

4630 SPICEWOOD DR

13514110

6/21/2007

duponbj

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

FEE: N/A Repair
DATE: 11-1-96

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

1400

1 JCRT

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 #: 6789 A

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 135-141-10 & 135-141-11

STREET ADDRESS: 4630 Spicewood Drive

TYPE OF BUILDING (CHECK ONE):

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

SUBDIVISION OR MOBILE HOME PARK NAME: Spicewood Acres

LOT NUMBER: 25 & 24

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 3,800

NUMBER OF BEDROOMS: 3 | NUMBER OF OCCUPANTS: 3

CLOSING DATE _____

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
EXISTING WASTEWATER SYSTEMS ✓ YES ___ NO
EASTMENTS OR RIGHT-OF-WAYS ___ YES ___ NO
WELL, SPRINGS OR WATERLINES ✓ YES ___ NO
DESIGNATED WETLANDS ___ YES ___ NO

PROPERTY OWNER:

NAME: Winchester, Thomas P., Jr.
(LAST) (FIRST) (MI)

ADDRESS: 4630 Spicewood Dr.

CITY: Charlotte STATE: NC ZIP: 28209

DAYTIME PHONE: (704) 545-9614

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME:
(LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) -

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 9-6-90

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: Thomas P. Winchester, Jr. DATE: 11-1-96

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

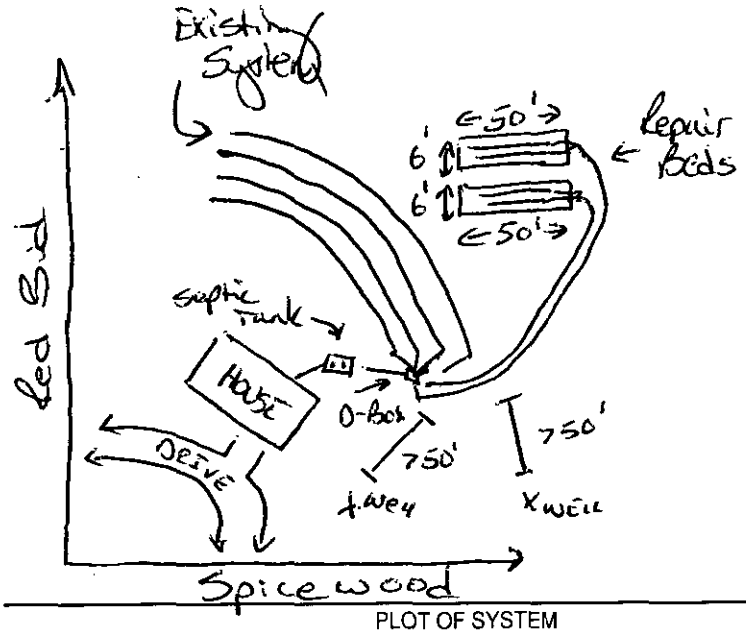
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 6789 A DATE: 11-13-96

TC: 135-141-10, 11 ☐X

SERIAL Nº 16938

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 11-1-96. All work shall be completed on or before 11-13-96, 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 existing gallons

Liquid Capacity of Dosing Tank N/A gallons

Tank Construction N/A

Trench Depth 24"-30"

Absorption and/or Nitrification Lines:

Trench Width 6 feet

Trench Walls Scored and Porous Yes

Total Line Length 200 feet

Number of Lines 4 in 2

Depth of Stone 24 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well >100 feet

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

NAME OF OWNER Thomas P Winchester, Jr.

LOCATION OF PROPERTY 4630 Spicewood Drive

Comments: Type II a repair 3 bedroom house
(2) 6'wx50'lx 24"-30"

Kenny B. Thompson, Jr. R.S.
Environmental Health Specialist

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 6789 A DATE: 11-13-96

TC: 135-141-10, 11 ☒ ☐ CRT

SERIAL № 16793

Name of Owner Thomas P. Winchester Juris.:

Address of Property 4630 Spicewood Drive

Inspection Data:

Tank Material N/A

Total Length of Drainfield 200'

Number of Lines 4 in 2 @ 50'

Cover Depth 6-12"

Water Supply Source Priv well

Distance to Water Source > 100'

Excavation Inspected 11-13

Tank(s) Inspected N/A

Wash Line Inspected N/A

High Water Alarm Inspected N/A

PLOT

Design 1996, CON, B, 246, cecil-like CTR# 218

0.6gpd

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 IIa repair 3 bedroom house
(2) 6'w x 50'L x 24" stone

Larry G. Thompson, Jr., R.S.
Environmental Health Specialist

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

Permit Number: 6789 A

Tax Number: 135-141-10, 11

The IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be NO grading, filling or disturbance of the soil in the area of the septic tank system or repair area.

CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a Building Permit. The Construction Authorization is NOT transferable. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.

Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

Basement	___ Yes	✓ No	___ Partial Basement
Type Primary Wastewater System Type (circle one): I (II) III IV V VI	✓ Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1
___ Long-term acceptance rate	___ Max gallons/day wastewater flow	___ Absorption Area (sq ft)	___ Trench spacing (min. on centers)
___ Serviced by private well	___ Gallon septic tank	___ Total trench length (ft)	___ Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
___ Bedrooms in residence	___ Gallon pump tank	___ Depth of stone	
Any surface waters present:	Type:	Minimum separation distance:	
Site modifications required:			
Additional Conditions:	Repair Typella 3 bedroom (2) 6'w x 50'L x 24" stone		
Repair Area System Type Type (circle one): I (II) III IV V VI	✓ Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1
600 Absorption Area (Sq ft) 300 Total Trench Length (Ft)	24" Depth of Stone Trench	N/A Trench spacing (min. on centers)	30" Maximum Trench Depth
For existing system, enter the year originally installed:	1990		

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 Sewage, 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 Improvement permit is transferable.

Larry B. Thompson, L.S. 11-13-96
DEHNR Authorized Agent — Date

Owner/Agent Signature — 11-13-96
Date

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

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

FEE: N/A **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: 11-13-96 **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: ~~10796~~ LT 6789 A PERMIT NO: LT ~~1579~~ 6789A
PARCEL NO: 135-141-10, 11

JOB LOCATION ADDRESS: 4630 Spicewood Drive
PROPERTY OWNER: Thomas L. Winchester
BUILDING CONTRACTOR: N/A
SUBDIVISION NAME: Spicewood Acres
AUTHORIZATION ISSUED BY: Larry B. Thompson Jr. R.S. DATE: 11-13-96
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 6789 A, AND THE ATTACHED SITE PLAN WITH SYSTEM DETAILS. CONSTRUCTION AND INSTALLATION MUST ALSO MEET ALL REQUIREMENTS SET FORTH IN THE RULES GOVERNING SANITARY SEWAGE COLLECTION, TREATMENT, AND DISPOSAL AND ANY OTHER APPLICABLE RULES AND LAWS.

2. AN INSTALLATION, CONSTRUCTION, ALTERATION AND/OR REPAIR APPROVAL MUST BE SECURED **PRIOR** TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH MECKLENBURG COUNTY HEALTH DEPARTMENT.

3. ANY ALTERATION IN SITE OR SOIL CONDITIONS (INCLUDING LOCATION OF STRUCTURES AND APPURTENANCES) OR MODIFICATION IN USE, DESIGN WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS AS SPECIFIED IN THE ASSOCIATED IMPROVEMENT PERMIT AND APPLICATION, MAY SUBJECT THIS AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: Repair to existing system installed 1990
3 Bedroom house
(2) 6'wx 50'L x 24" stone

OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITIONS OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

X Thomas L. Winchester 11-13-96
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

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: 6789A
TC: _____
SERIAL: № 19816 ☒ L ☒ CRT

JOB LOCATION

① ADDRESS: 4630 (STREET NO.) Spicewood (STREET) Dr. ② FILE: 6789A
③ JURISDICTION: _____ ④ TAX PARCEL NO.: 135-141-10+11
⑤ SUBDIVISION: Spicewood Acres ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: Thomas (FIRST) Page (MIDDLE) Winchester (LAST) Sr.
⑨ MAILING ADDRESS: 7233 Pine Lake Ln.
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28227
⑬ PHONE: (WORK) 334 7228 ⑭ (HOME) 545-9614

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? 3
㉕ Type? _____
㉓ Maximum occupancy? 3
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: Page Winchester Sr.
Date: 6-11-90

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.

Philip S. Walker, 6/14/90
Environmentalist — Date

_____, 6-14-90
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: 6/12/90

Name/Company: Omni Southeast, Inc

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Urgo - new
6789A

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

JUN 12 1990

ck# 3317

Fee: $ 200.00

$200.00

NOTICE:

A processing fee of $15.00 will be charged for all returned checks in accordance with N.C. General Statute 25-3-512.

Completed by

Collected by

Phila

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: 6789A
TC: _____
SERIAL: NP 19316 ☑ L ☐ CRT

JOB LOCATION

① ADDRESS: 4630 (STREET NO.) Spicewood (STREET) Dr. ② FILE: 6789A
③ JURISDICTION: _____ ④ TAX PARCEL NO.: 135 - 141 - 10+11
⑤ SUBDIVISION: Spicewood Acers ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: Thomas (FIRST) Page (MIDDLE) Winchester (LAST) Sr.
⑨ MAILING ADDRESS: 7233 Pine Lake Ln.
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28227
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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
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C ☐ Community well
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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: Page Winchester Sr.
Date: 6-11-90

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.

S. Walker, 6/14/90
Environmentalist Date

Director or Authorized Section Head, 6-14-90
Date

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

COPY

PRESENTED FOR REGISTRATION

90 JUN 14 AM 10:30

ANNE A. POWERS
REGISTER OF DEEDS
MECKLENBURG CO., N.C.

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

SEPTIC TANK DRAIN FIELD EASEMENT

This EASEMENT made this 14th day of June, 1990, by

GRANTOR

Thomas Page Winchester + wife, Bettie Gibson Winchester
4630 Spicewood Dr.
Charlotte, N.C. 28227

Enter name, address, and if appropriate, character of entity, e.g. corporation or partnership.

The designation Grantor as used herein shall include heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, has and by these presents does impose an easement as hereinafter described, to run with the land, upon that certain lot or parcel of land owned by Grantor and located in the ~~City of Charlotte~~, Morning Star Township, Mecklenburg County, North Carolina, and more particularly described as follows:

Mecklenburg Tax Parcel No. 135-141-10 135-141-11, as shown on a page of the County Tax Map attached hereto as Exhibit A.
Lot ~~25-Pt24~~ Block _____ of Spicewood Acres recorded in Map Book 11 Page 101 (if applicable)

See the plat attached hereto as Exhibit B for the legal description of Grantor's parcel on which the Septic Tank Drain Field Easement Area is located and of the Septic Tank Drain Field Easement Area, said parcel labeled thereon and hereinafter referred to as the "Easement Parcel."

Grantor hereby imposes said easement for the benefit of Grantor as the present owner and for the benefit of future owners of the following lot or parcel of land, situated in the ~~City of~~, Morning Star Township, Mecklenburg County, North Carolina, and more particularly described as follows:

Mecklenburg Tax Parcel No. 135-141-10 135-141-11, as shown on a page of the County Tax Map attached hereto as Exhibit A.
Lot ~~25-Pt24~~ Block _____ of Spicewood Acres recorded in Map Book 11 Page 101 (if applicable)

See the plat attached hereto as Exhibit B for the legal description of Grantor's parcel to be benefitted by the grant of the easement, said parcel labeled thereon and hereinafter referred to as the "Benefitted Parcel."

