

10474 MOORES CHAPEL RD

05307233

5/15/2007

duponbj

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

N. C. Department of Environment and Natural Resources/Division of Environmental Health

ON-SITE WASTEWATER VIOLATION NOTICE

Owner Jerry C. Barefoot

Mailing Address 4121 Tuffy Lane
Charlotte, NC 28208

Occupant Unknown

Location 10474 Moores Chapel Road
Charlotte, NC

☒ Residence ☐ Business ☐ Other Tax Parcel #053-072-33

You are hereby notified that you are violating the Rules adopted by the North Carolina Commission for Health Services or Article 11 of Chapter 130A of the General Statutes of North Carolina by owning or controlling a residence, place of business, or place of public assembly which is not provided with an approved wastewater system. Your wastewater system is not in compliance; the following corrections must be made. Consult your Local Health Department for advice and required permits by calling telephone number (704) 336-5568/336-5103.

☒ Install/Repair wastewater system. You must obtain an Improvement Permit from the local health department prior to repairing your system.

☐ Other Repairs (*specify*) _____

☐ Eliminate wastewater discharge and connect to an approved wastewater system.

☒ Perform Maintenance (*specify*) Pump tanks/install Nema 4X control panel

☐ Pit Privy must be repaired/constructed.

If the wastewater violation is not brought into compliance by May 11, 2000, appropriate legal action will be taken.

Notice Issued April 12, 2000 (Date) Signed Larry B. Thompson, R.S. (Division of Environmental Health) Agent

Compliance _____ (Date) Signed _____ (Division of Environmental Health) Agent

DENR 1108 (Revised 3/98)
On-Site Wastewater Section (Review 10/98)

Mecklenburg County
Health Department

April 12, 2000

Jerry C. Barefoot
4121 Tuffy Lane
Charlotte, NC 28208

Dear Mr. Barefoot:

This letter is to serve as notice that the State required inspection of the Type IIIb wastewater treatment and disposal system serving your property has been performed. The results of this inspection are enclosed.

Our records indicate that the $85.00 fee for this inspection has not been paid. You have been mailed 3 notices, as well as a letter of explanation, regarding the maintenance inspection and the associated fee. At this time our office has no choice but to implement legal action against you, for nonpayment of fees imposed under North Carolina General Statute 130A-39G. A Criminal Summons will be prepared in your name and filed with the magistrate's office within the next two weeks. In the event we receive your payment before a Criminal Summons is filed, legal action will not be pursued.

If you have any questions regarding this letter or the enclosed inspection report you may contact me at 704-336-5568.

Sincerely,

Larry B. Thompson, Jr., R.S., Coordinator
Managed Systems Program
Individual Water and Wastewater Systems

Enclosures (2)

N. C. Department of Environment and Natural Resources
Division of Environmental Health

INSPECTION OF ENGINEERED SUBSURFACE WASTEWATER SYSTEM

Mecklenburg — Health Department
3982A — Permit/Project No.
10474 Moores Chapel Road — Location
residence — Name of Establishment / Type of Establishment
Design Flow
Jerry C. Barefoot, 4121 Taffy Lane, Charlotte, NC 28208 — Owner/Agent, Address, Phone
None - IIIb — Operator, Address, Phone
Remarks

	Yes	No	REMARKS
1. ESTABLISHMENT:			
Type, size, and sewage flow in accordance with permit?	☒	☒	
2. COLLECTION SYSTEM:			
No evidence of leaks into or out from sewer lines/manholes?	☐	☐	
Free of blockages/solids buildup in lines or manholes?	☐	☐	
3. TANKAGE (Grease Traps/Lift Stations/Septic/Dosing Tanks):			Time to have the tanks pumped
Tank risers accessible and surface water diverted?	☑	☐	
Tanks and access manholes structurally sound, watertight?	☑	☐	
Sanitary tee(s) in good working condition?	☒	☒	
Tanks pumped, cleaned out as needed?	☐	☑	
4. RAW SEWAGE LIFT STATION (if present):			
Required pumps present, operating, and cycling properly?	☐	☐	
High-water alarm present and operating properly?	☐	☐	
Floats/pipe/valves/disconnects in good working condition?	☐	☐	
Control panel enclosure/components in good condition?	☐	☐	
5. EFFLUENT DOSING SYSTEM:			
Effluent appears clear, free of excess solids?	☐	☐	
PUMP SYSTEMS:			
Required pumps present, operating, and cycling properly?	☑	☐	
High-water alarm present and operating properly?	☒	☐	
Floats/pipe/valves/disconnects in good working condition?	☐	☐	
Control panel enclosure/components in good condition?	☐	☑	Control panel needed
Elapsed time readings: _____ _____ _____ _____			
SIPHON SYSTEMS:			
No evidence of overflow or siphon leakage?	☐	☐	
Siphon(s) appear to be working/alternating properly?	☐	☐	
Bells and vents free of debris and in good condition?	☐	☐	
6. GROUND ABSORPTION FIELDS:			
No evidence of effluent surfacing/reaching surface waters?	☐	☑	
Minimal ponding in subsurface trenches?	☐	☐	
Surface water being effectively diverted away?	☑	☐	
Diversions/ditches/swales/tile drains properly maintained?	☑	☐	
Line cover/vegetation adequate/maintained as needed?	☐	☑	
Protected from traffic, destructive uses?	☐	☑	
Distribution devices in good condition, working properly?	☐	☑	
Repair area properly reserved, maintained?	☐	☑	
LOW-PRESSURE PIPE DRAIN FIELDS:			
Turnups/cleanouts/valves intact and accessible?	☐	☐	
No effluent standing in lower laterals?	☐	☐	
Laterals free of excess solids, cleaned out as needed?	☐	☐	
Pressure head is properly adjusted?	☐	☐	

Sewage surfacing at the d-box of the two line addition performed in 1992.

