FILE NUMBER: 7562B Revised On: August 31, 2007 APPLICATION NUMBER: 3125

SEPTIC FEE: 200
DATE: 12/28/07

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

WELL FEE: 400
DATE: 12/28/07

1. **SEPTIC / TYPE APPLICATION:** ☐ NONE ☑ NEW SYSTEM ☐ ALTERATION ☐ REPAIR ☐ MODIFIED PLOT PLAN

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

3. **JOB LOCATION INFORMATION:**
**TAX PARCEL NUMBER:** 01124109
**STREET ADDRESS:** 14101 Black Farms Rd.
**CITY:** Huntersville
**STATE:** NC **ZIP:** 28078
**SUBDIVISION NAME:**
**LOT #:** 1 **LOT SIZE (acres):** 0.92
***TOWNSHIP:***
☑ 0-MECKLENBURG ☐ 3-CORNELIUS ☐ 6-HUNTERSVILLE
☐ 1-CHARLOTTE ☐ 4-PINEVILLE ☐ 7-MINT HILL
☐ 2-DAVIDSON ☐ 5-MATTHEWS

4. **BUILDING INFORMATION:**
**BUILDING TYPE:**
☐ SINGLE MOBILE HOME ☐ MODULAR HOME
☐ DOUBLE WIDE ☐ MULTIPLE FAMILY
☑ HOUSE ☐ OTHER _____
**HEATED SQUARE FOOTAGE:** 3,000
**NUMBER OF BEDROOMS:** 4
***NUMBER OF OCCUPANTS:*** 4
**FOUNDATION TYPE:**
☐ CONCRETE SLAB ☑ BASEMENT WITH PLUMBING
☐ CRAWL SPACE ☐ BASMENT WITH NO PLUMBING

5. **IF PLANNING TO EXPAND OR ALTER THE EXISTING SYSTEM PLEASE COMPLETE THE FOLLOWING SECTION:** ☑ N/A
NUMBER OF BEDROOMS TO BE ADDED: _____ NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: _____

6. **WATER SUPPLY:** ☐ MUNICIPAL ☐ PUBLIC WELL ☑ PRIVATE WELL ☐ SHARED WELL ☐ SPRING

7. **PROPOSED USE OF WELL:** ☐ N/A ☐ IRRIGATION ☑ POTABLE ☐ GEOTHERMAL ☐ OTHER

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

| | ☐ ANY TYPE | ☑ CONVENTIONAL | ☐ ACCEPTED | ☐ INNOVATIVE | ☐ ALTERNATIVE | ☐ OTHER _____ |
|---|---|---|---|---|---|---|
| **8A. RANK:** | | 1 | 4 | 3 | 2 | 5 |

9. **DO ANY OF THE FOLLOWING APPLY TO THE PROPERTY IN QUESTION? IF "YES" PLEASE ATTACH SUPPORTING DOCUMENTATION.**

| | | | | | |
|---|---|---|---|---|---|
| BURIED CABLES, LANDFILLS, STUMPHOLES | ☐ YES | ☑ NO | GRADING/SOIL REMOVAL PERFORMED | ☐ YES | ☑ NO |
| EXISTING WASTEWATER (SEPTIC) SYSTEMS | ☐ YES | ☑ NO | JURISDICTIONAL WETLANDS | ☐ YES | ☑ NO |
| WELLS, SPRINGS, OR WATER LINES | ☐ YES | ☑ NO | APPROVAL REQUIRED BY ANY OTHER PUBLIC AGENCY | ☐ YES | ☑ NO |
| EASEMENTS OR RIGHT-OF-WAYS | ☐ YES | ☑ NO | WASTEWATER OTHER THAN DOMESTIC SEWAGE | ☐ YES | ☑ NO |

10. **PROPERTY OWNER:**
NAME: Robert L. Morgan Jr.
ADDRESS: 14101 Black Farms Rd.
CITY: Huntersville
STATE: NC ZIP: 28078
HOME PHONE: 704-992-1857 WORK PHONE:
MOBILE PHONE: 704-607-4438 FAX: 1-866-999-6921

11. **OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:**
NAME: Robert Mark Morgan
ADDRESS: 344 Midway Lake Rd.
CITY: Mooresville
STATE: NC ZIP: 28115
HOME PHONE: WORK PHONE:
MOBILE PHONE: 704-582-3818 FAX: 1-866-999-6921

12. **WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?** 12-01-06
13 **WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?** N/A

14. **SEPTIC SYSTEM PERMIT APPLICATION SIGNATURE SECTION:**
If the information in this application is falsified, changed, or the site is altered, then the Improvement Permit and Authorization to Construct shall become invalid. I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are *granted right of entry to conduct necessary inspections to determine* compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed. The permit is valid for either 60 months or is non-expiring depending upon the documentation submitted: complete site plan = 60 months, complete plat = non-expiring.

Robert J Morgan 12-28-07
Property Owner's or Owner's Legal Representative Signature Date

15. **WELL PERMIT APPLICATION SIGNATURE SECTION:**
If the information in this application is falsified, changed, or the site is altered, then the Well Permit shall become invalid. I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary *inspections to determine compliance with applicable laws and rules.* I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed. The permit is valid for a period of 12 months from the date of issuance.

Robert J Morgan 12-28-07
Property Owner's or Owner's Legal Representative Signature Date

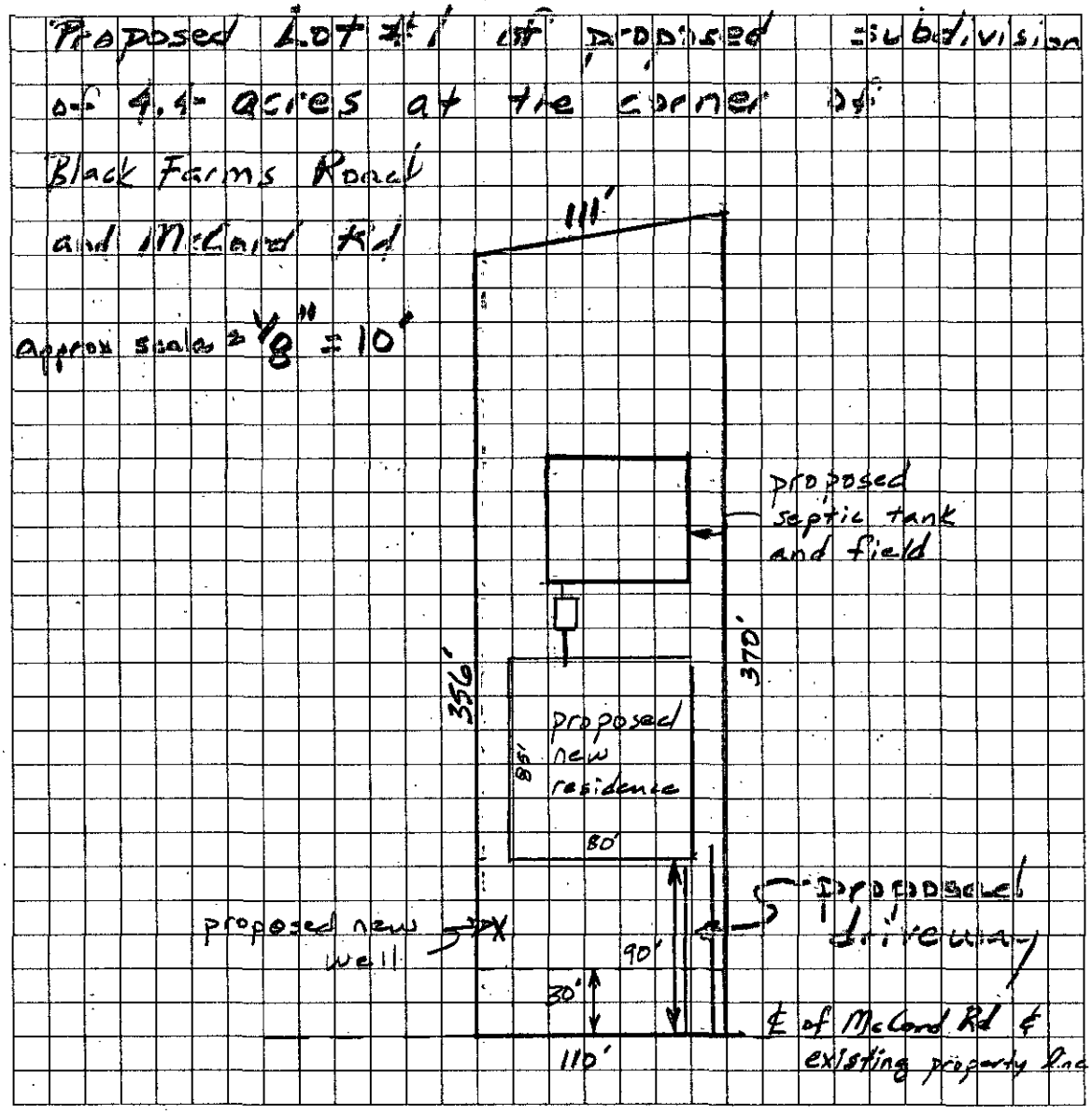
☐ SURVEY PLAT TO SCALE SUBMITTED ☑ SCALED SITE PLAN SUBMITTED ☐ UN-SCALED SITE PLAN SUBMITTED

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 #_____
Date_____

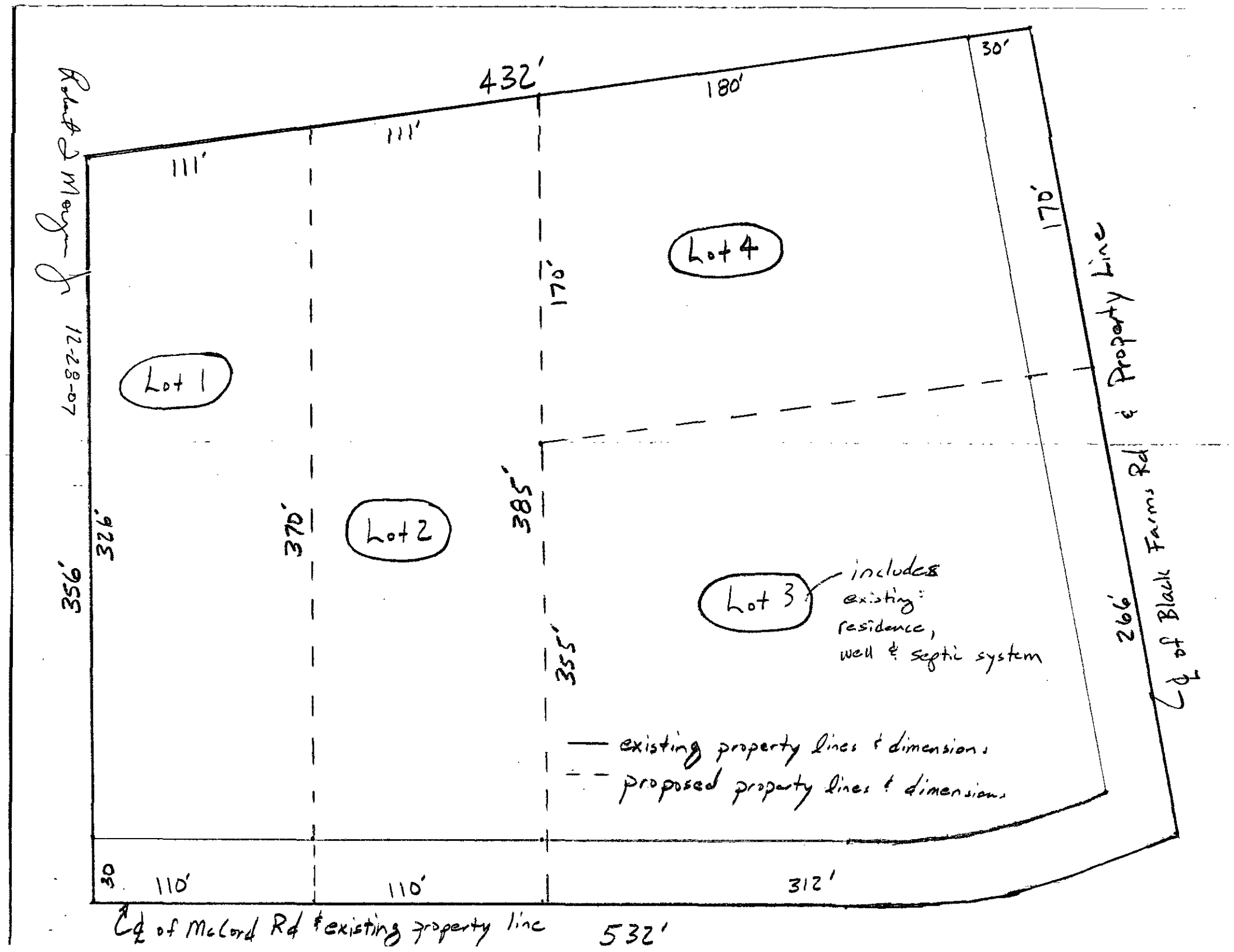
# PROPOSED PLOT PLAN

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 | Robert L Morgan Jr |
| Date | 12-28-07 |

LBC 12/15/04


Part of Map 12-28-07
432'
111'
111'
180'
30'
170'
170'
Lot 1
Lot 2
Lot 3
Lot 4
includes existing residence, well & septic system
356'
326'
370'
385'
355'
266'
— existing property lines & dimensions
– – proposed property lines & dimensions
30
110'
110'
312'
℄ of McLord Rd & existing property line
532'
℄ of Black Farms Rd & Property Line

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

Sheet: 1 of 2
Property ID: PO 011-241-09
Lot #: 1
File #: 7562B
AppID: 3125

# SOIL/SITE EVALUATION
## for ON-SITE WASTEWATER SYSTEM

Owner: Robert L. Morgan Jr.
Applicant: Mark Morgan
Address: 14101 Black Farms Road, Huntersville, N. C. 28078
Date Evaluated: 1/9/2008
Proposed Facility: Residence
Design Flow (.1949): 480gpd
Property Size: .92a
Location of Site: McCord Road
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 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, 6 | 0-6 | GR/SCL | FR/SEXP/SS/SP | >48" TO SOIL WETNESS | 48 | N/A | NONE | PS, IV |
| | | 6-34 | SBK/ABK/C | FI/SEXP/S/P | | | | | .275GPD/FT$^2$ |
| | | 34-48 | SBK/CL | FR/SEXP/SS/SP | | | | | |
| 2 | " | 0-18 | GR/SCL | " | " | " | " | " | " |
| | | 18-48 | SBK/ABK/C | FI/SEXP/S/P | | | | | |
| 3 | " | 0-11 | GR/SCL | FR/SEXP/SS/SP | " | " | " | " | " |
| | | 11-42 | SBK/ABK/C | FI/SEXP/S/P | | | | | |
| | | 42-48 | SBK/CL | FR/SEXP/SS/SP | | | | | |
| 4 | " | 0-6 | GR/SCL | " | " | " | " | " | " |
| | | 6-48 | SBK/ABK/C | FI/SEXP/S/P | | | | | |
| | | | | | SITE LTAR .275GPD/FT$^2$ | | | | |

| Description | Initial System | Repair System |
|---|---|---|
| Available Space (.1945) | PS | PS |
| System Type(s) | IIIg | IIIg |
| Site LTAR | 0.275 | 0.275 |

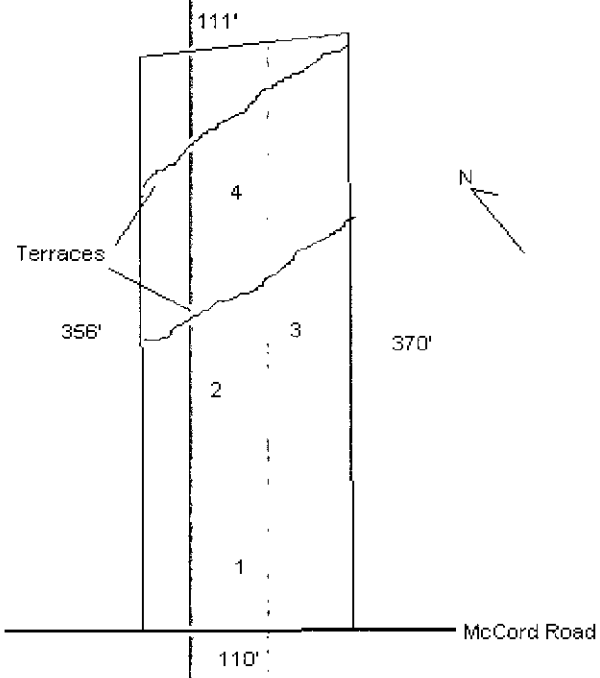
Other Factors (.1946):
Soil Evaluation By: W. R. Marlin, LSS, 1/11/2008
Others Present:
Site Classification (.1948): PS
Site Evaluation By: PHILO WALKER RS 1/14/08
Others Present:

