

324 LAWING ST

05716209

5/10/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

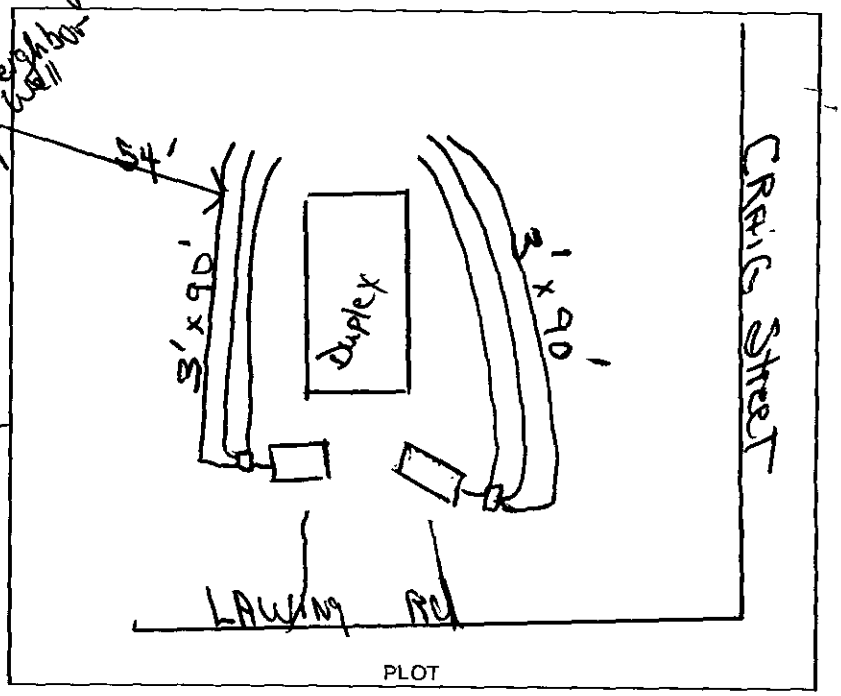
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 3779 A DATE: 12/7/88
TC: 057.162.09 ☐ L ☑ CRT
SERIAL № 11614

Name of Owner GRASS, Mamie B. Juris.:
Address of Property 324 Lawing Street

Inspection Data:

Tank Material PCC
Each System = 270
Total Length of Drainfield 540 Total
Each System 3 x 90'
Number of Lines 6 @ 90'
Cover Depth 24"
Water Supply Source Community
Distance to Water Source 10' required
Excavation Inspected 12/6, 12/7
Tank(s) Inspected 12/6, 12/7
Wash Line Inspected
High Water Alarm Inspected



PLOT

Design 1988 1500 St Cm 870SFT, 12" G Conc CTR# 22

The undersigned has inspected the Septic Tank System described above, and certifies it has been
☐ ~~installed~~ or constructed ☐ altered or repaired
☐ ~~in accordance~~ with the permit issued ☐ as detailed in the plot above
and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The issuance of this
☐ ~~Certificate~~ of Completion ☐ 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 10 NCAC 10A .1900 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.

COMMENTS: Note: System Shown Above on left Side of Plot had Center on last line (outer line) reduced to 6' at Closest Point to neighbors well to Allow distance requirement to be met (Closest point is 54')

Judy A Kiser R.S.
Environmentalist

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

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

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

(OFFICE USE ONLY)

FILE: 3779A

TC: _____

SERIAL: № 12384

☐ L ☑ CRT

JOB LOCATION

① ADDRESS: 324 (STREET NO.) Lawing (STREET) St. ② FILE: 3779A

③ JURISDICTION: _____ ④ TAX PARCEL NO.: 057 162 09

⑤ SUBDIVISION: _____ ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: Mamie (FIRST) B. (MIDDLE) Grass (LAST)

⑨ MAILING ADDRESS: 1351 East Morehead St.

⑩ CITY: Charlotte ⑪ STATE: N.C. ⑫ ZIP: 28204

⑬ PHONE: (WORK) _____ ⑭ (HOME) _____

REQUEST

This request is for a(n):

⑮ ☒ New permit

⑯ ☐ Repair or alteration permit

⑰ ☐ Authorization for mobile home exchange

⑱ ☒ Other (specify) Duplex

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home

㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 4 - 2 per unit

㉕ Type? _____

㉓ Maximum occupancy? 6 - 3 per unit

㉖ Maximum number of employees? _____

㉔ Basement? ☐ yes ☒ no

㉗ Maximum number of seats? _____

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☐ Individual well

B ☒ Municipal system

C ☐ Community well

D ☐ Community system

㉙ The undersigned, 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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Mamie B. Grass

Date: 8.24.87

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, 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 permit is issued by this Department.

. . . This permit is not transferable, and shall become null and void 36 months from the date of issuance.

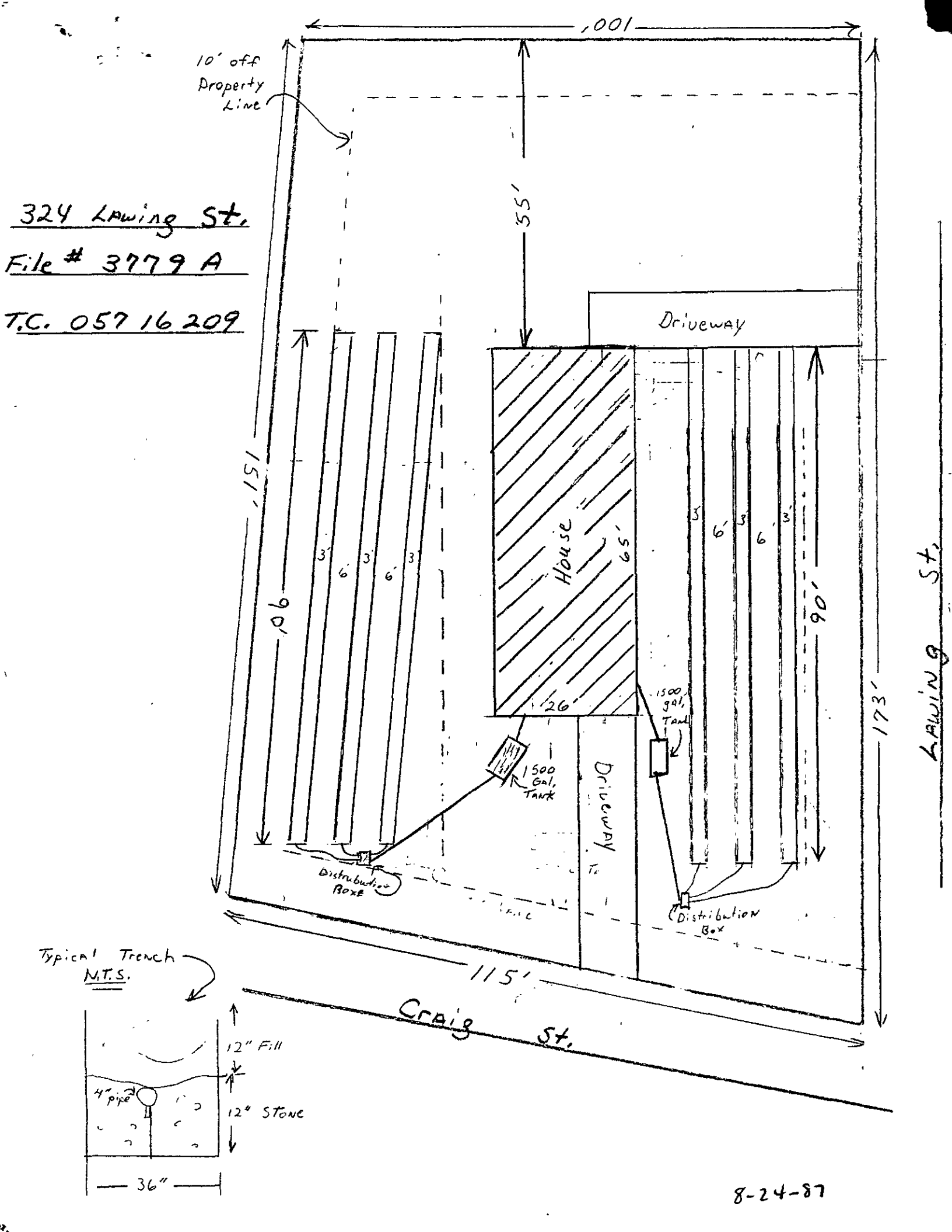
Judy J. Davis R.S. / 9/28/87

Environmentalist / Date

_____ /

Director or Authorized Section Head / Date

*This permit must be signed by the Director of Environmental Health or an authorized section head in order to be valid.


