


13701 STUMPTOWN RD

01713411

6/13/2007

duponbj

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

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

[ ] CRT

6277A

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

PERSON FILING APPLICATION:

NAME: Overcast (last) Richard (first) V. (mi)

ADDRESS: 13701 Stumptown Rd PHONE: 704 875-9391

CITY: Huntersville STATE: N.C. ZIPCODE: 28078

Date: Nov. 13 1997

PROPERTY OWNER:

NAME: Overcash (last) Richard (first) V (mi)

ADDRESS: 13701 Stumptown Rd. PHONE: 704 875-5391

CITY: Huntersville STATE: N.C. ZIPCODE: 28078

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 017-134-11

STREET ADDRESS: 13701 Stumptown Rd. Huntersville, N.C. 28078

ZONING: R-S

Township (check one):
[ ] 0 Mecklenburg County [ ] 2 Davidson [ ] 4 Pineville [X] 6 Huntersville
[ ] 1 Charlotte [ ] 3 Cornelius [ ] 5 Matthews [ ] 7 Mint Hill

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: LOT SIZE (in acres): 1.75

TYPE APPLICATION (check one):

[ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[X] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[ ] COMMERCIAL OR INDUSTRIAL (N)
[X] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X) Bedroom Extension

RESIDENTIAL PROPERTY (Type Building, check one):
[ ] SINGLE MOBILE HOME (S) [X] HOUSE (H) [ ] MULTIPLE FAMILY (U)
[ ] DOUBLE WIDE (D) [ ] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: ~~3~~ 4 NUMBER OCCUPANTS: 5

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ___ Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type _____

WATER SUPPLY (check one):
[ ] Community (C) [ ] Shared Well (S)
[ ] Municipal (M) [ ] Other 'spring' (O)
[X] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[ ] Swimming Pool [ ] Jacuzzi [ ] Stable/Barn [ ] Workshop [ ] None
[ ] Garage [ ] Storage Building [ ] Deck/Patio [ ] Bedrooms [X] Other Enlarge existing bedroom

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: Richard V. Overcash Date: November 13, 1997

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the 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 approval is granted by this Department.

...This permit is not transferable.

...Owner claims that this is a 3 rather than 4 bedroom house. Mr. Overcash says that this was an oversight on his part. We can release approval for this bedroom extension pending the owner changes application to reflect 3 bedrooms.

[ ] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[ ] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[X] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Environmentalist R.S. 11-17-97 Date

Director or Authorized Section Head Date

WWATER : 122791

COPY

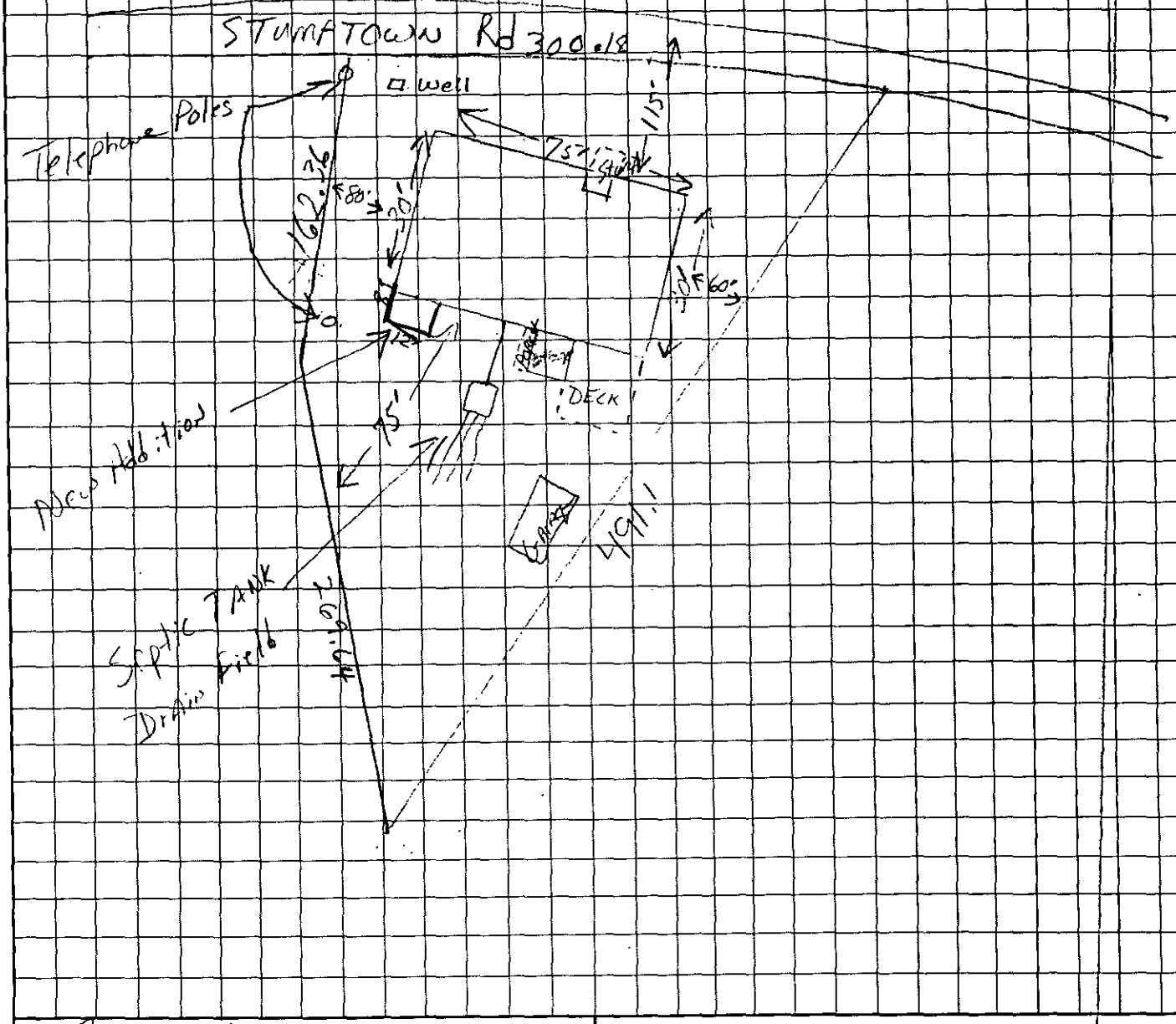
# PROPOSED PLOT PLAN

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

FILE: 6277A

TC: 017-134-11

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.




