

3928 BROOKWOOD RD

10519211

10/7/09

thomatc

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

APP # 4281

FEE: $300.00
DATE: 7/6/09
CRT [ ] mail

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM
MECKLENBURG COUNTY - GROUNDWATER & WASTEWATER SERVICES
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

GWS – UES.APP 06/07

FILE #: 1528

TYPE APPLCATION:

- [x] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A / M)
- [ ] ADDITION - RENOVATION OR GARAGE WITH NO MAJOR CHANGES (X)
- [ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
- [ ] COMMERCIAL OR INDUSTRIAL (N)

PERSON FILING APPLICATION:
NAME: CHAMPION PATIO Rooms
ADDRESS: 9100 PERIMETER WOODS DR. SUITE I
CITY: CHARLOTTE
STATE: NC ZIP: 28216
PHONE: 704-398-0085
ALTERNATE PHONE: 980-722-6641

PROPERTY OWNER:
NAME: EUGENE NEAL
ADDRESS: 3928 BROOKWOOD ROAD
CITY: CHARLOTTE
STATE: NC ZIP: 28215
PHONE: 704-598-0619
ALTERNATE PHONE:

JOB LOCATION INFORMATION
TAX/PARCEL #: 10519211
STREET ADDRESS: 3928 BROOKWOOD ROAD
CITY: CHARLOTTE
STATE: NC ZIP: 28215
SUBDIVISION OR MOBILE HOME PARK NAME: ?
LOT #: ?

TOWNSHIP:

- [ ] 0-MECKLENBURG
- [x] 1-CHARLOTTE
- [ ] 2-DAVIDSON
- [ ] 3-CORNELIUS
- [ ] 4-PINEVILLE
- [ ] 5-MATTHEWS
- [ ] 6-HUNTERSVILLE
- [ ] 7-MINT HILL

WATER SUPPLY:

- [x] MUNICIPAL (M)
- [ ] COMMUNITY (C)
- [ ] PRIVATE WELL (P)
- [ ] SHARED WELL (S)
- [ ] OTHER 'SPRINGS' (O)

RESIDENTIAL PROPERTY TYPE:

- [x] HOUSE (H)
- [ ] MODULAR HOME (M)
- [ ] MULTIPLE FAMILY (U)
- [ ] SINGLE MOBILE HOME (S)
- [ ] DOUBLE WIDE (D)
- [ ] OTHER (O)

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 2

COMMERCIAL / INDUSTRIAL PROPERTY TYPE:
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:
INDUSTRIAL WASTES? [ ] YES [ ] NO
UNDERGROUND STORAGE TANKS? [ ] YES [ ] NO

ADDITION TYPE ATTACHED TO EXISTING STRUCTURE:

- [ ] BEDROOM
- [ ] BATHROOM
- [ ] KITCHEN
- [ ] DINING ROOM
- [ ] LIVING ROOM
- [ ] DEN
- [ ] GARAGE
- [ ] SUNROOM
- [ ] PORCH
- [ ] DECK
- [x] OTHER PATIO Room

ADDITION TYPE DETACHED FROM EXISTING STRUCTURE:

- [ ] DETACHED GARAGE
- [ ] DETACHED GARAGE WITH PLUMBING
- [ ] POOL HOUSE
- [ ] SHOP
- [ ] BARN
- [ ] STORAGE SHED
- [ ] DETACHED PORCH / DECK
- [ ] 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 the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Owner's/Agent's Signature — Date: 7-6-09

*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 approval is granted y this Department.
- This permit is not transferable.

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

UES DENIED. PROPOSED ADDITION OVER SEPTIC TANK.

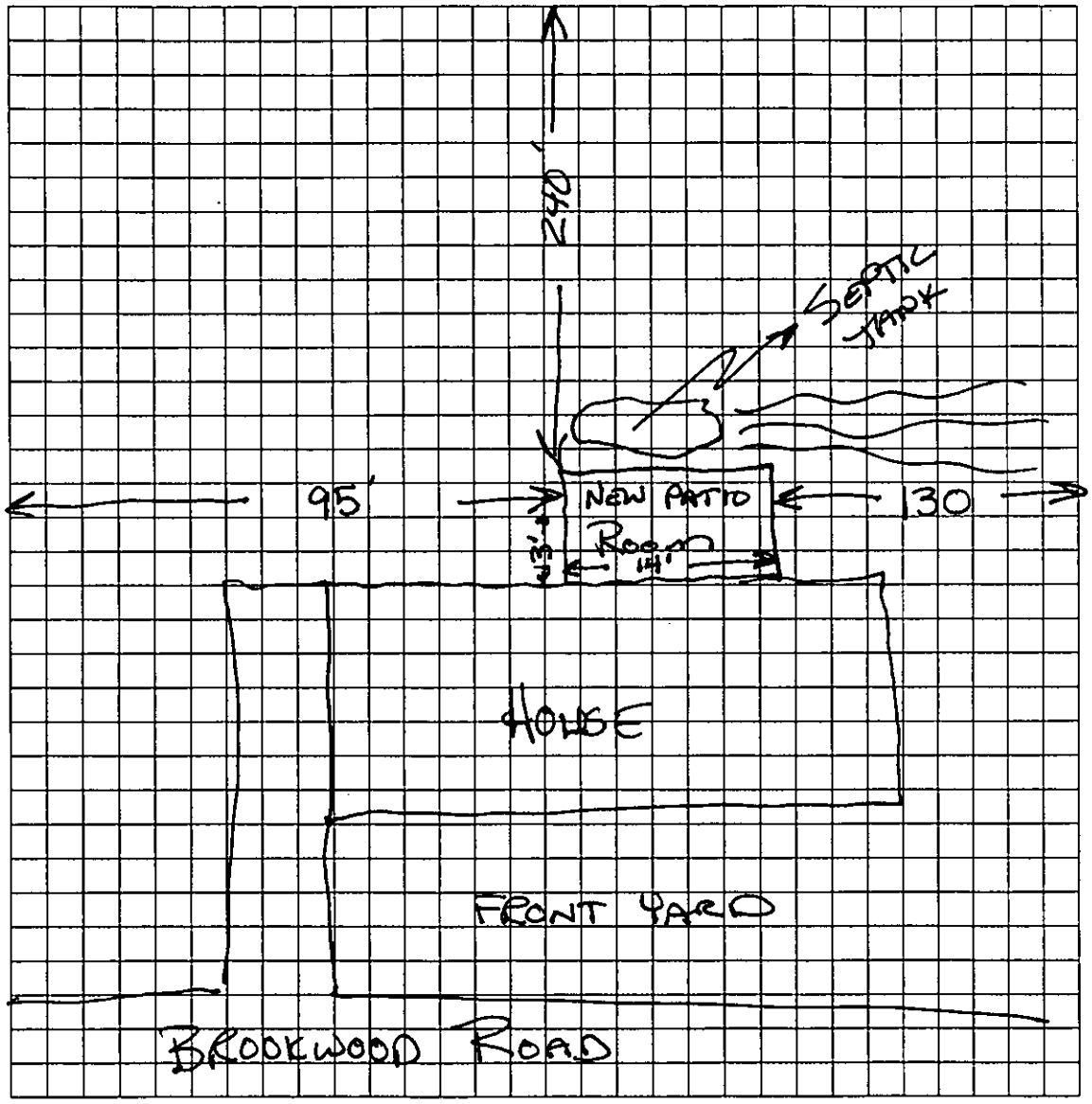
EHS Signature — Date: 7/9/09

Mecklenburg County
Land Use & Environmental Service Agency
Groundwater & Wastewater Services
700 N. Tryon St., Suite 211
Charlotte, NC 28202
Phone: (704) 336-5103
Fax: (704) 336-6894

File #_____
Date_____

PROPOSED PLOT PLAN

A map showing existing and proposed property lines and easements with dimensions, the location of the single family residence, non-single family residence, or other facility, and appurtenances, the site for the proposed well, and the location of existing or proposed sewer lines and/or sewage disposal systems, surface water bodies, aboveground or underground storage tanks. Name all roads adjoining the property. If this a repair indicate the type of repair.



Owner/Agent Signature _____

Date 7/6/09

LBC 12/15/04

MECKLENBURG COUNTY

Land Use & Environmental Services Agency
Groundwater & Wastewater Services

July 9, 2009

Eugene Neal
3928 Brookwood Road
Charlotte NC 28215

Re: Application for approval to use an existing on-site wastewater treatment & disposal system.
Property Location: 3928 Brookwood Road
Health Department file number: **1528**

Dear Property Owner or Owner's Agent:

On July 8, 2009 the Mecklenburg County Health Department, Groundwater & Wastewater Services Section, evaluated the above-referenced property to determine if approval to use an existing on-site wastewater treatment & disposal system could be granted for your proposed project. This evaluation was done in accordance with the laws and rules governing wastewater systems in North Carolina General Statute 130A-333 and related statutes, Title 15A, Subchapter 18A, of the North Carolina Administrative Code, Rule .1900 and related rules, and the Mecklenburg County Groundwater Well Regulations.

Based on the information provided in the application, dated July 6, 2009, and findings from the site evaluation conducted by our office, your request for approval to use an existing on-site wastewater treatment & disposal system is **not** being granted. This decision is based on the following conditions that were identified during the site visit:

- ☐ The existing on-site wastewater treatment & disposal system was not functioning properly at the time the site evaluation was conducted.
- ☒ The proposed plans do not meet the required setbacks for the on-site wastewater treatment & disposal system serving the property.
- ☐ The proposed plans do not meet the required setbacks for the reserved repair area for an on-site wastewater treatment & disposal system.
- ☐ The proposed plans do not meet the required setbacks for water supply wells.
- ☐ The proposed project will exceed the permitted daily design flow for the existing on-site wastewater treatment & disposal system. System alteration will be required in order to accommodate your proposed project.

If you need any additional information or assistance please contact our office at (704) 336-5103.

Sincerely,

David Cornelius
Environmental Specialist

Encl: (1) Application

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	07/06/09	**Amount:**	100.00
Receipt #:	63480	**Tendered:**	0.00
Check / Auth #:	CHECK 3228	**Returned:**	0.00
Received By:	BEACHMS		

Account Information

Account #:	200000
Contractor:	CHAMPION WINDOW CO
Attn:	
Address:	9100 PERIMETER WOODS DRIVE
Address:	
City/State/Zip:	CHARLOTTE, NC 28216

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	MH Exc/Add/Repl w/o System Mod 3928 BROOKWOOD ROAD		1	100.00	100.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
225.00	145.00	40.00			



Print

Close

Parcel Information

Parcel ID	Account	Parent	Previous
10519211	INDIVIDUAL		

Owner(s)

Owner Name	Mailing Address	City/State
NEAL EUGENE	3928 BROOKWOOD DR	CHARLOTTE NC 28215-8752

Legal Information

Legal	Municipality	Annexed	Special District	Fire District	Acreage
M9-259	CHARLOTTE	6/30/2009 12:00:00 AM		CITY OF CHARLOTTE	1.74

Total Parcel Assessment & Exemptions

Building	Land	Features	Total	Exemption	Year Approved	Review Date	Amount
103500	45500	0	149000				

Sales Information

Sale	Price	Stamps	Qualify	V/I	DeedBook	Type	Legal Ref.	Grantor
Nov 3 1977	0			IMP	04000 - 937	WARRANTY D	04000-937	

Land Use

Use	Units	Type	Neighborhood	Assessment
R120	1.74	AC	K501	45500

Building Information

Bldg	Description	Type	Year Built	Property Location
1	Single-Fam	RES	1971	3928 BROOKWOOD RD CHARLOTTE

Bldg	Story	Units	Total SqFt	Heated	Foundation	Ext. Wall	Grade	Value
1	1 STORY	1	3572	1407	CRAWL SPACE	FACE BRICK -	GOOD 02	103500

Bldg	Heat	Fuel	FirePlace	AC	Fixtures	Bedrooms	Full Baths	3/4 Baths	1/2 Baths
1	AIR-DUCTED	OIL/WD/COAL	1 - FP3	AC-NONE		3	2		0

Sub Areas

Bldg	Description	Size
1	BASE (FIRST FLOOR)	1407
1	PORCH - OPEN - FINISHED	20
1	UTILITY - UNFINISHED	90
1	GARAGE - FINISHED	528
1	PORCH - OPEN - FINISHED	120
1	BASEMENT - UNFINISHED	1407

Depreciation

Bldg	Physical	Functional	Economic	Special	Override
1	AV - 38.00%				

Special Features & Yard Items

Bldg	Built	Type	Quantity	Units	Value

Value Changes

Notice Date	Tax Year	Reason	Changed To	Deferred
Feb 21 2003	2003	Land Value Correction	149000	0
Jan 17 2003	2003	Countywide Revaluation	103500	0
Jan 5 1998	1998	Countywide Revaluation	136030	
Jan 2 1991	1991	Countywide Revaluation	102680	

Date Received 4-14-71 APT No. 1529

T. C No. _____

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

NAME OF OWNER Ritter (LAST) Larry (FIRST) Randolph (MIDDLE)

ADDRESS OF OWNER Rt. 8, Box 92-F, Charlotte, N.C. ZIP 28212

PHONE NO. Home 596-3674 Office ~~334-5348~~ 334-5348 or 377-5087 (Mrs

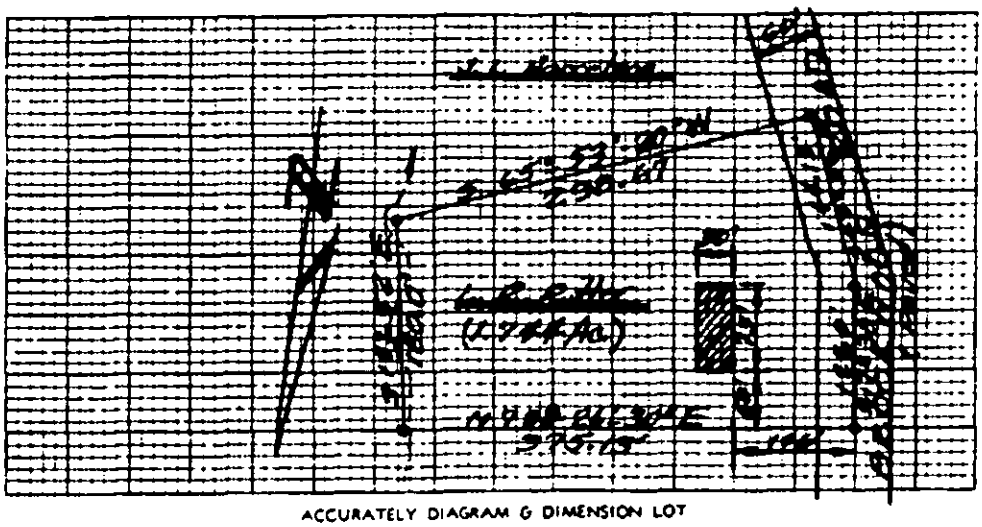
LOCATION OF PROPERTY Brookwood Road (STREET OR COUNTY ROAD)

SUBDIVISION Brookwood LOT NO None BLOCK NO. None

MAP BOOK NO 14 PAGE NO 127

DEED REFERENCE: DEED BOOK 5135 PAGE NO 505

Application is hereby made to the Mecklenburg County Health Department for the conduct of a percolation test and an on site inspection of the lot hereinabove described for the purpose of determining if the lot is suitable for the installation of an individual septic tank wastewater treatment system with subsurface soil absorption, effluent discharge



ACCURATELY DIAGRAM & DIMENSION LOT

Larry Randolph Ritter
OWNER

FORM NO. E-1-7-1-70

HEALTH DEPARTMENT'S COPY

Serial Nº 612 PTR No. 1528

Date Issued 4/28/71 T C No. 105-192-11

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

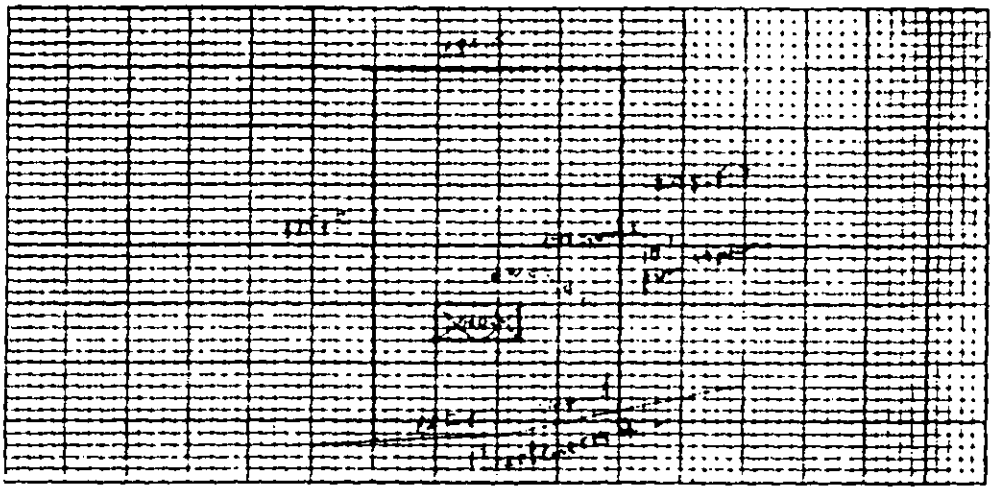
PERCOLATION TEST REPORT

NAME OF OWNER Ritter (LAST) Larry (FIRST) Randolph (MIDDLE)

ADDRESS OF OWNER Route 8, Box [illegible] ZIP 28212

LOCATION OF PROPERTY Brookwood Road (STREET OR COUNTY ROAD)

SUBDIVISION Brookwood LOT NO [illegible] BLOCK NO. [illegible]



PLOT PLAN

This is to certify that a percolation test has been run and an on-site inspection made by the Mecklenburg County Health Department on the lot described above. The said test was conducted on that portion of the lot as indicated on above plot

The percolation rate determined by the test was 53 min/in. The said lot is approved for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption effluent discharge subject to the following terms and conditions

1. A permit to install construct alter, or repair the specific system shall be obtained from the Mecklenburg County Health Department prior to the beginning of any construction of buildings or of the wastewater treatment system on the said lot
2. The size of the septic tank wastewater treatment system which must be installed will be determined by the Health Department prior to installation based on the percolation rate obtained above, and on the size and type of building constructed thereon
3. This approval is valid only if the system is installed in the immediate area where the percolation test was run
4. This approval is void if any grading, filling, or construction including the drilling of a well is performed on the lot which in the opinion of the Health Department, renders the area where the percolation test was run unsuitable for the installation construction operation and/or repair of such a system

This approval is granted based on the laws of the State of North Carolina and the rules and regulations of the North Carolina State Board of Health and the Mecklenburg County Board of Health which were in effect on the date of issuance and is void if at any time in the future, prior to the completion of the system, these laws, rules and regulations are changed such that this approval would not have been granted had the new or revised laws, rules, and regulations been in effect on the issue date.

Director, Environmental Health Division or Authorized Section Head

FORM NO E-2-7-1-70

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON [illegible]

Date Received 4-14-71

ICAR(S) Application No. 1528

T C No.

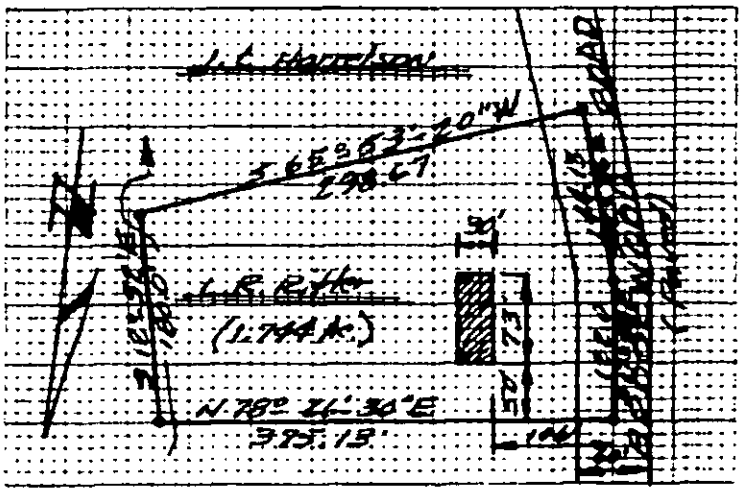
Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

Application for an
Installation, Construction, Alteration, and/or Repair Permit
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

The owner of that property described hereinafter hereby applies to the Mecklenburg County Health Department for a permit to

1. X Install or Construct [illegible] Alter or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption, effluent discharge.



3. PLOT PLAN ACCURATELY DIMENSIONED

4. No. of Bedrooms 3
5. Business Use -- Max No Employees
6. Washing Machine X Yes No
7. Garbage Disposal Yes X No
8. Dishwasher X Yes No
9. Water Supply
   A. Individual Well X
   B. Governmental System
   C. Community System
      1. Well source
      2. Governmental source
10. Sewage System
    House located within 200 feet of public sewer Yes X No
    House located within 200 feet of community sewer Yes X No
    FHA Case No.
11. VA Case No.

13. NAME OF OWNER: Ritter (LAST) Larry (FIRST) Randolph (MIDDLE)
14. ADDRESS OF OWNER: Route 8, Box 92-F, Charlotte, N.C. 28212
15. PHONE NO.: 596-3674 Office 334-5348
16. LOCATION OF PROPERTY: BRookwood Road (STREET OR COUNTY ROAD)
17. SUBDIVISION: Brookwood Lot No. None Block No. None
    Map Book No. 14 Page No. 127
18. DEED REFERENCE: DEED BOOK 3135 AT PAGE 505
19. HAS A PERCOLATION TEST BEEN RUN: YES NO DATE RUN
20. [illegible]

The undersigned [illegible] agrees that he has read the foregoing application and that the contents of same are true [illegible] and that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

4-13-71
DATE OF APPLICATION

Larry Randolph Ritter
OWNER

FORM NO. [illegible]

HEALTH DEPARTMENT'S COPY

Serial N° 637

Date Issued 4/28/71

LA No. 1528

T. C. No. 105-192-11

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Ritter (LAST) Larry (FIRST) Randolph (MIDDLE)

ADDRESS OF OWNER Route 8, Box 92-F ZIP 28212

LOCATION OF LOT Brookwood Road (STREET OR COUNTY ROAD)

SUBDIVISION Brookwood LOT NO _____ BLOCK NO. _____

MAP BOOK NO 14 PAGE NO. 127

The above specified lot is approved by the Mecklenburg County Health Department for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the percolation test results which yielded a percolation rate of 52 min/in on an on-site inspection of the said lot, and upon the information supplied in the "Application for an Installation, Construction, Alteration, and/or Repair Permit", number 1528. This approval is subject to the following terms and conditions

1. That the nitrification field be installed, constructed, altered, and/or repaired in the same area where the percolation test was run.
2. That an "Installation, Construction, Alteration, and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altred, and/or repaired and that the system be installed in accordance with same.

This approval may be revoked and the building inspection department requested to revoke any building permit(s) which have been issued to authorize construction on the said lot if at any time it is determined that any information contained in the "Application for an Installation, Construction, Alteration, and/or Repair Permit" is not correct or is untrue or that the septic-tank system is not being installed, constructed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit

* Before a septic tank system can be installed on this lot it will be necessary to grade a space 10 feet behind the house, 10 feet wide and 125 feet long and the septic system will have to be installed before the house is built.

Environmentalist [signature]

Director, Environmental Health Division or Authorized Section Head [signature]

FORM NO. E-3-7-1-70

HEALTH DEPARTMENT'S COPY

Ok

Serial No. 1550

C of A (s) No. 1528

Date Issued 2/15/72

T C No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner Tuttle (LAST) Jerry (FIRST) Randolph (MIDDLE)

Location of Property Eastwood Dr.

Application Number 1528 Permit Number 917

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material P.C.

Total Length of Drain Tile 66 66 60 Number of Lines 4 + 2

Depth of Filter Material 12' Cover Depth 3'

Water Supply Source well Distance from Water Source 50'

Excavation Inspected 2-15-72 (DATE) Tank Inspected 2/15/72 (DATE)

Nitrification Field Inspected 2-15-72 (DATE)

Washing Machine Line Inspected, If Applicable 2-15-72 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption effluent discharge as described above and it has been ✓ installed or constructed, ____ altered or repaired in accordance with the permit issued and the regulations of the Mecklenburg County Board of Health in effect on the date of issuance of the permit. The issuance of this Certificate of Approval 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 Certificate of Approval is issued subject to those restrictions and conditions shown on the permit as well as in addition to those listed below under comments. This Certificate of Approval 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 G.L. Hayden

Environmentalist

FORM NO E-6-4-1-71

HEALTH DEPARTMENT'S COPY