

12015 SAM FURR RD

1/10/2008

duponbj

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

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

Sheet: 1 of 2
Property ID: 011-231-22
Lot #:
File #: 6415B
Code: 2

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Rayne Properties
Applicant: Jeff Ross
Address: 12530 Mayes Road, Huntersville, N. C. 28078
Date Evaluated: 5/3/06
Proposed Facility: School
Design Flow (.1949): 1250gpd
Property Size: Approx. 1.0a inv.
Location of Site: Sam Furr road
Property Recorded:
Water Supply: [x] Public [ ] Individual [ ] Well [ ] 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, 8	0-5	GR/SCL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48+	N/A	NONE	PS, IV
		5-48	SBK/C	FI/SEXP/S/P					.3GPD/FT^2
2	"	0-7	GR/SCL	FR/SEXP/SS/SP	"	"	"	"	"
		7-41	SBK/C	FI/SEXP/S/P					
		41-48	SBK/CL	FR/SEXP/SS/SP					
3	"	0-6	GR/SCL	"	>37" TO SOIL WETNESS	37	"		PS, IV
		6-37	SBK/SC	FI/SEXP/S/P					.275GPD/FT^2
4	"	0-6	GR/SCL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48+	"	"	PS, IV
		6-38	SBK/C	FI/SEXP/S/P					.3GPD/FT^2
		38-48	SBK/CL	FR/SEXP/SS/SP					
5	"	0-5	GR/SCL	"	"	"	"	"	"
		5-48	SBK/C	FI/SEXP/S/P					
6	"	0-6	GR/SCL	FR/SEXP/SS/SP	"	"	"	"	"
		6-48	SBK/C	FI/SEXP/S/P					
7	"	0-6	GR/SCL	FR/SEXP/SS/SP	"	"	"	"	"
		6-42	SBK/C	FI/SEXP/S/P					
		42-50	SBK/CL	FR/SEXP/SS/SP					

Description	Initial System	Repair System
Available Space (.1945)	PS	US
System Type(s)		
Site LTAR	.3GPD/FT^2	.3GPD/FT^2

Other Factors (.1946):
Site Classification (.1948): UNSUITABLE
Evaluated By: W. R. Marlin, LSS, 5/4/2006, W. R. Marlin
Others Present:

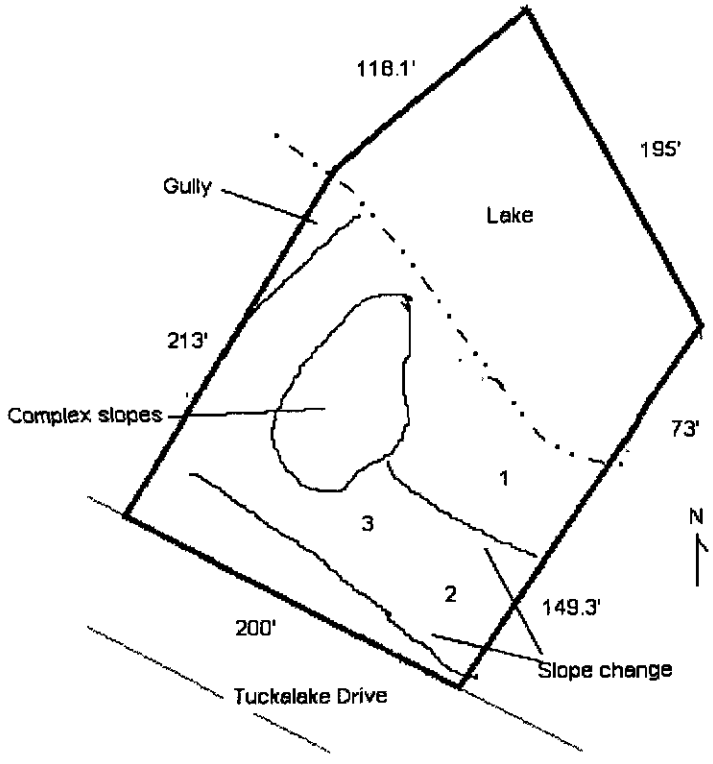
COMMENTS:

Does not appear that 100% repair is required

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



#589

GWS- COM. APP 07/05

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

SEPTIC FEE: $400.00
DATE: 3/27/06
CRT [CC# 13619 V.W.

FILE # 04158

WELL FEE: _____
DATE: _____
CRT [ ]

SEPTIC / TYPE APPLICATION: ☐ NONE ☑ NEW SYSTEM ☐ ALTERATION ☐ REPAIR ☐ MODIFY PLOT PLAN

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

JOB LOCATION INFORMATION

PROJECT TRACKING #:
TAX/PARCEL #: 01123122
STREET ADDRESS: ~~12530~~ MAYES RD
CITY: HUNTERSVILLE
STATE: NC **ZIP:** 28078
LOT #:
TOWNSHIP:

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

BUILDING INFORMATION: School - 120 students as per Jeff Ross 3-29-06
DESCRIBE TYPE OF BUSINESS:

☑ COMMERCIAL ☐ INDUSTRIAL
SQUARE FOOTAGE OF FACILITY: 10,800
NUMBER OF EMPLOYEES PER SHIFT: 10
NUMBER OF SHIFTS: 1
TYPE OF WASTEWATER:

☑ SEWAGE ☐ INDUSTRIAL PROCESS WASTEWATER
HOW WILL WATER BE USED IN THE FACILITY?:

☑ TOILETS/URINALS ☑ HANDSINKS ☐ SHOWERS
☐ FLOOR DRAINS ☐ OTHER

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: RAYNE PROPERTIES
ADDRESS: 12530 MAYES RD
CITY: HUNTERSVILLE ~~CORNELIUS~~
STATE: NC ZIP: 28078
HOME PHONE: WORK PHONE:
MOBILE PHONE: FAX :

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: JEFF ROSS
ADDRESS: 19604 META RD
CITY: CORNELIUS ~~DAV~~
STATE: NC ZIP: 28031-7546
HOME PHONE: - WORK PHONE: 704-892-8355
MOBILE PHONE: 704-661-5080 FAX :

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 enter onto the property for the purpose of processing this request.

3/15/06
Owner's/Agent's Signature Date

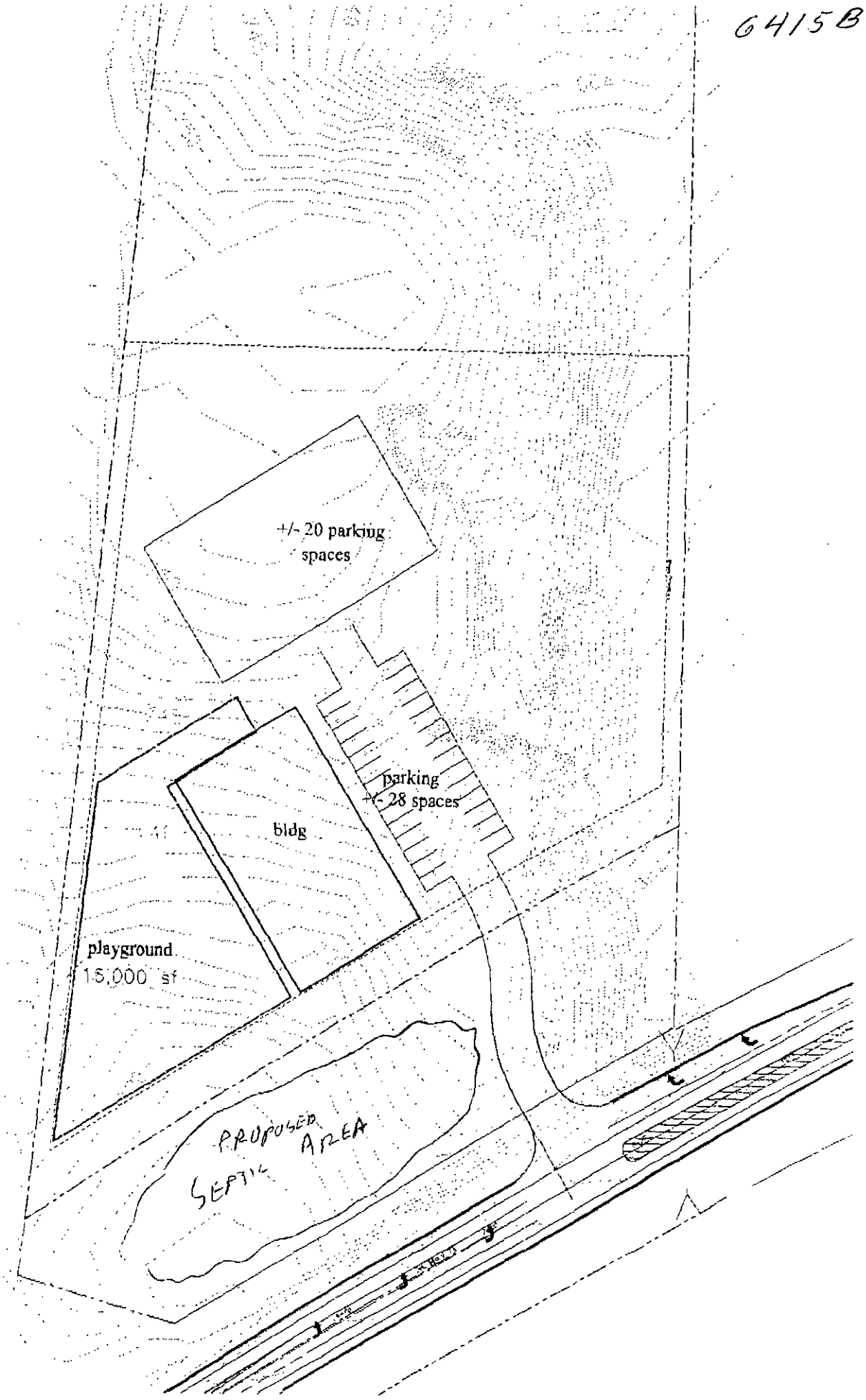
NORTH CAROLINA DEPARTMENT OF
ENVIRONMENT & NATURAL RESOURCES DIVISION
OF ENVIRONMENTAL HEALTH ON-SITE
WASTEWATER SECTION

*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.

Owner's/Agent's Signature Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST., SUITE 211
CHARLOTTE, NC 28202
704-336-5103 / FAX:704-336-6894

6415B


+/- 20 parking spaces
parking +/- 28 spaces
bldg
playground 15,000 sf
PROPOSED SEPTIC AREA

SOUTHSIDE CONSTRUCTORS, INC.

1401 E Catawba Street
Belmont, NC 28012
Ph : 704-825-8881

Letter of Transmittal

To: Mecklenburg County Health Depa

Transmittal #: 1
Date: 3/23/2006
Job: S-06-197 Nobel Pre-School

Subject: Nobel Permitting

WE ARE SENDING YOU ☑ Attached ☐ Under separate cover via None the following items:

☐ Shop drawings ☐ Prints ☐ Plans ☐ Samples
☐ Copy of letter ☐ Change order ☐ Specifications ☐ Other

Document Type	Copies	Date	No.	Description
Other	1	3/15/06		Septic Permit Application
Other	1	3/24/06	C-4	Erosion Control Plan
Other	1	3/15/06	13619	Application Fee Check

THESE ARE TRANSMITTED as checked below:

☑ For approval ☐ Approved as submitted ☐ Resubmit ___ copies for approval
☐ For your use ☐ Approved as noted ☐ Submit ___ copies for distribution
☐ As requested ☐ Returned for corrections ☐ Return ___ corrected prints
☐ For review and comment ☐ Other
☐ FOR BIDS DUE ☐ PRINTS RETURNED AFTER LOAN TO US

Remarks: Please find enclosed, one (1) copy of the above referenced information for the Nobel Pre-School project we are sending for your review and approval. Please call if questions.
Thank you.

Copy To: Darryl Kellough (Southside Constructors, Inc.), Stacey Carpenter (Southside Constructors, Inc.)

From: Stacey Carpenter (Southside Constructors, Inc.) **Signature:** S. Carpenter

If enclosures are not as noted, kindly notify us at once.

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	03/27/06	**Amount:**	400.00
Receipt #:	42829	**Tendered:**	0.00
Check / Auth #:	CHECK 1361	**Returned:**	0.00
Received By:	WALKEVA		

Account Information

Account #: 200000
Contractor: SOUTHSIDE CONSTRUCTORS, INC.
Attn:
Address: PO BOX 1006
Address:
City/State/Zip: BELMONT, NC 28012

Item	Description	Permit#	Quantity	Unit Price	Total Price
0735	Improv Permit Appl-Comm 12530 MAYES ROAD		1	400.00	400.00

Outstanding Balances

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