

6200 CLEVE BROWN RD

04309216

1/3/2008

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 3421B DATE: 5/16/95

TC: 043 092 08 ☐ L ☑ CRT

SERIAL Nº 15453

Name of Owner Kristie Jones Juris.:

Address of Property 8228 Cleve Brown Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400' vary

Number of Lines 5 @ see plat

Cover Depth 10" - 18"

Water Supply Source well

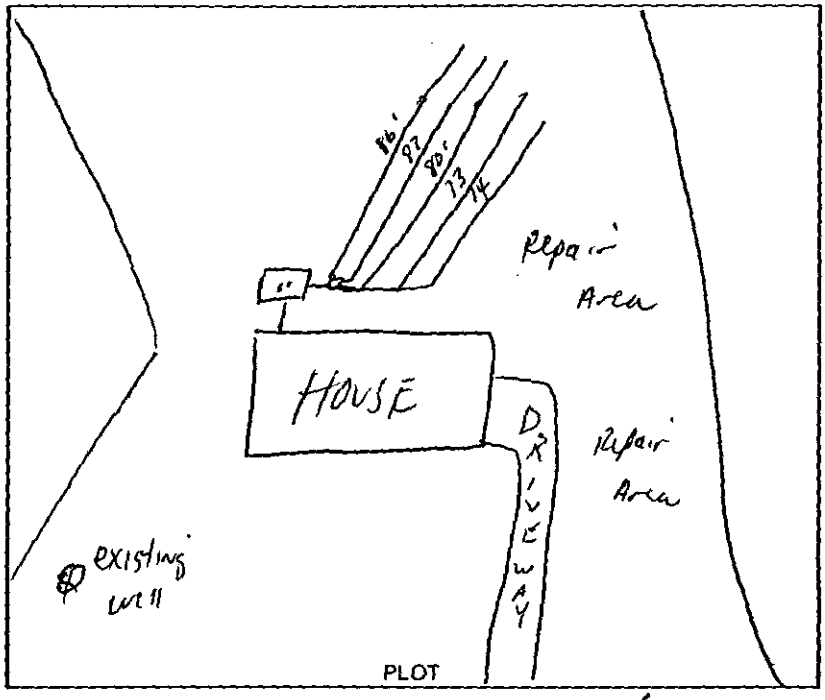
Distance to Water Source 80'

Excavation Inspected 5/16/95

Tank(s) Inspected 5/16/95

Wash Line Inspected -

High Water Alarm Inspected -



Design: 1995, 1500ST, CON, 1200SFT, 12" Stone cecil CTR# Gary Miller

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: Septic system installed for 3 bedroom residence
Speed levels installed. Type II

Phillip A. Walker R.S.
Environmentalist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

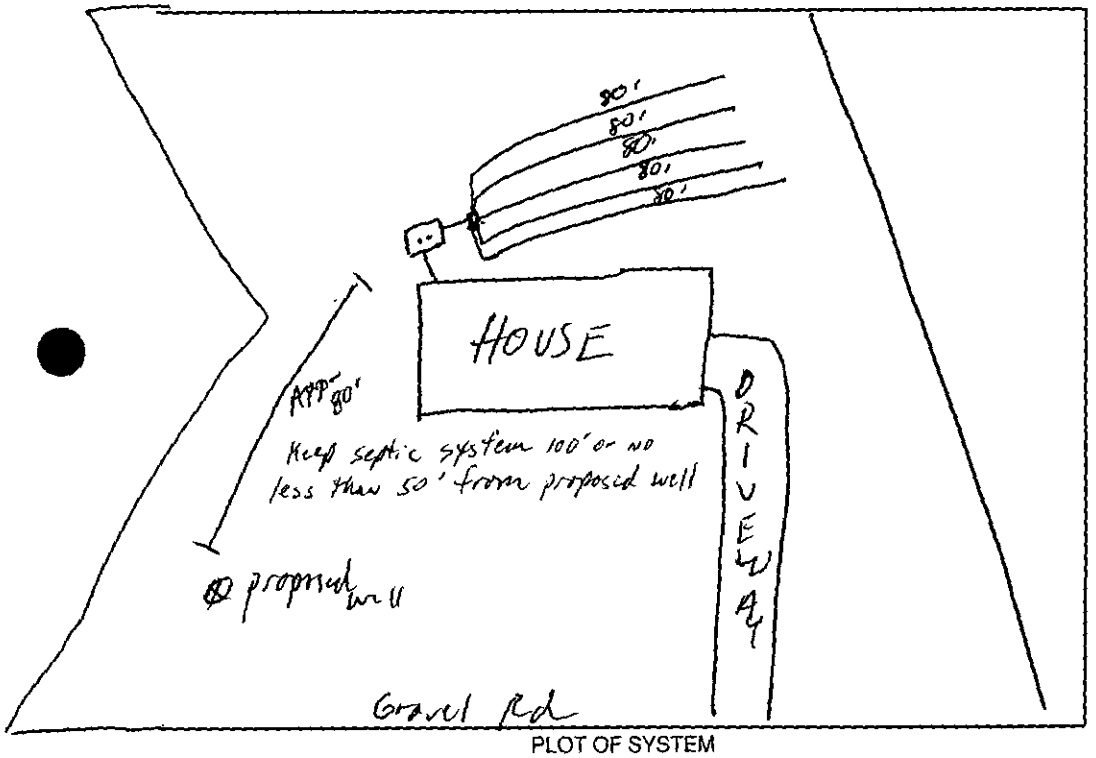
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 3421B DATE: 5/15/95

TC: 043 092 08 ☐ L

SERIAL Nº 16424

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 2/20/95. All work shall be completed on or before 6/15/95, 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 1500 gallons

Liquid Capacity of Dosing Tank – gallons

Tank Construction PCC

Trench Depth < 3'

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous ✓

Total Line Length 400' feet

Number of Lines 5 (80')

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10' feet

Distance from Well > 50' feet

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

NAME OF OWNER Kristie Jones

LOCATION OF PROPERTY 8228 Steve Brown Rd

Comments: 1500ST, 5 lines x 80'long x 3'wd x 12" Stone
Keep lines on contour of land / Keep proposed well 100' or minimum 50' from septic System.

for S. Daniel, Program Chief 5-24-95

Philip S. Walker R.S.
Environmental Health Specialist

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

342B

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

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

Date:

PERSON FILING APPLICATION:
NAME: Jones (last) Kristie (first) B (mi)
ADDRESS: 8200 Cleve Brown Rd PHONE: (704) 599-1486
CITY: Charlotte STATE: NC ZIPCODE: 28269

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: Part of 043-092-08
STREET ADDRESS: 8228 Cleve Brown Rd
Charlotte, N.C. 28269
ZONING: Residential

PROPERTY OWNER:
NAME: Jones (last) Kristie (first) B. (mi)
ADDRESS: 8200 Cleve Brown Rd PHONE: (704) 599-1486
CITY: Charlotte STATE: NC ZIPCODE: 28269

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

LOT NUMBER: LOT SIZE (in acres):

TYPE APPLICATION (check one):
[X] SOIL TEST - INDIVIDUAL LOT (D)
[X] 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)
[ ] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
[ ] SINGLE MOBILE HOME (S) [ ] HOUSE (H) [ ] MULTIPLE FAMILY (U)
[ ] DOUBLE WIDE (D) [X] 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: Kristie Jones Date: 1/17/95

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.

...3 bedroom Conventional
with Conventional repair

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

Phillip S. Walker 2/20/95
Environmentalist Date

Jane Higgins Bunney 2/23/95
Director or Authorized Section Head Date

WATER : 122791

PROPOSED PLOT PLAN

Clevc Brown Rd

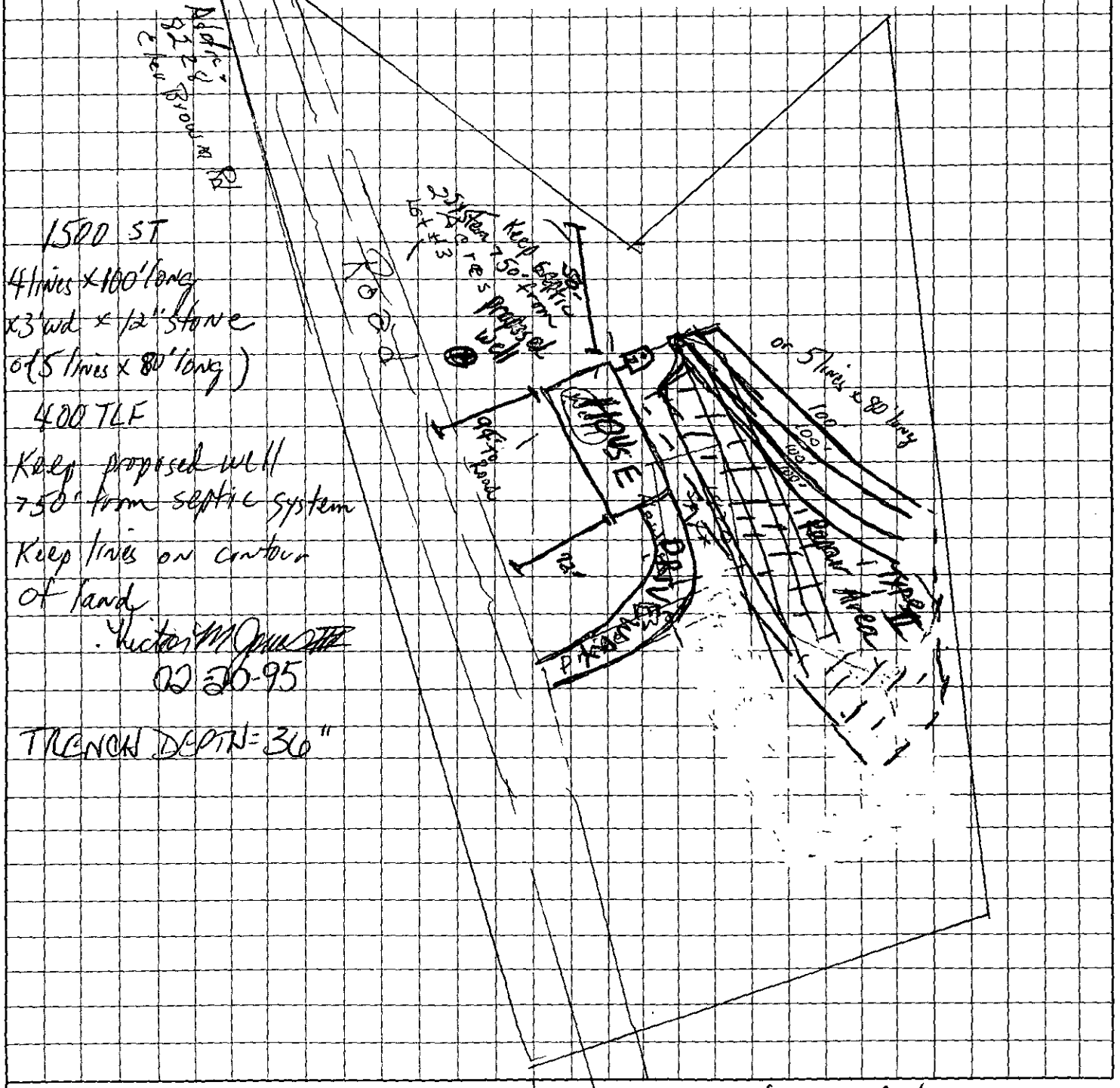
David Cox Road

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

FILE: 342B

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.



1500 ST
4 lines x 100' long
x 3' wd x 12" stone
or (5 lines x 80' long)
400 TLF
Keep proposed well
50' from septic system
Keep lines on contour
of land
Victor M Gruette
02-20-95

TRENCH DEPTH = 36"

APPROVAL DATE 2/20/95 JW

OWNER/AGENT SIGNATURE

DATE

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

PROPOSED PLOT PLAN

Clerc Brown

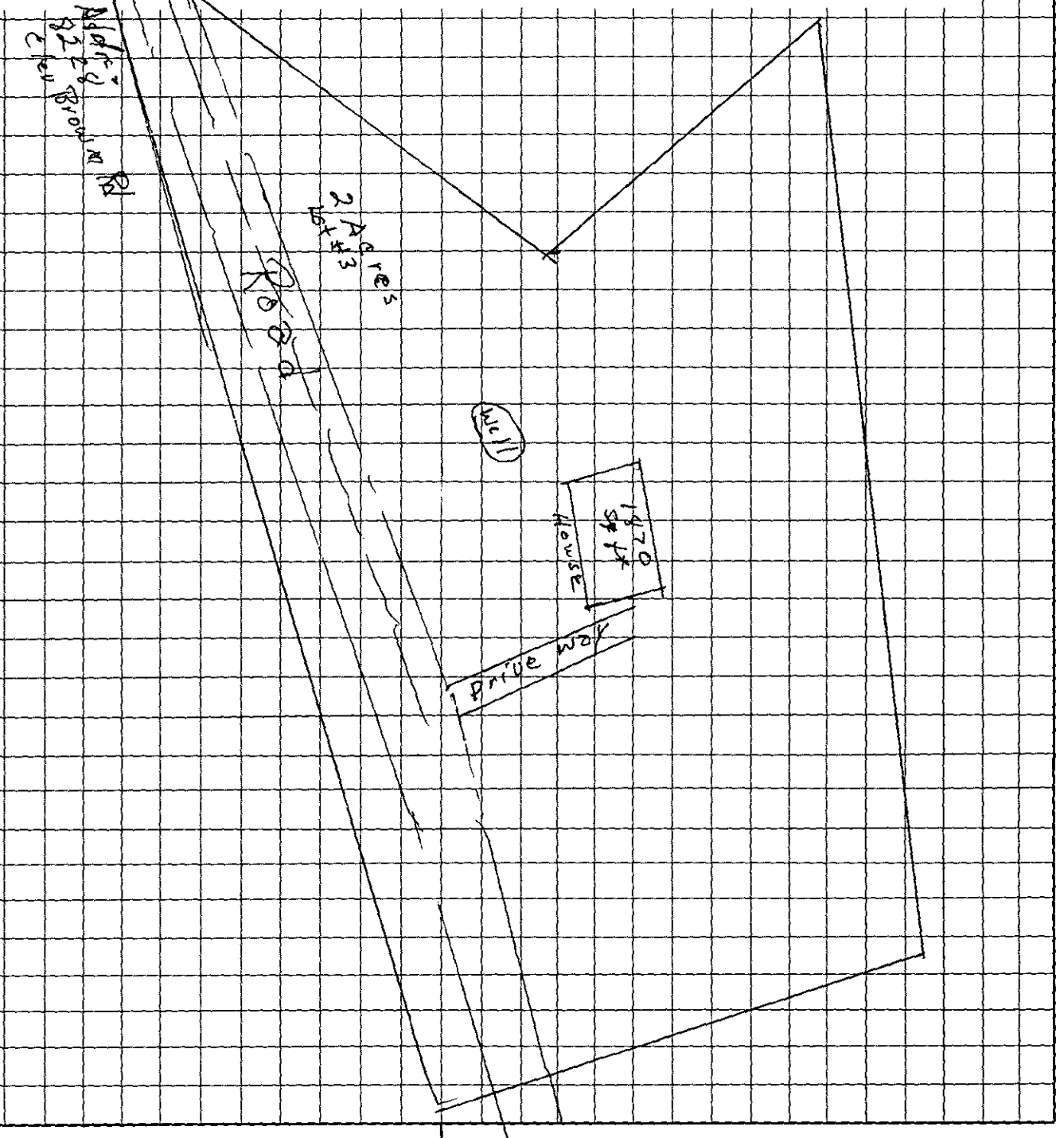
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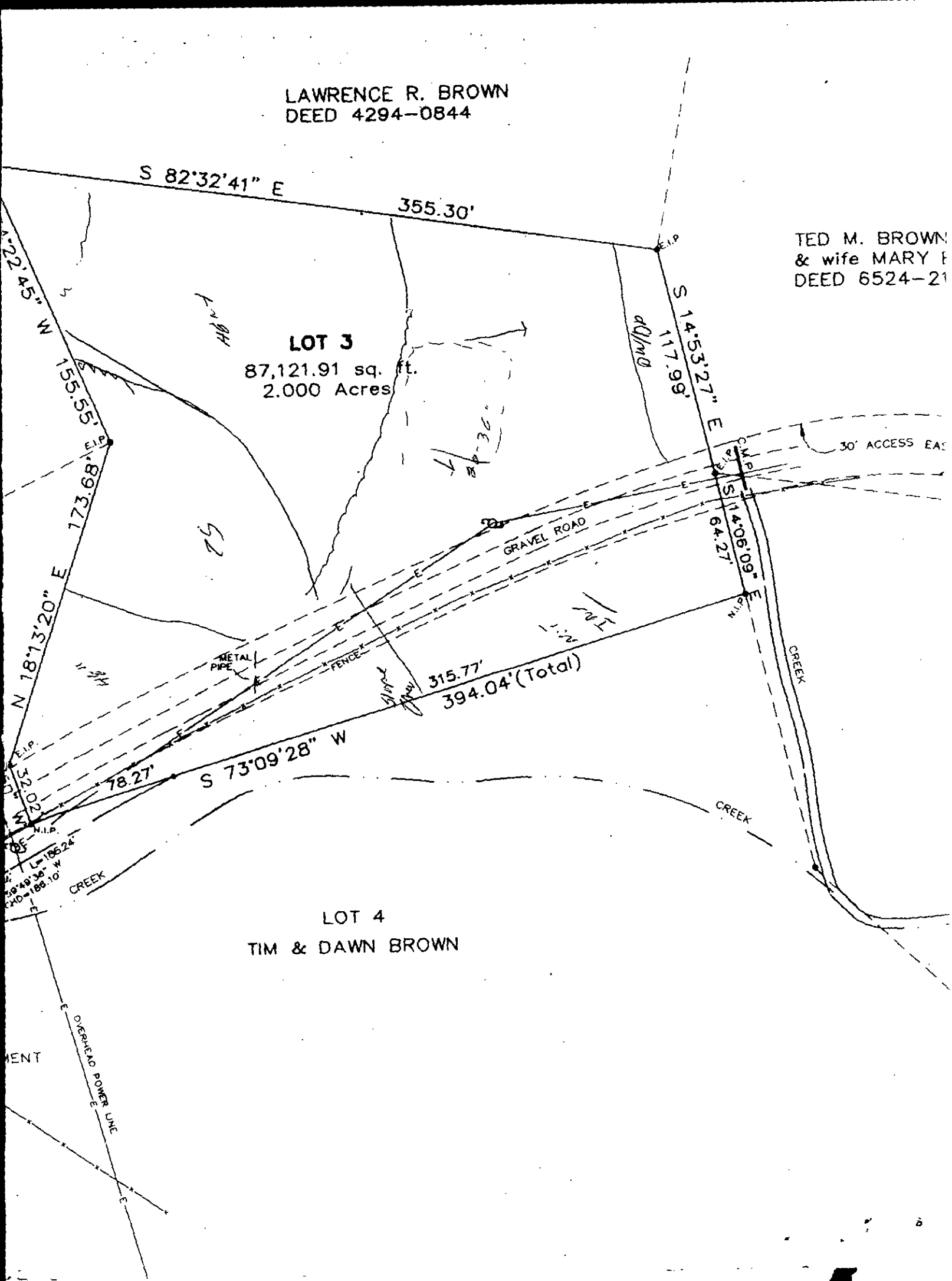


APPROVAL DATE _____

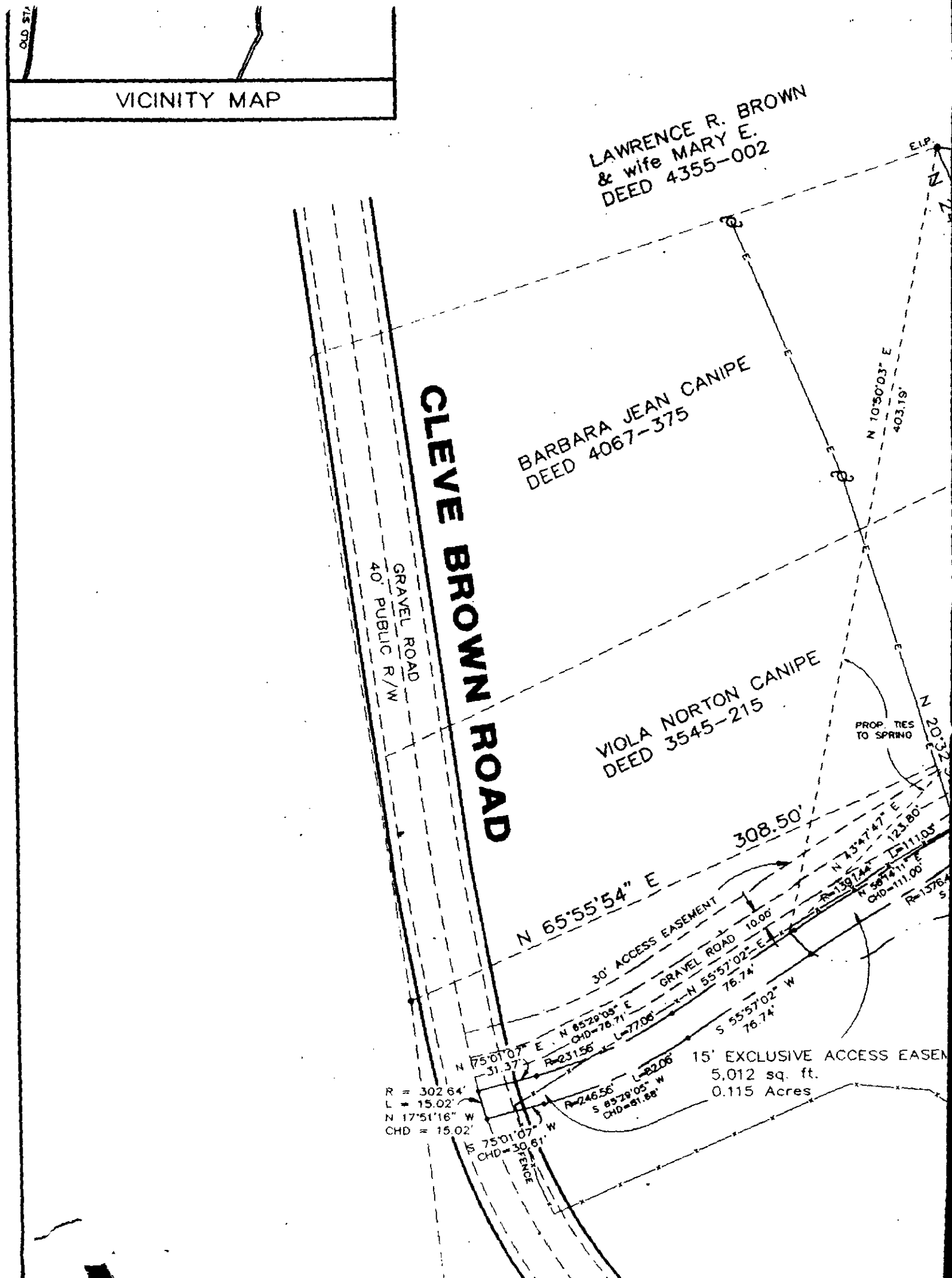
OWNER/AGENT SIGNATURE

DATE

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


LAWRENCE R. BROWN
DEED 4294-0844
S 82°32'41" E
355.30'
TED M. BROWN
& wife MARY E
DEED 6524-21
LOT 3
87,121.91 sq. ft.
2.000 Acres
S 14°53'27" E
117.99'
N 22°45" W
155.55'
E.I.P.
N 18°13'20" E
173.68'
30' ACCESS EAS
GRAVEL ROAD
S 14°06'09" E
64.27'
N.I.P.
METAL PIPE
FENCE
315.77'
394.04'(Total)
S 73°09'28" W
78.27'
CREEK
LOT 4
TIM & DAWN BROWN
OVERHEAD POWER LINE

VICINITY MAP



(2400)

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 20568

File: 34218 Action 2

Parcel: 00 043-092-05 ☐ PC

Location: 8228 Cleve Brown Rd

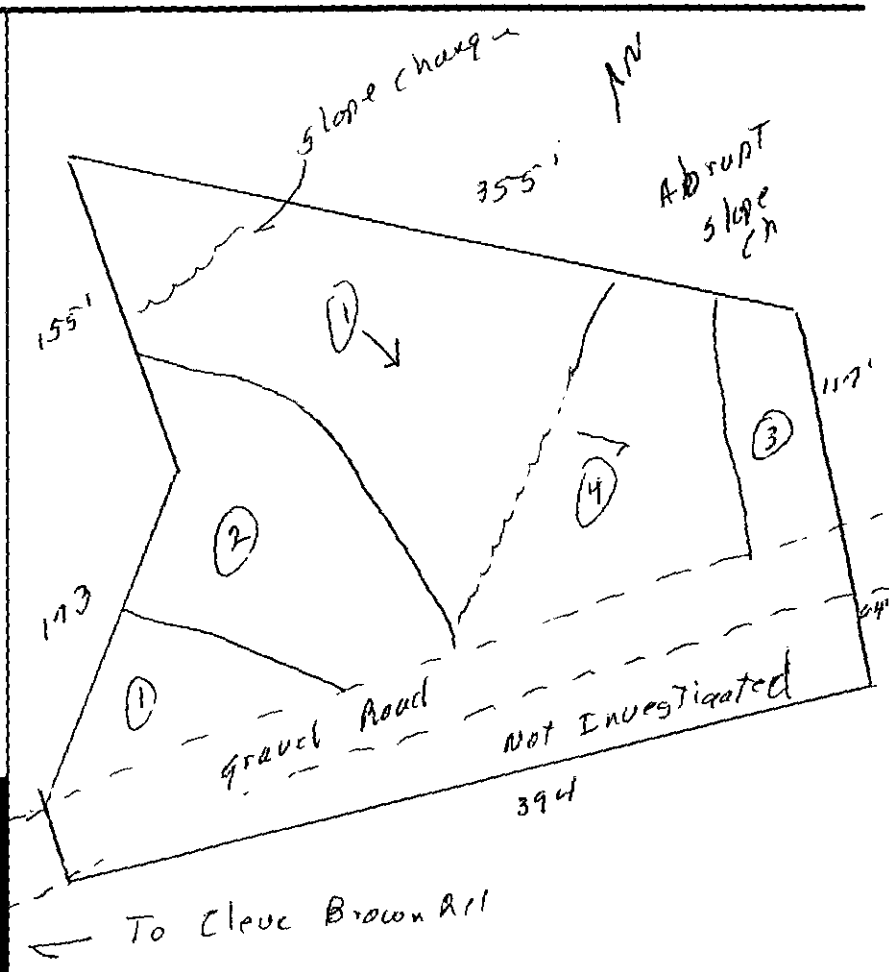
Subdivision:

Lot: Block: Acres: 2.0

Owner: Kristi B. Jones
Address: 8228 Cleve Brown Road
Mint Hill, N.C. 28269

Comments: 1000 Repair, 3gal/ft/day LTAR- explain easy need pump

Described by: William A. Marlin
Date: 1-26-95



***** 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 6-12%	S PS (U) Complex slopes	S PS (U) Drainageway Depression	(S) PS U 6-12%	S PS U	S PS U
Texture	S (PS) U slightly Expansive clay	S PS U —	S PS U —	S (PS) U slightly Ex. Clay	S PS U	S PS U
Structure	S (PS) U Sub. Block	S PS U —	S PS U —	S (PS) U Sub. Block	S PS U	S PS U
Drainage	(S) PS U 7 48" To soil wetness	S PS U —	S PS U —	S (PS) U 7 36" To soil wetness	S PS U	S PS U
Depth	(S) PS U 48"+	S PS U —	S PS U —	S PS (U) 20-36"	S PS U	S PS U
Restrictive Horizons	(S) PS U 7 48"	S PS U —	S PS U —	S (PS) U 7 36" To saprolite	S PS U	S PS U
Available Space	S PS (U) Restricted	S PS U —	S PS U —	S PS (U) Restricted	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	LE cecil-like	Complex slopes	Drainageway/ Depression	LE cecil-like		
Area Classification	S PS (U)	S PS (U)	S PS (U)	S PS (U)	S PS U	S PS U

LAWRENCE R. BROWN
& wife MARY E.
DEED 4355-002

LAWRENCE R. BROWN
DEED 4294-0844

TED M. BROWN
& wife MARY
DEED 6524-21

BARBARA JEAN CANIPE
DEED 4067-375

VIOLA NORTON CANIPE
DEED 3545-215

LOT 3
87,121.91 sq. ft.
2.000 Acres

LOT 4
TIM & DAWN BROWN

CLEVE BROWN ROAD

GRAVEL ROAD
40' PUBLIC R/W

GRAVEL ROAD

30' ACCESS EASEMENT

30' ACCESS EA

15' EXCLUSIVE ACCESS EASEMENT
5,012 sq. ft.
0.115 Acres

E.I.P.

N.I.P.

C.M.P.

PROP. TIES TO SPRING

METAL PIPE

FENCE

CREEK

OVERHEAD POWER LINE

S 82°32'41" E 355.30'

N 24°22'45" W 155.55'

N 10°30'03" E 403.19'

S 14°53'27" E 117.99'

S 14°06'09" E 64.27'

N 18°13'20" E 173.68'

N 20°32'50" W 32.02'

N 65°55'54" E 308.50'

S 73°09'28" W 394.04'(Total)

315.77'

78.27'

N 23°47'47" E 123.80'

N 75°01'07" E 31.37'

S 75°01'07" W CHD=30.61'

N 85°29'05" E CHD=78.71' R=231.56' L=77.06'

N 55°57'02" E 76.74'

S 55°57'02" W 76.74'

S 85°29'05" W CHD=81.68' R=246.56' L=82.06'

N 56°54'11" E CHD=111.00' R=139.44' L=111.05'

S 69°49'36" W CHD=186.10' R=1376.44' L=186.24'

R = 302.64'
L = 15.02'
N 17°51'16" W
CHD = 15.02'