

5625 LINDA VISTA LN

03732135

1/4/2008

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 4292-B DATE: 8-900

TC: 037-32135 ☐ L ☒ CRT

SERIAL Nº 17637

Name of Owner Rick Gelsinger Juris.: _____

Address of Property 5625 Linda Vista Lane

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400

Number of Lines 3WL @ 4SL
135' 270'

Cover Depth 24"

Water Supply Source well

Distance to Water Source 100'+

Excavation Inspected 8-9-00

Tank(s) Inspected 9-9-00

Wash Line Inspected ✓

High Water Alarm Inspected ✓

PLOT

Design 2000 1500 ST 1200SFT 12G CELIC CTR# B-9 M

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 I5A 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 I5A 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 II

Kelly Rawls
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

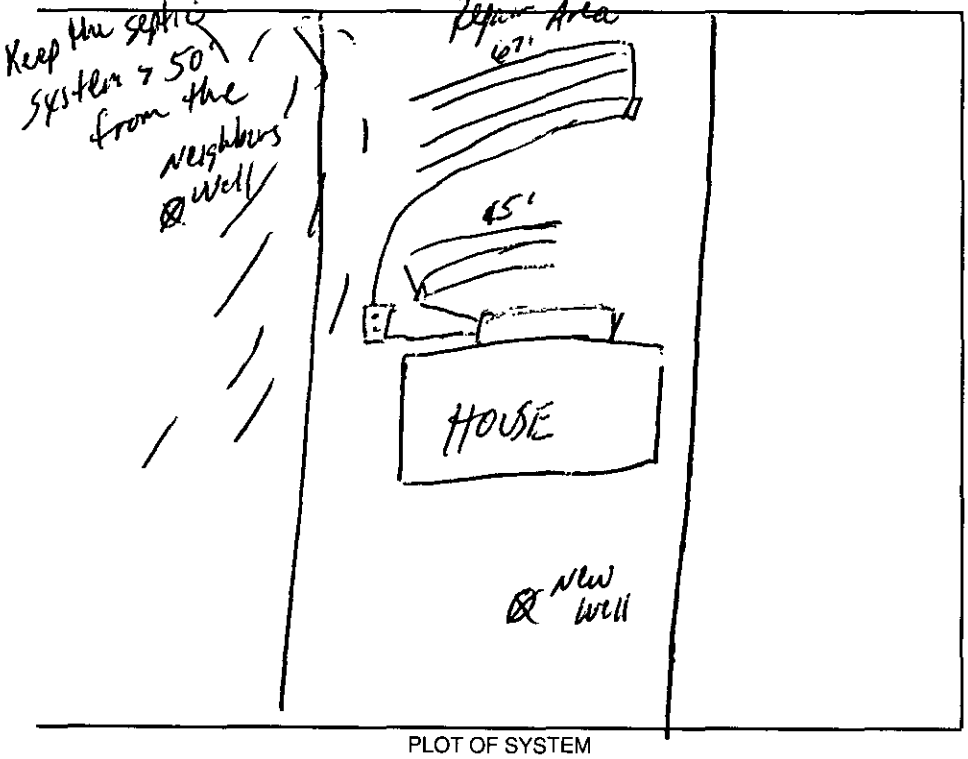
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 4292B DATE: 7/7/00

TC: 037 321 35 DL

SERIAL Nº 18473

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 4/17/00. All work shall be completed on or before 8/7/00, 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank PCC gallons

Tank Construction PCC

Trench Depth 24"

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Trench Walls Scored and Porous Yes

Total Line Length WL 135 + SL 270 feet

Number of Lines 3 WL 4 SL

Depth of Stone 12" inches

Distance from House 5' feet

Distance from Property Line 10' feet

Distance from Well > 50' feet

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

NAME OF OWNER Rick Gelsinger

LOCATION OF PROPERTY 5625 Linda Vista LN

Comments: 1500ST, Washer line 3 lines x 45'long x 3'wd x 12"Stone | Septic line 4 lines x 67'long x 3'wd x 12"Stone | Keep the septic system > 50' from the neighbors well.

Phillip S. Walker RS.

Environmental Health Specialist

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

Rec'd per Act X 31890

FEE: $280.00 AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION
DATE: 4/26/00 gc VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

DATE: 4/24/2000 PERMIT NO: 4292B

PARCEL NO: 037 321 35

JOB LOCATION ADDRESS: 5625 Linda Vista Ln

PROPERTY OWNER: Rick Gelsinger

BUILDING CONTRACTOR: " "

SUBDIVISION NAME: —

AUTHORIZATION ISSUED BY: Philo S Walker RS. DATE: 4/24/2000

DEHNR AUTHORIZED AGENT

Reviewed on Survey Folder

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 4292B, 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: _____

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.

George R Gelsinger 4-26-00

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

MECKLENBURG COUNTY
ENGINEERING & BUILDING STANDARDS DEPARTMENT

Miscellaneous Fees

Requestor (Please print): George R. Collinson	Phone #: 525-3256	Date Requested: 4/26	Date Filled: 4/26
Account Name: Collinson Builders	☐ Cash ☑ Charge	Account No.: X 31890	

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

Signature: [signature] Printed Name: Date:

Fee or Charge

T.C.	Qty.	Type	Unit Cost	Total Cost
021		Single Lot Grading Permit (Please list address below)		
112		Zoning Board of Adjustment ☐ Residential Variance Request ☐ Commercial Variance Request ☐ Residential Interpretation ☐ Commercial Interpretation		
113		*Zoning Citation(s) #* _____		
		☐ 117: Certificate of Compliance* ☐ 118: Certificate of Occupancy* (original is free)	$10.00 ea.	
119		Change of Contractor*	$10.00 ea.	
121		Letters of Certification/Verification	$10.00 ea.	
122		Monthly Statistical Reports	$10.00 ea.	
124		Research & Retrieval of Documents		
125		Temporary Utilities/Occupancy*	$30.00/insp.	
		Local License Card/Exam ☐ 128: Mechanical ☐ 129: Plumbing ☐ 132: Electrical		
		Development Activities Plan Review ☐ 002: Commercial Drainage ☐ 005: Erosion Control ☐ 016: Subdivision ☐ 006: Final Plat Review		
425		City of Charlotte Fire - Plan Review		
		Map Sales		
734	1	Other: Built to Coat	150	150
703	1	Other: Footer 100	150	150
Payment received by: [signature]		Date: 4/26/00 By: GC	Total:	300.00

* Please list all permit numbers/addresses that relate to your request. A request for temporary utilities (gas and electric) would require two permit numbers.

5425 Linda Vista Ln		

B-216NS 8/95

WHITE – AUDIT CANARY – CUSTOMER PINK – DIVISION

Permit Number 4292B

CONDITIONS OF IMPROVEMENT PERMIT

Tax Number 037 321 35

- The 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	360 Max gallons/day wastewater flow	1200 Absorption Area (sq ft)	9' Trench spacing (min. on centers)
Yes Serviced by private well	1500 Gallon septic tank	400' Total trench length (ft)	24" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
3 Bedrooms in residence	NA Gallon pump tank	12" Depth of stone	

Any surface waters present: NO Type: Minimum separation distance:

Site modifications required:

Additional Conditions: Keep the septic system > 50' from any wells. Split system w/ washer line. See plot plan

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

1200 Absorption Area (Sq ft) 400' Total Trench Length (Ft)	12" Depth of Stone Trench	9' Trench spacing (min. on centers)	24" 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 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 e 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 Departm
- This Improvement permit is transferable.

Richard S Walker RS 4/24/2000
DEHNR Authorized Agent Date

[signature] 4-24-00
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

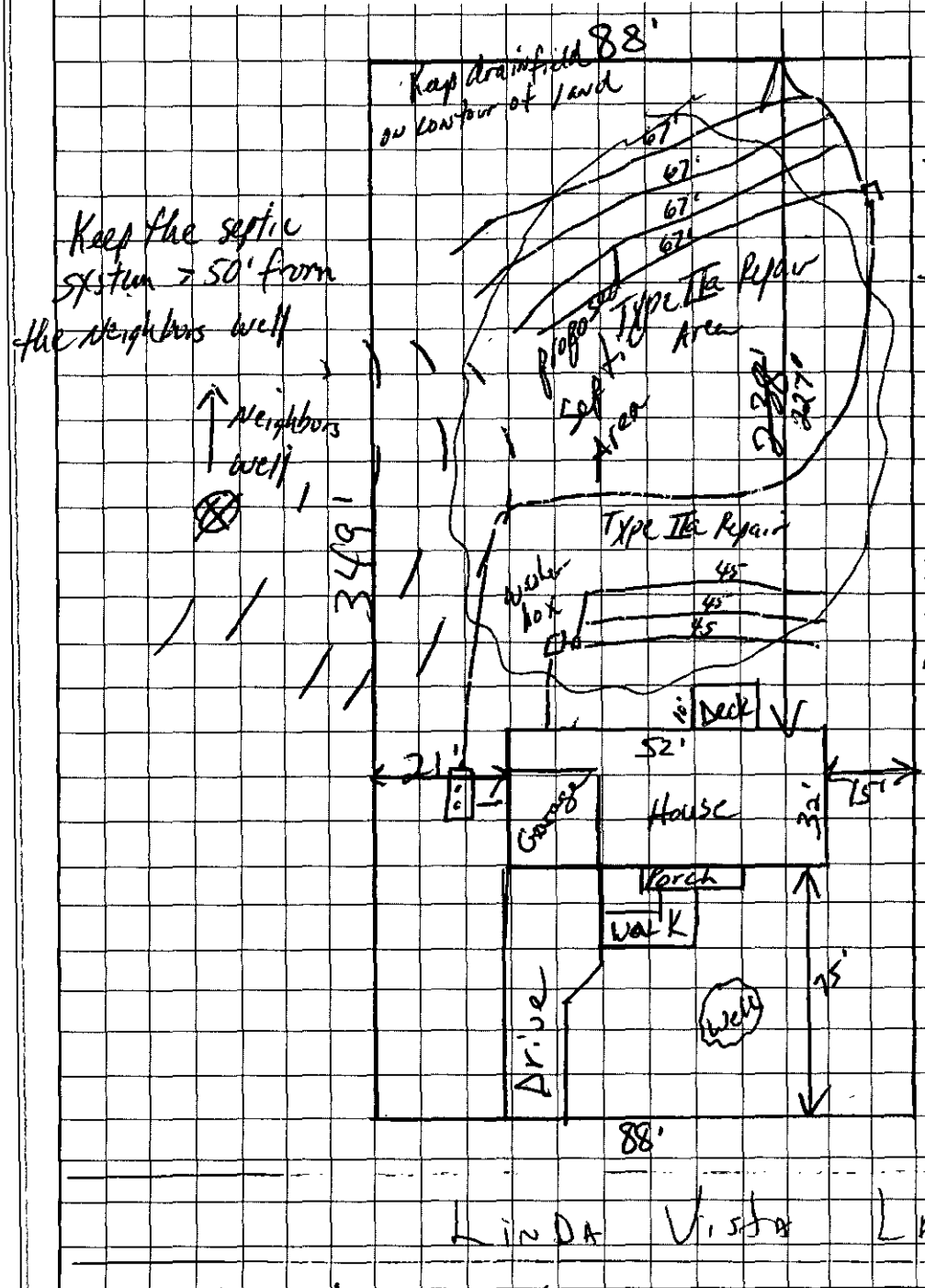
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 4292B

TC: ~~037-035-20 PP~~ 037-321-35

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



3 Bedroom House

COMMENTS

1500 SF.
Septic 4 lines x 67'long x 3'wd x 12" stone 26B

Washer washer box, 3 lines x 45'long x 3'wd x 12" stone
135' 403 LF

Keep the septic system > 50' from the neighbors well + proposed well

Type IIa Repair Area
21' from the back left house corner to the left property line.
227' from the back right house corner to the back property line

Donald R. Kelsinger Jr.
4-20-00

LINDA VISTA LANE

Donald R. Kelsinger Jr.
OWNER/AGENT SIGNATURE

DATE 4-17-00

APPROVAL DATE RNW 4/24/00

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

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

Sheet: _____

Property ID: 03 7-321-35

Lot #: 12

File #: 4292B

#7

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Gelsenger Builders APPLICANT: Rick Gelsenger

ADDRESS: 459 Patrick Road, Hartsville DATE EVALUATED: 4-17-00

PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949) 360gpd PROPERTY SIZE: .70

LOCATION OF SITE: 5625 Linda Vista Lane PROPERTY RECORDED: _____

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

EVALUATION METHOD: ☒Augur Boring ☐Pit ☐Cut

TYPE OF WASTEWATER: ☒Sewage ☐Industrial Process ☐Mixed

PROFILE #	Slope 5-12% .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	0-4"	gr/cl	Fr/SEXPl/SS/SP	>48" TO soil wetness	48"	N/A	None	PS .391 F_2 IV
		4-48"	SBK/C	Fi/SEXPl/SP					
2	LS	0-6"	gr/cl	Fr/SEXPl/SS/SP	>48" TO soil wetness	48"	N/A	None	PS .391 F_2 IV
		6-48"	SBK/C	Fi/SEXPl/SP					
3	LS	0-5"	gr/cl	Fr/SEXPl/SS/SP	>48" TO soil wetness	48"	N/A	None	PS .391 F_2 IV
		5-48"	SBK/C	Fi/SEXPl/SP					
4	LS	0-2"	gr/cl	Fr/SEXPl/SS/SP	>48" TO soil wetness	48"	N/A	None	PS .391 F_2 IV
		2-48"	SBK/C	Fi/SEXPl/SP					
5	LS	0-26"	SBK/C	Fi/SEXPl/SP	>48" TO soil wetness	48"	N/A	None	PS .39 F_2 IV
		26-48"	SBK/CL	Fr/SEXPl/SS/SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	US
System Type(s)		
Site LTAR	.391 F_2	.391 F_2

OTHER FACTORS (.1946): Unsuitable

SITE CLASSIFICATION (.1948): ~~with Marks LSS 4-16-00~~

EVALUATED BY: M. A. Marks LSS 4-16-00

OTHER(S) PRESENT: A. Gelsenger

FILE # 429213

COMMENTS 100% Repair

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR
R-RIDGE	I	S-SAND	1.2-0.8
S-SHOULDER SLOPE		LS-LOAMY SAND	
L-LINEAR SLOPE			
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6
N-NOSE SLOPE		L-LOAM	
H-HEAD SLOPE			
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM	
T-TERRACE		CL-CLAY LOAM	
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM	
	IV	SC-SANDY CLAY	0.4-0.1
		SIC-SILTY CLAY	
		O-ORGANIC	

CONSISTENCE MOIST	CONSISTENCE WET
VFR-VERY FRIABLE	NS-NON-STICKY
FR-FRIABLE	SS-SLIGHTLYSTICKY
FI-FIRM	S-STICKY
VFI-VERY FIRM	VS-VERY STICKY
EFI-EXTREMELY FIRM	NP-NON-PLASTIC
	SP-SLIGHTLYSTICKY
	P-PLASTIC
	VP-VERY PLASTIC

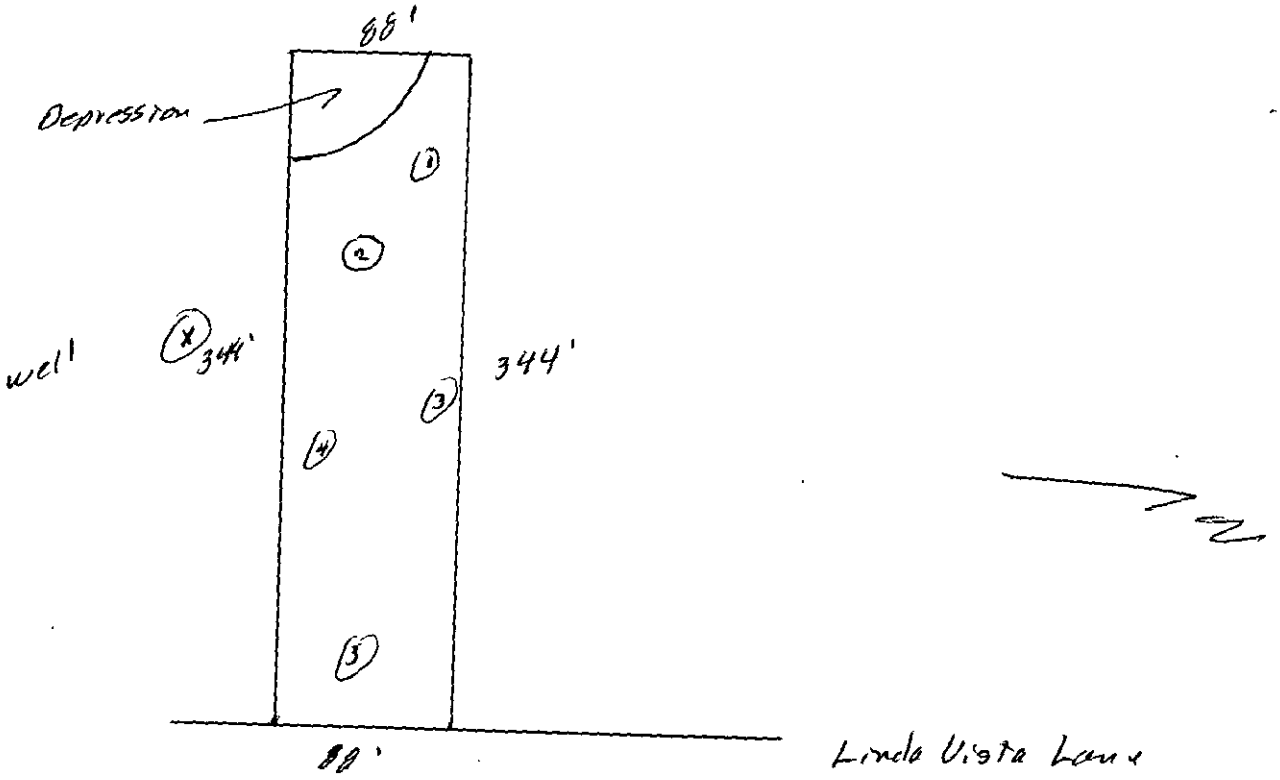
STRUCTURE

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

MINERALOGY

SLIGHTLY EXPANSIVE

EXPANSIVE



MECKLENBURG COUNTY
ENGINEERING & BUILDING STANDARDS DEPARTMENT

Miscellaneous Fees

Requestor (Please print): Kolsinger Builders	Phone # 537-3256	Date Requested:	Date Filled:
Account Name: Kolsinger Builders	☐ Cash ☒ Charge	Account No.: B 93990	

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

Signature: George R Kolsinger Jr. Printed Name: George R Kolsinger Jr. Date: 4-17-00

Fee or Charge

T.C.	Qty.	Type	Unit Cost	Total Cost
021		*Single Lot Grading Permit* (Please list address below)		
112		Zoning Board of Adjustment ☐ Residential Variance Request ☐ Commercial Variance Request ☐ Residential Interpretation ☐ Commercial Interpretation		
113		Zoning Citation(s) # _____		
		☐ 117: Certificate of Compliance* ☐ 118: *Certificate of Occupancy** (original is free)	$10.00 ea.	
119		Change of Contractor*	$10.00 ea.	
121		Letters of Certification/Verification	$10.00 ea.	
122		Monthly Statistical Reports	$10.00 ea.	
124		Research & Retrieval of Documents		
125		Temporary Utilities/Occupancy*	$30.00/insp.	
		Local License Card/Exam ☐ 128: Mechanical ☐ 129: Plumbing ☐ 132: Electrical		
		Development Activities Plan Review ☐ 002: Commercial Drainage ☐ 005: Erosion Control ☐ 016: Subdivision ☐ 006: Final Plat Review		
425		City of Charlotte Fire - Plan Review		
		Map Sales		
1701	1	Other: New Improvement	200.00	200.00
		Other:		
Payment received by: Gina Craig		Date: 4/17/00 By: JC	Total:	200.00

* Please list all permit numbers/addresses that relate to your request. A request for temporary utilities (gas and electric) would require two permit numbers.

5625 Linda Vista Ln		

B-216NS 8/95

WHITE – AUDIT CANARY – CUSTOMER PINK – DIVISION

FEE: 300.00 on Acct B53990

DATE: 4/17/00 pc

APPLICATION FOR IMPROVEMENT PERMIT FOR RESIDENTIAL SITE INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM

1 | CRT

TYPE APPLICATION: ✓ NEW SYSTEM __ EXPANSION/ ALTERATION 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 #: 4292-B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: ~~037-032-20~~ 5625 Cinda Vista Ln

STREET ADDRESS: 037-321-35

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: # 12

TYPE OF BUILDING (CHECK ONE):

__ SINGLE MOBILE HOME(S)
__ DOUBLE WIDE (D)
✓ HOUSE (H)
__ MODULAR HOME (M)
__ MULTIPLE FAMILY (U)
__ OTHER (O)

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 1621

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS:

CLOSING DATE

FOUNDATION FOR RESIDENCE: Slab

__ WITHOUT BASEMENT
✓ ON SLAB
__ CRAWL SPACE
__ WITH BASEMENT /PLUMBING
__ WITH BASEMENT /NO PLUMBING

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: __ YES ✓ NO TYPE:

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
EXISTING WASTEWATER SYSTEMS __ YES ✓ NO
EASTMENTS OR RIGHT-OF-WAYS __ YES ✓ NO
WELL, SPRINGS OR WATERLINES __ YES ✓ NO
DESIGNATED WETLANDS __ YES ✓ NO

PROPERTY OWNER Gelsinger Builders

NAME: (LAST) Gelsinger (FIRST) (MI) Builders

ADDRESS: 459 Patrick Rd.

CITY: Gastonia STATE: N.C ZIP: 28054

DAYTIME PHONE: 704 854-3256 or 363-1518

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) Gelsinger (FIRST) Rick (MI)

DAYTIME PHONE: ( ) 363-1518

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. 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: Rick Gelsinger DATE: 4-17-00

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

DEPARTMENT OF ENVIRONMENTAL HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

#2

Sheet: ____

Property ID: 023-321-35

Lot #: 12

File #: 4292B

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Helsinger Builder APPLICANT: Rick Helsinger

ADDRESS: 459 Patricia Road, Martinez DATE EVALUATED: 4-17-00

PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949) 360gpd PROPERTY SIZE: .70

LOCATION OF SITE: 5625 Linda Vista Lane PROPERTY RECORDED: ____

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

EVALUATION METHOD: ~~Augur Boring~~ ☐Pit ☐Cut

TYPE OF WASTEWATER: ~~Sewage~~ ☐Industrial Process ☐Mixed

PROFILE #	Slope 5-13% .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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS &LTAR
1	LS	0-4"	gr/cl	Fr/SEXPI SS/SP	7 46" TO soil wetness	46"	N/A	None	PS .391 P2 IV
		4-48"	SDMIC	F:/SEXPI SIP					
2	LS	0-6"	gr/cl	Fr/SEXPI SS/SP	7 48" TO soil wetness	48"	N/A	None	PS .391 P2 IV
		6-48"	SDMIC	F:/SEXPI SIP					
3	LS	0-5"	gr/cl	Fr/SEXPI SS/SP	7 46" TO soil wetness	46"	N/A	None	PS .391 P2 IV
		5-48"	SDMIC	F:/SEXPI SIP					
4	LS	0-2"	gr/cl	Fr/SEXPI SS/SP	7 48" TO soil wetness	46"	N/A	None	PS .391 P2 IV
		2-48"	SDMIC	F:/SEXPI SIP					
5	LS	0-26"	SDMIC	F:/SEXPI SIP	7 46" TO soil wetness	46"	N/A	None	PS .391 P2 IV
		26-48"	SDM/cl	Fr/SEXPI SS/SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	US
System Type(s)		
Site LTAR	.391 P2	.391 P2

OTHER FACTORS (~~.1946~~): Unsuitable

SITE CLASSIFICATION (.1948): ~~Unsuitable~~ M. A. Martin REHS 4-16-00

EVALUATED BY: M. A. Martin REHS 4-16-00

OTHER(S) PRESENT: R. Helsinger

FILE # 479213

COMMENTS 100% Repair

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR
R-RIDGE	I	S-SAND	1.2-0.8
S-SHOULDER SLOPE		LS-LOAMY SAND	
L-LINEAR SLOPE			
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6
N-NOSE SLOPE		L-LOAM	
H-HEAD SLOPE			
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM	
T-TERRACE		CL-CLAY LOAM	
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM	
	IV	SC-SANDY CLAY	0.4-0.1
		SIC-SILTY CLAY	
		O-ORGANIC	

CONSISTENCE	
MOIST	WET
VFR-VERY FRIABLE	NS-NON-STICKY
FR-FRIABLE	SS-SLIGHTLYSTICKY
FI-FIRM	S-STICKY
VFI-VERY FIRM	VS-VERY STICKY
EFI-EXTREMELY FIRM	NP-NON-PLASTIC
	SP-SLIGHTLYSTICKY
	P-PLASTIC
	VP-VERY PLASTIC

STRUCTURE

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

MINERALOGY

SLIGHTLY EXPANSIVE

EXPANSIVE

