

5009 BRIGHT RD

11307111

6/22/2007

duponbj

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

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: 6941A
TC: _____
SERIAL: № 19922
☐ I ☒ CRT

JOB LOCATION

① ADDRESS: 5009 Bright Road (STREET NO. / STREET) ② FILE: #6941A
③ JURISDICTION: _____ ④ TAX PARCEL NO.: 11307111
⑤ SUBDIVISION: Star Harbor ⑥ LOT: 10 ⑦ BLOCK: C

OWNER

⑧ NAME: Beverly (FIRST) Rodden (MIDDLE) Taylor (LAST)
⑨ MAILING ADDRESS: 5009 Bright Road
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28214
⑬ PHONE: (WORK) 393-0207 ⑭ (HOME) 393-3403

REQUEST

This request is for a(n): We are remodeling the interior of our existing home; re-locating the (2) bedrooms; we are not adding an additional 2 Bedrooms - house will have only 2 bedrooms upon completion of construction of addition.

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? 2 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: Beverly R. Taylor
Date: Oct. 15, 1991

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. May use RK Strip System.

Environmentalist RS. 10/15/91 Date

Director or Authorized Section Head 10-17-91 Date

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

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: 69411A
TC:
SERIAL: 19022 ☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 5009 Bright Road (STREET NO. / STREET) ② FILE: 86941A
③ JURISDICTION: ④ TAX PARCEL NO.: 11307111
⑤ SUBDIVISION: Star Harbor ⑥ LOT: 10 ⑦ BLOCK: C

OWNER

⑧ NAME: Beverly (FIRST) Rodden (MIDDLE) Taylor (LAST)
⑨ MAILING ADDRESS: 5009 Bright Road
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28214
⑬ PHONE: (WORK) 393-0207 ⑭ (HOME) 393-3403

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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? 2 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

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Signed: Beverly R. Taylor
Date: Oct. 15, 1991

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... This permit is not transferable, and shall become null and void 36 months from the date of issuance. Mark Use Existing System.

Judy J. Kuss RS. 10/15/91
Environmentalist Date

Director or Authorized Section Head Date 10-17-91

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

INSTRUCTIONS

PLEASE PRINT OR TYPE ALL REQUESTED INFORMATION

ITEM(S) ....INSTRUCTIONS

① .....Indicate location of property for which the request is being made. Give **street number** and street or road name. If you do not know the street number, you must contact the Mecklenburg County Engineering Department to have one assigned.

② .....If a soil investigation has been run, copy the file number from the report. This may appear as SIR, ICAR(S) or APT numbers on older reports.

③ .....Indicate the jurisdiction in which the property is located. The jurisdiction is assigned by County Engineering.

④ .....Indicate the tax account or parcel number for the property (example 000-000-00). If the property is comprised of a portion of a large tract, precede the parcel number with the letters "PO."

⑤-⑦ .....Indicate the subdivision name and the lot and block numbers in the subdivision if applicable.

⑧-⑭ .....Indicate, in the requested format, the information as it pertains to the person to whom the permit should be issued.

⑮-⑱ .....Indicate the purpose of the request by placing an "X" in the appropriate box.

⑲-㉑ .....Indicate the type structure the system will serve by placing an "X" in the appropriate box.

- Residence means a single or multi-family dwelling (duplex, apartment, hotel, motel) or any other place where people reside.
- Mobile home means a trailer used as a residence that is designed without a permanent foundation and is capable of being moved to another location.
- Business or place of public assembly means non-residential use of buildings such as manufacturing, office space, warehousing operations, place of amusement or recreation, church, fairground, stadium, campground or any other place where people work or assemble.

㉒-㉔ .....If the system will serve a residence or a mobile home, indicate the number of bedrooms, the maximum occupancy of the residence and whether or not the structure will have a basement. When calculating the number of bedrooms include all rooms which are intended to be used as bedrooms or might later be furnished or converted to bedroom use and any additional bedrooms to be constructed in the future.

㉕-㉗ .....If the system will serve a business, indicate the type business, the maximum number of employees and the maximum number of seats to be provided. Include in these figures projections for future expansions.

㉘ .....Indicate the type water supply by placing an "X" in the appropriate box.

- Individual well means a well located on the lot, serving a building occupied by only one family or one business establishment and will not be a public place, a place of public gathering, or business which processes or manufactures any product which is used as, or is used in a food product.
- Municipal system means a water supply furnished by a city, county, town or other governmental authority.
- Community well means a privately owned water system originating from a well source.
- Community system means a privately owned water system originating from a source other than a well.

㉙ .....Once you have completed the application, read the certification statement in the lower, left hand corner. The statement must be signed, dated, and returned to the Department along with a Proposed Plot Plan and a copy of the Engineering Address Record prior to the issuance of any permits. **IN ORDER FOR YOU TO RECEIVE A COPY OF THE COMPLETED PERMIT FOR CONSTRUCTION, ALL COPIES OF THIS FORM MUST BE RETURNED TO THE ADDRESS LISTED ON THE FRONT OF THE APPLICATION.**

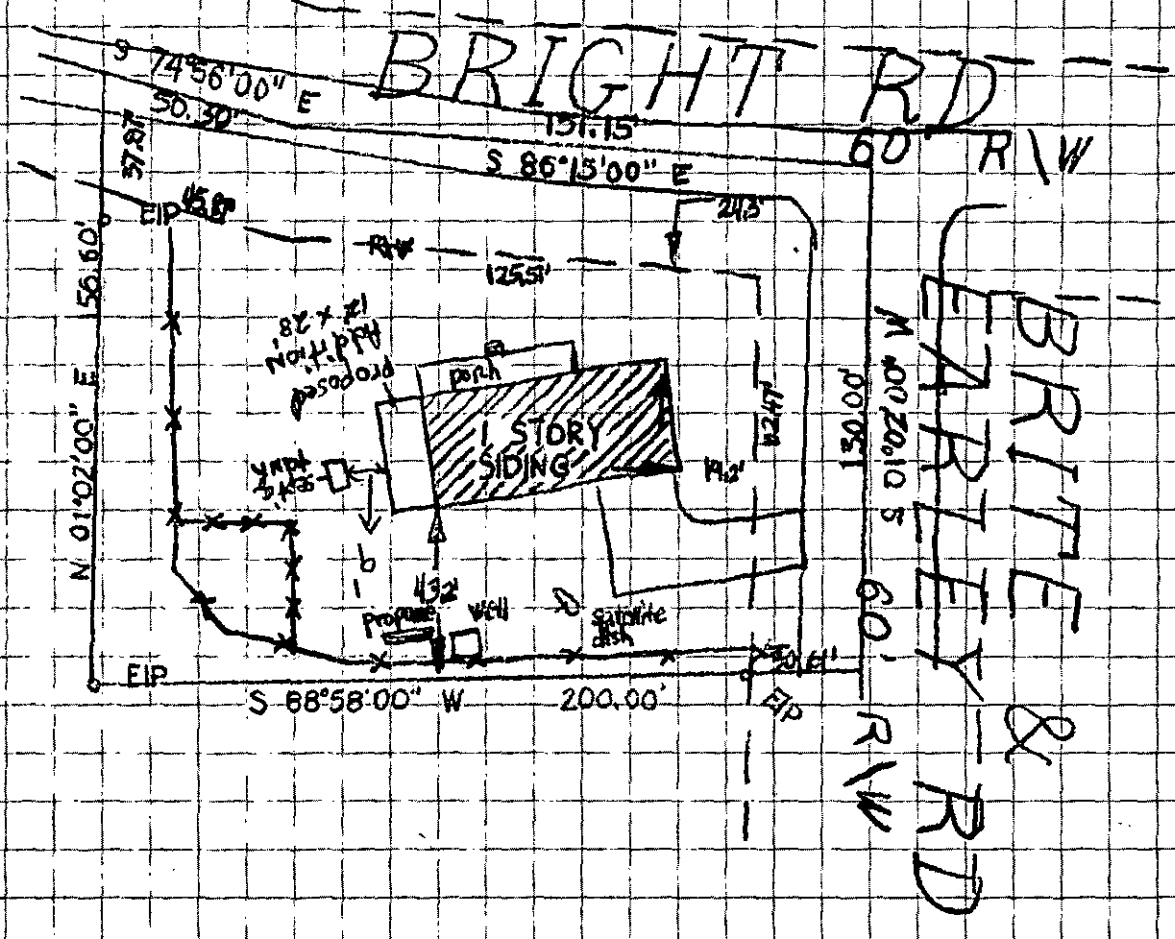
PROPOSED PLOT PLAN

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

FILE: 6941A

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.



APPROVAL DATE _____

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

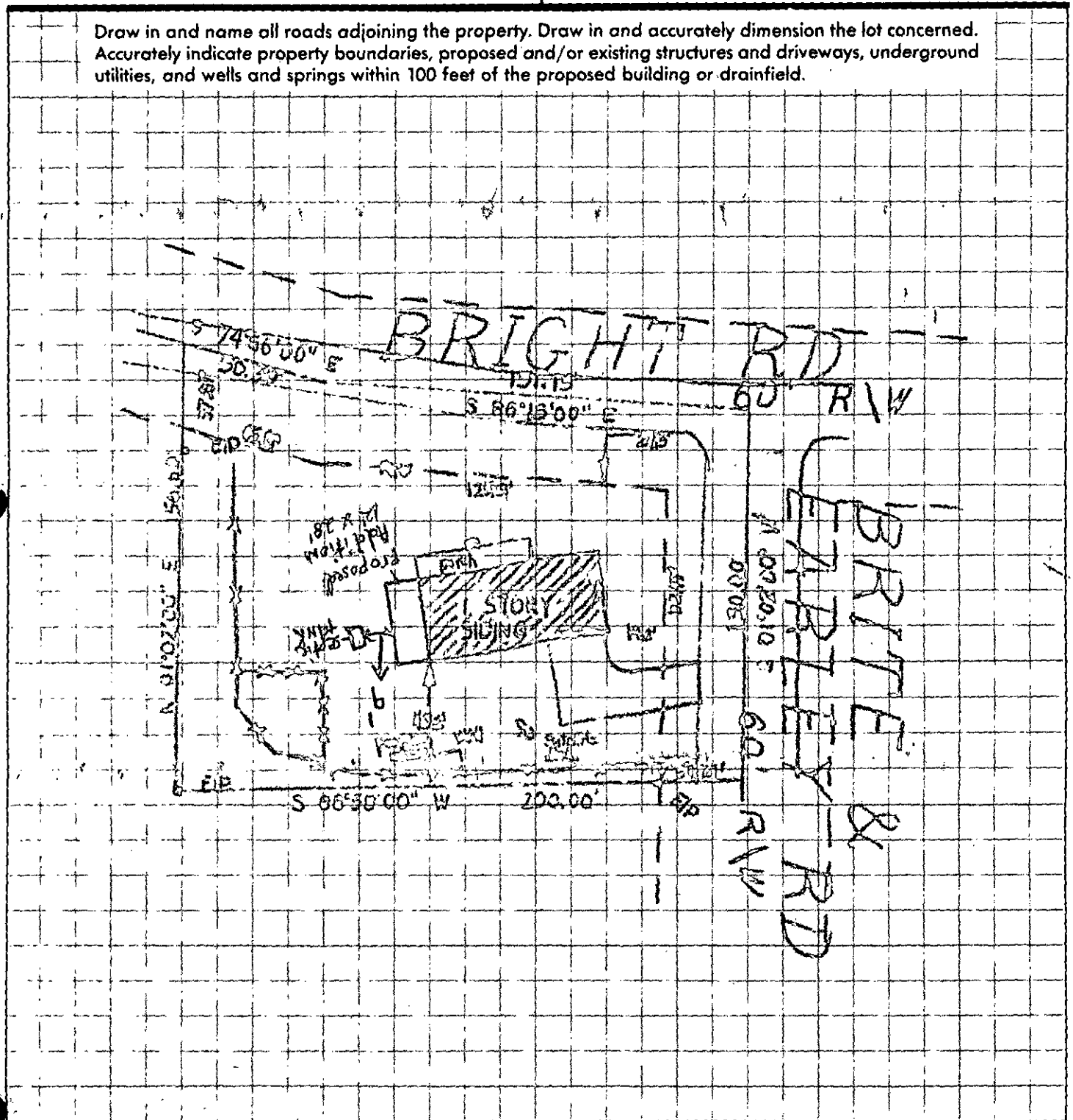
PROPOSED PLOT PLAN

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

FILE: 6941A

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.



APPROVAL DATE _____

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

393-3403
393-0257

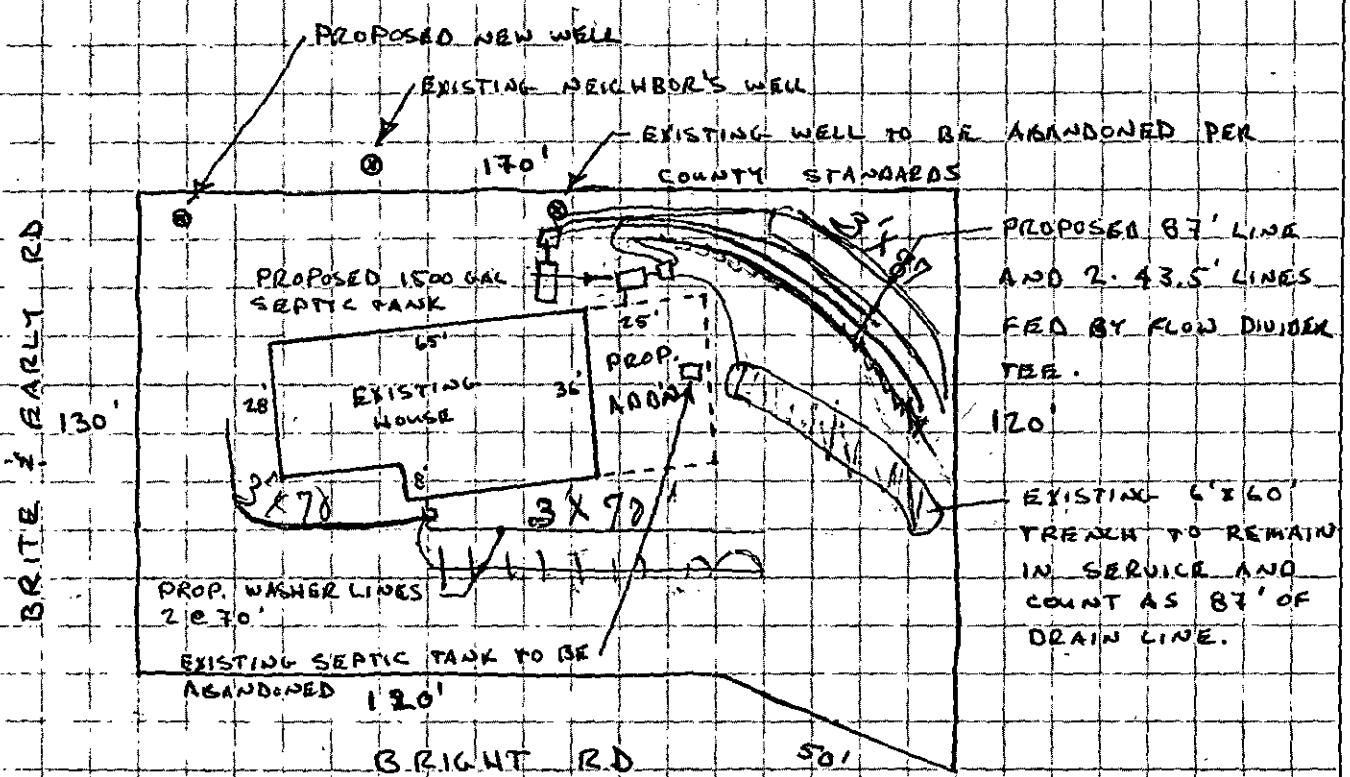
PROPOSED PLOT PLAN

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

FILE: 6941A

TC: 113-071-11

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.



PROPOSED SYSTEM FOR 3 BR HOUSE:

2-70' WASHER LINES	140'
EXISTING DRAIN FIELD	87'
1-87' DRAIN LINE	87'
2-43.5' DRAIN LINES	87'
	401 FT

SUBMITTED BY EDDIE RANCOM
4/26/91 FOR GREG AND BEVERLY TAYLOR

APPROVAL DATE _____

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

393-348
313-027

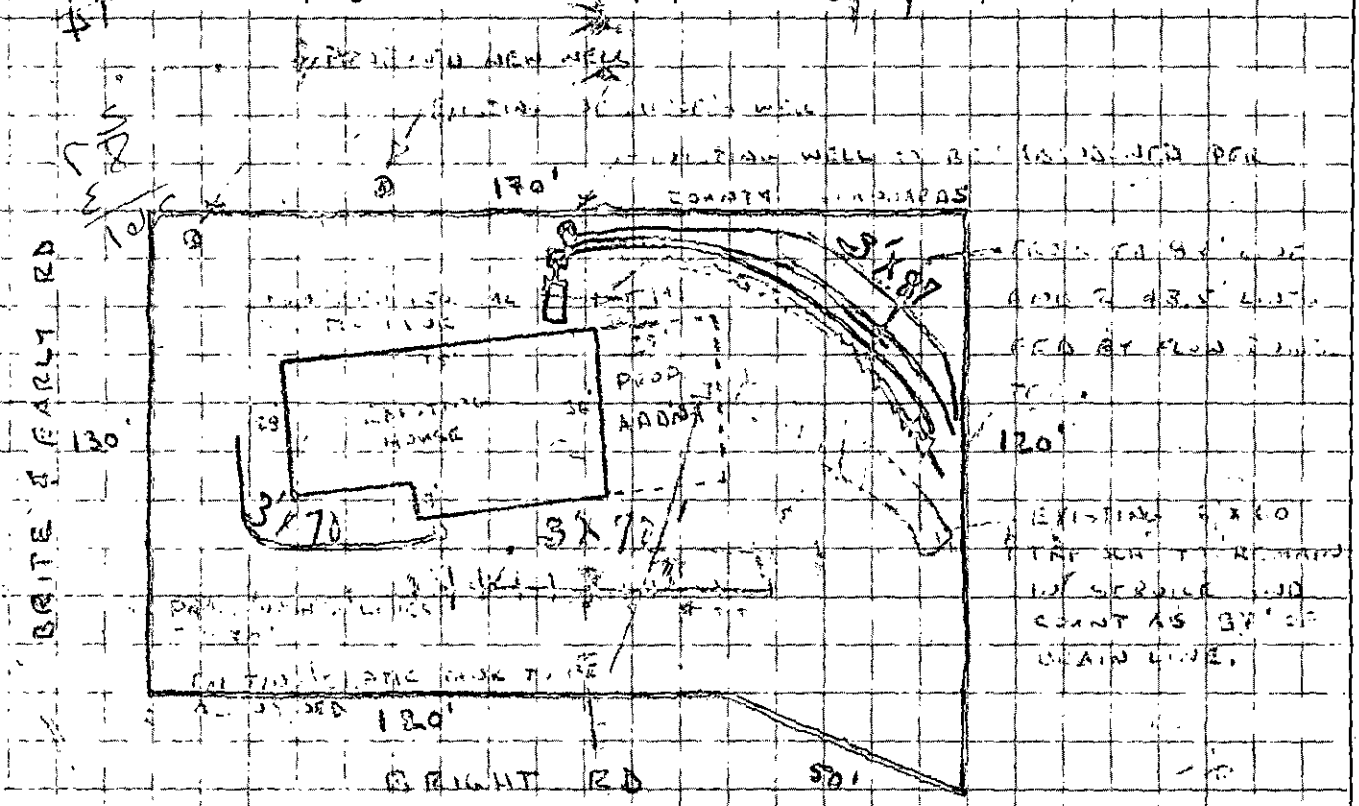
PROPOSED PLOT PLAN

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

FILE: 6941A

TC: 113-071-11

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.



PROPOSED SYSTEM FOR 3 BR HOUSE

2-20' TRENCHES	140'
EXTRA 3' TRENCH	37'
1 3' DRAIN	87'
4 3' DRAIN LINES	87'
	411 FT

SUBMITTED BY EDDIE BANKS
4/26/91 FIELD CHECKED AND
APPROVED TAYLOR

APPROVAL DATE _____

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

Mecklenburg County
Health Department

August 10, 1990

Beverly Taylor
5009 Bright Road
Charlotte, NC 28214

Dear Ms. Taylor:

In response to your application for an addition to your existing house, an evaluation was conducted on August 1, 1990 to determine if there was sufficient space to add on to the present septic system or install a separate one.

The proposed addition to the existing structure would be located over the present septic system. The remaining space is insufficient for a conventional system to accommodate your request for 3 additional bedrooms and a recreation room.

If you wish to revise your application and/or submit plans for a modified sewage disposal system, please contact Gene Vaughan at 376-4603 between 4:00 - 5:00 p.m.

Sincerely,

B. R. Ferguson

B.R. Ferguson

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

APPLICATION FOR AN IMPROVEMENT PERMIT

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
AUG 1 1990
ENVIRONMENTAL HEALTH DIVISION

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: ~~6941~~ 6941A
TC: _____
SERIAL: № 19904 ☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 5009 Bright Road (STREET NO. / STREET) ② FILE: 6941A
③ JURISDICTION: _____ ④ TAX PARCEL NO.: 113-071-11
⑤ SUBDIVISION: Star Harbor ⑥ LOT: 10 ⑦ BLOCK: C

OWNER

⑧ NAME: Gregory & Beverly (FIRST) C. & M. (MIDDLE) Taylor (LAST)
⑨ MAILING ADDRESS: 5009 Bright Road
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28214
⑬ PHONE: (WORK) 393-0207 ⑭ (HOME) 393-3403

REQUEST

This request is for a(n):

⑮ ☐ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☒ Other (specify) Move Septic System/Lines or ~~Remove Old/Install New System~~

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? 4 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: Beverly M. Taylor
Date: 8-8-90

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.

_____ / _____
Environmentalist Date

_____ / _____
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.

APPLICATION FOR AN IMPROVEMENT PERMIT

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
JUL 2 ...
ENVIRONMENTAL HEALTH DIVISION

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: 6941A
TC: 113-071-11
SERIAL: № 20315
☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 5009 (STREET NO.) Bright Rd., Charlotte, NC (STREET) ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.: 110BC117-805 Brite + Earley Rd.
⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: Greg + Beverly (FIRST) C./M. (MIDDLE) Taylor (LAST)
⑨ MAILING ADDRESS: 5009 Bright Rd.
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28214
⑬ PHONE: (WORK) 393-0207 ⑭ (HOME) 393-3403

REQUEST

This request is for a(n):

⑮ ☐ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☒ Other (specify) Adding 3 bedrooms/rec room

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 1 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

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Signed: Beverly M. Taylor
Date: 7/3/90

IMPROVEMENT PERMIT

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Environmentalist / Date

Director or Authorized Section Head / Date

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MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 7/24/90

Name/Company: Gregory Taylor

Sanitation 1

Vector Control _____

O.P.W.D. ✓

Service: imp. add
6941A

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
JUL 25 1990

(Wire Drafting Charge)

Fee: $ 125.00

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

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: 6941A
TC: 113-671-11
SERIAL: NE 20315
☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 5009 (STREET NO.) Bright Rd., Charlotte, NC (STREET) ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.: 119BC 117-805, Brite + Earley Rds.
⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: Greg. + Beverly (FIRST) C. /M. (MIDDLE) Taylor (LAST)
⑨ MAILING ADDRESS: 5009 Bright Rd.
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28214
⑬ PHONE: (WORK) 393-0207 ⑭ (HOME) 393-3403

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⑮ ☐ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☒ Other (specify) Adding 3 bedrooms/rec room

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㉒ Number of bedrooms? 1 ㉕ Type?
㉓ Maximum occupancy? 3 ㉖ Maximum number of employees?
㉔ Basement? ☐ yes ☒ no ㉗ Maximum number of seats?

WATER SUPPLY

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A ☒ Individual well
B ☐ Municipal system
C ☐ Community well
D ☐ Community system

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Signed: Beverly M. Taylor
Date: 7/3/90

IMPROVEMENT PERMIT

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Environmentalist / Date

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.

(Bill Taylor)

Beverly Taylor

or

Bradley Taylor

Friend

1941A

5009 Bright Road

Charlotte, NC

393-3403



Paid

$125.00

on May 23rd

1990

They are now
Thinking about
adding two bedrooms
and going to county
septic system, unless
this required -
our fees do not
go $100.00?

Please call
for Thanks
Lorraine

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 6941A

TC: _____

☐ PC ☐ REPT

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
AUG 1 [illegible]
ENVIRONMENTAL HEALTH
DIVISION

JOB LOCATION

① ADDRESS: 5009 Bright Road, Charlotte, NC 28214

② SUBDIVISION: Star Harbor ③ LOT: 10 ④ BLOCK: C

⑤ PARCEL REFERENCE: BOOK NO.: _____ PAGE NO.: _____ PARCEL NO.: 113-071-11

⑥ DEED REFERENCE: BOOK NO.: 4891 PAGE NO.: 0236

OWNER

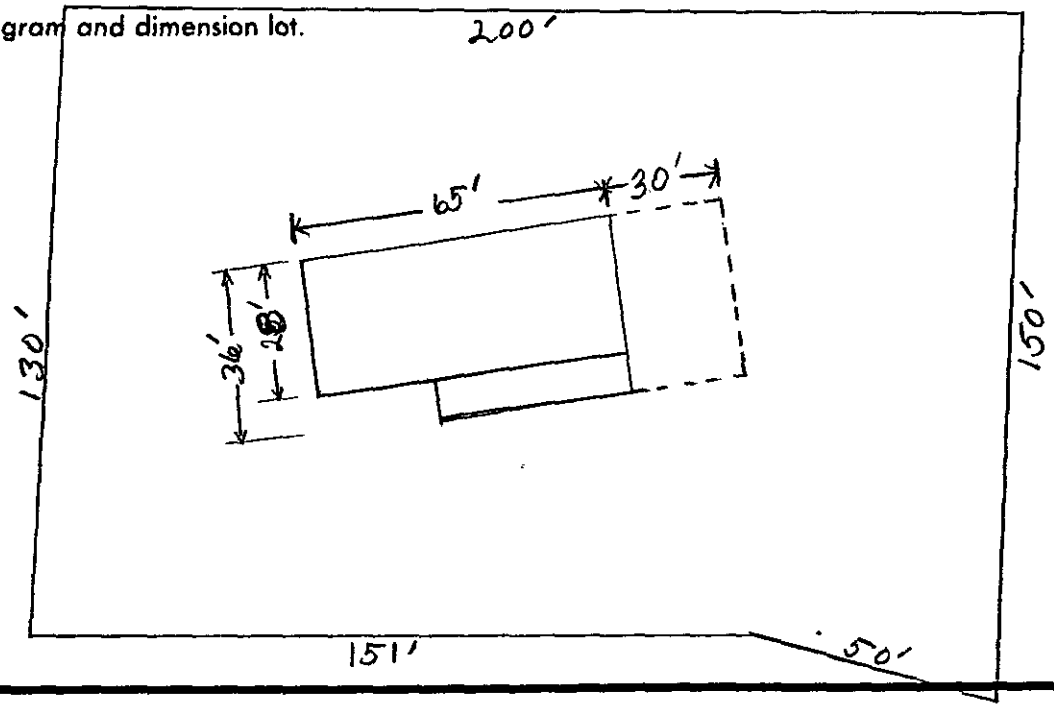
⑦ NAME: Gregory & Beverly (FIRST) C. & M. (MIDDLE) Taylor (LAST)

⑧ MAILING ADDRESS: 5009 Bright Road

⑨ CITY: Charlotte ⑩ STATE: NC ⑪ ZIP: 28214

⑫ PHONE: (WORK) 393-0207 (HOME) 393-3403

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: Beverly M. Taylor

Date: 8-8-90

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 8/15/90

Name/Company: Diegos Taylor

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Soil
Water
Survey 6941A

ENVIRONMENTAL HEALTH DIVISION
PAID
AUG 15 1990

Fee: $ 50.00 CK

CK # 3382
$50.00

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

Mecklenburg County
Health Department

August 28th, 1990

Gregory & Beverly Taylor
5009 Bright Road
Charlotte, NC 28214

RE: Property located at 5009 Bright Rd., Charlotte
FILE: 6941A
PARCEL: 11307111

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 results of this investigation showed the property to be classified UNSUITABLE for the installation of such a system. A copy of the Site Evaluation Report (Serial Number 16659) is enclosed.

State regulations provide that sites originally classified unsuitable may be utilized for the installation of alternate or modified sewage disposal systems provided the requirements of 10 NCAC 10A .1948 (c) are met. A reprint of this section is enclosed for your information.

Should you desire to file for permission to install an alternate or modified sewage treatment system on the property, 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. They will be reviewed, and if it is determined that the proposed system may reasonably be expected to function satisfactorily, an Improvement Permit will be issued by the Department upon completion by you, of a formal request for lot reclassification.

If I may be of any assistance, please feel free to call.

Very truly yours,

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

Enclosure (2)

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

MECKLENBURG [redacted] HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 16655

File: 6941 A Action 2

Parcel: 113-071-11 ☑ PC

Location: 5009 Bright Road

Subdivision:

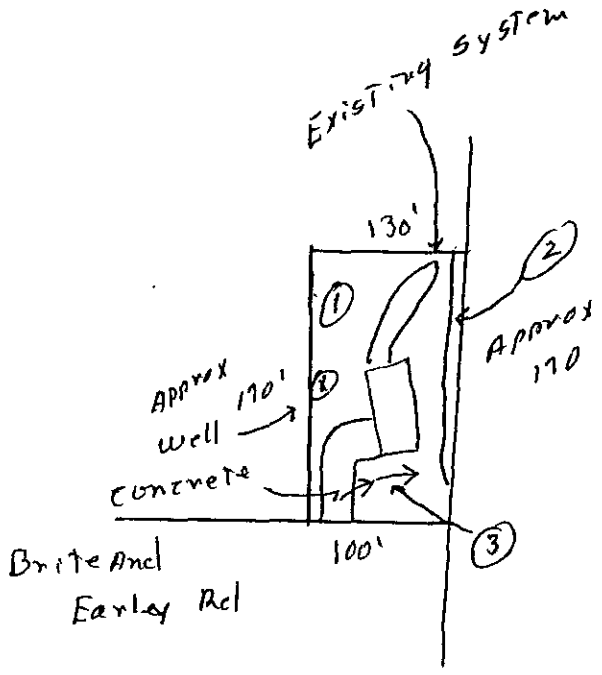
Lot: Block: Acres: .41

Owner: Gregory & Beverly Taylor
Address: 5009 Bright Road
Charlotte, NC 28214

Comments: Proposed addition to house would cover a portion of drainfield

Described by: William R. Marks

Date: 8-23-90



*** 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 2-8%	S PS (U) >24" cut	S PS (U) Water runoff Area	S PS U	S PS U	S PS U
Texture	S (PS) U Clay	S PS U —	S PS U —	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U —	S PS U —	S PS U	S PS U	S PS U
Drainage	S (PS) U 36" To water	S PS U —	S PS U —	S PS U	S PS U	S PS U
Depth	S (PS) U 40" +	S PS U —	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 36"	S PS U —	S PS U —	S PS U	S PS U	S PS U
Available Space	S PS (U) Restricted	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-Urban	>24" Cut	Water runoff Area			
Area Classification	S PS (U)	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 16655

File: [illegible] Action 2

Parcel: [illegible] ☐ PC

Location: 5009 Bright Road

Subdivision:

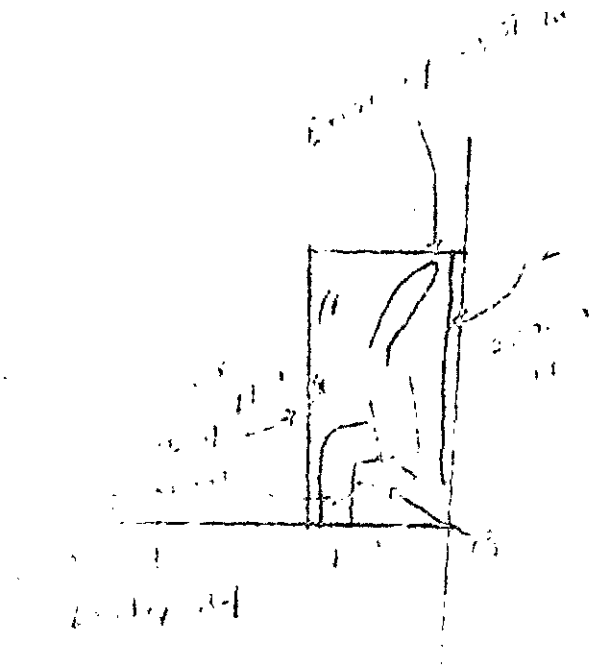
Lot: Block: Acres: .41

Owner: Gregory & Beverly Taylor
Address: 5009 Bright Road
Charlotte, NC 28214

Comments: [illegible]

Described by: [illegible]

Date: [illegible]



***** 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	S PS U	S PS U	S PS U	S PS U	S PS U
Texture	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S PS U	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	C					
Area Classification	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U

Mecklenburg County
Health Department

August 10, 1990

Beverly Taylor
5009 Bright Road
Charlotte, NC 28214

Dear Ms. Taylor:

In response to your application for an addition to your existing house, an evaluation was conducted on August 1, 1990 to determine if there was sufficient space to add on to the present septic system or install a separate one.

The proposed addition to the existing structure would be located over the present septic system. The remaining space is insufficient for a conventional system to accommodate your request for 3 additional bedrooms and a recreation room.

If you wish to revise your application and/or submit plans for a modified sewage disposal system, please contact Gene Vaughan at 376-4603 between 4:00 - 5:00 p.m.

Sincerely,

B. R. Ferguson

B.R. Ferguson

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

Mecklenburg County
Health Department

FACSIMILE TRANSMITTAL LETTER

TO: Betty Turner

FROM: Sylvia Daniel - Health/Env. Health

DATE: 8/7/90

NO. OF PAGES 5 following

FAX NUMBER: (704) 333-5656

Info -
- Application
- Plot plan
- Comments (3)

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

APPLICATION FOR AN IMPROVEMENT PERMIT

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
JUL 3
ENVIRONMENTAL HEALTH DIVISION

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: 6941A
TC: 113-671-11
SERIAL: № 20315
☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 5009 (STREET NO.) Bright Rd., Charlotte, NC (STREET) ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.: 110BC117-805 Brite + Earley Rd.
⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: Greg + Beverly (FIRST) C./M. (MIDDLE) Taylor (LAST)
⑨ MAILING ADDRESS: 5009 Bright Rd.
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28214
⑬ PHONE: (WORK) 393-0207 ⑭ (HOME) 393-3403

REQUEST

This request is for a(n):

⑮ ☐ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☒ Other (specify) Adding 3 bedrooms/rec room

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 1 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: Beverly M. Taylor
Date: 7/3/90

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.

Environmentalist / Date

Director or Authorized Section Head / Date

*This permit must be signed by the Director of Mecklenburg County He

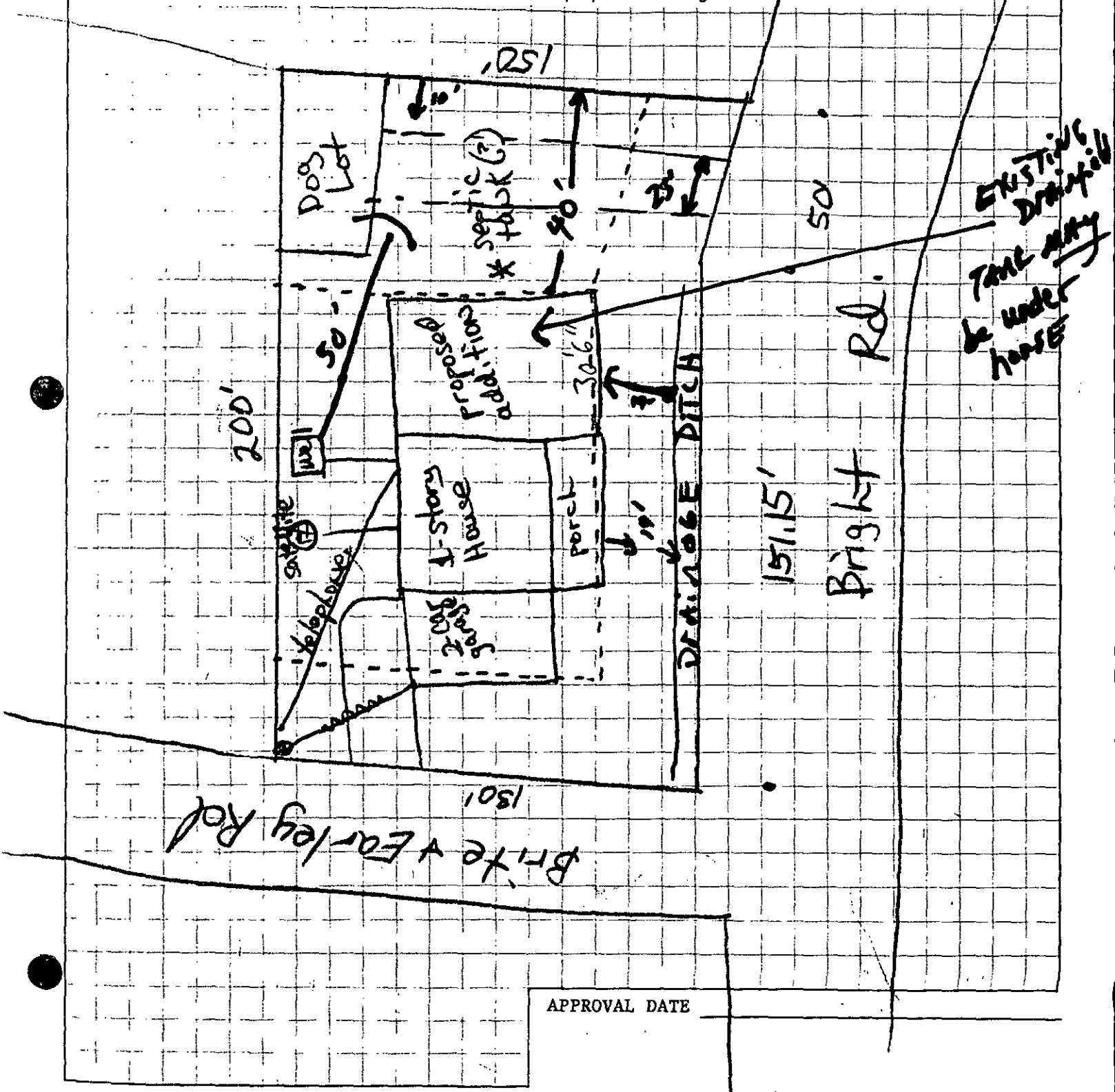
PROPOSED PLOT PLAN

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

FILE: 6941A

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.



APPROVAL DATE _____

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

8/7/90

Taylor Residence
Property : 5009 Bright Rd. Char
TC : 113-071-11
File : 6941-A

- After permit Application was received contact was made 7/31. (Application was recd 7/2/90 & Mr. Ferguson called Ms. Taylor since he had not heard from her.)

- Visited site 8/1/90 & met w Ms. Taylor Application was to add 3 BR plus Rec room to existing 1 BR house.

Ms. Taylor very cordial @ beginning when Ferguson introduced himself

Plan indicated 30ft 6 inches additional width to be added to structure -
Taylor assisted w measurements.

Measurement from proposed addition to property line = approx 40'

With EH restriction 10' off prop line plus 5 ft of proposed addition, 25' feet left to install new drainfield.

Note: Old drainfield must be completely abandoned because addition would be located directly over septic tank + drainfield.

WELL separation distance must be maintained at a minimum of 50' from the system.

This further restricts the available area for drainfield installation



Measurements taken at the front area amounted to less than 20 feet from the porch and any usable area for a system.

With a conventional system a 4 BR house would require 533 linear feet of Drainfield plus septic tank placement area.

Only 270 linear feet could be utilized for an installation plus the placement of the tank.

This will accomodate only a 2 Bedroom residence.

Even this arrangement would require disturbing / replacing part of the old drainfield which is not recommended since the soils may be saturated and not work efficiently.

Another option would be explore the possibility of utilizing A Modified System. However, a soil test would be required to determine if an engineered system would be feasible.

NOTE: Both options would not allow repair area. In other words, if the system fails it cannot be repaired on site.

There are concerns regarding the zoning, easement Area and the exact location of property boundaries. These areas should be clearly marked. Approvals must be secured to place any part of the system in zoning easement areas. (From zoning)

3

Conversation ∈ Ms. Taylor - 8/7/90 1:10 p.m.

Ms. Taylor said survey was different from plot plan. ~~This~~ May allow more Area.

She has also chosen to reduce house to 3 Bedrooms.

She will apply for a soil test, stake property lines plus addition proposal and submit a new application to reflect change in # of bedrooms.

She didn't think 9' spacing between lines was necessary until I explained treatment area. She understood, or seemed to, at that point.

She was advised about a modified system but was told that approval or consideration was based on the soil report.

She was also advised that she would have no repair area remaining after the new system was installed (if approved).

A discussion took place re: acquiring an easement for a repair of a neighbor's property. She said that would be a possibility.

A Soil application and new permit application is being SENT TO Ms. Taylor today.

She seemed content ∈ the information at this point.

J Daniel 8/7/90