7931A



17611 GREEN HILL RD

12/17/07

duponbj

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

#7931A/42B 400 ☒ Pd 50.00 CK# 1972 NB 12-31-91

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

PC ☒ [] 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:
NAME: Blume (last) Bennie (first) Lee (mi)
ADDRESS: 3601 Kelway Ave PHONE: (__) 552-6791
CITY: STATE: ZIPCODE:

Date:

PROPERTY INFORMATION (FROM ENGINEERING FORM): ~~05~~ 06
TAX/PARCEL NUMBER: 217081-~~05~~
STREET ADDRESS: Green Hill Rd.
ZONING:

PROPERTY OWNER:
NAME: Same (last) (first) (mi)
ADDRESS: PHONE: (__)
CITY: STATE: ZIPCODE:

SUBDIVISION OR MOBILE HOME PARK NAME:

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

TYPE APPLICATION (check one):

LOT NUMBER: 5 LOT SIZE (in acres): 1 - 17

[] 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 (N)
[] SOIL TEST DEVELOPMENT (P)
[] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
[] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[] REPAIR TO SYSTEM (R)

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

NUMBER BEDROOMS: NUMBER OCCUPANTS:

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)
☒ Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[] Swimming Pool [] Jacuzzi [] Stable/Barn [] Workshop [] 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: Bennie Blume Date: 12-27-91

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 permit is issued 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

_____ Environmentalist Date

_____ Director or Authorized Section Head Date

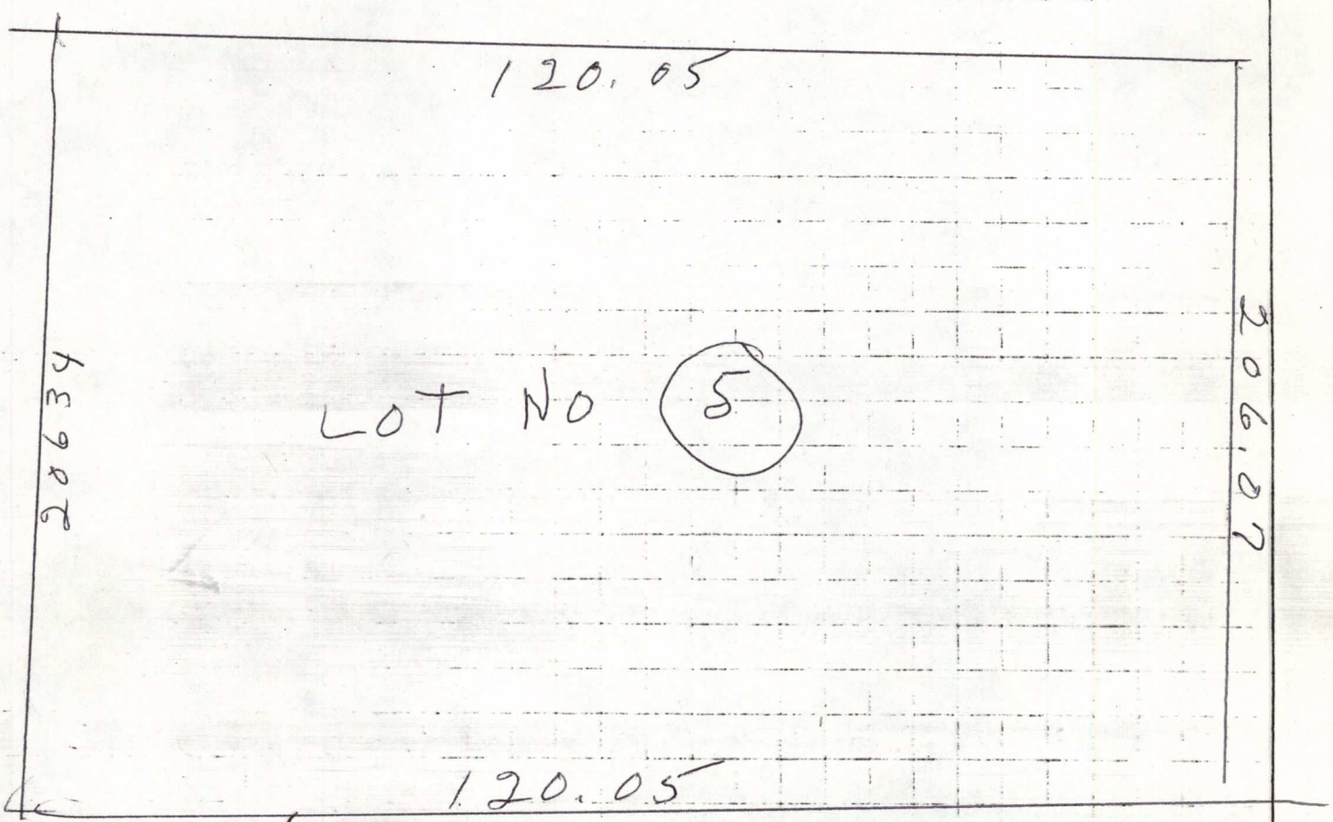
WWATER : 112991

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

FILE: _____

TC: _____

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.



Signed: _____

Date: _____

Mecklenburg County
Health Department

January 9th, 1992

Bennie Lee Blume
3601 Kelway Avenue
Charlotte, NC 28210

RE: Property located at Green Hill Road
FILE: 7931A
PARCEL: 217-081-05

Dear Sir:

At your request a soils investigation was conducted on the property designated above. Results of this investigation showed the site to be classified as UNSUITABLE under criteria as set forth in Section .1900 of the North Carolina Administrative Code, Title 10, Department of Human Resources, Chapter 10, Division of Health Services; Sanitary Engineering Section, Subchapter 10A, Sanitation. A copy of the Site Evaluation Report (Serial Number 12415) is enclosed.

The soil on this property is not suitable for use with any conventional, modified or alternative system of which I am aware. If you wish to exercise your right of appeal concerning the interpretation and enforcement of these rules you may do so in accordance with G.S. 150B and 10 NCAC 1B.

If I can be of assistance, please do not hesitate to call.

Very truly yours,

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

Enclosure

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

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 12415

File: 7931A/42B Action 3
Parcel: 217-081-05 ☐ PC

Location: Greenhill Road

Subdivision:

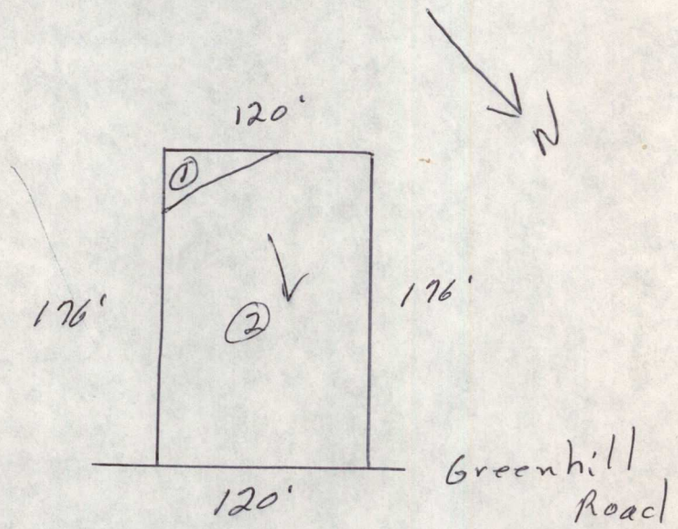
Lot: 5 Block: A Acres: .48

Owner: Bennie Blume
Address: 3601 Kelway ave.
Charlotte, N.C. 28210

Comments: _____

Described by: William A. Marlin

Date: 1-6-92



***** 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 2-8%	S PS (U) complex slopes	S PS U	S PS U	S PS U	S PS U
Texture	S PS (U) Expansive Clay	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U subBlocky & 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) Restricted	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	Vance-Lilly	complex slopes				
Area Classification	S PS (U)	S PS (U)	S PS U	S PS U	S PS U	S PS U

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER № 12415

File: 113141428 Action 2

Parcel: 9117-01-05 ☑ PC

Location: Grenhill Cir

Subdivision:

Lot: 5 Block: 1 Acres: .46

Owner: Bonnie Flom
Address: 311 Kelway Cir.
Charlotte, NC 28210

Comments: _____

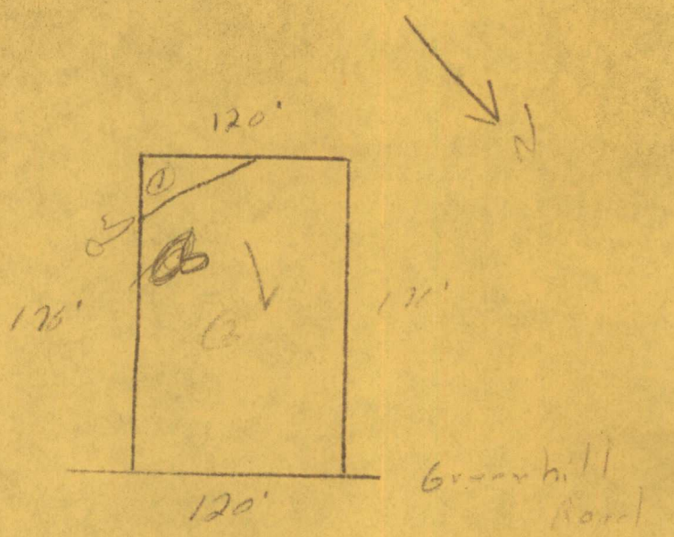
_____

_____

_____

Described by: William P. Martin

Date: 1-1-92



***** EVALUATION KEY *****

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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 2-8%	S PS U Complex Slopes	S PS U	S PS U	S PS U	S PS U
Texture	S PS U Expansive Clay	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S PS U Sub Blocky & Blocky	S PS U —	S PS U	S PS U	S PS U	S PS U
Drainage	S PS U 736" to water	S PS U —	S PS U	S PS U	S PS U	S PS U
Depth	S PS U 736"	S PS U —	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S PS U 736"	S PS U —	S PS U	S PS U	S PS U	S PS U
Available Space	S PS U Restricted	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	Vance & U-	Complex Slopes				
Area Classification	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U

1931A

UPDATE COMPLETE

Applicant BLUME BENNIE L Appl.Date 12/31/91 Updated 01/02/92
Mail Addr 3601 KELWAY AVENUE Phone 704 552-6391
City CHARLOTTE State NC Zipcode 28210
Prop Ownr BLUME BENNIE L
Mail Addr 3601 KELWAY AVENUE Phone 704 552-6391
City CHARLOTTE State NC Zipcode 28210 Township 0
Tax Map No. 21708105 Road GREENHILL ROAD Zoning
Sub/Mobil Sec Lot No. 5 Lot Size 1
Type App D Site Y or Tract Type Bldg System Classif NOT REQUIRED
Resident. Specif: No. Bedrooms 00 No. Occupants Undgrnd. Stor. (Y/N)
Commercial/Industrial/Other Specifications:
Type No. Empl. No. Empl. per Shift
Industrial or Mfg. Wastes (Y/N) Underground Stor. Tank (Y/N)
Prop. Water Sup. Proposed Sewage Construct. Status P Sites
Planned Future Additions (Y/N) Fee 0000.00 EHS Assigned 25001
Directions:

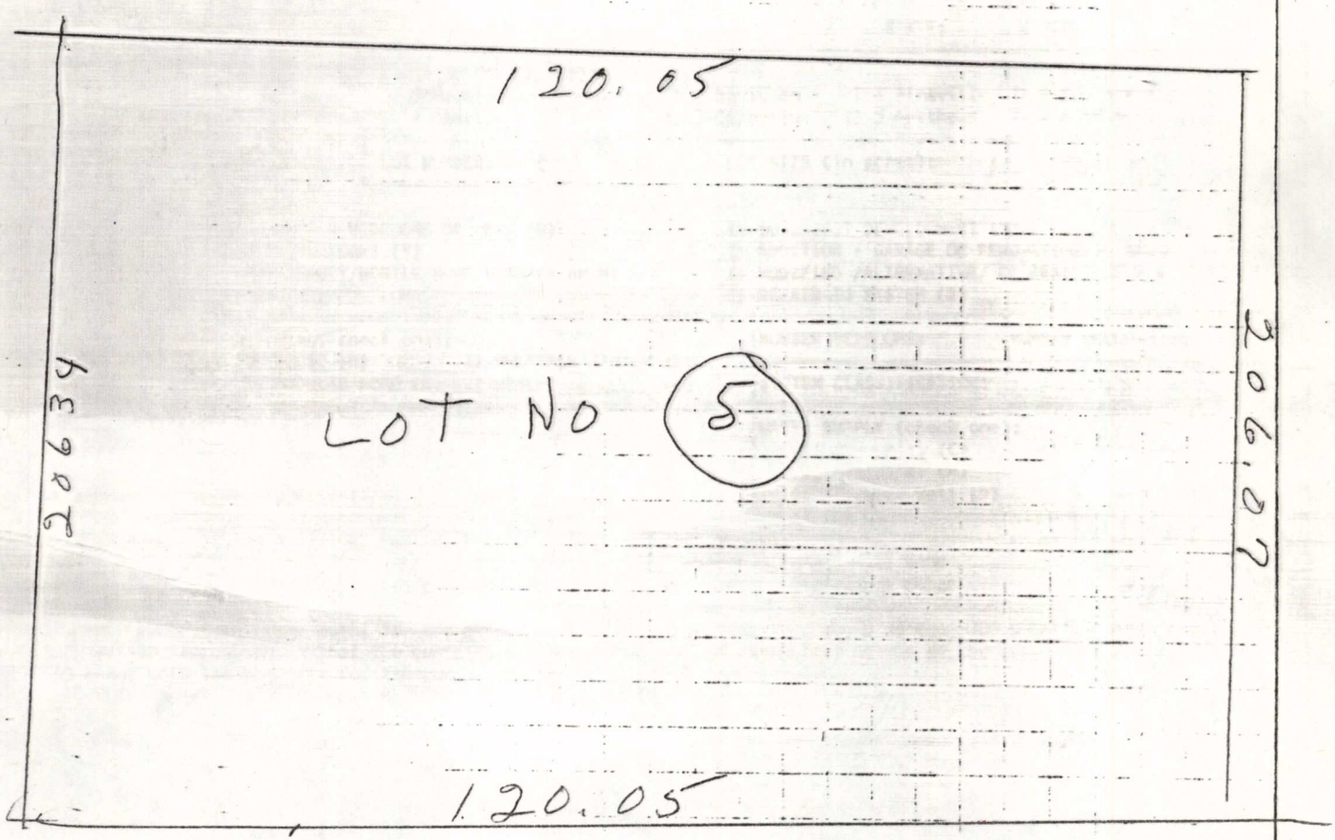
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Date Perm. Date Cert.Iss. Disp.Code Followup
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Repaired (Y/N) Rep. Date Perm. No. 00042B Operat. Permit (Y/N)
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01-03 SA MW KS IM II S1 S1037498 KB

HEALTH DEPARTMENT
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FILE: _____

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Date: _____