

4711 SHEA LN

13528412

6/3/08

marliwr

Groundwater and Wastewater Services File Imaging Project
May 2007
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THOR

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

8171

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:

PERSON FILING APPLICATION:
NAME: BROKAW (last) KEITH (first) (mi)
ADDRESS: _____ PHONE: (__) 516-0718
CITY: STATE: ZIPCODE:

PROPERTY OWNER:
NAME: ~~RICHARD~~ BURKE (last) RICHARD (first) (mi)
ADDRESS: 4711 SHEA LN PHONE: (__) _____
CITY: MINT HILL STATE: NC ZIPCODE:

Lot 5 Block A

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 13528412
STREET ADDRESS: 4711 SHEA LN
ZONING: MINT HILL R

Township (check one):
[] 0 Mecklenburg County [] 2 Davidson [] 4 Pineville [] 6 Huntersville
[] 1 Charlotte [] 3 Cornelius [] 5 Matthews [X] 7 Mint Hill

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: LOT SIZE (in acres):

TYPE APPLICATION (check one):

[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (N)
[X] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X) [redacted] FAMILY RM [redacted] screen porch

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: 8

SYSTEM CLASSIFICATION:

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)
[X] 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: Keith Brokaw Date: 9/15/97

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.

...Approval granted for a Family Room only screen porch plan eliminated

Use existing system

[] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[X] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Philo S. Walker R.S. 10/8/97
Environmentalist Date

Director or Authorized Section Head Date

11/11/97 Backhoe was obtained on property to determine exact location of drainfield. Area of 5' separation located between the drainfield and the screen porch addition. Approval granted for screen porch 11/11/97. Use existing system

WATER : 122791

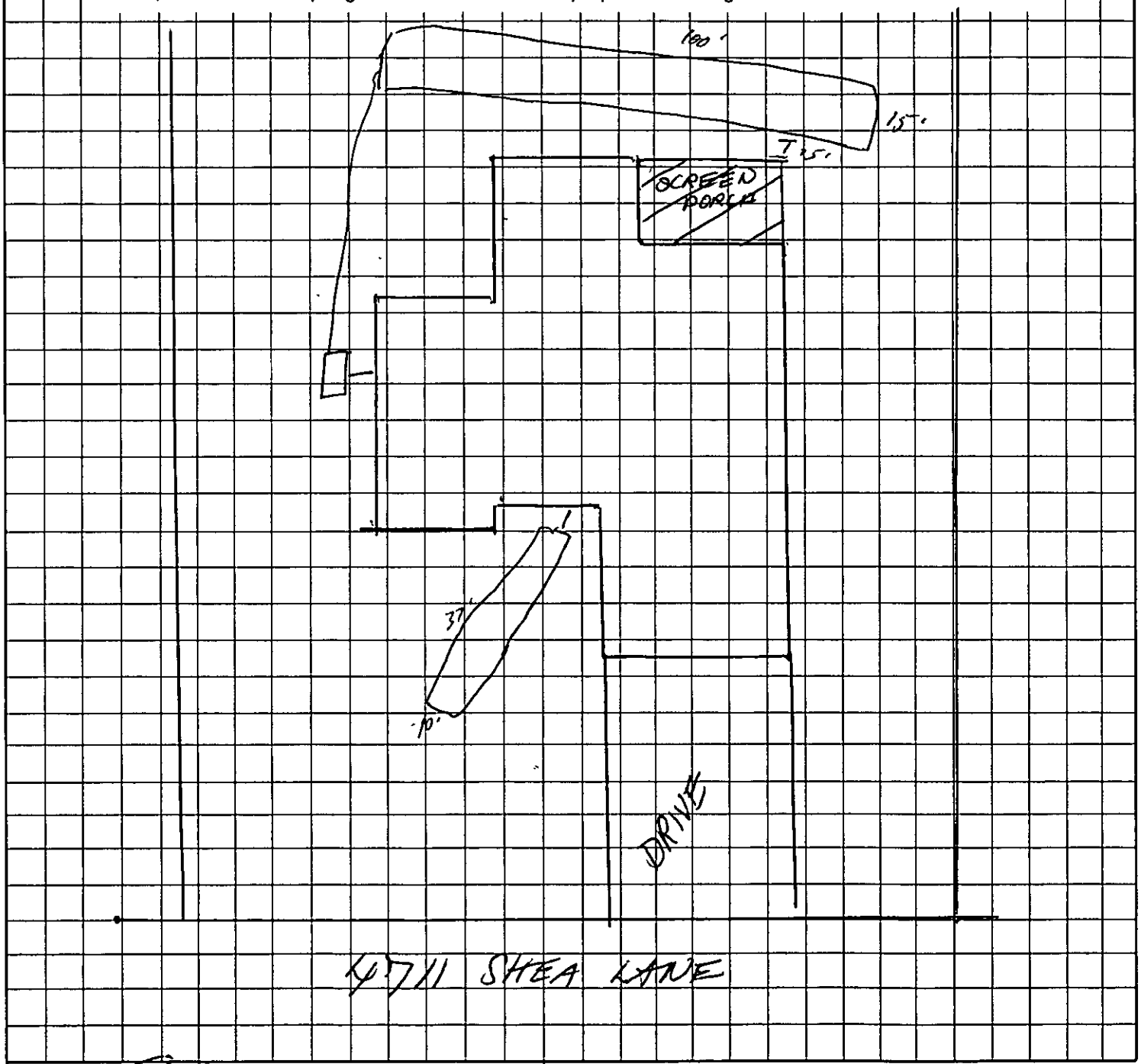
PROPOSED PLOT PLAN

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

FILE: 8171

TC: 135-264-12

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 11/11/97

APPROVAL DATE DJW 11/11/97

White - Health Department's Copy

Canary - E.H.S. Copy

Pink - Owner's Copy

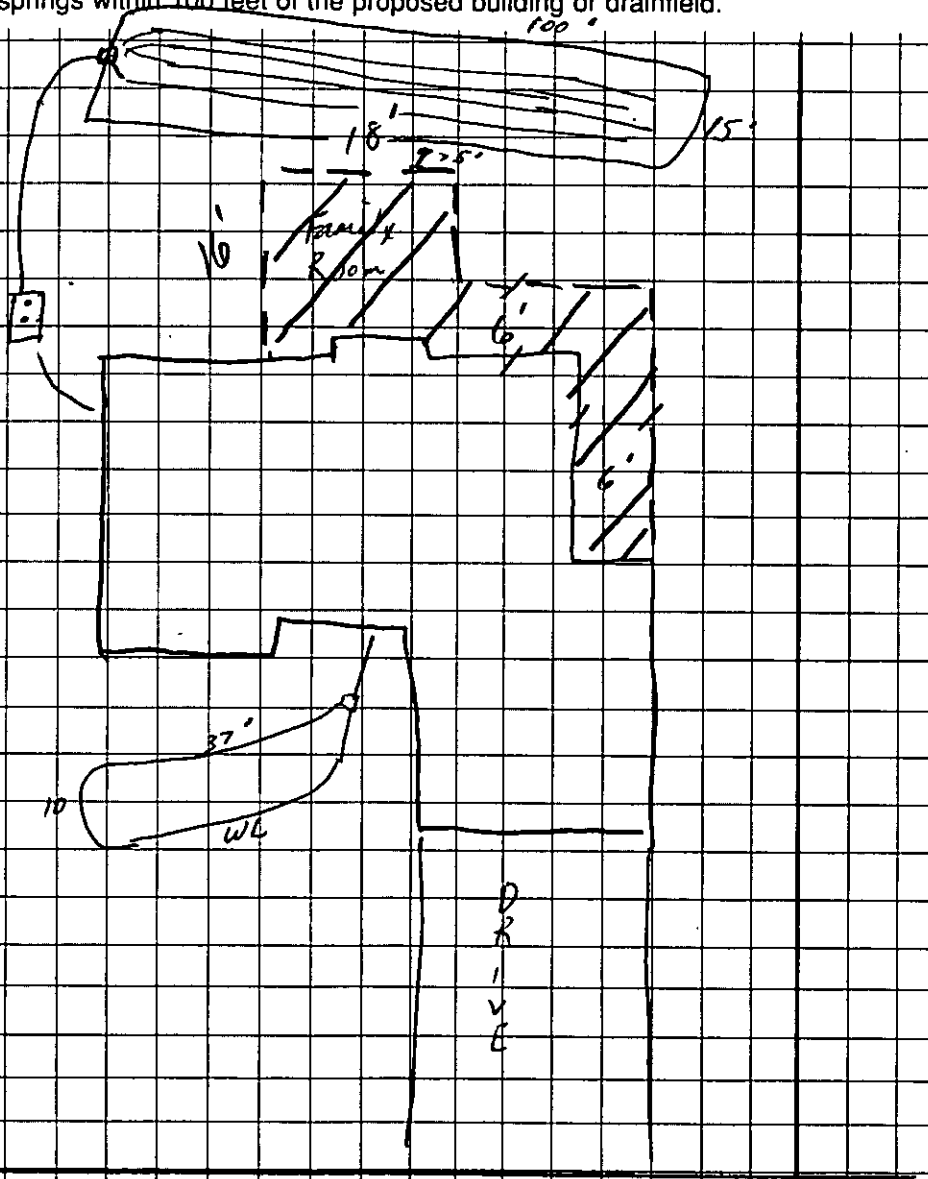
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ENVIRONMENTAL HEALTH DIVISION
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PHONE (704) 336-5102

FILE: 8171

TC: 135 284 12

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4711 SHEA LANE

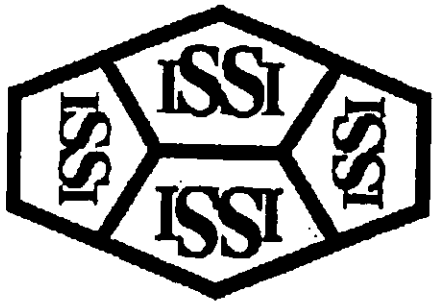
OWNER/AGENT SIGNATURE Kevin D Brobaw

DATE 10/8/97

APPROVAL DATE 10/8/97

Approval granted for Family Room only. Screen porch eliminated from plan because of drainfield encroachment.

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



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ISSI Operations Center Staff

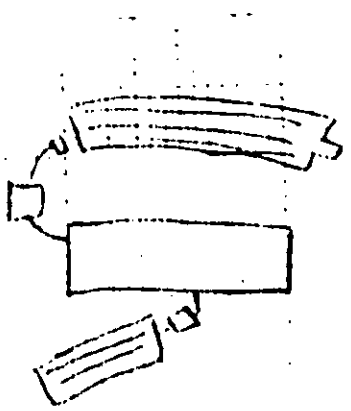
Serial No. [illegible] ICAP [illegible]

Date Issued 9/16/76

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT
Individual Septic Tank System with Subsurface, Soil Absorption Effluent Discharge

Permission [illegible] Granted [illegible] After [illegible]
water [illegible]
[illegible]
dated [illegible]
placed [illegible]
date the [illegible]

10/16/76



600 ISC
150.00
1500
600 ISC
60 - 4
10
10

Shea Homes

NAME OF [illegible] Hillenburg & Waddell Corp

LOCATION [illegible] 4211 Shea Lane

[illegible]
[illegible]
rendered [illegible]

Comments 15' x 100' x 12"
10' x 30' x 12"

[illegible]

[illegible]
[illegible]
[illegible]

