

10925 DESPA DR

13706104

12/31/2007

duponbj

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

Amy Dulin 4160

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

26558 [X] 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: DULIN (last) Robert (first) C (mi)
ADDRESS: 7139 Apple Creek PHONE: 704 545-5359
CITY: Charlotte STATE: NC ZIPCODE: 28227

Date: 9/8/98

PROPERTY OWNER:
NAME: DULIN (last) Robert (first) C (mi)
ADDRESS: _____ PHONE: (__) _____
CITY: STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 137-061-04
STREET ADDRESS: 10925 DESPA DR
MINT HILL 28227
ZONING:

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

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: 40 LOT SIZE (in acres): 1/2

TYPE APPLICATION (check one):

[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (N)
[] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
Mobile Home Exchange

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

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 2

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: Robert C Dulin Date: 9/8/98

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.

... * USE EXISTING SYSTEM

SEE ADDITIONAL NOTES FOR DETAILS & RECEIPT FOR TAP FEE

[] 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 9-28-98 Date

WATER : 122791

PROPOSED PLOT PLAN

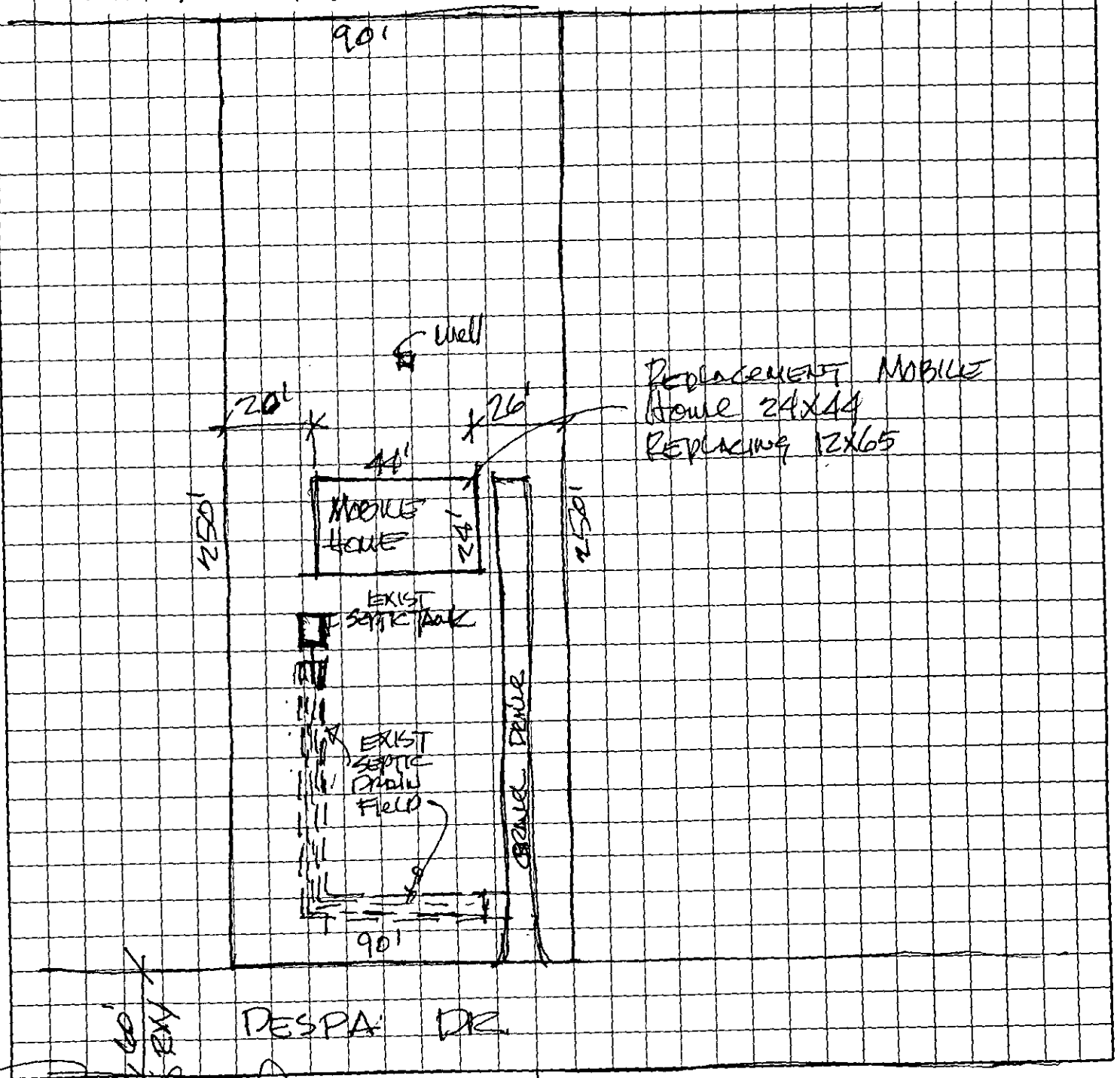
COPY

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

FILE: 26558

TC: _____

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.



OWNER/AGENT SIGNATURE

DATE 9/8/98

APPROVAL DATE _____

White - Health Department's Copy

Canary - E.H.S. Copy

Pink - Owner's Copy

LOCATION Mint Hill Bumpie Acres OWNER Reynolds WHITE _____ COLORED _____

ADDRESS lot 4 Deepa Dr. OCCUPANT _____ WHITE _____ COLORED _____

PRIVY:
Type _____ wood _____ concrete
Number _____
New _____ _____ date
Repaired _____ _____ date

WATER SUPPLY:
Source Well
If well, type
_____ (Bored)
✓ (Drilled)
_____ (Dug)

Distance from nearest pollution 75 ft.

SEPTIC TANK:
Material P.C.
Dimensions _____
Volume 1000 gal.
Type secondary treatment +10 Stone nitrification line

No. of bedrooms 2
Permit Number 10205 Date 8-27-68
Approved ✓ Date 8-29-68
Approved by Nichols
Contractor or Plumber Ralph Carr
Address Charlotte, N.C.
Remarks P.R. 118 Agreement Card Signed 8-23-68

FHA CASE NUMBER _____

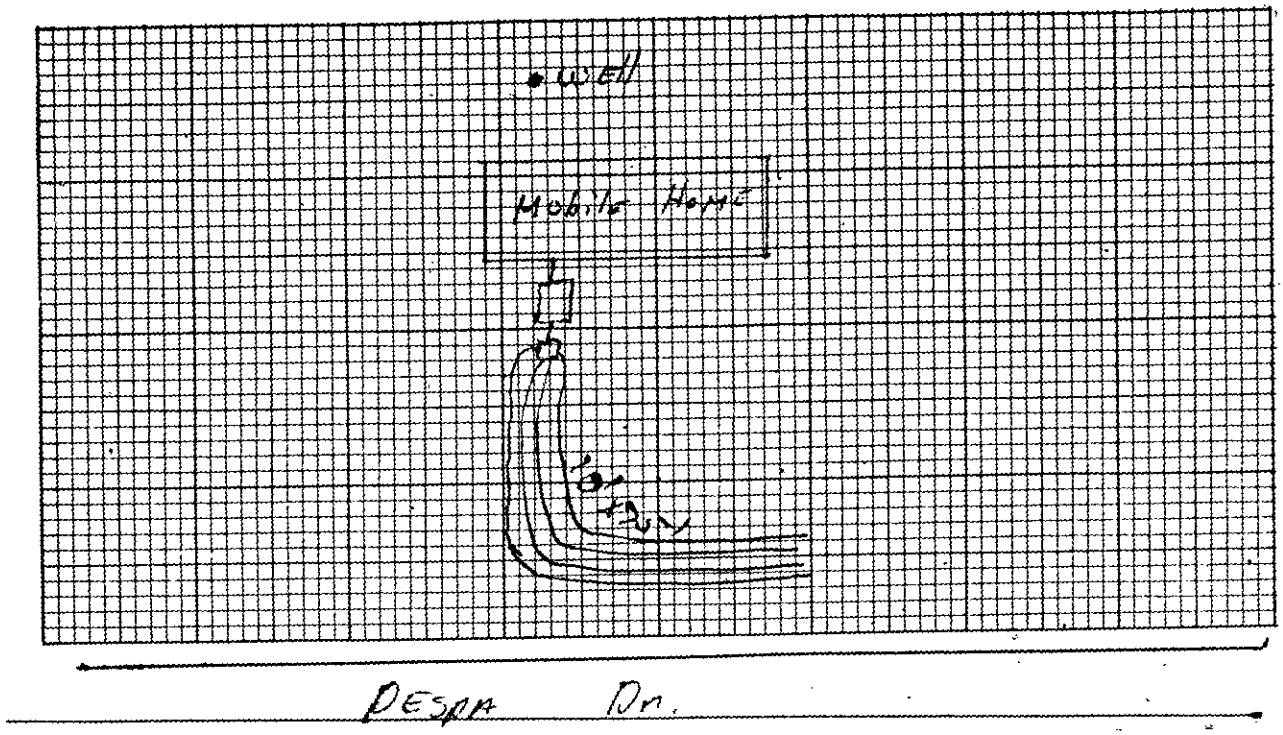
VA CASE NUMBER _____

10' X 75' ~~filter trench~~

SEWAGE DISPOSAL RECORD

Form No. 473 (Rev. 9/58)

NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



DATE: 9-21-98

CHARLOTTE MECKLENBURG UTILITY DEPT.

top 355 No 46910

RECEIVED FROM: Robert + Peggy Dulen

One thousand six hundred twenty — $1620.00

FOR: 10925 Despa Dr
4" Sewer Tap

Patti Burns
RECEIVED BY:

CASH ☐
RC
PE CHECK ☒ 4396
PH.
7139 APPLE CREEK DR.
CHARLOTTE, NC 28227

Date 9-21-98

PAY Charlotte Meck Utilities | $1,620.00

to the order of One thousand six hundred twenty Dollars

55602

BB&T
BRANCH BANKING AND TRUST COMPANY
6021 HICKORY GROVE ROAD
CHARLOTTE, NC 28215

Elite CLASSIC

Memo Sewer Tap

Signature Robert W. Dulen

⑆053003931⑆5216153288⑈ 4396

137-061-04

File 2655B

COPY

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...9-8-98 P.C. TO MR DULIN MS DULIN ABSENT. NO EVIDENCE OF PROBLEM. SYSTEM APPEARED TO BE 10'x 50' ROSU'S

OR

9-23-98 - ORD USE EXISTING SYSTEM

Environmentalist Date

LEFT MESSAGE

9-9-98 P.C. TO MR. DULIN EXPLAINED THAT RECORDS INDICATED SYSTEM WAS DESIGNED FOR 2BRM, I ASKED HIM TO CALL ME IF HE WANTED TO PURSUE EXPANSION

WATER : 122791

4-10-98 DISCUSSED SITUATION W/ JUDY R. SHE HAD TALKED W/ MR DULIN. HE ADVISED THAT SEWER WAS AVAILABLE @ STREET AND WOULD PAY TAP ON FEE BUT COULD NOT GET CONNECTED FOR 10 WEEKS. WE WILL RELEASE UPON RECEIPT OF COPY OF TAP ON FEE