

9313 EDWARD`S PL

13723112

6/22/2007

duponbj

Groundwater and Wastewater Services File Imaging Project

May 2007

Barcode Font = IDAutomationHC39M

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 7021A DATE: 3-22-04

TC: 137-231-12 ☑ L ☑ CRT

SERIAL 19476

Name of Owner DOMELCA WHITE Juris.: _____

Address of Property 9313 EDWARDS PLACE

Inspection Data:

Tank Material 1500 RCC

Total Length of Drainfield 400

Number of Lines 4 @ 100'

Cover Depth 12"

Water Supply Source MUNICIPAL

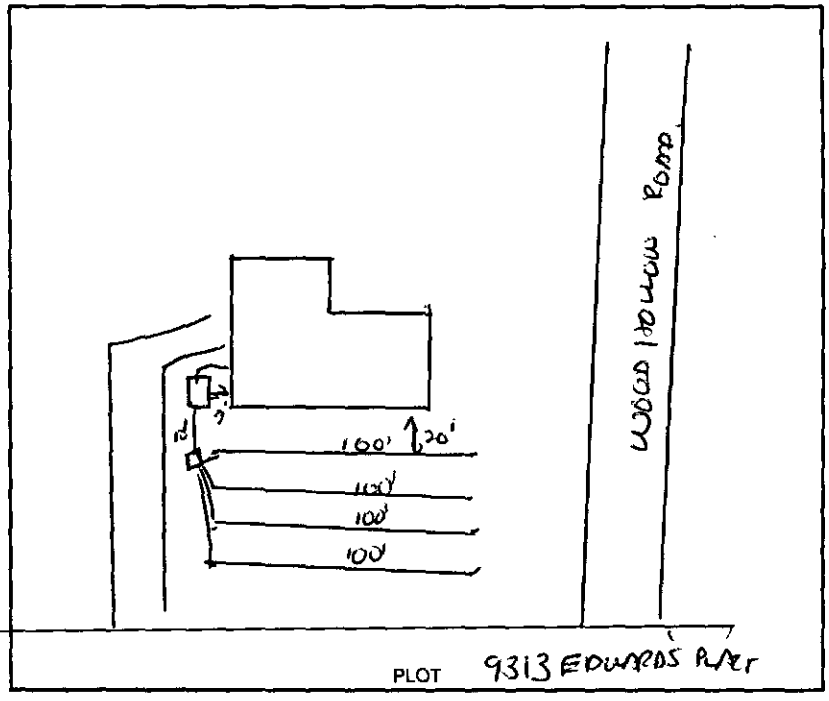
Distance to Water Source >10

Excavation Inspected 3-22-04

Tank(s) Inspected 3-22-04

Wash Line Inspected —

High Water Alarm Inspected —



Design 1500 gal ST 1200 SFT CONV 12-6 CTR# RCS

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 15A NCAC 18A. 1900, "Laws And Rules For Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. This 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 15A NCAC 18A. 1990 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.

Notice: Disturbance of the designated repair area may result in the suspension/revocation of this permit.

COMMENTS: TYPE II

Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

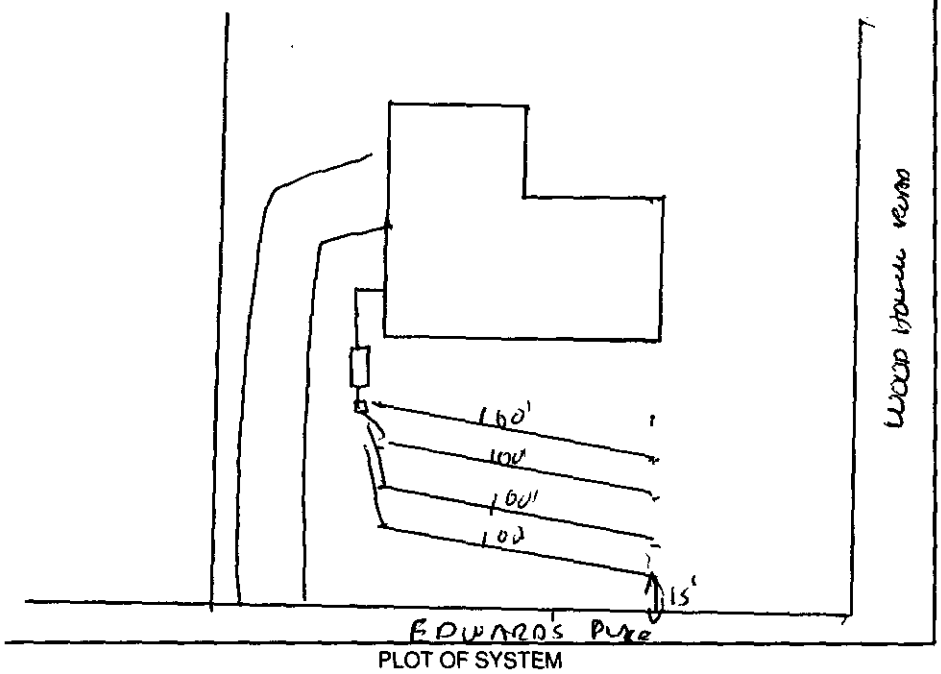
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 7021A DATE: 1-8-04

TC: 137 2312 XL

SERIAL 19654

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 4-14-03. All work shall be completed on or before _____, 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

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank — gallons

Tank Construction PCC

Trench Depth 36"

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 250' feet

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

NAME OF OWNER DOMEICA WHITE

LOCATION OF PROPERTY 931B EDWARD'S PLACE

Comments: (1)

Environmental Health Specialist

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

LD 42758

DO CK # 2066

FEE: 200 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION** ACCS
DATE: 6/24/03 **& VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: 4/25/03 **PERMIT NO:** 7021A

PARCEL NO: 137-231-12

JOB LOCATION ADDRESS: 9313 EDWARD'S PLACE

PROPERTY OWNER: Domeica Davis

BUILDING CONTRACTOR:

SUBDIVISION NAME: BAIN BRIDGE, II, LOT 12

AUTHORIZATION ISSUED BY: [signature] **DATE:** 4-25-03

DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 7021A, AND THE ATTACHED SITE PLAN WITH SYSTEM DETAILS. CONSTRUCTION AND INSTALLATION MUST ALSO MEET ALL REQUIREMENTS SET FORTH IN THE RULES GOVERNING SANITARY SEWAGE COLLECTION, TREATMENT, AND DISPOSAL AND ANY OTHER APPLICABLE RULES AND LAWS.

2. AN INSTALLATION, CONSTRUCTION, ALTERATION AND/OR REPAIR APPROVAL MUST BE SECURED PRIOR TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH MECKLENBURG COUNTY HEALTH DEPARTMENT.

3. ANY ALTERATION IN SITE OR SOIL CONDITIONS (INCLUDING LOCATION OF STRUCTURES AND APPURTENANCES) OR MODIFICATION IN USE, DESIGN WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS AS SPECIFIED IN THE ASSOCIATED IMPROVEMENT PERMIT AND APPLICATION, MAY SUBJECT THIS AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS:

OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITION OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FO REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

X [signature] X 6/24/03

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

CONDITIONS OF IMPROVEMENT PERMIT

Permit Number: 7021A

Tax Number: 137-231-12

The IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be NO grading, filling or disturbance of the soil in the area of the septic tank system or repair area.

CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a Building Permit. The Construction Authorization is NOT transferable. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.

Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

Basement	___ Yes	X No	___ Partial Basement	
Type Primary Wastewater System Type (circle one): I II III IV V VI	X Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1	
3 Long-term acceptance rate	360 Max gallons/day wastewater flow	1200 Absorption Area (sq ft)	9' Trench spacing (min. on centers)	
ND Serviced by private well	1500 Gallon septic tank	400 Total trench length (ft)	28" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)	
3 Bedrooms in residence	___ Gallon pump tank	12" Depth of stone		

Any surface waters present: Type: Minimum separation distance:

Site modifications required:

Additional Conditions:

REPAIR AREA WILL REQUIRE PUMP.

Repair Area System Type Type (circle one): I II III IV V VI	X Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1	
1200 Absorption Area (Sq ft) 400 Total Trench Length (Ft)	12" Depth of Stone Trench	9' Trench spacing (min. on centers)	30" Maximum Trench Depth	

For existing system, enter the year originally installed:

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 Sewage, 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 Improvement permit is transferable.

DENR Authorized Agent — Date: 4-25-03

Owner/Agent Signature — Date: 6/24/03

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR.
SUITE 211
700 N. TRYON ST.
CHARLOTTE, N.C. 28202.
(704) 336-5102

NORTH CAROLINA DEPARTMENT OF
ENVIRONMENTAL, HEALTH,
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPOSED PLOT PLAN

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

FILE: 7021A

TC: 137-231-12

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.

