

2433 LAKEVIEW CR

19313103

6/27/2007

duponbj

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

Mecklenburg County
Health Department

February 15th, 1991

Dave Robert Smeltzer
4014 Sherbrooke Drive
Charlotte, NC 28210

RE: Property located at 2433 Lakeview Circle
FILE: 7268A
PARCEL: 193-131-03

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 16987) 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

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 16987

File: 7268A
Parcel: 193-131-03

Action 2
☒ PC

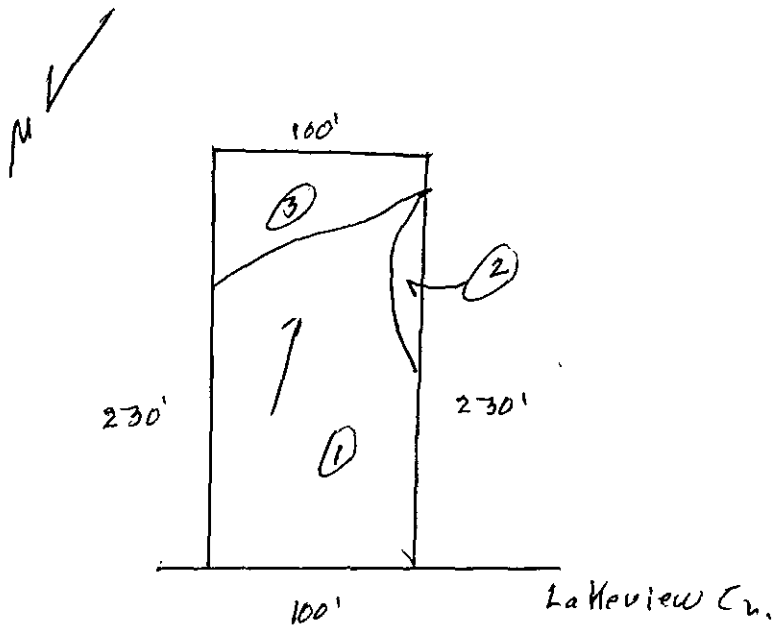
Location: 2433 Lakeview Circle
Subdivision:

Lot: 3 Block: Acres: Approx. .53

Owner:
Address: Dave Robert Smeltzer
4014 Sherbrooke Drive
Charlotte, NC 28210

Comments: _____

Described by: William B. Marlin
Date: 2-13-91



*** 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 2-6%	S PS (U) Drainageway Depression	S PS U	S PS U	S PS U
Texture	S PS (U) 2-Clay	S (PS) U Clay	S PS U —	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S (PS) U Blocky	S PS U —	S PS U	S PS U	S PS U
Drainage	S PS (U) Perched water 20-24"	S (PS) U 36" to water	S PS U —	S PS U	S PS U	S PS U
Depth	S PS (U) 15-30"	S (PS) U 36"+	S PS U —	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 36"	S (PS) U 36"	S PS U —	S PS U	S PS U	S PS U
Available Space	S (PS) U	S PS (U) Restricted	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	Wilkes/ Helena	Cecil-Lila IV	Drainageway Depression			
Area Classification	S PS (U)	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 16987

File:

Action

Parcel:

☐ PC

Location:

Subdivision:

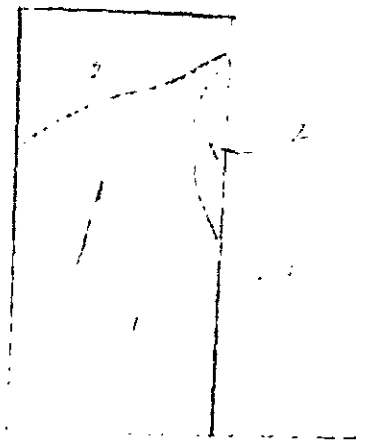
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Texture	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S PS U	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						
Area Classification	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 7268A

TC: _____

☑ PC ☐ REPT

JOB LOCATION

① ADDRESS: 2433 LAKEVIEW CIRCLE MATTHEWS, NC 28105

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

⑤ PARCEL REFERENCE: BOOK NO.: _____ PAGE NO.: _____ PARCEL NO.: 193-131-03

⑥ DEED REFERENCE: BOOK NO.: 3765537 PAGE NO.: _____

OWNER

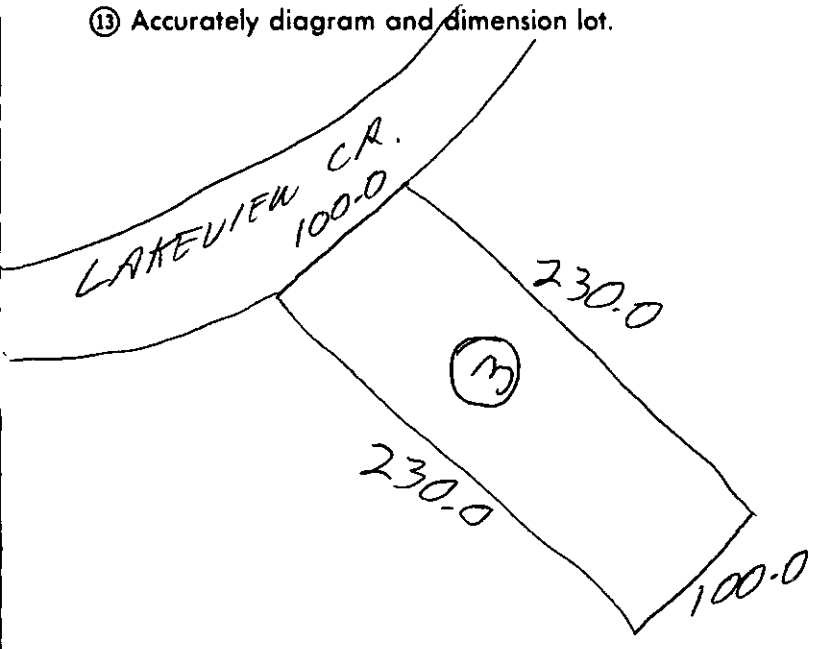
⑦ NAME: DAVE (FIRST) ROBERT (MIDDLE) SMELTZER (LAST)

⑧ MAILING ADDRESS: 4014 SHERBROOKE DR.

⑨ CITY: CHARLOTTE ⑩ STATE: NC ⑪ ZIP: 28210

⑫ PHONE: (WORK) 357-6641 (HOME) 552-2114

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: Dave Robert Smeltzer

Date: Feb 5, 1991

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

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

APPLICATION FOR SOIL INVESTIGATION

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
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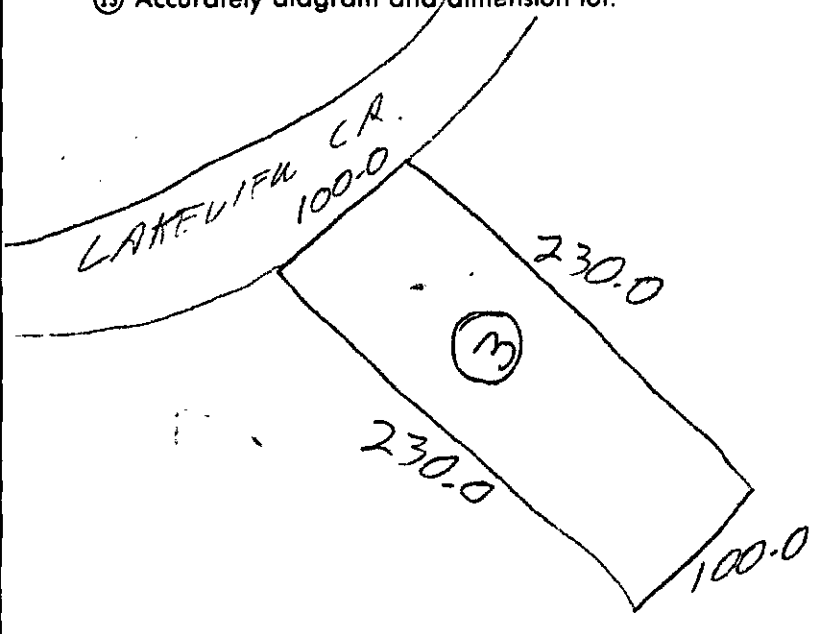
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MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 02/05/91

Name/Company: [illegible]

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: [illegible]
2433 [illegible]
TC# 193-131-03

MECKL.
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
FEB 5 1991

Fee: $ 30.00 #30.00

NOTICE:

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

Completed by

Collected by

DATE 2/5/91

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

FROM: COUNTY ENGINEERING DEPARTMENT

SEND FILE _____ JURISDICTION CODE Atts

PARCEL NUMBER A 193-131-03

ASSIGNED ADDRESS 2433 Lakemist Ct

EXISTING ADDRESS _____

PROJECT NAME LA

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: Address Verified

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]

OPWEAR 06-88

NEW ADDRESS / /*

FORM 100