

18380 NANTZ RD

00186124

6/18/08

marliwr

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

$200.00 on Acct B86840

FEE: PAID
DATE: 4/6/99

AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION
VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

400

DATE: 4/5/99

PERMIT NO: 11082
PARCEL NO: 001-051-16

JOB LOCATION ADDRESS: 18380 Nantz Rd
PROPERTY OWNER: Thomas Taylor
BUILDING CONTRACTOR: Dienst Custom Homes
SUBDIVISION NAME:
AUTHORIZATION ISSUED BY: Jeff A. Knight DATE: 4/5/99
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 11082, AND THE ATTACHED SITE PLAN WITH SYSTEM DETAILS. CONSTRUCTION AND INSTALLATION MUST ALSO MEET ALL REQUIREMENTS SET FORTH IN THE RULES GOVERNING SANITARY SEWAGE COLLECTION, TREATMENT, AND DISPOSAL AND ANY OTHER APPLICABLE RULES AND LAWS.

2. AN INSTALLATION, CONSTRUCTION, ALTERATION AND/OR REPAIR APPROVAL MUST BE SECURED PRIOR TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH MECKLENBURG COUNTY HEALTH DEPARTMENT.

3. ANY ALTERATION IN SITE OR SOIL CONDITIONS (INCLUDING LOCATION OF STRUCTURES AND APPURTENANCES) OR MODIFICATION IN USE, DESIGN WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS AS SPECIFIED IN THE ASSOCIATED IMPROVEMENT PERMIT AND APPLICATION, MAY SUBJECT THIS AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: * See plot plan. 1) Agreement form must be completed and recorded before final approval can be granted. 2) A riser should be placed over the outlet end of the septic tank to facilitate filter maintenance.

* This residence was connected to CMUD sewer. Confirmed with CMUD 11/22/99

OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITIONS OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

X Scott Hilton 4-6-99
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

MECKLENBURG COUNTY
ENGINEERING & BUILDING STANDARDS DEPARTMENT

Miscellaneous Fees

Requestor (Please print): X Scott Hickman	Phone #: 892-8426	Date Requested:	Date Filled:
Account Name: Diehst Custom Homes	☐ Cash ☒ Charge	Account No.: BF6840	

I certify that I am authorized to charge this account for this service.

Signature: X Scott Hickman Printed Name: Date: 4/6/99

Fee or Charge

T.C.	Qty.	Type	Unit Cost	Total Cost
021		Single Lot Grading Permit (Please list address below)		
112		Zoning Board of Adjustment ☐ Residential Variance Request ☐ Commercial Variance Request ☐ Residential Interpretation ☐ Commercial Interpretation		
113		Zoning Citation(s) # _____		
		☐ 117: Certificate of Compliance* ☐ 118: Certificate of Occupancy* (original is free)	$10.00 ea.	
119		Change of Contractor*	$10.00 ea.	
121		Letters of Certification/Verification	$10.00 ea.	
122		Monthly Statistical Reports	$10.00 ea.	
124		Research & Retrieval of Documents		
125		Temporary Utilities/Occupancy*	$30.00/insp.	
		Local License Card/Exam ☐ 128: Mechanical ☐ 129: Plumbing ☐ 132: Electrical		
		Development Activities Plan Review ☐ 002: Commercial Drainage ☐ 005: Erosion Control ☐ 016: Subdivision ☐ 006: Final Plat Review		
425		City of Charlotte Fire - Plan Review		
		Map Sales		
703	1	Other: Installation + Final	200.00	200.00
		Other:		
Payment received by: Gwendolyn Craig Date: 4/6/99 By: GC			Total:	200.00

* Please list all permit numbers/addresses that relate to your request. A request for temporary utilities (gas and electric) would require two permit numbers.

file # 11082 18380 - Mary Rand		

B-216NS 8/95

DIVISION

Permit # 11082 Parcel # 001-051-16

The IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be NO grading, filling or disturbance of the soil in the area of the septic tank system or repair area.

CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a Building Permit. The Construction Authorization is NOT transferable. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.

Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

Basement	___ Yes	X No	___ Partial Basement
Type Primary Wastewater System Type (circle one): I II (III) IV V VI	___ Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	X Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1

.3 Long-term acceptance rate	480 Max gallons/day wastewater flow	1200 Absorption Area (sq ft)	9' Trench spacing (min. on centers)
No Serviced by private well	1500 Gallon septic tank	400 Total trench length (ft)	20" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
4 Bedrooms in residence	1000 Gallon pump tank	N/A Depth of stone	

Any surface waters present: No Type: Minimum separation distance:

Site modifications required: Terrace must be leveled.

Additional Conditions: * See plot plan. 1) Agreement form must be completed and recorded before final approval can be granted. 2) A riser should be placed over the outlet end of the septic tank to facilitate filter maintenance. 3) 100% repair area not required, Leave as

Repair Area System Type Type (circle one): I II (III) IV V VI	___ Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	X Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1

As much as possible ___ Absorption Area (Sq ft) ___ Total Trench Length (Ft)	N/A Depth of Stone Trench	9' Trench spacing (min. on centers)	20" Maximum Trench Depth

For existing system, enter the year originally installed:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws and Rules For Sewage, Treatment and Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

- No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair Approval is granted by this Department.
- This Improvement permit is transferable.

Jeff A. Knight 4/5/99
DEHNR Authorized Agent Date

X Scott Hulsman 4-6-99
Owner/Agent Signature Date

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR.
SUITE 211
700 N. TRYON ST.
CHARLOTTE, N.C. 28202.
(704) 336-5102

NORTH CAROLINA DEPARTMENT OF
ENVIRONMENTAL, HEALTH,
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

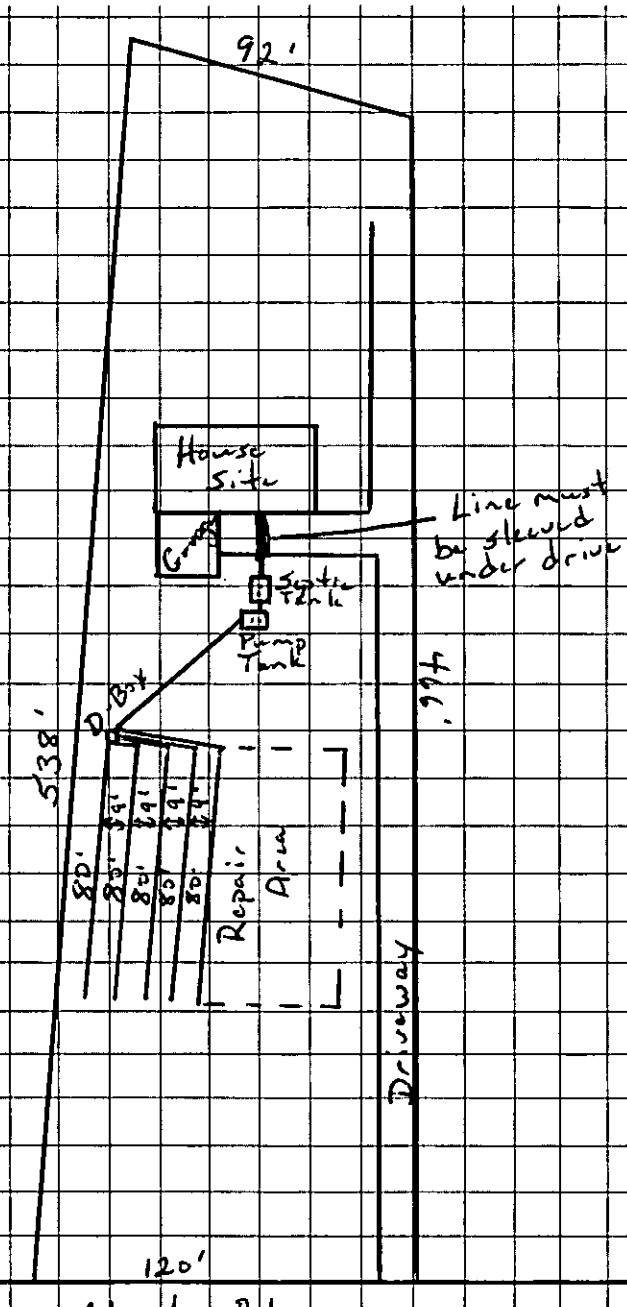
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 11082

TC: 001-051-16

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Comments

1) Outer boundries not drawn to scale.
2) Scale 1" = 60'
3) Keep lines level and on contour if possible
4) Keep trenches shallow - 20" maximum.
5) Keep all parts of septic system at least the minimum distance from the following:
   A) Well - 100 ft
   B) Foundation - 5 ft.
   C) Property Line - 10 ft.
6) Terrace must be leveled.

X Scott Hudson
OWNER/AGENT SIGNATURE

DATE 4-6-99

APPROVAL DATE _____

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

FEE: 100 ck # 1082

DATE: 12/30 1-5-99

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

[ ] CRT

TYPE APPLICATION: ✓ NEW SYSTEM __ EXPANSION/ ALTERATION OF EXISTING SYSTEM __ REPAIR OF EXISTING SYSTEM

NORTH CAROLINA
DEPARTMENT OF ENVIRONMENT,
HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

FILE #: 11082

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 004051-16

STREET ADDRESS: 18380 NANTZ ROAD

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: 16 A

TYPE OF BUILDING (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 4056

NUMBER OF BEDROOMS: 4 NUMBER OF OCCUPANTS: 4

FOUNDATION FOR RESIDENCE:

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

TOWNSHIP (CHECK ONE):

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

CLOSING DATE _____

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

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

WATER SUPPLY (CHECK ONE):
__ COMMUNITY (C)
✓ MUNICIPAL (M)
__ PRIVATE WELL (P)
__ SHARED WELL (S)
__ OTHER 'SPRINGS' (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES __ YES ✓ NO
EXISTING WASTEWATER SYSTEMS __ YES ✓ NO
EASTMENTS OR RIGHT-OF-WAYS ✓ YES __ NO
WELL, SPRINGS OR WATERLINES __ YES ✓ NO
DESIGNATED WETLANDS ✓ YES __ NO

PROPERTY OWNER:	LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:
NAME: (LAST) TAYLOR (FIRST) THOMAS (MI) N	NAME: (LAST) (FIRST) (MI)
ADDRESS: 3032 SETH COURT	DAYTIME PHONE: ( ) --
CITY: GASTONIA STATE: NC ZIP: 28054	
DAYTIME PHONE: 704 382 7042	

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? JAN 1998

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

SIGNED: Thomas N Taylor DATE: 1/5/99

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102

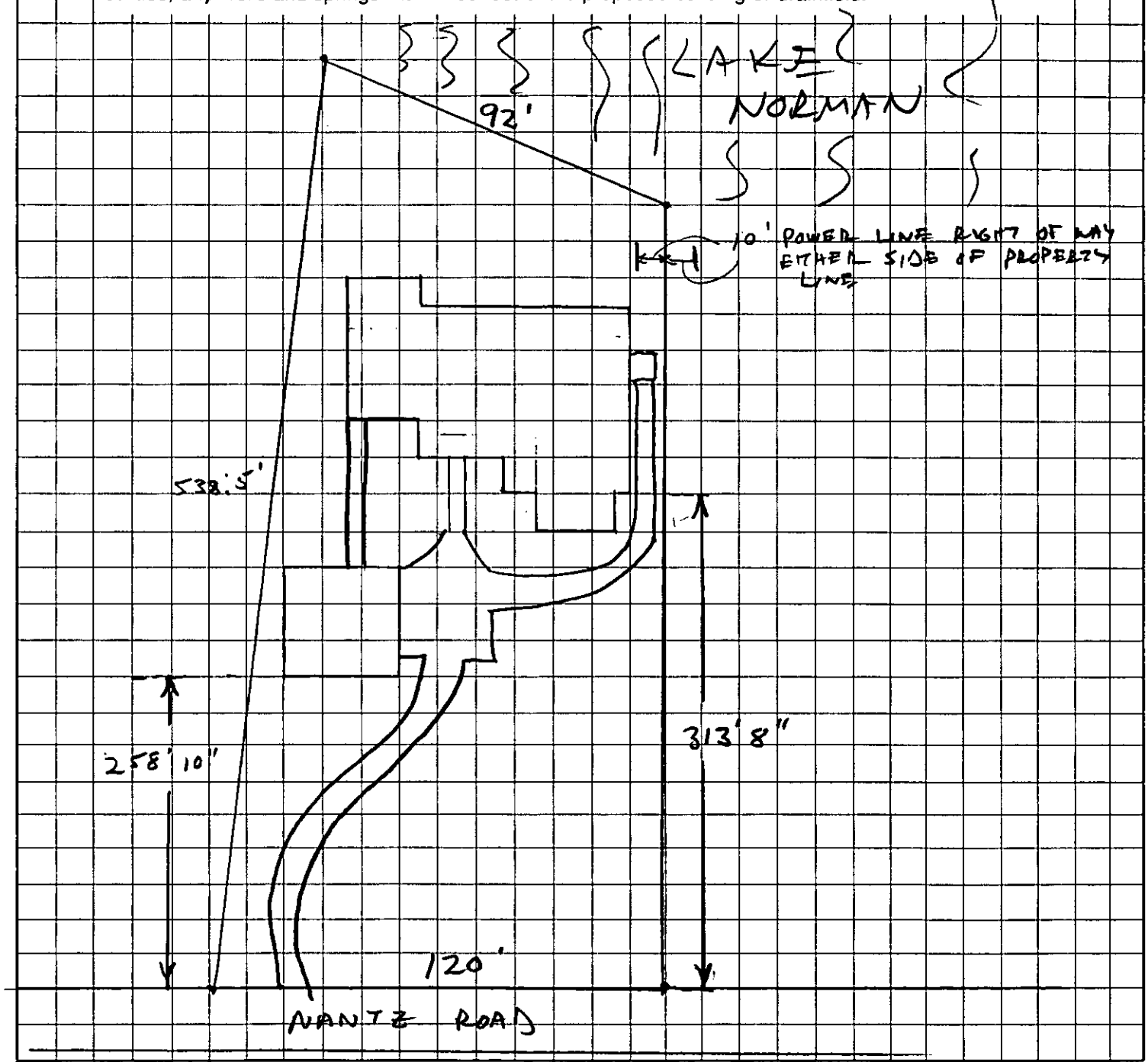
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 11082

