

8705 VAGABOND RD

13927138

6/5/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 5742A DATE: 12-13-90

TC: 139-271-38 ☒ L ☐ CRT

SERIAL № 13639

Name of Owner HUCKS, M. Juris.:

Address of Property 8705 VAGABOND RD.

Inspection Data:

Tank Material PCC

Total Length of Drainfield 540' @ 70', 80'

Number of Lines 5 @ 80'

Cover Depth 12"

Water Supply Source WELL

Distance to Water Source >50

Excavation Inspected 12/13/90

Tank(s) Inspected 12/13/90

Wash Line Inspected 12/13/90

High Water Alarm Inspected N/A

PLOT

Design: 1500 GAL ST, 15' x 80' x 17" STONE SEPTIC; (02) 3' x 70' x 12" WASHER TR# 70

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
washer, 2 trenches 3' x 70 = 140'
Septic Bed 15 x 80 = 400'

Timothy A. Kuhn R.S.
Environmentalist

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

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

FILE: 5742A DATE: 12/13/90

TC: 139-271-38 ☐ L ☐ CRT

SERIAL Nº 13691

Name of Owner Hucks, M. Juris.:

Address of Property 8709 Vagabond Rd.

Inspection Data:

Tank Material PCC

Total Length of Drainfield 540'

Number of Lines ~~3~~ 2 @ 270' WL
5 @ 80'

Cover Depth 24"

Water Supply Source well

Distance to Water Source 60'

Excavation Inspected 12/13/91

Tank(s) Inspected 12/13/91

Wash Line Inspected 12/13/91

High Water Alarm Inspected

PLOT

Design: 1991 1500 SF, Con. 400 SF B Septic 480 SF WL, 12"6 CTR# 70

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☒ ~~installed~~ or constructed ☐ altered or repaired

☒ ~~in ac~~cordance 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
Septic System in bed 15' x 80' 17"6
Washer System in 2 Trenches 3' x 70' 12"6

Audrey J. Rivers R.S.
Environmentalist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

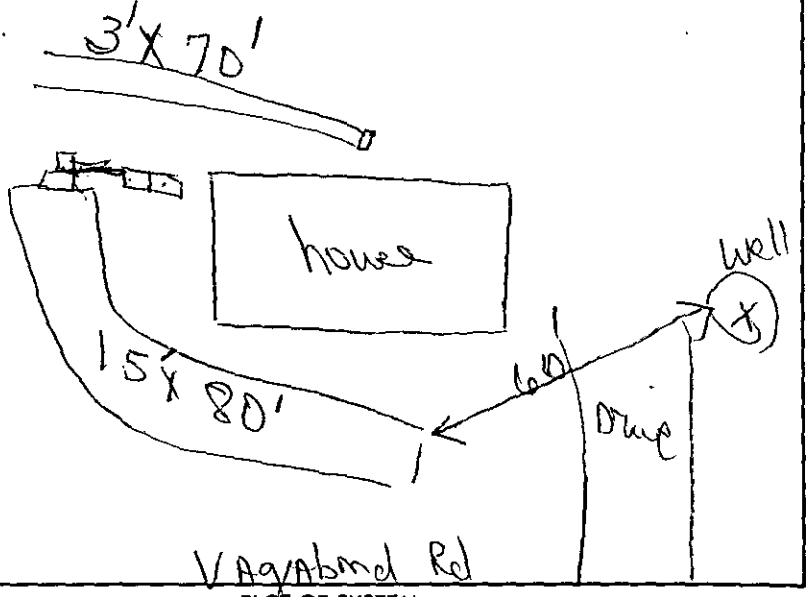
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 5742 A DATE: 11/26/90

TC: 39-271-38 ☒ L

SERIAL № 14849

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 11/7/87. All work shall be completed on or before 12/26/90, 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' 5' feet

Total Line Length 140' washer 80' Septic feet

Number of Lines 2 5

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well 50' feet

NAME OF OWNER Hucks, M

LOCATION OF PROPERTY 8705 Vagabond Rd

Comments: INSTALL A bed for Septic System = 15' X 80', 17" Stone
Washer: 2 Trenches 3' x 70' x 12" Stone.

S R Daniel
Division or Section Head

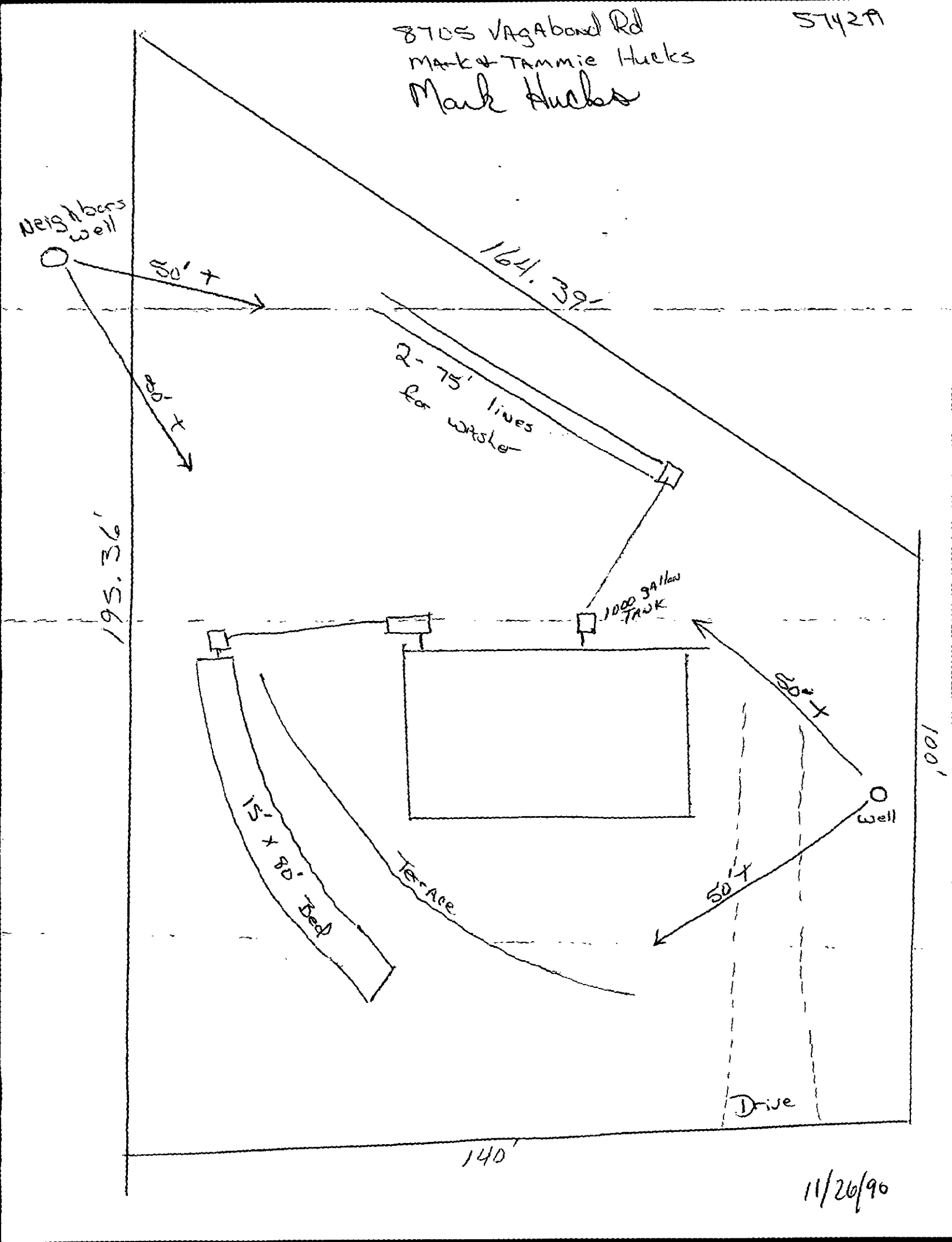
Judy J Kuss R.S.
Environmentalist

* 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

8705 Vagabond Rd
Mark & Tammie Hucks
Mark Hucks

5429



11/26/90

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 6/2/89

Name/Company Mark Hucks

Sanitation _____

Vector Control ✓

O.P.W.D. _____

Service: Lup - Mclw
5742A

MECKL COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
JUN 2 1989

corr-3162
TD 150.00

Fee: $ 150.00

Completed by

Collected by

150.00

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

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: 5742 A

TC: 139-271-38

SERIAL: № 15035

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
JUN 2 1989
ENVIRONMENTAL HEALTH
DIVISION

☑ L ☑ CRT

JOB LOCATION

① ADDRESS: 8705 (STREET NO.) VAGABOND Rd. (STREET) ② FILE: _____

③ JURISDICTION: MECKLENBURG COUNTY ④ TAX PARCEL NO.: _____

⑤ SUBDIVISION: HILLANDALE ACRES ⑥ LOT: 80 ⑦ BLOCK: _____

OWNER

⑧ NAME: MARK (FIRST) A (MIDDLE) Hucks (LAST)

⑨ MAILING ADDRESS: 9537 Goldsmith Ln.

⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28227

⑬ PHONE: (WORK) 536-9662 (wifes work Tammie) ⑭ (HOME) 545-8502

REQUEST

This request is for a(n):

⑮ ☑ New permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify) _____

DESIGN CRITERIA

System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 3 ㉕ Type? _____

㉓ Maximum occupancy? 6 ㉖ Maximum number of employees? _____

㉔ Basement? ☐ yes ☑ no 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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Mark Hucks Tammi Hucks

Date: 6-1-89

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, 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. Lift station may be required for wash lines.

B. R. Ferguson — Environmentalist — 10-20-89 — Date

C. [illegible] — Director or Authorized Section Head — 10-23-89 — Date

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

Mecklenburg County
Health Department

Basil G. Delta, M.D., M.P.H.
Health Director

May 16th, 1989

Bill B. Deck, Jr.
P. O. Box 25311
Charlotte, NC 28229

RE: Property located at Vagabond Road
FILE: 5742A
PARCEL: 13927138

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 12085) 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.

Very truly yours,

Sylvia D. Daniel

Sylvia D. Daniel, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 12085

File: 57424 Action 1

Parcel: 139-271-38 ☐ PC

Location: Vagabond Road

Subdivision:

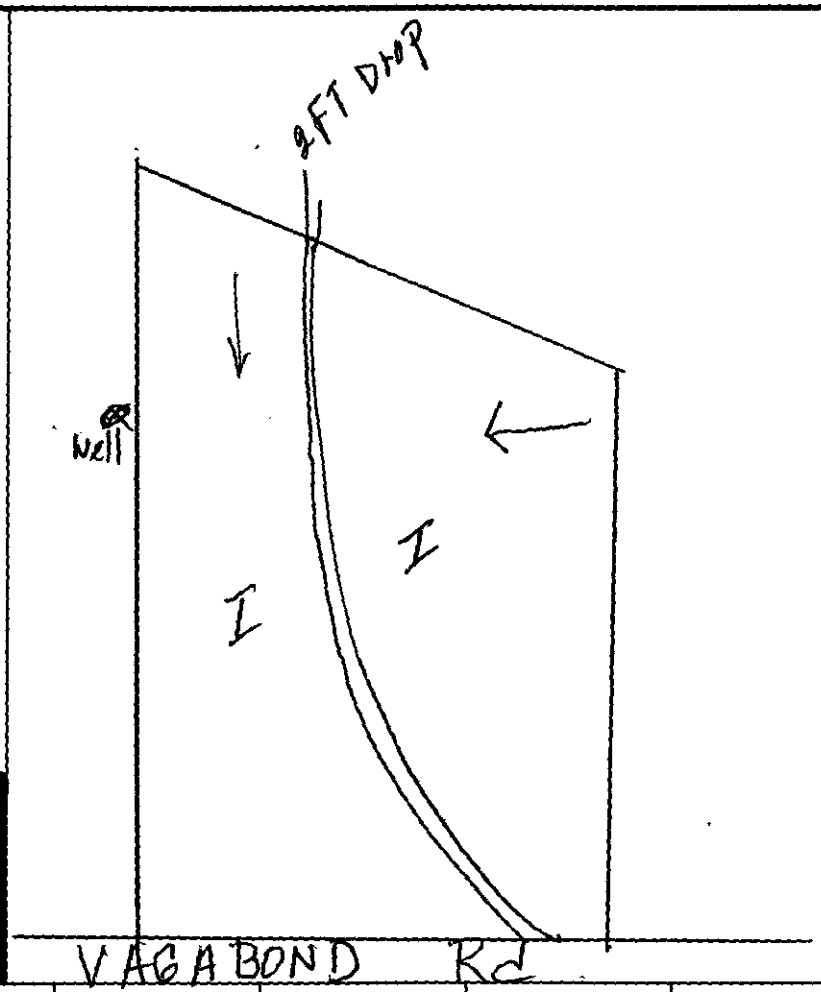
Lot: Block: Acres: .52

Owner: Bill B. Deck, Jr.
Address: P. O. Box 25411
Charlotte, N. C. 28229

Comments: _____

Described by: W. B. Ramsey

Date: 5-15-89



***** 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 4-8	S PS U	S PS U	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	S PS U	S PS U	S PS U
Depth	S (PS) U 45-48	S PS U	S PS U	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	IVa Cecil					
Area Classification	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U

Restricted By slope & Two Level Lot

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 5/11/89

Name/Company Bill B. Deck, Jr.

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Soil test
#574271

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

MAY 11 1989

Fee: $ 30 -

Completed by

Collected by

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 5742A

TC: 139-271-38

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: 8705 Vagabond Rd. Charlotte, N. C. 28227

② SUBDIVISION: Hillandale Acres ③ LOT: 80 ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: 12 PAGE NO.: 541 PARCEL NO.: _____

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

OWNER

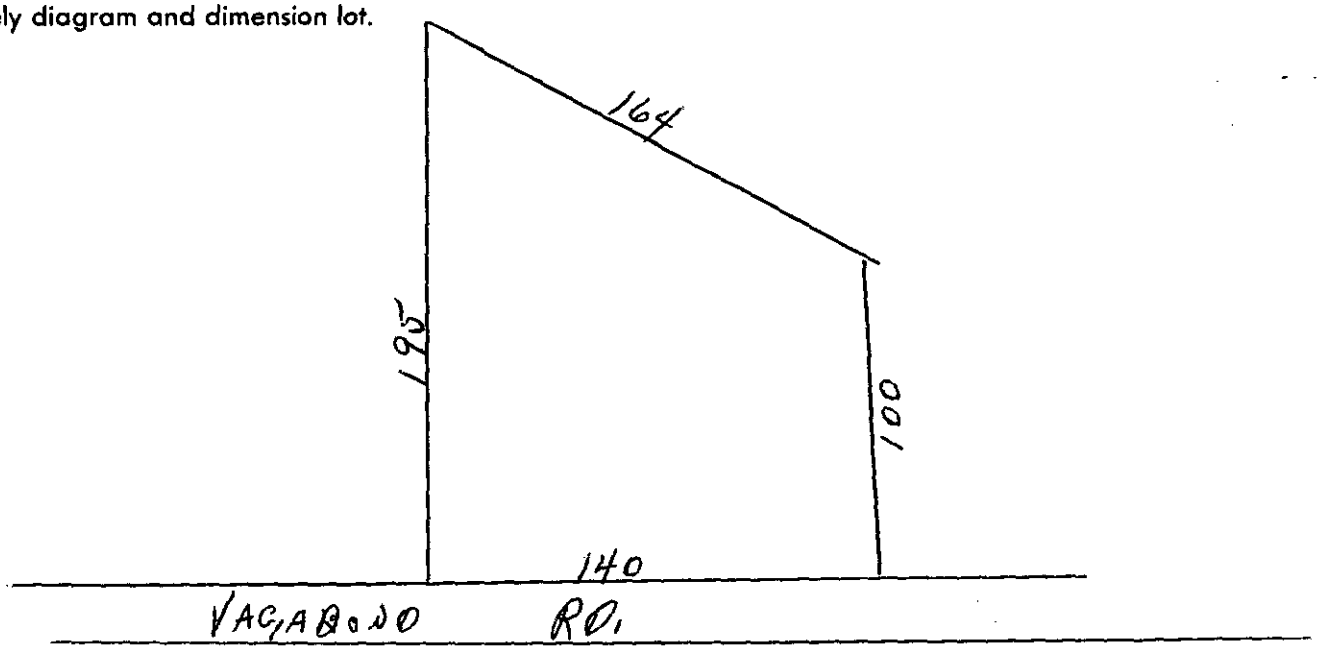
⑦ NAME: Bill (FIRST) B. (MIDDLE) Deck Jr. (LAST)

⑧ MAILING ADDRESS: % Haney Realty Co. P.O.Box 25311 Charlotte, N.C. 28229

⑨ CITY: Charlotte, N. C. ⑩ STATE: N. C. ⑪ ZIP: 28229

⑫ PHONE: (WORK) 536-2100 (HOME) _____

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: Bill B Deck Jr.

Date: 5-11-85

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