

12/26/2007

duponbj

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

SUITE 211
700 N. TRYON ST.
CHARLOTTE, N.C. 28202.
(704) 336-5102

See amended report dated 2/11/97 by B. Marlin. (problem with property lines) R 1400

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

Sheet ___ of ___
PROPERTY ID #: ___
COUNTY: ___

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

#1 16823
231-042-17

OWNER: Ballenger R. Tarrymkam APPLICANT: ___
ADDRESS: 6515 Scaleby Ct. Fayetteville APPLICATION DATE: ___ DATE EVALUATED: ___
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949): 360gpd / PROPERTY SIZE: .68
LOCATION OF SITE: Spring St. PROPERTY RECORDED: ___
WATER SUPPLY: ☑ Private ☐ Public ☐ Well ☐ Spring ☐ Other ___
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	5-10% Slopes .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	PROFIL CLASS & LTA
1	LS	0-12"	gr/ls	Fr/SEXP/NS/NP	>43" To Chroma 2	43"	N/A	None	.39/F2 IV PS
		12-43"	SBK/sc	F:/SEXP/SP					
2	LS	0-13"	gr/ls	Fr/SEXP/NS/NP	>40" To Chroma 2	40"	N/A	None	.39/F2 IV PS
		13-40"	SBK/sc	F:/SEXP/SP					
3	LS	0-4"	gr/ls	Fr/SEXP/NS/NP	>36" 2 Chroma 2	36"	N/A	None	.39/F2 IV PS
		4-36"	SBK/sc	F:/SEXP/SP					
4	NS	0-4"	gr/ls	Fr/SEXP/NS/NP	>26" To Chroma 2	26"	N/A	None	US
		4-27"	SBK/sc	F:/SEXP/SP					

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

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): provisionally suitable
EVALUATED BY: W. B. Marlin 1-29-97
LSS

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

PROPERTY ID #: 4
COUNTY: 16823

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

231-042-17

OWNER: Ballenger A. Traynham APPLICANT: _____
ADDRESS: 515 Scarlet Oak Lane Mars APPLICATION DATE: _____ DATE EVALUATED: _____
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949): 360gpd PROPERTY SIZE: .66
LOCATION OF SITE: Spring St PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut amended Report
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	1940 LANDSCAPE POSITION/ SLOPE %	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 & LTA
1	LS	0-13"	gr/sl	Fr/SEXP/SS/SP	7 46" To Chroma 2	40"	N/A	None	PS .39/57 LL
		13-40"	SBK/sc	F:/SEXP/SS/P					
2	LS	0-7"	gr/sl	Fr/SEXP/SS/SP	7 46" To Chroma 2	46"	N/A	None	PS .39/M2 LL
		7-46"	SBK/sc	F:/SEXP/SS/P					
3	LS	0-9"	gr/sl	Fr/SEXP/SS/SP	7 36" To Chroma 2	36"	N/A	None	PS .39/M2 LL
		9-36"	SBK/sc	F:/SEXP/SS/P					
4	LS	0-6"	gr/sl	Fr/SEXP/SS/SP	2.5Y 6/1 @ 28"	30"	N/A	None	LS
		6-30"	SBK/sc	F:/SEXP/SS/P					

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): Provisionally Suitable
EVALUATED BY: W. A. Nadi 2-11-97
OTHER(S) PRESENT: LSS

OMMENTS:

LEGEND

use the following standard abbreviations

ANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR	LPP .1957 LTAR	MINERALOGY/ CONSISTENCE	STRUCTURE
C (Concave Slope) V (Convex Slope) (Drainage Way) S (Debris Slump) P (Flood Plain) S (Foot Slope) (Head Slope) (Linear Slope) (Nose Slope) (Ridge) (Shoulder Slope) (Terrace)	I	S (Sand) LS (Loamy Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive) SEXP (Slightly Expansive) EXP (Expansive)	G (Single Grain) M (Massive) CR (Crumb) GR (Granular) SBK (Subangular Blocky) ABK (Angular Blocky) PL (Platy) PR (Prismatic)
	II	SL (Sandy Loam) L (Loam)	0.8 - 0.6	0.4 - 0.3		
	III	SI (Silt) SICL (Silty Clay Loam) CL (Clay Loam) SCL (Sandy Clay Loam) SLC (Silt Loam Clay)	0.6 - 0.3	0.3 - 0.15		
	IV	SC (Sandy Clay) SIC (Silty Clay)	0.4 - 0.1	0.2 - 0.05		
		O (Organic)	None			

MOIST	WET
VFR (Very Friable)	NS (Non-sticky)
FR (Friable)	SS (Slightly Sticky)
FI (Firm)	S (Sticky)
VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
EFI (Extremely Firm)	NP (Non-plastic)
	SP (Slightly Plastic)
	P (Plastic)
	VP (Very Plastic)

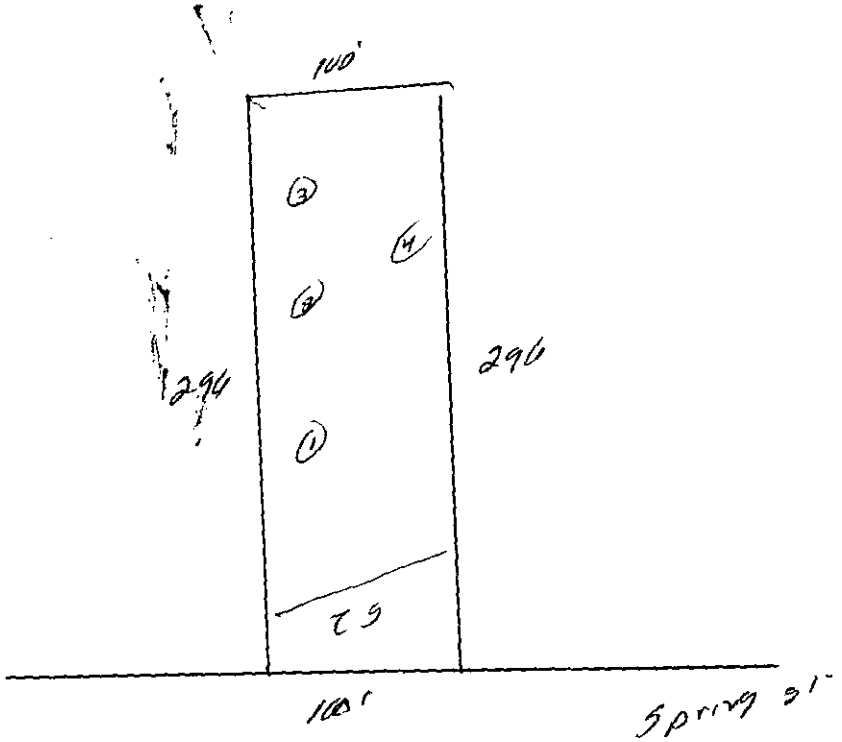
OTES

ORIZON DEPTH	In inches below natural soil surface
EPTH OF FILL	In inches from land surface
ESTRICTIVE HORIZON	Thickness and depth from land surface
PROLITE	S(suitable) or U(unsuitable)
OIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
LASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

valuation of saprolite shall be by pits.
ong-term Acceptance Rate (LTAR): gal/day/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).

1692B



FEE: 100.00
DATE: 12/31/96
CK.# 3404

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

L-M

[ ] 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 #: 6828

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 231-042-17

STREET ADDRESS: L42 MB-837 Spring St.

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: L42 MB-837 Legal Desc.

