

14500 THOMPSON RD

1/11/2008

duponbj

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

Groundwater & Wastewater Services
Septic Project File & Data Review Worksheet

GWS File #: 7162 B WASPS App #: 2359

Primary ES assigned to project: YS

Secondary ES assigned to project:

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

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: 5 Were sufficient auger borings made?	Yes ☑	No ☐	N/A ☐
.1939(d), .1955, .1956, .1957	LTAR .3	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) .1937 (f)(g)	Repair area shown 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) .130A-336(a)	Is the System located in the approved area? Is the Design flow (gpd) indicated?	Yes ☑ Yes ☑	No ☐ No ☐	N/A ☐ N/A ☐

130A-336(a)	Number of Bedrooms, employees, seats, etc. indicated?			
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 ☑
				N/A ☐
	Operation Permit	Yes ☑	No ☐	N/A ☐
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 ☐

H. 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 ☐

Comments: # Items requiring correction/modification: _____

IA issued date: _____

OP issued date: _____

Review performed by: _____ Date performed: 7-16-07

Attn: Bill Maglin

FILE NUMBER: 7162B CHK

Revised On: January 3, 2007

APPLICATION NUMBER: 2359

SEPTIC FEE: 200
DATE: 5/31/07

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: _____
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: 195-101-02 PO
STREET ADDRESS: ~~14500~~ Thompson Rd.
CITY: Charlotte
STATE: NC ZIP: 28227
SUBDIVISION NAME: The Silver Property
LOT #: 1 LOT SIZE (acres): 2.46 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: 3500
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)*:

8A. RANK: ☐ ANY TYPE ☒ CONVENTIONAL (1) ☐ ACCEPTED ☐ INNOVATIVE ☐ ALTERNATIVE ☐ OTHER _____

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

BURIED CABLES, LANDFILLS, STUMPHOLES	☐ YES ☒ NO	GRADING/SOIL REMOVAL PERFORMED	☐ YES ☒ NO
EXISTING WASTEWATER 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: John Robert & Laura Ruth Silver
ADDRESS: 1380f Holgate Hill Dr.
CITY: Charlotte
STATE: NC ZIP: 28227
HOME PHONE: 704-841-3629 WORK PHONE: 704-295-3550
MOBILE PHONE: FAX:

11. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:
NAME:
ADDRESS:
CITY:
STATE: ZIP:
HOME PHONE: WORK PHONE:
MOBILE PHONE: FAX:

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

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.

5/30/07
Property Owner's or Owner's Legal Representative Signature Date

16. 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
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	05/31/07	**Amount:**	200.00
Receipt #:	51016	**Tendered:**	200.00
Check / Auth #:	CHECK 6805	**Returned:**	0.00
Received By:	POWELPT		

Account Information

Account #: 200000
Contractor: SILVER, LAURA
Attn:
Address: 13804 HOLGATE HILL DR
Address:
City/State/Zip: CHARLOTTE, NC 28227

Item	Description	Permit#	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 14500 THOMPSON RD (1)		1	200.00	200.00


J. ROBERT SILVER, M. D. (BOBBY)
LAURA R. SILVER
13804 HOLGATE HILL DR. 704-841-3529
CHARLOTTE, NC 28227

NCDL 5211 232

6805

68-112/531
BRANCH 5923

5/31/07

PAY to the order of Mecklenburg Cty $ 400.-

Four hundred dollars and no/100 Dollars

BB&T
BRANCH BANKING AND TRUST COMPANY
1-800-BANK BBT BBT.com

For 14500 Thompson Rd.

Signature Laura Silver

⑆053101121⑆0005291393613⑈06805

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

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

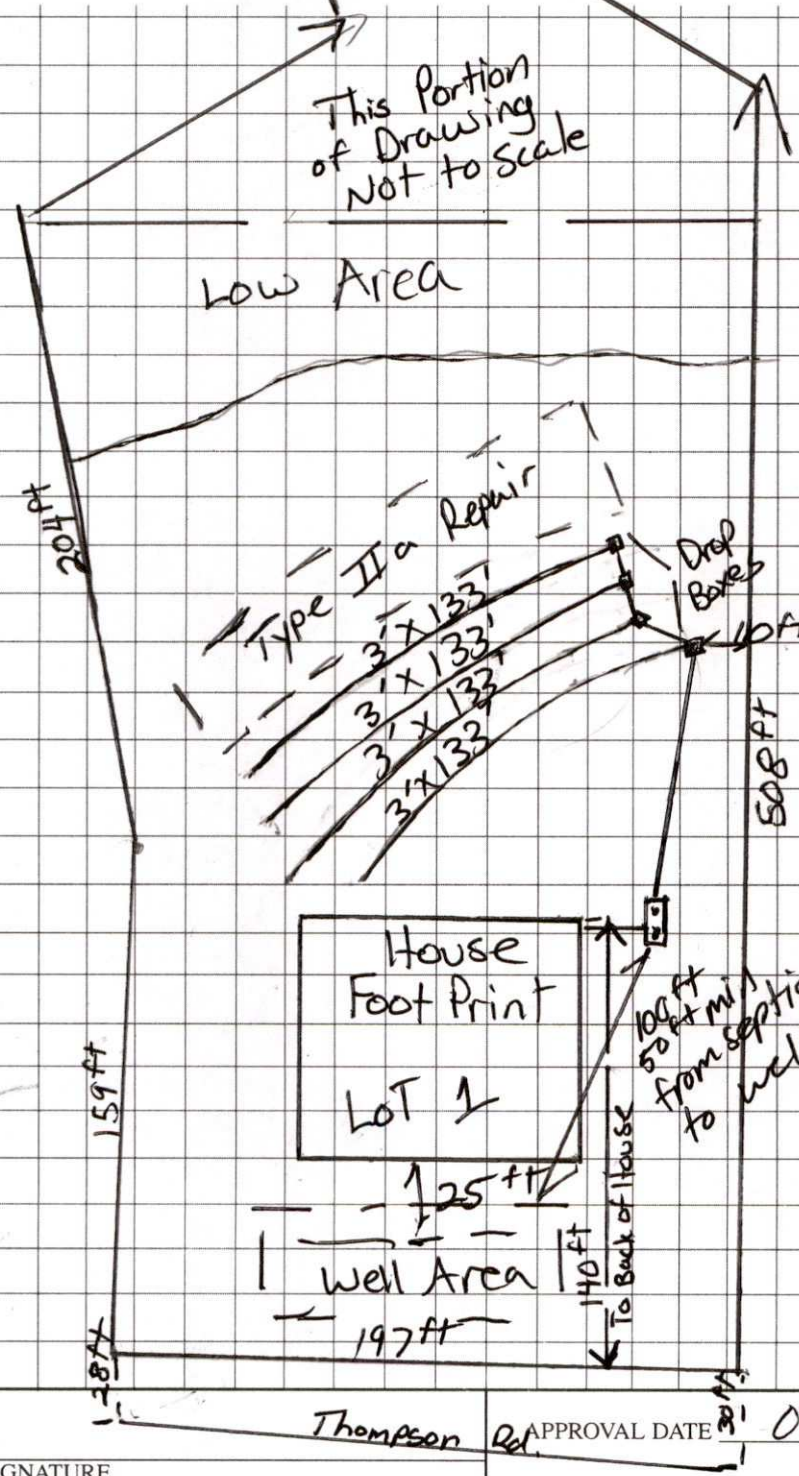
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5103

FILE: 7162B

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.



Scale = 1 inch = 60 ft

Type IIa Stone System
Gravity to Drop Boxes
• 3 LTAR
533 Total L.F.
4 lines at 133 ft
1500 gal Septic Tank

36 inch Max Trench Depth

Install on contour of land
Stay 10 ft off all property lines

APPROVAL DATE 07/13/07

OWNER/AGENT SIGNATURE

DATE

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

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

Sheet: 1 of 2
Property ID: PO 195-101-02
Lot #: 1
File #: 7162B
AppID: 2359

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: John R. & Laura Silver
Applicant:
Address: 13804 Holgate Hill Dr., Charlotte, N. C. 28777
Date Evaluated: 7/3/2007
Proposed Facility: Residence
Design Flow (.1949): 480gpd
Property Size: Approx . 7a inv.
Location of Site: Thompson 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, 5	0-3	GR/CL	FR/SEXP/SS/SP	>40" TO SOIL WETNESS	40	N/A	NONE	PS, IV
		3-8	SBK/CL	"					.3GPD/FT^2
		8-30	SBK/C	FI/SEXP/S/P					
		30-40	SBK/CL	FR/SEXP/SS/SP					
2	"	0-4	GR/CL	"	>48" TO SOIL WETNESS	48	"	"	"
		4-48	SBK/ABK/C	FI/SEXP/S/P					
3	"	0-6	GR/CL	FR/SEXP/SS/SP	"	"	"	"	"
		6-48	SBK/ABK/C	FI/SEXP/S/P					
4	"	0-5	GR/CL	FR/SEXP/SS/SP	"	"	"	"	PS, IV
		5-48	SBK/ABK/C	FI/SEXP/S/P					.275GPD/FT^2
5	"	0-6	GR/CL	FR/SEXP/SS/SP	"	"	"	"	PS, IV
		6-48	SBK/ABK/C	FI/SEXP/S/P					.3GPD/FT^2
					SITE LTAR .3GPD/FT^2				

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

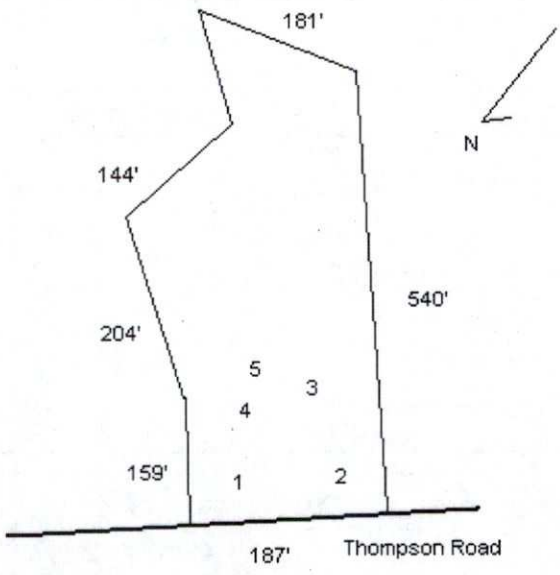
Other Factors (.1946):
Soil Evaluation By: W. R. Marlin, LSS, 7/6/2007,
Others Present:
Site Classification (.1948): PS
Site Evaluation By: Jeremy Michael
Others Present:

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 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 #: **30002359** GWS File #: **7162B** Tax Parcel #: **195-101-02**

- 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: Not Expire with Plat Provided **Expiration Date (If Applicable):** N/A

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

Structure Type: HOUSE Size (ft^2): 3500 # Bedrooms: 4 # Occupants: 4

Building Foundation: Crawl Space Water Supply: Private Well

II. Initial System Type: Conventional **System Classification:** IIa

Initial System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	N/A
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1600	Total Trench Length (ft):	533
Maximum Trench Depth (in):	36	Depth of Media (in):	12	Distribution Device:	Drop Boxes		

III. Repair System Type: Conventional **System Classification:** IIa

Repair System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	N/A
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1600	Total Trench Length (ft):	533
Maximum Trench Depth (in):	36	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: Jeremy Michael

Signature: Jeremy Michael

Date Issued: 8/16/2007

Owner/Legal Agent: Laura Silver
Print Name

Signature: Laura Silver

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 #: **30002359** GWS File #: **7162B**

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.

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: Jeremy Michael

Signature: Jeremy Michael

Date Issued: 8/16/2007

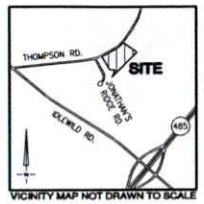
Owner/Legal Agent: Laura Silver
Print Name

Signature: Laura Silver

7162B

A SUBDIVISION PLAT OF:
THE SILVER PROPERTY

JOHN R. SILVER & WIFE, LAURA R. SILVER (OWNERS)
14500 THOMPSON ROAD
TOWN OF MINT HILL, MECKLENBURG COUNTY, NORTH CAROLINA
TAX NO: 195-101-02
DEED REFERENCE: DB 13156, PG. 210



VICINITY MAP NOT DRAWN TO SCALE

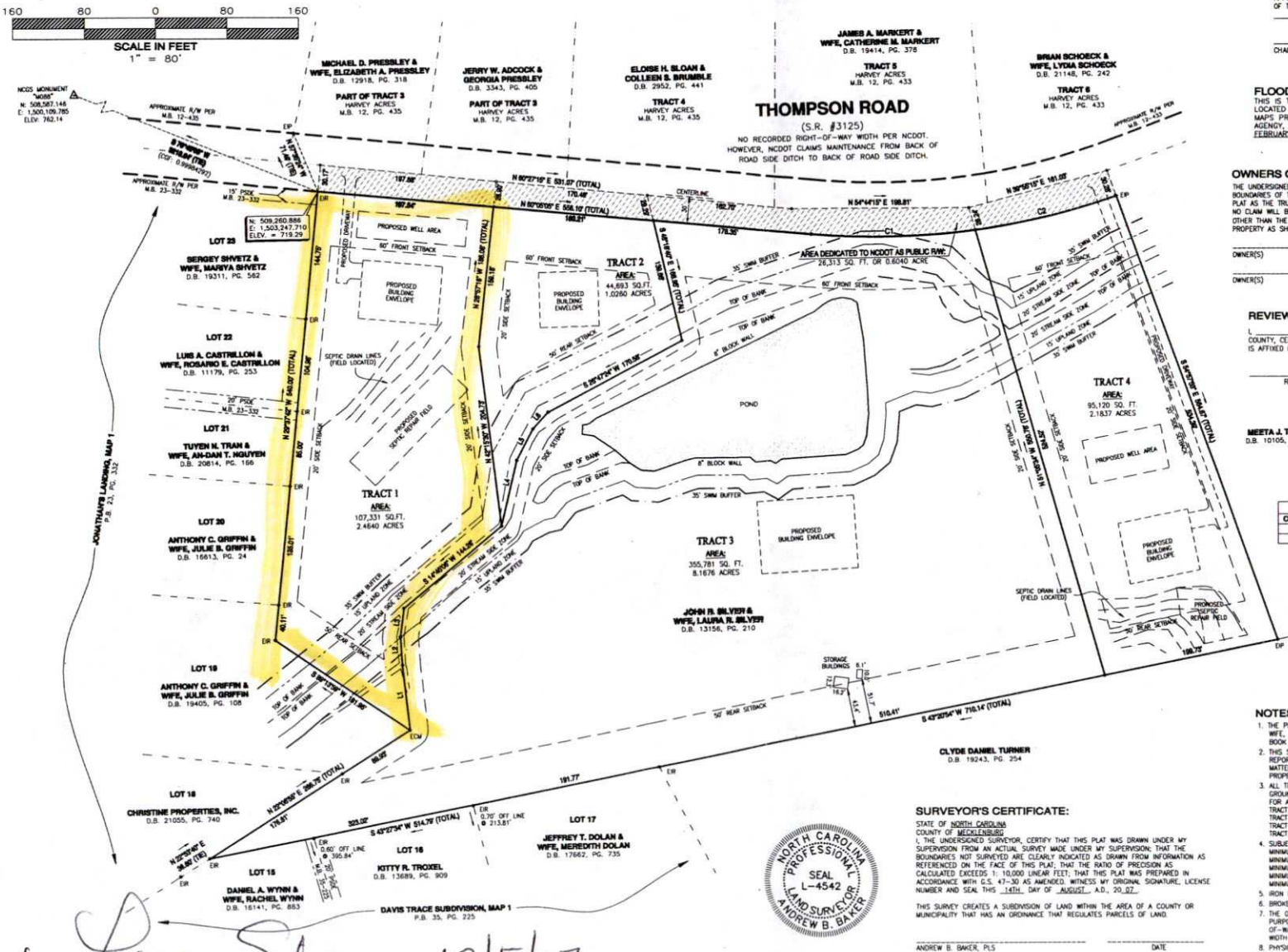


DATE: AUGUST 14, 2007
SCALE: 1" = 80'
JOB NUMBER: 70733
FILE NUMBER: Y-A014
PROJECT NUMBER: Y19

AREA TABLE:
TOTAL AREA OF LOTS: 13.8413 ACRES
+ DEDICATED R/W AREA: 0.6040 ACRES
TOTAL AREA: 14.4453 ACRES

MAP PREPARED BY:
R.B. PHARR & ASSOCIATES, P.A.
452 LAKESHORE PARKWAY, SUITE 100
ROCK HILL, SC 29730
TEL: 803-981-5353

160 80 0 80 160
SCALE IN FEET
1" = 80'



LINE TABLE		
LINE	BEARING	DISTANCE
L1	S41°37'03"E	74.17'
L2	S38°55'08"E	32.13'
L3	S28°14'51"E	32.35'
L4	S22°05'07"E	76.07'
L5	S07°57'27"E	40.13'
L6	S06°49'35"W	25.47'

CURVE TABLE				
CURVE	LENGTH	RADIUS	BEARING	CHORD
C1	184.11'	811.05'	N53°34'54"E	183.72'
C2	163.47'	811.05'	N41°18'15"E	163.19'

REGISTER OF DEEDS:
CERTIFIED TO BE A TRUE AND CORRECT COPY OF THE ORIGINAL MAP RECORDED IN
BOOK _____ PAGE _____
DATE: _____
JUDITH A. GIBSON, REGISTER OF DEEDS

PLANNING COMMISSION
APPROVED IN ACCORDANCE WITH THE PROVISIONS OF OF THE TOWN OF MINT HILL SUBDIVISION ORDINANCE ON
_____
CHAIRMAN, PLANNING BOARD _____ DATE

FLOOD CERTIFICATION
THIS IS TO CERTIFY THAT THE SUBJECT PROPERTY IS NOT LOCATED IN A SPECIAL FLOOD HAZARD AREA AS SHOWN ON MAPS PREPARED BY THE FEDERAL EMERGENCY MANAGEMENT AGENCY, FEDERAL INSURANCE ADMINISTRATION, DATED FEBRUARY 4, 2004, COMM. PANEL NO: 370539 0231E.

OWNERS CERTIFICATE:
THE UNDERSIGNED PROPERTY OWNERS HEREBY ACKOWLEDGE AND ACCEPT THE BOUNDARIES OF THE _____ PROPERTY AS SHOWN ON THIS PLAT AS THE TRUE AND CORRECT LOCATION OF _____ AND AGREE THAT NO CLAIM WILL BE MADE BY ANY OF THE UNDERSIGNED PARTIES TO ANY LINE OTHER THAN THE "AGREED TO PROPERTY LINE" OF THE _____ PROPERTY AS SHOWN ON THIS PLAT.
_____ _____
OWNER(S) DATE
_____ _____
OWNER(S) DATE

REVIEW OFFICER
I, _____ REVIEW OFFICER OF MECKLENBURG COUNTY, CERTIFY THAT THE MAP OR PLAT TO WHICH THIS CERTIFICATION IS AFFIXED MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING.
_____ _____
REVIEW OFFICER DATE

LEGEND:
ECM – EXISTING CONCRETE MONUMENT
EIP – EXISTING IRON PIPE
EIR – EXISTING IRON ROD
NIR – NEW IRON ROD
D.B. – DEED BOOK
M.B. – MAP BOOK
PG. – PAGE
R/W – RIGHT-OF-WAY
PSDE – PUBLIC STORM DRAINAGE EASEMENT
N.C.G.S. – NORTH CAROLINA GEODETIC SURVEY
PROPERTY LINE
PROPERTY LINE (NOT SURVEYED)
RIGHT-OF-WAY
RIGHT-OF-WAY (NOT SURVEYED)
EASEMENT
SETBACK

NOTES:
1. THE PURPOSE OF THIS PLAT IS TO SUBDIVIDE THE JOHN R. SILVER & WIFE, LAURA R. SILVER PROPERTY AS PREVIOUSLY DESCRIBED IN DEED BOOK 13156, PAGE 210 INTO FOUR (4) TRACTS AS SHOWN HEREON.
2. THIS SURVEY WAS PERFORMED WITHOUT BENEFIT OF A TITLE COMMITMENT REPORT. R.B. PHARR & ASSOCIATES, P.A. DOES NOT CLAIM THAT ALL MATTERS OF RECORD WHICH MAY OR MAY NOT AFFECT THE SUBJECT PROPERTY ARE SHOWN HEREON.
3. ALL TRACTS HAVE BEEN APPROVED BY THE MECKLENBURG COUNTY GROUNDWATER & WASTEWATER SERVICES FOR AN IMPROVEMENT PERMIT FOR A RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM.
TRACT 1 – PERMIT NO. ??????????, CWS FILE NO. 7162B, ISSUED 7/13/07.
TRACT 2 – PERMIT NO. 30002022, CWS FILE NO. 7018B, ISSUED 4/23/07.
TRACT 3 – PERMIT NO. 30002020, CWS FILE NO. 4789B, ISSUED 4/19/07.
TRACT 4 – PERMIT NO. ??????????, CWS FILE NO. 7163B, ISSUED 7/12/07.
4. SUBJECT PROPERTY ZONED R (RESIDENTIAL)
MINIMUM LOT AREA – 40,000 SQ.FT.
MINIMUM LOT WIDTH – 140 FEET AT SETBACK
MINIMUM FRONT SETBACK – 60 FEET
MINIMUM SIDE SETBACK – 20 FEET
MINIMUM REAR SETBACK – 50 FEET
5. IRON RODS AT ALL CORNERS UNLESS OTHERWISE NOTED.
6. BROKEN LINES INDICATE PROPERTY LINES NOT SURVEYED.
7. THE OFF-SITE RIGHT-OF-WAY SHOWN HEREON IS FOR ILLUSTRATIVE PURPOSES ONLY. THE UNDERSIGNED CERTIFIES ONLY TO THE RIGHT-OF-WAYS SURVEYED, AND DOES NOT CERTIFY TO THE RIGHT-OF-WAY WIDTH OF ANY ADJACENT PROPERTIES.
8. PHYSICAL IMPROVEMENTS MAY EXIST ON THIS PROPERTY THAT ARE NOT SHOWN HEREON.

JOB NO. 70733
FILE NO: Y-A014

SURVEYOR'S CERTIFICATE:
STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG
I, THE UNDERSIGNED SURVEYOR, CERTIFY THAT THIS PLAT WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION; THAT THE BOUNDARIES NOT SURVEYED ARE CLEARLY INDICATED AS DRAWN FROM INFORMATION AS REFERENCED ON THE FACE OF THIS PLAT; THAT THE RATIO OF PRECISION AS CALCULATED EXCEEDS 1: 10,000 LINEAR FEET; THAT THIS PLAT WAS PREPARED IN ACCORDANCE WITH G.S. 47-30 AS AMENDED. WITNESS MY ORIGINAL SIGNATURE, LICENSE NUMBER AND SEAL THIS 14TH DAY OF AUGUST, A.D., 20 07.

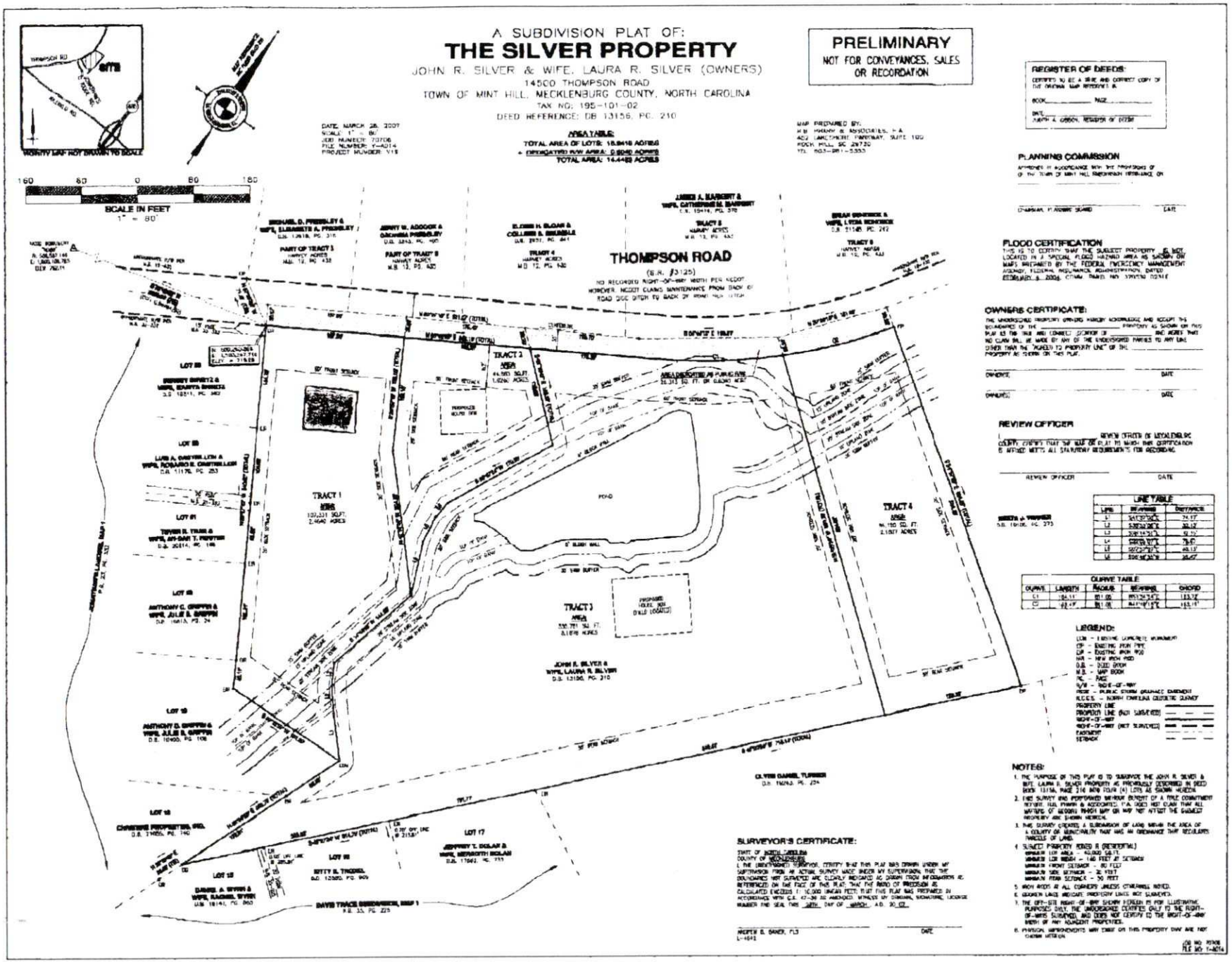
THIS SURVEY CREATES A SUBDIVISION OF LAND WITHIN THE AREA OF A COUNTY OR MUNICIPALITY THAT HAS AN ORDINANCE THAT REGULATES PARCELS OF LAND.

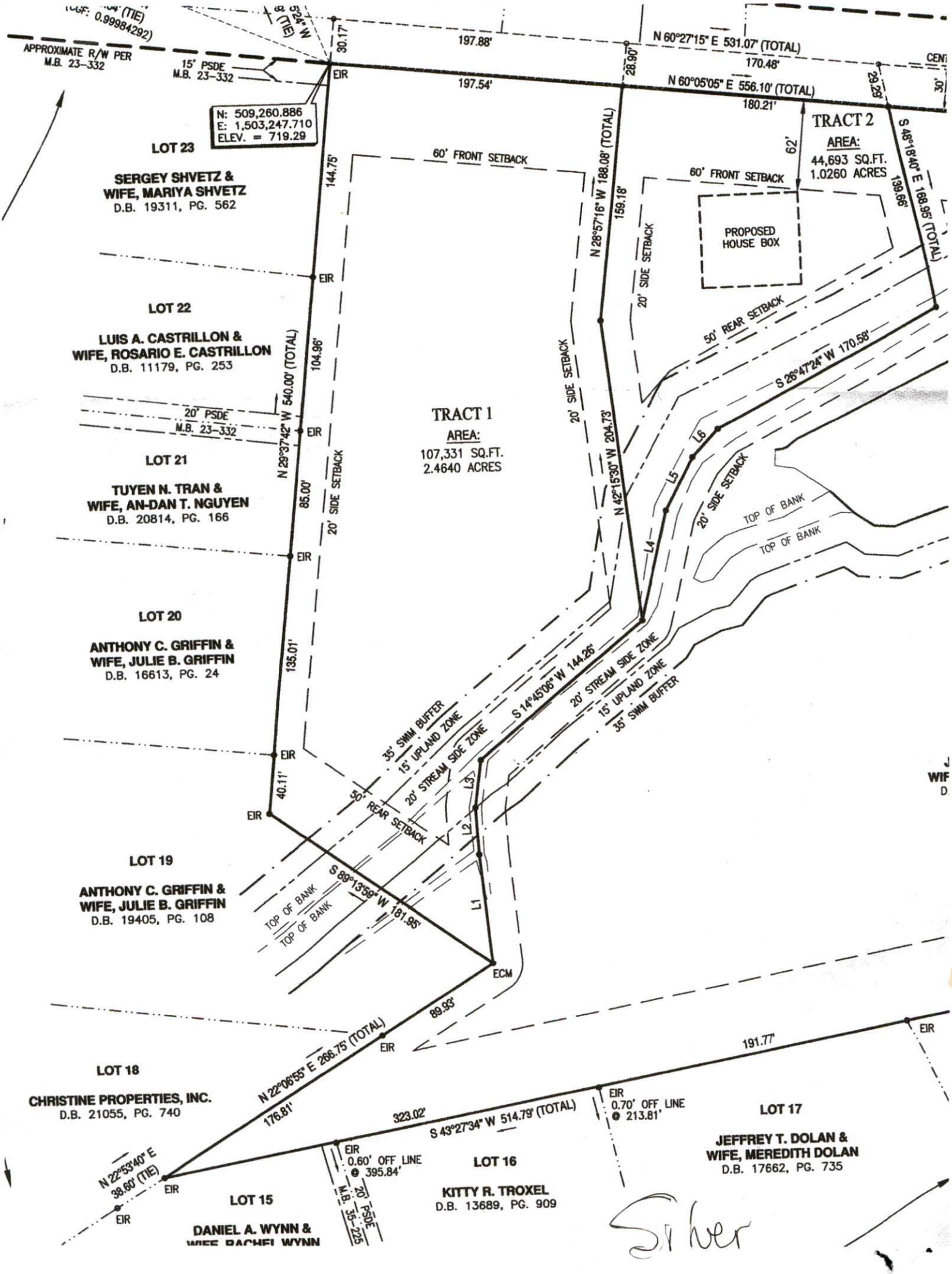
NORTH CAROLINA PROFESSIONAL SEAL L-4542 LAND SURVEYOR ANDREW B. BAKER

_____ _____
ANDREW B. BAKER, PLS DATE
L-4542

Laura Silver 12/5/07

704-814-0874 Mecklenburg County
May 31 2007 11:39AM




APPROXIMATE R/W PER M.B. 23-332
15' PSDE M.B. 23-332
N: 509,260.886
E: 1,503,247.710
ELEV. = 719.29
N 60°27'15" E 531.07' (TOTAL)
N 60°05'05" E 556.10' (TOTAL)
197.88'
197.54'
170.48'
180.21'
30.17'
28.90'
28.29'
TRACT 2
AREA:
44,693 SQ.FT.
1.0260 ACRES
62'
S 48°18'40" E 168.95' (TOTAL)
139.66'
60' FRONT SETBACK
PROPOSED HOUSE BOX
20' SIDE SETBACK
50' REAR SETBACK
S 26°47'24" W 170.58'
N 28°57'16" W 188.08' (TOTAL)
159.18'
N 42°15'30" W 204.73'
TRACT 1
AREA:
107,331 SQ.FT.
2.4640 ACRES
144.75'
104.96'
85.00'
135.01'
40.11'
N 29°37'42" W 540.00' (TOTAL)
20' PSDE M.B. 23-332
L1
L2
L3
L4
L5
L6
S 14°45'06" W 144.26'
S 89°13'59" W 181.95'
35' SWIM BUFFER
15' UPLAND ZONE
20' STREAM SIDE ZONE
TOP OF BANK
ECM
89.93'
191.77'
N 22°06'55" E 266.75' (TOTAL)
176.81'
323.02'
S 43°27'34" W 514.79' (TOTAL)
0.70' OFF LINE @ 213.81'
0.60' OFF LINE @ 395.84'
N 22°53'40" E 38.60' (TIE)
EIR
LOT 23
SERGEY SHVETZ & WIFE, MARIYA SHVETZ
D.B. 19311, PG. 562
LOT 22
LUIS A. CASTRILLON & WIFE, ROSARIO E. CASTRILLON
D.B. 11179, PG. 253
LOT 21
TUYEN N. TRAN & WIFE, AN-DAN T. NGUYEN
D.B. 20814, PG. 166
LOT 20
ANTHONY C. GRIFFIN & WIFE, JULIE B. GRIFFIN
D.B. 16613, PG. 24
LOT 19
ANTHONY C. GRIFFIN & WIFE, JULIE B. GRIFFIN
D.B. 19405, PG. 108
LOT 18
CHRISTINE PROPERTIES, INC.
D.B. 21055, PG. 740
LOT 17
JEFFREY T. DOLAN & WIFE, MEREDITH DOLAN
D.B. 17662, PG. 735
LOT 16
KITTY R. TROXEL
D.B. 13689, PG. 909
LOT 15
DANIEL A. WYNN &
M.B. 35-225

Mecklenburg County
LUESA Department South Office
234 Matthews Station Street
Matthews, NC 28105
Phone: (704) 814-0435

Mecklenburg County
LUESA SOUTH

Fax

To: Sven or Jay **From:** Phyllis

Fax: 336-6894 **Date:** 5/31/07

Phone: **Pages Including Cover:**

Re: 14500 Thompson Rd Mint Hill, NC **CC:**

☐ **Urgent** ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

•Comments:

Attached - 2 new septic systems - subdividing one lot - No projects set up in Land Dev - approval for subdivision pending septic approvals.



CHARLOTTE USA
PEOPLE • PRIDE • PROGRESS
234 Matthews Station Street • Matthews, North Carolina 28105 • (704) 814-0435 • Fax (704) 814-0874
www.charmeck.org

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 #: **30002359** GWS File #: **7162B** Tax Parcel #: **195-101-02**

- 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):** 7/13/2012

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

Structure Type: HOUSE Size (ft^2): 3500 # Bedrooms: 4 # Occupants: 4

Building Foundation: Crawl Space Water Supply: Private Well

II. Initial System Type: Conventional **System Classification:** IIa

Initial System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	N/A		
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1600	Total Trench Length (ft):	533		
Maximum Trench Depth (in):	36	Depth of Media (in):	12	Distribution Device:	Drop Boxes				

III. Repair System Type: Conventional **System Classification:** IIa

Repair System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	N/A		
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1600	Total Trench Length (ft):	533		
Maximum Trench Depth (in):	36	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: Jeremy Michael Owner/Legal Agent: _____
Print Name

Signature: Jeremy Michael Signature: _____

Date Issued: 7/13/2007

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 #: **30002359** GWS File #: **7162B**

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.

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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DENR Authorized Agent: Jeremy Michael Owner/Legal Agent:_____
Print Name

Signature: Jeremy Michael Signature:_____

Date Issued: 7/13/2007