

4920 PLEASANT WAY LN

20106224

7/1/08

marliwr

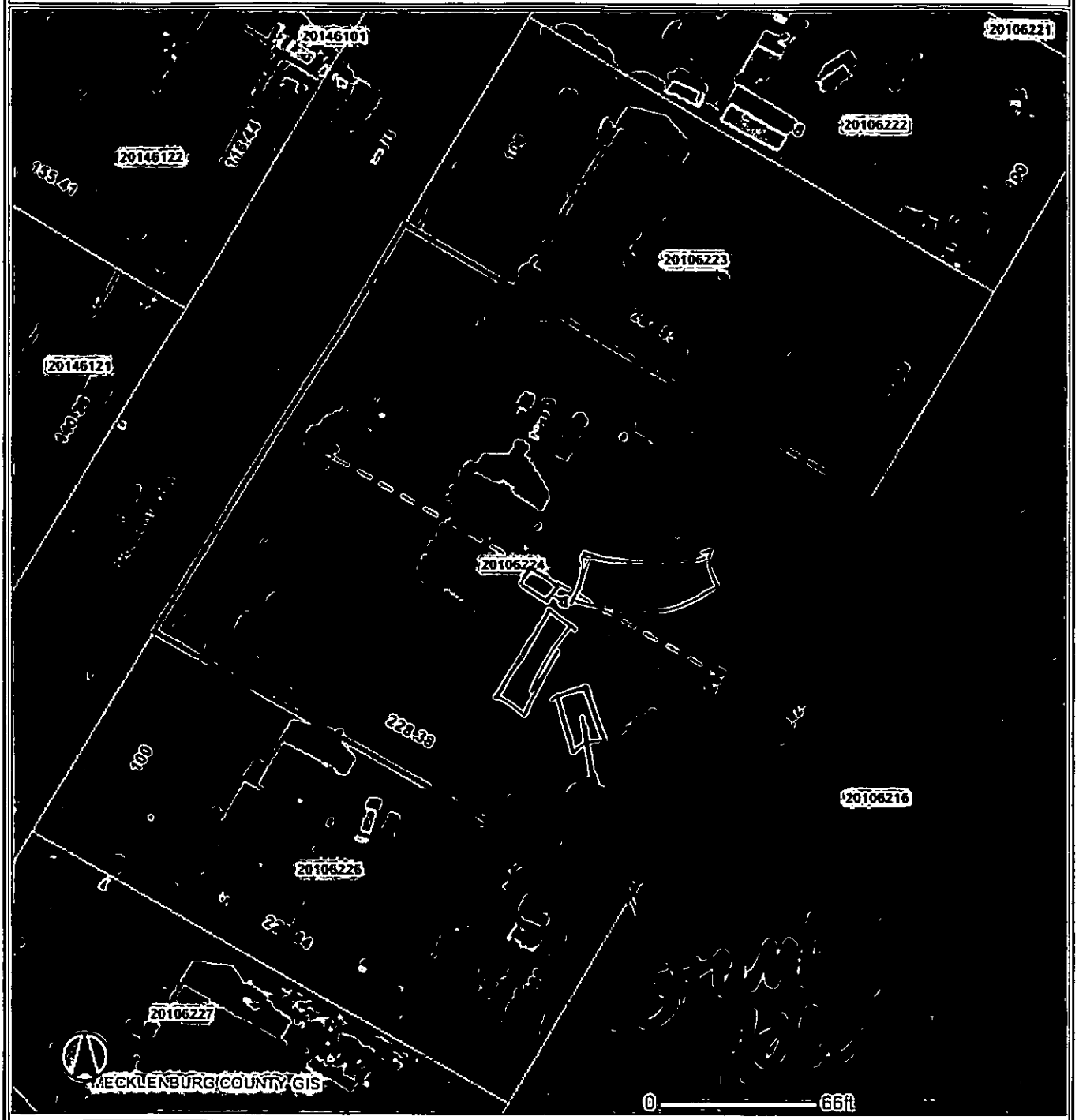
Groundwater and Wastewater Services File Imaging Project
May 2007
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Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Thu Jan 8 10:50:23 EST 2009



This map is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, planimetric maps, and other public records and data. Users of this map are hereby notified that the aforementioned public primary information sources should be consulted for verification. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.

Mecklenburg County, North Carolina
POLARIS
Parcel Ownership and GIS Summary

12531

Date and Time: 1/8/2009 10:51:20 AM

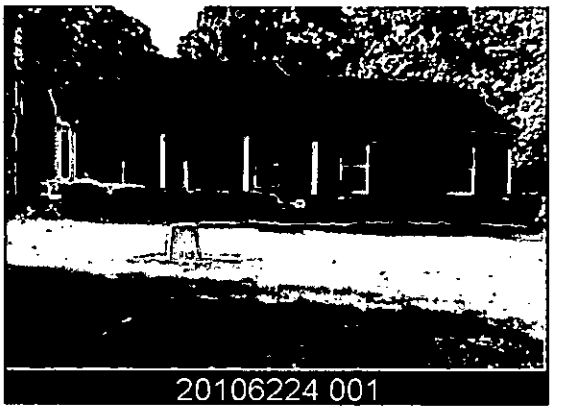
Parcel ID #: 20106224 GIS ID #: 20106224	
Owner Name:	BOBBY J NEWELL AND BARBARA S NEWELL
Mailing Address:	4920 PLEASANT WAY LN CHARLOTTE, NC 28210
Property Characteristics	
Legal Desc.:	L7 & 8 BA M2095-475
Land Area:	1.05 AC
Fire District:	14-STEELE CREEK #1
Special District:	FIRE SERVICE A
Account Type:	INDIVIDUAL
Municipality:	0-MECKLENBURG COUNTY-UNINCORPORATED
Property Use:	SINGLE-FAM
Deed Reference(s) and Sales Price	
03982-211 (8/25/1977) $0.00	
Situs Addresses Tied to This Parcel	
4920 PLEASANT WAY LN	
Site Location Information	
Zoning Boundaries:	Contact Appropriate Planning Department or See Map.
ETJ Area: CHARLOTTE	
Charlotte Historic Districts: NO	
Within Charlotte 6/30/2007 Annexation Area: NO	
Census Tract #: 59.04	
Parcel Falls Inside a Water Quality Buffer?: NO	
Post Construction District	
Jurisdiction:	Charlotte
District:	Central Catawba

FEMA Flood Information	
FEMA Panel #:	3701580204E
FEMA Flood Zone:	OUT
FEMA Panel Date:	02/04/2004
Community Flood Information	
Community Flood Zone:	OUT
Regulated Watershed Information	
Watershed Name:	SUGAR
Watershed Class:	

Building Photography

PHOTO #1

Location: 4920 PLEASANT WAY LN

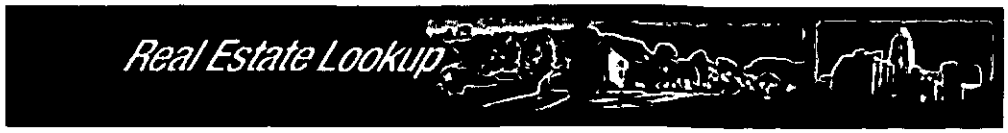


Information contained within this photo may be used as a visual aid and to generally locate, identify, and inventory parcels in Mecklenburg County, North Carolina. There are inherent errors and limitations associated with this type of electronic medium. Mecklenburg County cannot warrant or guarantee the information contained herein including but not limited to its accuracy or completeness.

Powered by

Bobby
588-0608
221-1402

The information provided by this program is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, and other public records and data. Users of this map data are hereby notified that the aforementioned public primary information sources should be consulted for verification of the information. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.



Print

Close

Parcel Information

Parcel ID	Account	Parent	Previous
20106224	INDIVIDUAL		

Owner(s)

Owner Name	Mailing Address	City/State
NEWELL BOBBY J	4920 PLEASANT WAY LN	CHARLOTTE NC 28210
NEWELL BARBARA S WIFE	4920 PLEASANT WAY LN	CHARLOTTE NC 28210

Legal Information

Legal	Municipality	Annexed	Special District	Fire District	Acreage
L7 & 8 BA M2095-475	MECKLENBURG COUNTY-UNINCORPORATED		FIRE SERVICE A	STEELE CREEK #1	0

Total Parcel Assessment & Exemptions

Building	Land	Features	Total	Exemption	Year Approved	Review Date	Amount
67100	36900	800	104800				

Sales Information

Sale	Price	Stamps	Qualify	V/I	DeedBook	Type	Legal Ref.	Grantor
Aug 25 1977	0			IMP	03982 - 211	WARRANTY D	03982-211	

Land Use

Use	Units	Type	Neighborhood	Assessment
1000	1.05	AC	U101	36900

Building Information

Bldg	Description	Type	Year Built	Property Location
1	Single-Fam	RES	1977	4920 PLEASANT WAY LN UNINC

Bldg	Story	Units	Total SqFt	Heated	Foundation	Ext. Wall	Grade	Value
1	1 STORY	1	1388	1286	CRAWL SPACE	ALUM,VINYL - FACE BRICK	AVERAGE 03	67100

Bldg	Heat	Fuel	FirePlace	AC	Fixtures	Bedrooms	Full Baths	3/4 Baths	1/2 Baths
1	AIR-DUCTED	OIL/WD/COAL	1 - FP3	AC-NONE		3	2		0

Sub Areas

Bldg	Description	Size
1	BASE (FIRST FLOOR)	1286
1	PORCH - OPEN - FINISHED	102

Depreciation

Bldg	Physical	Functional	Economic	Special	Override
1	AV - 28.00%				

Special Features & Yard Items

Bldg	Built	Type	Quantity	Units	Value
1	1977	STORAGE	1	12X16	800

Value Changes

Notice Date	Tax Year	Reason	Changed To	Deferred
Jan 17 2003	2003	Countywide Revaluation	104800	0
Feb 20 1998	1998	Countywide Revaluation	85070	
Jan 2 1991	1991	Countywide Revaluation	72070	

FEE: _____

DATE: _____

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

Repair [ ] 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 #: 12531

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 201-26-224

STREET ADDRESS: 4920 PLEASANTWAY LANE

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: 1977 7+8

TOWNSHIP (CHECK ONE): 8A

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

CLOSING DATE _____

TYPE OF BUILDING (CHECK ONE):

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

HEATED SQUARE FOOTAGE:

NUMBER OF BEDROOMS: 3

NUMBER OF OCCUPANTS:

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

PROPERTY OWNER:	LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:
NAME: Newell Bobby J (LAST) (FIRST) (MI)	NAME: (LAST) (FIRST) (MI)
ADDRESS:	DAYTIME PHONE: ( ) —
CITY: STATE: ZIP: 28210	
DAYTIME PHONE: ( ) —	

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

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: Bobby James Newell DATE: 6/13/03

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

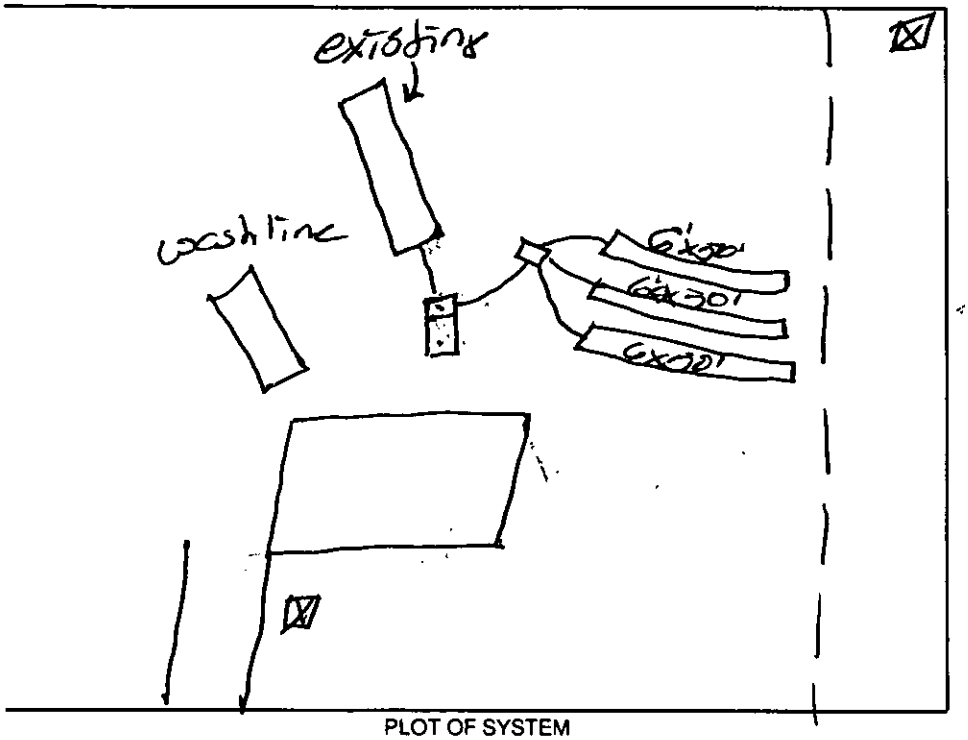
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 12531 DATE: 6/13/03

TC: 201-06-224

SERIAL 19388

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 _____, 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 PCC gallons

Liquid Capacity of Dosing Tank N/A gallons

Tank Construction PCC

Trench Depth 24"

Absorption and/or Nitrification Lines:

Trench Width 6' Bed feet

Trench Walls Scored and Porous Yes

Total Line Length 300' feet

Number of Lines 3

Depth of Stone 12" inches

Distance from House >5' feet

Distance from Property Line 10' feet

Distance from Well _____ feet

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

NAME OF OWNER Mr Nouri

LOCATION OF PROPERTY 4920 Pleasant Way

Comments: Install 3, 6x50 Beds x @ 12" stone check for connection b/t tank and existing drainfield if blocked repair and Tie in washline and install one 6'x50' bed.

Environmental Health Specialist

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

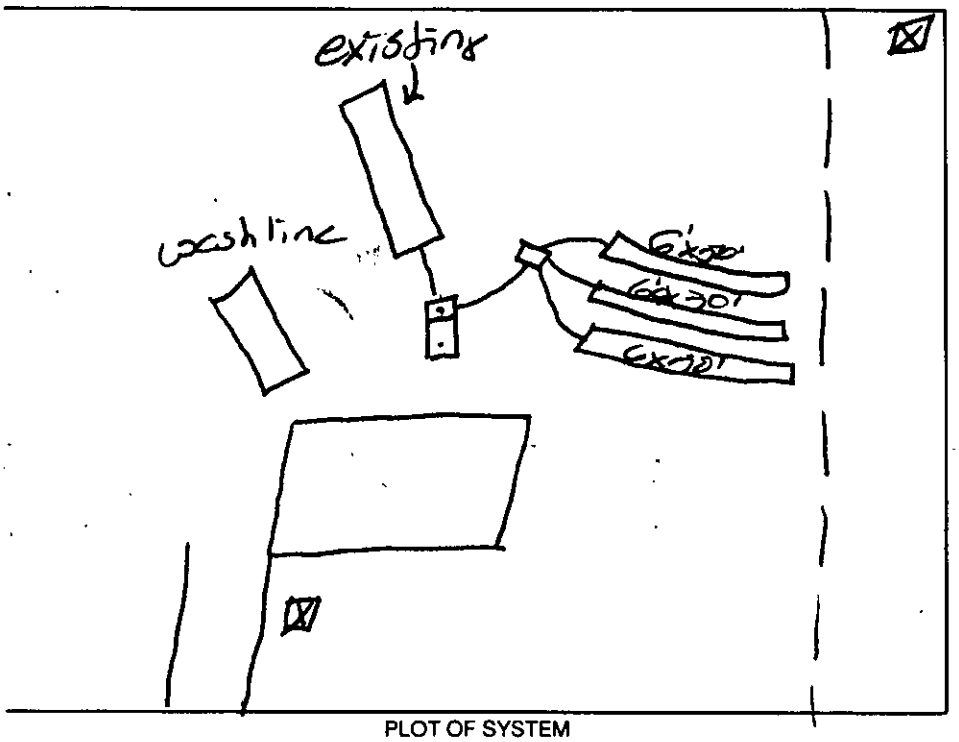
FILE: 12531 DATE: 6/13/23

TC: ~~29306-224~~ ☐ L

SERIAL 19388

~~29306 224~~

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Environmental Health Specialist

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 12531 DATE: 6/23/03

TC: 201-06-224 ☒ L ☐ CRT

SERIAL 19209

Name of Owner BOBBY J NEWELL Juris.: _____

Address of Property 4920 PLEASANT WAY LN.

Inspection Data:

Tank Material EXISTING PCC

Total Length of ~~Drainfield~~ BED 56'

Number of Lines _____ @ _____

Cover Depth 2'

Water Supply Source WELL

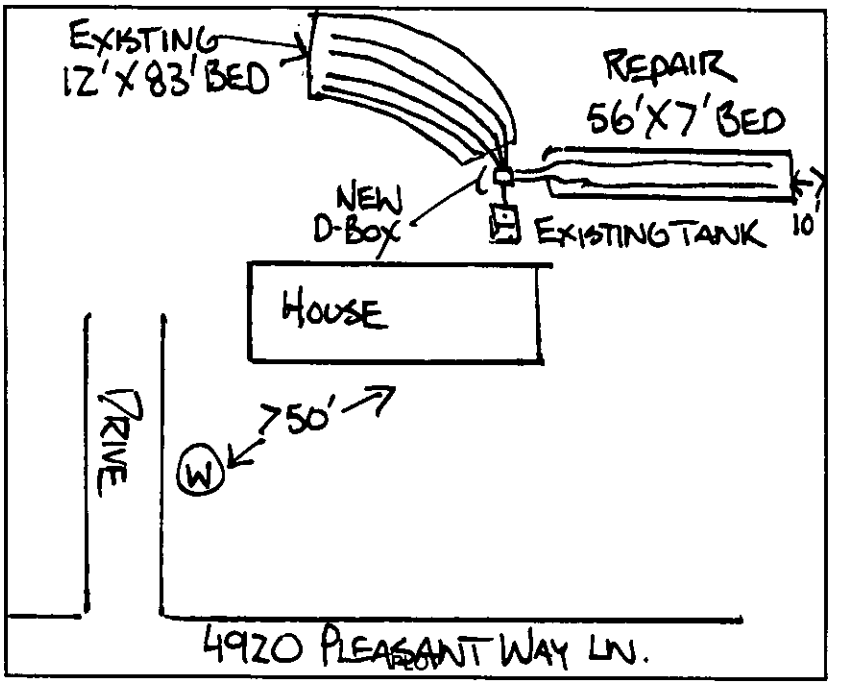
Distance to Water Source >50'

Excavation Inspected 6/23/03

Tank(s) Inspected 6/23/03

Wash Line Inspected N/A

High Water Alarm Inspected N/A



Design 2003, REPAIR, CON, 392SF, B, 2FT6, CTR# JORDAN

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 15A 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 15A 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: REPAIR; 56'X7' BED, NEW D-BOX, USE EXISTING 12'X83' BED W' 4 LINES.

Environmental Health Specialist

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

Date Received 11/2/77 Apt. No. (S) _____ Application No. (W) 12531

T. C. No. 201-82-27/25

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Klutts (LAST) Realty (FIRST) & Const. Co. Inc. (MIDDLE)

ADDRESS OF OWNER 1433 Eastway Dr. ZIP 28210

PHONE NO Home _____ Office _____

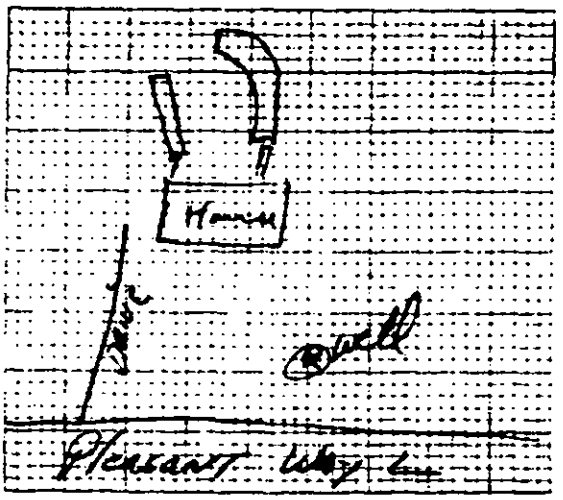
LOCATION OF PROPERTY 4920 Pleasant Way Ln (STREET OR COUNTY ROAD)

WELL CONTRACTOR _____ LICENSE NO _____

Application is hereby made to the Mecklenburg County Department of Environmental Health for a permit to drill a water well on the hereinabove described lot to be used as a source of individual, semi public, or public water supply

11/2/77
DATE OF APPLICATION

Dennis A. Belk
OWNER



ACCURATELY DIAGRAM & DIMENSION LOT

Remarks: Keep 50' from House, 13' from all property lines

Application approved and permit hereby granted

Permit No. 12531

ENVIRONMENTALIST

Environmental Health Department's Copy

Date Received Jan 1 72

APT No. 12531

T. C. No. 201-062-24,25

Map Date _____

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Knotts (LAST) (FIRST) C (MIDDLE)

2) ADDRESS OF OWNER 1433 Fairmont ZIP 28216

3) PHONE NO [redacted] 535 2661 Office 525 2564

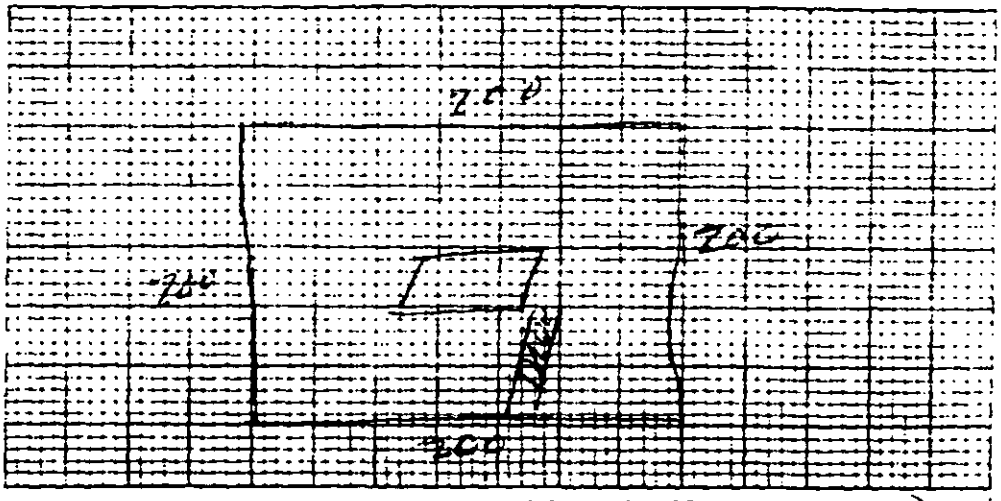
4) LOCATION OF PROPERTY 421 Lee Huntersville (STREET OR COUNTY ROAD)

5) SUBDIVISION Grayles LOT NO. 745 BLOCK NO. _____

MAP BOOK NO. 295 PAGE NO. 475

6) DEED REFERENCE DEED BOOK _____ PAGE NO. _____

Application is hereby made to the Mecklenburg County Health Department for the conduct of a percolation test 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

Knotts C Jr
OWNER

FORM NO. E-1-11-1-70

HEALTH DEPARTMENT'S COPY

SOIL INVESTIGATION REPORT

Date of Investigation June 13, 1977 APT NO. 12531

Owner Mr. Ing Const. Co. T.C. 201-062-04,25

Location of Property Clearwater Ave 473 768

Soil Suitability Ratings

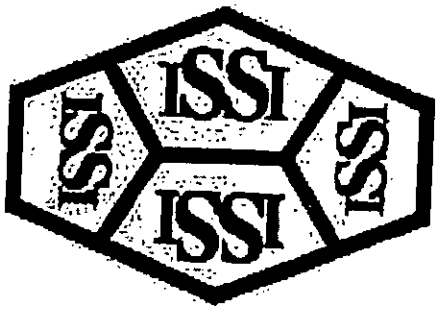
Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Lec. I			
2. Soil Slope	Suitable 2-6%			
3. Soil Depth	Suitable 7 ft			
4. Soil Texture	Poss. some unsuitable clay			
5. Soil Structure	Poss. some unsuitable Blocky			
6. Restrictive Horizons				
7. Soil Drainage	[illegible]			
8. Soil Permeability (Percolation Rate)	[illegible]			
9. Other				
10. Overall Rating	Poss. some unsuitable			

Recommendations Based on this investigation, analysis and inspection, suitable soils for the installation of a septic tank system and leach lines on the lot. System design should be based on percolation rate of [illegible]

See diagram [illegible]

William P. Martin
[illegible]

3/15/75
FHS 508



Imaging Solutions and Services, Inc

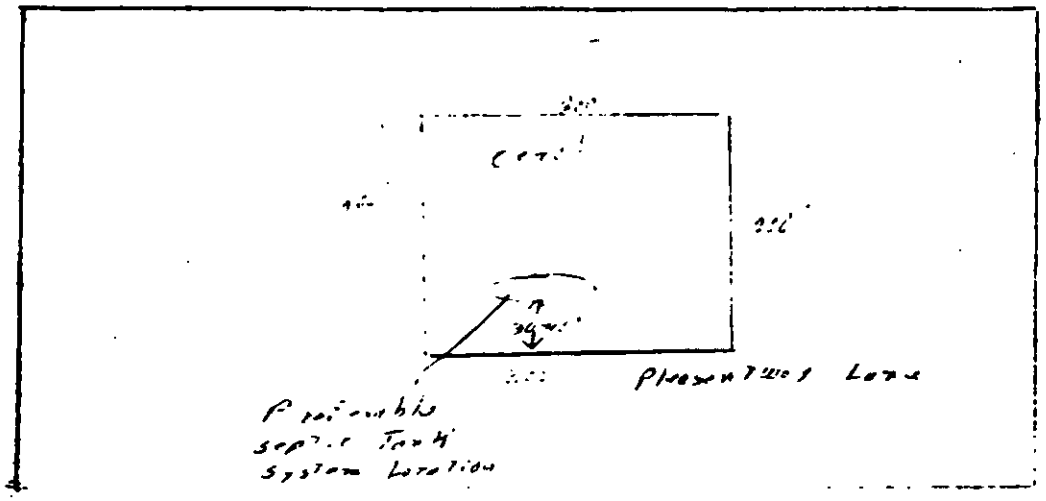
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ISSI Operations Center Staff

DIAGRAM OF PROPERTY



3/18/75
EHD 539

Serial No. 0919

PTR No. 12531

Date Issued June 14, 1977

T C No. 201-062-24,25

Map Date

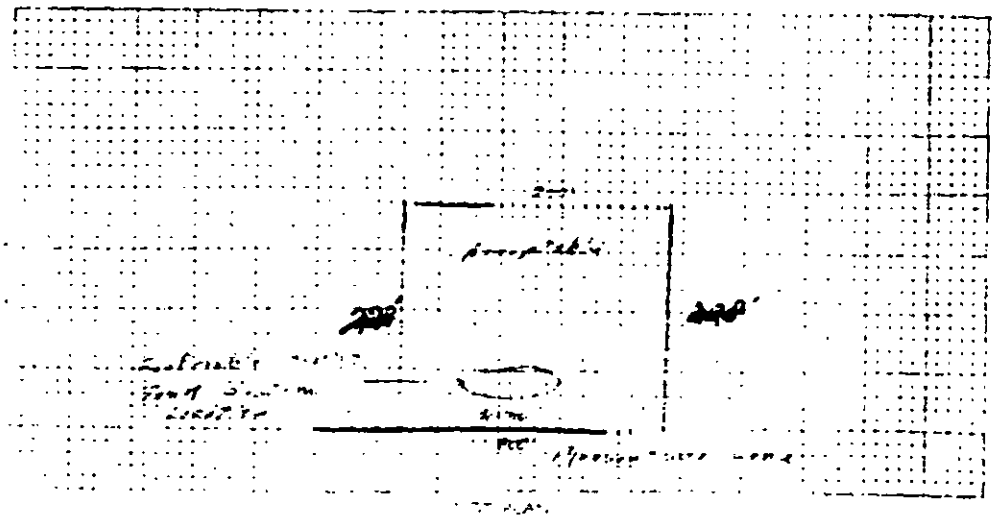
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Klutts Construction Company
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 1433 Emerywood Drive, Charlotte, NC ZIP 28210

LOCATION OF PROPERTY Pleasant Way Lane
(STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 7 & 8 BLOCK NO



Provisionally Suitable
60 min/in.

William P. Martin
Soil Scientist

John R. Atkisson
Environmental Health Supervisor
Land Development Section Head

Environmental Health Department's Copy

Date Received June 1, 1977 SEE INSTRUCTIONS ON BACK

ICARUS Application No 12531

T C No 201-C62 24.35

Map Date

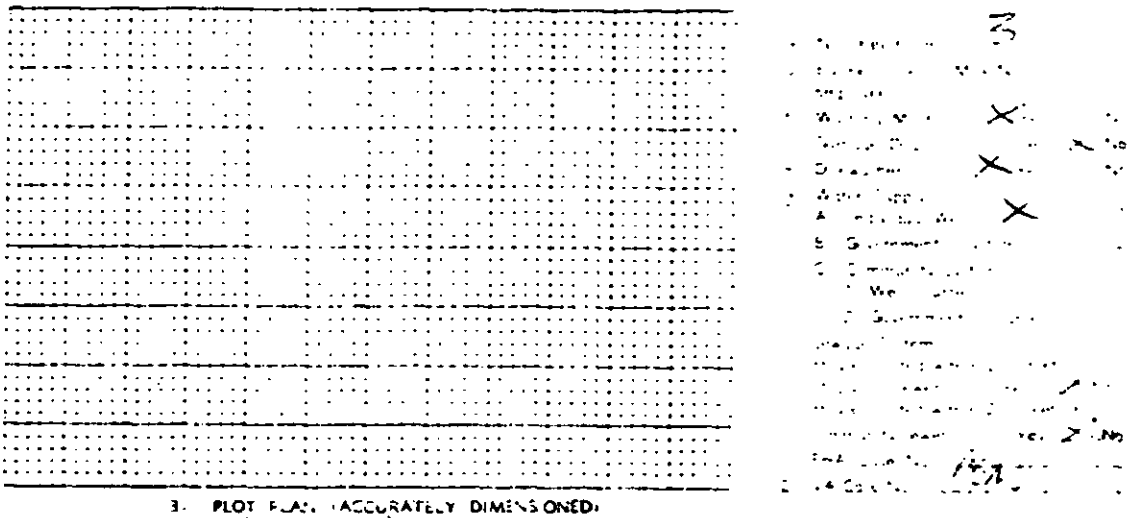
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 Health Department 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)

13 NAME OF OWNER (LAST) Smith (FIRST) Scott (MIDDLE) C

14 ADDRESS OF OWNER 4[illegible] [illegible] Pl Charlotte NC

15 PHONE NO (Home) 525-[illegible] Office

16 LOCATION OF SYSTEM [illegible] (STREET OR ROAD NO.) [illegible] - Ken

17 SUBDIVISION [illegible] Lot No 7 Block No

Map Book No 26 Page No 475

18 DEED REFERENCE -- DEED BOOK _____ AT PAGE

19 HAS A PERCOLATION TEST BEEN RUN? ___ YES ___ NO DATE RUN

20 PTR NUMBER See Instructions

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

DATE OF APPLICATION

OWNER Scott C Smith by [illegible]

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Received

MECK COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH RECEIVED SEP 13 1977

MECK COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH RECEIVED SEP 16 1977

Application No. 12531

T. C. No. 201-062-24 25

Map Date

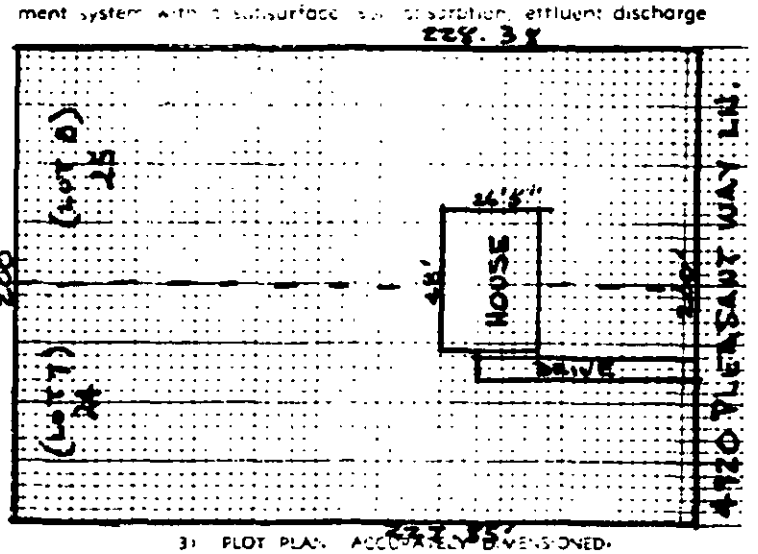
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 Health Department for a permit to

1. ✓ 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.

4. No. of Bedrooms 3
5. Bldg. Permit No. Emp. Sheet N/A
6. Washing Machine ✓ Yes ___ No
7. Garbage Disposal Yes ✓ No
8. Dishwasher Yes ✓ No
9. Water Supply
   A. Individual Well ✓
   B. Governmental System
   C. Community System
      1. Well source
      2. Governmental source
10. Sewage System
    House located within 200 feet of public sewer Yes ✓ No
    House located within 200 feet of community sewer Yes ✓ No
11. FHA Case No. N/A
12. VA Case No. N/A

13. NAME OF OWNER KLUTTS REALTY & CONST. CO. INC. (LAST, FIRST, MIDDLE)

14. ADDRESS OF OWNER 1433 EMERYWOOD DRIVE, CITY 28210

15. PHONE NO Home N/A Office 525-2864

16. LOCATION OF SYSTEM 4920 PLEASANT WAY LANE (STREET OR COUNTY ROAD)

17. SUBDIVISION N/A - Gay Acres Lot No 24 & 25 (OLD 7 & 8) Block No N/A

Map Book No 2095 Page No 475

18. DEED REFERENCE — DEED BOOK AT PAGE

19. HAS A PERCOLATION TEST BEEN RUN? ✓ YES ___ NO DATE RUN June 14, 77

20. PTR NUMBER (See Instructions 12531

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

9/8/77
DATE OF APPLICATION

Robert Beaty
OWNER Vice President

FORM NO. E-4-67

HEALTH DEPARTMENT'S COPY

Serial No. 0906

LA No. 12531

Date Issued June 14, 1977

T. C. No. 201-062-24,25

Map Date

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 Klutts Construction Company
LAST FIRST MIDDLE

ADDRESS OF OWNER 1433 Emerywood Dr., Charlotte, NC ZIP 28210

LOCATION OF LOT Pleasant Way Lane
STREET OR COUNTY ROAD

SUBDIVISION _____ LOT NO 7 & 8 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 and 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 12531 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

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 statement 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

John R. Abusson

Environmentalist

Environmental Health Director or Authorized Section Head

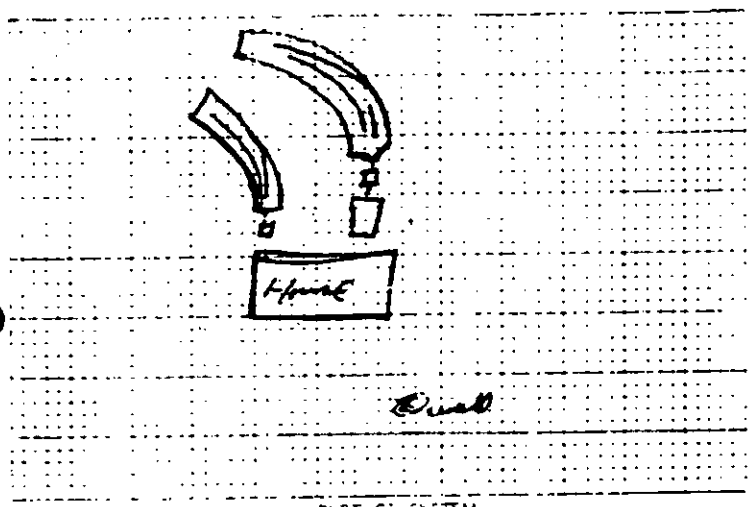
Env-5-7e

Environmental Health Department's Copy

Date Issued 2 Nov 77 Serial No. 1201 ICAR'S Permit No 12531
T C No 20L062-24
Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

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 application 12531 dated 9/13/77 and this permit shall be void and of no effect if the information provided in the application is ___ incorrect. All work shall be completed on or before ___ after which date this permit shall be null and void



PLOT OF SYSTEM

P.S.
1000 gal.
Precast
330' ; 125'
4 ; 3
10'
10'
90'

NAME OF OWNER Klutts Realty & Const. Co. INC.
LOCATION OF PROPERTY 4920 ~~Executive Dr~~ Pleasant Way Ln

This permit is issued subject to the requirements as set forth in the Rules and Regulations of the Mecklenburg County Board of Health governing individual water supply and sewage disposal systems. This permit is valid for a period of one (1) year from the date of the granting of this permit. A certificate of approval will be issued by the Department of Environmental Health before any system may be used or any building served by such system may be occupied. **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.**

S.T (12' × 53' × 17") 4 lines W.M. (9' × 42' × 12")

Date ___ Environmentalist Stephen J. Wood

* If this permit is for the installation or construction of a new system, it must be signed by the division or 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

EHD-5-76

Environmental Health Department's Copy

Date Issued 6 Dec 77 Serial No. 1216 C of A (s) No. 12531

T C No 201-862-24

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF COMPLETION

CERTIFICATE OF APPROVAL

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

Name of Owner Kutts (LAST) Realty (FIRST) & Construction Co. (MIDDLE)

Location of Property 4920 Pheasant Way Ln

Application Number 12531 Permit Number 12531

Inspection Data:

Liquid Capacity of Tank 1000 gal Tank Material Pre Cast

Total Length of Drain Tile 330' & 123' Number of Lines 4 & 3

Depth of Filter Material 17" Cover Depth 20"

Water Supply Source well Distance from Water Source 90'

Excavation Inspected 6 Dec 77 (DATE) Tank Inspected 6 Dec 77 (DATE)

Nitrification Field Inspected 6 Dec 77 (DATE)

Washing Machine Line Inspected If Applicable 6 Dec 77 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption effluent discharge as described above and it has been ✓ installed constructed altered repaired in compliance 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 not give trouble or relieve any person now or hereafter owning, occupying or using such system from any liability for damages from the failure of the system to operate properly. This Certificate of Approval is issued subject to the restrictions and conditions shown in the comments 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 increase the requirements for said system.

Comments: Not Permitted or Approved for dishwasher or garbage grinder

Environmental Health Specialist

EHD-S-76

Environmental Health Department's Copy