TYPE OF BUILDING (CHECK ONE):

__ SINGLE MOBILE HOME(S)
__ DOUBLE WIDE (D)
X 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: 2332

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 2

CLOSING DATE on or before 1-30-97

FOUNDATION FOR RESIDENCE:

✓ WITHOUT BASEMENT
__ ON SLAB
✓ CRAWL SPACE
__ WITH BASEMENT /PLUMBING
__ WITH BASEMENT /NO PLUMBING

N-A

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: __ YES __ NO TYPE: N-A

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

unknown

PROPERTY OWNER:

NAME: Traynham, Ballenger R
(LAST) (FIRST) (MI)

ADDRESS: 6515 Scarlett Oak Ln.

CITY: Charlotte STATE: NC ZIP: 28226

DAYTIME PHONE: 704 - 365-1881

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: Treat, Sharrell S (Broker) (541-0600)
(LAST) (FIRST) (MI)

DAYTIME PHONE: (H) (OP) Scott Smith 846-5646

Power of Attorney

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? To me in 1995 Co Buyer

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: Ballenger R Traynham DATE: 12-27-96

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

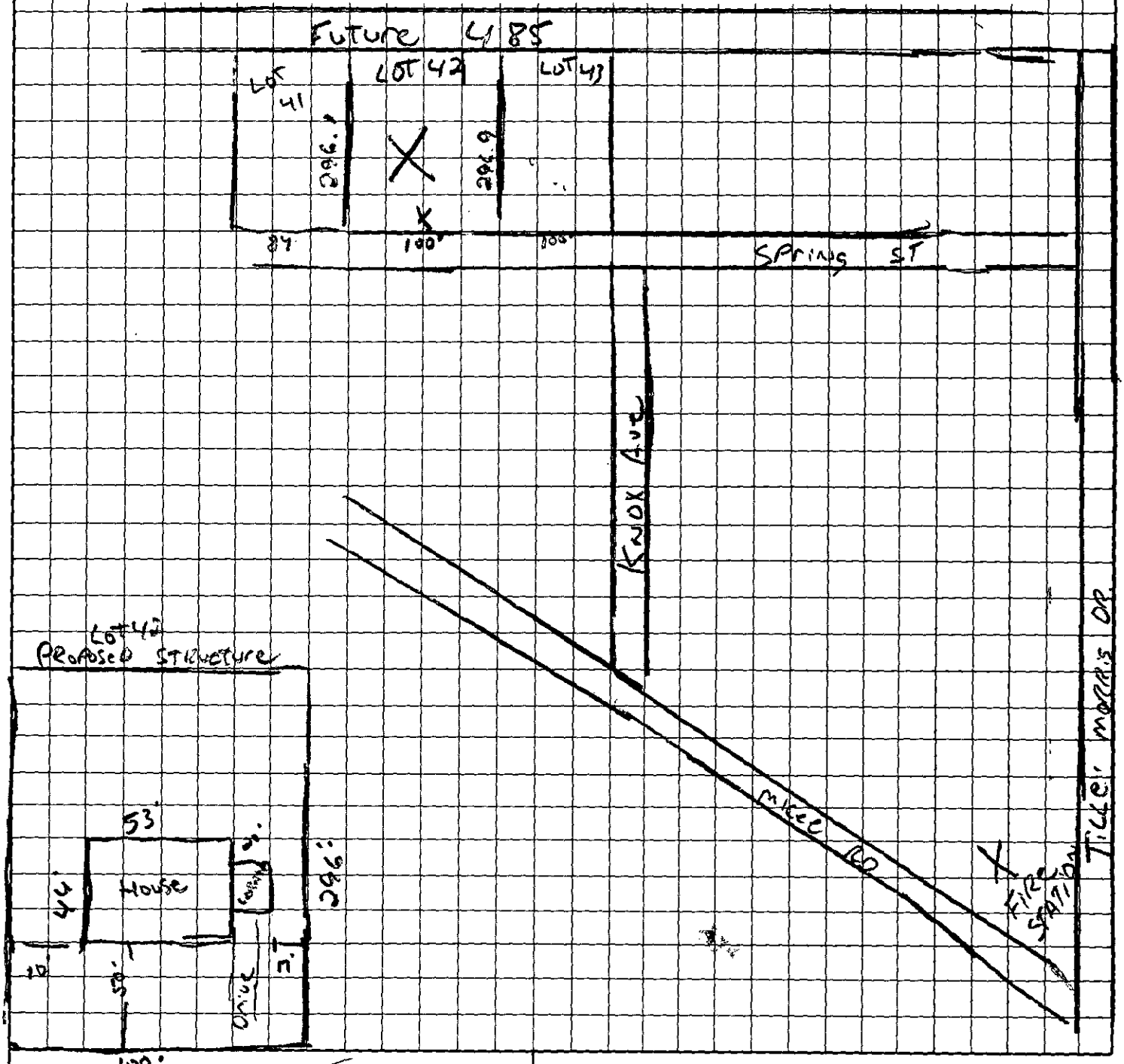
PROPOSED PLOT PLAN

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

FILE: 1682B

TC: 231-042-17

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.



Ballington R. Thompson
OWNER/AGENT SIGNATURE

DATE 12-29-96

APPROVAL DATE _____

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

1182B

TAX PARCEL INFORMATION

PARCEL # 231-042-17 001 ADDRESS SPRING ST
OWNERS NAME TRAYHAM MAXINE B
MAILING ADDR 6515 SCARLET OAK LN CHARLOTTE, N.C. 28226
LEGAL DESC L42M6-837 SPRING ST

TAX LAND VALUE	7,400	ACRES	0.6	YEAR BUILT	0000
TAX BLDG VALUE	0	HEAT SF	0	ZONING	R3
TAX OBLDG VALUE	0	AUX SF	0	PRES USE	SINGLE FAMILY R
TAX TOTAL VALUE	7,400	TOT SF	0	FARM HISTORIC	0

	CURRENT SALE	PREVIOUS SALE	PREVIOUS SALE
SALE DATE	07/84	/	/
SALE PRICE	0	0	0
SOURCE	WD		
DEED BOOK/PAGE	4902 0442		

MUNICIPALITY	MECKLENBURG COU	RES BATH	0	A/C		RESTROOMS	0
TOWNSHIP	PROVIDENCE	RES HBATH		HEAT		FLOORS	
SPECIAL TAX		RES BDRM	0	FUEL		APT UNITS	000
FIRE DISTRICT	PROVIDENCE	FIRE PLACE					

TAX PARCEL INFORMATION

PARCEL # 231-042-17 001 ADDRESS SPRING ST

BLDG SF	BLDG SF	STRUCTURAL ELEMENTS
0	0	STYLE
0	0	EXTERIOR WALL
0	0	EXTERIOR WALL
0	0	ROOFING STRUCTURE
0	0	ROOFING COVER
0	0	INTERIOR WALL
0	0	INTERIOR WALL
0	* DENOTES HTAR	FLOORING
		FLOORING

THIS INFORMATION MAY BE SUBJECT TO ERRORS AND SHOULD BE VERIFIED BY THE USER.

CATAWBA COUNTY
NORTH CAROLINA

I, G.SAM ROWE CE HEREBY CERTIFY AND DECLARE THAT I MADE THE MAP AS SHOWN HEREON FROM AN ACTUAL FIELD SURVEY OF SAID PREMISES, AND WITH ACKNOWLEDGEMENTS TO EXISTING DATA, AND THAT SAME IS CORRECT SO FAR AS I Know.

SIGNED: G. Sam Rowe

G.Sam Rowe CE
NBerton NC April 6th, 1953

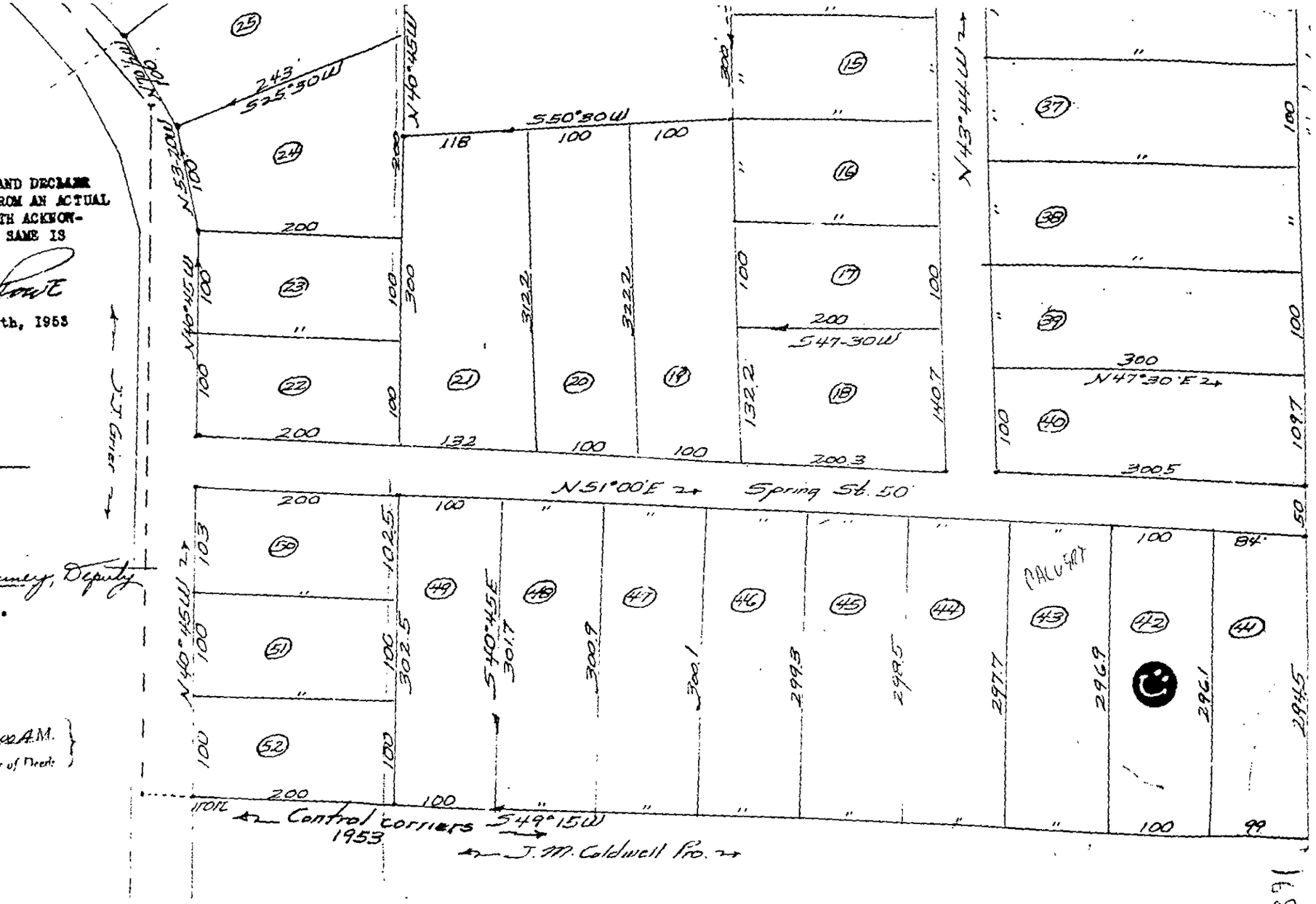
SUBSCRIBED AND SWORN TO BEFORE ME

_____ THIS 14

DAY OF **** April 1953.

SIGNED: Emmie N. Mauney, Deputy
CLERK SUPERIOR CT
CATAWBA COUNTY NC.

{ Filed 4-14 1953 at 9:00 A.M.
J. R. RENFROW, Register of Deeds }



1682

OMMENTS: Does not appear to be WWB Repair

LEGEND

use the following standard abbreviations

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		O (Organic)	None			

MOIST	WET
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EFI (Extremely Firm)	NP (Non-plastic)
	SP (Slightly Plastic)
	P (Plastic)
	VP (Very Plastic)

OTES

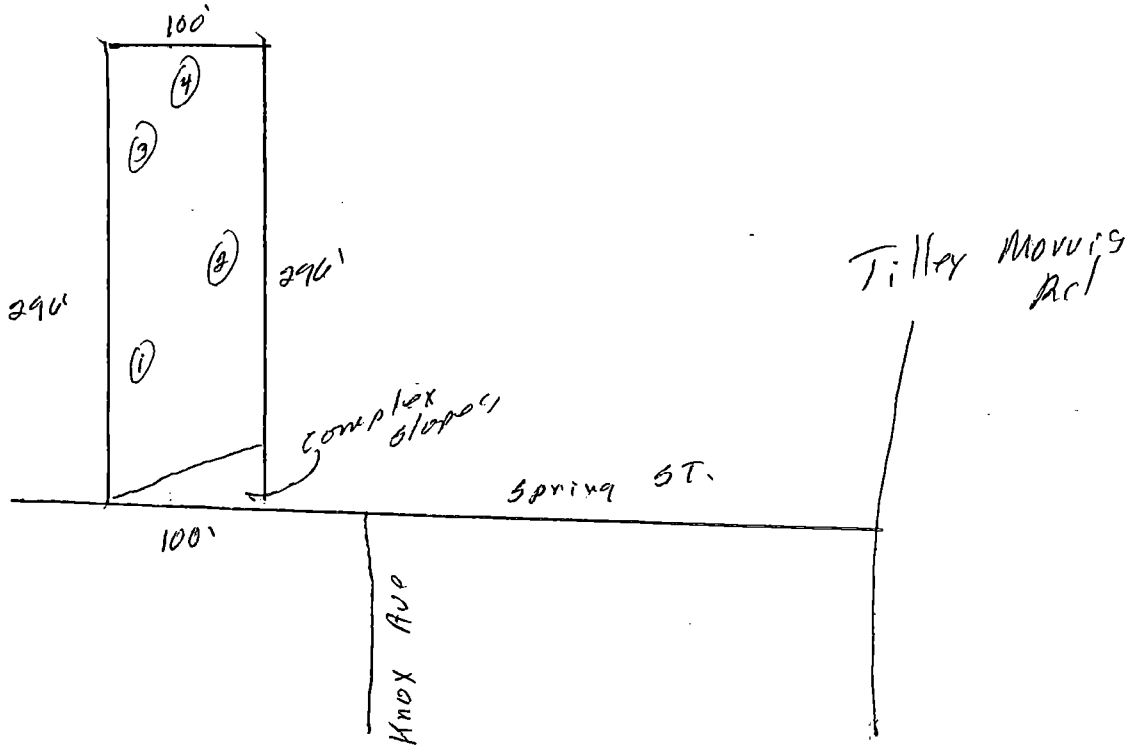
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APROLITE	S(suitable) or U(unsuitable)
OIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
LASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

valuation of saprolite shall be by pits.

ong-term Acceptance Rate (LTAR): gal/day/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).

16823



CONDITIONS OF IMPROVEMENT PERMIT

Permit Number: 1682B Lot 42 Spring Street Tax Number: 231-042-17

- 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)	
Yes Serviced by private well	1500 Gallon septic tank	400 Total trench length (ft)	24" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)	
3 Bedrooms in residence	NA Gallon pump tank	12" Depth of stone		
Any surface waters present: No Type:			distance:	
Site modifications required:				
Additional Conditions: ① Well & system notes. ② Plumb house as shi septic tank, other ③ Recommend install installation on lot exempt from IOC			by the sewage disposal as to be distance, however, to shallow placement of suited with nitrification lines	
Repair Area System Type Type (circle one): I II III IV V VI			___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1	
___ Absorption Area (Sq ft) ___ Total Trench Length (Ft)			___ Maximum Trench Depth	
For existing system, enter the year originally insta				

2/11/97 NO construction authorization wanted at this time. I.P. for closing. USA

variable space

The undersigned, an authorized agent of the MECKL ...S 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.
- Improvement Permit Valid 5 years from date of issuance.
- This Improvement permit is transferable.

Scott Smith - Power of Attorney — Jba B. Malik, RS 2/10/97

DEHNR Authorized Agent — Date — Owner/Agent Signature — Date

2/11/97 FOR FRANK S. JUSICO (Buyer)

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

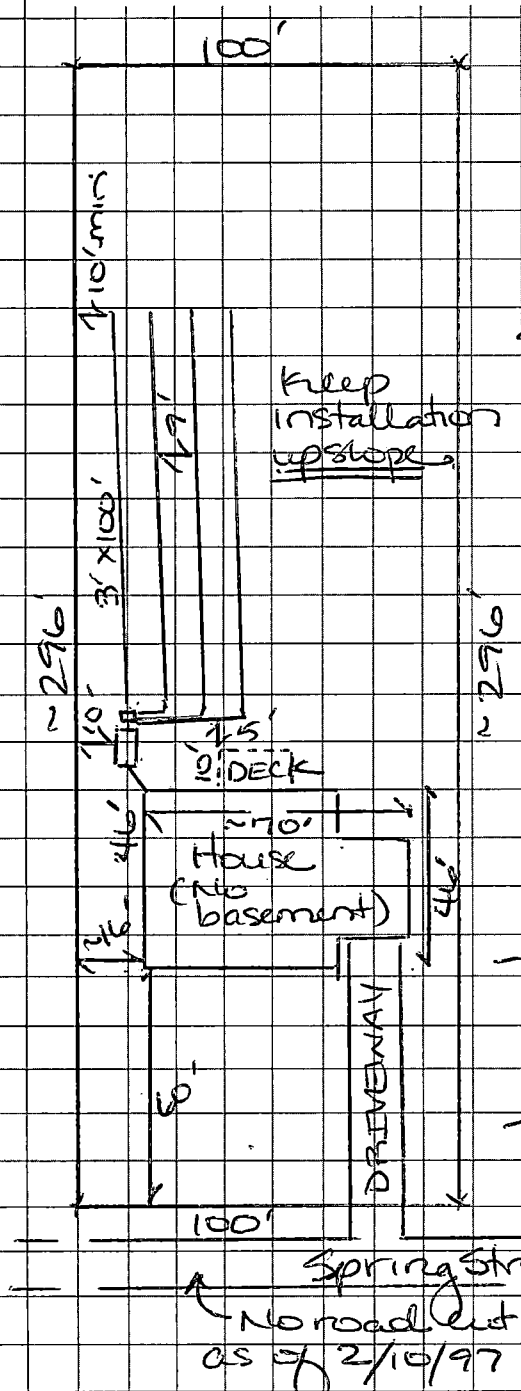
PROPOSED PLOT PLAN

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

FILE: 1682B

TC: 231-042-17

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.



Installation for
3 Bedroom House
(No basement) to be located
on Lot 42, Spring St.
See conditions of Improvement Permit.

Install:
- 1500 gallon septic tank
- Distribution Box
- 4 conventional nitrification lines -
  3' Wide x 100' Long x 12" gravel EACH.
- Maximum trench depth 24".
  one step down per nitrification line (step down not included in linear line length requirement)

COMMENTS:
- Well shall be 100' from any portion of the sewage disposal system(s) OR at least the maximum feasible distance, however no less than 50'.
- Plumb house as high as possible in order to accommodate shallow placement of septic tank otherwise, a Lift Station may be required.

Existing Spring St (Gravel Road)

Scott Smith / Power of Attorney for Frank S. Jusko 2/11/97
OWNER/AGENT SIGNATURE (Buyer)
DATE

APPROVAL DATE 2/10/97 Joab B. Mialik, RS

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