FILE NUMBER: 66065 cc 412580 Revised On: August 31, 2007 APPLICATION NUMBER: 941

SEPTIC FEE: 400 DATE: 6/1/08

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: _____ DATE: _____

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: 019-321-07
STREET ADDRESS: 12000 Everett Keith Rd
CITY: Huntersville NC
STATE: NC **ZIP:** 28078
SUBDIVISION NAME: NONE
LOT #: **LOT SIZE (acres):** 5 acres
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:
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:	X	____	____	____	____	____

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: Charlie & Mary Primm
ADDRESS: 455 Ox Creek Rd.
CITY: Weaverville
STATE: ZIP: 28787
HOME PHONE: WORK PHONE:
MOBILE PHONE: FAX:

11. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:

NAME: Larry Caudill
ADDRESS: 1121 Woodhall Drive
CITY: Huntersville, NC 28078
STATE: NC ZIP:
HOME PHONE: WORK PHONE: 704-607-5048
MOBILE PHONE: 704-607-5048 FAX:

12. WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 1975
13 WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY? August 2008

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.

Larry Caudill 6-2-8
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.

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

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

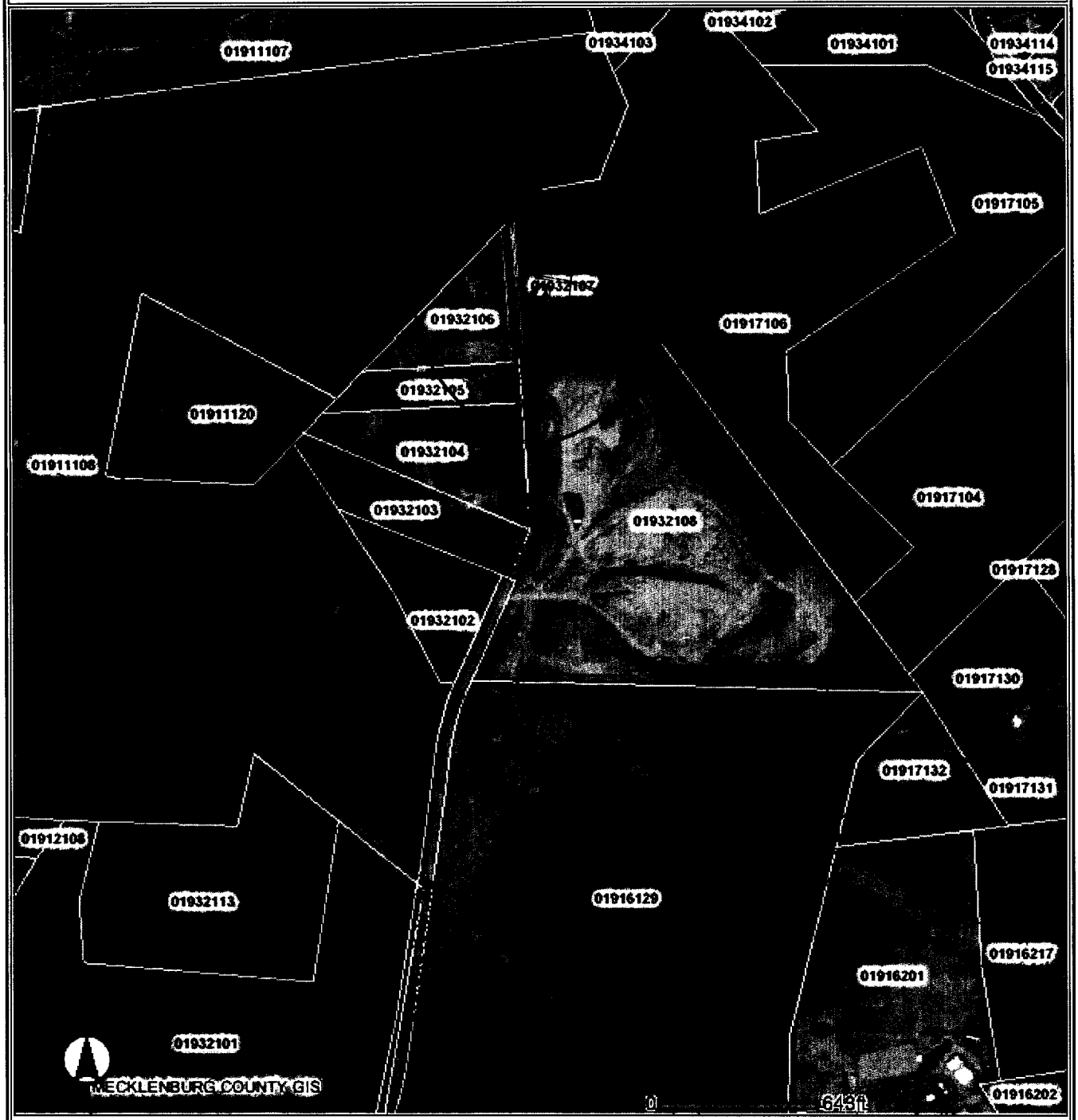
MECKLENBURG COUNTY-GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST., SUITE 211, CHARLOTTE, NC 28202 PHONE: (704) 336-5103 FAX: (704) 336-6894

Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Thu Jun 12 07:45:52 EDT 2008



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 aformentioned public primary information sources should be consulted for verification. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.

MECKLENBURG COUNTY
Health Department

July 25, 2006

Charlie & Mary Primm
455 Ox Creek Road
Weaverville, NC 28787

Re: Application for improvement permit for
Property Site: 12000 Everette Keith Road
Health Department file number: **6606B**

Dear Property Owner or Owner's Agent:

The Mecklenburg County Health Department, Environmental Health Division on July 24, 2006 evaluated the above-referenced property at the site designated on the site plan that accompanied your improvement permit application. According to your application the site is to serve a three bedroom house, with a daily design flow of 360 gallons per day. The evaluation was done in accordance with the laws and rules governing wastewater systems in North Carolina General Statute 130A-333 and related statutes and Title 15A, Subchapter 18A, of the North Carolina Administrative Code, Rule .1900 and related rules.

Based on the criteria set out in Title 15A, Subchapter 18A, of the North Carolina Administrative Code, Rules .1940 through .1948, the evaluation indicated that the site is **UNSUITABLE** for a ground absorption sewage system. Therefore, your request for an improvement permit is **DENIED.** A copy of the site evaluation is enclosed. The site is unsuitable based on the following:

- ☐ Unsuitable soil topography and/or landscape position (Rule .1940)
- ☐ Unsuitable soil characteristics (structure or clay mineralogy) (Rule .1941)
- ☒ Unsuitable soil wetness condition (Rule .1942)
- ☒ Unsuitable soil depth (Rule .1943)
- ☐ Presence of restrictive horizon (Rule .1944)
- ☒ Insufficient space for septic system and repair area (Rule .1945)
- ☐ Unsuitable for meeting required setbacks (Rule .1950)
- ☐ Other (Rule .1946)

These severe soil or site limitations could cause premature system failure, leading to the discharge of untreated sewage on the ground surface, into surface waters, directly to ground water or inside your structure.

The site evaluation included consideration of possible site modifications, and modified, innovative or alternative systems. However, the Health Department has determined that none of the above options will overcome the severe conditions on this site. A possible option might be a system designed to dispose of sewage to another area of suitable soil or offsite to additional property.

For the reasons set out above, the property is currently classified **UNSUITABLE,** and an improvement permit shall not be issued for this site in accordance with Rule .1948 (c).

However, the site classified as **UNSUITABLE** may be classified as **PROVISIONALLY SUITABLE** if written documentation is provided that meets the requirements of Rule .1948(d). A copy of this rule is enclosed. You may hire a consultant to assist you if you wish to try to develop a plan under which your site could be reclassified as **PROVISIONALLY SUITABLE.**

You have a right to an informal review of this decision. You may request an informal review by the soil scientist or environmental health supervisor at the local health department. You may also request an informal review by the N. C. Department of Environment and Natural Resources regional soil specialist. A request for informal review must be made in writing to the local health department.

You also have a right to a formal appeal of this decision. To pursue a formal appeal, you must file a petition for a contested case hearing with the Office of Administrative Hearings, 6714 Mail Center, Raleigh, NC 27699-6714. To get a copy of a petition form, you may write the Office of Administrative Hearings or call the office at (919) 733-0926 or from the OAH web site at www.oah.state.nc.us/form.htm. The petition for a contested case hearing must be filed in accordance with the provision of North Carolina General Statutes 130A-24 and 150B-23 and all other applicable provisions of Chapter 150B. N. C. General Statue 130A-335(g) provides that your hearing would be held in the county where your property is located.

Please note: If you wish to pursue a formal appeal, you must file the petition form with the Office of Administrative Hearings **WITHIN 30 DAYS OF THE DATE OF THIS LETTER.** The date of this letter is July 25, 2006. Meeting the 30-day deadline is critical to your right to a formal appeal. Beginning a formal appeal within 30 days will not interfere with any informal review that you might request. Do not wait for the outcome of any informal review if you wish to file a formal appeal.

If you file a petition for a contested case hearing with the Office of Administrative Hearings, you are required by law (N.C. General Statute 150B-23) to send a copy of your petition to the North Carolina Department of Environment and Natural Resources. Send the copy to: Office of General Counsel, N. C. Department of Environment and Natural Resources, 1601 Mail Service Center, Raleigh, NC. 27699-1601. Do **NOT** send the copy of the petition to your local health department. Sending a copy of your petition to the local health department will **NOT** satisfy the legal requirement in N.C. General Statute 150B-23 that you send a copy to the Office of General Counsel, NCDENR.

You may call or write the local health department if you need any additional information or assistance.

Sincerely,

Jeremy Michelone, R.S.

Jeremy Michelone. R.S.
Authorized Agent - DENR

Encl: (2)

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

Sheet: 1 of 2
Property ID: 019-321-07
Lot #:
File #: 6606B
AppID:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Charlie & Mary Primm
Applicant: Larry Caudell
Address: 455 Ox Creek Road, Weaverville, N. C. 28787
Date Evaluated: 6/11/2008
Proposed Facility: Residence Design Flow (.1949) 480gpd
Property Size: Approx. .25a inv.
Location of Site: 12000 Everette Keith 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 .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, 8	0-6	GR/SCL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48+	N/A	NONE	PS, IV
		6-37	SBK/C	FI/SEXP/S/P					.3GPD/FT^2
		37-48	SBK/SCL	FR/SEXP/SS/SP					
2	"	0-8	GR/SL	FR/SEXP/NS/NP	"	"	"	"	"
		8-42	SBK/C	FI/SEXP/S/P					
		42-48	SBK/SCL	FR/SEXP/SS/SP					
3	LS, 15	0-8	GR/L	FR/SEXP/NS/NP	"	"	"	"	"
		8-48	SBK/C	FI/SEXP/S/P					
4	"	0-8	GR/CL	FR/SEXP/SS/SP	"	"	"	"	"
		8-48	SBK/C	FI/SEXP/S/P					
					SITE LTAR .3GPD/FT^2				

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	IIIb	IIIb
Site LTAR	0.3	0.3

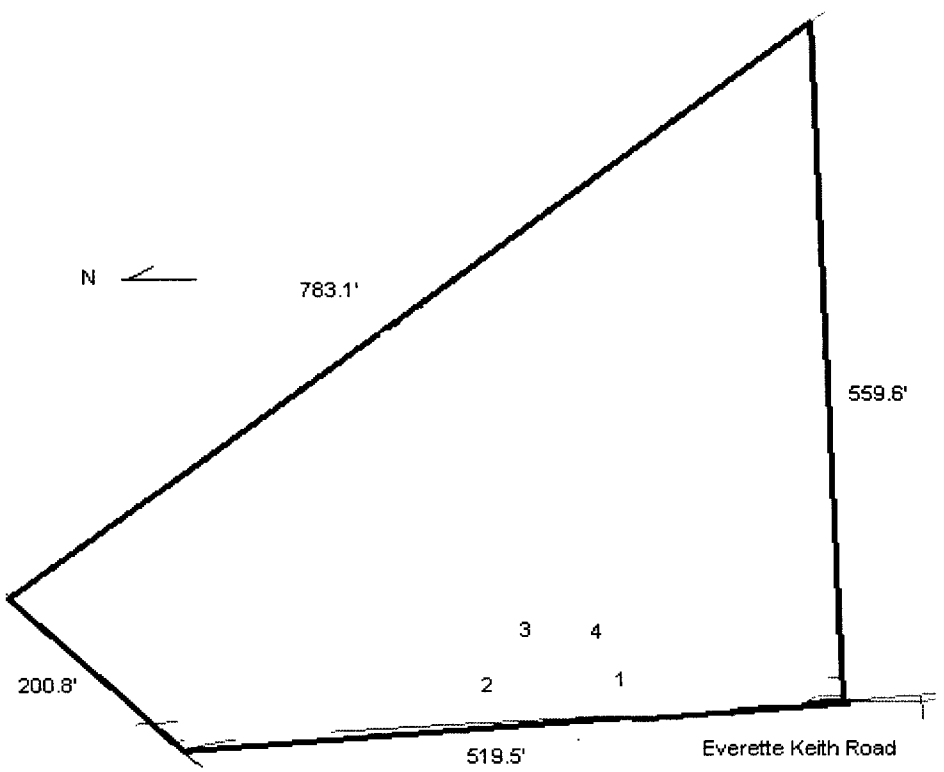
Other Factors (.1946):
Soil Evaluation By: W. R. Marlin, LSS, 6/12/2008,
Others Present: L.Caudell
Site Classification (.1948):
Site Evaluation By: PHILO WALKER RS 7/10/08
Others Present: L.Caudell

COMMENTS:
Not sure if 100% repair required

Landscape Position	Group	Texture	.1955 LTAR	Structure
R-Ridge	I	S-Sand	1.2 - 0.8	SG-Single Grain
SS-Shoulder Slope		LS-Loamy Sand		M-Massive
LS-Linear Slope				CR-Crumb
FS-Foot Slope	II	SL-Sandy Loam	0.8 - 0.6	GR-Granular
NS-Nose Slope		L-Loam		SBK-Subangular Blocky
HS-Head Slope				ABK-Angular Blocky
CC-Concave Slope	III	SI-Silt	0.6 - 0.3	PL-Platy
CV-Convex Slope		SICL-Silty Clay Loam		PR-Prismatic
T-Terrace				
FP-Flood Plain		CL-Clay Loam		
		SCL-Sandy Clay Loam		
	IV	SC-Sandy Clay	0.4 - 0.1	
		SIC-Silty Clay		
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	NS-Non-Sticky	SEXP-Slightly Expansive
FR-Friable	SS-Slightly Sticky	EXP-Expansive
FI-Firm	S-Sticky	
VFI-Very Firm	VS-Very Sticky	
EFI-Extremely Firm	NP-Non-Plastic	
	SP-Slightly Plastic	
	P-Plastic	
	VP-Very Plastic	

Sketch of Soil Evaluation Locations



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

Sheet: 1 of 2
Property ID: 019-321-07
Lot #:
File #: 6606B
AppID:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Charlie & Mary Primm
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		37-48	SBK/SCL	FR/SEXP/SS/SP					
2	"	0-8	GR/SL	FR/SEXP/NS/NP	"	"	"	"	"
		8-42	SBK/C	FI/SEXP/S/P					
		42-48	SBK/SCL	FR/SEXP/SS/SP					
3	LS, 15	0-8	GR/L	FR/SEXP/NS/NP	"	"	"	"	"
		8-48	SBK/C	FI/SEXP/S/P					
4	"	0-8	GR/CL	FR/SEXP/SS/SP	"	"	"	"	"
		8-48	SBK/C	FI/SEXP/S/P					
					SITE LTAR .3GPD/FT^2				

Description	Initial System	Repair System
Available Space (.1945)		
System Type(s)		
Site LTAR		

Other Factors (.1946):
Soil Evaluation By: W. R. Marlin, LSS, 6/12/2008, W. R. Marlin
Others Present: L.Caudell
Site Classification (.1948):
Site Evaluation By:
Others Present:

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 #: **30003723** GWS File #: **6606B** Tax Parcel #: **019-321-07**

- 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):** 7/17/2013

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

Structure Type: HOUSE Size (ft^2): 0 # Bedrooms: 4 # Occupants: 4

Building Foundation: Crawl Space Water Supply: Community

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

Initial System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1000
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1200	Total Trench Length (ft):	400
Maximum Trench Depth (in):	24	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

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

Repair System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1000
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1200	Total Trench Length (ft):	400
Maximum Trench Depth (in):	24	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 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 Owner/Legal Agent: _____
Print Name

Signature: Philo Walker PS Signature: _____

Date Issued: 7/17/2008

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 #: **30003723** GWS File #: **6606B**

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 Improvement Permit is being issued based on a supplemental soil investigation performed by staff from our office.
- All components of the septic system must be installed in accordance with the required setbacks listed on the corresponding plot plan.
- All components of the septic system must be located at least 100 ft. (50 ft. minimum) from all private wells.
- The supply pipe shall be installed with a minimum of 30" of compacted cover over the pipe or properly sleeved under areas that are subject to vehicular traffic.
- THE PROPOSED WELL SHALL BE LOCATED >500 FEET FROM THE ADJOINING LANDFIELD

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:

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- 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: 7/17/2008

Owner/Legal Agent: _____
Print Name

Signature: _____

File # 6606B
Tax # 019 321 07

Mecklenburg County, North Carolina

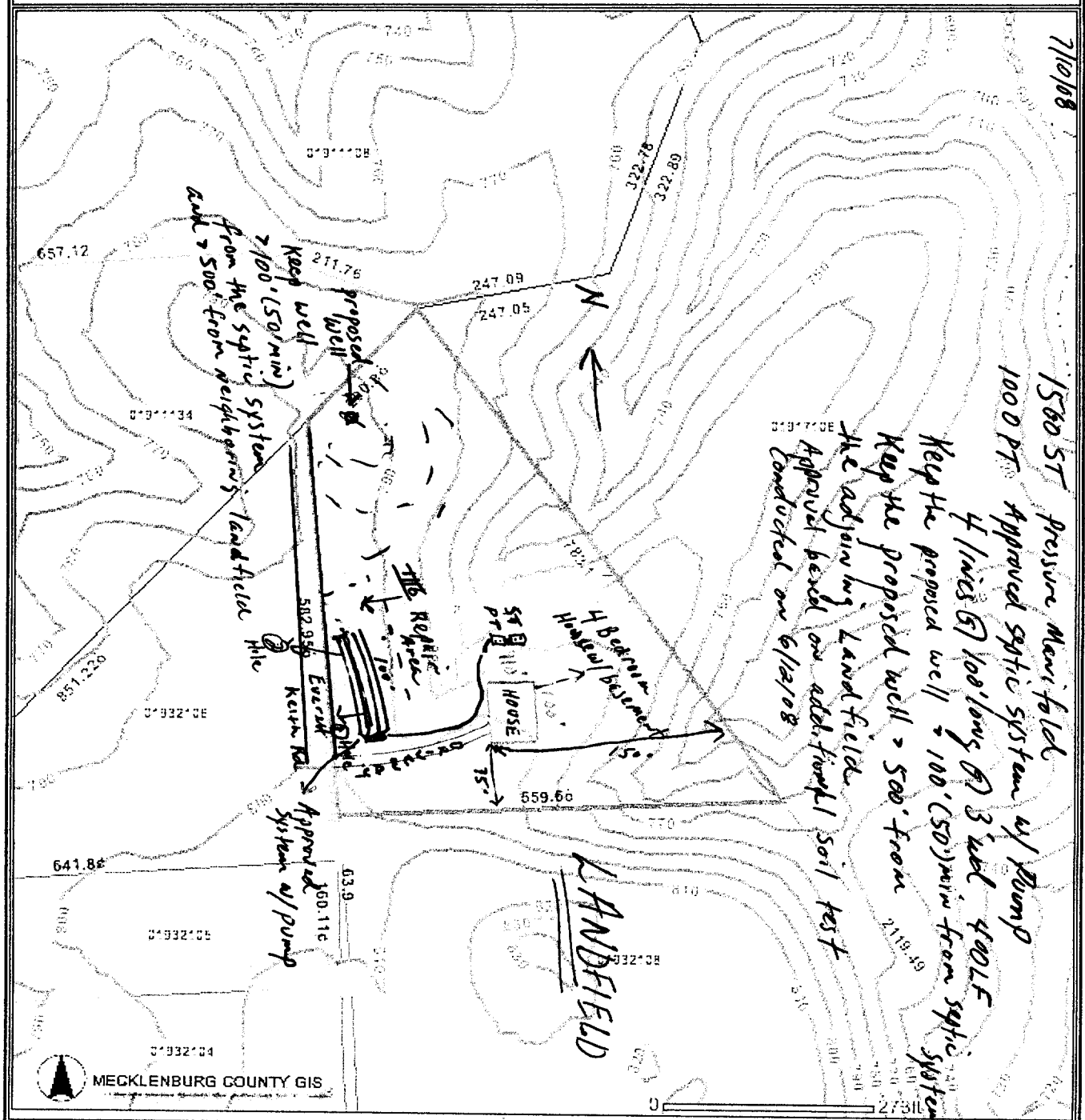
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Property Ownership Land Records Information System

~~6577B~~ 6606B

Date Printed: Wed May 17 16:28:51 EDT 2006

Everett Keith Lot



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.

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	06/02/08	**Amount:**	100.00
Receipt #:	57599	**Tendered:**	0.00
Check / Auth #:	VISA 412580	**Returned:**	0.00
Received By:	CRAIGGY		

Account Information

Account #:	200000
Contractor:	CAUDILL LARRY
Attn:	
Address:	1121 WOODALL DRIVE
Address:	
City/State/Zip:	HUNTERSVILLE, NC 28078

Item	Description	Permit#	Quantity	Unit Price	Total Price
0702	Optional Site Evaluations 12000 EVERETT KEITH RD/FILE 6606B		1	100.00	100.00

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

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

941

GWS – RES. APP 07/05

SEPTIC FEE: 200.00
DATE: 6/16/06
CRT [ ] Check # 10538 JKA

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

FILE # ~~45748~~ 66606B

WELL FEE: _____
DATE: _____
CRT [ ]

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 #: 01932107
STREET ADDRESS: 12000 Everett Keith Rd
CITY: Huntersville
STATE: NC **ZIP:** 28078
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: 3,100
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 2

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:

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: Charlie & Mary Primm
ADDRESS: 455 Ox Creek Rd
CITY: Weaverville
STATE: NC ZIP: 28787
HOME PHONE: WORK PHONE:
MOBILE PHONE: FAX:

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE: Buyer

NAME: Judith B. Brittain
ADDRESS: 1005 Brookline Dr
CITY: Huntersville
STATE: NC ZIP: 28078-0617
HOME PHONE: 704-947-9565 WORK PHONE:
MOBILE PHONE: 980-521-3619 FAX:

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 8/5/75
WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY? 8/4/06

*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.

Kari Howe – Agent for Primms 6/5/06
Owner's/Agent's Signature Date

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

*A Well Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application, acknowledges that the contents of same are true, and authorizes the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Owner's/Agent's Signature Date

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

Notify:
Judith B. Brittain – ~~704-992-1847~~ ~~1005~~ 980-521-3617 when going out

Mecklenburg County, North Carolina

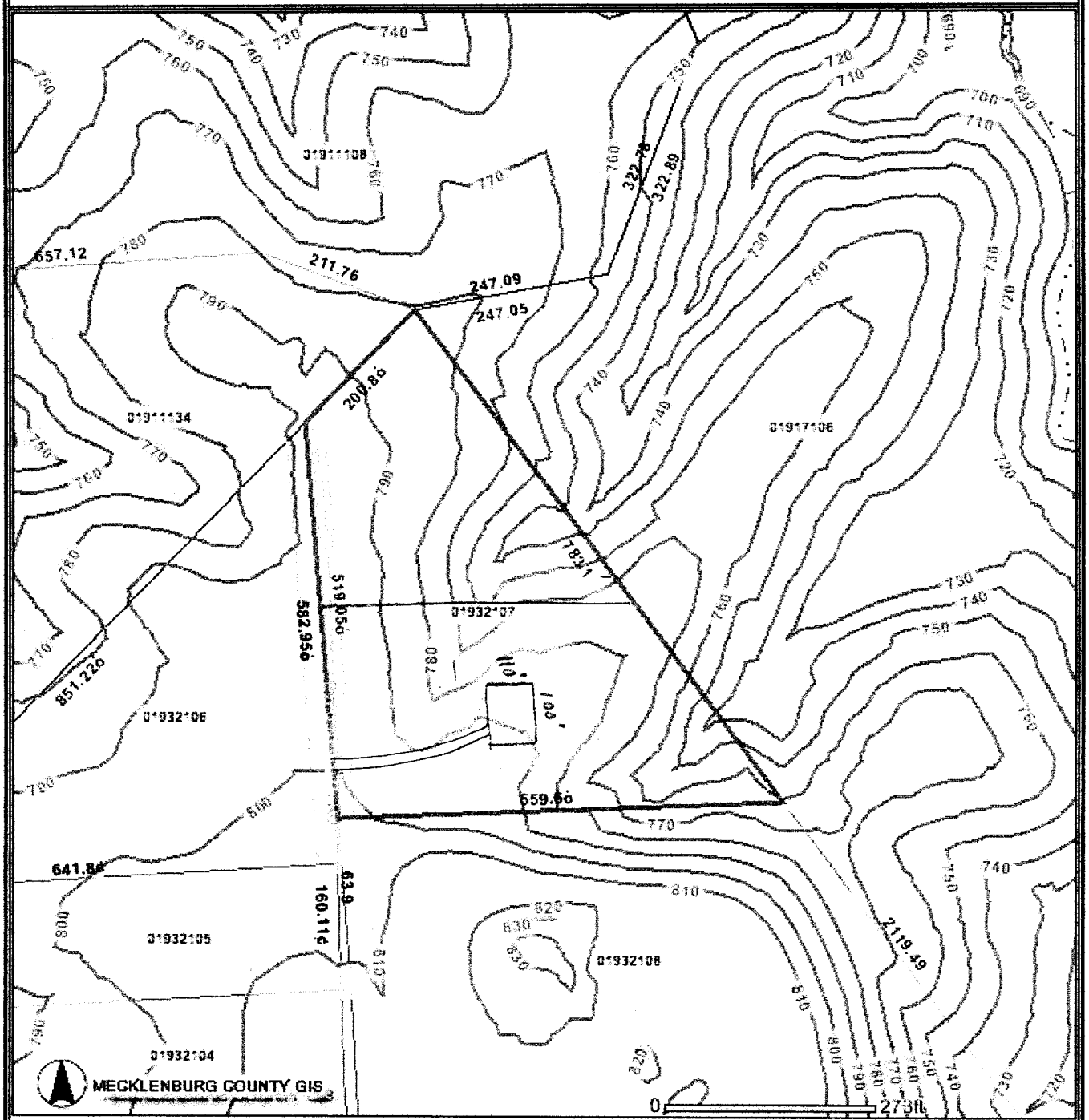
POLARIS

Property Ownership Land Records Information System

~~05TTB~~
06006B

Date Printed: Wed May 17 16:28:51 EDT 2006

Everett Keith Lot



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.

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

Sheet: 1 of 2
Property ID: PO 019-321-07
Lot #:
File #: 6606B
Code: 2

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Charlie & Mary Primm
Applicant: Judith B. Brittain
Address: 455 Ox Creek Road, Weaverville, N. C. 28787
Date Evaluated: 7/21/06
Proposed Facility: Residence
Design Flow (.1949): 360gpd
Property Size: .5a inv.
Location of Site: 12000 Everette Keith 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 .1941 Structure/ Texture	.1941 Consistence Mineralogy	OTHER PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	R, 8	0-7	GR/SL	FR/SEXP/NS/NP	>30" TO SOIL WETNESS	30	N/A	NONE	US, IV
		7-30	SBK/C	FI/SEXP/S/P					.25GPD/FT^2
2	"	0-8	GR/SL	FR/SEXP/NS/NP	>24" TO SOIL WETNESS	24	"	"	US, IV
		8-24	SBK/C	FI/SEXP/S/P					.125GPD/FT^2
3	"	0-3	GR/SL	VFR/SEXP/NS/NP	>18" TO SOIL WETNESS	18	"	"	US, IV
		3-7	SBK/SCL	FR/SEXP/NS/NP					.1GPD/FT^2
		7-18	SBK/C	FI/SEXP/S/P					
4	"	0-4	GR/SL	VFR/SEXP/NS/NP	>24" TO SOIL WETNESS	24	"		"
		4-24	SBK/SC	FI/SEXP/S/P					

Description	Initial System	Repair System
Available Space (.1945)	US	US
System Type(s)		
Site LTAR	.25GPD/FT^2	.25GPD/FT^2

Other Factors (.1946):
Site Classification (.1948): UNSUITABLE
Evaluated By: W. R. Marlin, LSS, 7/24/2006, W. R. Marlin
Others Present:

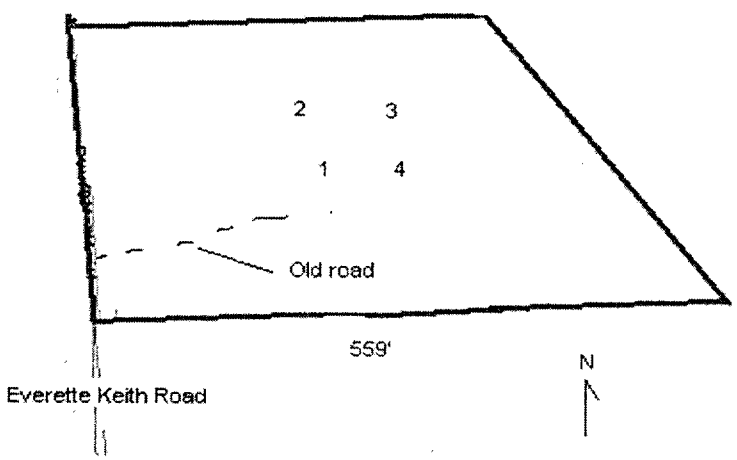
COMMENTS:

100% repair, recommend additional investigation with pits before any permit would be issued

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



SOIL INVESTIGATION REPORT

Date of Investigation July 16 1975 APT NO. 9679

Owner Chester Phillip Pamm

Location of Property Everette Keith Rd. Co. Rd 2458

Soil Suitability Ratings TCN P.O. 019-132-02

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Cecil	Wilkes		
2. Soil Slope	Acceptable 4-10%	unsuitable >20%		
3. Soil Depth	[illegible] >40"	[illegible] <20"		
4. Soil Texture	[illegible]	[illegible]		
5. Soil Structure	[illegible]	[illegible]		
6. Restrictive Horizons	N.A.	N.A.		
7. Soil Drainage	[illegible]	[illegible]		
8. Soil Permeability (Percolation Rate)	[illegible]	unsuitable >200 min/in		
9. Other	N.A.	N.A.		
10. Overall Rating	[illegible]	unsuitable		

Recommendations Based on this investigation, the lot is conditionally recommended for installation of a septic tank system. System design should be based on a percolation rate of 60 min/in and should be placed in the area of Cecil soils

See diagram on back

C. Edward Cusamano
Soil Scientist

3/18/75
EHD 539



12000 EVERETTE KEITH RD

01932107

1/10/2008

duponbj

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

Groundwater & Wastewater Services
Septic Project File & Data Review Worksheet

GWS File #: 6606B WASPS App #: 941

Primary ES assigned to project: Jeremy Nicholson

Secondary ES assigned to project: Phil Wentzel

Project Type: New System [X] Alteration [ ] Repair [ ] Modified Plot Plan [ ]

I. File Review:

Rule or Law	Permit Application			
.1937(d)	Is the Application complete	Yes [X]	No [ ]	N/A [ ]
.1937(d)	Is there a Site plan/Plat with application	Yes [X]	No [ ]	N/A [ ]
.1937(d)	Is the Facility shown?	Yes [X]	No [ ]	N/A [ ]
.1937(d)	Are appurtenances shown	Yes [X]	No [ ]	N/A [ ]
	Site Evaluation Information			
.1939 (a)(1)	Topography and Landscape Position Recorded?	Yes [X]	No [ ]	N/A [ ]
.1940 (a-g)	Slope % Recorded?	Yes [X]	No [ ]	N/A [ ]
.1939 (a)(2)	Texture Class Recorded?	Yes [X]	No [ ]	N/A [ ]
.1939 (a)(2)	Structure type Recorded?	Yes [X]	No [ ]	N/A [ ]
.1939 (a)(2)	Consistence Recorded?	Yes [X]	No [ ]	N/A [ ]
.1939 (a)(2)	Mineralogy Recorded?	Yes [X]	No [ ]	N/A [ ]
.1939 (a)(3)	Soil Wetness Condition Recorded?	Yes [X]	No [ ]	N/A [ ]
.1939 (a)(4)	Soil Depth to Rock or Parent Material Recorded When Encountered	Yes [ ]	No [ ]	N/A [X]
.1939 (a)(5)	Depth to Restrictive Horizons Recorded When Encountered?	Yes [ ]	No [ ]	N/A [X]
.1939 (a)(6)	Sufficient Available Space Recorded?	Yes [X]	No [ ]	N/A [ ]
.1937(m)	Are the Profile Locations Shown?	[X]		
.1939(a)	Are the S/PS Profiles in system & in repair area?	Yes [X]	No [ ]	N/A [ ]
& .1945(b)	Number of auger borings made: 4 Were sufficient auger borings made?	Yes [X]	No [ ]	N/A [ ]
.1939(d), .1955, .1956, .1957	LTAR 0.3	Yes [ ]	No [ ]	N/A [ ]
	Improvement Permit/Construction Authorization			
.1937(g) 130A-336(a)	Proposed System Type stated-Initial	Yes [X]	No [ ]	N/A [ ]
.1945(b)	Proposed System Type stated-Repair	Yes [X]	No [ ]	N/A [ ]
130A-336 (a)(3)	System location identifiable by setbacks - Initial	Yes [X]	No [ ]	N/A [ ]
.1937(g) .1945(b)	System components shown -- Initial	Yes [X]	No [ ]	N/A [ ]
.1945(b)	Repair area shown	Yes [X]	No [ ]	N/A [ ]
.1937 (f)(g)	Does System design match facility, flow & WWcharacteristics?	Yes [X]	No [ ]	N/A [ ]
.1937 (f)(g)	Is System design consistent with soil/site conditions?	Yes [X]	No [ ]	N/A [ ]
.1937 (f)(g)	Is the System located in the approved area?	Yes [X]	No [ ]	N/A [ ]
130A-336(a)	Is the Design flow (gpd) indicated? 480	Yes [X]	No [ ]	N/A [ ]

130A-336(a)	Number of Bedrooms, employees, seats, etc. indicated?	Yes [X]	No [ ]	N/A [ ]
.1937(g)	Trench depth indicated?	Yes [X]	No [ ]	N/A [ ]
.1937(g)	Trench width indicated?	Yes [X]	No [ ]	N/A [ ]
.1937(g)	Trench length indicated?	Yes [X]	No [ ]	N/A [ ]
130A-336(a)(1)	Proposed/existing well shown?	Yes [X]	No [ ]	N/A [ ]
130A-336(a)(1)	Property line lengths shown?	Yes [X]	No [ ]	N/A [ ]
130A-336(a)	Facility/appurtenance setbacks shown from fixed points?	Yes [X]	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 [X]	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: Keep well >500 from landfill

IA issued date: 7/17/08

OP issued date: _____

Review performed by: Tammy Mask, RS Date performed: 7/17/08

Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Thu Jun 12 07:45:52 EDT 2008



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COMMENTS:
Not sure if 100% repair required

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