

13801 ISLAND DR

12/26/2007

duponbj

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

FEE: $350.00 + 110.00

DATE: 12/20/96

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

Consultation

I | 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

Consultation

FILE #: 1678

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 001-013-12,13,14&15

STREET ADDRESS: Corner of Twin Cove Drive & Island Drive

SUBDIVISION OR MOBILE HOME PARK NAME: Twin Coves

LOT NUMBER: Lots 23, 24, 25 & 26

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:

NUMBER OF BEDROOMS: 4 max | NUMBER OF OCCUPANTS:

CLOSING DATE

Consultation made 12-31-96, 9:30 AM Ryland Winston present at time of consultation. W.A. Marlin 12-31-96

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) ✓ PRIVATE WELL (P)
__ SHARED WELL (S) __ OTHER 'SPRINGS' (O)

I am trying to get CMUD to extend water service from Hagers Ferry Road.

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

Buyer of Property

PROPERTY OWNER:	~~LEGAL AGENT FOR PROPERTY OWNER~~, IF APPLICABLE:
NAME: Crescent Resources, Inc. (LAST) (FIRST) (MI)	NAME: Winston, Ryland A. (LAST) (FIRST) (MI)
ADDRESS: 400 South Tryon St., Suite 1300	DAYTIME PHONE: ( ) 376-6523
CITY: Charlotte STATE: NC ZIP: 28201	
DAYTIME PHONE: ( ) – Susie Williams 382-1708	

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? Subdivision Map in Bk 12 at Pg 5 on 8/27/64

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.

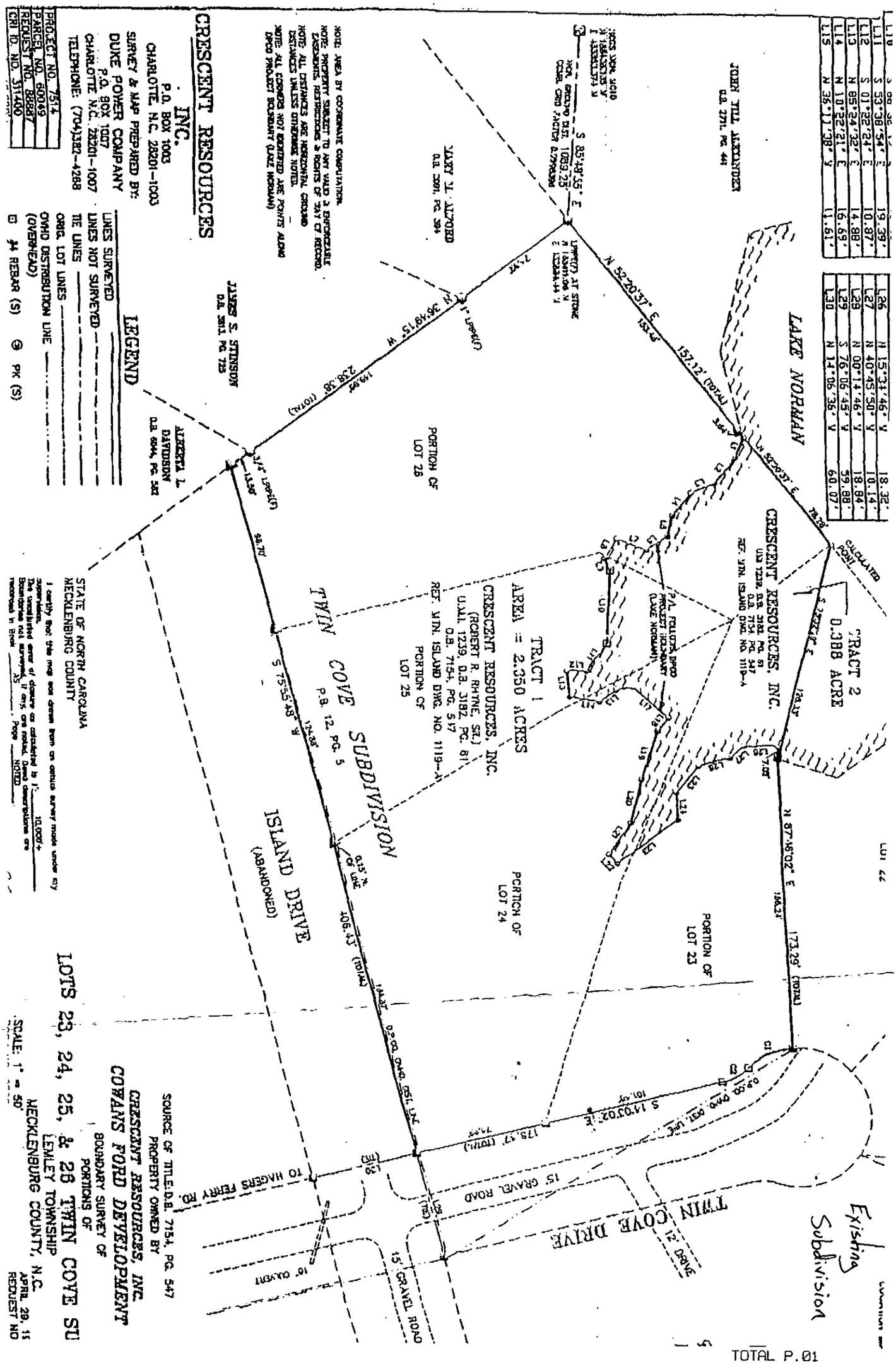
SIGNED: Jim Shue DATE: 12/19/96

VICE PRESIDENT
Crescent Resources, Inc.

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

1678

To	Ry Winston	From	Andrew Burke
Co./Dept.		Co.	
Phone #		Phone #	704-478-2130
Fax #	704-375-8654	Fax #	704-478-4149



1678B

LAKE NORMAN

TRACT 2
0.388 ACRES

CRESCENT RESOURCES, INC.

TRACT 1
AREA = 2.250 ACRES

CRESCENT RESOURCES, INC.

TWIN COVE SUBDIVISION

ISLAND DRIVE
(ABANDONED)

TWIN COVE DRIVE

1" = 50'

Proposed Subdivision

12-17-96 04:16PM P002 #26