

16112 WEATHERLY WY

00145258

5/24/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 4856 A DATE: 4/24/90

TC: DD1·452·05 ☐ L ☑ CRT

SERIAL Nº 13340

Name of Owner Richard E. Killough Juris.: ?

Address of Property 16 1/2 Weatherly Way

Inspection Data:

Tank Material PCC

Total Length of Drainfield 288'

Number of Lines 5 @ (1) 32', (1) 40', (3) 67'

Cover Depth 6"-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

PLOT

Design: 1500 ST, 1500 PT, P/L mod 576 SFT, TEJ, 24"S, CECIL CTR# 84 Atkinson

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: TEJ PANEL, 288' LIN. INSTALLED ACCORDING TO PLANS SUBMITTED ON FILE. Liberty PUMP TH-A 3/4 hrs.

Tim Whittaker, R.S.
Environmentalist

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

T & J

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

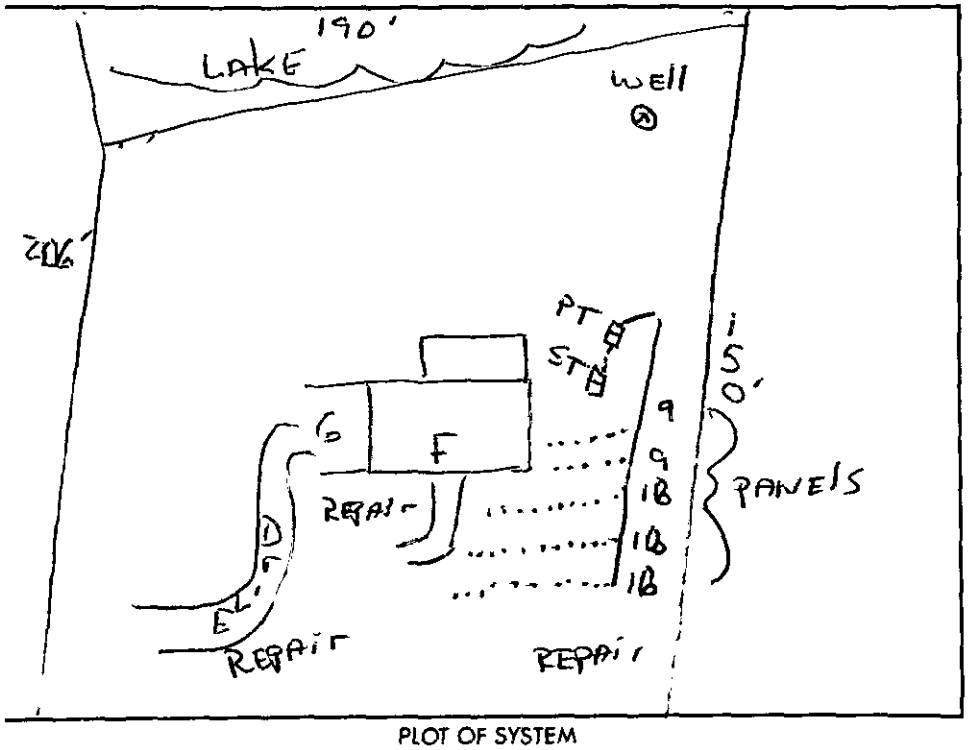
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 4856 A DATE: 4/20/90

TC: 001 452-05 ☐/L

SERIAL Nº 13175

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 _____. 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 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 1500 gallons

Liquid Capacity of Dosing Tank 1500 gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 2' feet

Total Line Length 288' feet

Number of Lines 5

Depth of ~~Stone~~ Sand 24" inches

Distance from House 10 feet

Distance from Property Line 10 feet

Distance from Well >50 feet

NAME OF OWNER Richard E. Killough

LOCATION OF PROPERTY 16112 Weatherly Way

Comments: 3" service reduced to 1¼" ball valve at each ditch, cap. end for future repair.* System to be installed according to approved plan submitted to M.C.E.H.D.

