SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

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

File Number: 18022

Assigned Inspector: April

☐ 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: SM 12/20/23 Initial/Date

☐ Use Existing Approved ☐ Use Existing Denied

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

☐ Floor plans reviewed

☐ Generate CA ☐ Approve as Noted in Winchester

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

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

☐ Certified operator contract is on file: _____

☒ Septic file complete: 1/8/24

☐ Release final hold in Winchester: _____

Comments: AXS ok

18022 #14314

MECKLENBURG COUNTY
HEALTH DEPARTMENT

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

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

PERSON FILING APPLICATION:
NAME: Elvin Lewis
ADDRESS: 8720 Houston Ridge
CITY: Charlotte
STATE: NC ZIP: 28277
PHONE: (704) 491 0058
ALTERNATE PHONE: (704) 779 4034
E-MAIL: lenis0221@gmail.com

PROPERTY OWNER: ☑ SAME AS PERSON FILING APPLICATION
NAME: _____
ADDRESS: _____
CITY: _____
STATE: _____ ZIP: _____
PHONE: _____
ALTERNATE PHONE: _____
E-MAIL: _____

JOB LOCATION INFORMATION
TAX PARCEL #: 22329206
STREET ADDRESS: 8720 Houston Ridge Rd
CITY: Charlotte
STATE: NC ZIP: 28277

SUBDIVISION OR MOBILE HOME PARK NAME: _____
LOT #: _____

WATER SUPPLY:
● MUNICIPAL ○ PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER _____

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

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 2

COMMERCIAL / INDUSTRIAL PROPERTY TYPE: ☐ N/A
TYPE OF BUSINESS: _____
EMPLOYEES PER SHIFT: _____
OF SHIFTS: _____
INDUSTRIAL WASTES? ○ YES ○ NO
UNDERGROUND STORAGE TANKS? ○ YES ○ NO

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

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

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

Owner's/Agent's Signature _____ Date 12/20/23

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

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Drive, Suite 8000, Charlotte, NC 28208
OFFICE: 980-314-1680, FAX: 704-336-6894

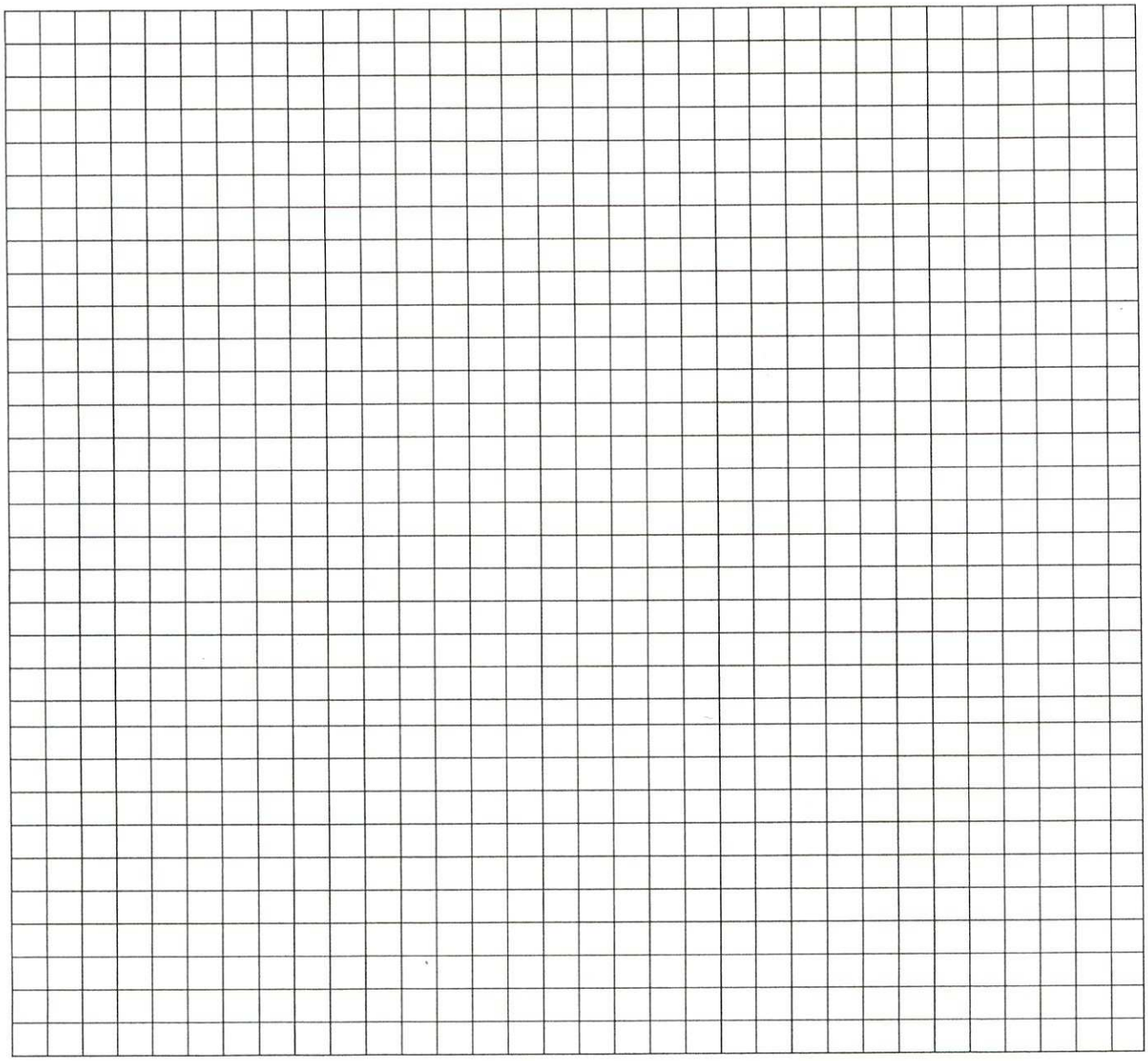
Revised on: 01/03/11

File #: _____

PROPOSED PLOT PLAN

A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

Street Address: _____ Tax Parcel #: _____



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

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

Approved for garage + Bedroom expansion. House will Remain a 4 bedroom. Meets all setbacks.

April Bumgarner 1-4-24

REHS Signature Date

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Drive, Suite 8000, Charlotte, NC 28208
OFFICE: 980-314-1680, FAX: 704-336-6894

Revised on: 01/03/11

PLOT PLAN FOR PERMIT APPLICATION
ONE/TWO FAMILY, MODULAR, MOBILE HOME OR ZONING USE

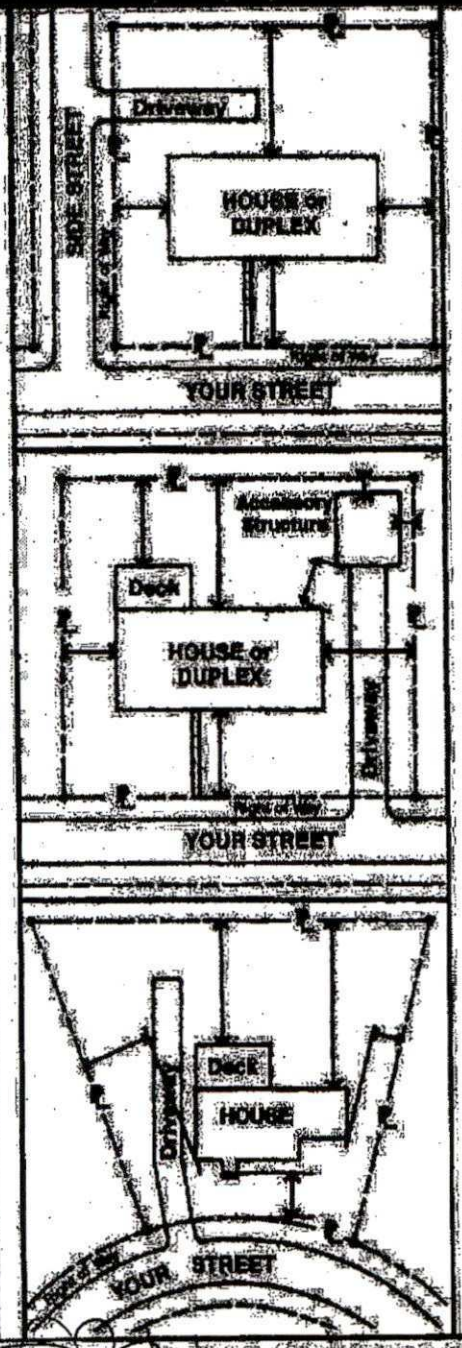
LOCATION

STREET # (N,S,E,W): 8720 | STREET NAME: Houston Ridge | (AV,RD,ST etc.): Rd

SUITE/UNIT(S):

TAX JURISDICTION: (Check One) ☒ 0 - Mecklenburg ☐ 1 - Pineville ☐ 2 - Cornelius ☐ 3 - Davidson ☐ 4 - Huntersville ☐ 5 - Matthews ☐ 6 - Mint Hill ☐ 7 - Charlotte ☐ 8 - Davidson ☐ 9 - Huntersville

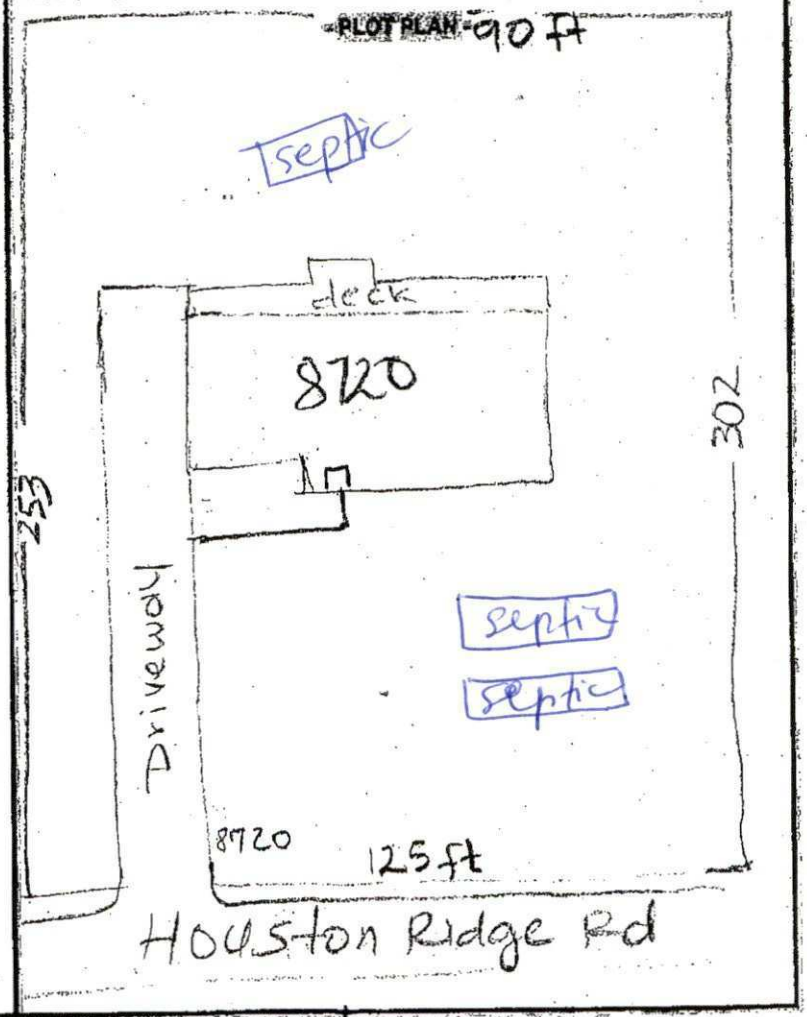
EXAMPLES / PLOT PLAN



INSTRUCTIONS

In the space provided below, draw plot plan as neatly and accurately as possible, from survey if available.

