

9045 HARRISBURG RD

10810104

8/15/08

marliwr

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

PD 10 Ord 7/23/98 [X] 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 18100

Date: 7/23/98

PERSON FILING APPLICATION:
NAME: Belk (last) Sidney (first) I (mi)
ADDRESS: 5045 Hamilton PHONE: (__) 532-4698
CITY: Charlotte STATE: ZIPCODE: 28215

PROPERTY OWNER:
NAME: SAME AS ABOVE (last) (first) (mi)
ADDRESS: _____ PHONE: (__) _____
CITY: STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 108-101-04
STREET ADDRESS: 5045 Hamilton
ZONING:

SUBDIVISION OR MOBILE HOME PARK NAME:

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

LOT NUMBER: LOT SIZE (in acres):

TYPE APPLICATION (check one):
[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (M)
[X] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X) Deck

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: 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: Sid Belk Date: July 23 1998

NOTICE:

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 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

...* USE EXISTING SYSTEM.
MAINTAIN DECK 5' FROM
SEPTIC TANK AND SYSTEM. - I
PLACED TAPE FOR OWNER.

J. Gordon Clodfelter 7/28/98
Environmentalist Date

* OWNER STILL HAS DRIVE OVER DRAINFIELD. ADVISED OWNER TO RE-LOCATE DRIVE WAY TO FRONT.

WATER : 1227

COPY

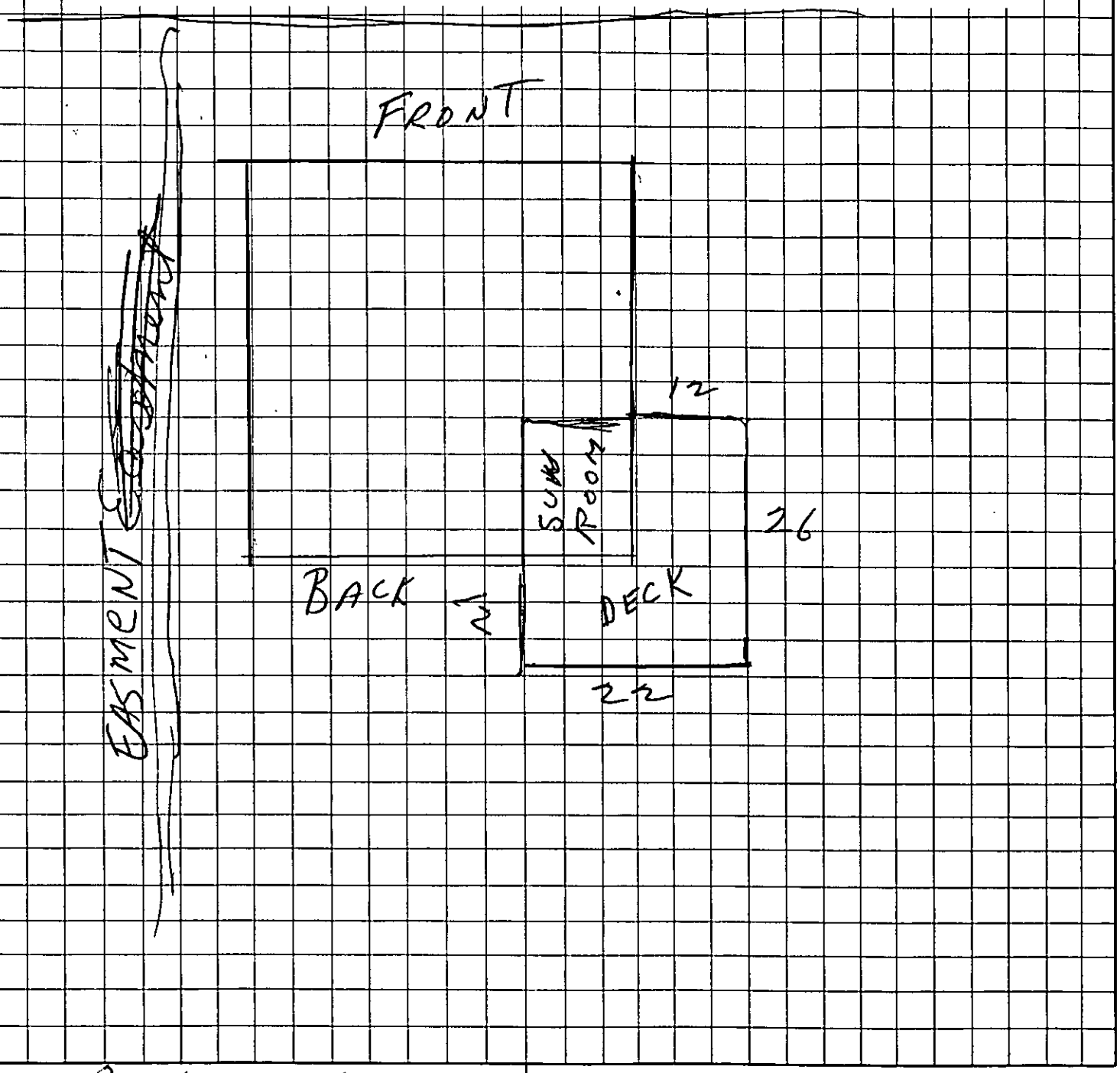
PROPOSED PLOT PLAN

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

FILE: 18100

TC: 109-101-04

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.



Sid Belk
OWNER/AGENT SIGNATURE

DATE July 23, 1998

APPROVAL DATE _____

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

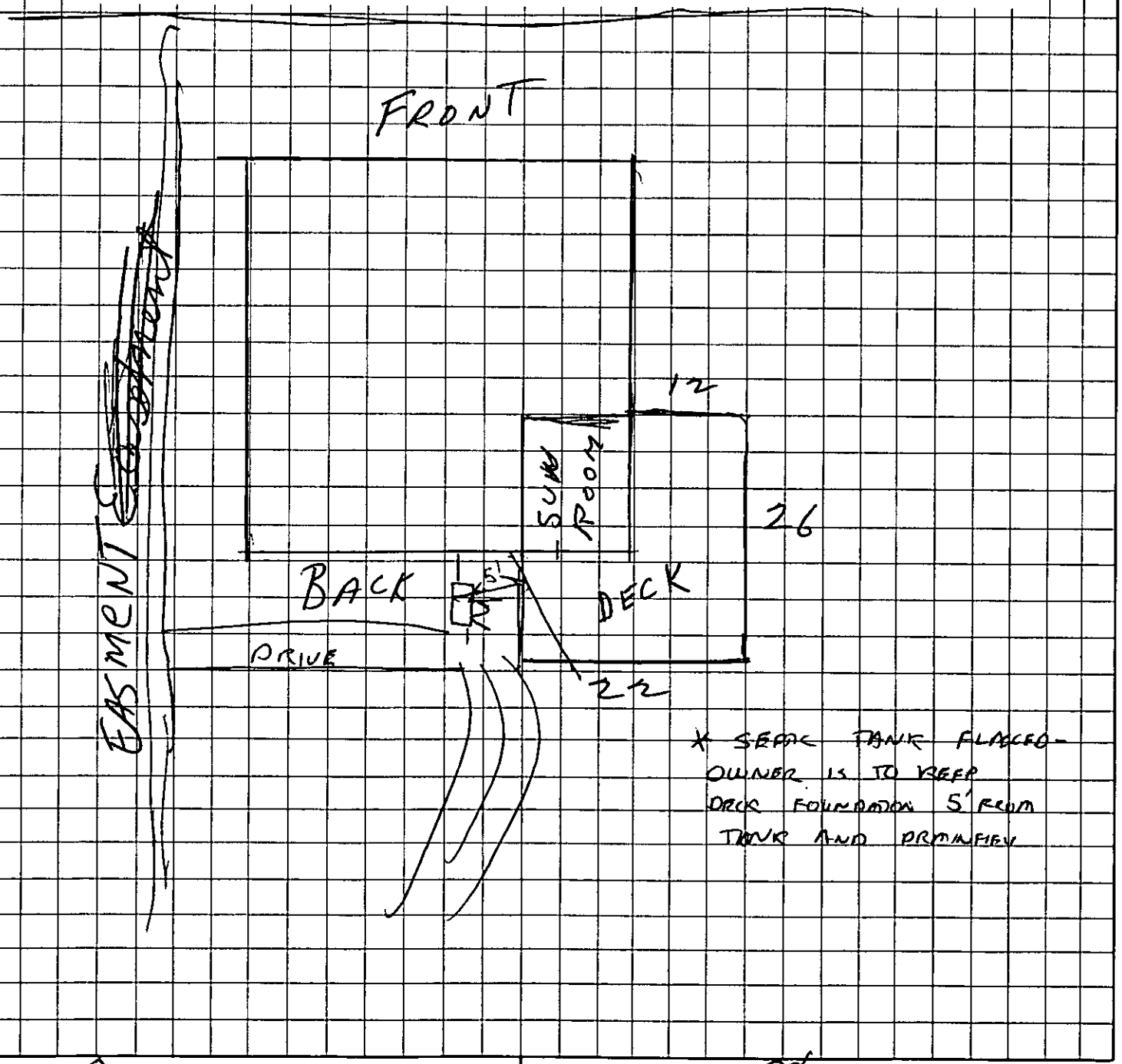
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Sid Belk
OWNER/AGENT SIGNATURE

DATE July 23, 1998

APPROVAL DATE 7-29-98 LLW

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

Pd 2/13/98 CASH 18100 400

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

[] CRT

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Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
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CITY: Char. STATE: NC ZIPCODE: 28215

Date:

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NAME: SAME (last) (first) (mi)
ADDRESS: _____ PHONE: (__) _____
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[] COMMERCIAL OR INDUSTRIAL (N)
[] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X) Sun Porch Storage bld

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

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Signed: Sidney I Belk Date: 2/13/98

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[X] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

...Approval granted for a storage bldg & a sun porch continent upon driveway relocation to the front. Use existing system

Property ower stated that he would relocate driveway to the front of lot. (Gravel driveway currently over drainfield)

Philip S. Walker R.S. 2/19/98
Environmentalist Date

WWATER : 122791

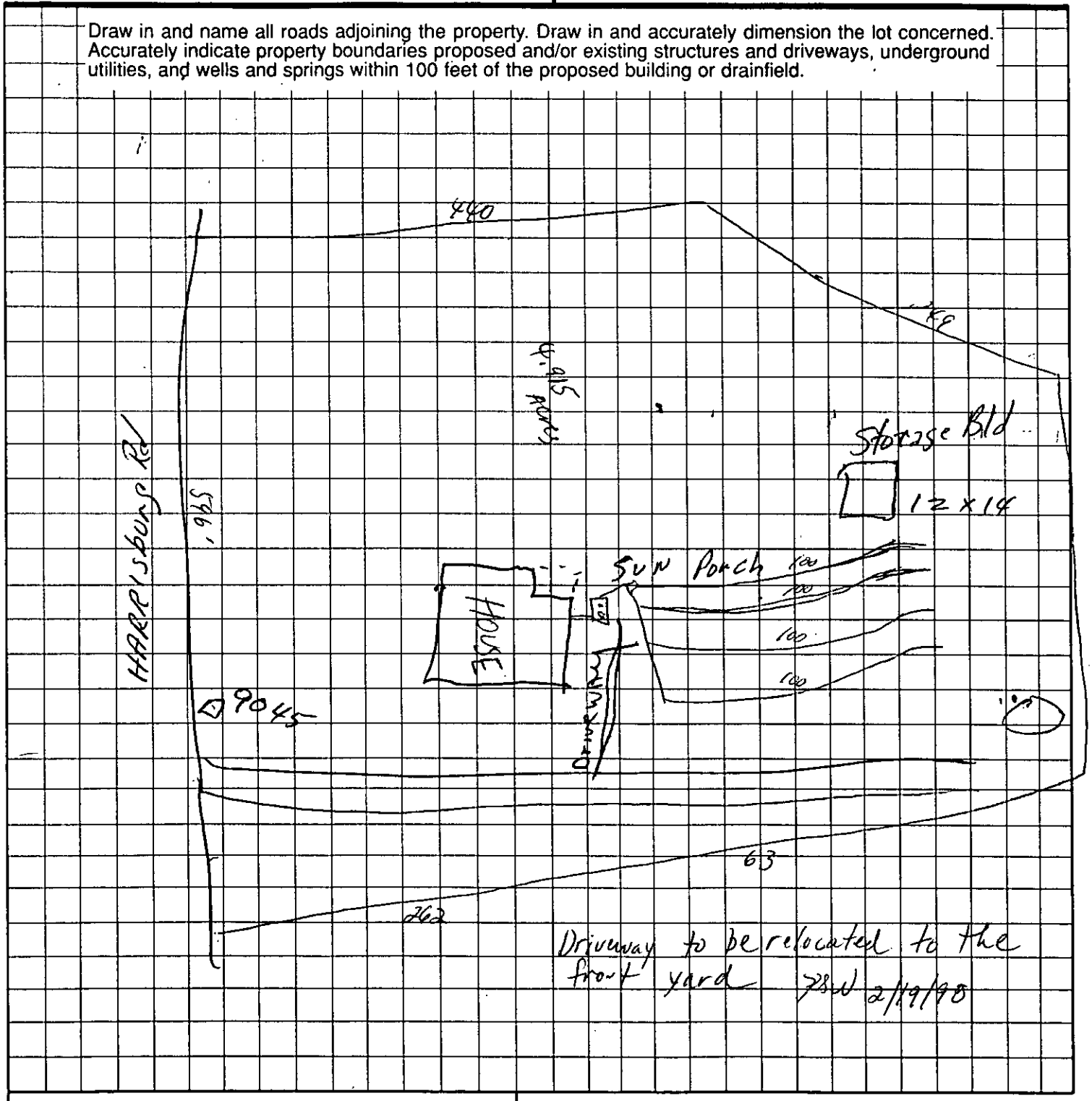
PROPOSED PLOT PLAN

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

FILE: 18100

TC: 109 10104

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OWNER/AGENT SIGNATURE

DATE

APPROVAL DATE

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

Surveyed By: Ben M. Flowe & Son;
11316 Brief Road
Charlotte, N.C.
28227
(704) 545-3060

Sidney Belk
4404 / 390

Dorothy Crowder
1635 / 31

I.PIPE(F)

New Property Line

55.02'

22.6'

I.PIPE(F)

16.5'

Location Map
(Not To Scale)

Robinson Church Rd.

Site

Harrisburg Road

Denbur Drive

Existing Gravel Drive

NORTH CAROLINA
REGISTERED
SEAL
L-3600
LAND SURVEYOR
GREGORY S. FLOWE

Gregory S. Flowe
11/7/96

Farm Gate

N 63°10'37" W

15' R/W

2 S.F.D.

Dorothy Crowder
1635 / 31

287.50'

Area where Drive Should Be Located

262.87'

Sidney Belk
4404 / 390

27.6'

Deed North
D.B. 4404 / 390

R/W across Sidney Belk
for David Cruse 4278 / 471

R/W Limit

I.PIN(F)

60' R/W

Harrisburg Road

NOTE:
THIS PLAT IS OF A SURVEY OF ANOTHER CATEGORY, SUCH AS THE RECOMBINATION OF EXISTING PARCELS, A COURT-ORDERED SURVEY OR OTHER EXCEPTION TO THE DEFINITION OF SUBDIVISION.

Tax Parcel: 108-101-04

E.C. = 1' : 10,000' +

Deed Ref: 4404 / 390, 4278 / 471

Easement Location
For
Sidney Belk
and wife
Dorothy C. Belk

Crab Orchard Township
Mecklenburg County, N.C.

Drawing No. 96568

Scale: 1" = 40'

October 25, 1996

BK. 111

PG. 15

PG. 09

PG. 06

BK. 111

BRAWLEY LN
#2807

ROBINSON

CHURCH RD.
#2822

362.42'

1000.66'

9
5.71 AC.

71.58'

592.16

819.86'

432.41
450±

544.13

247.5

250±
250

2.113AC.
8

15.47 AC

6

575

166.87
640

247.14'

505.47'

17
3.03 AC

448.18'

358.52
1430.5'

650

101

(26.81)

23
17.5 AC.

1327.3'

374.5'

412.58

22.5 AC.
3

568.5'

939.58

DUKE POWER R/W

2.004 AC.
13

1147.5

604.15

485.53
263.66

549.43

22
4 AC.

219.13

15' ESMT.

212'
(# 2805)

208.1

557.64

4.915 AC.
4

2 AC.
15

533.5

1.17 AC

440.88'

12

2 AC.
2

422.67

300

6.006 AC.
1

850.12'

596'

HARRISBURG

DENBUR DR.
#2950

CEDARBROOK DR.
#2812

TAX LINE MAP	BOOK 108	PAGE 10
MECKLENBURG COUNTY, NORTH CAROLINA		
REVISED 5-7-92	SCALE 1" = 400'	

FOR TAX PURPOSES ONLY

PROPOSED PLOT PLAN

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

FILE: 18100

TC: 108-101-04

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DRAFT

Area in rear of house
spot checked
soils 40" +
Provisional
Installed
WWM
8-22-96

FOUNDATION FOR EXISTING STRUCTURE

14'
16'
20'
25'
26'
100'

A Gravel Rd

9100 Harrisburg Rd

Harrisburg Rd

APPROVAL DATE _____

CERTIFICATE OF COMPLETION/OPERATION PERMIT

D1600

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

FILE: 18100 DATE: 8/21/96

TC: 109 101 04 ☐ L ☒ CRT

SERIAL № 16592

Name of Owner Sidney & Dorothy Belk Juris.:

Address of Property 9045 Harrisburg Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400'

Number of Lines 4 @ 100'

Cover Depth 12"

Water Supply Source well

Distance to Water Source >100'

Excavation Inspected 8/21/96

Tank(s) Inspected 8/21/96

Wash Line Inspected plumb to tank

High Water Alarm Inspected NA

PLOT

Design 1996, 1500ST, COR, 1200SFT, 12"stone ceil CTR# 174 B. Howell Grading

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 I5A 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 I5A 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: Septic System designed for 3 bedroom residence Type II

Philo S. Walker R.S.
Environmental Health Specialist

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

18100

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

(704)336-5102

8-28-92
9-2-92

Date:

PERSON FILING APPLICATION:
NAME: Belk (last) Dorothy (first) C. (mi)
ADDRESS: 4201 N Sharon Amity PHONE: (__) 537-4698
CITY: Charlotte STATE: N.C. ZIPCODE: 28205

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 109-101-04
STREET ADDRESS: 2045 Harrisburg Rd.
Charlotte, NC
ZONING:

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TYPE APPLICATION (check one):

LOT NUMBER: LOT SIZE (in acres):

[ ] SOIL TEST - INDIVIDUAL LOT (O)
[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: 2 NUMBER OCCUPANTS:

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Underground Storage Tanks On Property (Y/N) ___ Type _____

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Signed: Dorothy Belk Date: 9-2-92

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B. R. Ferguson 9-8-92
Environmentalist Date

[illegible] 9-10-92
Director or Authorized Section Head Date

WATER : 122791

Job # 18100 · 4th

Mecklenburg County Health Dept.
Environmental Health Division
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B. R. Ferguson 9-8-92
Environmentalist Date

[signature] 9-10-92
Director or Authorized Section Head Date

WATER : 122791

PLOT PLAN FOR PERMIT APPLICATION
ONE/TWO FAMILY, MODULAR, MOBILE HOME OR ZONING USE

LOCATION

STREET # 9045 (N,S,E,W) STREET NAME Harrisburg (AV,RD,ST etc) Rd

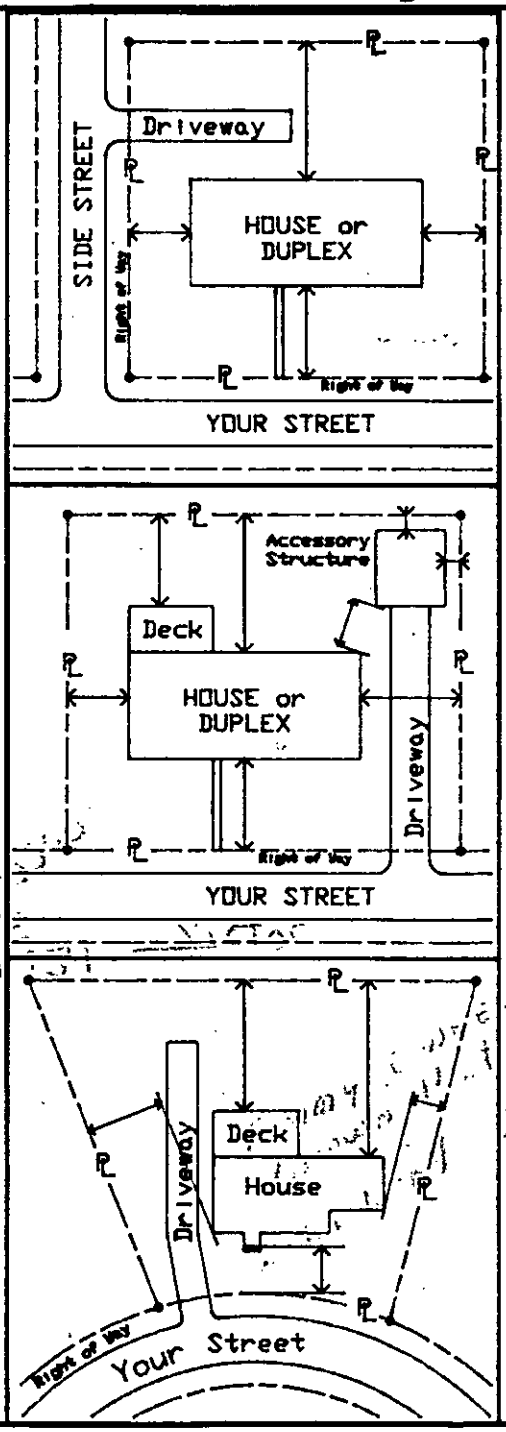
PERMIT # B0178552

SUITE/UNIT(S):

TAX JURISDICTION: (Check One)
☑ 0-Mecklenburg ☐ 1-Charlotte ☐ 2-Davidson ☐ 3-Cornelius
☐ 4-Pineville ☐ 5-Matthews ☐ 6-Huntersville ☐ 7-Mint Hill

TAX PARCEL # 108-101-04 [illegible] JOB # 2001

EXAMPLES/PLOT PLAN

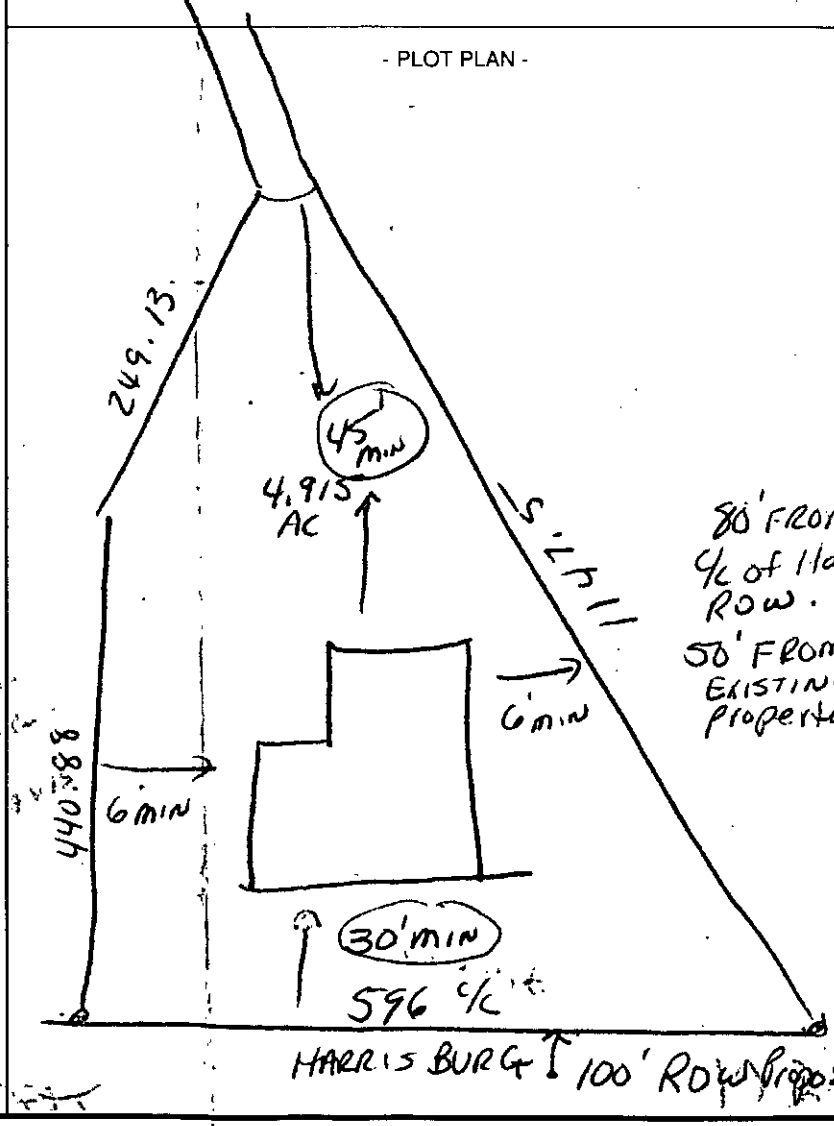


- INSTRUCTIONS -

In the space provided below, draw plot plan as neatly and accurately as possible, from survey if available.

1. Draw street(s) and right-of-way(s).
2. Draw property lines with dimensions.
3. Draw proposed and existing buildings showing any attached porch(es), deck(s), chimney(s), carport(s), or garage(s), etc...
4. Show distances of buildings from property lines or other structures.
5. Separate application and plot plan required for each building.

- PLOT PLAN -



ALL EXISTING AND PROPOSED BUILDING(S) ON LOT ARE SHOWN WITH MEASUREMENTS INDICATED

APPLICANT'S SIGNATURE DATE PRINT APPLICANT'S NAME

APPROVED BY

CHARLOTTE-MECKLENBURG BUILDING STANDARDS DEPARTMENT
P.O. BOX 31097 • CHARLOTTE, NC 28231-1097 • 704/336-2831

B-83

PERMIT

DATE 9-2-92

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION MECK

#108-101-04 PO
PARCEL NUMBER

9045 Harrisburg RD
ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

N/A
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: Move ON House

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

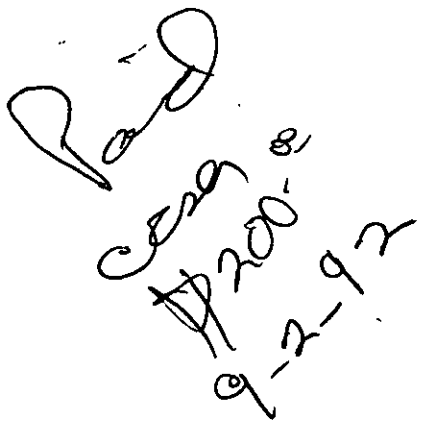
☐ NEW ADDRESS

SIGNED: B. McCraw

REVISED 1/91

CK ☐ Season Limit on
Map Sheets: 9/2/92

Dorothy C. Beck
Harrenberg Rd.



462

DATE 4-2-12

ADDRESS	DESCRIPTION	NAME	CK/CA	INITIAL	AMOUNT
2201 Ponce Rd	Final Insp (Add) Comm	Pole Buildings Inc Steve Kellen	CASH	BOK	50 00
9015 Harrisburg Rd	Inst. & Temp. Pole Inspection	Sidney & Dorothy Bolk	CASH	BOK	200 00
7311 Pinelake Ln	Septic Insp	Glenda Akers	1024	BOK	65 00
7231 Plantation Rd	Well Insp	Richard McKamy	1389	BOK	65 00

EMPLOYEE SIGNATURE:

PAGE TOTAL

DEPOSIT

462

DATE 7-2-92

ADDRESS	DESCRIPTION	NAME	CK/CA	INITIAL	AMOUNT
2201 Pence Rd	Imp. Pd Sys/Ld (Add) Comm	Pole Buildings Inc Steve Kelton	CASH	BOK	50 00
9015 Harrisburg Rd	Inst. & Insp. for New Office	Sidney & Dorothy Balk	CASH	BOK	200 00
7311 Pinelake Ln	Septic Insp	Glenda Akers	1024	BOK	65 00
7231 Plantation Rd	Well Insp	Richard McKamy	1389	BOK	65 00

CK to Susan Link on May Sheets: 9/2/92

Dorothy C. Balk
Harrisburg Rd.

Paid Cash $200 9-2-92

EMPLOYEE SIGNATURE:

PAGE TOTAL

DEPOSIT

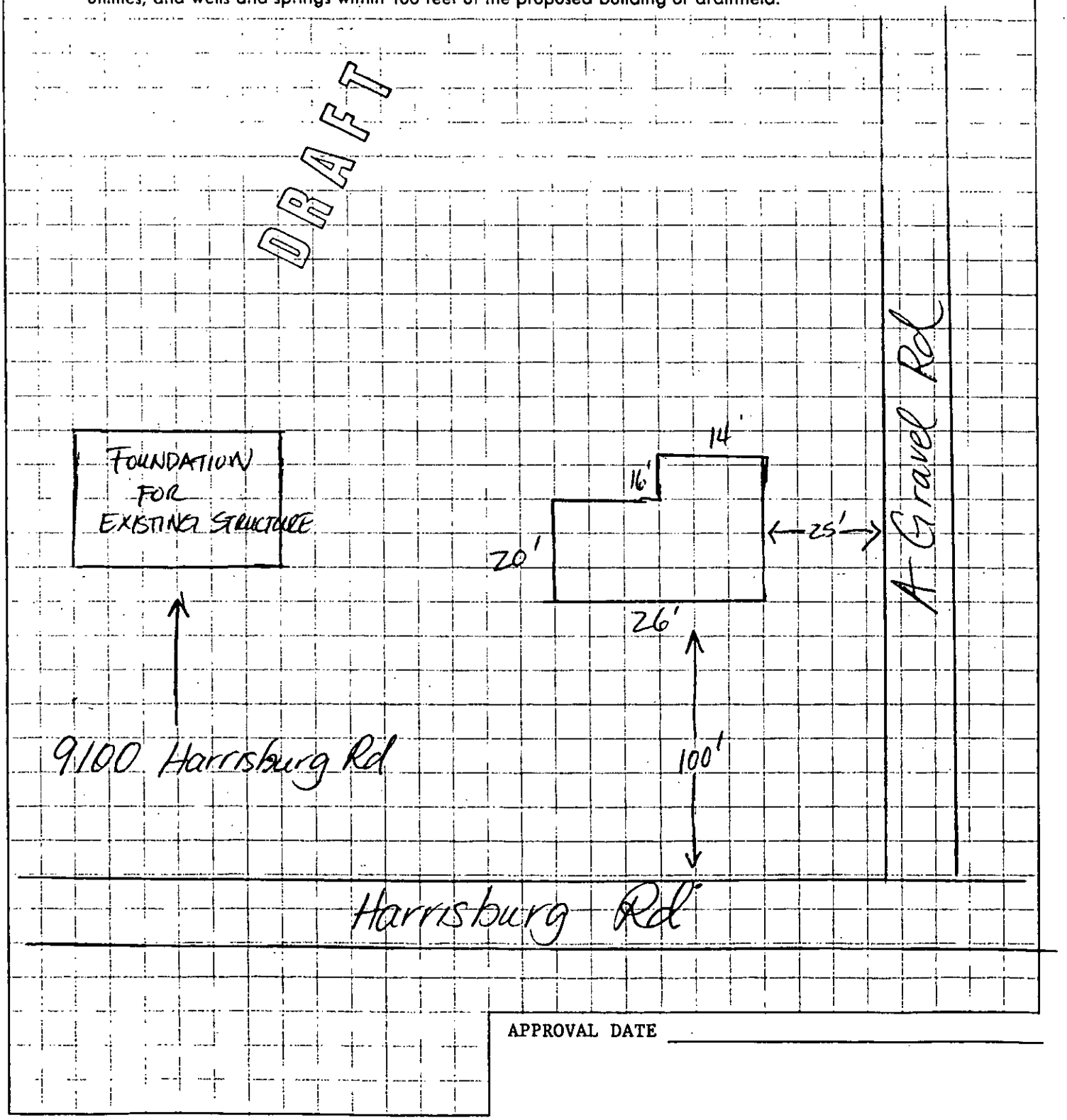
PROPOSED PLOT PLAN

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

FILE: 18100

TC: 108-101-04

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.



APPROVAL DATE _____

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

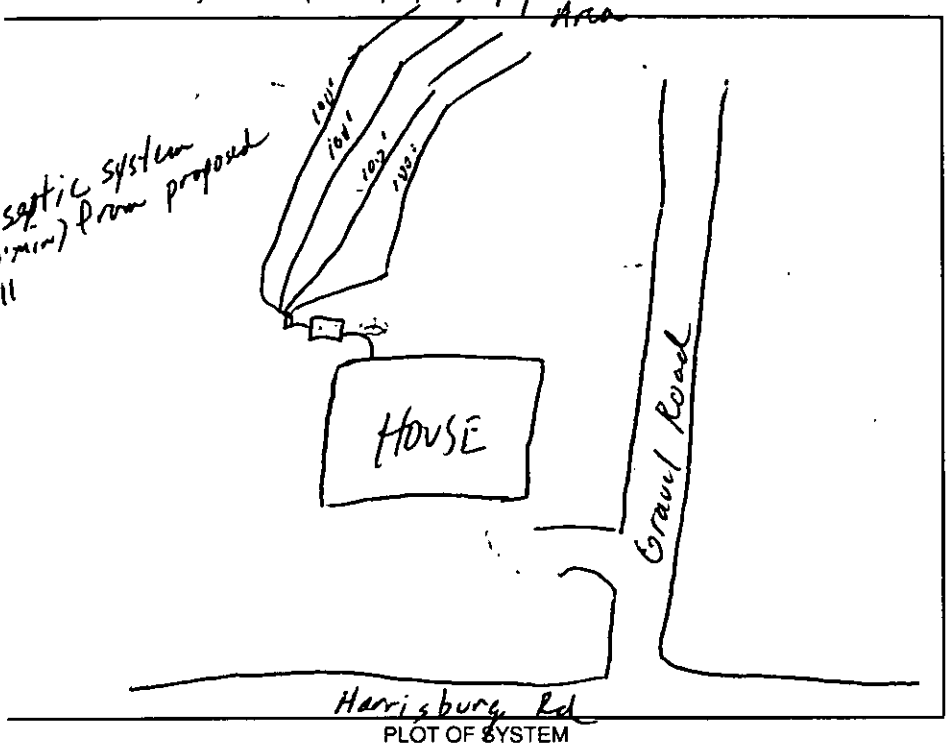
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 18100 DATE: 8/12/96

TC: 109 101 04 ☐ L

SERIAL Nº 16899

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 9/8/92. All work shall be completed on or before 9/12/96, 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 NA gallons

Tank Construction PCC

Trench Depth 24"-36"

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Trench Walls Scored and Porous yes

Total Line Length 400' feet

Number of Lines 4 (100')

Depth of Stone 12" inches

Distance from House 5 feet

Distance from Property Line 10' feet

Distance from Well > 100' feet

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

NAME OF OWNER Sidney & Dorathy Belk

LOCATION OF PROPERTY 9045 Harrisburg Rd

Comments: 1500ST, 4 lines x 100'long x 3'wd x 12"stone / Keep lines on contour of land / Keep septic system > 10' from any property lines

Statement for S. Bonnell, Program Chief 9-10-96

Philo S. Walker R.S.
Environmental Health Specialist

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