

150 OLD CANAL FINANCIAL RD

1/2/2008

duponbj

Groundwater and Wastewater Services File Imaging Project
May 2007
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2400

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

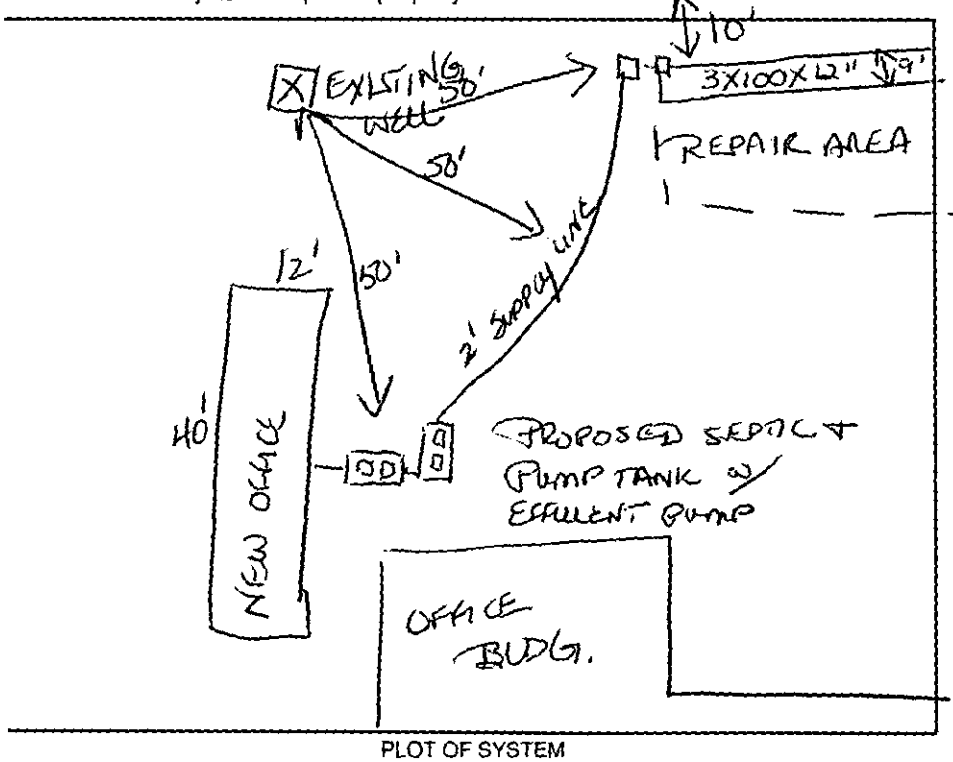
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 33623 DATE: 1-5-95

TC: 169-191-1180 ☐ L

SERIAL Nº 16087

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 1/4/95. All work shall be completed on or before 2/4/95, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A. 1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Health Department before any system can be covered up or placed into service. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed will operate properly, or relieve any person now or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank 1000 gallons

Tank Construction PCC

Trench Depth 30"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous yes

Total Line Length 200 feet

Number of Lines 2

Depth of Stone 12" inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well 50' feet

10' OFF WATER LINE

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

NAME OF OWNER The Pi Kappa Phi Foundation

LOCATION OF PROPERTY 7019 Nations Ford Rd.

Comments: 1500 SEPTIC TANK, 1000 PUMP TANK — 2' SUPPLY LINE AND TANKS AND DRAINFIELD SHALL BE 50' FROM THE WELL. 3X100X12" (2) TRENCHES — (1) WASHER BOX (1) D BOX

David Newell, R.S.

