

16909 KNOXWOOD DR

00543282

7/10/08

marliwr

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT 12X8

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

FILE: 14457 DATE: 9/7/95

TC: 005-011-09 ☐ L ☒ CRT

SERIAL Nº 14399

Name of Owner Donald Jordan Juris.:

Address of Property 16909 Knoxwood Drive

Inspection Data:

Tank Material PCC

Total Length of Drainfield 402'

Number of Lines 6 @ 67' each

Cover Depth 6"-17"

Water Supply Source municipal

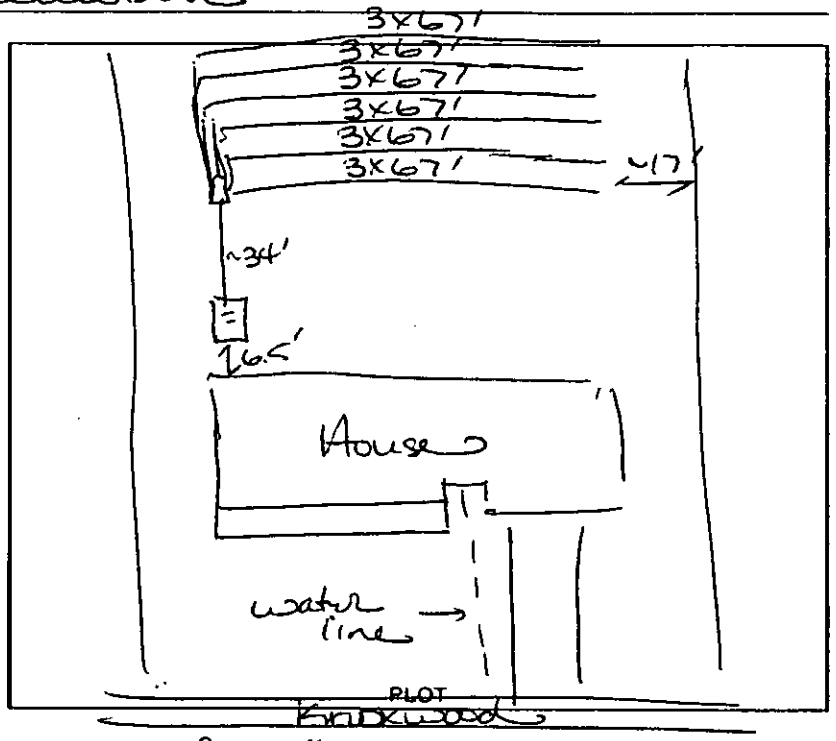
Distance to Water Source waterline >10

Excavation Inspected 9/7/95

Tank(s) Inspected 9/7/95

Wash Line Inspected NA

High Water Alarm Inspected NA



Design: 1995 CON, 1500gST, D-Box, 1206ft², 12"6, cecil-like CTR# 80

The undersigned has inspected the Septic Tank System described above, and certifies it has been Claudius Morrison

☑ installed or constructed ☐ altered or repaired

☑ in accordance with the permit issued installation approval ☐ as detailed in the plot above

and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The 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 10 NCAC 10A .1900 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.

COMMENTS: Type II, 3 bedroom residence

Lisa B. Mialik, RS
Environmentalist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

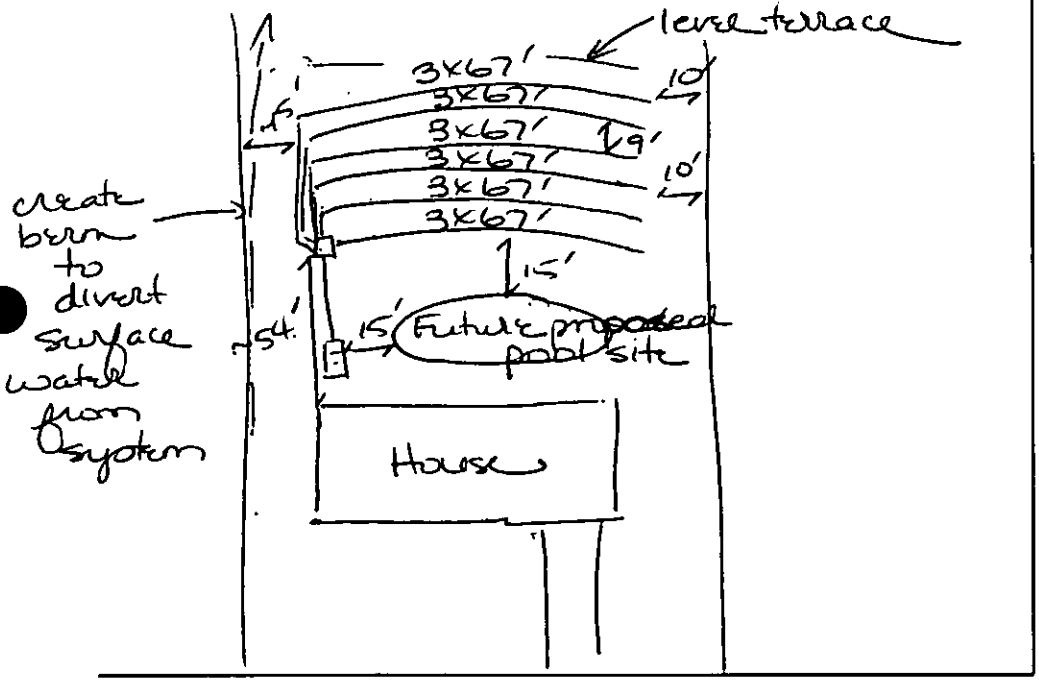
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 14457 DATE: 9/7/95

TC: 005-011-09 ☐ L

SERIAL Nº 16378

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 2/22/95. All work shall be completed on or before 10/7/95, 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 / gallons

Tank Construction PCC

Trench Depth 18-36"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous ✓

Total Line Length 402 feet

Number of Lines 6@67' each

Depth of Stone 12" inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well municipal feet

Distance from waterline 10 feet.

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

NAME OF OWNER Donald Jordan

LOCATION OF PROPERTY 16909 Knoxwood Drive

Comments: (1) System ~~design~~ from ~~altered~~ nitrification field altered from original improvement permit at owner's request due to his possible plans to install swimming pool.
(2) Lot exempt from 100% repair. See file for 1978 lot description. Lift station required for usage of front yard for some repair area. Waiver for Stanaitis, Logan Chief 9-8-95
(3) Level terrace. Final landscape on left property line to include swale/berm to divert surface water from septic system.

Khan B. Malik
Environmental Health Specialist

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

9/26/95 #1031 $150.00 — 14457 — Rec'd 3/3/95 Ck. # 09669 — CRS

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

Date: FEBRUARY 22, 1995

PERSON FILING APPLICATION:

NAME: JORDAN (last) DONALD (first) R (mi)

ADDRESS: 12621 CEDAR FALL DR. PHONE: (704) 948-0240

CITY: HUNTERSVILLE STATE: N.C. ZIPCODE: 28078

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 00501109

STREET ADDRESS: 16909 KNOXWOOD DR. HUNTERSVILLE NC. 28078

ZONING: RESIDENTIAL R3

PROPERTY OWNER:

NAME: GRIGG (last) BRUCE (first) F (mi)

ADDRESS: 16901 KNOXWOOD DR. PHONE: (704) 892-3578

CITY: HUNTERSVILLE STATE: N.C. ZIPCODE: 28078

SUBDIVISION OR MOBILE HOME PARK NAME: KNOXWOOD

Township (check one):
- [ ] 0 Mecklenburg County
- [ ] 1 Charlotte
- [ ] 2 Davidson
- [ ] 3 Cornelius
- [ ] 4 Pineville
- [ ] 5 Matthews
- [x] 6 Huntersville
- [ ] 7 Mint Hill

LOT NUMBER: ~~85~~ TAX MAP. LOT SIZE (in acres): .50 OR ½

TYPE APPLICATION (check one):
- [ ] SOIL TEST - INDIVIDUAL LOT (O)
- [x] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
- [ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
- [ ] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
- [ ] COMMERCIAL OR INDUSTRIAL (N)
- [ ] SOIL TEST DEVELOPMENT (P)
- [ ] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
- [ ] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
- [ ] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
- [ ] SINGLE MOBILE HOME (S)
- [x] HOUSE (H)
- [ ] MULTIPLE FAMILY (U)
- [ ] DOUBLE WIDE (D)
- [ ] MODULAR HOME (M)
- [ ] OTHER _____ (O)

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 3

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ___ Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type _____

WATER SUPPLY (check one):
- [ ] Community (C)
- [x] Municipal (M)
- [ ] Private Well (P)
- [ ] Shared Well (S)
- [ ] Other 'spring' (O)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
- [ ] Swimming Pool
- [ ] Garage
- [ ] Jacuzzi
- [ ] Storage Building
- [ ] Stable/Barn
- [ ] Deck/Patio
- [ ] Workshop
- [ ] Bedrooms
- [ ] None
- [ ] Other

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: Joe Cochran /KNOX Realty Date: FEBRUARY 22, 1995

14457

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

...No work shall be conducted on the septic tank system until an installation, Construction, Alteration and/or Repair approval is granted by this Department.

...This permit is not transferable.

...

- [x] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
- [ ] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
- [ ] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Karen Patterson — 3-14-95
Environmentalist — Date

Tom Higgins-Bunny — 3-21-95
Director or Authorized Section Head — Date

WATER : 122791

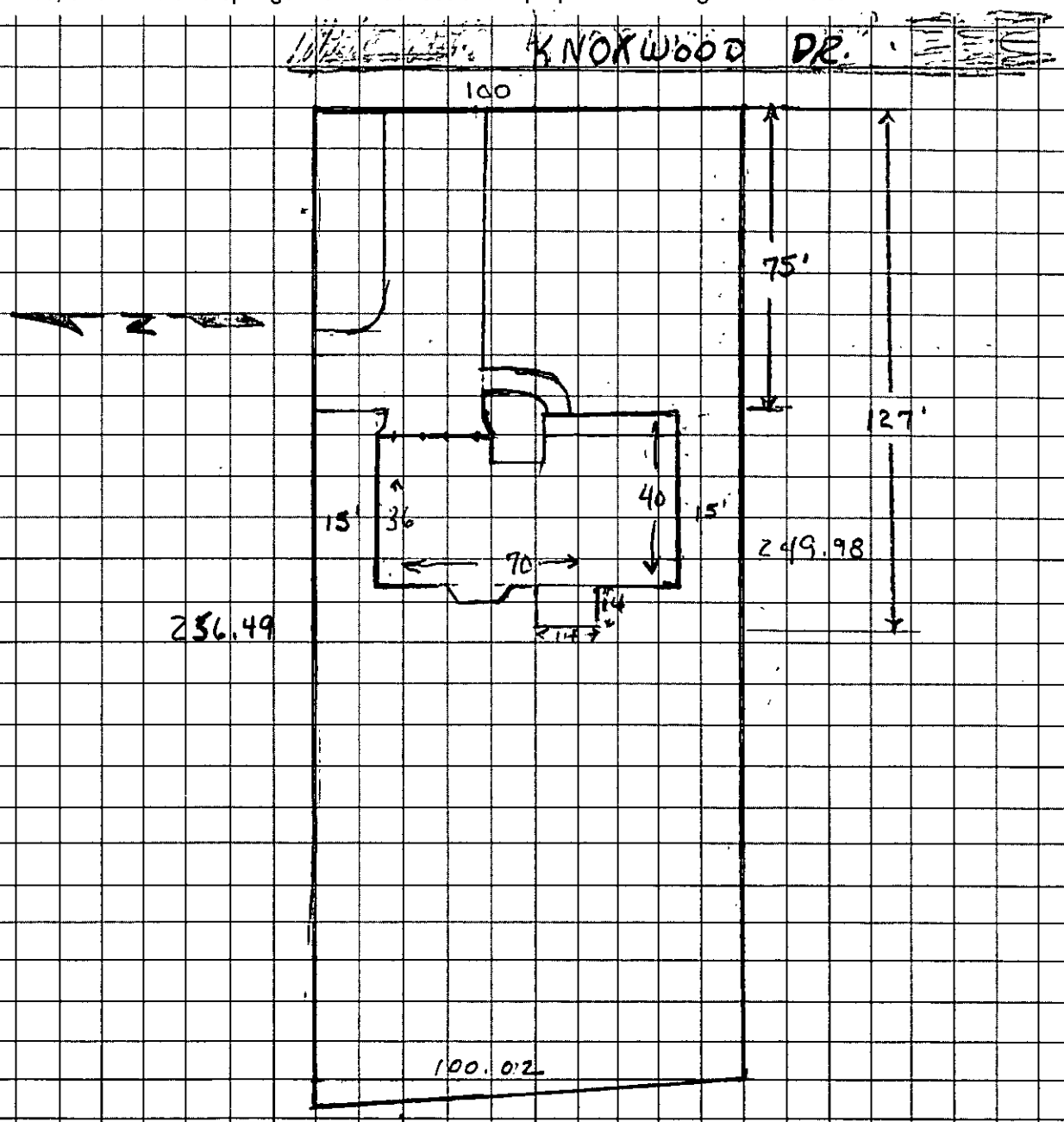
PROPOSED PLOT PLAN

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

FILE: 14457

TC: 005-011-09

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.



Joe Cochran / Knox Realty
OWNER/AGENT SIGNATURE

DATE FEBRUARY 22, 1995

APPROVAL DATE _____

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

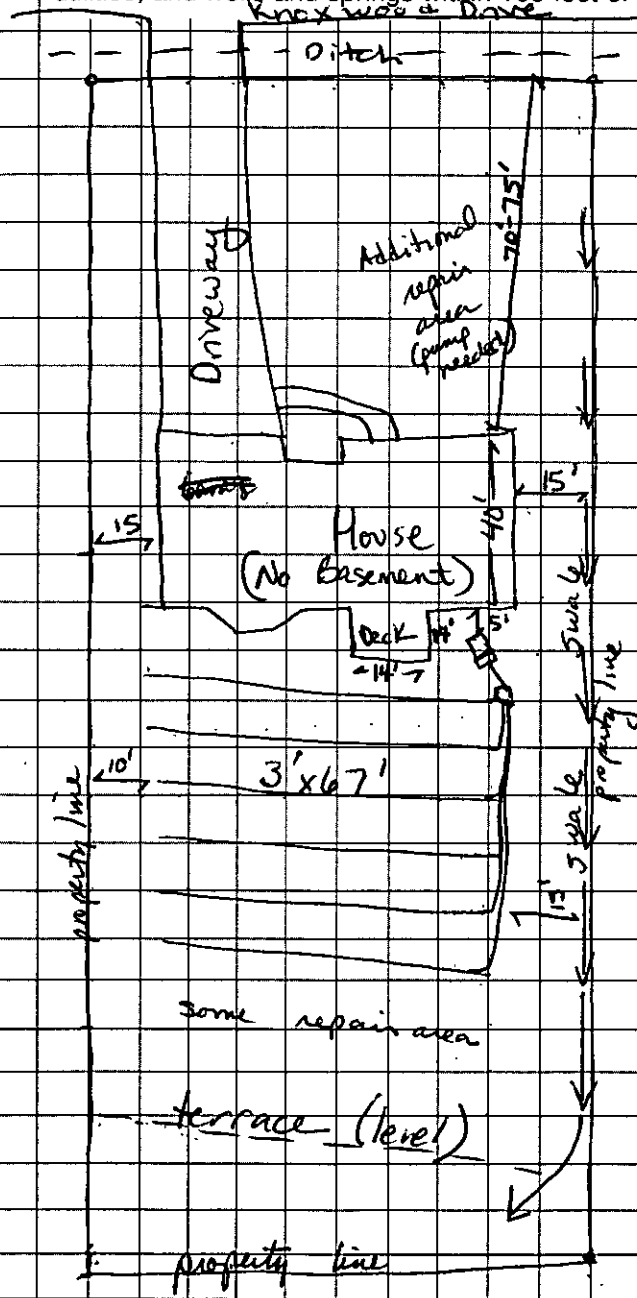
PROPOSED PLOT PLAN

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

FILE: 14457

TC: 005-011-09

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.



3 bedroom design
1500 g septic tank
1200 sq ft drainfield at
6 lines at 3'x67'x12" stone each.
Keep septic tank system
min. 5' from building foundation
and min 5' from deck.
Level terrace as shown and
install swale along property
line to divert surface water
away from system area.
Repair area for conventional
system and will require
lift station for front yard area.
Keep water line min 10' from
any part of sewage treatment
and disposal system.
Trench bottoms to be no deeper
than 28".
Direct gutter downspouts
away from septic system area.
Any changes may void permit.
Do not grade or disturb soil
in area for septic system
except installing swale & leveling
terrace

Joey T. Cochran agent
OWNER/AGENT SIGNATURE
DATE MARCH 14, 1995

APPROVAL DATE S Bateman 3-13-95

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 028503

File: 14457 4200 Action 1

Parcel: 005-011-09 ☐ PC

Location: 16909 Knoxwood Dr.

Subdivision:

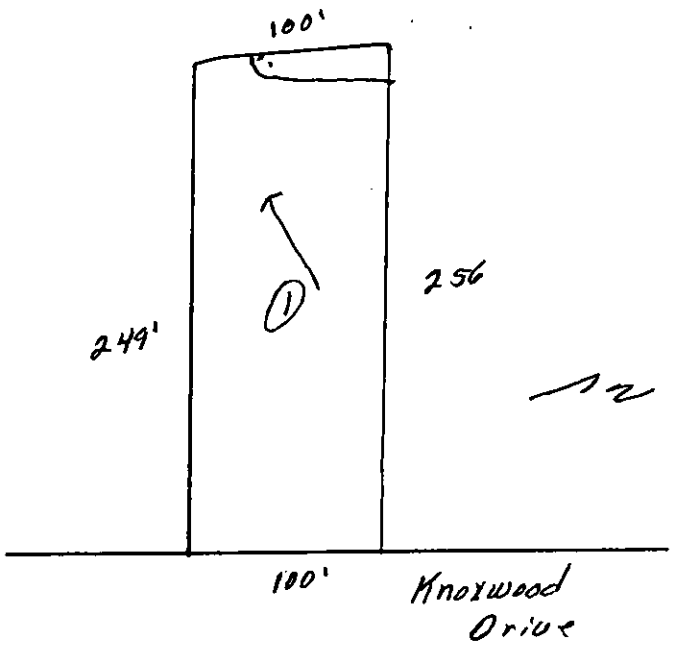
Lot: 5 Block: A Acres: .58

Owner: Bruce F. Hogg
Address: 16901 Knoxwood Dr.
Huntersville, N.C. 28078

Comments: Lot does not require 100% Repair, 3 gal/ft/day LTAR, would require surface diversion

Described by: William R. Marlin

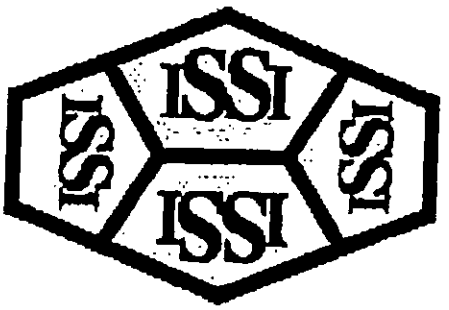
Date: 3-8-95



*** EVALUATION KEY ***

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	(S) PS U 2-8%	S PS (U) Depression	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U Slightly Expansive clay	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U 7-40" To soil wetness	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 40"+	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 7-40"	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S (PS) U Limited	S PS U	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	IV Cecil like	Depression				
Area Classification	S (PS) U	S PS (U)	S PS U	S PS U	S PS U	S PS U



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ISSI Operations Center Staff

Date Received 4/11/98

APP. NO. 14457

P.I. NO. 005-02-02

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Linda Bobby Boyce

2) ADDRESS OF OWNER Rt #12 Box 385 Huntersville ZIP 28078

3) PHONE NO. Home 892-0248 Office 892-0196

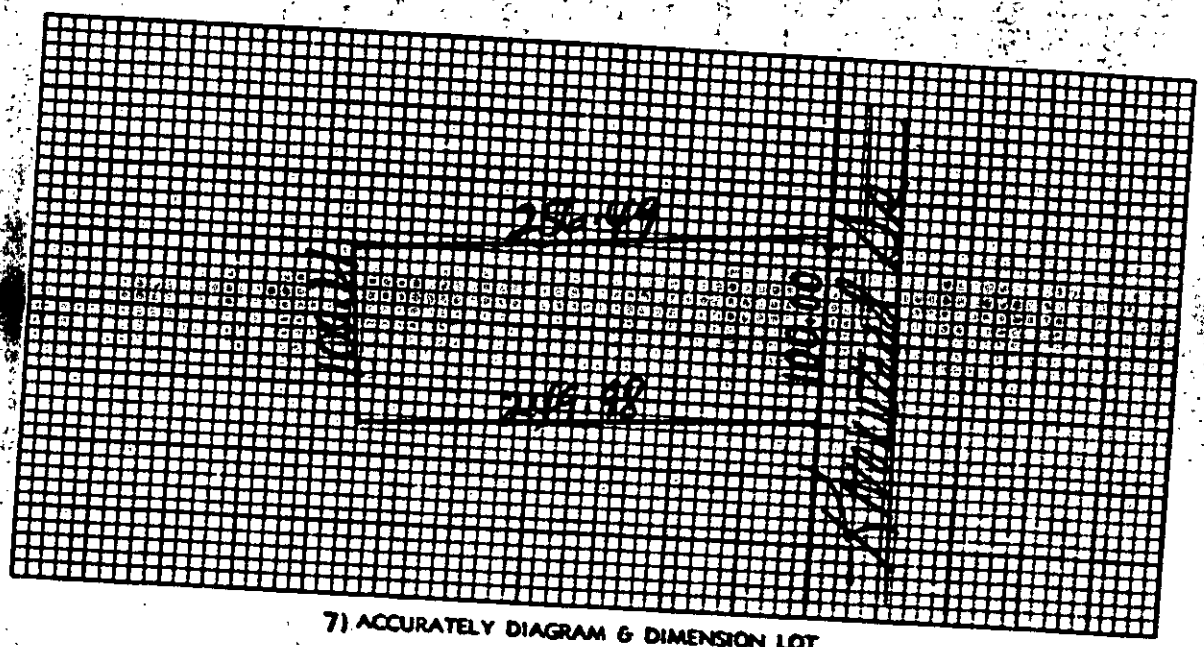
4) LOCATION OF PROPERTY Knoxwood Dr
STREET OR COUNTY ROAD

5) SUBDIVISION Knoxwood LOT NO. 54 BLOCK NO.

MAP BOOK NO. PAGE NO.

6) DEED REFERENCE: DEED BOOK PAGE NO.

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation and an on site inspection of the lot hereinabove described for the purpose of determining if the lot is suitable for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge.



7) ACCURATELY DIAGRAM & DIMENSION LOT

OWNER Bobby B. Boyce

Serial No. 2182

PTR No. 14457

T. C. No. P.0.005-012-08

Date Issued September 19, 1978

Map Date

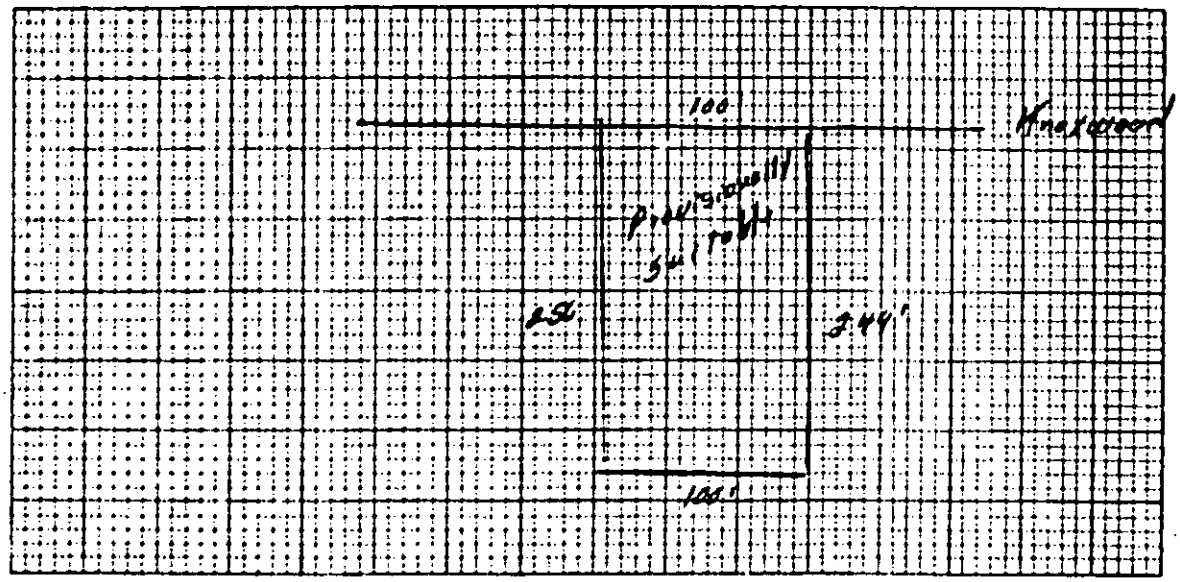
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Knox (LAST) Bobby (FIRST) Boyce (MIDDLE)

ADDRESS OF OWNER Route 2, Box 385, Huntersville, NC ZIP 28078

LOCATION OF PROPERTY Knoxwood Drive (STREET OR COUNTY ROAD)

SUBDIVISION Knoxwood LOT NO. 5A BLOCK NO.



PLOT PLAN

This is to certify that a soil investigation and on-site investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The said investigation was conducted on that portion of the lot as indicated on the above plot. **Provisionally Suitable**

The permeability rate determined by the investigation was ____. The said lot is approved for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption effluent discharge subject to the following terms and conditions:

1. A permit to install, construct, alter, or repair the specific system shall be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction of buildings, or of the wastewater treatment system on the said lot.
2. The size of the septic tank wastewater treatment system which must be installed will be determined by the Mecklenburg County Department of Environmental Health prior to installation based on the permeability rate obtained above, and on the size and type of building constructed thereon.
3. This approval is valid only if the system is installed in the immediate area indicated as acceptable for system installation on the above plot.
4. This approval is void if any grading, filling, or construction (including the drilling of a well) is performed on the lot which in the opinion of the Mecklenburg County Department of Environmental Health, renders the area indicated as acceptable for system installation unsuitable for installation, construction, alteration, and/or repair of such a system.

This approval is granted based on the laws of the State of North Carolina and the rules and regulations of the North Carolina Department of Human Resources, Division of Health Services and the Mecklenburg County Health Commission which were in effect on the date of issuance and is void if at any time in the future, prior to completion of the system, these laws, rules and regulations are changed such that this approval would not have been granted had the new or revised laws, rules and regulations been in effect on the issue date.

William A. Martin
Soil Scientist

EHD-5-76

John R. Robinson
Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX H
SITE EVALUATION

APT INN
PO 005-01
LOT 5A

(Ground Absorption Sewage Disposal)

OWNER: Bobby Bryan Hood
ADDRESS: Alt Hy 158
COUNTY: Huntsville NC
LOCATION OF SITE: Raglund Dr.

DATE REQUESTED:
PLAT NO.:
LOT SIZE: 25,200

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS 2-8 % U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S (PS) Clay U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S (PS) Blocky U	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	(S) PS 40" U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Imprevious Strata, Rock)	(S) None PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) 36 to PS ground U water	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) Moderate U	S PS U	S PS U	S PS U
8. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	✓ Provisionally suitable			
SOIL SERIES	Cor. 1			

S - Suitable PS - Provisionally Suitable U - Unsuitable

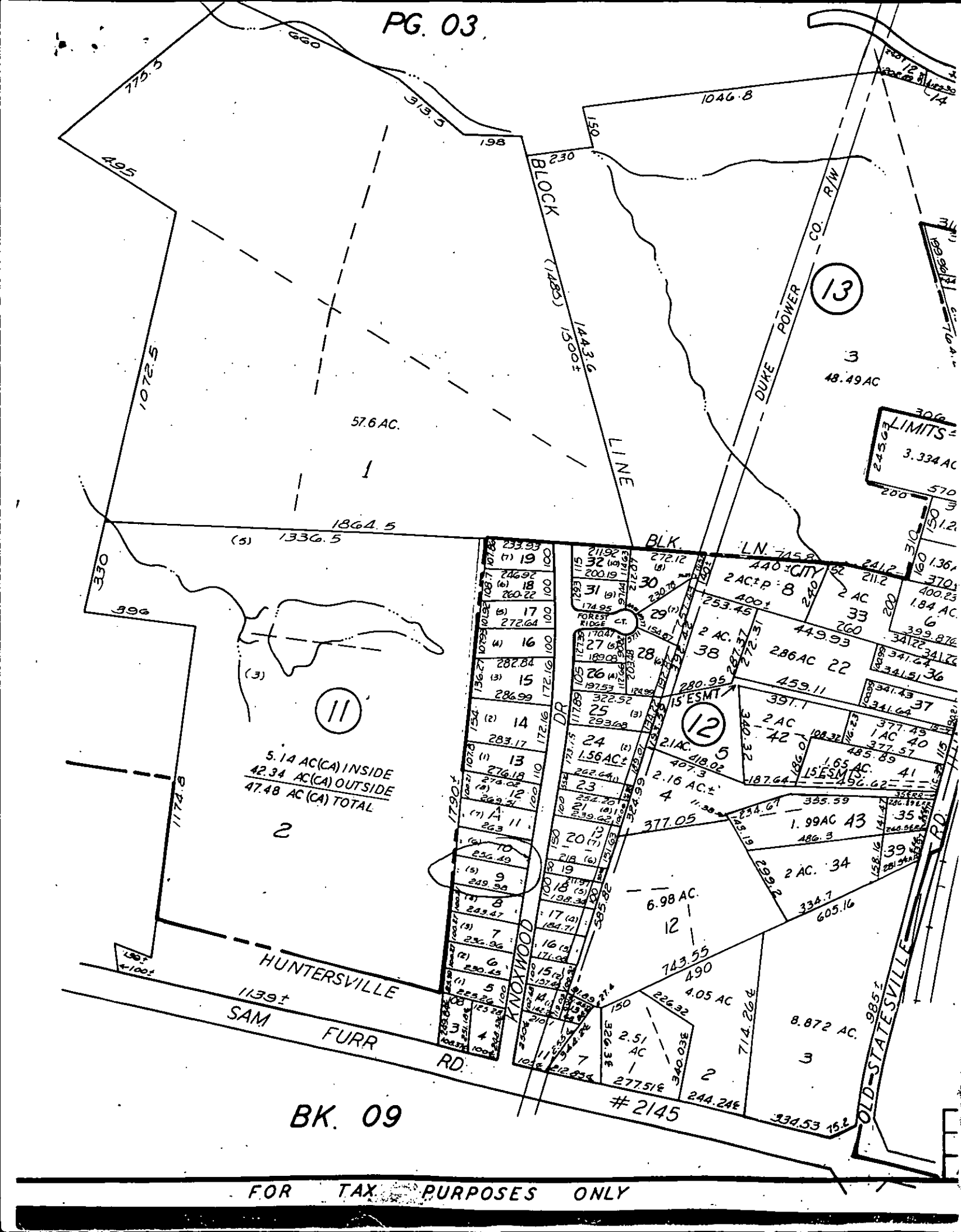
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullie
wet areas, fill areas, wells, water bodies, slope patterns, e

Recommendations/Comments:

Described By: William R. Martin

Title: Soil Scientist Date: 8-10-78

DHS Form 2601 (2/77)
Sanitation


PG. 03
660
776.5
313.5
198
495
1046.8
150
230
BLOCK
(1485)
1443.6
1300±
LINE
DUKE POWER CO. R/W
13
3
48.49 AC
1072.5
57.6 AC.
1
1864.5
(5) 1336.5
330
396
(3)
11
5.14 AC(CA) INSIDE
42.34 AC(CA) OUTSIDE
47.48 AC (CA) TOTAL
2
1174.8
BLK.
LN.
745.8
440
CITY
LIMITS
24503
3.334 AC
2 AC±
P
8
400±
253.45
2 AC
33
260
449.93
2 AC.
38
287.37
272.3
2.86 AC
22
459.11
36
280.95
15' ESM'T
391.1
2 AC
42
340.32
12
5
2.1 AC.
618.02
407.3
2.16 AC.±
4
324.9
377.05
1.65 AC.
485.89
15' ESM'T
187.64
492.62
1.99 AC
43
486.3
35
41
40
37
2 AC.
34
299.2
334.7
605.16
6.98 AC.
12
743.55
490
4.05 AC
226.32
714.26
2.51
AC
1
277516
E
340.03
E
2
244.24E
8.872 AC.
3
334.53
986±
OLD-STATESVILLE RD.
1790±
DR
KNOXWOOD
595.82
1139±
SAM FURR RD.
HUNTERSVILLE
#2145
BK. 09
FOR TAX PURPOSES ONLY