TC: 001-051-16

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Thomas M Taylor
OWNER/AGENT SIGNATURE

DATE 11/5/99

APPROVAL DATE _____

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURSES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet: _____
Property ID: 001-031-16
Lot #: _____
File #: 11062

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Thomas N. Taylor APPLICANT: _____
ADDRESS: 3032 Jeff Court, Hoschton DATE EVALUATED: 1-15-99
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949) 4 bdrm PROPERTY SIZE: 1.16
LOCATION OF SITE: 16360 Nancy Rd PROPERTY RECORDED: _____
WATER SUPPLY: ☐Private ☑Public ☐Well ☐Spring ☐Other _____
EVALUATION METHOD: ☑Augur Boring ☐Pit ☐Cut
TYPE OF WASTEWATER: ☑Sewage ☐Industrial Process ☐Mixed

PROFILE #	.1940 Landscape Position/ Slope % (Slopes 2-8%)	Horizon Depth (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS &LTAR
1	LS	0-16"	gr/sl	Fr/SE XP/NS/NP	48" TO soil wetness	48"	N/A	None	PS .391 F2 IV
		16-24"	SBK/scl	Fr-Fi/SE XP/SS/SP					
		24-48"	SBK/sc	Fi/SE XP/S/P					
2	LS	0-15"	gr/sl	Fr/SE XP/NS/NP	37" TO soil wetness	37"	N/A	None	PS .391 F2 IV
		15-20"	SBK/scl	Fr/SE XP/SS/SP					
		20-37"	SBK/sc	Fi/SE XP/S/P					
3	LS	0-3"	gr/sl	Fr/SE XP/NS/NP	32" TO soil wetness	32"	N/A	None	LS .2591 F2 IV
		3-32"	SBK/sc	Fi/SE XP/S/P					
4	LS	0-4"	gr/sl	Fr/SE XP/NS/NP	2.5Y 7/2 @ 24"	28"	N/A	None	LS
		4-23"	SBK/sc	Fi/SE XP/S/P					
		23-28"	SBK/sc	VFi/Mixed/SS/VP					
5	LS	0-3"	gr/scl	Fr/SE XP/SS/SP	26" TO soil wetness	26"	N/A	None	LS
		3-26"	SBK/sc	VFi/Mixed/SS/VP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	LS	
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): Conventional
EVALUATED BY: W.R. Mewin 1-15-99
OTHER(S) PRESENT: LSS

FILE # 11062

COMMENTS Does not appear to be 100% Repair - recommend system be laid out and spot bowl before permit is issued

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR
R-RIDGE	I	S-SAND	1.2-0.8
S-SHOULDER SLOPE		LS-LOAMY SAND	
L-LINEAR SLOPE			
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6
N-NOSE SLOPE		L-LOAM	
H-HEAD SLOPE			
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM	
T-TERRACE		CL-CLAY LOAM	
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM	
	IV	SC-SANDY CLAY	0.4-0.1
		SIC-SILTY CLAY	
		O-ORGANIC	

CONSISTENCE	
MOIST	WET
VFR-VERY FRIABLE	NS-NON-STICKY
FR-FRIABLE	SS-SLIGHTLYSTICKY
FI-FIRM	S-STICKY
VFI-VERY FIRM	VS-VERY STICKY
EFI-EXTREMELY FIRM	NP-NON-PLASTIC
	SP-SLIGHTLYSTICKY
	P-PLASTIC
	VP-VERY PLASTIC

