6629B

MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES

4803

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: 217-311-01
STREET ADDRESS: 18311 Rosapenny Rd.
CITY: Charlotte
STATE: NC ZIP: 28278
SUBDIVISION NAME: Rosapenny Peninsula
LOT #: 6 LOT SIZE (acres): 1.97ac.
TOWNSHIP:
☑ 0-MECKLENBURG ☐ 3-CORNELIUS ☐ 6-HUNTERSVILLE
☐ 1-CHARLOTTE ☐ 4-PINEVILLE ☐ 7-MINT HILL
☐ 2-DAVIDSON ☐ 5-MATTHEWS

4. **BUILDING INFORMATION:**

BUILDING TYPE:
☐ SINGLE MOBILE HOME ☐ MODULAR HOME
☐ DOUBLE WIDE ☐ MULTIPLE FAMILY
☑ HOUSE ☐ OTHER _____
HEATED SQUARE FOOTAGE: 4107
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 8
FOUNDATION TYPE:
☐ CONCRETE SLAB ☑ BASEMENT WITH PLUMBING
☐ CRAWL SPACE ☐ BASMENT 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?** 2008 ☐ UNKNOWN

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

12. **PROPERTY OWNER:**

NAME: LKW Properties LLC
ADDRESS: 17224 Due West Dr.
CITY: Charlotte
STATE: NC ZIP: 28278
HOME PHONE: 704-583-0668
WORK PHONE: 704-504-9353
MOBILE PHONE: 704-562-1279
FAX: 704-583-8337

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

NAME:
ADDRESS:
CITY:
STATE: ZIP:
HOME PHONE:
WORK PHONE:
MOBILE PHONE:
FAX:

SAME

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

Revised on: 7/1/08

P314435 Susie Preidt 825-0533

8704

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.

WWH (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.

William C. Hodges — Property Owner's or Owner's Legal Representative Signature

10-15-10 — Date

OFFICE USE ONLY

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

SEPTIC APPLICATION FEES RECEIVED: $ 1000.00 CHK 1071 DATE FEE RECEIVED: 10/5/10

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

APPLICATION PROCESSED BY: JC

GWS FILE NUMBER ASSIGNED: 6629B

APPLICATION ID NUMBER ASSIGNED: 4803

COMMENTS:

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

File # 6629B

REQUESTED BY: JEFF CORNATZER PH. NO.: 704.361.6821 DATE: 9/30/2010
APPROVED BY: _____ DATE: _____
THE APPROVING AGENT HAS VERIFIED THAT DIMENSION ARE CORRECT PER THE FOUNDATION PLAN AND ANY ADDED OPTIONS.

SITE DEVELOPMENT PLAN

CITY OF CHARLOTTE ETJ JURISDICTION – ZONING: R-5
MIN LOT AREA: 6,000 SF
MIN. LOT WIDTH: 50'
MIN. SETBACK : 20'
MIN. REAR YARD: 35
MIN. SIDE YARD : 10'

IMPERVIOUS SHOWN THIS SITE PLAN:
278 sq. ft. lake room pad
1,716 sq. ft. drive
3,216 sq. ft. house
392 sq. ft. porch / patio
5,602 sq. ft. total

HARRIS ENGINEERING
Engineering
Planning • Surveying
1325 Harding Place
Charlotte, NC 28204
704.334.1325
704.334.1350 Fax

LAKE WYLIE

N/F
CAROLINA CENTERS, LLC
DB 7606 PG 475

LOT 6
85,986 SF
1.97 AC
#18311

4BR House w/ full basement

FPE = 572.0

1500 gal. Pump Tank
1500 gal. Septic Tank

LOT 5
ROSAPENNY ROAD
MAP 1
MB 50 PG 432

LOT 7
ROSAPENNY ROAD
MAP 1
MB 50 PG 432

Proposed House

Driveway

2" Sch. 40 PVC Septic discharge Line Type 27.8' IVa Repair Area

2" Sch. 40 PVC Septic discharge Line

pressure manifold

2570 Reduction System

SEPTIC FIELD EASEMENT TO SERVE LOT 1

20' SETBACK
20' SEPTIC EASEMENT TO SERVE LOTS 4 & 5

50' LOWER LAKE WYLIE UNDISTURBED WATERSHED BUFFER

TREE SAVE AREA

FEMA LOCATED
FEMA FLOOD FRINGE LINE

PROPERTY FOLLOWS DUKE ENERGY CORP PROJECT BNDY

N 03°24'32" W 140.00'

ROSAPENNY ROAD
60' PUBLIC R/W

GRAPHIC SCALE
1 inch = 60 ft.
60 0 30 60

COMMENTS
Scale 1" = 60'
Keep the septic system 750' from any wells or well supply lines.
See plan for septic system specifications
House site modified as per plan

NOT FOR RECORDATION, CONVEYANCES, OR SALES

SUBDIVISION: ROSAPENNY ROAD, MAP 1 LOT: 6 MAP BOOK: 50 PG: 432
ADDRESS: 18311 ROSAPENNY ROAD COUNTY: MECKLENBURG OWNER: LKW PROPERTIES
PLAN: CUSTOM DESIGN ELEVATION: LEFT: X RIGHT:
GARAGE NO.: 2 CAR SIDELOAD BRICK SIDE(S): FULL BASEMENT: X CRAWL:
DECK: AS SHOWN PATIO: AS SHOWN OTHER OPTIONS:

DRAWN BY: EAB	REV:
CHECKED BY: EAB	

S:\PPLAN-PH\Rosapenny Road\Lot6\site plan – Rosapenny6.dwg

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 #: **30004803** GWS File #: **6629B** Tax Parcel #: **217-311-30**

- 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):** 10/19/2015

Type of Installation: Residential - Modified Plot Plan Lot Number: 6

Structure Type: HOUSE Size (ft^2): 4107 # Bedrooms: 4 # Occupants: 8

Building Foundation: Basement With Plumbing Water Supply: Private Well

II. Initial System Type: Pump to Approved **System Classification:** IIIb

Initial System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1200	Total Trench Length (ft):	400
Maximum Trench Depth (in):	30	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

III. Repair System Type: PPBPS (pressurized) **System Classification:** IVa

Repair System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	800	Total Trench Length (ft):	267
Maximum Trench Depth (in):	36	Depth of Media (in):	N/A	Distribution Device:	Manifold (LPP Distri		

IV. Permit Conditions/Comments:

(Please See the Following Page for Permit Conditions.)

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, 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 an INSTALLATION APPROVAL is granted by the Department.
- The septic system installer shall be a registered septic contractor with Mecklenburg County Health Department.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

DENR Authorized Agent: Philo Walker Owner/Legal Agent: _____
Print Name

Signature: Philo Walker RS Signature: _____

Date Issued: 10/19/2010

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 #: **30004803** GWS File #: **6629B**

IV. Permit Conditions/Comments:

- This type of septic system requires an inspection once every 5 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.
- All drainage improvements (swales, interceptor drains, etc.) noted on the plot plan must be inspected and approved prior to issuance of an Operation Permit.
- This type of repair system requires the property owner to obtain a contract with a Certified Operator to perform routine inspections and maintenance on the system.
- This type of repair system requires periodic inspections by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- 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.
- The supply pipe shall be installed with a minimum of 30" of compacted cover over the pipe or properly sleeved under areas that are subject to vehicular traffic.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.
- Foundation drains shall be constructed not to discharge water onto or across any part of the septic system.
- The septic system shall be located at least 25 feet from any foundation drain.

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DENR Authorized Agent: Philo Walker

Signature: Philo Walker RS

Date Issued: 10/19/2010

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

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- This IMPROVEMENT PERMIT is transferable.

DENR Authorized Agent: Philo Walker Owner/Legal Agent: Suzie Preidt
Print Name

Signature: Philo Walker RS Signature: Suzie Preidt

Date Issued: 10/19/2010

OCT-21-2010(THU) 10:26 PERMITS UNLIMITED (FAX)7043982523 P.001/002

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 #: 30004803 GWS File #: 6629B

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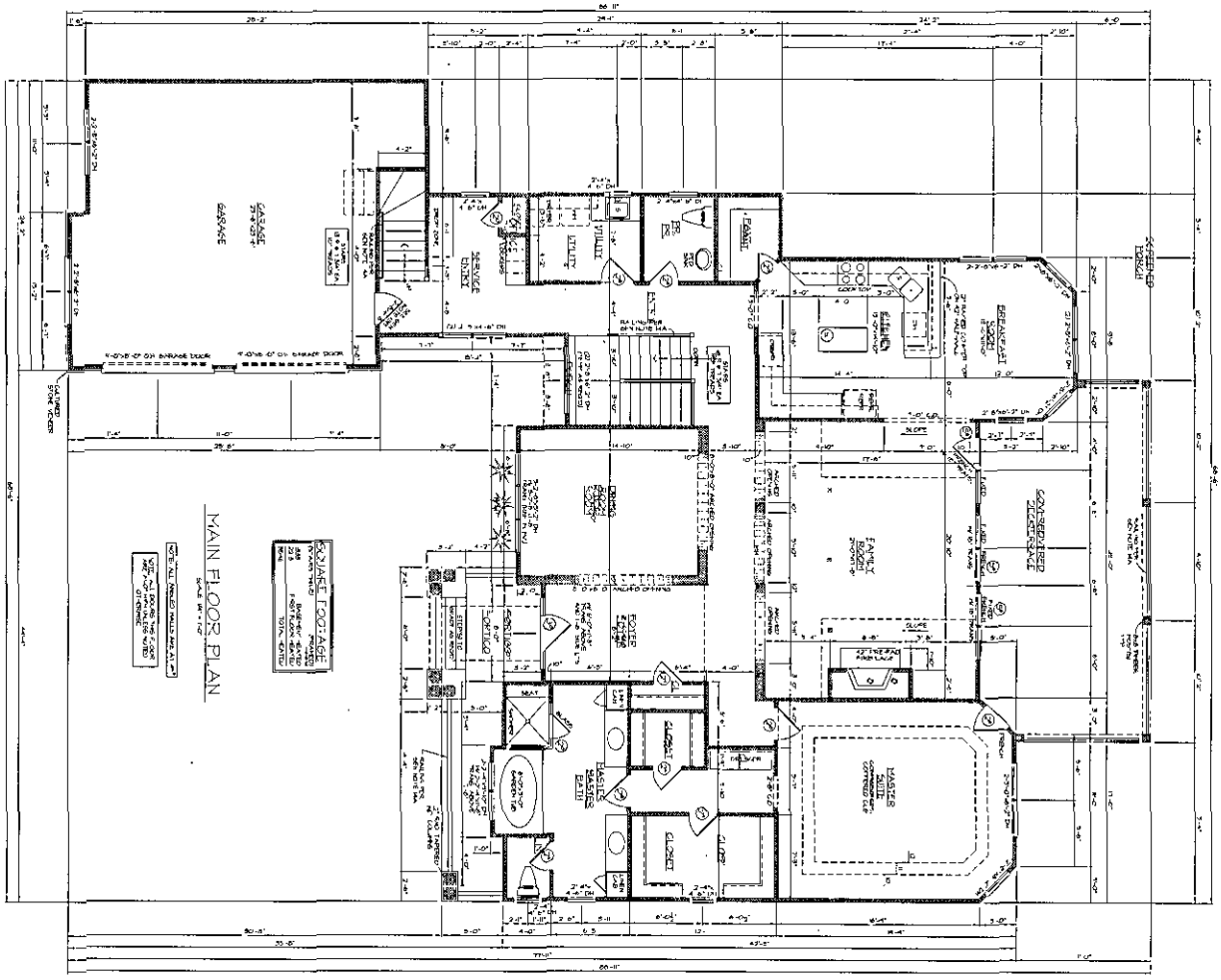
The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment and Disposal Systems* and is subject to the following provisions:

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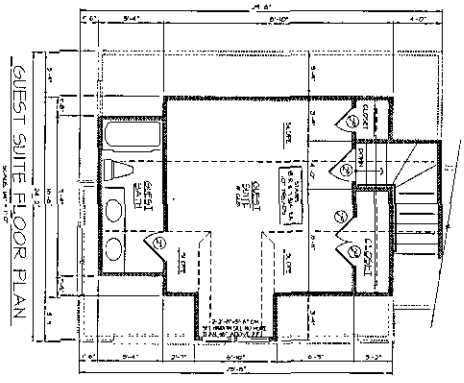
DENR Authorized Agent: Philo Walker
Signature: Philo Walker RS
Date Issued: 10/19/2010

Owner/Legal Agent: Suzie Preidt
Print Name
Signature: Suzie Preidt

OCT-21-2010(THU) 10:26 PERMITS UNLIMITED (FAX)7043982523 P.002/002



FOR PERMITTING PROPOSES ONLY



SQUARE FOOTAGE:

LOWER LEVEL	278 SQ FT
MAIN LEVEL	2,495 SQ FT
TOTAL HEATED	2,773 SQ FT
GARAGE (1ST FLOOR)	484 SQ FT
FUTURE EXERCISE	120 SQ FT
MECHANICAL/STORAGE	120 SQ FT
COVERED LOWER TIER	48 SQ FT
PORTICO	63 SQ FT
COVERED REAR PORCH	252 SQ FT
COVER PORCH/PORTE	240 SQ FT
TOTAL UNDER ROOF	4,096 SQ FT
STAINED CONCRETE	1,750 SQ FT

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SHEET NO. 4 OF 4

DRAWN BY: SMH
CHECKED BY:

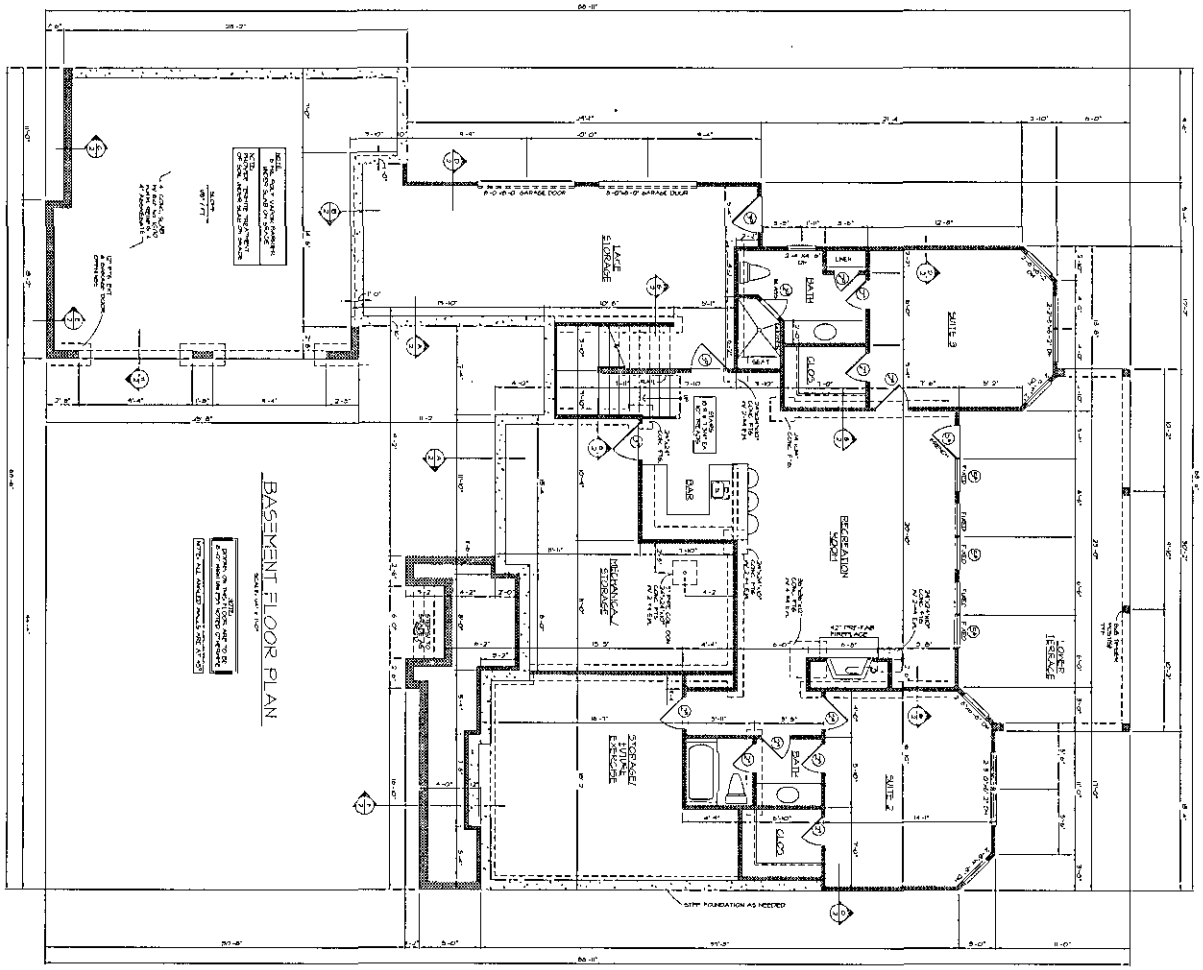
LKW PROPERTIES
LAKE WYLIE, NORTH CAROLINA
LOT 6 ROSAPENNY PENINSULA

BUILDINGRAPHICS
ARCHITECTURE
7400 CARMEL EXECUTIVE PARK SUITE 150 CHARLOTTE, NC 28226
704 / 543-1498 (FAX) 704 / 543-1499

GENERAL NOTES

RESIDENTIAL FOUNDATIONS

FOR PERMITTING PROPOSES ONLY



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DATE: ORIGINAL

SHEET NO. 6

DRAWN BY: SAH

CHECKED BY:

LKW PROPERTIES
LAKE WYLIE, NORTH CAROLINA
LOT 6 ROSAPENNY PENINSULA

BUILDINGRAPHICS
ARCHITECTURE
7400 CARMEL EXECUTIVE PARK SUITE 150 CHARLOTTE, NC 28226
704 / 542-1488 (FAX) 704 / 543-1499

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

INSTALLATION APPROVAL for an
ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 6629B Permit #: 4803 Tax Parcel #: 217 311 30

Property Owner: LKW Development, LLC

Job Location Address: 18311 Rosa penny Rd

City: Charlotte State: NC Zip Code: 28278

Installation Approval Issuance Date: 12/16/10

Permission is hereby given to ☑ install ☐ alter ☐ repair an on-site wastewater treatment & and disposal system, with subsurface soil absorption and effluent discharge, as specified herein at the described location. This approval is granted based upon the application information submitted to our office. All work shall be completed on or before 1/16/11, after which date this approval shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A. 1900 which are in effect on the date of granting this approval. An **Operation Permit** must be obtained from the Mecklenburg County Health Department before any system can be covered up or placed into service. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed will operate properly, or relieve any person now of hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

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

Permitted Design Flow: 480 GPD

Site LTAR: .3 GPD/ft² (For new installations only.)

Liquid Capacity of Septic Tank: 1500 gallons

Liquid Capacity of Dosing Tank: 1500 gallons

Drainfield Design ☐ N/A

Trench Depth: 36 inches

Trench Width: 3 feet

Line Spacing: 4 feet (O.C.)

Total line length: 400 feet

# of Lines: 3 @ 133 feet

Depth of Media: 12 inches (Type) 25% Reduction

Distribution Device: Pressure Manifold

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

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Distribution Device: _____

Water Supply Source

☐ Municipal ☑ Private Well ☐ Community Well

☐ Other _____

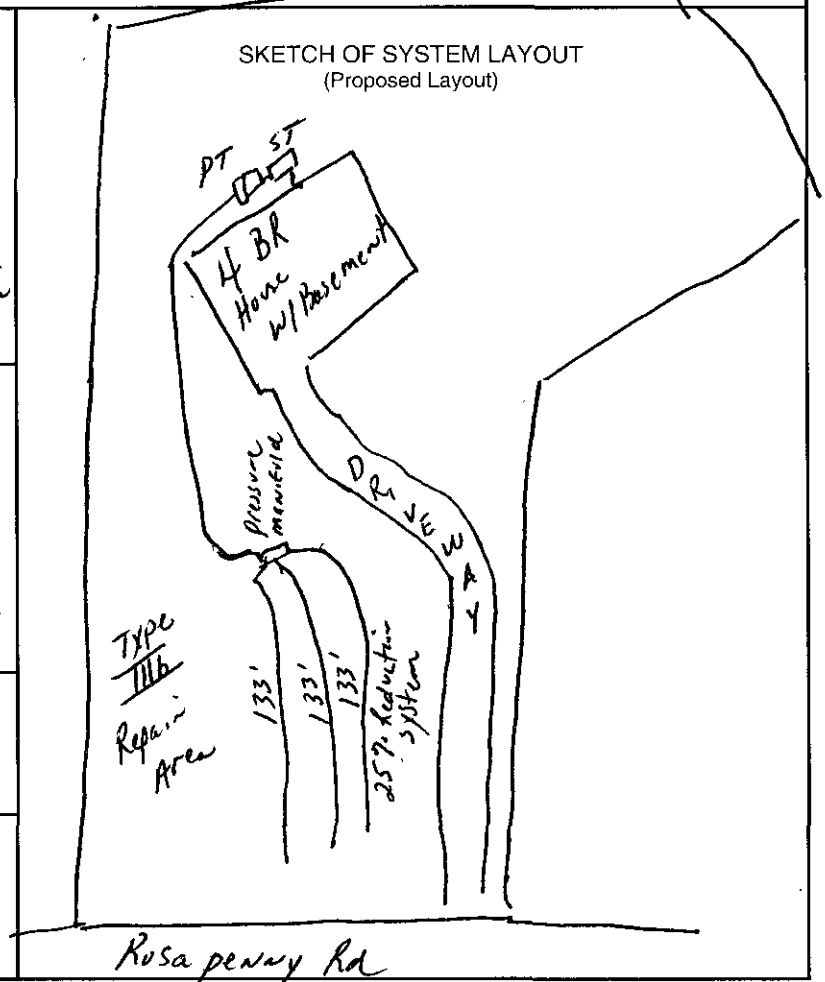
Minimum System Setbacks

Distance from Building Foundation: 5 feet

Distance from Property Line: 10 feet, 50' min

Distance from Water Supply Source: 100' feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)



Comments: System Classification & Type: Type IIIb, Pump to 25% Reduction System
1500 ST, 1500 PT, Pressure Manifold, 3 lines @ 133' long @ 3' wd

DENR Authorized Agent: Philo Walker Signature: Philo Walker PA

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St., Suite 211 Charlotte, NC 28202
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NC DENR
Division of Environmental Health
On-Site Wastewater Section

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

File #: 6629B Permit #: 4803 Tax Parcel #: 217 311 30

Property Owner: LKW Development, LLC

Job Location Address: 18311 Rosa Penny Rd

City: Charlotte State: NC Zip Code: 28278

Operation Permit Issuance Date: 1-4-11 Contractor Name: Steve Autry

Permitted Design Flow: 480 GPD

Liquid Capacity of Septic Tank: 1500 gallons

Liquid Capacity of Dosing Tank: 1500 gallons

Effluent Pump Model: Meyers ME 50

Drainfield Installation ☐ N/A

Trench Depth: 36 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 400 feet

# of Lines: 3 @ 133 feet

Depth of Media: 12 inches (Type) EZ Flow

Depth of Cover: 24 inches

Distribution Device: pressure manifold

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: 25 feet

Distance from Property Line: 10 feet

Distance from Water Supply Source: 100' (50' min) feet

Inspection Dates

Tank(s) Inspected: 12/22/10

Excavation Inspected: 1/4/11

Pump & Controls Inspected: 1/4/11

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)

See installation approval

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 b Pump to EZ Flow | EZ1003T, P, NA, NA

DENR Authorized Agent: Philo Walker RS Signature: Philo Walker RS

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

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

File #: 6629B Permit #: 4803 Tax Parcel #: 217 311 30

Property Owner: LKW Development, LLC

Job Location Address: 18311 Rosa Penny Rd

City: Charlotte State: NC Zip Code: 28278

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: Type IIIb

*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: Pump to EZ Flow

DENR Authorized Agent: Philo Walker Date: 1/4/11

Signature: Philo Walker RS

PD
$400
10/6/06
CLIC
1078

PD full 300.00 CLIC 9745

#1088

GWS – RES. APP 07/05

SEPTIC FEE: 300
DATE: 7/3/06
CRT [ ]

PERMIT APPLICATION FOR A RESIDENTIAL SITE IMPROVEMENT PERMIT / CONSTRUCTION AUTHORIZATION FOR ON-SITE WASTEWATER SYSTEM NEW WELL INSTALLATION OR REPAIR OF EXISTING WELL MECKLENBURG COUNTY GROUNDWATER & WASTEWATER SERVICES

WELL FEE: _____
DATE: _____
CRT [ ]

FILE # 16629B

SEPTIC / TYPE APPLICATION: ☐ NONE ☑ NEW SYSTEM ☐ ALTERATION ☐ REPAIR ☐ MODIFY PLOT PLAN

WELL / TYPE APPLICATION: ☐ NONE ☐ NEW WELL ☐ MAJOR REPAIR ☐ ABANDONMENT

JOB LOCATION INFORMATION:

TAX/PARCEL #: 217 311 01 PP
STREET ADDRESS: Rosapenny Rd
CITY: Charlotte
STATE: NC ZIP:
SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #: 36
TOWNSHIP:

☑ 0-MECKLENBURG ☐ 4-PINEVILLE
☐ 1-CHARLOTTE ☐ 5-MATTHEWS
☐ 2-DAVIDSON ☐ 6-HUNTERSVILLE
☐ 3-CORNELIUS ☐ 7-MINT HILL

BUILDING INFORMATION:

TYPE OF BUILDING:

☐ SINGLE MOBILE HOME (S) ☐ MODULAR HOME (M)
☐ DOUBLE WIDE (D) ☐ MULTIPLE FAMILY (U)
☑ HOUSE (H) ☐ OTHER

HEATED SQUARE FOOTAGE: 10000
NUMBER OF BEDROOMS: 4 5
NUMBER OF OCCUPANTS: 8

FOUNDATION FOR RESIDENCE:

☐ CONCRETE SLAB ☑ BASEMENT WITH PLUMBING
☐ CRAWLSPACE ☐ BASEMENT WITH NO PLUMBING

IF PLANNING TO EXPAND/ALTER THE EXISTING SYSTEM INDICATE THE FOLLOWING CHANGES:

NUMBER OF BEDROOMS TO BE ADDED: NA
NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE:
WILL THERE BE A HOME BUSINESS IN THE RESIDENCE? ☐ YES ☑ NO TYPE:

WATER SUPPLY:

☐ MUNICIPAL (M) ☐ PUBLIC (C) ☑ PRIVATE WELL (P) ☐ SHARED WELL (S) ☐ OTHER 'SPRINGS' (O)

PROPOSED USE OF WELL: ☐ N/A ☐ IRRIGATION ☐ POTABLE ☐ GEOTHERMAL ☐ OTHER

ARE ANY OF THE FOLLOWING LOCATED ON THE PROPERTY? IF SO, PLEASE SHOW LOCATION ON SITE PLAN/PLAT.

BURIED CABLES, LANDFILLS, STUMPHOLES	☐ YES	☑ NO	WELLS, SPRINGS, OR WATER LINES	☐ YES	☑ NO
EXISTING WASTEWATER SYSTEMS	☐ YES	☑ NO	DESIGNATED WETLANDS	☐ YES	☑ NO
EASEMENTS OR RIGHT-OF-WAYS	☐ YES	☑ NO	GRADING/SOIL REMOVAL PERFORMED	☐ YES	☑ NO

PROPERTY OWNER:

NAME: LKW Development LLC
ADDRESS: 17224 Dve West Dr
CITY: Charlotte
STATE: NC ZIP: 28278
HOME PHONE: WORK PHONE: 704 504 9353
MOBILE PHONE: 562-1279 FAX: 583-6337

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: Tonny Jacobs, LSS
ADDRESS: 365 Timber Rd Suite 104
CITY: Mooresville
STATE: NC ZIP: 28115
HOME PHONE: — WORK PHONE: 662-8625
MOBILE PHONE: 582-9219 FAX: 704 662 9735

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 2006

WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?

*An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. 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 the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

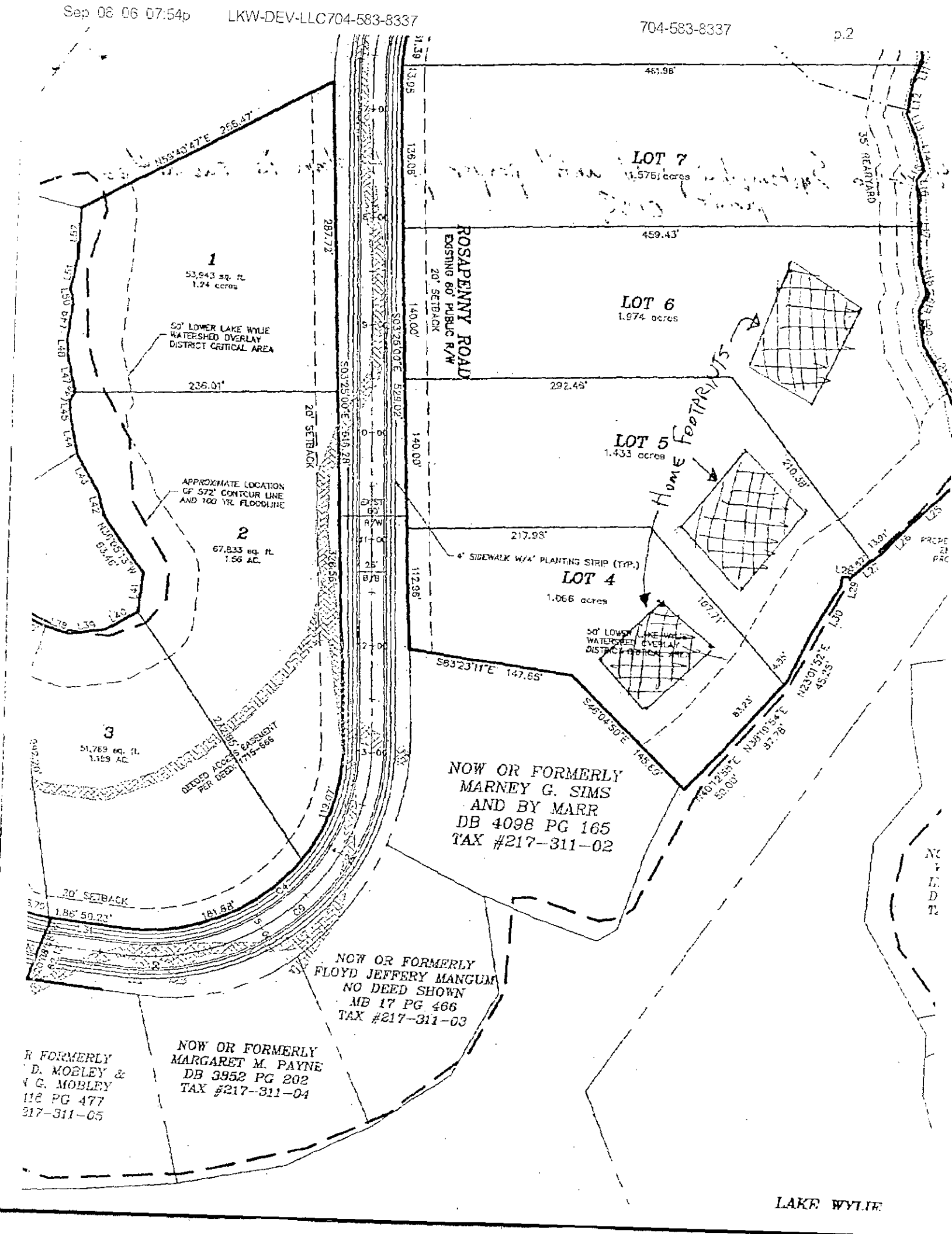
Tonny C Jacobs LSS 6/28/06
Owner's/Agent's Signature Date

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

*A Well Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. 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 the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Owner's/Agent's Signature Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST., SUITE 211
CHARLOTTE, NC 28202 704-336-5103 / FAX: 704-336-6894


LOT 7
1.576 acres
LOT 6
1.974 acres
LOT 5
1.433 acres
LOT 4
1.066 acres
1
53,943 sq. ft.
1.24 acres
2
67,833 sq. ft.
1.56 AC.
3
51,769 sq. ft.
1.189 AC.
ROSAPENNY ROAD
EXISTING 60' PUBLIC R/W
50' LOWER LAKE WYLIE WATERSHED OVERLAY DISTRICT CRITICAL AREA
APPROXIMATE LOCATION OF 572' CONTOUR LINE AND 100 YR. FLOODLINE
4' SIDEWALK W/4' PLANTING STRIP (TYP.)
HOME FOOTPRINTS
DEEDED ACCESS EASEMENT PER DEED 1776-566
NOW OR FORMERLY MARNEY G. SIMS AND BY MARR DB 4098 PG 165 TAX #217-311-02
NOW OR FORMERLY FLOYD JEFFERY MANGUM NO DEED SHOWN MB 17 PG 466 TAX #217-311-03
NOW OR FORMERLY MARGARET M. PAYNE DB 3952 PG 202 TAX #217-311-04
R FORMERLY D. MOBLEY & G. MOBLEY 116 PG 477 217-311-05
20' SETBACK
35' REARYARD
461.98'
459.43'
292.46'
217.98'
236.01'
287.72'
140.00'
136.06'
112.96'
210.38'
107.71'
113.07'
181.84'
147.65'
145.63'
S83°23'11"E
S49°04'50"E
N55°40'47"E 255.47'
S01°25'00"E 529.02'
S01°25'00"E 516.28'
N23°01'52"E 45.25'
N39°19'54"E 97.78'
N40°12'55"E 53.03'
LAKE WYLIE

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

Sheet: 1 of 2
Property ID: PO 217-311-01
Lot #: 6
File #: 6629B
Code: 1

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: LKW Development, LLC
Applicant: Toney Jacobs
Address: 17224 Due West Drive, Charlotte, NC 28278
Date Evaluated: 8/24/2006
Proposed Facility: Residence
Design Flow (.1949): ~~480~~ 600 gpd
Property Size: 1.974a
Location of Site: Rosapenny Road
Property Recorded:
Water Supply: [ ] Public [x] Individual [x] Well [ ] Spring [ ] Other
Evaluation Method: [ ] Auger Boring [x] Pit [ ] Cut
Type of Wastewater: [x] 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 (IN:)	1956 Sapro Class	1944 Restr Horiz	
1P	LS,8	0-4	GR/SL	FR/SS/SP/SEXP	>48" TO SOIL WETNESS	48	NA	NA	PS,IV
		4-48	SBK/C	FI/S/P/SEXP					.3 GPD/FT^2
2P	"	0-16	GR/SL	FR/SS/SP/SEXP	"	32	US	"	US,IV
		16-32	SBK/C	FI/S/P/SEXP					.3 GPD/FT2
		32-48	M/SAP	CL					
3P	"	0-14	GR/SL	FR/SS/SP/SEXP	"	36	US	"	PS,IV
		14-30	SBK/SC	FI/S/P/SEXP					.3 GPD/FT2
		30-36	SBK/SCL	FR/S/P/SEXP					
		36-48	M/SAP	CL					
4P	"	0-8	GR/SL	FR/SS/SP/SEXP	"	48	NA	"	"
		8-48	SBK/C	FI/S/P/SEXP					
5P	"	0-6	GR/SL	FR/SS/SP/SEXP	"	"	"	"	"
		6-48	SBK/C	FI/S/P/SEXP					
6P	"	0-15	GR/SL	FR/SS/SP/SEXP	"	"	"	"	"
		15-48	SBK/SC	FI/S/P/SEXP					

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

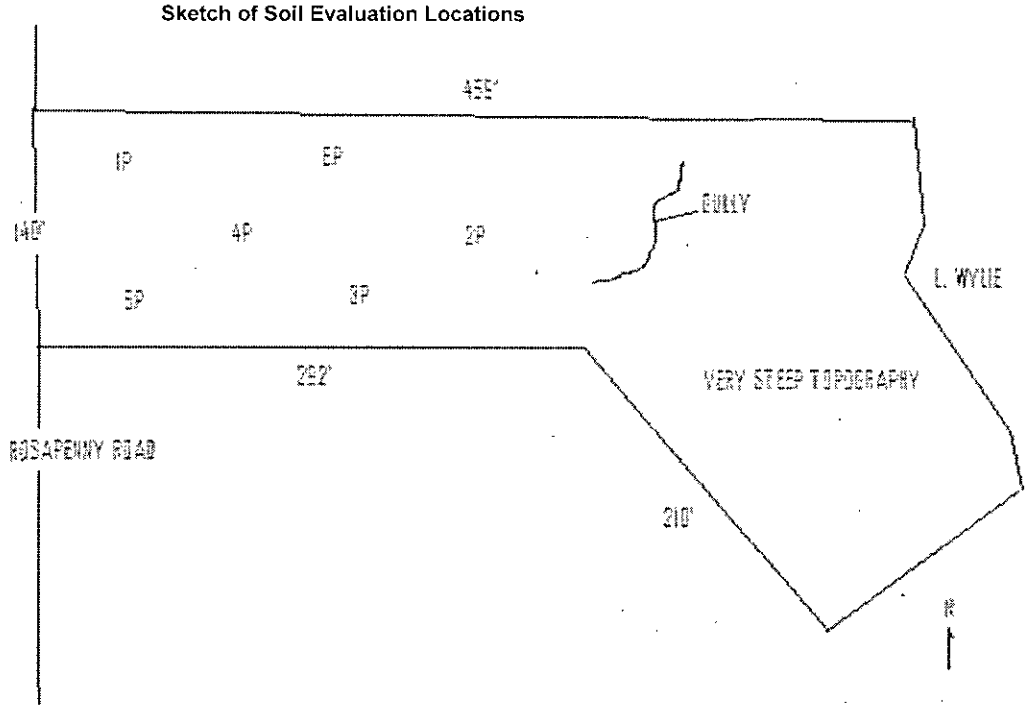
Other Factors (.1946):
Site Classification (.1948): Provisionally Suitable
Evaluated By: Chris Sherrill, RS, LSS 8/29/06
Others Present: Bill Hodges

COMMENTS: 100% Repair Area

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		M-Massive
LS-Linear Slope				CR-Crumb
FS-Food 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
CV-Convex Slope		SICL-Silty Clay Loam		PR-Prismatic
T-Terrace		CL-Clay Loam		
FP-Flood Plain		SCL-Sandy Clay Loam		
	IV	SC-Sandy Clay	0.4 - 0.1	
		SIC-Silty Clay		
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	NS-Non-Sticky	SEXP-Slightly Expansive
FR-Friable	SS-Slightly Sticky	EXP-Expansive
FI-Firm	S-Sticky	
VFI-Very Firm	VS-Very Sticky	
EFI-Extremely Firm	NP-Non-Plastic	
	SP-Slightly Plastic	
	P-Plastic	
	VP-Very Plastic	

Sketch of Soil Evaluation Locations



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

Sheet: 1 of 2
Property ID: PO 217-311-01
Lot #: 6
File #: 6629B
Code: 1

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

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		32-48	M/SAP	CL					
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		14-30	SBK/SC	FI/S/P/SEXP					.3 GPD/FT2
		30-36	SBK/SCL	FR/S/P/SEXP					
		36-48	M/SAP	CL					
4P	"	0-8	GR/SL	FR/SS/SP/SEXP	"	48	NA	"	"
		8-48	SBK/C	FI/S/P/SEXP					
5P	"	0-6	GR/SL	FR/SS/SP/SEXP	"	"	"	"	"
		6-48	SBK/C	FI/S/P/SEXP					
6P	"	0-15	GR/SL	FR/SS/SP/SEXP	"	"	"	"	"
		15-48	SBK/SC	FI/S/P/SEXP					

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	III 6	IV a
Site LTAR	.3 GPD/FT^2	.3 GPD/FT^2

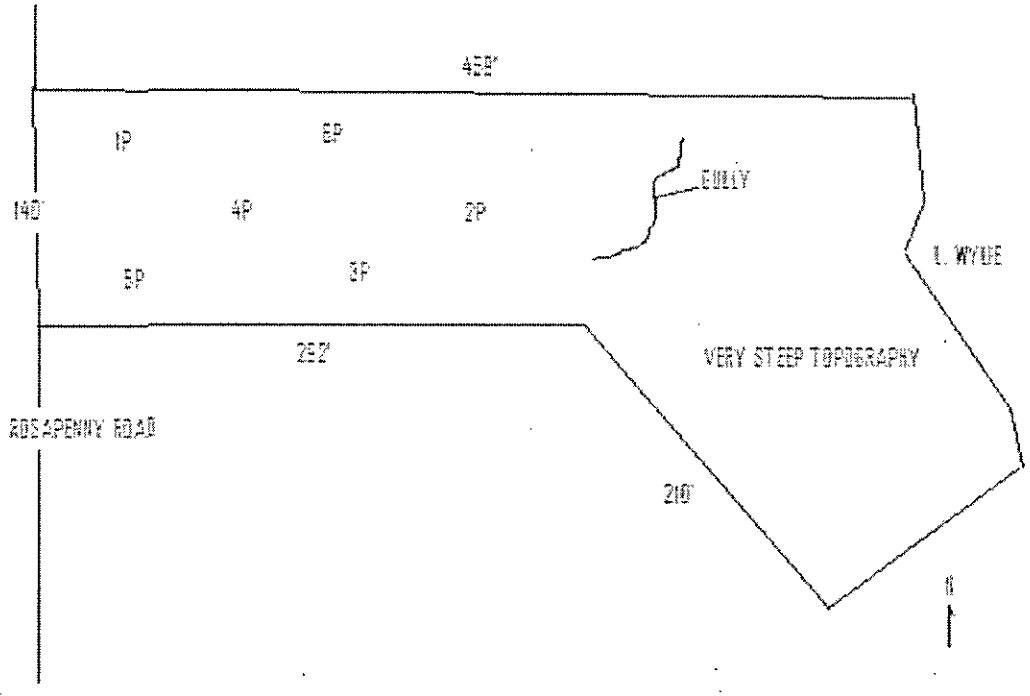
Other Factors (.1946):
Site Classification (.1948): Provisionally Suitable
Evaluated By: Chris Sherrill, RS, LSS 8/29/06
Others Present: Bill Hodges

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CV-Convex Slope		SICL-Silty Clay Loam		PR-Prismatic
T-Terrace		CL-Clay Loam		
FP-Flood Plain		SCL-Sandy Clay Loam		
	IV	SC-Sandy Clay	0.4 - 0.1	
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FR-Friable	SS-Slightly Sticky	EXP-Expansive
FI-Firm	S-Sticky	
VFI-Very Firm	VS-Very Sticky	
EFI-Extremely Firm	NP-Non-Plastic	
	SP-Slightly Plastic	
	P-Plastic	
	VP-Very Plastic	

Sketch of Soil Evaluation Locations



S&ME

Date: May 20, 2007

To: Mr. Chris Sherrill, R. S.
Mecklenburg County Health Dept.

From: Toney Jacobs, LSS

Ref: Request for an Improvement Permit for Lot 6 at Rosapenny Road
MCHD File #6629B

LKW Development is requesting an Improvement Permit for the above referenced lot. MCHD has evaluated the soils (see attached MCHD soil sheets) and S&ME, Inc. has flagged the system and repair on the lot. The septic lines have been located and are shown on the attached maps. The attached sketch and specifications are not an Improvement Permit and are intended only to assist the MCHD in permitting the referenced lot.

We understand that a building permit cannot be issued until your office issues an Authorization to Construct (ATC). The builder will apply for the ATC. If the house pad does not fit in the "building envelope" shown on the Improvement Permit, we understand that the proposed system may have to be modified prior to your office issuing the ATC. **No grading shall take place on the lot prior to obtaining the ATC from the MCHD.**

Please review the attached system sketch and design specifications for the Improvement Permit. Any additions or revisions you feel are necessary can be made on the Improvement Permit. Please call if you have questions or comments.

S&ME, Inc.
385 Timber Road, Suite 104
Mooresville, North Carolina 28115-7899

(704) 662-8625
(704) 662-8735 fax
www.smeinc.com

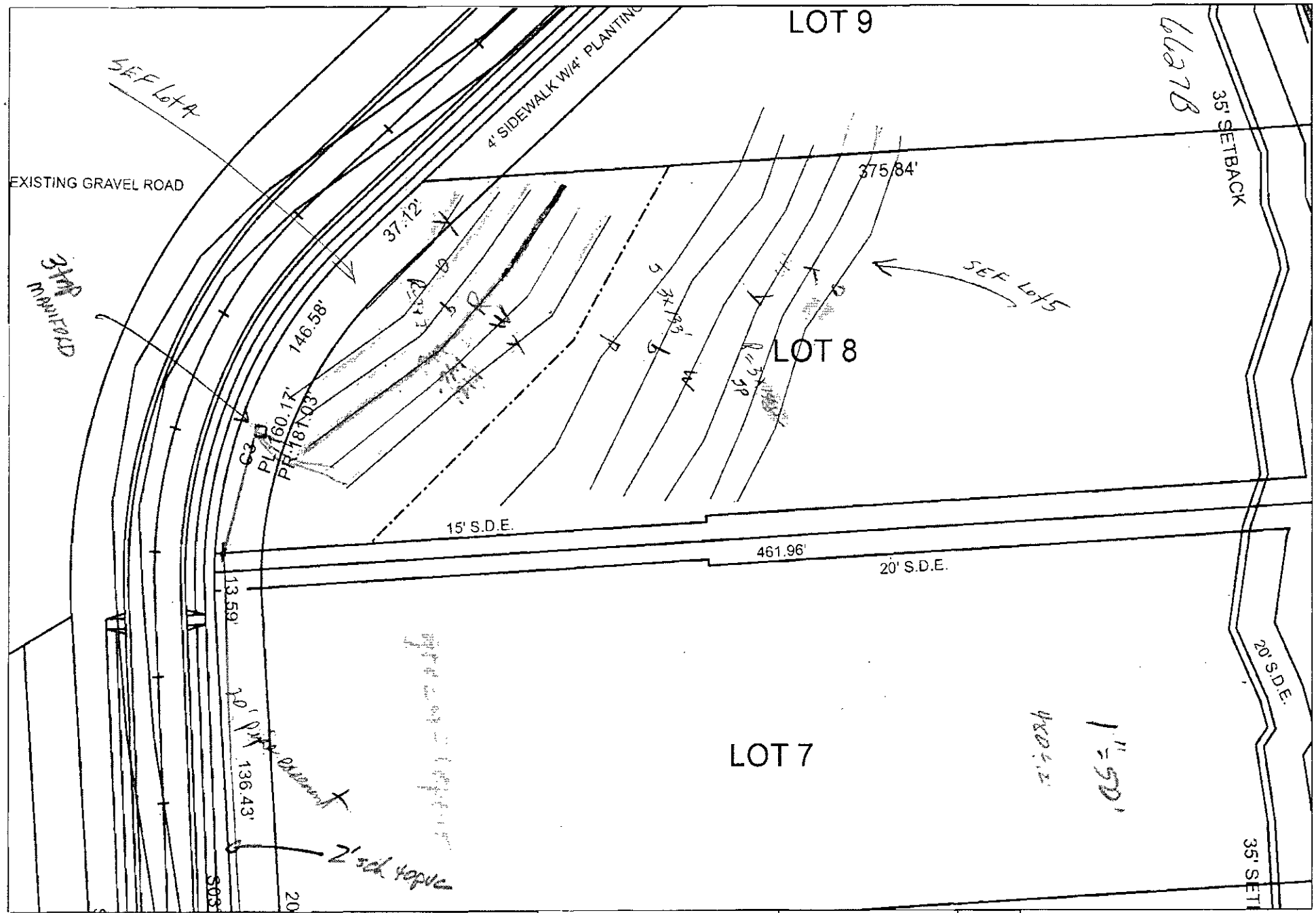
Design Specifications for Lot 6 Rosapenny Road
MCHD file #6629B

Daily design flow:	480 gpd
Number of bedrooms:	4 bedroom
Basement or crawl space:	basement
Septic tank size:	1500 gal
Pump tank size:	1500 gal
Primary system loading rate:	**0.3 gpd/ft^2**
Primary system:	**25% reduction**
Number and length of laterals:	3 @ 133'
Total ft. of primary system:	400 ft.
Flow rate through system:	16.4 gpm – use ½" SCH 80 taps with 2 ft. head pressure on pressure manifold (5.46 gpm per tap)
Pump requirements:	to be calculated by installer when specific house And pump tank locations are available
Dosing volume:	approx. 240 gal. – 2.0 doses/day at design flow
Depth of effluent pumped per dose:	calculated to specific tank by measure or dealer engineering specifications (1 cubic ft. of water equals 7.48 gal.)
Check valve:	yes
Siphon break hole:	no
Repair system loading rate:	**0.3 gpd/ft^2**
Repair system:	**LP PPBPS**
Total ft. of repair:	267'

Design Specifications for Lot 1 Rosapenny Road
MCHD file #6630B

Daily design flow:	600 gpd
Number of bedrooms:	5 bedroom
Basement or crawl space:	basement (off-site system)
Septic tank size:	1500 gal
Pump tank size:	1500 gal
Primary system loading rate:	**0.3 gpd/ft^2**
Primary system:	**25% reduction**
Number and length of laterals:	5 @ 100'
Total ft. of primary system:	500 ft.
Flow rate through system:	27.3 gpm – use ½" SCH 80 taps with 2 ft. head pressure on pressure manifold (5.46 gpm per tap)
Pump requirements:	to be calculated by installer when specific house And pump tank locations are available
Dosing volume:	approx. 300 gal. – 2.0 doses/day at design flow
Depth of effluent pumped per dose:	calculated to specific tank by measure or dealer engineering specifications (1 cubic ft. of water equals 7.48 gal.)
Check valve:	yes
Siphon break hole:	no
Repair system loading rate:	**0.3 gpd/ft^2**
Repair system:	**LP PPBPS**
Total ft. of repair:	334'

Note: Lot utilizes an off-site septic area. LKW will install pipe from the lot to the area.



Scale: 1 inch equals 50 feet	S&ME	LKW Development - Rosapenny Dr.	FIGURE
Drawn by: JBP	ENVIRONMENTAL SERVICES · ENGINEERING · TESTING	Lot 8 Offsites	1
Reviewed by: TCJ		Mecklenburg County, NC	
Date: March, 2007		S&ME Project #1588-06-004	

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 #: **30001088** GWS File #: **6629B** Tax Parcel #: **217-311-01**

- 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):** 6/27/2012

Type of Installation: Residential - New System Lot Number: 6

Structure Type: HOUSE Size (ft^2): 10000 # Bedrooms: 4 # Occupants: 8

Building Foundation: Basement With Plumbing Water Supply: Private Well

II. Initial System Type: Pump to Approved **System Classification:** IIIb

Initial System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500		
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1500	Total Trench Length (ft):	500		
Maximum Trench Depth (in):	30	Depth of Media (in):	12	Distribution Device:	Pressure Manifold				

III. Repair System Type: PPBPS (pressurized) **System Classification:** IVa

Repair System Specifications:

Design Flow (gpd):	600	LTAR (gpd/ft^2):	0.3	Septic Tank Size (gal):	1500	Pump Tank Size (gal):	1500		
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1000	Total Trench Length (ft):	333		
Maximum Trench Depth (in):	30	Depth of Media (in):	24	Distribution Device:	Manifold (LPP Distri				

IV. Permit Conditions/Comments:

(Please See the Following Page for Permit Conditions.)

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, 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 an INSTALLATION APPROVAL is granted by the Department.
- The septic system installer shall be a registered septic contractor with Mecklenburg County Health Department.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

DENR Authorized Agent: Chris Sherrill Owner/Legal Agent: Tracy G Jacobs
(Print Name)

Signature: Signature:

Date Issued: 6/27/2007

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 #: **30001088** GWS File #: **6629B**

IV. Permit Conditions/Comments:

- This type of septic system requires an inspection once every 5 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 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.
- This type of repair system requires the property owner to obtain a contract with a Certified Operator to perform routine inspections and maintenance on the system.
- This type of repair system requires periodic inspections by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- The septic system shall be installed in accordance with the plans submitted by the wastewater system design consultant.

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, 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 an INSTALLATION APPROVAL is granted by the Department.
- The septic system installer shall be a registered septic contractor with Mecklenburg County Health Department.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

DENR Authorized Agent: Chris Sherrill

Signature: Christ M. Sherrill

Date Issued: 6/27/2007

Owner/Legal Agent: Tonya C Jacobs
Print Name

Signature: Tonya C Jacobs

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