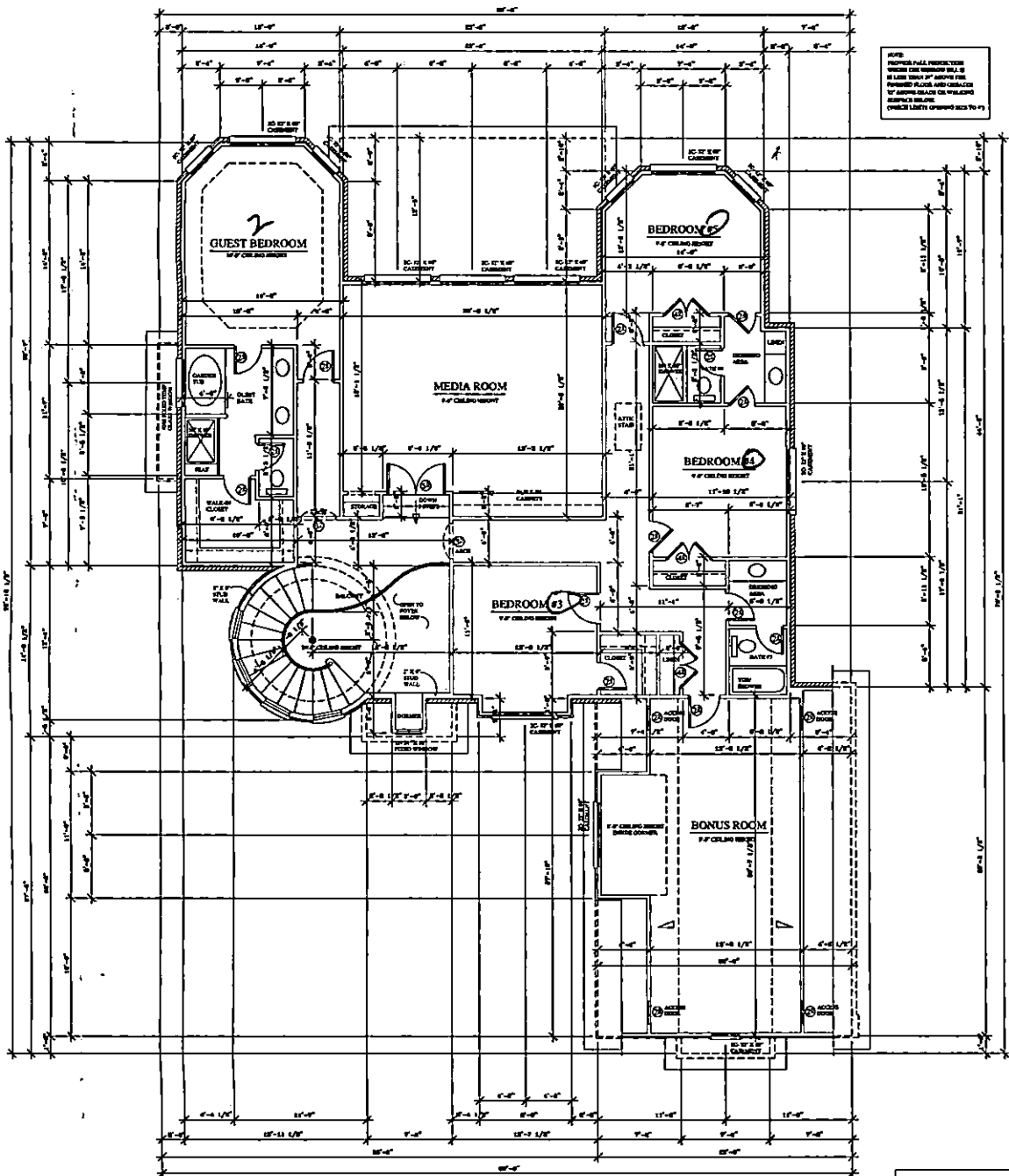


SECOND FLOOR PLAN

2477 SQ.FT.

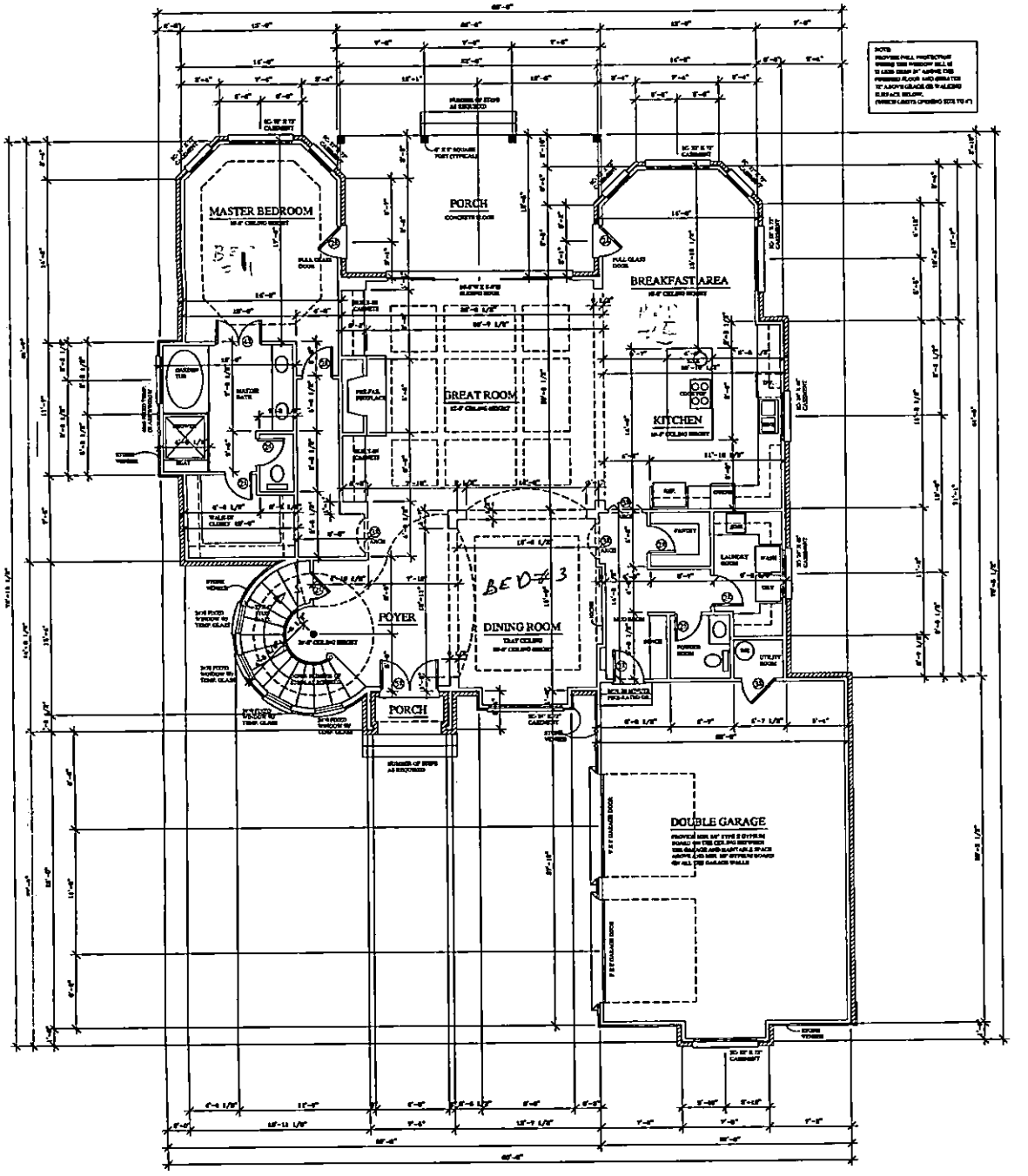
SCALE: 1/4" = 1'-0"

NOTES:

JEFFERY D. GRAY
RESIDENTIAL DRAFTING & DESIGN

PROJECT:
VARDANYAN RESIDENCE

SHEET
5.



FIRST FLOOR PLAN

2181 SQ.FT.

SCALE: 1/4" = 1'-0"

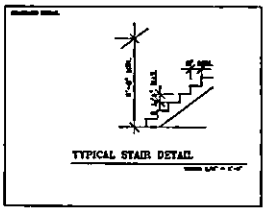
JEFFERY D. GRAY
RESIDENTIAL DRAFTING & DESIGN

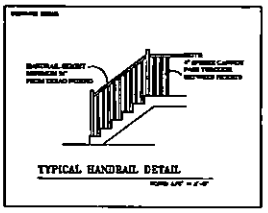
VARDANYAN RESIDENCE

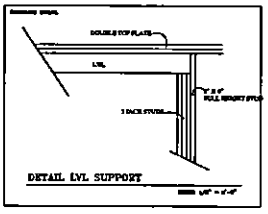
4

PLAN NOTES:

1. [illegible]
2. [illegible]
   LOCATIONS ARE AS FOLLOWS:
   THE WATER HEATER MAY TYPICALLY BE PLACED IN THE CRAWL SPACE OR IN THE GARAGE.
   B.) A.C. UNITS MAY TYPICALLY BE PLACED IN THE CRAWL SPACE IN THE ATTIC FOR ONE STORY HOMES, IN THE CRAWL SPACE FOR THE FIRST FLOOR AND IN ATTIC FOR ONE SECOND FLOOR IN TWO STORY HOMES.
   B.) A.C. EQUIPMENT IN ATTIC SPACE SHALL BE ACCESSIBLE BY AN OPENING AT LEAST AS THE LARGEST PIECE OF EQUIPMENT AND IN NO CASE LESS THAN 22"X30".
3. SEE STRUCTURAL DRAWINGS FOR ADDITIONAL INFORMATION.
4. SHEETROCK AROUND ALL BATHS AND UTILITY ROOM.
5. TYPICAL 9' CEILINGS @ 16" O.C. UPLESS OTHERWISE DIMENSIONED.
6. PROVIDE SMOKE DETECTORS AS REQUIRED BY CODE.
7. PROVIDE DOORBELLS, TRANSFORMER, AND CHIME.
8. ALL LIGHTS SHALL BE 14" OR LESS IF PLACED AT 18" OR DEEPER UNLESS NOTED OTHERWISE







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:	
Review performed by:	Jeremy Michael
Date performed:	2/24/2017

Created at 2/24/2017 1:47 PM by Michael, Jeremy
Last modified at 2/24/2017 1:47 PM by Michael, Jeremy

Close

Groundwater & Wastewater Services: Septic Project File & D

GWS File #:	7162A
WASPS App #:	8767
Primary ES assigned to project:	Jacob Presley
Secondary ES assigned to project:	
Project Type:	Modified Plot Plan
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?	Yes
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?	Yes

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) ✓ EA _____ Initials/Date

OP ($200.00) ✓ EA _____ 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 _____ Initials/Date

Alteration Fee Paid: $300.00 (Total) $200 (If use existing was paid) _____ Initials/Date

Modified Plot Plan Fee Paid: $100.00 VE 2/14/17 Initials/Date

Floor plans need to be submitted and reviewed before CA can be issued. ☐ Reviewed ☑ JM 2-14-17

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. ☐ _____

MECKLENBURG COUNTY
HEALTH DEPARTMENT

7162A #8767 15 FEB '17 PM12:51

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: 19503121

STREET ADDRESS: 3924 Well Road

CITY: Charlotte

STATE: NC ZIP: 28227

SUBDIVISION NAME:

LOT #: LOT SIZE (acres): 1.00

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: 5,000

NUMBER OF BEDROOMS: 5

NUMBER OF OCCUPANTS: 10

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: ____ ____ ____ ____ ____

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? 12/6/71 ☐ UNKNOWN

11. WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY? ☑ N/A

12. PROPERTY OWNER:

NAME: Vardan Vardanyan

ADDRESS: 3537 Well Road

CITY: Charlotte

STATE: NC ZIP: 28227

WORK PHONE:

MOBILE PHONE:

FAX:

E-MAIL:

13. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:

NAME: Michael Athanas and Associates

ADDRESS: 561 Ennis Road

CITY: Weddington

STATE: NC ZIP: 28173

WORK PHONE: (704) 576-3887

MOBILE PHONE:

FAX:

E-MAIL: scott@michaelathanas.com

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.

SK (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.

_____ 2/15/17

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

---

OFFICE USE ONLY

O SURVEY PLAT TO SCALE SUBMITTED O SCALED SITE PLAN SUBMITTED O 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

File #: _____

PROPOSED PLOT PLAN

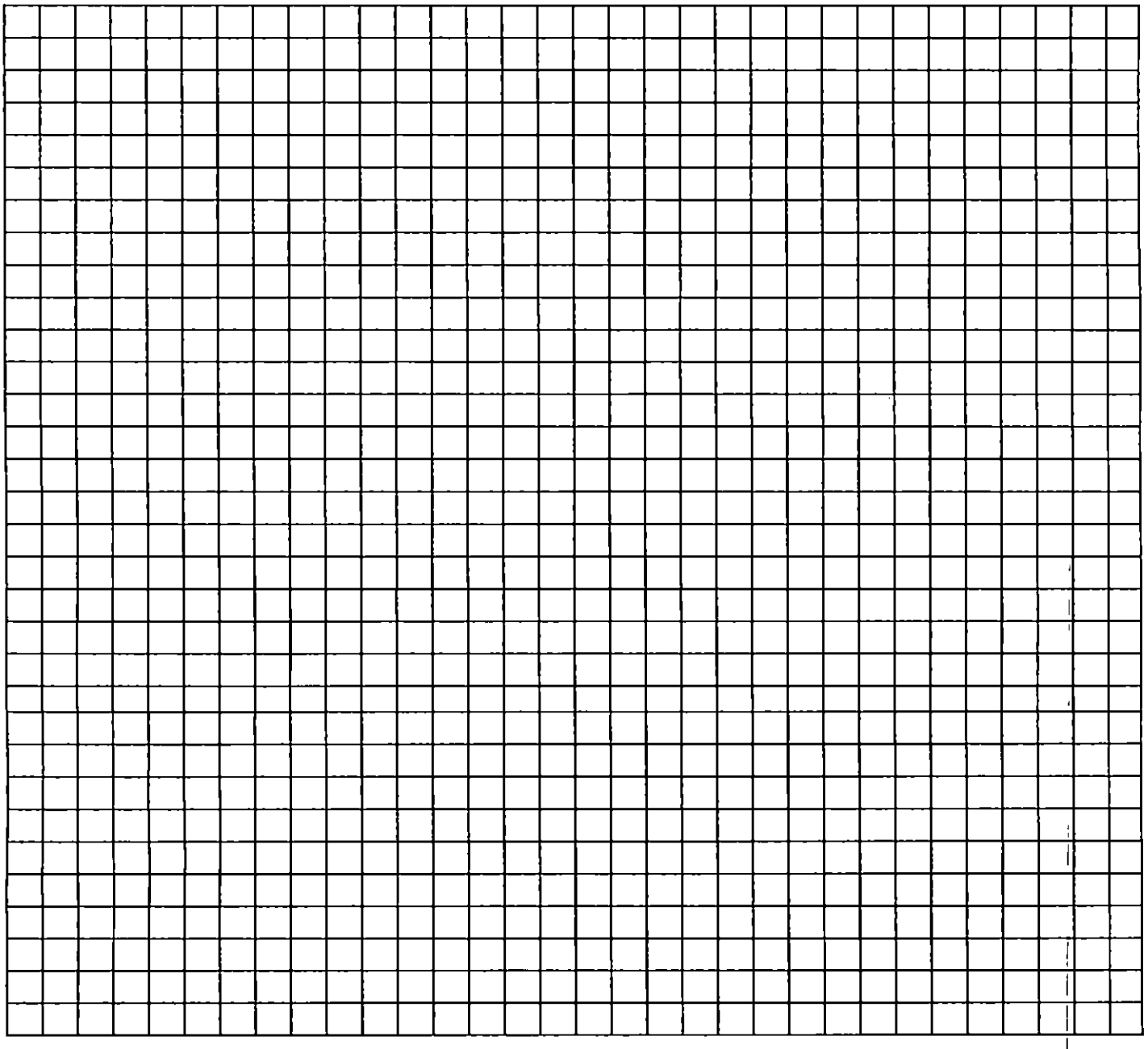
A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), 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: 3924 Well Road

Tax Parcel #: 19503121

Subdivision Name: _____

Lot #: _____



Property Owner's or Owner's Legal Representative Signature

2/15/17
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 Michael Athanas and Associates is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at

3924 Well Road Mint Hill, NC
Number Street Town
(Or Parcel Number)

Debbie C Howell
Property Owner (print name)

DC Howell
Property Owner (signature)

2/15/2017
Date

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 02/15/17
Receipt #: 103942
Check / Auth #: CHECK 1778
Received By: ELLISLW

Amount: 100.00
Tendered: 100.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: MICHAEL ATHANAS & ASSOCIATES,I
Attn:
Address: 561 ENNIS RD
Address:
City/State/Zip: WAXHAW, NC 28173

Item	Description	Permit#	Quantity	Unit Price	Total Price
0704	Change in Plot Plan 3924 WELL ROAD		1	100.00	100.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
	20.00				

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

Sheet: 1 of 2
Property ID: 195-031-21
Lot #: NA
File #: 7162A
AppID: 8069

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Property Owner: Vardan Vardanyan
Address: 3537 Well Rd, Mint Hill, NC 28227
Proposed Facility: 5 Bedroom House
Design Flow (.1949): 600 GPD
Location: 3924 Well Rd, Mint Hill, NC 28227
Water Supply: [ ] Public [X] Individual [X] Well [ ] Spring [ ] Municipal
Evaluation Method: [X] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [X] Sewage [ ] Industrial Process [ ] Mixed

Applicant: owner
Date Evaluated: 2/3/17
Property Size: 1 ac
Property Recorded: Unknown

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 3%	0 - 3	gr CL	SS SP FR SEXP							
		3 - 49	sbk C	S P FI SEXP	>49"	49	NA	NA		PS IV 0.3	36"
Boring #2	LS 5%	0 - 13	gr SCL	SS SP FR SEXP					yellow brown		
		13 - 53	sbk C	S P FI SEXP	2 chroma at 50"	53	NA	NA	mottles 24 - 53"	PS IV 0.25	36"
Boring #3	LS 8%	0 - 10	Fill								
		10 - 51	sbk C	S P FI SEXP	>51"	51	NA	NA	few yellow brown mottles 30 - 51"	PS IV 0.275	36"
Boring #4	LS 2%	0 - 20	gr/sbk SCL	SS SP FR SEXP							
		20 - 50	sbk C	S P FI SEXP	>50	50	NA	NA	yellow brown mottles 20 - 50"	PS IV 0.275	36"
Boring #5	LS 2%	0 - 10	gr/sbk SCL	SS SP FR SEXP						PS IV 0.25	Trench bottom must be 36"
		10 - 42	sbk C	S P FI SEXP	few 2 chroma from 18 - 21"	48	NA	NA	yellow brown mottles 10 - 42"		
		42 - 48	sbk CL	S P FI SEXP							

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	IVa	Va
Site LTAR (gpd/sq ft)	0.25	0.25 or Drip @ 0.1

Other Factors (.1946): NA
Soil Evaluation By: Jacob Presley, REHS, LSS
Others Present:
Site Classification (.1948): Provisionally Suitable
Site Evaluation By: Jacob Presley, REHS, LSS
Others Present: Michael Athanas, LSS

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
		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
700 N. Tryon St, Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

NC DENR
Division of Environmental Health
On-Site Wastewater Section

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

Permit #: **30008767** GWS File #: **7162A** Tax Parcel #: **195-031-21**

- 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):** 2/24/2022

Type of Installation: Residential - Modified Plot Plan Lot Number: 0

Structure Type: HOUSE Size (ft^2): 5000 # Bedrooms: 5 # Occupants: 10

Building Foundation: Crawl Space Water Supply: Private Well

II. Initial System Type: PPBPS (pressurized) **System Classification:** IVa

Initial System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	0.25	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	2	Trench Spacing (ft):	8	Absorption Area (ft^2):	800	Total Trench Length (ft):	400
Maximum Trench Depth (in):	36	Depth of Media (in):	22	Distribution Device:	Manifold (LPP Distri		

III. Repair System Type: Drip Irrigation **System Classification:** Va

Repair System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	0.1	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	1	Trench Spacing (ft):	2	Absorption Area (ft^2):	6000	Total Trench Length (ft):	6000
Maximum Trench Depth (in):	36	Depth of Media (in):	6	Distribution Device:	Headworks (Drip Irr.		

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: Jacob Presley

Signature: _____

Date Issued: 2/24/2017

Owner/Legal Agent: _____
Print Name

Signature: _____

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

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

Permit #: **30008767** GWS File #: **7162A**

IV. Permit Conditions/Comments:

- This type of septic system requires an inspection once every 3 years by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- This type of septic system requires a Certified Operator to maintain the system. A system maintenance contract with a Certified Operator must be on file prior to issuance of an Operation Permit.
- The septic system shall be installed in accordance with the plans submitted by the wastewater system design consultant.
- 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.
- Upon completion of the project the system designer shall provide Groundwater & Wastewater Services with a letter certifying that the system was installed in accordance with the approved design.
- 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.
- Supply line must be at least 10 feet away from pool and septic field drain lines must be at least 15 feet away.

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.
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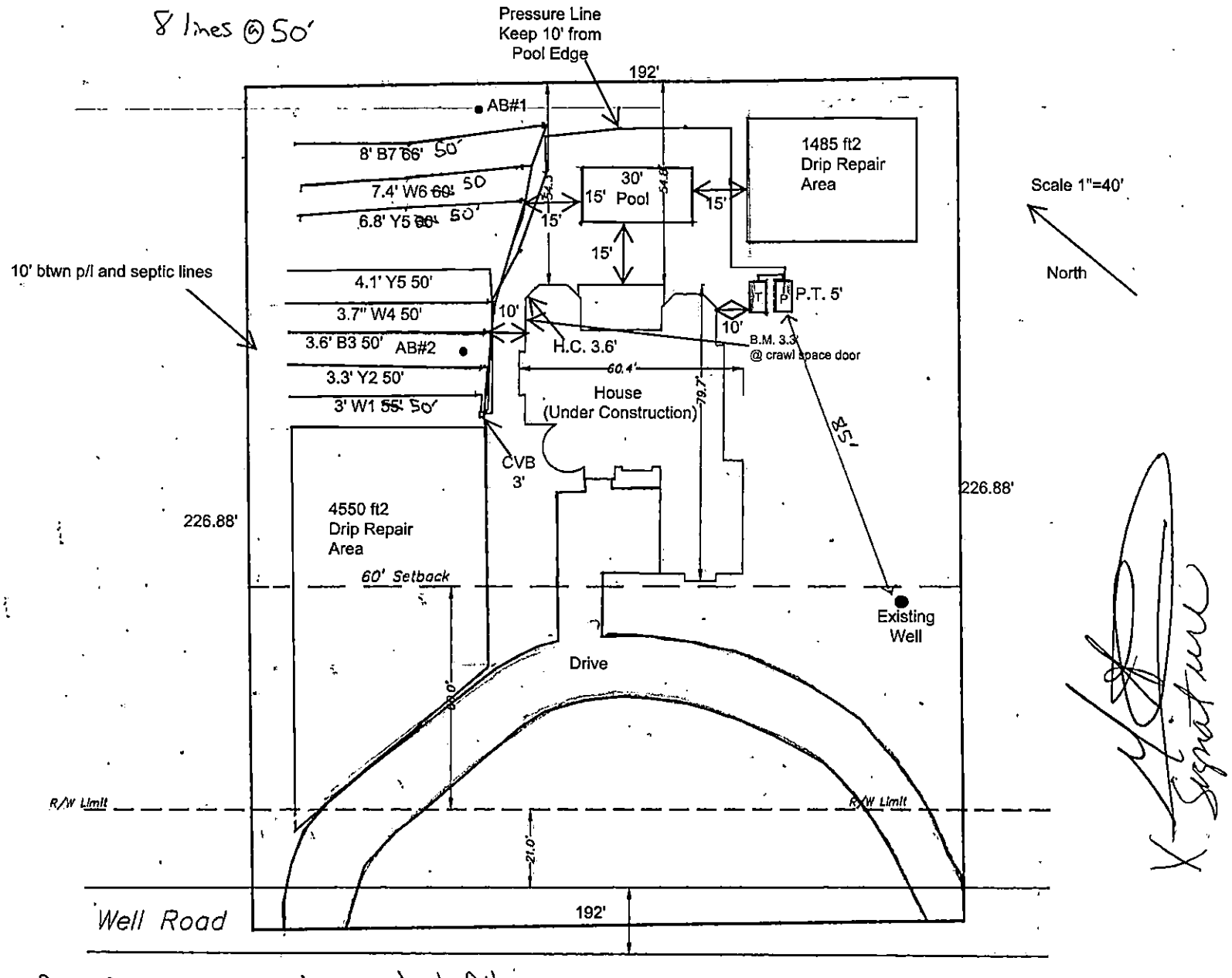
Authorized Agent: Jacob Presley

Signature: _____

Date Issued: 2/24/2017

Owner/Legal Agent: _____
Print Name

Signature: _____



Plot Plan Drawing by Michael Athanas and Associates

S

FEE: 200.00
DATE:2/24/2017

MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES

FILE NUMBER: 7162A

PERMIT NUMBER: 30008767

PARCEL NUMBER: 19503121

JOB LOCATION INFORMATION

ADDRESS: 3924 WELL RD

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

ISSUED TO: VARDAN VARDANYAN

CONSTRUCTION AUTHORIZATION ISSUANCE DATE: 2/24/2017

CONSTRUCTION AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 30008767, 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, NOT TO EXCEED 60 MONTHS.

PIEDMONT DESIGN ASSOCIATES, P.A.
125 East Plaza Drive, Suite #101
Mooresville, NC 28115
Phone: 704-664-7888 Fax: 704-664-1778
Email: dmunday@pdapa.com

Engineering
Surveying
Planning

GWS Septic System Design Review

GWS File #: 7162A

	Approved	Disapproved
Design Review:	☑	☐
Field Review:	☑	☐

*Projects are not considered **"APPROVED"** until both sections above are completed and indicate an **APPROVED** status.

February 22, 2017

Michael Athanas & Associates
Mr. Michael Athanas, LSS
561 Ennis Road
Weddington, NC 28173

Re: 5 Bedroom SFR Prefabricated Permeable Block Panel (PPBPS) Septic System
3924 Well Road (PID No. 19503121), Mecklenburg County, NC

Dear Mr. Athanas,

At your request we have reviewed the design calculations for the proposed single family PPBPS septic system intended to serve the above lot. This review was conducted to comply with the North Carolina Board of Examiners for Engineers and Surveyors policy number BP-1007-1 with regards to on-site wastewater system design. We have found that the system is designed correctly and should function as intended.

These comments and recommendations are based on observations made at the time of this review (February 20, 2017) and are limited to that discussed in this letter. Any conditions that may come forth and are different from that discussed herein should be reported to the Engineer for further evaluation. Any questions regarding the recommendations should be addressed to the Engineer for elaboration. Thank you for allowing us to provide this service to you.

Yours truly,

Piedmont Design Associates, P. A.

Donald L. Munday, P.E.
N. C. Registration No. 17327

NORTH CAROLINA PROFESSIONAL SEAL 17327 ENGINEER DONALD L. MUNDAY

02/22/2017



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887

Reference: Data Sheet for 3924 Well Road;; Parcel # 19503121; Mecklenburg Co., NC

House Footprint: 80'x60'; with a crawl space; under construction
Building Setback: 60' Front, 20' Side, 40' Rear
Water Source: Private Well (Existing)
Number of Bedrooms: 5/600 GPD
Proposed LTAR: 0.25 gpd/ft2 MCHD
Proposed Repair LTAR: 0.1 gpd/ft2
Suggested System Type: PPBPS 8' Centers
Repair System Type: TS I Pretreated Drip
Distribution: LP-CVB
Flow per Orifice: .59 GPM
Hole Size & Material: 3/16"
Number of Panels: 96
System Flow: 56.64 gal/min
Dosing Volume: 345.6 gal/dose
Pump Run Time: 6.10 min
Total Linear Footage: 400'
Trench Bottom Square Footage: 800 sq.ft
Elevation Head: 7'
Friction Head: 12.2'
Pressure Head: 2'
Total Dynamic Head: 21.2'
Supply Line Length: 182' 2" PVC
Septic/Pump Tank Size: 1500/1500
Proposed Trench Bottom: 36"

Line	Design Length	Actual Length	# of Panels	Elevation
White 1	50'	52'	12	3'
Yellow 2	50'	52'	12	3.3'
Blue 3	50'	53'	12	3.6'
White 4	50'	54'	12	3.7'
Blue 5	50'	53'	12	4.1'
Yellow 6	50'	60'	12	6.8'
White 7	50'	60'	12	7.4'
Blue 8	50'	66'	12	8'

Initial System: 400' PPBPS **Repair System:** 6035 ft2 TS I Pretreated Drip
Pump Tank: 5.5' **House Corner:** 3.6' **Bench Mark:** 3.3' at crawl space door

Comments:

- The purpose of this re-evaluation is to permit the property for a 5-bedroom residence with a pool.
- The proposed house site is under construction. The proposed pool has been marked using pink pin flags.
- MA&A is proposing the panel block system be installed in the same area as previously permitted by Mecklenburg County. We are proposing that the repair area be changed to a TS I pretreated drip system.
- All panels should be installed 36" deep.
- The pressure line should be kept a minimum of 10' from the pool cut.
- The proposed septic area should be kept 15' from the pool cut.
- The repair area has been previously evaluated by Mecklenburg County.

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

Sheet 1 *of* 1
PROPERTY ID #: 19503121: Well Road
COUNTY: Mecklenburg

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Vardan Vardanyan — APPLICATION DATE
ADDRESS: 3537 Well Road Mint Hill, NC 28227 — DATE EVALUATED: 2/2017
PROPOSED FACILITY: 5-Bedroom Residence — PROPOSED DESIGN FLOW (.1949): 600 GPD — PROPERTY SIZE: 1.0 Acre
LOCATION OF SITE: PID# 19503121; Well Road Mint Hill, NC — PROPERTY RECORDED: Unknown
WATER SUPPLY: ☒ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut — TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
AB 1	L 2-3 %	0"-48"	R C WSBK	SS SP FR SEXP	YBrs 0"-30" w/ few Mn	48"		None	0.25
AB 2	L 0-2%	0"-5"	Br CL WSBK	SS SP FR SEXP	YBrs 0"-30" w/ few Mn	48"			0.25
		5"-48"	R C WSBK	SS SP FR SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	800 ft2	6035 ft2
System Type(s)	LPP PPBPS IVa ~~25% Reduction~~	Drip Va
Site LTAR	0.25	0.1

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Michael Athanas and Associates
OTHER(S) PRESENT:

COMMENTS:

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)			SEXP (Slightly Expansive)	M (Massive)
D (Drainage Way)					EXP (Expansive)	CR (Crumb)
DS (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
FP (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
FS (Foot Slope)						ABK (Angular Blocky)
H (Head Slope)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
L (Linear Slope)		SiCL (Silty Clay Loam)				PR (Prismatic)
N (Nose Slope)		CL (Clay Loam)				
R (Ridge)		SCL (Sandy Clay Loam)			**MOIST**	**WET**
S (Shoulder Slope)		SiL (Silt Loam)				
T (Terrace)					VFR (Very Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Friable)	SS (Slightly Sticky)
		SiC (Silty Clay)			FI (Firm)	S (Sticky)
		C (Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None	None	EFI (Extremely Firm)	NP (Non-plastic)
						SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

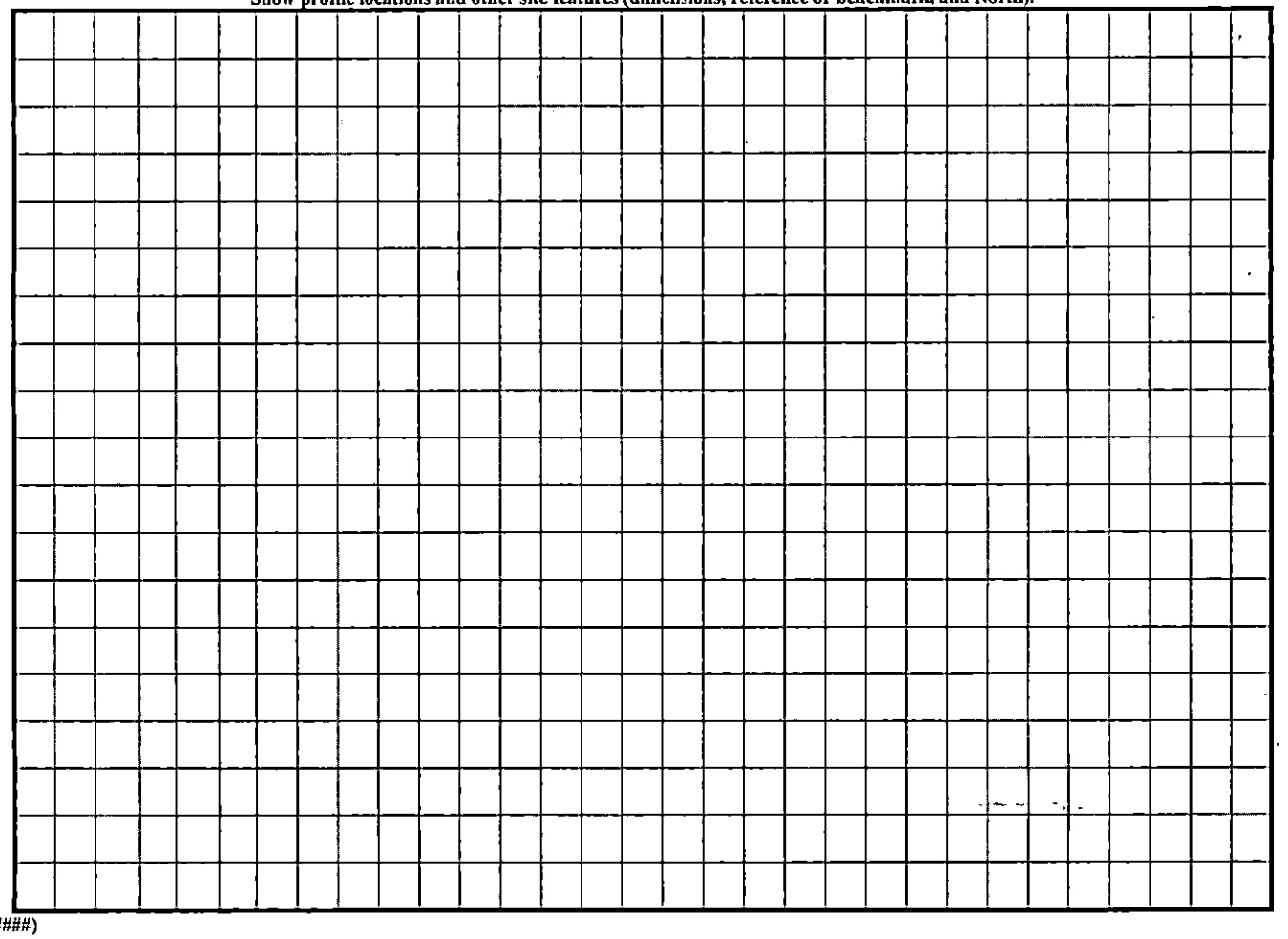
NOTES

HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft^2

Show profile locations and other site features (dimensions, reference or benchmark, and North).



DENR (######)

Review (#####)

COMMENTS: _____

MECKLENBURG COUNTY
Health Department

Marcus Plescia, MD, MPH
Health Director

(704) 336-4700

Voluntary Relinquishment of Administrative Appeal Rights
(Completion of Form by Property Owner)

2/23/2017

Owner: Vardan Vardanyan
Address: 3537 Well Rd.,
Charlotte, NC 28227

Subject: Voluntary Relinquishment of Administrative Appeal Rights

Improvement Permit #30008069
Vardan Vardanyan, 3924 Well Rd, Charlotte, NC 28227
PID: 195-031-21

I, Vardan Vardanyan, voluntarily relinquish my rights to pursue a formal appeal through the Office of
(print full name)

Administrative Hearings pursuant to NC General Statute 130A-24 and 150B-23 and all other applicable provisions of Chapter 150B for the above referenced permit in order for the authorized agent/local health department to issue the applicable permit (new IP and/or CA) for the site. I understand by completing this form, the previous permit issued on 7/10/2013 for a 4 bedroom house improvement permit for the site will be "revoked" immediately by the authorized agent/local health department.

Signature of Property Owner

MECKLENBURG COUNTY
Health Department

Marcus Plescia, MD, MPH
Health Director

(704) 336-4700

February 23, 2017

Vardan Vardanyan
3537 Well Rd.
Charlotte, NC 28227

RE: **Notice of Intent to Revoke Improvement Permit**

Dear Mr. Vardanyan:

The Mecklenburg County Health Department inspected the site for the on-site wastewater system improvement permit located at **3924 Well Rd**, File # 7162A, for compliance with the Laws (Article 11 of Chapter 130A of the North Carolina General Statutes), Rules (15A NCAC 18A .1900 et seq.), and Improvement Permit # **30008069** conditions. As a result of this inspection, the Department has determined the following violations:

> A new application has been submitted for a 5 bedroom house Improvement Permit with a pool located on the designated system area on Improvement Permit #30008069. Due to the pool location the permitted system area does not meet Rule 15A NCAC 18A .1950. A proposal from Michael Athanas & Associates has designated a new area on the property to be utilized as system and repair area. Mecklenburg County has reviewed the proposal and new application and is ready to issue a new permit for the application dated 2/15/17. The above referenced permit must be revoked first in order to issue the new one.

This is to notify you that based on these violations, the Department intends to Revoke your Improvement Permit 30 days from the date of this notice.

If the health department determines that all of the violations have been corrected before thirty (30) days expire, the revocation will not go into effect. If the permit is revoked, you must apply for a new Improvement Permit and meet the current laws and rules necessary to obtain a new permit.

You have a right to an informal review of this decision. You may request an informal review by the environmental health supervisor at the local health department. You may also request an informal review by the N. C. Department of Health and Human Services Regional Soil Scientist. A request for informal review must be made in writing to the local health department.

You have the right to a formal appeal of this decision by filing a petition for a contested case hearing with the Office of Administration Hearings, 6714 Mail Service Center, Raleigh, NC, 27699-6714. To obtain a petition form (H-06), you may write the Office of Administrative Hearings, call that office at (919) 431-3000 or get a copy of the petition form from their web site at www.ncoah.com/forms.html. The petition for a contested case hearing must be filed in accordance with the provisions of North Carolina General Statutes 130A-24, 150B-23, and all other applicable provisions of Chapter 150B. N.C. General Statute 130A-335(g) provides that your hearing would be held in the county where your property is located.

MECKLENBURG COUNTY

Marcus Plescia, MD, MPH
Health Director

Health Department

(704) 336-4700

If you wish to pursue a formal appeal, you must file the petition form with the Office of Administrative Hearings **WITHIN 30 DAYS OF THE DATE OF THIS LETTER.** The date of this letter is February 23, 2017. Meeting the 30 day deadline is critical to your right to a formal appeal. Beginning a formal appeal within 30 days will not interfere with any informal review that you may request.

If you file a petition for a contested case with the Office of Administrative Hearings, you are required by law (NCGS 150B-23) to serve a copy of your petition on the Office of General Counsel, NC Department of Health and Human Services, 2001 Mail Service Center, Raleigh, NC 27699-2001.

Do not serve the petition on your local health department. Sending a copy of your petition to the local health department will not satisfy the legal requirement in NC General Statute 150B-23 that you send a copy to the Office of General Counsel, 2001 Mail Service Center, NC Department of Health and Human Services.

You may call or write the local health department if you need additional information or assistance.

Sincerely,

Jacob Presley, REHS, LSS.
Soil Scientist
704-336-5440

Supervisor/Administrative Professional Checklist

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

New Septic Fees Paid:

IP ($250.00) LE 3/4/14 Initials/Date

CA ($200.00) EV 9/21/16 Initials/Date

OP ($200.00) EV 9/21/16 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 _____ 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 ☑ APM 9-22-16
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

GWS File #:	7162A
WASPS App #:	8069
Primary ES assigned to project:	Jacob Presley
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?	Yes

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
# of items requiring correction/modification:	0
Comments:	
IA issued date:	
OP Issued date:	
Review performed by:	Jeremy Michael
Date performed:	3/17/2016

Created at 3/17/2016 3:41 PM by Michael, Jeremy
Last modified at 3/17/2016 3:41 PM by Michael, Jeremy

Close

MECKLENBURG COUNTY
HEALTH DEPARTMENT

7162A
#8069

2 MAR '16 PM 3:49

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: 195-031-21
STREET ADDRESS: 3924 WELL RD
CITY: Mint Hill
STATE: NC ZIP: 28227
SUBDIVISION NAME: N/A
LOT #: _____ LOT SIZE (acres): 1 ACRE
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: 3000-3500
NUMBER OF BEDROOMS: 5
NUMBER OF OCCUPANTS: 5
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: ____ ____ ____ ____ ____

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: VARDAN VARDANYAN
ADDRESS: 3537 WELL RD
CITY: Mint Hill
STATE: NC ZIP: 28227
WORK PHONE: 704-989-0842
MOBILE PHONE: 704-989-0842
FAX: _____
E-MAIL: Tuyka2000@aol.com

13. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:

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

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

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.

V. V. (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.

V. V. (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.

Property Owner's or Owner's Legal Representative Signature

3-02-2016
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

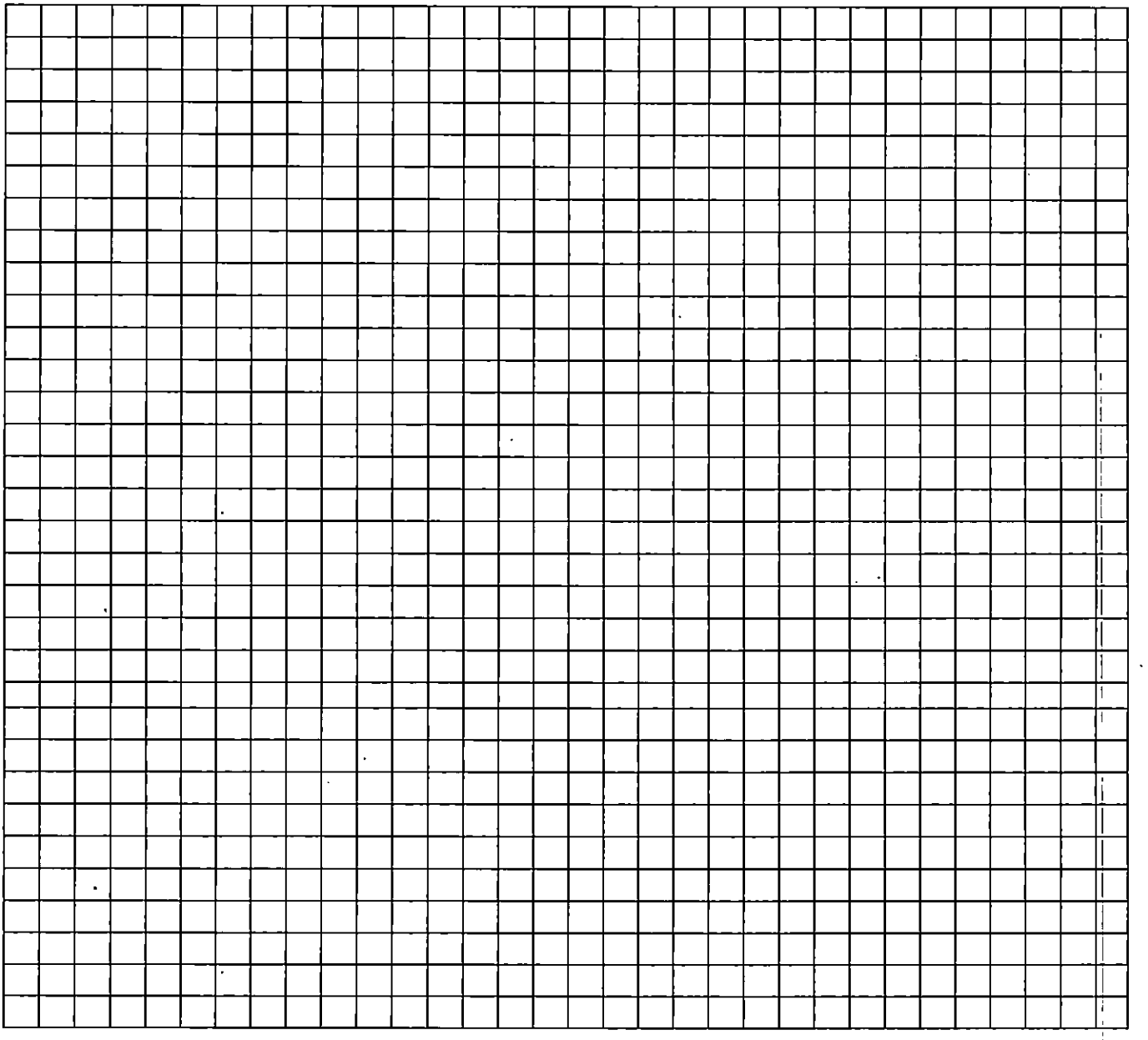
File #: _____

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

S

FEE: 200.00

DATE:9/23/2016

MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES

FILE NUMBER: 7162A

PERMIT NUMBER: 30008069

PARCEL NUMBER: 19503121

JOB LOCATION INFORMATION

ADDRESS: 3924 WELL RD

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

ISSUED TO: VARDAN VARDANYAN

CONSTRUCTION AUTHORIZATION ISSUANCE DATE: 9/23/2016

CONSTRUCTION AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 30008069, 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, NOT TO EXCEED 60 MONTHS.

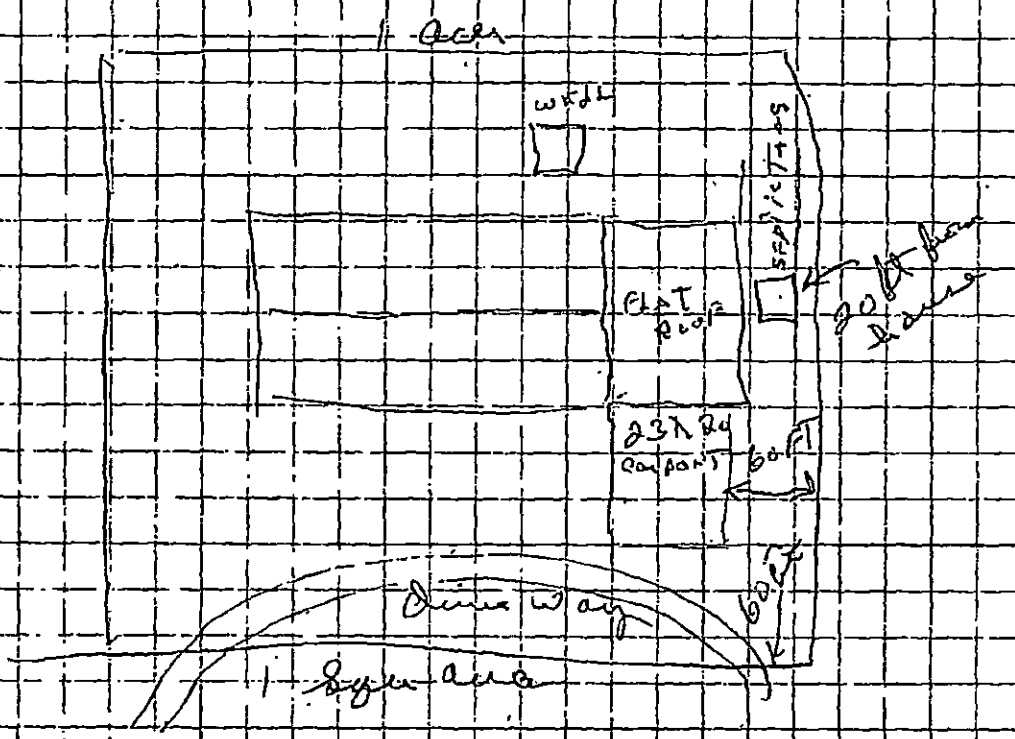
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 7162A

TC: 195-031-21

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



APPROVAL DATE PSW appr 11/26/90

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

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	09/21/16	**Amount:**	200.00
Receipt #:	101872	**Tendered:**	200.00
Check / Auth #:	CHARGE	**Returned:**	0.00
Received By:	ANDRAEO		

Account Information

Account #: X36751
Contractor: PERSIS-NOVA CONSTRUCTION CO
Attn:
Address: 3919 PLEASANT PLAINS RD
Address:
City/State/Zip: MATTHEWS, NC 28105

Item	Description	Permit#	Quantity	Unit Price	Total Price
0703	Septic Operational Permit 3924 Well Rd		1	200.00	200.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
3,197.32					

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	09/21/16	**Amount:**	200.00
Receipt #:	101871	**Tendered:**	200.00
Check / Auth #:	CHARGE	**Returned:**	0.00
Received By:	ANDRAEO		

Account Information

Account #: X36751
Contractor: PERSIS-NOVA CONSTRUCTION CO
Attn:
Address: 3919 PLEASANT PLAINS RD
Address:
City/State/Zip: MATTHEWS, NC 28105

Item	Description	Permit#	Quantity	Unit Price	Total Price
0734	Septic Construction Authorizat 3924 Well Rd		1	200.00	200.00

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
2,997.32					

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

Sheet: 1 of 2
Property ID: 195-031-21
Lot #: NA
File #: 7162A
AppID: 8069

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Property Owner: Vardan Vardanyan
Address: 3537 Well Rd, Mint Hill, NC 28227
Proposed Facility: 5 Bedroom House
Design Flow (.1949): 600 GPD
Location: 3924 Well Rd, Mint Hill, NC 28227
Water Supply: [ ] Public [X] Individual [X] Well
Evaluation Method: [X] Auger Boring [ ] Pit
Type of Wastewater: [X] Sewage [ ] Industrial Process

Applicant: owner
Date Evaluated: 3/10/16
Property Size: 1 ac
Property Recorded: Unknown
[ ] 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 3%	0 - 3	gr CL	SS SP FR SEXP							
		3 - 49	sbk C	S P FI SEXP	>49"	49	NA	NA		PS IV 0.3	36"
Boring #2	LS 5%	0 - 13	gr SCL	SS SP FR SEXP					yellow brown		
		13 - 53	sbk C	S P FI SEXP	2 chroma at 50"	53	NA	NA	mottles 24 - 53"	PS IV 0.25	36"
Boring #3	LS 8%	0 - 10	Fill								
		10 - 51	sbk C	S P FI SEXP	>51"	51	NA	NA	few yellow brown mottles 30 - 51"	PS IV 0.275	36"
Boring #4	LS 2%	0 - 20	gr/sbk SCL	SS SP FR SEXP							
		20 - 50	sbk C	S P FI SEXP	>50	50	NA	NA	yellow brown mottles 20 - 50"	PS IV 0.275	36"
Boring #5	LS 2%	0 - 10	gr/sbk SCL	SS SP FR SEXP						PS IV 0.25	Trench bottom must be 36"
		10 - 42	sbk C	S P FI SEXP	few 2 chroma from 18 - 21"	48	NA	NA	yellow brown mottles 10 - 42"		
		42 - 48	sbk CL	S P FI SEXP							

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

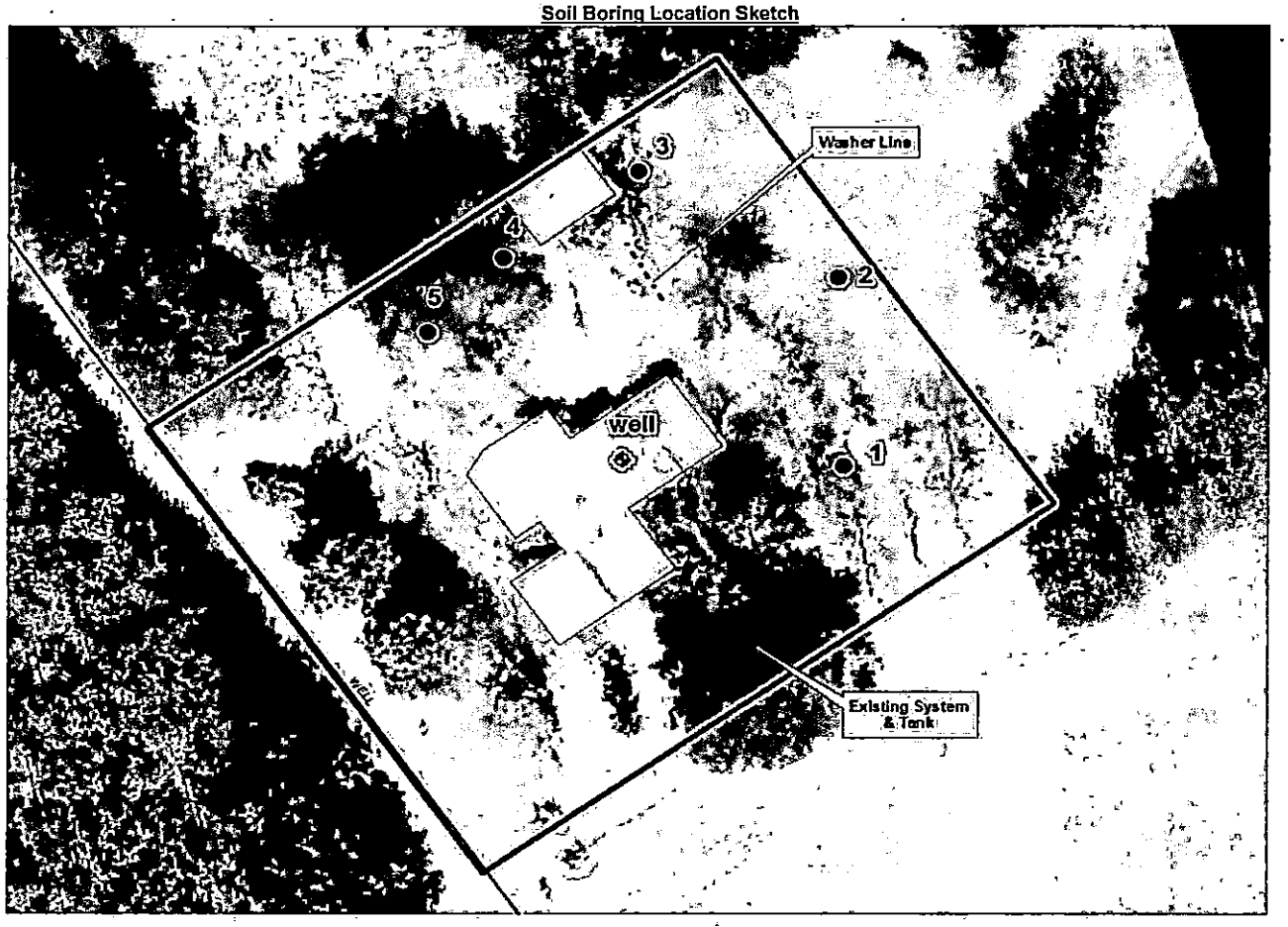
Other Factors (.1946): NA
Soil Evaluation By: Jacob Presley, REHS, LSS
Others Present:
Site Classification (.1948): Provisionally Suitable
Site Evaluation By: Jacob Presley, REHS, LSS
Others Present:

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
		SiCL-Silty Clay Loam		pr-Prismatic
CV-Convex Slope				Sap-Saprolite
T-Terrace				
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
		Silt		c-coarse
	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
700 N. Tryon St, Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

NC DENR
Division of Environmental Health
On-Site Wastewater Section

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

Permit #: **30008069** GWS File #: **7162A** Tax Parcel #: **195-031-21**

- 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):** 3/17/2021

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

Structure Type: HOUSE Size (ft^2): 3000 # Bedrooms: 5 # Occupants: 5

Building Foundation: Crawl Space Water Supply: Private Well

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

Initial System Specifications:

Design Flow (gpd): 600 LTAR (gpd/ft^2): 0.25 Septic Tank Size (gal): 1500 Pump Tank Size (gal): N/A

Trench Width (ft): 3 Trench Spacing (ft): 9 Absorption Area (ft^2): 1800 Total Trench Length (ft): 600

Maximum Trench Depth (in): 36 Depth of Media (in): 12 Distribution Device: Distribution Box or EnDCaps AP

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

Repair System Specifications:

Design Flow (gpd): 600 LTAR (gpd/ft^2): 0.25 Septic Tank Size (gal): 1500 Pump Tank Size (gal): 1500

Trench Width (ft): 3 Trench Spacing (ft): 9 Absorption Area (ft^2): 1800 Total Trench Length (ft): 600

Maximum Trench Depth (in): 36 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: Jacob Presley

Signature: _____

Date Issued: 3/17/2016

Owner/Legal Agent: VARDAN VARDANYAN
Print Name

Signature: _____

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

NC DENR
Division of Environmental Health
On-Site Wastewater Section

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

Permit #: **30008069** GWS File #: **7162A**

IV. Permit Conditions/Comments:

- This type of repair system requires the installation of a pump tank and all associated components. This type of system will require routine inspections by our office. The system owner is responsible for all fees associated with these inspections.
- Proper well abandonment is required prior to receiving an Installation Approval from our office to install the septic system.
- 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.
- 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.
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Authorized Agent: Jacob Presley

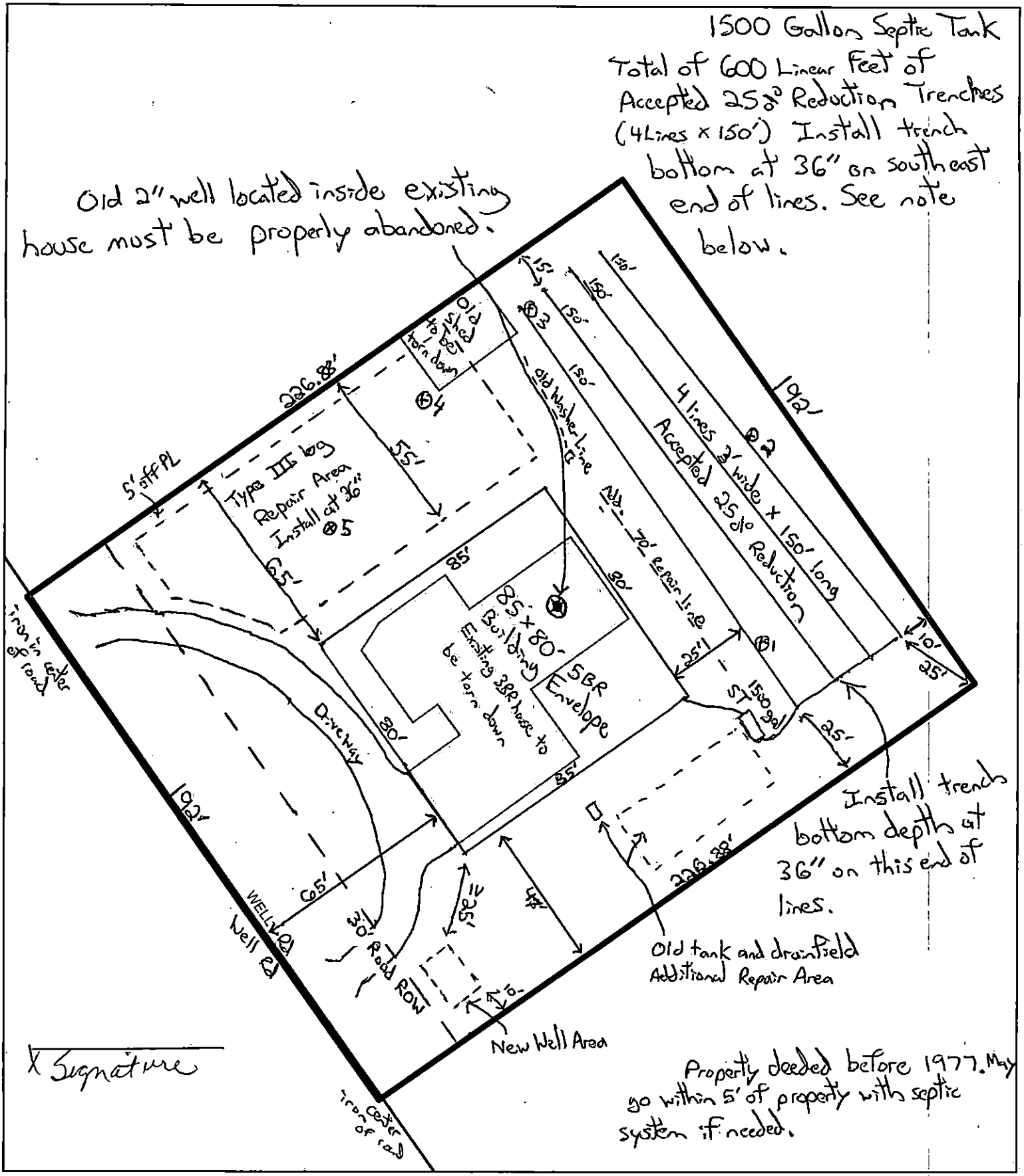
Signature: _____

Date Issued: 3/17/2016

Owner/Legal Agent: VARDAN VARDANYAN
Print Name

Signature: _____

PID: 195-031-21
FILE # 7162A
APP ID: 8069



Drawn By: J. Presley
Date: 3/17/2016

1 inch = 40 feet

the Superior Court; and whereas said bid remained open for more than ten (10) days and no advance bid was offered, and no objection made.

Now therefore, the said Jeff D. Rogers, acting as Substitute Trustee as aforesaid, in consideration of the premises and of the said sum of $29,000.00 dollars to him in hand paid, has bargained and sold and by these presents does bargain, sell, and convey unto the said BRANCH BANKING AND TRUST COMPANY, and its successors and assigns, the said land sold as aforesaid, the same lying and being in the County of MECKLENBURG, and State of North Carolina, and more particularly described and bounded as follows:

PID 195-031-21

Beginning at a point in the center of Well Road, M. H. Ezell's corner (see deed recorded in the Mecklenburg Public Registry in Book 1262 at Page 402), on Clair Hood's line, indicated by an iron stake on Ezell's line on the east side of Well Road, and runs thence with said Ezell's line N. 55-31-00 E. 226.88 feet to an iron stake, a new corner; thence a new line S. 34-29-00 E. 192 feet to an iron stake on A. J. Flowe's northerly line (see deed recorded in the Mecklenburg County Public Registry in Book 2375 at Page 120), thence with A. J. Flowe's line S. 55-31-00 W. 226.88 feet to a point in the center of Well Road; thence with the center line of said road and with Clair Hood's line N. 34-29-00 W. 192.00 feet to the point of beginning and containing 1.0 acre according to a survey of Henry L. Parnell, Registered Surveyor, dated December 18, 1968.

To have and to hold, said lands and premises, together with all privileges and appurtenances thereunto belonging to it, the said party of the second part and its heirs, successors and assigns, as such, in as full and ample a manner as the said Substitute Trustee has power to convey the same.

This conveyance is made subject to: (1) all prior liens, encumbrances, easements, right-of-ways, restrictive covenants or other restrictions of record affecting the property; (2) property taxes and assessments; (3) federal tax liens with respect to which proper notice was not given to the Internal Revenue Service; and (4) federal tax liens to which proper notice was given to the Internal Revenue Service and to which the right of redemptions applies.

The property is being conveyed "as is"; the undersigned makes no warranties or representations concerning the condition of the property conveyed, nor does the undersigned make any warranties of title.

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	03/02/16	**Amount:**	250.00
Receipt #:	99257	**Tendered:**	250.00
Check / Auth #:	CHECK 3366	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: 200000
Contractor: VARDANYAN,VARDAN
Attn:
Address: 3537 WELL ROAD
Address:
City/State/Zip: MINT HILL, NC 28227

Item	Description	Permit#	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 3924 WELL ROAD		1	250.00	250.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
730.00	130.00				