

21401 TORRENCE CHAPEL RD

00140147

6/1/2007

duponbj

Groundwater and Wastewater Services File Imaging Project

May 2007

Barcode Font = IDAutomationHC39M

Pd. 25.00
Ck# 127
3-4-92
HB

400 ☑ ✓

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

5452A PC ☑ [] CRT

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: ~~Ber~~ Erwin (last) Robert (first) G (mi)
ADDRESS: Rt 7 Box 596 B PHONE: (704) 664-1064
CITY: Mooresville NC STATE: ~~IN~~ NC ZIPCODE: 28115

Date:

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 001-301-02
STREET ADDRESS: 21401 Torrence Chapel Rd
ZONING:

PROPERTY OWNER:
NAME: Brownrigg (last) Betty (first) (mi)
ADDRESS: 21401 Torrence Chapel Rd PHONE: (704) 892-0016
CITY: Davidson STATE: NC ZIPCODE: 28036

SUBDIVISION OR MOBILE HOME PARK NAME:

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

TYPE APPLICATION (check one):
LOT NUMBER: LOT SIZE (in acres):

[] 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)
Screen in existing Deck
[] 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: 3 NUMBER OCCUPANTS: 1
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):
[] 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: Robert G Erwin Date: 3/4/92

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.

...

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

Environmentalist Date

Director or Authorized Section Head Date

WWATER : 122791

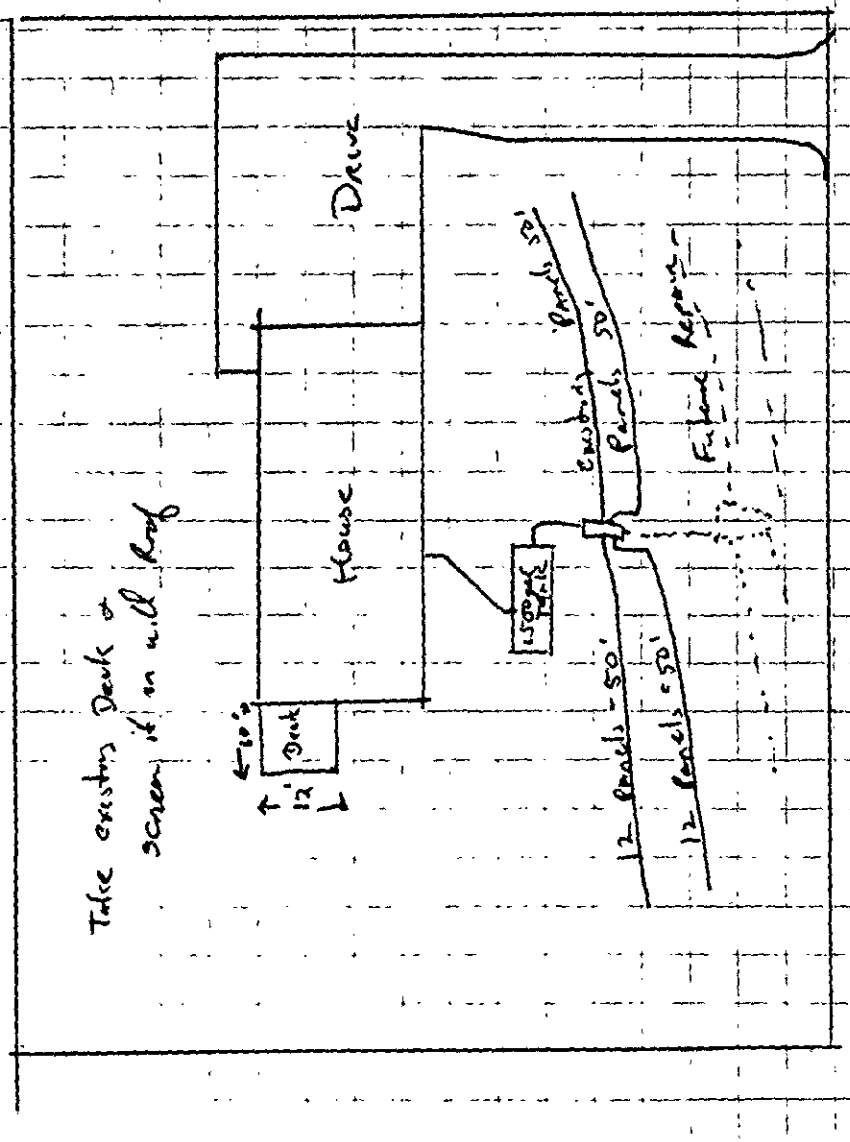
PROPOSED PLOT PLAN

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

FILE: 5452A

TC: 001-301-02

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.



APPROVAL DATE 3-4-92

Sylvia,

David Profitt, of Profitt Contracting Co, (Owner) wanted to file an application in June of 1989, before the rates increased. This is for a compact system. He was told that he could not file until he had a design system by the contractor attached to his application. He then gave his application to Mr Osborne or Osgood I forget the name, he said Iris gave him the name, and was told that this is the only contractor in Charlotte who does this compact system, anyway Mr Osgood,or Mr Osborne did not complete the design and return it with the application and now Mr. Profitt just found out it had not been sent in and came in today and filled with the design system attached. The fees had changed in the meantime and he feels that this is unjustified that he be charged the new fees. My question is this, could we not have taken his application the first time, since this is not a conventional system and charged him the $75.00 and then upon the installation permit, we would have charged him the new $100.00 fee, or given him the option of paying the total fee at the time with a possible refund of $75.00. Total fee at that time being $150.00.

Thanks
Lorraine Whitaker

David Profitt 846-8063 (he paid $200.00) File #5452A

APPLICATION FOR SOIL INVESTIGATION

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
FEB 3[illegible]
ENVIRONMENTAL HEALTH
DIVISION

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

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

(OFFICE USE ONLY)

FILE: 5452A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: 21401 Torrence Chapel Road, Davidson

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

⑤ PARCEL REFERENCE: BOOK NO.: 001 PAGE NO.: 301 PARCEL NO.: 02

⑥ DEED REFERENCE: BOOK NO.: 4658 PAGE NO.: 519

OWNER

⑦ NAME: Ernest (FIRST) Clark (MIDDLE) Browning (LAST)

⑧ MAILING ADDRESS: 21136 Norman Shores Drive

⑨ CITY: Davidson ⑩ STATE: NC ⑪ ZIP: 28036

⑫ PHONE: (WORK) (614) 486-5813 (HOME) (704) 892-9135

⑬ Accurately diagram and dimension lot.

See attached survey.

Owner wishes to divide lot. Do health regulations (septic tank) permit this? Owner will be placing house on half of lot next to church.

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: X Ernest C. Browning

Date: 1/30/89

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 2/3/89

Name/Company Sherry Bruning

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Soil # 5452A

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

FEB 3 1989

Fee: $ 30.52 Ck # 105 11.26.89

Completed by _____ Collected by _____

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 15987

File: 5452A

Action 4

Parcel: 00130102

☐ PC

Location: Torrence Chapel Road

Subdivision:

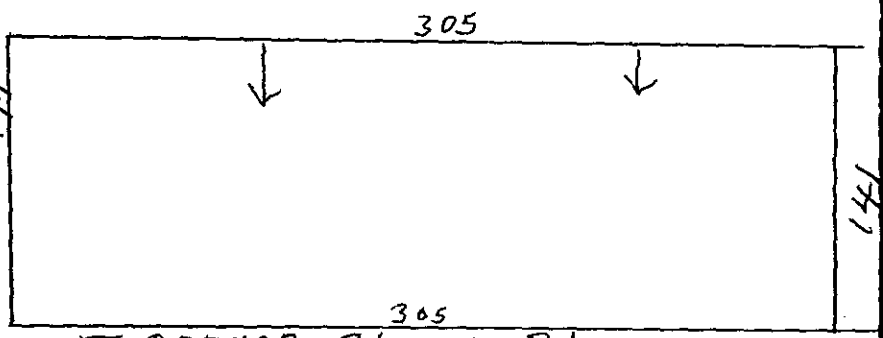
Lot: Block: Acres: .994

Owner: Ernest Clark Browning
Address: 21136 Norman Shores Drive
Davidson, NC 28036

