

11633 STATESVILLE RD

01721209

1/2/2008

duponbj

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



SB Tabor Inn septic system
9.12-95



SB Tabor Inn Septic system
9-12-95



SB Tabor Inn Septic System
9.12.95

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 3392-B DATE: 9-28-95

TC: 017-212-09 L CRT

SERIAL Nº 16432

Name of Owner William Tabor Juris.: _____

Address of Property 11633 Statesville Rd.

Inspection Data:

Tank Material PCC

Total Length of Drainfield 1000'

Number of Lines 10 @ 100' each

Cover Depth 12"-18"

Water Supply Source well

Distance to Water Source 100'

Excavation Inspected 9-21 & 9-22-95

Tank(s) Inspected 9-21-95

Wash Line Inspected —

High Water Alarm Inspected 9-28-95

PLOT

Design 1995, 2000gal, 2000gal, 10 at 3'x100' trenches, IWWS-93-2 Infiltrator chambers CTR# 74 Bobby Mayhew

The undersigned has inspected the Septic Tank System described above, and certifies it has been

X installed or constructed — X altered or repaired

X in accordance with the permit issued — as detailed in the plot above

and meets the provisions of 15A 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 — X 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 15A 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: System designed for existing 10 units of motel without kitchenettes. Not designed or sized for restaurant.

existing tank appears to be properly maintained. Repair any possible leaking fixtures in facility

Type III g.

Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

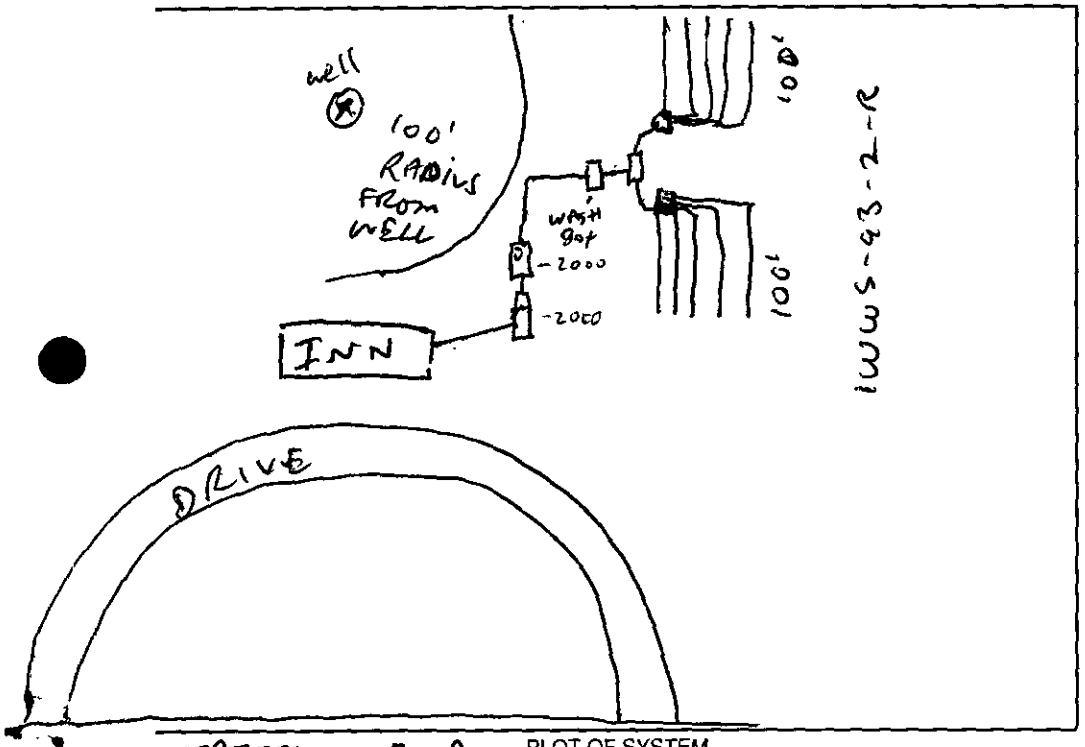
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 3392-B DATE: 9-15-95

TC: 017-212-09a L

SERIAL Nº 16384

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 1-25-95. All work shall be completed on or before 10-15-95, 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 2000 gallons

Liquid Capacity of Dosing Tank 2000 gallons

Tank Construction PCC

Trench Depth 28"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous Yes

Total Line Length 1000 feet

Number of Lines 10 x 100

Depth of Stone N/A inches

Distance from House 5'+ feet

Distance from Property Line 10'+ feet

Distance from Well 100'+ feet

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

NAME OF OWNER WILLIAM TABOR

LOCATION OF PROPERTY 11633 STATESVILLE RD

Comments: OWNER: BILL TABOR REQUEST IWWS 93-2R SYSTEM

REPAIR DESIGN FOR EXISTING UNITS - NO ADDITIONAL DAILY DESIGN FLOW ALLOWED

Kelly Randall

Environmental Health Specialist

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

9-15-95 Tabor's Inn Site Visit

Kelly Randall, Bobby Mayhew (septic tank contractor) & Susan Bateman met at site. Bateman briefed Randall as to proposed location for repair. Randall & Mayhew worked out details for installation approval. Bateman left site. Approval issued by Randall.

9-18-95

Bateman made site visit from Tabor's Inn driveway. Repair started.

- Repair system – installation approval issued including electrical inspection for electrical components associated with lift station

- Properly abandon existing septic tank including lining area
- Pump and haul as necessary until repair completed to keep sewage off top of ground

9-12-95

site visit to Tabor's Inn 11633 Statesville Rd.
Denise Shinn, R.S. and Sue Bateman (R.S. (me) visited site.

Spoke with Mr. William Tabor. Denise delivered letter dated 9-12-95 concerning suspension of lodging facility permit. Mr. Tabor said he intended to repair system and pursue getting his permit reinstated. He said he was just able to borrow the money from a lender and that he had contracted with Bobby Mayhew, a septic tank contractor, to do the work. He indicated that he hoped the repair would be made before the court date or at least started. He asked if we would still have to go to court, if repairs were completed before the court date. I told him that as far as I knew we would have to go but if the repair was completed we would be able to tell the judge that you satisfied the violation. I encouraged him to try his best to have the violation corrected before the court date. I asked him that we would like to look at the septic system again. He agreed to let us see it. He stayed in the facility office + we went out to see system. Septic system malfunctioning. Sewage on top of the ground. Sewage odor. Pictures taken with polaroid camera. Surface sample taken. Then we left site.

Mecklenburg County Public Health Laboratory

Environmental Health Section

249 Billingsley Road • Charlotte, North Carolina 28211

Microbiological Analyses

Owner, System or Establishment: William Tabor (Tabors Inn)

Address: 11633 Statesville Rd.

Charlotte Zip

Collected By: S Bateman

Date Collected: 9-12-95 Time: 2:00 AM (PM)

Sample Source: Surface Sample from malfunctioning Septic system

Date Delvd. to Lab: 9-12-95 Time: 2:50 AM (PM)

Delivered By: S Bateman

Type of Sample

Potable Water

- ☐ Individual Well ☐ Non-Community
- ☐ Community ☐ City
- ☒ Other (specify) surface sample

Treatment: ☐ chlorinated ☐ nonchlorinated

- ☐ Initial Sample ☐ Recheck (chlorinated)
- ☐ Recheck (nonchlorinated)
- ☒ Other (specify) surface sample

Food (specify):

Analysis Requested:

- ☐ Total Coliform
- ☒ Fecal Coliform
- ☒ Fecal Strep
- ☐ Sulfate Reducing Bacteria
- ☐ **Giardia lamblia** (contact laboratory for instructions)
- ☐ Food Quality Survey
- ☐ Other (specify) _____
- ☐ Foodborne Investigation (specify) _____

Comments: _____

Laboratory Analysis Report

Method: ✓ Membrane Filter _____ Colilert

Total Coliform	/100 ml.	Non-Coliform	/100 ml.
Fecal Coliform	2,100,000 /100 ml.	Plate Count	/gm. or ml.
Fecal Strep	74,000 ECFU /100 ml.	Coliform Count	/gm. or ml.

Laboratory Comments:

Date Received: 9/14/95 Date Reported: 9/14/95

Received By: Purvis Analyst: DGW/MW Lab #: 946

Laboratory Identification #: 37518

L 1.14 1/92

LAB REPORT COPY

Mecklenburg County
Health Department

September 12, 1995

Mr. William Tabor
11633 Statesville Road
Huntersville, NC 28078

Dear Mr. Tabor:

This is to notify you that your permit to operate a lodging facility at 11633 Statesville Road, Huntersville, N.C. has been suspended.

On July 21, 1995, you were notified of the intent to suspend your permit due to a continuing violation of 15A North Carolina Administrative Code 18A .1809(d). The notice issued by this department allowed you 30 days to correct the violation or to appeal this the intent to suspend. Specific directions were given for filing an appeal. As of September 12, 1995, the violation has not been corrected. A telephone call to the OAH (Office of Administrative Hearings) indicates your petition for appeal was incomplete and was returned to you. The 30 day period for appeal has passed and the OAH indicates an appeal has not been filed.

Suspension of the permit means that you no longer have a valid permit to operate a lodging facility. This suspension will continue until such time as the violation resulting in the suspension is corrected and your permit is reinstated. After 12 months in this status, the permit will be void and all deficiencies existing will need to be corrected in addition to those resulting in permit suspension, in order to qualify for a new permit.

It is a violation of North Carolina General Statute 130A-248(b) to operate a lodging facility without a permit or while your permit is suspended or revoked. Continued operation as a lodging facility may result in legal action being taken against you.

If there are any questions regarding this matter, please contact me at 336-5522.

Sincerely,

Denise Shinn, R.S.
Environmental Health Specialist
Food and Facilities Sanitation Program

DS/evj

TABOR'S INN

May 15,1995

Bobby Spires
C-MUD
5100 Brookshire Blvd.
Charlotte, N.C. 28216

Dear Mr. Spiers:

Re: 11633 Statesville Road (Tabor's Inn)
Parcel: 017-212-09

This is to formally request that you conduct a study to determine the approximate cost of connection of a sewage system to our property, including the potential expansion as we spoke about today.

We understand the costs involved and would like to have our architect, Charles Wilber, review you findings.

Thanks for your help.

Sincerely,

William Tabor - President

Dana Tabor - Vice-President

cc: Mr. Charles Wilber, III, AIA
Susan M. Bateman, R.S.

11633 STATESVILLE RD. • HUNTERSVILLE, N.C. 28078 • 704-875-2578

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

LOG NO: [ ]

REQUEST FOR APPROVAL AND RECORD OF LEGAL ACTION

DATE: 07 / 05 / 95 (MONTH / DAY / YEAR)

SECTION: IWWS (AQ, WQ, FOOD, DC, MILK, POOL, S&HW, OPWD, VC)

TO: **DIRECTOR**

Request approval for initiation of (circle one): CS, CW, AI, CV, OTHER: _____

Against: WILLIAM TABOR

Violation: NC SEWAGE RULES .1961(a)1

Circumstances: (Outline Briefly) Outstanding septic system violation. Effluent from Tabor's Inn located on ground surface at 11633 Statesville Road. Violation notices with letters sent and phone calls made but system not repaired. Mr. Tabor had CMUD sewer survey conducted and he indicates he will apply for sewer extension for facility instead of repairing system. To date extension project not started due to failure of Mr. Tabor to start project. Ongoing septic violation needs to be resolved.

Susan M. Bateman, R.S. Susan Bateman
ENVIRONMENTALIST

875-2578-Mr. Tabor

Violation Notices (Date & Results):

6/2/95 Final NOV-6/28/95 Mr. Tabor said he will get bank loan to pay for sewer ext.

3/23/95 NOV

1/20/95 NOV

1/18/95 letter sent noting violation

Other Contacts: 6-29-95 Mr Tabor returned my call and indicated he would be applying for bank loan for sewer ext. Spoke with Mr. Tabor at compliance date for each NOV. Site visits made 12/94, 3/21/95, 5/11/95

Approved for proceeding with action:

Supervisor: _____ DATE: 7/6/95

Division Manager: _____ DATE: 7/12/95

Director: _____ DATE: 7/12/95

THE ENTIRE FILE MUST ACCOMPANY THIS FORM.

26th JUDICIAL DISTRICT - MECKLENBURG COUNTY
NORTH CAROLINA

ENVIRONMENTAL COURT

CR NUMBER:

CMPD INCIDENT:

RESPONSIBLE AGENCY	[ ] ANIMAL CONTROL [ ] BUILDING STANDARDS [ ] COMMUNITY DEVELOPMENT [ ] COMMUNITY IMPROVEMENT [ ] ENVIRONMENTAL PROTECTION [ ] FIRE [X] HEALTH DEPARTMENT [ ] ZONING [ ] OTHER: _____

OFFENSE LOCATION: **11633 Statesville Road**	CITY: **Huntersville**	STATE: **NC**	ZIP: **28078**
TAX PARCEL NUMBER: **017-212-09**	DEED NUMBER:	DEED DATE:	
PROPERTY OWNER(S): **William Tabor**	R/S:	AGE/DOB:	
ADDRESS: **11633 Statesville Road**	CITY: **Huntersville**	STATE: **NC**	ZIP: **28078**
ALT. ADDRESS:	CITY:	STATE:	ZIP:
HOME TELEPHONE: **(704)875-2578**	ALTERNATE TELEPHONE:		

COMPLAINANT:			
ADDRESS:	CITY:	STATE:	ZIP:
ALT. ADDRESS:	CITY:	STATE:	ZIP:
HOME TELEPHONE:	ALTERNATE TELEPHONE:		
RELATIONSHIP TO PROPERTY OWNER:			

SUMMARY OF COMPLAINT:

COMPLAINT DATE:

SUMMARY OF INVESTIGATION:

COMPLETION DATE:

VIOLATION(S) DETECTED: **Malfunctioning septic tank system**

STATUTE/ORDINANCE NUMBER(S): **130A-335(a),.1961(a)**

-- PRIOR HISTORY/PRIOR VIOLATIONS --

-- ENFORCEMENT ACTIONS --

CITATION NUMBER(S) ISSUED:	DATE:	COMPLIED:
CRIMINAL SUMMONS PREPARED BY:	DATE:	SERVED:
CRIMINAL SUMMONS SERVED BY:	CODE #:	AGENCY:

WITNESS #1: Mr. William Marlin, Soil Scientist			
ADDRESS: Mecklenburg County Health Department 700 N. Tryon Street, Suite 211	CITY: Charlotte	STATE: NC	ZIP: 28202
ALTERNATE ADDRESS:	CITY:	STATE:	ZIP:
TELEPHONE: (704)336-5102	ALTERNATE TELEPHONE: (704)336-5574		
FACTS TO WHICH WITNESS CAN TESTIFY: Observed sewage surfacing on top of ground			
CAN WITNESS IDENTIFY DEFENDANT? [X] YES [ ] NO	SUBPOENA THIS WITNESS? [X] YES [ ] NO		

WITNESS #2:			
ADDRESS:	CITY:	STATE:	ZIP:
ALTERNATE ADDRESS:	CITY:	STATE:	ZIP:
TELEPHONE:	ALTERNATE TELEPHONE:		
FACTS TO WHICH WITNESS CAN TESTIFY:			
CAN WITNESS IDENTIFY DEFENDANT? [ ] YES [ ] NO	SUBPOENA THIS WITNESS? [ ] YES [ ] NO		

-- PHYSICAL EVIDENCE --

PHOTOGRAPHS? [ ] YES [ ] NO	WHERE STORED:
SPECIMEN (IDENTIFY):	TEST DATE:
DAMAGE ESTIMATE/TIME FOR COMPLIANCE:	
CERTIFIED COPY OF APPLICABLE ORDINANCE(S): [ ] IN FILE [X] IN COURTROOM	
RECORDS OF OWNERSHIP (IDENTIFY):	
NOTICE(S) OF VIOLATION: Mailed NOV: 6/2/95; 3/23/95; 1/20/95	
OTHER: Letters sent 6/2/95, 1/20/95	

-- INVESTIGATOR/INSPECTOR --

NAME: Susan M. Bateman, R.S.		
POSITION: Environmental Health Specialist	AGENCY: Mecklenburg County Health Dept.	
BUSINESS ADDRESS: 700 N. Tryon Street, Suite 211	CHARLOTTE, N. C. 28202	
TELEPHONE: (704)336-5569	ALTERNATE TELEPHONE: (704)336-5102	
NOTES/REMARKS:		

File No.

ENV **MISDEMEANOR CRIMINAL SUMMONS**

Offense: Sewage Disposal

THE STATE OF NORTH CAROLINA VS.

Name, Address & Telephone No. Of Defendant

William Tabor
11633 Statesville Road
Huntersville, NC 28078

Race	Sex	Date Of Birth	Age
	Male	Unknown	Unknown

Social Security No.	Drivers License No. & State
Unknown	Unknown

Name Of Defendant's Employer: Unknown

Offense Code	Offense In Violation Of G.S.
	130A-335(a).1961(a)1
	Date Of Offense: 01/20/95

Complainant (Name, Address Or Department, Phone No.)

Susan M. Bateman, R.S.
Mecklenburg County Health Dept.
Environmental Health Division
700 N. Tryon St., Suite 211
Charlotte, NC 28202
(704)336-5569

Witnesses (Names, Addresses, Phone Numbers)

William Marlin, Soil Scientist
Mecklenburg County Health Dept.
Environmental Health Division
700 N. Tryon St., Suite 211
Charlotte, NC 28202
(704)336-5574

STATE OF NORTH CAROLINA

MECKLENBURG County

In The General Court Of Justice
District Court Division

To the defendant:

I, the undersigned, find that there is probable cause to believe that on or about the date of offense shown and in the county named above you unlawfully ~~and willfully~~ did while owning Tabor's Inn business located at 11633 Statesville Road, Huntersville, NC, tax parcel no. 017-212-09, failed to maintain a sanitary system of sewage disposal as required under G.S. 130-A-335(a),.1961(a)1.

This act was in violation of the law referred to in this Criminal Summons. This Summons is issued upon information furnished under oath by the complainant listed. You are ORDERED to appear before the Court at the location, date and time indicated below to answer to the charge. If you fail to appear, an order for your arrest may be issued and you may be held in CONTEMPT OF COURT and imprisoned for up to thirty (30) days or fined up to $500.00 or both. This penalty for failure to appear is in addition to any sentence which may be imposed for the crime charged.

Date Issued	Signature	Location Of Court

Date Of Service	☐ Magistrate ☐ Deputy CSC ☐ Assistant CSC ☐ Clerk Of Superior Court	Court Date	Court Time ☐ AM ☐ PM

FINAL NOTICE

N. C. Department of Environment, Health, and Natural Resources/Division of Environmental Health

ON-SITE WASTEWATER VIOLATION NOTICE

OWNER William Tabor

MAILING ADDRESS 11633 Statesville Rd, Huntersville 28078

OCCUPANT Tabor's Inn

LOCATION 11633 Statesville Road

☐ RESIDENCE ☒ BUSINESS ☐ OTHER tax parcel 017-212-09

You are hereby notified that you are violating the Rules adopted by the North Carolina Commission for Health Services or Article 11 of Chapter 130A of the General Statutes of North Carolina by owning or controlling a residence, place of business, or place of public assembly which is not provided with an approved wastewater system. Your wastewater system is not in compliance; the following corrections must be made. Consult your Local Health Department for advice and required permits by calling telephone number 336-5569/336-5102.

6/12

☒ Install/Repair wastewater system. You must obtain an Improvement Permit from the local health department prior to repairing your system. Submit design plan for repair to Meck. Cty. Health Dept.

or

☐ Eliminate wastewater discharge and connect to an approved wastewater system.

☐ Pit Privy must be repaired/constructed.

☒ Other Repairs (*specify*) Connect to CMUD sewer line. Submit copy of tap-on fee receipt to Meck. ~~County Health Dept.~~

☒ Perform Maintenance (*specify*) Pump & haul contents of tank as needed to keep effluent off surface of ground.

If the wastewater violation is not brought into compliance by June 19, 1995, appropriate legal action will be taken.

Notice Issued June 2, 1995 (Date) Signed Susan M. Bateman, R.S. (Division of Environmental Health) Agent

Compliance _____ (Date) Signed _____ (Division of Environmental Health) Agent

cc: Bill Hardister, R.S., Program Chief
Denise Shinn, R.S.

DEHNR 1108 (Revised 9/92)
On-Site Wastewater Section (Review 10/94)

6-28-95 spoke w/ Mr Tabor. He said sewer project started but he had not paid extension fee yet. I informed him he needs to contact his contact person at CMUD to verify that they started + it was my understanding that ext fee had to be paid upfront. He said he was confused. I informed him that I would have to turn this case over to supervisor for criminal summons. He said he had tank pumped recently but then it rained + overflow must be rain water now.

6-29-95 verified w/ Bobby Spires That he sent letter + it states he needs to pay an ext fee to start work.

Mecklenburg County
Health Department

June 2, 1995

Mr. William Tabor
11633 Statesville Road
Huntersville, NC 28078

Dear Mr. Tabor:

Enclosed please find an on-site wastewater violation notice concerning Tabor's Inn located at 11633 Statesville Road. Please note that this is a final notice and action must be taken to bring the wastewater system into compliance by June 19, 1995.

At your request, The Charlotte-Mecklenburg Utility Department conducted a study to determine the cost and feasibility of your business to connect to municipal sewer. It is my understanding that this study is complete and at this point you need to make a decision whether to connect to sewer or repair the subsurface wastewater treatment and disposal system.

Due to the size of the nitrification field needed for a repair, a design plan must be submitted to this office. It appears that a system to accommodate a ten unit motel without cooking facilities will need to have a pressure manifold utilized in its design. There does not appear to be any portion of the existing nitrification field that can be utilized in the repair design.

It is a recommendation that you have your system designer contact Duke Power Company concerning issues related to attempting to utilize the right-of-way area.

If you connect to municipal sewer you must submit a copy of the extension fee receipt to this office.

In either case, you must pump and haul the contents of the septic tank as needed to keep the sewage off the top of the ground during this interim period.

I look forward to receiving the required information from you. If I can be of further assistance please feel free to contact me at 336-5569.

Sincerely,

Susan M. Bateman, R.S.
Individual Water and Wastewater Systems

Enclosure

cc: Bill Hardister, R.S., Program Chief
Denise Shinn, R.S.

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

3392B

☐ CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

PERSON FILING APPLICATION:
NAME: Tabor (last) William (first) B (mi)
ADDRESS: 11633 Statesville Rd PHONE: (704) 8752578
CITY: Huntersville STATE: NC ZIPCODE: 28078

Date:

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 017-212-09
STREET ADDRESS: 11633 Statesville Rd
ZONING:

PROPERTY OWNER:
NAME: Tabor (last) William (first) B (mi)
ADDRESS: 11633 Statesville Rd PHONE: (704) 8752575
CITY: Huntersville STATE: NC ZIPCODE: 28078

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
☐ 0 Mecklenburg County ☐ 2 Davidson ☐ 4 Pineville ☐ 6 Huntersville
☐ 1 Charlotte ☐ 3 Cornelius ☐ 5 Matthews ☐ 7 Mint Hill

TYPE APPLICATION (check one):

LOT NUMBER: LOT SIZE (in acres):

☐ SOIL TEST - INDIVIDUAL LOT (D)
☐ NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
☐ EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
☐ ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
☐ COMMERCIAL OR INDUSTRIAL (N)
☐ SOIL TEST DEVELOPMENT (P)
☐ ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
☐ MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
X REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
☐ SINGLE MOBILE HOME (S) ☐ HOUSE (H) ☐ MULTIPLE FAMILY (U)
☐ DOUBLE WIDE (D) ☐ MODULAR HOME (M) ☐ OTHER _____ (O)

NUMBER BEDROOMS: NUMBER OCCUPANTS:

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ___ Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type _____

WATER SUPPLY (check one):
☐ Community (C) ☐ Shared Well (S)
☐ Municipal (M) ☐ Other 'spring' (O)
X ☐ Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
☐ Swimming Pool ☐ Jacuzzi ☐ Stable/Barn ☐ Workshop ☐ None
☐ Garage ☐ Storage Building ☐ Deck/Patio ☐ Bedrooms ☐ 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 agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: X William B Tabor Date: X 1-25-95

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the 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 by this Department.

...This permit is not transferable.

... Repair approval issued

☑ IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
☐ MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
☐ ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Environmentalist Date

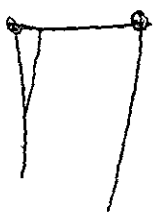
Director or Authorized Section Head Date

WATER : 122791

09/18/1995 CHAR-MECK TAX DEPARTMENT PUBLIC ACCESS SYSTEM TDPA030 C
10:00 AM CURRENT REAL ESTATE DETAIL SUMMARY TP03
017-212-09 FIRE: 18 TWP: 11 SITUS: HUNT SD:
OWNER/MAILING ADDRESS MORT: ANNEXED: 08/31/1995
TABOR INN OF HUNTERSVILLE INC
TYPE : DOMESTIC
11633 STATESVILLE RD DEED : 2949 0370
DATE : 01/01/1975
HUNTERSVILLE NC 28078
TOT ACRE: 9.400 AC LEGAL: 11633 STATESVILLE ROAD
SITUS: 11633 STATESVILLE RD HUNT

CARD 1 OF 4	1995 APPRAISAL DATA	CARD VALUE	TOTAL VALUE
TABOR INN	LAND	184,260	184,260
BUILT 1961 NET COND % : .61	BLDG	53,590	104,480
SQFT: 2 400 AUX SQ. FT : 960	OBXF	2,570	2,570
ZONE: I2 NEIGHBORHOOD: 01701	TAXABLE	240,410	291,310
ACRE: 9.400			
USE/MODEL: MOT/MOT (3/APARTMENT			

(-TYPE CHOICE, HISTORY F5:MORE INFO F7 UP CLEAR:RESET
PRESS ENTER, F1:HELP F2:OPTIONS F3:RETURN F6:PREV INFO F8:DOWN F12:EXIT



July 28, 1995

Site visit to Tabor's Inn.

Present: Susan Bateman, William Marlin, William Tabor, Bobby Mayhew (Septic Tank Contractor)

Site visit for purpose of evaluating soil so that contractor would be aware of provisionally suitable area to design system. An area was identified and contractor had all appropriate information.

7-21-95 Met Denise Shinn at Tabor's Inn to show her malfunctioning septic system. Met with Mr. Tabor first to speak with him & so that we had his permission to be on property. Mr. Tabor told me he has had problems with his son & some of the things that he thought his son had taken care of apparently had not been done, he wasn't sure if a bank hole was coming through or not for sewer tap but he thought he ought to proceed with repair to system. He said he would contact Bobby Mayhew concerning design of system. We walked outside & he said at this point he'd prefer to use the area for system which he had been planning to use for building expansion. Denise & I both looked at the malfunctioning septic system and saw sewage on top of the ground. Denise informed Mr. Tabor she would need to speak with her supervisor but she would be sending him either a notice of intend to suspend his permit or immediate suspension. He indicated that he rarely does daily rentals its mostly weekly & monthly rentals. Then we left.

Mecklenburg County
Health Department

July 21, 1995

Mr. William Tabor
11633 Statesville Road
Huntersville, NC 28078

Dear Mr. Tabor:

This is to notify you of the intent to suspend your permit thirty days from this date for violation of 15A North Carolina Administrative Code 18A.1809(d). This section states in part that "All sewage and other liquid wastes shall be disposed of in a public sewer system or, in the absence of a public sewer system, by an approved, properly operating, sanitary sewage system."

On July 21, 1995, a visit to the site revealed that the on premises waste disposal system was malfunctioning, and raw sewage was surfacing on the premises. This is in violation of the referenced rule.

If suspended, the permit remains suspended until violations are corrected. A hearing will be held prior to suspension if you file a petition for a hearing with the Office of Administrative Hearings, P.O. Drawer 27447, Raleigh, NC 27611-7447, in writing within thirty days of this date indicating your intent to attend the hearing. If you do not petition the Office of Administrative Hearings, you waive your right to the hearing and the decision to suspend or revoke the permit is final.

Sincerely,

Denise Shinn

Denise Shinn, R.S.
Environmental Health Specialist

cc: Susan Bateman

Mecklenburg County
Health Department

June 2, 1995

Mr. William Tabor
11633 Statesville Road
Huntersville, NC 28078

Dear Mr. Tabor:

Enclosed please find an on-site wastewater violation notice concerning Tabor's Inn located at 11633 Statesville Road. Please note that this is a final notice and action must be taken to bring the wastewater system into compliance by June 19, 1995.

At your request, The Charlotte-Mecklenburg Utility Department conducted a study to determine the cost and feasibility of your business to connect to municipal sewer. It is my understanding that this study is complete and at this point you need to make a decision whether to connect to sewer or repair the subsurface wastewater treatment and disposal system.

Due to the size of the nitrification field needed for a repair, a design plan must be submitted to this office. It appears that a system to accommodate a ten unit motel without cooking facilities will need to have a pressure manifold utilized in its design. There does not appear to be any portion of the existing nitrification field that can be utilized in the repair design.

It is a recommendation that you have your system designer contact Duke Power Company concerning issues related to attempting to utilize the right-of-way area.

If you connect to municipal sewer you must submit a copy of the extension fee receipt to this office.

In either case, you must pump and haul the contents of the septic tank as needed to keep the sewage off the top of the ground during this interim period.

I look forward to receiving the required information from you. If I can be of further assistance please feel free to contact me at 336-5569.

Sincerely,

Susan M. Bateman, R.S.
Individual Water and Wastewater Systems

Enclosure

cc: Bill Hardister, R.S., Program Chief
Denise Shinn, R.S.

FINAL NOTICE

N. C. Department of Environment, Health, and Natural Resources/Division of Environmental Health

ON-SITE WASTEWATER VIOLATION NOTICE

OWNER William Tabor

MAILING ADDRESS 11633 Statesville Rd, Huntersville 28078

OCCUPANT Tabor's Inn

LOCATION 11633 Statesville Road

☐ RESIDENCE ☒ BUSINESS ☐ OTHER tax parcel 017-212-09

You are hereby notified that you are violating the Rules adopted by the North Carolina Commission for Health Services or Article 11 of Chapter 130A of the General Statutes of North Carolina by owning or controlling a residence, place of business, or place of public assembly which is not provided with an approved wastewater system. Your wastewater system is not in compliance; the following corrections must be made. Consult your Local Health Department for advice and required permits by calling telephone number 336-5569/336-5102.

6/12

☒ Install/Repair wastewater system. You must obtain an Improvement Permit from the local health department prior to repairing your system. Submit design plan for repair to Meck. Cty. Health Dept.

☐ Eliminate wastewater discharge and connect to an approved wastewater system.

☐ Pit Privy must be repaired/constructed.

or

☒ Other Repairs (specify) Connect to CMUD sewer line. Submit copy of tap-on fee receipt to Meck. County Health Dept.

☒ Perform Maintenance (specify) Pump & haul contents of tank as needed to keep effluent off surface of ground.

If the wastewater violation is not brought into compliance by June 19, 1995, appropriate legal action will be taken.

Notice Issued June 2, 1995 (Date) Signed Susan M. Bateman, R.S. (Division of Environmental Health) Agent

Compliance ____ (Date) Signed ____ (Division of Environmental Health) Agent

cc: Bill Hardister, R.S., Program Chief
Denise Shinn, R.S.

DEHNR 1108 (Revised 9/92)
On-Site Wastewater Section (Review 10/94)

6-28-95 spoke w/ Mr. Tabor. He said sewer project started but he had not paid extension fee yet. I informed him he needs to contact his contact person at CMUD to verify that they started + it was my understanding that ext fee had to be paid upfront. He said he was confused. I informed him that I would have to turn this case over to supervisor for criminal summons. He said he had tank pumped recently but then it rained + overflow must be rain water now.

6-29-95 verified w/ Bobby Spires that he sent letter + it states he needs to pay an ext fee to start work.

N. C. Department of Environment, Health, and Natural Resources/Division of Environmental Health

ON-SITE WASTEWATER VIOLATION NOTICE

OWNER William Tabor MAILING ADDRESS 11633 Statesville,Rd., Huntersville 28078

OCCUPANT Tabor's Inn LOCATION 11633 Statesville Rd.

☐ RESIDENCE ☒ BUSINESS ☐ OTHER tax parcel 017-212-09

2/6

You are hereby notified that you are violating the Rules adopted by the North Carolina Commission for Health Services or Article 11 of Chapter 130A of the General Statutes of North Carolina by owning or controlling a residence, place of business, or place of public assembly which is not provided with an approved wastewater system. Your wastewater system is not in compliance; the following corrections must be made. Consult your Local Health Department for advice and required permits by calling telephone number

336-5569/336-5102 .

☒ Install/Repair wastewater system. You must obtain an Improvement Permit from the local health department prior to repairing your system.

☐ Other Repairs (*specify*) _____

☐ Eliminate wastewater discharge and connect to an approved wastewater system.

☒ Perform Maintenance (*specify*) Pump tank as necessary to keep sewage off surface of the ground.

☐ Pit Privy must be repaired/constructed.

If the wastewater violation is not brought into compliance by February 20, 1995, appropriate legal action will be taken.

Notice Issued January 20, 1995 (Date) Signed Susan M. Bateman, R.S. (Division of Environmental Health) Agent

Compliance _____ (Date) Signed _____ (Division of Environmental Health) Agent

DEHNR 1108 (Revised 9/92)
On-Site Wastewater Section (Review 10/94)

file

Mecklenburg County
Health Department

January 18, 1995

Dana Tabor
11633 Statesville Road
Huntersville, NC 28078

Dear Dana Tabor:

Re: 11633 Statesville Road (Tabors Inn)
File: 3392B
Parcel: 017-212-09

Receipt of the plans and specifications for a proposed expansion of the existing sewage treatment and disposal system to accommodate an increase of twelve additional living units for the above property is hereby acknowledged. Upon receipt of the information, a review was made of the material on file and a site evaluation was conducted. The plan was then reviewed in conjunction with provisions of 15A NCAC 18A .1900 "Laws and Rules for Sewage Treatment and Disposal Systems." Our comments are listed below:

1- The existing septic tank system servicing Tabors Inn is malfunctioning. This situation must be corrected. For your convenience an application for Improvement Permit is enclosed. It must be completed and submitted to This Department before repairs are made.

2- The daily design flow of sewage for the existing facility plus the proposed addition appears to be at least 3000 gallons per day. Therefore, the system will need to be designed by a registered professional engineer and will be subject to a review and approval by the State. Attached is a section from Rule .1938(f) in reference to plans and specifications needed.

For these reasons, the plans as submitted are disapproved. Once the above mentioned plans and specifications are submitted, a review of the file will continue. It is recommended that the engineer consult with Mr. William Marlin, Soil Scientist or myself concerning soil conditions relative to a sewage treatment and disposal system. Please be aware that a system of this size will require a management entity with a Private Certified Operator. For your information, I have included Rule .1961 which addresses maintenance of sewage systems.

We would like to see this project expedited as quickly as possible. If I can better explain what may appear a complex process, please call me at 336-5569. Please feel free to contact me if you have any questions and also to update me on your progress.

Sincerely,

Susan M. Bateman, R.S.
Individual Water and Wastewater Systems

cc: Mr. William Marlin, Soil Scientist
Mr. Bill Hardister, R.S., Program Chief, Food Facilities and Sanitation
Mr. Kelly Randall, R.S.

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

150' cliff 12/12/94 [ ] CRT

3392B

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

Date:

PERSON FILING APPLICATION:
NAME: Tabor (last) Dana (first) D (mi)
ADDRESS: 11633 Statesville Rd PHONE: (704) 875-2578
CITY: Huntersville STATE: NC ZIPCODE: 28078

PROPERTY OWNER: (Tabor's Inn of Huntersville Inc)
NAME: Tabor (last) William (first) B (mi)
ADDRESS: 11633 Statesville Rd PHONE: (704) 875-2578
CITY: Huntersville STATE: NC ZIPCODE: 28078

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 017-212-09
STREET ADDRESS: 11633 Statesville Rd, Huntersville, NC 28078
ZONING:

Township (check one):
[X] 0 Mecklenburg County [ ] 2 Davidson [ ] 4 Pineville [ ] 6 Huntersville
[ ] 1 Charlotte [ ] 3 Cornelius [ ] 5 Matthews [ ] 7 Mint Hill

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: LOT SIZE (in acres):

TYPE APPLICATION (check one):
[ ] SOIL TEST - INDIVIDUAL LOT (D)
[ ] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
[ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[ ] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[X] COMMERCIAL OR INDUSTRIAL (N)
[ ] SOIL TEST DEVELOPMENT (P)
[ ] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
[ ] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[ ] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
[ ] SINGLE MOBILE HOME (S) [ ] HOUSE (H) [ ] MULTIPLE FAMILY (U)
[ ] DOUBLE WIDE (D) [ ] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: NUMBER OCCUPANTS:
SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business Motel/Restaurant # Employees 5 Per Shift ___ ___ ___
Industrial Wastes (Y/N) N
Underground Storage Tanks On Property (Y/N) Y Type Septic

WATER SUPPLY (check one):
[ ] Community (C) [ ] Shared Well (S)
[X] Municipal (M) [ ] Other 'spring' (O)
[X] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[ ] Swimming Pool [ ] Jacuzzi [ ] Stable/Barn [ ] Workshop [ ] None
[ ] Garage [ ] Storage Building [ ] Deck/Patio [ ] Bedrooms [ ] 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 agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Dana D. Tabor Date: 12-12-94

NOTICE:

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 by this Department.

...This permit is not transferable.

...

[ ] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[ ] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[ ] ADDITION/REMOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Environmentalist Date

Director or Authorized Section Head Date

WATER : 12279

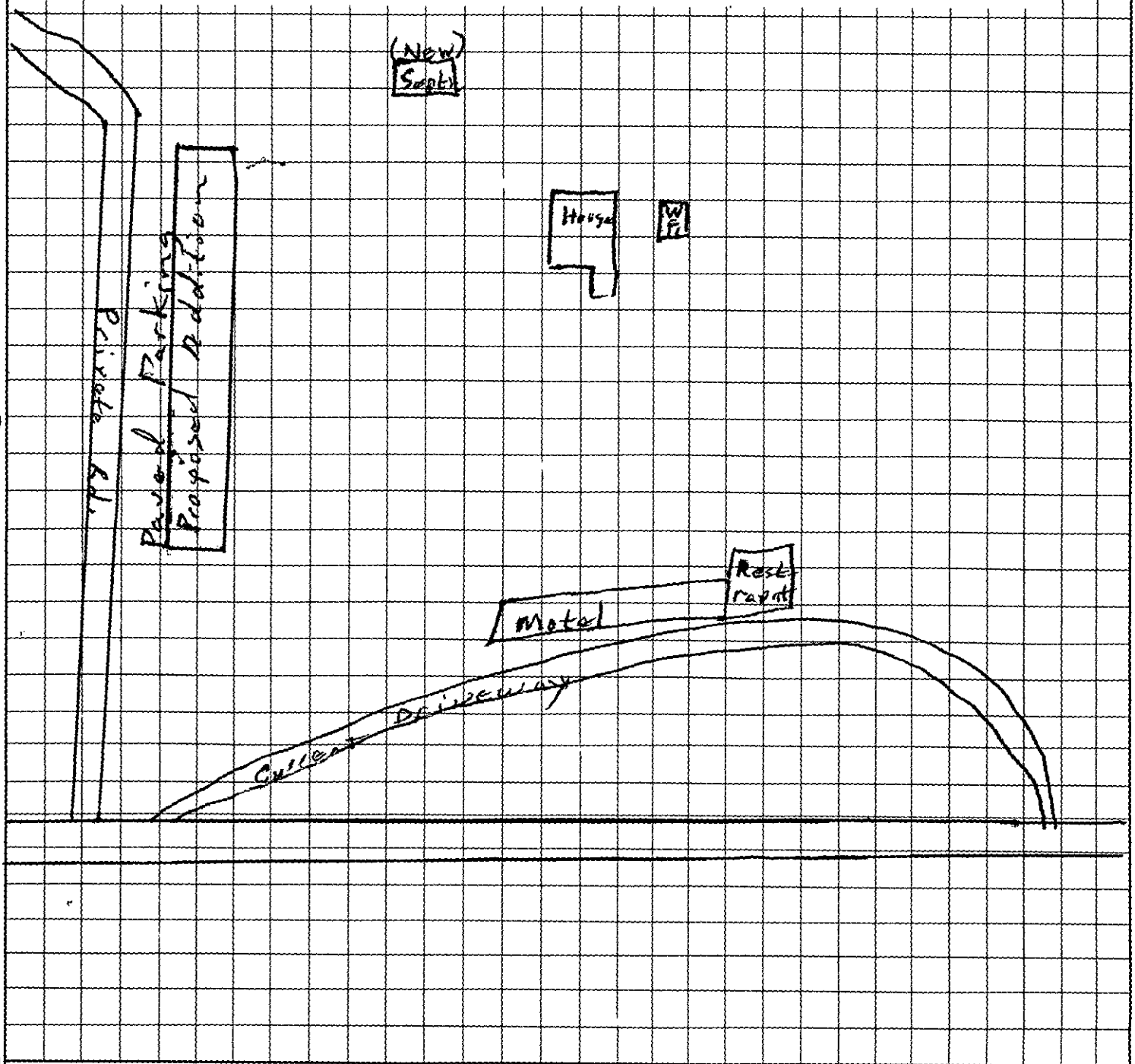
PROPOSED PLOT PLAN

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

FILE: 3392B

TC: 017-212-09

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.



Dana D. Tabor
OWNER/AGENT SIGNATURE

DATE 12-12-94

APPROVAL DATE _____

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

DATE 12/12/94

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION Mech

017-212-09
PARCEL NUMBER

11633 Statesville Rd
ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

NA
PROJECT NAME (IF APPLICABLE)

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

1. SUBDIVISION REGULATIONS	APPROVED	NOT APPROVED
2. FLOODWAY REGULATIONS	APPROVED	NOT APPROVED
3. WATERSHED PROTECTION	APPROVED	NOT APPROVED
4. COMMERCIAL DRAINAGE PLAN	APPROVED	NOT APPROVED
5. PUBLIC UTILITY EASEMENT	PRESENT	NOT PRESENT
6. PROPERTY FRONTS ON THOROUGHFARE	YES	NO
7. DRIVEWAY PERMIT REQUIRED	YES	NO
8. DOES PROJECT CONFLICT WITH ROAD PROJECT?	YES	NO

REMARKS: New Const

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE WHEN PAYING PERMIT FEE. CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

ALL OTHER FORMS OBSOLETE

☐ NEW ADDRESS

SIGNED: [signature]

REVISED 1/91

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 028640

File: 33928 Action 1

Parcel: 017-212-09 ☐ PC

Location: 11633 Statesville Road

Subdivision:

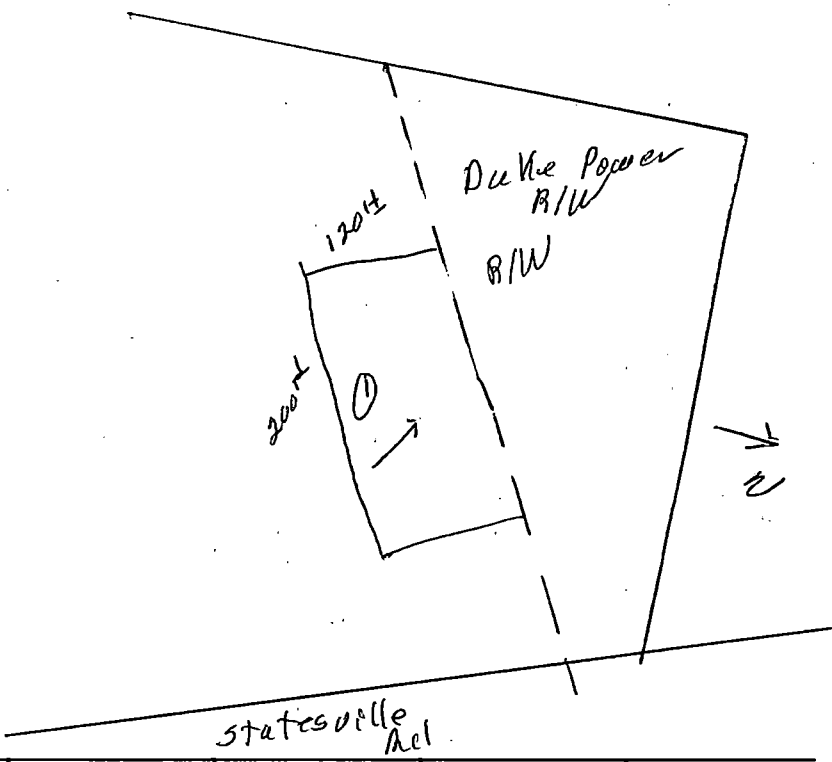
Lot: Block: Acres: Approx 1.5

Owner: Talon Inn of Huntersville
Address: 11633 Statesville Road
Huntersville, N.C. 28078

