

2300 MEFFERT LN

02315114

12/26/2007

duponbj

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

Not on WD 10/31/03

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

ACS

[ ] CRT

100.00 10/28/03 JKA

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202 file # 1811B

(704)336-5102 Jeremy

PERSON FILING APPLICATION:

NAME: Beaty (last) James (first) R. (mi) 987

ADDRESS: 2315 Meffert Ln PHONE: (704) 391-8158 722-1768

CITY: Charlotte STATE: NC ZIPCODE: 28214

Date: 10-28-03

PROPERTY OWNER:

NAME: Same (last) (first) (mi)

ADDRESS: _____ PHONE: (___) _____

CITY: STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 023-151-15

STREET ADDRESS: _____

ZONING: _____

Township (check one):
[X] 0 Mecklenburg County [ ] 2 Davidson [ ] 4 Pineville [ ] 6 Huntersville
[ ] 1 Charlotte [ ] 3 Cornelius [ ] 5 Matthews [ ] 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)
Bedroom EXT. 2 CAR GARAGE

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 2

SYSTEM CLASSIFICATION:

RESIDENTIAL PROPERTY (Type Building, check one):
[ ] SINGLE MOBILE HOME (S) [ ] HOUSE (H) [ ] MULTIPLE FAMILY (U)
[ ] DOUBLE WIDE (D) [X] MODULAR HOME (M) [ ] OTHER _____ (O)

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)
[X] 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: [signature] Date: 10/28/03

NOTICE:

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 approval is granted by this Department.

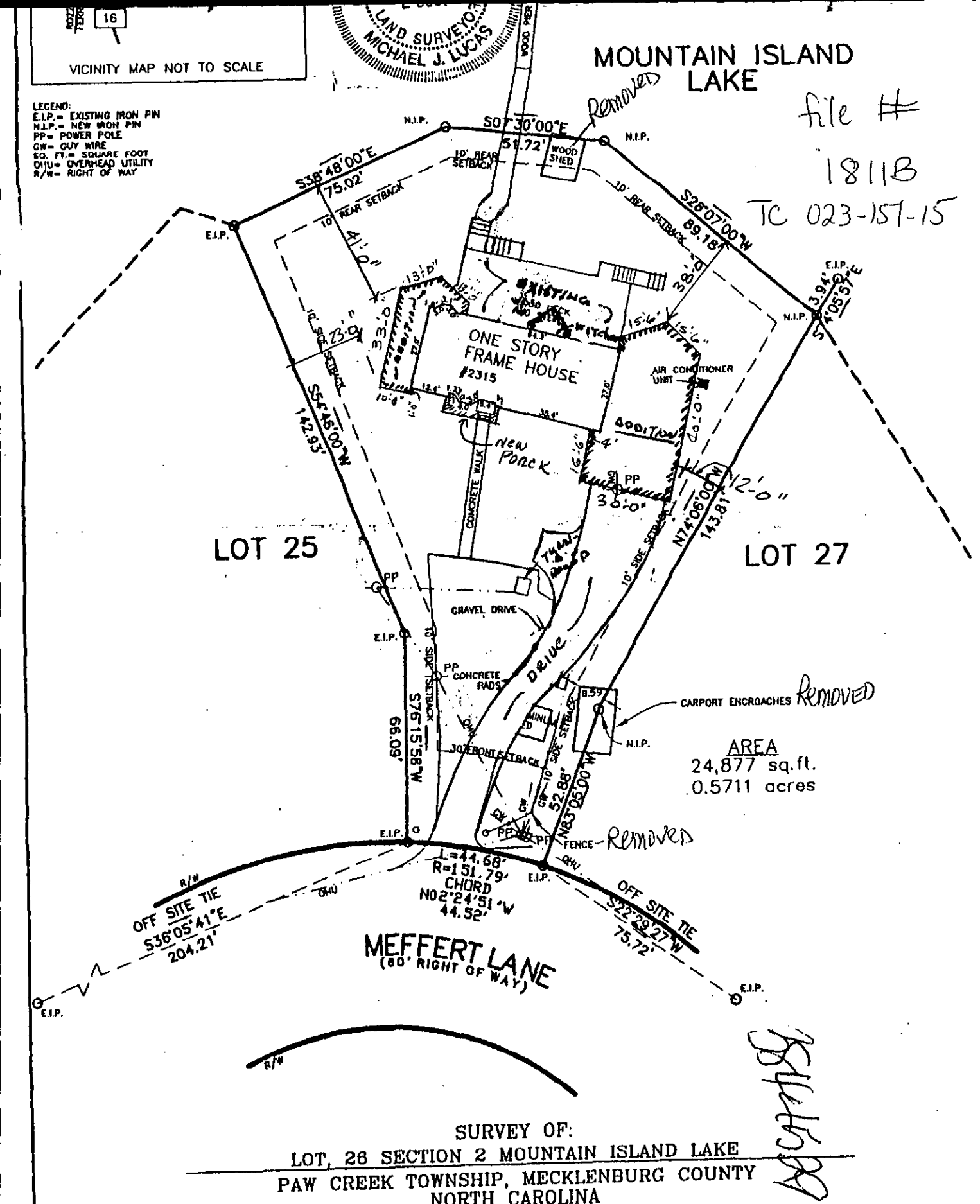
...This permit is not transferable.

