


HUBBARD RD.

12/19/2007

duponbj

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

# Mecklenburg County

## Health Department

**Betty S. Snow, R.N., M.A.**
Health Director

May 28, 1993

Mr. Edgar Smith
4913 West Sugar Creek Road
Charlotte, NC 28213

RE: Property located at Hubbard Road
FILE: 1024B/8896A
PARCEL: 043-101-07PO

Dear Mr. Smith:

At your request a soils investigation was conducted on the property designated above. Results of this investigation showed the site to be classified as **UNSUITABLE** under criteria as set forth in 15A NCA 18A .1900 of Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal, August 1, 1991. Evaluation Report (Serial Number 19350) is enclosed.

The soil on this property is not suitable for use with any conventional, modified or alternative system of which I am aware. If you wish to exercise your right of appeal concerning the interpretation and enforcement of these rules you may do so in accordance with G.S. 150B-23.

If there are any questions, please contact Bill Marlin at 336-5574.

Sincerely,

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

Enclosure

KR:lw

**MECKLENBURG COUNTY HEALTH DEPARTMENT**
**SITE EVALUATION REPORT**
**SERIAL NUMBER** 19350

File: 10249/8896A Action 3

Parcel: PO 043-101-07 ☐ PC

Location: Hubbard Road

Subdivision:

Lot: Block: Acres: 1.0

Owner: Edgar Smith
Address: 4913 W. Sugar Creek Road
Charlotte, N.C.

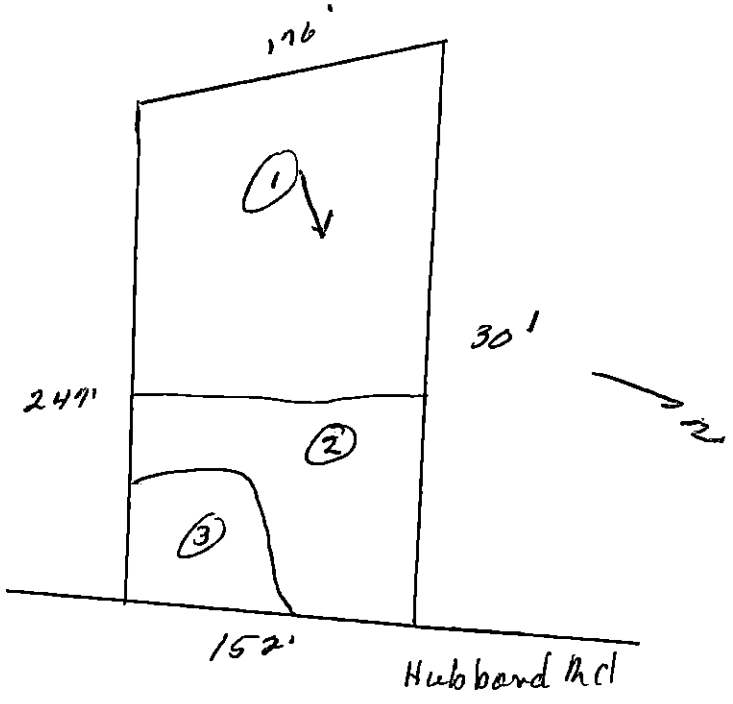
Comments: Not sure if 100% repair is required

Described by:

Date:

***** 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 6-15% | S PS (U) Drainageway/ Depression | S PS U — | S PS U | S PS U | S PS U |
| Texture | S PS (U) Expansive clay | S PS U | S PS U | S PS U | S PS U | S PS U |
| Structure | S (PS) U Subl Blocky | S PS U — | S PS U | S PS U | S PS U | S PS U |
| Drainage | S (PS) U 7-36" to water | S PS U — | S PS U | S PS U | S PS U | S PS U |
| Depth | S PS (U) 4-30" | S PS U — | S PS U | S PS U | S PS U | S PS U |
| Restrictive Horizons | S (PS) U 7-36" | S PS U — | S PS U | S PS U | S PS U | S PS U |
| Available Space | S (PS) U | 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) Fill | S PS U | S PS U | S PS U |
| Soil Group/Series | Enon-Wilkes | Drainageway Depression | Fill | | | |
| Area Classification | S PS (U) | S PS (U) | S PS (U) | S PS U | S PS U | S PS U |

