

16215 LEEWARD LN

00182102

12/20/2007

duponbj

Groundwater and Wastewater Services File Imaging Project
May 2007
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CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 1311 B DATE: 3-18-97
TC: 001-024-19,24 ☐ LX ☐ CRT
SERIAL Nº 17043

Name of Owner Chris B. Carr Juris.:
Address of Property 16215 Leeward Lane

Inspection Data:

Tank Material PCC
Total Length of Drainfield 400'
Number of Lines 5 @ 80'
Cover Depth 12-16"
Water Supply Source priv. well
Distance to Water Source Not yet installed >50'
Excavation Inspected 3-18
Tank(s) Inspected 3-18
Wash Line Inspected N/A
High Water Alarm Inspected N/A

PLOT

Design 1994, 1500 ST, (DN), 1200SF, T, 12G, cecil-like CTR# Atkinson 84

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 II a 3 bedroom house
(5) 3'w x 80'L x 12" stone

Larry B. Thompson J. E.S.
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

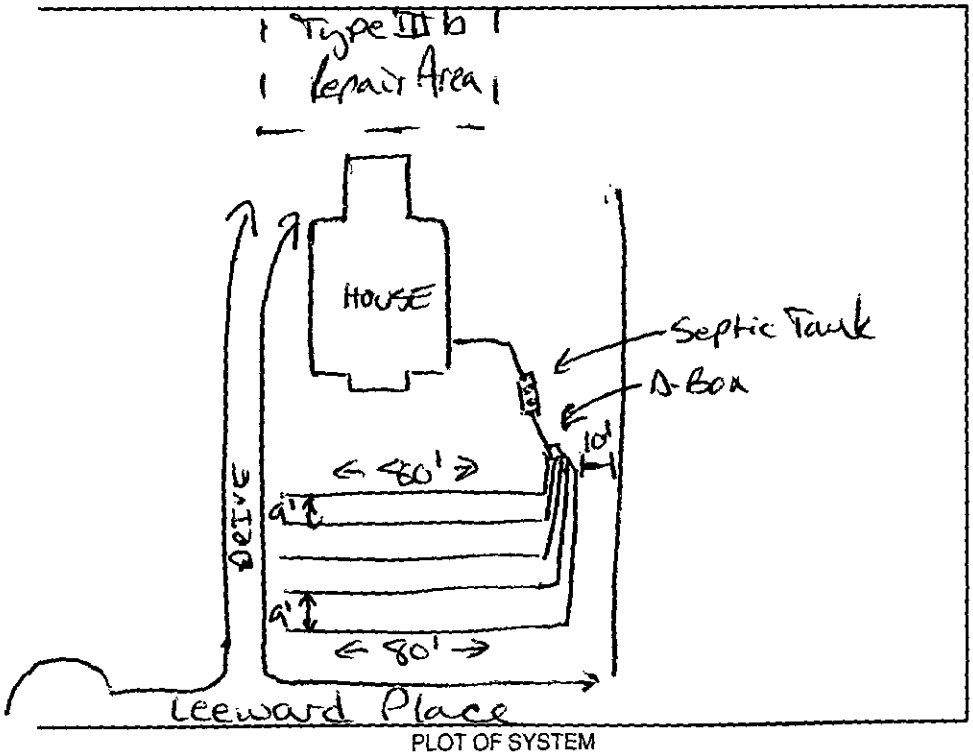
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 1311 B DATE: 3-6-97

TC: 001-024-19.24 B L

SERIAL Nº 17123

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 3-23-96. All work shall be completed on or before 4-6-97, 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 N/A gallons
Tank Construction PCC
Trench Depth ≤ 36"
Absorption and/or Nitrification Lines:
Trench Width 3 feet
Trench Walls Scored and Porous Yes
Total Line Length 400 feet
Number of Lines 5
Depth of Stone 12 inches
Distance from House 5 feet
Distance from Property Line 10 feet
Distance from Well 750 feet

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

NAME OF OWNER Chris B. Carr

LOCATION OF PROPERTY 16215 Leeward Lane

Comments: Type II a 3 bedroom residence
(5) 3'w x 80'L x 12" stone

Larry B. Thompson Jr., R.S.
Environmental Health Specialist

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

B#3783 CRS 440

FEE: 100.00 AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION
DATE: 7-18-96 VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

DATE: 7/18/96 PERMIT NO: 1311B

PARCEL NO: 001-024-19
001-024-24

JOB LOCATION ADDRESS: 16215 Leeward Lane
PROPERTY OWNER: Chris Carr
BUILDING CONTRACTOR: Chris Holcombe
SUBDIVISION NAME: Lookout Point
AUTHORIZATION ISSUED BY: Lisa B. Mialik, RS DATE: 7/18/96
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 1311B, 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 & associated plot plan

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.

Christopher M Holcombe 7/18/96

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

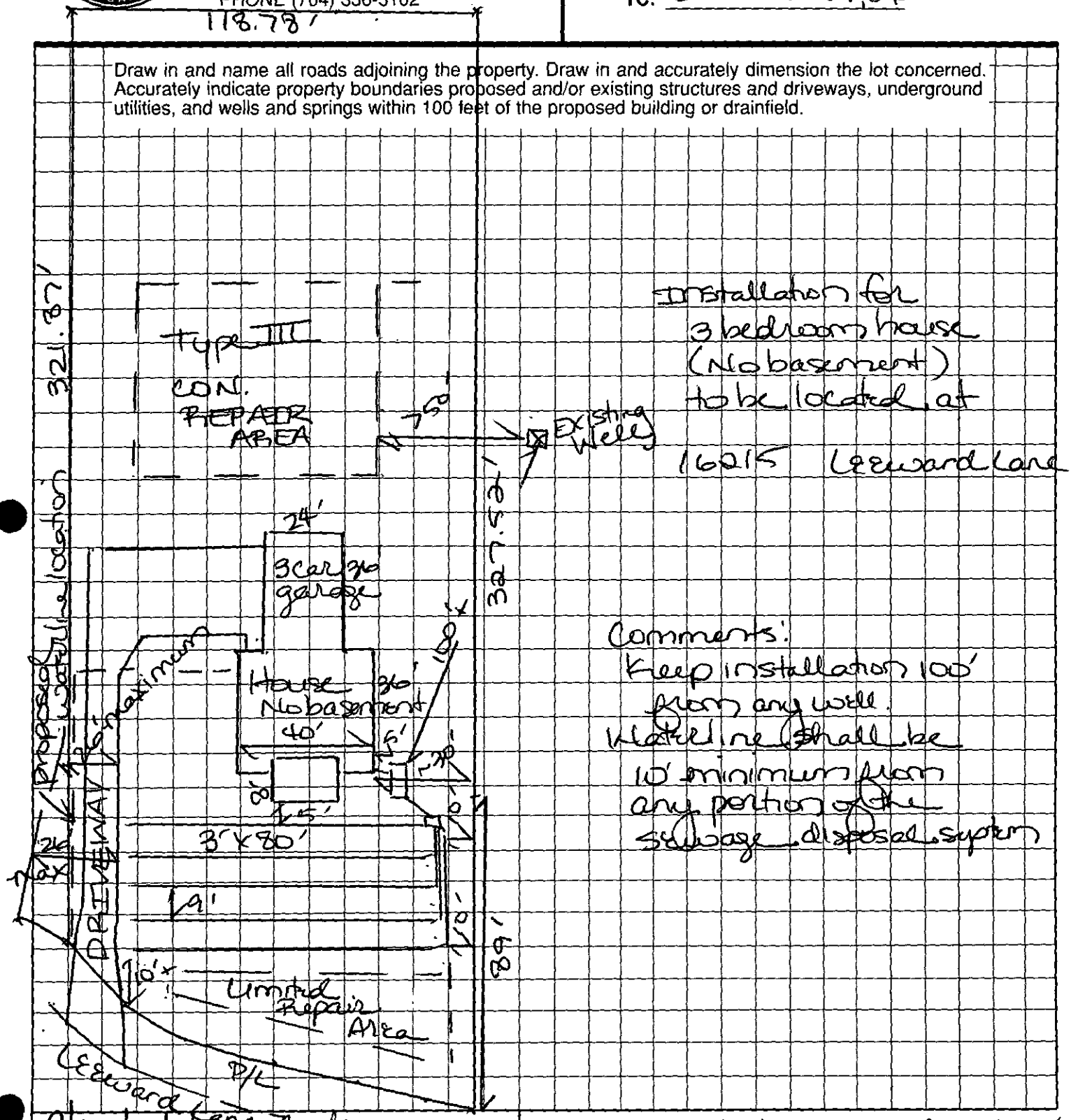
PROPOSED PLOT PLAN

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

FILE: 13111B

TC: 001-024-19,24 PO

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.



Installation for 3 bedroom house (No basement) to be located at 16215 Leeward Lane.

Comments:
Keep installation 100' from any well.
Waterline shall be 10' minimum from any portion of the sewage disposal system

Christopher Mitchell
OWNER/AGENT SIGNATURE

DATE July 18 '96

APPROVAL DATE 7/18/96 Joan B. Miller

pg 1 of 2

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

Permit Number: 1311B

Tax Number: PO 001-024-19
001-024-24

- 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	360 Max gallons/day wastewater flow	1200 Absorption Area (sq ft)	9' Trench spacing (min. on centers)	
No Serviced by private well	community well 1500 Gallon septic tank	400 Total trench length (ft)	36" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions) Install @ 24"	
3 Bedrooms in residence	NA Gallon pump tank	12" Depth of stone		

Any surface waters present: NO Type: Minimum separation distance:

Site modifications required:

Additional Conditions: Keep installation 100' from any well. Waterline shall be a minimum of 10' from any portion of the sewage disposal system.

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	
1200 Absorption Area (Sq ft) 400 Total Trench Length (Ft)	12" Depth of Stone Trench	9' Trench spacing (min. on centers)	36" Maximum Trench Depth	

For existing system, enter the year originally installed: NA

COMMENT: Keep repair installation maximum feasible distance from any well however, no less than 50'.

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.

In the event the repair area to the rear of the property is utilized & a supply line from the pump tank cannot be installed at least 50' from well it must be constructed of ductile iron or equivalent and be 25' from well.

