25 NOV '19 AM 11:39

1078B # 10878

MECKLENBURG COUNTY HEALTH DEPARTMENT

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM / WATER SUPPLY WELL

APPLICATION TYPE: (SEPTIC ONLY) WELL ONLY SEPTIC & WELL
ADDITION OR RENOVATION WITH OCCUPANCY INCREASE
ADDITION OR RENOVATION WITH NO OCCUPANCY INCREASE
(EXCHANGE MOBILE HOME (SAME # BEDROOMS))
COMMERCIAL OR INDUSTRIAL

PERSON FILING APPLICATION:
NAME: Ivan Elias
ADDRESS: 9922 Psalms St.
CITY: Cornelius
STATE: NC ZIP: 28031
PHONE: 704-426-7532
ALTERNATE PHONE:
E-MAIL: yardworksnc@yahoo.com

PROPERTY OWNER: (SAME AS PERSON FILING APPLICATION)
NAME:
ADDRESS:
CITY:
STATE: ZIP:
PHONE:
ALTERNATE PHONE:
E-MAIL:

JOB LOCATION INFORMATION
TAX PARCEL #: 017-273-10
STREET ADDRESS: 9205 Hambright rd.
CITY: Huntersville, NC
STATE: NC **ZIP:** 28031

SUBDIVISION OR MOBILE HOME PARK NAME: Wildwood Green
LOT #: 92

WATER SUPPLY:
MUNICIPAL PRIVATE WELL (PUBLIC WELL) SHARED WELL OTHER

RESIDENTIAL PROPERTY TYPE: N/A
HOUSE (~~MODULAR HOME~~ n/a) MULTIPLE FAMILY
(SINGLE MOBILE HOME) DOUBLE WIDE
OTHER

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 2
NUMBER OF OCCUPANTS: 1

COMMERCIAL / INDUSTRIAL PROPERTY TYPE: N/A
TYPE OF BUSINESS: n/a
EMPLOYEES PER SHIFT: n/a
OF SHIFTS: n/a
INDUSTRIAL WASTES? YES (NO)
UNDERGROUND STORAGE TANKS? YES (NO)

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE: N/A
BEDROOM BATHROOM KITCHEN DINING ROOM LIVING ROOM DEN
GARAGE SUNROOM PORCH DECK OTHER n/a

ADDITION/RENOVATION TYPE DETACHED FROM EXISTING STRUCTURE: N/A
DETACHED GARAGE DETACHED GARAGE WITH PLUMBING POOL HOUSE SHOP BARN
STORAGE SHED DETACHED PORCH / DECK OTHER n/a

*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: 7/16/19

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

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

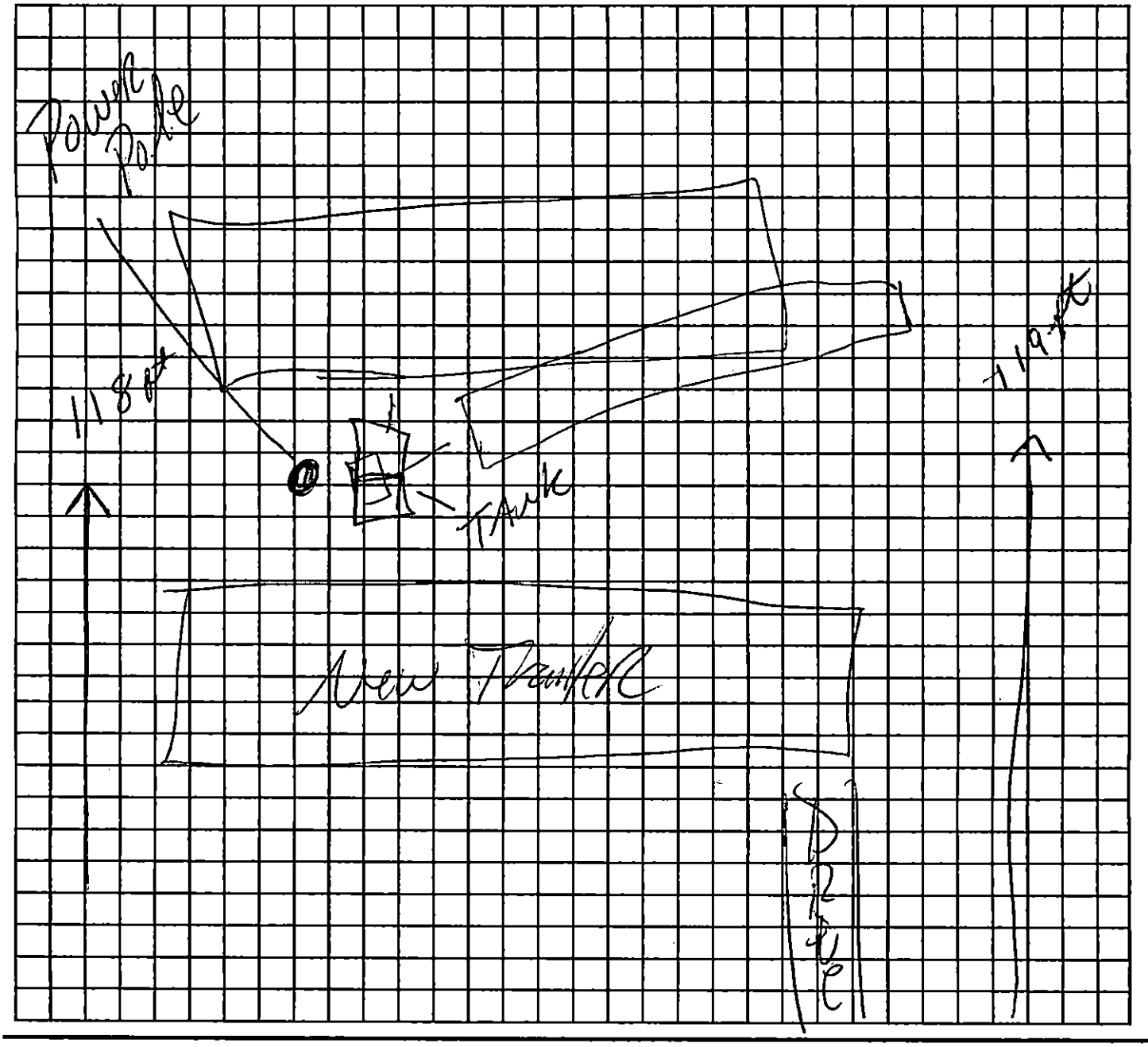
Revised on: 03/27/19

File #: _____

PROPOSED PLOT PLAN

A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

Street Address: 9205 Harm bight Tax Parcel #: 017-273-10



*The undersigned, an authorized agent of the Mecklenburg County Health Department, certifies that the Department has approved the Request for the "Job Location" contained in this document. This approval is granted in accordance with the provisions of Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal and Water Supply Wells in effect at the time of issuance of the permit and is subject to the following provisions:

- No work shall be conducted on the septic tank system until an installation, construction, alteration and/or repair approval is granted by this Department.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

OK. to use for A 2 Bedroom Mobile Home exchange

REHS Signature 12/12/19 Date

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Revised on: 03/27/19

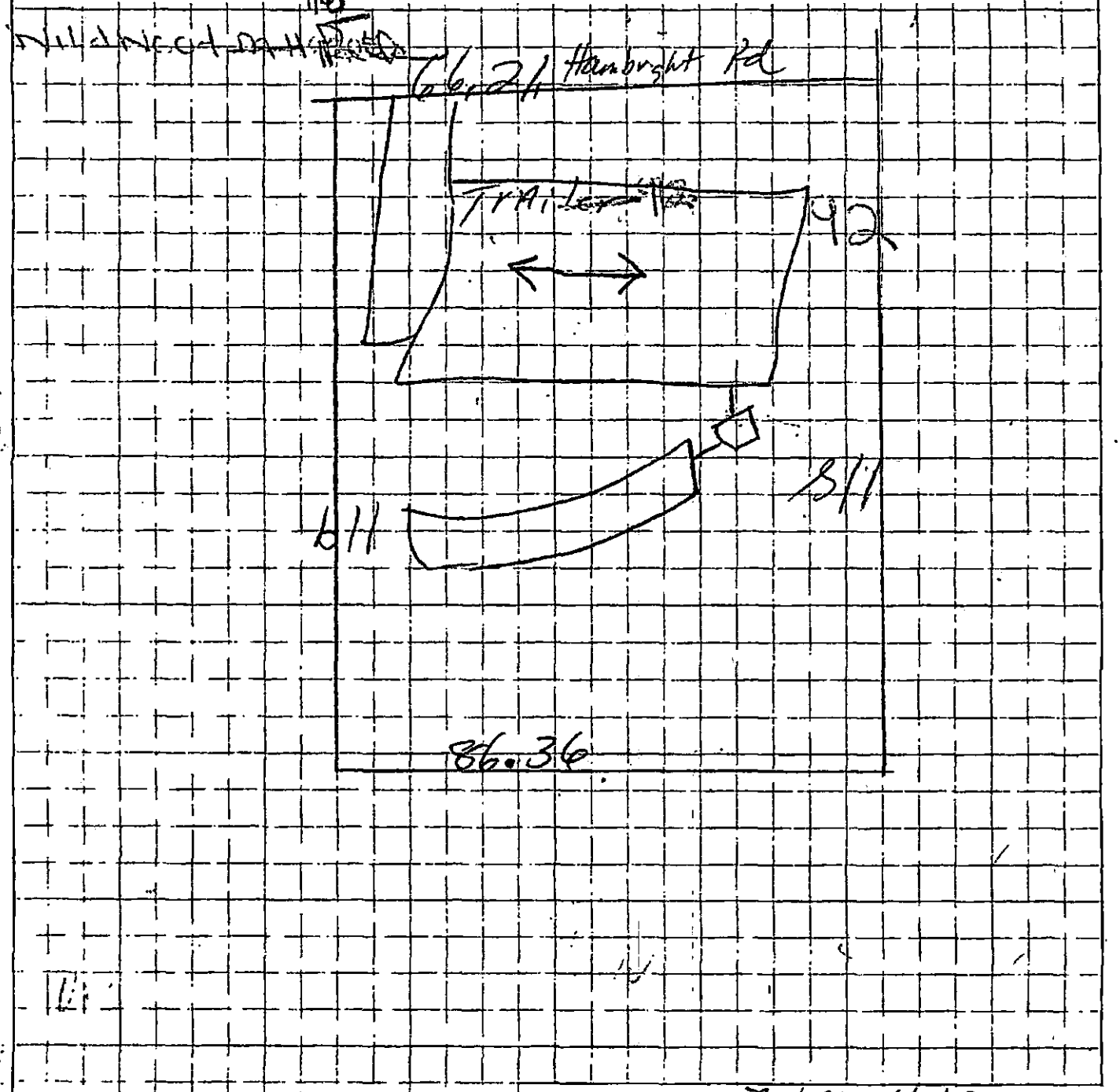
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 107RB/905A

