#12012

SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

NEW SEPTIC ☐ NEW WELL ☐ USE EXISTING ☑ MODIFIED PLOT PLAN ☐

New Septic Fees Paid

OK TO Release Hold

IP ($250.00) _____ Initial/Date

CA ($200.00) _____Initial/Date

OP ($200.00) _____Initial/Date

(CA and OP fees need to be paid before a building permit can be issued)

New Well Fees Paid: $550.00 _____ Initial/Date

Use Existing Fees Paid: $100.00 AB/04.01.21 Initial/Date

Alteration Fees Paid: $300 Total $200 _____Initial/Date (If use existing was part of payment)

Modified Plot Plan Fees Paid: $100.00 _____Initial/Date

Floor plans need to be submitted and reviewed before CA can be issued ☐ Review ☐

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

Septic file complete ☐_____ Well complete ☐ _____

Send permit for signature ☐ Signature received ☐ _____

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

Certified operator contract is on file ☐ _____

MECKLENBURG COUNTY
HEALTH DEPARTMENT

#12093

1 APR '21 AM 8:53

APPLICATION FOR APPROVAL TO USE AN EXISTING 10950B 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: Elsa De La Cruz
ADDRESS: 9307 Mt.Holly Huntersville Rd
CITY: Huntersville
STATE: NC ZIP: 28078
PHONE: 704-778-7933
ALTERNATE PHONE:
E-MAIL: celiadora@icloud.net

PROPERTY OWNER: [✓] SAME AS PERSON FILING APPLICATION
NAME:
ADDRESS:
CITY:
STATE: ZIP:
PHONE:
ALTERNATE PHONE:
E-MAIL: celiadora@icloud.com

JOB LOCATION INFORMATION
TAX PARCEL #: 01547124
STREET ADDRESS: 9307 Mt. Holly Huntersville Rd
CITY: Huntersville
STATE: NC ZIP: 28078

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: 3
NUMBER OF OCCUPANTS: 4

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.

Elsa De La Cruz — Owner's/Agent's Signature
3/31/21 — Date

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

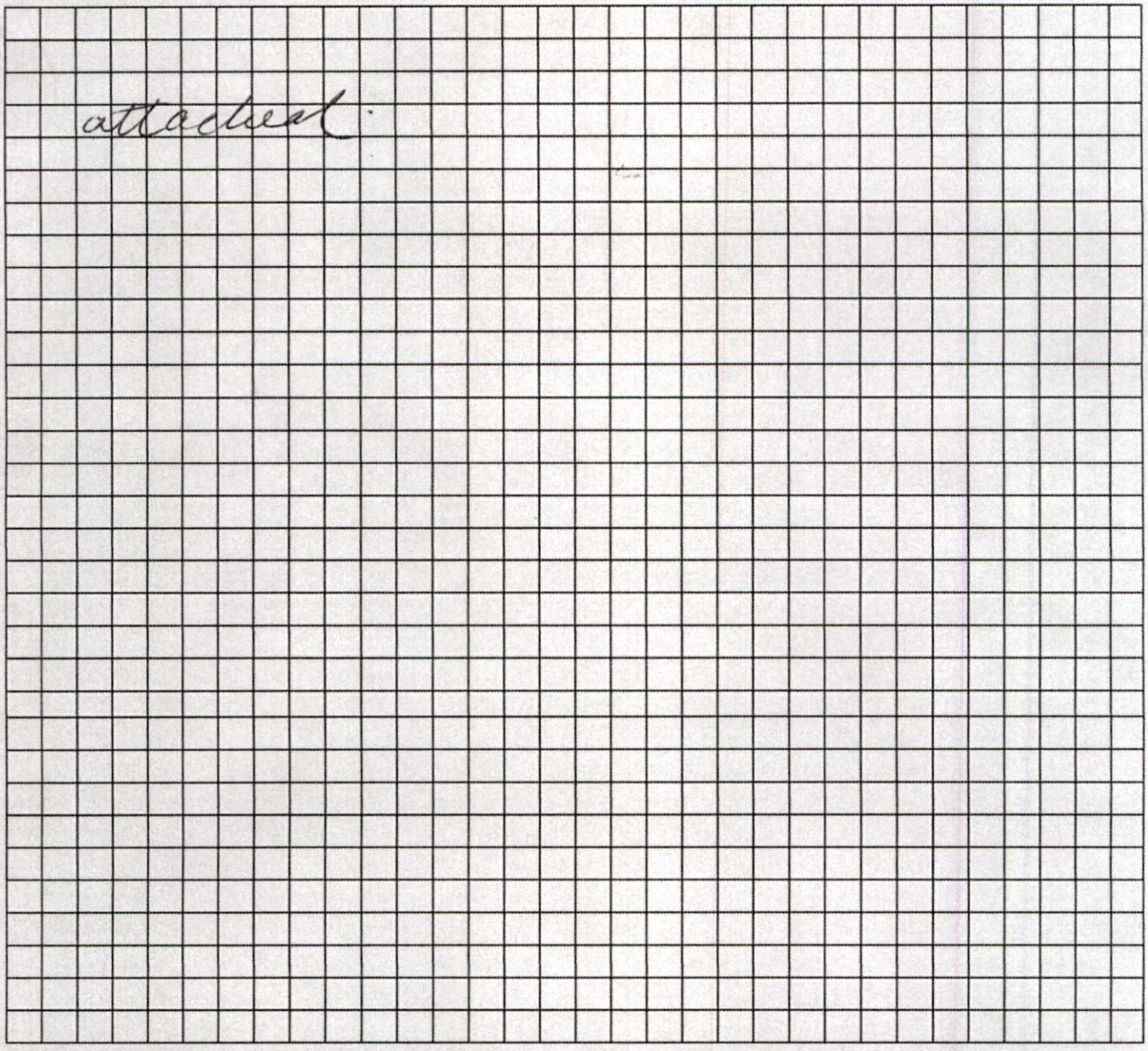
MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208 OFFICE: (980) 314-1680, FAX: 704-336-6894

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: 9307 Mt Holly Huntersville Rd Tax Parcel #: 01547124



*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.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

deck approved
all setback met
Heather Ray 4-7-21
REHS Signature Date

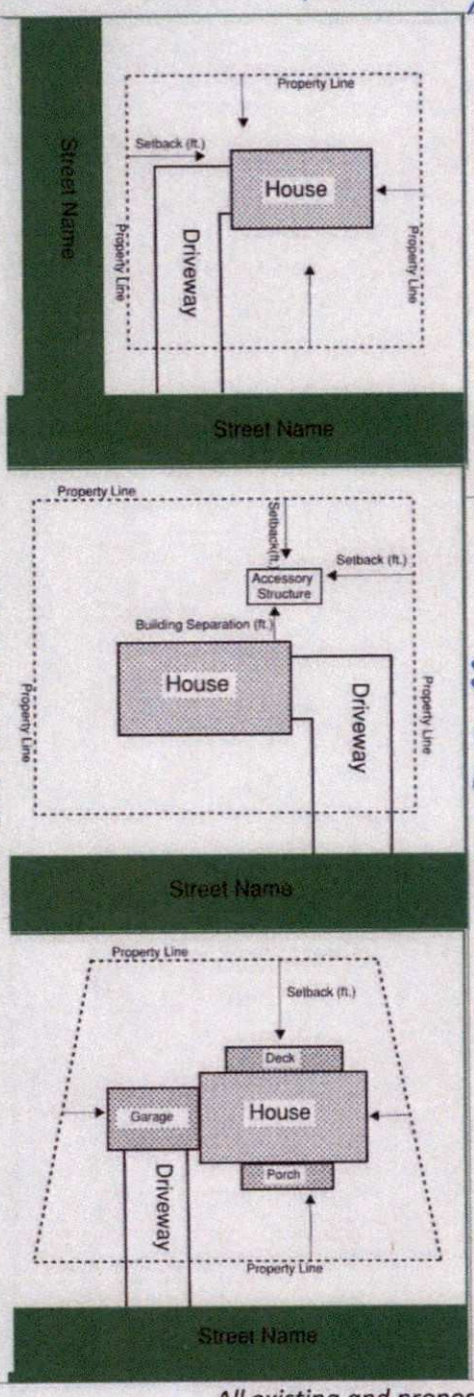
MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208 OFFICE: (980) 314-1680, FAX: 704-336-6894

