SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

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

File Number: 6505A | 15491

Assigned Inspector: Patrick / Troy

☒ IP $250.00: MC 5/9/25 Initial/Date

☒ IP Commercial $450.00: _____ Initial/Date

☑ CA & OP $400.00: 12/4/25 SC Initial/Date

☐ Alteration Fees $300: _____ Initial/Date

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

☐ Use Existing Fees $100.00: _____ Initial/Date

☐ Use Existing Approved ☐ Use Existing Denied

☒ Send IP permit for signature: 10/14/25 ☑ Signature received: 10/14/25

☒ Floor plans reviewed.

☒ Generate CA ☒ Approve as Noted in Winchester 12/4/25 - CO hold placed LP

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

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

☐ Certified operator contract is on file: _____

☒ Septic file complete: 8/6/26

☒ Release final hold in Winchester: _____

Comments:
Address was subdivided in November 2025.
Old Parcel: 139-101-07 → new Parcel: 139-101-53.
Address: FROM 10634 TO 10642 Williams Rd. OK'd by Troy. 12/4/25 MP

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	05/09/25	**Amount:**	250.00
Receipt #:	155161	**Tendered:**	250.00
Check / Auth #:	VISA 04127D	**Returned:**	0.00
Received By:	ORTIZMP		

Account Information

Account #: 200000
Contractor: RICHARD WHITTIER
Attn:
Address: 9801 ARLINGTON CHURCH RD
Address:
City/State/Zip: CHARLOTTE, NC 28227

Item	Description	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 10634 WILLIAMS RD	1	250.00	250.00

Permit#

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
270.83					

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 12/04/25
Receipt #: 158139
Check / Auth #: VISA 5858
Received By: ALVARJS

Amount: 200.00
Tendered: 200.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: RICHARD WHITTER
Attn: 10642 WILLIAMS RD
Address:
Address:
City/State/Zip: ,

Item	Description	Quantity	Unit Price	Total Price
0734	Septic Construction Authorizat	1	200.00	200.00

Permit#

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
135.00	210.00				

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 12/04/25
Receipt #: 158140
Check / Auth #: VISA 5858
Received By: ALVARJS

Amount: 200.00
Tendered: 200.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: RICHARD WHITTER
Attn: 10642 WILLIAMS RD
Address:
Address:
City/State/Zip: ,

Item	Description	Quantity	Unit Price	Total Price
0703	Septic Operational Permit 10642 WILLIAMS RD	1	200.00	200.00

Permit#

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
	210.00				

6505A / 1549

MECKLENBURG COUNTY
HEALTH DEPARTMENT

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: 13910107
STREET ADDRESS: 10634 Williams Rd
CITY: Mint Hill
STATE: NC ZIP: 28227
SUBDIVISION NAME: N/A
LOT #: _____ LOT SIZE (acres): 3.45
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: 2000
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 4
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 [5] ANY TYPE [1] CONVENTIONAL [2] ACCEPTED [3] INNOVATIVE [4] 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? ASAP ☐ N/A

12. PROPERTY OWNER:

NAME: Jeff Maness
ADDRESS: 10634 Williams Rd
CITY: Mint Hill
STATE: N.C. ZIP: 28227
WORK PHONE: _____
MOBILE PHONE: 704-545-1962
FAX: _____
E-MAIL: _____

13. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:

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

NAME: Richard G Whittier
ADDRESS: 9801 Arlington Church Rd
CITY: Charlotte
STATE: N.C. ZIP: 28227
WORK PHONE: _____
MOBILE PHONE: 704-400-4959
FAX: _____
E-MAIL: Whittier.rick@Yahoo.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.

RW (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.

Richard A White — 5/8/2025

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

---

OFFICE USE ONLY

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

SEPTIC APPLICATION FEE RECEIVED: $ 250 DATE FEE RECEIVED: 5/9/25

WELL APPLICATION FEE RECEIVED: $ _____ DATE FEE RECEIVED: _____

APPLICATION PROCESSED BY: MR

GWS FILE NUMBER ASSIGNED: 4505A

APPLICATION ID NUMBER ASSIGNED: 15491

COMMENTS:

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

MECKLENBURG COUNTY
North Carolina
Public Health

Mecklenburg County Public Health

Raynard Washington, PhD, MPH
Health Director

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 Richard G Whittier is acting as my legal representative(agent) in the submittal of the application for a water supply well or septic permit located at

10634 Williams Rd Mint Hill

Number Street Town
(Or Parcel Number)

Jeff A Maness
Property Owner (Print Name)

Property Owner (Signature)

5/8/2025
Date

File # ~~U505A~~

PROPOSED PLOT PLAN

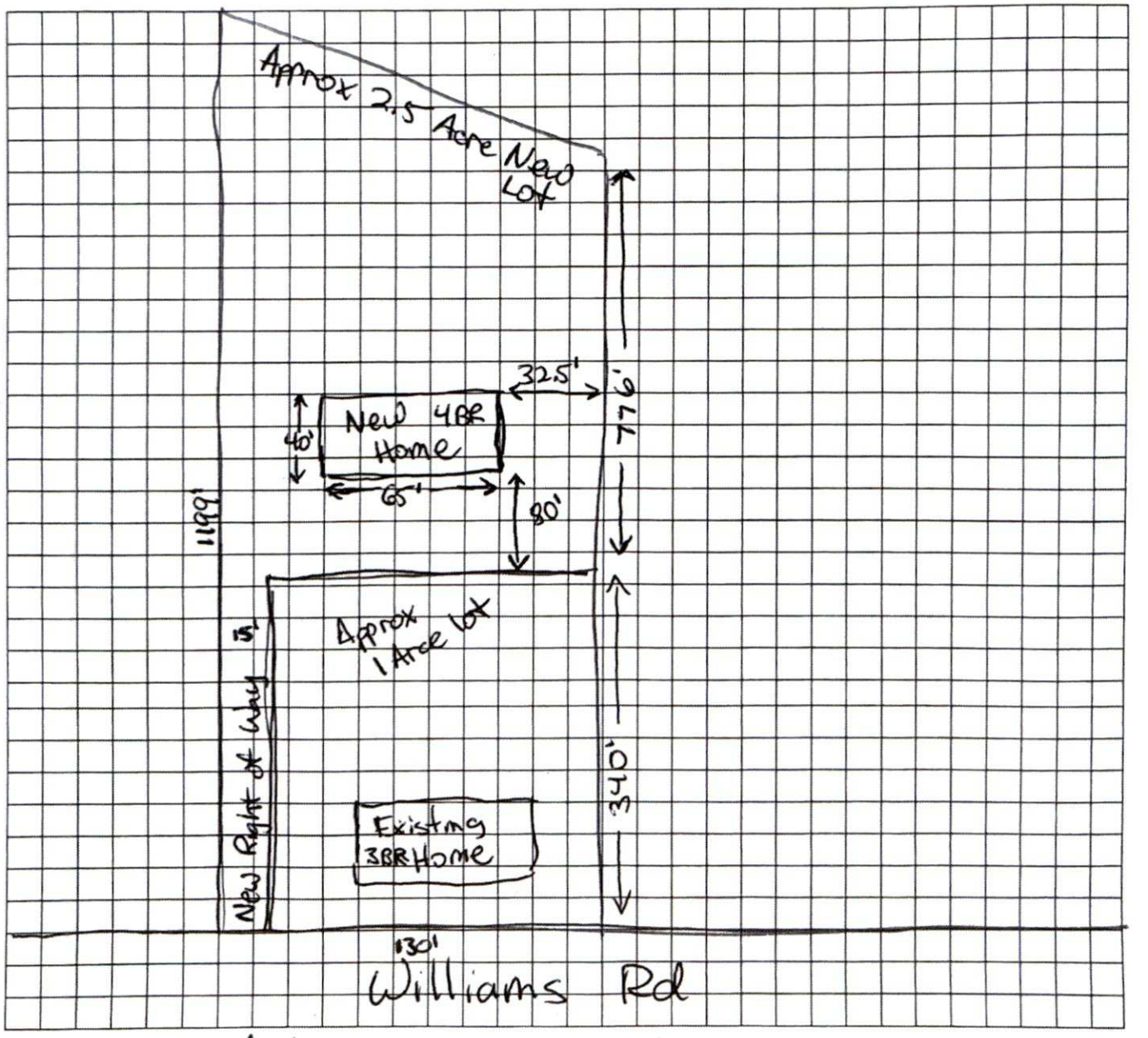
A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), 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: 10634 Williams Rd

Tax Parcel #: 13910107

Subdivision Name: N/A

Lot #: _____



Rachel G White

Property Owner's or Owner's Legal Representative Signature

5/8/25

Date

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

Revised on: 4/20/17

Mecklenburg County

Environmental Health

Groundwater & Wastewater Services

How to Prepare Your Property for an Improvement Permit:

The following items must be done before a Mecklenburg County Health Department representative can visit your site:

- Identity and mark all property corners
    - **Note: For tracts larger than 2 acres contact this department for specific instructions relating to identifying property lines.**
- All property lines should be marked every 50 feet.
- You are responsible for marking all structures to be built on site.
- Clearing excessive underbrush (i.e., thick briars, pine thickets, broom sage bushes, kudzu, honeysuckle, weeds, etc.) is required to allow thorough inspection for soil and wastewater system layout.
    - **Note: Absolutely no grading, filling, or cutting shall occur on site prior to evaluation for permit issuance.**
- When lot is clearly marked as above instructions require, give our office a call at 980-314-1680. We will then connect you with the inspector who will complete the soil test.

Note: Failure to follow these instructions properly can result in a 2-week delay in processing your application. If the lot is improperly marked and results in an additional trip a $100 extra trip fee may apply.

By signing below, I acknowledge that I have fully read and understand this document.

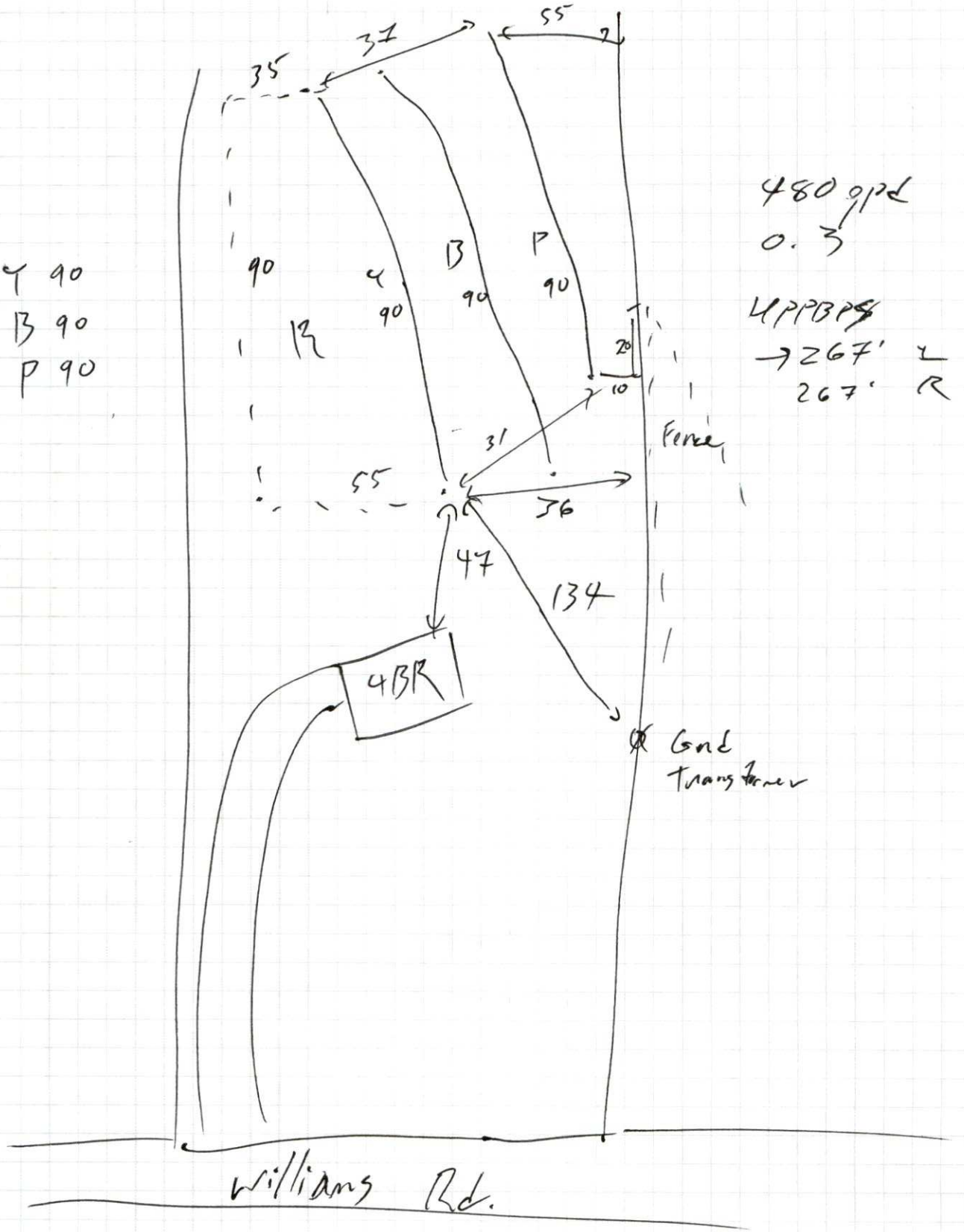
Property Owner's or Owner's Legal Representative Signature

Date 5/8/25

3205 Freedom Dr. Suite 8000 J, Charlotte NC • 28208 • (980) 314-1680 • Fax (704) 336-6894

Last Modified: 8/7/23

6/18/25



4 90
B 90
P 90

480 gpd
0.3

4PPBP$
→ 267' L
267' R

PrintFreeGraphPaper.com

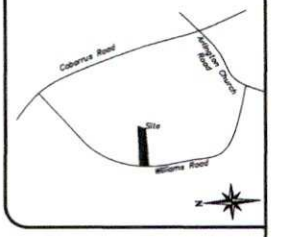
NUM	BEARING	DISTANCE
L1	N18°41'12"E	42.50'
L2	N27°27'07"E	95.48'
L3	N24°50'55"E	13.57'
L4	N16°56'27"E	38.57'

SURVEYOR'S CERTIFICATE

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG
I, THE UNDERSIGNED SURVEYOR, CERTIFY THAT THIS PLAT WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION; THAT THE BOUNDARIES NOT SURVEYED ARE CLEARLY INDICATED AS DRAWN FROM INFORMATION AS REFERENCED ON THE FACE OF THIS PLAT; THAT THE RATIO OF PRECISION AS CALCULATED EXCEEDS 1: 10,000 LINEAR FEET; THAT THIS PLAT WAS PREPARED IN ACCORDANCE WITH G.S. 47-30 AS AMENDED. WITNESS MY ORIGINAL SIGNATURE, LICENSE NUMBER AND SEAL THIS 15TH DAY OF JULY, A.D., 2025.

DocuSigned by: Gregory S Flowe — 7/15/2025
PROFESSIONAL LAND SURVEYOR — DATE

NORTH CAROLINA PROFESSIONAL SEAL L-3600 LAND SURVEYOR GREGORY S. FLOWE



Floyd D. Blackwelder
D.B. 5857 / 111

Chad M. Sherrill
D.B. 30618 / 173

35' SWIM Stream Buffer
Note: Top of Bank was Field located.

Managed Use Zone

N.C. Grid North
NAD 83/2011
By GPS observation
of the N.C. VRS

Jack W. Munday
D.B. 08739 / 975

William H. Gallagher, II
D.B. 39233 / 437

Lot 2
2.445 Acres

Lot 1
0.918 Acres
40000.4 Sq.ft.

15' Ingress, Egress & Utility Easement

Richard G. Whittier, Sr.
D.B. 35841 / 103
Lot 1, M.B. 68 / 489

Submitted electronically by "Tony C. Johnson, Attorney at Law" in compliance with North Carolina statutes governing recordable documents and the terms of the submitter agreement with the Mecklenburg County Register of Deeds.

REVIEW OFFICER'S CERTIFICATE

I, John Hoard, REVIEW OFFICER OF MECKLENBURG COUNTY, CERTIFY THAT THE MAP OR PLAT TO WHICH THIS CERTIFICATION IS AFFIXED MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING.

Signed by: John Hoard — 9/23/2025
REVIEW OFFICER — DATE

For Registration
Fredrick Smith
Register of Deeds
Mecklenburg County, NC
Electronically Recorded
2025 Sep 23 01:41 PM RE Excise Tax: $ 0.00
Book: 76 Page: 432 - 432 Fee: $ 21.00
Instrument Number: 2025096584

Fredrick Smith

MECKLENBURG COUNTY: APPROVED IN ACCORDANCE WITH THE ENGINEERING REQUIREMENTS OF THE SUBDIVISION ORDINANCE OF THE TOWN OF MINT HILL, MECKLENBURG COUNTY, NORTH CAROLINA.

Christina L. Hill — 9/18/2025
MECKLENBURG COUNTY STAFF — DATE

APPROVED IN ACCORDANCE WITH THE PROVISIONS OF THE SUBDIVISION ORDINANCE OF THE TOWN OF MINT HILL, NORTH CAROLINA.

Thomas N Gaty — 9/23/2025
PLANNING BOARD CHAIRMAN — DATE

DIVISION OF HIGHWAYS DISTRICT ENGINEER CERTIFICATE
I HEREBY CERTIFY THAT THE RIGHT OF WAY DEDICATION ALONG THE EXISTING STATE MAINTAINED ROAD(S) AS SHOWN ON THIS PLAT IS APPROVED AND ACCEPTED AS PUBLIC RIGHT OF WAY TO THE NORTH CAROLINA DEPARTMENT OF TRANSPORTATION, DIVISION OF HIGHWAYS.

Bethany L Gordon PE / ESA — 9/18/2025
DISTRICT ENGINEER — DATE

ONLY NORTH CAROLINA DEPARTMENT OF TRANSPORTATION APPROVED STRUCTURES ARE TO BE CONSTRUCTED ON PUBLIC RIGHT OF WAY.

CERTIFICATE OF OWNERSHIP AND DEDICATION

Know all men by these presents that I, hereby certify that I am the owner of the property shown on this plat, which property is located within the planning jurisdiction of the Town of Mint Hill, that I hereby freely adopt this plan of subdivision and dedicate to public use all streets, alleys, parks, walks, open space and easements, except those specifically indicated as private, and that I will maintain all such areas until the offer of dedication for any other public use authorized by law when such other use is approved by the Board of Commissioners in the public interest.

Signed by: Jeffery A. Maness — 9/18/2025
SIGNATURE OF OWNER — DATE

SIGNATURE OF OWNER — DATE

Prior to the release of permits, confirmation is required that lots are not part of a larger common plan of development to verify that the requirements of the post-construction and detention ordinances do not apply.

SWIM BUFFER ZONES

- *Stream Side Zone- Undisturbed*
- *Managed Use Zone - Limited clearing to a min. 8 healthy trees per 1000 sq.ft.*

NOTE:
ALL CORNERS ARE I.PIN(F) UNLESS OTHERWISE NOTED.

NOTE:
ALL DISTANCES ARE HORIZONTAL DISTANCES UNLESS OTHERWISE NOTED.

NOTE:
AREA BY COORDINATE COMPUTATION.

NOTE:
PROPERTY SUBJECT TO ANY VALID & ENFORCEABLE EASEMENTS, RESTRICTIONS & RIGHTS OF WAY OF RECORD.

SUBJECT PROPERTY Is NOT LOCATED IN A SPECIAL FLOOD HAZARD AREA AS DETERMINED BY FLOOD INSURANCE RATE MAP 3710551300K DATED 2/19/2014.

ZONING - R

MIN. LOT SIZE WITHOUT ROAD FRONTAGE 2.000 ACRES.

SETBACKS

FRONT- 50'
SIDE- 20'
REAR- 50'

MIN. LOT WITH 140' WITH ROAD FRONTAGE (Note Lot 1 is grandfathered in with current frontage.)

Built Upon Area Statement:
Maximum BUA permitted is 12% for Future Development.

Total Lot area is 146,525 sq.ft. (Parent Boundary)
Total impervious area allowed is 17,583 sq.ft.
Lot 1 allocated 4800 sq. ft. of impervious area
Lot 2 allocated 12,783 sq. ft. of impervious area

"Compliance with the Post-Construction Storm Water Ordinance is required."

"The subdivided property is considered a larger common plan of development and therefore will be subject to the applicable portions of the Town of Mint Hill Post-Construction Storm Water Ordinance during development and redevelopment (including expansion)."

"The purpose of the final plat is to indicate the enforceable restrictions on property usage that run with the land to ensure that future development and redevelopment maintains the site in compliance with Ordinance requirements. The restrictions on this recorded final plat shall be shown on any survey of any of the properties within the plat. Property owners have record notice of these restrictions and shall maintain the site in compliance with Ordinance requirements. It is recommended that real estate professionals (surveyors, title company representatives, real estate agents, closing attorneys) make property owners or purchasers aware of these restrictions at or prior to closing."

"This is a 30-foot "vegetated buffer" including a 10-foot zone adjacent to the bank. Disturbance of the buffer is allowed; however any disturbed area must be revegetated and disturbance of the 10 foot zone adjacent to the bank shall require stream bank stabilization using bioengineering techniques approved by Mecklenburg County."

This development (Lots 1 - 2) will not cumulatively disturb greater than 1 acre or else treatment of the BUA (Built Upon Area) will be required.

1.)Maintenance of all SDEs as shown on plat is the responsibility of the property owner or assigns."

2.) "The purpose of the storm drainage easement (SDE) is to provide storm water conveyance. Buildings are not permitted in the easement area. Any other objects which impede storm water flow or system maintenance are also prohibited."

This parcel of land is within the Clear Creek Watershed and the Yadkin Post Construction District.

I, GREGORY S. FLOWE, A PROFESSIONAL LAND SURVEYOR, NCPLS L-3600 CERTIFY TO ONE OR MORE OF THE FOLLOWING:

- [x] A. THAT THIS PLAT IS OF A SURVEY THAT CREATES A SUBDIVISION OF LAND WITHIN THE AREA OF A COUNTY OR MUNICIPALITY THAT HAS AN ORDINANCE THAT REGULATES PARCELS OF LAND.
- [ ] B. THAT THIS PLAT IS OF A SURVEY THAT IS LOCATED IN SUCH PORTION OF A COUNTY OR MUNICIPALITY THAT IS UNREGULATED AS TO ORDINANCE THAT REGULATES PARCELS OF LAND.
- [ ] C. THAT THIS PLAT IS OF A SURVEY OF AN EXISTING PARCEL OR PARCELS OF LAND.
- [ ] D. THAT THIS PLAT IS OF A SURVEY OF ANOTHER CATEGORY, SUCH AS THE RECOMBINATION OF EXISTING PARCELS, A COURT ORDERED SURVEY, OR OTHER EXCEPTIONS TO THE DEFINITION OF A SUBDIVISION.
- [ ] E. THAT THE INFORMATION AVAILABLE TO THIS SURVEYOR IS SUCH THAT I AM UNABLE TO MAKE A DETERMINATION TO THE BEST OF MY PROFESSIONAL ABILITY AS TO PROVISIONS CONTAINED IN (A) THROUGH (D) ABOVE.

