

4800 LAWRENCE ORR RD

10320221

5/31/2007

duponbj

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

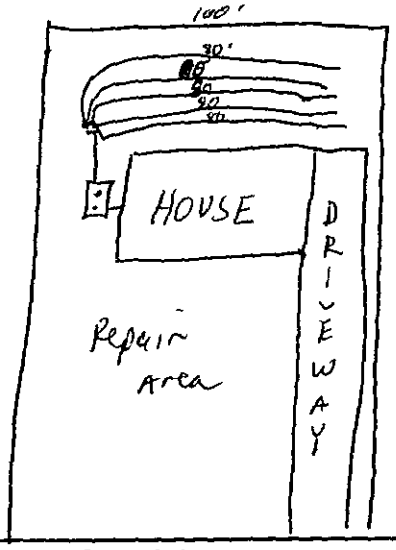
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 5424A DATE: 3/20/91

TC: 103-202-21 ~~P~~ L

SERIAL Nº 14767

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 – . All work shall be completed on or before – 4/20/91, 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 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

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 400 feet

Number of Lines 5 (80')

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well CMUD feet

NAME OF OWNER American Family Homes

LOCATION OF PROPERTY 4800 Lawrence Orr Rd

Comments: 5 lines x 80' long x 3wd x 12" stone
Area tight in back / stay 10 from property line

Division or Section Head

Philo A. Walker, RS.
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 Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

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

American Family Homes

8200 E. INDEPENDENCE BOULEVARD
P.O. BOX 220609 • CHARLOTTE, N.C. 28222

Phone (704) 568-6884

MECKLENBURG COUNTY
HEALTH DEPT.
FEB 1991
ENVIRONMENTAL HEALTH
DIVISION

Mecklenburg County Health Deptartment
1200 Blyth Blvd.
Charlotte, N. C. 28203

Re: File #5424A
TC: 103 20 221
4800 Lawrence Orr Rd.

January 31, 1991

Dear Sirs,

Enclose please find our Application For An Inprovement Permit, and our check in the amount of $200.

We want to construct a house on the property that will be featured in the 1991 Parade of Homes, sponsored by the Homebuilders Assoc. This event is scheduled for public inspection during the first week in April. Obviously, we have created a time problem for ourselves.

Anything you can do to expedite the processing of this application will be appreciated. If you have any questions, or need additional information, please let me know.

Thanking you for your assistance, I am,

Yours Truly,

M. Lindsay Carroll
Senior Vice President

PROPOSED PLOT PLAN

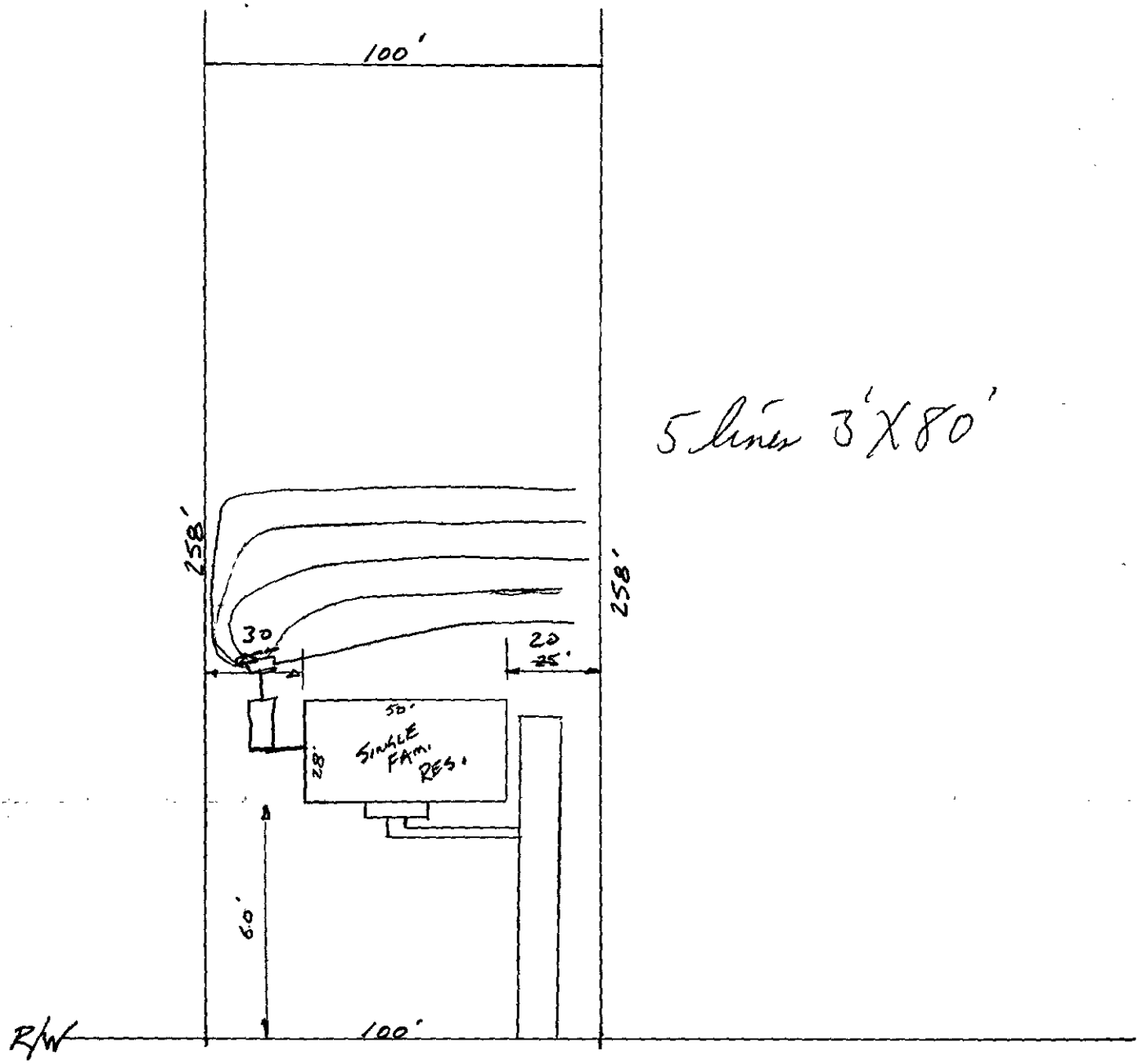
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

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

FILE: 5424A

TC: 10320221

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: [signature]

Date: 1/31/91

182

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: 5424 A

TC: 103 20 221

SERIAL: No 17767

PA 02-04-91
$200.00
cc# 4833

☐ L ☑ CRT

JOB LOCATION

① ADDRESS: 4800 LAWRENCE ORR RD. (STREET NO. / STREET) ② FILE:

③ JURISDICTION: ④ TAX PARCEL NO.: 103 20 221

⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: AMERICAN FAMILY HOMES (FIRST / MIDDLE / LAST)

⑨ MAILING ADDRESS: P.O. Box 220609

⑩ CITY: CHARLOTTE ⑪ STATE: N.C. ⑫ ZIP: 28222

⑬ PHONE: (WORK) 568-6884 ⑭ (HOME)

REQUEST

This request is for a(n):

⑮ ☑ New permit ⑰ ☐ Authorization for mobile home exchange

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

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? 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 on the property for the purpose of processing this request.

Signed: W Lindsay Carroll V.P.

Date: 1/31/91

IMPROVEMENT PERMIT

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 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 this Department.

... This permit is not transferable, and shall become null and void 36 months from the date of issuance.

B. R. Ferguson — Environmentalist — 12-26-91 Date

Director or Authorized Section Head — 2-27-91 Date

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 2-4-91

Name/Company: American Family Homes

Sanitation _____

Vector Control _____

O.P.W.D. X

Service: Improvement Permit

4800 Lawyers Rd. Rd

Fida # 5424A

MECKLENB.. S
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

FEB 4 1991

4133#

Fee: $ 200.00 #200.00

NOTICE:

A processing fee of $15.00 will be charged for all returned checks in accordance with N.C. General Statute 25-3-512.

Completed by.

Collected by

Mecklenburg County
Health Department

Basil G. Delta, M.D., M.P.H.
Health Director

February 8th, 1989

American Family Homes
P. O. Box 220609
Charlotte, NC 28222

RE: Property located at 4800 Lawrence Orr Road
FILE: 5424A
PARCEL: 10320221

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. Results of the investigation revealed that the lot contains soils which have been classified as PROVISIONALLY SUITABLE in accordance with the provisions of 10 NCAC 10A .1900. A copy of the Site Evaluation Report (Serial Number 15964) deliniating the soil types and their respective classifications is enclosed.

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. Specific plan approval will be provided upon submission of 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 and determination that the area is adequate to accomodate the proposed construction.

Please note that this classification may be revoked if any filling, grading or construction (including the drilling of a well) is performed on the lot which in the opinion of this Department renders any area previously designated suitable for system installation, unsuitable. Futhermore, this approval may be revoked should any changes occur in the regulations under which it was granted, if such changes would have prevented its approval had they been in effect on the date of issuance.

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

Very truly yours,

Sylvia D. Daniel, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 15964

File: 5424A

Action 4

Parcel: 10320221

☐ PC

Location: 4800 Lawrence Orr Road

Subdivision:

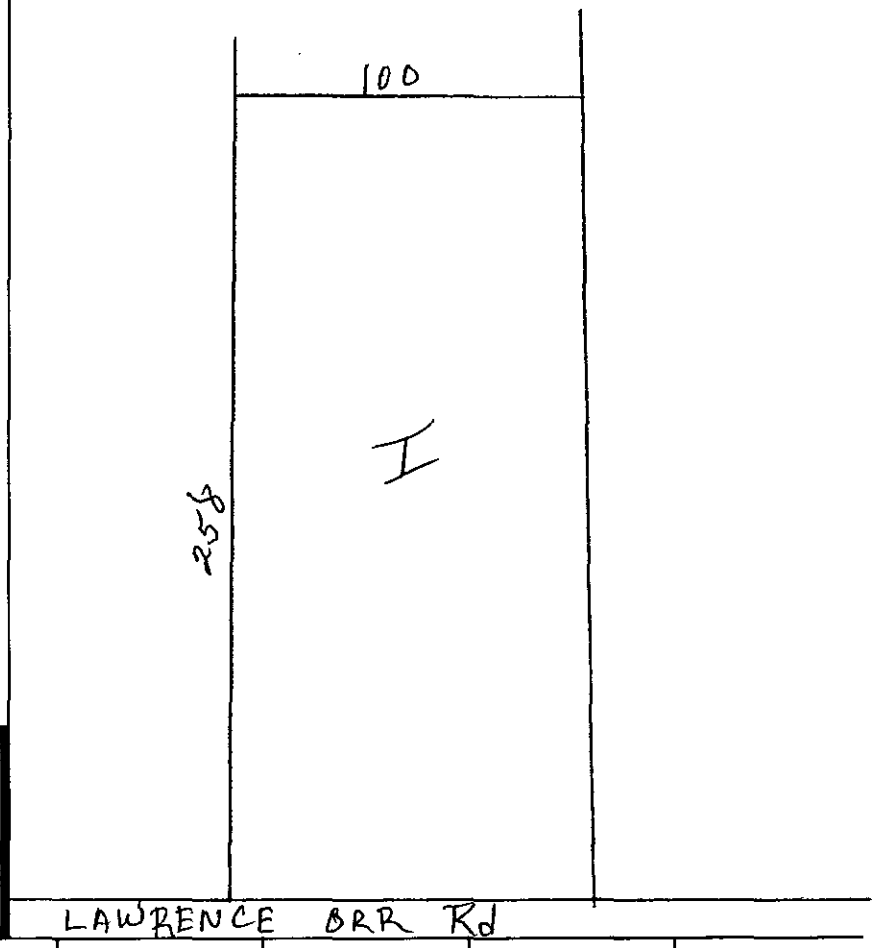
Lot: Block: Acres: .65

Owner: American Family Homes
Address: P. O. Box 220609
Charlotte, NC 28222

Comments: _____

Described by: W. B. Ramsey

Date: 2-2-89



***** 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	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 45-48	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	IIa Cecil					
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: 5424A

TC: 103-202-21

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: 4800 LAWRENCE ORR RD.

② SUBDIVISION: HOBB HILLS ③ LOT: PART of #11 ④ BLOCK: 4

⑤ PARCEL REFERENCE: BOOK NO.: _____ PAGE NO.: _____ PARCEL NO.: _____

⑥ DEED REFERENCE: BOOK NO.: 5422 PAGE NO.: 80

OWNER

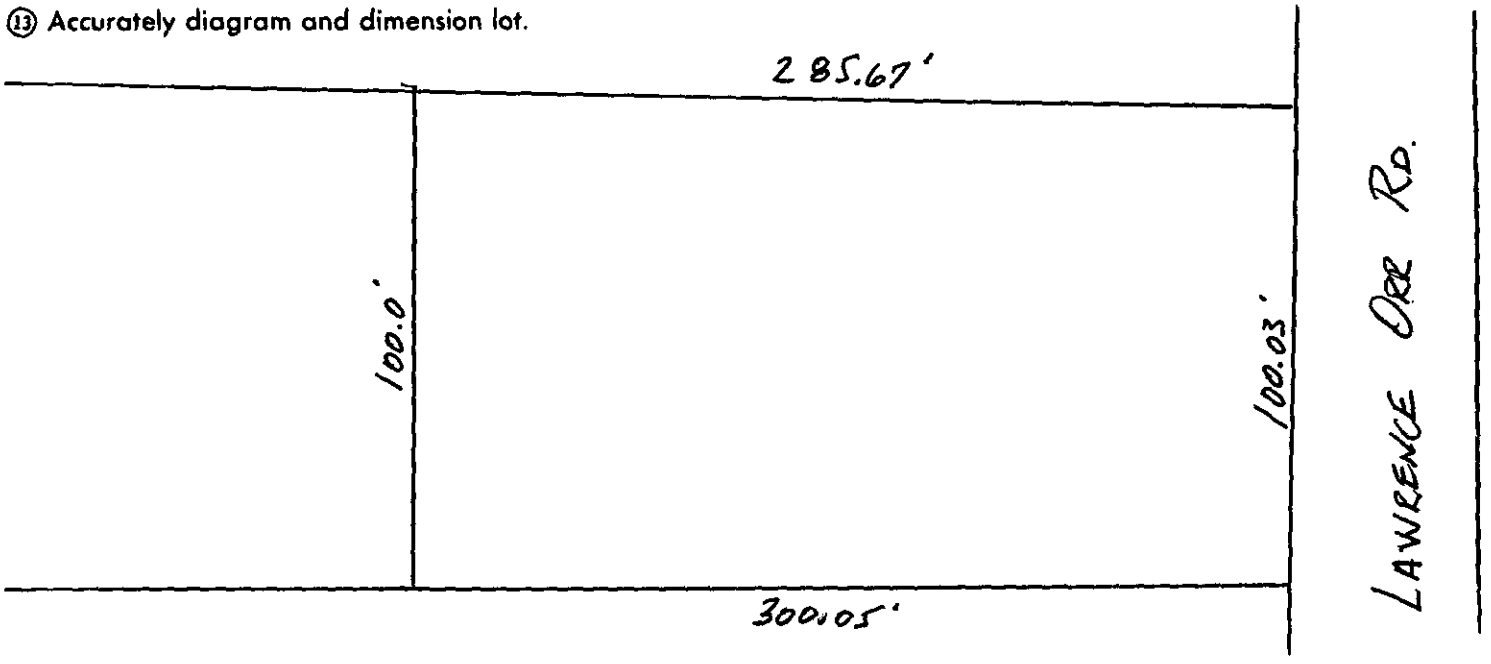
⑦ NAME: AMERICAN FAMILY HOMES / MR CARROLL
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: P.O. BOX 220609

⑨ CITY: CHARLOTTE ⑩ STATE: N.C. ⑪ ZIP: 28222

⑫ PHONE: (WORK) 568-6884 (HOME) _____

⑬ Accurately diagram and dimension lot.



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: M Finley Carroll

Date: 1/25/89

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 1/25/89

Name/Company Lindsey Carroll

Sanitation ____

Vector Control ✓

O.P.W.D. ____

Service: Soil Test
#54244

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

JAN 25 1989

Fee: $30.00

Completed by

Collected by

DATE 1-23-89

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION Char

103-202-21
PARCEL NUMBER

4800 Lawrence Orr Rd
ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

N/A
PROJECT NAME (IF APPLICABLE)

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

1.	SUBDIVISION REGULATIONS	_____APPROVED	_____NOT APPROVED
2.	FLOODWAY REGULATIONS	_____APPROVED	_____NOT APPROVED
3.	EROSION CONTROL REGULATIONS	_____APPROVED	_____NOT APPROVED
4.	COMMERCIAL DRAINAGE PLAN	_____APPROVED	_____NOT APPROVED
5.	PUBLIC UTILITY EASEMENT	_____PRESENT	_____NOT PRESENT
6.	PROPERTY FRONTS ON THOROUGHFARE	_____YES	_____NO
7.	DRIVEWAY PERMIT REQUIRED	_____YES	_____NO

REMARKS: Septic Tank

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE WHEN PAYING PERMIT FEE. CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

7/7/88
ALL OTHER FORMS OBSOLETE

☑ NEW ADDRESS

SIGNED: PM

TO: ENVIRONMENTAL HEALTH DEPT.
BUILDING STANDARDS DEPT.
DEPT. OF ENVIRONMENTAL PROTECTION/
SOLID AND HAZARDOUS WASTE

DATE 1-23-89

FROM: COUNTY ENGINEERING DEPARTMENT

EHD FILE _____ JURISDICTION CODE Chm

PARCEL NUMBER 103-202-21

ASSIGNED ADDRESS 4800 Laurence Orr Rd.

EXISTING ADDRESS _____

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	DISAPPROVED
1. SUBDIVISION REGULATIONS	/ /	/ /*
2. FLOODWAY REGULATIONS	/ /	/ /*
3. EROSION CONTROL REGULATIONS	/ /	/ /*
4. PUBLIC UTILITY EASEMENT	/ /	/ /*

	PRESENT	NOT PRESENT
5. PUBLIC UTILITY EASEMENT	/ /*	/ /
6. PROPERTY FRONTS ON THOROUGHFARE	/ /*	/ /
7. DRIVEWAY PERMIT REQUIRED	/ /*	/ /

*If checked, further investigation will be required to determine whether a building permit can be issued by Building Standards for the site.

REMARKS: Septic Tank

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIER'S OFFICE AT BUILDING STANDARDS WHEN PAYING PERMIT FEES.
A CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL THE TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

SIGNED: CPM

OPWEAR 06-88

NEW ADDRESS /✓/*

FORM 100

5422 0079

PRESENTED FOR REGISTRATION
FEB 3 11 24 AM '87
CHARLES E. CROWDER
REGISTER OF DEEDS
MECKLENBURG CO. N.C.

212

Excise Tax -0-

Recording Time, Book and Page

Tax Lot No. 125-202-21 Parcel Identifier No. .....

Verified by ..... County on the ..... day of ....., 19 .....

by .....

Mail after recording to ROBINSON, BRADSHAW & HINSON, P. A., 1900 Independence Center, 101 N. Tryon St., Charlotte, NC 28246 ATTN: Robert W. Bradshaw, Jr.

This instrument was prepared by ROBINSON, BRADSHAW & HINSON, P. A.

Brief description for the Index E. Portion Lot 11, Block 4, HOBB HILLS

NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED made this 29 day of December, 19 86, by and between

GRANTOR	GRANTEE
ANDERSON & ANDERSON, INCORPORATED, A North Carolina corporation	AMERICAN FAMILY HOMES, a North Carolina General Partnership 8200 East Independence Blvd. P. O. Box 220609 Charlotte, NC 28222

02/03/87
10:06 #1345 000
CASH 6.50
<> 6.50
FEE 6.50

Enter in appropriate block for each party: name, address, and, if appropriate, character of entity, e.g. corporation or partnership.

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in the City of Charlotte, ... Township, Mecklenburg County, North Carolina and more particularly described as follows:

Being the Eastern portion of Lot #11 in Block 4, of Hobb Hills as shown in Map Book 6 at Page 5 in the Office of the Register of Deeds for Mecklenburg County, North Carolina, reference to which is hereby made and being further described as follows:

Beginning at a point in the line between Lot #11 and Lot #12, said point being located South 69° 17' East 285 feet from the common corner between lots 11 and 12 in the western right of way of Hobb Hills Road. From the point of beginning, along the line between lot 11 and 12 South 69° 17' East 300.05 feet to a corner between lots 11 and 12, thence a line North 12° 32' East 100.03 feet to an existing corner between lots 10 and 11, thence a line between lots 10 and 11 North 69° 17' West 285.67 feet to a new corner in the line between lots 10 and 11, thence a new line across lot 11 South 20° 43' West 100.0 feet to the point of beginning.

N.C. Bar Assoc. Form No. 3 © 1976, Revised 1977.
Printed by Agreement with the N.C. Bar Assoc.-1981.

DEED BOOK PAGE

5422 0080

1.00 5-52 6-12

6-

American Family Homes, Inc.

The property hereinabove described was acquired by ~~Grantor~~ by instrument recorded in Book 5123 at Page 206 in the Mecklenburg Public Registry. American Family Homes, Inc. was merged into Anderson & Anderson, Incorporated by Articles of Merger filed on 12-29-86 and recorded in Corporate Book 0158 at Page 0644 in said Registry.
A map showing the above described property is recorded in Plat Book 6 page 5.

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple.

And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever except for the exceptions hereinafter stated. Title to the property hereinabove described is subject to the following exceptions:

1. Valid and enforceable easements and restrictions of record.
2. 1987 Charlotte-Mecklenburg ad valorem taxes.
3. The lien, if any, of any outstanding mortgage or deed of trust to which the property is subject. The outstanding balance of any loan secured by such mortgage or deed of trust, if any, is hereby assumed by the Grantee as part of the consideration for the transfer of this property.

IN WITNESS WHEREOF, the Grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, the day and year first above written.

ANDERSON & ANDERSON, INCORPORATED
(Corporate Name)

By: H. Perrin Anderson
H. Perrin Anderson
President

ATTEST: Vernon T. Anderson Jr.
Vernon T. Anderson, Jr.
Secretary (Corporate Seal)

SEAL-STAMP

USE BLACK INK ONLY

_____ (SEAL)

_____ (SEAL)

_____ (SEAL)

_____ (SEAL)

Use Black Ink

NORTH CAROLINA, _____ County.

I, a Notary Public of the County and State aforesaid, certify that _____ Grantor,

personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official stamp or seal, this _____ day of _____, 19_____.

My commission expires: _____ Notary Public

SEAL-STAMP

Use Black Ink

NORTH CAROLINA, Mecklenburg County.

I, a Notary Public of the County and State aforesaid, certify that Vernon T. Anderson, Jr.

personally came before me this day and acknowledged that he is --- Secretary of ANDERSON & ANDERSON, INCORPORATED a North Carolina corporation, and that by authority duly given and as the act of the corporation, the foregoing instrument was signed in its name by its --- President, sealed with its corporate seal and attested by him as its --- Secretary.

Witness my hand and official stamp or seal, this 29th day of December, 19 86.

My commission expires: 7-14-90 Wanda A. Schramm Notary Public

---

The foregoing Certificate(s) of Wanda A. Schramm, a Notary Public for said County and State

is/~~are~~ certified to be correct. This instrument and this certificate are duly registered at the date and time and in the Book and Page shown on the first page hereof.

Charles E. Crowder REGISTER OF DEEDS FOR Mecklenburg COUNTY

By Carolyn T. VanAntwerp Deputy/~~Assistant~~ Register of Deeds

This 3rd day of February, 1987

N.C. Bar Assoc Form No. 3 © 1976, Revised 1977. - Printed by Edwards Brothers, Inc. Carolina.

Printed by Agreement with the N.C. Bar Assoc - 1981