

9807 WITHERS RD

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Groundwater and Wastewater Services File Imaging Project
May 2007
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Mecklenburg County

Health Department

Betty S. Snow, R.N., M.A.
Health Director

M E M O R A N D U M

TO: Susan Uzzell
Accountant II

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

Date: June 13, 1994

Ref: File 6539/9807B Withers Rd

SUBJECT: Refund

(Mr./Mrs./Co.) Joseph Wall originally paid $150.00 for Porch, Rec Room & Bedroom additions on April 13, 1994 and April 14, 1994.

A refund should be issued for $100.00 because The bedroom addition was not done, there was not sufficient room for an alteration to the septic system.

Please make check payable to: Joseph Wall
9807 B Withers Road
Charlotte, NC 28278

6539 100 ☐ 6680A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

4/14/94 2856 4/13/94 #28 PD $100.00 CK # 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: 4/13/94

PERSON FILING APPLICATION:

NAME: Wall (last) Joseph (first) D

ADDRESS: 4146 Aycock Dr PHONE: (523-(mi) 1020) 527-3983

CITY: Charlotte STATE: N.C. ZIPCODE: 28209

PROPERTY OWNER:

NAME: Wall (last) Joseph (first) D.

ADDRESS: 9807-B Withers Rd. PHONE: (523-(mi) 1020 or 704) 588-3117 H

CITY: Charlotte STATE: N.C. ZIPCODE: 28278

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 199-211-11

STREET ADDRESS: 9802-B-W Withers Rd

ZONING:

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

LOT NUMBER: 38 LOT SIZE (in acres):

TYPE APPLICATION (check one):

☐ 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) SEE Letter 5/12/94
☐ SOIL TEST DEVELOPMENT (P)
☒ ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
Rec Room 5/18/94
☐ 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: 3 NUMBER OCCUPANTS: 3

SYSTEM CLASSIFICATION: 5/19/94

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: Joseph D. Wall Date: 4/13/94

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.

...Approved to Add Den Screen Porch. Many use existing System -

☐ IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
☐ MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
☒ ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Judy J. Klein R.S. 5/18/94
Environmentalist Date

Director or Authorized Section Head Date

WATER : 122791

PLOT PLAN FOR PERMIT APPLICATION
ONE/TWO FAMILY, MODULAR, MOBILE HOME OR ZONING USE

LOCATION

STREET # (N,S,E,W): 9807 | STREET NAME: Withers | (AV,RD,ST, etc): Rd.

SUITE/UNIT(S): B

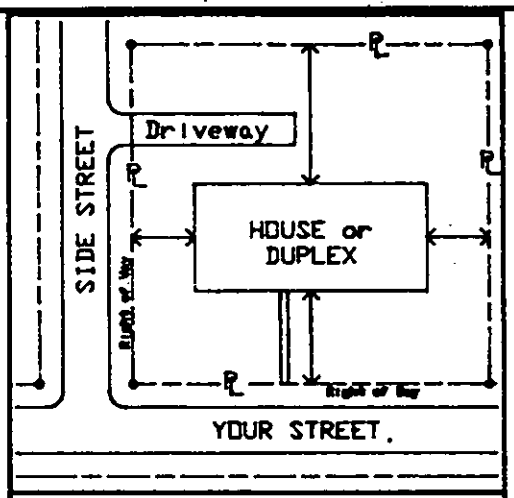
PERMIT #:

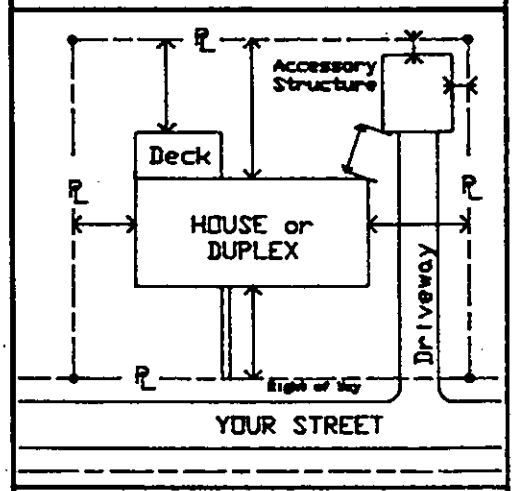
TAX JURISDICTION: *(Check One)*
- ☑ 0-Mecklenburg
- ☐ 1-Charlotte
- ☐ 2-Davidson
- ☐ 3-Cornelius
- ☐ 4-Pineville
- ☐ 5-Matthews
- ☐ 6-Huntersville
- ☐ 7-Mint Hill

