


12022 TITAN AV

01514425

1/7/2008

duponbj

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

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ONSITE WASTEWATER SECTION

AES #3

Sheet: _____
Property ID: 015-144-25
Lot #: 16217 LOT D
File #: 45773

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

OWNER: Flossie Smith APPLICANT: Johnny Polanco
ADDRESS: 1412 Murdock Rd, #B, Charlotte DATE EVALUATED: 4-30-01
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949) 480gpd PROPERTY SIZE: .46
LOCATION OF SITE: 12022 Titan Avenue PROPERTY RECORDED: _____
WATER SUPPLY: ☑Private ☐Public ☑Well ☐Spring ☐Other _____
EVALUATION METHOD: ☑Augur 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 |
|---|---|---|---|---|---|---|---|---|---|
| 1 | LS | 0-4" | gr/ls | Fr/SE/P/SS/SP | 7.5YR 5/8 to 10YR 7/1 wetness | 22" | N/A | None | US |
| | | 4-22" | SBK/C | VF/Mixed/US/VP | | | | | |
| 2 | LS | 0-6" | gr/cl | Fr/SE/P/SS/SP | 7.5YR 5/8 to 10YR 7/1 wetness | 29" | N/A | None | US |
| | | 6-29" | ABK SBK/C | VF/Mixed/US/VP | | | | | |
| 3 | LS | 0-12" | gr/scl | Fr/SE/P/SS/SP | 7.5YR 5/8 to 10YR 7/2 wetness | 42" | N/A | None | PS .29/FL ID |
| | | 12-42" | SBK/C | F/SE/P/SP | | | | | |
| 4 | LS | 0-5" | gr/scl | Fr/SE/P | 2.5YR 6/2 @ 30" | 36" | N/A | None | US |
| | | 5-36" | SBK/C | VF/Mixed/US/VP | | | | | |
| | | | possible plty structure | | | | | | |
| | | | 24"+ | | | | | | |

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): Unsuitable
EVALUATED BY: W. R. Marlin LSS 4-30-01
OTHER(S) PRESENT: _____

FILE # 45979

COMMENTS 100% Repair not required

| LANDSCAPE POSITION | GROUP | TEXTURE | .1955 LTAR |
|---|---|---|---|
| R-RIDGE | I | S-SAND | 1.2-0.8 |
| S-SHOULDER SLOPE | | LS-LOAMY SAND | |
| L-LINEAR SLOPE | | | |
| FS-FOOT SLOPE | II | SL-SANDY LOAM | 0.8-0.6 |
| N-NOSE SLOPE | | L-LOAM | |
| H-HEAD SLOPE | | | |
| CC-CONCLAVE SLOPE | III | SI-SILT | 0.6-0.3 |
| CV-CONVEX SLOPE | | SICL-SILTY CLAY LOAM | |
| T-TERRACE | | CL-CLAY LOAM | |
| FP-FLOOD PLAIN | | SCL-SANDY CLAY LOAM | |
| | IV | SC-SANDY CLAY | 0.4-0.1 |
| | | SIC-SILTY CLAY | |
| | | O-ORGANIC | |

CONSISTENCE

| MOIST | WET |
|---|---|
| VFR-VERY FRIABLE | NS-NON-STICKY |
| FR-FRIABLE | SS-SLIGHTLYSTICKY |
| FI-FIRM | S-STICKY |
| VFI-VERY FIRM | VS-VERY STICKY |
| EFI-EXTREMELY FIRM | NP-NON-PLASTIC |
| | SP-SLIGHTLYSTICKY |
| | P-PLASTIC |
| | VP-VERY PLASTIC |

