

8516 OTHELLO PL

10907436

1/10/2008

duponbj

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

Groundwater & Wastewater Services
Well Project File & Data Review Worksheet

GWS File #: 65243 WASPS App #: 1894

Primary ES assigned to project: Debra Howell

Secondary ES assigned to project: _____

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: 0

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: 0

Comments:

Application received date: 05-25-06 ES assigned date: unk. Permit issued date: 05-31-06

Well approval date: 02-12-07 Number of days to complete project: 257

Review performed by: Joshua R. Sellers R.S. Date performed: 02-14-07

1200

File # 65248

RESIDENTIAL WELL CONSTRUCTION RECORD

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

WELL CONTRACTOR CERTIFICATION # 3239

1. WELL CONTRACTOR:

Charles Moses
Well Contractor (Individual) Name

Advanced Well Drilling
Well Contractor Company Name

STREET ADDRESS 2221 Pump Rd

Catawba NC 28609
City or Town State Zip Code

828-241-4300
Area code- Phone number

2. WELL INFORMATION:

SITE WELL ID #(if applicable)

STATE WELL PERMIT#(if applicable)

DWQ or OTHER PERMIT #(if applicable) 1000870

WELL USE (Check Applicable Box): Residential Water Supply ☑

DATE DRILLED 7-7-06

TIME COMPLETED 2:30 AM ☐ PM ☑

3. WELL LOCATION:

CITY: Charlotte COUNTY Mecklenburg

8516 Othello Pl Charlotte 28227
(Street Name, Numbers, Community, Subdivision, Lot No., Parcel, Zip Code)

TOPOGRAPHIC / LAND SETTING:

☐ Slope ☐ Valley ☑ Flat ☐ Ridge ☐ Other
(check appropriate box)

LATITUDE 35° 24.586

LONGITUDE 80° 80.628

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)

4. WELL OWNER

OWNER'S NAME Brenda Jimenez

STREET ADDRESS 8516 Othello Pl

Charlotte NC 28227
City or Town State Zip Code

704-875-2209
Area code - Phone number

5. WELL DETAILS:

a. TOTAL DEPTH: 125

b. DOES WELL REPLACE EXISTING WELL? YES ☐ NO ☑

c. WATER LEVEL Below Top of Casing: 40 FT.
(Use "+" if Above Top of Casing)

d. TOP OF CASING IS 12 FT. Above Land Surface*
*Top of casing terminated at/or below land surface may require a variance in accordance with 15A NCAC 2C .0118.

e. YIELD (gpm): 15 METHOD OF TEST Air

f. DISINFECTION: Type HTH Amount 1 Lb

g. WATER ZONES (depth):

From 100 To 125 From ____ To ____

From ____ To ____ From ____ To ____

From ____ To ____ From ____ To ____

6. CASING:

	Depth		Diameter	Thickness/ Weight	Material
From 0	To 46	Ft.	6	SCH 40	PVC
From ____	To ____	Ft.			
From ____	To ____	Ft.			

7. GROUT:

	Depth		Material	Method
From 0	To 20	Ft.	Concrete	Poured
From ____	To ____	Ft.		
From ____	To ____	Ft.		

8. SCREEN:

	Depth		Diameter	Slot Size	Material
From ____	To ____	Ft.	____ in.	____ in.	
From ____	To ____	Ft.	____ in.	____ in.	
From ____	To ____	Ft.	____ in.	____ in.	

9. SAND/GRAVEL PACK:

Depth			Size	Material
From ____	To ____	Ft.		
From ____	To ____	Ft.		
From ____	To ____	Ft.		

10. DRILLING LOG

From	To	Formation Description
0	10	red dirt
10	80	soft granite
80	46	hard granite
46	125	Granite

11. REMARKS:

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

Charles Moses — 7-10-06
SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE

Charles Moses
PRINTED NAME OF PERSON CONSTRUCTING THE WELL

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

Form GW-1a
Rev. 7/05

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

125 deep
He Afcasion
15 gpm
40 vatal

PERMIT TO CONSTRUCT A WATER SUPPLY WELL

Permit #: 10000870 **File #:** 6524B **Tax Parcel #:** 109-074-36
Property Owner: BRENDA JIMENEZ
Job Location Address: 8516 OTHELLO PL
City/ETJ: CHARLOTTE **State:** NC **Zip Code:** 28227
Permit Issuance Date: 5/31/2006
Use of Well: Irrigation
Type of Facility Served by Well: House
Sewage System Type: None

Area of Regulated Groundwater Usage Restrictions Apply: YES
Replacement for Existing Well: If Yes, see requirements in Other Conditions of This Permit.

General Conditions of This Permit:

- Water Supply Well construction 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.
- The permitted Water Supply Well shall be located in accordance with the attached SITE PLAN.
- Any alteration of the site (including location of structures and appurtenances) or modification in use of the well, may subject this Permit to revocation.
- The Department will collect an initial sample of water from the Water Supply Well and analyze the sample for total coliform bacteria, nitrate, and nitrite. A review of the analysis by the Department must find the sample to meet the groundwater quality standards specified in Chapter 5 of the Mecklenburg County Groundwater Well Regulations before the Water Supply Well can be placed in service.
- 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. ☐ Casing to bedrock

☐ Initial water sample to be 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)

The analysis must be submitted to the Department for review and approval prior to the Water Supply well being placed in service.

Other Conditions of This Permit:

DAVID CORNELIUS, RS
Authorized Agent: Print Name
Signature: David Cornelius, RS

Brenda Jimenez
Owner/Legal Agent: Print Name
Signature: Brenda Jimenez

CHARLOTTE.
CHARLOTTE-MECKLENBURG UTILITIES

Laboratory Analysis Report
Report Date: 2/9/2007 05:05 PM

LABORATORY SERVICES DIVISION

LOCATION: GWO-71773
LOC ID: G-NEW
SAMPLE DATE-TIME: 2/7/2007 14:50 CHAIN OF CUSTODY #: 070207163116
SAMPLE DESCRIPTION: Grab

	Parameter	Result	Units	RL	Method	Start Date/	Time	Analyst
AC04411	E. COLI-PA	Absent	P/A		SM 9223B	2/8/2007	10:00	KEK
AC04411	Total Coliform- P/A	Absent	P/A		SM 9223B	2/8/2007	10:00	KEK

Comment:

Laboratory Supervisor: Rhonda Ashton

Laboratory Certifications: McAlpine N.C. DENR No.148; Brookshire NC DENR No.162; Hal Marshall N.C. DENR No. 192, N.C. DHHS Laboratory No. 37527

CHARLOTTE-MECKLENBURG UTILITIES - LABORATORY SERVICES DIVISION

Hal Marshall Laboratory, 700 North Tryon St., Charlotte, NC 28202, 704/336-5460

CHAIN OF CUSTODY RECORD

PAGE 1 OF 1

CLIENT:	**Mecklenburg County, LUESA - Groundwater & Wastewater Services**
FACILITY:	Groundwater **(Potable Water)**
ADDRESS:	8516 Othello Place, Charlotte, NC 28227
LAB CODE:	REAL (PRIV) (NEW) TNC MPL PME AMB LM OTHER

Send Report To:
Debra Howell
700 N. Tryon St., Suite 211
Charlotte, NC 28202

COC#: 07020716311-6
Sampled By (Print Name)
Debra Howell

SAMPLE ID	Sample Collector's Initials	Sample Collection: Begin Date and Time	Sample Collection: End Date and Time	Chlorinated System: Y or N	Sample Temperature: Collection Temp °C	Sample Temperature: Receipt Temp °C	Sample Type: Depth Composite	Sample Type: Auto Composite	Sample Type: Hand Comp	Sample Type: Grab	Sample Containers: Plastic	Sample Containers: Glass	Sample Containers: # Containers	Chemical Preservative: None	HNO3	H2SO4	NaOH	HCl	Na2S2O3	pH Correct	Analyses Requested: Total Coliform
GWO-71773 AC04411	DH	2-7-07 3:50pm	N/A N/A	N	NA	5.2				X	100 ml		2						X		X

Instructions:

Complete all yellow shaded sections

For each parameter requested circle the X to verify your request.

Nutrients include: Ammonia, TKN, Total Phosphorus, Nitrate/Nitrite

Metals: Itemize the individual metals requested here -

For Composite samples record the autosampler Begin date/time and End date/time, for Grab samples record the collect time as the Begin date/time only.

Blue is for lab use only

Comments: **3-DAY TAT REQUESTED**

Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Debra Howell	Tommie Mullen	2/7/07	16:30
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time

Form Revision 07; effective 02/16/2006

Lab Codes: REAL=Real Estate, PRIV=Private Well, NEW=New Permitted Well, TNC=Transient Non-Community, AMB=Ambient, LM=Landfill

CHARLOTTE.
CHARLOTTE-MECKLENBURG UTILITIES

Laboratory Analysis Report
Report Date: 1/9/2007 04:51 PM

LABORATORY SERVICES DIVISION

LOCATION: G-870
LOC ID: G-NEW
SAMPLE DATE-TIME: 12/18/2006 12:15 CHAIN OF CUSTODY #: 061218161509
SAMPLE DESCRIPTION: Grab

	Parameter	Result	Units	RL	Method	Start Date/	Time	Analyst
AB98001	**E. COLI-PA**	**Absent**	**P/A**		SM 9223B	12/18/2006	16:40	MKV
AB98001	**Total Coliform- P/A**	**Present**	**P/A**		SM 9223B	12/18/2006	16:40	MKV

Comment:

Laboratory Supervisor: Rhonda Robertson

Laboratory Certifications: McAlpine NC DENR No.148; Brookshire NC DENR No.162; Hal Marshall N.C. DENR No. 192, N.C. DHHS Laboratory No. 37527

CHARLOTTE-MECKLENBURG UTILITIES - LABORATORY SERVICES DIVISION

Hal Marshall Laboratory, 700 North Tryon St., Charlotte, NC 28202, 704/336-5460

CHAIN OF CUSTODY RECORD

CLIENT:	**Mecklenburg County, LUESA - Groundwater & Wastewater Services**
FACILITY:	Groundwater **(Potable Water)**
ADDRESS:	8516 Othello Place, Charlotte, NC 28227
LAB CODE:	REAL PRIV (NEW) TNC MPL PME AMB LM OTHER

Send Report To:
Debra Howell
700 N. Tryon St., Suite 211
Charlotte, NC 28202

COC#: 0612181616 1509
Sampled By (Print Name)
Debra Howell

SAMPLE ID	Sample Collector's Initials	Sample Collection: Begin Date and Time	Sample Collection: End Date and Time	Chlorinated System: Y or N	Sample Temperature: Collection Temp °C	Sample Temperature: Receipt Temp °C	Sample Type: Depth Composite	Sample Type: Auto Composite	Sample Type: Hand Comp	Sample Type: Grab	Sample Containers: Plastic	Sample Containers: Glass	Sample Containers: # Containers	Chemical Preservative: None	HNO3	H2SO4	NaOH	HCl	Na2S2O3	pH Correct	Analyses Requested: Total Coliform
G-870 AB98001	DH	12-18 0616	N/A	N	NA	3.2				X	100 ml		1						X		X
		1215pm	N/A																		

Instructions:

Complete all yellow shaded sections

For each parameter requested circle the X to verify your request.

Nutrients include: Ammonia, TKN, Total Phosphorus, Nitrate/Nitrite

Metals: Itemize the individual metals requested here -

For Composite samples record the autosampler Begin date/time and End date/time, for Grab samples record the collect time as the Begin date/time only.

Blue is for lab use only

Comments: **3-DAY TAT REQUESTED**

Relinquished By (Signature)	Received By (Signature)	Date	Time
[signature]	[signature]	12/18/06	16:10
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By (Signature)	Received By (Signature)	Date	Time
Relinquished By: (Signature)	Received By (Signature)	Date	Time
Relinquished By: (Signature)	Received By (Signature)	Date	Time

Form Revision 07; effective 02/16/2006

Lab Codes: REAL=Real Estate, PRIV=Private Well, NEW=New Permitted Well, TNC=Transient Non-Community, AMB=Ambient, LM=Landfill

CHARLOTTE.
CHARLOTTE-MECKLENBURG UTILITIES

Laboratory Analysis Report
Report Date: 1/9/2007 04:52 PM

LABORATORY SERVICES DIVISION

LOCATION: G-870
LOC ID: G-NEW
SAMPLE DATE-TIME: 12/18/2006 12:15 CHAIN OF CUSTODY #: 061218161655
SAMPLE DESCRIPTION: Grab

	Parameter	Result	Units	RL	Method	Start Date/	Time	Analyst
AB98002	**NITRATE**	**1.9**	**mg/L**	0.05	EPA 353.2	12/19/2006	15:49	EWN
AB98002	**NITRITE**	**<0.05**	**mg/L**	0.05	EPA 353.2	12/19/2006	14:52	EWN

Comment:

Laboratory Supervisor: Rhonda L Stinson

Laboratory Certifications: McAlpine NC DENR No.148; Brookshire NC DENR No.162; Hal Marshall N.C. DENR No. 192, N.C. DHHS Laboratory No. 37527

CHARLOTTE-MECKLENBURG UTILITIES - LABORATORY SERVICES DIVISION

CHAIN OF CUSTODY RECORD

Hal Marshall Laboratory, 700 North Tryon St., Charlotte, NC 28202, 704/336-5460

PAGE 1 OF 1

CLIENT:	**Mecklenburg County, LUESA - Groundwater & Wastewater Services**
FACILITY:	Groundwater **(Potable Water)**
ADDRESS:	8516 Othello Place, Charlotte, NC 28227
LAB CODE:	REAL PRIV (NEW) TNC MPL PME AMB LM OTHER

Send Report To:
Debra Howell
700 N. Tryon St., Suite 211
Charlotte, NC 28202

COC#: 061218161655
Sampled By (Print Name)
Debra Howell

SAMPLE ID	Sample Collector's Initials	Sample Collection: Begin Date and Time	Sample Collection: End Date and Time	Chlorinated System: Y or N	Sample Temperature: Collection Temp °C	Sample Temperature: Receipt Temp °C	Sample Type: Depth Composite	Sample Type: Auto Composite	Sample Type: Hand Comp	Sample Type: Grab	Sample Containers: Plastic	Sample Containers: Glass	Sample Containers: # Containers	Chemical Preservative: None	Chemical Preservative: HNO3	Chemical Preservative: H2SO4	Chemical Preservative: NaOH	Chemical Preservative: HCl	Chemical Preservative: Na2S2O3	Chemical Preservative: pH Correct	Analyses Requested: Nitrate	Analyses Requested: Nitrite
G-870 AB98002	DH	12-18-06 12:15pm	N/A N/A	N	12.1°C	3.2				X	500 ml		1			X				X	X	
G-870 98002	DH	12:18:06 12:15pm	N/A N/A	N	12.1°C	3.2				X	125 ml		1	X							X	X

Instructions:
Complete all yellow shaded sections
For each parameter requested circle the X to verify your request.
Nutrients include:
Metals: Itemize the individual metals requested here -
For Composite samples record the autosampler Begin date/time and End date/time, for Grab samples record the collect time as the Begin date/time only.
Blue is for lab use only
Comments: **Nitrate and Nitrate Analysis Requested**

Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Debra Howell	Tammie Mullen	12/18/06	16:10
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time

Form Revision 07; effective 02/16/2006

Lab Codes: REAL=Real Estate, PRIV=Private Well, NEW=New Permitted Well, TNC=Transient Non-Community, AMB=Ambient, LM=Landfill

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 CONSTRUCT A WATER SUPPLY WELL

Permit #: 10000870 **File #:** 6524B **Tax Parcel #:** 109-074-36
Property Owner: BRENDA JIMENEZ
Job Location Address: 8515 OTHELLO PL
City/ETJ: CHARLOTTE **State:** NC **Zip Code:** 28227
Permit Issuance Date: 5/31/2006
Use of Well: Irrigation
Type of Facility Served by Well: House
Sewage System Type: None

Area of Regulated Groundwater Usage Restrictions Apply: YES

Replacement for Existing Well: If Yes, see requirements in Other Conditions of This Permit.

General Conditions of This Permit:

- Water Supply Well construction 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.
- The permitted Water Supply Well shall be located in accordance with the attached SITE PLAN.
- Any alteration of the site (including location of structures and appurtenances) or modification in use of the well, may subject this Permit to revocation.
- The Department will collect an initial sample of water from the Water Supply Well and analyze the sample for total coliform bacteria, nitrate, and nitrite. A review of the analysis by the Department must find the sample to meet the groundwater quality standards specified in Chapter 5 of the Mecklenburg County Groundwater Well Regulations before the Water Supply Well can be placed in service.
- 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. ☐ Casing to bedrock

☐ Initial water sample to be 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)

The analysis must be submitted to the Department for review and approval prior to the Water Supply well being placed in service.

Other Conditions of This Permit:

DAVID CORNELIUS, RS
Authorized Agent: Print Name

Signature:

Brenda Jimenez
Owner/Legal Agent: Print Name

Signature: Brenda Jimenez

TOTAL P.02

870

GWS – RES. APP 07/05

SEPTIC FEE: _____
DATE: _____
CRT [ ]

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: 400.00
DATE: 5/25/06
CRT [ ] Check #: 1885

FILE # 65248

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 #: 109-074-36
STREET ADDRESS: 8516 Othello Pl
CITY: Charlotte
STATE: NC ZIP: 28227
SUBDIVISION OR MOBILE HOME PARK NAME:
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:
NUMBER OF BEDROOMS: 7
NUMBER OF OCCUPANTS: 6

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: Roofing

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: Jimenez, Brenda
ADDRESS: 8516 Othello Pl
CITY: Charlotte
STATE: NC ZIP: 28227
HOME PHONE: 704-567-1099 WORK PHONE: 704 6224897
MOBILE PHONE: 704 622-4897 FAX: 704 567-4315

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? NOV 2001

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.

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.

Brenda J 5-25-06
Owner's/Agent's Signature Date

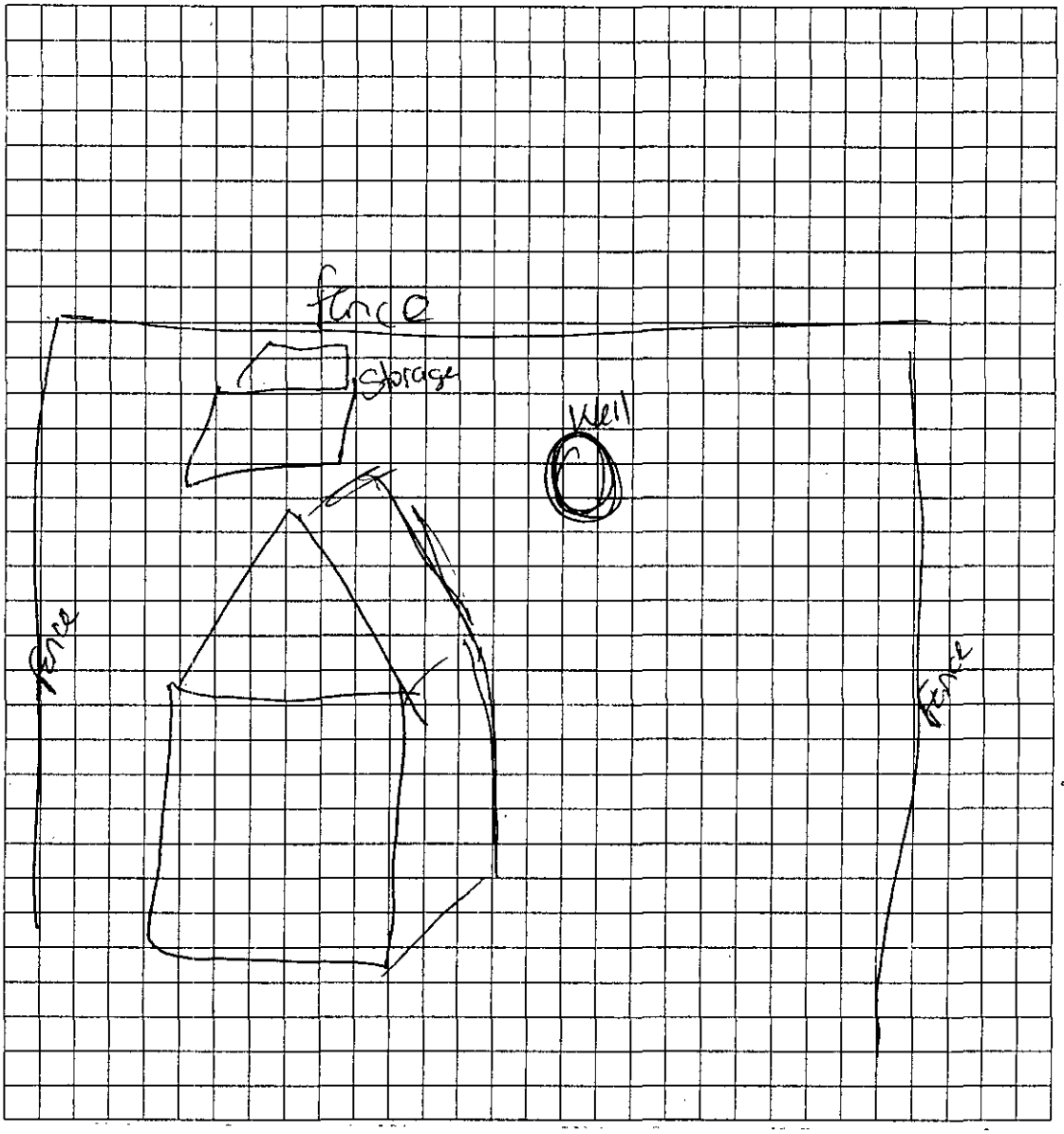
MECKLENBURG COUNTY HEALTH DEPARTMENT
GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST., SUITE 211
CHARLOTTE, NC 28202 704-336-5103 / FAX: 704-336-6894

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

File # 6524B
Date_____

PROPOSED PLOT PLAN

A map showing existing and proposed property lines and easements with dimensions, the location of the single family residence, non-single family residence, or other facility, and appurtenances, the site for the proposed well, and the location of existing or proposed sewer lines and/or sewage disposal systems, surface water bodies, aboveground or underground storage tanks. Name all roads adjoining the property. If this a repair indicate the type of repair.



Owner/Agent Signature	Brenda S
Date	5-26-06

LBC 12/15/04

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

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- The permitted Water Supply Well shall be located in accordance with the attached SITE PLAN.
- Any alteration of the site (including location of structures and appurtenances) or modification in use of the well, may subject this Permit to revocation.
- The Department will collect an initial sample of water from the Water Supply Well and analyze the sample for total coliform bacteria, nitrate, and nitrite. A review of the analysis by the Department must find the sample to meet the groundwater quality standards specified in Chapter 5 of the Mecklenburg County Groundwater Well Regulations before the Water Supply Well can be placed in service.
- 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. ☐ Casing to bedrock

☐ Initial water sample to be 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)

The analysis must be submitted to the Department for review and approval prior to the Water Supply well being placed in service.

Other Conditions of This Permit:

DAVID CORNELIUS, RS
Authorized Agent: Print Name

Signature:

Owner/Legal Agent: Print Name

Signature:

ACTIVITY REPORT

LOG NUMBER: 2006-00303
ACTIVITY DATE: 05/26/2006
TYPE OF ACTIVITY: Office Report
FILE DESCRIPTOR: GW-I-CI-

SITE INFO

SITE: DURABLE WOODS PRESERVERS, INC.
PARCEL ID: 10803130
ADDRESS: 7901 PENCE RD
CHARLOTTE NC 28215- -

CONTACT:
BUSINESS PHONE NO: ( ) -

ACTIVITY

EPIC Rept. for ARGU Review
8516 Othello Place, Charlotte, NC 28227
PID# 109-074-36
File # 6524B

Public water supplied by CMUD is currently available at this site.

5/26/06 (Fri.) - Received request for ARGU review for new WSW located at 8516 Othello Pl., Charlotte, PID#109-074-36. According to the WIS, there are no existing wells at this property.

5/26/06 (Fri.) - Conducted ARGU Review. Identified 2 MPL sites within 2,000' of the subject parcel:

MPL# 354 Durable Wood Preservers, Inc.
7901 Pence Rd., Charlotte, NC 28215
PID# 108-031-30
NCDENR APS Incident #85499/EPA Lead site
Former lagoon turned landfill

File Review of MPL# 354:

Site is a former lagoon turned landfill.

The subject site is more than 1500' frorn PID#109-074-36 proposed WSW location. Because the location of the source area or if the contaminant plume is defined is unknown, ARGU is a 1,500 buffer around the contamination site property boundary, so the well will be outside of 1,500' of the ARGU.

MPL# 94 Harrisburg Rd. LF/Charles T. Meyer Golf Course
7819 Harrisburg Rd., Charlotte, NC 28215
PID# 108-031-15
NCDENR APS Incident #87226 (diesel AST release)
Closed sanitary, ash monofill and construction and demolition LF

File Review of MPL# 94:

Site is a closed sanitary, ash monofill and construction and demolition LF.

The subject site is more than 1500' frorn PID#109-074-36 proposed WSW location. Because the location of the all source areas or if all contaminant plumes are defined is unknown, ARGU is a 1,500 buffer around the contamination site property boundary, so the well will be outside of 1,500' of the ARGU.

Based on review of MPL#354 and MPL#94, the permit for a new well installation at PID# 109-074-36, 8516 Othello Rd., Charlotte is approved. The well is outside of the 1,500' ARGU buffer, so it will require installation under the Mecklenburg Co. Groundwater Regulations dated Oct. 5, 2004 Chapter VII Section IV Requirements for New Water Supply Wells without any special construction conditions related to an Area of Regulated Groundwater Usage.

VIOLATIONS

VIOLATION COMMENTS:

VIOLATION # DESCRIPTION

SAMPLES

SUMMARY

STATUS: CLOSED
DATE CLOSED: 07/06/2006
MISC EXPENSES: 0.00

TIME ON SITE: :
TRAVEL TIME: :
ADMIN TIME: 1:30
MILEAGE:

STATE REPORT FORM:
SUMMARY:

SIGNATURES

ENVIRONMENTALIST: _____ **DATE** 05/26/2006
Shawna Caldwell

REVIEWED BY: _____ **DATE** 06/20/2006
Jack L. Stutts

Hydrogeologist Permit Application Review

Application #: 870

Permit File #: 6524B

Permit Type: New Well (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:

EHS Review | Update

The application has been forwarded to David Cornelius for review.

App. #: 870

Septic Fee: 0.00

Date: CRT[ ]

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

FILE # 6524B

Well Fee: 400.00

Date: 5/25/2006 CRT[ ]

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 #: 109-074-36 [ ] PO

STREET ADDRESS: 8516 OTHELLO PL

CITY: CHARLOTTE

STATE: NC ZIP: 28227

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT #: 0

TOWNSHIP: CHARLOTTE

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: 7

NUMBER OF OCCUPANTS: 6

FOUNDATION FOR RESIDENCE:

[x] CONCRETE SLAB [ ] BASEMENT WITH PLUMBING

[ ] 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) [ ] PUBLIC (C) [x] 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: BRENDA JIMENEZ

ADDRESS: 8516 OTHELLO PLACE

CITY: CHARLOTTE

STATE: NORTH CAROLINA ZIP: 28227

HOME PHONE: 704-567-1299 WORK: 704-622-4897

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME:

ADDRESS:

CITY:

STATE: ZIP:

HOME PHONE: WORK:

MOBILE:	704-622-4897	FAX:	704-567-4315	MOBILE:		FAX:	704-567-4315

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?

WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?

PRINT | Update | Go to Front Counter

EPIC Rept. for ARGU Review
8516 Othello Place, Charlotte, NC 28227
PID# 109-074-36
File # 6524B

Public water supplied by CMUD is currently available at this site.

5/26/06 (Fri.) - Received request for ARGU review for new WSW located at 8516 Othello Pl., Charlotte, PID#109-074-36. According to the WIS, there are no existing wells at this property.

5/26/06 (Fri.) - Conducted ARGU Review. Identified 2 MPL sites within 2,000' of the subject parcel:

MPL# 354 Durable Wood Preservers, Inc.
7901 Pence Rd., Charlotte, NC 28215
PID# 108-031-30
NCDENR APS Incident #85499/EPA Lead site
Former lagoon turned landfill

File Review of MPL# 354:

Site is a former lagoon turned landfill.

The subject site is more than 1500' from PID#109-074-36 proposed WSW location. Because the location of the source area or if the contaminant plume is defined is unknown, ARGU is a 1,500 buffer around the contamination site property boundary, so the well will be outside of 1,500' of the ARGU.

MPL# 94 Harrisburg Rd. LF/Charles T. Meyer Golf Course
7819 Harrisburg Rd., Charlotte, NC 28215
PID# 108-031-15
NCDENR APS Incident #87226 (diesel AST release)
Closed sanitary, ash monofill and construction and demolition LF

File Review of MPL# 94:

Site is a closed sanitary, ash monofill and construction and demolition LF.

The subject site is more than 1500' from PID#109-074-36 proposed WSW location. Because the location of the all source areas or if all contaminant plumes are defined is unknown, ARGU is a 1,500 buffer around the contamination site property boundary, so the well will be outside of 1,500' of the ARGU.

Based on review of MPL#354 and MPL#94, the permit for a new well installation at PID# 109-074-36, 8516 Othello Rd., Charlotte is approved. The well is outside of the 1,500' ARGU buffer, so it will require installation under the Mecklenburg Co. Groundwater Regulations dated Oct. 5, 2004 Chapter VII Section IV Requirements for New Water Supply Wells without any special construction conditions related to an Area of Regulated Groundwater Usage.

Date: 5/26/06
Reviewed By: SWC

MECKLENBURG COUNTY

Land Use & Environmental Services Agency
Groundwater & Wastewater Services

ARGU Review Worksheet

Job Location Information

Tax Parcel ID #: 109-074-36 File # 6524B

Street Address: 8516 Othello Pl., Charlotte, NC 28227

Contamination Site Information

(If more than one contamination site is within 2000 feet of the job location, fill out a separate review worksheet for each contamination site)

Tax Parcel ID #: 108-031-30 MPL # 354

Street Address: 7901 Pence Rd., Charlotte, NC 28215

DENR Incident #: 85499

Current Status: EPA Lead Site Why? Former lagoon turned landfill

Responsible Party:

Responsible Party Contact Info:

File Review

Attach the most recent extent of contamination map for each constituent above either 2L groundwater standard or Maximum Soil Contaminant Concentration (MSCC).

Attach copies of groundwater flow maps. (Watch of seasonal change)

Attach a copy of the most recent summary table for soil/groundwater laboratory analysis
Is the source area identified in either the report text or on a site map? Attach map or if text only, indicated the location on an extent of contamination map.
Based on this information, answer the following questions:

Has the extent of contamination been defined or partially defined for all constituents-of-concern? Unk

If Yes	ARGU is a 1500-foot buffer around the maximum extent of contamination

If No, is the source area defined? Unk

If Yes	ARGU is a 1500-foot buffer around the source area
If No	ARGU is a 1500-foot buffer around the contamination site property boundary.

Is a public water supply (other than transient or non-transient supply wells) available to the proposed job location? Yes

If No	Well allowed, but construction requirements apply. Sampling requirements may apply pending hydrogeologic review.
If Yes	Is the well within the first 1000 feet of the ARGU? No
If No	Well allowed, but construction requirements apply. Sampling requirements may apply pending hydrogeologic review.
If Yes	Permit denied.

Reviewer Comments: Because the proposed well location is outside of the most stringent ARGU buffer of 1500 feet from the property boundary for the Durable Wood Preservers, Inc. incident, the permit is approved with no special construction conditions.

Date: 5/26/06
Reviewed By: SWC

MECKLENBURG COUNTY

Land Use & Environmental Services Agency
Groundwater & Wastewater Services

ARGU Review Worksheet

Job Location Information

Tax Parcel ID #: 109-074-36 File # 6524B

Street Address: 8516 Othello Pl., Charlotte, NC 28227

Contamination Site Information

(If more than one contamination site is within 2000 feet of the job location, fill out a separate review worksheet for each contamination site)

Tax Parcel ID #: 108-031-15 MPL # 94

Street Address: 7818 Harrisburg Rd., Charlotte, NC 28215

DENR Incident #: 87226

Current Status: Closed LF Why? Closed sanitary, ash monofill and construction and demolition LF. NCDENR incident no. is for diesel AST release.

Responsible Party: Joe Hack

Responsible Party Contact Info: Meck. Co.-LUESA Solid Waste

File Review

Attach the most recent extent of contamination map for each constituent above either 2L groundwater standard or Maximum Soil Contaminant Concentration (MSCC).

Attach copies of groundwater flow maps. (Watch of seasonal change)

Attach a copy of the most recent summary table for soil/groundwater laboratory analysis
Is the source area identified in either the report text or on a site map? Attach map or if text only, indicated the location on an extent of contamination map.
Based on this information, answer the following questions:

Has the extent of contamination been defined or partially defined for all constituents-of-concern? Unk

If Yes	ARGU is a 1500-foot buffer around the maximum extent of contamination

If No, is the source area defined? Unk

If Yes	ARGU is a 1500-foot buffer around the source area
If No	ARGU is a 1500-foot buffer around the contamination site property boundary.

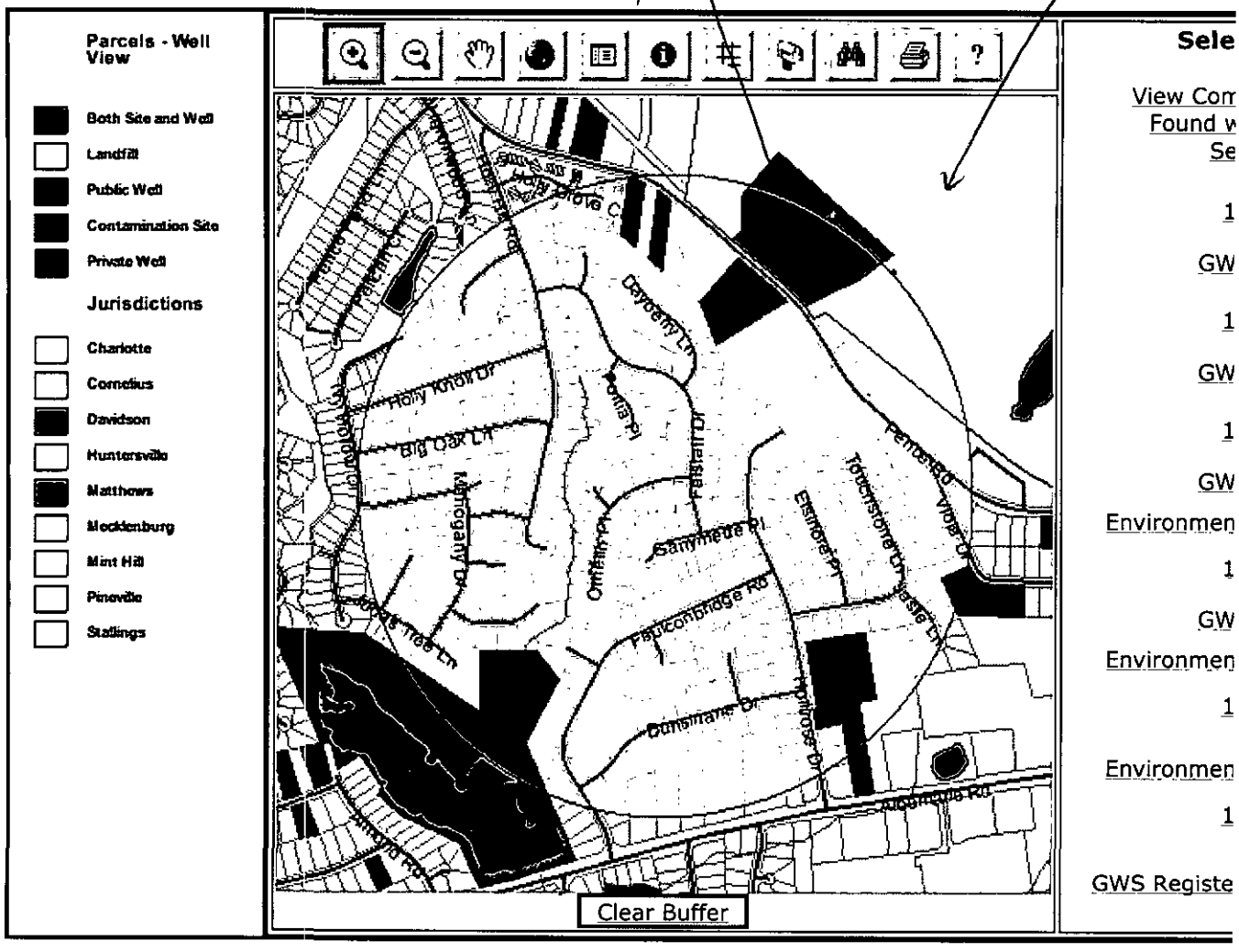
Is a public water supply (other than transient or non-transient supply wells) available to the proposed job location? Yes

If No	Well allowed, but construction requirements apply. Sampling requirements may apply pending hydrogeologic review.
If Yes	Is the well within the first 1000 feet of the ARGU? No
If No	Well allowed, but construction requirements apply. Sampling requirements may apply pending hydrogeologic review.
If Yes	Permit denied.

Reviewer Comments: Because the proposed well location is outside of the most stringent ARGU buffer of 1500 feet from the property boundary for the Harrisburg Rd. Landfill, the permit is approved with no special construction conditions.

Durable Wood Preserves
MPLt 354

Hamilton Landfill
MPLt 94



Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Fri May 26 07:22:10 EDT 2006

1,500' radius from PID#109-074-36 proposed WSW location



Total Measure Line Length: 7539.35 Feet **Total Measure Acreage:** 0.13 Acres

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.

GROUNDWATER CONTAMINATION QUERY RESULTS

Incident #	Incident Location/Name	Address	City/Town	County	Region	Source Desc	Type Desc	Submitted Date	Incident Phase
85499	DURABLE WOOD PRESERVERS	7901 PENCE ROAD	CHARLOTTE	MECKL	MOR	Landfill/Dump	Solid Waste Leachate	5/7/2001	NOD

Number of Records: 1

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:** 10803130
Name: DURABLE WOODS PRESERVERS, INC.
House No: 7901
Street Dir:
Street Name: PENCE
Street Type: RD
City: CHARLOTTE
State: NC
Zip: 28215
NC Incident Number: 85499 EXIT Well Information System →

* Link to GIS Real Estate System

Mecklenburg County, NC Groundwater & Wasterwater Services
Landfill Information

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

***Parcel ID:** 10803115
Name: HARRISBURG ROAD LANDFILL
Street No.: 7819
Street Direction:
Street Name: HARRISBURG
Street Type: RD
City: CHARLOTTE
Zip: 28215
Code: SANM
Status: Closed
Permit Number: 60-01
Date Issued:

* Link to GIS Real Estate System