

9600 RICH HATCHET RD

00927308

12/17/07

duponbj

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

TW

400 ☒

PH 25.00
CK# 124 AB
2-19-92

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

#8061A /171B

PC ☒ CRT ☐

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

(704)336-5102

PERSON FILING APPLICATION:

NAME: BARRINGER (last) JOHN (first) JUNIOR (mi)

ADDRESS: 9709-G Trinity RD. PHONE: (704) 394-1237

CITY: Charlotte STATE: N.C. ZIPCODE: 28216

Date: 2-19-92

PROPERTY OWNER:

NAME: Sherrill (last) James (first) (mi)

ADDRESS: 9600 Rich-Hatchet RD PHONE: (704) 892-3297

CITY: Cornelius STATE: N.C. ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 009-123-05

STREET ADDRESS: 9600 Rich-Hatchet Rd

ZONING:

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

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: LOT SIZE (in acres):

TYPE APPLICATION (check one):

☐ SOIL TEST - INDIVIDUAL LOT (D)
☐ 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) ☒ HOUSE (H) ☐ MULTIPLE FAMILY (U)
☐ DOUBLE WIDE (D) ☐ MODULAR HOME (M) ☐ OTHER _____ (O)

NUMBER BEDROOMS: 6 NUMBER OCCUPANTS: 1

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) ☐ Shared Well (S)
☐ Municipal (M) ☐ Other 'spring' (O)
☒ Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
☐ Swimming Pool ☐ Jacuzzi ☐ Stable/Barn ☐ Workshop ☐ None
☐ Garage ☐ Storage Building ☐ Deck/Patio ☐ Bedrooms ☐ Other DINNING AREA, bath AND MAKING Kitchen Office

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: John Junior Barringer Date: 2-19-92

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.

... use existing System, plumbing

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

Tim Whittaker 2/27/92
Environmentalist Date

Director or Authorized Section Head 2-27-92 Date

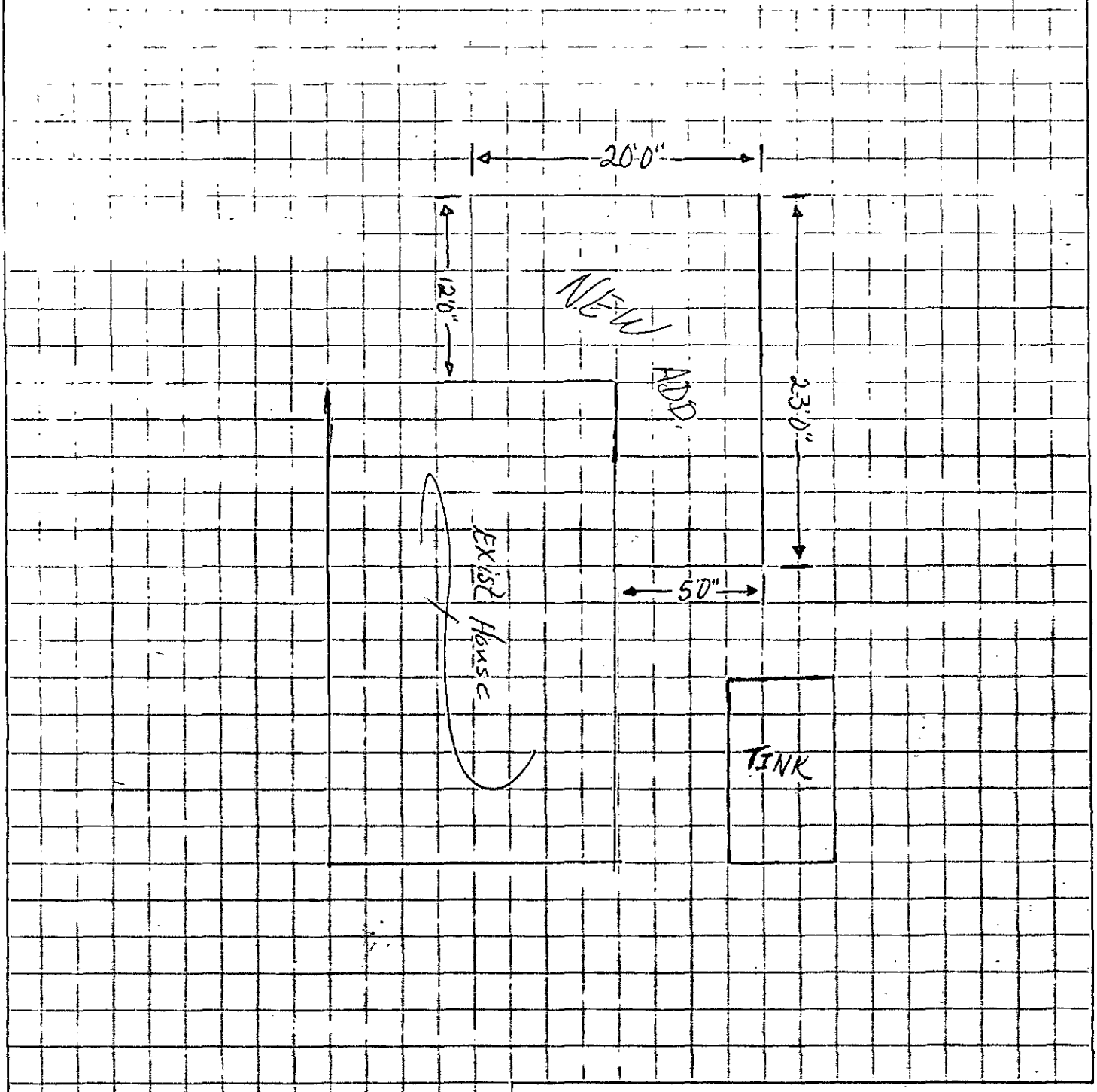
WWATER : 122791

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

FILE: 8061A / 171B

TC: 009-123-05

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.



Signed: John Bannigan Jr.

Date: 2-19-92

Two
#8061A/171B

CBT LT

UPDATE COMPLETE

Applicant BARRINGER JOHN J Appl.Date 02/19/92 Updated 02/20/92
Mail Addr 9709-G TRINITY ROAD Phone 704 394-1237
City CHARLOTTE State NC Zipcode 28216
Prop Ownr SHERRILL JAMES
Mail Addr 9600 RICH-HATCHET ROAD Phone 704 892-3297
City CORNELIUS State NC Zipcode 28031 Township 0
Tax Map No. 00912305 Road 9600 RICH-HATCHET ROAD Zoning
Sub/Mobil Sec Lot No. Lot Size
Type App X Site Y or Tract Type Bldg H System Classif NOT REQUIRED
Resident. Specif: No. Bedrooms 06 No. Occupants 1 Undgrnd. Stor. (Y/N)
Commercial/Industrial/Other Specifications:
Type No. Empl. No. Empl. per Shift
Industrial or Mfg. Wastes (Y/N) Underground Stor. Tank (Y/N)
Prop. Water Sup. P Proposed Sewage I Construct. Status P Sites
Planned Future Additions (Y/N) Fee 0000.00 EHS Assigned 17030
Directions: ADDING DINING AREA, BATH, AND ENLARGING KITCHEN

Date Appl. Recd. 02/19/92 Date Insp. Insp. Status
Date Letr. Sent Type Letr. Date Eval. Eval. Status
Date Perm. Date Cert.Iss. Disp.Code Followup
Denial Codes:
Repaired (Y/N) Rep. Date Perm. No. 00171B Operat. Permit (Y/N)
2/20/92 11:44:24
01-03 SA MW KS IM II S1 S1037498 KB

NA 4WD 2/24, 4:50

use existing system
Tank located, drainfield located
addition staked & meets required distances as
inspected. Proposal approved.

use existing system. plumbing 2/25/92
Tim Whitaker

TW

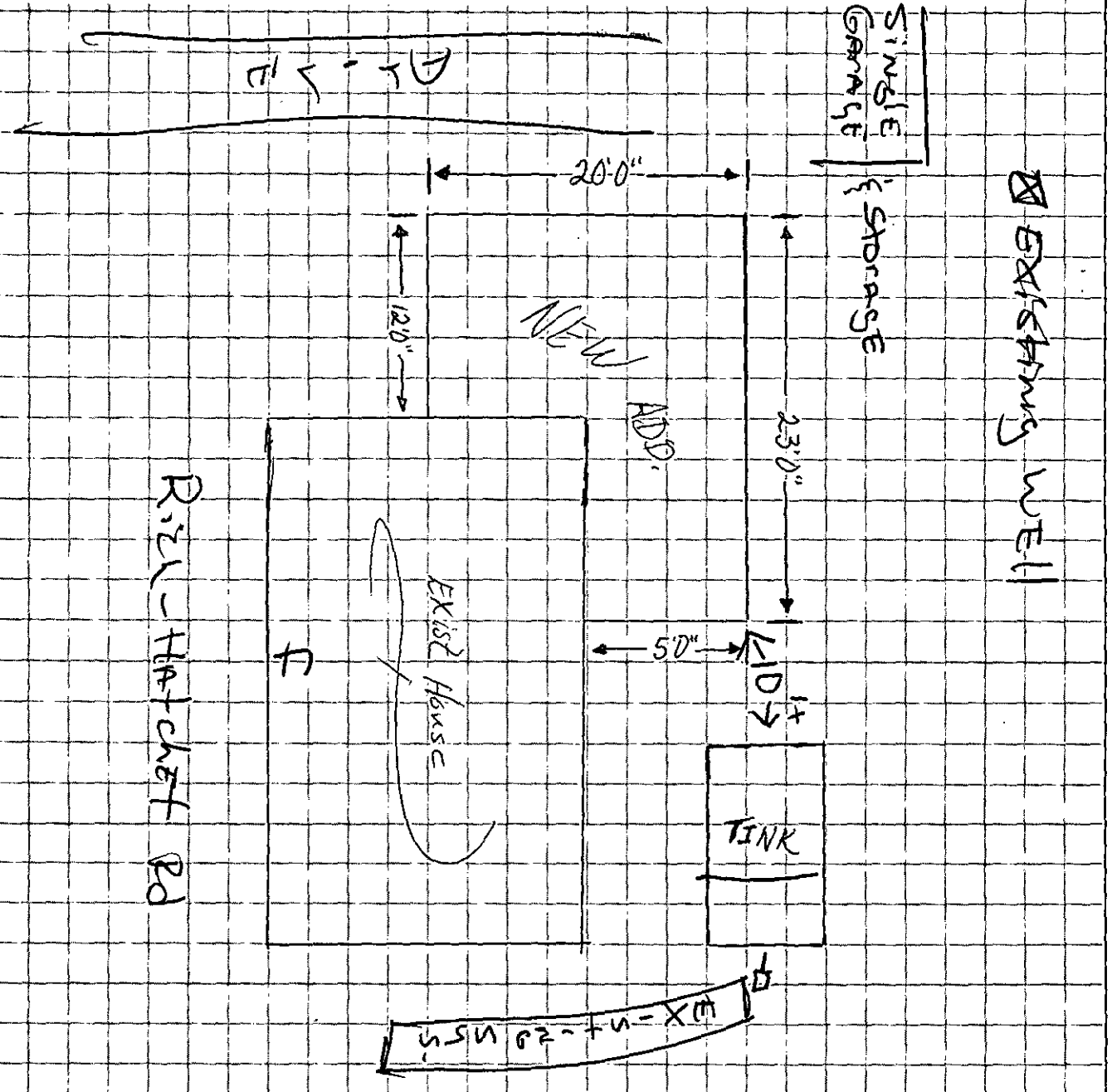
PROPOSED PLOT PLAN

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

FILE: 8061A/ 171B

TC: 009-123-05

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Signed: John Baumgarten Jr.

Date: 2-19-92

Per Sara,

Call her sister
find out if she is
Competent or
Needs a guardian (Alheizmers)

Call DSS & Ask Intake
about guardianship -

We can't take into Court
if she isn't Competent

Esp. tells that Complaint
says no problem -

Statesville Rd to 73 ⓡ ⓡ Rich Hatchet

U

Complaint Number 00018719 1 Date Entered 05/06/97 Date Updated 05/13/97
Type Complaint SIB Permit Type SEW

	Street Name	Number	Dir.	Zipcode
Location/Description	RICH HATCHET ROAD	9625 ~~9613~~		28078

Request By PRYOR HENRY County Office
Phone Number 892-1200
Address 9607 RICH HATCHET RD
City HUNTERSVILLE State NC Zipcode 28078
Directions:

Complaint:
SEPTIC TANK OVERFLOW INTO NEIGHBOR'S YARD NEAR THE WELL, CONCERNED ABT THE WATER (Fiscal #171B)

EHS Number 17046 Tax/Map Number 0092722~~4~~ 25 Census
Property Name RICH HATCHET ROAD
Owner Name PRYOR SADIE MAE
Owner Address 9625 RICH HATCHET ROAD
Owner City HUNTERSVILLE State NC Zipcode 28078
Owner Phone 000 000-0000
Date/Time 05/06/97 (HH MM) Create Work Order (Y/N) Y Log Only (Y/N) N
5/13/97 8:06:40
01-03 SA MW KS IM II S1 S1037498 KB'

5-13-97 Made a site visit to Henry Pryor's house, which is located just behind 9625 Rich Hatchet and observed sewage running from drainfield down the driveway. Sending a NOV.

6-16-97 Made visit and talked with Vertie Bost (Sadie Pryors sister) who lives in this house. She said that Ms. Pryor has Alzheimer's Disease and is not very cooperative. She also said that they hired Alfonzo Ford? to fix the problem and paid him $800.00. His repair is what is failing and work was done without a permit. I told her that I would send a ~~NOV to~~ illegal repair letter to Ms. Pryor hoping that she could use this to help recover some money from Mr. Ford. I also said that we still needed to repair or go to sewer. ~~She~~ Ms. Bost said that she would get C. Morrison to help her.

7-29-97 Made visit and advised Ms. Bost that legal action would be taken. She asked that I wait until the 4th of August and she would have C. Morrison meet me.

8-4-97 Met w/ C. Morrison on-site. Morrison advises going to sewer due to well and site limitations. I gave Ms. Bost CMUD assistance information.

8-9-97 Ms. Bost called and said that the house would be connected to municipal sewer. I asked that a copy of tap-on fee receipt or agreement form be sent or faxed to this office.

10-14-97 No further contact. Made a site visit. Ms. Bost says that her sister refuses to sign CMUD assistance forms. I visited Ms. ~~Set~~ Pryor at her sister's house (Ms. Jetton) to discuss options. Ms. Pryor emphatically states that she will not sign assistance forms which would leave her financially responsible for CMUD tap and she also states that she has no money for repairs. I thanked her for her time, got her phone number and told her that we may have to take legal action.

Margaret P. Jetton Residence - 892-1443 located at 9632 Rich Hatchet Rd
(Sadie Pryor's sister - she is living here)

1/1/98 Talked w/ Henry Pryor - Stated they are not having any problems from Mrs. Pryor's Septic System - Mr. Pryor stated he never called in about this and didn't know who did - but everything is OK and if it wasn't they would let us know.

2/11 Spoke with Sadie Pryor. She said her sister & family moved into her home at 9625 Rich Hatchet Rd after Mrs. Pryor moved across the street to her sisters - She (Mrs Bost) moved in w/o her permission & they are not paying her any rent. She has no money to fix system. I told her we would

have to take it to court to resolve the issue. She said that was fine, then maybe we could get her sister out & there wouldn't be a problem.

N. C. Department of Environment, Health, and Natural Resources/Division of Environmental Health

ON-SITE WASTEWATER VIOLATION NOTICE

Owner Sadie Mae Pryor

Mailing Address 9607 Rich Hatchet Rd., Huntersville 28078

Occupant _____

Location 9625 Rich Hatchet Rd., Huntersville 28078

☒ Residence ☐ Business ☐ Other tax parcel# 009-272-25

You are hereby notified that you are violating the Rules adopted by the North Carolina Commission for Health Services or Article 11 of Chapter 130A of the General Statutes of North Carolina by owning or controlling a residence, place of business, or place of public assembly which is not provided with an approved wastewater system. Your wastewater system is not in compliance; the following corrections must be made. Consult your Local Health Department for advice and required permits by calling telephone number 336-5568/336-5102.

☒ Install/Repair wastewater system. You must obtain an Improvement Permit from the local health department prior to repairing your system.

☐ Other Repairs (*specify*) _____

☐ Eliminate wastewater discharge and connect to an approved wastewater system.

☐ Perform Maintenance (*specify*) _____

☐ Pit Privy must be repaired/constructed.

If the wastewater violation is not brought into compliance by June 16, 1997, appropriate legal action will be taken.

Notice Issued May 15, 1997 (Date) Signed Larry B. Thompson, Jr., R.S. (Division of Environmental Health) Agent

Compliance _____ (Date) Signed _____ (Division of Environmental Health) Agent

DEHNR 1108 (Revised 10/96)
On-Site Wastewater Section (Review 10/98)

"FINAL NOTICE"

N. C. Department of Environment, Health, and Natural Resources/Division of Environmental Health

ON-SITE WASTEWATER VIOLATION NOTICE

6-2-97 mailing date LBT initials

Owner Sadie Mae Pryor

Mailing Address 9607 Rich Hatchet Rd., Huntersville 28078

Occupant _____

Location 9625 Rich Hatchet Rd., Huntersville 28078

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DEHNR 1108 (Revised 10/96)
On-Site Wastewater Section (Review 10/98)

Note: A criminal summons will be issued if violation is not brought into compliance by June 16, 1997. Please contact me as soon as possible.