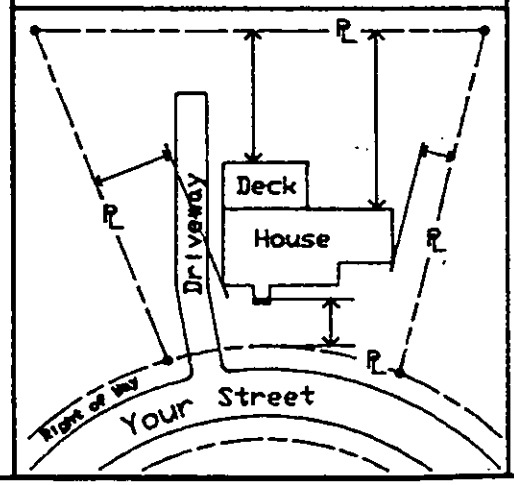
TAX PARCEL #:

JOB #:

EXAMPLES/PLOT PLAN





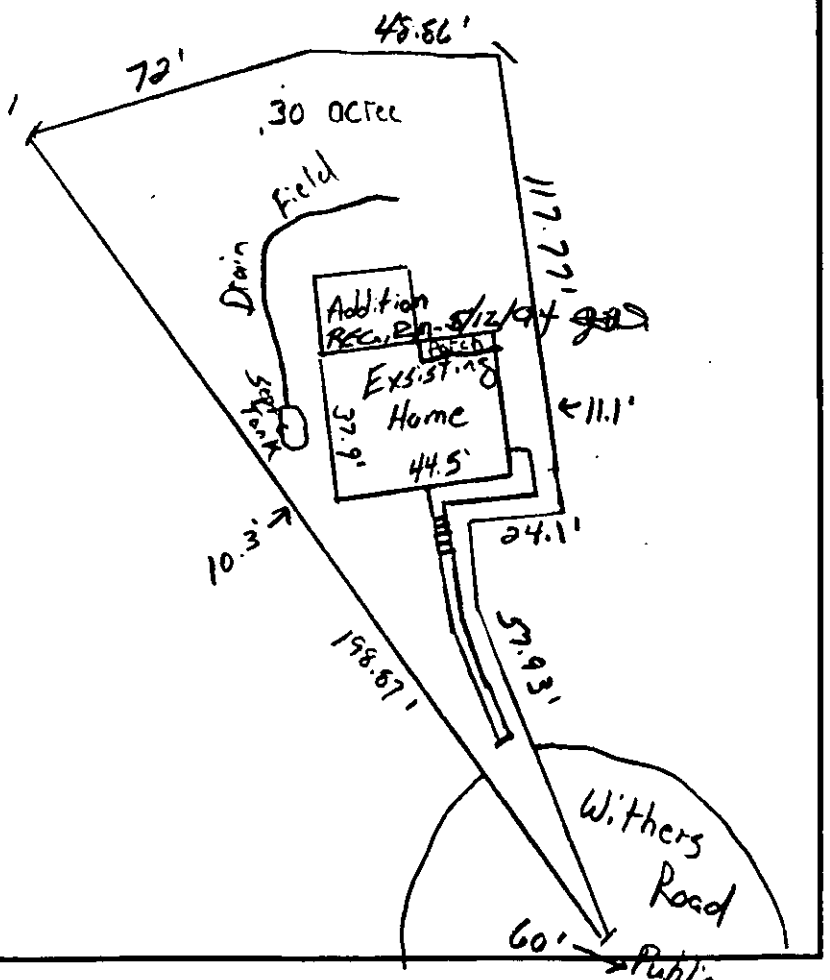


- INSTRUCTIONS -

In the space provided below, draw plot plan as neatly and accurately as possible, from survey if available.

1. Draw street(s) and right-of-way(s).
2. Draw property lines with dimensions.
3. Draw proposed and existing buildings showing any attached porch(es), deck(s), chimney(s), carport(s), or garage(s), etc...
4. Show distances of buildings from property lines or other structures.
5. Separate application and plot plan required for each building.

- PLOT PLAN -



ALL EXISTING AND PROPOSED BUILDING(S) ON LOT ARE SHOWN WITH MEASUREMENTS INDICATED

Joseph D Wall — 4/14/94 — Joseph D. Wall

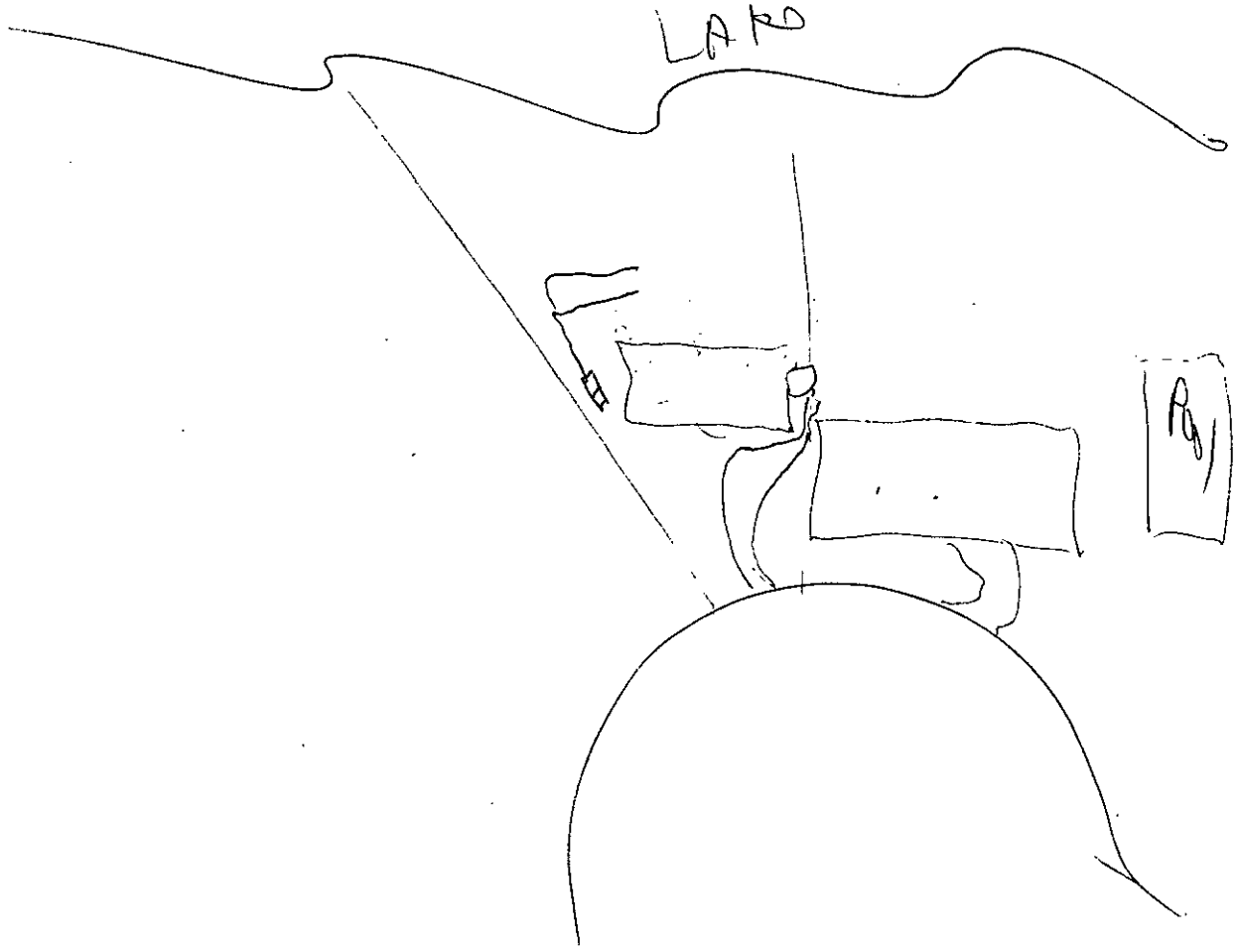
APPLICANT'S SIGNATURE | DATE | PRINT APPLICANT'S NAME

APPROVED BY

CHARLOTTE-MECKLENBURG BUILDING STANDARDS DEPARTMENT
P.O. BOX 31097 • CHARLOTTE, NC 28231-1097 • 704/336-2831

B-83

ORIGINAL


LAKE