

6612 MINTBROOK DR

13709833

6/28/2007

duponbj

Groundwater and Wastewater Services File Imaging Project

May 2007

Barcode Font = IDAutomationHC39M

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 7336-A DATE: 5-23-91
TC: 137-098-12 ☒ L ☐ CRT
SERIAL № 13801

Name of Owner Rory Rice Juris.:
Address of Property 6612 Mintbrook Dr.

Inspection Data:

Tank Material PVC
Total Length of Drainfield 270
Number of Lines 3 @ 90'
Cover Depth 18" - 42"
Water Supply Source well
Distance to Water Source >50'
Excavation Inspected 5-23-91
Tank(s) Inspected 5-23-91
Wash Line Inspected
High Water Alarm Inspected

PLOT

Design: 1991, 1500ST, con, 810SFT, 12", cecil CTR# 117

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: Installed for 2 bedrooms

B. R. Ferguson
Environmentalist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

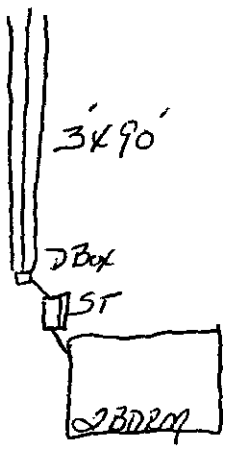
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 7336A DATE: 4-11-91

TC: 137-098-12 ~~M~~ L

SERIAL Nº 14974

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 4-11-91. All work shall be completed on or before 5-13-91, 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.



MINTBROOK Dr.

PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank N/A gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 270 feet

Number of Lines 3

Depth of Stone 10" inches

Distance from House >5 feet

Distance from Property Line >10 feet

Distance from Well >50 feet

NAME OF OWNER Perry Rice

LOCATION OF PROPERTY Lot 12 MINTBROOK DR.

