

11809 BAIN SCHOOL RD

19724111

1/9/2008

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 5737B DATE: 11/8/04

TC: 19724111 ☒ L ☐ CRT

SERIAL 19411

Name of Owner David Moscorro Juris.: _____

Address of Property 11809 Bain School Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 600

Number of Lines 5 @ 120

Cover Depth 12 - 18

Water Supply Source Municipal water

Distance to Water Source >10'

Excavation Inspected 11/8/04

Tank(s) Inspected 11/8/04

Wash Line Inspected plumb to tank

High Water Alarm Inspected N/A

PLOT

Design 2004, 1500ST, IN0, 600'Ez Flow CTR# Jordon Plumbing

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 I5A 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 I5A 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: Septic System Designed for a 6 Bedroom Residence. Type IIIs

Phillip S. Walker RS
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

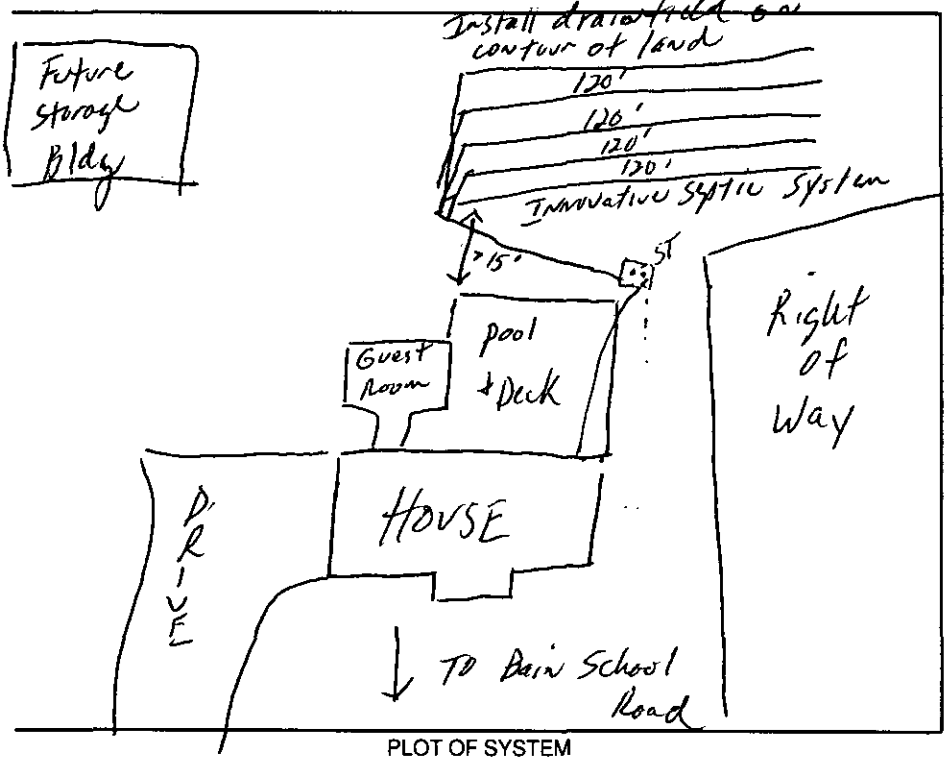
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 5737B DATE: 11/4/04

TC: 197 24 11 ☒ L

SERIAL 19726

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 10/12/04. All work shall be completed on or before 12/4/04, 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 NA gallons

Tank Construction PCC

Trench Depth 30"

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Trench Walls Scored and Porous yes

Total Line Length 600' feet

Number of Lines 5 (120')

Depth of Stone NA inches

Distance from House 5' feet

Distance from Property Line 10' feet

Distance from Well > 10' feet
Municipal water

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

NAME OF OWNER David Mascorro

LOCATION OF PROPERTY 11809 Bain School Road

Comments: Install 1500 ST, Innovative Septic System, 5 lines x 120' long x 3' wd Type IIIg Keep drainfield > 15' from pool area

Philo A. Walker RS
Environmental Health Specialist

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

CK# 7771

FEE: $300.00
DATE: 10/28/04 gc

AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION

LD

FCS

PERMIT NUMBER: 5737B
PARCEL NUMBER: 197-241-11

JOB LOCATION ADDRESS: 11809 BAINSCHOOL RD
PROPERTY OWNER: DAVID MOSCORRO (PROS. BUYER GERARDO AGUILAR)
BUILDING CONTRACTOR: NA
SUBDIVISION NAME: NA
AUTHORIZATION ISSUED BY: PHILO WALKER DATE: 10/28/04

Philo S. Walker RS.
DENR/DEH AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 5737B, 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 THE 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 CONSTRUCTION AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. THIS CONSTRUCTION AUTHORIZATION AS PROVIDED IN G.S. 130A-335(f) AND G.S. 130A-336(b) SHALL BE VALID FOR A PERIOD EQUAL TO THE VALIDITY OF THE IMPROVEMENT PERMIT, NOT TO EXCEED 60 MONTHS.

5. OTHER CONDITIONS:
   LIFT PUMP REQUIRED

CONDITIONS OF IMPROVEMENT PERMIT / CONSTRUCTION AUTHORIZATON

Permit Number: **5737B** Tax Number: **197-241-11**

- 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

Primary Wastewater System

Type: ☐ 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:

.3 Long-term acceptance rate (GPD/ft^2)	600 Max gallons/day wastewater flow	2000 Absorption Area (ft^2)	9 Trench spacing (min. on centers) (ft)
Serviced by private well: ☐ Yes ☒ No	1500 Gallon septic tank	800 Total trench length (ft)	30 Maximum trench depth (in) (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions.)
6 Bedrooms in residence	1000 Gallon pump tank	12 Depth of stone (in)	

Any surface water present: **NO** Type: Minimum separation distance (ft):

Additional conditions: **LIFT PUMP REQUIRED**
DRAINFIELD EXCEEDS 750 FEET

Repair Area System

Type: ☐ 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:

2000 Absorption Area (ft^2) 800 Total trench length (ft)	12 Depth of stone (in)	9 Trench spacing (min. on centers) (ft)	30 Maximum trench depth (in)

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. The approval is granted in accordance with the provisions of Laws and Rules For Sewage Treatment, and Disposal Systems 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.

Phyllis L. Walker RS 10/28/04
DENR Authorized Agent Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 N. TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE: (704) 336-5103
FAX: (704) 336-6894

X Gerardo Aguilar 10/28/04
Owner/Agent Signature Date

NC DENR
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPOSED PLOT PLAN

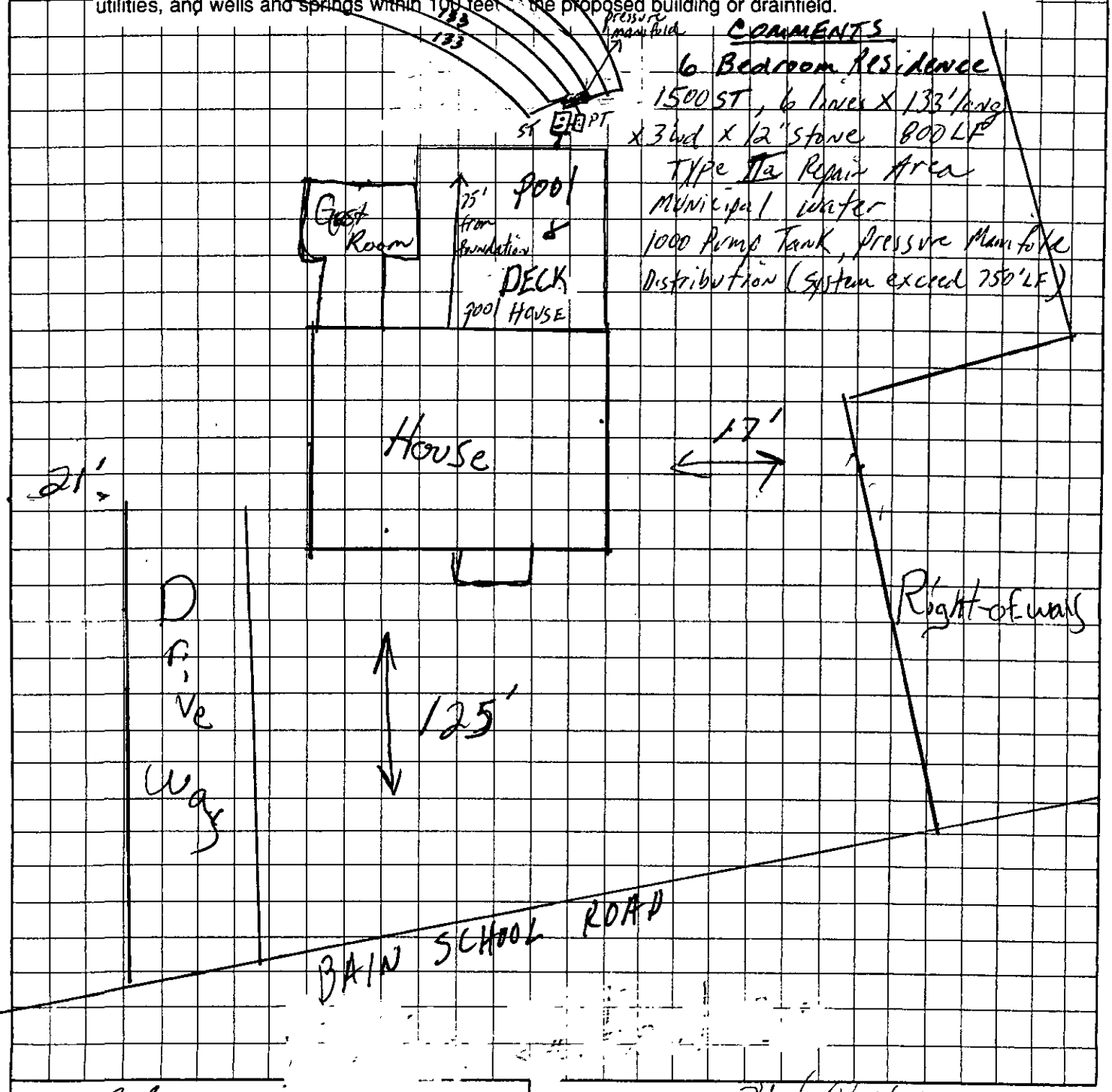
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 5737B

TC: 197-241-11

Type IIa Repair
6 X 133'
133'
133'
133'
133'
Store Bldg
75'

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.



COMMENTS

6 Bedroom Residence
1500 ST, 6 lines X 133' long
X 3 wd X 12" stone 800 LF
Type IIa Repair Area
Municipal water
1000 Pump Tank, Pressure Manifold
Distribution (System exceed 750' LF)

X Lucinda Aguilera
OWNER/AGENT SIGNATURE

DATE

APPROVAL DATE JW 10/29/04

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

Sheet: 1 of 2
Property ID: 197-241-11
Lot #:
File #: 5737B
Code: 1

ACS

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: David R. MaScorro
Applicant: Gerardo Aguilar
Address: 6113 Loch Arbor Lane, Charlotte, N. C. 28227
Date Evaluated: 10/20/2004
Proposed Facility: Residence
Design Flow (.1949): 600gpd
Property Size: .5a. Inv.
Location of Site: 11809 Bain School Road
Property Recorded:
Water Supply: [x] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [x] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [x] 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 (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS, 6	0-3	GR/SCL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48+	N/A	NONE	PS, IV
		3-48	SBK/C	FI/SEXP/S/P					.3GPD/FT^2
2	"	0-9	GR/SCL	FR/SEXP/SS/SP	>43" TO SOIL WETNESS	43+	"	"	PS, IV
		9-43	ABK/SBK/C	FI/SEXP/S/P					.25GPD/FT^2
		PLATY	STRUCTURE	@43"					
3	"	0-5	GR/SCL	FR/SEXP/SS/SP	>49" TO SOIL WETNESS	49+	"	"	PS, IV
		5-49	SBK/C	FI/SEXP/S/P					.3GPD/FT^2
4	"	0-4	GR/SCL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48+	"	"	"
		4-48	SBK/C	FI/SEXP/S/P					
5	"	0-6	GR/SCL	FR/SEXP/SS/SP	>49" TO SOIL WETNESS	49+	"	"	"
		6-49	SBK/C	FI/SEXP/S/P					
6	"	0-4	GR/SCL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48+	"	"	"
		4-48	SBK/C	FI/SEXP/S/P					
7	"	0-3	GR/SCL	FR/SEXP/SS/SP	>33" TO SOIL WETNESS	33+	"	"	US, IV
		3-33	SBK/C	FI/SEXP/S/P					.3GPD/FT^2
		BORING	TERMINATED	@33", FLOATER ROCK					

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR	.3GPD/FT^2	.3GPD/FT^2

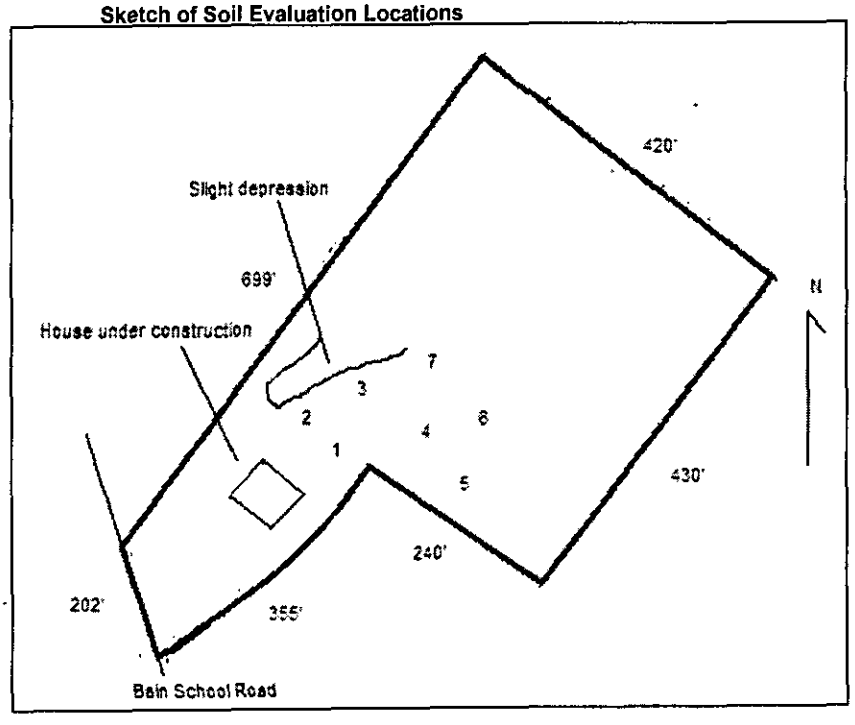
Other Factors (.1946):
Site Classification (.1948): PROVISIONALLY SUITABLE
Evaluated By: W. R. Marlin, LSS, 10/20/2004, W. R. Marlin
Others Present: G. Aguilar

COMMENTS:
Not sure if 100% repair is required

Landscape Position	Group	Texture	.1955 LTAR	Structure
R-Ridge	I	S-Sand	1.2 - 0.8	SG-Single Grain
SS-Shoulder Slope		LS-Loamy Sand		M-Massive
LS-Linear Slope				CR-Crumb
FS-Food Slope	II	SL-Sandy Loam	0.8 - 0.6	GR-Granular
NS-Nose Slope		L-Loam		SBK-Subangular Blocky
HS-Head Slope				ABK-Angular Blocky
CC-Concave Slope	III	SI-Silt	0.6 - 0.3	PL-Platy
CV-Convex Slope		SICL-Silty Clay Loam		PR-Prismatic
T-Terrace		CL-Clay Loam		
FP-Flood Plain		SCL-Sandy Clay Loam		
	IV	SC-Sandy Clay	0.4 - 0.1	
		SIC-Silty Clay		
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	NS-Non-Sticky	SEXP-Slightly Expansive
FR-Friable	SS-Slightly Sticky	EXP-Expansive
FI-Firm	S-Sticky	
VFI-Very Firm	VS-Very Sticky	
EFI-Extremely Firm	NP-Non-Plastic	
	SP-Slightly Plastic	
	P-Plastic	
	VP-Very Plastic	

Sketch of Soil Evaluation Locations



FEE: 200.00
DATE: 10/12/04
Check 7124 JKA

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

197-033-20

[ ] CRT

TYPE APPLICATION: ___ 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 #: 5731B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 19724111

STREET ADDRESS: 11809 Bain School Rd.

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

TOWNSHIP (CHECK ONE):

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

CLOSING DATE none

TYPE OF BUILDING (CHECK ONE):

___ SINGLE MOBILE HOME(S)
___ DOUBLE WIDE (D)
✓ HOUSE (H)
___ MODULAR HOME (M)
___ MULTIPLE FAMILY (U)
___ OTHER (O)

HEATED SQUARE FOOTAGE: 3,772

NUMBER OF BEDROOMS: 5 NUMBER OF OCCUPANTS: 6

FOUNDATION FOR RESIDENCE:

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

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

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

WATER SUPPLY (CHECK ONE):

✓ COMMUNITY (C)
___ SHARED WELL (S)
___ MUNICIPAL (M)
___ OTHER 'SPRINGS' (O)
___ PRIVATE WELL (P)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES ___ YES ✓ NO
EXISTING WASTEWATER SYSTEMS ___ YES ✓ NO
EASTMENTS OR RIGHT-OF-WAYS ✓ YES ___ NO
WELL, SPRINGS OR WATERLINES ___ YES ✓ NO
DESIGNATED WETLANDS ___ YES ✓ NO

PROPERTY OWNER:

NAME: Mascorro, David R.
(LAST) (FIRST) (MI)

ADDRESS: 6113 Loch Arbor Ln

CITY: Charlotte STATE: NC ZIP: 28227

DAYTIME PHONE: 704 361-5809

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: Aguilar-Gerardo-A.
(LAST) (FIRST) (MI)

DAYTIME PHONE: 704 361-5809

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: David Mascorro DATE: 10/12/04

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

file # 57378

STATE OF NORTH CAROLINA
MECKLENBURG COUNTY

This Deed, Made this 1st day of April, A. D. 1947 by and between

G. D. Hough and wife, Beatrice L. Hough,

of the County of Mecklenburg and State of North Carolina, part ies of the first part, and

E. Leo Tweed and wife, Elva M. Tweed,

of the County of Mecklenburg and State of North Carolina, part ies of the second part:

WITNESSETH, that the said part ies of the first part, in consideration of Sixty-Two Hundred ($6200.00) - - -

274

TO HAVE AND TO HOLD the aforesaid tracts of land and all privileges and appurtenances thereto belonging to the said parties of the second part, their heirs and assigns, to them and their only use and behoof forever.

And the said parties of the first part, for themselves, their heirs, executors and administrators, covenant with the said parties of the second part, their heirs and assigns, that they are seized of said premises in fee, and have right to convey the same in fee simple; that the same are free and clear from all incumbrances, and that they will warrant and defend the said title to the same against the lawful claims of all persons whomsoever.

5b

IN TESTIMONY WHEREOF, the said parties of the first part to these presents have hereunto set their hands and seals, the day and year above written.

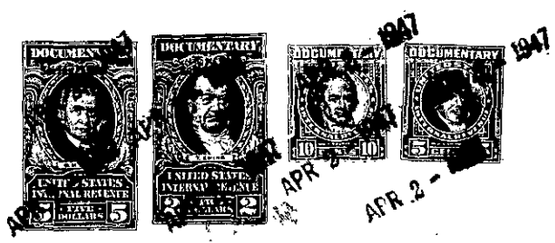
Signed, sealed and delivered in the presence of

G D Haugh (Seal)

Beatrice L Haugh (Seal)

(Seal)

(Seal)



STATE OF NORTH CAROLINA,

County of Mecklenburg } ss

I, H. I. Tucker, a Notary Public

for said County and State do hereby certify that

G. D. Hough and wife, Beatrice L. Hough,

personally appeared before me this day and acknowledged the due execution of the foregoing (or annexed) instrument;

WITNESS my hand and notarial seal, this 2 day of April, A. D. 1947.

H. I. Tucker
Notary Public

My commission expires

STATE OF } ss

County of

I,

for said County and State do hereby certify that

and

wife (or wives) of

personally appeared before me this day and acknowledged the due execution of the foregoing (or annexed) instrument; and the said

being by me privately examined, separate and apart from said husband, touching voluntary execution of the same, do state that signed the same freely and voluntarily, without fear or compulsion of said husband or any other person, and that do still voluntarily assent thereto. Let the instrument and the certificate be registered.

WITNESS my hand and seal, this day of A.D. 194

DEED

G. D. Hough and wife,

TO

Beatrice L. Hough,

E. Leo Tweed and wife, Elva M. Tweed

Consideration $6200.00

Dated 1st day of April 1947.

Filed for registration on the 2nd day of April 1947 at 11:01 o'clock A. M., and registered in the office of Register of Deeds for MECKLENBURG County, N. C. on the 4 day of April 1947 at 9 o'clock AM in Book of Deeds, on page &c.

Register of Deeds.

FILED
APR 2 AM 11 01

STATE OF North Carolina } ss

County of Mecklenburg

The foregoing (or annexed) certificate of H. I. Tucker, a Notary Public for said County and State is adjudged to be correct. Let the instrument and the certificate be registered.

This 2nd day of April A. D. 1947

Marcelle B. Duncan
Deputy Clerk of Superior Court

[illegible] CHARGE FOR CASH/CHECK $:0190 [illegible]

[illegible] EXCISE TAX: $0.00 [illegible]

MECKLENBURG COUNTY [illegible]

[illegible] $0.00 [illegible]

STATE OF NORTH CAROLINA

Real Estate Excise Tax

Excise Tax | Recording Time, Book and Page

Tax Lot No. 197-033-20 | Parcel Identifier No.

Verified by | County on the day of , 19

by

Mail after recording to William H. Tweed, P.O. Box 23066, Charlotte, NC 28212

This instrument was prepared by Landon A. Dunn, Ray & Dunn, Attorneys at Law

Brief description for the Index: 5.365 AC. BAIN SCHOOL ROAD

NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED made this 2nd day of July, 1992, by and between

GRANTOR	GRANTEE
RICHARD TWEED and wife, HARRIETTE ABER TWEED; ROBERT L. TWEED and wife, DOROTHY TWEED; LOUISE TWEED PARRIS and husband, DERRELL B. PARRIS; SHIRLEY TWEED HOUGH and husband, FRANCIS L. HOUGH; DORIS TWEED WARREN and husband, JEFF H. WARREN; ELAINE T. MIDDLEBROOKS, divorced; MARIE TWEED DEAL and husband, CHARLES MICHAEL DEAL; AND TWEED JONES and husband, TOMMY JONES	WILLIAM HUBERT TWEED and wife, JANE O. TWEED Post Office Box 23066 Charlotte, NC 28212

Enter in appropriate block for each party: name, address, and, if appropriate, character of entity, e.g. corporation or partnership.

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in the City of , Clear Creek Township, Mecklenburg County, North Carolina and more particularly described as follows:

BEGINNING at a point in Bain School Road (State Road 1004), a corner of the property now or formerly of Thomas Michael Higgins and wife, Sara, as described in Book 1444, Page 331, Mecklenburg County Public Registry, and continuing with said Higgins property line N. 48-10-41 E. 599.18 feet to a point; thence a new line S. 50-05-09 E. 439.00 feet a point; thence S. 48-10-41 W. 430.44 feet along the line of the property now or formerly of Robert W. Quillen and wife, Beulah M., as described in Book 4317, Page 572, said Registry; thence a new line N. 51-15-37 W. 249.43 feet to a point; thence running S. 48-10-41 W. 33.17 feet to a point; running thence with a curve to the right, having a radius of 585.90 feet, an arc distance of 194.78 feet to a point; continuing S. 59-13-34 W. 127.78 feet to a point in Bain School Road (S.R.1004); thence along Bain School Road N. 9-53-18 W. 138.52 feet to the point and place of BEGINNING. Containing 5.365 acres, more or less, as shown on that certain plat of the E. Lee Tweed Property made by B. H. Pharr and Associates, R.L.S. on December 11, 1989, to which further reference is hereby made.