SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

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

File Number: 7682A

Assigned Inspector: Kim Garrett

☐ IP $250.00: _____Initial/Date

☐ IP Commercial $450.00: _____ Initial/Date

☐ CA & OP $400.00: _____ Initial/Date

☐ Alteration Fees $300: _____Initial/Date

☐ Modified Plot Plan Fees $100.00: _____Initial/Date

☐ Use Existing Fees $100.00: _____Initial/Date

☐ Use Existing Approved ☐ Use Existing Denied

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

☐ Floor plans reviewed

☐ Generate CA ☐ Approve as Noted in Winchester

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

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

☐ Certified operator contract is on file: _____

☐ Septic file complete: _____

☐ Release final hold in Winchester: _____

Comments: Repair Complete / NOV Complete

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

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

File #: 7682A Permit #: _____ Tax Parcel #: 019-181-46

Property Owner: John & Beatrice Cabrera

Job Location Address: 14115 Asbury Drive

City: Huntersville State: NC Zip Code: 28078

Operation Permit Issuance Date: 8/21/23 Contractor Name: Greenway

Permitted Design Flow: 360 GPD Liquid Capacity of Dosing Tank: NA gallons

Liquid Capacity of Septic Tank: existing gallons Tank Manufacture NA Effluent Pump Model: NA

Drainfield Installation ☒ N/A

Trench Depth: _____ inches

Trench Width: _____ feet

Line Spacing: _____ feet (O.C.)

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Depth of Cover: _____ inches

Distribution Device: _____

Bed Installation *(For Repair Installations ONLY.)* ☐ N/A

Bed Depth: 48 inches

Bed Width: 12 feet

Total line length: 240 feet

# of Lines: 4 @ 60 feet

Depth of Media: 30 inches (Type) 12" SAND / 18" STONE

Depth of Cover: 18 inches

Distribution Device: D-BOX

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

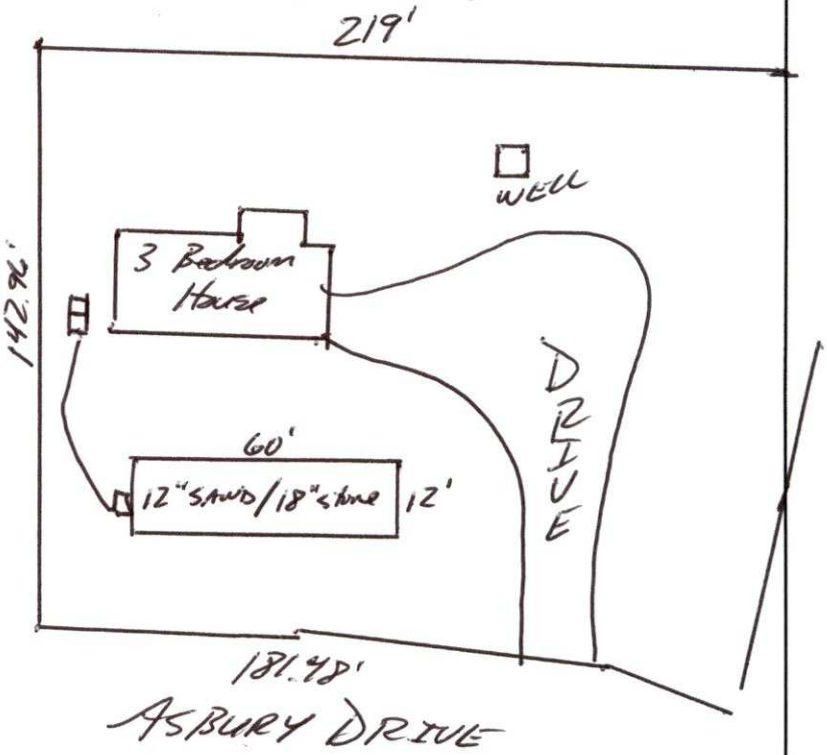
Inspection Dates

Tank(s) Inspected: NA

Excavation Inspected: 8/21/23

Pump & Controls Inspected: NA

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)



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

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

Comments: System Classification & Type: Type IIa / GBD / NA / NA

DENR Authorized Agent: Jerry Mick Signature: Jerry Mick

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

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

File #: 7682A Permit #: _____ Tax Parcel #: 019-181-46

Property Owner: John & Beatrice Cabrera

Job Location Address: 14115 Ashley Drive

City: Huntersville State: NC Zip Code: 28078

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: IIa

*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: 2023 Repair

DENR Authorized Agent: Jeremy Mundt Date: 8/21/23

Signature: Jeremy Mundt

Request: Sewage Complaint 29247

Address: 14115 ASBURY DR

Initiated By: Moore, Samantha
Date Initiated: 2/27/2023 9:52:39 AM

Submitted To: GARRETT, KIMBERLY
Details: CALLER REPORTS BAD ODOR COMING FROM NEIGHBOUR'S SEPTIC SYSTEM

JIMMY CHILDRESS 704-307-7791

Comments:
Location:

owners
Betty Cabrera -
John Michael Cabrera - 704.904.7310

cabrera9336@gmail.com

Garrett, Kimberly

From: Garrett, Kimberly
Sent: Thursday, March 2, 2023 1:19 PM
To: cabrera9336@gmail.com
Subject: septic repair application; repair permit
Attachments: Residential Permit Application - Septic.pdf; Repair permit_14115 Asbury Drive.pdf

Good morning,

Please find attached an application that you can complete and submit to the following email address: wellreg@mecknc.gov

I need an application for the septic repair permit that I have already issued and attached to this email to complete the project file.

You can use the attached repair permit to get price quotes from certified septic contractors. Once the house is occupied again, please keep an eye on the drain field. If the drain field area stays wet and effluent begins to surface you will need to move forward with having a repair bed installed.

Please contact me if you have additional questions or concerns.

Sincerely,
Kim

Kim Garrett, REHS
Sr. Environmental Health Specialist
Mecklenburg County Public Health
Environmental Health Division
980-721-2054 (cell)
Kimberly.garrett@mecklenburgcountync.gov

Garrett, Kimberly

From: Garrett, Kimberly
Sent: Thursday, April 13, 2023 9:14 AM
To: cabrera9336@gmail.com
Subject: Notice of Violation for septic system
Attachments: Repair permit_14115 Asbury Drive.pdf

Please find attached an NOV for the failing septic system. I have also attached a repair permit that was issued in March. Please proceed with contacting a certified septic installer to schedule the repair work as soon as possible.