Comments: INSTALL 1500g ST, CONV. SYS 3 TRENCHES 3x90 for 2 BDRM Home

Division or Section Head

Environmentalist RS1

* 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

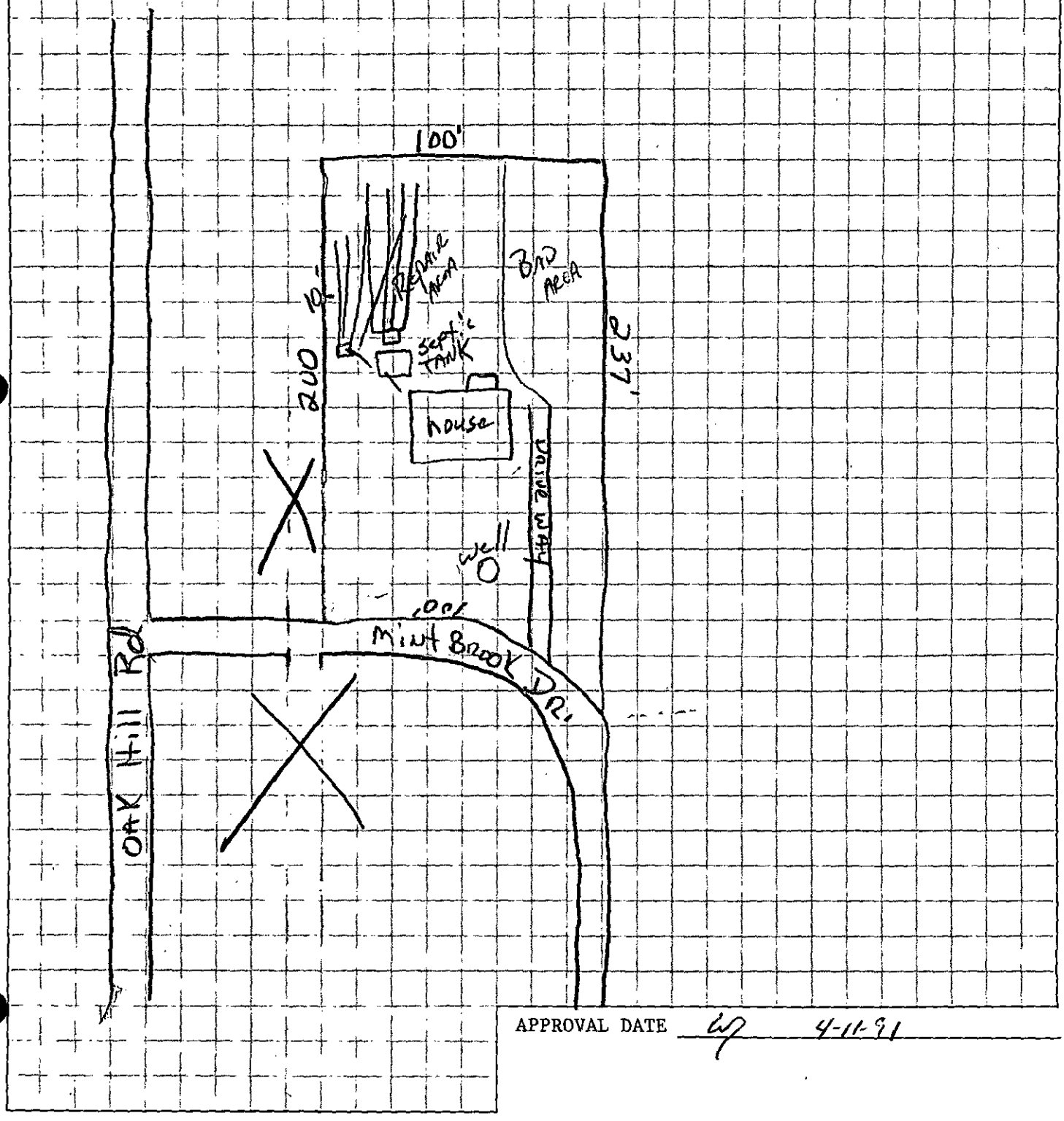
PROPOSED PLOT PLAN

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

FILE: 17336A 64674

TC: 137-098-12

Road this? 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 4-11-91

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

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: 6467 / 7936P
TC:
SERIAL: № 21968

EW
#200.00
04/03/91
CRT

JOB LOCATION

① ADDRESS: 6602 (STREET NO.) Minthrook Dr (STREET) ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.: 137-098-12
⑤ SUBDIVISION: Wilgrove Farms ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: Howard (FIRST) D (MIDDLE) Criswell (LAST)
⑨ MAILING ADDRESS: 6600 Oak Hill Rd
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28227
⑬ PHONE: (WORK) Tina Rice) 377-5209 ⑭ (HOME) 545-7546

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? 2 ㉕ Type?
㉓ Maximum occupancy? 4 PERSONS 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: Howard D Criswell
Date: 4-3-91

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 ~~30~~ 60 months from the date of issuance.

Environmentalist, 4-11-91 Date

Director or Authorized Section Head, 4-12-91 Date

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

Please
put in Base
folder after
signing!
Thanks!
JB

33

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

DATE 4/1/91

FROM: COUNTY ENGINEERING DEPARTMENT

73364
or
6467A

EHD FILE _____ JURISDICTION CODE Mack

PARCEL NUMBER 137-098-12

ASSIGNED ADDRESS 6612 Huntbrook 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: Water or Well, 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 DRIVEWAY(S).

SIGNED: MCM

OPWEAR 06-88

NEW ADDRESS / /*

FORM 100

Mecklenburg County
Health Department

March 28th, 1991

Howard D. Criswell
10430 Albemarle Road
Charlotte, NC 28227

RE: Property located at Mintbrook Drive
FILE: 7336A
PARCEL: 137-098-12

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 results of this investigation showed the property to be classified UNSUITABLE for the installation of such a system. A copy of the Site Evaluation Report (Serial Number 17080) is enclosed.

State regulations provide that sites originally classified unsuitable may be utilized for the installation of alternate or modified sewage disposal systems provided the requirements of 10 NCAC 10A .1948 (c) are met. A reprint of this section is enclosed for your information.

Should you desire to file for permission to install an alternate or modified sewage treatment system on the property, 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. They will be reviewed, and if it is determined that the proposed system may reasonably be expected to function satisfactorily, an Improvement Permit will be issued by the Department upon completion by you, of a formal request for lot reclassification.

If I may be of any assistance, please feel free to call.

Very truly yours,

Gene Vaughan, R.S., Supervisor
Individual Water and Wastewater Systems

Enclosure (2)

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 17080

File: 7336-19 Action 2

Parcel: 137-098-12 ☐ PC

Location: MINTBROOK DR

Subdivision:

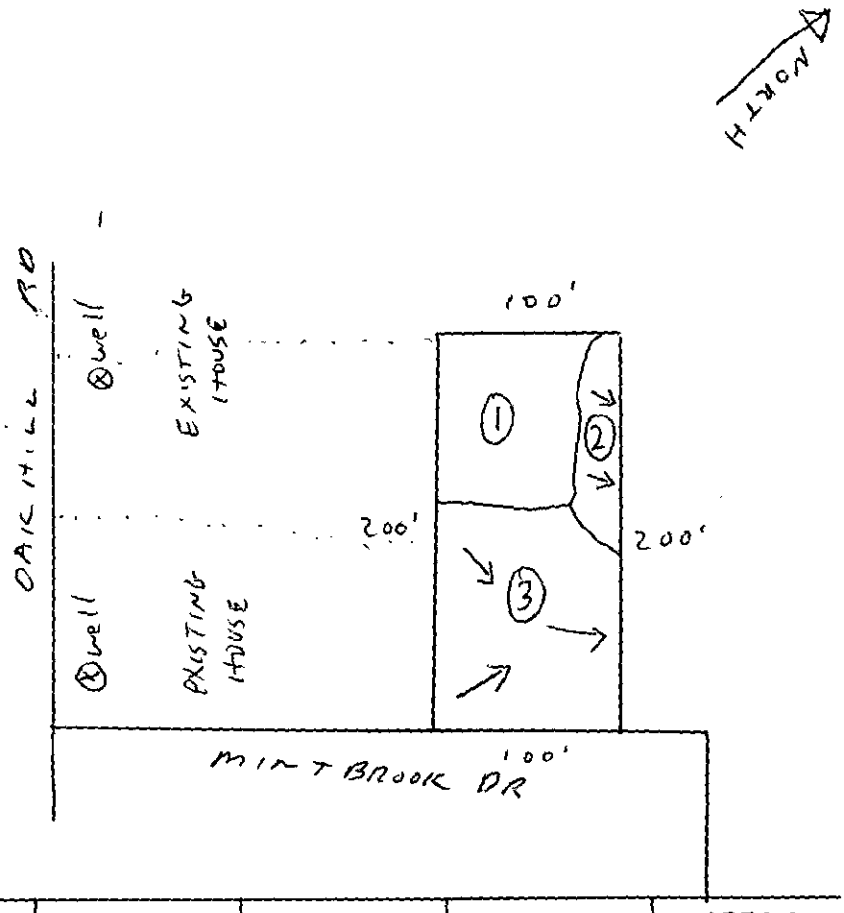
Lot: 12 Block: Acres: .45

Owner: HOWARD D CRISWELL
Address: 10430 ALBEMARLE RD
CHARLOTTE NC 28227

Comments: 100% REPAIR

Described by: Kelly Rowell

Date: 3-27-91



***** 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) COMPLEX SLOPE	S PS (U) COMPLEX SLOPE GULLY	S PS U	S PS U	S PS U
Texture	S (PS) U CLAY	S PS U DROP OFF	S PS U FILL	S PS U	S PS U	S PS U
Structure	S (PS) U SUBANGULAR BLKY	S PS U —	S PS U —	S PS U	S PS U	S PS U
Drainage	S (PS) U > 36"	S PS U —	S PS U —	S PS U	S PS U	S PS U
Depth	S (PS) U > 36"	S PS U —	S PS U —	S PS U	S PS U	S PS U
Restrictive Horizons	S PS U NONE	S PS U —	S PS U —	S PS U	S PS U	S PS U
Available Space	S PS (U) RESTRICTED	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	CECIL LIKE	COMPLEX SLOPE	COMPLEX SLOPE GULLY/FILL			
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: ~~7336-A~~ 7336-A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: Mintbrook Dr

② SUBDIVISION: _____ ③ LOT: 12 ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: _____ PAGE NO.: _____ PARCEL NO.: PC 137-095 12

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

OWNER

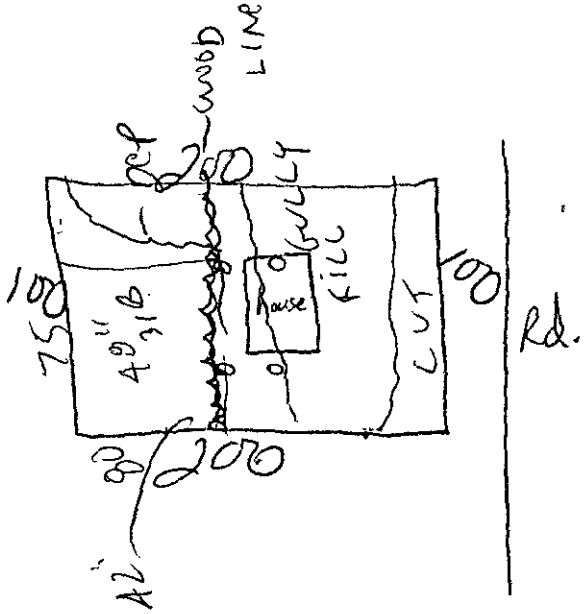
⑦ NAME: Howard (FIRST) D (MIDDLE) Criswell (LAST)

⑧ MAILING ADDRESS: 10430 Albemarle Rd

⑨ CITY: Charlotte ⑩ STATE: NC ⑪ ZIP: 28227

⑫ PHONE: (WORK) SAME (HOME) (704) 545-4407

⑬ Accurately diagram and dimension lot.



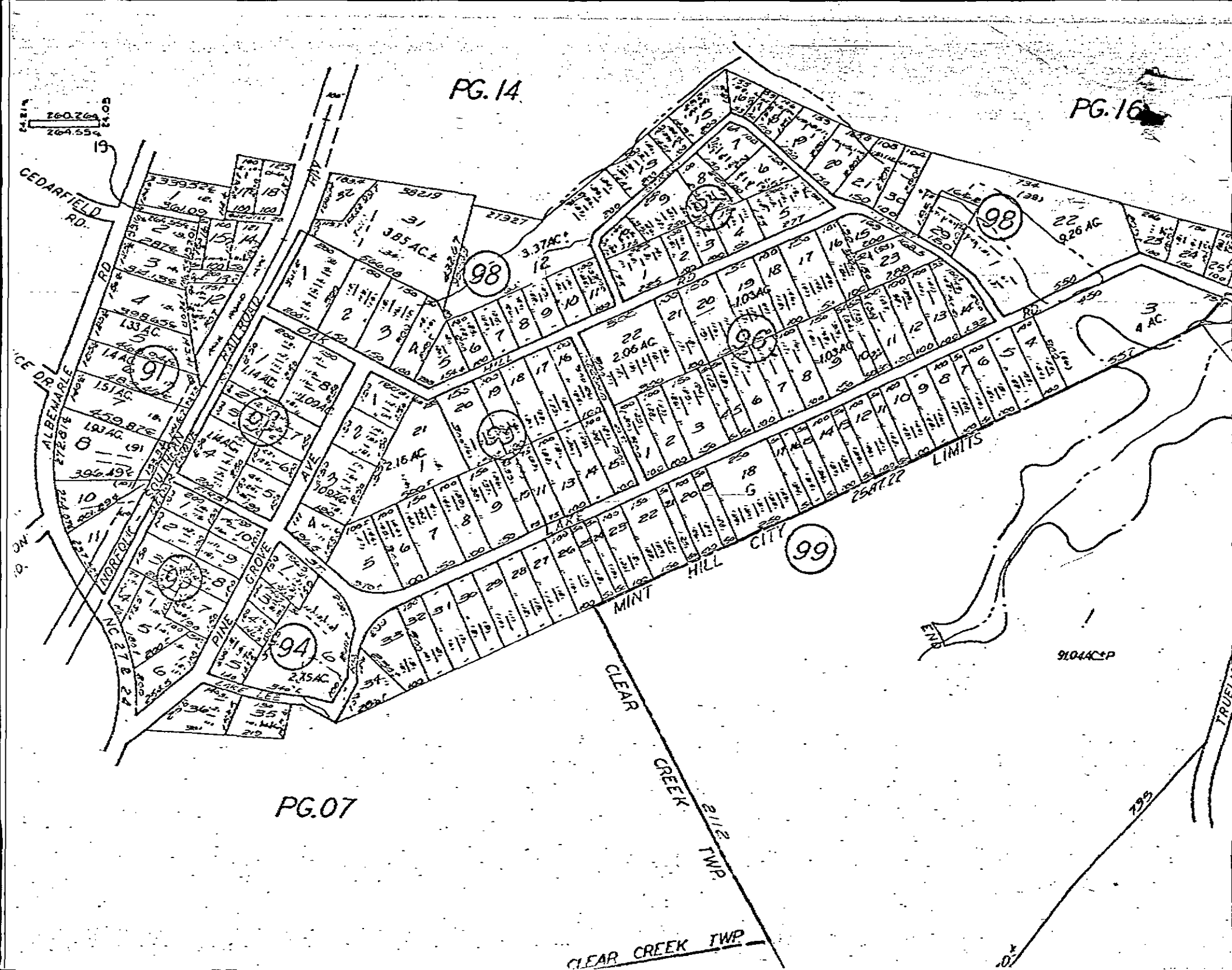
⑭ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Howard D Criswell

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

Date: 3-25-91

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER'S COPY


PG. 14
PG. 16
PG.07
CEDARFIELD RD.
ALBEMARLE RD
RAILROAD
OAK AVE
PINE GROVE
LAKE LEE
MINT HILL
CITY LIMITS
CLEAR CREEK
CLEAR CREEK TWP
CLEAR CREEK TWP
NC 27
98
99
91
94
3.85AC±
2.16AC
2.06AC
1.03AC
2.35AC
0.26AC
4 AC.
91.04AC±P

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)
7336A
FILE: ~~8646-98-A~~
TC: _____
☑ PC ☐ REPT

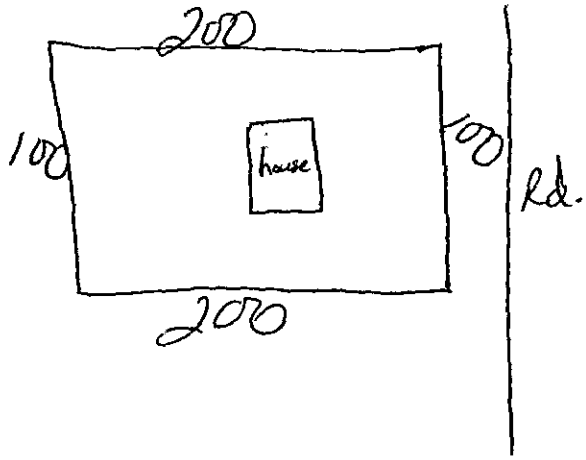
JOB LOCATION

① ADDRESS: Mintbrook Dr
② SUBDIVISION: _____ ③ LOT: 12 ④ BLOCK: _____
⑤ PARCEL REFERENCE: BOOK NO.: _____ PAGE NO.: _____ PARCEL NO.: PO 137-098-12
⑥ DEED REFERENCE: BOOK NO.: _____ PAGE NO.: _____

OWNER

⑦ NAME: Howard (FIRST) D (MIDDLE) Criswell (LAST)
⑧ MAILING ADDRESS: 10430 Albemarle Rd
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MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 3-25-91

Name/Company: Howard D. Criswell

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: App. Soil Test (app. 1 acre)
Minthrook Dr. (Lot 12)
TP: PO 137-198-12
File: 6467A

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
MAR 25 1991

Fee: $ 50.00 Cash $50.00

NOTICE:

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

Completed by

Collected by