

14330 RAMAH CHURCH RD

01114113

1/2/2008

duponbj

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

Mecklenburg County
Health Department

Conditions of Improvement Permit

File Number: 2892 B
Site Address: 14330 Ramah Church Road

1. The wastewater treatment and disposal system permitted is a gravity flow conventional system.
2. Nitrification trenches shall be constructed as level as possible but in no case shall the fall in a single trench bottom exceed one-fourth inch in 10 feet as determined by an engineer's level or equivalent.
3. Any changes in the site must be pre-approved by the Mecklenburg County Environmental Health Department.
4. The wastewater treatment and disposal drain field area, including the designated repair areas, shall not be used for any of the following:

   - Grading or filling
   - Parking or driving heavy equipment in the area or subjecting the site to possible soil compaction
   - Construction staging area
   - Installation of lawn irrigation components
   - Installation of underground utilities or cables of any type
   - Burial of any debris or material
   - Utilizing the area for gravesites
   - Diversion of storm water runoff into this area

5. Septic system installer must be registered with Mecklenburg County prior to meeting for the required pre-construction conference.
6. System installer will be required to water level the distribution device prior to final system approval.
7. The system owner shall have the contents of the septic tank checked, and the contents of the tank removed, periodically from all compartments, to ensure proper operation of the system. The contents of the septic tank shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.
8. All septic tank riser and effluent filter rules will apply to this system. It is strongly recommended that access risers be added to both ends of the septic tank, extending to at least finish grade. This will allow periodic inspection of the solids level in the tank as well as help facilitate the periodic cleaning of the effluent bio-filter.
9. It is the responsibility of the property owner and/or general contractor to assure that the outlet for the plumbing for the proposed facility is kept at a height which will allow the drain lines to be installed at a depth equal to or less than 30 inches. If septic tank cannot be installed shallow enough to allow for a 30-inch deep drain field installation, a pump and pressure manifold setup will be required. The approximate septic tank location as well as the perimeter of the septic tank drain field has been flagged on the site.

Signature Owner/Agent: Loyd A Selbee Date: 1-5-00

FEE: _____ **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: _____ **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: 1-6-00 PERMIT NO: 2892B
PARCEL NO: 011-141-10

JOB LOCATION ADDRESS: 14330 Ramah Church Road
PROPERTY OWNER: Douglas Selbee
BUILDING CONTRACTOR: _____
SUBDIVISION NAME: _____
AUTHORIZATION ISSUED BY: L B Thompson Jr, C.S. DATE: 1-6-00
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 2892B, 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 conditions of Improvement Permit

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.

Douglas A Selbee 1-5-00
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

Permit Number: 2892B

Tax Number: 011-141-10

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
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	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1

3 Long-term acceptance rate	360 Max gallons/day wastewater flow	1200 Absorption Area (sq ft)	9' Trench spacing (min. on centers)
Yes Serviced by private well	1500 Gallon septic tank	400 Total trench length (ft)	24" Maximum trench depth (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 stone	

Any surface waters present: Type: Minimum separation distance:

Site modifications required:

Additional Conditions: - Keep well >100' from any part of the septic system
- Keep trench bottoms level and on contour.

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	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1

1200 Absorption Area (Sq ft) 400 Total Trench Length (Ft)	12" Depth of Stone Trench	9' Trench spacing (min. on centers)	24" 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.

H B Thompson J.R.S. 1-6-00
DEHNR Authorized Agent Date

Doug A Allen 1-5-00
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

IWWS 1001-95

FOR REGISTRATION JUDITH A. GIBSON
REGISTER OF DEEDS
MECKLENBURG COUNTY, NC
2000 JAN 05 01:26 PM
BOOK: 11014 PAGE: 715-719 FEE: $14.00
INSTRUMENT # 2000001200

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

WASTEWATER TREATMENT AND DISPOSAL SYSTEM DESIGN AGREEMENT: 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c); OR .1969

FILE # 2892 B
PARCEL # 011-141-10 PO

The undersigned, DOUGLAS A. SELBEE, owner of property located at 14330 Ramah Church Road, (the "site") and described in an instrument recorded in Book _____ at Page _____, Mecklenburg Public Registry, hereby acknowledges that the undersigned applied to the Mecklenburg County Health Department (the "Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 15A NCAC 18A .1900 et seq.; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data, and other information which indicate to the Department that the septic tank system proposed by the undersigned is allowed by the rules; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is the responsibility of the designer, owner, developer, installer, or user of the system, as applicable, and that neither the Department nor its officials, employees, or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further acknowledges that the following conditions will apply to the site:

- Any changes on the property may make the Improvement Permit Null and void and may make the Improvement Permit subject to revocation.

