


10029 HAMBRIGHT RD

01723307

12/17/07

duponbj

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

# CERTIFICATE OF COMPLETION/OPERATION PERMIT

DHO

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

FILE: 8194A/302B DATE: 7/13/92

TC: 017 23 01 P ☐ L ☐ CRT

SERIAL Nº 14144

Name of Owner Ron Locatis Juris.:

Address of Property 10029 Hambright Rd

**Inspection Data:**

Tank Material PCC

Total Length of Drainfield 400

Number of Lines 6 @ 67'

Cover Depth 10"

Water Supply Source well

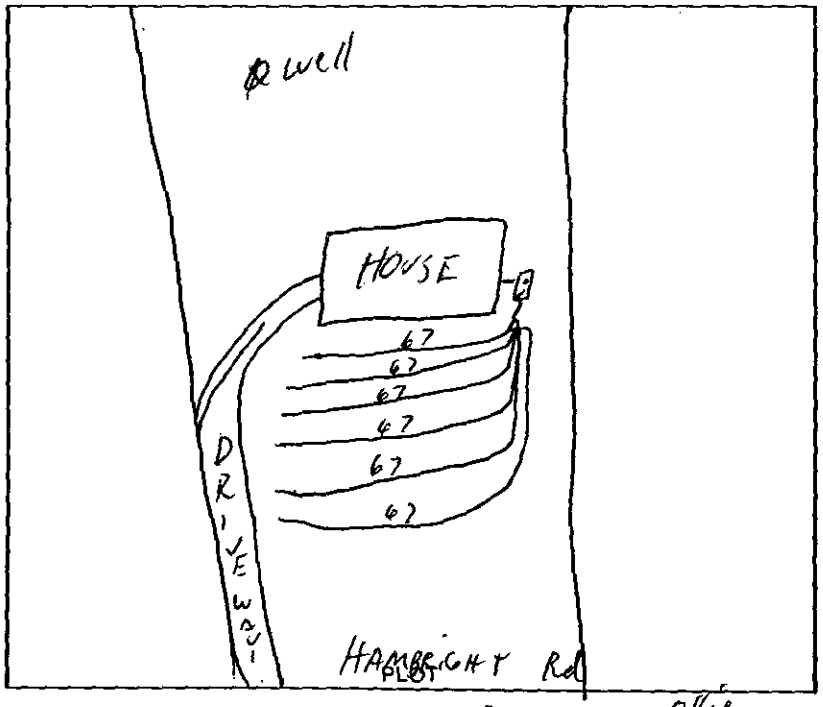
Distance to Water Source 750

Excavation Inspected 7/13/92

Tank(s) Inspected 7/13/92

Wash Line Inspected NA

High Water Alarm Inspected NA




Design: 1992, 1500ST, CON, 1200SFT, 12" stone Cecil CTR# office Cornelius

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 3 bedroom house

NO installation permit aquired from health dept ST

Phila S. Walker R.S.
Environmentalist

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

04/28/92 ck# 386 $200.00

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

302B/8194A

[ ] 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

Date: 4/28/92

PERSON FILING APPLICATION:
NAME: LOCATIS (last) R. (first) R (mi)
ADDRESS: 2325G Keaton Ave PHONE: (704) 547-8847
CITY: Charlotte STATE: NC ZIPCODE: 28269

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 017-233-01PO
STREET ADDRESS: 10029 Hambright Rd
ZONING: R-3

PROPERTY OWNER:
NAME: LOCATIS (last) Rm (first) L (mi)
ADDRESS: 2325 G Keaton Ave PHONE: (__) 547-8847
CITY: Chas STATE: NC ZIPCODE: 28269

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

TYPE APPLICATION (check one):

LOT NUMBER: 1 LOT SIZE (in acres): .62Ac

[ ] SOIL TEST - INDIVIDUAL LOT (D)
[X] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
[ ] 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) [X] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 3
SYSTEM CLASSIFICATION: 1

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: 4/28/92 Date: [signature]

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

Phillip S. Walker R.S. 5/11/92
Environmentalist Date

[signature] 5-13-92
Director or Authorized Section Head Date

WWATER : 122791

# Mecklenburg County
## Health Department

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

May 4, 1992

Ron R. Locatis
2325 G Keaton Avenue
Charlotte, NC 28269

RE: Property located on 10029 Hambright Road Lot #1/.62 acres
FILE: 8194A/302B
PARCEL: 017-233-01P0

Dear Mr. Locatis:

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 12618) is enclosed for your information.

While this classification indicates the site is acceptable for the installation of a septic tank system, no specific system or plans have been approved. The area available for such an installation may impose limitations on the size and/or type construction permitted on the lot. Our review process begins upon receipt of an Application for an Improvement Permit accompanied by a plot plan **drawn to scale with accurate dimensions indicated** detailing the location of **existing** well or type sewage disposal systems (if applicable), setbacks, and utility easements. Proposed buildings, etc. must be drawn on the plot plan to allow sufficient remaining space for the sewage disposal system and well. The well should be located 100 feet from any part of **any** sewage disposal system (including those located on adjacent properties).

Please note that this classification may be changed if any filling, grading or construction (including the drilling of a well) is performed on the lot which without **prior** approval from this Department. Current regulations in effect are "Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal: 15A NCAC 18A .1900, August, 1991". Changes in regulations may impact future approvals on this lot.

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

Sincerely,

Kelly Randall FOR GENE VAUGHAN

Gene Vaughan, R.S., Supervisor
Individual Water and Wastewater Systems

**MECKLENBURG COUNTY ENVIRONMENTAL HEALTH**
**SITE EVALUATION REPORT**
**SERIAL NUMBER** 12618

File: 8194A1 3023 Action 1

Parcel: PO 017-233-01 ☐ PC

Location: 10029 Hambright Road

Subdivision:

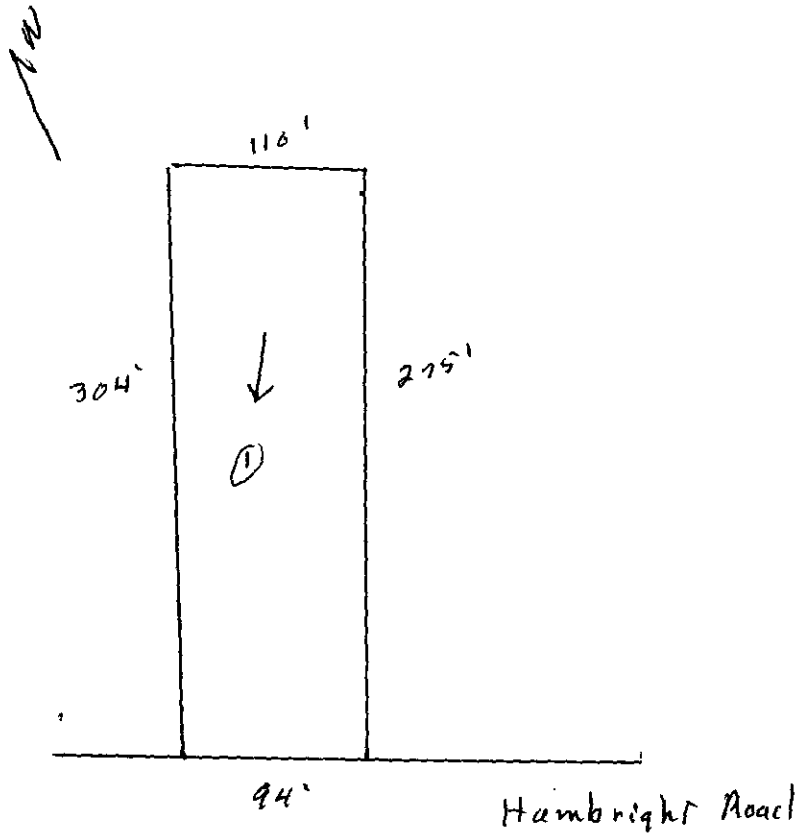
Lot: 1 Block: Acres: .62

Owner: Ron R. Locatis
Address: 2325-G Heaton Ave
Charlotte, N.C. 28269

Comments: 100% Repair, .3gal/FT²/day LTAR

Described by: William R. Marlin

Date: 4-30-92




***** 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 2-8% | S PS U | S PS U | S PS U | S PS U | S PS U |
| Texture | S (PS) U slightly Expansive clay | S PS U | S PS U | S PS U | S PS U | S PS U |
| Structure | S (PS) U sub-Blocky | S PS U | S PS U | S PS U | S PS U | S PS U |
| Drainage | (S) PS U 7+8" To water | S PS U | S PS U | S PS U | S PS U | S PS U |
| Depth | (S) PS U 7+8" | S PS U | S PS U | S PS U | S PS U | S PS U |
| Restrictive Horizons | (S) PS U 7+8" | 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 | IV Cecil-Lloyd | | | | | |
| Area Classification | S (PS) U | S PS U | S PS U | S PS U | S PS U | S PS U |

UPDATE COMPLETE

Applicant LOCATIS RON R Appl.Date 04/20/92 Updated 04/28/92
Mail Addr 2325-G KEATON AVE Phone 704 547-8847
City CHARLOTTE State NC Zipcode 28269
Prop Ownr LOCATIS RON R
Mail Addr 2325-G KEATON AVE Phone 704 547-8847
City CHARLOTTE State NC Zipcode 28269 Township 0
Tax Map No. 01723301PO0001 Road 10029 HAMBRIGHT ROAD Zoning
Sub/Mobil Sec Lot No. Lot Size
Type App D Site Y or Tract Type Bldg M System Classif NOT REQUIRED
Resident. Specif: No. Bedrooms 03 No. Occupants 03 Undgrnd. Stor. (Y/N)
Commercial/Industrial/Other Specifications:
Type No. Empl. No. Empl. per Shift
Industrial or Mfg. Wastes (Y/N) Underground Stor. Tank (Y/N)
Prop. Water Sup. P Proposed Sewage Construct. Status U Sites
Planned Future Additions (Y/N) Fee 0000.00 EHS Assigned 25002
Directions:

Date Appl. Recd. 04/20/92 Date Insp. Insp. Status
Date Letr. Sent Type Letr. Date Eval. Eval. Status
Date Perm. Date Cert.Iss. Disp.Code Followup
Denial Codes:
Repaired (Y/N) Rep. Date Perm. No. 00302B Operat. Permit (Y/N)
4/28/92 15:30:59
01-03 SA MW KS IM II S1 S1037498 KB

# PROPOSED PLOT PLAN

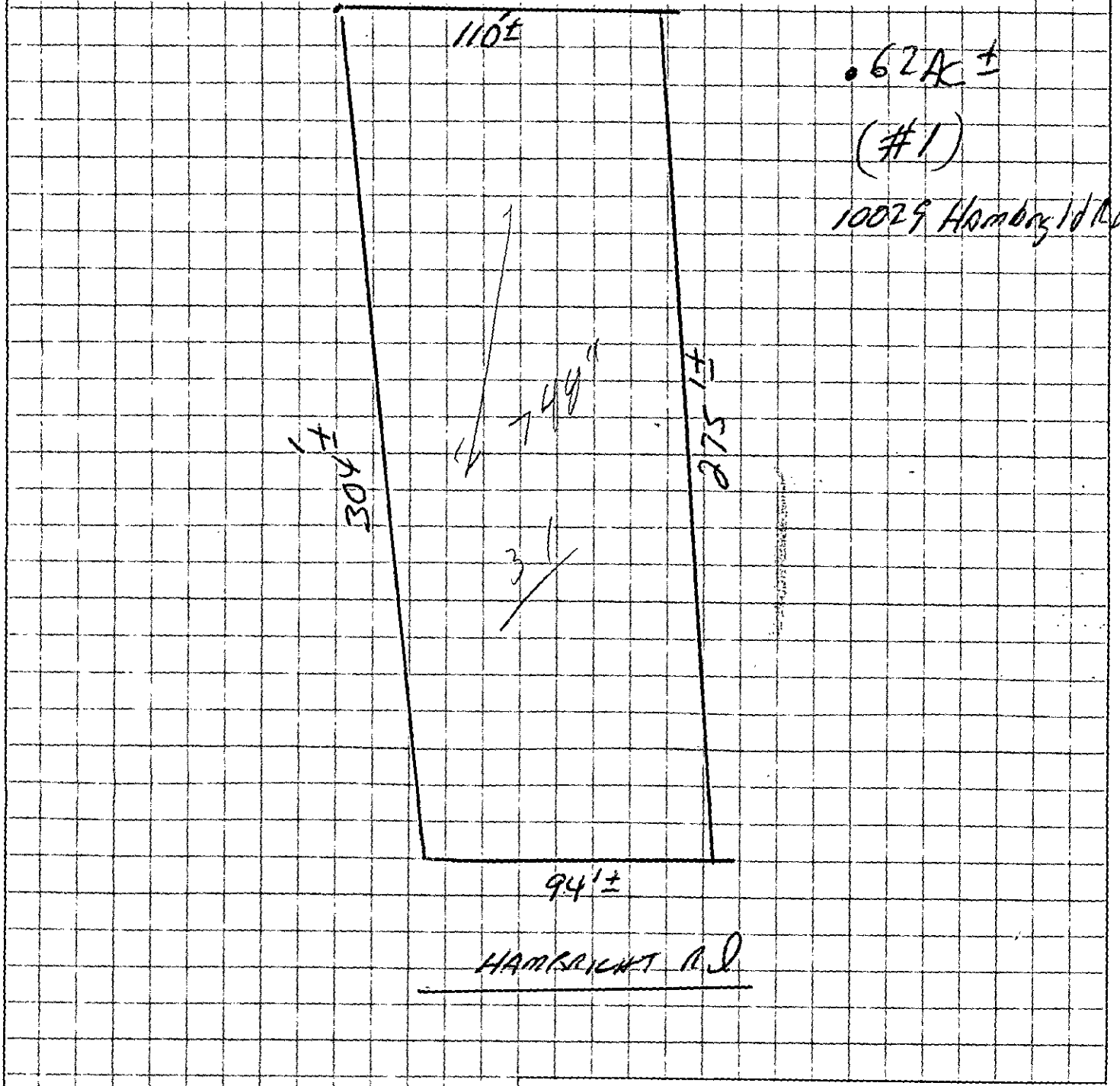
$150.00

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

FILE: 3021B (8194B)

TC: 017-233-01PO

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 _____

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

400 ☑ ck# 381 4/20/92 $50

# INDIVIDUAL WATER AND/WASTEWATER SYSTEMS PROGRAM
## APPLICATION FOR SERVICES

302B(8194B) LDL [ ] 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

PERSON FILING APPLICATION:
NAME: Locatis (last) Ron (first) R. (mi)
ADDRESS: 2325-G Keaton Ave PHONE: (704) 547-8847
CITY: Charlotte STATE: NC ZIPCODE: 28269

Date:

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: part of 017-233-01 Po
STREET ADDRESS: 10029 Hanbright Rd.
ZONING:

PROPERTY OWNER:
NAME: Locatis (last) Ron (first) R. (mi)
ADDRESS: 2325-G Keaton Ave PHONE: (704) 547-8847
CITY: Charlotte STATE: NC ZIPCODE: 28269

SUBDIVISION OR MOBILE HOME PARK NAME:

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

TYPE APPLICATION (check one):

LOT NUMBER: \ LOT SIZE (in acres): 1.62

[X] SOIL TEST - INDIVIDUAL LOT (D)
[ ] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
[ ] 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) [ ] HOUSE (H) [ ] MULTIPLE FAMILY (U)
[ ] DOUBLE WIDE (D) [X] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 3
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: Ron Locatis Date: 4/20/92

NOTICE:

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...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

WATER : 122791

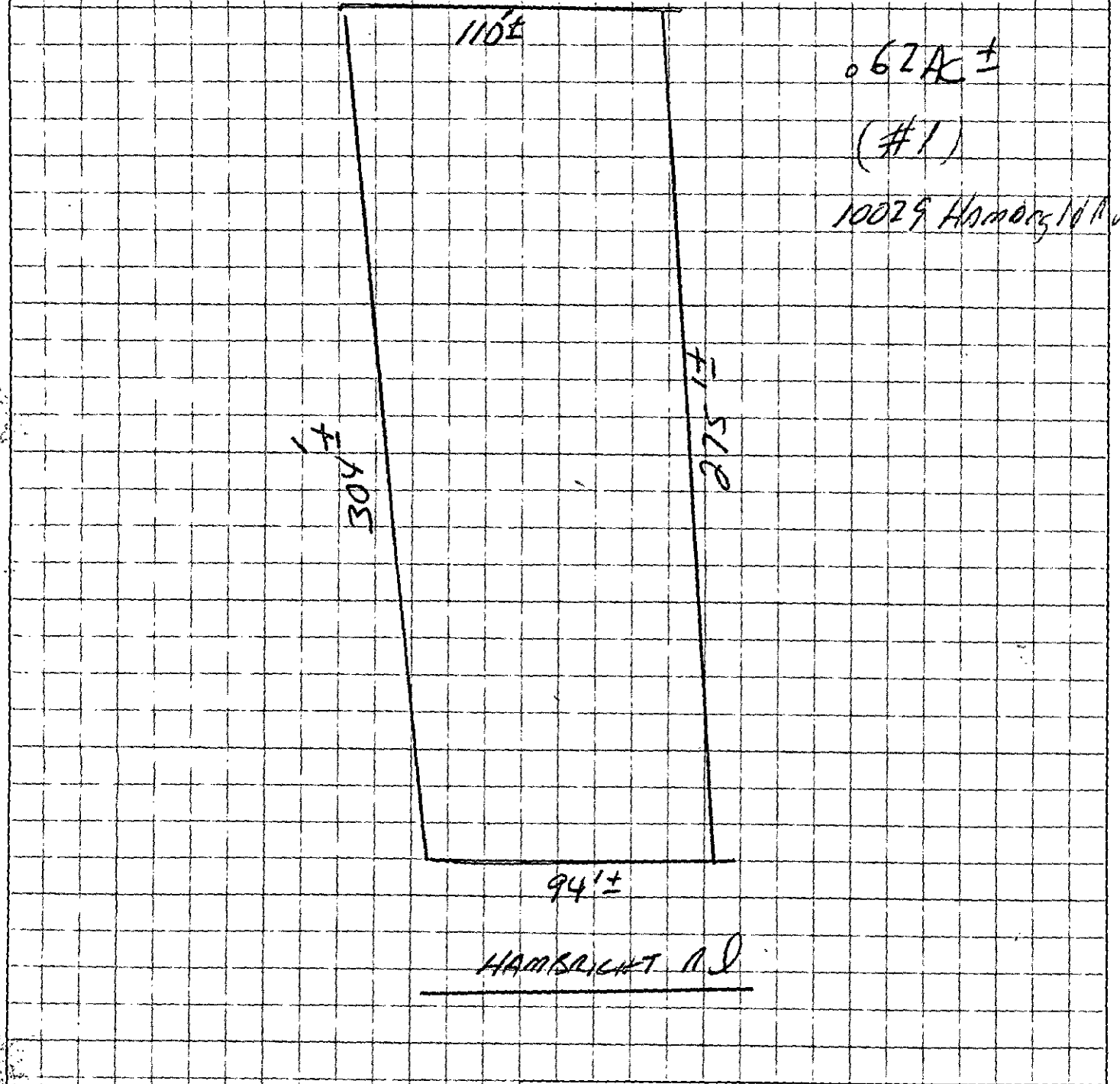
UCC ☑ **PROPOSED PLOT PLAN**

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

FILE: 30218 (8/94 B)

TC: 017-233-01 P0

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.



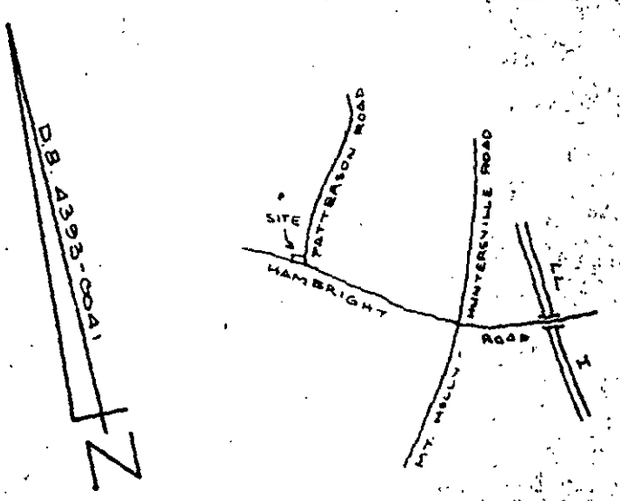

APPROVAL DATE _____

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

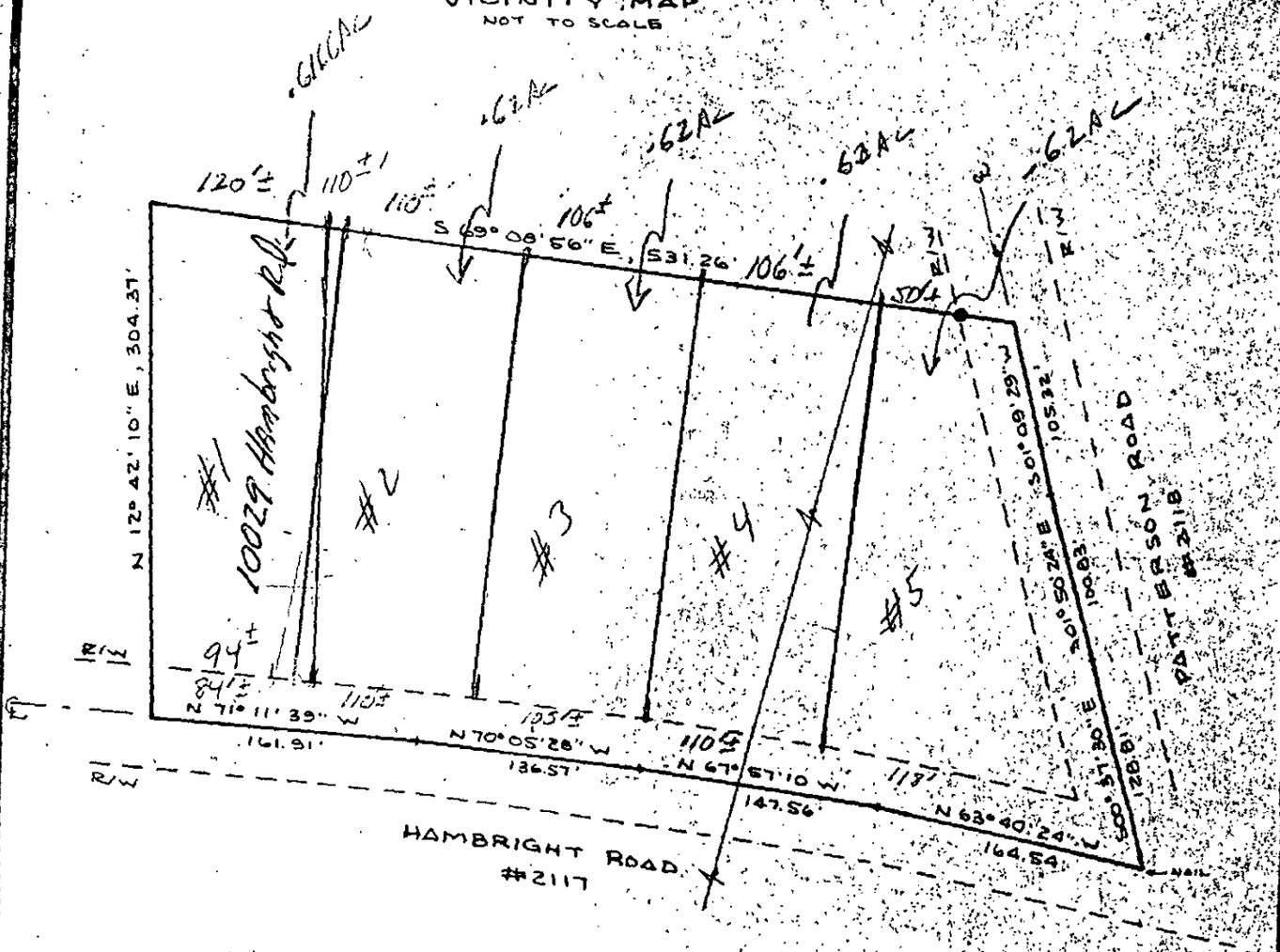
THIS IS TO CERTIFY THAT ON THE 8TH DAY OF APRIL 19 92, I SURVEYED THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE PROPERTY LINES, WALLS AND BUILDINGS ARE AS SHOWN HEREON; THAT THE BUILDINGS LOCATED ON SAID LOT DO NOT ENCROACH OR PROJECT ON ADJACENT STREETS OR PROPERTY; AND THAT NO ADJACENT BUILDINGS OR WALLS ENCROACH OR PROJECT ON SAID PREMISES.


**RICHARD BOYD BROOKS**
1200 JENKINS DR.
CHARLOTTE, NC 28212
704-568-1719


SIGNED _____
N.C. REGISTERED SURVEYOR L3598




VICINITY MAP
NOT TO SCALE




PLOT PLAN
OF
3.87 ACRES
LONG CREEK TOWNSHIP MECKLENBURG COUNTY, N.C.
PROPERTY OF
RONALD LOCATIS

SCALE 1" = 100' DEED RECORDED 4393-0041 MAP RECORDED _____

FIELD BOOK _____ JOB NO. 92057 ● - OLD IRON (E.I.P.) O - NEW IRON (N.I.P.) NPS - NO POINT SET

*SUBJECT TO UNDERGROUND UTILITIES, AREA BY D.M.D. METHOD OF AREA COMPUTATION, UPDATED _____ THIS PLAT DOES NOT CONFORM TO GS47-30

DK 402 [illegible] 35 [illegible] 200

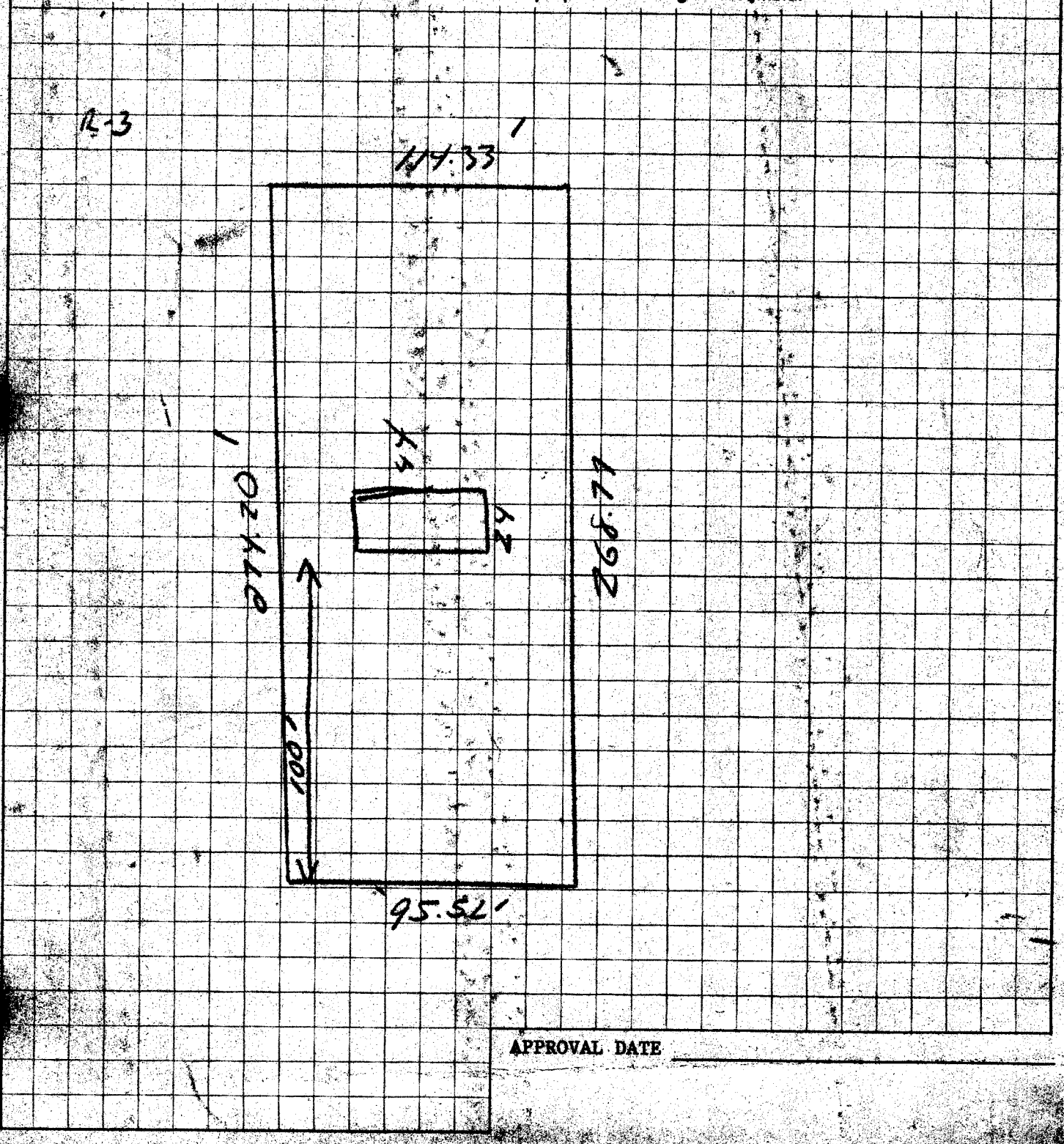
# PROPOSED PLOT PLAN

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

FILE: 302B/8194A

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 _____

White - Health Department's Copy  Canary - Environmentalist'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: 302B/8194A

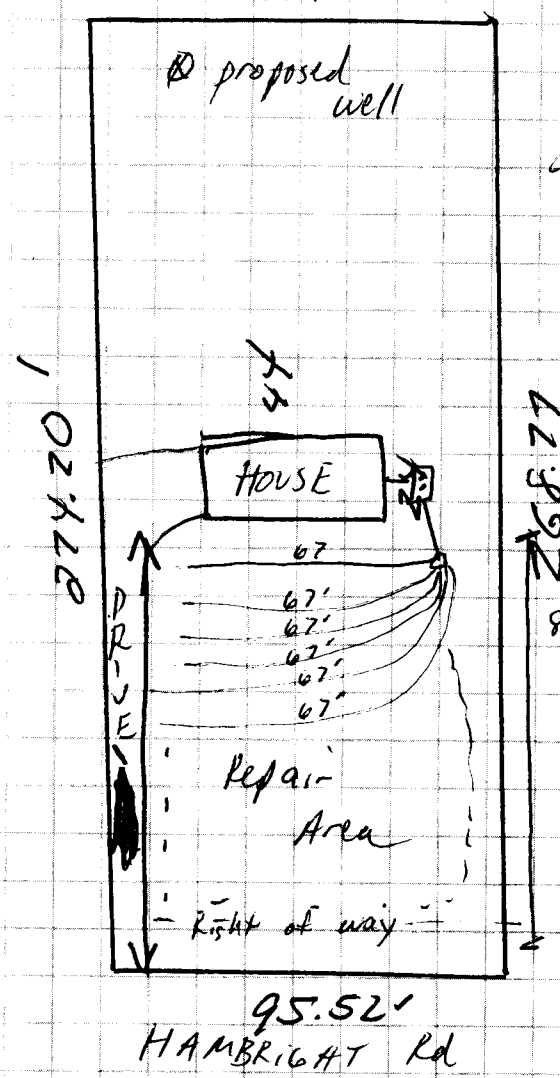
TC: _____

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.

1500 ST
6 lines x 67'long x 3' wd x 12" stone
400' total

Keep proposed well > 50 from any part of the septic system

Steve Shane
5-11-92




APPROVAL DATE PSW 5/11/92 appr

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