

1334 HAWFIELD RD

7/12/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 7773A DATE: 10/21/91

TC: 053-092-30 ☑ L ☑ CRT

SERIAL № 13833

Name of Owner Richard Morris Juris.:

Address of Property 1344 Hawfield Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 270'

Number of Lines 3 @ 90'

Cover Depth 24"

Water Supply Source Well

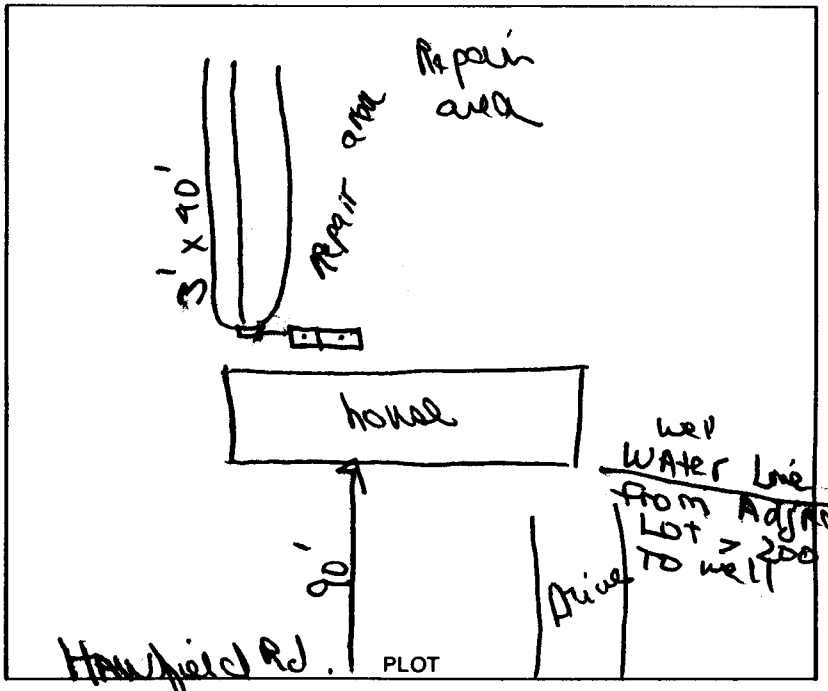
Distance to Water Source > 200

Excavation Inspected 10/21/91

Tank(s) Inspected 10/21/91

Wash Line Inspected

High Water Alarm Inspected



Design: 1991, 1500 St Con., 810 SF, 12" 6 Serie CTR# 116

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: System designed for 2 bedroom home.

Judy J. Kwan R.S.
Environmentalist

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

7.773A

DEPT. OF ENVIRONMENTAL PROTECTION/
SOLID AND HAZARDOUS WASTE

FROM: COUNTY ENGINEERING DEPARTMENT

RED FILE _____ JURISDICTION CODE Merk

PARCEL NUMBER # 053-092-20

ASSIGNED ADDRESS 1344 Dawfield Rd

EXISTING ADDRESS _____

PROJECT NAME VA

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	DISAPPROVED
1. SUBDIVISION REGULATIONS	/ /	/ /*
2. FLOODWAY REGULATIONS	/ /	/ /*
3. EROSION CONTROL REGULATIONS	/ /	/ /*
4. 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: Perk Test

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: PM

OPWEAR 06-88

NEW ADDRESS /✓/*

FORM 100

MECKLENBURG COUNTY

Charlotte-Mecklenburg
Building Standards Department

September 23, 1991

Subject: ZONING VERIFICATION

Dear

The parcel of land located at 1344 Hawfield Road
and further identified by tax parcel number 053-092-30
is zoned RU, (Rural District).

permitted uses include: Multi-section and single section mobile homes as referenced in Section 3093 of the Mecklenburg Zoning Ordinance provided the mobile home meets the requirements of Section 3138.

If this office can be of any further assistance, please contact us.

Sincerely,

Katrina J. Young
Zoning ~~Inspector~~

Form B-150 NS
10/84 59/b

All-America City

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 18851

File: 7773A Action 2

Parcel: 053-092-30 ☑ PC

Location: 1344 Hawfield Rd.

Subdivision:

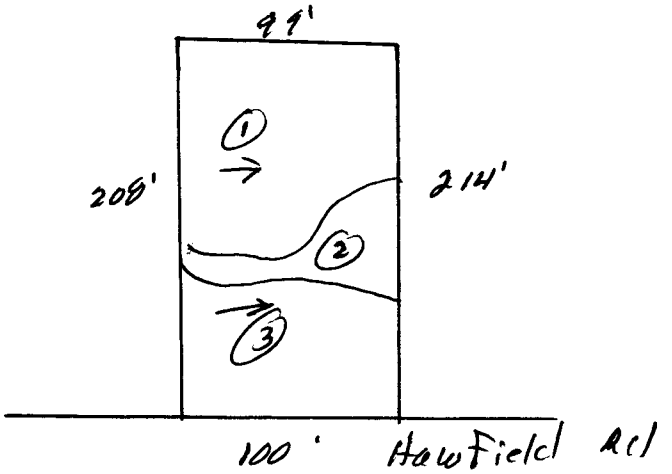
Lot: Block: Acres: .54

Owner: Richard E. Rossi
Address: 1400 Hawfield Road
Charlotte, N.C. 28214

Comments: 100% Repair

Described by: William A. Mullis

Date: 10-1-91



N

***** 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) Depression	(S) PS U 2-6%	S PS U	S PS U	S PS U
Texture	S (PS) U Clay	S PS U	S PS (U) 2-1 clay	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U	S (PS) U Blocky	S PS U	S PS U	S PS U
Drainage	S (PS) U 736" to water	S PS U	S (PS) U 736"	S PS U	S PS U	S PS U
Depth	S (PS) U 36"+	S PS U	S PS (U) 30-36"	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 736"	S PS U	S (PS) U 736"	S PS U	S PS U	S PS U
Available Space	S PS (U) Restricted	S PS U	S PS (U) Restricted	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-Lloyd	Depression	Mecklenburg L-40			
Area Classification	S PS (U)	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

JK

APPLICATION FOR AN IMPROVEMENT PERMIT

CO#1644

$200.00

10/01/91

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr 2nd Floor
700 N. Tryon Street
Charlotte, NC 28202

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

(OFFICE USE ONLY)
FILE: 7773-A
TC: 053-092-30
SERIAL: № 0019894
☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 1344 (STREET NO.) Hawfield Rd (STREET) ② FILE: 7773-A

③ JURISDICTION: _____ ④ TAX PARCEL NO.: _____

⑤ SUBDIVISION: _____ ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: Richard (FIRST) Earl (MIDDLE) Rorie (LAST)

⑨ MAILING ADDRESS: 1400 Hawfield Rd

⑩ CITY: Charlotte ⑪ STATE: N.C. ⑫ ZIP: 28214

⑬ PHONE: (WORK) 3996550 ⑭ (HOME) Same

REQUEST

This request is for a(n):

⑮ ☑ New permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify) _____

DESIGN CRITERIA

System will serve:

⑲ ☐ Residence ⑳ ☑ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 2 ㉕ Type? _____

㉓ Maximum occupancy? 2 ㉖ Maximum number of employees? _____

㉔ Basement? ☐ yes ☐ no 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: Richard Rorie

Date: 10-1-91

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 60 months from the date of issuance.

Judy J. Kiser RS, 10/4/91
Environmentalist Date

Director or Authorized Section Head 10-8-91 Date

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

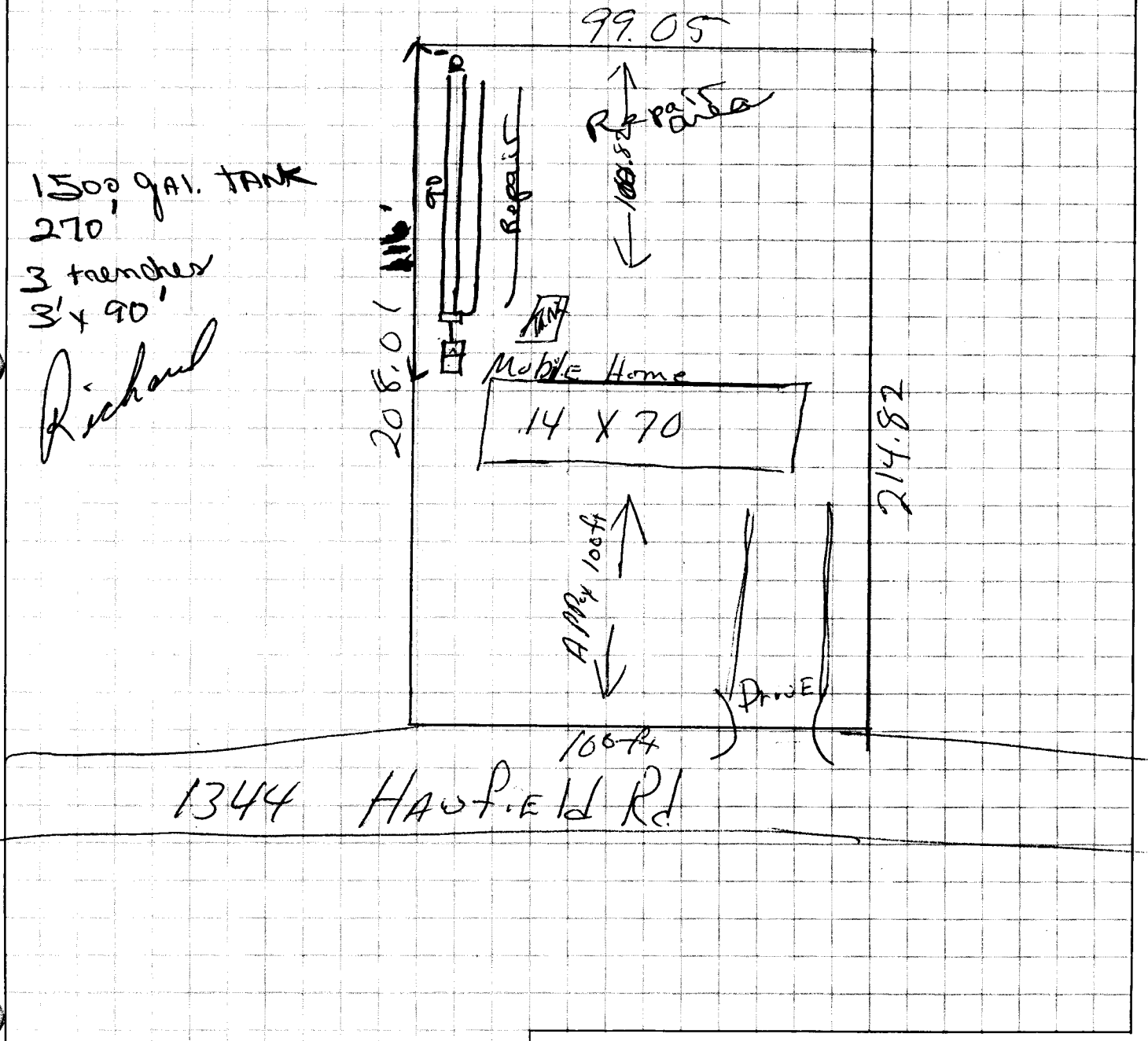
PROPOSED PLOT PLAN

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

FILE: 7773-A

TC: 053-092-30

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 _____

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

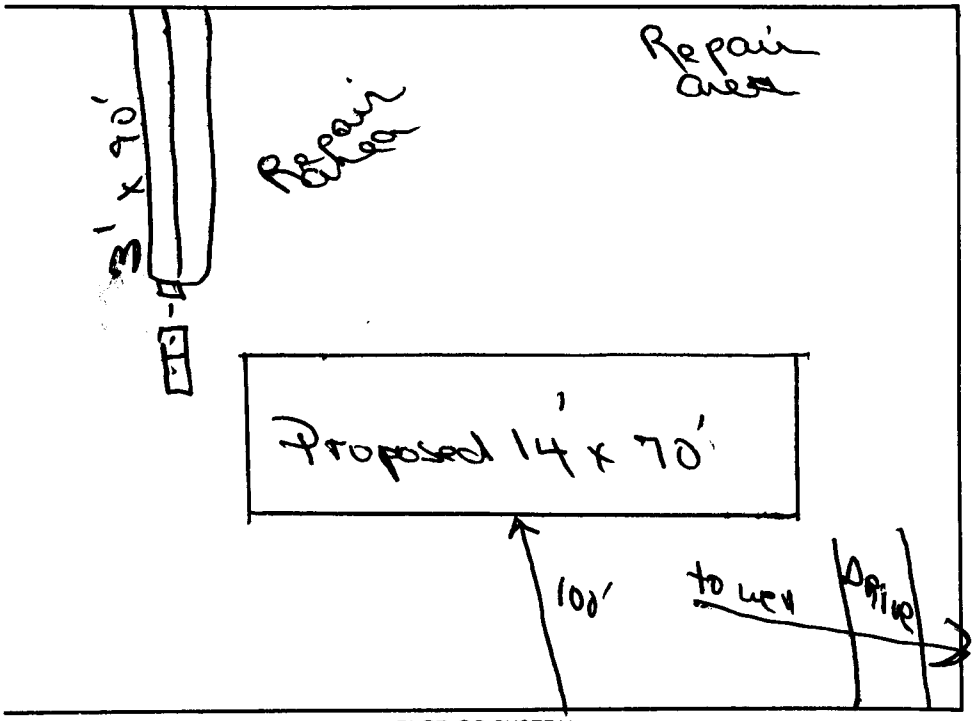
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 7773.A DATE: 10/7/91

TC: 053-09230 ☑ L

SERIAL Nº 13821

Permission is hereby given to L 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 10-1-91. All work shall be completed on or before 11/7/91, 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 PC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 270' feet

Number of Lines 3

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well >100' feet

NAME OF OWNER Richard E. Rorie

LOCATION OF PROPERTY 1344 Hawfield Rd

Comments: Install 3 trenches 3' x 90' 12" Stone

Division or Section Head

Environmentalist Judy J. Rivers RS

* 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

APPLICATION FOR SOIL INVESTIGATION

Pd. 50.00
CK # 1632
9-23-91
HB

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

(OFFICE USE ONLY)

FILE: 7773 A

TC: 053-092-30

☑ PC ☐ REPT

JOB LOCATION

① ADDRESS: 1344 Hawfield Rd

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

⑤ PARCEL REFERENCE: BOOK NO.: _____ PAGE NO.: _____ PARCEL NO.: 053-092-30

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

OWNER

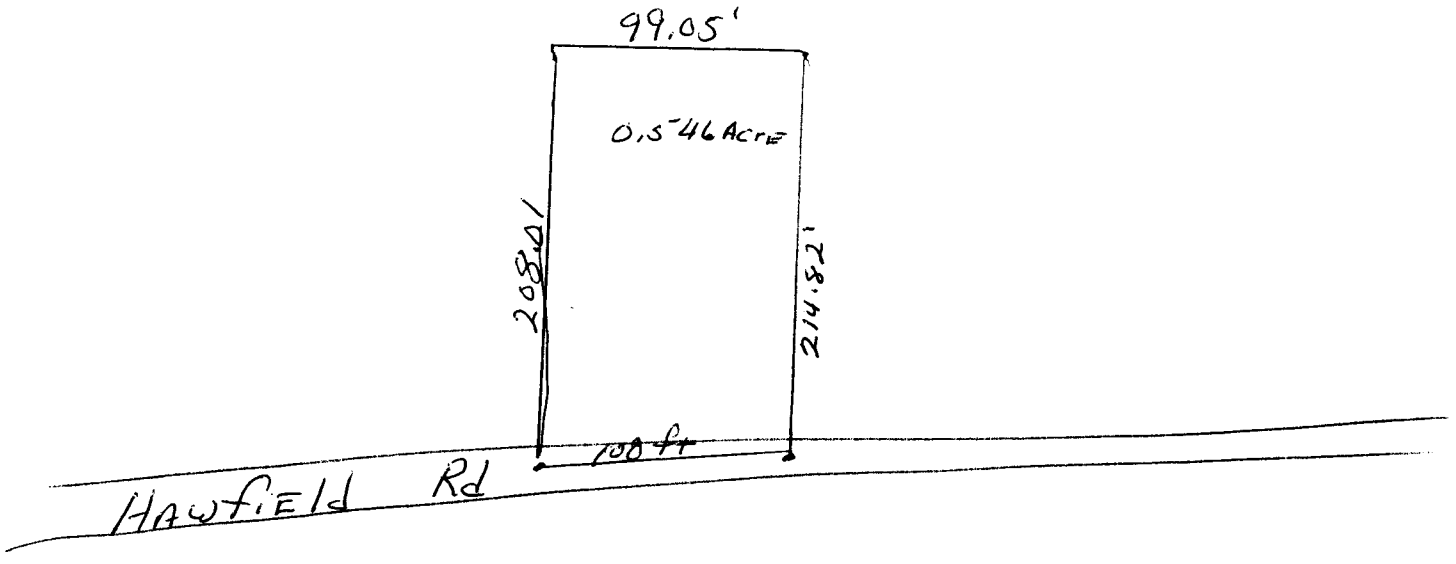
⑦ NAME: Richard (FIRST) Earl (MIDDLE) Rorie (LAST)

⑧ MAILING ADDRESS: 1400 Hawfield Rd.

⑨ CITY: Charlotte ⑩ STATE: N.C. ⑪ ZIP: 28214

⑫ PHONE: (WORK) 3996550 (HOME) SAME

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: Richard Rorie

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

Date: 9-28-91

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

Mecklenburg County
Health Department

October 2nd, 1991

Richard Earl Rorie
1400 Hawfield Road
Charlotte, NC 28214

RE: Property located at 1344 Hawfield Road
FILE: 7773A
PARCEL: 053-092-30

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 18851) 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)

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