

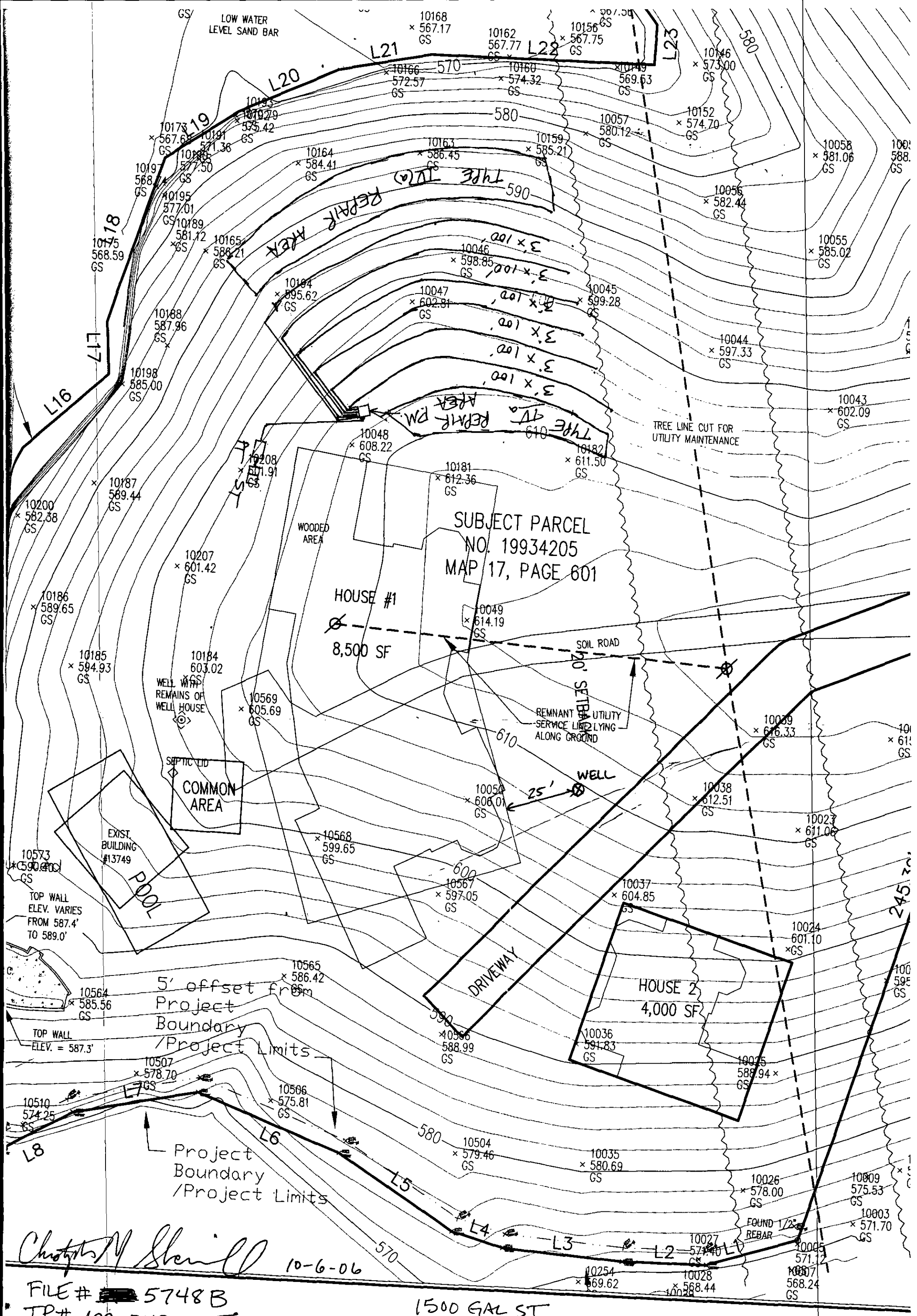
13749 PETWORTH CT

19934205

1/9/2008

duponbj

Groundwater and Wastewater Services File Imaging Project
May 2007
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Christopher M Shenll 10-6-06

FILE # [redacted]5748B
TP# 199-342-05
7BR - 840 GPD
LTAR - 0.35 GPD/FT²
TYPE IIIb PUMP, 25% REDUCTION

1500 GAL ST
1500 GAL PT
PRESSURE MANIFOLD
LP PPBPS 50% REDUCTION REPAIR

(Signature) (Date)

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30001446** GWS File #: **5748B** Tax Parcel #: **199-342-05**

- This IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be **NO** grading, filling, or disturbance of the soil in the area of the septic tank system or repair area.
- CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a Building Permit. The Construction Authorization is **NOT** transferable. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.
- Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

I. This Improvement Permit Shall: Expire in Five (5) Years **Expiration Date (If Applicable):** 10/5/2011

Type of Installation: Residential - New System Lot Number: 0

Structure Type: HOUSE Size (ft^2): 8500 # Bedrooms: 7 # Occupants: 3

Building Foundation: Basement With Plumbing Water Supply: Private Well

II. Initial System Type: Pump to Innovative or Experimental **System Classification:** IIIa

Initial System Specifications:

Design Flow (gpd): 840 LTAR (gpd/ft^2): 0.35 Septic Tank Size (gal): 1500 Pump Tank Size (gal): 1500

Trench Width (ft): 3 Trench Spacing (ft): 9 Absorption Area (ft^2): 1800 Total Trench Length (ft): 600

Maximum Trench Depth (in): 30 Depth of Media (in): 12 Distribution Device: Pressure Manifold

III. Repair System Type: PPBPS (pressurized) **System Classification:** IVa

Repair System Specifications:

Design Flow (gpd): 840 LTAR (gpd/ft^2): 0.35 Septic Tank Size (gal): 1500 Pump Tank Size (gal): 1500

Trench Width (ft): 3 Trench Spacing (ft): 9 Absorption Area (ft^2): 1200 Total Trench Length (ft): 400

Maximum Trench Depth (in): 30 Depth of Media (in): 24 Distribution Device: Manifold (LPP Distri

IV. Permit Conditions/Comments:

(Please See the Following Page for Permit Conditions.)

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment, and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until an INSTALLATION APPROVAL is granted by the Department.
- The septic system installer shall be a registered septic contractor with Mecklenburg County Health Department.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

DENR Authorized Agent: Chris Sherrill Owner/Legal Agent: _____
Print Name

Signature: _____ Signature: _____

Date Issued: 10/5/2006

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30001446** GWS File #: **5748B**

IV. Permit Conditions/Comments:

- Owner agreement forms for site reclassification shall be on file prior to issuance of Construction Authorization.
- This type of repair system requires the installation of a pump tank and all associated components. This type of system will require routine inspections by our office. The system owner is responsible for all fees associated with these inspections.
- This type of repair system requires the property owner to obtain a contract with a Certified Operator to perform routine inspections and maintenance on the system.
- All components of the septic system must be installed in accordance with the required setbacks listed on the corresponding plot plan.

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until an INSTALLATION APPROVAL is granted by the Department.
- The septic system installer shall be a registered septic contractor with Mecklenburg County Health Department.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

DENR Authorized Agent: Chris Sherrill

Signature: Christa M Sherrill

Date Issued: 10/5/2006

Owner/Legal Agent: _____
Print Name

Signature: _____

#1446 MAIN HOUSE

GWS – RES. APP 07/05

SEPTIC FEE: 200.00 chk 2058
DATE: 8/10/06
CRT [ ] GC

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

WELL FEE: _____
DATE: _____
CRT [ ]

FILE # 5748B

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

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

JOB LOCATION INFORMATION:

TAX/PARCEL #: 19934205 PO
STREET ADDRESS: 13749 PETWORTH COURT
CITY: CHARLOTTE
STATE: NC ZIP: 28278
SUBDIVISION OR MOBILE HOME PARK NAME: N/A
LOT #:
TOWNSHIP:

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

BUILDING INFORMATION:

TYPE OF BUILDING:

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

HEATED SQUARE FOOTAGE: ~~4,000~~ 8500
NUMBER OF BEDROOMS: ~~4~~ 7
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: 4 NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: 6
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 '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: LEXI LAYNE, LLC
ADDRESS: 108 MAIN STREET
CITY: PINEVILLE
STATE: NC ZIP: 28134
HOME PHONE: N/A WORK PHONE: (704) 644-5672
MOBILE PHONE: N/A FAX: (704) 889-2345

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME:
ADDRESS:
CITY:
STATE: ZIP:
HOME PHONE: WORK PHONE:
MOBILE PHONE: FAX:

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? MAY 9, 1977 03952-428 L44 SEC41 M17-601
WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY? SEPTEMBER 2006

*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.

