

4216 BEATTY DR

11305102

6/6/2007

duponbj

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

M E M O R A N D U M

TO: File 5932A, Property located at 4216 Beatty Drive

FROM: Judy J. Kiser, R.S.

A request was filed for an improvement permit for the above referenced property on April 14, 1993. This request was for the addition of a carport. This request was denied as it was proposed over the septic tank. The letter of denial was written on May 4, 1993 and a copy is in the file.

The existing mobile home is located over the septic nitrification field lines. (The location of the mobile home over these field lines happened apparently in 1989 when a request was made to put a new mobile home on the lot and use the existing system.)

on September 7, 1993, I happened to be on Beaty Road and observed that the carport has been built . When I returned to the office and checked the computer system for releases, I found none had been released by either this department or building standards. I have notified Michael Burkhardt of City-County Building Standards of the violation.

Mecklenburg County
Health Department

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

May 4, 1993

Nina J. Honeycutt
4216 Beatty Drive
Charlotte, North Carolina 28214

Dear Ms. Honeycutt:

Subject: Property located at : 4216 Beatty Drive, File #5932A

Receipt of the plans and specifications for a carport addition at the above referenced property is hereby acknowledged. Upon receipt of the plan, a review was made of the material on file and a site evaluation was conducted. The plan was then reviewed in conjunction with provisions 15A NCAC 18A .1900 "Laws and Rules for Sanitary Sewage Collection, Treatment and Disposal". Our comments are listed below:

Rule .1950 (a) (10) states that placing a building directly over any part of the septic system is prohibited. The required setback is 5 feet for any building foundations. The distribution box is located with two (2) feet of the mobile home and a portion of the existing septic nitrification field is covered by the mobile home. Normally, approximately forty percent (40%) of the effluent in a sewage disposal system is dissipated through evapotranspiration from the drain lines. This treatment is lost with the placement of the mobile home over the drainfield.

This letter is to advise you that you are in violation of the above regulation cited and the application for an improvement permit to add a carport is denied. The original permit issued for the existing mobile home was approved July 27, 1989. At that time the septic tank, distribution box and a portion of the drainfield was uncovered for viewing to confirm the proposed location of the mobile home. The mobile home was not placed on the lot as indicated on the plot plan and in accordance with the improvement permit issued at that time.

If the system fails you will be responsible for taking immediate measures to ensure the proper disposal of sewage from your residence in a manner that will not create a public health hazard.

You may wish to exercise your right of appeal in accordance with G.S. 150B-23. This process begins when you contact this office for direction on proceeding further with the formal hearing.

If you have any questions concerning this matter please contact me at 336-5571

Sincerely,

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

DATE 4/16/93

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION Mck

113-051-02
PARCEL NUMBER

4216 Beatty Dr
ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

NA
PROJECT NAME (IF APPLICABLE)

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

1. SUBDIVISION REGULATIONS	APPROVED	NOT APPROVED
2. FLOODWAY REGULATIONS	APPROVED	NOT APPROVED
3. EROSION CONTROL REGULATIONS	APPROVED	NOT APPROVED
4. COMMERCIAL DRAINAGE PLAN	APPROVED	NOT APPROVED
5. PUBLIC UTILITY EASEMENT	PRESENT	NOT PRESENT
6. PROPERTY FRONTS ON THOROUGHFARE	YES	NO
7. DRIVEWAY PERMIT REQUIRED	YES	NO
8. DOES PROJECT CONFLICT WITH ROAD PROJECT?	YES	NO

REMARKS: Addition

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

ALL OTHER FORMS OBSOLETE

☐ NEW ADDRESS

SIGNED: [signature]

REVISED 1/91

(see file 405/A) LR 405

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

Pd 50.00 Ck# 1095 4/14/93 [ ] CRT

5932A

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

(704)336-5102

Date:

PERSON FILING APPLICATION:

NAME: Banks (last) Michael (first) L. (mi)

ADDRESS: 7105 Pleasant Grove Rd PHONE: (704) 394-3292

CITY: Charlotte STATE: N.C. ZIPCODE: 28216

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 113-051-02

STREET ADDRESS: 4216 Beatty Dr.
Charlotte, N.C. 28216

ZONING:

PROPERTY OWNER:

NAME: Honeycutt (last) Nina (first) J. (mi)

ADDRESS: 4216 Beatty Dr. PHONE: (704) 394-5351

CITY: Charlotte STATE: N.C. ZIPCODE: 28214

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): 1

[ ] 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)
[ ] COMMERCIAL OR INDUSTRIAL (N)
[ ] SOIL TEST DEVELOPMENT (P)
[X] 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):
[X] SINGLE MOBILE HOME (S) [ ] HOUSE (H) [ ] MULTIPLE FAMILY (U)
[ ] DOUBLE WIDE (D) [ ] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: 2 NUMBER OCCUPANTS: 2

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 [ ] 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: Nina J. Honeycutt Date: 4-14-93

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.

...Application denied - See Attached letter dated 5/4/93

[ ] 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

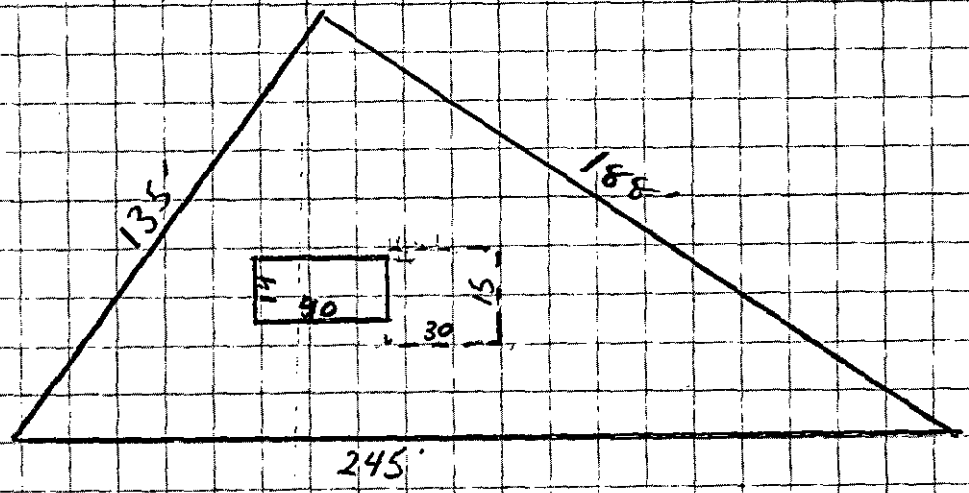
PROPOSED PLOT PLAN

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

FILE: 5932A

TC: 113-051-02

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.



4216 Bently Dr.

APPROVAL DATE _____

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

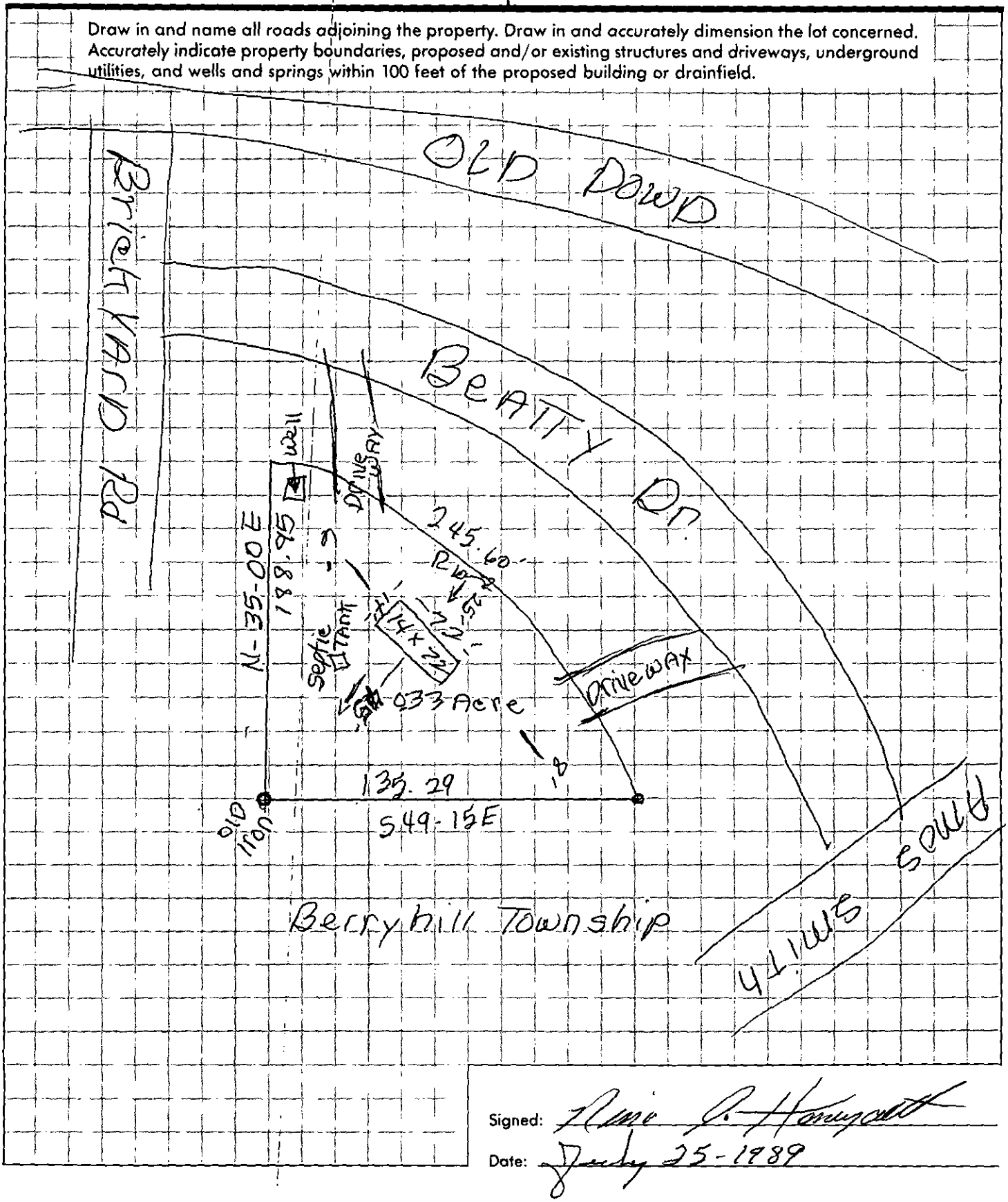
PROPOSED PLOT PLAN

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

FILE: 5932A

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.



Signed: Rene A. Honeycutt

Date: June 25-1989

PROPOSED PLOT PLAN

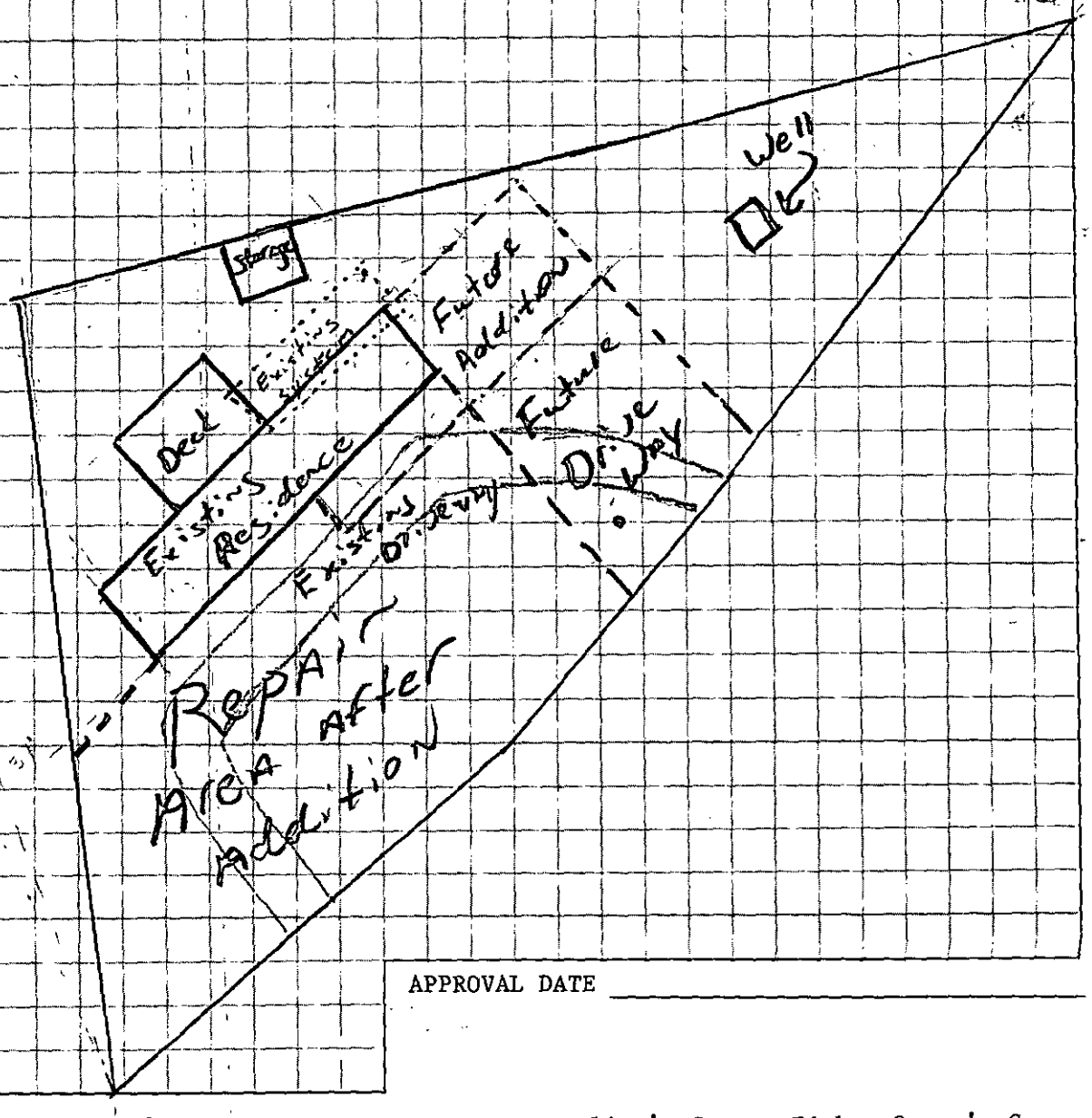
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 5932 A

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.

Note: Gravel floor only in carport addition
Note: Existing driveway area to be used as future repair area



APPROVAL DATE _____

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

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: 5932A
TC: 113-051-~~03~~ 02
SERIAL: № 18888
☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 4216 Beatty Dr Charlotte, N.C. 28214 (STREET NO. / STREET) ② FILE: 113-051-02
③ JURISDICTION: Berry hill Township ④ TAX PARCEL NO.:
⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: Nina Jo Honeycutt (FIRST / MIDDLE / LAST)
⑨ MAILING ADDRESS: 4216 Beatty Dr.
⑩ CITY: Charlotte, N.C. ⑪ STATE: N.C. ⑫ ZIP: ~~28214~~ 28214
⑬ PHONE: (WORK) 551-6606 ⑭ (HOME) 392-0831

REQUEST

This request is for a(n):

⑮ ☒ New permit
⑯ ☐ Repair or alteration permit
⑰ ☑ Authorization for mobile home exchange
⑱ ☐ Other (specify)

DESIGN CRITERIA

System will serve:

⑲ ☐ Residence ⑳ ☒ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 2
㉓ Maximum occupancy? 2
㉔ Basement? ☐ yes ☒ no
㉕ Type?
㉖ Maximum number of employees?
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: Nina Jo Honeycutt
Date: July 25 - 1989

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 existing system.

Judy J. Kaser R.S. 7/27/89
Environmentalist Date

Director or Authorized Section Head 7-27-89 Date

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

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

DATE: 7-25-89

NAME/COMPANY: Nina Honeycutt

Sanitation _____

Vector Control _____

OPWD ✓

SERVICE: IP. Mobile Home Exchange
Beatty Dr.

MECK COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

JUL 25 1989

CR# 2321
25.00

FEE: 25.00

Jackie Abernethy
Completed By

Collected By

APPLICATION FOR AN IMPROVEMENT PERMIT

Pd 10-22-87
50.00 20741

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: 7051A 5932A
TC: _____
SERIAL: Nº 14830 ☐ L ☑ CRT

JOB LOCATION

① ADDRESS: 4216 BEATTY Drive CHARLOTTE N.C. (STREET NO. / STREET) ② FILE: _____
③ JURISDICTION: _____ ④ TAX PARCEL NO.: 11305102
⑤ SUBDIVISION: _____ ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: WILLIAM R (FIRST) Hill (MIDDLE) & ANN (LAST) Hill
⑨ MAILING ADDRESS: 4250 S-I-85
⑩ CITY: CHARLOTTE ⑪ STATE: NC ⑫ ZIP: 28214
⑬ PHONE: (WORK) 377-1567 ⑭ (HOME) 392-3302

REQUEST

This request is for a(n):

⑮ ☑ New permit
⑯ ☐ Repair or alteration permit
⑰ ☑ Authorization for mobile home exchange
⑱ ☐ Other (specify) use that system

DESIGN CRITERIA

System will serve:

⑲ ☐ Residence ⑳ ☑ Mobile home
㉒ Number of bedrooms? 3
㉓ Maximum occupancy? 3
㉔ Basement? ☐ yes ☒ no

㉑ ☐ Business or place of public assembly
㉕ Type? _____
㉖ Maximum number of employees? _____
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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Ann Hill
Date: 10-22-87

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, 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 existing system.

Judy J. Kaser RS, 10/23/87
Environmentalist Date

S. D. Davis, RS, 10/26/87
Director or Authorized Section Head Date

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

PROPOSED PLOT PLAN

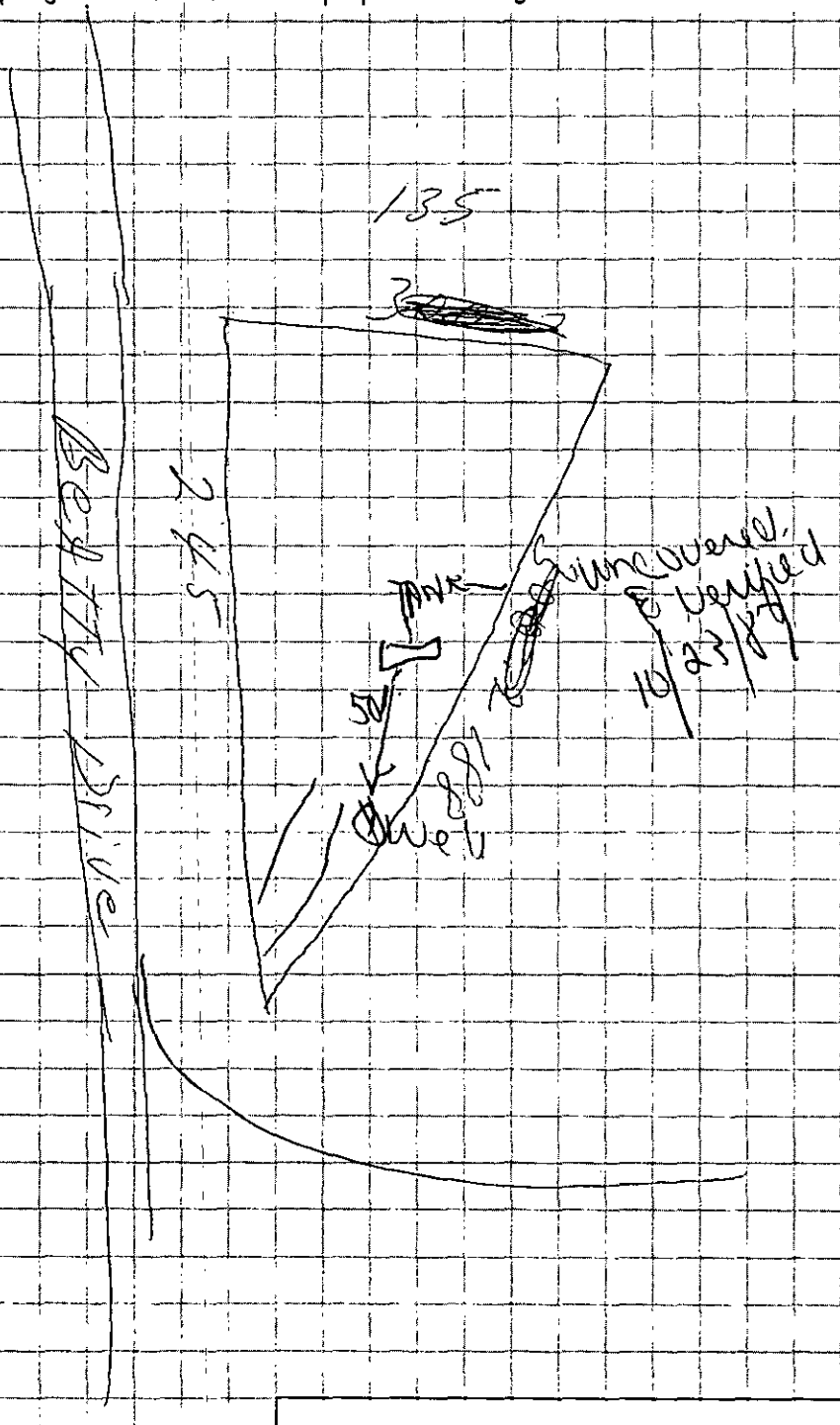
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

5932A

FILE: 4051A

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.



Signed: _____

Date: _____