

8363 PROVIDENCE RD

22708128

1/2/2008

duponbj

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

227 081- 3313B

February 12, 1999

Mecklenburg County Government
William R. Marlin, C.P.S.S.
Health Department
700 North Tryon Street, Suite 211
Charlotte, NC 28202

RE: SEPTIC SYSTEM APPLICATION FOR TRACT "A", 8363 PROVIDENCE ROAD

Dear Mr. Marlin,

You requested the following information to assist you in the soil evaluation test to be done on our property in Greenwood subdivision off Providence Road:

1. The original date that the lot was deeded in its present form

2. A floor plan of our proposed construction

The floor plan is enclosed, first floor, second floor and basement/foundation. If you have any questions you can reach me by phone at 846-9441 or fax 846-9442.

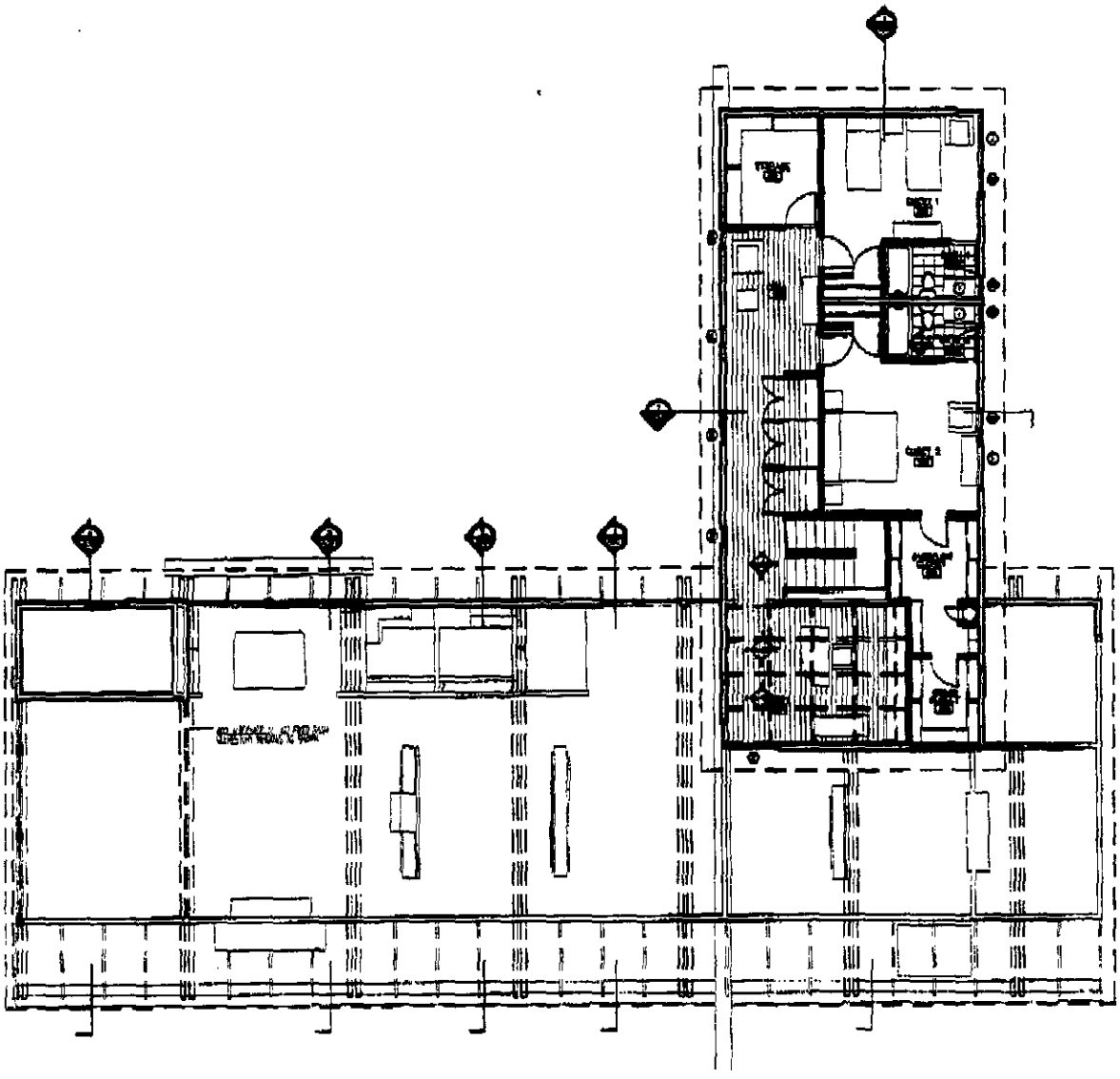
The question of the date of the deed was a little complicated. We purchased the lot in July, 1997 from Ronald and Sarah Wrenn. The Wrenns purchased the lot in December 1994 from Nationsbank as Trustee of the will of Herman Moore. (see enclosed copy of that deed) Prior to that it appears that Greenwood was subdivided and came into existence as a development in June 1989. (enclosed copy of composite map of Greenwood) I hope this answers your questions.

I will contact you as soon as I arrange for the construction corners to be flagged so that you can evaluate our site for the septic system. Thank you.

Sincerely,

Deborah Carmazzi

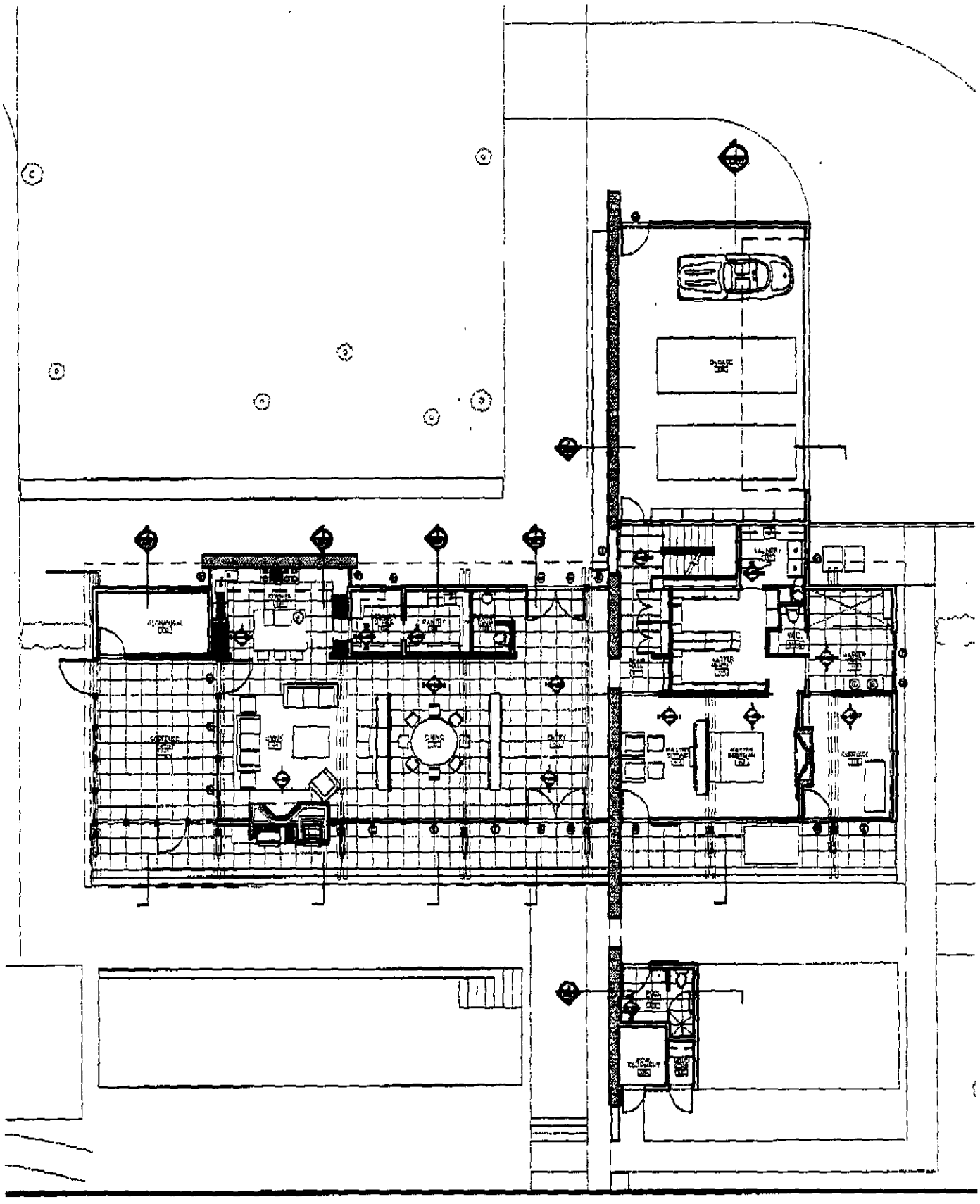
Deborah Carmazzi



WILLIAM McDONOUGH + PARTNERS
410 EAST WATER STREET
CHARLOTTESVILLE, VA 22902
PHONE: 804 979-1111
FAX: 804 979-1112

Project Name: **CARMAZZI HOUSE**
CHARLOTTE, NORTH CAROLINA
Project Number: 9806
Date: 10 February 1999 Scale: 1/4" = 1'-0"
Sheet Title: SECOND FLOOR PLAN

DS-35(



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Project Name: **CARMAZZI HOUSE**
CHARLOTTE, NORTH CAROLINA
Project Number: 9806
Date: 10 February 1999 Scale: 1/4" = 1'-0"
Sheet Title: FIRST FLOOR PLAN

DS-351

FEE: 100.00 CK # 5169
DATE: 1/12/99 gc

APPLICATION FOR IMPROVEMENT PERMIT FOR RESIDENTIAL SITE INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM

[ ] CRT

TYPE APPLICATION: ✓ NEW SYSTEM __ EXPANSION/ ALTERATION OF EXISTING SYSTEM __ REPAIR OF EXISTING SYSTEM

NORTH CAROLINA
DEPARTMENT OF ENVIRONMENT,
HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

FILE #: 33138

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 227.08 & .28

STREET ADDRESS: 9303 PROVIDENCE RD., CHARLOTTE

SUBDIVISION OR MOBILE HOME PARK NAME: GREENWOOD

LOT NUMBER: TRACT 'A'

TYPE OF BUILDING (CHECK ONE):

__ SINGLE MOBILE HOME(S)
__ DOUBLE WIDE (D)
✓ HOUSE (H)
__ MODULAR HOME (M)
__ MULTIPLE FAMILY (U)
__ OTHER (O)

TOWNSHIP (CHECK ONE):

✓ 0 MECKLENBURG
__ 1 CHARLOTTE
__ 2 DAVIDSON
__ 3 CORNELIUS
__ 4 PINEVILLE
__ 5 MATTHEWS
__ 6 HUNTERSVILLE
__ 7 MINT HILL

HEATED SQUARE FOOTAGE: 4,825

NUMBER OF BEDROOMS: 3 | NUMBER OF OCCUPANTS: 2

CLOSING DATE 30 JULY 1997

FOUNDATION FOR RESIDENCE:

__ WITHOUT BASEMENT
__ ON SLAB
✓ CRAWL SPACE
✓ WITH BASEMENT /PLUMBING
__ WITH BASEMENT /NO PLUMBING

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: __ YES ✓ NO TYPE: _____

WATER SUPPLY (CHECK ONE):
__ COMMUNITY (C)
__ SHARED WELL (S)
✓ MUNICIPAL (M)
__ OTHER 'SPRINGS' (O)
__ PRIVATE WELL (P)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES __ YES ✓ NO
EXISTING WASTEWATER SYSTEMS __ YES ✓ NO
EASTMENTS OR RIGHT-OF-WAYS ✓ YES __ NO
WELL, SPRINGS OR WATERLINES __ YES ✓ NO
DESIGNATED WETLANDS __ YES ✓ NO

PROPERTY OWNER:

NAME: CARMAZZI, R. FRANK
(LAST) (FIRST) (MI)

ADDRESS: 9817 KELLY WOODS LANE

CITY: CHARLOTTE STATE: NC ZIP: 28277

DAYTIME PHONE: 704.846-9441

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME:
(LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) -

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. 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 Carmazzi DATE: 1-12-99

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102

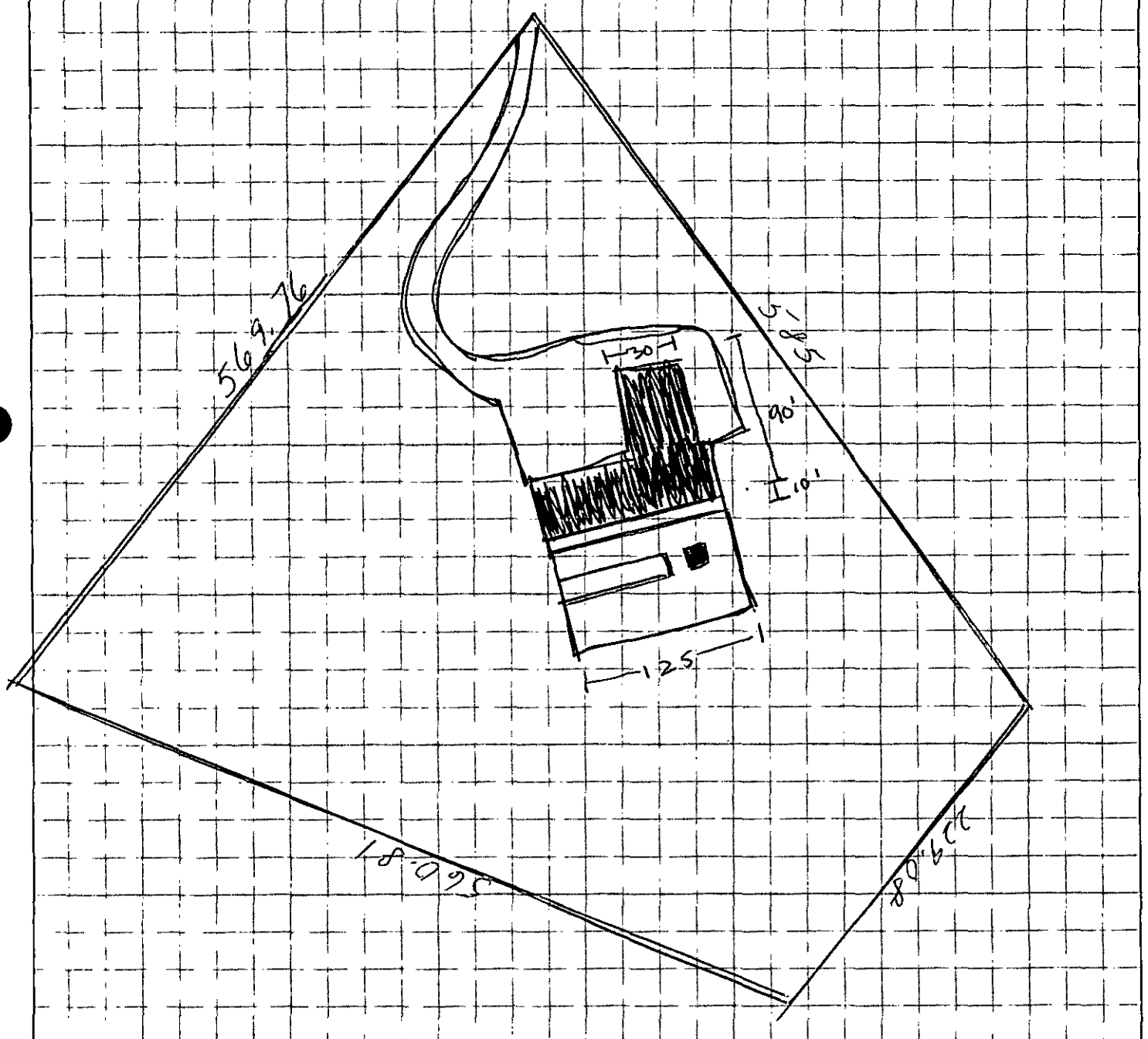
PROPOSED PLOT PLAN

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

FILE: 3313B

TC: 227-08/-28

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.



Sign: Patrick Cummings

Date: 1-12-99

APPROVAL DATE _____

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy

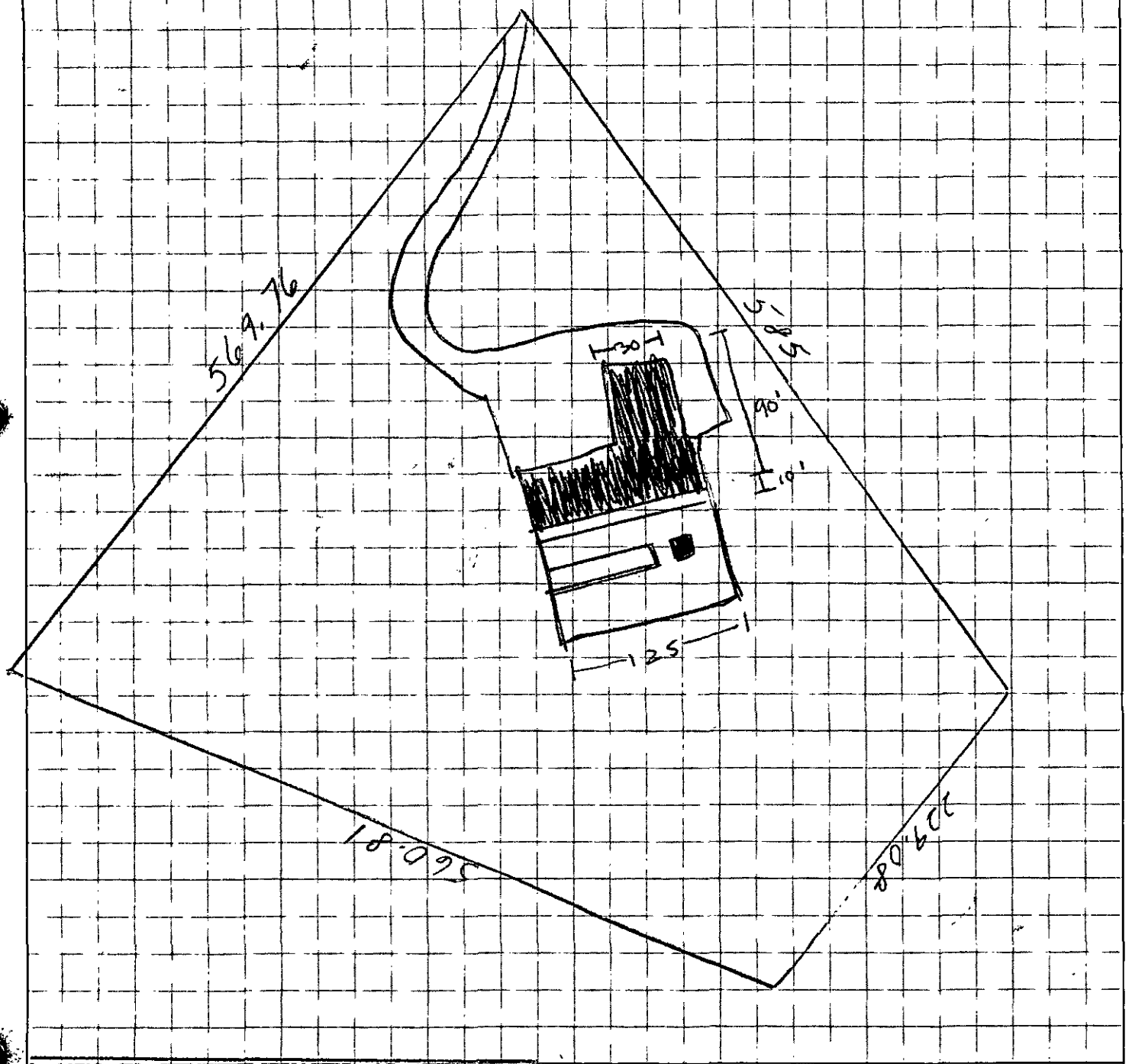
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HEALTH DEPARTMENT
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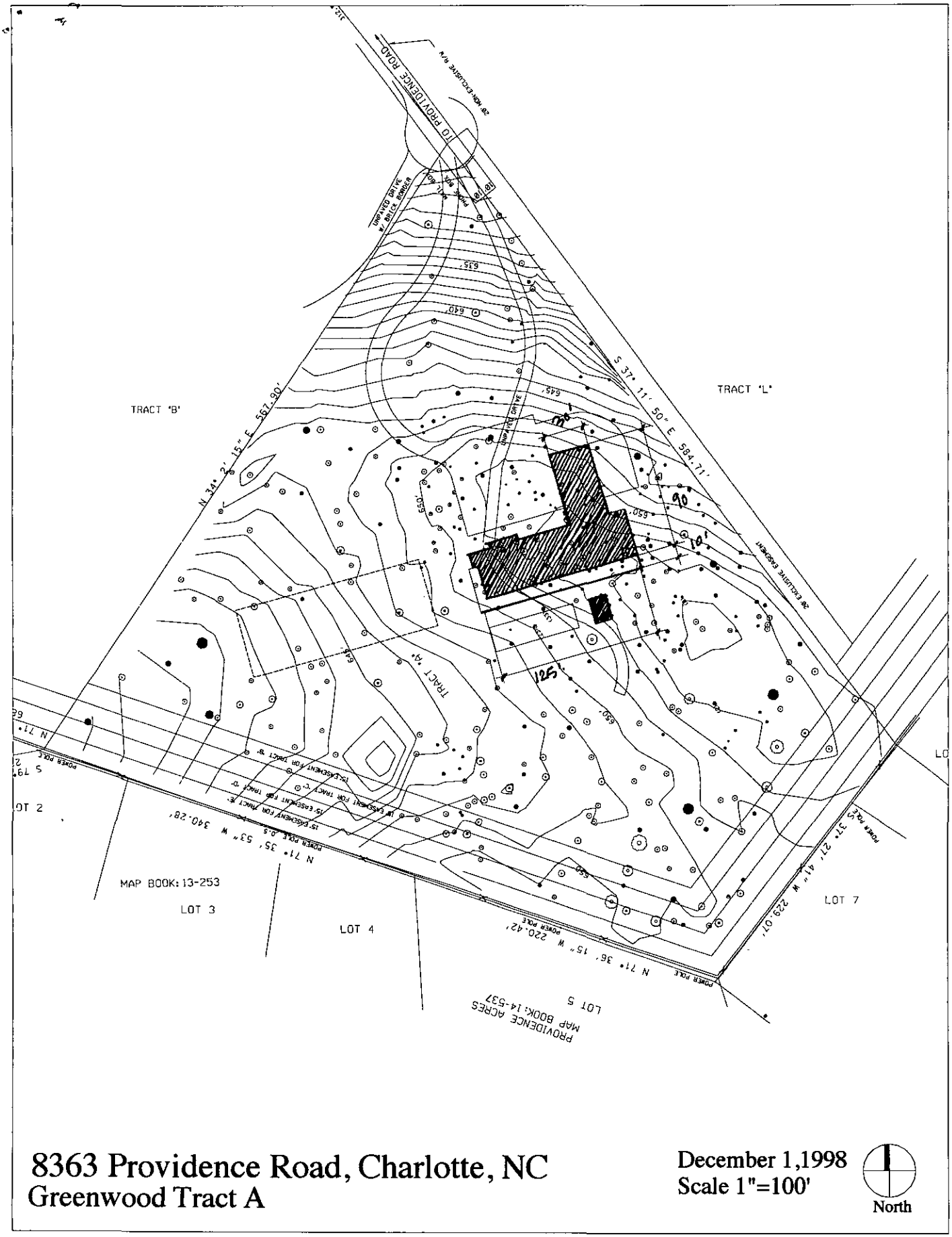


Sign: [signature]

Date: 1-12-99

APPROVAL DATE _____

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy



8363 Providence Road, Charlotte, NC
Greenwood Tract A

December 1,1998
Scale 1"=100'

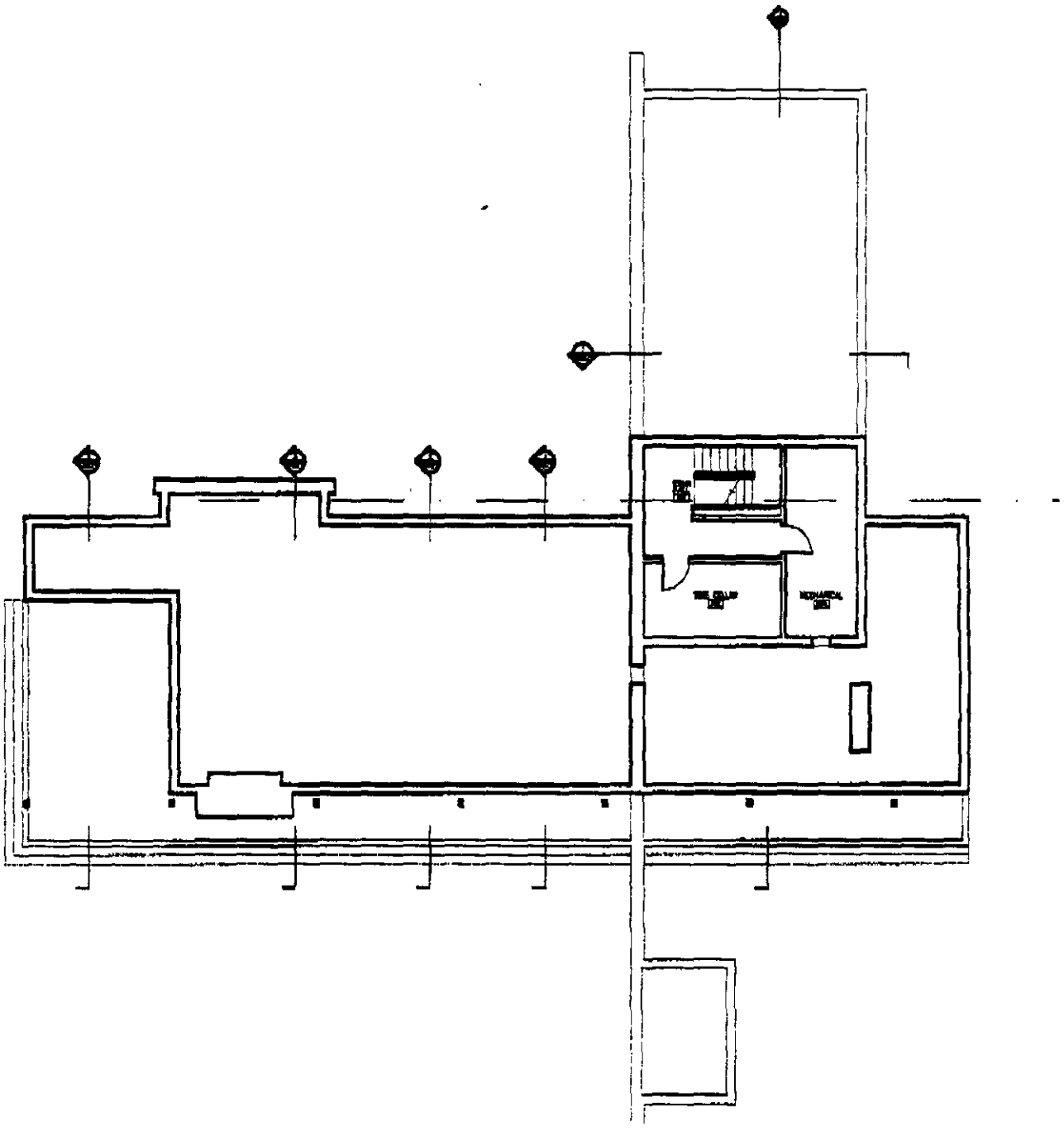
North

FILE #

COMMENTS

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR	CONSISTENCE MOIST	CONSISTENCE WET
R-RIDGE	I	S-SAND	1.2-0.8		
S-SHOULDER SLOPE		LS-LOAMY SAND		VFR-VERY FRIABLE	NS-NON-STICKY
L-LINEAR SLOPE				FR-FRIABLE	SS-SLIGHTLYSTICKY
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6	FI-FIRM	S-STICKY
N-NOSE SLOPE		L-LOAM		VFI-VERY FIRM	VS-VERY STICKY
H-HEAD SLOPE				EFI-EXTREMELY FIRM	NP-NON-PLASTIC
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3		SP-SLIGHTLYSTICKY
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM			P-PLASTIC
T-TERRACE		CL-CLAY LOAM			VP-VERY PLASTIC
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM			
	IV	SC-SANDY CLAY	0.4-0.1		
		SIC-SILTY CLAY			
		O-ORGANIC			

STRUCTURE	MINERALOGY
SG-SINGLE GRAIN	SLIGHTLY EXPANSIVE
M-MASSIVE	
CR-CRUMB	EXPANSIVE
GR-GRANULAR	
SBK-SUBANGULAR BLOCKY	
ABK-ANGULAR BLOCKY	
PL-PLATY	
PR-PRISMATIC	



WILLIAM McDONOUGH + PARTNERS

410 EAST WATER STREET
CHARLOTTESVILLE, VA 22902
PHONE: 804 979-1111
FAX: 804 979-1112

Project Name: **CARMAZZI HOUSE**
CHARLOTTE, NORTH CAROLINA

Project Number: 9806

Date: 10 February 1999 Scale: 1/4" = 1'-0"

Sheet Title: BASEMENT/FOUNDATION PLAN

DS-35

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 3313B DATE: 7/24/01

TC: 227-089-28 ☐ L ☒ CRT

SERIAL Nº 18605

Name of Owner Frank R. Caramazi Juris.: _____

Address of Property 8363 Providence Road

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400'

Number of Lines 4 @ 100'

Cover Depth 8-12"

Water Supply Source well

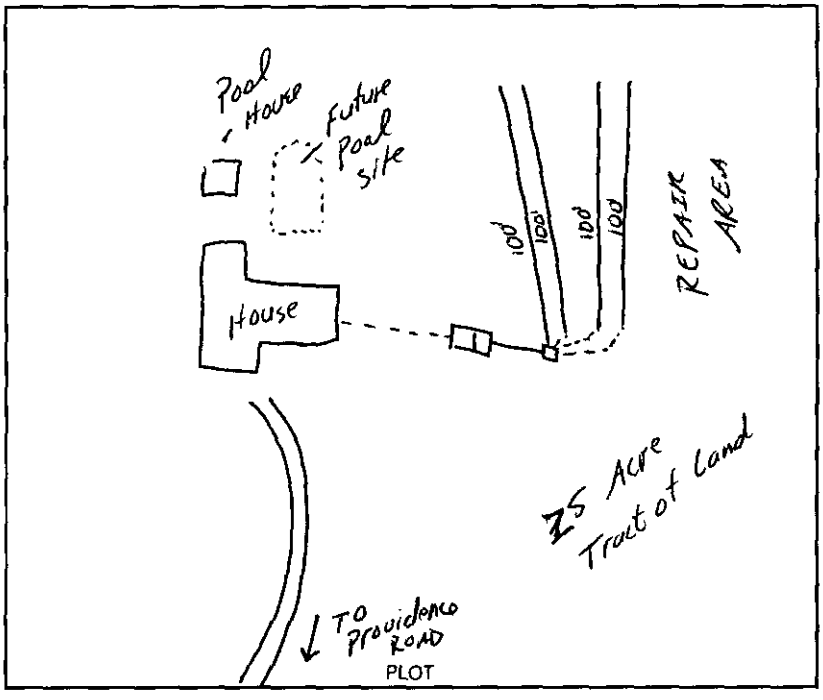
Distance to Water Source >100'

Excavation Inspected 7/24/01

Tank(s) Inspected 7/24/01

Wash Line Inspected NA

High Water Alarm Inspected NA



Design 1500 ST, 1200SFT, CON, 12" Stone, Cecil-like CTR# Norwood

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 I5A 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 ☒ 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 I5A 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: Three Bedroom Residence

4 lines x 100' x 3' x 12" Stone

Type II Conventional System / Type II Repair

Jerry L. Mickler R.S.
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

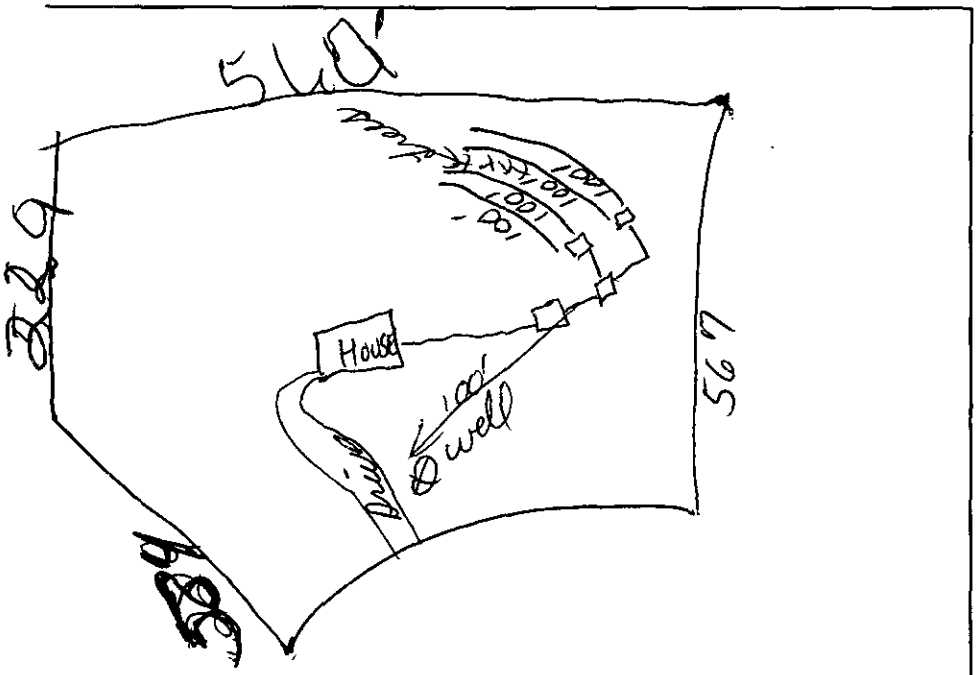
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 331313 DATE: 07-20-01

TC: 227-08-28 L

SERIAL Nº 18800

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 01-12-99. All work shall be completed on or before 08-20-01, after which date this permit shall be null and void. The system shall meet all of the construction requirements of I5A 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 1500 gallons

Liquid Capacity of Dosing Tank N/A gallons

Tank Construction PCC

Trench Depth ≤ 36"

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Trench Walls Scored and Porous yes

Total Line Length 400' feet

Number of Lines 4 @ 100'

Depth of Stone 12" 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 Frank R. Caramazi

LOCATION OF PROPERTY 8363 Providence Rd.

Comments: Type II system designed for a (3) bedroom design unit. Type II Repair Area

Joshua R. Sellers R-S
Environmental Health Specialist

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

w/o Rest

FEE: 200 AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION A D
DATE: 1-14-00 SC VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE X

DATE: 01-13-2000 PERMIT NO: 3313 B
PARCEL NO: 227-084-28

JOB LOCATION ADDRESS: 8363 Providence Rd.
PROPERTY OWNER: Frank R. Carmazzi
BUILDING CONTRACTOR: _____
SUBDIVISION NAME: Greenwood
AUTHORIZATION ISSUED BY: Joshua R. Sellers R.S. DATE: 01-13-2000
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 3313B, AND THE ATTACHED SITE PLAN WITH SYSTEM DETAILS. CONSTRUCTION AND INSTALLATION MUST ALSO MEET ALL REQUIREMENTS SET FORTH IN THE RULES GOVERNING SANITARY SEWAGE COLLECTION, TREATMENT, AND DISPOSAL AND ANY OTHER APPLICABLE RULES AND LAWS.

2. AN INSTALLATION, CONSTRUCTION, ALTERATION AND/OR REPAIR APPROVAL MUST BE SECURED **PRIOR** TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH MECKLENBURG COUNTY HEALTH DEPARTMENT.

3. ANY ALTERATION IN SITE OR SOIL CONDITIONS (INCLUDING LOCATION OF STRUCTURES AND APPURTENANCES) OR MODIFICATION IN USE, DESIGN WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS AS SPECIFIED IN THE ASSOCIATED IMPROVEMENT PERMIT AND APPLICATION, MAY SUBJECT THIS AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: _____

OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITIONS OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

Jeff Hanwick 1-14-00
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

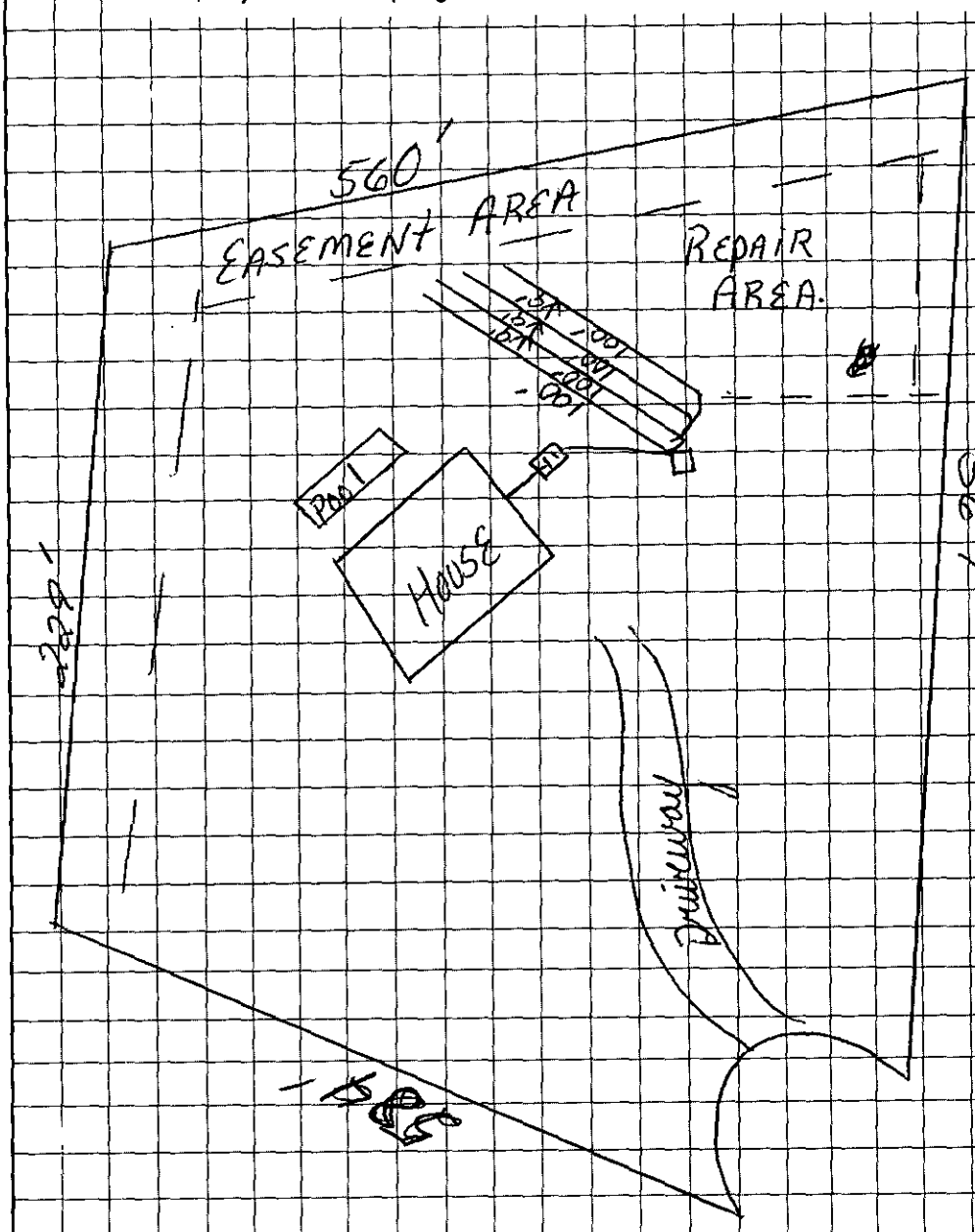
PROPOSED PLOT PLAN

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

FILE: 3313B

TC: 227-08-28

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.



(1) Drawing Not to Scale.
(2) 1500 ST 400 LFT 12"G
(3) Trenches to be installed level on contour
(4) Effluent filter and Riser Rules Apply.
(5) System designed for a 3 bedroom design unit.

JEFF SAWKA
OWNER/AGENT SIGNATURE

DATE 1-14-00

APPROVAL DATE _____

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

Permit Number: 3313B

Tax Number: 227-08A-28

- The IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be NO grading, filling or disturbance of the soil in the area of the septic tank system or repair area.
- CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a Building Permit. The Construction Authorization is NOT transferable. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization
- Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

Basement	___ Yes	V No	___ Partial Basement	
Type Primary Wastewater System Type (circle one): I (II) III IV V VI	V Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1	
.3 Long-term acceptance rate	360 Max gallons/day wastewater flow	1200' Absorption Area (sq ft)	9' Trench spacing (min. on centers)	
N Serviced by private well	1500 Gallon septic tank	400' Total trench length (ft)	24" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)	
3 Bedrooms in residence	N/A Gallon pump tank	12" Depth of stone		

Any surface waters present: NO Type: Minimum separation distance:

Site modifications required:

Additional Conditions:

Repair Area System Type Type (circle one): I (II) III IV V VI	V Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1	
1200' Absorption Area (Sq ft) ___ Total Trench Length (Ft)	12" Depth of Stone Trench	9' Trench spacing (min. on centers)	24" Maximum Trench Depth	

For existing system, enter the year originally installed:

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 Sewage, 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 Improvement permit is transferable.

Joshua R. Sellers R.S. 01-13-00
DEHNR Authorized Agent Date

JEFF TANWICK 1-14-00
Owner/Agent Signature Date

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR.
SUITE 211
700 N. TRYON ST.
CHARLOTTE, N.C. 28202.
(704) 336-5102

NORTH CAROLINA DEPARTMENT OF
ENVIRONMENTAL, HEALTH,
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

IWWS-100195

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

400 #1

Sheet: _____
Property ID: 221-004-26
Lot #: Tract A
File #: 3313B

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Frank Carmazzi APPLICANT: _____
ADDRESS: 4617 Kelly Woods Lane, Charlotte DATE EVALUATED: 5-6-99
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949) 360gpd PROPERTY SIZE: 3.1+/-
LOCATION OF SITE: 8363 Providence Road PROPERTY RECORDED: _____
WATER SUPPLY: ☐Private ☑Public ☐Well ☐Spring ☐Other _____
EVALUATION METHOD: ☑Augur Boring ☐Pit ☐Cut
TYPE OF WASTEWATER: ☑Sewage ☐Industrial Process ☐Mixed

PROFILE #	.1940 Landscape Position/ Slope % (Slopes 2-10%)	Horizon Depth (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS &LTAR
1	LS	0-6"	gr/scl	Fr/SEXPl SS/SP	>42" TO Soil Wetness	42"	N/A	None	PS .39(F) IV
		6-42"	SBK/ SC	F/SEXPl SP					
2	LS	0-4"	gr/scl	Fr/SEXPl SS/SP	>32" TO Soil Wetness	32"	N/A	None	US .39(F) IV
		4-24"	SBK/ SC	F/SEXPl SP					
		24-32"	SBK/ scl	Fr/SEXPl SS/SP					
3	LS	0-5"	gr/ scl	Fr/SEXPl SS/SP	>46" TO Soil Wetness	46"	N/A	None	PS .39(F) IV
		5-42"	SBK/ SC	F/SEXPl SP					
		42-46"	SBK/ scl	Fr/SEXPl SS/SP					
4	LS	0-5"	gr/ scl	Fr/SEXPl SS/SP	>46" TO Soil Wetness	46"	N/A	None	PS .39(F) IV
		5-46"	SBK/ SC	F/SEXPl SP					
5	LS	0-4"	gr/sl	Fr/SEXPl NS/NP ~~SS/SP~~	>46" TO Soil Wetness	46"	N/A	None	PS .39(F) IV
		4-18"	~~WKSBK~~/ scl	Fr/SEXPl SS/SP					
		18-43"	SBK/ SC	Fr/SEXPl SP					
		43-48"	SBK/ scl	Fr/SEXPl SS/SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): Provisionally Suitable
EVALUATED BY: W.A. Mailey LSS - 5-7-99
OTHER(S) PRESENT: D. Carmazzi

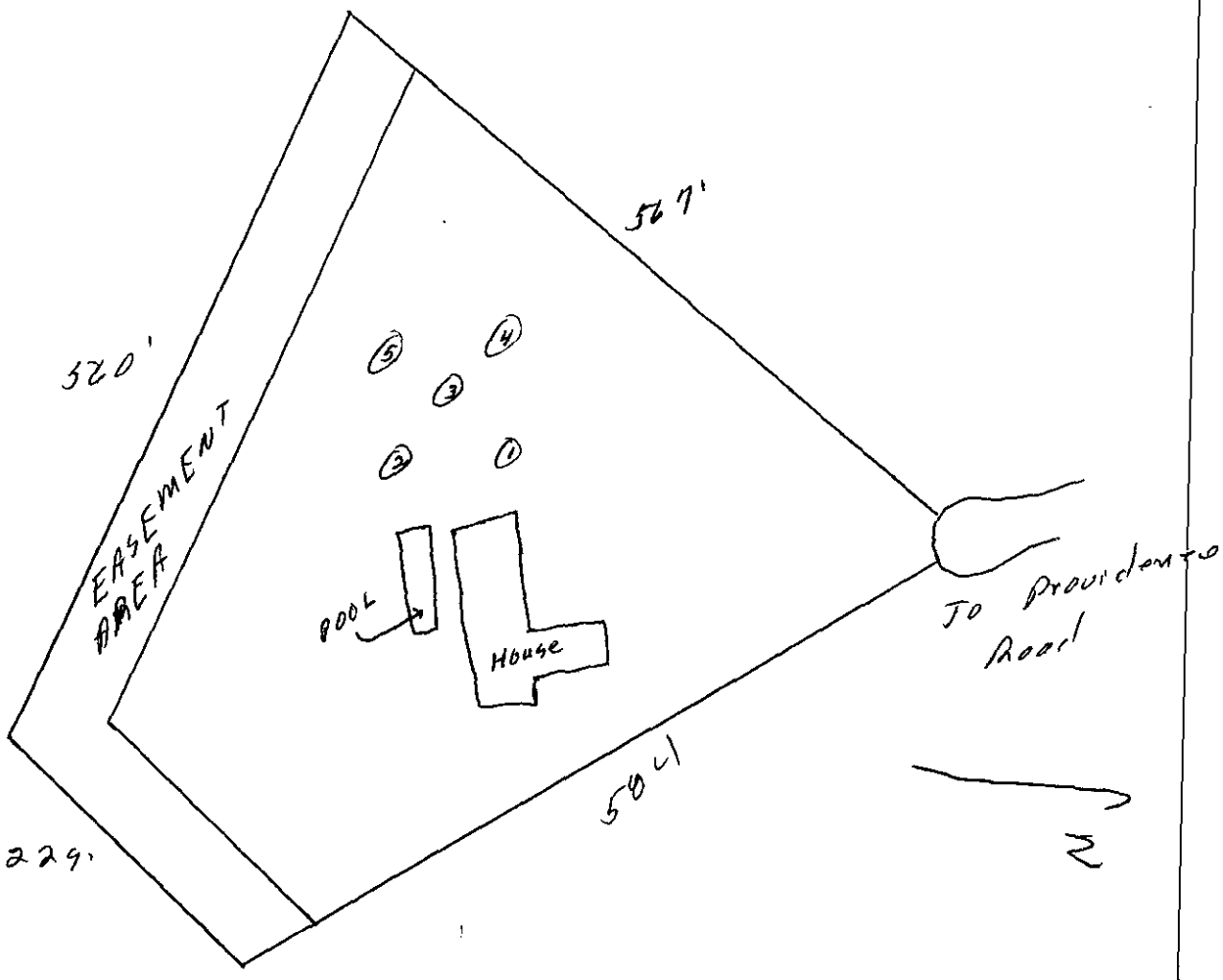
FILE # 3313B

COMMENTS 100% Repair

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR
R-RIDGE	I	S-SAND	1.2-0.8
S-SHOULDER SLOPE		LS-LOAMY SAND	
L-LINEAR SLOPE			
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6
N-NOSE SLOPE		L-LOAM	
H-HEAD SLOPE			
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM	
T-TERRACE		CL-CLAY LOAM	
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM	
	IV	SC-SANDY CLAY	0.4-0.1
		SIC-SILTY CLAY	
		O-ORGANIC	

CONSISTENCE MOIST	WET
VFR-VERY FRIABLE	NS-NON-STICKY
FR-FRIABLE	SS-SLIGHTLYSTICKY
FI-FIRM	S-STICKY
VFI-VERY FIRM	VS-VERY STICKY
EFI-EXTREMELY FIRM	NP-NON-PLASTIC
	SP-SLIGHTLYSTICKY
	P-PLASTIC
	VP-VERY PLASTIC

STRUCTURE	MINERALOGY
SG-SINGLE GRAIN	SLIGHTLY EXPANSIVE
M-MASSIVE	
CR-CRUMB	EXPANSIVE
GR-GRANULAR	
SBK-SUBANGULAR BLOCKY	
ABK-ANGULAR BLOCKY	
PL-PLATY	
PR-PRISMATIC	



INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

3313B

Pd. #150.00 9/22/94 cash

☐ 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: Wrenn (last) Ronald (first) H (mi)

ADDRESS: 2423 Beretania Cir PHONE: (704) 365-0498

CITY: Clt STATE: ZIPCODE:

Date: 227-081-28

PROPERTY OWNER:

NAME: Moore (last) Herman (first) A. (mi)

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 227-08428

STREET ADDRESS: off Providence Rd

ADDRESS: 8363 Providence Rd PHONE: (704) 542-0763

CITY: Charlotte STATE: NC ZIPCODE: 28270

ZONING:

Township (check one):
☒ 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: A LOT SIZE (in acres): 5.10

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)
☐ COMMERCIAL OR INDUSTRIAL (N)
☐ SOIL TEST DEVELOPMENT (P)
☐ ADDITION - GARAGE OR REMOVATION/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: 5 NUMBER OCCUPANTS: 4

SYSTEN 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)
☐ 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: [signature] Date: 9-23-94

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/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

_____ Date
Environmentalist

_____ Date
Director or Authorized Section Head

WATER : 122791

exact house site in order to complete the Imp. Permit - He BASICALLY wanted to know the Status before he purchased the lot & Understands nothing is in writing

until we meet again to complete the IP

JKaser

11/8/94

Me, Bill Marlin Joe Lynn & Lanny Thompson met on Site with Mr. Wrenn. we indicated the Primary Site & a repair area & informed him he should STAKE OUT the

Map Book 23 Page 148

State of North Carolina, County of Mecklenburg
The foregoing certificate(s) of
ANNE S. DAVIS
a Notary(ies) Public (is) (are) certified to be correct.
This 22nd day of JUNE 19 89
Anne S. Powers, Register of Deeds
By: Deputy

Robert E. Rembert, Registered Land Surveyor being duly ... do certify that the plat upon which this certificate ... was prepared in accordance with G.S. 47-30 as ... ed. is in all respects correct according to the best of ... owledge and belief and was prepared from an actual ... made under my supervision on the 2nd day of ... DC ____, 1989, with a max linear error of closure: ... 000, and a max field error of angular closure of 7" sec. ... gle.

Robert E. Rembert
Registered Land Surveyor

NORTH CAROLINA REGISTERED SEAL X L1055 LAND SURVEYOR ROBERT E. REMBERT

...nburg County

...ary Public of the County and State aforesaid, certify that ... E. Rembert, a registered land surveyor, personally appeared ... this day and acknowledged the execution of the foregoing instru... ...ent my hand and official stamp or seal, this 2nd day ... ____, 1989.

Anne S. Davis
Notary Public

...sion expires NOV. 14, 1993

...of North Carolina, County of Mecklenburg ... S. Powers, Register of Deeds for ... County and State, hereby certify that ... is a true copy of ... Office of the Register of Deeds ... County, North Carolina, in ... Witness my official seal, this the ... day of ... 19...

Deputy

MAGNETIC NORTH

MAP 15-65 PROVIDENCE ACRS. LOT 13

SILVER FOX RD. 60' R/W

NOTE: Cul-De-Sac Recorded Map Book 21 Pg. 974

LOT 17

MAP Book 15-65

W. W. WATERS 3670-330

TRACT "K" 5.02 ACS.

TRACT "L"

TRACT "J" 5.15 ACS.

TRACT "I" 5.25 ACS.

TRACT "H" J.M. ROSS 5.01 AC. Deed 2977-277 Dated 6-14-68

TRACT "A" 5.01 ACS.

TRACT "B" 5.57 ACS.

TRACT "C" 5.41 ACS.

TRACT "D"

S. 6-29-00 E. 1151.95

N. 83-38 E. 86.00

N. 37-34-00 E. 473.38

PROVIDENCE ACRES MAP BOOK 14-530

Note: 35' Min. Bldg. Line

15' Easement for Tract "E" "D" "C" "B" "A"

15' Son. Sewer easement

15' Son. Sewer Lateral Easements

20' Non Exclusive R/W

50'

585.00

400.00

325.00

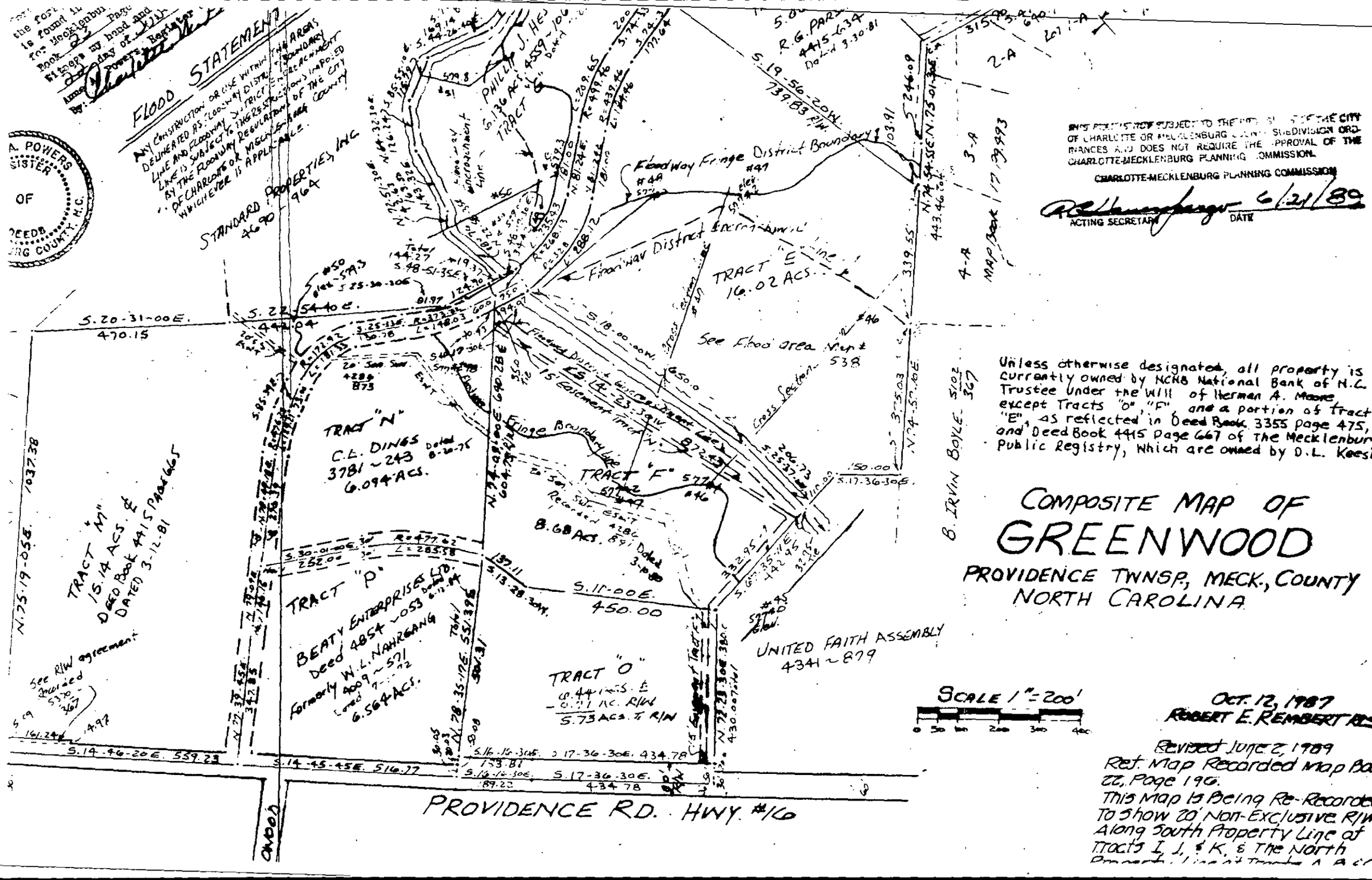
220.50

LOT 5

FOUR MILE CREEK

See Flood Area Map # 449

RECEIVED FOR REGISTRATION
89 JUN 22 AM 11:44
MECKLENBURG CO., N.C.


FLOOD STATEMENT
ANY CONSTRUCTION OR USE WITHIN THE AREAS DELINEATED AS FLOODWAY DISTRICT, FLOODWAY BOUNDARY LINE AND FLOODWAY DISTRICT ENCROACHMENT LINE IS SUBJECT TO INGRESS-REGRESS RESTRICTIONS IMPOSED BY THE FLOODWAY REGULATIONS OF THE CITY OF CHARLOTTE OR MECKLENBURG COUNTY WHICHEVER IS APPLICABLE.
STANDARD PROPERTIES INC
460 - 964
THIS PLAT IS NOT SUBJECT TO THE SUBDIVISION ORDINANCES OF THE CITY OF CHARLOTTE OR MECKLENBURG COUNTY AND DOES NOT REQUIRE THE APPROVAL OF THE CHARLOTTE-MECKLENBURG PLANNING COMMISSION.
CHARLOTTE-MECKLENBURG PLANNING COMMISSION
ACTING SECRETARY
DATE
Floodway Fringe District Boundary
Floodway District Encroachment Line
Fringe District Encroachment Line
Fringe Boundary Line
TRACT "E" INC.
16.02 ACS.
See Flood Area Map #538
TRACT "N"
C.E. DINGS
3781 ~ 243
6.094 ACS.
TRACT "M"
15.14 ACS. ±
DEED BOOK 4415 PAGE 665
DATED 3-12-81
TRACT "P"
BEATY ENTERPRISES LTD.
Deed 4854 ~ 053
Formerly W.L. NAHRGANG
4009 ~ 571
6.564 ACS.
TRACT "O"
6.44 ACS. ±
5.73 ACS. ± R/W
TRACT "F"
8.68 ACS.
UNITED FAITH ASSEMBLY
4341 ~ 879
B. IRVIN BOYLE 5102 367
PHILLIP J. HESS
5.136 ACS.
TRACT "L"
4559 ~ 106
R.G. PARRY
4415 ~ 634
Dated 3-30-81
Unless otherwise designated, all property is currently owned by NCNB National Bank of N.C. Trustee Under the Will of Herman A. Moore except Tracts "O" "F" and a portion of tract "E", as reflected in Deed Book 3355 page 475, and Deed Book 4415 page 667 of the Mecklenburg Public Registry, which are owned by D.L. Keesler.
COMPOSITE MAP OF
GREENWOOD
PROVIDENCE TWNSP., MECK., COUNTY
NORTH CAROLINA
SCALE 1" = 200'
OCT. 12, 1987
ROBERT E. REMBERT RLS.
Revised June 2, 1989
Ref. Map Recorded Map Book 22, Page 190.
This Map is Being Re-Recorded To Show 20' Non-Exclusive R/W Along South Property Line of Tracts I, J, & K, & The North
PROVIDENCE RD. HWY #16

Excise Tax | Recording Time, Book and Page

Tax Lot No. 227-081-28 Parcel Identifier No.

Verified by County on the day of , 19

by

Mail after recording to Caudle & Spears, P.A., P/D Box 864

This instrument was prepared by Caudle & Spears, P.A.

Brief description for the Index: Tract A, Greenwood

NORTH CAROLINA SPECIAL WARRANTY DEED

THIS DEED made this 1st day of December 1986, by and between

GRANTOR	GRANTEE
NATIONSBANK OF NORTH CAROLINA, N.A., Trustee under the Will of Herman Aubrey Pecre	DONALD H. BROWN and wife, SARAH J. BROWN 2423 Dorsetania Circle Charlotte, NC 28211

Enter in appropriate block for each party: name, address, and, if appropriate, character of entity, e.g. corporation or partnership.

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in the City of Providence Township, Mecklenburg County, North Carolina and more particularly described as follows:

See Exhibit A attached hereto and incorporated herein by reference.

... by Easement recorded in ...

... above described property is recorded in Plat Book 23 ..., page 147 ...

... HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging ... heirs and assigns forever.

... and the Grantor covenants with the Grantee, that Grantor has done nothing to impair such title as Grantor received, ... Grantor will warrant and defend the title against the lawful claims of all persons claiming by, under or ... except for the exceptions hereinafter stated.

Title to the property hereinabove described is subject to the following exceptions:

1. Ad valorem property taxes for 1994, which have been prorated and paid at closing.
2. All valid and enforceable easements, restrictions and covenants of record.

IN WITNESS WHEREOF, the Grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, the day and year first above written.

NATIONSBANK OF NORTH CAROLINA, N.A.,
By: Bill of Herman Aubrey Moore
(Title)
Attest:
Secretary (Corporate Seal)

USE BLACK INK ONLY

STATE OF NORTH CAROLINA, ... County.

I, a Notary Public of the County and State aforesaid, certify that .....

personally appeared before me this day and acknowledged the execution of the foregoing instrument.

Witness my hand and official stamp or seal, this ..... day of ..... 19.....

My commission expires: .....

USE BLACK INK ONLY

NORTH CAROLINA, Stanly County.

I, a Notary Public of the County and State aforesaid, certify that Quinton Hannon personally came before me this day and acknowledged that he is Assistant Secretary of NationsBank of North Carolina, N.A., a national banking association, and that by authority duly given and as the act of the corporation, the foregoing instrument was signed in its name by its President, sealed with its corporate seal and attested by him as its Assistant Secretary.

Witness my hand and official stamp or seal, this 1 day of December, 19 94.

My commission expires: November 14, 1998

Notary Public

The foregoing certificate(s) of Kathy P. Morgan

... were certified to be correct. This instrument and this certificate are duly registered at the date and time and in the Book and Page shown on the first page hereof.

REGISTER OF DEEDS FOR ..... County

By: ..... Deputy/Assistant Register of Deeds

... Rev. © 1977 - Jarrett Printing Co., Inc. - Fort Lee (2), New Jersey 07024

EXHIBIT A

BEING all of Tract "A" of GREENWOOD as shown on that certain Composite Map of Greenwood recorded at Map Book 27, Page 148 of the Mecklenburg County Public Registry (hereinafter "the Map").

TOGETHER WITH a fifteen-foot (15') exclusive easement extending from said Tract A across Tract L of Greenwood to Silver Fox Road as shown on the Map, for ingress and egress between Tract A and Silver Fox Road.

TOGETHER WITH AND SUBJECT TO a twenty-foot (20') wide non-exclusive right-of-way beginning at the common boundary of Tract C of Greenwood and that certain "Easement Tract" described in the Easement Agreement recorded at Book 6187, Page 654 of the Mecklenburg County Public Registry (which common boundary is shown on the Map), and ending on the common boundary between Tract L and Tract A 50 feet from the common corner of Tracts L, B and L, as shown on the Map.

TOGETHER WITH a twenty-foot (20') wide exclusive easement for ingress, egress and landscaping buffer on Tract L of Greenwood running along the common boundary line between Tracts A and L (which common boundary line is shown on the Map) beginning 75 feet from the southernmost point of the common boundary lines of Lots A and L and running parallel with said boundary line to the northernmost point of the common boundary line of Lots A and L (also being the common corner of Tracts A, B and L), as shown on a Survey of Tract A, Greenwood by R.B. Pharr & Associates, Registered Surveyors, dated October 24, 1994 and revised November 29, 1994.

AND SUBJECT TO four 15-foot wide exclusive easements for the benefit of Tracts B, C, D and E, respectively, as shown on the Map.

State of North Carolina, County of Mecklenburg

The foregoing certificate(s) of Kathy F. Morgan

Notary(ies) Public is/are certified to be correct.

This 2nd day of December 19 94

JUDITH A. GIBSON, REGISTER OF DEEDS

By: Felicia J. Bennett Deputy Register of Deeds

230430-1

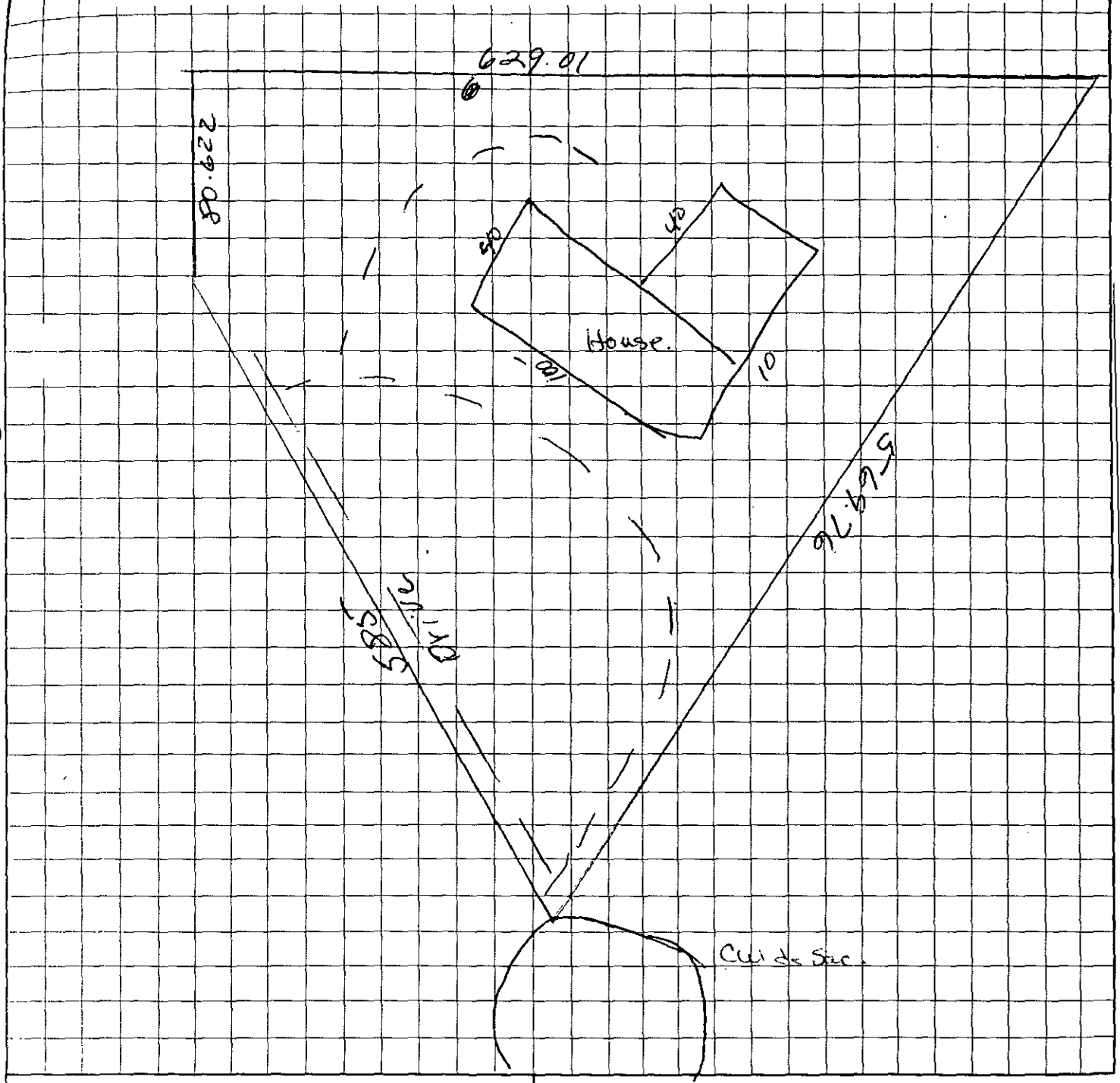
PROPOSED PLOT PLAN

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

FILE: 3313B

TC: 227-081-28

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

APPROVAL DATE

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

CHARGE

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

Charge Slip

Date: 1/14/99

Name/Company: Phillip Thomas Construction

Sanitation _____

Vector Control _____

IWWS ✓

Service: Const. Auth.
Operation Permit

Fee: $ 400.00

NOTICE:

A processing fee of $20.00 will be charged for all returned checks in accordance with N.C. General Statute 25-3-512.

rm Bond 1/14/00 400.00

Completed by _____ Collected by _____

MECKLENBURG COUNTY
ENGINEERING & BUILDING STANDARDS DEPARTMENT

Miscellaneous Fees

Requestor (Please print): Jeff Stanwick	Phone #: 377-7588	Date Requested: 1-14-00	Date Filled: 1-14-00
Account Name: Phillip Thomas Construction Co ☐ Cash ☒ Charge		Account No.: B44180	
I certify that I am authorized to charge this account for this service.			
Signature: Jeff Stanwick	Printed Name: Jeff Stanwick	Date: 1-14-00	

Fee or Charge

T.C.	Qty.	Type	Unit Cost	Total Cost
021		Single Lot Grading Permit (Please list address below)		
112		Zoning Board of Adjustment ☐ Residential Variance Request ☐ Commercial Variance Request ☐ Residential Interpretation ☐ Commercial Interpretation		
113		Zoning Citation(s) # _____		
		☐ 117: Certificate of Compliance* ☐ 118: Certificate of Occupancy* (original is free)	$10.00 ea.	
119		Change of Contractor*	$10.00 ea.	
121		Letters of Certification/Verification	$10.00 ea.	
122		Monthly Statistical Reports	$10.00 ea.	
124		Research & Retrieval of Documents		
125		Temporary Utilities/Occupancy*	$30.00/insp.	
		Local License Card/Exam ☐ 128: Mechanical ☐ 129: Plumbing ☐ 132: Electrical		
		Development Activities Plan Review ☐ 002: Commercial Drainage ☐ 005: Erosion Control ☐ 016: Subdivision ☐ 006: Final Plat Review		
425		City of Charlotte Fire - Plan Review		
		Map Sales		
1	~~377~~	Other: Construction Authorization	400.00	400.00
	0701	Other:		
Payment received by: EVJ		Date: 1-14-00 By: EVJ	Total:	400.00

* Please list all permit numbers/addresses that relate to your request. A request for temporary utilities (gas and electric) would require two permit numbers.

8363 Providence Rd.		

B-216NS 8/95

DIVISION

w/ Rec

FEE: 200 AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION
DATE: 1-14-00 SC VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

DATE: 01-13-2000 PERMIT NO: 3313 B
PARCEL NO: 227-084-28

JOB LOCATION ADDRESS: 8363 Providence Rd.
PROPERTY OWNER: Frank R. Carmazzi
BUILDING CONTRACTOR:
SUBDIVISION NAME: Greenwood
AUTHORIZATION ISSUED BY: Joshua R. Sellers R.S. DATE: 01-13-2000
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 3313B, AND THE ATTACHED SITE PLAN WITH SYSTEM DETAILS. CONSTRUCTION AND INSTALLATION MUST ALSO MEET ALL REQUIREMENTS SET FORTH IN THE RULES GOVERNING SANITARY SEWAGE COLLECTION, TREATMENT, AND DISPOSAL AND ANY OTHER APPLICABLE RULES AND LAWS.

2. AN INSTALLATION, CONSTRUCTION, ALTERATION AND/OR REPAIR APPROVAL MUST BE SECURED PRIOR TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH MECKLENBURG COUNTY HEALTH DEPARTMENT.

3. ANY ALTERATION IN SITE OR SOIL CONDITIONS (INCLUDING LOCATION OF STRUCTURES AND APPURTENANCES) OR MODIFICATION IN USE, DESIGN WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS AS SPECIFIED IN THE ASSOCIATED IMPROVEMENT PERMIT AND APPLICATION, MAY SUBJECT THIS AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: _____

OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITIONS OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

[signature] 1-14-00

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

227 081- 3313-B

February 12, 1999

Mecklenburg County Government
William R. Marlin, C.P.S.S.
Health Department
700 North Tryon Street, Suite 211
Charlotte, NC 28202

RE: SEPTIC SYSTEM APPLICATION FOR TRACT "A", 8363 PROVIDENCE ROAD

Dear Mr. Marlin,

You requested the following information to assist you in the soil evaluation test to be done on our property in Greenwood subdivision off Providence Road:

1. The original date that the lot was deeded in its present form

2. A floor plan of our proposed construction

The floor plan is enclosed, first floor, second floor and basement/foundation. If you have any questions you can reach me by phone at 846-9441 or fax 846-9442.

The question of the date of the deed was a little complicated. We purchased the lot in July, 1997 from Ronald and Sarah Wrenn. The Wrenns purchased the lot in December 1994 from Nationsbank as Trustee of the will of Herman Moore. (see enclosed copy of that deed) Prior to that it appears that Greenwood was subdivided and came into existence as a development in June 1989. (enclosed copy of composite map of Greenwood) I hope this answers your questions.

I will contact you as soon as I arrange for the construction corners to be flagged so that you can evaluate our site for the septic system. Thank you.

Sincerely,

Deborah Carmazzi

Deborah Carmazzi