

5217 RICHMOND RD

13710420

12/26/2007

duponbj

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

FEE: _____

DATE: _____

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

REPAIR

[ ] CRT

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

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

FILE #: 8736 — 1990 B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 137-104-20

STREET ADDRESS: 5217 Richmond RD

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: 25

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:

NUMBER OF BEDROOMS: 3

NUMBER OF OCCUPANTS: 3

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	WELL, SPRINGS OR WATERLINES	___ YES ___ NO
EXISTING WASTEWATER SYSTEMS	___ YES ___ NO	DESIGNATED WETLANDS	___ YES ___ NO
EASTMENTS OR RIGHT-OF-WAYS	___ YES ___ NO		

PROPERTY OWNER:	LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:
NAME: (LAST) Brown (FIRST) Ronald (MI) Coleman	NAME: (LAST) (FIRST) (MI)
ADDRESS: 5217 Richmond RD	DAYTIME PHONE: ( ) —
CITY: Mint Hill STATE: NC ZIP: 28227	
DAYTIME PHONE: ( ) - 545-3345	

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: Ronald C. Brown DATE: 4/10/97

Built 1968

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

N. C. Department of Environment, Health, and Natural Resources/Division of Environmental Health

ON-SITE WASTEWATER VIOLATION NOTICE

OWNER Jerry Harrington MAILING ADDRESS 5217 Richmond Road Charlotte 28227

OCCUPANT Same as above LOCATION Same as above

[X] RESIDENCE [ ] BUSINESS [ ] OTHER tax parcel #137-104-20

You are hereby notified that you are violating the Rules adopted by the North Carolina Commission for Health Services or Article 11 of Chapter 130A of the General Statutes of North Carolina by owning or controlling a residence, place of business, or place of public assembly which is not provided with an approved wastewater system. Your wastewater system is not in compliance; the following corrections must be made. Consult your Local Health Department for advice and required permits by calling telephone number 336-5570/336-5102.

[X] Install/Repair wastewater system. You must obtain an Improvement Permit from the local health department prior to repairing your system.

[ ] Eliminate wastewater discharge and connect to an approved wastewater system.

[ ] Pit Privy must be repaired/constructed.

[ ] Other Repairs (*specify*) _____

Pump tank as needed

[X] Perform Maintenance (*specify*) to eliminate effluent on ground surface until septic system is repaired.

If the wastewater violation is not brought into compliance by February 17, 1997, appropriate legal action will be taken.

Notice Issued January 16, 1997 (Date) Signed Philo S. Walker, R.S. Philo S. Walker R.S. Agent Division of Environmental Health

Compliance _____ (Date) Signed _____ Agent Division of Environmental Health

DEHNR 1108 (Revised 9/92)
On-Site Wastewater Section (Review 10/94)

FEE: _____

DATE: _____

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

REPAIR FOR W.

I JCRT

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

FILE #: 8736 1890B

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__ SHARED WELL (S) __ OTHER 'SPRINGS' (O)

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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: (LAST) Brown (FIRST) Arnold (MI) Coleman	NAME: (LAST) (FIRST) (MI)
ADDRESS: 5217 Richmond RD	DAYTIME PHONE: ( ) —
CITY: Mint Hill STATE: NC ZIP: 28227	
DAYTIME PHONE: ( ) - 545-2345	

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

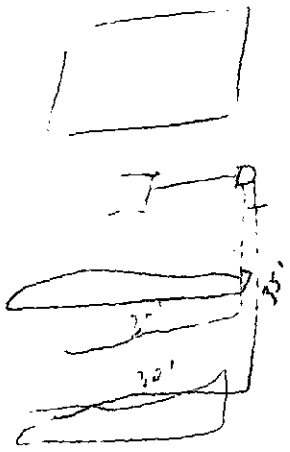
An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing 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: Arnold C. Brown DATE: 4/11/97

Built 1968

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

5/27/97



Existing drainfield
septic system disconnected
1' trench 24" stone

SERVICE REQUEST/WORK ORDER

106 B

Log No.: _____ Section: _____ Hazard? [ ] Yes [ ] No

Date: 11/10/97 Parcel: 137-104-20 <60 Days? [ ] Yes [ ] No

REQUESTING PERSON: Ronald Brown Phone 545-3345

Address 5217 Richmond Rd City _____ Zip 28227

PROPERTY CONCERNED: Facility Name Jerry Hensington 545-6542

Address 5217 Richmond Rd City _____ Zip 28227

SERVICE REQUESTED: Sewage on surface of ground running down side walk & into yard of neighbor

ASSIGNED TO: fw TAKEN BY: fgc

DATE	ACTIVITY REPORT
11/14/97	Septic failure in front yard Area. Slight failure appeared to be in front Area
11/16/97	NOV Mailed
3/20/97	OSV conducted w/ Ronald Brown (new owner). Located a straight pipe from the washer line to the ditch in front of the house.
5/16/98	Met Ronald Brown on lot. Mr Brown had plumbed washer line back into the tank. He had also open the existing drainfield from existing roots in the drainfield
5/16/98	Closed

NOTIFICATION TO REQUESTING PERSON: ( ) Written ( ) Verbal ( ) Not Applicable

COMPLETED BY: Philo A Walker, 5/16/97

REVIEWED BY: _____

~~February 24, 1994~~

2/26/97

1) moved in 3 1/2 yrs ago
2 months ago septic problems
Sofner system drains into septic tank
20 Gal +2 per day
Recently purchased house 1 month ago
was renting from Jerry Harrington
earlier.

Jan Hicks
~~411 Gibson Drive~~
~~Huntersville, NC 28078~~

~~Dear Jan Hicks:~~

I have corresponded with yo
~~Drive~~, to no avail. This ha
indicate that you have not m

This residence has been an o
appreciated. In order to pr
~~copy of the tap-on fee recei~~
~~1994~~.

I am greatly appreciative of your direct attention to the compliance of this complaint.

If you have any further questions, please feel free to contact me at 336-5570 or 336-5102.

Sincerely,

Philo S. Walker R.S. contact this department to make arrangement

Philo S. Walker, R.S.
Individual Water and Wastewater Syst for repairs as required by April 10, 1997.

PH:gf

cc: Sylvia Daniel, Program Chief
~~Sara Pressly, County Attorney~~