

18200 POMPANO PL

00105211

5/10/2007

duponbj

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

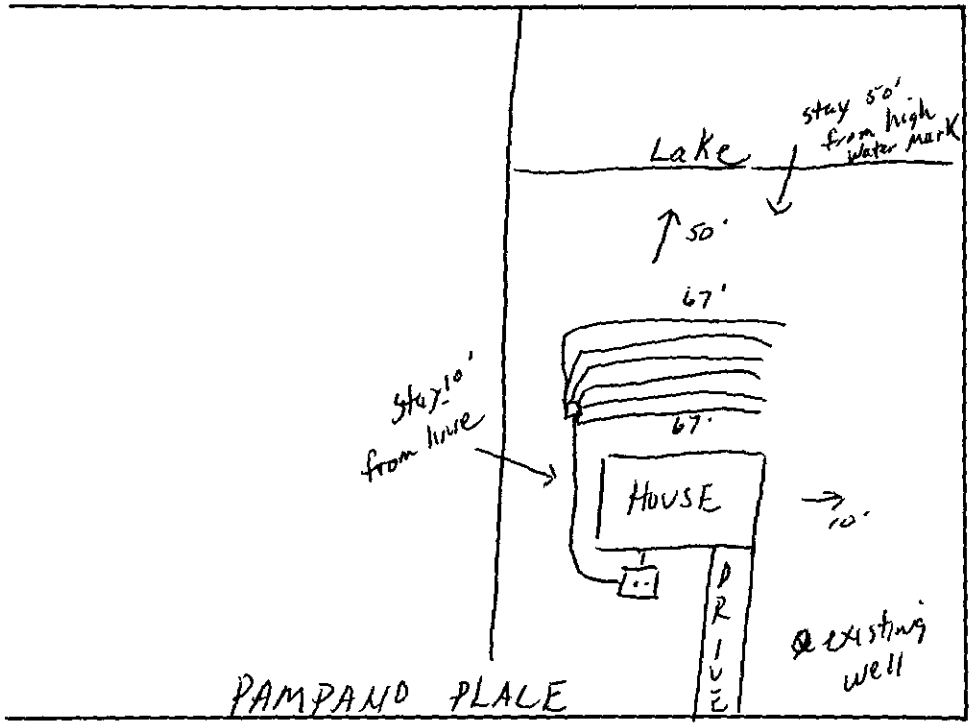
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 3938A DATE: 10/12/89

TC: 001-052-11 ☑ L

SERIAL Nº 13034

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 3/28/89. All work shall be completed on or before 11/13/89, 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 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 – gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 400 feet

Number of Lines 6

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well >50 feet

NAME OF OWNER Marie A. Pasquale

LOCATION OF PROPERTY 18200 Pampano Pl

Comments: 6 Trenches x 67' long x 3' wd x 12" stone
Stay 50' from high water mark

Division or Section Head

Philo S. 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 Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER OR AGENT'S COPY

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 3938A DATE: 10/24/89

TC: 001-052-11 ☐ L ☒ CRT

SERIAL № 12234

Name of Owner Marie A. Pasquale Juris.:

Address of Property 18200 Pampono Pl

Inspection Data:

Tank Material PVC

Total Length of Drainfield 400

Number of Lines 6 @ 67

Cover Depth 8"

Water Supply Source com well

Distance to Water Source 7100

Excavation Inspected 10/24/89

Tank(s) Inspected 10/13/89

Wash Line Inspected NA

High Water Alarm Inspected NA

PLOT

Design: 1989 1500 ST, 1200 SFT, CON, Cecil, 12" stone CTR# 48

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.

MECKLENBURG COUNTY

Department of Environmental Health

October 16th, 1987

Andy Laczko
Rt. 2, Box 390
Davidson, NC 28036

RE: Property located at Pompano Place 11
FILE: 3938A
PARCEL: 00105211

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. The property was found to contain a limited area of soils which were classified as provisionally suitable for such an installation. A copy of the Site Evaluation Report (Serial Number 14632) is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit 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 to this office. The plan will be reviewed and if it is found that the area of provisionally suitable soils is adequate for the proposed construction, an Improvement Permit will be issued by this Department.

If I may be of assistance, please do not hesitate to contact me.

Sincerely,

Sylvia D. Daniel, R.S.
Environmental Health Supervisor
Environmental Resources Division

Enclosure

APPLICATION FOR AN IMPROVEMENT PERMIT

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
APR
ENVIRONMENTAL HEALTH
DIVISION CRT

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: 3938A
TC: 001-052-11
SERIAL: № 18016

JOB LOCATION

① ADDRESS: 18200 (STREET NO.) Pampano (STREET) Place
② FILE:
③ JURISDICTION:
④ TAX PARCEL NO.:
⑤ SUBDIVISION:
⑥ LOT:
⑦ BLOCK:

OWNER

⑧ NAME: Pasquale/Marie (FIRST) A. (MIDDLE) Lisi (LAST)
⑨ MAILING ADDRESS: 307 Rockaway St
⑩ CITY: Islip Terrace
⑪ STATE: N.Y.
⑫ ZIP: 11752
⑬ PHONE: (WORK) (516) 273-2200
⑭ (HOME) (516) 277-3638

REQUEST

This request is for a(n):

⑮ ☒ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☐ Other (specify)

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence
⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 4 3M² 4-2489
㉓ Maximum occupancy? 8
㉔ Basement? ☐ yes ☒ no
㉕ Type?
㉖ Maximum number of employees?
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: x Marie A. Lisi
Date: March 28, 1989

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.

Environmentalist — Date: 4-26-89

Director or Authorized Section Head — Date: 4-26-89

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 4/4/89

Name/Company Pasquale A. Lisi

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Drop Ghost
#1398A

ENVIRONMENTAL HEALTH DIVISION
PAID

APR 4 1989

CR# 810

Fee: $ 150 — _____ 1.50

Rene Ladd

TO: ENVIRONMENTAL HEALTH DEPT.
BUILDING STANDARDS DEPT.
DEPT. OF ENVIRONMENTAL PROTECTION/
SOLID AND HAZARDOUS WASTE

DATE 3/27/89

FROM: COUNTY ENGINEERING DEPARTMENT

EHD FILE _____ JURISDICTION CODE Meck

PARCEL NUMBER #001-052-11

ASSIGNED ADDRESS 18200 Pampano Pl

EXISTING ADDRESS _____

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	DISAPPROVED
1. SUBDIVISION REGULATIONS	/ /	/ /*
2. FLOODWAY REGULATIONS	/ /	/ /*
3. EROSION CONTROL REGULATIONS	/ /	/ /*
4. PUBLIC UTILITY EASEMENT	/ /	/ /*

	PRESENT	NOT PRESENT
5. PUBLIC UTILITY EASEMENT	/ /*	/ /
6. PROPERTY FRONTS ON THOROUGHFARE	/ /*	/ /
7. DRIVEWAY PERMIT REQUIRED	/ /*	/ /

*If checked, further investigation will be required to determine whether a building permit can be issued by Building Standards for the site.

REMARKS: Septic tank & well

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

SIGNED: PRM

OPWEAR 06-88

NEW ADDRESS / /*

FORM 100

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

PROPOSED PLOT PLAN

18200 PAMPANO PLACE

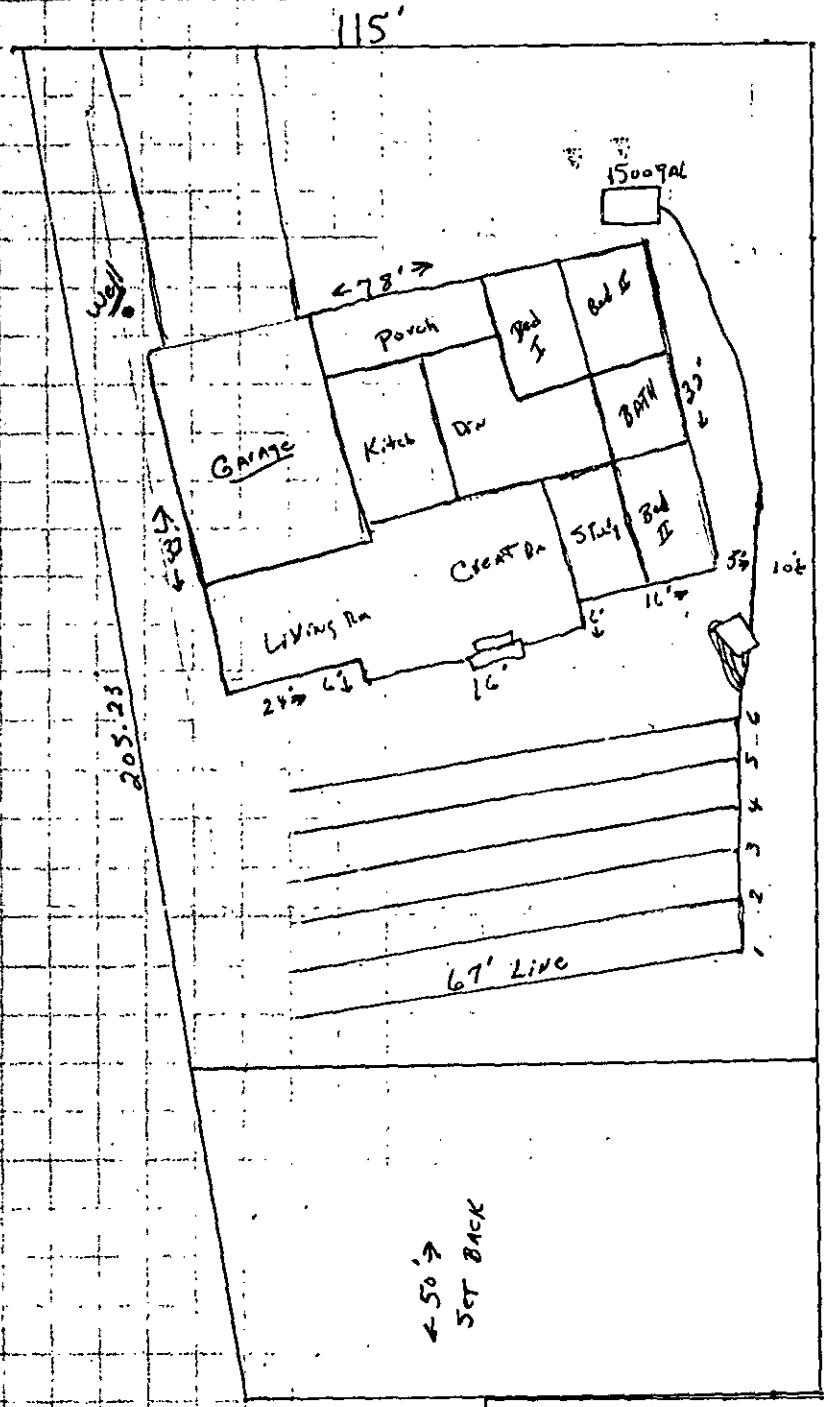
PASQUALE / MARIE A LISI
LOT # 11

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

FILE: _____

TC: _____

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.



1500 gal TANK
402' of Lines
12" STONE
STRAW Cover
MAX Depth of Lines 2'

Level ELVATION

Scale
1" = 30'

Revised
4-21-89 KED

Signed: Kenneth E. Dellinger

Date: 4-21-89

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 14632

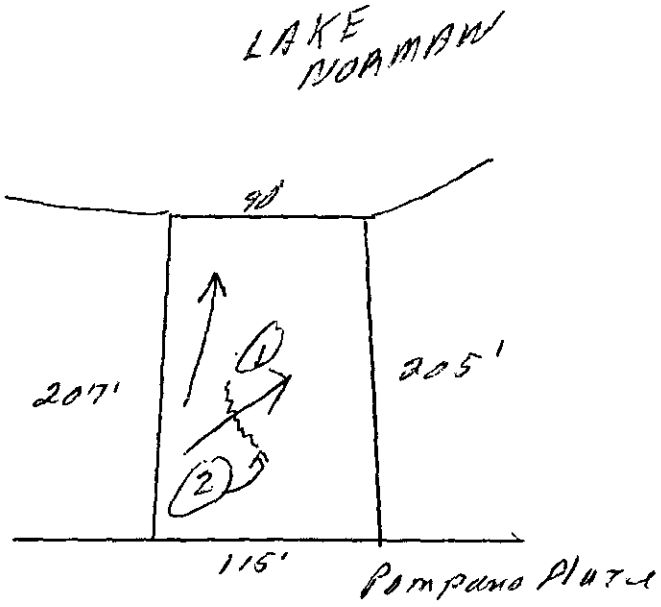
File: 3938A
Parcel: 00105211
Action: 1
☐ PC

Location: Pompano Place
Subdivision:
Lot: 11 Block: Acres: .47

Owner:
Address: Andy Laczko
Rt. 2, Box 390
Davidson, NC 28036

Comments: Limited area may need pump.

Described by: William A Martin
Date: 10-15-87



***** 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) slight depression	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U clay	S PS U —	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Block	S PS U —	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U 736" to water	S PS U —	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 736"	S PS U —	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 736"	S PS U —	S PS U	S PS U	S PS U	S PS U
Available Space	S (PS) U limited	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	IVA Cecil-Pi.Ko	Depression				
Area Classification	S (PS) U	S PS (U)	S PS U	S PS U	S PS U	S PS U

MECKLENBURG COUNTY
HEALTH DEPT.

Date Received SEP 16 [illegible]

ENVIRONMENTAL HEALTH
DIVISION

SIR No. 3938A

T. C. No. 001-052-11

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Laczko (LAST) Andy (FIRST) (MIDDLE)

2) ADDRESS OF OWNER c/o Wellworth Rlty.Co.,Rt.2,Box 390,Davidson,N.C. ZIP 28036

3) PHONE NO. Home _____ Office 892-6606

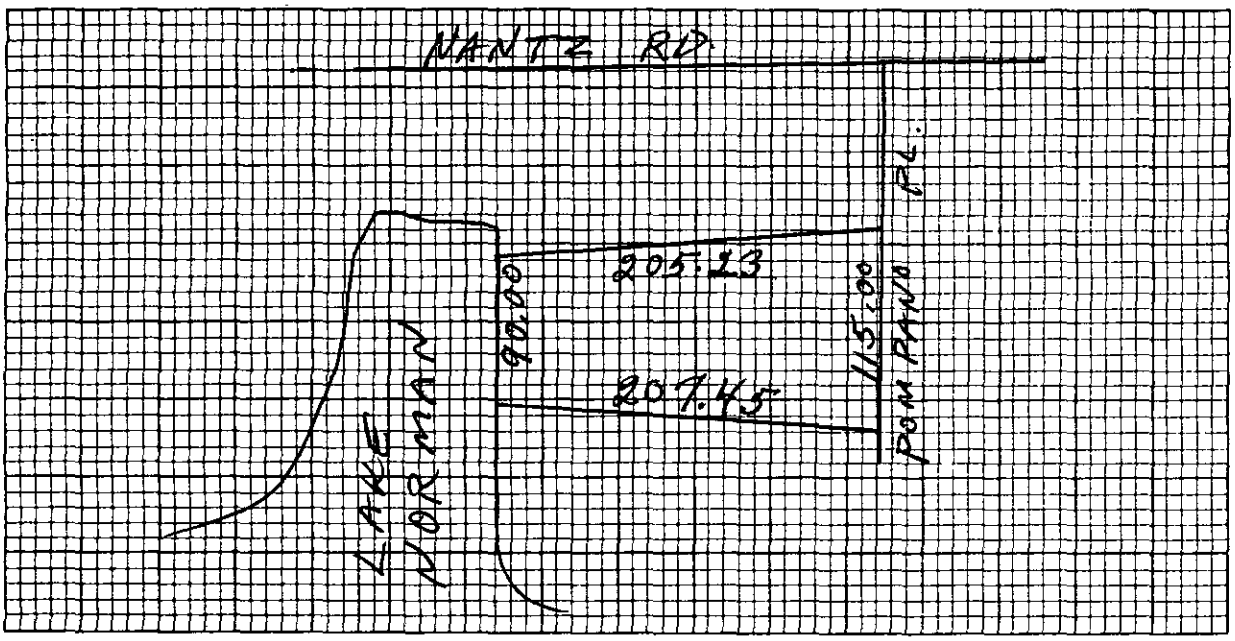
4) LOCATION OF PROPERTY Pompano Place (STREET OR COUNTY ROAD)

5) SUBDIVISION Point Largo LOT NO. 11 BLOCK NO. _____

MAP BOOK NO 10 PAGE NO. 171

6) DEED REFERENCE: DEED BOOK _____ PAGE NO. _____

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation and an on site inspection of the lot hereinabove described for the purpose of determining if the lot is suitable for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge.

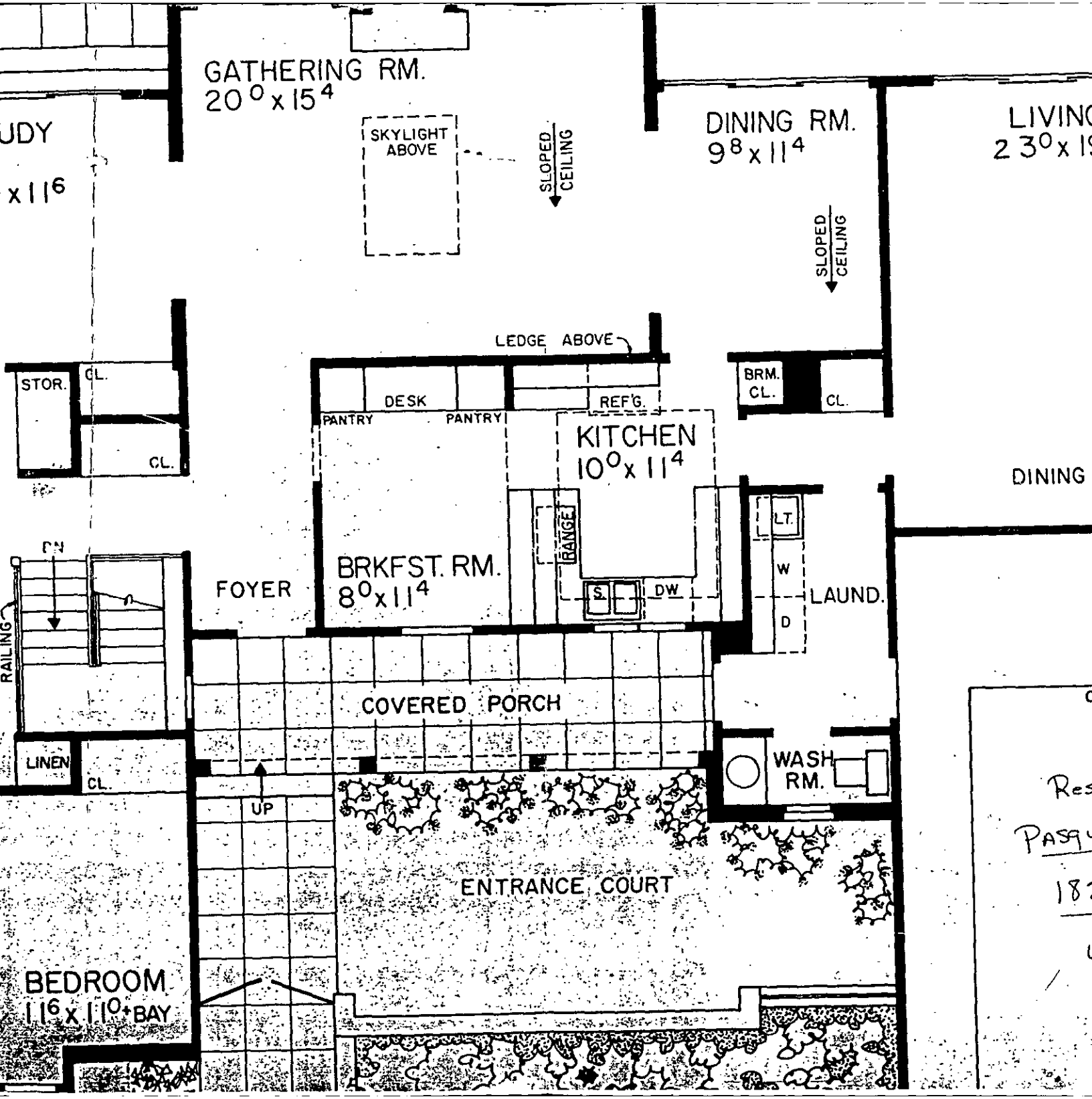


7) ACCURATELY DIAGRAM & DIMENSION LOT

Andy Laczko
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY


GATHERING RM.
20⁰ x 15⁴
SKYLIGHT ABOVE
SLOPED CEILING
DINING RM.
9⁸ x 11⁴
SLOPED CEILING
LIVING
23⁰ x 1
UDY
x 11⁶
LEDGE ABOVE
STOR.
CL.
CL.
DESK
REF'G.
PANTRY
PANTRY
KITCHEN
10⁰ x 11⁴
BRM.
CL.
CL.
DINING
DN
RANGE
LT.
W
D
S
DW
LAUND.
FOYER
BRKFST. RM.
8⁰ x 11⁴
RAILING
COVERED PORCH
LINEN
CL.
UP
WASH
RM.
ENTRANCE COURT
BEDROOM
11⁶ x 11⁰ + BAY