

3815 MINTWOOD DR

19503159

7/13/2007

duponbj

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

400

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 7839-A DATE: 11-17-92

TC: 195-031-24 ☒ L ☒ CRT

SERIAL № 15569

Name of Owner IVAN GAY Juris.:

Address of Property 3815 MINTWOOD DR

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400

Number of Lines 3 @ 133

Cover Depth 1-2-3'

Water Supply Source well

Distance to Water Source 100' +

Excavation Inspected 11-17-92

Tank(s) Inspected 11-17-92

Wash Line Inspected —

High Water Alarm Inspected —

PLOT

Design: 1992 1500ST CON 1200SFT 12G CECIC CTR# 113

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: TYPE II

Environmentalist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

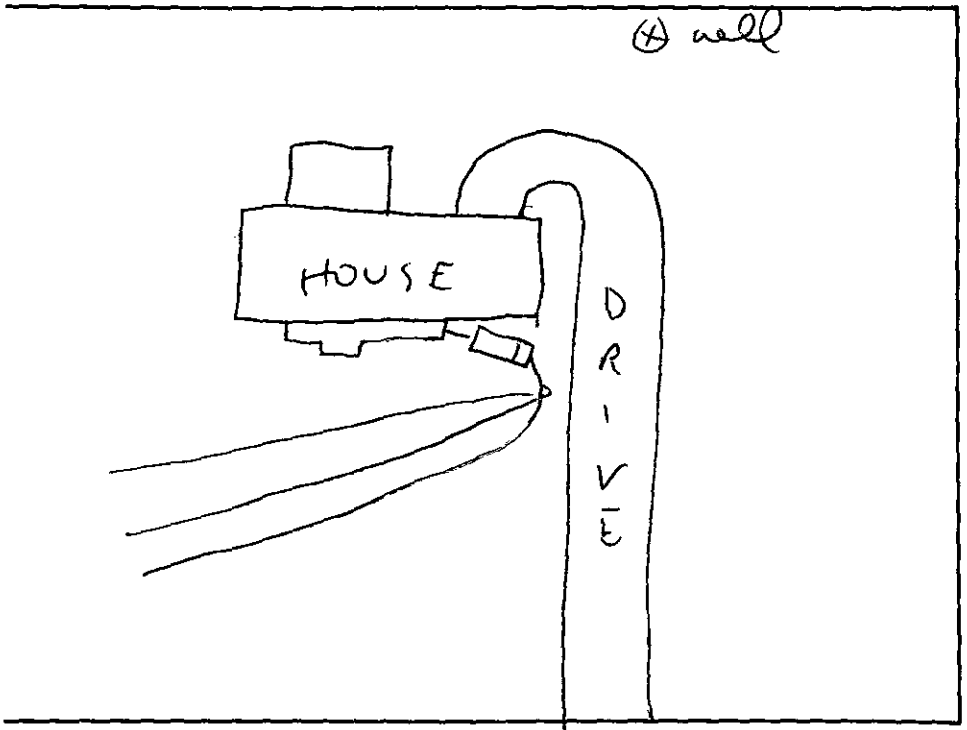
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 7039-A DATE: 11-16-92

TC: P0195-031-24

SERIAL Nº 13503

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 12-09-91. All work shall be completed on or before 12-16-92, 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 PLC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 400 feet

Number of Lines 3 x 133

Depth of Stone 12" inches

Distance from House 5'+ feet

Distance from Property Line 10'+ feet

Distance from Well 50'+ feet

NAME OF OWNER IVAN GAY

LOCATION OF PROPERTY 3815 MINTWOOD DR

Comments: 3 lines @ 133' x 12" rock

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 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

SS 400L X PC X (7839A) 12/09/91 CK# 1135 $200.00

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

CRT

P0001

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

(704)336-5102

PERSON FILING APPLICATION:
NAME: B. B. Hines (last) (first) (mi)
ADDRESS: 8100 Bartlett Rd PHONE: (__) _____
*CITY: Mint Hill STATE: N.C. ZIPCODE: 28227