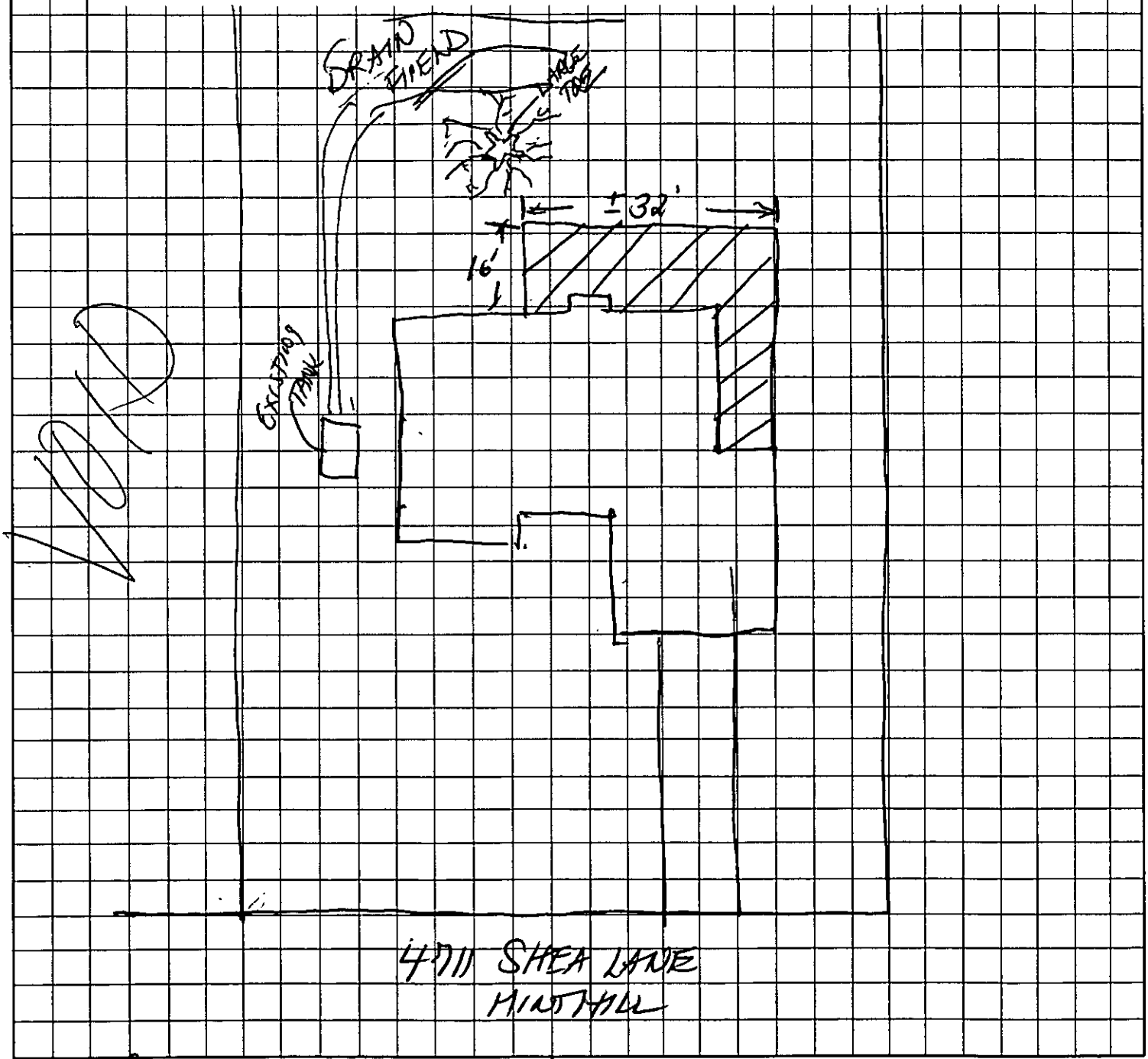
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HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 8171

TC: 135-284-12

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 Robert D Schaer

DATE 9/15/97

APPROVAL DATE NO approval
9/23/97 DENIED
Void

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

Mecklenburg County
Health Department

September 25, 1997

Richard C. Burke
4711 Shea Lane
Charlotte, NC 28227

RE: 4711 Shea Lane
FILE: 8171
PARCEL: 135-284-12

Dear Mr. Burke:

Receipt of the application for a proposed family room and screened porch addition to your residence at the above referenced location is hereby acknowledged.

Upon receipt of the application, a review was made of the material on file and site evaluations were conducted on September 17, 1997, September 19, 1997, and September 23, 1997. You were present during these visits and your builder, Keith Brokaw was present on September 23, 1997. The plan was then reviewed in conjunction with the provision of 15 NCAC 18A.1900 "Laws and Rules for Sewage Treatment and Disposal Systems". My comments follow:

> The proposed family room and screened porch appear to be at least within five feet of the nitrification field of your sewage disposal system. This was determined by probing the area. 15A NCAC 18A.1950, location of Sanitary Sewage Systems (a)(10) states: "Every sanitary sewage treatment and disposal system shall be located at least the minimum horizontal distance from any building foundation, 5 feet.

For this reason, the request as submitted is disapproved. I will gladly accept for review a revised plan with the proposed family room and screened porch addition meeting the required setbacks.

You may want to confirm with the Charlotte Mecklenburg Utility Department (CMUD) at 399-2221 as to whether municipal sewer will become available. If you were to tap your residence onto a municipal sewer line and properly abandon your septic tank system, this office would no longer be involved with the location of the proposed addition.

If you have any questions, please feel free to contact me at 336-5573.

Sincerely,

Lisa B. Mialik

Lisa B. Mialik, R. S.
Individual Water and Wastewater Systems

LBM/db

cc: Keith Brokaw, Builder