

16309 TERRY LN

00102346

5/22/08

marliwr

Groundwater and Wastewater Services File Imaging Project
May 2007
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INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

3834 CR# 2629 #50.00 10/27/95 [] 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 ow

PERSON FILING APPLICATION:
NAME: Walch (last) Jan (first) W (mi)
ADDRESS: 16309 Terry Ln PHONE: (__) 875-8333
CITY: Huntersville STATE: NC ZIPCODE: 28078

Date: 10/27/95

PROPERTY OWNER:
NAME: Walch (last) David + Janet (first) (mi)
ADDRESS: same PHONE: (__) _____
CITY: STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 001-023-46
STREET ADDRESS: 16309 Terry Ln Huntersville, NC 28078
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: 13 LOT SIZE (in acres):

TYPE APPLICATION (check one):
[] 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) fam rm + sc. porch
[] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
[] SINGLE MOBILE HOME (S) [x] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [] MODULAR HOME (M) [] OTHER _____ (O)

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 3
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 [x] Other ~~fam rm + sc. Porch~~

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: Walch Date: 10/27/95 ow

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

...No work shall be conducted on the septic tank system until an installation, Construction, Alteration and/or Repair approval is granted by this Department.

...This permit is not transferable.

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

...11/1/95 OSR. Jan Walch present. 5' setbacks not met. Disapproved. See Letter dated 11/6/95 on file

Lisa B. Mialik, RS 2/28/96
Environmentalist Date

2/28/96 OSR. Jan Walch present. Additions approved. See 2/28/96 plot plan signed by Jan Walch. WKS for kitchen extension, family room, + screened porch. JSM

for S. Daniel Regan, Chief 2/6/96
Director or Authorized Section Head Date

WATER : 122791

PROPOSED PLOT PLAN

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

FILE: 3834

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.

"SEE Attached"