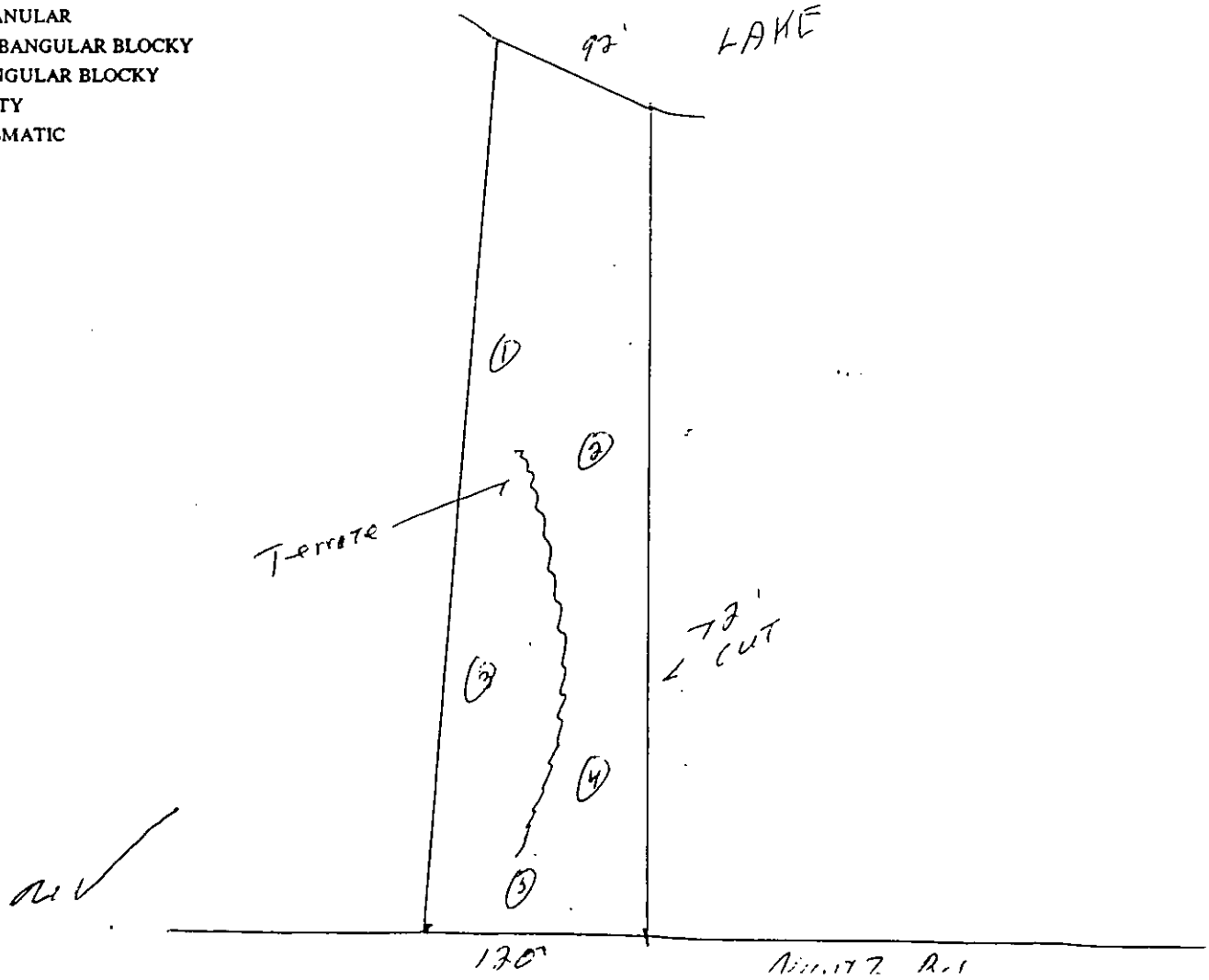
STRUCTURE

SG-SINGLE GRAIN
M-MASSIVE
CR-CRUMB
GR-GRANULAR
SBK-SUBANGULAR BLOCKY
ABK-ANGULAR BLOCKY
PL-PLATY
PR-PRISMATIC

MINERALOGY

SLIGHTLY EXPANSIVE

EXPANSIVE



Mecklenburg County
Health Department

Date: 1-23-99

Name: Thomas Taylor
Address: 3032 Seth Court
State/Zip: Gastonia 28054

Re: 18380 Nantz Rd.
File: 11082
Parcel: 001-051-16

Dear:

Receipt of your Application for Improvement Permit for the above referenced property is acknowledged. A soil evaluation and a site visit have been conducted. The results of the evaluation indicated that the site is **UNSUITABLE** under Rules .1941, .1942, .1943, .1945 For these reasons your Application for Improvement Permit is denied. A possible way to develop the site exists under Rule .1948(d) which reads as follows:

> A site classified as **UNSUITABLE** may be used for a ground absorption sewage treatment and disposal system specifically identified in Rules .1955, .1956, and or .1957 of this Section or a system approved under Rule .1969 if written documentation, including engineering, hydrogeologic, geologic or soil studies, indicates to the local health department that the proposed system can be expected to function satisfactorily. Such sites shall be reclassified a **PROVISIONALLY SUITABLE** if the local health department determines that the substantiating data indicate that:
>
> (1) a ground absorption system can be installed so that the effluent will be non-pathogenic, non-infectious, non-toxic, and non-hazardous;
> (2) the effluent will not contaminate ground or surface water; and
> (3) the effluent will not be exposed on the ground surface or be discharged to surface waters where it could come in contact with people, animals, or vectors.
>
> The State shall review the substantiating data if requested by the local health department.

Please be advised that you have the right to an informal review by this department. You also have the right to appeal under G.S. 130A-24, and to have the appeal held in Mecklenburg County.

If you have any questions regarding this matter, please call me at 336- .

Sincerely,

, R.S.
Environmental Health Specialist
Individual Water and Wastewater Systems

FEE: 165 (1650)
DATE: 1-5-99

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

COPY [ ] CRT

TYPE APPLICATION: ✓ NEW SYSTEM __ EXPANSION/ ALTERATION OF EXISTING SYSTEM __ REPAIR OF EXISTING SYSTEM

NORTH CAROLINA
DEPARTMENT OF ENVIRONMENT,
HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

FILE #: 11082

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 004-051-16

STREET ADDRESS: 18380 NANTZ ROAD

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: 16 A

TYPE OF BUILDING (CHECK ONE):

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

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 4056

NUMBER OF BEDROOMS: 4 NUMBER OF OCCUPANTS: 4

CLOSING DATE_____

FOUNDATION FOR RESIDENCE:

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

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

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

WATER SUPPLY (CHECK ONE):

__ COMMUNITY (C)
✓ MUNICIPAL (M)
__ PRIVATE WELL (P)
__ SHARED WELL (S)
__ OTHER 'SPRINGS' (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES __ YES ✓ NO
EXISTING WASTEWATER SYSTEMS __ YES ✓ NO
EASTMENTS OR RIGHT-OF-WAYS ✓ YES __ NO
WELL, SPRINGS OR WATERLINES __ YES ✓ NO
DESIGNATED WETLANDS ✓ YES __ NO

PROPERTY OWNER:	LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:
NAME: (LAST) TAYLOR (FIRST) THOMAS (MI) N	NAME: (LAST) (FIRST) (MI)
ADDRESS: 3032 SETH COURT	DAYTIME PHONE: ( ) -
CITY: GASTONIA STATE: NC ZIP: 28054	
DAYTIME PHONE: 704 382- 7042	

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? JAN 1998

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

SIGNED: J Thomas N Taylor DATE: 1/5/99

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102

PROPOSED PLOT PLAN

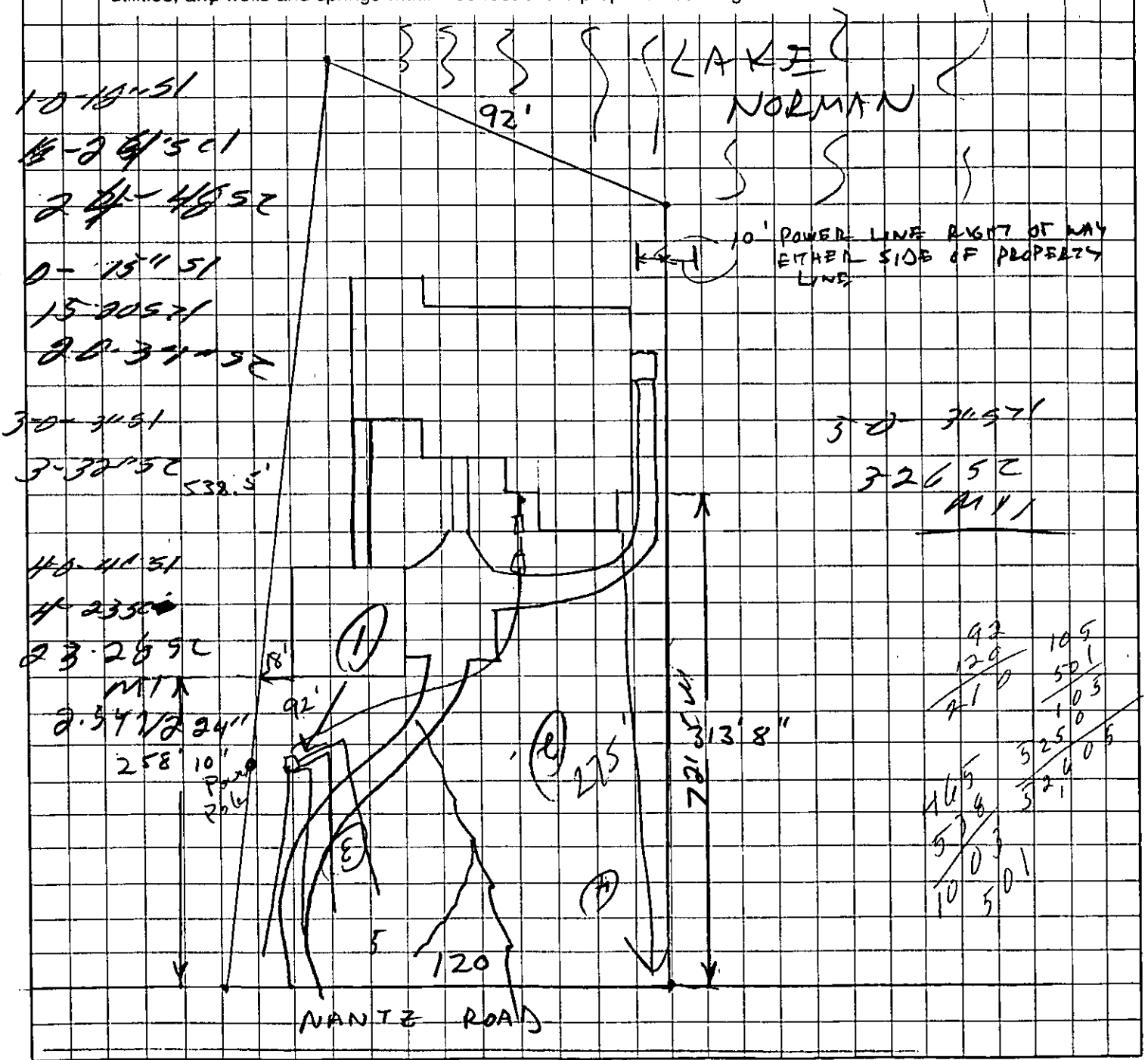
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

COPY

FILE: 11082

TC: 001-051-16

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Thomas M Taylor
OWNER/AGENT SIGNATURE

DATE 1/5/99

APPROVAL DATE _____

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

DIENST CUSTOM HOMES
8301-3 Magnolia Estates Drive
Cornelius, NC 28031
Phone: 704-892-8426 Fax: 704-896-5876

facsimile transmittal

To: KELLY Fax: 336-6894

From: SCOTT Date: 3-10-99

Re: Pages Including Cover: 2

☐ Urgent ☐ For Review ☐ For Quote ☐ Please Reply

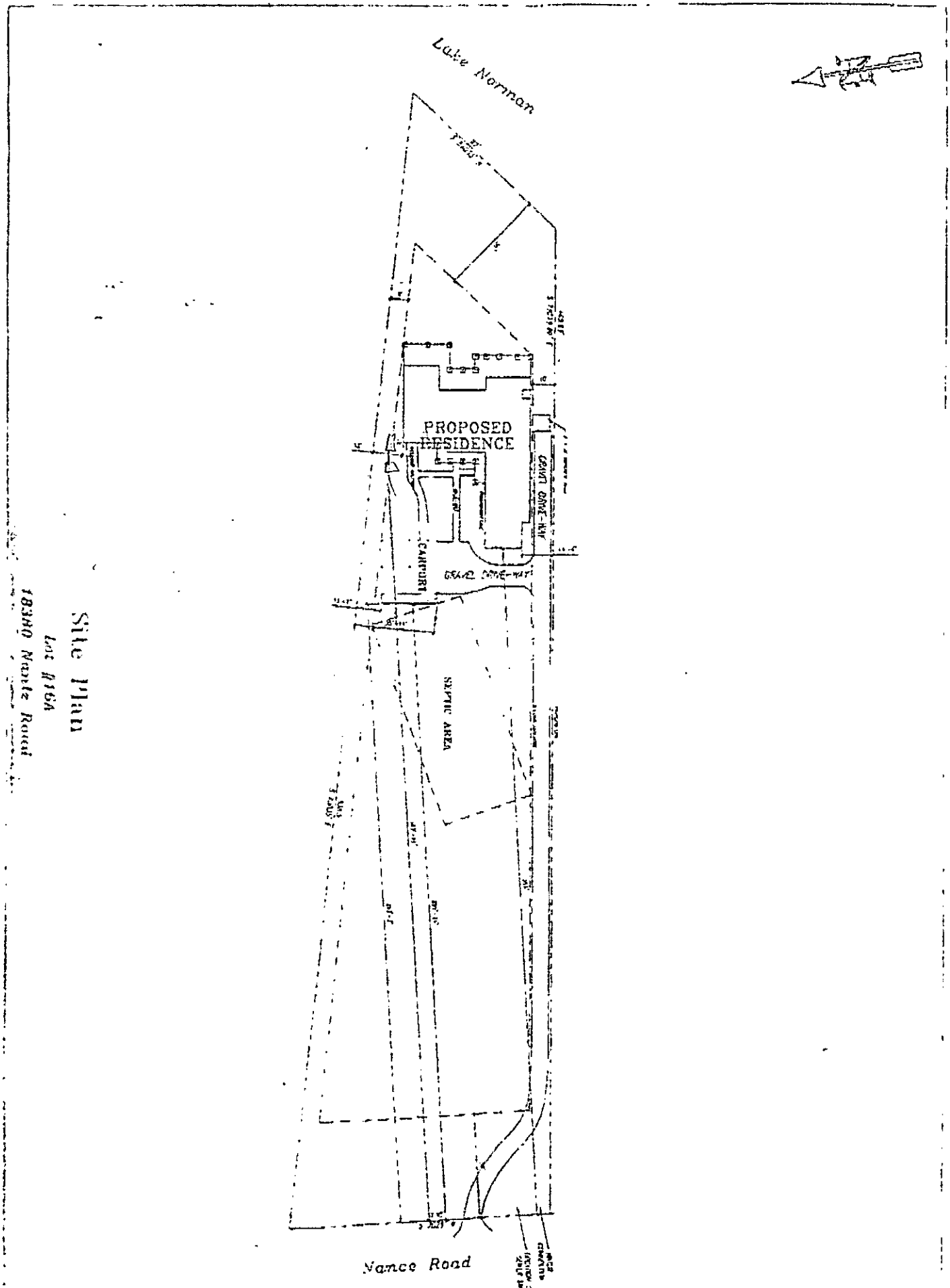
Comments:

KELLY,

HERE IS THE NEW SITE PLAN FOR THE TAYLOR RESIDENCE AT LAKE NORMAN. THE HOUSE AND CARPORT HAVE BEEN STAKED AND I JUST WANTED TO SEE IF WE COULD MEET TO SEE IF WE ARE OK WITH THE SEPTIC FIELD HERE.

THANKS
SCOTT

303-8919



Site Plan

Lot #16A

18340 Maple Road

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURSES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet: _____
Property ID: 001-031-16
Lot #: _____
File #: 11082

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Thomas N. Taylor APPLICANT: _____
ADDRESS: 3032 Jeff Court, Hoschton DATE EVALUATED: 1-15-99
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949) 4bdrm PROPERTY SIZE: 1.18
LOCATION OF SITE: 16360 Liberty Rd PROPERTY RECORDED: _____
WATER SUPPLY: ☐Private ☑Public ☐Well ☐Spring ☐Other _____
EVALUATION METHOD: ☑Augur Boring ☐Pit ☐Cut
TYPE OF WASTEWATER: ☑Sewage ☐Industrial Process ☐Mixed

PROFILE #	.1940 Landscape Position/ Slope % (Slopes 2-6%)	Horizon Depth (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS &LTAR
1	LS	0-18"	gr/sl	Fr/SEXP/NS/NP	>48" TO soil wetness	48"	N/A	None	PS .39/F2 IV
		18-24"	SBK/sc	Fr-Fi/SEXP/SS/SP					
		24-48"	SBK/sc	Fi/SEXP/SIP					
2	LS	0-15"	gr/sl	Fr/SEXP/NS/NP	>37" TO soil wetness	37"	N/A	None	PS .39/F2 IV
		15-20"	SBK/scl	Fr/SEXP/SS/SP					
		20-37"	SBK/sc	Fi/SEXP/SIP					
3	LS	0-3"	gr/sl	Fr/SEXP/NS/NP	>32" TO soil wetness	32"	N/A	None	US .25/F2 III
		3-32"	SBK/sc	Fi/SEXP/SIP					
4	LS	0-4"	gr/sl	Fr/SEXP/NS/NP	2.5Y 7/2 @ 24"	28"	N/A	None	US
		4-23"	SBK/sc	Fi/SEXP/SIP					
		23-28"	SBK/sc	vFi/Mixed/VS/VP					
5	LS	0-3"	gr/scl	Fr/SEXP/SS/SP	>26" TO soil wetness	26"	N/A	None	US
		3-26"	SBK/sc	vFi/Mixed/VS/VP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	LS	
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): Unsuitable
EVALUATED BY: W.R. Mowlin 1-15-99
OTHER(S) PRESENT: LSS

FILE # 11062

COMMENTS Does not appear to be 1006 Repair - recommend system be laid out and spot bored before permit is issued

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR	CONSISTENCE MOIST	CONSISTENCE WET
R-RIDGE	I	S-SAND	1.2-0.8		
S-SHOULDER SLOPE		LS-LOAMY SAND		VFR-VERY FRIABLE	NS-NON-STICKY
L-LINEAR SLOPE				FR-FRIABLE	SS-SLIGHTLYSTICKY
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6	FI-FIRM	S-STICKY
N-NOSE SLOPE		L-LOAM		VFI-VERY FIRM	VS-VERY STICKY
H-HEAD SLOPE				EFI-EXTREMELY FIRM	NP-NON-PLASTIC
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3		SP-SLIGHTLYSTICKY
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM			P-PLASTIC
T-TERRACE		CL-CLAY LOAM			VP-VERY PLASTIC
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM			
	IV	SC-SANDY CLAY	0.4-0.1		
		SIC-SILTY CLAY			
		O-ORGANIC			

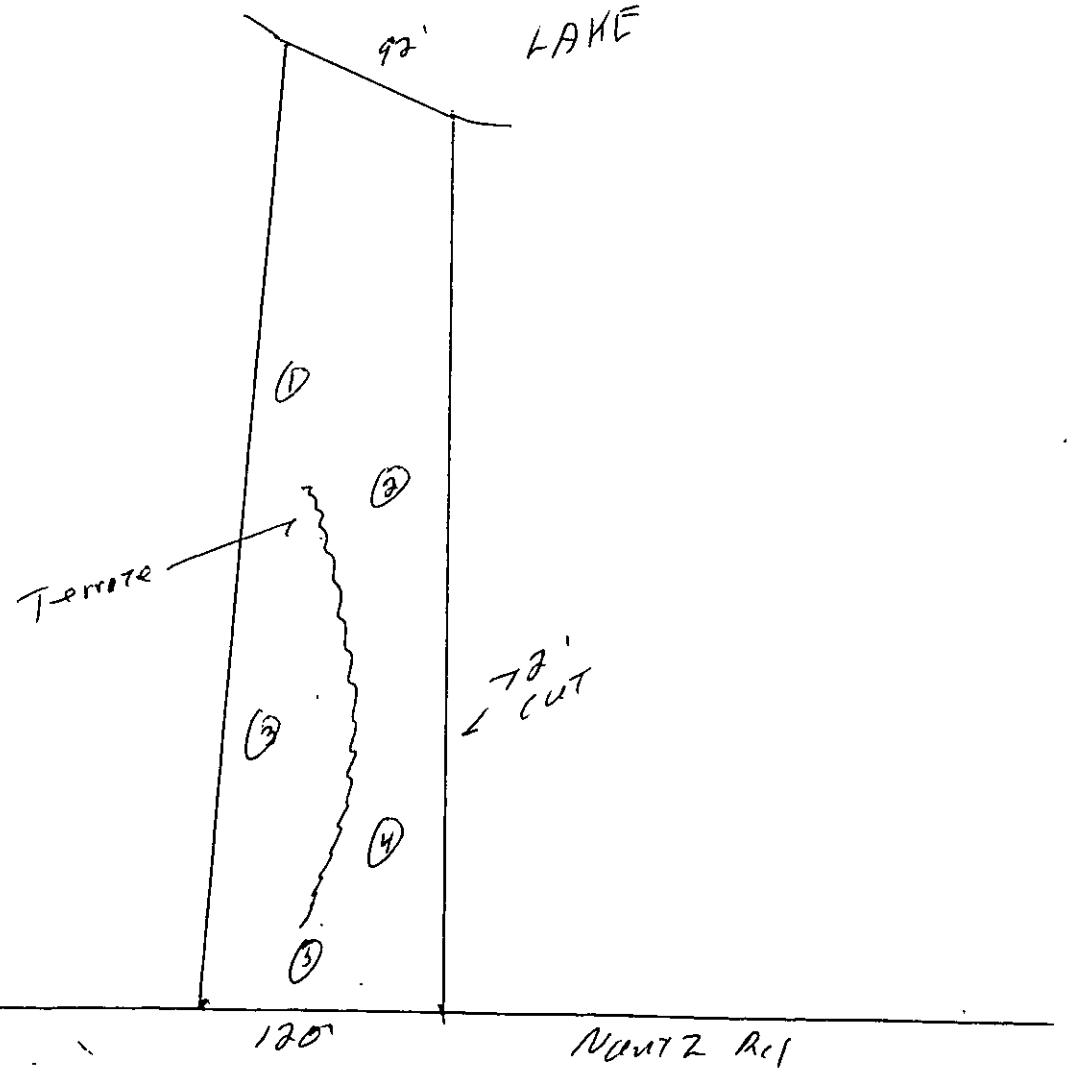
STRUCTURE

SG-SINGLE GRAIN
M-MASSIVE
CR-CRUMB
GR-GRANULAR
SBK-SUBANGULAR BLOCKY
ABK-ANGULAR BLOCKY
PL-PLATY
PR-PRISMATIC

MINERALOGY

SLIGHTLY EXPANSIVE

EXPANSIVE



Mecklenburg County
Health Department

January 26, 1999

Mr. Thomas Taylor
3032 Seth Court
Gastonia, NC 28054

Re: 18380 Nantz Road
File: 11082
Parcel: 001-051-16

Dear Mr. Taylor:

Receipt of your Application for Improvement Permit for the above referenced property is acknowledged. A soil evaluation and a site visit have been conducted. The results of the evaluation indicated that the site is **UNSUITABLE** under Rules .1941 **SOIL CHARACTERISTICS (MORPHOLOGY)**, .1942 **SOIL WETNESS CONDITIONS**, .1943 **SOIL DEPTH** and .1945 **AVAILABLE SPACE**. For these reasons your Application for Improvement Permit is denied. A possible way to develop the site exists under Rule .1948(d) which reads as follows:

> A site classified as **UNSUITABLE** may be used for a ground absorption sewage treatment and disposal system specifically identified in Rules .1955, .1956, or .1957 of this Section or a system approved under Rule .1969 if written documentation, including engineering, hydrogeologic, geologic or soil studies, indicates to the local health department that the proposed system can be expected to function satisfactorily. Such sites shall be reclassified as **PROVISIONALLY SUITABLE** if the local health department determines that the substantiating data indicate that:
> (1) a ground absorption system can be installed so that the effluent will be non-pathogenic, non-infectious, non-toxic, and non-hazardous;
> (2) the effluent will not contaminate ground or surface water; and
> (3) the effluent will not be exposed on the ground surface or be discharged to surface waters where it could come in contact with people, animals, or vectors.

The State shall review the substantiating data if requested by the local health department.

Please be advised that you have the right to an informal review by this department. You also have the right to appeal under G.S. 130A-24, and to have the appeal held in Mecklenburg County.

If you have any questions regarding this matter, please call me at 336-5575.

Sincerely,

Kelly Randall

Kelly Randall, R.S.
Environmental Health Specialist
Individual Water and Wastewater Systems

SOIL INVESTIGATION REPORT

Date of Investigation June 24, 1976 Lot No. 11022

Owner W. N. Taylor SP

Location of Property Nance Rd 214 TCN 001-051-16 lot 16A

Soil Suitability Ratings

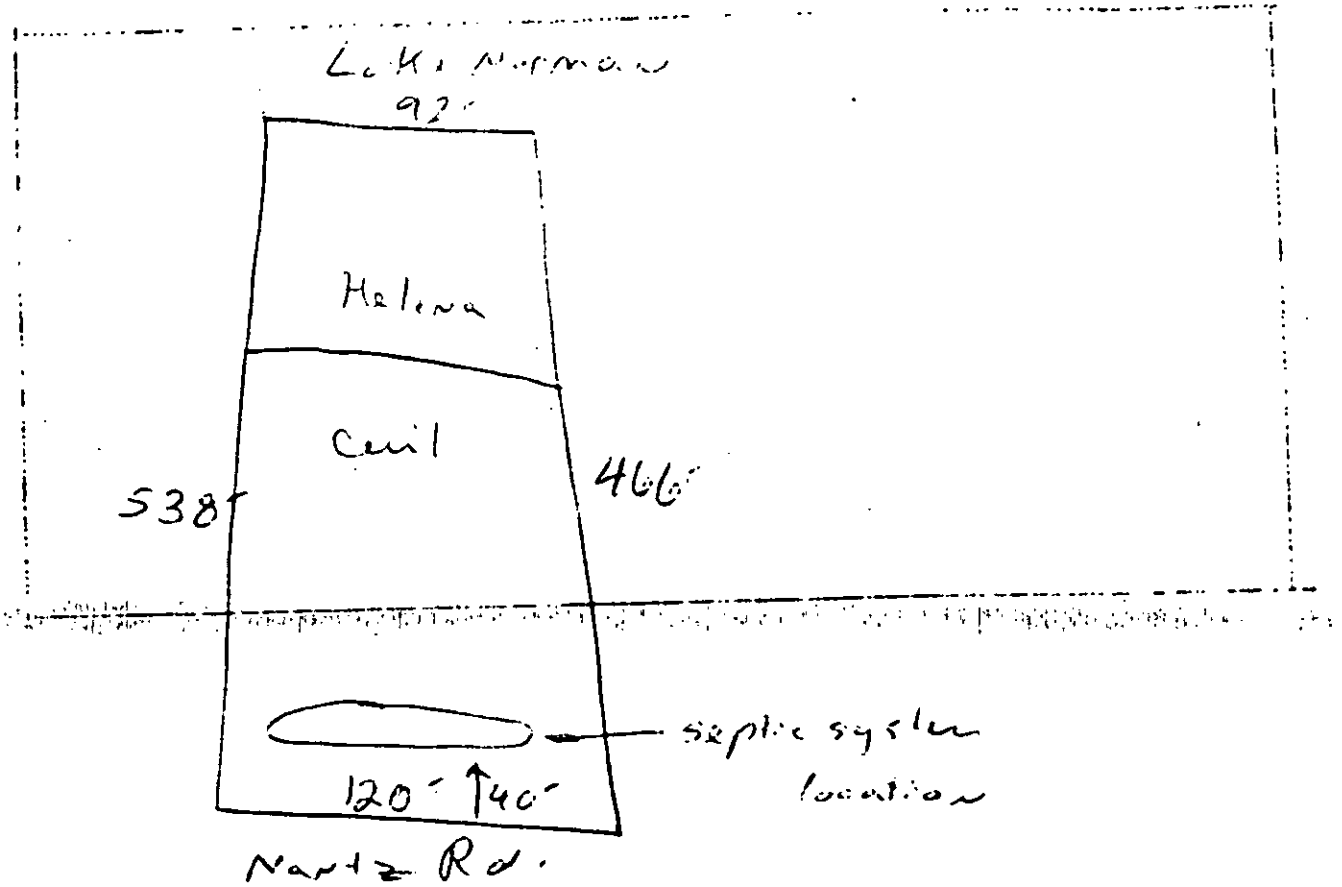
Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Cecil	Helena		
2. Soil Slope	acceptable 2-6%	acceptable 2-4%		
3. Soil Depth	acceptable >48"	acceptable >48"		
4. Soil Texture	acceptable Clay	unacceptable 2:1 Expanding Clay		
5. Soil Structure	acceptable subangular blocky	unacceptable Massive		
6. Restrictive Horizons	—	—		
7. Soil Drainage	acceptable waterable	unacceptable perched high water table		
8. Soil Permeability (Percolation Rate)	>6" acceptable ~~60 min/in~~	unacceptable >200 min/in		
9. Other	—	—		
10. Overall Rating	acceptable	unacceptable.		

Recommendations Based on this investigation, the lot is recommended for approval for installation of a septic tank system. System design should be based on a percolation rate of 60 min/in. and should be placed in the area of ~~B~~ Cecil soils.

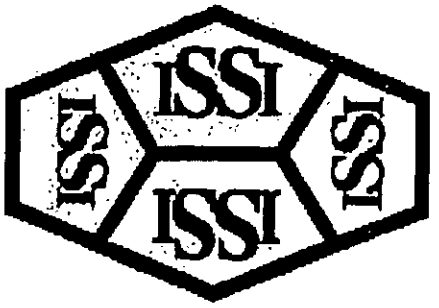
W. Edward Cavanaugh
Soil Scientist

See diagram on back

3/10/75
EHS 535


Lake Norman
92'
Helena
Cecil
538'
466'
septic system
location
120'
40'
Nantz Rd.

3/18/15



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ISSI Operations Center Staff

Date Received 6/11/96

APT No 1.3
T C No 001-051-16

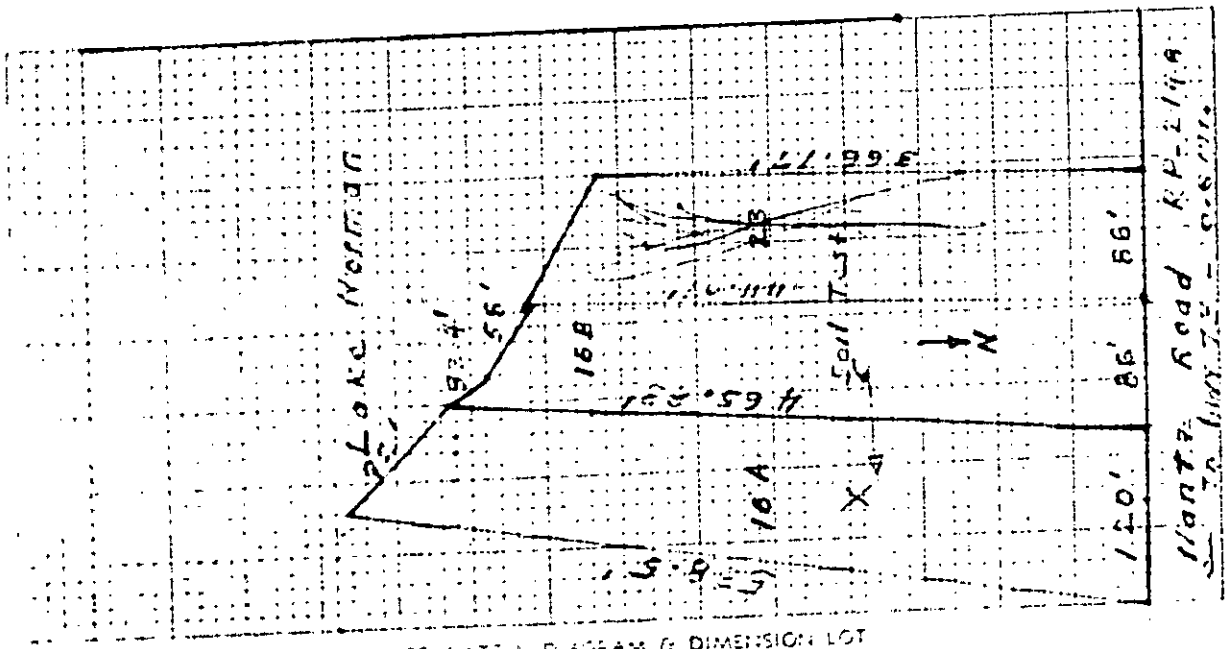
Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1. NAME OF OWNER Taylor (LAST) William (FIRST) H. (MIDDLE)
2. ADDRESS OF OWNER 1147 Little Rock Road ZIP 28214
3. PHONE NO Home 399-8194 Office 373-4202
4. LOCATION OF PROPERTY Mantz Road county road no. 2116 (STREET OR COUNTY ROAD)
5. SUBDIVISION _____ LOT NO 17 BLOCK NO. _____
MAP BOOK NO _____ PAGE NO. _____ TAX CODE 001-051-16
6. DEED REFERENCE DEED BOOK 3547 PAGE NO. 440

I (we) hereby make to the Mecklenburg County Health Department for the conduct of a percolatio
and to the site in portion of the lot hereinabove described for the purpose of determining if the s
for the installation of an individual septic tank wastewater treatment system with subsurface
absorption, effluent discharge



7) ACCURATELY DIAGRAM & DIMENSION LOT

William H. Taylor
OWNER

HEALTH DEPARTMENT'S COPY

SOIL INVESTIGATION REPORT

Date of Investigation June 24, 1976 APT No. 11082

Owner W. N. Taylor S.D.

Location of Property N. on Rt. 2148 TCN 021-051-16 lot 16A

Soil Suitability Ratings

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Cecil	Helena		
2. Soil Slope	acceptable 2-6%	acceptable 2-4%		
3. Soil Depth	acceptable >48"	acceptable >48"		
4. Soil Texture	acceptable Clay	unacceptable 2:1 expanding clay		
5. Soil Structure	acceptable subangular blocky	unacceptable Massive		
6. Restrictive Horizons	———	———		
7. Soil Drainage	acceptable well drained	unacceptable perched high water table		
8. Soil Permeability (Percolation Rate)	>6" acceptable 6 min/in	unacceptable >60 min/in		
9. Other	———	———		
10. Overall Rating	acceptable	unacceptable		

Recommendations Based on this limited survey, the lot is recommended for approval for installation of a septic tank system. System design should be based on a percolation rate of 6 min/in and should be placed in the area of the Cecil soils.

See diagram on back

W. Edward Sargent
Soil Scientist

3/10/75
EHD 539