

2424 MT HOLLY-HUNTERSVILLE RD

03111103

5/23/08

marliwr

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

Groundwater & Wastewater Services
Well Project File & Data Review Worksheet

GWS File #: 5062 WASPS App #: 2246

Primary ES assigned to project: Chris Shemwell

Secondary ES assigned to project: Josh Sellers

Project Type: New Well ☐ Well Abandonment ☑ Major Repair ☐

Septic System Status: Permit in progress ☐ System installation completed ☐ N/A-Sewer ☑

I. File Review:

Completed application	Yes ☑	No ☐	
ARGU review report	Yes ☑	No ☐	N/A ☐
Signed permit	Yes ☑	No ☐	
Notification of disinfection	Yes ☐	No ☐	N/A ☑
Sample Results	TC ☐	Nitrate/Nitrite ☐	Other ☐ N/A ☑
GW-1 Form / GW-30 Form	Yes ☑	No ☐	
Other related documentation	Yes ☐	No ☐	N/A ☐

Items requiring correction/modification: _____

Comments:

II. WASPS Review:

Completed application w/ valid address	Yes ☑	No ☐	
ARGU review completed	Yes ☑	No ☐	N/A ☐
Permit issued	Yes ☑	No ☐	
Activity checklist completed	Yes ☑	No ☐	
Appropriate comments included	Yes ☐	No ☑	
Site information record completed	Yes ☑	No ☐	
Well detail record completed	Yes ☑	No ☐	

Items requiring correction/modification: _____

Comments:

Application received date: 5/21/07 ES assigned date: 5/24/07 Permit issued date: 5/14/07

Well approval date: 5/25/07 Number of days to complete project: _____

Review performed by: _____ Date performed: 5/25/07

WELL ABANDONMENT RECORD

North Carolina Department of Environment and Natural Resources- Division of Water Quality

App 2246

File 5062

WELL CONTRACTOR CERTIFICATION # 2211

1. WELL CONTRACTOR:
Pete FLOREA
Well Contractor (Individual) Name
McCall Bros. Inc.
Well Contractor Company Name
STREET ADDRESS 6700 Brookshire BLVD.
Charlotte NC 28216
City or Town State Zip Code
(704) 399-1506
Area code - Phone number

2. WELL INFORMATION:
SITE WELL ID # (if applicable)
STATE WELL PERMIT # (if applicable)
COUNTY WELL PERMIT # (if applicable)
DWQ or OTHER PERMIT # (if applicable)
WELL USE (Circle applicable use): Monitoring (Residential) Municipal/Public Industrial/Commercial Agricultural
Recovery Injection Irrigation
Other (list use)

3. WELL LOCATION:
COUNTY MECK QUADRANGLE NAME
NEAREST TOWN: Charlotte
2424 Mt Holly Huntersville Rd.
(Street/Road Name, Number, Community, Subdivision, Lot No., Parcel, Zip Code)

TOPOGRAPHIC / LAND SETTING:
Slope Valley (Flat) Ridge Other
(Circle appropriate setting)

LATITUDE 35° 18.877'
LONGITUDE 80° 57.512'
May be in degrees, minutes, seconds, or in a decimal format
Latitude/longitude source: (GPS) Topographic map
(Location of well must be shown on a USGS topo map and attached to this form if not using GPS.)

4a. FACILITY- The name of the business where the well is located. Complete 4a and 4b. (If a residential well, skip 4a; complete 4b, well owner information only.)
FACILITY ID #(if applicable)
NAME OF FACILITY
STREET ADDRESS
City or Town State Zip Code

4b. CONTACT PERSON/WELL OWNER:
NAME CARL Rudisill
STREET ADDRESS 9500 STATESville Rd.
Charlotte NC 28269
City or Town State Zip Code
(704) 688-4280
Area code - Phone number

5. WELL DETAILS:
a. Total Depth: 185 ft. Diameter: 6 in.
b. Water Level (Below Measuring Point): 20 ft.
Measuring point is 0 ft. above land surface.

6. CASING: Length Diameter
a. Casing Depth (if known): ft. in.
b. Casing Removed: ft. in.

7. DISINFECTION: 4oz
(Amount of 65%-75% calcium hypochlorite used)

8. SEALING MATERIAL:
Neat Cement: Cement 188 lb. Water 74 gal.
Sand Cement: Cement lb. Water gal.
Bentonite: Bentonite 2500 lb. Type: Slurry Pellets ✓ Water gal.
Other: Type material Amount

9. EXPLAIN METHOD OF EMPLACEMENT OF MATERIAL:
POURED Bentonite AND PUMPED GROUT FROM MIXER

10. WELL DIAGRAM: Draw a detailed sketch of the well on the back of this form showing total depth, depth and diameter of screens (if any) remaining in the well, gravel interval, intervals of casing perforations, and depths and types of fill materials used.

11. DATE WELL ABANDONED 5-8-07

I DO HEREBY CERTIFY THAT THIS WELL WAS ABANDONED IN ACCORDANCE WITH 15A NCAC 2C, WELL CONSTRUCTION STANDARDS, AND THAT A COPY OF THIS RECORD HAS BEEN PROVIDED TO THE WELL OWNER.

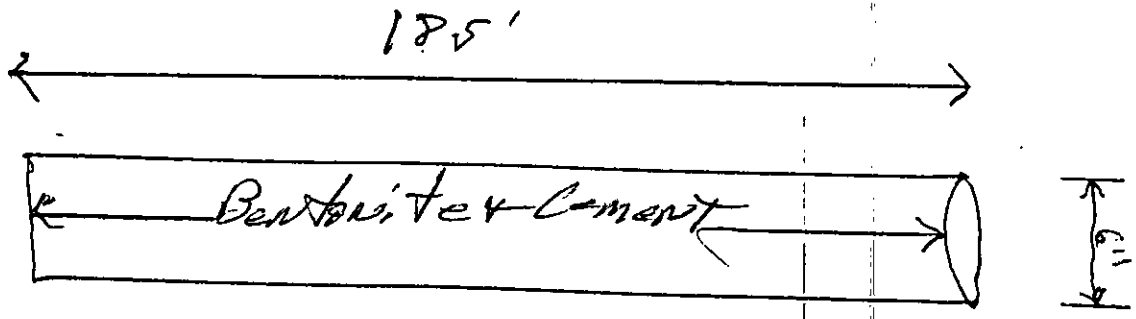
Pete Florea 5-9-07
SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE

SIGNATURE OF PRIVATE WELL OWNER ABANDONING THE WELL DATE
(The private well owner must be an individual who personally abandons his/her residential well in accordance with 15A NCAC 2C .0113.)

PRINTED NAME OF PERSON ABANDONING THE WELL
Sean Swisher

Submit a copy to the owner and the original to the Division of Water Quality within 30 days.
Attn: Information Management, 1617 Mail Service Center – Raleigh, NC 27699-1617, Phone No. (919) 733-7015 ext 568.

Form GW-30
Rev. 5/06


185'
Bentonite + Cement
5"

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

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

Permit#: 10002246 **Tax Parcel #:** 031-111-03
Property Owner: Southern Site Development
Job Location Address: 2424 MT HOLLY-HUNTERSVILLE RD
City/ETJ: CHARLOTTE **State:** NC **Zip Code:** 28214
Permit Issuance Date: 5/14/2007
Use of Well:
Type of Facility Served by Well: House
Sewage System Type: None

Type of Repair/Abandonment

- ○ Major Repair Before Placing the Well in Service
- ○ Major Repair Before Temporary Abandonment
- ○ Temporary Abandonment
- ◉ Permanent Abandonment

Area of Regulated Groundwater Usage Restrictions Apply: YES

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 North Carolina Certified Well Contractor must perform the well construction activities.
- 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 the 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):

- ☐ Grout must be placed the full extent of the casing.
- ☐ Initial water sample to taken and analyzed for (check all that apply):
  - ☐ Volatile Organic Compounds (VOC's)
  - ☐ Semi-volatile Compounds
  - ☐ Metals (Specify in Other Conditions)
  - ☐ Pesticides
  - ☐ Herbicides
  - ☐ Other (See Below)

Other Conditions of This Permit:

Based on ARGU review permit approved with no special conditions.

Chris Sherrill RS, CSS
Authorized Agent: Print Name

Signature:

McCall Brothers
Owner/Legal Agent: Print Name

Joe McCall
Signature:

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

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

Permit#: 10002246 **Tax Parcel #:** 031-111-03
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Job Location Address:2424 MT HOLLY-HUNTERSVILLE RD
City/ETJ:CHARLOTTE **State:** NC **Zip Code:** 28214
Permit Issuance Date: 5/14/2007
Use of Well:
Type of Facility Served by Well: House
Sewage System Type: None

Type of Repair/Abandonment

- ○ Major Repair Before Placing the Well in Service
- ○ Major Repair Before Temporary Abandonment
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- ☐ Grout must be placed the full extent of the casing.
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  - ☐ Volatile Organic Compounds (VOC's)
  - ☐ Semi-volatile Compounds
  - ☐ Metals (Specify in Other Conditions)
  - ☐ Pesticides
  - ☐ Herbicides
  - ☐ Other (See Below)

Other Conditions of This Permit:

Based on ARGU review permit approved with no special conditions.

Chris Sherrill RS, CSS
Authorized Agent: Print Name

Signature:

Owner/Legal Agent: Print Name

Signature:

MECKLENBURG COUNTY
Land Use & Environmental Services Agency
Groundwater & Wastewater Services

Fax Coversheet

NOTICE

The information contained in this fax may be privileged and/or confidential and is intended only for the use of the person to who it is addressed. If the reader of this message is not the intended recipient (or such recipient's employee or agent), you are hereby notified not to read, distribute, or copy the materials attached hereto without the prior written consent of the sender. If you have received this fax in error, please notify the sender by telephone call and return the original to us by mail and you will be reimbursed for the required postage. Thank you.

To: McCall Bros Fax #: (704) 398-2605

Phone #: (704) 399-1506

From: Chris Sherrill/RS, LS Date: 5/14/07

Number of pages transmitted: 2 (including coversheet)

Comments: Abandonment permit for 2424 Mt Holly-Huntersville Rd. Please sign + fax back.

Chris Sherrill

704-353-0139

If you do not receive all pages of this fax please call (704) 336-5103.

☐ Original will not follow

☐ Original will follow via: ☐ U.S. Mail ☐ Hand Delivery ☐ _____

700 North Tryon Street · Suite 211 · Charlotte, North Carolina 28202-2236
Office #: (704) 336-5103 · Fax #: (704) 336-6894

TRANSMISSION VERIFICATION REPORT

TIME : 05/14/2007 15:14

DATE,TIME	05/14 15:13
FAX NO./NAME	97043982605
DURATION	00:00:41
PAGE(S)	02
RESULT	OK
MODE	STANDARD ECM

WORK ORDER

Workorder No: 73048
Description ARGU Well Review
Submitted To: STUTTS, JACK
Completed By: CALDWELL, SHAWNA
Section: GWS
Status: IP

Initiated Date: 5/8/07 1:44:58 PM
Projected Start Date: 5/8/07
Projected Finish Date:
Actual Start Date: 5/8/07
Actual Finish Date: 5/8/07 1:46:00 PM
Date Closed:

Entity Type: ARGU_WELLS
Facility ID: 9415
Entity Location: 9415

SITE INFORMATION

Workorder Address: 2424 MT. HOLLY-HUNTERSVILLE RD
and/or
General Location:
Town: CITY

Contact: (from Service Request)

Contact Work Phone: (from Service Request)	Contact Home Phone: (from Service Request)

ACTIVITY

Instructions:
1. Create one work order for each ARGU review performed.
2. Geocode the location using the location address from WASPS.
3. Attach the appropriate GIS well feature(s) from the ARGU_Wells_WASPS data layer under the ENTITIES tab.
4. Select the appropriate TOWN under the DETAILS tab.
5. All documentation associated w/ the review should be included as attachments.
6. Enter time for labor required to complete all work associated w/ review.
7. Use the COMMENTS field to document work activities.

ARGU Well features are automatically created in gis when the well permit application is entered into WASPS.

Comment:
Create one work order per ARGU Review
By CALDWELL, SHAWNA: 5/8/07 1:48:12 PM
Based on review of our files, the permit for a private well abandonment at PID# 031-111-03, 2424 Mt. Holly-Huntersville Rd., Charlotte, NC is approved. No records of sampling this well or impact to this well were noted in the file review, so the well requires abandonment under the Mecklenburg Co. Groundwater Regulations dated Oct. 5, 2004, Chapter II Construction, Repair and Abandonment for Private Water Supply Wells with no special conditions.

Hydrogeologist Permit Application Review

Application #: 2246
Permit File #: 5062

Permit Type: Abandonment (Residential)

ARGU Review Completed: (•) Yes ( ) No

Permit Denial?: ( ) Yes (•) No

Additional Conditions:

☐ Full Grouting ☐ Casing to Bedrock ☐ Sampling

☐ Volatile Organic Compounds (VOC's) ☐ Semi-volatile Compounds ☐ Metals (Specify in Other Conditions)

☐ Pesticides ☐ Herbicides ☐ Other

Comments/Other Sample Types:

Based on ARGU review permit approved with no special conditions.

EHS Review | Update

Time Spent (hours):
☐ Change: 1.00

The application has been forwarded to Philo Walker for review.

App. #: 2246

PERMIT APPLICATION FOR A RESIDENTIAL SITE IMPROVEMENT PERMIT FOR ONSITE WASTEWATER SYSTEM, NEW WELL INSTALLATION, OR REPAIR OF EXISTING WELL

MECKLENBURG COUNTY GROUNDWATER & WASTEWATER SERVICES

Septic Fee: 0.00 Date: CRT[ ]

Well Fee: 0.00 Date: 5/4/2007 CRT[ ]

FILE # 5062

SEPTIC / TYPE APPLICATION: (•) NONE ( ) NEW SYSTEM ( ) ALTERATION ( ) REPAIR ( ) MODIFIED PLOT PLAN

WELL / TYPE APPLICATION: ( ) NONE ( ) NEW WELL ( ) MAJOR REPAIR ( ) ABANDONMENT

JOB LOCATION INFORMATION:

TAX / PARCEL #: 031-111-03 [ ] PO

STREET ADDRESS: 2424 MT HOLLY-HUNTERSVILLE F

CITY: Charlotte

STATE: NC ZIP: 28214

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT #: 0

TOWNSHIP: 01

General Comments:

BUILDING INFORMATION:

TYPE OF BUILDING:

( ) SINGLE MOBILE HOME (S) ( ) MODULAR HOME (M)

( ) DOUBLE WIDE (D) ( ) MULTIPLE FAMILY (U)

(•) HOUSE (H) ( ) OTHER

HEATED SQUARE FOOTAGE: 0

NUMBER OF BEDROOMS: 3

NUMBER OF OCCUPANTS: 3

FOUNDATION FOR RESIDENCE:

[ ] CONCRETE SLAB [ ] BASEMENT WITH PLUMBING

[x] CRAWL SPACE [ ] BASEMENT WITH NO PLUMBING

IF PLANNING TO EXPAND / ALTER THE EXISTING SYSTEM INDICATE THE FOLLOWING CHANGES:

NUMBER OF BEDROOMS TO BE ADDED: 0

NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: 0

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE?: ( ) Yes (•) No

TYPE:

WATER SUPPLY:

[ ] MUNICIPAL (M) [x] PUBLIC (C) [ ] PRIVATE WELL (P) [ ] SHARED WELL (S) [ ] OTHER 'SPRINGS' (O)

PROPOSED USE OF WELL: (•) N/A ( ) IRRIGATION ( ) POTABLE ( ) GEOTHERMAL ( ) OTHER

PLEASE INDICATE AND RANK DESIRED SEPTIC SYSTEM TYPE(S) IN ORDER OF PREFERENCE *(1-MOST 5-LEAST DESIRED)*:

[ ] ANY TYPE [ ] CONVENTIONAL [ ] ACCEPTED [ ] INNOVATIVE [ ] ALTERNATIVE [ ] OTHER

RANK: 0 0 0 0 0

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

BURIED CABLES, LANDFILLS, STUMPHOLES	( ) Yes (•) No	GRADING/SOIL REMOVAL PERFORMED	(•) Yes ( ) No
EXISTING WASTEWATER SYSTEMS	(•) Yes ( ) No	JURISDICTIONAL WETLANDS	( ) Yes (•) No
WELLS, SPRINGS, OR WATER LINES	(•) Yes ( ) No	APPROVAL REQ'RD BY OTHER AGENCY	( ) Yes (•) No
EASEMENTS OR RIGHT-OF-WAYS	( ) Yes (•) No	WASTEWATER OTHER THAN DOM. SEWAGE	( ) Yes (•) No

PROPERTY OWNER:

NAME: Southern Site Development

ADDRESS: 9500 Statesville Rd

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: McCall Brothers, Inc.

ADDRESS: P O 668710

CITY:	Charlotte			CITY:	Charlotte		
STATE:	NORTH CAROLINA	ZIP:	28269	STATE:	NORTH CAROLINA	ZIP:	28266
HOME PHONE:		WORK:	704-688-4280	HOME PHONE:		WORK:	704-399-1506
MOBILE:		FAX:	704-688-4281	MOBILE:		FAX:	704-398-2605

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?

WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?

PRINT | Update | Go to Front Counter | Duplicate

Rept. for ARGU Review
2424 Mt. Holly Huntesville Rd., Charlotte, NC
PID# 031-111-03
File # 5062
Application#2246

05/07/07 (Mon.) - Received request for ARGU review for private well abandonment for a WSW located at 2424 Mt. Holly Huntersville Rd., Charlotte, PID#031-111-03. According to the WIS, there is not an existing well at this property.

05/08/07 (Tues.) - Conducted ARGU Review. Identified 3 MPL sites within 2,000' of the subject parcel.

MPL# 1119 Nichols Residence
9315 Lawing School Rd., Charlotte, NC
PID# 031-111-13
NCDENR UST Section Inc. 27644
Source-550 gallon heating oil UST

NCDENR database indicates an active high risk UST incident. LSA following closure of UST indictates soil>soil to gw and GW>2L at this site.

MPL investigation completed in 2004. Nine WSWs located and 2 sampled with no detections.

No record of WSW sampling at the subject site was noted in the file review.

The subject site is within 1,000' of this MPL site.

MPL# 956 Chinatown Restaurant
2910 Mt. Holly-Hunterville Rd., Charlotte, NC
PID# 031-132-03
NCDENR UST Inc.-unknown
Source-unknown

Not located in NCDENR database.

No MPL investigation on file.

No records of WSW sampling at the subject site were noted in the file review.

The subject site is within 1,500' of this MPL site.

MPL# 446 Shuffletown Grocery and Service
10201 Rozzelles Ferry Rd., Charlotte, NC
PID# 031-182-40
NCDENR UST Section Inc. 11830
Source- petroleum USTs

NCDENR database indicates an active low risk UST incident with GW contamination.

No MPL investigation on file.

No record of WSW sampling at the subject site was noted in the file review.

The subject site is within 1,500' of this MPL site.

Based on review of our files, the permit for a private well abandonment at PID# 031-111-03, 2424 Mt. Holly-Huntersville Rd., Charlotte, NC is approved. No records of sampling this well or impact to this well were noted in the file review, so the well requires abandonment under the Mecklenburg Co. Groundwater Regulations dated Oct. 5, 2004, Chapter II Construction, Repair and Abandonment for Private Water Supply Wells with no special conditions.

Mecklenburg County, NC Groundwater & Wasterwater Services
Contamination Site Information

For questions or comments concerning the information on this page call 704-336-5500.

***Parcel ID:** 03113203
Name: CHINATOWN RESTAURANT
House No: 2910
Street Dir:
Street Name: MT. HOLLY HUNTERSVILLE
Street Type: RD
City: CHARLOTTE
State: NC
Zip: 28214
NC Incident Number: 0 EXIT Well Information System →

* Link to GIS Real Estate System

Mecklenburg County, NC Groundwater & Wasterwater Services
Contamination Site Information

For questions or comments concerning the information on this page call 704-336-5500.

***Parcel ID:** 03118240
Name: SHUFFLETOWN GROCERY AND SERVICE
House No: 10201
Street Dir:
Street Name: ROZZELLES FERRY
Street Type: RD
City: CHARLOTTE
State: NC
Zip: 28214
NC Incident Number: 11830 EXIT Well Information System →

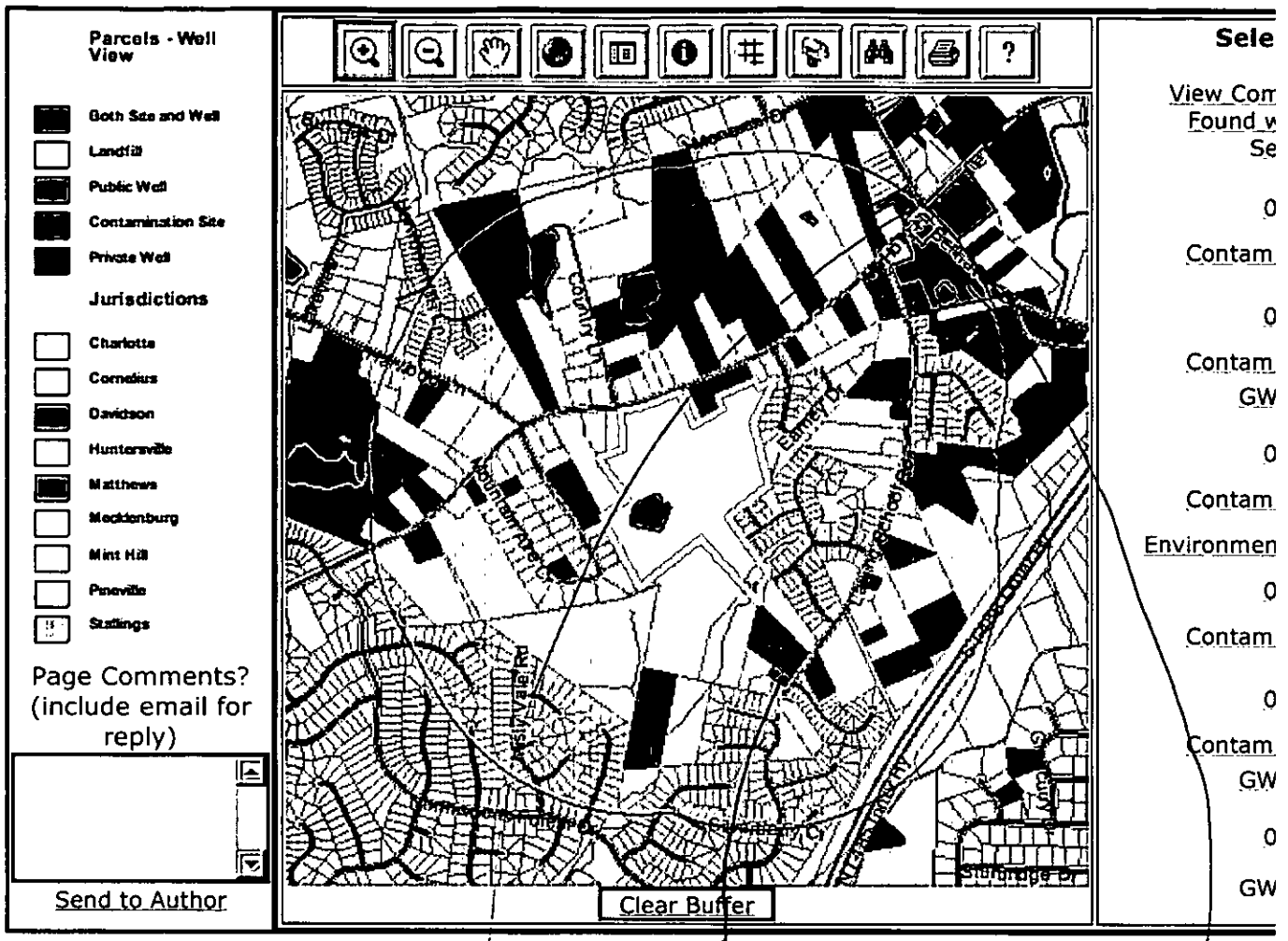
* Link to GIS Real Estate System

Mecklenburg County, NC Groundwater & Wasterwater Services
Contamination Site Information

For questions or comments concerning the information on this page call 704-336-5500.

***Parcel ID:** 03111113
Name: NICHOLS RESIDENCE
House No: 9315
Street Dir:
Street Name: LAWING SCHOOL
Street Type: RD
City: CHARLOTTE
State: NC
Zip: 28214
NC Incident Number: 27644 EXIT Well Information System →

* Link to GIS Real Estate System


Parcels - Well View
Both Sds and Well
Landfill
Public Well
Contamination Site
Private Well
Jurisdictions
Charlotte
Cornelius
Davidson
Huntersville
Matthews
Mecklenburg
Mint Hill
Pineville
Stallings
Page Comments? (include email for reply)
Send to Author
Clear Buffer
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Nichols Res
Shufletown
Moc.
Chinetown
Rest

MCCALL BROTHERS, INC. BUILDING TRADES

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

FILE # 5062 IP 2246

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

WELL / TYPE APPLICATION: ☐ NONE ☐ NEW WELL ☐ MAJOR REPAIR ☒ ABANDONMENT SC

JOB LOCATION INFORMATION:

TAX/PARCEL #: 031-111-03

STREET ADDRESS: 2424 Mt. Holly Huntersville Rd.

CITY: Charlotte

STATE: NC ZIP: 28214

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT #:

TOWNSHIP:

☒ 1-MECKLENBURG ☐ 4-PINEVILLE
☐ 2-CHARLOTTE ☐ 5-MATTHEWS
☐ 3-DAVIDSON ☐ 6-HUNTERSVILLE
☐ 3-COHNESIUS ☐ 7-MINT HILL 1959

BUILDING INFORMATION:

TYPE OF BUILDING:

☐ SINGLE MOBILE HOME (S) ☐ MODULAR HOME (M)
☐ DOUBLE WIDE (D) ☐ MULTIPLE FAMILY (U)
☐ HOUSE (H) ☐ OTHER

HEATED SQUARE FOOTAGE:

NUMBER OF BEDROOMS 3

NUMBER OF OCCUPANTS 3

FOUNDATION FOR RESIDENCE:

☐ CONCRETE SLAB ☐ BASEMENT WITH PLUMBING
☐ CRAWLSPACE ☐ BASEMENT WITH NO PLUMBING

IF PLANNING TO EXPAND/ALTER THE EXISTING SYSTEM INDICATE THE FOLLOWING CHANGES:

NUMBER OF BEDROOMS TO BE ADDED: NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE? ☐ YES ☐ NO TYPE:

WATER SUPPLY:

☐ MUNICIPAL (M) ☒ PUBLIC (C) ☐ PRIVATE WELL (P) ☐ SHARED WELL (S) ☐ OTHER WATER SOURCE (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: Southern Site Development

ADDRESS: 9625 Statesville Rd.

CITY: Charlotte

STATE: NC ZIP: 28269

HOME PHONE: WORK PHONE: 688-4280

MOBILE PHONE: FAX: 688-4281

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: McCall Brothers Inc.

ADDRESS: PO Box 668710

CITY: Charlotte

STATE: NC ZIP: 28266

HOME PHONE: WORK PHONE: 704 3991506

MOBILE PHONE: FAX: 704 3982605

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?

WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?

"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 visit and the property for the purpose of processing this request.

Owner's/Agent's Signature Date

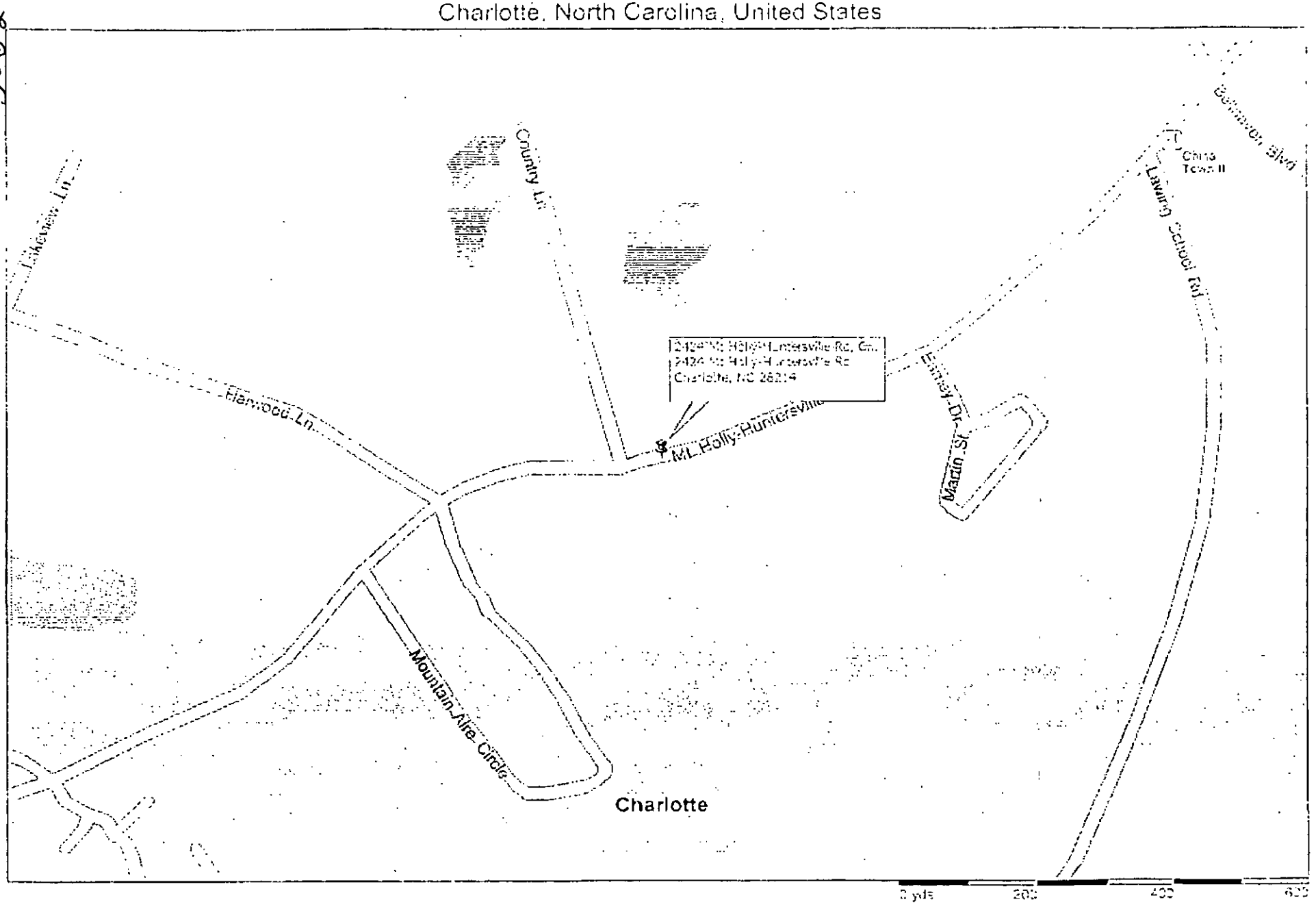
"A Well Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in the application is falsified or changed. The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application,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

Joe McCollum 5-10-07
Owner's/Agent's Signature Date

NORTH CAROLINA DEPARTMENT OF
ENVIRONMENT & NATURAL RESOURCES DIVISION
OF ENVIRONMENTAL HEALTH ON-SITE

MECKLENBURG COUNTY ENVIRONMENTAL PROTECTION
GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST., SUITE 214
CHARLOTTE, NC 28202

File # 5062



MCCALL BROTHERS ⇔ 7043366934

09:03

13-Jul-2007

5063
Easley Dr.
Martin St. Lot 11

File #5062

12-03-07 09:03 MCCALL BROTHERS → 7043366894