Comments: _____

Described by: W. B. Ramsey

Date: 2 – 9 – 89



***** 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	S PS U	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	S PS U	S PS U	S PS U
Depth	S (PS) U 46–48	S PS U	S PS U	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	IIw Cecil					
Area Classification	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U

Mecklenburg County
Health Department

Basil G. Dalla, M.D., M.P.H.
Health Director

February 14th, 1989

Ernest Clark Browning
21136 Norman Shores Drive
Davidson, NC 28036

RE: Property located at Torrence Chapel Road
FILE: 5452A
PARCEL: 00130102

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. Results of the investigation revealed that the lot contains soils which have been classified as PROVISIONALLY SUITABLE in accordance with the provisions of 10 NCAC 10A .1900. A copy of the Site Evaluation Report (Serial Number 15987) deliniating the soil types and their respective classifications is enclosed.

While this classification indicates the site is acceptable for the installation of a septic tank system, no specific system or plans have been approved. The area available for such an installation may impose limitations on the size and/or type construction permitted on the lot. Specific plan approval will be provided upon submission of 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 and determination that the area is adequate to accomodate the proposed construction.

Please note that this classification may be revoked if any filling, grading or construction (including the drilling of a well) is performed on the lot which in the opinion of this Department renders any area previously designated suitable for system installation, unsuitable. Futhermore, this approval may be revoked should any changes occur in the regulations under which it was granted, if such changes would have prevented its approval had they been in effect on the date of issuance.

If there are any questions concerning this matter, do not hesitate to contact me.

Very truly yours,

Sylvia D. Daniel, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

DATE: 7/31/89

NAME/COMPANY: Profitt Constr Co.

David Propst —
846-8063

Sanitation _____

Vector Control _____

OPWD ✓

SERVICE: Inspection - New
File # 5452A

RECEIVED
ENVIRONMENTAL HEALTH DIVISION
PAID

JUL 31 1989

FEE: $200.00

CR # 1795
$ 2.00

C. Howell
Completed By

Collected By

APPLICATION FOR AN IMPROVEMENT PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
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: 5452A

TC: _____

SERIAL: No. 18917 ☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 21401 (STREET NO.) TORRENCE CHAPEL Rd (STREET) ② FILE: _____

③ JURISDICTION: CORNELIUS NC ④ TAX PARCEL NO.: 001 301 02

⑤ SUBDIVISION: N/A ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: EARNEST (FIRST) (MIDDLE) BROWNING (LAST)

⑨ MAILING ADDRESS: 21401 TORRENCE CHAPEL RD.

⑩ CITY: DAVIDSON ⑪ STATE: NC ⑫ ZIP: _____

⑬ PHONE: (WORK) _____ ⑭ (HOME) 892-9135

REQUEST

This request is for a(n):

⑮ ☑ New permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify) _____

DESIGN CRITERIA

System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 3 ㉕ Type? _____

㉓ Maximum occupancy? 2 ㉖ Maximum number of employees? _____

㉔ Basement? ☑ yes ☐ no 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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Daniel Profitt CONTRACTOR

Date: 7/31/89

IMPROVEMENT PERMIT

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 permit is issued by this Department.

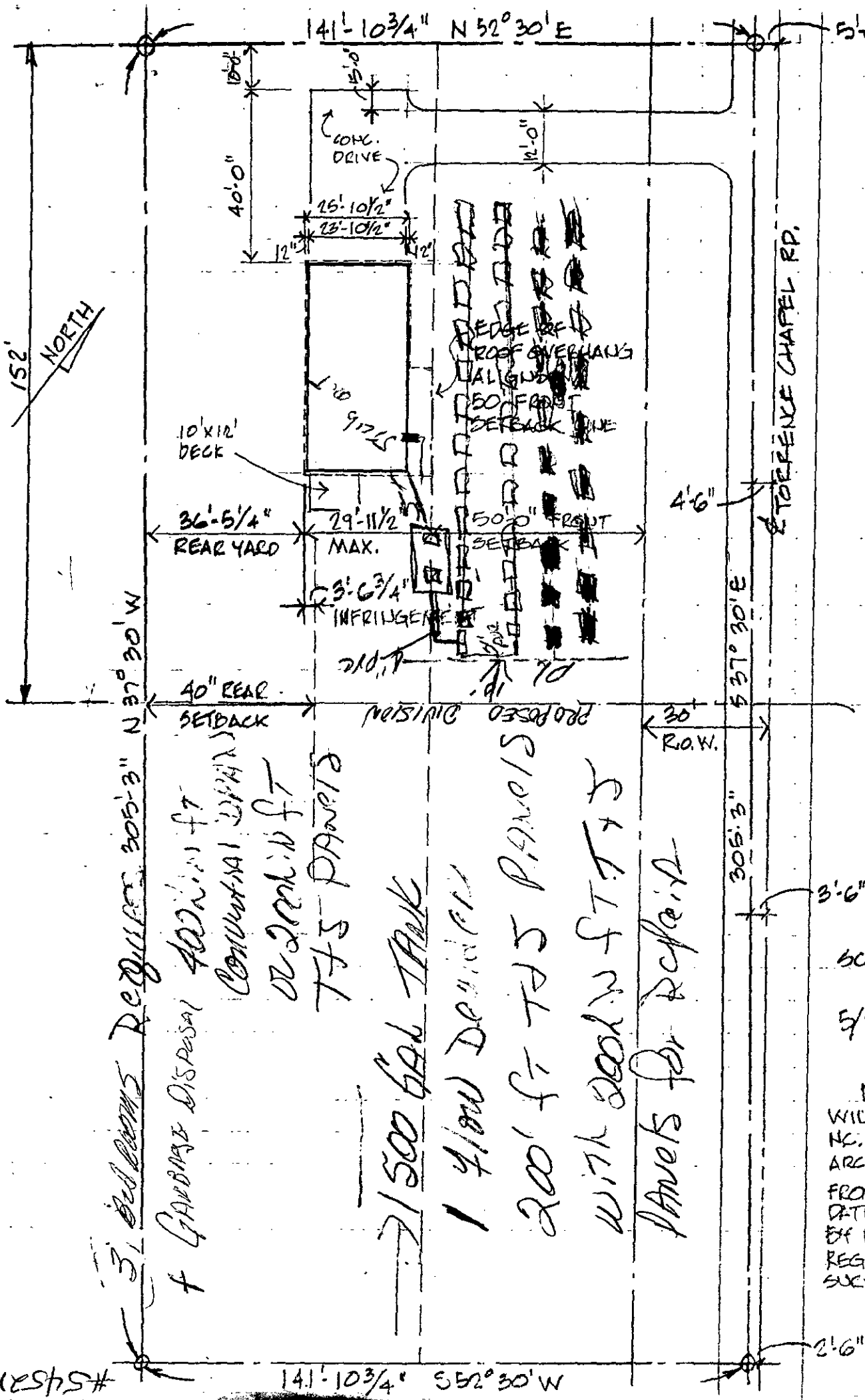
... This permit is not transferable, and shall become null and void 36 months from the date of issuance.

House Already Constructed - Bldg Permit Granted By Bldg Stds

Environmentalist _____ Date _____

Director or Authorized Section Head _____ Date 8-18-89

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

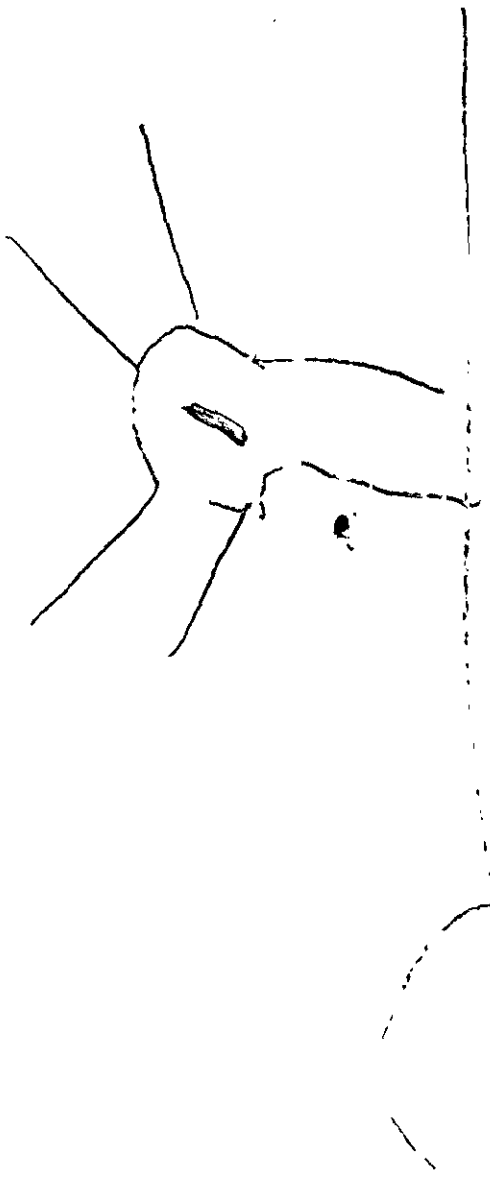


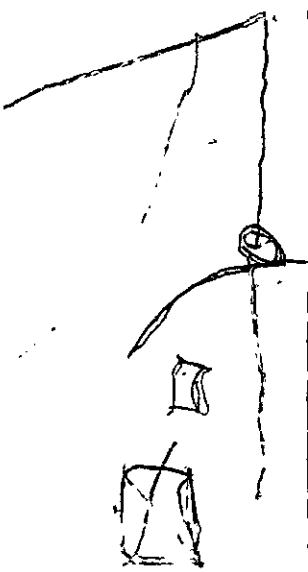
DRAWN BY:
WILLIAM RAKATANSKY
N.C. LIC. # 5227
ARCHITECT

FROM SITE SURVEY DATED 10/27/88 BY RUFUS J. LOWE, REGISTERED SURVEYOR

SCALE 1" = 30'-0"

5/9/89





#5452A

PAGE NO.

PREPARED BY

DATE 1.31.89

C Wayne Olsen
Rt #5 Box 291
Mocksville, N.C. 27028

Lot 8. David Proffit

Windows in bathroom valve

House Consist of 3 Bedrooms + Washer + Disposall.

Requires 400 ft Conventional septic drain field.

Requires 200 ft T+J Panels as per Shown on Drawing + NAS Repair Room for 200' additional feet of T+J Panels

T+J Panels will feed from AO 1500 gal Tank Through 4" PVC Pipe Tee 1 4" flow Devider + Gravity feed Too Two Rows of 100' Each of T+J. Panels As Per ~~Shown~~ Drawing.

Will Clear PL 10'
Will Clear Foundation By 10'
Serviced By Community Water Service.

Wayne Olsen

DO NOT Consider Gravity T+J Panel As An Alternate System

executive

Mecklenburg County
Health Department

Basil G. Deita, M.D., M.P.H.
Health Director

August 18, 1989

William Rakatansky
21136 Norman Shores Drive
Davidson, NC 28036

Dear Mr. Rakatansky:

RE: Property located at 21401 Torrence Chapel Road
FILE: 5452A
PARCEL: 001-301-02

Gentlemen:

Receipt of your plans for a modified waste disposal system for the property referenced above is acknowledged.

Your plans for the modified system for the above property as submitted are approved with the following comments:

- The well should be located 100 feet or no less than 50 feet away from any part of the sewage disposal system and repair area.
- Water saving plumbing devices and low flush or microflush toilets must be installed when constructing the residence.

Although this property is exempt from the 100% repair area requirement, the maximum feasible remaining area near the system shall be allocated for a repair area.

Upon execution and recording with the Register of Deeds Office, Mecklenburg County, of the enclosed "Septic Tank Agreement Form", an Improvements Permit may be issued by this office.

Sincerely,

Gene Vaughan, R.S., Supervisor
On Premises Waste Disposal & Water Supply

GV/ir

Enclosures - 3 Septic Tank Agreement Forms

000131

PRESENTED FOR REGISTRATION

89 AUG 18 PM 1:46

ANNE A. POWERS
REGISTER OF DEEDS
MECKLENBURG CO., N.C.

REAL ESTATE
BOOK PAGE
6092 0836

FILE NO. [redacted]

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

ACKNOWLEDGEMENT OF REQUEST BY OWNER FOR RECLASSIFICATION OF SITE FROM "UNSUITABLE" TO "PROVISIONALLY SUITABLE" UNDER 10 NCAC 10A .1948(c)

The undersigned, Betty F. Browning

owner of property located at 21401 Torrence Chapel Rd Davidson NC 28036

("the site") and described in an instrument recorded in Book 5899 at Page 485, Mecklenburg Public Registry,

hereby acknowledges that he applied to the Mecklenburg County Department of Environmental Health ("the Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 10 NCAC 10A .1934 et seq; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested pursuant to 10 NCAC 10A .1948(c) that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data and other information which indicate to the Department that the septic tank system proposed by the undersigned can reasonably be expected to function satisfactorily and thus that the findings specified in 10 NCAC 10A .1948(c)(1), (2), and (3) can be made; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is his responsibility and that neither the Department nor its officials, employees or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

The undersigned further agrees for his heirs and assigns that, in the event any septic tank system installed under authority of the aforesaid permit fails to perform adequately in any respect, he will take whatever measures are required to correct same; or if such is impossible he will discontinue use of said system immediately.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

This 18th day of August, 1989.

FEE	6.00
<>	6.00
CASH	6.00

Prepared By:

Betty F. Browning (SEAL)

8:11 #8226

08/18/89

(SEAL)

MECK COUNTY DEPARTMENT OF
RECEIVED
SEP - 5 1989
ENVIRONMENTAL PROTECTION

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, Marlene Wise, a Notary Public for said County and State, do hereby certify that Betty F. Browning personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 18th day of August, 1989.

Marlene Wise
Notary Public

Commission expires 3-15-92

mail To: Environmental Health

REAL ESTATE
BOOK PAGE
6092 0837

1.00
5.00
6.00

State of North Carolina, County of Mecklenburg

The foregoing Certificate(s) of _____

Marlene Wise

_____

Notary(ies) Public is/are certified to be correct. This instrument and this certificate are duly registered at the date and time and in the Book and Page shown on the first page hereof.

ANNE A. POWERS, REGISTER OF DEEDS

By Charlotte W. Pettat Deputy - Register of Deeds

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

54527
FILE: ~~5254 A~~ DATE: 8/24/89
TC: 001 301 02 ☐ L
SERIAL № 12937

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 1/31/89. All work shall be completed on or before 8/24/89, 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.

System installed in accordance with proposed approved plan.
T+J Panel System

Liquid Capacity of Septic Tank 1500 gallons
Liquid Capacity of Dosing Tank — gallons
Tank Construction PCC

Absorption and/or Nitrification Lines:
Trench Width 2' feet
Total Line Length 200 feet
Number of Lines 4
Depth of Stone — inches
Distance from House 5' feet
Distance from Property Line 10' feet
Distance from Well Municipal feet

PLOT OF SYSTEM

NAME OF OWNER Ernest Browning
LOCATION OF PROPERTY 21401 Torrence Chapel Rd
Comments: System installed in accordance with proposed plan.

Division or Section Head

Phyllis A. Walker
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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 5452A DATE: 8/24/89

TC: 001-301-02 ☐ L ☐ CRT

SERIAL № 12000

Name of Owner Ernest Browning Juris.:

Address of Property 21401 Torrence Chapel Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 200'

Number of Lines 4 @ 50'

Cover Depth 6"

Water Supply Source Municipal

Distance to Water Source < 50

Excavation Inspected 8/24/89

Tank(s) Inspected 8/24/89

Wash Line Inspected NA

High Water Alarm Inspected NA

System installed in accordance with proposed approved plan. T & J Panel System

PLOT

T&J Panel Design: 1989 1500 ST, MOD, 200' T+J, 6" sand bottom 8" side walls cecil CTR# A 1 Backhoe Service

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 3 bedroom house

Philo S. Walker
Environmentalist

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

#400 DPE CERT #25.00

UPDATE COMPLETE

Applicant ERWIN ROBERT G Appl.Date 03/04/92 Updated 03/09/92
Mail Addr ROUTE 7 BOX 596B Phone 704 664-1064
City MOORESVILLE State NC Zipcode 28115
Prop Ownr BROWN BETTY
Mail Addr 21401 TORRENCE CHAPEL RD Phone 704 892-0016
City DAVIDSON State NC Zipcode 28036 Township 0
Tax Map No. 00130102 Road 21401 TORRENCE CHAPEL ROAD Zoning
Sub/Mobil Sec Lot No. Lot Size
Type App X Site Y or Tract Type Bldg H System Classif 1 480 GALLONS
Resident. Specif: No. Bedrooms 03 No. Occupants 1 Undgrnd. Stor. (Y/N)
Commercial/Industrial/Other Specifications:
Type No. Empl. No. Empl. per Shift
Industrial or Mfg. Wastes (Y/N) Underground Stor. Tank (Y/N)
Prop. Water Sup. M Proposed Sewage E Construct. Status P Sites 1
Planned Future Additions (Y/N) Fee 0000.00 EHS Assigned 17034
Directions: SCREEN IN EXISTING DECK

Date Appl. Recd. 03/04/92 Date Insp. Insp. Status
Date Letr. Sent Type Letr. Date Eval. Eval. Status
Date Perm. Date Cert.Iss. Disp.Code Followup
Denial Codes:
Repaired (Y/N) Rep. Date Perm. No. 5452A Operat. Permit (Y/N)
3/09/92 16:42:30
01-03 SA MW KS IM II S1 S1037498 KB

Use existing System
3/11/92 PSW

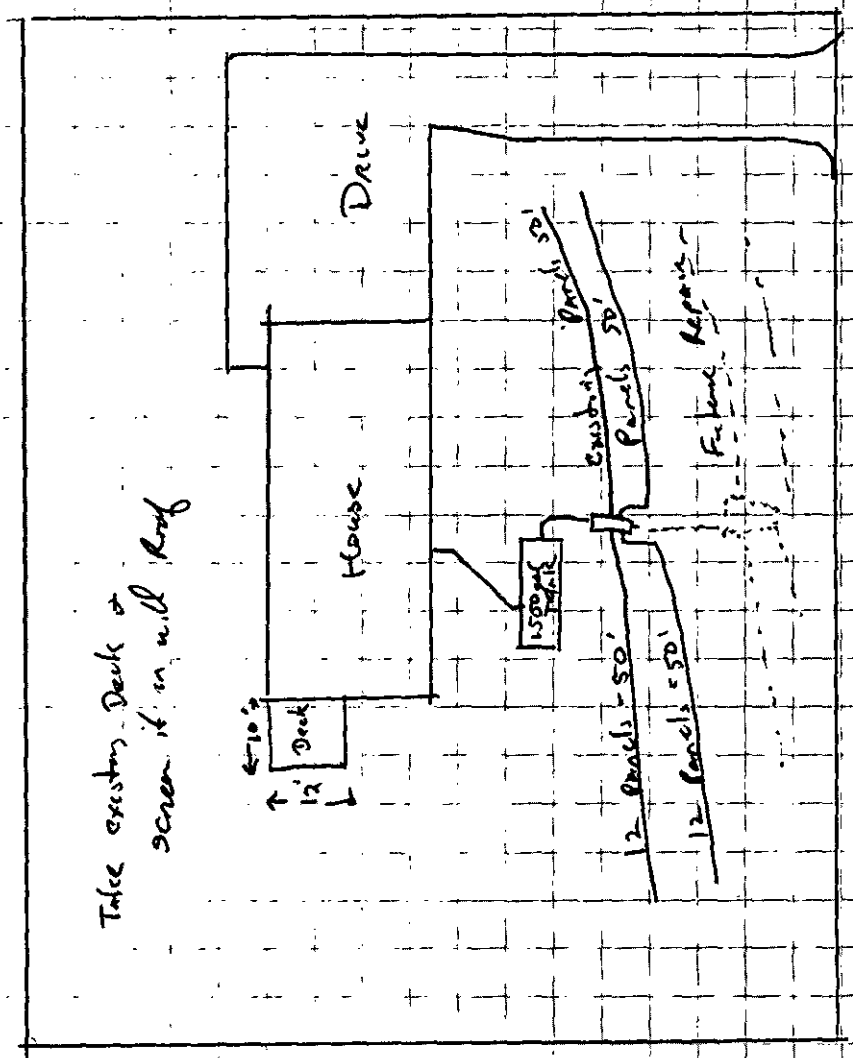
PROPOSED PLOT PLAN

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

FILE: 5452A

TC: 001-301-02

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.



APPROVAL DATE TBW UES Appr 3/11/92

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy