

20537 DEEP COVE CT

00149186

8/14/08

marliwr

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

Address not on screen

Paid in full on 6/29/98 W/chk # 7035

FEE: Pd **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: 6-28-98 PERMIT NO: 17958
PARCEL NO: ~~00-154-13~~
JOB LOCATION ADDRESS: 20537 DEEP COVE COURT 001-491-86
PROPERTY OWNER: OWEN SETZER
BUILDING CONTRACTOR:
SUBDIVISION NAME:
AUTHORIZATION ISSUED BY: Kelly Randall DATE: 6-29-98
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 17958, 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: _____

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.

X Owen R. Setzer 7/1/98
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

Permit Number: 17958

CONDITIONS OF IMPROVEMENT PERMIT

Tax Number: 001-131-13

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

.3 Long-term acceptance rate	360 Max gallons/day wastewater flow	1200 Absorption Area (sq ft)	9 Trench spacing (min..on centers)
cmod Serviced by private well	1500 Gallon septic tank	400 Total trench length (ft)	30" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
3 Bedrooms in residence	___ Gallon pump tank	12 Depth of stone	

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

Site modifications required:

Additional Conditions:

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

1200 Absorption Area (Sq ft) 400 Total Trench Length (Ft)	12" Depth of Stone Trench	9 Trench spacing (min. on centers)	30" 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.

[signature] 6-29-98
DEHNR Authorized Agent Date

X [signature] 7/1/98
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

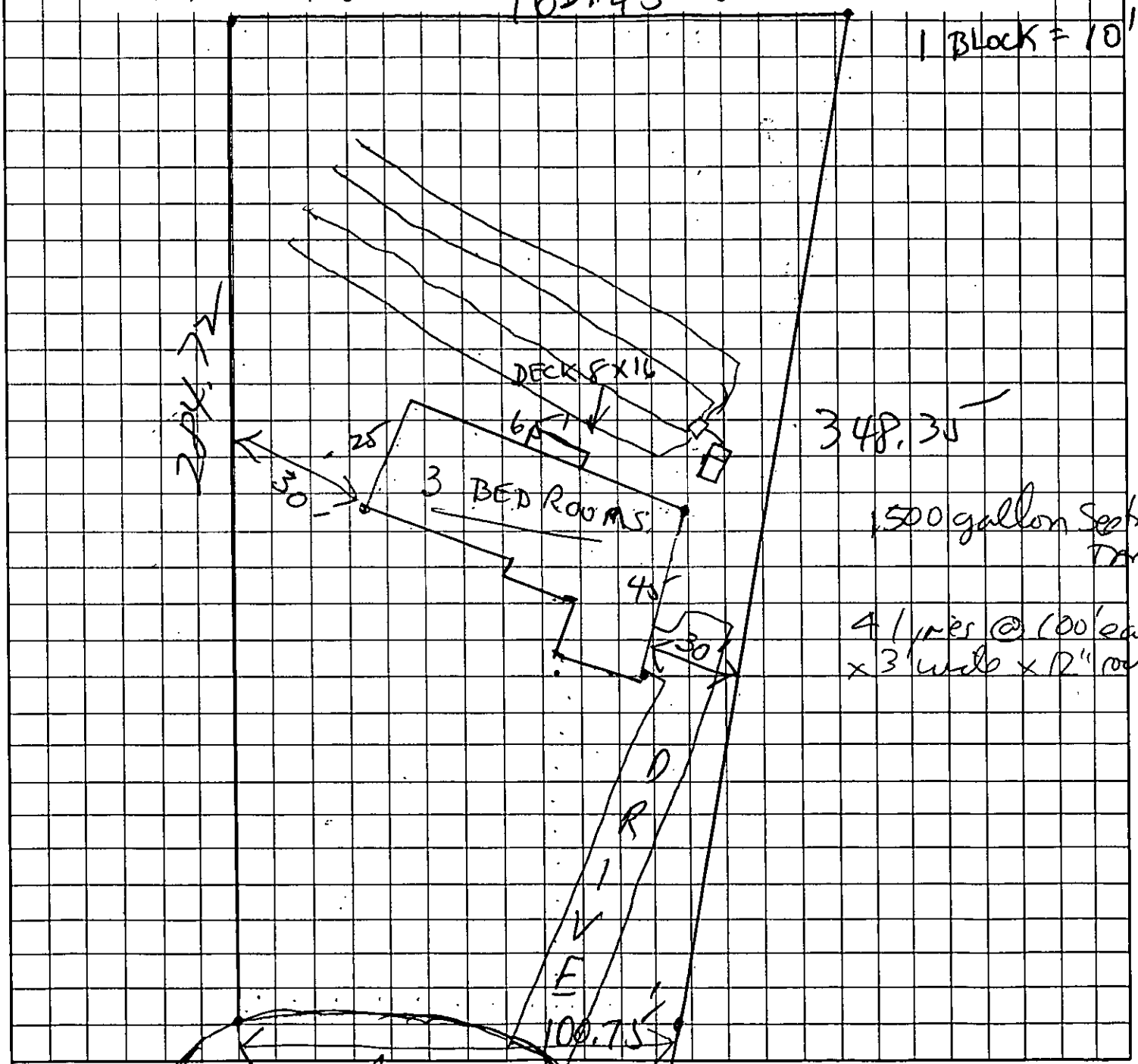
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

COPY

FILE: 17958

TC: 001-131-13

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 Owen R Stokes

DATE 6/11/98

APPROVAL DATE _____

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

FEE: 100.00 OK #12567
DATE: 6-11-98 dlw

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

.95
[ ] 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

GOP

FILE #: 17958

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: ~~00113~~ 001-491-86

STREET ADDRESS: 20537 DEEP COVE COURT

SUBDIVISION OR MOBILE HOME PARK NAME: DEEP COVE, CORNELIUS NC

LOT NUMBER: # 11

TOWNSHIP (CHECK ONE):

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

CLOSING DATE _____

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: 1513

NUMBER OF BEDROOMS: | 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: PHOTOGRAPHY

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: SETZER (LAST) OWEN (FIRST) R (MI)
ADDRESS: 8300K STREAM VIEW DR.
CITY: HUNTERSVILLE STATE: NC ZIP: 28658
DAYTIME PHONE: (704) 895-3610

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) (FIRST) (MI)
DAYTIME PHONE: ( ) -

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 1/19/98

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

SIGNED: Owen R Setzer DATE: 6/11/98

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

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

400 PD. 200 CK# 7058 #1689-38 VLC

Sheet 1
PROPERTY ID #: 001-131-13
Lot # : 11
File # : 17958

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Owen A. Selzer APPLICANT: Same DATE EVALUATED: 6-22-96
ADDRESS: 9300 N Streamview Dr., Hunterwood, N.C. PROPERTY SIZE: .95
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949): 360 gpd PROPERTY RECORDED:
LOCATION OF SITE: 20537 Deep Cove Ct.
WATER SUPPLY: ☐ Private ☑ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	5/10-5 5-13-96 .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
1	LS	0-3"	gr/sc/	Fr/SEXP/SS/SP	725" TO soil wetness	25"	N/A	None	US IV
		3-23"	SBK/ SC	Fi/SEXP/SIP					
		23-25"	SBK/SCl						
2	LS	0-2"	gr/scl	Fr/SEXP/SS/SP	748" To soil wetness	48"	N/A	None	PS .39/F2 IV
		2-33"	SBK/C	Fi/SEXP/SIP					
		33-48"	SBK/SCl	Fr/SEXP/SS/SP					
3	LS	0-4"	gr/scl	Fr/SEXP/SS/SP	744" To soil wetness	44"	N/A	None	PS .39/F2 IV
		4-40"	SBK/C	Fi/SEXP/SIP					
		40-44"	SBK/ SCl	Fr/SEXP/SS/SP					
4	LS	0-35"	gr/ sc/	Fr/SEXP/SS/SP	748" TO soil wetness	48"	N/A	None	PS .49/F2 IV
		35-48"	SBK/ SC	Fi/SEXP/SIP					
5	LS	0-5"	gr/scl	Fr/SEXP/SS/SP	748" TO soil wetness	48"	N/A	None	PS .39/F2 IV
		5-46"	SBK/C	Fi/SEXP/SIP					

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

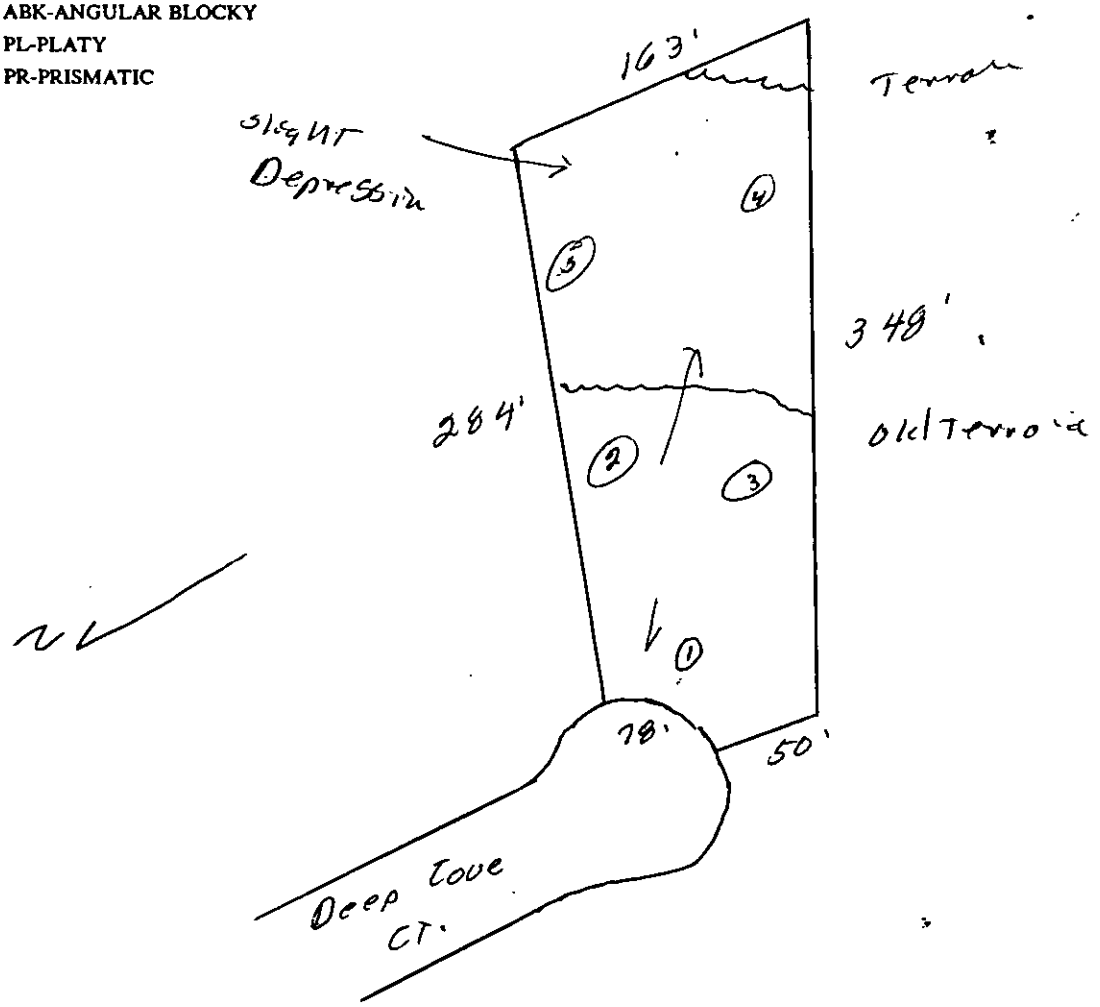
OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): Provisionally Suitable
EVALUATED BY: W. A. Marlin 6-22-96.
OTHER(S) PRESENT: LHS Owen Selzer

FILE # 17958

COMMENTS Lot not 100% Repair

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

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



Kelly:

attached is copy of plat for Deep Cove Sub. We are on Lot 11 (Sec 13) Circled. Thanks.

Owen Setze

Mech Utility — 399-2551

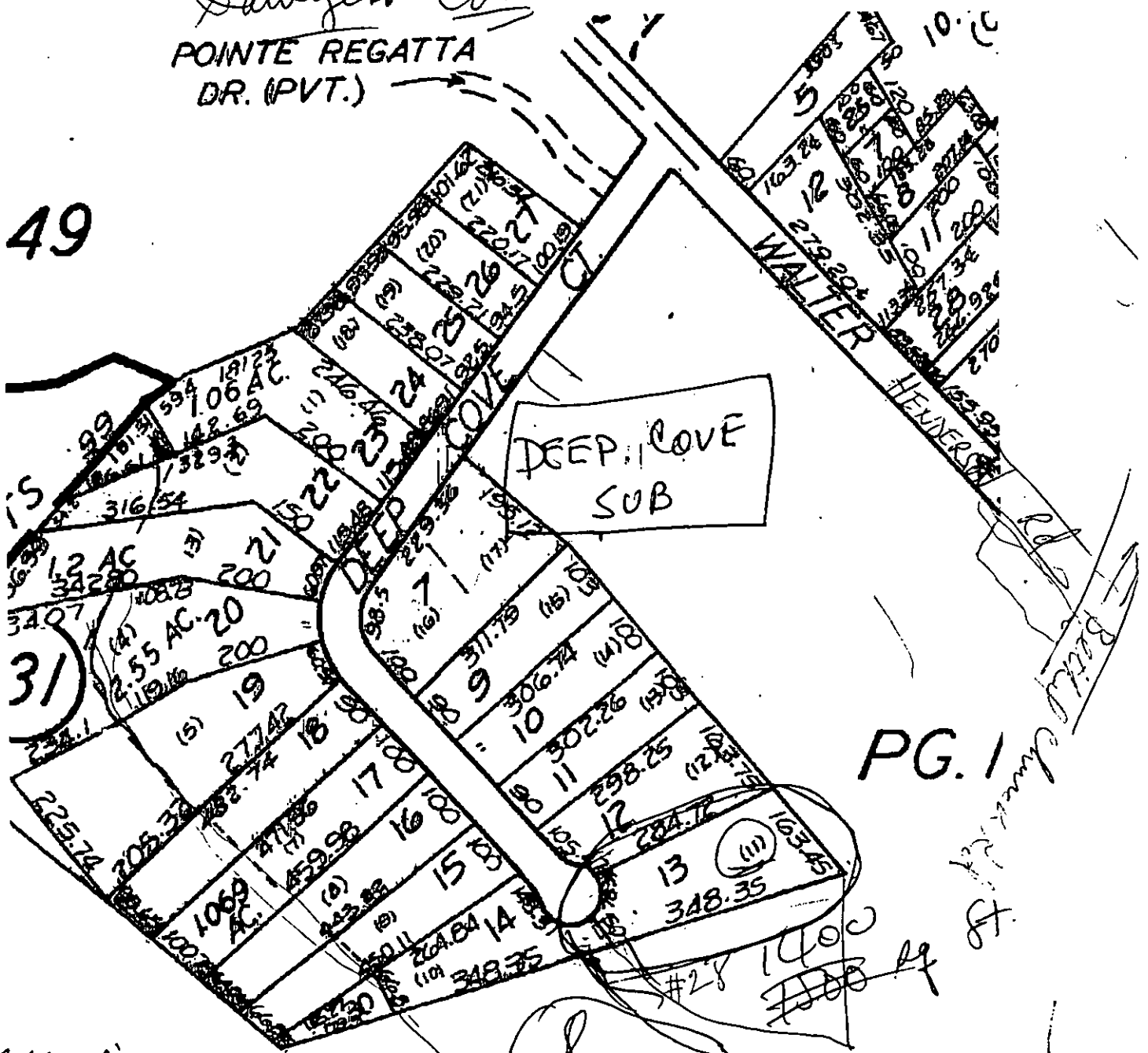
Buddy Ballard 892-1295

Corrales

Town I.D.

Sawyers Cove

POINTE REGATTA DR. (PVT.)



Sawyers Cove

Closing

Jan. 19 - Monday

- Set back
- water - sewer
- pole eval
- survey

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

Sheet ___
PROPERTY ID #: 001-131-13
Lot # : 11
File # : 17958

SOIL/SITE EVALUATION #1
for ON-SITE WASTEWATER SYSTEM

OWNER: Owen R. Setzer APPLICANT: Same
ADDRESS: 9300 N Stevensview Dr., Hendersonville, N.C. DATE EVALUATED: 6-22-96
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949): 360 gpd PROPERTY SIZE: .95
LOCATION OF SITE: 2053 Deep Cove Ct. PROPERTY RECORDED: ___
WATER SUPPLY: ☐ Private ☑ Public ☐ Well ☐ Spring ☐ Other ___
EVALUATION METHOD: ☑ Auger 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	0-3"	gr/scl	Fr/SEXP/SS/SP	25" To soil wetness	25"	N/A	None	US IV
		3-23"	SBK/ SC	F:/SEXP/SS/P					
		23-25"	SBK/SCl						
2	LS	0-2"	gr/scl	F:/SEXP/SS/SP	48" To soil wetness	48"	N/A	None	PS .39/F2 IV
		2-33"	SBK/C	F:/SEXP/SP					
		33-48"	SBM/scl	Fr/SEXP/SS/SP					
3	LS	0-4"	gr/scl	Fr/SEXP/SS/SP	44" To soil wetness	44"	N/A	None	PS .39/F2 IV
		4-40"	SBM/C	F:/SEXP/SP					
		40-44"	SBM/ scl	Fr/SEXP/SS/SP					
4	LS	0-35"	gr/ scl	Fr/SEXP SS/SP	48" To soil wetness	48"	N/A	None	PS .49/F2 IV
		35-48"	SBM/ SC	F:/SEXP/SP					
5	LS	0-5"	gr/scl	Fr/SEXP/SS/SP	48" To soil wetness	48"	N/A	None	PS .39/F2 IV
		5-46"	SBK/C	F:/SEXP/SP					

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

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): Provisionally suitable
EVALUATED BY: A.R. Medlin 6-22-96
OTHER(S) PRESENT: LSS Owen Setzer

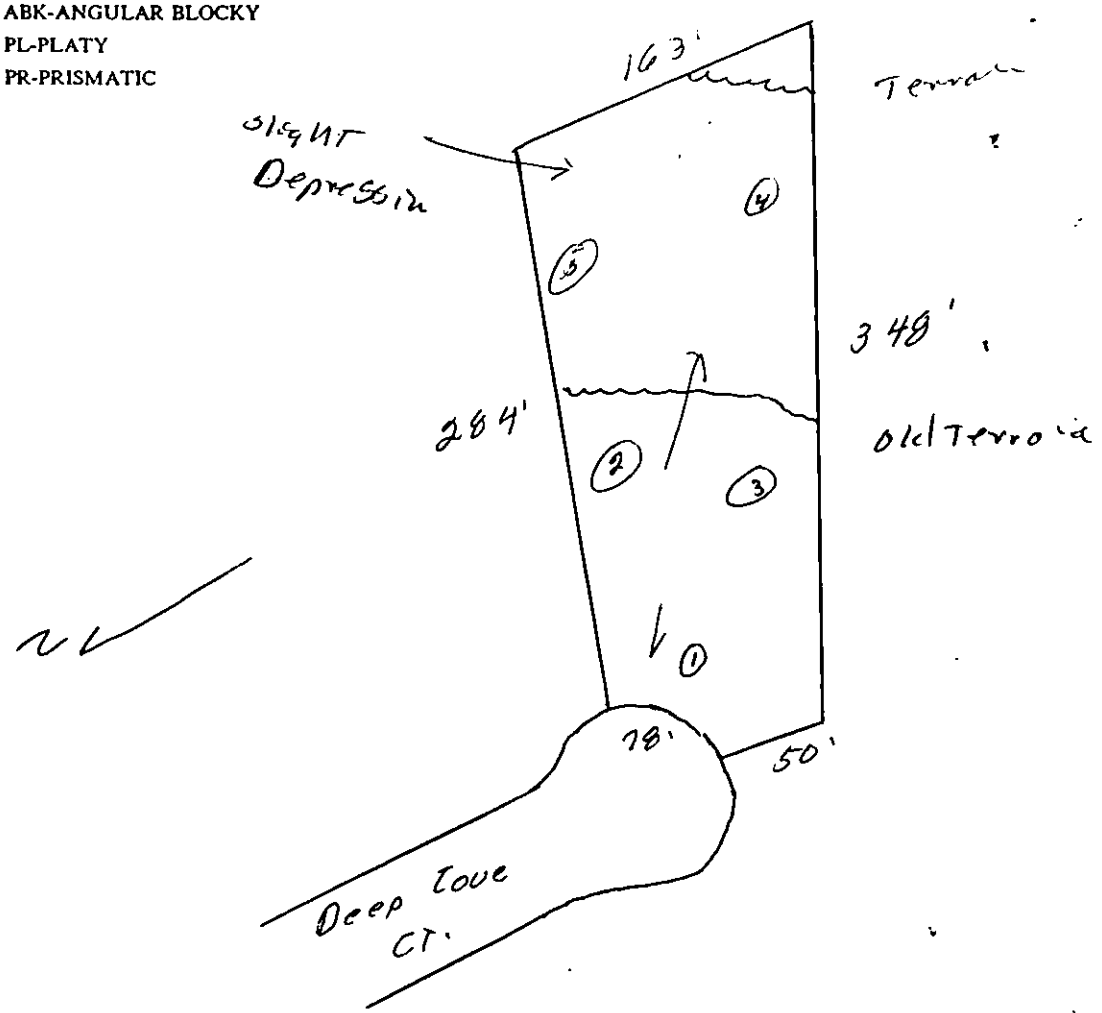
FILE # 17958

COMMENTS Lot not 100% Repair

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR
R-RIDGE	I	S-SAND	1.2-0.8
S-SHOULDER SLOPE		LS-LOAMY SAND	
L-LINEAR SLOPE			
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6
N-NOSE SLOPE		L-LOAM	
H-HEAD SLOPE			
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM	
T-TERRACE		CL-CLAY LOAM	
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM	
	IV	SC-SANDY CLAY	0.4-0.1
		SIC-SILTY CLAY	
		O-ORGANIC	

CONSISTENCE	
MOIST	WET
VFR-VERY FRIABLE	NS-NON-STICKY
FR-FRIABLE	SS-SLIGHTLYSTICKY
FI-FIRM	S-STICKY
VFI-VERY FIRM	VS-VERY STICKY
EFI-EXTREMELY FIRM	NP-NON-PLASTIC
	SP-SLIGHTLYSTICKY
	P-PLASTIC
	VP-VERY PLASTIC

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



001-132-02
0.345 AC.(CA) A/W
0.754 AC.(CA) U/W
1.099 AC.(CA) TOTAL
ALL DUKE POWER INCLUDED IN PARCEL 001-271-14.
PG. 44
001-132-29
10.264 AC.(CA) A/W
0.66 AC.(CA) U/W
10.924 AC.(CA) TOTAL
RIVERCHASE RD
POINTE REGATTA DR. (PVT.)
PG. 49
CORNELIUS TOWN LIMITS
DEEP COVE CT.
WALTER HENDERSON RD.
PG. 12
BLOCK 1
DUKE POWER CO.
10.264AC (CA)
CORNELIUS
1.099AC
5.52AC (CA)
16
132
131
133
134
NORMAN LINE
COLONY POINT LN
COLONY LINE
TOWN LIMITS
BETHEL CHURCH
13.6AC
5.25 AC
3.56 AC.
1.23 AC.
TAX LINE MAP
MECKLENBURG C
REVISED 6-24-97
FOR TAX PURPOSES ONLY

COPY

January 12, 1998

Mr. Owen R. Setzer
1029 Sprucewood Lane
Newton, North Carolina 28658

Subject: Soil Evaluation for Ground Absorption Sewage Treatment and Disposal System
Deep Cove Court
Mecklenburg County, North Carolina

Dear Mr. Setzer:

On January 10, 1998, a soil evaluation was conducted for a lot you plan to purchase off Deep Cove Court in Mecklenburg County. The evaluation was conducted to determine the suitability of the soil for a ground absorption sewage treatment and disposal system. The soil is provisionally suitable for a ground absorption sewage treatment and disposal system.

The predominate soil encountered was a Cecil soil series. The soil was a sandy clay texture which would be classified as a Class IV soil under the North Carolina rules and regulations for sewage treatment and disposal systems. The hydraulic loading rate for this Class IV soil should be 0.4 gpd/ft^2. Please contact the Mecklenburg County Environmental Health Department at (704) 336-5102 to obtain an improvement permit.

If you have any questions, please call me at (704) 895-1608.

Sincerely,

Britt L. Setzer
NC Licensed Soil Scientist
License Number 1104

BLS

FEE: 100 OK #1567
DATE: 6-11-98 dlw

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 #: 17958

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 0011313

STREET ADDRESS: 20537 DEEP COVE COURT

SUBDIVISION OR MOBILE HOME PARK NAME: DEEP COVE, CORNELIUS NC

LOT NUMBER: # 11

TYPE OF BUILDING (CHECK ONE):

__ SINGLE MOBILE HOME(S) (S)
__ DOUBLE WIDE (D)
✓ 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
__ 6 HUNTERSVILLE
__ 7 MINT HILL

HEATED SQUARE FOOTAGE: 1513

NUMBER OF BEDROOMS:

NUMBER OF OCCUPANTS:

CLOSING DATE _____

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: PHOTOGRAPHY

WATER SUPPLY (CHECK ONE):

__ COMMUNITY (C)
✓ MUNICIPAL (M)
__ PRIVATE WELL (P)
__ SHARED WELL (S)
__ OTHER 'SPRINGS' (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

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

PROPERTY OWNER:

NAME: SETZER (LAST) OWEN (FIRST) R (MI)

ADDRESS: 8300K STREAM VIEW DR.

CITY: HUNTERSVILLE STATE: NC ZIP: 28658

DAYTIME PHONE: (✓) 704 895-3610

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) -

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 11/19/98

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

SIGNED: Owen R Setzer DATE: 6/11/98

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102

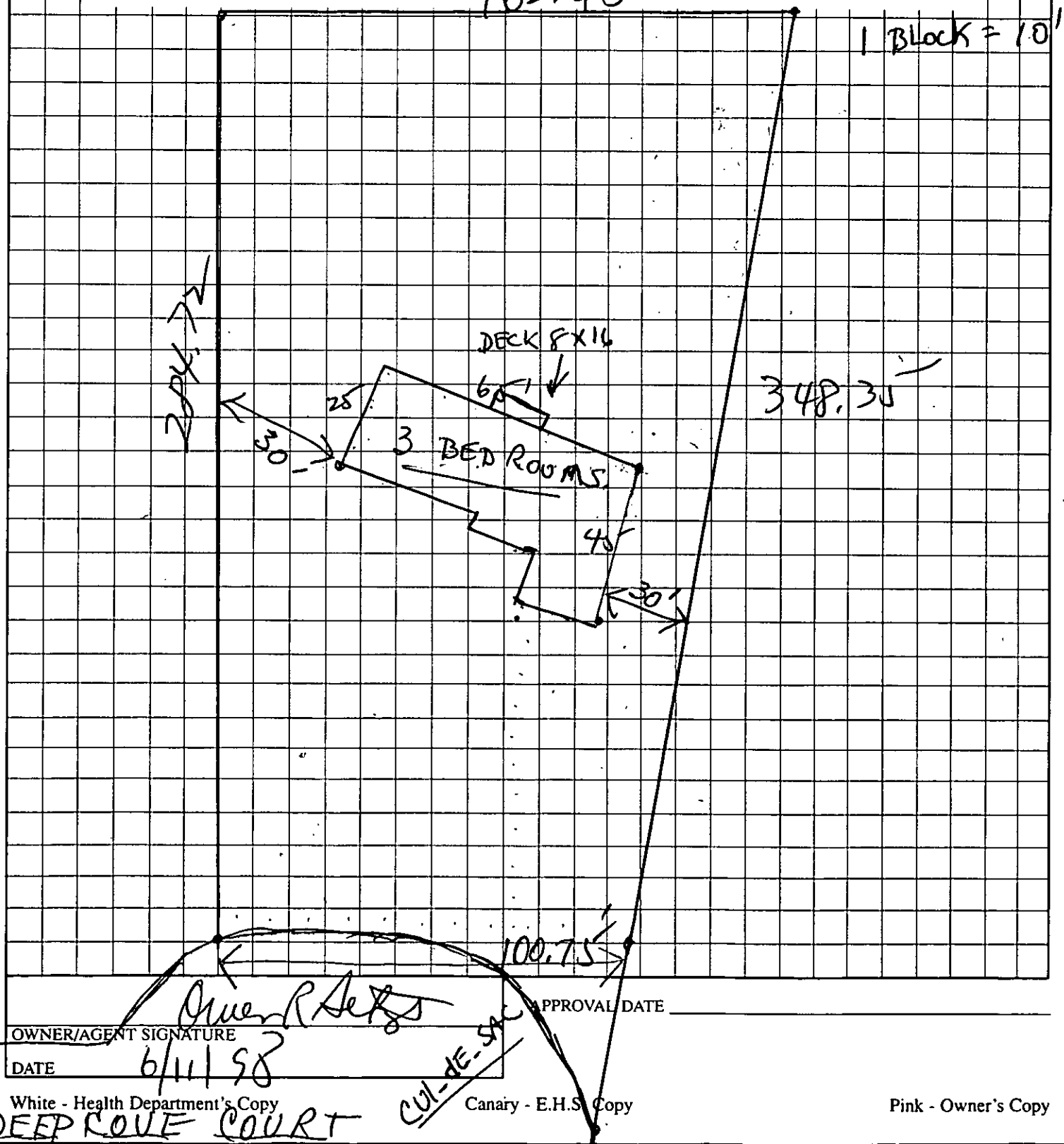
PROPOSED PLOT PLAN

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

FILE: 17958

TC: 001-131-13

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 Owen R Stetts

DATE 6/11/98

APPROVAL DATE _____

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

DEEP COVE COURT

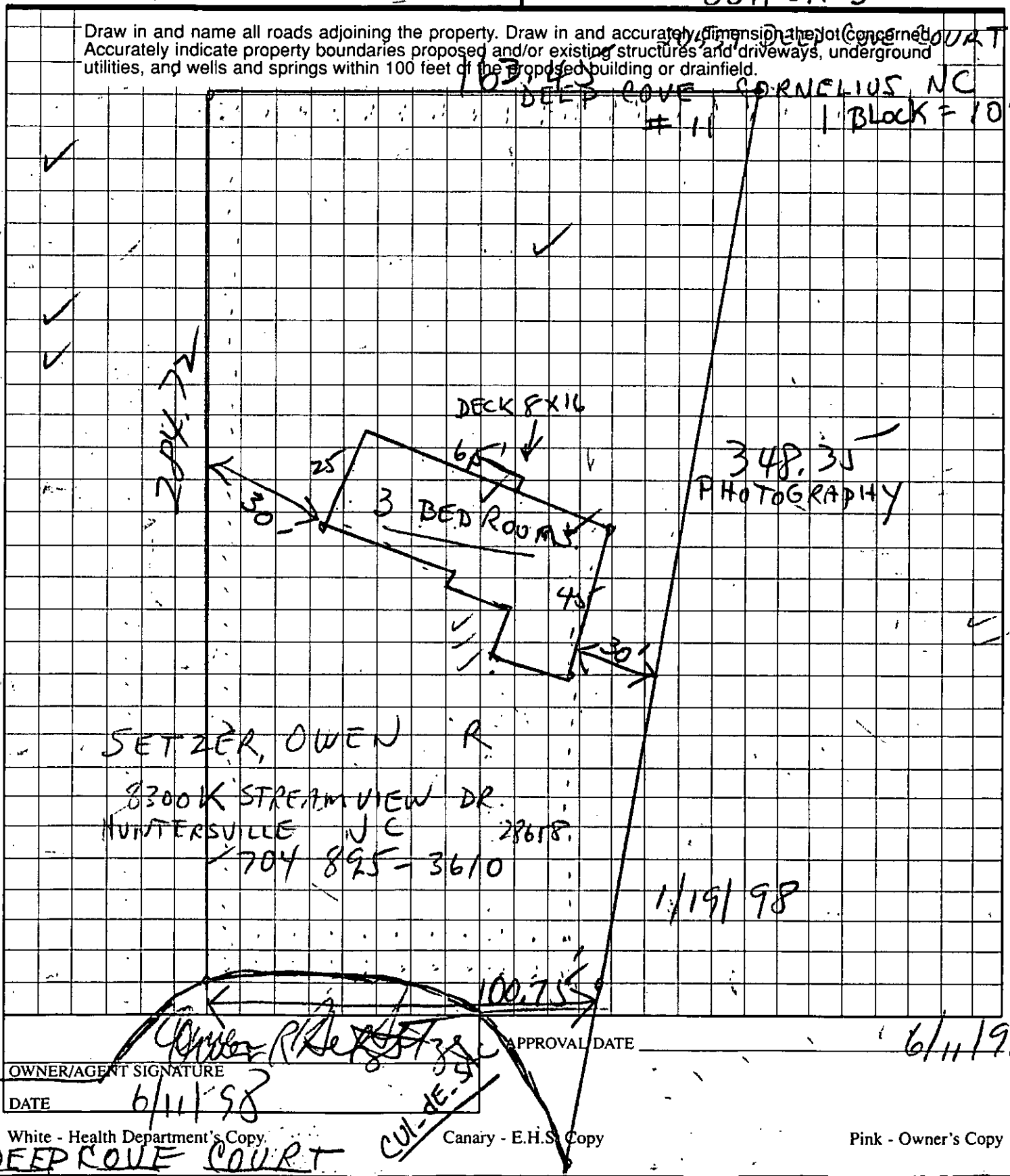
PROPOSED PLOT PLAN

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

FILE: 17958

TC: 001-131-13
0011311 3

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

DATE 6/11/98

APPROVAL DATE 6/11/98

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

DEEP COVE COURT

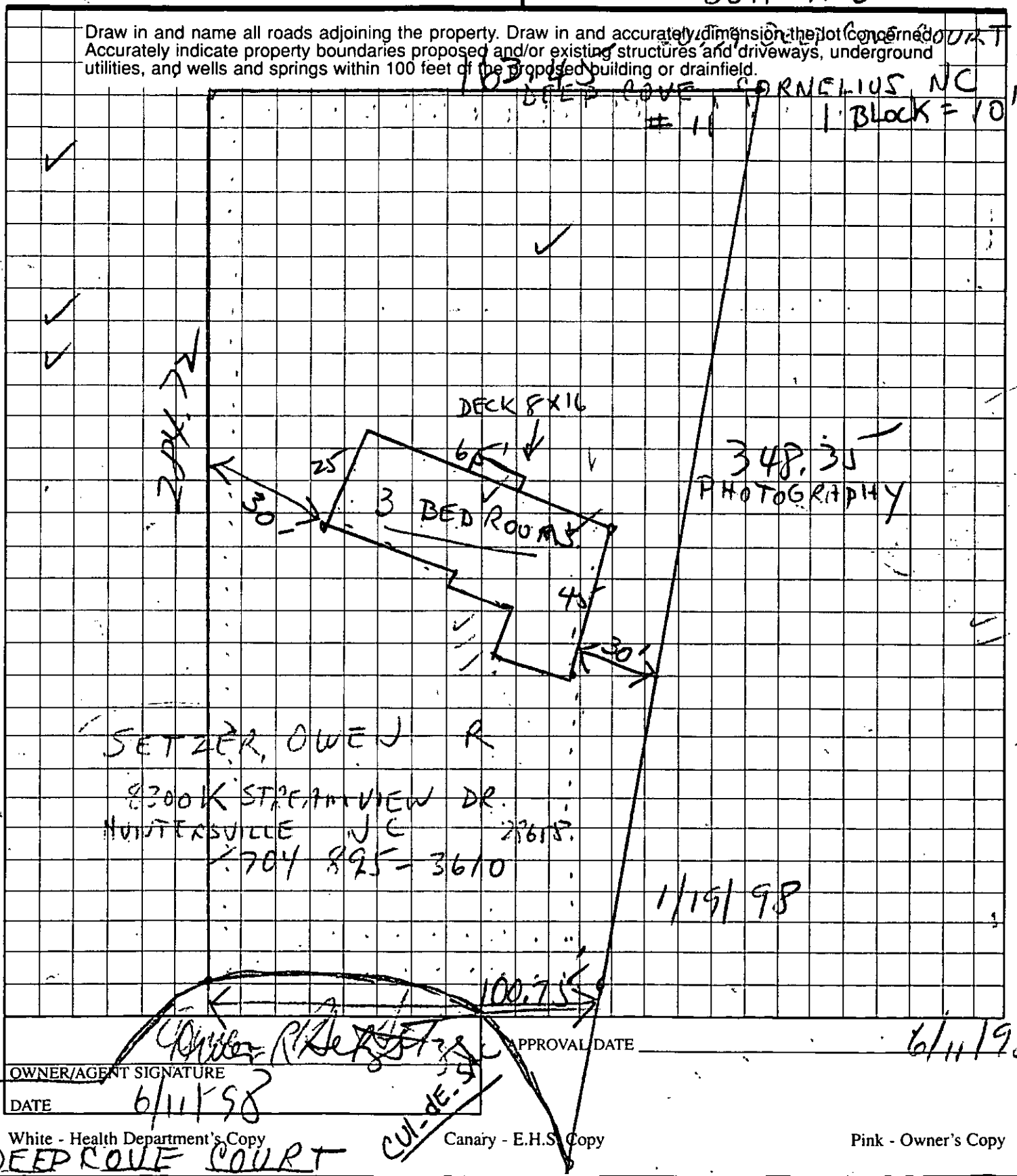
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OWNER/AGENT SIGNATURE Owen R Setzer

DATE 6/11/98

APPROVAL DATE 6/11/98

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DEEP COVE COURT