# SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

NEW SEPTIC ☑ NEW WELL ☐ USE EXISTING ☐ MODIFIED PLOT PLAN ☐

New Septic Fees Paid

IP ($250.00) SEQP Initial/Date 2/15/22

CA ($200.00) _____Initial/Date

OP ($200.00) _____Initial/Date

(CA and OP fees need to be paid before a building permit can be issued)

New Well Fees Paid: $550.00 _____ Initial/Date

Use Existing Fees Paid: $100.00 _____Initial/Date

Alteration Fees Paid: $300 Total $200 _____Initial/Date (If use existing was part of payment)

Modified Plot Plan Fees Paid: $100.00 _____Initial/Date

Floor plans need to be submitted and reviewed before CA can be issued ☐ Review ☐

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

Septic file complete ☐_____ Well complete ☐ _____

Send permit for signature ☐ Signature received ☐ _____

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

Certified operator contract is on file ☐ _____

DocuSign Envelope ID: D2B68517-A21A-42AB-B0F4-BBF514556963

11301B

App 12860

**MECKLENBURG COUNTY**
**HEALTH DEPARTMENT**

15 FEB '22 PM 1:39

**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: 02310201
STREET ADDRESS: 11800 B Abernathy Rd
CITY: Charlotte
STATE: NC ZIP: 28216
SUBDIVISION NAME: N/A
LOT #: B LOT SIZE (acres): 3.8
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: 3,400
NUMBER OF BEDROOMS: 5
NUMBER OF OCCUPANTS: 6
FOUNDATION TYPE:
○ CONCRETE SLAB ○ BASEMENT WITH PLUMBING
⊘ CRAWL SPACE ○ BASEMENT WITH NO PLUMBING

5. **IF PLANNING TO EXPAND OR ALTER THE EXISTING SEPTIC SYSTEM PLEASE COMPLETE THE FOLLOWING SECTION:** ☑ N/A

NUMBER OF BEDROOMS TO BE ADDED: _____ NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: _____

6. **WATER SUPPLY:** ○ MUNICIPAL ⊘ PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER _____

7. **PROPOSED USE OF WELL:** ○ N/A ○ IRRIGATION ⊘ POTABLE (DRINKING WATER) ○ OTHER _____

8. **PLEASE INDICATE AND RANK DESIRED SEPTIC SYSTEM TYPE(S) IN ORDER OF PREFERENCE** *(1-MOST DESIRED 5-LEAST DESIRED):*
☐ N/A ☑ ANY TYPE ☐ CONVENTIONAL ☐ ACCEPTED ☐ INNOVATIVE ☐ ALTERNATIVE ☐ OTHER _____

8A. **RANK:** ____ ____ ____ ____ ____

9. **DO ANY OF THE FOLLOWING APPLY TO THE PROPERTY IN QUESTION? IF "YES" PLEASE ATTACH SUPPORTING DOCUMENTATION.**

| | | | |
|---|---|---|---|
| BURIED CABLES, LANDFILLS, STUMPHOLES | ○ YES ⊘ NO | GRADING/SOIL REMOVAL PERFORMED | ○ YES ⊘ NO |
| EXISTING WASTEWATER (SEPTIC) SYSTEMS | ○ YES ⊘ NO | JURISDICTIONAL WETLANDS | ○ YES ⊘ NO |
| WELLS, SPRINGS, OR WATER LINES | ○ YES ⊘ NO | APPROVAL REQUIRED BY ANY OTHER PUBLIC AGENCY | ○ YES ⊘ NO |
| EASEMENTS OR RIGHT-OF-WAYS | ○ YES ⊘ NO | WASTEWATER OTHER THAN DOMESTIC SEWAGE | ○ YES ⊘ NO |
| CHEMICAL/PETROLEUM STORAGE TANKS | ○ YES ⊘ NO | KNOWN UNDERGROUND CONTAMINATION | ○ YES ⊘ NO |
| WASTE STORAGE | ○ YES ⊘ NO | GROUNDWATER USE RESTRICTIONS/VARIANCES | ○ YES ⊘ NO |

10. **WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?** _____ ☑ UNKNOWN

11. **WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?** 3/14/22 ☐ N/A

12. **PROPERTY OWNER:**
NAME: Andrew and Tamara Leicester
ADDRESS: 1404 Pecan Ave
CITY: Charlotte
STATE: NC ZIP: 28205
WORK PHONE: _____
MOBILE PHONE: (704) 333-0796
FAX: _____
E-MAIL: tamara@tamaraheather.com

13. **OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:**
NAME: Kevin McLemore
ADDRESS: P.O. Box 66
CITY: Matthews, NC 28106
STATE: NC ZIP: 282106
WORK PHONE: _____
MOBILE PHONE: (704) 361-7151
FAX: _____
E-MAIL: kevin@themclemoregroup.com



MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 980-314-1680, FAX: 704-336-6894
Email: Wellreg@MecklenburgCountyNC.gov

Revised on: 4/20/17

**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.

_____ (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.

DocuSigned by:

_____ 2/14/2022

Property Owner or Owners Legal Representative Signature — Date

---

*OFFICE USE ONLY*

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

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

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

APPLICATION PROCESSED BY: _____

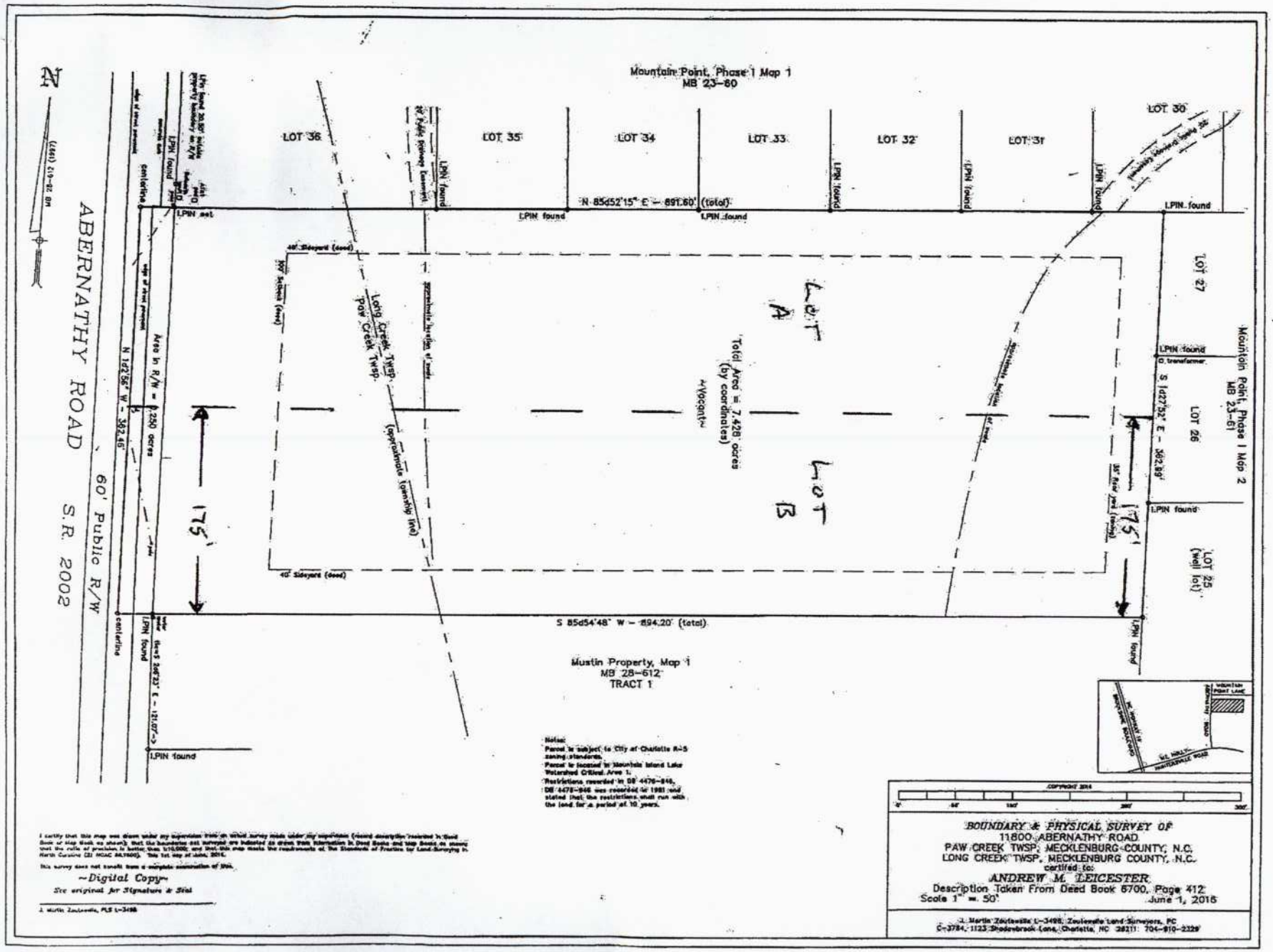
GWS FILE NUMBER ASSIGNED: _____

APPLICATION ID NUMBER ASSIGNED: _____

COMMENTS:



MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 980-314-1680, FAX: 704-336-6894
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Mountain Point, Phase 1 Map 1
MB 23-60
LOT 36
LOT 35
LOT 34
LOT 33
LOT 32
LOT 31
LOT 30
N 85d52'15" E - 891.60' (total)
LPIN found
LPIN set
40' Sideyard (deed)
30' Setback (deed)
Long Creek Twsp.
Paw Creek Twsp.
(approximate township line)
Total Area = 7.428 acres
(by coordinates)
~Vacant~
LOT A
LOT B
175'
Area in R/W = 0.250 acres
N 1d2'56" W - 362.45'
S 1d27'52" E - 362.89'
LOT 27
LOT 26
LOT 25
(well lot)
Mountain Point, Phase 1 Map 2
MB 23-61
S 85d54'48" W - 894.20' (total)
ABERNATHY ROAD
S.R. 2002
60' Public R/W
Mustin Property, Map 1
MB 28-612
TRACT 1
Notes:
Parcel is subject to City of Charlotte R-5 zoning standards.
Parcel is located in Mountain Island Lake Watershed Critical Area 1.
Restrictions recorded in DB 4478-846, DB 4478-846 was recorded in 1981 and stated that the restrictions shall run with the land for a period of 10 years.
I certify that this map was drawn under my supervision from an actual survey made under my supervision (deed description recorded in Deed Book & Map Book as shown); that the boundaries not surveyed are indicated as drawn from information in Deed Books and Map Books as shown; that the ratio of precision is better than 1:10,000; and that this map meets the requirements of the Standards of Practice for Land Surveying in North Carolina (21 NCAC 56.1600). This 1st day of June, 2015.
This survey does not include a complete examination of title.
~Digital Copy~
See original for Signature & Seal
J. Martin Zoutewelle, PLS L-3498
COPYRIGHT 2015
BOUNDARY & PHYSICAL SURVEY OF
11800 ABERNATHY ROAD
PAW CREEK TWSP, MECKLENBURG COUNTY, N.C.
LONG CREEK TWSP, MECKLENBURG COUNTY, N.C.
certified to:
ANDREW M. LEICESTER
Description Taken From Deed Book 6700, Page 412
Scale 1" = 50'
June 1, 2015
J. Martin Zoutewelle L-3498, Zoutewelle Land Surveyors, PC
C-3784, 1123 Shadowbrook Lane, Charlotte, NC 28211 704-810-2329

Option 1

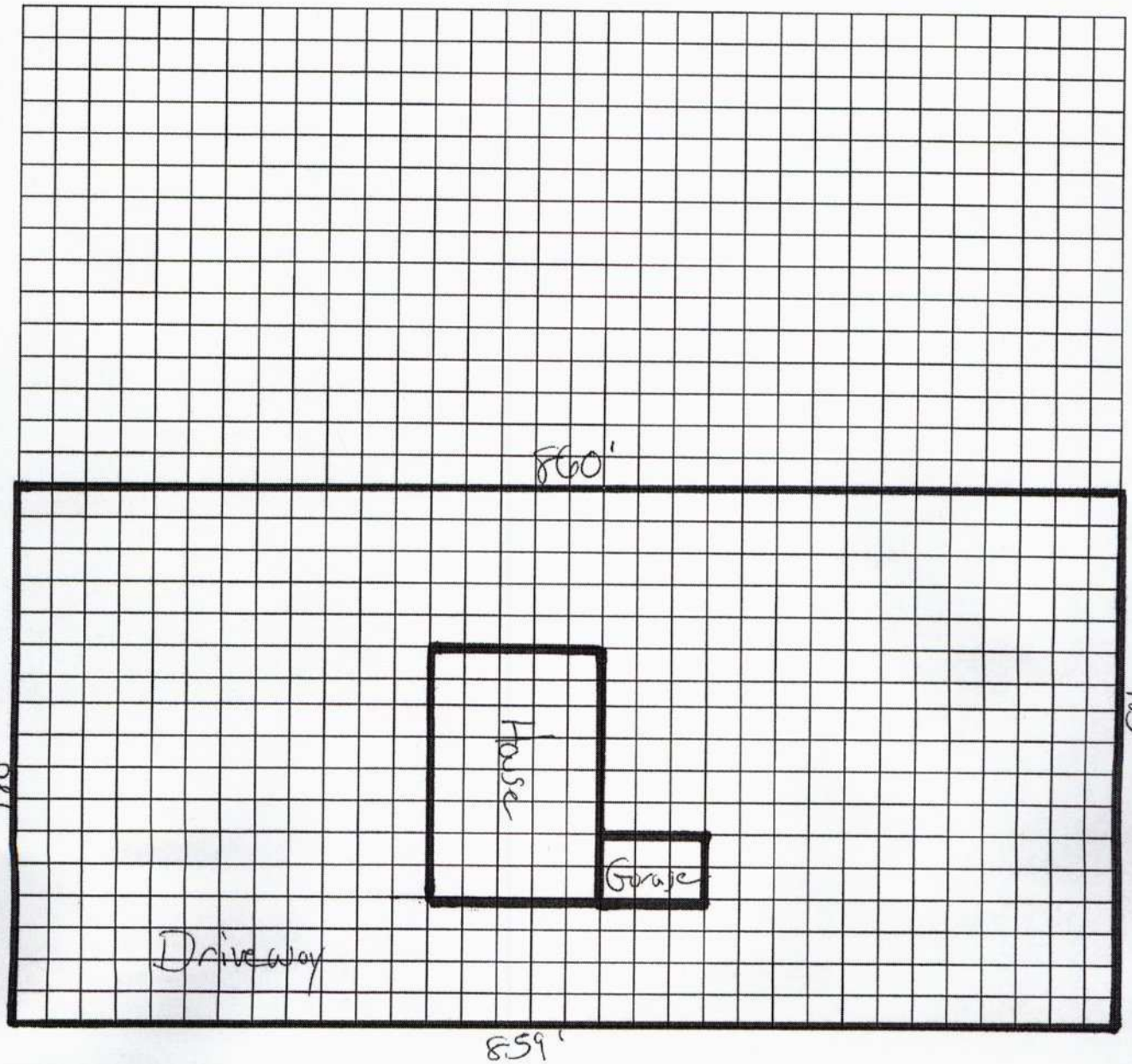
File #: _____

**PROPOSED PLOT PLAN**

A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

Street Address: 11800-B Abernathy Rd #2 Tax Parcel #: 02310201

Subdivision Name: N/A Lot #: 2




_____ _____

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



MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 980-314-1680, FAX: 704-336-6894
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Revised on: 4/20/17

Option 2

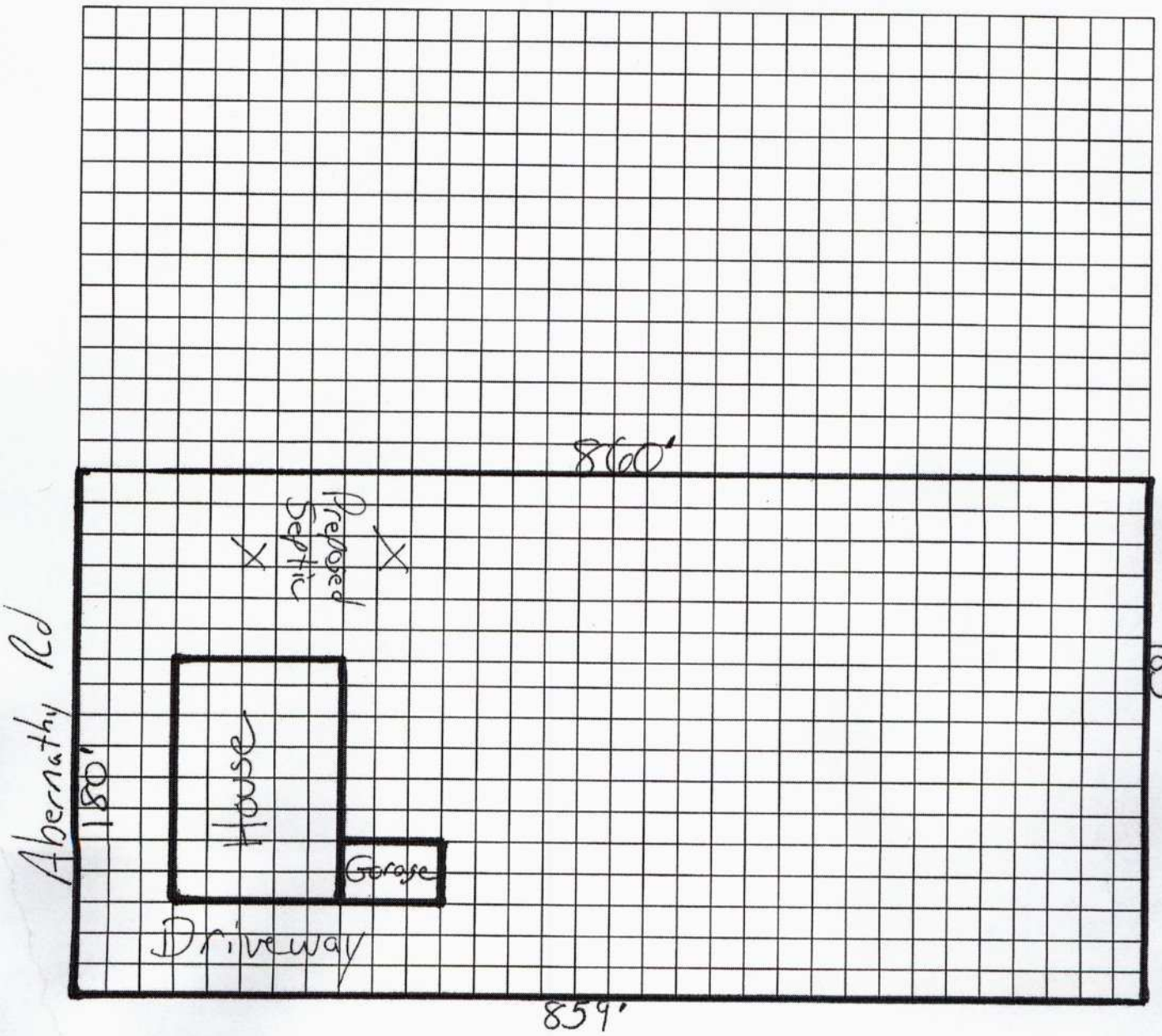
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Street Address: 11800-B Abernathy Rd #2 Tax Parcel #: 02310201

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Revised on: 4/20/17

# *MECKLENBURG COUNTY*
# *LAND USE AND ENVIRONMENTAL SERVICES*
## *Payment Receipt*

**Receipt Information**

**Date:** 02/15/22
**Receipt #:** 133164
**Check / Auth #:** VISA 015428
**Received By:** GALLOSE

**Amount:** 250.00
**Tendered:** 250.00
**Returned:** 0.00

**Account Information**

**Account #:** 200000
**Contractor:** HURST DAVID
**Attn:**
**Address:**
**Address:**
**City/State/Zip:** ,

| Item | Description | Permit# | Quantity | Unit Price | Total Price |
|---|---|---|---|---|---|
| 0701 | Improvment Permit App-Residen<br>11800 ABERNATHY RD | | 1 | 250.00 | 250.00 |

**----------Outstanding Balances----------**

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

# Payment Receipt

**Mecklenburg County**

Environmental Health
3205 Freedom Drive, Suite 8000
Charlotte, NC 28208
Phone: 980-314-1651

Enter Account # or Customer Name Here: DAVID HURST

**Bill To:**

DAVID HURST

**Single Payment**

| | |
|---|---|
| Transaction Date: | 02/15/2022 9:20 AM Pacific Time |
| Pay Method: | VISA ••••••••••••7835 |
| Approval #: | 015428 |
| Trace Number: | 34320eba-fbb0-4cd3-a302-0cf8216f2faa |
| Amount: | $250.00 |

| | |
|---|---|
| Payment Amount: | $250.00 |
| **Total:** | **$250.00** |

Thank you for your payment.

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

Sheet: 1 of 2
Property ID: 023-102-01
Lot #: B
File #: 11301B
AppID: 12860

# SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Property Owner: Andrew & Tamara Leicester
Address: 1404 Pecan Ave, Charlotte, NC 28025
Proposed Facility: 5 Bedroom House
Design Flow (.1949): 600 GPD
Location: 11800B Abernathy Rd, Charlotte, NC 28216
Water Supply: [ ] Public [X] Individual [X] Well
Evaluation Method: [X] Auger Boring [ ] Pit
Type of Wastewater: [X] Sewage [ ] Industrial Process

Applicant: Kevin McLemore
Date Evaluated: 3/28/2022
Property Size: 3.8 ac
Property Recorded: Unknown
[ ] Spring [ ] Municipal
[ ] Cut
[ ] Mixed

| PROFILE # | .1940 Landscape Position/ Slope% | Horizon Depth (IN.) | SOIL MORPHOLOGY .1941 .1941 Structure/ Texture | .1941 Consistence Mineralogy | b PROFILE FACTORS .1942 Soil Wetness/ Color | .1943 Soil Depth (IN.) | .1956 Sapro Class | .1944 Restr Horiz | General Comments | Profile Class & LTAR | Maximum Trench Bottom Depth for 3' Wide Conventional Trench |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Boring #1 | R 2% | 0 - 42 | sbk C | S P FI SEXP | | | | | | | |
| | | 42 - 48 | sbk CL | SS SP FR SEXP | >48" | 48 | NA | NA | | 0.3 | 36" |
| Boring #2 | R 2% | 0 - 8 | sbk SCL | SS SP FR SEXP | | | | | | | |
| | | 8 - 40 | sbk C | S P FI SEXP | >48" | 48 | NA | NA | | 0.3 | 36" |
| | | 40 - 48 | sbk CL | SS SP FR SEXP | | | | | | | |
| Boring #3 | R 3% | 0 - 33 | sbk C | S P FI SEXP | | | | | | | |
| | | 33 - 49 | sbk SCL | SS SP FR SEXP | >49" | 49 | NA | NA | | 0.3 | 36" |
| Boring #4 | LS 6% | 0 - 5 | sbk SCL | SS SP FR SEXP | | | | | | | |
| | | 5 - 32 | sbk C | S P FI SEXP | >50" | 50 | NA | NA | | 0.3 | 36" |
| | | 32 - 50 | sbk SCL | SS SP FR SEXP | | | | | | | |
| Boring #5 | R 3% | 0 - 6 | sbk SCL | SS SP FR SEXP | | | | | | | |
| | | 6 - 35 | sbk C | S P FI SEXP | >49" | 49 | NA | NA | | 0.3 | 36" |
| | | 35 - 49 | sbk SCL | SS SP FR SEXP | | | | | | | |
| Boring #6 | R 4% | 0 - 7 | sbk SCL | SS SP FR SEXP | | | | | | | |
| | | 7 - 34 | sbk C | S P FI SEXP | >49" | 49 | NA | NA | | 0.3 | 36" |
| | | 34 - 49 | sbk SCL | SS SP FR SEXP | | | | | | | |
| Boring #7 | R 3% | 0 - 7 | sbk SCL | SS SP FR SEXP | | | | | | | |
| | | 7 - 39 | sbk C | S P FI SEXP | >49" | 49 | NA | NA | | 0.3 | 36" |
| | | 39 - 49 | sbk SCL | SS SP FR SEXP | | | | | | | |
| Boring #8 | LS 9% | 0 - 4 | sbk SCL | SS SP FR SEXP | | | | | | | |
| | | 4 - 26 | sbk C | S P FI SEXP | >51" | 51 | NA | NA | | 0.3 | 36" |
| | | 26 - 51 | sbk SCL | SS SP FR SEXP | | | | | | | |

| Description | Initial System | Repair System |
|---|---|---|
| Available Space (.1945) | | |
| System Type(s) | | |
| Site LTAR (gpd/sq ft) | 0.3 | 0.3 |

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

**COMMENTS:**

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

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

**Soil Boring Location Sketch**



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 #: **30012860** GWS File #: **11301B** Tax Parcel #: **023-102-01**

- 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. 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):** 4/11/2027

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

Structure Type: HOUSE Size ($ft^2$): 3400 # Bedrooms: 5 Max. Occup.: 10

Building Foundation: Crawl Space Water Supply: Private Well

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

Initial System Specifications:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Design Flow (gpd): | 600 | LTAR ($gpd/ft^2$): | 0.3 | Septic Tank Size (gal): | 1500 | Pump Tank Size (gal): | N/A |
| Trench Width (ft): | 3 | Trench Spacing (ft): | 9 | Absorption Area ($ft^2$): | 1500 | Total Trench Length (ft): | 500 |
| Maximum Trench Depth (in): | 36 | Depth of Media (in): | 12 | Distribution Device: | Drop Boxes | | |

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

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): | 36 | Depth of Media (in): | 12 | Distribution Device: | Pressure Manifold | | |

**IV. Permit Conditions/Comments:**

*(Please See the Following Page for Permit Conditions.)*

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

- No work shall be conducted on the septic system until a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: Heather Ray

Signature: _____

Date Issued: 4/11/2022

Owner/Legal Agent: _____
Print Name

Signature: _____

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 #: **30012860** GWS File #: **11301B**

**IV. Permit Conditions/Comments:**

- All components of the septic system must be located at least 100 ft. (50 ft. minimum) from all private wells.
- The septic system shall be located at least 10 feet from any foundation drain.

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

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Authorized Agent: Heather Ray

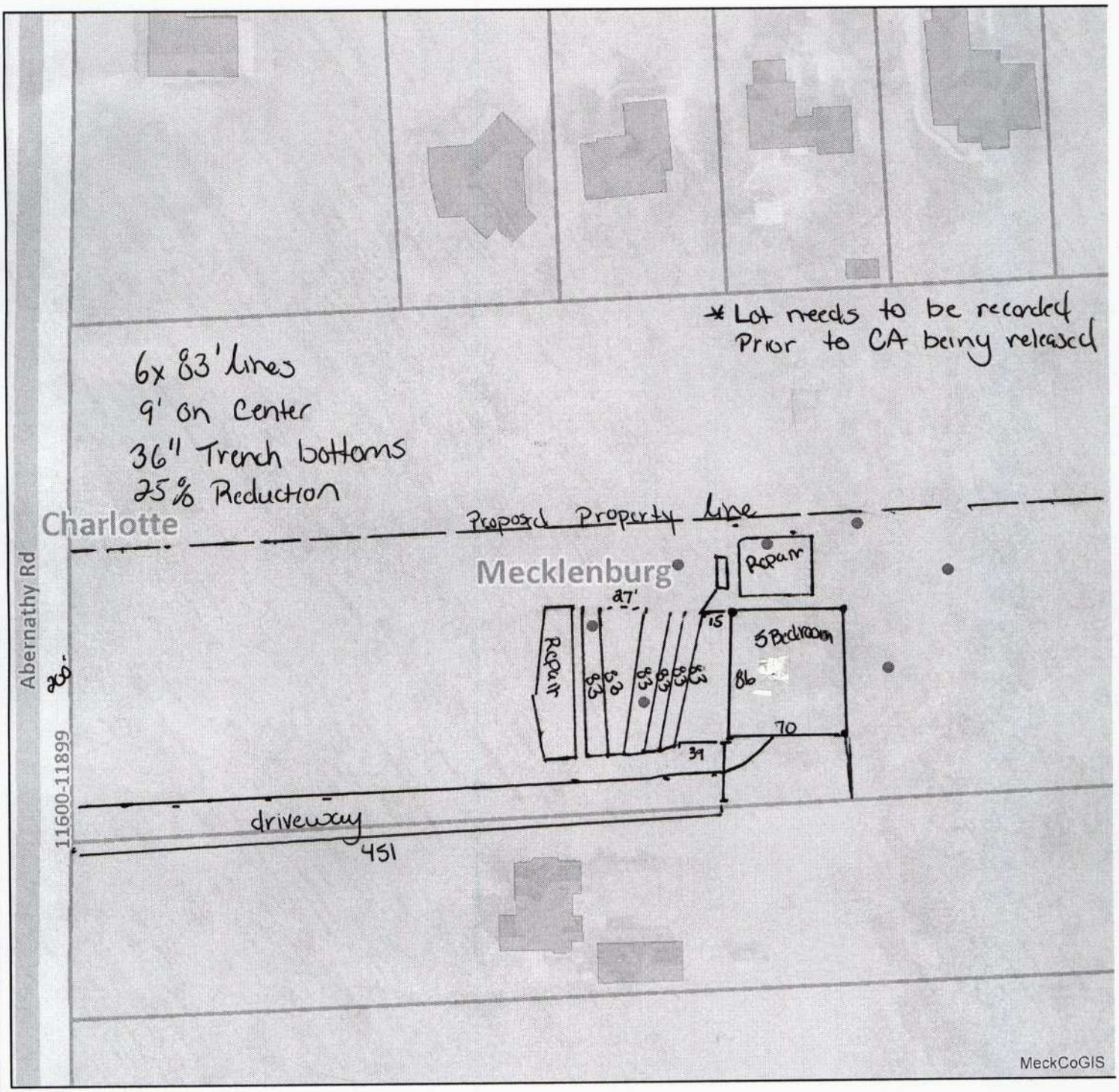
Signature: _____

Date Issued: 4/11/2022

Owner/Legal Agent: _____
Print Name

Signature: _____

# On-site Wastewater Improvement Permit Diagram




Mecklenburg County Health Department
Environmental Health - Groundwater and Wastewater Services

Permit #: 30012860
PID #: 023 102 01
File #: 11301B

Authorized Agent: Heather Ray Date: 4-11-2022

Owner/ Legal Agent: _____ Date: _____

1 inch = 100