

3820 CHERRYBROOK DR

13935205

5/18/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

D4400

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

FILE: 4473-A DATE: 11-10-93

TC: ~~139-021-12~~ 139-352-05 ☐ L ☐ CRT

SERIAL Nº 15710

Name of Owner Cherry Homes Juris.:

Address of Property 3820 Cherrybrook Dr

Inspection Data:

Tank Material PLC

Total Length of Drainfield 400'

Number of Lines 4 @ 100'

Cover Depth 16"-24"

Water Supply Source Comm

Distance to Water Source 100'+ (water line not installed at time of inspection)

Excavation Inspected 11-10-93

Tank(s) Inspected 11-10-93

Wash Line Inspected ——

High Water Alarm Inspected ——

533-4133
Mark Wheeler.

PLOT

Design: 1993, 1500 gst, 1200 sqft drainfield at 4 lines at 3'x100'x12" stone each, ccl CTR# Norwood 82

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 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The 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 10 NCAC 10A .1900 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.

COMMENTS: 3 bedroom house only; All available space left on property is for repair area. Tested

Lisa Patterson
Environmentalist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

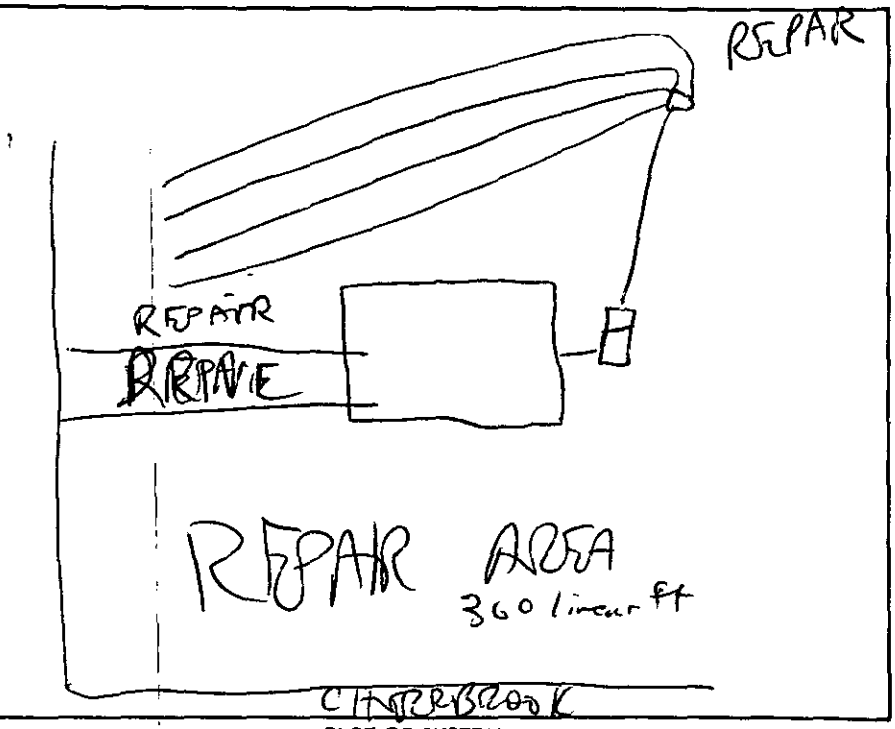
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 4473-A DATE: 11-2-93

TC: 139-021-12 ☐

SERIAL Nº 15638

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 6-30-93. All work shall be completed on or before 12-2-93, 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 PCC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 400 feet

Number of Lines 4

Depth of Stone 12 inches

Distance from House 5' ± feet

Distance from Property Line 10' ± feet

Distance from Well 100' ± feet

NAME OF OWNER CHERRY HOMES

LOCATION OF PROPERTY 3820 CHERRY BROOK DR.

Comments: 4 lines @ 100' x 3' wide x 12" rock

Judy Koon RS for S. Daniel
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

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

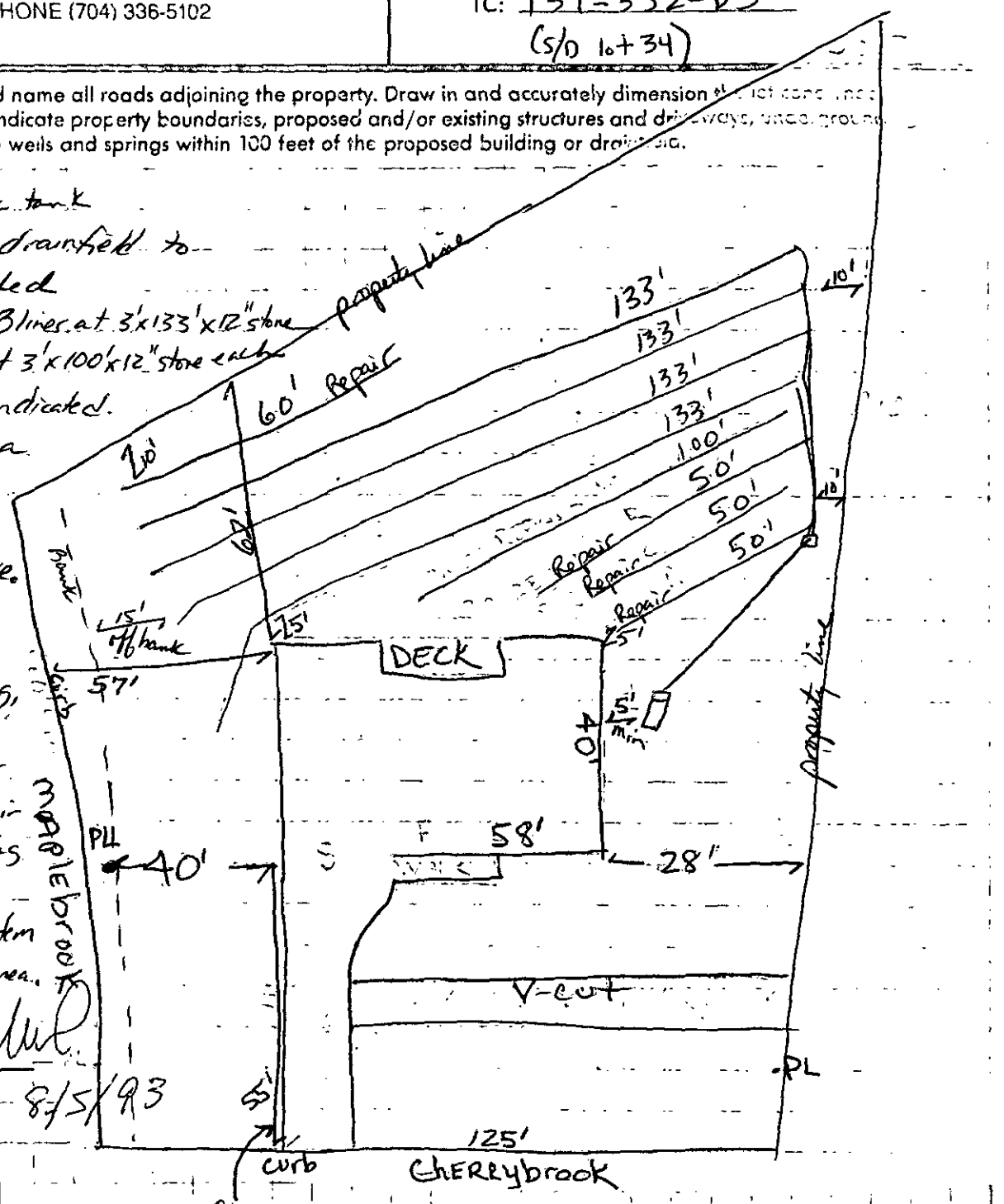
FILE: 4473-A

TC: 139-352-05
(S/D lot 34)

Draw in and name all roads adjoining the property. Draw in and accurately dimension all lot corners. Accurately indicate property boundaries, proposed and/or existing structures and driveways, wells, ground utilities, and wells and springs within 100 feet of the proposed building or drainage.

1500 g septic tank
1200 sq ft drainfield to be installed at either 3 lines at 3'x133'x12" stone or 4 lines at 3'x100'x12" stone each. Other lines indicated are repair area lines.
Design for a 3 bedroom house.
There is to be no grading, paving, well drilling (within 50' of system or its repair area) or building in area of septic tank system or its repair area.

Dan O Ballard
property owner sign & date 8/5/93



APPROVAL DATE [signature] 8-5-93

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

Mecklenburg County
Health Department

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

July 16, 1993

Mr. David Ballard
11407 E. Independence Blvd
Matthews, NC 28105

Re: 3820 Cherrybrook Drive
File: 4473-A
Parcel: 139-352-05

Dear Mr. Ballard:

Receipt of the plans and specifications for a conventional system of sewage disposal to serve a four bedroom residence for the above property is hereby acknowledged. Upon receipt of the information, a review was made of the material on file and a site evaluation was conducted. The plan was then reviewed in conjunction with provision of 15A NCAC 18A .1900, "Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal". Our comments are listed below:

> ..1948 (c) "Sites classified UNSUITABLE have severe limitations for the installation and use of properly functioning ground absorption sewage treatment and disposal system. An improvement permit shall not be issued for a site which is classified as UNSUITABLE. However, where a site is UNSUITABLE,it may be reclassified PROVISIONALLY SUITABLE if a special investigation indicates that a modified or alternative system can be installed in accordance with Rules .1956 or .1957 of this Section."

For these reasons the plans as submitted are disapproved. A possible way to develop the site includes an original system designed as a conventional sewage system with required repair area designed under .1956 Modifications to Septic Tank Systems (3)(a)(ii). Please be advised that you have the right to an informal review by this department and the right of appeal under G.S. 130A-340.

If you have any questions regarding these matters, please do not hesitate to contact me at 336-5569.

Sincerely,

Susan Bateman, R.S.
Individual Water and Wastewater Systems

12400 LA

~~4544A~~ 4473A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

P&D 200.00 CK 2365 6/30/93 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

Date: 6-30-93

PERSON FILING APPLICATION:

NAME: BALLARD (last) DAVID (first) B (mi)

ADDRESS: 11407 E INDEPENDENCE PHONE: (704) 847-8300

CITY: MATTHEWS STATE: NC ZIPCODE: 28105

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 139-021-12

STREET ADDRESS: 3820 Cherrybrook Dr Charlotte NC

ZONING:

PROPERTY OWNER:

NAME: CHERRY HOMES INC (last) (first) (mi)

ADDRESS: 11407 E INDEPENDENCE PHONE: (704) 847-8300

CITY: MATTHEWS STATE: NC ZIPCODE: 28105

SUBDIVISION OR MOBILE HOME PARK NAME:

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

LOT NUMBER: 34 LOT SIZE (in acres): .56

TYPE APPLICATION (check one):

[ ] SOIL TEST - INDIVIDUAL LOT (D)
[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: 4/3 NUMBER OCCUPANTS: 8/6 max

SYSTEM CLASSIFICATION: CONV

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ___ Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type _____

WATER SUPPLY (check one):
[X] Community (C) [ ] Shared Well (S)
[ ] Municipal (M) [ ] Other 'spring' (O)
[ ] 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 [X] 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: David O Ballard Date: 6-30-93

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.

...Changed to max 3 bedrooms (see plot plan)

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

Susan Patterson 8-5-93
Environmentalist Date

Director or Authorized Section Head 8/9/93 Date

WWATER : 122791

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

DATE: 6/30/92

FROM: COUNTY ENGINEERING DEPARTMENT

EHD FILE _____ JURISDICTION CODE Mint

PARCEL NUMBER 139-021-12 po

ASSIGNED ADDRESS 3820 Cherrybrook Dr

EXISTING ADDRESS lot 34

PROJECT NAME Forestbrook 2

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: Septic tank

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIER'S OFFICE AT BUILDING STANDARDS WHEN PAYING PERMIT FEES.

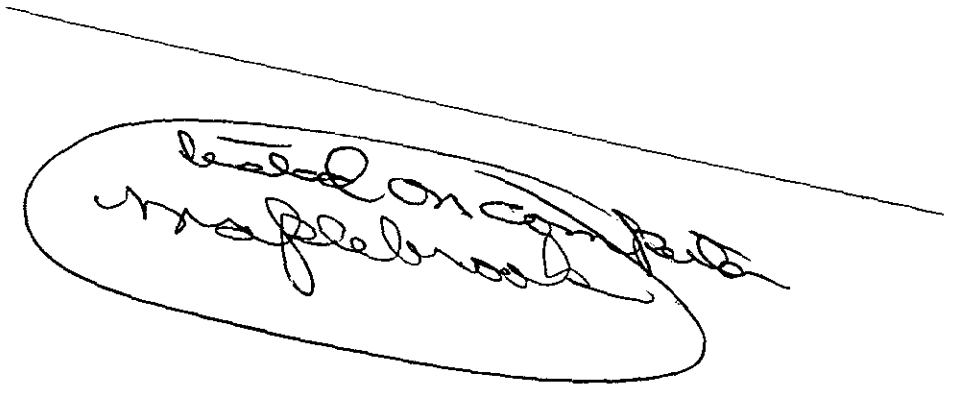
A CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL THE TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAYS.

SIGNED: Power

OPWEAR 06-88

NEW ADDRESS _____*

FORM 100



Mecklenburg County
Health Department

Basil G. Dalta, M.D., M.P.H.
Health Director

November 2, 1989

TO: Susan P. Latimer
Accountant I

FROM: Lorraine C. Whitaker
Accounting Technician I

SUBJECT: Request for Refund/ Environmental Health Services

The following refund is requested:

AMOUNT: $100.00

ORG/ACCOUNT # 462-3511

PAYABLE: M.T. Contractors, Inc
P. O. Box 221408
Charlotte, North Carolina 28222

DATE OF ORIGINAL DEPOSIT: 10/26/89

REASON: Imp/Instal Permit fee $200.00. Client withdrew his application. The client was only charged for the Improvement permit, which is the service he received.

/Enclosures

Mecklenburg County
Health Department

Basil G. Delta, M.D., M.P.H.
Health Director

October 31, 1989

MEMORANDUM

TO: Lorraine Whittaker

FROM: Sylvia D. Daniel, R.S.
Program Chief

Please issue a refund in the amount of $100.00 for an improvement permit application at 3820 Cherrybrook Dr., Charlotte, NC (File #4473A). Client withdraw his application. Please make the refund payable to:

M.T. Contracors, Inc.
P.O. Box 221408
Charlotte, NC 28222

Thank you for your prompt attention to this matter.

Mecklenburg County
Health Department

Basil G. Deltu, M.D., M.P.H.
Health Director

October 26, 1989

Mr. Mark Wheeler
M.T. Contractors
PO Box 221408
Charlotte, NC 28233

RE: Property located at 3820 Cherrybrook
FILE: 4473A
PARCEL: 139-021-12

Dear Sir:

Receipt of your plans for a modified waste disposal system for the property referenced above is acknowledged.

Your plans for the modified system for the above property as submitted are approved with the following comments:

- The well should be located 100 feet or no less than 50 feet away from any part of the sewage disposal system and repair area.
- Water saving plumbing devices and low flush or microflush toilets must be installed when constructing the residence.
- Occupants to utilize maximum water conservation measures wherever possible.

Upon execution and recording with the Register of Deeds Office, Mecklenburg County, of the enclosed "Septic Tank Agreement Form", an Improvements Permit may be issued by this office.

Sincerely,

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

GV/ir

Enclosures - 3 Septic Tank Agreement Forms

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

PRESENTED FOR REGISTRATION
89 OCT 26 PM 1:35
ANNE A. POWERS
REGISTER OF DEEDS
MECKLENBURG CO., N.C.

