Date Received 4-11-85

RECEIVED
APR 1 1985
ENVIRONMENTAL HEALTH

APT No. 229A

T. C. No. PO 053-101-02

Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Barefoot (LAST) Jerry (FIRST) C, (MIDDLE)

2) ADDRESS OF OWNER Route 14, Box 325, Charlotte, N. C. ZIP 28208

3) PHONE NO. Home ___ Office 399-7765

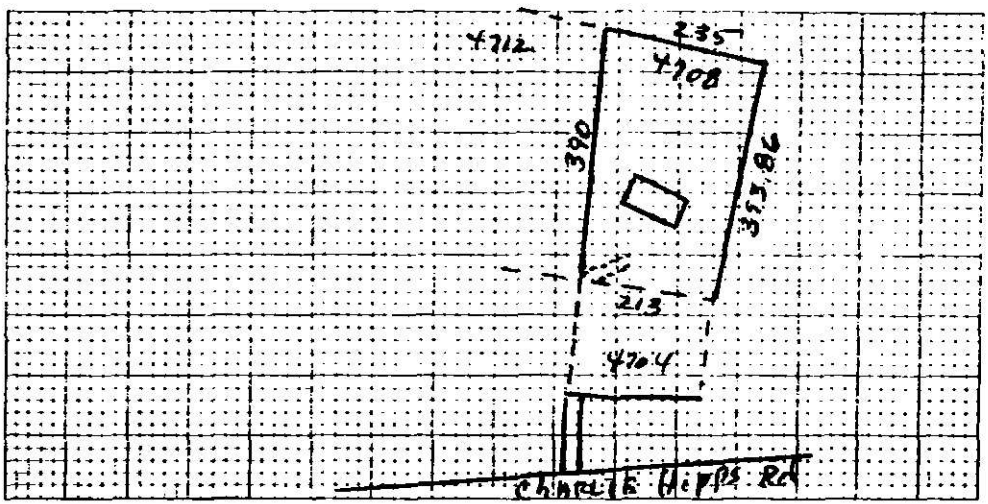
4) LOCATION OF PROPERTY 4708 Charlie Hipps Road, Charlotte, N. C. 28208 (STREET OR COUNTY ROAD)

5) SUBDIVISION ___ LOT NO ___ BLOCK NO. ___

MAP BOOK NO ___ PAGE NO ___

6) DEED REFERENCE DEED BOOK ___ PAGE NO ___

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation and an on-site inspection of the lot hereinabove described for the purpose of determining if the lot is suitable for the installation of an individual septic tank wastewater treatment system with subsurface soil absorption effluent discharge.



7) ACCURATELY DIAGRAM & DIMENSION LOT

Jerry C Barefoot
OWNER

EHD-5-76

Environmental Health Department's Copy

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 229A

T.C. NO. P.D. 053-101-02

(Ground Absorption Sewage Disposal)

OWNER: Jerry Beaufoot
ADDRESS: R-14 Box 325 28208
LOCATION OF SITE: 4708 Charlie Hipps Rd

PLAT NO:
LOT SIZE: 2A

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) 2-6 U	S PS Complex Slopes U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) Clayey U	S PS In Cecil U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) Blocky U	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) 36-45 U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) None U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) Adequate U	S PS U	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IVa	IVa		
9. SITE CLASSIFICATION	Provisionally Suitable	Unsuitable		
10. SOIL SERIES	Cecil	Complex Slopes in Cecil * See map.		

S - Suitable PS - Provisionally Suitable U - Unsuitable

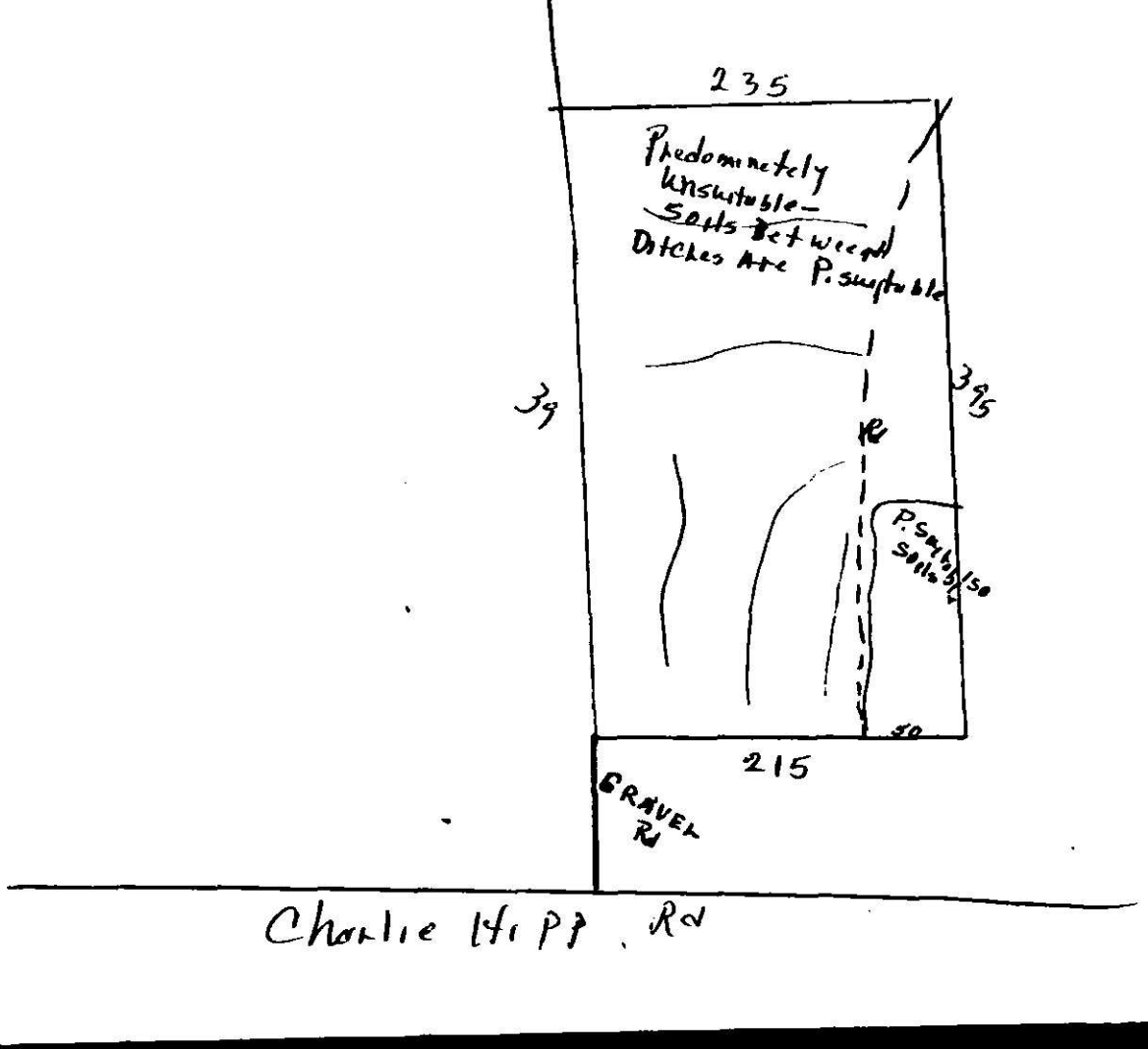
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: Pump Required - When House is marked off, Recheck For possible split system By gravity

Described by: Willard Ramsey
Title: Soil Scientist

Date: 5-9-85

1d


235
Predominately
Unsuitable-
Soils between
Ditches Are Poss Suitable
395
395
RR
Poss Suitable Soils
150
50
215
GRAVEL
RD
Charlie Hipp Rd

229A

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 229A

T.C. NO. PO.053-101-02

(Ground Absorption Sewage Disposal)

OWNER: Jenny Bare foot
ADDRESS: R-14 BOX 385 28208
PLAT NO:
LOT SIZE: 2A

LOCATION OF SITE: 4700 Charlie Hipp Rd

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U — 2-6	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) U — Clayey	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) U — Blocky	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) U — 48-45	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U — None	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) U — Adequate	S PS U	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U

8. SOIL GROUP — IVe

9. SITE CLASSIFICATION — P. Suitable

10. SOIL SERIES — Cecil

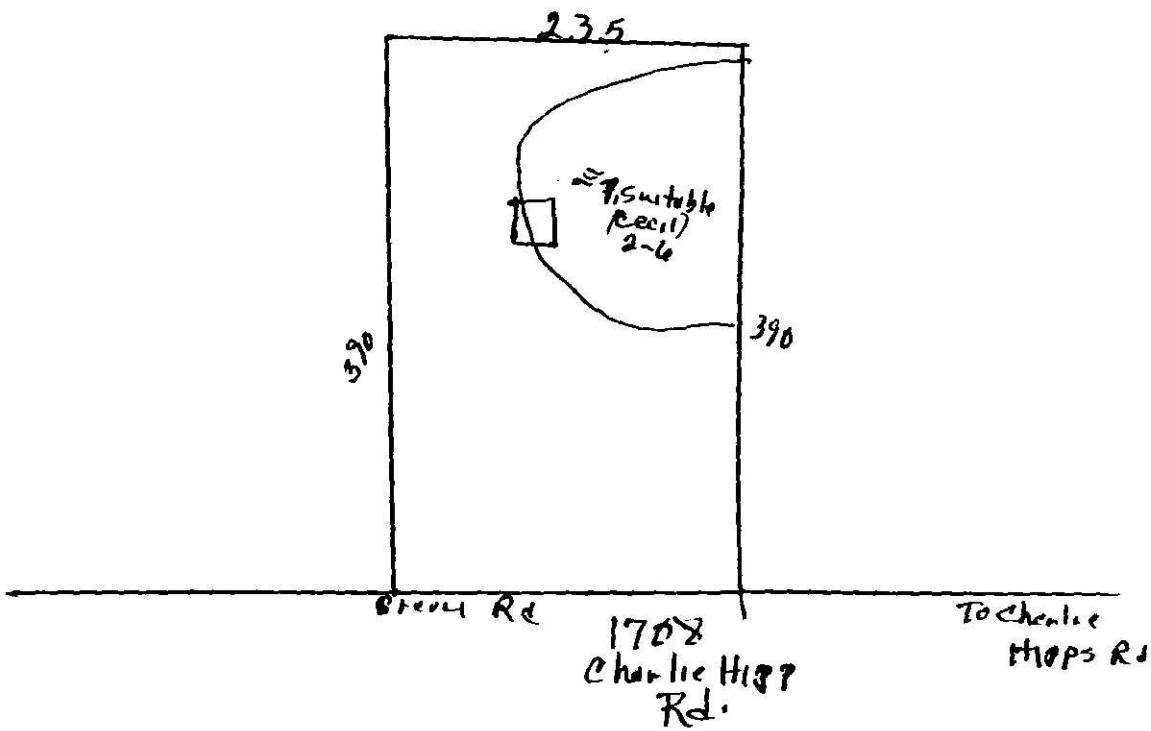
S - Suitable PS - Provisionally Suitable U - Unsuitable

**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: W. B. Ramsey
Title: Soil Scientist

Date: 5-8-85


235
≈ 7 Suitable Recn 2-6
390
390
Steven Rd
1708 Charlie Hope Rd.
To Charlie Hopps Rd

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203

SIR. NO. 229A
T.C. NO. PO 053-101-02
DATE: 5/10/85
L

Jerry C. Barefoot
Route 14, Box 325
Charlotte, N. C. 28208

RE: Property located at 4708 Charlie Hipps Road

Dear Mr. Barefoot:

At your request, a field investigation was conducted on the property designated above. The soils on the property were found to contain a limited area of provisionally suitable soil for the installation of a ground absorption sewage disposal system. A copy of the site evaluation report is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit plot plans for the proposed construction, well, and ground absorption sewage disposal system to this office. They will be reviewed and if it is found that there is an adequate area of provisionally suitable soil to accommodate the proposed installation, an Improvements Permit will be issued by this office.

If I may be of assistance, please feel free to call.

Sincerely,

Bill D. Hardister, Jr.
Environmental Health Supervisor

BDH/kbg

Enclosure

SEE INSTRUCTIONS ON BACK

Date Received 5-14-85

MAY 14 1985

ICAR(S) Application No. 229-A

T. C. No. 053-101-02

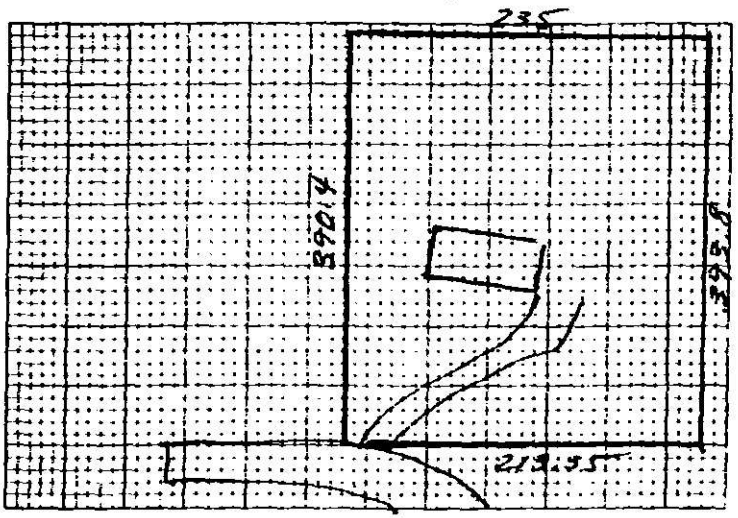
Map Date L

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) X Install or Construct 2) ___ 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 X Yes ___No

4) No. of Bedrooms 2

5) Business Use — Max No Employees ___

6) Washing Machine X Yes ___No

7) Garbage Disposal ___Yes X No

8) Dishwasher ___Yes X No

9) Water Supply:
A) Individual Well X
B) Governmental System ___
C) Community System:
1. Well source ___
2 Governmental source ___

10) Sewage System:
House located within 200 feet of public sewer ___Yes X No
House located within 200 feet of community sewer ___Yes X No

11) FHA Case No ___

12) VA Case No. ___

13) NAME OF OWNER Barefoot (LAST) Jerry (FIRST) C (MIDDLE)

14) ADDRESS OF OWNER Route 14, Box 325, Charlotte, N. C. 28208

15) PHONE NO. Home 399-7765 Office ___

16) LOCATION OF SYSTEM 4708 Charlie Hipps Road, Charlotte, N. C. 28208 (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? X YES ___ NO DATE RUN May 8, 1985

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.

May 8, 1985
DATE OF APPLICATION

Jerry C Barefoot
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued 5/13/85

Serial No. 8514

SIR No. 229 A

T. C. No. PO 053-101-02

Map Date L 661

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Barefoot, Jerry C. _____
LAST FIRST MIDDLE

ADDRESS OF OWNER Route 14, Box 325, Charlotte ZIP 28208

LOCATION OF LOT 4708 Charlie Hipps Road, Charlotte, N. C.
STREET OR COUNTY ROAD

SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. _____

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, on an on-site inspection of the said lot; and upon the information supplied in the "Application for an Installation, Construction, Alteration, and/or Repair Permit", number 229A. This approval is subject to the following terms and conditions:

1. That the nitrification field be installed, constructed, altered and/or repaired in the same area where the soil investigation was run.
2. That an "Installation, Construction, Alteration, and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altered, and/or repaired and that the system be installed in accordance with same.

This approval may be revoked and the building inspection department requested to revoke any building permit(s) which have been issued to authorize construction on the said lot if at any time it is determined that any information contained in the "Application for an Installation, Construction, Alteration, and/or Repair Permit" is not correct or is untrue or that the septic-tank system is not being installed, constructed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit.

B R Ferguson
Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

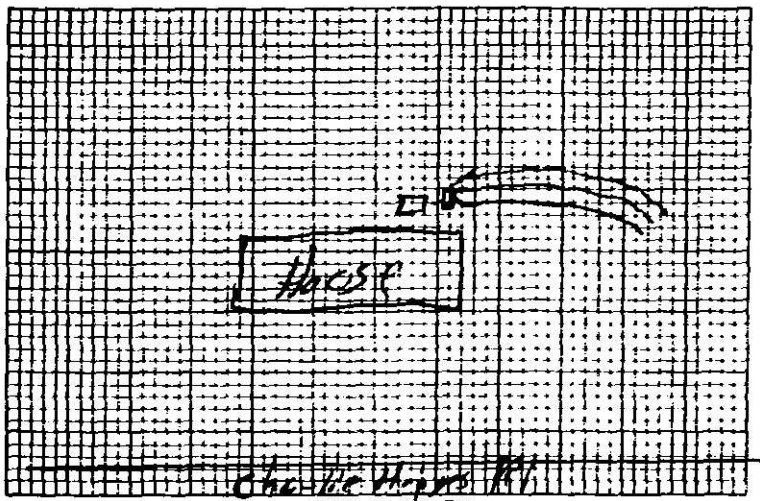
Date Issued 7-30-85 **Serial No.** 08320 ICAR (S) Permit No. 229-A

T. C. No. 053-101-02

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 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 application 229-A, dated 5-8-85 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 8-30-85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate IV 4

Liquid Capacity of Tank 1500 gl

Tank Construction PCC

Absorption and/or Nitrification Lines:

Total Line Length 270'

Number of Lines Three

Distance from House 5'

Distance from Property Line 10'

Distance from Well 750'

NAME OF OWNER Barefoot, Jerry

LOCATION OF PROPERTY 4708 Charlie Hopps Rd.

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 90'X3'X12" Stone

Comments:

B. Handley Jr. — Division or Section Head

Jim Ensminger — 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-S-76

Environmental Health Department Copy

C of A (s) No. 229-A

Date Issued 8-29-85 **Serial** 7807 T. C. No 053-101-02 L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF COMPLETION
CERTIFICATE OF APPROVAL
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner Barefoot (LAST) Jerry (FIRST) (MIDDLE)

Location of Property 4708 Charlie Hipps Rd.

Application Number 229-A Permit Number 229-A

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PCC

Total Length of Drain Tile 270' Number of Lines Three

Depth of Filter Material 12" Cover Depth 24"

Water Supply Source Well Distance from Water Source 750'

Excavation Inspected 8-29-85 (DATE) Tank Inspected 8-29-85 (DATE)

Nitrification Field Inspected 8-29-85 (DATE)

Washing Machine Line Inspected, If Applicable ____ (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been ✓ installed or constructed, ____ altered or repaired in accordance with the permit issued and the regulations of the Mecklenburg County Health Commission in effect on the date of issuance of the permit. The issuance of this Certificate of Approval 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 Certificate of Approval is issued subject to those restrictions and conditions shown on the permit(s) in addition to those listed below under comments. This Certificate of Approval 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 1500ST, Conv, 810SFT, 12G, Exc.'l

J. Grimes
Environmentalist

EHD-5-76

Environmental Health Department Copy

APPLICATION FOR AN IMPROVEMENT PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4403

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

(OFFICE USE ONLY)
FILE:
TC:
SERIAL: № 21835 ☑ L ☐ CRT

JOB LOCATION

① ADDRESS: 4708 (STREET NO) CHARLIE HIPP (STREET) RD. ② FILE:

③ JURISDICTION: ④ TAX PARCEL NO.:

⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: BRIDGET (FIRST) B. (MIDDLE) RHAMES (LAST)

⑨ MAILING ADDRESS: 2601 KENDRICK RD.

⑩ CITY: CHAR. ⑪ STATE: N.C. ⑫ ZIP: 28214

⑬ PHONE: (WORK) ⑭ (HOME)

REQUEST

This request is for a(n):

⑮ ☐ New permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify)

DESIGN CRITERIA

System will serve:

⑲ ☐ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 3 ㉕ Type?

㉓ Maximum occupancy? ㉖ Maximum number of employees?

㉔ Basement? ☐ yes ☐ no ㉗ Maximum number of seats?

WATER SUPPLY

⑳ Water supply from (present or proposed):

A ☑ Individual well

B ☐ Municipal system

C ☐ Community well

D ☐ Community system

㉙ 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: Jim Beaty as agent

Date:

IMPROVEMENT PERMIT

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 permit is issued by this Department.

... This permit is not transferable, and shall become null and void [redacted] months from the date of issuance.

GC

Environmentalist / Date

Director or Authorized Section Head / Date

*This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

FILE: [illegible] DATE: [illegible]

TC: [illegible] 13 of L

SERIAL Nº 13685

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 [illegible]. All work shall be completed on or before [illegible], after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .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 _____ gallons

Liquid Capacity of
Dosing Tank _____ gallons

Tank Construction _____

Absorption and/or Nitrification Lines:

Trench Width _____ feet

Total Line Length _____ feet

Number of Lines _____

Depth of Stone _____ inches

Distance from House _____ feet

Distance from
Property Line _____ feet

Distance from Well _____ feet

NAME OF OWNER [illegible]

LOCATION OF PROPERTY [illegible]

Comments: _____

[signature]
Division or Section Head

[signature]
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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 229 A DATE: 9/26/91

TC: 053.101-13 W/L ☐ CRT

SERIAL № 13824

Name of Owner Bridget R. Rhames Juris.:

Address of Property 470 S Charlie Hipp Rd

Inspection Data:

Tank Material

Total Length of Drainfield 300SFT

Number of Lines 1 @ 50'

Cover Depth 18"

Water Supply Source Well

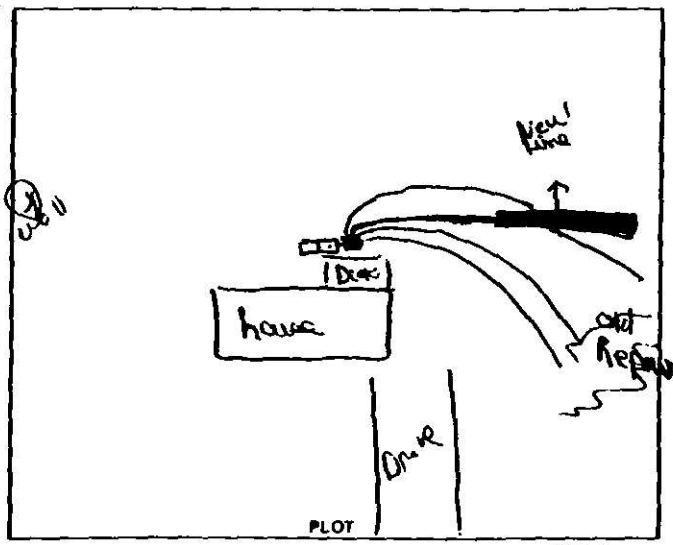
Distance to Water Source ≥ 50'

Excavation Inspected 9/26/91

Tank(s) Inspected

Wash Line Inspected

High Water Alarm Inspected



Design: 1991 Repair CTR# 57

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 plat 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: New PVC Line from D-Box to field 3'x50' 36" Stone. Line leaking low inlet up in D-Box to accept less effluent. Advised tenant to repair leak at toilet

for Jackie A. Kuhn R.S.
Environmentalist

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

Mecklenburg County
Health Department

October 7, 1991

Bridget B. Rhames
2601 Kendrick Drive
Charlotte, NC 28213

Dear Ms. Rhames:

Re: Illegal Repair at 4708 Charlie Hipp Road, (TC 053-101-13)

This department has been informed of an alleged infringement of the sewage regulations on your part concerning a repair made on the sewage disposal system located at 4708 Charlie Hipp Road. We have no record of an application being submitted nor of approvals being given by this department for the alleged repair. If this is in fact an illegal repair and if additional illegal repairs are made in the future we will pursue legal action against you as this is violation of Article 11 of Chapter 130A of the **GENERAL STATUTES OF NORTH CAROLINA - SANITARY SEWAGE SYSTEMS.**

We would appreciate your cooperation with providing us with the name of the individual who allegedly installed the repair.

Registered contractors are aware that: (1) §130-335 requires an approved sanitary sewage system; (2) §130-336 requires an improvement permit to be issued prior to proceeding with construction and/or the installation or repair of a sanitary sewage system; and (3) §130A-337 requires that no sanitary system of sewage collection, treatment and disposal be covered or placed into use until and inspection is made by the local health department. These requirements exist to protect the public's health by preventing groundwater contamination as well as protect the environment.

This correspondence is to advise you that this department suspects an illegal repair of the system was made on your property, to reiterate to you the illegality of such activities under the General Statutes of North Carolina, and to provide formal documentation to be used as evidence in court should notification of such violations reoccur in the future. A copy of this correspondence will be placed in our files for future reference.

Please contact me if you have any questions concerning this matter or feel obligated to reveal the name of the contractor involved.

Sincerely,

Sylvia D. Daniel, R.S.
Program Chief
Individual Water and Wastewater Systems

Environmental Health Division
1200 Blythe Boulevard • Charlotte, North Carolina 28203 • (704) 376-4603

Mecklenburg County
Health Department

October 10, 1991

Howard Lawn Service
3636 Morris Field Road
Charlotte, North Carolina

Re: Illegal Repair at 4708 Charlie Hipps Road, Charlotte, NC

Dear Sir:

This department has been informed of an illegal repair performed by you. If illegal repairs are made in the future on any property in Mecklenburg we will pursue legal action against you as this is a violation of Article II of Chapter 130A of the GENERAL STATUTES OF NORTH CAROLINA - SANITARY SEWAGE SYSTEMS: (1) §130A-335 requires an approved sanitary sewage system; (2) §130A-336 requires an improvement permit to be issued prior to proceeding with construction and/or the installation or repair of a sanitary sewage system; and (3) §130A-337 requires that no sanitary system of sewage collection, treatment, and disposal be covered or placed into use until an inspection is made by the local health department. These requirements exist to protect the public's health by preventing groundwater contamination as well as protect the environment. Further, Section 1900 Rule.1937 (G) requires any person other than the owner or controller of a residence, place of business, or place of public assembly, who engages in the business of constructing, installing, or repairing sanitary sewage systems shall register with the local health department in each county where he operates before constructing, installing, or repairing sanitary sewage systems.

This correspondence is to advise you that this department is aware of the occurrence of an illegal repair, to reiterate to you the illegality of such activities under the General Statutes of North Carolina, and to provide formal documentation to be used as evidence in court should notification of such violations reoccur in the future.

I suggest you contact me if you have any questions concerning this matter.

Very truly yours,

Gene Vaughan, R.S.
Supervisor
Individual Water and Wastewater Systems

Environmental Health Division
1200 Blythe Boulevard • Charlotte, North Carolina 28203 • (704) 376-4803

21324

Mecklenburg County
Health Department

Application for
Inspection of Public Records

By completing the following form, the undersigned does hereby make application to inspect the specified public records under the supervision of authorized personnel. This inspection is in accordance with North Carolina General Statute 132-6.

Name of person making request: Jim Catz

Address: 10121 MOORES CHAPEL RD. CHAR. N.C. 28214

Description of public record requested: ILLEGAL SEPTIC REPAIR LETTER

Street Name (or County Road): CHARLIE HIPP RD.

Lot: _____ Block: _____

Parcel Number: _____

Owner's Name: BRIDGETT B. RHAMES

Reason for Request:

RECOVER PAYMENT MADE FOR ILLEGAL REPAIR THRU SMALL CLAIMS COURT.

Signature of Person Making Request: James M Catz

Supervisory Person: _____

Date: 10/15/11 Time: _____

Environmental Health Division
1200 Blythe Boulevard • Charlotte, North Carolina 28203 • (704) 376-4603