


5100 BRITE AND EARLEY RD

11307103

5/9/2007

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: 3693 A DATE: 7/18/91

TC: 13-07103 ☐ L ☐ CRT

SERIAL № 13844

Name of Owner Parker, Ray Juris.:

Address of Property 5100 Brite & Farby

**Inspection Data:**

Tank Material PCC

Total Length of Drainfield 280'

Number of Lines 4 @ 70'

Cover Depth 24"

Water Supply Source Well

Distance to Water Source > 50'

Excavation Inspected 7/18/91

Tank(s) Inspected 7/18/91

Wash Line Inspected 7/18/91

High Water Alarm Inspected

PLOT

Design: 1991 1500ST Con. 840SFT 12" G Cecil CTR# Self

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: System designed for 2 bedroom home.

Judy C. Rivers R.S.
Environmentalist

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

# CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 3693A DATE: 7/12/91

TC: 113-071-03 ☑ L ☑ CRT

SERIAL Nº 13853

Name of Owner Ray Parker Juris.:

Address of Property 5100 Britt & Early

**Inspection Data:**

Tank Material PCC

Total Length of Drainfield 280'

Number of Lines 4 @ 70'

Cover Depth 12"

Water Supply Source Well

Distance to Water Source ≥ 100

Excavation Inspected 7/18/91

Tank(s) Inspected 7/18/91

Wash Line Inspected

High Water Alarm Inspected

PLOT

Design: 991 1500 St Con. 840SF 12"B Cecil CTR# Ray Parker

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: System designed for 2 bedroom home

Judy J. Rein R.S.
Environmentalist

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# INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

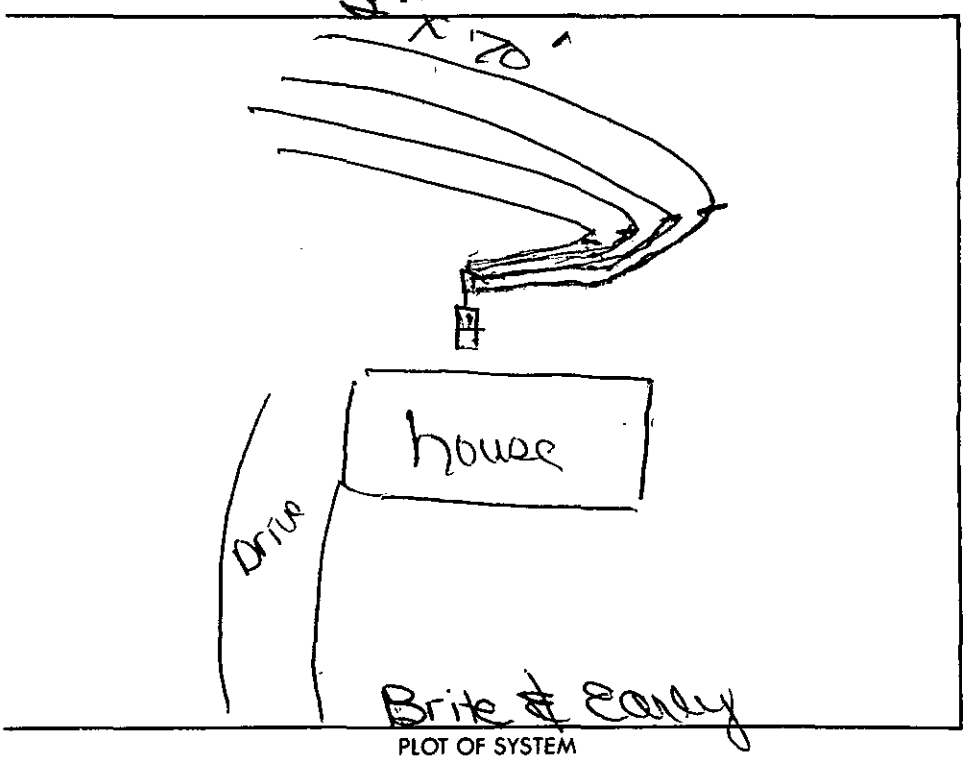
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 3693A DATE: 5/3/91

TC: 13071-03 PL

SERIAL Nº 14966

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 5/3/91. All work shall be completed on or before 6/3/91, 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 _____ gallons

Tank Construction RC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 280' feet

Number of Lines 4

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well ≥ 50 feet

NAME OF OWNER Ray Parker

LOCATION OF PROPERTY 5100 Brite & Early

Comments: INSTALL 4 Trenches 3' x 70' 12" Stone

Division or Section Head

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

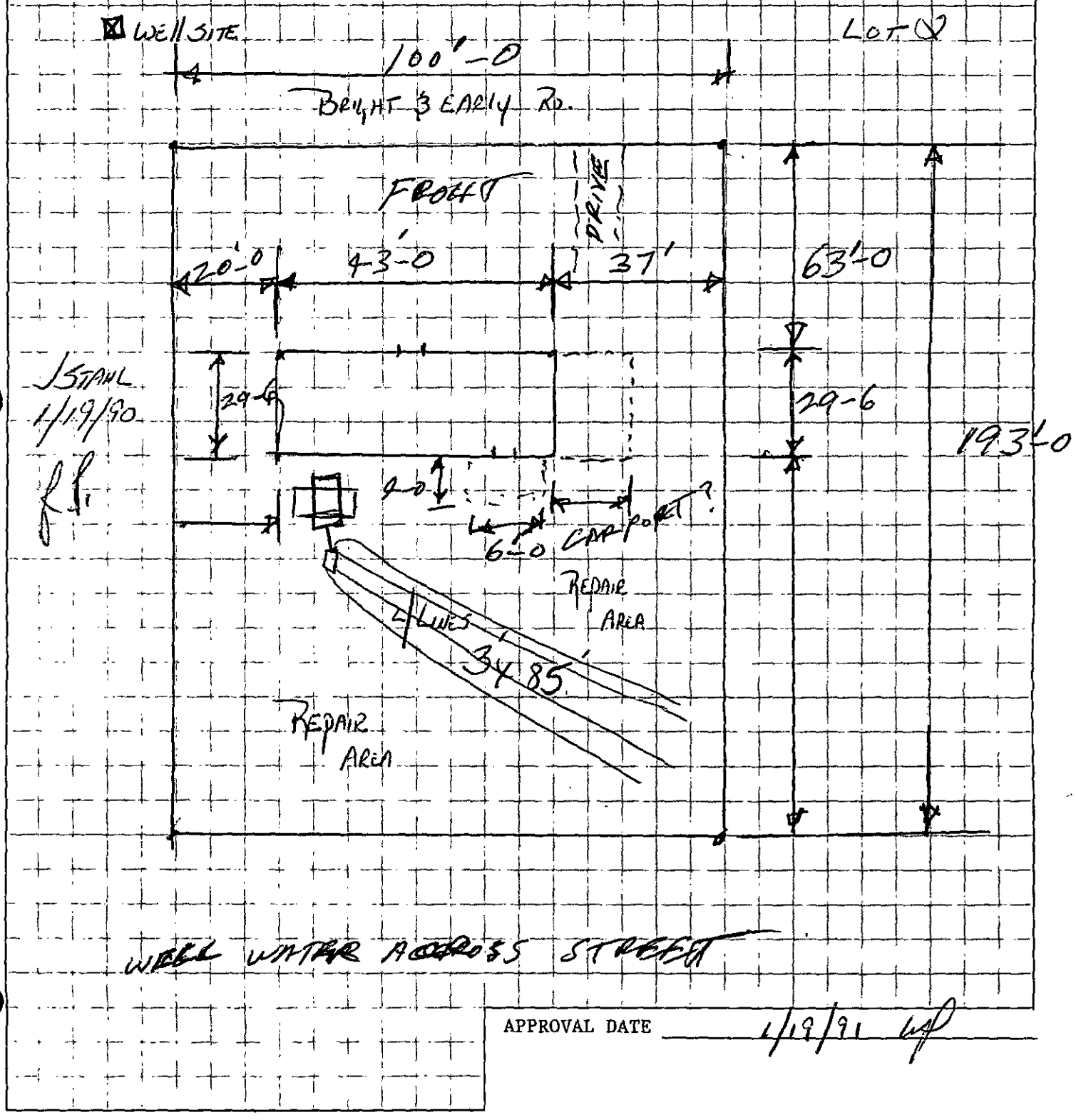
# PROPOSED PLOT PLAN

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

FILE: 3693A

TC: 113-071-03

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.




APPROVAL DATE 1/19/91 [illegible]

White - Health Department's Copy  Canary - Environmentalist's Copy  Pink - Owner's Copy

# 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: 3693A
TC: 113-071-03
SERIAL: № 21618
☑ L ☑ CRT

**JOB LOCATION**

① ADDRESS: 5100 ~~Brittain Road~~ Brite and Earley Rd ② FILE:
STREET NO. ~~Brite and Earley Rd~~ STREET
③ JURISDICTION: ④ TAX PARCEL NO.: 113-071-03
⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

**OWNER**

⑧ NAME: C. RAY PARKER
(FIRST) (MIDDLE) (LAST)
⑨ MAILING ADDRESS: 4923 LOCHLAIN DR.
⑩ CITY: CHARLOTTE, ~~NC~~ ⑪ STATE: N.C. ⑫ ZIP: 28217
⑬ PHONE: (WORK) wife 377-3600 AAAA PARKER ⑭ (HOME) 523-8810

**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? 2 ㉕ Type?
㉓ Maximum occupancy? 5 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 shown
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: C. Ray Parker
Date: JAN 16 1991

## 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 ~~48~~ 60 months from the date of issuance.

Environmentalist — Date: 1/9/91

Director or Authorized Section Head — Date: 1-22-91

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

TO: ENVIRONMENTAL HEALTH DEPT.
BUILDING STANDARDS DEPT.
DEPT. OF ENVIRONMENTAL PROTECTION/
SOLID AND HAZARDOUS WASTE

DATE 1/16/91

FROM: COUNTY ENGINEERING DEPARTMENT

EHD FILE _____ JURISDICTION CODE Neck

PARCEL NUMBER 113-071-03

ASSIGNED ADDRESS 5100 Brite and Earley Rd

EXISTING ADDRESS _____

PROJECT NAME LA

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

| | APPROVED | DISAPPROVED |
|---|---|---|
| 1. SUBDIVISION REGULATIONS | / / | / /* |
| 2. FLOODWAY REGULATIONS | / / | / /* |
| 3. EROSION CONTROL REGULATIONS | / / | / /* |
| 4. PUBLIC UTILITY EASEMENT | / / | / /* |

| | PRESENT | NOT PRESENT |
|---|---|---|
| 5. PUBLIC UTILITY EASEMENT | / /* | / / |
| 6. PROPERTY FRONTS ON THOROUGHFARE | / /* | / / |
| 7. DRIVEWAY PERMIT REQUIRED | / /* | / / |

*If checked, further investigation will be required to determine whether a building permit can be issued by Building Standards for the site.

REMARKS: Septic Tank

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIER'S OFFICE AT BUILDING STANDARDS WHEN PAYING PERMIT FEES.
A CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL THE TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

SIGNED: _____

OPWEAR 06-88

NEW ADDRESS / /*

FORM 100

# MECKLENBURG COUNTY HEALTH DEPARTMENT
# ENVIRONMENTAL HEALTH DIVISION

## CHARGE SLIP

Date: 1-16-91

Name/Company: C. Ray Parker

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Subp Permit - New
5018 Brute and Earley Rd.
5100 Brute and Earley Rd.
Tax #0 113-071-03 & 04
Tile # 0 3693A & 3694A

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
JAN 15 1991

Fee: $ 400.00 CK #5822 TD 400.00

NOTICE:

*A processing fee of $15.00 will be charged for all returned checks in accordance with N.C. General Statute 25-3-512.*

W T Thompson
Completed by

Collected by

# MECKLENBURG COUNTY
Department of Environmental Health

August 13th, 1987

Ellen Kay Earley
5002 Bright Road
Charlotte, NC 28208

RE: Property located at Off Bright Road 2/C
FILE: 3693A
PARCEL: 11307103

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 14429) 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.

Sincerely,

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

Enclosure

**MECKLENBURG COUNTY ENVIRONMENTAL HEALTH**
**SITE EVALUATION REPORT**
**SERIAL NUMBER** 14429

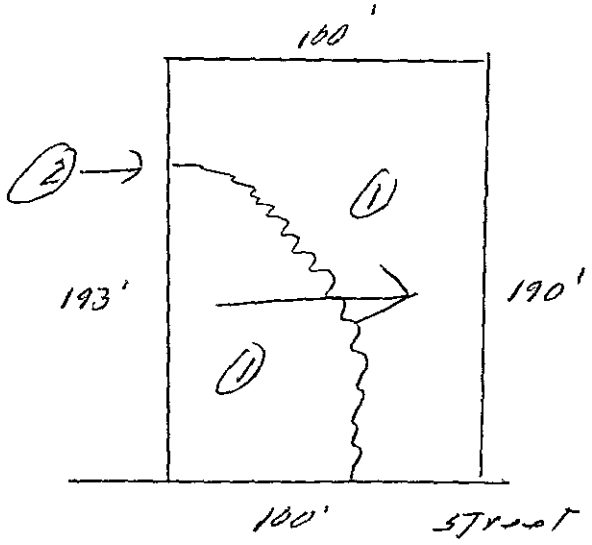
File: 3693A
Parcel: 11307103
Action: 1
☐ PC

Location: Off Bright Road
Subdivision:
Lot: 2/C Block: Acres: .45

Owner: Ellen Kay Earley
Address: 5002 Bright Road
Charlotte, NC 28208

Comments: _____

Described by: William A. Marbi
Date: 8-12-87




***** 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 2-10% | S PS (U) complex slopes | 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 730" 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 730" | 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 | S PS U | S PS U | S PS U | S PS U |
| Soil Group/Series | IVA Cecil-Lloyd | Tarrata | | | | |
| Area Classification | S (PS) U | S PS (U) | S PS U | S PS U | S PS U | S PS U |

3828

# APPLICATION FOR SOIL INVESTIGATION

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

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

(OFFICE USE ONLY)

FILE: 3693A

TC: _____

☐ PC ☐ REPT

**JOB LOCATION**

① ADDRESS: OFF OF Bright Rd.

② SUBDIVISION: STar Harbor ③ LOT: 2 ④ BLOCK: C

⑤ PARCEL REFERENCE: BOOK NO.: 113 PAGE NO.: 071 PARCEL NO.: 03

⑥ DEED REFERENCE: BOOK NO.: 5452 PAGE NO.: 0768

**OWNER**

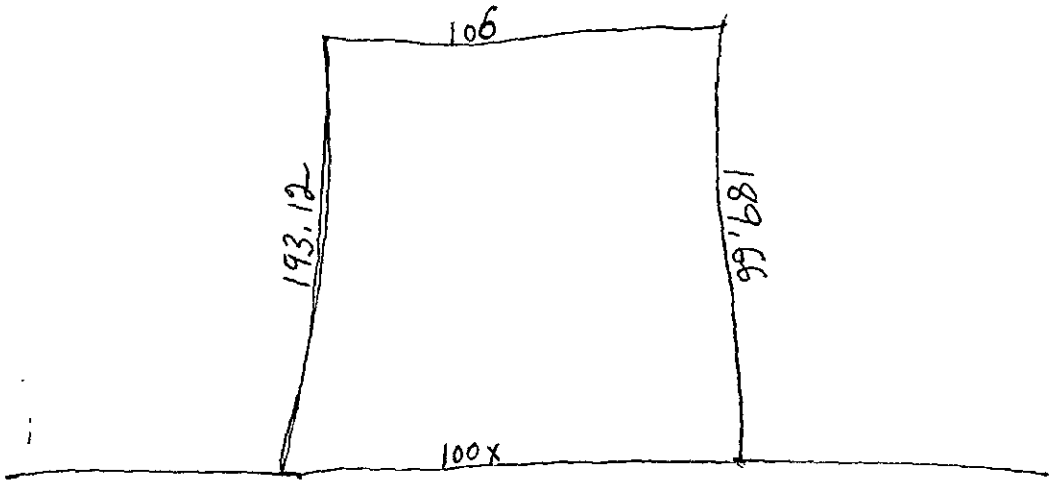
⑦ NAME: Ellen (FIRST) · Kay (MIDDLE) Earley (LAST)

⑧ MAILING ADDRESS: 5002 Bright Road

⑨ CITY: Charlotte ⑩ STATE: N.C. ⑪ ZIP: 28208

⑫ PHONE: (WORK) 398-4600 (HOME) 393-0781

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: Mrs Ellen K Earley

Date: 7-9-87

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

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