FILE NO. 4473A

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

ACKNOWLEDGEMENT OF REQUEST BY OWNER FOR RECLASSIFICATION OF SITE FROM "UNSUITABLE" TO "PROVISIONALLY SUITABLE" UNDER 10 NCAC 10A .1948(c)

The undersigned, Mark R Wheeler Vice President MT Contractors Inc, owner of property located at 3820 cherrybrook · Matthill NC 28227, ("the site") and described in an instrument recorded in Book 5597 at Page 405, Mecklenburg Public Registry, hereby acknowledges that he applied to the Mecklenburg County Department of Environmental Health ("the Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 10 NCAC 10A .1934 et seq; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested pursuant to 10 NCAC 10A .1948(c) that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data and other information which indicate to the Department that the septic tank system proposed by the undersigned can reasonably be expected to function satisfactorily and thus that the findings specified in 10 NCAC 10A .1948(c)(1), (2), and (3) can be made; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is his responsibility and that neither the Department nor its officials, employees or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

The undersigned further agrees for his heirs and assigns that, in the event any septic tank system installed under authority of the aforesaid permit fails to perform adequately in any respect, he will take whatever measures are required to correct same; or if such is impossible he will discontinue use of said system immediately.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

This 26 day of October, 1989.

Mark R Wheeler (SEAL)
Vice President MT Contractors Inc

Pamela S Butler (SEAL)
Secr, MT Contractors Inc

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, Pamela S Butler, a Notary Public for said County and State, do hereby certify that Mark R Wheeler personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 26th day of October, 1989.

Pamela S Butler
Notary Public

My Commission Expires November 5, 1992

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 10-26-89

Name/Company: M-T Contractor, Inc

Sanitation _____

Vector Control _____

O.P.W.D. ✓

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
OCT 26 1989

Service: I.P. New

3820 Cherrybrook

File # 4473A

Ck # 1250

Fee: $200.00 $200.00

NOTICE:

A processing fee of $15.00 will be charged for all returned checks in accordance with N.C. General Statute 25-3-512.

Jackie Abernethy
Completed by

Collected by

BILLING -- WHITE

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: 4473A
TC: 139-021-12
SERIAL: № 19418
☑L ☑CRT

JOB LOCATION

① ADDRESS: 3820 (STREET NO.) Cherry brook DR (STREET) Charlotte NC 28212 ② FILE: 4473A
③ JURISDICTION: Meck ④ TAX PARCEL NO.: P.O. 139-021-12
⑤ SUBDIVISION: Forestbrook ⑥ LOT: 34 ⑦ BLOCK:

OWNER

⑧ NAME: MT (FIRST) Contractors (MIDDLE) Inc (LAST)
⑨ MAILING ADDRESS: Po Box 221408
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28222
⑬ PHONE: (WORK) 563-2101 ⑭ (HOME) 563-5025

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? 3 ㉕ Type? _____
㉓ Maximum occupancy? 6 people 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: Mark R Wheeler
Date: 10/25/89

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
S. D. Reid FOR REH 10/26/89
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.

PROPOSED PLOT PLAN

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

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

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
AUG 19 1989
ENVIRONMENTAL HEALTH
DIVISION

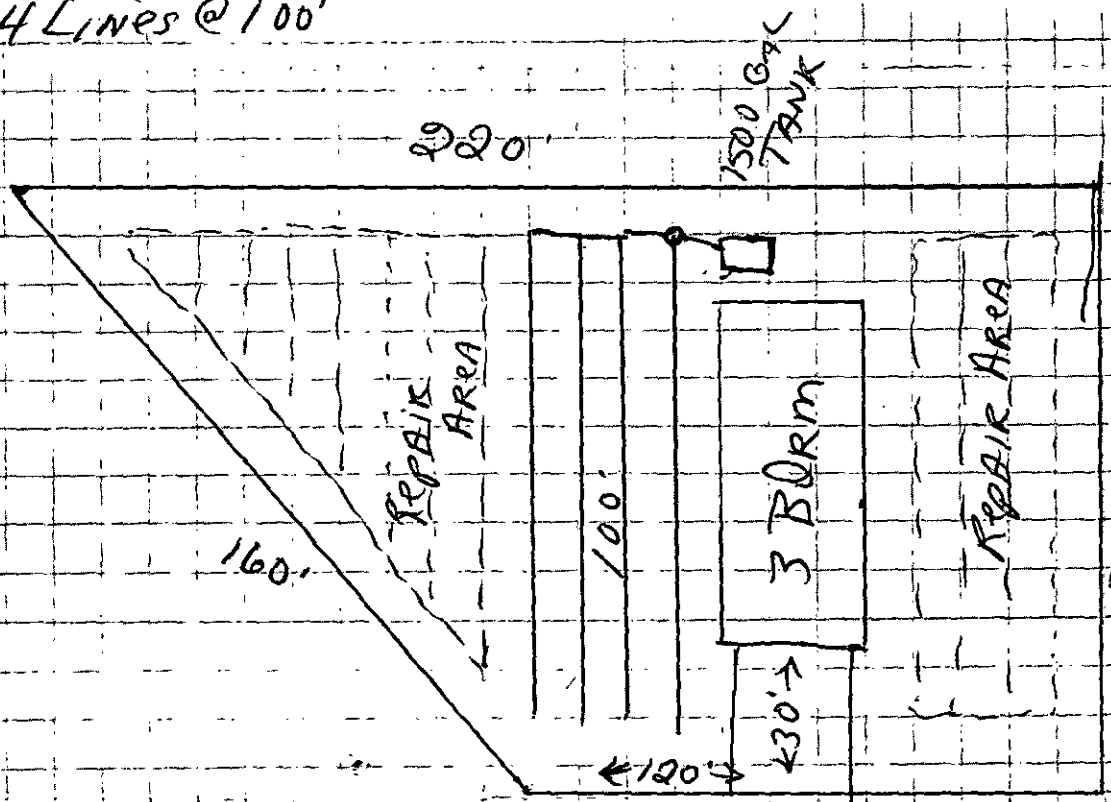
FILE: 4423A

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.

1500 GAL TANK

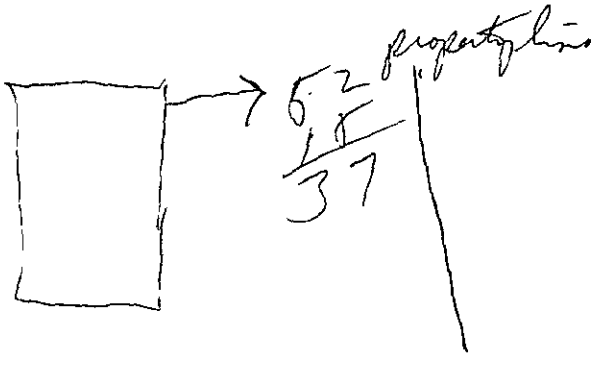
4 LINES @ 100'



Lot 34 3820 Cherrybrook Drive

Signed: Richard Gillam

Date: 8-19-89


property line

INTERSTATE DEVELOPMENT CORPORATION

Of Charlotte, Inc.

June 22, 1989

Mr. Bill Ferguson
Dept. of Environmental Health
1200 Blythe Blvd.
Charlotte, N.C. 28203

RE: File # 4473A (LOT 34)

Dear Mr. Ferguson:

Enclosed you will find a copy of the approved permit on this lot you signed on October 17, 1988. That design was for a particular customer who wanted a ranch plan on that lot.

That buyer got away from us. I now have a builder who is interested in building a four-bedroom house on that lot. Attached is a drawing by Cathy Hudson of RCS on how this lot and system should fit.

Please review this and let us know if it is possible.

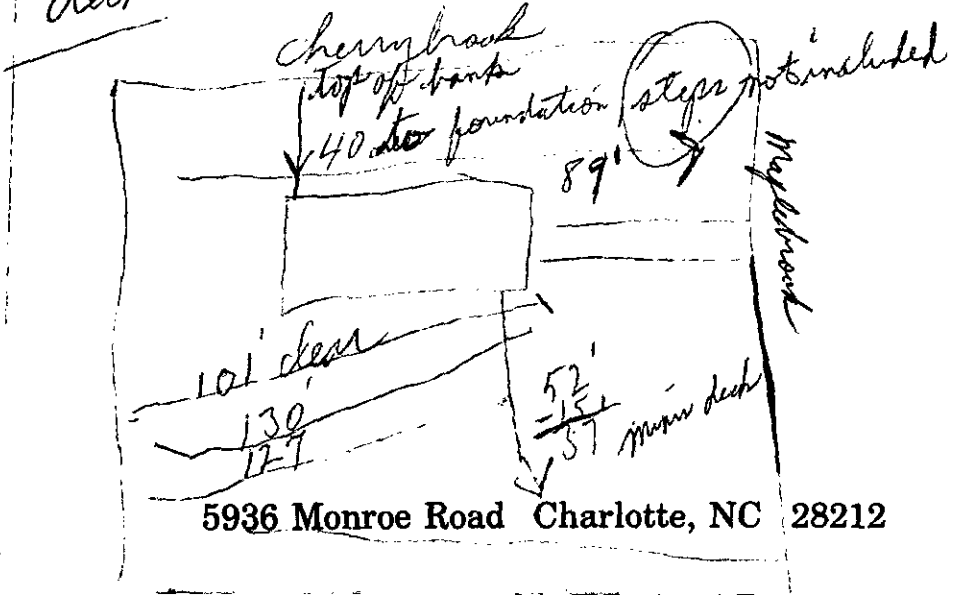
Very truly yours,

Skip Bennett

SB/lf

called Skip 6-29
told on computer
change back to 3 bedrooms

actual blueprint house size?
deck?



5936 Monroe Road Charlotte, NC 28212

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.

9-28-88

(OFFICE USE ONLY)
FILE: 4473A
TC: 139-021-12 PO #: 150.8-880
SERIAL: NS 16195 CRT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
AUG 12 1988

JOB LOCATION

① ADDRESS: 8839 (3820 Cherry Brook) HATTLEBROOK Ave, CHAR, NC 28212 ② FILE: 4473A
(STREET NO.) (STREET)

③ JURISDICTION: MECK ④ TAX PARCEL NO.: P.O. 139-021-12

⑤ SUBDIVISION: FOREST BROOK ⑥ LOT: 34 ⑦ BLOCK:

OWNER

⑧ NAME: Interstate (FIRST) Development (MIDDLE) Corp (LAST)

⑨ MAILING ADDRESS: 5936 Monroe Rd

⑩ CITY: Charlotte ⑪ STATE: N.C. ⑫ ZIP: 28212

⑬ PHONE: (WORK) 537-3847 ⑭ (HOME) 364-7789

REQUEST

This request is for a(n):

⑮ ☒ New permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify)

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? 6 ㉖ Maximum number of employees?

㉔ Basement? ☐ yes ☒ no ㉗ Maximum number of seats?

RECEIVED
OCT 19 1988

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: Mal A Mahula - Pres. T.

Date: July 8, 1988

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.

B R Ferguson 10/17/88
Environmentalist Date

Director or Authorized Section Head 10/17/88 Date

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

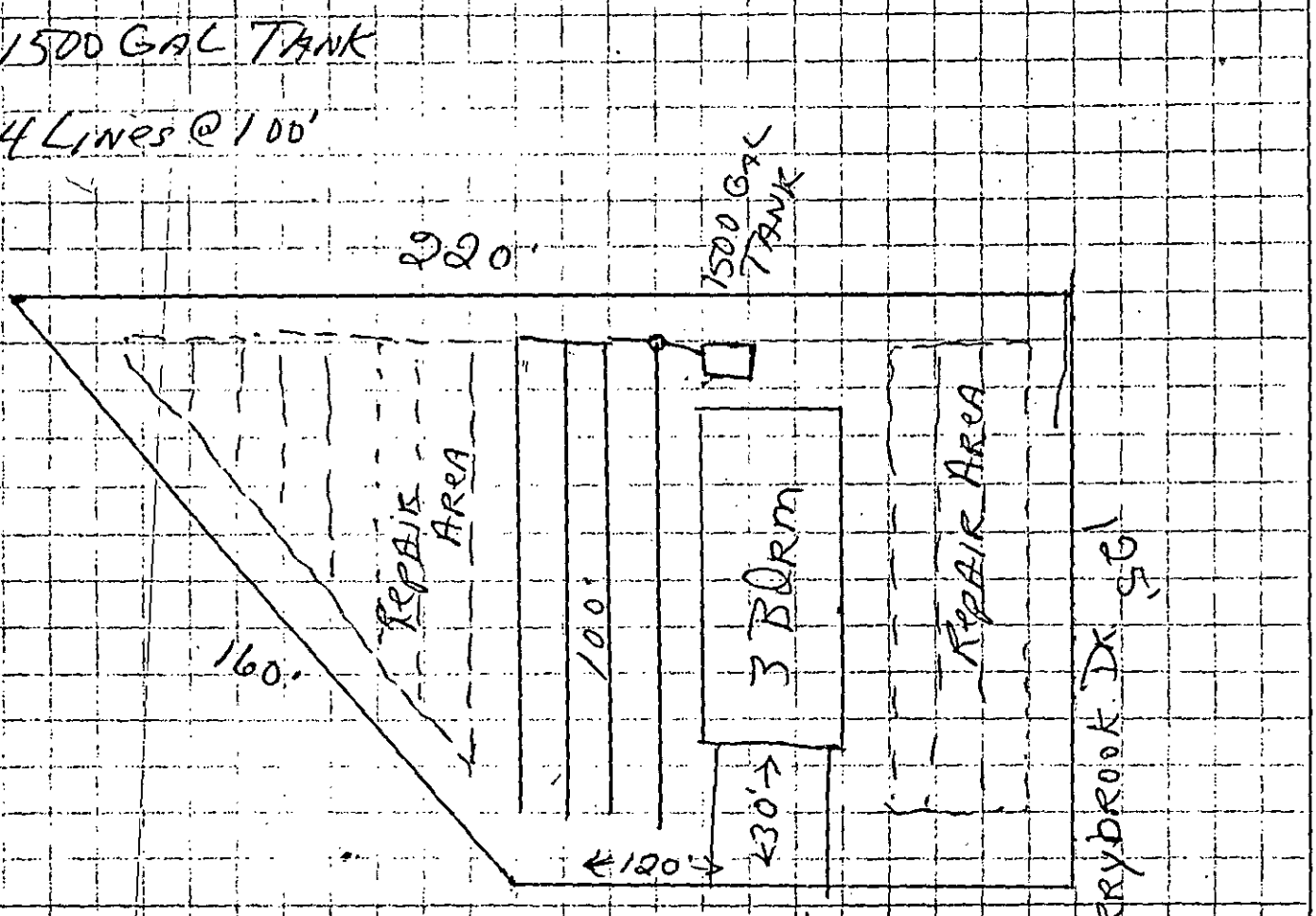
PROPOSED PLOT PLAN

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

FILE: 4473A

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: Richard Williams

Date: 8-18-88

R. C. S., Inc.

Septic Tank Installation & Service

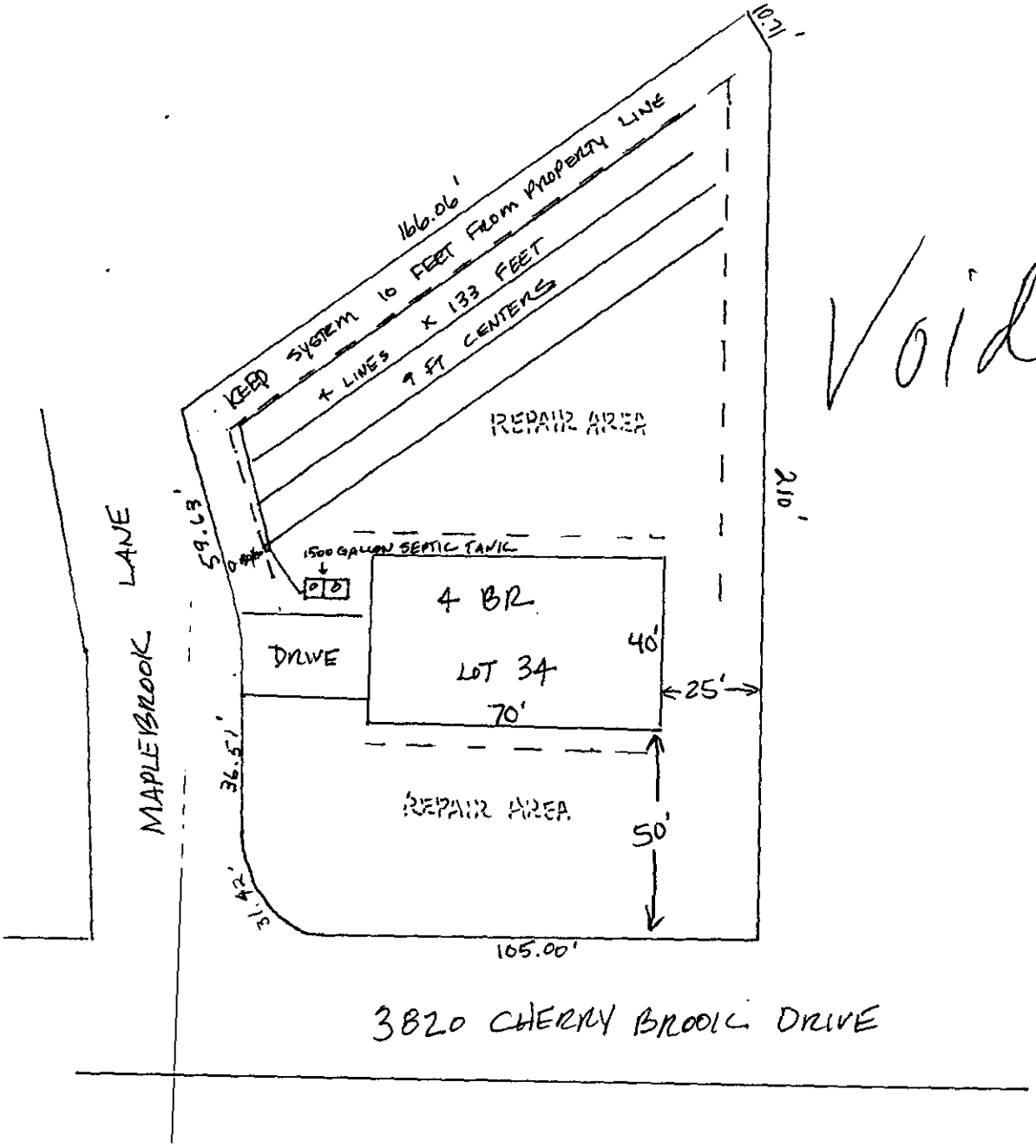
Stafford Street
Post Office Box 708
Monroe, North Carolina 28110
Phones: 704-283-7539 or 376-9359

INTERSTATE DEVELOPMENT CORP.
5936 MONROE ROAD
CHARLOTTE, NC 28212

FILE 4473A

DATE: JUNE 22, 1989

SCALE: 1"=40'



Void

3820 CHERRY BROOK DRIVE

APPLICATION FOR AN IMPROVEMENT PERMIT

MECK: HEALTH DEP
ENVIRONMENTAL HEALTH DIVISION
PAID
AUG 12 1988

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.

9-28-88

(OFFICE USE ONLY)

FILE: 4473A

TC: 139-021-12 PO # 150.00 CW

SERIAL: № 16195 Cert 0214 ☒ ☒ CRT

JOB LOCATION

① ADDRESS: ~~8839 MAPLEBROOK LANE~~ 3820 Cherry brook CHAR., NC 28212 (STREET NO. / STREET) ② FILE: 4473A

③ JURISDICTION: MECK ④ TAX PARCEL NO.: P.O. 139-021-12

⑤ SUBDIVISION: FOREST BROOK ⑥ LOT: 34 ⑦ BLOCK: ____

OWNER

⑧ NAME: Interstate (FIRST) Developement (MIDDLE) Corp (LAST)

⑨ MAILING ADDRESS: 5936 Monroe RD

⑩ CITY: Charlotte ⑪ STATE: N.C. ⑫ ZIP: 28212

⑬ PHONE: (WORK) 537-3847 ⑭ (HOME) 364-7789

REQUEST

This request is for a(n):

⑮ ☒ New permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify) ____

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home 6/22/89 ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? ~~3~~ 4 RLD 3 CMH 7/10/89 ㉕ Type? ____

㉓ Maximum occupancy? ~~6~~ 8 RLD 6/22/89 6 CMH 7/10/89 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 into the property for the purpose of processing this request.

Signed: Mohr A Moddala - Pres.

Date: July 8, 1988

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.

B.R. Ferguson — Environmentalist — 10-17-88 — Date

Director or Authorized Section Head — 10-17-88 — 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
Department of Environmental Health

May 24th, 1988

Interstate Development Corp.
5936 Monroe Road
Charlotte, NC 28212

RE: Property located at Maplebrook Lane 34
FILE: 4473A
PARCEL: 13902112 PO

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 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 15159) is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, 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. The plan will be reviewed and if it is found that the area of provisionally suitable soils is adequate for the proposed construction, an Improvement Permit will be issued by this Department.

If I may be of assistance, please do not hesitate to contact me.

Sincerely,

Sylvia D. Daniel, R.S.
Environmental Health Supervisor
Environmental Resources Division

Enclosure

CKLENBURG COUNTY ENVIRONMENTAL HEALTH
E EVALUATION REPORT
RIAL NUMBER 15159

File: 4473A Action /

Parcel: 13902112 PO ☐ PC

cation: Maplebrook Lane

ubdivision:

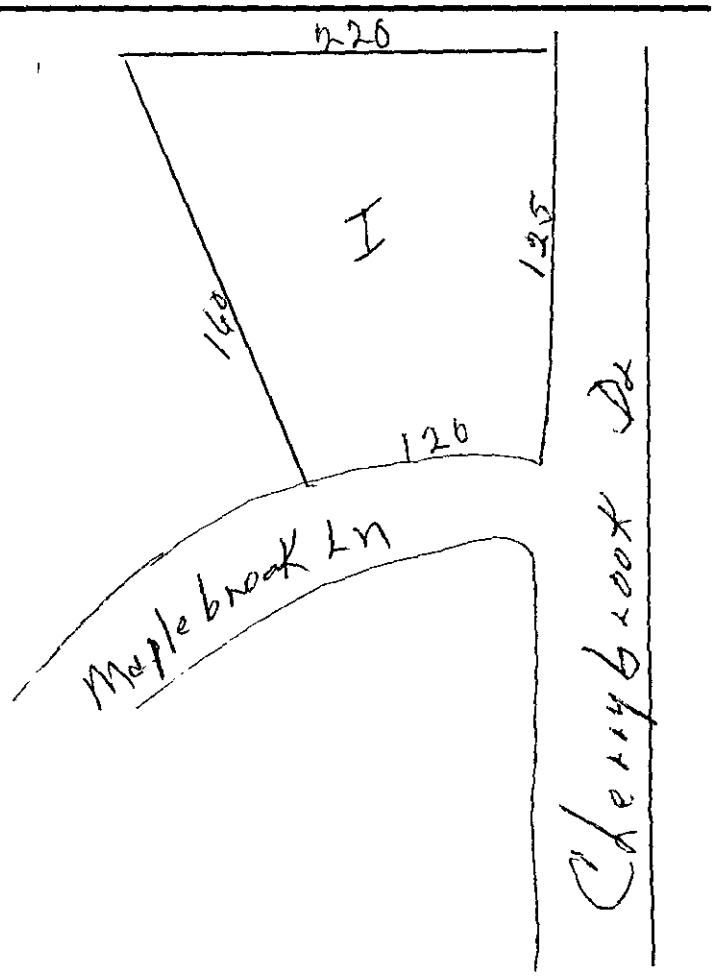
ot: 34 Block: Acres: .56

Owner: Interstate Development Corp.
Address: 5936 Monroe Road
Charlotte, NC 28212

Comments: * Limited Area For More Than 3BR.

Described by: W. B. Ramsey

Date: 5-24-78



*** 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—6	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 46-42	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	IVa Cecil					
Area Classification	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U

DATE: July 8, 1988

TO: HEALTH DEPARTMENT - ENVIRONMENTAL HEALTH

FROM: COUNTY ENGINEERING

EHD FILE 4473 A JURISDICTION CODE Meck

PARCEL NUMBER P.O. 139-021-12

ASSIGNED ADDRESS 8839 MAPLEBROOK LANE, ~~CHAR., NC 28212~~

EXISTING ADDRESS — Lot 34

PROJECT NAME FOREST BROOK

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	NOT APPROVED
1. SUBDIVISION REGULATIONS		*
2. FLOODWAY REGULATIONS		*
3. EROSION CONTROL REGULATIONS		*
4. COMMERCIAL DRAINAGE PLAN		*

	PRESENT	NOT PRESENT
5. PUBLIC UTILITY EASEMENT	* YES	NO
6. PROPERTY FRONTS ON THOROUGHFARE	* YES	NO
7. DRIVEWAY PERMIT REQUIRED	*	

* If checked, further investigation will be required to determine whether a building permit may be issued by Building Standards for the site.

REMARKS: Septic tank

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS 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: [signature]

OPWEAR 02/86

4/15/88 Paid $30.00 ck# 0236 Eno

APPLICATION FOR SOIL INVESTIGATION

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

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

(OFFICE USE ONLY)

FILE: 473A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: LOT 34 MAPLEBROOK LANE

② SUBDIVISION: FOREST BROOK ③ LOT: 34 ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: P0139 PAGE NO.: 021 PARCEL NO.: 12

⑥ DEED REFERENCE: BOOK NO.: 5597 PAGE NO.: 403

OWNER

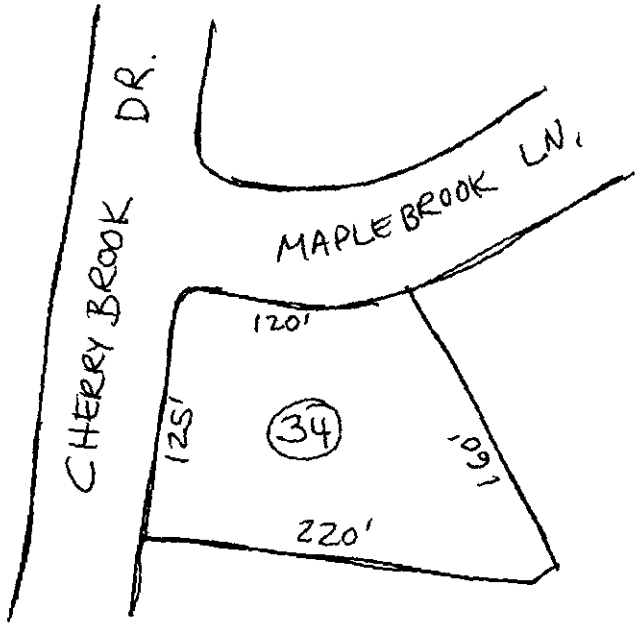
⑦ NAME: INTERSTATE DEVELOPMENT CORP. - MARK MADDALON / PRES.
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: 5936 MONROE ROAD

⑨ CITY: CHARLOTTE ⑩ STATE: NC ⑪ ZIP: 28212

⑫ PHONE: (WORK) 537-3847 (HOME) 364-7789

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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Mark Maddalon - President

Date: 4-15-88

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

RICHARD WILLIAMS (AGENT) 283-6629

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY