

19301 YACHTMAN DR

00106136

9/5/08

marliwr

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

400

21815

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

ck# 270 $50.00 08/04/95 CRT

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

(704)336-5102

Date:

PERSON FILING APPLICATION:
NAME: Smith (last) Kenneth (first) W (mi)
ADDRESS: 108 Lawrence PHONE: (704) 8923547
CITY: Mooresville STATE: NC ZIPCODE: 28115

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 001-061-36
STREET ADDRESS: 19301 Yachtman Dr
ZONING: Davidson NC 28036

PROPERTY OWNER:
NAME: Coldwell Bill & Colleen (last) (first) (mi)
ADDRESS: 19301 PHONE: (704) 896 3553
CITY: Davidson STATE: NC ZIPCODE: 28036

SUBDIVISION OR MOBILE HOME PARK NAME:

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

TYPE APPLICATION (check one):

LOT NUMBER: LOT SIZE (in acres):

☐ SOIL TEST - INDIVIDUAL LOT (D)
☐ NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
☐ EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
☐ ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
☐ COMMERCIAL OR INDUSTRIAL (N)
☐ SOIL TEST DEVELOPMENT (P)
☒ ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X) Deck
☐ MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
☐ REPAIR TO SYSTEM (R)

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

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 4

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)
☒ 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 ☐ Other

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: Ken Smith Date: 6-17-95

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.

...8/11/95 Use existing system for deck addition; Deck construction already complete prior to 8/11/95 on-site visit JBM Drainfield located at 001-061-43 → easement to 19407 Yachtman Dr.

☐ IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
☐ MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
☒ ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Joan B. Mialik, RS 8/11/95
Environmentalist Date