Richard V. Overcash
OWNER/AGENT SIGNATURE

DATE November 13, 1997

APPROVAL DATE _____

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

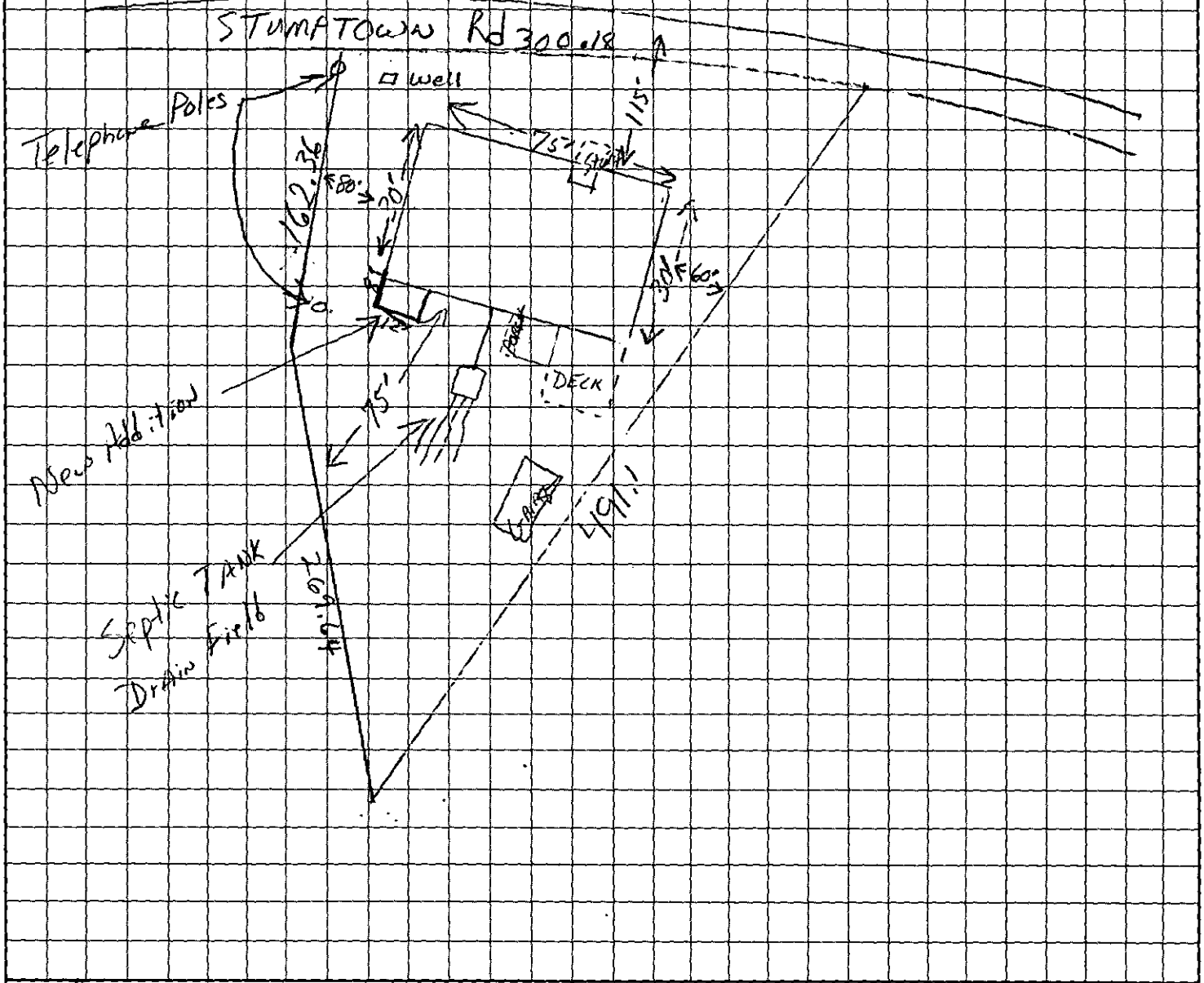
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OWNER/AGENT SIGNATURE Richard V. Overcash

DATE November 13, 1997

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

# MECKLENBURG COUNTY HEALTH DEPARTMENT
# ENVIRONMENTAL HEALTH DIVISION

## CHARGE SLIP

Date: 10-23-89

Name/Company: June Overcash L (Richard)

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Septic Addit

File # 6277A

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
OCT 23 1989

ck#9920
$25.00

Fee: 25.00

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

BILLING — WHITE CUSTOMER COPY — YELLOW

# 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: 6277A
TC: 017-134-11
SERIAL: № 19405
☑ L ☐ CRT

**JOB LOCATION**

① ADDRESS: 13701 Stumptown Rd (STREET NO. / STREET) ② FILE:
③ JURISDICTION: Huntersville (Meck County) ④ TAX PARCEL NO.:
⑤ SUBDIVISION: N/A ⑥ LOT: ⑦ BLOCK:

**OWNER**

⑧ NAME: Richard (FIRST) Vernon (MIDDLE) Overcash (LAST)
⑨ MAILING ADDRESS: 13701 Stumptown Rd.
⑩ CITY: Huntersville ⑪ STATE: NC ⑫ ZIP: 28078
⑬ PHONE: (WORK) 596-5590 ⑭ (HOME) 875-9391

**REQUEST**

This request is for a(n):

⑮ ☐ New permit
⑯ ☑ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☑ Other (specify) Room Addition (Game)

**DESIGN CRITERIA**

System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 3
㉕ Type? N/A
㉓ Maximum occupancy?
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: Jun B Overcash
Date: 10/23/89

## 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.

Philo S. Walker, 10/26/89
Environmentalist — Date

10-27-89
Director or Authorized Section Head — Date

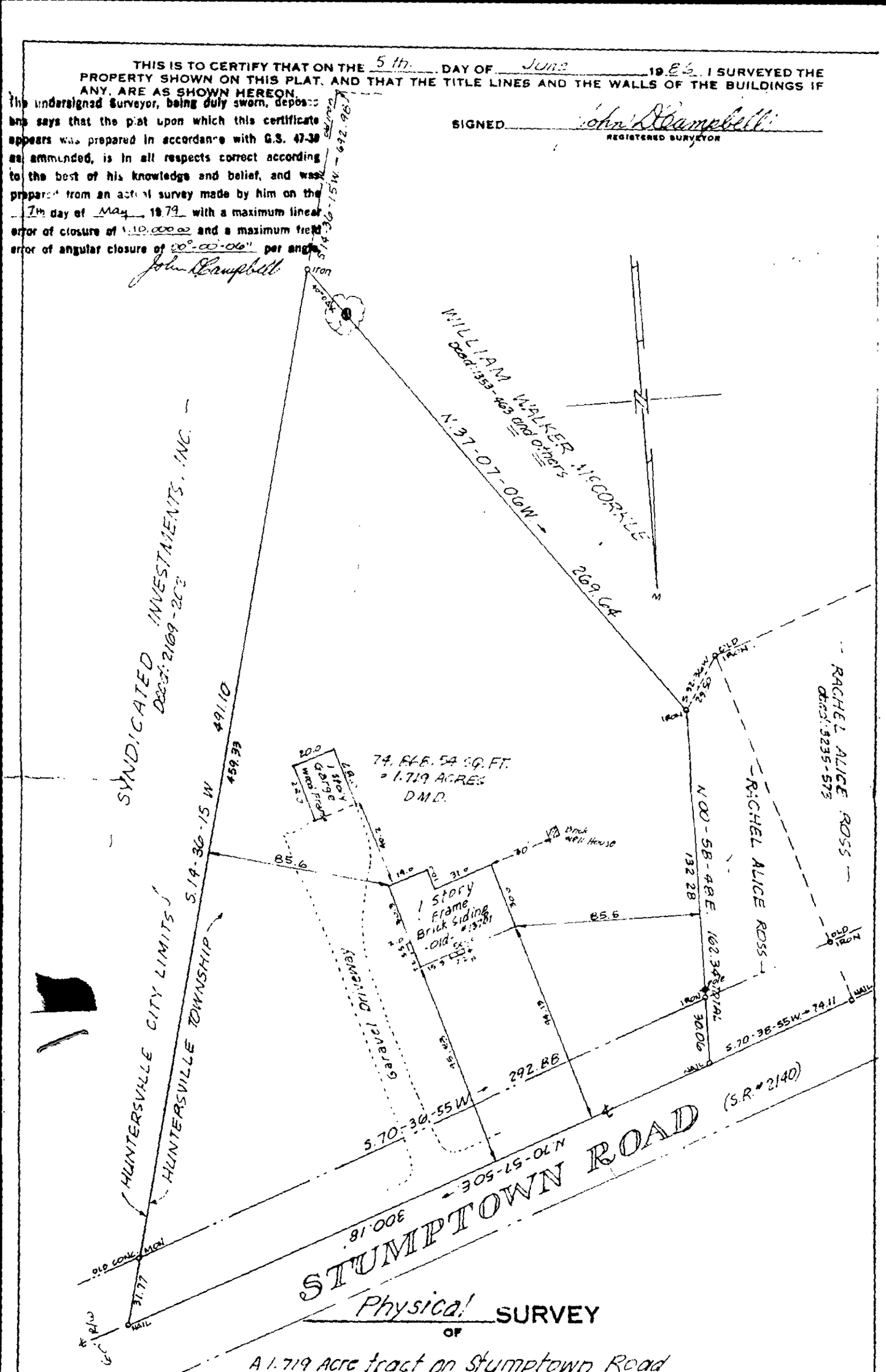
*This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.

THIS IS TO CERTIFY THAT ON THE 5th DAY OF June 19 82 I SURVEYED THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE TITLE LINES AND THE WALLS OF THE BUILDINGS IF ANY, ARE AS SHOWN HEREON.

SIGNED John D Campbell
REGISTERED SURVEYOR

The undersigned Surveyor, being duly sworn, deposes and says that the plat upon which this certificate appears was prepared in accordance with G.S. 47-30 as ammended, is in all respects correct according to the best of his knowledge and belief, and was prepared from an actual survey made by him on the 7th day of May 19 79 with a maximum linear error of closure of 1:10,000.00 and a maximum field error of angular closure of 00°-00'-06" per angle.

John D Campbell




# Physical SURVEY

OF

A 1.719 Acre tract on Stumptown Road
Huntersville Township, Mecklenburg County, N.C.

THE PROPERTY OF Richard Vernon Overcash and wife June B. Overcash

MAP RECORDED IN BOOK 0 AT PAGE 0 DEED RECORDED IN BOOK 4190 PAGE 669

SCALE 1" = 50' DRAWN BY J.D.C. FIELD WORK J.D.C. FIELD BOOK # 539 W.C.

CAMPBELL & ASSOCIATES — REGISTERED LAND SURVEYORS

RIK Map Code = 047-134-11

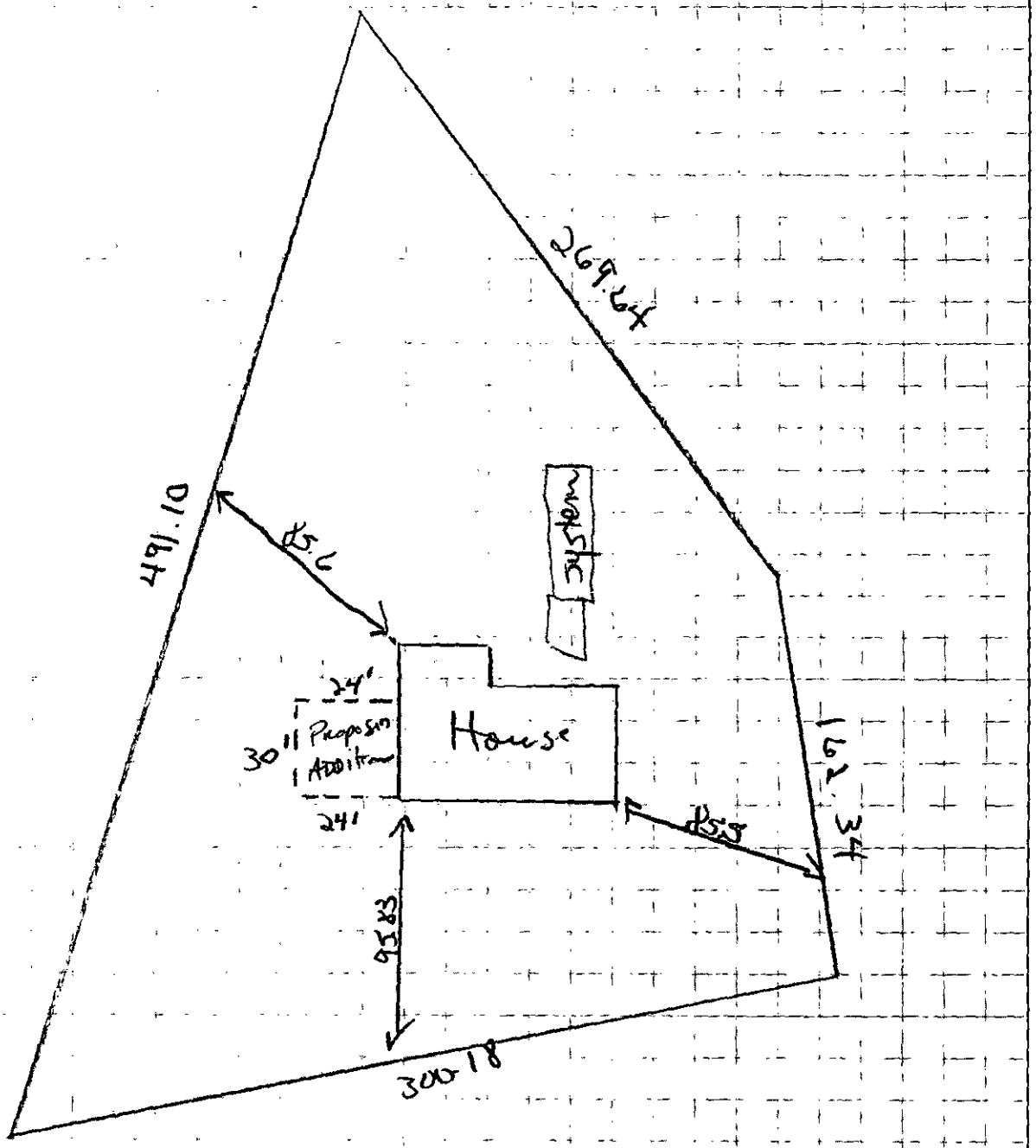
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Signed: _____

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