

9440 BOB BEATTY RD

02719112

12/20/2007

duponbj

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

Mecklenburg County
Health Department

September 12, 1995

Eric Yost
Eastern Metal Supply of North Carolina
3300 H Woodpark Boulevard
Charlotte, NC 28206

Dear Mr. Yost:

Re: 9440 Bob Beatty Road
File: 1186B
Parcel: 027-191-12PO

Receipt of your plans for a modified waste disposal system for the above referenced property is acknowledged.

The plans as submitted are approved with the following comments:

- Water saving plumbing devices and low flush toilets should be installed when constructing the residence.
- Effectively rake and lime all trench sidewalls
- Landscaping of original system area and the repair area is prohibited. No grading, shaping, or altering in any way.
- The well should be located 100 feet, but in no case less than 50 feet from the sewage system and repair area.
- This is a Type 4 sewage disposal system. A contract must be executed for periodic maintenance between the property owner and a certified operator prior to the issuance of an operation permit (final).

Upon execution and recording of the enclosed "Septic Tank Agreement Form" and the proper abandonment of the existing well on the property, an Improvement Permit can be issued by this department.

If you have any questions concerning this matter, please contact me at 336-5575.

Sincerely,

Kelly Randall, R.S.
Individual Water and Wastewater Systems

ENCLOSURE

Mecklenburg County
Health Department

Eric Yost
Eastern Metal Supply of North Carolina
3300-H Woodpark Blvd
Charlotte NC 28206

RE: 9440 Bob Beatty Rd
File: PO 027-191-12 11 #6B

Dear mr Yost

Receipt of your plans for a modified waste disposal system for the above referenced property is acknowledged.

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If you have any questions concerning this matter, please contact me at 336-5575.

Sincerely,

Kelly Randall, R.S.
Individual Water and Wastewater Systems

Enclosures

over

~~Please provide~~

Upon execution and recording of the Enclosed "Septic Tank Agreement Form" and the proper abandonment of the existing well on the property an Improvement Permit can be issued by this department

MCHD

File: 1186-B
TC: 027-191-12

SYSTEM TYPE:
- CONVENTIONAL
- CONVENTIONAL (SHALLOW PLACEMENT)
- 8-INCH PPBPS-GRAVITY DISTRIBUTION
- 8-INCH PPBPS-PRESSURE DISTRIBUTION
- 16-INCH PPBPS-GRAVITY DISTRIBUTION
- * 16-INCH PPBPS-PRESSURE DISTRIBUTION
- LPPS
- OTHER

SPECIALIZED EQUIPMENT OR REQUIREMENTS:
- DROP BOX
- DISTRIBUTION BOX
- DIPPER BOX
- FLOW DIVIDER
- WASH BOX
- SPECIAL FITTINGS
- PRESSURE MANIFOLD
- SIPHON
- MULTIPLE PUMPS
- OTHER
- WELL ABANDONEMENT
- EASEMENT
- LOT COMBINATION/SURVEY
- EARTHEN SURFACE SWELL
- FRENCH/CURTAIN DRAINS
- GREASE INTERCEPTOR
- * PUMP TANK - 1,000 gal., Float Tree
- SAPROLITE TEST
- * 1,500 gal. Septic Tank

* (3) Ball or Globe valves

LINE	#PANELS PER LINE	#HOLES PER PANEL	HOLE SIZE	HOLE SPACING	LINE HEAD	LINE LENGTH	HOLE FLOW	PER MINUTE LINE FLOW
			Primary System					
L1	16	1	5/32	5	3	70'	.50	8.3
L2	16	1	5/32	5	3	70'	.50	8.3
L3	16	1	5/32	5	3	70'	.50	8.3
	48 PANELS					210'		24.9 gpm
			Repair Area					
L9						55'		
L5						45'		
L6						40'		
L7						30'		
L8						20'		
L9						10'		
						200'		

T. Whitaker

MCHD

File: 1186-B

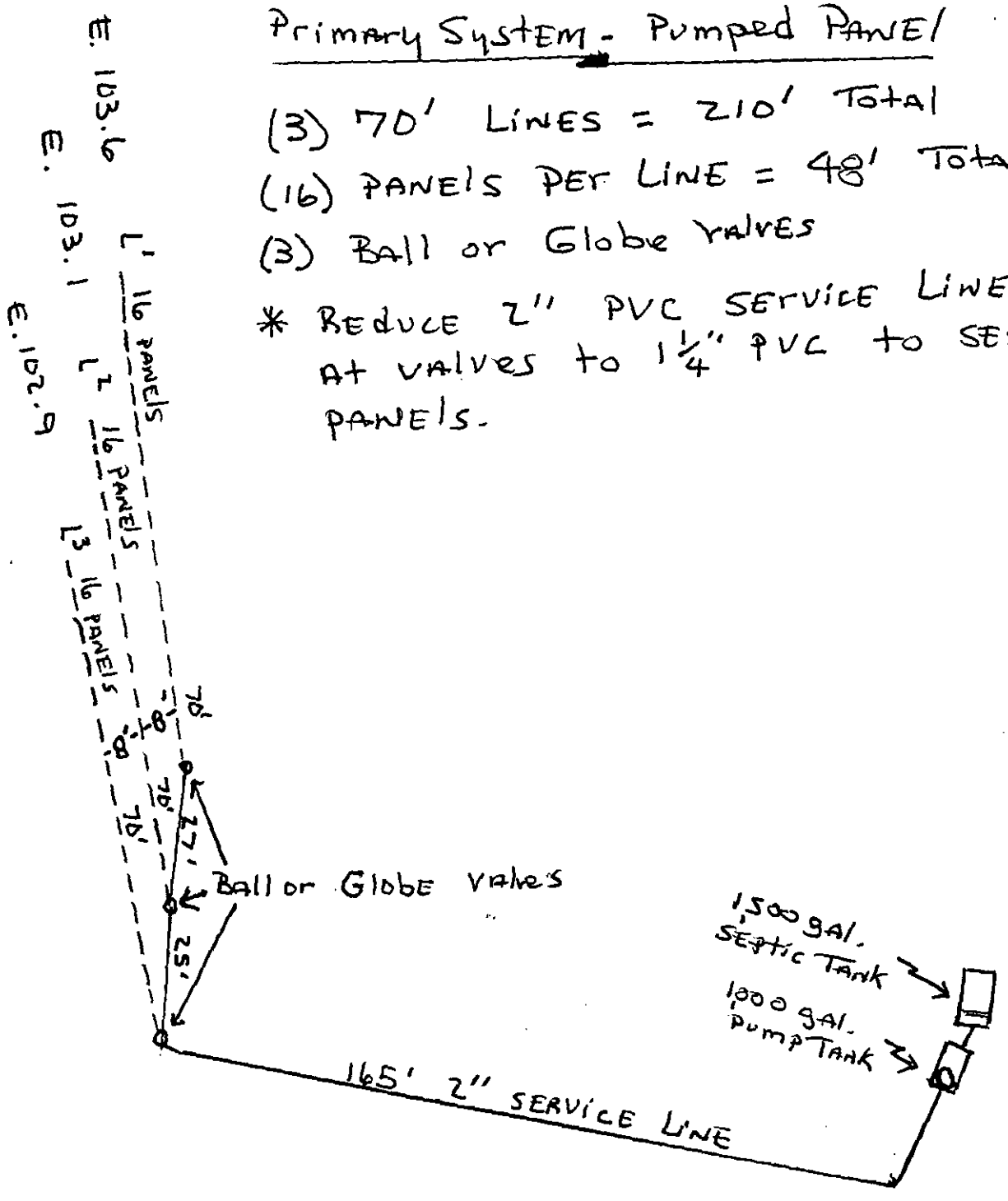
Primary System - Pumped Panel

(3) 70' Lines = 210' Total

(16) Panels per Line = 48' Total

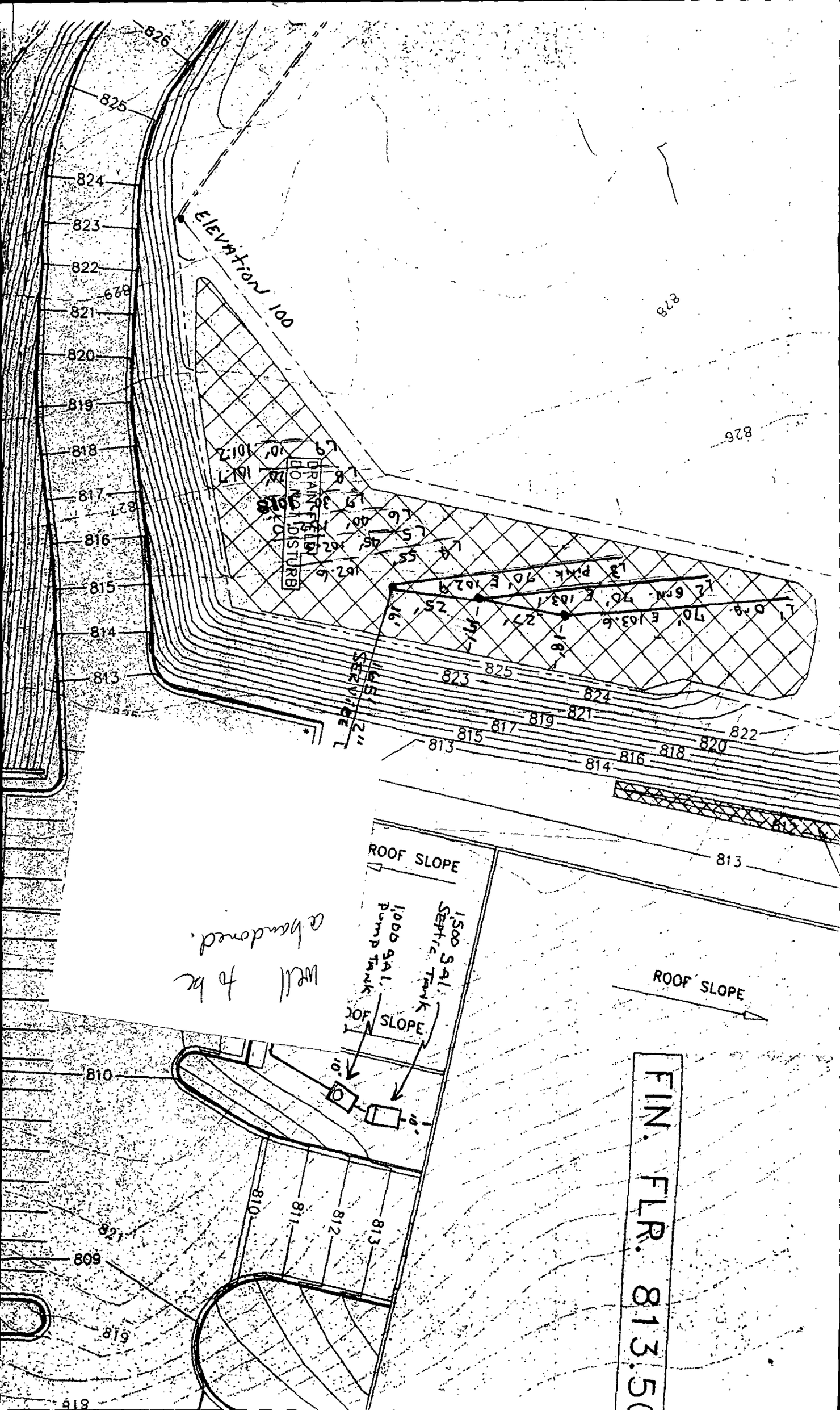
(3) Ball or Globe valves

* Reduce 2" PVC service line at valves to 1¼" PVC to serve panels.



T. Whittaker
866-9540

S/30


826
825
824
823
822
821
820
819
818
817
816
815
814
813
ELEVATION 100
828
826
DRAIN FIELD
DO NOT DISTURB
SEPTIC SYSTEM
ROOF SLOPE
1000 GAL. Pump Tank
1500 GAL. Septic Tank
well to be abandoned.
ROOF SLOPE
ROOF SLOPE
FIN. FLR. 813.50
810
811
812
813
809

Mecklenburg County
Health Department

June 20, 1995

Eric Yost
Eastern Metal Supply of North Carolina
3300-H Woodpark Boulevard
Charlotte, NC 28206

Dear Mr. Yost:

Re: 9440 Bob Beatty Road
File: 1186B
Parcel: 027-191-12PO

Receipt of the plans and specifications for a ~~conventional~~ innovative system of sewage treatment and disposal for the above property is hereby acknowledged. Upon receipt of the information, a review was made of the material on file and a site evaluation was conducted. The plan was then reviewed in conjunction with provisions of 15A NCAC 18A .1900, "Laws and Rules for Sewage Treatment and Disposal Systems." Our comments are listed below (see enclosed soil report):

1- The available area on this site is classified as **UNSUITABLE** according to the following rules:

(a) .1945 Available Space --Due to the plans for a large commercial structure, paving, parking, grading and a possible future addition, there appears to be insufficient space available on this property for a sewage treatment and disposal system.

For these reasons, the plans as submitted are disapproved.

Possible ways to develop this site includes reduction in size of the building area and/or paved area. If you choose to alter the site plans, please submit plans to this office.

You also have the right to an informal review with this Department, you have the right to appeal under G.S. 130A-24 through the State Office of Administrative Hearings (OAH), and to have the appeal held in Mecklenburg County.

If you have any questions concerning this matter, please contact me at 336-5569.

Sincerely,

Susan M. Bateman, R.S.
Individual Water and Wastewater Systems

cc: ~~Mr. William Marlin, Soil Scientist~~ CC Mr Al Broome
S C Hendrix + Associates Inc
PO Box 220956
CHARLOTTE NC 28222

Enclosure

Mecklenburg County
Health Department

June 20, 1995

Eric Yost
Eastern Metal Supply of North Carolina
3300-H Woodpark Boulevard
Charlotte, NC 28206

Dear Mr. Yost:

Re: 9440 Bob Beatty Road
File: 1186B
Parcel: 027-191-12PO

Receipt of the plans and specifications for a conventional system of sewage treatment and disposal for the above property is hereby acknowledged. Upon receipt of the information, a review was made of the material on file and a site evaluation was conducted. The plan was then reviewed in conjunction with provisions of 15A NCAC 18A .1900, "Laws and Rules for Sewage Treatment and Disposal Systems." Our comments are listed below (see enclosed soil report):

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If you have any questions concerning this matter, please contact me at 336-5569.

Sincerely,

Susan M. Bateman, R.S.
Individual Water and Wastewater Systems

cc: Mr. William Marlin, Soil Scientist

Enclosure

Mecklenburg County
Health Department

June 16, 1995

Eric Yost
Eastern Metal Supply of North Carolina
3300-H Woodpark Boulevard
Charlotte, NC 28206

Dear Mr. Yost:

Re: 9440 Bob Beatty Road
File: 1186B
Parcel: 027-191-12PO

Receipt of the plans and specifications for a conventional system of sewage treatment and disposal for the above property is hereby acknowledged. Upon receipt of the information, a review was made of the material on file and a site evaluation was conducted. The plan was then reviewed in conjunction with provisions of 15A NCAC 18A .1900, "Laws and Rules for Sewage Treatment and Disposal Systems." Our comments are listed below (see enclosed soil report):

1- The available area on this site is classified as **UNSUITABLE** according to the following rules:

(a) .1945 Available Space -- Due to the plans for a large commercial structure and a possible future addition, paving, parking and grading, there is insufficient space available on this property for a sewage treatment and disposal system.

For these reasons, the plans as submitted are disapproved.

Possible ways to develop this site includes reduction in size of the building area and/or paved area. If you choose to alter the site plans, please submit new plans to this office.

You also have the right to an informal review with this Department, you have the right to appeal under G.S. 130A-24 through the State Office of Administrative Hearings (OAH), and to have the appeal held in Mecklenburg County.

If you have any questions concerning this matter, please contact me at 336-5569.

Sincerely,

Susan M. Bateman, R.S.
Individual Water and Wastewater Systems

cc: Mr. William Marlin, Soil Scientist

Enclosure

-- Due to the plans for a large commercial structure, paving, parking, grading and a possible future addition, there is insufficient space available on this property for a sewage treatment and disposal system.

Mecklenburg County
Health Department

~~September 2, 1994~~

Enclose

Mr. ~~William Meyer~~ Eric Yost
~~5110 Rolling Oaks~~ Eastern Metal Supply of North Carolina
~~Charlotte, NC 28227~~ 3300-H Woodpark Blvd. reports +
Charlotte, NC 28206

Re: ~~9026 Lauriston Place~~ 9440 Bobbeatty Road rule copy attached.
File: ~~3011A~~ 1186B
Parcel: ~~139-054-27~~ 027-191-12 PO

Dear Mr. ~~Meyer:~~ Yost:

Receipt of the plans and specifications for a conventional system of sewage treatment and disposal for the above property is hereby acknowledged. Upon receipt of the information, a review was made of the material on file and a site evaluation was conducted. The plan was then reviewed in conjunction with provisions of 15A NCAC 18A.1900, "Laws and Rules for Sewage Treatment and Disposal Systems." Our comments are listed below (see enclosed soil report):

1- The available area on this site is classified as **UNSUITABLE** according to the following rules:

~~(a) .1940 Topography and Landscape Position~~
(b) .1945 Available Space

For these reasons, the plans as submitted are disapproved.

Possible ways to develop this site includes ~~submittal of a plan for a Prefabricated, Permeable Block Panel System (PPBPS). These plans would also need to include appropriate surface water diversions. Enclosed is a copy of Rule .1956 Modifications to Septic Tank Systems pertaining to PPBP Systems.~~ reduction in size of the building area and/or paved area. If you choose to alter the site plans, please submit new plans to this office and we will gladly reopen your file.

You also have the right to an informal review with this Department, you have the right to appeal under G.S. 130A-24 through the State Office of Administrative Hearings (OAH), and to have the appeal held in Mecklenburg County.

If you have any questions concerning this matter, please contact me at 336-5569.

Sincerely,

Susan M. Bateman, R.S.
Individual Water and Wastewater Systems

cc: Mr. William Marlin, Soil Scientist

Enclosure

1186B

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

pd #150 6/9/95 ck #932

☐ CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

PERSON FILING APPLICATION:

NAME: Yost (last) Eric (first) (mi)

ADDRESS: 3300-H Woodpark Blvd PHONE: (704) 596-1096

CITY: Charlotte STATE: NC ZIPCODE: 28206

Date: June 7 1995

PROPERTY OWNER:

NAME: Eastern Metal Supply of North Carolina (last) (first) (mi)

ADDRESS: 3300-H Woodpark Blvd. PHONE: (704) 596-1096

CITY: Charlotte STATE: NC ZIPCODE: 28206

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 20027-191-12

STREET ADDRESS: 9440 Bob Beatty Rd. Charlotte, NC 28206

ZONING: I-1

Township (check one):
☒ 0 Mecklenburg County ☐ 2 [illegible] ☐ 4 Pineville ☐ 6 Huntersville
☐ 1 Charlotte ☐ 5 Matthews ☐ 7 Mint Hill

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

es):

TYPE APPLICATION (check one):

☐ SOIL TEST - INDIVIDUAL LOT (D)
☒ NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR
☐ EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
☐ ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE H
☒ COMMERCIAL OR INDUSTRIAL (N)

(P)
NOVATION/NO MAJOR CHANGES (X)
RESIDENCE > 4 BEDROOMS (Z)

RESIDENTIAL PROPERTY (Type Building, check one):
☐ SINGLE MOBILE HOME (S) ☐ HOUSE (H) ☐
☐ DOUBLE WIDE (D) ☐ MODULAR HOME (M) ☐

BER OCCUPANTS:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business Distribution # Employees 15
Industrial Wastes (Y/N) N
Underground Storage Tanks On Property (Y/N) N Type _

hared Well (S)
her 'spring' (O)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED
☐ Swimming Pool ☐ Jacuzzi ☐ Stable/L
☐ Garage ☐ Storage Building ☐ Deck/Pat

1445 available space - maps in file

The undersigned, owner, or legal agent for the owner, of [illegible] the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same [illegible] agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of proces...

X Signed: Eric Yost X Date: Jun 8, 1995

NOTICE:

The undersigned, an authorized agent of the MECKLENBUR[illegible] DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this do[illegible] is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment [illegible] the time of issuance of the permit and is subject to the following provisions:

...No work shall be conducted on the septic tank [illegible] NS FROM ISSUANCE
an installation, Construction, Alteration and [illegible] ALID 6 MONTHS FROM ISSUANCE
approval is granted by this Department. [illegible] ALID 1 YEAR FROM ISSUANCE

...This permit is not transferable.

...

Please review -

Do you think I need to mention in this anything about modified/alt./innovative systems in this letter? I think it should be ok like this but I was debating

thanks.

_____ Date

_____ Date

an Head

WATER 12/91

Detail PLAN in File

PROPOSED PLOT PLAN

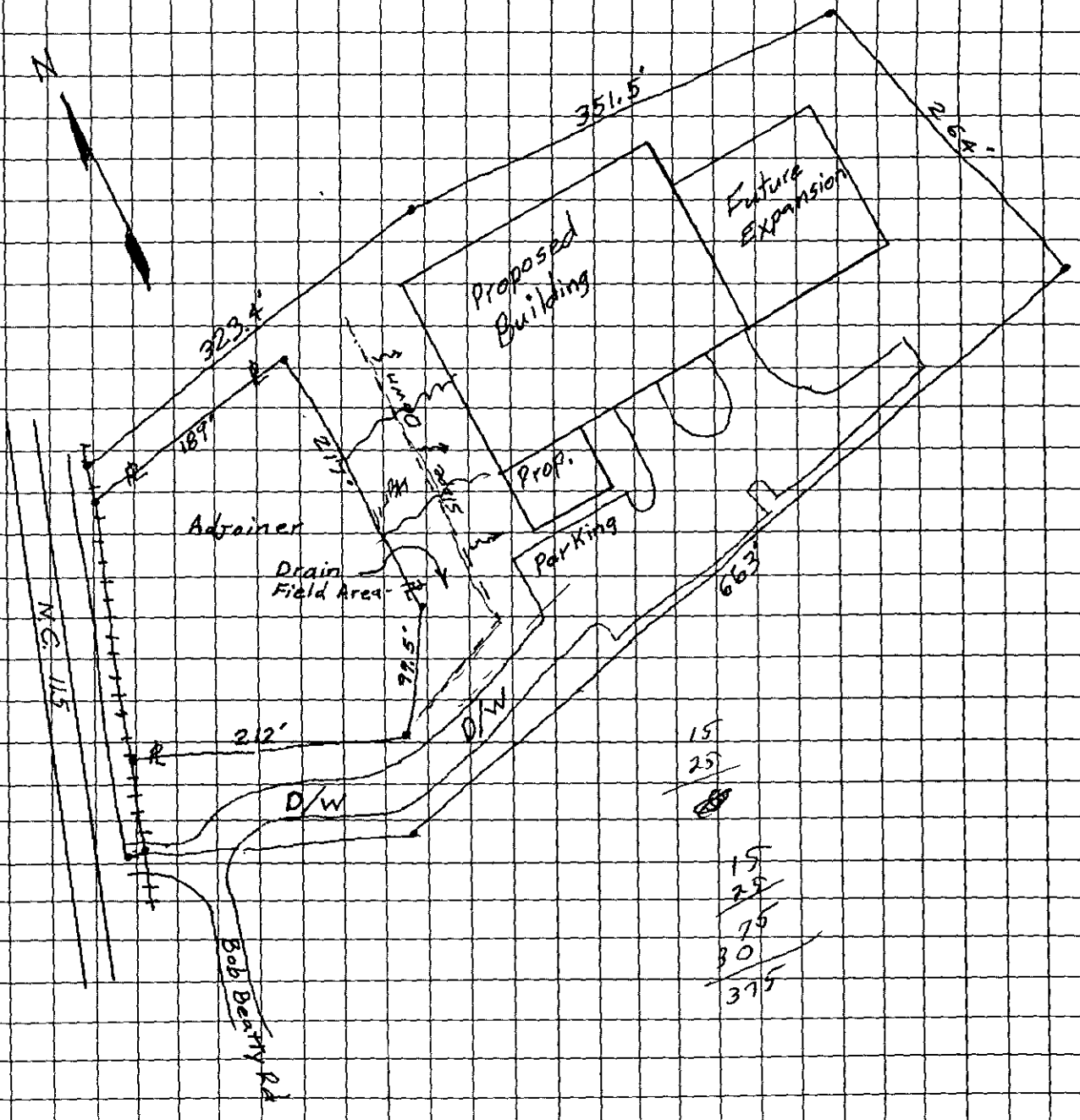
COPY

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

FILE: 1186B

TC: P0027-19-12

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.



X Ann Lee

OWNER/AGENT SIGNATURE

DATE June 8, 1995

APPROVAL DATE _____

12 50
3 | 37 50
6
15

4 17
3 | 12 50
1

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

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

☐ CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

PERSON FILING APPLICATION:

NAME: _____ (last) (first) (mi)

ADDRESS: _____ PHONE: (___) _____

CITY: STATE: ZIPCODE:

Date:

PROPERTY OWNER:

NAME: _____ (last) (first) (mi)

ADDRESS: _____ PHONE: (___) _____

CITY: STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: _____

STREET ADDRESS: _____

_____

ZONING:

Township (check one):
☐ 0 Mecklenburg County ☐ 2 Davidson ☐ 4 Pineville ☐ 6 Huntersville
☐ 1 Charlotte ☐ 3 Cornelius ☐ 5 Matthews ☐ 7 Mint Hill

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: LOT SIZE (in acres):

TYPE APPLICATION (check one):

☐ SOIL TEST - INDIVIDUAL LOT (D)
☐ NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
☐ EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
☐ ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or N)
☐ COMMERCIAL OR INDUSTRIAL (N)
☐ SOIL TEST DEVELOPMENT (P)
☐ ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
☐ MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
☐ REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
☐ SINGLE MOBILE HOME (S) ☐ HOUSE (H) ☐ MULTIPLE FAMILY (U)
☐ DOUBLE WIDE (D) ☐ MODULAR HOME (M) ☐ OTHER _____ (O)

NUMBER BEDROOMS: NUMBER OCCUPANTS:

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ____ Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type _____

WATER SUPPLY (check one):
☐ Community (C) ☐ Shared Well (S)
☐ Municipal (M) ☐ Other 'spring' (O)
☐ Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
☐ Swimming Pool ☐ Jacuzzi ☐ Stable/Barn ☐ Workshop ☐ None
☐ Garage ☐ Storage Building ☐ Deck/Patio ☐ Bedrooms ☐ Other

The undersigned, owner, or legal agent for the owner, of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Date:

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules for Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

...No work shall be conducted on the septic tank system until an installation, Construction, Alteration and/or Repair approval is granted by this Department.

...This permit is not transferable.

...

☐ IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
☐ MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
☐ ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

_____ Environmentalist Date

_____ Director or Authorized Section Head Date

WATER : 12/91

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 029330

File: 11363 Action 2

Parcel: 2 . 37 - 111 . 2 ☐ PC

Location: 14411 3rd Ave

Subdivision: Plaza

Lot: Block: Acres:

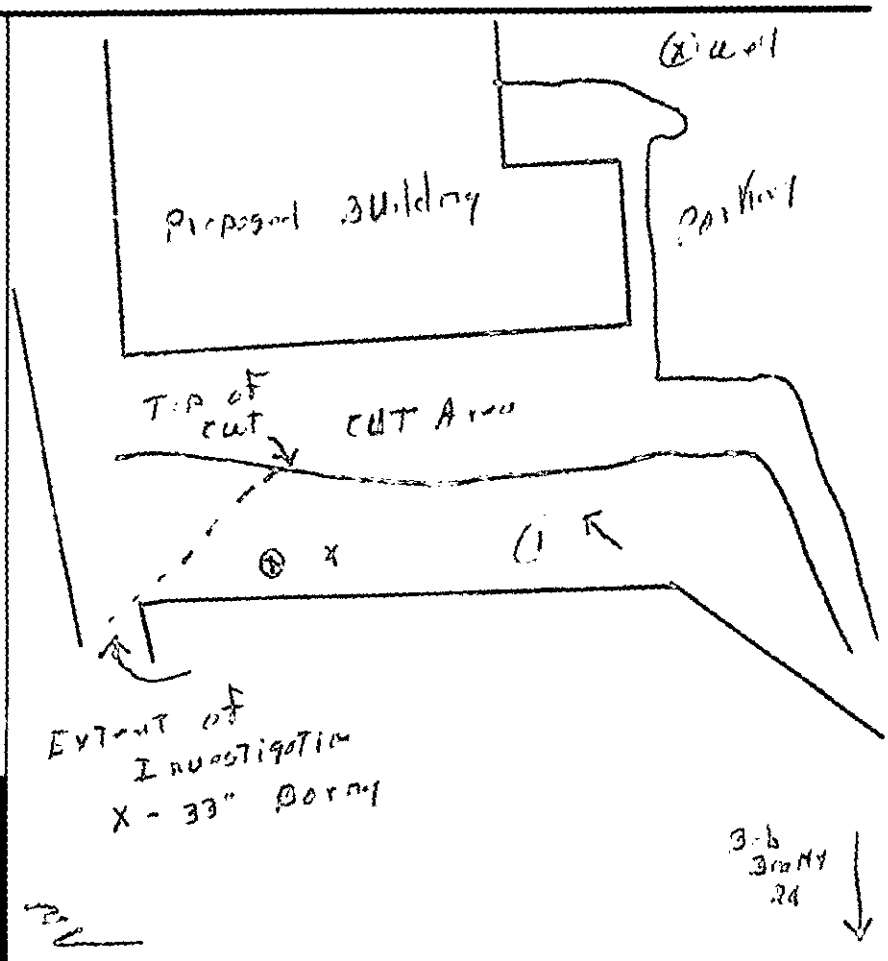
Owner: Mecklenburg County

Address: 3205-A N. Tryon St.

Comments: 4 - Acres, 2 - Flat, 2 - Slight, Usable for pump

Described by: William A. Marks

Date: 6-14-95



***** EVALUATION KEY *****

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	S PS U 2-6%	S PS U	S PS U	S PS U	S PS U	S PS U
Texture	S PS U silty CLAY	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S PS U Blocky	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S PS U Somewhat poorly drained	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S PS U 40" +	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S PS U 25"	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S PS U adequate	S PS U	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	U. Cullen					
Area Classification	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U

THE INFILTRATOR™

SEPTIC SYSTEM INSTALLATION INSTRUCTIONS

1 Excavate and level 3' wide trenches.

2 Prepare trench bottom and sides in accordance with state and local regulations. (Infiltrator Systems recommends raking sidewall and bottom infiltrative surfaces to eliminate smearing.)

3 Screw splash plate on bottom of open end plate.

4 Screw open end plate into inlet end (without interlocks) of first INFILTRATOR™ chamber with splash plate extending into unit.



5 Place first unit in the inlet end of trench with interlocks downstream.

6 Run distribution pipe through inlet opening in end plate but not beyond splash plate. Single screw may be used to hold in place. **Pipe does not normally run the length of system.**



7 Connect INFILTRATOR™ units together, fully engaging interlocks to form desired trench length.

a. The joints may be screwed together for ease in construction.

b. Trench grade should be checked with a level or surveying equipment.

8 Screw closed end plate in downstream end of last unit to hold in place. **NOTE:** For serial distribution, or to loop the trenches together, use an open end plate at the downstream end of the trench, and run a pipe from the opening to the next trench.

9 Fill side wall area to top of slots with native soil. "Walk" fill into place to give proper support of sides. **THIS IS VERY IMPORTANT TO ACHIEVE FULL STRENGTH.**



10 Backfill to a minimum of 12" of cover after compaction and settling for H-10 units and 18" for H-20 units. Avoid large rocks in the backfill material. **CAUTION:** Avoid vehicle traffic on system during construction since soil has not settled. This is particularly important in sand, since loose sand offers very little structural support. Most states advise avoiding vehicle traffic to prevent compaction of the infiltrative surface. (After proper depth of cover is compacted and settled, INFILTRATOR™ leaching chambers will then support vehicle weight not to exceed 16,000 lbs. per axle for H-10 units and 32,000 lbs. per axle for H-20 units.)



INFILTRATOR™ is a trademark of Infiltrator Systems, Inc.

Division of Environmental Health

On-Site Wastewater Section

Innovative Wastewater System Approval

AUG 29 1994

INFILTRATOR SYSTEMS, INC.

Innovative Wastewater System No: IWWS-93-2-R1

Issued to: Infiltrator Systems, Inc.
P. O. Box 768
Old Saybrook, CT 06475

For: "Infiltrator" chambered sewage effluent subsurface disposal system.
[Standard Model with H-10 Load Design]

Date: August 25, 1994

In accordance with 15A NCAC 18A .1969, an application by Infiltrator Systems, Inc. of Old Saybrook, CT for approval of the chamber (gravel-less) nitrification trench system has been reviewed, and the standard unit Infiltrator system has been found to meet the standards of an innovative system when all of the following conditions are met:

I. Permitting:

Prior to the installation of the standard unit Infiltrator nitrification trench system at a site for which application is being made for an improvement permit or at a site for which an improvement permit has been previously issued for a system described in 15A NCAC 18A .1955, .1956, or .1957, the owner or authorized agent shall notify the local health department. The local health department shall issue an improvement permit or amend the previously issued improvement permit allowing for the use of the proposed innovative system upon a finding that all provisions of this approval and all other applicable rules shall be met. Use of the proposed innovative system and any conditions shall be described in the improvement permit or amended improvement permit, as applicable. Such information shall also be described on the operation permit to be issued upon the acceptable completion of the system installation.

II. System Description:

a. Pretreatment by septic tank as required in 15A NCAC 18A .1952.

b. Standard chamber unit consisting of a high density polyethylene arch-shaped injection molded chamber with an average inside width of 2.5 ft.(30 inches) and an overall length of 6 ft 2¼ inches. The standard unit height is approximately one foot high with ¼ inch wide slotted sidewalls approximately 6 inches high.

The chamber sidewall slope is approximately 20 degrees toward the chamber center or away from the trench sidewall. Note: 16 Infiltrator chamber units are approximately equal to 100 linear feet.

c. Each chamber unit is designed to mechanically interlock with the downstream chamber forming a complete nitrification trench that consists of an inlet plate with a splash plate located below the inlet on the trench bottom and a solid end plate to be located at the distal end of any chamber nitrification line.

III. Siting Criteria:

The standard unit Infiltrator nitrification trench assembly may be utilized on sites which meet the following criteria:

a. Sites which are classified Suitable or Provisionally Suitable for a conventional nitrification field system in accordance with 15A NCAC 18A .1948(a) or (b).

b. Sites which have been reclassified as Provisionally Suitable in accordance with 15A NCAC 18A .1956(1), (2), (4), (5), and (6).

c. Sites which meet the criteria for new or existing fill in accordance with 15A NCAC 18A .1957(b).

d. The required vertical separation shall be measured from the bottom edge of the chamber.

IV. Infiltrator chamber system sizing:

a. The maximum long-term acceptance rate (LTAR) shall be as follows:

		LTAR (gpd/ft^2)	
		Natural Soil	Saprolite
Soil Group I	Sands	0.8 - 1.0	0.4 to 0.6
Soil Group II	Coarse Loams	0.6 - 0.8	0.1 to 0.4
Soil Group III	Fine Loams	0.3 to 0.6	---
Soil Group IV	Clays	0.1 to 0.4	---

b. The LTAR shall be based on the most hydraulically limiting naturally occurring soil horizon within three feet of the ground surface or to a depth of one foot below trench bottom, whichever is deeper.

c. To determine the total trench bottom area (ft^2) required; the design daily sewage flow shall be divided by the applicable long-term acceptance rate shown in (a) above. The minimum linear footage of Infiltrator chamber system required shall

be determined by dividing the total trench bottom area by 4 feet when used in a conventional nitrification trench. No reduction in area is allowed for Infiltrator systems installed in bed or fill systems.

Example:

Assume: Three bedroom residence with a design daily sewage flow of 360 gallons on a sandy clay loam (Group III) soil.

Then: Total computed trench bottom area is:
360 gpd/0.5 LTAR = 720 ft^2;

The required linear footage of Infiltrator system is:
720 $ft.^2$/4.0 ft = 180 linear ft.
(where 4.0 ft. is the equivalency factor for the standard unit Infiltrator chamber system).

d. To determine the minimum number of Infiltrator chamber units required in a nitrification trench divide the trench bottom area by 24 and round to the nearest whole number.

720 ft^2/24 = 30 units

e. The mininum area (without reduction or equivalency factor) for a bed system shall be determined as required in 15A NCAC 18A.1955(d) except that the chambers shall be placed in rows next to each other.

f. The available space requirements of 15A NCAC 18A. 1945 shally apply. Also this approved innovative system may be designated as the required replacement system.

V. Design and Installation Criteria:

a. The Infiltrator chamber system used in nitrification trenches shall be in 3 ft. wide maximum excavation and constructed not less than nine feet on centers.

b. The inlet to the Infiltrator chamber shall be in the uppermost portion of the specially prepared inlet panel with a spash plate below the inlet on the trench bottom.

c. Clean Group I, II, or III soil backfill (soil normally found in the upper 10 inches of the trench excavation) shall be placed along the chamber sidewall area to a minimum compacted (walked in) height of 6 inches above the trench bottom. Addition backill (Group I, II, III, or IV) shall be placed to a minimum compacted height of 12 inches above the chamber. No excavation equipment shall travel over the chamber system.

It is critical to note that the nitrification trench bottom shall be at least 24 inches below finished grade, and the inlet invert shall be approximately 8 inches above the trench bottom, and at least 17 inches below finished grade.

d. Individual chamber trenches shall be constructed level in all directions (both across and along the trench bottom) and shall follow the contour the ground surface elevation (uniform depth) with continuous interlocking chambers, including specially constructed Infiltrator angle chamber units, without any dams, step downs or other water stops.

e. Infiltrator systems installed on a sloping site may use distribution devices or stepdowns as described in 15A NCAC 18A .1955(j) and (l) when it is necessary to change level nitrification line segments from upper to lower elevations.

f. Manufacturer's installation instructions for the Infiltrator system used in septic tank systems shall be followed except as required herein or 15A NCAC 18A .1900 et seq.

g. The system shall be installed by a contractor authorized in writing by the manufacturer.

VI. Operation and Maintenance Requirements

The Infiltrator chamber system shall have a minimum classification as a Type III g. system (other non-conventional trench systems) in accordance with Table V(a) of 15A NCAC 18A .1961(b).

VII. Repair Systems

The provisions of 15A NCAC 18A .1961(c) shall apply to the use of the standard Infiltrator chamber system for repairs to existing malfunctioning septic tank systems.

Approved by: Steve J. Steinbeck

Date: August 25, 1994

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 028610

File: 1186B

Action 2

Parcel: 90 027-191-2

☐ PC

Location: 9440 Bob Beatty

Subdivision: Road

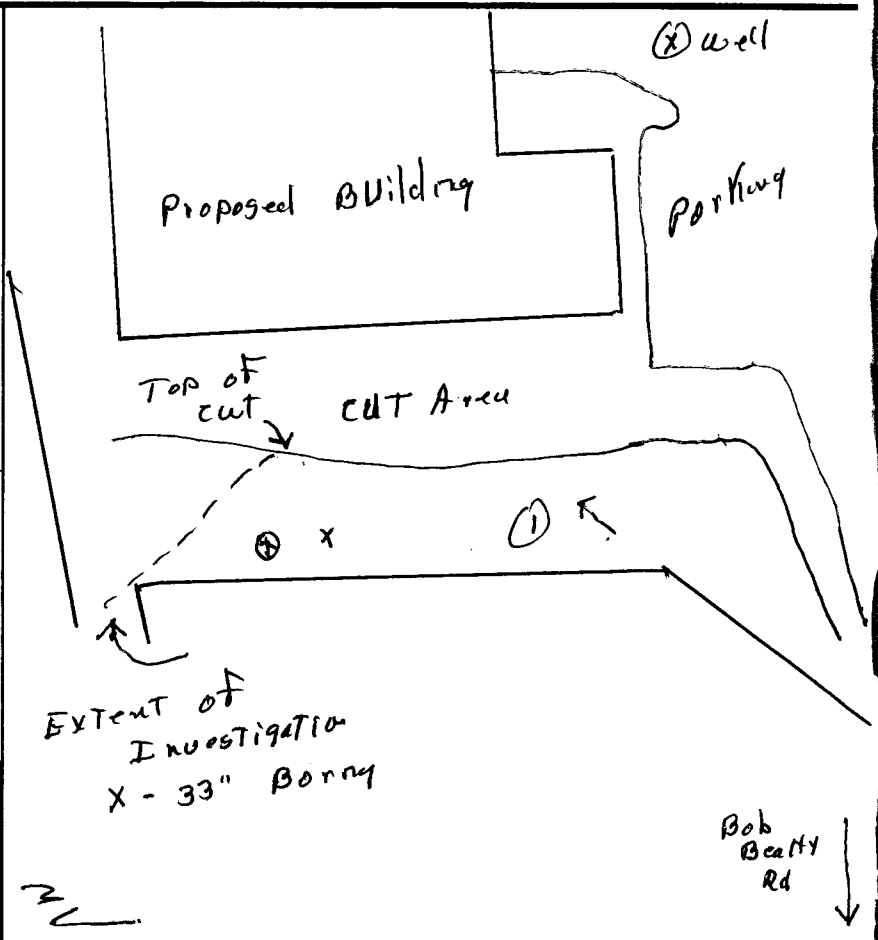
Lot: Block: Acres:

Owner: Eastern Metal Supply of N.C.
Address: 3300-H Woodpark Blvd.
Charlotte, N.C. 28206

Comments: 100% Repair, 3 gal/ft²
1 day LTAR, would
need pump

Described by: William R. Mauldin

Date: 6-14-95



***** EVALUATION KEY *****

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	(S) PS U 2-6%	S PS U	S PS U	S PS U	S PS U	S PS U
Texture slightly Exp.	S (PS) U clay	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage 7-48" To soil	(S) PS U wetness	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	(S) PS U 48"+	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	(S) PS U 7-48"	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space Restricted	S PS (U)	S PS U	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	IV Cecil-Lilo					
Area Classification	S PS (U)	S PS U	S PS U	S PS U	S PS U	S PS U

EASTERN METAL SUPPLY

DATE 12-21-91

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION MeCk

#027-191-12
PARCEL NUMBER

9440 Bob Beatty RD
ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

N/A
PROJECT NAME (IF APPLICABLE)

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

1. SUBDIVISION REGULATIONS	___APPROVED	___NOT APPROVED
2. FLOODWAY REGULATIONS	___APPROVED	___NOT APPROVED
3. WATERSHED PROTECTION	___APPROVED	___NOT APPROVED
4. COMMERCIAL DRAINAGE PLAN	___APPROVED	___NOT APPROVED
5. PUBLIC UTILITY EASEMENT	✓ PRESENT	___NOT PRESENT
6. PROPERTY FRONTS ON THOROUGHFARE	___YES	✓ NO
7. DRIVEWAY PERMIT REQUIRED	___YES	✓ NO
8. DOES PROJECT CONFLICT WITH ROAD PROJECT?	___YES	✓ NO

REMARKS: PLAN Review

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE WHEN PAYING PERMIT FEE. CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

ALL OTHER FORMS OBSOLETE

☒ NEW ADDRESS

SIGNED: B. McConnico

REVISED 1/91

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

1186B

P/A #150 6/9/95 CK #932

☐ CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

PERSON FILING APPLICATION:

NAME: Yost (last) Eric (first) (mi)

ADDRESS: 3300-H Woodpark Blvd PHONE: (704) 596-1096

CITY: Charlotte STATE: NC ZIPCODE: 28206

Date: June 7 1995

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 027-191-12

STREET ADDRESS: 9440 Bob Beatty Rd.
Charlotte, NC 28206

ZONING: I-1

PROPERTY OWNER:

NAME: Eastern Metal Supply of North Carolina (last) (first) (mi)

ADDRESS: 3300-H Woodpark Blvd. PHONE: (704) 596-1096

CITY: Charlotte STATE: NC ZIPCODE: 28206

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
☒ 0 Mecklenburg County ☐ 2 Davidson ☐ 4 Pineville ☐ 6 Huntersville
☐ 1 Charlotte ☐ 3 Cornelius ☐ 5 Matthews ☐ 7 Mint Hill

TYPE APPLICATION (check one):

LOT NUMBER: LOT SIZE (in acres):

☐ SOIL TEST - INDIVIDUAL LOT (D)
☒ NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
☐ EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
☐ ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
☒ COMMERCIAL OR INDUSTRIAL (H)
☐ SOIL TEST DEVELOPMENT (P)
☐ ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
☐ MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
☐ REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
☐ SINGLE MOBILE HOME (S) ☐ HOUSE (H) ☐ MULTIPLE FAMILY (U)
☐ DOUBLE WIDE (D) ☐ MODULAR HOME (M) ☐ OTHER _____ (O)

NUMBER BEDROOMS: NUMBER OCCUPANTS:

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business Distribution # Employees 15 Per Shift 15 0 0
Industrial Wastes (Y/N) N
Underground Storage Tanks On Property (Y/N) N Type _____

WATER SUPPLY (check one):
☐ Community (C) ☐ Shared Well (S)
☒ Municipal (M) ☐ Other 'spring' (O)
☐ Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
☐ Swimming Pool ☐ Jacuzzi ☐ Stable/Barn ☐ Workshop ☐ None
☐ Garage ☐ Storage Building ☐ Deck/Patio ☐ Bedrooms ☐ Other

The undersigned, owner, or legal agent for the owner, of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

X Signed: Eric Yost X Date: June 8, 1995

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

...No work shall be conducted on the septic tank system until an installation, Construction, Alteration and/or Repair approval is granted by this Department.

...This permit is not transferable.

...

☐ IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
☐ MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
☐ ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

_____ Environmentalist Date

_____ Director or Authorized Section Head Date

WATER : 12279

1186B/9157A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

$50.00 09/20/93 OR #1494 [] CRT

$100.00 9/24/93 OR #1495

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

Date:

PERSON FILING APPLICATION:
NAME: Eastern Metal Supply (last) (first) (mi)
ADDRESS: 3300 H Woodpark Blvd. PHONE: (704) 596-1096
CITY: Charlotte STATE: N.C. ZIPCODE: 28206

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 027 19112
STREET ADDRESS: ~~9336 Bob Beatty Rd~~
Charlotte, N.C.
ZONING: I-1

PROPERTY OWNER:
NAME: Todd Carey B (last) (first) (mi)
ADDRESS: 9336 Bob Beatty Rd. PHONE: (704) 596-2370
CITY: Charlotte STATE: NC ZIPCODE: 28213

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
[X] 0 Mecklenburg County [] 2 Davidson [] 4 Pineville [] 6 Huntersville
[] 1 Charlotte [] 3 Cornelius [] 5 Matthews [] 7 Mint Hill

TYPE APPLICATION (check one):

LOT NUMBER: LOT SIZE (in acres): 4 +/- acres

[X] SOIL TEST - INDIVIDUAL LOT (D)
[] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (N)
[X] SOIL TEST DEVELOPMENT (P)
[] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
[] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
[] SINGLE MOBILE HOME (S) [] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [] MODULAR HOME (M) [] OTHER _____ (O)

NUMBER BEDROOMS: NUMBER OCCUPANTS:
SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business Warehouse # Employees 5 Per Shift Per Shift
Industrial Wastes (Y/N) __
Underground Storage Tanks On Property (Y/N) __ Type _____

WATER SUPPLY (check one):
[] Community (C) [] Shared Well (S)
[X] Municipal (M) [] Other 'spring' (O)
[] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[] Swimming Pool [] Jacuzzi [] Stable/Barn [] Workshop [] None
[] Garage [] Storage Building [] Deck/Patio [] Bedrooms [] Other

The undersigned, owner, or legal agent for the owner, of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Carey B. Todd Date: 9-20 93

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

...No work shall be conducted on the septic tank system until an installation, Construction, Alteration and/or Repair approval is granted by this Department.

...This permit is not transferable.

...

[] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Environmentalist Date

Director or Authorized Section Head Date

WATER : 122791

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 19491

File: 1186 B/9150A
Parcel: PO 027-191-12
Action: /
☐ PC

Location: Bob Beatty Road

Subdivision:

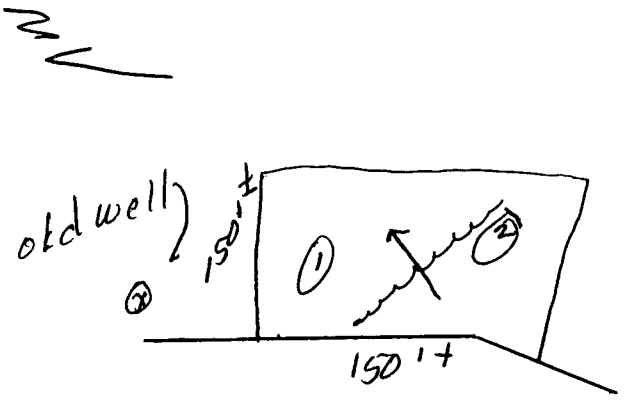
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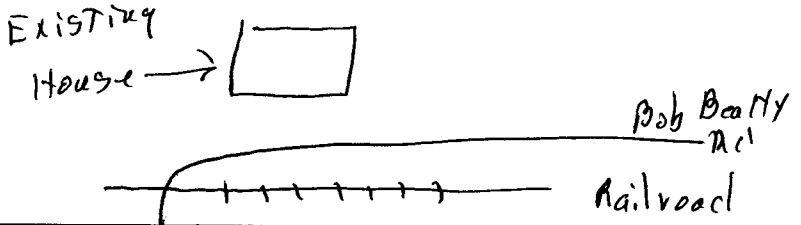
Owner: Carey B. Todd
Address: 9336 Bob Beatty Road
Charlotte, N.C. 28213

Comments: 100% Repair, 3 gal/ft/day system would probably need lift pump.

Described by: William B. Marlin

Date: 10-7-93





***** EVALUATION KEY *****

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	(S) PS U 2-8%	S PS (U) old Terrace	S PS U	S PS U	S PS U	S PS U
Texture	(S) PS U Slightly Expansive clay	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U sub + blocky	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	(S) PS U >48" To water	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	(S) PS U >48"	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	(S) PS U >48"	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	IV Cecil-Lilo	odd Terrace				
Area Classification	S (PS) U	S PS (U)	S PS U	S PS U	S PS U	S PS U

MCHD.

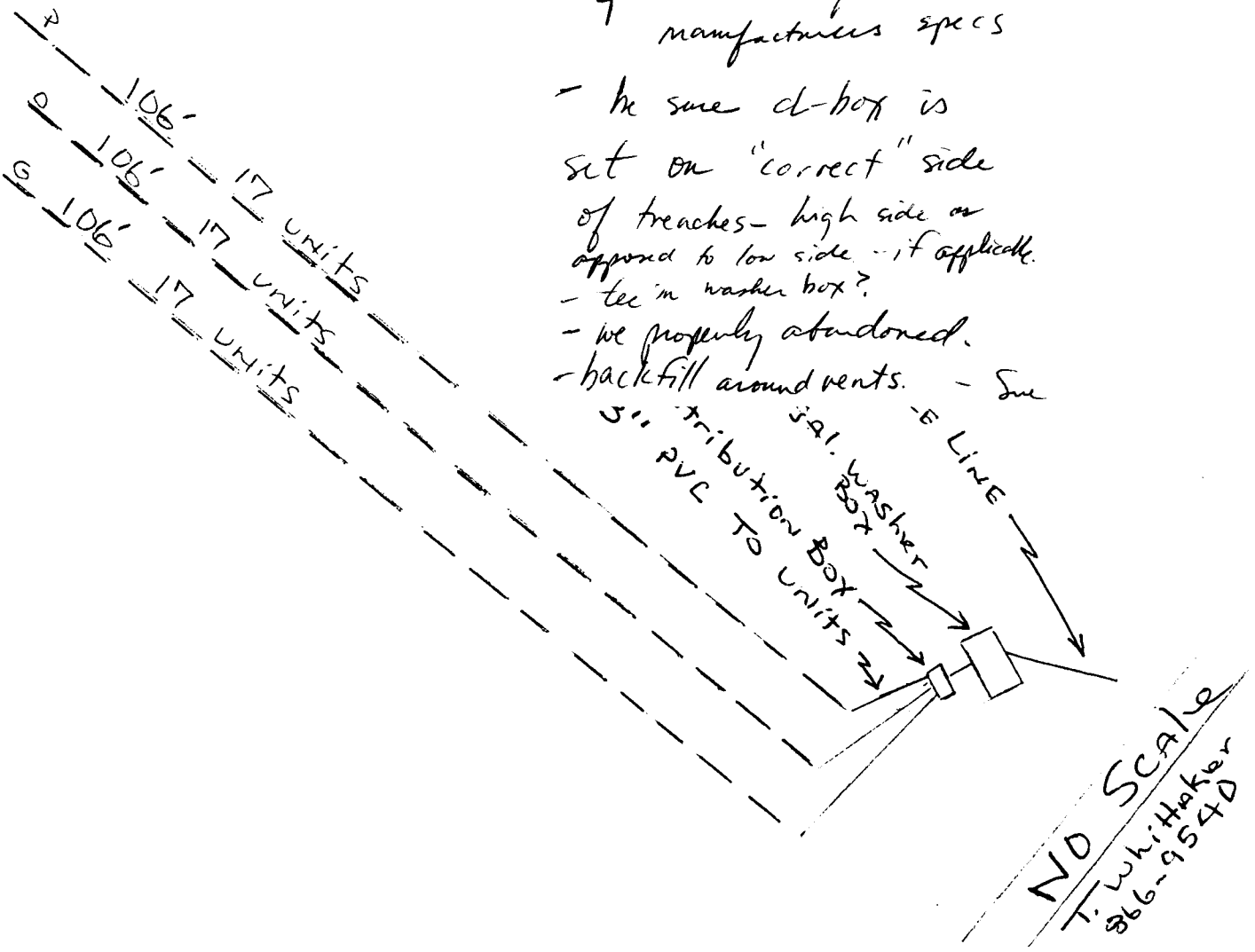
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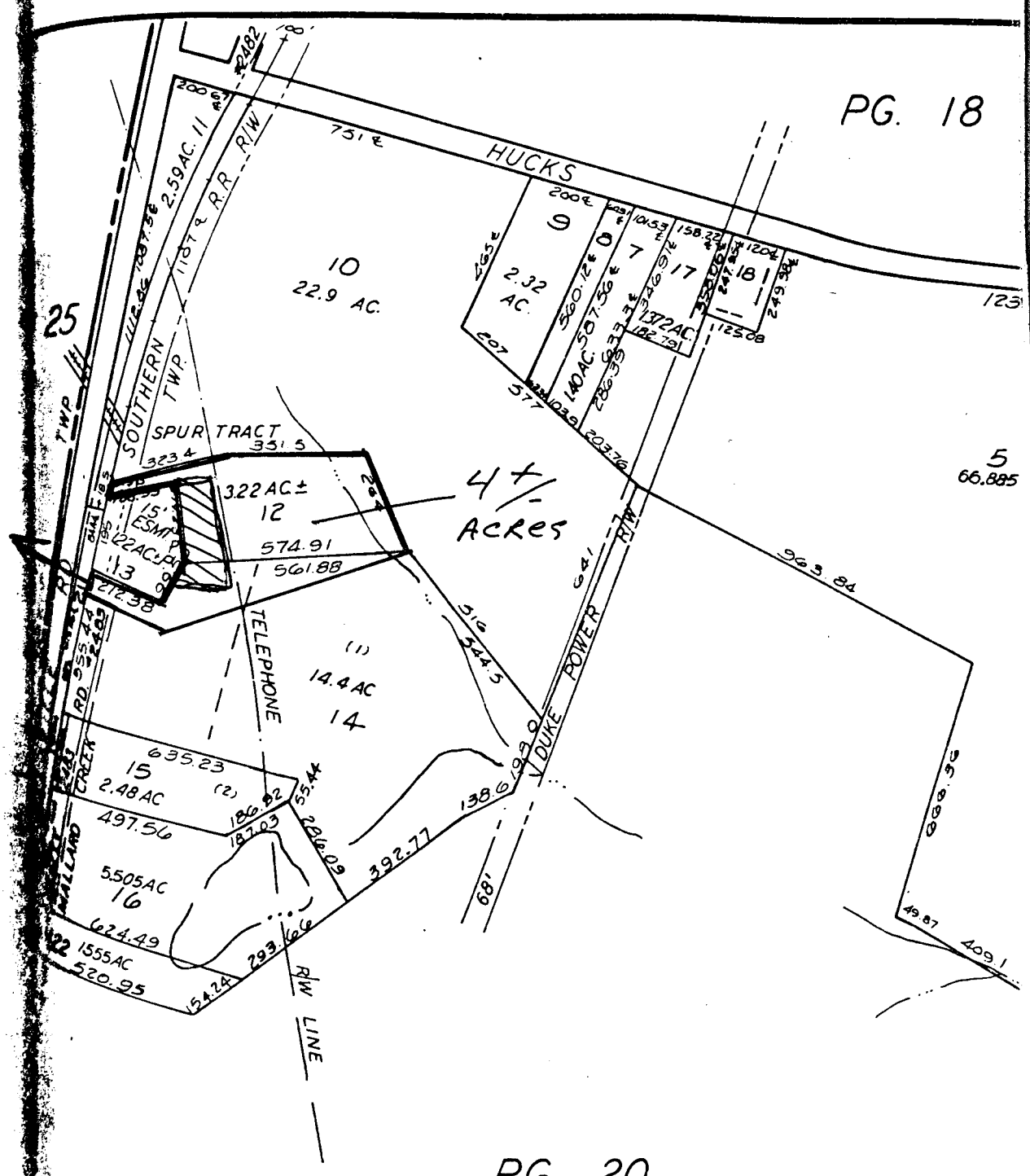
TC: 027-191-12

Infiltrator Septic Plan / Pumped

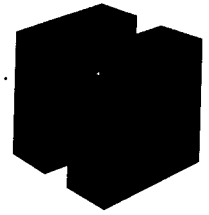
* 1,500 gal. Septic Tank
  1,000 gal. Pump Tank
* Distribution - pump to 75 gal. Washer Box, gravity feed to Distribution Box. Place 90° PVC Elbow in Washer Box (down). 3" PVC to serve units from D-box.
* Units (3) 106' Infiltrator Lines
  (17) units per Line
  (51) units Total
  *Sys. size based on # of Employees (15)

Verify:
- Speed levels per manufacturers specs
- Be sure d-box is set on "correct" side of treaches - high side as opposed to low side - if applicable.
- tee in washer box?
- we properly abandoned.
- backfill around vents. - See





Entrance to Beatty Rd.



SC HONDROS
& ASSOCIATES, INC.

PO BOX 220456
CHARLOTTE, NC 28222-0456
TEL. (704) 377-4614
FAX (704) 372-1252

Richard A. (Al) Broome
P.E., R.L.S.
Design Engineer

Send well abandonment info