

4701 MOUNTAIN POINT LN

02316301

5/29/2007

duponbj

Groundwater and Wastewater Services File Imaging Project

May 2007

Barcode Font = IDAutomationHC39M

CERTIFICATE OF COMPLETION/OPERATION PERMIT

4400

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

FILE: 4940A DATE: 3/25/92

TC: 023-101-03 PO ☒ L ☒ CRT

SERIAL № 14057

Name of Owner Gary P. Sanderson Juris.:

Address of Property 4701 Mt Point Ln

Inspection Data:

Tank Material PCC

Total Length of Drainfield 186 + 351

Number of Lines 2 + 3 @ 100 + 117

Cover Depth 8

Water Supply Source com well

Distance to Water Source 10

Excavation Inspected 3/25/92

Tank(s) Inspected 3/25/92

Wash Line Inspected 3/25/92

High Water Alarm Inspected NA

PLOT

Design: 1992, 1500ST, CONV, 1053SFT, 600SFW, 12"stone cecil CTR# Denver Plumbing Co

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☒ installed or constructed ☐ altered or repaired

☒ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The issuance of this

☒ Certificate of Completion ☐ Operation Permit

does not in any way guarantee that the system will operate properly or relieve any person now or hereafter owning, controlling, or using such system from any liability resulting from the failure of the system to operate properly. This document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 10 NCAC 10A .1900 in addition to those listed below under "COMMENTS." This document shall be null and void if any information contained in the application is untrue or if any additions are made to the property which would increase the requirements for said system.

COMMENTS: System designed for 4 bedroom house

Washer line changed to 2 lines x 100'long x 3' x 12" stone

Philo S. Walker R.S.
Environmentalist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

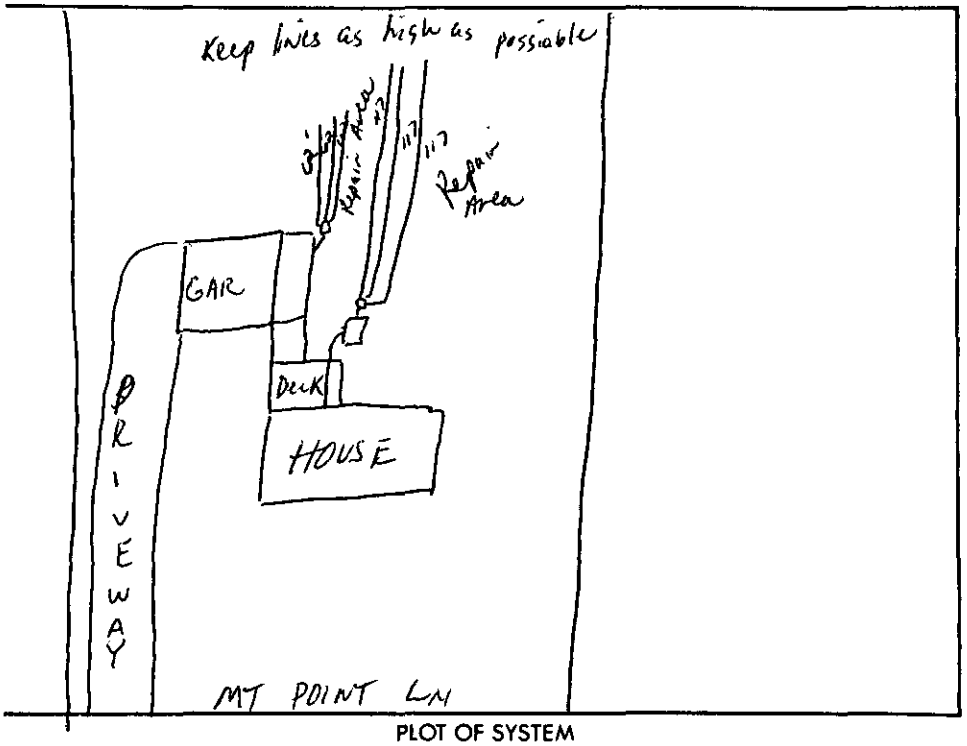
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 4940A DATE: 2/13/92

TC: 023-101-03 PO ☐ L

SERIAL Nº 13732

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 8/13/91. All work shall be completed on or before 3/13/92, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Health Department before any system can be covered up or placed into service. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed will operate properly, or relieve any person now or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank – gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Total Line Length 196+351=537' feet

Number of Lines 3+3

Depth of Stone 12" inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well [redacted] community well feet

NAME OF OWNER Gary P. Sanderson

LOCATION OF PROPERTY 4701 Mt Point Ln

Comments: Washer 3 lines x 62'long x 3'wd x 12"stone Keep lines on contour
septic 3 lines x 117'long x 3'wd x 12"stone of land
Keep lines as high as possible

Division or Section Head

Thilo S. Walker R.S.
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 Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER OR AGENT'S COPY

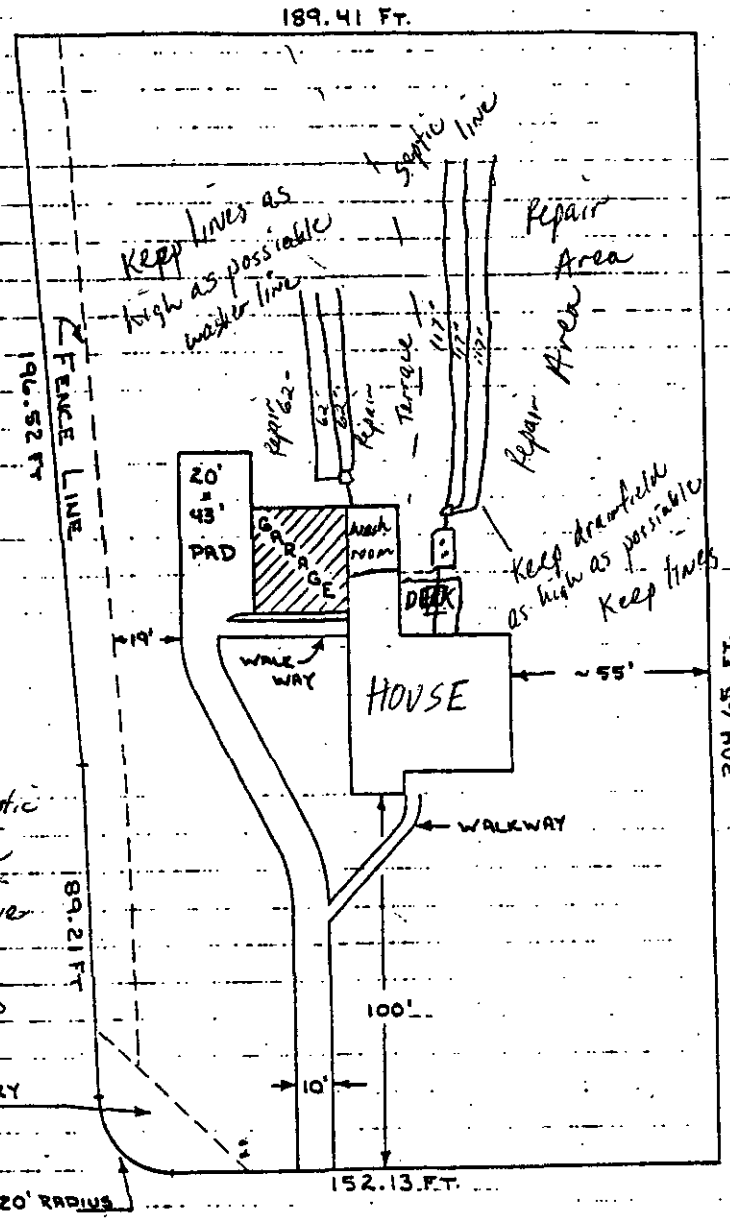
PROPOSED PLOT PLAN

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

FILE: 4940 A

TC: 02310103 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.



1500 SF
Washer line
3 lines x 62' long
186' Total
Septic line
3 lines x 117' long
351' Total Septic
186' Wash line
537' Total lines

Gary P. Sanderson
8/15/91

4701 MOUNTAIN POINT LANE
ALTERNATE SITE PLAN

1/4" = 10'-0"

APPROVAL DATE JSW appr 8/15/91

TW Needs Immediately

APPLICATION FOR AN IMPROVEMENT PERMIT

Pd. 8/13/91
CK. #0706
Amt. 200.00

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr 2nd Floor
700 N. Tryon Street
Charlotte, NC 28202

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

(OFFICE USE ONLY)
FILE: 4940-A
TC: 023-101-03
SERIAL: № 0019718

☐ L ☑ CRT

JOB LOCATION

① ADDRESS: 4701 Mountain Point Ln. (STREET NO. / STREET) ② FILE: 4940A
③ JURISDICTION: Mecklenburg Co. ④ TAX PARCEL NO.: 02310103 PO
⑤ SUBDIVISION: Mountain Point ⑥ LOT: 1 ⑦ BLOCK:

OWNER

⑧ NAME: Gary (FIRST) Phillip (MIDDLE) Sanderson (LAST)
⑨ MAILING ADDRESS: 308 Glencurry Dr.
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28214
⑬ PHONE: (WORK) 704-827-9651 ⑭ (HOME) 704-399-3293

REQUEST

This request is for a(n):

⑮ ☑ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☐ Other (specify) _____

DESIGN CRITERIA

System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 4
㉕ Type? _____
㉓ Maximum occupancy? _____
㉖ Maximum number of employees? _____
㉔ Basement? ☐ yes ☑ no
㉗ Maximum number of seats? _____

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☐ Individual well
B ☐ Municipal system
C ☑ Community well
D ☐ Community system

㉙ The undersigned, 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: Gary P. Sanderson
Date: 8-13-91

IMPROVEMENT PERMIT

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 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 permit is issued by this Department.

... This permit is not transferable, and shall become null and void 60 months from the date of issuance.

Philo S. Walker, 8/15/91
Environmentalist — Date

_____
Director or Authorized Section Head — Date

*This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.

Mecklenburg County
Health Department

Basil G. Delta, M.D., M.P.H.
Health Director

September 30th, 1988

Landcraft Properties, Inc.
2305 Randolph Road
Charlotte, NC 28207

RE: Property located at Abernathy Road 1
FILE: 4940A
PARCEL: 02310103 PO

Dear Sir:

At your request, a field investigation was conducted on the property designated above for the purpose of determining site suitability for the installation of a ground absorption sewage disposal system. The property was found to contain a limited area of soils which were classified as provisionally suitable for such an installation. A copy of the Site Evaluation Report (Serial Number 15595) is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit an Application For An Improvement Permit with an ACCURATELY dimensioned plot plan detailing the location of current and/or proposed buildings, wells and sewage disposal systems to this office. The plan will be reviewed and if it is found that the area of provisionally suitable soils is adequate for the proposed construction, an Improvement Permit will be issued by this Department.

If I may be of assistance, please do not hesitate to contact me.

Very truly yours,

Sylvia D. Daniel, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 15595

File: 4940A

Action 1

Parcel: 02310103 PO

☐ PC

Location: Abernathy Road

Subdivision:

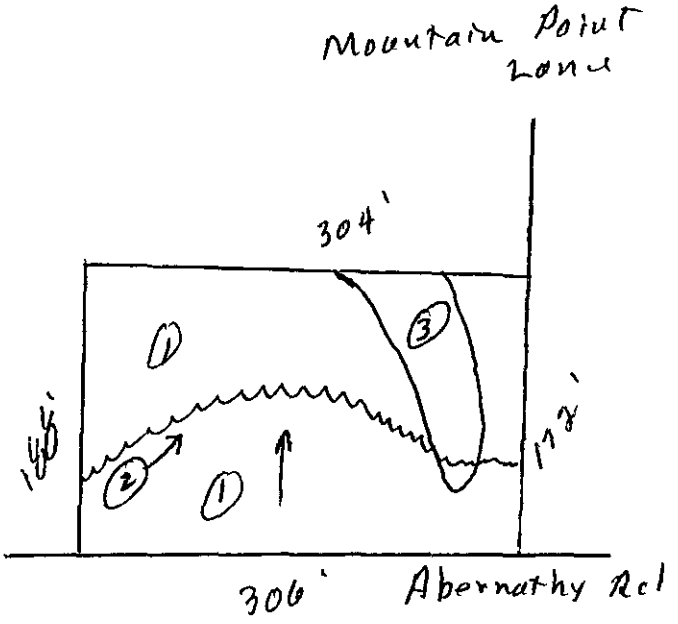
Lot: 1 Block: Acres: ~~.87~~ 1.25

Owner: Landcraft Properties, Inc.
Address: 2305 Randolph Road
Charlotte, NC 28207

Comments: _____

Described by: William R. Marks

Date: 9-29-88



*** EVALUATION KEY ***

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	(S) PS U 6-15%	S PS (U) complex slopes	S PS (U) Depression	S PS U	S PS U	S PS U
Texture	S (PS) U Clay	S PS U —	S PS U —	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U	S PS U —	S PS U	S PS U	S PS U
Drainage	S (PS) U >36" to water	S PS U —	S PS U —	S PS U	S PS U	S PS U
Depth	S (PS) U >36"	S PS U —	S PS U —	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U >36"	S PS U —	S PS U —	S PS U	S PS U	S PS U
Available Space	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	WA Cecil-like	Tomaco	Depression			
Area Classification	S (PS) U	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 8/29/88

Name/Company Franklin Martin Co

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Soil test
4904 - 4975A
#36

MECKLENBURG COUNTY
~~HEALTH DEPARTMENT~~
ENVIRONMENTAL HEALTH DIVISION
PAID
AUG 29 1988

Refund of $15.00
Due

#4970A $45 - in Sum $60 - Ck

Fee: $ 1395
1380

Ck's #'s
354 $315.
353 $1080.

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APPLICATION FOR SOIL INVESTIGATION

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

PAID

FILE: 4940A

AUG 29 1988

TC: _____ See Randy Hill

☐ PC ☐ REPT

JOB LOCATION

⑪ ADDRESS: 11956 Abernathy

② SUBDIVISION: Mountain Point ③ LOT: 1 ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: 23 PAGE NO.: 101 PARCEL NO.: 03

⑥ DEED REFERENCE: BOOK NO.: 1119 PAGE NO.: 440

OWNER

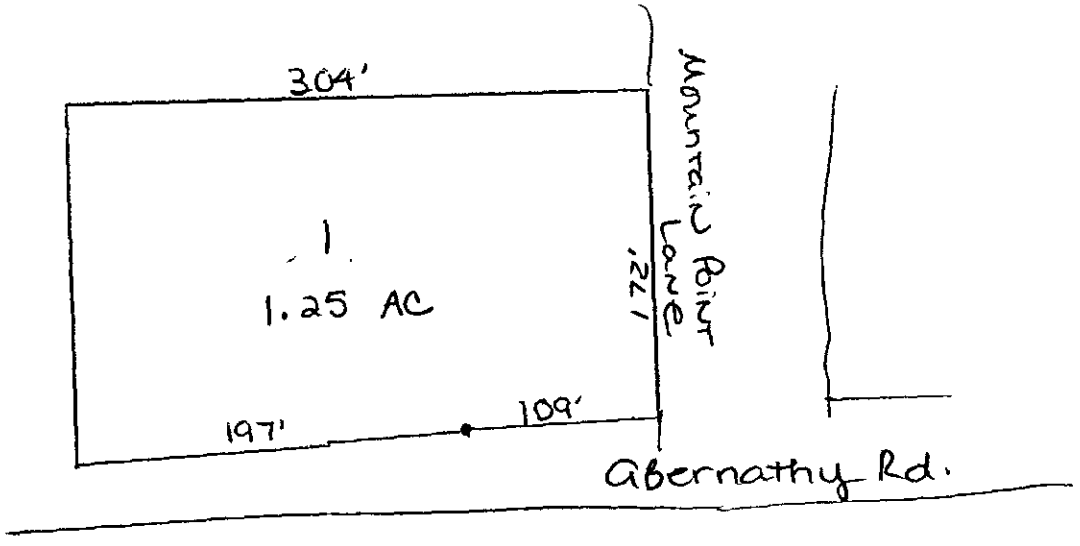
⑦ NAME: Jack Parker c/o LandCraft Properties, Inc
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: 2305 Randolph Rd.

⑨ CITY: Charlotte ⑩ STATE: NC ⑪ ZIP: 28207

⑫ PHONE: (WORK) 332-9340 (HOME) _____

⑬ Accurately diagram and dimension lot.



⑭ The undersigned, 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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Harriette H Parker

Date: Aug 26, 1988

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

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY