


22940 TORRENCE CHAPEL RD

00155105

5/25/2007

duponbj

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

# MAINTENANCE INSPECTION STATEMENT

# MECKLENBURG COUNTY HEALTH DEPARTMENT

# *PAST DUE NOTICE*

**James R. & Annette M. Morton**
**22940 Torrence Chapel Road**
**Cornelius, NC 28031**

Please make check payable to:

Mecklenburg County Health Department
700 N. Tryon Street, Ste 211
Charlotte, NC 28202

***Note: THIS COMPLETED FORM MUST ACCOMPANY PAYMENT!***

**DESCRIPTION OF PROPERTY**

| Name | Site Address | Tax Parcel | File # | #Bedrooms | System Type |
|---|---|---|---|---|---|
| James R. & Annette M. Morton | 22940 Torrence Chapel Road | 001-551-05 | 4922A | 4 | IIIB |

**Total Amount Due: $85.00**

Please use the space below, to make any corrections to property information.

Name _____

Site Address _____

_____

# Bedrooms _____

All ready Paid
C- mud for Sewer
I water Look-up!

**BILL INFORMATION**

| Current Date | Billing Date | Payment Due Date |
|---|---|---|
| 9/2/99 | 7/20/99 | 8/23/99 |

***Direct Questions Concerning This Bill To ..... (704) 336-5102***

☐ *Please check if you have a well.*

***Make Check Payable To Mecklenburg County Health Department***
***Your Canceled Check Is Your Receipt***

***DO NOT SEND CASH***

# MAINTENANCE INSPECTION STATEMENT

# MECKLENBURG COUNTY HEALTH DEPARTMENT

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Name _____

Site Address _____

_____

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## BILL INFORMATION

| Billing Date | Payment Due Date |
|---|---|
| 7/20/99 | 8/23/99 |

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***DO NOT SEND CASH***

# Mecklenburg County
## Health Department

July 20, 1999

James R. and Annette M. Morgan
22940 Torrence Chapel Road
Cornelius, NC 28031

Dear Mr. and Mrs. Morgan:

This letter is being sent to all home/business owners in Mecklenburg County with septic tank systems that utilize pumps. In 1990 the North Carolina Administrative Code governing septic tank systems was amended to require routine maintenance and inspection of certain septic tank systems. Research conducted on septic tank systems has shown that properly maintained systems perform better and protect the home/business owner's investment. These State rule changes required local health departments to perform additional inspections without additional resources. During the 1998-99 budget hearings, the Mecklenburg County Board of County Commissioners (BOCC) approved user fees to offset costs and to allow the local health department to comply with mandatory enforcement requirements in the State regulations.

Since you have a pump system, these new rules and fee requirements affect you. The fee is $85.00 and is due upon receipt of this notice. We will visit your property and make assessments and recommendations for the continued efficient operation of your septic tank system. In addition, if you have a well, a bacterial sample will be collected to help assess the quality of your water supply source. The process, including fee assessment, will be repeated every five (5) years. The fee amount may change in the future.

We are excited about the interest and support demonstrated by the BOCC. Past performance in this area was more enforcement oriented rather than supportive. One of our goals is to establish our department as a resource to you to aid and assist you with this and related public health concerns. The inspection program and the water analysis are important to the health of you and your family. This is a very important initiative intended to protect the public's health while improving and preserving our groundwater resources.

Your prompt fee payment will activate our inspection process. Your comments and questions regarding this matter are encouraged and welcomed.

Sincerely,

Larry B. Thompson, Jr., R.S.

Larry B. Thompson, Jr., R.S., Coordinator
Managed Systems Program
Individual Water and Wastewater Systems

Enclosure

cc: Fiscal Services Manager, HMHCS

# Mecklenburg County
## Health Department

11/30/90

File 4922A
TC 001-161-01

TO: Mr. James R. Morton
From: Tim Whittaker - Mecklenburg County Health Department, Environmental Health Division.

This directive regards the property located at 22940 Torrence Chapel Rd. and the reasons for an Environmental Health hold placed at this residence.

An Environmental Health hold is in effect at the above location and will remain in effect until the following actions are taken. 1) Removal of paved driveway over T&J panel septic system 2) an EH Specialist will be present to evaluate and assess any damages to subsurface sewage disposal system 3) original designer and installer of T&J panel system will recharge system to establish equal effluent flow rate through entire septic system. 4) If any damage has occurred damage must be corrected before any release is made.

12/4/90 T.W. 12/4/90

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

T & J

# CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 4922A DATE: 10/3/90

TC: 021 161 01 ☒ L ☐ CRT

SERIAL № 13605

Name of Owner JAMES R. MORTON Juris.:

Address of Property 22940 TORRENCE CHAPEL Rd.

**Inspection Data:**

Tank Material PCC

Total Length of Drainfield 272'

Number of Lines 4 @ 68'

Cover Depth 4'-6"

Water Supply Source P/WELL

Distance to Water Source >50

Excavation Inspected Y

Tank(s) Inspected Y, Y

Wash Line Inspected —

High Water Alarm Inspected installed

PLOT

Design: 1500 ST, 1000 PT, Pi, mod. T&J 544 SFT, 24" SAND CTR# 74
CECIL like

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: T&J panel installed according to plan. Raked & limed walls. Owner warned about driving over system. - (4) 2'x68'x24" Sand.

Tim Whitaker, R.S.
Environmentalist

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

# INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

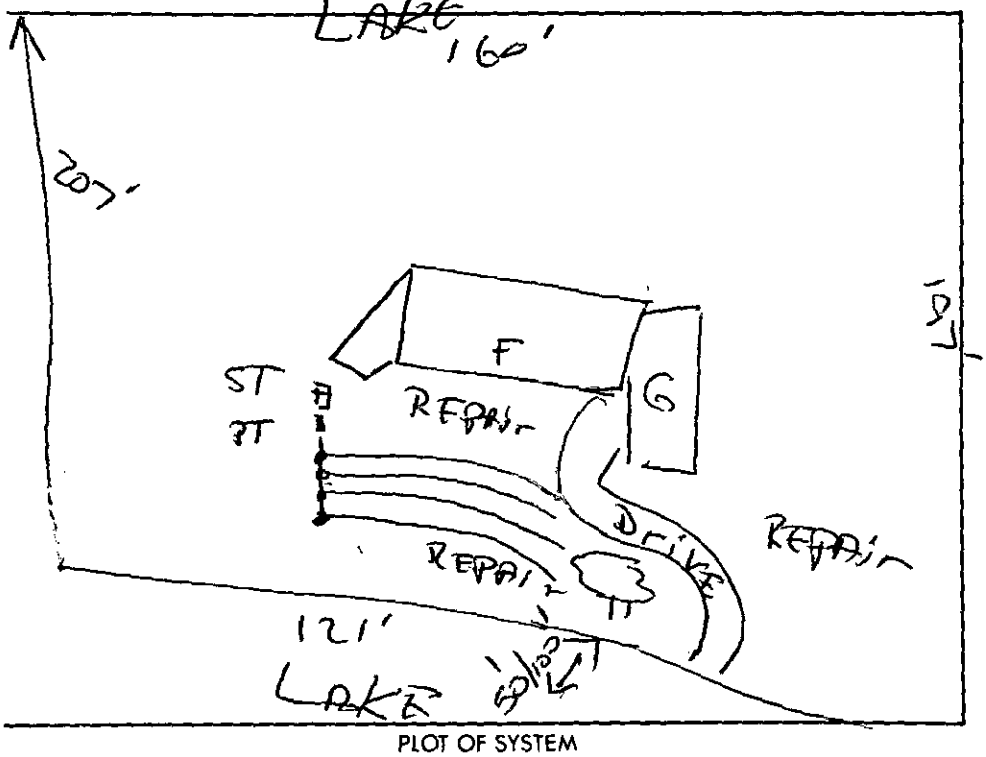
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 4922-A DATE: 9/27/90

TC: 001 16 01 PD

SERIAL Nº 14829

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 11/16/89. All work shall be completed on or before 10/27/90, 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.




PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1,500 gallons

Liquid Capacity of Dosing Tank 1,000 gallons

Tank Construction PGC

Absorption and/or Nitrification Lines:

Trench Width 2' feet

Total Line Length 272' feet

Number of Lines 4 68'

Depth of ~~Stone~~ Sand 24" inches

Distance from House 10 feet

Distance from Property Line 10 feet

Distance from Well >50 feet

NAME OF OWNER James B. Morton

LOCATION OF PROPERTY 22940 Torrence Chapel Rd.

Comments: T&J panel install according to plans submitted (4) 2'x 68'x 24" sand, rake & lime walls.

Division or Section Head

Tim Whittenburg, R.S.
Environmentalist

* 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

PRESENTED FOR REGISTRATION

90 JUN -1 AM 10: 16

ANNIE A. POWERS
REGISTER OF DEEDS
MECKLENBURG CO., N.C.

FILE NO. 4922A

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

ACKNOWLEDGEMENT OF REQUEST BY OWNER FOR RECLASSIFICATION OF SITE FROM "UNSUITABLE" TO "PROVISIONALLY SUITABLE" UNDER 10 NCAC 10A .1948(c)

The undersigned, JAMES R. MORTON

owner of property located at 22940 TORENCE CHAPEL RD. CORNELIUS, NC.,

("the site") and described in an instrument recorded in Book 5989 at Page 681, Mecklenburg Public Registry, hereby acknowledges that he applied to the Mecklenburg County Department of Environmental Health ("the Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 10 NCAC 10A .1934 et seq; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested pursuant to 10 NCAC 10A .1948(c) that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data and other information which indicate to the Department that the septic tank system proposed by the undersigned can reasonably be expected to function satisfactorily and thus that the findings specified in 10 NCAC 10A .1948(c)(1), (2), and (3) can be made; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is his responsibility and that neither the Department nor its officials, employees or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

The undersigned further agrees for his heirs and assigns that, in the event any septic tank system installed under authority of the aforesaid permit fails to perform adequately in any respect, he will take whatever measures are required to correct same; or if such is impossible he will discontinue use of said system immediately.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

This 1st day of June, ~~19~~ 1990.

James R. Morton (SEAL)

(SEAL)

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, Marlene Wise, a Notary Public for said County and State, do hereby certify that James R. Morton personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 1st day of June, 1990.

Marlene Wise
Notary Public

My Commission Expires: 3-15-93

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, _____, a Notary Public for said County and State, do hereby certify that _____ personally came before me this day and acknowledged that he is _____ of _____, and that by authority duly given and as the act and deed of said corporation, the foregoing instrument was signed in its name by its _____, sealed with its corporate seal and attested by _____.

WITNESS my hand and notarial seal, this _____ day of _____, 198__.

_____
Notary Public

My Commission Expires: _____

5/31/90 TO: Gene Vaughn please release for permitting.

*CHARLOTTE-MECKLENBURG BUILDING STANDARDS*
*ONE/TWO FAMILY PERMIT*

**ADDR** ADDR: 22940 TORRENCE CHAPEL RD MECK JOB: 0001 PERMIT: B0024197
PARCEL: 00155105 DATE: 04/02/90 JOB: NEW RESIDENCE MASTER: B0024197
PROJECT: PHASE: SEC: PROJECT:
OWNER: MORTON, J. R. ADDR: 20318 MORMAN COLONY
CITY/ST: DAVIDSON NC 28036 PHONE: 704-892-5600

**SITE** LOT/BLK: / ZONING: R-2/CORN JURIS: MAP#: HOUSING: NO
ST R/W: PUBLIC: NO CENSUS: 6200 O&D ZONE: FIRE DIST: NO
SPECIAL: FLD PLN: NO FLD ELEV:
#UNITS: WATER: SEWER:
LAND AREA: 24000 LOT: FRT ST:
MIN SETBACKS FRONT: 40 LEFT: 10 RIGHT: 10 REAR: 35 REQ PARKING:

**PROJ** USDC: 101 OCC TYPE: R FEE CODE: CONSTR TYPE: 6 #H/C UNITS:
HTD AREA: 4000 UNHTD AREA: 1200 DECK: 700 #STORIES: 1 BASEMENT: NO
#ROOMS: 10 #BEDROOMS: 3 #BATHS: 4 SPKLR SYS: NO #UNITS: 1
ATT CARPORT: NO ATT GARAGE: YES MASONRY FR: YES PROJ COST:
MBL HOME YR/MAKE: SERIAL#:

**ELEC** TOTAL AMPS: 440 #CIRCUITS: 24 UTILITY CO: DUKE CHARLOTTE
#CONNECTIONS 120 V: 114 > 120 V: 7 TYPE OF WORK: NEW ELECTRICAL SE

**MECH** #GAS CONNECTIONS: 2 #APPLIANCES: 3 UTILITY CO: PIEDMONT NATL GAS
TYPE OF WORK: HEATING WITH A/C
HEATING/COOLING: GAS PACK

**PLBG** #FIXTURES: 14 #APPLIANCES: 5 WORK:

**CONT** BLDG: JRM DEVELOPMENT INC LIC: B 0000020744 L B PERMIT: B0024197
ADDR: P O BOX 470701 CITY/ST: CHARLOTTE NC 28266
PHONE#: 704-365-4246
ELEC: HEGMANN ELECTRIC LIC: E 0000008289 S SF PERMIT: E0024198
ADDR: 201 RAMPART ST CITY/ST: CHARLOTTE NC 28203
PHONE#: 704-335-8872
MECH: MILLER REFRIG & A/C CO PERMIT: M0024199
ADDR: 1400 INDUSTRIAL DR CITY/ST: MATTHEWS, N. C. 28105
LIC: M 0000007077 I H3 M 0008901681 3 A
PHONE#: 704-847-6805
PLBG: HOKE CONST CO- JOHN LIC: P 0000009164 1 PERMIT: P0024200
ADDR: P O BOX 789 CITY/ST: CORNELIUS NC 28031
PHONE#: 704-892-5039
ARCH/ENG: LIC: PHONE#:
ADDR: CITY/ST:

**COST** BLDG: 148800 ELEC: 3100 MECH: 6400 PLBG: 7700 TOTAL: 166000
PLANS: NO INSP READY:
REMARKS: 1/2 STORY

VALIDATION DATE: 04/02/90 BY: KY CHARGE ACCT# B48640 DOUBLE FEE: NO
FIRE DMG FEE: FSTRK FEE: ADJUSTMENT: TOTAL FEE: 831.00

*THIS PERMIT WILL EXPIRE IF WORK EITHER HAS NOT STARTED WITHIN 6 MONTHS OR IS DISCONTINUED FOR A PERIOD OF 12 MONTHS. NO REFUNDS WILL BE GIVEN AFTER EXPIRATION.*

*P O BOX 31097 700 N TRYON ST CHARLOTTE, NC 28231-1097 704-336-3831*

# APPLICATION FOR BUILDING PERMIT

TYPE PERMIT ☒ Single Family ☐ Two Family ☐ Commercial ☐ Mobile Home ☒ Modular

**ADDRESS**

STREET # (N,S,E,W) | STREET NAME | (AV,RD,ST, etc)

22940 | Torrence Chapel Road

SUITE/UNIT(S):

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

**SITE DATA**

PROJECT/SUBDIVISION NAME: Knox Landing | PHASE | SECTION 1d

OWNER: J.R. Morton | ADDRESS: 20318 Norman Colony

CITY: Davidson | STATE: NC | ZIP: 28036 | PHONE #: 704-892-5600

TAX PARCEL NO.:

CENSUS:

LOT #: 2 | BLOCK #: | LAND AREA (SQ.FT.): 24,000

SPECIAL CONDITIONS:

LOT: ☐ CORNER ☐ TRIANGULAR

MINIMUM SETBACKS: F.R.O.

**PROJECT**

JOB:

SUBDIVISION:

PURPOSE:

USE:

OWNER:

TYPE WORK: ☐ New ☐ Addition ☐ Accessory ☒ Upfit ☐ Shell ☐ Demolish ☐ Other

PROJECT DESCRIPTION (Residence, Office, etc.)
Mobile Home: Include Yr./Make & Serial #: Residence

AREA (Sq. Ft.) Heated: 4,000 | Unheated: 1200 | Deck(s): 700 | # STORIES: | BASEMENT: ☐ Yes

ONE/TWO FAMILY, MODULAR, OR MOBILE HOME: TOTAL # ROOMS: 10 | # BEDROOMS: 3 | # BATHS: 4

Work Includes: ☒ Attached Carport ☐ Attached Garage ☒ Masonry Fireplace(s)

SPRINKLERS: ☐ Yes | # UNITS | MULTI-FAMILY: # HANDICAP UNITS

**SERVICES**

ELECTRICAL: Power Company: Duke | Service: ☒ New ☐ Existing | Total Amps: 440 | # Circuits: 24

# Connections 120 Volts: 31 | # Connections over 120 Volts: 7

MECHANICAL: Gas Company: Piedmont | # Gas Conn: 2 | # Appliances: 5 | ☐ Heat Only ☐ Central A/C Only ☒ Heat and A/C

☐ 1-Heat Pump ☒ 2-Central A/C ☐ 3-Elect. Baseboard ☐ 4-Elect. Furnace ☐ 5-Elect. Ceiling ☒ 6-Gas/Oil Furnace
☐ 7-Gas/Oil Steam ☒ 8-Gas Pack ☐ 9-Pre-Fab Fireplace ☒ 10-Chimney 2 ☐ 11-Stove

PLUMBING: # of Fixtures (Sink, Water Closet, etc...): 14 | # of Appliances (Dishwasher, Water Heater, etc.): 5

UTILITIES: ☒ New ☐ Existing

| | | | | | | |
|---|---|---|---|---|---|---|
| Public | 1-Individual Meter/Connection | ☐ Water | ☐ Sewer | Private | 3-Individual | ☒ Well | ☒ Septic |
| | 2-Master Meter/Connection | ☐ Water | ☐ Sewer | | 4-Community | ☐ Well | ☐ Septic |

**CONTRACTORS**

CONTRACTOR(S): (Name/Address as appears on license)

| | | | | | | CONTRACT COST Nearest $100 | APP'D |
|---|---|---|---|---|---|---|---|
| ACCT # | | | | | | | FEES $ |
| Bldg. | JRM Development | Phone 365-4246 | Lic # 20744 | | | Bldg. $148,800 | |
| Add | PO Box 470701 | City/St Charlotte | NC | Zip 28226 | | | |
| Elect. | Hegmann Electric | Phone 335-8872 | Lic # 82898SPSFD | | | Elect. $ 3100.- | |
| Add | 6657 Lynnfield Dr. | City/St Charlotte, | NC | Zip 28212 | | | |
| Mech. | Miller R&S. | Phone 847-6805 | Lic # 7077H-3-I | | | Mech. $ 6400.- | |
| Add | 1400 Industrial Dr. | City/St Matthews, | NC | Zip 28105 | | | |
| Plbg. | John Hoke | Phone 892-1524 | Lic # 9164 P | | | Plbg. $ 7100.- | |
| Add | PO Box 789 | City/St Davidson, | NC | Zip 28036 | | | |
| PLANS ☐ | Arch./Eng. | Phone | Lic # | | | Total Const. Cost $ 166,000 | |
| | Add | City/St | | Zip | | | |

**OTHER**

FT ☐ TOTAL ESTIMATED PROJECT COST FOR FAST TRACK OR MODULAR $

REMARKS:

THE UNDERSIGNED HEREBY CERTIFIES THAT HE/SHE IS EITHER THE OWNER OR THE AUTHORIZED AGENT OF THE OWNER AND HEREBY MAKES APPLICATION FOR PERMIT AND INSPECTION OF WORK DESCRIBED AND AGREES TO COMPLY WITH ALL APPLICABLE LAWS REGULATING THE WORK.

Rick McCorkle 4/2/90 | RICK McCORKIE | METHOD OF PAYMENT ☐ CASH/CHECK ☒ ACCOUNT 4/2

APPLICANT'S SIGNATURE | DATE | PRINT APPLICANT'S NAME

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

| FOLDER | PROCESSED BY | REVIEWED BY | VALIDATED BY |
|---|---|---|---|
| | | | |

B-82 15M 3/89

APPLICANT

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

**LOCATION**

STREET # (N,S,E,W) 22940 STREET NAME TORRENCE CHAPEL RD. (AV,RD,ST, etc)

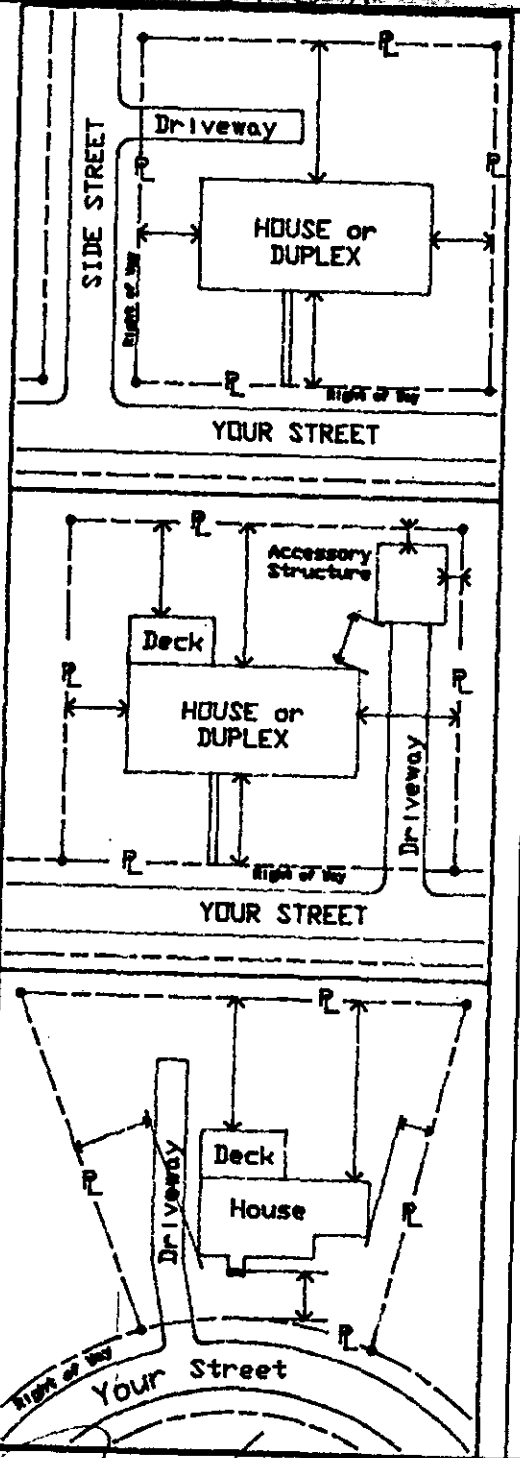
SUITE/UNIT(S):

**PERMIT #** B24197

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

TAX PARCEL # 001-551-05 JOB #

**EXAMPLES/PLOT PLAN**

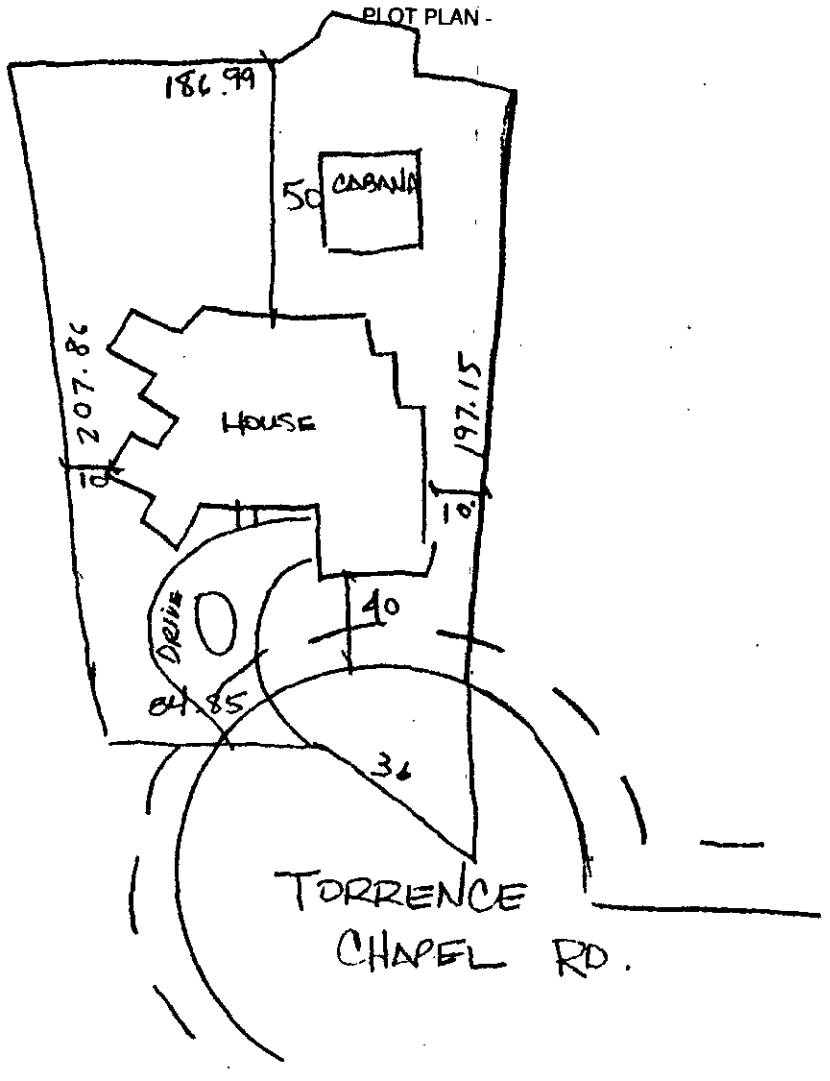



- INSTRUCTIONS -

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

Rick McCorkie 4-2-90 Rick McCorkie

APPLICANT'S SIGNATURE DATE PRINT APPLICANT'S NAME

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

APPROVED BY

B-83 7M 3/89

**PERMIT**

**TOWN OF CORNELIUS** 8874

CORNELIUS, N.C. 28031

3-29 19 90

Received From James A Morton DS

Sewer & 50/100 Dollars $ 7.50

For Permit

AMOUNT OF ACCOUNT $ _____

AMOUNT PAID..... $ 7.50

BALANCE DUE..... $ _____

Thank You

TOWN OF CORNELIUS

By Margie Caldwell

BRADY PRINTING CO., STATESVILLE, N.C.

PERMIT: B0024197
MASTER: B0024197

BY
704-892-5600

HOUSING: NO

ST R/W: PUBLIC: NO CENSUS: 6200 O&D ZONE: FIRE DIST: NO
SPECIAL: FLD PLN: NO FLD ELEV:
#UNITS: WATER: SEWER:
LAND AREA: 24000 LOT: FRT ST:
MIN SETBACKS FRONT: 40 LEFT: 10 RIGHT: 10 REAR: 35 REQ PARKING:

PROJ USDC: 101 OCC TYPE: R FEE CODE: CONSTR TYPE: 6 #H/C UNITS:
HTD AREA: 4000 UNHTD AREA: 1200 DECK: 700 #STORIES: 1 BASEMENT: NO
#ROOMS: 10 #BEDROOMS: 3 #BATHS: 4 SPKLR SYS: NO #UNITS: 1
ATT CARPORT: NO ATT GARAGE: YES MASONRY FR: YES PROJ COST:
MBL HOME YR/MAKE: SERIAL#:

ELEC TOTAL AMPS: 440 #CIRCUITS: 24 UTILITY CO: DUKE CHARLOTTE
#CONNECTIONS 120 V: 114 > 120 V: 7 TYPE OF WORK: NEW ELECTRICAL SE

MECH #GAS CONNECTIONS: 2 #APPLIANCES: 3 UTILITY CO: PIEDMONT NATL GAS
TYPE OF WORK: HEATING WITH A/C
HEATING/COOLING: GAS PACK

PLBG #FIXTURES: 14 #APPLIANCES: 5 WORK:

CONT BLDG: JRM DEVELOPMENT INC LIC: B 0000020744 L B PERMIT: B0024197
ADDR: P O BOX 470701 CITY/ST: CHARLOTTE NC 28266
PHONE#: 704-365-4246

ELEC: HEGMANN ELECTRIC LIC: E 0000008289 S SF PERMIT: E0024198
ADDR: 201 RAMPART ST CITY/ST: CHARLOTTE NC 28203
PHONE#: 704-335-8872

MECH: MILLER REFRIG & A/C CO PERMIT: M0024199
ADDR: 1400 INDUSTRIAL DR CITY/ST: MATTHEWS, N. C. 28105
LIC: M 0000007077 I H3 M 0008901681 3 A
PHONE#: 704-847-6805

PLBG: HOKE CONST CO- JOHN LIC: P 0000009164 1 PERMIT: P0024200
ADDR: P O BOX 789 CITY/ST: CORNELIUS NC 28031
PHONE#: 704-892-5039

ARCH/ENG: LIC: PHONE#:
ADDR: CITY/ST:

COST BLDG: 148800 ELEC: 3100 MECH: 6400 PLBG: 7700 TOTAL: 166000
PLANS: NO INSP READY:
REMARKS: 1/2 STORY

VALIDATION DATE: 04/02/90 BY: KY CHARGE ACCT# B48640 DOUBLE FEE: NO
FIRE DMG FEE: FSTRK FEE: ADJUSTMENT: TOTAL FEE: 831.00

*THIS PERMIT WILL EXPIRE IF WORK EITHER HAS NOT STARTED WITHIN 6 MONTHS OR IS DISCONTINUED FOR A PERIOD OF 12 MONTHS. NO REFUNDS WILL BE GIVEN AFTER EXPIRATION.*

# Mecklenburg County
# Health Department

May 31, 1990

James R. Morton
20318 Norman Colony Rd.
Davidson, NC 28036

RE: Property located at 22940 Torrence Chapel Rd.
FILE: 4922A
PARCEL: 001-161-01-po

Gentlemen:

Receipt of your plans for a modified waste disposal system for the property referenced above is acknowledged.

Your plans for the modified system for the above property as submitted are approved with the following comments:

- The well should be located 100 feet or no less than 50 feet away from any part of the sewage disposal system and repair area.
- Water saving plumbing devices and low flush toilets should be installed when constructing the residence.
- Occupants to utilize maximum water conservation measures wherever possible.
- Effectively rake and lime all trench sidewalls
- Landscaping of repair area to be undisturbed. No grading, shaping, or altering in anyway.

Upon execution and recording with the Register of Deeds Office, Mecklenburg County, of the enclosed "Septic Tank Agreement Form", an Improvements Permit may be issued by this office.

Sincerely,

Gene Vaughan, R.S., Supervisor
On Premises Waste Disposal & Water Supply

GV/kat

Enclosures - 3 Septic Tank Agreement Forms

# T.R. MORTON

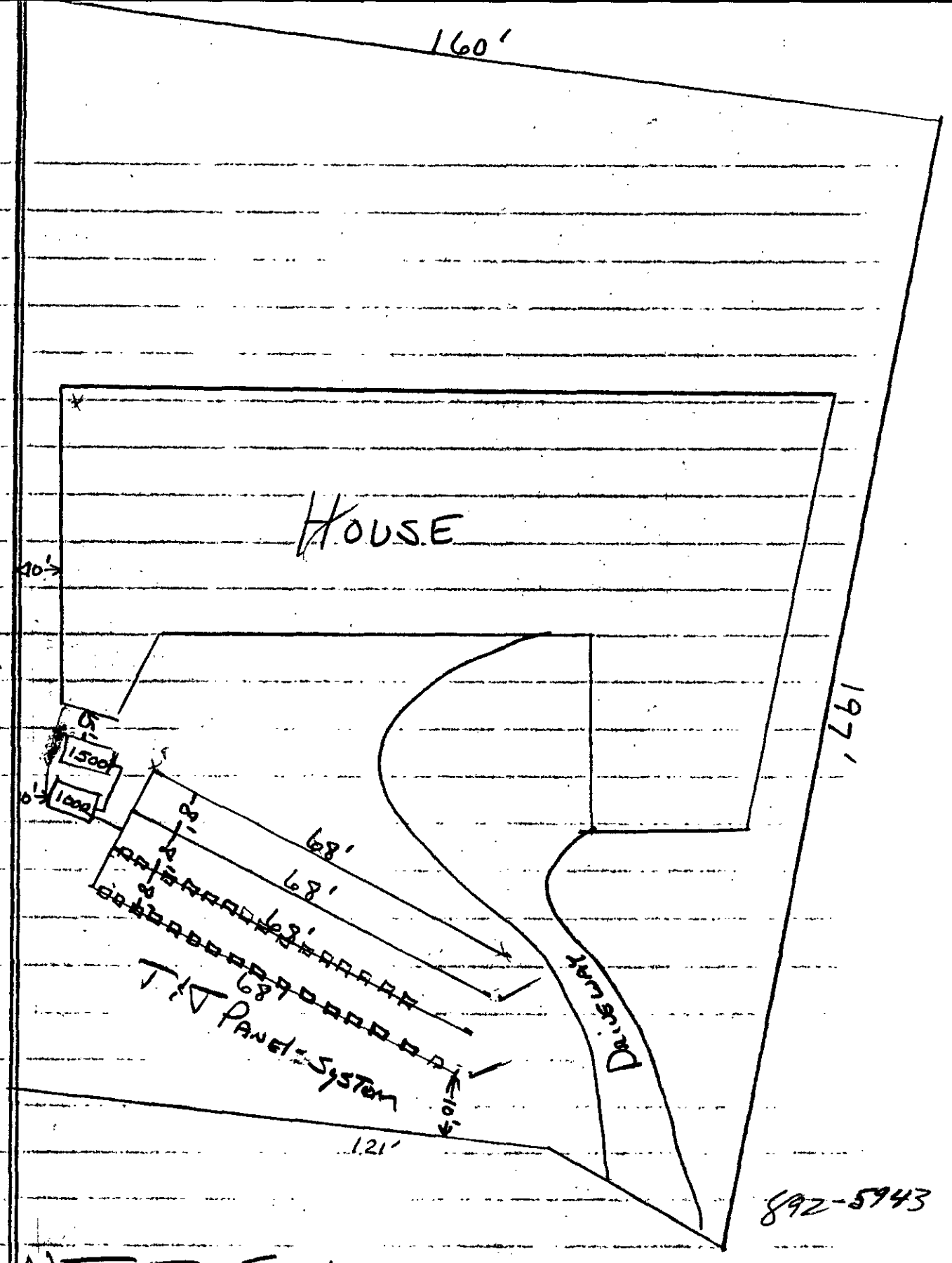
NOTE Confusion in Calculation of Flow of System from 2 Holes/panel to 1 Modified Friction Head and System Flow V Angle

| | |
|---|---|
| Daily Design Waste Flow | 480 gpd |
| Septic Tank Size | 1500 gal |
| Pumping Tank | 1000 gal |
| Tot Linear Ft and Dia of Laterals 508+533 = 266 | 272 ft of 1¼" Pve and T&J 16" Panels |
| Total Lin Ft and dia of Supply manifold | 50 ft of 2" Pve |
| No. & Length of Laterals | (4) 1¼" dia., 68' Long 16 panels / lateral |
| Total # of Panels (16") | 64 ~~65~~ 60 |
| Hole Size | 5/32" |
| Hole Spacing | 2 holes per panel |
| Total Number of holes | ~~120~~ 120 |
| Flow Rate Through The System | ~~50.59~~ 52.48 @ 2/hole 1 Hole 26.24 gpm |
| Elevation Head | 9' |
| Pressure Head | 2' |
| Friction Head (How Calculated) | ~~9.55~~ 9' (.80) (1.1 × .75 (.5) = .28 (.55 (.28) / 12 = .55) (1.2 × .66 (1.2) = .79 ≈ .8) (.99) 12 = 2.88) |
| Total Head | ~~20.55~~ 11.80 or (12) |
| Pump Requirements | ~~50.59~~ 52.48 26.24 gpm @ ~~20.55~~ 12 |
| | USE Goulds ½ hp pump |
| Dosing Volume | ~~130~~ 218 gallons |
| Depth of water pumped Per Dose | 10" |

Note: Should be installed per the following: V Angle 5-30-90

① Pump Requirement 26.24 gpm ② 12 FT TDH

② 64 panels 4 lines @ 16 panels per line




Not To Scale

T.R Morton

2294 Torrance Chapel Lot #2

File # 4922-A

Approval of the
System Denied
for 4 BR Cond

# DESIGN SPECIFICATIONS

| | | |
|---|---|---|
| Daily waste flow | 480 | gal. |
| Septic tank size | 1500 | gal. |
| Pumping tank size | 1500 | gal. 1000 |
| Effluent loading rate | .16 | gal/ft²/day |
| Absorption area | 1800 SQ | ft. 3000 |
| Total length of laterals | 272 | ft. |
| Lateral diameter | 1¼ | in. |
| Lateral configuration | 4 LINES 68' | No. and length of lines |
| Supply line length | 52 | ft. |
| Supply line diameter | 2 | in. |
| Manifold placement | | |
| Hole size* | 5/32 | in. |
| Hole spacing (1 hole per Panel) | 4 | ft. |
| Number of holes | 64 | |
| Flow per hole | .41 ✓ | gpm |
| Total flow | 28.2 | gpm |
| Elevation head | 8 | ft. Clarification |
| Friction head | 11.3 | ft. |
| Pressure head | 7 | ft. |
| Total head | 21.3 | ft. 21.3 X 1.20% |
| Pump requirements (28.2 X 1.20%) | 33.8 | gpm @ 25.6 ft. of head |
| Storage volume in laterals | 17.40 | gal. |
| Storage volume in supply line | 8.42 | gal. |
| Total storage volume | 25.82 | gal. |
| Dosing volume | 250 | gal. |
| Dosing depth | 10 | in. |
| Check valve needed ? | YES | |



* Note: Data on hole size, spacing, pressure head and flow must be listed for each line for systems where lines are different (such as sloping lots).

Effluent Loading Rate for LPP Systems (.16) unless otherwise specified by this department.

J.R. Morton

Torrence Chapel Rd

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 1/24/89

Name/Company Ellerman Assoc

Sanitation ____

Vector Control ____

O.P.W.D. ✓

Service: Imp Land
#4922A, 4923A

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

JAN 24 1989

Fee: 300

D Leonhardt
Completed by

Collected by

# 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: 4922A

TC: 001-161-01 PO

SERIAL: № 17537

☐ L ☒ CRT

**JOB LOCATION**

① ADDRESS: 22940 Torrence Chapel Rd (STREET NO. / STREET) ② FILE:

③ JURISDICTION: ④ TAX PARCEL NO.:

⑤ SUBDIVISION: ⑥ LOT: #2 ⑦ BLOCK:

**OWNER**

⑧ NAME: JAMES (FIRST) R. (MIDDLE) MORTON (LAST)

⑨ MAILING ADDRESS: 20318 Norman Colony Rd

⑩ CITY: Davidson ⑪ STATE: NC ⑫ ZIP: 28036

⑬ PHONE: (WORK) 892-5165 ⑭ (HOME) 892-5600

**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? 4

㉕ Type?

㉓ Maximum occupancy? 3

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: James R Morton

Date: 1-16-89

## 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 36 months from the date of issuance.

Environmentalist / Date

Director or Authorized Section Head / Date 1-19-90

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

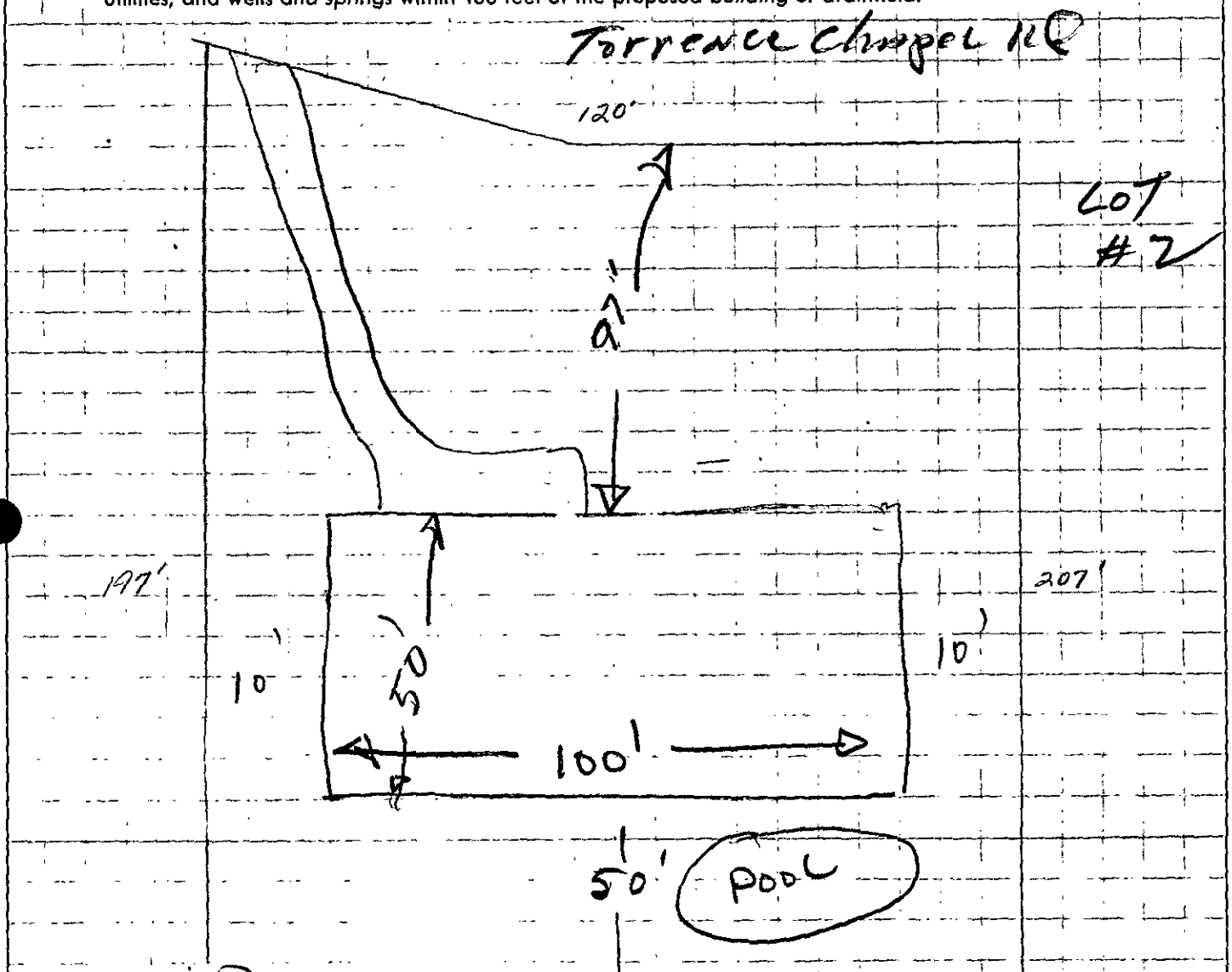
# PROPOSED PLOT PLAN

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

FILE: 49229

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.




Signed: James R Smith

Date: 1-16-89

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

DATE 1/11/89

FROM: COUNTY ENGINEERING DEPARTMENT

EHD FILE _____ JURISDICTION CODE Corn

PARCEL NUMBER 001-161-0100

ASSIGNED ADDRESS 22940 Torrence Chapel Rd

EXISTING ADDRESS Lot 2

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: Septic Tank - SF House (Knox Landing)

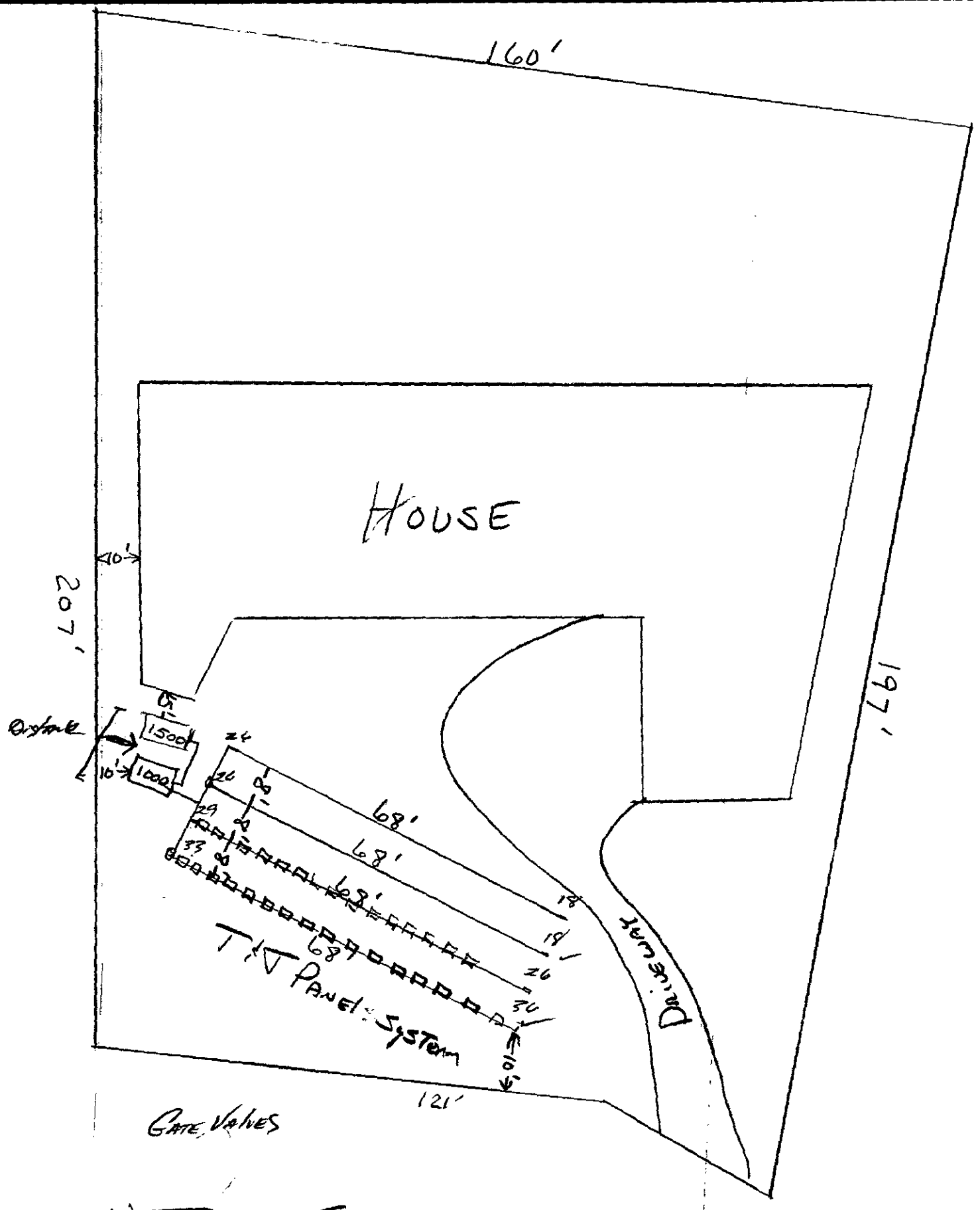
NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIER'S OFFICE AT BUILDING STANDARDS WHEN PAYING PERMIT FEES.
A CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL THE TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

SIGNED: _____

OPWEAR 06-88

NEW ADDRESS / /*

FORM 100




NOT TO SCALE

J.R MORTON

# Mecklenburg County
## Health Department

Basil G. Deltas, M.D., M.P.H.
Health Director


September 9th, 1988

H. Edward Knox
22821 Torrence Chapel Road
Davidson, NC 28036

RE: Property located at Torrence Chapel Road 2
FILE: 4922A
PARCEL: 00116101 PO

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 property was found to contain a limited area of soils which were classified as provisionally suitable for such an installation. A copy of the Site Evaluation Report (Serial Number 15588) is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, 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. The plan will be reviewed and if it is found that the area of provisionally suitable soils is adequate for the proposed construction, an Improvement Permit will be issued by this Department.

If I may be of assistance, please do not hesitate to contact me.

Very truly yours,

Sylvia D. Daniel, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure


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

**MECKLENBURG COUNTY ENVIRONMENTAL HEALTH**
**SITE EVALUATION REPORT**
**SERIAL NUMBER** 15588

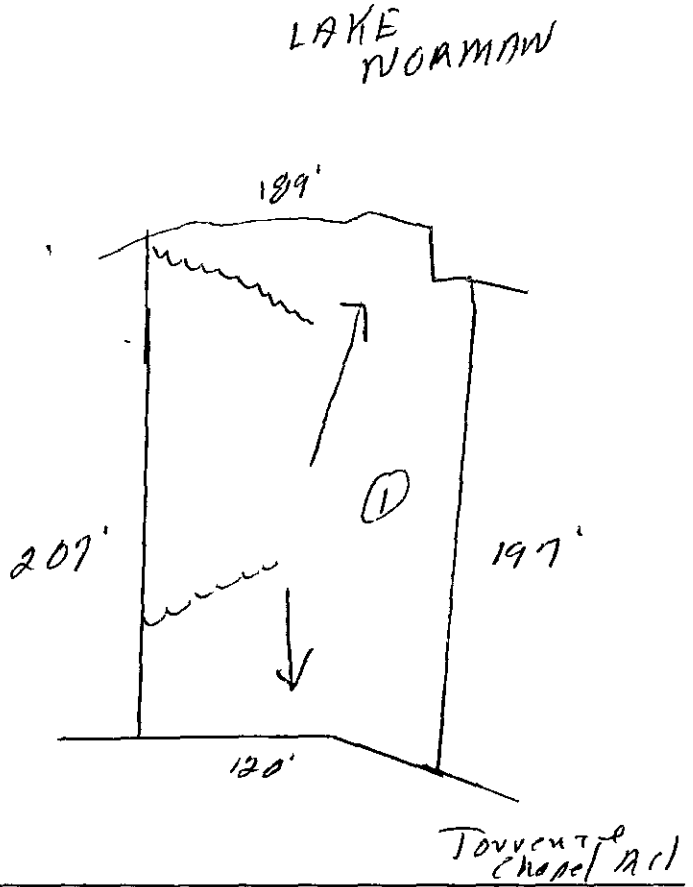
File: 4822A
Parcel: 00116101 PO
Action: 1
☐ PC

Location: Torrence Chapel Road
Subdivision:
Lot: 2 Block: Acres: Approx .55

Owner: H. Edward Knox
Address: 22821 Torrence Chapel Road
Davidson, NC 28036

Comments: _____

Described by: William R. Marlin
Date: 9-9-98




***** 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 2-12% | S PS (U) complex slopes | S PS U | S PS U | S PS U | S PS U |
| Texture | S (PS) U clay | S PS U — | S PS U | S PS U | S PS U | S PS U |
| Structure | S (PS) U Blocky | S PS U — | S PS U | S PS U | S PS U | S PS U |
| Drainage | S (PS) U >36" to water | 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 >36" | S PS U — | S PS U | S PS U | S PS U | S PS U |
| Available Space | S (PS) U limited | 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 | IVA Cecil-Like | complex slopes | | | | |
| Area Classification | S (PS) U | S PS (U) | S PS U | S PS U | S PS U | S PS U |

# APPLICATION FOR SOIL INVESTIGATION

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
AUG 26 1988
Lee Rosgett
#1850

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

FILE: 4922A

TC:

☐ PC ☐ REPT

**JOB LOCATION**

① ADDRESS: 22821 Torrence Chapel Rd.

② SUBDIVISION: Knox Landing ③ LOT: 2 ④ BLOCK: 1

⑤ PARCEL REFERENCE: BOOK NO.: 001 PAGE NO.: 161 PARCEL NO.: 01

⑥ DEED REFERENCE: BOOK NO.: PAGE NO.:

**OWNER**

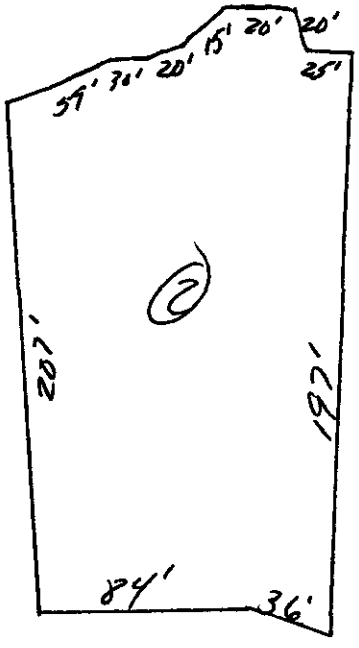
⑦ NAME: H. (FIRST) Edward (MIDDLE) Knox (LAST)

⑧ MAILING ADDRESS: 22821 Torrence Chapel Rd.

⑨ CITY: Davidson ⑩ STATE: N.C. ⑪ ZIP: 28036

⑫ PHONE: (WORK) 372-1360 (HOME) 892-15-28

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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: H. Edward Knox

Date:

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

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY