Date Received 1-20-84

RECEIVED
JAN 19 84
ENVIRONMENTAL HEALTH

SIR No. 20525
P.C. No. 195-141-04

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Ty-Par Realty, INC.
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER P.O. Box 763 MONROE, N.C. ZIP 28110

3) PHONE NO. Home _____ Office 372-0088

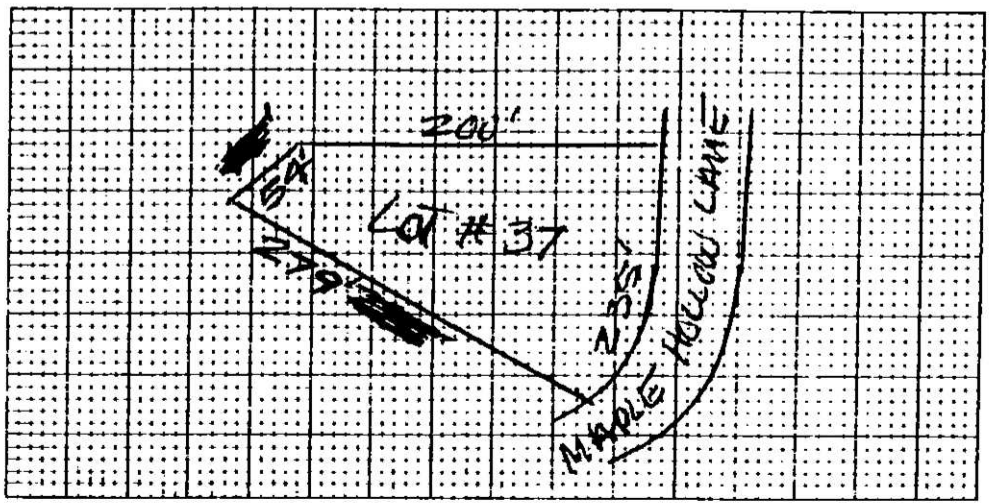
4) LOCATION OF PROPERTY 13838 MAPLE HOLLOW LANE
(STREET OR COUNTY ROAD)

5) SUBDIVISION COUNTRY WOODS LOT NO 37 BLOCK NO. _____

MAP BOOK NO _____ PAGE NO. _____

6) DEED REFERENCE DEED BOOK 4411 PAGE NO. 46

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation and an on site inspection of the lot hereinabove described for the purpose of determining if the lot is suitable for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge



7) ACCURATELY DIAGRAM & DIMENSION LOT

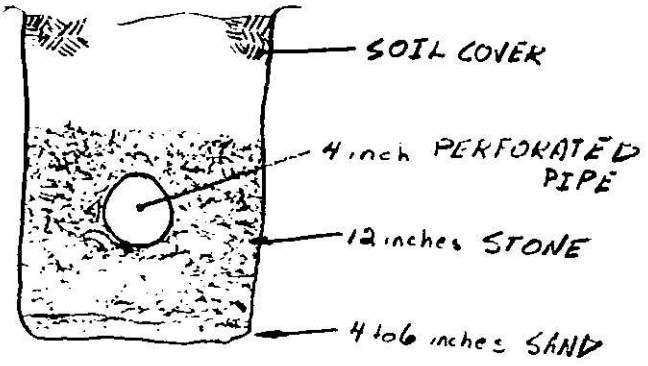
EDW FOR TY-PAR REALTY
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

TY-PAR REALTY
COUNTRY WOODS
LOT # 87

TRENCH CROSS-SECTION



MAXIMUM TRENCH DEPTH 18 inches

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203

SIR. NO. 20525
T.C. NO. PO 195-141-04
DATE: 3-5-84

Ty-Par Realty, Inc.
P.O. Box 763
Monroe, NC 28110

RE: Property located at 13838 Maple Hollow Lane

Dear Sirs:

At your request, a field investigation was conducted on the property designated above and was classified unsuitable for the installation of a ground absorption sewage disposal system. A copy of the site evaluation report is enclosed for your information.

Sites classified as unsuitable may be utilized for soil absorption disposal systems provided engineering, hydrogeologic, soil and environmental studies indicate that a suitable septic tank system or a suitable alternate system can be reasonably expected to function satisfactorily.

Should you desire to file for permission to install an alternate system, plans and specifications prepared by a person with a demonstrated knowledge of ground absorption sewage treatment disposal systems, soil and rock characteristics, groundwater hydrology and drainage systems should be submitted to this office. They will be reviewed and if it is found that the system may be reasonably expected to function satisfactorily, approval will be given upon the execution by you of "Septic Tank Agreemnt Form" provided by this office.

If I may be of assistance, please feel free to call.

Sincerely,
W. D. Ramsey
for

Bill D. Hardister, Jr.
Environmental Health Supervisor

BDH/kbg

Enclosure

Date Received 4-22 85

MECK CO DEPT OF ENVIRONMENTAL HEALTH
RECEIVED
APR 22 1985
ENVIRONMENTAL HEALTH

CAR(S) Application No. 20525

T. C. No. 195-141-04

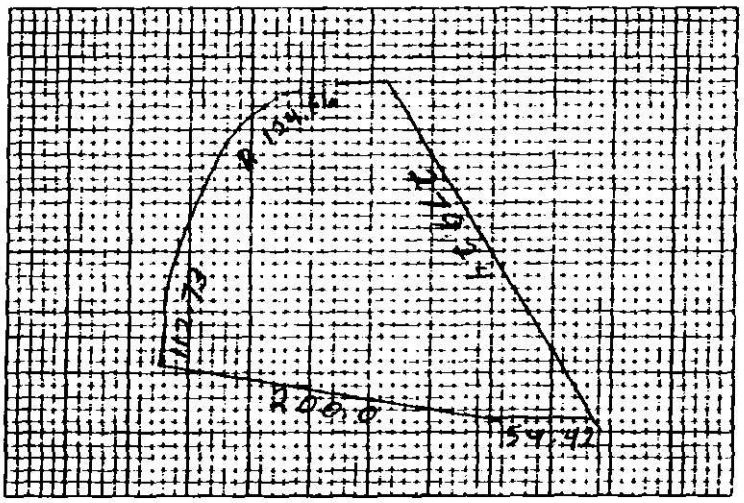
Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

Application for an
Installation, Construction, Alteration, and/or Repair Permit
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

The owner of that property described hereinafter hereby applies to the Mecklenburg County Department of Environmental Health for a permit to

1) X Install or Construct 2) Alter or Repair an individual septic tank wastewater treatment system with a subsurface, soil absorption, effluent discharge



3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ___ Yes X No
Residence X Yes ___ No

4) No of Bedrooms 3
5) Business Use — Max No Employees
6) Washing Machine X Yes ___ No
7) Garbage Disposal ___ Yes X No
8) Dishwasher X Yes ___ No
9) Water Supply
A) Individual Well X
B) Governmental System
C) Community System
1 Well source
2 Governmental source
10) Sewage System
House located within 200 feet of public sewer ___ Yes X No
House located within 200 feet of community sewer ___ Yes X No
11) FHA Case No
12) VA Case No.

13) NAME OF OWNER Ty-Par Realty, Inc. (LAST / FIRST / MIDDLE)

14) ADDRESS OF OWNER XXXXX P.o. Box 763, Monroe, N.C.

15) PHONE NO. Home ___ Office 372-0088

16) LOCATION OF SYSTEM 13838 Maple Hollow Lane (STREET OR COUNTY ROAD)

17) SUBDIVISION Country Woods Lot No. 37 Block No.

Map Book No. 20 Page No. 5

18) DEED REFERENCE — DEED BOOK 4411 AT PAGE 46

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES ___ NO DATE RUN

20) PTR NUMBER (See Instructions)

The undersigned person hereby agrees that he has read the foregoing application and that the contents of same are true. It is understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

3-18-85
DATE OF APPLICATION

OWNER Agent

EHD-5-76

PRESENTED FOR REGISTRATION

Feb 4 4 00 PM '86

CHARLES E. ALEXANDER
REGISTER OF DEEDS
MECKLENBURG CO. N.C.

COPY

FILE NO. 20525

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

ACKNOWLEDGEMENT OF REQUEST BY OWNER FOR RECLASSIFICATION OF SITE FROM "UNSUITABLE" TO "PROVISIONALLY SUITABLE" UNDER 10 NCAC 10A .1948(c)

The undersigned, TY-PAR REALTY, INC.

owner of property located at 13838 MAPLE HOLLOW LANE, LOT 37, PLAT OF COUNTRY WOODS, SECTION III

("the site") and described in an instrument recorded in Book 4411 at Page 46, Mecklenburg Public Registry, hereby acknowledges that he applied to the Mecklenburg County Department of Environmental Health ("the Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services at 10 NCAC 10A .1934 et seq; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested pursuant to 10 NCAC 10A .1948(c) that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data and other information which indicate to the Department that the septic tank system proposed by the undersigned can reasonably be expected to function satisfactorily and thus that the findings specified in 10 NCAC 10A .1948(c)(1), (2), and (3) can be made; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is his responsibility and that neither the Department nor its officials, employees or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

The undersigned further agrees for his heirs and assigns that, in the event any septic tank system installed under authority of the aforesaid permit fails to perform adequately in any respect, he will take whatever measures are required to correct same; or if such is impossible he will discontinue use of said system immediately.

Use of the singular masculine pronoun herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the names or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

This 24th day of January, 19 86.

ATTEST: Lynette C. Plyler
Secretary

TY-PAR REALTY, INC.
By: _____ (SEAL)

CORPORATE SEAL

_____ (SEAL)

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, _____, a Notary Public for said County and State, do hereby certify that _____ personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this _____ day of _____, 1986.

_____
Notary Public

My Commission Expires: _____

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, Jerry L. Carnes, a Notary Public for said County and State, do hereby certify that Lynette C. Plyler personally came before me this day and acknowledged that she is Secretary of Ty-Par Realty, Inc., and that by authority duly given and as the act and deed of said corporation, the foregoing instrument was signed in its name by its President sealed with its corporate seal and attested by her as its Secretary.

WITNESS my hand and notarial seal, this 24th day of January, 1986.

JERRY L. CARNES NOTARY PUBLIC UNION COUNTY, NC

_____
Notary Public

My Commission Expires: 10-8-90

APPLICATION FOR AN IMPROVEMENT PERMIT

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

(OFFICE USE ONLY)

FILE: 20525
PO
TC: 195-141-04

MECK COUNTY DEPARTMENT OF
RECEIVED
JAN
ENVIRONMENTAL HEALTH

JOB LOCATION

① ADDRESS: 13838 (STREET NO) maple Hollow Lane (STREET) ② FILE:

③ CITY: N/A ④ TAX PARCEL NO.: 195-141-04 (Part of)

⑤ SUBDIVISION: Country Woods, sect. III ⑥ LOT: 37 + PO 38 ⑦ BLOCK: N/A

OWNER

⑧ NAME: Ty-Par Realty, Inc. (FIRST) (MIDDLE) (LAST)

⑨ MAILING ADDRESS: P.O. Box 748

⑩ CITY: Monroe, N.C. ⑪ STATE: N.C. ⑫ ZIP: 28110

⑬ PHONE: (WORK) 372-0088 ⑭ (HOME) N/A

REQUEST

This request is for a(n):

⑮ [X] New installation permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify)

DESIGN CRITERIA

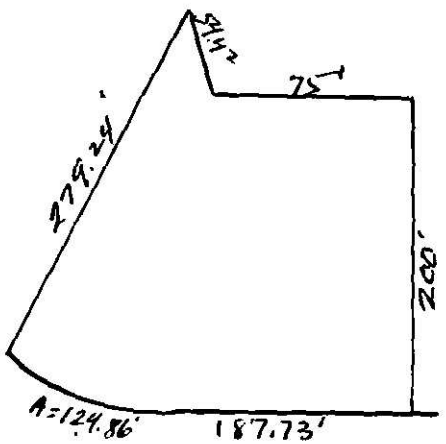
System will serve:

⑲ [X] Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 3 ㉕ Type?

㉓ Maximum occupancy? ㉖ Maximum number of employees?

㉔ Basement? ☐ yes [X] no ㉗ Maximum number of seats?



㉘ Accurately dimensioned plot

WATER SUPPLY

㉙ Water supply from (present or proposed):

A [X] Individual well

B ☐ Municipal system

C ☐ Community well

D ☐ Community system

㉚ The undersigned, owner of the property described above as "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed [signature]

Date: 12-30-83

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

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20525

T.C. NO. PO 195-141-04

(Ground Absorption Sewage Disposal)

OWNER: TY-PAR Realty, INC
ADDRESS: PO Box 763 MONROE 28110

PLAT NO:
LOT SIZE: 36,000 .83

LOCATION OF SITE: 8238 Maple Hollow LANE Lot 37

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U 2-4	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S PS (U) Mixed Clay	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S PS (U) Weak Blocky	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S PS (U) 24-36	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U NONE	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S PS (U) Very Slow	S PS U	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IIIe			
9. SITE CLASSIFICATION	Unsuitable			
10. SOIL SERIES	ENON			

S - Suitable PS - Provisionally Suitable U - Unsuitable

**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

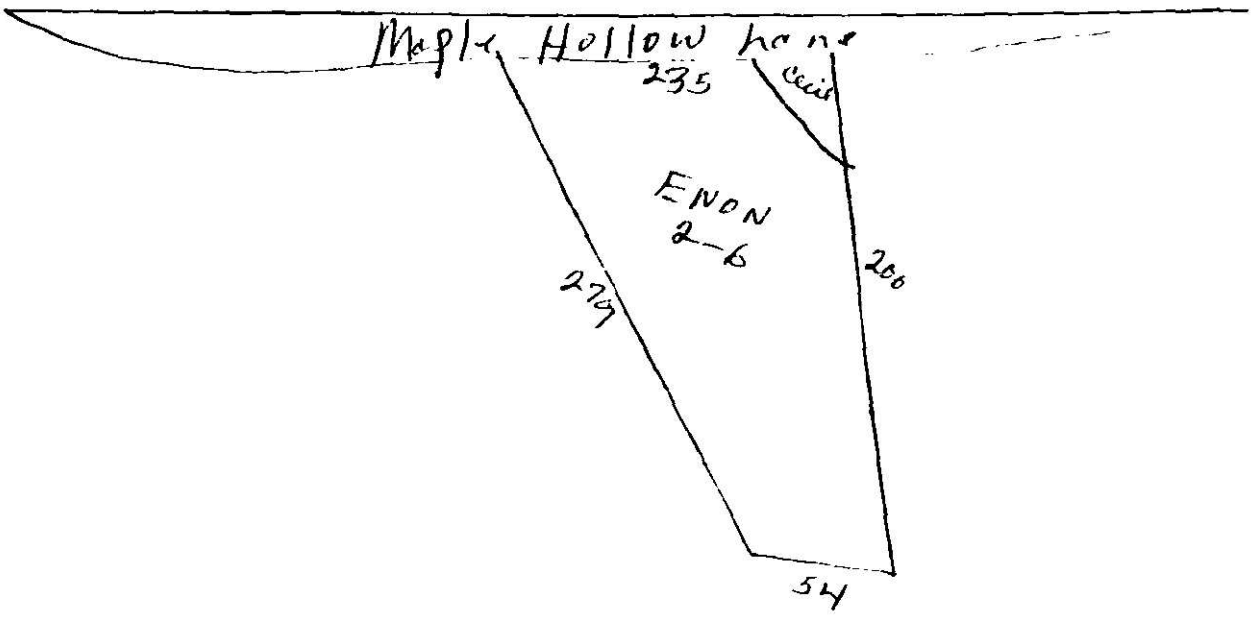
Recommendations/Comments: _____

Described by: Willard Kenney
Title: Soil Scientist

Date: 3-3-84

EHD 539 (Revised: 6/82)

2

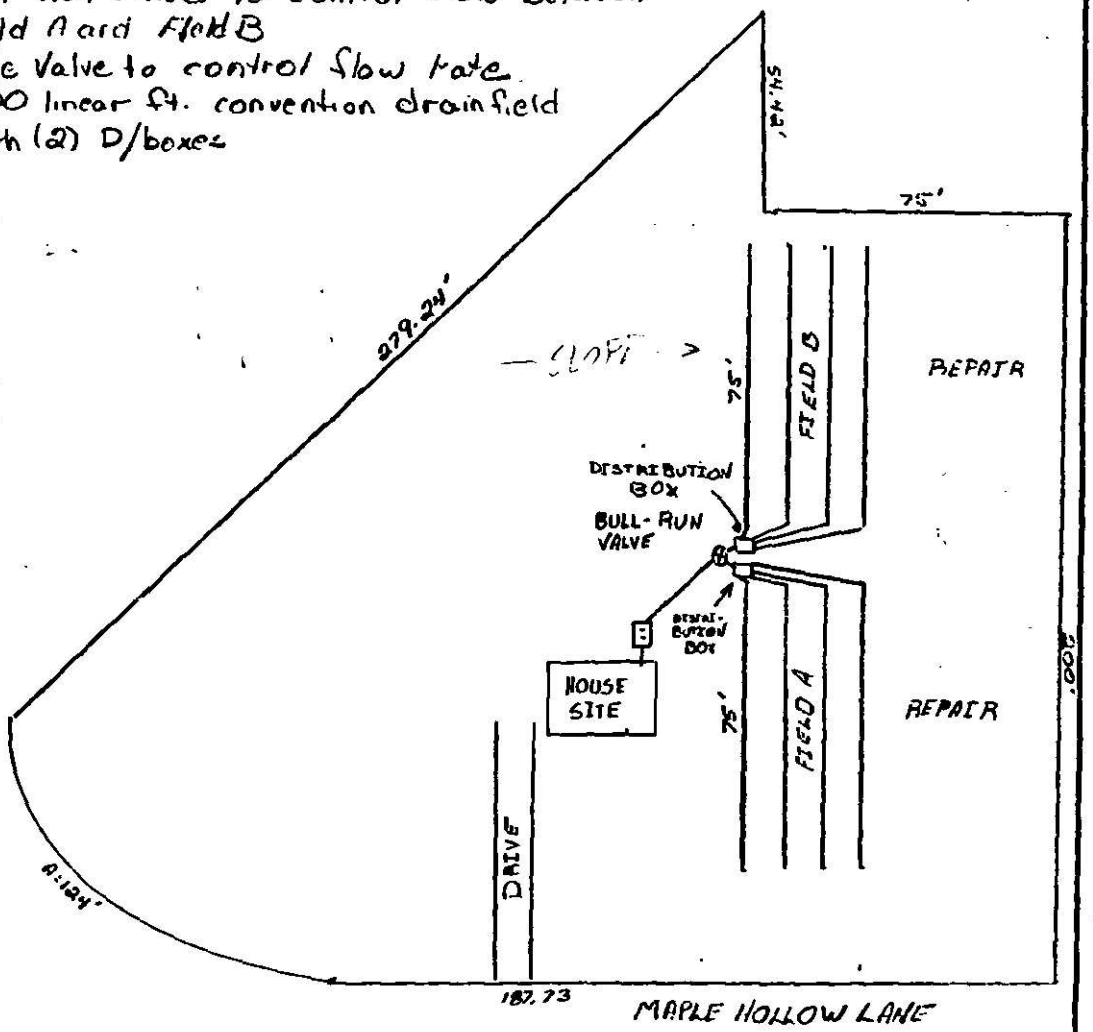


Lot 37

K. C. S., INC.
Stafford Street
Post Office Box 708
Monroe, North Carolina 28110
Phones: 704-283-7539 or 376-9359

JOB TY-PAR REALTY, INC lot 37
SUBDIVISION Country Ridge OF
CALCULATED BY DATE File 20525
CHECKED BY DATE
SCALE Scale 1" = 40'

System to consist of:
- 1500 gal Septic Tank
- 1,000 gal Pump Tank with high water alarm, float controls, and effluent pump
- Bull-Run Valve to control flow between Field A and Field B
- Gate Valve to control flow rate
- 600 linear ft. convention drainfield with (2) D/boxes



John,

This lot 37 already has a drain field installed
It is a ~~1500 ST~~, DV, MOD, 1800 SFT, 12G, 6S, ENON.
It was cut off from the house next door. ⇒ Lot 39.
It will ~~[illegible]~~ require a new 1500 ST and
a new bull-run valve ~~[illegible]~~. The lot they want to
build on has 100% repair

[illegible] 8-13-86

Date Issued 2/5/86

Serial No. 9326

SIR No. 20525

T. C. No. 195-141-04

Map Date C CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Ty-Par Realty, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P. O. Box 748, Monroe ZIP 28110

LOCATION OF LOT 13838 Maple Hollow Lane
(STREET OR COUNTY ROAD)

SUBDIVISION Country Woods LOT NO. 37/38 BLOCK NO.

MAP BOOK NO. PAGE NO.

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, on an on-site inspection of the said lot; and upon the information supplied in the "Application for an Installation, Construction, Alteration, and/or Repair Permit", number 20525. This approval is subject to the following terms and conditions:

1. That the nitrification field be installed, constructed, altered and/or repaired in the same area where the soil investigation was run.
2. That an "Installation, Construction, Alteration, and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altered, and/or repaired and that the system be installed in accordance with same.

* * * * AGREEMENT FORM ON FILE * * * *

This approval may be revoked and the building inspection department requested to revoke any building permit (s) which have been issued to authorize construction on the said lot if at any time it is determined that any information contained in the "Application for an Installation, Construction, Alteration, and/or Repair Permit" is not correct or is untrue or that the septic-tank system is not being installed, constructed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit. # LIFT STATION MAY BE REQUIRED #

B. K. Ferguson
Environmentalist

Bill D. Sanders
Environmental Health Director, or Authorized Section Head

EHD-S-76

Site reclassified Provisionally Suitable pursuant to 10 NCAC 10A .1946 (c) and Departmental policy regarding alternate septic tank system installation.

Environmental Health Department's Copy

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

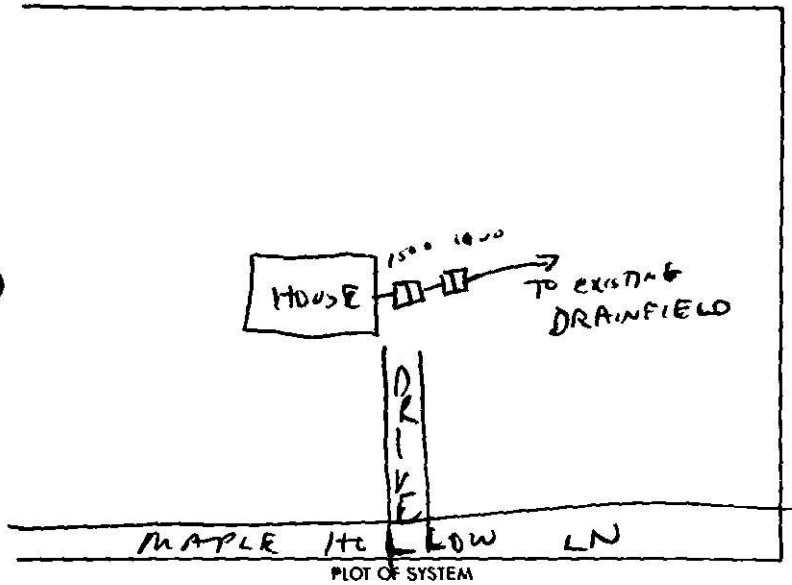
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 20525 DATE: 4-29-86

TC: 195-141-04 01

SERIAL № 10402

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 12-30-85. All work shall be completed on or before 10-29-86, 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 Department of Environmental Health 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 1000 gallons

Tank Construction PCC

TRENCHS AND DRAIN LINE ALREADY INSTALLED

Absorption and or Nitrification Lines:
Trench Width _____ feet

Total Line Length _____ feet

Number of Lines _____

Depth of Stone _____ inches

Distance from House _____ feet

Distance from Property Line _____ feet

Distance from Well _____ feet

NAME OF OWNER T-PAR REALTY INC

LOCATION OF PROPERTY 13829 MAPLE HOLLOW LN

Comments: 1500 gallon septic tank + 1000 pump tank - drain field already installed - change diversion to bull run valve

J. M. Johnson
Division or Section Head

Kelly Crandell
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 Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

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

C of A (s) No. 20525

Date Issued 11-3 86 **Serial** 8994 T. C. No. 195-141-04

✓ CKT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner TY - PAR REALTY INC
LAST FIRST MIDDLE

Location of Property 13828 MAPLE HOLLOW LN

Application Number 20525 Permit Number 20525

Inspection Data:

Liquid Capacity of Tank 1500 ST + 1000 PT Tank Material PCC

Total Length of Drain Tile existing Number of Lines existing

Depth of Filter Material existing Cover Depth existing

Water Supply Source well Distance from Water Source 50' +

Excavation Inspected existing DATE Tank Inspected 11-3-86 DATE

Nitrification Field Inspected existing DATE

Washing Machine Line Inspected, If Applicable DATE

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been ✓ installed or constructed, altered or repaired in accordance with the permit issued and the regulations of the Mecklenburg County Health Commission in effect on the date of issuance of the permit. The issuance of this Certificate of Approval 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 Certificate of Approval is issued subject to those restrictions and conditions shown on the permit(s) in addition to those listed below under comments. This Certificate of Approval 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 LOT 37 38, 39 SPLIT INTO 2 LOTS NOW 37, 39. LOT 37 HAS 1500 ST, 1000 PT, PL, DIV, MOD 1000 SFB, 12 G, GS, ENCN. THIS WAS EXISTING DRAINFIELD FOR LOT 39.

[signature]
Environmentalist

EHD-5-76

Sol

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: 20525

TC: 195-141-57

SERIAL: № 18864

☐ L ☒ CRT

JOB LOCATION

① ADDRESS: 13838 (STREET NO) Maple Hollow Ln. (STREET) ② FILE:

③ JURISDICTION: ④ TAX PARCEL NO.:

⑤ SUBDIVISION: County Woods ⑥ LOT: 57+58 ⑦ BLOCK:

OWNER

⑧ NAME: Scott (FIRST) Bruce (MIDDLE) Harris (LAST)

⑨ MAILING ADDRESS: 13838 Maple Hollow Ln.

⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28227

⑬ PHONE: (WORK) 847-2244 ⑭ (HOME) 545-6440

REQUEST

This request is for a(n):

⑮ ☐ New permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☒ Other (specify) Detached Garage

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 3 ㉕ Type?

㉓ Maximum occupancy? 4 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

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: [signature]

Date: 7-18-89

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved Request for the Job Location contained in this document. This approval 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 Department.

... This permit is not transferable, and shall become null and void months from the date of issuance. Use existing system

[signature] Whittaker 8/1/89
Environmentalist Date

[signature] 8-1-89
Director or Authorized Section Head Date

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

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

DATE: June 18, 1989

NAME/COMPANY: [illegible]

Sanitation _____

Vector Control _____

OPWD ✓

SERVICE: [illegible]

#1 [illegible]

ENVIRONMENTAL HEALTH DIVISION

PAID

JUL 18 1989

FEE: 25 —

[illegible]

Completed By

[illegible]

Collected By

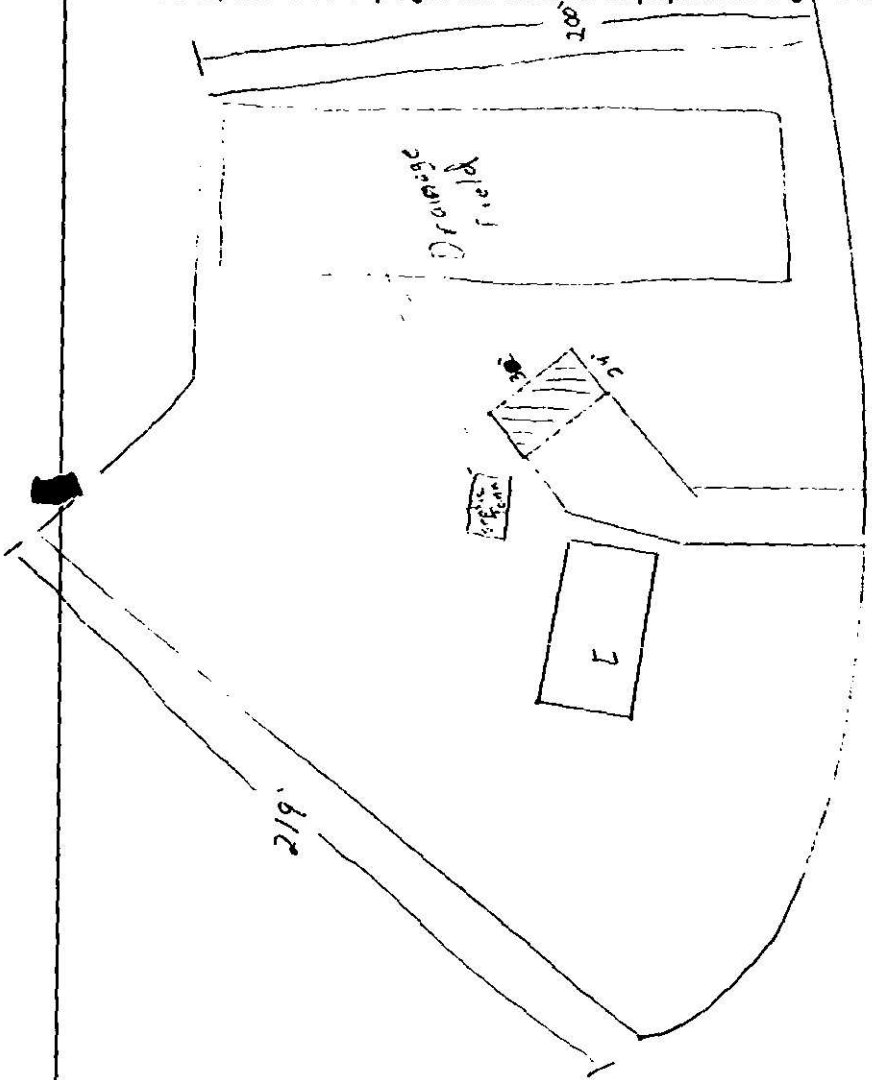
PROPOSED PLOT PLAN

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

FILE: 90525

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.



Signed: _____

Date: 7-18-89