

9218 REAMES RD

02511317

1/7/2008

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: 458913 DATE: 07-13-01

TC: 025-113-07 ☒ L ☒ CRT

SERIAL Nº 18664

Name of Owner Vivian M. Duckett Juris.: _____

Address of Property ~~6232~~ 6218 Reames Rd.

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400'

Number of Lines 4 @ 100'

Cover Depth 12-24"

Water Supply Source P. Well

Distance to Water Source 58'

Excavation Inspected 07-13-01

Tank(s) Inspected 07-13-01

Wash Line Inspected N/A

High Water Alarm Inspected N/A.

* See Installation approval *

PLOT

Design 2001 1500ST 1200SFT 12"G P.S. wil CTR# L. Lucker

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 I5A 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 I5A 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 System designed for a (3) bedroom design unit. Type II R Repair.

Joshua R. Sellers R.S.
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

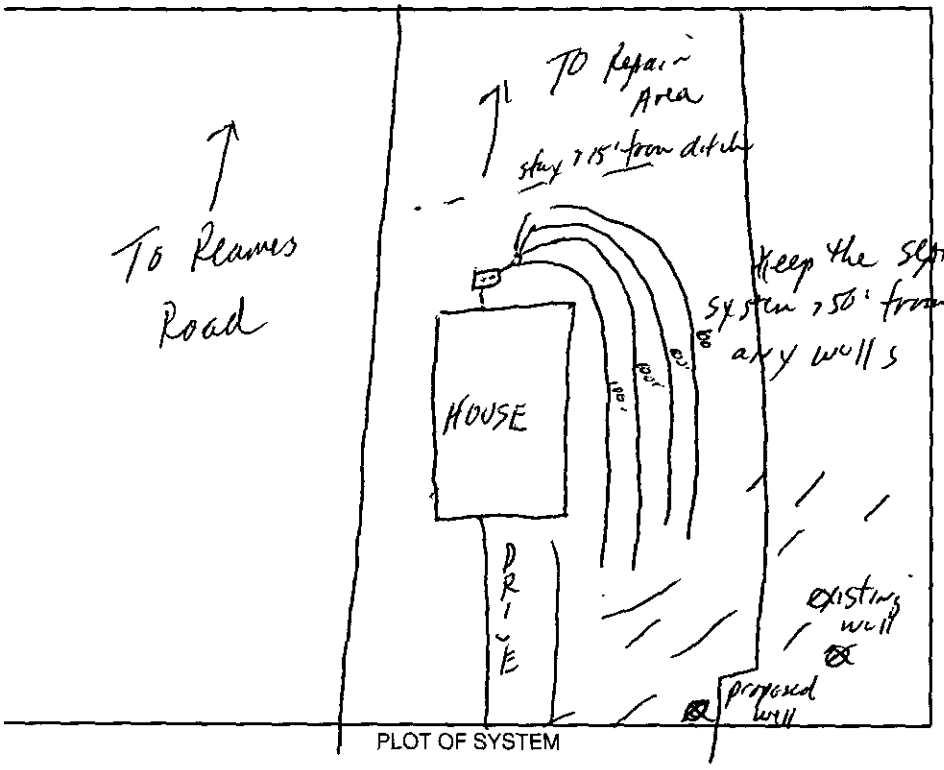
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 4589B DATE: 7/11/01

TC: 025 113 07 ☒ L

SERIAL Nº 18746

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 12/17/01. All work shall be completed on or before 8/11/01, 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 NA gallons

Tank Construction PCC

Trench Depth 24"

Absorption and/or Nitrification Lines:

Trench Width 24" feet

Trench Walls Scored and Porous Yes

Total Line Length 400 feet

Number of Lines 4 (100')

Depth of Stone 12" inches

Distance from House 5' feet

Distance from Property Line 10' feet

Distance from Well > 50' feet

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

NAME OF OWNER Vivian M. Duckett

LOCATION OF PROPERTY 9218 ~~9232~~ Reames Rd

Comments: 1500 ST, 4 lines x 100'long x 3'wd x 12" stone Kep the septic system > 50' from any wells

Phila J. Walker RS.
Environmental Health Specialist

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

cc CK# 4776

FEE: 30.00 AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION
DATE: 5/31/01 gc VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

DATE: 5/16/01 PERMIT NO: 4589B
PARCEL NO: 025 113 07

JOB LOCATION ADDRESS: 9218 Reames Rd
PROPERTY OWNER: Vivian M Duckett
BUILDING CONTRACTOR: LVH Homes
SUBDIVISION NAME:
AUTHORIZATION ISSUED BY: Phila L. Walker RS. DATE:
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 4589B, 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 CONDITIONS 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 FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

X 5-31-01
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

DATE: 5/31/01

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

Meck

025-113-07

PARCEL NUMBER

9218 Reames Rd.

ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

PROJECT NAME (IF APPLICABLE)

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

1. SUBDIVISION REGULATIONS	_____ APPROVED	_____ NOT APPROVED
2. FLOODWAY REGULATIONS	_____ APPROVED	_____ NOT APPROVED
3. WATERSHED PROTECTION	_____ APPROVED	_____ NOT APPROVED
4. COMERCIAL DRAINAGE PLAN	_____ APPROVED	_____ NOT APPROVED
5. PUBLIC UTILITY EASEMENT	_____ PRESENT	_____ NOT PRESENT
6. PROPERTY FRONTS ON THOROUGHFARE	_____ YES	_____ NO
7. DRIVEWAY PERMIT REQUIRED	_____ YES	_____ NO
8. DOES PROJECT CONFLICT WITH ROAD PROJECT?	_____ YES	_____ NO

REMARKS: residence

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

SIGNED: BL

Permit Number: 4589B

CONDITIONS OF IMPROVEMENT PERMIT

Tax Number: 025 113 07

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	✓ No	___ Partial Basement	
Type Primary Wastewater System Type (circle one): I II III IV V VI	___ 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)	
YES Serviced by private well	1500 Gallon septic tank	400' Total trench length (ft)	24" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)	
3 Bedrooms in residence	NA Gallon pump tank	12" Depth of stone		

Any surface waters present: NO Type: Minimum separation distance:

Site modifications required:

Additional Conditions: Private well to be installed, If shared well use, the septic system must be >100' from the shared well. Lift pump required for repair

Repair Area System Type Type (circle one): I II III IV V VI	✓ 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)	24" 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.

Phila S. Walker RS. 5/16/01
DEHNR Authorized Agent Date

[signature] 5-31-01
Owner/Agent Signature Date

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

45893

CURVE	
C1	
C2	
C3	
C4	12
C5	12

KEVIN W. DEVINE
5931/287

D.I. DUCKET
5931/285

DB. 5671 PG. 447

Montiere
Lugo
596-0715
mobile
619-6225

1" = 60'

(BASE BEARING)
S 02°30'21" W
255.89'
295.89' TOTAL

2" PIPE
IPS
40.00'
2" PIPE
10' UDE

45' SETBACK

148.5'
132.02'
N 81°13'53" E
proposed well

178.0'

CONCRETE CONTROL MONUMENT
IPS

60.3'
53.8'
27.7
1 STORY MODULAR VINYL COMP. ROOF

565.45' TOTAL
557.69'
S 78°59'34" E
8' SETBACK

COMMENTS:
3 Bedroom Residence
1500 ST, 5 lines x 80' long x 3' wd x 12" stone
400 LF, Type IIIb Repair Area w lift pump
Keep the septic system >100' from shared well if use and >50' from individual well.
80' from the back right house corner to the left property line.

90' from back right house corner to line

HOUSE
10' UDE
80'
60'
40'

S 76°21'31" W
472.73'

N 87°18'00" E
377.02'
XXXXXX.9
394.71' TOTAL

Keep the septic system >15' from the complex slopes

533.25' TOTAL

D.I. DUCKET
3574/94

(TIE ONLY)
S 80°59'43" E

BBS JR.
718

354.8'

LOT 2
Type IIIb
Repair Area

10' UDE
C1
60.00'
60.52'
R/W
IPS

CONCRETE CONTROL MONUMENT
30' SETBACK
C2
88.67'
L2
0.11 AC. DEDICATED TO N.C.D.O.T.
138.33'
N 02°42'00" W
227.00' TOTAL

IPS
C5
67.97'
N 02°30'00" W 217.51'
285.47' TOTAL
C4
C3
L3
0.02 AC. DEDICATED TO N.C.D.O.T.
0.01 AC. DEDICATED TO N.C.D.O.T.

REAMES ROAD
(PAVED 60' PUBLIC R/W)

REAMES ROAD ASSOCIATES
3700/592

5-31-01

025-113-07
037-214-01

1) This p
Rights
2) All lots
3) Total
4) Total
5) Proper
6) This s
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7) Minim
8) The s
9) The p
10) Bound
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23) Tax i

RECOR

LUTHER D. SHUM
(MINOR SU

LONG CREEK TWSP.,
SCALE: 1"=60'

OWNER: LUTHER
92
CHAR
(

GRAPHIC SCALE

60 0 30 60 120 240

(IN FEET)
1 inch = 60 ft.

AS
ASSOCIATES P.A.

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

Sheet: _____

AC #2

Property ID: PO 025- 113-07

Lot #: _____

File #: 4589B

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Luther O. Shumate APPLICANT: Charles A. Lewis

ADDRESS: 9232 Reames Road, Charlotte, N.C. DATE EVALUATED: 5-3-01

PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949) 360gpd PROPERTY SIZE: .93

LOCATION OF SITE: Reames Road PROPERTY RECORDED: _____

WATER SUPPLY: ☐Private ☐Public ☐Well ☐Spring ☒Other shared well

EVALUATION METHOD: ☒Augur Boring ☐Pit ☐Cut

TYPE OF WASTEWATER: ☐Sewage ☐Industrial Process ☐Mixed

PROFILE #	.1940 Landscape Position/ Slope %	Horizon Depth (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS &LTAR
1	LS 5-15%	0-4"	gr|sc|	Fr|SExPl|SS|SP	>48" To soil wetness	48"	N/A	None	PS .391 F2 IV
		4-40"	sBK|c	Fi|SExPl|SP					
		40-48"	sBK|sc|	Fr|SExPl|SS|SP					
2	LS	0-6"	gr|sc|	Fr|SExPl|SS|SP	2.5Y 7/1 @ 20"	24"	N/A	None	US
		6-17"	sBK|c	Fi|SExPl|SP					
		17-24"	ABK|c	VFi|Mixed|VP/US					
3	LS	0-5"	gr|sc|	Fr|SExPl|SS|SP	>48" To soil wetness	48"+	N/A	None	PS .391 F2 IV
		5-48"	sBK|c	Fi|SExPl|SP					
4	LS	0-11"	gr|sc|	Fr|SExPl|SS|SP	>48" To soil wetness	48"	N/A	None	PS .391 F2 IV
		11-48"	sBK|c	Fi|SExPl|SP					
5	LS	0-7"	gr|sc|	Fr|SExPl|SS|SP	>48" To soil wetness	48"	N/A	None	PS .391 F2 IV
		7-48"	sBK|c	Fi|SExPl|SP					
6	LS	0-5"	gr|sc|	Fr|SExPl|SS|SP	>48" To soil wetness	48"	N/A	None	PS .391 F2 IV
		5-48"	sBK|c	Fi|SExPl|SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	US
System Type(s)		
Site LTAR	.391 F2	.391 F2

OTHER FACTORS (.1946): _____

SITE CLASSIFICATION (.1948): Unsuitable

EVALUATED BY: W. A. Marlin LSS 5-3-01

OTHER(S) PRESENT: _____

FILE # 45893

COMMENTS 100% Repair May need pump

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

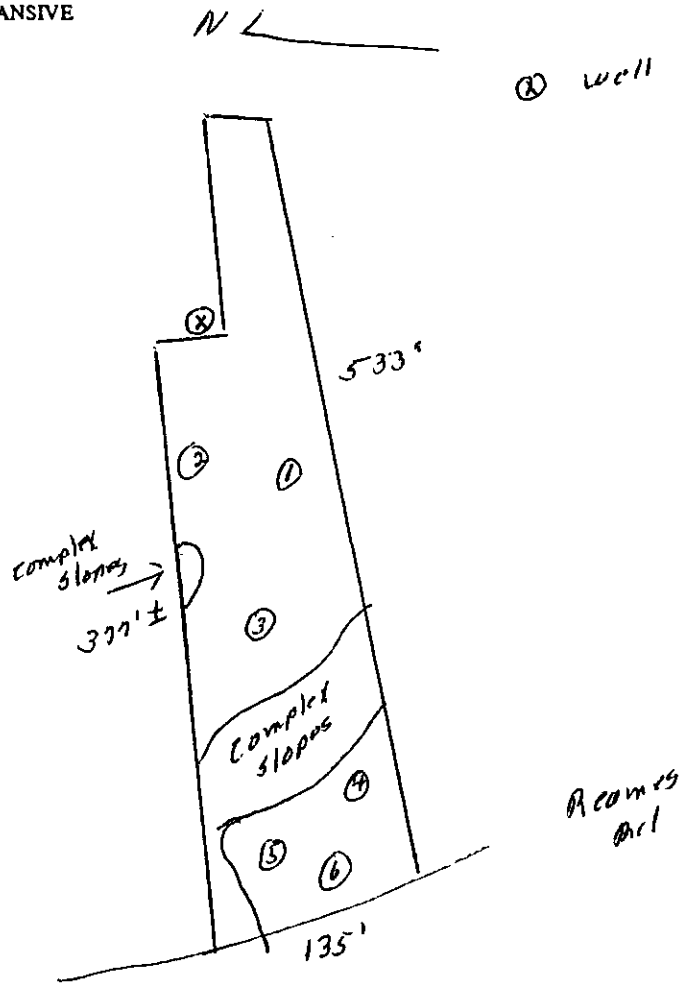
STRUCTURE

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

MINERALOGY

SLIGHTLY EXPANSIVE

EXPANSIVE



FEE: _____

DATE: _____

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

Paid 200 - CK 4701 4/15/01 RP BLC 1 1 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 #: 45898

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION: 025-113-07 Pa

TAX/PARCEL NUMBER: ~~2000-050255~~

STREET ADDRESS: Reames Rd. Charlotte, NC

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

TYPE OF BUILDING (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 2128

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 4

FOUNDATION FOR RESIDENCE:

__ WITHOUT BASEMENT ON SLAB
✓ CRAWL SPACE
__ WITH BASEMENT /PLUMBING
__ WITH BASEMENT /NO PLUMBING

TOWNSHIP (CHECK ONE):

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

CLOSING DATE_____

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)

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

BURIED CABLES, LANDFILLS, STUMPHOLES	__ YES ✓ NO	WELL, SPRINGS OR WATERLINES	__ YES ✓ NO
EXISTING WASTEWATER SYSTEMS	__ YES ✓ NO	DESIGNATED WETLANDS	__ YES ✓ NO
EASTMENTS OR RIGHT-OF-WAYS	__ YES ✓ NO		

PROPERTY OWNER: Vivian M Duckett

NAME: (LAST) Duckett (FIRST) Vivian (MI) M

ADDRESS: 9232 Reames Rd.

CITY: Charlotte STATE: NC ZIP: 28214

DAYTIME PHONE: ( ) –

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) Lewis (FIRST) Charles (MI) A

DAYTIME PHONE: 704 797-0014

LVV Homes Salisbury, N.C.

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? Aug 8, 1986

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: 4-12-01

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

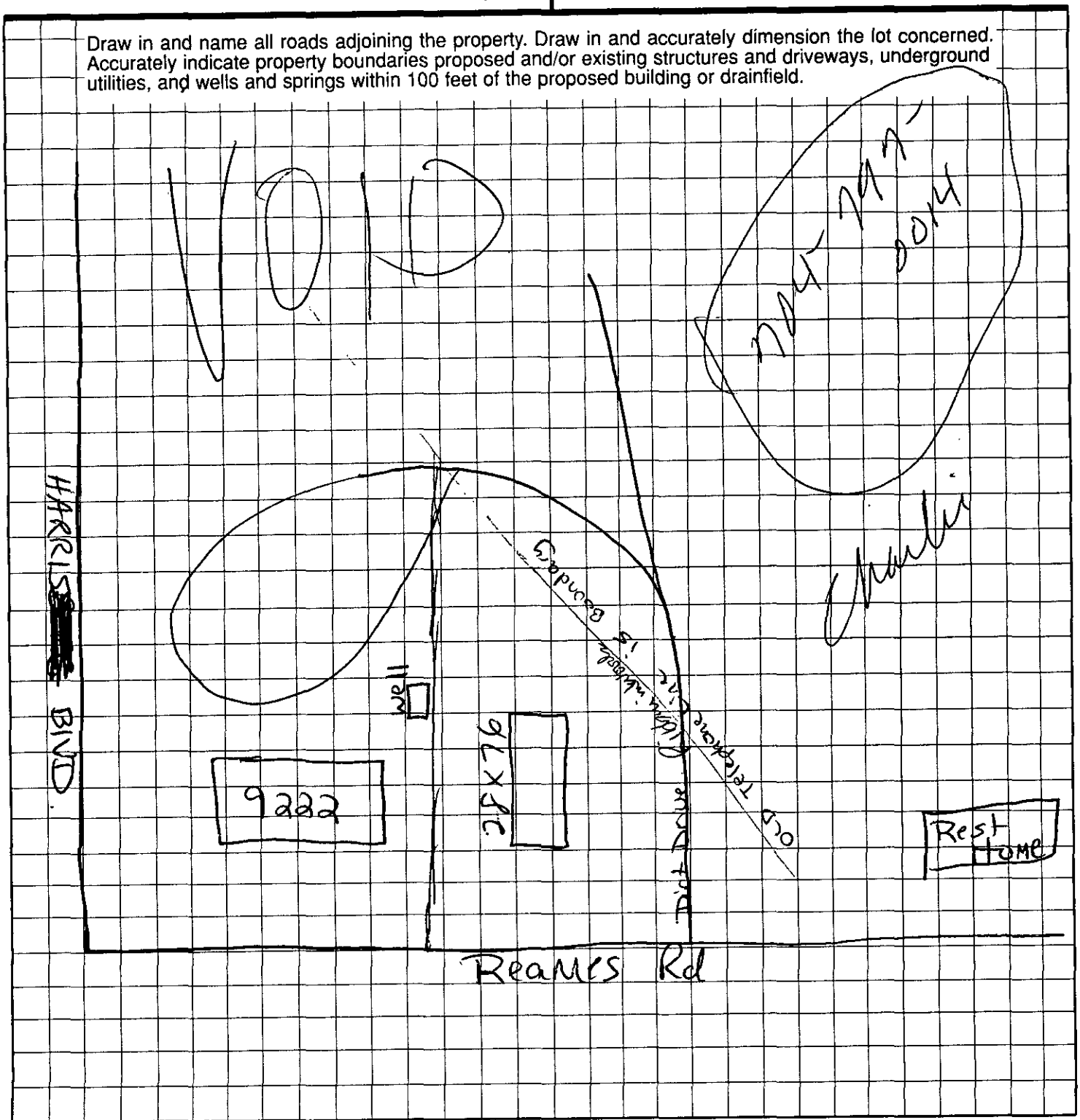
PROPOSED PLOT PLAN

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

FILE: _____

TC: 025-113-02 PP

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 4-18-07

APPROVAL DATE _____

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

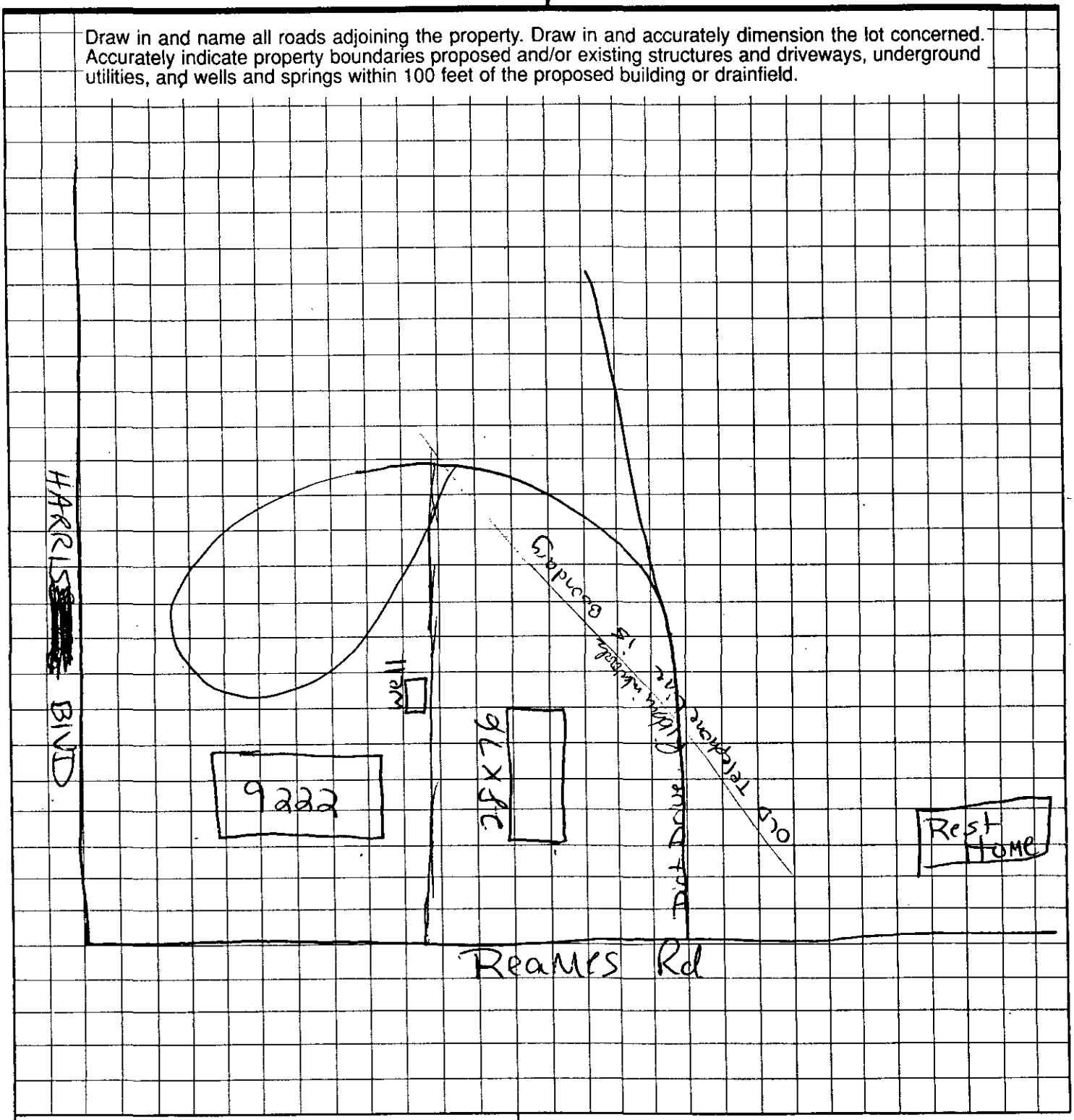
PROPOSED PLOT PLAN

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

FILE: _____

TC: 025-113-02 PP

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.

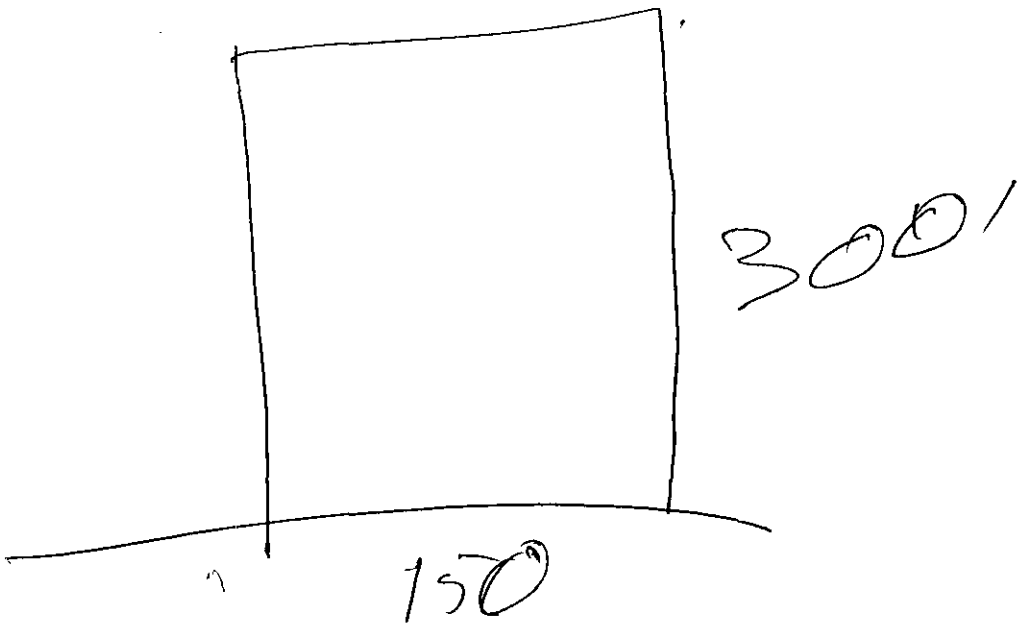


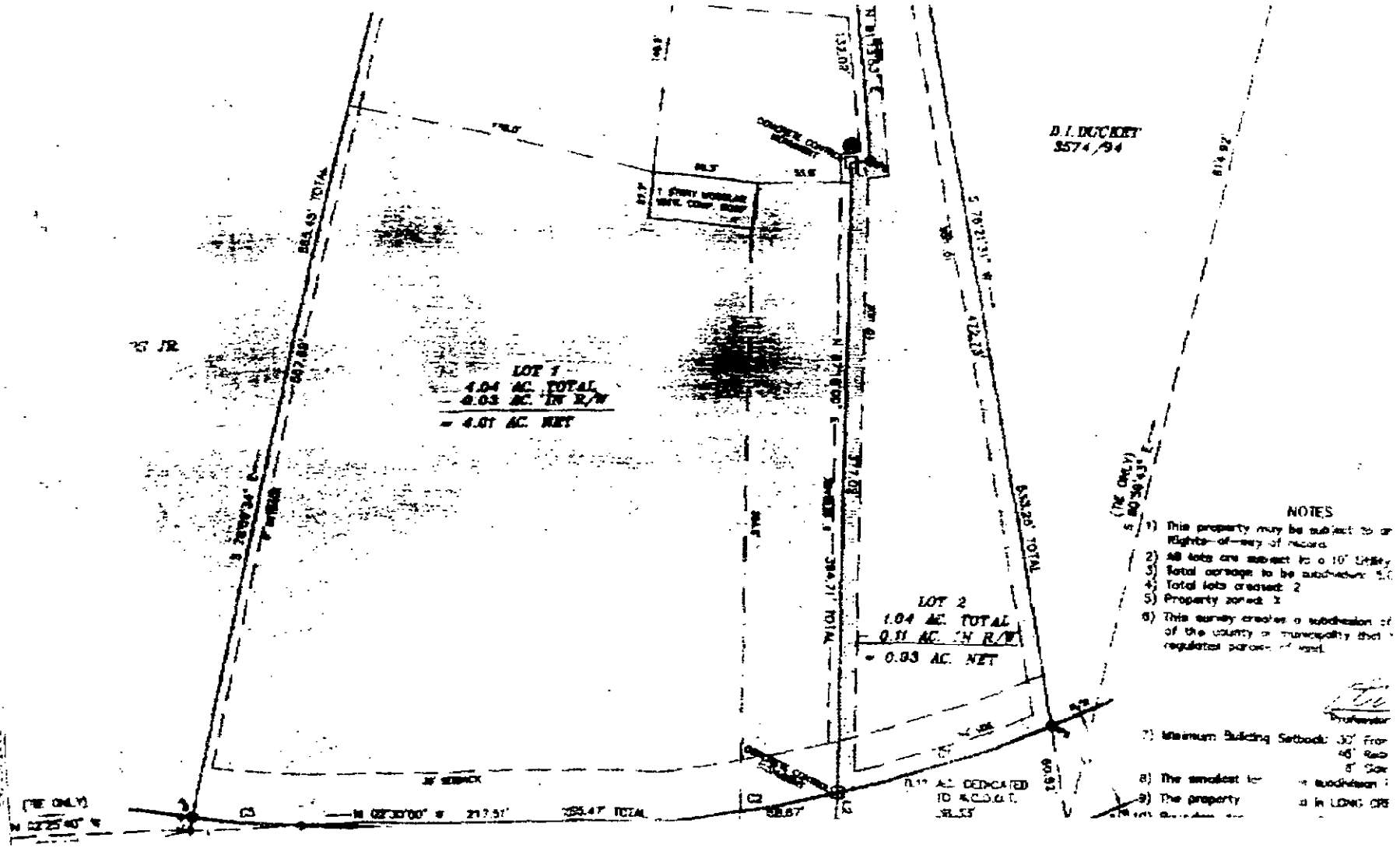
OWNER/AGENT SIGNATURE _____

DATE 4-18-07

APPROVAL DATE _____

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


300'
150


LOT 1
4.04 AC. TOTAL
- 0.03 AC. IN R/W
= 4.01 AC. NET
LOT 2
1.04 AC. TOTAL
0.11 AC. IN R/W
= 0.93 AC. NET
D.I. DUCKETT
3574/94
NOTES
1) This property may be subject to
Rights-of-way of record.
2) All lots are subject to a 10' Utility
3) Total acreage to be subdivided:
4) Total lots created: 2
5) Property zoned: X
6) This survey creates a subdivision
of the county or municipality that
regulates parcels of land.
7) Minimum Building Setbacks: 30' Fro
45' Rea
8' Sid
8) The smallest lo
subdivision
9) The property
is in LONG CRE
25' I.R.
N 12°25'40" W
(TIE ONLY)
S 78°21'15" W
412.33'
N 78°21'15" E
533.25' TOTAL
N 11°38'45" W
(TIE ONLY)
N 11°38'45" W
387.71' TOTAL
S 11°38'45" E
387.71'
S 78°21'15" W
847.48' TOTAL
N 11°38'45" W
387.71'
30' SETBACK
C1
N 02°30'00" W
217.51'
C2
C3
0.11 AC. DEDICATED
TO R.O.D.O.T.
±0.55'
19.99'

CURVE	R
C1	78
C2	78
C3	78
C4	125
C5	125

DB. 5671 PG. 447

KEVIN W. DEVINE
5931/287

D.I. DUCKET
5931/285

Montierre
Lugo
596-0715
mobile
619-6225

(BASE BEARING)
S 02°30'21" W

2" PIPE

295.89' TOTAL

255.89'

IPS

40.00'

2" PIPE

10' UDE

45' SETBACK

N 81°13'53" E

132.02'

148.5'

176.0'

CONCRETE CONTROL MONUMENT

IPS

60.3'

55.8'

27.7'

1 STORY MODULAR VINYL COMP. ROOF

D.I. DUCKET
3574/94

614.92'

565.45' TOTAL

557.69'

S 78°59'34" E

8' SETBACK

S 76°21'31" W

472.73'

30' UDE

10' UDE

N 87°18'00" E

354.8'

394.71' TOTAL

30' SETBACK

533.25' TOTAL

S 80°59'43" E
(TIE ONLY)

LOT 1
4.04 AC. TOTAL
- 0.03 AC. IN R/W
= 4.01 AC. NET

LOT 2
1.04 AC. TOTAL
- 0.11 AC. IN R/W
= 0.93 AC. NET

IPS

C5

N 02°30'00" W 217.51'

285.47' TOTAL

C4

C3

L3

C2

88.67'

L2

N 02°42'00" W

138.33'

227.00' TOTAL

C1

60.52'

60.00'

R/W

IPS

67.97'

0.01 AC. DEDICATED TO N.C.D.O.T.

REAMES ROAD
(PAVED 60' PUBLIC R/W)

0.02 AC. DEDICATED TO N.C.D.O.T.

0.11 AC. DEDICATED TO N.C.D.O.T.

REAMES ROAD ASSOCIATES
3700/592

025-113-07
037-214-01

1) This pr
Rights-
2) All lots
3) Total o
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RECOR

LUTHER D. SHUM
(MINOR SU

LONG CREEK TWSP., L
SCALE: 1"=60'

OWNER: LUTHER
923
CHAR
(7

GRAPHIC SCALE

60 0 30 60 120 240

(IN FEET)
1 inch = 60 ft.

& ASSOCIATES P.A.