If you have additional questions or concerns, please contact me at 980-721-2054.

Sincerely,
Kim

Kim Garrett, REHS
Sr. Environmental Health Specialist
Mecklenburg County Public Health
Environmental Health Division
980-721-2054 (cell)
Kimberly.garrett@mecklenburgcountync.gov

N.C. Department of Environment & Natural Resources / Division of Environmental Health

NOTICE OF VIOLATION
ON-SITE WASTEWATER SYSTEM

☐ Certified Mail (Return Receipt) ☒ First Class Mail ☐ Hand Deliver

Owner: John Michael & Beatriz Cabrera

Mailing Address: 9336 White Aspen Place
Charlotte, NC 28269

Occupant: family member

Location: 14115 Asbury Drive
Huntersville, NC 28078

☒ Residence ☐ Business ☐ Other

You are hereby notified that you are violating the Rules adopted by the North Carolina Commission for Health Services or Article 11 of Chapter 130A of the General Statutes of North Carolina by owning or controlling a residence, place of business, or place of public assembly which is not provided with an approved wastewater system. Your wastewater system is not in compliance.

On April 12, 2023 an inspection of the wastewater system by the Mecklenburg County Health Department indicated the following violations:

Violation/s

Observed a discharge of sewage to the surface of the ground or surface water.
[G.S. 130A-335(a) 15A NCAC 18A. 1961(a)(1)(A)]

You are hereby ordered to bring your wastewater system into compliance by completing the following:

☒ Install / Repair wastewater system. You must obtain a repair permit from the local health department prior to the repair of your system.

☐ Other Repairs *(Specify):*

☐ Eliminate wastewater discharge and connect to an approved wastewater system.

☐ Perform Maintenance *(Specify):*

If the wastewater violation is not brought into compliance by **May 14, 2023** appropriate legal action will be taken.

Failure to comply with laws, rules, and this notice will subject you to the following legal remedies; Injunction Relief [G.S. 130A-18], Administrative Penalties [G.S. 130A-22], Suspension or Revocation of Permits [G.S. 130A-23], and Criminal Penalties [G.S. 130-25].

For questions regarding this notice you should contact Kim Garrett at 980-721-2054.

Notice Issued: 4/13/23 (Date) — Kim Garrett, REHS (DENR/DEH Authorized Agent)

Compliance: 8/21/23 (Date) — Kim Garrett, REHS (DENR/DEH Authorized Agent)

Mecklenburg County – Groundwater & Wastewater Services
3205 Freedom Drive, Suite 8000 Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

Polaris 3G Map – Mecklenburg County, North Carolina

Date Printed: 8/21/2023 11:41:01 AM



This map or report is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, planimetric maps, and other public records and data. Users of this map or report are hereby notified that the aforementioned public primary information sources should be consulted for verification. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

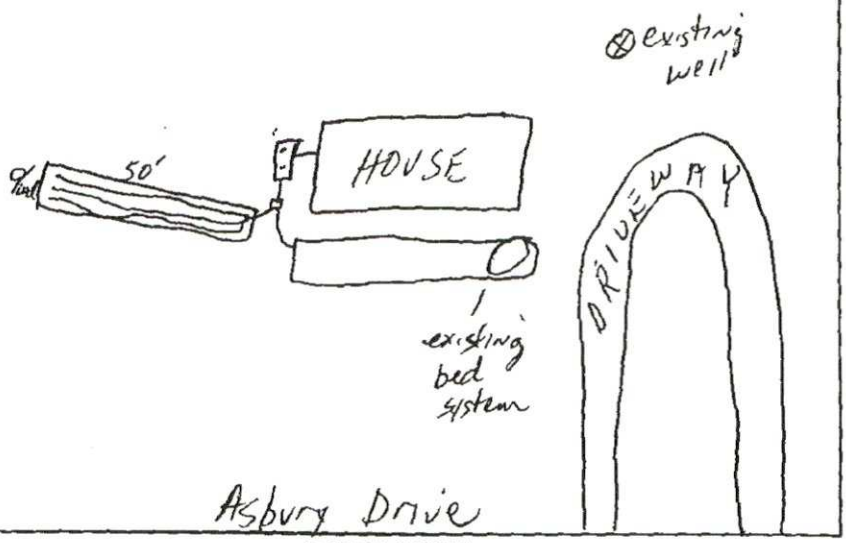
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 7682A DATE: 8/28/91

TC: 019-181-46 ☐ L

SERIAL Nº 13611

Permission is hereby given to ____ Install or Construct, ✓ Alter ~~or Repair~~ the individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge as specified herein at the described location. This permit is granted based upon the information supplied in the application dated 8/19/91. All work shall be completed on or before 9/28/91, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or 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 or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank — gallons

Liquid Capacity of Dosing Tank — gallons

Tank Construction —

Absorption and/or Nitrification Lines:

~~Trench~~ Bed Width 9' feet

Total Line Length 150 feet

Number of Lines 3 (50')

Depth of Stone 18 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well >50 feet

NAME OF OWNER George Lessard

LOCATION OF PROPERTY 14115 Asbury Dr

Comments: Bed System 9'wd x 50'long x 18" stone
stay >10' from property line / Keep septic system >50 from
existing wells

Division or Section Head

Phillip S Walker
Environmentalist

* If this permit is for the installation or construction of a new system, it must be signed by the division or a section head of the Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

CERTIFICATE OF COMPLETION/OPERATION PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 7682A DATE: 9/5/91

TC: 09 181 46 ☒ L ☐ CRT

SERIAL № 15415

Name of Owner George Lessard Juris.:

Address of Property 14115 Asbury Dr

Inspection Data:

Tank Material -

Total Length of Drainfield 150

Number of Lines 3 @ 50

Cover Depth 8"

Water Supply Source well

Distance to Water Source 750

Excavation Inspected 9/5/91

Tank(s) Inspected -

Wash Line Inspected -

High Water Alarm Inspected NA

PLOT

Design: 1991 Repair CTR# 80

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☒ installed or constructed ☐ altered or repaired

☒ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The issuance of this

☒ Certificate of Completion ☐ 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 10 NCAC 10A .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.

