

10516 KNOX AV

23104116

1/3/2008

duponbj

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

Mecklenburg County
Health Department

October 18, 1995

Ms. Dorothy Young
2370 Saluda Road
Chester, SC 29706

Re: 10516 Knox Avenue
File: 3761B
Parcel: 231-041-16

Dear Ms. Young:

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 Rule .1941 (a) (3) (B) **SOIL CHARACTERISTICS (MORPHOLOGY)**, .1942 (a) **SOIL WETNESS CONDITIONS**, .1943 (a) **SOIL DEPTH**, and .1945 (a) **AVAILABLE SPACE**. 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 groundwater or surface water; and
> (3) the effluent will not 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 data 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.

You may wish to contact the Charlotte-Mecklenburg Utility Department at 399-2551 to inquire about the possibility of municipal sewer service.

If you have any questions concerning this matter please contact me at 336-5568.

Sincerely,

Larry B. Thompson, Jr., R.S.

Larry B. Thompson, Jr., R.S.
Individual Water and Wastewater Systems

COPY

Mecklenburg County
Health Department

October ~~11~~ 16, 1995

~~Angelia Grant~~ Dorothy Yoane
~~13806 Holbrook Road~~ 2370 Saluda Rd
~~Huntersville, NC~~ Chester, SC 29706

Re: ~~6404-6408 Pamela Street~~ 10516 Knox Avenue
File: ~~3738B~~ 3761 B
Parcel: ~~013-014-44,45~~ 231-041-16

Dear Ms. Grant:

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 Rule .1941 (a) (3) (B) SOIL CHARACTERISTICS (MORPHOLOGY), ~~and~~ .1942 (a) SOIL WETNESS CONDITIONS. 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:

.1943 (a) Soil Depth, and .1945 (a) Available Space.

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 tot 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 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 groundwater or surface water; and

(3) the effluent will not 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 data 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.

→ You may wish to contact the Charlotte-Mecklenburg Utility Dept at 399-2551 to inquire about the possibility of municipal sewer service.

If you have any questions concerning this matter please contact me at 336-55~~75~~. 68

Sincerely,

Kelly Randall

~~Kelly Randall, R.S., Soil Scientist~~
~~Individual Water and Wastewater~~ Systems

#42

FEE: 100 CK # 1066 pd

DATE: 10/6/95

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

McKee @ Knox Ave - after Tilley Morris Rd.

| | CRT

TYPE APPLICATION: X NEW SYSTEM ___ EXPANSION 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 #: 3761B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 231-041-16

STREET ADDRESS: 10516 Knox Avenue

SUBDIVISION OR MOBILE HOME PARK NAME: BELLE-MEADE

LOT NUMBER: 12

TOWNSHIP (CHECK ONE):

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

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: 2500

NUMBER OF BEDROOMS: 4 NUMBER OF OCCUPANTS:

FOUNDATION FOR RESIDENCE:

___ WITHOUT BASEMENT
___ ON SLAB
X CRAWL SPACE
___ WITH BASEMENT /PLUMBING
___ WITH BASEMENT /NO PLUMBING

IF EXPANSION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED ADDITION:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: ___ YES X NO TYPE: _____

WATER SUPPLY (CHECK ONE):
___ COMMUNITY (C)
___ MUNICIPAL (M)
X 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 X NO
EXISTING WASTE WATER SYSTEMS ___ YES X NO
EASEMENTS OR RIGHT-OF-WAYS ___ YES X NO
WELL SPRINGS OR WATERLINES ___ YES X NO
DESIGNATED WETLANDS ___ YES X NO

PROPERTY OWNER:

NAME: Young Dorothy
(LAST) (FIRST) (MI)

ADDRESS: 2370 Saluda Rd.

CITY: Chester STATE: S.C ZIP: 29706

DAYTIME PHONE: (803) 581-1105

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: Turner Bob
(LAST) (FIRST) (MI)

DAYTIME PHONE: (704) 377-2500.

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 4-11-53

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: B. Turner, Owner's agent DATE: 10-6-95

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

COPY

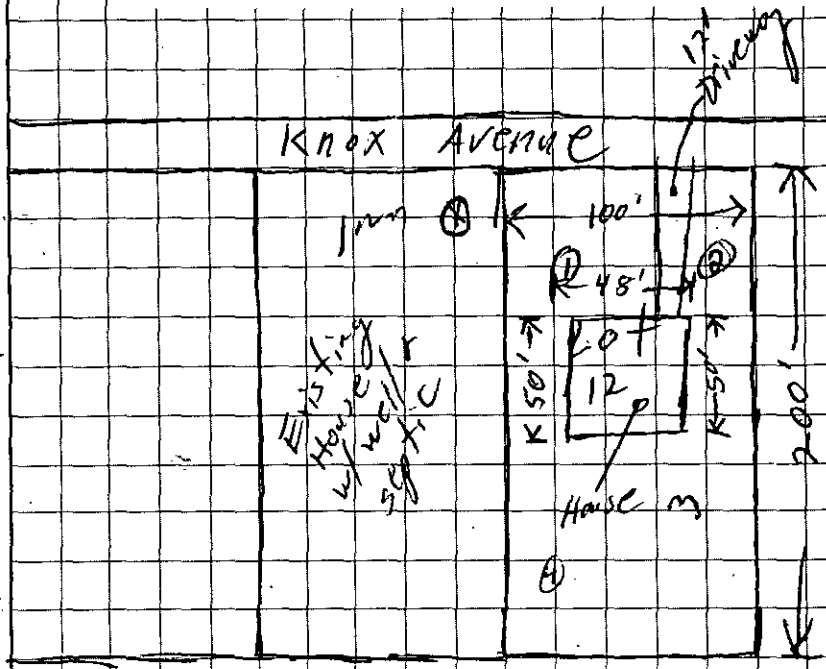
PROPOSED PLOT PLAN

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

FILE: 3761B

TC: 231-041-16

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 0-10" SZL BLK
2.5YR 4/6
10-24" 7.5 5/6 RD/4
C
10YR 4/6
29-35" 2.5Y 6/1 M
2.5YR 4/6
2.5Y 6/2

#2 0-7 SZL 3 3YR 4/6

3-16" C 2.5YR 4/6
16"- 25" 2.5YR 6/6
2.5YR 4/6
2.5Y 7/1

#3
3- 10YR 4/3 L
2-8" SZL 10YR 4/3 SZL
6-8.25" 10YR 4/6 / 5/6
22-37" 10YR 5/6 C
2.5Y 7/1 M

#4
0-14" SZL 3 4YR 5/6
14-37" 2.5Y 5/4
35' 2.5Y 7/2

McKee Rd

Owner Agent
OWNER/AGENT SIGNATURE

DATE 10-6-95

APPROVAL DATE _____

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

3761B

Sheet ___ of ___
PROPERTY ID #: ___
COUNTY: ___
231-041-16
(3)

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Dorothy Young APPLICANT: Bob Turner (Agent)
ADDRESS: 2370 Saluda Rd, Chester, S.C. 29706 APPLICATION DATE: ___ DATE EVALUATED: 10/10/95
PROPOSED FACILITY: Residence PROPOSED DESIGN FLOW (.1949): 460gpd PROPERTY SIZE: .46
LOCATION OF SITE: 10516 Knox Ave PROPERTY RECORDED: ___
WATER SUPPLY: ☑ Private ☐ Public ☐ Well ☐ Spring ☐ Other ___
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFIL CLASS & LTA
1	CV 6%	0-10"	SC/SBK	SEXP/FR/S/P	2.5YR 4/6	US 35"	N/A	PS 736	US
		10-29"	C/SBK	SEXP/FR/S/P	2.5YR 3/6				
		29-35"	C/SBK	SEXP/FR/S/P	2.5YR 4/8				
				2.5Y 8/1 MOTTLES	29-35 US				
2	CV	0-3	SCL/SBK	SEXP/FI/SS/SP	5YR 4/4	US 23"	NA	PS 736"	US
		3-16"	C/SBK	SEXP/FR/S/P	2.5YR 4/6		NA		
		18-25"	C/SBK (WEAK)	SEXP/FR/S/P	2.5Y 7/1 MOTTLES 23"				
3	LS	0-2"	L/GR	SEXP/NS/NP	US	31"	NA	PS 736"	US
		2-8"	SCL/SBK	SEXP/SS/SP					
		8-22"	C/SBK	SEXP/S/P					
		22-31	C/SBK	SEXP/S/P	2.5Y 7/1 29-30" MOTTLES				
4		0-14"	SCL/GR	SEXP/SS/SP	US	PS 31"	NA	736	US
		14-37"	C/SBK	SEXP/S/P	2.5Y 7/1 30-36" MOTTLES				

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	limited	limited
System Type(s)		

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): ___
EVALUATED BY: W.A. Marlin
OTHER(S) PRESENT: ___

OMMENTS: Could Possibly Be Considered For Some Type of Shallow pierced System, Space limited

LEGEND

use the following standard abbreviations

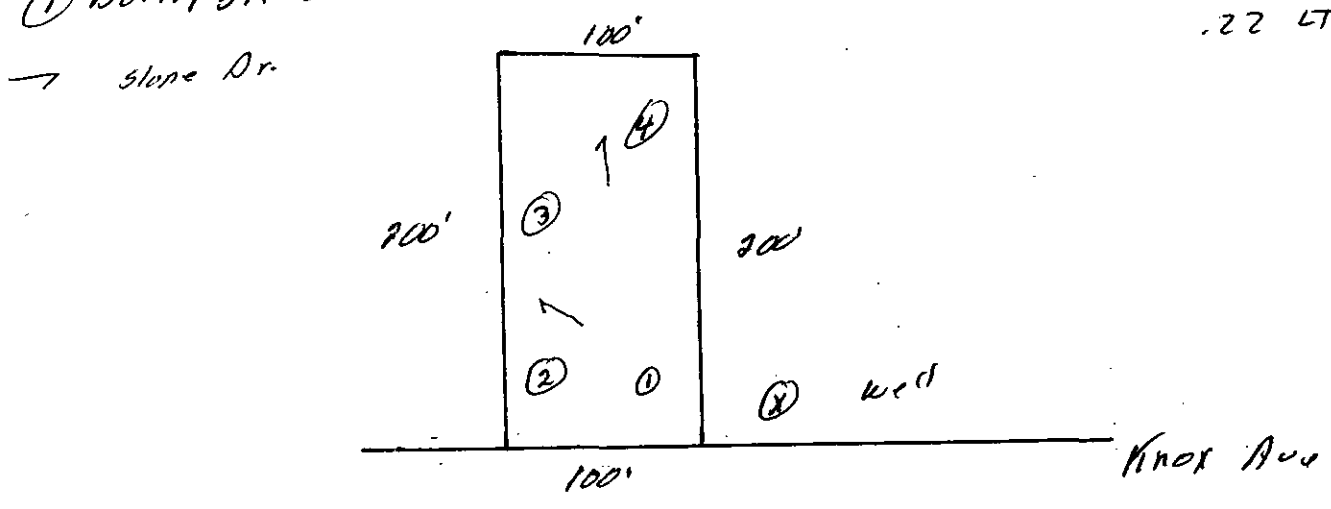
LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR	LPP .1957 LTAR	MINERALOGY/ CONSISTENCE	STRUCTURE
C (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive)	G (Single Grain)
V (Convex Slope)		LS (Loamy Sand)			SEXP (Slightly Expansive)	M (Massive)
(Drainage Way)					EXP (Expansive)	CR (Crumb)
S (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
P (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
S (Foot Slope)						ABK (Angular Blocky)
(Head Slope)	III	SI (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
(Linear Slope)		SICL (Silty Clay Loam)				PR (Prismatic)
(Nose Slope)		CL (Clay Loam)				
(Ridge)		SCL (Sandy Clay Loam)			MOIST	WET
(Shoulder Slope)		SUC (Silt Loam Clay)				
(Terrace)					VFR (Very Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Friable)	SS (Slightly Sticky)
		SIC (Silty Clay)			FI (Firm)	S (Sticky)
					VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None		EFI (Extremely Firm)	NP (Non-plastic)
						SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

OTES

ORIZON DEPTH	In inches below natural soil surface
EPTH OF FILL	In inches from land surface
ESTRICTIVE HORIZON	Thickness and depth from land surface
APROLITE	S(suitable) or U(unsuitable)
OIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
LASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

valuation of saprolite shall be by pits.
ong-term Acceptance Rate (LTAR): gal/day/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).



FEE: $100 chk # 1066 pd
DATE: 10/6/95

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

[ ] CRT

TYPE APPLICATION: [X] NEW SYSTEM [ ] EXPANSION 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 #: 3761B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 231-041-16

STREET ADDRESS: 10516 Knox Avenue

SUBDIVISION OR MOBILE HOME PARK NAME: BELLE-MEADE

LOT NUMBER: 12

TYPE OF BUILDING, (CHECK ONE)

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

HEATED SQUARE FOOTAGE: 2500

NUMBER OF BEDROOMS: 4 NUMBER OF OCCUPANTS:

FOUNDATION FOR RESIDENCE:

[ ] WITHOUT BASEMENT ON SLAB
[X] CRAWL SPACE
[ ] WITH BASEMENT /PLUMBING
[ ] WITH BASEMENT /NO PLUMBING

TOWNSHIP (CHECK ONE):

[X] 0 MECKLENBURG
[ ] 1 CHARLOTTE
[ ] 2 DAVIDSON
[ ] 3 CORNELIUS
[ ] 4 PINEVILLE
[ ] 5 MATTHEWS
[ ] 6 HUNTERSVILLE
[ ] 7 MINT HILL

IF EXPANSION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED ADDITION:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: [ ] YES [X] NO TYPE: _____

WATER SUPPLY (CHECK ONE):

[ ] COMMUNITY (C) [ ] MUNICIPAL (M) [X] 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 [X] NO
EXISTING WASTE WATER SYSTEMS [ ] YES [X] NO
EASEMENTS OR RIGHT-OF-WAYS [ ] YES [X] NO
WELL SPRINGS OR WATERLINES [ ] YES [X] NO
DESIGNATED WETLANDS [ ] YES [X] NO

PROPERTY OWNER:

NAME: Young (LAST) Dorothy (FIRST) (MI)

ADDRESS: 2370 Saluda Rd.

CITY: Chester STATE: SC ZIP: 29706

DAYTIME PHONE: (803) 581-1105

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: Turner (LAST) Bob (FIRST) (MI)

DAYTIME PHONE: (704) 372-2500.

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 4-11-53

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: BC Turner, owner's agent DATE: 10-6-95

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

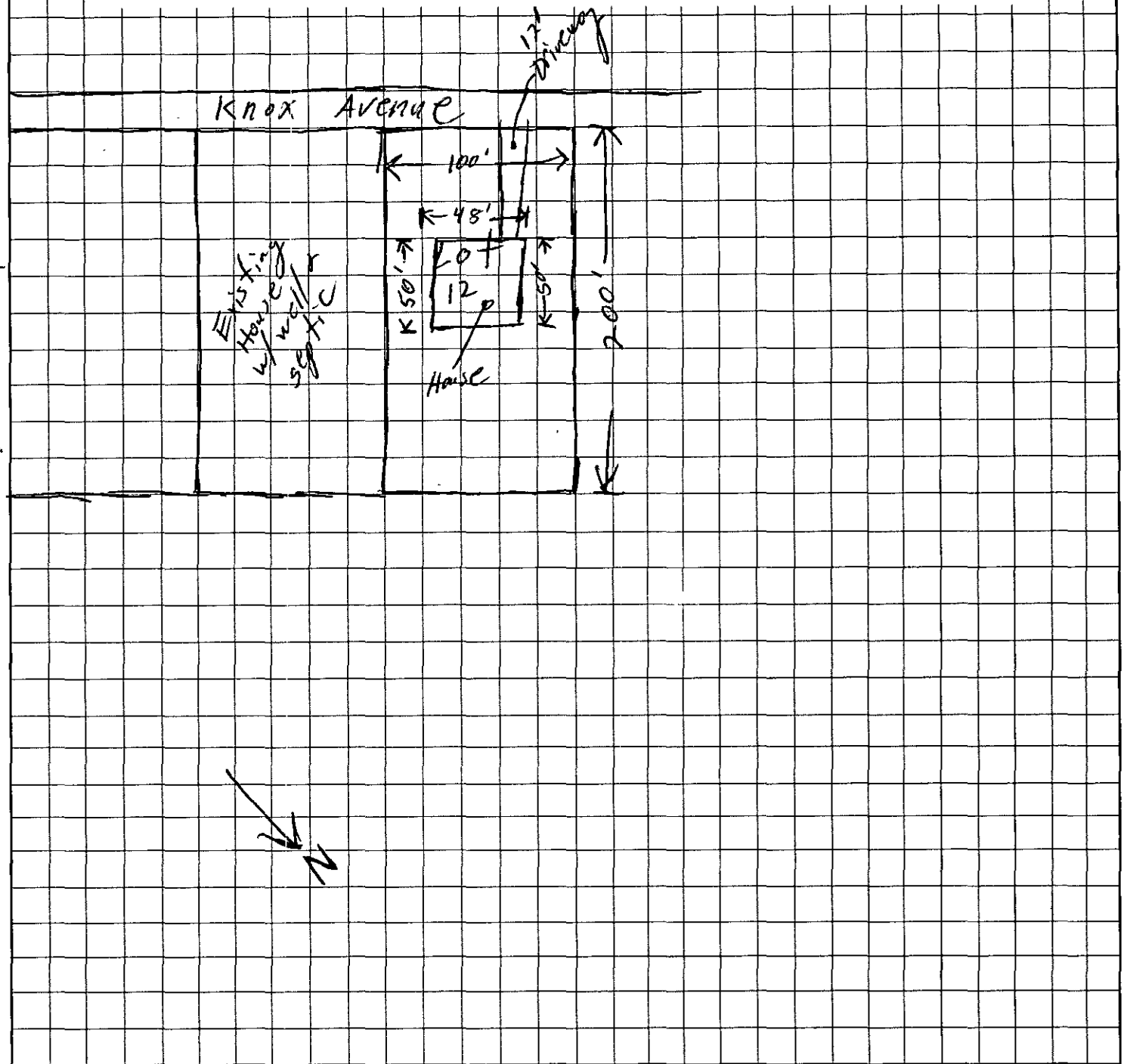
PROPOSED PLOT PLAN

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

FILE: 3761B

TC: 231-04/-16

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 10-6-95

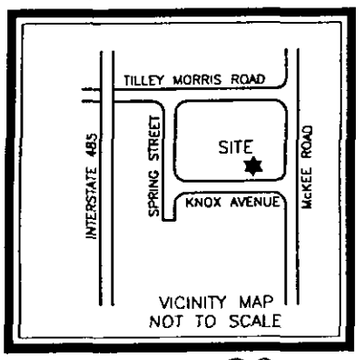
APPROVAL DATE _____

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

THIS IS TO CERTIFY THAT ON THE 11 DAY OF SEPTEMBER 19 95 AN ACTUAL SURVEY WAS MADE UNDER MY SUPERVISION OF THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE BOUNDARY LINES AND THE IMPROVEMENTS, IF ANY, ARE AS SHOWN HEREON. THIS PLAT MEETS THE MINIMUM STANDARDS OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA, BOARD RULE .1600 (21 NCAC 56) AND THE ERROR OF CLOSURE FOR THIS PARCEL DOES NOT EXCEED ONE (1) FOOT PER 10,000 FEET OF PERIMETER SURVEYED NOR 20 SECONDS TIMES THE SQUARE ROOT OF THE NUMBER OF ANGLES TURNED.

SIGNED C. Clark Neilson

R. B. PHARR & ASSOCIATES, REGISTERED SURVEYORS
1900 EAST SEVENTH STREET
CHARLOTTE, N.C. 28204
TEL. (704) 376-2186



MAP BOOK 6, PAGE 837 REFERENCE:

9

30

1.23'

E.I.P REFERENCE N.I.P

S 43° 42' 33" E 99.88'

E.I.P

S 43° 42' 33" E 100.19' (TIE) E.I.P REFERENCE:

NORTH CAROLINA REGISTERED SEAL L-3212 LAND SURVEYOR C. CLARK NEILSON

N 47° 55' 3" E 200.04'

LOT 12
No. 10516
(VACANT)
AREA: 19,931 SQ. FT.
0.458 ACRE

S 48° 1' 49" W 200.01'

13

11

S 44° 8' 52" E 199.19' (TIE) E.I.P REFERENCE:

E.I.P

N 43° 44' 00" W 99.49'

E.I.P

S 43° 44' 00" E 199.90' (TIE) E.I.P REFERENCE:

S 43° 44' 00" E 100.01' (TIE) E.I.P REFERENCE:

KNOX AVENUE

50' PUBLIC DEDICATED RIGHT-OF-WAY

SURVEY OF:

LOT 12, BELLE-MEADE

PROVIDENCE TOWNSHIP, MECKLENBURG COUNTY
CHARLOTTE N.C.

THE PROPERTY OF RICHARD J. MOSES

SCALE 1"=30'

MAP BOOK 6 PAGE 837

DEED BOOK _____ PAGE _____

FLOOD CERTIFICATION

THIS IS TO CERTIFY THAT THE SUBJECT PROPERTY IS NOT LOCATED IN A SPECIAL FLOOD HAZARD AREA AS SHOWN ON MAPS PREPARED BY THE FEDERAL EMERGENCY MANAGEMENT AGENCY, FEDERAL INSURANCE ADMINISTRATION, DATED FEBRUARY 3, 1993

TAX NUMBER: 231-041-16

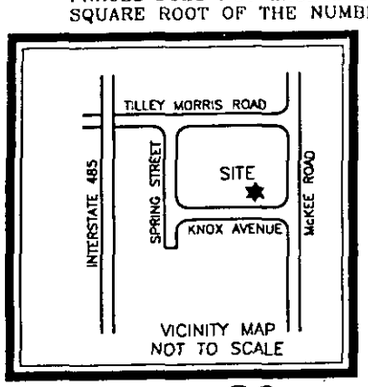
36986

File 376B

THIS IS TO CERTIFY THAT ON THE 11 DAY OF SEPTEMBER 19 95 AN ACTUAL SURVEY WAS MADE UNDER MY SUPERVISION OF THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE BOUNDARY LINES AND THE IMPROVEMENTS, IF ANY, ARE AS SHOWN HEREON. THIS PLAT MEETS THE MINIMUM STANDARDS OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA, BOARD RULE .1600 (21 NCAC 56) AND THE ERROR OF CLOSURE FOR THIS PARCEL DOES NOT EXCEED ONE (1) FOOT PER 10,000 FEET OF PERIMETER SURVEYED NOR 20 SECONDS TIMES THE SQUARE ROOT OF THE NUMBER OF ANGLES TURNED.

SIGNED C. Clark Neilson

R. B. PHARR & ASSOCIATES, REGISTERED SURVEYORS
1900 EAST SEVENTH STREET
CHARLOTTE, N.C. 28204
TEL. (704) 376-2186



REFERENCE: MAP BOOK 6, PAGE 837

9

30

E.I.P REFERENCE N.I.P 1.23'

S 43° 42' 33" E 99.88'

E.I.P

S 43° 42' 33" E 100.19' (TIE) E.I.P REFERENCE:

NORTH CAROLINA REGISTERED SEAL L-3212 LAND SURVEYOR C. CLARK NEILSON

N 47° 55' 3" E 200.04'

LOT 12
No. 10516
(VACANT)
AREA: 19,931 SQ. FT.
0.458 ACRE

S 48° 1' 49" W 200.01'

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11

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E.I.P

N 43° 44' 00" W 99.49'

E.I.P

S 43° 44' 00" E 199.90' (TIE) E.I.P REFERENCE:

S 43° 44' 00" E 100.01' (TIE) E.I.P REFERENCE:

KNOX AVENUE

50' PUBLIC DEDICATED RIGHT-OF-WAY

SURVEY OF:

LOT 12, BELLE-MEADE

PROVIDENCE TOWNSHIP, MECKLENBURG COUNTY
CHARLOTTE N.C.

THE PROPERTY OF RICHARD J. MOSES

SCALE 1"=30'

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TAX NUMBER: 231-041-16

36986

File 376B

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

3761B

Sheet ___ of ___
PROPERTY ID #: ___
COUNTY: ___
231-041-16
(3)

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Dorothy Young APPLICANT: Bob Turner (Agent)
ADDRESS: 2370 Saluda Rd, Chester, S.C. 29706 APPLICATION DATE: ___ DATE EVALUATED: 10/10/95
PROPOSED FACILITY: Residence PROPOSED DESIGN FLOW (.1949): 480gpd PROPERTY SIZE: .46
LOCATION OF SITE: 10516 Knox Ave PROPERTY RECORDED: ___
WATER SUPPLY: ☑ Private ☐ Public ☐ Well ☐ Spring ☐ Other ___
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	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	PROFIL CLASS & LTAR
1	CV 6%	0-10"	SC/SBK	SEXP/Fr/S/P	2.5YR 4/6	US 35"	N/A	PS 736	US
		10-29"	C/SBK	SEXP/Fr/S/P	2.5YR 3/6				
		29-35"	C/SBK	SEXP/Fr/S/P	2.5YR 4/8				
				2.5Y 8/1 Moth	29-35 US				
2	CV	0-3	SCL/SBK	SEXP/Fi/SS/SP	5YR 4/4	US 23"	NA NA	PS 736"	US
		3-18"	C/SBK	SEXP/Fr/S/P	2.5YR 4/6				
		18-25"	C/SBK (weak)	SEXP/Fr/S/P	2.5Y 7/1 MoHles				
3	LS	0-2"	L/gr	SEXP/NS/NP	US	37"	NA	PS 736"	US
		2-8"	SCL/SBK	SEXP/SS/SP					
		8-22"	C/SBK	SEXP/S/P					
		22-37	C/SBK	SEXP/S/P	2.5Y 7/1 29-30"				
4		0-14"	SCL/Gr	SEXP/SS/SP	US	PS 37"	NA	736	US
		14-37"	C/SBK	SEXP/S/P	2.5Y 7/1 30-36"				

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	1:m;Trd	1:m;Trd
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): ___
EVALUATED BY: W.A. Mauldin
OTHER(S) PRESENT: ___

OMMENTS: Could Possibly Be Considered For Some Type of Shallow placed System, Space limited

LEGEND

use the following standard abbreviations

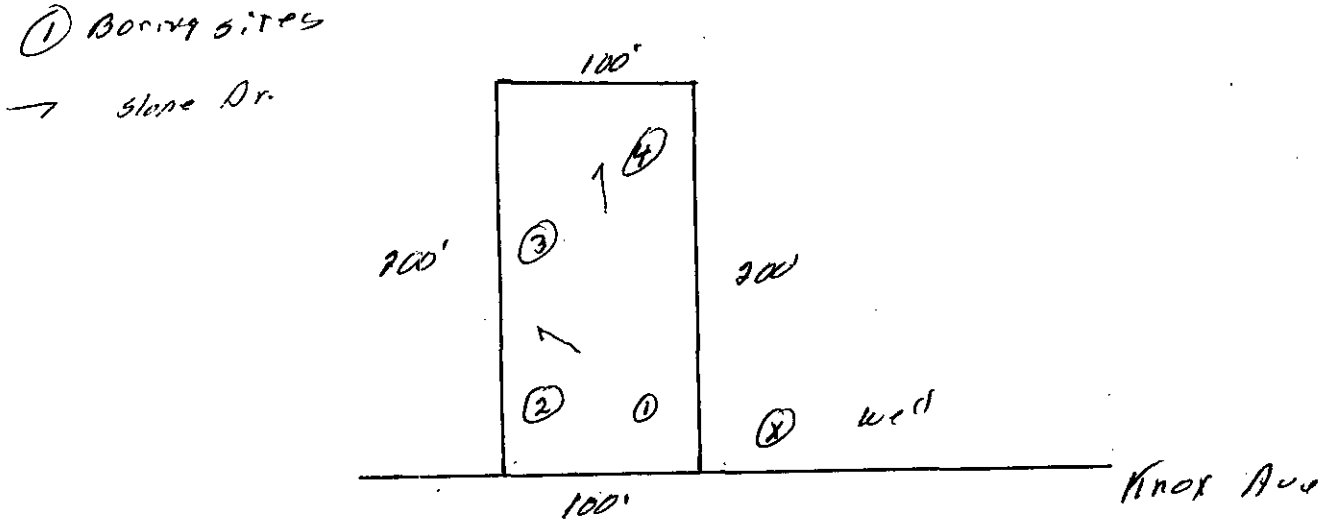
ANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR	LPP .1957 LTAR	MINERALOGY/ CONSISTENCE	STRUCTURE
C (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive)	G (Single Grain)
V (Convex Slope)		LS (Loamy Sand)			SEXP (Slightly Expansive)	M (Massive)
(Drainage Way)					EXP (Expansive)	CR (Crumb)
S (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
P (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
S (Foot Slope)						ABK (Angular Blocky)
(Head Slope)	III	SI (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
(Linear Slope)		SICL (Silty Clay Loam)				PR (Prismatic)
(Nose Slope)		CL (Clay Loam)				
(Ridge)		SCL (Sandy Clay Loam)			MOIST	WET
(Shoulder Slope)		SLC (Silt Loam Clay)				
(Terrace)					VFR (Very Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Friable)	SS (Slightly Sticky)
		SIC (Silty Clay)			FI (Firm)	S (Sticky)
					VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None		EFI (Extremely Firm)	NP (Non-plastic)
						SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

OTES

ORIZON DEPTH	In inches below natural soil surface
EPTH OF FILL	In inches from land surface
ESTRICTIVE HORIZON	Thickness and depth from land surface
APROLITE	S(suitable) or U(unsuitable)
OIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
LASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

valuation of saprolite shall be by pits.
ong-term Acceptance Rate (LTAR): gal/day/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).



FEE: 110 CK# 1066 PT

DATE: 10/6/95

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

0440

[ ] CRT

TYPE APPLICATION: [X] NEW SYSTEM [ ] EXPANSION 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 #: 3761B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 231-041-16

STREET ADDRESS: 10516 Knox Avenue

SUBDIVISION OR MOBILE HOME PARK NAME: BELLE-MEADE

LOT NUMBER: 12

TOWNSHIP (CHECK ONE):

[X] 0 MECKLENBURG
[ ] 1 CHARLOTTE
[ ] 2 DAVIDSON
[ ] 3 CORNELIUS
[ ] 4 PINEVILLE
[ ] 5 MATTHEWS
[ ] 6 HUNTERSVILLE
[ ] 7 MINT HILL

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: 2500

NUMBER OF BEDROOMS: 4 NUMBER OF OCCUPANTS:

FOUNDATION FOR RESIDENCE:

[ ] WITHOUT BASEMENT
[ ] ON SLAB
[X] CRAWL SPACE
[ ] WITH BASEMENT /PLUMBING
[ ] WITH BASEMENT /NO PLUMBING

IF EXPANSION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED ADDITION:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: [ ] YES [X] NO TYPE: _____

WATER SUPPLY (CHECK ONE):

[ ] COMMUNITY (C)
[ ] MUNICIPAL (M)
[X] 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 [X] NO
EXISTING WASTE WATER SYSTEMS [ ] YES [X] NO
EASEMENTS OR RIGHT-OF-WAYS [ ] YES [X] NO
WELL SPRINGS OR WATERLINES [ ] YES [X] NO
DESIGNATED WETLANDS [ ] YES [X] NO

PROPERTY OWNER:

NAME: Young (LAST) Dorothy (FIRST) (MI)

ADDRESS: 2370 Saluda Rd.

CITY: Chester STATE: S.C ZIP: 29706

DAYTIME PHONE: (803) 581-1105

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: Turner (LAST) Bob (FIRST) (MI)

DAYTIME PHONE: (704) 377-2500.

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 4-11-53

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: B. Turner, Owner's agent DATE: 10-6-95

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