

12808 TWILIGHT DR

13531254

5/10/2007

duponbj

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

$21.50.00 ck 5/25/88 Imp. Permit

APPLICATION FOR AN IMPROVEMENT PERMIT

CK#1214

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

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: 3934A

TC: _____

SERIAL: Nº 15487

☐ L ☑ CRT

JOB LOCATION

① ADDRESS: 12808 TWILIGHT DRIVE (STREET NO. / STREET) ② FILE: 3934 A

③ JURISDICTION: MINT HILL ④ TAX PARCEL NO.: 135-312-12

⑤ SUBDIVISION: HIDDEN HILLS ⑥ LOT: 15 ⑦ BLOCK: 1

OWNER

⑧ NAME: FIRSTMARK DEVELOPMENT CORPORATION (FIRST / MIDDLE / LAST)

⑨ MAILING ADDRESS: 6035 FLORENCE AVE., SUITE 100

⑩ CITY: CHARLOTTE ⑪ STATE: N.C. ⑫ ZIP: 28212

⑬ PHONE: (WORK) 536-1495 ⑭ (HOME) N/A

REQUEST

This request is for a(n):

⑮ ☒ New permit

⑯ ☐ Repair or alteration permit

⑰ ☐ Authorization for mobile home exchange

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? 6

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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Richard Williams

Date: 5-25-88

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, 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.

Lift Station Required

Environmentalist / Date

Director or Authorized Section Head 7-26-88 Date

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

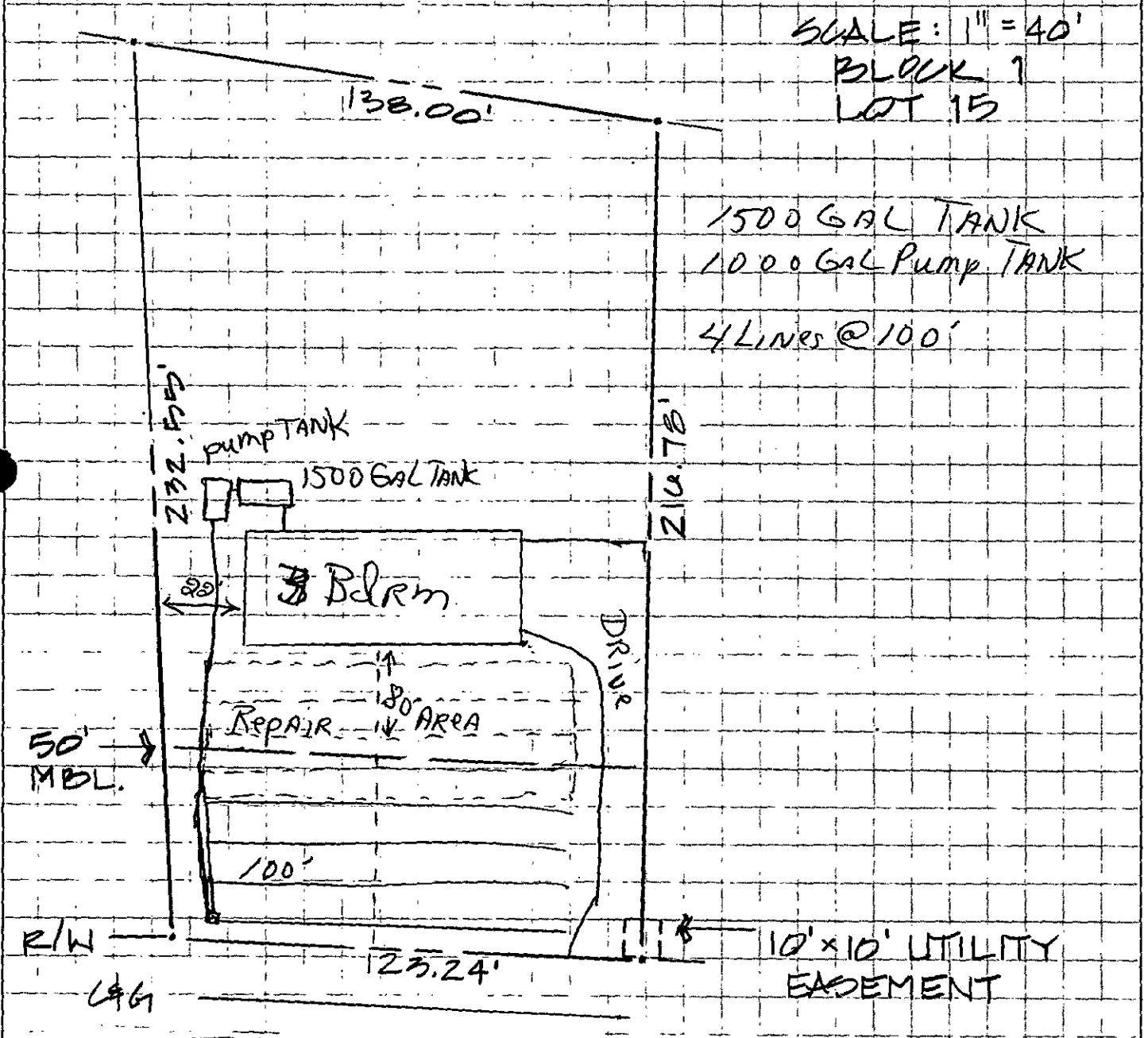
PROPOSED PLOT PLAN

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

FILE: 3934 A

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: Richard Williams

Date: 5-19-88

Mecklenburg County
Health Department

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

February 11, 1988

M E M O R A N D U M

TO: Keith Stiwalt
Budget/Fiscal Officer

Re: Refund $50.00
Sandra Turnbull
Deposit date 1/22/88

Dear Mr. Stiwalt:

Please refund the amount of $50.00 to the above client for an Installment permit.

The client did not buy the lot in question, therefore we only charged him for the Improvement Permit.

Thank you.

Sincerely,

Lorraine C. Whitaker
Acct Tech
Environmental Health Division

Address and make check payable to:

Sandra Turnbull
1815 Park Drive Suite 206
Charlotte, N. C. 28204

Enclosure:Documentation

1/22/88 Paid #100.00 Septic Initial Permit

APPLICATION FOR AN IMPROVEMENT PERMIT

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: 3934A

TC: _____

SERIAL: Nº 14845 ☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 12808 Twilight Drive (STREET NO. / STREET) ② FILE: 3934-A

③ JURISDICTION: Mint Hill ④ TAX PARCEL NO.: 13521212 PO

⑤ SUBDIVISION: Hidden Hills ⑥ LOT: 15 ⑦ BLOCK: 1

OWNER

⑧ NAME: Walter (FIRST) Curtis (MIDDLE) Turnbull (LAST)

⑨ MAILING ADDRESS: 1815 Park Drive Suite 206

⑩ CITY: Charlotte ⑪ STATE: N.C. ⑫ ZIP: 28204

⑬ PHONE: (WORK) (704) 375-8154 ⑭ (HOME) (704) 366-9756

REQUEST

This request is for a(n):

⑮ ☒ New permit

⑯ ☐ Repair or alteration permit

⑰ ☐ Authorization for mobile home exchange

⑱ ☐ Other (specify) _____

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home

㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? Four (4)

㉕ Type? _____

㉓ Maximum occupancy? Six (6)

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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Walter C. Turnbull

Date: 1/22/88

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, 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.

_____ / _____
Environmentalist Date

_____ / _____
Director or Authorized Section Head Date

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

MECKLENBURG COUNTY
Department of Environmental Health

September 22nd, 1987

Firstmark Development Corp.
6035 Florence Avenue, Suite 100
Charlotte, NC 28212

RE: Property located at Twilight Drive 15/1
FILE: 3934A
PARCEL: 13521212 PO

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 14629) 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 I may be of assistance, please do not hesitate to contact me.

Sincerely,

Sylvia D. Daniel, R.S.
Environmental Health Supervisor
Environmental Resources Division

Enclosure

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 14629

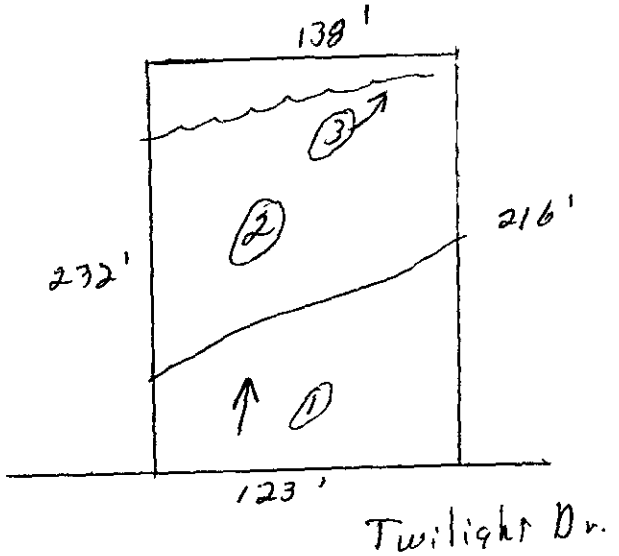
File: 3934A
Parcel: 13521212 PO
Action: 1
☐ PC

Location: Twilight Drive
Subdivision:
Lot: 15/1 Block: Acres: .66

Owner:
Address: Firstmark Development Corp.
6035 Florence Avenue, Suite 100
Charlotte, NC 28212

Comments: System may need pump

Described by: William R. Marbin
Date: 9-22-97



***** 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) Drainageway Depression	S PS (U) complex slopes	S PS U	S PS U	S PS U
Texture	S (PS) U clay	S PS (U) 2-1 clay	S PS U —	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S (PS) U Blocky	S PS U —	S PS U	S PS U	S PS U
Drainage	S (PS) U ~36" To water	S PS (U) seasonal water @ 24"	S PS U —	S PS U	S PS U	S PS U
Depth	S (PS) U ~36"	S (PS) U 36"+	S PS U —	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U ~36"	S (PS) U ~36"	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	10A Cecil-Lilly	10B Depression	Ditch			
Area Classification	S (PS) U	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 3934A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: Twilight Drive

② SUBDIVISION: Hidden Hills ③ LOT: 15 ④ BLOCK: 1

⑤ PARCEL REFERENCE: BOOK NO.: 135 PAGE NO.: 312 PARCEL NO.: 12 (135-312-12)

⑥ DEED REFERENCE: BOOK NO.: 3339 PAGE NO.: 081

OWNER

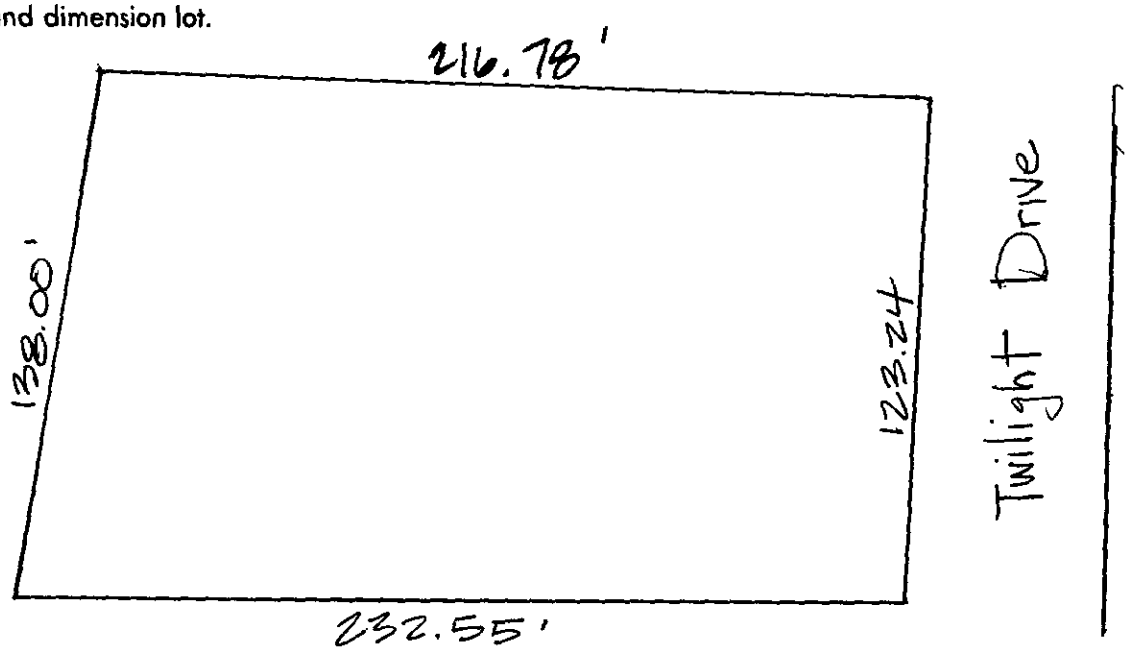
⑦ NAME: Firstmark Development Corporation (FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: 6035 Florence Ave., Suite 100

⑨ CITY: Charlotte ⑩ STATE: NC ⑪ ZIP: 28212

⑫ PHONE: (WORK) 536-1495 (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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Glenn D Caldwell

Date: 9-15-84

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

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