Date: 12/9/91

PROPERTY OWNER:
NAME: Ivan + Gayle Gay (last) (first) (mi)
ADDRESS: 3801 Mintwood Dr. PHONE: (__) _____
CITY: Charlotte STATE: N.C. ZIPCODE: 28227

PROPERTY INFORMATION
(FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: P0195-031-24
STREET ADDRESS: 3815 Mintwood Drive Mint Hill, N.C.
ZONING: R-20

Township (check one):
[] 0 Mecklenburg County [] 2 Davidson [] 4 Pineville [] 6 Huntersville
[] 1 Charlotte [] 3 Cornelius [] 5 Matthews [X] 7 Mint Hill

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: LOT SIZE (in acres): 1 Acre +- 45,000 Sq. Ft.

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: 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)
[] Municipal (M) [] Other 'spring' (O)
[X] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[] Swimming Pool [] Jacuzzi [] Stable/Barn [] Workshop [X] 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: B. B. Hines Date: 12-09-91

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 permit is issued by this Department.

...This permit is not transferable.

...

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

Environmentalist 12/31/92 Date

Director or Authorized Section Head 2-6-92 Date

WWATER : 112991

* Mailing Address -
Charlotte N.C. 28227

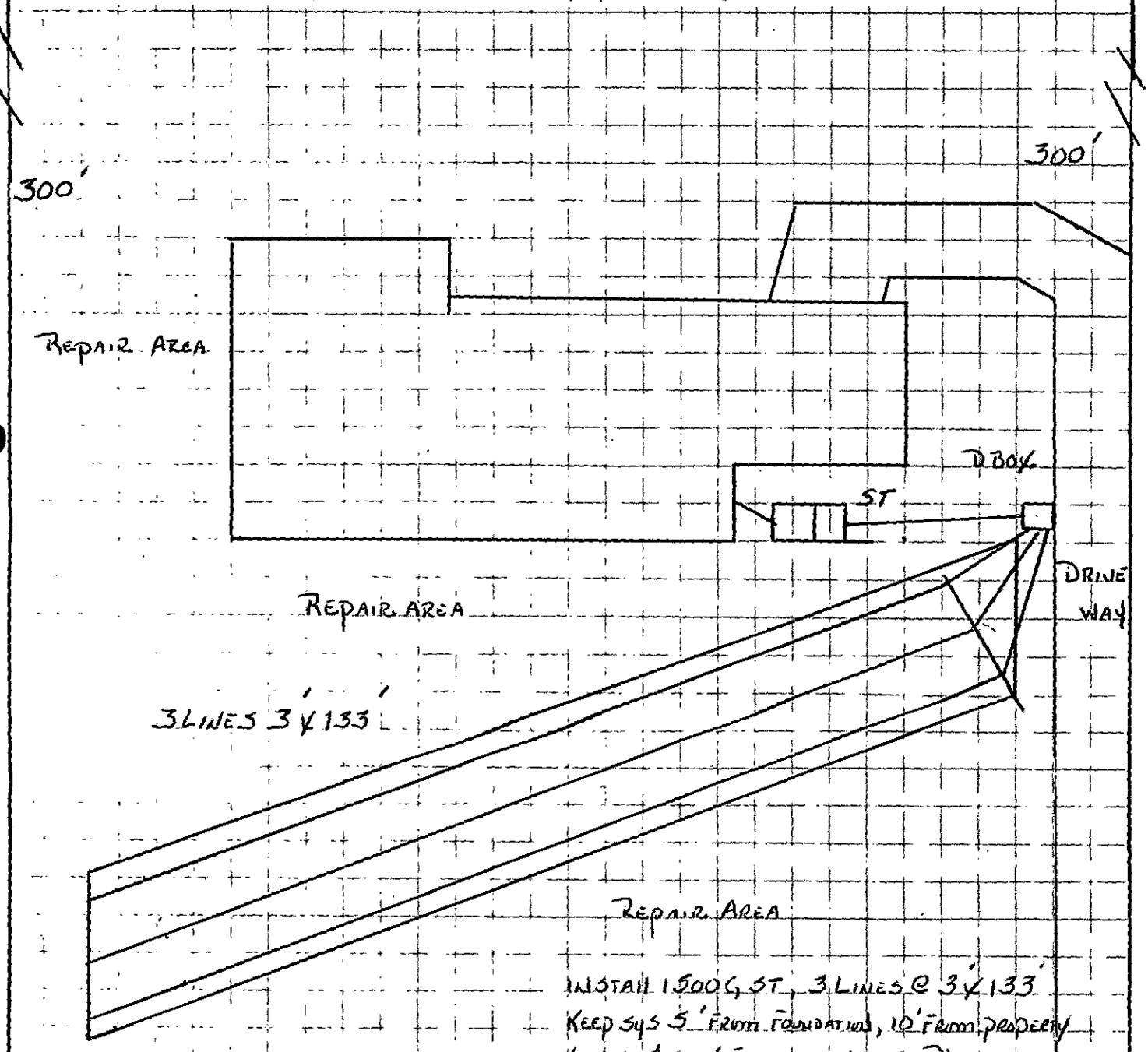
PROPOSED PLOT PLAN

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

FILE: 7839 A

TC: 19503104

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.



INSTALL 1500 G ST., 3 LINES @ 3' X 133'
KEEP SYS 5' FROM FOUNDATION, 10' FROM PROPERTY
LINES & 100' FROM WELL SITE. PLACE SEPTIC TANK
150' SHALLOW (may Back fill over TANK) TO GAIN GRAVITY.

1/4" = 5' FEET

APPROVAL DATE 10/20/91

Billy B. Hines 1/4/92
Bessie C. Hines 1/4/92

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy

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

DATE 12-9-91

FROM: COUNTY ENGINEERING DEPARTMENT

EHD FILE _____ JURISDICTION CODE MINT

PARCEL NUMBER # 195-031-24 PO

ASSIGNED ADDRESS 3815 MINTWOOD DR.

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: S.F. HOUSE

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: B. McComas

OPWEAR 06-88

NEW ADDRESS / X /*

FORM 100

Mecklenburg County
Health Department

November 4th, 1991

Ivan and Gayle B. Gay
3801 Mintwood Drive
Charlotte, NC 28227

RE: Property located at Mintwood Drive
FILE: 78394
PARCEL: 195-031-24PO

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 12332) 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 there are any questions concerning this matter, do not hesitate to contact me.

Sincerely,

Gene Vaughan, R.S., Supervisor
Individual Water and Wastewater Systems

Enclosure

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

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 12332

File: 7639A Action 1

Parcel: PO 195-031-24 ☑ PC

Location: Mintwood Dr.

Subdivision:

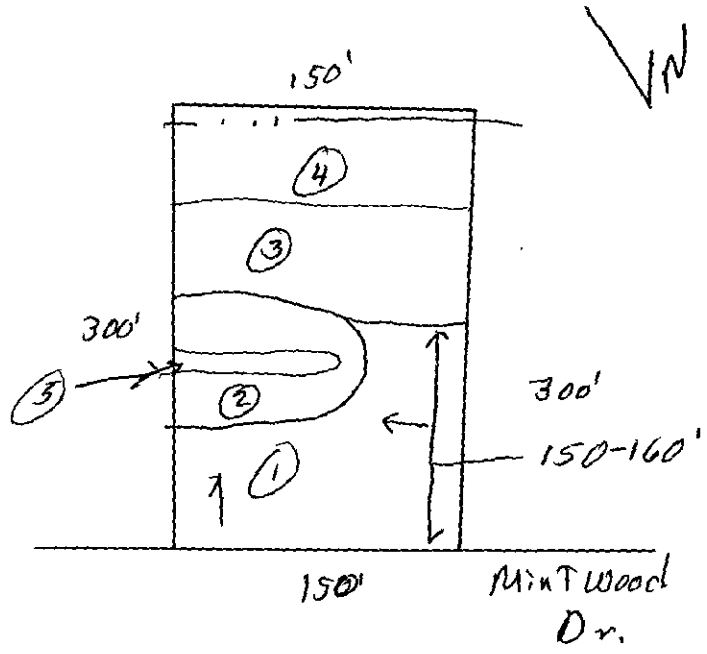
Lot: Block: Acres:

Owner: Dwan and Gayle Guy
Address: 3801 Mintwood Dr.
Charlotte, N.C. 28224

Comments: 100% Repair, may need lift pump
Area #2 would need .25gal/sq.Ft. /day loading rate

Described by: William R. Marlin

Date: 11-1-91



*** 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 2-6%	(S) PS U 2-6%	(S) PS U 2-6%	S PS (U) Depressions Ditches	S PS (U) Depression	S PS U
Texture	S (PS) U slightly expansive clay	S (PS) U slightly Expansive clay	S PS (U) Expansive Clay	S PS U	S PS U	S PS U
Structure	S (PS) U sub2 Block Hy	S (PS) U L Block Hy	S (PS) U L sub Block Hy	S PS U	S PS U	S PS U
Drainage	(S) PS U 748" To water	S (PS) U 736" To water	S (PS) U 736" To water	S PS U	S PS U	S PS U
Depth	(S) PS U 748"	S (PS) U 40"+	S (PS) U 36"H	S PS U	S PS U	S PS U
Restrictive Horizons	(S) PS U 748"	S (PS) U 40"+	S (PS) U 736"	S PS U	S PS U	S PS U
Available Space	S (PS) U limited	S PS (U) Restricted	S PS (U) Restricted	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U see note	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	IIe Cecil L.Ue	IIe Appling L.Ue	Vance-L.Ue	Depression/ Ditches	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

Pd. 50.00
CK # 4987
10-30-91
TVR

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

(OFFICE USE ONLY)

FILE: 7839 A

TC: 195-031-24 PO

☒ PC ☐ REPT

JOB LOCATION

① ADDRESS: Mintwood Drive

② SUBDIVISION: _____ ③ LOT: _____ ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: PO 195 PAGE NO.: 031 PARCEL NO.: 24

⑥ DEED REFERENCE: BOOK NO.: 4111 PAGE NO.: 719

OWNER

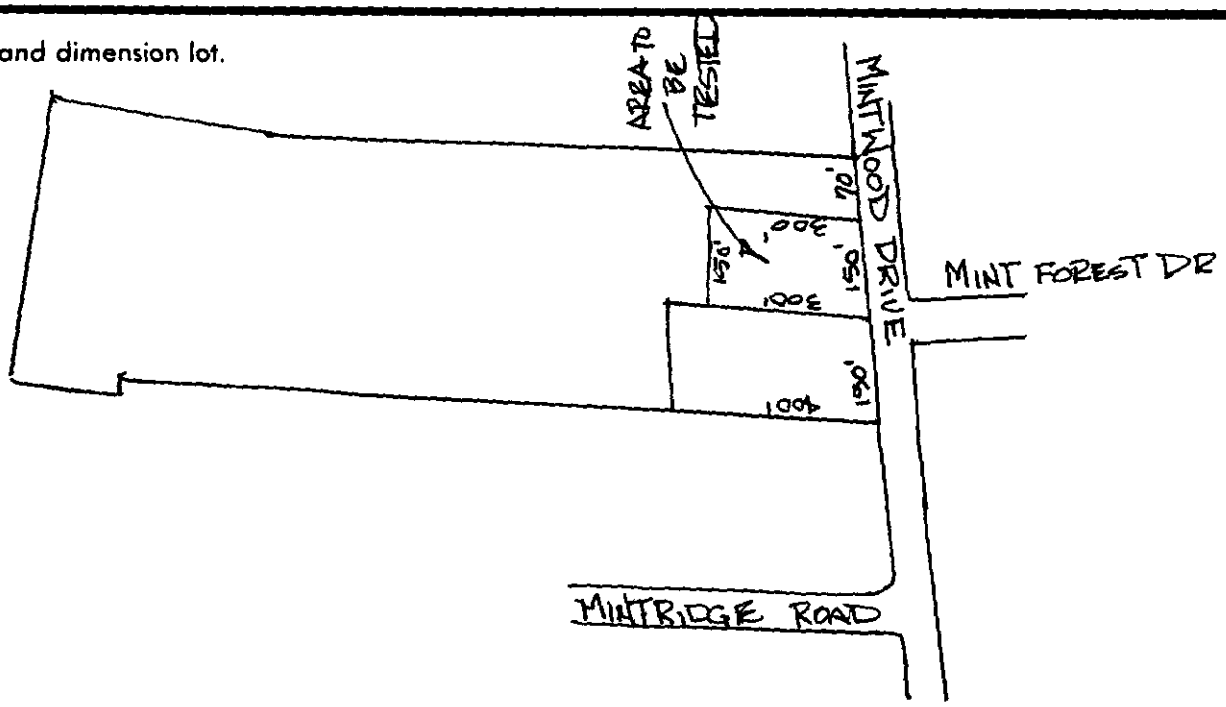
⑦ NAME: Ivan and Gayle (FIRST) B. (MIDDLE) Gay (LAST)

⑧ MAILING ADDRESS: 3801 Mintwood Drive

⑨ CITY: Charlotte ⑩ STATE: NC ⑪ ZIP: 28227

⑫ PHONE: (WORK) 704-568-9967 (HOME) 704-545-4291

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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Gayle Gay

Date: 10-28, 1991

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

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER'S COPY

S.S.

Paid
$200.00
12/10/91

UPDATE COMPLETE

Applicant HINES B. B Appl.Date 12/09/91 Updated 12/10/91
Mail Addr 8100 BARLETT ROAD Phone -
City MINT HILL State NC Zipcode 28227
Prop Ownr HINES B. B
Mail Addr 8100 BARLETT ROAD Phone -
City MINT HILL State NC Zipcode 28227 Township 7
Tax Map No. 19503124 Road 3815 MINTWOOD DRIVE Zoning
Sub/Mobil Sec Lot No. Lot Size 1AC
Type App N Site Y or Tract Type Bldg H System Classif NOT REQUIRED
Resident. Specif: No. Bedrooms 03 No. Occupants 3 Undgrnd. Stor. (Y/N)
Commercial/Industrial/Other Specifications:
Type No. Empl. No. Empl. per Shift
Industrial or Mfg. Wastes (Y/N) Underground Stor. Tank (Y/N)
Prop. Water Sup. P Proposed Sewage N Construct. Status P Sites
Planned Future Additions (Y/N) Fee 0000.00 EHS Assigned 17035
Directions:

Date Appl. Recd. 12/09/91 Date Insp. Insp. Status
Date Letr. Sent Type Letr. Date Eval. Eval. Status
Date Perm. Date Cert.Iss. Disp.Code Followup
Denial Codes:
Repaired (Y/N) Rep. Date Perm. No. 7839A Operat. Permit (Y/N)
12/10/91 10:10:14

JOE THOMPSON
COAL TOWER DR.
CHT. NC 28278

TAX LINE MAP BOOK 195 PAGE 03
MECKLENBURG COUNTY, NORTH CAROLINA
REVISED SCALE 1" = 400'

23

PG. 06

PG. 04

PG. 02

BK. 135

PART OF PARCEL 24

MINTRIDGE RD

SPEARMINT DR

MINT FOREST DR

CEDARMINT DR

MINTWOOD DR

MATTHEWS-MINT HILL RD.

NC 51

CHUCKWOOD DR

QUAIL RIDGE DR.

WELL

15' ESMT.

20' ESMT.