SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

☒ NEW SEPTIC ☐ REPAIR ☐ USE EXISTING ☐ MODIFIED PLOT PLAN ☐ ALTERATION

File Number: 11714B

Assigned Inspector: Jacob P

☒ IP $250.00: MO 7/12/23 Initial/Date

☐ IP Commercial $450.00: _____ Initial/Date

☒ CA & OP $400.00: paid upfront MO 7/12/23 Initial/Date

☐ Alteration Fees $300: _____ Initial/Date

☐ Modified Plot Plan Fees $100.00: _____ Initial/Date

☐ Use Existing Fees $100.00: _____ Initial/Date

☐ Use Existing Approved ☐ Use Existing Denied

☒ Send IP permit for signature: 9-12-23 AB ☒ Signature received: 9/14/23

☐ Floor plans reviewed

☒ Generate CA ☒ Approve as Noted in Winchester AB 11-21-23

☐ This site is served by septic and well. Verify each is complete before final hold is released

☐ This septic system requires a certified operation contract before final hold is released

☐ Certified operator contract is on file: _____

☒ Septic file complete: 1/22/25

☐ Release final hold in Winchester: _____

Comments:

Groundwater & Wastewater Services
Septic Project File & Data Review Worksheet

GWS File #: 11714B WASPS App #: 13986

Primary ES assigned to project: M. Hall

Secondary ES assigned to project: _____

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

I. File Review:

Rule or Law	Permit Application			
.1937(d)	Is the Application complete	Yes [ ]	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: _____			
	Were sufficient auger borings made?	Yes [ ]	No [ ]	N/A [ ]
.1939(d), .1955, .1956, .1957	LTAR	Yes [ ]	No [ ]	N/A [ ]
	Improvement Permit/Construction Authorization			
.1937(g) 130A-336(a)	Proposed System Type stated-Initial	Yes [ ]	No [ ]	N/A [ ]
.1945(b)	Proposed System Type stated-Repair	Yes [ ]	No [ ]	N/A [ ]
130A-336 (a)(3)	System location identifiable by setbacks - Initial	Yes [ ]	No [ ]	N/A [ ]
.1937(g) .1945(b)	System components shown – Initial	Yes [ ]	No [ ]	N/A [ ]
.1945(b)	Repair area shown	Yes [ ]	No [ ]	N/A [ ]
.1937 (f)(g)	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)	Is the System located in the approved area?	Yes [ ]	No [ ]	N/A [ ]
130A-336(a)	Is the Design flow (gpd) indicated?	Yes [ ]	No [ ]	N/A [ ]

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

Operation Permit

.1937(i)	System type as described in table V(a) of rule .1961	Yes ☐	No ☐	N/A ☐
.1937(i)	Conditions for system performance, operation, maintenance, monitoring and reporting.	Yes ☐	No ☐	N/A ☐

II. WASPS Review:

Construction authorization issued	Yes ☐	No ☐	N/A ☐
Installation approval issued	Yes ☐	No ☐	N/A ☐
Operation permit issued	Yes ☐	No ☐	N/A ☐
Other related documentation	Yes ☐	No ☐	N/A ☐

Items requiring correction/modification: _____

Comments:

_____

_____

_____

_____

_____

IA issued date: _____

OP issued date: _____

Review performed by: _____ Date performed: _____

11714B / 13986

MECKLENBURG COUNTY
HEALTH DEPARTMENT

12 JUL 23 PM 1:39

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: 11332123
STREET ADDRESS: 7421 Ann Smith Ln
CITY: Charlotte
STATE: NC ZIP: 28208
SUBDIVISION NAME: Lynn Parker
LOT #: 5 LOT SIZE (acres): 1.05
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: 4187
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 8
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 4 3 ____

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?** BK 72 PG 212 ☐ UNKNOWN

11. **WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?** _____ ☒ N/A

12. **PROPERTY OWNER:**

NAME: William R Homes LLC
ADDRESS: 8000 Corporate Center Dr STE 100
CITY: Charlotte
STATE: NC ZIP: 28226
WORK PHONE: 704 877 1178
MOBILE PHONE: 704 644 9221
FAX: _____
E-MAIL: jamie.williamrhomes@gmail.com

13. **OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:**

**Owner's Authorization form is required if legal representative is submitting application*

NAME: _____
ADDRESS: _____
CITY: _____
STATE: _____ ZIP: _____
WORK PHONE: _____
MOBILE PHONE: _____
FAX: _____
E-MAIL: _____

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Drive, Suite 8000, Charlotte, NC 28208
OFFICE: 980-314-1680, FAX: 704-336-6894 Email: Wellreg@MecklenburgCountyNC.gov

Revised on: 4/20/17

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.

_____ (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.

_____ 6/8/23

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

---

OFFICE USE ONLY

○ SURVEY PLAT TO SCALE SUBMITTED ○ SCALED SITE PLAN SUBMITTED ○ UN-SCALED SITE PLAN SUBMITTED

SEPTIC APPLICATION FEE RECEIVED: $ 650 (Paid OP+CA) DATE FEE RECEIVED: 7/12/23

WELL APPLICATION FEE RECEIVED: $ 550 DATE FEE RECEIVED: 7/12/23

APPLICATION PROCESSED BY: PR

GWS FILE NUMBER ASSIGNED: _____

APPLICATION ID NUMBER ASSIGNED: _____

COMMENTS:

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Drive, Suite 8000, Charlotte, NC 28208
OFFICE: 980-314-1680, FAX: 704-336-6894 Email: Wellreg@MecklenburgCountyNC.gov

THIS IS TO CERTIFY THAT THIS EXHIBIT WAS PREPARED UNDER MY SUPERVISION AND THAT THE EXHIBIT WAS PREPARED FOR THE PURPOSE OF SITE PLAN ONLY, AND IS NOT INTENDED TO BE A BOUNDARY SURVEY OF PROPERTY SHOWN.

DATE OF EXHIBIT JULY 6, 2023

SIGNED _____
PROFESSIONAL LAND SURVEYOR



~LAKE WYLIE~

L20 L21 L22 L24 L23

FEMA FLOOD FRINGE LINE

FUTURE CONDITIONS FLOOD FRINGE LINE

50' BUFFER (FROM TOP OF BANK)

35' REAR YARD

5' SIDE YARD

~NOW OR FORMERLY~
WILLIAM R HOMES LLC
DB 37439/721
PID# 11332122
~LOT 4~

~NOW OR FORMERLY~
CAROL E & MARGARET G SMITH
DB 9608/685
PID# 11332109

PROPOSED HOUSE

N52°50'59"W 305.92

S37°04'03"E 90.76

S51°13'07"E 69.02

8.0

8.0

18.2

20' SETBACK

30' DUKE POWER EASEMENT

C1

C2

C3

C4

5' SIDE YARD

20' SETBACK

LOT 5
1.051 ACRES
FPE: 573.3'

DRIVE

N87°03'42"W 212.64

S18°10'00"E 99.92

20' SETBACK

RIGHT OF WAY

ANN SMITH ROAD
60' PUBLIC RIGHT OF WAY
(MB 35/255)

RIGHT OF WAY

Lot Line being moved to this Location

NOTES:

1. PID NA

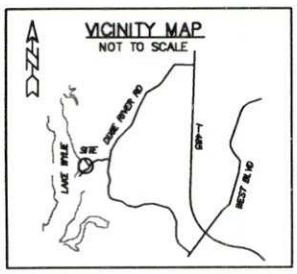
2. THIS PROPERTY MAY BE SUBJECT TO ADDITIONAL RECORDED OR UNRECORDED EASEMENTS, SETBACKS AND BUFFERS INCLUDING THOSE WITHIN THE APPLICABLE UNIFIED DEVELOPMENT ORDINANCE (UDO), RIGHTS-OF-WAY, IMPERVIOUS AREAS & BUILT UPON AREA (BUA) RESTRICTIONS, AND/OR RESTRICTIVE COVENANTS, OTHER THAN SHOWN.

3. A PORTION OF THIS PROPERTY IS LOCATED WITHIN AN AREA HAVING A ZONE DESIGNATION AE BY THE FEDERAL EMERGENCY MANAGEMENT AGENCY (FEMA), ON FLOOD INSURANCE RATE MAP (FIRM) NO. 3710450200L, WITH A DATE OF IDENTIFICATION OF 09/02/2015.

4. PROPERTY ZONED: R-5 SETBACKS SHOWN ARE PER RECORDED PLAT AND ARE SUBJECT TO INTERPRETATION BY THE PROPER ZONING ADMINISTRATION.

5. NOT ALL IMPROVEMENTS SHOWN.

6. CONTRACTOR WILL CONFIRM PLACEMENT OF STRUCTURE BEFORE STAKING IS PERFORMED.



CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	50.00'	199.08'	N71°47'31"W	91.31'
C2	70.00'	58.88'	N18°14'20"E	57.16'
C3	69.14'	144.20'	N77°54'55"W	119.45'
C4	254.25'	63.34'	S25°18'14"E	63.18'

SITE PLAN
OF

LOT 5 of LYNN PARKER LANE
STEELE CREEK TOWNSHIP, MECKLENBURG COUNTY, NORTH CAROLINA

SCALE 1"=60'

COMPUTED FOR WILLIAM R HOMES, LLC.

MAP BOOK _____ PAGE _____ DEED BOOK _____ PAGE _____

DRAWN BY BC FIELD WORK _____ FIELD BOOK # _____

CAROLINA SURVEYORS, INC
P.O. BOX 267
PINEVILLE, N.C. 28134
(704) 889-7601
FAX: (704) 889-7614
CERTIFICATE OF AUTHORIZATION
NC: C-1242 SC: 886

CARLSON\2022\BAT\LYNN PARKER 2022\L\LYNN PARKER
PROJECT: 22-0227

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

Sheet: 1 of 2
Property ID: 11332123
Lot #: NA
File #: 11714B
AppID: 113986

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Property Owner: William R Homes
Address: 8000 corporate center dr ste 100 charlotte nc 28226
Proposed Facility: 4 bedroom
Design Flow (.1949): 480
Location:7421 ann smith
Water Supply: [ ] Public [] Individual [ ] Well
Evaluation Method: [X] Auger Boring [ ] Pit
Type of Wastewater: [X] Sewage [ ] Industrial Process

Applicant: William R Homes
Date Evaluated: 9/6/23
Property Size: 1.05 acre
Property Recorded:
[ ] Spring [ ] 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 10%	0-3	gr l	ss/sp/vfr/sexp	>48	48				PS .3	36"
		3-39	sbk c	ss/sp/fr/sexp							
		39-48	sbk cl	ss/sp/vfr/sexp							
Boring #2	LS 5%	0-2	gr l	ss/sp/vfr/sexp	>48	48				PS .3	36"
		2-40	sbk c	ss/sp/fr/sexp							
		40-48	sbk cl	ss/sp/vfr/sexp							
Boring #3	LS 10%	0-4	gr l	ss/sp/vfr/sexp	>48	48				PS .3	36"
		4-38	sbk c	ss/sp/fr/sexp							
		38-48	sbk cl	ss/sp/vfr/sexp							
Boring #4	LS 10%	0-5	gr l	ss/sp/vfr/sexp	>48	48				PS .3	36"
		5-41	sbk c	ss/sp/fr/sexp							
		41-48	sbk cl	ss/sp/vfr/sexp							
Boring #5	LS 10%	0-4	gr l	ss/sp/vfr/sexp	>48	48				PS .3	36"
		4-37	sbk c	ss/sp/fr/sexp							
		37-48	sbk cl	ss/sp/vfr/sexp							
Boring 6	LS 10%	0-2	gr l	ss/sp/vfr/sexp	>48	48				PS .3	36"
		2-40	sbk c	ss/sp/fr/sexp							
		40-48	sbk cl	ss/sp/vfr/sexp							

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	IIIg	IIIe
Site LTAR (gpd/sq ft)	.3	.3

Other Factors (.1946):
Soil Evaluation By: Matthew Hall
Others Present:
Site Classification (.1948): PS
Site Evaluation By: Matthew Hall
Others Present:

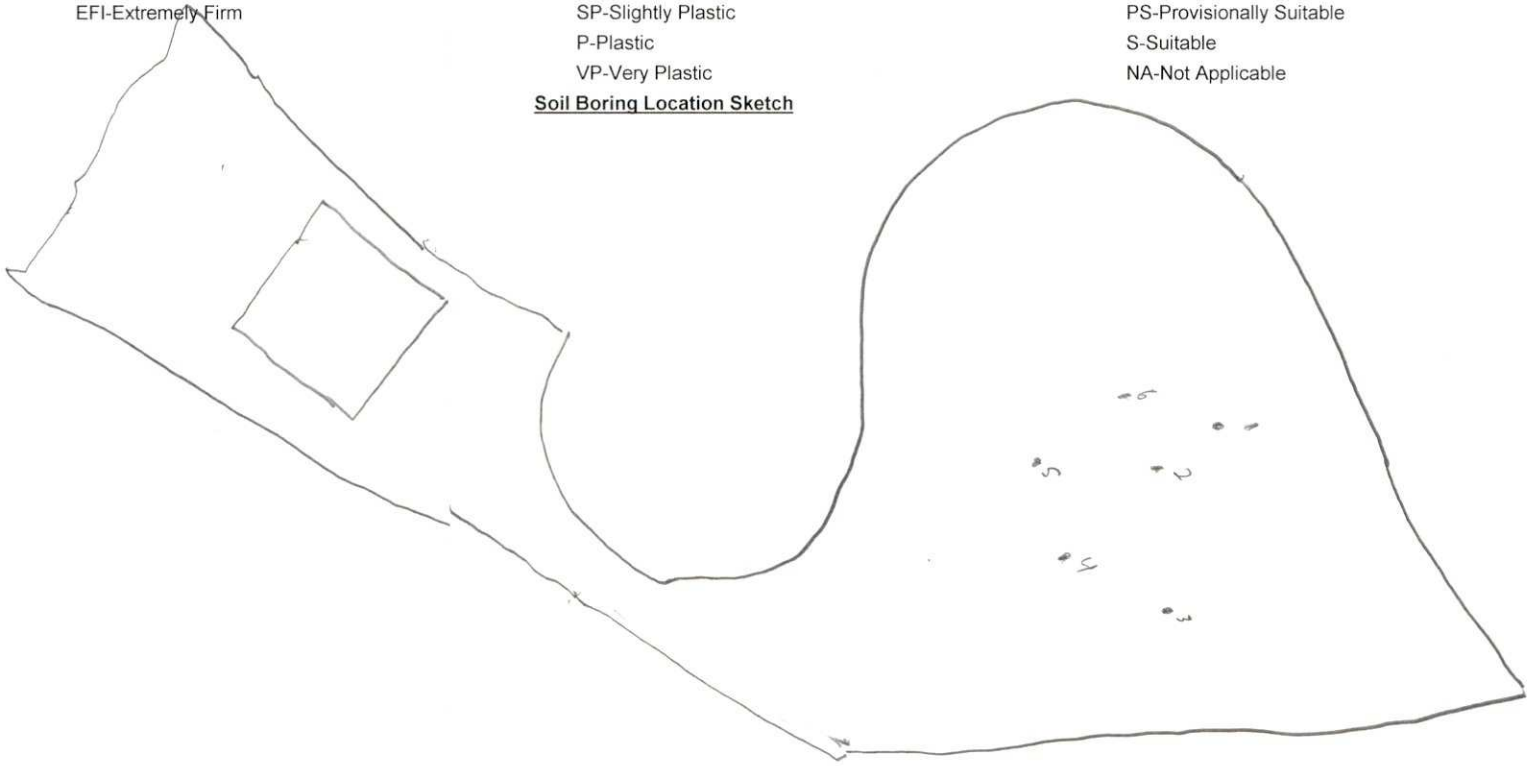
COMMENTS:

Sheet:
File:
AppID: 113986

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
		SiCL-Silty Clay Loam		
CV-Convex Slope				pr-Prismatic
T-Terrace				Sap-Saprolite
FP-Flood Plain		CL-Clay Loam		**Structure Prefixes**
D-Drainage Way		SCL-Sandy Clay Loam		w-weak m-moderate s-strong f-fine m-medium c-coarse
		Silt		
	IV	SC-Sandy Clay	0.4 - 0.1	
		SiC-Silty Clay		
		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

Soil Boring Location Sketch



Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr., Suite 8000 Charlotte, NC 28208
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 #: 30013986 GWS File #: 11714B Tax Parcel #: 113-321-23

- 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. 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):** 9/12/2028

Type of Installation: Residential - New System Lot Number: 5

Structure Type: HOUSE Size (ft^2): 4187 # Bedrooms: 4 Max. Occup.: 8

Building Foundation: Basement With Plumbing Water Supply: Private Well

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

1000 gal Septic
1000 gal Settling tank
(Grinder pump fed into settling tank)

Initial System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	N/A
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	800	Total Trench Length (ft):	400'
Maximum Trench Depth (in):	34	Depth of Media (in):	12	Distribution Device:	Drop Boxes		

III. Repair System Type: PPBPS (gravity) **System Classification:** ~~IIIg~~ IIIc gravity VIPBPS

Repair System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	N/A
Trench Width (ft):	2	Trench Spacing (ft):	8	Absorption Area (ft^2):	534	Total Trench Length (ft):	267
Maximum Trench Depth (in):	34	Depth of Media (in):	N/A	Distribution Device:	Drop Boxes		

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: Matthew Hall Owner/Legal Agent: James Ray
Print Name

Signature: Matt Hall Signature:

Date Issued: 9/12/2023

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr., Suite 8000 Charlotte, NC 28208
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 #: 30013986 GWS File #: 11714B

IV. Permit Conditions/Comments:

- All components of the septic system must be installed in accordance with the required setbacks listed on the corresponding plot plan.
- All components of the septic system must be located at least 100 ft. (50 ft. minimum) from all private wells.
- All waterlines must be located a minimum of 10 ft. from any part of the septic system.
- All components of the septic system must be located a minimum distance from the normal pool elevation or mean high water mark for the nearby body of water. See plot plan for minimum setback requirements.
- The supply pipe shall be installed with a minimum of 30" of compacted cover over the pipe or properly sleeved under areas that are subject to vehicular traffic.
- 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 25 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:

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Authorized Agent: Matthew Hall

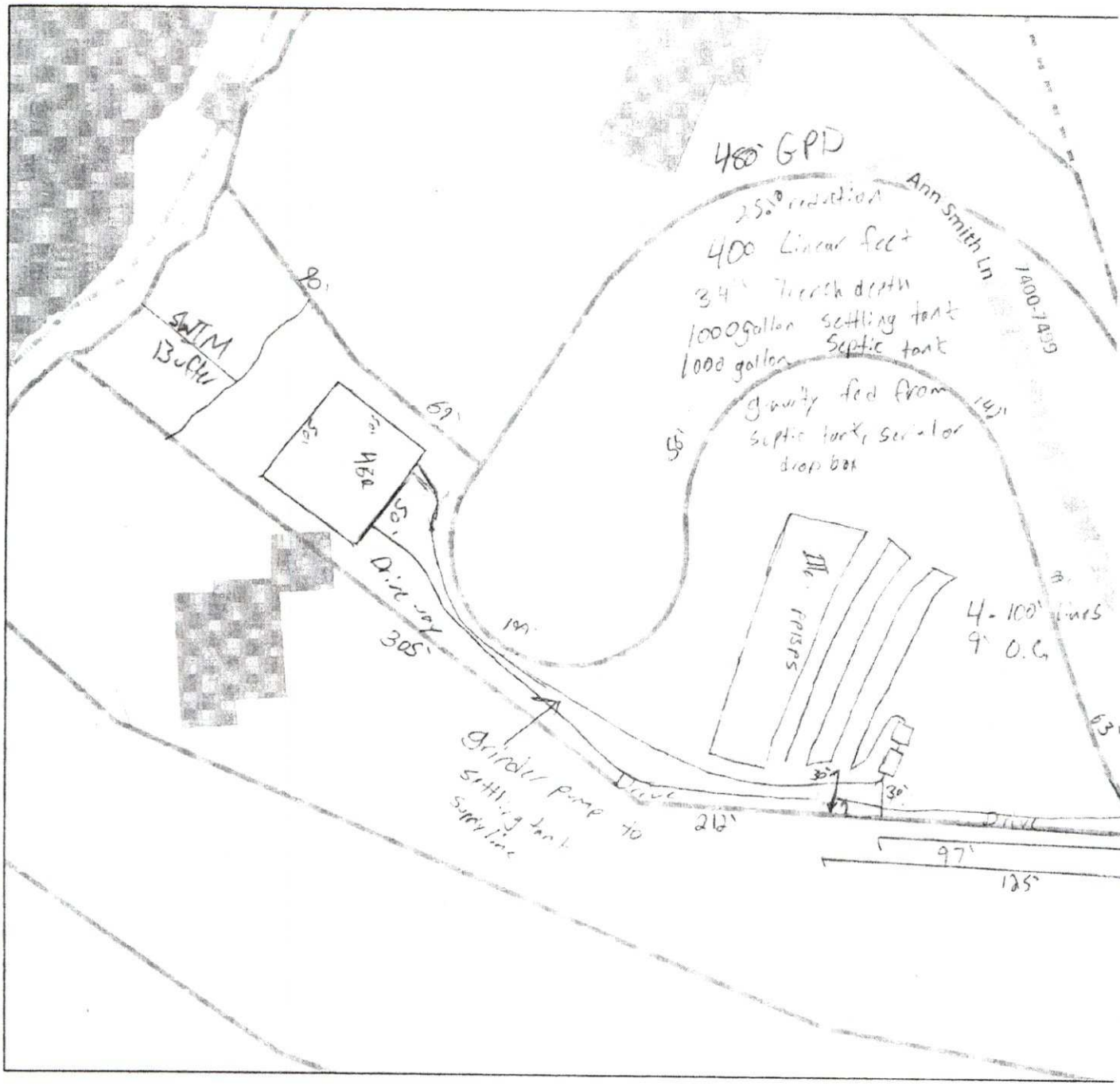
Signature: Matt Hall

Date Issued: 9/12/2023

Owner/Legal Agent: James Ray
Print Name

Signature:

On-site Wastewater Improvement Permit Diagram



Mecklenburg County Health Department
Environmental Health - Groundwater and Wastewater Services

Permit #: 3001396
PID #: 11332123
File #: 17143

Authorized Agent: Matt Hall Date: 9/12/23

Owner/ Legal Agent: James Ray Date: 9/14/23

1 inch = 60 fee

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000 Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

Septic System Pre-Construction Meeting Checklist

File # 117148 App# 13986 Tax Parcel# 113-321-23

Property Owner: William R Homes

Job Location Address: 7421 Ann Smith LN

City: Charlotte State: NC Zip Code: 28208

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 Baumgarner — Authorized Agent

5/15/24 — Date

Bryson Willis — Others Present

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NC DHHS
Division of Environmental Health
On-Site Wastewater Section

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

File #: 11714B Permit #: 13986 Tax Parcel #: 113-321-23

Property Owner: William R Homes

Job Location Address: 7421 Ann Smith LN

City: Charlotte State: NC Zip Code: 28208

Operation Permit Issuance Date: 5/15/24 Contractor Name: Dennis Willis

Permitted Design Flow: 480 GPD Liquid Capacity of ~~Dosing~~ Settling Tank: 1000 gallons

Liquid Capacity of Septic Tank: 1000 gallons Tank Manufacture Mull Effluent Pump Model: N/A

Drainfield Installation ☐ N/A

Trench Depth: 30 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 412 feet

# of Lines: 4 @ Various feet

Depth of Media: 12 inches (Type) CHM 36

Depth of Cover: 18 inches

Distribution Device: End Cap

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: 10'+ feet

Distance from Property Line: 10'+ feet

Distance from Water Supply Source: 100'+ feet

Inspection Dates

Tank(s) Inspected: 5/15/24

Excavation Inspected: 5/15/24

Pump & Controls Inspected: N/A

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)

See attached

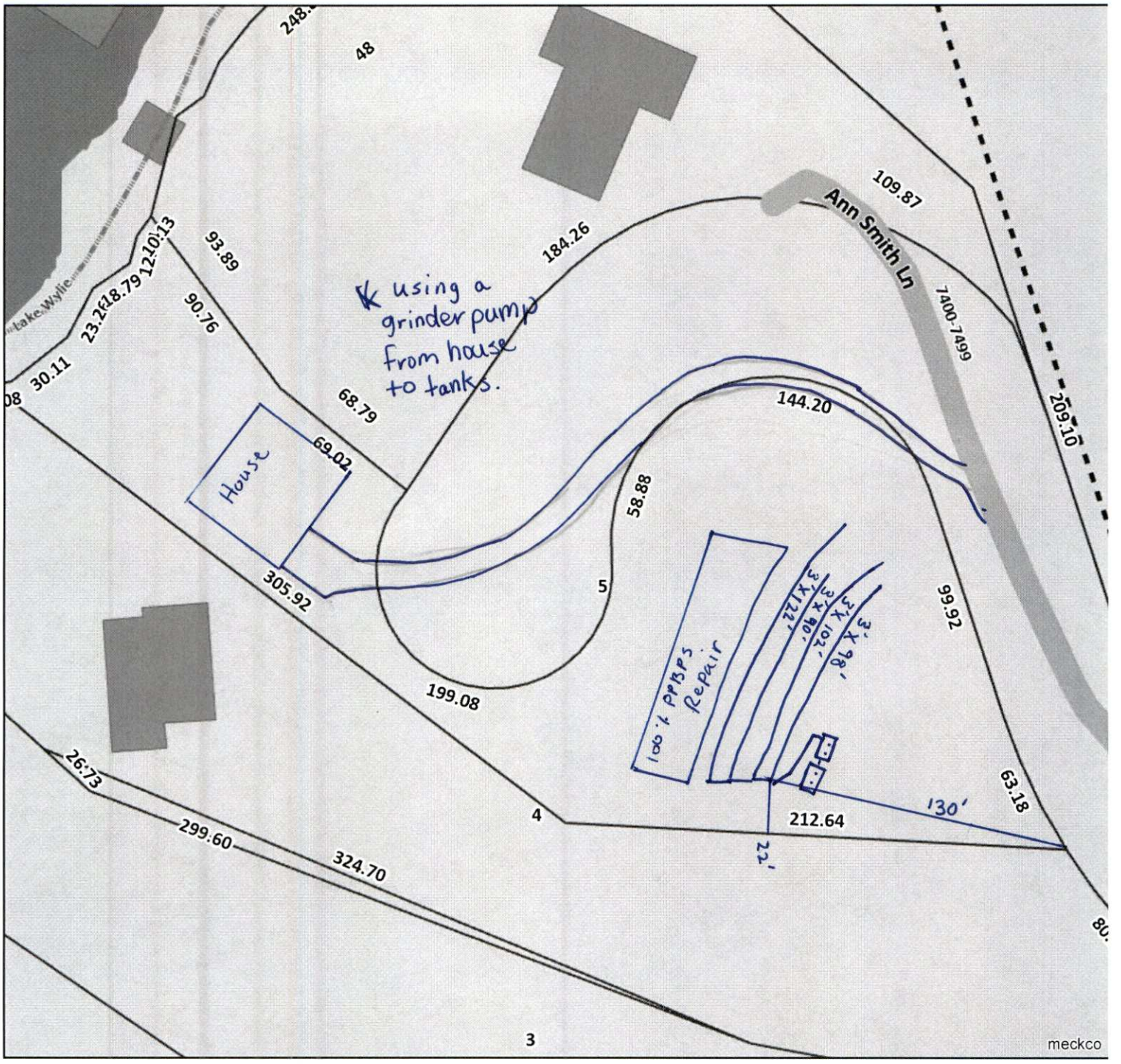
The undersigned has inspected the Septic Tank System described above, and certifies it has been ☐ installed ☐ altered ☐ repaired ☐ as detailed in the plot above ☐ in accordance with the permit issued and meets the provisions of 15A NCAC 18A. 1900, "Laws and Rules for Sewage Treatment and Disposal Systems" 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 operate 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: IIb/ G/ CHM 36/ NA/ NA

DENR Authorized Agent: April Bumgarner Signature: April Bumgarner

On-site Wastewater Improvement Permit Diagram



Mecklenburg County Health Department
Environmental Health - Groundwater and Wastewater Services

Permit #: 13986
PID #: 11332123
File #: 11714B

Authorized Agent: N/A Date: _____

Owner/ Legal Agent: N/A Date: _____

1 inch = 60 fee



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NC DHHS
Division of Environmental Health
On-Site Wastewater Section

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

File #: 17148 Permit #: 13986 Tax Parcel #: 113-321-23

Property Owner: William R Homes

Job Location Address: 7421 Ann Smith LN

City: Charlotte State: NC Zip Code: 28208

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: II b

*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: 5/15/24

Signature: April Bumgarner

FEE: 200.00
DATE: 11/21/2023

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

MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES

FILE NUMBER: 11714B

PERMIT NUMBER: 30013986

PARCEL NUMBER: 11332123

JOB LOCATION INFORMATION

ADDRESS: 7421 ANN SMITH LN

CITY: CHARLOTTE **STATE: NC** **ZIP:** 28208

ISSUED TO: WILLIAM R HOMES LLC

CONSTRUCTION AUTHORIZATION ISSUANCE DATE: 11/21/2023

CONSTRUCTION AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 30013986, 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 Bumgarner

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	07/12/23	**Amount:**	200.00
Receipt #:	143469	**Tendered:**	200.00
Check / Auth #:	CHECK 7486	**Returned:**	0.00
Received By:	ORTIZMP		

Account Information

Account #: 200000
Contractor: WILLIAM R HOMES, LLC
Attn:
Address: 8000 CORPORATE CENTER DR
Address: STE 100
City/State/Zip: CHARLOTTE, NC 28226

Item	Description	Permit#	Quantity	Unit Price	Total Price
0734	Septic Construction Authorizat 7421 ANN SMITH LN		1	200.00	200.00

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
		555.00			

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 07/12/23
Receipt #: 143468
Check / Auth #: CHECK 7486
Received By: ORTIZMP

Amount: 250.00
Tendered: 250.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: WILLIAM R HOMES, LLC
Attn:
Address: 8000 CORPORATE CENTER DR
Address: STE 100
City/State/Zip: CHARLOTTE, NC 28226

Item	Description	Permit#	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 7421 ANN SMITH LN		1	250.00	250.00

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
		555.00			

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NC DHHS
Division of Environmental Health
On-Site Wastewater Section

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

Permit #: **30013986** GWS File #: **11714B** Tax Parcel #: **113-321-23**

- 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. 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):** 9/12/2028

Type of Installation: Residential - New System Lot Number: 5

Structure Type: HOUSE Size (ft^2): 4187 # Bedrooms: 4 Max. Occup.: 8

Building Foundation: Basement With Plumbing Water Supply: Private Well

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

1000 gal Septic
1000 gal Settling tank
(Grinder pump fed into settling tank)

Initial System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	N/A
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	800	Total Trench Length (ft):	400'
Maximum Trench Depth (in):	34	Depth of Media (in):	12	Distribution Device:	Drop Boxes		

III. Repair System Type: PPBPS (gravity) **System Classification:** ~~IIIa~~ IIIc gravity VIPBPS

Repair System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	N/A
Trench Width (ft):	2	Trench Spacing (ft):	8	Absorption Area (ft^2):	534	Total Trench Length (ft):	267
Maximum Trench Depth (in):	34	Depth of Media (in):	N/A	Distribution Device:	Drop Boxes		

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: Matthew Hall Owner/Legal Agent: _____
Print Name

Signature: _____ Signature: _____

Date Issued: 9/12/2023

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NC DHHS
Division of Environmental Health
On-Site Wastewater Section

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

Permit #: **30013986** GWS File #: **11714B**

IV. Permit Conditions/Comments:

- All components of the septic system must be installed in accordance with the required setbacks listed on the corresponding plot plan.
- All components of the septic system must be located at least 100 ft. (50 ft. minimum) from all private wells.
- All waterlines must be located a minimum of 10 ft. from any part of the septic system.
- All components of the septic system must be located a minimum distance from the normal pool elevation or mean high water mark for the nearby body of water. See plot plan for minimum setback requirements.
- The supply pipe shall be installed with a minimum of 30" of compacted cover over the pipe or properly sleeved under areas that are subject to vehicular traffic.
- 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 25 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:

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Authorized Agent: Matthew Hall

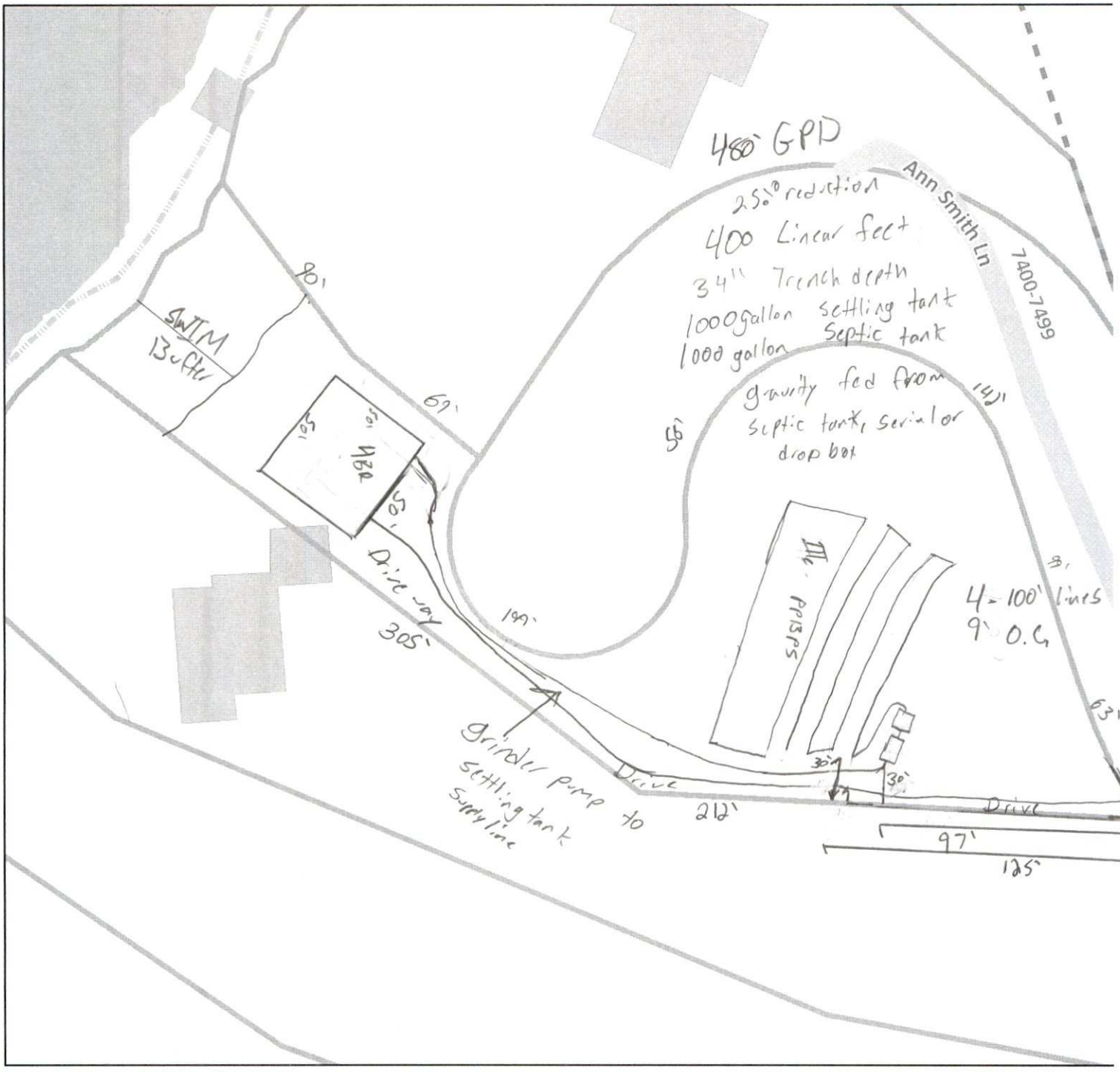
Signature: Matt Hall

Date Issued: 9/12/2023

Owner/Legal Agent: _____
Print Name

Signature: _____

On-site Wastewater Improvement Permit Diagram



Mecklenburg County Health Department
Environmental Health - Groundwater and Wastewater Services

Permit #: 30013986
PID #: 11332123
File #: 11714B

Authorized Agent: Matt Hall Date: 9/12/23

Owner/ Legal Agent: _____ Date: _____

1 inch = 60 fee