

6801 NORTHLAKE MALL DR

1/9/2008

duponbj

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

Mecklenburg County Health Department
Groundwater & Wastewater Services
700 N. Tryon St., Suite 211
Charlotte, NC 28202
Phone: (704) 336-5103
Fax: (704) 336-6894

File # 5918B

PERMIT TO CONDUCT MAJOR REPAIR AND/OR ABANDON A WATER SUPPLY WELL

Permit #: 20050404JAM01 **Tax Parcel #:** 025-091-25

Property Owner: ITC COMPANY

Job Location Address: 6801 NORTH LAKE MALL DRIVE

City/ETJ: CHARLOTTE **State:** NC **Zip Code:** 28216

Permit Issuance Date: 4/4/05

Use of Well: N/A

Type of Facility Served by Well: RESIDENTIAL

Sewage System Type: MUNICIPAL

Type of Repair/Abandonment (check applicable box)

- ☐ Major Repair Before Placing the Well in Service
- ☐ Major Repair Before Temporary Abandonment
- ☐ Temporary Abandonment
- ☒ Permanent Abandonment

Area of Regulated Groundwater Usage Restrictions Apply: ____ If Yes, see requirements in Specific Conditions of This Permit.

General Conditions of This Permit:

- The Water Supply Well repair and abandonment must meet all requirements set forth in the *Mecklenburg County Groundwater Well Regulations* and any other applicable rules and laws.
- A Certified Well Contractor that is currently registered with the Department must perform the repair and/or abandonment.
- Repair of any Water Supply Well with the well head terminating below ground surface (buried seal) shall include extending the well casing at least twelve inches above land surface.
- This Permit shall be VALID for a period not to exceed 12 months from the date of issuance.

Specific Conditions of This Permit (check all that apply):

☐ Initial water sample following repair to be taken and analyzed for (check all that apply):

☐ Volatile Organic Compounds (VOC's) ☐ Semi-volatile Compounds

☐ Pesticides ☐ Herbicides ☐ Metals (Specify in Other Conditions)

The analysis must be submitted to the Department for review.

Other Conditions or Repairs to be Conducted:

Authorized Agent: JEREMY MECHELONE, R.S. Owner/Legal Agent: _____
Print Name

Signature: Jeremy Mechelone R.S. Signature: _____

GWS-COM. APP 12/04

PERMIT APPLICATION FOR A COMMERCIAL / INDUSTRIAL SITE
IMPROVEMENT PERMIT / CONSTRUCTION AUTHORIZATION
FOR ON-SITE WASTEWATER SYSTEM
NEW WELL INSTALLATION OR REPAIR OF EXISTING WELL
MECKLENBURG COUNTY GROUNDWATER & WASTEWATER SERVICES

[redacted]

FILE # 5918B

[redacted]

SEPTIC / TYPE APPLICATION: ☑ NONE ☐ NEW SYSTEM EXISTING SYSTEM ☐ EXPANSION/ALTERATION ☐ REPAIR

WELL / TYPE APPLICATION: ☐ NONE ☐ NEW WELL ☐ MAJOR REPAIR ☑ ABANDONMENT

JOB LOCATION INFORMATION

PROJECT TRACKING #:
TAX/PARCEL #: 08509125
STREET ADDRESS: 6801 North Lake Mall Drive
CITY: Charlotte
STATE: NC ZIP: 28216
LOT #: Out Parcel 2-2
TOWNSHIP:

☒ 0-MECKLENBURG ☐ 4-PINEVILLE
☒ 1-CHARLOTTE ☐ 5-MATTHEWS
☐ 2-DAVIDSON ☐ 6-HUNTERSVILLE
☐ 3-CORNELIUS ☐ 7-MINT HILL

BUILDING INFORMATION:

DESCRIBE TYPE OF BUSINESS:

☒ COMMERCIAL ☐ INDUSTRIAL
SQUARE FOOTAGE OF FACILITY:
NUMBER OF EMPLOYEES PER SHIFT:
NUMBER OF SHIFTS:
TYPE OF WASTEWATER:
☒ SEWAGE ☐ INDUSTRIAL PROCESS WASTEWATER
HOW WILL WATER BE USED IN THE FACILITY?:
☐ CONCRETE SLAB ☐ BASEMENT WITH PLUMBING
☐ CRAWLSPACE ☐ BASEMENT WITH NO PLUMBING

IF PLANNING TO EXPAND/ALTER THE EXISTING SYSTEM, INFORMATION DOCUMENTING THE INCREASED WASTEWATER FLOW AND/OR A JUSTIFICATION FOR SYSTEM ALTERATION WILL BE REQUIRED.

WATER SUPPLY:

☐ MUNICIPAL (M) ☐ PUBLIC (C) ☒ PRIVATE WELL (P) ☐ SHARED WELL (S) ☐ OTHER 'SPRINGS' (O)

PROPOSED USE OF WELL: ☒ N/A ☐ IRRIGATION ☐ POTABLE ☐ GEOTHERMAL ☐ OTHER

ARE ANY OF THE FOLLOWING LOCATED ON THE PROPERTY? IF SO, PLEASE SHOW LOCATION ON SITE PLAN/PLAT.

BURIED CABLES, LANDFILLS, STUMPHOLES	☒ YES ☐ NO	WELLS, SPRINGS, OR WATER LINES	☒ YES ☐ NO
EXISTING WASTEWATER SYSTEMS	☒ YES ☐ NO	DESIGNATED WETLANDS	☒ YES ☐ NO
EASEMENTS OR RIGHT-OF-WAYS	☒ YES ☐ NO	GRADING/SOIL REMOVAL PERFORMED	☒ YES ☐ NO

PROPERTY OWNER:

NAME: TTC Company
ADDRESS: 209 East Long Lake Road Suite 300
CITY: Bloomfield Hills
STATE: MI ZIP: 48303-0900
HOME PHONE: WORK PHONE: 248-258-6800
MOBILE PHONE: FAX: 248-258-7536

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: Skanska USA Building Inc.
ADDRESS: 6801 North Lake Mall Drive
CITY: Charlotte
STATE: NC ZIP: 28216
HOME PHONE: WORK PHONE: 704-714-4814
MOBILE PHONE: FAX: 704-714-4842

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? N/A
WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY? N/A

*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 the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

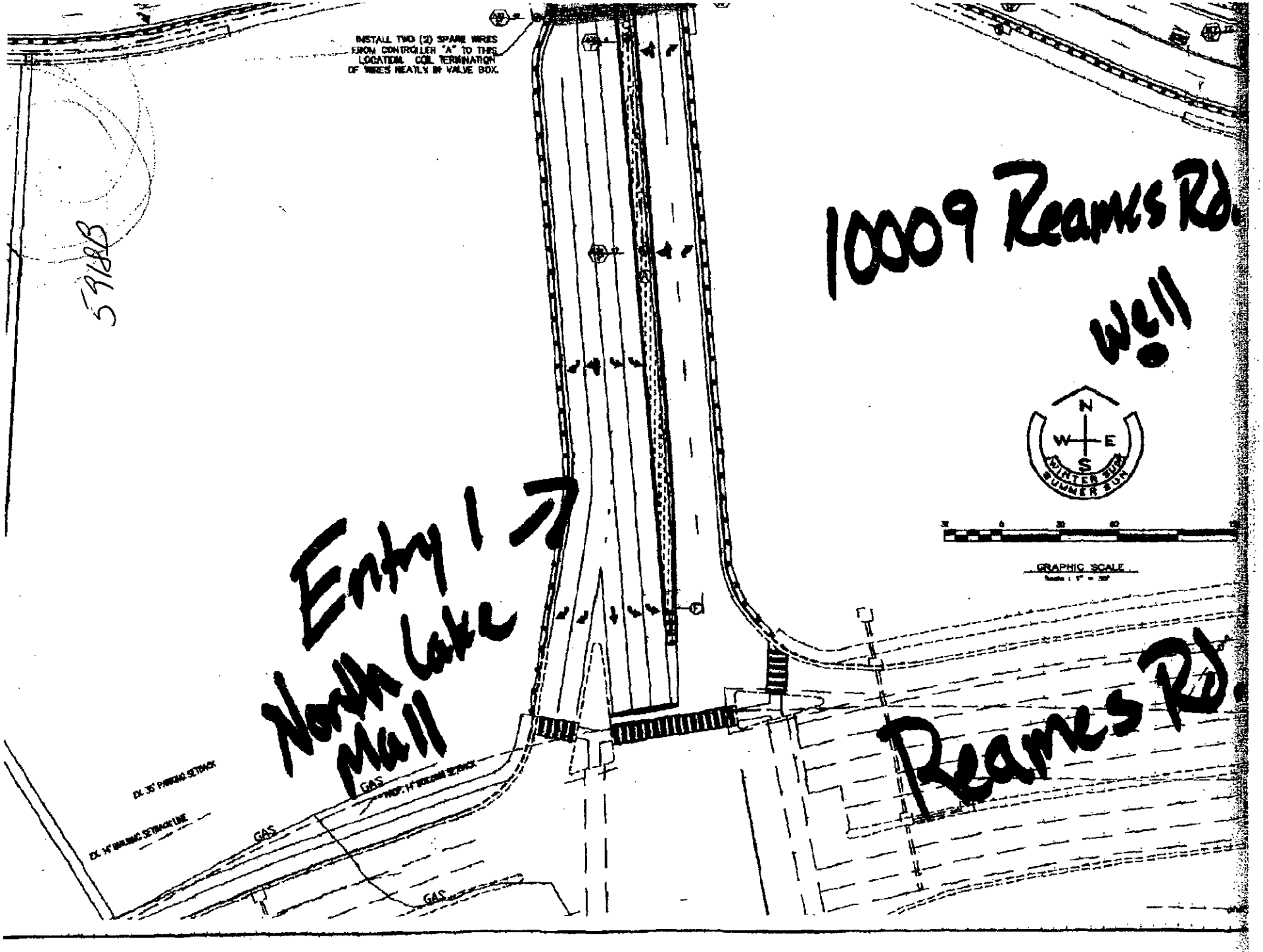
3.30.05
Owner's/Agent's Signature Date

NORTH CAROLINA DEPARTMENT OF

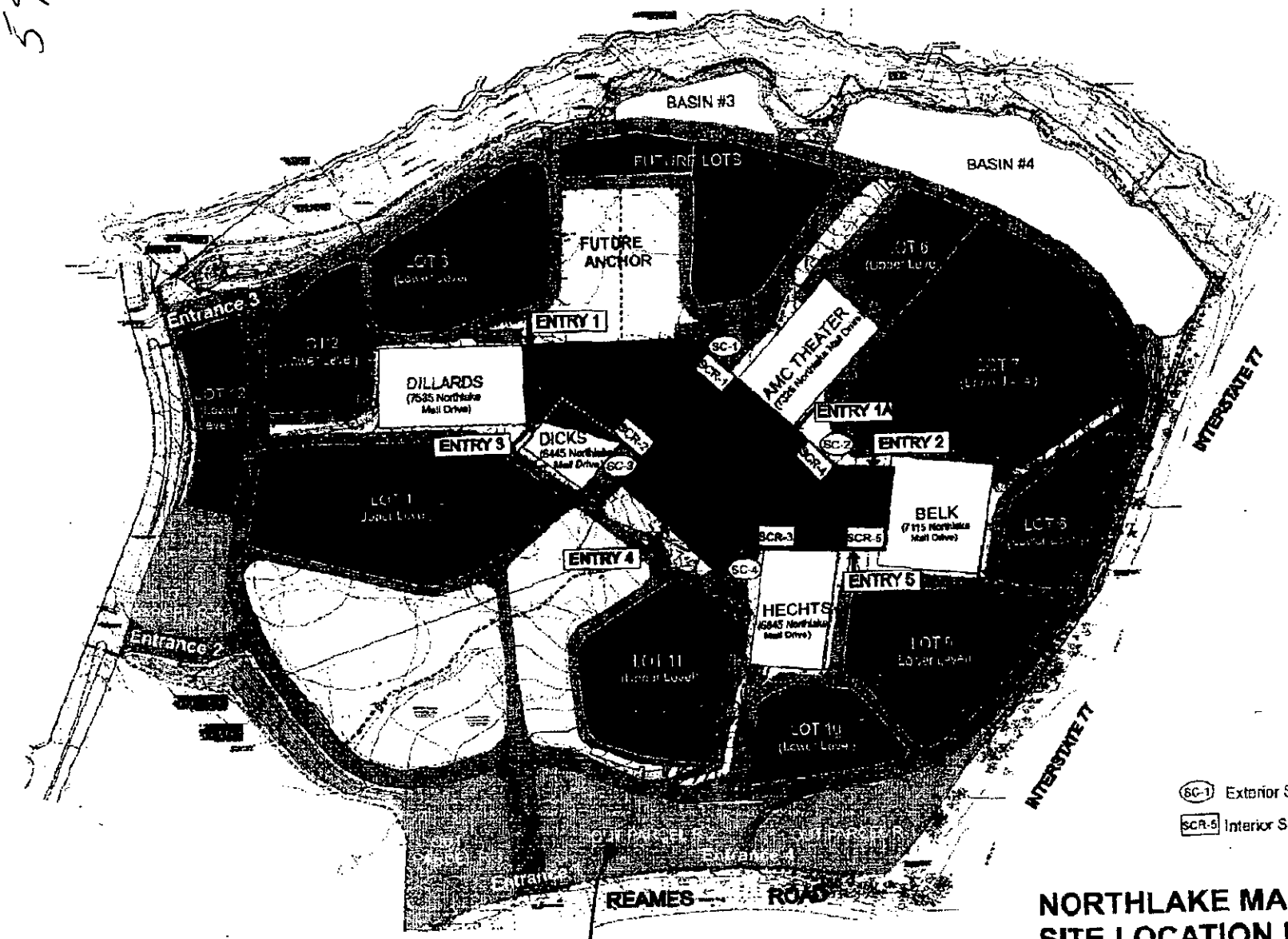
*A Well Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application,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

3.30.05
Owner's/Agent's Signature Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
GROUNDWATER & WASTEWATER SERVICES


INSTALL TWO (2) SPARE WIRES FROM CONTROLLER "A" TO THIS LOCATION. COIL TERMINATION OF WIRES NEATLY IN VALVE BOX.
5718B
10009 Reames Rd.
Well
Entry / North Lake Mall
Reames Rd.
N
W
E
S
WINTER SUN
SUMMER SUN
GRAPHIC SCALE
GAS
GAS
GAS

59180



SC-1 Exterior Service COURT

SCR-5 Interior Service CORE

NORTHLAKE MALL
SITE LOCATION DRAWING

BLYTHE DEVELOPMENT CO.

5928 Ramsey Road · Charlotte, NC 28216 · Tel. (704) 714-5388 · Fax (704) 714-5389

DATE: 3/30/05

TELECOPY COVER SHEET

Please notify us immediately if any pages are not received.

TO: Mecklenburg County / Gwen

COMPANY:

FAX #: 704-336-6894

FROM: Cameron ~~Strickland~~ Strickland

NUMBER OF PAGES INCLUDING THIS COVER PAGE:

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MESSAGES: Please Fax Permit to my attention @ 704-714-5386 and send original Copy to 1415 E. Westinghouse Blvd. Charlotte, NC 28273

Thank You

Cameron