OVERALL CONDITION AND OPERATION OF SYSTEM: Malfunctioning - needs repairs

SUMMARY OF IMPROVEMENTS NEEDED:

Improvement	Repair Within (Days)
Repair Septic System	30
Add NEMA 4x Control Panel	30
Pump Septic and Pump Tanks Out	30

DATE: 4-10-00 SIGNED: J B Thompson Jr, R.S. AGENT
Division of Environmental Health

DENR 3702 (Revised 3/98)
On-Site Wastewater Section (Review 12/98)

– over –

SUMMARY OF IMPROVEMENTS NEEDED (cont.)

Improvement	Repair Within (Days)

INTENT TO SUSPEND OR REVOKE PERMIT

This is to notify you of intent to suspend/revoke your operation permit/certificate of completion 60 days from this date for the following
(circle one) *(circle one)*

violations: _____
[Law or Rule(s)]

If suspended, the operation permit or certificate of completion remains suspended until violations are corrected. A hearing will be held prior to suspension or revocation if you file a petition for a hearing with the Office of Administrative Hearings, P. O. Drawer 27447, Raleigh, NC 27611-7447, in writing within the number of days specified above of your intent to attend the hearing. If you do not petition the Office of Administrative Hearings, the operation permit or certificate of completion will be suspended or revoked.

IMMEDIATE SUSPENSION OR REVOCATION OF PERMIT

This is to notify you of immediate suspension/revocation of your operation permit/certificate of completion for the following violations:
(circle one) *(circle one)*

_____
[Law or Rule(s)]

If suspended, the permit or certificate remains suspended until the violations are corrected. You will be notified of the day and location of a hearing on this suspension or revocation by a hearing officer from the Office of Administrative Hearings.

This the _____ day of _____, 19 _____.

_____ Agent
DIVISION OF ENVIRONMENTAL HEALTH

INSTRUCTIONS

Purpose: Article 11 of Chapter 130A requires the Commission for Health Services to adopt rules governing the design, construction, and operation of on-site wastewater systems. 15A NCAC 18A .1937 specifies that the local health department shall determine whether systems with an Operation Permit are operating properly at a frequency specified in Rule .1961, Table V(a), and that systems which exceed 3,000 gallons per day and other systems which are required to be designed by a professional engineer shall be reinspected annually. This form is developed to be used in making inspections of engineered subsurface wastewater systems.

Preparation: Local environmental health specialists shall complete the form every time they conduct an inspection. Prepare an original and two copies for:

1. Original to be left with the responsible person.
2. Copy for the local health department.
3. Copy for the On-Site Wastewater Section, Division of Environmental Health.

In the event the permit is suspended or revoked, complete the portion above.

Disposition: This form may be destroyed in accordance with Standard 7, Inspection Records, of the *Records Disposition Schedule* published by the N.C. Division of Archives and History.

Additional forms may be ordered from: On-Site Wastewater Section
Division of Environmental Health
P. O. Box 29594
Raleigh, NC 27626-0594
(Courier 52-01-00)

Mecklenburg County
Health Department

FINAL NOTICE!

Re: 10474 Moores Chapel Road

You owe Mecklenburg County Health Department $85.00 in inspection fees. The $85.00 fee imposed under North Carolina General Statute 130A – 39G is to recover costs for the required inspection of your wastewater system.

This is your third and final notice. You must submit your payment in the form of cash, credit card, or check, made payable to Mecklenburg County Health Department, by April 4, 2000 or legal action will be initiated against you.

If you have questions you should contact this department immediately at 336-5568.

Enclosure

INSPECTION STATEMENT

MECKLENBURG COUNTY HEALTH DEPARTMENT

PAST DUE NOTICE

Jerry C. Barefoot (By Entirety)
4121 Tuffy Lane
Charlotte, NC 28208

Please Make Check Payable To:

Mecklenburg County Health Department
700 N. Tryon Street, Ste 211
Charlotte, NC 28202

Note: THIS COMPLETED FORM MUST ACCOMPANY PAYMENT!

DESCRIPTION OF PROPERTY

Name	Site Address	Tax Parcel	File Number	System Type
Jerry C. Barefoot (By Entirety)	10474 Moores Chapel Rd.	053-072-33	3982 A	IIIB
			Total Amount Due: $85.00	

Please use the space below, to make any corrections to property information.

