

4116 HOODRIDGE LN

19522205

1/3/2008

duponbj

Groundwater and Wastewater Services File Imaging Project

May 2007

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INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

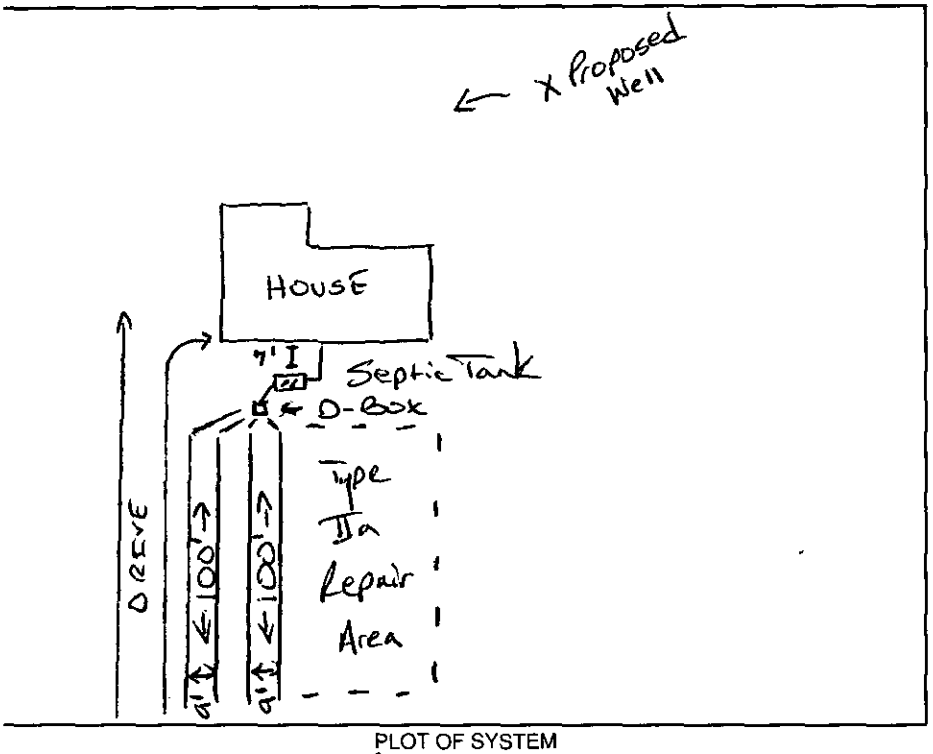
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 3678 B DATE: 4-17-96

TC: 195-043-70 ☐ L

SERIAL Nº 16787

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 8-8-95. All work shall be completed on or before 5-17-95, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A. 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

Hoodridge Lane

Liquid Capacity of
Septic Tank 1500 gallons

Liquid Capacity of
Dosing Tank N/A gallons

Tank Construction PCC

Trench Depth 28"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous Yes

Total Line Length 400 feet

Number of Lines 4

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well 100 feet

NOTICE: This system shall not be installed while soils are in a wet condition.

NAME OF OWNER Melvin H. Thomas

LOCATION OF PROPERTY 9116 Hoodridge Lane

Comments: Type IIa 3 bedroom house
(4) 3'W x 100', x 12" stone

S Bateman for S Daniel, Program Chief 5-17-96

Larry B. Thompson, Jr., R.S.
Environmental Health Specialist

WHITE - HEALTH DEPARTMENT's COPY • CANARY - E.H.S. COPY • PINK - OWNER OR AGENT's COPY

400 LF

150' LF 278 8/9/95

3678B

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: Davis (last) Perry (first) A (mi)

ADDRESS: PO Box 23629 PHONE: (704) 545-9160

CITY: Charlotte STATE: NC ZIPCODE: 28227

Date:

PROPERTY OWNER:

NAME: Thomas (last) Melvin (first) H. (mi)

ADDRESS: 9325 Blair Rd PHONE: (704) _____

CITY: Charlotte STATE: NC ZIPCODE: 28227

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 195-043-70

STREET ADDRESS: 4116 Hadridge Ln.

ZONING: _____

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

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: 4 LOT SIZE (in acres): 1.19

TYPE APPLICATION (check one):

[ ] 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: 2

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)
[X] 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: Perry Davis Date: 8/8/95

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.

... Type IIa for a new 3bedroom house. (4) 3'wx100'Lx12"stone 24"deep

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

Tommy B. Thompson Jr. R.S. 9-7-95
Environmentalist Date

Director or Authorized Section Head 9-8-95 Date

WATER : 122791

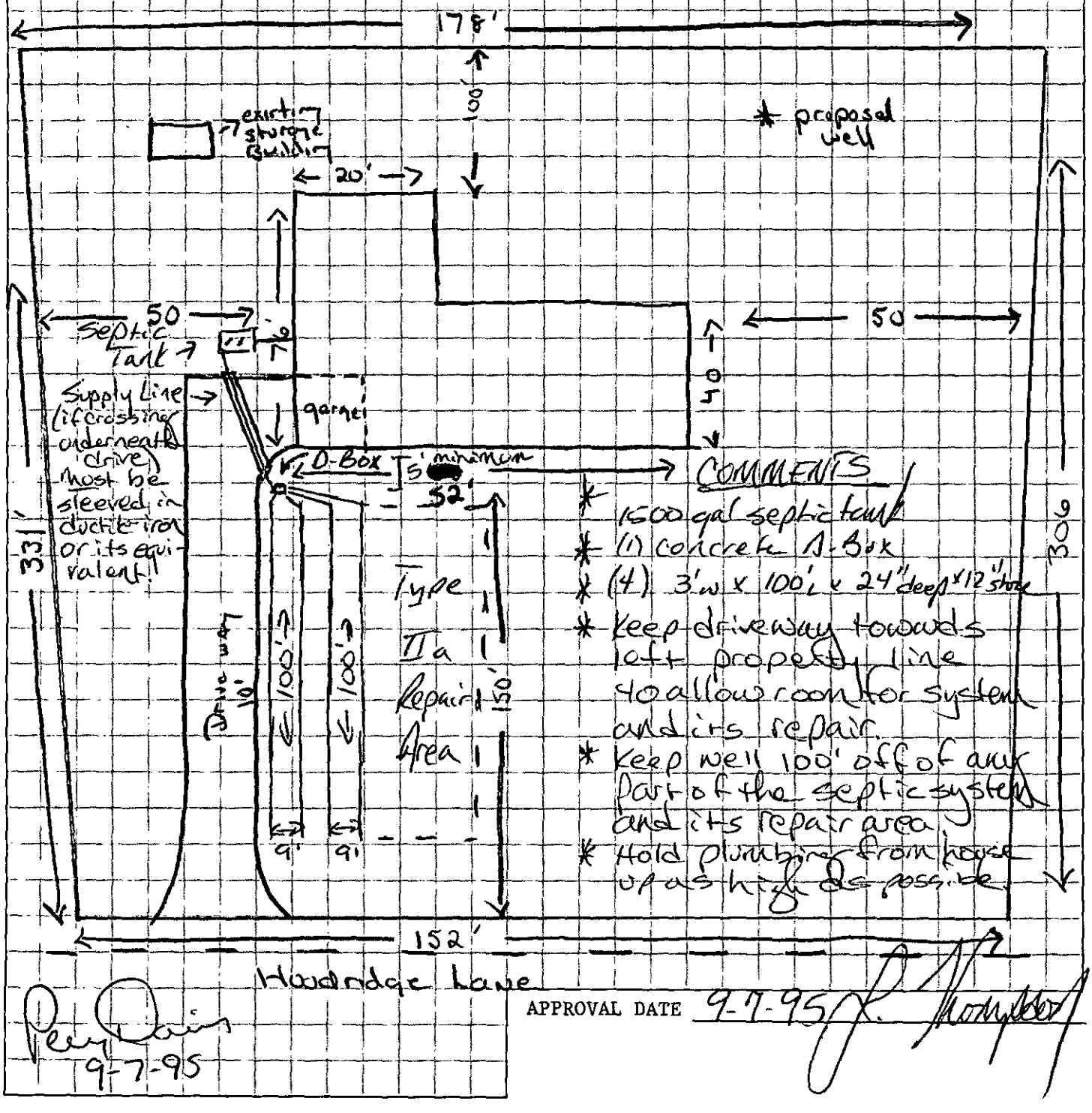
PROPOSED PLOT PLAN

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

FILE: 3678B

TC: 195-043-70

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.



Perc Date 9-7-95

APPROVAL DATE 9-7-95

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

DATE 8/9/95

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION Mint

195-043-70
PARCEL NUMBER

4116 Woodruff Ln
ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

NA
PROJECT NAME (IF APPLICABLE)

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

1. SUBDIVISION REGULATIONS	**APPROVED**	**NOT APPROVED**
2. FLOODWAY REGULATIONS	**APPROVED**	**NOT APPROVED**
3. WATERSHED PROTECTION	**APPROVED**	**NOT APPROVED**
4. COMMERCIAL DRAINAGE PLAN	**APPROVED**	**NOT APPROVED**
5. PUBLIC UTILITY EASEMENT	**PRESENT**	**NOT PRESENT**
6. PROPERTY FRONTS ON THOROUGHFARE	**YES**	**NO**
7. DRIVEWAY PERMIT REQUIRED	**YES**	**NO**
8. DOES PROJECT CONFLICT WITH ROAD PROJECT?	**YES**	**NO**

REMARKS: S/D Done

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE WHEN PAYING PERMIT FEE. CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

ALL OTHER FORMS OBSOLETE

☐ NEW ADDRESS

SIGNED: [signature]

REVISED 1/91

1460

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 028673

File: 36 18B Action 1

Parcel: 195-043-70 ☐ PC

Location: 4116 Woodridge Lane

Subdivision:

Lot: 4 Block: Acres: 1.2

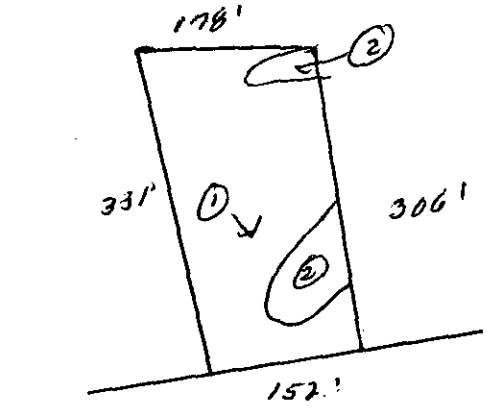
Owner: Melvin H. Thomas
Address: 9325 Blair Road
Charlotte, N.C. 28227

Comments: .3 gal/ft²/day
not sure if lot is 100%
repair

Described by: William R. Marks

Date: 8-25-95

NW



***** 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 2-8%	S PS (U) Depression	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U slight/l Exp. clay	S PS U —	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Block/l	S PS U —	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U wetness 7-40" to soil	S PS U —	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 32-40"	S PS U —	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 7-40"	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	IV Cecil/Lille	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 028673

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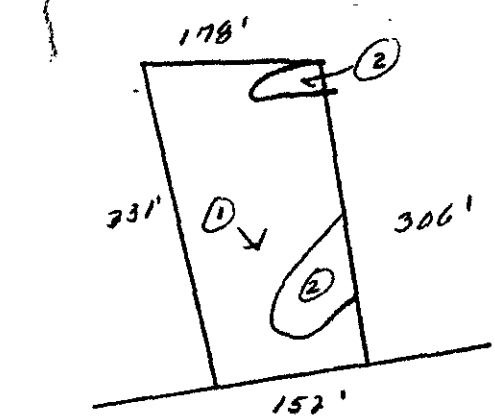
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Woodridge
Lane

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Texture	S (PS) U slight Exp. Clay	S PS U —	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U —	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U 740" To soil wetness	S PS U —	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 32-40"	S PS U —	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 740"	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	IV Cecil/Lloyd	Depression				
Area Classification	S (PS) U	S PS (U)	S PS U	S PS U	S PS U	S PS U