

12025 KLAMATH PL

01728805

1/3/2008

duponbj

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

3881B

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

Date:

PERSON FILING APPLICATION:

NAME: Rodgers (last) Martha (first) Z. (mi)

ADDRESS: 12033 Klamath pl PHONE: (704) 875-2661

CITY: Huntersville STATE: N.C. ZIPCODE: 28078

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 017-288-05

STREET ADDRESS: 12025 Klamath pl Huntersville, NC

ZONING:

PROPERTY OWNER:

NAME: Kelly, JR (last) Bobby (first) Lee (mi)

ADDRESS: 12025 Klamath pl PHONE: (__) no phone

CITY: Huntersville STATE: N.C. ZIPCODE: 28078

SUBDIVISION OR MOBILE HOME PARK NAME: Wildwood Green MHP

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

TYPE APPLICATION (check one):

LOT NUMBER: #5 LOT SIZE (in acres):

[redacted]
- [ ] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
- [ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
- [x] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or N)
- [ ] COMMERCIAL OR INDUSTRIAL (N)

RESIDENTIAL PROPERTY (Type Building, check one):
- [ ] SINGLE MOBILE HOME (S)
- [x] DOUBLE WIDE (D)
- [ ] HOUSE (N)
- [ ] MODULAR HOME (M)
- [ ] MULTIPLE FAMILY (U)
- [ ] OTHER _____ (O)

NUMBER BEDROOMS: 2 NUMBER OCCUPANTS:

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):
- [x] Community (C)
- [ ] Municipal (M)
- [ ] Private Well (P)
- [ ] Shared Well (S)
- [ ] Other 'spring' (O)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
- [ ] Swimming Pool
- [ ] Garage
- [ ] Jacuzzi
- [ ] Storage Building
- [ ] Stable/Barn
- [ ] Deck/Patio
- [ ] Workshop
- [ ] Bedrooms
- [ ] None
- [ ] 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: Martha Z. Rodgers Date: 1-23-96

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.

...Use existing system for 2 bedroom mobile home ONLY.

No records found on file - existing mobile home has 2 bedrooms.

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

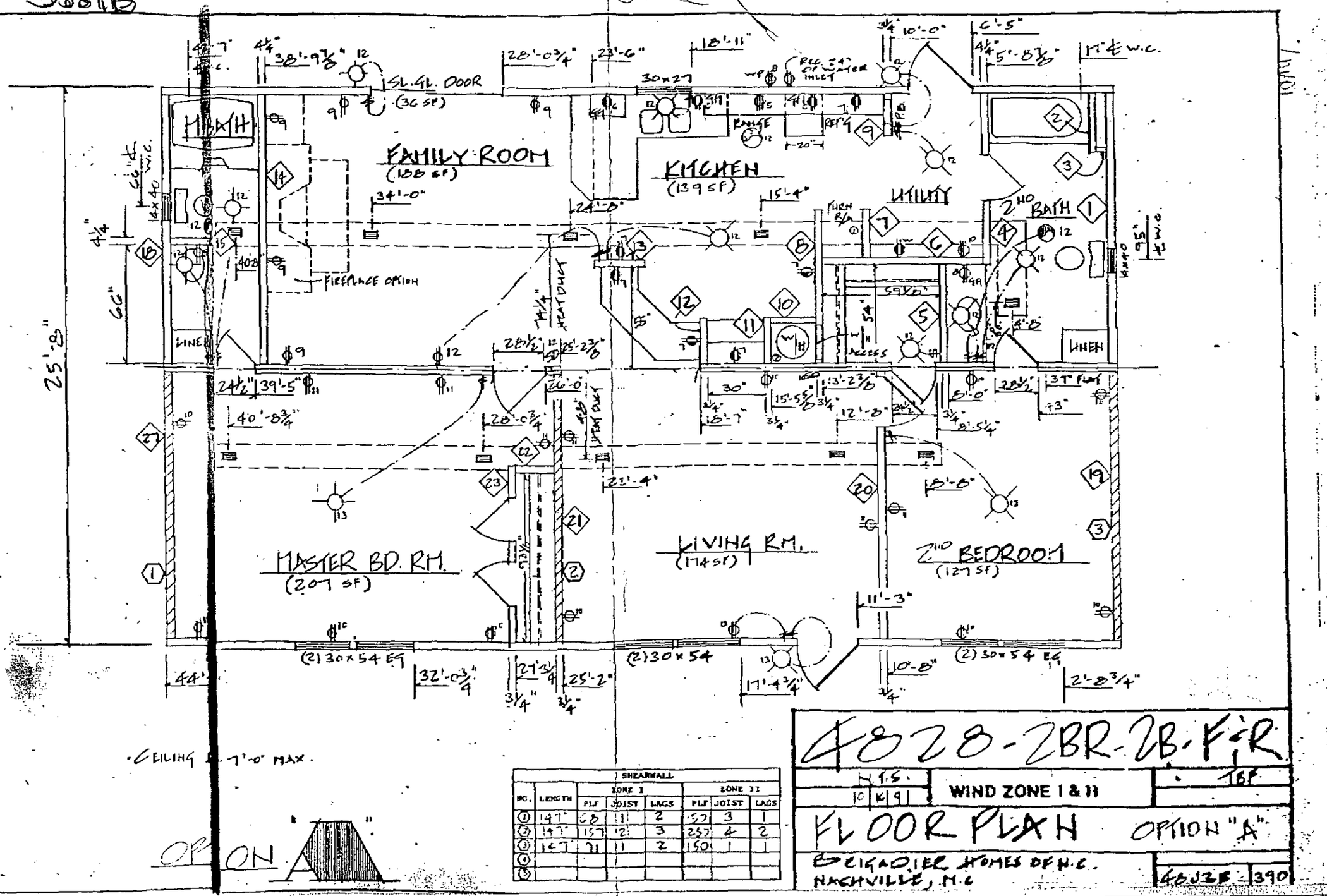
Lisa B. Miaik, RS 1/30/96
Environmentalist Date

for Coleman for Daniel Program Chief, 2-6-96
Director or Authorized Section Head Date

WATER

3881B

	SIZE
1	14 7/8"
2	30"
3	8"
4	92 5/8"
5	54"
6	85 1/4"
7	20"
8	84 1/4"
9	27"
10	24"
11	27"
12	27"
13	24"
14	147 1/8
15	24"
16	
17	
18	47 1/4"
19	147 1/4"
20	147 1/4"
21	147 1/4"
22	22"
23	96"
24	
25	
26	
27	147 1/4"



SHEARWALL							
		ZONE I			ZONE II		
NO.	LENGTH	PLF	JOIST	LAGS	PLF	JOIST	LAGS
1	147"	68	1	2	157	3	1
2	147"	157	2	3	257	4	2
3	147"	71	1	2	150	1	1
4							
5							

4828-2BR-2B-F&R

N.T.S. | WIND ZONE I & II | 1 OF

10 | K | 9

FLOOR PLAN OPTION "A"

BRIGADIER HOMES OF N.C.
NASHVILLE, N.C.

4BJ2F - 1390

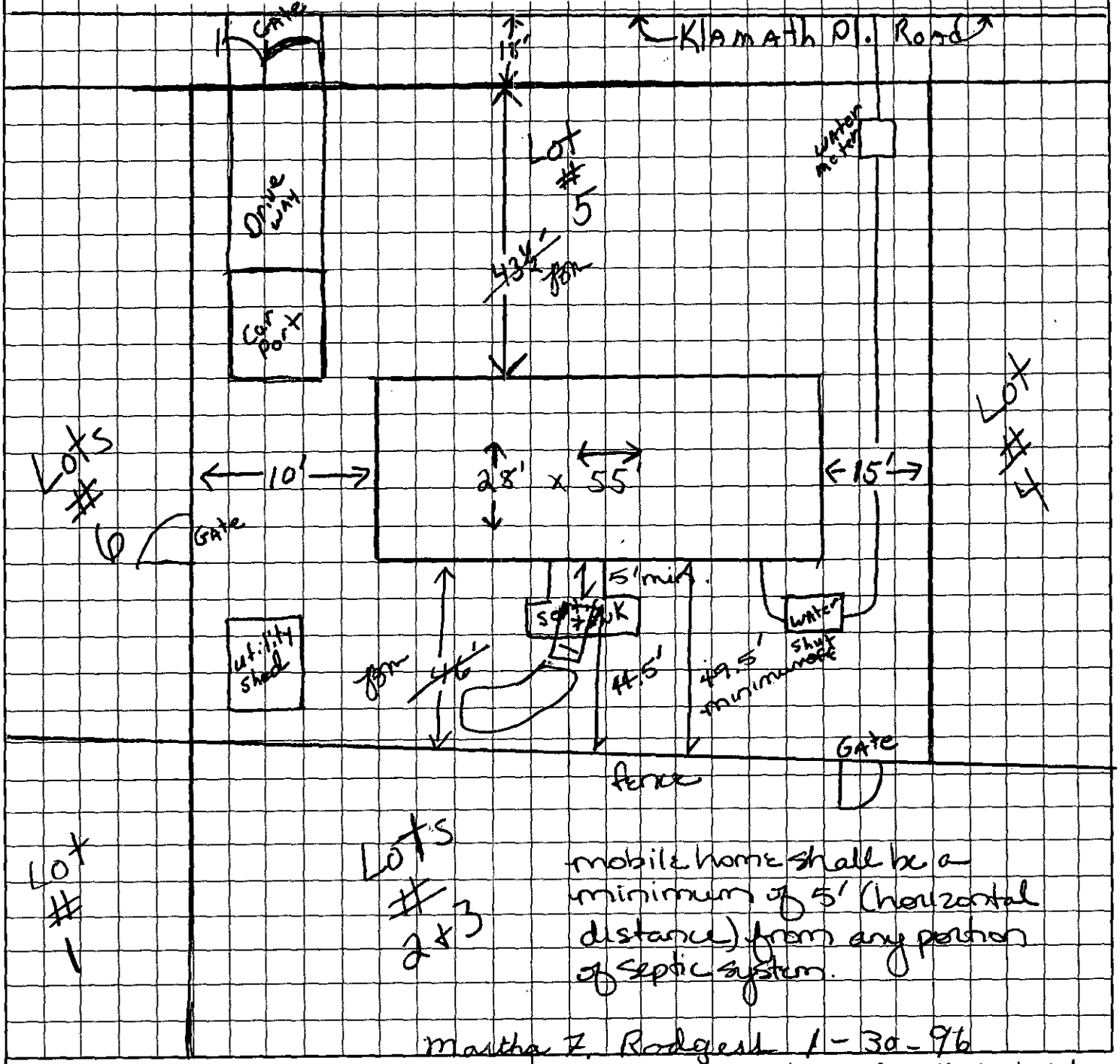
PROPOSED PLOT PLAN

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

FILE: 38818

TC: 017-288-05

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.



mobile home shall be a minimum of 5' (horizontal distance) from any portion of septic system.

Martha F. Rodgers 1-30-96

Bobby A. Kelly Jr.
OWNER/AGENT SIGNATURE

DATE 23 Jan 96

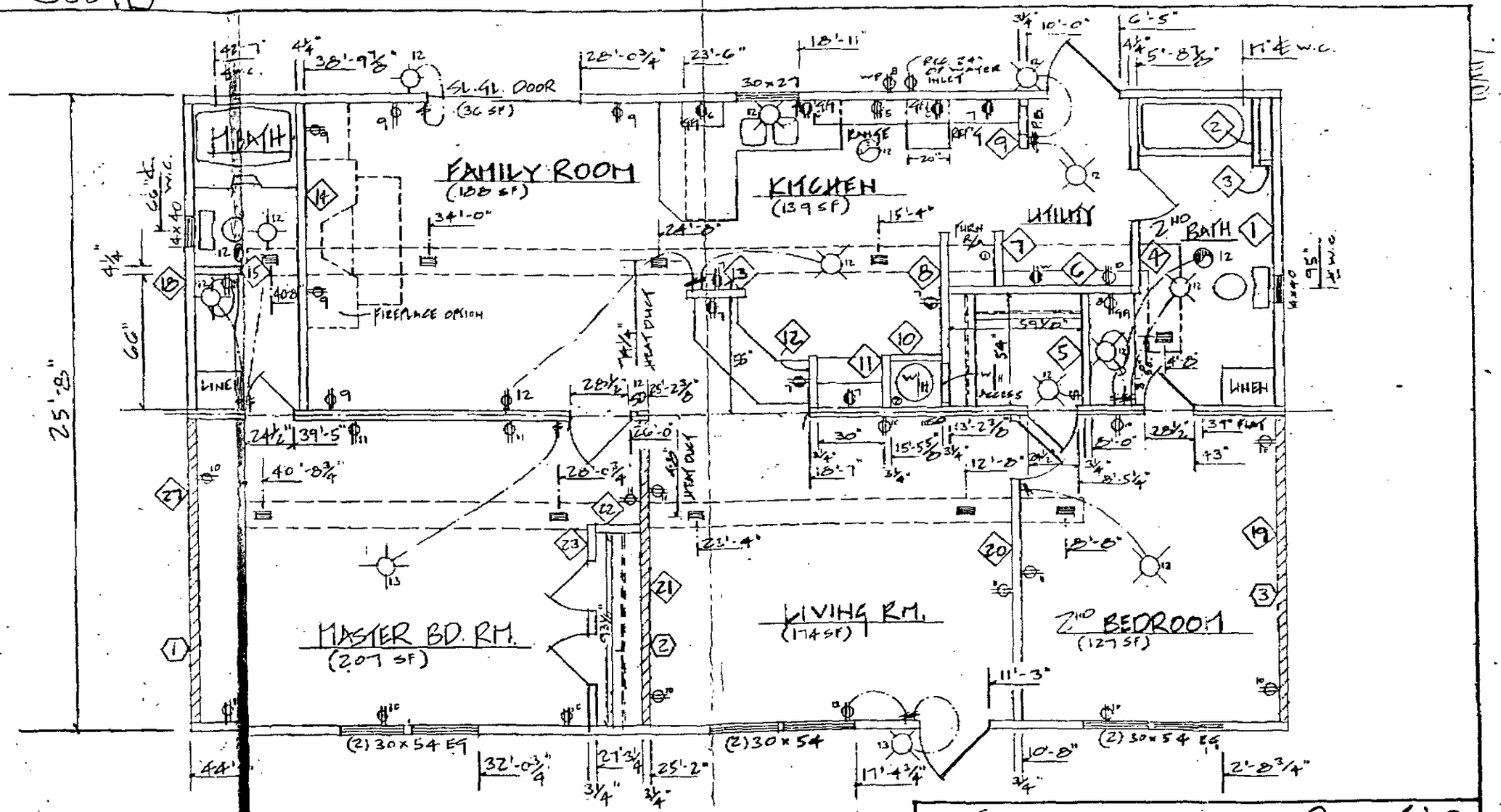
APPROVAL DATE 1/30/96 Linda B. Mialik

Use existing system for 2 bedroom mobile home ONLY.

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

3581B

	SIZE
1	14 7 1/4"
2	30"
3	8"
4	92 1/2"
5	54"
6	85 1/4"
7	20"
8	84 1/4"
9	27"
10	24"
11	27"
12	27"
13	24"
14	147 1/4
15	24"
16	
17	
18	47 1/4"
19	147 1/4"
20	147 1/4"
21	147 1/4"
22	22"
23	96"
24	
25	
26	
27	147 1/4"



SHEARWALL								
		ZONE I			ZONE II		
NO.	LENGTH	PLF	JOIST	LAGS	PLF	JOIST	LAGS
1	197"	68	1	2	152	3	1
2	197"	157	2	3	252	4	2
3	147"	71	1	2	150	1	1
4							
5							

OPTION "A"

4828-2BR-2B-F&R

N.T.S. | WIND ZONE I & II | 16F

FLOOR PLAN OPTION "A"

BRIGADIER HOMES OF N.C.
NASHVILLE, N.C.

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