

5631 WEST BV

14120201

7/9/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 7641A DATE: 4/22/98
TC: P0141-02201 ☐ L ☐ CRT
SERIAL Nº 17578

Name of Owner Phoenix Recycling Juris.:
Address of Property 5631 West Blvd.

Inspection Data:

Tank Material PCC
Total Length of Drainfield 550' OK
5x (110') OK
Number of Lines 5 @ 110' OK
Cover Depth 12" OK
Water Supply Source N/A
Distance to Water Source N/A
Excavation Inspected 4/27/98 OK
Tank(s) Inspected 4/22/98 OK TEST
Wash Line Inspected N/A
High Water Alarm Inspected N/A

PLOT

Design 1200 SQ FT, 1500 ST, 12", CECILLIKE CTR# RCS

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 I5A NCAC 18A. 1900, "Laws And Rules For Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. This 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 I5A NCAC 18A. 1990 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.

Notice: Disturbance of the designated repair area may result in the suspension/revocation of this permit.

COMMENTS: System Type II A - Designed Daily Flow based on 20 Employees

Judy J. Kuss, RS.
Environmental Health Specialist

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

CK# 1036

FEE: 100.00 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: 2/20/98 **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: 2/19/98 PERMIT NO: 7641A
PARCEL NO: 14102201

JOB LOCATION ADDRESS: 5631 West Blvd.
PROPERTY OWNER: Phoenix Recycling Co.
BUILDING CONTRACTOR:
SUBDIVISION NAME:
AUTHORIZATION ISSUED BY: Jon E Thigpen DATE: 2/19/98
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 7641A, 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: Installation Approval Required

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.

Brian Kennedy Feb. 20, 1998
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

Permit Number 7644A

CONDITIONS OF IMPROVEMENT PERMIT

Tax Number: 14-022-01 PO

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
3 Long-term acceptance rate	500 Max gallons/day wastewater flow	1666 Absorption Area (sq ft)		9 Trench spacing (min. on centers)
NO Serviced by private well	1500 Gallon septic tank	555 Total trench length (ft)		36" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
___ Bedrooms in residence 20 Employees	___ Gallon pump tank	12 Depth of stone		

Any surface waters present: NO Type: Minimum separation distance:

Site modifications required: PUMP WILL BE REQUIRED IF GRAVITY FLOW CAN NOT BE ESTABLISHED.

Additional Conditions:
① System shall be installed on contour.
② Area shall not be graded or disturbed prior to installation.

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
1666 Absorption Area (Sq ft) 555 Total Trench Length (Ft)	12" Depth of Stone Trench	9 Trench spacing (min. on centers)		36 Maximum Trench Depth

For existing system, enter the year originally installed:

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.

Joni E Wiggins 2/18/98
DEHNR Authorized Agent Date

H Brian Kennedy Feb. 20, 1998
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

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

Sheet
PROPERTY ID #:
COUNTY:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

#1 76 41A
PO 141-622-01

OWNER: Charlotte Mecklenburg Airport Auth. APPLICANT: _____
ADDRESS: 600 E. Fourth St. Char. APPLICATION DATE: _____ DATE EVALUATED: _____
PROPOSED FACILITY: recplayground PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: 5631 West Blvd PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☑ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LAND-SCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LS	0-6"	gr/cl	Fr/SEXP/SS/SP	>44" TO chroma 2 colors	44"	N/A	None	PS IV .39/F7
		6-30"	SBK/C-SC	Fr-Fi/SEXP/SS/SP					
		30-44"	SBK/SCl	Fr/SEXP/SS/SP					
2	LS	0-3	clay F:cl		>47" TO chroma 2 colors	47"	N/A	None	PS IV .39/F2
		3-9"	gr/cl	Fr/SEXP/SS/SP					
		9-47"	SBK/C	Fr-Fi/SEXP/SP					
3	LS	0-6"	F:ll		>46" TO chroma 2 colors	46"	N/A	None	PS IV .39/F2
		6-12"	gr/cl	Fr/SEXP/SS/SP					
4	LS	0-3"	F:ll		>50" TO chroma 2 colors	50"	N/A	None	PS IV .35/F2
		3-9"	gr/cl	Fr/SEXP/SS/SP					
		9-50"	SBK/C	Fr-Fi/SEXP/SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	Lim. Tec/ PS	PS
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): Provisionally Suitable
EVALUATED BY: W. A. Mack
OTHER(S) PRESENT: _____

COMMENTS:

Probably more depth additions may appear to be available

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL 1955 LTAR	LPP 1957 LTAR	MINERALOGY/ CONSISTENCE	STRUCTURE
C (Concave Slope) V (Convex Slope) (Drainage Way) S (Debris Slump) P (Flood Plain) S (Foot Slope) (Head Slope) (Linear Slope) (Nose Slope) (Ridge) (Shoulder Slope) (Terrace)	I	S (Sand) LS (Loamy Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive) SEXP (Slightly Expansive) EXP (Expansive)	G (Single Grain) M (Massive) CR (Crumb) GR (Granular) SBK (Subangular Blocky ABK (Angular Blocky) PL (Platy) PR (Prismatic)
	II	SL (Sandy Loam) L (Loam)	0.8 - 0.6	0.4 - 0.3		
	III	SI (Silt) SICL (Silty Clay Loam) CL (Clay Loam) SCL (Sandy Clay Loam) SUC (Silt Loam Clay)	0.6 - 0.3	0.3 - 0.15		
	IV	SC (Sandy Clay) SIC (Silty Clay)	0.4 - 0.1	0.2 - 0.05		
		O (Organic)	None			

	MOIST	WET
	VFR (Very Friable)	NS (Non-sticky)
	FR (Friable)	SS (Slightly Sticky)
	FI (Firm)	S (Sticky)
	VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
	EFI (Extremely Firm)	NP (Non-plastic)
		SP (Slightly Plastic)
		P (Plastic)
		VP (Very Plastic)

OTES

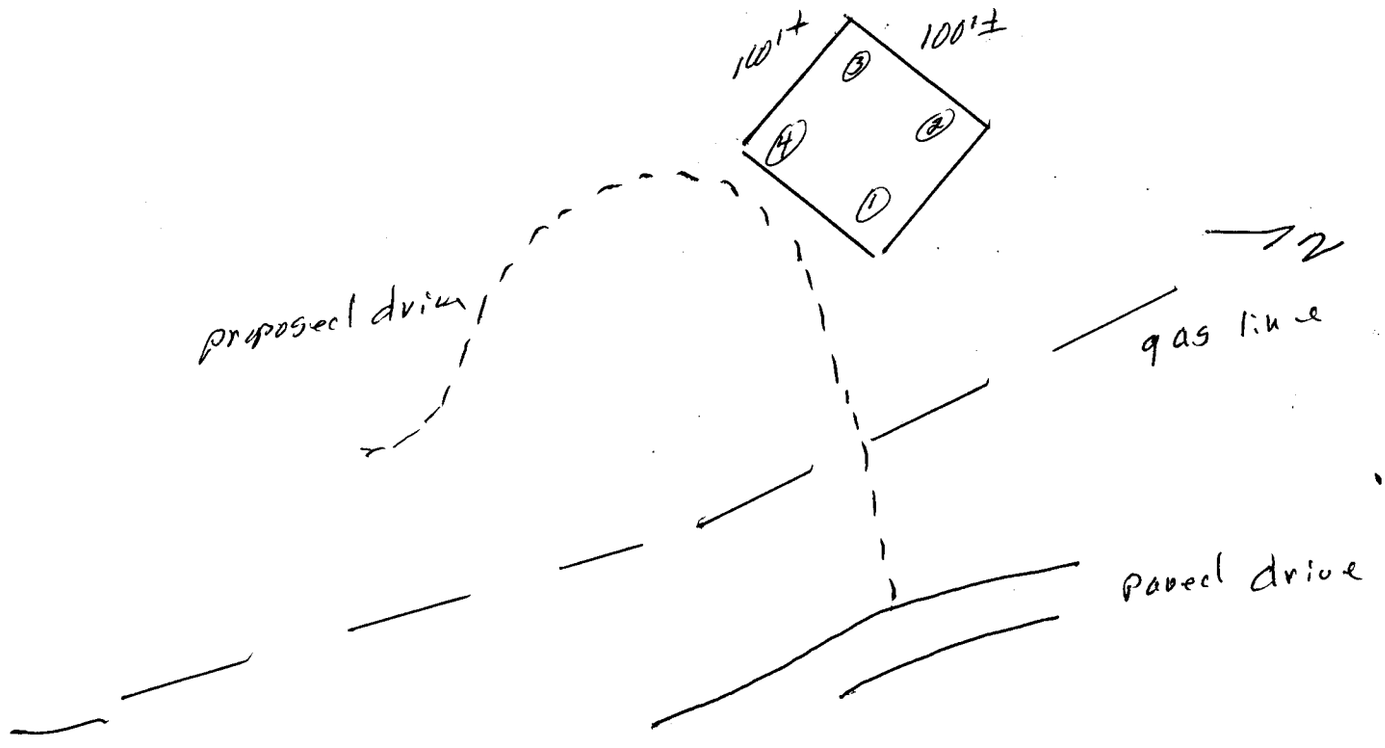
ORIZON DEPTH	In inches below natural soil surface
EPTH OF FILL	In inches from land surface
ESTRUCTIVE HORIZON	Thickness and depth from land surface
PROLITE	S(suitable) or U(unsuitable)
OIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designatio
LASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

valuation of saprolite shall be by pits.

ong-term Acceptance Rate (LTAR): gal/day/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).

7641A



FEE: 100.00 CK# 4901
DATE: 4/3/96
Tree.

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

[redacted]

[ ] CRT

TYPE APPLICATION: ✓ 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 #: 7641A

PROJECT TRACKING #:

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 141-022-01

✓ COMMERICAL ___ INDUSTRIAL

STREET ADDRESS: 5631 WEST BV.

DESCRIBE TYPE OF BUSINESS:
CONSTRUCTION AND DEMOLITION DEBRIS RECYCLING
Square footage of facility:

LOT NUMBER:

TOWNSHIP (CHECK ONE):

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

NUMBER OF EMPLOYEES: 20
PER SHIFT: 12 8 ___

HOW WILL WATER BE USED IN THE FACILITY:

✓ TOLIETS/URINALS
✓ HANDSINK
___ SHOWERS
___ FLOOR DRAINS
✓ OTHER, PLEASE DESCRIBE: DUST CONTROL ON PROCESS EQUIPMENT

TYPE OF WASTEWATER:
✓ 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) ✓ 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: Charlotte-Mecklenburg Airport Auth.

NAME: City of Charlotte (LAST) (FIRST) (MI)

ADDRESS: 600 E Fourth ST

CITY: Charlotte STATE: NC ZIP: 28202

DAYTIME PHONE: ( ) ---

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: FLOYD M. WAYNE (LAST) (FIRST) (MI)

DAYTIME PHONE: 919 846 - 8666

Phoenix Recycling Corp. 5922 Six Forks Rd.
Raleigh, N.C. 27609

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: [signature]

DATE: 4-3-96

PHOENIX RECYCLING CORPORATION
PRC
SPECIALIZING IN RECYCLING CONSTRUCTION & DEMOLITION DEBRIS

Post Office Box 3856
Wilson, NC 27895

(Shipping)
7802 Sadie Road
Kenly, NC 27542

919 237-2800
919 237-6906 (Fax)

April 12, 1996

Mrs. Toni Higgins-Bunny RS
Mecklenburg County Health Department
Environmental Health Office
700 North Tryon Street
Charlotte, NC 28202

Re: Phoenix Recycling Corporation
Septic Tank/Nitrification Line Location
5631 West Boulevard, Compost Central

Dear Ms. Higgins-Bunny:

Thank you so much for your time and efforts in helping Phoenix Recycling Corporation (PRC) site our proposed septic tank/nitrification system on the above referenced site. I have enclosed a detailed site drawing indicating the approved location of both the proposed nitrification lines and replacement area. As you have directed, PRC will maintain the replacement area in its original condition, not storing, traveling over or otherwise impacting the area's ability to be utilized for possible future nitrification lines.

I have been in contact with Mr. Robert Brandon, Zoning Supervisor for Charlotte-Mecklenburg regarding placement of the septic tank nitrification field and replacement area within the 100' buffer area. Mr. Brandon has agreed to allow PRC to utilize this area as long as we maintained your setback requirements (10') with respect to the property line.

PRC appreciates your efforts in assisting us with this endeavor. We look forward to working with you and your department in the future.

Best regards,

PHOENIX RECYCLING CORPORATION

M. Wayne Floyd (shb)

M. Wayne Floyd
Vice President

MWF/shb

PHOENIX RECYCLING CORPORATION
PRC
SPECIALIZING IN RECYCLING CONSTRUCTION & DEMOLITION DEBRIS

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Best regards,

PHOENIX RECYCLING CORPORATION

M. Wayne Floyd (shb)

M. Wayne Floyd
Vice President

MWF/shb

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To Sylvia Danks	From Allen Hardy
Co. Meck. Co.	Co. DEM
Dept	Phone # (704) 663-1699
Fax # (704) 336-6844	Fax # (704) 663-6040

Received 11/19/91

7641A

State of North Carolina
Department of Environment, Health, and Natural Resources
Mooresville Regional Office

James G. Martin, Governor
William W. Cobey, Jr., Secretary

Albert F. Hilton, Regional Manager

DIVISION OF ENVIRONMENTAL MANAGEMENT

November 19, 1991

Mr. Bobbie Shields, Director of Engineering
Mecklenburg County
700 North Tryon Street
Charlotte, North Carolina 28202

Subject: Permit No. WQ0005617
Central Yard Waste Processing
Subsurface Disposal
Mecklenburg County

Dear Mr. Shields:

This letter is to inform you that Mr. Allen Hardy with this Office performed an as-built inspection on November 18, 1991 of the subject facility.

The facilities appear to have been properly constructed in accordance with the approved plans and specifications with the exception of some minor changes which should be submitted on as-built plans. Therefore, use of these facilities can begin under the terms and conditions of the Permit.

If you have any questions, please contact Mr. Allen Hardy or me at this Office.

Sincerely,

for D. Rex Gleason, P. E.
Water Quality Regional Supervisor

cc: Mecklenburg County Health Department

WAH:wah

Yard Waste Facility

- David Morton - 2713

7641A

CHARLOTTE-MECKLENBURG BUILDING STANDARDS **PAGE:** 1
PROJECT REVIEW DISCIPLINES

PROJECT INFORMATION

PROJECT NUMBER: 072-9968[redacted] **SUBMITTED DATE:** 08/27/91
PROJECT NAME: YARD WASTE FACILITY **PHS:** **SEC:** **TIME:** 12:59 PM

CONTACT NAME: DAVID MORTON **PHONE #:** 336-3871
TITLE: **TYPE OF PERMIT:** FULL
MODULAR OFFICE
COMMENTS: 5631 PAUL BROWN BV CHAR 141-022-01

REVIEW DISCIPLINES

AGENCY	DISCIPLINE	CONTACT	PHONE	INITIALS
BUILDING STANDARDS	BUILDING	MIKE BURKHARD	336-3836	
	ELECTRICAL	MIKE BURKHARD	336-3836	
	MECHANICAL	MIKE BURKHARD	336-3836	
	PLUMBING	MIKE BURKHARD	336-3836	
	ZONING	MIKE BURKHARD	336-3836	
	CITY-FIRE	MIKE BURKHARD	336-3836	
CITY ENGINEERING	CITY ENGINEERING	PAULINE HARPER	336-4257	
ENVIRONMENTAL HEALTH	SEPTIC TANKS	SYLVIA DANIEL	376-4603	

NOTICE

OTHER APPROVALS/PERMITS MAY BE REQUIRED SUCH AS GRADING PERMITS, STORM WATER RETENTION, DETENTION AND COMMERCIAL DRAINAGE APPROVAL. PLEASE CHECK WITH THE ASSOCIATED ENGINEERING DEPARTMENT FOR ADDITIONAL INFORMATION.

YOU WILL BE NOTIFIED OF THE DISPOSITION OF YOUR PROJECT WITHIN 10 TO 15 WORKING DAYS. IF YOU MUST CALL CONCERNING THE STATUS OF A PROJECT, CALL 336-3836 AND ASK FOR APPROVAL STATUS OF THE PROJECT NUMBER ABOVE

ALL INDIVIDUALS SECURING BUILDING PERMITS MUST BE BONDED WITH MECKLENBURG COUNTY. PLEASE CONTACT THE ACCOUNTING DEPARTMENT AT 336-4317 FOR BOND REQUIREMENTS AND FURTHER INFORMATION.

CONTACT	DATE	COMMENTS	INITIALS

Post-it™ brand fax transmittal memo 7671 | # of pages ▸ 1

To STEVE KELNER	From REX GLEASON
Co. MECK. CO. ENG.	Co. DEM/MRO
Dept.	Phone #
Fax # 704/336-3846	Fax # 704/663-6040

DIVISION OF ENVIRONMENTAL MANAGEMENT

October 16, 1991

MEMORANDUM TO: Steve Kelner

FROM: D. Rex Gleason DRG

SUBJECT: Central Yard Waste Processing Facility
Permit Application No. WQ0005617
Mecklenburg County

This Office is aware that the Building Permits Section of Mecklenburg County will not allow a mobile unit to be placed on the subject site until after the issuance of the subject Permit. This Office has recommended that the Permit be issued and efforts are being made by this Office to expedite its issuance. In the interim, this Office has no objections to placement of the mobile unit on the site along with appropriate appurtenances. Please be advised that construction of wastewater treatment facilities shall not begin until the subject Permit has been issued.

If this Office may be of further assistance, please advise.

WAH:se

#7641-A

CHARLOTTE-MECKLENBURG BUILDING STANDARDS **PAGE:** 1
PROJECT REVIEW DISCIPLINES

PROJECT INFORMATION

PROJECT NUMBER: 072-996851 **SUBMITTED DATE:** 08/27/91
PROJECT NAME: YARD WASTE FACILITY **PHS:** **SEC:** **TIME:** 12:59 PM

CONTACT NAME: DAVID MORTON **PHONE #:** 336-3871
TITLE: **TYPE OF PERMIT:** FULL
MODULAR OFFICE
COMMENTS: 5631 PAUL BROWN BV CHAR 141-022-01

REVIEW DISCIPLINES

AGENCY	DISCIPLINE	CONTACT	PHONE	INITIALS
BUILDING STANDARDS	BUILDING	MIKE BURKHARD	336-3836	
	ELECTRICAL	MIKE BURKHARD	336-3836	
	MECHANICAL	MIKE BURKHARD	336-3836	
	PLUMBING	MIKE BURKHARD	336-3836	
	ZONING	MIKE BURKHARD	336-3836	
	CITY-FIRE	MIKE BURKHARD	336-3836	
CITY ENGINEERING	CITY ENGINEERING	PAULINE HARPER	336-4257	
ENVIRONMENTAL HEALTH	SEPTIC TANKS	SYLVIA DANIEL	376-4603	

File 7641-A

NOTICE

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CONTACT	DATE	COMMENTS	INITIALS

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 19668

File: 7641-A Action 1

Parcel: 141-022-01 ☐ PC

Location: 5632 PAUL BROWN BV.

Subdivision:

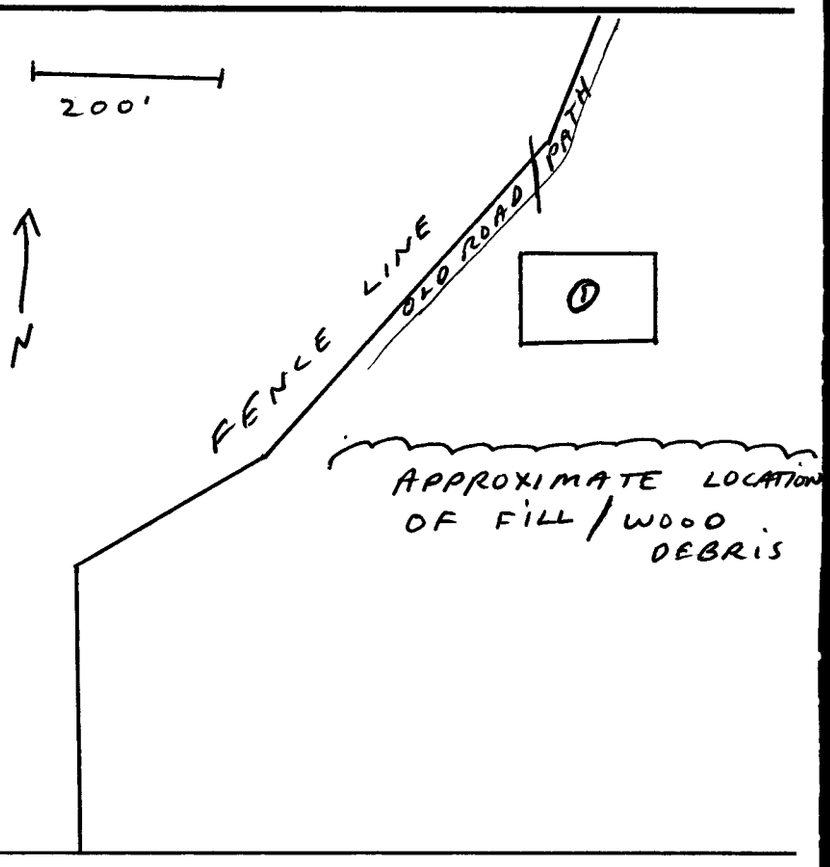
Lot: Block: Acres: .20

Owner: Mecklenburg County
Address: 700 N Tryon St
Charlotte NC 28202
Attn: David Morton

Comments: WILL REQUIRE LIFT PUMP

Described by: Kelly Randall

Date: 8-19-91



PAUL BROWN BV.

***** 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 2-5%	S PS U	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U CLAY	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U SUB ANG. BLOCK	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U > 36"	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U > 36"	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S PS U NONE	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	CECIL LIKE					
Area Classification	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U

Mecklenburg County
Health Department

August 23rd, 1991

Mecklenburg County Engineering
700 North Tryon Street
Charlotte, NC 28202

RE: Property located at 5632 Paul Brown Boulevard
FILE: 7641A
PARCEL: 141-022-01

Dear Sir:

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 19668) is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit an Application For An Improvement Permit with an ACCURATELY dimensioned plot plan detailing the location of current and/or proposed buildings, wells and sewage disposal systems to this office. The plan will be reviewed and if it is found that the area of provisionally suitable soils is adequate for the proposed construction, an Improvement Permit will be issued by this Department.

If there are any questions concerning this matter, do not hesitate to contact me.

Sincerely,

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

Enclosure

Environmental Health Division
1200 Blythe Boulevard • Charlotte, North Carolina 28203 • (704) 376-4603

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 19668

File: 7641-A Action 1

Parcel: 141-022 01 ☐ PC

Location: 5632 PAUL BROWN BV.

Subdivision:

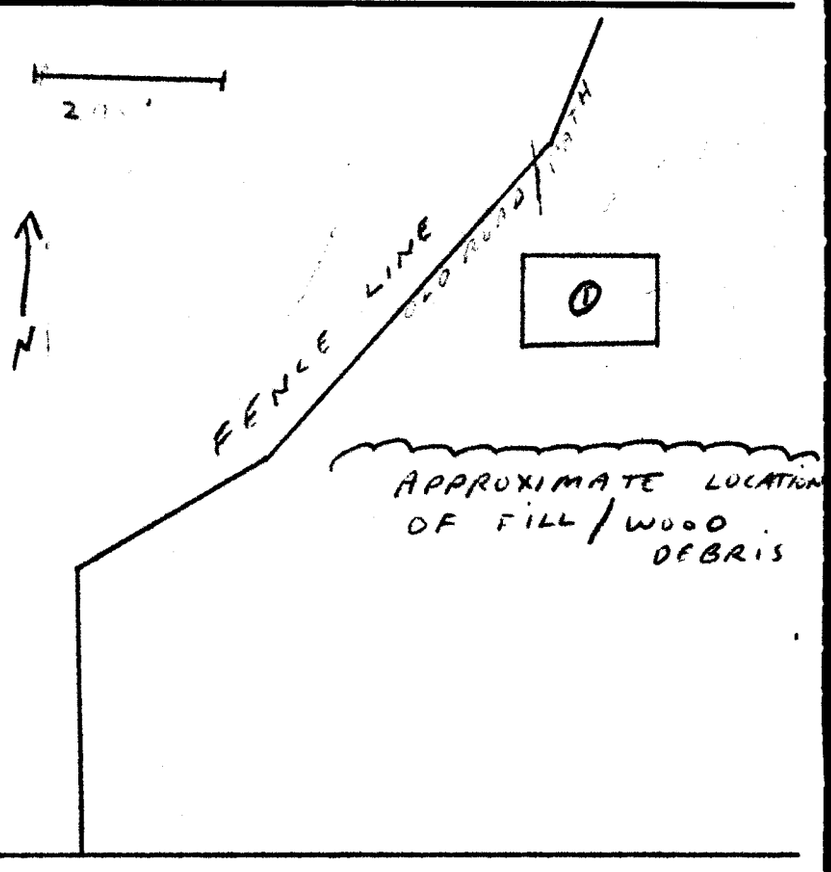
Lot: Block: Acres: .20

Owner: Mecklenburg County
Address: 700 N. Tryon St
Charlotte NC 28202
Attn: David Morton

Comments: ~~WILL REQUIRE LIFT PUMP.~~

Described by: Kelly Randall

Date: 8-19-91



PAUL BROWN BV.

***** 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 2-5%	S PS U	S PS U	S PS U	S PS U	S PS U
Texture	S ~~PS~~ U CLAY	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S ~~PS~~ U SUB ANG. BLOCK	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S ~~PS~~ U > 36"	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S ~~PS~~ U > 36"	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S PS U NONE	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	CECIL LIKE					
Area Classification	S ~~PS~~ U	S PS U	S PS U	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 164A

TC: /

☑ PC ☐ REPT

JOB LOCATION

① ADDRESS: 5632 PAUL BROWN BOULEVARD

② SUBDIVISION: — ③ LOT: — ④ BLOCK: —

⑤ PARCEL REFERENCE: BOOK NO.: 141 PAGE NO.: 2 PARCEL NO.: 141-022-01

⑥ DEED REFERENCE: BOOK NO.: 3423 PAGE NO.: 567

OWNER

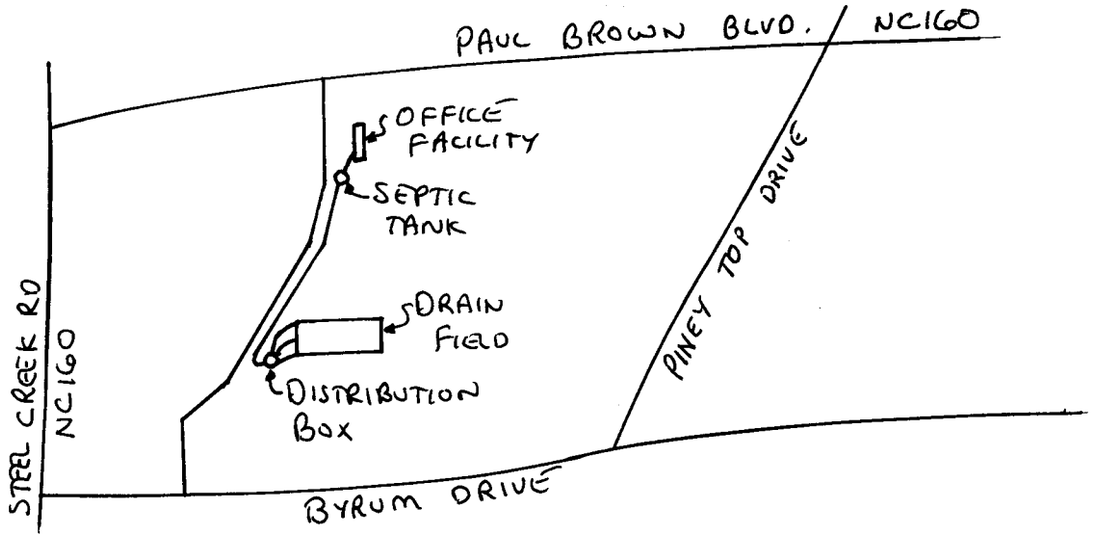
⑦ NAME: MECKLENBURG COUNTY
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: 700 N. TRYON STREET

⑨ CITY: CHARLOTTE ⑩ STATE: NC ⑪ ZIP: 28202

⑫ PHONE: (WORK) 336-3871 (HOME) —

⑬ Accurately diagram and dimension lot. (SEE ATTACHED DRAWINGS)



⑭ 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: David Morton

Date: JULY 30, 1991

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

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER'S COPY

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

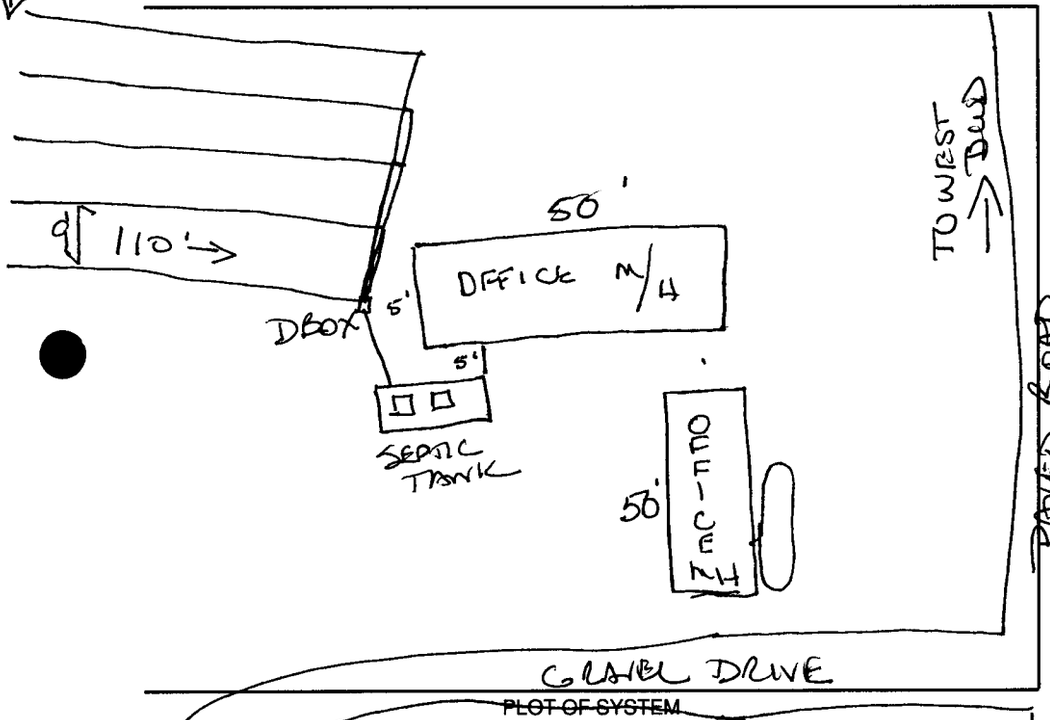
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 7641A DATE: 4-21-98

TC: 141-022-01 ☐ L

SERIAL Nº 17660

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 4/21/98. All work shall be completed on or before 5/24/98, after which date this permit shall be null and void. The system shall meet all of the construction requirements of I5A 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 1500 gallons

Liquid Capacity of Dosing Tank — gallons

Tank Construction PCC

Trench Depth 36"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous yes

Total Line Length 550 feet

Number of Lines 5

Depth of Stone 12" inches

Distance from House 5' feet

Distance from Property Line 25' feet

Distance from Well N/A feet

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

NAME OF OWNER Phoenix Recycling Co.

LOCATION OF PROPERTY West Blvd.

Comments: 1500 ST w/ 5 LINES @ 3 X 105 X 12"

ON CONTOUR - NO DRIVING OR PAVING OVER TANK

Jamie E. Higgins, R.S.

Environmental Health Specialist

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

$50.00 8/16/19

File

7641A

5632 Paul Brown Blvd -

Inspecting Check Lyons -

Engineering —

Owes

$100 for CO

to be added to

Neal project

#

screen

Project

#

886-977756