Division or Section Head

Tim Wkuttaba, 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

BOOK PAGE
6022 0655

330

PRESENTED FOR REGISTRATION
[redacted]
89 MAY -5 PM 4:42

ANNE A. POWERS
REGISTER OF DEEDS
MECKLENBURG CO., N.C.

FILE NO. 4856A

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

ACKNOWLEDGEMENT OF REQUEST BY OWNER FOR RECLASSIFICATION OF SITE FROM "UNSUITABLE" TO "PROVISIONALLY SUITABLE" UNDER 10 NCAC 10A .1948(c)

The undersigned, Richard E. Killough & Kay K. Killough

owner of property located at 16112 Weatherly Way

("the site") and described in an instrument recorded in Book 5992 at Page 249, Mecklenburg Public Registry,

hereby acknowledges that he applied to the Mecklenburg County Department of Environmental Health ("the Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 10 NCAC 10A .1934 et seq; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested pursuant to 10 NCAC 10A .1948(c) that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data and other information which indicate to the Department that the septic tank system proposed by the undersigned can reasonably be expected to function satisfactorily and thus that the findings specified in 10 NCAC 10A .1948(c)(1), (2), and (3) can be made; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

FEE 6.00
[illegible] 6.00
[illegible] 6.00
05/05/89

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is his responsibility and that neither the Department nor its officials, employees or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

The undersigned further agrees for his heirs and assigns that, in the event any septic tank system installed under authority of the aforesaid permit fails to perform adequately in any respect, he will take whatever measures are required to correct same; or if such is impossible he will discontinue use of said system immediately.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

This 11th day of April, 198 9.

R E Killough (SEAL)

Drawn By & Mail
Meck. County Dept. of Environmental

Kay K. Killough (SEAL)

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, Jack L Stanford, a Notary Public for said County and State, do hereby certify that R. E. Killough and Kay K. Killough personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 11th day of April, 1989.

Jack L Stanford
Notary Public

My Commission Expires: July 15, 1992

REAL ESTATE
BOOK PAGE

6022 0656

State of North Carolina, County of Mecklenburg

The foregoing certificate(s) of Jack L. Stanford

a Notar(y) (ies) Public (is) (are) certified to be correct.

This 5th day of May 19 89 .

Anne A. Powers, Register of Deeds

By: _____ Deputy

LARGE SYSTEM DATABASE

Project Data Sheet

Date : 04/20/89
File No. : 88-48 Record No. : 955
Project : Youngblood Residence
County : Mecklenburg
Location : Weatherly Way

Applicant : John F. Youngblood, III
Address : 16110 Weatherly Way, Huntersville, NC 28078
Phone :

Engineer :
Firm : 3-bedroom house
Address :
Phone :

Facilities : 3-bedroom house

System — :

Design Flow : 360 GPD Number of Subsystems : 1

Dates Received
Initial Plans : 08/30/88
Site Evaluation : / /
Last Revision : / /

Plans Reviewed
Acknowledgement : / /
Initial Review : 10/04/88
Provisionally App'd: / /
Last Revision Rev. : / /
Last Rev. Prov. Ap.: / /

Operation/Inspections
Operation Permit : / /
Installation Insp. : / /
Last Operation Insp. : / /

Operator :

Reviewed By : SB

Type of Facility : SF
Type of System : N-TJ
Status : IR

Comments : MECK CO File 4856A

System permit denied locally due to set back and other property restrictions. Never installed.

Mecklenburg County
Health Department

Basil G. Deltu, M.D., M.P.H.
Health Director

March 27, 1989

Richard E. Killough
401 Canyon Trail
Charlotte, NC 28226

Dear Mr. Killough:

RE: Property located at 16112 Weatherly Way
FILE: 4856A
PARCEL: 001-452-05

Receipt of your plans for a modified waste disposal system for the property referenced above is acknowledged.

Your plans for the modified system for the above property as submitted are approved with the following comments:

- An investigation of the site revealed that the area is insufficient for a conventional septic tank system that would be required to accommodate a five bedroom house.
- The well should be located 100 feet or no less than 50 feet away from any part of the sewage disposal system and repair area.
- Water saving plumbing devices and low flush or microflush toilets must be installed when constructing the residence.

Upon execution and recording with the Register of Deeds Office, Mecklenburg County, of the enclosed "Septic Tank Agreement Form", an Improvements Permit may be issued by this office.

Sincerely,

Sylvia D. Daniel, R.S.
Environmental Health Supervisor
Environmental Resources Division

SDD/ir

Enclosures - 3 Septic Tank Agreement Forms
Copy of Plans

#

1) An investigation of the Site revealed ~~the~~ that the area is insufficient for a conventional septic tank system that would be required to accomidate a Three bedroom House

well! Low Flush

Line	Length	Head Pressure	Hole Size	No. Panels	Flow Per Panel	Flow Per Line	* Note 1 hole Per Panel
A	24'	2'	5/32"	6	0.41 gpm	2.46 gpm	(Manifold & connects
B	24'	3'	5/32"	6	0.50 gpm	3.00 gpm	Same as Renfro
C	70'	2'	3/16"	17	0.59 gpm	10.03 gpm	Layout)
D	70'	3'	3/16"	17	0.72 gpm	12.24 gpm	
E	70'	3'	3/16"	17	0.72 gpm	12.24 gpm	

Tot Line length 258' Tot No. Panels 63 Tot Flow 39.97

Supply line friction $\frac{0.39 \text{ ft}}{100 \text{ ft}} \times 70 \text{ ft} = 0.27 \text{ ft}$

Elevation Head 14 ft

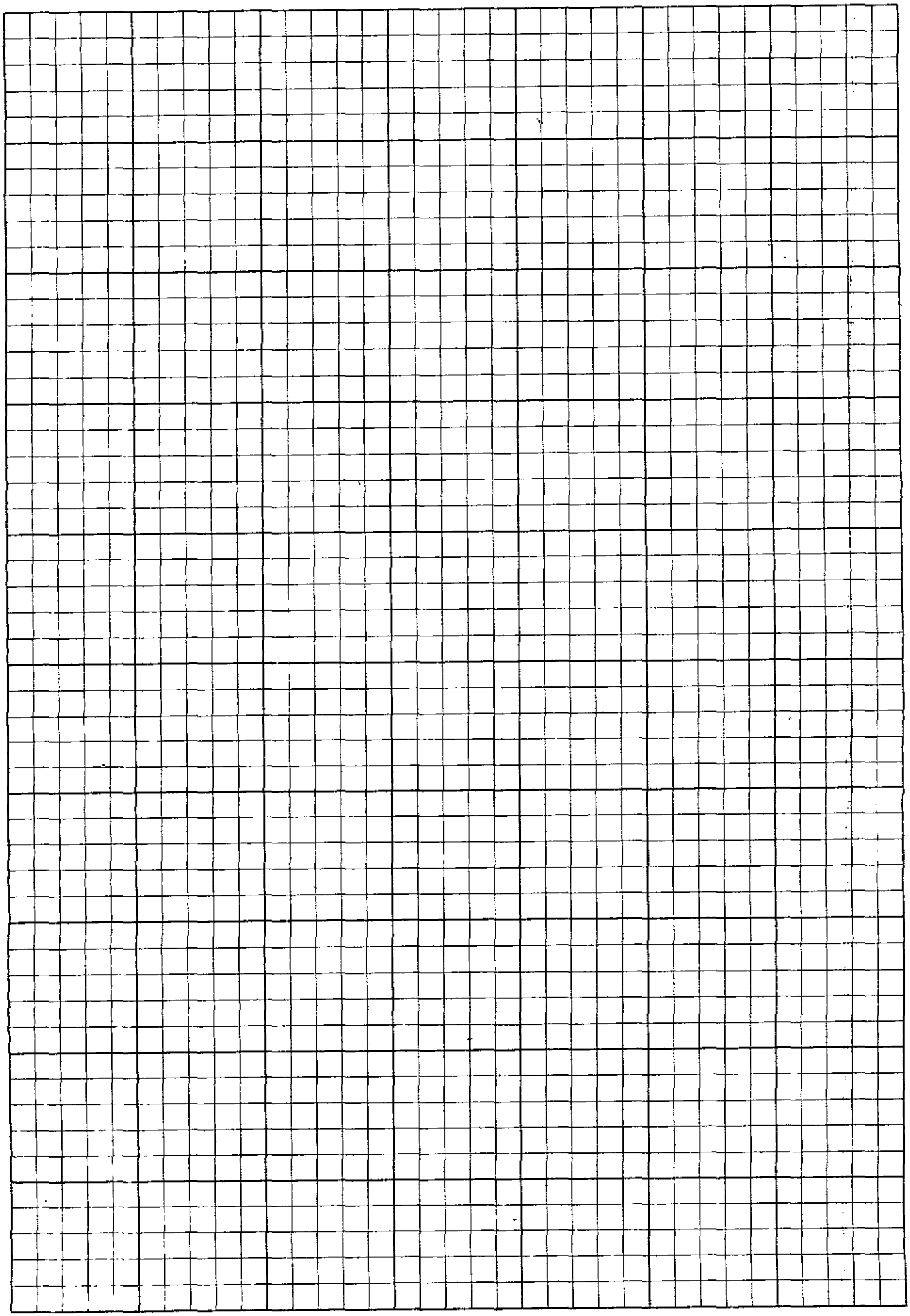
Total Head 14.27 ft @ 39.37 gpm

Pump Suggestion Liberty he 70 (see Manual)

Dose 2 gal per panel × 63 panels = 126 gal per dose

1500 gal tank = $\frac{1''}{25 \text{ gal}} \times 126 \text{ gal} \approx 5''$

Pump Float set ≈ 6"



APPLICATION FOR AN IMPROVEMENT PERMIT

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

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

(OFFICE USE ONLY)
FILE: 4856A
TC: _____
SERIAL: № 17864
☒ L ☐ CRT

JOB LOCATION

① ADDRESS: 16112 (STREET NO.) Weatherly Way (STREET) ② FILE: _____
③ JURISDICTION: _____ ④ TAX PARCEL NO.: 001-452-05
⑤ SUBDIVISION: _____ ⑥ LOT: 3 ⑦ BLOCK: _____

OWNER

⑧ NAME: Richard (FIRST) E. (MIDDLE) Killough (LAST)
⑨ MAILING ADDRESS: 401 Canyon Trail
⑩ CITY: Charlotte ⑪ STATE: N.C. ⑫ ZIP: _____
⑬ PHONE: (WORK) 523-2996 ⑭ (HOME) 366-3997

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
㉕ Type? _____
㉓ Maximum occupancy? 4
㉖ Maximum number of employees? _____
㉔ Basement? ☐ yes ☐ no
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: John F. Youngblood III
Date: March 1, 1989

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 36 months from the date of issuance.

Agreement Form on File

Environmentalist — Date
Jim Ennis — 3-9-89
Director or Authorized Section Head — Date

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 3/1/89

Name/Company John Youngblood

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Dup / Drill
4857

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
MAR 1 1989

CK # 0281
$150.00

Fee: $ 150 —

Completed by

Collected by

PROPOSED PLOT PLAN

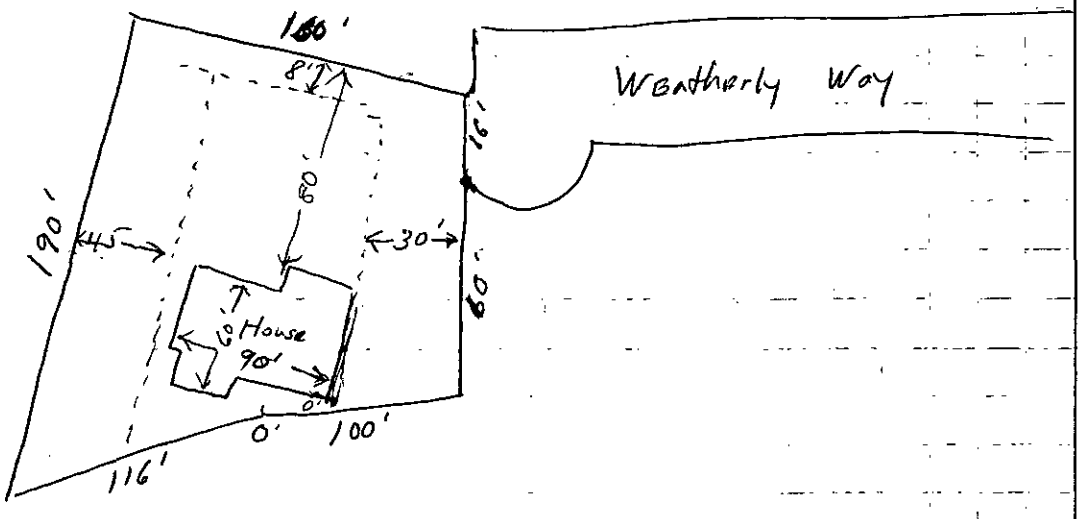
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

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

FILE: 4856A

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: John F. Goodlett III

Date: 3-1-89

Mecklenburg County
Health Department

Basil G. Delta, M.D., M.P.H.
Health Director

September 16th, 1988

John F. Youngblood, III
16110 Weatherly Way
Huntersville, NC 28078

RE: Property located at Weatherly Way
FILE: 4856A
PARCEL: 00145205

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 15501) 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 I may be of assistance, please do not hesitate to contact me.

Very truly yours,

Sylvia D. Daniel, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure

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

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 15501

File: 4856A Action 1

Parcel: 00145205 ☐ PC

Location: Weatherly Way

Subdivision:

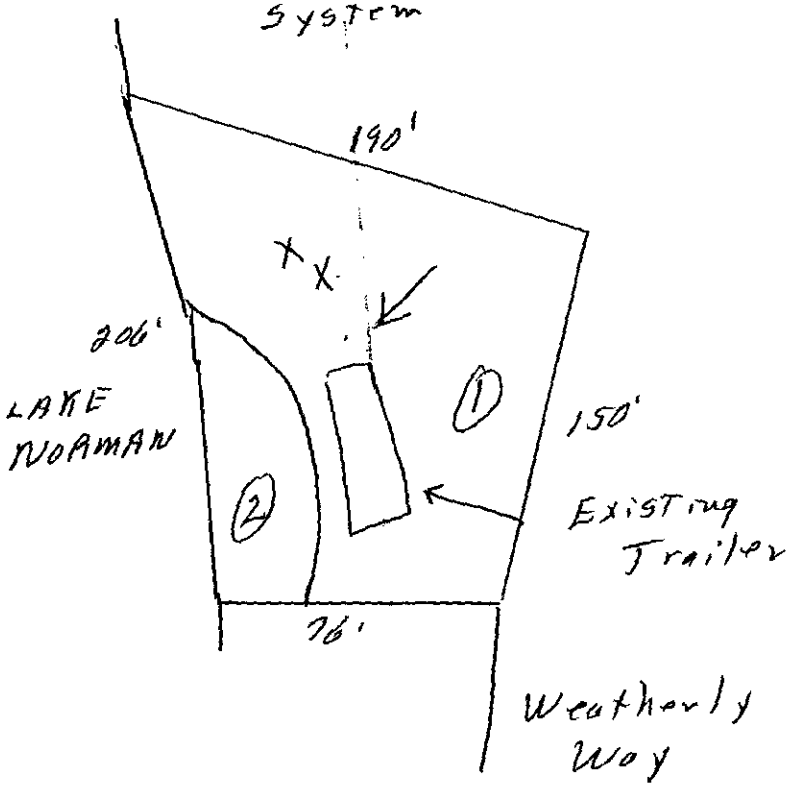
Lot: Block: Acres: .54

Owner: John F. Youngblood, III
Address: 16110 Weatherly Way
Huntersville, NC 28078

Comments: System may require lift pump - Underground water lines in lot -

Described by: William R. Marlin

Date: 9-16-98



*** 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 6-12 %	S PS (U) Depression	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U Clay	S PS U —	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U 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 limited	S PS U —	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS (U) some fill	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	IV A Cecil-Lloyd	Depression - Fill				
Area Classification	S (PS) U	S PS (U)	S PS U	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

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

(OFFICE USE ONLY)

PAID

FILE: 4856A

AUG 10 1988

TC: CK# 2071

☐ PC ☐ REPT $30.00 CW

JOB LOCATION

① ADDRESS: 16112 Wrathmoly Way

② SUBDIVISION: _____ ③ LOT: _____ ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: 001 PAGE NO.: 452 PARCEL NO.: P.O. 001-452-05

⑥ DEED REFERENCE: BOOK NO.: _____ PAGE NO.: _____

OWNER

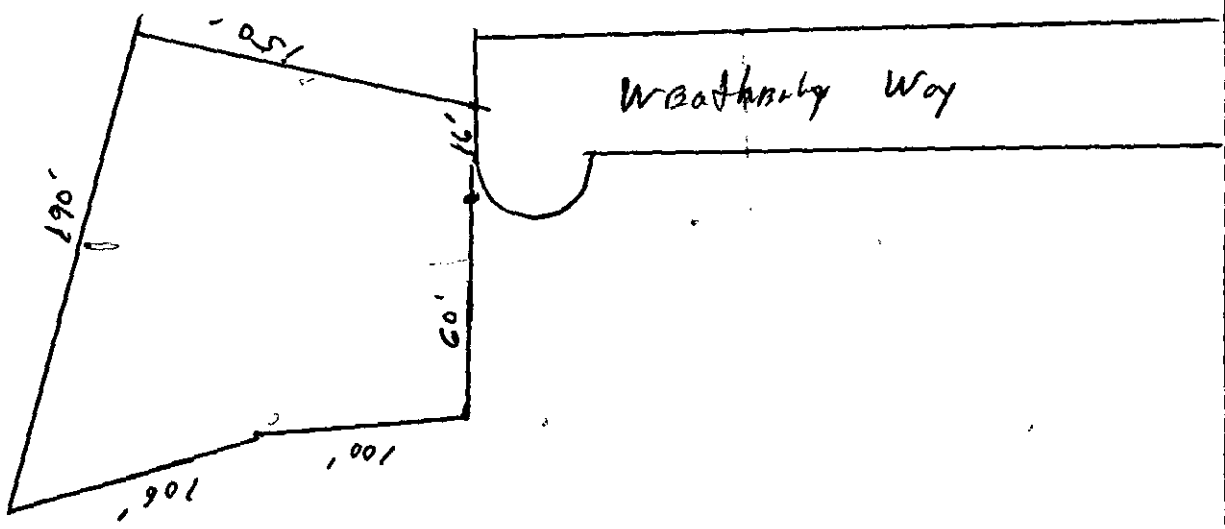
⑦ NAME: John (FIRST) F. (MIDDLE) Youngblood III (LAST)

⑧ MAILING ADDRESS: 16110 Wrathmoly Way

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

⑫ PHONE: (WORK) 596-9126 (HOME) 875-2031

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

Signed: John F. Youngblood III

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

Date: Aug. 10, 1988

Note: Call 596-9126 before going out. Property is fenced in. John Youngblood

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY

System to be installed according to approved plan.