

1608 SANSBERRY RD

04702211

6/27/08

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

Connected to CMUD 4/13/94 WWW Repair DWO

File 122891

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

PERSON FILING APPLICATION:
X NAME: HARE CHARLES L.
(first) (mi)
ADDR: MR. CHARLES L. HARE
1608 SANSBERRY RD.
CITY. CHARLOTTE, NC 28262
PHONE: (704-597-9261
STATE: ZIPCODE:

Date:

PROPERTY OWNER:
X NAME: HARE CHARLES L.
(first) (mi)
ADI MR. CHARLES L. HARE
1608 SANSBERRY RD.
CI CHARLOTTE, NC 28262
PHONE: 704-597-9261
STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 047-022-11
STREET ADDRESS: 1608 Sansberry Rd.
ZONING:

Township (check one):
[] 0 Mecklenburg County [] 2 Davidson [] 4 Pineville [] 6 Huntersville
[X] 1 Charlotte [] 3 Cornelius [] 5 Matthews [] 7 Mint Hill

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: LOT SIZE (in acres):

TYPE APPLICATION (check one):

[] SOIL TEST - INDIVIDUAL LOT (D)
[] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (M)
[] SOIL TEST DEVELOPMENT (P)
[] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
[] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[X] REPAIR TO SYSTEM (R)

X RESIDENTIAL PROPERTY (Type Building, check one):
[] SINGLE MOBILE HOME (S) [X] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [] MODULAR HOME (M) [] OTHER _____ (O)

NUMBER BEDROOMS: 2 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 [X] 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: X C. L. Hare Date: X 3-29-94

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.

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

... 4-5-94 No sign of apparent malfunction in yard. Advised him if he wanted to connect to CMUD sewer line to just pay tap on fee (He requested violation notice from this Dept to shorten time for extension to be done but could not issue since no apparent malfunction seen) S Bateman 4-5-94

Phila A. Walker for Daniel 6/30/94
Environmentalist Date

Director or Authorized Section Head Date

WWATER : 122791

SEE INSTRUCTIONS ON BACK

Date Received 4/29/77

ICAR(S) Application No. 12287

T. C. No. 047-0633

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

Application for an
Installation, Construction, Alteration, and/or Repair Permit
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

The owner of that property described hereinafter hereby applies to the Mecklenburg County Department of Environmental Health for a permit to:

1) _____ Install or Construct 2) X Alter or Repair an individual septic tank wastewater treatment system with a subsurface, soil absorption, effluent discharge.

3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home _____Yes _____No
Residence ✓ Yes _____No

4) No. of Bedrooms 3
5) Business Use - Max No Employees _____
6) Washing Machine ✓ Yes _____No
7) Garbage Disposal _____Yes ✓ No
8) Dishwasher _____Yes ✓ No
9) Water Supply:
   A) Individual Well ✓
   B) Governmental System _____
   C) Community System:
      1. Well source _____
      2. Governmental source _____
10) Sewage System:
   House located within 200 feet of public sewer _____Yes ✓ No
   House located within 200 feet of community sewer _____Yes ✓ No
11) FHA Case No. _____
12) VA Case No. _____

13) NAME OF OWNER Hodges (LAST) Bonnie (FIRST) G. (MIDDLE)

14) ADDRESS OF OWNER 1608 Gooseberry Rd. Charlotte, N.C. 28216

15) PHONE NO. Home 596-9431 Office 597-1734

16) LOCATION OF SYSTEM _____ (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? _____ YES _____ NO DATE RUN _____

20) PTR NUMBER (See Instructions) _____

The undersigned person hereby agrees that he has read the foregoing application and that the contents of same are true. It is understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

21 Apr 77
DATE OF APPLICATION

Bonnie G. Hodges
OWNER

EHD-5-76

Environmental Health Department's Copy

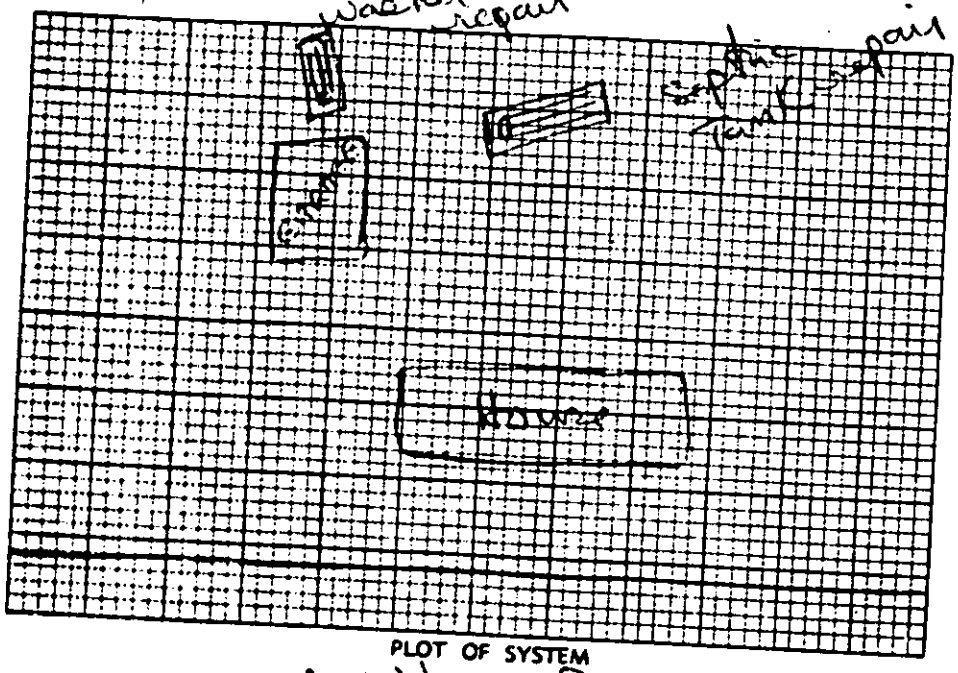
Date Issued 21 Apr 77 Serial No. 0684 ICAR (S) Permit No. 12289

T. C. No. C47-0[illegible]

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Permission is hereby given to ✓ Install or Construct, ____ Alter or Repair the individual septic tank waste-water 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 application dated 21 Apr 77 and this permit shall be void and of no effect if the information provided in the application is not true or is erroneous. All work shall be completed on or before 21 May 77, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate _____

Liquid Capacity of Tank _____

Tank Construction 1250 gal

Absorption and/or Nitrification Lines:

Total Line Length 100' & 100'

Number of Lines 4 & 4

Distance from House 10'+

Distance from Property Line 10'+

Distance from Well 100'

NAME OF OWNER Modlin, Bonner

LOCATION OF PROPERTY 1608 Sansberry Road

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Health Commission which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Environmental Health Director before any system can be covered up or otherwise rendered uninspectable or can be used. **The issuance of thie permit does not in any way guarantee that the system anticipated to be constructed will operate properly, or relieve any person resulting from the failure of the system to operate properly.**

Comments: ~~now or hereafter owning, controlling or using such system from any liability~~

Division or Section Head

A. M. Reynolds
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 Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

EHD-5-76

Environmental Health Department's Copy

Date Issued 22 Apr 77 Serial No. 0661 C of A (s) No. 12289

T. C. No. 047-033-

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner Modlin, Bonner G. (LAST, FIRST, MIDDLE)

Location of Property 11608 Sansberry Road

Application Number _____ Permit Number _____

Inspection Date:

Liquid Capacity of Tank / Tank Material /

Total Length of Drain Tile 200 Ft Number of Lines 4

Depth of Filter Material 17" Cover Depth 24"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 22 Apr 77 (DATE) Tank Inspected / (DATE)

Nitrification Field Inspected 22 Apr 77 (DATE)

Washing Machine Line Inspected, If Applicable 22 Apr 77 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been _____ installed or constructed, _____ altered or repaired in accordance with the permit issued and the regulations of the Mecklenburg County Health Commission in effect on the date of issuance of the permit. The issuance of this Certificate of Approval 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 Certificate of Approval is issued subject to those restrictions and conditions shown on the permit(s) in addition to those listed below under comments. This Certificate of Approval 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: 100 Ft - washer addition
100 Ft - septic tank addition

A. M. Aycock
Environmentalist

EHD-5-76

Environmental Health Department's Copy

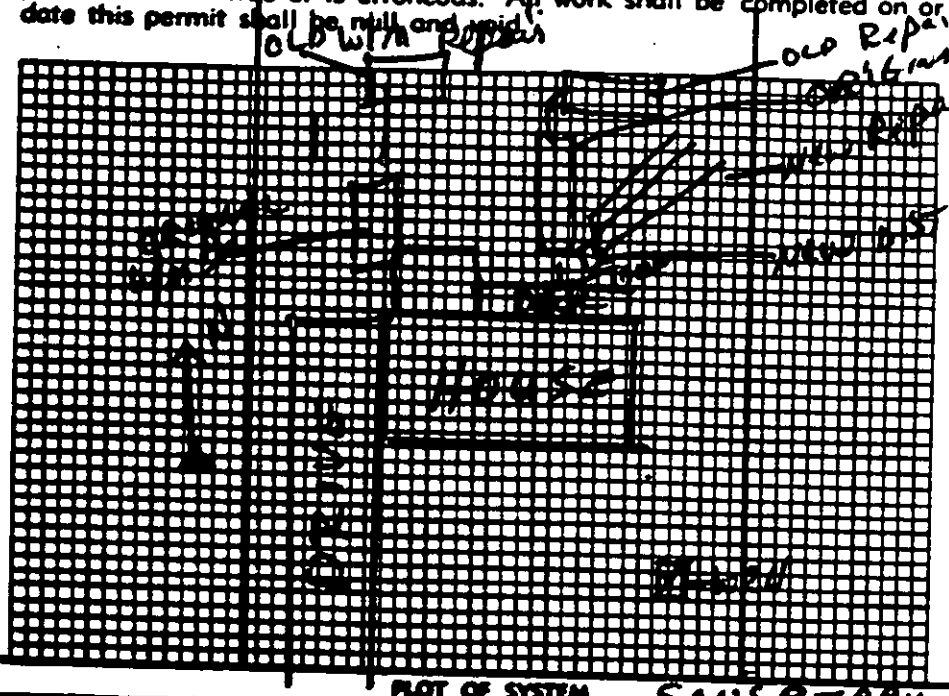
Date Issued JULY 16TH 1984 Serial No. 07407 ICAR (S) Permit No. 12289

T. C. No. 047-02211

Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Permission is hereby given to ____Install or Construct, X 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 application 12289 dated 7-13-84 and this permit shall be void and of no effect if the information provided in the application is not true or is erroneous. All work shall be completed on or before AUG 16 1984, after which date this permit shall be null and void.



PLOT OF SYSTEM SANSBERRY ROAD

Permeability Rate Repair

Liquid Capacity of Tank Repair

Tank Construction Repair

Absorption and/or Nitrification Lines:

Total Line Length 200 LIN. FT.

Number of Lines THREE

Distance from House 10 FT.

Distance from Property Line 10 FT

Distance from Well 95 FT.

NAME OF OWNER HARE, CHARLES

LOCATION OF PROPERTY 1608 SANSBERRY ROAD

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Health Commission which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Environmental Health Director before any system can be covered up or otherwise rendered uninspectable or can be used. 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.

Comments: THREE TRENCHES TO BE 67FTX3FTX 12 INCHES STONE - hay OR STRAW COVER - grade boards - NEW DIST BOX

Division or Section Head

Ralph Hilliard
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 Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

EHD-S-76

C of A (s) No. 12289

Date Issued 7-26-84 Serial 6828

T. C. No 047-022-L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner HARE (LAST), CHARLES (FIRST) (MIDDLE)

Location of Property 1608 Salisbury Road

Application Number 12289 Permit Number 12289

Inspection Date:

Liquid Capacity of Tank Repair Tank Material Repair

Total Length of Drain Tile 200 lin FT Number of Lines Two

Depth of Filter Material 48" & 12 inches Cover Depth 2 FT

Water Supply Source City main Distance from Water Source City source

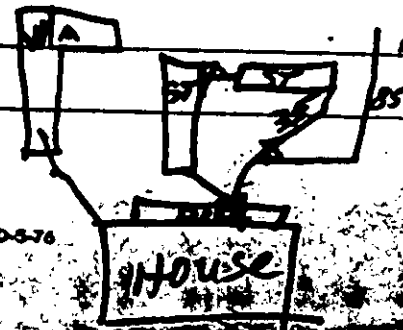
Excavation Inspected 7-26-84 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 7-26-84 (DATE)

Washing Machine Line Inspected, If Applicable — (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been ____ installed or constructed, X altered or repaired in accordance with the permit issued and the regulations of the Mecklenburg County Health Commission in effect on the date of issuance of the permit. The issuance of this Certificate of Approval 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 Certificate of Approval is issued subject to those restrictions and conditions shown on the permit(s) in addition to those listed below under comments. This Certificate of Approval 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: REPAIR NOT PUT IN AS PERMITTED DUE TO LINES INTERSECTED WITH OLD BED - one Trench 85 FT x 3FT x 15 inches stone & one Trench 35 FT x 3FT x 48 inches stone.



new Trenches

Environmentalist

END-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

WBR