

2421 PLACID LAKE DR

05526311

5/10/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

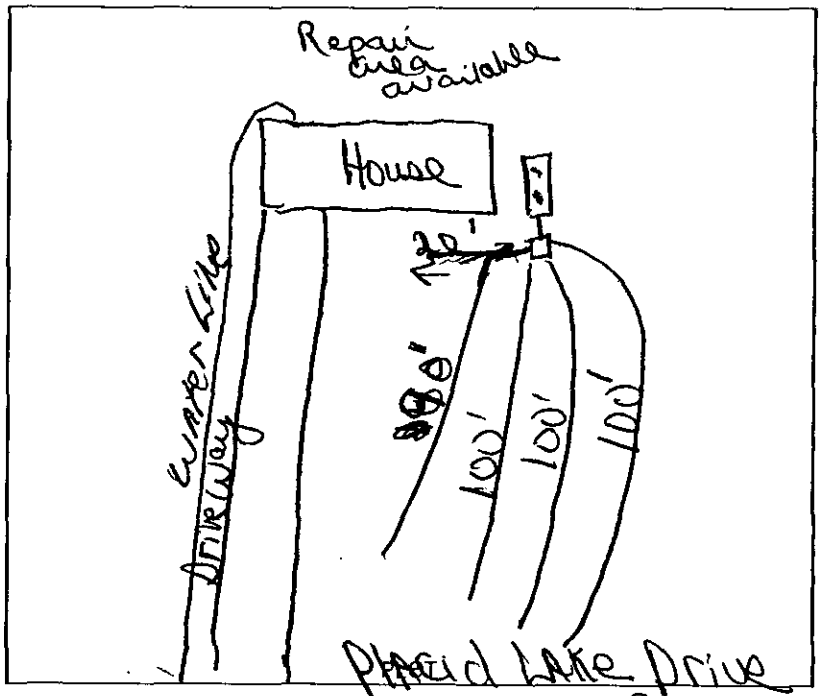
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 3771A DATE: 9/15/95
TC: 055-263-03 ☐ L ☑ CRT
SERIAL № 12946

Name of Owner: Kimberly Averett Juris.:
Address of Property: 2421 placid Lake Drive

Inspection Data:

Tank Material: ASC
Total Length of Drainfield: 400'
Number of Lines: 4 @ 100'
Cover Depth: 24"
Water Supply Source: City
Distance to Water Source: > 10'
Excavation Inspected: 9/15/95
Tank(s) Inspected: 9/15/95
Wash Line Inspected:
High Water Alarm Inspected:



Design: 1995 1500 Sf, Cm. 1200 SFT, 12" G, Recil CTR# Gary Bradley 192/240

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 home.

Type II

Judy J. Kuss R.S.
Environmentalist

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

@ 400

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

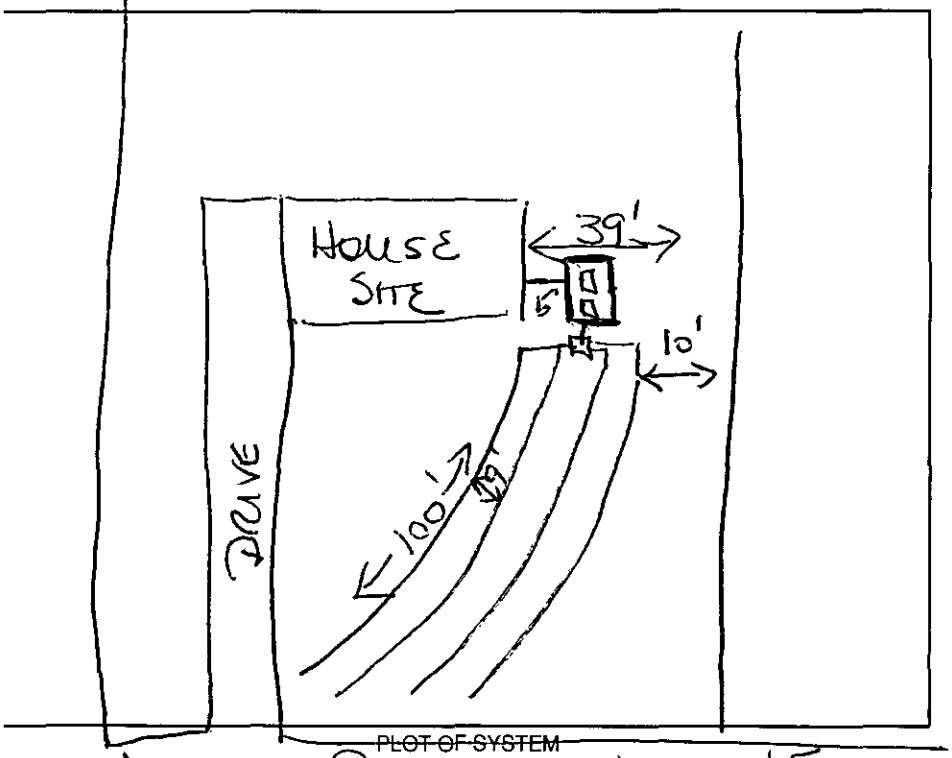
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 3771A DATE: 8-21-95

