

PRIMM ROAD

6/21/2007

duponbj

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 17923

File: [illegible] Action [illegible]

Parcel: [illegible] 93-131 3 ☐ PC

Location:

Subdivision:

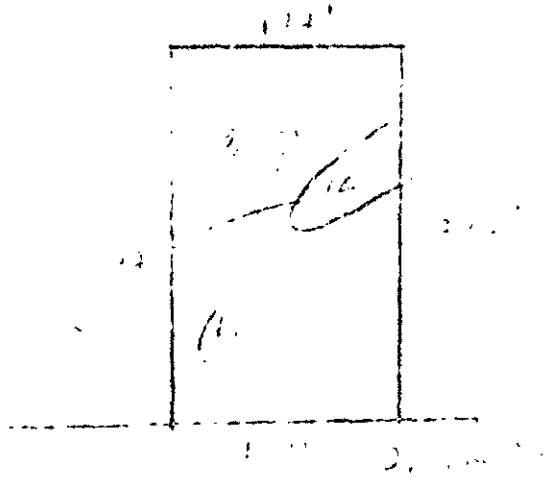
Lot: Block: Acres: .11

Owner:
Address:

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						
Area Classification	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 6774A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: PRIMM ROAD CHARLOTTE NC.

② SUBDIVISION: _____ ③ LOT: _____ ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: _____ PAGE NO.: _____ PARCEL NO. 033-124-010

⑥ DEED REFERENCE: BOOK NO.: _____ PAGE NO.: _____

OWNER

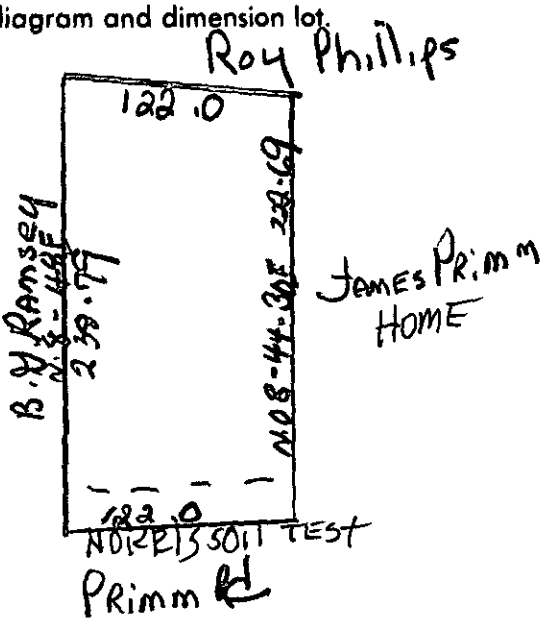
⑦ NAME: DARRELL (FIRST) BRYAN (MIDDLE) NORRIS (LAST)

⑧ MAILING ADDRESS: 407 LOUISE AVE. Apt. 26

⑨ CITY: BELMONT ⑩ STATE: N.C. ⑪ ZIP: 28012

⑫ PHONE: (WORK) 803-548-7233 (HOME) 827-4689

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: Mrs. Martha C Primm

Date: 5-18-90

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: 5-18-90

Name/Company: Darrell B. Morris

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: S/T.

#6774A Plumin Rd. - 1 AC

#6775A " " - 1 AC

MECKLENBURG CO.
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

MAY 18 1990

Fee: $ 80.00

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

CW
Collected by

Mecklenburg County
Health Department

June 1st, 1990

Darrell Norris
407 Louise Avenue Apt. 26
Belmont, NC 28012

RE: Property located at Primm road
FILE: 6774A
PARCEL: 03313103

Dear Sir:

At your request a soils investigation was conducted on the property designated above. Results of this investigation showed the site to be classified as UNSUITABLE under criteria as set forth in Section .1900 of the North Carolina Administrative Code, Title 10, Department of Human Resources, Chapter 10, Division of Health Services; Sanitary Engineering Section, Subchapter 10A, Sanitation. A copy of the Site Evaluation Report (Serial Number 17923) is enclosed.

The soil on this property is not suitable for use with any conventional, modified or alternative system of which I am aware. If you wish to exercise your right of appeal concerning the interpretation and enforcement of these rules you may do so in accordance with G.S. 150B and 10 NCAC 1B.

If I can be of assistance, please do not hesitate to call.

Very truly yours,

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

Enclosure

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 17923

File: 6714A Action 3

Parcel: PO 033-13103 ☐ PC

Location:

Subdivision:

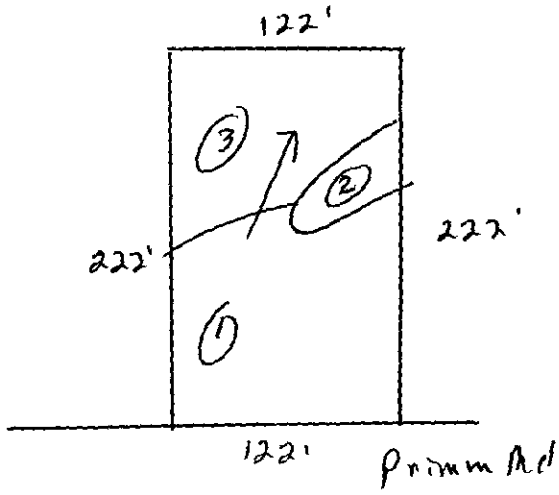
Lot: Block: Acres: .67

Owner:
Address:

Comments: 100% Repair

Described by: William R. Marks

Date: 5-30-90



***** 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 2-10%	S PS (U) Depression	(S) PS U 2-10%	S PS U	S PS U	S PS U
Texture	S PS (U) 2-1 clay	S PS U —	S PS (U) 2-1 clay	S PS U	S PS U	S PS U
Structure	S (PS) U Block	S PS U —	S (PS) U Block	S PS U	S PS U	S PS U
Drainage	S (PS) U 24"-36" Water	S PS U —	S PS (U) Perched water-30-36"	S PS U	S PS U	S PS U
Depth	S PS (U) 10-24"	S PS U —	S (PS) U 24-36"	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 24-36"	S PS U —	S (PS) U 24-36"	S PS U	S PS U	S PS U
Available Space	S (PS) U	S PS U —	S (PS) U limited	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	Enon-Like Expansive clay	Depression	Helena-like Expansive clay			
Area Classification	S PS (U)	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

Tax map no
original
on application

in correct -

correct No on

Soil Report