8-10-06

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

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

Sheet: 1 of 2
Property ID: 199-342-05
Lot #:
File #: 5748B
AppID:
Code: 2

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Lexi Layne, LLC
Applicant:
Address: 108 Main St., Pineville, N. C. 28134
Date Evaluated: 9/12/06
Proposed Facility: Residence
Design Flow (.1949): 960gpd
Property Size: 4.64a
Location of Site: 13749 Petworth Court
Property Recorded:
Water Supply: [ ] Public [x] Individual [x] 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	b PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS, 15	0-7	GR/SL	FR/SEXP/NS/NP	>40" TO SOIL WETNESS	40	N/A	NONE	PS, IV
		7-23	SBK/C	FI/SEXP/S/P					.35GPD/FT^2
		23-40	SBK/SCL	FR/SEXP/SS/SP					
2	LS, 20	0-5	GR/L	FR/SEXP/NS/NP	>48" TO SOIL WETNESS	48+	"	"	"
		5-21	SBK/C	FI/SEXP/S/P					
		21-48	SBK/CL	FR/SEXP/SS/SP					
3	LS, 15	0-3	GR/SCL	"	"	"	"	"	"
		3-21	SBK/C	FI/SEXP/S/P					
		21-48	SBK/CL	FR/SEXP/SS/SP					
4	LS, 10	0-3	GR/SCL	"	>26" TO SOIL WETNESS	26	"	"	"
		3-26	SBK/C	FI/SEXP/S/P					
5	LS, 15	0-8	GR/SL	FR/SEXP/NS/NP	>23" TO SOIL WETNESS	23	"	"	"
		8-23	SBK/C	FI/SEXP/S/P					
6	LS, 20	0-12	GR/SL	FR/SEXP/NS/NP	>26" TO SOIL WETNESS	26	"	"	"
		12-26	SBK/C	FI/SEXP/S/P					

Description	Initial System	Repair System
Available Space (.1945)	US	US
System Type(s)		
Site LTAR	.35GPD/FT^2	.35GPD/FT^2

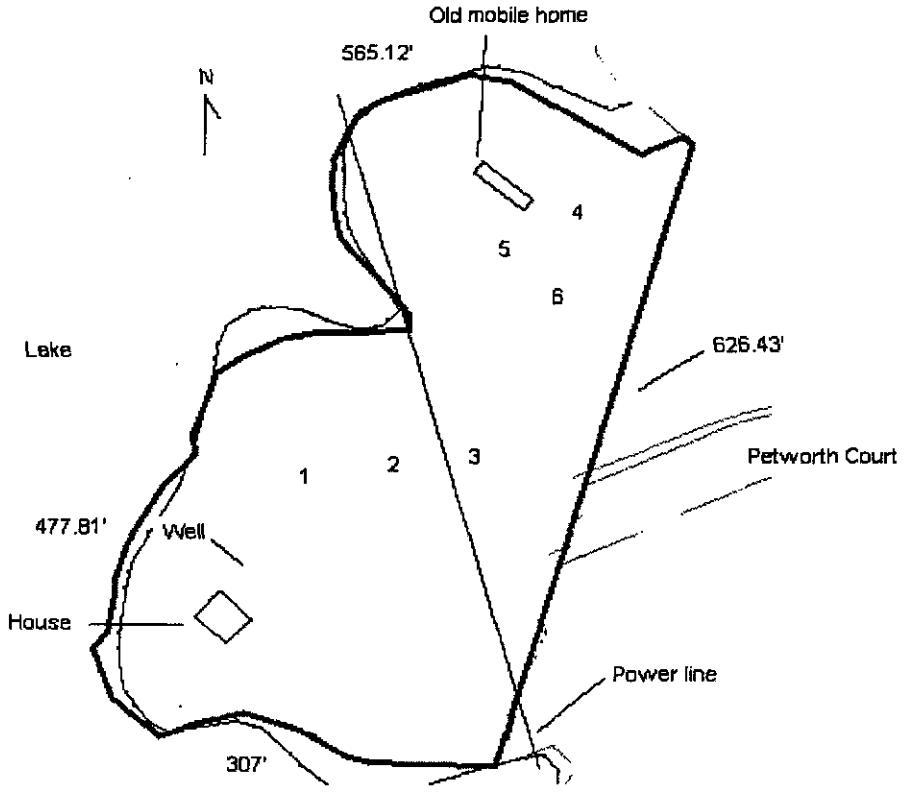
Other Factors (.1946):
Site Classification (.1948): UNSUITABLE
Evaluated By: W. R. Marlin, LSS, 9/13/2006, W. R. Marlin
Others Present:

COMMENTS:
100% repair 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



Schneider

The Schneider Corporation

2151 Hawkins Street, Suite 201 Charlotte, NC 28203-4905 Phone: 704.333.8360 Fax: 704.333.8362

TRANSMITTAL

TO:	Bill ~~Mullen~~ Marlow	DATE:	August 10, 2006
	Mecklenburg County	JOB #:	6142.001
	Groundwater and	PROJECT:	13749 Petworth Ct.
	Wastewater Services	RE:	Site Improvement Permit
			On-Site Waster/Well
	700 N. Tryon Street, Suite 211	FAX #:	(704) 831-2499
	Charlotte, North Carolina 28202	NUMBER OF PAGES:	n/a
	(704) 336-5103	TELEPHONE #:	704 333-8360
FROM:	Michael W. Nicosia MWN		
FAX:	704 333-8362		
DIRECT DIAL:	x6614		

WE ARE SENDING YOU:

☒ Attached Via: ☐ Mail ☐ Fed Ex ☐ UPS ☒ Courier ☐ Pick Up ☐ Other ☐ Fax

# Copies	Date	Description
1	8/10/06	Permit Application for Residential Site Improvement Permit for On-Site Wastewater System & New Well Installation - HOUSE #1
1	8/10/06	Permit Application for Residential Site Improvement Permit for On-Site Wastewater System & New Well Installation - HOUSE #2
1	8/10/06	Permit Application for Residential Site Improvement Permit for On-Site Wastewater System & New Well Installation - HOUSE #3

THE ABOVE ARE TRANSMITTED as checked below:

☐ For approval ☐ As requested ☐ FOR BIDS DUE

☒ For your use ☐ For review and comment ☐ Other

REMARKS:

Bill,

If you have any questions or concerns please call.

COPY TO:
John Blackketter
Jim Jervis
Griffin Gideon
File

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

c:\documents and settings\mwn\my documents\work folders\petworth\transmittal.doc

Wm. F. Papke III
1921 Tonawanda Creek Rd. Amherst, NY 14228
Phone 716-691-8555 Fax 716-691-6767

William R. Marlin
Mecklenburg County Health Dept.
700 North Tryon St.
Suite 211
Charlotte, N.C. 28202

Dear Mr. Marlin,

Per our conversation I am mailing you a check, along with my application. I will be in Charlotte on November 1, and can be reached on my cell phone # 716-998-8555.

Bill Papke

CONDITIONS OF IMPROVEMENT PERMIT / CONSTRUCTION AUTHORIZATON

Permit Number: **5748B** Tax Number: **199-34-205**

- The IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be **NO** grading, filling, or disturbance of the soil in the area of the septic tank system or repair area.
- CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a *Building Permit. The Construction* Authorization is **NOT** transferable. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.
- Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

Basement: ☒ Yes ☐ No ☐ *Partial Basement*

Primary Wastewater System

Type: ☐ I ☐ II ☒ III ☐ IV ☐ V

NEW APPLICANT W/ NEW SITE PLAN. PERMIT VOIDED IF NEW IP CAN BE ISSUED. FCT 10-4-04

essure Pipe ☐ Innovative or Experimental:
Diameter Pipe

0.3 Long-term acceptance rate (GPD/ft^2)	ea (ft^2)	9 Trench spacing (min. on centers) (ft)
Serviced by private well: ☒ Yes ☐ No	gth (ft)	24 Maximum trench depth (in) (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions.)
3 Bedrooms in residence		

Any surface water present: **Yes** nimum separation distance (ft): **50**

Additional conditions: **Pressure Manif**
Repair 25% reduction.

Repair Area System

VOID

Type: ☐ I ☐ II ☒ III ☐ IV ☐ V ☐ VI ☐ Conventional ☐ Prefabricated, permeable block panel system ☐ Shallow Placed Conventional ☐ Low Pressure Pipe ☐ Large Diameter Pipe ☐ Fill ☐ Other ☒ *Innovative or Experimental:*

900 Absorption Area (ft^2) 300 Total trench length (ft)	12 Depth of stone (in)	9 Trench spacing (min. on centers) (ft)	24 Maximum trench depth (in)

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. The approval is granted in accordance with the provisions of Laws and Rules For Sewage Treatment, and Disposal Systems 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 Improvement permit is transferable.

