MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES 4209

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: 19503136
STREET ADDRESS: 5201 Mintridge Road
CITY: Clt
STATE: NC ZIP: 28227
SUBDIVISION NAME: Mintwood Place
LOT #: LOT SIZE (acres):
TOWNSHIP: Mint Hill

☐ 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: 2386
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 3

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: 0 NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: 0

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: 1 ____ ____ ____ ____

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

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

10. WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 1985 or 86 ☐ UNKNOWN

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

12. PROPERTY OWNER:

NAME: AL Shuford
ADDRESS: 5201 Mintridge Road
CITY: Clt
STATE: NC ZIP: 28227
HOME PHONE: 704-573-1940
WORK PHONE: Same
MOBILE PHONE: 704 649-4161
FAX: 704-573-1940

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

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.

ABS (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.

Alfred B. Abl
Property Owner's or Owner's Legal Representative Signature

5-21-09
Date

OFFICE USE ONLY

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

SEPTIC APPLICATION FEES RECEIVED: $ 200 "South" DATE FEE RECEIVED: 5/21/09

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

APPLICATION PROCESSED BY: JC

GWS FILE NUMBER ASSIGNED: 01789B

APPLICATION ID NUMBER ASSIGNED: 4209

COMMENTS: Originally applied for 4x5 4/6/09-denied

See File # 734A

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

Residential Subsurface Wastewater Treatment and Disposal System Design

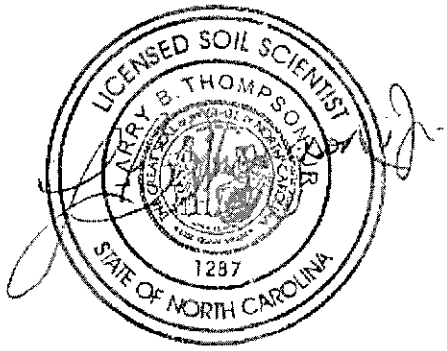
for

5201 Mintridge Road
Charlotte, North Carolina

Tax Parcel # 195-031-36
Mecklenburg County File # 1789B
May 15, 2009

Prepared for:

Mr. Alfred B. Shuford
5021 Mintridge Road
Charlotte, NC 28227
704-573-1940



Prepared by:

Larry Thompson, RS, PWS, LSS
Thompson Environmental Consulting, Inc.
114 Orchard Ridge Road
Locust, NC 28097-8748
Phone: 704-301-4881
Fax: 704-888-1496
larry@thompsonenv.com



cc: Mr. Jeremy Michael, RS
Mecklenburg County Environmental Health

Details

In an application for "use of existing system" filed with the Mecklenburg County Health Department (MCHD) on April 6, 2009 by Mr. Shuford, the footprint of the existing residence was to be expanded in order to accommodate a kitchen renovation as well as the addition of a home office. Based upon this information, a site evaluation was conducted by the MCHD where the request was denied based upon the required septic system setbacks set forth in the *Laws and Rules for Sewage Treatment, and Disposal Systems* 15A NCAC 18A .1900 (North Carolina Department of Environment and Natural Resources, Division of Environmental Health, On-Site Wastewater Section).

Mr. Shuford has contracted with Thompson Environmental Consulting, Inc. (TEC) to assist in the development of a proposal for modifications to the existing residence and on-site wastewater treatment and disposal system that might allow for the issuance of building permit for the proposed addition. Based upon an investigation performed by TEC it has been determined that a sufficient amount of "Suitable" Group IV soils are available to allow the existing septic system to be modified to accommodate the current, as well as the proposed, house configuration and still have the required area to install a complete replacement system (prefabricated porous block panel system – repair system).

The existing conventional drainlines (3 – 3-foot wide x 133-foot long) have been located and it has been determined that one of the three drainlines (the drainline closest to the residence) must be abandoned due to its proximity to the existing screened-in porch as well as the proposed addition. We propose to remove the existing deck and cantilever the existing screened-in porch to allow for the required setback from the next closest drainline (Mr. Paul Barlow of Paul Barlow Builders has confirmed that the porch can be cantilevered). The foot print of the proposed addition has been altered as well to allow for the required 5-foot separation between the addition and the next closest drainline.

TEC proposes to replace the storage that will be lost by cutting off the drainline that is located closest to the residence and adding (2) 3-foot wide x 50-foot long Infiltrator Chamber drainlines in the front yard. The new drainlines will be feed by gravity from the existing distribution box and a flow divider will be used to split the flow equally at the head of the new trenches.

It is the desire of the property owner that the MCHD consider issuing an Improvement Permit and Construction Authorization, based upon the following proposal.

Location

The subject property is located in Mintwood Place subdivision which is located off of NC 51 near Mint Hill, North Carolina. From Mint Hill, travel west on NC 51, turn left onto Mintwood Drive and right onto Mintridge Road. 5021 Mintridge Road will be located on the left.

References

Laws and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A, Section .1900, Department of Environment and Natural Resources, Division of Environmental Health, On-Site Wastewater Section, August 1, 2007.

Innovative Wastewater System Approval: AWWS-05-01; North Carolina Department of Environment and Natural Resources, Division of Environmental Health, On-Site Wastewater Section, April 2, 2005.

Plans and Specifications

Septic Tank

- Existing.

Distribution Method

- Wastewater from the septic tank is directed to a distribution box for equal distribution to the existing three drain lines.
- The existing distribution box will be uncovered and, if it can accommodate, an additional supply line will be added and the drainline closest to the residence will be blocked off and a new supply line added to feed the two Infiltrator Chamber drainlines that will be added in the front yard.
- If required, a new distribution box will be set and plumbed accordingly.
- The distribution box shall be placed level, must be watertight and must equally feed all three drain lines.
- The distribution box should be water tested at the time of the final inspection.
- A flow divider will be installed at the beginning of the new drainlines to split the flow to the lines equally.

Pipes and Fittings

- All discharge piping, connectors and supply lines shall be SCH 40 PVC.
- All joints must be properly "welded" utilizing the appropriate PVC cement for each application.
- A new supply line will be required from the distribution box to the new drainlines. The estimated length is +/- 165-feet.

Drain Field Installation

- The drain field has been previously laid out on-site utilizing metal stemmed flags.
- Under no circumstances shall any construction take place within the drain field area while the soil is in a wet condition. If the installer has doubts as to whether or not the drain field area is dry enough to begin construction, the MCHD should be contacted for permission to proceed with the installation.

- The specified system is a shallow placed Type III accepted system (**Infiltrator Chamber System**).
- The new drainfield consists of (2) lateral trenches to be constructed 3-feet wide by 50-feet in length.
- The new drainlines will be equally fed by a flow divider that will be installed at the beginning of the new trenches.
- The maximum trench depth for this system shall be **36 inches**.
- The laterals are to be installed on contour with the land, keeping the individual trench bottoms level from beginning to end.
- All drain lines must have at least 12 inches of final soil cover over the drain field media.
- The trenches should be left open for the final inspection by the MCHD.

Final Landscaping

- Finished soil cover must be at least 12 inches deep over the entire drain field area.
- The drain field shall be shaped to shed rainwater and be free from low spots.
- The drain field area should be planted with grass as soon as possible to prevent erosion. The soil should be properly tilled, limed (if necessary) and fertilized prior to planting. After applying grass seed, the area should be heavily mulched with straw or other suitable material.

Utility Conflicts

- It is recommended that all existing utilities be clearly marked prior to beginning any construction.

Maintenance

In General

- The septic tanks should be pumped every 5-7 years or when the solids within the septic tank reach an elevation that is equivalent to 1/3 of the volume of the tank. If using a garbage disposal, it is recommended that the homeowner has the septic tank cleaned out more frequently.
- All piping and valves should be inspected annually for damage and corrections/repairs made immediately.
- The drain field area should be maintained to prevent over growth of vegetation. Any damp areas, leakages or malfunctions should be addressed immediately.
- Divert gutter downspouts and surface water runoff away from the septic and pump tanks.

Suggestions to the Homeowner

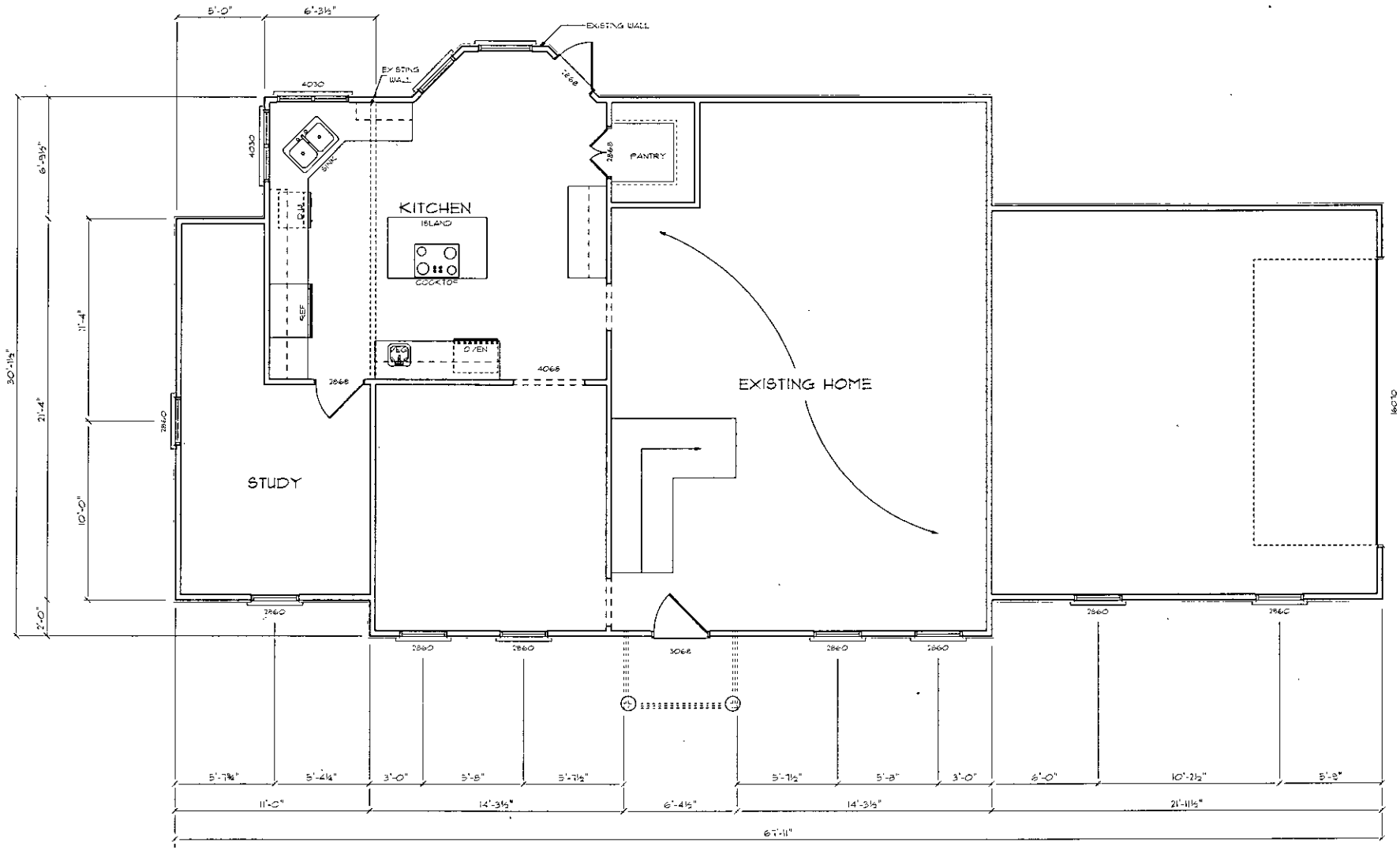
- As previously mentioned, if you plan to use a garbage disposal in your home you should plan to have your septic tank cleaned out more frequently. The ground up

garbage adds large amounts of solids into a septic tank that tend to degrade at a very slow rate.

- Grease, cooking oils, coffee grounds and non-degradable solids (disposable diapers, cigarettes and solid paper wastes) should never be put into a septic tank.
- Used motor oil or any oily liquids should not be disposed of in a septic tank.
- Be aware of the amount of water that you are using in your home. Water saving fixtures and devices can be installed on sinks, toilets and showers to reduce the volume of wastewater that you are sending to your drain field.
- Run dishwashers and washing machines only when you have a full load.
- Use liquid detergents. Powdered detergents have binding agents in them that tend to solidify in the wastewater disposal system.
- Repair leaky faucets and toilets. Small drips equal large volumes of water over time and can over burden your drain field.
- Do not use chemical additives in your system. Studies have indicated that they do not increase the biological activity that naturally occurs in the septic system and in some cases certain additives have been found to be detrimental to the life of a system.

Design Specifics

Daily Design Flow:	360 GPD – 3 bedroom house
Septic Tank Size:	1500 gallons (2 compartments)
Effluent Loading Rate:	Design = 0.3 GPD per sq. ft.
Drain Field Type:	Infiltrator Chamber System
Distribution Method:	Distribution Box/Flow Divider
Drain Lines:	(2) 3' Wide x 50 Feet Long
Maximum Trench Depth:	36 inches deep


5'-0"
6'-3½"
EXISTING WALL
EXISTING WALL
4030
4030
SINK
2868
PANTRY
KITCHEN
ISLAND
COOKTOP
REF
OVEN
4068
2868
EXISTING HOME
STUDY
2860
30'-1½"
21'-4"
11'-4"
10'-0"
2'-0"
6'-3½"
2860
2860
2860
2860
3068
2860
2860
2860
2860
18010
5'-7⅜"
5'-2⅛"
3'-0"
5'-8"
5'-7½"
5'-7½"
5'-8"
3'-0"
8'-0"
10'-2½"
5'-8"
11'-0"
14'-3½"
6'-4½"
14'-3½"
21'-11½"
67'-11"

PINNACLE LAND SURVEYING, PA

SURVEYING — PLANNING — MAPPING
P.O. BOX 2727 (704) 399-9120
HUNTERSVILLE, NC 28070 FAX (704) 399-9120

© PINNACLE LAND SURVEYING, PA

Klaus E. Krueger
KLAUS E. KRUEGER RLS L-3808

NORTH CAROLINA REGISTERED SEAL L-3808 LAND SURVEYOR KLAUS E. KRUEGER

Shared

MINTRIDGE ROAD
60' PUBLIC R/W

Back of Curb

Concrete Sidewalk

Telephone Boxes (2)

Iron at R/W Between Lots 8 & 9

EIP

TIE N 49°30'14" W 289.74' (Not to Scale)

S 52°45'23" W (Basis of Bearing) 88.54'

L=48.73'
R=108.95'

NPS

5'

House Corner over Front Bldg Line
2.6' 6.5' 0.9'

3x3 Wall

47.40'

Concrete Sidewalk

Concrete Driveway

Covered Porch

50' Front Bldg Line

Lot 5
0.484 Acres

Electrical Box

EIP

N 37°14'37" W 127.45'

Lot 4

Now or Formerly
Fred P. Tatham Jr.
& wf Sara
DB 5388 PG 0493

TIE (Not to Scale) N 52°45'23" E 154.99'
Iron at R/W Between Lots 4 & 3

EIP

50'

Flow Divider

Wood Fence

Well

Proposed Pool

CCM

40' Rear Bldg Line

34.9'

30.3'

22.0'

24.78'

22.5'

22.0'

Concrete Sidewalk

12x24 Wood Deck

4.0'

5.2'

2.6'

6'

5'

41.6'

Lot 6

Now or Formerly
Paul J. Lyon
& wf Jane S.
DB 5311 PG 0352

S 11°36'42" E 142.90'

N 55°27'46" E 197.71'

Wood Fence

EIP

Now or Formerly
Ronald E. McCauley
& wf Diane L.
DB 4734 PG 0910

Now or Formerly
Daniel P. Hatley
& wf Joice H.
DB 8283 PG 0565

Scale: 1" = 30'

LEGEND

Thompson Environmental Consulting, Inc.
114 Orchard Ridge Road
Locust, NC 28097-8748
704-301-4881

