Supervisor/Administrative Professional Checklist.

New Septic ☐ New Well ☐ Use Existing ☒ Alteration ☐ Modified Plot Plan ☐

New Septic Fees Paid

IP ($250.00) _____ 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 aas 6/14/18 Initials/Date

Alteration Fee Paid: $300.00 (Total) $200 (If use existing was pa- x 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. ☐ _____

Supervisor/Administrative Professional Checklist

New Septic ☑ New Well ☐ Use Existing ☐ Alteration ☐ Modified Plot Plan ☐

New Septic Fees Paid

IP ($250.00) AS 10/5/17 Initials/Date

CA ($200.00) 4/10/18 / LE Initials/Date

OP ($200.00) 4/10/18 / LE Initials/Date

File Complete

(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 ☑ JAM 4/11/18

OK to generate CA

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. ☐ _____

Groundwater & Wastewater Services: Septic Project File & D

Edit Response | Delete Response | Manage Permissions | Workflows | Alert Me

GWS File #:	9836B
WASPS App #:	9205
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?	Yes
Improvement Permit/Construction Authorization: 130A-336(a) - Facility/appurtenance setbacks shown from fixed points?	Yes
Corrections/modifications needed?	No
Comments:	
IA issued date:	
OP Issued date:	9-20-18
Review performed by:	Jeremy Michael
Date performed:	11/2/2017

Created at 11/2/2017 1:45 PM by Michael, Jeremy
Last modified at 11/2/2017 1:45 PM by Michael, Jeremy

Close

5 OCT '17 PM 2:07

MECKLENBURG COUNTY
HEALTH DEPARTMENT

9836B + 9205

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: 139012~~44~~

STREET ADDRESS: ~~2004~~ Large Oak Ln.

CITY: Mint Hill

STATE: NC ZIP: 28227

SUBDIVISION NAME: _____

LOT #: _____ LOT SIZE (acres): 1

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: 1352

NUMBER OF BEDROOMS: 3

NUMBER OF OCCUPANTS: 2

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 ☐ CONVENTIONAL ☐ ACCEPTED ☐ INNOVATIVE ☐ ALTERNATIVE ☐ OTHER _____

8A. RANK: 1 2 3 4 5

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

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

12. PROPERTY OWNER:

NAME: Donald Wilburn
ADDRESS: 2603 Rolling Hills Drive
CITY: Monroe
STATE: NC ZIP: 28110
WORK PHONE: _____
MOBILE PHONE: 704-363-5682
FAX: _____
E-MAIL: don@donwilburn.com

13. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:

NAME: Tammy W. Warr
ADDRESS: Po Box 247
CITY: Lockhart
STATE: SC ZIP: 29364
WORK PHONE: 864-424-8017
MOBILE PHONE: 864-426-7818
FAX: _____
E-MAIL: warrt@mailbox.sc.edu

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. JWW (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.

Jimmy W. Ware — Property Owner's or Owner's Legal Representative Signature

10-4-2017 — 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: _____

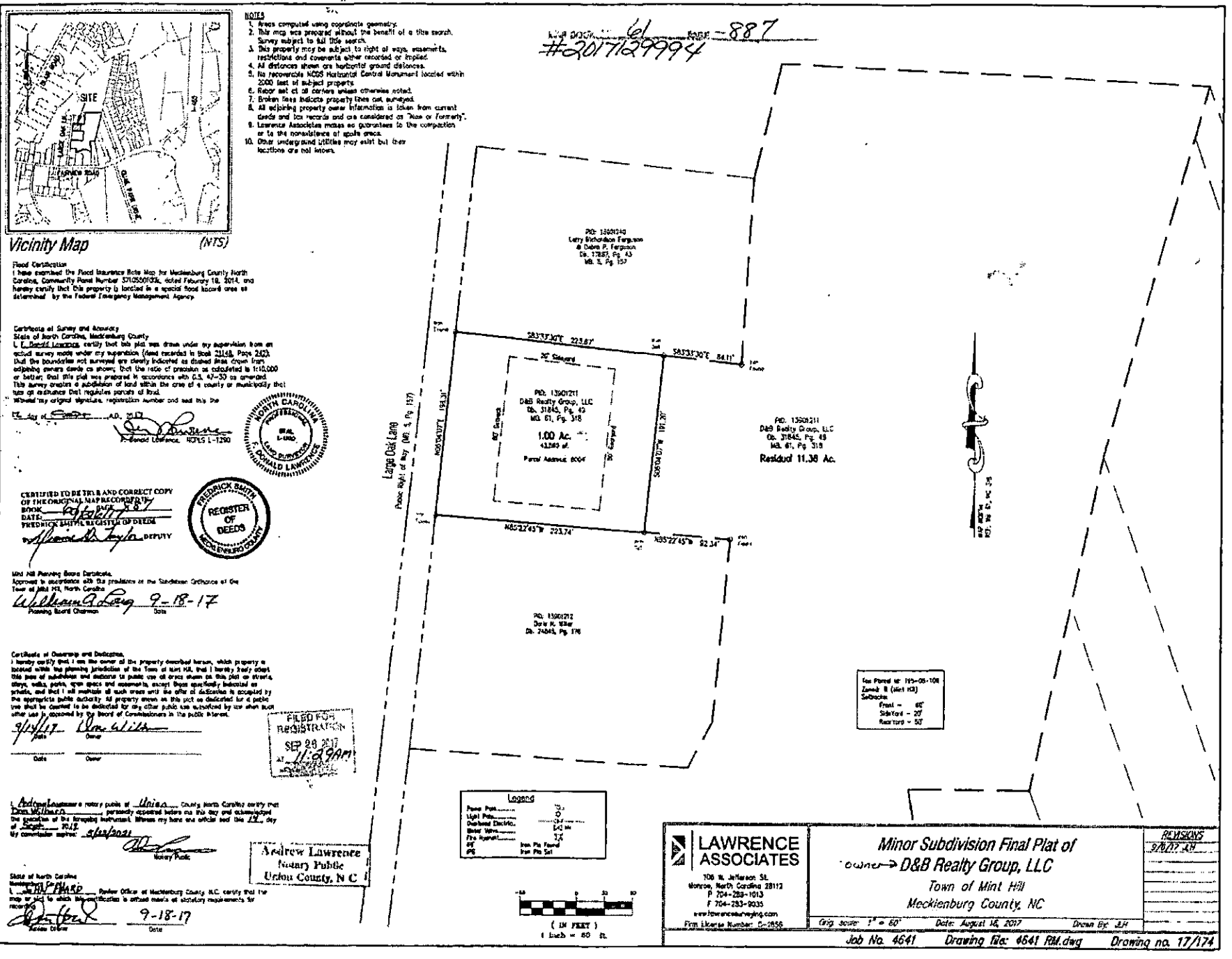
APPLICATION PROCESSED BY: _____

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



Certificate of Survey and Accuracy
State of North Carolina, Mecklenburg County

I, F. Donald Lawrence, certify that this plat was drawn under my supervision from an actual survey made under my supervision (deed recorded in Book 21148, Page 240); that the boundaries not surveyed are clearly indicated as drawn from information found in Book , Page ; that the ratio of precision as calculated is 1:10,000 or better; that this plat was prepared in accordance with G.S. 47-30 as amended. This survey creates a subdivision of land within the area of a county or municipality that has an ordinance that regulates parcels of land.

Witness my original signature, registration number and seal this the 7th day of September, A.D., 2017

F. Donald Lawrence, NCPLS L-1290

NORTH CAROLINA PROFESSIONAL SEAL L-1290 F. DONALD LAWRENCE LAND SURVEYOR

Certified to be True and Correct Copy of the Original Map Recorded in
Book 61 Page 887
Date: 9/18/17
Fredrick Smith, Register of Deeds
By: Deputy

FREDRICK SMITH REGISTER OF DEEDS MECKLENBURG COUNTY

Mint Hill Planning Board Certificate
Approved in accordance with the provisions of the Subdivision Ordinance of the Town of Mint Hill, North Carolina

William A Lang 9-18-17
Planning Board Chairman Date

Certificate of Ownership and Dedication

I hereby certify that I am the owner of the property described hereon, which property is located within the planning jurisdiction of the Town of Mint Hill, that I hereby freely adopt this plan of subdivision and dedicate to public use all areas shown on this plat as streets, alleys, walks, parks, open spaces and easements, except those specifically indicated as private, and that I will maintain all such areas until the offer of dedication is accepted by the appropriate public authority. All property shown on this plat as dedicated for a public use shall be deemed to be dedicated for any other public use authorized by law when such other use is approved by the Board of Commissioners in the public interest.

9/7/17 Owner
Date Owner

FILED FOR REGISTRATION SEP 28 2017 11:29AM

I, Andrew Lawrence a notary public of Union County, North Carolina certify that Don Wilson personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official seal this 19 day of September, 2017.

My commission expires: 9/25/2021

Notary Public

Andrew Lawrence
Notary Public
Union County, N C

State of North Carolina
Mecklenburg County

I, Jeff Ward, Review Officer of Mecklenburg County, N.C. certify that the map or plat to which this certification is affixed meets all statutory requirements for recording.

Review Officer 9-18-17
Date

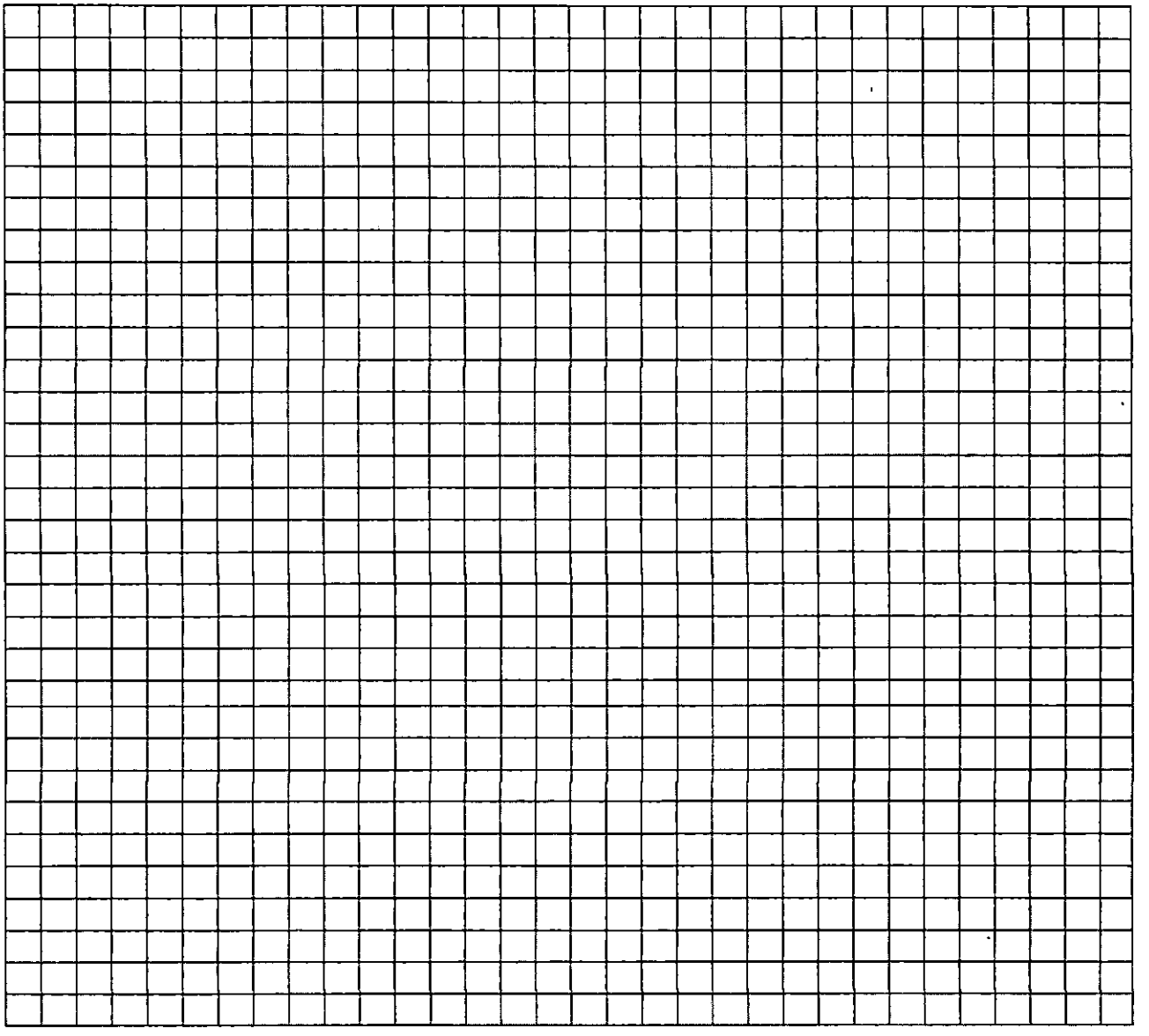
File #: _____

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: _____ Tax Parcel #: _____

Subdivision Name: _____ Lot #: _____



_____ _____

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

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

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 Tammy W. Warr is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at

   13901211
   Number Street Town
   (Or Parcel Number)

DONALD Wilburn
Property Owner (print name)

Donald Wilburn
Property Owner (signature)

10-4-17
Date

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

Sheet: 1 of 2
Property ID: 139-012-44
Lot #: NA
File #: 9836B
AppID: 9205

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Property Owner: Donald Wilburn
Address: 2603 Rolling Hills Dr, Monroe, NC 28110
Proposed Facility: 3 Bedroom House
Design Flow (.1949): 360 GPD
Location of Site: Large Oak Ln, Mint Hill, NC 28227
Water Supply: [ ] Public [ ] Individual [ ] Well
Evaluation Method: [X] Auger Boring [X] Pit
Type of Wastewater: [X] Sewage [ ] Industrial Process

Applicant: Tammy Warr
Date Evaluated: 10/18/2017
Property Size: 1 ac
Property Recorded: Unknown
[ ] Spring [X] Municipal
[ ] Cut
[ ] 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	General Comments	Profile Class & LTAR	Maximum Trench Bottom Depth for 3' Wide Conventional Trench
Boring #1	LS 8%	0 - 40	sbk C	S P FR SEXP	>51"	51	NA	NA		PS IV 0.3	36"
		40 - 51	sbk CL	SS SP FR SEXP							
Boring #2	LS 11%	0 - 24	sbk C	S P FR SEXP	>52"	52	NA	NA		PS IV 0.3	36"
		24 - 52	sbk CL	SS SP FR SEXP							
Pit #3	LS 9%	0 - 6	gr/sbk SCL	SS SP FR SEXP	2 chroma at 39"	39	PS	NA		PS IV 0.25	24"
		6 - 30	sbk C	S P FR SEXP							
		30 - 39	sbk CL	S P FR SEXP							
		39 - 62	mass SIL	SS SP FR SEXP							
Pit #4	LS 8%	0 - 5	gr/sbk SCL	SS SP FR SEXP	>48"	32	PS	NA		PS IV 0.25	30"
		5 - 22	sbk C	S P FR SEXP							
		22 - 32	sbk CL	S P FR SEXP							
		32 - 48	mass SIL	SS SP FR SEXP							

