SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

☐ NEW SEPTIC ☐ REPAIR ☒ USE EXISTING ☐ MODIFIED PLOT PLAN ☐ ALTERATION

File Number: 20160

Assigned Inspector: Bryan D.

☐ IP $250.00: _____ Initial/Date

☐ IP Commercial $450.00: _____ Initial/Date

☐ CA & OP $400.00: _____ Initial/Date

☐ Alteration Fees $300: _____ Initial/Date

☐ Modified Plot Plan Fees $100.00: _____ Initial/Date

☒ Use Existing Fees $100.00: MRO 8/24/23 Initial/Date

☑ Use Existing Approved ☐ Use Existing Denied

☐ Send IP permit for signature: _____ ☐ Signature received: _____

☐ Floor plans reviewed

☐ Generate CA ☐ Approve as Noted in Winchester

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

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

☐ Certified operator contract is on file: _____

☐ Septic file complete: _____

☐ Release final hold in Winchester: _____

Comments:

23 AUG '23 PM 8:37

20680 / 14084

MECKLENBURG COUNTY
HEALTH DEPARTMENT

APPLICATION FOR APPROVAL TO USE AN EXISTING
ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM / WATER SUPPLY WELL

APPLICATION TYPE: ○ SEPTIC ONLY ○ WELL ONLY ● SEPTIC & WELL
○ ADDITION OR RENOVATION WITH OCCUPANCY INCREASE ○ EXCHANGE MOBILE HOME (SAME # BEDROOMS)
● ADDITION OR RENOVATION WITH NO OCCUPANCY INCREASE ○ COMMERCIAL OR INDUSTRIAL

PERSON FILING APPLICATION:
NAME: DECK PLUS LLC
ADDRESS: 2225 CORONATION BLVD
CITY: CHARLOTTE
STATE: NC ZIP: 28227
PHONE: 704-993-7696
ALTERNATE PHONE:
E-MAIL: DECKPLUSLLC@GMAIL.COM

PROPERTY OWNER: ☐ SAME AS PERSON FILING APPLICATION
NAME: JEFFREY POTTON
ADDRESS: 741 AMANDA DR
CITY: MATTHEWS
STATE: NC ZIP: 28104
PHONE: 919-215-1973
ALTERNATE PHONE:
E-MAIL:

JOB LOCATION INFORMATION
TAX PARCEL #: 231-111-23
STREET ADDRESS: 741 AMANDA DRIVE
CITY: MATTHEWS
STATE: NC ZIP: 28104

SUBDIVISION OR MOBILE HOME PARK NAME: PROVIDENCE WOODS
LOT #: 6

WATER SUPPLY:
● MUNICIPAL ○ PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER City of Charlotte

RESIDENTIAL PROPERTY TYPE: ○ N/A
● HOUSE ○ MODULAR HOME ○ MULTIPLE FAMILY
○ SINGLE MOBILE HOME ○ DOUBLE WIDE
○ OTHER

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 3

COMMERCIAL / INDUSTRIAL PROPERTY TYPE: ☐ N/A
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:

INDUSTRIAL WASTES? ○ YES ○ NO
UNDERGROUND STORAGE TANKS? ○ YES ○ NO

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:
☐ BEDROOM ☐ BATHROOM ☐ KITCHEN ☐ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☐ SUNROOM ☒ PORCH ☐ DECK ☐ OTHER

ADDITION/RENOVATION TYPE DETACHED FROM EXISTING STRUCTURE:
☐ DETACHED GARAGE ☐ DETACHED GARAGE WITH PLUMBING ☐ POOL HOUSE ☐ SHOP ☐ BARN
☐ STORAGE SHED ☐ DETACHED PORCH / DECK ☐ OTHER

*The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application, acknowledges that the contents of same are true, and authorizes the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Owner's/Agent's Signature — Date: 08/23/23

A PROPOSED PLOT PLAN (see page 2) is required to be submitted with each application.

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

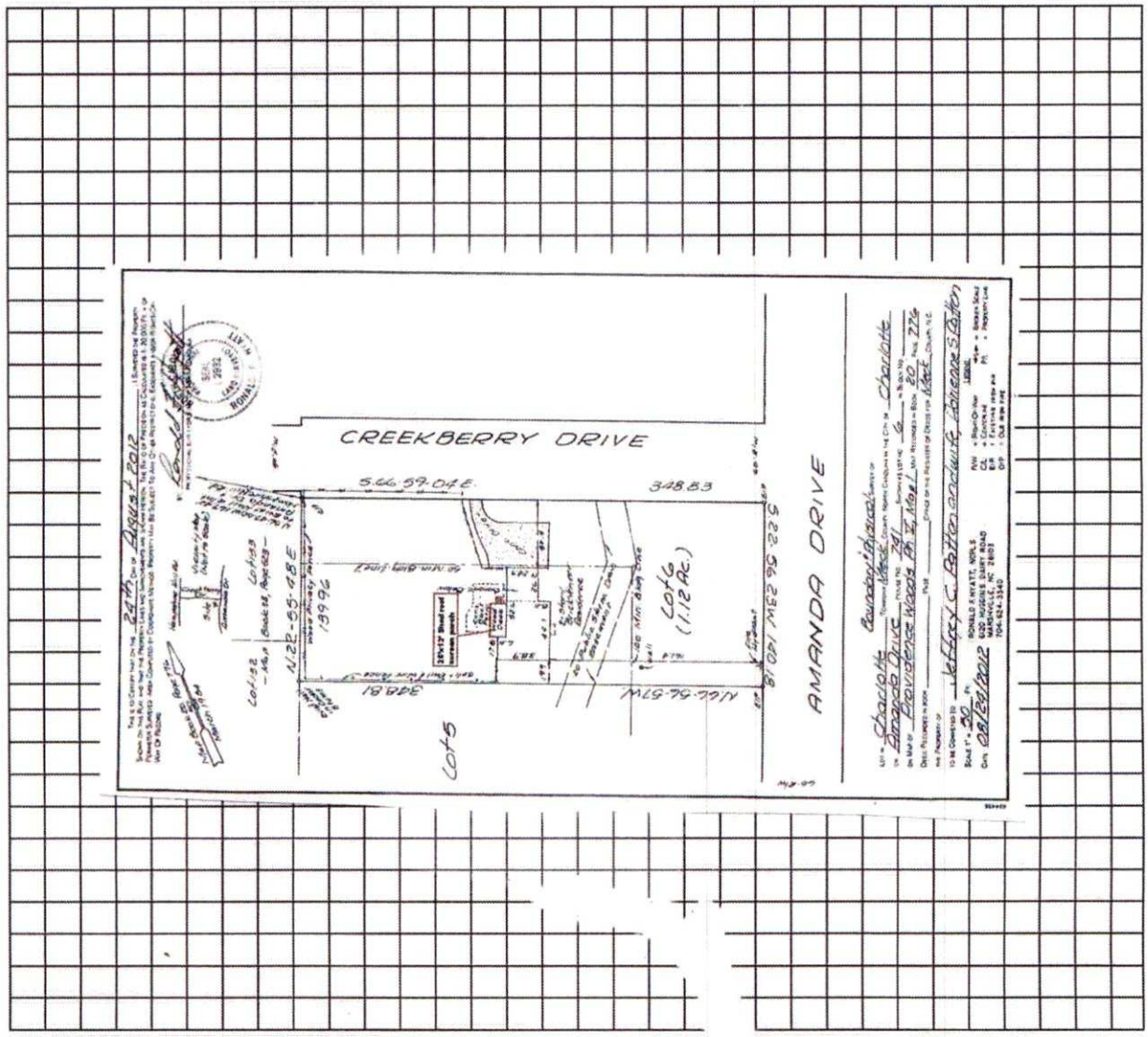
Revised on: 01/03/11

File #: 20680

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: 741 AMANDA DRIVE Tax Parcel #: 23111123



"The undersigned, an authorized agent of the Mecklenburg County Health Department, certifies that the Department has approved the Request for the "Job Location" contained in this document. This approval is granted in accordance with the provisions of Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal and Water Supply Wells in effect at the time of issuance of the permit and is subject to the following provisions:

- No work shall be conducted on the septic tank system until an installation, construction, alteration and/or repair approval is granted by this Department.
- This permit is not transferable.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

Customer meets required set backs for deck.

