

16720 FIDLER LN

00153125

12/19/2007

duponbj

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

FEE: 100.00 cash
DATE: 3-31-05
CRT (1): 4-2-05 JC

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM
MECKLENBURG COUNTY - GROUNDWATER & WASTEWATER SERVICES
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

HCS

GWS – UES.APP 01/05

FILE #: 10698

PH 122609 LD

TYPE APPLCATION:

- ☐ ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A / M)
- ☐ ADDITION - RENOVATION OR GARAGE WITH NO MAJOR CHANGES (X)
- ☐ EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
- ☐ COMMERCIAL OR INDUSTRIAL (N)

Jeremy

PERSON FILING APPLICATION:
NAME: Norbert Steinweckel
ADDRESS: 16720 Fidler LN
CITY: Cornelius
STATE: NC ZIP: 28031
PHONE: 704-562-3751
ALTERNATE PHONE: 704-392-6376

PROPERTY OWNER:
NAME: Norbert Steinweckel
ADDRESS: 16720 Fidler LN
CITY: Cornelius
STATE: NC ZIP: 28031
PHONE: 704-562-3751
ALTERNATE PHONE:

JOB LOCATION INFORMATION
TAX/PARCEL #: 001-531-25
STREET ADDRESS: 16720 Fidler LN
CITY: Cornelius
STATE: NC ZIP: 28031
SUBDIVISION OR MOBILE HOME PARK NAME:

TOWNSHIP:

- ☐ 0-MECKLENBURG
- ☐ 1-CHARLOTTE
- ☐ 2-DAVIDSON
- ☒ 3-CORNELIUS
- ☐ 4-PINEVILLE
- ☐ 5-MATTHEWS
- ☐ 6-HUNTERSVILLE
- ☐ 7-MINT HILL

LOT #: 914 Built 1993

WATER SUPPLY:
☒ MUNICIPAL (M) ☐ COMMUNITY (C) ☐ PRIVATE WELL (P) ☐ SHARED WELL (S) ☐ OTHER 'SPRINGS' (O)

RESIDENTIAL PROPERTY TYPE:
☒ HOUSE (H) ☐ MODULAR HOME (M) ☐ MULTIPLE FAMILY (U)
☐ SINGLE MOBILE HOME (S) ☐ DOUBLE WIDE (D)
☐ OTHER (O)

NUMBER OF BEDROOMS:
NUMBER OF OCCUPANTS:

COMMERCIAL / INDUSTRIAL PROPERTY TYPE:
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:

INDUSTRIAL WASTES? ☐ YES ☐ NO
UNDERGROUND STORAGE TANKS? ☐ YES ☐ NO

ADDITION TYPE ATTACHED TO EXISTING STRUCTURE:
☐ BEDROOM ☐ BATHROOM ☐ KITCHEN ☐ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☒ 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

*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 — Date: 3-31-05

*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 y this Department.
- This permit is not transferable.

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

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

EHS Signature Jerry Mathis Date 4/6/05

PROPOSED PLOT PLAN

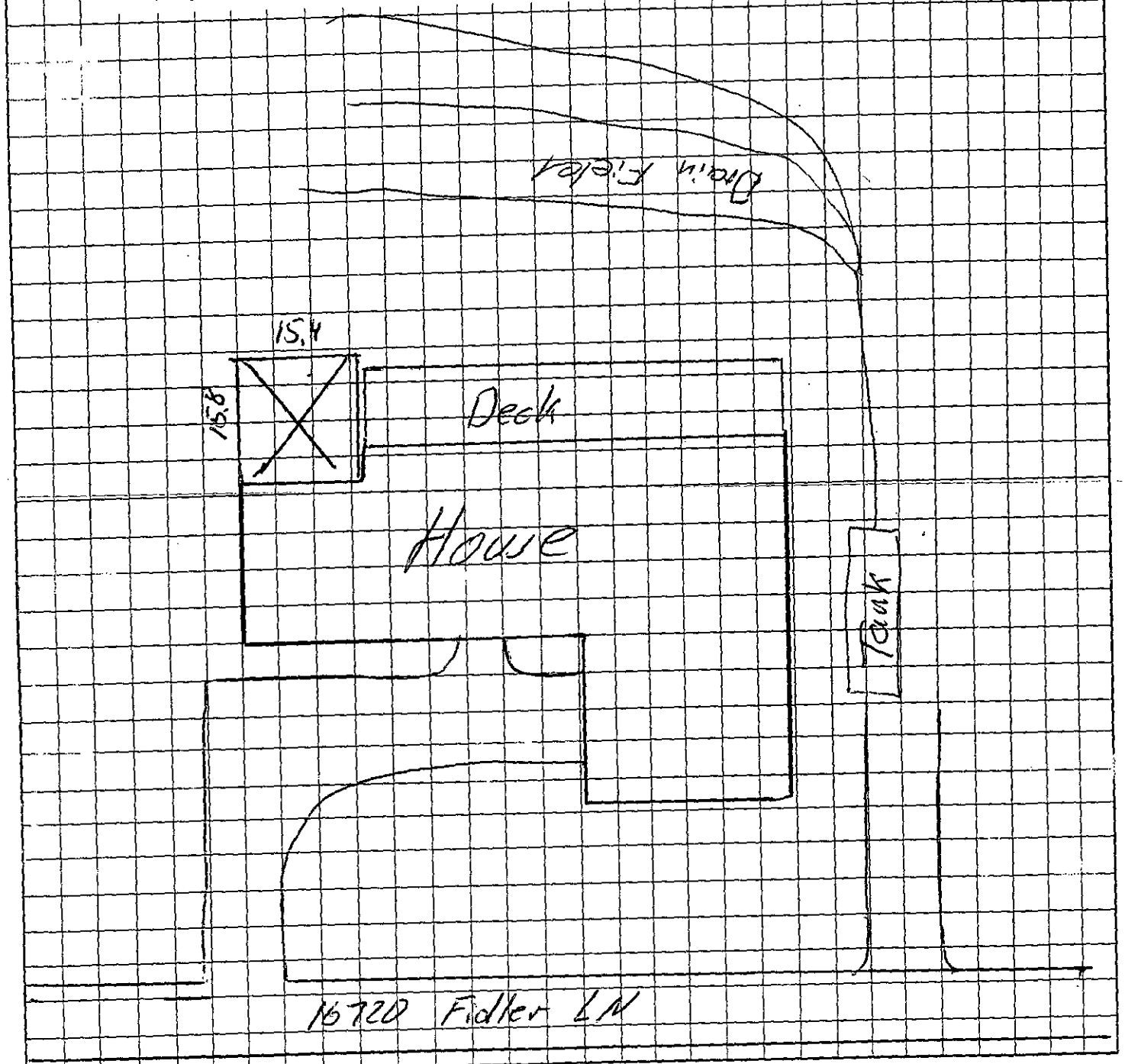
COPY

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5103

FILE: 1069D

TC: 001-531-25

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.



Norbert Steinwedel
OWNER/AGENT SIGNATURE

DATE 3-31-05

APPROVAL DATE _____

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

D1600

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

FILE: 1069B/9041A DATE: 3/31/94

TC: 001 531 25 ~~CL~~ ☐ CRT

SERIAL Nº 15836

Name of Owner Lyle Calkins Juris.:

Address of Property 7349 Norman Island Dr

Inspection Data:

Tank Material PCC

Total Length of Drainfield 405

Number of Lines WL 2 + SL 3 @ WL 135 + SL 270

Cover Depth 8" - 12"

Water Supply Source CMUD

Distance to Water Source >10'

Excavation Inspected 3/31/94

Tank(s) Inspected 3/31/94

Wash Line Inspected 3/31/94

High Water Alarm Inspected —

PLOT

Design: 1994, 1500 ST, CON, 405SFWL, 810SFWL, 12" stone ceci.l CTR# W. Craytonbury

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: Septic system designed for 3 bedroom residence Type II

Philo S. Walker R.S.
Environmentalist

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

24650

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT Approval

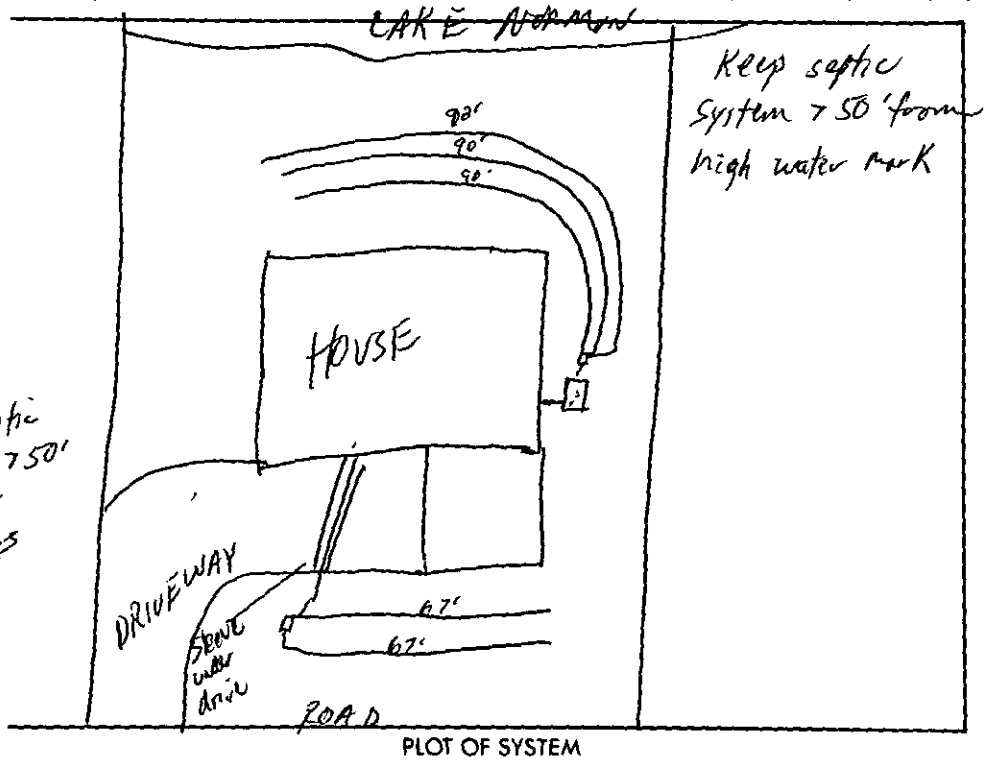
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 1069B/904A DATE: 3/30/94

TC: 001 53125 ☐ L

SERIAL Nº 15649

Permission is hereby given to ✓ 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 7/21/94. All work shall be completed on or before 4/30/94, after which date this permit shall be null and void. The system shall meet all of the construction requirements of ~~10 NCAC 10A~~ 15A .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 PCC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length WL 135+270=405 TC feet

Number of Lines 2+3

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line >5' feet

Distance from Well >50' feet

NAME OF OWNER Lyle Calkins

LOCATION OF PROPERTY 7349 Norman Island Dr

Comments: 1500ST, (SL) 3 lines x 90'long x 3'wd x 12"stone (WL) 2 lines x 67'long x 3'wd x 12"stone / Lines to be installed on 7'centers / CMUD water Keep septic system >50' from neighbors well, sleeve tube installed under driveway

Division or Section Head

Phila S. Walker R.S.
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 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

Mr Walker
336-5713

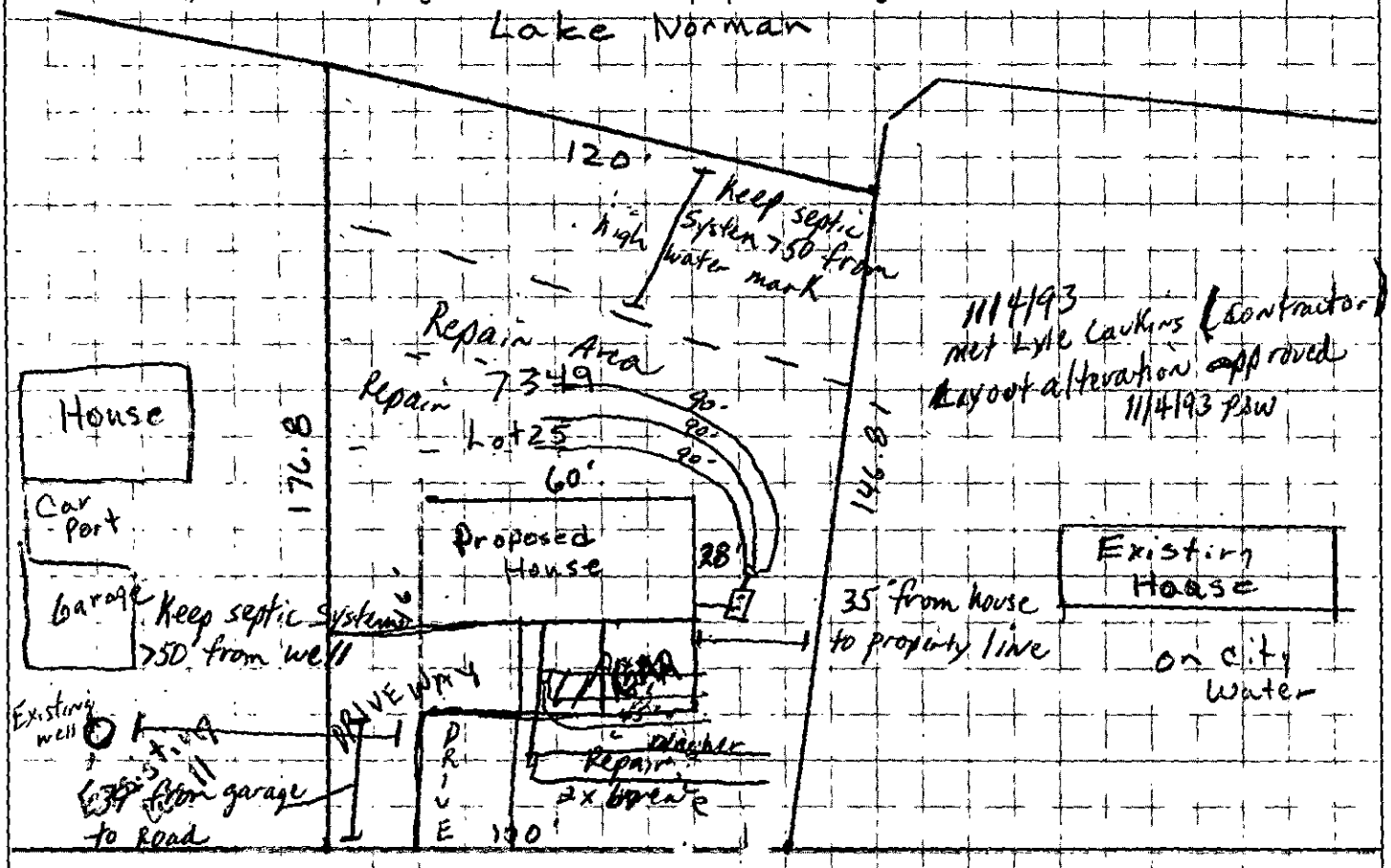
PROPOSED PLOT PLAN

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

FILE: 1069B/904A

TC: _____

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.



1114/93 met Lyle Caulkins (contractor) layout alteration approved 11/4/93 PSW

1500 ST
master 3 lines x 45'long x 3'wd x 12" stone
septic 3 lines x 90'long x 3'wd x 12" stone
135 + 270 = 405 LF
Keep septic system 750' from any well
CMUD water
Keep septic system 750' from high water mark

39' from garage to road
35' from right side of house to property line
Repair (NO 100% repair required)

Lyle Caulkins 7/21/93

APPROVAL DATE PSW 7/21/93 appr

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

fld # 1069B / 9041A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES CR#1156 $200.00 07/09/93 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: Calkins (last) Lyle (first) E (mi)

ADDRESS: 20468-P Chatwell Ct. PHONE: (704) 892-1383

CITY: Davidson STATE: NC ZIPCODE: 28036

Date: 7/10/93

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 001-231-25

STREET ADDRESS: ~~00 NORMAN PLACE~~ 7349 NORMAN ISLAND

ZONING:

PROPERTY OWNER:

NAME: Robinson (last) Helen (first) A (mi)

ADDRESS: 2633 Juniper PHONE: (__) _____

CITY: Charlotte STATE: NC ZIPCODE: 28078

SUBDIVISION OR MOBILE HOME PARK NAME: Norman Island

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

TYPE APPLICATION (check one):

LOT NUMBER: 25 LOT SIZE (in acres): .39

[] SOIL TEST - INDIVIDUAL LOT (D)
[X] 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) [X] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [] MODULAR HOME (M) [] OTHER _____ (O)

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 3

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)
[X] 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 [X] 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: Lyle Calkins Date: 7/10/93

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the 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.

...Lyle Calkins

NO 100% repair required

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

Philo S. Walker 7/21/93
Environmentalist Date

Director or Authorized Section Head Date

WWATER : 122791

Mecklenburg County

Health Department

Betty S. Snow, R.N., M.A.
Health Director

July 1, 1993

Helen A. Robinson
2633 Juniper Drive
Charlotte, NC 28078

RE: Property located on 7349 Norman Island Drive
FILE: 1069B/9041A
PARCEL: 001-531-25

Dear Ms. Robinson:

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 property was found to contain a limited area of soils which were classified as PROVISIONALLY SUITABLE for such an installation. A copy of the Site Evaluation Report (Serial Number 19406) is enclosed for your information.

While this classification indicates the site is acceptable for the installation of a septic tank system, no specific system or plans have been approved. The area available for such an installation may impose limitations on the size and/or type construction permitted on the lot. Specific plan approval will be provided upon submission of 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 and determination that the area is adequate to accommodate the proposed construction.

Please note that this classification may be revoked if any filling, grading or construction (including the drilling of a well) is performed on the lot which in the opinion of this department renders any area previously designated suitable for system installation, unsuitable. Furthermore, this approval may be revoked should any changes occur in the regulations under which it was granted, if such changes would have prevented its approval had they been in effect on the date of issuance.

If there are any questions concerning this matter, please contact Bill Marlin, Soil Scientist at 336-5574.

Sincerely,

Kelly Randall, R.S., Soil Scientist
Individual Water and Wastewater Systems

KR:lw

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 19406

File: 1064B 1041A
Action 1
Parcel: 001-531-25
☐ PC

Location: 7349 Norman Island Dr.

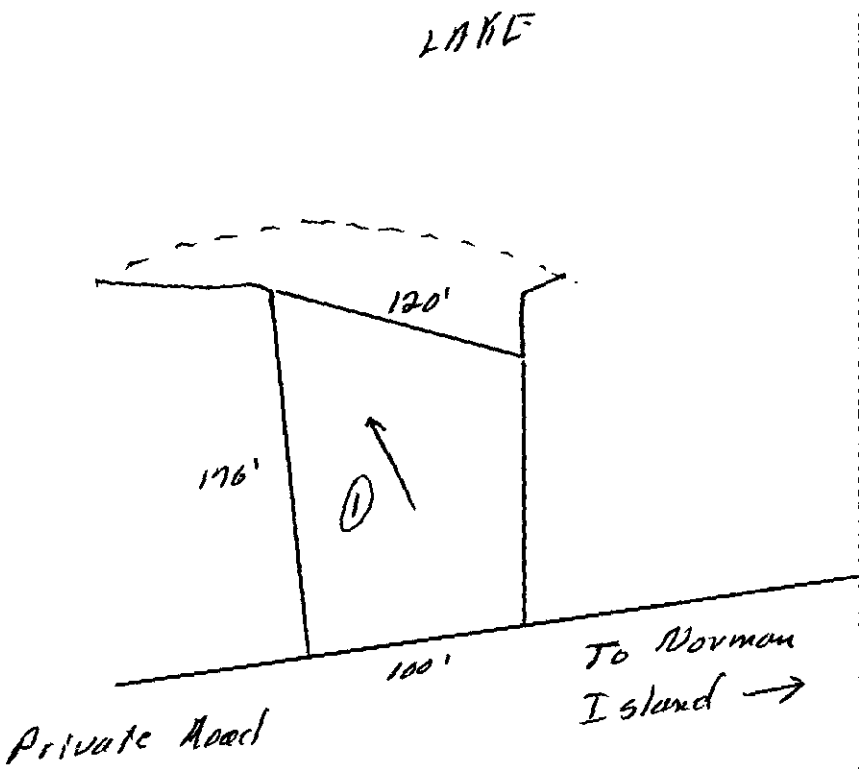
Subdivision:

Lot: Block: Acres: .39

Owner: Helen A. Roberson
Address: 2633 Juniper Dr.
Charlotte, N.C. 28078

Comments: .3 gal/ft²/day LTAR
Not sure of wells on
adjacent lots

Described by: William A. Marlin
Date: 7-1-93



*** 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 to 10%	S PS U	S PS U	S PS U	S PS U	S PS U
Texture	(S) PS U Slightly Expansive clay	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Sub-Blocky	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U 7-40" To water	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 40"+	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 40"+	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S (PS) U Limited	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	IV Cecil-Lloyd					
Area Classification	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

06/23/93

~~1069B/7044/9041A~~ CK# 1117 $50.00 [] 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: Calkins (last) Connie (first) L. (mi)

ADDRESS: 10513 Conistan Place PHONE: (704) 896 0614

CITY: Huntersville STATE: N C ZIPCODE: 28078

Date: 6/21/93

PROPERTY OWNER:

NAME: Robinson (last) Helen (first) A. (mi)

ADDRESS: 2633 Juniper Dr. PHONE: (704) 596-1333

CITY: Charlotte STATE: N C ZIPCODE: 28269

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 001 531 25

STREET ADDRESS: 7349 NORMAN ISLAND DR. HUNTERSVILLE, N.C. 28078

ZONING: RR

SUBDIVISION OR MOBILE HOME PARK NAME:

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

TYPE APPLICATION (check one):

LOT NUMBER: ~~7349~~ 25 LOT SIZE (in acres): .39

[X] SOIL TEST - INDIVIDUAL LOT (O)
[] 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)
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[] REPAIR TO SYSTEM (R)

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[] SINGLE MOBILE HOME (S) [X] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [] MODULAR HOME (M) [] OTHER _____ (O)

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS:

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ___ Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type _____

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[X] 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: ~~[illegible]~~ Helen Robinson Date: 6/21/93

NOTICE:

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...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

WWATER : 122791

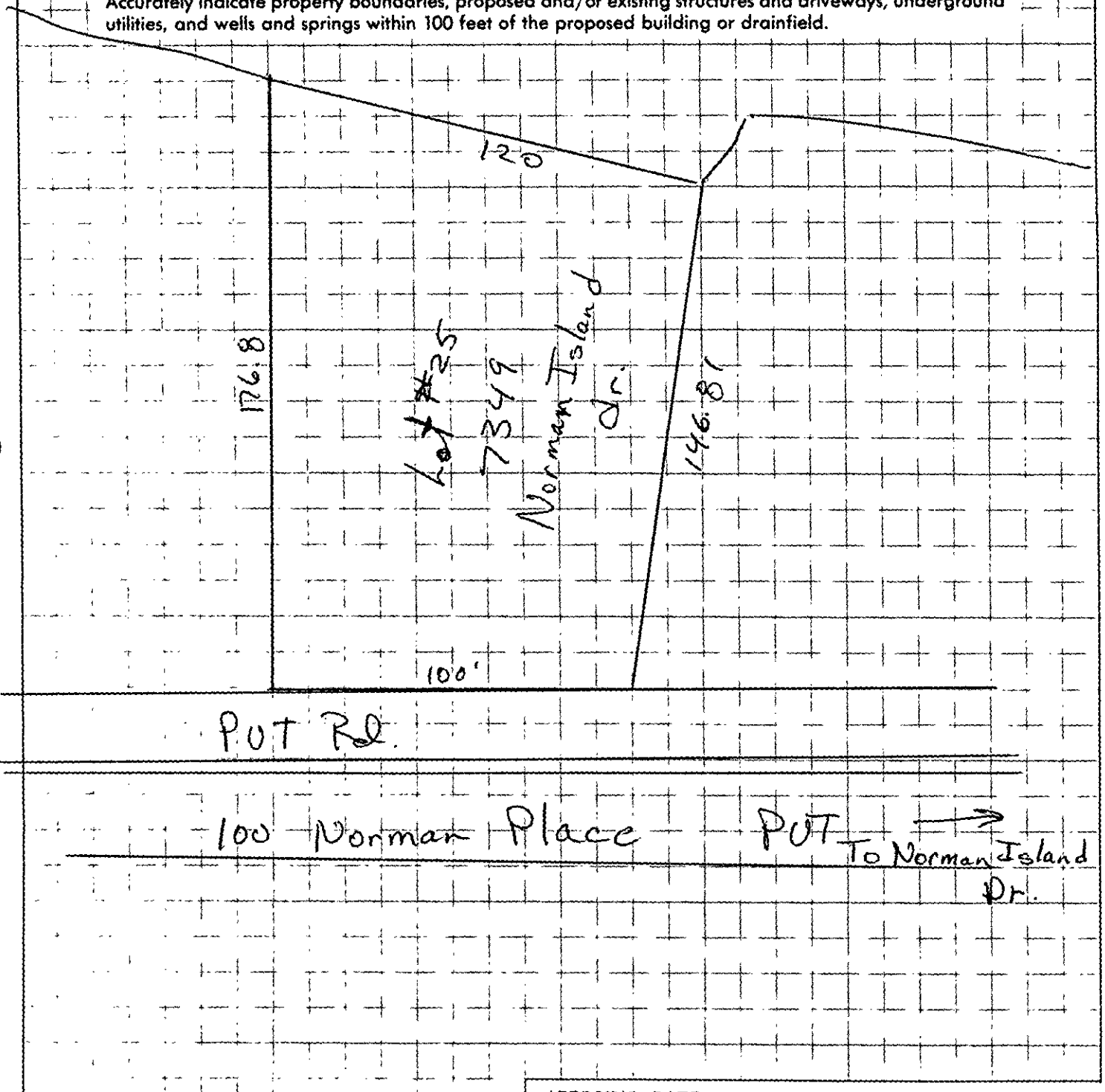
PROPOSED PLOT PLAN

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

FILE: 10698190411A

TC: _____

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

5

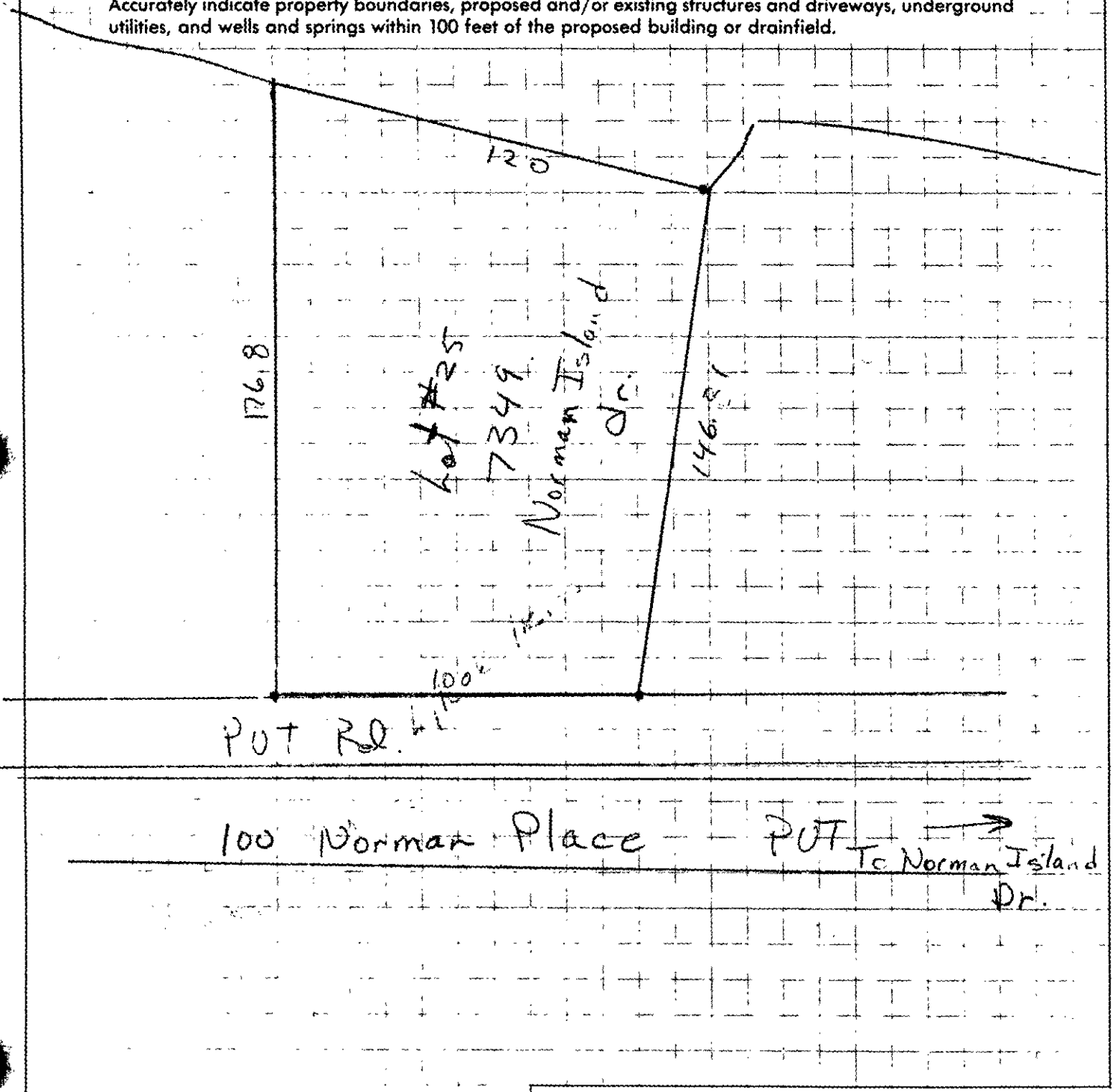
PROPOSED PLOT PLAN

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

FILE: 106P1 4.41A

TC: _____

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

7349 Norman Island Drive

STATE OF NORTH CAROLINA
MECKLENBURG COUNTY

INDIVIDUAL DEED
Printed and for Sale by
Kale-Lawing Co., Charlotte, N. C.

This Deed

Made this 26th day of May, A. D. 19 67 by and between

THOMAS LONG FIDLER (Unmarried)

of the County of Roanoke and State of Virginia Part Y of the first part, and

HARLIN S. ROBINSON and Wife, HELEN PURSER ROBINSON

of the County of Mecklenburg and State of North Carolina part ies of the second part:

WITNESSETH, that the said part Y of the first part, in consideration of ONE HUNDRED DOLLARS AND OTHER VALUABLE CONSIDERATIONS ~~Dollars~~ to him paid by the part ies of the second part, the receipt of which is hereby acknowledged ha s bargained and sold, and by these presents do es grant, bargain, sell and convey unto the said parties of the second part and their heirs, all that certain tract or lot of land, situate, lying and being in Lemley Township, Mecklenburg County, State of North Carolina, and more particularly described as follows:

BEGINNING at a point on the J. D. McAulay Heirs line (now or formerly), the southwest corner of Lot No. 15 (said point of beginning being also South 23-43 East 624.5 feet from a stone on the Elizabeth James line or corner); thence with the J. D. McAulay Heirs line South 23-43 East 100 feet to an iron stake, the northwest corner of Lot No. 13; thence with the line of Lot No. 13 North 72-24 East 146.8 feet to an iron stake on the contour line of elevation 760 feet; thence with the said contour line North 10-4 West 120 feet to an iron stake, the southeast corner of Lot No. 15; thence with the line of Lot No. 15 South 66-20 West 176.8 feet to the Beginning, and being Lot No. 14 as shown on an unrecorded map of the D. A. Fidler Heirs property prepared by J. C. Gamble, Registered Surveyor, dated October 2, 1963, BUT EXCEPTING FROM THE ABOVE CONVEYANCE a strip of land 20 feet in width running along the westerly side of said lot which was reserved from a deed conveying the property to the party of the first part recorded in Book 2488 at page 13 of the Mecklenburg County Registry, and which strip of land was conveyed in fee simple to the Town of Huntersville by all of the parties thereto by a deed recorded in Book 2762 at page 489 of the Mecklenburg County Public Registry, to which deed reference is hereby made.

(Continued)

BEING the same property (with the exception hereinabove noted) conveyed to Thomas Long Fidler by deed from Roy Leo Fidler, et al, recorded in Book 2488 at page 13 of the Mecklenburg County Registry.

STATE OF NORTH CAROLINA
County of UNION } SS.

I, Bobbie S. Godfrey, a Notary Public

for said County and State do hereby certify that

Thomas Long Fidler (Unmarried)

/sic/

/////////, personally appeared before me this day

and acknowledged the due execution of the foregoing (or annexed) instrument.

~~Let the instrument and the certificate be registered.~~

WITNESS my hand and notarial seal, this 26 day of May, A. D. 19 67

Bobbie S Godfrey

My Commission Expires: April 20, 1968. Notary Public

STATE OF
County of } SS.

I,

for said County and State do hereby certify that

and

wi, personally appeared before me this day

and acknowledged the due execution of the foregoing (or annexed) instrument.

Let the instrument and the certificate be registered.

WITNESS my hand and seal, this day of , A. D. 19

1967 Mar 29 4 30

J. EDWARD STOKES, C. S. C.
BY DEPUTY

INDIVIDUALS

THOMAS LONG FIDLER
(Unmarried)
TO
HARLIN S. ROBINSON and Wife,
HELEN PURSER ROBINSON
Mailing Address

Consideration $ 100/OVC
Dated day of , 19 67

Filed for registration on the 29
day of May, 1967, at 4:30
o'clock P. M., and registered in the office of
Register of Deeds for MECKLENBURG County, N. C.
on the 31 day of May, 19 67, at 7:00
o'clock A. M., in Book 2861 of Deeds, on
Page 63, &c.

EDGAR SMITH
Register of Deeds
By

Deed

Drawn By: CRAIGHILL, RENDLEMAN & CLARKSON

STATE OF NORTH CAROLINA
County of Mecklenburg } SS.

The foregoing (or annexed) certificate of Bobbie S. Godfrey, a Notary Public
for Union County, State of North Carolina

is adjudged to be correct. Let the instrument and the certificate be registered.

This 29th day of May, A. D. 19 67

J. EDWARD STOKES, ~~CLERK SUPERIOR COURT~~
BY Jo Ann Ford Deputy Clerk
DEPUTY

TO HAVE AND TO HOLD the aforesaid tract or lot of land and all privileges and appurtenances thereto belonging to the said parties of the second part, their heirs and assigns, to their only use and behoof forever.

And the party of the first part, for himself, his heirs, executors and administrators, covenants with the said parties of the second part their heirs and assigns, that he is seized of said premises in fee, and has right to convey the same in fee simple; that the same are free and clear from all incumbrances, and that he will warrant and defend the said title to the same against the lawful claims of all persons whomsoever., except for enforceable easements and restrictions of record, and 1967 Ad Valorem Taxes.

IN TESTIMONY WHEREOF, the said party of the first part to these presents has hereunto set his hand and seal, the day and year above written.

Signed, sealed and delivered in the presence of

Thomas Long Fidler (Seal)
Thomas Long Fidler
(Unmarried)

(Seal)

(Seal)

(Seal)