

6753 TIMAHOE LN

11331105

1/4/2008

duponbj

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

APPLICATION FOR A PERMIT FOR RESIDENTIAL SITE INDIVIDUAL ON-SITE WASTEWATER SYSTEMS PROGRAM

ACS

[ ] CRT

[ ] NEW SYSTEM [ ] EXPANSION/ALTERATION OF EXISTING SYSTEM [X] REPAIR OF EXISTING SYSTEM

NORTH CAROLINA
DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ONSITE WASTEWATER SECTION

ATTN: J. M Nicholson

TYPE OF BUILDING (CHECK ONE):

[X] SINGLE FAMILY RESIDENCE (INCLUDING MANUFACTURED HOMES)
[ ] MULTIPLE DWELLING (MORE THAN ONE DWELLING UNDER ONE ROOF)
[ ] MOBILE HOME (SINGLE WIDE)
[ ] OTHER (SPECIFY)

HEATED SQUARE FOOTAGE: 2800

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 2

[ ] WITHOUT BASEMENT
SLAB
CRAWLSPACE
[X] WITH BASEMENT
PLUMBING
WITH BASEMENT NO PLUMBING

FILE #: 4128

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 113-311-05

STREET ADDRESS: 6253 TIMBERLOCH LN

SUBDIVISION OR MOBILE HOME PARK NAME: 1977

LOT NUMBER: 4

TOWNSHIP (CHECK ONE):

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

ZONING:

PLEASE DESCRIBE THE EXISTING SYSTEM AND/OR THE PROPOSED BUILDING ADDITION:

WILL BE BUSINESS IN THE RESIDENCE? [X] YES [ ] NO TYPE:

[ ] COMMUNITY (C)
[ ] SHARED WELL (S)
[ ] MUNICIPAL (M)
[ ] OTHER SPRINGS (O)
[X] PRIVATE (P)

ARE ANY OF THE FOLLOWING LOCATED ON THE PROPERTY? PLEASE SHOW LOCATION ON PLAT:

[ ] YES [X] NO WELLS
[ ] YES [X] NO SURFACE WATER SOURCES
[ ] YES [X] NO EASEMENTS OR RIGHT OF WAYS
[ ] YES [X] NO SPRINGS OR WATER COURSES
[ ] YES [X] NO DESIGNATED WETLANDS

OWNER:

NAME: [illegible] RICHARD S
(LAST) (FIRST) (M.I.)

ADDRESS: 6253 Timberloch Ln

CITY: Charlotte STATE: NC ZIP: 28269

DAYTIME PHONE: 704-[illegible]

LEGAL AGENT FOR PROPERTY OWNER, OR APPLICANT:

NAME:
(LAST) (FIRST) (M.I.)

DAYTIME PHONE ( )

ON WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED OF RECORD? 8/1/98

An improvement permit shall be issued only after evaluation of site plans or the intended use change of the information submitted on this application is determined unchanged. The undersigned owner or legal agent for the owner of the property described above [illegible] that he has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the Mecklenburg County Health Department to enter upon the property for the purpose of processing this request.

SIGNED: [signature] DATE: 11/16/00

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

[illegible]

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 4171B DATE: 1-7-00

TC: 113-31-05 ☒ L ☐ CRT

SERIAL Nº 18249

Name of Owner Dick Patten Juris.: _____

Address of Property 6753 Timahoe Lane

Inspection Data:

Tank Material Existing (PCC)

Total Length of Drainfield 200'

Number of Lines 3 @ 67'

Cover Depth 18"

Water Supply Source well

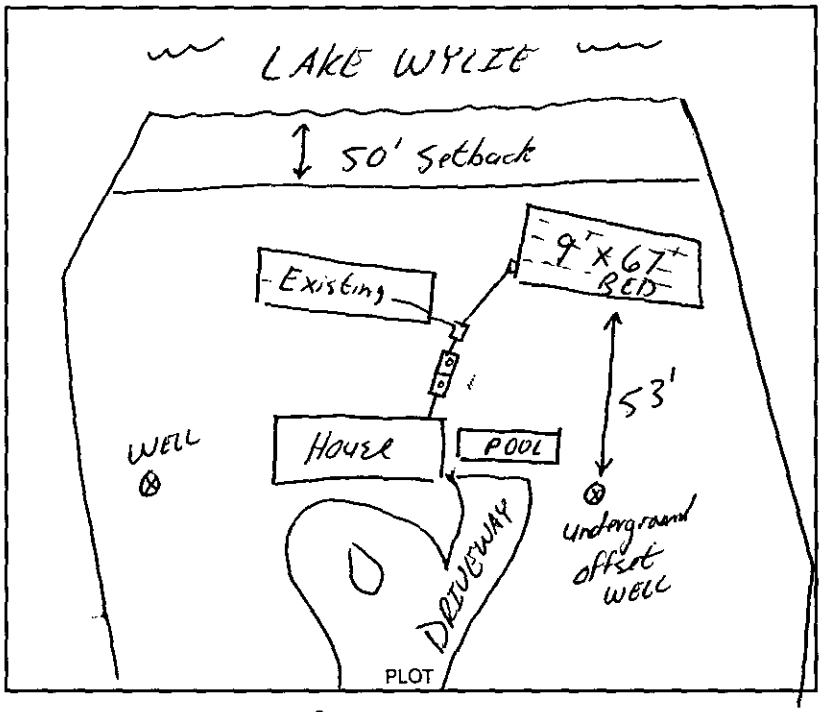
Distance to Water Source 53'

Excavation Inspected 1-7-00

Tank(s) Inspected existing

Wash Line Inspected NA

High Water Alarm Inspected NA



Design 2000, Repair, 600 SFR, Con, Cecil CTR# Autrey

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 15A 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 15A 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: 9 x 67' x 18" Stone Bed installed

Use existing system in addition to new system

Type II conventional system

Jeremy P. Nicholson
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

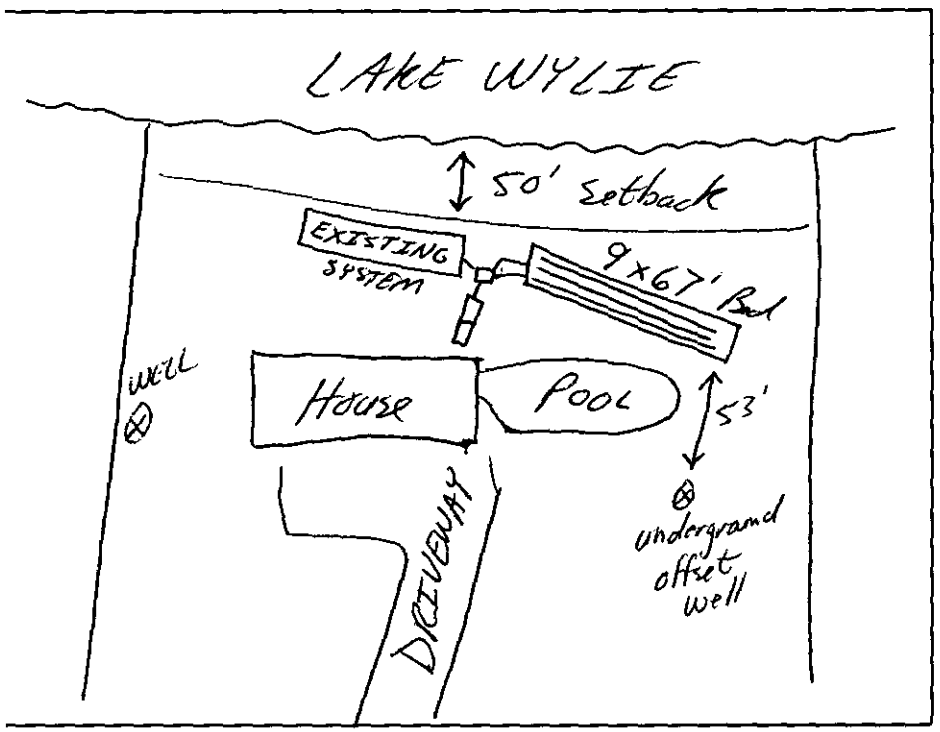
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 4171B DATE: 1-7-00

TC: 113-311-05 XL

SERIAL Nº 18297

Permission is hereby given to _____ Install or Construct, ___X___ 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 1-7-00. All work shall be completed on or before 2-7-00, 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 Existing gallons

Liquid Capacity of Dosing Tank NA gallons

Tank Construction P.C.C.

Trench Depth 36"

Absorption and/or Nitrification Lines:

Trench Width 9' Bed feet

Trench Walls Scored and Porous Yes

Total Line Length 200' feet

Number of Lines 3 x 67'

Depth of Stone 18" 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 Dick Patten

LOCATION OF PROPERTY 6753 Timahoe Lane

Comments: Install 3 lins x 67' x 18" stone (9x67' Bed)
Type II conventional system
keep 50' from Lake High Water Mark

Jeremy P. Nicholson
Environmental Health Specialist

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