**COMMENTS:**
100% repair

| 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**

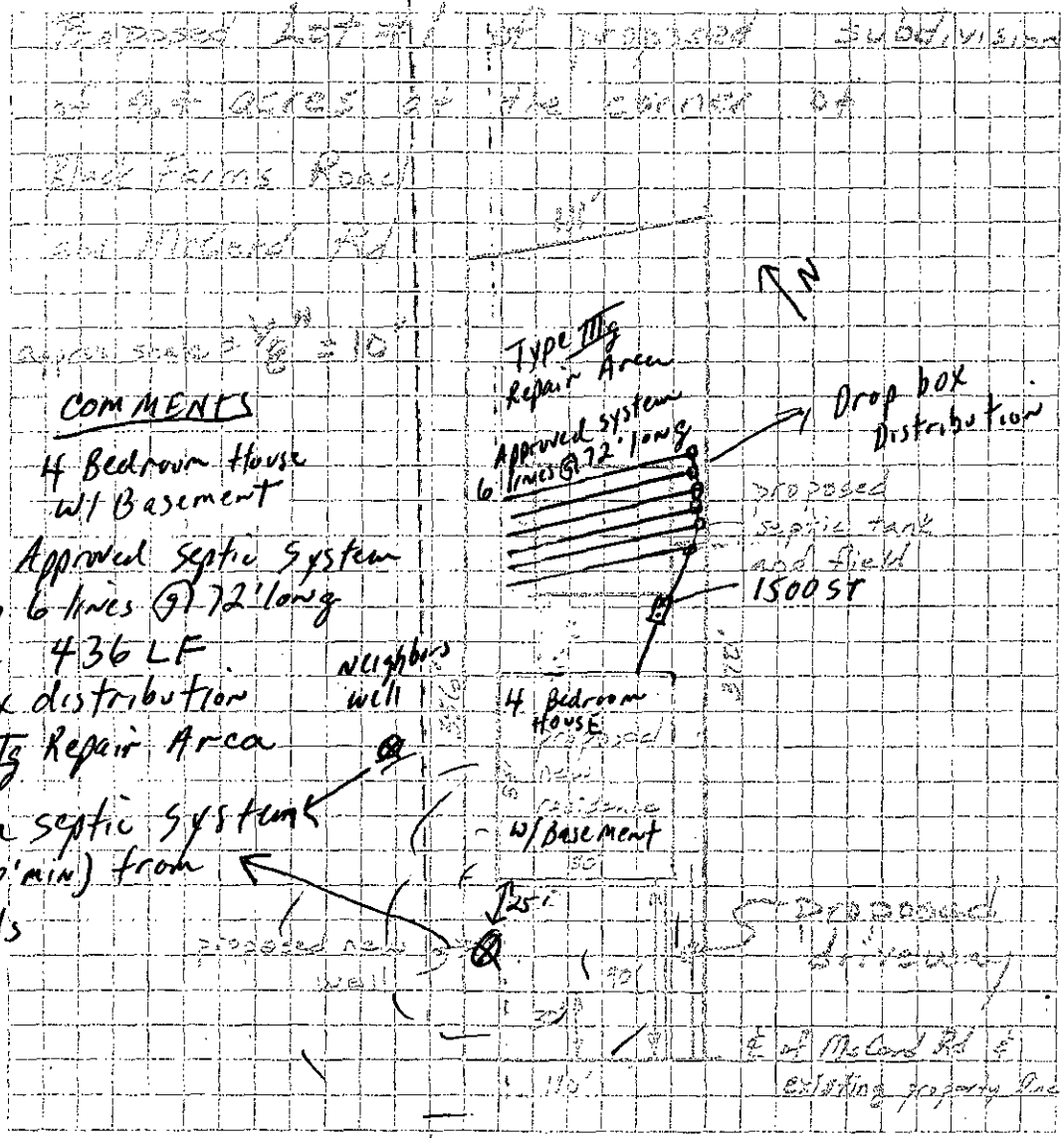


Mecklenburg County
Land Use & Environmental Service Agency
Groundwater & Wastewater Services
700 N. Tryon St., Suite 211
Charlotte, NC 28202
Phone: (704) 336-5103
Fax: (704) 336-8954

File # 7562B
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 Robert J. Morgan Jr
Date 12-28-07

LBC 12/15/04

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 #: **30003125** GWS File #: **7562B** Tax Parcel #: **011-241-09**

- 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):** 1/15/2013

Type of Installation: Residential - New System Lot Number: 1

Structure Type: HOUSE Size ($ft^2$): 3000 # Bedrooms: 4 # Occupants: 4

Building Foundation: Basement With Plumbing Water Supply: Private Well

**II. Initial System Type:** Approved **System Classification:** IIIg

Initial System Specifications:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Design Flow (gpd): | 480 | LTAR ($gpd/ft^2$): | 0.275 | Septic Tank Size (gal): | 1500 | Pump Tank Size (gal): | N/A |
| Trench Width (ft): | 3 | Trench Spacing (ft): | 9 | Absorption Area ($ft^2$): | 1309 | Total Trench Length (ft): | 436 |
| Maximum Trench Depth (in): | 30 | Depth of Media (in): | 12 | Distribution Device: | Drop Boxes | | |

**III. Repair System Type:** Approved **System Classification:** IIIg

Repair System Specifications:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Design Flow (gpd): | 480 | LTAR ($gpd/ft^2$): | 0.275 | Septic Tank Size (gal): | 1500 | Pump Tank Size (gal): | N/A |
| Trench Width (ft): | 3 | Trench Spacing (ft): | 9 | Absorption Area ($ft^2$): | 1309 | Total Trench Length (ft): | 436 |
| Maximum Trench Depth (in): | 30 | Depth of Media (in): | 12 | Distribution Device: | Drop Boxes | | |

**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: Phil Walker

Signature: Phil Walker RS

Date Issued: 1/15/2008

Owner/Legal Agent: Robert M. Morgan
Print Name

Signature: RM Morgan

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 #: **30003125** GWS File #: **7562B**

**IV. Permit Conditions/Comments:**

- All components of the septic system must be located at least 100 ft. (50 ft. minimum) from all private wells.
- The invert of the sewer pipe exiting the structrue should be kept as high as possible in order to achieve gravity flow to the drain field. A dosing tank will be required if gravity flow to the drain field can not be achieved.
- KEEP PLUMBING AS HIGH AS POSSIBLE