SHEET 1 OF 1

COUNTY: Mecklenburg
TAX ID: 19503136

OWNER: Alfred B. Shuford
LOCATION: 5021 Mintridge Road
Charlottte, NC 28227

DATE: May 13, 2009

PROFILES		SB1	SB2	SB3							
LANDSCAPE POSITION	.1940	ls	ls	ls							
SLOPE (%)	.1940	4%	4%	4%							
HORIZON 1 DEPTH	.1943	0-12	0-8	0-7							
TEXTURE	.1941 (a)(1)	scl	scl	scl							
CONSISTENCE	.1941	fr	fr	fr							
STRUCTURE	.1941 (a)(2)	gr	gr	gr							
CLAY MINERALOGY	.1941 (a)(3)	se	se	se							
HORIZON 2 DEPTH	.1943	12-56+	8-56+	7-42+							
TEXTURE	.1941 (a)(1)	c	c	c							
CONSISTENCE	.1941	fi	fi	fi							
STRUCTURE	.1941 (a)(2)	sbk	sbk	sbk							
CLAY MINERALOGY	.1941 (a)(3)	se	se	se							
HORIZON 3 DEPTH	.1943										
TEXTURE	.1941 (a)(1)										
CONSISTENCE	.1941										
STRUCTURE	.1941 (a)(2)										
CLAY MINERALOGY	.1941 (a)(3)										
HORIZON 4 DEPTH	.1943										
TEXTURE	.1941 (a)(1)										
CONSISTENCE	.1941										
STRUCTURE	.1941 (a)(2)										
CLAY MINERALOGY	.1941 (a)(3)										
SOIL WETNESS	.1942	-	-	-							
RESTRICTIVE HORIZON	.1944	-	-	-							
SAPROLITE	.1943/.1956	-	-	-							
CLASSIFICATION	.1948	s	s	s							
L.T.A.R. (gpd/ft^2)	.1955	0.3	0.3	0.3							

OTHER FACTORS (.1946):		**SITE LTAR (gpd/ft^2):**	**0.3**
AVAILABLE SPACE (.1945):	provisionally suitable		
SITE CLASSIFICATION (.1948):	provisionally suitable	SYSTEM TYPE:	Accepted or PPBPS
EVALUATED BY:	Larry Thompson	OTHERS PRESENT:	

COMMENTS:

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

Permit Number: _ Tax Number: **19503136**

- The IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be **NO** grading, filling, or disturbance of the soil in the area of the septic tank system or repair area.
- CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a Building Permit. The Construction Authorization is **NOT** transferable. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.
- Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

Basement: ☐ Yes ☒ No ☐ Partial Basement

Primary Wastewater System

Type: ☐ I ☒ II ☒ III ☐ IV ☐ V ☐ VI

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

0.3 Long-term acceptance rate (GPD/ft^2)	**360** Max gallons/day wastewater flow	**300** Absorption Area (ft^2)	**9** Trench spacing (min. on centers) (ft)
Serviced by private well: ☐ Yes ☒ No	**1500** Gallon septic tank	**100** Total trench length (ft)	**36** Maximum trench depth (in) (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions.)
3 Bedrooms in residence	**N/A** Gallon pump tank	**12** Depth of media (in)	

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

Additional conditions: **Install according to consultants design and specifications.**

Repair Area System

Type: ☐ I ☐ II ☐ III ☒ IV ☐ V ☐ VI

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

600 Absorption Area (ft^2) **200** Total trench length (ft)	**16** Depth of media (in)	**9** Trench spacing (min. on centers) (ft)	**36** Maximum trench depth (in)

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

*** No work shall be conducted on the septic tank system until an Installation Approval is granted by this Department.

*** This Improvement permit is transferable.

Jeremy Michael 05-22-09
DENR Authorized Agent Date

Owner/Agent Signature Date

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

NC DENR
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

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

INSTALLATION APPROVAL for an
ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 1789B Permit #: _____ Tax Parcel #: 195-031-36

Property Owner: AL SHUFORD

Job Location Address: 5201 MINTRIDGE RD.

City: CHARLOTTE State: NC Zip Code: 28227

Installation Approval Issuance Date: 06-18-2009

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 [redacted], 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: 360 GPD
Liquid Capacity of Septic Tank: Existing gallons
Site LTAR: 0.3 GPD/ft² (For new installations only.)
Liquid Capacity of Dosing Tank: N/A gallons

Drainfield Design ☐ N/A
Trench Depth: 36 inches
Trench Width: 3 feet
Line Spacing: 9 feet (O.C.)
Total line length: 100 feet
# of Lines: 2 @ 50 feet
Depth of Media: 12 inches (Type) 25% Reduction
Distribution Device: D-Box or Flow Divider.

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: 5 feet
Distance from Property Line: 10 feet
Distance from Water Supply Source: 50 feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)

Install Per Plot Plan
Designed by Larry Thompson LSS

Comments: System Classification & Type: IIIg [redacted]

DENR Authorized Agent: Jeremy Michael Signature: Jeremy Michael

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 #: 1789B Permit #: _____ Tax Parcel #: 195-031-36

Property Owner: AL SHUFORD

Job Location Address: 5201 Mintridge Rd.

City: Charlotte State: NC Zip Code: 28227

Operation Permit Issuance Date: 6-19-2009 Contractor Name: Sid Godskins

Permitted Design Flow: 360 GPD

Liquid Capacity of Septic Tank: Existing gallons

Liquid Capacity of Dosing Tank: N/A gallons

Effluent Pump Model: N/A

Drainfield Installation ☐ N/A

Trench Depth: 36 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 150 feet

# of Lines: 2 @ 50 feet

Depth of Media: 12 inches (Type) Chambers

Depth of Cover: 24 inches

Distribution Device: Flow Divider

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: 50 feet

Inspection Dates

Tank(s) Inspected: Existing

Excavation Inspected: 6-19-2009

Pump & Controls Inspected: N/A

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)

System installed according to consultant design.

The undersigned has inspected the Septic Tank System described above, and certifies it has been ☒ installed ☐ altered ☐ repaired ☐ as detailed in the plot above ☒ in accordance with the permit issued and meets the provisions of 15A NCAC 18A. 1900, "Laws and Rules for Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. The issuance of this Operation Permit does not in any way guarantee that the system will operate properly or relieve any person now or hereafter owning, controlling, or using such system from any liability resulting from the failure of the system to operate properly. This document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 15A NCAC 18A. 1900 in addition to those listed below under "Comments." This document shall be null and void if any information contained in the application is untrue or if any additions are made to the property which would increase the requirements for said system.

Notice: Disturbance of the designated repair area may result in the Suspension or Revocation of this permit.

Comments: System Classification & Type: III g LQ4, G, NA, NA

DENR Authorized Agent: Jeremy Michael Signature: Jeremy Michael

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 #: 1789B Permit #: _____ Tax Parcel #: 195-031-36

Property Owner: AL STUFORD

Job Location Address: 5201 Mintridge Rd.

City: Charlotte State: NC Zip Code: 28227

OPERATION PERMIT CONDITIONS:

I. Performance: System shall perform in accordance with 15A NCAC 18A .1961.

II. Monitoring: System shall be monitored as required by 15A NCAC 18A .1961.

III. Maintenance: Ground absorption sewage treatment and disposal systems shall be checked, and the contents of the septic tank removed, periodically from all compartments, to ensure proper operation of the system. The contents shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.

IV. Operation: System shall be operated in accordance with 15A NCAC 18A .1961.

System Classification: IIIg

*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: 6-19-2009

Signature: Jeremy Michael

Randall, Kelly

Subject: RE: Friday- May 1st ,2009- Property review

From: Al Shuford [mailto:alshu@bellsouth.net]
Sent: Monday, May 04, 2009 7:33 AM
To: Randall, Kelly
Subject: Friday- May 1st ,2009- Property review

Mr. Randall;

Good morning.

First , my thanks for spending an in depth time on physically reviewing my property and addressing my concerns along with my architect and my general contractor. We talked after you had left and "we were all grateful "for the time that you and David spent here and providing some direction on things.

Second, I pulled the list of systems design consultants form the web site as you directed. Can you remind me which one(s) seemed to be the better one or all they all the same? Also can you review some general things that I am to have them review or just was it to design , advise on a new complete system that you had suggested?

Third- finding the pipe in the drain field that got flagged. Can Steve Autry do this or is this some other person/ company?

Fourth- the swimming pool permit that you had signed off on. Is the next step to get a contractor to do "their thing" should we decide to finish pursing that direction, building permit, etc...? Also can you remind me of the approximate square footage that I / we are lacking in the proposed area for land needs?

You were going to follow up with me this morning on the renovation of the attic space of my house; that the county already has as finished- heated square footage in the total of my house for total living area.

Again my thanks and I will look for your response.

By the way camping with the scouts last weekend was interrupted by the thunder storm/ lightening that came rolling thru on Saturday afternoon.. that was not a lot of fun as you can expect.

Thanks,

Al Shuford

Randall, Kelly

From: Al Shuford [alshu@bellsouth.net]
Sent: Sunday, April 26, 2009 5:55 PM
To: Randall, Kelly
Subject: Al Shuford file number-1789B;property-5201 Mintridge Road ; parcel number 195-031-36
Importance: High

Mr. Randall;

The pool application that I had spoke to you about when you called that I sent in on the 16th of April was returned to me by the post office as "undeliverable-return to sender".
I will be taking it to the particular office on Monday morning hopefully by the time that you read this e-mail (8:00 when the office opens).
Then, as you referenced previously; it perhaps will be forwarded to you/ your office for your determination.

Also , Steve Autry had called me on last week-late week and left a message with me that you were going to call me that afternoon for ?????-He just said that" Kelly Randall was gonna call me".

Did I miss your call or did Steve Autry misunderstand and relayed an incorrect message to me?

Is there any new light on the previous matter? I remembered a previous conservation from the year 2006 –(2-11-06) with inspectator Philo Walker that involved some alteration of some sort; ....parts of the conversation involved talking about adding a "dishwasher box" in the lower yard and there was talk of a "step down system" that was employed on one of the drain lines- the one along the fence perhaps; that is some of what comes to mind from then. Perhaps the house would fall under the guidelines from 1986 when it was built?

Like you said " it's easy to say yes". I have been looking for some options on this project and I am willing to explore any viable option that can prove beneficial in reaching / solving this. Steve did tell me that you guys were the one that would have to design changes...which makes me go back to the conversation that I had with Philo back in February 2006. Maybe, he would remember any/some of that should he see the file-perhaps.

From 1986 to this year 2009; surely technology has come some way since that time. would the use of GPR (Ground Penetrating Radar) or x-ray prove beneficial in creating options in mapping and reviewing my property; since the records as I have been told "sorta disappeared" some 6 to 8 years ago- when the introduction of the computer crossover / merging records came along.
Wouldn't some definite/ concrete mapping help out?

I will have my cell phone on once you get this 704-649-4161.
I look forward to speaking with you again on this matter.

Thank-you.

Al Shuford

FEE 100.00
DATE: 4/6/09 BM
CRT

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM
MECKLENBURG COUNTY - GROUNDWATER & WASTEWATER SERVICES
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) [redacted] Fax: (704) 336-5894

GWS – UES.APP 06/07

FILE #: 1789B

TYPE APPLICATION:
- [X] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A / M)
- [ ] ADDITION - RENOVATION OR GARAGE WITH NO MAJOR CHANGES (X)
- [ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
- [ ] COMMERCIAL OR INDUSTRIAL (N)

PERSON FILING APPLICATION:
NAME: Alfred B. Shuford
ADDRESS: 5201 Mintridge Road
CITY: Mint Hill,
STATE: NC ZIP: 28227
PHONE: 704 545-0016
ALTERNATE PHONE: 704 649-4161 cell

PROPERTY OWNER:
NAME: SAME - Alfred B. Shuford
ADDRESS: 5201 ~~Mecklenburg~~ Mintridge Road
CITY: Charlotte - Mint Hill
STATE: NC ZIP: 28227
PHONE: 704-545-0016
ALTERNATE PHONE: 704-649-4161 - cell

JOB LOCATION INFORMATION
TAX/PARCEL #: 19503136
STREET ADDRESS: 5201 Mintridge Road
CITY: Charlotte
STATE: NC ZIP: 28227
SUBDIVISION OR MOBILE HOME PARK NAME: Mintwood Estates 3
LOT #:

TOWNSHIP:
- [ ] 0-MECKLENBURG
- [ ] 1-CHARLOTTE
- [ ] 2-DAVIDSON
- [ ] 3-CORNELIUS
- [ ] 4-PINEVILLE
- [ ] 5-MATTHEWS
- [ ] 6-HUNTERSVILLE
- [X] 7-MINT HILL

WATER SUPPLY:
- [X] MUNICIPAL (M)
- [ ] COMMUNITY (C)
- [ ] PRIVATE WELL (P)
- [ ] SHARED WELL (S)
- [ ] OTHER 'SPRINGS' (O)

RESIDENTIAL PROPERTY TYPE:
- [X] HOUSE (H)
- [ ] MODULAR HOME (M)
- [ ] MULTIPLE FAMILY (U)
- [ ] SINGLE MOBILE HOME (S)
- [ ] DOUBLE WIDE (D)
- [ ] OTHER (O)

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

COMMERCIAL / INDUSTRIAL PROPERTY TYPE:
TYPE OF BUSINESS N/A
EMPLOYEES PER SHIFT N/A
OF SHIFTS N/A
INDUSTRIAL WASTES? [ ] YES [X] NO - N/A
UNDERGROUND STORAGE TANKS? [ ] YES [X] NO N/A

ADDITION TYPE ATTACHED TO EXISTING STRUCTURE:
- [ ] BEDROOM
- [ ] BATHROOM
- [ ] KITCHEN
- [ ] DINING ROOM
- [ ] LIVING ROOM
- [ ] DEN
- [ ] GARAGE
- [ ] SUNROOM
- [ ] PORCH
- [ ] DECK
- [X] OTHER - Study & Store room (*+plus)

- No Baths - Minor kitchen Bump-out

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

* Move rooms inside Home *

"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.

Alfred B. Shuford — Owner's Agent's Signature
04-06-2009 — Date

"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 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
- [ ] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE

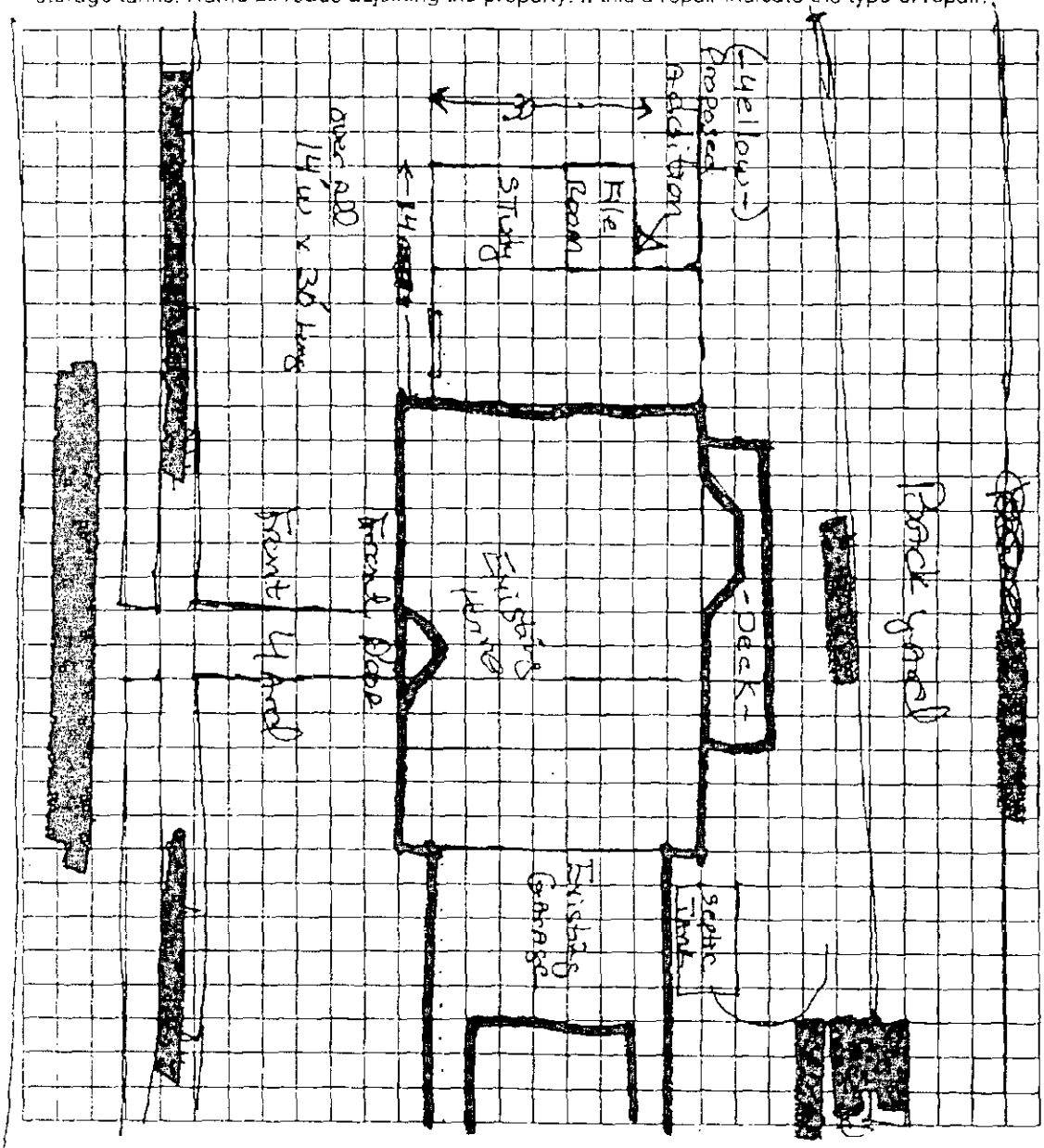
Proposal Does not meet Setbacks off drainfield - Use existing Denied
Jeremy Mikel 4-9-09
EHS Signature — Date

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

File #_____
Date_____

PROPOSED PLOT PLAN

A map showing existing and proposed property lines and easements with dimensions, the location of the single family residence, non-single family residence, or other facility, and appurtenances, the site for the proposed well, and the location of existing or proposed sewer lines and/or sewage disposal systems, surface water bodies, aboveground or underground storage tanks. Name all roads adjoining the property. If this a repair indicate the type of repair.



Owner/Agent Signature Alfred B. Hurlbut

Date 04-06-2009

LBC 12/15/04

MECKLENBURG COUNTY

Land Use & Environmental Services Agency
Groundwater & Wastewater Services

April 9, 2009

Alfred Shuford
5201 Mintridge Rd.
Charlotte, NC 28227

Re: Application for approval to use an existing on-site wastewater treatment & disposal system.
Property Location: 5201 Mintridge Rd.
Health Department file number: **1789B**

Dear Property Owner or Owner's Agent:

On April 8, 2009 the Mecklenburg County Health Department, Groundwater & Wastewater Services Section, evaluated the above-referenced property to determine if approval to use an existing on-site wastewater treatment & disposal system could be granted for your proposed project. This evaluation was done in accordance with the laws and rules governing wastewater systems in North Carolina General Statute 130A-333 and related statutes, Title 15A, Subchapter 18A, of the North Carolina Administrative Code, Rule .1900 and related rules, and the Mecklenburg County Groundwater Well Regulations.

Based on the information provided in the application, dated April 6, 2009, and findings from the site evaluation conducted by our office, your request for approval to use an existing on-site wastewater treatment & disposal system is **not** being granted. This decision is based on the following conditions that were identified during the site visit:

- ☐ The existing on-site wastewater treatment & disposal system was not functioning properly at the time the site evaluation was conducted.
- ☒ The proposed plans do not meet the required setbacks for the on-site wastewater treatment & disposal system serving the property.
- ☐ The proposed plans do not meet the required setbacks for the reserved repair area for an on-site wastewater treatment & disposal system.
- ☐ The proposed plans do not meet the required setbacks for water supply wells.
- ☐ The proposed project will exceed the permitted daily design flow for the existing on-site wastewater treatment & disposal system. System alteration will be required in order to accommodate your proposed project.

If you need any additional information or assistance please contact our office at (704) 336-5103.

Sincerely,

Jeremy Michael R.S.

Jeremy Michael
Environmental Specialist

Encl: (1) Application

$100 Chk 1331 1/31/06

WASTEWATER TREATMENT & DISPOSAL SYSTEM
MECKLENBURG COUNTY - GROUNDWATER & WASTEWATER SERVICES
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

1789B

P.W.

TYPE APPLCATION: 266

- [X] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A / M)
- [ ] ADDITION - RENOVATION OR GARAGE WITH NO MAJOR CHANGES (X)
- [ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
- [ ] COMMERCIAL OR INDUSTRIAL (N)

PERSON FILING APPLICATION:
NAME: Alfred B. Shuford
ADDRESS: 5201 Mintbridge Road
CITY: Charlotte
STATE: NC ZIP: 28227
PHONE: 704-573-1940
ALTERNATE PHONE: 704-649-4161

PROPERTY OWNER:
NAME: Alfred B. Shuford
ADDRESS: 5201 Mintbridge Road
CITY: Charlotte
STATE: NC ZIP: 28227
PHONE: 704-573-1940
ALTERNATE PHONE: 704-649-4161

JOB LOCATION INFORMATION
TAX/PARCEL #: 19503136
STREET ADDRESS: 5201 Mintbridge Road
CITY: Charlotte
STATE: NC ZIP: 28227
SUBDIVISION OR MOBILE HOME PARK NAME: Mintwood
LOT #: 5

TOWNSHIP:
- [ ] 0-MECKLENBURG
- [ ] 1-CHARLOTTE
- [ ] 2-DAVIDSON
- [ ] 3-CORNELIUS
- [ ] 4-PINEVILLE
- [ ] 5-MATTHEWS
- [ ] 6-HUNTERSVILLE
- [X] 7-MINT HILL

WATER SUPPLY:
- [X] MUNICIPAL (M)
- [ ] COMMUNITY (C)
- [ ] PRIVATE WELL (P)
- [ ] SHARED WELL (S)
- [ ] OTHER 'SPRINGS' (O)

RESIDENTIAL PROPERTY TYPE:
- [X] HOUSE (H)
- [ ] MODULAR HOME (M)
- [ ] MULTIPLE FAMILY (U)
- [ ] SINGLE MOBILE HOME (S)
- [ ] DOUBLE WIDE (D)
- [ ] OTHER (O)

NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 3

COMMERCIAL / INDUSTRIAL PROPERTY TYPE:
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:
INDUSTRIAL WASTES? [ ] YES [X] NO
UNDERGROUND STORAGE TANKS? [ ] YES [ ] NO

ADDITION TYPE ATTACHED TO EXISTING STRUCTURE:
- [X] BEDROOM
- [X] BATHROOM
- [ ] KITCHEN
- [ ] DINING ROOM
- [ ] LIVING ROOM
- [ ] DEN
- [ ] GARAGE
- [ ] SUNROOM
- [ ] PORCH
- [ ] DECK
- [ ] OTHER

ADDITION 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.

Alfred B. Shuford 01-30-06
Owner's/Agent's Signature Date

"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 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 y this Department.
- This permit is not transferable.

[ ] ADDITION / RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE
[ ] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE

Bedroom & bathroom addition
Denied
Phila A. Walker RS 2/1/06
EHS Signature Date

Drainfield extends into proposed bedroom area

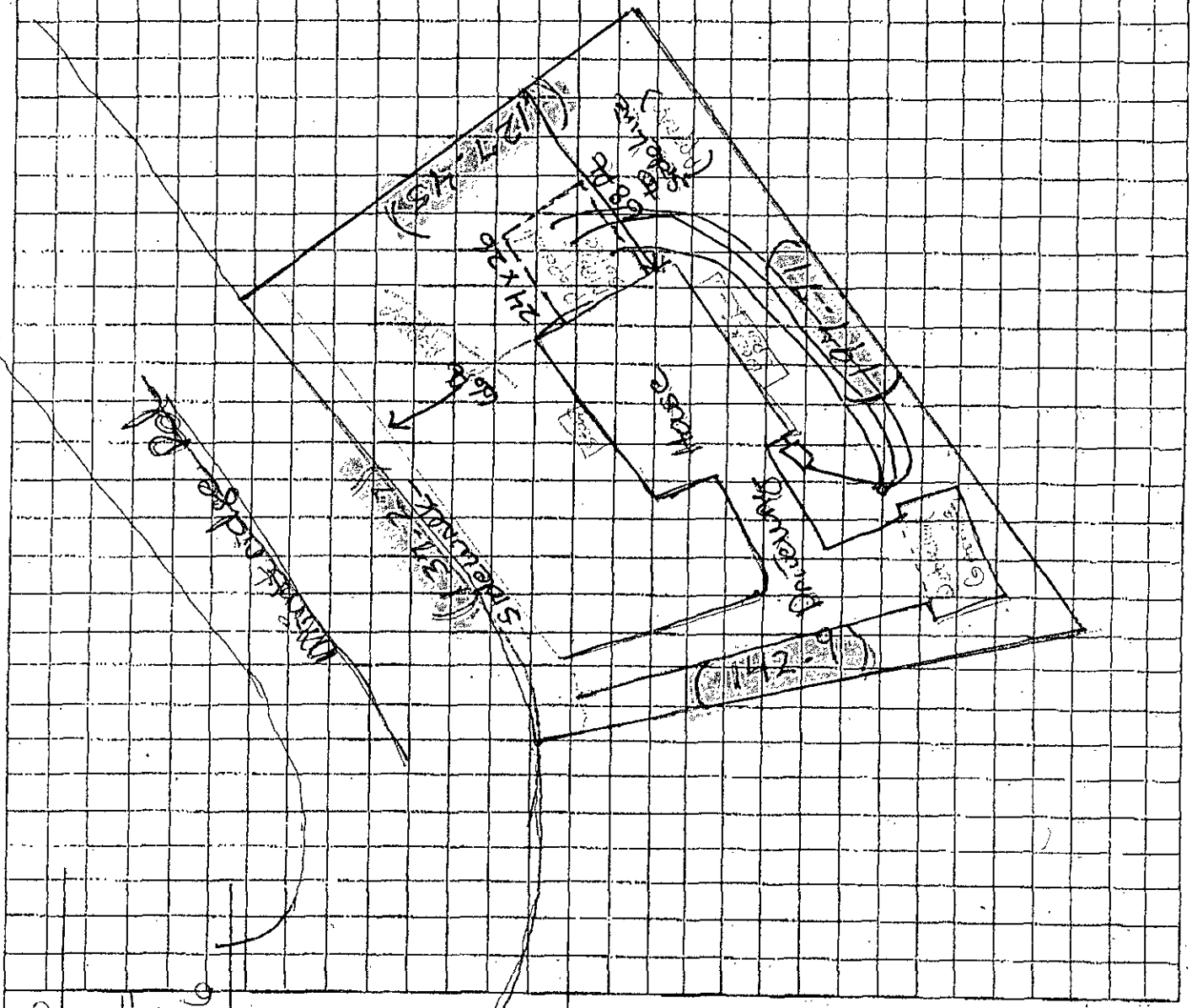
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5103

FILE: 17899

TC: 195-03 [illegible]

COPY

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.



APPROVAL DATE _____

OWNER/AGENT SIGNATURE

DATE 1-4-00

White - Health Department's Copy

Canary - E.H.S. Copy

Pink - Owner's Copy

TOTAL P.02

Parcel ID # 195 03 1 09

2-11-97
Check #150.00

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

[] CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102 1789B

PERSON FILING APPLICATION:

NAME: Shuford (last) Alfred (first) B. (mi)

ADDRESS: 5201 MintRidge PHONE: (704) 545-6016

CITY: Charlotte STATE: N.C. ZIPCODE: 28227

Date:

PROPERTY OWNER:

NAME: Same (last) (first) (mi)

ADDRESS: _____ PHONE: (___) _____

CITY: STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 195-031-36

STREET ADDRESS: 5201 Mint Ridge Rd

ZONING: _____

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
[] 0 Mecklenburg County [] 2 Davidson [] 4 Pineville [] 6 Huntersville
[] 1 Charlotte [] 3 Cornelius [] 5 Matthews [] 7 Mint Hill

TYPE APPLICATION (check one):

LOT NUMBER: LOT #5 LOT SIZE (in acres):

[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (N)

[X] ADDITION - GARAGE/OR RENOVATION/NO MAJOR CHANGES (X)
Detached

RESIDENTIAL PROPERTY (Type Building, check one):
[] SINGLE MOBILE HOME (S) [] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [] MODULAR HOME (M) [] OTHER _____ (O)

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 2

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ___ Per Shift __ __ __
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type _____

WATER SUPPLY (check one):
[] Community (C) [] Shared Well (S)
[] Municipal (M) [] Other 'spring' (O)
[X] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[] Swimming Pool [] Jacuzzi [] Stable/Barn [] Workshop [] None
[] Garage [] Storage Building [] Deck/Patio [] Bedrooms [] 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 agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Alfred B Shuford Date: 2-11-97

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the 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 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.

Disapproved. MSN

[] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

2/14/97 PC w/MS Shuford
2/17/97 OSR No answer@door, No access to backyard - gate locked
2/18/97 Disapproved - proposed garage over portions of filtrication field.

Environmentalist Date

WWATER : 122791

Built 1986

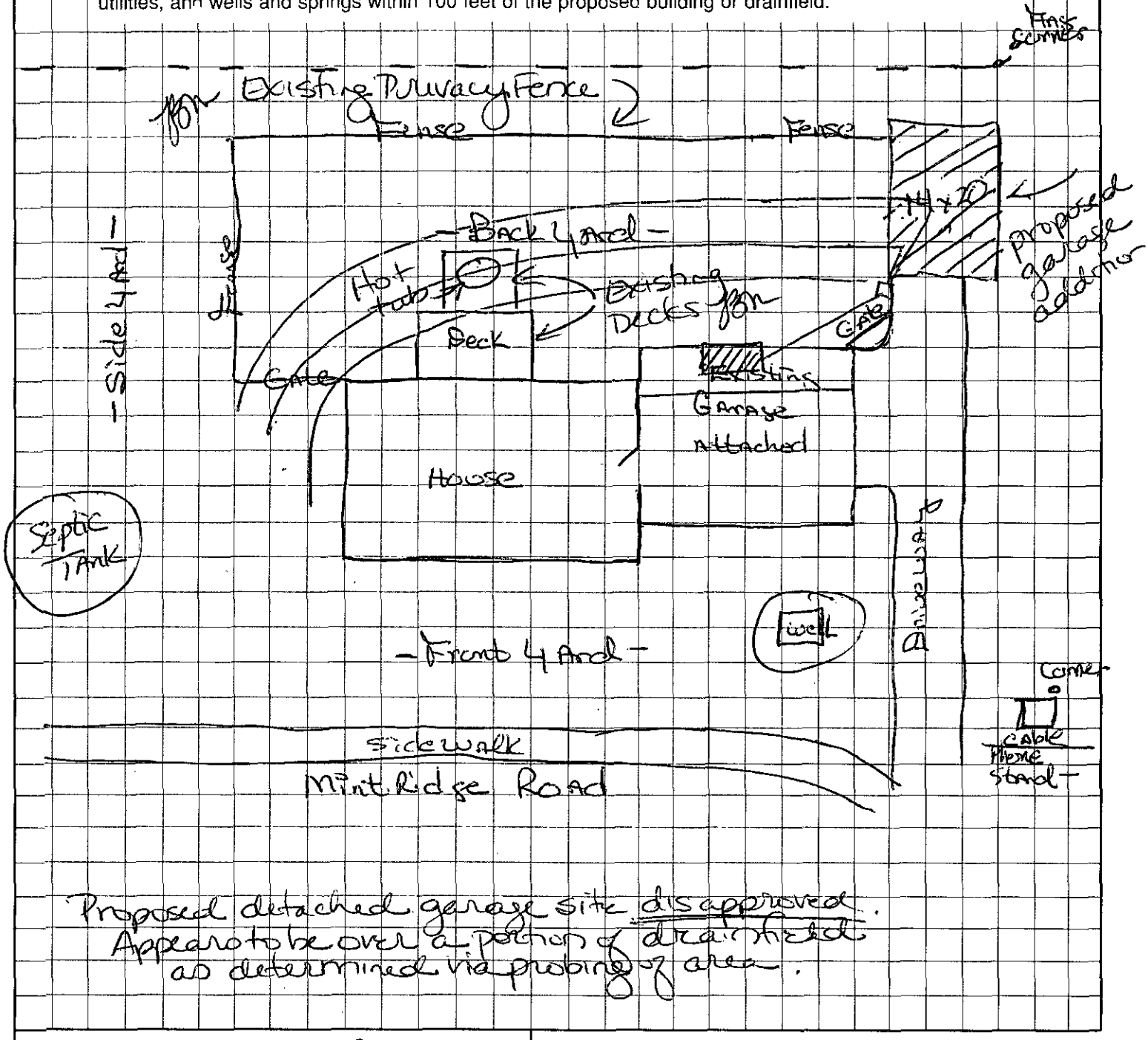
PROPOSED PLOT PLAN

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

FILE: 1789B

TC: 195-031-36

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.



Proposed detached garage site disapproved. Appears to be over a portion of drainfield as determined via probing of area.

Alfred B. Thurrell
OWNER/AGENT SIGNATURE

DATE 2-11-97

APPROVAL DATE

Disapproved
JBM

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

FEE - NA

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

4 UP

X CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202
(704)336-5102

See microfilm 134A 1789B

PERSON FILING APPLICATION:

NAME: Shuford (last) Alfred (AL") (first) B. (mi)

ADDRESS: 5201 Mintridge PHONE: (704) 545-0016

CITY: Charlotte STATE: N.C. ZIPCODE: 28227

Date: 2-20-97

PROPERTY OWNER:

NAME: Same (last) (first) (mi)

ADDRESS: PHONE: ( )

CITY: STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 195-031-36 (5)

STREET ADDRESS: 5201 Mintridge Road

ZONING:

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
[] 0 Mecklenburg County [] 2 Davidson [] 4 Pineville [] 6 Huntersville
[] 1 Charlotte [] 3 Cornelius [] 5 Matthews [X] 7 Mint Hill

TYPE APPLICATION (check one):

LOT NUMBER:

LOT SIZE (in acres): .75

[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (N)

[X] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
- Work Shop -

RESIDENTIAL PROPERTY (Type Building, check one):
[] SINGLE MOBILE HOME (S) [] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [] MODULAR HOME (M) [] OTHER _____ (O)

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 2

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ___ Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type _____

WATER SUPPLY (check one):
[] Community (C) [] Shared Well (S)
[] Municipal (M) [] Other 'spring' (O)
[X] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[] Swimming Pool [] Jacuzzi [] Stable/Barn [X] Workshop [] None
[] Garage [] Storage Building [] Deck/Patio [] Bedrooms [] 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 agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Alfred B. Shuford Date: 2-20-97

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the 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 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.

... 2/21/97 OSV. No one home.
Proposed workshop Stated.
Approval to use existing system for workshop
No plumbing.

[] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[X] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE
Workshop

Eva B. Mialik, RS 2/21/97
Environmentalist Date

Note: Unable to identify original file #.
Tax parcel change? Part of tax parcel off Mintwood?

WATER : 1227

PROPOSED PLOT PLAN

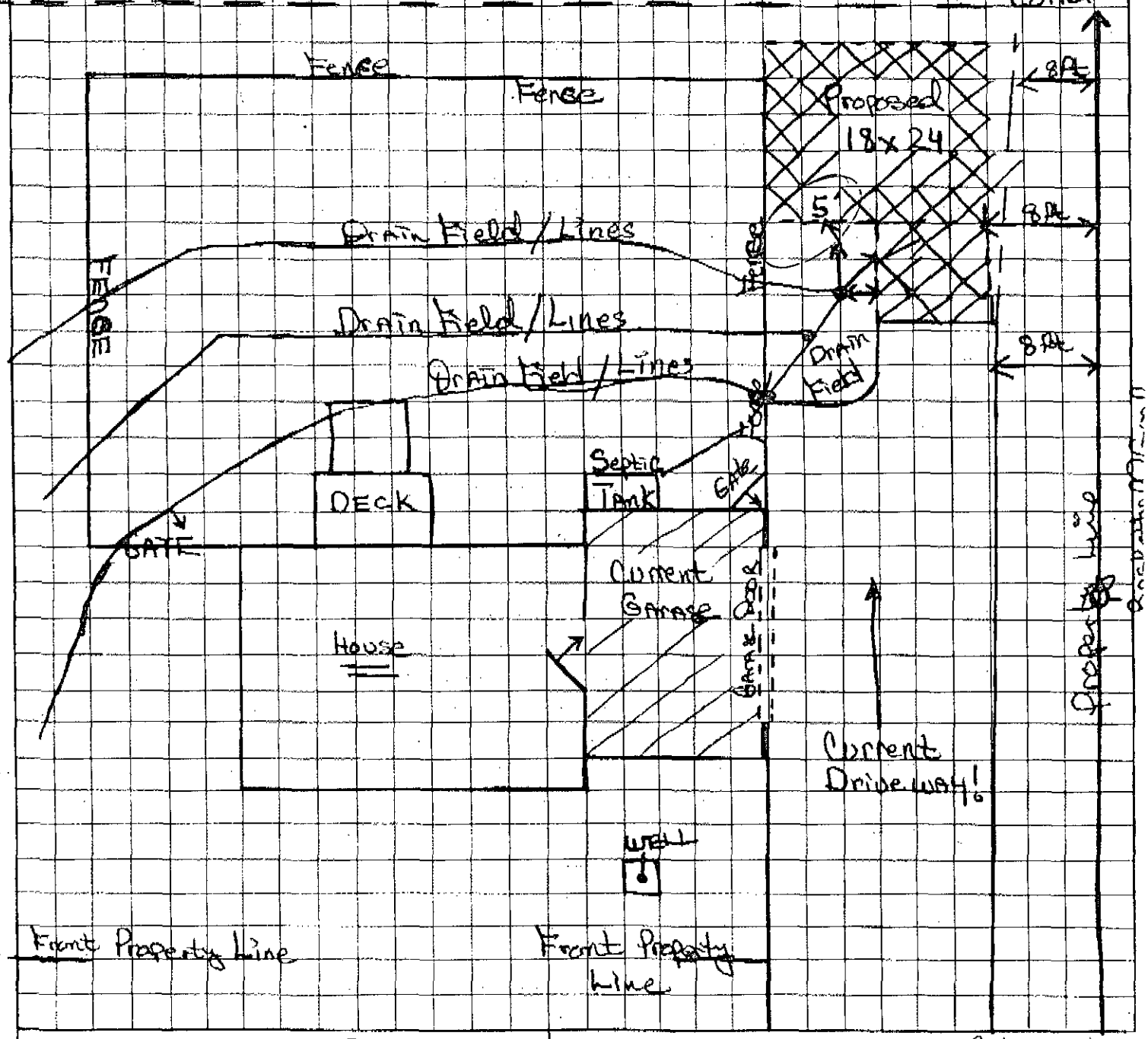
Attn: Lisa
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

#1

FILE: 1789B

TC: 195-031-36 JOH

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.



OWNER/AGENT SIGNATURE

DATE 2-20-96

APPROVAL DATE 2/21/97 Nic B. Malik

UXS for workshop addition - No plumbing.

File 1789B

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

EE - NA

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

File 1789B

[] CRY

Mecklenburg County Health Dept.
Environmental Health Division
c/o Nal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

Date: 2-20-97

PERSON FILING APPLICATION:
NAME: Shuford (last) Alfred (AL) (first) B. (mi)
ADDRESS: 5201 Mintbridge PHONE: (704) 545-0016
CITY: Charlotte STATE: N.C. ZIPCODE: 28227

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 195-031-36
STREET ADDRESS: 5201 Mintbridge Road
ZONING:

PROPERTY OWNER:
NAME: Same (last) (first) (mi)
ADDRESS: PHONE: ( )
CITY: STATE: ZIPCODE:

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
[] 0 Mecklenburg County [] 2 Davidson [] 4 Pineville [] 6 Huntersville
[] 1 Charlotte [] 3 Cornelius [] 5 Matthews [X] 7 Mint Hill

TYPE APPLICATION (check one):

LOT NUMBER:

LOT SIZE (in acres): .75

[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (N)
[] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)

RESIDENTIAL PROPERTY (Type Building, check one):
[] SINGLE MOBILE HOME (S) [] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [] MODULAR HOME (M) [] OTHER _____ (O)

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 2

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ___ Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type _____

WATER SUPPLY (check one):
[] Community (C) [] Shared Well (S)
[] Municipal (M) [] Other 'spring' (O)
[X] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[] Swimming Pool [] Jacuzzi [] Stable/Barn [X] Workshop [] None
[] Garage [] Storage Building [] Deck/Patio [] Bedrooms [] 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 agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Alfred B. Shuford Date: 2-20-97

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the 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 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.

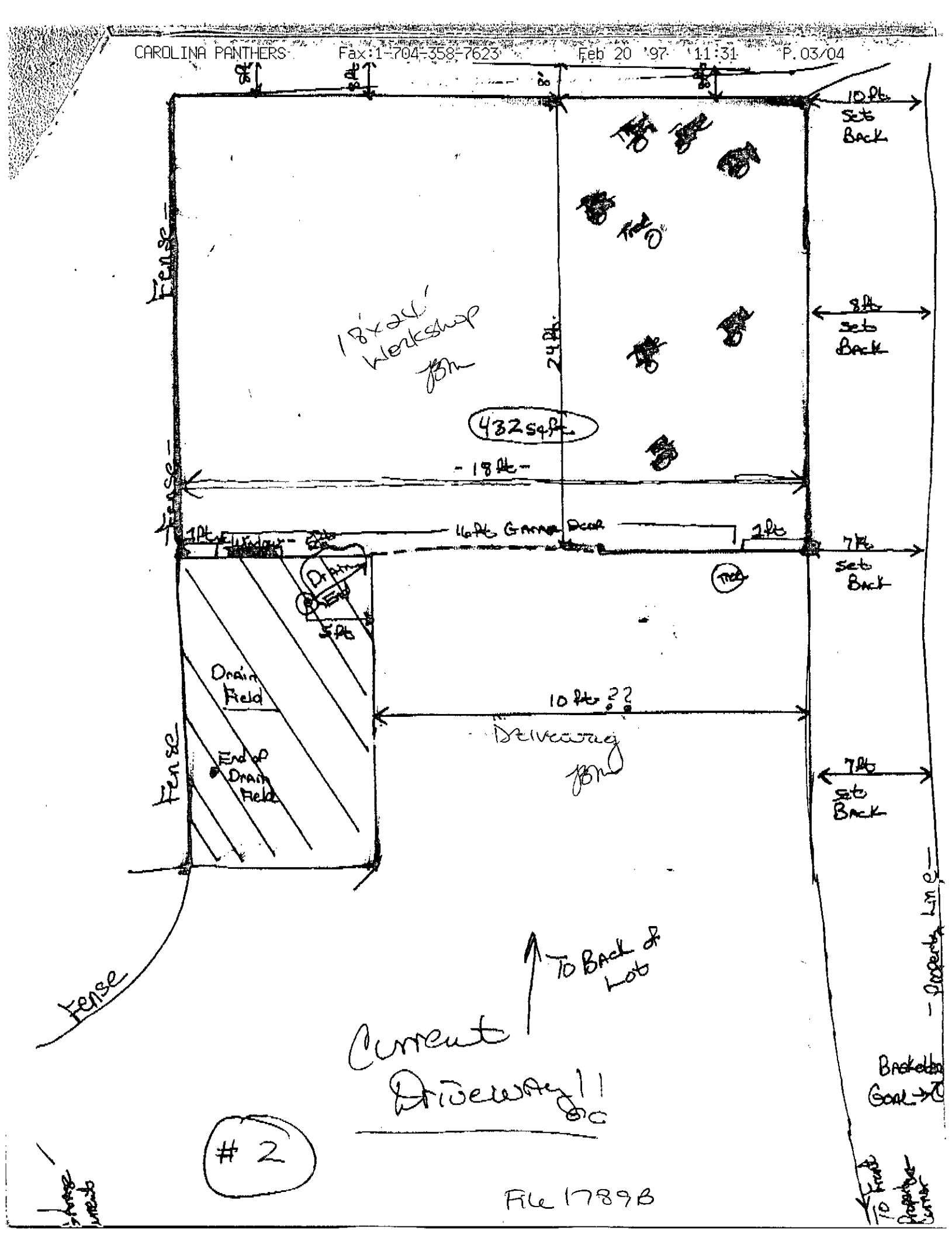
...

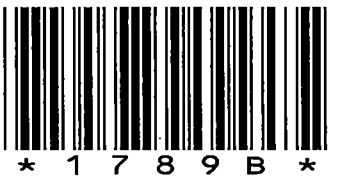
[] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Application lacks addition specification.

Environmentalist Date

WATER : 122791


10 Ft Sets Back
Fense
18'x24' Workshop
24 Ft.
432 sq ft.
8 Ft Sets Back
- 18 Ft -
1 Ft Window
16 Ft Garage Door
2 Ft
7 Ft Sets Back
Drain Field
5 Ft
Drain Field
End of Drain Field
10 Ft ??
Driveway
7 Ft Sets Back
Fense
To Back of Lot
Property Line
Current Driveway!!
Basketball Goal
#2
File 1789B



5201 MINTRIDGE RD

19503136

12/26/2007

duponbj

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

29 + 5
A20122004
OK

LD
6/24/09

Groundwater & Wastewater Services
Septic Project File & Data Review Worksheet

GWS File #: 1789B WASPS App #: 4209

Primary ES assigned to project: LS

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: _____ Were sufficient auger borings made?	Yes ☑	No ☐	N/A ☐
.1939(d), .1955, .1956, .1957	LTAR	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: 6 18 09

OP issued date: 6 19 09

Review performed by: _____ Date performed: 5-29-09

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 05/21/09
Receipt #: 62898
Check / Auth #: VISA 066698
Received By: POWELPT

Amount: 200.00
Tendered: 200.00
Returned: 200.00

Account Information

Account #: 200000
Contractor: SHUFORD, ALFRED B.
Attn:
Address: 5201 MINT RIDGE ROAD
Address:
City/State/Zip: MINT HILL, NC 28227

Item	Description	Permit#	Quantity	Unit Price	Total Price
0706	MH Exc/Add/Repl w/System Mod 5201 MINT RIDGE ROAD		1	200.00	200.00

LUESA SOUTH
1311 MATTHEWS MINT HILL
MATTHEWS, NC. 28105

TERMINAL I.D.: 00319400000801346857701

MERCHANT #: 8013468577

VISA
xxxxxxxxxxxx1748
SALE
RECORD #: 1 INV: 000001
DATE: MAY 21, 09 TIME: 10:52
BATCH: 36
AUTH: 066698

TOTAL $200.00

ALFRED B SHUFORD

X_____

I AGREE TO PAY ABOVE TOTAL AMOUNT
ACCORDING TO CARD ISSUER AGREEMENT
(MERCHANT AGREEMENT IF CREDIT VOUCHER)

MERCHANT COPY

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
40.00					

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	04/06/09	**Amount:**	100.00
Receipt #:	62266	**Tendered:**	100.00
Check / Auth #:	VISA 035075	**Returned:**	0.00
Received By:	MURRABJ		

Account Information

Account #: 200000
Contractor: SHUFORD, ALFRED B.
Attn:
Address: 5201 MINT RIDGE ROAD
Address:
City/State/Zip: MINT HILL, NC 28227

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	MH Exc/Add/Repl w/o System Mod 19503136		1	100.00	100.00

LUESA SOUTH
1311 MATTHEWS MINT HILL
MATTHEWS, NC. 28105

TERMINAL I.D.: 00319400000001346857701

MERCHANT #: 8013468577

VISA
[redacted]5718
SALE
RECORD #: 1 INV: 000001
DATE: APR 06, 09 TIME: 10:24
BATCH: 23
AUTH: 035075

TOTAL $100.00

ALFRED B SHUFORD

I AGREE TO PAY ABOVE TOTAL AMOUNT
ACCORDING TO CARD ISSUER AGREEMENT
(MERCHANT AGREEMENT IF CREDIT VOUCHER)

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
	10.00				