

15024 AUTUMNCREST RD

02103119

1/4/2008

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 4298B DATE: 3/27/03

TC: 021-031-19P0 ☒ L ☒ CRT

SERIAL 19136

Name of Owner James L. Self Juris.: _____

Address of Property 15024 Autumncrest Road

Inspection Data:

Tank Material PCC

Total Length of Drainfield 344

Number of Lines 4 @ 86

Cover Depth 8"

Water Supply Source Municipal

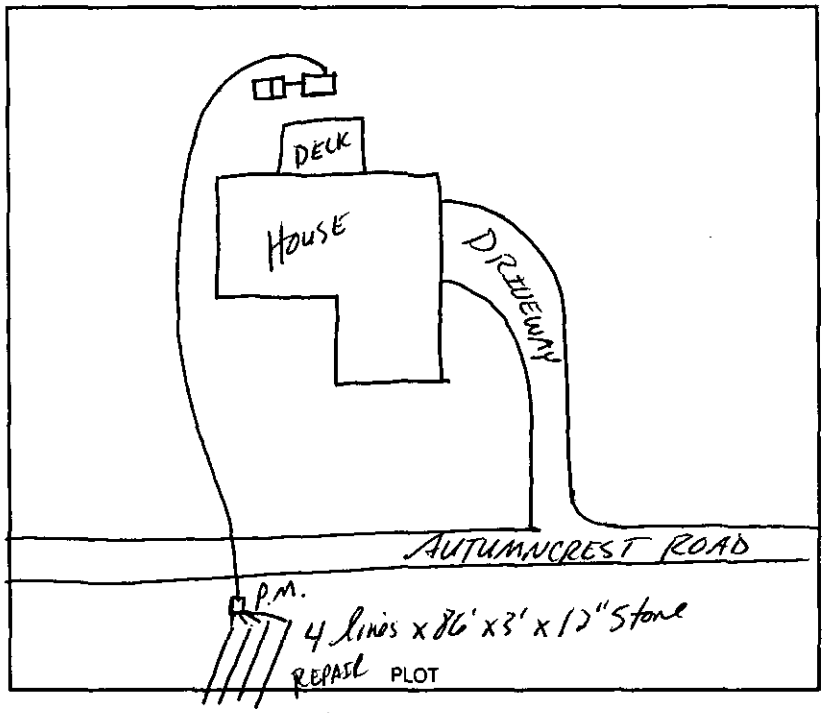
Distance to Water Source 7100'

Excavation Inspected 3/27/03

Tank(s) Inspected 3/27/03

Wash Line Inspected NA

High Water Alarm Inspected 3/27/03



Design 1500ST, 1000DT, P1, CON, 1032SFT, Pressur Manifold CTR# NORWOOD

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: Three Bedroom House
4 lines x 86' x 3' x 12" stone w/ Pressure Manifold
Type III 6 Pump to Conventional System

Jerry Medlin 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

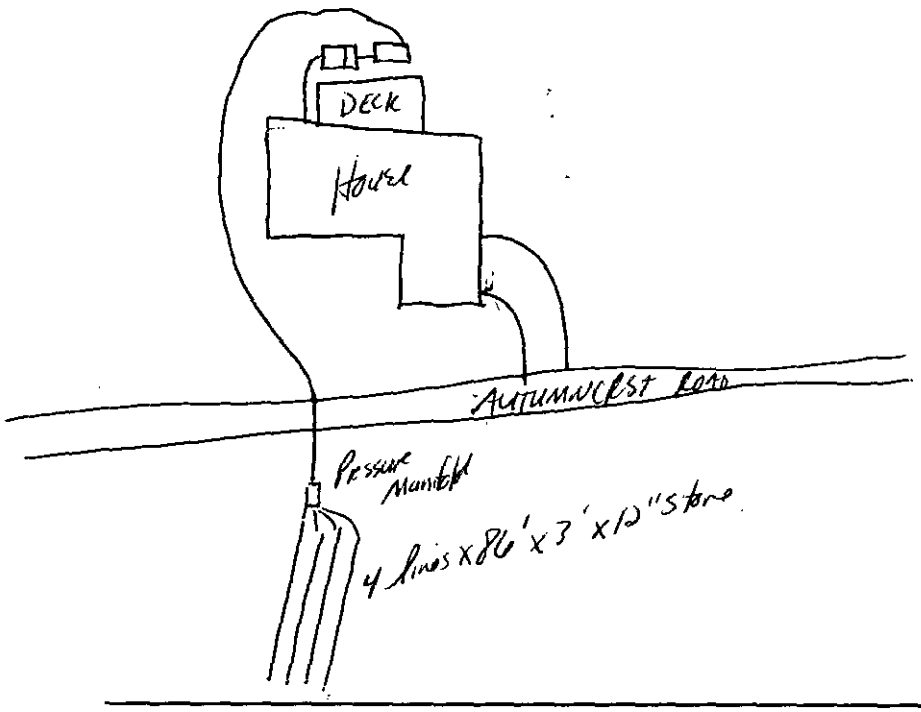
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 4298B DATE: 1/28/03

TC: 021-031-19 ☒ L

SERIAL 19294

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 2/28/02. All work shall be completed on or before 2/28/03, 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 1000 gallons

Tank Construction PCC

Trench Depth 24"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous yes

Total Line Length 344' feet

Number of Lines 4 x 86'

Depth of Stone 12" inches

Distance from House >15' 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 James L. Self

LOCATION OF PROPERTY 15024 Autumncrest Road

Comments: Three Bedroom House
Install 4 lines x 86' x 3' x 12" Stone
Type IIIb Pump to Conventional System
Pressure Manifold

Tommy Mullen R.S.
Environmental Health Specialist

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

FEE: 360 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION** ACS X 6/25
DATE: 6/25/02 **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: _____ PERMIT NO: 4298B

PARCEL NO: ~~021-261-01 PO~~ 021-031-19 PO

JOB LOCATION ADDRESS: 15024 Autumn Crest Road

PROPERTY OWNER: James C. Self

BUILDING CONTRACTOR: _____

SUBDIVISION NAME: _____

AUTHORIZATION ISSUED BY: Tammy P. Mickle DATE: 3/22/02

~~DEHNR~~ AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 4298B, 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: Need encroachment agreement
Need survey drawing
Need easement agreement forms

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.

James C. Self 3-25-02

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

Permit Number 4298B

CONDITIONS OF IMPROVEMENT PERMIT

Tax Number 021 ~~201 0170~~ 031-19 PP

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.

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

Basement	✓ Yes	___ No	___ Partial Basement	
Type Primary Wastewater System Type (circle one): I II (III) IV V VI	✓ Conventional ___ 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	
0.35 Long-term acceptance rate	360 Max gallons/day wastewater flow	1032 Absorption Area (sq ft)	9' Trench spacing (min. on centers)	
NO Serviced by private well	1500 Gallon septic tank	344' Total trench length (ft)	24" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)	
3 Bedrooms in residence	1000 Gallon pump tank	12" Depth of stone		
Any surface waters present: NO Type:		Minimum separation distance:		
Site modifications required:				
Additional Conditions: Need encroachment agreement from D.O.T. Need survey drawing Need easement agreement forms } Before C.A. Release				
Repair Area System Type Type (circle one): I II (III) IV V VI	✓ Conventional ___ 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	
1032 Absorption Area (Sq ft) 344 Total Trench Length (Ft)	12" Depth of Stone Trench	9' Trench spacing (min. on centers)	24" 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 th 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 effe 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 Departmer
- This Improvement permit is transferable.

Tommy P. Medlock R.S. 3/22/02
DEHNR Authorized Agent Date

James L. Self 3-25-02
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

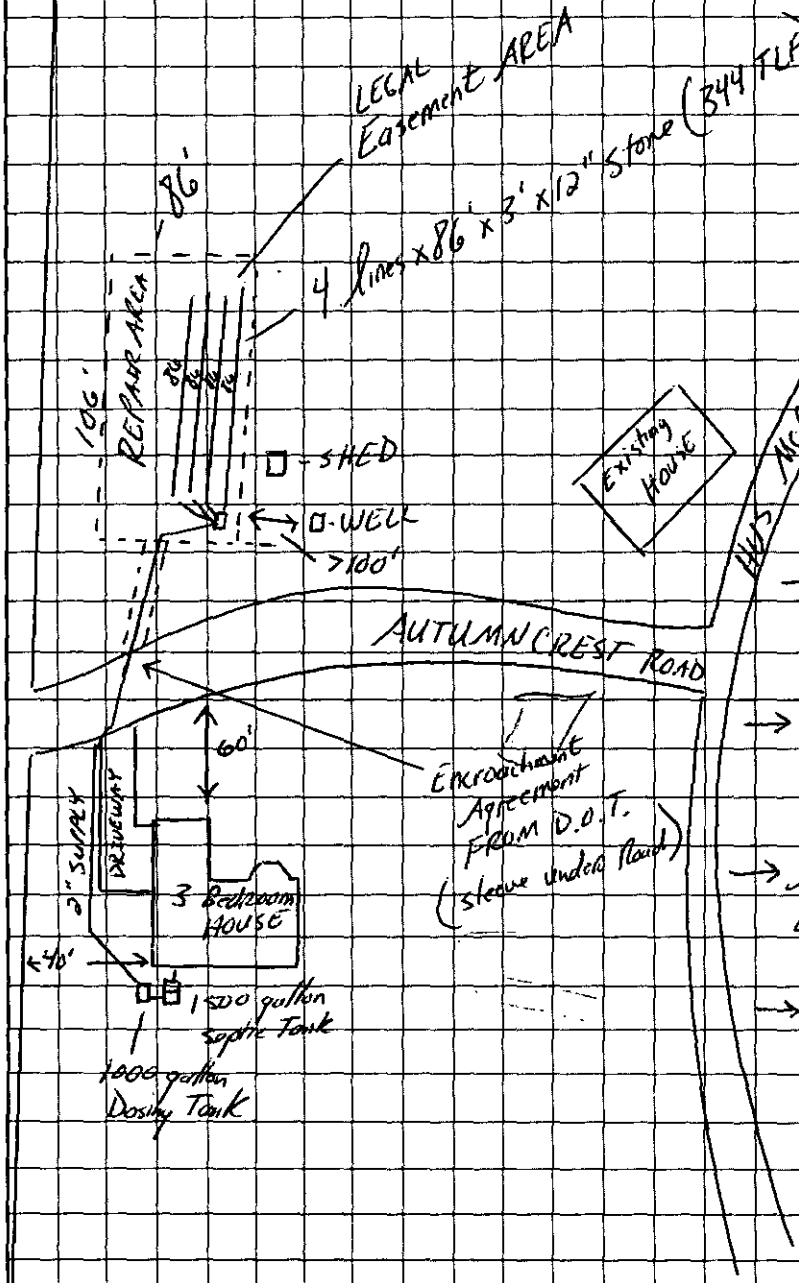
PROPOSED PLOT PLAN

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

FILE: 42983 / ~~27866~~

TC: 021-031-19 P6

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

→ DRAWING NOT TO SCALE
→ THREE BEDROOM House WITH Basement
→ 0.35 LTAR
→ 4 lines x 86' x 3' x 12" Stone
→ Type IIIb Pump to Conventional System
→ Type IIIb Pump to Conventional Repair
→ Keep all parts of septic system >100' from all wells
→ Need encroachment agreement from D.O.T. before C.A. Release
→ Need Easement agreement forms on file before C.A. Release
→ Need Survey Drawing showing easement area on file before C.A. Release
→ Need approximately an area of 106' x 86' for easement area with 16' access from road

James L. Lely
OWNER/AGENT SIGNATURE

DATE 3-25-02

APPROVAL DATE Tammy P. Medlin R.S. 3/27/02

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

FEE: 100 SITE

DATE: 2/28/02 VISIT

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

[ ] CRT

TYPE APPLICATION: X 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 #: ~~2[illegible]B~~ / 4298B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 02103119 PP

STREET ADDRESS: 15007 Autumn Crest Rd.

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

TYPE OF BUILDING (CHECK ONE):

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

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 2500

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS:

CLOSING DATE_____

FOUNDATION FOR RESIDENCE:

__ WITHOUT BASEMENT
__ ON SLAB
__ CRAWL SPACE
__ WITH BASEMENT /PLUMBING
X 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 X NO TYPE: _____

WATER SUPPLY (CHECK ONE): City
__ COMMUNITY (C)
X 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 X NO	WELL, SPRINGS OR WATERLINES	__ YES X NO
EXISTING WASTEWATER SYSTEMS	__ YES X NO	DESIGNATED WETLANDS	__ YES X NO
EASTMENTS OR RIGHT-OF-WAYS	__ YES X NO		

PROPERTY OWNER:

NAME: Self (LAST) James (FIRST) L. (MI)

ADDRESS: 9902 Forest Dr.

CITY: Chas. STATE: N.C. ZIP: 2821[illegible]

DAYTIME PHONE: (704) 394-2737

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) -

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 8/4/2000

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: James L. Self DATE: 2-28-02

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

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 06/25/02
Receipt #: 8950
Check / Auth #: VISA AP1376
Received By: FOSTERV

Amount: 300.00
Tendered: 0.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: SELF JAMES
Attn:
Address: 9902 FOREST DR
Address:
City/State/Zip: CHARLOTTE, NC 28216

Item	Description	Permit#	Quantity	Unit Price	Total Price
0734	Auth for Waste Wtr Sys Constr 15024 AUTUMNCREST RD		1	150.00	150.00
0703	Installation/Final Approval		1	150.00	150.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance

Orig.

Prepared By & Lee Self
Mail To: 9902 Forest Dr.
Char. N.C. 28216

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

SEPTIC TANK DRAIN FIELD EASEMENT AGREEMENT

This EASEMENT made this 5 day of March, 2002, by and between

GRANTOR	GRANTEE
Ted A + Sandra H Merrell 15115 Hus McGinnis Rd. Huntersville, NC 28078	James Lee Self 9902 Forest Dr. Charlotte, NC 28216

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 an easement as hereinafter described, to run with the land, upon that certain lot or parcel of land owned by Grantor and located in the City of Huntersville Township, Mecklenburg County, North Carolina, and more particularly described as follows:

Mecklenburg Tax Parcel No. 02120101 as shown on a page of the County Tax Map attached hereto as Exhibit A

Lot _____ Block _____ of _____ recorded in Map Book 14778 Page 890 (if applicable)

See the plat attached hereto as Exhibit B and the parcel shown thereon identified with Grantor's name for the legal description of Grantor's parcel and of the Septic Tank Drain Field Easement Area located thereon, said parcel labeled thereon and hereinafter referred to as the "Easement Parcel."

FOR REGISTRATION JUDITH A. GIBSON
REGISTER OF DEEDS
MECKLENBURG COUNTY, NC
2002 JUN 21 03:24 PM
BOOK 13722 PAGE 451-457 FEE: $29.00
INSTRUMENT # 2002119842

This instrument was prepared by: _____

Mail after recording to: _____

Grantor hereby imposes said easement for the benefit of Grantee as the present owner and for the benefit of future owners of the following lot or parcel of land, situated in the City of Huntersville, _____ Township, Mecklenburg County, North Carolina, and more particularly described as follows:

Mecklenburg Tax Parcel No. 02103119 as shown on a page of the County Tax Map attached hereto as Exhibit A
Lot _____ Block _____ of _____ recorded in Map Book 11478 Page 926 (if applicable)

See the plat attached hereto as Exhibit B and the parcel shown thereon identified with Grantee's name for the legal description of Grantee's parcel, said parcel labeled thereon and hereinafter referred to as the "Benefitted Parcel."

Said Easement shall enable the Grantee to place, if, as and when needed, such need to be determined by the Grantee in his sole discretion, a septic tank and drain field or portions thereof, upon the Septic Tank Drain Field Easement Area on the Easement Parcel and to inspect, maintain, repair and replace the components of said septic tank and drain field at any time and from time to time. If the Easement Area also includes a connector strip for ingress and egress, Grantee shall have the right to use said connector strip for access as needed. ***This Easement may not be altered, amended or cancelled without the express written permission of the Mecklenburg County Health Department, which written permission must be part of any document recorded to alter, amend or cancel this Easement.*** This Easement shall automatically expire, however, should Grantee ever hook up the structure located or to be located on the Benefitted Parcel to a public or community sanitary sewage system but shall otherwise be perpetual.

Grantor acknowledges that the Septic Tank Drain Field Easement Area cannot be used and will not be used for any of the following activities or in any of the following ways:

- Grading or filling
- Parking or driving heavy equipment in the area or in any other way compacting the soil in the Area
- Excavating soil from the Area
- Placing footings or foundations or engaging in any other construction activity in the Area
- Placing in-ground or above-ground swimming pools in the Area
- Placing irrigation systems in the Area
- Placing underground utility lines or cables in the Area
- Planting trees or gardens in the Area
- Removing any large trees in the Area unless dead or diseased
- Using the area for the burial of stumps, trash, or any other type of construction material
- Using the Area for gravesites

- Diverting the natural flow of water onto the Area by way of drainage ditches or diversion ditches or using the Area to receive water from any gutter or downspout discharges

IN WITNESS WHEREOF, the Grantor and Grantee have hereunto set their hands and seals, or if corporate, have caused this instrument to be signed in their corporate names by their duly authorized officers and their seals to be hereunto affixed by authority of their Boards of Directors, the day and year first above written.

GRANTOR

_____ Ted A. Merrell (SEAL)
(Corporate Name)

BY: _____ Sandra H Merrell (SEAL)
_____ President

ATTEST: _____ (SEAL)

_____ _____ (SEAL)
_____ Secretary (Corporate Seal)

SEAL-STAMP North Carolina, Mecklenburg County

I, Lynn Dickens, a Notary Public of the County and State aforesaid, certify that Ted & Sandra H Merrell, Grantor, personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official stamp or seal, this 5 day of March, 2002

My Commission Expires: June 16, 2006 Lynn Dickens
(Notary Public)

LYNN DICKENS NOTARY PUBLIC MECKLENBURG COUNTY, N.C.

MECKLENBURG COUNTY, N.C. REGISTER OF DEEDS

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 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__.

My Commission Expires: _____ _____
Notary Public

GRANTEE

_____ James Lee Self (SEAL)
(Corporate Name)

BY: _____ _____ (SEAL)
_____ President

ATTEST: _____ (SEAL)

_____ _____ (SEAL)
_____ Secretary (Corporate Seal)

SEAL-STAMP North Carolina, Mecklenburg County

I, Lynn Dickens, a Notary Public of the County and State aforesaid, certify that James Lee Self, Grantee, personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official stamp or seal, this 5 day of March, 2002.

My Commission Expires: June 16, 2006 Lynn Dickens
(Notary Public)

LYNN DICKENS NOTARY PUBLIC MECKLENBURG COUNTY, N.C.

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 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__.

My Commission Expires: _____ _____
Notary Public

This document is not to be recorded until approved by the Mecklenburg County Health Department.

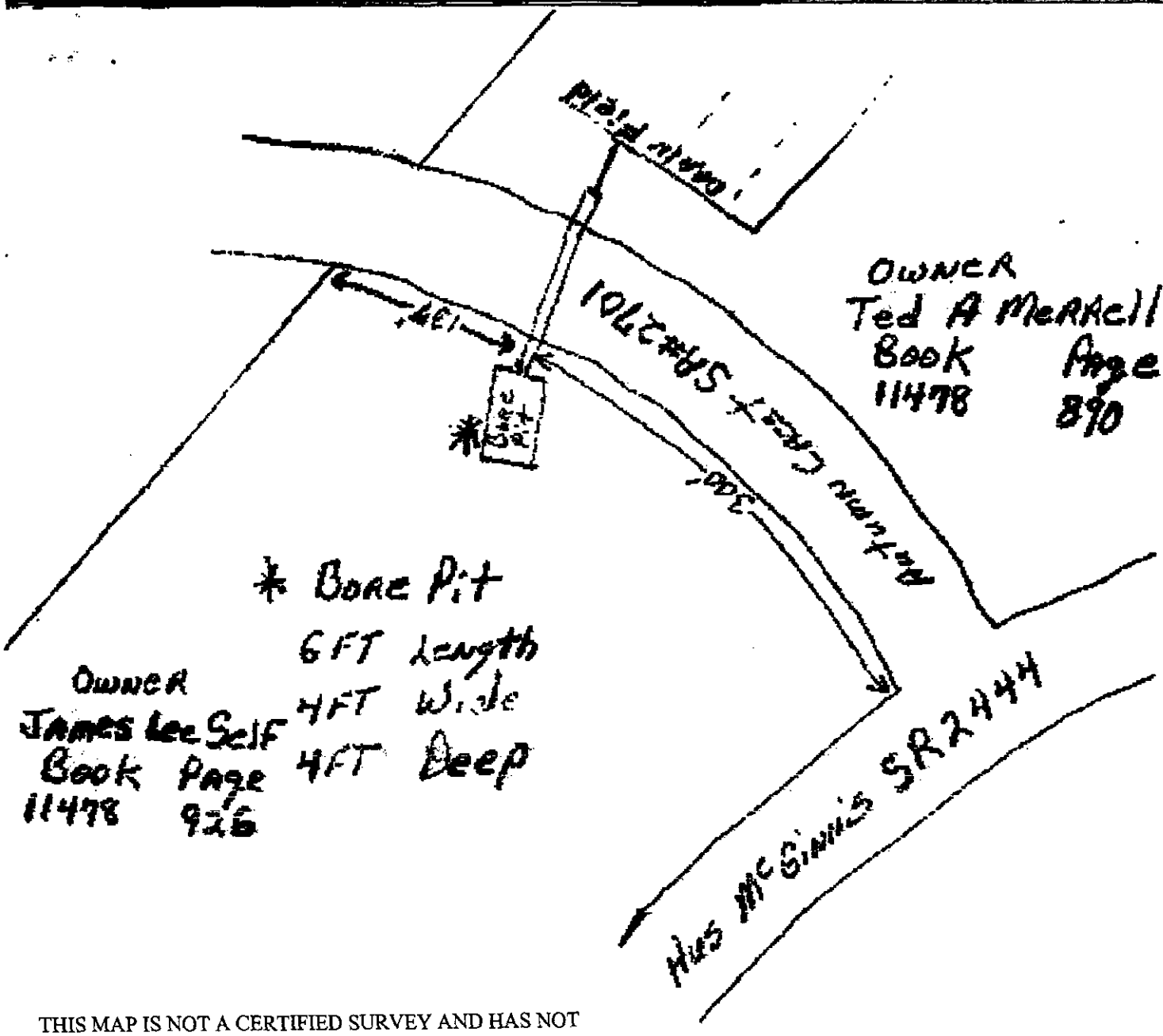
APPROVED AS TO THE SEPTIC REPAIR AREA REQUIREMENTS:

MECKLENBURG COUNTY HEALTH DEPARTMENT

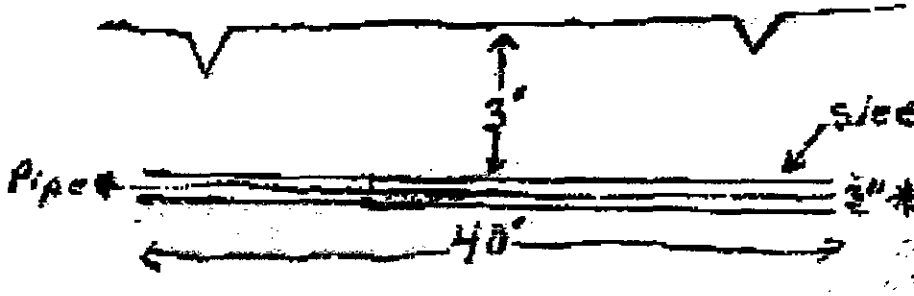
BY: _____ DATE: _____

_____
(print name)

Approval by the Mecklenburg County Health Department does not certify or extend to matters of title. The purchaser of property subject to or affected by this easement is responsible for ascertaining all matters affecting the validity and enforceability of this instrument.



THIS MAP IS NOT A CERTIFIED SURVEY AND HAS NOT BEEN REVIEWED BY A LOCAL GOVERNMENT AGENCY FOR COMPLIANCE WITH ANY APPLICABLE LAND DEVELOPMENT REGULATIONS



* Sleeve 3" Schedule 80
40' Length
Pipe 2" PVC

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

****

Filed For Registration: 06/21/2002 03:24 PM

Book: RE 13722 Page: 451-457

Document No.: 2002119842

ESMT 7 PGS $29.00

Recorder: F. RAY BAKER JR.

****

State of North Carolina, County of Mecklenburg

The foregoing certificate of LYNN DICKENS Notary is certified to be correct. This 21 ST of June 2002

JUDITH A. GIBSON, REGISTER OF DEEDS By: F. Ray Baker
Deputy/Assistant Register of Deeds

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG
I DO HEREBY CERTIFY THIS TO BE A TRUE
COPY OF DOCUMENT FILED AND RECORDED
IN BOOK _____ PAGE(S) _____
THIS _____ DAY OF _____ 20 _____
JUDITH A. GIBSON, REGISTER OF DEEDS
BY: _____
DEPUTY REGISTER OF DEEDS

2002119842

STATE OF NORTH CAROLINA
DEPARTMENT OF TRANSPORTATION

MICHAEL F. EASLEY
GOVERNOR

DIVISION OF HIGHWAYS

APR 2 6 2002

LYNDO TIPPETT
SECRETARY

Division 10

Mr. James Lee Self
9902 Forest Drive
Charlotte, North Carolina 28216

SUBJECT: ENCROACHMENT CONTRACT – JAMES LEE SELF – INSTALL PRIVATE 2" PVC WITH ENCASEMENT ACROSS SR 2701 (AUTUMNCREST ROAD) – FORCE MAIN IN MECKLENBURG COUNTY – (SEE APPROVED PLAN FOR COMPLETE DETAILS)

ENCROACHMENT NUMBER: 02-153-P

Dear Mr. Self:

Enclosed is an executed copy of the subject encroachment contract. This encroachment is approved subject to the attached special provisions.

Very truly yours,

Benton G. Payne AW

BENTON G. PAYNE, P. E.
DIVISION ENGINEER

BGP/GDS/alw
Enclosure
cc: Mr. John B. Williamson, Manager of Right of Way
Mr. Davis C. Diggs, P. E., District Engineer
Mr. Sidney U. Farrar, County Maintenance Engineer – **(copy of letter only)**
File

SPECIAL PROVISIONS

You must notify Mr. Doug Sossamon in Mecklenburg County by letter or fax at least 24 hours prior to construction. The fax number is (704) 598-1758. If you have any questions, please call (704) 596-6900.

Shoulder Fill Section Embankments:

Fill Height (Feet)	Maximum Slope
0-5	2:1
5-8	2.5:1
8 Greater	3:1

Contact the appropriate utility companies involved prior to construction.

Grass cover to be established on all disturbed areas in accordance with recommendations of the Division Roadside Environmental Engineer.

AUGUST 1 – JUNE 1	MAY 1 – SEPTEMBER 1
100# KY 31 Tall Fescue	100# KY 31 Tall Fescue
Or Alta Tall Fescue	Or Alta Tall Fescue
15# Alta Tall Fescue	15# Keniblue Bluegrass
15# Reliant Hard Fescue	15# Reliant Hard Fescue
500# Fertilizer	25# Kobe Or Korean Lespedeza
4000# Limestone	500# Fertilizer

On cut and fill slopes 2:1 or steeper add 25# Rye Grain November 1 through March 1.

On cut and fill slopes 2:1 or steeper add 30# Sericea Lespedeza January 1 through December 1.

Fertilizer shall be 10-20-20 analysis. Upon written approval of the engineer, a different analysis of fertilizer may be used provided the 1-2-2 ratio is maintained and the rate of application adjusted to provide the same amount of plant food as a 10-20-20 analysis.

Proper temporary and permanent measures shall be used to control erosion and sedimentation in accordance with all local state and federal agencies.

Materials and Workmanship shall conform to the most current North Carolina Department of Transportation's "Standard Specifications for Roads and Structures" and "Roadway Standard Drawings" manuals.

Any drainage structure disturbed or damaged shall be restored to original condition as directed by our District Office.

Proper traffic control devices, signs, etc. be installed when working within state right of way to ensure public safety in accordance with the latest editions of The Manual on uniform Traffic Control Devices and any Supplements thereof.

No Trenches are to be left open overnight.

Strict compliance with the Policies and Procedures for Accommodating Utilities on Highway Right of Way Manual shall be required.

All notes on the attached plans are to be enforced.

A $200.00 bond must be posted with the District Office prior to construction. Bond forms are enclosed and are to be returned to the District Office.

Complete restoration including fertilizing seeding and mulching of all areas disturbed during construction will follow within a maximum of fifteen (15) working days of the initial disturbing activity.

Method for crossing under all state roads shall be dry bore.

The contractor shall begin the construction only after the traffic controls and erosion Control has been installed to the satisfaction of the engineer.

All subcontractors doing work within state right of way are to have a copy of these plans and special provisions on job site when any activity is taking place.

The backfill around and under pipes or other utility installations on all open-cut sections across or paralled to highways within constructions limits shall be made of approved material free from rocks in 6" loose layers, unless otherwise approved by the engineer and shall be compacted to at least 95% of standard density as determined by AASHTO method T-99 as modified by the North Carolina Department of Transportation.

All driveways along project shall be put back with the same quality or better, with the approval of the owners.

Upon completion of the installation, you must notify the Charlotte District Office, P. O. Box 190, Newell, N. C. 28126 in writing so that an inspection can be made.

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

SEPTIC TANK DRAIN FIELD EASEMENT AGREEMENT

This EASEMENT made this 5 day of March, 2002, by and between

GRANTOR	GRANTEE
Ted A + Sandra H Merrell 15115 Hus McGinnis Rd. Huntersville, NC 28078	James Lee Self 9902 Forest Dr. Charlotte, NC 28216

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 an easement as hereinafter described, to run with the land, upon that certain lot or parcel of land owned by Grantor and located in the City of Huntersville _____ Township, Mecklenburg County, North Carolina, and more particularly described as follows:

Mecklenburg Tax Parcel No. 02120101 as shown on a page of the County Tax Map attached hereto as Exhibit A

Lot _____ Block _____ of _____ recorded in Map Book 11478 Page 890 (if applicable)

See the plat attached hereto as Exhibit B and the parcel shown thereon identified with Grantor's name for the legal description of Grantor's parcel and of the Septic Tank Drain Field Easement Area located thereon, said parcel labeled thereon and hereinafter referred to as the "Easement Parcel."

This instrument was prepared by: _____

Mail after recording to: _____

Grantor hereby imposes said easement for the benefit of Grantee as the present owner and for the benefit of future owners of the following lot or parcel of land, situated in the City of Huntersville, _____ Township, Mecklenburg County, North Carolina, and more particularly described as follows:

Mecklenburg Tax Parcel No. 02103119 as shown on a page of the County Tax Map attached hereto as Exhibit A

Lot _____ Block _____ of _____ recorded in Map Book 11478 Page 926 (if applicable)

See the plat attached hereto as Exhibit B and the parcel shown thereon identified with Grantee's name for the legal description of Grantee's parcel, said parcel labeled thereon and hereinafter referred to as the "Benefitted Parcel."

Said Easement shall enable the Grantee to place, if, as and when needed, such need to be determined by the Grantee in his sole discretion, a septic tank and drain field or portions thereof, upon the Septic Tank Drain Field Easement Area on the Easement Parcel and to inspect, maintain, repair and replace the components of said septic tank and drain field at any time and from time to time. If the Easement Area also includes a connector strip for ingress and egress, Grantee shall have the right to use said connector strip for access as needed. ***This Easement may not be altered, amended or cancelled without the express written permission of the Mecklenburg County Health Department, which written permission must be part of any document recorded to alter, amend or cancel this Easement.*** This Easement shall automatically expire, however, should Grantee ever hook up the structure located or to be located on the Benefitted Parcel to a public or community sanitary sewage system but shall otherwise be perpetual.

Grantor acknowledges that the Septic Tank Drain Field Easement Area cannot be used and will not be used for any of the following activities or in any of the following ways:

- Grading or filling
- Parking or driving heavy equipment in the area or in any other way compacting the soil in the Area
- Excavating soil from the Area
- Placing footings or foundations or engaging in any other construction activity in the Area
- Placing in-ground or above-ground swimming pools in the Area
- Placing irrigation systems in the Area
- Placing underground utility lines or cables in the Area
- Planting trees or gardens in the Area
- Removing any large trees in the Area unless dead or diseased
- Using the area for the burial of stumps, trash, or any other type of construction material
- Using the Area for gravesites

Diverting the natural flow of water onto the Area by way of drainage ditches or diversion ditches or using the Area to receive water from any gutter or downspout discharges

IN WITNESS WHEREOF, the Grantor and Grantee have hereunto set their hands and seals, or if corporate, have caused this instrument to be signed in their corporate names by their duly authorized officers and their seals to be hereunto affixed by authority of their Boards of Directors, the day and year first above written.

GRANTOR

_____ Ted A. Merrell (SEAL)
(Corporate Name)

BY: _____ Sandra H. Merrell (SEAL)
_____ President

ATTEST: _____ (SEAL)

_____ _____ (SEAL)
_____ Secretary (Corporate Seal)

SEAL-STAMP North Carolina, Mecklenburg County

I, Lynn Dickens, a Notary Public of the County and State aforesaid, certify that Ted + Sandra Merrell, Grantor, personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official stamp or seal, this 5 day of March, 2002

My Commission Expires: June 16, 2006 Lynn Dickens
(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 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__.

My Commission Expires: _____ _____
Notary Public

GRANTEE

_____ James Lee Self (SEAL)
(Corporate Name)

BY: _____ _____ (SEAL)
_____ President

ATTEST: _____ (SEAL)

_____ _____ (SEAL)
_____ Secretary (Corporate Seal)

SEAL-STAMP North Carolina, Mecklenburg County

I, Lynn Dickens, a Notary Public of the County and State aforesaid, certify that James Lee Self, Grantee, personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official stamp or seal, this 5 day of March, 2002

My Commission Expires: June 16, 2006 Lynn Dickens
(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 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__.

My Commission Expires: _____ _____
Notary Public

This document is not to be recorded until approved by the Mecklenburg County Health Department.

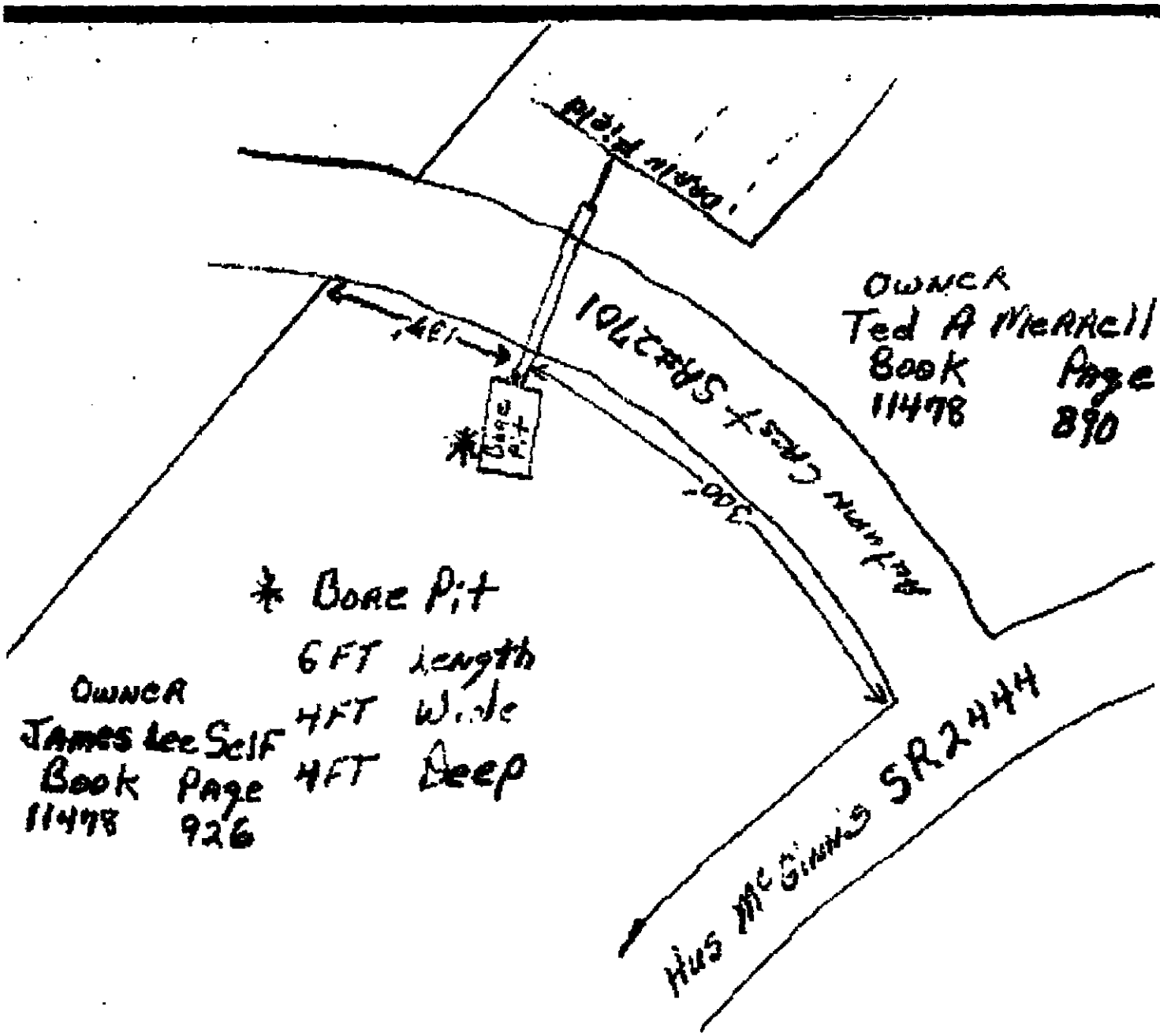
APPROVED AS TO THE SEPTIC REPAIR AREA REQUIREMENTS:

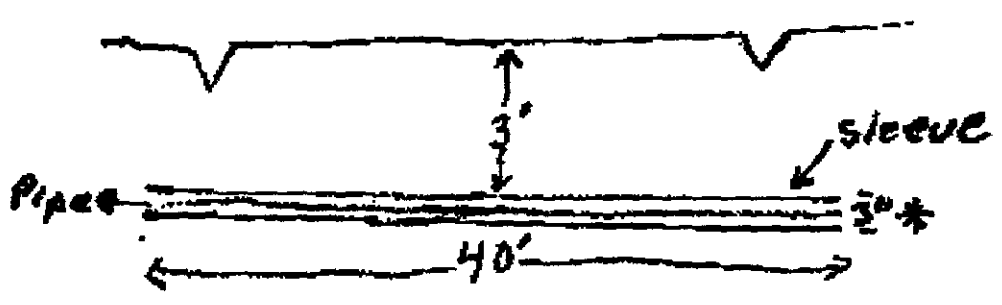
MECKLENBURG COUNTY HEALTH DEPARTMENT

BY: _____ DATE: _____

_____
(print name)

Approval by the Mecklenburg County Health Department does not certify or extend to matters of title. The purchaser of property subject to or affected by this easement is responsible for ascertaining all matters affecting the validity and enforceability of this instrument.





* Sleeve 3" Schedule 80
40' length
Pipe 2" PVC

4/1/2002

TO: NCDOT

I JAMES E. SELF JR. AND ANY FUTURE OWNERS WILL BE RESPONSIBLE FOR ANY DAMAGE TO AUTUMNCREST RD. (SR#2701) DUE TO BORING FOR SEPTIC LINE.

THANK YOU

James E Self Jr.

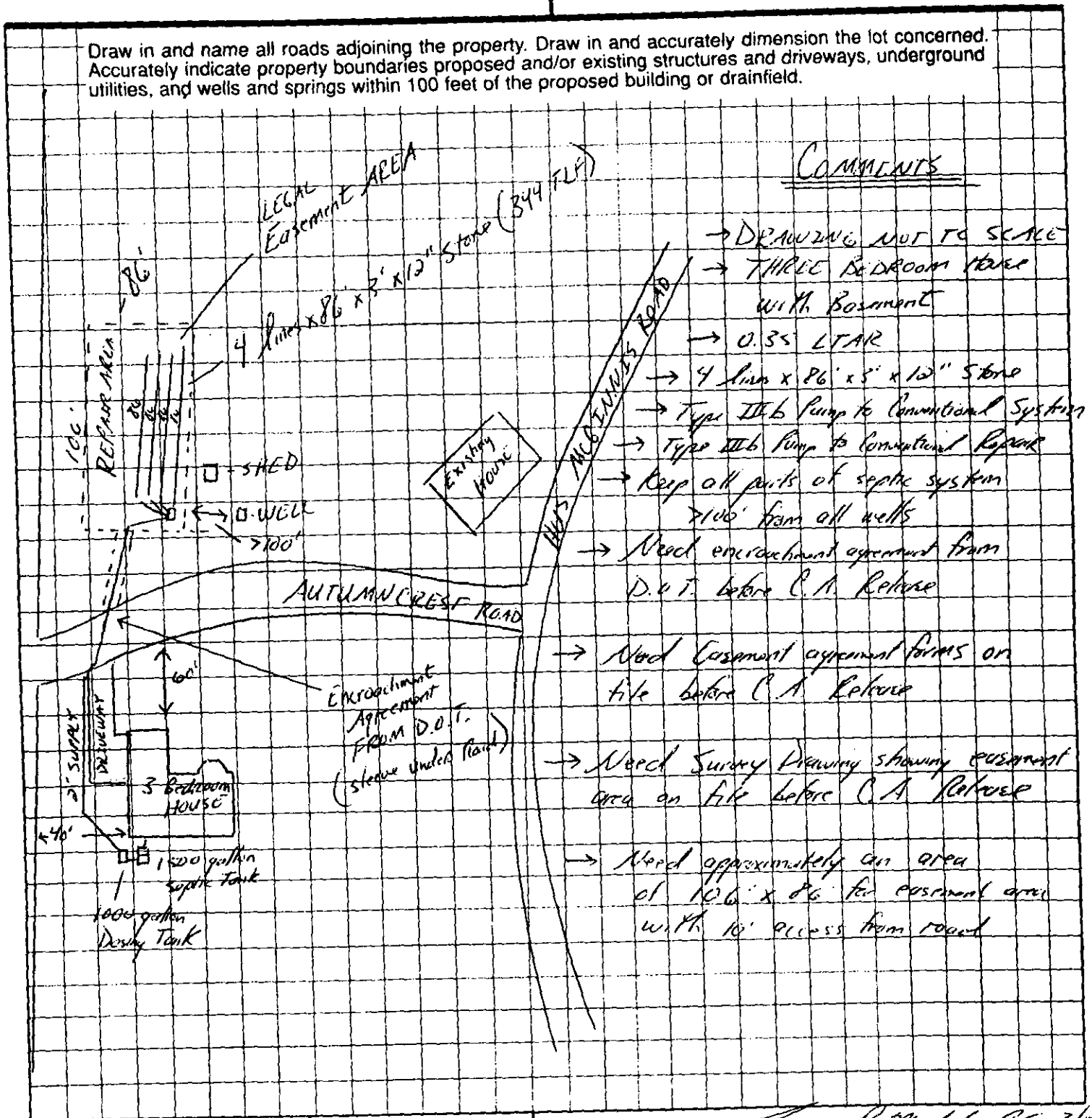
PROPOSED PLOT PLAN

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

FILE: 42978 / 29868

TC: 021-201-01 PC

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.



OWNER/AGENT SIGNATURE James L. Kelly

DATE 3-25-02

APPROVAL DATE Tommy P. Melvin P.S. 3/29

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

ROUTE _____ PROJECT _____ STATE OF NORTH CAROLINA
COUNTY OF _____

DEPARTMENT OF TRANSPORTATION

-AND-

James E. Self

9902 Forest Dr. Char. N.C. 28216

RIGHT OF WAY ENCROACHMENT AGREEMENT
PRIMARY AND SECONDARY HIGHWAYS

RECEIVED
APR 1 - 2002
NC Dept. of Transportation
District Engineer/Div. 10

THIS AGREEMENT, made and entered into this the 5 day of March, 2002, by and between the Department of Transportation, party of the first part; an _____ James Lee Self party of the second part,

W I T N E S S E T H:

THAT WHEREAS, the party of the second part desires to encroach on the right of way of the public road designated as Route SR2701, located Autumncrest Rd with the construction and/or erection of Septic tank line, By Bore Crossing SR2701 2" PVC pipe in cash of 3" Schelude 80 pipe For (Privat Line)

WHEREAS, it is to the material advantage of the party of the second part to effect this encroachment, and the party of the first part in the exercise of authority conferred upon it by statute, is willing to permit the encroachment within the limits of the right of way as indicated, subject to the conditions of this agreement;

NOW, THEREFORE, IT IS AGREED that the party of the first part hereby grants to the party of the second part the right and privilege to make this encroachment as shown on attached plan sheet (s), specifications and special provisions which are made a part hereof upon the following conditions, to wit:

That the installation, operation, and maintenance of the above described facility will be accomplished in accordance with the party of the first part's latest POLICIES AND PROCEDURES FOR ACCOMMODATING UTILITIES ON HIGHWAY RIGHTS-OF-WAY, and such revisions and amendments thereto as may be in effect at the date of this agreement. Information as to these policies and procedures may be obtained from the Division Engineer or State Utility Agent of the party of the first part.

That the said party of the second part binds and obligates himself to install and maintain the encroaching facility in such safe and proper condition that it will not interfere with or endanger travel upon said highway, nor obstruct nor interfere with the proper maintenance thereof, to reimburse the party of the first part for the cost incurred for any repairs or maintenance to its roadways and structures necessary due to the installation and existence of the facilities of the party of the second part, and if at any time the party of the first part shall require the removal of or changes in the location of the said facilities, that the said party of the second part binds himself, his successors and assigns, to promptly remove or alter the said facilities, in order to conform to the said requirement, without any cost to the party of the first part.

That the party of the second part agrees to provide during construction and any subsequent maintenance proper signs, signal lights, flagmen and other warning devices for the protection of traffic in conformance with the latest Manual on Uniform Traffic Control Devices for Streets and Highways and Amendments or Supplements thereto. Information as to the above rules and regulations may be obtained from the Division Engineer of the party of the first part.

That the party of the second part hereby agrees to indemnify and save harmless the party of the first part from all damages and claims for damage that may arise by reason of the installation and maintenance of this encroachment.

That the party of the second part agrees to restore all areas disturbed during installation and maintenance to the satisfaction of the Division Engineer of the party of the first part. The party of the second part agrees to exercise every reasonable precaution during construction and maintenance to prevent eroding of soil; silting or pollution of rivers, streams, lakes, reservoirs, other water impoundments, ground surfaces or other property; or pollution of the air. There shall be compliance with applicable rules and regulations of the North Carolina Division of Environmental Management, North Carolina Sedimentation Control Commission, and with ordinances and regulations of various counties, municipalities and other official agencies relating to pollution prevention and control. When any installation or maintenance operation disturbs the ground surface and the existing ground cover, the party of the second part agrees to remove and replace the sod or otherwise reestablish the grass cover to meet the satisfaction of the Division Engineer of the party of the first part.

That the party of the second part agrees to assume the actual cost of any inspection of the work considered to be necessary by the Division Engineer of the party of the first part.

That the party of the second part agrees to have available at the construction site, at all times during construction, a copy of this agreement showing evidence of approval by the party of the first part. The party of the first part reserves the right to stop all work unless evidence of approval can be shown.

Provided the work contained in this agreement is being performed on a completed highway open to traffic; the party of the second part agrees to give written notice to the Division Engineer of the party of the first part when all work contained herein has been completed. Unless specifically requested by the party of the first part, written notice of completion of work on highway projects under construction will not be required.

That in the case of noncompliance with the terms of this agreement by the party of the second part, the party of the first part reserves the right to stop all work until the facility has been brought into compliance or removed from the right of way at no cost to the party of the first part.

That it is agreed by both parties that this agreement shall become void if actual construction of the work contemplated herein is not begun within one (1) year from the date of authorization by the party of the first part unless written waiver is secured by the party of the second part from the party of the first part.

During the performance of this contract, the second party, for itself, its assignees and successors in interest (hereinafter referred to as the "contractor"), agrees as follows:

a. Compliance with Regulations: The contractor shall comply with the Regulations relative to nondiscrimination in federally-assisted programs of the U. S. Department of Transportation, Title 49, Code of Federal Regulations, Part 21, as they may be amended from time to time, (hereinafter referred to as the Regulations), which are herein incorporated by reference and made a part of this contract.

b. Nondiscrimination: The contractor, with regard to the work performed by it during the contract, shall not discriminate on the grounds of race, color, or national origin in the selection and retention of subcontractors, including procurements of materials and leases of equipment. The contractor shall not participate either directly or indirectly in the discrimination prohibited by Section 21.5 of the Regulations, including employment practices when the contract covers a program set forth in Appendix B of the Regulations.

c. Solicitations for Subcontracts, Including Procurements of Materials and Equipment: In all solicitations either by competitive bidding or negotiation made by the contractor for work to be performed under a subcontract, including procurements of materials or leases of equipment, each potential subcontractor or supplier shall be notified by the contractor of the contractor's obligations under this contract and the Regulations relative to nondiscrimination on the grounds of race, color, or national origin.

d. Information and Reports: The contractor shall provide all information and reports required by the Regulations, or directives issued pursuant thereto, and shall permit access to its books, records, accounts, other sources of information, and its facilities as may be determined by the Department of Transportation or the Federal Highway Administration to be pertinent to ascertain compliance with such Regulations or directives. Where any information required of a contractor is in the exclusive possession of another who fails or refuses to furnish this information, the contractor shall so certify to the Department of Transportation, or the Federal Highway Administration as appropriate, and shall set forth what efforts it has made to obtain the information.

e. Sanctions for Noncompliance: In the event of the contractor's noncompliance with the nondiscrimination provisions of this contract the Department of Transportation shall impose such contract sanctions as it or the Federal Highway Administration may determine to be appropriate, including, but not limited to,

(1) withholding of payments to the contractor under the contract until the contractor complies, and/or

(2) cancellation, termination or suspension of the contract, in whole or in part.

f. Incorporation of Provisions: The contractor shall include the provisions of paragraphs "a" through "f" in every subcontract, including procurements of materials and leases of equipment, unless exempt by the Regulations, or directives issued pursuant thereto. The contractor shall take such action with respect to any subcontract or procurement as the Department of Transportation or the Federal Highway Administration may direct as a means of enforcing such provisions including sanctions for noncompliance: Provided, however, that, in the event a contractor becomes involved in, or is threatened with, litigation with a subcontractor or supplier as a result of such direction, the contractor may request the Department of Transportation to enter into such litigation to protect the interests of the State, and, in addition, the contractor may request the United States to enter into such litigation to protect the interests of the United States.

IN WITNESS WHEREOF, each of the parties to this agreement has caused the same to be executed in the day and year first above written.

DEPARTMENT OF TRANSPORTATION

BY: Benton G. Hope M

DIVISION ~~MAINTENANCE~~ ENGINEER

ATTEST OR WITNESS:

James L. Self

James L. Self

James E. Self Jr.

James E. Self Jr. Owner

Second Party

INSTRUCTIONS

When the applicant is a corporation or a municipality, this agreement must have the corporate seal and be attested by the corporation secretary or by the empowered city official, unless a waiver or corporate seal and attestation by the secretary or by the empowered City official is on file in he Raleigh office of the Manager of Right of Way. In the space provided in this agreement for execution, the name of the corporation or municipality shall be typed above the name and title of all persons signing the agreement should be typed directly below their signature.

This agreement must be accompanied, in the form of an attachment, by plans or drawings showing the following applicable information:

1. All roadways and ramps
2. Right of way lines and where applicable, the control of access lines
3. Location of the existing and/or proposed encroachment
4. Length, size and type of encroachment
5. Method of installation
6. Dimensions showing the distance from the encroachment to edge of pavement, shoulders, structures, etc.
7. Location by highway survey station number. If station number cannot be obtained, location should be shown by distance from some identifiable point, such as a bridge, road, intersection, etc. (To assist in preparation of the encroachment plan, the Department's roadway plans may be seen at the various Highway Division Offices, or at the Raleigh office.)
8. Drainage structures or bridges if affected by encroachment (show vertical and horizontal dimensions from encroachment to nearest part of structure)
9. Method of attachment to drainage structures or bridges.
10. Manhole design.
11. On underground utilities, the depth of bury under all traveled lanes, shoulders, ditches, sidewalks, etc.
12. Length, size and type of encasement where required.
13. On underground crossings, notation as to method of crossing - boring and jacking, open cut, etc.
14. Location of vents

GENERAL REQUIREMENTS

1. Any attachment to a bridge or other drainage structure must be approved by the Head of Structure Design in Raleigh prior to submission of encroachment agreement to the Division Engineer.
2. All crossings should be as near as possible normal to the centerline of the highway.
3. Minimum vertical clearances of overhead wires and cables above all roadways must conform to clearances set out in the National Electric Safety Code.
4. Encasements shall extend from ditch line to ditch line in cut sections and 5' beyond toe of slopes in fill sections.
5. All vents should be extended to the right of way line or as otherwise required by the Department.
6. All pipe encasements as to material and strength shall meet the standards and specifications of the Department.
7. Any special provisions or specifications as to the performance of the work or the method of construction that may be required by the Department must be shown on a separate sheet attached to encroachment agreement provided that such information cannot be shown on plans or drawings.
8. The Department's Division Engineer should be given notice by the applicant prior to actual starting of installation included in this agreement.

Money Order

For NC Use Only
33-14-0270B 7-1999

Bank of America

Personal Money Order No. 1068191

30-1/1140

For NC Use Only
33-14-0270B 7-1999

HUNTERSVILLE NORTHCROSS

Date 03-08-02

Pay To The Order Of N.C. DoT

$********200.00**

Not Valid If Over $1,000.00

TWO HUNDRED AND 00/100 Dollars

For _____

003080194

Bank of America is not liable for lost or stolen money orders.

For your protection against loss or theft, sign and complete this Money Order as soon as possible.

Bank of America, N.A.
San Antonio, Texas

Signature of Purchaser (Drawer)

7202 Forest Dr. Char. 28216
Address

COPYRIGHT- ANTI FRAUD PROTECTION - PATENTS 4,210,346 4,327,720 4,310,180 5,197,795 5,340,158

⑈1068191⑈ ⑆114000019⑆ 00164100056 1⑈

THE ORIGINAL DOCUMENT HAS A REFLECTIVE WATERMARK ON THE BACK HOLD AT AN ANGLE TO VIEW WHEN CHECKING THE ENDORSEMENT

House to be on

021-031-19

Drainfield to be

on

021-201-01

Address appears to be coming from Autumncrest

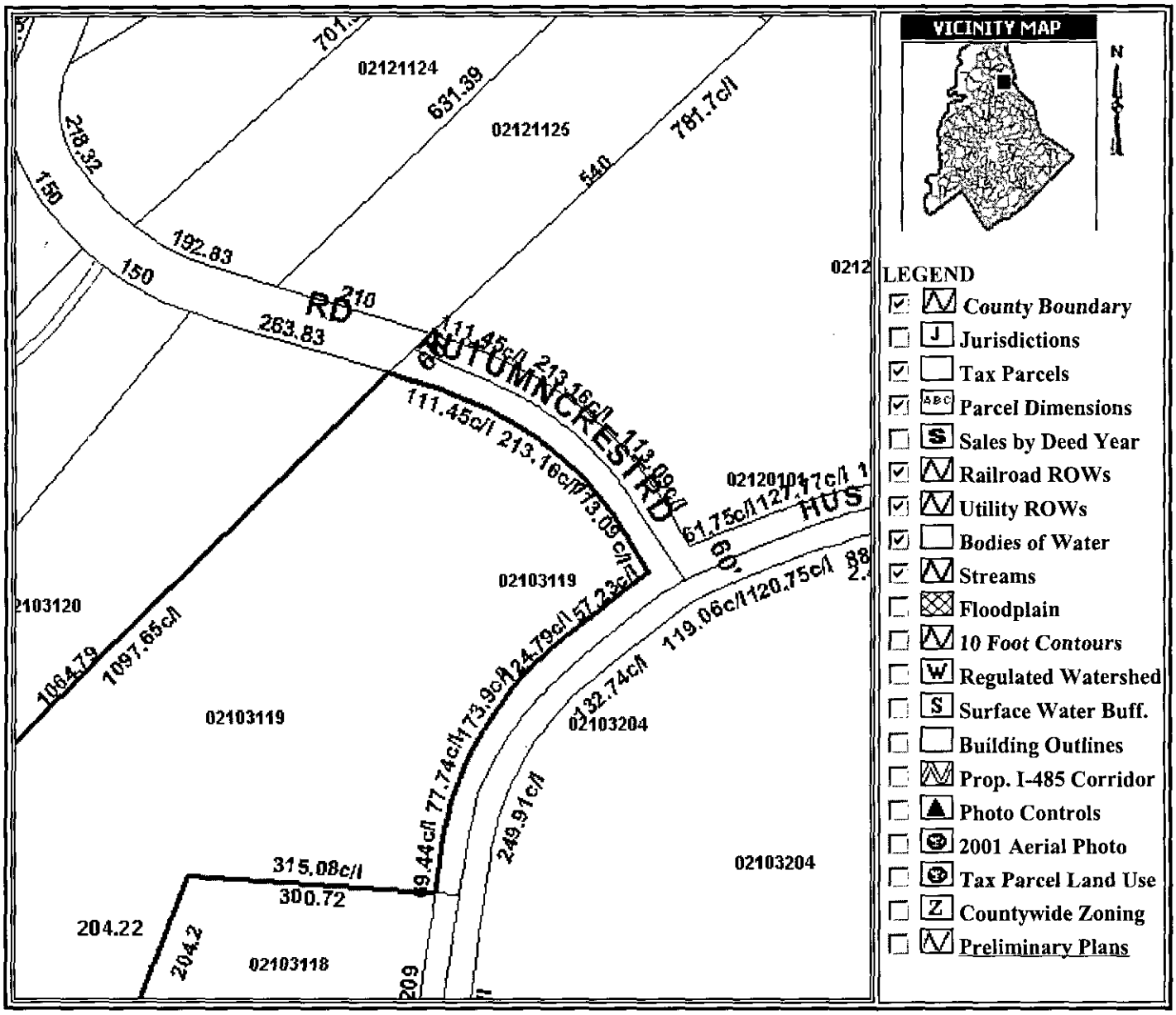
GIS Real Estate System

Mecklenburg County, NC Geographic Information Systems

Tax Parcel & Map Sheet Search | Road Name & Intersection Search | Market Analysis Search Menu
Return to Full Map Extent | How to Use the System | Return to GIS Homepage

Click on Map to Perform Operation

○ Refresh Map ○ Pan ○ Zoom In ◉ Zoom Out Zoom Factor [1X] ○ Identify [Parcels] ○ Surveyor's Report
○ Adjoining Owner's Report within [10 FEET] ○ Measure [Start Line] Label Parcels by: [Parcel-Id(PID)]



Click here to submit questions or comments about the information shown on this page.

Additional Tax Information (Tax Bills, Real and Personal Property, etc.) is available through the:

Tax Information System

Map Scale: 1 Inch = 191 Feet	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

Date and Time Stamp	verification. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.
4/25/2002 8:52:15 AM EST	

Tax Real Estate Information

BUILDING PHOTOS ARE NOW AVAILABLE! SEE MAJOR IMPROVEMENT SECTION BELOW FOR LINK.
*** Images of real estate documents from the Register of Deeds are available from 11/9/1998 to the present. ***

Parcel-Id#: 02103119 **GIS Map#:** 02103119	**Legal Desc.:** NA
Account Type: INDIVIDUAL	**Deed Book/Page:** 11478/926 GET DEED! **Date:** 8/4/2000
Owner: SELF JAMES LEE	**Sales Price:** $108000
Add. Owner:	**Sales Date:** 8/4/2000 **Qualified Sale:** Y
Mailing: 8732 BONNIE CR	**Neighborhood Code:** 02101
Address:	**Historic Desig.:** **Farm Desig.:**
City: CHARLOTTE	**Deed Acreage:** 9.203 **Assessed Acreage:** 8.568
State: NC **ZIP:** 28216	**Assessed Land Value:** $89470
Location: 15024 AUTUMNCREST RD Get Directions	**Total Assessed Value:** $89470
Municipality: MECKLENBURG COUNTY	**Tax Bill Information:** Click Here!

Site Location Information

Zoning: OPS	**Parks Within 3 Miles:** Click to Find Out
Fire District: HUNTERSVILLE	**FEMA Flood Panel#:** 3701580040B More Flood Information
Voter District: Click to Find Out	**FEMA Flood Zone:** OUT
School District: Click to Find Out	**FEMA Flood Map Date:** 03/02/1993
Reg. Watershed Class: N/A	**Census Tract Number:** 006302

Major Improvement Information

Parcel-Id# & Card#: 02103119-001	**Situs Location:** 15024 AUTUMNCREST RD Get Directions
Land-Use Type: VACANT	**Ext. Type:**
Building Type: SINGLE FAMILY RESIDENTIAL	**Heating Type:**
Approximate Square Footage: 0	**AC Type:**
Actual Year Built: 0	**Fireplace:**
Number of Stories:	**Garage:** N
Bedrooms: 0	**Basement:** N
Bathrooms: 0	**Assessed Net Bldg. Value:** $0
Restrooms: 0	**Total Assessed Bldg. Value:** $0

This site is powered by ESRI MapObjects2 Internet Map Server

This site was developed by Mecklenburg County GIS and was last updated on 4/2/2002 4:55:14 PM

Property
84'
65'
105'
40'
69'
12'
21'
Septic Tank & Pump
60'
Drive Way
15'
210'
210'
Autumn Crest Rd.
210'
Drain Field

Permit Number: 4298B

CONDITIONS OF IMPROVEMENT PERMIT

Tax Number: 021 201 01 PO

9 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.

(10)

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

Basement	___ Yes	✓ No	___ Partial Basement
Type Primary Wastewater System Type (circle one): I (II) III IV V VI	✓ Conventional ___ 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

.4 Long-term acceptance rate	360 Max gallons/day wastewater flow	900' Absorption Area (sq ft)	9' Trench spacing (min. on centers)
YES Serviced by private well	1500 Gallon septic tank	300' Total trench length (ft)	24" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
3 Bedrooms in residence	NA Gallon pump tank	12" Depth of stone	

Any surface waters present: NO Type: Minimum separation distance:

Site modifications required:

Additional Conditions: Survey shall be recorded and on file before the construction authorization release. No construction Authorization aquired

Repair Area System Type Type (circle one): I (II) III IV V VI	✓ Conventional ___ 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

900' Absorption Area (Sq ft) 300' Total Trench Length (Ft)	12" Depth of Stone Trench	9' Trench spacing (min. on centers)	24" 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.

Philip S. Walker RS. 6/6/2000
DEHNR Authorized Agent Date

Joel A. Merrell
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

Hold For:

1) Construction Authorization
2) Fees
3) Survey of property

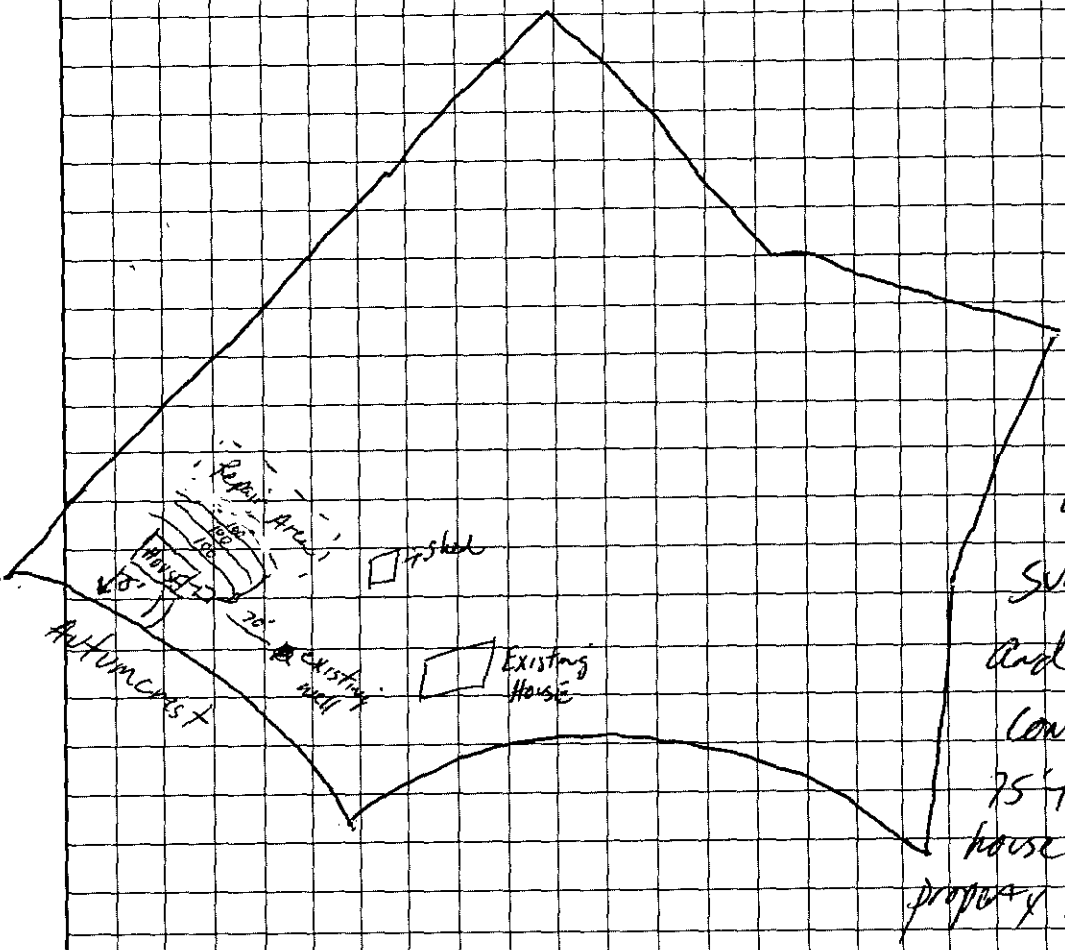
PROPOSED PLOT PLAN

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

FILE: 4298B

TC: 02/20/01 PO

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

3 Bedroom Residence
1500 SF
3 lines x 100' long
x 3' wd x 12" stone
300 LF (4 LTAR :)
Keep the septic system
>50' from the existing
well or any wells.
Survey shall be recorded
and on file before the
Cons. Authorization release.
75' from the front left
house site to the front
property line

APPROVAL DATE _____

OWNER/AGENT SIGNATURE

DATE

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

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

A5 #1

Sheet: 1

Property ID: PO 021-201-01

Lot #:

File #: 4296 A

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: James A. Coates APPLICANT:

ADDRESS: 15115 West McDermott Road, Kenansville DATE EVALUATED: 5-5-00

PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949) 360gpd PROPERTY SIZE: .5

LOCATION OF SITE: East Autumncrest Road PROPERTY RECORDED:

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

EVALUATION METHOD: ☑Augur Boring ☑Pit ☐Cut

TYPE OF WASTEWATER: ☑Sewage ☐Industrial Process ☐Mixed

PROFILE #	1940 Landscape Position/ Slope % (Slopes 5-12%)	Horizon Depth (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE MINERALOGY	OTHER PROFILE FACTORS 1942 SOIL WETNESS/ COLOR	1943 SOIL DEPTH	1956 SAPRO CLASS	1944 RESTR HORIZ	PROFILE CLASS &LTAR
1	~~LS~~ Dep.	0-4"	gr/ scl	Fr/SE/P/SS/SP	7 40" TO 50:1 wetness	47"	PS	None	~~US~~ Sap. II .4gl F_2
		4-47"	M / SI	Fr/SE/P/NS/NP					
2	LS	0-3"	gr/ SI	Fr/SE/P/NS/WP	> 45" TO 50:1 wetness	45"	PS	None	PS .4gl F_2 Sap II
		3-45"	M ~~SBK~~/ SI	Fr/SE/P/NS/WP					
3	LS	0-3"	gr/ /	Fr/SE/P/NS/NP	7 42" TO 50:1 wetness	42"	PS	None	PS .4gl F_2 Sap II
		3-42"	M/ SI	Fr/SE/P/NS/NP					
4	LS	0-5"	gr/SI	Fr/SE/P/NS/NP	7 40" TO 50:1 wetness	40"	PS	None	PS .4gl F_2 Sap II
		5-40"	M/ SI	Fr/SE/P/NS/NP					
5	LS	0-29"	gr/SI	Fr/SE/P/NS/NP	7 44" TO 50:1 wetness	44"	N/A	None	PS .35gl F_2 III
		29-44"	SBK/SCL	Fr/SE/P SS/SP					
6	LS	0-3"	gr/SI	Fr/SE/P/NS/NP	7 32" TO 50:1 wetness	32"	N/A	None	US II ~~.35gl~~ F_2 .3 LAP
		3-32"	WK SBK/SI	Fr/SE/P/NS/NP					
7	LS	0-4"	gr/ SI	Fr/SE/P/NS/NP	7 24" TO 50:1 wetness	24"	N/A	None	US II ~~.35gl F_2~~ .3gl F_2 LAP
		4-24"	~~WK~~ SBK/ SI	Fr/SE/P/NS/NP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR	.35gl F_2	.35gl F_2

OTHER FACTORS (.1946):

SITE CLASSIFICATION (.1948): Provisionally Suitable

EVALUATED BY: W. A. Meeks USS 5-12-00

OTHER(S) PRESENT:

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet: 2

Property ID: _____

Lot #: _____

File #: 42968

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: _____ APPLICANT: _____

ADDRESS: _____ DATE EVALUATED: _____

PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949) _____ PROPERTY SIZE: _____

LOCATION OF SITE: _____ PROPERTY RECORDED: _____

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

EVALUATION METHOD: ☐Augur Boring ☐Pit ☐Cut

TYPE OF WASTEWATER: ☐Sewage ☐Industrial Process ☐Mixed

PROFILE #	1940 Landscape Position/ Slope %	Horizon Depth (IN.)	SOIL MORPHOLOGY (.1941) 1941 STRUCTURE/ TEXTURE	1941 CONSISTENCE MINERALOGY	OTHER PROFILE FACTORS 1942 SOIL WETNESS/ COLOR	1943 SOIL DEPTH	1956 SAPRO CLASS	1944 RESTR HORIZ	PROFILE CLASS &LTAR
8	LS	0-14"	gr/ls/	Fr/SE/P/ NS/WP	24" TO SOIL WETNESS	24"	N/A	None	US .15 LPP II
		14-24"	SBM/sc/	Fr/SE/P/ SS/SP					
1	LS	0-7"	gr/ls/	Fr/SE/P/ NS/WP	44" TO SOIL WETNESS	21"	PS	None	PS .39 II SAP
		7-21"	SBM/sc/	Fr/SE/P/ SS/SP					
		21-44"	M/ S/	Fr/ SE/P/ NS/WP					

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

OTHER FACTORS (.1946): _____

SITE CLASSIFICATION (.1948): _____

EVALUATED BY: _____

OTHER(S) PRESENT: _____

FILE # 42981?

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			

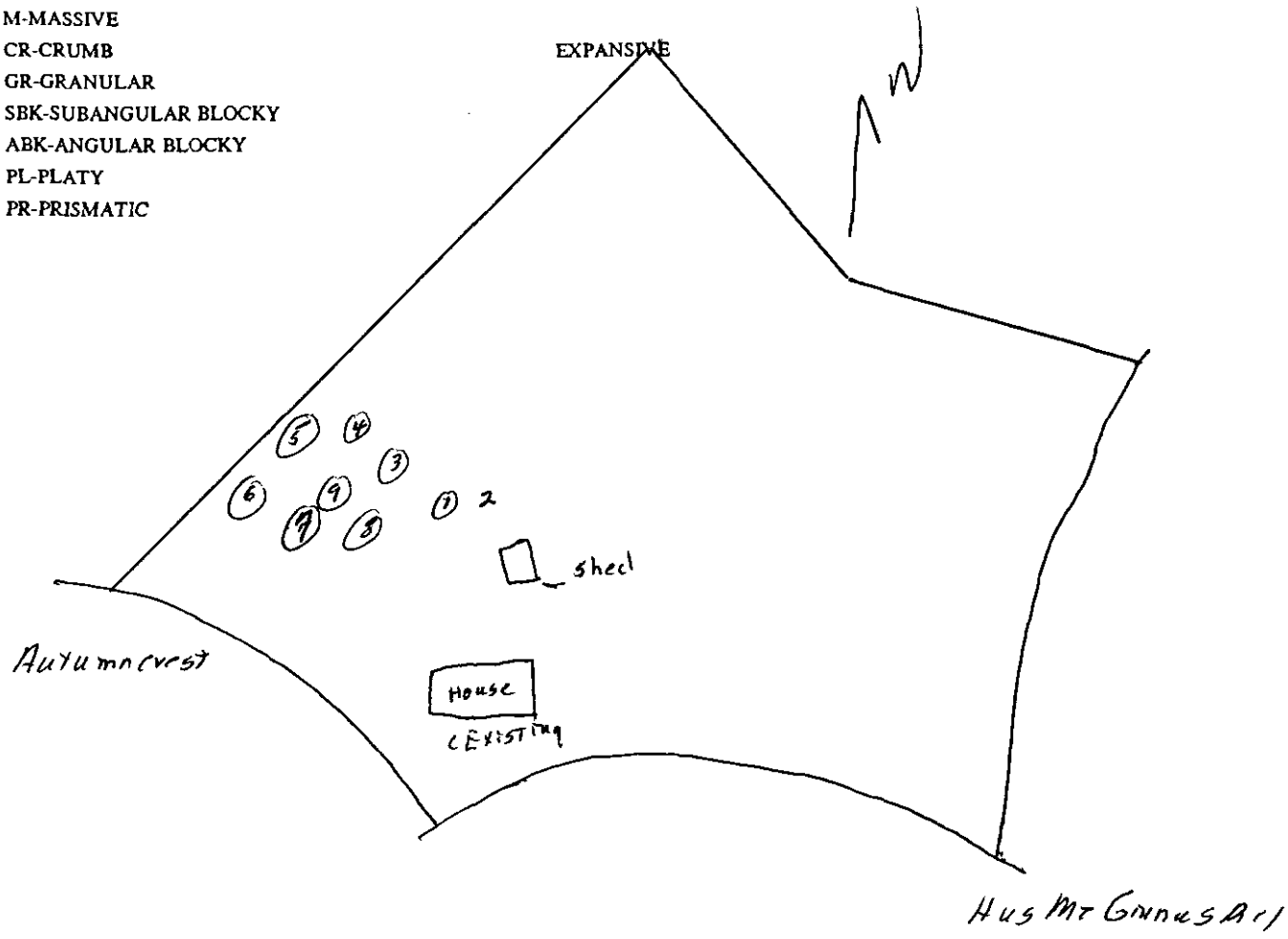
STRUCTURE

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

MINERALOGY

SLIGHTLY EXPANSIVE

EXPANSIVE



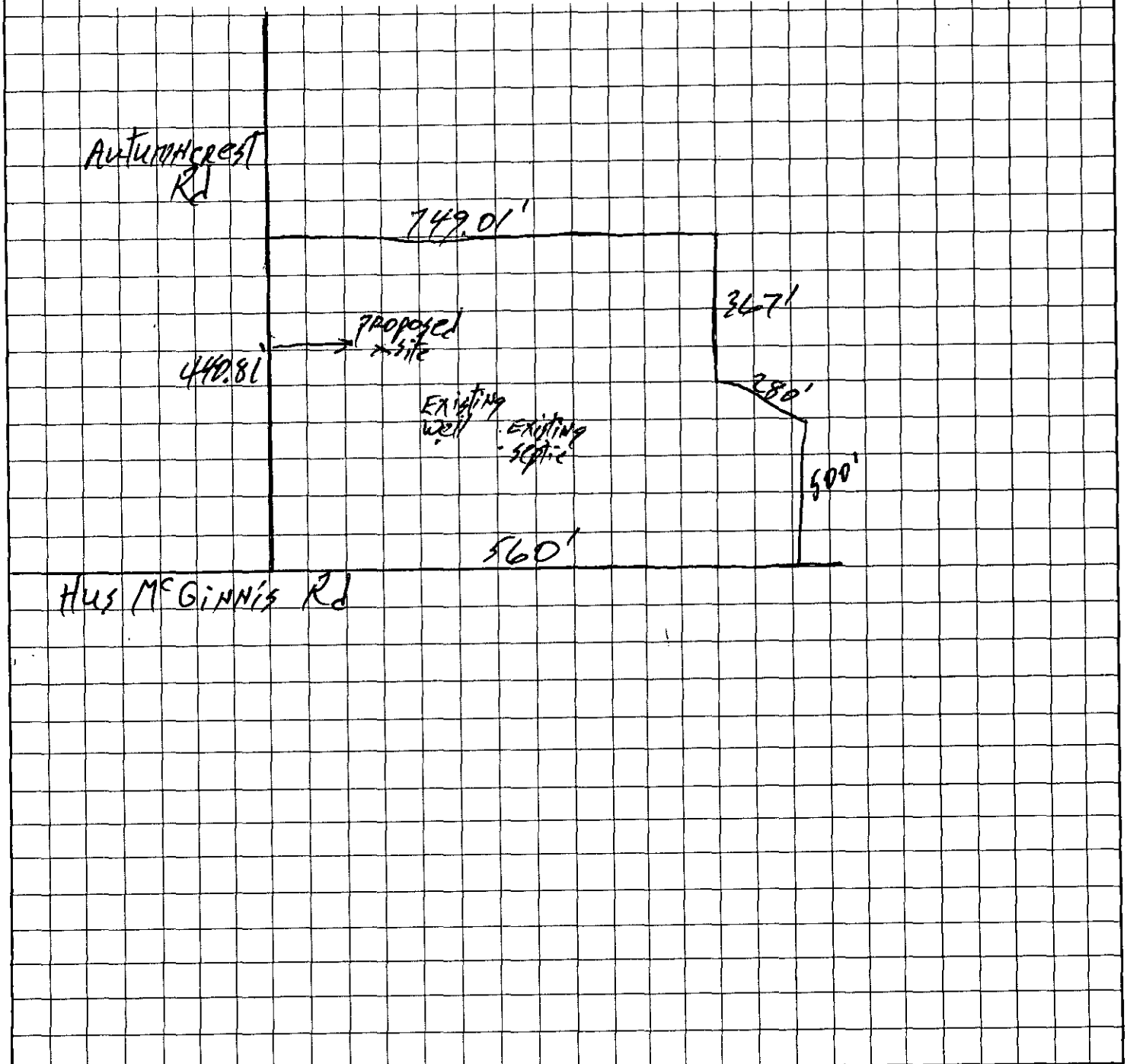
PROPOSED PLOT PLAN

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

FILE: 4288

TC: 021-201-01PC

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

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

FEE: 200

DATE: 4/17/00 for all

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 #: 42986

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 021-201-01 PO

STREET ADDRESS: [redacted]

SUBDIVISION OR MOBILE HOME PARK NAME: Autumncrest Rd

LOT NUMBER:

TOWNSHIP (CHECK ONE):

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

CLOSING DATE 6/1/00

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: 2000

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
EXISTING WASTEWATER SYSTEMS ✓ YES __ NO
EASTMENTS OR RIGHT-OF-WAYS __ YES __ NO
WELL, SPRINGS OR WATERLINES ✓ YES __ NO
DESIGNATED WETLANDS __ YES __ NO

PROPERTY OWNER:

NAME: Proctor James A
(LAST) (FIRST) (MI)

ADDRESS: 15115 Hue McGinnis Rd

CITY: Huntersville STATE: NC ZIP: 28078

DAYTIME PHONE: 704 - 586-7371

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME:
(LAST) (FIRST) (MI)

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: James A Proctor DATE: 4/17/00

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
Environmental Health Fees

Requestor (please print): James Proctor	Phone #:	Date Requested: 4.17.08	Date Filled:
Account Name: James A Proctor	Cash	Charge	Account No.:
I certify that I am authorized to charge this account for this service:			
Signature:	Printed Name:		Date:

T.C.	Qty	Description	Unit Cost	Total Cost
0701	3	Improvement Permit Application - Residential	$ 200.00	600-
0735		Improvement Permit Application - Commercial	$ 400.00	
0702		Optional Site Evaluations	$ 100.00	
0703		Installation and Final Approval	$ 150.00	
0704		Change in Plot Plan	$ 100.00	
0705		MH Exc/Add/Repl without System Modification	$ 100.00	
0706		MH Exc/Add/Repl with System Modification	$ 300.00	
0707		Site Consultation Visit	$ 100.00	
0734		Authorization for Wastewater System Construction	$ 150.00	
0708		Realty Closing - Conventional	$ 85.00	
0709		Realty Closing - FHA with water	$ 135.00	
0710		Additional Trips	$ 65.00	
0711		Well Water Analysis-Bacteriological with regular parameters	$ 50.00	
0712		Well Water Analysis -Nitrates and Nitrites	$ 15.00	
0714		Well Water Analysis - Organic Analysis	$ 200.00	
0715		Admin. Fee - Field Activity Letter	$ 25.00	
0718		Residential Pool Permit	$ 50.00	
0719		Public Pool Permit - operating	$ 240.00	
0720		Seasonal Pool Permit - operating	$ 120.00	
0736		Pool Late Fee	$ 120.00	
0733		Permit to Construct a Public Pool	$ 200.00	
0721		Home Day Care Evaluation and Permit	$ 70.00	
0722		Home Day Care Evaluation and Annual Fee	$ 40.00	
0723		Eval and Report Non-Permit Facility	$ 50.00	
0724		Private Pool Testing	$ 15.00	
0731		Garbage Hauler Permit - (1-9 vehicles)	$ 30.00	
0736		Garbage Hauler Permit - (each over 9)	$ 20.00	
0725		Document Copies	$ 0.05	
Payment received by:		Date:	Total:	

4145 McGinnis Rd.

4/2000

White-AUDIT Canary-CUSTOMER Pink-DIVISION