

8032 E W T HARRIS BV

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

3267B

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

☐ 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: Wallace (last) Sue (first) Moore (mi)

ADDRESS: 10695 Mowes Store Rd PHONE: (704) 455-2927

CITY: Midland STATE: NC ZIPCODE: 28107

Date: 8-19-94

PROPERTY OWNER:

NAME: (last) SAME (first) (mi)

ADDRESS: PHONE: (__) _____

CITY: STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 103-241-07

STREET ADDRESS: 8032 E W T Harris Blvd. Charlotte, N.C. 28107

ZONING:

SUBDIVISION OR MOBILE HOME PARK NAME:

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

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: 3 NUMBER OCCUPANTS: 4

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

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: Sue Moore Wallace Date: 8-19-94

NOTICE:

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 approval is granted by this Department.

...This permit is not transferable.

...

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

Environmentalist Date

Director or Authorized Section Head Date

WATER : 122791

CHARLOTTE MECKLENBURG UTILITY DEPT.

DATE: 8-22-94 No. 32926

RECEIVED FROM: Independent Hill Baptist Church

Thirteen Hundred Dollars & 00/100 $ 1300.00

FOR: 1" Water Tap.

10220 Eastfield Rd.

RECEIVED BY: Q. K. Mitchell

CASH ☐

CHECK ☒

CHARLOTTE MECKLENBURG UTILITY DEPT.

DATE: 8-22-94 No. 32927

RECEIVED FROM: Clarence Jones

Two Thousand Four Hundred Ten Dollars & 00/100 $ 2410.00

FOR: 3/4" Water & 4" Sewer Tap

3220 Carver Pl.

RECEIVED BY: Q. K. Mitchell

CASH ☐

CHECK ☒

File 32927B

CHARLOTTE MECKLENBURG UTILITY DEPT.

DATE: 8-22-94 No. [redacted]

RECEIVED FROM: Lee N. Moore [redacted]

Fifteen Hundred Sixty Five Dollars & 00/100 $ 1565.00

FOR: 4" Sewer Tap

8032 East 24th Plaza Dr.

RECEIVED BY: [redacted]

CASH ☐

CHECK #229 V. Johnson

Please give this to Susan Bateman

Sue Wallace
8-29-94

Home Address Owner:
10695 Flowes Store Rd
Midland, N.C. 28107
Phone 455-2977