

13810 SIMS RD

02104110

6/1/2007

duponbj

Groundwater and Wastewater Services File Imaging Project

May 2007

Barcode Font = IDAutomationHC39M

CERTIFICATE OF COMPLETION/OPERATION PERMIT 4400

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

FILE: 5559A DATE: 7/19/93

TC 021 041 10 ☐ L ☒ CRT

SERIAL Nº 15241

Name of Owner Reggie & Christy Nixon Juris.:

Address of Property 13810 Sim Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400' (3-80) 70+50

Number of Lines 6 @ +40

Cover Depth 20"

Water Supply Source well

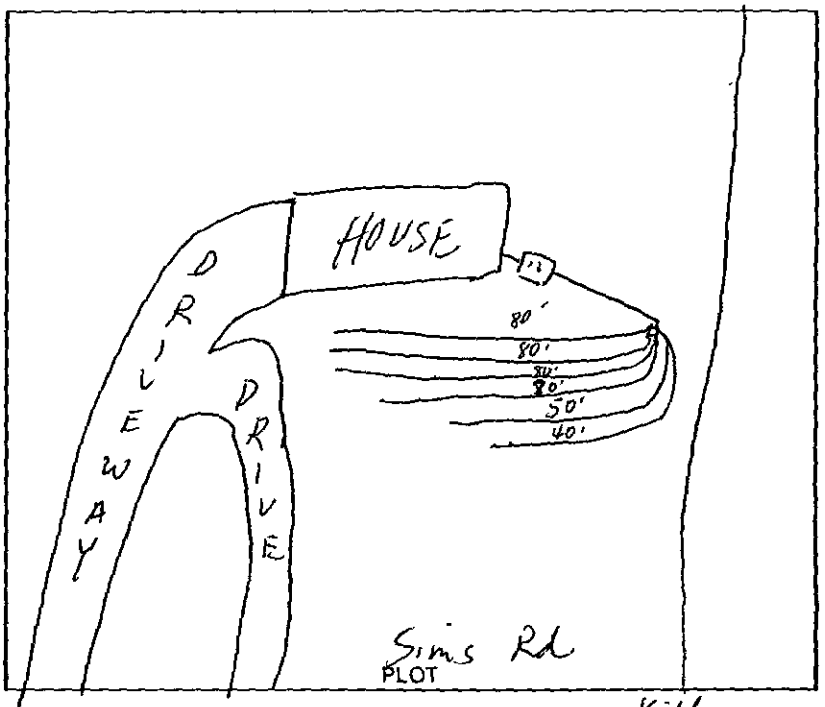
Distance to Water Source 750

Excavation Inspected 7/19/93

Tank(s) Inspected 7/19/93

Wash Line Inspected -

High Water Alarm Inspected -



Design: 1993, 1500 ST, CON, 1200SFT, 12" stone ceil CTR# Kidd Construction

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 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

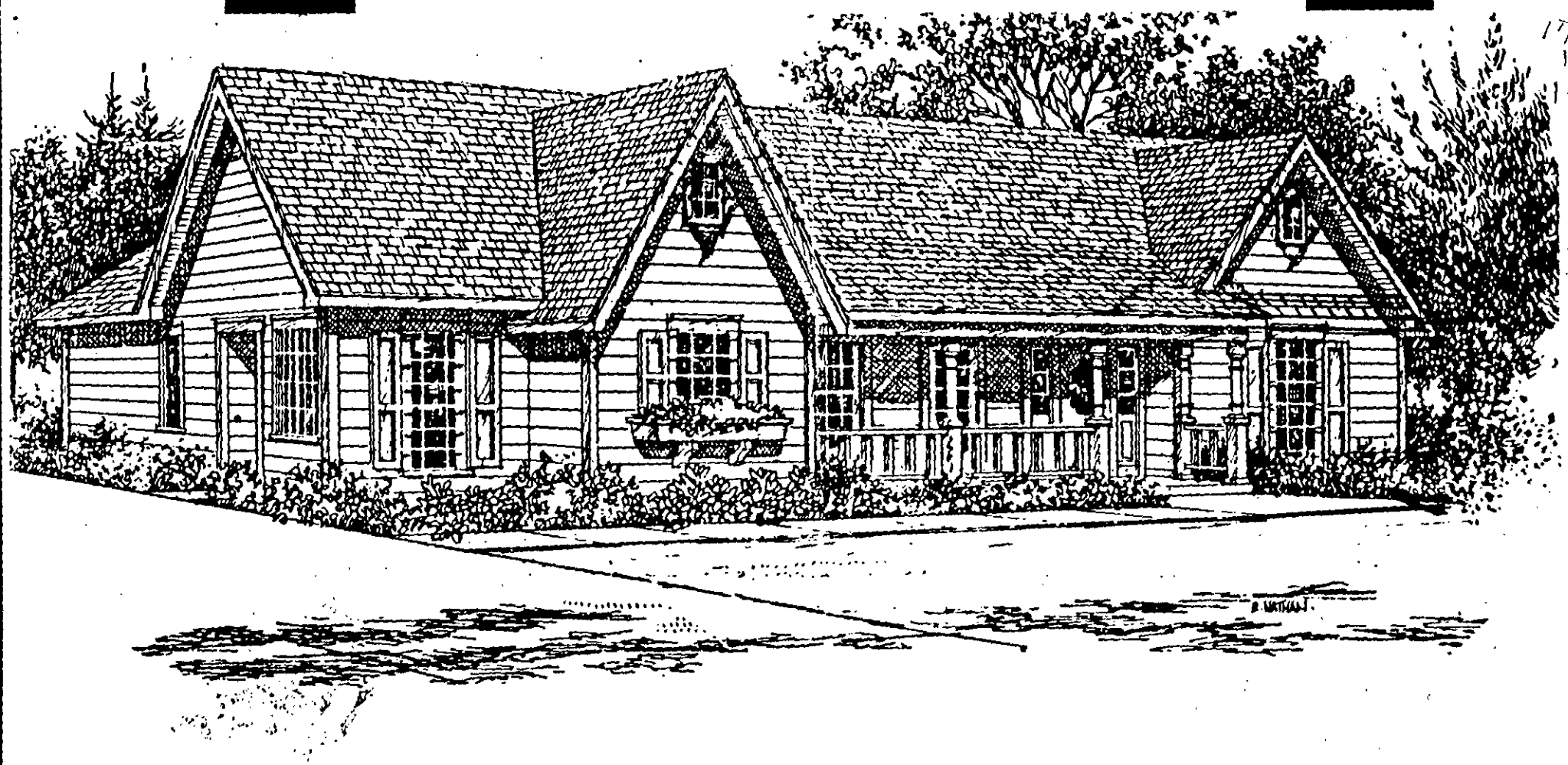
☒ Certificate of Completion ☐ Operation Permit

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.

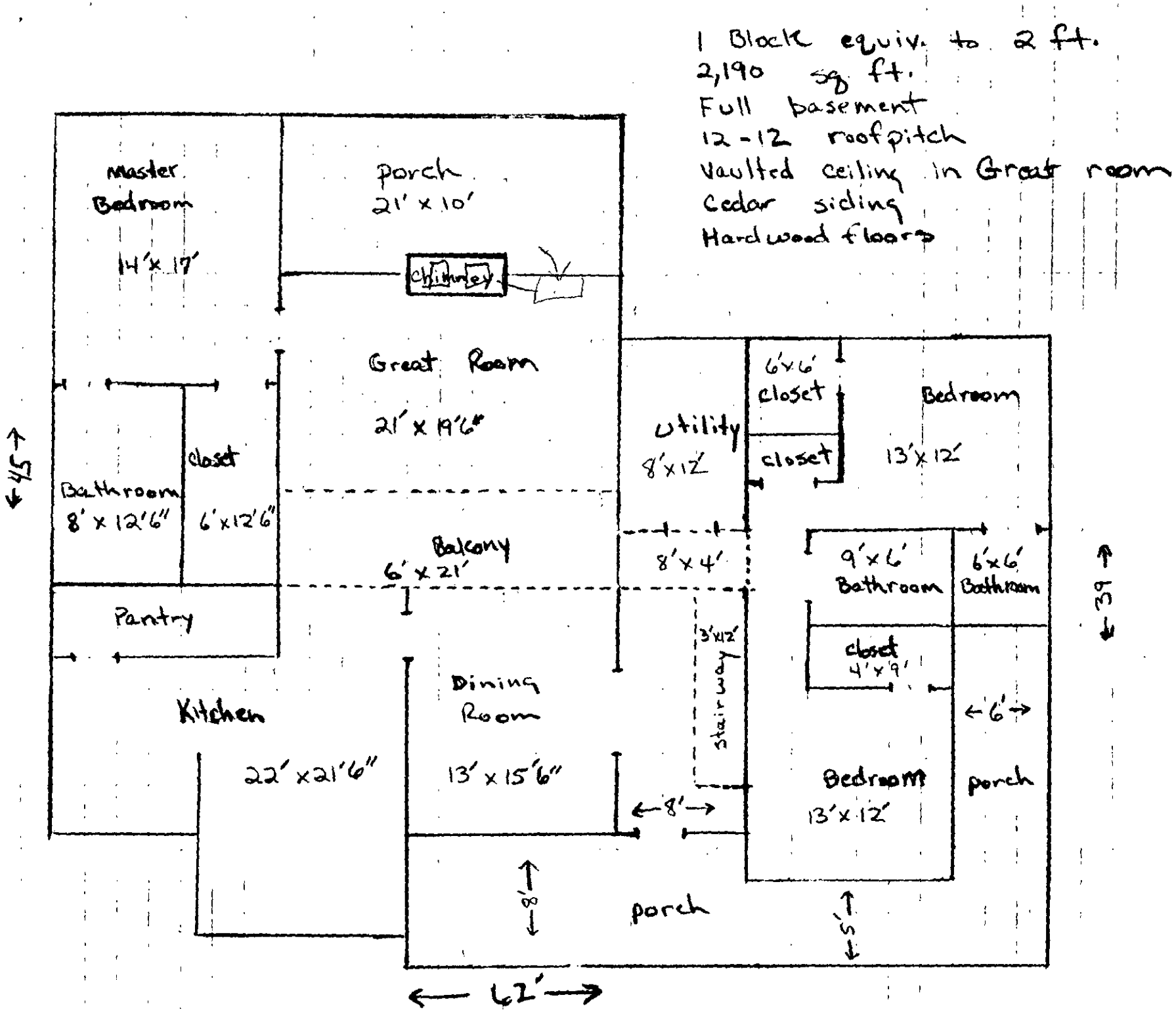
COMMENTS: Septic system designed for 3 bedroom house Septic system not install as plan. Speed level installed to help regulate effluent flow to lines.

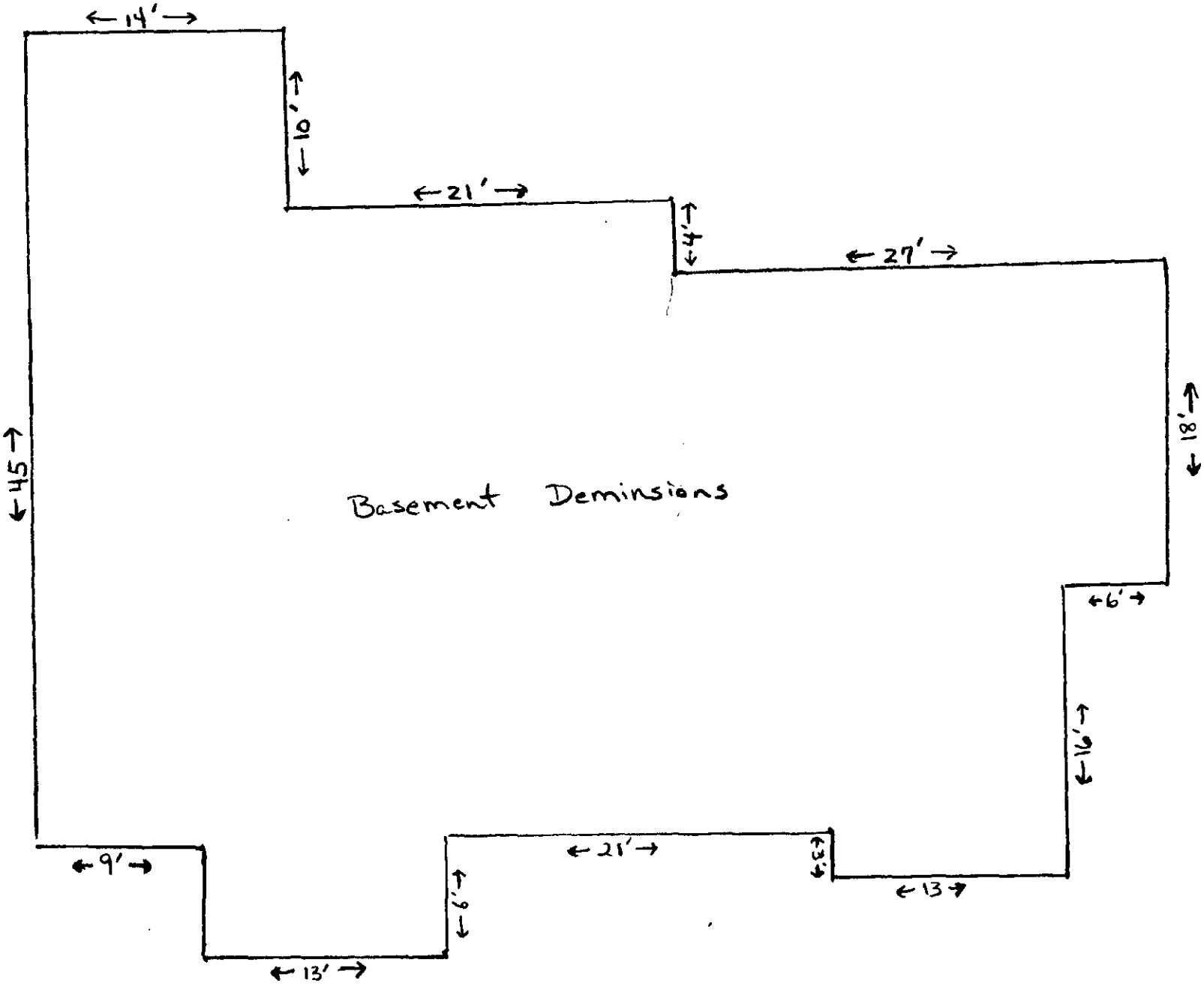
Philip S. Walker R.S.
Environmentalist

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



To order blueprints, use the form on page 187


1 Block equiv. to 2 ft.
2,190 sq ft.
Full basement
12-12 roofpitch
Vaulted ceiling in Great room
Cedar siding
Hardwood floors
Master Bedroom
14'x 17'
Porch
21' x 10'
Chimney
Great Room
21' x 19'6"
Bathroom
8' x 12'6"
Closet
6'x12'6"
Pantry
Balcony
6' x 21'
Kitchen
22' x 21'6"
Dining Room
13' x 15'6"
Utility
8'x12'
6'x6' closet
closet
Bedroom
13'x12'
8'x4'
9'x6' Bathroom
6'x6' Bathroom
3'x12' stairway
closet
4'x9'
Bedroom
13'x12'
porch
porch
45
39
6'
8'
8'
5'
62'


14'
10'
21'
4'
27'
18'
45'
Basement Deminsions
6'
16'
9'
21'
3'
13'
9'
13'

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

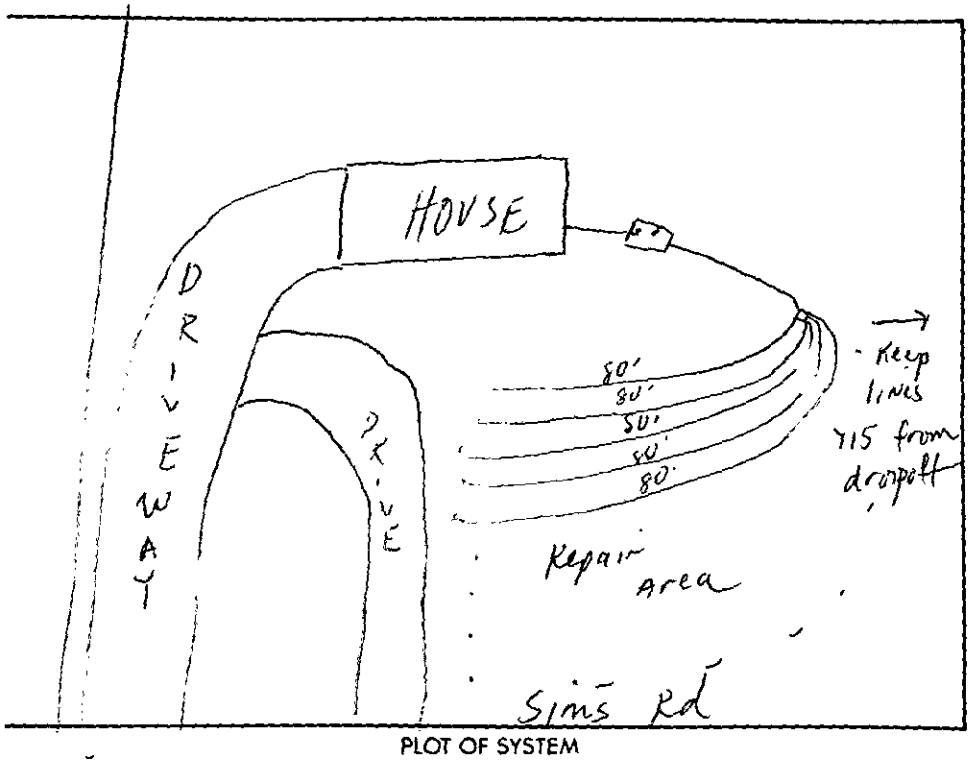
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 5559A DATE: 7/12/93

TC: 021 041 10 L

SERIAL Nº 15337

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 10/16/90. All work shall be completed on or before 8/12/93, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .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 —

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 400' feet

Number of Lines 5 (80')

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well >50 feet

NAME OF OWNER Reggie & Christy Nixon

LOCATION OF PROPERTY 13810 Sims Rd

Comments: septic tank, 5 lines x 80' long x 3' wd x 12" stone / Keep lines on contour of land / Keep proposed well >50' from septic system / Keep septic system >15' from dropoff / Keep lines max trench depth 3' deep.

Division or Section Head

Philip S. Walker
Environmentalist

* If this permit is for the installation or construction of a new system, it must be signed by the division or a section head of the Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

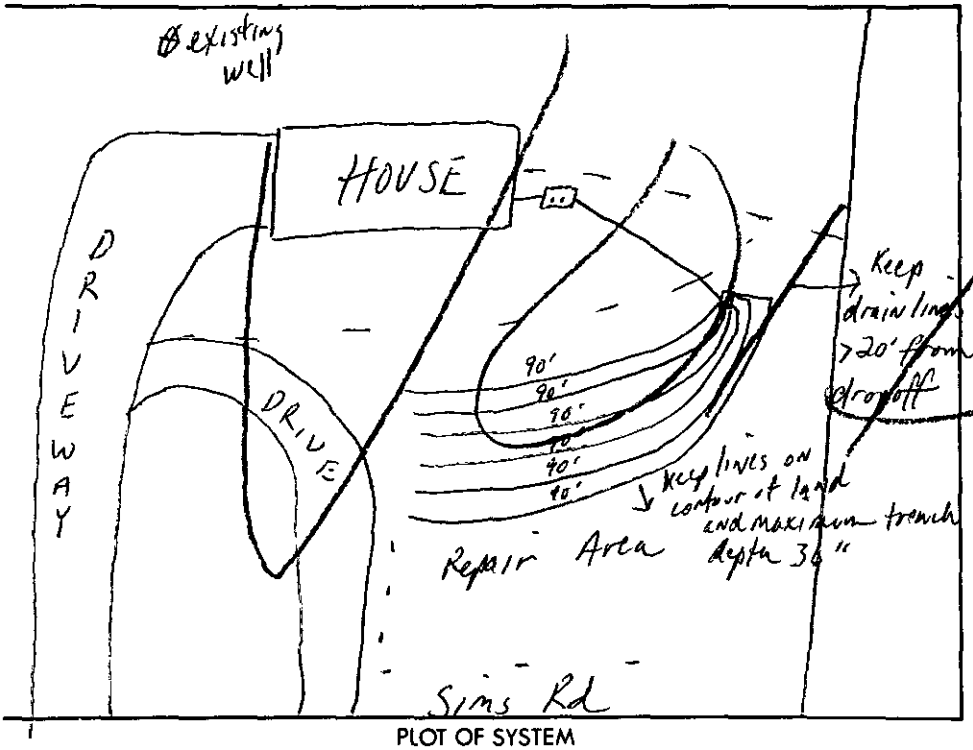
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 5559 A DATE: 6/9/93

TC: 021 041 10 ☐ L

SERIAL Nº 15507

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 10/16/90. All work shall be completed on or before 7/9/93, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .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 ~~PCC~~ N/A gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 535' feet

Number of Lines 6 (90')

Depth of Stone 12 inches

Distance from House 15' feet

Distance from Property Line 710 feet

Distance from Well >50 feet

NAME OF OWNER Reggie + Christy Nixon

LOCATION OF PROPERTY 13810 Sims Rd

Comments: Septic tank, 6 lines x 90' long x 3' wd x 12" stone | Keep lines on contour of land | Keep proposed well >50 from septic system | Keep drainfield >20' from dropoff | Keep lines maximum trench depth 3'.

Division or Section Head

Phillip S. Walker
Environmentalist

* If this permit is for the installation or construction of a new system, it must be signed by the division or a section head of the Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

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

ENVIRONMENTAL HEALTH DEPT.
BUILDING STANDARDS DEPT.
DEPT. OF ENVIRONMENTAL PROTECTION/
SOLID AND HAZARDOUS WASTE

DATE 10/24/90

FROM: COUNTY ENGINEERING DEPARTMENT

END FILE _____ JURISDICTION CODE Meck

PARCEL NUMBER 021-047-10

ASSIGNED ADDRESS 13810 Sims Rd

EXISTING ADDRESS _____

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	DISAPPROVED
SUBDIVISION REGULATIONS	/ /	/ /*
FLOODWAY REGULATIONS	/ /	/ /*
EROSION CONTROL REGULATIONS	/ /	/ /*
PUBLIC UTILITY EASEMENT	/ /	/ /*

	PRESENT	NOT PRESENT
5. PUBLIC UTILITY EASEMENT	/ /*	/ /
6. PROPERTY FRONTS ON THOROUGHFARE	/ /*	/ /
7. DRIVEWAY PERMIT REQUIRED	/ /*	/ /

If checked, further investigation will be required to determine whether a building permit can be issued by Building Standards for the site.

REMARKS: per request

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIER'S OFFICE AT BUILDING STANDARDS WHEN PAYING PERMIT FEES.
A CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL THE TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

SIGNED: [signature]

OPWIAR 06-88

NEW ADDRESS / /*

FEE: 100

704 336 3846 ENGINEERING '90 10-24 12:17 00

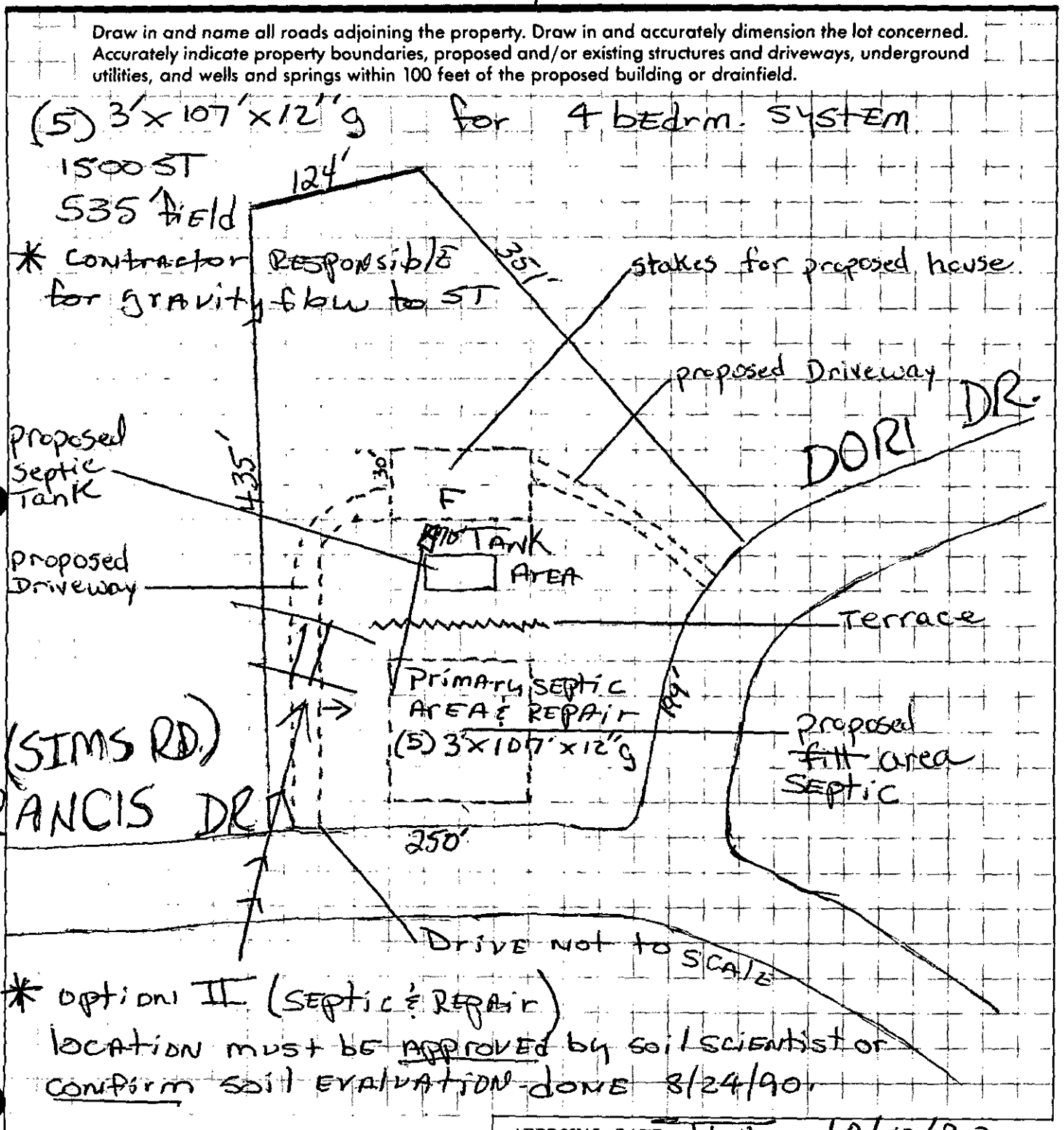
PROPOSED PLOT PLAN

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

FILE: 5559A

TC: 021-041-10

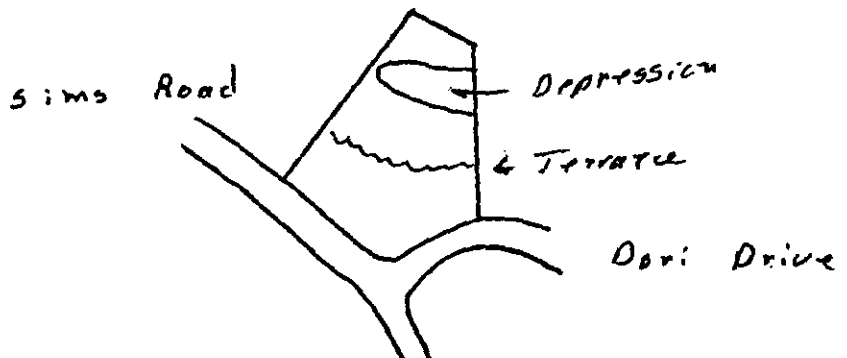
Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



APPROVAL DATE T.W. 10/10/90
C.N. 10-10-90

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

Pre- Preliminary 021-041-10



☐ Soils Appearing To Be Dominantly Unacceptable For Septic Tank System Installation

☐ Soils That Might Be Considered For Use With Shallow-placed Septic Tank Systems

W. R. Martin- Soil Scientist

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR AN IMPROVEMENT PERMIT

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

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

(OFFICE USE ONLY)
FILE: 5559A
TC: D21 04110
SERIAL: № 21178
PWL ☐ CRT

JOB LOCATION

ADDRESS: 13810 (STREET NO.) Sims Road (STREET) Huntersville N.C. ② FILE: 5559A
③ JURISDICTION: ④ TAX PARCEL NO.: [redacted] 02104110
⑤ SUBDIVISION: ⑥ LOT: 3 ⑦ BLOCK:

OWNER

⑧ NAME: Reggie & Christy (FIRST) (MIDDLE) Nixon (LAST)
⑨ MAILING ADDRESS: 3525 Rich Ave * correct - 6/23/93
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28206
⑬ PHONE: (WORK) 343-3830 ⑭ (HOME) 376-1295

REQUEST

This request is for a(n):

⑮ ☒ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☐ Other (specify)

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 3 TW - 10/10/90 RW - 6-23-93 C.K. 10-10-90
㉓ Maximum occupancy? 4
㉔ Basement? ☒ yes ☐ no
㉕ Type?
㉖ Maximum number of employees?
㉗ Maximum number of seats?

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☒ Individual well
B ☐ Municipal system
C ☐ Community well
D ☐ Community system

㉙ 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: Reggie & Christy Nixon
Date: Sept. 18, 1990

IMPROVEMENT PERMIT

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 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 permit is issued by this Department.

... This permit is not transferable, and shall become null and void 36 months from the date of issuance.

Tim Whitaker, 10/16/90
Environmentalist — Date

[signature], 10-18-90
Director or Authorized Section Head — Date

*This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 9-19-90

Name/Company: Reginald D. Mizon

Sanitation _____

Vector Control _____

O.P.W.D. X

Service: 3525 Pitch Ave

Improvement Permit

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
SEP 19 1990

Fee: $ 200.00

T.W. 10/12/90 RD. 6-23-93 TC-10-90 $43 $200.00

NOTICE:

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

Elizabeth Johnstone
Completed by

Collected by

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 5559A V

TC: 021-041-10

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: Dori Drive Huntersville — off Sims Rd.

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

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

⑥ DEED REFERENCE: BOOK NO.: _____ PAGE NO.: _____

OWNER

(Investigation requested by buyer)

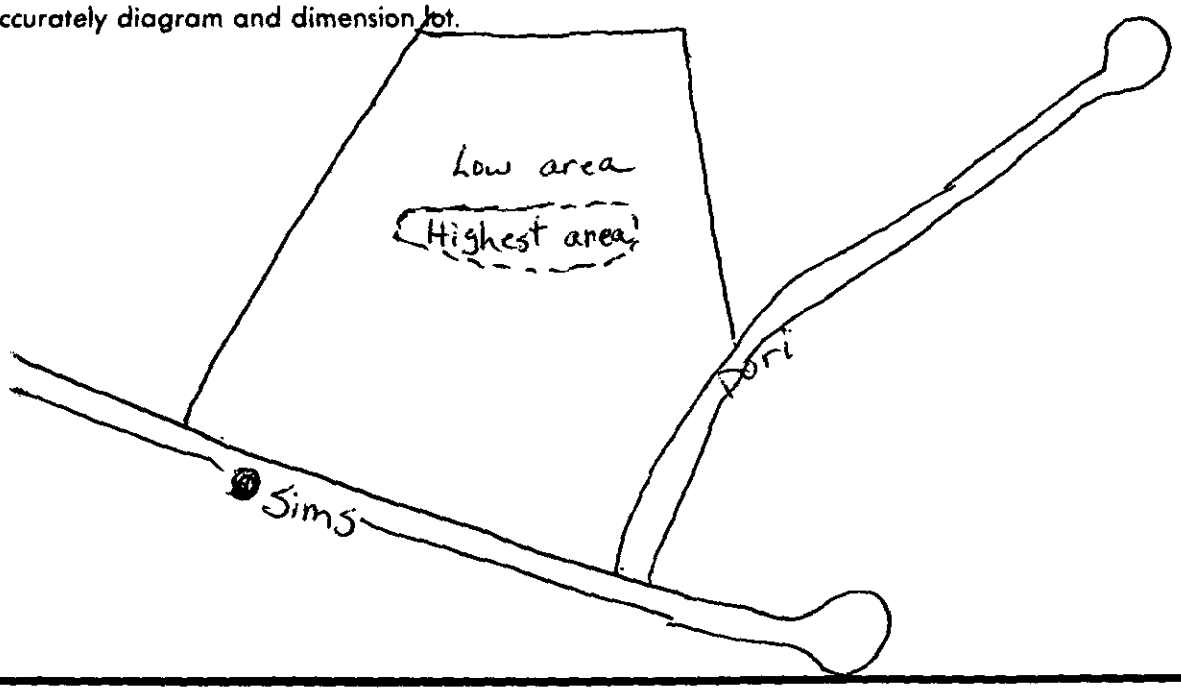
⑦ NAME: Fred + Doris Boovy or Patti Boovy (Reggie + Christy Nixon)
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: 3525 Ritch Ave.

⑨ CITY: Charlotte ⑩ STATE: NC. ⑪ ZIP: 28206

⑫ PHONE: (WORK) 343-3830 (HOME) 376 1275

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.

Signed: Reggie D Nixon Realtor (Honeycutt & Assoc)

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

Date: 8-7-90

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 08/13/90

Name/Company: Reginald D. Murphy

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Soil Test

1 acre

Dore Drive

Huntersville, NC

TP # 021-041-10

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
AUG 13 1990

Fee: $ 50.00

Rec# 136
$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.

E. Hunter
Completed by

Collected by

Mr. Martin:

The house will sit on the highest portion of the lot. The house will have a basement, therefore it will sit on the back portion of this high area, to take advantage of the downward incline. At this time we are tentatively planning to have it face Sims Rd. We would prefer that you test after Aug. 19 because we will be out of town and will not have had an opportunity to site the house for you prior to this date.

Thank You

Reggie Nixon
3525 Ritch Ave.
Charlotte NC 28206
376-1275
Work - 343-3830

Mecklenburg County
Health Department

August 28th, 1990

Fred Boovy
3525 Ritch Avenue
Charlotte, NC 28206

RE: Property located at Dori Drive 3
FILE: 5559A
PARCEL: 0210411O

Dear Sir:

At your request, a field investigation was conducted on the property designated above for the purpose of determining site suitability for the installation of a ground absorption sewage disposal system. The property was found to contain a limited area of soils which were classified as PROVISIONALLY SUITABLE for such an installation. A copy of the Site Evaluation Report (Serial Number 16635) is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit an Application For An Improvement Permit with an ACCURATELY dimensioned plot plan detailing the location of current and/or proposed buildings, wells and sewage disposal systems to this office. The plan will be reviewed and if it is found that the area of provisionally suitable soils is adequate for the proposed construction, an Improvement Permit will be issued by this Department.

If I may be of assistance, please do not hesitate to contact me.

Very truly yours,

Gene Vaughan, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 16635

File: Action 1

Parcel: 5559A 02104110 PC

Location: Dori Drive

Subdivision:

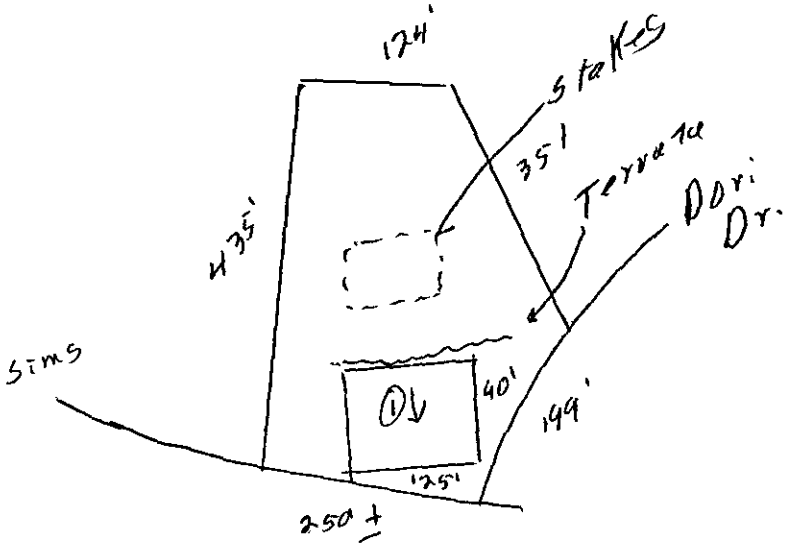
Lot: 3 Block: Acres: Approx .25

Owner: Fred Boovy
Address: 3525 Ritch Avenue
Charlotte, NC 28206

Comments: Not sure about 100% Repair - some additional area available

Described by: William A. McAuliffe

Date: 8-24-90



***** 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 6-12%	S PS (U) Terrace	S PS U	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 7 36" to water	S PS U —	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 37-47"	S PS U —	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 7 36"	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-Lilo	Terrace				
Area Classification	S (PS) U	S PS (U)	S PS U	S PS U	S PS U	S PS U

Mecklenburg County
Health Department

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

August 22, 1989

Patricia B. Mayes
12305 Mayes Road
Huntersville, NC 28078

Dear Ms. Mayes:

A pre-preliminary investigation of soils and topography was conducted on the tract (parcel 021-041-10) located on Sims Road. A soils map of the tract was proposed and a copy is enclosed.

The areas marked with yellow on the enclosed map appear to be dominantly unacceptable for the installation of septic tank systems. Included are an old terrace and a drainageway depression. Both areas will collect and channel surface water runoff from the surrounding land areas. The terrace also is a complex slope area that is not adaptable for the installation of septic tank systems.

The soils on the remainder of the tract have clay subsoil horizons that are blocky with respect to structure. Depth to ground water and restrictive horizons is greater than thirty-six inches. Depth to saprolite is approximately thirty-four to thirty-six inches. Slopes range to approximately fifteen percent.

The soils described in the previous paragraph appear to be somewhat shallow for a conventional septic tank system; however, additional borings would need to be made. These soils appear to be dominantly acceptable for either a shallow conventional system or a low pressure system. Providing the depth to saprolite is greater than thirty-six inches, a conventional system could possibly be used. Please note that this report does not express or imply individual lot or site approval for septic tank system installation. A soils investigation of a specific area for septic tank system installation would be necessary.

Please contact me if there are any questions with regard to this report.

Sincerely,

William R. Marlin

William R. Marlin, Soil Scientist
On Premises Waste Disposal & Water Supply

WRM/ir

Enclosure

File 5559A

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

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 5559A

TC: /

☑ PC ☐ REPT

JOB LOCATION

① ADDRESS: Lot #3 Dori Drive Huntersville, NC 28078

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

⑤ PARCEL REFERENCE: BOOK NO.: 021 PAGE NO.: 041 PARCEL NO.: 10

⑥ DEED REFERENCE: BOOK NO.: 5042 PAGE NO.: 598

OWNER

⑦ NAME: Patricia (FIRST) Boovy (MIDDLE) Mayes (LAST)

⑧ MAILING ADDRESS: 12305 Mayes Road

⑨ CITY: Huntersville ⑩ STATE: NC ⑪ ZIP: 28078

⑫ PHONE: (WORK) 664-7613 (HOME) 896-8601

⑬ Accurately diagram and dimension lot.



Pre-preliminary
3ac

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: Patricia B Mayes

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

Date: 3-29-89

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 3/29/89

Name/Company Patti Mayes

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Soil - pre-preliminary (26C)
5559A

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

MAR 29 1989

Rec # 1,02
11453.

Fee: $ 45.00

_____ _____