TC: 055-263-03 L

SERIAL No. 16233

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 8/21/95. All work shall be completed on or before 9/21/95, 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

PLACID LAKE DRIVE

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank — gallons

Tank Construction PCC

Trench Depth 36

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous yes

Total Line Length 400 feet

Number of Lines 4

Depth of Stone 12 inches

Distance from House 10 feet

Distance from Property Line 10 feet

Distance from Well 10' feet

OFF WATER LINE

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

NAME OF OWNER Kimberly G. Averitt

LOCATION OF PROPERTY 2421 Placid Lake Drive

Comments: 1500 SEPTIC TANK WITH 4 TRENCHES @ 3X100'X11". NO REPAIR AREA REQUIRED.

S Bateman for S Daniel, Program Chief 8-25-95

Joni Higgins-Bunn, R.S.
Environmental Health Specialist

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

3771A Cox #150.00 2/3/95 PD 150.00 CK 2/9/95 DO

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

Date:

PERSON FILING APPLICATION:
NAME: Averitt (last) Kimberly (first) G. (mi)
ADDRESS: 10624 Walkers Ferry Rd PHONE: (704) 393-2493
CITY: Charlotte STATE: NC ZIPCODE: 28208

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 05526303
STREET ADDRESS: 2421 Placid Lake Dr.
ZONING: R-3

PROPERTY OWNER:
NAME: Cathcart (last) Jean (first) R (mi)
ADDRESS: 2924 Starnes Rd PHONE: (__) 399-0965
CITY: Charlotte STATE: NC ZIPCODE: 28214

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

LOT NUMBER: LOT SIZE (in acres):

TYPE APPLICATION (check one):
[ ] SOIL TEST - INDIVIDUAL LOT (D)
[X] 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)
[ ] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[ ] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
[X] SINGLE MOBILE HOME (S) [ ] HOUSE (H) [ ] MULTIPLE FAMILY (U)
[ ] DOUBLE WIDE (D) [ ] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 3
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)
[X] 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: Kimberly G. Averitt Date: 2-8-95

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..

..3-bedroom conventional with limited repair. See dwd attached.

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

Joni Higgins-Bunny 2/8/95
Environmentalist Date

J. Bunny for S Dent 3/8/95
Director or Authorized Section Head Date

WATER : 122791

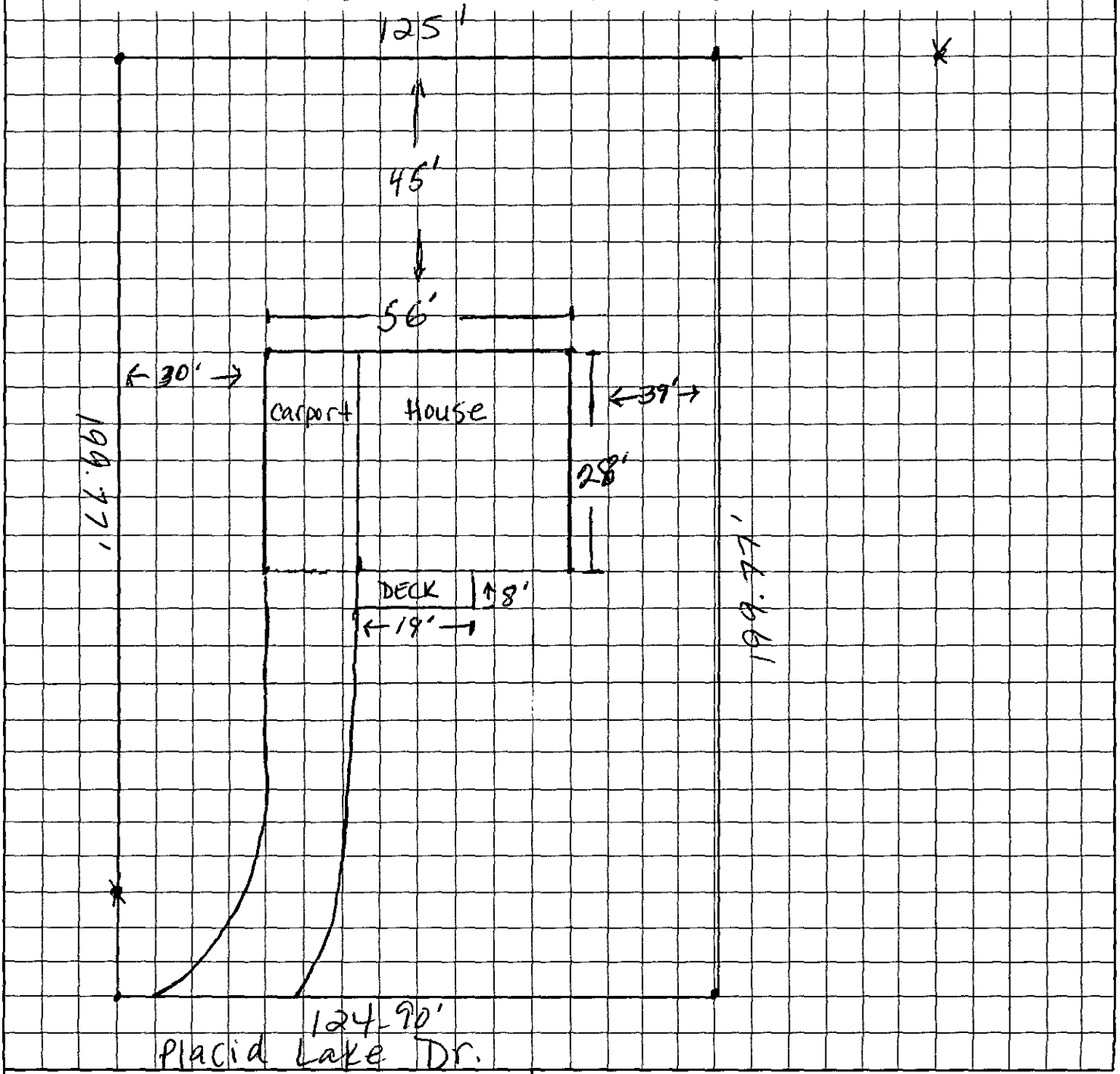
PROPOSED PLOT PLAN

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

FILE: 3771A

TC: 055-263-03

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

APPROVAL DATE

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

500

Book No. 2023

Revenue Stamp affixed $ ——

STATE OF NORTH CAROLINA—Mecklenburg County

THIS DEED, Made this 10th day of December A. D., 19 58, by and between N. B. ROBINSON and wife, MARGARET H. ROBINSON

of the County of Mecklenburg and State of North Carolina, parties of the first part, and THOMAS HAROLD CATHCART and wife, JEAN R. CATHCART of the County of Mecklenburg and State of North Carolina, parties of the second part.

WITNESSETH, That the said parties of the first part, in consideration of TEN DOLLARS and other considerations——————————————————Dollars to them paid by the parties of the second part, the receipt of which is hereby acknowledged, have bargained and sold, and by these presents do grant, bargain, sell and convey unto the said second parties and their heirs, all those certain lots of land, situate, lying and being in BERRYHILL Township, Mecklenburg County, State of North Carolina, and more particularly described and defined as follows:

BEING all of Lots 3, 7 and 8 in Block A as shown upon the map of the N. B. Robinson property recorded in the Mecklenburg County, North Carolina, Public Registry in Map Book 7, page 837, to which reference is hereby made.

SAID PROPERTY being conveyed subject to the restrictions recorded in the Mecklenburg County Public Registry in Book 1904, page 58.

TO HAVE AND TO HOLD the aforesaid lots of land and all privileges and appurtenances thereto belonging, to the said second parties, their heirs and assigns, to their only use and behoof forever.

And the first parties for themselves their heirs, executors and administrators, covenants with the said parties of the second part, their heirs and assigns, that they are seized of said premises in fee and have right to convey the same in fee simple, that the same are free and clear from all incumbrances, and that they will warrant and defend the said title to the same against the lawful claims of all persons whomsoever.

IN TESTIMONY WHEREOF, The said parties of the first part to these Presents have hereunto set their hands and seals the day and year above written.

Signed, Sealed and Delivered in presence of

N. B. Robinson (Seal)
Margaret H. Robinson (Seal)
(Seal)

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG } ss.

I, Doris K. Runyans a Notary Public for said County and State, do hereby certify that N. B. ROBINSON and MARGARET H. ROBINSON, his wife personally appeared before me this day, and acknowledged the due execution of the foregoing (or annexed) instrument.

Witness my hand and notarial seal this 10th day of December A. D., 1958.

Doris K. Runyans, Notary Public
My Commission Expires 6-10-59

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG } ss.

The foregoing (or annexed) Certificate of Doris K. Runyans, a Notary Public for said County and State, is adjudged to be correct. Let the instrument and the certificate be registered.

This 10th day of December A.D., 19 58

J. Lester Wolfe, Clerk Superior Court By Naomi G. Reske Deputy, ~~Clerk Superior Court~~

Filed at 1:04 o'clock, P. M., on the 10th day of December A.D., 19 58.
Recorded at 9:38 o'clock, A. M., on the 12th day of December A.D., 19 58.
and verified. J. R. RENFROW, Register of Deeds.

Drawn By: J. Louis Carter MRC

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

DATE: 4/19/95

FROM: COUNTY ENGINEERING DEPARTMENT

EHD FILE _____ JURISDICTION CODE Char

PARCEL NUMBER #055-263-03

ASSIGNED ADDRESS 2421 Placid Lake Dr

EXISTING ADDRESS _____

PROJECT NAME UA

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: Mod. Home Hook up

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 DRIVEWAYS.

SIGNED: Pone

OPWEAR 06-88

NEW ADDRESS _____*

FORM 100

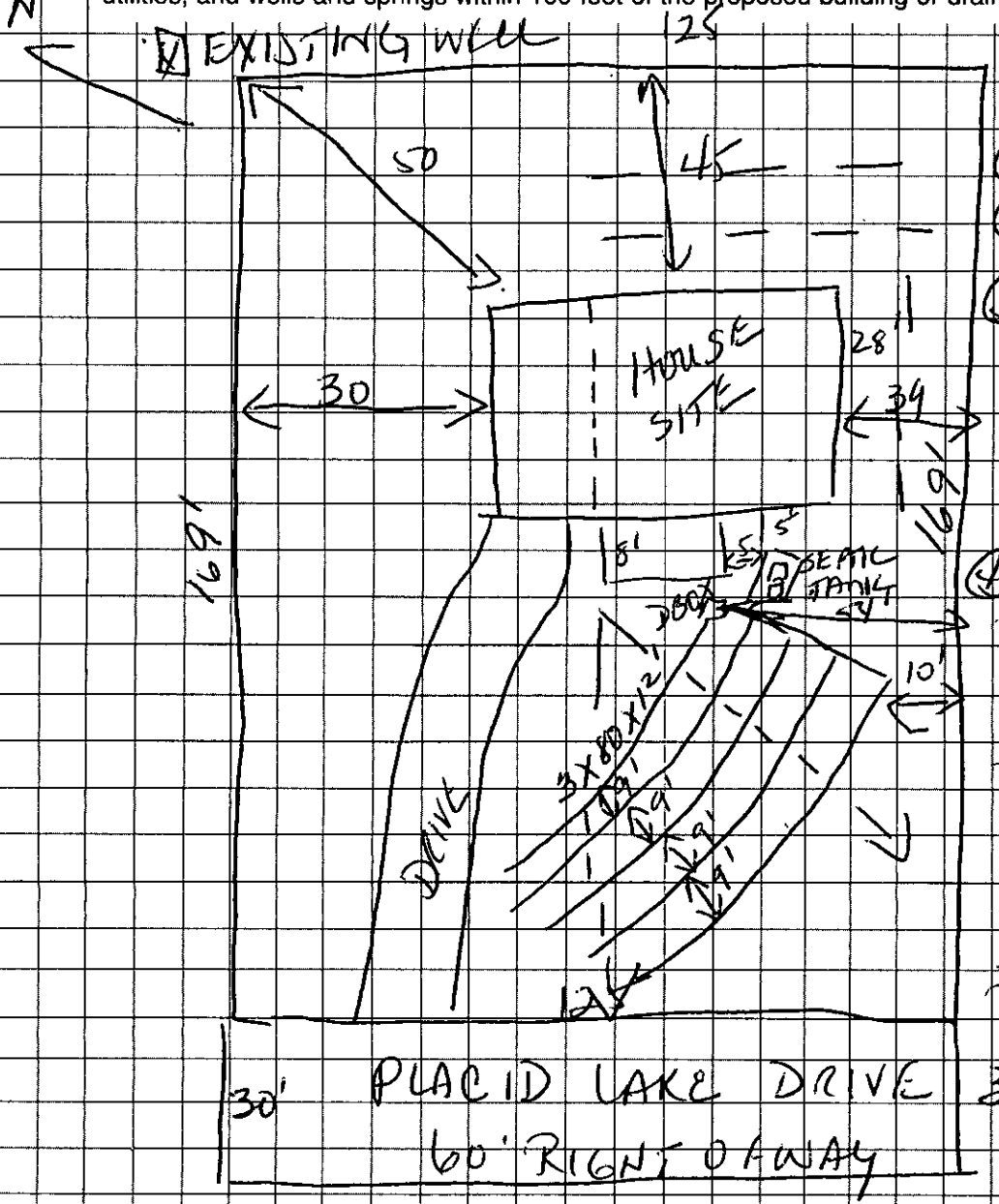
PROPOSED PLOT PLAN

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

FILE: 3971A

TC: 055263O3

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.



COMMENTS:

(1) 1500 SEPTIC TANK
(2) 5 TRENCHES @ 3X80X12"
(3) 2 80' LINES OF REPAIR IN BACK 40' REPAIR ALONG SIDE AND ~~40~~ 100% REPAIR NOT REQUIRED.
(4) TRENCHES TO BE INSTALLED ALONG CONTOUR AND DRIVEWAY TO BE MOVED TO ACCOMODATE DRIVE OFF OF SYSTEM. THERE SHALL BE NO DRIVING OVER SYSTEM
~~30'~~ THERE SHALL BE NO CHANGES TO THIS SYSTEM OR THIS PERMIT WILL BE VOID.

Jeffery W. Averitt
OWNER/AGENT SIGNATURE

DATE 3-6-95

APPROVAL DATE 3/6/95

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 028471

File: 3771A Action 1

Parcel: PO 055-263-03 ☐ PC

Location: Placid Lake Dr.

Subdivision:

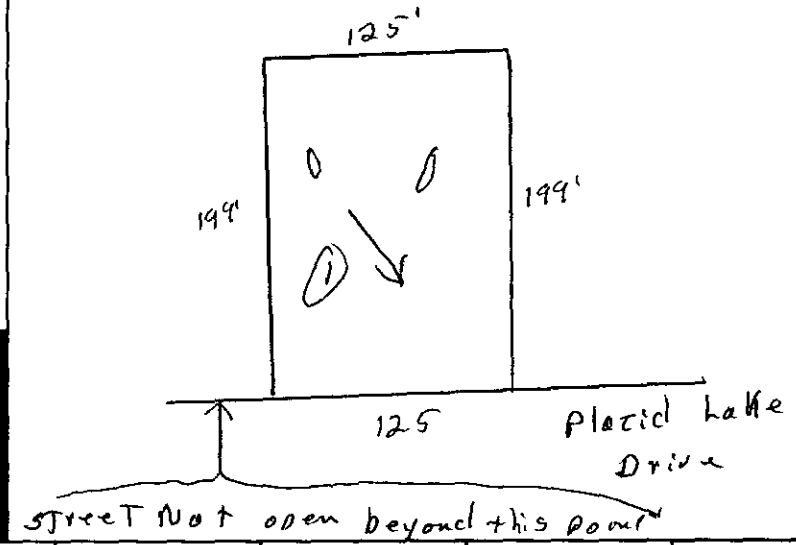
Lot: 8 Block: A Acres: Approx .57

Owner: Jean R. Cathcart
Address: 2924 Starnes Road
Charlotte, N.C. 28214

Comments: Does not appear to be 100% repair lot, .3gpf/ft/day LTAR

Described by: William R. Mack

Date: 2-28-95



*** 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 2-10%	S PS (U) Slight Depression	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U slightly Expansive clay	S PS U —	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U —	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U 7 40" To Soil Wetness	S PS U —	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 40-48"	S PS U —	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 7 48"	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	W Cecil Like	Slight Depression				
Area Classification	S (PS) U	S PS (U)	S PS U	S PS U	S PS U	S PS U

MECKLENBURG COUNTY
Department of Environmental Health

August 7th, 1987

Thomas H. Cathcart
2924 Starnes Road
Charlotte, NC 28214

RE: Property located at Placid Lake Drive 3
FILE: 3771A
PARCEL: 05526303

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 14488) 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.

Sincerely,

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

1200 Blythe Boulevard • Charlotte, North Carolina 28203 • (704) 376-4603

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 14488

File: 3771A

Action 4

Parcel: 05526303

☐ PC

Location: Placid Lake Drive

Subdivision:

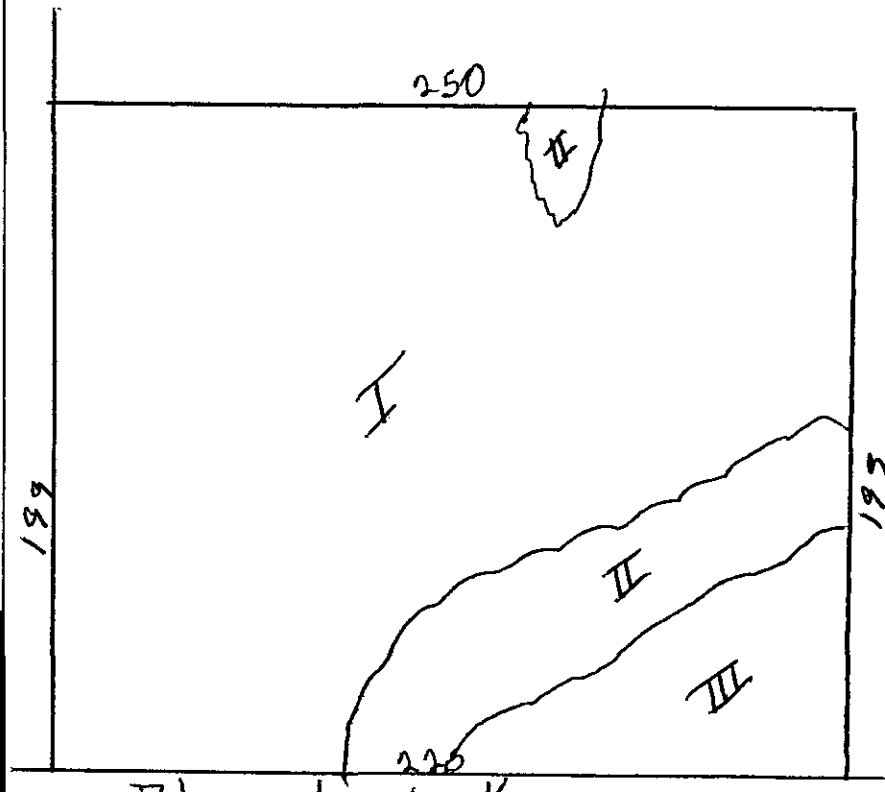
Lot: 3 Block: Acres: 1.06

Owner: Thomas H. Cathcart
Address: 2924 Starnes Road
Charlotte, NC 28214

Comments: _____

Described by: W. B. Ramsey

Date: 8-6-87



***** 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 2-10	S PS (U) Eroded Area	S (PS) U 0-2	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) Low Area	S PS U	S PS U	S PS U
Depth	S (PS) U 40-46	S PS (U) Various	S PS (U) Various	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	IIa Cecil	IIa Eroded Cecil	IIa Depression			
Area Classification	S (PS) U	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

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

(OFFICE USE ONLY)

FILE: 3771A

TC: 055-263-03

☐ PC ☐ REPT

MECK COUNTY DEPARTMENT OF
RECEIVED
JUL 30 1987
ENVIRONMENTAL HEALTH

JOB LOCATION

① ADDRESS: ← Off KERRY Brook CIRCLE - Placid Lake Dr.

② SUBDIVISION: N.B. ROBINSON Property ③ LOT: (DEED 4) 3 ④ BLOCK: A

⑤ PARCEL REFERENCE: BOOK NO.: 55 PAGE NO.: 26 PARCEL NO.: 4

⑥ DEED REFERENCE: MAP BOOK NO.: 7 - 2023 PAGE NO.: ~~839~~ - 500

OWNER

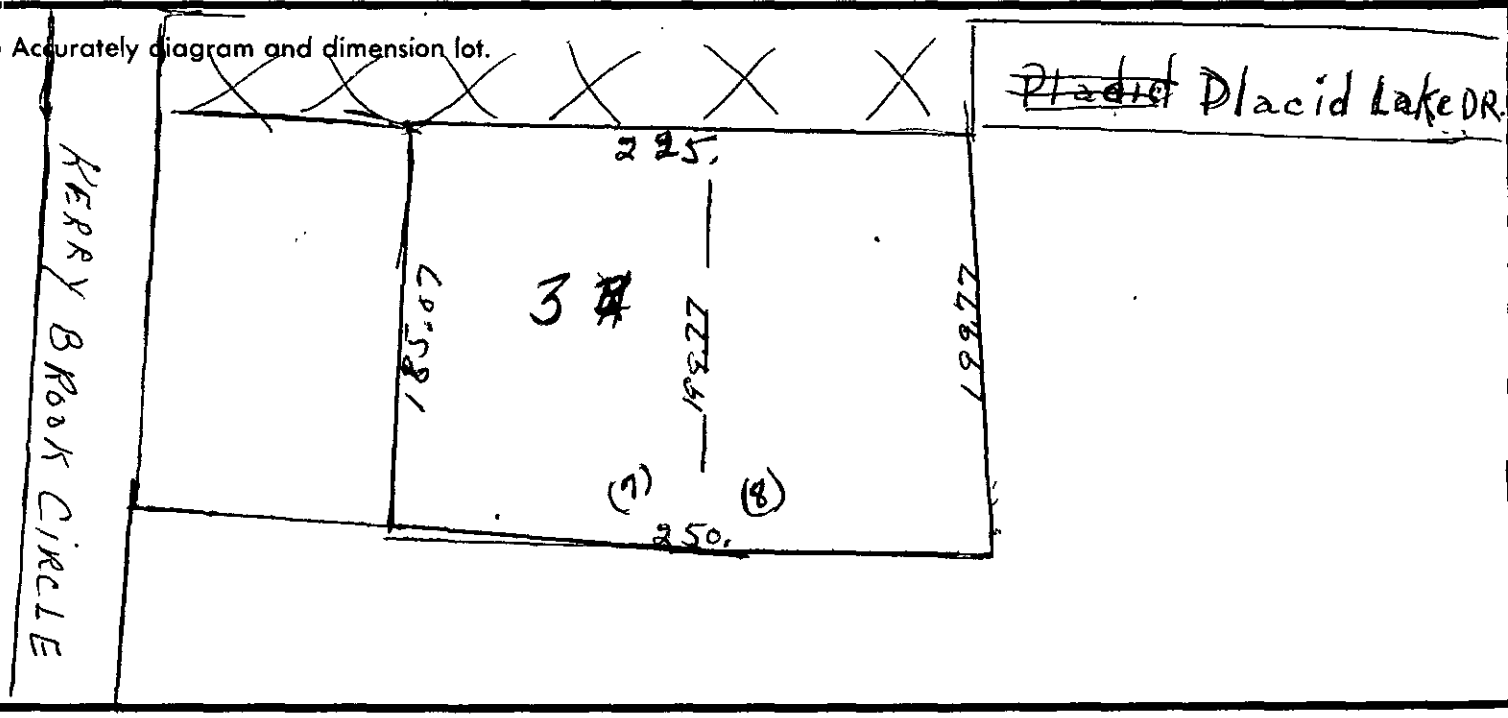
⑦ NAME: THOMAS (FIRST) H. (MIDDLE) CATHCART (LAST)

⑧ MAILING ADDRESS: 2924 STARNES ROAD

⑨ CITY: CHARLOTTE ⑩ STATE: N.C. ⑪ ZIP: 28214

⑫ PHONE: (WORK) (704) 537-9731 EXT 336 EXT 220 (HOME) (704) 399-0965

⑬ Accurately diagram and dimension lot.



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: Thomas H. Cathcart

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

Date: 7/21/87

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY