TRI-COUNTY WASTEWATER

MEMORANDUM

Date: August 26, 2002

TO: David Cornelius – Mecklenburg County DEH

FROM: Tim Bannister

RE: 12430 Ramah Church Rd – Lloyd Johnston

We recently went to the above address to make their first septic inspection. We found that it is a type 3 system and not a type 4, and therefore, a maintenance contract is not required. The Young Builders was told a contract was required at the time of closing by someone in your department and called us for a contract. Now we find that a contract was not necessary and the owner's have requested cancellation of the contract and reimbursement of their monies.

Therefore, I am requesting that the $30 fee charged by Mecklenburg County be refunded. This was paid by Tri-County on 4/2/02 on our check #1183. Thank you for your assistance in this matter. If you have any questions, please give my office a call.

vbd

P.O. Box 1830
Indian Trail, NC 28079

704.821.8841
800.448.1298
Fax: 704.821.8892
E-Mail: wwm@interlink-cafe.com

4116B

Mecklenburg County, NC
POLARIS
Parcel Ownership and GIS Summary
Date and Time: 11/2/2006 7:59:10 AM

Parcel ID #: 01926125A GIS ID #: 01926125	
Owner Name:	OLIVER LLOYD JR JOHNSTON
Mailing Address:	12430 RAMAH CHUR HUNTERSVILLE, NC
Property Characteristics	
Legal Desc.:	P3 M31-145
Land Area:	1.58AC
Fire District:	18-HUNTERSVILLE
Special District:	FIRE SERVICE D
Account Type:	INDIVIDUAL
Municipality:	6-HUNTERSVILLE
Property Use:	VACANT
Deed Reference(s) and Sales	
10641-100 (7/27/1999) $0.	
Situs Addresses Tied to This	
RAMAH CHURCH RD	
Site Location Information	
Zoning Boundaries:	Contact Appropriate Planning Department
ETJ Area: HUNTERSVILLE	
Charlotte Historic Districts: NO	
Within Charlotte 6/30/2005 Annexation Area: NO	
Census Tract #: 63.01	
Parcel Falls Inside SWIM Buffer?: YES	
FEMA Flood Information	
FEMA Panel #:	370478067E
FEMA Flood Zone:	OUT
FEMA Panel Date:	02/04/2004
Community Flood Information	
Community Flood Zone:	OUT
Regulated Watershed Information	
Watershed Name:	CLARKE
Watershed Class:	

The information provided by this program is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, and other public records and data. Users of this map data are hereby notified that the aforementioned public primary information sources should be consulted for verification of the information. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.

WELL SAMPLE

N.C. Department of Environment and Natural Resources
Division of Environmental Health

Inspection of Engineered Subsurface Wastewater System

Mecklenburg County	Johnston Residence	4116B
Health Department	**Name of Establishment**	**Permit/Project No.**
12430 Ramah Church Rd. Huntersville, NC	Three Bedroom House	360 GPD
Location	**Type of Establishment**	**Design Flow**
Oliver Johnston	Same as location address	(704) 875-6974
Owner/Agent	**Address**	**Phone**
N/A		
Operator	**Address**	**Phone**
IIIb	11/17/2006	November 2011
System Type	**Date of Inspection**	**Next Inspection Due**

	Yes	No	N/A	Comments:
1. ESTABLISHMENT:				
a. Type, size, and sewage flow in accordance with permit?	☒	☐	☐	
2. COLLECTION SYSTEM:				
a. No evidence of leaks into or out from sewer lines/manholes?	☒	☐	☐	
b. Free of blockages/solids buildup in lines or manholes?	☒	☐	☐	
3. TANKAGE: (Grease Traps/Lift Stations/Septic/Dosing Tanks)				
a. Tank risers accessible and surface water diverted?	☒	☐	☐	
b. Tanks and access manholes structurally sound, watertight?	☒	☐	☐	
c. Sanitary tee(s) in good working condition?.....	☒	☐	☐	3.c. Clean fileter on sanitary tee.
d. Tanks pumped, cleaned out as needed?.....	☐	☒	☐	3.d. Recommend pumping tanks.
4. RAW SEWAGE LIFT STATION (if present):				
a. Required pumps present, operating, and cycling properly	☐	☐	☒	
b. High-water alarm present and operating properly?	☐	☐	☒	
c. Floats/pipe/valves/disconnects in good condition?	☐	☐	☒	
5. EFFLUENT DOSING SYSTEM:				
a. Effluent appears clear, free of excess solids?	☐	☐	☒	5. No access to pump tank. Lid secured with a pad lock.
A. PUMP SYSTEMS:				
a. Required pumps present, operating, and cycling properly?	☐	☐	☒	
b. High-water alarm present and operating properly?	☐	☐	☒	
c. Floats/pipe/valves/disconnects in good working condition?	☐	☐	☒	
d. Control panel enclosure/components in good condition?	☒	☐	☐	
e. Elapsed time readings: _____ _____ _____ _____				
B. SIPHON SYSTEMS:				
a. No evidence of overflow or siphon leakage?	☐	☐	☒	
b. Siphon(s) appear to be working/alternating properly?	☐	☐	☒	
c. Bells and vents free of debris and in good condition?	☐	☐	☒	

6. GROUND ABSORPTION FIELDS:

a. No evidence of effluent surfacing/reaching surface waters?	☒	☐	☐	
b. Minimal ponding in subsurface trenches?	☐	☒	☐	6.b. Ponding in all 4
c. Surface water being effectively diverted away?	☒	☐	☐	lines. Heavy rainfall w/in last 36
d. Diversions/ditches/swales/tiles drains properly maintained?	☒	☐	☐	hours.
e. Line cover/vegetation adequate/maintained as needed?	☒	☐	☐	
f. Protected from traffic, destructive uses?	☒	☐	☐	
g. Distribution devices in good condition, working properly?	☒	☐	☐	
h. Repair area properly reserved, maintained?	☒	☐	☐	

A. LOW PRESSURE PIPE DRAIN FIELDS:

a. Turnups/cleanouts/valves intact and accessible?	☐	☐	☒
b. No effluent standing in lower laterals?	☐	☐	☒
c. Laterals free of excess solids, cleaned out as needed?	☐	☐	☒
d. Pressure head is properly adjusted?	☐	☐	☒

OVERALL CONDITION AND OPERATION OF SYSTEM:

1. System requires minor repiars at this time.
2. No sewage observed on ground surface at the time of inspection.

SUMMARY OF REPAIRS REQUIRED AT THIS TIME:

1. Repair leak at tap #2 in manifold box. Effluent pooling in bottom of box.

**Recommend pumping tanks (1,500 gal. septic tank and 1,000 gal. dosing tank) to remove excess solids. Solids measured in septic tank indicate that pumping is required.

***REPAIR WITHIN 30 DAYS.**

SYSTEM MAINTENANCE/IMPROVEMENTS REQUIRED:

*Please visit http://groundwater.charmeck.org for additional information.

DATE: 11/17/2006

SIGNED: _____ R.S. _____ AGENT
Division of Environmental Health

Trevor Thomason, (704) 336-5568