


9129 DORCAS LN

14126151

6/22/2007

duponbj

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

# Mecklenburg County
# Health Department

September 12th, 1990

Paul Ward
9129 Dorcas Lane
Charlotte, NC 28212

RE: Property located at 9129 Dorcas Lane
FILE: 6988A
PARCEL: 14111444

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 results of this investigation showed the property to be classified UNSUITABLE for the installation of such a system. A copy of the Site Evaluation Report (Serial Number 16646) is enclosed.

State regulations provide that sites originally classified unsuitable may be utilized for the installation of alternate or modified sewage disposal systems provided the requirements of 10 NCAC 10A .1948 (c) are met. A reprint of this section is enclosed for your information.

Should you desire to file for permission to install an alternate or modified sewage treatment system on the property, 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. They will be reviewed, and if it is determined that the proposed system may reasonably be expected to function satisfactorily, an Improvement Permit will be issued by the Department upon completion by you, of a formal request for lot reclassification.

If I may be of any assistance, please feel free to call.

Very truly yours,

Gene Vaughan, R.S., Supervisor
Individual Water and Wastewater Systems

Enclosure (2)

**MECKLENBURG COUNTY HEALTH DEPARTMENT**
**SITE EVALUATION REPORT**
**SERIAL NUMBER** 16646

File: 6988A  Action 2

Parcel: 14111444  ☒ PC

Location: 9129 Dorcas Lane

Subdivision:

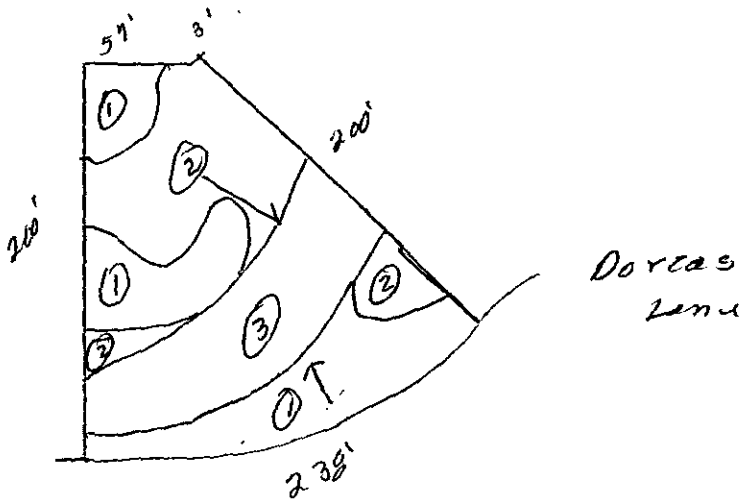
Lot: Block: Acres: .66

Owner: Paul Ward
Address: 9129 Dorcas Lane
Charlotte, NC 28212

Comments: _____

Described by: William A. Marks

Date: 9-12-90




***** 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 2-10% | S PS (U) complex slopes | S PS (U) Drainageway Depression | S PS U | S PS U | S PS U |
| Texture | S (PS) U 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 >36" To Water | S — PS U | S PS U — | S PS U | S PS U | S PS U |
| Depth | (S) PS U 48"+ | S PS U — | S PS U — | S PS U | S PS U | S PS U |
| Restrictive Horizons | (S) PS U >48" | S PS U — | S PS U — | S PS U | S PS U | S PS U |
| Available Space | S PS (U) Restricted | 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-Hillo | Complex slopes | Drainageway Depression | | | |
| Area Classification | S PS (U) | S PS (U) | S PS (U) | S PS U | S PS U | S PS U |

**MECKLENBURG COUNTY HEALTH DEPARTMENT**
**SITE EVALUATION REPORT**
**SERIAL NUMBER** 16646

File:

Action

Parcel:

☐ PC

Location:

Subdivision:

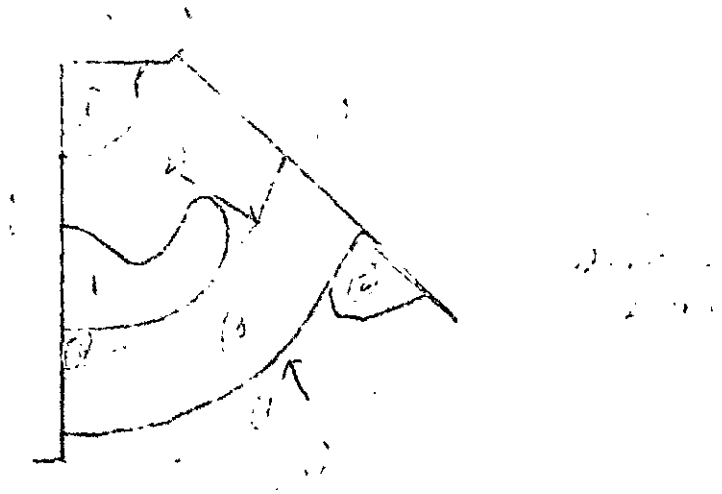
Lot: Block: Acres: .61

*Owner:*
Address:

Comments: _____

Described by: _____

Date: _____



***** EVALUATION KEY *****

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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 | S PS U | 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 | S PS U | 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 | 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** | | | | | | |
| **Area Classification** | S PS U | S PS U | S PS U | S PS U | S PS U | S PS U |

# APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 6988A

TC: _____

☐ PC ☐ REPT

Paid

**JOB LOCATION**

① ADDRESS: 9129 Dorcas Lane

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

⑤ PARCEL REFERENCE: BOOK NO.: _____ PAGE NO.: _____ PARCEL NO.: _____

⑥ DEED REFERENCE: BOOK NO.: _____ PAGE NO.: 141-114-44

**OWNER**

⑦ NAME: Paul (FIRST) NMI (MIDDLE) Ward (LAST)

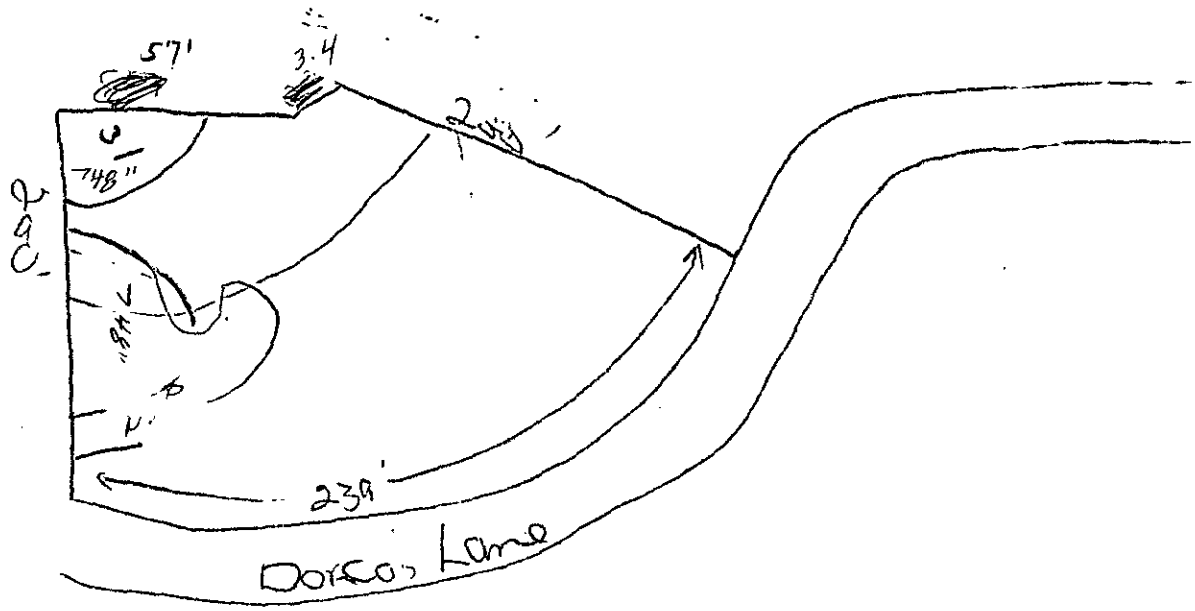
⑧ MAILING ADDRESS: 9129 Dorcas lane

⑨ CITY: Chlt ⑩ STATE: NC ⑪ ZIP: _____

⑫ PHONE: (WORK) _____ (HOME) _____

⑬ Accurately diagram and dimension lot.

5179A




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

Signed: Paul Ward

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

Date: 8-1-90

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER'S COPY

50.00

# APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 6988A

TC: _____

☐ PC ☐ REPT

**JOB LOCATION**

(1) ADDRESS: 9129 Dorcas Lane

(2) SUBDIVISION: Crafticlate (3) LOT: _____ (4) BLOCK: _____

(5) PARCEL REFERENCE: BOOK NO.: _____ PAGE NO.: _____ PARCEL NO.: _____

(6) DEED REFERENCE: BOOK NO.: _____ PAGE NO.: 141-114-44

**OWNER**

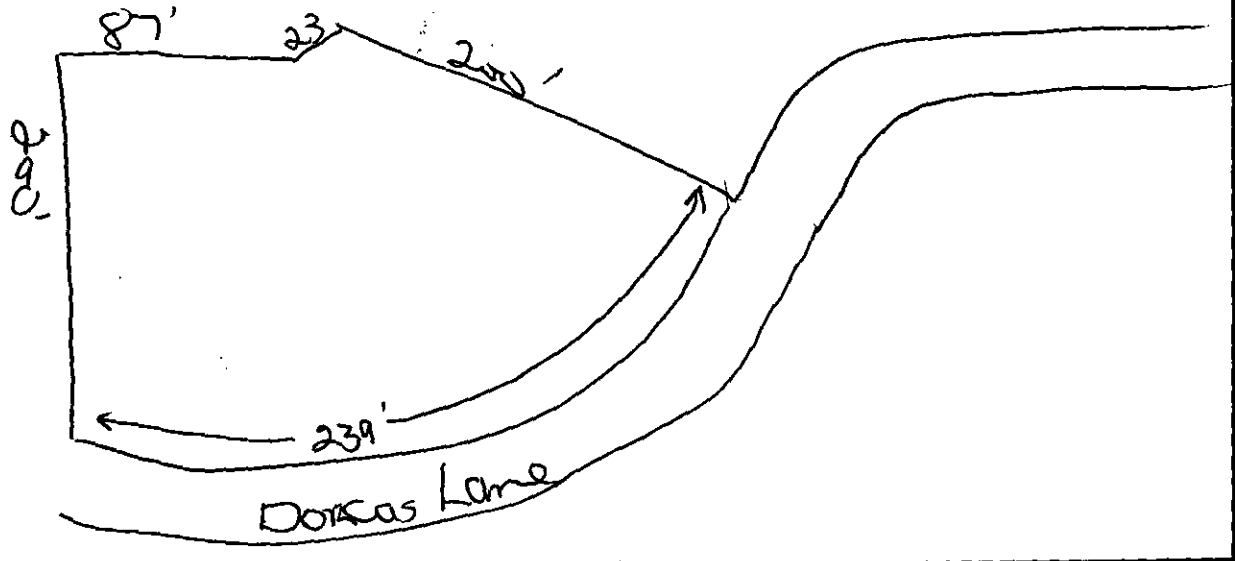
(7) NAME: Paul (FIRST) NMI (MIDDLE) Ward (LAST)

(8) MAILING ADDRESS: 9129 Dorcas Lane

(9) CITY: [redacted] Chlt (10) STATE: NC. (11) ZIP: _____

(12) PHONE: (WORK) _____ (HOME) _____

(13) Accurately diagram and dimension lot.




(14) The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

X Signed: Paul Ward

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

Date: 8-8-90

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER'S COPY

# MECKLENBURG COUNTY HEALTH DEPARTMENT
# ENVIRONMENTAL HEALTH DIVISION

**CHARGE SLIP**

Date: 8-20-90

Name/Company: Paul Ward

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Soil test (3/4-1 acre)
9129 Dorsey Lane

#6988A

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
AUG 20 1990

CO# 221

Fee: $ 50.00 #50.00

NOTICE:

*A processing fee of $15.00 will be charged for all returned checks in accordance with N.C. General Statute 25-3-512.*

Completed by

Collected by