


1000 MCCORKLE RD

12/31/2007

duponbj

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

# Mecklenburg County
## Health Department

October 8, 1998

William M. Gardner, Jr.
1000 McCorkle Road
Charlotte, NC 28214

Re: 950 McCorkle Road
File: 2476B
Parcel: 053-093-10PO

Dear Mr. Gardner:

Receipt of your Application for Improvement Permit for the above referenced property is acknowledged. A soil evaluation and a site visit have been conducted. The results of the evaluation indicated that the site is **UNSUITABLE** under Rules .1941 **SOIL CHARACTERISTICS (MORPHOLOGY)**, .1943 **SOIL DEPTH** and .1945 **AVAILABLE SPACE**. For these reasons your Application for Improvement Permit is denied. A possible way to develop the site exists under Rule .1948(d) which reads as follows:

> A site classified as **UNSUITABLE** may be used for a ground absorption sewage treatment and disposal system specifically identified in Rules .1955, .1956, or .1957 of this Section or a system approved under Rule .1969 if written documentation, including engineering, hydrogeologic, geologic or soil studies, indicates to the local health department that the proposed system can be expected to function satisfactorily. Such sites shall be reclassified as **PROVISIONALLY SUITABLE** if the local health department determines that the substantiating data indicate that:
> (1) a ground absorption system can be installed so that the effluent will be non-pathogenic, non-infectious, non-toxic, and non-hazardous;
> (2) the effluent will not contaminate ground or surface water; and
> (3) the effluent will not be exposed on the ground surface or be discharged to surface waters where it could come in contact with people, animals, or vectors.

The State shall review the substantiating data if requested by the local health department.

Please be advised that you have the right to an informal review by this department. You also have the right to appeal under G.S. 130A-24, and to have the appeal held in Mecklenburg County.

If you have any questions regarding this matter, please call me at 336-5575.

Sincerely,

Kelly Randall, R.S., Soil Scientist
Individual Water and Wastewater Systems

FEE: 40.00 Ck # 8998
DATE: 4/16/98 JC

**APPLICATION FOR IMPROVEMENT PERMIT FOR RESIDENTIAL SITE INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM**

[ ] CRT

TYPE APPLICATION: ✓ NEW SYSTEM ___ EXPANSION/ ALTERATION OF EXISTING SYSTEM ___ REPAIR OF EXISTING SYSTEM

NORTH CAROLINA
DEPARTMENT OF ENVIRONMENT,
HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

FILE #: 24768

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 053-093-10 pp

STREET ADDRESS: 950 McCorkle Rd

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

TYPE OF BUILDING (CHECK ONE):

___ SINGLE MOBILE HOME(S)
___ DOUBLE WIDE (D)
✓ HOUSE (H)
___ MODULAR HOME (M)
___ MULTIPLE FAMILY (U)
___ OTHER (O)

TOWNSHIP (CHECK ONE):

✓ 0 MECKLENBURG
___ 1 CHARLOTTE
___ 2 DAVIDSON
___ 3 CORNELIUS
___ 4 PINEVILLE
___ 5 MATTHEWS
___ 6 HUNTERSVILLE
___ 7 MINT HILL

HEATED SQUARE FOOTAGE: 2424

NUMBER OF BEDROOMS: 3

NUMBER OF OCCUPANTS:

CLOSING DATE _____

FOUNDATION FOR RESIDENCE:

___ WITHOUT BASEMENT
___ ON SLAB
✓ CRAWL SPACE
___ WITH BASEMENT /PLUMBING
___ WITH BASEMENT /NO PLUMBING

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: ___ YES X NO TYPE: _____

WATER SUPPLY (CHECK ONE):

___ COMMUNITY (C)
___ MUNICIPAL (M)
X PRIVATE WELL (P)
___ SHARED WELL (S)
___ OTHER 'SPRINGS' (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES ___ YES X NO
EXISTING WASTEWATER SYSTEMS ___ YES X NO
EASTMENTS OR RIGHT-OF-WAYS ___ YES X NO
WELL, SPRINGS OR WATERLINES ___ YES X NO
DESIGNATED WETLANDS ___ YES ✓ NO

**PROPERTY OWNER:**

NAME: William M Gardner Jr
(LAST) (FIRST) (MI)

ADDRESS: 1100 McCorkle Rd

CITY: Charlotte STATE: NC ZIP: 28214

DAYTIME PHONE: ( ) 704 - 393-2485

**LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:**

NAME:
(LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) -

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. 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: William M Gardner Jr DATE: 4-16-98

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102

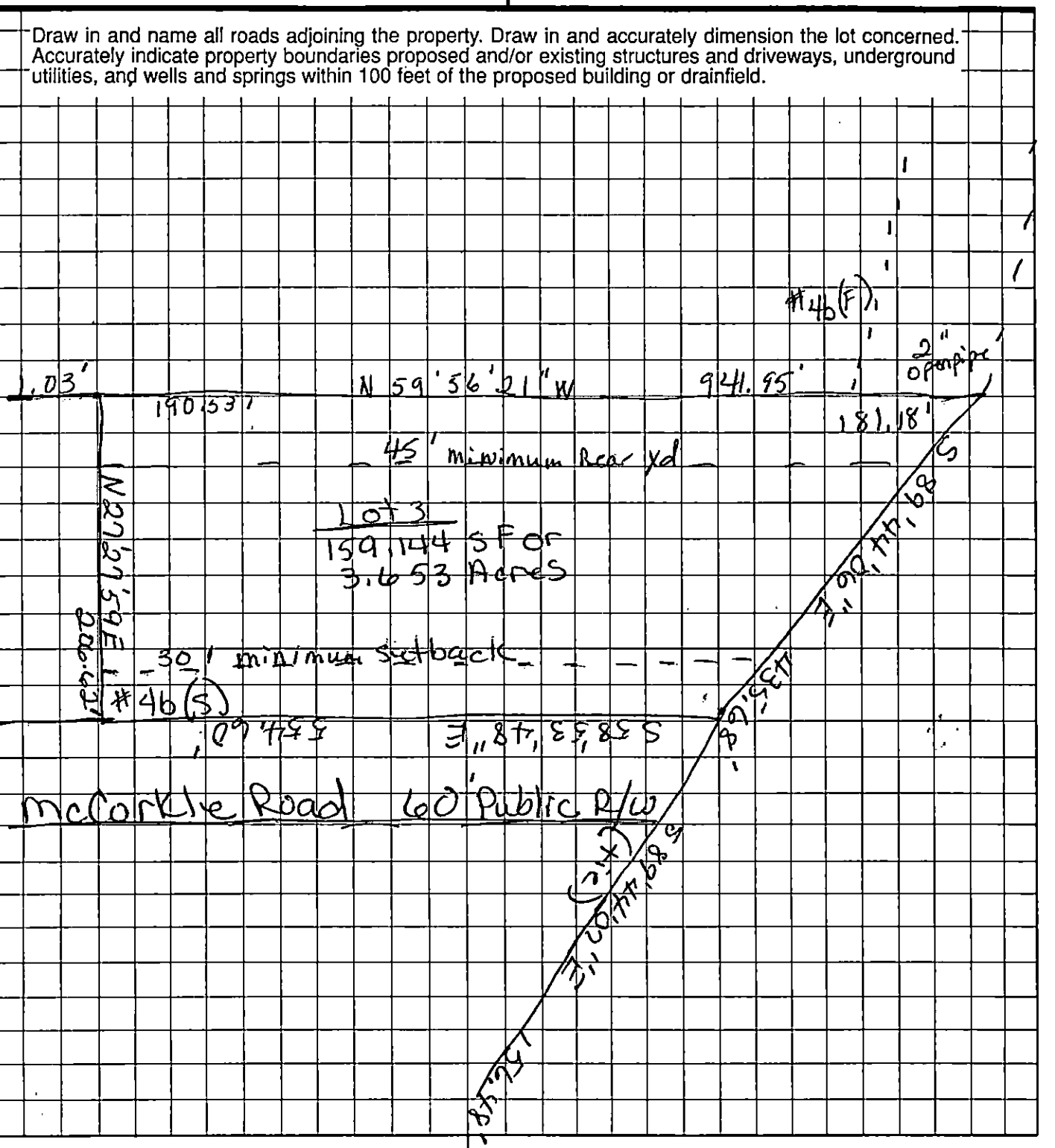
# PROPOSED PLOT PLAN

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

FILE: # 2476B

TC: PO 053-093-10

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.