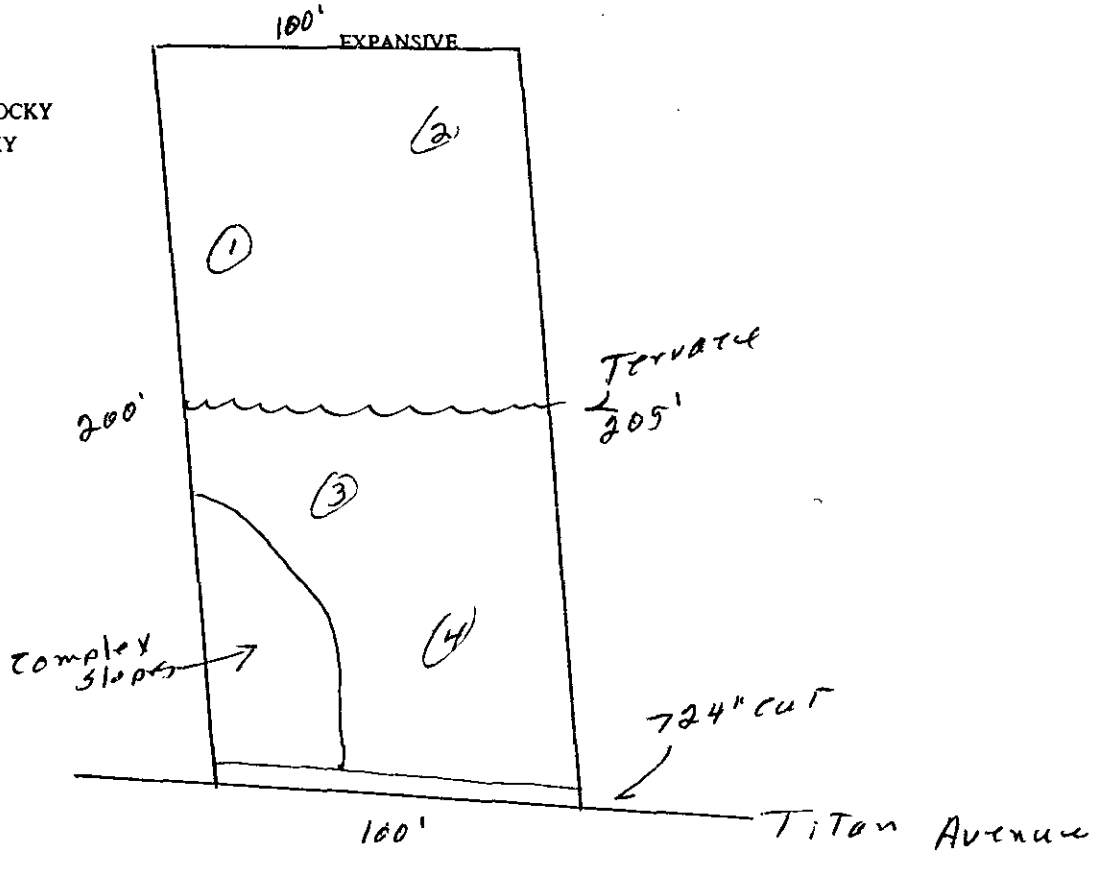
N

STRUCTURE

SG-SINGLE GRAIN
M-MASSIVE
CR-CRUMB
GR-GRANULAR
SBK-SUBANGULAR BLOCKY
ABK-ANGULAR BLOCKY
PL-PLATY
PR-PRISMATIC

MINERALOGY

SLIGHTLY EXPANSIVE
EXPANSIVE



# Mecklenburg County
## Health Department

May 15, 2001

Flossie Smith
C/o JoAnn Smith Howard
1412 Murdock Road, #B
Charlotte, NC 28205

Re: Application for improvement permit for Johnny Palaneo
Property Site: 12022 Titan Avenue
Health Department file no. 4597B

Dear Property Owner or Owner's Agent:

The Mecklenburg County Health Department, Environmental Health Division on April 30, 2001 evaluated the above-referenced property at the site designated on the plat/site plan that accompanied your improvement permit application. According to your application the site is to serve a 4-bedroom residence, with a design wastewater flow of ___480___gallons per day. The evaluation was done in accordance with the laws and rules governing wastewater systems in North Carolina General Statute 130A-333 and related statutes and Title 15A, Subchapter 18A, of the North Carolina Administrative Code, Rule .1900 and related rules.

Based on the criteria set out in Title 15A, Subchapter 18A, of the North Carolina Administrative Code, Rules .1940 through .1948, the evaluation indicated that the site is **UNSUITABLE for** a ground absorption sewage system. Therefore, your request for an improvement permit is **DENIED.** A copy of the site evaluation is enclosed. The site is unsuitable based on the following:

_____Unsuitable soil topography and/or landscape position (Rule .1940)
___X___Unsuitable soil characteristics (structure or clay mineralogy) (Rule .1941)
___X___Unsuitable soil wetness condition (Rule .1942)
___X___Unsuitable soil depth (Rule .1943)
_____Presence of restrictive horizon (Rule .1944)
___X___Insufficient space for septic system and repair area (Rule .1945)
_____Unsuitable for meeting required setbacks (Rule .1950)
_____Other (Rule .1946)

For the reasons set out above, the property is currently classified **UNSUITABLE,** and an improvement permit shall not be issued for this site in accordance with Rule .1948 (c).

However, the site classified as **UNSUITABLE** may be classified as **PROVISIONALLY SUITABLE** if written documentation is provided that meets the requirements of Rule .1948(d). A copy of this rule is enclosed. You may hire a consultant to assist you if you wish to try to develop a plan under which your site could be reclassified as **PROVISIONALLY SUITABLE.**

You have a right to an informal review of this decision. You may request an informal review by the soil scientist or environmental health supervisor at the local health department. You may also request an informal review by the N. C. Department of Environment and Natural Resources regional soil specialist. A request for informal review must be made in writing to the local health department.

You also have a right to a formal appeal of this decision. To pursue a formal appeal, you must file a petition for a contested case hearing with the Office of Administrative Hearings, 6714 Mail Center, Raleigh, NC 27699-6714. To get a copy of a petition form, you may write the Office of Administrative Hearings or call the office at (919) 733-0926. The petition for a contested case hearing must be filed in accordance with the provision of North Carolina General Statutes 130A-24 and 150B-23 and all other applicable provisions of Chapter 150B. N. C. General Statue 130A-335(g) provides that your hearing would be held in the county where your property is located.

Please note: If you wish to pursue a formal appeal, you must file the petition form with the Office of Administrative Hearings **WITHIN 30 DAYS OF THE DATE OF THIS LETTER.** The date of this letter is May 15, 2001. Meeting the 30-day deadline is critical to your right to a formal appeal. Beginning a formal appeal within 30 days will not interfere with any informal review that you might request. Do no wait for the outcome of any informal review if you wish to file a formal appeal.

If you file a petition for a contested case hearing with the Office of Administrative Hearings, you are required by law (N.C. General Statute 150B-23) to send a copy of your petition to the North Carolina Department of Environment and Natural Resources. Send the copy to: Office of General Counsel, N. C. Department of Environment and Natural Resources, 1601 Mail Service Center, Raleigh, NC. 27699-1601. Do **NOT** send the copy of the petition to your local health department. Sending a copy of your petition to the local health department will **NOT** satisfy the legal requirement in N.C. General Statute 150B-23 that you send a copy to the Office of General Counsel, NCDENR.

You may call or write the local health department if you need any additional information or assistance.

Sincerely,

Kelly Randall, R.S.
Authorized Agent - DENR

Encl: (2)

# Mecklenburg County
## Health Department

F/o Susie Smith
c/o JoAnn Smith Howard

May 2, 2001

Joan Flossie
1412 Murdock Road, #B
Charlotte, NC 28205

Re: Application for improvement permit for Johnny Polaneo
Property Site: 12022 Titan Avenue
Health Department file no. 4597B

Dear Property Owner or Owner's Agent:

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_____Other (Rule .1946)

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You may call or write the local health department if you need any additional information or assistance.

Sincerely,

Kelly Randall, R.S.
Authorized Agent - DENR

Encl: (2)

FEE: _____

DATE: _____

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

COPY

4/24 pick up 200-[illegible]
RF. BILL 1 1 CRT

TYPE APPLICATION: X 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 #: 43973

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 015-144-25

STREET ADDRESS: 12022 TITAN AVENUE

SUBDIVISION OR MOBILE HOME PARK NAME: NORMAN PARK

LOT NUMBER: 16 + 17 BLOCK D

TOWNSHIP (CHECK ONE):

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

CLOSING DATE 4-27-01

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: 2600

NUMBER OF BEDROOMS: 4 NUMBER OF OCCUPANTS: 2

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 ✓ 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:

NAME: Flossie Smith
(LAST) Flossie (FIRST) Joan (MI)

ADDRESS: 1412 Murdock RD #B

CITY: Charlotte STATE: NC ZIP: 28205

DAYTIME PHONE: Selwyn Fleming 968-3657

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: Polanco Johnny
(LAST) (FIRST) (MI)

DAYTIME PHONE: (704) 537-9650

AG

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: [signature]

DATE: 4-12-01

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

COPY

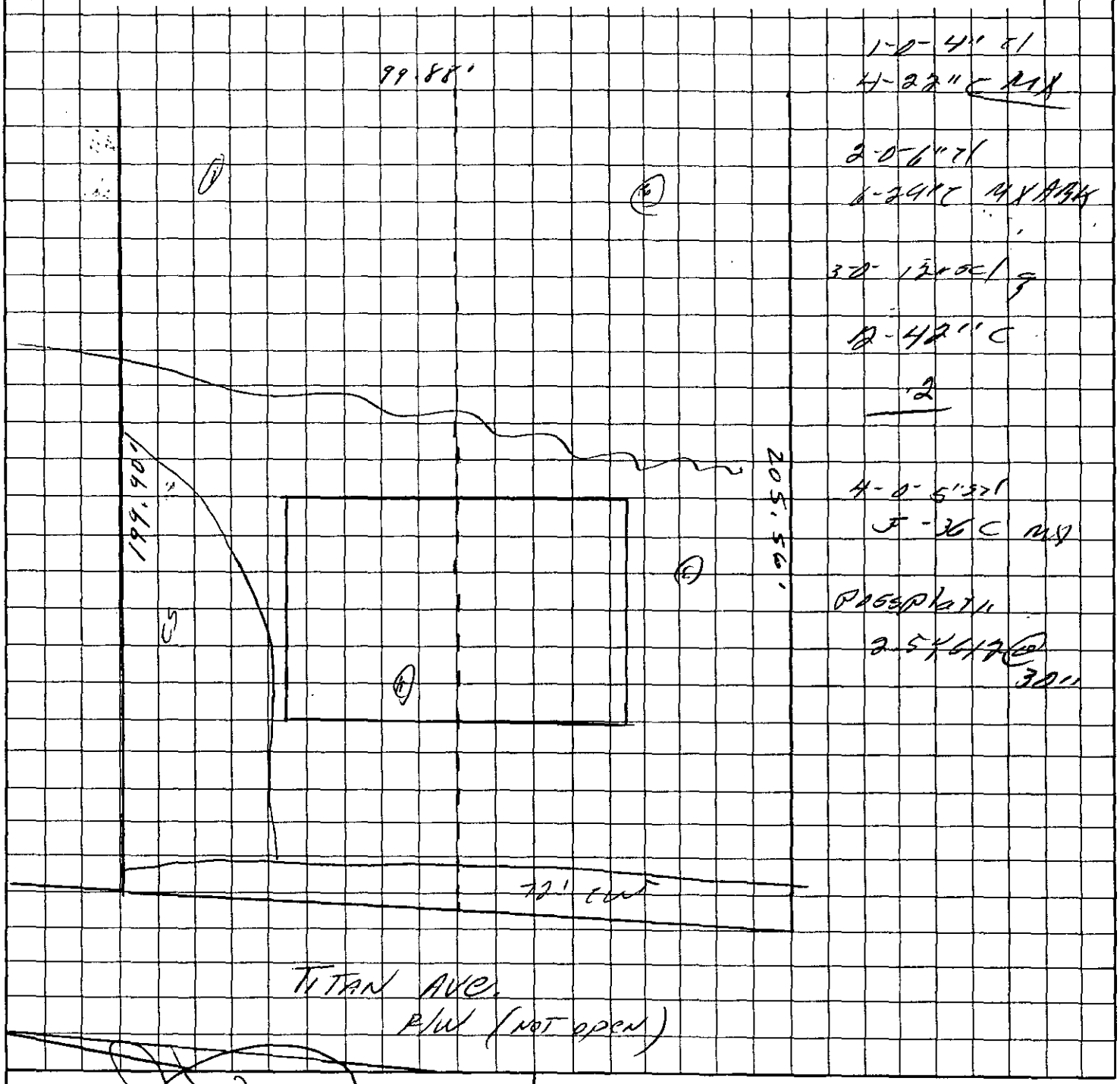
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: _____

TC: _____

6950

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.




OWNER/AGENT SIGNATURE

DATE

APPROVAL DATE _____

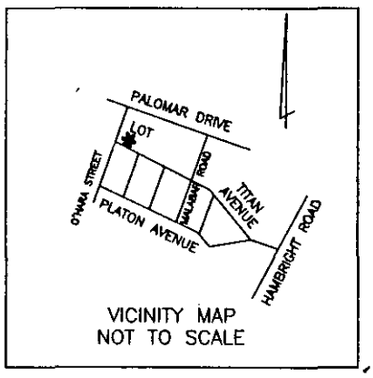
White - Health Department's Copy  Canary - E.H.S. Copy  Pink - Owner's Copy

THIS IS TO CERTIFY THAT ON THE 4TH DAY OF APRIL 20 01 AN ACTUAL SURVEY WAS MADE UNDER MY SUPERVISION OF THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE BOUNDARY LINES AND THE IMPROVEMENTS, IF ANY, ARE AS SHOWN HEREON. THIS PLAT MEETS THE MINIMUM STANDARDS OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA, BOARD RULE .1600 (21 NCAC 56) AND THE ERROR OF CLOSURE FOR THIS PARCEL DOES NOT EXCEED ONE (1) FOOT PER 10,000 FEET OF PERIMETER SURVEYED NOR 20 SECONDS TIMES THE SQUARE ROOT OF THE NUMBER OF ANGLES TURNED.

SIGNED Michael J. Lucas

R. B. PHARR & ASSOCIATES, REGISTERED SURVEYORS
19801 S. MAIN STREET
CORNELIUS, NC 28031
TEL: 704-895-1730
FAX: 704-895-1864
EMAIL: PHARRNORTH@PERIGEE.NET

| CREW | DRAWN | REVISED |
|---|---|---|
| BR | KM | |




VICINITY MAP
NOT TO SCALE

NORTH CAROLINA PROFESSIONAL SEAL L-3807 LAND SURVEYOR MICHAEL J. LUCAS

SURVEYING & MAPPING R.B. PHARR & ASSOCIATES, P.A.

REFERENCE MAP BOOK 10-321

E.I.P.
POWER POLE
S62°50'30"E 99.88' (TOTAL)
49.94
49.94
N.I.P.
S62°50'29"E
100.00'
POWER POLE
E.I.P.
(OFF SITE TIE)

LOT 21

LOT 17
AREA
9,991 sq.ft.
0.2294 acres

LOT 16
AREA
10,133 sq.ft.
0.2326 acres

LOT 15

LOT 20

POWER POLE

N22°15'00"E
198.90'

S22°19'25"W
202.73'

S22°22'42"W
205.56'

LOT 19

VACANT

VACANT

LEGEND
E.I.P. = EXISTING IRON PIN
N.I.P. = NEW IRON PIN
R/W = RIGHT OF WAY
SQ.FT. = SQUARE FOOT

LOT 18

TOTAL AREA
20,124 sq.ft.
0.4620 acres

E.I.P.
50.00'
(TOTAL) N59°35'17"W 100.00'
50.00
N.I.P.
S59°35'17"E
100.21'
E.I.P.
(OFF SITE TIE)

TITAN AVE.
60' DEDICATED PUBLIC R/W
NOT OPEN

SURVEY OF:
LOT 16 & 17, BLOCK D, NORMAN PARK
LONG CREEK TOWNSHIP, MECKLENBURG COUNTY
NORTH CAROLINA

PREPARED FOR JOHNNY POLANCO

SCALE 1" = 40'

MAP BOOK 10 PAGE 321

DEED BOOK PAGE

TAX NUMBER: 015-144-25

FLOOD CERTIFICATION
THIS IS TO CERTIFY THAT THE SUBJECT PROPERTY IS NOT LOCATED IN A SPECIAL FLOOD HAZARD AREA AS SHOWN ON MAPS PREPARED BY THE FEDERAL EMERGENCY MANAGEMENT AGENCY, FEDERAL INSURANCE ADMINISTRATION, DATED

53354

FEE: ~~$~~ 4

DATE: _____

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

4/24 paid 200-cash
RP BILL I JCRT

TYPE APPLICATION: X 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 #: 45973

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 015-144-25

STREET ADDRESS: 12022 TITAN Avenue

SUBDIVISION OR MOBILE HOME PARK NAME: NORMAN PARK

LOT NUMBER: 16 + 17 Block D

TYPE OF BUILDING (CHECK ONE):

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

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 2600

NUMBER OF BEDROOMS: 4 NUMBER OF OCCUPANTS: 2

CLOSING DATE 4-27-01

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 / 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:

NAME: Flossie Smith c/o Johnny Polanco
(LAST) Flossie (FIRST) Joan (MI) Smith

ADDRESS: 1412 Murdock Rd #B

CITY: Charlotte STATE: NC ZIP: 28205

DAYTIME PHONE: Selwyn - Fleming 968-3657

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: Polanco Johnny
(LAST) (FIRST) (MI)

DAYTIME PHONE: (704) 537 - 9650

AG

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: _____ DATE: 4-12-01

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

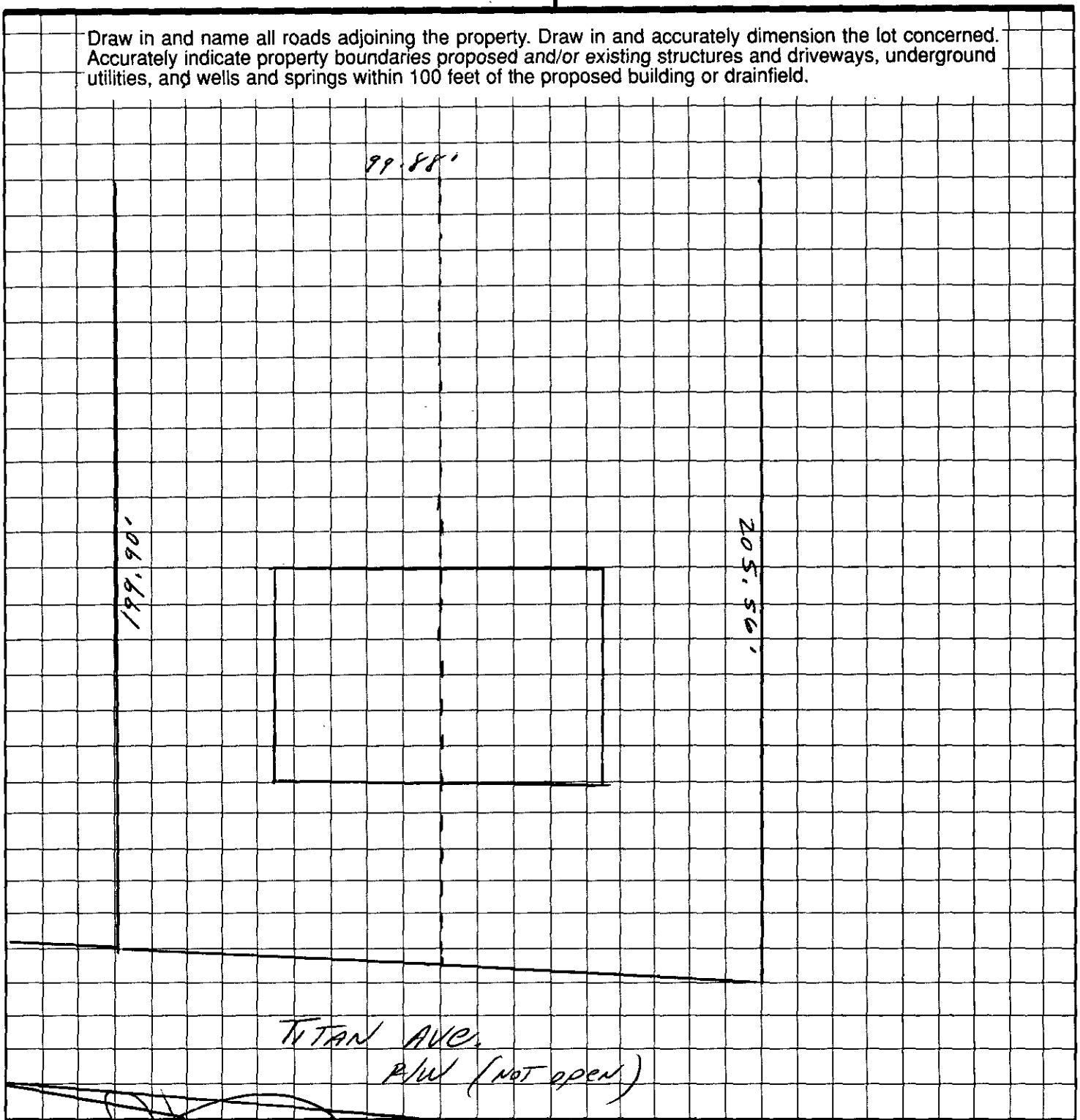
# PROPOSED PLOT PLAN

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

**FILE:** _____

**TC:** _____

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.




OWNER/AGENT SIGNATURE

DATE

APPROVAL DATE _____

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