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: Philo Walker

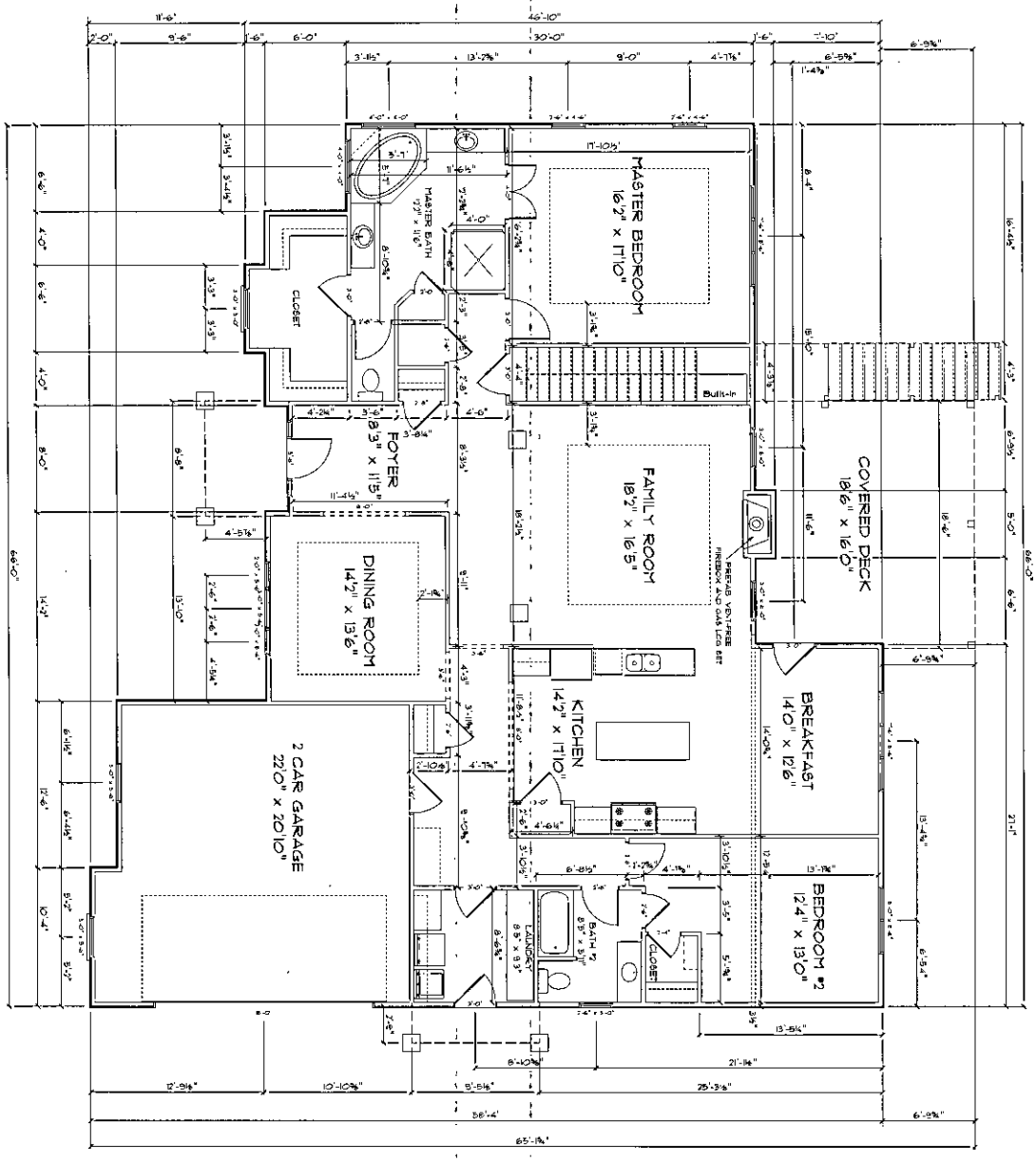
Signature: Philo Walker RS

Date Issued: 1/15/2008

Owner/Legal Agent: Robert M Morgan
Print Name

Signature: RM Morgan

7562B




## AREA CALCULATIONS

| | |
|---|---|
| MAIN FLOOR HEATED | 2871 S.F. |
| TOTAL HEATED | 2871 S.F. |
| UNFINISHED BASEMENT | 2871 S.F. |
| GARAGE | 838 S.F. |
| BACK PORCH | 285 S.F. |
| FRONT PORCH | 54 S.F. |
| SIDE COVERED ENTRY | 71 S.F. |
| TOTAL UNHEATED | 370 S.F. |
| TOTAL UNDER ROOF | 5648 S.F. |

# MAIN FLOOR PLAN

SCALE: 1/4" = 1' - 0"

SHEET NO.

A-3

JOB ADDRESS:

13509 McCORD RD
HUNTERSVILLE, NC 28078

NEW HOME FOR:

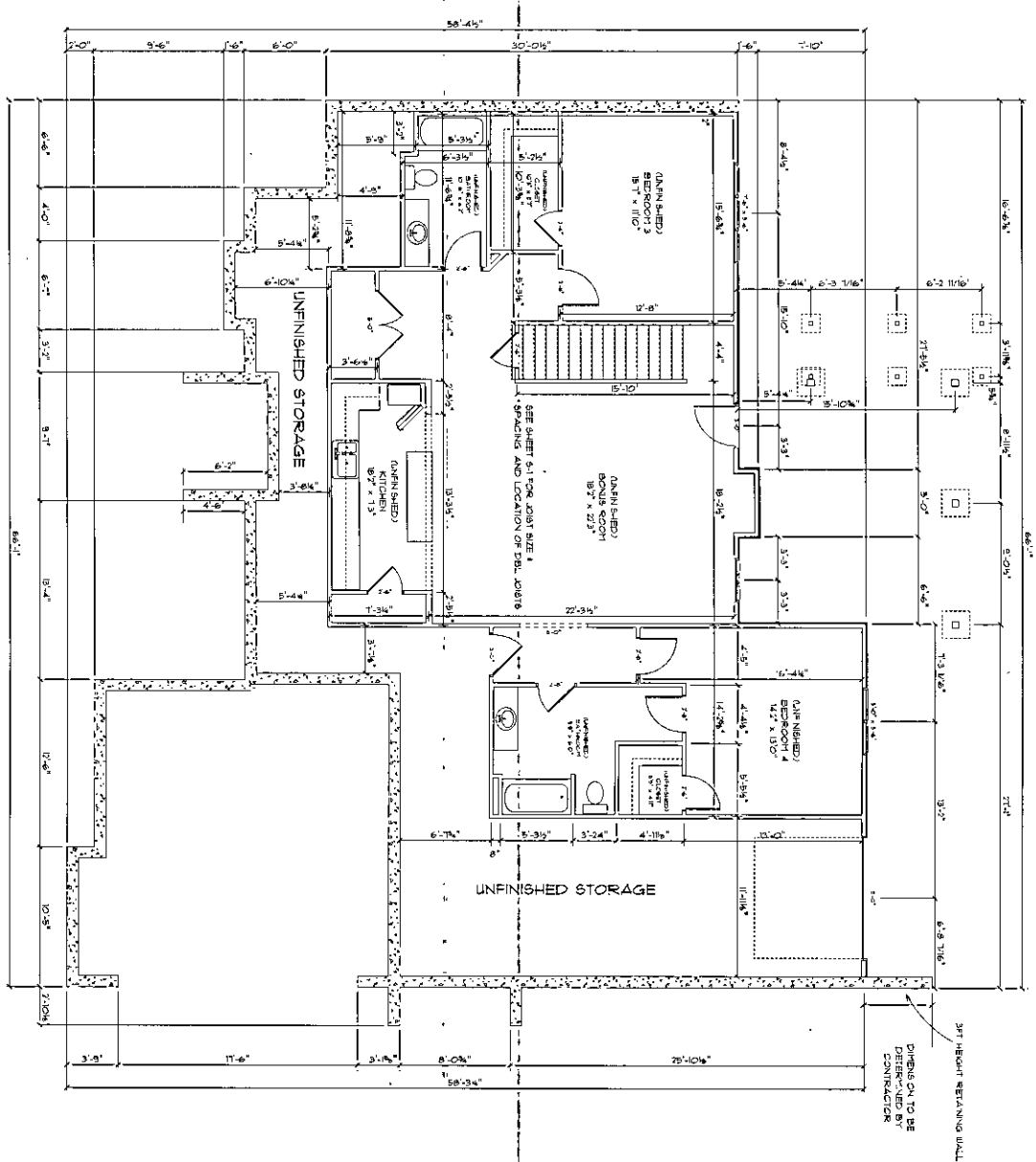
**MARK & JESSICA MORGAN**
13501 McCord Rd.
Huntersville, NC 28078


ENGINEER

Robert L. Morgan Jr.
704-607-4438
1410 Black Farm Rd.
Huntersville, NC 28078

PLAN DRAWN BY:

Mark Morgan
704-582-3818
1-866-999-6921 (FAX)
mark@morganhomes.com




# BASEMENT FLOOR PLAN

SCALE: 1/4" = 1' - 0"

SHEET NO.

A-2

JOB ADDRESS:

13509 McCORD RD
HUNTERSVILLE, NC 28078

NEW HOME FOR

MARK & JESSICA MORGAN
13501 McCord Rd.
Huntersville, NC 28078

ENGINEER

Robert L. Morger Jr.
704-607-4438
14101 Black Farms Rd.
Huntersville NC 28078

PLAN DRAWN BY:

Mark Morgan
704-582-3818
1-866-822-6021 (FAX)
mark.r.morgan@morgan.com

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

# INSTALLATION APPROVAL for an ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 7562B Permit #: 3125 Tax Parcel #: 011-241-09

Property Owner: Mark Morgan

Job Location Address: 13509 McCord Road

City: Huntersville State: NC Zip Code: 28078

**Installation Approval Issuance Date:** 7/15/10

Permission is hereby given to ☒ install ☐ alter ☐ repair an on-site wastewater treatment & and disposal system, with subsurface soil absorption and effluent discharge, as specified herein at the described location. This approval is granted based upon the application information submitted to our office. All work shall be completed on or before _____, after which date this approval shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A. 1900 which are in effect on the date of granting this approval. An **Operation Permit** must be obtained from the Mecklenburg County Health Department before any system can be covered up or placed into service. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed will operate properly, or relieve any person now of hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

***NOTICE: This system shall not be installed while soils are in a wet condition.**

Permitted Design Flow: 480 GPD

Site LTAR: 0.275 GPD/ft² (For new installations only.)

Liquid Capacity of Septic Tank: 1500 gallons

Liquid Capacity of Dosing Tank: — gallons

Drainfield Design ☐ N/A

Trench Depth: 30 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 436 feet

# of Lines: 6 @ 72 feet

Depth of Media: 12 inches (Type) 25% Rd.

Distribution Device: D-Box

Bed Design *(For Repair Installations ONLY.)* ☒ N/A

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Distribution Device: _____

Water Supply Source

☐ Municipal ☒ Private Well ☐ Community Well

☐ Other _____

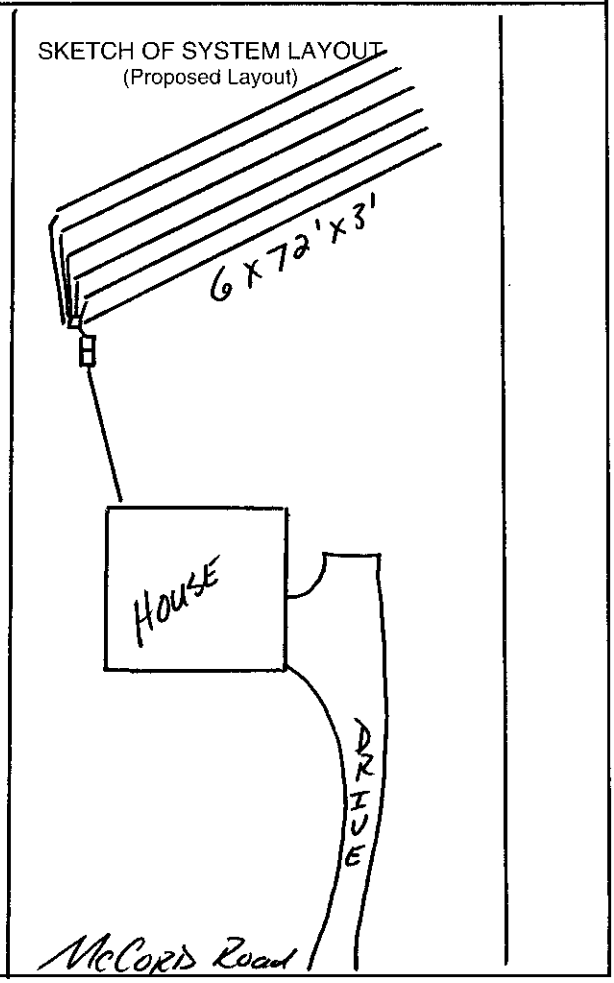
Minimum System Setbacks

Distance from Building Foundation: >10' feet

Distance from Property Line: >10' feet

Distance from Water Supply Source: >50' feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)




Comments: System Classification & Type: IIIg 25% Rd. system

DENR Authorized Agent: Jeremy Micholax R.S. Signature: Jeremy Micholax, R.S.

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

**OPERATION PERMIT for an**
**ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM**

File #: 75628 Permit #: 3125 Tax Parcel #: 011-241-09

Property Owner: Mark Morgan

Job Location Address: 13509 McCord Road

City: Huntersville State: NC Zip Code: 28078

**Operation Permit Issuance Date:** 7/16/10 Contractor Name: Tommy Frye

Permitted Design Flow: 480 GPD

Liquid Capacity of Septic Tank: 1500 gallons

Liquid Capacity of Dosing Tank: N/A gallons

Effluent Pump Model: N/A

Drainfield Installation ☐ N/A

Trench Depth: 32 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 436 feet

# of Lines: 5 @ 87' feet

Depth of Media: 12 inches (Type) IQ4W

Depth of Cover: 20 inches

Distribution Device: DROP CHAMBER

Inspection Dates

Tank(s) Inspected: 7/16/10

Excavation Inspected: 7/16/10

Pump & Controls Inspected:

Bed Installation *(For Repair Installations ONLY.)* ☒ N/A

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

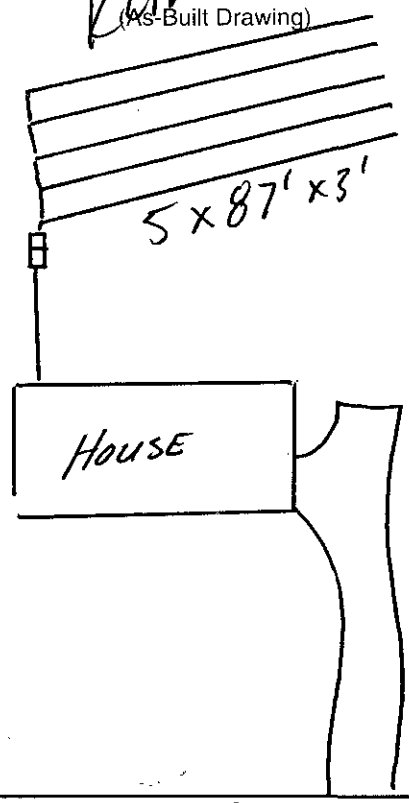
# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Depth of Cover: _____ inches

Distribution Device: _____

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)




Water Supply Source

☐ Municipal ☒ Private Well ☐ Community Well

☐ Other _____

System Installation Setbacks

Distance from Building Foundation: >10' feet

Distance from Property Line: >10' feet

Distance from Water Supply Source: >50' feet

The undersigned has inspected the Septic Tank System described above, and certifies it has been ☒ installed ☐ altered ☐ repaired ☒ as detailed in the plot above ☐ in accordance with the permit issued and meets the provisions of 15A NCAC 18A. 1900, "Laws and Rules for Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. The issuance of this Operation Permit does not in any way guarantee that the system will operate properly or relieve any person now or hereafter owning, controlling, or using such system from any liability resulting from the failure of the system to operate properly. This document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 15A NCAC 18A. 1900 in addition to those listed below under "Comments." This document shall be null and void if any information contained in the application is untrue or if any additions are made to the property which would increase the requirements for said system.

**Notice: Disturbance of the designated repair area may result in the Suspension or Revocation of this permit.**

Comments: System Classification & Type: III g, IQ4W, Gravity, NA, NA

DENR Authorized Agent: Jeremy Mickelson R.S. Signature: Jeremy Mickelson R.S.

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

**OPERATION PERMIT for an**
**ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM**

File #: 7562B Permit #: 3125 Tax Parcel #: 011-241-09

Property Owner: Mark Magan

Job Location Address: 13509 McCord Road

City: Huntersville State: NC Zip Code: 28078

**OPERATION PERMIT CONDITIONS:**

I. Performance: System shall perform in accordance with 15A NCAC 18A .1961.

II. Monitoring: System shall be monitored as required by 15A NCAC 18A .1961.

III. Maintenance: Ground absorption sewage treatment and disposal systems shall be checked, and the contents of the septic tank removed, periodically from all compartments, to ensure proper operation of the system. The contents shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.

IV. Operation: System shall be operated in accordance with 15A NCAC 18A .1961.

System Classification: IIIg

*Operation Permits for Type V and VI systems expire five (5) years from the date of issuance (in accordance with Table V(a)). The system owner must contact GWS six (6) months prior to expiration for permit renewal.

Subsurface system operator required: Yes ☐ No ☒

☐ This type of system requires the system owner to maintain a contract with a certified operator to perform system inspection, maintenance, and reporting as required in 15A NCAC 18A .1961. and Table V(a). The system owner is responsible for all fees associated with these services.

☒ System does not require inspection by GWS on a routine frequency.

☐ System requires inspection by GWS once every five (5) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every three (3) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every twelve (12) months. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every six (6) months. The system owner is responsible for all fees associated with the inspection.

V. Other:

DENR Authorized Agent: Jeremy Mickelson, R.S. Date: 7/16/10

Signature: Jeremy Mickelson, R.S.

Groundwater & Wastewater Services
Septic Project File & Data Review Worksheet

GWS File #: 7562B WASPS App #: 3125

Primary ES assigned to project: PW

Secondary ES assigned to project:

Project Type: New System ☑ Alteration ☐ Repair ☐ Modified Plot Plan ☐

CP 3/2/10 Prem 7/21/10

I. File Review:

| Rule or Law | | | | |
|---|---|---|---|---|
| | **Permit Application** | | | |
| .1937(d) | Is the Application complete | Yes ☑ | No ☐ | N/A ☐ |
| .1937(d) | Is there a Site plan/Plat with application | Yes ☑ | No ☐ | N/A ☐ |
| .1937(d) | Is the Facility shown? | Yes ☑ | No ☐ | N/A ☐ |
| .1937(d) | Are appurtenances shown | Yes ☑ | No ☐ | N/A ☐ |
| | **Site Evaluation Information** | | | |
| .1939 (a)(1) | Topography and Landscape Position Recorded? | Yes ☑ | No ☐ | N/A ☐ |
| .1940 (a-g) | Slope % Recorded? | Yes ☑ | No ☐ | N/A ☐ |
| .1939 (a)(2) | Texture Class Recorded? | Yes ☑ | No ☐ | N/A ☐ |
| .1939 (a)(2) | Structure type Recorded? | Yes ☑ | No ☐ | N/A ☐ |
| .1939 (a)(2) | Consistence Recorded? | Yes ☑ | No ☐ | N/A ☐ |
| .1939 (a)(2) | Mineralogy Recorded? | Yes ☑ | No ☐ | N/A ☐ |
| .1939 (a)(3) | Soil Wetness Condition Recorded? | Yes ☐ | No ☐ | N/A ☑ |
| .1939 (a)(4) | Soil Depth to Rock or Parent Material Recorded When Encountered | Yes ☐ | No ☐ | N/A ☑ |
| .1939 (a)(5) | Depth to Restrictive Horizons Recorded When Encountered? | Yes ☐ | No ☐ | N/A ☑ |
| .1939 (a)(6) | Sufficient Available Space Recorded? | Yes ☑ | No ☐ | N/A ☐ |
| .1937(m) | Are the Profile Locations Shown? | | | |
| .1939(a) | Are the S/PS Profiles in system & in repair area? | Yes ☑ | No ☐ | N/A ☐ |
| & .1945(b) | Number of auger borings made: 4 Were sufficient auger borings made? | Yes ☑ | No ☐ | N/A ☐ |
| .1939(d), .1955, .1956, .1957 | LTAR .275 | Yes ☑ | No ☐ | N/A ☐ |
| | **Improvement Permit/Construction Authorization** | | | |
| .1937(g) 130A-336(a) | Proposed System Type stated-Initial | Yes ☑ | No ☐ | N/A ☐ |
| .1945(b) 130A-336 (a)(3) | Proposed System Type stated-Repair System location identifiable by setbacks - Initial | Yes ☑ | No ☐ | N/A ☐ |
| .1937(g) .1945(b) | System components shown – Initial | Yes ☑ | No ☐ | N/A ☐ |
| .1945(b) | Repair area shown | Yes ☑ | No ☐ | N/A ☐ |
| .1937 (f)(g). | Does System design match facility, flow & WWcharacteristics? | Yes ☑ | No ☐ | N/A ☐ |
| .1937 (f)(g) | Is System design consistent with soil/site conditions? | Yes ☑ | No ☐ | N/A ☐ |
| .1937 (f)(g) | Is the System located in the approved area? | Yes ☑ | No ☐ | N/A ☐ |
| 130A-336(a) | Is the Design flow (gpd) indicated? | Yes ☑ | No ☐ | N/A ☐ |

| | | | | |
|---|---|---|---|---|
| 130A-336(a) | Number of Bedrooms, employees, seats, etc. indicated? | Yes ☑ | No ☐ | N/A ☐ |
| .1937(g) | Trench depth indicated? | Yes ☑ | No ☐ | N/A ☐ |
| .1937(g) | Trench width indicated? | Yes ☑ | No ☐ | N/A ☐ |
| .1937(g) | Trench length indicated? | Yes ☑ | No ☐ | N/A ☐ |
| 130A-336(a)(1) | Proposed/existing well shown? | Yes ☑ | No ☐ | N/A ☐ |
| 130A-336(a)(1) | Property line lengths shown? | Yes ☑ | No ☐ | N/A ☐ |
| 130A-336(a) | Facility/appurtenance setbacks shown from fixed points? | Yes ☑ | No ☐ | N/A ☐ |
| | Operation Permit | | | |
| .1937(i) | System type as described in table V(a) of rule .1961 | Yes ☑ | No ☐ | N/A ☐ |
| .1937(i) | Conditions for system performance, operation, maintenance, monitoring and reporting. | Yes ☑ | No ☐ | N/A ☐ |

II. WASPS Review:

| | | | |
|---|---|---|---|
| Construction authorization issued | Yes ☐ | No ☐ | N/A ☐ |
| Installation approval issued | Yes ☐ | No ☐ | N/A ☐ |
| Operation permit issued | Yes ☐ | No ☐ | N/A ☐ |
| Other related documentation | Yes ☐ | No ☐ | N/A ☐ |

# Items requiring correction/modification: _____

Comments:

IA issued date: 7 15 10

OP issued date: 7 16 10

Review performed by: IR

Date performed: 1-17-08

*MECKLENBURG COUNTY*
*LAND USE AND ENVIRONMENTAL SERVICES*
*Payment Receipt*

**Receipt Information**

| | | | |
|---|---|---|---|
| **Date:** | 12/28/07 | **Amount:** | 600.00 |
| **Receipt #:** | 54330 | **Tendered:** | 600.00 |
| **Check / Auth #:** | VISA 01586B | **Returned:** | 600.00 |
| **Received By:** | MURRABJ | | |

**Account Information**

**Account #:** 200000
**Contractor:** MORGAN ROBERT
**Attn:**
**Address:** 11401 BLACK FARMS RD
**Address:**
**City/State/Zip:** HUNTERSVILLE, NC 28078

| Item | Description | Permit# | Quantity | Unit Price | Total Price |
|---|---|---|---|---|---|
| 0701 | Improvment Permit App-Residen<br>3 LOTS/ 11401 BLACK FARMS RD | | 1 | 600.00 | 600.00 |

MECK CTY LOUISA N SATELI
18335 OLD STATESVILLE RD
CORNELIUS, NC 28078
DEC 28, 2007 04:56PM 1
TERM : 00015800071 70
MERCH:
REF #: 003
ACT #: 431351101212192 7
EXP : 06/10
CARD : VISA
INVOICE #: SEPTIC
$ 600.00
SALE: 736219500295
RETR REF#: 01586B
APPROVAL CODE:
I AGREE TO PAY ABOVE
TOTAL AMOUNT ACCORDING
TO CARD ISSUER AGREEMENT
x SIGNATURE
MORGAN/ROBERT
MERCHANT COPY

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

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

*MECKLENBURG COUNTY*
*LAND USE AND ENVIRONMENTAL SERVICES*
***Payment Receipt***

**Receipt Information**

**Date:** 02/25/10
**Receipt #:** 66029
**Check / Auth #:** VISA 750297
**Received By:** CRAIGGY

**Amount:** 200.00
**Tendered:** 0.00
**Returned:** 0.00

**Account Information**

**Account #:** 200000
**Contractor:** MORGAN MARK
**Attn:**
**Address:** 13501 MCCORD ROAD
**Address:**
**City/State/Zip:** HUNTERSVILLE, NC 28078

| Item | Description | Permit# | Quantity | Unit Price | Total Price |
|---|---|---|---|---|---|
| 0703 | Installation/Final Approval<br>13509 MCCORD ROAD/FILE 7562B | | 1 | 200.00 | 200.00 |

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

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

*MECKLENBURG COUNTY*
*LAND USE AND ENVIRONMENTAL SERVICES*
***Payment Receipt***

**Receipt Information**

| | | | |
|---|---|---|---|
| **Date:** | 02/25/10 | **Amount:** | 200.00 |
| **Receipt #:** | 66028 | **Tendered:** | 0.00 |
| **Check / Auth #:** | VISA 750297 | **Returned:** | 0.00 |
| **Received By:** | CRAIGGY | | |

**Account Information**

| | |
|---|---|
| **Account #:** | 200000 |
| **Contractor:** | MORGAN MARK |
| **Attn:** | |
| **Address:** | 13501 MCCORD ROAD |
| **Address:** | |
| **City/State/Zip:** | HUNTERSVILLE, NC 28078 |

| Item | Description | Permit# | Quantity | Unit Price | Total Price |
|---|---|---|---|---|---|
| 0734 | Auth for Waste Wtr Sys Constr<br>13509 MCCORD ROAD/FILE 7562B | | 1 | 200.00 | 200.00 |

----------**Outstanding Balances**----------

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

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