Director or Authorized Section Head Date 8-25-95

WATER : 122791

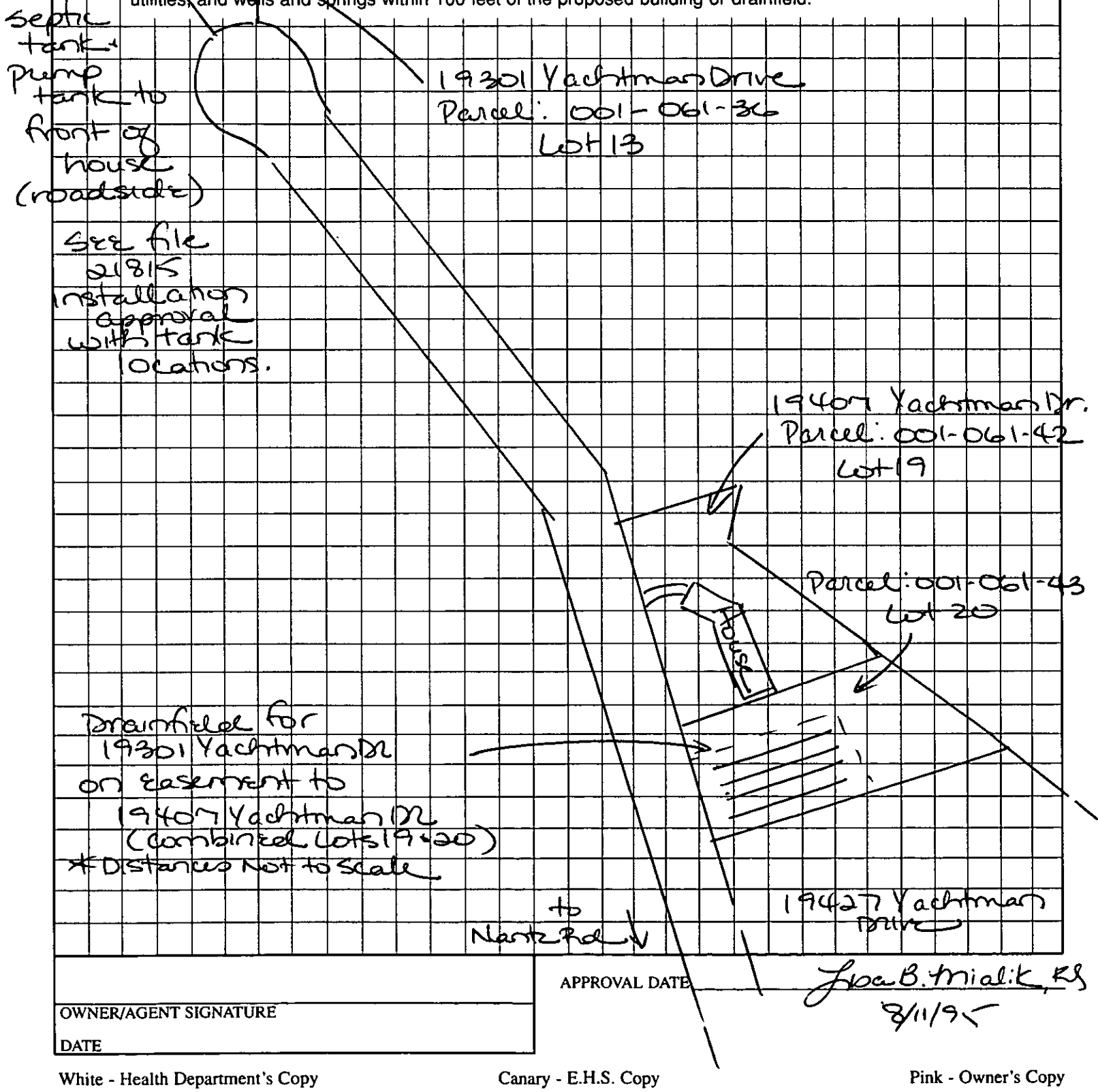
PROPOSED PLOT PLAN - CLARIFICATION PURPOSES

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

FILE: ~~21815~~ (21821)

TC: 001-061-36

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 Joe B. Mialik, RS 8/11/97

OWNER/AGENT SIGNATURE

DATE

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

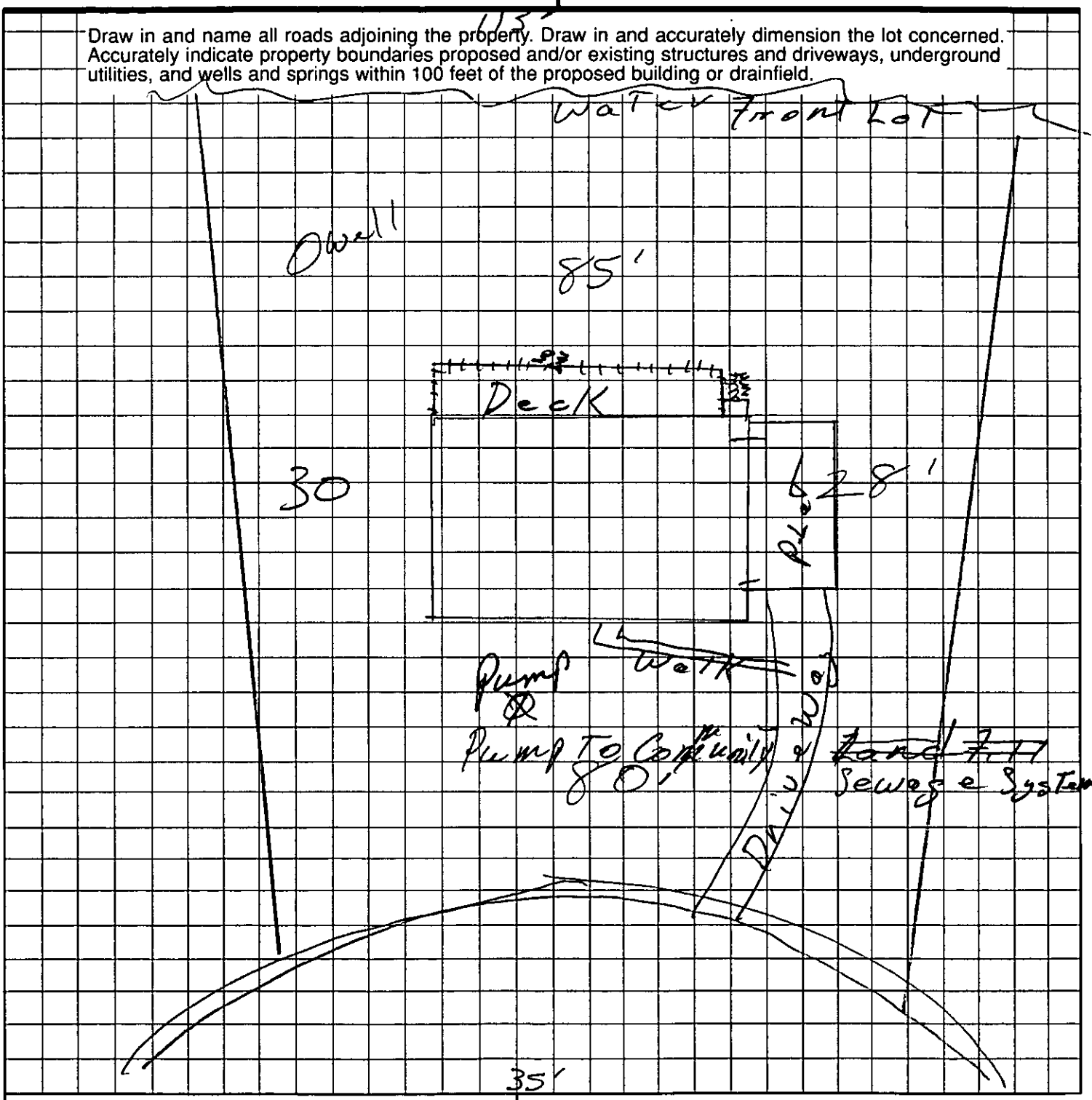
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700 NORTH TRYON STREET
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PHONE (704) 336-5102

