



P.O. Box 548 Pittsboro, NC 27312 PHONE: (919) 545-8394

Fax: (919) 542-2698 • E-mail: drew.blake@chathamnc.org • Website: www.chathamnc.org

January 19, 2021

Matt Malone 574 Chatham Drive Chapel Hill, NC 27516

Project Name: Jordan Lake Buffer Confirmation Parcel # 2759

Location: <u>9555 US 15-501 N</u>

Subject Two (2) Intermittent Stream segments and one (1) perennial stream

Features: segment

Dear Mr. Malone,

Based on information which you provided on the Riparian Buffer Review Application, staff within the Watershed Protection Department completed a Riparian Buffer Review in accordance with Chatham County Watershed Protection Ordinance Section 304(B) Field Delineations and the Jordan Buffer Rules (15A NCAC 02B .0267). This Riparian Buffer Review was completed for an existing property that is identified as Parcel# 2759 that is located inside of the Jordan Lake watershed. A stream confirmation was requested due to the depiction of one (1) stream on the NRCS Soil Survey Map.

At this time, the property is only subject to the 1994 Chatham County Watershed Protection Ordinance and the Jordan Lake Buffer Rules. The 1994 Chatham County Watershed Protection Ordinance places a 50-ft buffer on all streams mapped on the USGS topographic map and a 100-ft buffer on all "rivers" and along all perennial and intermittent streams within 2,500-ft thereof. The Jordan Lake Buffer Rules place a 50-ft buffer on all intermittent and perennial streams that are shown on either the USGS topographic or NRCS Soil Survey maps.

Summary of Findings

Drew Blake completed the site review on January 15, 2021. Three (3) stream segments were observed within the reviewed area. The stream segments were scored in accordance with NC Division of Water Quality (DWQ) Methodology for Identification of Intermittent and Perennial Streams and the Origins Version 4.11. A 50-ft buffer will be required from the top of bank landward on both sides of the stream segment. The existing pond will require if the intermittent stream is found to be located within 50-ft of the pond. *Potential wetlands were observed entering the identified streams. These areas were only visually assessed as wetlands are not subject to buffers under the Jordan Buffer Rules. Should these areas be impacted in the future, we recommend contracting an environmental consultant to properly delineate the area and complete the necessary 401/404 permitting.*

Any future modifications to the property boundaries (i.e. Subdivision) will require additional reviews from the Chatham County Watershed Protection Department. These reviews may result in the identification of additional features that require buffers or an increase in the buffer width of features found during this review.

Proposed Buffer Impacts:

Submittal of a No Practical Alternatives Authorization Application, in accordance with the Jordan Buffer Rules (15A NCAC 02B .0267 (11)), must occur if this project results in impacts to riparian buffers. No





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Practical Alternatives Authorization Applications must be submitted to the Chatham County Watershed Protection Department.

This on-site determination shall expire five (5) years from the date of this letter. Landowners or affected parties that dispute a determination made by Chatham County, on parcels **outside** of the Jordan Lake watershed, may submit a request for appeal in writing to the Watershed Review Board. A request for a determination by the Watershed Review Board shall be made in accordance with Section 304 of the Chatham County Watershed Protection Ordinance. Landowners or affected parties that dispute a determination made by Chatham County, on parcels **inside** the Jordan Lake watershed, shall submit a request for appeal in writing to NC DWR, 401 & Buffer Permitting Unit, 1650 Mail Service Center, Raleigh, NC 27669-1650 attention of the Director of the NC Division of Water Quality.

Should this project result in any direct impacts to surface water features (i.e., crossing and/or filling streams or wetlands) additional reviews may be necessary. Additionally, a Section 404/401 Permit may be required. Any inquiries regarding Section 404/401 permitting should be directed to the Division of Water Resources (Central Office) at (919)-807-6364 and the US Army Corp of Engineers (Raleigh Regulatory Field Office) at (919)-554-4884.

Respectfully,

Drew Blake

Drew Blake

Senior Watershed Specialist, CESSWI





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For additional questions regarding the Watershed Protection Ordinance or Riparian Buffers please contact:

Ms. Rachael Thorn – Director Chatham County Watershed Protection Department P.O. Box 548 Pittsboro, NC 27312

Phone: (919) 545-8343

Email: rachael.thorn@chathamnc.org

For additional questions regarding soils and sanitary/septic systems please contact:

Ms. Anne Lowry Chatham County Environmental Health Department P.O. Box 130 Pittsboro, NC 27312 Phone: (919) 545-8310

Email: anne.lowry@chathamnc.org

Exhibit 1

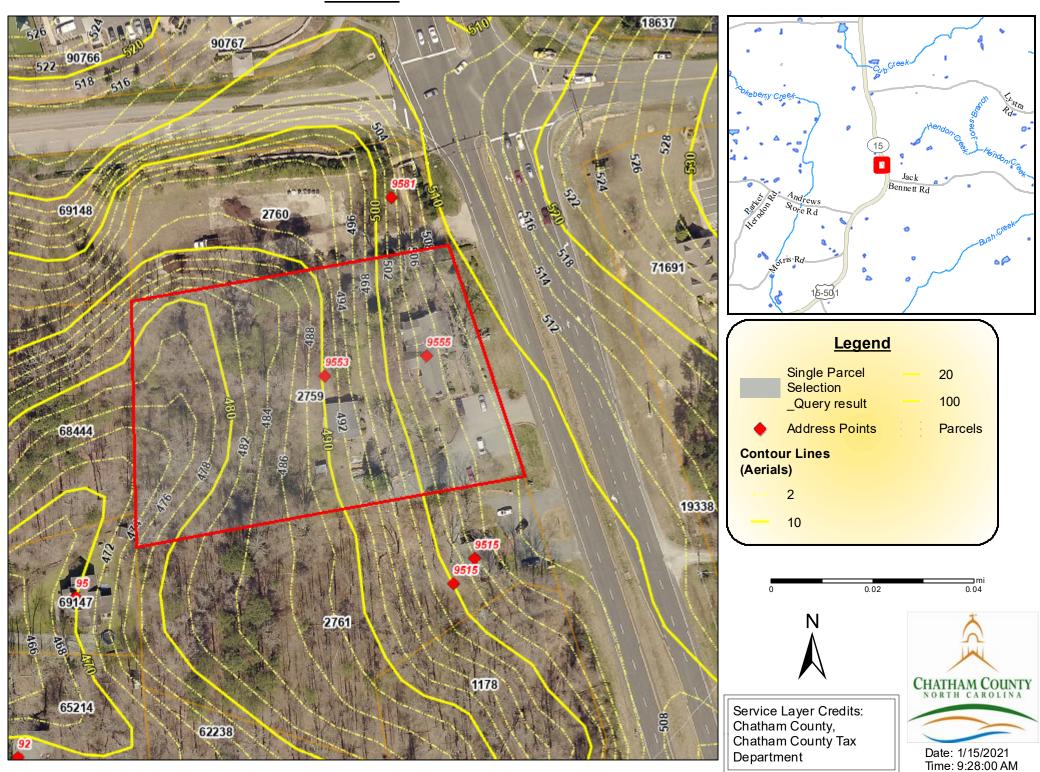
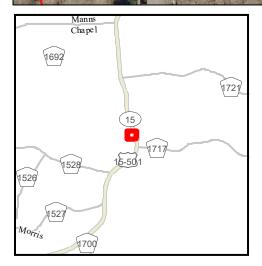


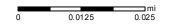
Exhibit 2





Legend GPSDataCollection_RiparianTransitionPoints_62 Origin-Intermittent Intermittent-Perennial Review Comers GPSDataCollection_RiparianStreams_7499 Intermittent Perennial GPSDataCollection_ReviewBoundaries_9921 Parcels

Service Layer Credits: Chatham County, Chatham County Environmental Quality, Chatham County GIS

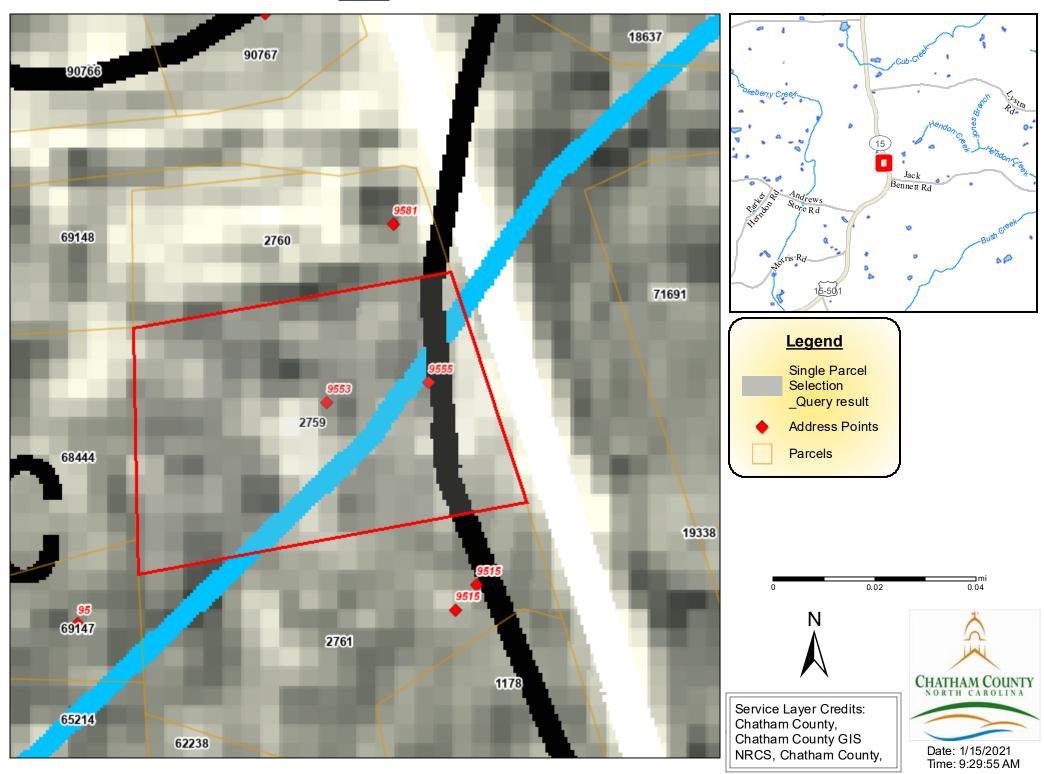




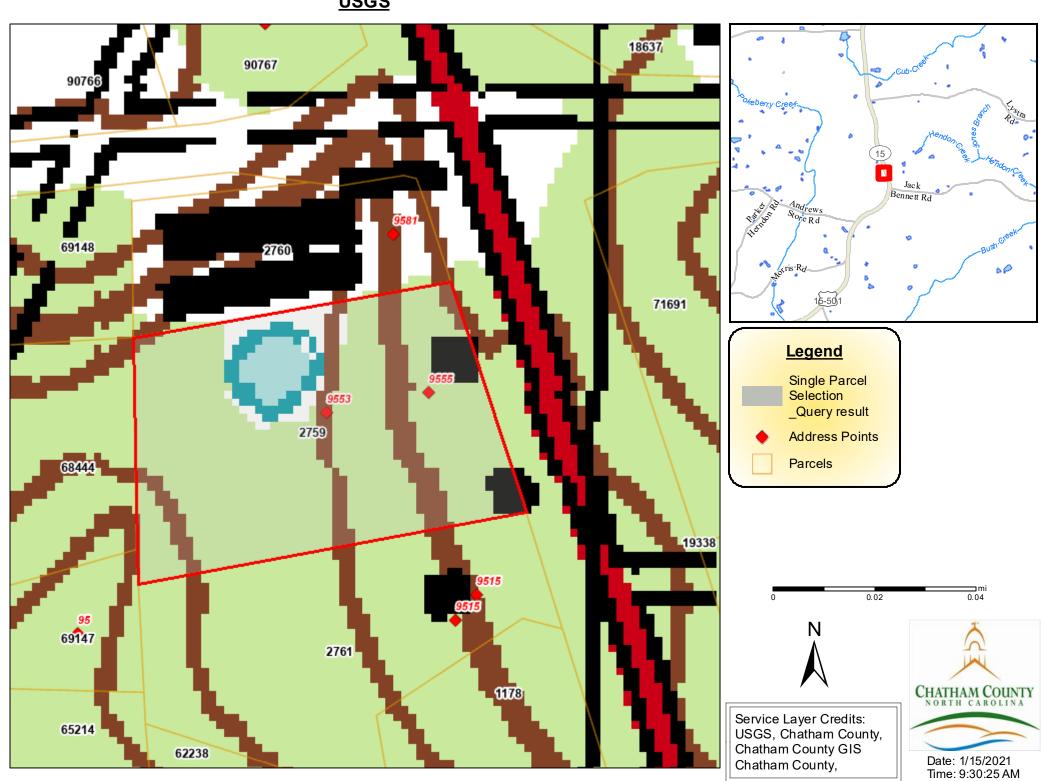
Date: 1/19/2021 Time: 12:32:33 PM



NRCS



<u>USGS</u>



NC DWQ Stream Identification Form Version 4.11							
Date:	Project/Site: Latitude:						
Evaluator:	County: Longitu		gitude:				
Total Points: Stream is at least intermittent if ≥ 19 or perennial if ≥ 30	Stream Determination: Other: e.g. Quad Na				ne:		
A. Geomorphology (Subtotal =)		Absent	Weak	Mode	rate	Strong	SCORE
1 ^a . Continuous bed and bank		0	1	2		3	000112
Sinuosity of channel along thalweg		0	1	2		3	
3. In-Channel structure: ex. riffle-pool, step-	oool, ripple-	0	1			3	
pool sequence		Ū					
4. Particle size of stream substrate		0	1	2		3	
5. Active/relic floodplain		0	1	2		3	
6. Depositional bars or benches7. Recent alluvial deposits		0	1	2		3	
8. Headcuts		0	1	2		3	
Grade controls		0	0.5	1		1.5	
10. Natural valley		0	0.5	1		1.5	
11. Second or greater order channel		No =	= 0		Yes =	= 3	
^a artificial ditches are not rated; see discussions in manua	al.	<u> </u>					
B. Hydrology (Subtotal =)		Absent	Weak	Mode	rate	Strong	SCORE
12. Presence of Baseflow		0	1	2		3	
13. Iron oxidizing bacteria		0	1	2		3	
14. Leaflitter		1.5	1	0.		0	
15. Sediment on plants or debris		0	0.5 0.5	1		1.5 1.5	
16. Organic debris lines or piles17. Soil-based evidence of high water table?							
17. Soil-based evidence of high water table? No = 0 Yes = 1.5							
C. Biology (Subtotal =)		Absent	Weak	Mode	rate	Strong	SCORE
18. Fibrous roots in streambed		3	2	1		0	
19. Rooted upland plants in streambed		3	2	1		0	
20. Macrobenthos (note diversity and abundance)		0	1	2		3	
21. Aquatic Mollusks 22. Fish		0	0.5	1		3 1.5	
23. Crayfish		0	0.5	1		1.5	
24. Amphibians		0	0.5	1		1.5	
25. Algae		0	0.5	1		1.5	
26. Wetland plants in streambed		FACW=0.75; OBL=1.5 Other=0					
*perennial stream may also be identified using other methods. See p.35 of manual.							
Notes:		Bank Heig	tht (feet)				
1101001		Bankfull W)			
		Water Dep					
		Channel S	Substrate				
		Velocity:					
Clarity:							
Sketch:							

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Clarity:							
Sketch:							



Watershed Protection Departmen	nt
Website: www.chathamnc.or	g

Date Received: PL#

Riparian Buffer Review ApplicationSurface Water Identification Request

Surface water identification Reque	est	
Will this project result in the review of less than or equal to 25 acres?		
Will this project result in the review of greater than 25 acres?	Yes □	No ∐
If your project will result in a review of greater than 25 acres please of complete the surface water determination. For stream determinations successfully completed the NCDWQ/NC State University Surface We delineations the consultant must demonstrate at least 2 years of expectage wetlands in accordance with the Eastern Mountains and Piedmont Recorps of Engineers Wetland Delineation Manual. Please visit the website for a list of consultants that regularly complete work within Characteristics.	ations the con uters Classifica perience deline gional Supplen Watershed Pro	nsultant must have ation. For wetland eating jurisdictional nent to the 1987 US
Review Type: Subdivisions (excluding Majors) \square	Jordan Revie	ews 🗆
Tract Information Parcel #: Watershed District (and name of cree)	k if known):	
Property Owner:		
Location/Physical Address of Tract:		
Driving Directions from Pittsboro:		
Subdivision Name (if applicable):		
Owner's/Agent Contact Information (Agent: Consultant or individual(s)	receiving lot(s	<u>))</u>
Name:		
Contact Phone Numbers: (h) (w)	(c)	
E-mail:		
Mailing Address:		
Do you wish to be contacted prior to Chatham County staff visiting the	property? \square Y	es 🗆 No
How much notice is required prior to arrival onsite?		



How would you like to receive the completed review letter? (Please check one of the following)
☐ I would like to pick up the completed Riparian Buffer Review at the County Office
☐ I would like the completed Riparian Buffer Review mailed to me
☐ I would like the completed Riparian Buffer Review e-mailed to me
Please include the following items with this request
☐ Copy of Original Plat, Chatham County GIS Map, or detailed drawing indicating review area
☐ Signed Right to Enter Property Form
☐ Signed Owner's Agent Designation Form (if applicable) ☐ Not Applicable
☐ Fee (make checks payable to Chatham County)
Minor Subdivisions: \$50 Administration Fee plus \$50 per lot created
Total Lots Created: Total Paid: \$
* The above fees do not apply to Jordan Lake Buffer Confirmations or confirmations of USGS mapped streams in accordance with the 1994 Chatham County Watershed Protection Ordinance
I have read and understand the regulations of the Watershed Protection Ordinance, Section 304, and I agree to adhere to these associated policies and guidelines herein.
Owner/Agent Signature: Date:

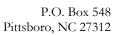




CHATHAM COUNTY

AUTHORIZED AGENT FOR FORM

	AL DESCRIPTION:	
LOT NO.	PARCEL ID (PIN)	PARCEL SIZE
STREET ADDRES	SS:	
Please print: Property Owner:		
Property Owner :		
The undersigned o	wner(s) of the above described p	roperty, do hereby authorize
	. of	
(Contractor / Agen	$\overline{(t)}$ (N	Vame of consulting firm if applicable)
and acceptance of	reviews, inspections, or permits a	uld have taken if present, necessary for the processing, issuance and any and all standard and special conditions attached to ne following (Check all that apply):
Check her	e for all of the below options.	
Building P Zoning Co Floodplain Soil Erosic Permits to	rermit compliance Permits de Determination on & Sedimentation Control Perm install, repair, evaluate, or expan /inspection/permitting of a privat	nit d onsite wastewater system(s)
Riparian B		f the Chatham Co. Watershed Protection Ordinance.
Property Owner	s Address (if different than prope	erty above):
Telephone:		E-mail:
We hereby certify knowledge.	£22	in this application is true and accurate to the best of our
Owner Authorized Date: 01/1	-	Agent Authorized Signature Date:





Website: www.chathamnc.org

Authorization to Enter Property Form

Date:	
PARCEL No. (AKPAR)	
I, (print name)	, as owner of the property described above,
or as a representative of the owner(s) do hereb	by convey permission to Chatham County staff to enter the property at
their convenience to conduct a surface water ide	entification (SWID) necessary to determine whether or not water features
on my property are subject to the riparian buffe	r regulations described in Section 304 of the Chatham County Watershed
Protection Ordinance. The SWID will be p	ublic record and on file at the Planning and Watershed Protection
Departments, and may be requested in the future	re for review by interested parties.
I understand that stream delineations for the p	roperty listed above will be made by County staff only once and that if
future subdivisions are proposed within this pro	operty boundary, it will require a surface water identification by a private
consultant at the property owner's expense.	
	1932
(Print Owner's Name)	(Signature of Owner) (Date)
(Print Authorized Agent Name)	(Signature of Authorized Agent) (Date)