

1/7/2008

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Groundwater and Wastewater Services File Imaging Project

May 2007

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Mecklenburg County
Health Department

April 2, 2002

Samuel P. Malone
P.O. Box 1139
Matthews, NC 28106

Re: Application for improvement permit for
Property Site: Marlestone Lane, Lot #4
Health Department file no. 4828B

Dear Property Owner or Owner's Agent:

The Mecklenburg County Health Department, Environmental Health Division on March 26, 2002 evaluated the above-referenced property at the site designated on the plat/site plan that accompanied your improvement permit application. According to your application the site is to serve a 3-bedroom residence, with a design wastewater flow of ___360___ gallons per day. The evaluation was done in accordance with the laws and rules governing wastewater systems in North Carolina General Statute 130A-333 and related statutes and Title 15A, Subchapter 18A, of the North Carolina Administrative Code, Rule .1900 and related rules.

Based on the criteria set out in Title 15A, Subchapter 18A, of the North Carolina Administrative Code, Rules .1940 through .1948, the evaluation indicated that the site is **UNSUITABLE for** a ground absorption sewage system. Therefore, your request for an improvement permit is **DENIED.** A copy of the site evaluation is enclosed. The site is unsuitable based on the following:

_____Unsuitable soil topography and/or landscape position (Rule .1940)
___X___Unsuitable soil characteristics (structure or clay mineralogy) (Rule .1941)
___X___Unsuitable soil wetness condition (Rule .1942)
___X___Unsuitable soil depth (Rule .1943)
_____Presence of restrictive horizon (Rule .1944)
___X___Insufficient space for septic system and repair area (Rule .1945)
_____Unsuitable for meeting required setbacks (Rule .1950)
_____Other (Rule .1946)

For the reasons set out above, the property is currently classified **UNSUITABLE,** and an improvement permit shall not be issued for this site in accordance with Rule .1948 (c).

However, the site classified as **UNSUITABLE** may be classified as **PROVISIONALLY SUITABLE** if written documentation is provided that meets the requirements of Rule .1948(d). A copy of this rule is enclosed. You may hire a consultant to assist you if you wish to try to develop a plan under which your site could be reclassified as **PROVISIONALLY SUITABLE.**

You have a right to an informal review of this decision. You may request an informal review by the soil scientist or environmental health supervisor at the local health department. You may also request an informal review by the N. C. Department of Environment and Natural Resources regional soil specialist. A request for informal review must be made in writing to the local health department.

You also have a right to a formal appeal of this decision. To pursue a formal appeal, you must file a petition for a contested case hearing with the Office of Administrative Hearings, 6714 Mail Center, Raleigh, NC 27699-6714. To get a copy of a petition form, you may write the Office of Administrative Hearings or call the office at (919) 733-0926. The petition for a contested case hearing must be filed in accordance with the provision of North Carolina General Statutes 130A-24 and 150B-23 and all other applicable provisions of Chapter 150B. N. C. General Statue 130A-335(g) provides that your hearing would be held in the county where your property is located.

Please note: If you wish to pursue a formal appeal, you must file the petition form with the Office of Administrative Hearings **WITHIN 30 DAYS OF THE DATE OF THIS LETTER.** The date of this letter is April 2, 2002. Meeting the 30-day deadline is critical to your right to a formal appeal. Beginning a formal appeal within 30 days will not interfere with any informal review that you might request. Do no wait for the outcome of any informal review if you wish to file a formal appeal.

If you file a petition for a contested case hearing with the Office of Administrative Hearings, you are required by law (N.C. General Statute 150B-23) to send a copy of your petition to the North Carolina Department of Environment and Natural Resources. Send the copy to: Office of General Counsel, N. C. Department of Environment and Natural Resources, 1601 Mail Service Center, Raleigh, NC. 27699-1601. Do **NOT** send the copy of the petition to your local health department. Sending a copy of your petition to the local health department will **NOT** satisfy the legal requirement in N.C. General Statute 150B-23 that you send a copy to the Office of General Counsel, NCDENR.

You may call or write the local health department if you need any additional information or assistance.

Sincerely,

J. Andrew Walker, R.S.
Authorized Agent - DENR

Encl: (2)

FEE: 200.00 CK
DATE: 1/13/02

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

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

AGO

FILE #: 4828

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 111-471-01 PT Lot 4

STREET ADDRESS:

SUBDIVISION OR MOBILE HOME PARK NAME: Run River Run Lot 4

LOT NUMBER:

TOWNSHIP (CHECK ONE):

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

CLOSING DATE: _____

TYPE OF BUILDING (CHECK ONE):

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

HEATED SQUARE FOOTAGE:

NUMBER OF BEDROOMS: 4 NUMBER OF OCCUPANTS: 4

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)

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:	LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:
NAME: Malone Samuel P. (LAST) (FIRST) (MI)	NAME: (LAST) (FIRST) (MI)
ADDRESS: P.O. Box 1139	DAYTIME PHONE: ( ) -
CITY: Matthews STATE: NC ZIP: 28106	
DAYTIME PHONE: ( ) (704) - 847-9026	

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 9-16-89

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: 1-11-02

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

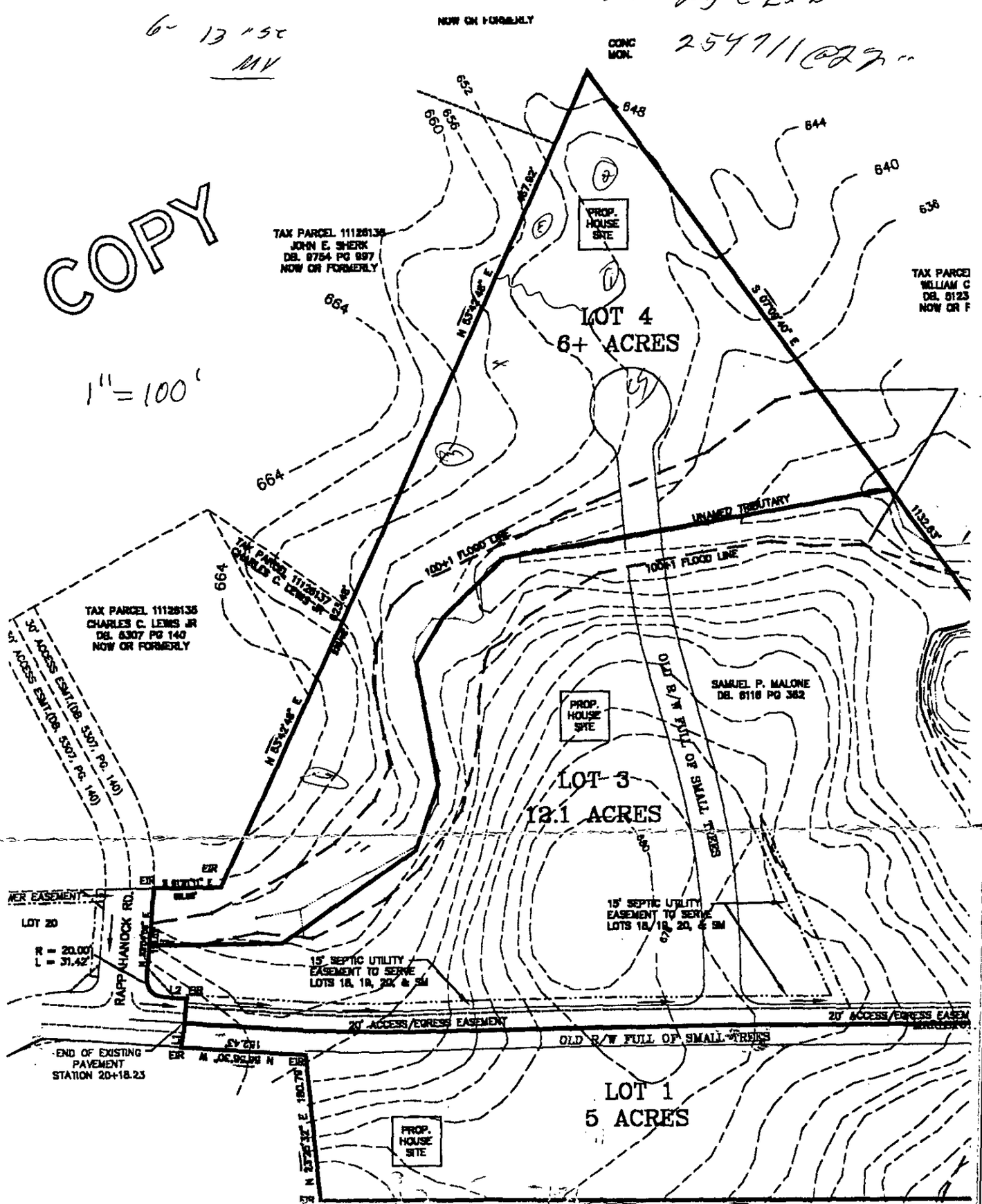
1-0- 15"SI
15 - ~~2 27~~
23"SC M1
2.5 4 11 @ 23°

2 0- 10"SI
10- 16"SC
18- 24"SC M1

3-0- 6"STI
6- 13"SC
M1

40- 4'SC1
4- 12"SC M1

3-0-3"S1
3- 9"C EX.
2.5 4 6 11 @ 6"
6-0- 5"S1
5- 20 SC M1
20- 23 C EXD
2.5 4 7 11 @ 23"



COPY

1" = 100'

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Sheet: 1
Property ID: PO 111-471-01
Lot #: 4
File #: 4828B
Code: 3

PCS

for ON-SITE WASTEWATER SYSTEM

Owner: Samuel P. Malone
Applicant:
Address: PO Box 1139, Matthews, N. C. 28106
Date Evaluated: 2/25/02
Proposed Facility: Residence
Design Flow (.1949): 480gpd
Property Size: 3a. Inv.
Location of Site: off Marlstone Lane
Property Recorded:
Water Supply: [ ] Public [x] Individual [x] Well [ ] Spring [ ] Other
Evaluation Method: [x] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [x] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	OTHER PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS, 5-10	0-15	GR/SL	FR/SEXP/NS/NP	2.5Y7/1@23"	23	N/A	NONE	US
		15-23	SBK/SC	VFI/MIXED/VS/VP					
2	"	0-10	GR/SL	FR/SEXP/NS/NP	>24" TO SOIL WETNESS	24	"	"	"
		10-18	SBK/SC	FI/SEXP/S/P					
		18-24	SBK/SC	VFI/MIXED/VS/VP					
3	"	0-6	GR/SCL	FR/SEXP/SS/SP	>13" TO SOIL WETNESS	13	"	"	"
		6-13	SBK/SC	VFI/MIXED					
4	"	0-4	GR/SCL	FR/SEXP/SS/SP	>12" TO SOIL WETNESS	12	"	"	"
		4-12	SBK/SC	VFI/MIXED/VS/VP					
5	"	0-3	GR/SL	FR/SEXP/NS/NP	2.5Y6/1@6"	6+	"	"	"
		3-6+	SBK/C	VFI/EXP/VS/VP					
6	"	0-5	GR/SL	FR/SEXP/NS/NP	2.5Y7/1@22"	23	"	"	"
		5-20	SBK/SC	FI/SEXP/S/P					
		20-23	SBK/C	VFI/EXP/VS/VP					

Description	Initial System	Repair System
Available Space (.1945)	US	US
System Type(s)		
Site LTAR		

Other Factors (.1946): _____
Site Classification (.1948): UNSUITABLE
Evaluated By: W. R. Marlin, LSS, 2/26/02, W. R. Marlin
Others Present:

FILE # 48288

COMMENTS 100% Repair, several areas of complex slopes present on tract

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

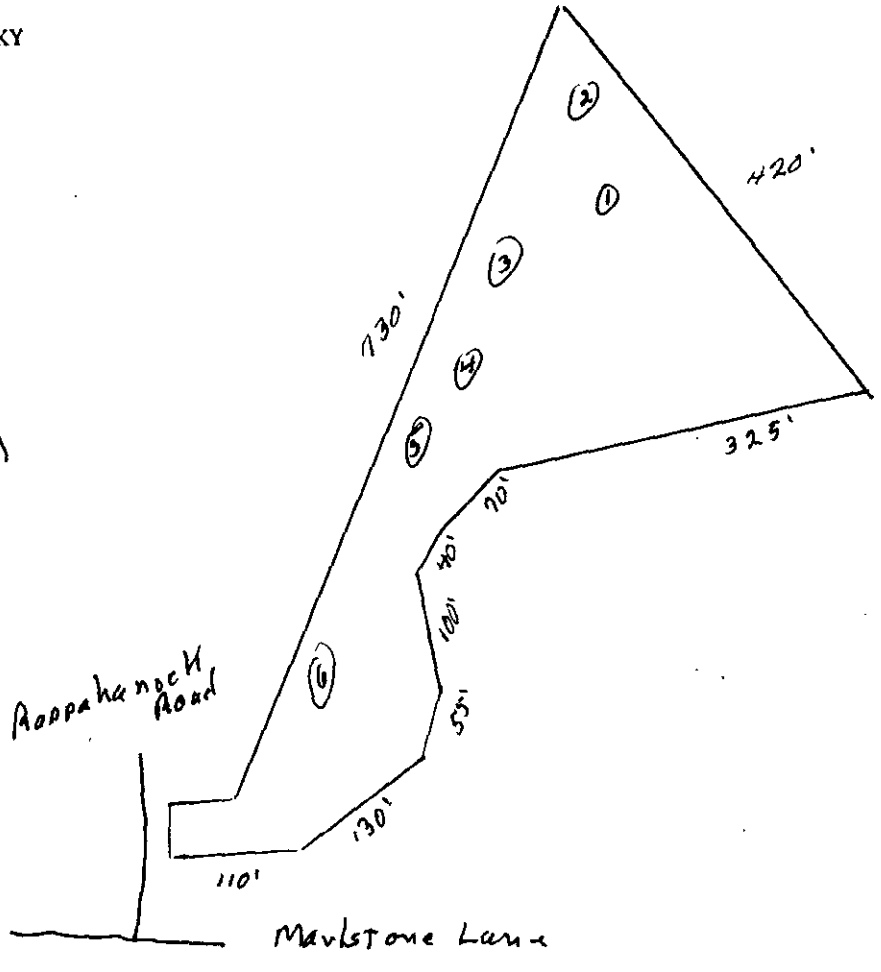
STRUCTURE

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

MINERALOGY

SLIGHTLY EXPANSIVE

EXPANSIVE



FEE: 200.00 CK
DATE: 1/16/02

2747 APPLICATION FOR IMPROVEMENT PERMIT FOR RESIDENTIAL SITE INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM

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 #: 4828B

PROPERTY INFORMATION (FROM ENGINEERING FORM FOR JOB LOCATION:

TAX/PARCEL NUMBER: 111-471-01PO Lot 4

STREET ADDRESS:

SUBDIVISION OR MOBILE HOME PARK NAME: Run River Run Lot 4

LOT NUMBER:

TYPE OF BUILDING (CHECK ONE):

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

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE:

NUMBER OF BEDROOMS: 4 NUMBER OF OCCUPANTS: 4

FOUNDATION FOR RESIDENCE:

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

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:

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EASTMENTS OR RIGHT-OF-WAYS	__ YES __ NO		

PROPERTY OWNER:

NAME: Malone (LAST) Samuel (FIRST) P. (MI)

ADDRESS: P.O. Box 1139

CITY: Matthews STATE: NC ZIP: 28106

DAYTIME PHONE: (704) 847-9026

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) (FIRST) (MI)

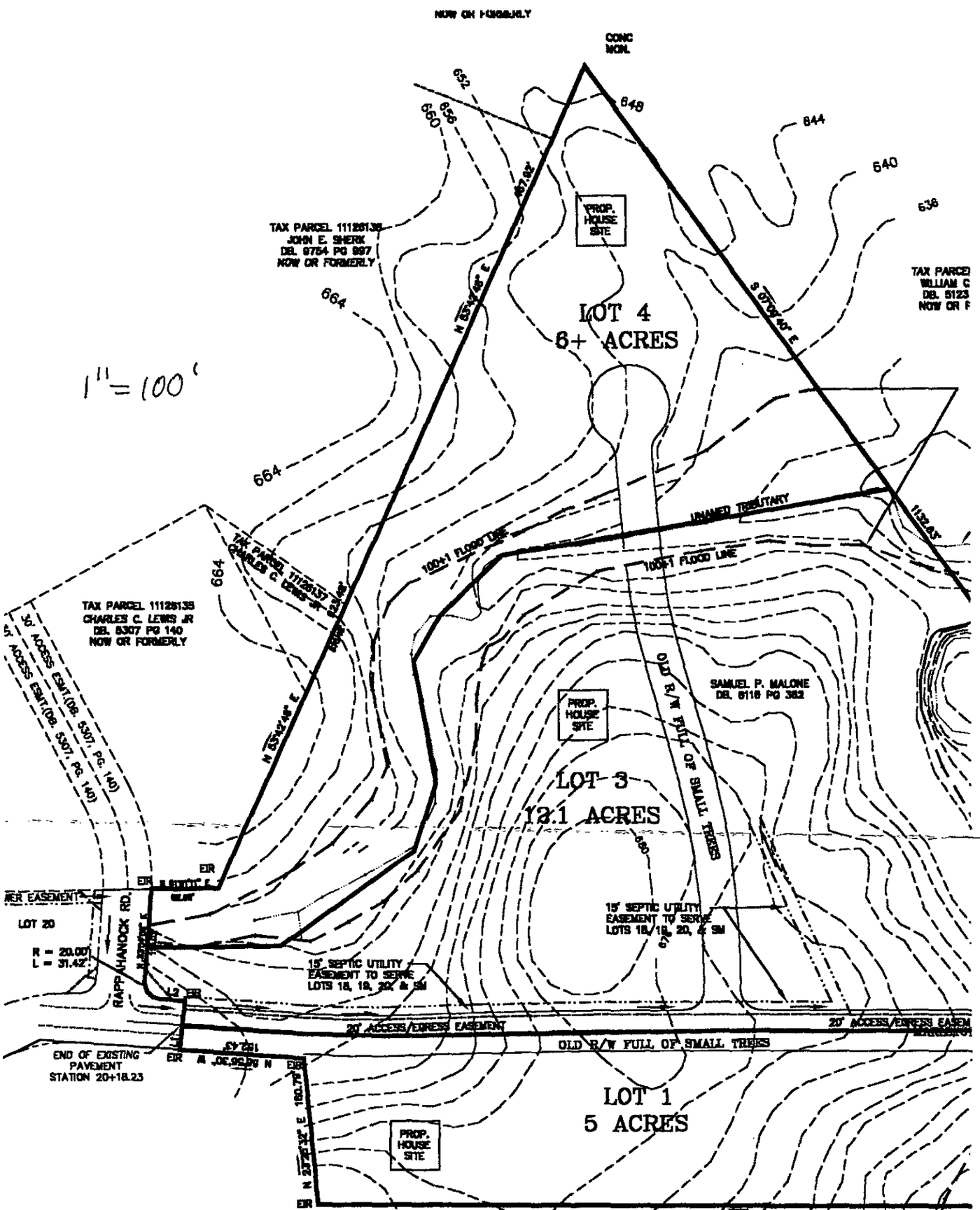
DAYTIME PHONE: ( ) -

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SIGNED: [signature] DATE: 1-11-02

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


NOW OR FORMERLY
CONC MON.
652
648
660
656
644
640
636
664
PROP. HOUSE SITE
TAX PARCEL 11126136
JOHN E. SHERK
DB. 9754 PG 897
NOW OR FORMERLY
N 65°42'48" E
S 65°42'48" E
LOT 4
6+ ACRES
1" = 100'
TAX PARCEL
WILLIAM C
DB. 5123
NOW OR F
664
UNNAMED TRIBUTARY
100-1 FLOOD LINE
TAX PARCEL 11126137
CHARLES C. LEWIS JR
DB. 8307 PG 140
664
TAX PARCEL 11126135
CHARLES C. LEWIS JR
DB. 8307 PG 140
NOW OR FORMERLY
50' ACCESS ESMT (DB. 5307, PG. 140)
OLD R/W FULL OF SMALL TREES
SAMUEL P. MALONE
DB. 6116 PG 352
PROP. HOUSE SITE
LOT 3
12.1 ACRES
660
15' SEPTIC UTILITY EASEMENT TO SERVE LOTS 18, 19, 20, & 3M
LOT 20
R = 20.00'
L = 31.42'
RAPPAHANOCK RD.
15' SEPTIC UTILITY EASEMENT TO SERVE LOTS 18, 19, 20, & 3M
20' ACCESS/EGRESS EASEMENT
OLD R/W FULL OF SMALL TREES
END OF EXISTING PAVEMENT STATION 20+18.23
182.43'
N 20°22'32" E 180.79'
LOT 1
5 ACRES
PROP. HOUSE SITE