

2201 SUNSET RD

03706501

1/4/2008

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 4175 B DATE: 3-3-2000

TC: 241-124-07 ☑ L ☐ CRT

SERIAL Nº 18246

Name of Owner RICKY JEFFRIES Juris.:

Address of Property 2201 SUNSET BLVD

Inspection Data:

Tank Material PCC

Total Length of Drainfield 226.5 FEET

Number of Lines 5 @ 55'

Cover Depth 12" SOIL

Water Supply Source ~~150'~~ MUNICIPAL

Distance to Water Source ~~250~~"

Excavation Inspected 3-3-2000

Tank(s) Inspected 3-3-2000

Wash Line Inspected NA

High Water Alarm Inspected NA

SEE PLOT PLAN

PLOT

Design 1500ST 1659SF PPBPS 12" SAND CTR# W.D. 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 15A 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 15A 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: TYPE III - E

Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

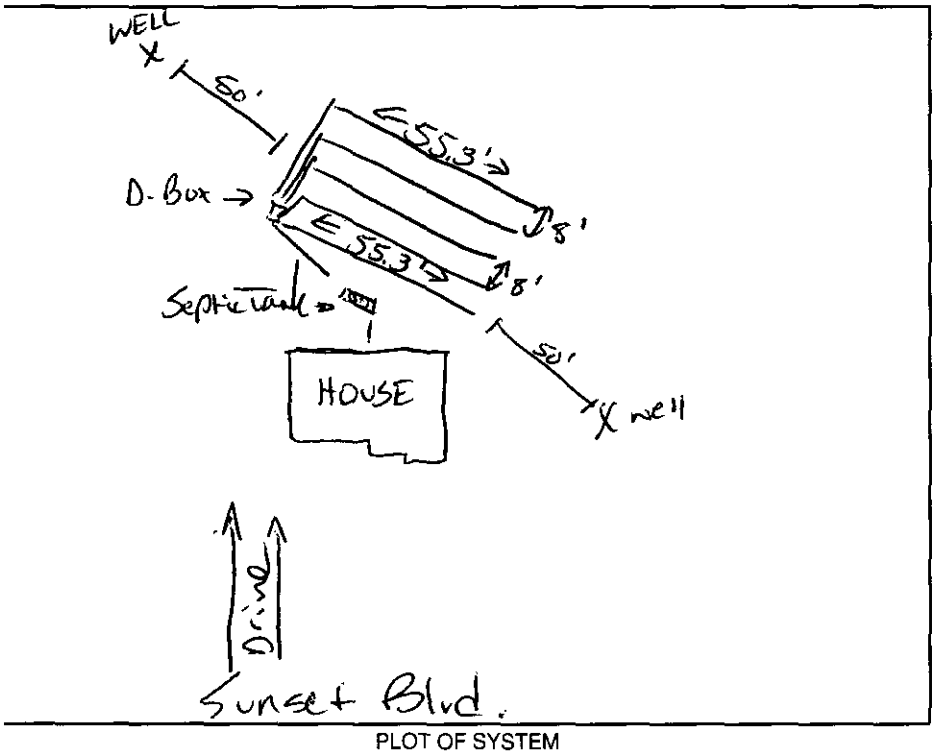
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 4175B DATE: 2-28-00

TC: 041-124-07 Y L

SERIAL No 17795

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 1-12-00. All work shall be completed on or before 3-28-00, 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 PVC

Trench Depth 30"

Absorption and/or Nitrification Lines:

Trench Width 2 feet

Trench Walls Scored and Porous Yes

Total Line Length 276.5 feet

Number of Lines 5

Depth of Stone N/A inches

Distance from House 5 feet

Distance from Property Line 5 feet

Distance from Well 50 feet

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

NAME OF OWNER Ricky L. Jefferies

LOCATION OF PROPERTY 2201 Sunset Blvd.

Comments: Type III 4 bedrooms

(5) 2'w x 55.3'L x 30" deep

L B Thompson Jr., RS.
Environmental Health Specialist

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

60cl(4#1848 NCS

FEE: 300/ AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION
DATE: 2/15/00 sc VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

DATE: 1-24-00 PERMIT NO: 4175B
PARCEL NO: 041-124-07

JOB LOCATION ADDRESS: 2201 Sunset Blvd.
PROPERTY OWNER: Ricky L. Jeffries
BUILDING CONTRACTOR: American Homes
SUBDIVISION NAME:
AUTHORIZATION ISSUED BY: [signature] DATE: 1-24-00
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 4175B, 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: See Conditions of Improvement Permit
- Hold For Agreement Form
- Copy of deed that shows lot is a lot of record prior to

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] 2/14/00
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

Permit Number: 4175B

Tax Number: 041-124-07

- 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	✓ No	___ Partial Basement	
Type Primary Wastewater System Type (circle one): I II (III) IV V VI	___ 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	480 Max gallons/day wastewater flow	553 Absorption Area (sq ft)	8' Trench spacing (min. on centers)	
N/A Serviced by private well	1500 Gallon septic tank	276.5 Total trench length (ft)	30" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)	
4 Bedrooms in residence	N/A Gallon pump tank	N/A Depth of stone sand backfill		
Any surface waters present:	Type:	Minimum separation distance:		
Site modifications required:				
Additional Conditions: - Agreement form required - Copy of deed required - lot must be a lot of record prior to 1-1-83 to eliminate need for the 100% repair area				
Repair Area System Type Type (circle one): I II III IV V VI	___ 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	
___ Absorption Area (Sq ft) ___ Total Trench Length (Ft)	___ Depth of Stone Trench	___ Trench spacing (min. on centers)	___ 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.

DENR Authorized Agent — Date: 1-24-00

Owner/Agent Signature — Date: 2/14/00

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

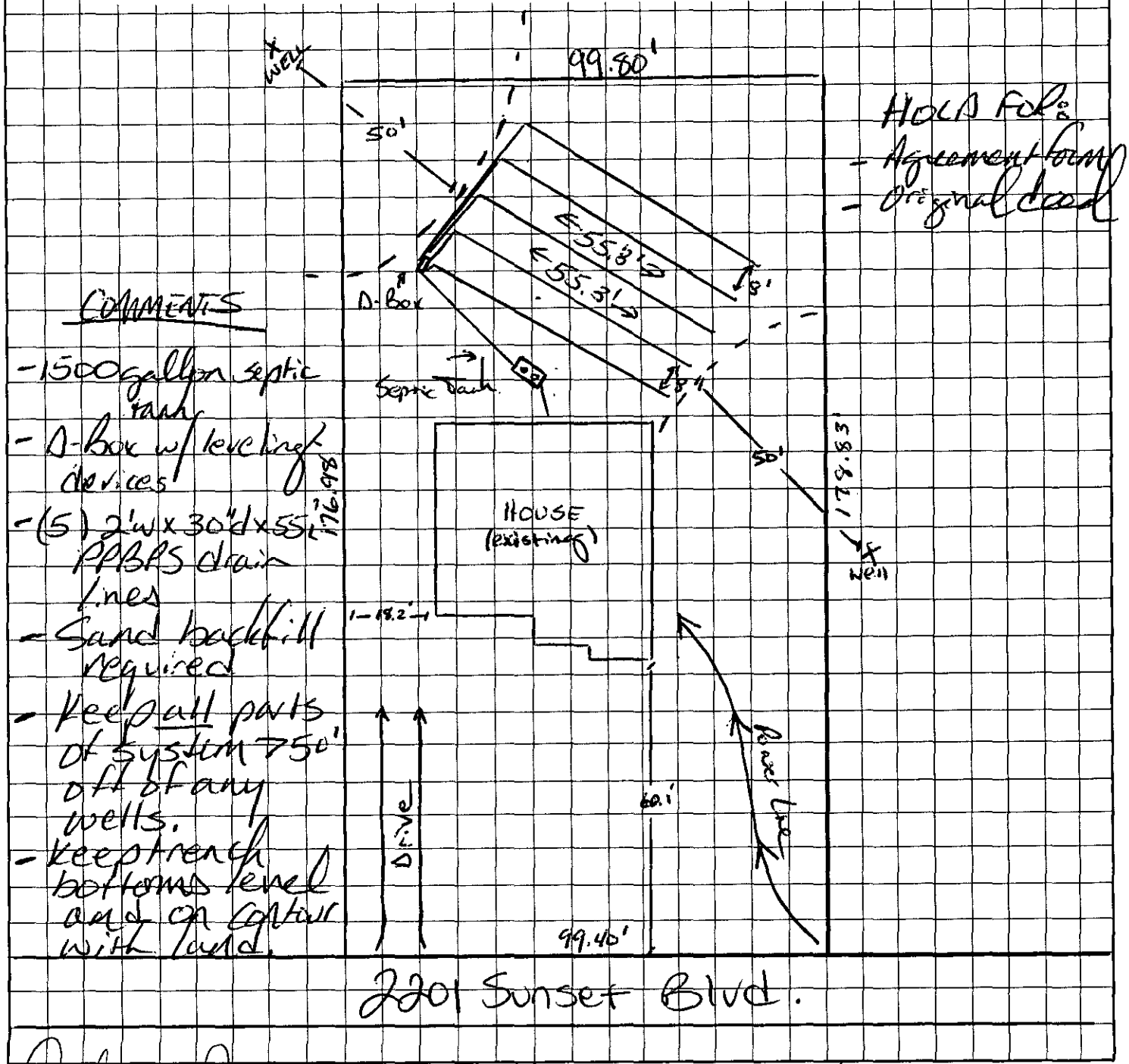
PROPOSED PLOT PLAN

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

FILE: 4175 B

TC: 041-124-07

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.



HOLD FOR
- Agreement form
- Original deed

COMMENTS

- 1500 gallon septic tank
- D-Box w/ leveling devices
- (5) 2'w x 30"d x 55'L PPBRS drain lines
- Sand backfill required
- Keep all parts of system 75' off of any wells.
- Keep trench bottoms level and on contour with land.

2201 Sunset Blvd.

John Parks
OWNER/AGENT SIGNATURE

DATE 2/14/00

APPROVAL DATE 1-24-00

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

FOR REGISTRATION JUDITH A GIBSON
REGISTER OF DEEDS
MECKLENBURG COUNTY, NC
1998 DEC 17 01:31 PM
BOOK 10121 PAGE 375-377 FEE $10.00
NC REAL ESTATE EXCISE TAX $22.00
INSTRUMENT # 1998198343

Excise Tax $22.00 | Recording Time, Book and Page

Tax Lot No | Parcel Identifier No 041-124-07

Verified by | County on the day of , 19

by

Mail after recording to Grantee

This instrument was prepared by Scott E Lawrence, Attorney at Law

Brief description for the Index LT 307 & 308, SUNSET PARK SUBDIVISION

NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED made this 16th day of December , 1998 , by and between

GRANTOR	GRANTEE
Ava B. Holcombe 730 Uwharrie Street Asheboro, NC 27203	Ricky L. Jefferies and wife, Teresa L Jefferies 5229 Nevin Road, Apt. J Charlotte, NC 28269

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 , Township, Mecklenburg County, North Carolina and more particularly described as follows

Being all of Lots 307 and 308 of the SUNSET PARK SUBDIVISION as the same is shown on map thereof recorded in Map Book 6, at Page 677, Mecklenburg County Registry

For partial reference to title see deed recorded in Book 3234, Page 36, Mecklenburg County Registry.

Tax office verifies that lot was on record as of 12-70 ✓

2

22.00 Rcpd

The property hereinabove described was acquired by Grantor by instrument recorded in

A map showing the above described property is recorded in

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple

And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever except for the exceptions hereinafter stated
Title to the property hereinabove described is subject to the following exceptions

1 Those Easements, Restrictions and Other Matters, if any, appearing of public record

2 Those matters which would be revealed by a current and accurate survey of the property

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

..... (Corporate Name)

By: .....

.....President

ATTEST

.....Secretary (Corporate Seal)

USE BLACK INK ONLY

Ava B. Holcombe (SEAL)
Ava B Holcombe

.....(SEAL)

.....(SEAL)

.....(SEAL)

NORTH CAROLINA, ... Randolph ... County

I, a Notary Public of the County and State aforesaid, certify that Ava B Holcombe ..... Grantor, personally appeared before me this day and acknowledged the execution of the foregoing instrument Witness my hand and official stamp or seal, this 11th day of December, 1998

My commission expires 5-18-2002 Teresa M Green Notary Public

Use Black Ink

SEAL-STAMP

NORTH CAROLINA, ...County

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

personally came before me this day and acknowledged that .... he is ..... Secretary of ..... a North Carolina corporation, 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 ..... as its ..... Secretary Witness my hand and official stamp or seal, this .....day of ....., 19.....

My commission expires ..... Notary Public

Use Black Ink

The foregoing Certificate(s) of .....

.....

.....

is/are 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

JUDITH A. GIBSON
REGISTER OF DEEDS , MECKLENBURG COUNTY
COUNTY & COURTS OFFICE BUILDING
720 EAST FOURTH STREET
CHARLOTTE NC 28202

****

Filed For Registration:	12/17/1998 01:31 PM
Book	RE 10121 Page. 375-377
Document No :	1998198343
	DEED 3 PGS $10.00
NC REAL ESTATE EXCISE TAX:	$22.00
Deputy	REBECCA MCGOWAN

****

State of North Carolina, County of Mecklenburg

The foregoing certificate of TERESA M GREEN Notary is certified to be correct. This 17TH of December 1998

JUDITH A GIBSON, REGISTER OF DEEDS By: Rebecca McGowan
Deputy/Assistant Register of Deeds

****

1998198343

FOR REGISTRATION JUDITH A. GIBSON
REGISTER OF DEEDS
MECKLENBURG COUNTY, NC
2000 FEB 03 04:07 PM
BOOK:11067 PAGE:941-946 FEE:$16.00
INSTRUMENT # 2000015077

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

WASTEWATER TREATMENT AND DISPOSAL SYSTEM DESIGN AGREEMENT: 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c); OR .1969

FILE # 4175 B
PARCEL # 041-124-07

The undersigned, Rick Jefferies, owner of property located at 2201 Sunset Blvd, (the "site") and described in an instrument recorded in Book _____ at Page _____, Mecklenburg Public Registry, hereby acknowledges that the undersigned applied to the Mecklenburg County Health Department (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 15A NCAC 18A .1900 et seq.; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested 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 is allowed by the rules; 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 the responsibility of the designer, owner, developer, installer, or user of the system, as applicable, 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 acknowledges that the following conditions will apply to the site:

- Any changes on the property may make the Improvement Permit Null and void and may make the Improvement Permit subject to revocation.

This instrument was prepared by: Tina Bradford
Mail after recording to: Ricky Jefferies 5229 Nevin Rd Apt J 28269 Charlotte N.C.

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement 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.

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.

IN WITNESS WHEREOF, the undersigned 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, this 24 day of January, ~~199~~ 2000.

~~(Corporate Name)~~ Homeowner

Homeowner ~~(SEAL)~~

(SEAL)

By: _____ (SEAL)

_____ President (SEAL)

ATTEST:

_____

_____ Secretary

~~(Corporate Seal)~~

STATE OF NORTH CAROLINA
COUNTY OF _____

I, Tina Bradford, a Notary Public for said County and State, do hereby certify that Rick Jefferies & Teresa Jefferies personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 24 day of January, ~~199~~ 2000.

Tina H Bradford
Notary Public

My Commission Expires: 9/13/04

TINA H BRADFORD NOTARY PUBLIC LINCOLN CO. NC MY COMMISSION EXPIRES SEPT. 13, 2004

RBCWM:24751_1/8-30-95

Mecklenburg County
Health Department

TELECOPIER TRANSMITTAL COVER SHEET

*** NOTICE ***

THE INFORMATION CONTAINED IN THIS TELECOPY MAY BE PRIVILEGED AND/OR CONFIDENTIAL AND IS INTENDED ONLY FOR THE USE OF THE PERSON TO WHOM IT IS ADDRESSED. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT (OR SUCH RECIPIENT'S EMPLOYEE OR AGENT), YOU ARE HEREBY NOTIFIED NOT TO READ, DISTRIBUTE OR COPY THE MATERIALS ATTACHED HERETO WITHOUT THE PRIOR WRITTEN CONSENT OF THE SENDER. IF YOU HAVE RECEIVED THIS TELECOPY IN ERROR, PLEASE NOTIFY THE SENDER BY TELEPHONE CALL AND RETURN THE ORIGINAL TELECOPY TO US BY MAIL AND WE WILL REIMBURSE YOU FOR THE REQUIRED POSTAGE. THANK YOU.

TO: Ea Mike Short TELECOPIER # 598-5700

FROM: L. Thompson DATE 1-21-00

NUMBER OF PAGES TRANSMITTED: 6 (including cover sheet)

COMMENTS:

If you do not receive all pages, please call us as soon as possible at the following number: (704)336-5102.

☐ Original will not follow ☐ Original will follow via:

☐ U.S. Mail ☐ Hand Delivery ☐ ____

Environmental Health Division
700 North Tryon Street • Suite 211 • Charlotte, North Carolina 28202-2236

Date: 01/21/2000

To: Mike Short

From: Larry Thompson, R.S.

RE: 2201 Sunset Boulevard

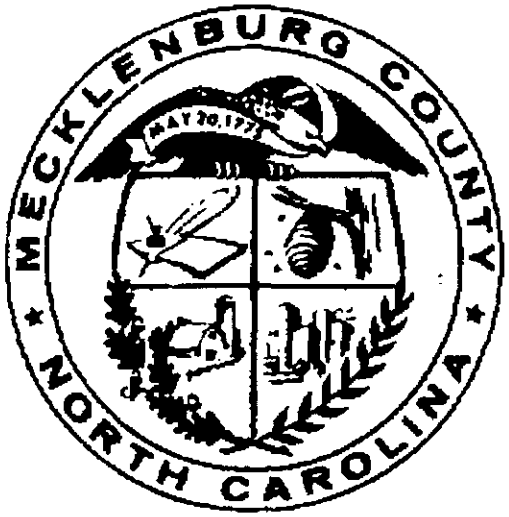
As we discussed, the Agreement Form needs to be signed, notarized and recorded at the Register of Deeds office, 720 East 4th Street. Please bring a copy of the recorded form to this office when you come to pick up the septic permit.

We will also need a copy of the original deed for this property. This is to verify the age of the lot and hopefully exclude it from the one hundred percent repair area requirement.

There will be a $150.00 Construction Authorization fee due at this time. The final $150.00 Operation Permit fee will be due before the release for permanent power can be made.

Let me know if you have any questions regarding this matter. I can be reached at 336-5568.

LT



JUDITH A. GIBSON
REGISTER OF DEEDS , MECKLENBURG COUNTY
COUNTY & COURTS OFFICE BUILDING
720 EAST FOURTH STREET
CHARLOTTE NC 28202

****

Filed For Registration:	**02/03/2000 04:07 PM**
Book:	**RE 11067 Page: 941-946**
Document No.:	**2000015077**
	PRMIT 6 PGS $16.00
Recorder:	**ROBIN CANADY**

****

State of North Carolina, County of Mecklenburg

The foregoing certificate of TINA H BRADFORD Notary is certified to be correct. This 3 RD of February 2000

JUDITH A. GIBSON, REGISTER OF DEEDS By: Robin Canady
Deputy/Assistant Register of Deeds

****



2000015077

FEE: 200.00 / CK. NO. 18275

DATE: 1/Blank CW

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 #: 4175B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 04112407

STREET ADDRESS: 2201 Sunset Blvd

SUBDIVISION OR MOBILE HOME PARK NAME: Sunset Park Subdivision

LOT NUMBER: 7

TOWNSHIP (CHECK ONE):

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

CLOSING DATE 1-30-00

TYPE OF BUILDING (CHECK ONE):

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

HEATED SQUARE FOOTAGE:

NUMBER OF BEDROOMS: 4 NUMBER OF OCCUPANTS:

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)
✓ MUNICIPAL (M)
__ PRIVATE WELL (P)
__ SHARED WELL (S)
__ OTHER 'SPRINGS' (O)

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: Jefferies Ricky L
(LAST) (FIRST) (MI)

ADDRESS: ~~2201 Sunset Blvd~~ 5229 Nivens Apt J

CITY: Charlotte STATE: N.C. ZIP: 28269 28269

DAYTIME PHONE: (704) 487-9591

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: [signature]

DATE: 1-12-00

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

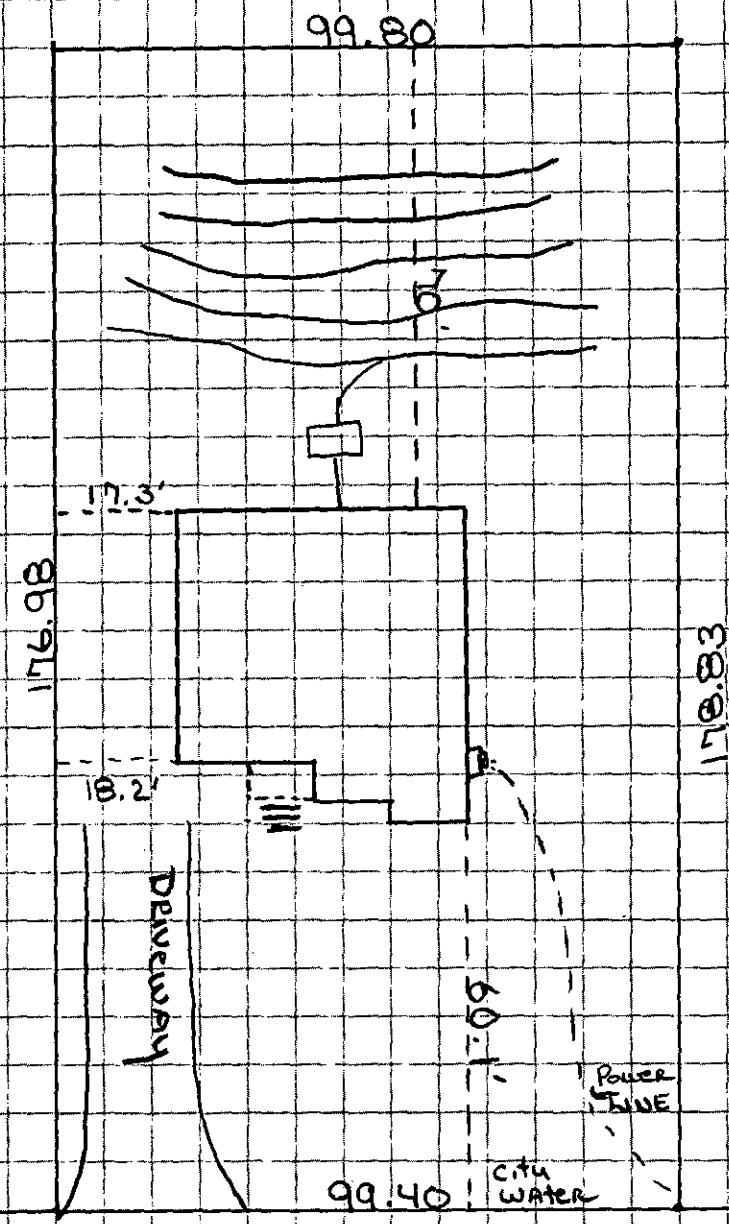
PROPOSED PLOT PLAN

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

FILE: 4175B

TC: 041-124-07

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.



1/12-00

APPROVAL DATE _____

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

Mecklenburg County
Health Department

Conditions of Improvement Permit

File Number: 4175B
Site Address: 2201 Sunset Boulevard

1. The wastewater treatment and disposal system permitted is a Prefabricated, Permeable Block Panel System (PPBPS). A Wastewater Treatment and Disposal System Design Agreement will be required in order to reclassify this lot "provisionally suitable" in light of using the PPBPS proposed.
2. Nitrification trenches shall be constructed as level as possible but in no case shall the fall in a single trench bottom exceed one-fourth inch in 10 feet as determined by an engineer's level or equivalent.
3. Group I (sand) backfill will be required around the PPBPS drain lines.
4. Any changes in the site must be pre-approved by the Mecklenburg County Environmental Health Department.
5. The wastewater treatment and disposal drain field area, including the designated repair areas, shall not be used for any of the following:

    - Grading or filling
    - Parking or driving heavy equipment in the area or subjecting the site to possible soil compaction
    - Construction staging area
    - Installation of lawn irrigation components
    - Installation of underground utilities or cables of any type
    - Burial of any debris or material
    - Utilizing the area for gravesites
    - Diversion of storm water runoff into this area

6. Septic system installer must be registered with Mecklenburg County prior to meeting for the required pre-construction conference.
7. System installer will be required to water level the distribution device prior to final system approval.
8. The system owner shall have the contents of the septic tank checked, and the contents of the tank removed, periodically from all compartments, to ensure proper operation of the system. The contents of the septic tank shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.
9. All septic tank riser and effluent filter rules will apply to this system. It is strongly recommended that access risers be added to both ends of the septic tank, extending to at least finish grade. This will allow periodic inspection of the solids level in the tank as well as help facilitate the periodic cleaning of the effluent bio-filter.
10. It is the responsibility of the home builder to assure that the outlet for the plumbing is kept at a height which will allow the drain lines to be installed at a depth equal to or less than 30 inches. If septic tank cannot be installed shallow enough to allow for a 30 inch deep drain field installation, a design for a pressure dosed PPBPS will be required.

Owner/Agent _____ **Date** 2/14/00

PEOPLE • PRIDE • PROGRESS

Environmental Health Division

700 North Tryon Street • Suite 211 • Charlotte, North Carolina 28202-2236

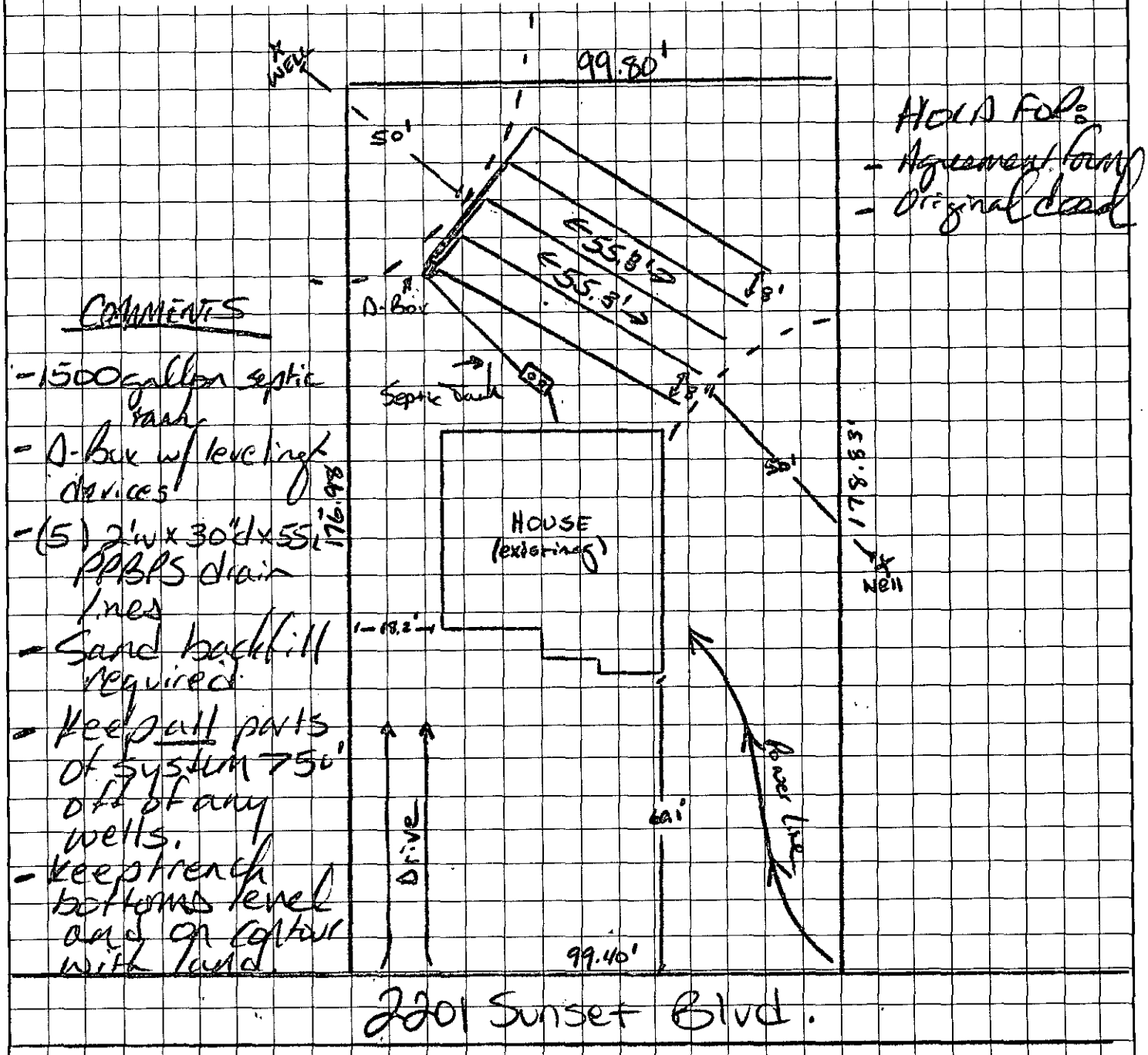
PROPOSED PLOT PLAN

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

FILE: 4175 B

TC: 041-124-07

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.



COMMENTS

- 1500 gallon septic tank
- D-Box w/ leveling devices
- (5) 2'w x 30'l x 55" PPBPS drain lines
- Sand backfill required
- Keep all parts of system 75' off of any wells.
- Keep trench bottoms level and on contour with land.

2201 Sunset Blvd.

Kathleen Parks
OWNER/AGENT SIGNATURE

DATE 2/14/00

APPROVAL DATE 1-24-00

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

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

9 & #2

Sheet: _____
Property ID: 041-124-07
Lot #: 307,308
File #: 4175B

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Ricky Jefferies APPLICANT: _____
ADDRESS: 5229 Revere Apt. J, Charlotte DATE EVALUATED: 1-14-00
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949) ~~480gpd~~ PROPERTY SIZE: .41
LOCATION OF SITE: 2201 Sunset Blvd PROPERTY RECORDED: _____

WATER SUPPLY: ☐Private ☑Public ☐Well ☐Spring ☐Other _____

EVALUATION METHOD: ☑Augur Boring ☐Pit ☐Cut

TYPE OF WASTEWATER: ☑Sewage ☐Industrial Process ☐Mixed

PROFILE #	4-12% .1940 Landscape Position/ Slope %	Horizon Depth (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS &LTAR
1	LS	0-8"	gr/sl	Fr/SE/P/SS/SP	>48" TO soil wetness	48"+	N/A	None	PS .39 Pz IV
		8-41"	SBK/SC	Fi/SE/P/S/P					
		41-48"	SBK/SCl	Fr/SE/P/SS/SP					
2	LS	0-7"	gr/sl	Fr/SE/P/SS/SP	>48" To soil wetness	48"+	N/A	None	PS .39 Pz IV
		7-37"	SBK/SC	Fi/SE/P/S/P					
		37-48"	SBK/SCl	Fr/SE/P/SS/SP					
3	LS	0-9"	gr/sl	Fr/SE/P/SS/SP	>48" To soil wetness	48"+	N/A	None	PS .39 Pz IV
		9-39"	SBK/SC	Fi/SE/P/S/P					
		39-48"	SBK/SCl	Fr/SE/P/SS/SP					
4	LS	0-2"	gr/sl	Fr/SE/P/SS/SP	>51" TO soil wetness	51"	N/A	None	PS .39 Pz
		2-29"	SBK/C	Fi/SE/P/S/P					
		29-42"	SBK/C	Fr/SE/P/SS/SP					
		42-51"	SBK/SCl	Fr/SE/P/SS/SP					

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): Unsuitable
EVALUATED BY: W.R. Marlin LSS - 1-14-00
OTHER(S) PRESENT: _____

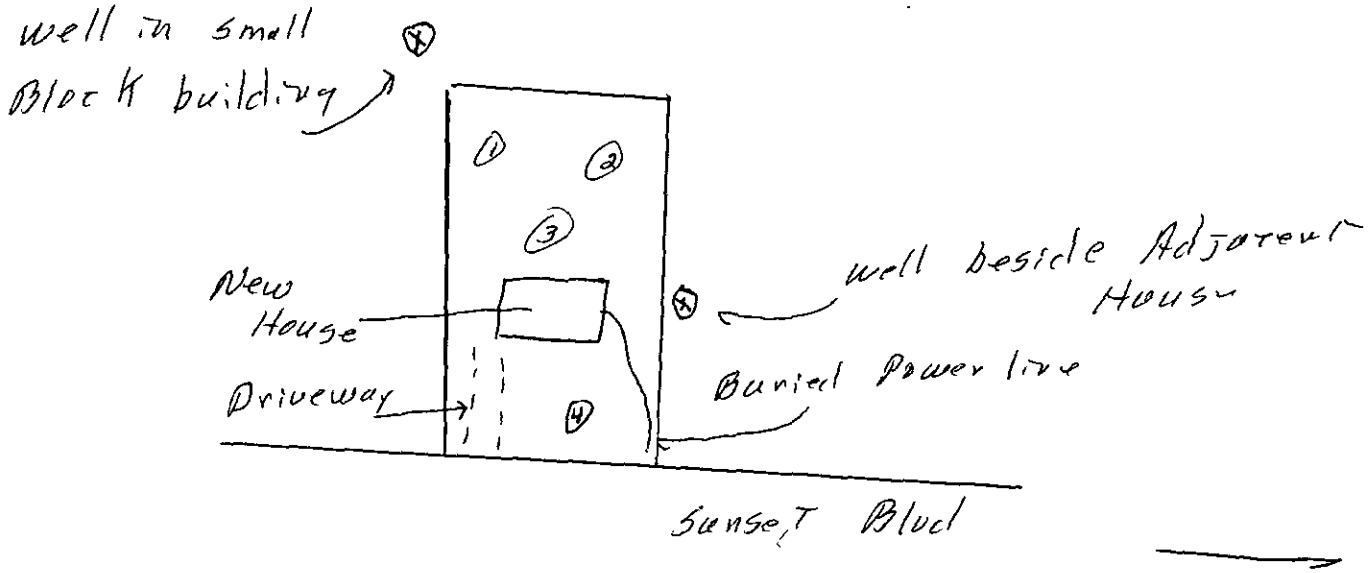
FILE # _____

COMMENTS Lot does not appear to be with 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	CONSISTENCE 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	



2

Mecklenburg County
Health Department

Ricky L Jo~~ste~~ries
5229 Nivens Rd Apt J
Charlotte NC 28269

Re: 2201 Sunset Rd
File: 4175 B
Parcel: 04(-124-07

Dear Property Owners:

Receipt of your Application for Improvement Permit for the above referenced property is acknowledged. A soil evaluation and a site visit have been conducted. The results of the evaluation indicated that the site is **UNSUITABLE** under Rules .1945

For these reasons your Application for Improvement Permit is denied. A possible way to develop the site exists under Rule .1948(d), which reads as follows:

> A site classified as **UNSUITABLE** may be used for a ground absorption sewage treatment and disposal system specifically identified in Rules .1955, .1956, or .1957 of this Section or a system approved under Rule .1969 if written documentation including engineering, hydrogeologic, geologic or soil studies, indicates to the local health department that the proposed system can be expected to function satisfactorily. Such sites shall be reclassified as **PROVISIONALLY SUITABLE** if the local health department determines that the substantiating data indicate that:
>
> (1) a ground absorption system can be installed so that the effluent will be non-pathogenic, non-infectious, non-toxic, and non-hazardous;
> (2) the effluent will not contaminate ground or surface water; and
> (3) the effluent will be exposed on the ground surface or be discharged to surface waters where it could come in contact with people, animals, or vectors.

The State shall review the substantiating date if requested by the local health department.

Please be advised that you have the right to an informal review by this department. You also have the right to appeal under G.S. 130A-24, and to have the appeal held in Mecklenburg County

If you have any questions regarding this matter, please call me at 336-5575.

Sincerely,

Kelly Randall, R.S.
Individual Water and Wastewater Systems