

10208 STEELE CREEK RD

19919103

12/21/2007

duponbj

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

Mecklenburg County
Health Department

M E M O R A N D U M

TO: Susan Uzzell
Accountant II

FROM: Sylvia D. Daniel, R.S.
Program Chief

Date: September 17, 1996

Ref: 10208 Steele Creek Road/File 1481B

SUBJECT: Refund

(Mr./Mrs./Co.) Paula Smith originally paid $200.00

for Expansion/Alteraltion of existing system on June 25, 1996

A refund should be issued for $150.00 because

Alteraion permit denied, approval to use the existing system only,

the fee for that service is $50.00.

Please make check payable to: Paula Smith

6801 Starcrest Drive

Charlotte, NC 28210

1481B

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

4002

[ ] 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

Date: 7/29/96

PERSON FILING APPLICATION:

NAME: Smith (last) Paula (first) Shank (mi)

ADDRESS: 6801 Starcrest Dr. PHONE: (704) 554-9834

CITY: Charlotte STATE: NC ZIPCODE: 28210

PROPERTY OWNER:

NAME: Bailes (last) Curtis (first) William (mi)

ADDRESS: _____ PHONE: (__) _____

STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 199-191-03

STREET ADDRESS: 10208 Steele Creek Rd

5/17/96

Davidson [] 4 Pineville [] 6 Huntersville
Cornelius [] 5 Matthews [] 7 Mint Hill

LOT SIZE (in acres): 1.302 acres

ITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)

BER BEDROOMS: 2 NUMBER OCCUPANTS: 2

TEM CLASSIFICATION:

ER SUPPLY (check one):
[] Community (C) [] Shared Well (S)
[] Municipal (M) [] Other 'spring' (O)
[X] Private Well (P)

[] None
[] Other

Where is a refund for Paula Smith 364-1212 (w) 10208 Steele Creek Rd

199-191-03
File # 1481B

Refund Requested

2 5.D. 5/17/96 PM

ed above as the "JOB LOCATION" has read the
orizes agents of the MECKLENBURG COUNTY HEALTH

certifies that the Department has approved the
ranted in accordance with the provisions of Laws
the time of issuance of the permit and is subject

PERMIT - VALID 60 MONTHS FROM ISSUANCE
EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
NOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Huggins Bussey 7-29-96
Date

norized Section Head Date

WATER : 122791

Meck Utilities Dept. Approval granted for 2-bedroom mobile home exchange only.

Mecklenburg County
Health Department

November 15, 1996

Paula Shane Smith
6801 Starcrest Drive
Charlotte, NC 28210

Re: 10208 Steele Creek Road
File: 1481B
Parcel: 199-191-03

Dear Ms. Smith:

Receipt of the plans and specifications for an alteration of the existing ground absorption sewage disposal system for the above property is hereby acknowledged. Upon receipt of the information, a review was made of the material on file and a soil/site evaluation was conducted. The plan was then reviewed in conjunction with provisions of 15 NCAC 18A, .2900, "Laws and Rules for Sanitary Sewage Collection, Treatment and Disposal".

The results of the evaluation, indicate that the site is **UNSUITABLE** for alteration of the existing ground absorption sewage disposal system for the following reasons:

.1941 SOIL CHARACTERISTICS (MORPHOLOGY)
(3)(B) Expansive Clay Mineralogy - Soils which have either very firm or extremely firm moist soil consistence, or have either very sticky or very plastic wet soil consistence, are considered to have predominantly 2:1 clay minerals (including mixed mineralogy clays) and shall be considered UNSUITABLE as to clay mineralogy.

.1942 SOIL WETNESS CONDITIONS
(a) Soil wetness conditions as shallow as 6 inches from soil surface

.1943 SOIL DEPTH
(a) Soil depth - saprolite 6 inches - 24" deep from soil surface.

For these reasons a request for an alteration/expansion to the onsite sewage disposal system is hereby denied.

Other options for consideration are:

- Connection to the Charlotte Mecklenburg Utility Department municipal sewer line. You may contact Jeff Mills at 399-2551 for further information if you desire. Any further development of this property will require connection to municipal sewer.
- Based on .1962 "Applicability" which has a provision to utilize an existing septic system which has been in use prior to July 1, 1977. This provision is applicable only where the sewage flow and sewage characteristic are unchanged. The existing system on this lot is for a two bedroom residence only. You may wish to consider utilizing a two bedroom residence at this time. A new application to use the existing system for a two bedroom residence would need to be submitted and reviewed by this department.

If I may be of further assistance, please feel free to contact me at 336-5572.

Sincerely,

Toni Higgins-Bunney, R.S.
Individual Water and Wastewater Systems

THB:gc

FEE: 200.00 + 5.00 = 205.00

DATE: 5/25/96/925

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

I J 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 #: 14812

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 199-191-03

STREET ADDRESS: 10208 Steele Creek Road

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

TYPE OF BUILDING (CHECK ONE):

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

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 900 - 1000

NUMBER OF BEDROOMS: 3

NUMBER OF OCCUPANTS: 2

CLOSING DATE _____

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: Remove existing mobile home and replace with one zoned accordingly.

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

WATER SUPPLY (CHECK ONE):

___ COMMUNITY (C)
___ MUNICIPAL (M)
X 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 X YES ___ NO
DESIGNATED WETLANDS ___ YES ✓ NO

PROPERTY OWNER:

NAME: Bailes (LAST) Curtis (FIRST) W (MI)

ADDRESS: 10208 Steele Creek Road

CITY: Charlotte STATE: NC ZIP: 28210

DAYTIME PHONE: ( ) —

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: Smith (LAST) Paula (FIRST) Shane (MI)

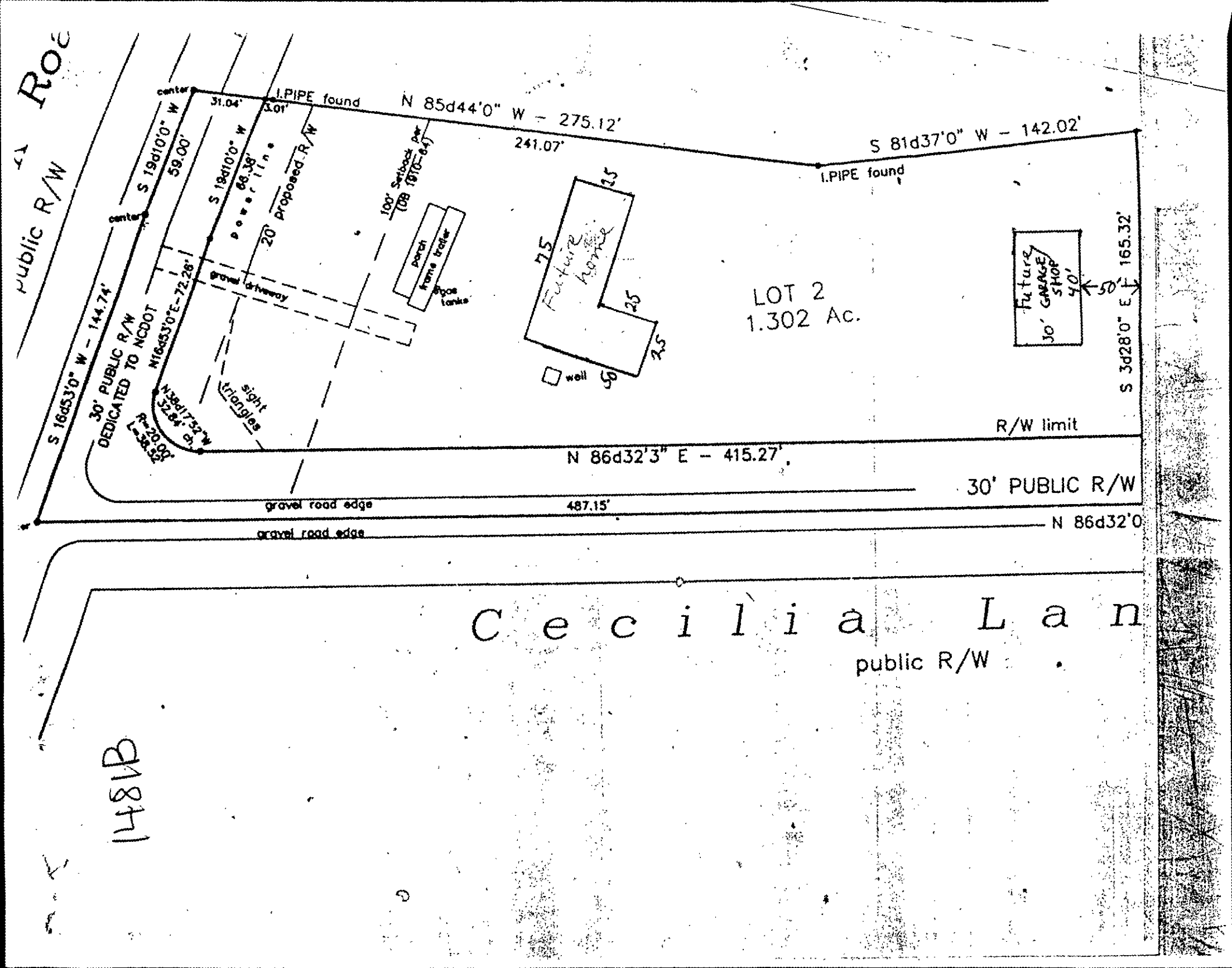
DAYTIME PHONE: (704 364 1212
554 9834

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: Paula Shane Smith DATE: 6/25/96

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


Public R/W
center
31.04'
I.PIPE found
N 85d44'0" W - 275.12'
241.07'
S 81d37'0" W - 142.02'
I.PIPE found
S 19d10'0" W
59.00'
S 19d10'0" W
68.38'
20' proposed R/W
100' Setback per DB 1810-647
center
gravel driveway
porch
frame trailer
propane tanks
Future home
LOT 2
1.302 Ac.
Future GARAGE/SHOP 40'
50'
S 3d28'0" E 165.32'
S 16d53'0" W - 144.74'
30' PUBLIC R/W DEDICATED TO NCDOT
N16d53'0"E-72.28'
N38d17'52"W 32.84'
R=20.00'
L=36.52'
sight triangles
R/W limit
N 86d32'3" E - 415.27'
30' PUBLIC R/W
gravel road edge
487.15'
N 86d32'0
gravel road edge
Cecilia Lan
public R/W
1481B

PROPOSED PLOT PLAN

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

FILE: 1481B.

TC: 199-191-03

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.

"SEE Attached"

OWNER/AGENT SIGNATURE

DATE

APPROVAL DATE _____

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

FEE: 200.00 + 52.00
DATE: 6/25/96/925

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

FILE #: 14813

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 199-191-03

STREET ADDRESS: 10208 Steele Creek Road

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

TYPE OF BUILDING (CHECK ONE):

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

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 900 - 1008

NUMBER OF BEDROOMS: 2 (3) NUMBER OF OCCUPANTS: 2

CLOSING DATE _____

FOUNDATION FOR RESIDENCE:

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

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WATER SUPPLY (CHECK ONE):

___ COMMUNITY (C)
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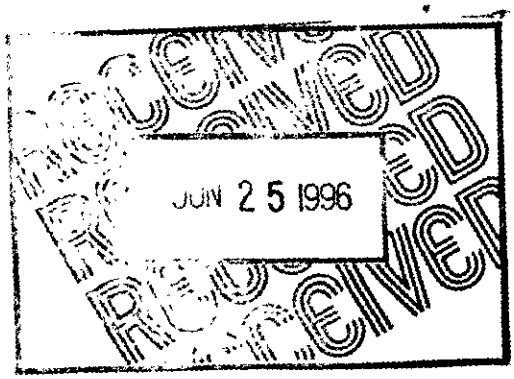
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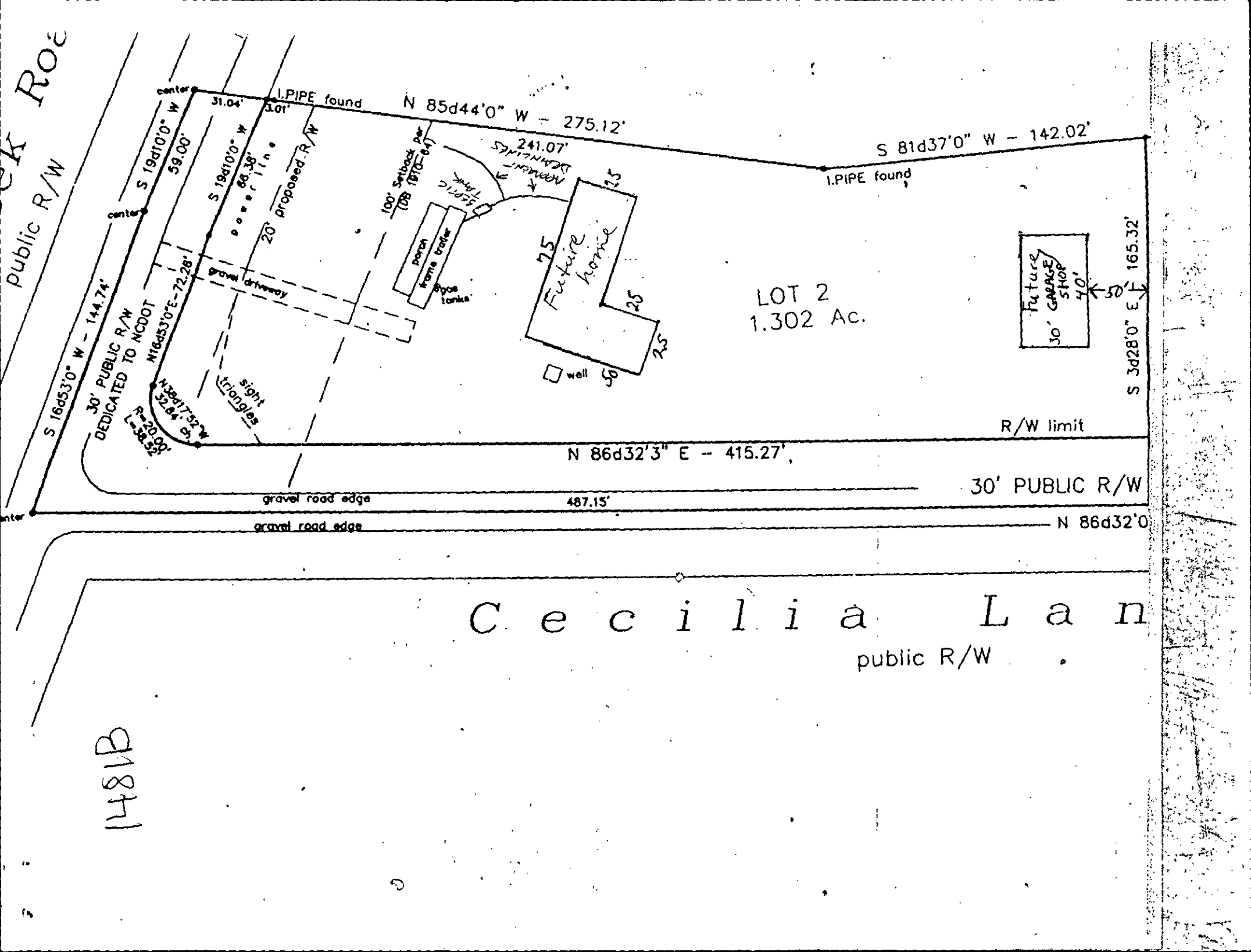
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c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102


JUN 25 1996


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100' Setback per DB 1810 0.47
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gas tanks
Future home
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25
well
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LOT 2
1.302 Ac.
Future GARAGE/SHOP 40' x 50'
S 3d28'0" E 165.32'
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