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	IIIg	IIIb
Site LTAR (gpd/sq ft)	0.25	0.25

Other Factors (.1946):
Soil Evaluation By: Jacob Presley, REHS, LSS
Others Present:
Site Classification (.1948): PS
Site Evaluation By: April Burngarner
Others Present:

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
		SiL-Silt Loam		m-moderate
				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



Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St, Suite 211 Charlotte, NC 28202
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30009205** GWS File #: **9836B** Tax Parcel #: **139-012-44**

- 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):** 11/1/2022

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

Structure Type: MODULAR HOME Size (ft^2): 1352 # Bedrooms: 3 Max. Occup.: 6

Building Foundation: Crawl Space Water Supply: Municipal

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

Initial System Specifications:

Design Flow (gpd):	360	LTAR (gpd/ft^2):	.25	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	N/A
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1080	Total Trench Length (ft):	360
Maximum Trench Depth (in):	24	Depth of Media (in):	12	Distribution Device:	Drop Boxes		

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

Repair System Specifications:

Design Flow (gpd):	360	LTAR (gpd/ft^2):	.25	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	1000
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1080	Total Trench Length (ft):	360
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 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 Owner/Legal Agent: _____
Print Name

Signature: April Bumgarner Signature: _____

Date Issued: 11/1/2017

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St, Suite 211 Charlotte, NC 28202
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30009205** GWS File #: **9836B**

IV. Permit Conditions/Comments:

- 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.
- Foundation drains shall be constructed 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.

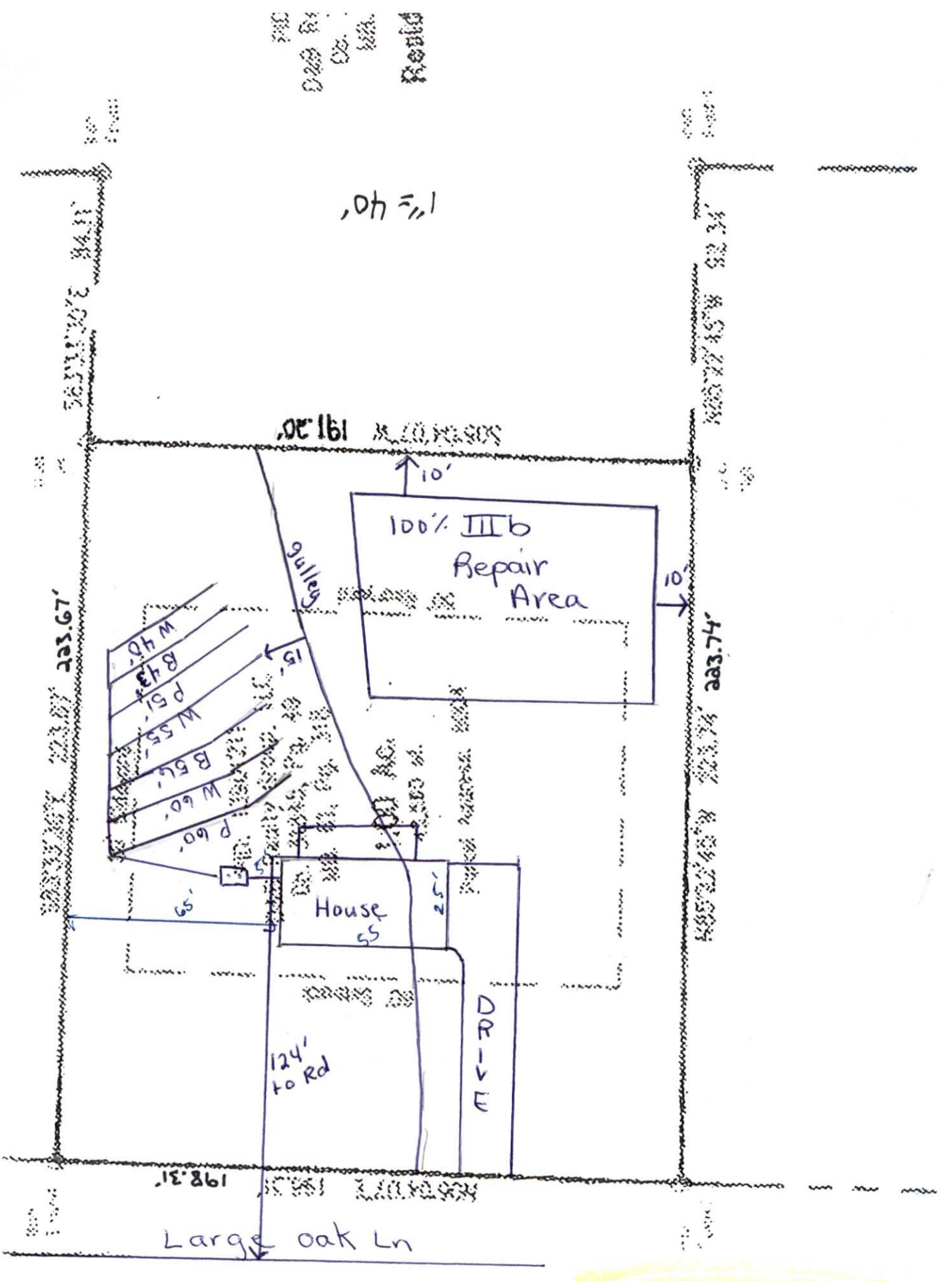
Authorized Agent: April Bumgarner

Signature: April Bumgarner

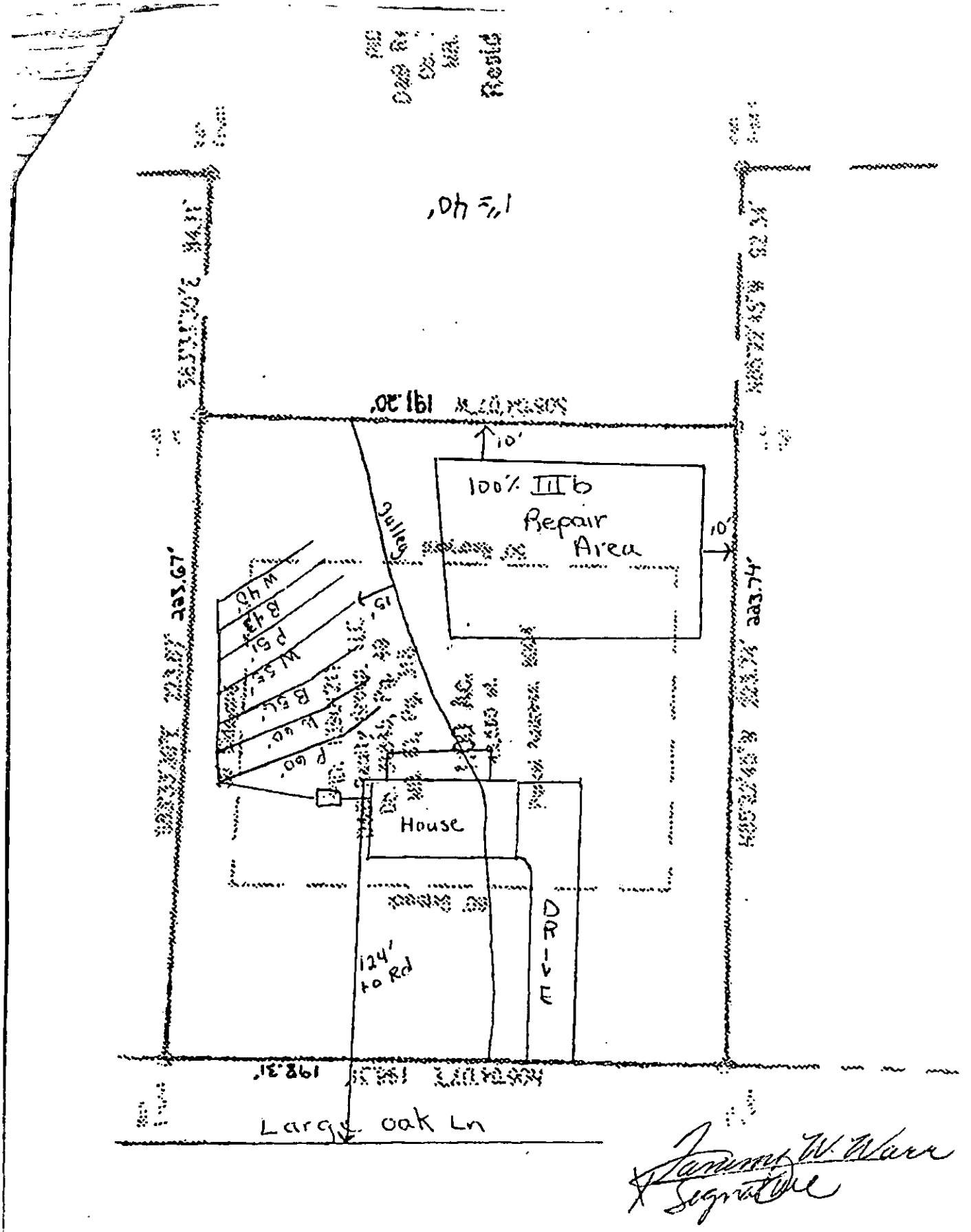
Date Issued: 11/1/2017

Owner/Legal Agent: _____
Print Name

Signature: _____


1" = 40'
191.20'
10'
100% IIIb
Repair
Area
10'
Gravel
15'
W 46'
R 43'
P 51'
W 55'
R 65'
W 60'
P 60'
223.67'
223.74'
5'
65'
House
55
25'
DRIVE
124'
to Rd
198.31'
Large oak Ln

X Signature


100% IIIb
Repair
Area
10'
10'
15'
Gallery
House
DRIVE
124'
to Rd
Large oak Ln
223.67'
223.74'
191.30'
182.31'

Signature

Mecklenburg County Groundwater & Wastewater Services
700 N Tryon St Suite 211 Charlotte, NC 28202
Phone (980) 314-1680 Fax (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: 30009205 GWS File #: 9836B Tax Parcel #: 139-012-44

- 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):** 11/1/2022

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

Structure Type: MODULAR HOME Size (ft^2): 1352 # Bedrooms: 3 Max. Occup.: 6

Building Foundation: Crawl Space Water Supply: Municipal

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

Initial System Specifications

Design Flow (gpd)	360	LTAR (gpd/ft^2)	25	Septic Tank Size (gal)	1000	Pump Tank Size (gal)	N/A
Trench Width (ft)	3	Trench Spacing (ft)	9	Absorption Area (ft^2)	1080	Total Trench Length (ft)	360
Maximum Trench Depth (in)	24	Depth of Media (in)	12	Distribution Device	Drop Boxes		

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

Repair System Specifications

Design Flow (gpd)	360	LTAR (gpd/ft^2)	25	Septic Tank Size (gal)	1000	Pump Tank Size (gal)	1000
Trench Width (ft)	3	Trench Spacing (ft)	9	Absorption Area (ft^2)	1080	Total Trench Length (ft)	360
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 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: 11/1/2017

Owner/Legal Agent: Tammy W. Ware
Print Name

Signature: Tammy W. Ware

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St. Suite 211 Charlotte, NC 28202
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: 30009205 GWS File # 9836B

IV. Permit Conditions/Comments:

- 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
- Foundation drains shall be constructed 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.

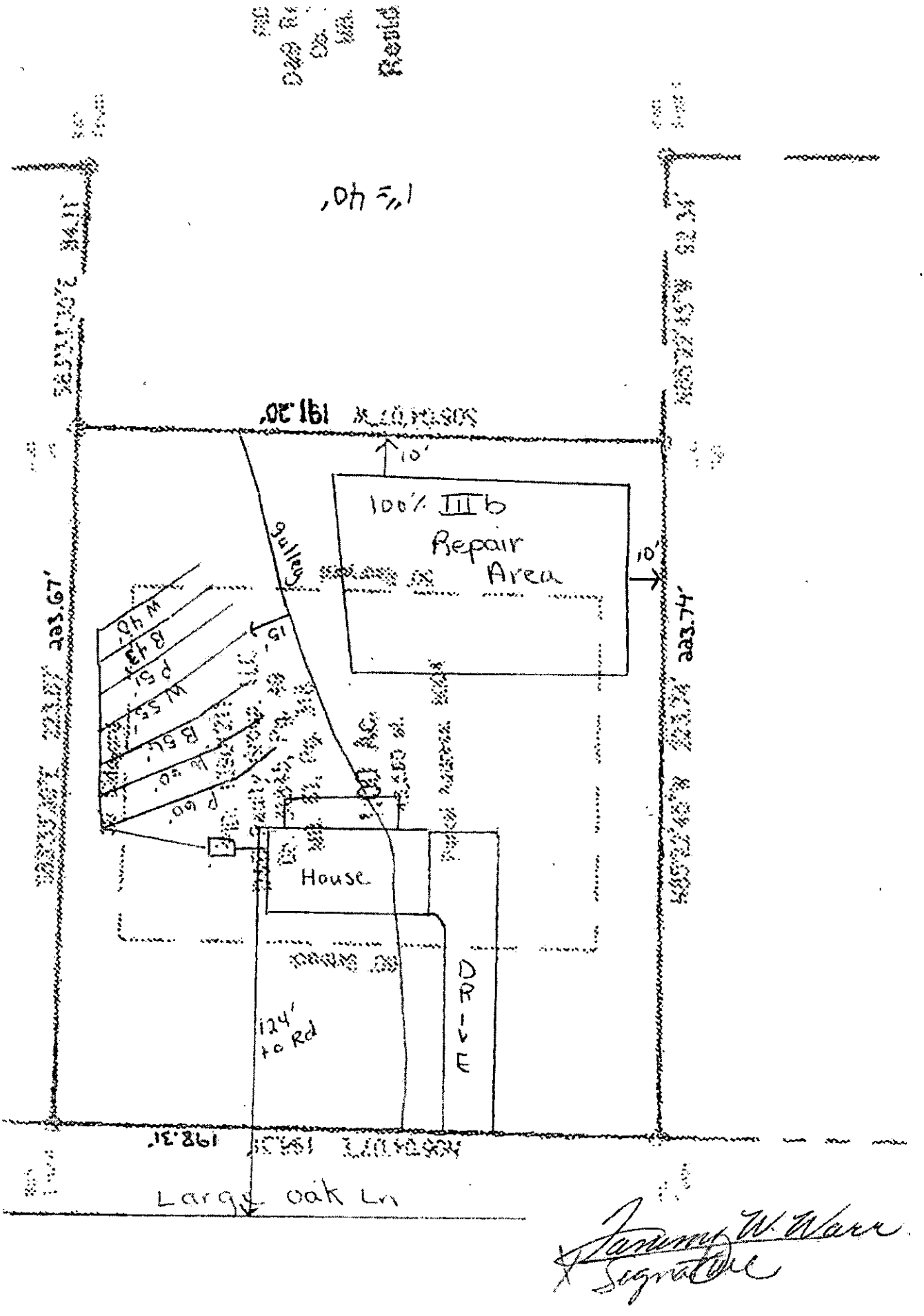
Authorized Agent: April Bumgarner

Signature: April Bumgarner

Date Issued: 11/1/2017

Owner/Legal Agent: Tammy W. Ware
Print Name

Signature Tammy W. Ware



Tommy W. Ware
Signature

FEE: 200.00
DATE: 4/11/2018

CONSTRUCTION AUTHORIZATION FOR AN ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES

FILE NUMBER: 9836B

PERMIT NUMBER: 30009205

PARCEL NUMBER: 13901244

JOB LOCATION INFORMATION

ADDRESS: 8004 LARGE OAK LN

CITY: CHARLOTTE **STATE: NC** **ZIP:** 28227

ISSUED TO: DONALD WILBURN

CONSTRUCTION AUTHORIZATION ISSUANCE DATE: 4/11/2018

CONSTRUCTION AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 30009205, AND THE ATTACHED SITE PLAN WITH SYSTEM DETAILS. CONSTRUCTION AND INSTALLATION MUST ALSO MEET ALL REQUIREMENTS SET FORTH IN THE RULES GOVERNING SANITARY SEWAGE COLLECTION, TREATMENT, AND DISPOSAL AND ANY OTHER APPLICABLE RULES AND LAWS.

2. A PRE-CONSTRUCTION MEETING MUST BE SECURED PRIOR TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A LICENSED SEPTIC TANK CONTRACTOR WITH THE NORTH CAROLINA ONSITE WASTEWATER CONTRACTOR INSPECTOR CERTIFICATION BOARD.

3. ANY ALTERATION IN SITE OR SOIL CONDITIONS (INCLUDING LOCATION OF STRUCTURES AND APPURTENANCES) OR MODIFICATION IN USE, DESIGN WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS AS SPECIFIED IN THE ASSOCIATED IMPROVEMENT PERMIT AND APPLICATION, MAY SUBJECT THIS CONSTRUCTION AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. THIS CONSTRUCTION AUTHORIZATION AS PROVIDED IN G.S. 130A-335(f) AND G.S. 130A-336(b) SHALL BE VALID FOR A PERIOD EQUAL TO THE VALIDITY OF THE IMPROVEMENT PERMIT, AND MAY BE ISSUED AT THE SAME TIME THE IMPROVEMENT PERMIT IS ISSUED.

Authorized Agent Signature April Burrgard

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

Septic System Pre-Construction Meeting Checklist

File # 98366 App # 9205 Tax Parcel # 139-012-44

Property Owner: Tammy Warr

Job Location Address: 8004 Large Oak LN

City: Mint Hill State: NC Zip Code: 28227

1. **Does System design match facility, flow & wastewater characteristics?**

   ☑ YES ☐ NO

   Comments: _____

2. **Is there sufficient available space for the septic systems initial and repair areas?**

   ☑ YES ☐ NO

   Comments: _____

   _____

3. **Can the septic system be installed per the permit conditions and drawing on file?**

   ☑ YES ☐ NO

   Comments: _____

   _____

*** If "NO" is checked for any of the above the existing permit may need to be revoked.**

Permission is hereby given to ☒ install ☐ alter ☐ repair an on-site wastewater treatment & and disposal system, with subsurface soil absorption and effluent discharge meeting all of the construction requirements of 15A NCAC 18A .1900 which are in effect on the date of granting this approval. System shall not be installed while soils are in wet condition.

April Bumgarner
Authorized Agent

8-29-18
Date

RCS
Others Present

Payment Receipt

Mecklenburg County POS

Environmental Health
700 N. Tryon Street
Charlotte, NC 28202
Phone: 704-336-5100

Enter Account # or Customer Name Here:
DONALD WILBURN

Bill To:

DONALD WILBURN
1319 GARDEN VISTA DR

Matthews, NC 28104

Single Payment

Transaction Date: 06/14/2018 9:37 AM Pacific Time
Pay Method: VISA **********7491
Approval #: 03854A
Trace Number: 09ca64e9-ae72-4a1e-b64a-8cf9b8fa3a73
Amount: $100.00

Payment Amount: $100.00

Total: $100.00

Thank you for your payment.

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	06/14/18	**Amount:**	100.00
Receipt #:	111629	**Tendered:**	100.00
Check / Auth #:	VISA 03854A	**Returned:**	0.00
Received By:	ABDUSAI		

Account Information

Account #: 200000
Contractor: WILBURN, DONALD
Attn:
Address: 1319 GARDEN VISTA DR
Address:
City/State/Zip: MATTHEWS, NC 28104

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	Use Existing System 8004 LARGE OAK LN		1	100.00	100.00

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

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

Payment Receipt

Mecklenburg County POS

Environmental Health
700 N. Tryon Street
Charlotte, NC 28202
Phone: 704-336-5100

Enter Account # or Customer Name Here:
DONALD WILBURN

Bill To:

DONALD WILBURN
2603 ROLLING HILLS DR

Monroe, NC 28110

Single Payment

Transaction Date: 10/05/2017 11:12 AM Pacific Time
Pay Method: VISA **********1111
Approval #: 09604A
Trace Number: e6d90c6f-96db-43bc-96d5-64d5907818ff
Amount: $250.00

Payment Amount: $250.00

Total: $250.00

Thank you for your payment.

Payment Receipt

Mecklenburg County POS

Environmental Health
700 N. Tryon Street
Charlotte, NC 28202
Phone: 704-336-5100

Enter Account # or Customer Name Here:
DONALD WILBURN

Bill To:

DONALD WILBURN
2603 ROLLING HILLS DR

Monroe, NC 28110

Single Payment

Transaction Date: 10/05/2017 11:12 AM Pacific Time
Pay Method: VISA **********1111
Approval #: 09604A
Trace Number: e6d90c6f-96db-43bc-96d5-64d5907818ff
Amount: $250.00

Payment Amount: $250.00

Total: $250.00

Thank you for your payment.

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	10/05/17	**Amount:**	250.00
Receipt #:	107663	**Tendered:**	250.00
Check / Auth #:	VISA 09604A	**Returned:**	0.00
Received By:	ABDUSAI		

Account Information

Account #: 200000
Contractor: WILBURN, DONALD
Attn:
Address: 2603 ROLLING HILLS DR
Address:
City/State/Zip: MONROE, NC 28110

Item	Description	Permit#	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 8004 LARGE OAK LN		1	250.00	250.00

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

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

Payment Receipt

Mecklenburg County POS

Environmental Health
700 N. Tryon Street
Charlotte, NC 28202
Phone: 704-336-5100

Enter Account # or Customer Name Here:
DONALD W WILBURN

Bill To:

DONALD W WILBURN
1319 GARDEN VISTA DR

Matthews, NC 28104

Single Payment

Transaction Date: 04/10/2018 12:06 PM Pacific Time
Pay Method: VISA **********7491
Approval #: 07669A
Trace Number: e5fed2e1-ebbf-4231-a821-f6dcedd22fc9
Amount: $400.00

Payment Amount: $400.00

Total: $400.00

Thank you for your payment.

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	04/10/18	**Amount:**	200.00
Receipt #:	110610	**Tendered:**	200.00
Check / Auth #:	VISA 07669A	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: 200000
Contractor: WILBURN, DONALD W
Attn:
Address: 1319 GARDEN VISTA DR
Address:
City/State/Zip: MATTHEWS, NC 28104

Item	Description	Permit#	Quantity	Unit Price	Total Price
0703	Septic Operational Permit 8004 LARGE OAK LN		1	200.00	200.00

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

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

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	04/10/18	**Amount:**	200.00
Receipt #:	110612	**Tendered:**	200.00
Check / Auth #:	VISA 07669A	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: 200000
Contractor: WILBURN, DONALD W
Attn:
Address: 1319 GARDEN VISTA DR
Address:
City/State/Zip: MATTHEWS, NC 28104

Item	Description	Permit#	Quantity	Unit Price	Total Price
0734	Septic Construction Authorizat 8004 LARGE OAK LN		1	200.00	200.00

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

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

~~10076B~~ ~~8136B~~ #9836B

14 JUN '18 AM 9:11

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: Tammy W. Warr
ADDRESS: Po Book 247
CITY: Lockhart
STATE: SC ZIP: 29364
PHONE: 864-426-7818
ALTERNATE PHONE:
E-MAIL: tandjwarr@hotmail.com

PROPERTY OWNER: ☐ SAME AS PERSON FILING APPLICATION
NAME: Donald Wilburn
ADDRESS: 1319 Garden Vista Drive
CITY: Stallings
STATE: NC ZIP: 28104
PHONE: 704-363-8682
ALTERNATE PHONE:
E-MAIL: don@donwilburn.com

JOB LOCATION INFORMATION
TAX PARCEL #: 13901211
STREET ADDRESS: 8004 Large Oak Lane
CITY: Mint Hill,
STATE: NC ZIP: 28227

SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #:

WATER SUPPLY:
☒ MUNICIPAL ○ PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER

RESIDENTIAL PROPERTY TYPE: ○ N/A
○ HOUSE ☒ MODULAR HOME ○ MULTIPLE FAMILY
○ SINGLE MOBILE HOME ○ DOUBLE WIDE
○ OTHER

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

COMMERCIAL / INDUSTRIAL PROPERTY TYPE: ☒ N/A
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:
INDUSTRIAL WASTES? ○ YES ○ NO
UNDERGROUND STORAGE TANKS? ○ YES ○ NO

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

ADDITION/RENOVATION TYPE DETACHED FROM EXISTING STRUCTURE:
☐ DETACHED GARAGE ☐ DETACHED GARAGE WITH PLUMBING ☐ POOL HOUSE ☐ SHOP ☐ BARN
☒ STORAGE SHED ☐ DETACHED PORCH / DECK ☐ OTHER

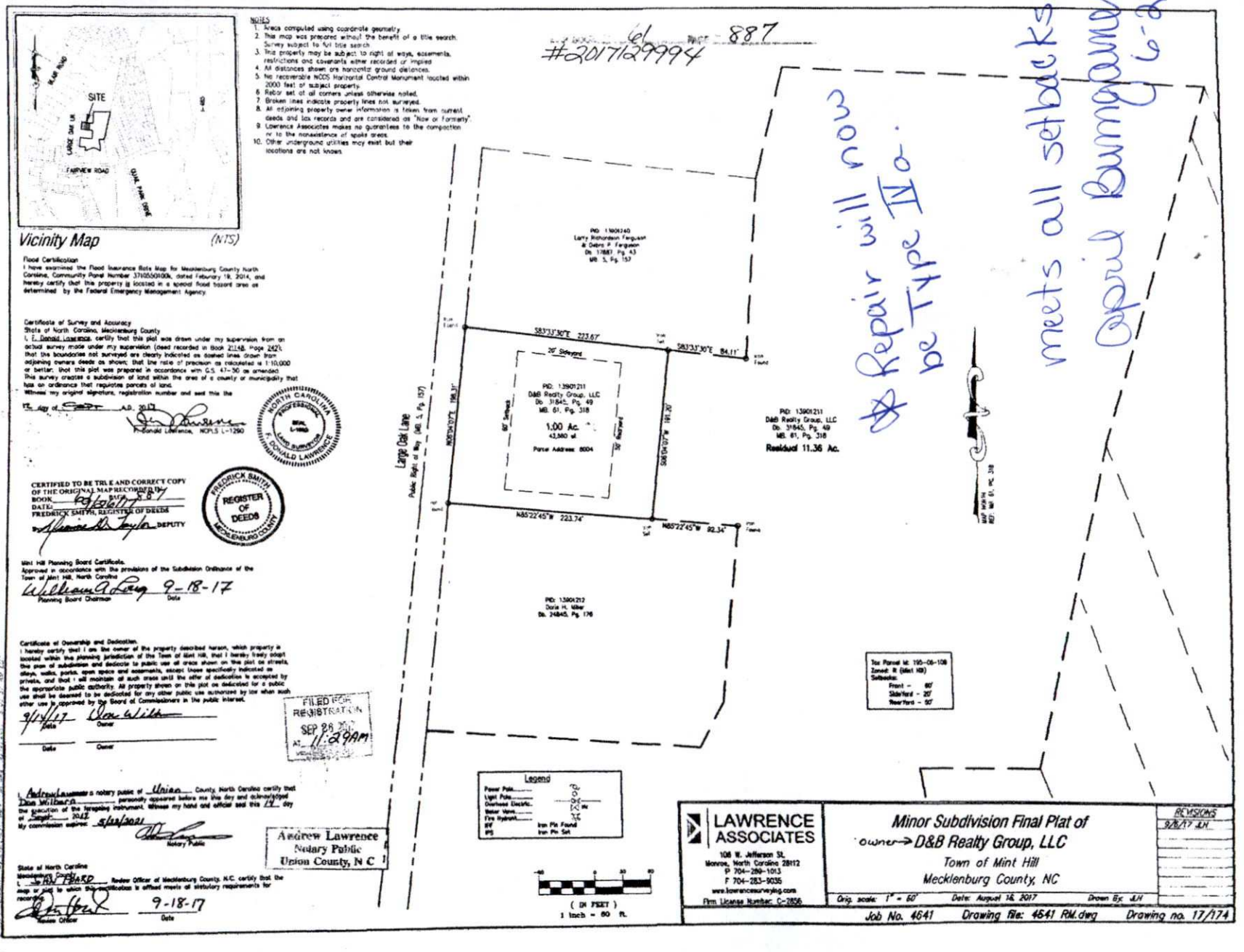
*The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application, acknowledges that the contents of same are true, and authorizes the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Tammy W. Warr — Owner's/Agent's Signature
6-13-18 — Date

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

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

Revised on: 01/03/11


#2017129994
PAGE 887
meets all setbacks.
April Bumgarner 6-26-18
Repair will not be Type IV a.
SITE
BLUE ROAD
LARGE OAK LN
HWY 1
FAIRVIEW ROAD
OAK FARM DRIVE
Vicinity Map
(N.T.S.)
NOTES
1. Areas computed using coordinate geometry.
2. This map was prepared without the benefit of a title search. Survey subject to full title search.
3. This property may be subject to right of ways, easements, restrictions and covenants either recorded or implied.
4. All distances shown are horizontal ground distances.
5. No recoverable NCGS Horizontal Control Monument located within 2000 feet of subject property.
6. Rebar set at all corners unless otherwise noted.
7. Broken lines indicate property lines not surveyed.
8. All adjoining property owner information is taken from current deeds and tax records and are considered as "Now or Formerly".
9. Lawrence Associates makes no guarantees to the completion or to the non-existence of spoke areas.
10. Other underground utilities may exist but their locations are not known.
Flood Certification
I have examined the Flood Insurance Rate Map for Mecklenburg County North Carolina, Community Panel Number 3710550100K, dated February 19, 2014, and hereby certify that this property is located in a special flood hazard area as determined by the Federal Emergency Management Agency.
Certificate of Survey and Accuracy
State of North Carolina, Mecklenburg County
I, F. Donald Lawrence, certify that this plat was drawn under my supervision from an actual survey made under my supervision (deed recorded in Book 21148, Page 242); that the boundaries not surveyed are clearly indicated as dashed lines drawn from adjoining owners deeds as shown; that the ratio of precision as calculated is 1:10,000 or better; that this plat was prepared in accordance with G.S. 47-30 as amended. This survey creates a subdivision of land within the area of a county or municipality that has an ordinance that regulates parcels of land.
Witness my original signature, registration number and seal this the 11th day of Sept A.D. 2017
F. Donald Lawrence, NCPLS L-1290
NORTH CAROLINA PROFESSIONAL SEAL L-1290 LAND SURVEYOR F. DONALD LAWRENCE
CERTIFIED TO BE TRUE AND CORRECT COPY OF THE ORIGINAL MAP RECORDED IN
BOOK 20167 PAGE 887
DATE: 9/28/17
FREDRICK SMITH, REGISTER OF DEEDS
By: [signature] DEPUTY
FREDRICK SMITH REGISTER OF DEEDS MECKLENBURG COUNTY
Mint Hill Planning Board Certificate.
Approved in accordance with the provisions of the Subdivision Ordinance of the Town of Mint Hill, North Carolina
William A Long 9-18-17
Planning Board Chairman Date
Certificate of Ownership and Dedication.
I hereby certify that I am the owner of the property described hereon, which property is located within the planning jurisdiction of the Town of Mint Hill, that I hereby freely adopt this plan of subdivision and dedicate to public use all areas shown on this plat as streets, alleys, walks, parks, open space and easements, except those specifically indicated as private, and that I will maintain all such areas until the offer of dedication is accepted by the appropriate public authority. All property shown on this plat as dedicated for a public use shall be deemed to be dedicated for any other public use authorized by law when such other use is approved by the Board of Commissioners in the public interest.
9/11/17 Date
Don Wilkes Owner
Date Owner
FILED FOR REGISTRATION SEP 28 2017 AT 11:29AM
I, Andrew Lawrence a notary public of Union County, North Carolina certify that Don Wilkes personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official seal this 14 day of Sept 2017
My commission expires: 5/16/2021
Notary Public
Andrew Lawrence Notary Public Union County, N C
State of North Carolina
Mecklenburg County
I, [illegible] BOARD Review Officer of Mecklenburg County, N.C. certify that the map or plat to which this certification is affixed meets all statutory requirements for recording.
Review Officer 9-18-17 Date
NOTE: 641 BOOK 16, PAGE 461, BK 21148, PG 242, 20167, 887
PID: 13906240
Larry Richardson Ferguson & Debra P. Ferguson
Db. 17883, Pg. 43
MB. 5, Pg. 157
S83°33'30"E 223.67'
S83°33'30"E 84.11'
20' Sidewalk
PID: 13901211
D&B Realty Group, LLC
Db. 31845, Pg. 49
MB. 61, Pg. 318
1.00 Ac.
43,560 sf.
Parcel Address: 8004
Large Oak Lane
Public Right of Way (MB. 5, Pg. 157)
N06°04'07"E 196.31'
S06°04'07"W 191.20'
80' Setback
30' Setback
N85°22'45"W 223.74'
N85°22'45"W 82.34'
PID: 13901211
D&B Realty Group, LLC
Db. 31845, Pg. 49
MB. 61, Pg. 318
Residual 11.36 Ac.
MAP NORTH RED MB. 61, PG. 318
PID: 13901212
Doris H. Mier
Db. 24845, Pg. 176
Tax Parcel Id: 195-06-108
Zoned: R (Mint Hill)
Setbacks:
Front - 60'
Side/Yard - 20'
Rear/Yard - 50'
Legend
Power Pole
Light Pole
Overhead Electric
Water Valve
Fire Hydrant
IPF Iron Pin Found
IPS Iron Pin Set
0 30 60 90
(IN FEET)
1 inch = 60 ft.
LAWRENCE ASSOCIATES
106 W. Jefferson St.
Monroe, North Carolina 28112
P 704-289-1013
F 704-283-9035
www.lawrencesurveying.com
Firm License Number: C-2856
Minor Subdivision Final Plat of
owner → D&B Realty Group, LLC
Town of Mint Hill
Mecklenburg County, NC
Orig. scale: 1" = 60' Date: August 16, 2017 Drawn By: JLH
REVISIONS
9/28/17 JLH
Job No. 4641 Drawing file: 4641 RM.dwg Drawing no. 17/174

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 Tammy W. Wurr is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at

8004 Laceye Oak Lane, Mint Hill, NC 28227
Number Street Town
(Or Parcel Number)

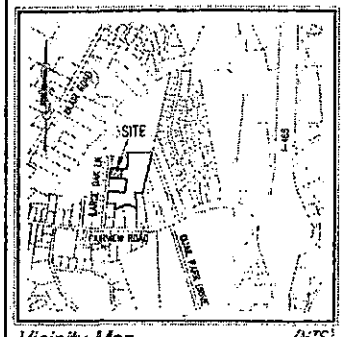
Donald D Wilburn
Property Owner (print name)

Donald W. Wilburn
Property Owner (signature)

6/13/18
Date

61 887

#2017129994



Vicinity Map (NTS)

NOTES
1. Areas computed using coordinate geometry.
2. This map was prepared without the benefit of a title search. Survey subject to full title search.
3. This property may be subject to right of ways, easements, restrictions and covenants either recorded or implied.
4. All distances shown are horizontal ground distances.
5. No recoverable NCGS Horizontal Control Monument located within 2000 feet of subject property.
6. Rebar set at all corners unless otherwise noted.
7. Broken lines indicate property lines not surveyed.
8. All adjoining property owner information is taken from current deeds and tax records and are considered as "now or formerly".
9. Lawrence Associates makes no guarantees to the completion or to the completeness of spoils areas.
10. Other underground utilities may exist but their locations are not known.

Flood Certification
I have examined the Flood Insurance Rate Map for Mecklenburg County North Carolina, Community Panel Number 3710550100K, dated February 19, 2014, and hereby certify that this property is located in a special flood hazard area as determined by the Federal Emergency Management Agency.

Certificate of Survey and Accuracy
State of North Carolina, Mecklenburg County
I, F. Donald Lawrence certify that this plat was drawn under my supervision from an actual survey made under my supervision (deed recorded in Book 21145, Page 240); that the boundaries not surveyed are clearly indicated as drawn from information found in Book ____, Page ____; that the ratio of precision as calculated is 1:10,000 or better; that this plat was prepared in accordance with G.S. 47-30 as amended. Witness my original signature, registration number and seal this the 15th day of September, A.D. 2017.

F. Donald Lawrence, NCPLS L-1290

NORTH CAROLINA PROFESSIONAL SEAL L-1290 LAND SURVEYOR F. DONALD LAWRENCE

CERTIFIED TO BE TRUE AND CORRECT COPY OF THE ORIGINAL MAP RECORDED IN MAP BOOK 58 PAGE 17
DATE: 9/26/17
FREDRICK SMITH, REGISTER OF DEEDS
By: Sharon D. Taylor DEPUTY

FREDRICK SMITH REGISTER OF DEEDS MECKLENBURG COUNTY

Mint Hill Planning Board Certificate
Approved in accordance with the provisions of the Subdivision Ordinance of the Town of Mint Hill, North Carolina.
William A. Lang 9-18-17
Planning Board Chairman Date

Certificate of Ownership and Dedication
I hereby certify that I am the owner of the property described hereon, which property is located within the planning jurisdiction of the Town of Mint Hill, that I hereby freely adopt this plan of subdivision and dedicate to public use all areas shown on this plat as streets, alleys, walks, parks, open space and easements, except those specifically indicated as private, and that I will maintain all such areas until the offer of dedication is accepted by the appropriate public authority. All property shown on this plat as dedicated for a public use shall be deemed to be dedicated for any other public use authorized by the Town when such other use is approved by the Board of Commissioners in the public interest.

9/15/17 Date — Dan Wilson Owner
Date — Owner

FILED FOR REGISTRATION SEP 26 AM 11:29AM

I, Andrew Lawrence a notary public of Union County, North Carolina certify that Dan Wilson personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official seal this 19 day of Sept 2017.
My commission expires: 9/6/2021
Notary Public

Andrew Lawrence Notary Public Union County, N C

State of North Carolina
Mecklenburg County
I, Jim Peard Review Officer of Mecklenburg County, N.C. certify that the map or plat to which this certification is affixed meets all statutory requirements for recording.
Review Officer 9-18-17 Date

#2017129994

PID: 13501240
Larry Richardson Ferguson & Diane P. Ferguson
Dr. 17227, Pg. 93
MB. 8, Pg. 137

S83°33'30"E 223.07'
S83°33'30"E 84.11'
Iron Found
Iron Found
20' Setback
PID: 13501211
D&B Realty Group, LLC
Dr. 31845, Pg. 49
MB. 51, Pg. 318
1.00 Ac. ±
43,560 sf.
Parcel Address: 8004
80' Setback
30' Setback
N05°01'07"E 193.31'
S05°01'07"W 191.22'
Large Oak Lane
Public Right of Way (SR 3, Pg. 137)
PID: 13501211
D&B Realty Group, LLC
Dr. 31845, Pg. 49
MB. 51, Pg. 318
Resturd 11.36 Ac.
N85°22'45"W 223.74'
N85°22'45"W 52.34'
Iron Found
PID: 13501213
Darla M. Miller
Dr. 24845, Pg. 198
Iron Pipe Found
Fire Marshal for PID-05-109
Zoned: R (Mint Hill)
Setbacks:
Front = 40'
Sides = 20'
Rear = 50'

Legend
Power Pole
Light Pole
Overhead Electric
Water Valve
Fire Hydrant
Set
IPS Iron Pin Set

0 30 60 90
(IN FEET)
1 inch = 60 ft.

LAWRENCE ASSOCIATES
705 N. Jefferson St.
Monroe, North Carolina 28112
P 704-289-9013
F 704-283-9035
www.lawrencesurveying.com
Firm License Number: C-1856

Minor Subdivision Final Plat of
D&B Realty Group, LLC
Town of Mint Hill
Mecklenburg County, NC

REVISIONS
9/8/17 JLH

Orig. scale: 1" = 60' Date: August 16, 2017 Drawn By: JLH
Job No. 4641 Drawing File: 4641 RM.dwg Drawing no. 17/174

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St., Suite 211, Charlotte, NC 28202
Phone: (980) 314-1680 • Fax (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

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

File #: 9836B Permit #: 9205 Tax Parcel #: 139-012-44

Property Owner: Tammy Warr

Job Location Address: 8004 Large Oak LN

City: Mint Hill State: NC Zip Code: 28227

Operation Permit Issuance Date: 9-20-18 **Contractor Name:** RCS

Permitted Design Flow: 360 GPD Liquid Capacity of Dosing Tank: NA gallons

Liquid Capacity of Septic Tank: 1000 gallons Manufacture J+S STB-97 Effluent Pump Model: NA

Drainfield Installation ☐ N/A

Trench Depth: 24" inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 360 feet

# of Lines: 7 @ various feet

Depth of Media: 12 inches (Type) IQ4

Depth of Cover: 12" inches

Distribution Device: End caps

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

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Depth of Cover: _____ inches

Distribution Device: _____

Water Supply Source

☒ Municipal ☐ Private Well ☐ Community Well

☐ Other _____

System Installation Setbacks

Distance from Building Foundation: 14' feet

Distance from Property Line: 14' feet

Distance from Water Supply Source: 10' feet

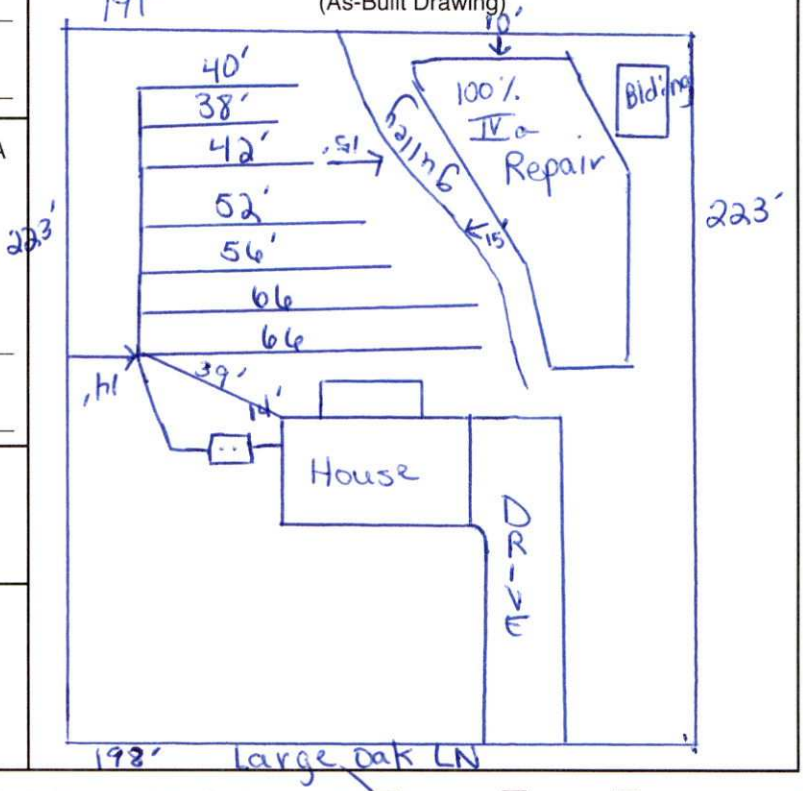
Inspection Dates

Tank(s) Inspected: 9-13-18

Excavation Inspected: 9-13-18

Pump & Controls Inspected: NA

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)



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

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

Comments: System Classification & Type: III g | IQ4 | g | NA | NA

DENR Authorized Agent: April Bumgarner Signature: April Bumgarner

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

File #: 9836B Permit #: 9205 Tax Parcel #: 139-012-44

Property Owner: Tammy Warr

Job Location Address: 8004 Large Oak LN

City: Mint Hill State: NC Zip Code: 28227

OPERATION PERMIT CONDITIONS:

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

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

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

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

System Classification: IIIg

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

Subsurface system operator required: Yes ☐ No ☒

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

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

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

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

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

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

V. Other:

DENR Authorized Agent: April Bumgarner Date: 9-20-18

Signature: April Bumgarner