

4425 MOUNTAIN ISLAND DR

02312226

5/9/2007

duponbj

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

COPY

PRESENTED FOR REGISTRATION
SEP 10 8 11 AM '87
CHARLES F. CROWDER
REGISTER OF DEEDS
MECKLENBURG CO. N.C.

FILE NO. 3782A

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

ACKNOWLEDGEMENT OF REQUEST BY OWNER FOR RECLASSIFICATION OF SITE FROM "UNSUITABLE" TO "PROVISIONALLY SUITABLE" UNDER 10 NCAC 10A .1948(c)

The undersigned, Nancy Coe T Haigler

owner of property located at 4425 Mountain Island Drive

("the site") and described in an instrument recorded in Book 2096 at Page 573, Mecklenburg Public Registry, hereby acknowledges that he applied to the Mecklenburg County Department of Environmental Health ("the Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 10 NCAC 10A .1934 et seq; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested pursuant to 10 NCAC 10A .1948(c) that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data and other information which indicate to the Department that the septic tank system proposed by the undersigned can reasonably be expected to function satisfactorily and thus that the findings specified in 10 NCAC 10A .1948(c)(1), (2), and (3) can be made; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is his responsibility and that neither the Department nor its officials, employees or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

The undersigned further agrees for his heirs and assigns that, in the event any septic tank system installed under authority of the aforesaid permit fails to perform adequately in any respect, he will take whatever measures are required to correct same; or if such is impossible he will discontinue use of said system immediately.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

This 9 day of September, 1987.

Nancy Coe T Haigler (SEAL)

(SEAL)

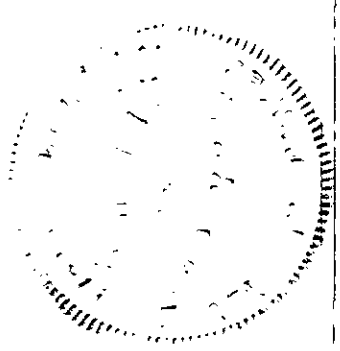
STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, LeJean L. Barker, a Notary Public for said County and State, do hereby certify that Nancy Coe T. Haigler personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 9th day of September, 1987.

LeJean L. Barker
Notary Public

My Commission Expires: Oct. 13, 1990



Return To: Enviromental Health Dept. 1200 Blythe Blvd. Charlotte, NC 28203

REAL ESTATE BOOK PAGE

5595 0009

PRESENTED FOR REGISTRATION

SEP 10 8 11 AM '87

CHARLES F. CROWDER REGISTER OF DEEDS MECKLENBURG CO. N.C.

FILE NO. 3732A ~~3709A~~

6

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

ACKNOWLEDGEMENT OF REQUEST BY OWNER FOR RECLASSIFICATION OF SITE FROM "UNSUITABLE" TO "PROVISIONALLY SUITABLE" UNDER 10 NCAC 10A .1948(c)

The undersigned, Nancy-Coe T Haigler

owner of property located at 4425 Mountain Island Drive

("the site") and described in an instrument recorded in Book 2096 at Page 573, Mecklenburg Public Registry,

hereby acknowledges that he applied to the Mecklenburg County Department of Environmental Health ("the Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 10 NCAC 10A .1934 et seq; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested pursuant to 10 NCAC 10A .1948(c) that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data and other information which indicate to the Department that the septic tank system proposed by the undersigned can reasonably be expected to function satisfactorily and thus that the findings specified in 10 NCAC 10A .1948(c)(1), (2), and (3) can be made; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is his responsibility and that neither the Department nor its officials, employees or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

FEE 5.00

The undersigned further agrees for his heirs and assigns that, in the event any septic tank system installed under authority of the aforesaid permit fails to perform adequately in any respect, he will take whatever measures are required to correct same; or if such is impossible he will discontinue use of said system immediately.

CASH 5.00

17:24 #9074 000

09/10/87

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

This 9 day of September, 1987.

Nancy-Coe T Haigler (SEAL)

(SEAL)

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, Le Jean L. Baker, a Notary Public for said County and State, do hereby certify that Nancy-Coe T. Haigler personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 9th day of September, 1987.

Le Jean L. Baker
Notary Public

My Commission Expires: Oct. 13, 1990

READER
BOOK PAGE
5595 0010

1.00
4.00
5.00

State of North Carolina, County of Mecklenburg

The foregoing certificate(s) of Le Jean L. Barker.

a Notar(y) (ies) Public (is) (are) certified to be correct.

This 10th day of September 19 87.

Charles E. Crowder, Register of Deeds

By: Colleen T. Hough Deputy

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
SEP 30 1987
ENVIRONMENTAL HEALTH
DIVISION

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 3732A DATE: 11/9/89

TC: 023-122-07 PO ☑ L ☐ CRT

SERIAL № 12255

Name of Owner Lowell Forest Burris Juris.:

Address of Property 4425 Mt Island Dr

Inspection Data:

Tank Material PCC

Total Length of Drainfield 720

Number of Lines 6 @ 120

Cover Depth 8"

Water Supply Source well

Distance to Water Source > 50

Excavation Inspected 11/9/89

Tank(s) Inspected 11/9/89

Wash Line Inspected NA

High Water Alarm Inspected NA

REPAIR AREA
pool added 3/26/92
no Nitrification added.
SEIf contained filtration

POOL

PLOT

Design: 1989 1500ST, DV, MOD, 2160SFT, 12"G ENON CTR# 48

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: System designed for 3 bedroom house

Philo A. Walker
Environmentalist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

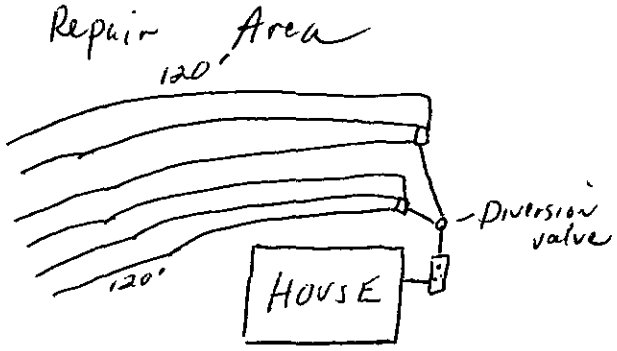
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 3732A DATE: 10/23/89

TC: 023-122-07 PO ☒ L

SERIAL Nº 13039

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 6/28/89. All work shall be *completed on or before* 11/23/89, 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 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.



Mt Island Dr

PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank - gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 720 feet

Number of Lines 6

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well 750 feet

NAME OF OWNER Lowell Forest Burris

LOCATION OF PROPERTY 4425 Mountain Island Dr

Comments: 1 Diversion valve (Dual alternating fields)
6 Trenches x 120 long x 3' x 12" stone x 6" sand
2 D-boxes 40' x 200 Repair Area

Division or Section Head

Philo S. Walker
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 Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER OR AGENT'S COPY

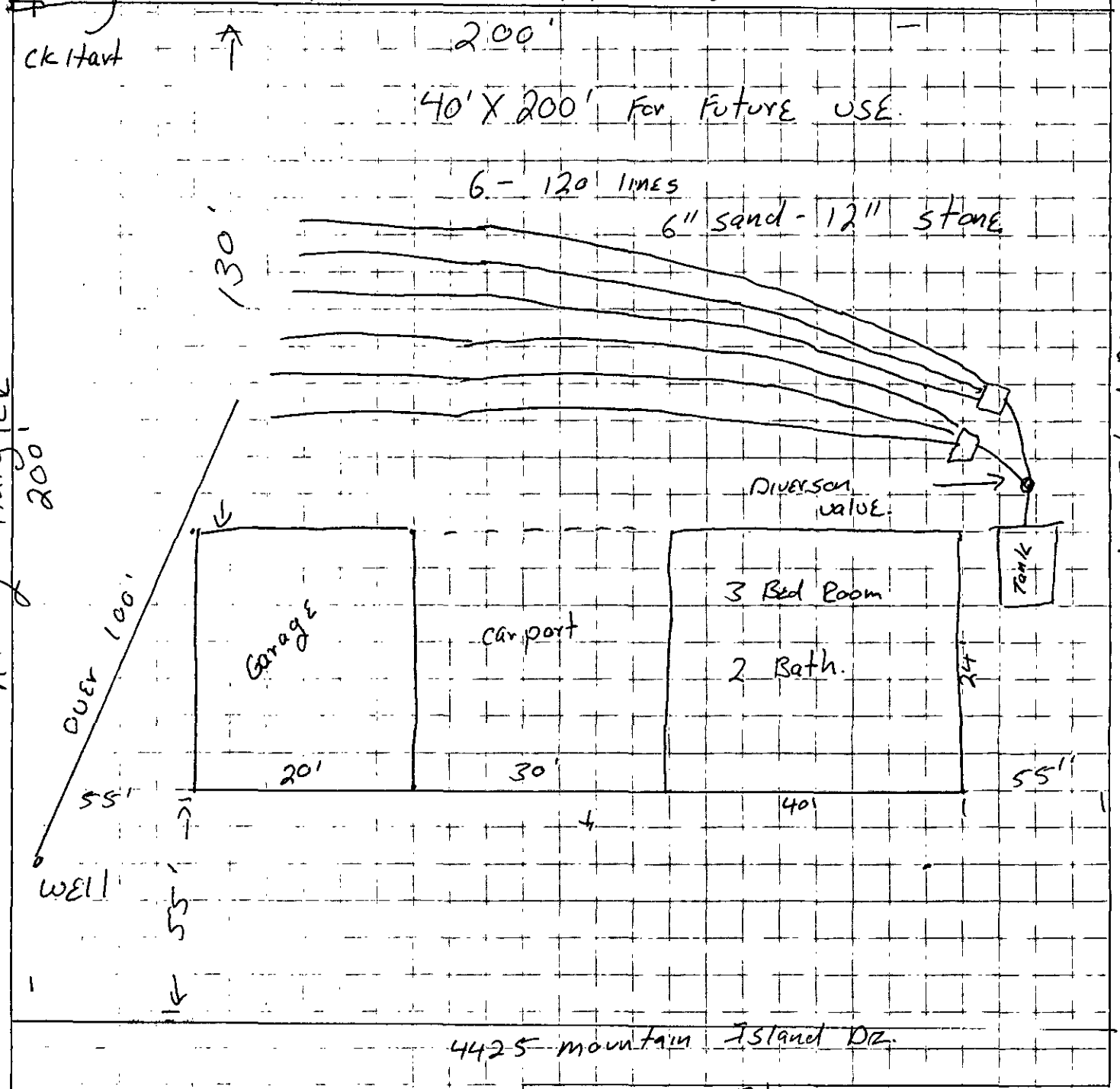
PROPOSED PLOT PLAN

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

FILE: 3732A

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.



Signed: John Lowell F. Burris

Date: 7-5-89

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 6/28/89

Name/Company [illegible]

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: [illegible]
3732A

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

JUN 28 1989

Cash 91/50.00

Fee: $ [illegible]

Completed by

Collected by

150.00 3788 9

APPLICATION FOR AN IMPROVEMENT PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
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: 3732A
TC: _____
SERIAL: № 18772
☒ L ☑ CRT

JOB LOCATION

① ADDRESS: 4425 (STREET NO.) Mountain Island DR (STREET) ② FILE: _____
③ JURISDICTION: MECK ④ TAX PARCEL NO.: 023-122-07 70
⑤ SUBDIVISION: _____ ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: Lowell (John) (FIRST) Forrest (MIDDLE) Berris (LAST)
⑨ MAILING ADDRESS: 11205 Tema Circle
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28214
⑬ PHONE: (WORK) 394 8375 ⑭ (HOME) 394 8375

REQUEST

This request is for a(n):

⑮ ☑ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☑ Other (specify) Mod.

DESIGN CRITERIA

System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? ~~2~~ 3 L.J.B 7-5-89
㉓ Maximum occupancy? 2
㉔ Basement? ☐ yes ☒ no
㉕ Type? _____
㉖ Maximum number of employees? _____
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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Lowell F Berris (John)
Date: 6/28/89

IMPROVEMENT PERMIT

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 permit is issued by this Department.

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

Aggreement Form on File

Environmentalist _____ Date _____

Director or Authorized Section Head Jim Ennis Date 7-5-89

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

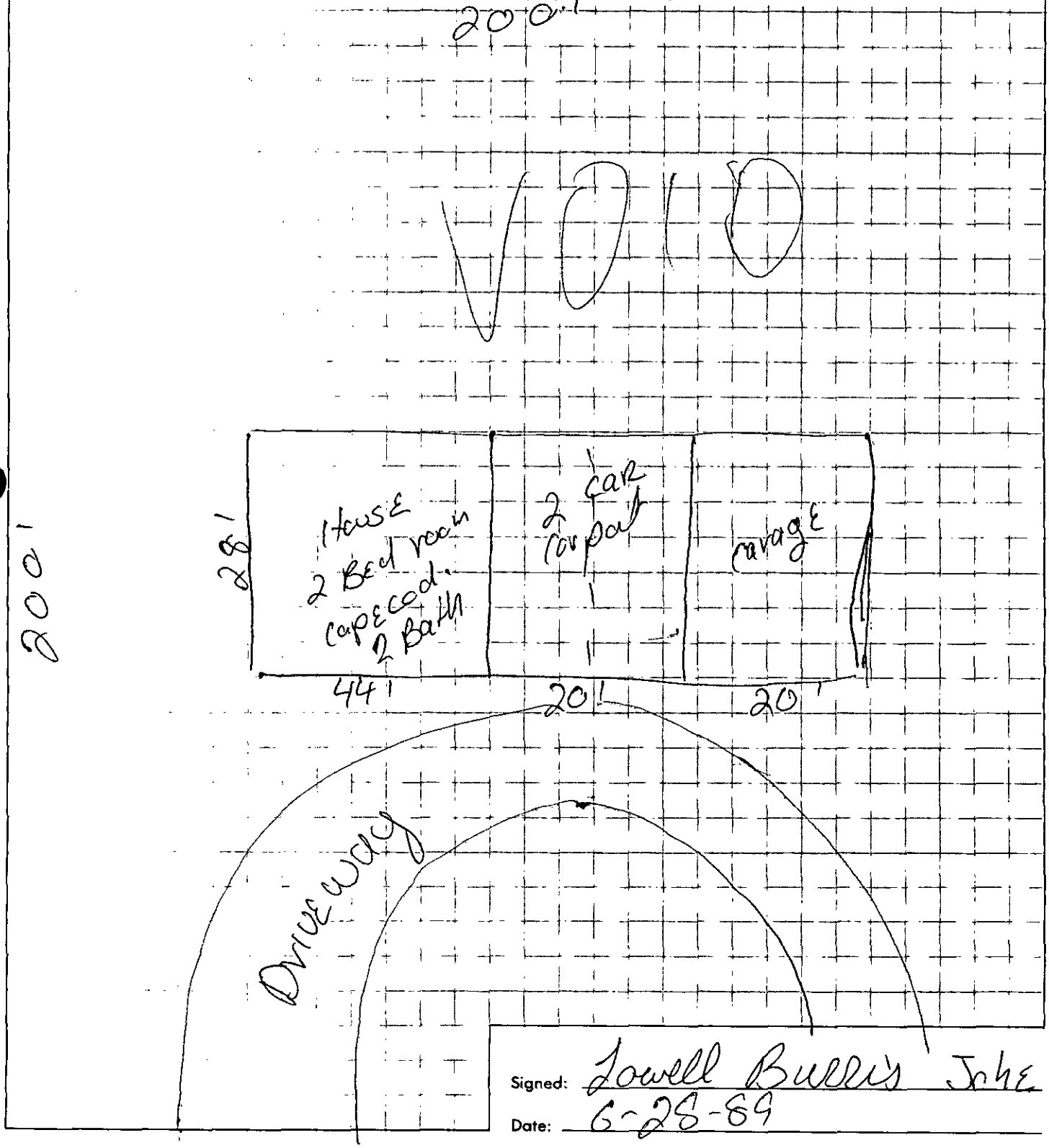
PROPOSED PLOT PLAN

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

FILE: 3732A

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.



Signed: Lowell Bullis Jr. Sanitarian

Date: 6-28-89

MECKLENBURG COUNTY

Department of Environmental Health

September 8, 1987

Nancy Coe Teeter Hagler
11310 Tema Circle
Charlotte, NC 28214

Dear Ms. Hagler:

RE: Property located at 4425 Mountain Island Drive
FILE: 3782A
PARCEL: 023-122-07 PO

Receipt of your plans for a modified waste disposal system for the property referenced above is acknowledged.

Your plans for the modified system for the above property as submitted are approved. However, water conservation methods must be employed to avoid undue stress on the system.

Upon execution and recording with the Register of Deeds Office, Mecklenburg County, of the enclosed "Septic Tank Agreement Form", an Improvements Permit may be issued by this office.

Sincerely,

Sylvia D. Daniel

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

SDD/ir

Enclosures - 3 Septic Tank Agreement Forms
Copy of Plans

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: 3732A
TC:
SERIAL: № 14222

~~MECK~~ COUNTY DEPARTMENT OF
RECEIVED
AUG 19 1987
ENVIRONMENTAL HEALTH

☐ L ☑ CRT

JOB LOCATION

① ADDRESS: 4425 Mountain Island Dr. (STREET NO. / STREET) ② FILE:
③ JURISDICTION: Meck ④ TAX PARCEL NO.: 023-122-07 P/O
⑤ SUBDIVISION: ⑥ LOT: 1 ⑦ BLOCK:

OWNER

⑧ NAME: Nancy-Lee (FIRST) Teeter (MIDDLE) Haigler (LAST)
⑨ MAILING ADDRESS: 11310 Tema Cr.
⑩ CITY: Charlotte ⑪ STATE: N.C. ⑫ ZIP: 28214
⑬ PHONE: (WORK) 373-2682 ⑭ (HOME) 392-5752

REQUEST

This request is for a(n):

⑮ ☑ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☐ Other (specify)

DESIGN CRITERIA

System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 3
㉕ Type?
㉓ Maximum occupancy? 3
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: Nancy-Lee T Haigler
Date: Aug 13 1987

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.

Environmentalist — Date

Director or Authorized Section Head — 9-10-87 Date

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

PROPOSED PLOT PLAN

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

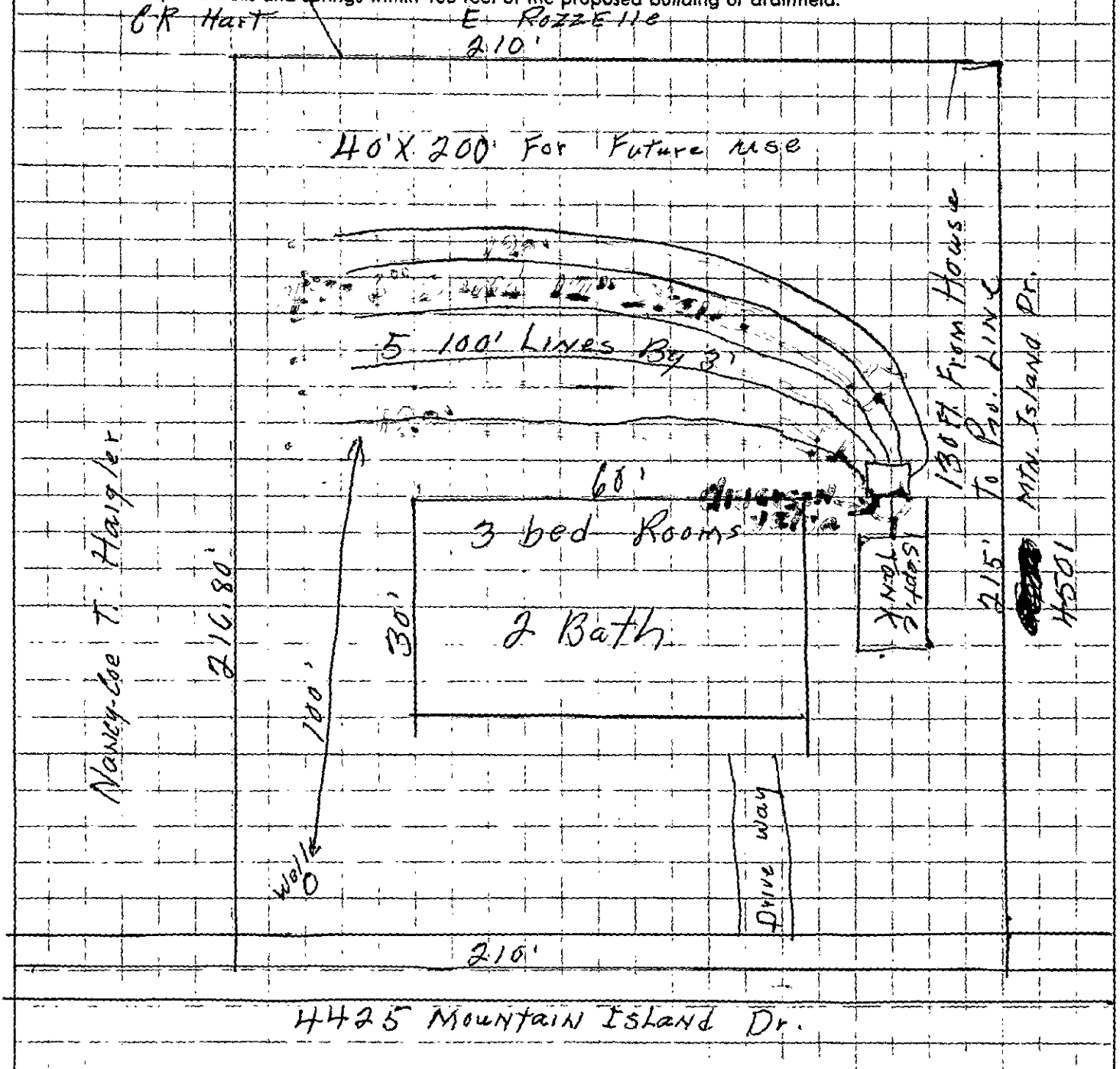
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

Lot 1

FILE: _____

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.



4425 Mountain Island Dr.

Signed: Nancy-Lee T. Haigler

Date: Aug 13- 1987

DATE: 8/11/87

TO: ENVIRONMENTAL HEALTH

FROM: COUNTY ENGINEERING

EHD FILE _____ JURISDICTION CODE Meck

PARCEL NUMBER 023-122-07 p/o

ASSIGNED ADDRESS 4425 Mountain Island Dr.

EXISTING ADDRESS _____

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	NOT APPROVED
1. SUBDIVISION REGULATIONS	☑	☐ *
2. FLOODWAY REGULATIONS	☑	☐ *
3. EROSION CONTROL REGULATIONS	☑	☐ *
4. COMMERCIAL DRAINAGE PLAN	☑	☐ *
	PRESENT	**NOT PRESENT**
5. PUBLIC UTILITY EASEMENT	☐ *	☑
	YES	**NO**
6. PROPERTY FRONTS ON THOROUGHFARE	☐ *	☑
	YES	**NO**
7. DRIVEWAY PERMIT REQUIRED	☐ *	☑

*** If checked, further investigation will be required to determine whether a building permit may be issued by Building Standards for the site.**

REMARKS: S.F. house

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

SIGNED: _____

OPWEAR 02/86

MECKLENBURG COUNTY
Department of Environmental Health

July 27th, 1987

Mark Alan Hatfield
Rt. 14 Box 2810, Highworth Lane
Charlotte, NC 28214

RE: Property located at 11310 Tema Circle
FILE: 3732A
PARCEL: 02312207

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 results of this investigation showed the property to be classified UNSUITABLE for the installation of such a system. A copy of the Site Evaluation Report (Serial Number 11663) is enclosed.

State regulations provide that sites originally classified unsuitable may be utilized for the installation of alternate or modified sewage disposal systems provided the requirements of 10 NCAC 10A .1948 (c) are met. A reprint of this section is enclosed for your information.

Should you desire to file for permission to install an alternate or modified sewage treatment system on the property, 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. They will be reviewed, and if it is determined that the proposed system may reasonably be expected to function satisfactorily, an Improvement Permit will be issued by the Department upon completion by you, of a formal request for lot reclassification.

If I may be of any assistance, please feel free to call.

Sincerely,

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

Enclosure (2)

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 11663

File: 3732A Action 2

Parcel: 023-122-07 ☐ PC

Location: 11310 Tema Circle

Subdivision:

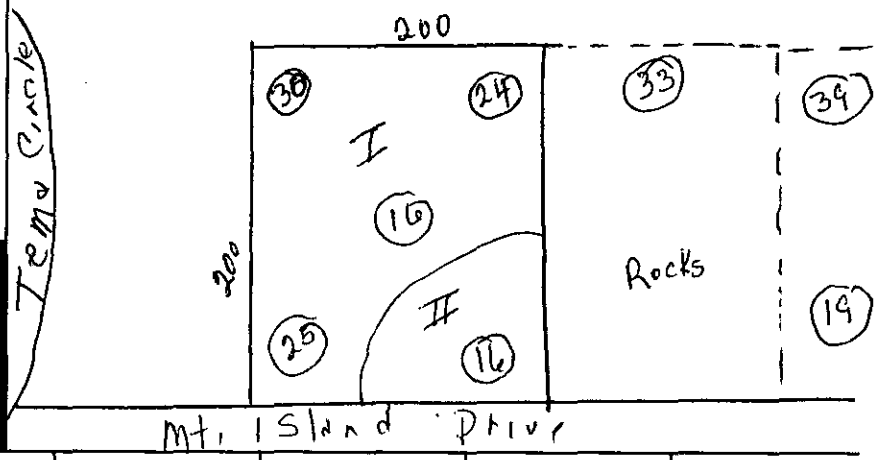
Lot: Block: Acres: 1 A

Owner: Mark Alan Hatfield
Address: Rt. 14, Box 2810 Highworth Lane
Charlotte, N. C. 28214

Comments:

Described by: W. B. Ramsey

Date: 7-24-87



***** 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 2-4	S (PS) U 2-4	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)	S PS U	S PS U	S PS U	S PS U
Depth	S PS (U) 16-30	S PS (U) 16	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	S PS (U)	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS (U) Cut Area	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	IVb ENON	IVb ENON				
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: 3732A

TC: _____

☐ PC ☐ REPT

MECK COUNTY DEPARTMENT OF
RECEIVED
JUL 20 1987
ENVIRONMENTAL HEALTH

JOB LOCATION

① ADDRESS: 11310 TEMA CIRCLE Charlotte N.C 28214

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

⑤ PARCEL REFERENCE: BOOK NO.: 023 PAGE NO.: 122 PARCEL NO.: 07

⑥ DEED REFERENCE: BOOK NO.: _____ PAGE NO.: _____

OWNER

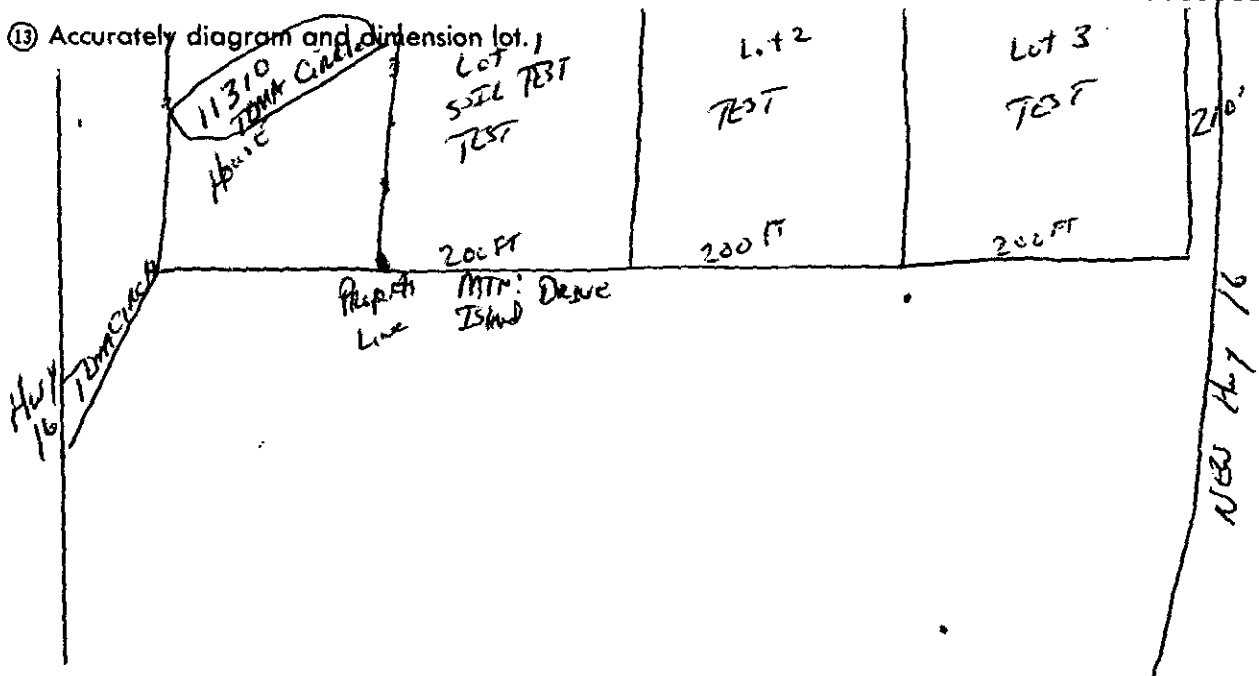
⑦ NAME: MARK (FIRST) ALAN (MIDDLE) HATFIELD (LAST)

⑧ MAILING ADDRESS: RT 14 Box 2810 Highworth Ln

⑨ CITY: Charlotte ⑩ STATE: N.C. ⑪ ZIP: 28214

⑫ PHONE: (WORK) 523-8063 (HOME) 393-5689

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: Mark A Hatfield

Date: 7/20/87

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

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

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8108 STARNES RANDALL RD

11113101

5/9/2007

duponbj

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

APPLICATION FOR SOIL INVESTIGATION

MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

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

(OFFICE USE ONLY)
3733A
FILE: [illegible]
TC: 111-131-01
☐ PC ☐ REPT

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AUG 5 1987
ENVIRONMENTAL HEALTH

Pvt.

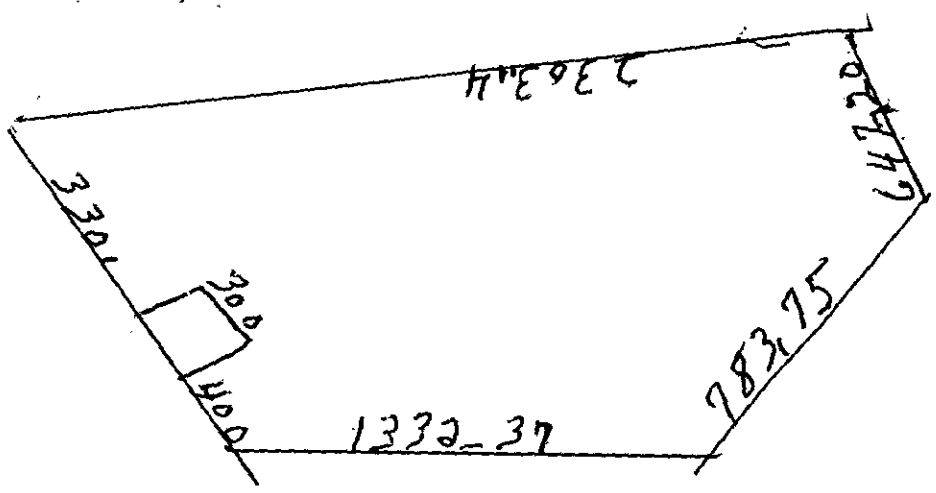
JOB LOCATION

① ADDRESS: James Franklin Randall, 7838 Stanes Randall Rd
② SUBDIVISION: ③ LOT: ④ BLOCK:
⑤ PARCEL REFERENCE: BOOK NO.: P.B. 111 PAGE NO.: 111 PARCEL NO.: 11
⑥ DEED REFERENCE: BOOK NO.: PAGE NO.:

OWNER

⑦ NAME: James (FIRST) Franklin (MIDDLE) Randall (LAST)
⑧ MAILING ADDRESS: 7838 Stanes Randall Rd
⑨ CITY: Charlotte ⑩ STATE: N.C. ⑪ ZIP: 28215
⑫ PHONE: (WORK) (HOME) 537-0821

⑬ Accurately diagram and dimension lot. Over 48.186 acres



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: James Franklin Randall

Date: Aug 4 1987

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

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