

100 PARR DR

01102139

5/31/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

5400

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 541A DATE: 7/18/95

TC: 011-02.39 ☐ L ~~☐ GRT~~

SERIAL Nº 16347

Name of Owner James & Harris Juris.: _____

Address of Property 100 Parr Dr

Inspection Data:

Tank Material PVC (Dellinger)

Total Length of Drainfield 270'

Number of Lines 3 @ 90'

Cover Depth 24"

Water Supply Source City

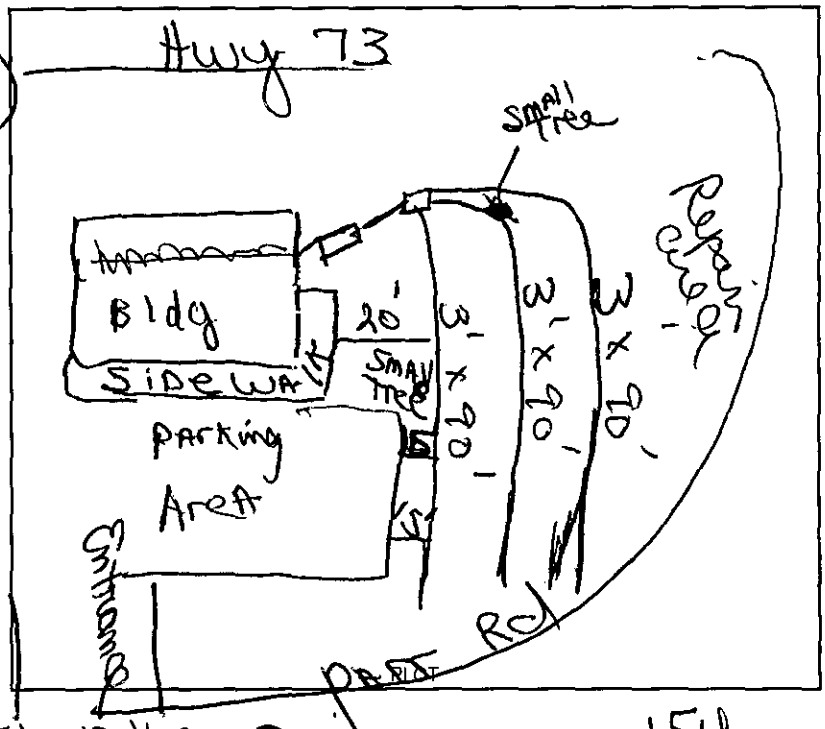
Distance to Water Source _____

Excavation Inspected 7/18/95

Tank(s) Inspected 7/18/95

Wash Line Inspected _____

High Water Alarm Inspected _____



Design 1995 1500 St Con. 810 SFt, 12" @ Rock CTR# 154

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 15A NCAC 18A. 1900, "Laws And Rules For Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. This 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 15A NCAC 18A. 1990 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.

Notice: Disturbance of the designated repair area may result in the suspension/revocation of this permit.

COMMENTS: Pump Tank will be required to opt to repair Area. Approved for domestic waste only. No Driving or Parking Approved over drainfield or Tank. Parking Site marked Indicated 15' from 1st Line

