

22904 TORRENCE CHAPEL RD

00155111

5/25/2007

duponbj

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

Fole
4927A

Mecklenburg County
Health Department

March 13, 1991

Ms. Marge Drez
c/o Lake Properties, Ltd
Route #2, 19700 Hwy 73 West
Davidson, N.C. 28036

Dear Ms.Drez:

At your request, an investigation was made of the septic tank system and a well water sample was collected on the property located at 22904 Torrence Chapel Rd, Charlotte, North Carolina, on March 5, 1991.

At the time of the investigation there was no effluent apparent on the surface of the ground.

The laboratory analysis of the well water sample was reported to be negative for coliform bacteria.

If you have any questions concerning this matter, please contact me at 376-4603 between 4:00-5:00 p.m.

Sincerely,

Tim Whittaker, R.S.

Timothy Whittaker, R.S.
Individual Water and Wastewater Systems

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 4927A DATE: 5/16/89

T: 001-161-01 ☐ L ☑ CRT

SERIAL № 11903

Name of Owner Hogan, Bobby Juris.:

Address of Property 22904 Torrence Chapel Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 540'

Number of Lines 9 @ 60'

Cover Depth

Water Supply Source Well

Distance to Water Source Not in ≥ 50 Minimum

Excavation Inspected 5/16/89

Tank(s) Inspected 5/16/89

Wash Line Inspected

High Water Alarm Inspected 5/16/89

PLOT

Design: 1988 1500 ST 1000DT, PI Mod 1620SFT, 12"S Trail CTR# 84

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: Per Approved Plan on file

Judy J. Kuss R.S. 5/16/89
Environmentalist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

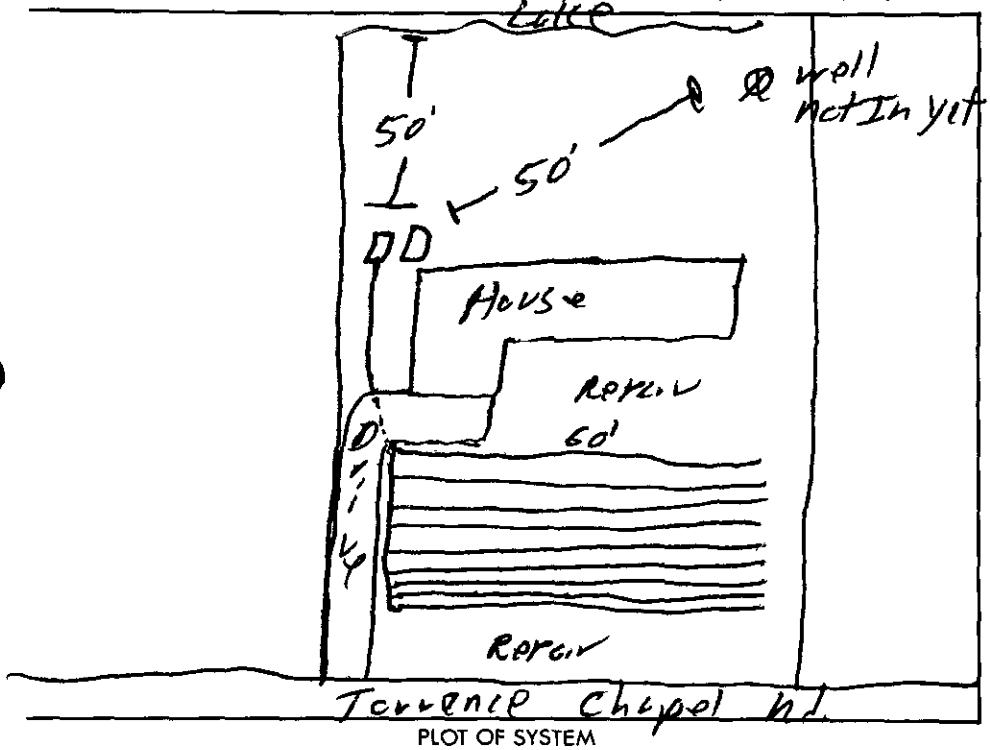
MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 4927-A DATE: 5-10-89

TC: 001-161-01 ☐ L

SERIAL Nº 12677

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 10-24-88. All work shall be completed on or before 6-10-89, 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 Department of Environmental Health 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 1000 gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length ~~525~~ 540 feet

Number of Lines 9

Depth of Stone 12 inches

Distance from House 15 feet

Distance from Property Line 10 feet

Distance from Well >50' feet

NAME OF OWNER Bobby Hogan

LOCATION OF PROPERTY 12904 Terrence Chapel Rd.

Comments: Nine Trenches 60' X 3' X 12" Stone, pressure manifold LPP pipe in 3' wide trench, Ball gate valve on each line, Trenches shall be placed on exact 9' centers

Division or Section Head

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

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

APPLICATION FOR AN IMPROVEMENT PERMIT

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: 4927A
TC: _____
SERIAL: № 17143
☒ L ☐ CRT

JOB LOCATION

① ADDRESS: [redacted] 22904 (STREET NO.) TORRENCE CHAPEL Rd. (STREET) ② FILE: _____
③ JURISDICTION: _____ ④ TAX PARCEL NO.: 001-161-01
⑤ SUBDIVISION: _____ ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: BOBBY (FIRST) RAY (MIDDLE) HOGAN (LAST)
⑨ MAILING ADDRESS: RT 1, BOX 637
⑩ CITY: DAVIDSON ⑪ STATE: N.C ⑫ ZIP: 28036
⑬ PHONE: (WORK) 597-7710 ⑭ (HOME) 892-4094

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 ㉕ Type? _____
㉓ Maximum occupancy? 4 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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Bobby R. Hogan
Date: 10/24/88

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. Lift Station required for system

Carla W. Johnson 11/14/88
Environmentalist Date

R. [illegible], RS 11/15/88
Director or Authorized Section Head Date

*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 10/21/88

Name/Company Bobby Hogan

Sanitation _____

Vector Control ✓

O.P.W.D. _____

Service: Insp/Inst
#4937A

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
OCT 24 1988

Fee: $ 15.00

Completed by

Collected by

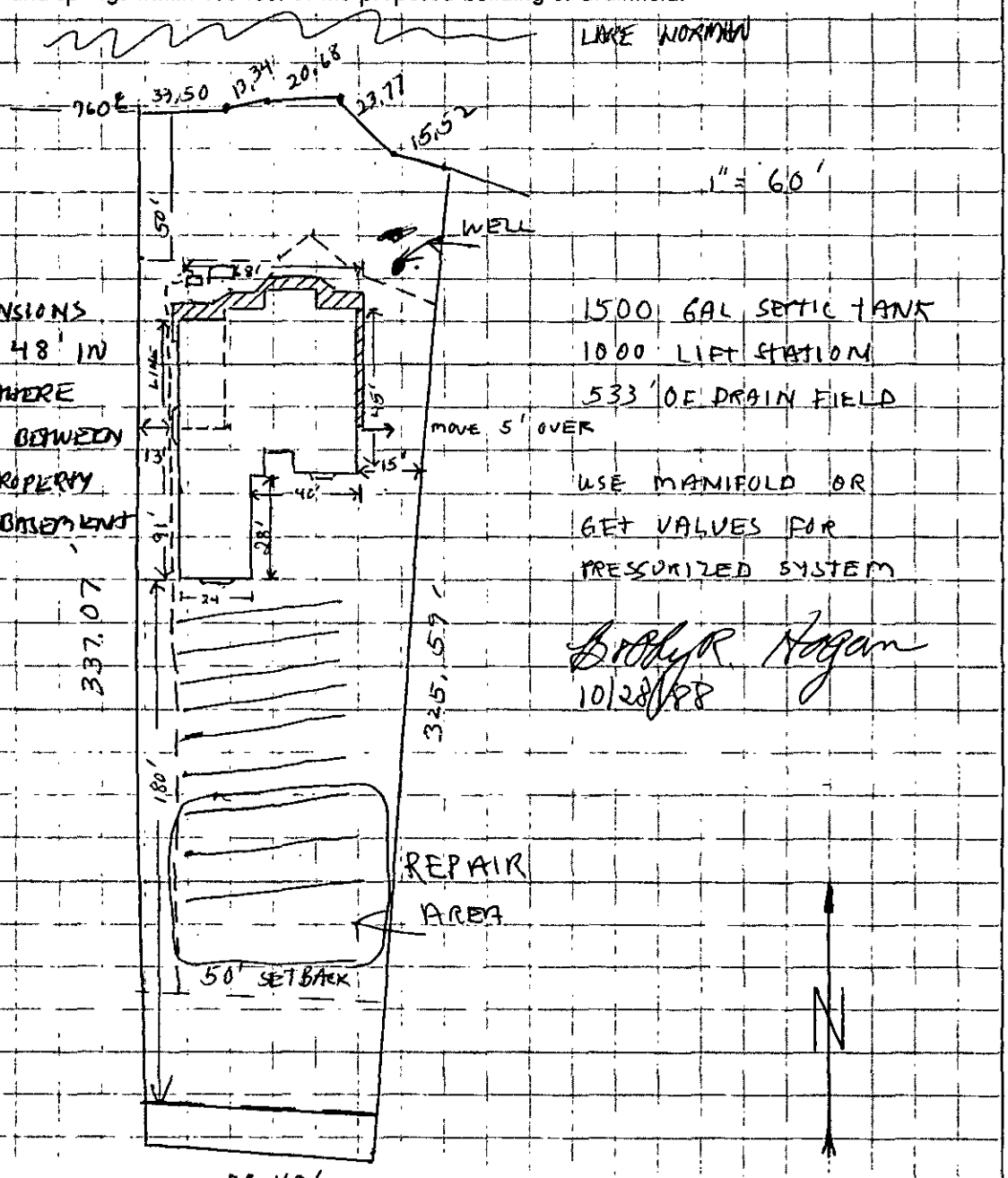
PROPOSED PLOT PLAN

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

FILE: 4927A

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.



Signed: Bobby R. Hogan

Date: 10/24/88

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

DATE 10-24-88

FROM: COUNTY ENGINEERING DEPARTMENT

EHD FILE _____ JURISDICTION CODE Coin

PARCEL NUMBER 001-161-01 pc

ASSIGNED ADDRESS 22904 Torrence Chapel Rd

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

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: Rwl

OPWEAR 06-88

NEW ADDRESS / /*

FORM 100

Mecklenburg County
Health Department

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

September 6th, 1988

H. Edward Knox
22821 Torrence Chapel Road
Davidson, NC 28036

RE: Property located at Torrence Chapel Road 7
FILE: 4927A
PARCEL: 00116101 PO

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 15582) 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, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure

Environmental Health Division
1200 Blythe Boulevard • Charlotte, North Carolina 28208 • (704) 376-4603

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 15582

File: 4927-A Action 1

Parcel: PD 001-161-017 ☐ PC

Location: Torrence Chapel Road

Subdivision:

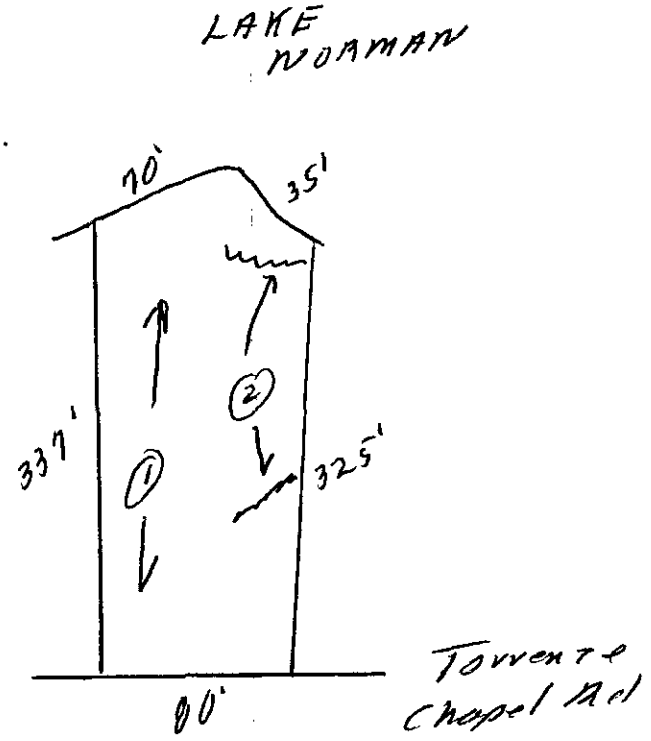
Lot: 7 Block: Acres: Approx .68

Owner: H. Edward Knox
Address: 22821 Torrence Chapel Road
Davidson, N. C. 28036

Comments: _____

Described by: William A. Marlin

Date: 9-6-88



***** 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) Complex Slopes	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 Blocky	S PS U —	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U 36" To water	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 36"+	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 36"	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-Lilly	Complex Slopes				
Area Classification	S (PS) U	S PS (U)	S PS U	S PS U	S PS U	S PS U

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 9 4827A

TC:

☐ PC ☐ REPT

AUG 26 1988

Joe Peek
#1850

JOB LOCATION

① ADDRESS: 22821 TORRENCE CHAPEL RD.

② SUBDIVISION: KNOX LANDING ③ LOT: 7 ④ BLOCK: 1

⑤ PARCEL REFERENCE: BOOK NO.: 201 PAGE NO.: 161 PARCEL NO.: 07

⑥ DEED REFERENCE: BOOK NO.: PAGE NO.:

OWNER

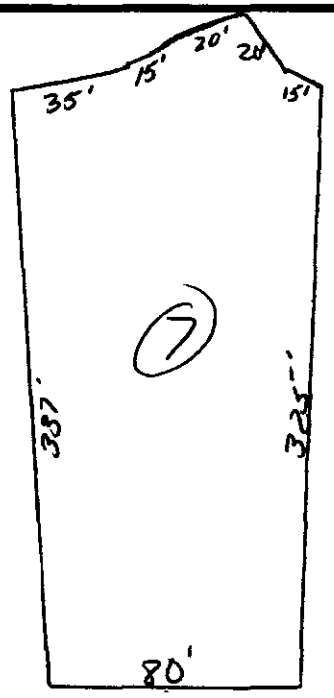
⑦ NAME: H. (FIRST) EDWARD (MIDDLE) KNOX (LAST)

⑧ MAILING ADDRESS: 22821 TORRENCE CHAPEL RD.

⑨ CITY: DAVIDSON ⑩ STATE: N.C. ⑪ ZIP: 28036

⑫ PHONE: (WORK) 372-1360 (HOME) 892-1578

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: H. Edward Knox

Date: 8/26/88

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

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