

735 DAVIDSON RUN LN

00743111

1/7/2008

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: 4837B DATE: 9/18/02

TC: 007-431-11 ☐ L ☒ CRT

SERIAL Nº 18943

Name of Owner Tom Ryan Juris.: _____

Address of Property 735 Davidson Run Lane

Inspection Data:

Tank Material PCC

Total Length of Drainfield 667'

Number of Lines 5 @ 133'

Cover Depth 12"

Water Supply Source well

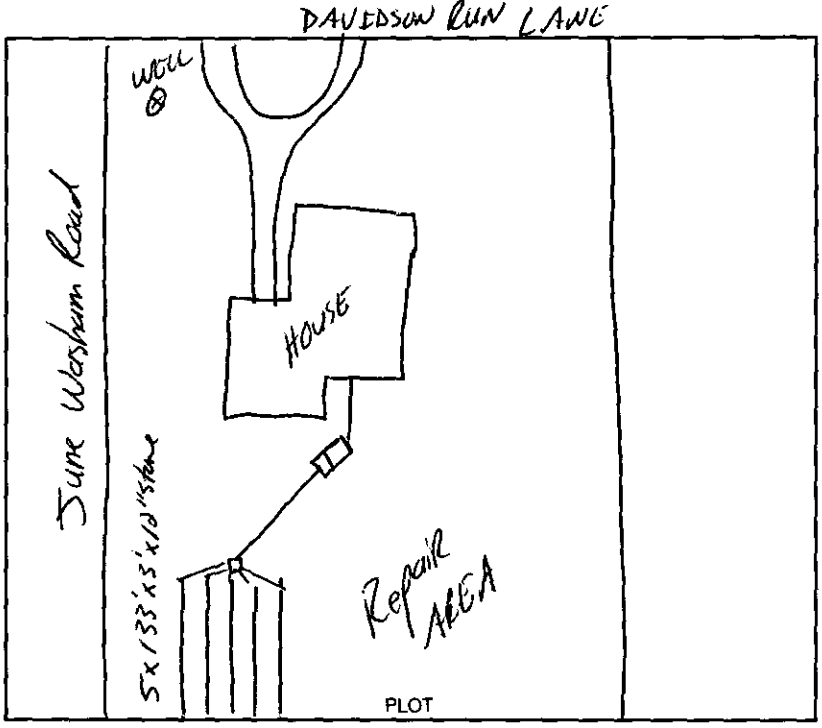
Distance to Water Source >100'

Excavation Inspected 9/18/02

Tank(s) Inspected 9/18/02

Wash Line Inspected N/A

High Water Alarm Inspected N/A



Design 1500ST, 2000SFT, CON, 12" Stone CTR# Larry Tucker

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: Five Bedroom Residence

5 lines x 133' x 3' x 12" Stone

Type II Conventional System

Larry Mackie L.S.
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

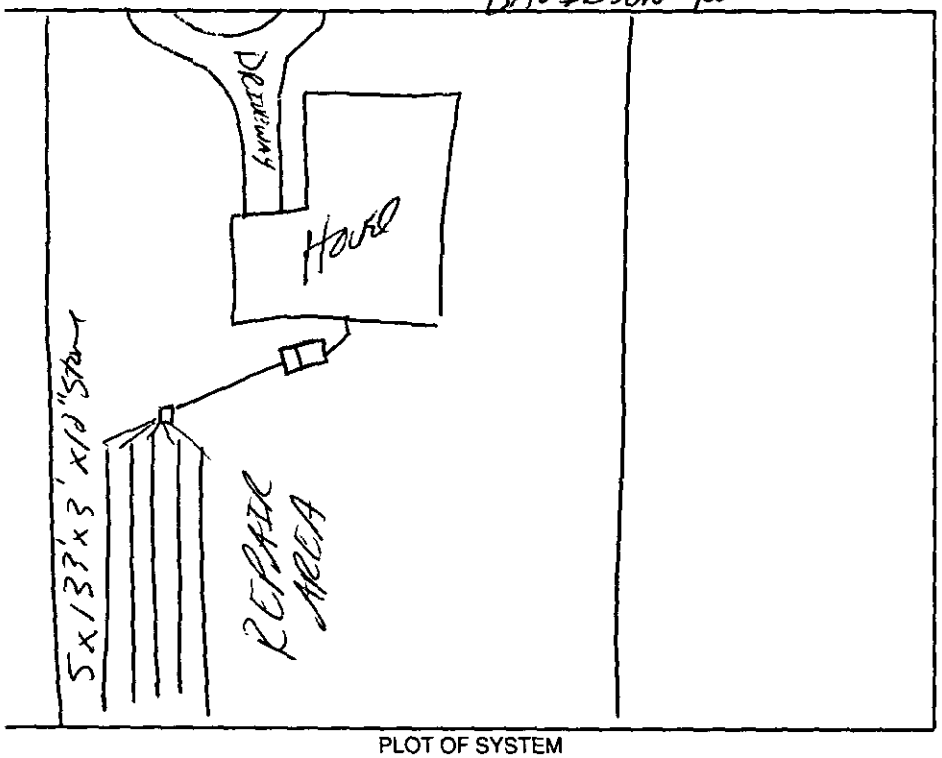
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 4837B DATE: 9/16/02

TC: 007-431-11 L

SERIAL 19029

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 1-31-02. All work shall be completed on or before _____, 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 N/A 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 667' feet

Number of Lines 5 x 133'

Depth of Stone 12" inches

Distance from House >5' feet

Distance from Property Line >10' feet

Distance from Well >100' feet

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

NAME OF OWNER Tom Ryan

LOCATION OF PROPERTY 735 Davidson Run Lane

Comments: Five Bedroom House

5 lines x 133' x 3' x 10" Stone (667 TLF)

Type II Conventional System

Tony Mudd R.S.

Environmental Health Specialist

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

Paid on ck# 893560 ~ ACS

FEE: $200 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: 4/15/02 **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: _____ PERMIT NO: 48378

PARCEL NO: 007-431-11

JOB LOCATION ADDRESS: 735 Davidson Run Lane
PROPERTY OWNER: Tom Ryan
BUILDING CONTRACTOR: Tom Ryan
SUBDIVISION NAME: Davidson Farms
AUTHORIZATION ISSUED BY: Tommy L. Mullis R.S. DATE: 2/18/02
~~DEHNR~~ AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 48378, 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 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 AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: _____

OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITIONS OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

X Lou Ann Blair 2-26-02

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 04/15/02
Receipt #: 7508
Check / Auth #: CHARGE
Received By: CRAIGGY

Amount: 300.00
Tendered: 0.00
Returned: 0.00

Account Information

Account #: B93560
Contractor: MARQUEE BUILDERS LLC
Attn:
Address: 9815 SAM FURR RD
Address: SUITE J 91
City/State/Zip: HUNTERSVILLE, NC 28078

Item	Description	Permit#	Quantity	Unit Price	Total Price
0734	Auth for Waste Wtr Sys Constr 735 Davidson Run Lane		1	150.00	150.00
0703	Installation/Final Approval 735 Davidson Run Lane		1	150.00	150.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
300.00	1,719.78				

Permit Number 4837B

CONDITIONS OF IMPROVEMENT PERMIT

Tax Number 007-431-11

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	
Type Primary Wastewater System Type (circle one): 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: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1	
0.3 Long-term acceptance rate	600 Max gallons/day wastewater flow	2000 Absorption Area (sq ft)	9' Trench spacing (min. on centers)	
yes Serviced by private well	1500 Gallon septic tank	667' Total trench length (ft)	30" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)	
5 Bedrooms in residence	NA Gallon pump tank	12" Depth of stone		

Any surface waters present: NO Type: Minimum separation distance:

Site modifications required:

Additional Conditions: No horse grazing over the drainfield areas.
Install 5 lines x 135'x 3' x 12" stone

Repair Area System Type Type (circle one): 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: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1	
2000 Absorption Area (Sq ft) 667 Total Trench Length (Ft)	12" Depth of Stone Trench	9' Trench spacing (min. on centers)	30" Maximum Trench Depth	

For existing system, enter the year originally installed:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for th Job Location contained in this document. This approval is granted in accordance with the provisions of Laws and Rules For Sewage, Treatment and Disposal in effe 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 Departme
- This Improvement permit is transferable.

Tommy L. Medlin R.S. 2/18/02
DEHNR Authorized Agent Date

Jo Ann Blaz 2-26-02
Owner/Agent Signature Date

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

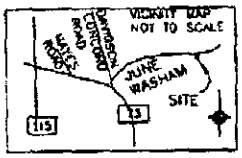
NORTH CAROLINA DEPARTMENT OF
ENVIRONMENTAL, HEALTH,
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

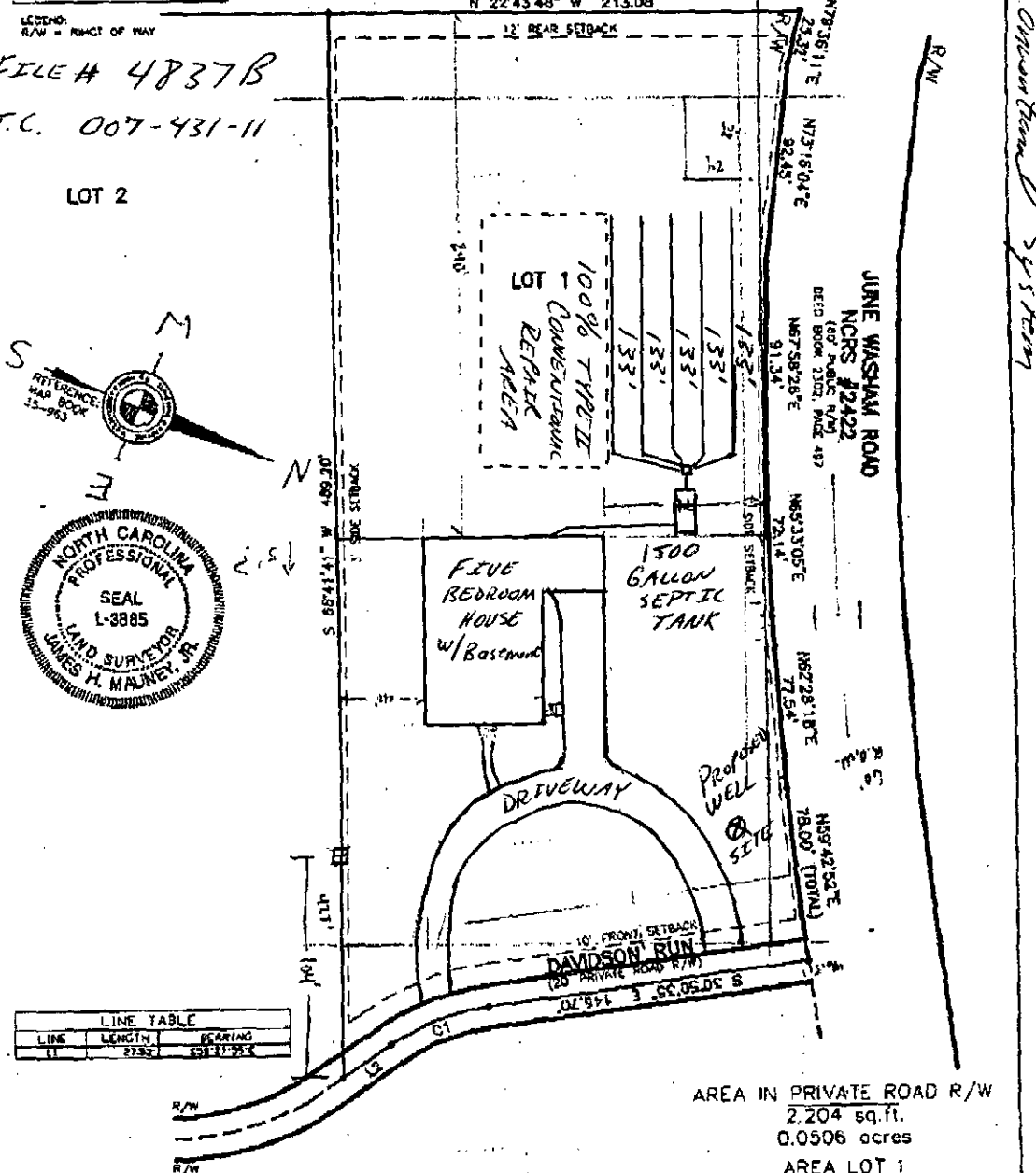
THIS IS TO CERTIFY THAT ON THE 8TH DAY OF FEBRUARY 20 02 THIS PLOT PLAN WAS MADE UNDER MY SUPERVISION OF THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE BOUNDARY LINES WERE PLOTTED FROM INFORMATION PROVIDED BY OTHERS, AND THE IMPROVEMENTS, UNLESS OTHERWISE INDICATED, ARE PROPOSED. NO ACTUAL FIELD SURVEY WAS PERFORMED IN THE PREPARATION OF THIS MAP. THIS IS A PRELIMINARY MAP AND NOT INTENDED TO BE USED FOR CONVEYANCES, RECORDATION, OR SALES.

SIGNED James H Mauney

J. S. PHARR & ASSOCIATES, REGISTERED SURVEYORS

DRAWN	REVISED	W.O.





LINE TABLE		
LINE	LENGTH	BEARING
L2	27.36'	S 38°37'55" E

CURVE TABLE				
CURVE	RADIUS	LENGTH	CHORD DIRECTION	CHORD
C1	1000.00'	48.71'	S 41°39'44" E	47.86'

AREA IN PRIVATE ROAD R/W
2,204 sq.ft.
0.0506 acres

AREA LOT 1
90,884 sq.ft.
2.0864 acres

PLOT PLAN OF:
LOT 1, DAVIDSON FARMS EQUESTERIAN SUBDIVISION
DEWERSE TOWNSHIP, MECKLENBURG COUNTY
NORTH CAROLINA

PREPARED FOR MARQUEE BUILDERS

SCALE 1" = 80'

MAP BOOK 35 PAGE 963

DEED BOOK PAGE

TAX ID 007-431-11

FLOOD CERTIFICATION
THIS IS TO CERTIFY THAT THE SUBJECT PROPERTY IS NOT LOCATED IN A SPECIAL FLOOD HAZARD AREA AS SHOWN ON MAPS PREPARED BY THE FEDERAL EMERGENCY MANAGEMENT AGENCY, FEDERAL INSURANCE ADMINISTRATION, DATED MARCH 2 1993
COMMUNITY #370158 PANNEL #0025B 55462.DWG

Comments:
→ System designed for 5 Bedroom house w/ playing.
→ Basement shall have ejector pump
→ 1500 gallon septic tank
→ Install 5 Trenches x 133' x 2' x 12" stone (667 LF)
→ Type II Conventional System
→ Conventional Repair Area
→ Drainfield area shall not be used for ~~three~~ horses.

Jon Ann Blanton 2-26-02

Jimmy P. Mickle R.S. 2/18/02

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Sheet: 1
Property ID: PO 007-431-11
Lot #: 1
File #: 4837B
Code: 1

ACS

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Tim & Kay Wahl, LLC
Applicant: Lou Ann Blankenship
Address: 14707 June Washam Road, Davidson, N. C. 28036
Date Evaluated: 2/14/02
Proposed Facility: Residence
Design Flow (.1949): 600gpd
Property Size: 2.08a
Location of Site: 735 Davidson Run Lane
Property Recorded:

Water Supply:	[ ] Public	[x] Individual	[x] Well	[ ] Spring	[ ] Other
Evaluation Method:	[x] Auger Boring		[x] Pit	[ ] Cut	
Type of Wastewater:	[x] Sewage		[ ] Industrial Process	[ ] Mixed	

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	SOIL MORPHOLOGY .1941 .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,5-10	0-4	GR/CL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48+	N/A	NONE	PS, IV .3G/DAY/FT^2
		4-43	SBK/C	FI/SEXP/S/P					
		43-48+	SBK/CL	FR/SEXP/SS/SP					
2	"	0-6	GR/CL	FR/SEXP/SS/SP	>50" TO SOIL WETNESS	50+	"	"	"
		6-37	SBK/C	FI/SEXP/S/P					
		37-50+	SBK/CL	FR/SEXP/SS/SP					
3	"	0-11	GR/CL	FR/SEXP/SS/SP	>51" TO SOIL WETNESS	51+	"	"	"
		11-38	SBK/C	FI/SEXP/S/P					
		38-51	SBK/CL	FR/SEXP/SS/SP					
4	"	0-3	GR/CL	FR/SEXP/SS/SP	>50" TO SOIL WETNESS	50+	"	"	"
		3-34	SBK/C	FI/SEXP/S/P					
		34-50+	SBK/CL	FR/SEXP/SS/SP					
5	"	0-6	GR/SCL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48+	"	"	"
		6-40	SBK/C	FI/SEXP/S/P					
		40-48+	GR/CL	FR/SEXP/SS/SP					
6	"	0-5	GR/SCL	FR/SEXP/SS/SP	>47" TO SOIL WETNESS	47	"	"	"
		5-20	SBK/C	FI/SEXP/S/P					
		20-47	SBK/CL	FR/SEXP/SS/SP					
7	"	0-5	GR/SCL	FR/SEXP/SS/SP	>50" TO SOIL WETNESS	50	"	"	"
		5-26	SBK/C	FI/SEXP/S/P					
		26-50	SBK/CL	FR/SEXP/SS/SP					

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

Other Factors (.1946): _____
Site Classification (.1948): PROVISIONALLY SUITABLE
Evaluated By: W. R. Marlin, LSS, 2/18/02, W. R. Marlin
Others Present: J. Michelone, L.Blankenship

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Sheet: 2
Property ID: PO 007-431-11
Lot #: 1
File #: 4837B
Code: 1

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Applicant:
Address: Date Evaluated:
Proposed Facility: Design Flow (.1949): Property Size:
Location of Site: Property Recorded:
Water Supply: [ ] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [ ] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [ ] 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
8	LS, 5-10	0-3	GR/SCL	FR/SEXP/SS/SP	>47" TO SOIL WETNESS	47	"	"	PS, IV .3G/DAY/FT^2
		3-22	SBK/C	FI/SEXP/S/P					
		22-47	WKSBK/CL	FR/SEXP/SS/SP					
9	"	0-4	GR/SCL	FR/SEXP/SS/SP	>52" TO SOIL WETNESS	52	"	"	"
		4-30	SBK/C	FI/SEXP/S/P					
		30-52	WKSBK/CL	FR/SEXP/SS/SP					

Description	Initial System	Repair System
Available Space (.1945)		
System Type(s)		
Site LTAR		

Other Factors (.1946): _____
Site Classification (.1948):
Evaluated By:
Others Present:

FILE #_____

COMMENTS_____

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR
R-RIDGE	I	S-SAND	1.2-0.8
S-SHOULDER SLOPE		LS-LOAMY SAND	
L-LINEAR SLOPE			
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6
N-NOSE SLOPE		L-LOAM	
H-HEAD SLOPE			
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM	
T-TERRACE		CL-CLAY LOAM	
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM	
	IV	SC-SANDY CLAY	0.4-0.1
		SIC-SILTY CLAY	
		O-ORGANIC	

CONSISTENCE MOIST	WET
VFR-VERY FRIABLE	NS-NON-STICKY
FR-FRIABLE	SS-SLIGHTLYSTICKY
FI-FIRM	S-STICKY
VFI-VERY FIRM	VS-VERY STICKY
EFI-EXTREMELY FIRM	NP-NON-PLASTIC
	SP-SLIGHTLYSTICKY
	P-PLASTIC
	VP-VERY PLASTIC

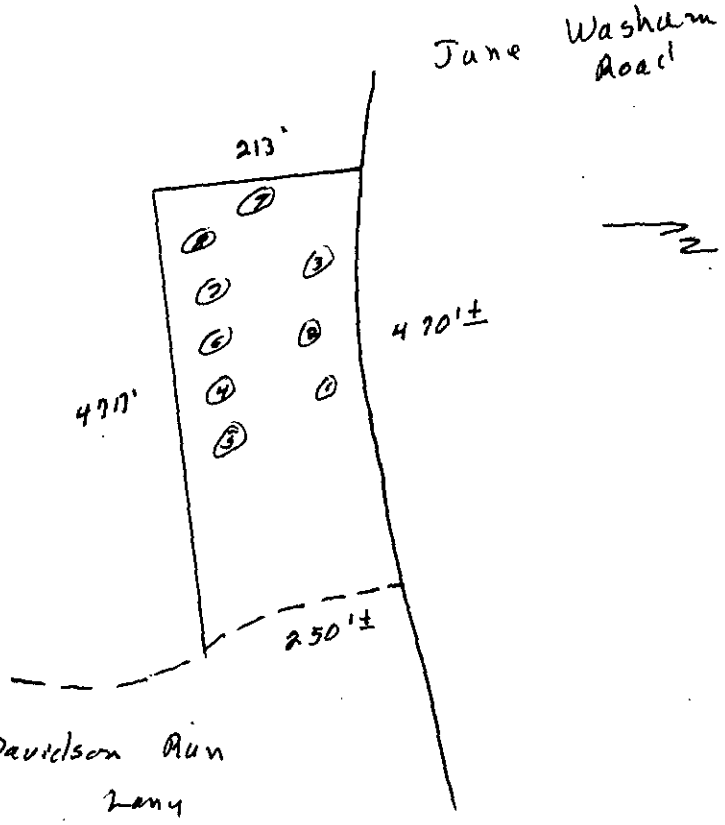
STRUCTURE

SG-SINGLE GRAIN
M-MASSIVE
CR-CRUMB
GR-GRANULAR
SBK-SUBANGULAR BLOCKY
ABK-ANGULAR BLOCKY
PL-PLATY
PR-PRISMATIC

MINERALOGY

SLIGHTLY EXPANSIVE

EXPANSIVE



Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

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		5-26	SBK/C	FI/SEXP/S/P					
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Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR	.3G/DAY/FT^2	.3G/DAY/FT^2

Other Factors (.1946): _____
Site Classification (.1948): PROVISIONALLY SUITABLE
Evaluated By: W. R. Marlin, LSS, 2/18/02. W. R. Marlin
Others Present: J. Michelone, L.Blankenship

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Sheet: 2
Property ID: PO 007-431-11
Lot #: 1
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Code: 1

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Applicant:

Address: Date Evaluated:

Proposed Facility: Design Flow (.1949): Property Size:

Location of Site: Property Recorded:

Water Supply: [ ] Public [ ] Individual [ ] Well [ ] Spring [ ] Other

Evaluation Method: [ ] Auger Boring [ ] Pit [ ] Cut

Type of Wastewater: [ ] Sewage [ ] Industrial Process [ ] Mixed

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Description	Initial System	Repair System
Available Space (.1945)		
System Type(s)		
Site LTAR		

Other Factors (.1946): _____

Site Classification (.1948):

Evaluated By:

Others Present:

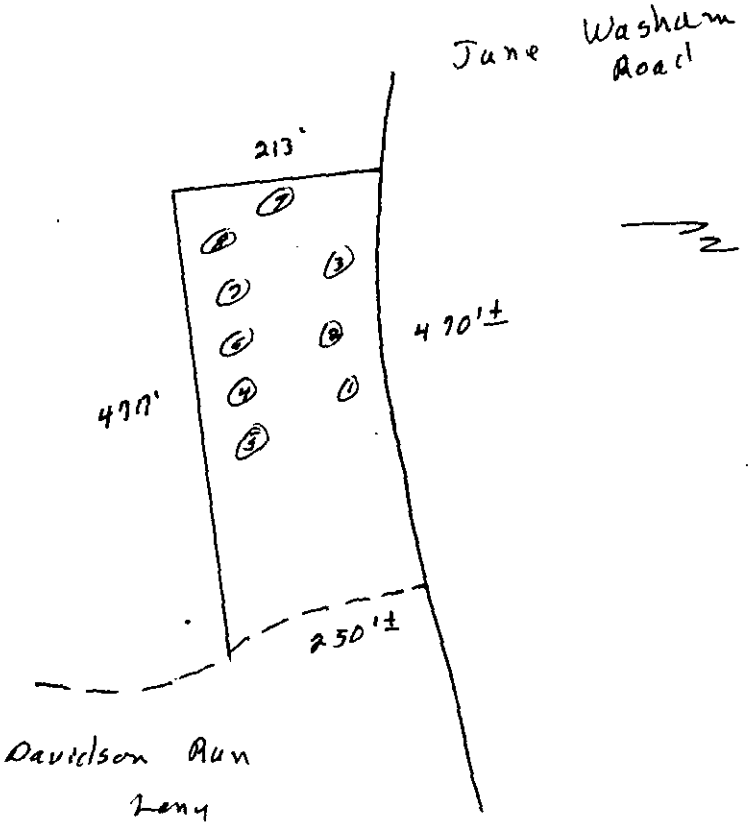
FILE #_____

COMMENTS_____

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR
R-RIDGE	I	S-SAND	1.2-0.8
S-SHOULDER SLOPE		LS-LOAMY SAND	
L-LINEAR SLOPE			
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6
N-NOSE SLOPE		L-LOAM	
H-HEAD SLOPE			
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM	
T-TERRACE		CL-CLAY LOAM	
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM	
	IV	SC-SANDY CLAY	0.4-0.1
		SIC-SILTY CLAY	
		O-ORGANIC	

CONSISTENCE	
MOIST	WET
VFR-VERY FRIABLE	NS-NON-STICKY
FR-FRIABLE	SS-SLIGHTLYSTICKY
FI-FIRM	S-STICKY
VFI-VERY FIRM	VS-VERY STICKY
EFI-EXTREMELY FIRM	NP-NON-PLASTIC
	SP-SLIGHTLYSTICKY
	P-PLASTIC
	VP-VERY PLASTIC

STRUCTURE	MINERALOGY
SG-SINGLE GRAIN	SLIGHTLY EXPANSIVE
M-MASSIVE	
CR-CRUMB	EXPANSIVE
GR-GRANULAR	
SBK-SUBANGULAR BLOCKY	
ABK-ANGULAR BLOCKY	
PL-PLATY	
PR-PRISMATIC	



FEE: 200
DATE: 1/31/02

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

I JCRT

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 #: 4837B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 00743111

STREET ADDRESS: 735 Davidson Run Lane

SUBDIVISION OR MOBILE HOME PARK NAME: Davidson Farms

LOT NUMBER: #1

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: 4500

NUMBER OF BEDROOMS: 5

NUMBER OF OCCUPANTS:

FOUNDATION FOR RESIDENCE:

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

TOWNSHIP (CHECK ONE):

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

CLOSING DATE_____

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)
__ MUNICIPAL (M)
__ PRIVATE WELL (P)
__ SHARED WELL (S)
__ OTHER 'SPRINGS' (O)

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: Wani, Tim & Kay / Wani LLC
(LAST) (FIRST) (MI)

ADDRESS: 14707 June Washam

CITY: Davidson STATE: NC ZIP: 28036

DAYTIME PHONE: ( ) —

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: Blankenship, Lou Ann
(LAST) (FIRST) (MI)

DAYTIME PHONE: (704) 634-9981

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 9-5-01

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: Lou Ann Blankenship DATE: 1-31-02

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

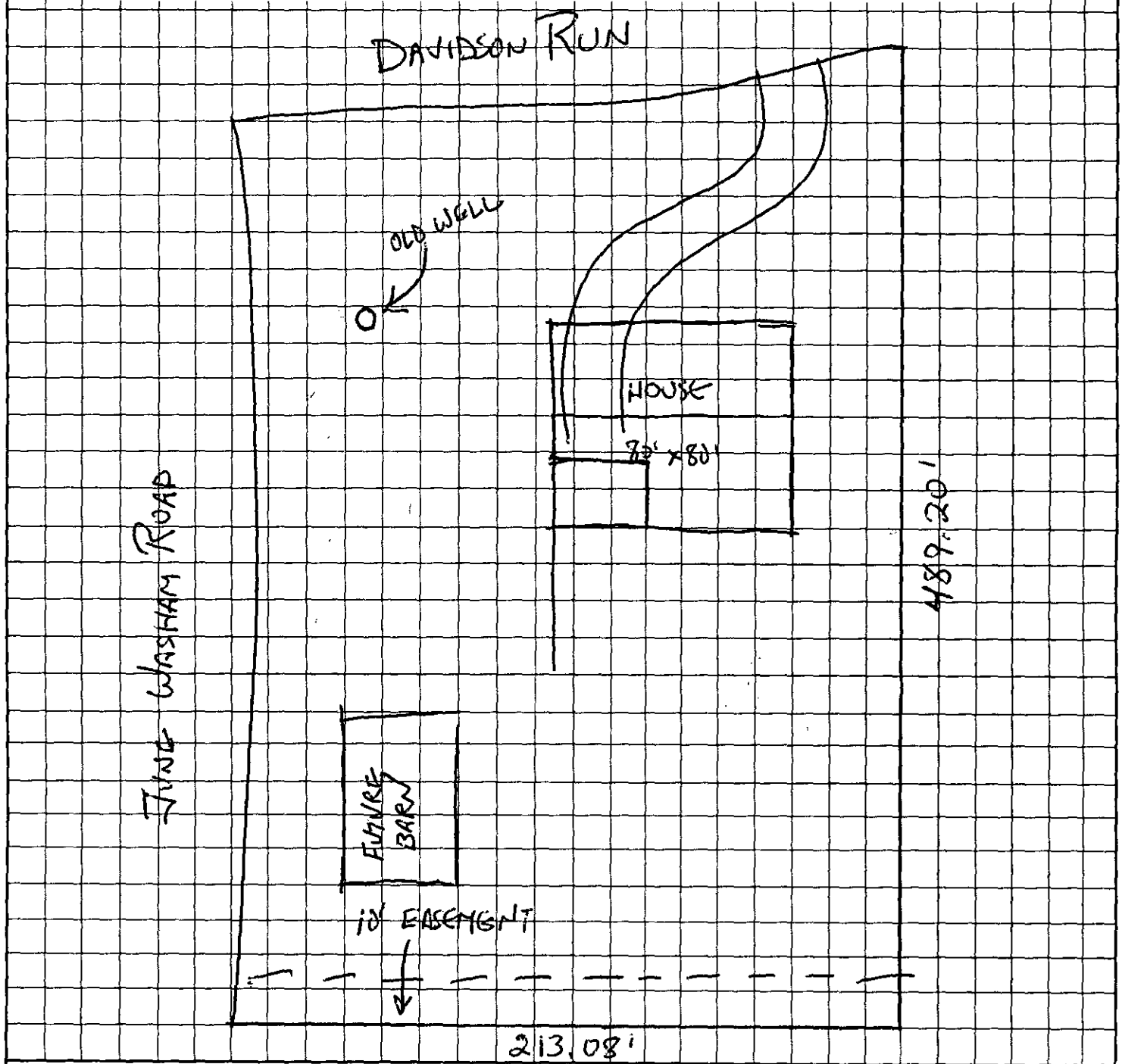
PROPOSED PLOT PLAN

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

FILE: 4837B

TC: 007-43J-11

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.



OWNER/AGENT SIGNATURE

DATE

APPROVAL DATE

White - Health Department's Copy

Canary - E.H.S. Copy

Pink - Owner's Copy