No charge per Kelly. Already Paid on 5/3/07 # 23660 LD 23200

FEE: (0)
DATE: 6/5/07
CRT [ ]

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM
MECKLENBURG COUNTY - GROUNDWATER & WASTEWATER SERVICES
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

GWS – UES.APP 01/05

FILE #: 11687

TYPE APPLCATION:

☐ ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A / M)
☐ ADDITION - RENOVATION OR GARAGE WITH NO MAJOR CHANGES (X)
☐ EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
☐ COMMERCIAL OR INDUSTRIAL (N)

PERSON FILING APPLICATION:

NAME: Paul A. McGill
ADDRESS: 1525 N. Hoskins Rd
CITY: Charlotte
STATE: NC ZIP: 28216
PHONE: 704-344-1331
ALTERNATE PHONE: 704-651-5960

PROPERTY OWNER:

NAME: Paul A. McGill
ADDRESS: 1525 N. Hoskins Rd.
CITY: Charlotte, NC
STATE: NC ZIP: 28216
PHONE: 704-344-1331
ALTERNATE PHONE: 704-651-5960

JOB LOCATION INFORMATION

TAX/PARCEL #:
STREET ADDRESS: 9640 Soldier Rd.
CITY: Charlotte
STATE: NC ZIP: 28278
SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #:

TOWNSHIP:

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

WATER SUPPLY:

☐ MUNICIPAL (M) ☐ COMMUNITY (C) ☒ PRIVATE WELL (P) ☒ SHARED WELL (S) ☐ OTHER 'SPRINGS' (O)

RESIDENTIAL PROPERTY TYPE:

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

NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 2

COMMERCIAL / INDUSTRIAL PROPERTY TYPE:

TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:

INDUSTRIAL WASTES? ☐ YES ☐ NO
UNDERGROUND STORAGE TANKS? ☐ YES ☐ NO

ADDITION TYPE ATTACHED TO EXISTING STRUCTURE:

☐ BEDROOM ☐ BATHROOM ☐ KITCHEN ☐ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☐ SUNROOM ☐ PORCH ☐ DECK ☐ OTHER ~~Boat House~~ error

ADDITION TYPE DETACHED FROM EXISTING STRUCTURE:

☐ DETACHED GARAGE ☐ DETACHED GARAGE WITH PLUMBING ☐ POOL HOUSE ☐ SHOP ☐ BARN
☐ STORAGE SHED ☐ DETACHED PORCH / DECK ☐ OTHER ☒ Boat House

*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 — Date: 6/5/07

*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 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 y this Department.
- This permit is not transferable.

☐ ADDITION / RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE
☐ MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE

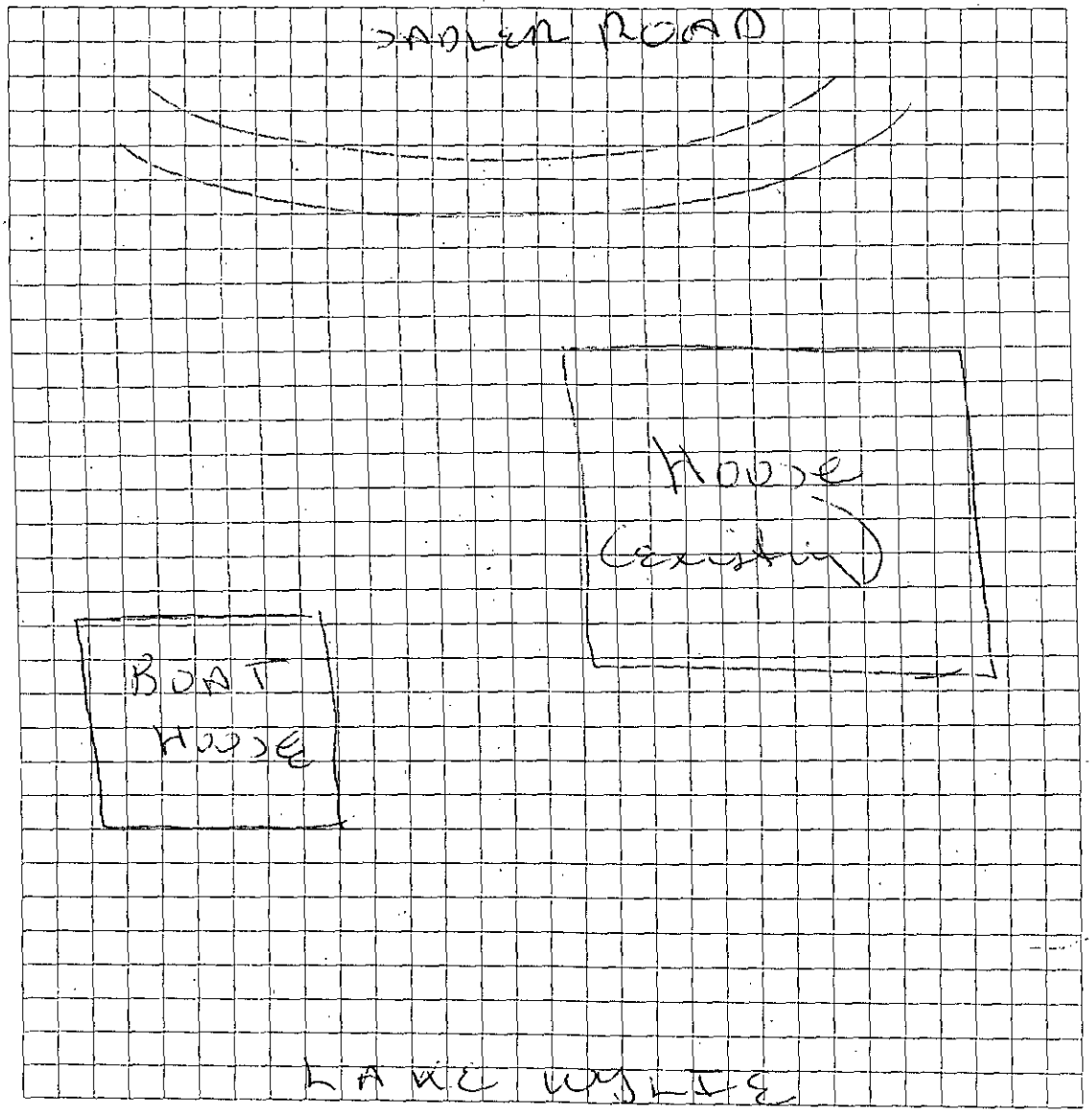
EHS Signature — Date

Mecklenburg County
Land Use & Environmental Service Agency
Groundwater & Wastewater Services
700 N. Tryon St., Suite 211
Charlotte, NC 28202
Phone: (704) 336-5103
Fax: (704) 336-6894

File #_____
Date_____

PROPOSED PLOT PLAN

A map showing existing and proposed property lines and easements with dimensions, the location of the single family residence, non-single family residence, or other facility, and appurtenances, the site for the proposed well, and the location of existing or proposed sewer lines and/or sewage disposal systems, surface water bodies, aboveground or underground storage tanks. Name all roads adjoining the property. If this a repair indicate the type of repair.



Owner/Agent Signature [signature]

Date 6/5/07

LBC 12/15/04

MECKLENBURG COUNTY

Land Use & Environmental Services Agency
Groundwater & Wastewater Services

October 16, 2008

Paul A. McGill
1525 North Hoskins Road
Charlotte, NC 28216

Re: Application for approval to use an existing on-site wastewater treatment & disposal system.
Property Location: 2640 Sadler Road
Health Department file number: 11687

Dear Property Owner or Owner's Agent:

On June 5, 2007 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 June 5, 2007, 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,

Chris Sherrill,RS,LSS
Environmental Specialist

Encl: (1) Application

X39323 PSW garage → LD 23[illegible]2007 ~~house → 23[illegible]2006~~

FEE: 100.00
DATE: 5/3/07
CRT I X39323 JHA

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM
MECKLENBURG COUNTY - GROUNDWATER & WASTEWATER SERVICES
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

GWS – UES.APP 01/05

FILE #: 11687

TYPE APPLCATION: 2242

- ☐ ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A / M)
- ☐ ADDITION - RENOVATION OR GARAGE WITH NO MAJOR CHANGES (X)
- ☐ EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
- ☐ COMMERCIAL OR INDUSTRIAL (N)

PERSON FILING APPLICATION:
NAME: Paul A. McGill
ADDRESS: 1525 North Hoskins Rd
CITY: Charlotte, NC
STATE: NC ZIP: 28216
PHONE: 704 - 344 - 1331
ALTERNATE PHONE: 704 - 651 - 5460

PROPERTY OWNER:
NAME: Paul A. McGill
ADDRESS: 1525 N. Hoskins Rd.
CITY: Charlotte
STATE: NC ZIP: 28216
PHONE: 704-344-1331
ALTERNATE PHONE: 704 - 651 - 5460

JOB LOCATION INFORMATION
TAX/PARCEL #:
STREET ADDRESS: 2640 Sadler Rd.
CITY: Charlotte NC
STATE: NC ZIP: 28216
SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #:

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

WATER SUPPLY:
☐ MUNICIPAL (M) ☐ COMMUNITY (C) ☑ PRIVATE WELL (P) ☐ SHARED WELL (S) ☐ OTHER 'SPRINGS' (O)

RESIDENTIAL PROPERTY TYPE:
- ☑ HOUSE (H)
- ☐ MODULAR HOME (M)
- ☐ MULTIPLE FAMILY (U)
- ☐ SINGLE MOBILE HOME (S)
- ☐ DOUBLE WIDE (D)
- ☐ OTHER (O)

NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 2

COMMERCIAL / INDUSTRIAL PROPERTY TYPE:
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:
INDUSTRIAL WASTES? ☐ YES ☐ NO
UNDERGROUND STORAGE TANKS? ☐ YES ☐ NO

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

ADDITION TYPE DETACHED FROM EXISTING STRUCTURE:
☐ DETACHED GARAGE ☐ DETACHED GARAGE WITH PLUMBING ☐ POOL HOUSE ☐ SHOP ☐ BARN
☐ STORAGE SHED ☐ DETACHED PORCH / DECK ☑ OTHER GARAGE

*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 — Date: ~~10~~ 5/2/07

*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 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 y this Department.
- This permit is not transferable.

☐ ADDITION / RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE
☐ MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE

OK to use existing system for garage only.

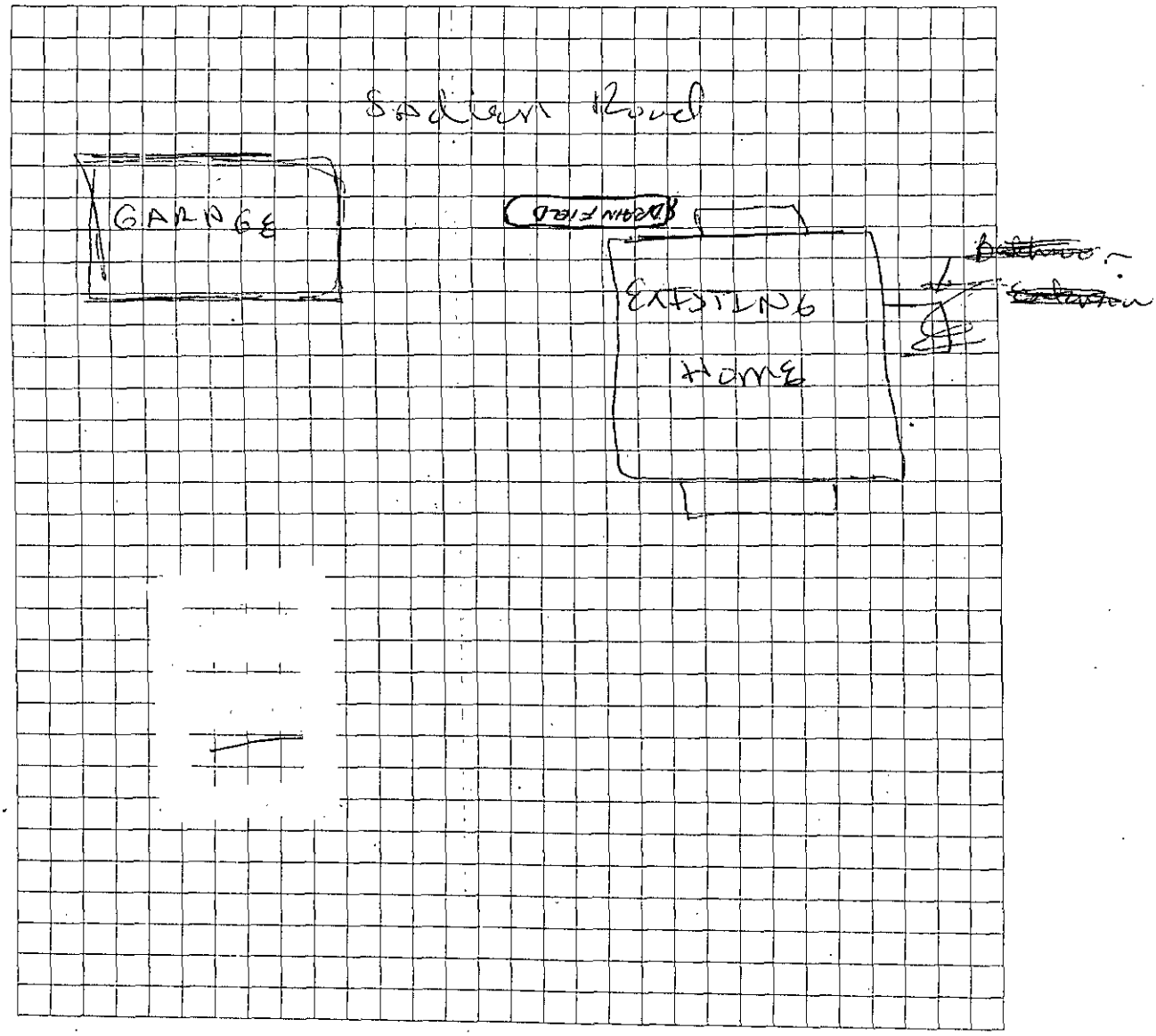
EHS Signature — Date: 6/5/07

Mecklenburg County
Land Use & Environmental Service Agency
Groundwater & Wastewater Services
700 N. Tryon St., Suite 211
Charlotte, NC 28202
Phone: (704) 336-5103
Fax: (704) 336-6894

File #_____
Date_____

PROPOSED PLOT PLAN

A map showing existing and proposed property lines and easements with dimensions, the location of the single family residence, non-single family residence, or other facility, and appurtenances, the site for the proposed well, and the location of existing or proposed sewer lines and/or sewage disposal systems, surface water bodies, aboveground or underground storage tanks. Name all roads adjoining the property. If this a repair indicate the type of repair.



Owner/Agent Signature
Date

LBC 12/15/04

FEE: 100.00
DATE: 10/4/06
CRT / INIT: MC SKA

#1522 LD 201693 LD 232001 ~~23007~~

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM
MECKLENBURG COUNTY - GROUNDWATER & WASTEWATER SERVICES
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

GWS – UES.APP 01/05

FILE #: 11687

TYPE APPLCATION:

☐ ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A / M)
☐ ADDITION - RENOVATION OR GARAGE WITH NO MAJOR CHANGES (X)
☐ EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
☐ COMMERCIAL OR INDUSTRIAL (N)

PERSON FILING APPLICATION:

NAME: Paul A. McGill
ADDRESS: 1525 N. Hoskins Rd
CITY: Charlotte
STATE: NC ZIP: 28216
PHONE: 704-394-1331
ALTERNATE PHONE: 704-651-5960

PROPERTY OWNER:

NAME: Paul A. McGill
ADDRESS: 1525 N. Hoskins Rd.
CITY: Charlotte,
STATE: NC. ZIP: 28216
PHONE: 704-394-1331
ALTERNATE PHONE: 704-651-5960

JOB LOCATION INFORMATION

TAX/PARCEL #:
STREET ADDRESS: 2640 Sadler Rd
CITY: Charlotte
STATE: NC ZIP: 28211
SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #:

TOWNSHIP:

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

WATER SUPPLY:

☐ MUNICIPAL (M) ☐ COMMUNITY (C) ☑ PRIVATE WELL (P) ☐ SHARED WELL (S) ☐ OTHER 'SPRINGS' (O)

RESIDENTIAL PROPERTY TYPE:

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

NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 2

COMMERCIAL / INDUSTRIAL PROPERTY TYPE:

TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:

INDUSTRIAL WASTES? ☐ YES ☐ NO
UNDERGROUND STORAGE TANKS? ☐ YES ☐ NO

ADDITION TYPE ATTACHED TO EXISTING STRUCTURE:

☐ BEDROOM ☑ BATHROOM Ext ☐ KITCHEN ☐ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☐ SUNROOM ☐ PORCH ☑ DECK ☐ OTHER

ADDITION TYPE DETACHED FROM EXISTING STRUCTURE:

☐ DETACHED GARAGE ☐ DETACHED GARAGE WITH PLUMBING ☐ POOL HOUSE ☐ SHOP ☐ BARN
☐ STORAGE SHED ☐ DETACHED PORCH / DECK ☐ OTHER

*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.

Paul A. McGill — Owner's/Agent's Signature
10/4/06 — Date

*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 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 y this Department.
- This permit is not transferable.

☐ ADDITION / RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE
☐ MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE

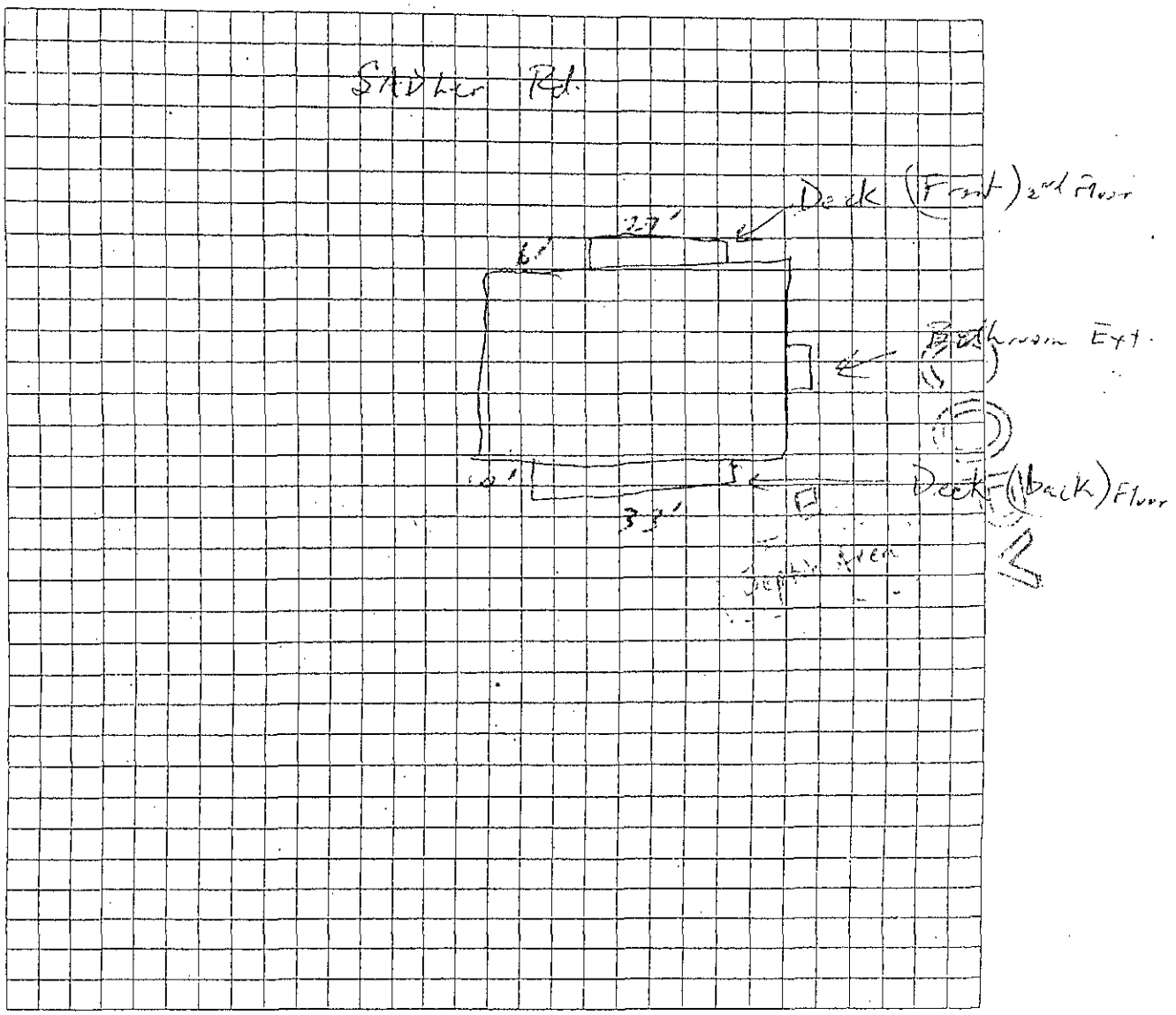
Existing approved.
Septic OK
Christopher M Sterrett 10-9-06
EHS Signature — Date

Mecklenburg County
Land Use & Environmental Service Agency
Groundwater & Wastewater Services
700 N. Tryon St., Suite 211
Charlotte, NC 28202
Phone: (704) 336-5103
Fax: (704) 336-6894

File #_____
Date_____

PROPOSED PLOT PLAN

A map showing existing and proposed property lines and easements with dimensions, the location of the single family residence, non-single family residence, or other facility, and appurtenances, the site for the proposed well, and the location of existing or proposed sewer lines and/or sewage disposal systems, surface water bodies, aboveground or underground storage tanks. Name all roads adjoining the property. If this a repair indicate the type of repair.



Owner/Agent Signature [signature]

Date 10/4/06

LBC 12/15/04

FEE: 100.00 #8399
DATE: 3/27/06
CRTIF. 1

#587

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

MECKLENBURG COUNTY - GROUNDWATER & WASTEWATER SERVICES
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

GWS – UES.APP 01/05

FILE #: 1167

TYPE APPLCATION: adding 2nd story 600 - 800 sq feet

- [x] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A / M) 2nd addition
- [ ] ADDITION - RENOVATION OR GARAGE WITH NO MAJOR CHANGES (X)
- [ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
- [ ] COMMERCIAL OR INDUSTRIAL (N)

PERSON FILING APPLICATION:

NAME: Paul A. McGill
ADDRESS: 2640 Sadler Rd
CITY: Charlotte,
STATE: NC ZIP: 2
PHONE: 704-394-1331
ALTERNATE PHONE: 704-651-5960

PROPERTY OWNER: P. 172820

NAME: Paul A. McGill
ADDRESS: 1525 N. Hoskins Rd.
CITY: Charlotte,
STATE: NC ZIP: 28211
PHONE: 704-394-1331
ALTERNATE PHONE: 704-651-5960

JOB LOCATION INFORMATION

TAX/PARCEL #: 113-271-26
STREET ADDRESS: 2640 Sadler Rd
CITY: Charlotte
STATE: NC ZIP:
SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #: 39 sec 36 ; 943

TOWNSHIP:

- [x] 0-MECKLENBURG
- [ ] 1-CHARLOTTE
- [ ] 2-DAVIDSON
- [ ] 3-CORNELIUS
- [ ] 4-PINEVILLE
- [ ] 5-MATTHEWS
- [ ] 6-HUNTERSVILLE
- [ ] 7-MINT HILL

WATER SUPPLY:

- [ ] MUNICIPAL (M)
- [ ] COMMUNITY (C)
- [x] PRIVATE WELL (P)
- [ ] SHARED WELL (S)
- [ ] OTHER 'SPRINGS' (O)

RESIDENTIAL PROPERTY TYPE:

- [x] HOUSE (H)
- [ ] MODULAR HOME (M)
- [ ] MULTIPLE FAMILY (U)
- [ ] SINGLE MOBILE HOME (S)
- [ ] DOUBLE WIDE (D)
- [ ] OTHER (O)

NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 2

COMMERCIAL / INDUSTRIAL PROPERTY TYPE:

TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:

INDUSTRIAL WASTES? [ ] YES [ ] NO
UNDERGROUND STORAGE TANKS? [ ] YES [ ] NO

ADDITION TYPE ATTACHED TO EXISTING STRUCTURE:

- [x] ~~BEDROOM~~
- [x] BATHROOM
- [ ] KITCHEN
- [ ] DINING ROOM
- [x] LIVING ROOM
- [ ] DEN
- [ ] GARAGE
- [ ] SUNROOM
- [ ] PORCH
- [ ] DECK
- [x] OTHER Sitting Area

ADDITION TYPE DETACHED FROM EXISTING STRUCTURE:

- [ ] DETACHED GARAGE
- [ ] DETACHED GARAGE WITH PLUMBING
- [ ] POOL HOUSE
- [ ] SHOP
- [ ] BARN
- [ ] STORAGE SHED
- [ ] DETACHED PORCH / DECK
- [ ] OTHER

*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.

Paul A. McGill — Owner's/Agent's Signature
3/27/06 — Date

*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 in effect at the time of issuance of the permit and is subject to the following provisions:

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- This permit is not transferable.

- [ ] ADDITION / RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE
- [ ] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE

Septic OK. No sign of malfunction

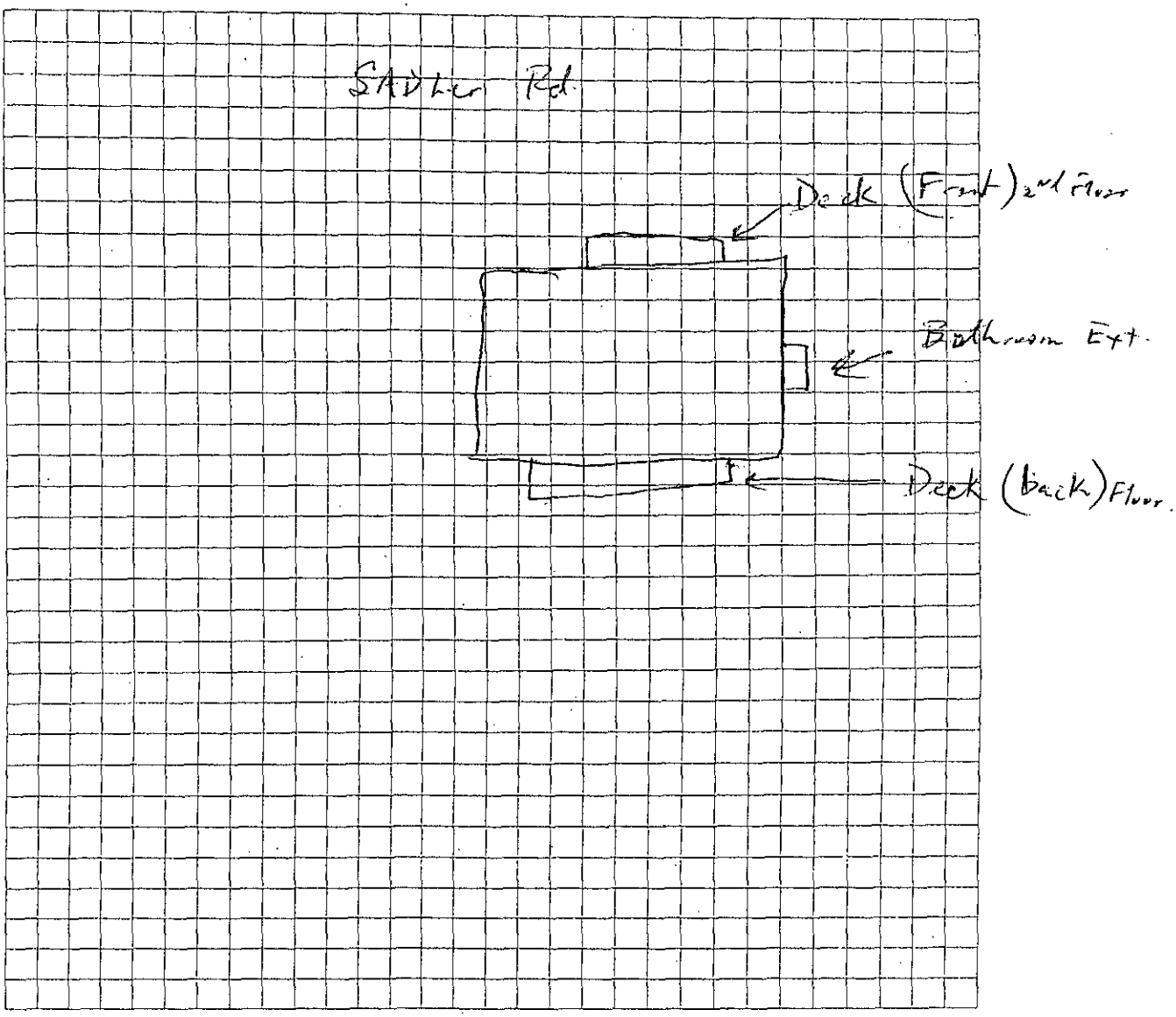
EHS Signature — Date: ESPES 3/31/06

Mecklenburg County
Land Use & Environmental Service Agency
Groundwater & Wastewater Services
700 N. Tryon St., Suite 211
Charlotte, NC 28202
Phone: (704) 336-5103
Fax: (704) 336-6894

File #_____
Date_____

PROPOSED PLOT PLAN

A map showing existing and proposed property lines and easements with dimensions, the location of the single family residence, non-single family residence, or other facility, and appurtenances, the site for the proposed well, and the location of existing or proposed sewer lines and/or sewage disposal systems, surface water bodies, aboveground or underground storage tanks. Name all roads adjoining the property. If this a repair indicate the type of repair.



Owner/Agent Signature	Thomas A. Mayfield
Date	10/4/06

LBC 12/15/04