Deborah M Gardner
OWNER/AGENT SIGNATURE

DATE 9-8-98

APPROVAL DATE _____

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

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet 1
PROPERTY ID #: PO 053-093-1
Lot # :
File # : 2416 B

#3 (90)

# SOIL/SITE EVALUATION *for* ON-SITE WASTEWATER SYSTEM

OWNER: William M. Gardner, Jr. APPLICANT:
ADDRESS: 1000 McCo DATE EVALUATED: 9-29-98
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949): 360gpd / PROPERTY SIZE: 3.6 A
LOCATION OF SITE: 950 McCorkle Road PROPERTY RECORDED:
WATER SUPPLY: ☑ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☑ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

| PROFILE # | Slopes 2-8% .1940 LANDSCAPE POSITION/ SLOPE % | HORIZON DEPTH (IN.) | SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE | .1941 CONSISTENCE/ MINERALOGY | OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR | .1943 SOIL DEPTH | .1956 SAPRO CLASS | .1944 RESTR HORIZ | PROFILE CLASS & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| 1 | LS | 0-26" | Massive | Mixed/ Fill | >43" to soil wetness | 43" | US | None | US |
| | | 26-43" | M/ C/ | Fr/SEXP/ SS/SP | | | | | |
| 2 | LS | 0-6" | Massive | Mixed/ Fill | >30" to soil wetness | 30" | US | None | US |
| | | 6-30" | M/ SCL | VFr/ SEXP/ SS/SP | | | | | |
| 3 | LS | 0-5" | Massive | Mixed/ Fill | >40" to soil wetness | 40" | US | None | US |
| | | 5-29" | SBK/ SCL | Fr/ Mixed/ SS/SP | | | | | |
| | | 29-40" | M/ C | VFr/ EXP/ VS/VP | | | | | |
| 4 | LS | 0-6" | Massive | Mixed/ Fill | >40" to soil wetness | 40" | PS | None | PS Sap II .391 Pa |
| | | 6-40" | M/ SL | Fr/ SEXP/ NS/NP | | | | | |
| | | 40"+ | M/ SL | VFr/ SEXP/ NS/NP | | | | | |
| | | | (Weathered rock) | | | | | | |
| 5 | LS | 0-3" | gr/ CL | Fr/ SEXP/ SS/SP | >32" to soil wetness | 32" | US | None | US |
| | | 3-11" | ABK/ C | VFr/ EXP/ VS/VP | | | | | |
| | | 11-32" | M/ SCL | Fr/ SEXP/ SS/SP | | | | | |
| | | 32"+ | Hard Weathered | Level Rock | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | US | US |
| System Type(s) | | |
| Site LTAR | | |

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): Unsuitable
EVALUATED BY: W.R. Marks 9-30-98
OTHER(S) PRESENT:

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet 2
PROPERTY ID #:
Lot # :
File # : 2476B

# SOIL/SITE EVALUATION
## *for* ON-SITE WASTEWATER SYSTEM

OWNER: _____ APPLICANT: _____
ADDRESS: _____ DATE EVALUATED: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: _____ PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

| PROFILE # | .1940 LANDSCAPE POSITION/ SLOPE % | HORIZON DEPTH (IN.) | SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE | .1941 CONSISTENCE/ MINERALOGY | OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR | .1943 SOIL DEPTH | .1956 SAPRO CLASS | .1944 RESTR HORIZ | PROFILE CLASS & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| 6-A | LS | 0-6" | gr/cl | Fr/SE XP/SS/SP | >44" TO soil wetness | 44" | ~~PS~~ PS | None | PS .35/Fz Sap. II |
| | | 6-44" | M/SL | Fr/SE XP/NS/NP | | | | | |
| | Both Profiles in same pit | | | | | | | | |
| 6-B | LS | 0-6" | gr/cl | Fr/SE XP/SS/SP | >24" TO soil wetness | 24" | US | None | US |
| | | 6-24" | M/ Hard | weathered Rock | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 7 | LS | 0-30" | Mixed clay | Fill | >48" TO soil wetness | 48" | US | None | US |
| | | 30-48" | M/ CL | Fr/SE XP/SS/SP | | | | | |
| | | | | | | | | | |
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| | | | | | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | | |
| System Type(s) | | |
| Site LTAR | | |

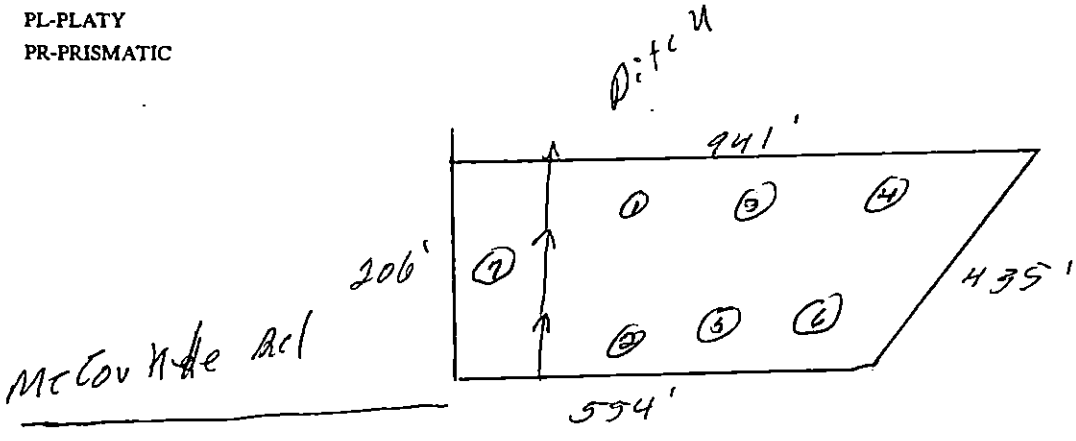
OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: _____
OTHER(S) PRESENT: _____

FILE # 2476B

COMMENTS 1002 Repair

| LANDSCAPE POSITION | GROUP | TEXTURE | .1955 LTAR | CONSISTENCE MOIST | CONSISTENCE WET |
|---|---|---|---|---|---|
| R-RIDGE | I | S-SAND | 1.2-0.8 | | |
| S-SHOULDER SLOPE | | LS-LOAMY SAND | | VFR-VERY FRIABLE | NS-NON-STICKY |
| L-LINEAR SLOPE | | | | FR-FRIABLE | SS-SLIGHTLYSTICKY |
| FS-FOOT SLOPE | II | SL-SANDY LOAM | 0.8-0.6 | FI-FIRM | S-STICKY |
| N-NOSE SLOPE | | L-LOAM | | VFI-VERY FIRM | VS-VERY STICKY |
| H-HEAD SLOPE | | | | EFI-EXTREMELY FIRM | NP-NON-PLASTIC |
| CC-CONCLAVE SLOPE | III | SI-SILT | 0.6-0.3 | | SP-SLIGHTLYSTICKY |
| CV-CONVEX SLOPE | | SICL-SILTY CLAY LOAM | | | P-PLASTIC |
| T-TERRACE | | CL-CLAY LOAM | | | VP-VERY PLASTIC |
| FP-FLOOD PLAIN | | SCL-SANDY CLAY LOAM | | | |
| | IV | SC-SANDY CLAY | 0.4-0.1 | | |
| | | SIC-SILTY CLAY | | | |
| | | O-ORGANIC | | | |

| STRUCTURE | MINERALOGY |
|---|---|
| SG-SINGLE GRAIN | SLIGHTLY EXPANSIVE |
| M-MASSIVE | |
| CR-CRUMB | EXPANSIVE |
| GR-GRANULAR | |
| SBK-SUBANGULAR BLOCKY | |
| ABK-ANGULAR BLOCKY | |
| PL-PLATY | |
| PR-PRISMATIC | |




N

FEE: 100.00 ck # 9506
DATE: 4/16/98 JC

**APPLICATION FOR IMPROVEMENT PERMIT FOR RESIDENTIAL SITE INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM**

[ ] CRT

TYPE APPLICATION: ☑ NEW SYSTEM ___ EXPANSION/ ALTERATION OF EXISTING SYSTEM ___ REPAIR OF EXISTING SYSTEM

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ON-SITE WASTEWATER SECTION

FILE #: 2476B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 053-093-10 pp

STREET ADDRESS: 950 McCorkle Rd

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

TYPE OF BUILDING (CHECK ONE):

___ SINGLE MOBILE HOME(S)
___ DOUBLE WIDE (D)
☑ HOUSE (H)
___ MODULAR HOME (M)
___ MULTIPLE FAMILY (U)
___ OTHER (O)

HEATED SQUARE FOOTAGE: 2424

NUMBER OF BEDROOMS: 3

NUMBER OF OCCUPANTS:

FOUNDATION FOR RESIDENCE:

___ WITHOUT BASEMENT
___ ON SLAB
☑ CRAWL SPACE
___ WITH BASEMENT /PLUMBING
___ WITH BASEMENT /NO PLUMBING

TOWNSHIP (CHECK ONE):

☑ 0 MECKLENBURG
___ 1 CHARLOTTE
___ 2 DAVIDSON
___ 3 CORNELIUS
___ 4 PINEVILLE
___ 5 MATTHEWS
___ 6 HUNTERSVILLE
___ 7 MINT HILL

CLOSING DATE_____

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: ___ YES ☒ NO TYPE: _____

WATER SUPPLY (CHECK ONE):

___ COMMUNITY (C)
___ MUNICIPAL (M)
☒ PRIVATE WELL (P)
___ SHARED WELL (S)
___ OTHER 'SPRINGS' (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES ___ YES ☒ NO
EXISTING WASTEWATER SYSTEMS ___ YES ☒ NO
EASTMENTS OR RIGHT-OF-WAYS ___ YES ☒ NO
WELL, SPRINGS OR WATERLINES ___ YES ☒ NO
DESIGNATED WETLANDS ___ YES ☑ NO

| PROPERTY OWNER: | LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE: |
|---|---|
| NAME: William M Gardner Jr (LAST) (FIRST) (MI) | NAME: (LAST) (FIRST) (MI) |
| ADDRESS: 1000 McCorkle Rd | DAYTIME PHONE: ( ) — |
| CITY: Charlotte STATE: NC ZIP: 28214 | |
| DAYTIME PHONE: ( ) 704 - 393 - 2485 | |

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. 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: William M Gardner Jr DATE: 4-16-98

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c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102

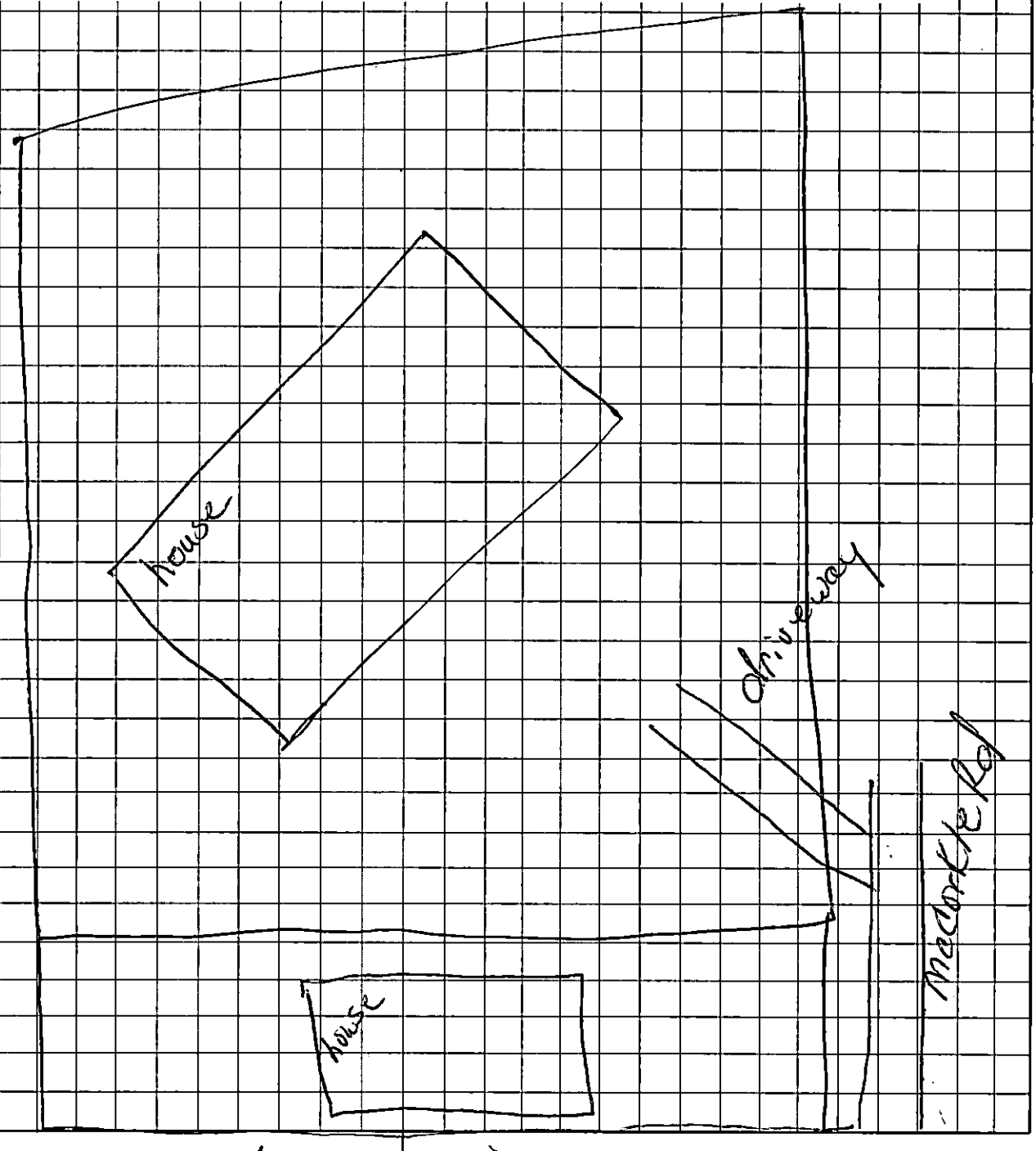
# PROPOSED PLOT PLAN

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

FILE: 2476B

TC: 053-053-1060

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.




William M Bach Jr
OWNER/AGENT SIGNATURE

DATE 4-16-98

APPROVAL DATE _____

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

DATE April 16, 1998

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION Meck

053-093-10 PO
PARCEL NUMBER

950 McCorkle 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. WATERSHED PROTECTION | ____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: Septic inspective - newly created lot

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: Dary A. Hunt

REVISED 1/91

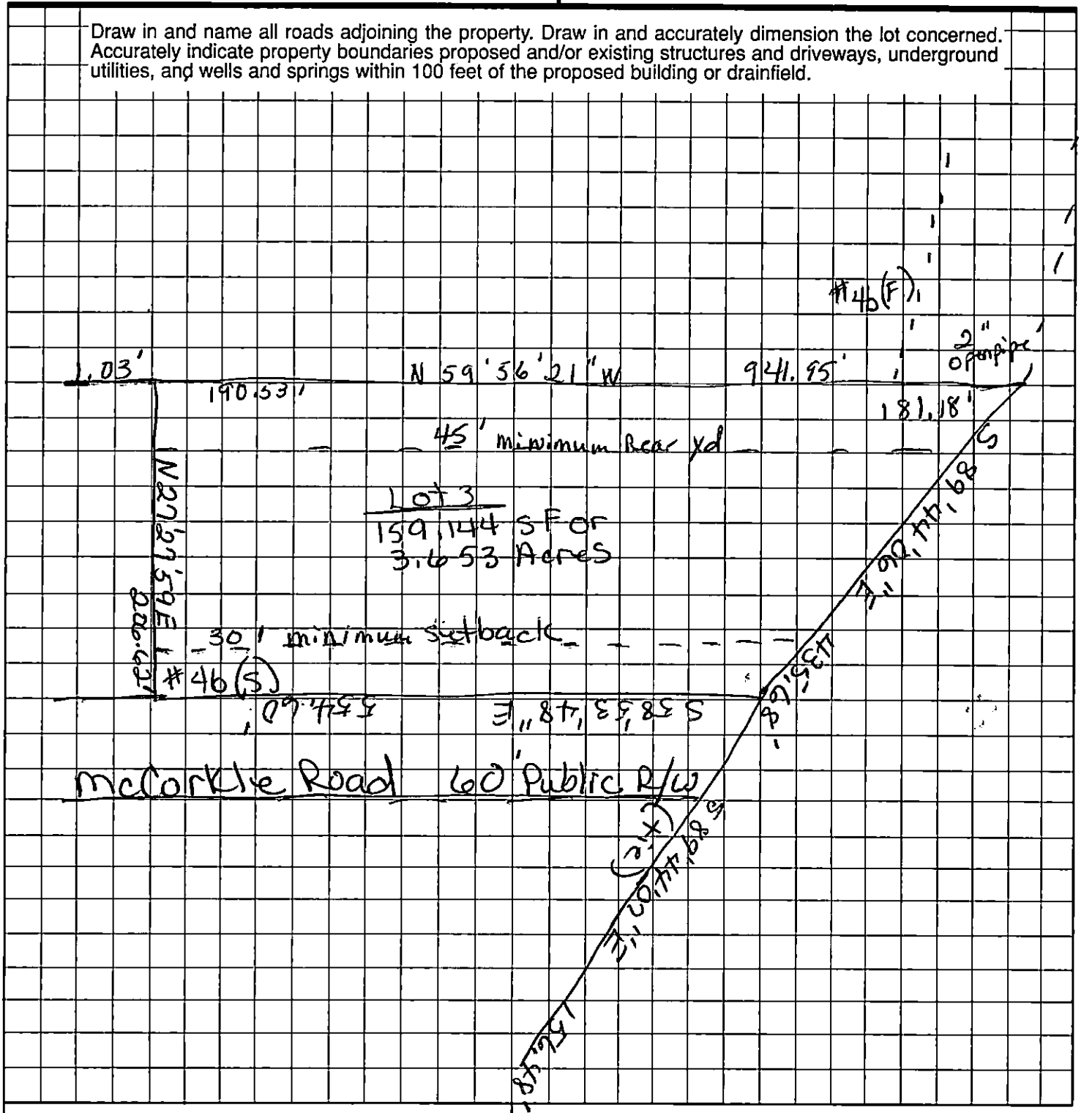
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ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: @ 2476B

TC: PD 053-093-10

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950 McCorkle Rd
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| 3. WATERSHED PROTECTION | ____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 |
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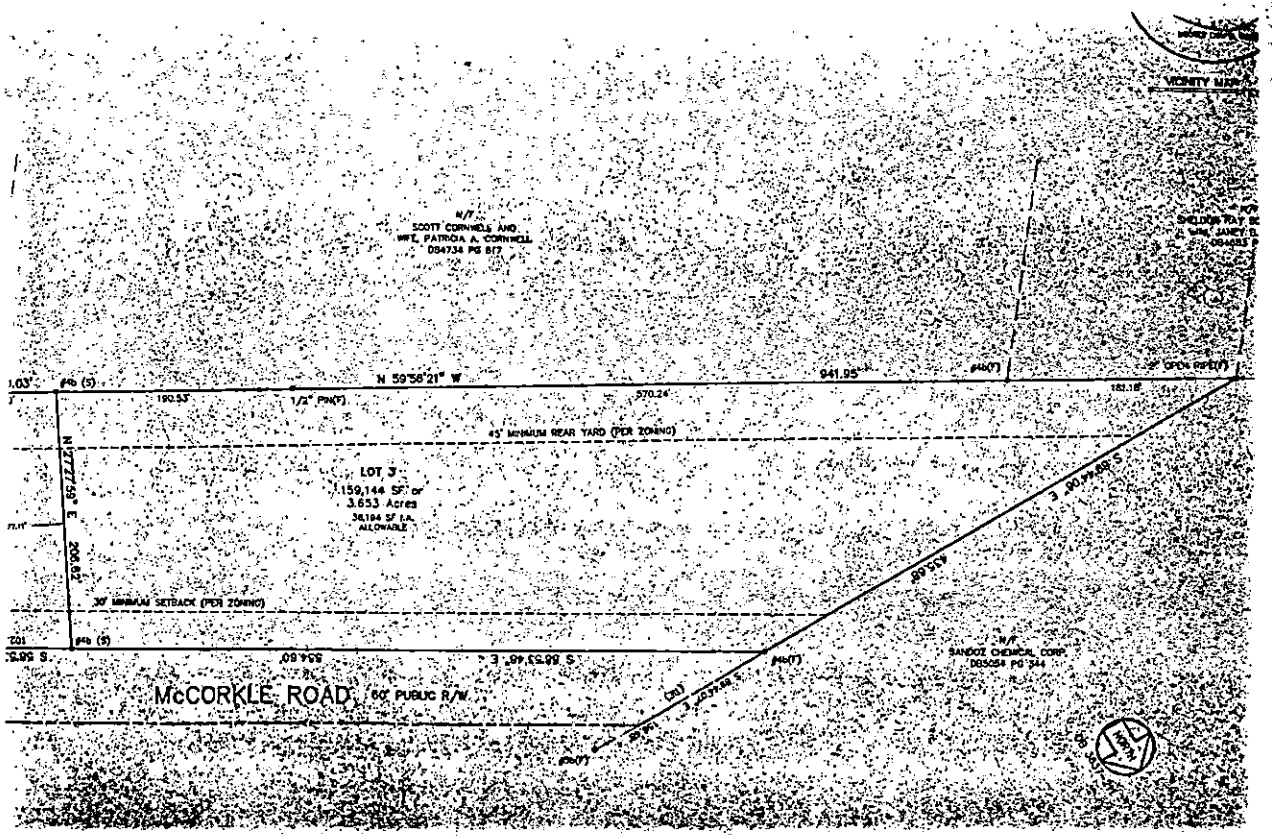
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ALL OTHER FORMS OBSOLETE

☐ NEW ADDRESS

SIGNED: Dary A. Hunt

REVISED 1/91


N/F
SCOTT CORNWELL AND
WFE, PATRICIA A. CORNWELL
DB4734 PG 817
N 59°56'21" W
941.95'
190.53'
570.24'
1/2" PIN(F)
45' MINIMUM REAR YARD (PER ZONING)
LOT 3
1,159,144 SF or
3.653 Acres
36,194 SF I.A.
ALLOWABLE
N 17°17'56" E
208.62'
30' MINIMUM SETBACK (PER ZONING)
S 66°53'49" E
554.60'
McCORKLE ROAD, 60' PUBLIC R/W
SANDOZ CHEMICAL CORP.
DB5058 PG 344
VICINITY MAP