TC: _____

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



APPROVAL DATE DSW appr 6/29/93 VRS

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy

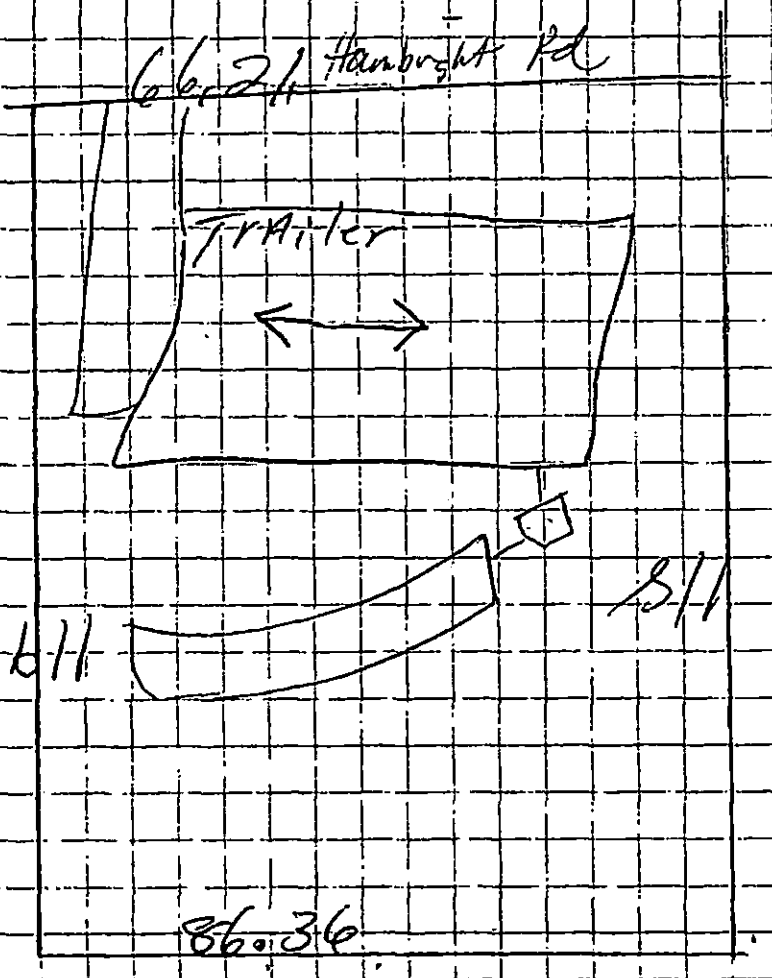
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 10RB1905A

TC: _____

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



APPROVAL DATE Prel appr 6/29/93 VKS

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy

Payment Receipt

Receipt Information

Date:	11/25/19	**Amount:**	100.00
Receipt #:	119543	**Tendered:**	100.00
Check / Auth #:	CHECK 202	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: 200000
Contractor: ELISA, IVAN
Attn:
Address: 9922 PSALMS ST
Address:
City/State/Zip: CORNELIUS, NC 28031

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	Use Existing System 9205 HAMBRIGHT RD		1	100.00	100.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
145.00					