Town of Huntersville NORTH CAROLINA

Plot Plan

Street #	N,S,E,W	Street Name	AV, RD, ST, etc.	Suite
9307		MOUNT HOLLY HUNTERSVILLE	RD	

EXAMPLE PLOT PLANS

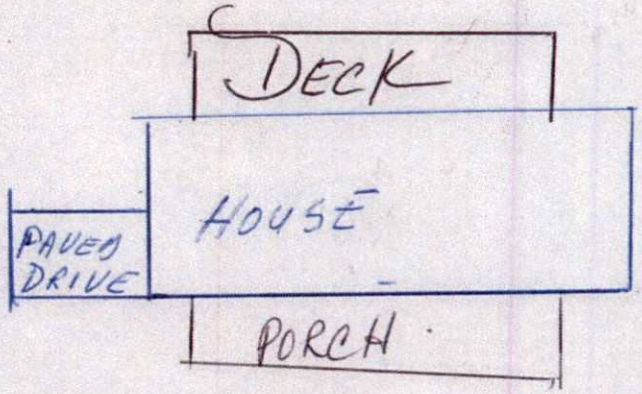


INSTRUCTIONS:

In the space provided, draw plot plan as neatly and accurately as possible, from a survey if available. Separate applications and plot plans are required for each building.

1. Draw street(s) and right-of-ways(s).
2. Draw property lines with showing setbacks for proposed structure.
3. Draw proposed buildings and existing structures including any driveway(s), walkway(s), attached porch(es), deck(s), chimney(s), carport(s), garage(s), shed(s), barn(s), pool(s), accessory dwelling(s), etc.
4. List area of existing and proposed structures.
5. List amount of existing impervious use and area of proposed structure, if subject to Watershed regulations.

Show access easements, open space, tree save, and environmental buffers if applicable.



WEDGEWOOD DR

MOUNT HOLLY HUNTERSVILLE RD

All existing and proposed structures are shown with measurements indicated.

Applicant Name	Date	Applicant Signature	
ELSA DE LA CRUZ		Elsa De La Cruz	
Zoning Approved By	**Date**	**Notes**	**Parcel ID**

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	03/31/21	**Amount:**	100.00
Receipt #:	128078	**Tendered:**	100.00
Check / Auth #:	VISA 031903	**Returned:**	0.00
Received By:	CABANLA		

Account Information

Account #: 200000
Contractor: DE LA CRUZ, ELSA
Attn:
Address:
Address:
City/State/Zip: ,

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	Use Existing System 9307 MT HOLLY HUNTERSVILLE		1	100.00	100.00

----------Outstanding Balances----------

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

Payment Receipt

Mecklenburg County

Environmental Health
3205 Freedom Drive, Suite 8000
Charlotte, NC 28208
Phone: 980-314-1651

Enter Account # or Customer Name Here:
ANDRES DE LA CRUZ

Bill To:

ELSA DE LA CRUZ

Single Payment

Transaction Date:	03/31/2021 1:43 PM Pacific Time
Pay Method:	VISA **********0693
Approval #:	031903
Trace Number:	95a5aa34-fcf4-4be9-8fe0-de8772708cd8
Amount:	$100.00

Payment Amount:	$100.00
Total:	**$100.00**

Thank you for your payment.