This instrument was prepared by: MECKLENBURG COUNTY HEALTH DEPT.
Mail after recording to: DOUGLAS A. SELBEE
8730-16 PINNACLE CROSS DR
HUNTERSVILLE, NC 28078

4

RBCWM 24751 1/8-30-95

QM

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees, and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, this 5TH day of JANUARY, ~~199~~ 2000

_____ (SEAL)
(Corporate Name)

By: _____

_____ President

ATTEST:

_____

_____ Secretary

(Corporate Seal)

Douglas A Sellers (SEAL)

_____ (SEAL)

_____ (SEAL)

_____ (SEAL)

STATE OF NORTH CAROLINA
COUNTY OF Cabarrus

I, Elouise Beaver, a Notary Public for said County and State, do hereby certify that Douglas Sellers personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 5 day of Jan, 1992000.

Elouise Beaver
Notary Public

My Commission Expires:
11-18-2001

Memorandum

To: Douglas A. Selbee

CC: File 2892 B

From: Larry Thompson, Jr., R.S.

Date: 06/18/99

Re: 14330 Ramah Church Road

Enclosed you will find a Wastewater Treatment and Disposal System Design Agreement form that will need to be signed, notarized and recorded before an Improvement Permit can be issued on the above referenced property. This office will require a copy of the recorded agreement form.

The agreement form reclassifies the lot from unsuitable to provisionally suitable in light of the particular septic system proposed (saprolite system).

If the lot is to be surveyed we will need a copy of the plat of the acreage that you propose to develop. I will not prepare an Improvement Permit until either you notify me that the tract of land will remain as is or you provide me with the plat for the subdivided acreage. Normally I can prepare the permits within 3-5 working days.

Please let me know if you have any questions regarding this memo.

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

#1 (40')

Sheet: _____
Property ID: PO 011-141-10
Lot #: _____
File #: 25928

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Douglas A. LeBlanc APPLICANT: _____
ADDRESS: 132 Hogan Pond Lane, Mooresville DATE EVALUATED: 5-27-99
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949) 360gpd PROPERTY SIZE: .5
LOCATION OF SITE: 14330 Ramah Church Road 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 %	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 (2-6% SLOPE)	0-5"	gr/ls/	FR/SEXP/~~SS~~NS/NP	756" TO SOIL WETNESS	33"	PS	None	PS (saprolite) .39/F2 II
		5-16"	ABK SBK/C	VFR/Mixed/VP/S					
		16-33"	some platy SBK	FR/SEXP/SS/SP					
		33-56"	M/L	FR-FR/SEXP/SS/SP					
2	LS	0-5"	gr/ls/	FR/SEXP/SS/SP	762" TO SOIL WETNESS	22"	PS	None	PS (SAP) II .39/F2
		5-22"	ABK C	VFR/Mixed/VS/P					
		22-62"	M/SL	FR/SEXP/NS/NP					
3	LS	0-4"	gr/ls/	FR/SEXP/NS/NP	761" TO ~~SAP~~ SOIL WETNESS	34"	PS	None	PS (SAP) II .39/F2
		4-34"	ABK/C	VFR/Mixed/VS/P					
		34-61"	M/L	FR/SEXP/SS/SP					
4	LS	0-6"	gr/ls/	FR/SEXP/NS/NP	760" TO SOIL WETNESS	35"	PS	None	PS (SAP) II .39/F2
		6-35"	SBK/ABK/C	VFR/Mixed/VS/P					
		35-60"	M/L	FR-FR/SEXP/SS/SP					
5	LS	0-6"	gr/ls/	FR/SEXP/NS/NP	733" TO SOIL WETNESS	33"	PS	None	PS (SAP) II .39/F2
		6-33"	SBK/C	FR/SEXP/S/P					
		33-60"	M/L	FR/SEXP/SS/SP					
6	~~LS~~ R	0-6"	gr/ls/	FR/SEXP/NS/NP	743" TO SOIL WETNESS	43"	N/A	None	PS .39/F2 IV
		6-26"	SBK/C	FR/SEXP/SS/P					
		26-43"	SBK/SEC/	FR/SEXP/SS/SP					

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): Provisionally Suitable
EVALUATED BY: W.R. Marlin LSS 5-28-99
OTHER(S) PRESENT: _____

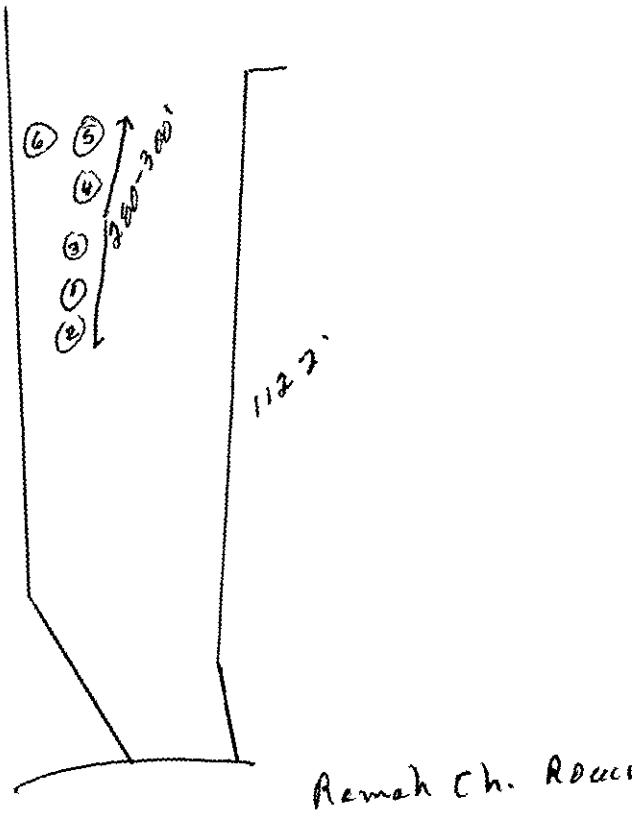
FILE # 2692B

COMMENTS OWTS Repair Area - system to be installed in topsoil see Agreement Form

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			

N

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



FEE: [redacted] 783

D/[redacted] 3-11-99 VH

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

I I 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 #: 28928

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 011-141-10P0

STREET ADDRESS: 14330 RAMAH CHURCH RD.

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

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/W. GAR. 2276 SF / 3476

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 2

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 UNKNOWN AT THIS TIME, APPROX. 8-1-99

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: SELBEE DOUGLAS A. (LAST) (FIRST) (MI)	NAME: (LAST) (FIRST) (MI)
ADDRESS: 122 HAGER POINT LN.	DAYTIME PHONE: ( ) -
CITY: MOORESVILLE STATE: NC, ZIP: 28117	8730-16 Pinnacle Cross Dr
DAYTIME PHONE: (704 663-6979) 892-5303	Huntersville NC 28078

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? DEEDING IN PROCESS NOW

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: Douglas A. Selbee DATE: 3-11-99

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

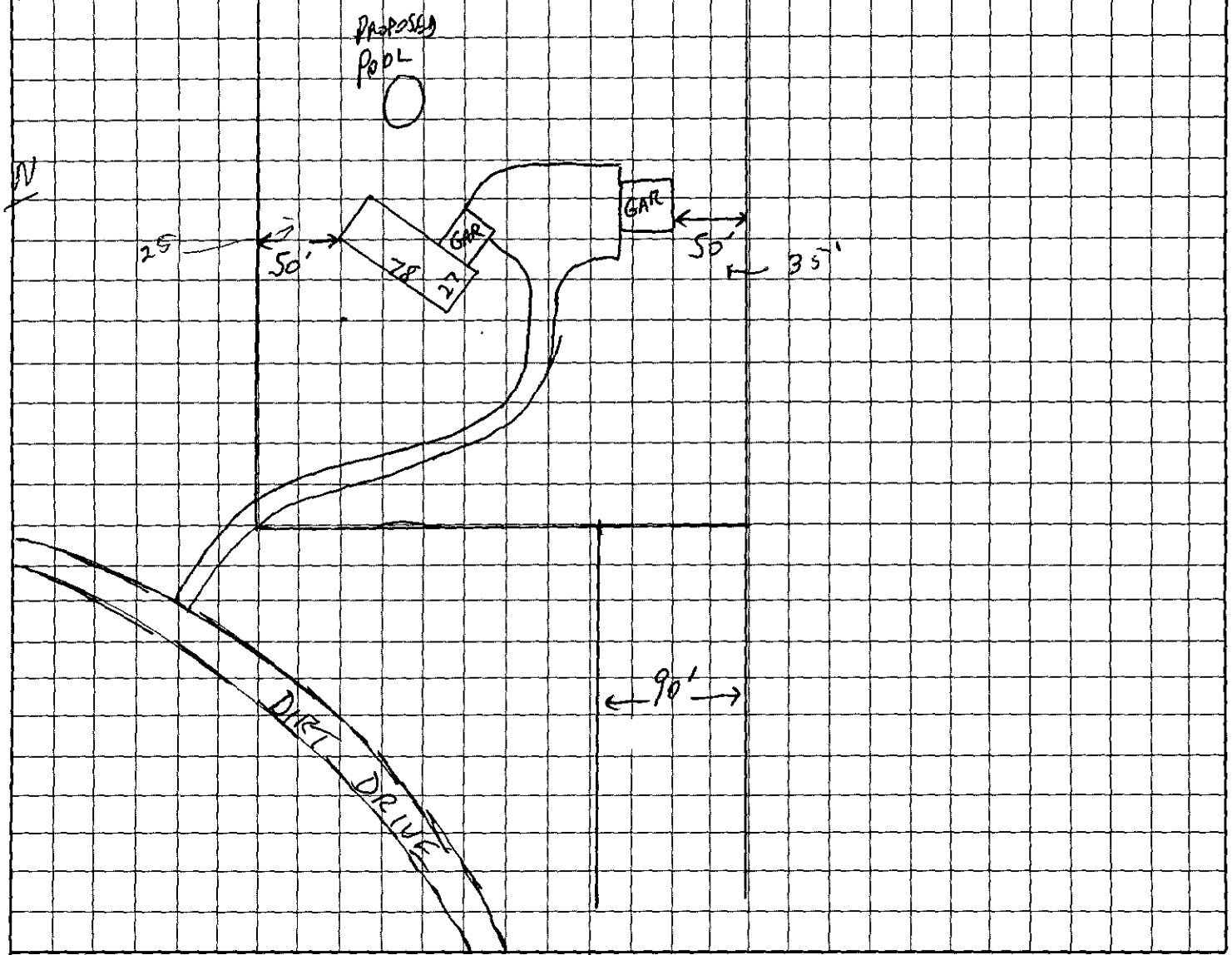
PROPOSED PLOT PLAN

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

FILE: 2892B

TC: 011-141-10PO

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.



Douglas A. Gilbee
OWNER/AGENT SIGNATURE

DATE 3-11-99

APPROVAL DATE _____

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

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

#3

Sheet: _____
Property ID: RO 011-144-10
Lot #: _____
File #: 2892B

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Douglas A. Selbee
APPLICANT: _____
ADDRESS: 132 Wagon Point Lane, Mooresville
DATE EVALUATED: 4-7-99
PROPOSED FACILITY: residence
PROPOSED DESIGN FLOW (.1949) 360gpd
PROPERTY SIZE: Approx 1 Acre
LOCATION OF SITE: 1430 330 Ramah Church Road
PROPERTY RECORDED: _____

WATER SUPPLY: ☑Private ☐Public ☐Well ☐Spring ☐Other _____
EVALUATION METHOD: ☑Augur Boring ☐Pit ☐Cut
TYPE OF WASTEWATER: ☐Sewage ☐Industrial Process ☐Mixed

PROFILE #	Slopes 2-4% .1940 Landscape Position/ Slope %	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	0-4"	gr/sl	Fr/SEXP/NS/NP	725" TO soil wetness	25"	N/A	None	US
		4-25"	SBK/C	VFi/Mixed/VS/VP					
2	LS	0-5"	gr/scl	Fr/SEXP/SS/SP	719" TO soil wetness	19"	N/A	None	US
		5-19"	SBK/SC	VFi/Mixed/VS/VP					
3	LS	0-5"	gr/scl	Fr/SEXP/SS/SP	> 35" TO soil wetness	35"	N/A	None	US
		5-30"	SBK/SC	VFi/SEXP/VS/VP					
		30-35"	M/scl	Fi/Mixed/SS/SP					
4	LS	0-4"	gr/scl	Fr/SEXP/SS/SP	> 36" TO soil wetness	36"	N/A	None	US
		4-36"	SBK/SC	VFi/Mixed/VS/VP					
			possible plow structure @ 30"						

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): Unsuitable
EVALUATED BY: W. R. Marlin LSS - 4-8-99
OTHER(S) PRESENT: _____