Said easement shall enable the owner of the Benefitted Parcel to place, if, as and when needed, such need to be determined by the owner of the Benefitted Parcel in his sole discretion, a septic tank and drain field or portions thereof, upon the Septic Tank Drain Field Easement Area on the Easement Parcel and to inspect, maintain, repair and replace the components of said septic tank and drain field at any time and from time to time. If the Easement Area also includes a connector strip for ingress and egress, the owner of the Benefitted Parcel shall have the right to use said connector strip for access as needed. This Easement shall automatically expire should the owner of the Benefitted Parcel ever hook up the structure located or to be located on the Benefitted Parcel to a public or community sanitary sewage system but shall otherwise be perpetual.

This instrument was prepared by: GRANTOR

Mail after recording to: _____

Grantor acknowledges that the Septic Tank Drain Field Easement Area cannot be used and will not be used for any of the following activities or in any of the following ways:

- Grading or filling
- Parking or driving heavy equipment in the area or in any other way compacting the soil in the Area
- Excavating soil from the Area
- Placing footings or foundations or engaging in any other construction activity in the Area
- Placing in-ground or above-ground swimming pools in the Area
- Placing irrigation systems in the Area
- Placing underground utility lines or cables in the Area
- Planting trees or gardens in the Area
- Removing any large trees in the Area unless dead or diseased
- Using the area for the burial of stumps, trash, or any other type of construction material
- Using the Area for gravesites
- Diverting the natural flow of water onto the Area by way of drainage ditches or diversion ditches or using the Area to receive water from any gutter or downspout discharges

IN WITNESS WHEREOF, the Grantor 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, the day and year first above written.

_____ Thomas Page Winchester (SEAL)
(Corporate Name)

BY: _____ Brilla Gibson Winchester (SEAL)

_____ President

_____ (SEAL)

ATTEST:

_____ _____ (SEAL)

_____ Secretary (Corporate Seal)

SEAL-STAMP

North Carolina, Mecklenburg County

I, a Notary Public of the County and State aforesaid, certify that Thomas Page Winchester & Brilla Gibson Winchester, Grantors, personally appeared before me this day and acknowleged the execution of the foregoing instrument. Witness my hand and official stamp or seal, this 14th day of June, 1990.

My Commission Expires: June 25, 1991 Nancy D. Foote
(Notary Public)

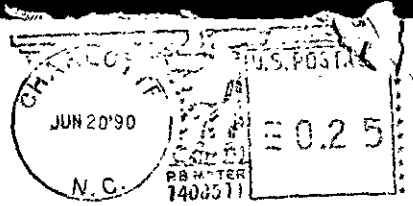
SEAL-STAMP

North Carolina, _____ County

I, a Notary Public of the County and State aforesaid, certify that _____ personally came before me this day and acknowleged that he is _____ Secretary of _____, a _____ corporation, and that by authority duly given and as the act of the corporation, the foregoing instrument was signed in its name by its _____ President, sealed with its corporate seal and attested by _____ as its _____ Secretary. Witness my hand and official stamp or seal, this _____ day of _____, 19____.

My Commission Expires: _____ _____
Notary Public

JOHNSTON, TAYLOR, ALLISON & HORD
ATTORNEYS AT LAW
POST OFFICE BOX 36469
CHARLOTTE, NORTH CAROLINA 28236



Mecklenburg County Health Department
Environmental Health Division
1200 Blythe Boulevard
Charlotte, NC 28203

Attention: On Premises Waste Disposal and Water Supply

JOHNSTON, TAYLOR, ALLISON & HORD
ATTORNEYS AT LAW
101 NORTH McDOWELL STREET, SUITE 100
CHARLOTTE, NORTH CAROLINA 28204
704-332-1181

H. MORRISON JOHNSTON
JOHN B. TAYLOR
JAMES W. ALLISON
ROBERT C. HORD, JR.
ROBERT L. BURCHETTE
STEELE B. WINDLE, III
PAUL A. KOHUT
JOHN A. MORRICE
STEVEN D. McCLINTOCK
GREG C. AHLUM
ANN M. NEILL
WILLIAM M. SATTERWHITE III
PATRICK E. KELLY

COUNSEL:
B. IRVIN BOYLE
LELIA M. ALEXANDER
F. THOMAS MILLER, JR.
1917-1985

MAILING ADDRESS
POST OFFICE BOX 36469
CHARLOTTE, N. C. 28236

FACSIMILE
704-376-1628

June 20, 1990

Mecklenburg County Health Department
Environmental Health Division
1200 Blythe Boulevard
Charlotte, NC 28203

Attention: On Premises Waste Disposal and Water Supply

Re: Septic Tank Drain Field Easement on
Mecklenburg Tax Parcels 135-141-10 and 135-141-11

Dear Sirs:

As a supplement to our June 14, 1990 letter to you regarding the above, we wanted to report to you formally that the Septic Tank Drain Field Easement was recorded on June 14, 1990 in the office of the Register of Deeds for Mecklenburg County, North Carolina where is now appears in Book 6293 at Page 21.

We trust that this satisfies your requirements. If anything else, however, is needed from us in this regard, please let us know.

Sincerely yours,

JOHNSTON, TAYLOR, ALLISON & HORD

Robert C. Hord, Jr.

RCHJr:jsc

Enclosure

cc: Mr. Henry P. Gibson, Jr.

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
JUN 25 19
ENVIRONMENTAL HEALTH
DIVISION

6789A
Res water
Not 10 3/11
New

File #'s
and File Spelled
on the

Ck 135-141-10:
1630 Spicewood Dr.
Meck
Page Winchester
135-144-11
6789A

Lock-up
File Nos.

JOHNSTON, TAYLOR, ALLISON & HORD
ATTORNEYS AT LAW
101 NORTH MCDOWELL STREET, SUITE 100
CHARLOTTE, NORTH CAROLINA 28204
704-332-1181

H. MORRISON JOHNSTON
JOHN B. TAYLOR
JAMES W. ALLISON
ROBERT C. HORD, JR.
ROBERT L. BURCHETTE
STEELE B. WINDLE, III
PAUL A. KOHUT
JOHN A. MORRICE
STEVEN D. MCCLINTOCK
GREG C. AHLUM
ANN M. NEILL
WILLIAM M. SATTERWHITE III
PATRICK E. KELLY

COUNSEL:
B. IRVIN BOYLE
LELIA M. ALEXANDER
F. THOMAS MILLER, JR.
1917-1985

MAILING ADDRESS
POST OFFICE BOX 36469
CHARLOTTE, N.C. 28236

FACSIMILE
704-376-1628

June 14, 1990

Mecklenburg County Health Department
Environmental Health Division
1200 Blythe Boulevard
Charlotte, NC 28203

Attention: On Premises Waste Disposal and Water Supply

Re: Septic Tank Drain Field Easement on
Mecklenburg Tax Parcels 135-141-10 and 135-141-11

Dear Sirs:

The undersigned licensed North Carolina attorney hereby certifies that the enclosed Septic Tank Drain Field Easement (the "Easement") is recorded in Book _____ at Page _____* in the Mecklenburg County Public Registry, that all parties who would be required to execute or consent to the Easement in order for it to be a valid and effective grant of easement rights have executed or consented to the execution and recordation of the Easement, and that there are no mortgages, deeds of trust, or other instruments of record affecting the status of title of the above-referenced parcel on which the Easement has been created, which if foreclosed or otherwise exercised, would result in the extinguishment of said Septic Tank Drain Field Easement.

Sincerely yours,

JOHNSTON, TAYLOR, ALLISON & HORD

Robert C. Hord, Jr.

RCHJr:jsc

Enclosure

*Book and page to be assigned by Register of Deeds following recording today. It will be provided to you as soon as possible.

Mecklenburg County
Health Department

June 7th, 1990

Thomas Page Winchester, Jr.
7233 Pine Lake Ln.
Charlotte, NC 28227

RE: Property located at Spicewood Lane
FILE: 6789A
PARCEL: 13514110-11

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 17972) 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,

Gene Vaughan, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 17972

File:

Action

Parcel: 6789A

☐ PC

~~13114110~~ 11
135-141-10, 11

Location:

Subdivision: Spicewood Lane

Lot: Block: Acres: Approx 1.0

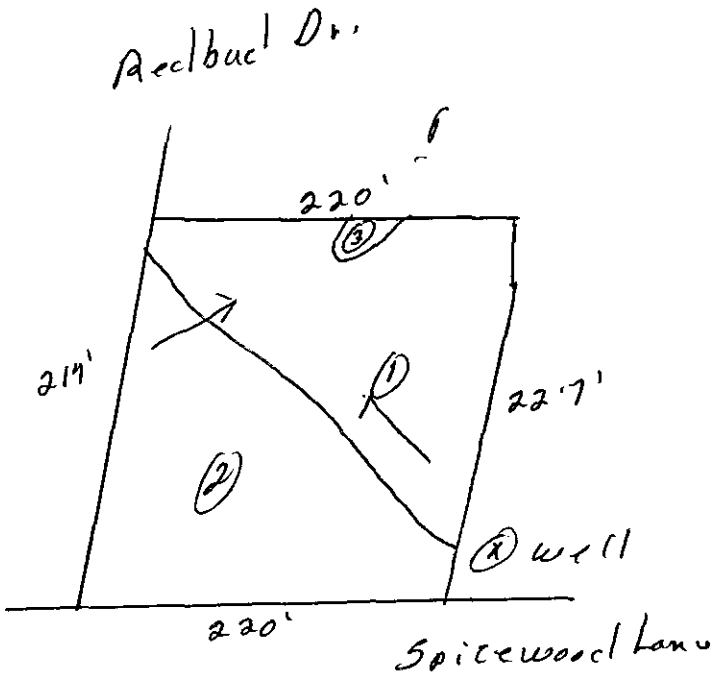
Owner:
Address:

Thomas Page Winchester, Jr.
7233 Pine Lake Ln.
Charlotte, NC 28227

Comments:
100% Repair

Described by: William R. Marlin

Date: 6-6-90



***** 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 2-10%	S PS (U) Depression	S PS U	S PS U	S PS U
Texture	S (PS) U Clay	S PS (U) 2-1 clay	S PS U —	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S (PS) U Blocky	S PS U —	S PS U	S PS U	S PS U
Drainage	S (PS) U 736" TO water	S (PS) U 736" TO water	S PS U —	S PS U	S PS U	S PS U
Depth	S (PS) U 36"+	S PS (U) 18-20"	S PS U —	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 736"	S (PS) U 736"	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	IV Cecil-Lilo	Enon-Like Expansive Clay	Depression			
Area Classification	S (PS) U	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

DATE 6/8/90

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION Meck

135-141-1041
PARCEL NUMBER

4630 Spicewood Dr
ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

N/A
PROJECT NAME (IF APPLICABLE)

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

1.	SUBDIVISION REGULATIONS	_____APPROVED	_____NOT APPROVED
2.	FLOODWAY REGULATIONS	_____APPROVED	_____NOT APPROVED
3.	EROSION CONTROL REGULATIONS	_____APPROVED	_____NOT APPROVED
4.	COMMERCIAL DRAINAGE PLAN	_____APPROVED	_____NOT APPROVED
5.	PUBLIC UTILITY EASEMENT	_____PRESENT	_____NOT PRESENT
6.	PROPERTY FRONTS ON THOROUGHFARE	_____YES	_____NO
7.	DRIVEWAY PERMIT REQUIRED	_____YES	_____NO

REMARKS: S.F. Home

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE WHEN PAYING PERMIT FEE. CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

7/7/88
ALL OTHER FORMS OBSOLETE

☐ NEW ADDRESS

SIGNED: [signature]

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 6789A

TC:

☐ PC ☐ REPT

Sell 6788A / for change dlf

JOB LOCATION

① ADDRESS: 4630 Spicewood Lane

② SUBDIVISION: Spicewood Acres ③ LOT: 25 & 24 ④ BLOCK:

⑤ PARCEL REFERENCE: BOOK NO.: 135 PAGE NO.: 141 PARCEL NO.: 10 & 11

⑥ DEED REFERENCE: BOOK NO.: 3638 PAGE NO.: 144 & 145

OWNER

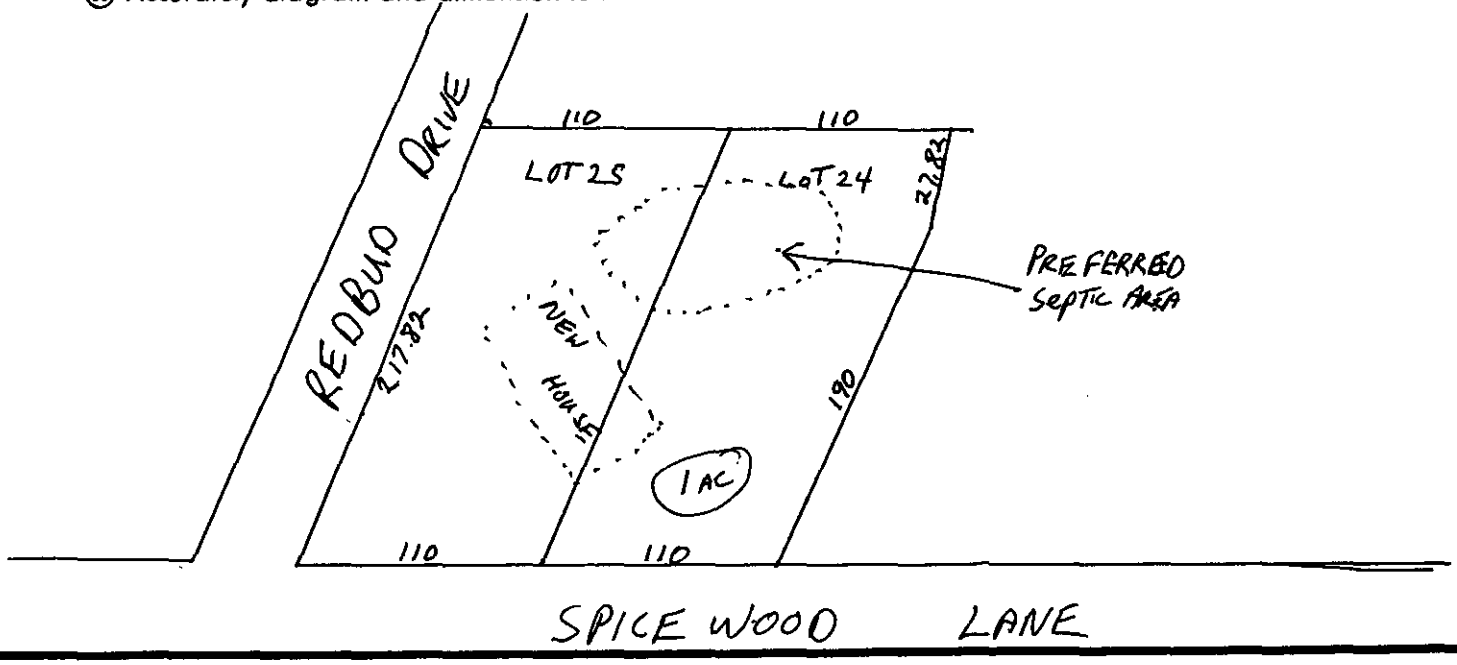
⑦ NAME: Thomas (FIRST) Page (MIDDLE) Winchester, Jr. (LAST)

⑧ MAILING ADDRESS: 7233 Pine Lake Lane

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

⑫ PHONE: (WORK) 545-9614 (HOME) 545-9614

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: T. Page Winchester Jr

Date: 5-26-90

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