COMMENTS:

Philo S. Walker R.S.
Environmentalist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

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

Sheet: 1 of 2
Property ID: 1918146
Lot #:
File #: 7682A
AppID:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: John and Beatrice Cabrera
Applicant: John Cabrera
Address: 14115 Asbury drive
Date Evaluated: 3/1/2023
Proposed Facility: Residence
Design Flow (.1949): 360
Property Size:
Location of Site: 14115 Asbury Drive
Property Recorded:
Water Supply: [ ] Public [x] Individual [x] Well [ ] Spring [ ] Other
Evaluation Method: [ ] Auger Boring [X] Pit [ ] Cut
Type of Wastewater: [x] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	b PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
		0-14	GR/SL	FR/SEXP/NS/NP	2.5Y7/1 @17"	23"	PS	NA	PS
1	LS	14-23	SBK/C	VFI/EXP/VS/VP					0.2 G/D/FT2
	5%	23-66	M/SL	FI/SEXP/NS/NP					IV

Description	Initial System	Repair System
Available Space (.1945)		PS
System Type(s)		lia
Site LTAR		0.2

Other Factors (.1946):
Soil Evaluation By: Jeremy Michelone, REHS
Others Present:
Site Classification (.1948): Provisionally Suitable
Site Evaluation By: Jeremy Michelone, REHS
Others Present: Kim Garret, Scott Simmons

Install Trenches/Bed at least 48" into Saprolite

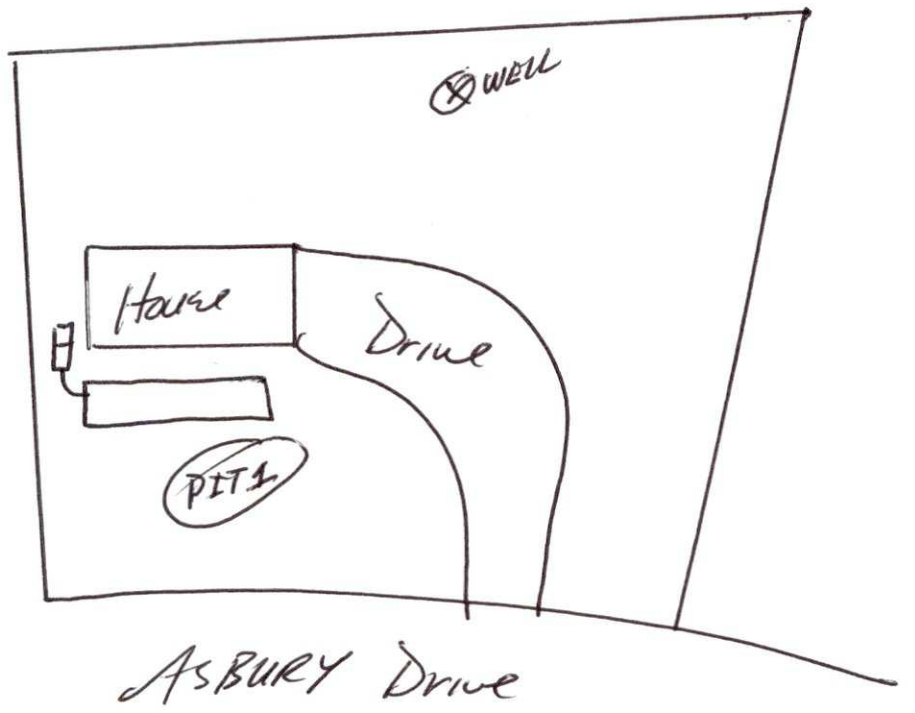
COMMENTS:

Install system below the expansive clay into the saprolite. Trench dep

Landscape Position	Group	Texture	.1955 LTAR	Structure
R-Ridge	I	S-Sand	1.2 - 0.8	SG-Single Grain
SS-Shoulder Slope		LS-Loamy Sand		M-Massive
LS-Linear Slope				CR-Crumb
FS-Foot Slope	II	SL-Sandy Loam	0.8 - 0.6	GR-Granular
NS-Nose Slope		L-Loam		SBK-Subangular Blocky
HS-Head Slope				ABK-Angular Blocky
CC-Concave Slope	III	SI-Silt	0.6 - 0.3	PL-Platy
CV-Convex Slope		SICL-Silty Clay Loam		PR-Prismatic
T-Terrace				
FP-Flood Plain		CL-Clay Loam		
		SCL-Sandy Clay Loam		
	IV	SC-Sandy Clay	0.4 - 0.1	
		SIC-Silty Clay		
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	NS-Non-Sticky	SEXP-Slightly Expansive
FR-Friable	SS-Slightly Sticky	EXP-Expansive
FI-Firm	S-Sticky	
VFI-Very Firm	VS-Very Sticky	
EFI-Extremely Firm	NP-Non-Plastic	
	SP-Slightly Plastic	
	P-Plastic	
	VP-Very Plastic	

Sketch of Soil Evaluation Locations



Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000 Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT/CONSTRUCTION AUTHORIZATION for REPAIRING an ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 7083A Permit #: _____ Tax Parcel #: 019-181-46

Property Owner: John Michael & Beatriz Cabrera

Job Location Address: 14115 Asbury Drive

City: Huntersville State: NC Zip Code: 28078

Improvement Permit Issuance Date: n/a **Construction Authorization Issuance Date:** 3/1/23

Permission is hereby given to **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 3/1/24. 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.

Permitted Design Flow: 360 GPD Site LTAR: _____ GPD/ft²

Liquid Capacity of Septic Tank: existing gallons Liquid Capacity of Dosing Tank: n/a gallons

Drainfield Design ☒ N/A

Trench Depth: _____ inches

Trench Width: _____ feet

Line Spacing: _____ feet (O.C.)

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Distribution Device: _____

Bed Design *(For Repair Installations ONLY.)* ☐ N/A

Bed Depth: 36 inches

Bed Width: 12 feet

Bed Total line length: 60 feet

# of Lines: — @ — feet

Depth of Media: 6" sand 24" inches (Type) stone

Distribution Device: DBox

Water Supply Source

☐ Municipal ☒ Private Well ☐ Community Well

☐ Other _____

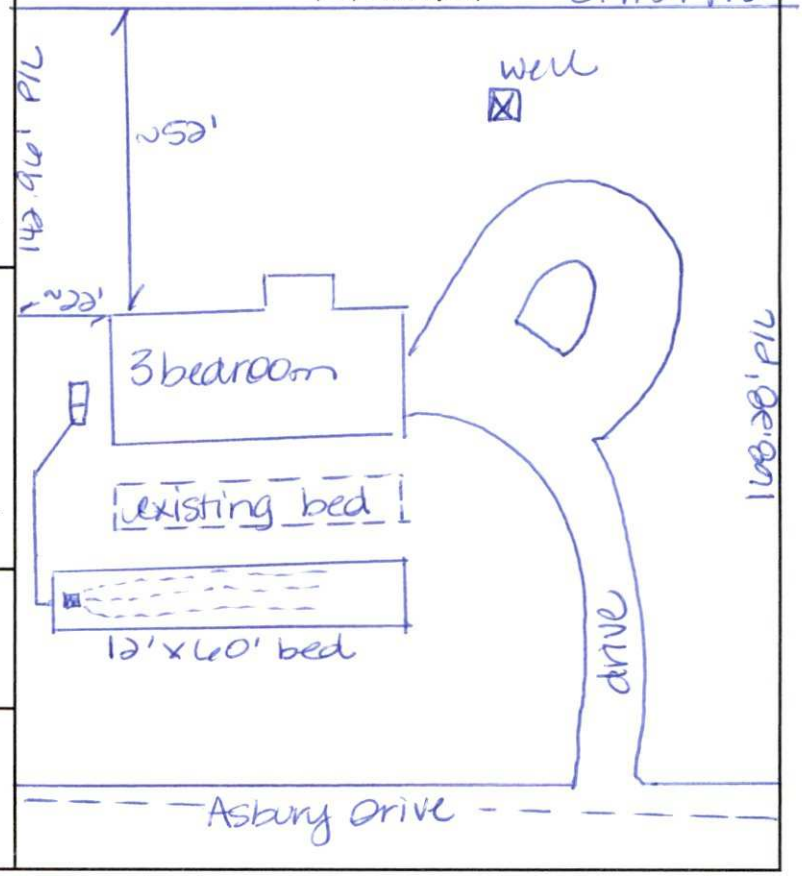
Minimum System Setbacks

Distance from Building Foundation: >5 feet

Distance from Property Line: >10 feet

Distance from Water Supply Source: >50 feet

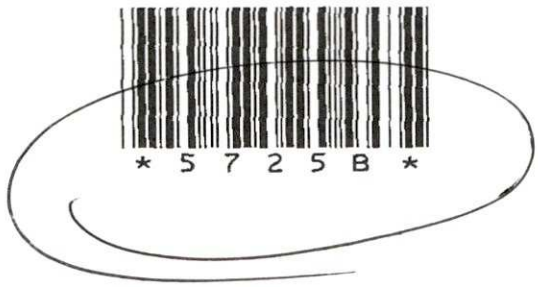
SKETCH OF SYSTEM LAYOUT
(Proposed Layout)



Comments: System Classification & Type: Repair - install 12'x60' bed with 6" sand and 24" stone; disconnect old bed; install sanitary T & filter if not present; confirm the washer line is connected to the maid house sewer - connect if not.

Authorized Agent: Kim Garrett, REHS Signature: Kim Garrett, REHS

Owner Signature: _____ Date: _____



2 Files

14115 ASBURY DR

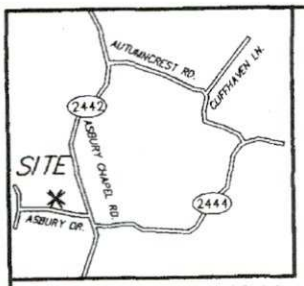
01918146

1/9/2008

duponbj

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

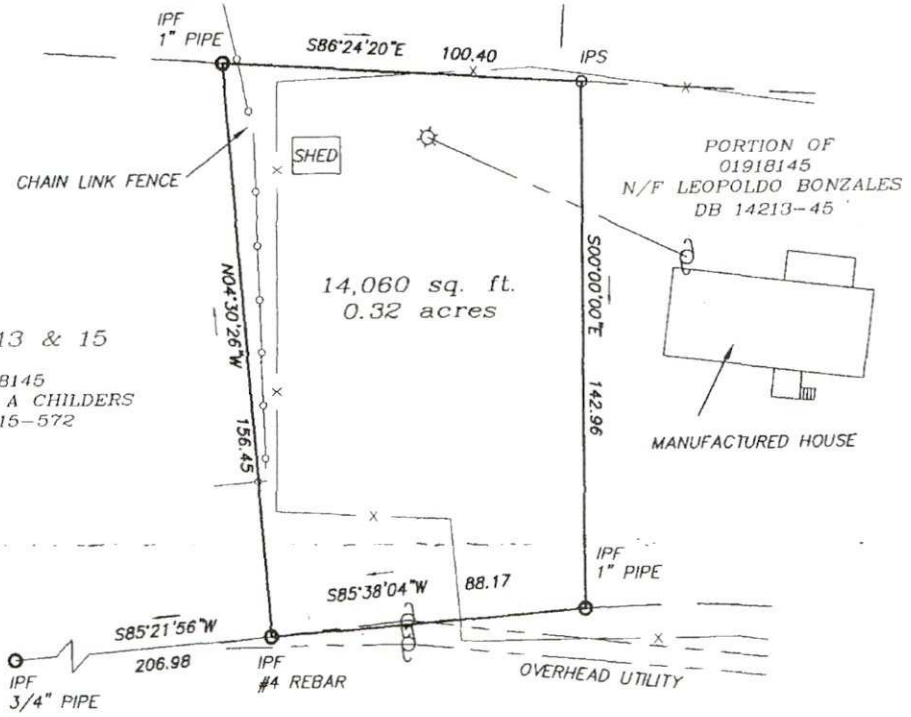
57283



VICINITY MAP NOT TO SCALE



01938101
N/F CAROLYN E. HART
DB 7839-889



ASBURY DRIVE
60' R/W

REFERENCE PLAT:
TITLE: SURVEY FOR LEOPOLDO GONZALES
TOWN OF HUNTERSVILLE, MECK. COUNTY, NORTH CAROLINA
SURVEYED: 07/07/03
BY: MITCHAM & ASSOCIATES, PA

LEGEND:
IPF IRON PIN FOUND

NOTES :
1. SUBJECT TRACT IS A PORTION OF PARCEL No. 01918146
2. THIS PROPERTY MAY BE SUBJECT TO ADDITIONAL EASEMENTS OR RIGHT-OF-WAYS.
3. NO USGS MONUMENT FOUND WITHIN 2000'.
4. AREA COMPUTED BY COORDINATE METHOD.
5. SUBJECT TRACT IS NOT LOCATED IN A SPECIAL FLOOD ZONE AS PER FEMA FLOOD PANEL 3704780088 E, DATED: 02/04/2004.
6. THIS SURVEY IS OF AN EXISTING PARCEL OF LAND AND DOES NOT CREATE A NEW STREET OR CHANGE AND EXISTING STREET.
7. ALL DISTANCES SHOWN ARE HORIZONTAL MEASUREMENTS.

GRAPHIC SCALE
0 20 40 80
SCALE IN FEET

PREPARED FOR:
LEOPOLDO GONZALES

I, M. E. ZAMANI, certify that this plat was drawn under my supervision from an actual survey made under my supervision (deed description recorded in Book 14213, page 45 that the boundaries not surveyed are clearly indicated as drawn from information found in Book M12, page 347 ; that the ratio of precision as calculated is 1: 10,000 ; that this plat was prepared in accordance with G. S. 47-30 as amended. Witness my original signature, registration number and seal this 13 day of OCT. , A.D., 2004 .

Surveyor
Registration Number L-4325

NORTH CAROLINA PROFESSIONAL SEAL L-4325 LAND SURVEYOR MOHAMMAD E. ZAMANI

NORTH CAROLINA PROFESSIONAL SEAL L-4325 LAND SURVEYOR MOHAMMAD E. ZAMANI

SCALE: 1"=40'
DATE: OCT. 13, 2004
FIELD CK: EZ
DRAWN BY: MS
OFFICE CK: EZ
JOB No.: CH499-09-04

A SURVEY
OF
A PORTION OF
PARCEL 01918146
PART OF LOT 13 AND 12
ASBURY HILLS
MALLARD CREEK TOWNSHIP,
MECKLENBURG COUNTY, NORTH CAROLINA

CSC of NC PC
4455 MORRIS PARK DRIVE
SUITE F.
CHARLOTTE, N.C. 28227
(704) 573-0112

MECKLENBURG COUNTY
Health Department

November 9, 2004

Leopoldo Gonzalez
14115 Asbury Drive
Huntersville, NC 28078

Re: Application for improvement permit for
Property Site: Asbury Drive
Health Department file number: **5725B**

Dear Property Owner or Owner's Agent:

The Mecklenburg County Health Department, Environmental Health Division on **November 3, 2004** evaluated the above-referenced property at the site designated on the site plan that accompanied your improvement permit application. According to your application the site is to serve a three-bedroom residence, with a design wastewater flow of 360 gallons per day. The evaluation was done in accordance with the laws and rules governing wastewater systems in North Carolina General Statute 130A-333 and related statutes and Title 15A, Subchapter 18A, of the North Carolina Administrative Code, Rule .1900 and related rules.

Based on the criteria set out in Title 15A, Subchapter 18A, of the North Carolina Administrative Code, Rules .1940 through .1948, the evaluation indicated that the site is **UNSUITABLE for** a ground absorption sewage system. Therefore, your request for an improvement permit is **DENIED.** A copy of the site evaluation is enclosed. The site is unsuitable based on the following:

- ☐ Unsuitable soil topography and/or landscape position (Rule .1940)
- ☒ Unsuitable soil characteristics (structure or clay mineralogy) (Rule .1941)
- ☒ Unsuitable soil wetness condition (Rule .1942)
- ☒ Unsuitable soil depth (Rule .1943)
- ☐ Presence of restrictive horizon (Rule .1944)
- ☒ Insufficient space for septic system and repair area (Rule .1945)
- ☐ Unsuitable for meeting required setbacks (Rule .1950)
- ☐ Other (Rule .1946)

These severe soil or site limitations could cause premature system failure, leading to the discharge of untreated sewage on the ground surface, into surface waters, directly to ground water or inside your structure.

The site evaluation included consideration of possible site modifications, and modified, innovative or alternative systems. However, the Health Department has determined that none of the above options will overcome the severe conditions on this site. A possible option might be a system designed to dispose of sewage to another area of suitable soil or off-site to additional property.

For the reasons set out above, the property is currently classified **UNSUITABLE,** and an improvement permit shall not be issued for this site in accordance with Rule .1948 (c).

However, the site classified as **UNSUITABLE** may be classified as **PROVISIONALLY SUITABLE** if written documentation is provided that meets the requirements of Rule .1948(d). A copy of this rule is enclosed. You may hire a consultant to assist you if you wish to try to develop a plan under which your site could be reclassified as **PROVISIONALLY SUITABLE.**

You have a right to an informal review of this decision. You may request an informal review by the soil scientist or environmental health supervisor at the local health department. You may also request an informal review by the
N. C. Department of Environment and Natural Resources regional soil specialist. A request for informal review must be made in writing to the local health department.

You also have a right to a formal appeal of this decision. To pursue a formal appeal, you must file a petition for a contested case hearing with the Office of Administrative Hearings, 6714 Mail Center, Raleigh, NC 27699-6714. To get a copy of a petition form, you may write the Office of Administrative Hearings or call the office at (919) 733-0926 or from the OAH web site at www.oah.state.nc.us/form.htm. The petition for a contested case hearing must be filed in accordance with the provision of North Carolina General Statutes 130A-24 and 150B-23 and all other applicable provisions of Chapter 150B. N. C. General Statue 130A-335(g) provides that your hearing would be held in the county where your property is located.

Please note: If you wish to pursue a formal appeal, you must file the petition form with the Office of Administrative Hearings **WITHIN 30 DAYS OF THE DATE OF THIS LETTER.** The date of this letter is **November 9, 2004**. Meeting the 30-day deadline is critical to your right to a formal appeal. Beginning a formal appeal within 30 days will not interfere with any informal review that you might request. Do not wait for the outcome of any informal review if you wish to file a formal appeal.

If you file a petition for a contested case hearing with the Office of Administrative Hearings, you are required by law (N.C. General Statute 150B-23) to send a copy of your petition to the North Carolina Department of Environment and Natural Resources. Send the copy to: Office of General Counsel, N. C. Department of Environment and Natural Resources, 1601 Mail Service Center, Raleigh, NC. 27699-1601. Do **NOT** send the copy of the petition to your local health department. Sending a copy of your petition to the local health department will **NOT** satisfy the legal requirement in N.C. General Statute 150B-23 that you send a copy to the Office of General Counsel, NCDENR.

You may call or write the local health department if you need any additional information or assistance.

Sincerely,

Jeremy Michelone, R.S.
Authorized Agent - DENR

Encl: (2)

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

Sheet: 1 of 2
Property ID: PO 019-181-46
Lot #:
File #: 5725B
Code: 3

AC

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Leopoldo Gonzalez
Applicant:
Address: 14115 Asbury Drive, Huntersville, N. C. 28078
Date Evaluated: 10/7/2004
Proposed Facility: Residence
Design Flow (.1949): 360gpd
Property Size: .54a
Location of Site: 14115 Asbury Drive
Property Recorded:
Water Supply: [ ] Public [ ] Individual [x] Well-shared [ ] Spring [ ] Other
Evaluation Method: [x] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [x] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	OTHER PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS, 12	0-9	GR/SCL	FR/SEXP/SS/SP	2.5Y 7/1@26"	26	N/A	NONE	US
		9-13	SBK/SC	VFI/EXP/VS/VP					
2	"	0-10	GR/SCL	FR/SEXP/SS/SP	2.5Y 7/1@12"	16	"	"	"
		10-16	SBK/SC	VFI/EXP/VS/VP					
3	"	0-14	GR/SCL	FR/SEXP/SS/SP	2.5Y7/1@24"	25	"	"	"
		14-25	SBK/SC	VFI/EXP/VS/VP					
4	"	0-19	GR/SL	FR/SEXP/NS/NP	2.5Y7/1@26"	26	"	"	"
		19-26	SBK/SCL	FR/SEXP/SS/SP					

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, 10/8/2004 W. R. Marlin
Others Present:

COMMENTS:

Lot map of property not available, probably 100% repair required

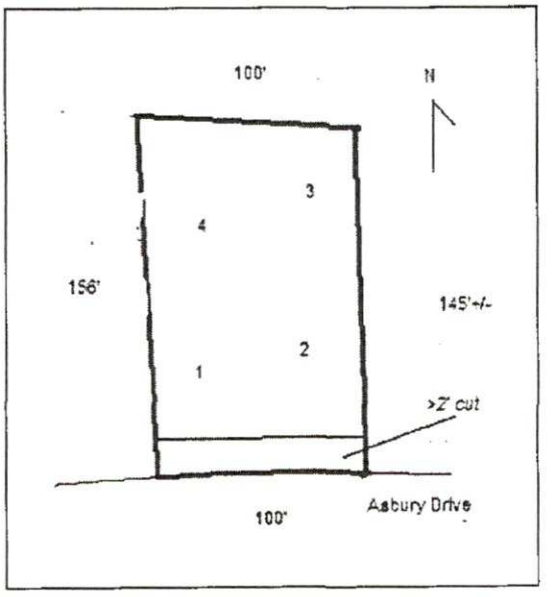
Landscape Position	Group	Texture	.1955 LTAR
R-Ridge	I	S-Sand	1.2 - 0.8
SS-Shoulder Slope		LS-Loamy Sand	
LS-Linear Slope			
FS-Food Slope	II	SL-Sandy Loam	0.8 - 0.6
NS-Nose Slope		L-Loam	
HS-Head Slope			
CC-Concave Slope	III	SI-Silt	0.6 - 0.3
CV-Convex Slope		SICL-Silty Clay Loam	
T-Terrace		CL-Clay Loam	
FP-Flood Plain		SCL-Sandy Clay Loam	
	IV	SC-Sandy Clay	0.4 - 0.1
		SIC-Silty Clay	
		C-Clay	

Structure

SG-Single Grain
M-Massive
CR-Crumb
GR-Granular
SBK-Subangular Blocky
ABK-Angular Blocky
PL-Platy
PR-Prismatic

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	NS-Non-Sticky	SEXP-Slightly Expansive
FR-Friable	SS-Slightly Sticky	EXP-Expansive
FI-Firm	S-Sticky	
VFI-Very Firm	VS-Very Sticky	
EFI-Extremely Firm	NP-Non-Plastic	
	SP-Slightly Plastic	
	P-Plastic	
	VP-Very Plastic	

Sketch of Soil Evaluation Locations



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

Sheet: 1 of 2
Property ID: PO 019-181-46
Lot #:
File #: 5725B
Code: 3

ACS

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Leopoldo Gonzalez
Applicant: Jason Jones
Address: 14115 Asbury Drive, Huntersville, N. C. 28078
Date Evaluated: 11/3/2004
Proposed Facility: Residence
Design Flow (.1949): 360gps
Property Size: .54a
Location of Site: Asbury Drive
Property Recorded:
Water Supply: [ ] Public [ ] Individual [ ] Well [ ] Spring [x] Other #NAME?
Evaluation Method: [ ] Auger Boring [x] Pit [ ] Cut
Type of Wastewater: [x] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	OTHER PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS, 12	0-13	GR/SL	FR/SEXP/NS/NP	2.5Y6/1@27"	37	US	NONE	US
		13-17	SBK/SCL	FR/SEXP/SS/SP					
		17-24	SBK/SC	VFI/EXP/VS/VP					
		24-37	M/SC	"					
		37-55	M/SL	VFI/SEXP/NS/NP					
2	"	0-14	GR/SL	FR/SEXP/NS/NP	2.5Y7/1@17"	23	"	"	"
		14-23	SBK/SC	VFI/EXP/VS/VP					
		23-34	HARD	SAPROLITE					
3	"	0-20	GR/SL	FR/SEXP/NS/NP	>45" TO SOIL WETNESS	20	"	"	"
		20-30	"	"					
		30-45	M/SL	VFI/SEXP/NS/NP					

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, 11/3/2004, W. R. Marlin
Others Present: L. Gonzalez & Mike

COMMENTS:

Landscape Position	Group	Texture	.1955 LTAR
R-Ridge	I	S-Sand	1.2 - 0.8
SS-Shoulder Slope		LS-Loamy Sand	
LS-Linear Slope			
FS-Food Slope	II	SL-Sandy Loam	0.8 - 0.6
NS-Nose Slope		L-Loam	
HS-Head Slope			
CC-Concave 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	
		C-Clay	

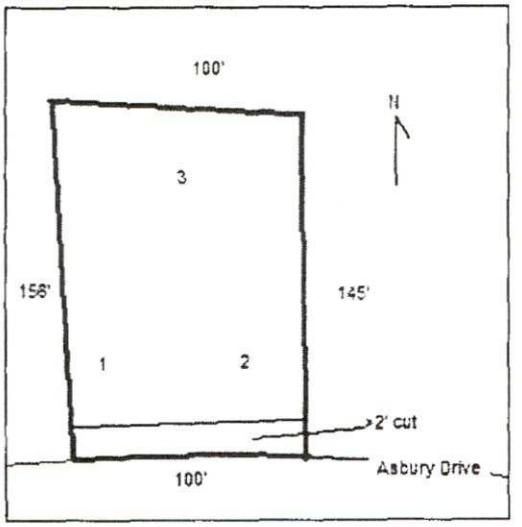
Structure
SG-Single Grain
M-Massive
CR-Crumb
GR-Granular
SBK-Subangular Blocky
ABK-Angular Blocky
PL-Platy
PR-Prismatic

Consistence
Moist
VFR-Very Friable
FR-Friable
FI-Firm
VFI-Very Firm
EFI-Extremely Firm

Consistence
Wet
NS-Non-Sticky
SS-Slightly Sticky
S-Sticky
VS-Very Sticky
NP-Non-Plastic
SP-Slightly Plastic
P-Plastic
VP-Very Plastic

Mineralogy
SEXP-Slightly Expansive
EXP-Expansive

Sketch of Soil Evaluation Locations



FEE: 200.00
DATE: 9/28/04
Check 7631 JAH

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

$100 CK # 1032 10/22/04 SC

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 #: 5725B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 019-181-46 PO

STREET ADDRESS: Asbury Dr. Huntersville NC 28078

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: 1100

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 3

FOUNDATION FOR RESIDENCE:

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

TOWNSHIP (CHECK ONE):

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

CLOSING DATE _____

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

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

WATER SUPPLY (CHECK ONE):

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

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: (LAST) Gonzalez (FIRST) Lepoldo (MI)
ADDRESS: 14115 Asbury Dr.
CITY: Huntersville STATE: NC ZIP: 28078
DAYTIME PHONE: (704) 904-7310

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) Jones (FIRST) Jason (MI) E
DAYTIME PHONE: (704) 598-5025

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

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: _____ DATE: 9/27/04

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

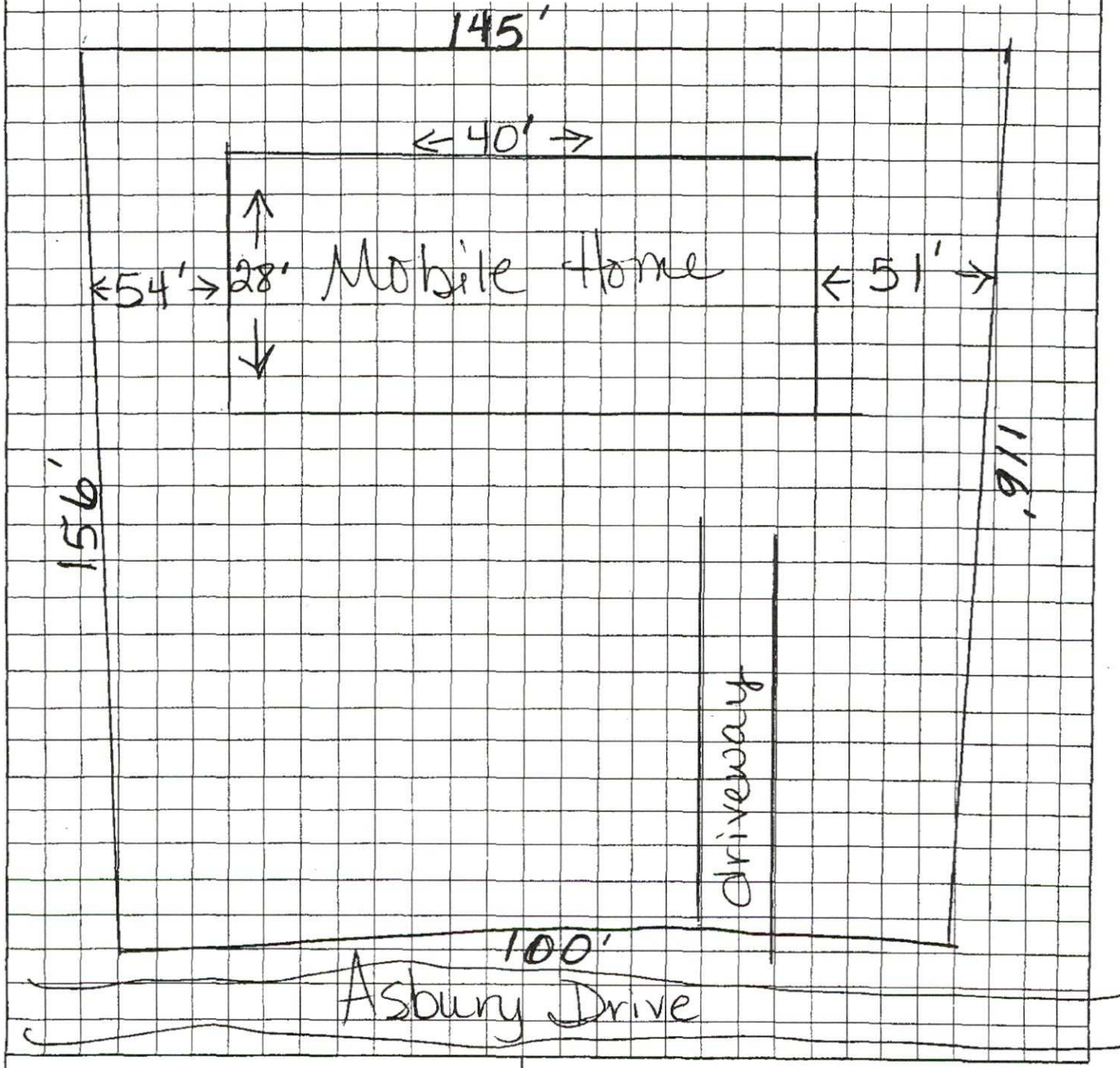
PROPOSED PLOT PLAN

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

FILE: 5725B

TC: 019-181-46P0

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

APPROVAL DATE

White - Health Department's Copy

Canary - E.H.S. Copy

Pink - Owner's Copy

COMMUNITY HOMES, INC

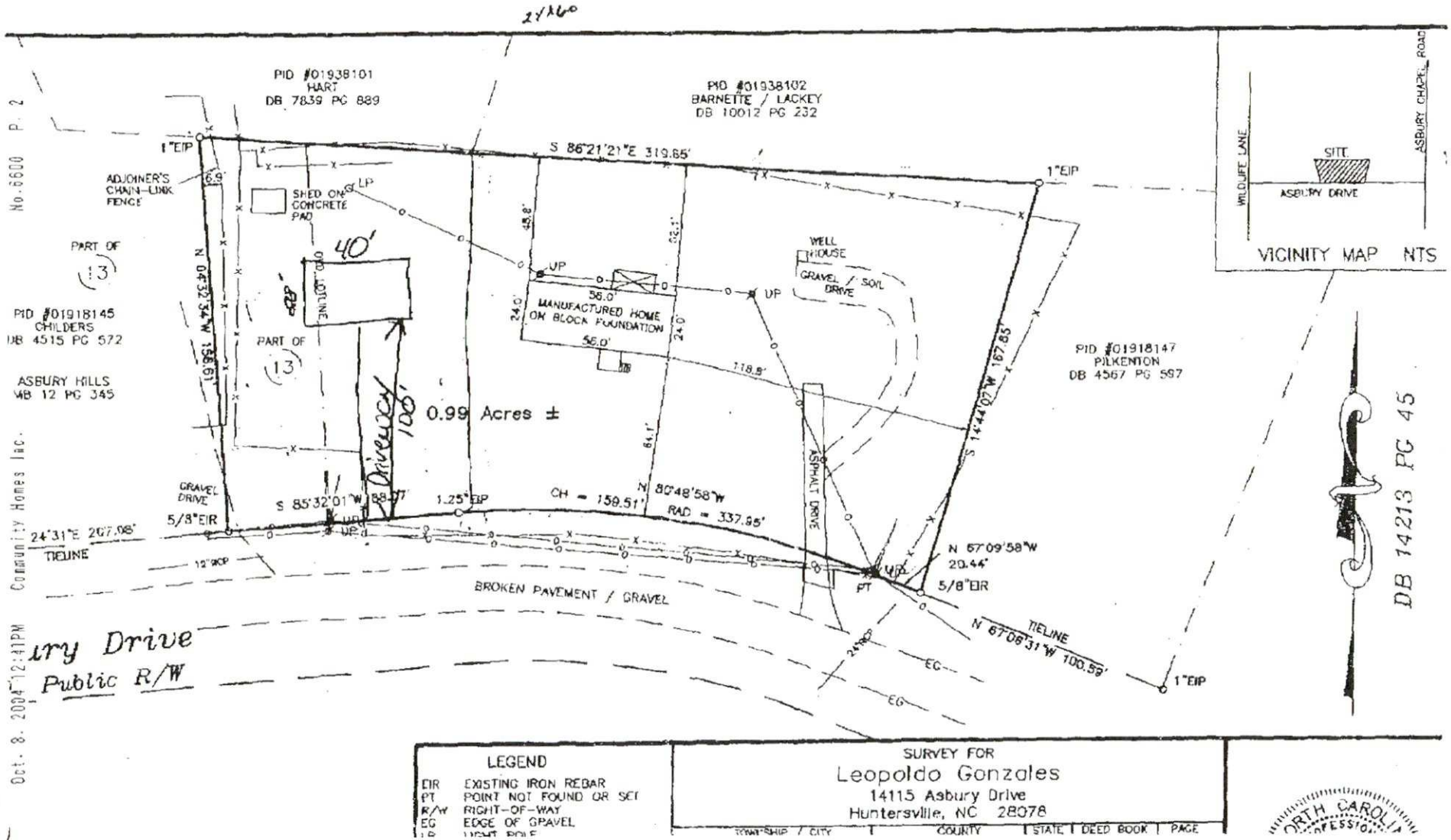
6027 North Tryon Street • Charlotte, NC 28213
Telephone: 704-598-5025 • Fax: 704-509-4971

5725B

FACSIMILE TRANSMITTAL SHEET

TO: Bill Martin	FROM: Jason Jones
COMPANY:	DATE: 10-8-04
FAX NUMBER: (704)336-6894	TOTAL NO. OF PAGES INCLUDING COVER: 2
PHONE NUMBER:	SENDER'S PHONE NUMBER: 704-598-5025
RE:	SENDER'S FAX NUMBER: 704-509-4971

We are the key to your new home!



LEGEND

EIR	EXISTING IRON REBAR
PT	POINT NOT FOUND OR SET
R/W	RIGHT-OF-WAY
EG	EDGE OF GRAVEL
LP	LIGHT POLE

SURVEY FOR
Leopoldo Gonzales
14115 Asbury Drive
Huntersville, NC 28078

TOWNSHIP / CITY	COUNTY	STATE	DEED BOOK	PAGE