FILE # 2892B

F

COMMENTS Probably 100% Pepperi

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

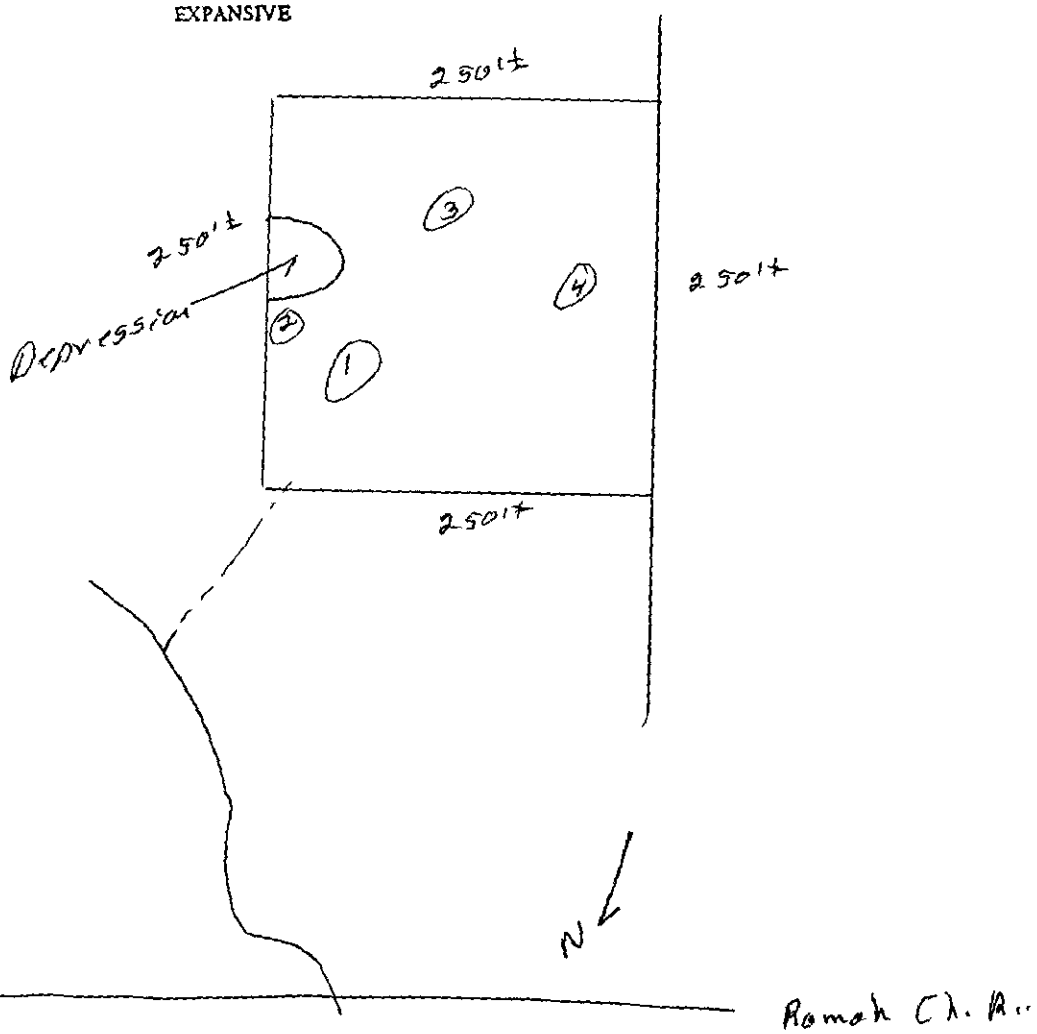
STRUCTURE

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

MINERALOGY

SLIGHTLY EXPANSIVE

EXPANSIVE



Pd. 75.00
Ck #809
MW
4-23-99
2nd site.

Mecklenburg County
Health Department

April 13, 1999

Douglas Selbee
132 Hager Point Lane
Mooresville, NC 28117

Re: 14330 Ramah Church Road
File: 2892B
Parcel: 011-141-10PO

Dear Property Owners:

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)**, .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 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 date 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, R.S.
Individual Water and Wastewater Systems

OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
ENVIRONMENTAL HEALTH
TEWATER SECTION

#3

Sheet: _____
Property ID: 00 011- 144-10
Lot #: _____
File #: 2992B

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

APPLICANT: Douglas A. Sellers
OWNER: 132 Hagen Point Lane, Mooresville
DATE EVALUATED: 4-7-99
FACILITY: residence PROPOSED DESIGN FLOW (.1949) 360 gpd PROPERTY SIZE: Approx 1 Scre
OF SITE: 144 330 Ramah Church Road PROPERTY RECORDED: _____

Y: ☑Private ☐Public ☐Well ☐Spring ☐Other _____

ION METHOD: ☑Augur Boring ☐Pit ☐Cut

PE OF WASTEWATER: ☐Sewage ☐Industrial Process ☐Mixed

DEPT. OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES DIVISION OF ENVIRONMENTAL HEALTH ON-SITE WASTEWATER SECTION

PROFILE #	Slope 2-7% .1940 Landscape Position/ Slope %	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	0-4"	gr/ sl	Fr/SEXP/NS/NP	25" TO soil wetness	25"	N/A	None	US
		4-25"	SBK/C	VF:/ Mixed/ US/ VP					
2	LS	0-5"	gr/sc/	Fr/SEXP/SS/SP	19" TO soil wetness	19"	N/A	None	US
		5-19"	SBK/SC	VF:/Mixed/US/VP					
3	LS	0-5"	gr/sc/	Fr/SEXP/SS/SP	> 35" TO soil wetness	35"	N/A	None	US
		5-30"	SBK/ SL	UF:/ SEXP/US/VP					
		30-35"	M/ sc/	F:/ Mixed/SS/SP					
4	LS	0-4"	gr/sc/	Fr/SEXP/SS/SP	> 36" TO soil wetness	36"	N/A	None	US
		4-36"	SBK/ SL	UF:/ Mixed/ US/ VP					
			possible plow						
			stvarture @ 30"						

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): Unsuitable
EVALUATED BY: W. R. Marlin LSS - 4-8-99
OTHER(S) PRESENT: _____

FILE # 2812B

COMMENTS Probably 100% Reserve

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

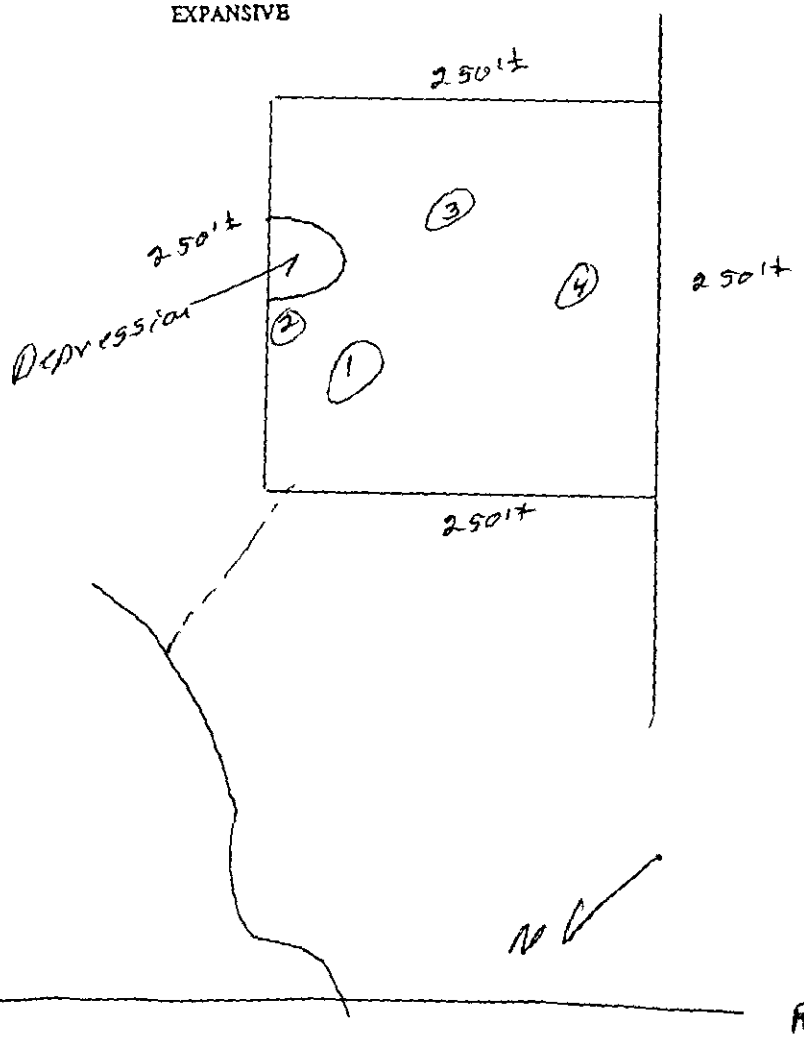
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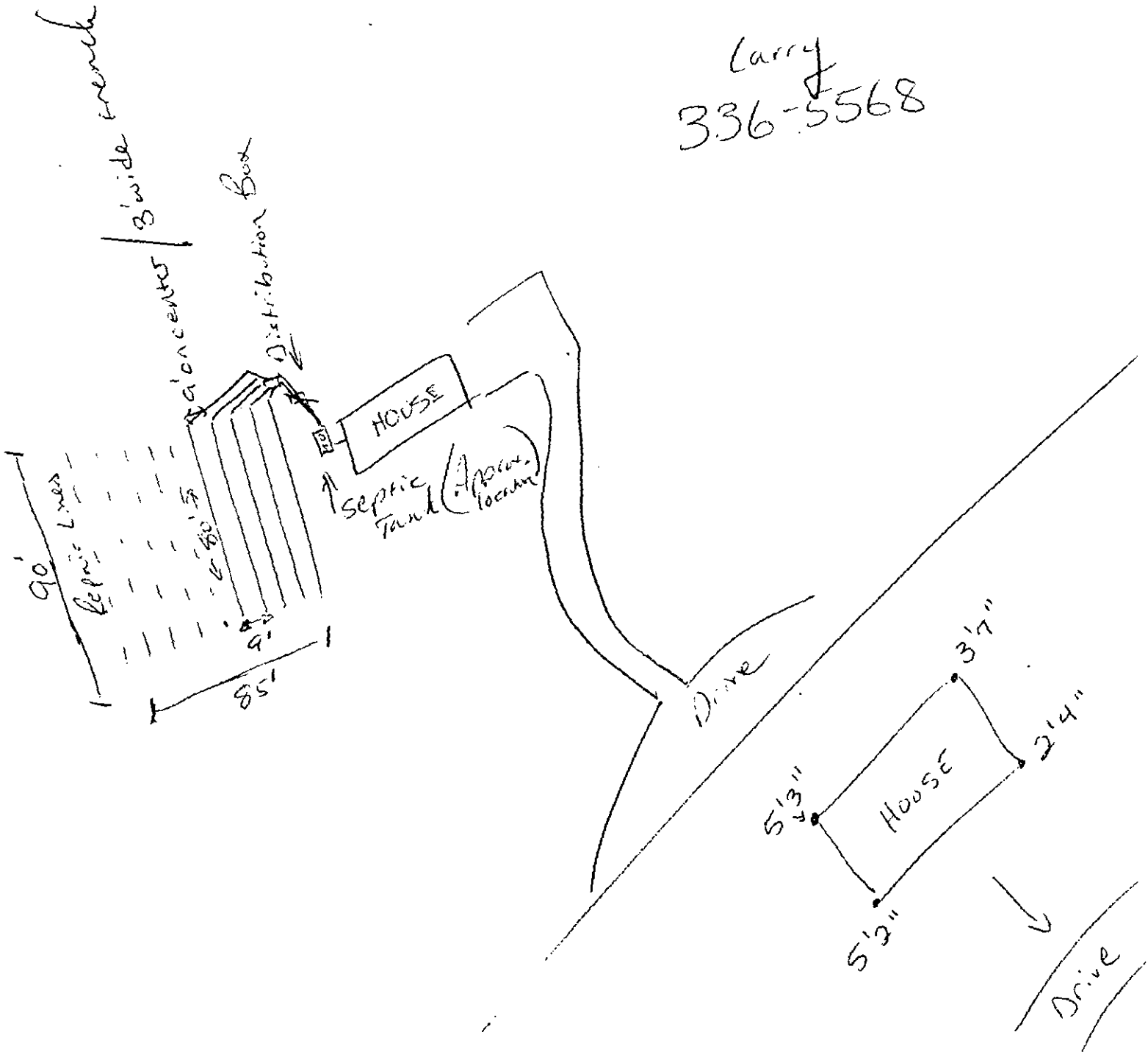
EXPANSIVE



Roman Ch. Rd.

* Lines as flagged 85 - 90'
* every other drain line, flag is bent at 90° =
* minimum area required 85' wide x 90' length
* may be able to squeeze out 100' long lines
* flags are within 3" of being level - on center

Larry
336-5568



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

[ ] CRT

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 #: 28726

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 011-141-10P0

STREET ADDRESS: 14330 RAMAH CHURCH RD.

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

TOWNSHIP (CHECK ONE):

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

CLOSING DATE ANKNOWN AT THIS TIME, APPROX. 8-1-99

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: W. GAR. 3468

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 2

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:

NAME: SELBEE DOUGLAS A.
(LAST) (FIRST) (MI)

ADDRESS: 122 HAGER POINT LN.

CITY: MOORESVILLE STATE: NC. ZIP: 28117

DAYTIME PHONE: (704) 663-6919

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME:
(LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) —

(WORK)
377-3633

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? DEEDING IN PROCESS NOW

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: Douglas A. Selbee DATE: 3-11-99

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

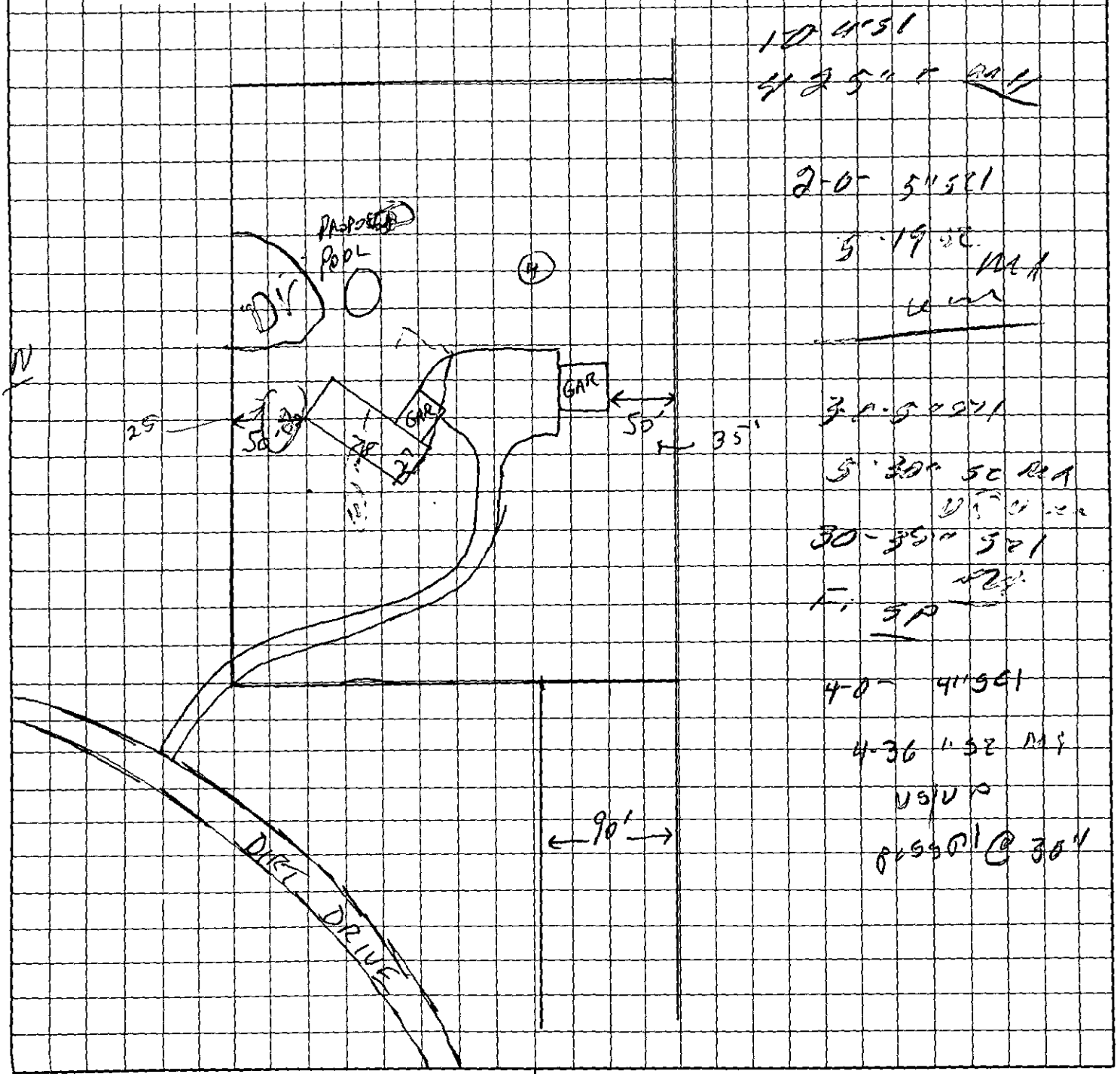
PROPOSED PLOT PLAN

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

FILE: 2892B

TC: 011-141-10PO

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 03-11-99

APPROVAL DATE _____

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