

4310 WILKINSON BV

06103203

12/31/2007

duponbj

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

2/28/02
Verified connection to
CMUD w/ Jenny
JC

Mecklenburg County
Health Department

January 5, 1999

Solomon Tisdale	Re:	4310 Wilkinson Boulevard
2215 West Boulevard	File:	2777B
Charlotte, NC 28208	Parcel:	061-032-03

Dear Property Owners:

Receipt of your Application for Improvement Permit for the above referenced property is acknowledged. A soil evaluation and a site visit have been conducted. The results of the evaluation indicated that the site is **UNSUITABLE** under Rules .1941 **SOIL CHARACTERISTICS (MORPHOLOGY)**, .1942 **SOIL WETNESS CONDITIONS**, .1943 **SOIL DEPTH**, and .1945 **AVAILABLE SPACE.** For these reasons your Application for Improvement Permit is denied. A possible way to develop the site exists under Rule .1948(d), which reads as follows:

> A site classified as **UNSUITABLE** may be used for a ground absorption sewage treatment and disposal system specifically identified in Rules .1955, .1956, or .1957 of this Section or a system approved under Rule .1969 if written documentation including engineering, hydrogeologic, geologic or soil studies, indicates to the local health department that the proposed system can be expected to function satisfactorily. Such sites shall be reclassified as **PROVISIONALLY SUITABLE** if the local health department determines that the substantiating data indicate that:
>
> (1) a ground absorption system can be installed so that the effluent will be non-pathogenic, non-infectious, non-toxic, and non-hazardous;
> (2) the effluent will not contaminate ground or surface water; and
> (3) the effluent will be exposed on the ground surface or be discharged to surface waters where it could come in contact with people, animals, or vectors.

The State shall review the substantiating date if requested by the local health department.

Please be advised that you have the right to an informal review by this department. You also have the right to appeal under G.S. 130A-24, and to have the appeal held in Mecklenburg County

If you have any questions regarding this matter, please call me at 336-5575.

Sincerely,

Kelly Randall

Kelly Randall, R.S.
Individual Water and Wastewater Systems

Mecklenburg County
Health Department

Solomon Tisdale
2215 West Blvd
Charlotte NC 28208

Re: 4310 Wilkinson Bv.
File: 2777-S
Parcel: 061-032-03

Receipt of your Application for Improvement Permit for the above referenced property is acknowledged. A soil evaluation and a site visit have been conducted. The results of the evaluation indicated that the site is UNSUITABLE under Rules

For these reasons your Application for Improvement Permit is denied. A possible way to develop the site exists under Rule .1948(d) which reads as follows:

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If you have any questions regarding this matter, please call me at 336-5568.

Sincerely,

Larry B. Thompson, Jr., R.S.
Environmental Health Specialist
Individual Water and Wastewater Systems

FEE: 100.00 cash
DATE: 12/9/98 JC

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR IMPROVEMENT PERMIT
FOR COMMERCIAL/INDUSTRIAL SITE

[redacted] | | CRT

TYPE APPLICATION: X NEW SYSTEM ___ EXPANSION OF EXISTING SYSTEM ___ REPAIR OF EXISTING SYSTEM

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

COPY

FILE #: 2777B

PROJECT TRACKING #:

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 061-032-03

STREET ADDRESS: 4310 Wilkinson Blvd

LOT NUMBER: 65-70

TOWNSHIP (CHECK ONE):

- \ 0 MECKLENBURG
- X 1 CHARLOTTE
- ___ 2 DAVIDSON
- ___ 3 CORNELIUS
- ___ 4 PINEVILLE
- ___ 5 MATTHEWS
- ___ 6 HUNTERSVILLE
- ___ 7 MINT HILL

X COMMERICAL ___ INDUSTRIAL

DESCRIBE TYPE OF BUSINESS: T.V. Repair

575
Square footage of Facility:

NUMBER OF EMPLOYEES: 1 PER SHIFT: 1

HOW WILL WATER BE USED IN THE FACILITY:

- X TOILETS/URINALS
- X HANDSINK
- NO SHOWERS
- NO FLOOR DRAINS

OTHER, PLEASE DESCRIBE:

TYPE OF WASTEWATER:

- X SEWAGE
- ___ INDUSTRIAL PROCESS WASTE WATER

An IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change.

IF EXPANSION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED ADDITION:

WATER SUPPLY (CHECK ONE): ___ COMMUNITY (C) X 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	WELL SPRINGS OR WATERLINES	___ YES	✓ NO
EXISTING WASTE WATER SYSTEMS	___ YES	✓ NO	DESIGNATED WETLANDS	___ YES	✓ NO
EASEMENTS OR RIGHT-OF-WAYS	___ YES	✓ NO			

BUILDING PLANS TO INCLUDE ALL PLUMBING, FLOOR DRAINS AND ALL SOURCES OF WASTEWATER DISCHARGE AND GRADING PLANS MAY BE REQUIRED DURING THE EVALUATION STAGE.

PROPERTY OWNER:

NAME: Tisdale Solomon
(LAST) (FIRST) (MI)

ADDRESS: 2215 West BV

CITY: Charlotte STATE: NC ZIP: 28208

DAYTIME PHONE: ( ) ---

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME:
(LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) ---

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

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: Solomon Tisdale DATE: 12-9-98

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

PROPOSED PLOT PLAN

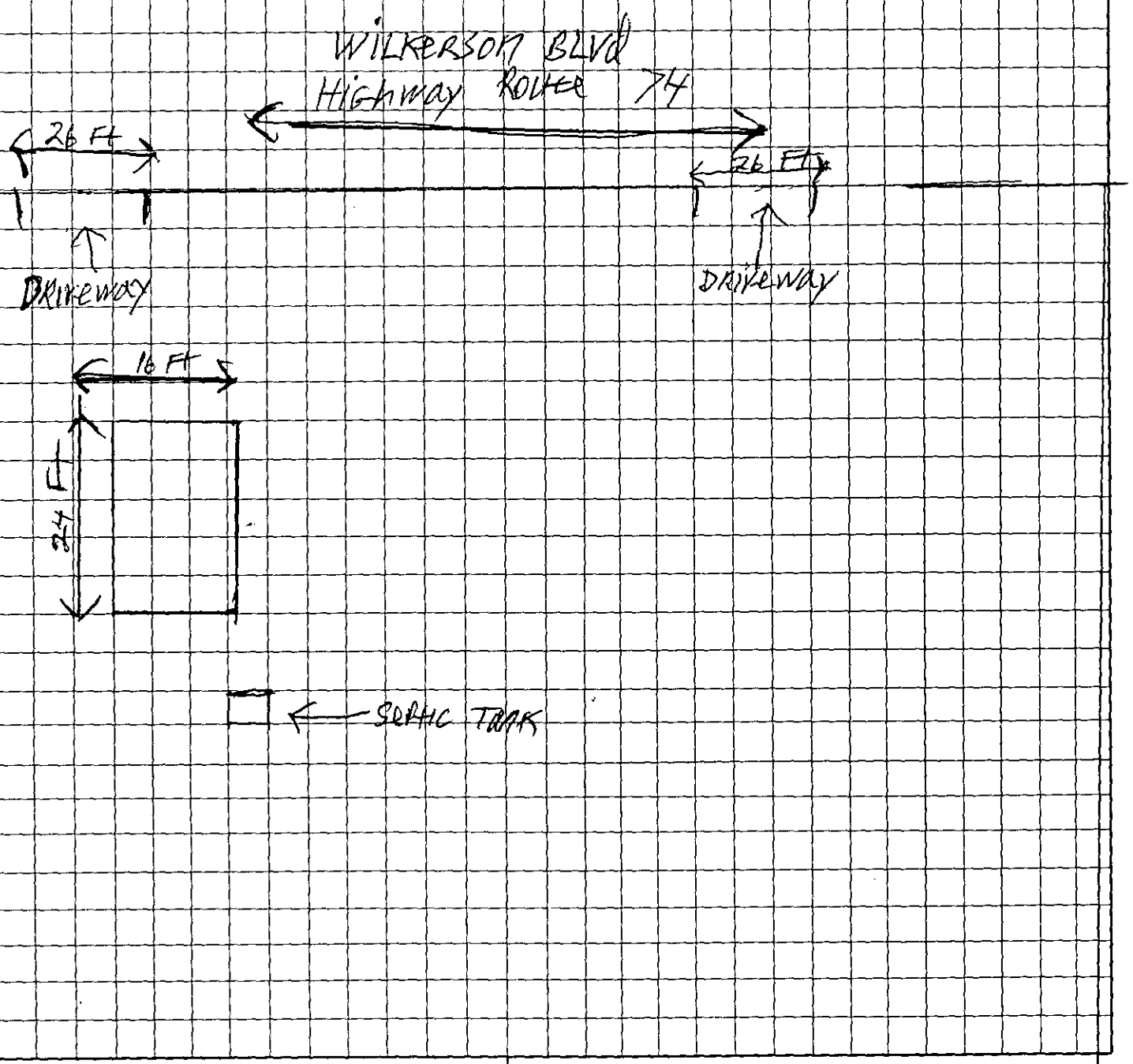
COPY

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

FILE: 2777B

TC: 061-032-03

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.

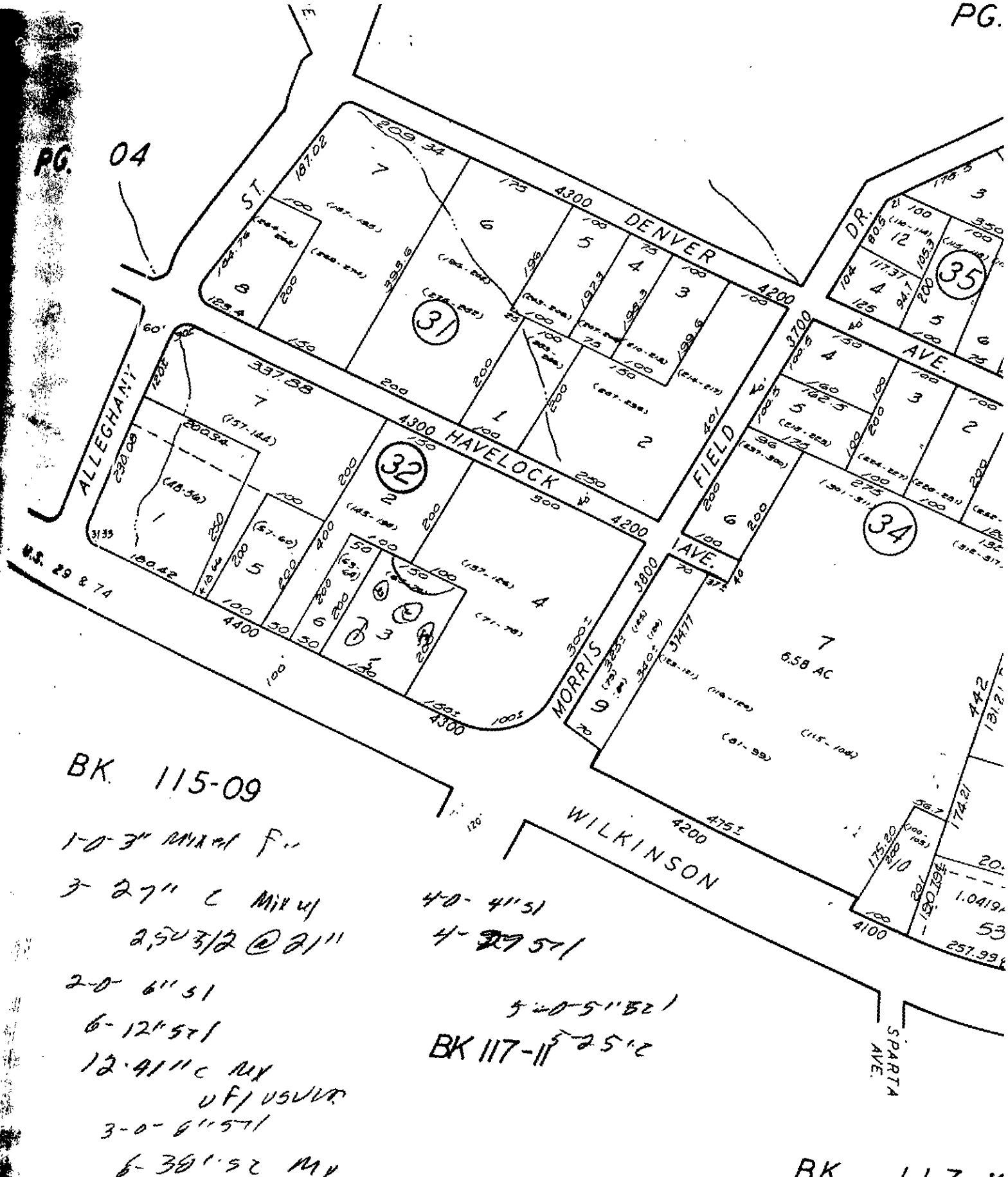


X Soloman Tisdale
OWNER/AGENT SIGNATURE

DATE 12-9-98

APPROVAL DATE _____

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



BK 115-09

1-0-3" Mix rel F..

3-27" C Mix 4/
2,5V 3/2 @ 2/11

2-0-6" 31

6-12" 57/

12-41" C Mix
VF/VSV/VS

3-0-6" 57/

6-36"-52 My
2 V 4 7/1 @ 30"

40-41" 31
4-37 57/

5-0-5" 52/

BK 117-11 25-12

BK. 117-12

FOR TAX PURPOSES ONLY

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURSES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

#3

Sheet: _____
Property ID: 061-032-07
Lot #: 65-70
File #: 21779

400

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Solomon Tisdale
APPLICANT: _____
ADDRESS: 2215 West Blvd, Charlotte, N.C.
DATE EVALUATED: 12-30-96
PROPOSED FACILITY: repair shop
PROPOSED DESIGN FLOW (.1949) 250gpd
PROPERTY SIZE: .69
LOCATION OF SITE: 4310 Wilkinson Blvd
PROPERTY RECORDED: _____

WATER SUPPLY: ☐Private ☒Public ☐Well ☐Spring ☐Other _____

EVALUATION METHOD: ☒Augur Boring ☐Pit ☐Cut

TYPE OF WASTEWATER: ☒Sewage ☐Industrial Process ☐Mixed

PROFILE #	.1940 Landscape Position/ Slope % (Slopes 2-6%)	Horizon Depth (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS &LTAR
1	LS	0-3"	Mixed FSL		2.5Y 5/2 @ 21"	27"	N/A	None	US
		3-27"	SBK/C	VF:/Mixed/SG/MP					
2	LS	0-6"	gr/SL	FR/SEXP/NS/MP	7.5YR 5/8 TO SOIL WETNESS	41"	N/A	None	US
		6-12"	SBK/SCL	FR/SEXP/SS/SP					
		12-41"	ABK/C	VF:/Mixed/VS/VP					
3	LS	0-8"	gr/SCL	FR/SEXP/SS/SP	2.5Y 7/1 @ 30"	38"	N/A	None	US
		8-38"	ABK/C	VF:/Mixed/VS/VP					
4	LS	0-4"	gr/SL	FR/SEXP/NS/MP	7.5YR TO SOIL WETNESS	29"	N/A	None	US III
		4-29"	SBK/SCL	FR/SEXP/SS/SP					
5	LS	0-5"	gr/SCL	FR/SEXP/SS/SP	7.5YR TO SOIL WETNESS	25"	N/A	None	US IV
		5-25"	SBK/C	FI/SEXP/SS/SP					

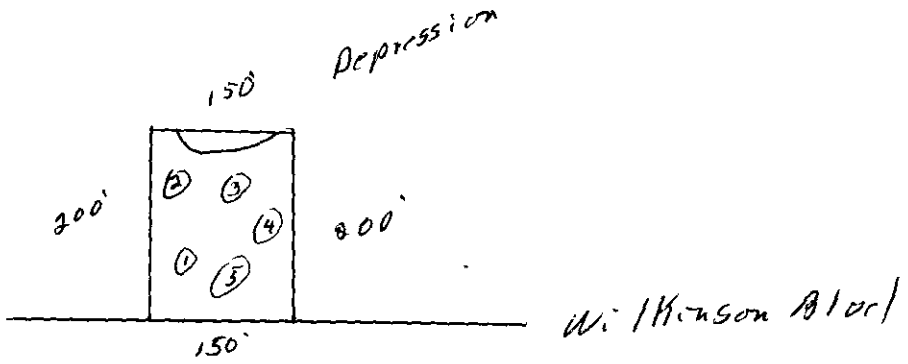
DESCRIPTION	INTIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	US	US
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): Unsuitable
EVALUATED BY: W. R. Marlin 1-4-99
OTHER(S) PRESENT: LSS

COMMENTS

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR	CONSISTENCE MOIST	CONSISTENCE WET
R-RIDGE	I	S-SAND	1.2-0.8		
S-SHOULDER SLOPE		LS-LOAMY SAND		VFR-VERY FRIABLE	NS-NON-STICKY
L-LINEAR SLOPE				FR-FRIABLE	SS-SLIGHTLYSTICKY
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6	FI-FIRM	S-STICKY
N-NOSE SLOPE		L-LOAM		VFI-VERY FIRM	VS-VERY STICKY
H-HEAD SLOPE				EFI-EXTREMELY FIRM	NP-NON-PLASTIC
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3		SP-SLIGHTLYSTICKY
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM			P-PLASTIC
T-TERRACE		CL-CLAY LOAM			VP-VERY PLASTIC
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM			
	IV	SC-SANDY CLAY	0.4-0.1		
		SIC-SILTY CLAY			
		O-ORGANIC			

STRUCTURE	MINERALOGY
SG-SINGLE GRAIN	SLIGHTLY EXPANSIVE
M-MASSIVE	
CR-CRUMB	EXPANSIVE
GR-GRANULAR	
SBK-SUBANGULAR BLOCKY	
ABK-ANGULAR BLOCKY	
PL-PLATY	
PR-PRISMATIC	



FEE: 100 Cash

DATE: 12/9/98 gc

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR IMPROVEMENT PERMIT FOR COMMERCIAL/INDUSTRIAL SITE

1 CRT

TYPE APPLICATION: X NEW SYSTEM ___ EXPANSION 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 #: 2778

PROJECT TRACKING #:

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 061-032-03

STREET ADDRESS: 4310 Wilkinson Blvd

LOT NUMBER: 65-70

TOWNSHIP (CHECK ONE):

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

X COMMERICAL ___ INDUSTRIAL

DESCRIBE TYPE OF BUSINESS: T.V. Repair

575' Square Footage of Facility

NUMBER OF EMPLOYEES: 1 PER SHIFT: 1

HOW WILL WATER BE USED IN THE FACILITY:

X TOILETS/URINALS
X HANDSINK
NO SHOWERS
NO FLOOR DRAINS

OTHER, PLEASE DESCRIBE:

TYPE OF WASTEWATER:

X SEWAGE ___ INDUSTRIAL PROCESS WASTE WATER

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PROPERTY OWNER:

NAME: Tisdale Solomon
(LAST) (FIRST) (MI)

ADDRESS: 2215 West BV

CITY: Charlotte STATE: NC ZIP: 28208

DAYTIME PHONE: ( ) --

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(LAST) (FIRST) (MI)

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SIGNED: X Solomon Tisdale DATE: X 12-9-98

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

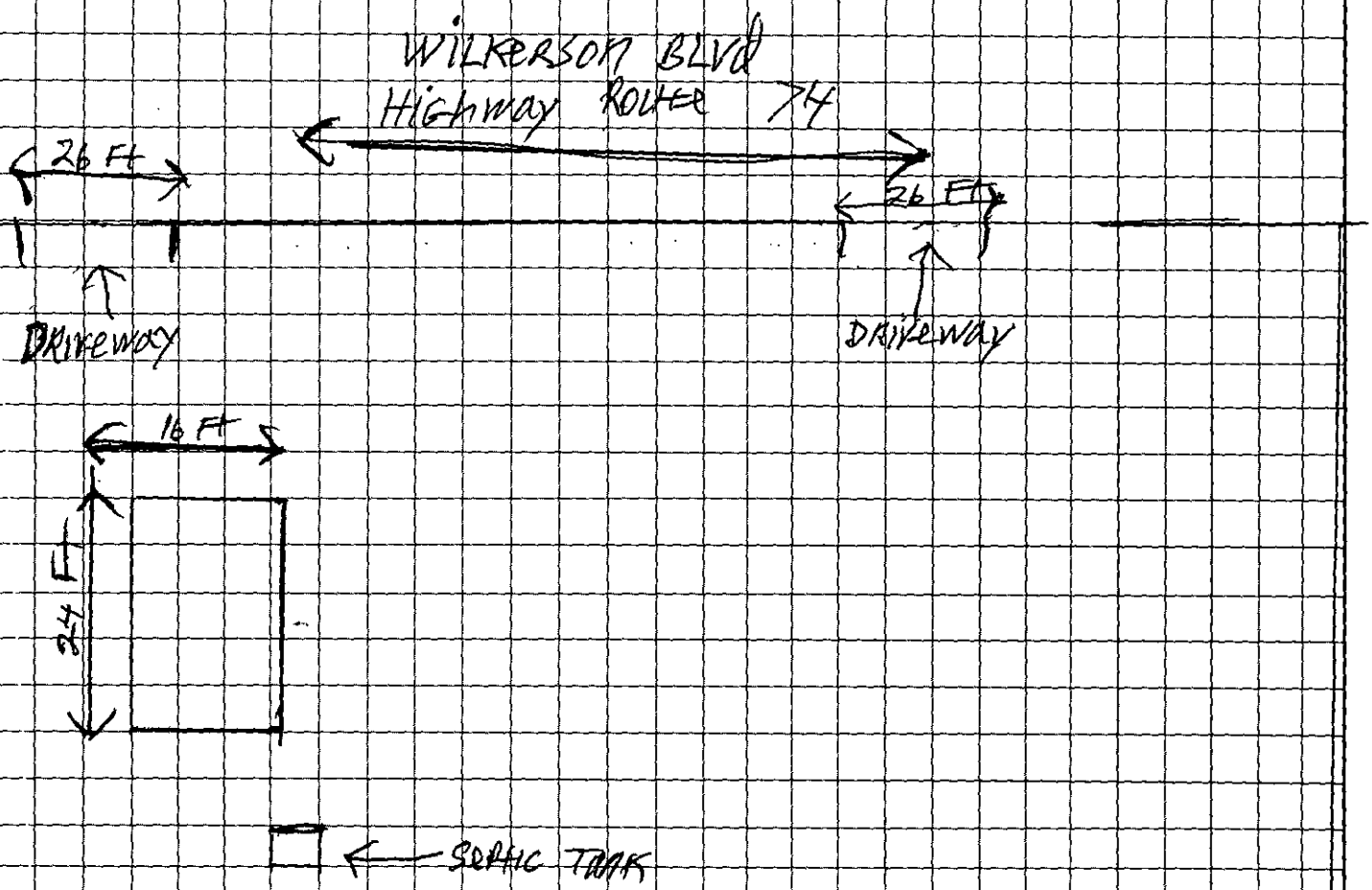
PROPOSED PLOT PLAN

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

FILE: 2777B

TC: 061-032-03

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.



X Soloman Tisdale
OWNER/AGENT SIGNATURE

DATE 12-9-98

APPROVAL DATE _____

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