1. Draw street(s) and right-of-way(s).
2. Draw property lines with dimensions.
3. Draw proposed and existing buildings showing any attached porch(es), deck(s), chimney(s), carport(s), or garage(s), etc.
4. Show distances of buildings from property lines or other structures.
5. Separate application and plot plan required for each building.



ALL EXISTING AND PROPOSED BUILDING(S) ON LOT ARE SHOWN WITH MEASUREMENTS INDICATED.

[redacted] 11/8/23 Elkin Lens

APPLICANT'S SIGNATURE DATE PRINT APPLICANT'S NAME

CHARLOTTE-MECKLENBURG BUILDING STANDARDS DEPARTMENT

[redacted]

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	12/20/23	**Amount:**	100.00
Receipt #:	145494	**Tendered:**	100.00
Check / Auth #:	CASH	**Returned:**	0.00
Received By:	MOORES		

Account Information

Account #: 200000
Contractor: ELKIN LENIS
Attn:
Address:
Address:
City/State/Zip: ,

Item	Description	Quantity	Unit Price	Total Price
0705	Use Existing System 8720 HOUSTON RIDGE RD	1	100.00	100.00
Permit#				

Outstanding Balances

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

C of A (s) No. 18022

Date Issued 3-19-82 Serial 4984 P.O. T C No 223-201-16

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF COMPLETION
CERTIFICATE OF APPROVAL

(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner William (FIRST) Trotter (LAST) Company (MIDDLE)

Location of Property 8720 Houston Ridge Road

Application Number 18022 Permit Number 18022

Inspection Data:

Liquid Capacity of Tank 1500 gallons Tank Material p/c concrete

Total Length of Drain Tile 660' + 167' Number of Lines 5 + 5 + 4

Depth of Filter Material 17" Cover Depth 4' to 20"

Water Supply Source Community well Distance from Water Source > 100'

Excavation Inspected ——— Tank Inspected 3-19-82 (DATE)

Nitrification Field Inspected 3-18-82 + 3-19-82 (DATE)

Washing Machine Line Inspected, If Applicable 3-19-82 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been ✓ installed or constructed, altered or repaired in accordance with the permit issued and the regulations of the Mecklenburg County Health Commission in effect on the date of issuance of the permit. The issuance of this Certificate of Approval 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 Certificate of Approval is issued subject to those restrictions and conditions shown on the permit(s) in addition to those listed below under comments. This Certificate of Approval 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 grade to drain all surface water off lower bed.

Mike Sexton
Environmentalist

EHD-5-76

Environmental Health Department's Copy

Serial No. 5258

ICAR(S) Permit No. 18022

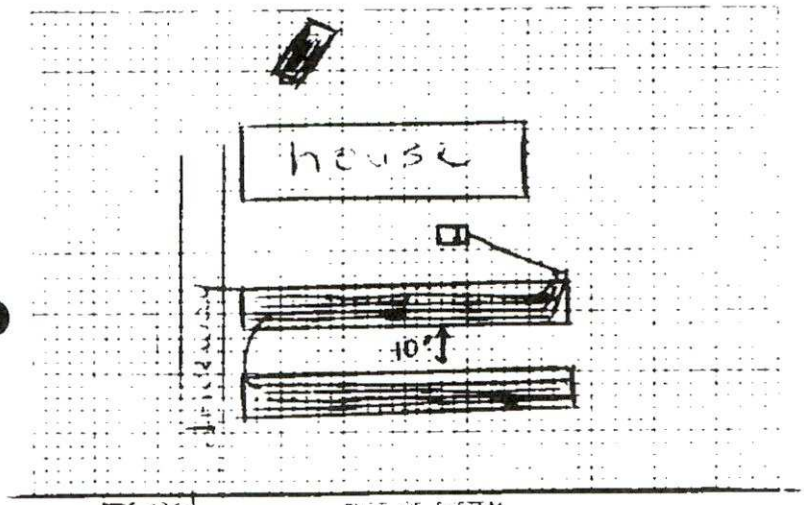
Date Issued 2 10 82

pc T C No 223-20[illegible]

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

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 application 18022 dated 10 1 82 and this permit shall be void and of no effect if the information provided in the application is not [illegible]. All work shall be completed on or before 4 10 83, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 5

Tank Capacity 1500 gallons

[illegible] 660 + 107

[illegible] 5'-0"

[illegible] >10' (4')

Distance from Property Line >10'

Distance to Well >100'

NAME OF OWNER William Tri Star Company

LOCATION OF PROPERTY 7120 Houston Ridge Road

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Health Commission which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Environmental Health Director before any system can be covered up or otherwise rendered uninspectable or can be used. 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 the system from any liability resulting from the failure of the system to operate properly.

Comments four beds - 15 wide · 66' long · 17" of stone each

15 wide · 42 long · 17" of stone for washout

Mike Sexton
Environmentalist

Division or Section Head

* 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 Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued 10-2-81

Serial No. 5307

LA No. 18022

T. C. No. PO 223-201-16

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

IMPROVEMENT PERMIT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER William Trotter Company
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P.O. Box 4143, Charlotte, NC ZIP 28204

LOCATION OF LOT 8720 Houston Ridge Road
(STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 22 BLOCK NO 5

MAP BOOK NO PAGE NO

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, on an on-site inspection of the said lot; and upon the information supplied in the "Application for an Installation, Construction, Alteration, and/or Repair Permit", number 18022 This approval is subject to the following terms and conditions

1. That the nitrification field be installed, constructed, altered and/or repaired in the same area where the soil investigation was run.
2. That an "Installation, Construction, Alteration, and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altred, and/or repaired and that the system be installed in accordance with same

This approval may be revoked and the building inspection department requested to revoke any building permit(s) which have been issued to authorize construction on the said lot if at any time it is determined that any information contained in the "Application for an Installation, Construction, Alteration, and/or Repair Permit" is not correct or is untrue or that the septic tank system is not being installed, constructed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit

System to be based on 0.6 gallons per sq. ft. bottom area

Mike Sexton
Environmentalist

John R Atkinson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Job # 751

Date Received 10-2-81

ICAR(S) Application No. 18022

T. C. No. PO 223-201-16

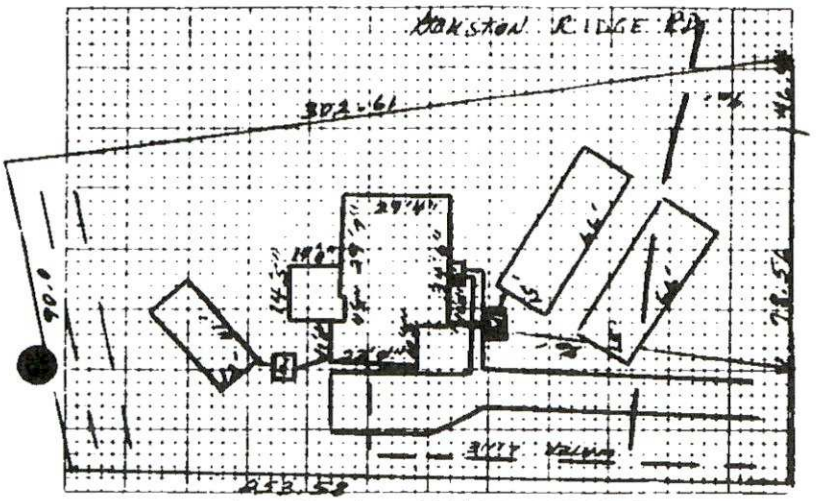
Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

Application for an
Installation, Construction, Alteration, and/or Repair Permit
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

The owner of that property described hereinafter hereby applies to the Mecklenburg County Department of Environmental Health for a permit to

1) X Install or Construct 2) Alter or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption effluent discharge.



3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ___Yes ___No
Residence X Yes ___No
4. No of Bedrooms 4
5. Business Use — Max No Employees ___
6. Washing Machine X Yes ___No
7. Garbage Disposal X Yes ___No
8. Dishwasher X Yes ___No
9. Water Supply
A. Individual Well ___
B. Governmental System ___
C. Community System
1. Well source X
2. Governmental source ___
10. Sewage System
House located within 200 feet of public sewer ___Yes X No
House located within 200 feet of community sewer ___Yes X No
11. FHA Case No ___
12. VA Case No ___

13) NAME OF OWNER William Trotter Company
(LAST / FIRST / MIDDLE)

14) ADDRESS OF OWNER P. O. Box 4143 Charlotte, N. C. 28204

15) PHONE NO Home N/A Office 333-8804

16) LOCATION OF SYSTEM 8720 Houston Ridge Road
(STREET OR COUNTY ROAD)

17) SUBDIVISION Providence West Lot No 22 Block No. 5

Map Book No 19 Page No. 483

18) DEED REFERENCE — DEED BOOK N/A AT PAGE N/A

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES ___ NO DATE RUN ___

20) PTR NUMBER (See Instructions) 18022

The undersigned person hereby agrees that he has read the foregoing application and that the contents of same are true. It is understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

10/1/81
DATE OF APPLICATION

By: [signature]
OWNER: William Trotter Company

EHD-5-76 ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 4188

PTR No. 18022

Date Issued Kime 24, 1981

T C No. po 223-201-16

Map Date

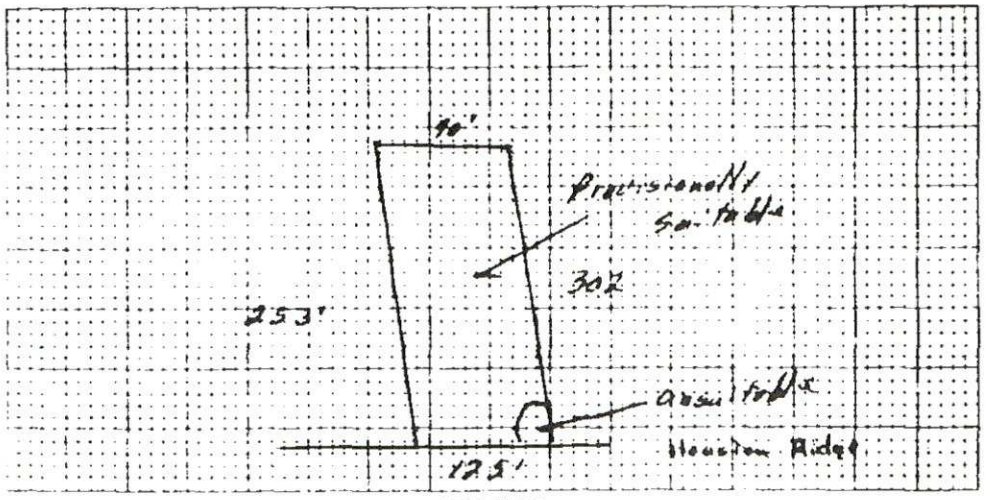
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER (LAST) William Trotter Company (FIRST, MIDDLE)

ADDRESS OF OWNER PO Box 4143, Charlotte, NC ZIP 28204

LOCATION OF PROPERTY 8720 Houston Ridge Road (STREET OR COUNTY ROAD)

SUBDIVISION Providence West LOT NO #22 BLOCK NO #5



PLOT PLAN

This is to certify that soil investigation and on site investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The said investigation was conducted in such a manner that it was indicated on the above plot.

The permeability rate determined by the investigation was **Provisionally Suitable**. The said lot is approved for one single family dwelling unit with subsurface soil absorption effluent disposal subject to the following terms and conditions:

1. Approval is granted for a maximum of [illegible] bedrooms. Mecklenburg County Department of Environmental Health must approve any wastewater treatment system prior to construction.
2. The [illegible] as determined by the Mecklenburg County Department of Environmental Health and as stated above and [illegible].
3. [illegible] system installation [illegible].
4. [illegible] was performed in the [illegible] which [illegible] was designated as acceptable for [illegible].

This approval is granted based on the laws of the State of North Carolina, and the rules and regulations of the North Carolina Department of Human Resources, Division of Health Services and the Mecklenburg County Health Commission which were in effect on the date of issuance and is void if at any time in the future, prior to completion of the system, these laws, rules and regulations are changed such that this approval would not have been granted had the new or revised laws, rules, and regulations been in effect on the issue date.

ENDORSED William R. Martin
Soil Scientist

John R. Atkinson
Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX H
SITE EVALUATION

S.I.R. No. 18022
T.C. No. PO 323-20146
Job #751

(Ground Absorption Sewage Disposal)

OWNER: William Trotter Co
ADDRESS: PO Box 4143
COUNTY: Charlotte, N.C. 28204
LOCATION OF SITE: Houston Ridge Rd

DATE REQUESTED:
PLAT NO: L22-05
LOT SIZE: 26,964

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS 2-8% U	S PS (U) Complex Slopes	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2:1 Clay)	S (PS) Clay U	S (PS) Clay U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) Blocky U	S (PS) Blocky U	S PS U	S PS U
4. SOIL DEPTH (inches)	(S) PS 48" U	S PS (U) Depth Variable	S PS U	S PS U
5. RESTRICTIVE HORIZONS (inches) (Impervious strata, Rock)	(S) PS None U	(S) PS None U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	(S) PS 76" To ground Water U	S PS Eroded Areas (U) Channel Water	S PS U	S PS U
7. SOIL PERMEABILITY (percolation rate)	S (PS) moderate U	S (PS) Moderate U	S PS U	S PS U
8. OTHER (specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	Provisionally Suitable	unsuitable		
10. SOIL SERIES	Cer.	Eroded Complex Slopes		

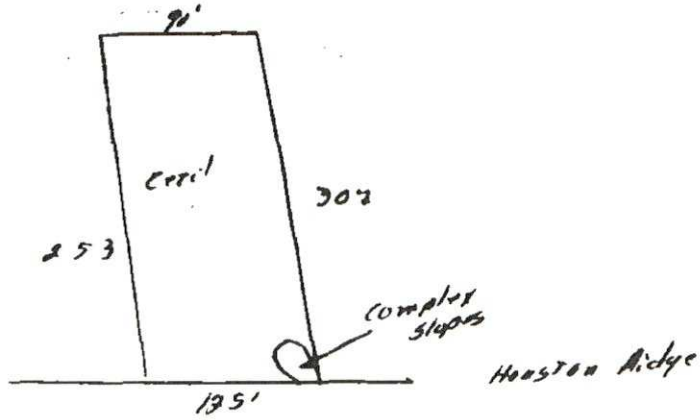
S - Suitable PS - Provisionally Suitable U - Unsuitable

** See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope)

Recommendations/Comments:

Described By: William A. Medlin
Title: Soil Scientist
Date: 6-23-81

DHS Form 2601
Sanitation
EHD 539 (2/80)


90'
Cecil
307
253
complex slopes
Houston Ridge
135'

Date Received 6/8/81

SIR No. 18022

T. C. Nos 223-201-16

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER William Trotter Company
LAST FIRST MIDDLE

2) ADDRESS OF OWNER P. O. Box 4143 Charlotte, N. C. ZIP 28204

3) PHONE NO Home Office 333-8804

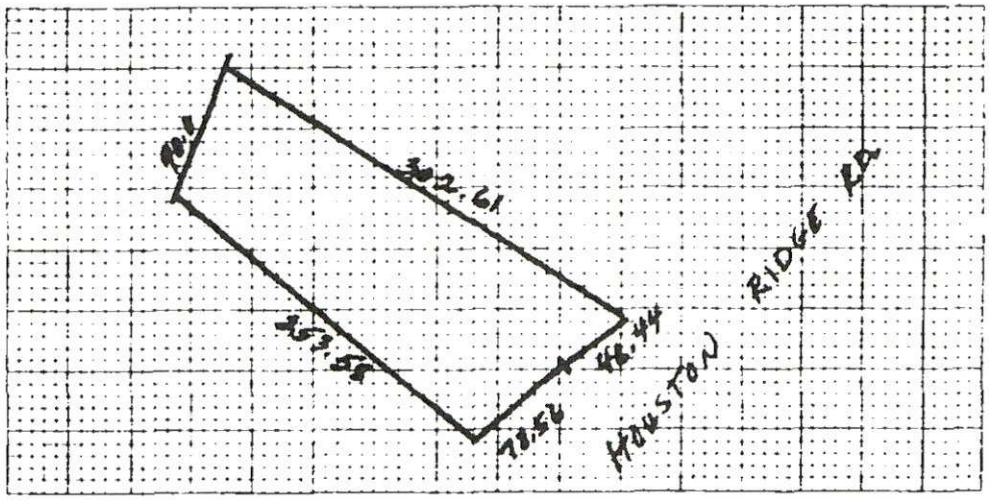
4) LOCATION OF PROPERTY Off Providence Road West
STREET OR COUNTY ROAD

5) SUBDIVISION Providence West LOT NO 22 BLOCK NO 5

MAP BOOK NO 19 PAGE NO 483 Address: 8720 Houston Ridge Rd.

6) DEED REFERENCE DEED BOOK PAGE NO

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation and an on-site inspection of the lot hereinabove described for the purpose of determining if the lot is suitable for the installation of an individual septic tank wastewater treatment system with subsurface soil absorption effluent discharge.



7) ACCURATELY DIAGRAM & DIMENSION LOT

William Trotter Company
By Robert Ingram
OWNER

EHD-5-76

Environmental Health Department's Copy

Date Issued 2 10 82

Serial No. 5258

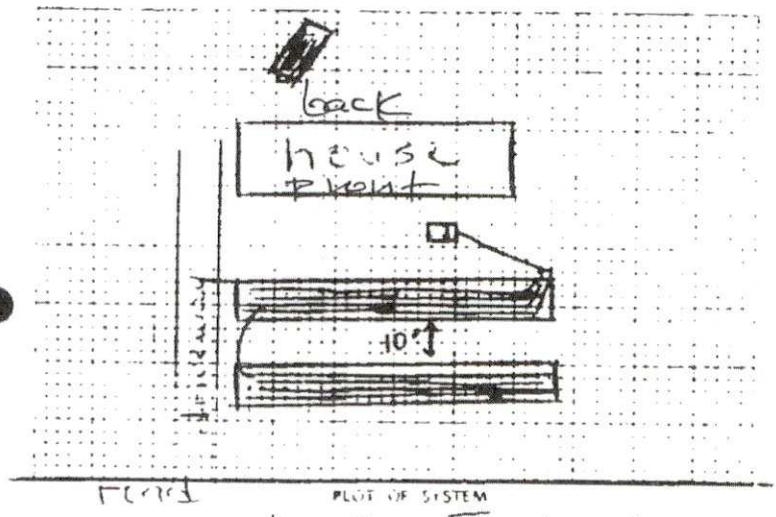
ICARUS Permit No. 18022

PC T C No 223.20

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

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 application 18022 dated 10-7-81 and the permit shall be void and of no effect if the information provided in the application is not strictly adhered to. All work shall be completed on or before 4-10-82, after which date this permit shall be null and void.



Tank Capacity 1500 gallons

660 + 10%

>10'

>10'

>100'

NAME OF OWNER William Tri Hair Company

LOCATION OF PROPERTY 7120 Houston Ridge Road

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Health Commission which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Environmental Health Director before any system can be covered up or otherwise rendered uninspectable or can be used. 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 the system from any liability resulting from the failure of the system to operate properly.

Comments two beds - 15 trenches 66' long 17" of stone each
15 trenches 42' long 17" of stone in trenches

Division or Section Head

Mike Sexton
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 Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY