

13925 THOMPSON RD

19501728

12/31/2007

duponbj

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

Project # 969307

CERTIFICATE OF COMPLETION/OPERATION PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 2796B DATE: 06-07-01
TC: 195-017-28 ☒ L ☒ CRT
SERIAL Nº 18656

Name of Owner Church of Jesus Christ of Latter Day Saints Juris.:
Address of Property 13925 Thompson Rd.

Inspection Data:

Tank Material PCC
Total Length of Drainfield 625'
Number of Lines 5 @ 125'
Cover Depth 12-24"
Water Supply Source Pwell
Distance to Water Source >100'
Excavation Inspected 06-07-01
Tank(s) Inspected 06-07-01
Wash Line Inspected N/A
High Water Alarm Inspected 06 07-01

See Approved Plan on file

PLOT

Design 2001 2500ST 2500PT PI 12G PS. CTR# RCS

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☑ installed or constructed ☐ altered or repaired
☑ in accordance with the permit issued ☐ as detailed in the plot above

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. This issuance of this

☐ Certificate of Completion ☑ 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. 1990 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/revocation of this permit.

COMMENTS: Type III B Time Dosed System
Type III B Repair.

Joshua R. Gillespie R.S.
Environmental Health Specialist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH FEES

Requestor (please print): T. A. HANSEN Phone #: 233045 Date Requested: 1/13/01 Date Filled: 1/13/01

Account Name: [illegible] Cash Charge Account No.: B 36570

I certify that I am authorized to charge this account for this service:

Signature: [signature] Printed Name: Date:

T.C.	Qty	Description	Unit Cost	Total Cost
0710		Additional Trips	$ 65.00	
0715		Admin. Fee - Field Activity Letter	$ 25.00	
0734	1	Authorization for Wastewater System Construction	$ 150.00	150
0704		Change in Plot Plan	$ 100.00	
0741		Contractor's Annual Fee	$ 50.00	
0735		Improvement Permit Application - Commercial	$ 400.00	
0701		Improvement Permit Application - Residential	$ 200.00	
0703	1	Installation and Final Approval	$ 150.00	150
0743		Maintenance Inspections to Homeowners w/ Type IIIB Systems (every 5 yrs)	$ 85.00	
0706		MH Exc/Add/Repl with System Modification	$ 300.00	
0705		MH Exc/Add/Repl without System Modification	$ 100.00	
0742		Operator's Annual Fee	$ 30.00	
0702		Optional Site Evaluations	$ 100.00	
0708		Realty Closing - Conventional	$ 85.00	
0709		Realty Closing - FHA with water	$ 135.00	
0718		Residential Pool Permit	$ 50.00	
0707		Site Consultation Visit	$ 100.00	
0711		Well Water Analysis-Bacteriological with regular parameters	$ 50.00	
0712		Well Water Analysis -Nitrates and Nitrites	$ 15.00	
0714		Well Water Analysis - Organic Analysis	$ 200.00	
0738		Tatoo Parlor Permits - Mecklenburg Co. resident	$ 125.00	
0739		Tatoo Parlor Permits - non resident	$ 87.50	
0723		Eval and Report Non-Permit Facility	$ 50.00	
0722		Home Day Care Evaluation and Annual Fee	$ 40.00	
0721		Home Day Care Evaluation and Permit	$ 70.00	
0733		Pool - Permit to Construct a Public Pool	$ 200.00	
0724		Pool - Private Testing	$ 15.00	
0740		Pool - Public Permit Prorated mos. X $30.00		
0719		Pool - Public Operating Permit	$ 240.00	
0720		Pool - Seasonal Operating Permit	$ 120.00	
0736		Pool - Late Fee	$ 120.00	
0725		Document Copies	$ 0.05	
Payment received by: [signature] Date: 1/13/01			Total:	300

13925 Impact Rd

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 27963 DATE: 08-28-00

TC: 195-017-28 L/L

SERIAL Nº 18540

Permission is hereby given to ✓ Install or Construct, _____ Alter or Repair the individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge as specified herein at the described location. This permit is granted based upon the information supplied in the application dated 12-15-00. All work shall be completed on or before 09-28-00, after which date this permit 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 the granting of this permit. A Certificate of Completion or 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 or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

* See approved Plan on File. *

PLOT OF SYSTEM

Liquid Capacity of Septic Tank ~~2000~~ 2500 (JRS) gallons

Liquid Capacity of Dosing Tank ~~2000~~ 2500 (JRS) gallons

Tank Construction PCC

Trench Depth 30"

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Trench Walls Scored and Porous yes

Total Line Length 625' feet

Number of Lines 5@125'

Depth of Stone 12" inches

Distance from House >5' feet

Distance from Property Line >10' feet

Distance from Well >100' feet

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

NAME OF OWNER Church of Jesus Christ of Latter Day Saints

LOCATION OF PROPERTY 13925 Thompson Rd.

Comments: Type III B System Type III B Repair Area.

Joshua R. Sellers RS.
Environmental Health Specialist

WHITE - HEALTH DEPARTMENT's COPY • CANARY - E.H.S. COPY • PINK - OWNER OR AGENT's COPY

FEE: _____ AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION AC
DATE: _____ VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

DATE: 3-25-99 PERMIT NO: 2796 B
PARCEL NO: 195-017-28

JOB LOCATION ADDRESS: 13925 Thompson Road
PROPERTY OWNER: Church of Jesus Christ of Latter Day Saints
BUILDING CONTRACTOR: _____
SUBDIVISION NAME: _____
AUTHORIZATION ISSUED BY: Tony B. Thompson R.S., L.S. DATE: 3-25-99
DEHNR/AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 2796B, 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. AN INSTALLATION, CONSTRUCTION, ALTERATION AND/OR REPAIR APPROVAL MUST BE SECURED PRIOR TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH MECKLENBURG COUNTY HEALTH DEPARTMENT.

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 AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: See conditions of the improvement permit.

OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITIONS OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

Permit Number: 2796B 195-017-28

- 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.

Basement	___ Yes	✓ No	___ Partial Basement
Type Primary Wastewater System Type (circle one): I II (III) IV V VI	✓ Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1

3 Long-term acceptance rate	450 Max gallons/day wastewater flow	1875 Absorption Area (sq ft)	9' Trench spacing (min. on centers)
Yes Serviced by private well	2000 Gallon septic tank	625 Total trench length (ft)	30" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
___ ~~Bedrooms in residence~~ 300 seat sanctuary	2500 Gallon pump tank	12" Depth of stone	

Any surface waters present: Type: Minimum separation distance:

Site modifications required: See Conditions of D.P. attached.

Additional Conditions: Flow equalization system - designed to dose 450 gallons per day during weekdays - resting Saturdays and Sundays. Timer should be adjusted for two doses a day at 225 gallons per dose. Control panel shall be the equivalent to a simplex time dosing pump control panel with alarm - NEMA 4X weather proof rating. Horns with required

Repair Area System Type Type (circle one): I II (III) IV V VI	✓ Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1

1875 Absorption Area (Sq ft) 625 Total Trench Length (Ft)	12" Depth of Stone Trench	9' Trench spacing (min. on centers)	30" Maximum Trench Depth

For existing system, enter the year originally installed:

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

- No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair Approval is granted by this Department
- This Improvement permit is transferable.

Larry B. Thompson, L.S. 3-25-99

DEHNR Authorized Agent Date

Owner/Agent Signature Date

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR.
SUITE 211
700 N. TRYON ST.
CHARLOTTE, N.C. 28202.
(704) 336-5102

NORTH CAROLINA DEPARTMENT OF
ENVIRONMENTAL, HEALTH,
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Mecklenburg County
Health Department

Conditions of Improvement Permit

File Number: 2796B
Site Address: 13925 Thompson Road

1. The wastewater treatment and disposal system permitted is a flow equalization system.
2. The system will require a single phase, simplex time dosing pump control panel with alarm. The control panel must have a Nema 4x weather proof rating.
3. A pressure manifold shall be used to distribute effluent to the conventional drain field trenches.
4. Septic and pump tanks must be installed in an area that is not subject to vehicular traffic. Final cover over both tanks must be less than 3 feet to prevent the need for State approved reinforced tanks.
5. Drain lines must be installed on contour. Trench bottoms shall be installed with less than 3 inches of rise or fall per 125 foot drain line.
6. Any changes in the site must be pre-approved by the Mecklenburg County Environmental Health Department.
7. The wastewater treatment and disposal drain field area, including the designated repair areas, shall not be used for any of the following:

   - Grading or filling
   - Parking or driving heavy equipment in the area or subjecting the site to possible soil compaction
   - Construction staging area
   - Installation of lawn irrigation components
   - Installation of underground utilities or cables of any type
   - Burial of any debris or material
   - Utilizing the area for gravesites
   - Diversion of storm water runoff into this area

8. Septic system installer must be registered with Mecklenburg County prior to meeting for the required pre-construction conference.
9. System installer will be required to operate the system at the time of the final inspection. Arrangements must be made to have the pump tank filled with water prior to the requested final inspection. The required pressure head of 2 feet will be adjusted at the pressure manifold at the time of the final inspection.
10. The system owner shall have the contents of the septic tank checked, and the contents of the tank removed, periodically from all compartments, to ensure proper operation of the system. The contents of the septic tank shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.
11. All septic tank riser and effluent filter rules will apply to this system. It is strongly recommended that access risers be added to both ends of the septic tank, extending to at least finish grade. This will allow periodic inspection of the solids level in the tank as well as help facilitate the periodic cleaning of the effluent bio-filter.
12. The local Health Department is required, by the State, to perform system reviews of Type IIIb systems at a minimum of every 5 years. The owner of the system is responsible for paying any inspection fees, as determined by the Board of County Commissioners, at the time of the required inspection.

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURSES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

#1 400

Sheet: 1
Property ID: 145-017-28
Lot #:
File #: 27968

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Church of Jesus Christ of Latter Day Saints
APPLICANT: Bryant Baker
ADDRESS: 4823 N. Royal Atlanta Dr, Tucker, Ga
DATE EVALUATED: 1-12-99
PROPOSED FACILITY: Church
PROPOSED DESIGN FLOW (.1949) 1500 gpd
PROPERTY SIZE:
LOCATION OF SITE: 13925 Thompson Rd
PROPERTY RECORDED:

WATER SUPPLY: ☑Private ☐Public ☐Well ☐Spring ☐Other
EVALUATION METHOD: ☑Augur Boring ☐Pit ☐Cut
TYPE OF WASTEWATER: ☑Sewage ☐Industrial Process ☐Mixed

PROFILE #	Slopes 3-12% .1940 Landscape Position/ Slope %	Horizon Depth (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS &LTAR
1	LS	0-7"	gr l cl	Fr/SE/SP SS/1SP	7.5YR 5/6 to soil wetness	46"	N/A	None	PS .391 F2 LTAR
		7-46"	SBM l c	Fi/SE/SP SS/1SP					
		46-48"	SBM cl	Fr/SE/SP SS/1SP					
2	LS	0-6"	gr l cl	Fr/SE/SP SS/1SP	7.5YR 5/6 to soil wetness	48"	N/A	None	PS, .391 F2 LTAR
		6-48"	SBM c	Fi/SE/SP SP					
3	LS	0-22"	gr l cl	Fr/SE/SP SS/1SP	7.5YR 5/6 to soil wetness	48"	N/A	None	PS, .391 F2 LTAR
		22-48"	SBM c	Fi/SE/SP SP					
4	LS	0-3"	gr l cl	Fr/SE/SP SS/1SP	7.5YR 5/6 to soil wetness	48"	N/A	None	PS .391 F2 LTAR
		3-48"	SBM c	Fi/SE/SP SP					
5	~~LS~~ R	0-5"	gr l cl	Fr/SE/SP SS/1SP	7.5YR 5/6 to soil wetness	48"	N/A	None	PS, .391 F2 LTAR
		5-48"	SBM c	Fi/SE/SP SP					
6	LS	0-4"	gr l cl	Fr/SE/SP SS/1SP	7.5YR 5/6 to soil wetness	46"	N/A	None	PS .391 F2 LTAR
		4-46"	SBM c	Fi/SE/SP SP					
7	LS	0-4"	gr l cl	Fr/SE/SP SS/1SP	7.5YR 5/6 to soil wetness	41"	N/A	None	PS .391 F2 LTAR
		4-37"	SBM c	Fi/SE/SP SP					
		37-41"	SBM cl	Fr/SE/SP SS/1SP					

DESCRIPTION	INTIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): Provisionally Suitable
EVALUATED BY: W. R. Mackie 1-13-99
OTHER(S) PRESENT: LES

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURSES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet: 2

Property ID:

Lot #:

File #: 2 1943

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: APPLICANT:

ADDRESS: DATE EVALUATED:

PROPOSED FACILITY: PROPOSED DESIGN FLOW (.1949) PROPERTY SIZE:

LOCATION OF SITE: PROPERTY RECORDED:

WATER SUPPLY: ☐Private ☐Public ☐Well ☐Spring ☐Other

EVALUATION METHOD: ☐Augur Boring ☐Pit ☐Cut

TYPE OF WASTEWATER: ☐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	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
B	LS	0-5"	gr/fr/	F-VFSEXP 5YR 5/8	7.44" TO 50:1 WETNESS	44"	N/A	None	PS .39/f2
		5-38"	SBMC	F-VFSEXP 5YR 5/8					
		38-44"	SBMC/C/	F-VFSEXP 5YR 5/8					

DESCRIPTION	INTIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946):

SITE CLASSIFICATION (.1948):

EVALUATED BY:

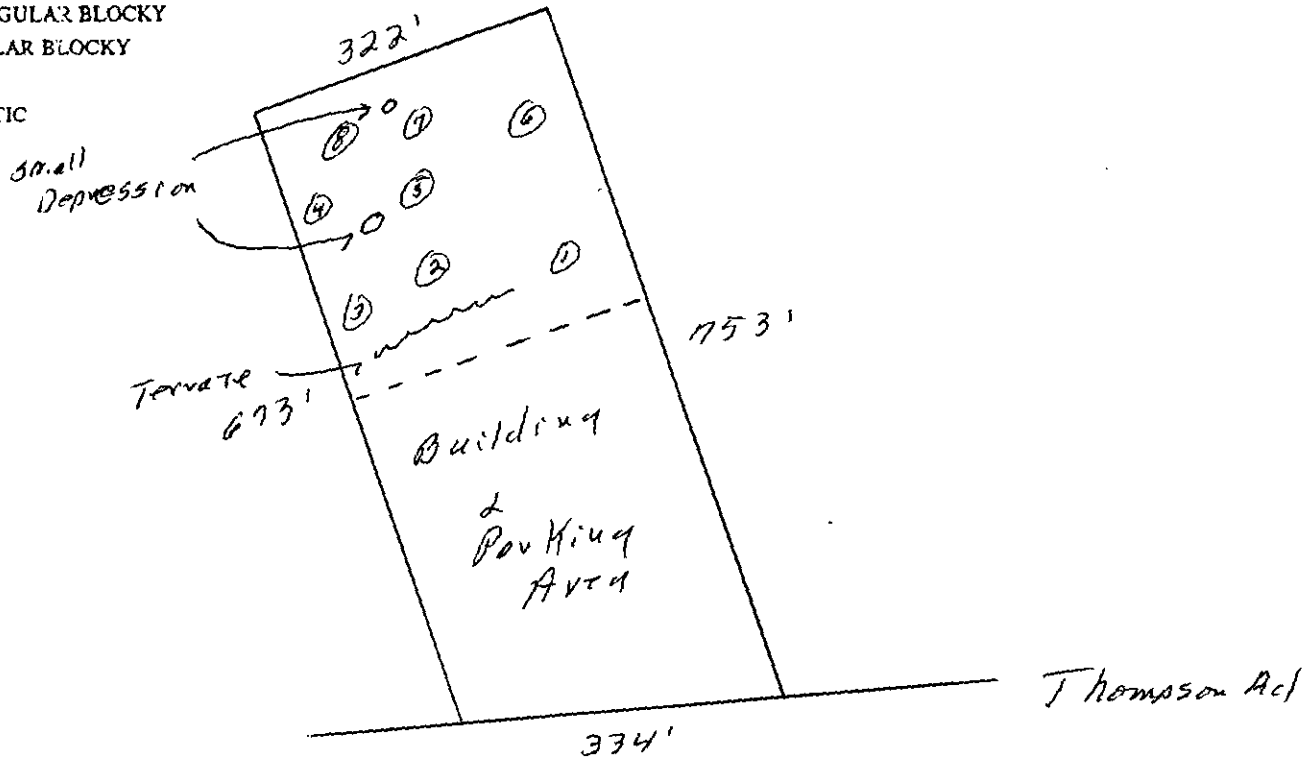
OTHER(S) PRESENT:

2 1963

COMMENTS 100% Repair

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR	CONSISTENCE MOIST	CONSISTENCE WET
R-RIDGE	I	S-SAND	1.2-0.8		
S-SHOULDER SLOPE		LS-LOAMY SAND		VFR-VERY FRIABLE	NS-NON-STICKY
L-LINEAR SLOPE				FR-FRIABLE	SS-SLIGHTLYSTICKY
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6	FI-FIRM	S-STICKY
N-NOSE SLOPE		L-LOAM		VFI-VERY FIRM	VS-VERY STICKY
H-HEAD SLOPE				EFI-EXTREMELY FIRM	NP-NON-PLASTIC
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3		SP-SLIGHTLYSTICKY
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM			P-PLASTIC
T-TERRACE		CL-CLAY LOAM			VP-VERY PLASTIC
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM			
	IV	SC-SANDY CLAY	0.4-0.1		
		SIC-SILTY CLAY			
		O-ORGANIC			

STRUCTURE	MINERALOGY
SG-SINGLE GRAIN	SLIGHTLY EXPANSIVE
M-MASSIVE	
CR-CRUMB	EXPANSIVE
GR-GRANULAR	
SBK-SUBANGULAR BLOCKY	
ABK-ANGULAR BLOCKY	
PL-PLATY	
PR-PRISMATIC	



FEE: 100 ck# 4034

DATE: 12/23/98 gc

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR IMPROVEMENT PERMIT FOR COMMERCIAL/INDUSTRIAL SITE

100

[ ] CRT

TYPE APPLICATION: ✓ NEW SYSTEM ___ EXPANSION OF EXISTING SYSTEM ___ REPAIR OF EXISTING SYSTEM

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

FILE #: 2796B

PROJECT TRACKING #:

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 195-017-28

STREET ADDRESS: 13923 Thompson Rd. Mint Hill

✓ COMMERICAL ___ INDUSTRIAL

LOT NUMBER:

DESCRIBE TYPE OF BUSINESS:

Church

Square Footage of Facility:

TOWNSHIP (CHECK ONE):

___ 0 MECKLENBURG ___ 4 PINEVILLE
___ 1 CHARLOTTE ___ 5 MATTHEWS
___ 2 DAVIDSON ___ 6 HUNTERSVILLE
___ 3 CORNELIUS ✓ 7 MINT HILL

NUMBER OF EMPLOYEES: ___ PER SHIFT: @ 300

HOW WILL WATER BE USED IN THE FACILITY:

✓ TOILETS/URINALS
✓ HANDSINK
___ SHOWERS
✓ FLOOR DRAINS

OTHER, PLEASE DESCRIBE: Baptism Font

An IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change.

TYPE OF WASTEWATER:

✓ SEWAGE ___ INDUSTRIAL PROCESS WASTE WATER

IF EXPANSION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED ADDITION:

WATER SUPPLY (CHECK ONE): ___ COMMUNITY (C) ___ MUNICIPAL (M) ✓ PRIVATE WELL (P) ___ SHARED WELL (S) ___ OTHER 'SPRINGS' (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES	___ YES	✓ NO	WELL SPRINGS OR WATERLINES	___ YES	✓ NO
EXISTING WASTE WATER SYSTEMS	___ YES	✓ NO	DESIGNATED WETLANDS	___ YES	✓ NO
EASEMENTS OR RIGHT-OF-WAYS	___ YES	✓ NO			

BUILDING PLANS TO INCLUDE ALL PLUMBING, FLOOR DRAINS AND ALL SOURCES OF WASTEWATER DISCHARGE AND GRADING PLANS MAY BE REQUIRED DURING THE EVALUATION STAGE.

PROPERTY OWNER: Church of Jesus Christ of Latter Day Saints

NAME: Clark (LAST) Donald (FIRST) D (MI)

ADDRESS: 4823 N. Royal Atlanta Dr

CITY: Tucker STATE: Ga ZIP: 30084

DAYTIME PHONE: (770) 493-1200

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: Baker (LAST) Bryant (FIRST) A (MI)

DAYTIME PHONE: 704 532 8228

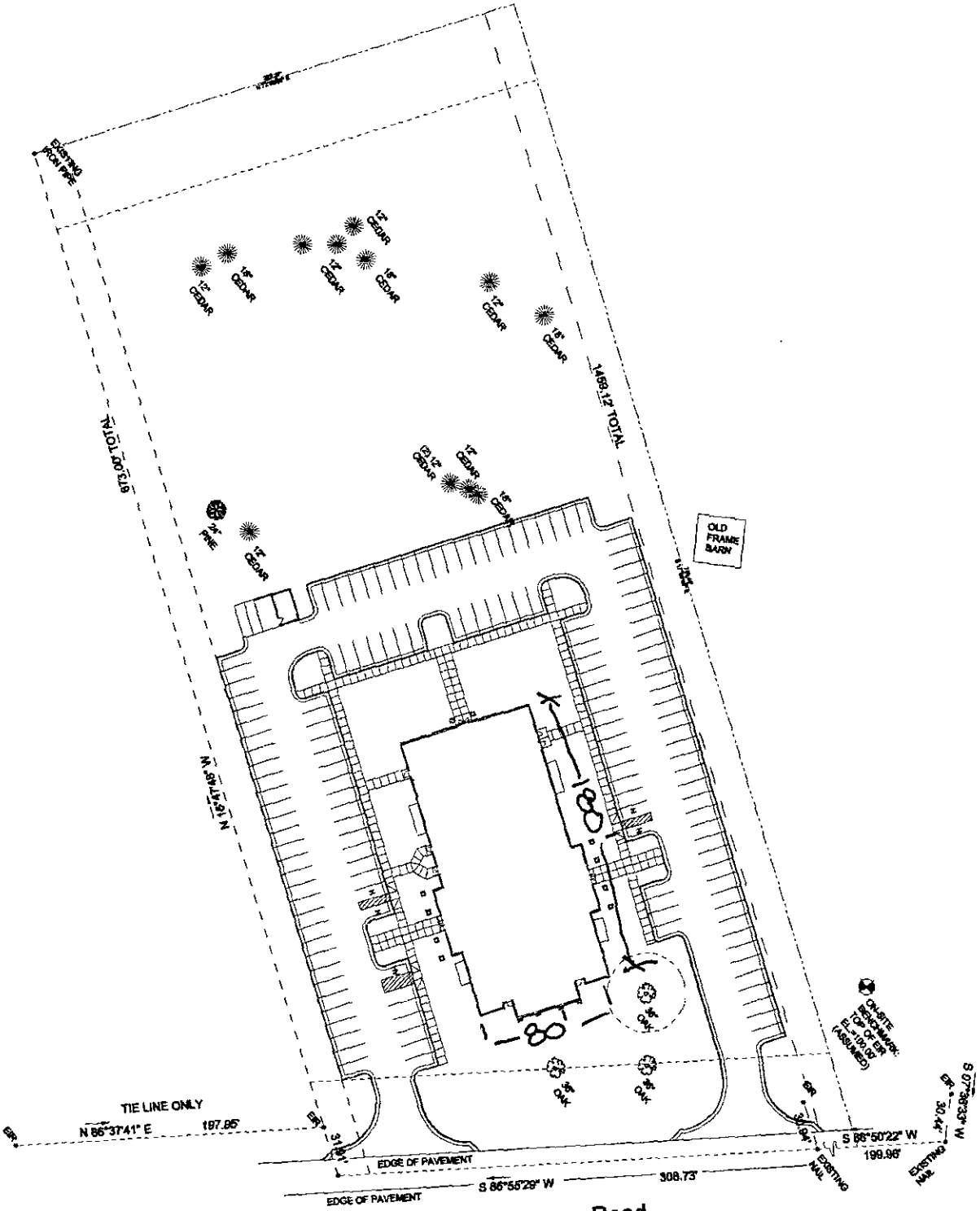
WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 15 Oct 1993

THE UNDERSIGNED, OWNER, OR LEGAL AGENT FOR THE OWNER, OF THE PROPERTY DESCRIBED ABOVE AS THE "JOB LOCATION" HAS READ THE FOREGOING APPLICATION, ACKNOWLEDGES THAT THE CONTENTS OF SAME ARE TRUE, AND AUTHORIZES AGENTS OF THE MECKLENBURG COUNTY HEALTH DEPARTMENT TO ENTER ONTO THE PROPERTY FOR THE PURPOSE OF PROCESSING THIS REQUEST.

SIGNED: [signature]

DATE: 15 Dec 98

2 796B



PROJECT DESIGNATION	
PROPERTY PLANNER	SHEET NO.
DRAWING NO. 74-068-280C	A2.1
DATE	SHEET ___ OF ___
SHEET TITLE	SITE PLAN
PROJECT NUMBER	
PROJECT FOR	THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS
PROJECT NAME	
STAMP	
MARK	DATE
REVISION	

Transmittal

Date: February 21, 2000

Reference: 1549 – The Church of Jesus Christ of Latter Day Saints – Mint Hill

Attention: Mr. Larry Thompson, Jr. R.S.

Company: Mecklenburg County Government
Health Department
700 North Tryon Street, Suite 211
Charlotte, North Carolina 28202

Tel: 336-5568

We Are Transmitting: ☒ Herewith ☐ Under Separate Cover

Copies	Dated	Description
2	02/04/00	SD-4

Transmitted Via: ☒ Mail ☐ FedEx ☐ Courier ☐ Hand Delivery ☐ Pick-up

☐ For Approval ☒ For Your Use ☐ As Requested ☒ For Review

Remarks: On March 29, 1999, we received Conditions of Improvement Permit (noted not an installation permit) for the referenced project. This is your file number 2796B. The attached plans are for your records. The site will be under construction soon. Call us if you have any questions or comments.

By: Sylvia L. Cobb
Sylvia L. Cobb, ASLA

kab

cc: Mr. Bryant Baker, AIA – BBA
Mr. Michael S. Cole, ASLA – CJS
Ms. Susan G. Freyler, ASLA – CJS

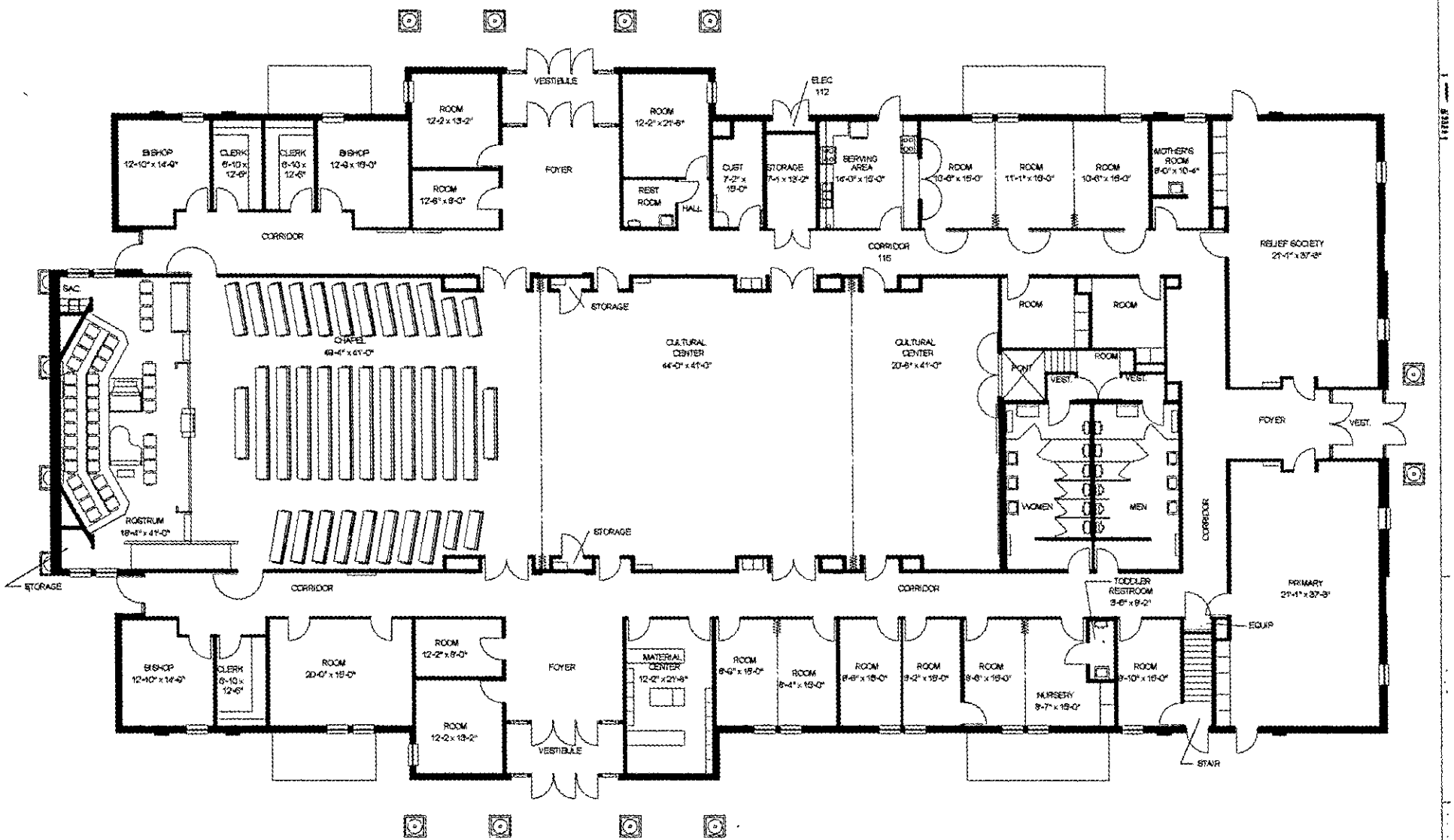
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ColeJenest & Stone

Land Planning
Landscape Architecture
Civil Engineering
Urban Design

112 South Tryon Street
Suite 300
Charlotte
North Carolina
28284

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Fax 704. 376. 7851
Email cjs@colejeneststone.com
www.colejeneststone.com

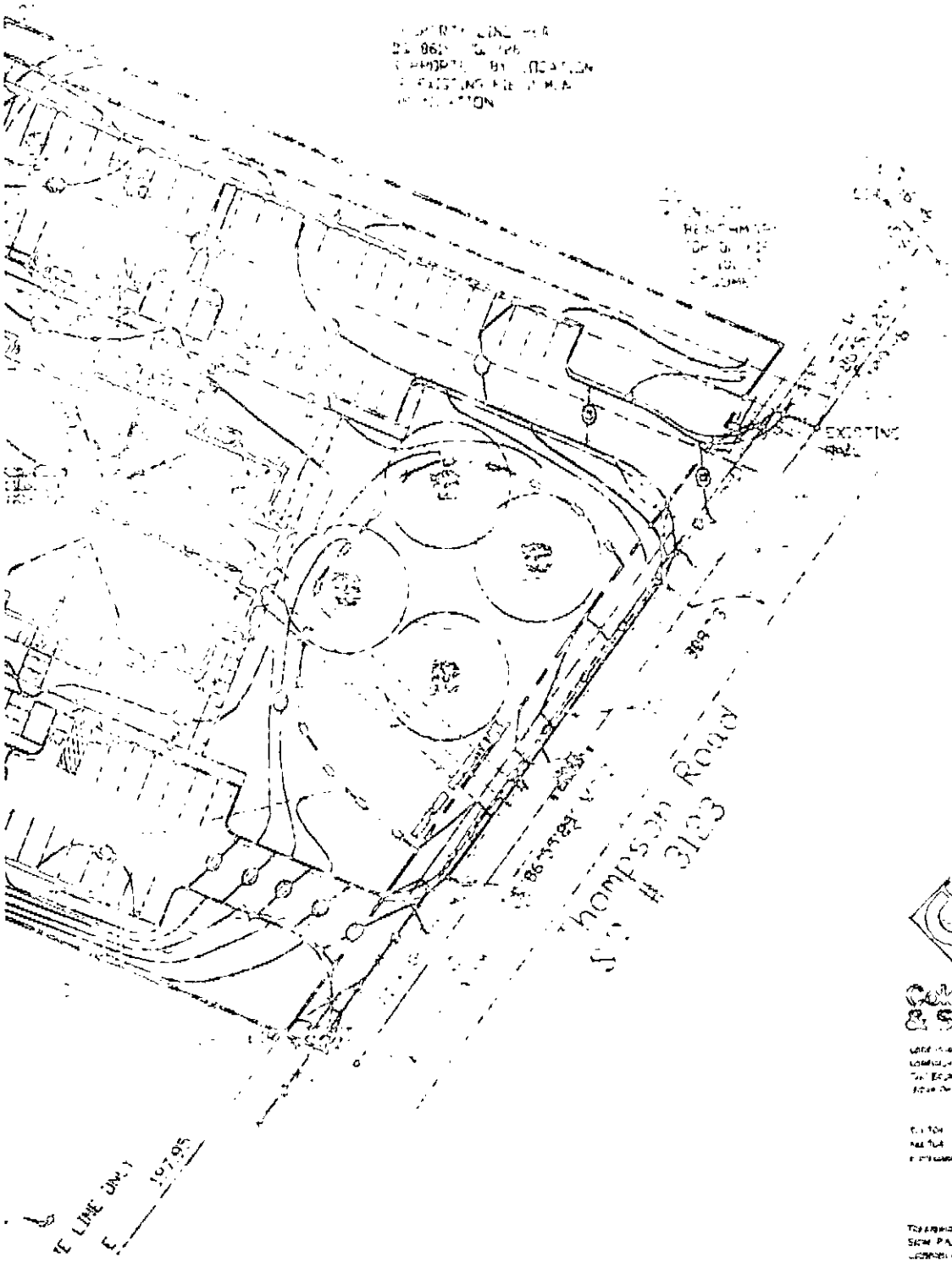


254 - Chapel

35c - Cultural

RICHARD BORDITZ
WIFE
DB. 8619, PG. 1[illegible]
TAX LOT FORMERLY
ZONED "R"

© Colejenest & Stone, P.A. 1998



Cole Jenest & Stone

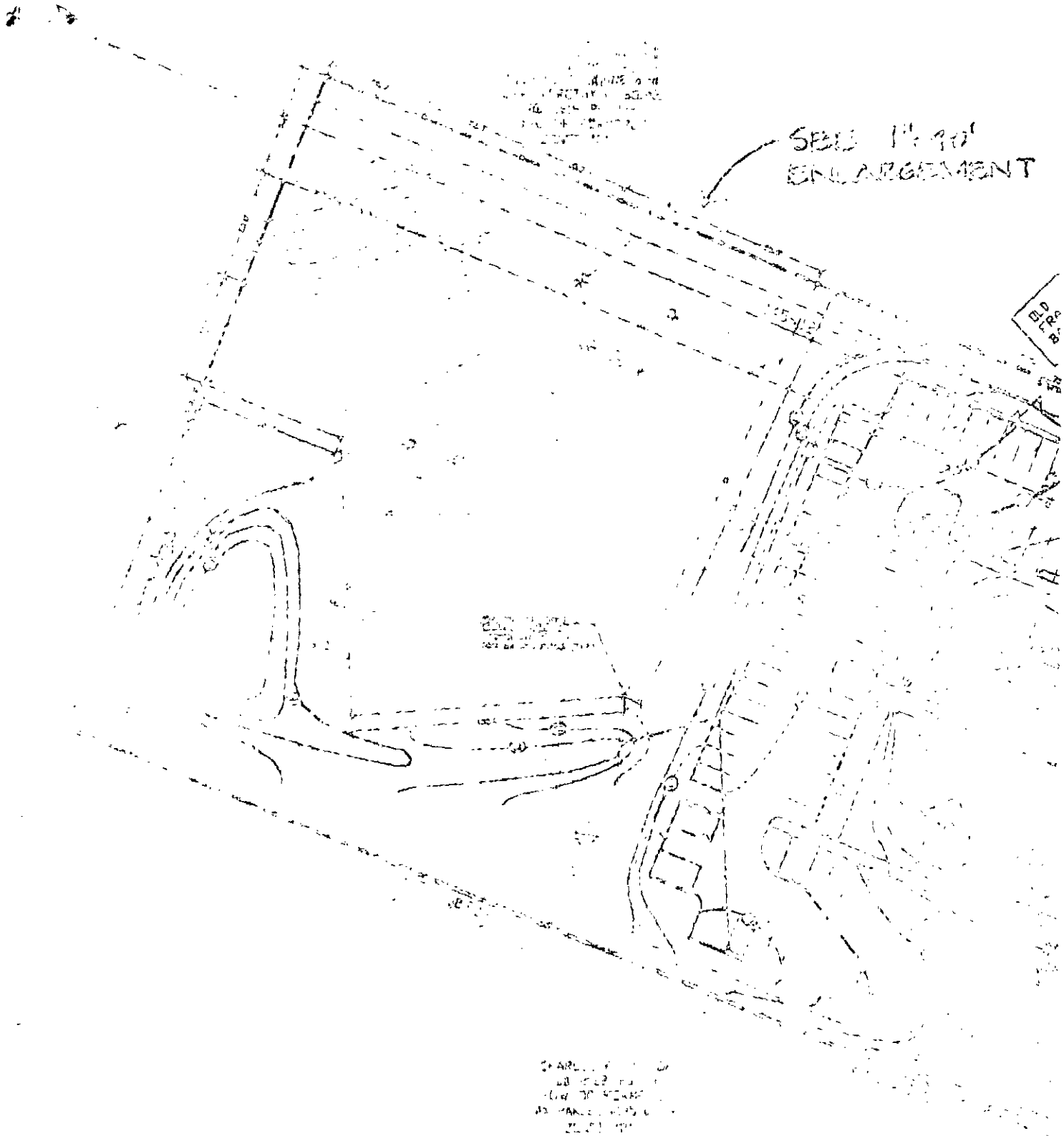
LATTER-DAY SAINTS MTG

IGA

FIELD

2/24/99

NOT TO SCALE


SEE 1" = 40'
ENLARGEMENT

2 1969

• Add Existing well
• 9' o.c. 3'
3Ø - 8993
33C-

86.90

20' SIDE YARD

30' REAR YARD

OLD FRAME BARN

12" CEDAR

(2) 12" CEDAR

24" CEDAR

TRIPLE 18" CEDAR

4"X5" WELL

RIM 100.2

EIR

130" MAPLE

18" MAPLE

DOUBLE 6" MAGNOLIA

PROPOSED BUILDING
FFE = 104.0

5 RISERS
TS 103.4
BS 100.9

FES #8

FFE 100.0

EXISTING IRON PIPE

S 87°50'59" W
63.73'

673.00' TOTAL

20' SIDE YARD

N 16°47'48" W

Preliminary Location for Well

S 07°36'33" W
30.44'

S 86°50'22" W
199.98'

EXISTING NAIL

EXISTING NAIL

60' SETBACK

PROPOSED PROPERTY LINE

EDGE OF PAVEMENT

EDGE OF PAVEMENT

Thompson Road
S.R. # 3123

Latter Day Saints
Mint Hill

1"=50'

tanks : 2000 gallons

300 seats @ 5 gpd = 1500 gallons
mid week service = 750 gallons
2250 gallons
÷ 5
450 gallons per day

500 feet of drainline
125 25% additional
625 feet of drainline
3
1875

5. 12"?

86.90

EXISTING IRON PIPE

S 87°50'59" W 673.73'

20' SIDE YARD

90' REAR YARD

20' SIDE YARD

TOTAL 673.00'

OLD FRAME BARN

12" CEDAR

18" CEDAR

(2) 12" CEDAR

24" CEDAR

TRIPLE 18" CEDAR

4'X5' WELL

RIM 104.2

EIR

13" MAPLE

18" MAPLE

DOUBLE 6" MAGNOLIA

PROPOSED BUILDING FFE = 104.0

5 RISERS TS 103.4 BS 100.9

FES #8

B-1 B-2 B-3 B-4 B-5 B-6 B-7 B-8

PROPOSED PROPERTY LINE

60' SETBACK

EDGE OF PAVEMENT

EDGE OF PAVEMENT

N 16°47'48" W 1608

Thompson Road
S.R. # 3123

Preliminary Location for Well

1" = 50'

This Drain Course To Be Moved Approximately

To Cole - Jones

138 / 4

S1

Lake
Mint Hi

MECKLENBURG COUNTY
Health Department

E. Winters Mabry, MD
Director

(704) 432-3199

July 30, 2013

Re: Application for approval to use an existing on-site wastewater treatment & disposal system.
Property Location: 13925 Thompson Rd
Health Department File Number: **2796 B**

Dear Property Owner or Owner's Agent:

On July 29, 2013 the Mecklenburg County Health Department, Groundwater & Wastewater Services Section, evaluated the above-referenced property to determine if approval to use an existing on-site wastewater treatment & disposal system could be granted for your proposed project. This evaluation was done in accordance with the laws and rules governing wastewater systems in North Carolina General Statute 130A-333 and related statutes, Title 15A, Subchapter 18A, of the North Carolina Administrative Code, Rule .1900 and related rules, and the Mecklenburg County Groundwater Well Regulations.

Based on the information provided in the application, dated July 22, 2013, and findings from the site evaluation conducted by our office, your request for approval to use an existing on-site wastewater treatment & disposal system is **not** being granted. This decision is based on the following conditions that were identified during the site visit:

- ☐ The existing on-site wastewater treatment & disposal system was not functioning properly at the time the site evaluation was conducted.
- ☒ The proposed plans do not meet the required setbacks for the on-site wastewater treatment & disposal system serving the property.
- ☐ The proposed plans do not meet the required setbacks for the reserved repair area for an on-site wastewater treatment & disposal system.
- ☐ The proposed plans do not meet the required setbacks for water supply wells.
- ☐ The proposed project will exceed the permitted daily design flow for the existing on-site wastewater treatment & disposal system. System alteration will be required in order to accommodate your proposed project.

If you need any additional information or assistance please contact our office at (704) 336-5103.

Sincerely,

Bradley W. Hallman, REHS
Environmental Specialist

Encl: (1) Application

File 2796B

MECKLENBURG COUNTY
HEALTH DEPARTMENT

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM / WATER SUPPLY WELL

APPLICATION TYPE: (•) SEPTIC ONLY ( ) WELL ONLY ( ) SEPTIC & WELL
( ) ADDITION OR RENOVATION WITH OCCUPANCY INCREASE
(•) ADDITION OR RENOVATION WITH NO OCCUPANCY INCREASE
( ) EXCHANGE MOBILE HOME (SAME # BEDROOMS)
( ) COMMERCIAL OR INDUSTRIAL

PERSON FILING APPLICATION:
NAME: Bryant Baker
ADDRESS: 4422 Commonwealth Ave.
CITY: Charlotte
STATE: NC ZIP: 28205
PHONE: (704) 400-1517
ALTERNATE PHONE: (704) 541-1466
E-MAIL: BakerBA@ldschurch.org

PROPERTY OWNER: ☐ SAME AS PERSON FILING APPLICATION
NAME: Church of Jesus Christ Latter-Day Saints #5280729
ADDRESS: 50 E. North Temple
CITY: Salt lake City
STATE: UT ZIP: 84150
PHONE:
ALTERNATE PHONE:
E-MAIL:

JOB LOCATION INFORMATION
TAX PARCEL #: 19501728
STREET ADDRESS: 13925 Thompson Road
CITY: Charlotte
STATE: NC **ZIP:** 28227

SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #:

WATER SUPPLY:
( ) MUNICIPAL ( ) PRIVATE WELL (•) PUBLIC WELL ( ) SHARED WELL ( ) OTHER

RESIDENTIAL PROPERTY TYPE: (•) N/A
( ) HOUSE ( ) MODULAR HOME ( ) MULTIPLE FAMILY
( ) SINGLE MOBILE HOME ( ) DOUBLE WIDE
( ) OTHER

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS:
NUMBER OF OCCUPANTS:

COMMERCIAL / INDUSTRIAL PROPERTY TYPE: ☐ N/A
TYPE OF BUSINESS: Church
EMPLOYEES PER SHIFT: 300 Seat Sanctuary
OF SHIFTS:

INDUSTRIAL WASTES? ( ) YES (•) NO
UNDERGROUND STORAGE TANKS? ( ) YES (•) NO

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:
☐ BEDROOM ☐ BATHROOM ☐ KITCHEN ☐ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☐ SUNROOM ☐ PORCH ☐ DECK ☐ OTHER

ADDITION/RENOVATION TYPE DETACHED FROM EXISTING STRUCTURE:
☐ DETACHED GARAGE ☐ DETACHED GARAGE WITH PLUMBING ☐ POOL HOUSE ☐ SHOP ☐ BARN
☐ STORAGE SHED ☐ DETACHED PORCH / DECK ☒ OTHER Add'l Parking Proposed Over Ex. Septic System

*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

7/22/13
Date

A PROPOSED PLOT PLAN (see page 2) is required to be submitted with each application.

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

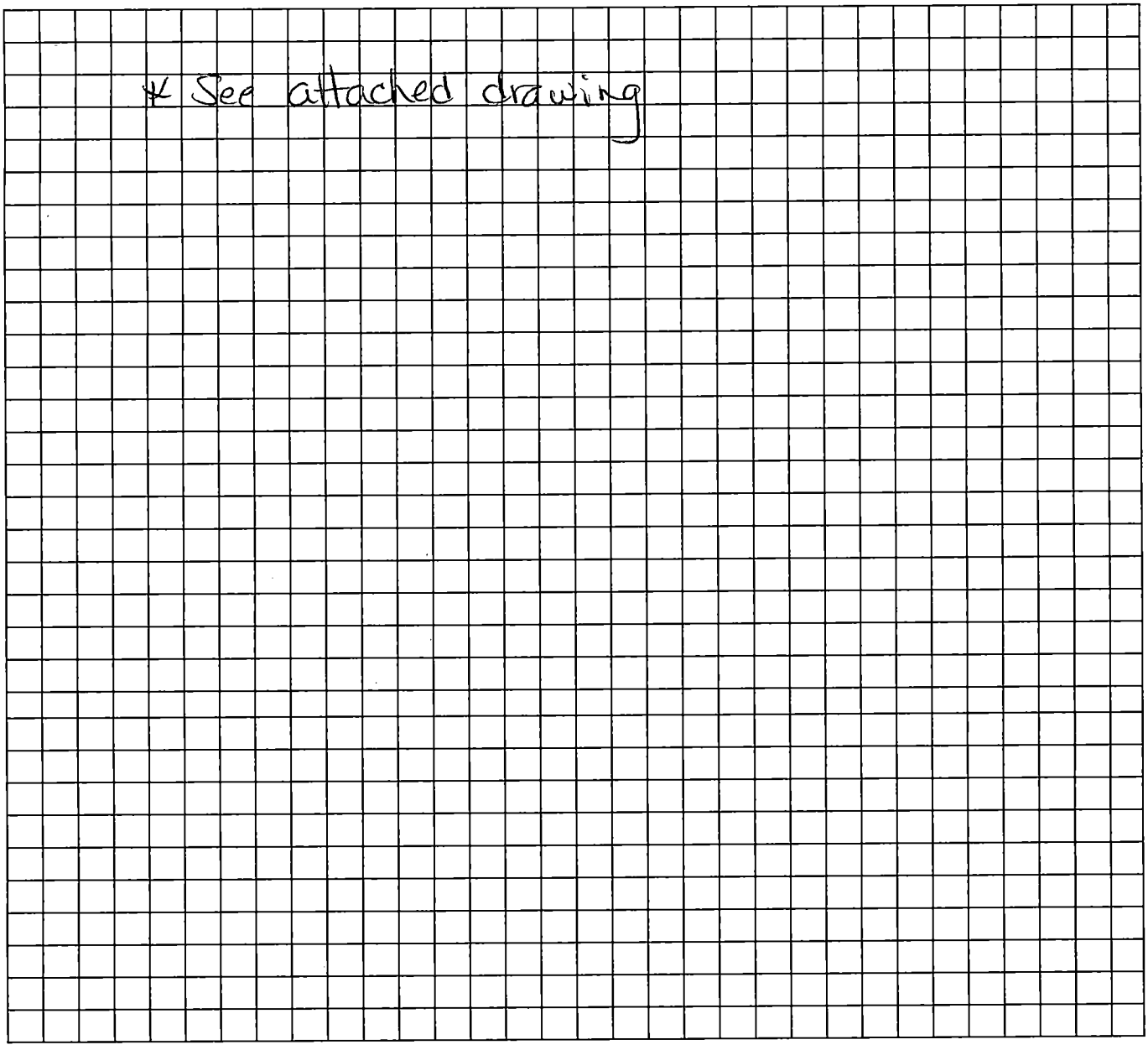
Revised on: 01/03/11

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: 13925 Thompson Road, Mint Hill Tax Parcel #: 19501728



*The undersigned, an authorized agent of the Mecklenburg County Health Department, certifies that the Department has approved the Request for the "Job Location" contained in this document. This approval is granted in accordance with the provisions of Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal and Water Supply Wells in effect at the time of issuance of the permit and is subject to the following provisions:

- No work shall be conducted on the septic tank system until an installation, construction, alteration and/or repair approval is granted by this Department.
- This permit is not transferable.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

_____

_____

_____ _____

REHS Signature Date

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

Revised on: 01/03/11

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	07/23/13	**Amount:**	100.00
Receipt #:	84729	**Tendered:**	100.00
Check / Auth #:	CHECK 15493	**Returned:**	0.00
Received By:	BEACHMS		

Account Information

Account #:	200000
Contractor:	MCLEOD, MICHAEL
Attn:	MICHAEL R. MCLEOD, ARCHITECT,P
Address:	13A HAMPSTEAD VILLAGE
Address:	
City/State/Zip:	HEMPSTEAD, NC 28443

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	MH Exc/Add/Repl w/o System Mod 13925 THOMPSON ROAD		1	100.00	100.00

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
100.00	40.00	50.00	40.00	1,197.15	

Permit Number: 2796B

195-017-28

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 ... o receiving a Building Permit. The Construction Authorization is NOT transferable. Do not clear, grade, fi... ction Authorization.

ORIGINAL APP.

Domestic-type was... er may be discharged into the system.

Basement: ✓ No ___ Partial Basement

Type Primary Wastewat... Type (circle one): I II (III) IV V VI ... ble

___ Shallow Placed Conventional ___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other

___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1

3 Long-term acceptance rate	450 Max gallons/day wastewater flow	1875 Absorption Area (sq ft)	9' Trench spacing (min. on centers)
Yes Serviced by private well	2000 Gallon septic tank	625 Total trench length (ft)	30" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
___ ~~Bedrooms in residence~~ 300 seat sanitary	2500 Gallon pump tank	12" Depth of stone	

Any surface waters present: Type: Minimum separation distance:

Site modifications required: See Condit... of D.P. attached.

Additional Conditions: Flow equalization system - designed to dose 450 gallons per day during weekdays - resting Saturdays and Sundays. Timer should be adjusted for two doses a day at 225 gallons per dose. Control panel shall be the equivalent to a Simple Pressure, Simple Time dosing pump control panel with alarm - NEMA 4X weather proof rating. HOA with regard

Repair Area System Type Type (circle one): I II (III) IV V VI

✓ Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional ___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other

___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1

1875 Absorption Area (Sq ft) 625 Total Trench Length (Ft)	12" Depth of Stone Trench	9' Trench spacing (min. on centers)	30" Maximum Trench Depth

For existing system, enter the year originally installed:

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

- No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair Approval is granted by this Department
- This Improvement permit is transferable.

Larry B. Thompson, L.S. 3-25-99

DEHNR Authorized Agent Date

Owner/Agent Signature Date

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR.
SUITE 211
700 N. TRYON ST.
CHARLOTTE, N.C. 28202.
(704) 336-5102

NORTH CAROLINA DEPARTMENT OF
ENVIRONMENTAL, HEALTH,
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Mecklenburg County
Health Department

Conditions of Improvement Permit

File Number: 2796B
Site Address: 13925 Thompson Road

1. The wastewater treatment and disposal system permitted is a flow equalization system.
2. The system will require a single phase, simplex time dosing pump control panel with alarm. The control panel must have a Nema 4x weather proof rating.
3. A pressure manifold shall be used to distribute effluent to the conventional drain field trenches.
4. Septic and pump tanks must be installed in an area that is not subject to vehicular traffic. Final cover over both tanks must be less than 3 feet to prevent the need for State approved reinforced tanks.
5. Drain lines must be installed on contour. Trench bottoms shall be installed with less than 3 inches of rise or fall per 125 foot drain line.
6. Any changes in the site must be pre-approved by the Mecklenburg County Environmental Health Department.
7. The wastewater treatment and disposal drain field area, including the designated repair areas, shall not be used for any of the following:

    - Grading or filling
    - Parking or driving heavy equipment in the area or subjecting the site to possible soil compaction
    - Construction staging area
    - Installation of lawn irrigation components
    - Installation of underground utilities or cables of any type
    - Burial of any debris or material
    - Utilizing the area for gravesites
    - Diversion of storm water runoff into this area

8. Septic system installer must be registered with Mecklenburg County prior to meeting for the required pre-construction conference.
9. System installer will be required to operate the system at the time of the final inspection. Arrangements must be made to have the pump tank filled with water prior to the requested final inspection. The required pressure head of 2 feet will be adjusted at the pressure manifold at the time of the final inspection.
10. The system owner shall have the contents of the septic tank checked, and the contents of the tank removed, periodically from all compartments, to ensure proper operation of the system. The contents of the septic tank shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.
11. All septic tank riser and effluent filter rules will apply to this system. It is strongly recommended that access risers be added to both ends of the septic tank, extending to at least finish grade. This will allow periodic inspection of the solids level in the tank as well as help facilitate the periodic cleaning of the effluent bio-filter.
12. The local Health Department is required, by the State, to perform system reviews of Type IIIb systems at a minimum of every 5 years. The owner of the system is responsible for paying any inspection fees, as determined by the Board of County Commissioners, at the time of the required inspection.

Preliminary Location for Well
Thompson Road
S.R. # 3123
Latter Day Saints
Mint Hill
1" = 50'
OLD FRAME BARN
EXISTING IRON PIPE
EXISTING NAIL
EDGE OF PAVEMENT
60' SETBACK
30' REAR YARD
20' SIDE YARD
PROPOSED BUILDING
PROPOSED ENTRANCE
EXISTING POLE
S 87°50'59" W 63.73'
S 86°50'22" W 199.98'
S 07°36'37" W 30.44'
N 84°49'31" W 373.00'
(2) 12" CEDAR
12" CEDAR
24" CEDAR
MAPLE
TRIPLE 18" OAK
OAK
WELL
DOUBLE MAGNOLIA

Project # 969307

CERTIFICATE OF COMPLETION/OPERATION PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 2796B DATE: 06-07-01

TC: 195-017-28 ☐ L ☒ CRT

SERIAL Nº 18656

Name of Owner Church of Jesus Christ of Latter Day Saints Juris.:

Address of Property 13925 Thompson Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 625'

Number of Lines 5 @ 125'

Cover Depth 12-24"

Water Supply Source Pwell

Distance to Water Source >100'

Excavation Inspected 06-07-01

Tank(s) Inspected 06-07-01

Wash Line Inspected N/A

High Water Alarm Inspected 0607-01

See Approved Plan on file

PLOT

Design 2001 2500ST 2500PT PI 126 PS. CTR# RCS

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☑ installed or constructed ☐ altered or repaired

☑ in accordance with the permit issued ☐ as detailed in the plot above

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. This issuance of this

☐ Certificate of Completion ☑ 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. 1990 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/revocation of this permit.

COMMENTS: Type III B Time Dosed Systems
Type III B Repair

Joshua R. Gillespie R.S.
Environmental Health Specialist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 27963 DATE: 08-28-00

TC: 195-017-28 L/L

SERIAL Nº 18540

Permission is hereby given to ✓ Install or Construct, _____ Alter or Repair the individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge as specified herein at the described location. This permit is granted based upon the information supplied in the application dated 12-15-00. All work shall be completed on or before 09-28-00, after which date this permit 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 the granting of this permit. A Certificate of Completion or 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 or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

* See Approved Plan on File. *

PLOT OF SYSTEM

Liquid Capacity of Septic Tank ~~2000~~ 2500 (JRS) gallons

Liquid Capacity of Dosing Tank ~~2000~~ 2500 (JRS) gallons

Tank Construction PCC

Trench Depth 30"

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Trench Walls Scored and Porous yes

Total Line Length 625' feet

Number of Lines 5@125'

Depth of Stone 12" inches

Distance from House >5' feet

Distance from Property Line >10' feet

Distance from Well >100' feet

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

NAME OF OWNER Church of Jesus Christ of Latter Day Saints

LOCATION OF PROPERTY 13925 Thompson Rd.

Comments: Type III B System Type III B Repair Area.

Joshua R. Sellers RS.
Environmental Health Specialist

WHITE - HEALTH DEPARTMENT's COPY • CANARY - E.H.S. COPY • PINK - OWNER OR AGENT's COPY

FEE: _____ AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION AC5
DATE: _____ VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

DATE: 3-25-99 PERMIT NO: 2796 B
PARCEL NO: 195-017-28

JOB LOCATION ADDRESS: 13925 Thompson Road
PROPERTY OWNER: Church of Jesus Christ of Latter Day Saints
BUILDING CONTRACTOR: _____
SUBDIVISION NAME: _____
AUTHORIZATION ISSUED BY: Tony B. Thompson R.S. DATE: 3-25-99
DEHNR/AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 2796B, 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. AN INSTALLATION, CONSTRUCTION, ALTERATION AND/OR REPAIR APPROVAL MUST BE SECURED PRIOR TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH MECKLENBURG COUNTY HEALTH DEPARTMENT.

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 AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: See conditions of the improvement permit.

OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITIONS OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

Vaughn & Melton
Engineering-Surveying
1318-F Patton Avenue
Asheville, North Carolina 28806
Phone: (828) 253-2796 Fax: (828) 253-4864
Web Site: http://www.vaughnmelton.com

LETTER OF TRANSMITTAL

TO: Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St.
Suite 211
Charlotte, NC 28202
704-336-5103

DATE: 7/02/13 JOB NO: 31320-07

ATT: Josh Sellers

RE: Septic System- Use Ex. System Permit Application

WE ARE SENDING YOU _X_ ATTACHED__UNDER SEPARATE COVER VIA _____ THE FOLLOWING ITEMS:

__ SHOP DRAWINGS __ PRINTS __ PLANS __ CONTRACTS __ SPECIFICATIONS

__ COPY OF LETTER __ CHARGE ORDER _ _____

COPIES	DATE	NO.	DESCRIPTION
1			Application for Approval to Use an Existing On-site WW System
1			ORIGINAL APP
1			CHK # 15493

THESE ARE TRANSMITTED as checked below:

__ FOR APPROVAL __ APPROVED AS SUBMITTED __RESUBMIT __ COPIES FOR APPROVAL

__ FOR YOUR USE __ APPROVED AS NOTED __ SUBMIT____ COPIES FOR DISTRIBUTION

__ AS REQUESTED __ RETURNED FOR CORRECTIONS __ RETURN _____ CORRECTED PRINTS

__ FOR REVIEW AND COMMENT __ _____

__ FOR BIDS DUE _____ __ PRINTS RETURNED AFTER LOAN TO US

REMARKS:

Please email or call when you receive this so I can better explain what is being proposed. My email is: Lamann@vaughnmelton.com

Thanks.

COPY TO: File

SIGNED: Lynn A. Mann

Lynn A. Mann, P.G.
for Reece Schuler, PE

If enclosures are not as noted, kindly notify us at once.

mobile 828-273-4453
LYNN MANN