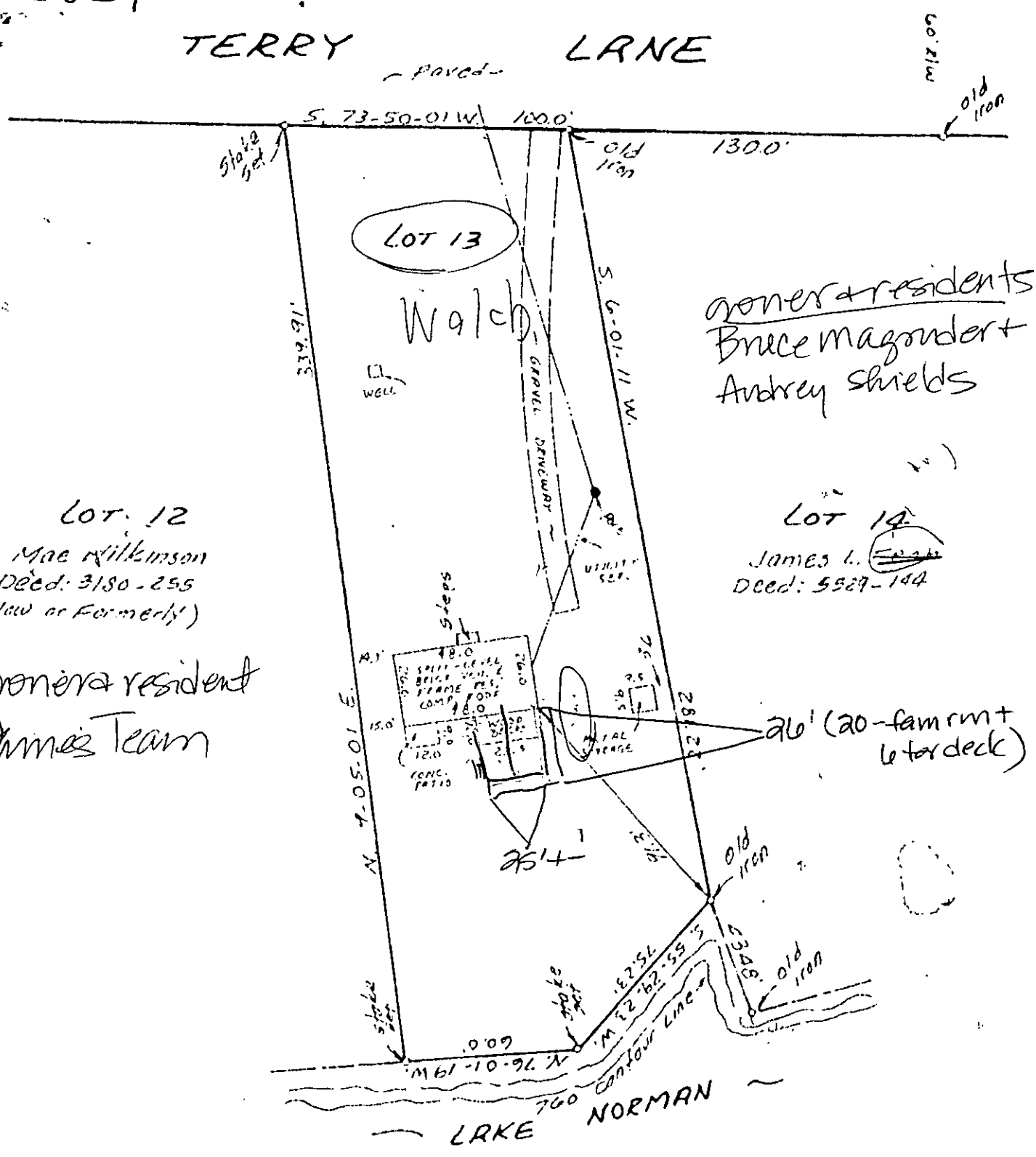
APPROVAL DATE _____

OWNER/AGENT SIGNATURE

DATE

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

3834



BOUNDARY & PHYSICAL SURVEY OF

LOT IN LEMLEY TOWNSHIP, MECKLENBURG COUNTY, NORTH CAROLINA, IN THE CITY OF _____ ON TERRY LANE HOUSE NO 16309 SHOWN AS LOT NO 13 ←

IN BLOCK NO _____ ON MAP OF BROWN'S COVE MAP RECORDED IN BOOK 12 PAGE 31

DEED RECORDED IN BOOK _____ PAGE _____ OFFICE OF THE REGISTER OF DEEDS FOR MECKLENBURG

COUNTY, N C THE PROPERTY OF _____

DAVID C. WALCH & WIFE, JANET W. WALCH

SCALE 1" = 50' FT. DATE 4-26 19 89 REECE McRORIE SURVEYOR CHARLOTTE, N. C.

DUNCAN-PARNELL, INC., CHARLOTTE 704-372-7700

address not on MIS List

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES Credit 2629 $50.00 10/27/95 [] CRT

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COPY

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Signed: Janet Walch Date: 10/27/95 DW

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late

...10/30 vm from Mrs. Walch @ 12:06 PC to Mrs Walch @ 2:15 NC - Ln to stake addition. 2/29

10/31 vm from Jan Walch. 11/1 PC w/ Jan Walch. Jan

11/1 OSR. Jan Walch present ~~5' setbacks not met.~~ Jan

Environmentalist

UXS for kit. extension, family room + screened porch

Director or Authorized Section Head

UXS for kit. ext. family room, sc. porch.

WATER

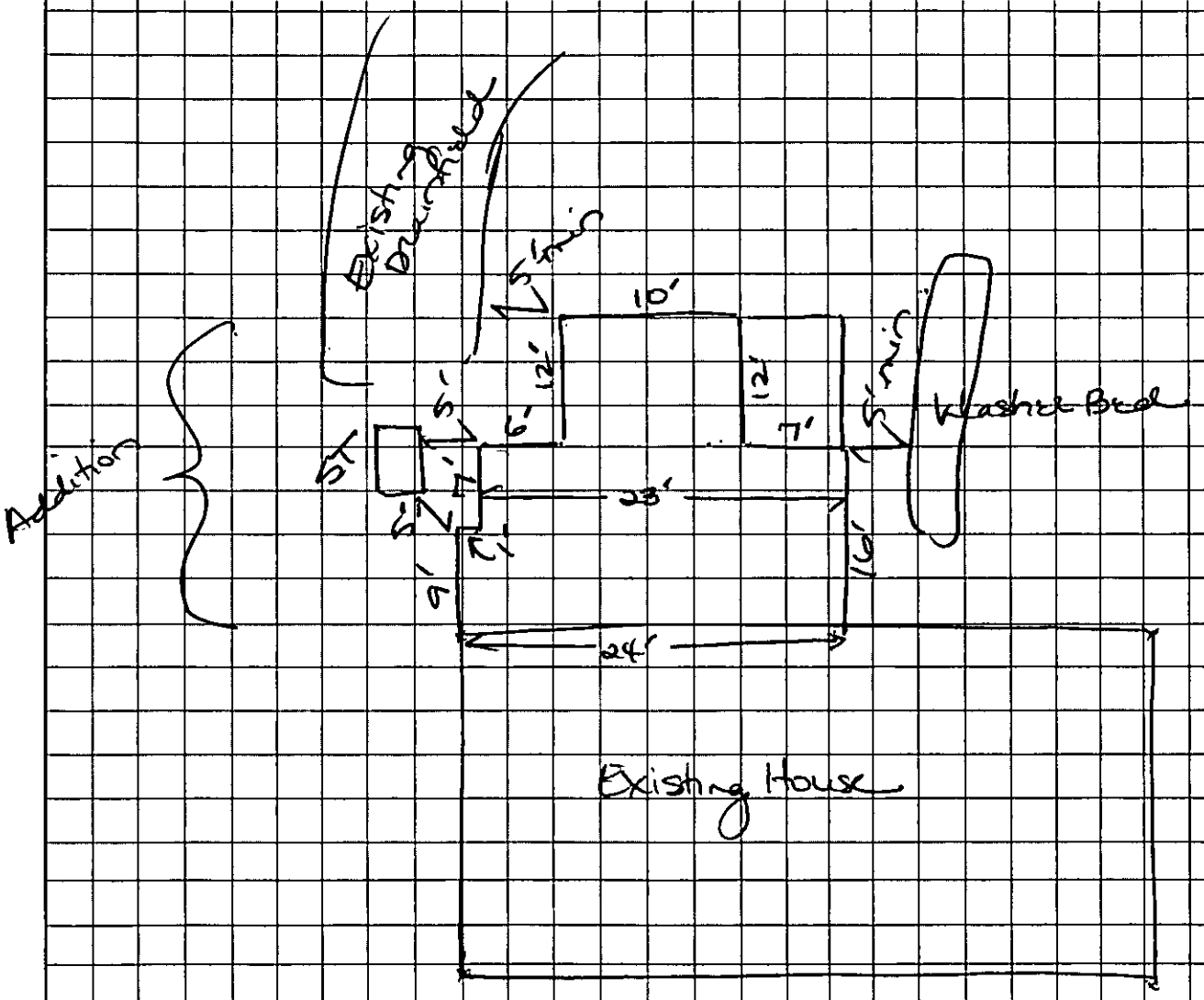
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TC: 001-023-46

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Use existing system
for kitchen extension, family room, & screened porch additions.
- No change in sewage flows.
Additions must be minimum of 5' from any part of the sewage disposal systems.

Janet W. Walsh
OWNER/AGENT SIGNATURE

DATE 2/28/96

APPROVAL DATE 2/28/96 Jose B. Mialik, RS

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

Mecklenburg County
Health Department

November 6, 1995

David & Janet Walch
16309 Terry Lane
Huntersville, NC 28078

Re: 16309 Terry Lane
File: 3834
Parcel: 001-023-46

Dear Mr. & Mrs. Walch:,

Receipt of your application for a family room and screened porch/deck addition at the above referenced location is hereby acknowledged.

Upon receipt of the application, a review was made of the material on file and a site evaluation was conducted. The plan was then reviewed in conjunction with the provisions of 15A NCAC 18A .1900 "Laws and Rules for Sewage Treatment and Disposal Systems."

It appears as though the septic tank and a portion of the septic tank system drainfield are within five feet of the proposed addition as staked. This was determined via probing the area. 15A NCAC 18A .1950, Location of Sanitary Sewage Systems (a)(10) states: "Every sanitary sewage treatment and disposal system shall be located at least the minimum horizontal distance from....any building foundation, 5 feet." Deck supports are considered to be "foundation".

For this reason, the request as submitted is disapproved. A smaller addition meeting the required setbacks could be approved if you so desire; This was discussed with Janet Walch during my on site visit made on November 1, 1995.

If you have any question, please feel free to contact me at 336-5573.

Sincerely,

Lisa B. Mialik

Lisa B. Mialik, R.S.
Individual Water and Wastewater Systems

Mecklenburg County
Health Department

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