9039B # 7094

28 JAN '16 PM 3:16

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: 139-03-421

STREET ADDRESS: 8055 Talcott Drive

CITY: Mint Hill

STATE: NC **ZIP:** 28227

SUBDIVISION NAME: Stonebridge

LOT #: 102 **LOT SIZE (acres):** 0.70

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: 3,200

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 ☐ ANY TYPE ☑ CONVENTIONAL ☑ ACCEPTED ☑ INNOVATIVE ☑ ALTERNATIVE ☐ OTHER _____

8A. RANK: 1 2 3 4 ____

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? 4/28/16 ☐ N/A

12. PROPERTY OWNER:

NAME: Livewell Homes, LLC
ADDRESS: 501 Springcrest Drive
CITY: Fort Mill
STATE: SC ZIP: 29715
WORK PHONE: _____
MOBILE PHONE: (704) 777-8266
FAX: _____
E-MAIL: dbowden@livewellhomes.net

13. OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:

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

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

Revised on: 12/15/10

14. SEPTIC SYSTEM PERMIT APPLICATION:

If the information in this application is falsified, changed, or the site is altered, then the Improvement Permit and Authorization to Construct shall become invalid. I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed. The permit is valid for either sixty (60) months or is non-expiring depending upon the documentation submitted: complete site plan = 60 months, complete plat = non-expiring.

DB (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.

_____ 1-28-16

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

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OFFICE USE ONLY

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

SEPTIC APPLICATION FEE RECEIVED: $ _____ DATE FEE RECEIVED: _____

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

APPLICATION PROCESSED BY: _____

GWS FILE NUMBER ASSIGNED: _____

APPLICATION ID NUMBER ASSIGNED: _____

COMMENTS:

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

Revised on: 12/15/10

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

Sheet: 1 of 2
Property ID: 139-034-21
Lot #: 102
File #: 9039B
AppID: 7094

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Property Owner: Redus Charlotte Housing
Address: 3563 Phillips Hwy, Jacksonville, FL 32207
Proposed Facility: 4 Bedroom House
Design Flow (.1949): 480 GPD
Location of Site: 8055 Talcott Dr, Mint Hill, NC 28227
Water Supply: [X] Public [X] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [ ] Auger Boring [X] Pit [ ] Cut
Type of Wastewater: [X] Sewage [ ] Industrial Process [ ] Mixed

Applicant: Paul Carty w/ Wells Fargo
Date Evaluated: 9/26/2014
Property Size: 0.702 ac
Property Recorded: Unknown

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	b PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	General Comments	Profile Class & LTAR	Maximum Trench Bottom Depth for 3' Wide Conventional Trench
Pit #1	LS 8%	0 - 7	wfsbk CL	FR SEXP	2 chroma @ 38"	35	US	NA		PS IV 0.225	20"
		7 - 24	mmsbk C	FI SEXP							
		24 - 35	wmabk C	FI SEXP							
		35 - 60	mass C	VFI EXP							
Pit #2	LS 4%	0 - 16	wfsbk SCL	FR SEXP	2 chroma @ 35"	58	NA	NA		PS IV 0.25	22"
		16 - 32	wmsbk C	FI SEXP							
		32 - 58	mmsbk C	FI SEXP							
Pit #3	LS 7%	0 - 7	gr SL	FR SEXP	2 chroma @ 54"	65	NA	NA		PS IV 0.275	36"
		7 - 12	wfsbk SCL	FR SEXP							
		12 - 48	wmabk C	FI SEXP							
		48 - 65	wmabk CL	FR SEXP							
Pit #4	LS 7%	0 - 12	gr SL	FR SEXP	2 chroma @ 40"	70	NA	NA		PS IV 0.25	25"
		12 - 22	wfsbk SCL	FR SEXP							
		22 - 35	mmsbk SC	FI SEXP							
		35 - 70	mmabk C	FI SEXP							
Pit #5	LS 10%	0 - 3	gr SL	FR SEXP	2 chroma @ 28"	36	US	NA		PS IV 0.225	12" (Need Cover)
		3 - 36	wmabk C	FI SEXP							
		36 - 64	mass CL	VFI EXP							
Pit #6	LS 10%	0 - 10	gr SCL	FR SEXP	2 chroma @ 42"	42	US	NA		PS IV 0.225	26"
		10 - 23	wfabk SCL	FR SEXP							
		23 - 42	wfabk C	FI SEXP							
		42 - 65	mass CL	VFI SEXP							

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	IIIb	IV
Site LTAR (gpd/sq ft)	0.25*	0.225 (At-grade) 0.1 (Drip)

*** Only valid for area around pits 2, 3, & 4.**

Other Factors (.1946):
Soil Evaluation By: Jacob Presley, REHSI, LSS
Others Present: Wendell Overby, LSS
Site Classification (.1948): PS
Site Evaluation By: Shelby Ledford Shelby Ledford REHSI
Others Present:

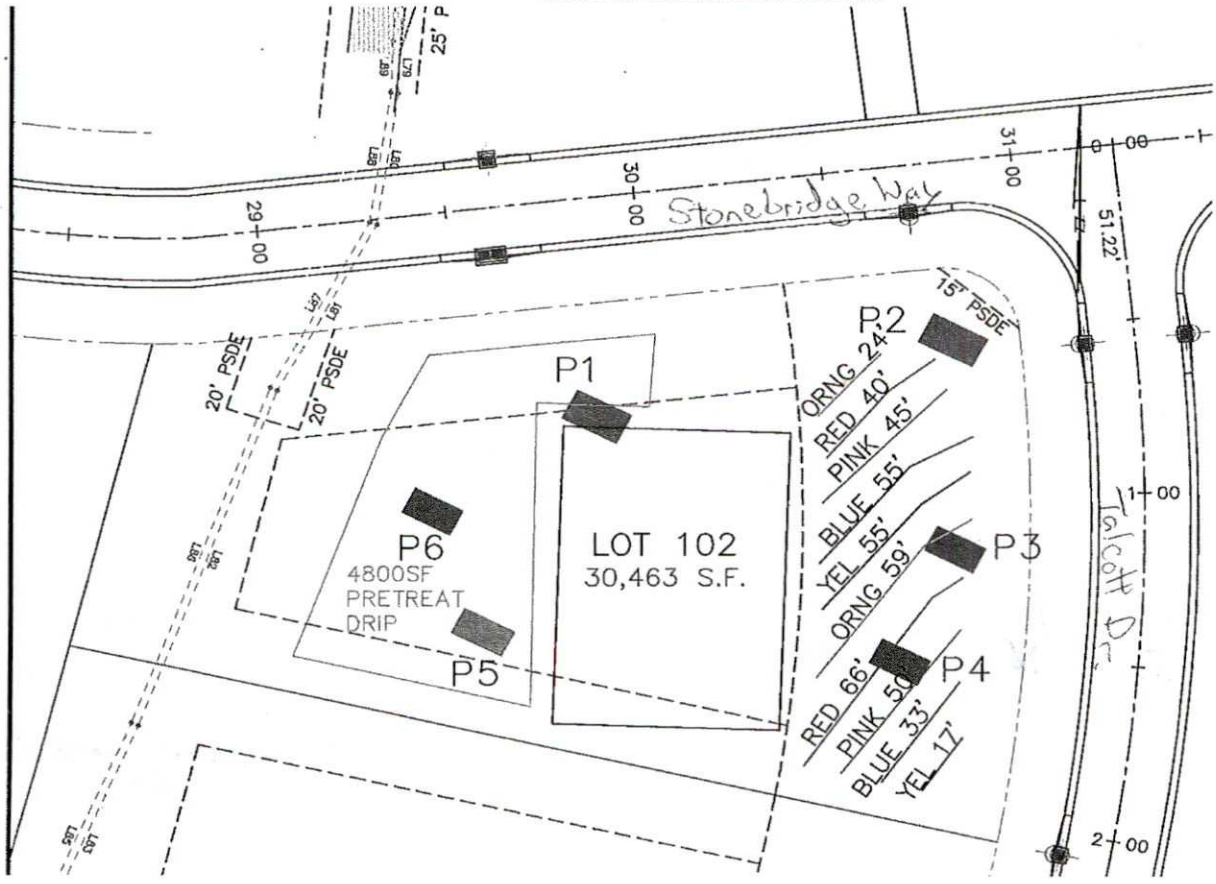
COMMENTS:

Sheet: 2 of 2
File #: 9039B
AppID: 7094

Landscape Position	Group	Texture	.1955 LTAR	Structure
R-Ridge	I	S-Sand	1.2 - 0.8	sg-Single Grain
SS-Shoulder Slope		LS-Loamy Sand		mass-Massive
LS-Linear Slope				cr-Crumb
FS-Foot Slope	II	SL-Sandy Loam	0.8 - 0.6	gr-Granular
NS-Nose Slope		L-Loam		sbk-Subangular Blocky
HS-Head Slope				abk-Angular Blocky
CC-Concave Slope	III	Si-Silt	0.6 - 0.3	pl-Platy
CV-Convex Slope		SiCL-Silty Clay Loam		pr-Prismatic
T-Terrace		CL-Clay Loam		Sap-Saprolite
FP-Flood Plain		SCL-Sandy Clay Loam		**Structure Prefixes**
D-Drainage Way		SiL-Silt Loam		w-weak
				m-moderate
				s-strong
				f-fine
	IV	SC-Sandy Clay	0.4 - 0.1	m-medium
		SiC-Silty Clay		c-coarse
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	SS-Slightly Sticky	SEXP-Slightly Expansive
FR-Friable	S-Sticky	EXP-Expansive
FI-Firm	VS-Very Sticky	
VFI-Very Firm	NP-Non-Plastic	**Classification**
EFI-Extremely Firm	SP-Slightly Plastic	US-Unsuitable
	P-Plastic	PS-Provisionally Suitable
	VP-Very Plastic	S-Suitable
		NA-Not Applicable

Sketch of Soil Evaluation Locations



Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (980) 314-1680 Fax: (704) 336-6894

Septic System Pre-Construction Meeting Checklist

File # 9039B App # 7094 Tax Parcel # 139-039-21

Property Owner: LiveWell Homes

Job Location Address: 8055 Talcott Dr

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: Gas line trenched through septic area. Consultant will look at site & reevaluate area.

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

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

April Bumgarner — Authorized Agent

9-6-17 — Date

RCS — Others Present

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

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

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

File #: 9039B Permit #: 7094 Tax Parcel #: 139-034-21

Property Owner: Live Well Homes

Job Location Address: 8055 Talcott Dr

City: Mint Hill State: NC Zip Code: 28227

Operation Permit Issuance Date: 1-19-18 Contractor Name: RCS

Permitted Design Flow: 480 GPD Liquid Capacity of Dosing Tank: 1500 gallons 7-7-17

Liquid Capacity of Septic Tank: 1500 gallons JTS 7-13-17 Manufacture JTS Effluent Pump Model: _____

Drainfield Installation ☐ N/A

Trench Depth: 20" inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 487' feet

# of Lines: 10 @ Varies ~~feet~~

Depth of Media: 12" inches (Type) Quick4

Depth of Cover: 8 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: 8' feet

Distance from Property Line: 15 feet

Distance from Water Supply Source: 10' feet

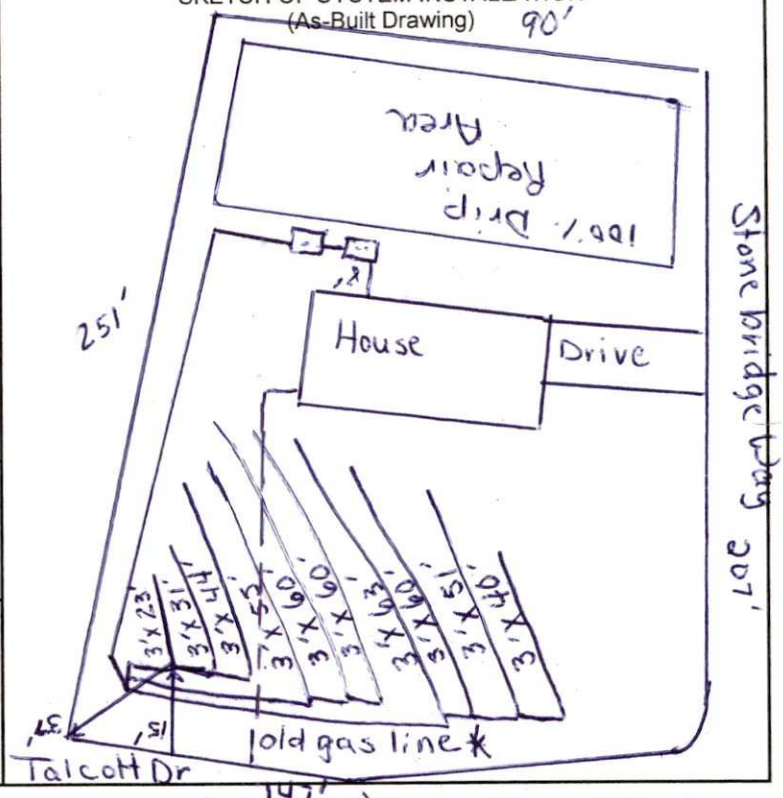
Inspection Dates

Tank(s) Inspected: 1-4-18

Excavation Inspected: 1-4-18

Pump & Controls Inspected: 1-16-18

SKETCH OF SYSTEM INSTALLATION
(As-Built Drawing)



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: IIIb/EQ4/P/NA/NA

*Gas line rerouted, cement used to ~~stop~~ Prevent Bleeding across lines.

DENR Authorized Agent: April Bumgarner Signature: April Bumgarner

April Bumgarner

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (980) 314-1680 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 #: 9039B Permit #: 7094 Tax Parcel #: 139-034-21

Property Owner: Live Well Homes

Job Location Address: 8055 Talcott Dr

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: 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:

DENR Authorized Agent: April Bumgarner Date: 1-19-18

Signature: April Bumgarner

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

www.soilandforestryservices.com

January 15, 2018

Mecklenburg County Groundwater and Wastewater Services
Attn: April Bumgarner
700 N. Tryon Street, Suite 211
Charlotte, NC 28202

Re: Lot 102 Stonebridge

Dear Mrs. Bumgarner,

RCS, Inc. recently installed a 4-bedroom Quick4 chamber (25% reduction) septic system for lot 102 of Stonebridge Subdivision. The system requires an effluent pump with pressure manifold distribution of the wastewater. S&FS flagged the proposed septic trenches for the installer. Based on our layout, discussion with the installer, and inspection by Mecklenburg GWS we are satisfied with the system installation.

Sincerely,

Wendell Overby
NC Licensed Soil Scientist
NC Registered Forester

