

19110 MARY ARDREY CR

00151116

7/3/2007

duponbj

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

JW

APPLICATION FOR AN IMPROVEMENT PERMIT

Pd. 8/6/91
Ck #895
Amt. 200.00
I.P.

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: 7483A
TC: 001-511-16
SERIAL: №0019660

☐ L ☑ CRT

JOB LOCATION

① ADDRESS: 19110 MARY AUDREY CIRCLE (STREET NO. / STREET) ② FILE: 7483A

③ JURISDICTION: CORNELIUS ④ TAX PARCEL NO.: 001-511-16

⑤ SUBDIVISION: PATRICKS PURCHASE II ⑥ LOT: 31 ⑦ BLOCK:

OWNER

⑧ NAME: RICMAR CUSTOM HOMES INC (FIRST / MIDDLE / LAST)

⑨ MAILING ADDRESS: 10619 CONISTON PL.

⑩ CITY: HUNTERSVILLE ⑪ STATE: N.C ⑫ ZIP: 28078

⑬ PHONE: (WORK) 892-0017 ⑭ (HOME) 892-0023

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? 3

㉓ Maximum occupancy? 4

㉔ Basement? ☐ yes ☒ no

㉕ Type?

㉖ Maximum number of employees?

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: RICMAR Custom Homes, Inc. by [signature]

Date: 7/31/91

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. Lift station required.

Tim Whittaker, Environmentalist — 8/6/91 Date

[signature], Director or Authorized Section Head — 8-6-91 Date

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

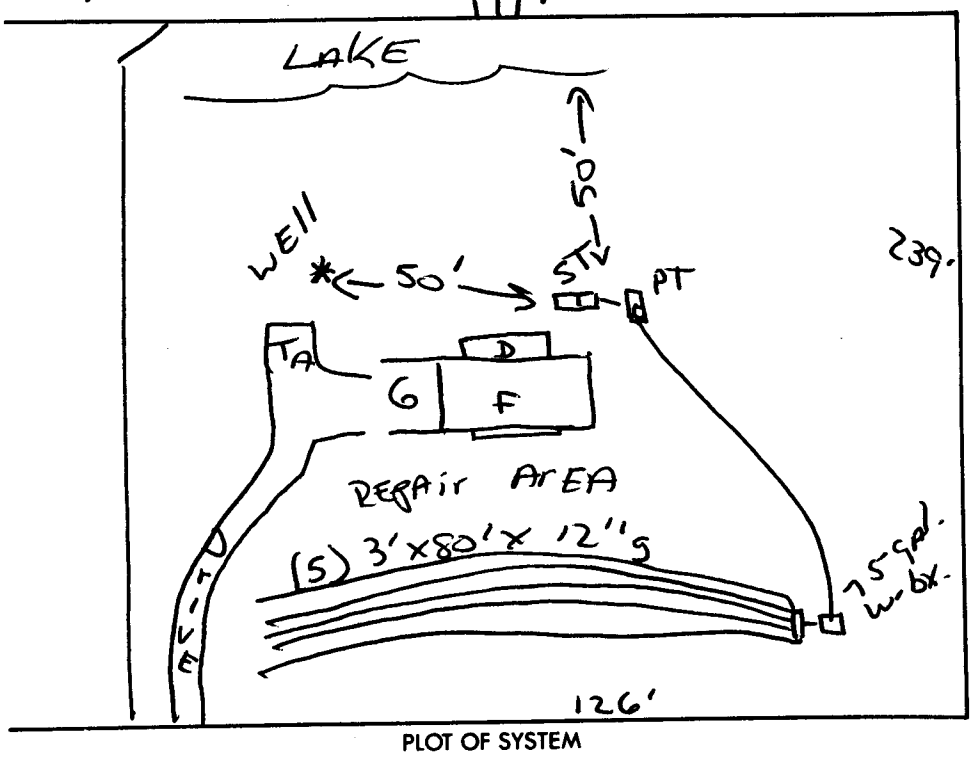
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 7483-A DATE: 3/25/92

TC: 601-511-16 ☐ L

SERIAL Nº 14161

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 7/31/91. All work shall be completed on or before 4/25/92, 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 1,500 gallons

Liquid Capacity of Dosing Tank 1000 gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Total Line Length 400' feet

Number of Lines (5) 80'

Depth of Stone 12" inches

Distance from House 10' feet

Distance from Property Line 10' feet

Distance from Well >50' feet

NAME OF OWNER Ricmar Custom Homes, Inc.

LOCATION OF PROPERTY 19110 Mary Audrey Circle (Lot 31)

Comments: 3 bedrm. (5) 3'x80'x12"g. (5) 3'x80'x12"g 75 gal. w-bx to D-bx.

Division or Section Head

Tim Whittaker, 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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 7483-A DATE: 4/2/97

TC: 001 - S11 - 16 ☐ L ☐ CRT

SERIAL № 12857

Name of Owner Ricmar, Inc. Juris.:

Address of Property 19110 Mary Audrey Circle (Lot 31)

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400'

Number of Lines 5 @ 80'

Cover Depth 12"

Water Supply Source P/well

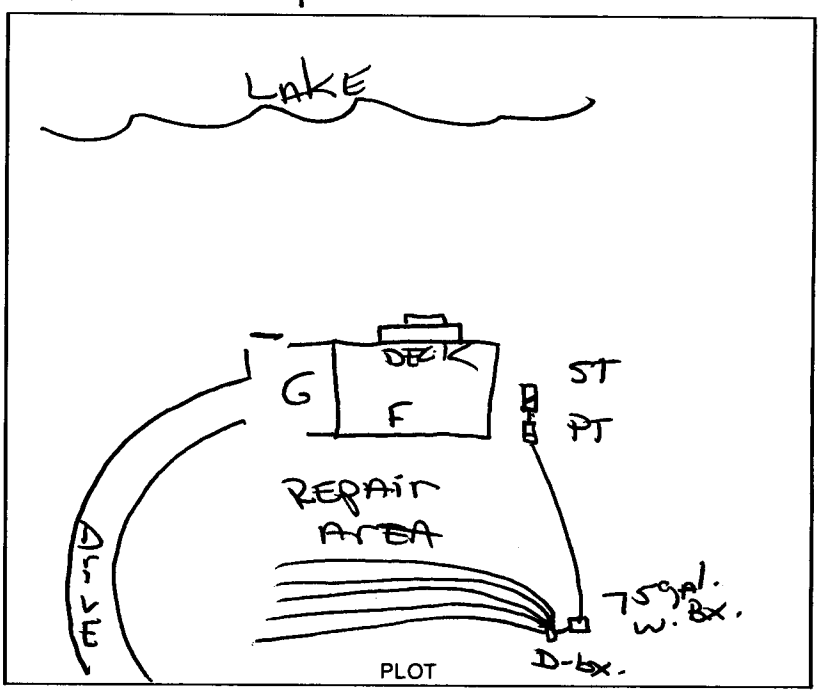
Distance to Water Source >50'

Excavation Inspected Y

Tank(s) Inspected Y, Y

Wash Line Inspected —

High Water Alarm Inspected installed



Design: 1500 ST, 1000 PT, PI, CON., 1200 SFT, 12"g, LEVEL LIKE CTR# 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 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: 3 bedrm. (5) 3'x80'x12"g. 3/4 hrs. Liberty pump.

ST 3

Tim Whitenba, R.S.
Environmentalist

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

JW.

Pd. 8/01/91
Ck # 895
Amt. 200.00
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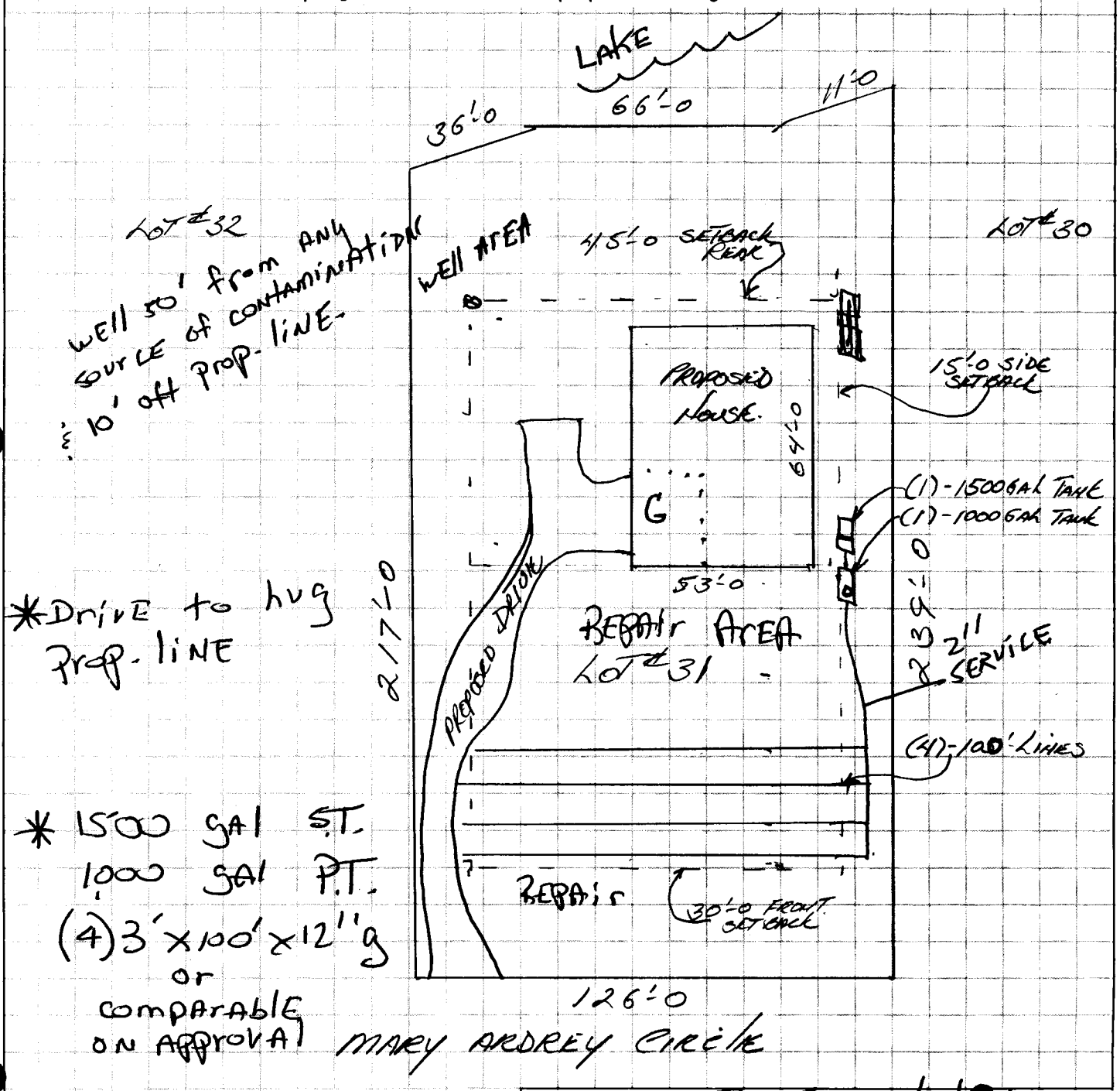
PROPOSED PLOT PLAN

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

FILE: 7483A

TC: 001-511-16

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.



* 1500 gal S.T.
1,000 gal P.T.
(4) 3' x 100' x 12" g
or
comparable
on approval

APPROVAL DATE TW. 8/5/91

lift station required.

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

APPLICATION FOR SOIL INVESTIGATION

Pd. Ck. # 1126
Amt. 50.00
6/3/91 LS

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

(OFFICE USE ONLY)

FILE: 7483A

TC: _____

☑ PC ☐ REPT

JOB LOCATION

① ADDRESS: 19110 MARY ARDREY CIRCLE, HUNTERSVILLE, N.C 28078

② SUBDIVISION: PATRICKS PURCHASE PHASE II ③ LOT: 31 ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: 001 PAGE NO.: 511 PARCEL NO.: 16

⑥ DEED REFERENCE: BOOK NO.: 5123 PAGE NO.: 663

OWNER

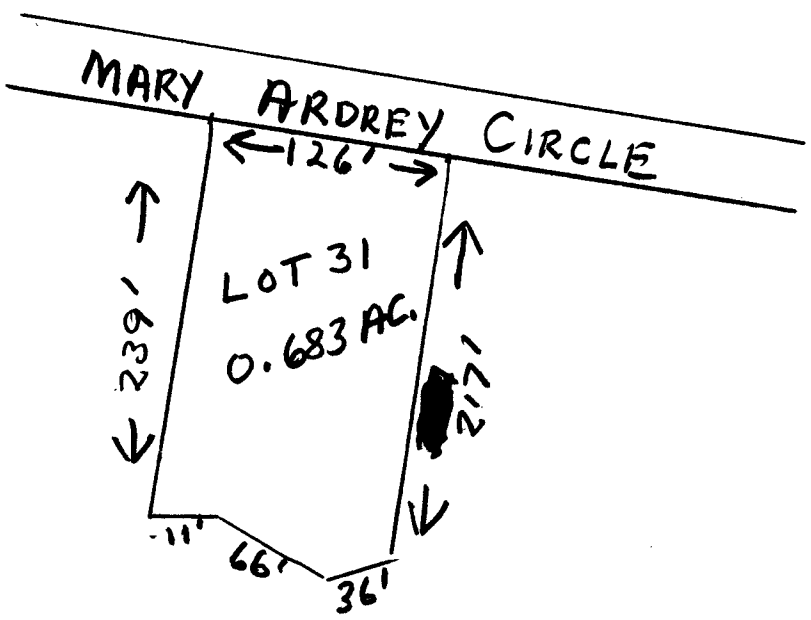
⑦ NAME: STOUGH (FIRST) FARM (MIDDLE) DEVELOPMENT CO - W. A. KIMBROUGH (LAST)

⑧ MAILING ADDRESS: 19529 WEAVERS CIRCLE

⑨ CITY: HUNTERSVILLE ⑩ STATE: N.C. ⑪ ZIP: 28078

⑫ PHONE: (WORK) 892 3683 (HOME) 892 3683

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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Bill

Signed: William A. Kimbrough

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

Date: 5-16-91

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 17267

File: 7483-A Action 1

Parcel: 001-511-16 ☐ PC

Location: 19110 MARY AUDREY CIRCLE

Subdivision: PATRICKS PURCHASE II

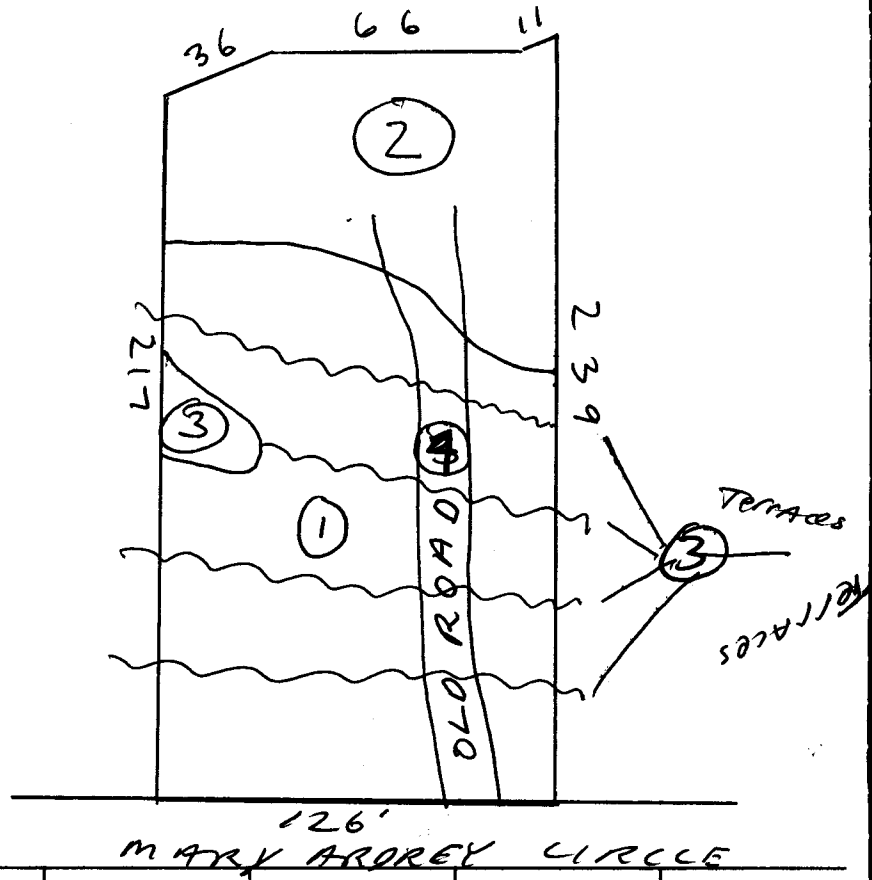
Lot: 31 Block: Acres: .67

Owner: W. A. KIMBROUGH
Address: 19529 WEAVERS CIRCLE
HUNTERSVILLE N.C. 28078

Comments: LOOP REPAIR

Described by: Kelly Randall

Date: 6-10-91



***** 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 2-4	S (PS) U	S PS (U) TERRACES	S PS (U) OLD RAISED ROAD BED	S PS U —	S PS U
Texture	S (PS) U CLAY	S PS (U) 2-1 clay	S PS U —	S PS U —	S PS U	S PS U
Structure	S (PS) U BLOCKY	S (PS) U SUBANG BLOCKY	S PS U —	S PS U —	S PS U	S PS U
Drainage	S (PS) U 7 36"	S PS (U) PERCHED WATER 35"	S PS U —	S PS U —	S PS U	S PS U
Depth	S (PS) U 42-46"	S (PS) U 40"	S PS U —	S PS U —	S PS U	S PS U
Restrictive Horizons	S PS U NONE	S (PS) U NONE	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	CECIL/LIKE	HELENA LIKE	TERRACES	OLD RAISED ROAD BED		
Area Classification	S (PS) U	S PS (U)	S PS (U)	S PS (U)	S PS U	S PS U

Mecklenburg County
Health Department

June 13th, 1991

Stough Farm Dev. Co./W.A. Kimbrough
19529 Weavers Circle
Huntersville, NC 28078

RE: Property located at 19110 Mary Ardrey Circle
FILE: 7483A
PARCEL: 001-511-16

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 17267) 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 there are any questions concerning this matter, do not hesitate to contact me.

Sincerely,

Gene Vaughan, R.S., Supervisor
Individual Water and Wastewater Systems

Enclosure

Environmental Health Division
1200 Blythe Boulevard • Charlotte, North Carolina 28203 • (704) 376-4603