

4820 BRIGHT RD

11307333

12/18/2007

duponbj

Groundwater and Wastewater Services File Imaging Project

May 2007

Barcode Font = IDAutomationHC39M

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 485B/835TH DATE: 9/29/93

TC: 113-073-33 ☒ ☐ CRT

SERIAL Nº 16142

Name of Owner Shirley Dunlap Juris.:

Address of Property 4820 Bright Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400'

Number of Lines 4 @100'

Cover Depth 24"

Water Supply Source Well

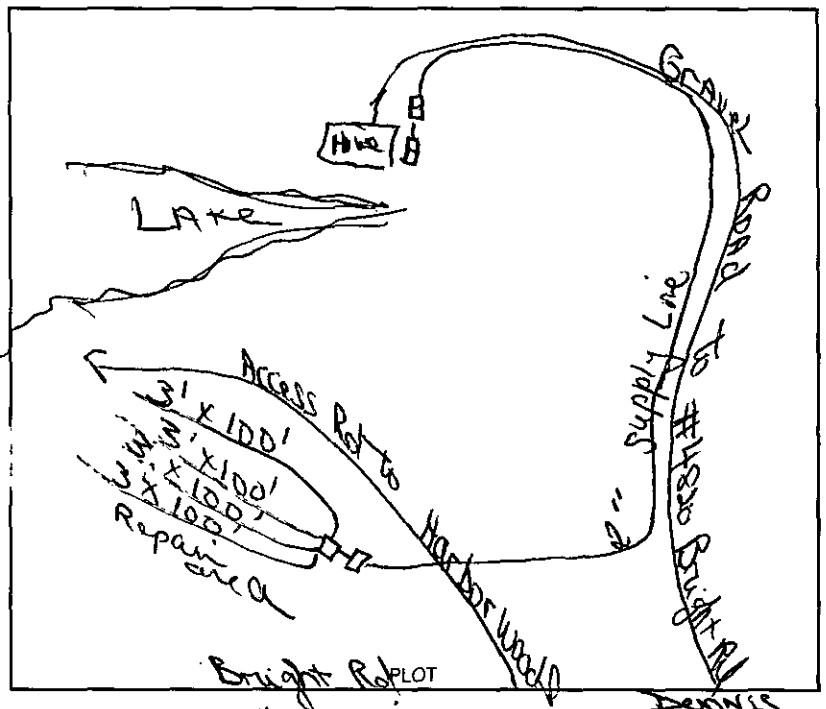
Distance to Water Source > 100'

Excavation Inspected 9/29/93

Tank(s) Inspected 9/29/93, 10/1/93

Wash Line Inspected

High Water Alarm Inspected 11/7/97



Design 1993, 1500ST 1000 DT, PI, 1200SFT 12" 6 Cent CTR# 304

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: System Located beside Gravel Road that enters Harbor Woods. System is designed for 3 bedroom home. Type III B

Judy J. Kiser
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

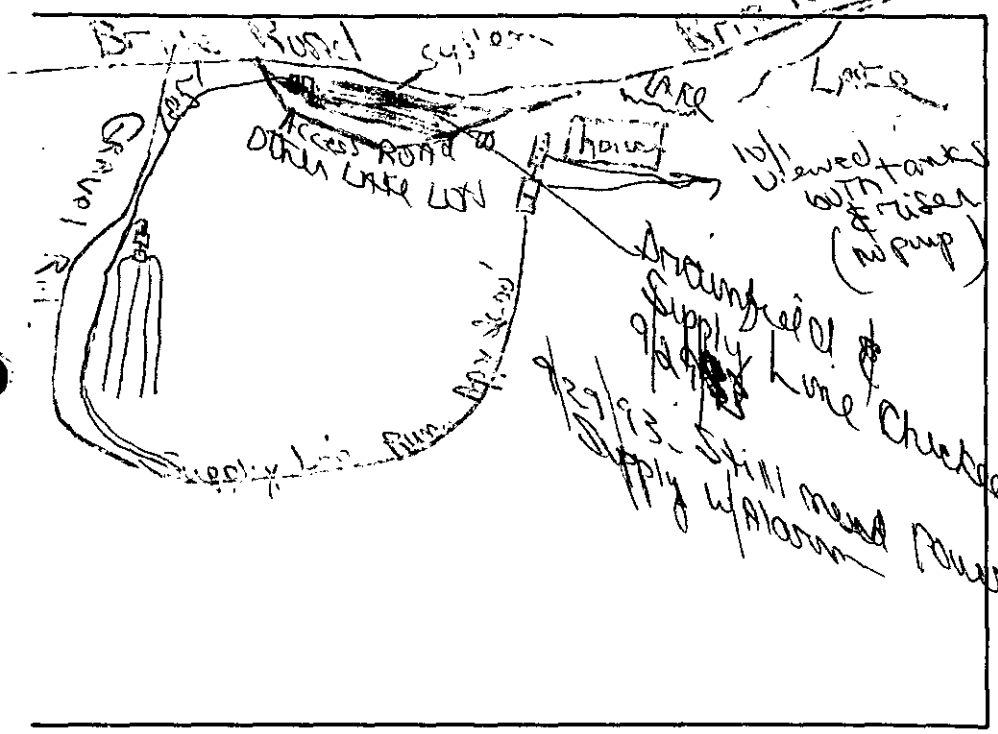
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 1235-B [illegible] DATE: [illegible]

TC: [illegible] ☐ L

SERIAL № 15170

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 10/15/13. All work shall be completed on or before 10/14/13, 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 1000 gallons

Tank Construction PC

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Total Line Length 400' feet

Number of Lines 3

Depth of Stone 12" inches

Distance from House 15' feet

Distance from Property Line 10' feet

Distance from Well 150' feet

NAME OF OWNER Shirley Dunlap

LOCATION OF PROPERTY 1220 Blythe Rd

Comments: System located behind Gravel Rd entrance. Tie Marker Wood-Estates. With 3 trenches 3' x 133' x 12" Gravel

Actual 4x100 80' from neighbor's well

Supply Line from upper system to [illegible] Blythe Rd.

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

12400

Lot # 485B/835A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

Rd 00 00 Ck #4 9-18-92

CRT

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: Dunlap (last) Shirley (first) E (mi)

ADDRESS: RT #2 Box 144 PHONE: (704) 827-1466

CITY: GASTONIA STATE: NC ZIPCODE: 28054

Date:

PROPERTY OWNER:

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

ADDRESS: _____ PHONE: (___) _____

CITY: STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 113-023-32

STREET ADDRESS: 4820 Bright Rd.

ZONING: _____

SUBDIVISION OR MOBILE HOME PARK NAME:

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

TYPE APPLICATION (check one):

LOT NUMBER: LOT SIZE (in acres):

[ ] SOIL TEST - INDIVIDUAL LOT (O)
[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: 4 NUMBER OCCUPANTS: 5

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: Shirley E. Dunlap Date: 9/18/92

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.

...Dist Pump required

[ ] 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 Date 10/14/92

Director or Authorized Section Head Date 10-15-92

WWATER : 122791

Easement for
113-073-32
113-673-35

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

[] CRT

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

(704)336-5102 Tel: #4856/8557

PERSON FILING APPLICATION:

NAME: Dunlap (last) Shirley (first) E (mi)

ADDRESS: RT 2 Box 144 PHONE: (704) 827-1466

CITY: Gastonia STATE: NC ZIPCODE: 28054

Date: July 3, 1992

PROPERTY OWNER:

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

ADDRESS: PHONE: (__) _____

CITY: STATE: ZIPCODE:

DRAFT

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 113-073-32

STREET ADDRESS: 4820 Brite Rd Charlotte NC

ZONING:

SUBDIVISION OR MOBILE HOME PARK NAME:

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

LOT NUMBER: 7 LOT SIZE (in acres): 5

TYPE APPLICATION (check one):

[x] SOIL TEST - INDIVIDUAL LOT (D)
[] 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)
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[] 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: 4 NUMBER OCCUPANTS: 5

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: Shirley E Dunlap Date: 7-3-92

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
[] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

_____ Environmentalist Date

_____ Director or Authorized Section Head Date

WWATER : 122791

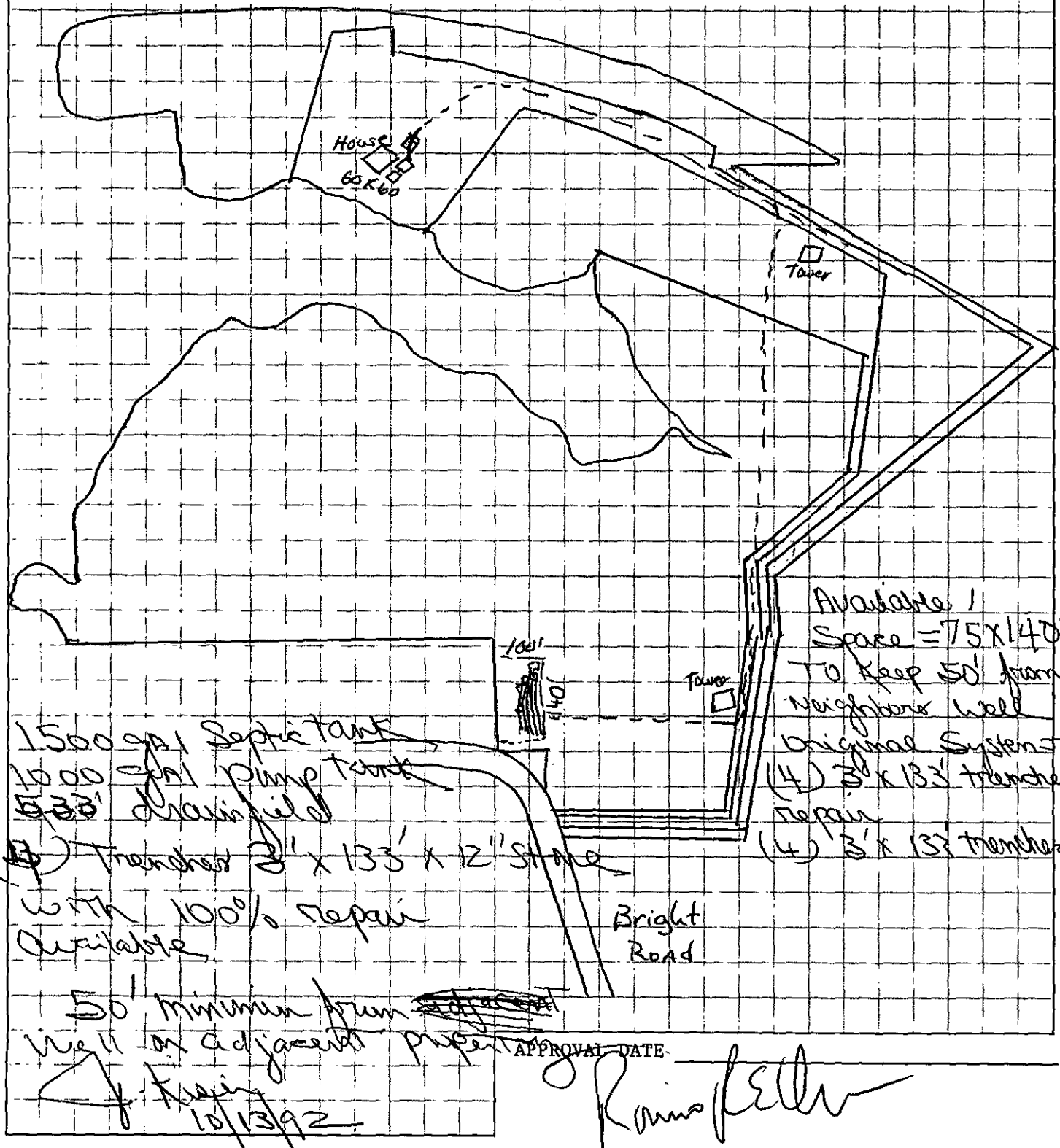
PROPOSED PLOT PLAN

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

FILE: 485B/8357A

TC: 11B-073-33

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.



APPROVAL DATE 10/13/92

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

Mecklenburg County
Health Department
February 27, 1995

Shirley E. Dunlap
Route 2, Box 144
Gastonia, NC 28054

Dear Mrs. Dunlap:

An inspection was made at the property located at 4820 Bright Road, Charlotte, N. C. to facilitate the issuance of an Operation Permit for the sewage treatment and disposal system. During the inspection it was found that the following items did not meet the regulations set forth in the "Laws and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A .1900; 1952 Septic Tank, Dosing, Dosing Tank and Lift Station Design." Our comments follow:

1. (6)Pump and control circuits shall be provided with manual circuit disconnects within a watertight, corrosion-resistant, outside enclosure (NEMA 4X or equivalent) adjacent to the pump tank, securely mounted at least 12 inches above the finished grade. The pump(s) shall be manually operable without requiring the use of special tools or entrance into the tank for testing purposes. Conductors shall be conveyed to the disconnect enclosure through water proof, gas proof, and corrosion-resistant conduits, with no splices or junction boxes provided inside the tank. Wire grips, duct seals, or other suitable material shall be used to seal around wire and wire conduit openings inside the pump tank and disconnect enclosure.

2. (9) The pump tank shall have a properly functioning high-water alarm. The alarm circuit shall be supplied ahead of any pump overload and short circuit protective devices. The alarm shall be audible and visible by system users and weatherproof if installed outdoors in an enclosure (NEMA 4X or equivalent).

The above mentioned items must be installed and inspected prior to the Operation Permit being issued. The Operation Permit is <u>required</u> for the Certificate of Occupancy and the permanent electric hook-ups. Please schedule inspections at least five (5) working days in advance to ensure there are no delays in the Operation Permit issuance.

Please call me at 336-5571 to discuss any questions you may have concerning this matter.

Sincerely,

Judy J. Kiser, R.S.
Individual Water and Wastewater Systems

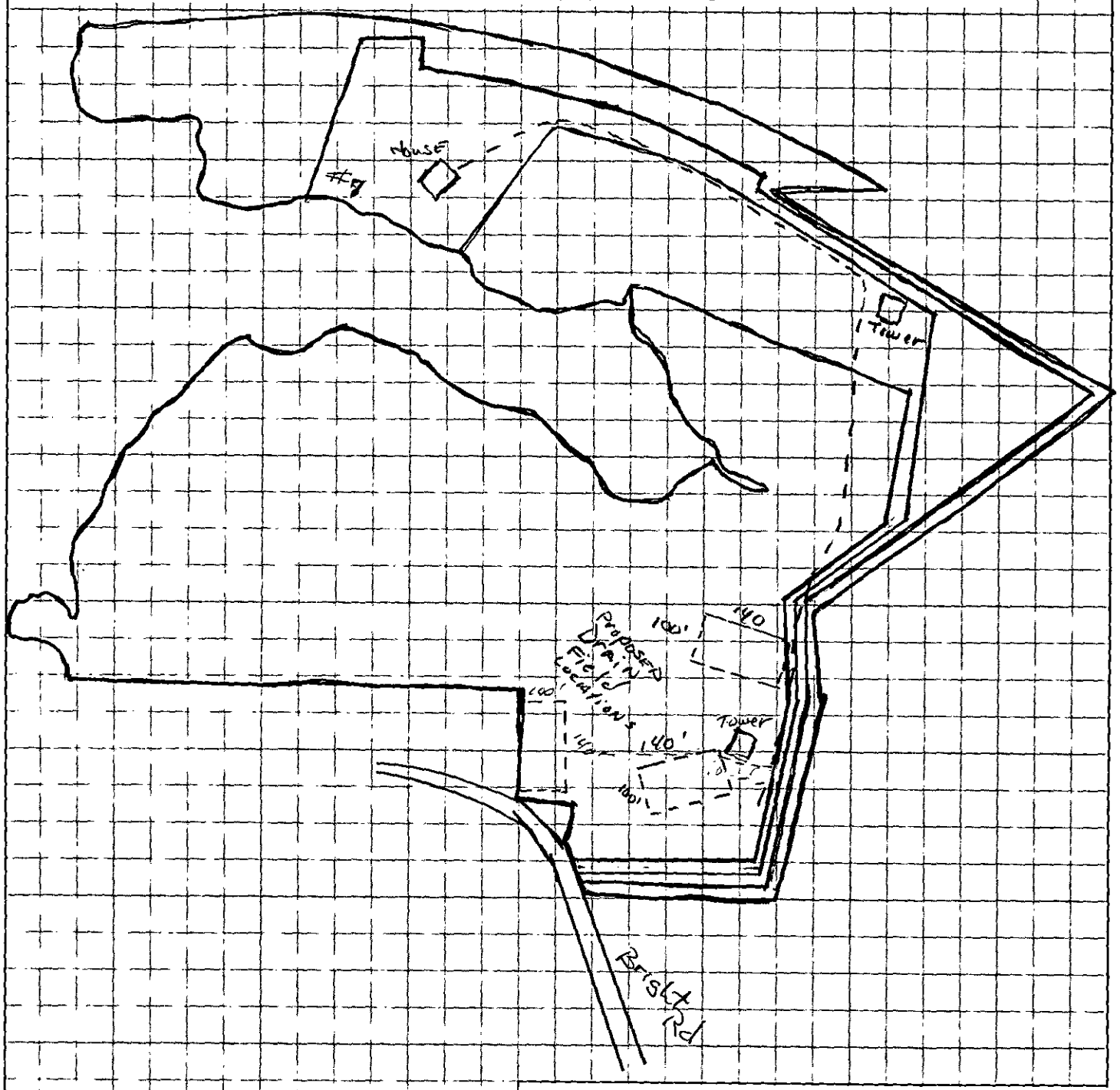
PROPOSED PLOT PLAN

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

FILE: 485B/8357A

TC: 113-073-32 PO

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.



APPROVAL DATE _____

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

File

$10323 14.00

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

EASEMENT AGREEMENT

THIS EASEMENT AGREEMENT ("Agreement") is made and entered into this 31st day of August, 1990 by and between EUGENE M. DAVANT and wife, ANN W. DAVANT and EUGENE M. DAVANT, JR. (collectively, "Grantors") and CHARLES L. GRAHAM, JR., SHIRLEY ELLER DUNLAP and RONNIE R. ELLER (collectively, "Grantees").

W I T N E S S E T H:

A. Grantors are the owners of that certain 21.49 acre tract of land ("Grantors' Property") shown and designated as tract "A" on that certain Map 1 of Harbour Woods Estates recorded in Map Book 23, Page 944, Mecklenburg County Public Registry (the "Map").

B. Grantees are the owners of Lots 6, 7 and 8 of Harbour Woods Estates ("Grantees' Property"), as the same is shown on the Map.

C. Grantors wish to grant to Grantees certain easements and rights over, across and under Grantors' Property in the locations hereinafter described for the purposes hereinafter stated.

NOW, THEREFORE, for and in consideration of the sum of Ten Dollars ($10.00) and other good and valuable consideration in hand paid by Grantees to Grantors, the receipt and sufficiency of which are hereby acknowledged, Grantors have granted, bargained, sold and conveyed, and hereby grant, bargain, sell and convey, the following nonexclusive easements over, across and under Grantors' Property for the purposes and in the locations hereunder described:

1. A perpetual, nonexclusive easement over and across that certain sixty (60) foot right-of-way shown on the Map running from Bright Road partially across Grantors' Property to Grantees' Property, for the installation, maintenance and repair of a roadway and of passage and use, both pedestrian and vehicular, over and across such roadway for the purpose of providing access, ingress and egress to and from Grantees' Property. (The easement granted pursuant to this Paragraph 1 shall herein be referred to as the "Roadway Easement").

2. Nonexclusive easements over, across and under certain areas of Grantors' Property the approximate locations of which are shown and described as "Drain Fields" on the Map, for the construction, maintenance, repair, replacement and operation of septic fields (the "Septic Fields") to service Grantees' Property. (The easements granted in this Paragraph 2 shall herein be referred to as the "Septic Field Easements").

3. Nonexclusive easements over, across and under the area over which the Roadway Easement runs and over, across and under certain other of Grantees' Property, the approximate locations of which are shown and described as "Sewer Lateral R/W" on the Map, for the construction, maintenance, repair, replacement and operation of septic or sewer lines connecting the improvements now or hereafter erected on Grantees' Property to the Septic Fields. (The easements granted in this Paragraph 3 shall herein be referred to as the "Septic Line Easements").

Subject to the following terms and conditions, the easements herein granted are perpetual and irrevocable and shall inure to the benefit of Grantees; their successors and assigns:

Prepared by and return to:
PARKER, POE, ADAMS & BERNSTEIN (JGM) Box 10
2600 Charlotte Plaza
Charlotte, North Carolina 28244

1. Grantees, their successors and assigns, may clear, grade and pave the Roadway Easement and any part or parts thereof, and may install sewer, water, gas, power and telephone lines, as well as drainage facilities and lines, and any and all curbs, gutters, utilities, lines and pipes commonly associated with, and constructed in or under, public streets or roads; provided, that any and all of such improvements shall be at Grantee's sole expense and may be used and enjoyed by Grantors, their heirs, successors in title and assigns, without contribution to Grantee for all or any portion of the cost thereof.

2. The Septic Easements herein granted shall include the right to construct, install, excavate, dig, build, maintain, operate, remove and reinstall the Septic Fields and Septic Lines upon the property over which such Septic Easements are reserved, and to clear (and continue to clear as necessary) all trees, brush and other plants and to remove all rocks if necessary for the proper construction, installation and maintenance of said system, all at the sole expense of Grantees, their successors or assigns. Except for damage caused by the negligent or willful act of the Owner of the servient property over which the Septic Easement is located (respectively called the "Servient Property Owner" and the "Servient Property"), their heirs, successors and assigns, agents, employees, members, invitees or licensees as provided above, Grantees, their successors or assigns shall promptly and reasonably restore any portion of the surface of the Servient Property (but not trees, brush or other plants, except grass) disturbed by the installation or maintenance of said septic system.

3. Grantees, their successors or assigns, shall be responsible for obtaining all necessary environmental permits and other permits for the use of said septic system and shall hold Grantors and each Servient Property Owner, their heirs, successors and assigns, harmless from any loss, damage or liability relating thereto, except to the extent that such loss, damage or liability results from the negligent or willful act of the Servient Property Owner, their heirs, successors and assigns, agents, employees, members, invitees, or licensees. Prior to the installation of a septic system to service Grantees' Property, Grantees, their successors or assigns shall have the proposed location of such septic system (which shall be within the Septic Easements staked and approved by the appropriate governmental authorities, and such septic system shall be approved by, and constructed and maintained in accordance with all regulations and requirements of all governmental authorities and regulatory agencies having jurisdiction.

4. For so long as the Grantees' Property is not serviced by a public or private sewer line, no fence, building or improvement of any kind shall be constructed on the Servient Property, and no use shall be made of the Servient Property which is inconsistent with or may interfere in any way with the use of the Servient Property for septic purposes.

5. The Septic Easements hereby granted and reserved shall run with the title to Grantees' Property and shall be in full force and effect until such time as Grantees' Property is fully serviced by a public or private sewer line, such that there is no need for a septic system servicing Grantees' Property. At such time as Grantees' Property is connected to a public or private sewer line and is fully serviced thereby, then the Septic Easements reserved and granted hereby shall terminate and shall thereafter be null and void and of no further force and effect.

6. Grantees shall have such right of ingress, egress and access over and upon any lands of Grantors adjacent to or in the vicinity of the Roadway Easements and Septic Easements as may be essential to the use thereof for the aforesaid purposes, if adequate access thereto is not provided by established means of approach. Grantors shall be compensated for any damage resulting at any time from the exercise of the right of ingress, egress and access hereby granted.

IN WITNESS WHEREOF, Grantors have executed this Agreement under seal the day and year first above written.

Eugene M. Davant [SEAL]
Eugene M. Davant

Ann W. Davant [SEAL]
Ann W. Davant

Eugene M. Davant, Jr. [SEAL]
Eugene M. Davant, Jr.

0000 0240 0343

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

I, a Notary Public for said County and State, do hereby certify that EUGENE M. DAVANT personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 31st day of August, 1990.

Nancy H. Stokes
Notary Public

My Commission Expires:
March 19, 1994

[NOTARY SEAL]

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

I, a Notary Public for said County and State, do hereby certify that ANN W. DAVANT personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 31st day of August, 1990.

Nancy H. Stokes
Notary Public

My Commission Expires:
March 19, 1994

[NOTARY SEAL]

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

I, a Notary Public for said County and State, do hereby certify that EUGENE M. DAVANT, JR. personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 31st day of August, 1990.

Nancy H. Stokes
Notary Public

My Commission Expires:
March 19, 1994

[NOTARY SEAL]

JGM:be/1824

State of North Carolina, County of Mecklenburg
The foregoing Certificate(s) of Nancy W. Stokes

Notary(ies) Public is/are certified to be correct. This instrument and this certificate are duly registered at the date and time and in the Book and Page shown on the first page hereof.

ANNE A. POWERS, REGISTER OF DEEDS

By Mary H. Pleasy Deputy - Register of Deeds

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

DATE: 9/18/92

FROM: COUNTY ENGINEERING DEPARTMENT

EHD FILE _____ JURISDICTION CODE Meck

PARCEL NUMBER 113-073-~~33~~ 33

ASSIGNED ADDRESS 4820 ~~Bate~~ Bright 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: Improvement

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 DRIVEWAYS.

SIGNED: Rwb

OPWEAR 06-88

NEW ADDRESS ~~4~~ *

FORM 100

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

[ ] CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202
(704)336-5102 Tel # 485B/855M

PERSON FILING APPLICATION:
NAME: Dunlap (last) Shirley (first) E (mi)
ADDRESS: RT 2 Box 144 PHONE: (704) 822-1466
CITY: Gastonia STATE: NC ZIPCODE: 28054

Date: July 3, 1992

PROPERTY OWNER:
NAME: SAME (last) (first) (mi)
ADDRESS: _____ PHONE: (__) _____
CITY: STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 113-073-32
STREET ADDRESS: 4820 Brite Rd
Charlotte NC
ZONING:

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

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: 7 LOT SIZE (in acres): 5

TYPE APPLICATION (check one):
[X] SOIL TEST - INDIVIDUAL LOT (D)
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[ ] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
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[ ] DOUBLE WIDE (D) [ ] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: 4 NUMBER OCCUPANTS: 5
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: Shirley E Dunlap Date: 7-3-92

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
[ ] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

_____
Environmentalist Date

_____
Director or Authorized Section Head Date

WWATER : 122791

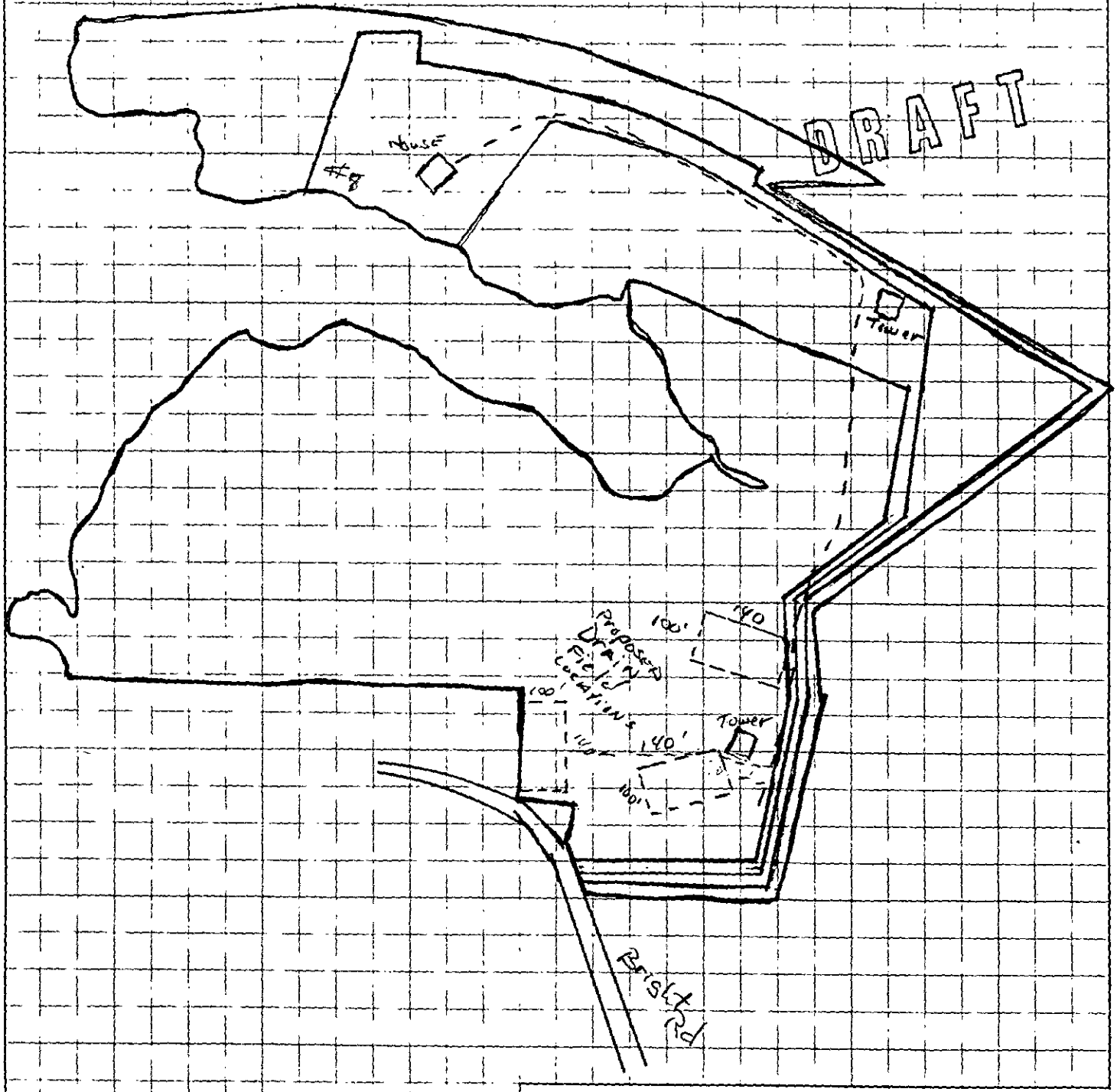
PROPOSED PLOT PLAN

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

FILE: 485B/03574

TC: 113-073-32-PO

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.



APPROVAL DATE _____

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

PAID CK CK # 7-2-92

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

4253
4252
$100.00
TOTAL

CHARGE SLIP

Date: 7-3-92

Name/Company: Ronnie Eller

IWS X

Sanitation _____

Vector Control _____

O.P.W.D. _____

Service: File(4253) 4814 Brite Road (Soil Test
file(4252) 4820 Brite Road (Soil Test)

Fee: $ 100.00

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

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

DATE 5/15/92

FROM: COUNTY ENGINEERING DEPARTMENT

EHD FILE _____ JURISDICTION CODE Mech

PARCEL NUMBER 113-073-32

ASSIGNED ADDRESS 4820 Brite 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: Well & Septic

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: DCN

OPWEAR 06-88

NEW ADDRESS / /*

FORM 100

Mecklenburg County

Health Department

July 17, 1992

Betty S. Snow, R.N., M.A.
Health Director

Ms. Shirley E. Dunlap
Rt 2 Box 144
Gastonia, NC 28054

RE: Property located at 4820 Brite Road
FILE: 485B/8357A
PARCEL: 113-073-33

Dear Ms. Dunlap:

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 12716) is enclosed for your information.

While this classification indicates the site is acceptable for the installation of a septic tank system, no specific system or plans have been approved. The area available for such an installation may impose limitations on the size and/or type construction permitted on the lot. Our review process begins upon receipt of an Application for an Improvement Permit accompanied by a plot plan **drawn to scale with accurate dimensions indicated** detailing the location of **existing** well or type sewage disposal systems (if applicable), setbacks, and utility easements. Proposed buildings, etc. must be drawn on the plot plan to allow sufficient remaining space for the sewage disposal system and well. The well should be located 100 feet from any part of **any** sewage disposal system (including those located on adjacent properties).

Please note that this classification may be changed if any filling, grading or construction (including the drilling of a well) is performed on the lot which without **prior** approval from this Department. Current regulations in effect are "Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal: 15A NCAC 18A .1900, August, 1991". Changes in regulations may impact future approvals on this lot.

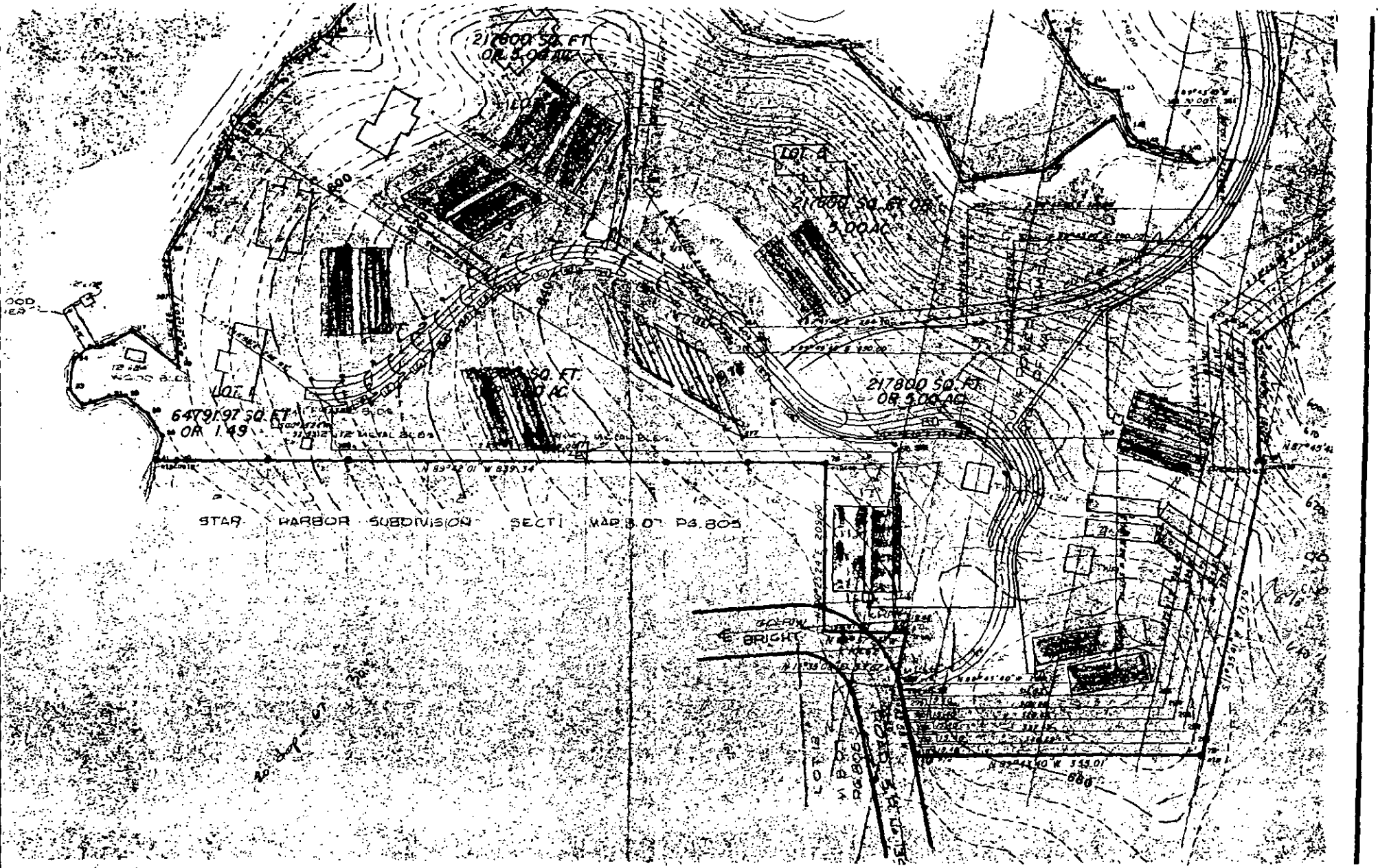
If there are any questions concerning this matter, please contact Bill Marlin at 336-5574.

Sincerely,

Kelly Randall

Kelly Randall, R.S., Soil Scientist
Individual Water and Wastewater Systems
KR/wpg

Enclosure


217800 SQ. FT.
OR 5.00 AC.
LOT A
217800 SQ. FT. OR
5.00 AC
217800 SQ. FT.
OR 5.00 AC
LOT 1
6479197 SQ. FT.
OR 149
STAR HARBOR SUBDIVISION SECTI MAP 3 07 PG 805
BRIGHT
880

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 12716

File: 485B/8359A Action 1

Parcel: PO 113-073-33 ☐ PC

Location: 4820 Brite Road

Subdivision:

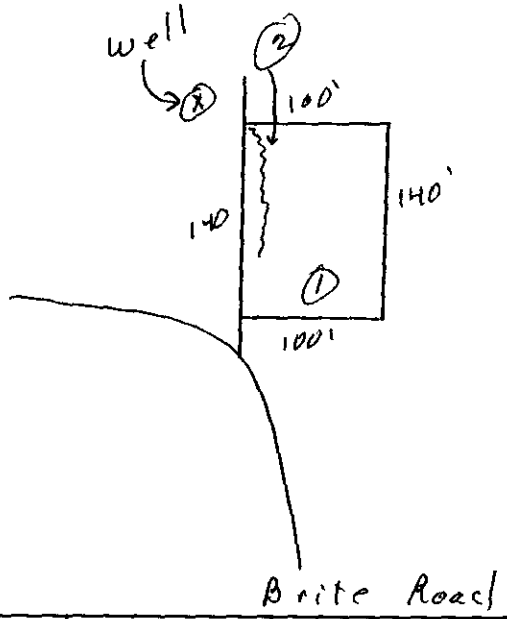
Lot: 7 Block: Acres: .32

Owner: Shirley E. Dunlap
Address: Rt. 2, Box 144
Pineville, N.C. 28054

Comments: 100% Repair, would need pump.
Easement for drainfield within on 113-073-35

Described by: William R. Marlin

Date: 7-17-92



***** 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 6-10%	S PS (U) old Terrace	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U Slightly Expansive clay	S PS U —	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U sub L Block	S PS U —	S PS U	S PS U	S PS U	S PS U
Drainage	(S) PS U >48" To water	S PS U —	S PS U	S PS U	S PS U	S PS U
Depth	(S) PS U >48"	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	(S) PS U >48"	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	III Cecil/Lilo	Old Terrace				
Area Classification	S (PS) U	S PS (U)	S PS U	S PS U	S PS U	S PS U