Lisa B. Mialik, RS 7/18/96
DEHNR Authorized Agent Date

Christopher Schedule 7/18/96
Owner/Agent Signature Date

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

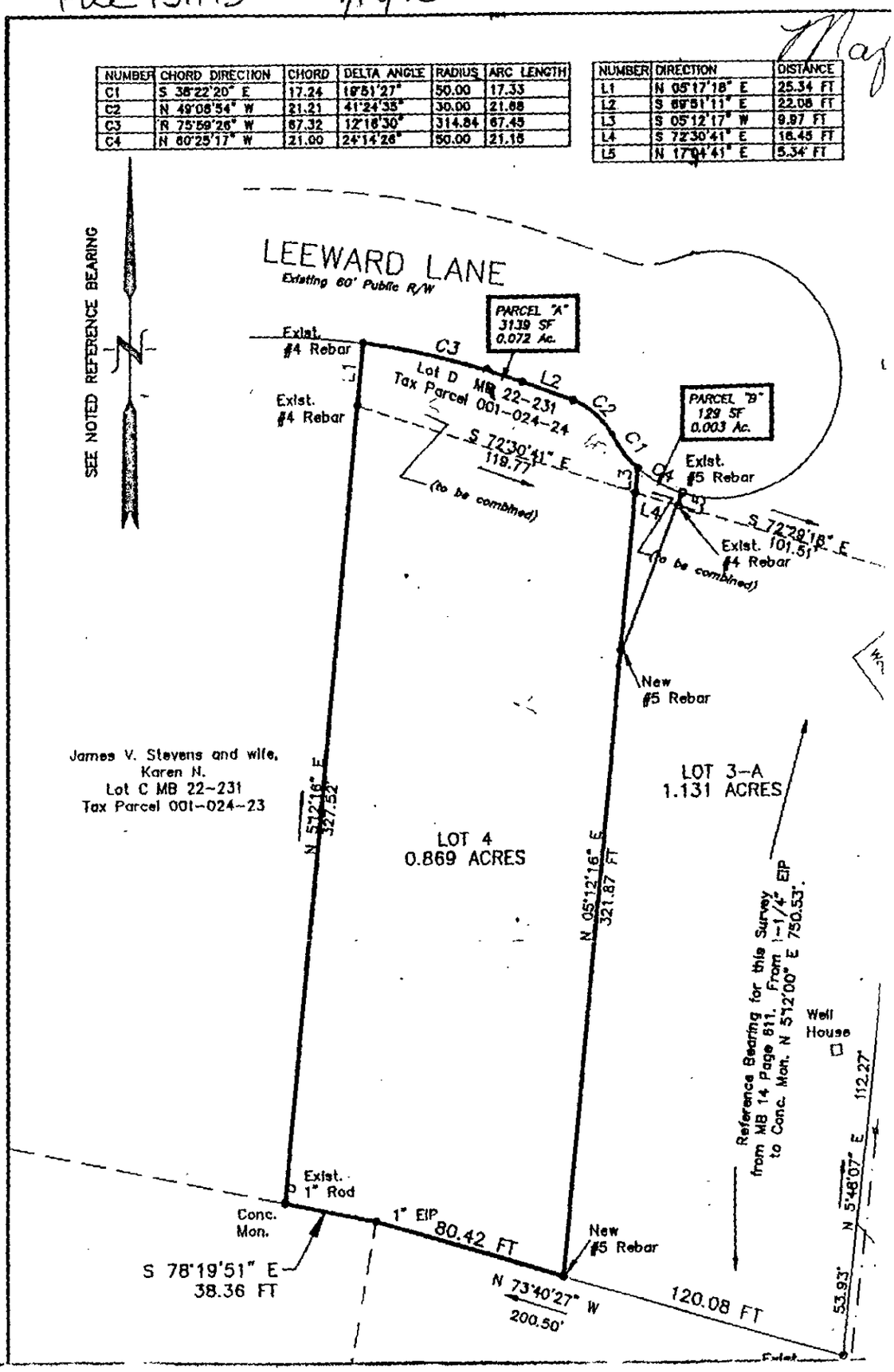
NORTH CAROLINA DEPARTMENT OF
ENVIRONMENTAL, HEALTH,
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

IWWS-100195

File 1311B 7/18/96

NUMBER	CHORD DIRECTION	CHORD	DELTA ANGLE	RADIUS	ARC LENGTH
C1	S 38°22'20" E	17.24	19°51'27"	50.00	17.33
C2	N 49°08'54" W	21.21	41°24'35"	30.00	21.68
C3	R 75°59'26" W	67.32	12°18'30"	314.84	67.45
C4	N 60°25'17" W	21.00	24°14'26"	50.00	21.18

NUMBER	DIRECTION	DISTANCE
L1	N 05°17'18" E	25.34 FT
L2	S 69°51'11" E	22.08 FT
L3	S 05°12'17" W	9.97 FT
L4	S 72°30'41" E	18.45 FT
L5	N 17°04'41" E	5.34 FT



Mecklenburg County
Health Department

May 1, 1996

Chris B. Carr
9916 Vixen Lane
Huntersville, NC 28078

Re: Leeward Lane
File: 1311B
Parcel: P.O. 001-024-19, 24

Receipt of your application for an Improvement Permit at the above referenced property is hereby acknowledged. Upon receipt of the application, a site investigation was conducted and the material was reviewed in conjunction with the provisions of 15A NCAC 18A., .1900 "Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal Systems". Also, several visits were made to the site with you in attendance. In order to complete your request, the following must be completed:

- A detailed scaled drawing of the proposed structure must be provided to this office and the proposed structure must be staked on the site as indicated in the drawing.

- A survey of the property must be provided.

Please contact me for an appointment after the above requests are completed and you are ready to pursue the issuance of the Improvement Permit. You can reach me at 336-5573.

Sincerely,

Lisa B. Mialik, RS

Lisa B. Mialik, R.S.
Individual Water and Wastewater Systems

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

LQ460

Sheet ___ of ___
PROPERTY ID #: ___
COUNTY: ___

#1
-13118
001-024-24
PO 001-024-19

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Chain Carr — APPLICANT: ___
ADDRESS: 9916 Vilas Ferry, Hendersville — APPLICATION DATE: ___ — DATE EVALUATED: ___
PROPOSED FACILITY: residence — PROPOSED DESIGN FLOW (.1949): ___ — PROPERTY SIZE: Approx 1.0
LOCATION OF SITE: Deerwood Farm — 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	PROFILE CLASS & LTAR
1	LS 5%+	0-6"	gr/cl	Fr/sEXP/ss/sP	7.5YR 4/6 to Chroma 2 Mottles	48"	N/A	None	II PS .3 F2
		6-25"	sBK/c	Fr-Fi/sEXP/ss/P					
		25-48"	sBK/cl	Fr/sEXP/ss/sP					
2	LS 5%+	0-6"	gr/cl	Fr/sEXP/ss/sP	7.5YR 4/6 to Chroma 2 Mottles	48"	N/A	None	II PS .3 F2
		6-48"	sBK/c	Fr-Fi/sEXP/s/P					
3	LS 5%+	0-4"	gr/cl	Fr/sEXP/ss/sP	7.5YR 4/6 to Chroma 2 Mottles	48"	N/A	None	II PS .3 F2
		4-48"	sBK/c	Fr-Fi/sEXP/s/P					
4	LS 5%+	0-15"	gr/cl	Fr/sEXP/ss/sP	7.5YR 4/6 to Chroma 2 Mottles	48"	N/A	None	II PS .3 F2
		15-48"	sBK/c	Fr-Fi/sEXP/s/P					
5	LS 5%+	0-6"	gr/cl	Fr/sEXP/ss/sP	7.5YR 4/6 to Chroma 2 Mottles	48"	N/A	None	II PS .3 F2
		6-48"	sBK/c	Fr-Fi/sEXP/s/P					

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

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): Provisionally suited
EVALUATED BY: William A. Marsh IV
OTHER(S) PRESENT: ___

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

Sheet ___ of ___
PROPERTY ID #: ___
COUNTY: ___

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

#1 1311B
001-024-24
PO 001-024-19

OWNER: Chris B. Carr
ADDRESS: 9916 Vipers Fork, Hendersonville
PROPOSED FACILITY: residence
LOCATION OF SITE: Leonard Farm
APPLICANT: ___
APPLICATION DATE: ___
PROPOSED DESIGN FLOW (.1949): 360gpd
DATE EVALUATED: 4-12-96
PROPERTY SIZE: 1.0
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 % (Slopes 5%)	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	PROFILE CLASS & LTAR
1	LS	0-6"	gr/cl	Fr/SEAP/SS/SP	> 48" TO Chroma 2 Mottles	48"	N/A	None	PS .39/F2 LTAR
		6-25"	SBK/c	Fr-Fi/SEXP/SP					
		25-48"	SBK/cl	Fr/SEXP/SS/SP					
2	LS	0-6"	gr/cl	Fr/SEAP/SS/SP	> 48" TO Chroma 2 Mottles	48"	N/A	None	PS .39/F2 LTAR
		6-48"	SBK/c	Fr-Fi/SEXP/SP					
3	LS	0-4"	gr/cl	Fr/SEAP/SS/SP	> 48" TO Chroma 2 Mottles	48"	N/A	None	PS .39/F2 LTAR
		4-48"	SBK/c	Fr-Fi/SEXP/SP					
4	LS	0-15"	gr/cl	Fr/SEAP/SS/SP	> 48" TO Chroma 2 Mottles	48"	N/A	None	PS .39/F2 LTAR
		15-48"	SBK/c	Fr-Fi/SEXP/SP					
5	LS	0-6"	gr/cl	Fr/SEXP/SS/SP	> 48" TO Chroma 2 Mottles	48"	N/A	None	PS .39/F2 LTAR
		6-48"	SBK/c	Fr-Fi/SEXP/SP					

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

OTHER FACTORS (.1940): ___
SITE CLASSIFICATION (.1948): Provisionally Suitable
EVALUATED BY: William R. Mailen 4-17-96
OTHER(S) PRESENT: ___

OF LOTS: 1002 Bayou

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

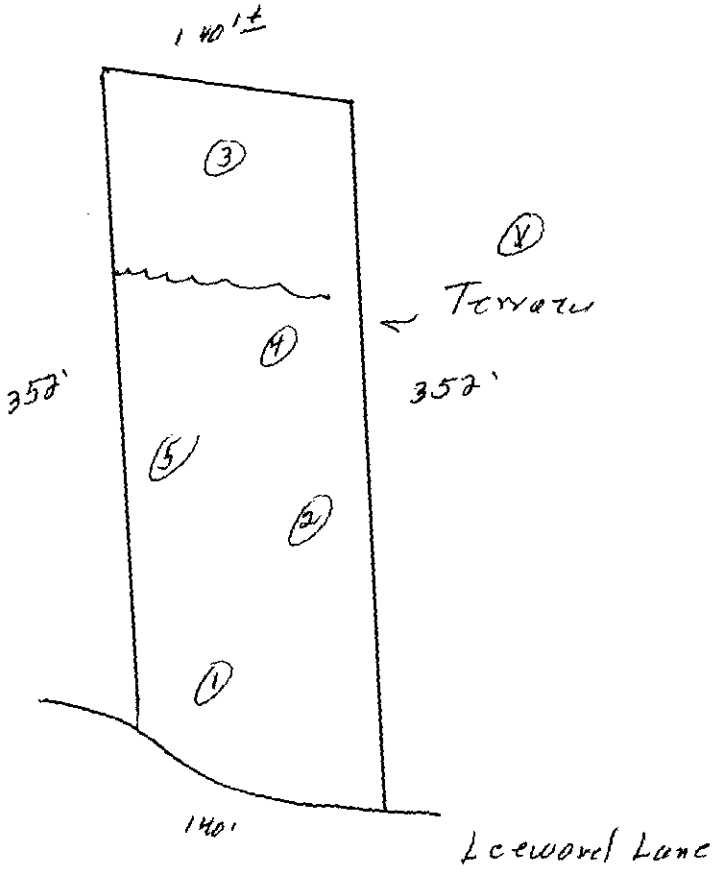
ORIZON DEPTH	In inches below natural soil surface
EPTH OF FILL	In inches from land surface
ESTRICTIVE HORIZON	Thickness and depth from land surface
APROLITE	S(suitable) or U(unsuitable)
OIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - 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).

1311B



FEE: 150.00 + 2

DATE: 3/28/96 ck # 1236

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

[ ] CRT

TYPE APPLICATION: [X] 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 #: 1311 B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 001-024-19P, 001-024-24

STREET ADDRESS: Terry Ln, Leeward Ln

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: SEE ATTACHED SURVEY

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: 2200

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 4

FOUNDATION FOR RESIDENCE:

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

TOWNSHIP (CHECK ONE):

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

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

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

WATER SUPPLY (CHECK ONE):

[ ] COMMUNITY (C) [X] 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 [X] NO
EXISTING WASTEWATER SYSTEMS [ ] YES [X] NO
EASTMENTS OR RIGHT-OF-WAYS [ ] YES [X] NO
WELL, SPRINGS OR WATERLINES [ ] YES [X] NO
DESIGNATED WETLANDS [ ] YES [X] NO

PROPERTY OWNER:

NAME: CARR, CHAS B.
(LAST) (FIRST) (MI)

ADDRESS: 9916 VIXEN LANE

CITY: HUNTERSVILLE STATE: NC ZIP: 28078

DAYTIME PHONE: (704) 892-7575

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME:
(LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) —

SYSTEM TO BE LAID OUT & INSTALLED BY
*C. WAYNE ORBISON / O.H. HOLCOMBE, BLDR.
663-4745 875-0173

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: 3-23-96

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

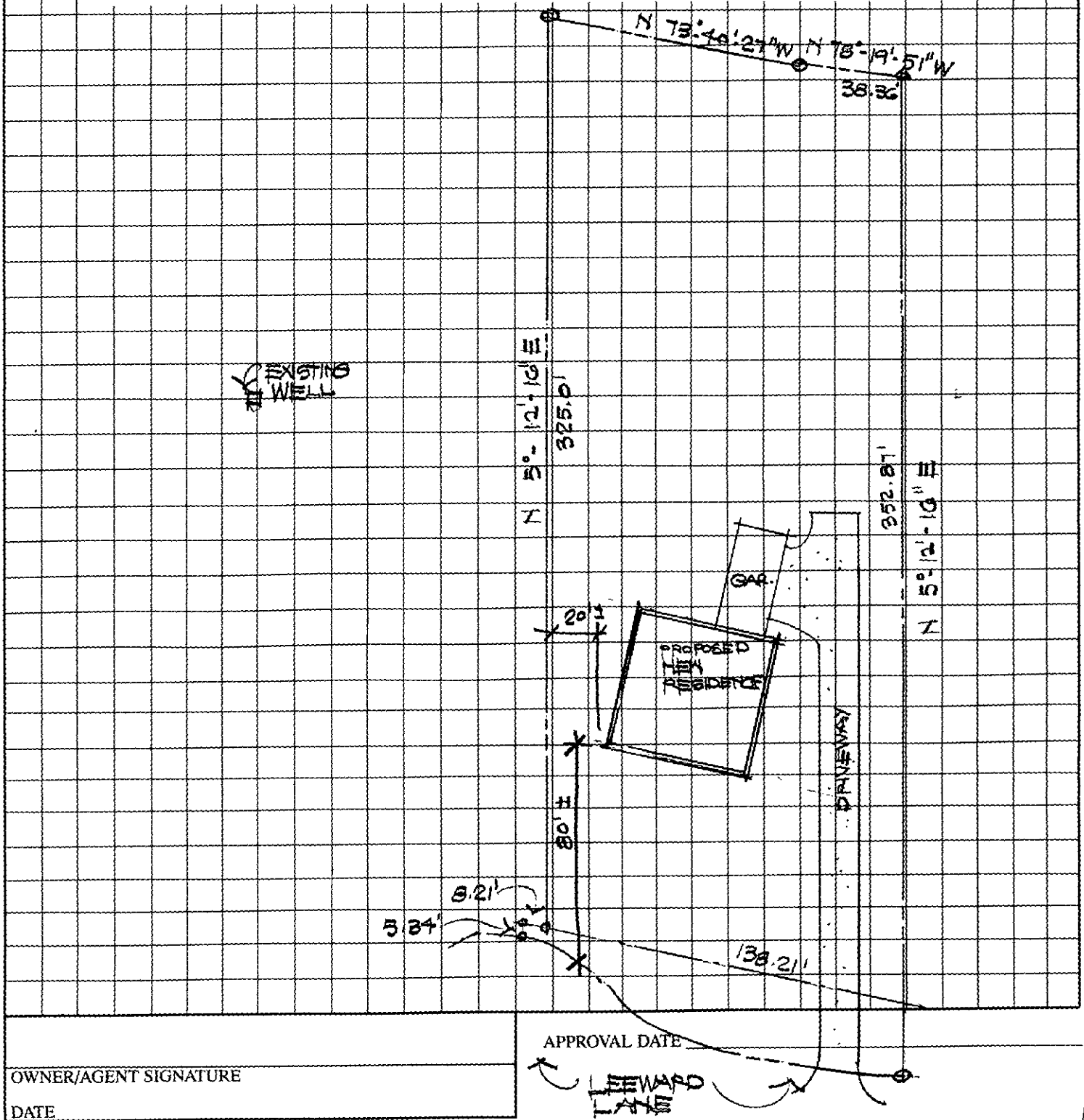
PROPOSED PLOT PLAN

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

FILE: 131B

TC: 001-024-19 P0 001-024-24

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

APPROVAL DATE

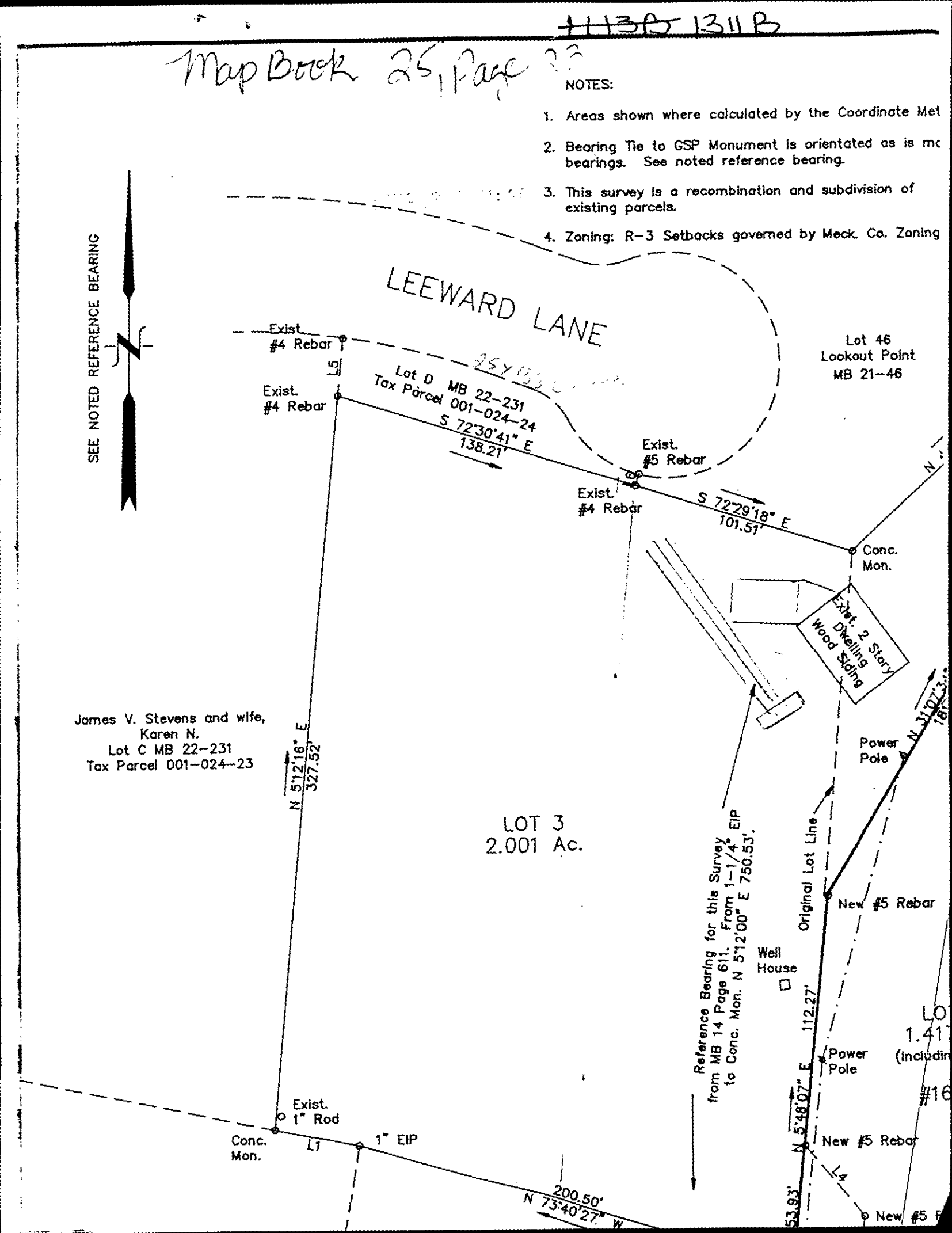
White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

#113B 131B

Map Book 25, Page 22

NOTES:

1. Areas shown where calculated by the Coordinate Met
2. Bearing Tie to GSP Monument is orientated as is mc bearings. See noted reference bearing.
3. This survey is a recombination and subdivision of existing parcels.
4. Zoning: R-3 Setbacks governed by Meck. Co. Zoning



OFFER TO PURCHASE AND CONTRACT

Christopher B. And Kari Lynn Card, as Buyer, hereby offers to purchase and Larry Griffin, as Seller, upon acceptance of said offer, agrees to sell and convey all of that parcel or parcels of land described below, together with all improvements located thereon and such personal property as is listed below (the real and personal property are collectively referred to as "the Property"), in accordance with the Standard Provisions on the REVERSE SIDE HEREOF and upon the following terms and conditions:

1. **REAL PROPERTY:** Located in the City of _____, County of Mecklenburg Co., State of North Carolina, being known as and more particularly described as: Street Address Lee Wall Lane Huntersville, NC Zip 28078. Legal Description Lot D MB 22-231 TAX Parcel 001-024-24

2. **PERSONAL PROPERTY:** N/A

3. **PURCHASE PRICE:** The purchase price is $ 20,000 and shall be paid as follows:

(a) $ 1,000 in earnest money paid by personal Check (cash; bank, certified, or personal check) with the delivery of this contract, to be held in escrow by Larry Griffin as agent, and the date it clears or which time it will be credited as Buyer or upon this contract or otherwise applied and is to be disbursed in accordance with the Standard Provisions on the REVERSE SIDE HEREOF;

(b) $ N/A by assumption of the unpaid principal balance of [illegible] on the Property;

(c) $ N/A by a promissory note secured by a purchase money deed of trust on the Property, bearing interest at the rate of _____% per annum on the unpaid principal balance, payable [illegible]. Prepayment penalties are not permitted. Buyer may assume the loan subject to lender approval. If lender approval is not obtained, this contract shall be void and all earnest money shall be refunded to Buyer. Buyer shall not be obligated to assume any loan in excess of the amount specified. Buyer shall not be obligated to pay any assumption fee in excess of 1% of the loan balance. See Standard Provision 2(c). If loan assumption requires the lender's approval, approval must be granted on or before N/A. Buyer agrees to use his best efforts to secure such approval and to advise Seller immediately upon his receipt of the lender's decision. If Seller is to pay any loan assumption costs, those costs are as follows: N/A

(d) $ 19,000 the balance of the purchase price in cash at the closing.

Post-it® Fax Note 7671 | Date 3-25-96 | # of pages ▶ 2
To N.C. St. Health Dept. | From Chris Card
Co./Dept. | Co.
Phone # | Phone # 392-7575
Fax # 336-6914 | Fax # 895-1545

4. **CONDITIONS:** State N/A if none. Each of the following conditions is a condition to this contract.

(a) The Buyer must be able to obtain a firm commitment on or before N/A, effective through the date of closing, for a N/A loan in the principal amount of $ N/A for a term of N/A year(s), at an interest rate not to exceed N/A % per annum, with mortgage loan discount points not to exceed N/A % of the loan amount. Buyer agrees to use his best efforts to secure such commitment and to advise Seller immediately upon receipt of the lender's decision. If Seller is to pay any loan closing costs, those costs are as follows: N/A

(b) The Buyer must be able to assume the unpaid principal balance of the existing loan described in paragraph 3(c) above for the remainder of the loan term at an interest rate not to exceed N/A % per annum, [illegible] and discount points not to exceed N/A % of the loan balance. See Standard Provision 2(c). If loan assumption requires the lender's approval, approval must be granted on or before N/A. Buyer agrees to use his best efforts to secure such approval and to advise Seller immediately upon his receipt of the lender's decision. If Seller is to pay any loan assumption costs, those costs are as follows: N/A

(c) There must be no restrictions, easements, zoning or governmental regulations that would prevent the reasonable use of the property for N/A.

5. **ASSESSMENTS:** Seller represents that there are no special assessments presently due and payable by the owner of the Property for water, sewer or other improvements not yet completed on or adjoining the Property, except as follows: N/A (Insert "None" or the identification of such assessments, if any. The agreement as to proration of any assessments indicated is to be set forth in paragraph 6 below.)

6. **ADDITIONAL PROVISIONS AND CONDITIONS:**

(a) All of the Standard Provisions on the REVERSE SIDE HEREOF are understood and shall apply to this instrument, except the following numbered Standard Provisions shall be deleted: (If none are to be deleted, state "None"

(1) Contingent on SALE OF Current Home (9916 Vixen Ln Huntersville, NC)
(2) Contingent that the Smiths and Mr. Griffin, Each Sale the Adjacent Land to make one Residential Lot described ABOVE.
(3) Contingent on FAVORABLE PERC TEST (TEST TO BE PAID BY MR. CARD)

IF THERE ARE ANY ADDENDA TO THIS CONTRACT INDICATE ABOVE AND ATTACH HERETO.

7. **CLOSING:** All parties agree to execute any and all documents and papers necessary in connection with closing and transfer of title on or before July 10, 1996, at a place designated by Both Parties. The deed is to be made to _____.

8. **POSSESSION:** Possession shall be delivered At Closing. In the event that Buyer has agreed that possession is due before all funds are disbursed to Seller, Buyer will pay Seller the sum of $ _____ per day from and including the date of closing to and including the date that possession is to be delivered as above set forth.

9. **COUNTERPARTS:** This offer shall become a binding contract when signed by both Buyer and Seller. It is to be signed in _____ counterparts with a signed counterpart being retained by each party hereto and the escrow agent, if any.

Date of Offer March 11, 1996 Date of Acceptance _____

Buyer Christopher B. Card SEAL Seller Larry Griffin SEAL

Buyer Kari Lynn Card SEAL Seller _____ SEAL

I hereby acknowledge receipt of the earnest money herein set forth and agree to hold and disburse the same in accordance with the terms hereof.

Date _____ Firm _____

By: _____

Name of Selling Agent: Firm N/A

Name of Listing Agent: Firm N/A

REALTOR®

This Standard Form has been approved jointly by the:

NORTH CAROLINA BAR ASSOCIATION
NORTH CAROLINA ASSOCIATION OF REALTORS®, INC.

Standard Form No. 2
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File 3118

OFFER TO PURCHASE AND CONTRACT

Christopher B. and Kali Lynn Carr as Buyer, hereby offers to purchase and Bruce H. and Julia T. Smith as Seller, upon acceptance of said offer agrees to sell and convey all of that place or parcel of land described below, together with all improvements located thereon and such personal property as is listed below (the real and personal property are collectively referred to as "the Property"), in accordance with the Standard Provisions on the REVERSE SIDE HEREOF and upon the following terms and conditions:

1. **REAL PROPERTY:** Located in the City of / County of, Mecklenburg Co. State of North Carolina, being known as and more particularly described as:
Street Address 1661 Old Cane Rd. Huntersville NC Zip 28078
Legal Description .98 Ac Deed Ref DB 3673-034 DB 4125-535

2. **PERSONAL PROPERTY:**

3. **PURCHASE PRICE:** The purchase price is $ 52,000 and shall be paid as follows:
(a) $ 1,000 in earnest money paid by Personal Check (cash, cashier's certified or personal check) with the delivery of this contract, to be held in escrow by Bruce H. and Julia T. Smith as agent, until the sale is closed, at which time it will be credited to Buyer, or until this contract is otherwise terminated and it is disbursed in accordance with the Standard Provisions on the REVERSE SIDE HEREOF;
(b) $ _____ by assumption of the unpaid principal balance and all obligations of Seller on the existing loan secured by a deed of trust on the Property;
(c) $ _____ by a promissory note secured by a purchase money deed of trust on the Property with interest prior to default at the rate of _____% per annum;

Prepayment restrictions and or penalty

Assumption or transfer rights, if any,

(d) $ 51,000 the balance of the purchase price in cash at the closing.

Post-it® Fax Note 7671 | Date 3-27 | To | From | Co./Dept. TAX PARCEL # 021-021-09 | Phone # | Fax # | Phone # | Fax #

4. **CONDITIONS:** (State N/A in each blank of paragraph 4 that is not applicable.)
(a) The Buyer must be able to obtain a firm commitment on or before _____ for a _____ loan in the principal amount of $ _____ for a term of _____ year's at an interest rate not to exceed _____% per annum, with mortgage loan discount points not to exceed _____% of the loan amount. Buyer agrees to use his best efforts to secure such commitment and to advise Seller immediately upon receipt of the lender's decision. If Seller is to pay any loan closing costs, those costs are as follows: _____
(b) The Buyer must be able to assume the unpaid principal balance of the existing loan described in paragraph 3(b) above for the remainder of the loan term, at an interest rate not to exceed _____% per annum fixed (or describe type of loan) _____, with mortgage loan assumption and or discount points not to exceed _____% of the loan balance. (See Standard Provision No. 2) If such assumption requires the lender's approval, approval must be granted on or before _____. Buyer agrees to use his best efforts to secure such approval and to advise Seller immediately upon receipt of the lender's decision. If Seller is to pay any loan assumption costs, those costs are as follows: _____
(c) There must be no restriction, easement, zoning or other governmental regulation that would prevent the reasonable use of the real property for _____ purposes.

5. **ASSESSMENTS:** Seller warrants that there are no special assessments of any pending or confirmed city or domestic paving, water, sewer or other improvements on or adjoining the Property, except as follows: _____ (Insert "None" or the identification of such assessments, if any. The agreement for payment or proration of any assessments indicated is to be set forth in paragraph 6 below.)

6. **OTHER PROVISIONS AND CONDITIONS:**
(a) All of the Standard Provisions on the REVERSE SIDE HEREOF are understood and shall apply to this instrument, except the following numbered Standard Provisions shall be deleted: (If none are to be deleted, state "None".) _____

(1) Contingent on sale of Carr Home
(2) Contingent that the Smiths and Mr. Griffin EACH sale the Adjacent Land to make one Residental Lot described Above,
(3) Contingent on Favorable Perk test (test to be paid by Mr Carr)
(4) Carr's Agree to Build A House By Jan. 1, 1997 - IF not sell Land Back to Smiths For 52,000,

IF THERE ARE ANY ADDENDA TO THIS CONTRACT, INDICATE ABOVE AND ATTACH HERETO.

7. **CLOSING:** All parties agree to execute any and all documents and papers necessary in connection with closing and transfer of title on or before July 10, 1996 at a place designated by Both Parties. The deed is to be made to _____.

8. **POSSESSION:** Possession shall be delivered At Closing. In the event that Buyer has agreed that possession is not delivered at closing, then Seller agrees to pay to Buyer the sum of $ _____ per day from and including the date of closing to and including the date that possession is to be delivered as above set forth.

9. **COUNTERPARTS:** This offer shall become a binding agreement when signed by both Buyer and Seller. It is to be signed in _____ counterparts with a signed counterpart being retained by each party hereto and the escrow agent, if any.

Date of Offer: March 11, 1996 Date of Acceptance: March 11, 1996
Buyer Christopher B Carr SEAL SELLER Bruce H Smith (SEAL)
Buyer Kali Lynn Carr (SEAL) SELLER Julia T Smith (SEAL)

I hereby acknowledge receipt of the earnest money herein set forth and agree to hold and disburse the same in accordance with the terms hereof.

Date _____ Firm _____
By _____

REALTOR®
Selling Agent/Firm _____ Acting as ☐ Buyer's Agent ☐ Seller's (sub)agent ☐ Dual Agent
Listing Agent/Firm _____ Acting as ☐ Seller's (sub)agent ☐ Dual Agent

This Standard Form has been approved jointly by the: NORTH CAROLINA BAR ASSOCIATION as Form No. 2
NORTH CAROLINA ASSOCIATION OF REALTORS®, INC. as Standard Form No. 3C
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