Environmental Health Specialist

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

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

Rd #150 11/9/94 334 ☐ CRT

3360

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

(704)336-5102

PERSON FILING APPLICATION:
NAME: Polito (last) Thea (first) E. (mi)
ADDRESS: 810 Brasfield PHONE: (704) 522-7874 (w)
CITY: Charlotte STATE: NC ZIPCODE: 28217

Date: Nov. 9, 1994

PROPERTY OWNER:
NAME: Pi Kappa Phi Foundation (The) (last) (first) (mi)
ADDRESS: P.O. Box 240526 PHONE: (704) 523-6000
CITY: Charlotte STATE: NC ZIPCODE: 28224

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 169-191-11
STREET ADDRESS: 7017 Nations Ford Rd Charlotte NC 28217
ZONING:

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

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: LOT SIZE (in acres): 2.000 acres

TYPE APPLICATION (check one):
☐ SOIL TEST - INDIVIDUAL LOT (D)
☐ NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
☐ EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
☐ ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
☒ COMMERCIAL OR INDUSTRIAL (N)
☐ SOIL TEST DEVELOPMENT (P)
☒ ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
☐ MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
☐ REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
☐ SINGLE MOBILE HOME (S) ☐ HOUSE (H) ☐ MULTIPLE FAMILY (U)
☐ DOUBLE WIDE (D) ☒ MODULAR HOME (M) ☐ OTHER _____ (O)

NUMBER BEDROOMS: N/a NUMBER OCCUPANTS: 4
SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business non-profit # Employees 16 Per Shift N/a
Industrial Wastes (Y/N) N
Underground Storage Tanks On Property (Y/N) N Type _____

WATER SUPPLY (check one):
☐ Community (C) ☐ Shared Well (S)
☐ Municipal (M) ☐ Other 'spring' (O)
☐ Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
☐ Swimming Pool ☐ Jacuzzi ☐ Stable/Barn ☐ Workshop ☒ None
☐ Garage ☐ Storage Building ☐ Deck/Patio ☐ Bedrooms ☐ Other

The undersigned, owner, or legal agent for the owner, of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Thea E. Polito Date: 11-9-94

NOTICE:

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 approval is granted by this Department.

...This permit is not transferable.

..200' pump to Conventional w/ Conventional repair.

☒ IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
☐ MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
☐ ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

David Newell, RS 12-5-94
Environmentalist Date

J Newell for J Domick 12-16-94
Director or Authorized Section Head Date

WWATER : 12279

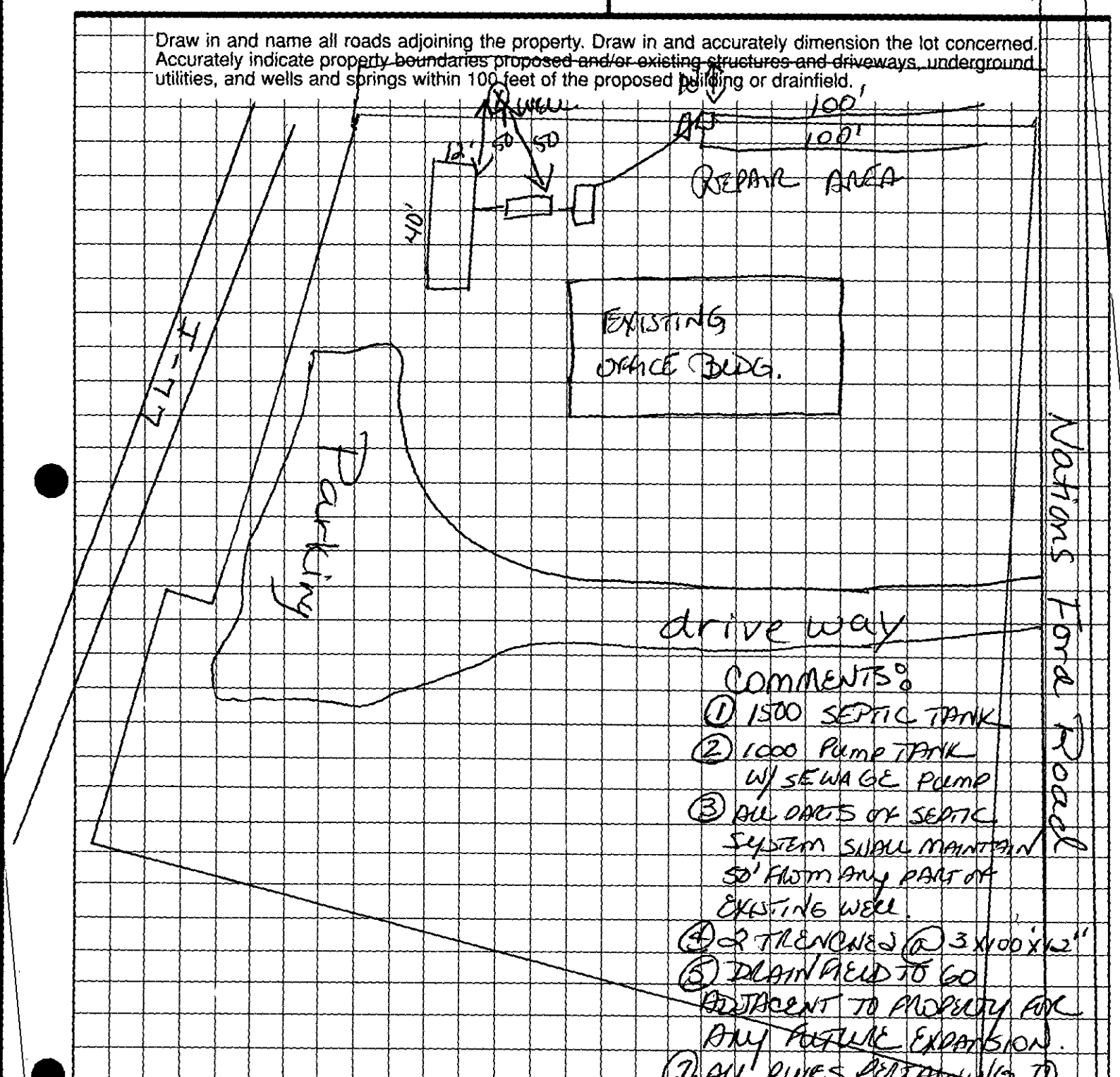
PROPOSED PLOT PLAN

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

FILE: 3360 B

TC: 16 9-191-11

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.



COMMENTS:

1. 1500 SEPTIC TANK
2. 1000 PUMP TANK W/ SEWAGE PUMP
3. ALL PARTS OF SEPTIC SYSTEM SHALL MAINTAIN 50' FROM ANY PART OF EXISTING WELL.
4. 2 TRENCHES @ 3'X100'X12"
5. DRAINFIELD TO GO ADJACENT TO PROPERTY FOR ANY FUTURE EXPANSION.
6. ALL RULES PERTAINING TO ~~ASS (c)~~ FOR SEPTIC LINE MUST BE MET AT TIME OF INSTALLATION.

Thea E. Polito
OWNER/AGENT SIGNATURE

DATE 11-9-94

APPROVAL DATE IN 12/5/94

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

E

N 80° W 215.1'

260.0' R/W
I-77 HWY.

S 12° 33' 15" W 181.80'

S 12° 33' 15" W 98.2'

N 70° 26' 45" W 20.0'

111'-0"

105'-0"

FIN. FL. 86.0

95'-0"

35'-0"

N 75° 50' E 242.74'

105'-0"

DECORATIVE FENCE

5'-0" CONC. WALK

GRAVEL PARKING AREAS

DRIVE & PARKING AREAS TO BE LOCATED ON SITE

10' WIDE GRAVEL DRIVE

CURB CUT PER ENG'R DEPT.

S 72° 22' 02" E 258.02'

Proposed R/W

S 79° 51' 52" E 350.10' R/W

60'

NORTH

SITE PLAN 1" = 40'

