Supervisor/Administrative Professional Checklist

New Septic [X] New Well [ ] Use Existing [ ] Alteration [ ] Modified Plot Plan [ ]

New Septic Fees Paid:

IP ($250.00) LE 11/4/16 Initials/Date

CA ($200.00) _____ Initials/Date

OP ($200.00) _____ Initials/Date

(CA and OP fees need to be paid before a building permit can be issued)

New Well Fee Paid: $550.00 _____ Initials/Date

Use Existing Fee Paid: $100.00 _____ Initials/Date

Alteration Fee Paid: $300.00 (Total) $200 (If use existing was paid) _____ Initials/Date

Modified Plot Plan Fee Paid: $100.00 _____ Initials/Date

Floor plans need to be submitted and reviewed before CA can be issued. [ ] Reviewed [ ] ____

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

Septic file completed. [ ] _____ Well file completed. [ ] _____

Send permit for signature. [✓] Signature received. [ ] _____

This septic system requires a certified operator contract before final hold is released. [ ]

Certified operator contract is on file. [ ] _____

Ellis, Loretta

From: Jeff Newton <jnewton@newtonchr.com>
Sent: Friday, August 11, 2017 1:21 PM
To: Ellis, Loretta
Subject: Re: ARLINGTON CHURCH ROAD

We did not do septic or well on this lot. The city ran water and sewer taps to us.

Jeff Newton
Newton Custom Homes & Realty
www.newtonchr.com
704-651-3378

Sent from my iPhone

On Aug 11, 2017, at 12:18 PM, Ellis, Loretta <Loretta.Ellis@mecklenburgcountync.gov> wrote:

> Please sign the Improvement Permit and Drawing for ARLINGTON CHURCH RD, and please email the signed copy to me at WELLREG@MECKLENBURGCOUNTYNC.GOV, thank you.
>
> Loretta W. Ellis
> Administrative Assistant III
> Environmental Health Services
> Mecklenburg County Health Department
> Office 980-314-1680
> Fax 704-336-6894
> Email Loretta.Ellis@MecklenburgCountyNC.gov
> http://Groundwater.charmeck.org
> http://Meckpools.charmeck.org
>
> **CONFIDENTIALITY NOTICE:** This message and any attachments included are from the Mecklenburg County Health Department and are for sole use by the intended recipient(s). The information contained herein may include confidential or privileged information. Unauthorized review, forwarding, printing, copying, distributing, or using such information is strictly prohibited and may be unlawful. If you received this message in error, or have reason to believe you are not authorized to receive it, please contact the sender by reply email and destroy all copies of the original message. Thank you!

<Color0016.pdf>

MECKLENBURG COUNTY
HEALTH DEPARTMENT

9611B #8578

3 NOV '16 AM 11:22

APPLICATION FOR A RESIDENTIAL SITE IMPROVEMENT PERMIT/ CONSTRUCTION AUTHORIZATION FOR AN ON-SITE WASTEWATER SYSTEM, NEW WELL INSTALLATION, OR REPAIR OF EXISTING WELL

1. **SEPTIC / TYPE APPLICATION:** ○ N/A ☑ NEW SYSTEM ○ ALTERATION ○ REPAIR ○ MODIFIED PLOT PLAN

2. **WELL / TYPE APPLICATION:** ○ N/A ○ NEW WELL ○ MAJOR REPAIR ○ ABANDONMENT

3. **JOB LOCATION INFORMATION:**

TAX PARCEL NUMBER: 139-281-20
STREET ADDRESS: 6012 ARLINGTON CHURCH RD
CITY: CHARLOTTE
STATE: NC ZIP: 28227
SUBDIVISION NAME: ARLINGTON ACRES
LOT #: 4 LOT SIZE (acres): 5.01
TOWNSHIP:
○ MECKLENBURG ○ CORNELIUS ○ HUNTERSVILLE
○ DAVIDSON ○ CHARLOTTE ○ PINEVILLE
○ MATTHEWS ○ MINT HILL

4. **BUILDING INFORMATION:**

BUILDING TYPE:
○ SINGLE MOBILE HOME ○ MODULAR HOME
○ DOUBLE WIDE ○ MULTIPLE FAMILY
☑ HOUSE ○ OTHER _____
HEATED SQUARE FOOTAGE: 2800
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 3
FOUNDATION TYPE:
○ CONCRETE SLAB ○ BASEMENT WITH PLUMBING
☑ CRAWL SPACE ○ BASEMENT WITH NO PLUMBING

5. **IF PLANNING TO EXPAND OR ALTER THE EXISTING SEPTIC 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 ○ PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER _____

7. **PROPOSED USE OF WELL:** ☑ N/A ○ IRRIGATION ○ POTABLE (DRINKING WATER) ○ OTHER _____

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

☐ N/A ☐ ANY TYPE ☑ 1 CONVENTIONAL ☑ 2 ACCEPTED ☐ INNOVATIVE ☐ ALTERNATIVE ☐ OTHER _____

8A. **RANK:** 1 2 3 4 ____

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
CHEMICAL/PETROLEUM STORAGE TANKS	○ YES ☑ NO	KNOWN UNDERGROUND CONTAMINATION	○ YES ☑ NO
WASTE STORAGE	○ YES ☑ NO	GROUNDWATER USE RESTRICTIONS/VARIANCES	○ YES ☑ NO

10. **WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?** _____ ☑ UNKNOWN

11. **WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?** DEC, 1 2016 ☐ N/A

12. **PROPERTY OWNER:**

NAME: RICH FERRETTI
ADDRESS: 10023 EDWARDS PL,
CITY: MINT HILL
STATE: NC ZIP: 28227
WORK PHONE: _____
MOBILE PHONE: 704-564-0807
FAX: 877-816-1003
E-MAIL: RICH@RICHFERRETTI.COM

13. **OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:**

NAME: JEFF NEWTON
ADDRESS: 6012 HEMLOCK DR
CITY: INDIAN TRAIL
STATE: NC ZIP: 28079
WORK PHONE: _____
MOBILE PHONE: 704-651-3378
FAX: 704-628-0409
E-MAIL: JNEWTON@NEWTONCHR.COM

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

Revised on: 12/15/10

14. SEPTIC SYSTEM PERMIT APPLICATION:

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 sixty (60) months or is non-expiring depending upon the documentation submitted: complete site plan = 60 months, complete plat = non-expiring.

_____ (Initial here for septic system applications)

15. WELL PERMIT APPLICATION:

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 twelve (12) months from the date of issuance.

_____ (Initial here for well applications)

16. APPLICATION SIGNATURE SECTION:

ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. A proper signature is required in order to process your application. Please review the application carefully and sign in the space provided below. A PROPOSED PLOT PLAN is required to be submitted with each application.

_____ 10/28/16

Property Owner's or Owner's Legal Representative Signature — Date

---

OFFICE USE ONLY

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

SEPTIC APPLICATION FEE RECEIVED: $ _____ DATE FEE RECEIVED: _____

WELL APPLICATION FEE RECEIVED: $ _____ DATE FEE RECEIVED: _____

APPLICATION PROCESSED BY: _____

GWS FILE NUMBER ASSIGNED: _____

APPLICATION ID NUMBER ASSIGNED: _____

COMMENTS:

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

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	11/03/16	**Amount:**	250.00
Receipt #:	102350	**Tendered:**	250.00
Check / Auth #:	CHECK 2994	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: 200000
Contractor: NEWTON CUSTOM HOMES & REALT
Attn: DBA PROGRESSIVE BUILDING SOLU
Address: 6012 HEMLOCK DR
Address:
City/State/Zip: INDIAN TRAIL, NC 28079

Item	Description	Permit#	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen ARLINGTON CHURCH RD		1	250.00	250.00

Outstanding Balances

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

MECKLENBURG COUNTY
Health Department

E. Winters Mabry, MD
Director

(704) 432-3199

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 JEFF NEWTON is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at 139 281 20.

Number Street Town
(Or Parcel Number)

Property Owner (print name)

Property Owner (signature)

11-3-2016
Date

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

Sheet: 1 of 3
Property ID: 139-281-20
Lot #: 4
File #: 9611B
AppID: 8578

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Rich Ferretti
Address: 10023 Edwards Pl, Mint Hill, NC 28227
Proposed Facility: 4 Bedroom House
Design Flow (.1949): 480 GPD
Location of Site: Arlington Church Rd., Mint Hill, NC 28227
Water Supply: [ ] Public [ ] Individual [ ] Well [ ] Spring [X] Municipal
Evaluation Method: [X] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [X] Sewage [ ] Industrial Process [ ] Mixed

Applicant: Jeff Newton
Date Evaluated: 11/15/2016
Property Size: 5.01 ac
Property Recorded: Unknown

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	General Comments	Profile Class & LTAR	Maximum Trench Bottom Depth for 3' Wide Conventional Trench
Boring #1	LS 8%	0 - 6	gr SL	SS SP FR SEXP							
		6 - 18	sbk SCL	S SP FR SEXP	2 chroma	18	NA	NA		US	NA
		18 - 36	mass C	S VP FI EXP	at 34"						
Boring #2	LS 8%	0 - 9	gr SL	SS SP FR SEXP							
		9 - 18	sbk SC	S P FR SEXP	2 chroma	18	NA	NA		US	NA
		18 - 30	mass SC	S P VFI EXP	at 26"						
Boring #3	LS 8%	0 - 9	gr SL	SS SP FR SEXP							
		9 - 24	sbk C	S P FR SEXP	2 chroma	24	NA	NA		US	NA
		24 - 30	mass SC	S P VFI EXP	at 27"						
Boring #4	R 2%	0 - 5	gr SL	SS SP FR SEXP						PS IV	
		5 - 36	sbk C	S P FI SEXP	>48"	48	NA	NA	yellow brown mottles	0.25	36"
		36 - 48	sbk CL	S P FR SEXP					18 - 48"		
Boring #5	R 2%	0 - 5	gr SL	SS SP FR SEXP						PS IV	
		5 - 48	sbk/abk C	S P FI SEXP	>48"	48	NA	NA	yellow brown mottles	0.225	36"
									18 - 48"		
Boring #6	R 2%	0 - 22	gr SL	SS SP FR SEXP						PS IV	
		22 - 34	sbk C	S P FI SEXP	>42"	42	NA	NA	yellow brown mottles	0.25	30"
		34 - 42	sbk SCL	SS SP FR SEXP					22 - 34"		
		42	Saprolite								

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	1116	1116
Site LTAR (gpd/sq ft)	0.225*	0.225*

*LTAR only valid for area of borings 4 through 8.

Other Factors (.1946): NA
Soil Evaluation By: Jacob Presley, LSS, REHS JLPS
Others Present: Jeff Newton
Site Classification (.1948): PS
Site Evaluation By: April Bumgarner
Others Present:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
CONTINUED

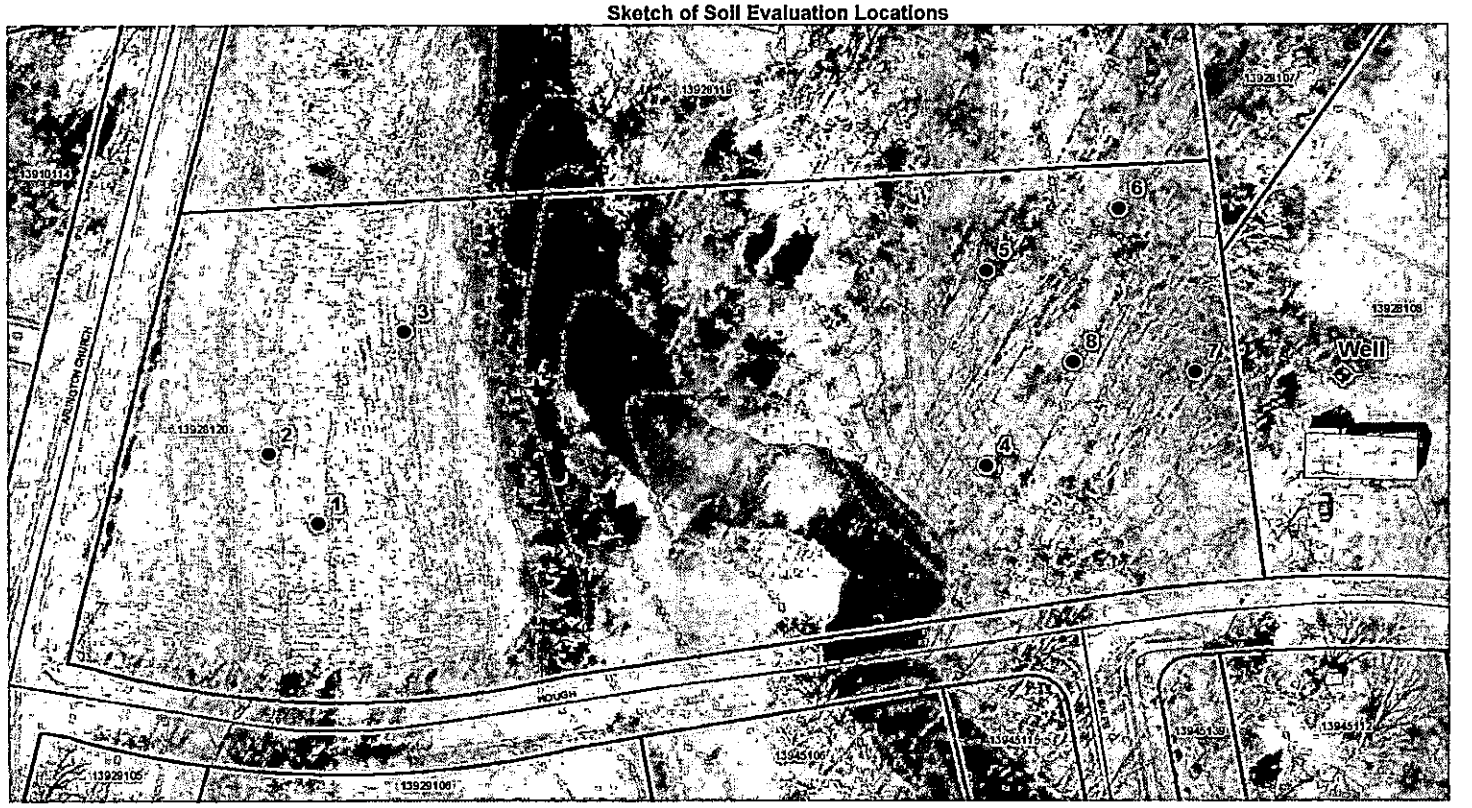
PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	b PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	General Comments	Profile Class & LTAR	Maximum Trench Bottom Depth for 3' Wide Conventional Trench
Boring #7	R 2%	0 - 10	gr SL	SS SP FR SEXP	>42"	42	NA	NA	yellow brown mottles 15 - 48" saprolite inclusions 40 - 48"	PS IV 0.225	36"
		10 - 15	sbk SCL	S SP FR SEXP							
		15 - 40	sbk/abk C	S P FI SEXP							
		40 - 48	sbk SC	S P FI SEXP							
Boring #8	R 2%	0 - 8	gr SL	SS SP FR SEXP	>40"	40	NA	NA	yellow brown mottles 8 - 40" saprolite inclusions 24 - 42"	PS IV 0.225	30"
		8 - 42	sbk/abk C	S P FI SEXP							

COMMENTS:

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		mass-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				Sap-Saprolite
FP-Flood Plain		CL-Clay Loam		**Structure Prefixes**
D-Drainage Way		SCL-Sandy Clay Loam		w-weak
				m-moderate
		SiL-Silt Loam		s-strong
				f-fine
	IV	SC-Sandy Clay	0.4 - 0.1	m-medium
		SiC-Silty Clay		c-coarse
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	SS-Slightly Sticky	SEXP-Slightly Expansive
FR-Friable	S-Sticky	EXP-Expansive
FI-Firm	VS-Very Sticky	
VFI-Very Firm	NP-Non-Plastic	**Classification**
EFI-Extremely Firm	SP-Slightly Plastic	US-Unsuitable
	P-Plastic	PS-Provisionally Suitable
	VP-Very Plastic	S-Suitable
		NA-Not Applicable

Sketch of Soil Evaluation Locations



Copy for field

9611B #8578

3 NOV '16 AM 11:22

MECKLENBURG COUNTY
HEALTH DEPARTMENT

APPLICATION FOR A RESIDENTIAL SITE IMPROVEMENT PERMIT/ CONSTRUCTION AUTHORIZATION FOR AN ON-SITE WASTEWATER SYSTEM, NEW WELL INSTALLATION, OR REPAIR OF EXISTING WELL

1. SEPTIC / TYPE APPLICATION: ○ N/A ☑ NEW SYSTEM ○ ALTERATION ○ REPAIR ○ MODIFIED PLOT PLAN

2. WELL / TYPE APPLICATION: ○ N/A ○ NEW WELL ○ MAJOR REPAIR ○ ABANDONMENT

3. JOB LOCATION INFORMATION:
TAX PARCEL NUMBER: 139-281-20
STREET ADDRESS: 6012 ARLINGTON CHURCH RD
CITY: CHARLOTTE
STATE: NC ZIP: 28227
SUBDIVISION NAME: ARLINGTON ACRES
LOT #: 4 LOT SIZE (acres): 5.01
TOWNSHIP:
○ MECKLENBURG ○ CORNELIUS ○ HUNTERSVILLE
○ DAVIDSON ○ CHARLOTTE ○ PINEVILLE
○ MATTHEWS ○ MINT HILL

4. BUILDING INFORMATION:
BUILDING TYPE:
○ SINGLE MOBILE HOME ○ MODULAR HOME
○ DOUBLE WIDE ○ MULTIPLE FAMILY
☑ HOUSE ○ OTHER _____
HEATED SQUARE FOOTAGE: 2800
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 3
FOUNDATION TYPE:
○ CONCRETE SLAB ○ BASEMENT WITH PLUMBING
☑ CRAWL SPACE ○ BASEMENT WITH NO PLUMBING

5. IF PLANNING TO EXPAND OR ALTER THE EXISTING SEPTIC 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 ○ PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER _____

7. PROPOSED USE OF WELL: ☑ N/A ○ IRRIGATION ○ POTABLE (DRINKING WATER) ○ OTHER _____

8. PLEASE INDICATE AND RANK DESIRED SEPTIC SYSTEM TYPE(S) IN ORDER OF PREFERENCE *(1-MOST DESIRED 5-LEAST DESIRED)*:
☐ N/A ☐ ANY TYPE ☑ 1 CONVENTIONAL ☑ 2 ACCEPTED ☐ INNOVATIVE ☐ ALTERNATIVE ☐ OTHER _____

8A. RANK: 1 2 3 4 ___

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
CHEMICAL/PETROLEUM STORAGE TANKS	○ YES ☑ NO	KNOWN UNDERGROUND CONTAMINATION	○ YES ☑ NO
WASTE STORAGE	○ YES ☑ NO	GROUNDWATER USE RESTRICTIONS/VARIANCES	○ YES ☑ NO

10. WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____ ☑ UNKNOWN

11. WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY? DEC, 1 2016 ☐ N/A

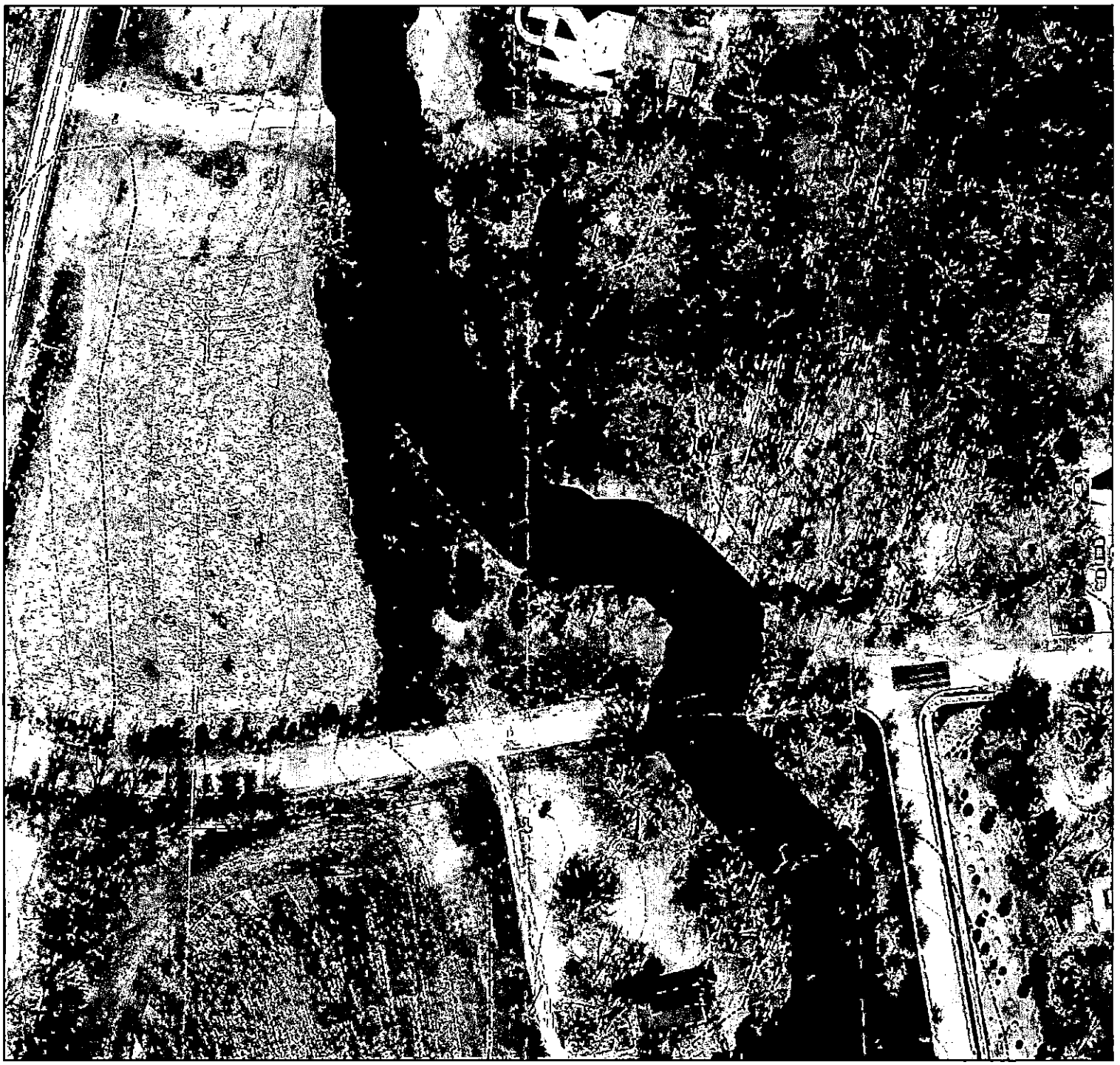
12. PROPERTY OWNER:
NAME: RICH FERRETTI
ADDRESS: 10023 EDWARDS PL.
CITY: MINT HILL
STATE: NC ZIP: 28227
WORK PHONE: _____
MOBILE PHONE: 704-564-0807
FAX: 877-816-1003
E-MAIL: RICH@RICHFERRETTI.COM

13. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:
NAME: JEFF NEWTON
ADDRESS: 6012 HEMLOCK DR
CITY: INDIAN TRAIL
STATE: NC ZIP: 28079
WORK PHONE: _____
MOBILE PHONE: 704-651-3378
FAX: 704-628-0409
E-MAIL: JNEWTON@NEWTONCHR.COM

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

Revised on: 12/15/10

On-site Wastewater Improvement Permit Diagram



Mecklenburg County Health Department
Environmental Health - Groundwater and Wastewater Services

Permit #:
PID #:
File #:

Authorized Agent: _____ Date: _____

Owner/ Legal Agent: _____ Date: _____

1 inch = 100 fe

5-106

6-88

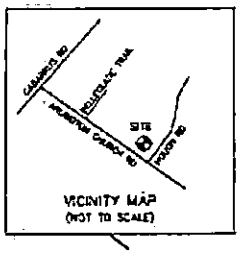
.225

4Br.

I CERTIFY THAT THIS MAP WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION PLAT RECORDED IN MAP BOOK 35, PAGE 379; THAT THE BOUNDARIES NOT SURVEYED ARE INDICATED AS DRAWN FROM INFORMATION AS SHOWN ON PLAT; THAT THE RATIO OF PRECISION OR POSITIONAL ACCURACY IS 1:10,000+; AND THAT THIS MAP MEETS THE REQUIREMENTS OF THE STANDARDS OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA (21 NCAC 56. 1600). THIS 1ST DAY OF NOVEMBER, 2016.

SIGNED _____
JOHN D. SKIDMORE III, NCPLS L-3837

NORTH CAROLINA PROFESSIONAL SEAL L-3837 LAND SURVEYOR JOHN D. SKIDMORE III



VICINITY MAP
(NOT TO SCALE)

ROLAND P. BELK & WIFE MARGIE H. BELK (NOW OR FORMERLY) DEED: 2095-31

RED BRANCH BAPTIST CHURCH CEMETERY (NOW OR FORMERLY) DEED: 2095-31

TRACT 3 ARLINGTON ACRES MAP BOOK 33 PAGE 379

TRACT 4
5.01 ACRE

S03°13'12"E 290.10'

AXLE FOUND @ 3.58' E

IRON PIN FOUND

IRON PIN FOUND

IRON PIN FOUND

50' REARYARD

EX. FIRE HYDRANT

C2

S82°40'12"W 456.20'

HOUGH ROAD
EXISTING 50' PUBLIC R/W

N88°24'45"E 632.53'

20' SIDEYARD

40' SIDEYARD

EXISTING POND

PROPOSED HOUSE

PROPOSED GARAGE

IRON PIN FOUND

PREFERRED SEPTIC AREA

60' SETBACK

PROPOSED DRIVE

C1

IRON PIN FOUND

MAG NAIL FOUND

IRON PIN FOUND

35'x35' SIGHT TRIANGLE

ARLINGTON CHURCH ROAD
EXISTING 60' PUBLIC R/W

N14°49'46"E 319.61'

SIGN EASEMENT

EX. FIRE HYDRANT

10'x70' SIGHT TRIANGLE

IRON PIN SET

LEGEND
OU = OVERHEAD UTILITY
R/W = RIGHT OF WAY
● = IRON PIN
○ = IRON PIPE
● = COMPUTED POINT
= UTILITY POLE
□ = CONCRETE MONUMENT
Ⓢ = SANITARY SEWER MANHOLE
Ⓓ = STORM DRAIN MANHOLE
PROPERTY LINE
ADJOINER LINE
RIGHT OF WAY
SEWER EASEMENT
STORM DRAIN EASEMENT
SETBACK LINE

NOTES:
- AREA BY COORDINATE METHOD
- THIS IS A SURVEY OF AN EXISTING PARCEL OR PARCELS OF LAND AND DOES NOT CREATE A NEW STREET OR CHANGE AN EXISTING STREET.
- THIS MAP IS NOT INTENDED TO MEET G.S. 47-30 AND IS NOT TO BE RECORDED AS A PLAT.
- SUBJECT PROPERTY MAY BE SUBJECT TO RECORDED OR UNRECORDED EASEMENTS, RIGHT OF WAYS, SETBACKS AND/OR RESTRICTIVE COVENANTS NOT SHOWN HEREON

LINE TABLE		
LINE	LENGTH	BEARING
L1	65.29'	S75°15'35"E
L2	43.94'	S30°29'33"E

CURVE TABLE				
CURVE	LENGTH	RADIUS	DIRECTION	CHORD
C1	158.47'	417.11'	N86°10'37"W	157.52'
C2	57.91'	876.15'	S84°17'20"W	57.90'

GRAPHIC SCALE
100 0 50 100
(IN FEET)
1 inch = 100 ft.

PLOT PLAN

TRACT 4
ARLINGTON ACRES – MAP 1
MINT HILL, MECKLENBURG COUNTY, NORTH CAROLINA

TO BE DEEDED TO:
MARK ALEXANDER and wife, MARIANNE ALEXANDER

SURVEY DATE 10/28/2016 | D.B. | PG.
TAX No. 139-281-20 | DRAWN BY: MDB
MAP BOOK 35 PAGE 379 | DRAWING 16-325.DWG

SKIDMORE SURVEYING, INC.
LICENSE NO. C-1876
5347 HIGHWAY 74 WEST
MONROE, N.C.
704-289-4855

Copy for field

I CERTIFY THAT THIS MAP WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION PLAT RECORDED IN MAP BOOK 35, PAGE 379; THAT THE BOUNDARIES NOT SURVEYED ARE INDICATED AS DRAWN FROM INFORMATION AS SHOWN ON PLAT; THAT THE RATIO OF PRECISION OR POSITIONAL ACCURACY IS 1:10,000+; AND THAT THIS MAP MEETS THE REQUIREMENTS OF THE STANDARDS OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA (21 NCAC 56. 1600). THIS 1ST DAY OF NOVEMBER, 2016.

SIGNED _____
JOHN D. SKIDMORE III, NCPLS L-3837

NORTH CAROLINA PROFESSIONAL SEAL L-3837 LAND SURVEYOR JOHN D. SKIDMORE III

VICINITY MAP
(NOT TO SCALE)

ROLAND P. BELK & WIFE MARCIE H. BELK (NOW OR FORMERLY) DEED: 2085-31

RED BRANCH BAPTIST CHURCH CEMETERY (NOW OR FORMERLY) DEED: 2095-31

TRACT 3 ARLINGTON ACRES MAP BOOK 35 PAGE 379

TRACT 4
5.01 ACRE

S03°13'12"E 290.10'

AXLE FOUND @ 3.56' W

IRON PIN FOUND

IRON PIN FOUND

IRON PIN FOUND

EX. FIRE HYDRANT

50' REARYARD

632.53'

N88°24'45"E

20' SIDEYARD

40' SIDEYARD

EXISTING POND

S82°40'12"W 456.20'

HOUGH ROAD
EXISTING 60' PUBLIC R/W

PROPOSED HOUSE

PROPOSED CURBCUT

IRON PIN FOUND

PROPOSED DRIVE

PREFERRED SEPTIC AREA

50' SETBACK

IRON PIN FOUND

MAG NAIL FOUND

IRON PIN FOUND

35'x35' SIGHT TRIANGLE

SIGN EASEMENT

C1

C2

L1

L2

EX. FIRE HYDRANT

10'x70' SIGHT TRIANGLE

IRON PIN SET

ARLINGTON CHURCH ROAD
EXISTING 60' PUBLIC R/W

N14°49'46"E 319.61'

LEGEND
OU = OVERHEAD UTILITY
R/W = RIGHT OF WAY
● = IRON PIN
○ = IRON PIPE
⊕ = COMPUTED POINT
= UTILITY POLE
□ = CONCRETE MONUMENT
Ⓢ = SANITARY SEWER MANHOLE
Ⓓ = STORM DRAIN MANHOLE
PROPERTY LINE
ADJOINER LINE
RIGHT OF WAY
SEWER EASEMENT
STORM DRAIN EASEMENT
SETBACK LINE

NOTES:
- AREA BY COORDINATE METHOD
- THIS IS A SURVEY OF AN EXISTING PARCEL OR PARCELS OF LAND AND DOES NOT CREATE A NEW STREET OR CHANGE AN EXISTING STREET
- THIS MAP IS NOT INTENDED TO MEET G.S. 47-30 AND IS NOT TO BE RECORDED AS A PLAT
- SUBJECT PROPERTY MAY BE SUBJECT TO RECORDED OR UNRECORDED EASEMENTS, RIGHT OF WAYS, SETBACKS AND/OR RESTRICTIVE COVENANTS NOT SHOWN HEREON

LINE TABLE		
LINE	LENGTH	BEARING
L1	65.29'	S75°15'35"E
L2	43.94'	S30°29'33"E

CURVE TABLE				
CURVE	LENGTH	RADIUS	DIRECTION	CHORD
C1	158.47'	417.11'	N85°10'37"W	157.52'
C2	57.91'	876.15'	S84°17'20"W	57.90'

GRAPHIC SCALE
100 0 50 100
(IN FEET)
1 inch = 100 ft.

PLOT PLAN

TRACT 4
ARLINGTON ACRES – MAP 1
MINT HILL, MECKLENBURG COUNTY, NORTH CAROLINA

TO BE DEEDED TO:
MARK ALEXANDER and wife, MARIANNE ALEXANDER

SURVEY DATE 10/28/2016 | D.B. | PG.
TAX No. 139-251-20 | DRAWN BY: MDB
MAP BOOK 35 PAGE 379 | DRAWING 16-325.DWG

SKIDMORE SURVEYING, INC.
LICENSE NO. C-1876
5347 HIGHWAY 74 WEST
MONROE, N.C.
704-289-4855

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 #: **30008578** GWS File #: **9611B** Tax Parcel #: **139-281-20**

- 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):** 11/28/2021

Type of Installation: Residential - New System Lot Number: 4

Structure Type: HOUSE Size (ft^2): 2800 # Bedrooms: 4 # Occupants: 3

Building Foundation: Crawl Space Water Supply: Municipal

II. Initial System Type: Pump to Accepted **System Classification:** IIIb

Initial System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	.225	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	1000
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1600	Total Trench Length (ft):	533
Maximum Trench Depth (in):	30	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

III. Repair System Type: Pump to Accepted **System Classification:** IIIb

Repair System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	.225	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	1000
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1600	Total Trench Length (ft):	533
Maximum Trench Depth (in):	30	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

IV. Permit Conditions/Comments:

(Please See the Following Page for Permit Conditions.)

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, 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 a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: April Bumgarner

Signature: April Bumgarner

Date Issued: 11/28/2016

Owner/Legal Agent: _____
Print Name

Signature: _____

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 #: **30008578** GWS File #: **9611B**

IV. Permit Conditions/Comments:

- This type of septic system requires an inspection once every 5 years by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- This type of repair system requires periodic inspections by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- All waterlines must be located a minimum of 10 ft. from any part of the septic system.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.
- The septic system shall be located at least 10 feet from any foundation drain.

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, 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 a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: April Bumgarner

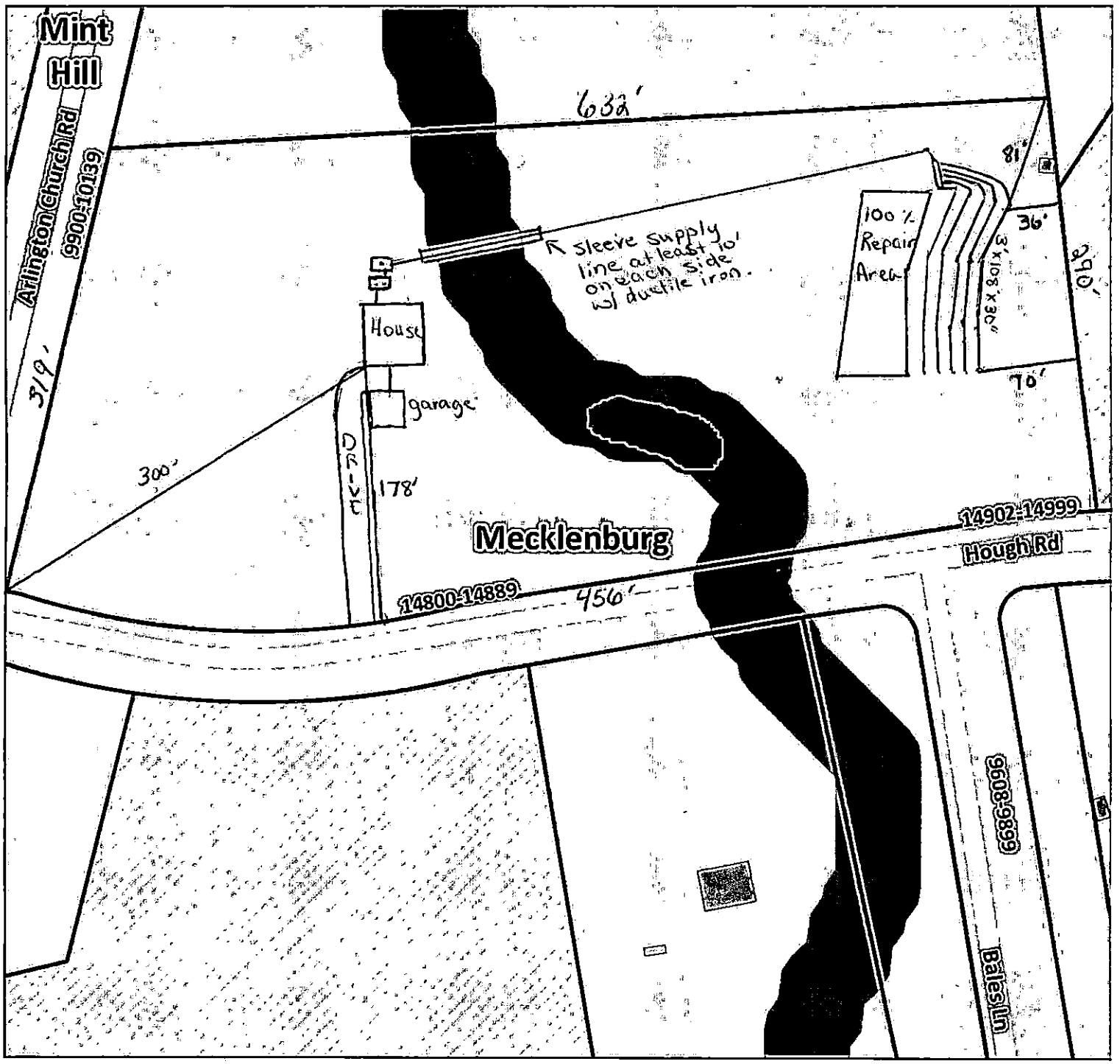
Signature: April Bumgarner

Date Issued: 11/28/2016

Owner/Legal Agent: _____
Print Name

Signature: _____

On-site Wastewater Improvement Permit Diagram



Mecklenburg County Health Department
Environmental Health - Groundwater and Wastewater Services

Permit #:8578
PID #:139-281-20
File #:9611B

Authorized Agent: April Bumgarner Date: 11-28-16

Owner/Legal Agent: _____ Date: _____

1 inch = 100 fe

Ellis, Loretta

From: Ellis, Loretta
Sent: Friday, August 11, 2017 12:19 PM
To: 'Jeff Newton'
Subject: ARLINGTON CHURCH ROAD
Attachments: Color0016.pdf

Please sign the Improvement Permit and Drawing for ARLINGTON CHURCH RD, and please email the signed copy to me at WELLREG@MECKLENBURGCOUNTYNC.GOV, thank you.

Loretta W. Ellis
Administrative Assistant III
Environmental Health Services
Mecklenburg County Health Department
Office 980-314-1680
Fax 704-336-6894
Email Loretta.Ellis@MecklenburgCountyNC.gov
http://Groundwater.charmeck.org
http://Meckpools.charmeck.org

CONFIDENTIALITY NOTICE: This message and any attachments included are from the Mecklenburg County Health Department and are for sole use by the intended recipient(s). The information contained herein may include confidential or privileged information. Unauthorized review, forwarding, printing, copying, distributing, or using such information is strictly prohibited and may be unlawful. If you received this message in error, or have reason to believe you are not authorized to receive it, please contact the sender by reply email and destroy all copies of the original message. Thank you!

Groundwater & Wastewater Services: Septic Project File & D

GWS File #:	9611B
WASPS App #:	8578
Primary ES assigned to project:	April Bumgarner
Secondary ES assigned to project:	
Project Type:	New System
Site Evaluation Information: .1939(a)(1) - Topography and Landscape Position Recorded?	Yes
Site Evaluation Information: .1940(a-g) - Slope % Recorded?	Yes
Site Evaluation Information: .1939(a)(2) - Texture Class Recorded?	Yes
Site Evaluation Information: .1939(a)(2) - Structure Type Recorded?	Yes
Site Evaluation Information: .1939 (a)(2) - Consistence Recorded?	Yes
Site Evaluation Information: .1939(a)(2) - Mineralogy Recorded?	Yes
Site Evaluation Information: .1939(a)(3) - Soil Wetness Condition Recorded?	Yes
Site Evaluation Information: .1939(a)(4) - Soil Depth to Rock or Parent Material Recorded when Encountered?	Yes
Site Evaluation Information: .1939(a)(5) - Depth to Restrictive Horizons Recorded when Encountered?	N/A
Site Evaluation Information: .1939(a)(6) - Sufficient Available Space Recorded?	Yes
Site Evaluation Information: .1937(m) - Are the Profile Locations Shown?	Yes
Site Evaluation Information: .1939(a) - Are the S/PS Profiles in system & in repair area?	Yes
Site Evaluation Information: .1939(d), .1955, .1956, .1957 - LTAR	Yes
Improvement Permit/Construction Authorization: .1937(g), 130A-336(a) - Proposed System Type stated - Initial	Yes
Improvement Permit/Construction Authorization: .1945(b) - Proposed System Type stated - Repair	Yes
Improvement Permit/Construction Authorization: 130A-336(a)(3) - System location identifiable by setbacks - Initial	Yes
Improvement Permit/Construction Authorization: .1937(g), .1945(b) - System components shown - Initial	Yes
Information Permit/Construction Authorization: .1945(b) - Repair area shown	Yes
Improvement Permit/Construction Authorization: .1937(f)(g) - Does System design match facility, flow & WW characteristics?	Yes
Improvement Permit/Construction Authorization: .1937(f)(g) - Is System design consistent with soil/site conditions?	Yes
Improvement Permit/Construction Authorization: .1937(f)(g) - Is the System located in the approved area?	Yes
Improvement Permit/Construction Authorization: 130A-336(a) - Number of Bedrooms, employees, seats, etc. indicated?	Yes
Improvement Permit/Construction Authorization: .1937 (g) - Trench depth correct?	Yes
Improvement Permit/Construction Authorization: .1937(g) - Trench width correct?	Yes
Improvement Permit/Construction Authorization: .19379(g) - Trench length correct?	Yes
Improvement Permit/Construction Authorization: 130A-336(a)(1) - Proposed/existing well shown?	N/A

Improvement Permit/Construction Authorization: 130A-336(a)(1) - Property line lengths shown?	No
Improvement Permit/Construction Authorization: 130A-336(a) - Facility/appurtenance setbacks shown from fixed points?	Yes
Corrections/modifications needed?	Yes
Comments:	Insert property line lengths.
IA issued date:	
OP Issued date:	
Review performed by:	Jeremy Michael
Date performed:	11/28/2016

Created at 11/28/2016 3:47 PM by Michael, Jeremy
Last modified at 11/28/2016 3:47 PM by Michael, Jeremy

Close