

21318 NORMAN SHORES DR

00143136

1/3/2008

duponbj

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

J O H N D R E W C O N S T R U C T I O N
JOHN J & BARBARA E. DREW
21318 Norman Shores Drive
Davidson, NC 28036
Phone (704) 896-3313
FAX 896-7752
Pager 581-6641

FAX HEADER SHEET

SHEET 1 of 3 (including cover) Date JANUARY 20 1995
(page 2 was irrelevant and discarded-sb)

To SUSAN BATEMAN

FAX 336-6894

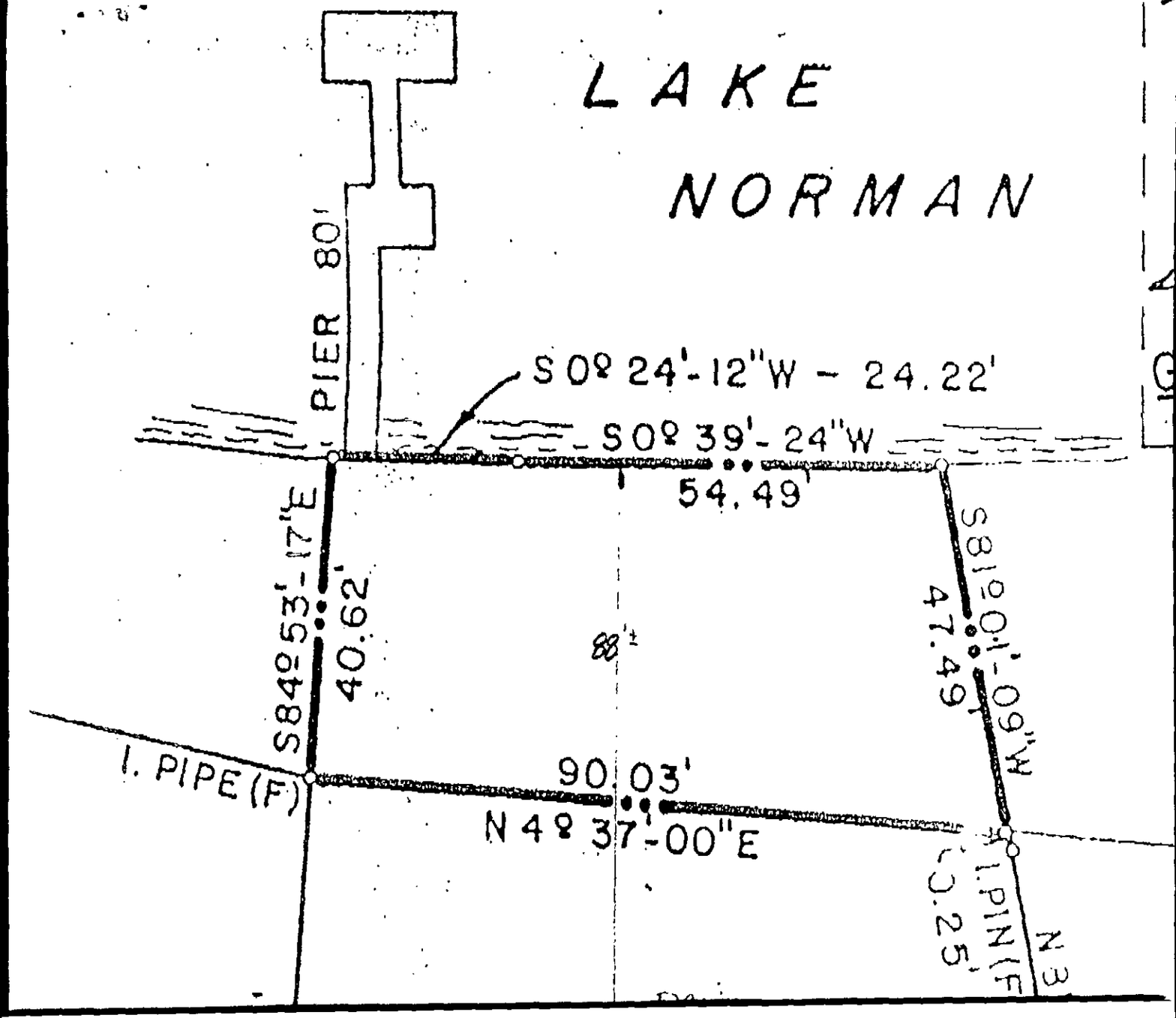
Comments FOLLOWING IS A Revised Proposed Plot Plan & Deck Sketch
Reference file 3410B
TC 001-432-36

The Garage Remains the same 2' from the rear of the house Approx 16' from Septic

The Deck foundation for the support beam is 8' from the house with a 3' overhang

The upper deck is 6' from the House overhang or 7'2 from the foundation leaving a minimum of 5' from the Septic

Please call (704) 896-3313 if you do not receive the correct number of pages or have any other questions with this transmission.


LAKE
NORMAN
PIER 80'
S 0° 24'-12"W - 24.22'
S 0° 39'-24"W
54.49'
S 84° 53'-17"E
40.62'
S 81° 01'-09"W
47.49'
88'±
I. PIPE (F)
90.03'
N 4° 37'-00"E
I. PIN (F)
C.C. 25'
N 3

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

3410 B

$50 1/9/95 Ck.# 0302 PAID

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: DREW (last) JOHN (first) J (mi)

ADDRESS: 21318 Norman Shores, Dr. PHONE: (704) 896-3313

CITY: DAVIDSON STATE: NC ZIPCODE: 28036

Date:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 001432-36

STREET ADDRESS: 21318 Norman Shores Dr.

DAVIDSON, NC 28036

ZONING:

PROPERTY OWNER:

NAME: SAME (last) (first) (mi)

ADDRESS: PHONE: (__) __

CITY: STATE: ZIPCODE:

SUBDIVISION OR MOBILE HOME PARK NAME: NORMAN SHORES Subd.

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

LOT NUMBER: 11 Block C LOT SIZE (in acres): 1/3

TYPE APPLICATION (check one):

- [ ] SOIL TEST - INDIVIDUAL LOT (O)
- [ ] 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)
- [X] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X) GARAGE & DECK
- [ ] 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: 4

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):
- [X] Community (C)
- [ ] Municipal (M)
- [ ] Private Well (P)
- [ ] Shared Well (S)
- [ ] Other 'spring' (O)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
- [ ] Swimming Pool
- [X] Garage
- [ ] Jacuzzi
- [ ] Storage Building
- [ ] Stable/Barn
- [X] Deck/Patio
- [ ] Workshop
- [ ] Bedrooms
- [ ] None
- [ ] 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: [signature] Date: 1/9/95

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.

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

...Revised deck plan approved. Garage approved. Does not appear to interfere with wastewater treatment & disposal system. Keep min 5' from any part of wastewater treatment & disposal system

[signature] 1-20-95
Environmentalist Date

[signature] 1-26-95
Director or Authorized Section Head Date

WATER : 122'91

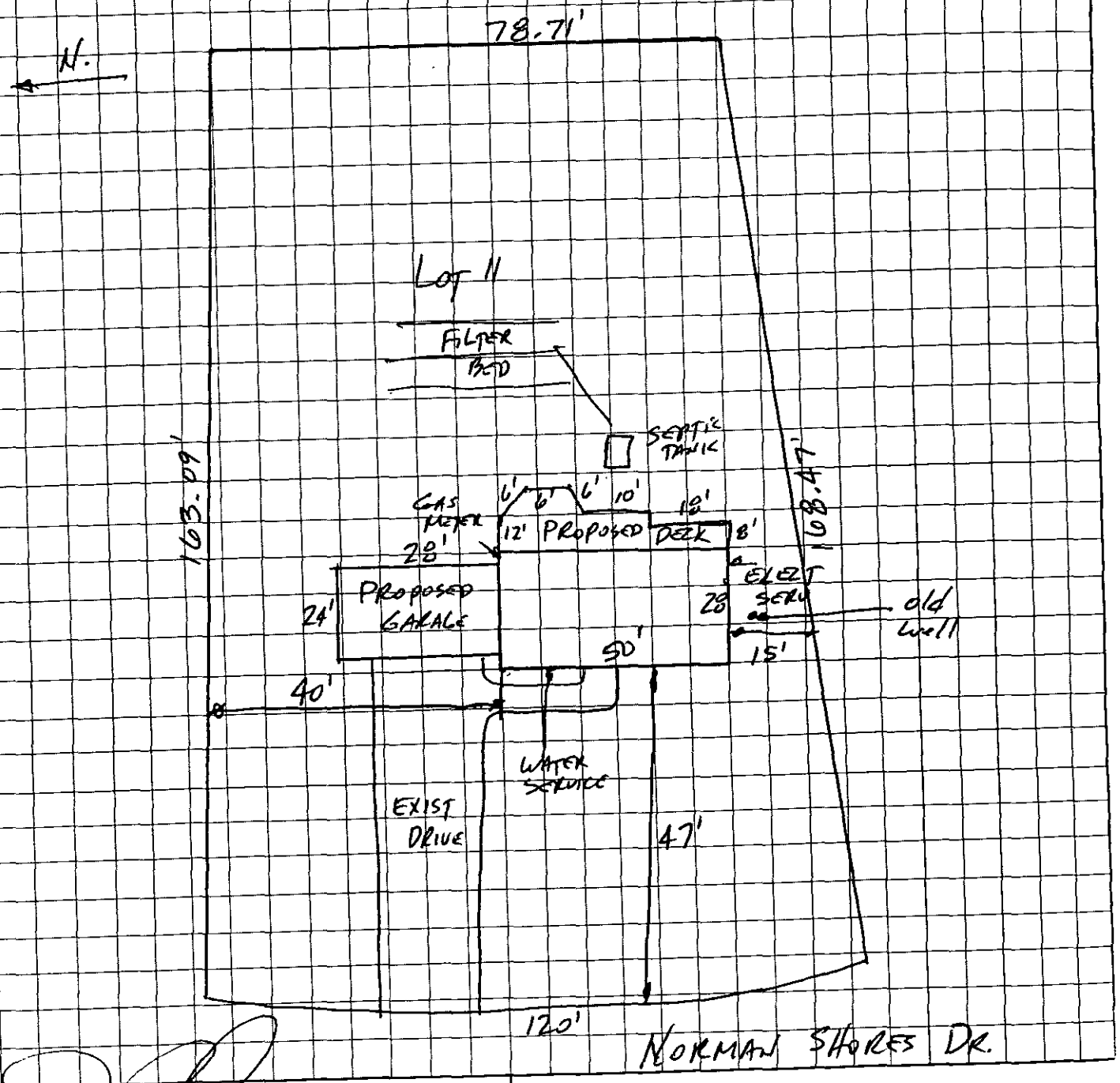
PROPOSED PLOT PLAN

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

FILE: 3410B

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.



OWNER/AGENT SIGNATURE _____

DATE 1/9/95

APPROVAL DATE _____

White - Health Department's Copy

Canary - E.H.S. Copy

Pink - Owner's Copy

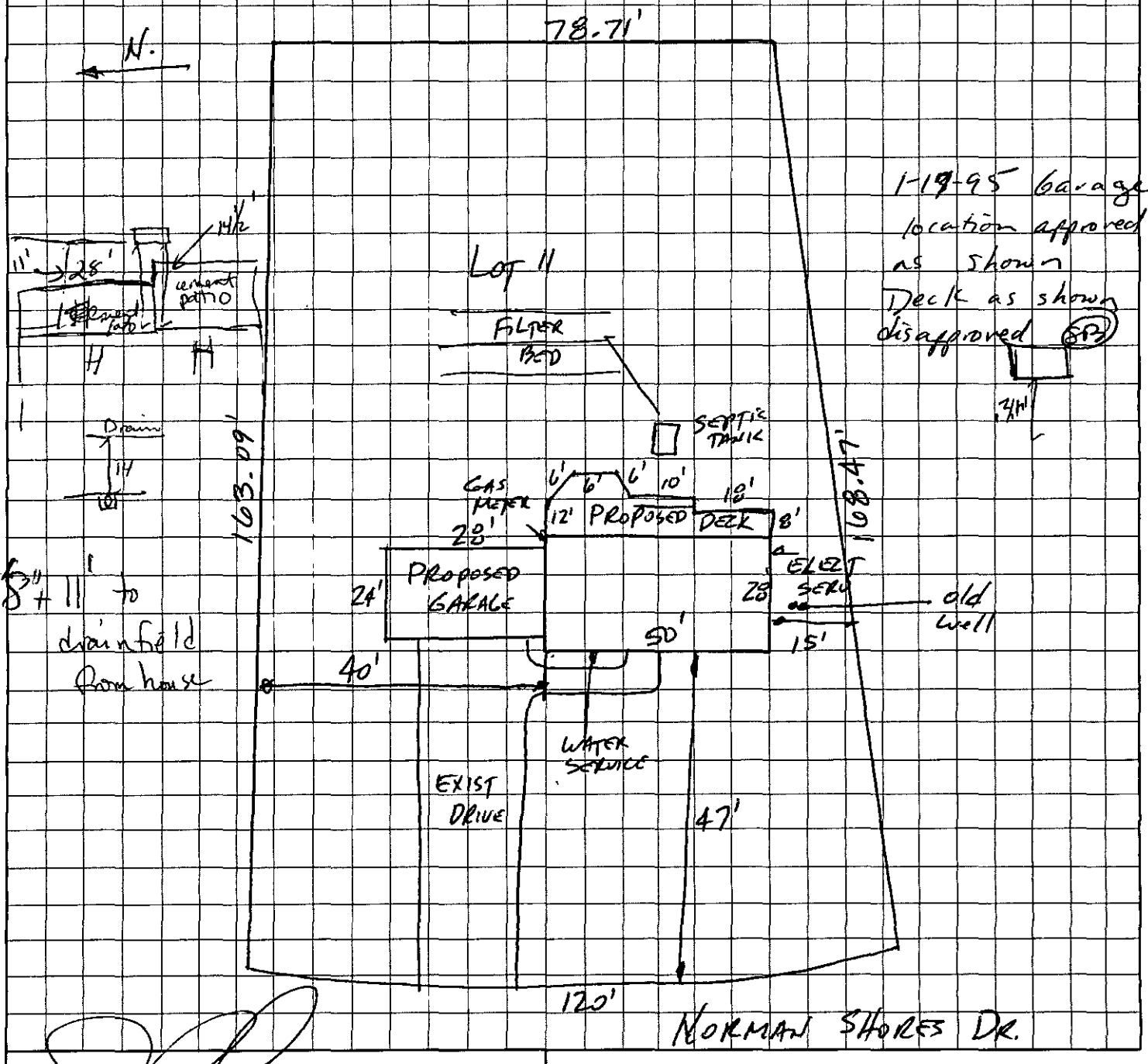
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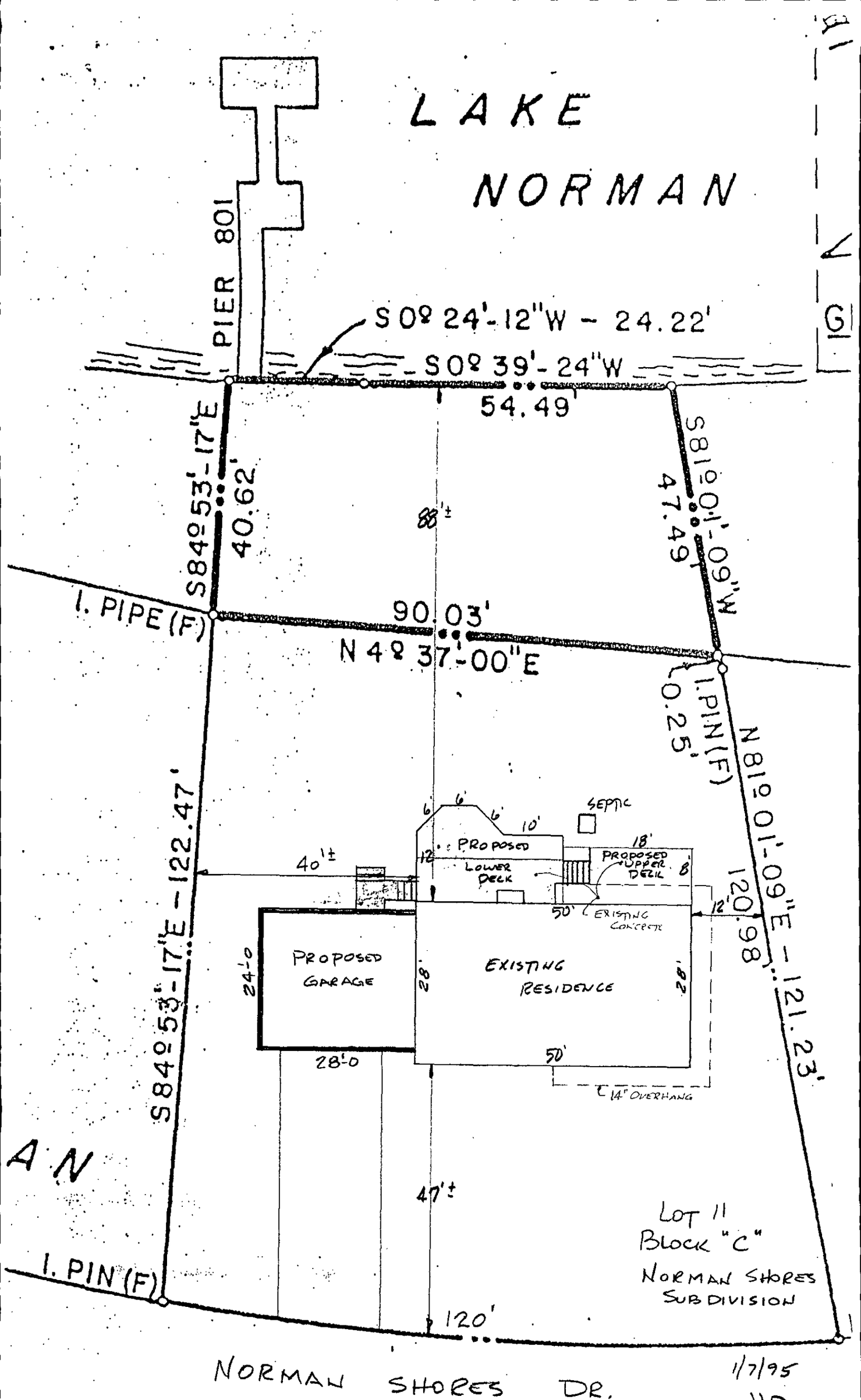


OWNER/AGENT SIGNATURE

DATE 1/9/95

APPROVAL DATE _____

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy


LAKE
NORMAN
PIER 801
S0° 24'-12"W - 24.22'
S0° 39'-24"W
54.49'
S84° 53'-17"E
40.62'
S81° 01'-09"W
47.49'
88'±
I. PIPE (F)
90.03'
N4° 37'-00"E
I. PIN (F)
0.25'
N81° 01'-09"E - 121.23'
120.98'
S84° 53'-17"E - 122.47'
6'
6'
6'
10'
SEPTIC
PROPOSED
LOWER DECK
18'
PROPOSED UPPER DECK
8'
12'
40'±
50'
EXISTING CONCRETE
12'
PROPOSED GARAGE
24'-0
28'
EXISTING RESIDENCE
28'
28'-0
50'
℄ 14" OVERHANG
47'±
120'
LOT 11
BLOCK "C"
NORMAN SHORES
SUBDIVISION
NORMAN SHORES DR.
1/7/95
JJO

CIRCLE A PLUMBING
2516 BELMEADE DR.
CHARLOTTE, NC 28214
392-3610

NO 481

JOB WORK ORDER

DATE ORDERED | ORDER TAKEN BY

CUST ORDER NO | PHONE | MECHANIC | HELPER

SOLD TO Ron Dunlap.
ADDRESS 2500 Belmeadow Dr
CITY Charlotte NC 28214

☐ DAY WORK
☒ CONTRACT
☐ EXTRA
STARTING DATE

JOB NAME AND LOCATION
Corrected working Machine drain
JOB PHONE

DESCRIPTION OF WORK

1½"	45°	.90	.90
1½"	4' PVC pipe	.68	2.72
1 2"	Cap.	1.60	1.60
			5 22
1 hr. labor			35.00

DATE COMPLETED

WORK ORDERED BY

☐ NO ONE AT JOB SITE
☐ TOTAL AMOUNT DUE ON COMPLETED JOB
☐ TOTAL BILLING WILL BE MAILED UPON COMPLETION OF JOB

TOTAL MATERIAL	5 22
TOTAL LABOR	35 00
TAX	31
TOTAL	40 53

ORIGINAL

Darrell Anson

DATE 1-18-95

HEREBY ACKNOWLEDGE THE SATISFACTORY COMPLETION OF THE ABOVE DESCRIBED WORK AND THAT ALL MECHANICAL AND OTHER LIENS FOR LABOR, MATERIALS AND EQUIPMENT FURNISHED IN CONNECTION WITH THIS CONTRACT HAVE BEEN PAID IN FULL.

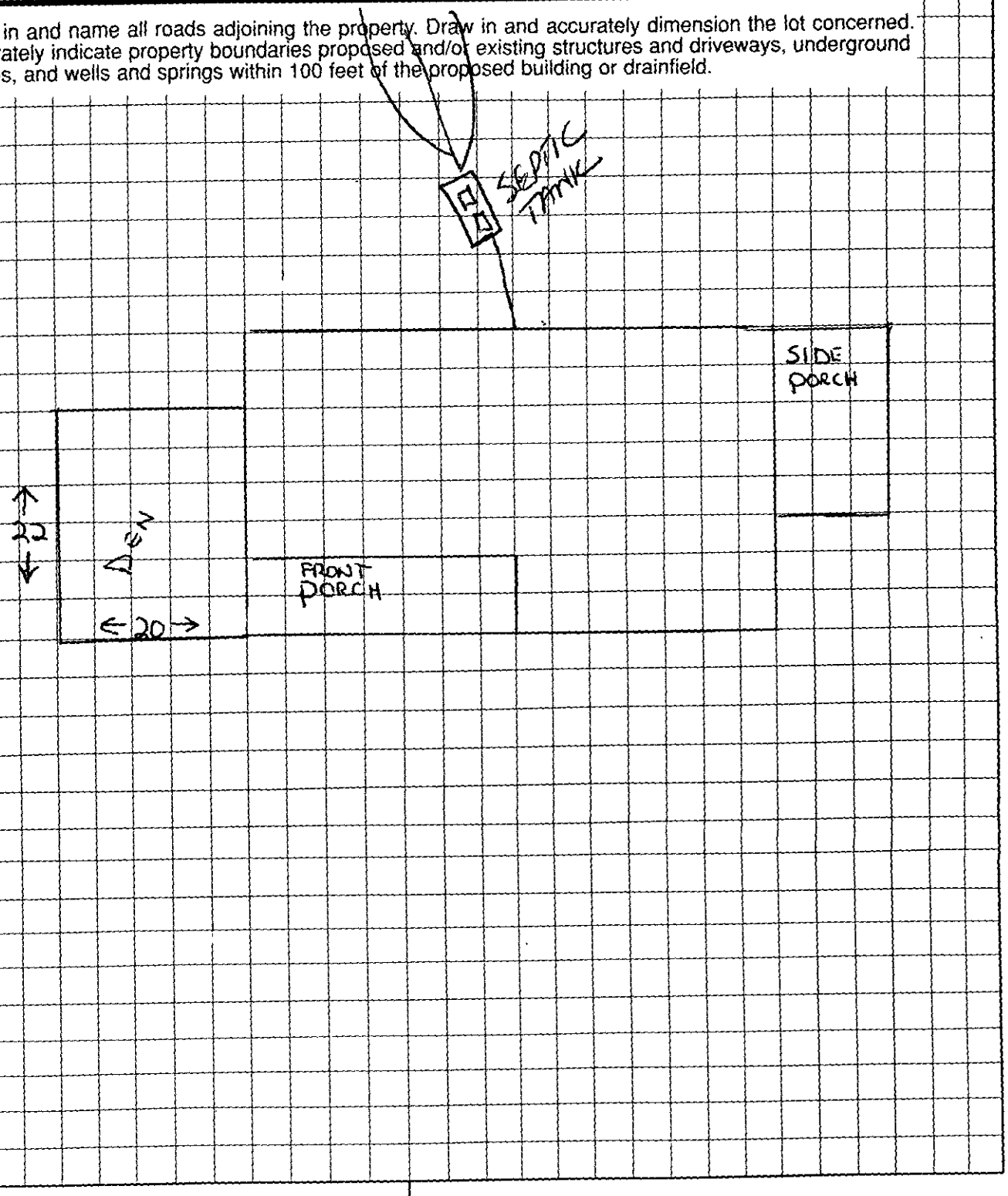
PROPOSED PLOT PLAN

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

FILE: 3411B

TC: _____

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