15246

MECKLENBURG COUNTY
HEALTH DEPARTMENT

ACCOUNT # X44485
PLEASE BILL TO OUR ACCOUNT.

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM / WATER SUPPLY WELL

5200

APPLICATION TYPE: ☑ SEPTIC ONLY ○ WELL ONLY ○ SEPTIC & WELL
○ ADDITION OR RENOVATION WITH OCCUPANCY INCREASE ○ EXCHANGE MOBILE HOME (SAME # BEDROOMS)
☑ ADDITION OR RENOVATION WITH NO OCCUPANCY INCREASE ○ COMMERCIAL OR INDUSTRIAL

PERSON FILING APPLICATION:
NAME: TREVOR TILLMAN, CHAMPION WINDOW CO.
ADDRESS: 9100 PERIMETER WOODS DR. SUITE I
CITY: CHARLOTTE
STATE: NC ZIP: 28216
PHONE: 704-398-0085
ALTERNATE PHONE: 980-722-6641 CELL
E-MAIL: CHARLOTTE.PRMGR@CHAMPIONFACTORYDIRECT.COM

PROPERTY OWNER: ☐ SAME AS PERSON FILING APPLICATION
NAME: HOMAN, JAMES & JANETTE
ADDRESS: 11410 TEMA CIRCLE
CITY: CHARLOTTE
STATE: NC ZIP: 28214
PHONE: 704-576-2691
ALTERNATE PHONE: N/A
E-MAIL: N/A

JOB LOCATION INFORMATION
TAX PARCEL #: 02312223
STREET ADDRESS: 11410 TEMA CIRCLE
CITY: CHARLOTTE
STATE: NC ZIP: 28214

SUBDIVISION OR MOBILE HOME PARK NAME:
N/A
LOT #: N/A

WATER SUPPLY:
☑ MUNICIPAL ○ PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER

RESIDENTIAL PROPERTY TYPE: ○ N/A
☑ HOUSE ○ MODULAR HOME ○ MULTIPLE FAMILY
○ SINGLE MOBILE HOME ○ DOUBLE WIDE
○ OTHER

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 2

COMMERCIAL / INDUSTRIAL PROPERTY TYPE: ☑ N/A
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:
INDUSTRIAL WASTES? ○ YES ○ NO
UNDERGROUND STORAGE TANKS? ○ YES ○ NO

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:
☐ BEDROOM ☐ BATHROOM ☐ KITCHEN ☐ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☑ SUNROOM ☐ PORCH ☐ DECK ☐ OTHER

ADDITION/RENOVATION TYPE DETACHED FROM EXISTING STRUCTURE:
☐ DETACHED GARAGE ☐ DETACHED GARAGE WITH PLUMBING ☐ POOL HOUSE ☐ SHOP ☐ BARN
☐ STORAGE SHED ☐ DETACHED PORCH / DECK ☐ OTHER

*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 the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Owner's/Agent's Signature

8/17/11
Date

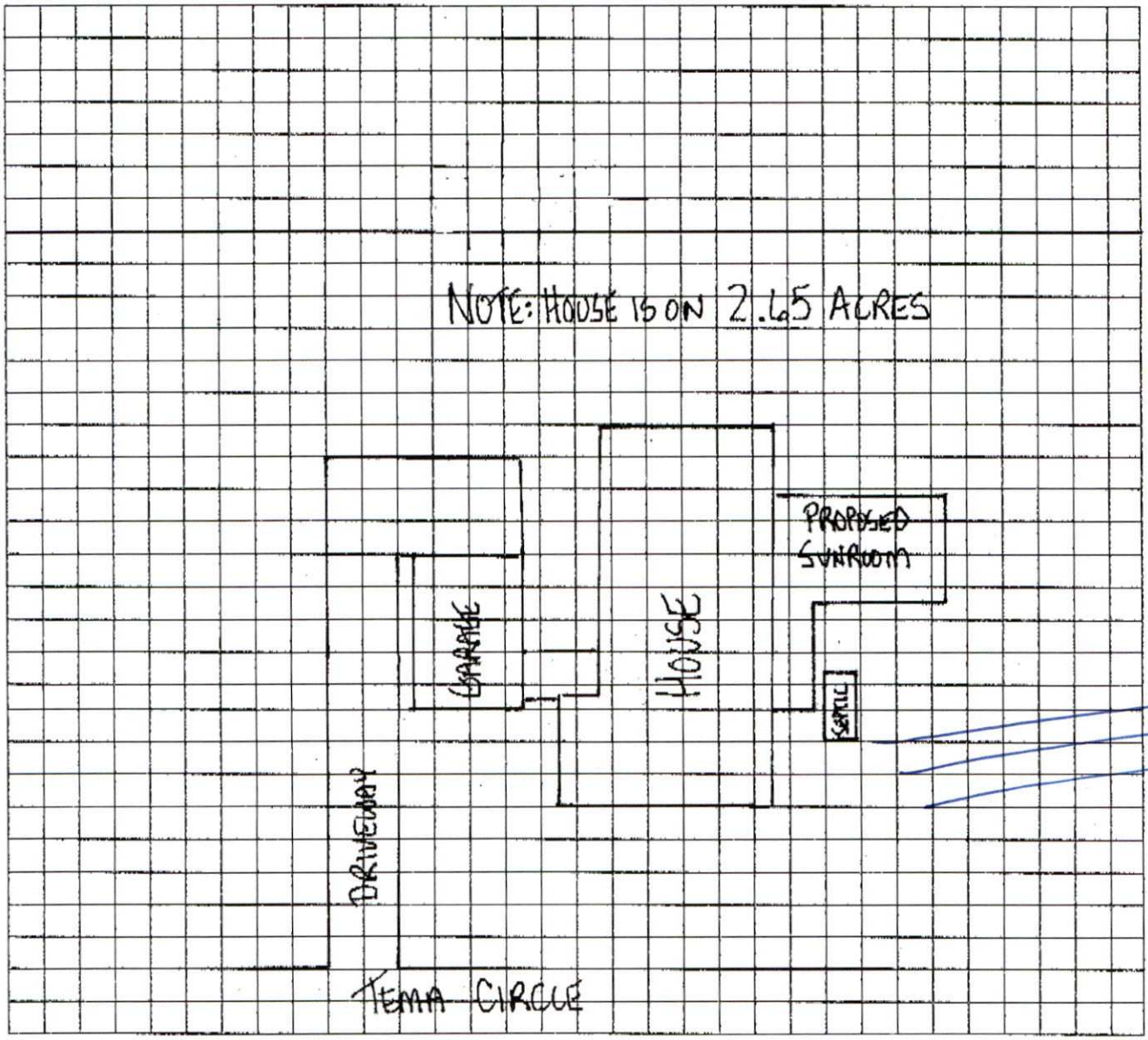
A PROPOSED PLOT PLAN (see page 2) is required to be submitted with each application.

File #: 15246

PROPOSED PLOT PLAN

A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

Street Address: 11410 TEMA CIRCLE Tax Parcel #: 02312223



NOTE: PLEASE CALL TREVOR @ 980-722-6641 AND I WILL MEET YOU ON SITE. PLEASE GIVE ME AS MUCH NOTICE AS POSSIBLE. THANK YOU

*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 and Water Supply Wells 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.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

O.K. to use existing system for a sunroom addition

REHS Signature 8/24/11 Date

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES 5306
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336 ~~6884~~

Revised on: 01/03/11

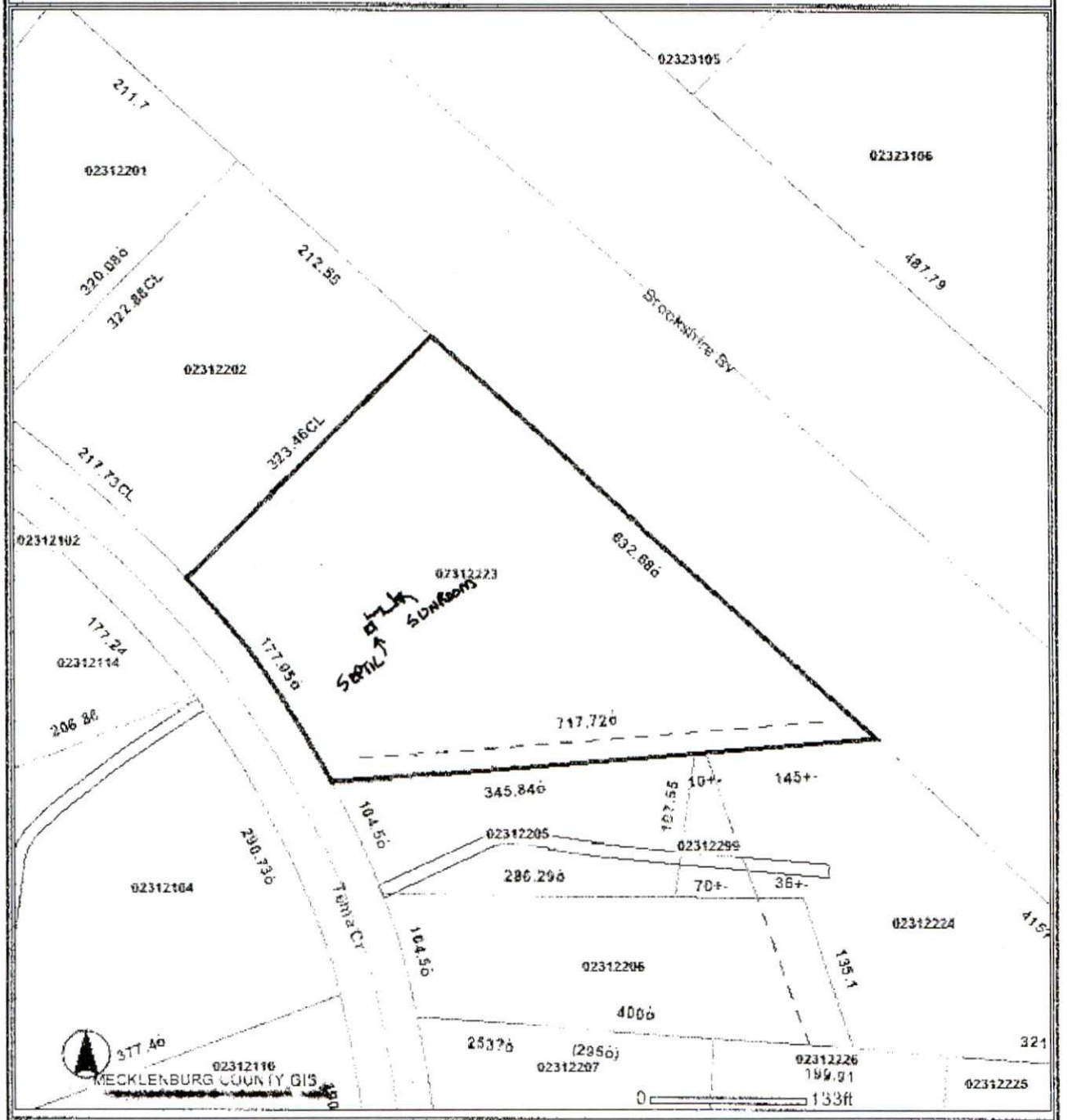
Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Thu Aug 18 15:57:23 EDT 2011

Homan, James & Janette



This map is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, planimetric maps, and other public records and data. Users of this map are hereby notified that the aformentioned public primary information sources should be consulted for verification. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.



Print

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Parcel Information

Parcel ID	Account	Parent	Previous
02312223	INDIVIDUAL		02312223

Owner(s)

Owner Name	Mailing Address	City/State
HOMAN JAMES L	11410 TEMA CIR	CHARLOTTE NC 28214-8785
HOMAN JANETTE I WIFE	11410 TEMA CIR	CHARLOTTE NC 28214-8785

Legal Information

Legal	Municipality	Annexed	Special District	Fire District	Acreage
NA	MECKLENBURG COUNTY UNINCORPORATED		FIRE SERVICE A	COOKS	2.65

Total Parcel Assessment & Exemptions

Building	Land	Features	Total	Exemption	Year Approved	Review Date	Amount
168500	78800	2000	249300				

Sales Information

Sale	Price	Stamps	Qualify	V/I	DeedBook	Type	Legal Ref.	Grantor
May 13 1996	176500			IMP	08573 - 690	DEED STAMPS	08573-690	RIDENHOUR JIMMY WAYN

Land Use

Use	Units	Type	Neighborhood	Assessment
R120	2.65	AC	C301	78800
9400	2.03	AC	C301	0

Building Information

Bldg	Description	Type	Year Built	Property Location
1	Single-Fam	RES	1984	11410 TEMA CR UNINC

Bldg	Story	Units	Total SqFt	Heated	Foundation	Ext. Wall	Grade	Value
1	2.0 STORY	1	3748	2760	CRAWL SPACE	FACE BRICK -	AVERAGE 03	168500

Bldg	Heat	Fuel	FirePlace	AC	Fixtures	Bedrooms	Full Baths	3/4 Baths	1/2 Baths
1	HEAT PUMP	ELECTRIC	2 - FP4	AC CENTRAL		3	2		0

Sub Areas

Bldg	Description	Size
1	BASE (FIRST FLOOR)	1994
1	PORCH - OPEN - FINISHED	120
1	GARAGE - UNFINISHED	576
1	PORCH - OPEN - FINISHED	182
1	UPPER STORY - FINISHED	766
1	ATTIC - UNFINISHED	110

Depreciation

Bldg	Physical	Functional	Economic	Special	Override
1	AV - 21.00%				

Notes

Tax Year	Notes	Note Date

Special Features & Yard Items

Bldg	Built	Type	Quantity	Units	Value
1	1985	DECK	1	10X16	800
1	2007	PATIO	1	15x18	1200

Value Changes

Notice Date	Tax Year	Reason	Changed To	Deferred
Feb 8 2011	2011	Countywide Revaluation	249300	0
Jul 23 2008	2008	Reviewed - No change in value	217000	0

App. #: 5200

Fee: 100.0000

Date: 8/19/2011

CRT[ ]

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

MECKLENBURG COUNTY HEALTH DEPARTMENT
Groundwater & Wastewater Services
700 N. Tryon St. Suite 211 Charlotte, NC 28202
Phone: 704-336-5103 Fax: 704-336-6894

FILE #: 15246

TYPE APPLICATION:

(•) SEPTIC ONLY ( ) WELL ONLY ( ) SEPTIC AND WELL

( ) ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE ( ) EXCHANGE MOBILE HOME - SAME # OF BEDROOMS

(•) ADDITION - RENOVATION OR GARAGE WITH NO MAJOR CHANGES ( ) COMMERCIAL OR INDUSTRIAL

PERSON FILING APPLICATION

NAME: Trevor Tillman
ADDRESS: 9100 Perimeter Woods Dr., Ste. I
CITY: Charlotte
STATE: NORTH CAROLINA ZIP: 28216
PRIMARY PHONE: 704-398-0085 ALTERNATE PHONE: 980-722-6641
EMAIL: charlotte.prmgr@championfactorydirect.cc

JOB LOCATION INFORMATION:

TAX / PARCEL #: 02312223
STREET ADDRESS: 11410 TEMA CIR
CITY: CHARLOTTE NC ZIP: 28214
SUBDIVISION OR MOBILE HOME PARK NAME: LOT #: 0

PROPERTY OWNER: [ ] Same as Filer

NAME: James & Janette Homan
ADDRESS: 11410 Tema Circle
CITY: Charlotte
STATE: NORTH CAROLINA
ZIP: 28214
PRIMARY PHONE: 704-576-2691
ALTERNATE PHONE:
EMAIL:
General Comments:

WATER SUPPLY:

[x] MUNICIPAL (M) [ ] PUBLIC (C) [ ] PRIVATE WELL (P) [ ] SHARED WELL (S) [ ] OTHER 'SPRINGS' (O)

RESIDENTIAL PROPERTY TYPE:

(•) HOUSE ( ) MODULAR HOME ( ) MULTIPLE FAMILY
( ) SINGLE MOBILE HOME ( ) DOUBLE WIDE ( ) OTHER

NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 2

COMMERCIAL / INDUSTRIAL PROPERTY TYPE:

NUMBER OF EMPLOYEES PER SHIFT: 0
NUMBER OF SHIFTS: 0
INDUSTRIAL WASTES?: ( ) YES ( ) NO
UNDERGROUND STORAGE TANKS?: ( ) YES ( ) NO

ADDITION TYPE ATTACHED TO EXISTING STRUCTURE:

[ ] BEDROOM [ ] BATHROOM [ ] KITCHEN [ ] DINING ROOM [ ] DEN [ ] GARAGE
[x] SUNROOM [ ] PORCH [ ] DECK [ ] OTHER

ADDITION TYPE DETACHED FROM EXISTING STRUCTURE:

[ ] DETACHED GARAGE [ ] DETACHED GARAGE WITH PLUMBING [ ] POOL HOUSE [ ] SHOP [ ] BARN
[ ] STORAGE SHED [ ] DETACHED PORCH/DECK [ ] OTHER

PRINT Update Go to Front Counter

SEE INSTRUCTIONS ON BACK

Date Received 7-3-84

ICAR(S) Application No 15246

T. C. No. 023-122-23

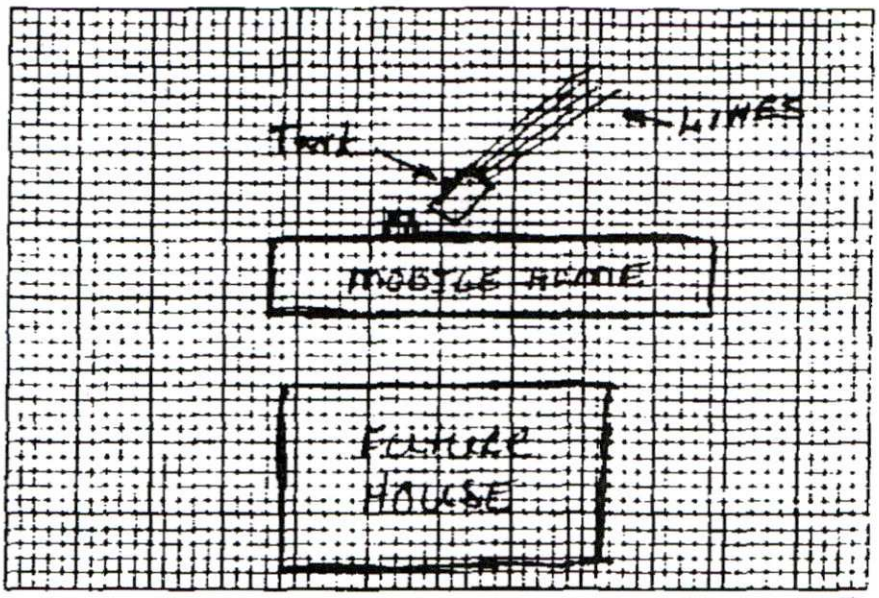
Map Date /

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

Application for an
Installation, Construction, Alteration, and/or Repair Permit
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

The owner of that property described hereinafter hereby applies to the Mecklenburg County Department of Environmental Health for a permit to:

1) ____ Install or Construct 2) use existing system Alter or Repair an individual septic tank wastewater treatment system with a subsurface, soil absorption, effluent discharge.



3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ____ Yes ____ No
Residence ✓ Yes ____ No

4) No of Bedrooms 3
5) Business Use -- Max No Employees n/a
6) Washing Machine ✓ Yes ____ No
7) Garbage Disposal ____ Yes ✓ No
8) Dishwasher ____ Yes ✓ No
9) Water Supply
A) Individual Well ✓
B) Governmental System n/a
C) Community System
1 Well source n/a
2 Governmental source n/a
10) Sewage System
House located within 200 feet of public sewer ____ Yes ✓ No
House located within 200 feet of community sewer ____ Yes ✓ No
11) FHA Case No n/a
12) VA Case No. n/a

13) NAME OF OWNER Ridenhour, Jimmy + Teena Wayne Henline
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 11410 Tema Circle

15) PHONE NO. Home 393-0568 Office 392-8141 ext 237

16) LOCATION OF SYSTEM 11410 Tema Circle
STREET OR COUNTY ROAD

17) SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? _____ YES _____ NO DATE RUN _____

20) PTR NUMBER (See Instructions) _____

The undersigned person hereby agrees that he has read the foregoing application and that the contents of same are true. It is understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

July 3, 1984
DATE OF APPLICATION

Teena Ridenhour
OWNER

EHD-5-76

Environmental Health Department's Copy

Date Received 7-16-84

MECK CO. TY DEPARTMENT OF RECEIVED JUL 1 1984 ENVIRONMENTAL HEALTH

CAR(S) Application No 15246

T C No. 023-122-23

Map Date L

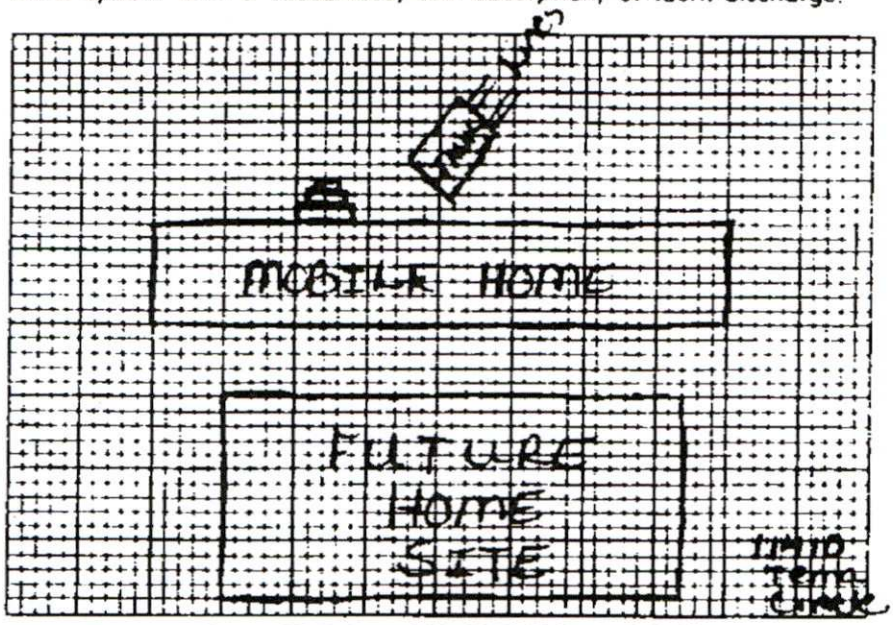
MECK. CO. DEPARTMENT OF RECEIVED JUL 16 1984 ENVIRONMENTAL HEALTH

MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Application for an Installation, Construction, Alteration, and/or Repair Permit (Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

The owner of that property described hereinafter hereby applies to the Mecklenburg County Department of Environmental Health for a permit to:

1) Install or Construct 2) X Alter or Repair an individual septic tank wastewater treatment system with a subsurface, soil absorption, effluent discharge.



3) PLOT PLAN (ACCURATELY DIMENSIONED)

4) Mobile Home ___ Yes ✓ No
Residence ✓ Yes ___ No
5) No of Bedrooms 3
6) Business Use — Max No Employees N/A
7) Washing Machine ✓ Yes ___ No
8) Garbage Disposal ___ Yes ✓ No
9) Dishwasher ___ Yes ✓ No
10) Water Supply
A) Individual Well YES
B) Governmental System N/A
C) Community System
1 Well source N/A
2 Governmental source N/A
11) Sewage System
House located within 200 feet of public sewer ___ Yes ✓ No
House located within 200 feet of community sewer ___ Yes ✓ No
12) FHA Case No N/A
13) VA Case No N/A

13) NAME OF OWNER Ridenhour, Teena Henline
+ Ridenhour, Jimmy, Wayne
LAST FIRST MIDDLE

14) ADDRESS OF OWNER Rt. 14, 11410 Tema Circle,

15) PHONE NO. Home 393-0568 Office Teena 392-8141 ext. 237

16) LOCATION OF SYSTEM 11410 Tema Circle
STREET OR COUNTY ROAD

17) SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? ___ YES ✓ NO DATE RUN _____

20) PTR NUMBER (See Instructions) _____

The undersigned person hereby agrees that he has read the foregoing application and that the contents of same are true. It is understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

July 11, 1984
DATE OF APPLICATION

Teena Ridenhour
OWNER

EHD-S-76

Environmental Health Department's Copy

Serial No. 07409

ICAR (S) Permit No. 15246

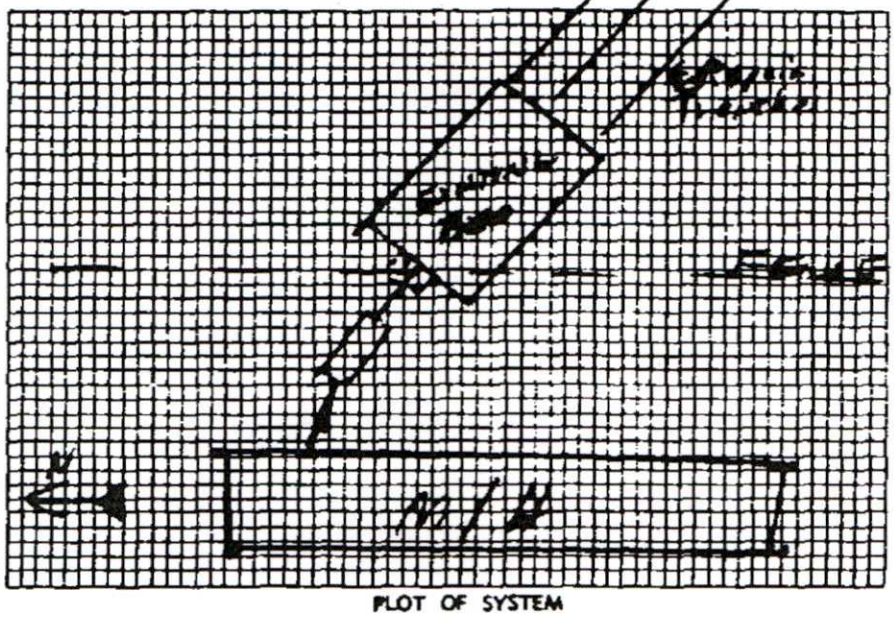
Date Issued 7-17-84

T C. No. 023-122-23

Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Permission is herebv given to ____Install or Construct, X Alter or Repair the individual septic tank wastewater treatment system with subsurfoce, soil absorption, effluent discharge as specified herein at the described location. This permit is granted based upon the information supplied in application 15246, dated 7-11-84 and this permit shall be void and of no effect if the information provided in the application is not true or is erroneous. All work shall be completed on or before Aug 19th 1984, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate 4 IIB

Liquid Capacity of Tank

Tank Construction Repair

Absorption and/or Nitrification Lines:

Total Line Length 100 Lin. FT

Number of Lines THREE

Distance from House 60 FT

Distance from Property Line > 200 FT

Distance from Well 100 FT

NAME OF OWNER RIDENHOUR, JIMMY

☒ well

LOCATION OF PROPERTY 11410 TERRA CIRCLE

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Health Commission which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Environmental Health Director before any system can be covered up or otherwise rendered uninspectable or can be used. 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.

Three Trenches @ 34 FT x 3FT x 18 inches Stone - bay or Stone cover-

Comments: grade Beds - Tie lines from existing Bed

B. Henderson
Division or Section Head

Ralph Mills
Environmentalist

* 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 Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

EHD-5-76

Environmental Health Department's Copy

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 08/19/11
Receipt #: 73889
Check / Auth #: CHARGE
Received By: SADERLW

Amount: 100.00
Tendered: 100.00
Returned: 0.00

Account Information

Account #: X44485
Contractor: CHAMPION WINDOW CO OF CHT LL
Attn:
Address: 9100 PERIMETER WOODS DR
Address:
City/State/Zip: CHARLOTTE, NC 28216

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	MH Exc/Add/Repl w/o System Mod 11410 TEMA CIRCLE		1	100.00	100.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
610.63	684.42				

FACTORY DIRECT SINCE 1953
Champion
WINDOWS • SIDING • PATIO ROOMS

FAX

Champion of Charlotte
9100 Perimeter Woods Drive, Suite I
Charlotte, NC 28216
PH: 704-398-0085 • FAX: 704-398-0087

TO: MECKLENBURG COUNTY HEALTH DEPT.

FROM: TREVOR TILLMAN

FAX: 704-336-5306

PAGES: 5 **(INCLUDING THIS COVER)**

PHONE:

DATE: 8-18-11

RE: APPLICATION FOR EXISTING SEPTIC CHECK FOR SUNROOM ADDITION

CC:

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