324 Lawing St.
File # 3779 A
T.C. 057 16 209
,001
10' off Property Line
55'
Driveway
House
65'
26'
,151
,06
3'
6'
3'
6'
3'
3'
6'
3'
6'
3'
90'
1500 Gal. Tank
1500 Gal. Tank
Driveway
Distribution Box
Distribution Box
115'
173'
Lawing St.
Craig St.
Typical Trench
N.T.S.
12" Fill
4" pipe
12" Stone
36"
8-24-87

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

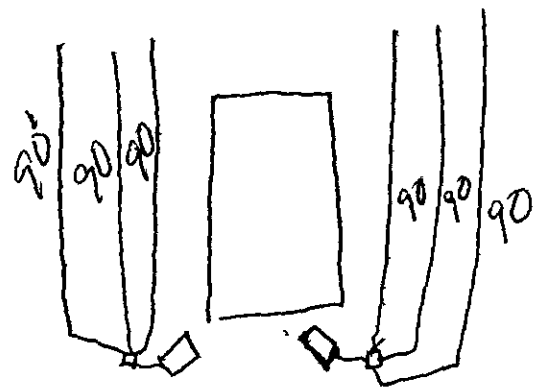
MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 3779A DATE: _____

TC: 057-162-09 ☐ L

SERIAL Nº 12329

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 8-24-87. All work shall be completed on or before Dec, 88, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .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 Department of Environmental Health 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 1500 gallons

Liquid Capacity of Dosing Tank _____ gallons

Tank Construction Concrete

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Total Line Length 270 X 2 feet

Number of Lines 3 (2)

Depth of Stone 12 inches

Distance from House 10 feet

Distance from Property Line 10 feet

Distance from Well Community feet

NAME OF OWNER Mamie B. Grass

LOCATION OF PROPERTY 324 Lawing St

Comments: Duplex

E. D. Daniel, RS
Division or Section Head

W. B. Ramsey
Environmentalist

* If this permit is for the installation or construction of a new system, it must be signed by the division or a section head of the Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

MECKLENBURG COUNTY
Department of Environmental Health

August 7th, 1987

Mamie B. Grass
1351 East Morehead Street
Charlotte, NC 28204

RE: Property located at 324 Lawing Street
FILE: 3779A
PARCEL: 05716209

Dear Sir:

At your request, a field investigation was conducted on the property designated above for the purpose of determining site suitability for the installation of a ground absorption sewage disposal system. The property was found to contain a limited area of soils which were classified as provisionally suitable for such an installation. A copy of the Site Evaluation Report (Serial Number 14494) is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit an Application For An Improvement Permit with an ACCURATELY dimensioned plot plan detailing the location of current and/or proposed buildings, wells and sewage disposal systems to this office. The plan will be reviewed and if it is found that the area of provisionally suitable soils is adequate for the proposed construction, an Improvement Permit will be issued by this Department.

If I may be of assistance, please do not hesitate to contact me.

Sincerely,

Sylvia D. Daniel, R.S.
Environmental Health Supervisor
Environmental Resources Division

Enclosure

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 14494

File: 3779A
Parcel: 05716209
Action 1
☐ PC

Location: 324 Lawing Street

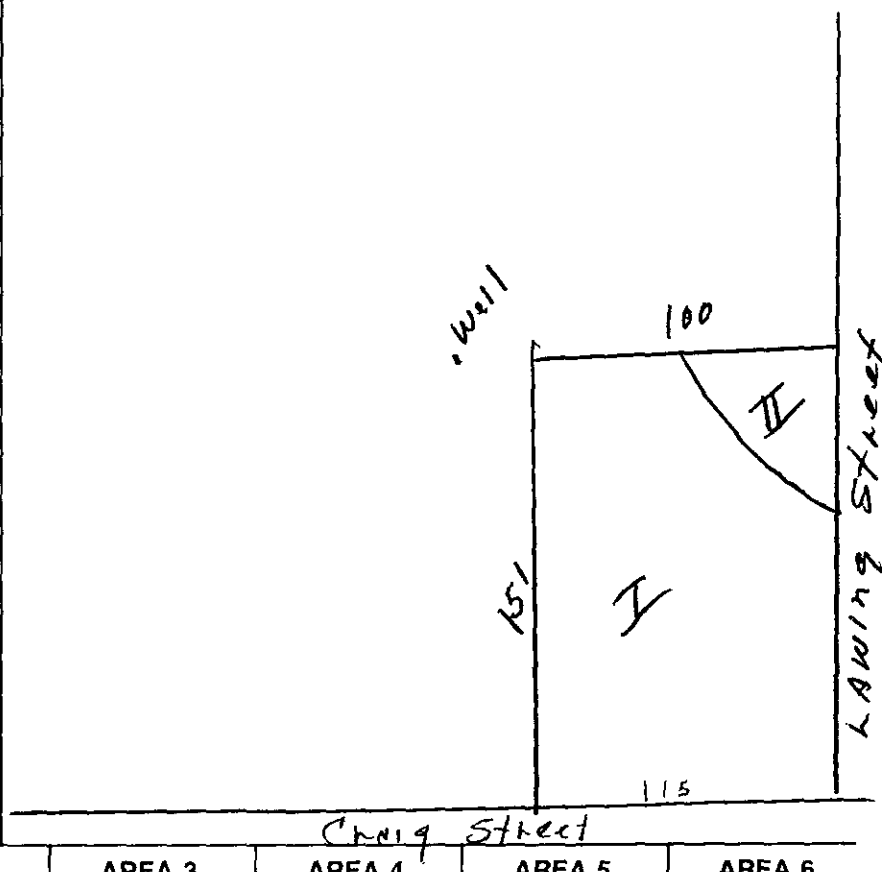
Subdivision:

Lot: Block: Acres: .49

Owner: Mamie B. Grass
Address: 1351 East Morehead Street
Charlotte, NC 28204

Comments: _____

Described by: W. B. Ramsey
Date: 8-6-87



***** 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 2-6	S (PS) U 2-6	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U	S (PS) U	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U	S (PS) U	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U	S PS (U) slow	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 39-41	S PS (U) 30-36	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U	S (PS) U	S PS U	S PS U	S PS U	S PS U
Available Space	S (PS) U For Small House only	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	IVa Cecil	IVa Depressed Area				
Area Classification	S (PS) U	S PS (U)	S PS U	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

FILE: 3779A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: 324 Hawing St - Charlotte N.C.

② SUBDIVISION: _____ ③ LOT: _____ ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: 057 PAGE NO.: 162 PARCEL NO.: 09

⑥ DEED REFERENCE: BOOK NO.: 2343-506 PAGE NO.: _____

OWNER

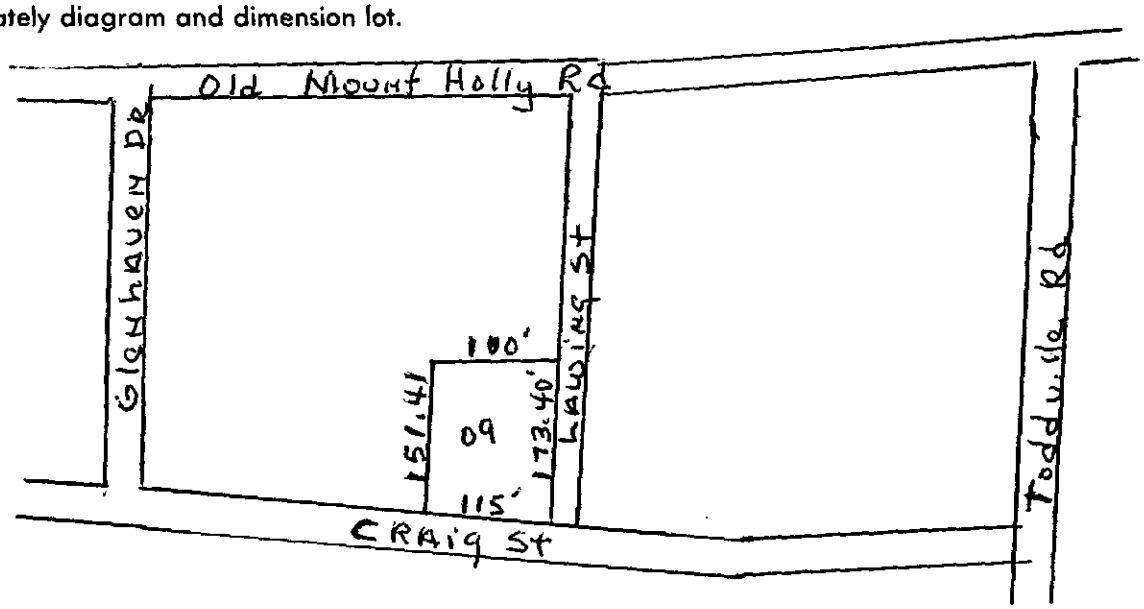
⑦ NAME: Mamie (FIRST) B. (MIDDLE) Grass (LAST)
c/o Jimmy h. Grubb

⑧ MAILING ADDRESS: 1351 East Morehead St

⑨ CITY: Charlotte ⑩ STATE: N.C. ⑪ ZIP: 28204

⑫ PHONE: (WORK) 376-7588 (HOME) 364-5408

⑬ Accurately diagram and dimension lot.



⑭ The undersigned, 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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Mamie B. Grass

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

Date: 6-26-87

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY