FILE NUMBER: 6944B

Revised On: January 3, 2007

APPLICATION NUMBER: 1901

SEPTIC FEE: 200
DATE: 2/9/07 C/C 1018

WELL FEE: _____
DATE: _____

**MECKLENBURG COUNTY GROUNDWATER & WASTEWATER SERVICES**
**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:** ☐ NONE ☒ NEW SYSTEM ☐ ALTERATION ☐ REPAIR ☐ MODIFIED PLOT PLAN

**2. WELL / TYPE APPLICATION:** ☒ NONE ☐ NEW WELL ☐ MAJOR REPAIR ☐ ABANDONMENT

**3. JOB LOCATION INFORMATION:**

TAX PARCEL NUMBER: 19935214-PO
STREET ADDRESS: Nine Eagles Ln.
CITY: Charlotte
STATE: NC ZIP: 28278
SUBDIVISION NAME: The Sanctuary of Lake Wylie
LOT #: 137 LOT SIZE (acres): 5.41

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

VOID

**4. BUILDING INFORMATION:**

BUILDING TYPE:
☐ SINGLE MOBILE HOME ☐ MODULAR HOME
☐ DOUBLE WIDE ☐ MULTIPLE FAMILY
☒ HOUSE ☐ OTHER _____

HEATED SQUARE FOOTAGE: 4500
NUMBER OF BEDROOMS: 5
NUMBER OF OCCUPANTS: 10

FOUNDATION TYPE:
☐ CONCRETE SLAB ☒ BASEMENT WITH PLUMBING
☐ CRAWL SPACE ☐ BASMENT WITH NO PLUMBING

**5. IF PLANNING TO EXPAND OR ALTER THE EXISTING 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 ☐ PUBLIC WELL ☐ PRIVATE WELL ☐ SHARED WELL ☐ SPRING

**7. PROPOSED USE OF WELL:** ☒ N/A ☐ IRRIGATION ☐ POTABLE ☐ GEOTHERMAL ☐ OTHER

**8. PLEASE INDICATE AND RANK DESIRED SEPTIC SYSTEM TYPE(S) IN ORDER OF PREFERENCE** *(1-MOST DESIRED 5-LEAST DESIRED):*

| 8A. RANK: | ☒ ANY TYPE | ☐ CONVENTIONAL | ☐ ACCEPTED | ☐ INNOVATIVE | ☐ ALTERNATIVE | ☐ OTHER _____ |
|---|---|---|---|---|---|---|
| | ____ | ____ | ____ | ____ | ____ | ____ |

**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 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 |

**10. PROPERTY OWNER:**

NAME: The Sanctuary of Lake Wylie
ADDRESS: 11104 Limehurst Pl.
CITY: Charlotte
STATE: NC ZIP: 28278
HOME PHONE: WORK PHONE:
MOBILE PHONE: 704-295-1638 FAX:

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

NAME: Paul Penninger, S+ME
ADDRESS: 385 Timber Rd, St. 104
CITY: Mooresville
STATE: NC ZIP: 28115
HOME PHONE: WORK PHONE:
MOBILE PHONE: 704-996-6330 FAX: 704-662-8735

**12. WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?** N/A
**13 WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?** May, 2007

**14. SEPTIC SYSTEM PERMIT APPLICATION SIGNATURE SECTION:**
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 60 months or is non-expiring depending upon the documentation submitted: complete site plan = 60 months, complete plat = non-expiring.

02/01/07
Property Owner's or Owner's Legal Representative Signature Date

**15. WELL PERMIT APPLICATION SIGNATURE SECTION:**
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 12 months from the date of issuance.

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

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

3. 2007 MCHD Improvement Permit and Soil Report

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 #: 30001901 GWS File #: 6944B Tax Parcel #: 199-352-14

- 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.

VOID

**I. This Improvement Permit Shall:** Expire in Five (5) Years **Expiration Date (If Applicable):** 6/26/2012

Type of Installation: Residential - New System Lot Number: 137

Structure Type: HOUSE Size ($ft^2$): 4500 # Bedrooms: 5 # Occupants: 10

Building Foundation: Basement With Plumbing Water Supply: Municipal

**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

Signature: Christ M Sherrill

Date Issued: 6/26/2007

Owner/Legal Agent: Patrick Mitchell
Print Name

Signature: Patrick Mitchell

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 #: 30001901 GWS File #: 6944B

**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.

VOID

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.

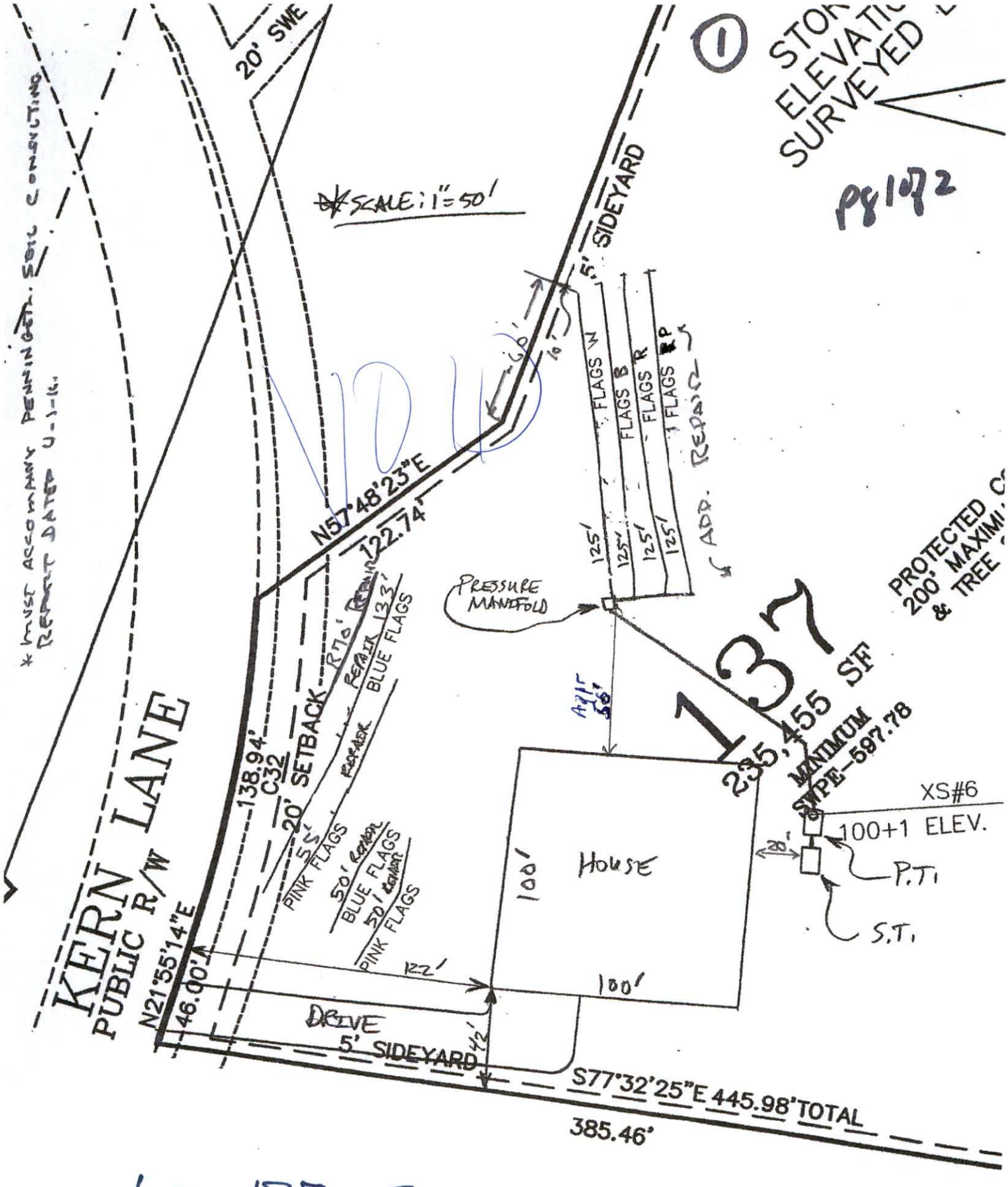
DENR Authorized Agent: Chris Sherrill

Signature: Christ M Sherrill

Date Issued: 6/26/2007

Owner/Legal Agent: Patrick Mitchell
Print Name

Signature: Patrick Mitchell




Pg 1 of 2

LOT 137 SEPTIC SITE PLAN 4-4-16

(From 2007 APPLICATION)

June 11, 2007

Mr. James Martin
The Sanctuary at Lake Wylie
11104 Limehurst Place
Charlotte, North Carolina 28278

Reference: **Request for a Septic Improvement Permit for Lot 137 at The Sanctuary at Lake Wylie Phase 4b**
Mecklenburg County Health Department (MCHD) File # 6944 B

Dear Mr. Martin,

The Sanctuary at Lake Wylie is requesting an Improvement Permit for the above referenced lot. Mr. Bill Marlin 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 by your surveyor and are shown on the attached maps provided by YW&H, Inc. The attached sketch and specifications are not an Improvement Permit and are intended only to assist the MCHD in permitting the referenced lot at The Sanctuary.

We understand that a building permit cannot be issued until your office issues an Authorization to Construct (ATC). The buyer will apply for the ATC. If the buyer's 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.**

Tri-County Wastewater (TCWW) is under contract to supply maintenance services for each septic system installed at The Sanctuary. TCWW will have a list of preferred septic contractors for the subdivision and will also have requirements for septic system installation that are greater than the MCHD and State requirements. It will be the responsibility of TCWW to enforce any requirements above State requirements or the MCHD conditions on the Improvement Permit.

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 in you have and questions or comments.

Sincerely,

**S&ME, Inc.**

Paul G. Penninger, LSS
Licensed Soil Scientist

Rob Willcox, LSS
Natural Resources Department Manager

VOID

**Attachments:**
1. System Specifications
2. Site Plan
3. MCHD Soil Evaluation

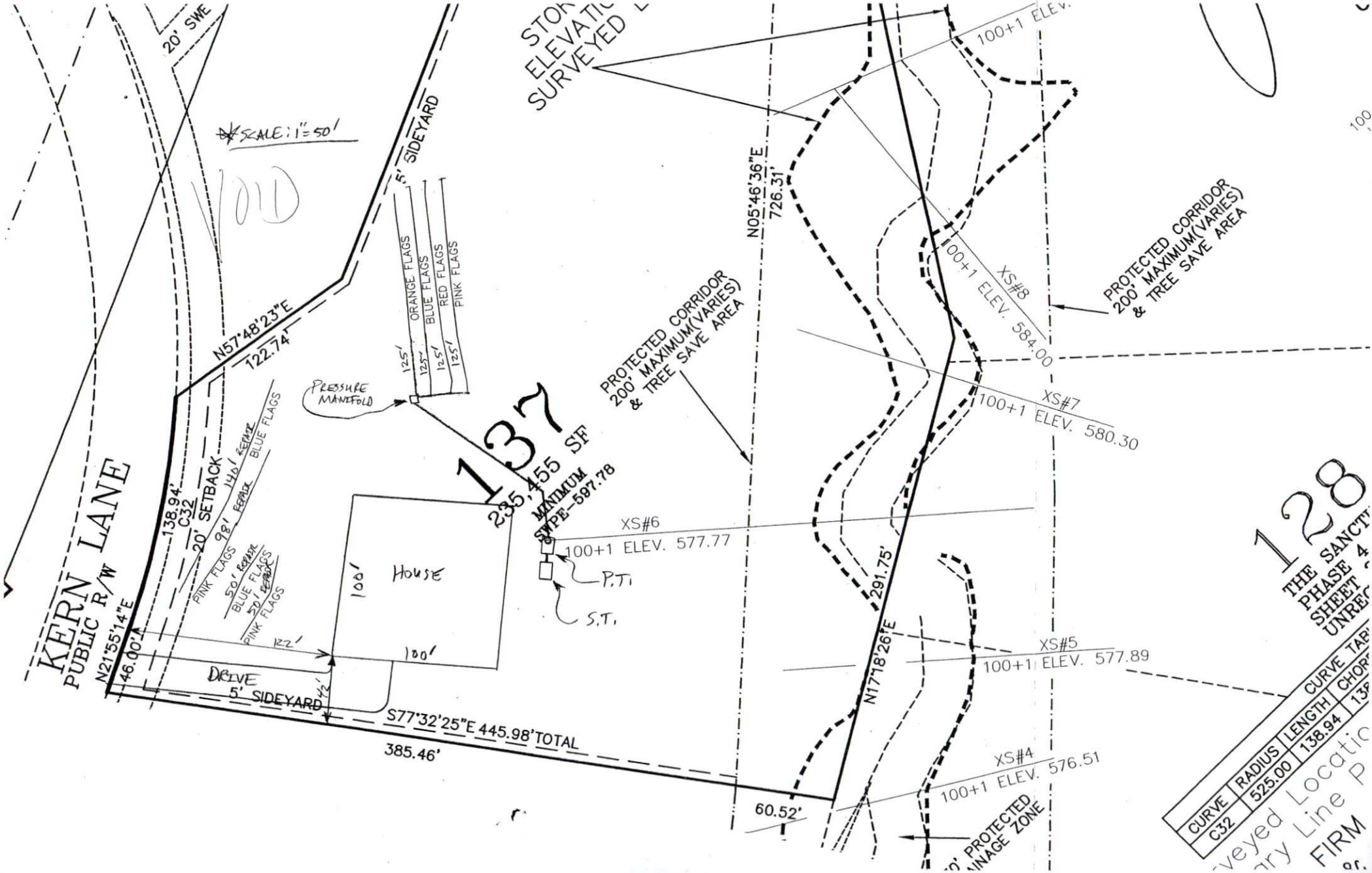
Copy: Mr. Philo Walker, R.S.
MCHD

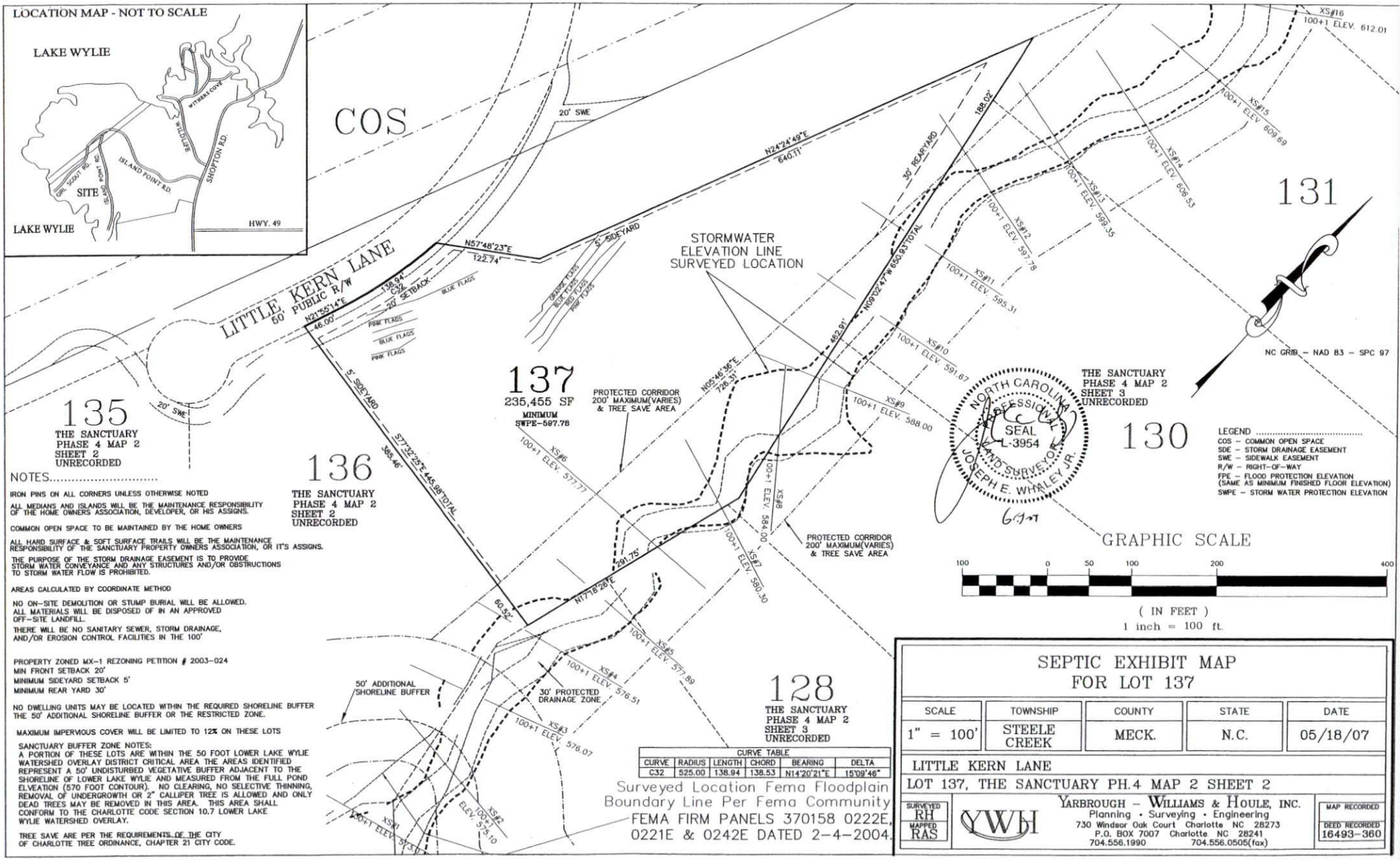
**Design Specifications for Lot 137 at The Sanctuary**
**MCHD File #** 6944 B

| | |
|---|---|
| Daily Design Flow: | 600 gpd |
| Number Bedrooms: | 5 bedroom |
| Basement or Crawl Space: | Crawlspace |
| Septic Tank Size: | 1500 gal |
| Pump Tank Size: | 1500 gal |
| **Primary System Loading Rate:** | **0.30 gpd/ft$^2$** |
| **Primary System:** | **25% reduction** |
| Number and length of laterals: | 4 @ 125 ft. endfed |
| Total ft. of primary system: | 500 ft. |
| Flow Rate through system: | 22 gpm – use ½ in. SCH 80 taps with 2 ft. head pressure on pressure manifold (5.5 gpm per tap) |
| Pump Requirements: | to be calculated by installer when specific house and pump tank locations are available |
| Dosing Volume: | approx. 243 gal. – 2.4 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:** | **0.30 gpd/ft$^2$** |
| **Repair System:** | **LP PPBPS** |
| Total ft. of repair | 338 ft. (334 ft. required) |

VOID

**Notes:**


KERN LANE
PUBLIC R/W
20' SWE
5' SIDEYARD
SCALE: 1"=50'
N57°48'23"E
122.74'
138.94'
C32
20' SETBACK
N21°55'14"E
146.00'
PINK FLAGS
98' REPAIR
140' REPAIR
BLUE FLAGS
50' REPAIR
BLUE FLAGS
50' REPAIR
PINK FLAGS
PRESSURE MANIFOLD
125'
ORANGE FLAGS
125'
BLUE FLAGS
125'
RED FLAGS
125'
PINK FLAGS
137
235,455 SF
MINIMUM
SWPE-597.78
PROTECTED CORRIDOR
200' MAXIMUM(VARIES)
& TREE SAVE AREA
HOUSE
100'
100'
122'
DRIVE
5' SIDEYARD
S77°32'25"E 445.98'TOTAL
385.46'
60.52'
N05°46'36"E
726.31'
291.75'
N17°18'26"E
100+1 ELEV.
XS#8
100+1 ELEV. 584.00
PROTECTED CORRIDOR
200' MAXIMUM(VARIES)
& TREE SAVE AREA
XS#7
100+1 ELEV. 580.30
XS#6
100+1 ELEV. 577.77
P.T.
S.T.
XS#5
100+1 ELEV. 577.89
XS#4
100+1 ELEV. 576.51
PROTECTED
DRAINAGE ZONE
128
THE SANCT
PHASE 4
SHEET
UNREC
CURVE TABL
CURVE
RADIUS
LENGTH
CHOR
C32
525.00
138.94
13
Surveyed Locatio
Boundary Line P
FIRM




NOTES.....

IRON PINS ON ALL CORNERS UNLESS OTHERWISE NOTED

ALL MEDIANS AND ISLANDS WILL BE THE MAINTENANCE RESPONSIBILITY OF THE HOME OWNERS ASSOCIATION, DEVELOPER, OR HIS ASSIGNS.

COMMON OPEN SPACE TO BE MAINTAINED BY THE HOME OWNERS

ALL HARD SURFACE & SOFT SURFACE TRAILS WILL BE THE MAINTENANCE RESPONSIBILITY OF THE SANCTUARY PROPERTY OWNERS ASSOCIATION, OR IT'S ASSIGNS.

THE PURPOSE OF THE STORM DRAINAGE EASEMENT IS TO PROVIDE STORM WATER CONVEYANCE AND ANY STRUCTURES AND/OR OBSTRUCTIONS TO STORM WATER FLOW IS PROHIBITED.

AREAS CALCULATED BY COORDINATE METHOD

NO ON-SITE DEMOLITION OR STUMP BURIAL WILL BE ALLOWED. ALL MATERIALS WILL BE DISPOSED OF IN AN APPROVED OFF-SITE LANDFILL.

THERE WILL BE NO SANITARY SEWER, STORM DRAINAGE, AND/OR EROSION CONTROL FACILITIES IN THE 100'

PROPERTY ZONED MX-1 REZONING PETITION # 2003-024
MIN FRONT SETBACK 20'
MINIMUM SIDEYARD SETBACK 5'
MINIMUM REAR YARD 30'

NO DWELLING UNITS MAY BE LOCATED WITHIN THE REQUIRED SHORELINE BUFFER THE 50' ADDITIONAL SHORELINE BUFFER OR THE RESTRICTED ZONE.

MAXIMUM IMPERVIOUS COVER WILL BE LIMITED TO 12% ON THESE LOTS

SANCTUARY BUFFER ZONE NOTES:
A PORTION OF THESE LOTS ARE WITHIN THE 50 FOOT LOWER LAKE WYLIE WATERSHED OVERLAY DISTRICT CRITICAL AREA THE AREAS IDENTIFIED REPRESENT A 50' UNDISTURBED VEGETATIVE BUFFER ADJACENT TO THE SHORELINE OF LOWER LAKE WYLIE AND MEASURED FROM THE FULL POND ELVEATION (570 FOOT CONTOUR). NO CLEARING, NO SELECTIVE THINNING, REMOVAL OF UNDERGROWTH OR 2" CALLIPER TREE IS ALLOWED AND ONLY DEAD TREES MAY BE REMOVED IN THIS AREA. THIS AREA SHALL CONFORM TO THE CHARLOTTE CODE SECTION 10.7 LOWER LAKE WYLIE WATERSHED OVERLAY.

TREE SAVE ARE PER THE REQUIREMENTS OF THE CITY OF CHARLOTTE TREE ORDINANCE, CHAPTER 21 CITY CODE.

| CURVE TABLE | | | | | |
|---|---|---|---|---|---|
| CURVE | RADIUS | LENGTH | CHORD | BEARING | DELTA |
| C32 | 525.00 | 138.94 | 138.53 | N14°20'21"E | 15°09'46" |

Surveyed Location Fema Floodplain Boundary Line Per Fema Community FEMA FIRM PANELS 370158 0222E, 0221E & 0242E DATED 2-4-2004.

# SEPTIC EXHIBIT MAP FOR LOT 137

| SCALE | TOWNSHIP | COUNTY | STATE | DATE |
|---|---|---|---|---|
| 1" = 100' | STEELE CREEK | MECK. | N.C. | 05/18/07 |

LITTLE KERN LANE
LOT 137, THE SANCTUARY PH.4 MAP 2 SHEET 2

SURVEYED RH
MAPPED RAS

YARBROUGH - WILLIAMS & HOULE, INC.
Planning • Surveying • Engineering
730 Windsor Oak Court Charlotte NC 28273
P.O. BOX 7007 Charlotte NC 28241
704.556.1990 704.556.0505(fax)

MAP RECORDED
DEED RECORDED 16493-360

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

Sheet: 1 of 2
Property ID: PO 199-352-14
Lot #: 137
File #: 6944B
AppID: 1901

# SOIL/SITE EVALUATION
# for ON-SITE WASTEWATER SYSTEM

Owner: The Sanctuary of Lake Wylie
Applicant: S & ME- P. Penninger
Address: 11104 Limehurst Place, Charlotte, N. C. 28278
Date Evaluated: 5/22/07
Proposed Facility: Residence
Design Flow (.1949): 600gpd
Property Size: .5a inv.
Location of Site: Nine Eagles Lane
Property Recorded:
Water Supply: [ x ] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [ ] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [ x ] Sewage [ ] Industrial Process [ ] 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 | Profile Class & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| 1 | LS, 15 | 0-2 | GR/CL | FR/SEXP/SS/SP | >52" TO SOIL WETNESS | 52+ | N/A | NONE | PS, IV .3GPD/FT$^2$ |
| | | 2-29" | ABK/SBK/C | FI/SEXP/S/P | | | | | |
| | | 29-52 | SBK/ABK/CL | FR/SEXP/SS/SP | | | | | |
| 2 | " | 0-12 | GR/SCL | " | >54" TO SOIL WETNESS | 54+ | " | " | " |
| | | 12-39 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 39-54 | SBK/CL | FR/SEXP/SS/SP | | | | | |
| 3 | LS, 29 | 0-18 | GR/SCL | " | >48" TO SOIL WETNESS | 48+ | " | " | " |
| | | 18-36 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 36-48 | SBK/CL | FR/SEXP/SS/SP | | | | | |
| | | | | | SITE LTAR .3GPD/FT$^2$ | | | | |

| Description | Initial System | Repair System |
|---|---|---|
| Available Space (.1945) | | |
| System Type(s) | | |
| Site LTAR | | |

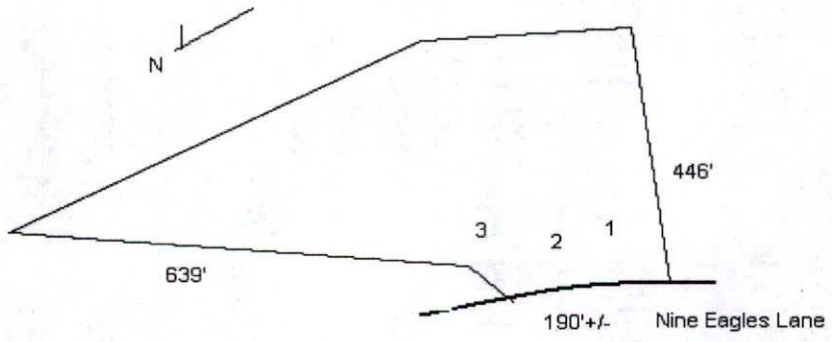
Other Factors (.1946):
Soil Evaluation By: W. R. Marlin, LSS, 5/22/2007,
Others Present: T. Beauregard, P. Penninger
Site Classification (.1948):
Site Evaluation By:
Others Present:

**COMMENTS:**
100% repair

| 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-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 | | | | |
| FP-Flood Plain | | CL-Clay Loam | | |
| | | 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**



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 #: **30001901** GWS File #: **6944B** Tax Parcel #: **199-352-14**

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- 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.

VOID

**I. This Improvement Permit Shall:** Expire in Five (5) Years **Expiration Date (If Applicable):** 6/26/2012

Type of Installation: Residential - New System Lot Number: 137

Structure Type: HOUSE Size ($ft^2$): 4500 # Bedrooms: 5 # Occupants: 10

Building Foundation: Basement With Plumbing Water Supply: Municipal

**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: Patrick Mitchell

Signature: Chris M Sherrill Signature: Patrick Mitchell

Print Name

Date Issued: 6/26/2007

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 #: **30001901** GWS File #: **6944B**

**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: Chris Sherrill

Date Issued: 6/26/2007

Owner/Legal Agent: Patrick Mitchell
Print Name

Signature: Patrick Mitchell

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

Sheet: 1 of 2
Property ID: PO 199-352-14
Lot #: 137
File #: 6944B
AppID: 1901

# SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: The Sanctuary of Lake Wylie
Address: 11104 Limehurst Place, Charlotte, N. C. 28278
Proposed Facility: Residence Design Flow (.1949): 600gpd
Location of Site: Nine Eagles Lane
Water Supply: [ x ] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [ ] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [ x ] Sewage [ ] Industrial Process [ ] Mixed

Applicant: S & ME- P. Penninger
Date Evaluated: 5/22/2007
Property Size: .5a inv.
Property Recorded:

| 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 | Profile Class & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| 1 | LS, 15 | 0-2 | GR/CL | FR/SEXP/SS/SP | >52" TO SOIL WETNESS | 52+ | N/A | NONE | PS, IV .3GPD/FT$^2$ |
| | | 2-29" | ABK/SBK/C | FI/SEXP/S/P | | | | | |
| | | 29-52 | SBK/ABK/CL | FR/SEXP/SS/SP | | | | | |
| 2 | " | 0-12 | GR/SCL | " | >54" TO SOIL WETNESS | 54+ | " | " | " |
| | | 12-39 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 39-54 | SBK/CL | FR/SEXP/SS/SP | | | | | |
| 3 | LS, 29 | 0-18 | GR/SCL | " | >48" TO SOIL WETNESS | 48+ | " | " | " |
| | | 18-36 | SBK/C | FI/SEXP/S/P | | | | | |
| | | 36-48 | SBK/CL | FR/SEXP/SS/SP | | | | | |
| | | | | | SITE LTAR .3GPD/FT$^2$ | | | | |

| Description | Initial System | Repair System |
|---|---|---|
| Available Space (.1945) | PS | PS |
| System Type(s) | IIIb | IV a |
| Site LTAR | .3 gpd/ft2 | .3 gpd/ft2 |

Other Factors (.1946):
Soil Evaluation By: W. R. Marlin, LSS, 5/22/2007,
Others Present: T. Beauregard, P. Penninger
Site Classification (.1948): PS
Site Evaluation By: C.Sherrill
Others Present: P.Penninger

**COMMENTS:**
100% repair

| 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-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 | | | | |
| FP-Flood Plain | | CL-Clay Loam | | |
| | | 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**