12/20/04

DENR Authorized Agent Date

Owner/Agent Signature Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 N. TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE: (704) 336-5103
FAX: (704) 336-6894

NC DENR
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

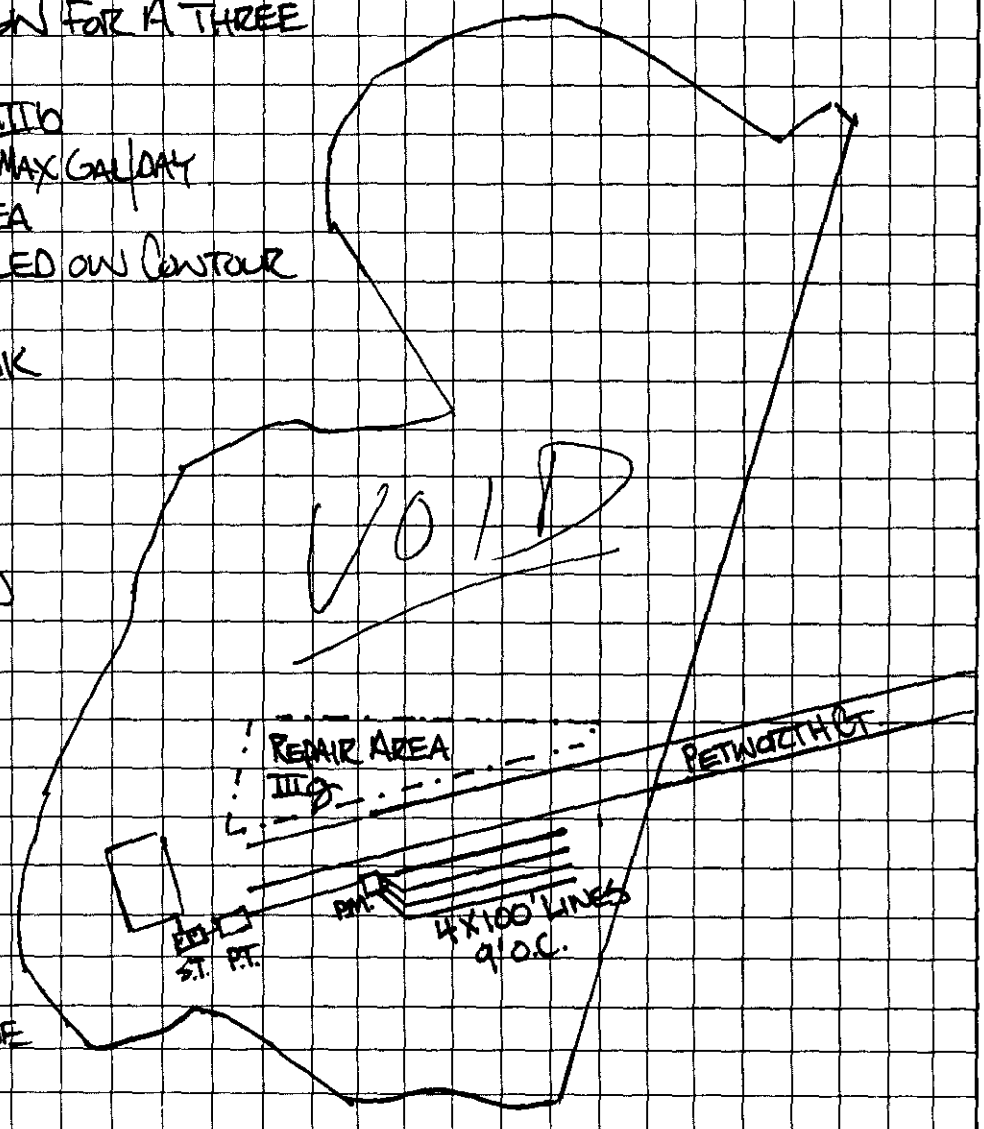
FILE: 5748B

TC: 199-34-205

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.

- SEPTIC SYSTEM DESIGN FOR A THREE BEDROOM HOUSE.
- PRIMARY SYSTEM TYPE IIIb
- LTAR = 0.3 GPD/FT², 360 MAX GAL/DAY
- 1200 FT² ABSORPTION AREA
- 4 LINES @ 100', INSTALLED ON CONTOUR PLACE ON 9' CTRS.
- 1500 GAL SEPTIC TANK
- 1000 GAL PUMP TANK
- PRESSURE MANIFOLD

- REPAIR AREA, TYPE IIIb 25% REDUCTION



SETBACKS:

750' FROM LAKE
75' FROM HOUSE
710' FROM PROPERTY LINE
750' FROM WELL

OWNER/AGENT SIGNATURE

DATE

APPROVAL DATE 12/20/04

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

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

Sheet: 1 of 3
Property ID: 199-342-05
Lot #:
File #: 5748B
Code: 1

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Terry James
Applicant: W. F. Papke, III
Address: 14131 Pine Harbor Road, Charlotte, N. C. 28278
Date Evaluated: 11/1/2004
Proposed Facility: Residence
Design Flow (.1949): 360gpd
Property Size: .5a. Inv.
Location of Site: 13749 Petworth Court
Property Recorded:
Water Supply: [ ] Public [x] Individual [x] 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	SOIL MORPHOLOGY .1941 .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, 12	0-6	GR/SCL	FR/SEXP/SS/SP	>49" TO SOIL WETNESS	49+	N/A	NONE	PS, IV
		6-42	SBK/C	FI/SEXP/S/P					.3GPD/FT^2
		42-49	SBK/CL	FR/SEXP/SS/SP					
2	"	0-3	GR/SCL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48+	"	"	"
		3-25	SBK/C	FI/SEXP/S/P					
		25-48	SBK/SCL	FR/SEXP/SS/SP					
3	"	0-4	GR/SL	FR/SEXP/NS/NP	>48" TO SOIL WETNESS	48+	"	"	"
		4-23	SBK/C	FI/SEXP/S/P					
		23-48	SBK/SCL	FR/SEXP/SS/SP					
4	LS, 15	0-4	GR/SCL	"	>33" TO SOIL WETNESS	27	"	"	US, IV
		4-27	SBK/C	FI/SEXP/S/P					.15GPD/FT^2 LPP
		27-33	GR/SL	VFR/SEXP/NS/NP					
5	LS, 10	0-4	GR/SCL	FR/SEXP/SS/SP	>49" TO SOIL WETNESS	49+	"	"	PS, IV
		4-30	SBK/C	FI/SEXP/S/P					.3GPD/FT^2
		30-49	SBK/SCL	FR/SEXP/SS/SP					
6	LS, 12	0-9	GRSCL	"	>48" TO SOIL WETNESS	48+	"	"	PS, IV
		4-19	SBK/C	FI/SEXP/S/P					.35GPD/FT^2
		19-49	SBK/SCL	FR/SEXP/SS/SP					

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

Other Factors (.1946):
Site Classification (.1948): PROVISIONALLY SUITABLE
Evaluated By: W. R. Marlin, LSS, 11/1/2004, W. R. Marlin
Others Present: W. F. Papke, III

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

Sheet: 2 of 3
File #: 5748B

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
CONTINUED

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941		OTHER PROFILE FACTORS				Profile Class & LTAR
			.1941 Structure/ Texture	.1941 Consistence Mineralogy	.1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	
7	LS, 12	0-3	GR/SL	VFR/SEXP/NS/NP	>48" TO SOIL WETNESS	48+	N/A	NONE	PS, IV
		3-31	SBK/C	FI/SEXP/S/P					.3GPD/FT^2
		31-48	SBK/SCL	FR/SEXP/SS/SP					

COMMENTS:
100% repair not required

Landscape Position	Group	Texture	.1955 LTAR
R-Ridge	I	S-Sand	1.2 - 0.8
SS-Shoulder Slope		LS-Loamy Sand	
LS-Linear Slope			
FS-Food Slope	II	SL-Sandy Loam	0.8 - 0.6
NS-Nose Slope		L-Loam	
HS-Head Slope			
CC-Concave Slope	III	SI-Silt	0.6 - 0.3
CV-Convex Slope		SICL-Silty Clay Loam	
T-Terrace		CL-Clay Loam	
FP-Flood Plain		SCL-Sandy Clay Loam	
	IV	SC-Sandy Clay	0.4 - 0.1
		SIC-Silty Clay	
		C-Clay	

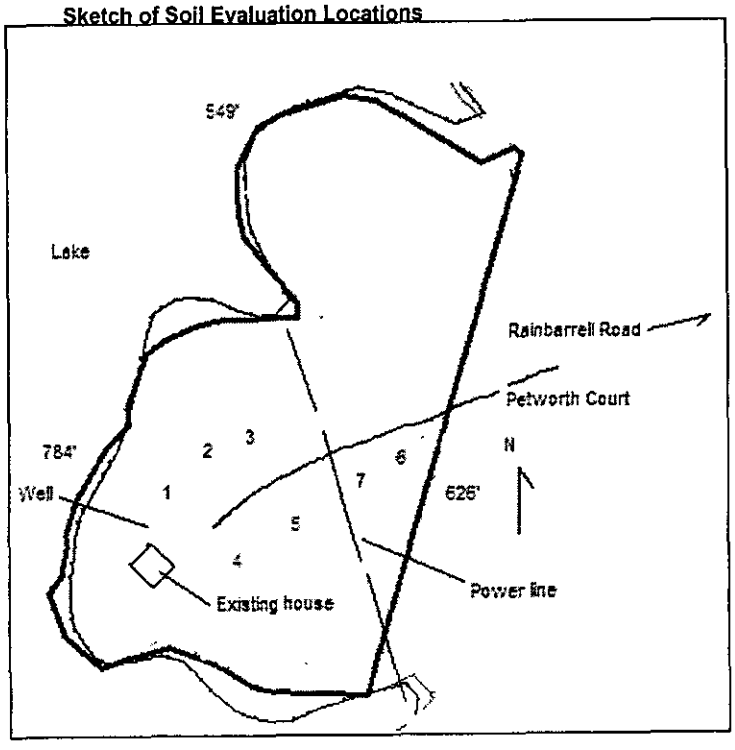
Structure
SG-Single Grain
M-Massive
CR-Crumb
GR-Granular
SBK-Subangular Blocky
ABK-Angular Blocky
PL-Platy
PR-Prismatic

Consistence
Moist
VFR-Very Friable
FR-Friable
FI-Firm
VFI-Very Firm
EFI-Extremely Firm

Consistence
Wet
NS-Non-Sticky
SS-Slightly Sticky
S-Sticky
VS-Very Sticky
NP-Non-Plastic
SP-Slightly Plastic
P-Plastic
VP-Very Plastic

Mineralogy
SEXP-Slightly Expansive
EXP-Expansive

Sketch of Soil Evaluation Locations



FEE: 40.-
DATE: 10/22/04
RECEIPT #: 1

APPLICATION FOR IMPROVEMENT PERMIT
FOR RESIDENTIAL SITE
INDIVIDUAL WATER AND WASTEWATER
SYSTEMS PROGRAM

PERMIT #:

TYPE APPLICATION: NEW SYSTEM EXPANSION/ALTERATION OF EXISTING SYSTEM REPAIR OF EXISTING SYSTEM

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

FILE #: 5-04-15

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 19934205

STREET ADDRESS: 3719 Pat Wolth CT

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

TOWNSHIP (CHECK ONE):

- [X] 0 MECKLENBURG
- [ ] 1 CHARLOTTE
- [ ] 2 DAVIDSON
- [ ] 3 CORNELIUS
- [ ] 4 PINEVILLE
- [ ] 5 MATTHEWS
- [ ] 6 HUNTERSVILLE
- [ ] 7 MINT HILL

CLOSING DATE: Nov 1/04

TYPE OF BUILDING (CHECK ONE):

- [ ] SINGLE MOBILE HOME(S)
- [ ] DOUBLE WIDE (D)
- [X] HOUSE (H)
- [ ] MODULAR HOME (M)
- [ ] MULTIPLE FAMILY (U)
- [ ] OTHER (O)

HEATED SQUARE FOOTAGE: 2000

NUMBER OF BEDROOMS: 2 NUMBER OF OCCUPANTS: 2

FOUNDATION FOR RESIDENCE:

- [ ] WITHOUT BASEMENT ON SLAB
- [ ] CRAWL SPACE
- [X] WITH BASEMENT /PLUMBING
- [ ] WITH BASEMENT /NO PLUMBING

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: [ ] YES [X] NO TYPE:

WATER SUPPLY (CHECK ONE):

- [ ] COMMUNITY (C)
- [ ] SHARED WELL (S)
- [ ] MUNICIPAL (M)
- [ ] OTHER 'SPRINGS' (O)
- [X] PRIVATE WELL (P)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES	[ ] YES [ ] NO	WELL, SPRINGS OR WATERLINES	[ ] YES [ ] NO
EXISTING WASTEWATER SYSTEMS	[ ] YES [ ] NO	DESIGNATED WETLANDS	[ ] YES [ ] NO
EASEMENTS OR RIGHT-OF-WAYS	[ ] YES [ ] NO		

PROPERTY OWNER:

NAME: (LAST) James (FIRST) Terry (MI)

ADDRESS: 14131 Pine Harbor Rd.

CITY: Charlotte STATE: NC ZIP: 28278

DAYTIME PHONE: (704) 588 - 0418

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) -

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 1977

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

SIGNED: DATE: 10/22/04

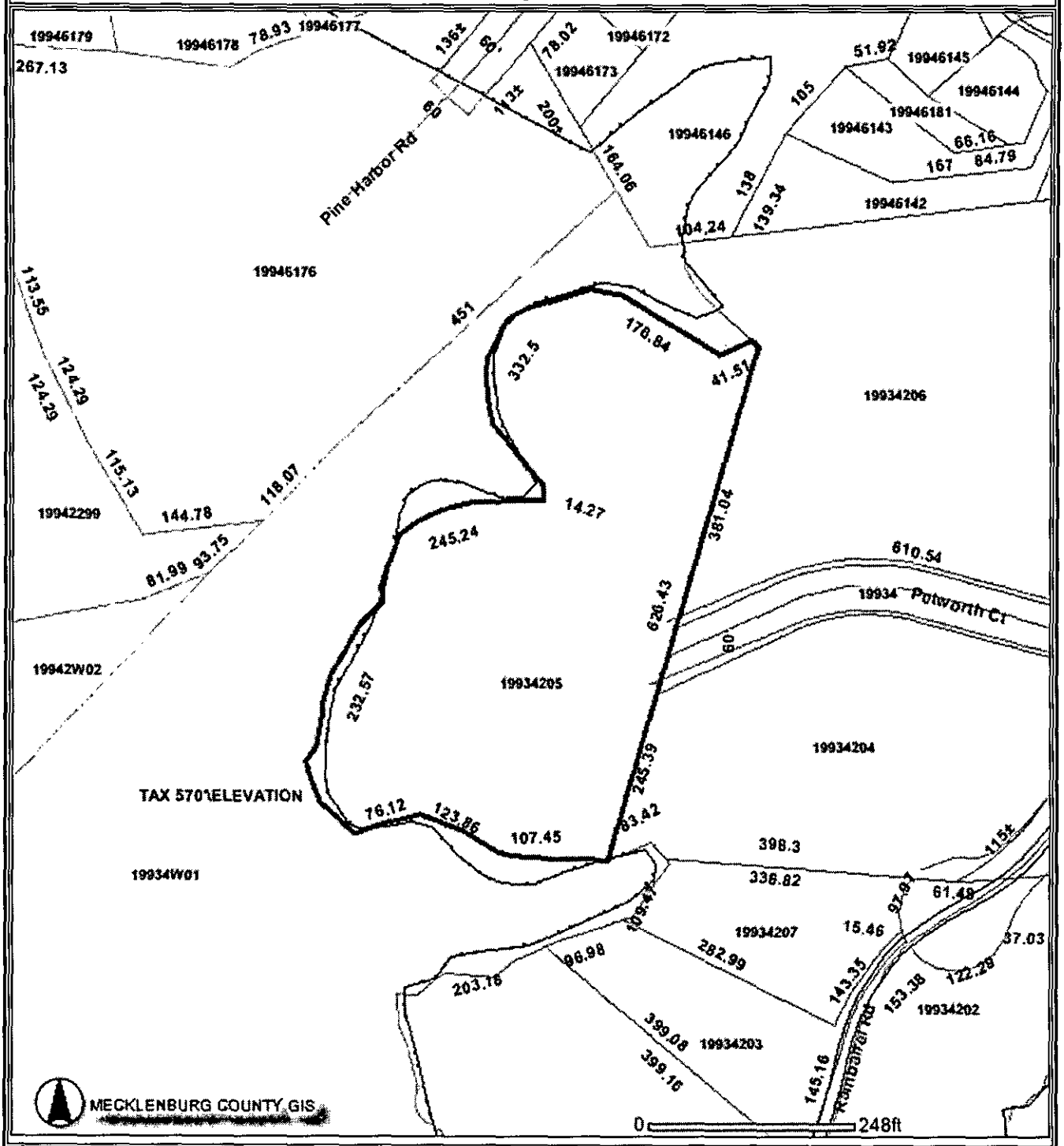
MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102

Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Mon Aug 14 08:02:21 EDT 2006



This map is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, planimetric maps, and other public records and data. Users of this map are hereby notified that the aforementioned public primary information sources should be consulted for verification. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.