RESPONSIBILITY FOR GRADING LOT AND/OR DESIGNING STEPS, PORCHES, DECKS, ETC. AS NECESSARY TO PREVENT ENCROACHMENT INTO SETBACKS.
2. HOUSE DIMENSIONS AND OPTIONS SHOULD BE VERIFIED WITH CONTRACTOR PRIOR TO CONSTRUCTION.
3. SETBACKS/ EASEMENTS SHOULD BE VERIFIED WITH DEVELOPER AND LOCAL OFFICIALS PRIOR TO CONSTRUCTION.
4. THIS IS A CONCEPTUAL DRAWING AND CONTENTS SHOWN HEREON ARE SUBJECT TO CHANGE UPON FINAL CONSTRUCTION.
THIS PROPERTY MAY BE SUBJECT TO ANY AND ALL APPLICABLE DEED RESTRICTIONS, EASEMENTS, RIGHT-OF-WAY, UTILITIES AND RESTRICTIVE COVENANTS WHICH MAY BE OF RECORD OR IMPLIED

THIS PLAT DOES NOT REFLECT ASBUILT CONDITIONS

PRELIMINARY PLAT
NOT FOR RECORDATION, CONVEYANCES OR SALES

40 0 40
SCALE: 1" = 40'

EASTOVER
LAND SURVEYING COMPANY, P.A.
LAND SURVEYORS - PLANNERS - (C-1833)
600 TOWNE CENTRE BOULEVARD, SUITE #309
PINEVILLE, NORTH CAROLINA 28134
PHONE (704) 927-8080
FAX (704) 521-1078

HOUSE LOCATION PLOT PLAN
FOR
LOT 29, BELLE GROVE MANOR PHASE 1 MAP 2
Town of Mint Hill, Mecklenburg County, North Carolina
PROPERTY OF: ESSEX HOMES
MAP BOOK 50 PAGE 428 DEED REFERENCE

DRAWN BY: MJA | DATE: FEBRUARY 9, 2012

S&EC

Soil & Environmental Consultants, PA

11010 Raven Ridge Road • Raleigh, North Carolina 27614 • Phone: (919) 846-5900 • Fax: (919) 846-9467
www.SandEC.com

Attached is a proposed design for a Gravity Dosed Chamber Septic System: (5 BR) single family residence on lot 29 at Belle Grove Manor Subdivision in Mecklenburg County, North Carolina.

Contents: **Page**

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

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

Site Plan---------- 5

Septic Tank Diagram---------- 6

Maintenance of Septic Systems---------- 7-9

February 16, 2012
S & EC Project No. 5-1656
Design By: W. Overby

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 DEHNR, 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.
- Septic tank riser shall be a minimum of 6" above finished grade.
- **Initial system is specified as gravity innovative (5' chambers)**
- Repair system is gravity dosed panel block
- **Initial system requires flow divider and drop box installation**

GRAVITY CHAMBER SYSTEM
FOR WASTEWATER TREATMENT

Owner:	Essex Homes
Address:	
Phone:	704 756-5316
County:	Mecklenburg
Location:	Belle Grove Manor lot 29
Source of Wastewater Flow:	5 Bedroom Single Family Residence
Estimated Daily Wastewater Production:	600 gpd
System Flow:	gravity

Design Specifications

Drainfield Size:	500
Loading Rate:	0.3 gpd/ft.^{2}
Depth of Gravel in Trench:	n/a
Gravel Size:	n/a
Trench Depth:	24
Trench Width:	36 in.
Septic Tank Size:	1500 gal.
Pump Tank Size:	n/a
Estimated Supply Line Length:	0
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	0.00
Dosing Volume:	0.00
Recommended Float Controls:	n/a
Recommended Control Panel:	*n/a*
Pressure Head:	0
Friction Head:	0.00
Elevation Head:	*0.00*
Total Dynamic Head:	0.00
Threaded Union:	n/a
Gate Valves:	n/a
Check Valves:	*n/a*
Anti-Siphon Hole:	n/a
Recommended Pump:	n/a
Additional Comments:	Soil suitability was performed by S&EC and Meck County

Belle Grove Manor Lot 29
CHAMBER SPECS

DESIGN FLOW:	600
SOIL APPLICATION RATE:	0.3 gpd/ft.^{2}
TOTAL AREA TRENCH BOTTOM:	1500
TOTAL LATERAL LENGTH:	500
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	500
SUPPLY LINE LENGTH:	0
TOTAL DYNAMIC HEAD:	0.00
DOSING VOLUME:	0.00
PUMP TANK DRAW DOWN*:	0.0
SEPTIC TANK SIZE:	1500 gal.
PUMP TANK SIZE:	n/a
RECOMMENDED PUMP:	n/a

**Pump tank draw down based on a volume basis of 29 gallons per inch. Draw down may vary among pump tank manufacturers.*

Belle Grove Manor Lot 29

Project No. 5-1656

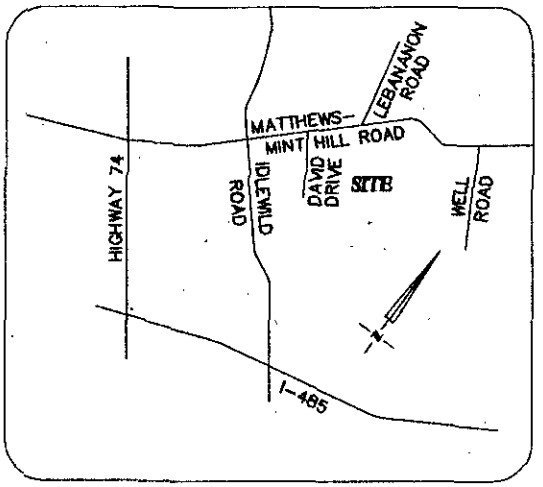
Layout for a 5 bedroom home **Feb '12**

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM		3.0			100.0		
INSTR. 1			103.0				
			SYSTEM				
1	Orange			3.70	99.3	70	70
2	Pink			4.20	98.8	83	80
3	Red			4.60	98.4	113	100
4	Orange			5.20	97.8	151	125
5	Yellow			5.50	97.5	140	125
			REPAIR				
6	Blue			6.30	96.7	125	100
7	Pink			7.00	96.0	92	92
8	Red			7.50	95.5	63	63
9	Orange			9.00	94.0	49	49
10	Yellow			9.60	93.4	30	30

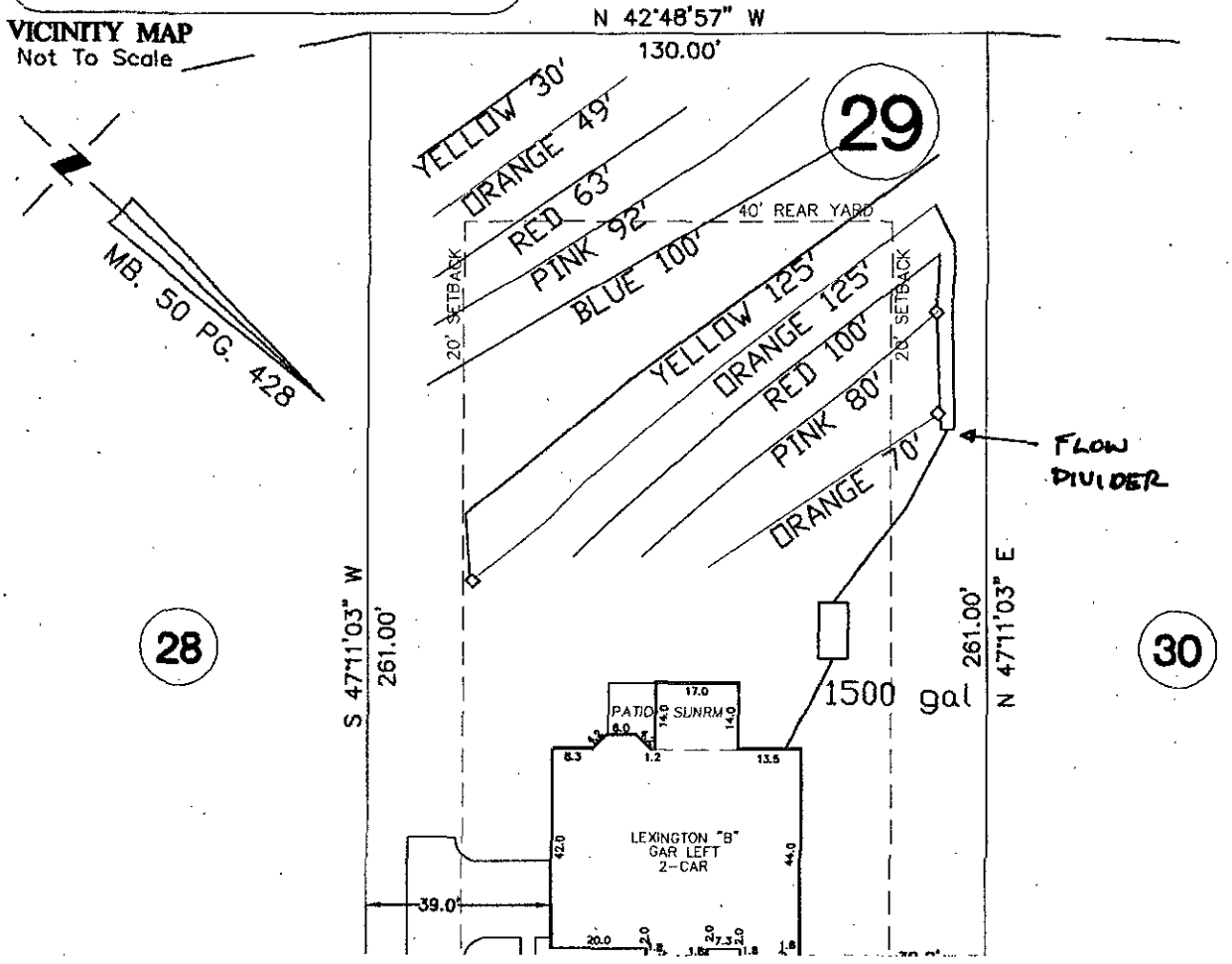
	LINE LENGTH	LTAR GPD/FT	SYSTEM TYPE	REDUCTION TYPE	DIST.
SYSTEM	500	0.300	INNOV	25%	GRAVITY
REPAIR	334	0.300	PPBPS	50%	GRAVITY

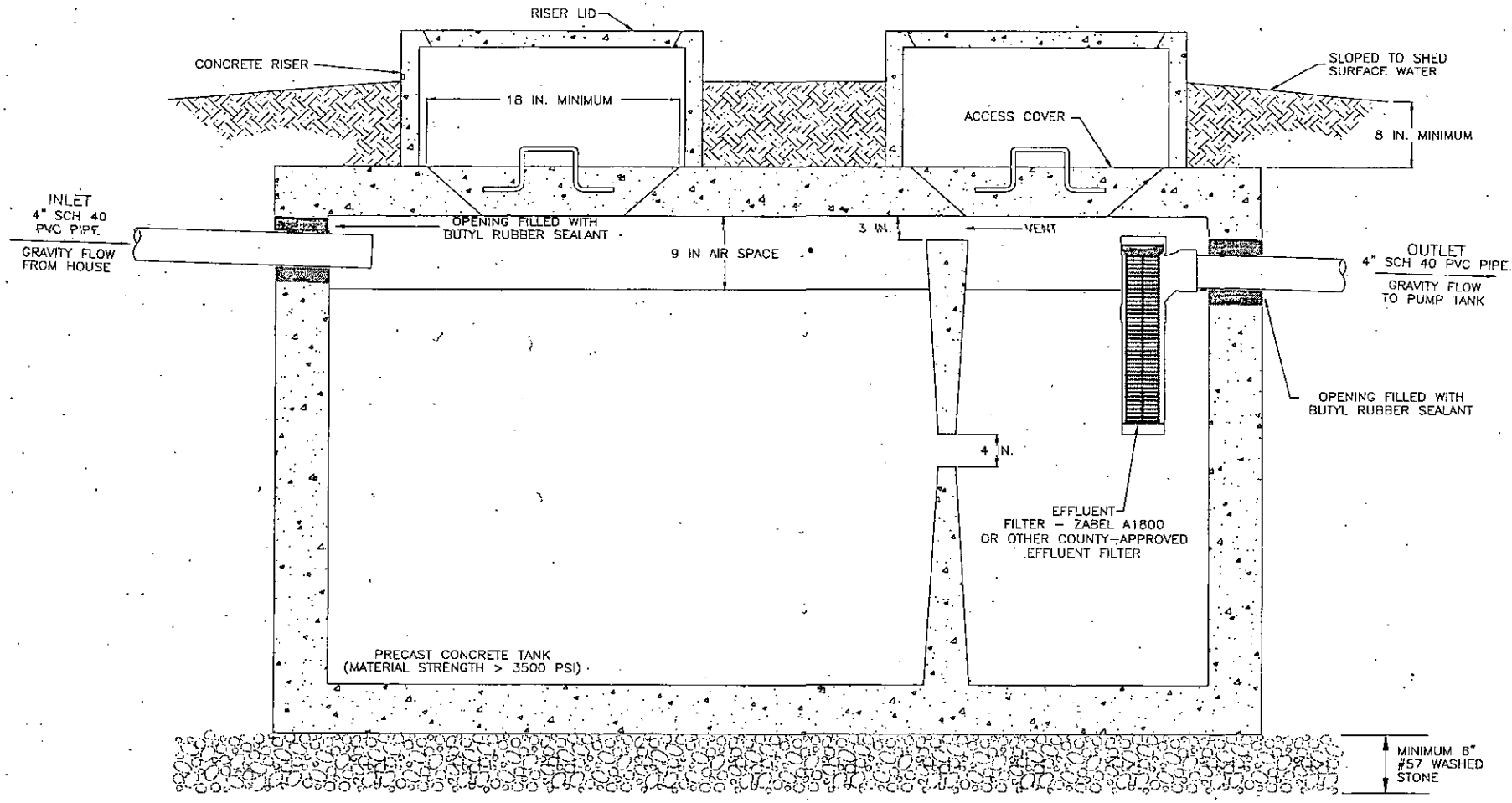
Notes:

** TBM located at btm of back right house stake
**TBM is assumed to be 100'
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags
**BS and FS indicate rod readings



VICINITY MAP
Not To Scale





NOTES

1. TANK DIMENSIONS VARY BY MANUFACTURER.

1500 GALLON SEPTIC TANK

PROJECT NO	PROJECT NAME:
PROJECT MGR.	
SCALE: NTS	SHEET TITLE: SEPTIC TANK DIAGRAM

S&EC
Soil & Environmental Consultants, Inc.
11010 Raven Ridge Road Raleigh, North Carolina 27614 Phone: (919) 846-5900 Fax: (919) 846-9467
Web Page: www.SandEC.com

(5) Ashes, garbage, and trash shall be kept out of the pit.

History Note: *Authority G.S. 130A-335(e) and (f);*
Eff. July 1, 1982;
Amended Eff. January 1, 1990.

15A NCAC 18A .1961 MAINTENANCE OF SEWAGE SYSTEMS

(a) Any person owning or controlling the property upon which a ground absorption sewage treatment and disposal system is installed shall be responsible for the following items regarding the maintenance of the system:

(1) Ground absorption sewage treatment and disposal systems shall be operated and maintained to prevent the following conditions:

(A) a discharge of sewage or effluent to the surface of the ground, the surface waters, or directly into groundwater at any time; or

(B) a back-up of sewage or effluent into the facility, building drains, collection system, or freeboard volume of the tanks; or

(C) a free liquid surface within three inches of finished grade over the nitrification trench for two or more observations made not less than 24 hours apart. Observations shall be made greater than 24 hours after a rainfall event.

The system shall be considered to be malfunctioning when it fails to meet one or more of these requirements, either continuously or intermittently, or if it is necessary to remove the contents of the tank(s) at a frequency greater than once per month in order to satisfy the conditions of Parts (A), (B), or (C) of this Paragraph. Legal remedies may be pursued after an authorized agent has observed and documented one or more of the malfunctioning conditions and has issued a notice of violation.

(2) 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.

(b) System management in accordance with Tables V(a) and V(b) of this Rule shall be required for all systems installed or repaired after July 1, 1992. After July 1, 1992, system management in accordance with Tables V(a) and V(b) shall be required for all existing Type V and Type VI systems.

(c) No Improvement Permit or Construction Authorization shall be issued for Type IV, Type V, or Type VI systems, unless a management entity of the type specified in Table V(b) is specifically authorized, funded, and operational to carry out this management program in the service area where the proposed system is to be located.

(d) A local health department may be the public management entity only for systems classified Type IV, V(a) and V(b) and only when specifically authorized by resolution of the local board of health.

(e) A contract shall be executed between the system owner and a management entity prior to the issuance of an Operation Permit for a system required to be maintained by a public or private management entity, unless the system owner and certified operator are the same. The contract shall include the specific requirements for maintenance and operation, responsibilities of the owner and system operator, provisions that the contract shall be in effect for as long as the system is in use; and other requirements for the continued proper performance of the system. It shall also be a condition of the Operation Permit that subsequent owners of the system execute such a contract.

(f) Inspections of the system shall be performed by a management entity at the frequency specified in Table V(b). The management entity shall report the results of their inspections to the local health department at the specified reporting frequency. However, where inspections indicate the need for system repairs, the management entity shall notify the local health department within 48 hours in order to obtain a Construction Authorization for the repairs.

(g) The management entity shall be responsible for assuring routine maintenance procedures and monitoring requirements in accordance with the conditions of the Operation Permit and the contract.

(h) Sewage systems with multiple components shall be classified by their highest or most complex system type in accordance with Table V to determine local health department and management entity responsibilities.

(i) Sewage systems not identified in this Rule shall be classified by the Division of Environmental Health after consultation with the appropriate commission governing operators of pollution control facilities.

(j) The local health department shall routinely review the performance and operation reports submitted in accordance with Table V(b) of this Rule and shall perform an on-site inspection of the systems as required in Table V(a).

(k) The certified operator shall hold a valid and current certificate from the appropriate commission, and nothing in this Section shall preclude any requirements for system operators, in accordance with Article 3 of G.S. 90A.

TABLE V(a)

LOCAL HEALTH DEPARTMENT RESPONSIBILITIES

System Classification	System Description	Permits Required	Minimum System Review Frequency
Type I	a. Privy b. Chemical toilet c. Incinerating toilet d. Other toilet system e. Grease trap	Improvement Permit, Construction Authorization, and Operation Permit	N/A
Type II	a. Conventional septic system (single-family or 480 GPD or less) b. Conventional septic system with 750 linear feet of nitrification line or less c. Conventional system with shallow placement	Improvement Permit, Construction Authorization, and Operation Permit	N/A
Type III	a. Conventional septic system > 480 GPD (excluding single-family residence) b. Septic system with single effluent pump or siphon c. Gravity fill system d. Dual gravity field system e. PPBPS system, gravity dosed f. Large diameter pipe system g. Other non-conventional trench systems	Improvement Permit, Construction Authorization, and Operation Permit	5 yrs. (IIIb only)
Type IV	a. Any system with LPP distribution b. System with more than 1 pump or siphon	Improvement Permit, Construction Authorization, and Operation Permit	3 yrs.
Type V	a. Sand filter pretreatment system b. Any > 3,000-GPD septic tank system with a nitrification field designed for > 1500 GPD c. Aerobic Treatment Unit (ATU) d. Other mechanical, biological, or chemical pretreatment plant (< 3000 GPD)	Improvement Permit, Construction Authorization, and Operation Permit	12 mos.

Type VI	a. Any > 3,000 GPD system with mechanical, biological, or chemical pretreatment system plant b. Wastewater reuse/recycle	Improvement Permit, Construction Authorization, and Operation Permit	6 mos.

TABLE V(b)

MANAGEMENT ENTITY RESPONSIBILITIES

System Classification	Management Entity	Minimum System Inspection/Maintenance Frequency	Reporting Frequency
Type I	Owner	N/A	N/A
Type II	Owner	N/A	N/A
Type III	Owner	N/A	N/A
Type IV	Public Management Entity with a Certified Operator or a private Certified Operator	2/yr.	12 mos.
Type V	Public Management Entity With a Certified Operator or a private Certified Operator	a. 2/yr (0-1500 GPD) 4/yr (1500-3000 GPD) 12/yr (3000-10000 GPD) 1/wk (> 10000 GPD) b. 12/yr (3000-10000 GPD) 1/wk (> 10000 GPD) c. 4/yr. d. 12/yr.	6 mos.
Type VI	Public Management Entity With a Certified Operator	a. 1/wk(3000-10000 GPD) 2/wk(10000-25000 GPD) 3/wk(25000-50000 GPD) 5/wk(> 75000 GPD) b. 12/yr.	3 mos.

(l) A sewage collection, treatment, and disposal system that creates or has created a public health hazard or nuisance by surfacing of effluent or discharge directly into groundwater or surface waters, or that is partially or totally destroyed shall be repaired within 30 days of notification by the state or local health department unless the notification otherwise specifies a repair period in writing. If a system described in the preceding sentence has for any reason been disconnected, the system shall be repaired prior to reuse. The state or local health department shall use its best professional judgement in requiring repairs that will reasonably enable the system to function properly. If, for any reason, a sewage collection, treatment, and disposal system is found to be nonrepairable, or is no longer required, the system shall not be used, and may be required to have any contents removed, collapse any components and backfill, or otherwise secured as directed by the authorized agent to protect the public health and safety.

(m) When necessary to protect the public health, the state or local health department may require the owner or controller of a malfunctioning system to pump and haul sewage to an approved wastewater system during the time needed to repair the system.

Pmp. 324 992

7910B

MECKLENBURG COUNTY HEALTH DEPARTMENT

App # 5489

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: 19502253

STREET ADDRESS: 13148 Belle Grove Manor Ln

CITY: Mint Hill

STATE: NC ZIP: 28105

SUBDIVISION NAME: Belle Grove Manor

LOT #: 29 LOT SIZE (acres): .27

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: 3959

NUMBER OF BEDROOMS: 5

NUMBER OF OCCUPANTS: _____

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:** 2 1 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: Essex Homes Southeast Inc.
ADDRESS: 13510 South Ridge Dr. Suite A
CITY: Charlotte
STATE: N.C ZIP: 28273
WORK PHONE: 704-423-8988
MOBILE PHONE: _____
FAX: 980-225-8996
E-MAIL: Slatt@essexhomes.net

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

NAME: Susan Latt
ADDRESS: _____
CITY: _____
STATE: _____ ZIP: _____
WORK PHONE: _____
MOBILE PHONE: _____
FAX: _____
E-MAIL: _____

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.

SL (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.

SL (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.

Jason Lall
Property Owner's or Owner's Legal Representative Signature

3/6/12
Date

OFFICE USE ONLY

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

SEPTIC APPLICATION FEE RECEIVED: $ 250.00 DATE FEE RECEIVED: 3/6/12

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

APPLICATION PROCESSED BY: lws

GWS FILE NUMBER ASSIGNED: 7910 B

APPLICATION ID NUMBER ASSIGNED: 5489

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

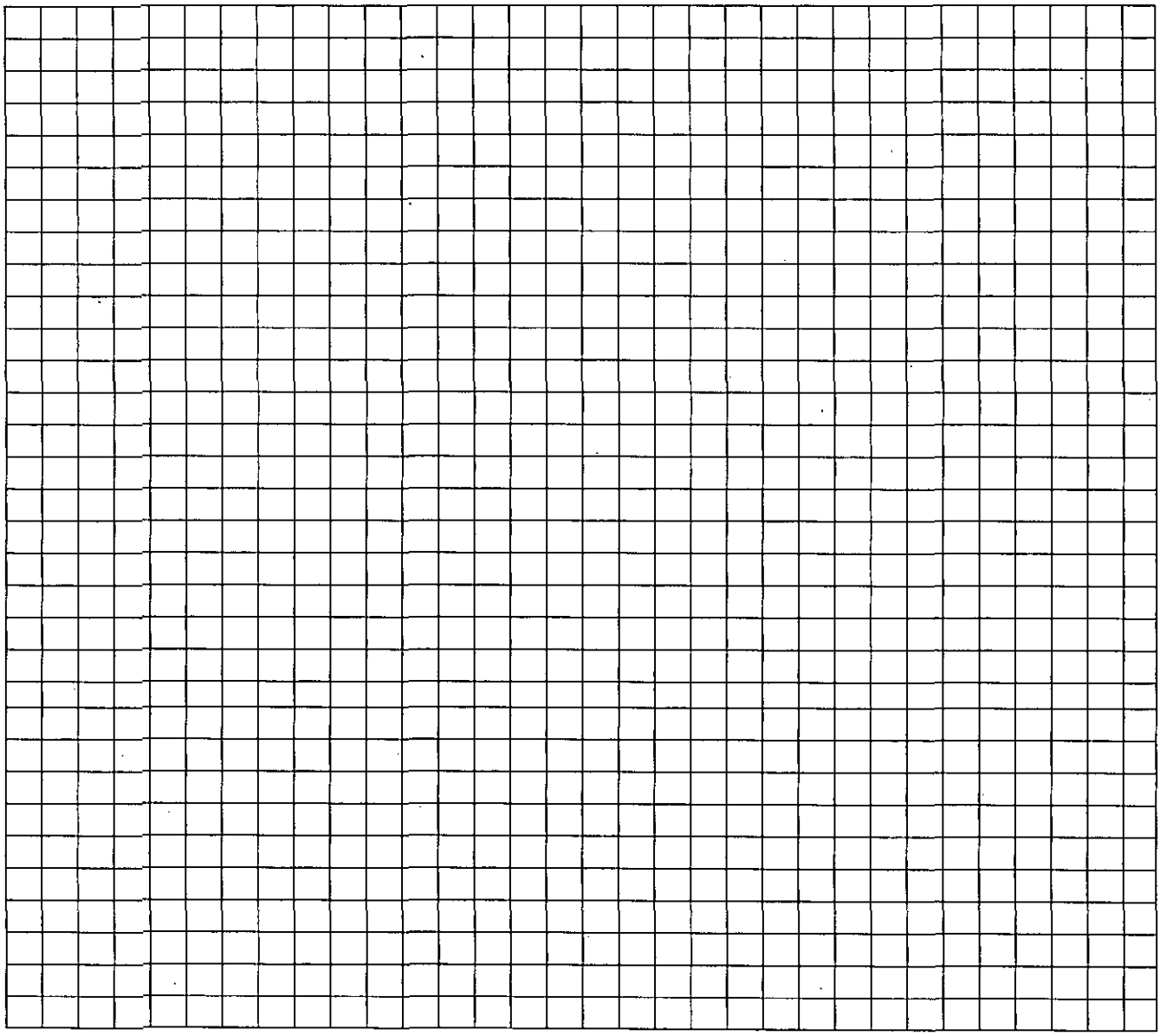
File #: _____

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: _____ Tax Parcel #: _____

Subdivision Name: _____ Lot #: _____

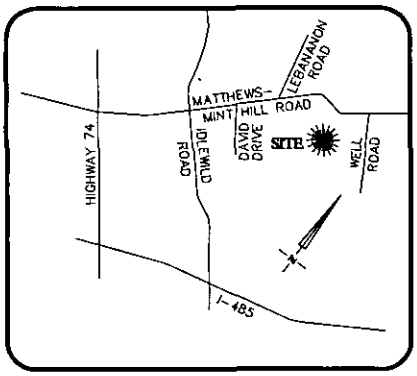


_____ _____

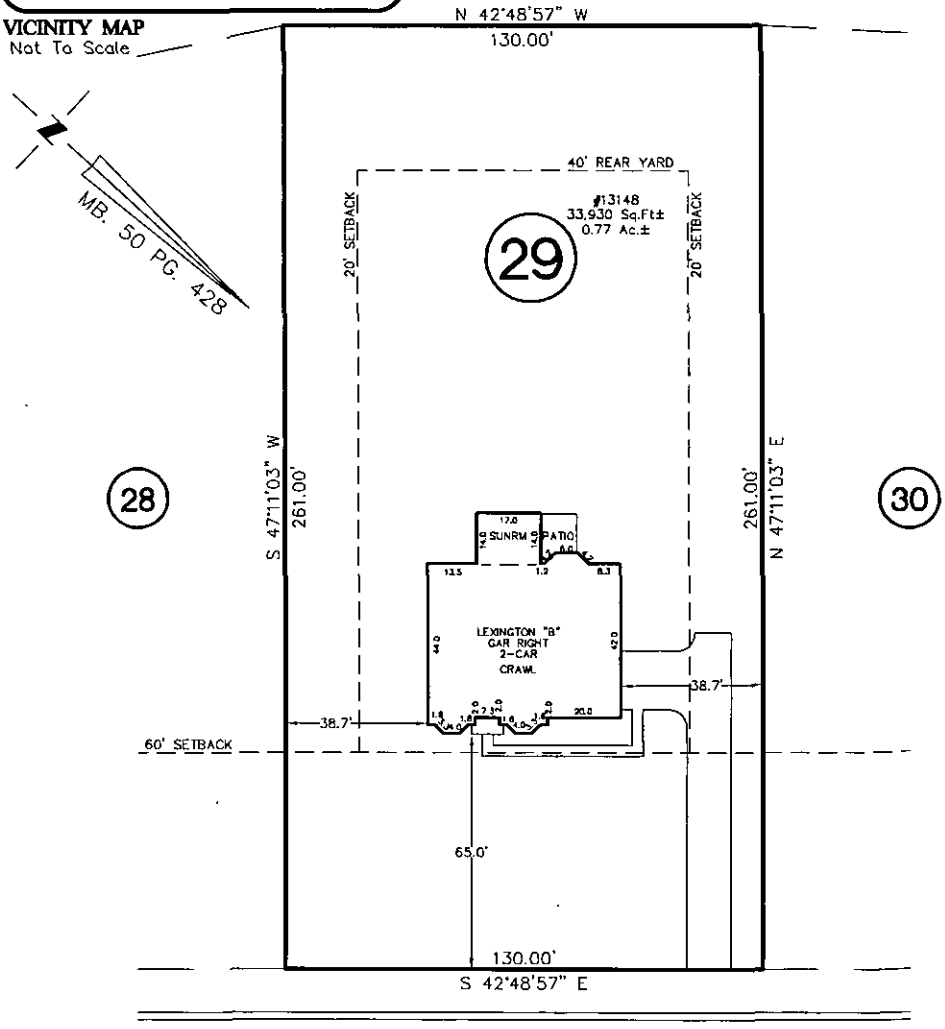
Property Owner's or Owner's Legal Representative Signature Date

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



VICINITY MAP
Not To Scale



BELLE GROVE MANOR LANE

60' PUBLIC R/W

NOTE:
1. BUILDER ASSUMES RESPONSIBILITY FOR GRADING LOT AND/OR DESIGNING STEPS, PORCHES, DECKS, ETC. AS NECESSARY TO PREVENT ENCROACHMENT INTO SETBACKS.
2. HOUSE DIMENSIONS AND OPTIONS SHOULD BE VERIFIED WITH CONTRACTOR PRIOR TO CONSTRUCTION.
3. SETBACKS/ EASEMENTS SHOULD BE VERIFIED WITH DEVELOPER AND LOCAL OFFICIALS PRIOR TO CONSTRUCTION.
4. THIS IS A CONCEPTUAL DRAWING AND CONTENTS SHOWN HEREON ARE SUBJECT TO CHANGE UPON FINAL CONSTRUCTION.
THIS PROPERTY MAY BE SUBJECT TO ANY AND ALL APPLICABLE DEED RESTRICTIONS, EASEMENTS, RIGHT-OF-WAY, UTILITIES AND RESTRICTIVE COVENANTS WHICH MAY BE OF RECORD OR IMPLIED

THIS DRAWING DOES NOT REFLECT AS-BUILT INFORMATION

PRELIMINARY PLAT
NOT FOR RECORDATION, CONVEYANCES, OR SALES.

40 0 40
SCALE: 1" = 40'

EASTOVER
LAND SURVEYING COMPANY, P.A.
LAND SURVEYORS – PLANNERS – (C-1833)
600 TOWNE CENTRE BOULEVARD, SUITE #309
PINEVILLE, NORTH CAROLINA 28134
PHONE (704) 927-8080
FAX (704) 521-1078

HOUSE LOCATION PLOT PLAN

FOR

LOT 29, BELLE GROVE MANOR PHASE 1 MAP 2
Town of Mint Hill, Mecklenburg County, North Carolina

PROPERTY OF: ESSEX HOMES

MAP BOOK 50 PAGE 428 DEED REFERENCE

DRAWN BY: MJA

DATE: FEBRUARY 9, 2012

Supervisor/Administrative Professional Checklist

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

New Septic Fees Paid:

IP ($250.00) JAM 8-17-2012 Initials/Date

CA ($200.00) lws 1/16/13 Initials/Date

OP ($200.00) lws 1/16/13 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

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. ☑ 1/9/13

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

Certified operator contract is on file. ☐ _____

Groundwater & Wastewater Services
Septic Project File & Data Review Worksheet

GWS File #: 7910B WASPS App #: 5489

Primary ES assigned to project: Jeremy Michael

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: 5			
	Were sufficient auger borings made?	Yes ☑	No ☐	N/A ☐
.1939(d), .1955, .1956, .1957	LTAR 0.3	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: 8-9-12

OP issued date: 8-16-12

Review performed by: JAM Date performed: 4-4-12

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 #: 30005489 GWS File #: 7910B Tax Parcel #: 196-022-63

- 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):** 4/4/2017

Type of Installation: Residential - New System Lot Number: 29

Structure Type: HOUSE Size (ft^2): 3959 # Bedrooms: 5 # Occupants: 2

Building Foundation: Crawl Space Water Supply: Municipal

II. Initial System Type: Approved **System Classification:** IIIg

Initial System Specifications:

Design Flow (gpd): 600 LTAR (gpd/ft^2): 0.3 Septic Tank Size (gal): 1500 Pump Tank Size (gal): N/A

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: Drop Boxes

III. Repair System Type: PPBPS (gravity) **System Classification:** IIIe

Repair System Specifications:

Design Flow (gpd): 600 LTAR (gpd/ft^2): 0.3 Septic Tank Size (gal): 1500 Pump Tank Size (gal): N/A

Trench Width (ft): 3 Trench Spacing (ft): 9 Absorption Area (ft^2): 1000 Total Trench Length (ft): 339

Maximum Trench Depth (in): 36 Depth of Media (in): N/A Distribution Device: Drop Boxes

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 Michael

Signature: Jeremy Michael REHS

Date Issued: 4/4/2012

Owner/Legal Agent: Susan Latt
Print Name

Signature: Susan Latt

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 #: 30006489 GWS File #: 7910B

IV. Permit Conditions/Comments:

- The septic system shall be installed in accordance with the plans submitted by the wastewater system design consultant.
- All components of the septic system must be installed in accordance with the required setbacks listed on the corresponding plot plan.
- All waterlines must be located a minimum of 10 ft. from any part of the septic system.
- 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 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 Michael

Signature: Jeremy Michael EEHS

Date Issued: 4/4/2012

Owner/Legal Agent: Susan Lott
Print Name

Signature: Susan Lott

FEE: 200.00

DATE: 1/16/2013

CONSTRUCTION AUTHORIZATION FOR AN ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

MECKLENBURG COUNTY

GROUNDWATER & WASTEWATER SERVICES

FILE NUMBER: 7910B

PERMIT NUMBER: 30005489

PARCEL NUMBER: 19502253

JOB LOCATION INFORMATION

ADDRESS: 13148 BELLE GROVE MANOR LN

CITY: MATTHEWS **STATE: NC** **ZIP:** 28105

ISSUED TO: Essex Homes Southeast Inc

CONSTRUCTION AUTHORIZATION ISSUANCE DATE: 4/4/2012

CONSTRUCTION AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 30005489, 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 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 THE 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 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, NOT TO EXCEED 60 MONTHS.
   *CONSTRUCTION AUTHORIZATION EXPIRATION DATE: 4/4/2017

Essex Homes — The Lexington – 3,908+/- - 4,079+/- square feet / 5 bedrooms / 3 baths

Essex Homes Designer

With our home designer, you can view the many elevation and floorplan options available. Just click on any of the options to see it added to the floorplan.

The Lexington

❶ Start by selecting Elevations or Floorplans

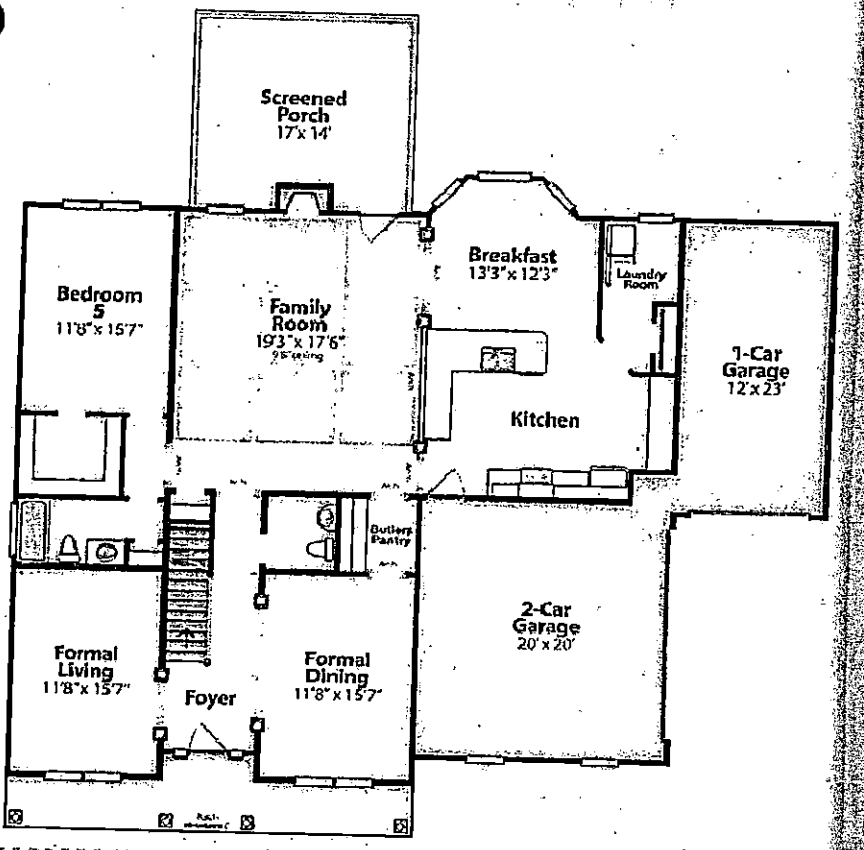
Elevations **Floorplans**

❷ Next, choose the floorplan level you would like to configure.

First Floor Second Floor

❸ Select from the available options. *Please note that some options exclude others, and some options are not available in all areas.

- ☑ 240 sf screened porch
- ▸☐ 240 sf sunroom
- ☑ Optional bath
- ☐ Powder room
- ☑ Butler's pantry
- ☑ Pantry in laundry
- ☑ Kitchen bench seat
- ▸☐ Optional guest suite
- ☑ Alternate bath
- ☐ Optional window
- ☐ 2nd opt. window
- ☑ Side-load garage
- ☑ 3-Car garage
- ▸☐ Porch (elev. A)
- ▸☐ Porch (elev. B)
- ☑ Porch (elev. C)
- ▸☐ Porch (elev. D)



Instructions | Print Window | Reset Page

All information contained in this website is deemed reliable but not guaranteed. All illustrations are artist's depictions only and are not meant to be exact and do not show accurate details as they will appear on the finished product. All dimensions are approximate only and may differ from the actual home. Contact Essex Homes for more information. Elevations & floorplans may be shown with optional brick and/or other upgrades. All elevations and plans may not be available in all communities. See on-site agent for details.

crafted by lenker.

www.essexhomes.net

The Lexington – 3,908+/- 4,079+/- square feet / 5 bedrooms / 3 baths

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The Lexington

❶ Start by selecting Elevations or Floorplans

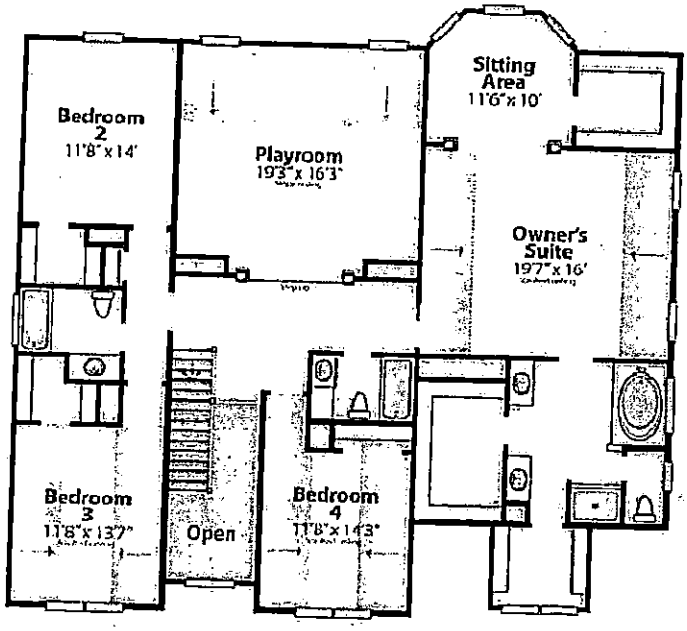
Elevations **Floorplans**

❷ Next, choose the floorplan level you would like to configure.

First Floor **Second Floor**

❸ Select from the available options. *Please note that some options exclude others, and some options are not available in all areas.

- ☐ Bedroom #6
- ☐ Bedroom #6 with bath
- ☑ Optional bath
- ☐ Optional window
- ☐ 2nd opt. window
- ☑ Dormer (elev. C)
- ☐ Dormer (elev. D)
- ☐ Optional 2nd owner's suite
- ☑ Whirlpool tub



Instructions **Print Window**

All information contained in this website is deemed reliable but not guaranteed. All illustrations are artist's depictions only and are not meant to be exact and do not show accurate details as they will appear on the finished product. All dimensions are approximate only and may differ from the actual home. Contact Essex Homes for more information. Elevations & floorplans may be shown with optional brick and/or other upgrades. All elevations and plans may not be available in all communities. See on-site agent for details.

crafted by lenker.

www.essexhomes.net

7910B

MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES

3842

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: 19502253
STREET ADDRESS: 13148 BELLE GROVE MANOR LN
CITY: Mint Hill
STATE: NC ZIP: 28227
SUBDIVISION NAME: Belle Grove Manor
LOT #: 29 LOT SIZE (acres): 0.78 ac
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: 4000 ±
NUMBER OF BEDROOMS: 4
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: _____ 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: ____ ____ ____ ____ ____

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: Nottaway Plantation, LLC
ADDRESS: 8041 Corporate Center Dr. suite 200
CITY: Charlotte
STATE: NC ZIP: 28226
HOME PHONE: ——
WORK PHONE: (704) 540-4706
MOBILE PHONE: (704) 578-7801
FAX: (704) 540-4708

13. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:
NAME:
ADDRESS:
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

OID APPLICATION

JAM 4-4-12

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.

AMG (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.

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: $ 250.00 CHK 1053 DATE FEE RECEIVED: 8/25/08

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

APPLICATION PROCESSED BY: JC

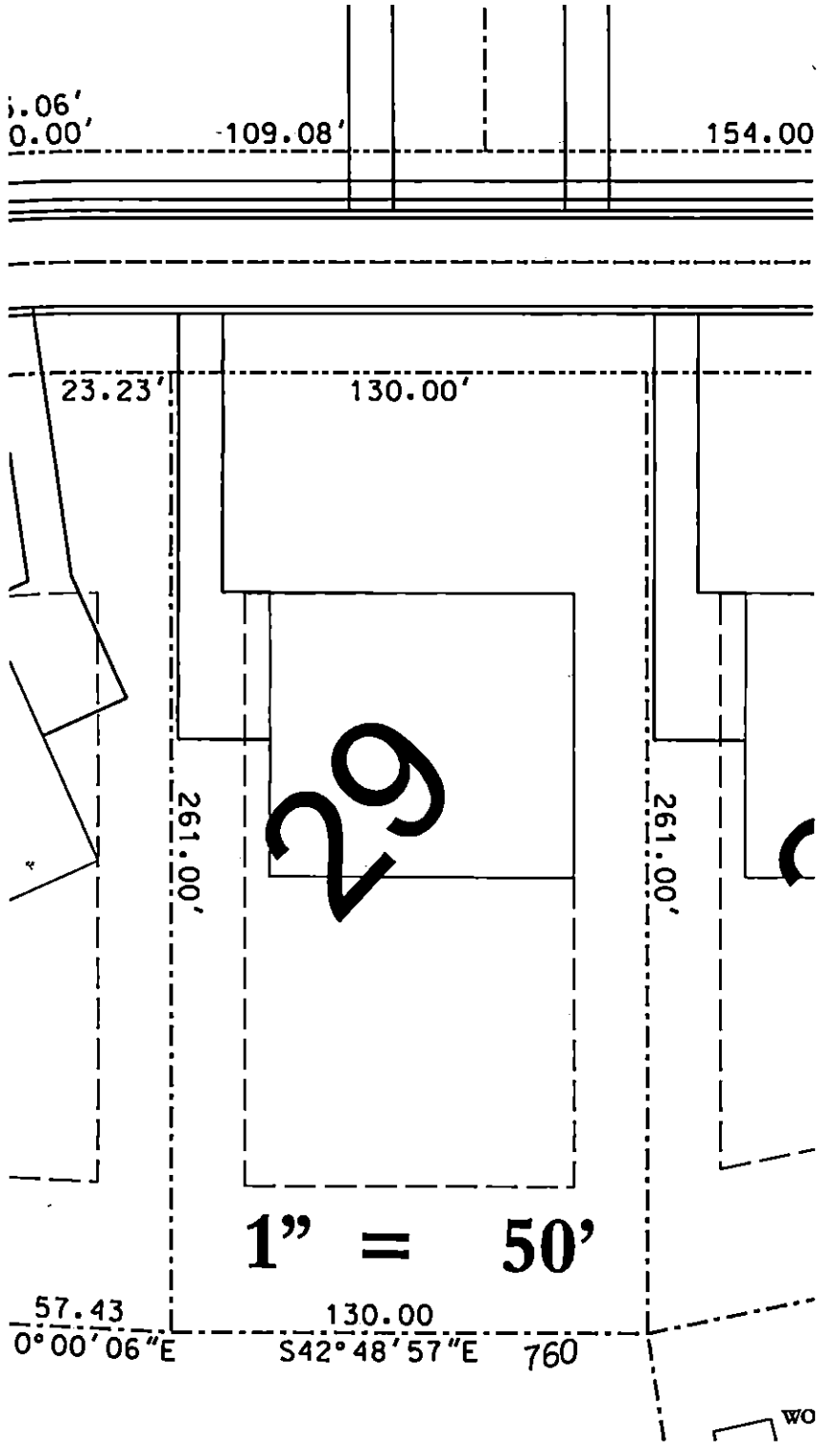
GWS FILE NUMBER ASSIGNED: 7910B

APPLICATION ID NUMBER ASSIGNED: 3842

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


.06'
0.00'
109.08'
154.00
23.23'
130.00'
29
261.00'
261.00'
1" = 50'
57.43
0°00'06"E
130.00
S42°48'57"E
760
WO

#200810688 1 MAP BOOK 50 PAGE 428

Approved in accordance with the provisions of the Subdivision Ordinance of the Town of Mint Hill, North Carolina.

MINT HILL PLANNING BOARD
William A Long
Planning Board Chairman
Date

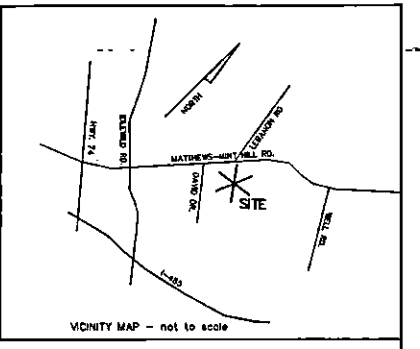
APPROVED IN ACCORDANCE WITH THE ENGINEERING REQUIREMENTS OF THE SUBDIVISION ORDINANCE OF MECKLENBURG COUNTY, NORTH CAROLINA. (MINT HILL, NC)

MECKLENBURG COUNTY ENGINEERING DEPARTMENT
Day Nyberg 6/13/08
ENGINEERING STAFF DATE

I, Karen H. Dunn, Review Officer of Mecklenburg County, certify that the map or plat to which this certification is affixed meets all statutory requirements for recording.
Karen H. Dunn 6/16/08
Review Officer Date

CERTIFIED TO BE A TRUE AND CORRECT COPY OF THE ORIGINAL MAP RECORDED IN BOOK 50 PAGE(S) 428 - 429
DATE: 6/18/08
JUDITHA GIBSON, REGISTER OF DEEDS
BY: DEPUTY

JUDITH A. GIBSON REGISTER OF DEEDS MECKLENBURG COUNTY, N.C.



VICINITY MAP – not to scale

OLD PIPE (F)
DONALD A. PRICE ET AL
DB 2826 PG 141
TAX ID: 195-021-16
S 43°12'32" E 822.42'
TIE LINE
CONTROL CORNER
NOTTAWAY PLACE DRIVE
PUBLIC ROAD 60' R/W
BELLE GROVE MANOR LANE
BELLE GROVE MANOR PHASE 1 MAP 1 MB 49 PG 703
TERRY P. GILMORE ET AL
DB 6584 PG 536
TAX ID: 195-021-21
RALPH A. MULLIS
DB 5832 PG 701
TAX ID: 195-021-25
WILLIAM A. CAMPBELL ET AL
DB 4362 PG 670
TAX ID: 195-021-20
JULIAN J. CORNWELL
DB 2379 PG 53
TAX ID: 195-201-01
BELLE GROVE MANOR PHASE 1 MAP 1 MB 49 PG 703
BELLE GROVE MANOR LANE PUBLIC ROAD 60' R/W
NOTTAWAY PLACE DRIVE PUBLIC ROAD 60' R/W
MATCHEZ LANE PUBLIC ROAD 60' R/W
NOTTAWAY PLANTATION LLC
DB 23028 PGS 322, 326, 330
(FUTURE DEVELOPMENT)
REBAR (F)
CONTROL CORNER
DISTURBED OLD PIPE (F)
TIE LINE
N 53°35'38" W 487.61'
S 36°57'14" W 239.15'
N 53°35'38" W 241.35'
S 53°35'38" E 118.63'
S 43°08'21" E 129.57'
S 43°12'32" E 118.84'
N 24°03'37" E 253.88'
N 47°11'03" E 200.17'
S 42°48'57" E 154.00'
N 47°11'03" E 201.89'
S 42°48'57" E 203.99'
N 47°11'03" E 203.73'
N 42°48'57" W 130.00'
N 54°30'01" W 132.75'
N 42°48'57" W 260.00'
N 49°13'41" W 235.20'
N 51°14'44" W 166.47'
S 38°59'39" E 164.66'
N 38°59'39" W 164.96'
S 47°11'03" W 200.17'
S 42°48'57" E 154.00'
S 47°11'03" W 200.17'
S 42°48'57" E 154.00'
S 47°11'03" W 200.17'
S 42°48'57" E 154.00'
S 47°11'03" W 200.17'
N 42°48'57" W 130.00'
S 47°11'03" W 234.12'
N 42°48'57" W 130.00'
S 47°11'03" W 234.12'
N 42°48'57" W 130.00'
S 47°11'03" W 234.12'
N 42°48'57" W 130.00'
S 47°11'03" W 234.12'
N 77°08'24" E 126.54'
N 77°08'33" W 130.00'
N 12°51'27" E 216.00'
N 12°51'27" E 240.99'
S 77°08'24" E 105.00'
N 47°11'03" E 202.33'
N 47°11'03" E 200.17'
N 47°11'03" E 200.17'
N 47°11'03" E 201.89'
N 47°11'03" E 203.73'
S 47°11'03" W 234.12'
S 47°11'03" W 234.12'
S 47°11'03" W 234.12

