

16217 NORTH POINT RD

00145224

9/4/08

marliwr

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT (ISSUED)

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

FILE: 21001 DATE: 6/26/96

TC: 001-452-24 ☐ L ~~CBT~~

SERIAL Nº 16651

Name of Owner Peter + Monika Betz Juris.: _____

Address of Property 16217 North Point Road 150' off 760' high water mark of LAKE

Inspection Data:

Tank Material PCC

Total Length of Drainfield 525'

Number of Lines 6 @ 87.5'

Cover Depth 12-24"

Water Supply Source community well

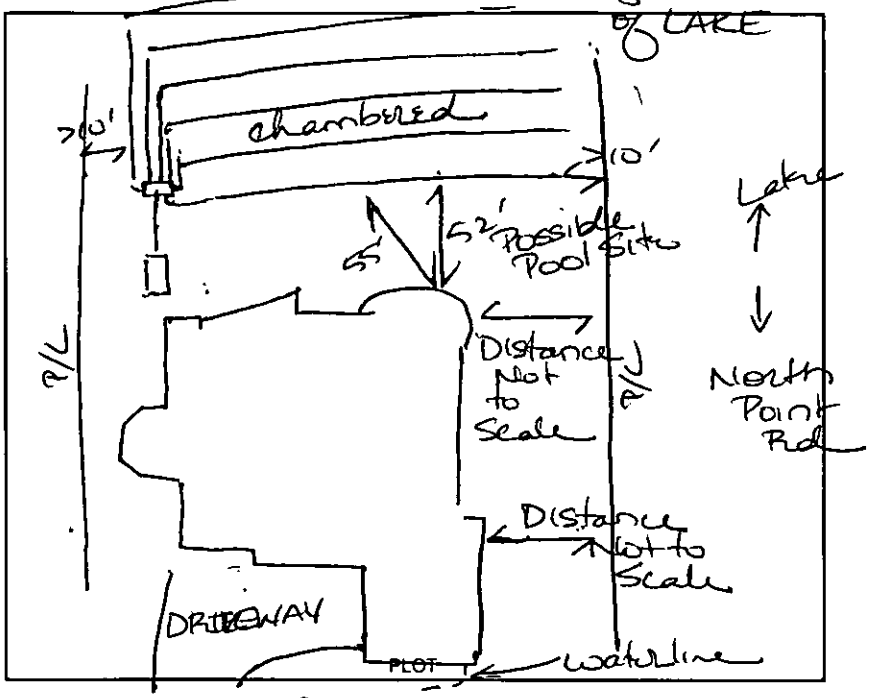
Distance to Water Source >100'

Excavation Inspected 6/26/96

Tank(s) Inspected 6/26/96

Wash Line Inspected NA

High Water Alarm Inspected NA



Design 1996 Infiltrator, 1500gST, D.Box, 1575ft2, 6"+S, cecil-like CTR# _____ F.J. ERVIN

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 15A NCAC 18A. 1900, "Laws And Rules For Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. This 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 15A NCAC 18A. 1990 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.

Notice: Disturbance of the designated repair area may result in the suspension/revocation of this permit.

COMMENTS: Type III, 5 Bedroom House

- PPBPS Repair Area located to front of house (roadside)
- If swimming pool installed at future date, the pool shall be a minimum of 15' from any portion of the sewage disposal system.

Joa B. Malik, RS
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

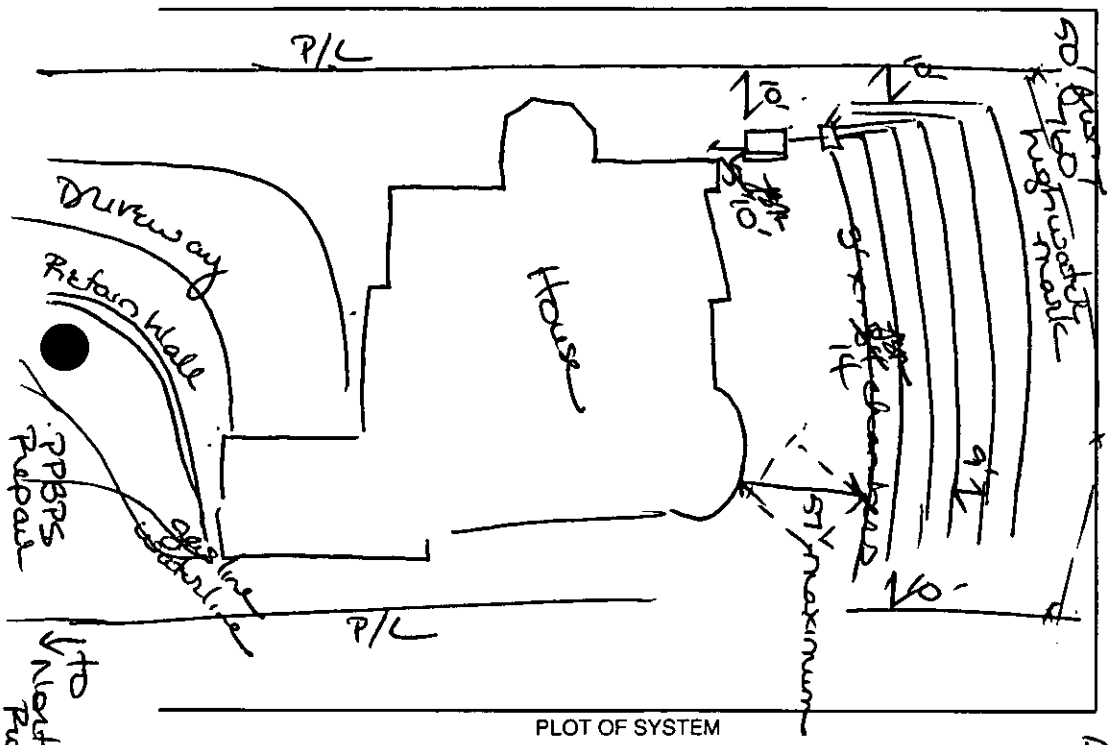
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 21001 DATE: 5/16/96

TC: 001-452-24 ☐ L

SERIAL Nº 16661

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 9/22/93. All work shall be completed on or before 6/16/96, 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

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank ____ gallons

Tank Construction PCC

Trench Depth 24-36"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous ✓

Total Line Length 500'+ feet

Number of Lines 6 @ 14 chambers each

Depth of Stone Group I, II or III soil backfill inches (Sand)

Distance from House 10' feet

Distance from Property Line 10' feet

Distance from Well Community feet

Distance from water line 10'

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

NAME OF OWNER Patel & Monika Betz

LOCATION OF PROPERTY 16217 North Point Road

Comments: System design & location changed at the request of the owner. PPBPS repair area to front of house (roadside)

① Keep installation >50' from the 760' high water mark of Lake Norman.

② Proposed pool must be 15' minimum from any part of the sewage disposal system. Any decking, deck supports around pool shall be a minimum of 5' from any part of the sewage disposal system.

Lisa B. Mialik, RS
Environmental Health Specialist

See recorded agreement forms on file.

S Bateman for S Daniel, Program Mgr 6-11-96

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

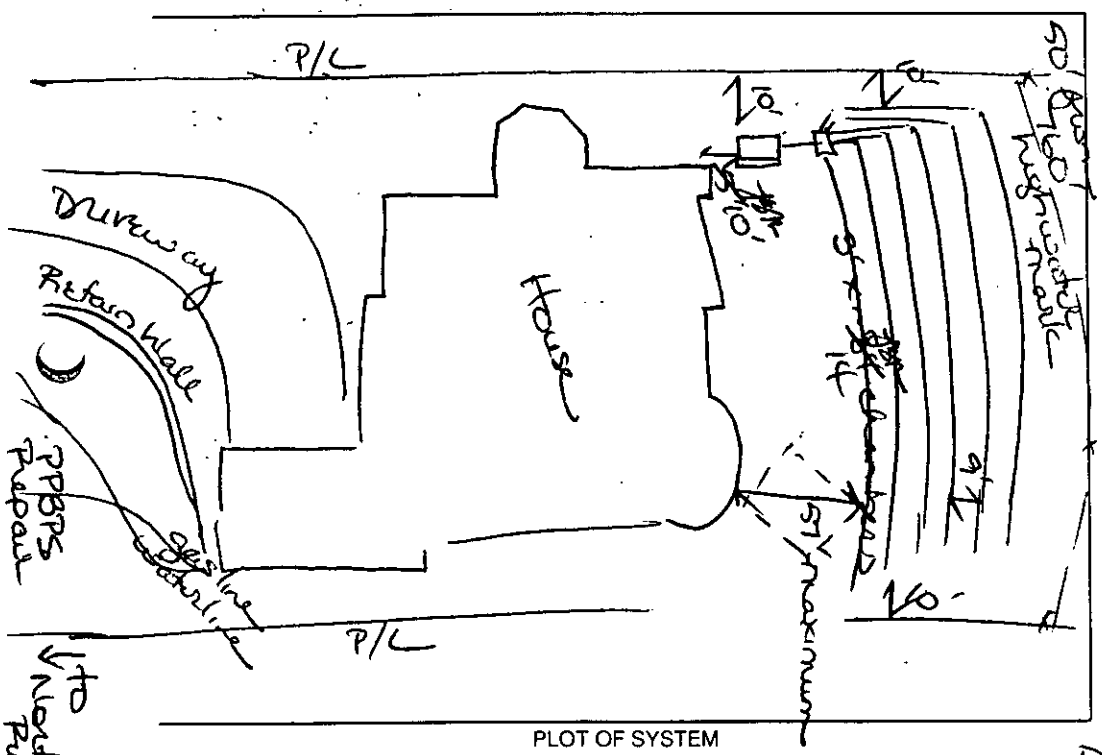
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ENVIRONMENTAL HEALTH DIVISION
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CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 21001 DATE: 5/16/96

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P/L
Driveway
Retaining Wall
House
PPBPS Repair
Lake Norman
P/L
760' high water mark
10'
10'
10'

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

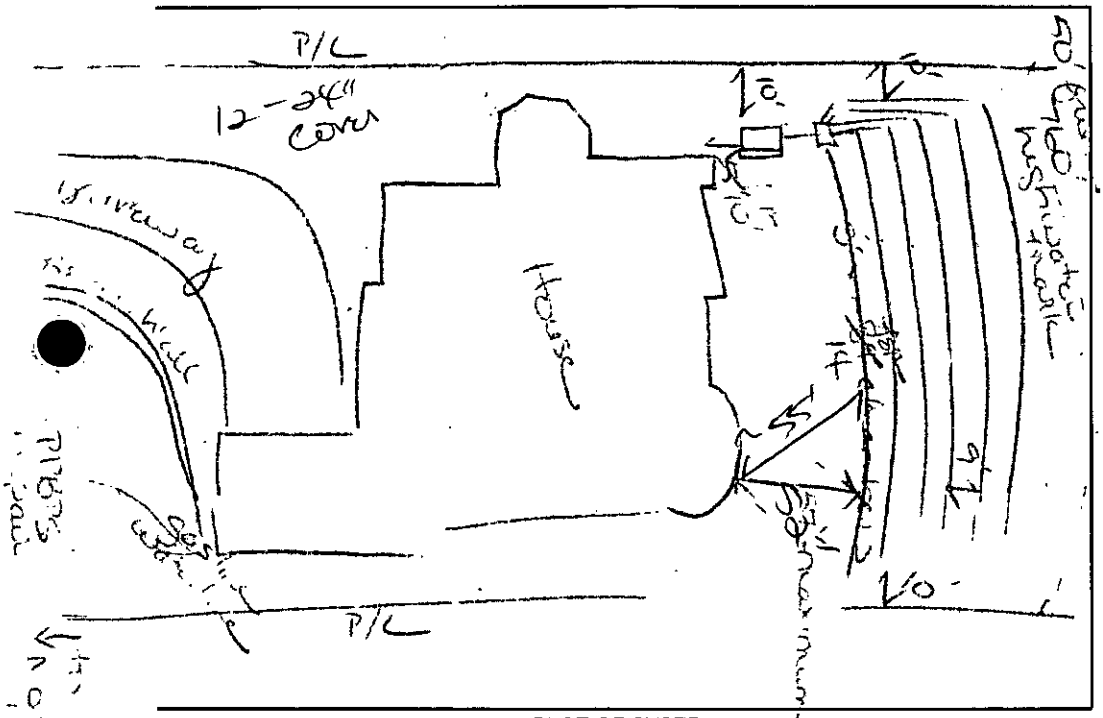
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SERIAL Nº 16661

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PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank / gallons

Tank Construction PCC

Trench Depth 24-36"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous ✓

Total Line Length 420 + feet

Number of Lines [illegible] feet

Depth of Stone [illegible] inches

Distance from House [illegible] feet

Distance from Property Line 10 feet

Distance from Well [illegible] feet

Distance from water line 10'

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

NAME OF OWNER Peter Mountzouris

LOCATION OF PROPERTY 16017 Northport Rd

Comments: System design + location changed at the request of the owner. Trees should not be cut (Waterside)

(1) Keep installation >50' from the 760' high water mark of Lake Norman.

(2) Proposed pool must be kept minimum of 10' from the sewage disposal system.

Fred Dockins, dockseekers and applicant is aware of requirements of setting any part of the sewage disposal system.

[illegible]
Environmental Health Specialist

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

Fax Cover Sheet

DATE: **May 7, 1996** TIME: **12:42 PM**

TO: **Lisa B. Mialik, R.S.** PHONE: **704-336-5573**
Mecklenburg County
Health Department FAX: **704-336-6894**

FROM: **Janice Breaux**
R & R Builders, Inc PHONE: **704-541-1192**
FAX: **704-543-1191**

RE: Betz Residence - **16217 North Point Rd.**

Number of pages including cover sheet: *2*

Dear Lisa:

I am sending you a copy of Wastewater Treatment and Disposal System Design Agreement which has been filed for registration with Register of Deeds. If you need the original copy please let me know. The original document will be mailed to us in four to six week.

Sincerely,

Janice

BK: 08567 PG: 0272/0274 #:0154 13.05
JUDITH A GIBSON REG OF DEEDS MECK NC
FILED FOR REGISTRATION 05/07/96 11:38

FILE COPY

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

WASTEWATER TREATMENT AND DISPOSAL SYSTEM DESIGN AGREEMENT: 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c); OR .1969

FILE # 21001
PARCEL # 001-452-24

The undersigned, Hans P. Betz and Monika S.Betz, owner of property located at 16217 North Point Road, (the "site") and described in an instrument recorded in Book 5086 at Page 364, Mecklenburg Public Registry, hereby acknowledges that the undersigned applied to the Mecklenburg County Health Department (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 15A NCAC 18A .1900 et seq.; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested 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 is allowed by the rules; 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 the responsibility of the designer, owner, developer, installer, or user of the system, as applicable, 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 acknowledges that the following conditions will apply to the site:

- Any changes on the property may make the Improvement Permit Null and void and may make the Improvement Permit subject to revocation.

This instrument was prepared by: R & R Builders Inc
Mail after recording to: 4723 Pineland Place
Charlotte, NC 28277

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement 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.

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.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, this 6th day of May, 1996.

_____
(Corporate Name)

By: _____

_____ President

ATTEST:

_____

_____ Secretary

(Corporate Seal)

X _____ (SEAL)

X _____ (SEAL)
WIFE IF OWNER

_____ (SEAL)

_____ (SEAL)

STATE OF NORTH CAROLINA
COUNTY OF Mecklenburg

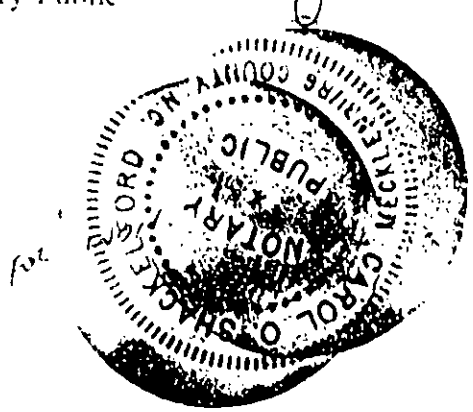
I, Carol O. Shackelford, a Notary Public for said County and State, do hereby certify that Hans P. Betz and Monika S. Betz personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 6th day of May, 1996.

Carol O. Shackelford
Notary Public

My Commission Expires:

My Commission Expires June 29, 1997



BK: 08567 PG: 0272/0274 #:0154 13.05
JUDITH A GIBSON REG OF DEEDS MECK NC
FILED FOR REGISTRATION 05/07/96 11:38

FILE COPY

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COUNTY OF MECKLENBURG

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The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is the responsibility of the designer, owner, developer, installer, or user of the system, as applicable, 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 acknowledges that the following conditions will apply to the site:

- Any changes on the property may make the Improvement Permit Null and void and may make the Improvement Permit subject to revocation.

This instrument was prepared by: R & R Builders Inc
Mail after recording to: 4723 Pineland Place
Charlotte, NC 28277

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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.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, this 6th day of May, 1996.

_____
(Corporate Name)

By: _____

_____ President

ATTEST:

_____

_____ Secretary

(Corporate Seal)

X _____ (SEAL)

X _____ (SEAL)
WIFE IF OWNER

_____ (SEAL)

_____ (SEAL)

STATE OF NORTH CAROLINA
COUNTY OF Mecklenburg

I, Carol O. Shackelford, a Notary Public for said County and State, do hereby certify that Hans P. Betz and Monika S. Betz personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 6th day of May, 1996.

Carol O. Shackelford
Notary Public

My Commission Expires:

My Commission Expires June 29, 1997

29081

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES CK# 1927 $300.00 09/23/93 [] 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

COPY

Date: 09/23/93

PERSON FILING APPLICATION:
NAME: ANDERSON (last) ERIC (first) S (mi)
ADDRESS: 2135 LIGHT BRIGADE PHONE: (704) 845-5997
CITY: MATTHEWS STATE: N.C ZIPCODE: 28105

PROPERTY OWNER:
NAME: BETZ (last) Peter + wf Monika S (first) (mi)
ADDRESS: 118 ISLAND VIEW PHONE: (h) (704) 483-3628 (w) 359-0045 Ext 5
CITY: DENVER STATE: N.C ZIPCODE: 28037

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 001-452-24
STREET ADDRESS: 16217 North Point Rd
ZONING:

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 #24 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):
[] SINGLE MOBILE HOME (S) [X] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [] MODULAR HOME (M) [] OTHER _____ (O)

NUMBER BEDROOMS: 5 NUMBER OCCUPANTS: 5
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: Eric S Anderson Date: Sept 22, 1993

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.

... 5 bedroom

4/3 Agreements forms mailed per Janice's request

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

60 24' 1-15'

10/5 OSV. Need © property line + stub out identified
10/6 PC to Janice @ R+R Builders 841-1192. NE. Unregard P/L + stub out for

FSW 10/15/93
Environmentalist Date

2/27 Pool staked per Russell

Director or Authorized Section Head Date

10/9 PC w/ Janice
10/9 OSV. © line + stub out not located as requested

10/11 OSV w/ Russell Shackelford WATER : 122791
to have © line marked, will take Easement form to owner.
10/17 M from Robert Laney 289-2259
10/17 PC to Mr Laney. NC. No machine.

3/1 OSV w/K. Randall - ~~inf~~ chambered to lakeside, PB repair from D

3/4 PC w/ Russell Shackleford. Advised of OSV. - need reclass forms, etc. prior to installation approval

11/2/95 OSV. Russell Shackelford. Pete Betz present. To have 760' mark located (50' from) + contact me to evaluate potential drainfield site design

11/28/95 Vm from Janice @ R+R Builders (541-1192) - P/L staked

~~12/1/95 OS. unable to complete layout~~

12/6/95 OSV. Layout completed. Russell Shackleford present. Advised. To notify after his conference w/ Betz.

12/12/95 OSV w/ R. Randall. Need to stake pool - maybe ~~4'~~ filtrator w/ PB repair or PB w/ PB repair

12/13/95 PC w/ Janice @ R+R Builders Advised to stake pool - contact K. Randall or me. YBR

1/16/96 Vm from Janice @ R+R PC w/ Janice - requested that pool be staked + then notify me.

2/16/95 Vm from Janice @ R+R PC w/ Janice - appt. scheduled for 2/16 10:30 w/ Russell

2/16/95 PC w/ Russell - to stake pool prior to OSV - to notify me when done

PROPOSED PLOT PLAN

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

FILE: 21001

TC: 001-432-24

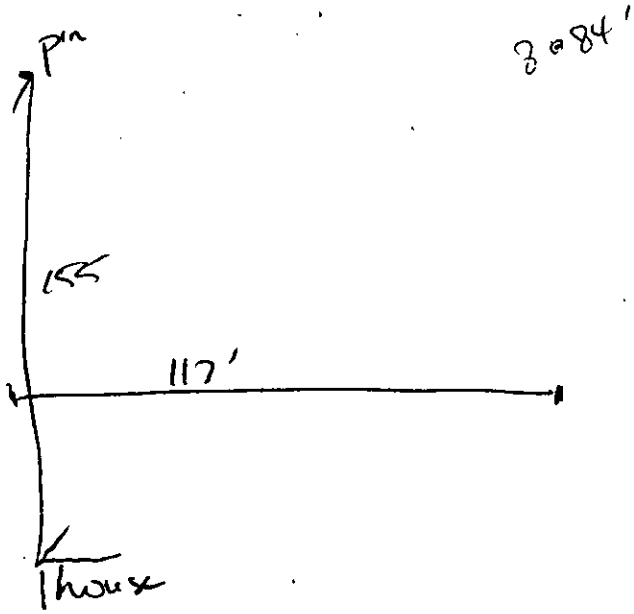
Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.

"SEE Attached PLANS"

Refer to plot plan in file.

675 PB from

APPROVAL DATE


P^
3084'
155
117'
House

File #1001 - Jon

Previous I.P. issued by P. Walker to install septic system on adjacent lot.

At owner's request - chambered system installed on same lot as house.

94.161

N 60° 33'-05" E

N 06°-20'-55" W 35.00'

N 06°-20'-55" W 30.20'

N 49°-12'-55" W 47.40'

N 30°-09'-55" W 23.13'

Keep septic system >50 from high water mark

3½

SEPTIC FIELD

96'

NOTE: BY PROPERTY LINE PARALLEL TO PROPERTY LINE

SEPTIC TANK

Repair Area

70

60

FUTURE POOL AREA - GRASS

PLANTERS

64.0

64.10

DN 1.17

PLANTER

73.01

73.50

SAVE FFE 74.0

74.25

72.10

72.25

72.75

72.0

72.50

74

73

74

73

74

74

74

File 21001

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21004

T.C. NO. A-311-2110

(Ground Absorption Sewage Disposal)

OWNER: Martin Development Group PLAT NO: Lot 64
ADDRESS: 1600 Jon Tryon Center LOT SIZE: Corner Lot
Charlotte NC 28211
LOCATION OF SITE: Neck Point Road

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) 9-15% U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) Clay U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) Blk-Kt U	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) 36-48" U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) 72+" U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	(S) 72+" PS Ground water U	S PS U	S PS U	S PS U
7. OTHER (Specify)	S PS See Note U	S PS U	S PS U	S PS U
8. SOIL GROUP	II-A			
9. SITE CLASSIFICATION	Provisionally suitable.			
10. SOIL SERIES	Enon / Pacolet			

S - Suitable PS - Provisionally Suitable U - Unsuitable

**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: Pressure lot may require pump & 24' bed - recommend plans for house & system location be submitted

Described by: William E. Martin
Title: Soil Scientist

Date: 4/26/01

H

File 21001 for

Serial No. 6214

SIR No. 21001

T. C. No. PO 001-201-05

Date Issued 7-31-85

Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

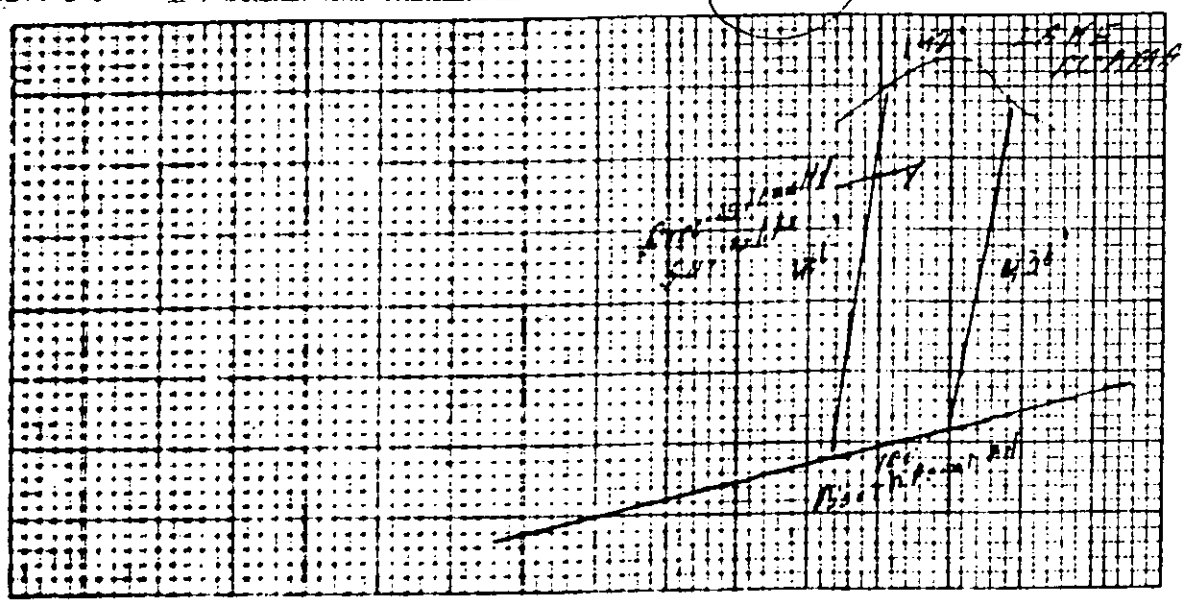
SOIL INVESTIGATION REPORT
"REVISED REPORT DUE TO LOT RECONFIGURATION"

NAME OF OWNER Martin Development Group

ADDRESS OF OWNER (LAST) 1800 One Tryon Center (FIRST), Charlotte, NC (MIDDLE) ZIP 28284

LOCATION OF PROPERTY North Point Road (STREET OR COUNTY ROAD) for

SUBDIVISION Lookout Point LOT NO. 24 BLOCK NO.



PLOT PLAN

This is to certify that a soil investigation and onsite investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The said investigation was conducted on that portion of the lot as indicated on the above plot. PROVISIONALLY SUITABLE

The permeability rate determined by the investigation was The said lot is approved for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption effluent discharge subject to the following terms and conditions:

1. A [illegible] system shall be obtained from the Mecklenburg County Department [illegible] at the beginning of the construction [illegible] of the wastewater treatment system on the said lot.
2. The [illegible] system which must be installed will be determined by the Mecklenburg County Department of Environmental Health [illegible] on the permeability rate obtained above, and on the use and type of building [illegible].
3. The location [illegible] system is approved on the lot as staked by a registered soil scientist for septic system installation on the above plot.
4. The system is approved [illegible] on the lot which is the opinion of the Mecklenburg County Department of Environmental Health [illegible] as acceptable for system installation [illegible] of such a system.

This approval is granted based on the laws of the State of North Carolina and the rules and regulations of the North Carolina Department of Human Resources, Division of Health Services and the Mecklenburg County Health Commission which were in effect on the date of issuance and is void if at any time in the future, prior to completion of the system, these laws, rules and regulations are changed such that this approval would not have been granted had the new or revised laws, rules, and regulations been in effect on the issue date.

William G. Hagi
Soil Scientist

David A. Hutchison Jr.
Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

21000
21001

PG.20

PG. 20

PG. 57

LAKE NORMAN

BK.09

PG.02

FOR TAX PURPOSES ONLY

TAX LINE MAP BOOK 001 PAGE 45
MECKLENBURG COUNTY, NORTH CAROLINA
REVISED 3-31-95 NS | SCALE 1" = 400'

PROPOSED PLOT PLAN

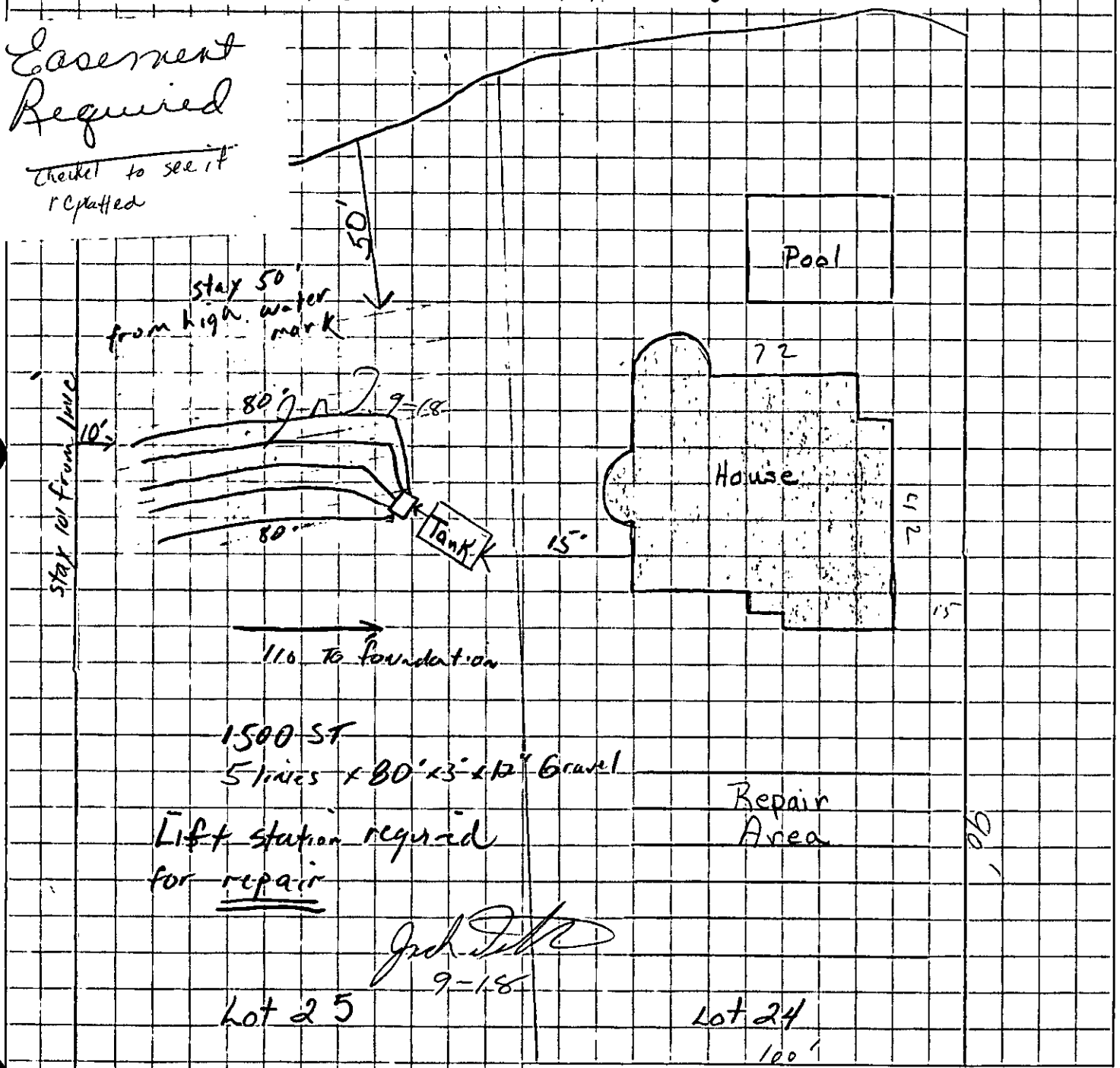
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 21000 + 21001

TC: 001-452-23, 24

16217 North Point Rd.

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.



Signed: Hans P. Betz

Date: September 1, 1989