

2800 GREY RD

00313102

5/30/2007

duponbj

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

5134A

MECKLENBURG COUNTY HEALTH DEPARTMENT
Environmental Health Division
Groundwater & Wastewater Services

May 25, 2005

Anja Cheek
2800 Grey Road
Davidson, NC 28036

Dear Mrs. Cheek

Re: Well Sample Results – Bacteriological & Inorganic Chemical Analysis

Enclosed you should find the laboratory analysis for the well water samples that were collected at 2800 Grey Road on May 3, 2005.

Please retain these reports for future reference. If you have questions regarding these reports please contact me at (704) 336-5568.

Thanks again for your cooperation with the septic inspection and well sampling program. If you have questions or need assistance with your on-site wastewater system or private well please contact our office.

Sincerely,

Trevor Thomason, R.S.I.
Managed Systems Program Coordinator
Groundwater & Wastewater Services

Enclosures (3):

CHARLOTTE.

Laboratory Analysis Report
Report Date: 5/6/2005 02:54 PM

LABORATORY SERVICES DIVISION

LOCATION: 1060B - 2800 Grey Road 28036
LOC ID: G-PME
SAMPLE DATE-TIME: 5/3/2005 10:10
SAMPLE DESCRIPTION: Grab

SAMPLE ID: AB35301
CHAIN OF CUSTODY #: 05050059

	Parameter	Result	Units	RL	Method	Start Date/ Time	Analyst
AB35301	E. COLI-PA	Absent	P/A		SM 9223B	5/4/2005 9:45	RDW
AB35301	Total Coliform	Absent	P/A		SM 9223B	5/4/2005 9:45	RDW

Comment:

Laboratory Supervisor: _____

Laboratory Certifications: McAlpine NC DENR No.148; Brookshire NC DENR No.162; Hal Marshall N.C. DENR No. 192, N.C. DHHS Laboratory No. 37527

CHARLOTTE-MECKLENBURG UTILITIES - LABORATORY SERVICES DIVISION

Hal Marshall Laboratory, 700 North Tryon St., Charlotte, NC 28202, 704/336-5460

CHAIN OF CUSTODY RECORD

CLIENT: MECKLENBURG COUNTY, LUESA - GROUNDWATER AND WASTEWATER SERVICES

FACILITY: GROUNDWATER (Potable Water)

LOCATION / ADDRESS: 2800 Grey Road, Davidson, NC 28036

LAB CODE (circle one): REAL PRIV NEW TNC MPL (PME) OTHER

Send Report To: Trevor Thomason, 700N Tryon St. Ste. 205, Charlotte, NC 28202

COC#: 05050059

Sampled By (Print Name): Trevor Thomason

A83530

SAMPLE ID	Sample Collector's Initials	Sample Collection: Begin Date and Time	Sample Collection: End Date and Time	Chlorinated System	Sample Temperature: Collection Temp	Sample Temperature: Receipt Temp	Sample Type: Depth Composite	Sample Type: Auto Composite	Sample Type: Hand Comp	Sample Type: Grab	Sample Containers: Plastic	Sample Containers: Glass	Sample Containers: # Containers	Chemical Preservative: None	HNO3	H2SO4	NaOH	HCl	Na2S2O3	pH Correct	Analyses Requested: Total Coliform	Nitrate	Nitrite	Nitrate + Nitrite	Fluoride	Hardness	Metals	Fecal Coliform	Fecal Strep	Pest/PCB, EPA 608	Herb, EPA 8151	VOA, EPA 8260	Semis, EPA 8270
1060B	TCT	10:10	5/3/2005	N		8.6°C				X	100 ml		1					X			X											
				N																													
				N																													
				N																													
				N																													

NOTES: Complete yellow shaded sections; each "X" needs to be circled.

Itemize requested Metals here:

COMMENTS: ****3-DAY TAT REQUESTED****

Relinquished By: (Signature)	Received By: (Signature)	Date	Time
[signature]	[signature]	5-4-05	8:55
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time

Form Revision 05; effective 03/15/2005

CODES: **REAL**=REAL ESTATE TRANSACTION **PRIV**=PRIVATE WELL SAMPLING BY REQUEST OR FOR REPAIR **NEW**=NEW WELL (PERMIT)

North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28047 -- 306 N. Wilmington St. -- Raleigh, N. C. 27611-8047

INORGANIC CHEMICAL ANALYSIS - PRIVATE WATER SYSTEM

Name of System: Cheek Residence
Address: 2800 Grey Rd.
Davidson, NC
Zip: 28036

Source of Water: Ground
Source of Sample:
Type of Sample: Raw
Type of Treatment: None
Type of Analysis Private

County: MECKLENB

Report To: Mecklenburg Co. Env. Health
700 North Tryon Street
Charlotte, NC 28202
Courier: 05-16-21

ATTN: Trevor Thomason
(704) 336-5101

Collected By: T. THOMASON **Date:** 5/3/2005 **Time:** 10:10:00 AM

Location of sampling point: Well Head

Remarks:

Parameters	Results	Units	Date Analyzed:
Acidity as CaCO3	21	mg/l	5/5/2005
Silver	<0.05	mg/l	5/5/2005
Alkalinity as CaCO3	126	mg/l	5/5/2005
Arsenic	<0.001	mg/l	5/5/2005
Barium	<0.1	mg/l	5/5/2005
Calcium	42.7	mg/l	5/5/2005
Cadmium	<0.005	mg/l	5/5/2005
Chloride IC	6	mg/l	5/5/2005
Chromium	<0.01	mg/l	5/5/2005
Copper	<0.05	mg/l	5/5/2005
Fluoride	<0.20	mg/l	5/5/2005
Iron	<0.05	mg/l	5/5/2005
Hardness as CaCO3 (Ca,Mg)	174	mg/l	5/5/2005
Mercury	<0.0005	mg/l	5/5/2005
Magnesium	16.5	mg/l	5/5/2005
Manganese	<0.03	mg/l	5/5/2005
Sodium	11	mg/l	5/5/2005
Lead	<0.005	mg/l	5/5/2005
pH	7.2	Std. unit	5/5/2005
Selenium	<0.005	mg/l	5/5/2005
Total Dissolved Solids	288	mg/l	5/5/2005
Zinc	<0.05	mg/l	5/5/2005

Date Received: 5/5/2005 **Report Date:** 5/20/2005 **Reported By:**
Today's Date: 5/20/2005 **Ref:** 5235 **Login Batch:** 0505001[redacted] **Sample Number:** AB26364

Explanations

Coliform Analysis:
If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of E. coli (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:
Recommended limits for drinking water. Sample should not exceed levels listed below.

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.01 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28047 -- 306 N. Wilmington St. -- Raleigh, N. C. 27611-8047

INORGANIC CHEMICAL ANALYSIS - NITRATE ONLY

Name of System: Cheek Residence
Address: 2800 Grey Rd.
Davidson, NC **Zip:** 28036
County: MECKLENB

Source of Water: Ground
Source of Sample:
Type of Sample:
Type of Treatment: None
Type of Analysis: Nitrate
Category: Other

Report To: Mecklenburg Co. Env. Health
700 North Tryon Street
Charlotte, NC 28202
Courier: 05-16-21

ATTN: Trevor Thomaso
(704) 336-5101

Collected By: T. THOMASON **Date:** 5/4/2005 **Time:** 10:10:00 AM
Location of sampling point: Well Head
Remarks:

Parameters	Results	Units	Date Analyzed:
Nitrite as N	<0.10	mg/l	5/5/2005
Nitrate as N	5.77	mg/l	5/5/2005

EXPLANATION OF RESULTS:

Foster/Therapeutic Homes: Nitrate-N level acceptable if less than or equal to 10 mg/l
Private Well Guidelines: Nitrite-N level should be ≤ 1.0 mg/l and Nitrate-N ≤ 10.0 mg/l

Sample Temperature on Receipt: 4.5 °C
Date Received: 5/5/2005 **Report Date:** 5/20/2005 **Reported By:**
Today's Date: 5/20/2005 **Reference:** 5249 **Login Batch** 05050012 **Sample Number:** AB26378

Explanations

Coliform Analysis:
If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of E. coli (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:
Recommended limits for drinking water. Sample should not exceed levels listed below.

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.01 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 5134A DATE: 3/28/2000
TC: 003 13102 ☒ L ☒ CRT
SERIAL № 18282

Name of Owner Michael Cheek Juris.:
Address of Property 2800 Grey Rd

Inspection Data:

Tank Material PCC
Total Length of Drainfield 270'
Number of Lines 6 @ 45'
Cover Depth 20"
Water Supply Source Well (not installed)
Distance to Water Source >100' (50' min)
Excavation Inspected 3/28/2000
Tank(s) Inspected 3/28/2000
Wash Line Inspected Plumb to tank
High Water Alarm Inspected NA

PLOT

Design 2000, 1500ST, MOD, PPBPS 270'; ccil CTR# G&M Enterprises

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: Septic system designed for a 4 bedroom residence. Type III PPBPS

Phillip S. Walker R.S.
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

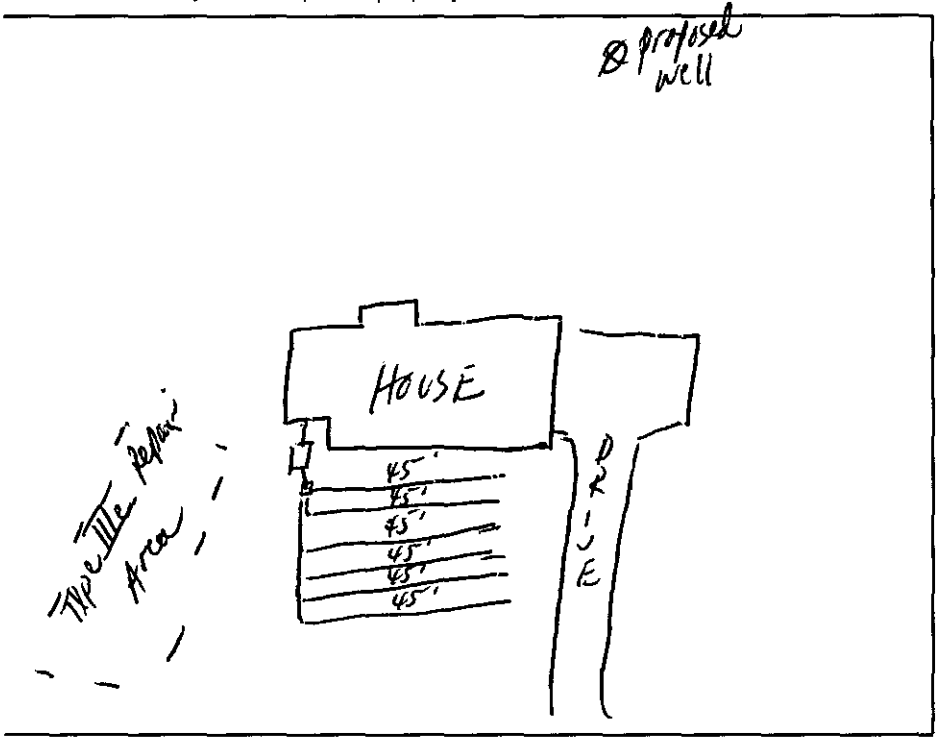
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 5134A DATE: 3/20/2000

TC: 003 131 02 ☒ L

SERIAL Nº 18339

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 11/11/99. All work shall be completed on or before 4/20/2006, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 15A 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 NA gallons

Tank Construction PCC

Trench Depth 42"

Absorption and/or Nitrification Lines:

Trench Width 2' feet

Trench Walls Scored and Porous Yes

Total Line Length 270' feet

Number of Lines 6 (45')

Depth of Stone NA inches

Distance from House 5' feet

Distance from Property Line 10' feet

Distance from Well > 100' feet

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

NAME OF OWNER Michael B Check

LOCATION OF PROPERTY 2800 Grey Rd

Comments: PPBPS Installation 1500 ST, 6 lines x 45' long x 2' wd
* Keep the septic system > 100' (50' min) from the proposed well
Type IIIe Repair Area

Philo A. Walker RS
Environmental Health Specialist

NW Ck #53 OK in full

FEE: 300 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: 11-1-99 **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: _____ PERMIT NO: 5134-A
PARCEL NO: 003-131-02

JOB LOCATION ADDRESS: 2800 Grey Rd
PROPERTY OWNER: Michael B. Check
BUILDING CONTRACTOR: _____
SUBDIVISION NAME: _____
AUTHORIZATION ISSUED BY: Jeff A. Knight DATE: 10/22/99
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 5134-A, 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: See plot plan and Improvement Permit.

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.

Anita A. Check 11/11/99
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

CONDITIONS OF IMPROVEMENT PERMIT

nit Number: 5134-A

Tax Number: 003-131-02

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.

(4)

Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

Basement	___ Yes	X No	___ Partial Basement	
Type Primary Wastewater System Type (circle one): I II (III) IV V VI	___ Conventional X 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	480 Max gallons/day wastewater flow	800 Absorption Area (sq ft)	8' Trench spacing (min. on centers)	
Yes Serviced by private well	1500 Gallon septic tank	270 Total trench length (ft)	36" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)	
4 Bedrooms in residence	N/A Gallon pump tank	N/A Depth of stone		
Any surface waters present: No Type:		Minimum separation distance:		
Site modifications required: No				
Additional Conditions: * 1) See plot plan. 2) A riser should be placed over the outlet end of the septic tank to facilitate filter maintenance. 3) Agreement forms must be completed and recorded prior to installation approval.				
Repair Area System Type Type (circle one): I II (III) IV V VI	___ Conventional X 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	
800 Absorption Area (Sq ft) 270 Total Trench Length (Ft)	N/A Depth of Stone Trench	8' 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.

Jeff A. Knight 10/22/99
DEHNR Authorized Agent Date

Anja A. Chaet 11/11/99
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

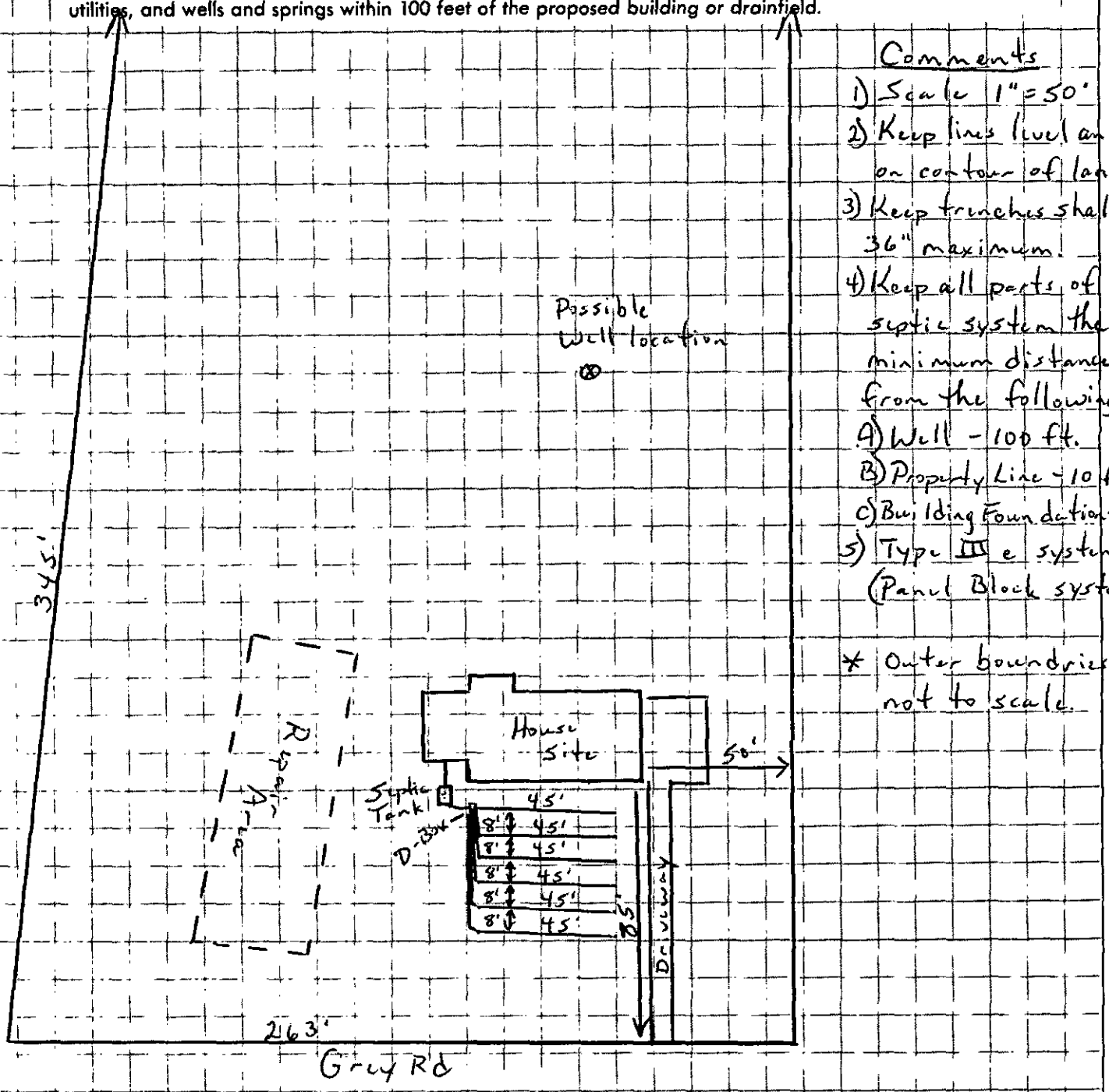
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 5134-A

TC: 003-131-02

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.



Comments

1) Scale 1" = 50'
2) Keep lines level and on contour of land.
3) Keep trenches shallow. 36" maximum.
4) Keep all parts of septic system the minimum distance from the following:
   A) Well - 100 ft.
   B) Property Line - 10 ft
   C) Building Foundation - 5ft
5) Type III e system - (Panel Block system)

* Outer boundries not to scale.

Angie A. Beck 11/11/99

APPROVAL DATE _____

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

WASTEWATER TREATMENT AND DISPOSAL SYSTEM DESIGN AGREEMENT: 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c); OR .1969

FILE # 5134A
PARCEL # 003-131-02

The undersigned, Anja A. Cheek Anja A. Cheek, owner of property located at 2300 Grey Rd., (the "site") and described in an instrument recorded in Book 09788 at Page 0846/0847 Mecklenburg Public Registry, hereby acknowledges that the undersigned applied to the Mecklenburg County Health Department (the "Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 15A NCAC 18A .1900 et seq.; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data, and other information which indicate to the Department that the septic tank system proposed by the undersigned is allowed by the rules; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is the responsibility of the designer, owner, developer, installer, or user of the system, as applicable, and that neither the Department nor its officials, employees, or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further acknowledges that the following conditions will apply to the site:

- Any changes on the property may make the Improvement Permit Null and void and may make the Improvement Permit subject to revocation.

This instrument was prepared by: Sue Ferguson
Mail after recording to: Anja Cheek 1167 Leigh Cir Charlotte, NC 28216

FOR REGISTRATION JUDITH A GIBSON
REGISTER OF DEEDS
MECKLENBURG COUNTY NC
1999 NOV 19 10 13 AM
BOOK 10912 PAGE 232-236 FEE $14.00
INSTRUMENT # 1999206496

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees, and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

IN WITNESS WHEREOF, the undersigned 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, this 18 day of November, 1997.

AMERICAN FAMILY HOMES, LLC (Corporate Name)

By: Michael F Cowell

VICE President

ATTEST:

Secretary

(Corporate Seal)

Anja A. Cheek (SEAL)

_____ (SEAL)

_____ (SEAL)

_____ (SEAL)

STATE OF NORTH CAROLINA
COUNTY OF Mecklenburg

I, Sue A. Ferguson, a Notary Public for said County and State, do hereby certify that Anja A. Cheek Anja A. Cheek personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 18 day of November, 1999.

Sue A. Ferguson
Notary Public

My Commission Expires:
August 4, 2003

8/4/03

STATE OF NORTH CAROLINA
COUNTY OF Mecklenburg

I, Sue A. Ferguson, a Notary Public for said County and State, do hereby certify that ~~Gaye A. Cheek~~ William Dobson personally came before me this day and acknowledged that ~~S~~he is _____ Secretary of American Family Homes, a North Carolina corporation, and that by authority duly given and as the act and deed of said corporation, the foregoing instrument was signed in its name by its _____ President, sealed with its corporate seal and attested by _____ as its _____ Secretary.

WITNESS my hand and notarial seal, this 18 day of November, 1999.

SUE A. FERGUSON NOTARY PUBLIC MECKLENBURG CO.

Sue A. Ferguson
Notary Public

My Commission Expires:
October 4, 2003

8/4/03



JUDITH A. GIBSON
REGISTER OF DEEDS , MECKLENBURG COUNTY
COUNTY & COURTS OFFICE BUILDING
720 EAST FOURTH STREET
CHARLOTTE NC 28202

****

Filed For Registration:	**11/19/1999 10:13 AM**
Book:	**RE 10912 Page: 232-236**
Document No.:	**1999206496**
	PRMIT 5 PGS $14.00
Recorder:	**JESSIE YOUNG**

****

State of North Carolina, County of Mecklenburg

The foregoing certificate of SUE A FERGUSON Notary is certified to be correct. This 19TH of November 1999

JUDITH A. GIBSON, REGISTER OF DEEDS By: Jessie Young
Deputy/Assistant Register of Deeds

****

1

1999206496

EnergyUnited
YOUR LOCAL CONNECTION

PO BOX 1831 STATESVILLE, NORTH CAROLINA 28687 704-873-5241 phone 704-878-0161 fax

August 17, 1999

Mr. Jeff Knight
Mecklenburg County Health Department
Environmental Health Division
700 North Tryon Street
Suite 211
Charlotte, NC 28202-2236

Re: Brent Cheek (Property on Grey Road, Davidson, NC)

Dear Mr. Knight,

EnergyUnited has been contacted to grant permission to install a drain line within the limits of a right-of-way corridor maintained by the cooperative.

EnergyUnited does not have jurisdiction over land usage on privately owned property other than restrictions pertaining to structures erected in close proximity of energized lines. Our definition of structures is a physical building or other construction that will limit accessibility to the facilities within the right-of-way or restrict the safe operation of the facility.

There may be cases in which the cooperative may request the placement of drain lines to be adjusted where underground facilities exist. It is the responsibility of the landowner (or landowner's contractor) to make the necessary notifications for marking and/or locating of any buried facilities prior to excavating.

EnergyUnited would also want it understood by the landowner that we would not be liable for damage to drain fields and/or septic systems installed within the limits of the easement as a result of our access into the right-of-way.

Should you have any questions or desire to discuss this matter further, please advise.

Sincerely,

EnergyUnited Electric Membership Corporation

Sherry Shuford

Sherry Shuford
District Operations

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON ~~SITE WAS~~TEWATER SECTION

#2

Sheet: _____

Property ID: PO 003-131-02

Lot #: _____

File #: 5134A

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Michael B. Cheek APPLICANT: _____

ADDRESS: 1167 Leigh Circle, Charlotte DATE EVALUATED: 8-4-99

PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949) 480gpd PROPERTY SIZE: 1.25 ±

LOCATION OF SITE: 2800 Hwy Road PROPERTY RECORDED: _____

WATER SUPPLY: ☑Private ☐Public ☐Well ☐Spring ☐Other _____

EVALUATION METHOD: ☑Augur Boring ☐Pit ☐Cut

TYPE OF WASTEWATER: ☑Sewage ☐Industrial Process ☐Mixed

PROFILE #	Slopes 5-12% .1940 Landscape Position/ Slope %	Horizon Depth (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS &LTAR
1	LS	0-3"	gr|c|	Fr|SExP|ss|sP	>48" TO soil wetness	48"	N/A	None	PS .39|P2 IV
		3-34"	sBK|τ	Fi|SExP|s|P					
		34-48"	sBK| c|	Fr|SExP| ss|sP					
2	LS	0-3"	gr|τ|	Fr|SExP|ss|sP	>48" TO soil wetness	48"	N/A	None	PS .39|P2 IV
		3-36"	sBK|τ	Fi|SExP|s|P					
		36-48"	sBK|c|	Fr|SExP|ss|sP					
3	LS	0-5"	gr|c|	Fr|SExP|ss|sP	>48" TO soil wetness	48"	N/A	None	PS .39|P2 IV
		5-48"	sBK|τ	Fi|SExP|s|P					

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

OTHER FACTORS (.1946): _____

SITE CLASSIFICATION (.1948): Unsuitable

EVALUATED BY: W.A. Marlin LSS - 8-4-99

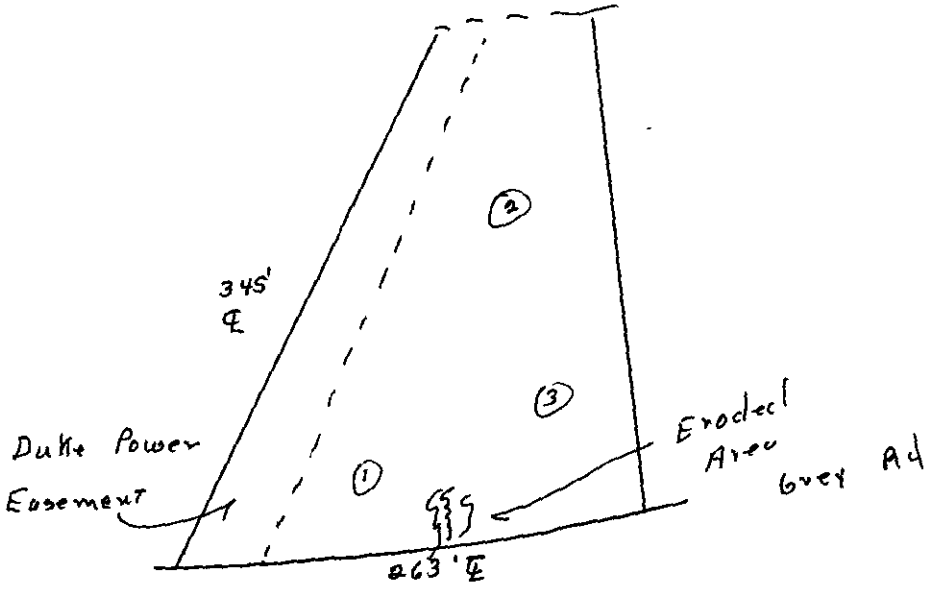
OTHER(S) PRESENT: _____

FILE # 5134A

COMMENTS 100% Repair

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR	CONSISTENCE MOIST	CONSISTENCE WET
R-RIDGE	I	S-SAND	1.2-0.8		
S-SHOULDER SLOPE		LS-LOAMY SAND		VFR-VERY FRIABLE	NS-NON-STICKY
L-LINEAR SLOPE				FR-FRIABLE	SS-SLIGHTLYSTICKY
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6	FI-FIRM	S-STICKY
N-NOSE SLOPE		L-LOAM		VFI-VERY FIRM	VS-VERY STICKY
H-HEAD SLOPE				EFI-EXTREMELY FIRM	NP-NON-PLASTIC
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3		SP-SLIGHTLYSTICKY
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM			P-PLASTIC
T-TERRACE		CL-CLAY LOAM			VP-VERY PLASTIC
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM			
	IV	SC-SANDY CLAY	0.4-0.1		
		SIC-SILTY CLAY			
		O-ORGANIC			

STRUCTURE	MINERALOGY
SG-SINGLE GRAIN	SLIGHTLY EXPANSIVE
M-MASSIVE	
CR-CRUMB	EXPANSIVE
GR-GRANULAR	
SBK-SUBANGULAR BLOCKY	
ABK-ANGULAR BLOCKY	
PL-PLATY	
PR-PRISMATIC	



N

DATE: 6-29-99

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 #: 5134A

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 003-131-02

STREET ADDRESS: 2800 GREY RD.

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

CLOSING DATE 7-10-98

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: 2,000 ft²

NUMBER OF BEDROOMS: 4 | NUMBER OF OCCUPANTS: 4

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: (LAST) CHEEK (FIRST) MICHAEL (MI) B.	NAME: (LAST) (FIRST) (MI)
ADDRESS: 1167 LEIGH CIRCLE	DAYTIME PHONE: ( ) —
CITY: CHARLOTTE STATE: NC ZIP: 28216	
DAYTIME PHONE: (704) 399-3153	

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 7-10-98

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: Michael B. Cheek DATE: 6-28-99

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

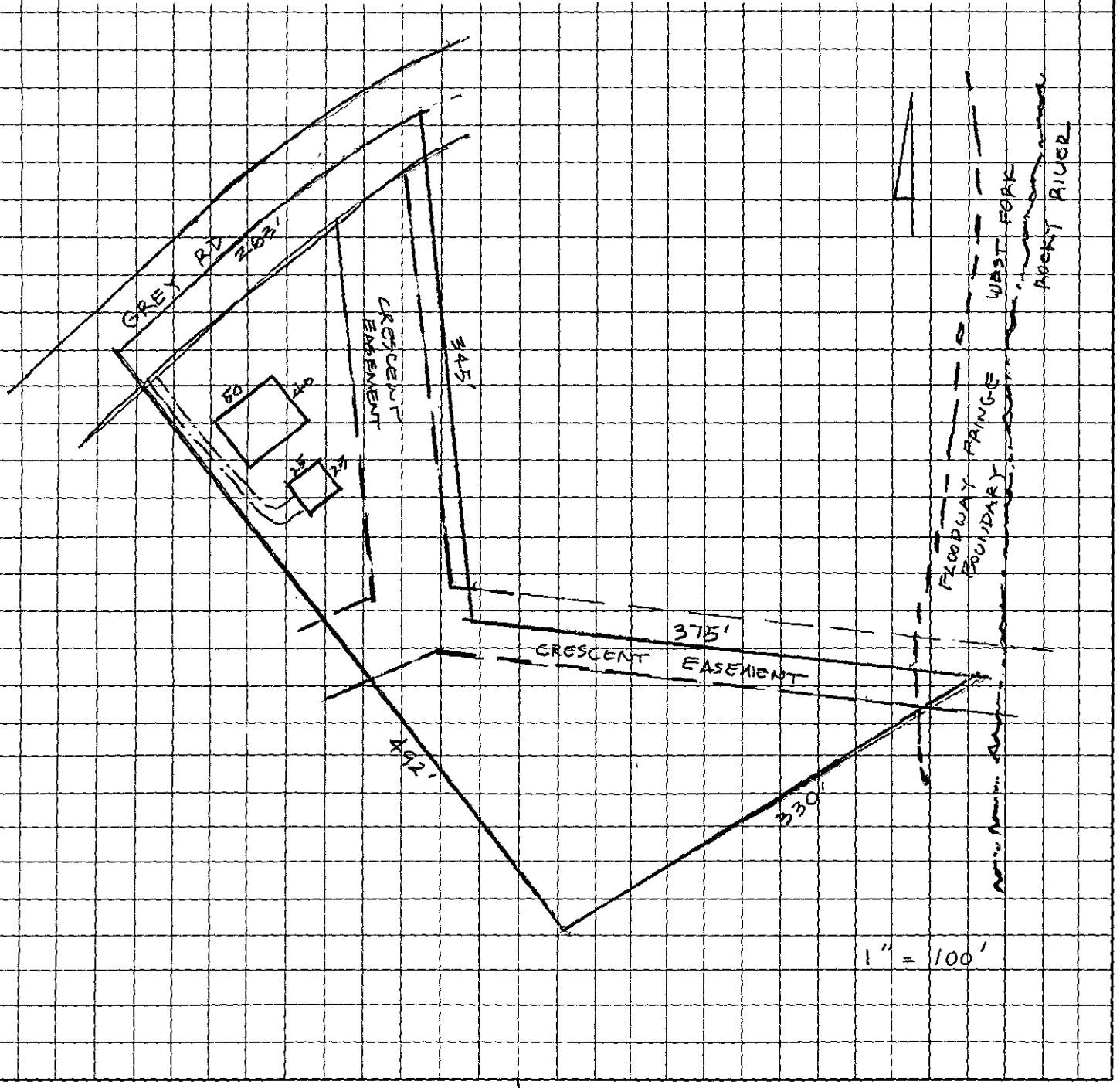
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 5134A

TC: 003-131-02

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.



APPROVAL DATE _____

OWNER/AGENT SIGNATURE

DATE Michael B. Chesk 6-28-99

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

Mecklenburg County
Health Department

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

November 7th, 1988

Donald Michael Cheek
Rt. 1, Box 728C
Davidson, NC 28036

RE: Property located at Grey Road
FILE: 5134A
PARCEL: 00313102 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 15729) 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.

Very truly yours,

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

Enclosure

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

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 15729

File: 5134A
Parcel: 00313102 PO

Action 1
☐ PC

Location: Grey Road

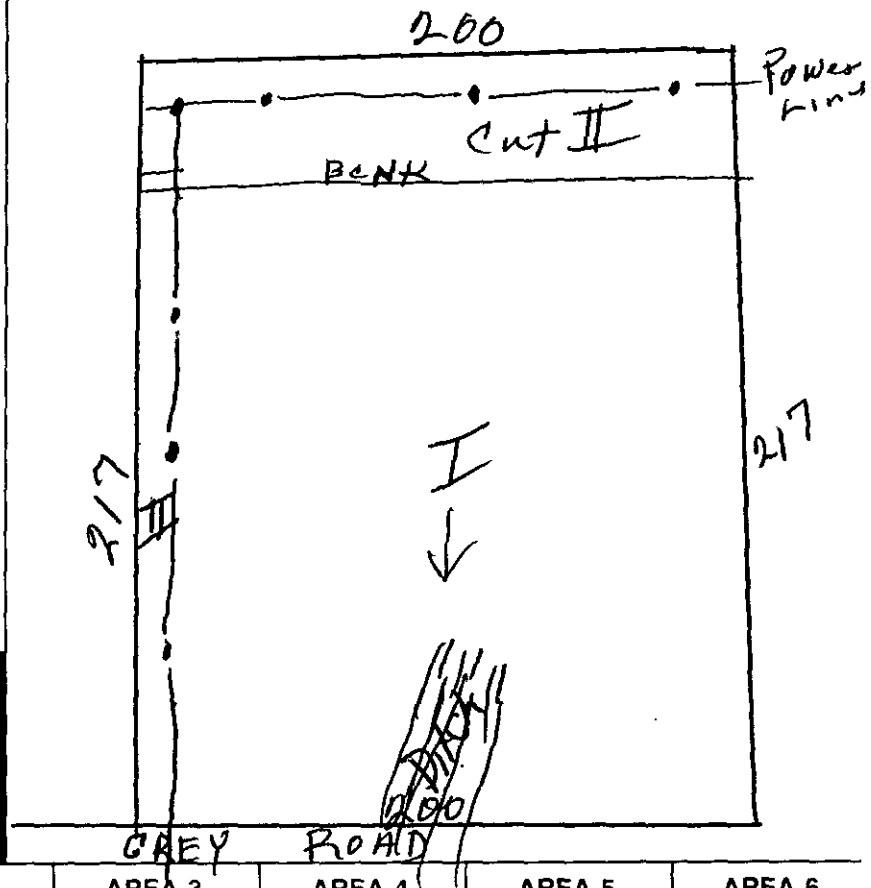
Subdivision:

Lot: Block: Acres: .92

Owner: Donald Michael Cheek
Address: Rt. 1, Box 728C
Davidson, NC 28036

Comments: _____

Described by: W. B. Ramsey
Date: 10-26-88



*** 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 2–5	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 36–48	S PS (U) Various	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 Limited Area	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	IIa Cut Cecil				
Area Classification	S (PS) U	S PS (U)	S PS U	S PS U	S PS U	S PS U

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 10/24/88

Name/Company Donald Cheek

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Soil Test
#5134A

MECK[illegible] COUNTY
HEALTH [illegible]
ENVIRONMENTAL HEALTH DIVISION
PAID

OCT 24 1988

#1654

Fee: $30 —

Completed by

Collected by

APPLICATION FOR SOIL INVESTIGATION

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

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
OCT 2 [illegible]
ENVIRONMENTAL HEALTH
DIVISION

(OFFICE USE ONLY)

FILE: 5134A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: 2808 GREY ROAD

② SUBDIVISION: _____ ③ LOT: _____ ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: PO 003 PAGE NO.: 131 PARCEL NO.: 02

⑥ DEED REFERENCE: BOOK NO.: 4944 PAGE NO.: 0051

OWNER

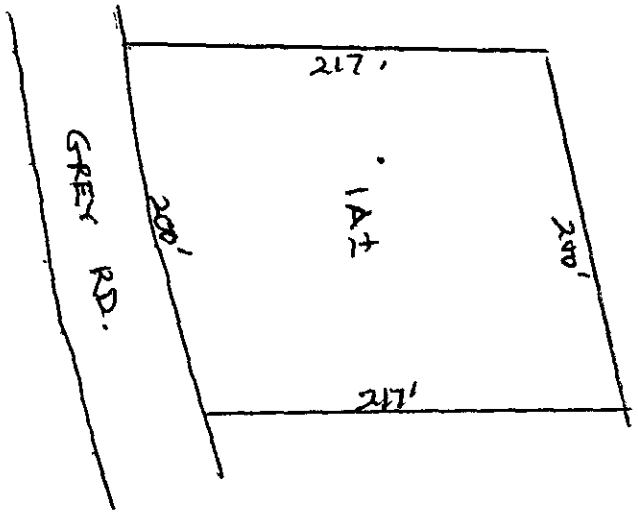
⑦ NAME: DONALD (FIRST) MICHAEL (MIDDLE) CHEEK (LAST)

⑧ MAILING ADDRESS: RT 1 BOX 728C

⑨ CITY: DAVIDSON ⑩ STATE: NC ⑪ ZIP: 28036

⑫ PHONE: (WORK) 892-7056 (HOME) 892-4066

⑬ Accurately diagram and dimension lot.



1" = 100'

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: Donald M. Cheek

Date: 10-22-88

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

DEED BOOK PAGE

4944 0051

FILED

171

DEC 12 2:45 PM '84

REC

MECK

Excise Tax

Recording Time Book and Page

Tax Lot No.

Parcel Identifier No

Verified by

County on the day of , 19

by

Mail after recording to Wendow, Inc.

This instrument was prepared by John S. Freeman, Attorney

Brief description for the Index

NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED made this [illegible] day of [illegible], 1984, by and between

GRANTOR	GRANTEE
JOHN A. TATE, JR. and wife, DOROTHY N. TATE; H. B. NARAMORE and wife, JANET F. NARAMORE; H. EDWARD KNOX and wife, FRANCES S. KNOX; and CHARLES F. KNOX (unmarried)	DONALD M. CHEEK and wife, SARAH B. CHEEK

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 , Deweese Township, Mecklenburg County, North Carolina and more particularly described as follows:

BEGINNING at a nail in the centerline of the bridge over the west fork of Rocky River and in the centerline of Grey Road and running thence with Grey Road in three courses as follows: (1) S. 73-01-12 W. 166.42 feet to a point; (2) with the arc of a circular curve to the left having a radius of 646.18 feet, for a distance in and along said arc of 332.67 feet in a southwest direction to a point; and (3) S. 43-32-25 W. 418.01 feet to a point in the centerline of said road; thence S. 41-48-23 E., passing an iron pin in the southerly margin of the right-of-way of said road at 30.10 feet, for a total distance of 610.10 feet to an iron pin; thence N. 73-29-17 E. 540.0 feet to a point in or near the centerline of the west fork of Rocky River; thence with said centerline in three courses as follows: (1) N. 12-55-20 W. 359.82 feet to a point in the centerline of said river and in the centerline of a 50-foot power line right-of-way; (2) N. 16-50-13 W. 277.88 feet to a point; and (3) N. 09-56-43 W. 212.30 feet to the point or place of BEGINNING. Containing 12.5211 acres as shown on a survey for Don Cheek by R. B. Pharr & Associates, dated December 3, 1984, and bearing File No. V-320. Being a portion of the property which was conveyed to Grantor by deed recorded in Book 3664, Page 949, of the Mecklenburg Public Registry.

STAMPS	19.00
FEE	8.00
( )	27.0
CASH	27.00

8:25 ##498 000

12-12-84

N.C. Bar Assn. Form No. 3 - 1976, Revised 1977

DEED BOOK PAGE

4944 0052

The property hereinabove described was acquired by Grantor by instrument recorded in

A map showing the above described property is recorded in Plat Book page

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:

Subject to all such valid and enforceable easements, conditions, restrictions and reservations as may appear of record and specifically including, but not limited to, the rights of the public in the portion of the above property which lies within the right-of-way of Grey Road; right-of-way [illegible] feet in width for power lines [illegible]; and subject the riparian rights of others in the free flowage of the waters of Sugar River. Subject also to the lien of ad valorem property taxes for 1984 which Grantee assumes and agrees to pay. Subject also to the restrictive covenants set forth on Exhibit A which is attached hereto and incorporated herein by reference.

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.

USE BLACK INK ONLY

H. Edward Knox (SEAL)

Frances S. Knox (SEAL)

Charles E. Knox

John A. Tate, Jr. (SEAL)

Dorothy N. Tate (SEAL)

H. B. Naramore (SEAL)

Janet P. Naramore (SEAL)

SEAL-STAMP

NORTH CAROLINA Mecklenburg County

I, a Notary Public of the County and State aforesaid, certify that John A. Tate, Jr. and wife, Dorothy N. Tate; H. B. Naramore and wife, Janet P. Naramore; H. Edward Knox and wife, Frances S. Knox and Charles E. Knox Grantor, personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official stamp or seal, this 12th day of December, 19 84.

Use Black Ink

My commission expires 9/10/89 Barbara H. Ferrell Notary Public

SEAL-STAMP

NORTH CAROLINA, County

I, a Notary Public of the County and State aforesaid, certify that personally came before me this day and acknowledged that he is Secretary of 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 as its Secretary. Witness my hand and official stamp or seal, this day of 19

Use Black Ink

My commission expires: Notary Public

The foregoing Certificate(s) of Barbara H. Ferrell, a Notary Public for said County and State is

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.

C. E. Crowder

REGISTER OF DEEDS FOR County

By Deputy/Assistant Register of Deeds

This 12th day of December, 1984

See Page 53