B Dayvault — 9-4-13
REHS 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: 01/03/11

THIS IS TO CERTIFY THAT ON THE 24th DAY OF August 2012, I SURVEYED THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE PROPERTY LINES AND IMPROVEMENTS ARE SHOWN HEREON. THE RATIO OF PRECISION AS CALCULATED IS 1: 20,000 FT. + OF PERIMETER SURVEYED. AREA COMPUTED BY COORDINATE METHOD. PROPERTY MAY BE SUBJECT TO ANY OTHER RESTRICTIONS, EASEMENTS AND/OR RIGHTS-OF-WAY OF RECORD.

BY: Ronald F. Hyatt
PROFESSIONAL SURVEYOR STATE OF NORTH CAROLINA

NORTH CAROLINA PROFESSIONAL SEAL L-2932 LAND SURVEYOR RONALD F. HYATT

Map Book 20, Page 776
March 1984

Hampshire Hill Rd.
Creek Dr.
Site
Amanda Dr.
Vicinity Map (Not to Scale)

N. 56-47-00W 167.42' to Exist. Nail & Tag in Amanda Dr. at Hampshire Hill Rd.

Lot 132 — Map Book 38, Page 523 — Lot 133

N.22-55-48E.

50' R/W

Exist. Nail in Cedar Stump

Wood Privacy Fence

139.96

EIP

348.81

Split Rail & Wire Fence

50' Min. Bldg. Line

S.66-59-04E.

CREEKBERRY DRIVE

Lot 5

26'x12' Shed roof screen porch

Conc. Block Patio

Wood Deck

Garage Below

17.8

6.0

52.6

38.9

24.9

Drive

26.2

50.5

19.9

44.1

8.0

2-Story Brick Veneer Residence

20' Public Storm Drain Easement

100' Min. Bldg. Line

Well

N.66-56-57W.

161.4

Lot 6 (1.12 Ac.)

348.83

EIP

Fire Hydrant

EIP

50' R/W

S.22-56-23W. 140.18

50' R/W

AMANDA DRIVE

Boundary & Physical SURVEY OF

LOT IN Charlotte TOWNSHIP Meck. COUNTY, NORTH CAROLINA IN THE CITY OF Charlotte

ON Amanda Drive HOUSE NO. 741 SHOWN AS LOT NO. 6 IN BLOCK NO. _____

ON MAP OF Providence Woods Ph. II, Map 1 MAP RECORDED IN BOOK 20 PAGE 776

DEED RECORDED IN BOOK _____ PAGE _____ OFFICE OF THE REGISTER OF DEEDS FOR Meck. COUNTY, N.C.

THE PROPERTY OF _____

TO BE CONVEYED TO Jeffrey C. Patton and wife, Adrienne S. Patton

SCALE 1" = 50 FT.

DATE 08/24/2012

RONALD F. HYATT, NCPLS
6120 HUGGINS DAIRY ROAD
MARSHVILLE, NC 28103
704-624-3340

LEGEND

R/W	= RIGHT-OF-WAY	◄►	= BROKEN SCALE
C/L	= CENTERLINE	P/L	= PROPERTY LINE
EIP	= EXISTING IRON PIN		
OIP	= OLD IRON PIPE		

624456

MECKLENBURG COUNTY
Health Department

Raynard Washington, PhD, MPH
Health Director

(704) 336-4700

Addendum to Application for
New Well or Septic System Installation
Abandonment or Repair of Existing Well or Septic System

Your signature below confirms the following:

1. The information on the application is true, complete and accurate.
2. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliances with applicable laws and rules.
3. I acknowledge that Deck Plus LLC is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at 741 Amanda Dr. Matthews.
   Number Street Town
   (Or Parcel Number)

Jeffrey Patton
Property Owner (print name)

Property Owner (signature)

8/22/23
Date

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 08/23/23
Receipt #: 144044
Check / Auth #: VISA 05614G
Received By: PLACILJ

Amount: 100.00
Tendered: 100.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: DECK PLUS LLC
Attn: EDNA PINHEIRO
Address:
Address:
City/State/Zip: ,

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	Use Existing System 741 AMANDA DR		1	100.00	100.00

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
			555.00		