[ ] 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

... O.K. to use existing system to expand the bedroom and add 2 car garage. House will remain a three bedroom house.

[signature] R.S. 10/30/03
Environmentalist Date

WWATER : 122791



SURVEY OF:

LOT, 26 SECTION 2 MOUNTAIN ISLAND LAKE

PAW CREEK TOWNSHIP, MECKLENBURG COUNTY

NORTH CAROLINA

PREPARED FOR JIM BEATY AND BRENDA BEATY

SCALE 1"=40'

MAP BOOK 18 PAGE 111

DEED BOOK _____ PAGE _____

FLOOD CERTIFICATION

THIS IS TO CERTIFY THAT A PORTION OF THE SUBJECT PROPERTY IS LOCATED IN A SPECIAL FLOOD HAZARD AREA AS SHOWN ON MAPS PREPARED BY THE FEDERAL EMERGENCY MANAGEMENT AGENCY, FEDERAL INSURANCE ADMINISTRATION, DATED- MARCH 2ND, 1993 COMMUNITY PANEL NUMBER 370158 0045B

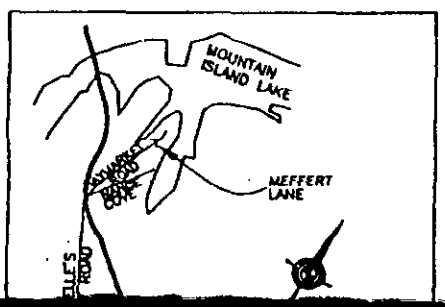
JOB # 94076

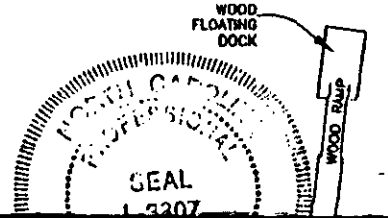
THIS IS TO CERTIFY THAT ON THE 18TH DAY OF JULY 20 01 AN ACTUAL SURVEY WAS MADE UNDER MY SUPERVISION OF THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE BOUNDARY LINES AND THE IMPROVEMENTS, IF ANY, ARE AS SHOWN HEREON. THIS PLAT MEETS THE MINIMUM STANDARDS OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA, BOARD RULE .1600 (21 NCAC 56) AND THE ERROR OF CLOSURE FOR THIS PARCEL DOES NOT EXCEED ONE (1) FOOT PER 10,000 FEET OF PERIMETER SURVEYED NOR 20 SECONDS TIMES THE SQUARE ROOT OF THE NUMBER OF ANGLES TURNED.

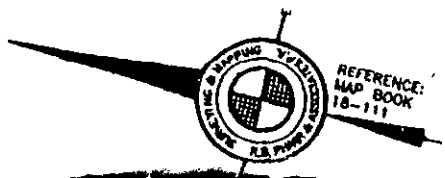
SIGNED Michael J. Lucas

R. B. PHARR & ASSOCIATES REGISTERED SURVEYORS
19801 S. MAIN STREET
CORNELIUS, NC 28031
TEL: 704-895-1730
FAX: 704-895-1864
EMAIL: PHARRNORTH@RBPHARR.COM

CREW:	DRAWN:	REVISED:
BR	CL	







INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

ACS pd 100 ck 14131 2/21/02 (1) 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 1811B

PERSON FILING APPLICATION:
NAME: Eberly (last) Charles (first) A (mi)
ADDRESS: 2300 Meffert Ln PHONE: (704) 394 8663
CITY: Charlotte STATE: NC ZIPCODE: 28214

Date: 2-14-02

PROPERTY OWNER:
NAME: Eberly (last) Charles (first) A (mi)
ADDRESS: 2300 Meffert Ln PHONE: (__) 394-8663
CITY: Charlotte STATE: NC ZIPCODE: 28214

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 023-151-14
STREET ADDRESS: 2300 Meffert lane
Charlotte NC 28214
ZONING:

SUBDIVISION OR MOBILE HOME PARK NAME:

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

LOT NUMBER: LOT SIZE (in acres):

TYPE APPLICATION (check one):

[ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[X] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[ ] COMMERCIAL OR INDUSTRIAL (N)
Rebuild Burned house
[ ] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)

RESIDENTIAL PROPERTY (Type Building, check one):
[ ] SINGLE MOBILE HOME (S) [X] HOUSE (H) [ ] MULTIPLE FAMILY (U)
[ ] DOUBLE WIDE (D) [ ] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 2

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)
[ ] Municipal (M) [ ] Other 'spring' (O)
[X] 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: [signature] Date: 2-14-02

NOTICE:

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 approval is granted by this Department.

...This permit is not transferable.

... O.K. to use existing system to replace fire destroyed house. Keep building foundation >5' from existing septic system. Three (3) Bedrooms total.

[ ] 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

[signature] L.S. 2/21/02
Environmentalist Date

WATER : 122791

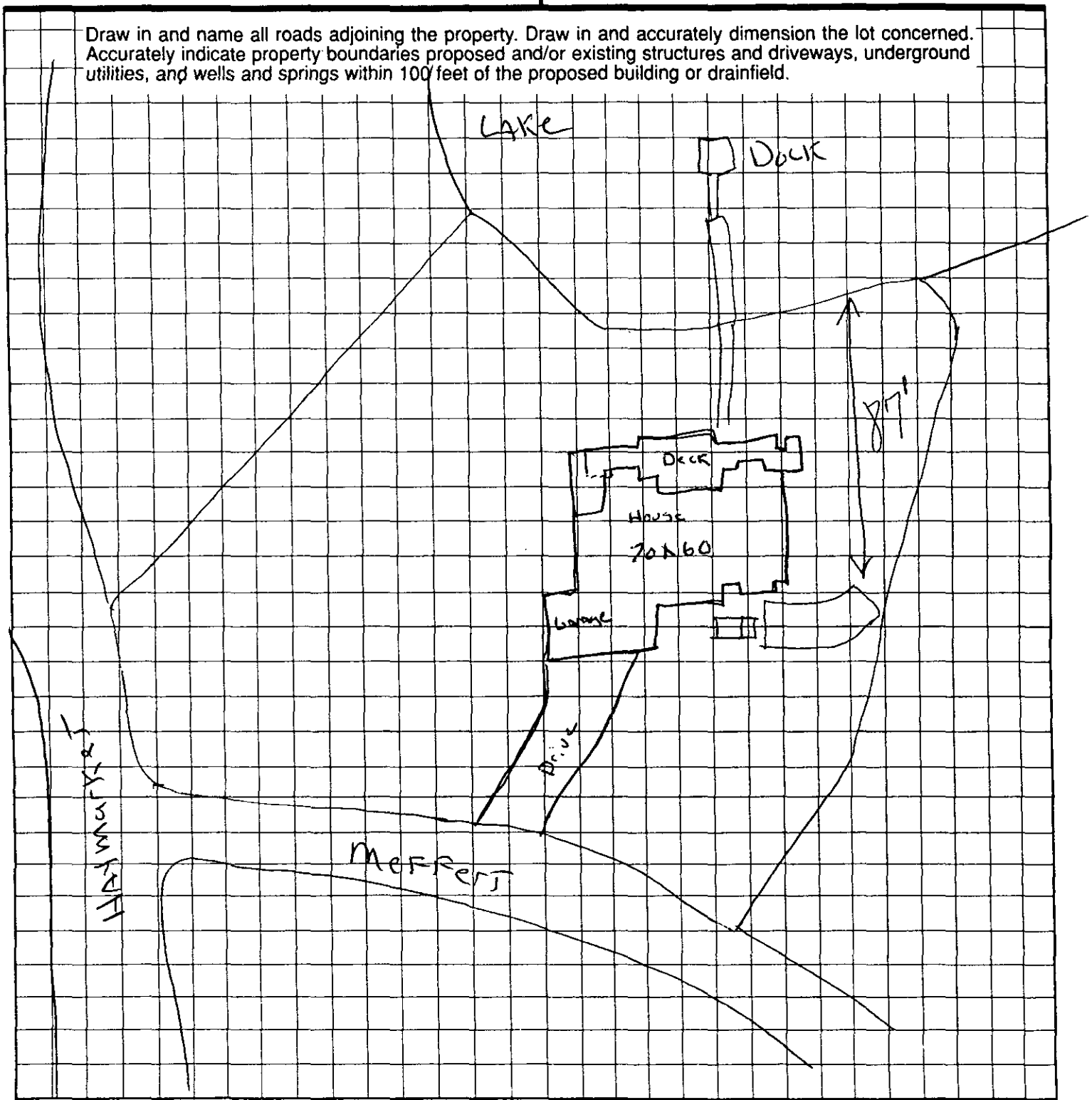
PROPOSED PLOT PLAN

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

FILE: 1811B

TC: _____

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

APPROVAL DATE _____

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

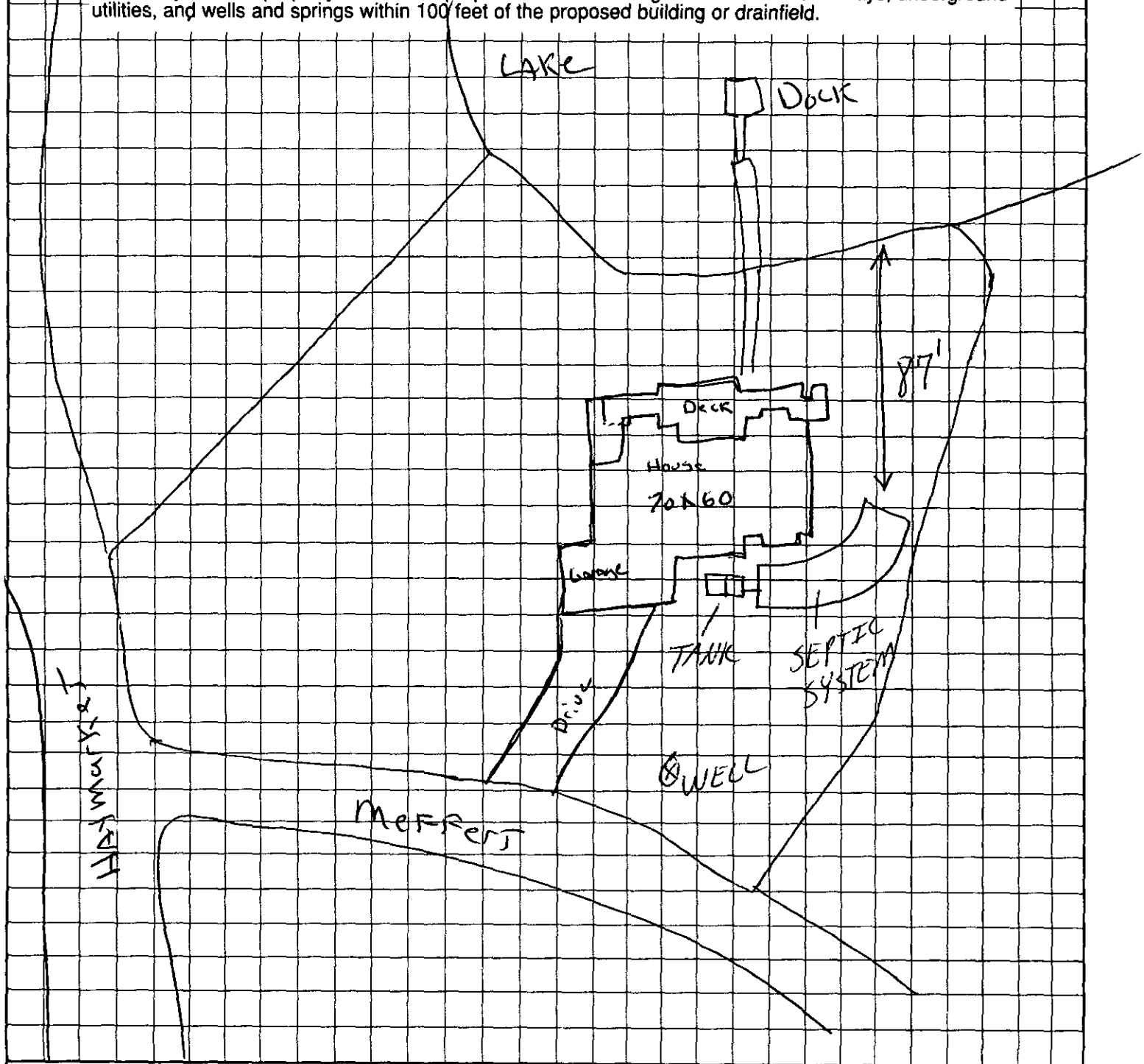
PROPOSED PLOT PLAN

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

FILE: 1811B

TC: _____

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 _____

OWNER/AGENT SIGNATURE

DATE

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

2x600

FEE: N/A **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: 3-10-97 **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: 3-10-97 **PERMIT NO:** 1811B
PARCEL NO: 023-151-14

JOB LOCATION ADDRESS: 2300 Heffner Lane
PROPERTY OWNER: George W. Broome
BUILDING CONTRACTOR: N/A
SUBDIVISION NAME: N/A
AUTHORIZATION ISSUED BY: Larry B. Thompson, R.S. **DATE:** 3-10-97
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 1811B, AND THE ATTACHED SITE PLAN WITH SYSTEM DETAILS. CONSTRUCTION AND INSTALLATION MUST ALSO MEET ALL REQUIREMENTS SET FORTH IN THE RULES GOVERNING SANITARY SEWAGE COLLECTION, TREATMENT, AND DISPOSAL AND ANY OTHER APPLICABLE RULES AND LAWS.

2. AN INSTALLATION, CONSTRUCTION, ALTERATION AND/OR REPAIR APPROVAL MUST BE SECURED PRIOR TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH MECKLENBURG COUNTY HEALTH DEPARTMENT.

3. ANY ALTERATION IN SITE OR SOIL CONDITIONS (INCLUDING LOCATION OF STRUCTURES AND APPURTENANCES) OR MODIFICATION IN USE, DESIGN WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS AS SPECIFIED IN THE ASSOCIATED IMPROVEMENT PERMIT AND APPLICATION, MAY SUBJECT THIS AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: _____

OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITIONS OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

George Broome x 3/10/97
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

Permit Number 1411B

Tax Number 023-151-14

The IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be NO grading, filling or disturbance of the soil in the area of the septic tank system or repair area

CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a Building Permit. The Construction Authorization is NOT transferable. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.

Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

Basement	___ Yes	✓ No	___ Partial Basement
Type Primary Wastewater System Type (circle one): I (II) III IV V VI	✓ Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1
___ Long-term acceptance rate	360 Max gallons/day wastewater flow	___ Absorption Area (sq ft)	___ Trench spacing (min. on centers)
Yes Serviced by private well	___ Gallon septic tank	___ Total trench length (ft)	___ Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
3 Bedrooms in residence	___ Gallon pump tank	___ Depth of stone	

Any surface waters present: Type: Minimum separation distance:

Site modifications required:

Additional Conditions: Repair to existing septic system.

Repair Area System Type Type (circle one): I (II) III IV V VI	✓ Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1
100 Absorption Area (Sq ft) 200 Total Trench Length (Ft)	24" Depth of Stone Trench	N/A Trench spacing (min. on centers)	≤36" Maximum Trench Depth

For existing system, enter the year originally installed: 1963

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 Sewage, 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 Improvement permit is transferable.

Larry B. Thompson Jr. L.S. 3-10-97
DEHNR Authorized Agent Date

X George Broome X 3/10/97
Owner/Agent Signature Date

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

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

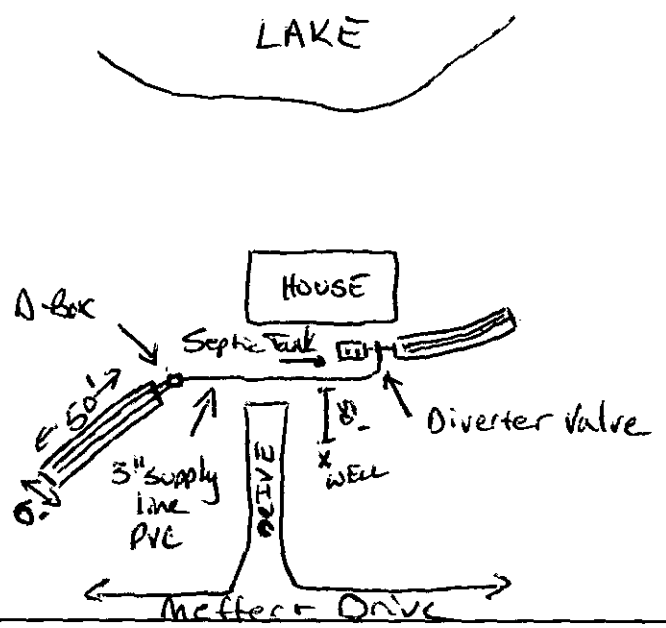
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 1811 B DATE: 3-10-97

TC: 023-151-14

SERIAL Nº 17128

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 3-10-97. All work shall be completed on or before 4-10-97, 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 N/A gallons

Tank Construction N/A

Trench Depth ≤ 36"

Absorption and/or Nitrification Lines:

Trench Width 6 feet

Trench Walls Scored and Porous Yes

Total Line Length 100 feet

Number of Lines 2 in 1

Depth of Stone 24 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well 750 feet

NOTICE: This system shall not be installed while soils are in a wet condition.

NAME OF OWNER _____

LOCATION OF PROPERTY 2300 Meffert Lane

Comments: Type II a repair 3 bedroom residence
Diverter Valve (1) 6'W x 150' L x 24" stone

Larry B. Thompson Jr. R.S.
Environmental Health Specialist

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

FEE: N/A
DATE: 3-10-97

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 #: 1811 B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 023-151-14

STREET ADDRESS: 2300 MEFFERT Lane

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

TOWNSHIP (CHECK ONE):

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

CLOSING DATE 3-13-97

TYPE OF BUILDING (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 3400

NUMBER OF BEDROOMS: 3

NUMBER OF OCCUPANTS:

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:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: __ YES ✓ NO TYPE: _____

WATER SUPPLY (CHECK ONE):

__ COMMUNITY (C)
__ MUNICIPAL (M)
✓ 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 ✓ YES __ NO
DESIGNATED WETLANDS __ YES ✓ NO

PROPERTY OWNER:

NAME: Broome George W.
(LAST) (FIRST) (MI)

ADDRESS: 2300 Meffert Lane

CITY: Charlotte STATE: NC ZIP: 28214

DAYTIME PHONE: 704 399 - 0862

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME:
(LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) —

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 1963

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: George Broome DATE: 3/10/97

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

MECKLENBURG COUNTY

Land Use and Environmental Services Agency
Water & Land Resources
Zoning Division

CITY OF CHARLOTTE ZONING BOARD OF ADJUSTMENT
E.L. WOODS TRAINING ROOM
HAL MARSHALL BUILDING – 700 NORTH TRYON STREET
TUESDAY – OCTOBER 28, 2003 – 9:00 A.M.

REGULAR AGENDA

Case no. 03-95 – 5842 Hickory Grove Road – Janice White – Tax Parcel Number 103-202-12, requesting a 66' variance from the required 400' separation distance between daycares to allow a daycare to be established at the subject property. Code §12.502(20) states new childcare centers in a residence must be separated from existing family childcare homes and childcare centers in a residence in a single-family residential district by a distance of 400'.

Case no. 03-94 – 6100 Monroe Road – Raymond Krzyzaniak – Tax Parcel Number 189-013-11, requesting a 18' variance from the required 18' buffer after installation of a fence (18' buffer) to allow existing driveway and buffer conditions to remain as is for the proposed office use. Code Table 12.302(a) requires a Class C buffer for an office use abutting a single-family residential zoning district. Code Table 12.302(b) requires an 18' Class C buffer.

Case no. 03-103 – 907 Ardsley, Unit 1 – Rachel A. Williams, represented by Jeff Brown – Tax Parcel Number 155-054-17, requesting approximately a 342 square foot variance to allow for a non-conforming use to be expanded for the construction of a sunroom. Code §7.102(3) states a use shall not be expanded, nor shall a nonconforming use be enlarged by additions to the structure in which the nonconforming use is located or the occupation of additional lands.

Case no. 03-97 – 16131 Whitesail Drive – William Holland – Tax Parcel Number 199-441-60, requesting a 8' variance from the required 50' buffer to allow the right rear corner of patio to encroach into the buffer. In addition, applicant is requesting a 20' variance to allow construction of a retaining wall to allow for soil stabilization. Code §10.708(1a) states lower Lake Wylie watershed critical area requires a 50' undisturbed vegetative buffer.

Case no. 03-93 – 2315 Meffert Lane – James and Brenda Beaty – Tax Parcel Number 023-151-15, requesting a 62' variance from the required 100' Mountain Island Lake watershed buffer to allow for an addition and a garage to an existing legal non-conforming dwelling unit. Code §10.508(1)(a) states all areas adjacent to normal pool elevation of Mountain Island Lake is 100'.

Case no. 03-91 – 822 Moretz Avenue – James Sanford, represented by Roger Dills – Tax Parcel Number 079-073-10, requesting a 245' variance from the required 600' separation distance to allow a day labor service to remain at it's present location. Code §12.530(1) states any structure in which a

day labor service agency is the principal or accessory use shall be separated by a distance of at least six hundred feet (600') from any residentially zoned district or from any existing residential use.

THE BOARD WILL BREAK FOR LUNCH AFTER THE ABOVE CASES.
~ AT APPROXIMATELY 12:00 P.M. ~
THE FOLLOWING CASES WILL NOT BE HEARD BEFORE 12:30 P.M.

Case no. 03-92 – 6623-110 Executive Circle – H. W. Twisdale - Tax Parcel Number 103-261-01, appealing the Zoning Inspectors notice of violation to allow the off-premise sign to remain at it's present location. Code §13.105 states that off-premise signs other than those permitted in Section 13.111 of these regulations are prohibited under any circumstance.

Case no. 03-101 (APPEAL FROM A DECISION) – 507 Moncure Drive – Eric Lavonas, represented by Mark Cramer – Tax Parcel Number 175-111-95, appealing the decision of the Zoning Administrator to allow construction of an addition to the principal structure to encroach 16' into the S.W.I.M. buffer. Code §12.803(2) states expansions to uses that would result in an increase in the total impervious area within the buffer. Code §12.804(2) Buffer descriptions. Code §12.806 Mitigation (1) Purpose. (3) Bufffer impacts requiring mitigation. (4) Pre-approved mitigation techniques. (5) Other mitigation techniques.

Case no. 03-102 – 507 Moncure Drive – Eric Lavonas, represented by Mark Cramer – Tax Parcel Number 175-111-95, requesting a 16' variance to allow construction of an addition to the principle structure. Code §12.804(1)(2) require a 100' S.W.I.M. buffer for stream drainage areas ≥ 640 acres.

Case no. 03-96 – 5401 East Independence Boulevard - Stephen K. Coss, represented by Richard Fennell – Tax Parcel Number 133-081-12, appealing the Zoning Administrators decision to allow the existing legal non-conforming signs to remain after a more than 50% façade change. Applicant also requests American flags to remain attached to lightpoles as is. Code §13.112(b) Removal of on-premise signs. Code §13.106(7)(d,e) Flags on permanent poles.

Case no. 03-81 (APPEAL FROM A DECISION) – 16324 York Road – Georgia Joyner, represented by Susan Irvin – Tax Parcel Number 199-301-01, appealing the Zoning Administrator's decision to allow construction to continue to a non-conforming restaurant back to its original configuration. Code §7.103(7) states where a nonconforming structure is destroyed or damaged by fire, flood, wind, other act of God, the structure may be repaired or restored to its original dimensions and conditions as long as a building permit for the repair or restoration is issued within 12 months of the date of the damage.

Case no. 03-99 – 16324 York Road – Georgia Joyner, represented by Susan Irvin – Tax Parcel Number 199-301-01, requesting the following variances: 1) deviation from Code §12.206(3) to allow parking in the setback, 2) deviation from Code §12.303(1a) to eliminate the screening along the retaining wall constructed by NCDOT, 3) a 28' variance from the 50' undisturbed vegetative buffer required along the shoreline of Lower Lake Wylie, 4) a 70 parking space variance from the required number of off-street parking spaces, and 5) a 18' variance from the required 40' landward from full

pond level. Code §12.206(3) states no off-street parking or driveways are permitted in the required setback. Code §12.303(1)(a) states parking lots for more than 10 automotive vehicles must be screened from abutting property and from public view from a public street. Code §10.708(1)(a) states a 50' undisturbed vegetative buffer is required along the shoreline of Lower Lake Wylie. Code Table 12.202 requires 202 off-street parking spaces. Code §12.515(7a) requires a 40' setback landward from full pond level.

~ THE BOARD RESERVES THE RIGHT TO DEVIATE FROM THE AGENDA. ~

Mecklenburg County will comply with the American Disabilities Act (ADA), which prohibits discrimination on the basis of disability. Anyone needed special accommodations when attending this meeting and/or if this information is needed in an alternative format because of a disability please contact the Staff Assistant to the Charlotte Zoning Board of Adjustment, (704) 336-3819 at least 72 hours prior to the meeting.

MECKLENBURG COUNTY
STATE OF NORTH CAROLINA

CASE NO. 03-93

MEETING DATE 10-28-03

APPLICATION FOR A VARIANCE

APPLICATION MUST BE FILED IN PERSON, CAN NOT BE ACCEPTED BY MAIL

Variance requested on property located at: 2315 MEFFERT LANE

Property Zoned: R5 Zoning Map #: 47 Tax Parcel #: 023 15115

Property Owner: JAMES R. & BRENDA M. BEATY

Date Existing Structure Erected: 1991

TO THE MECKLENBURG COUNTY ZONING BOARD OF ADJUSTMENT:

WE JAMES & BRENDA BEATY, hereby petition the Board of Adjustment for a VARIANCE from the literal provisions of the Mecklenburg County Zoning Ordinance because, under the interpretation given to me by the Zoning Administrator, I am prohibited from using the parcel of land described above in a manner shown by the Plot Plan attached to this form. I request a variance from the following provisions of the Zoning Ordinance (cite Section numbers and Code requirements);

The 100 FOOT BUFFER FROM LAKE REQUIRED FOR SINGLE FAMILY HOMES AT MOUNTAIN ISLAND LAKE. CODE 10.508 CALLS FOR 100' VEGETATIVE BUFFER

Describe the VARIANCE being requested on the above referenced property:

62 FOOT VARIANCE TO ENABLE US TO Remodel the EXISTING home TO MAKE A permanent home with MORE ROOM and STORAGE. AND A GARAGE with STORAGE SPACE ABOVE.

FACTORS RELEVANT TO THE ISSUANCE OF A VARIANCE:

The Board of Adjustment does not have unlimited discretion in deciding whether to grant a variance. Under the state enabling act, the Board is required to reach three conclusions as a prerequisite to the issuance of a variance: (a) that there are practical difficulties or unnecessary hardships in the way of carrying out the strict letter of the Ordinance, (b) that the variance is in harmony with the general purposes and intent of the Ordinance and preserves its spirit, and (c) that in the granting of the variance, the public safety and welfare have been assured and substantial justice has been done. In the following spaces, indicate the facts and the argument you plan to render, in order to convince the Board, to properly determine that each of these three (3) CONCLUSIONS are applicable to this structure and site.

(a) THERE ARE PRACTICAL DIFFICULTIES OR UNNECESSARY HARDSHIPS IN THE WAY OF CARRYING OUT THE STRICT LETTER OF THE ORDINANCE. The courts have developed three rules to determine whether, in a particular situation, "practical difficulties or unnecessary hardships" exist. State facts and arguments in support of each of the following:

(1) **If he complies with the provisions of the Ordinance, the property owner can secure no reasonable return from, or make no reasonable use of, his property.** (It is not sufficient that failure to grant the variance simply makes the property less valuable.) Home was Built in 1991 Located in the 100ft Buffer and we need the Variance in order to remodel

(2) **The hardship of which the Applicant complains results from unique circumstances related to the Applicant's land.** (Note: Hardships common to an entire neighborhood, resulting from overly restrictive zoning regulations, should be referred to the Charlotte-Mecklenburg Planning Commission. Also, unique personal or family hardships are irrelevant since a variance, if granted, runs with the life of the land.)

The existing house was built prior to the 100' buffer rule. We bought it in Aug. 2001 as a second home, but now it is our primary residence. Cannot afford to move it and rebuild a new home.

(3) **The hardship is not the result of the Applicant's own actions.**

The lot is a pie shape - narrow at the road - wide at lake. So at 100 ft from lake is too narrow.

(b) **THE VARIANCE IS IN HARMONY WITH THE GENERAL PURPOSE AND INTENT OF THE ORDINANCE AND PRESERVES ITS SPIRIT.** (State facts and arguments to show that the requested variance represents the least possible deviation from the letter of the Ordinance to allow a reasonable use of the land; and, that the use of the property, if the variance is granted, will not substantially detract from the character of the neighborhood.)

New homes were built on either side of us in 2002. Both received variances in order to build.

(c) **THE GRANTING OF THE VARIANCE SECURES THE PUBLIC SAFETY AND WELFARE AND DOES SUBSTANTIAL JUSTICE.** (State facts and arguments to show that, on balance, if the variance is denied, the benefit to the public will be substantially outweighed by the harm suffered by the Applicant.)

The lot was laid out prior to the 100 ft Buffer

I certify that all of the information presented by me in this application is accurate to the best of my knowledge, information, and belief.

James R. Beaty Brenda M. Beaty

Signature of Applicant

James R. Beaty Brenda M. Beaty

Typed or Printed Name of Applicant

2315 Meffert Lane

COMPLETE ADDRESS

Charlotte NC 28214

City, State, Zip Code

9-24-03

Date

704/391-8158 or 3759222

Telephone Number

_____

Represented By: (signature)

_____

Typed or Printed Name of Above

_____

COMPLETE ADDRESS

_____

City, State. Zip Code

_____

Date

_____

Telephone Number

 CASE NO. _____

MEETING DATE _____

IF THE APPLICANT IS NOT THE OWNER OF THE PROPERTY, indicate the owner's name and address, along with a notarized letter signifying approval **TO REQUEST A VARIANCE** on his property.

Property Owner _____
(If different from Applicant)

Address _____

City, State & Zip _____

TYPE OR PRINT the **COMPLETE** names, tax parcel numbers, mailing addresses and zip codes for the owners of the adjacent properties, including the properties directlyacross the street:

ADJACENT PROPERTY OWNERS:

1. TONY EBBERLY
2300 MEFFERT Lane
CHARLOTTE NC 28214 Tax Parcel # 02315114

2. R. Gene BEATY
2321 MEFFERT LANE
CHARLOTTE NC 28214 Tax Parcel # 02315116

3. R. Gene BEATY
2321 MEFFERT Lane
CHARLOTTE NC 28214 Tax Parcel # 02315164

4. _____ Tax Parcel #_____

5. _____ Tax Parcel #_____

6. _____ Tax Parcel #_____

7. _____ Tax Parcel #_____

8. _____ Tax Parcel #_____

9. _____ Tax Parcel #_____

(Attach additional sheet if necessary).

These persons, including the Applicant and the representative, will be notified in writing of the date, time, and place of the hearing.

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	02/15/02	**Amount:**	100.00
Receipt #:	5862	**Tendered:**	0.00
Check / Auth #:	CHECK 7910	**Returned:**	0.00
Received By:	BEACHMS		

Account Information

Account #: 200000
Contractor: NEW WAVE ACRYLICS, INC.
Attn:
Address: 1315 CENTRAL AVENUE
Address:
City/State/Zip: CHARLOTTE, NC 28205

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	MH Exc/Add/Repl w/o System Mod 2300 MEFFERT LANE		1	100.00	100.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance