SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

☐ NEW SEPTIC ☐ REPAIR ☑ USE EXISTING (well only) ☐ MODIFIED PLOT PLAN ☐ ALTERATION

File Number: 19423 / 14842

Assigned Inspector: Heather

☐ IP $250.00: _____ Initial/Date

☐ IP Commercial $450.00: _____ Initial/Date

☐ CA & OP $400.00: _____ Initial/Date

☐ Alteration Fees $300: _____ Initial/Date

☐ Modified Plot Plan Fees $100.00: _____ Initial/Date

☒ Use Existing Fees $100.00: MD 8/6/24 Initial/Date

☒ Use Existing Approved ☐ Use Existing Denied

☐ Send IP permit for signature: _____ ☐ Signature received: _____

☐ Floor plans reviewed

☐ Generate CA ☐ Approve as Noted in Winchester

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

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

☐ Certified operator contract is on file: _____

☐ Septic file complete: _____

☐ Release final hold in Winchester: _____

Comments:

19623 / 14842

MECKLENBURG COUNTY
HEALTH DEPARTMENT

6 AUG '24 PM 12:50

APPLICATION FOR APPROVAL TO USE AN EXISTING 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: Seth Wofford
ADDRESS: 301 N. Hwy 16 Bus. #46
CITY: Denver
STATE: NC ZIP: 28037
PHONE: (704) 661-5324
ALTERNATE PHONE:
E-MAIL: SWresidentialdesign@gmail.com

PROPERTY OWNER: ☐ SAME AS PERSON FILING APPLICATION
NAME: Kristen Hampton and Terra Cass
ADDRESS: 6118 Jim Kidd Road
CITY: Huntersville
STATE: NC ZIP: 28078
PHONE:
ALTERNATE PHONE:
E-MAIL:

JOB LOCATION INFORMATION
TAX PARCEL #: 01306215
STREET ADDRESS: 6118 Jim Kidd Road
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: 2
NUMBER OF OCCUPANTS: 2

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.

Seth Wofford
Owner's/Agent's Signature

Digitally signed by Seth Wofford
DN: cn=Seth Wofford, o=SW Residential Design, ou, email=swresidentialdesign@gmail.com, c=US
Date: 2024.08.06 09:15:49 -04'00'
Date

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

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

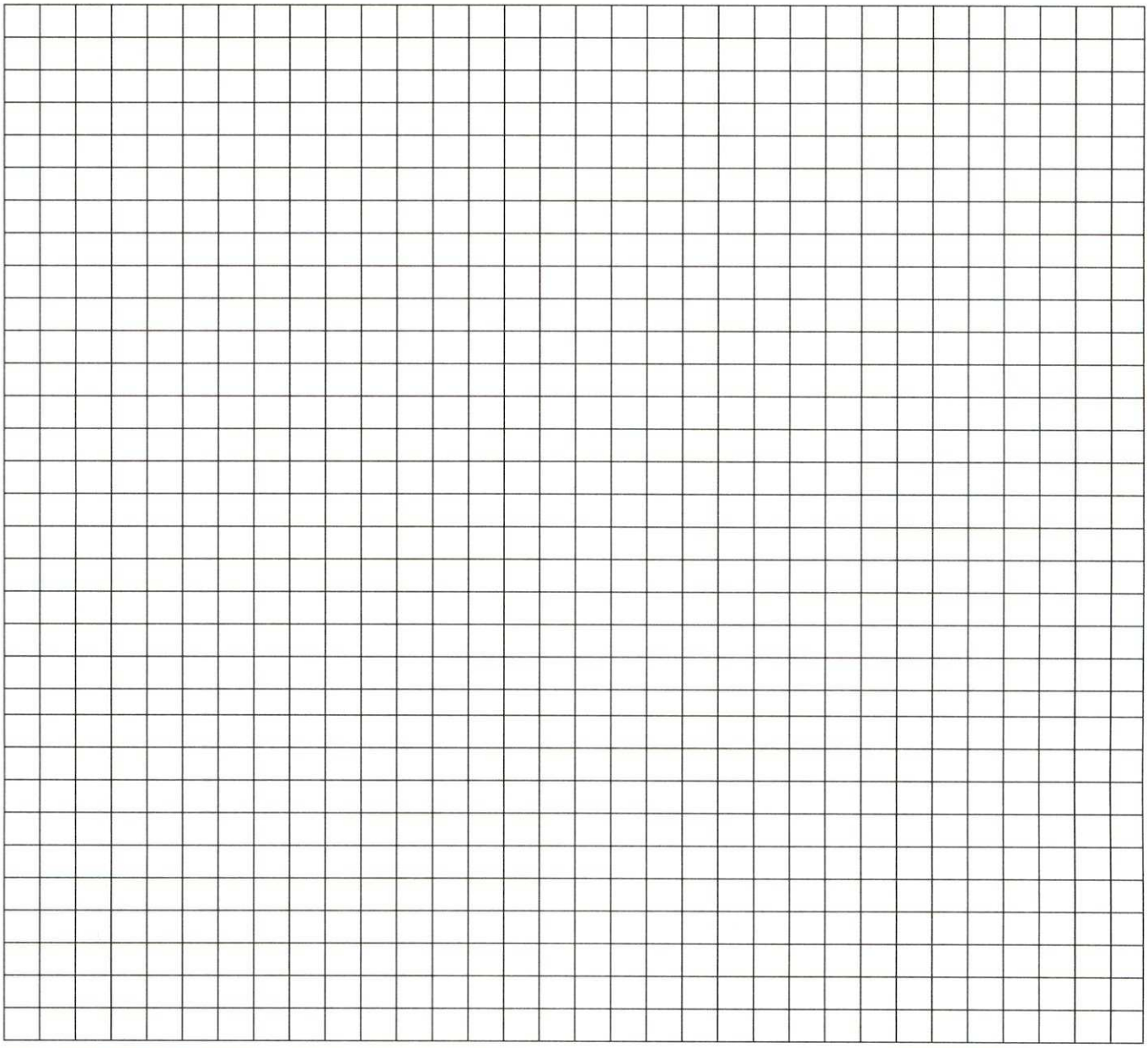
Revised on: 01/03/11

File #: 19423

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: _____ Tax Parcel #: _____



*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.
- This permit is not transferable.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

Pole barn approved

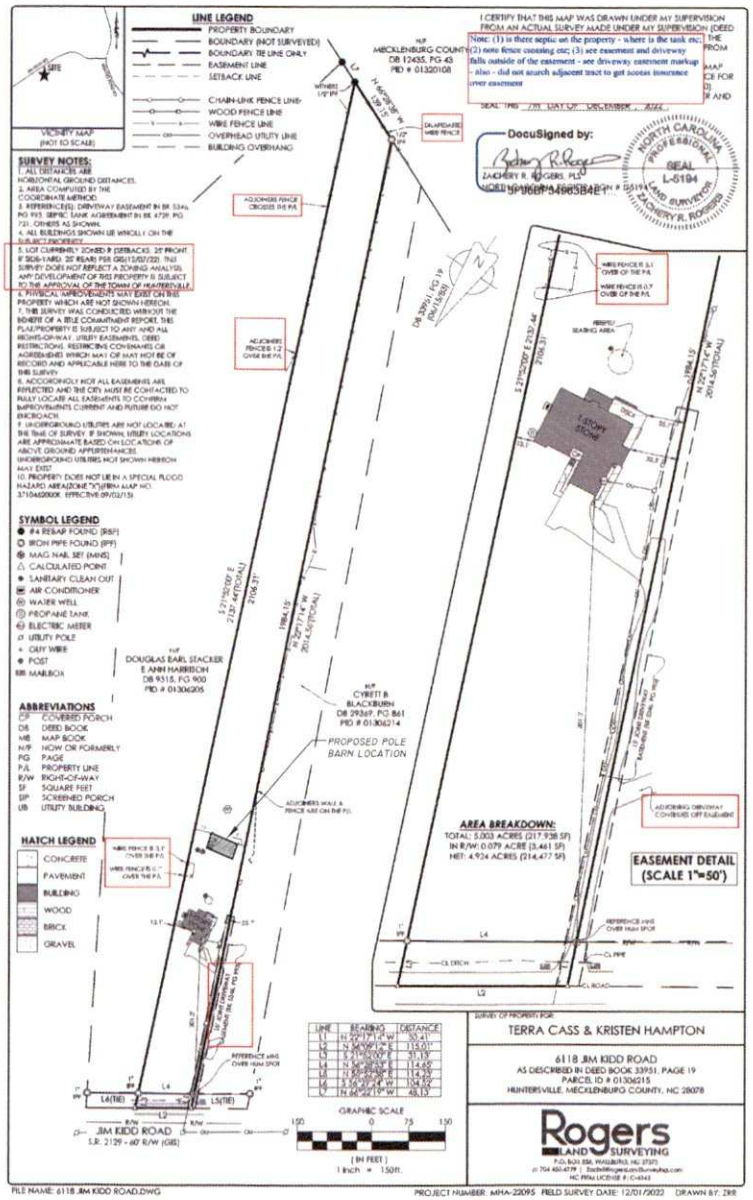
Heather Ray — REHS Signature

8-12-24 — Date

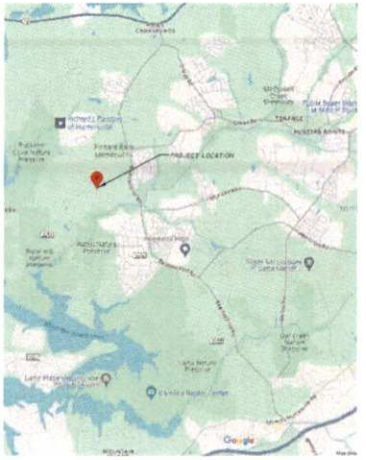
MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Drive, Suite 8000, Charlotte, NC 28208
OFFICE: 980-314-1680, FAX: 704-336-6894

Revised on: 01/03/11

DocuSign Envelope ID: C7AB9E43-EE34-4837-AAAB-CB4342EF8D09



FILE NAME: 6118 JIM KIDD ROAD.DWG PROJECT NUMBER: MHA-22095 FIELD SURVEY DATE: 12/01/2022 DRAWN BY: ZRR



2 / A-1 VICINITY MAP
SCALE NTS

TABLE OF CONTENTS:

- A-1 = SITE PLAN, VICINITY MAP
- A-2 = PROPOSED FLOOR PLAN AND WALL SECTION
- A-3 = PROPOSED ELEVATIONS

SW DESIGN & CONSTRUCTION

TERRA CASS AND KRISTEN HAMPTON
RESIDENCE POLE BARN
6118 JIM KIDD ROAD
HUNTERSVILLE, NC 28078

DESIGNER:
SETH WOFFORD
301 N. HWY 16 #46
DENVER, NC 28037
704-661-5324

FOR CONSTRUCTION

SITE PLAN
VICINTY MAP
TABLE OF CONTENTS

A-1

MECKLENBURG COUNTY
North Carolina
Public Health

Mecklenburg County Public Health

Raynard Washington, PhD, MPH
Health Director

Addendum to Application for
New Well or Septic System Installation
Abandonment or Repair of Existing Well or Septic System

Your signature below confirms the following:

1. The information on the application is true, complete and accurate.

2. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliances with applicable laws and rules.

3. I acknowledge that Seth Wofford is acting as my legal representative(agent) in the submittal of the application for a water supply well or septic permit located at

6118	Jim Kidd Road	Huntersville
Number	Street (Or Parcel Number)	Town

TERRA CASS
Property Owner (Print Name)

Property Owner (Signature)

8.6.2024
Date

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 08/06/24
Receipt #: 150271
Check / Auth #: VISA 09176G
Received By: ORTIZMP

Amount: 100.00
Tendered: 100.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: SETH WOFFORD
Attn: KRISTEN HAMPTON
Address: TERRA CASS
Address: 301 N HY 16 BUS. #46
City/State/Zip: DENVER, NC 28037

Item	Description	Quantity	Unit Price	Total Price
0705	Use Existing System 6118 JIM KIDD RD	1	100.00	100.00

Permit#

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
		2,737.50			