FILE: 21815

TC: 001-061-36

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.



Ken Smith
OWNER/AGENT SIGNATURE

DATE 6-12-95

APPROVAL DATE _____

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

Return as part of file 21815

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

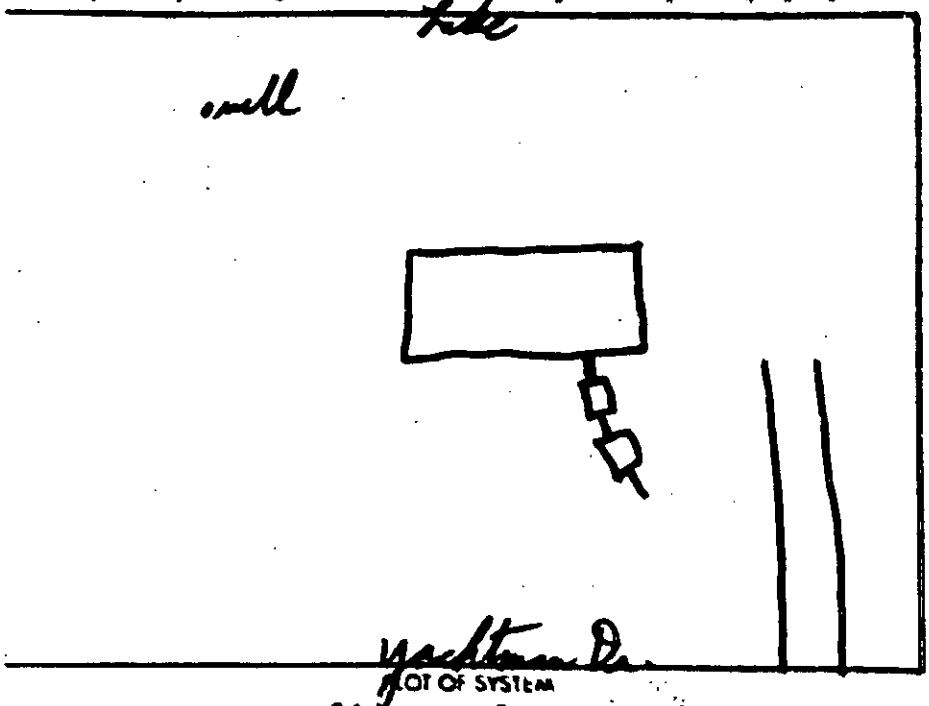
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 21815 DATE: 5-19-87

TC: 001-061-36 p.1

SERIAL № 10931

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 5-19-87. All work shall be completed on or before 6-19-87, 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 Department of Environmental Health 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 1500 gallons

Liquid Capacity of Dosing Tank 1000 gallons

Tank Construction Lcc

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 400 feet

Number of Lines 4

Length of Stone 12 inches

Distance from Water 5 feet

Distance from Property Line 10 feet

Distance from Well > 50' feet

NAME OF OWNER William Vita

LOCATION OF PROPERTY 19301 Yachtsman Dr

Comments: 4 lines 3'X100'X12" stone
Drain field is located on easements for record on file
8/11/95 Drainfield located 001-061-43 YBM

S Rowell, R.S.
Division or Section Head

D.R. Ferguson
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 Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

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

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

APPLICATION FOR AN IMPROVEMENT PERMIT

Retain as part of file

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

RECEIVED
MAY 6 1986
ENVIRONMENTAL HEALTH

MECK COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH
RECEIVED
APR 30 1986
ENVIRONMENTAL HEALTH

(OFFICE USE ONLY)
21815
FILE: 21821
TC: 001-061-09,10 Pd

JOB LOCATION

① ADDRESS: 19407 (STREET NO.) YACHTMAN DRIVE (STREET) (OFF-WATER LOT) ② SUB FILE: 21821
③ CITY: DAVIDSON TOWNSHIP ④ TAX PARCEL NO.:
⑤ SUBDIVISION: YACHTMAN SHORES ⑥ LOT: 19 ⑦ BLOCK:

OWNER

⑧ NAME: KNOX, BLACK AND BRIGGS CONSTRUCTION, INC. (FIRST) (MIDDLE) (LAST)
⑨ MAILING ADDRESS: ROUTE 7, BOX 248
⑩ CITY: MOORESVILLE ⑪ STATE: NC. ⑫ ZIP: 28115
⑬ PHONE: (WORK) 704-664-2902 ⑭ (HOME) SAME

REQUEST

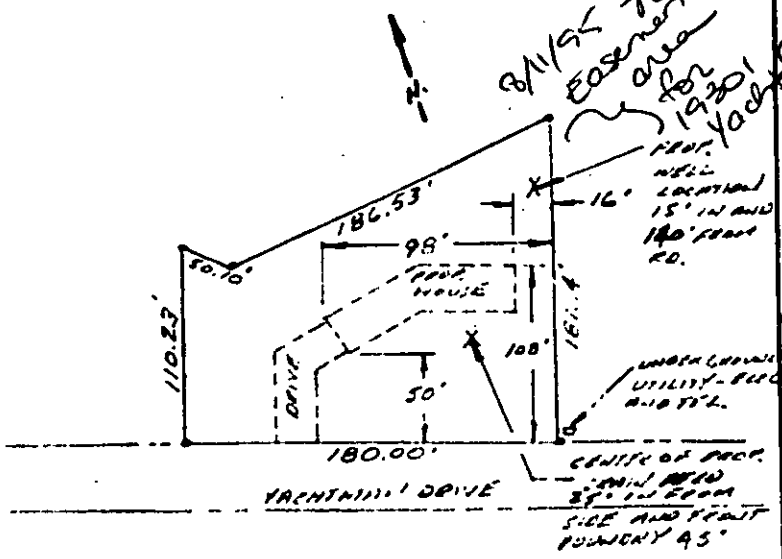
This request is for a(n):

⑮ ☒ New installation 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? 3 ㉕ Type?
㉓ Maximum occupancy? 4 (1783 SQFT.) ㉖ Maximum number of employees?
㉔ Basement? ☐ yes ☒ no ㉗ Maximum number of seats?



WATER SUPPLY

㉙ Water supply from (present or proposed)

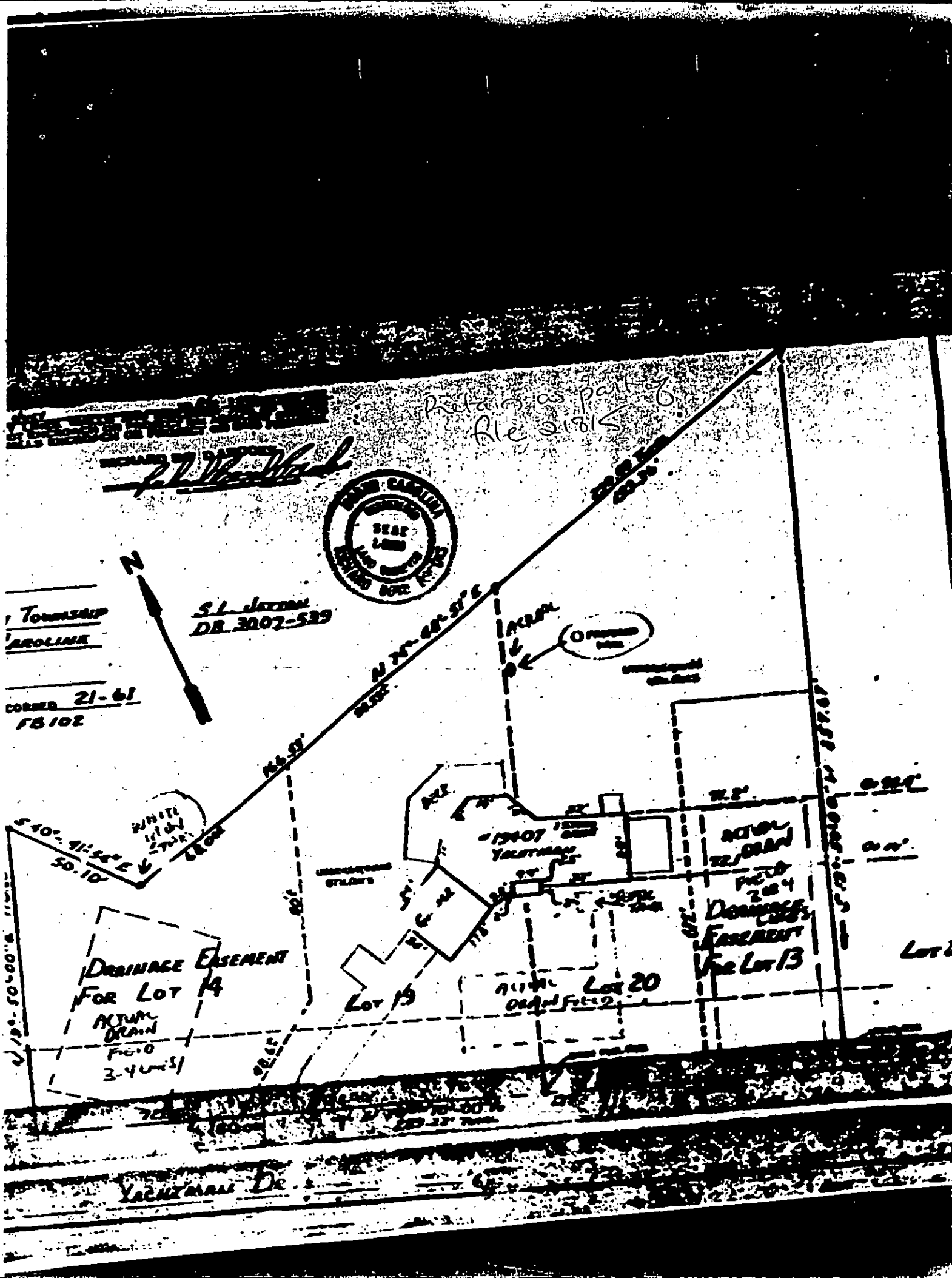
A ☒ Individual well
B ☐ Municipal system
C ☐ Community well
D ☐ Community system

㉚ 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: [signature] (NS)
Date: APRIL 29, 1986

㉘ Accurately dimensioned plot

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


Retain as part of file 2181S
N
S.L. Jeffcoat
DB 3002-539
N 76°-48'-51" E
Township
Carolina
Corner 21-61
FB 102
S 40°-41'-54" E
50.10'
White Iron Stake
Drainage Easement For Lot 14
Actual Drain
Lot 15
Lot 20
Actual Drain
Drainage Easement For Lot 13
Yachtsman Dr.

PROPOSED PLOT PLAN

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

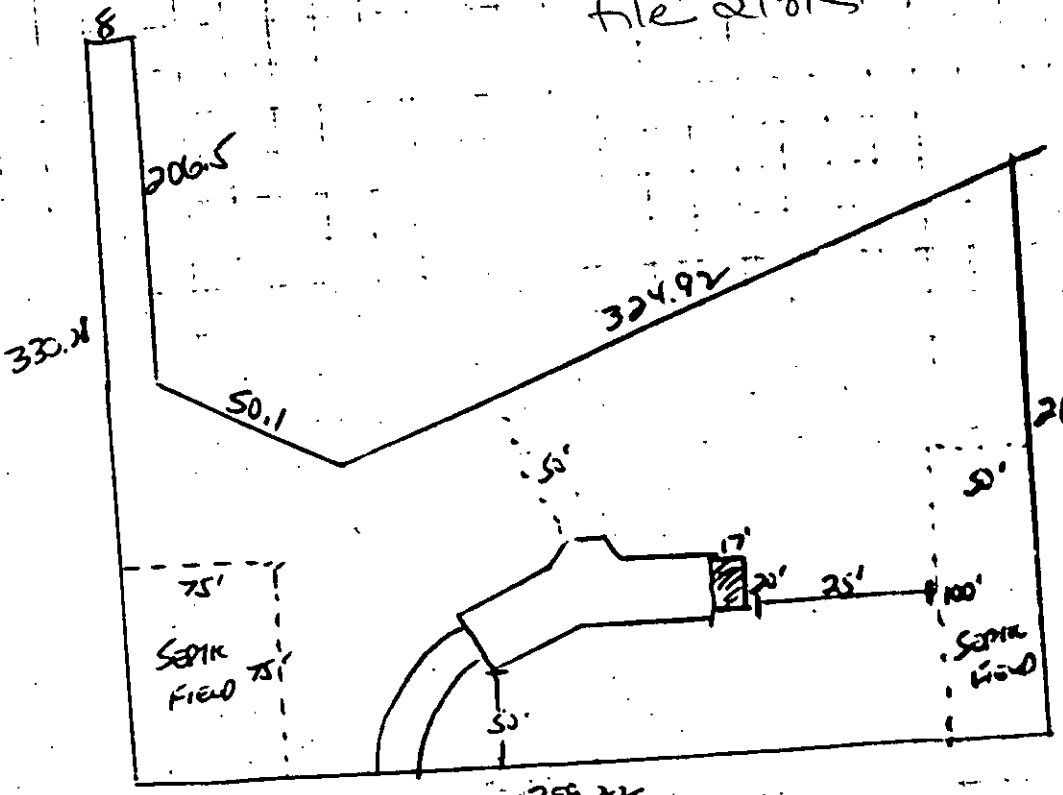
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 21821

TC: _____

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Retain as part of file 21815



for 19301 Yacht marina
001-061-36

Signed: C. Clive Lowe

Date: 3-27-87

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

FILE: ~~21808~~ 21821 DATE: 9/9/86

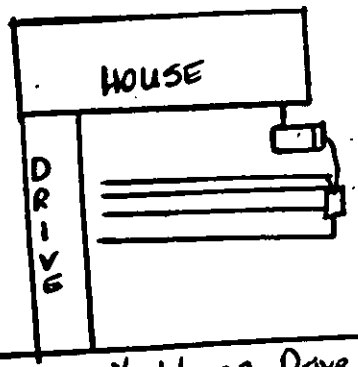
TC: 001-061-09 10 PO pd

SERIAL Nº 10294

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 4/29/86. All work shall be completed on or before 10/9/86, 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 Department of Environmental Health 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.

Retain as part of File 21815

well (X)



Yachtman Drive

PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank — gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 400 feet

Number of Lines 4x100, ~~5x80~~

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well >100 feet

NAME OF OWNER Knox, Black and Briggs Construction Inc.

LOCATION OF PROPERTY ~~19400~~ 19407 Yachtman Drive

Comments: 4 ~~5~~ Trenches 3' x ~~80~~ 100' x 12" stone with gradeboards, straw as cover

John R Adkisson
Division or Section Head

Cynthia G. Bass
Environmentalist

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LAKE NORMAN
(CATAWBA RIVER)

PG. 21

PG. 47

PG.05

CORNELIUS

TOWN LIMITS

TWP

YACHTMAN DR.

LEMLEY

WANTZ RD.

N.C. HWY. 73 #2148

30' RD. R/W

15' ESMT.

30' ESMT.

61

1.21 AC. 16

2 AC. 7

2 AC. 52

3.49 AC. 1

3.48 AC. 51

3.19 AC. 8

2.43 AC. 22

1.61 AC. 53

3.42 AC. 17

1.038 AC. 49

3.29 AC. 50

1.882 AC. 20

6.555 AC. 18

4.21 AC. 21

TAX LINE MAP BOOK 001 PAGE 06
MECKLENBURG COUNTY, NORTH CAROLINA
REVISED 10-27-94 BK | SCALE 1" = 200'

FOR TAX PURPOSES ONLY