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

Sheet: 7901B
Property ID: 195-022-53
Lot #: 29
File #: 7910B
AppID: 3842

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Nottaway Plantation LLC
Applicant:
Address: 8041 Corporate Center Drive, Ste 200, Charlotte, N. C. 28226
Date Evaluated: 9/30/08
Proposed Facility: Residence Design Flow (.1949) 480gpd
Property Size: .78a
Location of Site: 13148 Belle Grove Manor Lane
Property Recorded:
Water Supply: [x] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [x] Auger Boring [ ] 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 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS, 8	0-8	GR/SCL	FR/SEXP/SS/SP	>34" TO SOIL WETNESS	34+	N/A	NONE	US
		8-29	SBK/ABK/C	FI/SEXP/S/P					
		29-34	SBK/ABK/C	"					
		SOME	PLATY	29-34"					
2	"	0-6	GR/SCL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48+	"	"	PS, IV .275GPD/FT^2
		6-48	SBK/ABK/C	FI/SEXP/S/P					
3	LS, 5	0-5	GR/SCL	FR/SEXP/SS/SP	"	"	"	"	"
		5-48	SBK/ABK/C	FI/SEXP/S/P					
4	"	0-6	GR/SCL	FR/SEXP/SS/SP	"	"	"	"	"
		6-48	SBK/ABK/C	FI/SEXP/S/P					
5	"	0-4	GR/SCL	FR/SEXP/SS/SP	"	"	"	"	"
		4-48	SBK/ABK/C	FI/SEXP/S/P					
6	"	0-4	GR/SCL	FR/SEXP/SS/SP	"	"	"	"	"
		4-37	SBK/ABK/C	FI/SEXP/S/P					
		37-48	SBK/CL	FR/SEXP/SS/SP					
					SITE LTAR .275GPD/FT^2				

Description	Initial System	Repair System
Available Space (.1945)		
System Type(s)		
Site LTAR		

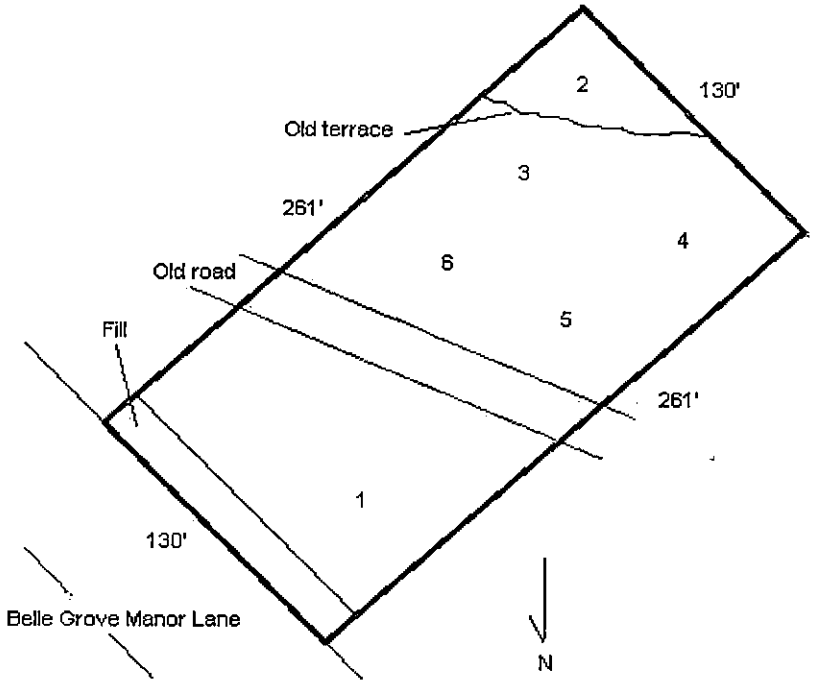
Other Factors (.1946):
Soil Evaluation By: W. R. Marlin, LSS, 10/1/08. W. R. Marlin
Others Present:
Site Classification (.1948):
Site Evaluation By:
Others Present:

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



MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	03/06/12	**Amount:**	250.00
Receipt #:	77417	**Tendered:**	250.00
Check / Auth #:	CHECK 2927	**Returned:**	0.00
Received By:	SADERLW		

Account Information

Account #: 200000
Contractor: ESSEX HOMES SOUTHEAST INC
Attn:
Address: 120 CROMER RD
Address:
City/State/Zip: LEXINGTON, SC 29073

Item	Description	Permit#	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 13148 BELLE GROVE MANOR LN		1	250.00	250.00

----------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: 01/16/13
Receipt #: 81230
Check / Auth #: CHECK 2982
Received By: SADERLW

Amount: 200.00
Tendered: 200.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: ESSEX HOMES SOUTHEAST INC
Attn:
Address: 120 CROMER RD
Address:
City/State/Zip: LEXINGTON, SC 29073

Item	Description	Permit#	Quantity	Unit Price	Total Price
0703	Installation/Final Approval 13148 BELLE GROVE, LOT 29		1	200.00	200.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
365.00	370.00	10.00	812.15		

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	01/16/13	**Amount:**	200.00
Receipt #:	81229	**Tendered:**	200.00
Check / Auth #:	CHECK 2982	**Returned:**	0.00
Received By:	SADERLW		

Account Information

Account #: 200000
Contractor: ESSEX HOMES SOUTHEAST INC
Attn:
Address: 120 CROMER RD
Address:
City/State/Zip: LEXINGTON, SC 29073

Item	Description	Permit#	Quantity	Unit Price	Total Price
0734	Auth for Waste Wtr Sys Constr 13148 BELLE GROVE, LOT 29		1	200.00	200.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
365.00	370.00	10.00	812.15		

Essex Homes Southeast, Inc

MECKSEPT MECKLENBURG CTY-GROUNDWATER &

DATE	INVOICE NO	DESCRIPTION	INVOICE AMOUNT	DEDUCTION	BALANCE
010913		W/S Permit - BLG 29	400.00		400.00

CHECK DATE	1-09-13	CHECK NUMBER	2982905	TOTAL >	400.00		400.00

PLEASE DETACH AND RETAIN FOR YOUR RECORDS