Mecklenburg County Groundwater & Wastewater Services 3205 Freedom Dr., Suite 8000 Charlotte, NC 28208 Phone: (980) 314-1680 Fax: (704) 336-6894



NC DHHS
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #:	30014305			GWS File	le #:	9100B		Tax Parcel #:	053-221	<u>-17</u>
• CC dis	ading, filling, on ONSTRUCTION Sturb soil prior	or disturbance ON AUTHORIZ r to obtaining a	of the soil in ZATION must a Construction	the area of be obtaine Authoriza	f the sep ed prior to ation.	tic tank system	or repair a uilding Per	mit. Do not clea		
I. This Improvement Permit Shall: Expire in Five (5) Years Type of Installation: Residential - New System						Expiration Date (If Applicable): 1/24/2029 Lot Number: 0				
Structure Type: HOUSE Size (ft ²)					0	# Bedroon	Max. Occup.: 6			
Building Foundation: Concrete Slab								Water Supp	ly: Munic	ipal
II. Initial System Type: Accepted Initial System Specifications:					System Classification: IIIg					
700 S 20 S	ow (gpd): 36		AR (gpd/ft ²):	0.225	Septic	Гапк Size (gal):	1000	Pump Tank	Size (gal):	N/A
Trench \	Nidth (ft): 3	Trench 5	Spacing (ft):	9	Absorp	tion Area (ft ²):	1200	Total Trench Le	enath (ft):	400
	Trench Dept			f Media (in		70 8		ce: Drop Boxes	ingur (it).	
III. Repair System Type: Accepted System Classification: IIIg										
Repair Sys	tem Specifica	tions:								
Design Fl	ow (gpd): 36	0 LTA	AR (gpd/ft ²):	0.225	Septic 7	Гапк Size (gal):	1000	Pump Tank	Size (gal):	N/A
Trench \	Width (ft): 3	Trench S	Spacing (ft):	9	Absorp	tion Area (ft ²):	1200	Total Trench Le	ength (ft):	400
Maximum	Trench Dept	h (in): 26	Depth o	f Media (in	1): 12	Distrib	ution Devi	ce: Drop Boxes		
IV. Permit	Condition	s/Comments	s:							
(Please	See the Fol	lowing Page	for Permit C	Conditions	s.)					
issuing a	an IMPROV	EMENT PER	MIT for the	above ref	ference	d property. Thi	is permit	es that the Dep is being issued act to the follow	d in accor	dance
t • 7 (he Departm The septic sy Contractor Ir The permitte	ent. ystem installe ispector Cerl	er shall be a tification Boa all be install	licensed ard. ed in acco	septic o		the Nor	eeting has bee th Carolina Wa	•	ted by
Authorized Agent: Matthew Hall					Owne	r/Legal Agent:	Sanc	ira Bakah		
					OWITE	regai Agent.		nt Name		
Signatur	a Mal	- Kell			Signa	uro.				

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Date Issued: 1/24/2024

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IV. Permit Conditions/Comments:

- . All components of the septic system must be located at least 100 ft. (50 ft. minimum) from all private wells.
- The invert of the sewer pipe exiting the structrue should be kept as high as possible in order to achieve gravity flow to the drain field. A
 dosing tank will be required if gravity flow to the drain field can not be achieved.
- · Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.
- · Foundation drains shall be constructed not to discharge water onto or across any part of the septic system.
- · The septic system shall be located at least 10 feet from any foundation drain.

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, 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 a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- . The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: Matthew Hall	Owner/Legal Agent:sandra Baksh
Signature: Maff IIII	Print Name
Signature: Pul	Signature:
Date Issued: 1/24/2024	

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Comments scale 1 = 60 FILE #: 9100B 1TAR 0.225 14305 APP ID: 3 Bedroom Residence Improvement Permit Sketch 4 lives G) various lengths 6. 400 LF 75 Red votion 05322114 Municipal water 05322113 05322116 Serial / Drop Box Distribution 202 26" Treach Botton 05322124 HOO Liver 3 Red room B. C. Jet 05322212 05322213 Drawn By: 1 inch = 60 feet Date: 1/24/24 owner togal togent

PID: 053-221-12