Name _____

Site Address _____

_____

# of Bedrooms _____

BILL INFORMATION

Billing Date	Payment Due Date
12-31-99	1-31-00 ***PAST DUE***

Direct Questions Concerning This Bill To ..... (704) 336-5102

☐ *Please check if you have a well.*

Make Check Payable To Mecklenburg County Health Department
Your Canceled Check Is Your Receipt

DO NOT SEND CASH

MAINTENANCE INSPECTION STATEMENT

MECKLENBURG COUNTY HEALTH DEPARTMENT

Terry C. Barefoot (By Entirety)
4121 Tuffy Lane
Charlotte, NC 28208

Please Make Check Payable To:

Mecklenburg County Health Department
700 N. Tryon Street, Ste 211
Charlotte, NC 28202

Note: THIS COMPLETED FORM MUST ACCOMPANY PAYMENT!

DESCRIPTION OF PROPERTY

Name	Site Address	Tax Parcel	File #	# Bedrooms	System Type
Terry C. Barefoot (By Entirety)	10474 Moores Chapel Road	053-072-33	3982A	2	IIIB

Total Amount Due: $85.00

Please use the space below, to make any corrections to property information.

Name _____

Site Address _____

_____

#Bedrooms _____

BILL INFORMATION

Billing Date	Payment Due Date
12/31/99	1/31/00

Direct Questions Concerning This Bill To ..... (704) 336-5102

☐ *Please check if you have a well.*

Make Check Payable To Mecklenburg County Health Department
Your Canceled Check Is Your Receipt

DO NOT SEND CASH

Mecklenburg County
Health Department

December 30, 1999

Jerry C. Barefoot (By Entirety)
4121 Tuffy Lane
Charlotte, NC 28208

Re: 10474 Moores Chapel Road

Dear Property Owner:

This letter is being sent to all home/business owners in Mecklenburg County with septic tank systems that utilize pumps. In 1990 the North Carolina Administrative Code governing septic tank systems was amended to require routine maintenance and inspection of certain septic tank systems. Research conducted on septic tank systems has shown that properly maintained systems perform better and protect the home/business owner's investment. These State rule changes required local health departments to perform additional inspections without additional resources. During the 1998-99 budget hearings, the Mecklenburg County Board of County Commissioners (BOCC) approved user fees to offset costs and to allow the local health department to comply with mandatory enforcement requirements in the State regulations.

Since you have a pump system, these new rules and fee requirements affect you. The fee is $85.00 and is due upon receipt of this notice. We will visit your property and make assessments and recommendations for the continued efficient operation of your septic tank system. In addition, if you have a well, bacterial and inorganic samples will be collected to help assess the quality of your water supply source. The process, including fee assessment, will be repeated every five (5) years. The fee amount may change in the future.

We are excited about the interest and support demonstrated by the BOCC. Past performance in this area was more enforcement oriented rather than supportive. One of our goals is to establish our department as a resource to you to aid and assist you with this and related public health concerns. The inspection program and the water analysis are important to the health of you and your family. This is a very important initiative intended to protect the public's health while improving and preserving our groundwater resources.

Your prompt fee payment will activate our inspection process. Your comments and questions regarding this matter are encouraged and welcomed.

Sincerely,

L.B. Thompson, Jr., L.S.

Larry B. Thompson, Jr., R.S., Coordinator
Managed Systems Program
Individual Water and Wastewater Systems

Enclosure

cc: Fiscal Services Manager, HMHCS

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

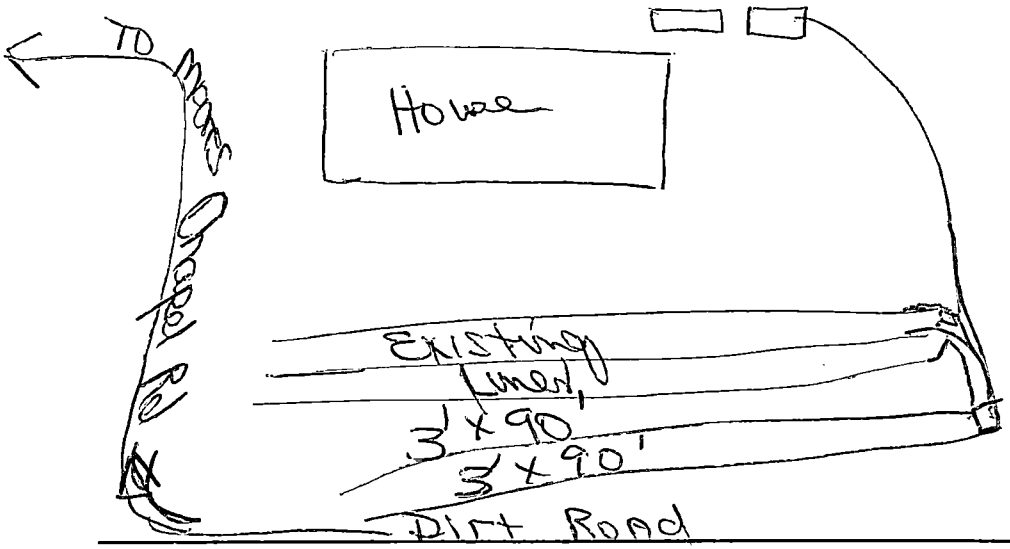
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 3982A DATE: 10/12/92

PO
TC: 053-072-04 ☒ L

SERIAL Nº 14443

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 9/15/92. All work shall be completed on or before 11/12/92, 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 3' feet

Total Line Length 180' feet

Number of Lines 2

Depth of Stone 12 inches

Distance from House 5' feet

Distance from Property Line 10' feet

Distance from Well Community feet

NAME OF OWNER Jerry Davenport

LOCATION OF PROPERTY 10474 Mores Chapel Rd.

Comments: Set New D-Box Above existing Box—Remove Old D-Box Run 2 New Lines 3'x90'x12" Stone — Tie from New box Solid Lines to existing 3 field lines.

Division or Section Head

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.

CERTIFICATE OF COMPLETION/OPERATION PERMIT

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 3982A DATE: 6/29/89

TC: po 053-072-04 ☐ L ☐ CRT

SERIAL № 11950

Change 1992
10474 Mooresr Chapel Rd

Name of Owner Barefoot, Jerry Juris.:

Address of Property 19474 Mooresr Chapel Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 270'

Number of Lines 3 @ 90'

Cover Depth 12"

Water Supply Source Well

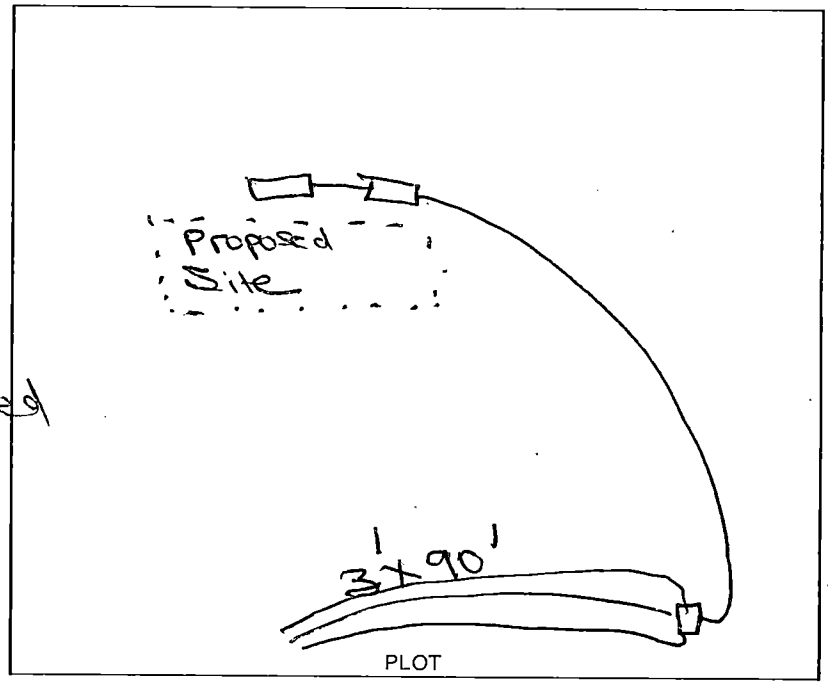
Distance to Water Source Not Installed
50' required

Excavation Inspected 6/29/89

Tank(s) Inspected 6/28/89

Wash Line Inspected

High Water Alarm Inspected



PLOT

Design: 1989 1500 ST Conv. 1000 Gal PT, 810 SQ FT 12" Gravel Like 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 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: System designed for a Bedroom home.

Judy J. Kuer R.S.
Environmentalist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

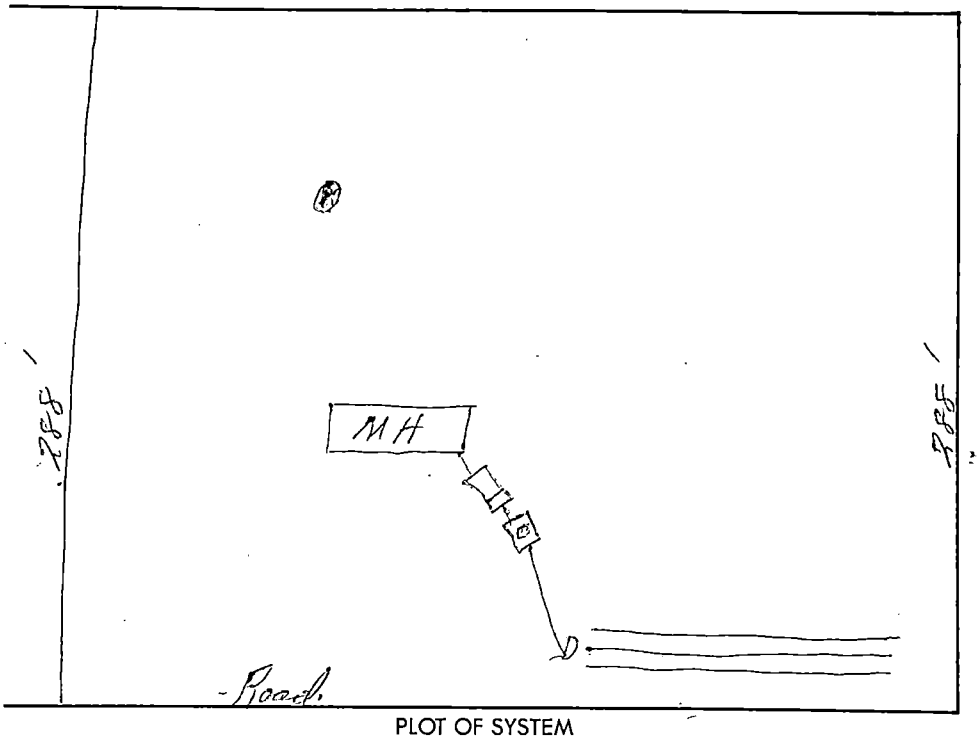
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 3982 A DATE: 23 May 89

TC: No. 053-072-04 L

SERIAL Nº 12695

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 20 November 87. All work shall be completed on or before 1 July 89, 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 Department of Environmental Health 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 1000 gallons

Tank Construction PC

Absorption and/or Nitrification Lines:

Trench Width 36" feet

Total Line Length 270' feet

Number of Lines 3 at 90' feet

Depth of Stone 12" inches

Distance from House >10' feet

Distance from Property Line >10' feet

Distance from Well >50' feet

NAME OF OWNER Jerry C. Barefoot

LOCATION OF PROPERTY 10474 Moores Chapel Rd.

Comments: 3 lines 90' each

1500 gal tank + 1000 gal pump tank

Division or Section Head

Moffitt M. Kirby 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 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.

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER OR AGENTS COPY

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: _____

Address: _____

Description of public record requested: File # 3982A

Street Name (or County Road): 10414 Moores Chapel Rd

Lot: _____ Block: _____

Parcel Number: 053-012-04-33

Owner's Name: Jerry C. Bayfoot

Reason for Request:

We're having problems with septic system & we can't get them fixed right by owner. (Jerry Bayfoot)

Signature of Person Making Request: Sandra Sellers

Supervisory Person: _____

Date: 09/08/92 Time: 3:PM

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

#P 50.00 12/4/87 (Improvement Permit Issued)

APPLICATION FOR AN IMPROVEMENT PERMIT

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

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

(OFFICE USE ONLY)

FILE: 3982A

TC: _____

SERIAL: Nº 15071

☒ L ☐ CRT

JOB LOCATION

① ADDRESS: 10474 Moores Chapel Rd., Charlotte, NC 28214 (STREET NO. / STREET) ② FILE: ~~XXXXXX~~ 3982 A

③ JURISDICTION: _____ ④ TAX PARCEL NO.: PO 053-072-04 33

⑤ SUBDIVISION: _____ ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: Jerry (FIRST) C (MIDDLE) Barefoot (LAST)

⑨ MAILING ADDRESS: 10432 Moores Chapel Rd.

⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28214

⑬ PHONE: (WORK) 392-0901 ⑭ (HOME) _____

REQUEST

This request is for a(n):

⑮ ☒ New permit

⑯ ☐ Repair or alteration permit

⑰ ☐ Authorization for mobile home exchange

⑱ ☐ Other (specify) _____

DESIGN CRITERIA

System will serve:

⑲ ☐ Residence ⑳ ☒ Mobile home

㉒ Number of bedrooms? 2

㉓ Maximum occupancy? 3

㉔ Basement? ☐ yes ☒ no

㉑ ☐ Business or place of public assembly

㉕ Type? _____

㉖ Maximum number of employees? _____

㉗ Maximum number of seats? _____

WATER SUPPLY

㉘ 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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Jerry C Barefoot

Date: 11-20-87

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, 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 36 months from the date of issuance.

Environmentalist R.S. 12/8/87 (Date)

Director or Authorized Section Head R.S. 12/8/87 (Date)

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

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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: JOSEPH GELLNER

Address: ~~10474 MOORES CHAPEL RD.~~ 1615 BROWNS AVE

CHAR NC 28208

Description of public record requested: 10474

Street Name (or County Road): MOORES CHAPEL RD. **Lot:** ___ **Blk:** ___

Parcel Number: 083-072-04

Owner's Name: JERRY BAREFOOT

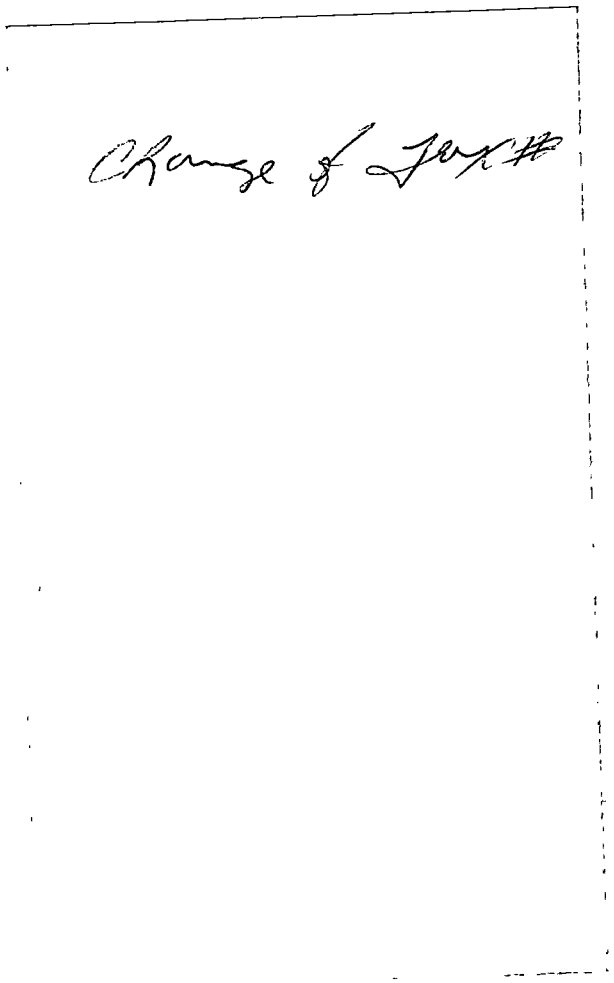
Reason for Request:

Signature of Person Making Request: Joseph Gellner

Supervisory Person: [signature]

Date: 1-19-93 **Time:** 1:00 (13:00)

recinspt.txt


Change of Text

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 5/30/89

Name/Company Barefoot Construction Co.

Sanitation _____

Vector Control _____

O.P.W.D. /

Service: ~~Installation~~
~~10474 Moores Chapel Rd~~

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
MAY 30 1989

Ck# 4018

Fee: $ 75.00 75.00

Completed by _____ Collected by _____

MECKLENBURG COUNTY

Department of Environmental Health

December 3rd, 1987

Jerry C. Barefoot
10432 Moores Chapel Road
Charlotte, NC 28214

RE: Property located at 10474 Moores Chapel Road
FILE: 3982A
PARCEL: 05307204 PO

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 14670) 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.

Sincerely,

Sylvia D. Daniel, R.S.
Environmental Health Supervisor
Environmental Resources Division

Enclosure

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 14670

File: 3982A Action: 1

Parcel: 05307204 PO ☐ PC

Location: 10474 Moores Chapel Road

Subdivision:

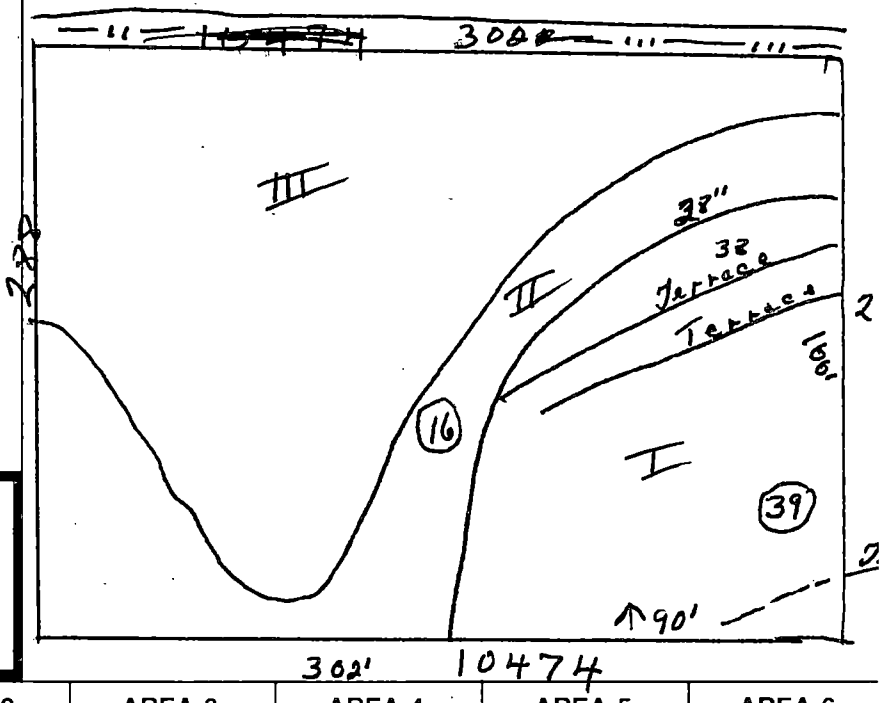
Lot: Block: Acres: 2

Owner: Jerry C. Barefoot
Address: 10432 Moores Chapel Road
Charlotte, NC 28214

Comments: _____

Described by: W. B. Ramsey

Date: 12-2-87



***** 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 2-6	S (PS) U 2-4	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) 10-15" H2O	S PS U	S PS U	S PS U
Depth	S (PS) U 38-39	S PS (U) 16-28	S (PS) (U) 12-30	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	IIa Cecil Like	IIb Enon	IIb Helena			
Area Classification	S (PS) U	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

PROPOSED PLOT PLAN

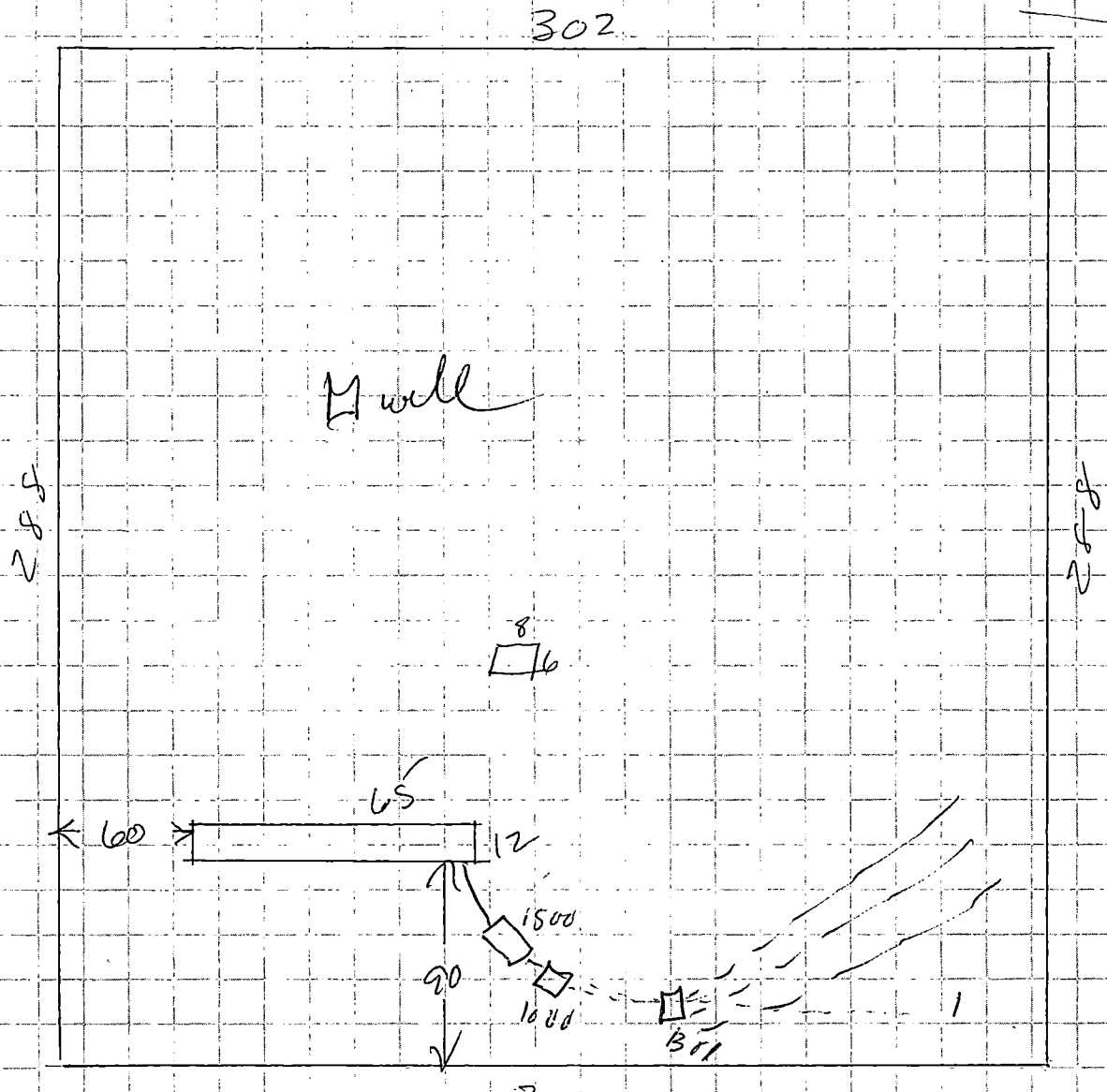
MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 3982-A

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.



1500 gal tank
1000 gal. upflow pump
270 ft drain
12" rock

Signed: Jerry C. Bamford

Date: 11-30-87

APPLICATION FOR SOIL INVESTIGATION

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

FILE: 3982A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: 10474 Moores Chapel Rd., Charlotte, NC 28214

② SUBDIVISION: _____ ③ LOT: _____ ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: PO 053 PAGE NO.: 072 PARCEL NO.: 04

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

OWNER

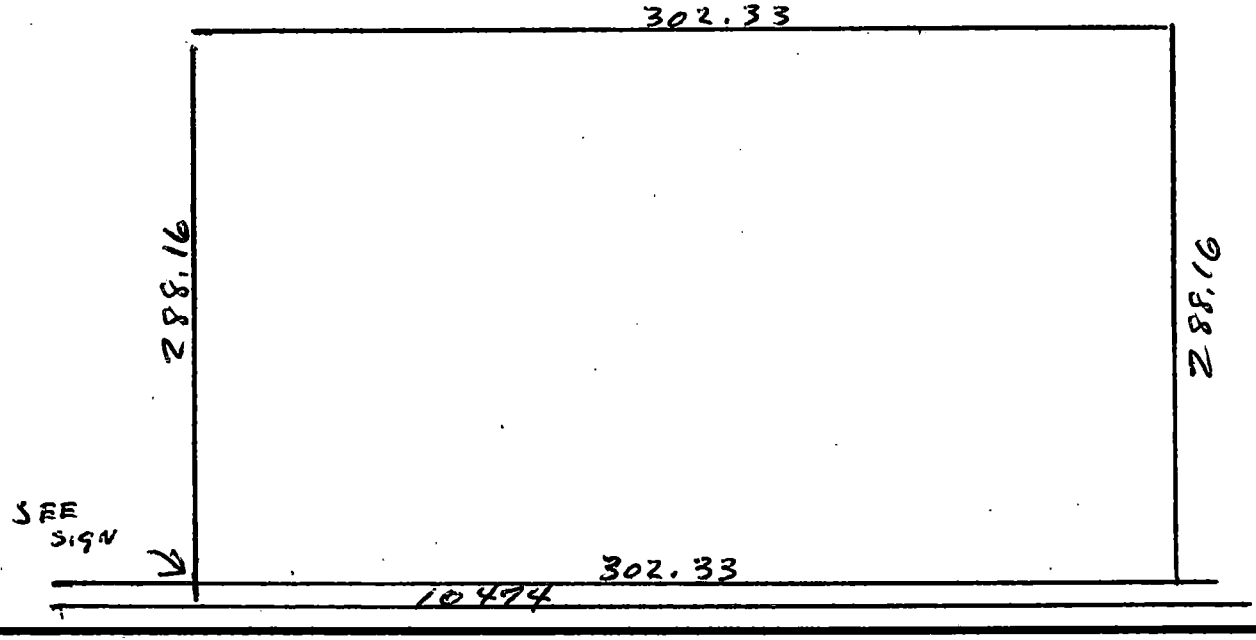
⑦ NAME: Jerry (FIRST) C. (MIDDLE) Barefoot (LAST)

⑧ MAILING ADDRESS: 10432 Moores Chapel Rd.

⑨ CITY: Charlotte ⑩ STATE: NC ⑪ ZIP: 28214

⑫ PHONE: (WORK) 392-0901 (HOME) _____

⑬ Accurately diagram and dimension lot.



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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Jerry C Barefoot

Date: 9-27-82

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

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY

CERTIFICATE OF COMPLETION/OPERATION PERMIT

D4600

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

FILE: 3982A DATE: 11/5/92

PO TC: 053-072-~~22~~ 33 ☑ L ☐ CRT

SERIAL Nº 14199

Name of Owner Jerry Barefoot Juris.:

Address of Property 10414 Moores Chapel Rd

Inspection Data:

Tank Material

Total Length of Drainfield 180'

Number of Lines 2 @ 90'

Cover Depth 24" - 30"

Water Supply Source Community Well

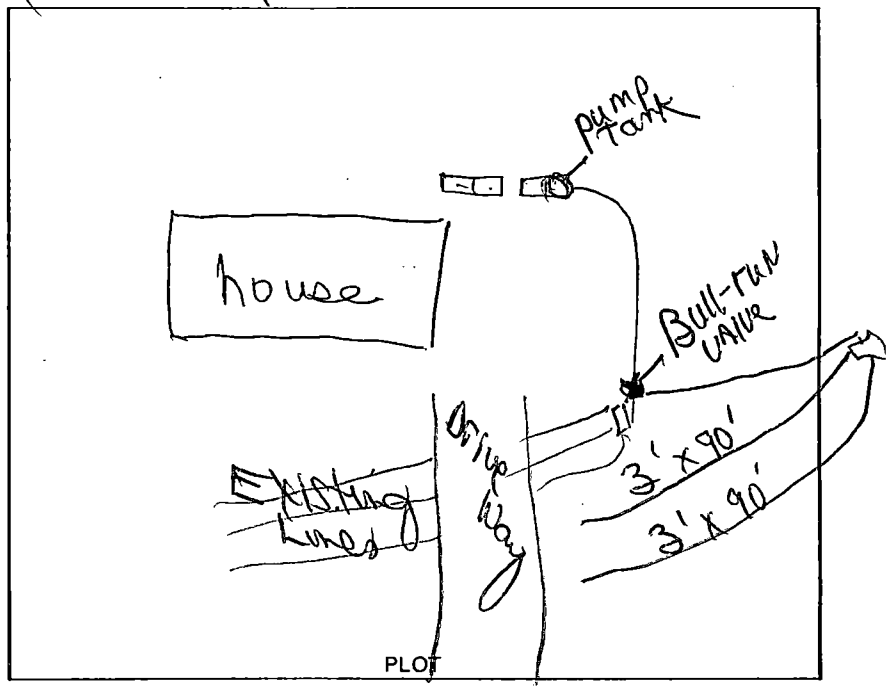
Distance to Water Source > 100'

Excavation Inspected 11/3, 11/5

Tank(s) Inspected

Wash Line Inspected

High Water Alarm Inspected



Design: 1992 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 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: Bull-run installed to alternate between Lines

OD ~ 1982

Judy J. Klein R.S.
Environmentalist

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

DATE: 11-30-87

TO: ENVIRONMENTAL HEALTH

FROM: COUNTY ENGINEERING

EHD FILE _____ JURISDICTION CODE Meck

PARCEL NUMBER 053-072-04 po

ASSIGNED ADDRESS 10474 Moores Chapel Rd

EXISTING ADDRESS _____

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	NOT APPROVED
1. SUBDIVISION REGULATIONS	☐	☐ *
2. FLOODWAY REGULATIONS	☐	☐ *
3. EROSION CONTROL REGULATIONS	☐	☐ *
4. COMMERCIAL DRAINAGE PLAN	☐	☐ *

	PRESENT	NOT PRESENT
5. PUBLIC UTILITY EASEMENT	☐ *	☐
6. PROPERTY FRONTS ON THOROUGHFARE	YES ☐ *	NO ☐
7. DRIVEWAY PERMIT REQUIRED	YES ☐ *	NO ☐

* If checked, further investigation will be required to determine whether a building permit may be issued by Building Standards for the site.

REMARKS: Septic tank

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

SIGNED: Rwl

OPWEAR 02/86