

5528 MARGARET WALLACE RD

13519114

8/22/08

marliwr

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

8/21/01 paid additional $20 for alteration

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

COPY

Paid CK #1330 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 19542

PERSON FILING APPLICATION:
NAME: BARNES (last) CARLTON (first) RAY (mi)
ADDRESS: 5528 Margaret Wallace Rd PHONE: (704) 545-6762
CITY: Matthews (Mint Hill) STATE: NC ZIPCODE: 28105

Date: 8-10-01

PROPERTY OWNER:
NAME: Barnes (last) Carlton (first) Ray (mi)
ADDRESS: 5528 Margaret Wallace Rd PHONE: 704 545-6762
CITY: Matthews (Mint Hill) STATE: NC ZIPCODE: 28105

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 135-191-14
STREET ADDRESS: 5528 Margaret Wallace Rd
ZONING:

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

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: LOT SIZE (in acres): 2.23 Acres

TYPE APPLICATION (check one):

[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (N)

[X] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
DEN W/BATH, KITCHEN & CLOSETS & DECK

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

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 2

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)
[X] 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 [X] Deck/Patio [] Bedrooms [X] Other (Dan)

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: Carlton Ray Barnes Date: 8-10-01

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 approval is granted by this Department.

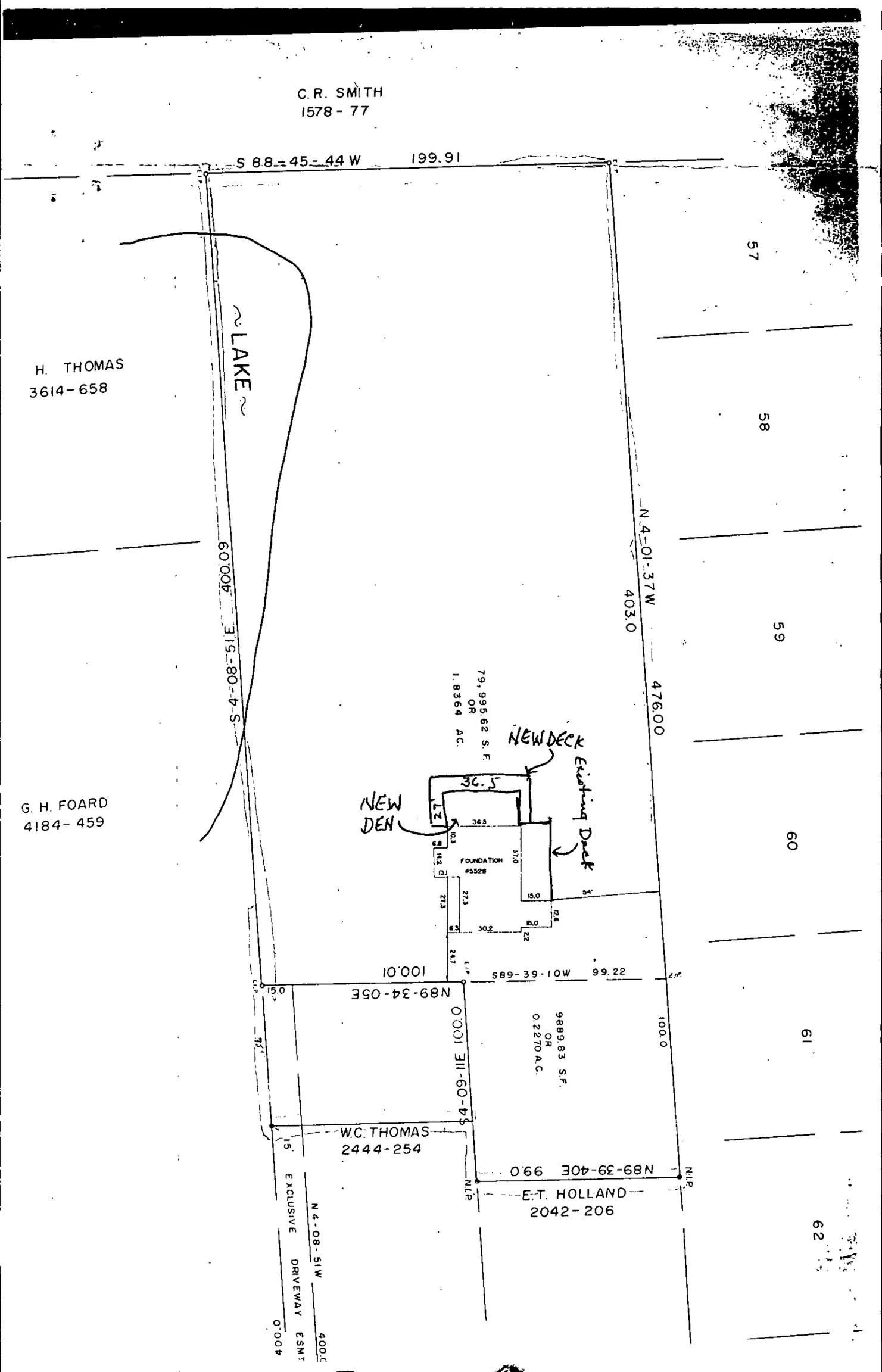
...This permit is not transferable.

...

[] 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

WATER : 122791


C.R. SMITH
1578 - 77
S 88-45-44 W 199.91
H. THOMAS
3614-658
LAKE
S 4-08-51 E 400.09
G. H. FOARD
4184-459
N 4-01-37 W
403.0
476.00
57
58
59
60
61
62
79,995.62 S.F.
OR
1.8364 AC.
NEW DECK
Existing Deck
NEW DEN
36.5
27
FOUNDATION
#5528
10.3
6.8
14.3
37.0
27.3
15.0
12.6
6.3
30.2
2.2
24.7
10.00'
S 89-39-10 W 99.22
N 89-34-05 E
100.00
S 4-09-11 E
9889.83 S.F.
OR
0.2270 A.C.
100.0
15.0
W.C. THOMAS
2444-254
15'
EXCLUSIVE DRIVEWAY ESMT
N 4-08-51 W 400.0
N 89-39-40 E 99.0
N.I.P.
E.T. HOLLAND
2042-206

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	08/21/01	**Amount:**	200.00
Receipt #:	931	**Tendered:**	200.00
Check / Auth #:	CHECK 1333	**Returned:**	0.00
Received By:	FOSTERV		

Account Information

Account #: 100000
Contractor: Ray Barnes
Attn:
Address: 5528 Margaret wallace Rd
Address:
City/State/Zip: Matthews, NC 28105

Item	Description	Permit#	Quantity	Unit Price	Total Price
0706	MH Exc/Add/Repl w/System Mod 5528 Margaret Wallace Rd		1	200.00	200.00

fnch & NOTE
file
Josh

135.191.14
19542

----------Outstanding Balances----------

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance

INSTALLATION, CONSTRUCTION, ALTERATION

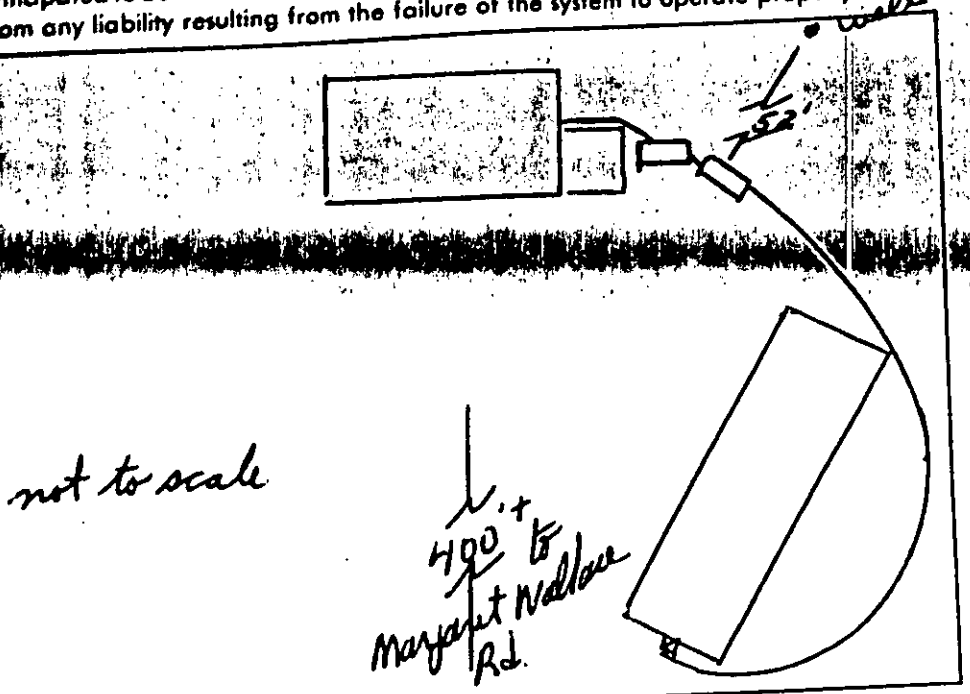
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 19542 DATE: 7/20/

TC: 135 191 14 6 L

SERIAL No. 11149

Permission is hereby given to ✓ Install or Construct, _____ Alter or Repair the individual septic tank wastewater treatm system with subsurface, soil absorption, effluent discharge as specified herein at the described location. This permit is grant based upon the information supplied in the application dated 2/4/87. All work shall be completed b before 1 Aug 1987, after which date this permit shall be null and void. The system shall meet all of construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificat Completion or an Operation Permit must be obtained from the Mecklenburg County Department of Environmental Health be any system can be covered up or placed into service. The issuance of this permit does not in any way guarantee that the sy anticipated to be constructed will operate properly, or relieve any person now or hereafter owning, controlling or using such sy from any liability resulting from the failure of the system to operate properly.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 ga

Liquid Capacity of Dosing Tank 1000 ga

Tank Construction pre cast

Absorption and/or Nitrification Lines:

Trench Width 3

Total Line Length 400

Number of Lines 5

Depth of Stone 12"

Distance from House 10'

Distance from Property Line 6'

Distance from Well 50'

NAME OF OWNER Benard J. Hinson

LOCATION OF PROPERTY 5528 Margaret Wallace Rd

Comments: 5 in Trenches 3'x80', 9' on center - remain 15' from driveway cut area - trenches to follow contour of land - set pump cycle for 150 gals

John R Atkinson
Director or Section Head

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 Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an system is being altered or repaired.

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

8/17

Will come by
office + pay fees
on next week

paid

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C/C. # 1330 Paid 8/10/01 105 RP [] CRT

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