PERMIT FOR
9313 EDWARDS PLACE

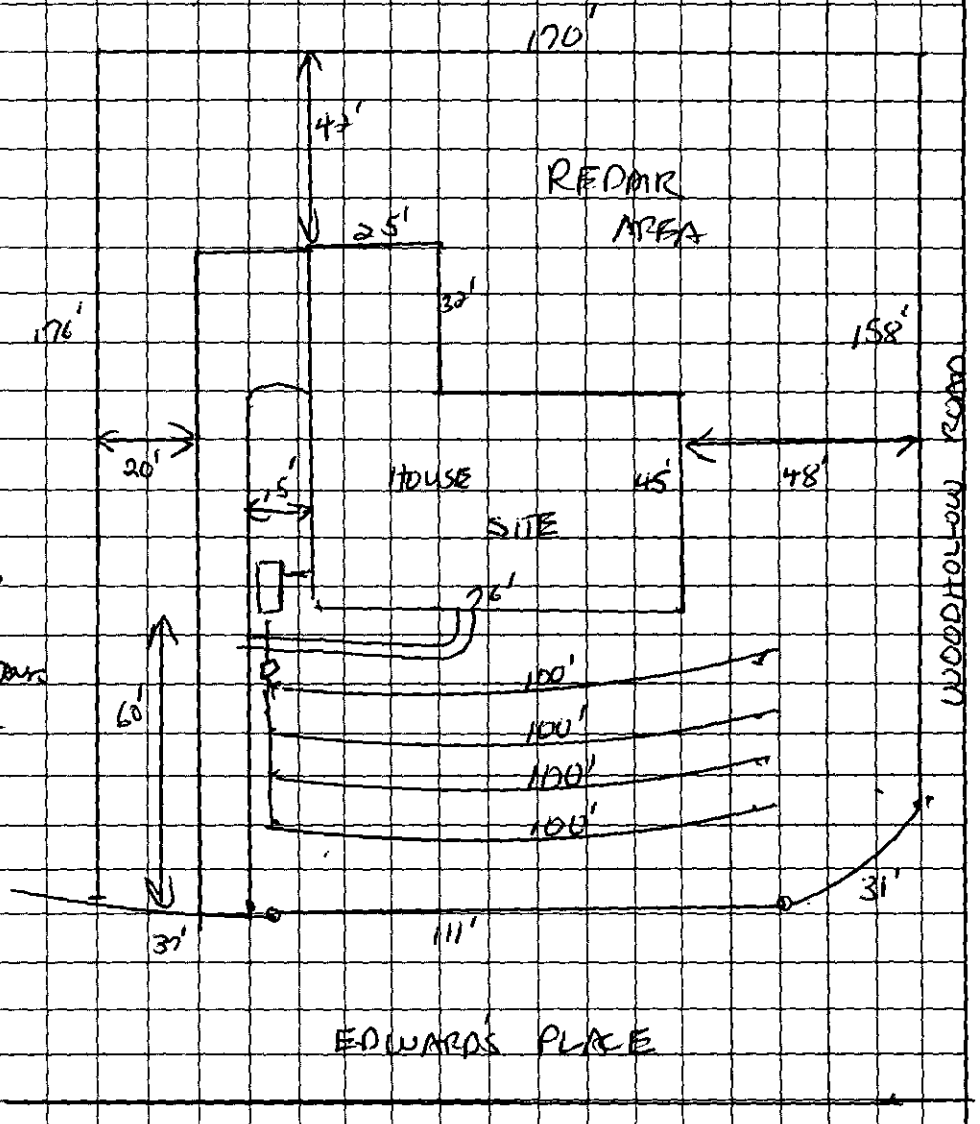
SCALE 1" = 40'

(1) INSTALL ARMANLINES SHALLOW (28") AND ON CONTOUR.

(2) PERMIT IS FOR A THREE BEDROOM RESIDENCE, 1500 GAL ST, 400 FEET OF ARMANLINE.

(4) REPAIR AREA MUST BE ACCESSED USING A PUMP.

(5) DO NOT LOCATE SEPTIC TANK OR DISTRIBUTION BOX UNDER PAVED DRIVE OR WALKWAY.



OWNER/AGENT SIGNATURE

DATE 6/24/03

APPROVAL DATE 4/25/03

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

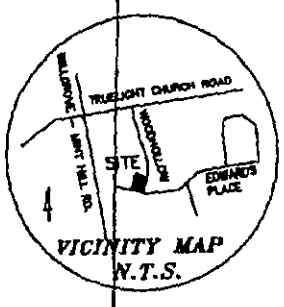
SAM MALONE & ASSOCIATES
SURVEYING - DESIGN - PLANNING
P.O. BOX 1139 MATTHEWS, N.C. 28106
PHONE (704) 847-9026
FAX (704) 847 - 5188

7th APRIL 2003

1. R/W = RIGHT OF WAY
2. THIS IS A PRELIMINARY PLOT PLAN ONLY AND IS NOT TO BE USED FOR RECONDATION OR CONVEYANCES.
3. OWNER/BUILDER TO VERIFY COMPLIANCE WITH ZONING RESTRICTIVE COVENANTS AND HOMEOWNERS ASSOCATION REQUIREMENTS OF RECORD.
4. BUILDER/CONTRACTOR TO VERIFY DIMENSIONS AND LOCATION OF BUILDING PRIOR TO CONSTRUCTION.
5. MBL= MINIMUM BUILDING LINE
6. THIS LOT MAY BE SUBJCT TO RIGHT-OF-WAY RESTRICTIONS AND/OR EASEMENTS EITHER RECORDED OR IMPLIED.
7. SETBACK INFOMATION TAKEN FROM TOWN OF MINT HILL PLANNING DEPT. 4-7-03

NOTES

EDWARD'S PLACE
60' PUBLIC R/W



VICINITY MAP
N.T.S.

CURVE TABLE				
CURVE	LENGTH	RADIUS	BEARING	CHORD
C1	31.24'	20.00'	N 08°41'44" E	28.16'
C2	37.89'	210.00'	N 58°37'19" E	37.81'

PLOT PLAN
OF:

LOT 12, BAINBRIDGE II, PHASE 1 - MAP 2
TOWN OF MINT HILL, MECKLENBURG CO., N.C.

SCALE: 1" = 40'
FOR THE BENEFIT OF KEVIN WHITE

MAP REFERENCE IN BOOK 24 PAGE 12 DEED REFERENCE IN BOOK _____ PAGE _____
ACAD FILE: C:\D\2003\9313EP.DWG FOLDER: 1st APRIL 2003

To: Mecklenburg County Government – Health Department

From: Walter B. Davis, Jr.
Owner – Tax Parcel 13723112
Property Address – 9313 Edward's Place, Charlotte NC

Date: April 9, 2003

RE: Authorization to Conduct Soil Test

The purpose of this letter is to grant authorization for Domeica White to have Mecklenburg County Health Department conduct a soil test on the above referenced property. I hereby give her rights to act as an agent on this matter.

Thanks in advance for your cooperation. If you need to contact me please call 704-358-3793.

Sincerely,

Walter B. Davis Jr.

Walter B. Davis, Jr.
Property Owner

FEE: 200.00 Cash
DATE: 7/5/02 SC

APPLICATION FOR IMPROVEMENT PERMIT FOR RESIDENTIAL SITE INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM

( ) CRT

TYPE APPLICATION: (✓) NEW SYSTEM ( ) EXPANSION/ ALTERATION OF EXISTING SYSTEM ( ) REPAIR OF EXISTING SYSTEM

NORTH CAROLINA
DEPARTMENT OF ENVIRONMENT,
HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

FILE #: 702A

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 13723112 10740

STREET ADDRESS: 9313 Edward's Place Woodlawn Rd

SUBDIVISION OR MOBILE HOME PARK NAME: Bainbridge

LOT NUMBER: 12

TYPE OF BUILDING (CHECK ONE):

( ) SINGLE MOBILE HOME(S) ( ) MODULAR HOME (M)
( ) DOUBLE WIDE (D) ( ) MULTIPLE FAMILY (U)
(✓) HOUSE (H) ( ) OTHER (O)

TOWNSHIP (CHECK ONE):

( ) 0 MECKLENBURG ( ) 4 PINEVILLE
( ) 1 CHARLOTTE ( ) 5 MATTHEWS
( ) 2 DAVIDSON ( ) 6 HUNTERSVILLE
( ) 3 CORNELIUS (✓) 7 MINT HILL

HEATED SQUARE FOOTAGE: ≈ 3,400 to 3,600

NUMBER OF BEDROOMS: 4 NUMBER OF OCCUPANTS: 2

CLOSING DATE ASAP

FOUNDATION FOR RESIDENCE:

( ) WITHOUT BASEMENT
( ) ON SLAB
(✓) CRAWL SPACE
( ) WITH BASEMENT /PLUMBING
( ) WITH BASEMENT /NO PLUMBING

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: ( ) YES ( ) NO TYPE: _____

WATER SUPPLY (CHECK ONE):

( ) COMMUNITY (C) (✓) MUNICIPAL (M) - City ( ) PRIVATE WELL (P)
( ) SHARED WELL (S) ( ) OTHER 'SPRINGS' (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES ( ) YES ( ) NO
EXISTING WASTEWATER SYSTEMS ( ) YES ( ) NO
EASTMENTS OR RIGHT-OF-WAYS ( ) YES ( ) NO
WELL, SPRINGS OR WATERLINES ( ) YES ( ) NO
DESIGNATED WETLANDS ( ) YES ( ) NO
(NOT SURE - CAN'T LOCATE SURVEY)

PROPERTY OWNER:

NAME: Davis (LAST) Walter (FIRST) B (MI)
ADDRESS: 1713 Crane Road
CITY: Waxhaw STATE: NC ZIP: 28173
DAYTIME PHONE: ( ) -

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: White (LAST) Domeica (FIRST) D (MI)
DAYTIME PHONE: 704 593 - 7717
935 Brenham Lane
Matthews, NC 28105

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 10/15/1990 (06375/843 - Deed Book Page)

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. 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: _____ DATE: 7/3/02

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102

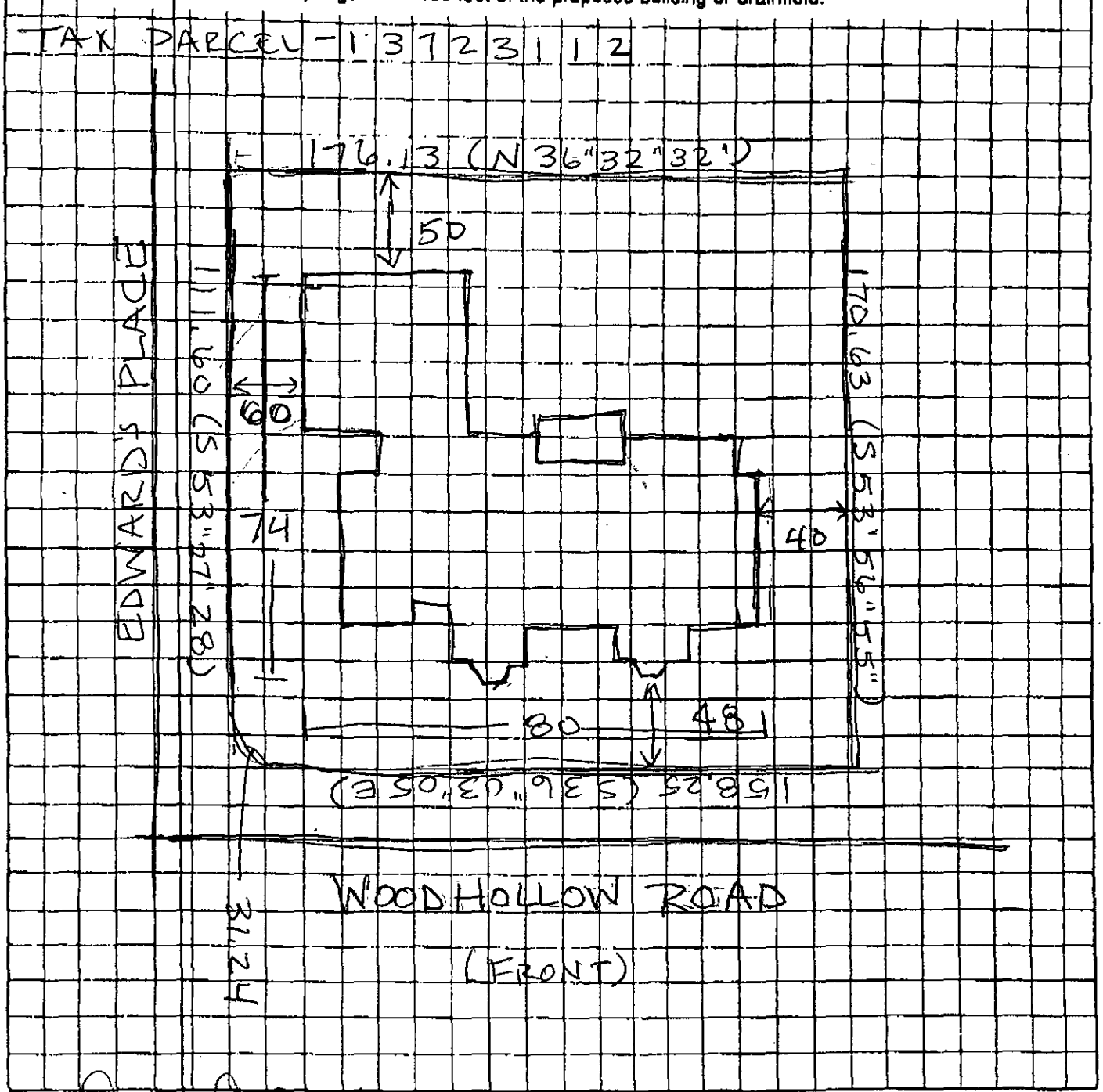
PROPOSED PLOT PLAN

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

FILE: 702/A

TC: 137-231-12

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.



OWNER/AGENT SIGNATURE

DATE 7/5/02

APPROVAL DATE _____

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

7021A

TO: Mecklenburg County Government - Health Department
c/o Gwendolyn Craig

704-336-6894 (Fax)

FROM: Walter B. Davis Jr.
Owner - Tax Parcel 13723112
Property Address - 9313 Edward's Place / 10740 Woodhollow Road, Charlotte NC

DATE: July 8, 2002

RE: Authorization to Conduct Soil Test

The purpose of this letter is to grant authorization for Domeica White to have Mecklenburg County Health Department conduct a soil test on the above referenced property. I hereby give her the rights to act as an agent on this matter.

Thanks in advance for your cooperation. If you need to contact me please call 704-358-3793.

Sincerely,

Walter B. Davis Jr.

Walter B. Davis, Jr.
Property Owner

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Sheet: 1
Property ID: 137-231-12
Lot #: 12
File #: 7021A
Code: 2

ACS

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Walter B. Davis
Applicant: Domeica White
Address: 1713 Crane Road, Waxhaw, N. C. 28173
Date Evaluated: 07/18/2002
Proposed Facility Resi9dence
Design Flow (.1949): 480gpd
Property Size: .7a
Location of Site: 9313 Edwards Place
Property Recorded:
Water Supply: [x] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [x] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [x] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	OTHER PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS, 10	0-5	GR/CL	FR/SEXP/SS/SP	>38" TO SOIL WETNESS	38	N/A	NONE	PS, IV .3GPD/FT^2
		5-28	SBK/C	FI/SEXP/S/P					
		28-38	SBK/CL	FR/SEXP/SS/SP					
2	"	0-4	GR/CL	FR/SEXP/SS/SP	>41" TO SOIL WETNESS	41	"	"	"
		4-30	SBK/C	FI/SEXP/S/P					
		30-41	SBK/CL	FR/SEXP/SS/SP					
3	R, 6	0-5	GR/CL	FR/SEXP/SS/SP	>48" TO SOIL WETNESS	48	"	"	"
		5-30	SBK/C	FI/SEXP/S/P					
		30-48	SBK/CL	FR/SEXP/SS/SP					
4	LS, 8	0-3	GR/CL	"	"	"	"	"	"
		3-48	SBK/C	FI/SEXP/S/P					

Description	Initial System	Repair System
Available Space (.1945)	PS	US
System Type(s)		
Site LTAR	.3GPD/FT	.3GPD/FT^2

Other Factors (.1946): _____
Site Classification (.1948): UNSUITABLE
Evaluated By: W. R. Marlin, LSS, 7/22/02. W. R. Marlin
Others Present:

FILE # 7021A

COMMENTS 100% Repair

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR
R-RIDGE	I	S-SAND	1.2-0.8
S-SHOULDER SLOPE		LS-LOAMY SAND	
L-LINEAR SLOPE			
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6
N-NOSE SLOPE		L-LOAM	
H-HEAD SLOPE			
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM	
T-TERRACE		CL-CLAY LOAM	
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM	
	IV	SC-SANDY CLAY	0.4-0.1
		SIC-SILTY CLAY	
		O-ORGANIC	

CONSISTENCE	
MOIST	WET
VFR-VERY FRIABLE	NS-NON-STICKY
FR-FRIABLE	SS-SLIGHTLYSTICKY
FI-FIRM	S-STICKY
VFI-VERY FIRM	VS-VERY STICKY
EFI-EXTREMELY FIRM	NP-NON-PLASTIC
	SP-SLIGHTLYSTICKY
	P-PLASTIC
	VP-VERY PLASTIC

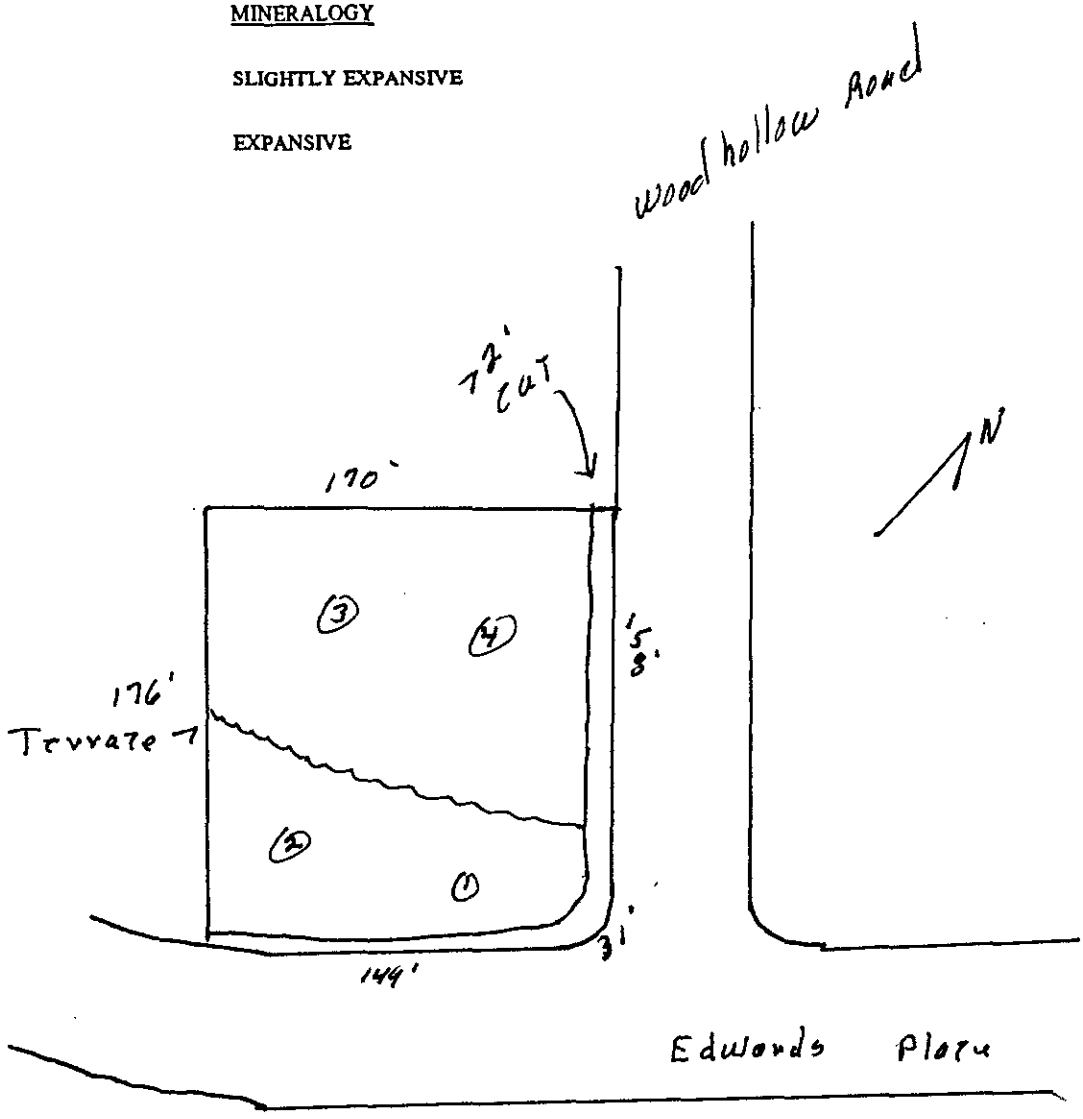
STRUCTURE

SG-SINGLE GRAIN
M-MASSIVE
CR-CRUMB
GR-GRANULAR
SBK-SUBANGULAR BLOCKY
ABK-ANGULAR BLOCKY
PL-PLATY
PR-PRISMATIC

MINERALOGY

SLIGHTLY EXPANSIVE

EXPANSIVE



Mecklenburg County
Health Department

September 21st, 1990

Green and Williams Dev. Inc.
7421 Morgan Mill Rd.
Monroe, NC 28110

RE: Property located at Woodhollow Rd./BainbridgeII 12
FILE: 7021A
PARCEL: P0137-123-05

Dear Sir:

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 16698) is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit 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 to this office. The plan will be reviewed and if it is found that the area of provisionally suitable soils is adequate for the proposed construction, an Improvement Permit will be issued by this Department.

If I may be of assistance, please do not hesitate to contact me.

Very truly yours,

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

Enclosure

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

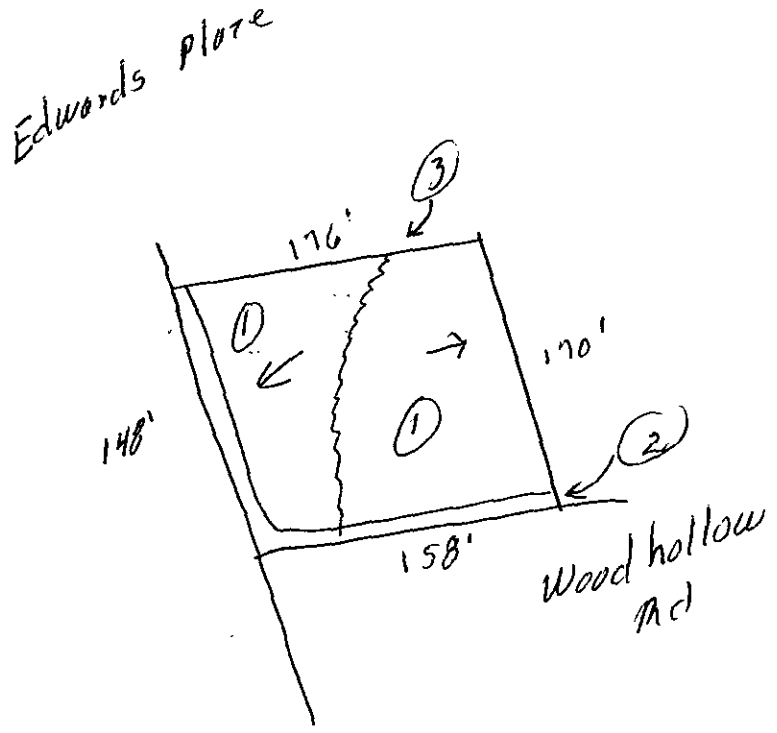
MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 16698

File: 7021A
Parcel: 137-123-05
Action 1
☒ PC

Location:
Subdivision: Woodhollow Rd./BainbridgeII
Lot: 12 Block: Acres: .64
Owner:
Address: Green and Williams Dev. Inc.
7421 Morgan Mill Rd.
Monroe, NC 28110

Comments: 100% Repair

Described by: William R. Marlin
Date: 9-20-90



*** 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 6-12%	S PS (U) >12' cut	S PS (U) complex slope	S PS U	S PS U	S PS U
Texture	S (PS) U 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 7-36" to water	S PS U —	S PS U —	S PS U	S PS U	S PS U
Depth	S (PS) U 36"+	S PS U —	S PS U —	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 7-36"	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-Lilac	>12' cut	complex slope			
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 16698

File: Action _____

Parcel: ☐ PC

Location:

Subdivision:

Lot: Block: Acres:

Owner:
Address:

Comments: _____

_____

_____

_____

Described by: _____

Date: _____



***** 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	S PS U	S PS U	S PS U	S PS U	S PS U
Texture	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S PS U	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						
Area Classification	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 7021A

TC: _____

☑ PC ☐ REPT

JOB LOCATION

① ADDRESS: Wood Hollow Road + Corner of Edwards Place.

② SUBDIVISION: Bainbridge II ③ LOT: 12 ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: _____ PAGE NO.: _____ PARCEL NO.: 132-123-05

⑥ DEED REFERENCE: BOOK NO.: _____ PAGE NO.: _____

OWNER

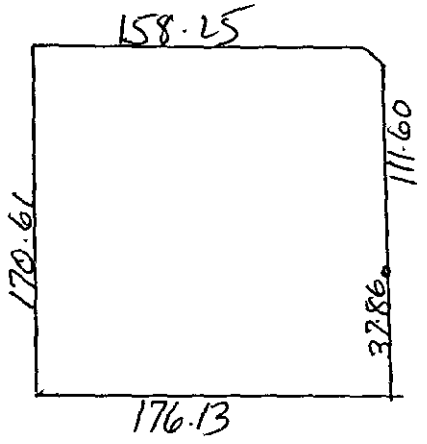
⑦ NAME: Greene + Williams Development Inc.
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: 7421 Morgan Mill Rd.

⑨ CITY: Monroe, ⑩ STATE: NC. ⑪ ZIP: 28110

⑫ PHONE: (WORK) 704-847-4228 (HOME) 704-753-1333

⑬ Accurately diagram and dimension lot.



Rush
Please do first
Thank you

⑭ 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: C A Williams

Date: 8/30/90

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

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER'S COPY

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 8.30.90

Name/Company: Spaceman Builders, Inc.

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
AUG 30 1990

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: S/T (Cor. Woodhollow & Edwards Pl)

File # 7017A (LOT #31 Edwards Pl); (File #7021A Lot # 12

File # 7018A (" " #32 Edwards Pl); (" #7022A " #17 Edwards Pl

" #7019A (" " #22 Edwards Pl; (" #7023A " 62 Cor Woodhollow & Inverland Oaks Court.

" #7020A (" #6 Woodhollow Rd.

137-123-05

Fee: $ 350.00

CK #1463 350.00

NOTICE:

A processing fee of $15.00 will be charged for all returned checks in accordance with N.C. General Statute 25-3-512.

Jackie Abernethy
Completed by

Collected by