

8700 HOOD RD

10514231

1/8/2008

duponbj

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

EAGLE ENGINEERING
310 Indian Trail - Fairview Rd.
Indian Trail, NC 28079
(704) 882-4222
www.eagleonline.net

Letter of Transmittal

Date: 6/19/2003

Attention: Mr. Drew Walker
Meck Cty Environmental Health
700 N. Tryon St.
Charlotte, NC 28202

EEI Job Number: 1122C

Re: The Church in Charlotte
Site Improvement Plan

We are transmitting the following items:

☐ Prints ☑ Plans ☐ Specifications ☐ Application ☐ Report
☐ Copy of Letter ☐ Shop Drawings ☑ Calculations ☐ Check ☐ Other

Copies	Date	No.	Description
1	6/19/2003	1	Preliminary site plan (1" = 30')

These are transmitted as checked below:

☑ For Approval ☐ For Review ☐ Approved as Submitted
☐ For Your Use ☐ Corrected Prints ☐ Approved as Noted
☐ As Requested ☐ Copies for Distribution ☐ Copies for Approval

Remarks:
Drew, attached is the "revised" preliminary site plan for the above referenced Project.
Please use this in your layout of the proposed WWDS.
Thanks for you cooperation in this matter.

Regards.

Cc: File
T. Olson [TCIC]

Signed:
Dave Rector, PE

00 CLK# 1092 ACS

FEE: 300 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: 3/17/04 **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE** LD

DATE: 3-25-04 **PERMIT NO:** 5275B
PARCEL NO: 105-147-31

JOB LOCATION ADDRESS: 8700 IRWIN ROAD
PROPERTY OWNER: THE CITADEL IN CHARLOTTE
BUILDING CONTRACTOR:
SUBDIVISION NAME:
AUTHORIZATION ISSUED BY: [signature] **DATE:** 3/25/04
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 5275B, 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. AN INSTALLATION, CONSTRUCTION, ALTERATION AND/OR REPAIR APPROVAL MUST BE SECURED **PRIOR** TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH MECKLENBURG COUNTY HEALTH DEPARTMENT.

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 AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: ~~FREE~~

OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITIONS OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

X [signature] 5/17/04
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

P# 63865

CONDITIONS OF IMPROVEMENT PERMIT

Permit Number: **5275-B**

Tax Number: **105-142-31**

- The IMPROVEMNET 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 as 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.

Basement ☒ Yes ☐ No ☐ Partial Basement

Primary Wastewater System

Type: ☐ I ☐ II ☒ III ☐ IV ☐ V ☐ VI

☐ Conventional
☐ Prefabricated, permeable block panel system
☐ Shallow Placed Conventional
☐ Low Pressure Pipe
☐ Large Diameter Pipe
☐ Fill
☐ Other
☒ Innovative or Experimental:

.3 Long-term acceptance rate (GPD/ft^2)	1500 Max gallons/day wastewater flow	5000 Absorption Area (sq ft)	9 Trench spacing (min. on centers) (ft)
Serviced by private well: ☐ Yes ☒ No	3000 Gallon septic tank	1250 Total trench length (ft)	30 Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions.)
__ Bedrooms in residence	2000 Gallon pump tank	NA Depth of stone (in)	

Any surface water present: Type: Minimum separation distance (ft):

Additional conditions: 1) See additional sheet

Repair Area System

Type: ☐ I ☐ II ☒ III ☐ IV ☐ V ☐ VI

☐ Conventional
☐ Prefabricated, permeable block panel system
☐ Shallow Placed Conventional
☐ Low Pressure Pipe
☐ Large Diameter Pipe
☐ Fill
☐ Other
☒ Innovative or Experimental:

5000 Absorption Area (sq ft) 1250 Total trench length (ft)	na Depth of stone (in)	9 Trench spacing (min. on centers) (ft)	30 Maximum trench depth (in)

The undersigned, an authorized agent of the MECKLENBURG COUNTY HELTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. The approval is granted in accordance with the provisions of Laws and Rules For Sewage, Treatment and Disposal 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.

*** This Improvement permit is transferable.

3-23-04
DEHNR Authorized Agent Date

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
C/o HAL MARSHALL CTR.
SUITE 211
700 N. TRYON ST.
CHARLOTTE, NC 28202
(704) 336-5103

5/12/04
Owner/Agent Signature Date

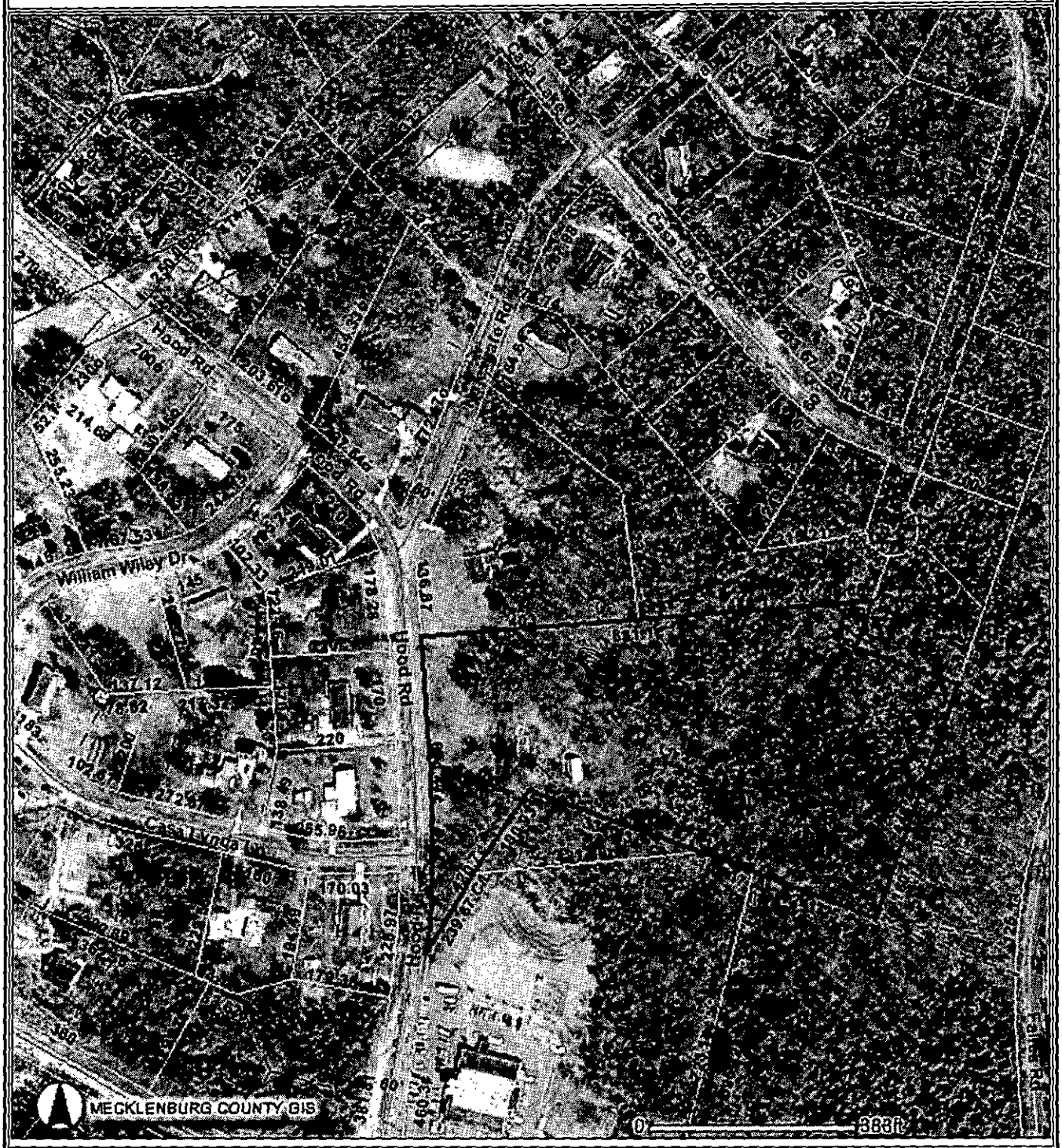
NORTH CAROLINA DEPARTMENT OF
ENVIRONMENTAL, HEALTH, AND
NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Fri Nov 19 16:23:22 EST 2004



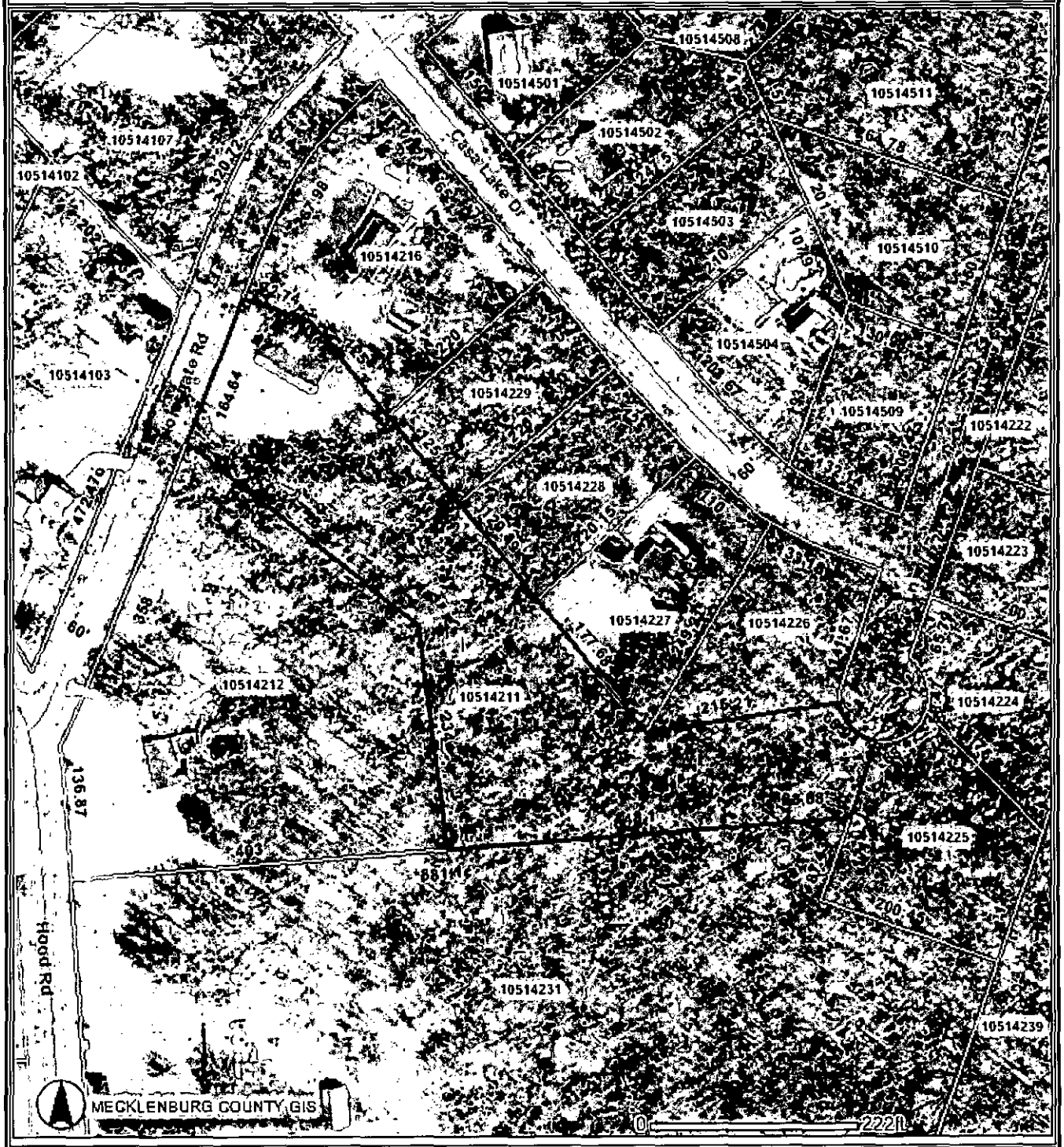
This map is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, planimetric maps, and other public records and data. Users of this map are hereby notified that the aforementioned public primary information sources should be consulted for verification. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.

Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Fri Nov 19 16:22:26 EST 2004



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CERTIFICATE OF COMPLETION/OPERATION PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 5275 B DATE: 10-29-04

TC: ~~105-142-31~~ 105-142-31 ☐ L ☑ CRT

SERIAL 19714

Name of Owner THE CHURCH IN CHARLOTTE Juris.: _____

Address of Property 8700 HOOD ROAD.

Inspection Data:

Tank Material 3000 GAL ST / 2000 GAL PT

Total Length of Drainfield 1250'

Number of Lines 10 @ 125'

Cover Depth 12"

Water Supply Source MUNICIPAL

Distance to Water Source > 10'

Excavation Inspected 10/26/04

Tank(s) Inspected 10/26/04

Wash Line Inspected N/A

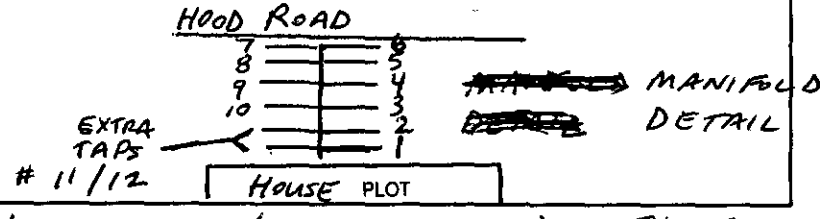
High Water Alarm Inspected 10-29-04

DREW WALKER INSPECTED ON 10-26-04

& SEE INSTALLATION APPROVAL #19810 FOR SYSTEM SKETCH.

54.8 GPM @ 54 FT. HEAD

PUMP MODEL: MYERS ME50S-11



Design 3000 ST/2000 PT/P1/3750 S.F.T./INOV (EZ-FLOW) CTR# STEVE LEE

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☑ installed or constructed ☐ altered or repaired

☑ in accordance with the permit issued ☐ as detailed in the plot above

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. This issuance of this

☐ Certificate of Completion ☑ 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 operate properly. This document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 15A NCAC 18A. 1990 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/revocation of this permit.

COMMENTS: SYSTEM DESIGNED FOR A 300-SEAT CHURCH W/ KITCHEN. INSTALLED 10 LINES AT 125' x 3' W/ PRESSURE MANIFOLD, & TYPE III 6,9 SEPTIC SYSTEM

- 10-28-04 (11:30 AM) LEVEL = 35½" } WATER TEST PUMP TANK
- 10-29-04 (12 PM) LEVEL = 35½"

RST 10-29-04
Environmental Health Specialist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

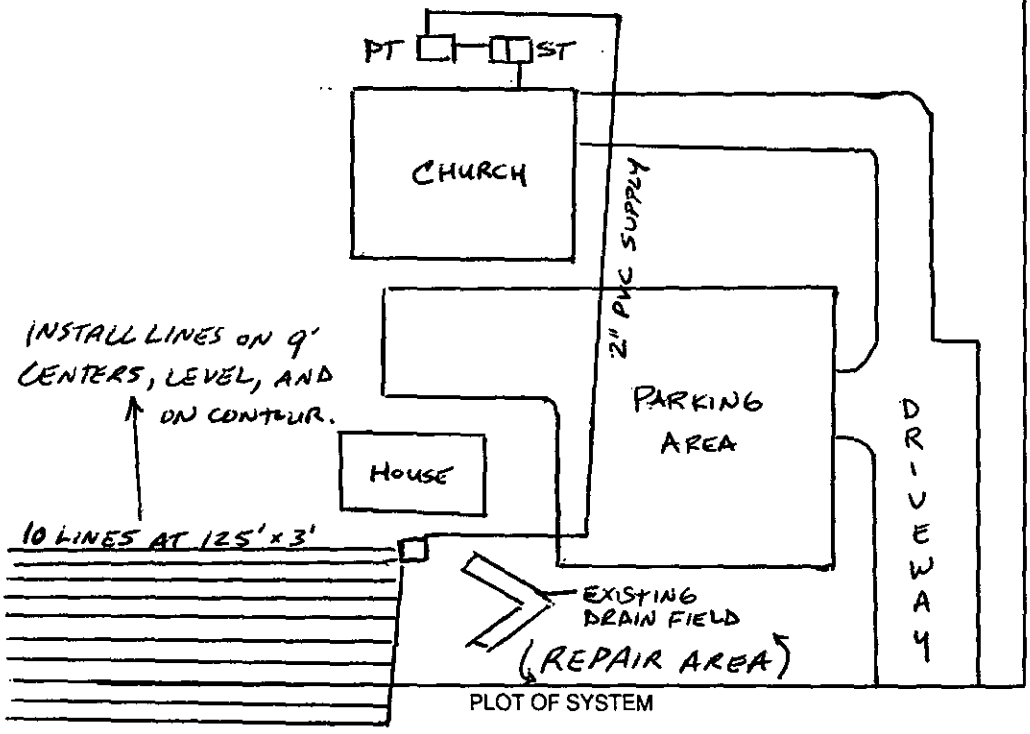
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 5275B DATE: 9/1/04

TC: 105-142-31 ☒ L

SERIAL 19810

Permission is hereby given to ✓ (Install) or Construct, _____ Alter or Repair the individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge as specified herein at the described location. This permit is granted based upon the information supplied in the application dated _____. All work shall be completed on or before 9/30/04, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A. 1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Health Department before any system can be covered up or placed into service. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed 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 operate properly.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 3000 gallons

Liquid Capacity of Dosing Tank 2000 gallons

Tank Construction PCC

Trench Depth 24"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous YES

Total Line Length 1250 feet

Number of Lines 10 @ 125'

Depth of Stone N/A inches

Distance from House > 5 feet

Distance from Property Line > 10 feet

Distance from Well > 50 feet

NOTICE: This system shall not be installed while soils are in a wet condition.

NAME OF OWNER JAMES CAMP

LOCATION OF PROPERTY 8700 HOOD RD CHARLOTTE, NC

Comments: SYSTEM DESIGNED FOR 300 SEAT CHURCH W/ KITCHEN
INSTALL 10 LINES AT 125' x 3' W/ PRESSURE MANIFOLD
TYPE III b, g SEPTIC SYSTEM (INNOVATIVE W/ PUMP)

Tim Thomas, RSI 9/1/04
Environmental Health Specialist

WHITE - HEALTH DEPARTMENT's COPY • CANARY - E.H.S. COPY • PINK - OWNER OR AGENT's COPY

PROPOSED PLOT PLAN

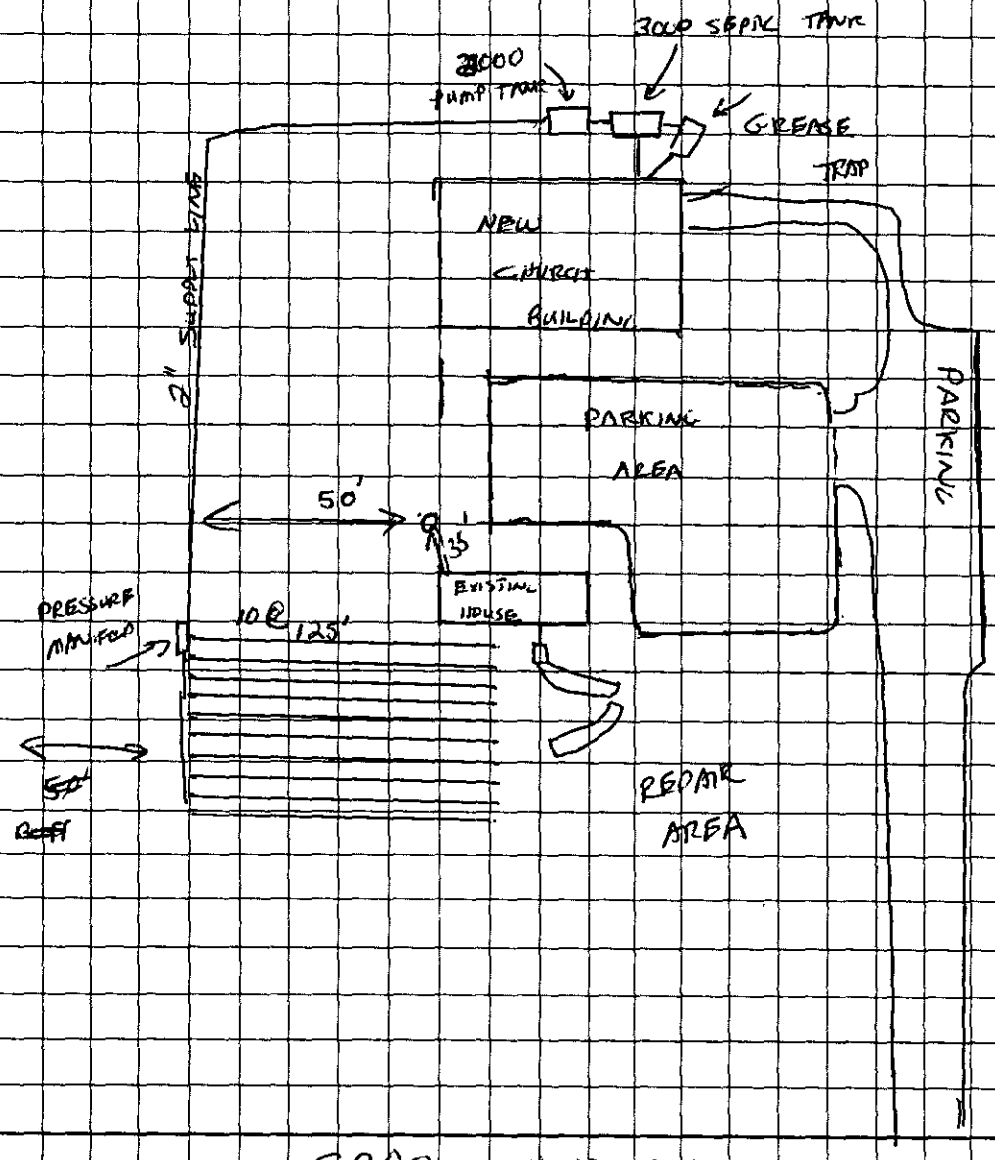
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 52758

TC: 105-142-31

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.

* SEE SITE PLAN SUBMITTED BY EAGLE ENGINEERING FOR MORE DETAILED, SCALED DIMENSIONS



8700 HOAD ROAD

X Jamie Camp
OWNER/AGENT SIGNATURE

DATE X 5/17/04

APPROVAL DATE 3/23/04

White - Health Department's Copy

Canary - E.H.S. Copy

Pink - Owner's Copy

Solution is Yellow: Coliform bacteria is present. Corrective action is necessary.

levels are within EPA standards.

A darker shade (positive) indicates a dangerous pollution level.

Other Products:				
Bacteria	Arsenic	Pesticide	Lead	Iron Hardness
Comprehensive School Kit	Standard School Kit	Project School Kit		

CALL *BILL AGLE* 1-800-788-4825 FOR CURRENT PRICING

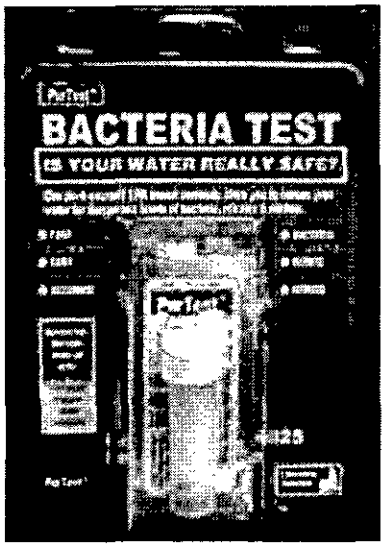
Email: bill@purtest.com

FAST EASY ACCURATE ECONOMICAL

PurTest®

PURTEST® BACTERIA, NITRATE, NITRITE TEST KIT

PurTest® BACTERIA, NITRATE, NITRITE test kits is laboratory certified to accurately detect the presence of coliform bacteria, including E. coli. PurTest® has been used by health departments, utilities and inspectors.



Water experts recommend testing home water at least:

- Once a year for municipal water users
- Twice a year for well water users
- Four times a year for those with low immunities (such as HIV patients), or for anyone on chemotherapy
- Whenever you suspect a problem or a problem is reported in your area

The cleanest, best tasting water may contain undetected contaminants. Water contaminated with harmful bacteria, nitrates or nitrites can cause diarrhea, cramps, nausea, headache, serious illness, even death.

PurTest® NITRATE & NITRITE instantly detect potentially harmful levels of these pollutants, which for infants may cause a sometimes fatal "blue baby" condition.

BACTERIA TEST	**NITRATE, NITRITE TEST**
Add water, set aside for 48 hours	Dip strip in water sample.
RESULTS AFTER 48 HOURS	RESULTS AFTER 60 SECONDS
Solution is Purple: No coliform bacteria.	A color match or shade lighter (negative) indicates nitrate and nitrite

MECKLENBURG COUNTY
Health Department

The Church in Charlotte
8700 Hood Road
Charlotte, NC 28215

Conditions of the Improvement Permit
Permit # 5275-b

1) This permit is designed for a use as a church sanctuary with 300 seats and kitchin/servery with a designed daily flow of 5 gallons per seat.
2) This will require a 3000 gallon septic tank, at least a 2000 gallon pump tank and a grease trap.If the pump tank is two-piece design with a seam in the middle, it must be water-tested over 24 hours to prove that it is leak-proof.
3) A pressure manifold will be required as a distribution device.
4) The drainfield will consist of 1250 linear feet of Type III-g innovative installation that allows for a 25% reduction in total linear conventional drainline.
5) All parts of the septic tank system shall be at least 50 feet from any residential wells and 100 feet from any wells serving the church.
6) The pressure head of at least 2 feet on the pressure manifold must be set before issuing an operation permit.
7) This is considered a Type III-b,g system which is required by state law to be inspected by the local health department at least once every five years with the owner responsible for any fees as determined by the Mecklenburg County Board of Commissioners.

James Capps
Owner/ Agent

5/17/04
Date

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

Sheet: 1
Property ID: 105-142-31
Lot #:
File #: 5275B
Code: 2

AC
Ind. site

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: The Church in Charlotte
Applicant: Eagle Engineering
Address: 8700 Hood Road, Charlotte, N. C. 28215
Date Evaluated: Kenny Owens
Proposed Facility: Church
Design Flow (.1949): 3750gpd
Property Size: 1.0a inv.
Location of Site: 8700 Hood Road
Property Recorded:
Water Supply: [x] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [x] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [x] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	hood road, C 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	LS, 10	0-7	GR/SCL	FR/SEXP/SS/SP	>41" TO SOIL WETNESS	41	N/A	NONE	PS, IV .25GPD/FT^2
		7-15	SBK/SCL	"					
		15-41	SBK/SC	FI/SEXP/S/P					
2	"	0-8	GR/SCL	FR/SEXP/SS/SP	>34" TO SOIL WETNESS	34+	"	"	US
		8-34	SBK/C	FI/SEXP/S/P					
		34+	SBK/C	VFI/EXP/VS/VP					
3	"	0-7	GR/SCL	FR/SEXP/SS/SP	>26" TO SOIL WETNESS	26	"	"	US, IV .1GPD/FT^2
		7-26	SBK/SC	FI/SEXP/S/P					
4	"	0-8	GR/SCL	FR/SEXP/SS/SP	2.5Y5/1@18"	20	"	"	US
		8-20	SBK/SC	VFI/EXP/VS/VP					
5	"	0-6	GR/SCL	FR/SEXP/SS/SP	>16" TO SOIL WETNESS	16	"	"	US, III
		6-16	SBK/SCL	"					
		16+	M/SCL	"					
6	"	0-7	GR/SCL	FR/SEXP/SS/SP	2.5Y6/1@18"	19	"	"	US
		7-19	SBK/SC	VFI/EXP/VS/VP					

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

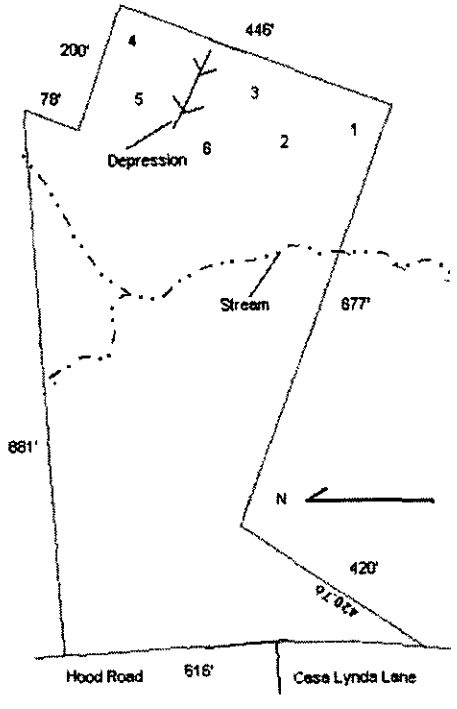
Other Factors (.1946): _____
Site Classification (.1948): UNSUITABLE
Evaluated By: W. R. Marlin, LSS, 7/17/2003, W. R. Marlin
Others Present:

FILE # 5275B

COMMENTS: 100% repair, would need pump

LANDSCAPE POSITIONS	GROUP	TEXTURES	.1955 LTAR	CONSISTENCE MOIST	WET
R-RIDGE	I	S-SAND	1.2 - 0.8		
S-SHOULDER SLOPE		LS-LOAMY SAND		VFR-VERY FRIABLE	NS-NON-STICKY
L-LINEAR SLOPE				FR-FRIABLE	SS-SLIGHTLY STICKY
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8 – 0.6	FI-FIRM	S-STICKY
N-NOSE SLOPE		*L-LOAM*		VFI-VERY FIRM	VS-VERY STICKY
H-HEAD SLOPE				EFI-EXTREMELY FIRM	NP-NON-PLASTIC
CC-CONCLAVE SLOPE	III	SI-SILT-	0.6 – 0.3		SP-SLIGHTLY STICKY
CV-CONVEX SLOPE		SIL-SILT LOAM			P-PLASTIC
T-TERRACE		CL-CLAY LOAM			VP-VERY PLASTIC
FP-FLOOD PLAN		SCL-SANDY CLAY LOAM			
		SICL-SILTY CLAY LOAM			
	IV	SIC-SILTY CLAY	0.4 – 0.1		
		C-CLAY			
		SC-SANDY CLAY			

STRUCTURE	MINERALOGY
SG-SINGLE GRAIN	SLIGHTLY EXPANSIVE
M-MASSIVE	
CR-CRUMB	EXPANSIVE
GR-GRANULAR	
SBK-SUBANGULAR BLOCKY	
ABK-ANGULAR BLOCKY	
PL-PLATY	
PR-PRISMATIC	



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

Sheet: 1
Property ID: 105-142-31
Lot #:
File #: 5275B
Code: 2

ACS

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: The Church in Charlotte
Applicant: Kenneth I. Owens
Address: 8700 Hood Road, Charlotte, N. C.
Date Evaluated: 06/17/2003
Proposed Facility: Church
Design Flow (.1949): 3750gpd
Property Size: 1.0a. Inv.
Location of Site: 8700 Hood Road
Property Recorded:

Water Supply:	[x] Public	[ ] Individual	[ ] 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	LS, 10	0-6	GR/SCL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48+	N/A	NONE	PS, IV .3GPD/FT^2
		6-40	SBK/C	FI/SEXP/S/P					
		40-48+	SBK/CL	FR/SEXP/SS/SP					
2	"	0-4	GR/SCL	"	"	"	"	"	"
		4-38	SBK/C	FI/SEXP/S/P					
		38-48+	SBK/CL	FR/SEXP/SS/SP					
3	"	0-4	GR/SCL	"	"	"	"	"	"
		4-39	SBK/C	FI/SEXDP/S/P					
		39-48+	SBK/CL	FR/SEXP/SS/SP					
4	"	0-12	GR/SCL	"	"	"	"	"	"
		12-41	SBK/C	FI/SEXP/S/P					
		41-48+	SBK/CL	FR/SEXP/SS/SP					
5	"	0-8	GR/SCL	"	"	"	"	"	"
		8-42	SBK/C	FI/SEXP/SS/SP					
		42-48+	SBK/CL	FR/SEXP/SS/SP					
6	"	0-9	GR/SCL	"	"	"	"	"	"
		9-45	SBK/C	FI/SEXP/S/P					
		45-48+	SBK/CL	FR/SEXP/SS/SP					
7	"	0-10	GR/SCL	"	"	"	"	"	"
		10-41	SBK/C	FI/SEXP/S/P					
		41-48+	SBK/CL	FR/SEXP/SS/SP					

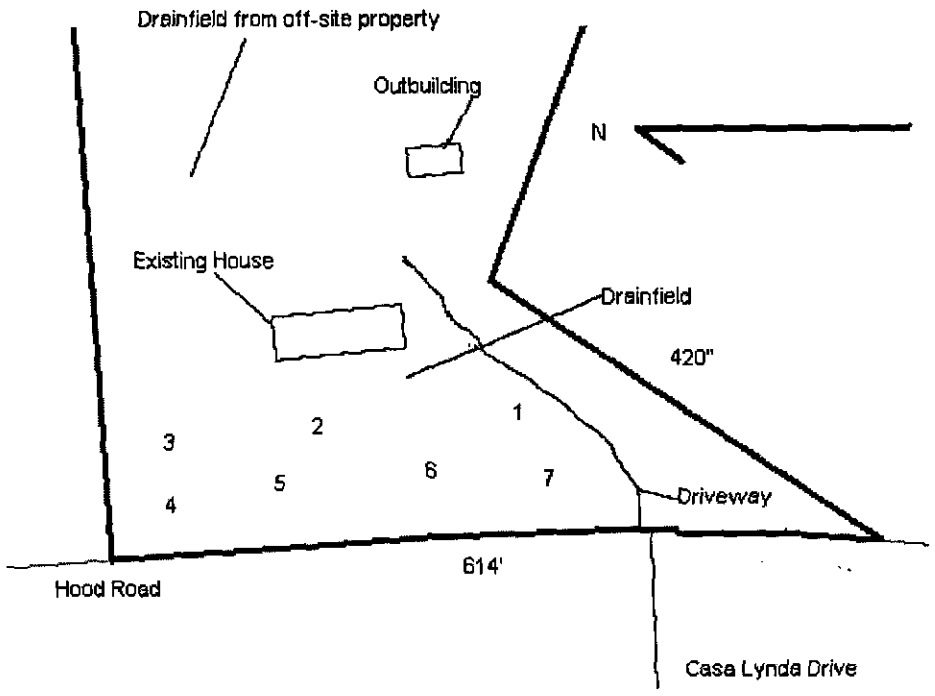
Description	Initial System	Repair System
Available Space (.1945)	US	US
System Type(s)		
Site LTAR	.3GPD/FT^2	.3GPD/FT^2

Other Factors (.1946): _____
Site Classification (.1948): UNSUITABLE
Evaluated By: W. R. Marlin, LSS, 6/17/2003. W. R. Marlin
Others Present: K. Owens

COMMENTS: 100% repair, pump, limited area

LANDSCAPE POSITIONS	GROUP	TEXTURES	.1955 LTAR	CONSISTENCE MOIST	WET
R-RIDGE	I	S-SAND	1.2 - 0.8		
S-SHOULDER SLOPE		LS-LOAMY SAND		VFR-VERY FRIABLE	NS-NON-STICKY
L-LINEAR SLOPE				FR-FRIABLE	SS-SLIGHTLY STICKY
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8 – 0.6	FI-FIRM	S-STICKY
N-NOSE SLOPE		L-LOAM		VFI-VERY FIRM	VS-VERY STICKY
H-HEAD SLOPE				EFI-EXTREMELY FIRM	NP-NON-PLASTIC
CC-CONCLAVE SLOPE	III	SI-SILT-	0.6 – 0.3		SP-SLIGHTLY STICKY
CV-CONVEX SLOPE		SIL-SILT LOAM			P-PLASTIC
T-TERRACE		CL-CLAY LOAM			VP-VERY PLASTIC
FP-FLOOD PLAN		SCL-SANDY CLAY LOAM			
		SICL-SILTY CLAY LOAM			
	IV	SIC-SILTY CLAY	0.4 – 0.1		
		C-CLAY			
		SC-SANDY CLAY			

STRUCTURE	MINERALOGY
SG-SINGLE GRAIN	SLIGHTLY EXPANSIVE
M-MASSIVE	
CR-CRUMB	EXPANSIVE
GR-GRANULAR	
SBK-SUBANGULAR BLOCKY	
ABK-ANGULAR BLOCKY	
PL-PLATY	
PR-PRISMATIC	



2nd site Evaluation

FEE: 400 CK# 12201

DATE: ~~6-2-03~~ 6/4/03 Drew

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM APPLICATION FOR IMPROVEMENT PERMIT FOR COMMERCIAL/INDUSTRIAL SITE

6/11/03

[redacted] 1 CRT

TYPE APPLICATION: ✓ NEW SYSTEM ___ EXPANSION OF EXISTING SYSTEM ___ REPAIR OF EXISTING SYSTEM

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

FILE #: 52,75B (Ref 17146)

PROJECT TRACKING #: ___

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION: SEE MAP PROVIDED

TAX/PARCEL NUMBER: ~~56-210-912~~, 105-142-31

✓ COMMERICAL ___ INDUSTRIAL

STREET ADDRESS: HOOD ROAD Rd, CHARLOTTE, NC

DESCRIBE TYPE OF BUSINESS:
THE CHURCH OF IN CHARLOTTE
Square Footage of Facility:
NUMBER OF EMPLOYEES: [redacted] 250 SEATS
PER SHIFT: ___

LOT NUMBER:

TOWNSHIP (CHECK ONE):

✓ 0 MECKLENBURG
___ 1 CHARLOTTE
___ 2 DAVIDSON
___ 3 CORNELIUS
___ 4 PINEVILLE
___ 5 MATTHEWS
___ 6 HUNTERSVILLE
___ 7 MINT HILL

HOW WILL WATER BE USED IN THE FACILITY:

✓ TOILETS/URINALS
✓ HANDSINK
___ SHOWERS
___ FLOOR DRAINS
OTHER, PLEASE DESCRIBE: KITCHEN FACILITY PROPOSED

RECEIVED BY BA DATE 5/29/03

An IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change.

TYPE OF WASTEWATER:
✓ SEWAGE
___ INDUSTRIAL PROCESS WASTE WATER

IF EXPANSION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED ADDITION:
NA

WATER SUPPLY (CHECK ONE): ✓ COMMUNITY (C) ___ MUNICIPAL (M) ___ PRIVATE WELL (P) ___ SHARED WELL (S) ___ OTHER 'SPRINGS' (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES	___ YES ___ NO	WELL SPRINGS OR WATERLINES	___ YES ✓ NO
EXISTING WASTE WATER SYSTEMS	✓ YES ___ NO	DESIGNATED WETLANDS	___ YES ✓ NO
EASEMENTS OR RIGHT-OF-WAYS	___ YES ___ NO		

BUILDING PLANS TO INCLUDE ALL PLUMBING, FLOOR DRAINS AND ALL SOURCES OF WASTEWATER DISCHARGE AND GRADING PLANS MAY BE REQUIRED DURING THE EVALUATION STAGE.

PROPERTY OWNER: [redacted] THE CHURCH OF IN Co,

NAME: (LAST) (FIRST) (MI)

ADDRESS: 870 HOOD ROAD

CITY: CHARLOTTE STATE: NC ZIP:

DAYTIME PHONE: 704 219 - 6885

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: OWENS KENNETH LEE (LAST) (FIRST) (MI)

DAYTIME PHONE: 704 882 - 4222

EAGLE ENG

310 INDIAN TRAIL - FAIRVIEW Rd. INDIAN TRAIL, NC 28079

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? ___

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 AGENTS OF THE MECKLENBURG COUNTY HEALTH DEPARTMENT TO ENTER ONTO THE PROPERTY FOR THE PURPOSE OF PROCESSING THIS REQUEST.

SIGNED: Kenneth L Owens DATE: 6-2-03

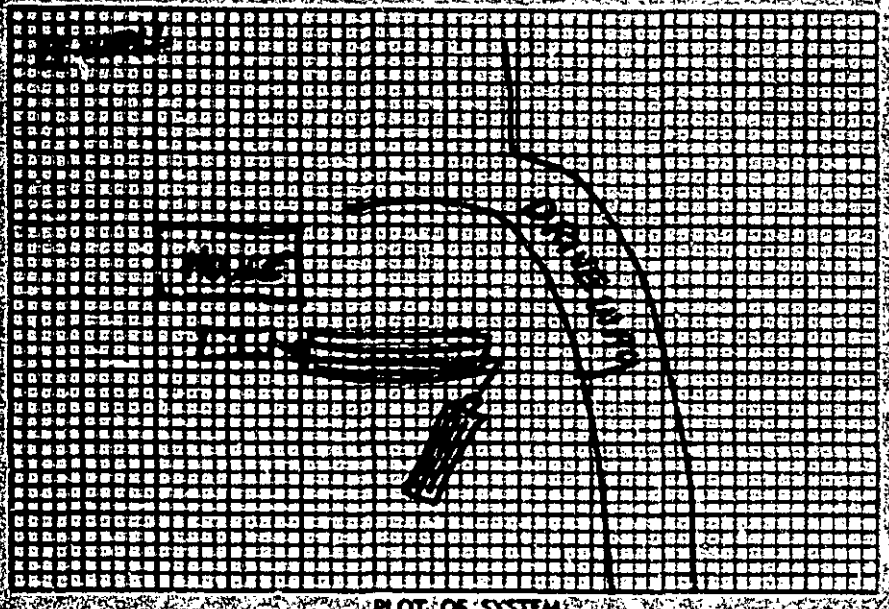
Serial No. 4174 ICAR(S) Permit No. 10146

Date Issued: 8/12/80 T.C. No. 105-153-09

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Permission is hereby given to ___ Install or Construct, ✓ Alter or Repair the individual septic tank wastewater treatment system with subsurface, soil absorption, effluent, discharge as specified herein at the described location. This permit is granted based upon the information supplied in application dated 8/12/80 and this permit shall be void and of no effect if the information provided in the application is not true or is erroneous. All work shall be completed on or before 9/15/80, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate REPAIR

Liquid Capacity of Tank —

Tank Construction —

Absorption and/or Nitrification Lines

Total Line Length 100'

Number of Lines 3

Distance from House >10'

Distance from Property Line >10'

Distance from Well >50'

NAME OF OWNER JAMES MILTON KING

LOCATION OF PROPERTY 8700 Hood Road

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Health Commission which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Environmental Health Director before any system can be covered up or otherwise rendered uninspectable or can be used. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed 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 operate properly.

9'x 34'x 17" of stone

Comments:

Division or Section Head

Environmentalist

If this permit is for the installation or construction of a new system, it must be signed by the division or section head of the Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

Environmental Health Department's Copy

2000

1500

1000

350
5
1750

5833
3|17500
15
25
24
10
9
1

194
3|5833
3
28
27
13
12
1

900 SF

42

750
5
3750

8
42|350
336

EAGLE ENGINEERING

Letter of Transmittal

Date: 6/2/03

EEI Job Number: 1122 C

Attention: Health Department
Enviromental Health Division
700 North Tryon Street
Charlotte, N.C. 28202

Re: The Church in Charlotte
Mecklenburg County, North Carolina

We are transmitting the following items:

☐ Prints ☑ Plans ☐ Specifications ☐ Application ☐ Report
☐ Copy of Letter ☐ Shop Drawings ☐ Calculations ☑ Check ☑ Other

Copies	Date	No.	Items to be Transmitted
1		1	Application for Commercial Site
1		2	Check
1		3	Copy of Plans

These are transmitted as checked below:

☐ For Approval ☐ For Review ☐ Approved as Submitted
☑ For Your Use ☐ Corrected Prints ☐ Approved as Noted
☑ As Requested ☐ Copies for Distribution ☐ Copies for Approval

Remarks: Please call our office if you have any questions.

Cc: File

Signed: Kenneth L. Owens, L.S.S. KK

Atlanta
1420 Shade Tree Way
Alpharetta, GA 30004
Ph 678.339.0640
Fax 678.339.0534

www.eagleonline.net
1-866.EAGLENC

Charlotte
310 Indian Trail-Fairview Road
Indian Trail, NC 28079
Ph 704.882.4222
Fax 704.882.4232

The Church in Charlotte
P.O. Box 560163
Charlotte, North Carolina 28256
(704) 717-7890 (tel)

December 1, 2003

Mecklenburg County Health Department
Commercial Plan Review Department
700 North Tryon Street
Charlotte, NC 28202

Re: Church in Charlotte Project at 8700 Hood Road

This letter is to certify that the Church in Charlotte, a North Carolina nonprofit corporation, **does not operate and will not operate** at the above-referenced location 1) a commercial food or beverage service, 2) N.C. licensed child day care, 3) adult day care, 4) educational institution, or 5) any other type of service in return for compensation. This property will be used for the private use of the church membership only.

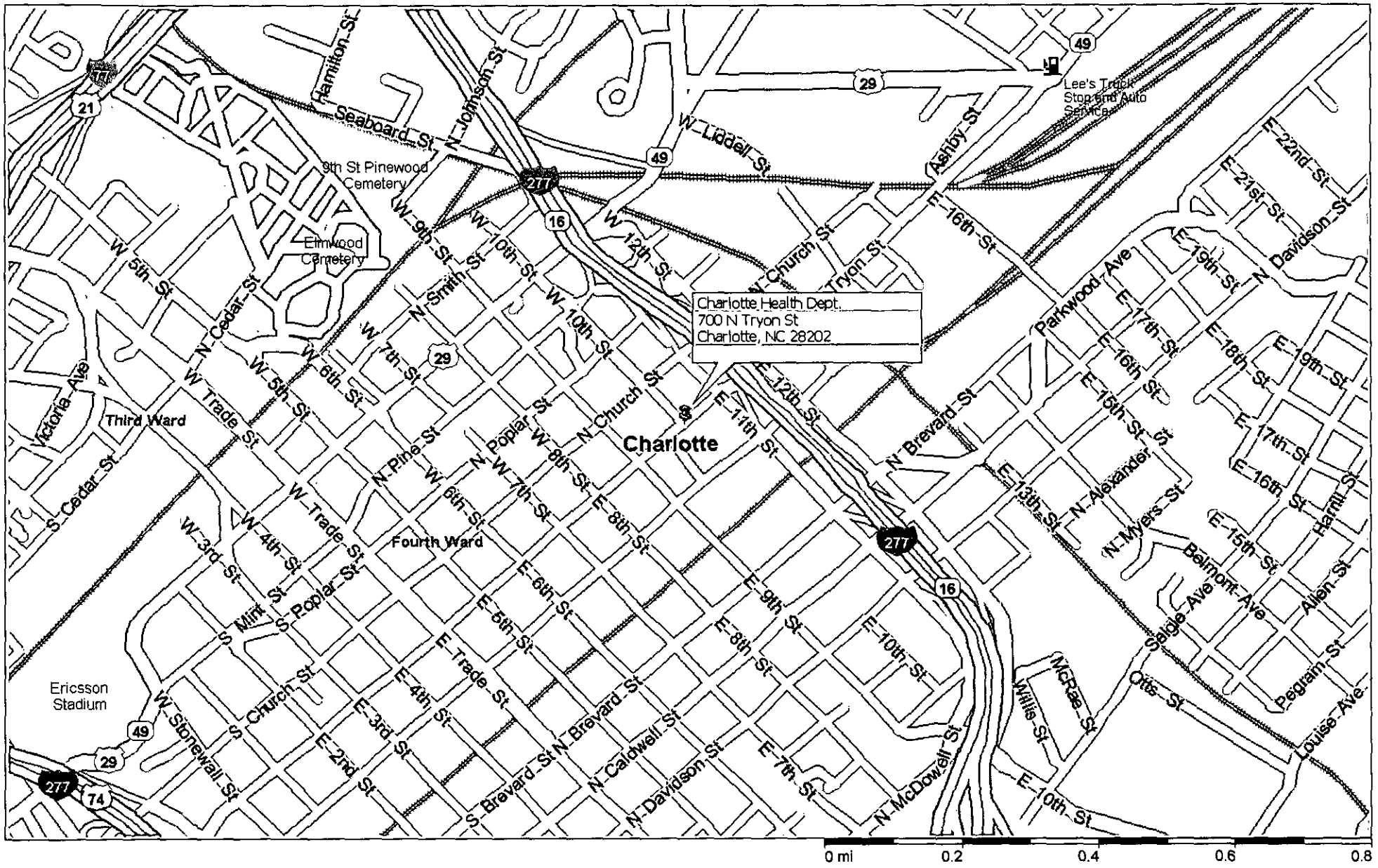
Sincerely yours,
The Church in Charlotte

Don Orr

Dave Pafford

Todd Olson

Fourth Ward, Charlotte, North Carolina



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E A G L E
ENGINEERING

Letter of Transmittal

Date: 12/22/2003

Attention: Mr. Drew Walker
700 N. Tryon Street
Suite 211
Charlotte, NC 28202

EEI Job Number: 1038-C

Re: THE CHURCH IN CHARLOTTE

We are transmitting the following items:

☐ Prints ☑ Plans ☐ Specifications ☐ Application ☐ Report
☐ Copy of Letter ☐ Shop Drawings ☐ Calculations ☐ Check ☐ Other

Copies	Date	No.	Items to be Transmitted
1	1/29/2004	1	Civil Site Development Plans
1	1/29/2004	2	Architectural Floor Plans
1	01/29/047	3	Plumbing plans
1	12/1/03	4	LETTER TO DEPT. OF HEALTH FROM CHURCH

These are transmitted as checked below:

☐ For Approval ☑ For Review ☐ Approved as Submitted
☐ For Your Use ☐ Corrected Prints ☐ Approved as Noted
☐ As Requested ☐ Copies for Distribution ☐ Copies for Approval

Remarks: Mr. Walker, attached are the plans for the above-referenced project, per your request

Cc: 1038-C-NC

Signed: Jeremia S. Murphy, E.I.

Atlanta
1061 Cambridge Square, Suite B
Alpharetta, GA 30004
Ph 678.339.0640
Fax 678.339.0534

www.eagleonline.net
1-866.EAGLENC

Charlotte
310 Indian Trail-Fairview Road
Indian Trail, NC 28079
Ph 704.882.4222
Fax 704.882.4232

37.5' CLASS 'C' BUFFER W/ FENCE

50' CLASS 'C' BUFFER

24" OAK

24" OAK

18" OAK

12-121' LATERALS WITH MIN. 9' SEPARATION

SEPTIC DRAINFIELD 108' X 121'

24" OAK

30" OAK

22" OAK

42" OAK

WELL

30" OAK

DISTRIBUTION BOX

EOP – EOP

24" DIP WATER MAIN

EX.

30' SETBACK

6" DOGWOOD

CB-1

CIPLE BACKFLOW MBLY INSTALLED ITHIN INSULATED U REQUIREMENTS AIN PORT(S) FOR U REQUIREMENTS ON SHEET C-7.1

STIC WATER ER AT R/W

ESTIC WATER SERVICE

BACKFLOW PREVENTER 70' FROM CL(35' + 30' TRANSITIONAL SETBACK)

24" OAK

18" OAK

81.36'

TES

HOOD ROAD

(SR 2826)

EXISTING 60' PUBLIC R/W

PER MB.9, PG. 409

70' MINOR THOROUGHFARE

6" RED BERRY

SEPTIC DRAINFIELD 100% REPAIR AREA 90' X 145'

42" OAK

10'

36" OAK

FORCE MAIN

1 FROM REMOTE CATION

180.93'

CB-2

MAINTAIN 10' SEPARATION

FES-3

FES-4