Type IIA

Judy J Kuss R.S.
Environmental Health Specialist

for Daniel Thompson, Dir. 7-20-95

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

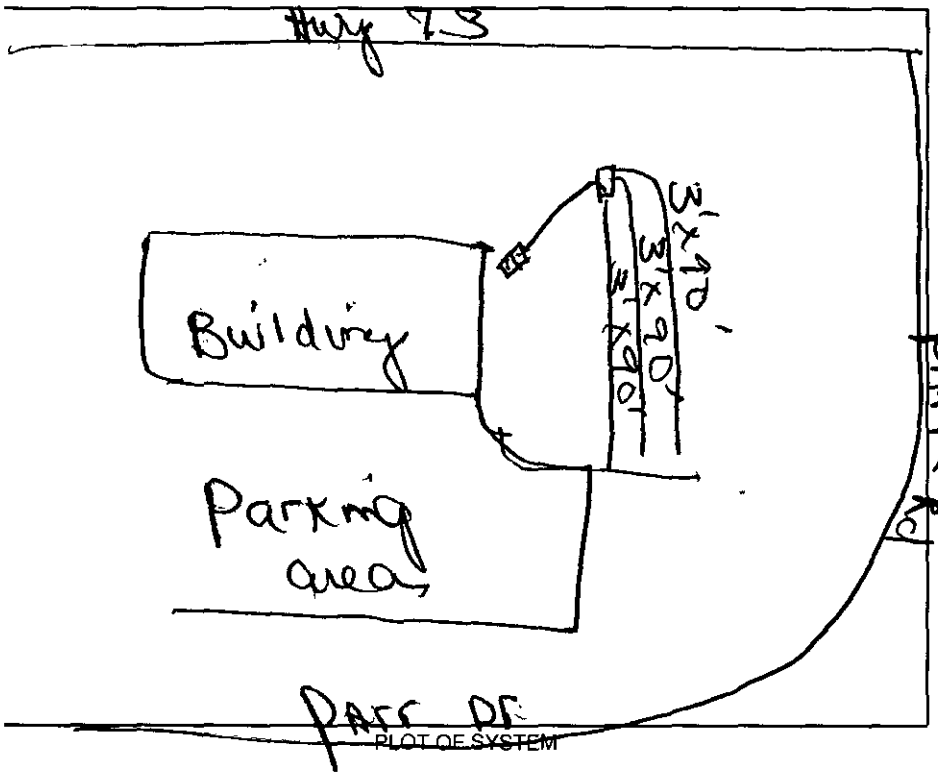
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 5411 A DATE: 7/13/95

TC: 01-021.39 ☐ L

SERIAL Nº 16049

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 7/12/95. All work shall be completed on or before 8/13/95, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A. 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 _____ gallons

Tank Construction PCC

Trench Depth 36" Maximum

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous ✓

Total Line Length 270' feet

Number of Lines 3

Depth of Stone 12" inches

Distance from House 5' feet

Distance from Property Line 10' feet

Distance from Well City feet

NOTICE: This system shall not be installed while soils are in a wet condition.

NAME OF OWNER James E. Harris

LOCATION OF PROPERTY 100 Part Drive

Comments: Install 3 trenches 3'x 90' x 12" Stone

Maximum Depth 36"

Authorization for Manuel Vazquez, Chief 7-20-95

Environmental Health Specialist

WHITE - HEALTH DEPARTMENT's COPY • CANARY - E.H.S. COPY • PINK - OWNER OR AGENT's COPY

CHARLOTTE-MECKLENBURG BUILDING STANDARDS
COMMERCIAL PERMIT

ADDR ADDR: 100 PARR DR HUNT JOB: 4001 PERMIT: B0334417
PARCEL: 01102139 DATE: 12/06/94 JOB: NEW OFFICE/WAREHOUSE-HARR MASTER: B0334417
PROJECT: J.E.HARRIS OFFICE BL PHASE: DG SEC: PROJECT: 987793
OWNER: HARRIS, MARY ADDR: 4700 SPICEWOOD DR
CITY/ST: CHARLOTTE NC 28227 PHONE: 704-545-3185

SITE LOT/BLK: / ZONING: I-2 JURIS: HUNT MAP#: 184 HOUSING: NO
ST R/W: 0100 PUBLIC: NO CENSUS: 6300 O&D ZONE: 436 FIRE DIST: NO
SPECIAL: FLD PLN: NO FLD ELEV:
#UNITS: WATER: IND. METER/CONN SEWER: INDIVIDUAL
LAND AREA: LOT: FRT ST:
MIN SETBACKS FRONT: 20 LEFT: 10 RIGHT: 15 REAR: 20 REQ PARKING: 9

PROJ USDC: 327 OCC TYPE: S FEE CODE: CONSTR TYPE: 6 #H/C UNITS:
HTD AREA: 1680 UNHTD AREA: 1920 DECK: #STORIES: 1.0 BASEMENT: NO
#ROOMS: #BEDROOMS: #BATHS: SPKLR SYS: NO #UNITS:
ATT CARPORT: NO ATT GARAGE: NO MASONRY FR: NO PROJ COST:
MBL HOME YR/MAKE: SERIAL#:

ELEC TOTAL AMPS: 200 #CIRCUITS: 16 UTILITY CO: DUKE CHARLOTTE
#CONNECTIONS 120 V: 115 > 120 V: 6 TYPE OF WORK: NEW SERVICE

MECH #GAS CONNECTIONS: 1 #APPLIANCES: UTILITY CO: PIEDMONT NATL GAS
TYPE OF WORK: HEATING WITH A/C
HEATING/COOLING: CENTRAL A-C GAS/OIL/FURN

PLBG #FIXTURES: 6 #APPLIANCES: 1 WORK: NEW WATER SERVICE NEW SEWER SERVICE

CONT BLDG: HARRIS CONST CO JAMES LIC: B 0000006794 U PERMIT: B0334417
ADDR: PO BOX 25885 CITY/ST: CHARLOTTE NC 28212
PHONE#: 704-545-9048
ELEC: BISANAR INC, JOHN LIC: E 0000000412 U PERMIT: E0334418
ADDR: P. O. BOX 992 CITY/ST: GASTONIA, N. C. 28052
PHONE#: 704-867-7182
MECH: GREEN HILLARD C PERMIT: M0334419
ADDR: P O BOX 26691 CITY/ST: CHARLOTTE NC 28221
LIC: M 0000012328 1 H3 M 0000940809 3 A B 0000026741 L
PHONE#: 704-376-2964
PLBG: STEGALL PLBG CO LIC: P 0000008248 1 PERMIT: P0334420
ADDR: 7542 GRIER RD CITY/ST: CHARLOTTE NC 28213
PHONE#: 704-597-0672
ARCH/ENG: LIC: PHONE#:
ADDR: CITY/ST:

COST BLDG: 103300 ELEC: 7500 MECH: 4200 PLBG: 5000 TOTAL: 120000
PLANS: YES INSP READY: NO
REMARKS: SCREENING REQ' FOR DUMPSTER & LOADING

PERMIT MAILED: NO CHECK NUMBER: HOMEOWNR RC FEE:
VALIDATION DATE: 12/06/94 BY: VD CHARGE ACCT#: X25650 DOUBLE FEE: NO
FIRE DMG FEE: FSTRK FEE: ADJUSTMENT: TOTAL FEE: 782.55

THIS PERMIT WILL EXPIRE IF WORK EITHER HAS NOT STARTED WITHIN 6 MONTHS OR IS DISCONTINUED FOR A PERIOD OF 12 MONTHS. NO REFUNDS WILL BE GIVEN AFTER EXPIRATION.

P O BOX 31097 700 N TRYON ST CHARLOTTE, NC 28231-1097 704-336-3831

(1)

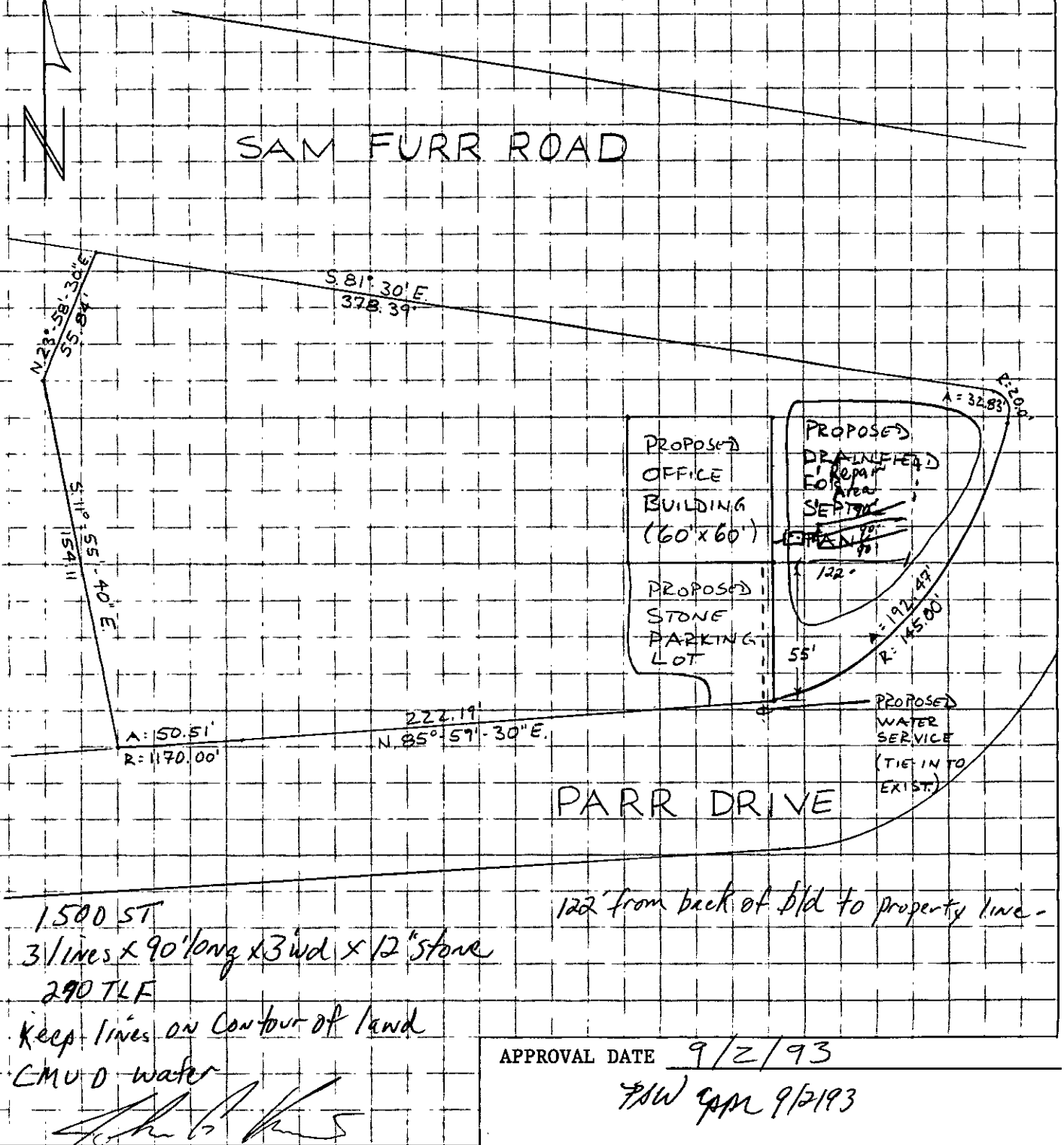
PROPOSED PLOT PLAN

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

FILE: 5411A

TC: 011-021-39

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 ST
3 lines x 90' long x 3' wd x 12" stone
290 TLF
Keep lines on Contour of land
CMUD water

122' from back of bld to property line -

APPROVAL DATE 9/2/93

PSW 9/2/93

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

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

DATE: 8/27/93

FROM: COUNTY ENGINEERING DEPARTMENT

EHD FILE _____ JURISDICTION CODE Hunt

PARCEL NUMBER 011-021-39

ASSIGNED ADDRESS 100 Parr Dr

EXISTING ADDRESS _____

PROJECT NAME N/A

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: Kwb

OPWEAR 06-88

NEW ADDRESS _____*

FORM 100

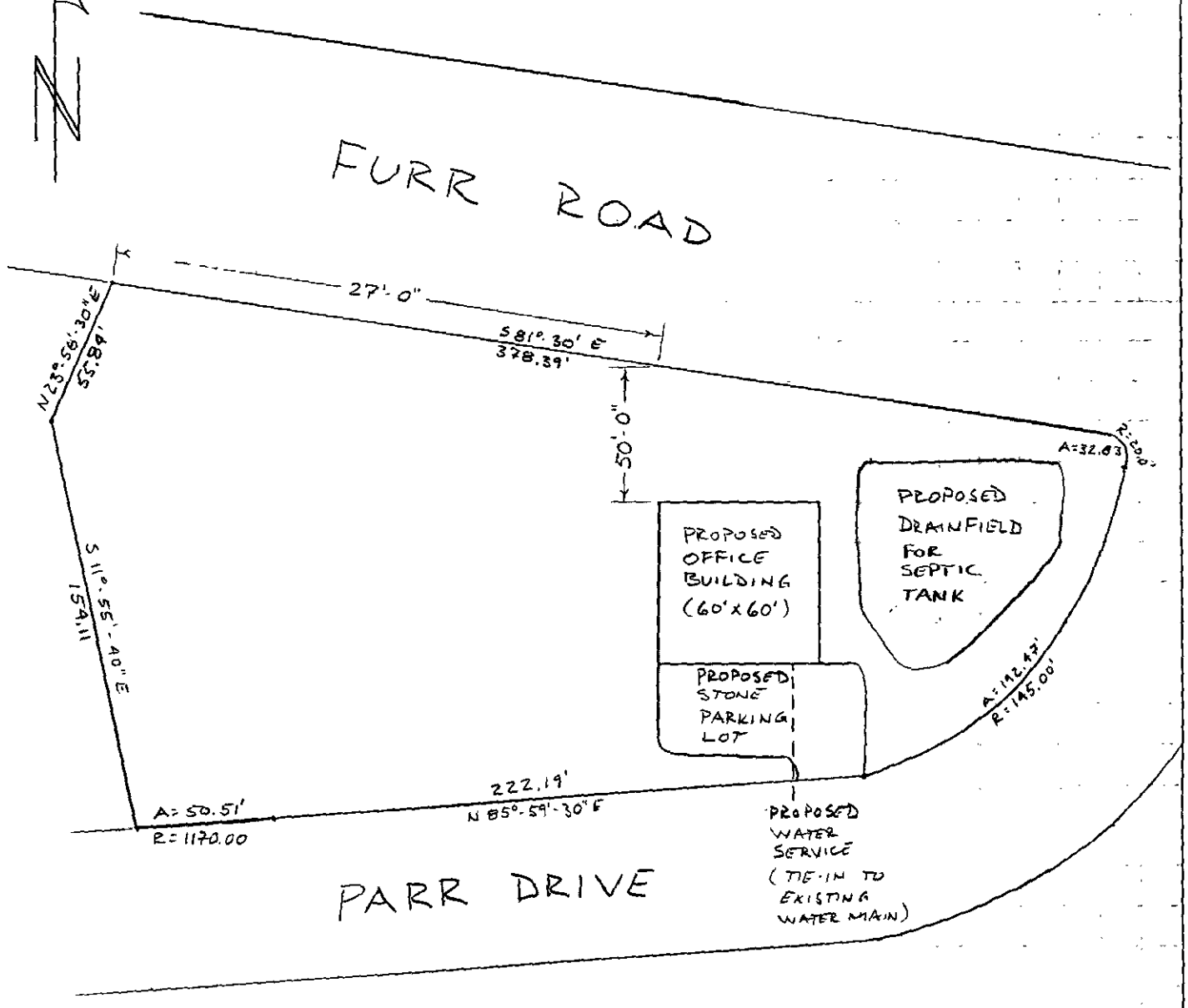
PROPOSED PLOT PLAN

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

FILE: 5411A

TC: ~~011-021-39~~
011-021-39

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: [signature]

Date: 8-27-93

171-98T793

Filed 5411-A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

P&L CHK 200.00 4722 8/27/93 BT

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: 8/27/93

PERSON FILING APPLICATION:

NAME: HARRIS (last) JAMES (first) E (mi)

ADDRESS: 4700 SPICEWOOD DR. PHONE: (704) 545-3185

CITY: CHARLOTTE STATE: NC ZIPCODE: 28227

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 011-021-39

STREET ADDRESS: 100 PARR DRIVE
HUNTERSVILLE

ZONING: I2

PROPERTY OWNER:

NAME: HARRIS (last) JAMES (first) E (mi)

ADDRESS: 4700 SPICEWOOD DR PHONE: (704) 545-3185

CITY: CHARLOTTE STATE: NC ZIPCODE: 28227

SUBDIVISION OR MOBILE HOME PARK NAME: PARR INDUSTRIAL PARK

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

LOT NUMBER: 1 LOT SIZE (in acres): 1.55

TYPE APPLICATION (check one):

[ ] SOIL TEST - INDIVIDUAL LOT (O)
[ ] 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)
[X] 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) [ ] HOUSE (H) [ ] MULTIPLE FAMILY (U)
[ ] DOUBLE WIDE (D) [ ] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: NUMBER OCCUPANTS:

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business CONTRACTOR # Employees 4 Per Shift 4-0-0
Industrial Wastes (Y/N) N
Underground Storage Tanks On Property (Y/N) N Type _____

WATER SUPPLY (check one):
[ ] Community (C) [ ] Shared Well (S)
[X] 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 [X] 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: John S. James Date: 8/27/93

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.

...

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

Philo S. Walker 9/2/93
Environmentalist Date

Judy S. Kwiatkowski for 9/6/93
Director or Authorized Section Head Date

WWATER : 122791

* Construction Company

DATE 2/16/89

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION Hunt

011-021-16 pd
PARCEL NUMBER

100 Park Dr
ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

Park Business Park
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

REMARKS: Septic tank

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).

7/7/88
ALL OTHER FORMS OBSOLETE

☑ NEW ADDRESS

SIGNED: [signature]

Mecklenburg County
Health Department

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

February 2nd, 1989

James W. Parr
P. O. Box 14062
Charlotte, NC 28206

RE: Property located at Parr Drive
FILE: 5411A
PARCEL: 01102116 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 15956) 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.

Very truly yours,

Sylvia D. Daniel

Sylvia D. Daniel, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 15956

File: 5411A Action 1

Parcel: 01102116 PO ☐ PC

Location: Parr Drive

Subdivision:

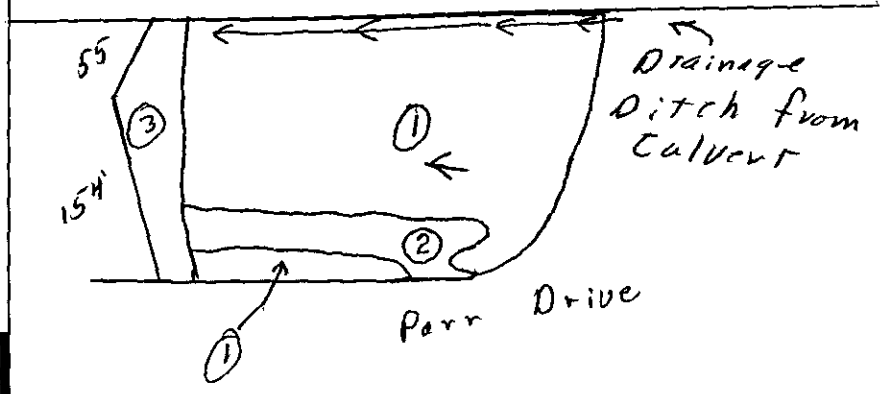
Lot: Block: Acres: 1.5

Owner: James W. Parr
Address: P. O. Box 14062
Charlotte, NC 28206

Comments: _____

Described by: William A. Marks

Date: 2-2-89



*** 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 6-15%	S PS (U) complex slopes	S PS (U) Drainageway Depression	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 40-48"	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	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-Lloyd	complex slopes	Drainage-way - Depression			
Area Classification	S (PS) U	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
JAN

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

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

(OFFICE USE ONLY)

FILE: 5411A

TC: P.O. Tax Code 01-021-16

ENVIRONMENTAL HEALTH DIVISION

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: 100 Parr Drive Huntersville, N.C.

② SUBDIVISION: Parr Business Park ③ LOT: _____ ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: P.O. 011 PAGE NO.: 021 PARCEL NO.: 16

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

OWNER

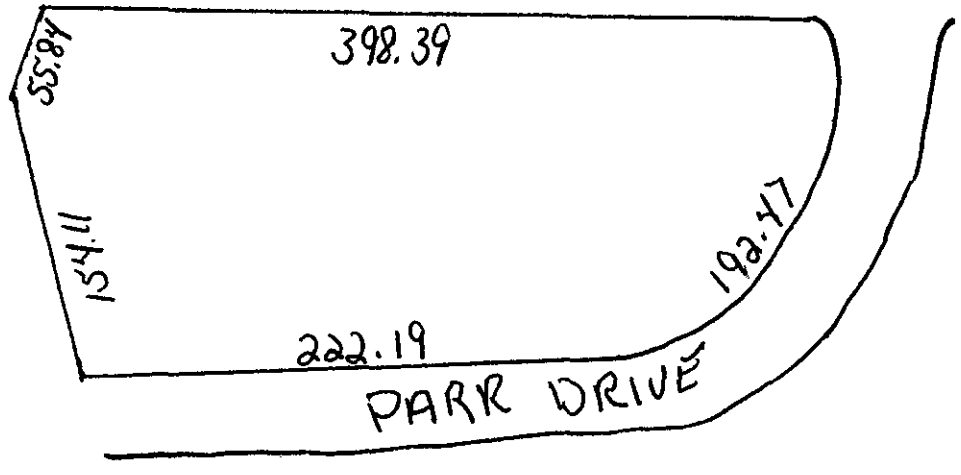
⑦ NAME: James (FIRST) W. (MIDDLE) Parr (LAST)

⑧ MAILING ADDRESS: P.O. Box 14062

⑨ CITY: Charlotte ⑩ STATE: N.C. ⑪ ZIP: 28206

⑫ PHONE: (WORK) 375-2531 (HOME) _____

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: James W. Parr

Date: 1-19-89

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

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 1/26/89

Name/Company [illegible]

Sanitation ____

Vector Control ____

O.P.W.D. ✓

Service: Soil Test 1.55 acc
#54119

MECKLENBURG
HEALTH DEPART
ENVIRONMENTAL HEALTH DIVISION
2218

JAN 20 1989

Fee: $ 45 00

Completed by

Collected by

PROPOSED PLOT PLAN

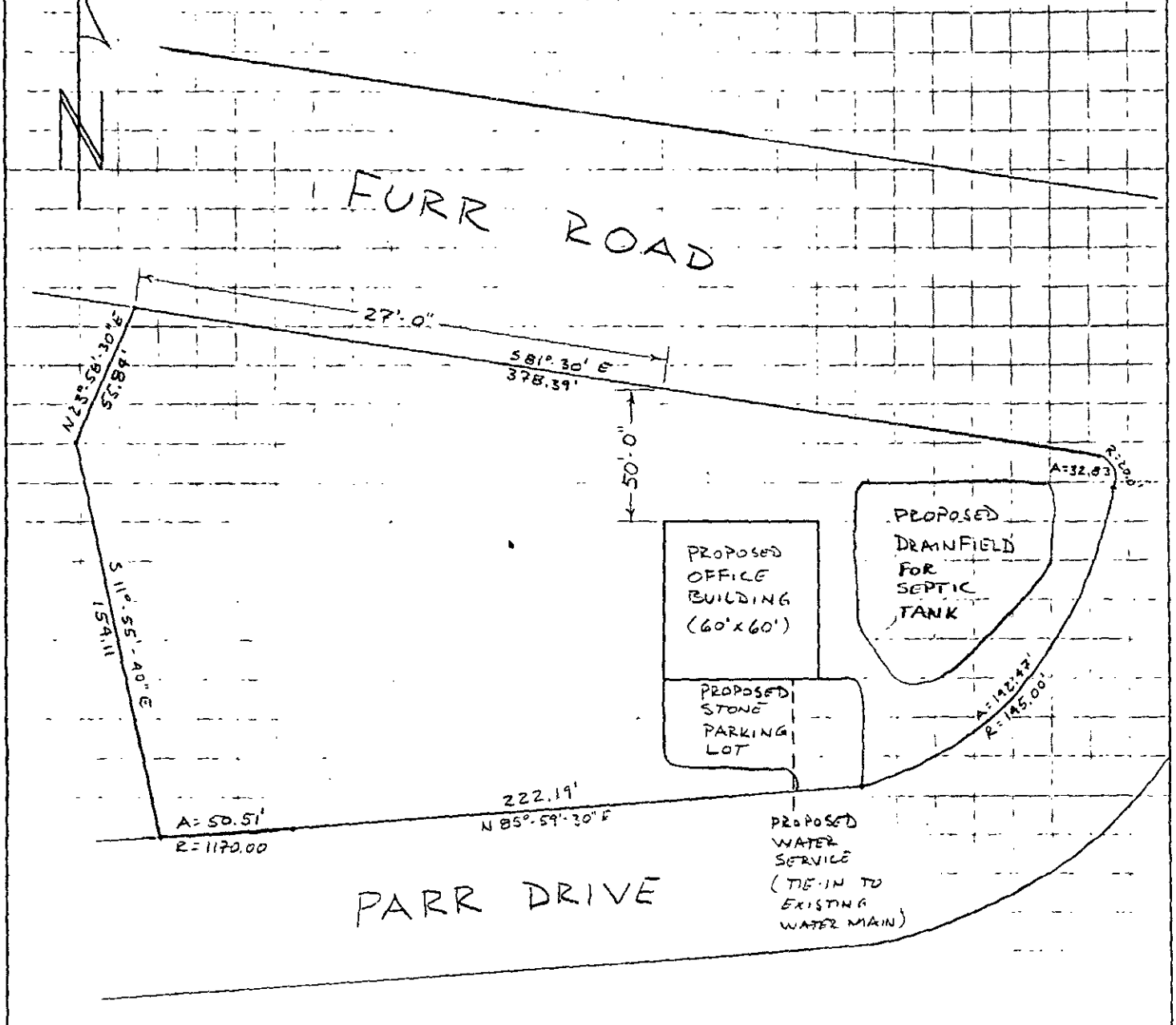
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

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

FILE: 5411A

TC: ~~011021RE~~
011-021-39

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: [signature]

Date: 8-27-93

PROPOSED PLOT PLAN

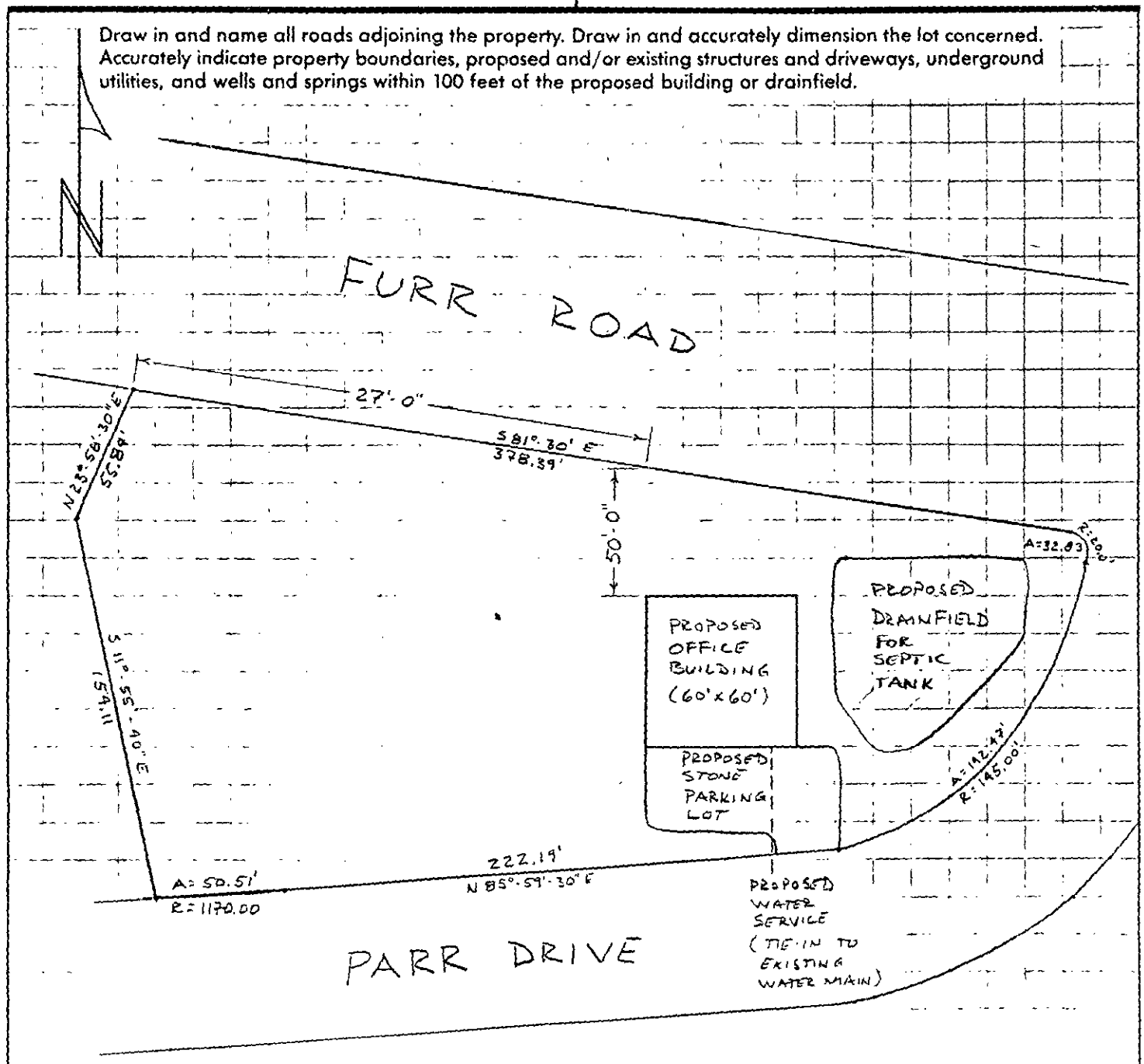
MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

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

FILE: 5411A

TC: ~~0110116RE~~
011-021-39

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: [signature]

Date: 8-27-93

JAMES E. HARRIS CONSTRUCTION COMPANY, INC.
P.O. BOX 25885
CHARLOTTE, NORTH CAROLINA 28229

66-800
530

CHECK DATE	CHECK NUMBER
8/27/93	47220

SOUTHERN NATIONAL BANK
OF NORTH CAROLINA
CHARLOTTE, NORTH CAROLINA

47220

PAY THIS AMOUNT
$ 200.00

TWO HUNDRED AND NO/100

PAY TO THE ORDER OF MECKLENBURG COUNTY HEALTH DEPT.

JAMES E. HARRIS CONSTRUCTION COMPANY, INC.

NON-NEGOTIABLE

⑈47220⑈ ⑆053008004⑆ 251-521643⑈