**MECKLENBURG COUNTY HEALTH DEPARTMENT**
**SITE EVALUATION REPORT**
**SERIAL NUMBER** 19350

File: Action

Parcel: ☐ PC

Location:

Subdivision:

Lot: Block: Acres:

Owner:
Address:

Comments:

Described by:

Date:



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| FACTORS | AREA 1 | AREA 2 | AREA 3 | AREA 4 | AREA 5 | AREA 6 |
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| Topography | S PS U | S PS U | S PS U | S PS U | S PS U | S PS U |
| Texture | S PS U | S PS U | S PS U | S PS U | S PS U | S PS U |
| Structure | S PS U | S PS U | S PS U | S PS U | S PS U | S PS U |
| Drainage | S PS U | S PS U | S PS U | S PS U | S PS U | S PS U |
| Depth | S PS U | S PS U | S PS U | S PS U | S PS U | S PS U |
| Restrictive Horizons | S PS U | S PS U | S PS U | S PS U | S PS U | S PS U |
| Available Space | S PS U | 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 | | | | | | |
| Area Classification | S PS U | S PS U | S PS U | S PS U | S PS U | S PS U |

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

Pd clr 5/19/93
55° 816 D.T. [] 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 1024B/8896A

COPY

PERSON FILING APPLICATION:
NAME: Scott (last) Ron (first) — (mi)
ADDRESS: 3900 Durham Lane PHONE: (W) 596-1889
CITY: Charlotte STATE: NC ZIPCODE: 28269

Date:

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 043-101-07
STREET ADDRESS: Hubbard
ZONING:

PROPERTY OWNER:
NAME: Smith (last) Edgar (first) (mi)
ADDRESS: 4913 W Sugar Creek Rd PHONE: (704) 596-7430
CITY: Charlotte STATE: NC ZIPCODE:

SUBDIVISION OR MOBILE HOME PARK NAME:

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

TYPE APPLICATION (check one):
LOT NUMBER: LOT SIZE (in acres): 1 ACRE

[X] SOIL TEST - INDIVIDUAL LOT (D)
[] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (H)
[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (N)
[] SOIL TEST DEVELOPMENT (P)
[] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
[] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[] REPAIR TO SYSTEM (R)

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: NUMBER OCCUPANTS:
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)
[] 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: Edgar Smith Date: May 19, 1993

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.

...

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

Environmentalist Date

Director or Authorized Section Head Date

WWATER : 122791

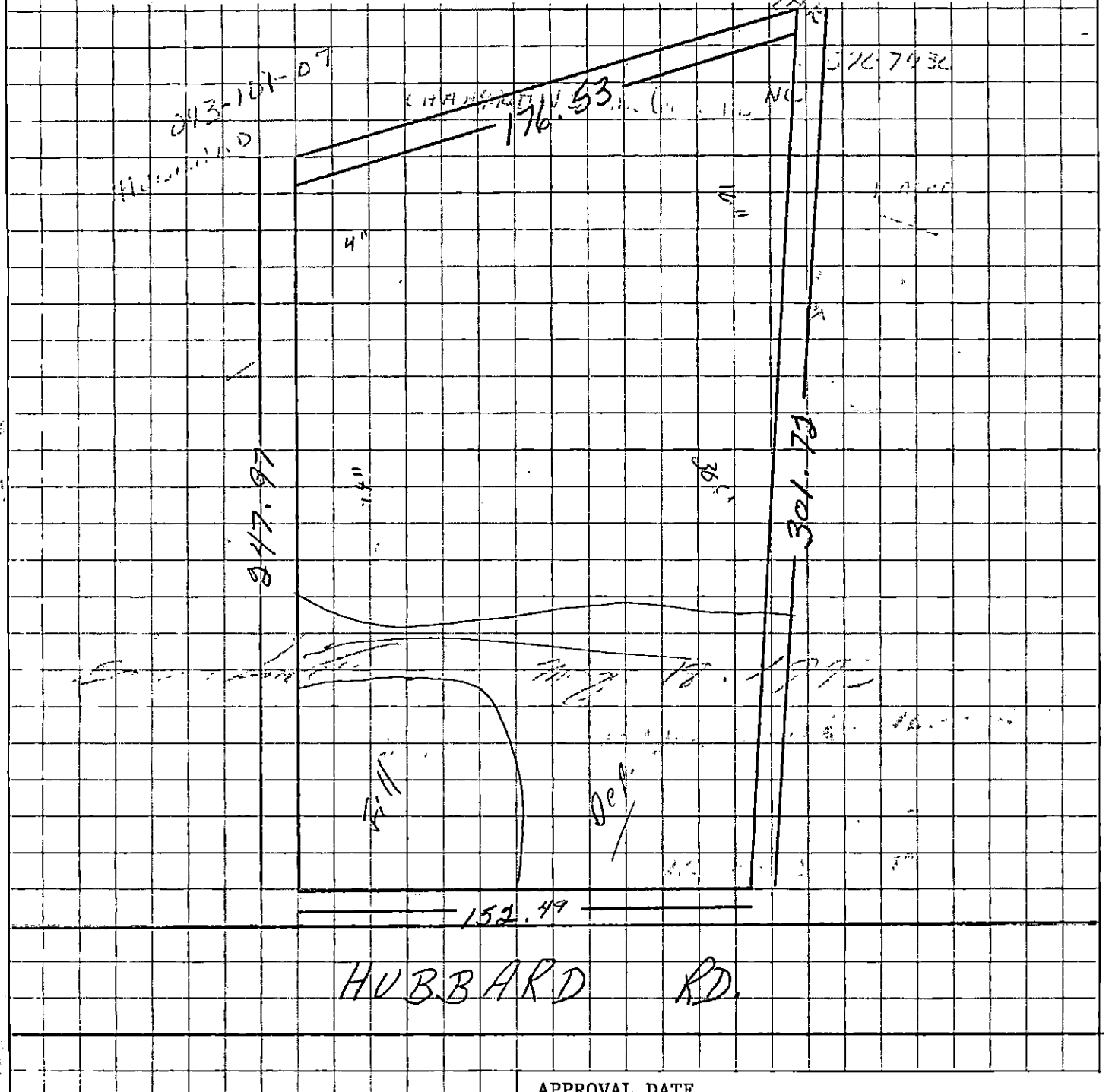
# PROPOSED PLOT PLAN

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

FILE: 1024B/8896A

TC: 043-101-07

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.




Scale 1" = 50'

APPROVAL DATE _____

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

# PROPOSED PLOT PLAN

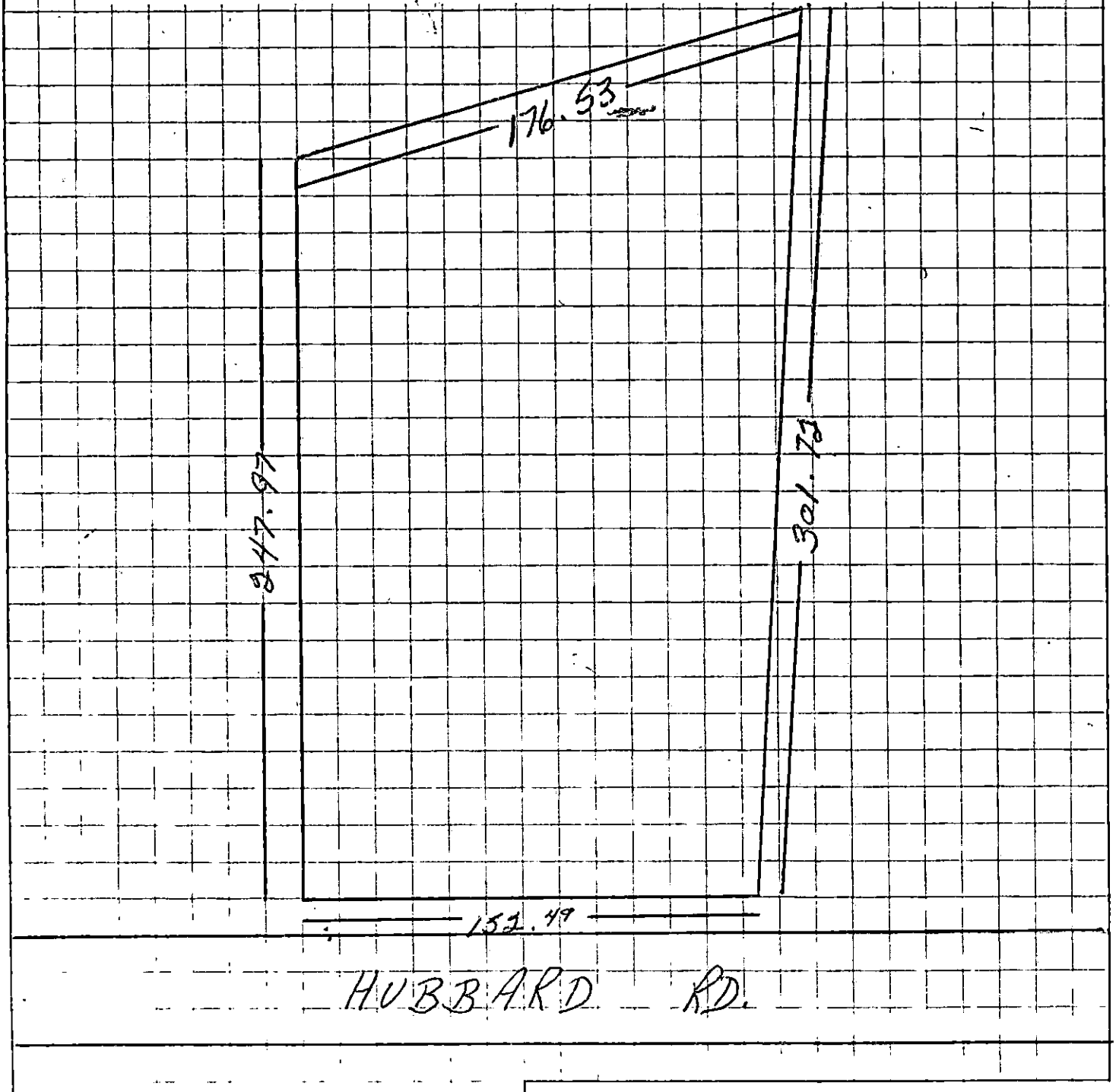
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700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

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TC: 043-101-07

COPY

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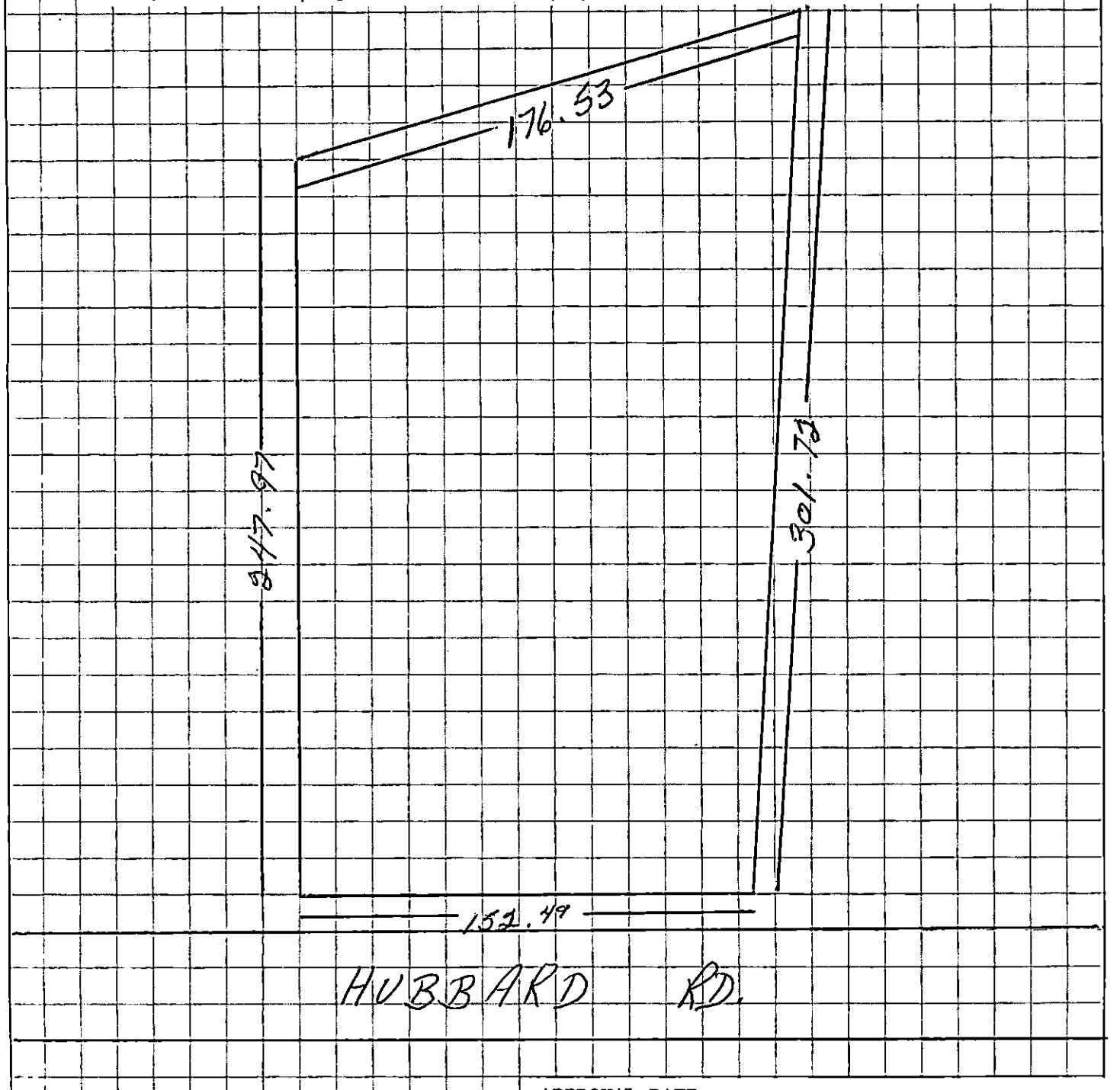
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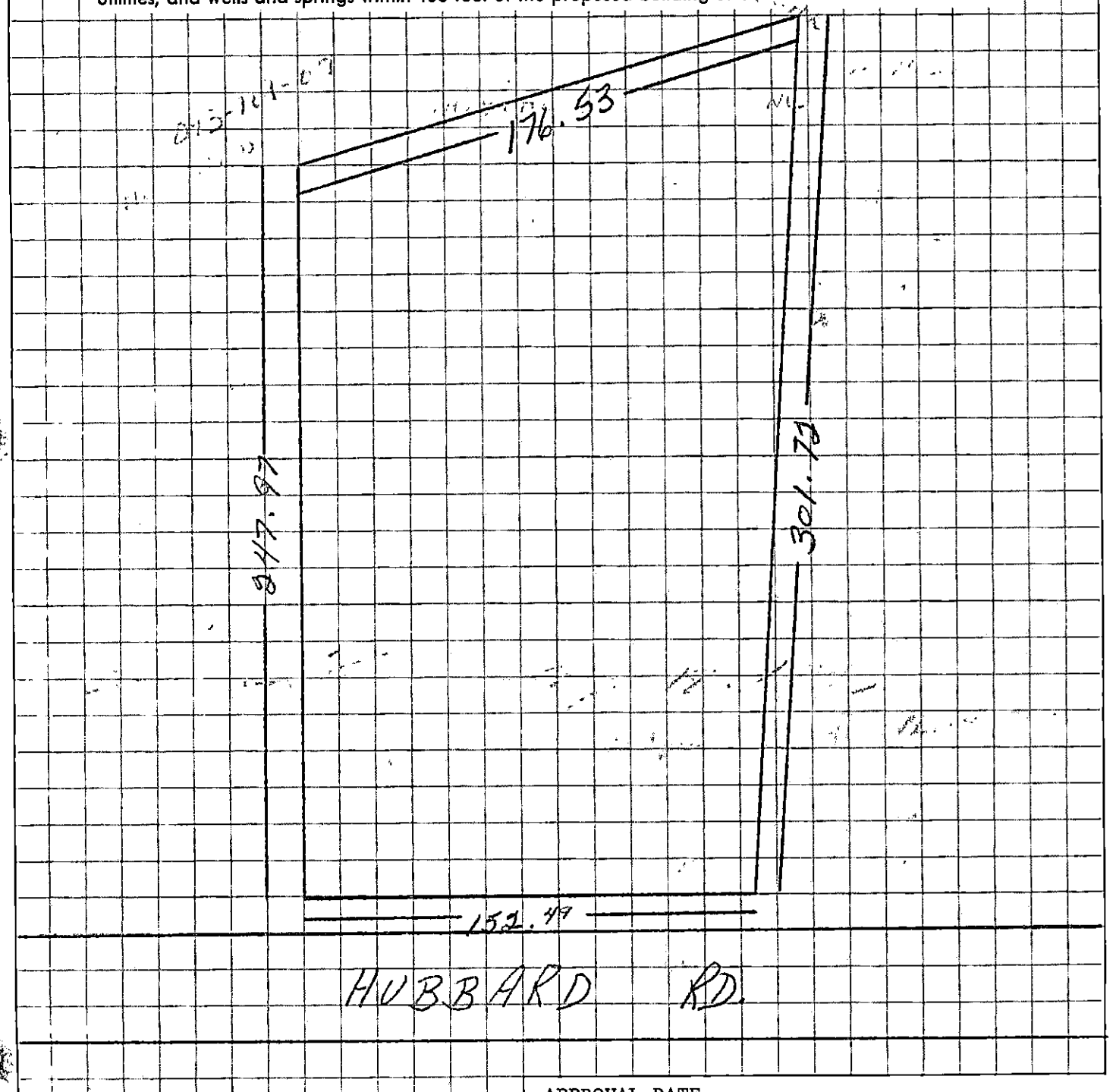
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INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

PD clr 5/19/93
50' 816 OT [] 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 1024B/8896A

Date:

PERSON FILING APPLICATION:
NAME: SCOTT (last) RON (first) — (mi)
ADDRESS: 3900 DURHAM LANE PHONE: (704) 596-1889
CITY: CHARLOTTE STATE: NC ZIPCODE: 28269

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 043-101-07
STREET ADDRESS: HUBBARD
ZONING:

PROPERTY OWNER:
NAME: SMITH (last) EDGAR (first) (mi)
ADDRESS: 4913 W SUGAR CREEK RD PHONE: (704) 596-7430
CITY: CHARLOTTE STATE: NC ZIPCODE:

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
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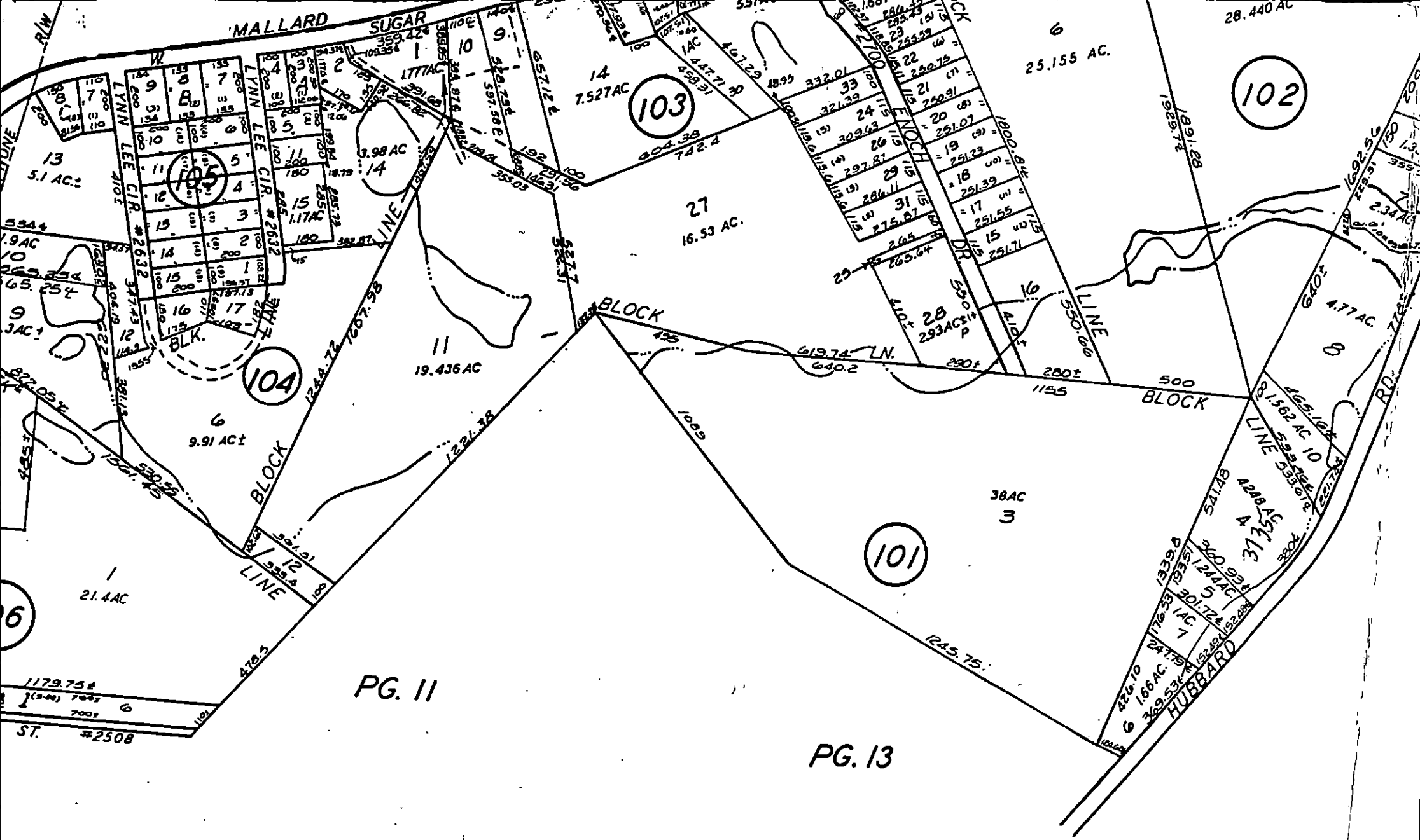
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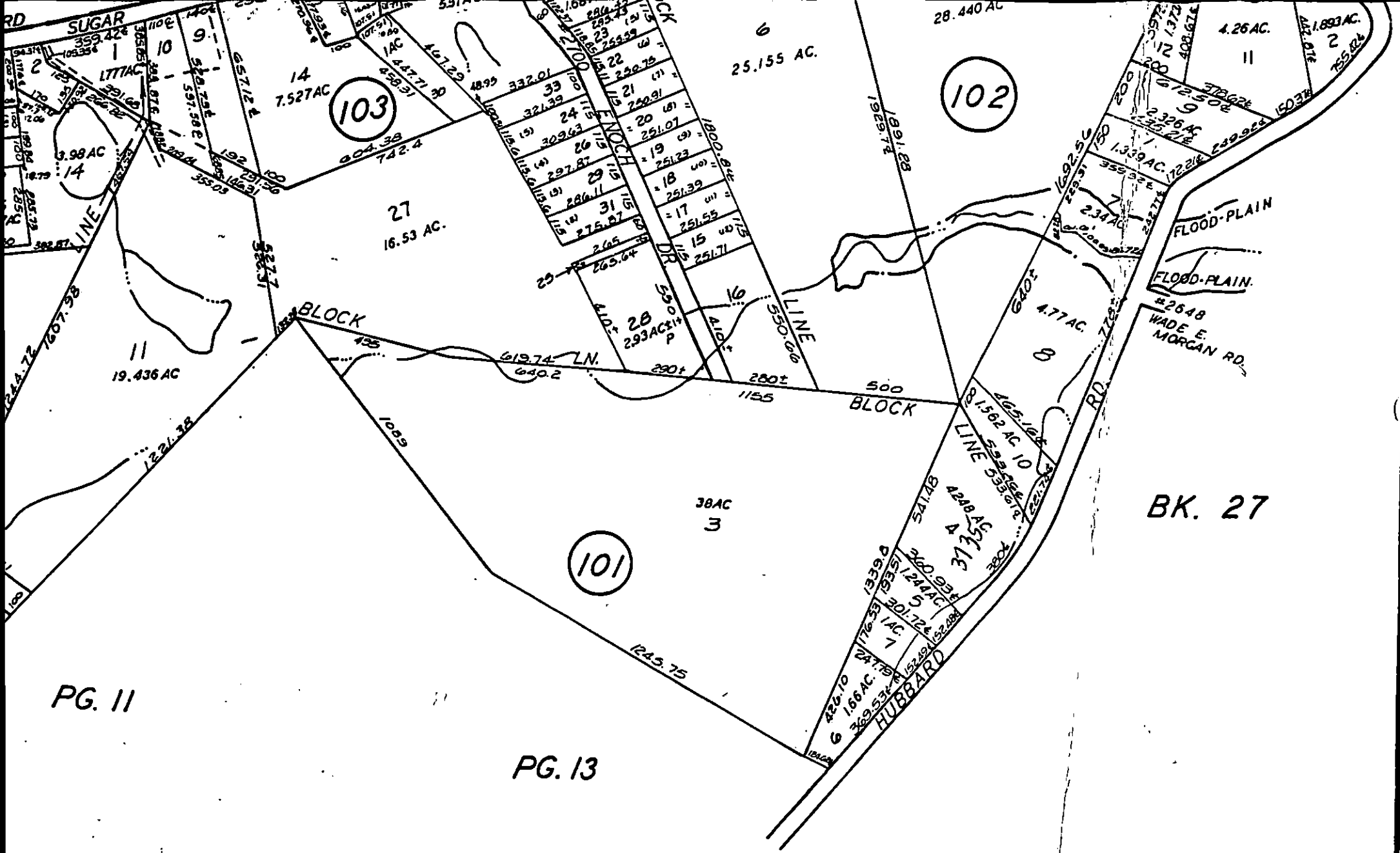
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WWATER : 122791


MALLARD
SUGAR
LYNN LEE CIR. #2632
LYNN LEE CIR.
ENOCH
DR.
BLOCK
LINE
105
104
103
102
101
27
16.53 AC.
11
19.436 AC
14
7.527AC
25.155 AC.
28.440 AC
9.91 AC±
21.4AC
38AC
3
4.77 AC.
1.562 AC
1.244AC
1.66AC.
2.34 AC
5.1 AC.±
1.17AC
3.98 AC
HUBBARD
RD.
ST. #2508
PG. 11
PG. 13
PG. 01
FOR TAX PURPOSES ONLY
TAX LINE MAP
MECKLENBURG COUNTY.
REVISED 4-24-92




| TAX LINE MAP | BOOK 43 PAGE 10 |
|---|---|
| MECKLENBURG COUNTY, NORTH CAROLINA | |
| REVISED 4-24-92 | SCALE 1" = 400' |