Comments: .3 gal/ft²/day LTAR
Area for repair of existing system

Described by: William R. Marli

Date: 7-28-95



***** EVALUATION KEY *****

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	(S) PS U 6-10%	S PS U	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U slightly Expansive clay	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	(S) PS U 7+48" To Soil wetness	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 42-48"	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	(S) PS U 7+48"	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	IV Cecil-Lilac					
Area Classification	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U

STATE OF NORTH CAROLINA
Mecklenburg COUNTY

INDIVIDUAL DEED
Printed and For Sale by
Kale-Lewing Co., Charlotte, N. C.

This Deed

Made this 29th day of February, A. D. 19 68 by and between

William Baker Tabor (Divorced)

of the County of Mecklenburg and State of North Carolina
Party of the first part, and

TABOR INN OF HUNTERSVILLE, INC.
a North Carolina Corporation

of the County of Mecklenburg and State of North Carolina
party of the second part:

WITNESSETH, that the said party of the first part, in consideration of one hundred ~~Dollars~~ and other valuable considerations ~~Dollars~~ to him paid by the party of the second part, the receipt of which is hereby acknowledged has bargained and sold, and by these presents do grant, bargain, sell and convey unto the said party of the second part and ~~successors and assigns~~ its successors and assigns all that certain tract of land, situate, lying and being in Long Creek Township, Mecklenburg County, State of North Carolina, and more particularly described as follows:

BEGINNING at a stone marking the northwest corder of tract C as shown upon the map of the L.W. Johnston Estate property recorded in Mecklenburg County Public Registry in Map Book 8, page 285, and runs thence S 82-07 E 571.14 feet to a point in the westerly margin of U.S. Highway 21; thence with the westerly margin of said Highway S 10-35 E 624.32 feet; thence with three new lines as follows: (1) N 82-08 W 449.36 feet; (2) S 7-52 W 47.43 feet; and (3) N 82-08 W 322.21 feet to a point in the easterly line of Tract C as shown upon the above mentioned map of the said Johnston property; thence with the easterly line of said Tract C, N 7-37 E 639.94 feet to the place of beginning, and containing 9.4 acres, more or less, as shown by the survey of a portion of Tract C of theL.W. Johnston Estate property made by A.V. Blankenship, C.E., dated July 27, 1961, to which reference is hereby made.

Being the same property conveyed to William Baker Tabor by deed dated October 24th, 1963, and duly recorded in Book 2475, at page 211, in the said Mecklenburg County Public Registry.

TO HAVE AND TO HOLD the aforesaid tract of land and all privileges and appurtenances thereto belonging to the said party of the second part, its successors and assigns, to its and their only use and behoof forever.

And the party of the first part, for himself, his heirs, executors and administrators, covenant with the said part Y of the second part its successors heirs and assigns, that he is seized of said premises in fee, and has the right to convey the same in fee simple; that the same are free and clear from all incumbrances, and that he will warrant and defend the said title to the same against the lawful claims of all persons whomsoever:

IN TESTIMONY WHEREOF, the said part Y of the first part to these presents has hereunto set his hand and seal, the day and year above written.

Signed, sealed and delivered in the presence of

Irene A. Elliott

William Tyler Tabor (Seal)
William Tyler Tabor (Divorcee)

(Seal)

(Seal)

(Seal)

STATE OF NORTH CAROLINA
Real Estate Excise Tax
$ 10.00

372

STATE OF North Carolina }
County of Mecklenburg } SS.

I, Jane S. Elliott, a Notary Public

for said County and State do hereby certify that

William Baker Tabor (Divorced)

and

wife, personally appeared before me this day and acknowledged the due execution of the foregoing (or annexed) instrument.

~~Let the instrument and the certificate be registered.~~

WITNESS my hand and notarial seal, this 29th day of February, A. D. 1968

My Commission expires: 2-15-70

Jane S. Elliott
Notary Public

STATE OF }
County of } SS.

I,

for said County and State do hereby certify that

and

wife, personally appeared before me this day and acknowledged the due execution of the foregoing (or annexed) instrument.

Let the instrument and the certificate be registered.

WITNESS my hand and seal, this day of, A. D. 19

INDIVIDUAL

Deed

William Baker Tabor (divorced)

TO

Tabor Inn of Huntersville, Inc.

Mailing Address

Route 1, Box 238-C,

Huntersville, North Carolina

Consideration . . . . . $

Dated day of, 19

Filed for registration on the day of, 19, at o'clock M., and registered in the office of Register of Deeds for County, N. C. on the day of, 19, at o'clock, in Book of Deeds, on Page, &c.

Register of Deeds

STATE OF North Carolina }
County of Mecklenburg } SS.

The foregoing (or annexed) certificate of Jane S. Elliott, a Notary Public, for said County and State is certified to be correct.

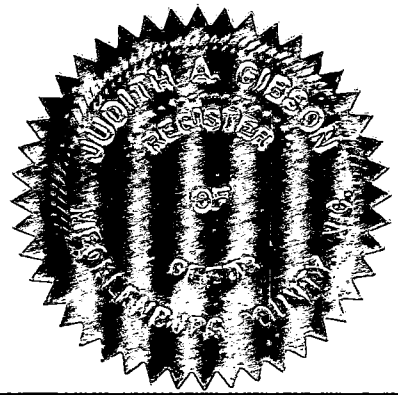
This 29th day of February, A. D. 19 68

Edgar Smith, Register of Deeds

BY Marjorie K. Line Deputy

Recorded in Book Page

Drawn By E. Clayton Selvey, Jr., Attorney at Law



STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, DO HEREBY CERTIFY THIS TO BE A TRUE COPY OF DOCUMENT FILED AND RECORDED IN BOOK 2949 PAGE(S) 370-372

THIS 18th DAY OF September 1995

JUDITH A. GIBSON, REGISTER OF DEEDS

BY: Patsy Deese

DEPUTY REGISTER OF DEEDS