

5608 PAW CREEK RD

05914520

1/3/2008

duponbj

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

N.C. Department of Environment, Health, and Natural Resources/Division of Environmental Health

ON-SITE WASTEWATER VIOLATION NOTICE 3854B

OWNER Phillip L. Hooker MAILING ADDRESS 5608 Paw Creek Road, Charlotte 28214

OCCUPANT _____ LOCATION Same

☒ RESIDENCE ☐ BUSINESS ☐ OTHER tax parcel # 059-145-20

You are hereby notified that you are violating the Rules adopted by the North Carolina Commission for Health Services or Article 11 of Chapter 130A of the General Statutes of North Carolina by owning or controlling a residence, place of business, or place of public assembly which is not provided with an approved wastewater system. Your wastewater system is not in compliance; the following corrections must be made. Consult your Local Health Department for advice and required permits by calling telephone number 336-5572.

☐ Install/Repair wastewater system. You must obtain an Improvement Permit from the local health department prior to repairing your system.

☒ Eliminate wastewater discharge and connect to an approved wastewater system.

☐ Pit Privy must be repaired/constructed.

☒ Other Repairs (*specify*) Septic tank shall be properly abandoned.

☐ Perform Maintenance (*specify*) _____

If the wastewater violation is not brought into compliance by January 29, 1995, appropriate legal action will be taken.

Notice Issued December 28, 1995 (Date) Signed Toni Higgins-Bunney, R.S. (Division of Environmental Health) Toni Higgins Bunney, R.S. (Agent)

Compliance _____ (Date) Signed _____ (Division of Environmental Health) (Agent)

DEHNR 1108 (Revised 9/92)
On-Site Wastewater Section (Review 10/94)

DATE: 1-5-96 CHARLOTTE MECKLENBURG UTILITY DEPT.

№ 36678

RECEIVED FROM: Phillip L Hooker

Sixteen Hundred Ten Dollars + no/cts $ 1610.00

FOR: 4" Sewer Taps

5608 Paw Creek Rd

CASH ☐

CHECK 24147

Willie Mae Tapp
RECEIVED BY:

Department of Environment, Health, and Natural Resources/Division of Environmental Health

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DEHNR 1108 (Revised 9/92)
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Todd Lynch -

Mecklenburg County

Health Department

January 23, 1996

Phillip L. Hooker
5608 Paw Creek Road
Charlotte, NC 28214

7/18/96
Toni Higgins Bunney
Sewer connected.

Dear Mr. Hooker:

We have received a copy of the receipt for the Charlotte Mecklenburg Utility Department sewer tap-on fee for 5608 Paw Creek Road. Your prompt response was appreciated. Payment of this fee is considered a step toward compliance with the State sewage regulations.

You must take all necessary measures to ensure that sewage does not surface on top of the ground while waiting for construction of the sewer line and/or sewer tap.

Some of these measures include:

- Practicing water conservation methods by using water saving devices in the shower head and commode; taking quick showers; and spreading clothes washing out over the course of a week instead of washing in sequence. In addition, fix any dripping/leaking water fixtures and water closets, etc.
- Checking and pumping the septic tank as necessary. Contact a septage management hauler for this service.
- Not watering the lawn in the area of the septic system.

Enclosed is a brochure which explains the proper abandonment of the septic tank system.

Please contact me at 336-5572 as soon as the connection from the house to the sewer tap is completed. If you have any questions, please do not hesitate to contact me.

Sincerely,

Toni Higgins-Bunney, R.S.
Individual Water and Wastewater Systems

Enclosure

FEE: NA

DATE: _____

APPLICATION FOR IMPROVEMENT PERMIT FOR RESIDENTIAL SITE INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM

[ ] CRT

TYPE APPLICATION: ___ NEW SYSTEM ___ EXPANSION/ ALTERATION 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 #: 38548

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 059-145-20-001

STREET ADDRESS: 5608 Paw Creek Rd

TYPE OF BUILDING (CHECK ONE):

___ SINGLE MOBILE HOME(S)
___ DOUBLE WIDE (D)
✓ HOUSE (H)
___ MODULAR HOME (M)
___ MULTIPLE FAMILY (U)
___ OTHER (O)

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 1200

NUMBER OF BEDROOMS: 2 NUMBER OF OCCUPANTS: 3

FOUNDATION FOR RESIDENCE:

___ WITHOUT BASEMENT
___ ON SLAB
✓ CRAWL SPACE
___ WITH BASEMENT /PLUMBING
___ WITH BASEMENT /NO PLUMBING

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: ___ YES ✓ NO TYPE: _____

WATER SUPPLY (CHECK ONE):

___ COMMUNITY (C)
___ SHARED WELL (S)
✓ MUNICIPAL (M)
___ OTHER 'SPRINGS' (O)
___ PRIVATE WELL (P)

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 WASTEWATER SYSTEMS	✓ YES ___ NO	DESIGNATED WETLANDS	___ YES ___ NO
EASEMENTS OR RIGHT-OF-WAYS	___ YES ___ NO		

PROPERTY OWNER:

NAME: (LAST) Hooker (FIRST) Phillip (MI) L.

ADDRESS: 5608 Paw Creek Rd.

CITY: Charlotte STATE: NC ZIP: 28214

DAYTIME PHONE: (704) 394-6810

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) —

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 1957

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. 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: Phillip L. Hooker DATE: 12/13/95

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