DocuSigned by: Gregory S Flowe
GREGORY S. FLOWE L-3600

SHEET NO. 1 — 1
DATE: July 15, 2025
SCALE: 1"= 100'
DRAWN BY: GSF
FILENAME:
BACK REF. DWG
DRAWING NO. 119-25

Minor Subdivision
for
Jeffery A. Maness Property
3.460 Acres
Mecklenburg County, Mint Hill, N.C.

Tax Parcel: 139-101-07
E.C. = 1' : 10,000' +
Deed Book: 5172 / 270

OWNER: Jeffery A. Maness
10634 Williams Road
Charlotte, N.C. 28227

Map Prepared By:
Flowe and Son Land Surveying:
Land Surveying and Mapping Services
Gregory S. Flowe, P.L.S.
11316 Brief Road
Charlotte, N.C. 28227
Phone:(704)309-6130
Email: gsflowe@gmail.com

Department of Health and Human Services
Environmental Health Section
On-site Water Protection Branch

Property ID: To be cut from 13910107
Lot #:
File #: 6505A
AppID: 15491

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Jeff Maness
Applicant: Richard Whitter
Address: 10634 Williams Rd.
Date Evaluated: 5/23/2025
Proposed Facility: 4 BR SFR
Design Flow (.0400): 480 GPD
Property Size: To be cut from 3.45 ac.
Location of Site: See file
Property Recorded: After Jan. 1, 1983
Water Supply: [ ] Public [X] Single Family Well [ ] Spring [ ] Other:
Evaluation Method [X] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [X] Domestic [ ] Industrial Process [ ] High Strength

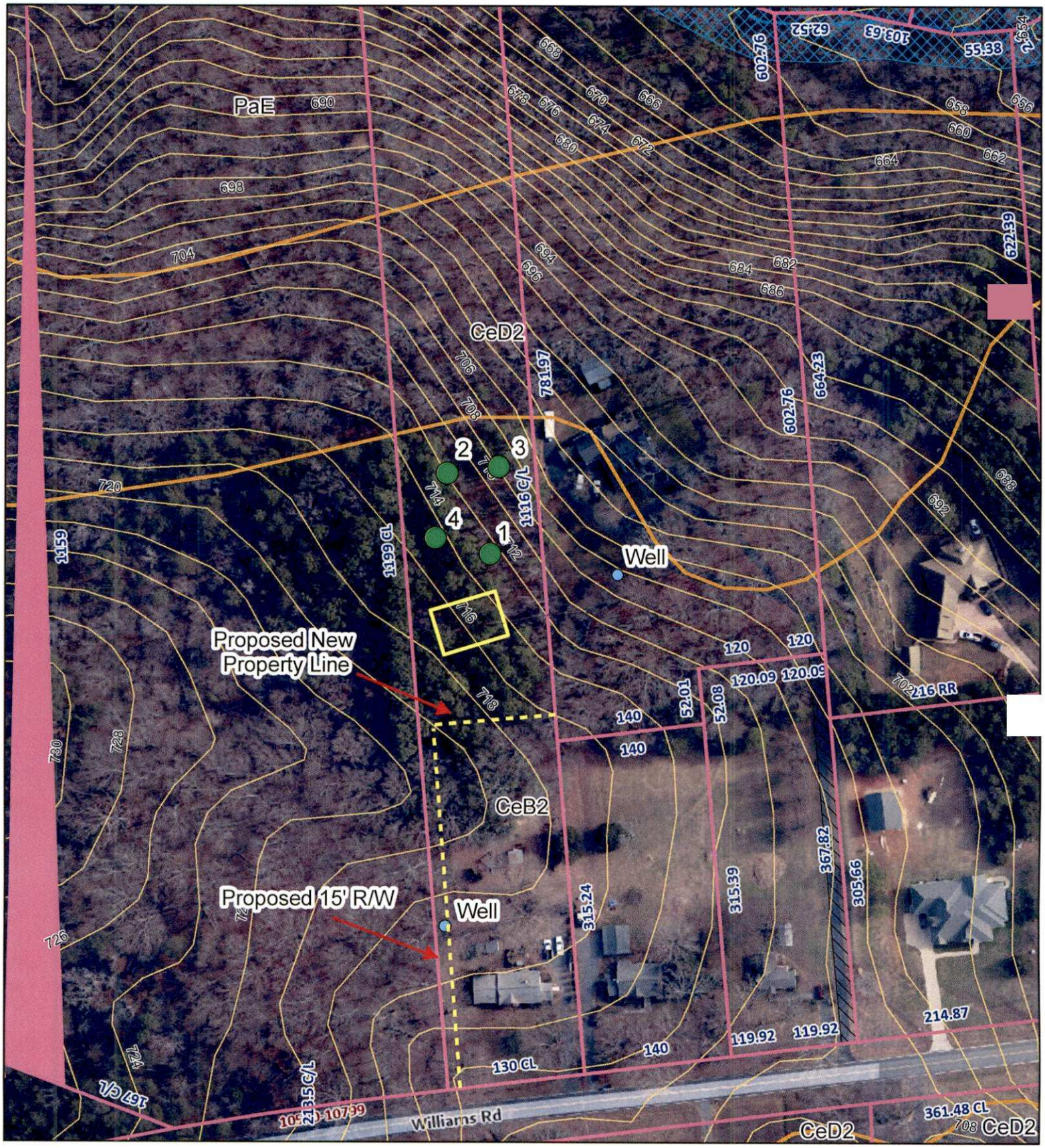
PROFILE #	.0502 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .0503 Structure/ Texture	SOIL MORPHOLOGY .0503 Consistence/ Mineralogy	PROFILE FACTORS Matrix Soil Color	PROFILE FACTORS .0504 Soil Wetness/ Color	PROFILE FACTORS .0505 Soil Depth (IN.)	PROFILE FACTORS .0506 Sapro Class	PROFILE FACTORS .0507 Restr Horiz	General Comments / Other	0.0509 Profile Class & LTAR	0.0502 Slope Correction *(Low Side of trench)*
1	L ~5%	0 - 5	Mo, Sbk, CL	Fr, SS, SP	RB	N/A	>49"	N/A	N/A	F: Sap. inclus. @ 42"+	S 0.30	- 2"
		5 - 42	St, Sbk, C	Fr, SS, SP, SE	R							
		42 - 49	Mo, Sbk, CL	Fr, SS, SP	R							
2	L ~6%	0 - 6	Mo, Sbk, CL	Fr, SS, SP	RB	N/A	>48"	N/A	N/A	F: Sap. inclus. @ 36-44" C-M: Sap. Inclus. @ 44"+	S 0.30	- 2"
		6 - 36	St, Sbk, C	Fr, SS, SP, SE	R							
		36 - 44	Mo, Sbk, CL	Fr, SS, SP	R							
		44 - 48	Wk, Sbk, CL	Fr, SS, SP	R							
3	L ~6%	0 - 5	Mo, Sbk, CL	Fr, SS, SP	RB	N/A	>48"	N/A	N/A	C-M: Sap. Inclus. @ 40"+	S 0.30	- 2"
		5 - 40	St, Sbk, C	Fr, SS, SP, SE	R							
		40 - 48	Mo, Sbk, CL	Fr, SS, SP	R							
4	L ~4%	0 - 7	Mo, Sbk, CL	Fr, SS, SP	RB	N/A	>48"	N/A	N/A	C-M: Sap. Inclus. @ 44"+	S 0.30	- 2"
		7 - 38	St, Sbk, C	Fr, SS, SP, SE	R							
		38 - 48	Mo, Sbk, CL	Fr, SS, SP	R							

Description	Initial System	Repair System
Available Space (.0508)	S	S
System Type(s)	Ttle	Ttle
Site LTAR	0.30	0.30
Maximum Trench Depth (low side of trench)	34"	34"

Soil Evaluation By: P. Mitchell, REHS, LSS
Soil Classification (.0502 - .0507): S
Other(s) Present:
Site Classification (.0509): S

COMMENTS:

Soil & Site Evaluation Map



Map Created by: P. Mitchell
Date: 5/23/2025

PROPERTY INFO
Address: 10634 Williams Rd.
PID No.: To be cut from: 13910107

1 inch = 121 feet

Mecklenburg County
Groundwater & Wastewater Services

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

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

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

Permit #: **30015491** GWS File #: **6505A** Tax Parcel #: **139-101-07**

- This IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be **NO** grading, filling, or disturbance of the soil in the area of the septic tank system or repair area.
- CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a Building Permit. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.
- Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

I. This Improvement Permit Shall: Expire in Five (5) Years **Expiration Date (If Applicable):** 10/7/2030

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

Structure Type: HOUSE Size (ft^2): 2000 # Bedrooms: 4 Max. Occup.: 8

Building Foundation: Crawl Space Water Supply: Private Well

II. Initial System Type: PPBPS-H (gravity) **System Classification:** IIIe

Initial System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	.3	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	N/A
Trench Width (ft):	3	Trench Spacing (ft):	8	Absorption Area (ft^2):	800	Total Trench Length (ft):	267
Maximum Trench Depth (in):	34	Depth of Media (in):	14	Distribution Device:	Distribution Box		

III. Repair System Type: PPBPS-H (gravity) **System Classification:** IIIe

Repair System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	N/A
Trench Width (ft):	3	Trench Spacing (ft):	8	Absorption Area (ft^2):	800	Total Trench Length (ft):	267
Maximum Trench Depth (in):	34	Depth of Media (in):	14	Distribution Device:	Distribution Box		

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: Troy Kling Owner/Legal Agent: _____
Print Name

Signature: _____ Signature: _____

Date Issued: 10/7/2025

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- The invert of the sewer pipe exiting the structrue should be kept as high as possible in order to achieve gravity flow to the drain field. A dosing tank will be required if gravity flow to the drain field can not be achieved.
- 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.
- Finished grade shall provide for positive surface drainage away from all system components – 1/2% grade

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Authorized Agent: Troy Kling

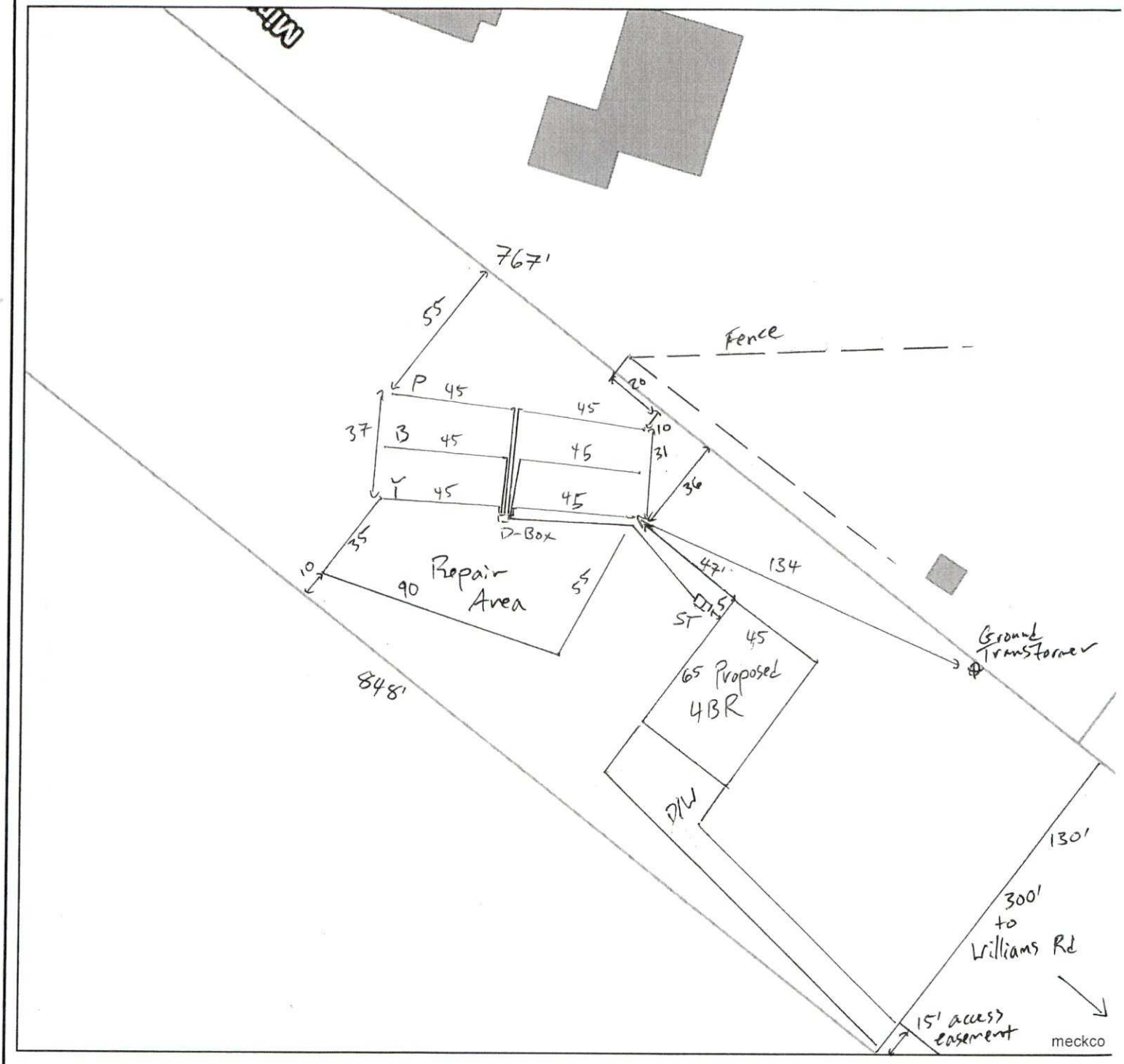
Signature: _____

Date Issued: 10/7/2025

Owner/Legal Agent: _____
Print Name

Signature: _____

On-site Wastewater Improvement Permit Diagram



Mecklenburg County Health Department
Environmental Health - Groundwater and Wastewater Services

Permit #: 15491
PID #: 139-101-07
File #: 6505A

Authorized Agent: Troy Kling Date: 10/7/25

Owner/ Legal Agent: _____ Date: _____

1 inch = 50 fee

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III. Repair System Type: PPBPS-H (gravity) **System Classification:** IIIe

Repair System Specifications:

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- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: Troy Kling Owner/Legal Agent: Richard Whittier

Signature: Troy K Signature: Richard Whittier

Print Name

Date Issued: 10/7/2025

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IMPROVEMENT PERMIT for a RESIDENTIAL
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Permit #: **30015491** GWS File #: **6505A**

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Authorized Agent: Troy Kling

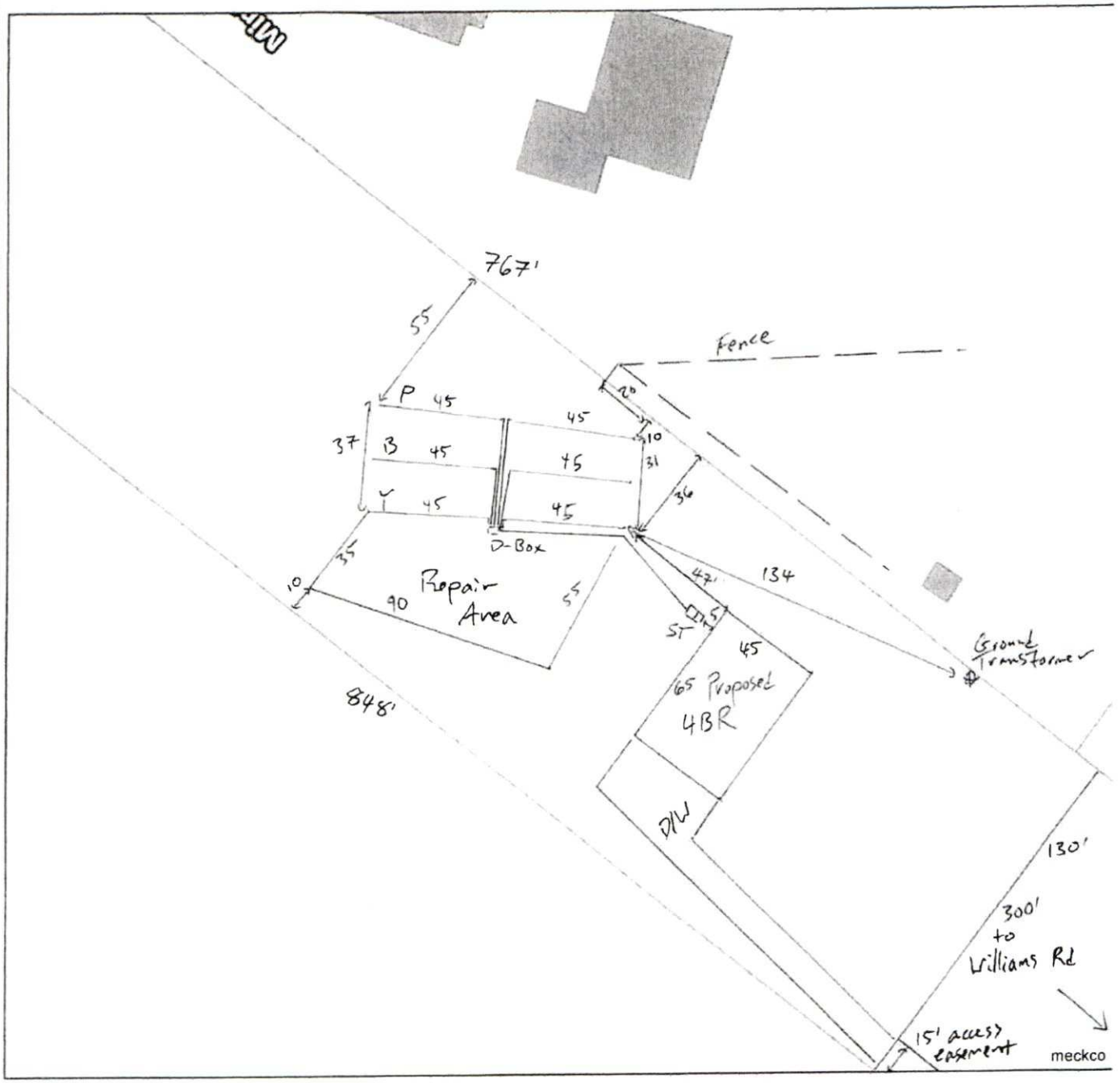
Signature: T K

Date Issued: 10/7/2025

Owner/Legal Agent: Richard Whittier
Print Name

Signature: Richard Whittier

On-site Wastewater Improvement Permit Diagram



Mecklenburg County Health Department
Environmental Health - Groundwater and Wastewater Services

Permit #: 15491
PID #: 139-101-07
File #: 6505A

Authorized Agent: Troy Kling Date: 10/7/25

Owner/ Legal Agent: Richard White Date: 10/15/25

1 inch = 50 fee

FEE: 200.00

DATE: 12/4/2025

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

MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES

FILE NUMBER: 6505A

PERMIT NUMBER: 30015491

PARCEL NUMBER: 13910153

JOB LOCATION INFORMATION

ADDRESS: 10642 WILLIAMS RD

CITY: **STATE: NC** **ZIP:**

ISSUED TO: JEFF MANESS

CONSTRUCTION AUTHORIZATION ISSUANCE DATE: 12/4/2025

CONSTRUCTION AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 30015491, AND THE ATTACHED SITE PLAN WITH SYSTEM DETAILS. CONSTRUCTION AND INSTALLATION MUST ALSO MEET ALL REQUIREMENTS SET FORTH IN THE RULES GOVERNING SANITARY SEWAGE COLLECTION, TREATMENT, AND DISPOSAL AND ANY OTHER APPLICABLE RULES AND LAWS.

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

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

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

Authorized Agent Signature _____

Mecklenburg County Groundwater & Wastewater Services
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Septic System Pre-Construction Meeting Checklist

File # 6505A App# 1549 Tax Parcel# 139-101-53

Property Owner: Rick Whitter

Job Location Address: 10642 Williams Road

City: Mint Hill State: NC Zip Code: 28227

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

   ☑ YES ☐ NO

   Comments: _____

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

   ☑ YES ☐ NO

   Comments: _____

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

   ☑ YES ☐ NO

   Comments: _____

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

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

Troy Kling
Authorized Agent

2/17/26
Date

MCB Plumbing (Mike)
Others Present

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Division of Environmental Health
On-Site Wastewater Section

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

File #: 6505A Permit #: 15491 Tax Parcel #: 139-101-53

Property Owner: Ricke Whittier

Job Location Address: 10642 Williams Road

City: Mint Hill State: NC Zip Code: 28227

Operation Permit Issuance Date: 8/5/26 Contractor Name: Mike McGirt - MCB Plumbing

Permitted Design Flow: 480 GPD Liquid Capacity of Dosing Tank: / gallons

Liquid Capacity of Septic Tank: 1000 gallons Tank Manufacture Norwesco Effluent Pump Model: /

Drainfield Installation ☐ N/A

Trench Depth: 34 inches

Trench Width: 3 feet

Line Spacing: 8 feet (O.C.)

Total line length: 267 feet

# of Lines: 6 @ 45 feet

Depth of Media: 14 inches (Type) PPBPS-H

Depth of Cover: 6+ inches

Distribution Device: D-Box

Bed Installation *(For Repair Installations ONLY.)* ☑ N/A

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Depth of Cover: _____ inches

Distribution Device: _____

Water Supply Source

☐ Municipal ☑ Private Well ☐ Community Well

☐ Other _____

System Installation Setbacks

Distance from Building Foundation: 75 feet

Distance from Property Line: 710 feet

Distance from Water Supply Source: 750 feet

Inspection Dates

Tank(s) Inspected: 7/31/26

Excavation Inspected: 7/31/26

Pump & Controls Inspected: ~~7/31/26~~

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)

Installed as Designed

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

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

Comments: System Classification & Type: III e - PPBPS-H

DENR Authorized Agent: Troy Kling Signature: T. Kling

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

File #: 6505A Permit #: 15491 Tax Parcel #: 139-10-53

Property Owner: Rodc Whittier

Job Location Address: 10642 Williams Road

City: Mint Hill State: NC Zip Code: 28227

OPERATION PERMIT CONDITIONS:

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

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

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

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

System Classification: IIIe

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

Subsurface system operator required: Yes ☐ No ☑

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

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

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

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

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

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

V. Other:

DENR Authorized Agent: Troy Kling Date: 8/5/26

Signature: