

5200 COUNTRY WOODS DR

19514130

12/20/2007

duponbj

Groundwater and Wastewater Services File Imaging Project

May 2007

Barcode Font = IDAutomationHC39M

August 14, 1996

Steve Hamilton
5200 Country Woods Drive
Charlotte, NC 28227

Mr. Kelly Randall
Environmental Health Office
700 North Tryon Street
Charlotte, NC 28202

Dear Mr. Randall,

I have been trying since April 1 of this year to get a proposed lot approved for a septic waste system. I am sorry that it has taken so long but getting the plan drawn by RCS took over three months. I would appreciate any thing you can do to expedite this matter.

Item number 1 enclosed, is a copy of my receipt in case that may help you locate my file.

Item number 2 is the waste system plan by RCS that took so long. Cathy with RCS said you also needed the driveway location and house dimensions. I have enclosed items number 3 and 4 in hopes that this will provide these locations. From my original house plans, the house is 49 feet long by 38 feet 6 inches wide.

Mr. Randall, I realize this next question is not in your area, but I was hoping you could refer me to someone who can tell me how to go about dividing these lots. It just makes sense to me that I should go ahead and have then surveyed and an address assigned before trying to sell one.

Please don't hesitate to contact me should you need more information.

Regards,

Steve Hamilton
545-9961 - work
573-1980 - home

(2)

R. C. S., Inc.

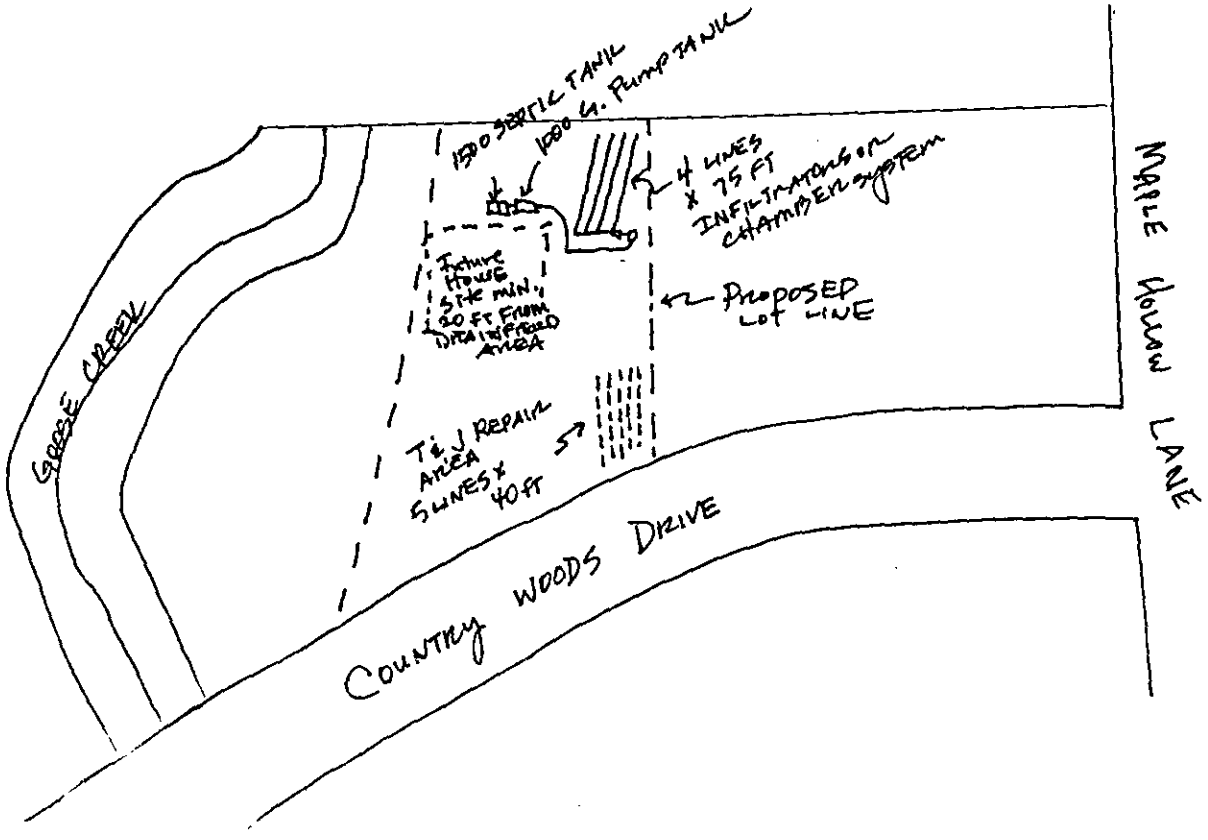
Septic Tank Installation & Service

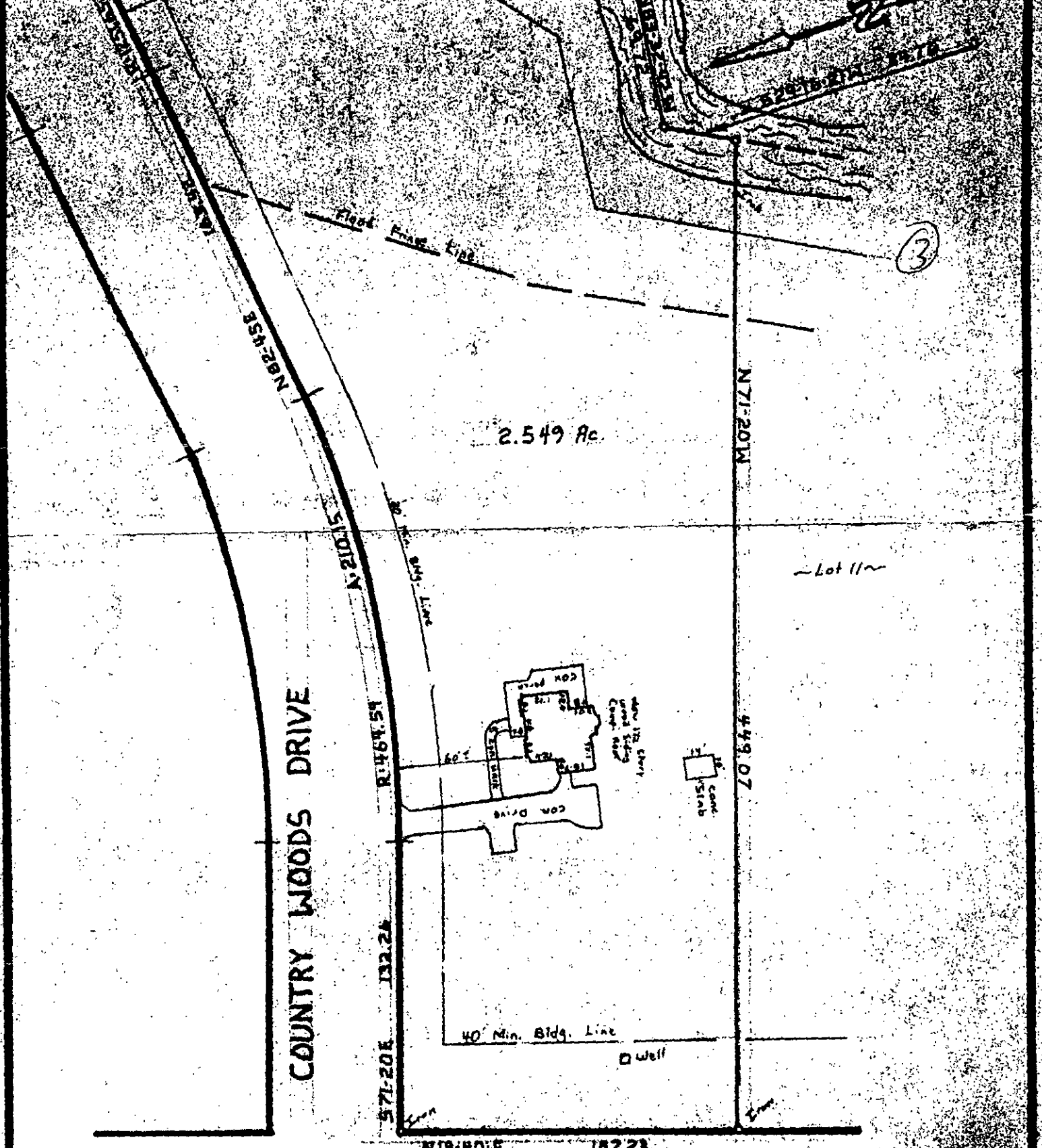
Stafford Street
Post Office Box 708
Monroe, North Carolina 28111
Phones: 704-283-7539 or 376-9359

MR. STEVEN M. HAMILTON
5200 COUNTRY WOODS DRIVE
CHARLOTTE, N.C.

FILE 13051B

* LINES ARE FLAGGED WITH WHITE FLAGS





MAPLE HOLLOW LANE

PHYSICAL SURVEY

OF

Lot 10, Country Woods, Phase II

To Be Deeded To

Steven M. Hamilton & Wife, Karen E

SCALE 1" = 60' Morning Star Township Mecklenburg County N.C.

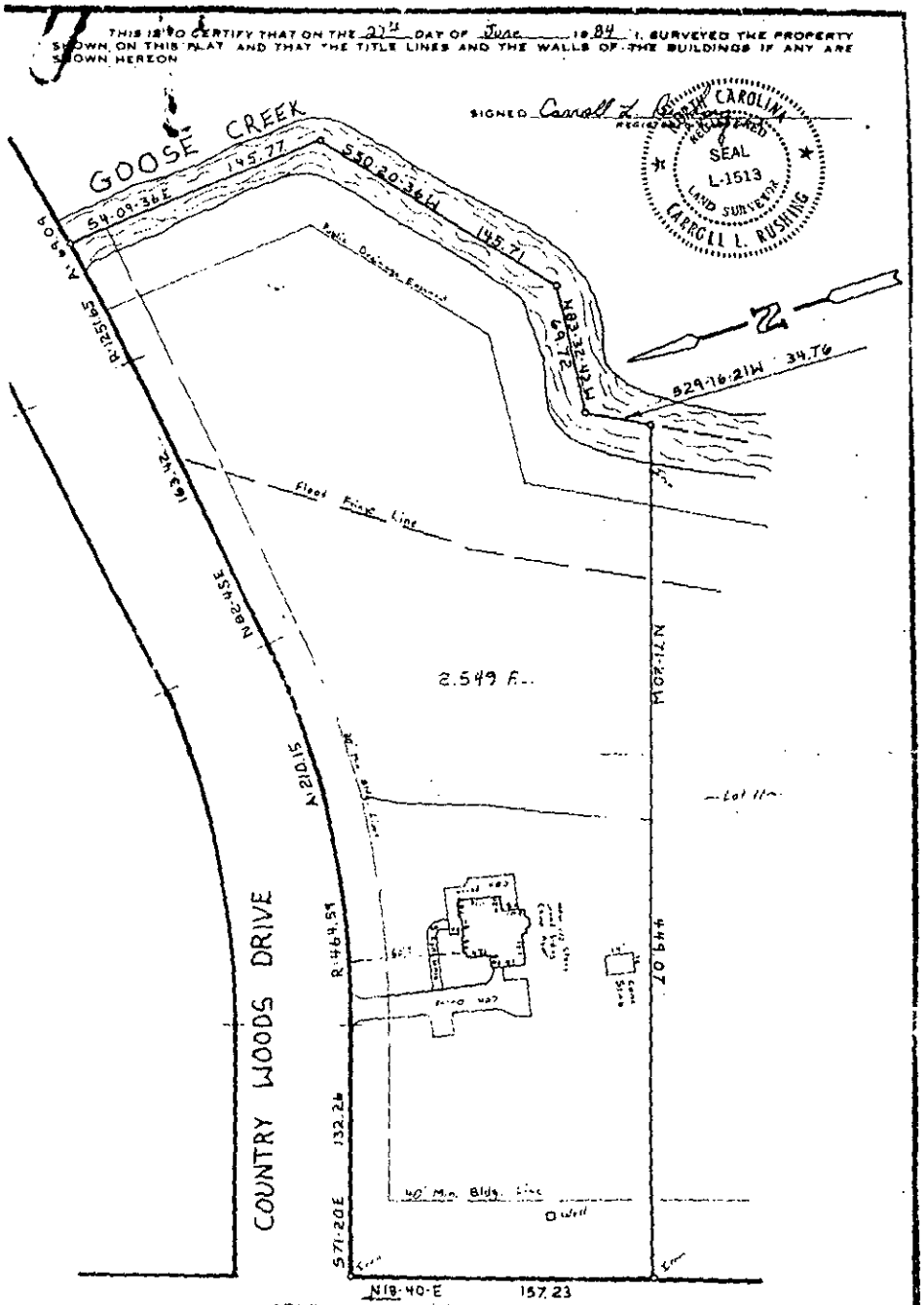
THE PROPERTY OF Ty-Par Realty, Inc

MAP RECORDED IN BOOK 20 AT PAGE 472 DEED RECORDED IN BOOK 4411 PAGE 46

THIS IS TO CERTIFY THAT ON THE 21st DAY OF June 1984 I SURVEYED THE PROPERTY SHOWN ON THIS PLAT AND THAT THE TITLE LINES AND THE WALLS OF THE BUILDINGS IF ANY ARE SHOWN HEREON

SIGNED Carroll L. Rushing

NORTH CAROLINA REGISTERED SEAL L-1513 LAND SURVEYOR CARROLL L. RUSHING



MAPLE HOLLOW LANE

PHYSICAL SURVEY

Of

Lot 10, Country Woods Phase II

To Be Deeded To

Steven M. Hamilton & Wife, Karen E.

SCALE 1" = 60' Morning Star Township Mecklenburg County, N.C.

THE PROPERTY OF Ty-Par Realty, Inc.

MAP RECORDED IN BOOK 20 AT PAGE 472 DEED RECORDED IN BOOK 4411 PAGE 46

2

FEE: 50 Paid

DATE: 08-28-00

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

#12 [ ] CRT

TYPE APPLICATION: [X] 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

AG

FILE #: ~~98010~~ 98-HB-1305-B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION: ~~5200 COUNTRY WOODS DR.~~

TAX/PARCEL NUMBER: 195-141-30 00

STREET ADDRESS: ~~5200~~ COUNTRY WOODS DR

TYPE OF BUILDING (CHECK ONE):

- [ ] SINGLE MOBILE HOME(S)
- [ ] DOUBLE WIDE (D)
- [X] HOUSE (H)
- [ ] MODULAR HOME (M)
- [ ] MULTIPLE FAMILY (U)
- [ ] OTHER (O)

SUBDIVISION OR MOBILE HOME PARK NAME: COUNTRY WOODS

LOT NUMBER: 10

TOWNSHIP (CHECK ONE):

- [ ] 0 MECKLENBURG
- [ ] 1 CHARLOTTE
- [ ] 2 DAVIDSON
- [ ] 3 CORNELIUS
- [ ] 4 PINEVILLE
- [ ] 5 MATTHEWS
- [X] 6 HUNTERSVILLE
- [X] 7 MINT HILL

HEATED SQUARE FOOTAGE: 11600

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 2

FOUNDATION FOR RESIDENCE:

- [ ] WITHOUT BASEMENT
- [ ] ON SLAB
- [ ] CRAWL SPACE
- [ ] WITH BASEMENT /PLUMBING
- [X] WITH BASEMENT /NO PLUMBING

CLOSING DATE 10-15-00
Lot Checked 5-6-00 - no ~~2 of 4~~
Change in status present

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION: N/A

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: [ ] YES [X] NO TYPE: _____

WATER SUPPLY (CHECK ONE):

- [ ] COMMUNITY (C)
- [ ] MUNICIPAL (M)
- [X] 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	[X] YES [ ] NO
EXISTING WASTEWATER SYSTEMS	[ ] YES [ ] NO	DESIGNATED WETLANDS	
EASTMENTS OR RIGHT-OF-WAYS	[X] YES [ ] NO		

PROPERTY OWNER:

NAME: (LAST) GABBARD (FIRST) USA (MI) C

ADDRESS: 5200 COUNTRY WOODS DR

CITY: MINT HILL STATE: NC ZIP: 28227

DAYTIME PHONE: ( ) –

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) GADD (FIRST) PAUL (MI) B

DAYTIME PHONE: 704 634-7352

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

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: P. B. Gadd DATE: 08-28-00

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

FEE: 200 Credit Card

DATE: 08-28-00

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

1305B 1 1 CRT

TYPE APPLICATION: X 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 #: ~~9800~~ ~~5400~~

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION: ~~5200 COUNTRY WOODS DR.~~

TAX/PARCEL NUMBER: 195-141-30 PP

STREET ADDRESS: ~~5200~~ COUNTRY WOODS DR

TYPE OF BUILDING (CHECK ONE):

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

SUBDIVISION OR MOBILE HOME PARK NAME: COUNTRY WOODS

LOT NUMBER: 70

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 1600

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 2

CLOSING DATE 10-15-00

FOUNDATION FOR RESIDENCE:

__ WITHOUT BASEMENT
__ ON SLAB
__ CRAWL SPACE
__ WITH BASEMENT /PLUMBING
X 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 X NO TYPE: _____

WATER SUPPLY (CHECK ONE):
__ COMMUNITY (C)
__ MUNICIPAL (M)
X 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
EXISTING WASTEWATER SYSTEMS __ YES __ NO
EASTMENTS OR RIGHT-OF-WAYS X YES __ NO
WELL, SPRINGS OR WATERLINES X YES __ NO
DESIGNATED WETLANDS __ YES __ NO

PROPERTY OWNER:

NAME: GABBARD (LAST) USA (FIRST) C (MI)

ADDRESS: 5200 COUNTRY WOODS DR

CITY: MINT HILL STATE: NC ZIP: 28227

DAYTIME PHONE: ( ) —

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) GADD (FIRST) PAUL (MI) B

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SIGNED: P. B. Gadd DATE: 08-28-00

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

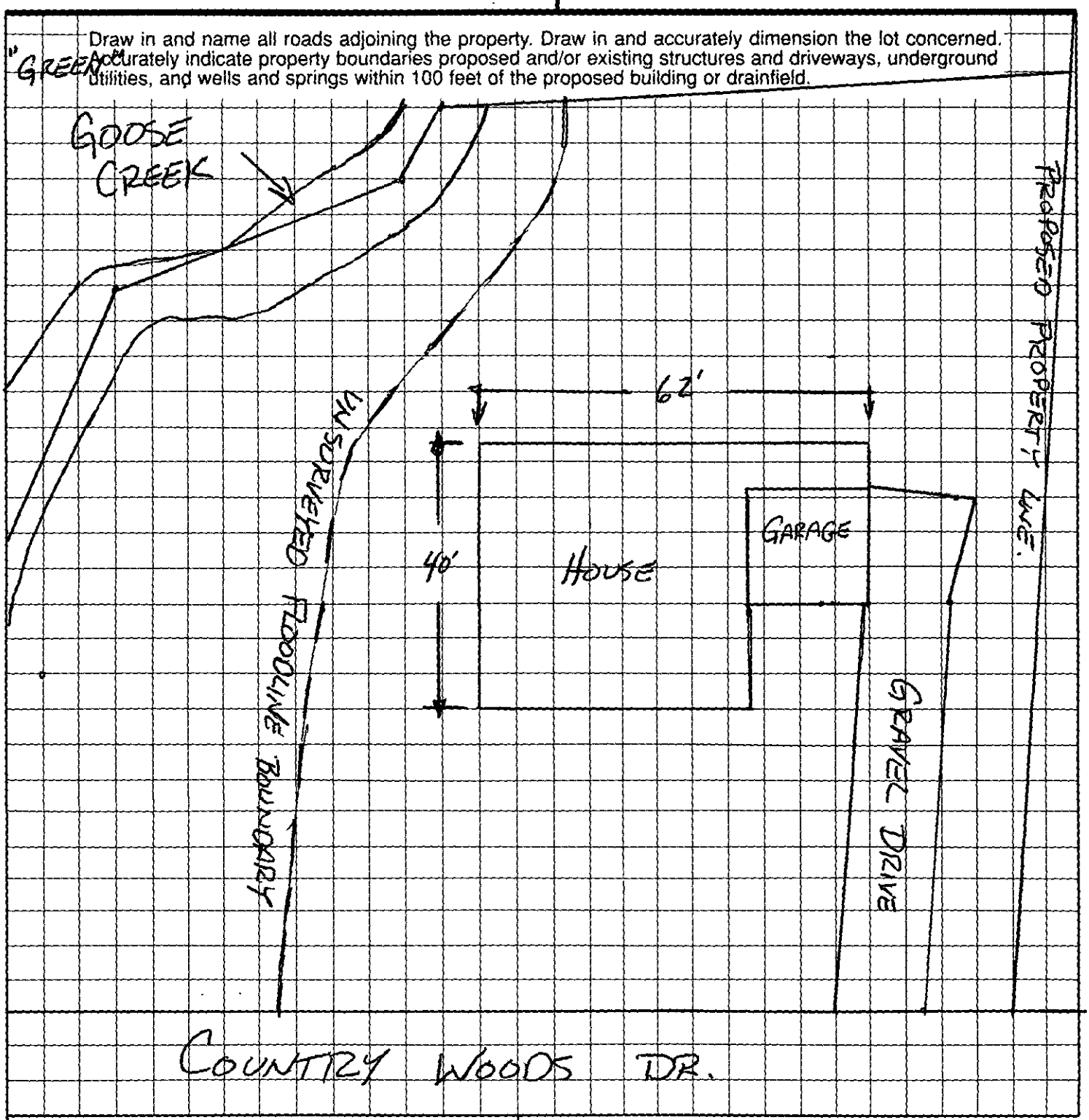
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

13058

FILE: ~~4448~~

TC: 195-141-30 PO

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.



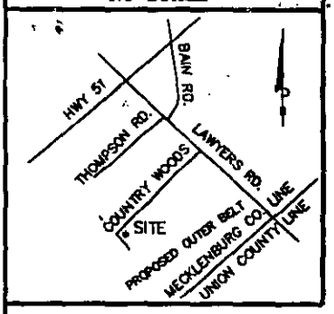
OWNER/AGENT SIGNATURE Ralph B. [illegible]

DATE 08-28-00

APPROVAL DATE _____

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

VICINITY MAP
NO SCALE



I, JAMES LYNN STROME CERTIFY THAT THIS MAP WAS DRAWN FROM AN ACTUAL SURVEY MADE UNDER MY DIRECT SUPERVISION; AND THAT THE ERROR OF CLOSURE IS 1':10,000+ BEFORE ADJUSTMENTS.

WITNESS MY HAND AND OFFICIAL SEAL THIS 21st DAY OF January 1998

NORTH CAROLINA REGISTERED SEAL L-3682 LAND SURVEYOR JAMES LYNN STROME

01/21/98

4411B

CREEK CALLS

LINES BY MB. 20-472	
L1	S 04°09'26" E 145.78'
L2	S 50°20'36" W 145.71'
L3	N 83°32'42" W 69.72'
L4	S 29°16'21" W 34.76'

BOUNDARY/PHYSICAL SURVEY FOR:

LISA C. GABBARD

PROPERTY OF STEVEN M. HAMILTON & WF KAREN
5200 COUNTRY WOODS DRIVE: 14135 MAPLE HOLLOW LN.
LOT 10 PHASE II, COUNTRY WOODS, MB 20-472.
DEED BOOK 4869-735, TAX ID: 195-141-30
MORNING STAR TOWNSHIP, MECKLENBURG COUNTY
MINT HILL, NORTH CAROLINA
JANUARY 21, 1998
File name: C:\EPSA\COAKS JOB# 98010
Scale 1" = 50'

50 0 50 100

NOTES:

1. THIS PROPERTY IS LOCATED IN A DESIGNATED FLOOD ZONE PER TAXMAP AND RECORD MAP 22-472. A FLOOD FRINGE LINE IS ON EAST ACCORDING TO MB 22-472.
2. AREA DETERMINED BY COORDINATE COMPUTATION.
3. CP DENOTES COMPUTED POINT, NO MONUMENT FOUND OR SET.
4. UNDERGROUND UTILITIES NOT LOCATED AS OF THIS DATE.
5. SETBACKS PER MAP BOOK 22-472 AND DB. 4505-751.
6. PROPERTY IS SUBJECT TO THE RESTRICTIONS IN DB. 4505-751
7. NO GRID MONUMENTS APPEAR TO BE WITHIN 2000'.
8. PROPERTY ADJACENT TO CREEK MAY OCCUR FLOODING.
9. THIS MAP DOES NOT REPRESENT A FLOOD SURVEY.

LEGEND:

PROPERTY LINE
TIE LINE
UNSURVEYED LINE
BACK OF CURB
SETBACK LINE
CP COMPUTED POINT
PP POWER POLE

A STROME LAND SURVEYING COMPANY
2824 OAKCROFT DRIVE, MATTHEWS, N.C.
(704)848-0380, JAMES L. STROME L-3682

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

2400

Sheet ___ of ___
PROPERTY ID #: ___
COUNTY: ___

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

#2 13050 PO 195-141-30

OWNER: Steven M. Hamilton & Wife APPLICANT: ___
ADDRESS: 5200 Coventry Woods Dr. APPLICATION DATE: ___ DATE EVALUATED: ___
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949): 360 gpd PROPERTY SIZE: 1.5 A
LOCATION OF SITE: Coventry Woods Dr. PROPERTY RECORDED: ___
WATER SUPPLY: ☑ Private ☐ Public ☐ Well ☐ Spring ☐ Other ___
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	15% LS	0-4"	gr/cl	Fr/sEXP/ss/sP	>46" To Chroma 2 Mottles	46"	N/A	None	.39 Ps
		4-46"	sBK/c	Fr-Fi/sEXP/ss/P					
2	LS 10%	0-6"	gr/cl	Fr/sEXP/ss/sP	>31" To Chroma 2 Mottles	31"	N/A	None	.2 Ps
		6-31"	sBK/c	Fr/sEXP/s/P					
3	LS 15%	0-6"	gr/cl	Fr/sEXP/ss/sP	>46" To Chroma 2 Mottles	46"	N/A	None	.39 Ps
		6-46"	sBK/c	Fr/sEXP/s/P					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	US	US
System Type(s)		

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): Unsuitable
EVALUATED BY: W.A. Mauldin 4-18-96
OTHER(S) PRESENT: ___

OMMENTS: 1006 Repair

LEGEND

use the following standard abbreviations

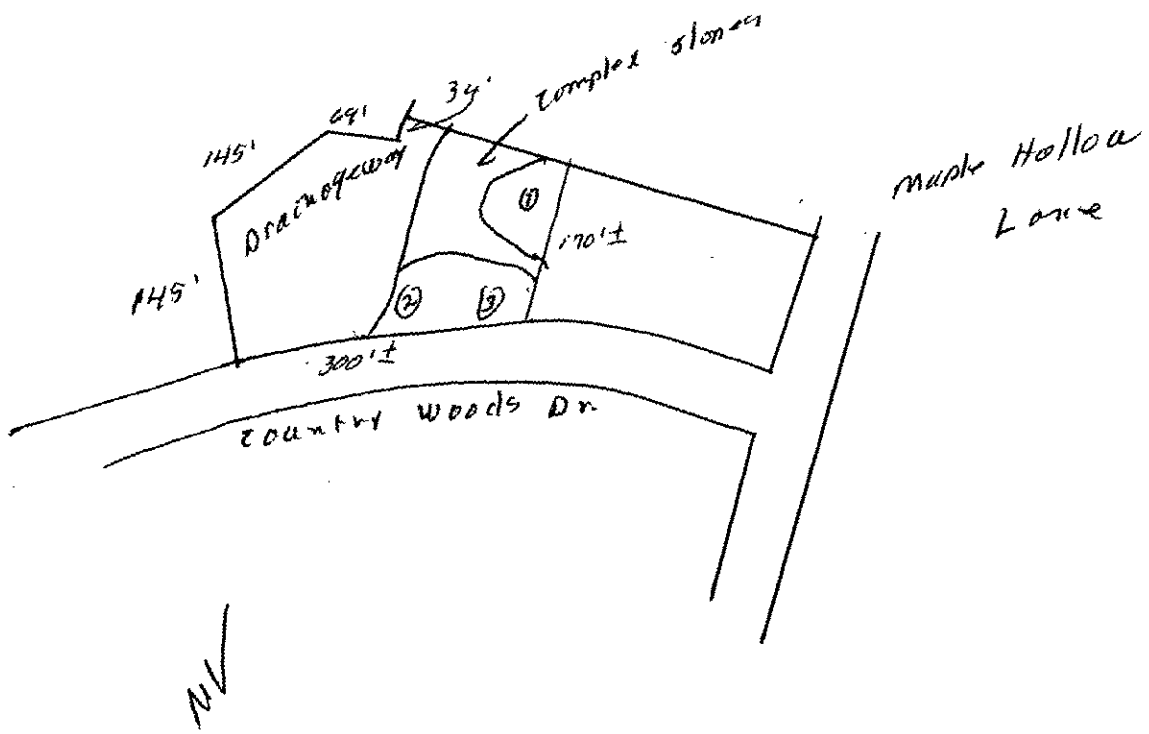
LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR	LPP .1957 LTAR	MINERALOGY/ CONSISTENCE	STRUCTURE
C (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive)	G (Single Grain)
V (Convex Slope)		LS (Loamy Sand)			SEXP (Slightly Expansive)	M (Massive)
(Drainage Way)					EXP (Expansive)	CR (Crumb)
S (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
P (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
S (Foot Slope)						ABK (Angular Blocky)
(Head Slope)	III	SI (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
(Linear Slope)		SICL (Silty Clay Loam)				PR (Prismatic)
(Nose Slope)		CL (Clay Loam)				
(Ridge)		SCL (Sandy Clay Loam)			MOIST	WET
(Shoulder Slope)		SLC (Silt Loam Clay)				
(Terrace)					VFR (Very Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Friable)	SS (Slightly Sticky)
		SIC (Silty Clay)			FI (Firm)	S (Sticky)
					VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None		EFI (Extremely Firm)	NP (Non-plastic)
						SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

OTES

ORIZON DEPTH	In inches below natural soil surface
EPTH OF FILL	In inches from land surface
ESTRICTIVE HORIZON	Thickness and depth from land surface
APROLITE	S(suitable) or U(unsuitable)
OIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
LASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

valuation of saprolite shall be by pits.
ong-term Acceptance Rate (LTAR): gal/day/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).



FEE: 100.00 cash
DATE: 4/1/96 #1697

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

I J 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 #: 1305B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 195-141-30 PO

STREET ADDRESS: ~~5200~~ Country Woods Dr.

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: 10

TYPE OF BUILDING (CHECK ONE):

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

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 2,000

NUMBER OF BEDROOMS: 3 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
EASEMENTS OR RIGHT-OF-WAYS	___ YES ___ NO		

PROPERTY OWNER:

NAME: Hamilton (LAST) Steven (FIRST) M. (MI)

ADDRESS: 5200 Country Woods Dr.

CITY: Charlotte STATE: NC ZIP: 28227

DAYTIME PHONE: (704) 573-1980

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) -

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 7/13/84

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SIGNED: Karen E Hamilton DATE: April 1, 1996

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

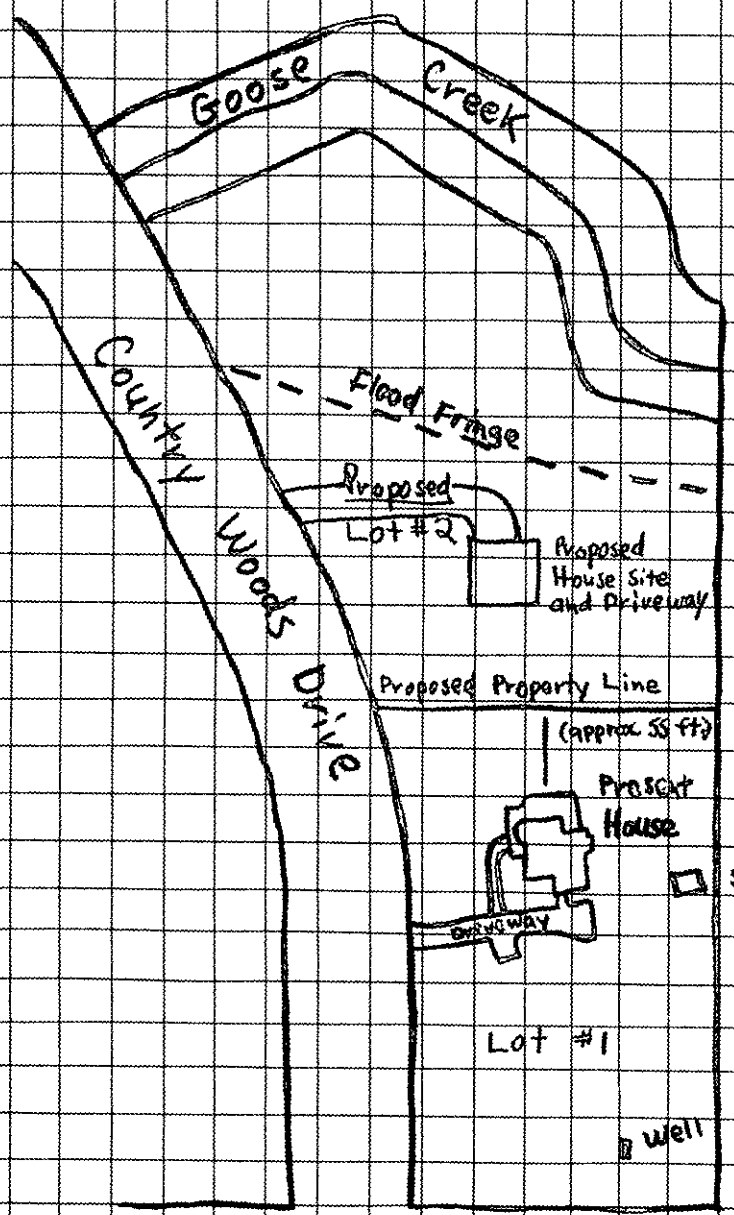
PROPOSED PLOT PLAN

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

FILE: 130YB

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.



Total = 2.549 Ac.
Lot 10,
Country Woods, Phase II

OWNER/AGENT SIGNATURE

DATE

APPROVAL DATE _____

White - Health Department's Copy

Canary - E.H.S. Copy

Pink - Owner's Copy