

WILLIAMS LOT 1

6/19/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 6637 A DATE: 11-22-96
TC: 601-341-17 ☐ L ☐ CRT
SERIAL Nº 16797

Name of Owner Chester A. Michael, III Juris.:
Address of Property 24901 Wellcraft Court

Inspection Data:

Tank Material PCC
Total Length of Drainfield 540'
Number of Lines 5 @ 90'
Cover Depth 12"
Water Supply Source priv. well
Distance to Water Source ± 80'
Excavation Inspected 11-22
Tank(s) Inspected 11-22
Wash Line Inspected N/A
High Water Alarm Inspected 2-7-97

Installed according to the original permit with the exception of (6) 90' long drainlines being installed rather than (7) 78' long lines.

PLOT

Design 1996, 1500SF, 1000DF, PI, CON, 1620SF, T, 12G, cert-like CTR# 3

The undersigned has inspected the Septic Tank System described above, and certifies it has been Abernathy
- ☑ installed or constructed
- ☐ altered or repaired
- ☑ in accordance with the permit issued
- ☐ as detailed in the plot above

and meets the provisions of 15A NCAC 18A. 1900, "Laws And Rules For Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. This 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 15A NCAC 18A. 1990 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.

Notice: Disturbance of the designated repair area may result in the suspension/revocation of this permit.

COMMENTS: Type III b 4 bedroom residence
(6) 3'wx 90' x 12" stone Supply line already installed - uncovered & is 7 10' off 760' mark - tested pump and supply line during final.

Myers ½ H.P.

Danny B. Thompson, R.E.S.
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 6637A DATE: 11-15-96

TC: 001-341-17 ☐ L

SERIAL Nº 16940

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 9-26-95. All work shall be completed on or before 12-15-96, after which date this permit shall be null and void. The system shall meet all of the construction requirements of I5A NCAC 18A. 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.

* Install according to plot plan that was issued on 11-15-96 by Lisa B. Mialik.

PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank 1000 gallons

Tank Construction PCC

Trench Depth 28"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous Yes

Total Line Length 532 feet

Number of Lines 7

Depth of Stone 12 inches

Distance from House >5' feet

Distance from Property Line >10 feet

Distance from Well 100 feet

NOTICE: This system shall not be installed while soils are in a wet condition.

NAME OF OWNER Chester A. Michael, III

LOCATION OF PROPERTY 24901 Wellcraft Court

Comments: Type III b 4bedroom residence
(7) 3'w x 76'L x 28"d *Supply line has been installed - must be proper distance from high water mark from of lake.

Ronny B. Thompson, Jr., R.S.
Environmental Health Specialist

WHITE - HEALTH DEPARTMENT's COPY • CANARY - E.H.S. COPY • PINK - OWNER OR AGENT's COPY

Mecklenburg County
Health Department

November 25, 1996

Mr. Chester A. Michael, III
P.O. Box 5657
Winston Salem, North Carolina 27113

Dear Mr. Michael:

Re: 24901 Wellcraft Court
File: 6637A/(Tax Parcel No. 001-341-17)

At your request an inspection was made at the above referenced property to facilitate the issuance of an Operation Permit for the Sewage Treatment and Disposal system. During the inspection it was found that the following items did not meet the regulations set forth in the "Laws and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A .1900;.1952 Septic Tank, Dosing, Dosing Tank and Lift Station Design." Our comments follow:

1) (6) Pump and control circuits shall be provided with manual circuit disconnects within a watertight, corrosion-resistant, outside enclosure (NEMA 4X or equivalent) adjacent to the pump tank, securely mounted at least 12 inches above the finished grade. The pump(s) shall be manually operable without requiring the use of special tools or entrance into the tank for testing purposes. Conductors shall be conveyed to the disconnect enclosure through water proof, gasproof, and corrosion-resistant conduits, with no splices or junction boxes provided inside the tank. Wire grips, duct seal, or other suitable material shall be used to seal around wire and wire conduit openings inside the pump tank and disconnect enclosure.

2) (9) The pump tank shall have a properly functioning high-water alarm. The alarm circuit shall be supplied ahead of any pump overload and short circuit protective devices. The alarm shall be audible and visible by system users and weatherproof if installed outdoors in an enclosure (NEMA 4X or equivalent).

The above mentioned items must be installed and inspected prior to the Operation Permit being issued. The Operation Permit is required for the Certificate of Occupancy and the permanent electric hook-ups. Please schedule the inspections at least five (5) working days in advance to ensure no delays in the Operation Permit issuance.

Please call me at 336-5569 to discuss any question you may have concerning this matter.

Sincerely,

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

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

Mecklenburg County
Health Department

November 5, 1996

Mr. Buster Williams
203 Queens Cove Road
Mooresville, NC 28115

Dear Mr. Williams:

RE: North Carolina Administrative Code (NCAC) Requirements for Wastewater Supply Lines

The purpose of this correspondence is to memorialize the events surrounding your inquiry regarding sewage supply line construction materials as specified under NCAC .1950(e)(2).

Our agent, Ms. Lisa Mialik cited the above rule in processing your applications for Improvement Permits for lots one (1), two (2) and four (4). A correspondence from Toney C. Jacobs dated July 26, 1996 addressed to Lisa Mialik was received in our office. Kelly Randall, also of this office, became involved in the situation and asked for my comments on the information submitted by Mr. Jacobs who was present in our office at the time. During our discussion I informed Mr. Jacobs I had not reviewed the information and that I would do research to determine if Schedule 40 PVC pipe could be utilized for the supply lines serving lots 2 and 4. Mr. Jacobs provided a sample of the pipe to view at the meeting.

My main concern about using the proper pipe was protection of private water supplies. The state rules are not clear as to the reasoning for requiring ductile iron. Obviously the integrity of the pipe must be strong enough to tolerate internal sustained pressure but I was also concerned about external load pressure from vehicular traffic, etc. My research began with telephone calls to the state On-Site Program to ask for a clarification of the aforementioned rule. The state office would not speculate on specific materials for PVC pipe when compared to ductile iron pipe. The information from Mr. Jacobs was then forwarded to the state for comment but no specific response was given to address "equivalent" pipe or materials. Ways to sleeve PVC pipe were discussed but not "equivalent" piping materials and specifications.

Having no success with the state office I contacted pipe manufacturers. This was also a difficult task because very few representatives were familiar with private sewage supply lines

and could not comment on comparisons to "...ductile iron pipe with mechanical joints equivalent to water main standards..." as stated in NCAC .1950 (e)(2). The most helpful representative was Craig Fisher, Association Engineer, Uni-Bell Company, Dallas, Texas. Mr. Fisher provided me with a wealth of information and I will cover some issues which led me to allow the use of the PVC pipe suggested by Mr. Jacobs in your specific case.

It is my understanding, from my discussions with my state colleagues, that NCAC .1950 (e)(2) is outdated but was intended to prevent leakage or breakage which could have a detrimental impact on the environment and public health. Since the rule was written, many other piping materials have emerged on the market which may meet the equivalency requirement, however, pipe manufacturers have not challenged the rule. Although I can make no general ruling, it is my opinion that Schedule 40 PVC D1785 will meet your needs. My opinion is based on comments from Mr. Fisher regarding ductile iron piping. There is a leakage allowance for ductile iron with mechanical joints which appears to be higher than the allowance for PVC pipe. The main concern with PVC pipe connection is that it may be solvent cement welded, and must be allowed to "cure" for a sufficient amount of time.. If properly installed, PVC pipe can have good, tight joints. Thrust restraints can be added when changing pipe direction to ensure protection against stress on joints. There were concerns about the parent soil material present when installing the pipe. This consideration should be given in every case and the manufacturer should be consulted, especially if the pipe is installed to a depth of less than three feet. Given these main considerations it seems feasible to use the pipe suggested by Mr. Jacobs in your case. Other advantages of its use are ease of installation and reduced expense.

I hope this correspondence sufficiently addresses your concerns. Please be aware that this is not a blanket approval for the use of the same pipe in other situations, nor is my opinion meant to apply to other jurisdictions. I feel confident that you will properly install and maintain the supply lines, given my explanations.

Thank you for your cooperation in this matter. Please let me know if I can be of further assistance.

Sincerely,

Sylvia D. Daniel, R.S., Program Chief
Individual Water and Wastewater Systems Program

cc: Lisa Mialik
Toney C. Jacobs
Craig Fisher

JUDITH A GIBSON REG OF DEEDS MECK NC
BK: 08364 PG: 0458/0461 #:0256 16:80
FILED FOR REGISTRATION 11/15/95 14:06

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

WASTEWATER TREATMENT AND DISPOSAL SYSTEM DESIGN AGREEMENT: 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c)

FILE # 6637A

PARCEL # ~~09134201/34106~~ 001-341-17/001-342-21

The undersigned, Chester Adams Michael III/Teresa Tuttle Michael, owner of property located at 24901 Wellcraft Court, Mooresville, NC 28115 (the "site") and described in an instrument recorded in Book 24 at Page 253, Mecklenburg Public Registry, hereby acknowledges that the undersigned applied to the Mecklenburg County Health Department (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 15A NCAC 18A .1900 et seq.; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested 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 is allowed by the rules; 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 the responsibility of the designer, owner, developer, installer, or user of the system, as applicable, 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 acknowledges that the following conditions will apply to the site:

- Any changes on the property may make the Improvement Permit Null and void and may make the Improvement Permit subject to revocation.

This instrument was prepared by: Chester Adams Michael III
Mail after recording to: 700 North Tryon Street, Suite 211
Charlotte, North Carolina 28202

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement 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.

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.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, this 9th day of November, 1995.

_____ (SEAL)
(Corporate Name)

_____ (SEAL)

By: _____ _____ (SEAL)

_____ President _____ (SEAL)

ATTEST:

_____

_____ Secretary

(Corporate Seal)

STATE OF NORTH CAROLINA
COUNTY OF Forsyth

I, Bridget A. Brogan, a Notary Public for said County and State, do hereby certify that Chester A. Michael III and Teresa Tuttle Michael personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 10 day of November, 1995.

Bridget A. Brogan
Notary Public

My Commission Expires:
8-25-96

OFFICIAL SEAL
BRIDGET A. BROGAN
NOTARY PUBLIC-NORTH CAROLINA
COUNTY OF FORSYTH
My Commission Expires August 25, 1996

STATE OF NORTH CAROLINA
COUNTY OF Forsyth BAB

I, Bridget A. Brogan BAB, a Notary Public for said County and State, do hereby certify that _____ personally came before me this day and acknowledged that he is _____ Secretary of _____ _____, a North Carolina corporation, 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 _____ President, sealed with its corporate seal and attested by _____ as its _____ Secretary.

WITNESS my hand and notarial seal, this _____ day of _____, 199__.

_____
Notary Public

My Commission Expires:

_____

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

OWNER'S ACKNOWLEDGMENT OF MODIFIED/ALTERNATIVE REPLACEMENT SYSTEM REQUIREMENT

Site Address: 24901 Wellcraft Court, Mooresville, N.C. 28115

File Number: 6637A

Parcel Number: ~~00134201/34106~~ 001-341-17/ 001-342-21

Owner/Agent Name: Chester Adams Michael III/Teresa Tuttle Michael
(Please print)

Date: November 9, 1995 Number of Bedrooms: 4

Receipt of the plan and specifications for a conventional system of sewage disposal for the above property is hereby acknowledged. Upon receipt of the information, a review was made of the material on file and a site evaluation was conducted. The plan was then reviewed in conjunction with provisions of 15A NCAC 18A .1900 - "Sewage Treatment and Disposal Systems." The plan as submitted is disapproved because there is not sufficient available space for a repair area for a conventional replacement system.

This site may be developed if the repair area is found to be acceptable for either a modified system (Rule .1956) or an alternative system (Rule .1957) for the replacement system as allowed by the following Rule 15A NCAC 18A .1945(b).

(b) Sites shall have sufficient available space for a repair area separate from the area determined in Paragraph (a) of this Rule. The repair area shall be based upon the area of the nitrification field required to accommodate the installation of a replacement system as specified in Rule .1955, .1956, or .1957 of this Section. Prior to issuance of the initial Improvement Permit for a site, the local health department shall designate on the permit the original system layout, the repair area, and the type of replacement system.

Please be advised that you have the right of an informal review by this Department and the right of appeal under G.S. 130A-335(g) and 130A-24, which appeal can be held in Mecklenburg County.

By signing this form, and signing and recording in the Mecklenburg County Register of Deeds Office the attached reclassification form entitled, **WASTEWATER TREATMENT AND DISPOSAL SYSTEM DESIGN AGREEMENT: 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c)**, you, the property owner, understand and acknowledge your option to develop this site initially with a

conventional sewage system and when needed, subsequently to repair or replace said system with a modified or alternative system as described in Rules .1956 "Modification to Septic Tank Systems," or .1957(a), (b), or (c) "Design Criteria for Design of Alternative Sewage Systems." The completed reclassification form must be approved by this office before it can be recorded.

In addition, you the property owner, also understand that the following conditions will apply:

- Any changes on the property may make the Improvement Permit null and void and may make the Improvement Permit subject to revocation.

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement system.

Joe B. Mialik RS — 11/15/95

Environmental Health Specialist — Date

I have reviewed this document and understand its provisions and implications concerning the issuance of the Improvement Permit for the above-referenced site.

Property Owner Signature — 11-9-95 Date

Teresa Suttle Michael — 11-9-95

700 North Tryon Street, Suite 211, Charlotte, North Carolina 28202,
(704) 336-5102

JUDITH A GIBSON REG OF DEEDS MECK NC
BK: 08364 PG: 0458/0461 #:0256 16.80
FILED FOR REGISTRATION 11/15/95 14:06

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

WASTEWATER TREATMENT AND DISPOSAL SYSTEM DESIGN AGREEMENT: 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c)

FILE # 6637A
PARCEL # ~~09134201/34106~~ 001-341-17/001-342-21

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The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is the responsibility of the designer, owner, developer, installer, or user of the system, as applicable, 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 acknowledges that the following conditions will apply to the site:

- Any changes on the property may make the Improvement Permit Null and void and may make the Improvement Permit subject to revocation.

This instrument was prepared by: Chester Adams Michael III
Mail after recording to: 700 North Tryon Street, Suite 211
Charlotte, North Carolina 28202

RBCWM:24751_1/8-30-95

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

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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.

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.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, this 9th day of November, 1995.

_____ (SEAL)
(Corporate Name)

By: _____

_____ President

ATTEST:

_____

_____ Secretary

(Corporate Seal)

Chester A. Michael III (SEAL)

Teresa Tuttle Michael (SEAL)

_____ (SEAL)

_____ (SEAL)

STATE OF NORTH CAROLINA
COUNTY OF Forsyth

I, Bridget A. Brogan, a Notary Public for said County and State, do hereby certify that Chester A. Michael III and Teresa Tuttle Michael personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 10 day of November, 1995.

Bridget A. Brogan
Notary Public

My Commission Expires:
8-25-96

OFFICIAL SEAL
BRIDGET A. BROGAN
NOTARY PUBLIC-NORTH CAROLINA
COUNTY OF FORSYTH
My Commission Expires August 25, 1996

STATE OF NORTH CAROLINA
COUNTY OF ~~Forsyth~~ Mecklenburg

I, ~~Bridget A. Brogan~~ Bridgan A. Brogan, a Notary Public for said County and State, do hereby certify that _____ personally came before me this day and acknowledged that he is _____ Secretary of _____ _____, a North Carolina corporation, 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 _____ President, sealed with its corporate seal and attested by _____ as its _____ Secretary.

WITNESS my hand and notarial seal, this _____ day of _____, 199__.

_____
Notary Public

My Commission Expires:

_____

State of North Carolina, County of Mecklenburg

The foregoing certificate(s) of Bridgan A. Brogan

Notary(ies) Public is/are certified to be correct.

This 15th day of November 19 95

JUDITH A. GIBSON, REGISTER OF DEEDS

By: _____ Deputy Register of Deeds

RBCWM:24751_1/8-30-95

FEE: _____ **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: _____ **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE** X

DATE: 11/15/95 PERMIT NO: 6637A

PARCEL NO: 001-341-17 (house)
001-342-21 (Drainfield)

PROPERTY OWNER: Chester A. Michael III

BUILDING CONTRACTOR: _____

JOB LOCATION ADDRESS: 24901 Wellcraft Court

SUBDIVISION NAME: Williams

AUTHORIZATION ISSUED BY: Joe B. Malik, RS DATE: 11/15/95
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 6637A, AND THE ATTACHED SITE PLAN WITH SYSTEM DETAILS. CONSTRUCTION AND INSTALLATION MUST ALSO MEET ALL REQUIREMENTS SET FORTH IN THE RULES GOVERNING SANITARY SEWAGE COLLECTION, TREATMENT, AND DISPOSAL AND ANY OTHER APPLICABLE RULES AND LAWS.

2. AN INSTALLATION, CONSTRUCTION, ALTERATION AND/OR REPAIR APPROVAL MUST BE SECURED **PRIOR** TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH MECKLENBURG COUNTY HEALTH DEPARTMENT.

3. ANY ALTERATION IN SITE OR SOIL CONDITIONS (INCLUDING LOCATION OF STRUCTURES AND APPURTENANCES) OR MODIFICATION IN USE, DESIGN WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS AS SPECIFIED IN THE ASSOCIATED IMPROVEMENT PERMIT AND APPLICATION, MAY SUBJECT THIS AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: See improvement permit

OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITIONS OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

Chet A Michael

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE 11-15-95

6637A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

10/2/95
CK#1001 #150.00 ☐ 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

PERSON FILING APPLICATION:

NAME: MICHAEL, III (last) CHESTER (first) A. (mi)

ADDRESS: PO BOX 5657 PHONE: (910) 724-5921

CITY: WINSTON-SALEM STATE: NC ZIPCODE: 27113

Date: 9-26-95 001-341-17

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 00134101/34106

STREET ADDRESS: 24901 WELLCRAFT COURT

MOORESVILLE, NC 28115

ZONING: RR

PROPERTY OWNER:

NAME: MICHAEL, III (last) CHESTER (first) A. (mi)

ADDRESS: PO BOX 5657 PHONE: (910) 724-5921

CITY: WINSTON-SALEM STATE: NC ZIPCODE: 27113

SUBDIVISION OR MOBILE HOME PARK NAME: WILLIAMS SUBDIVISION

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

LOT NUMBER: 1 LOT SIZE (in acres): 1.084

TYPE APPLICATION (check one):

☐ 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)
☐ 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: 4 NUMBER OCCUPANTS: 2

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: Chet Gmielek Date: 9-26-95

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.

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

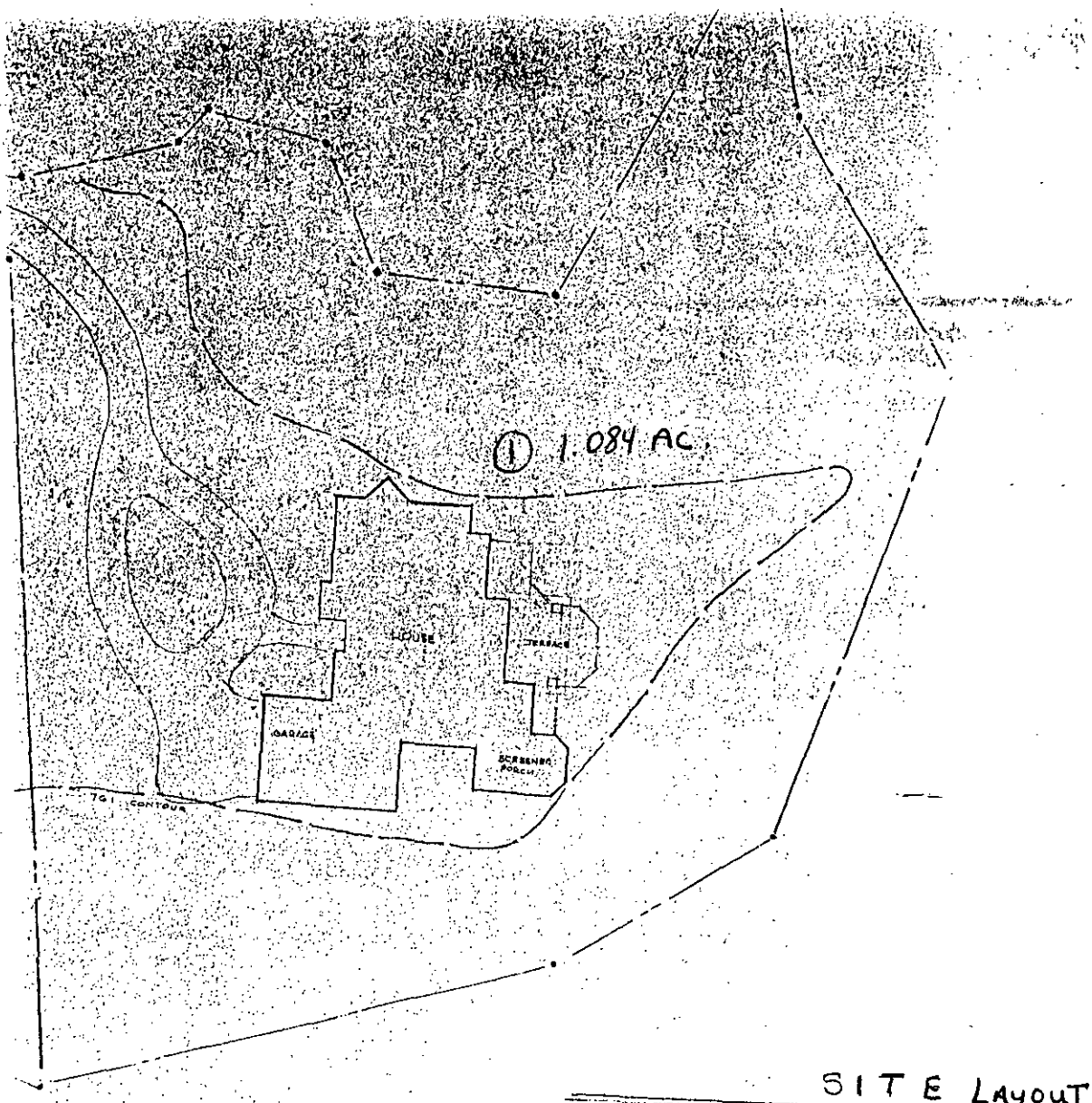
... Pump to cont on parcel # 001-342-21; TYPE IV PPBPS Repair

4 Bedroom House

Linda B. Mialik, RS 11/15/95
Environmentalist Date

Director or Authorized Section Head Date

WATER 12/94



SITE Layout

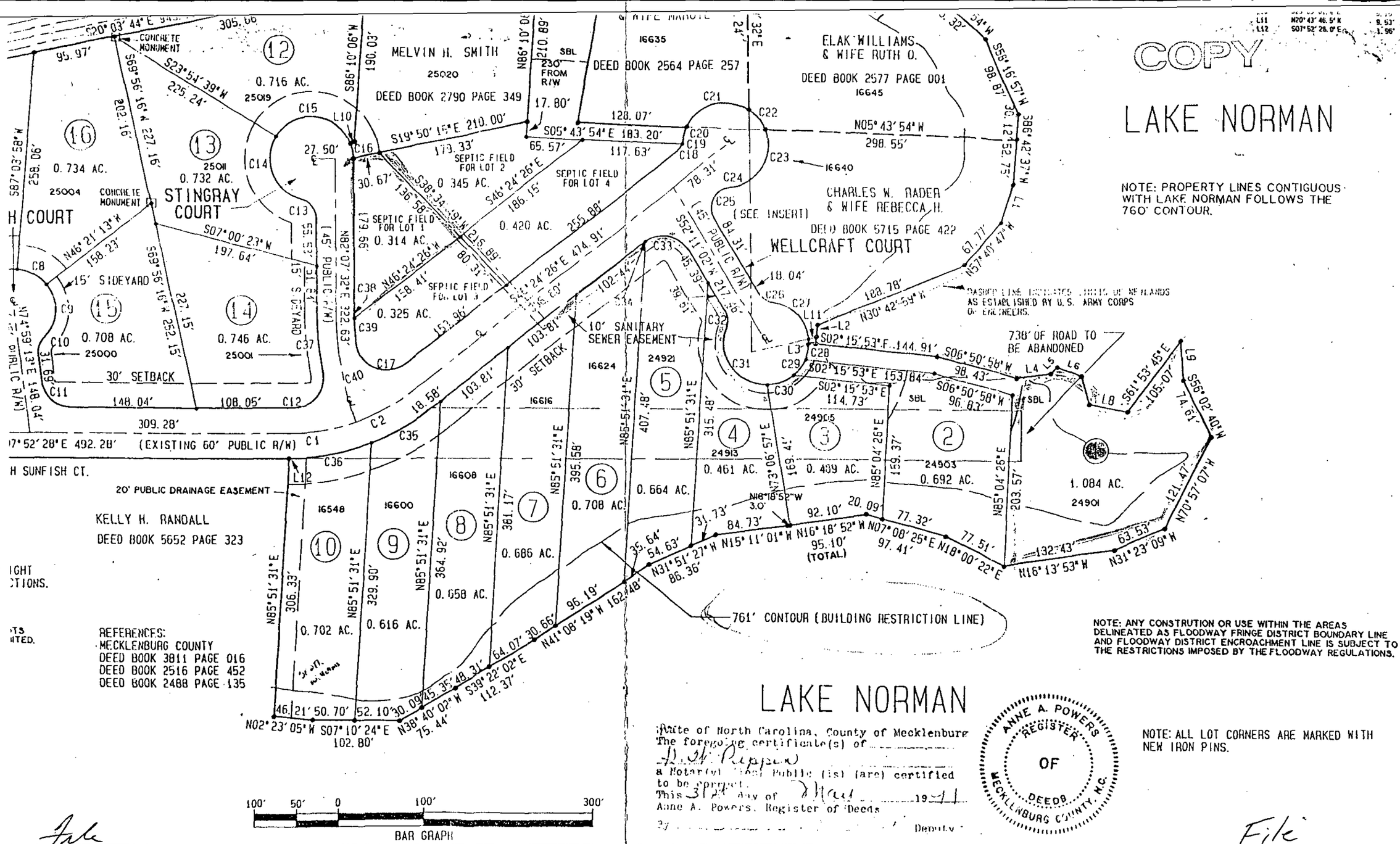
3700 sq feet

File 6637A

COPY

LAKE NORMAN

NOTE: PROPERTY LINES CONTIGUOUS WITH LAKE NORMAN FOLLOWS THE 760' CONTOUR.



NOTE: ANY CONSTRUTION OR USE WITHIN THE AREAS DELINEATED AS FLOODWAY FRINGE DISTRICT BOUNDARY LINE AND FLOODWAY DISTRICT ENCROACHMENT LINE IS SUBJECT TO THE RESTRICTIONS IMPOSED BY THE FLOODWAY REGULATIONS.

IGHT
CTIONS.

TS
ITED.

REFERENCES:
MECKLENBURG COUNTY
DEED BOOK 3811 PAGE 016
DEED BOOK 2516 PAGE 452
DEED BOOK 2488 PAGE 135

LAKE NORMAN

State of North Carolina, County of Mecklenburg
The foregoing certificate(s) of
a Notary(s) Public (is) (are) certified to be correct.
This 31st day of March 19 91
Anne A. Powers, Register of Deeds
By _____ Deputy

ANNE A. POWERS REGISTER OF DEEDS MECKLENBURG COUNTY, N.C.

NOTE: ALL LOT CORNERS ARE MARKED WITH NEW IRON PINS.

File 6637A

File 6637A	GRAY, PATE & ASSOCIATES ENGINEERS - SURVEYORS	SCALE 1" = 100'	DATE 3/11/90	OWNED AND DEVELOPED BY: ELAK WILLIAMS & WIFE RUTH O. TOM WILLIAMS ET AL	File 6637A SHEET 1

Permit Number: 6637A

CONDITIONS OF IMPROVEMENT PERMIT

Tax Number: 001-341-17 (house) 001-342-21 (Mansfield)

- The IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be NO grading, filling or disturbance of the soil in the area of the septic tank system or repair area.
- CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a Building Permit. The Construction Authorization is NOT transferable. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.
- Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

Basement	___ Yes	✓ No	___ Partial Basement
Type Primary Wastewater System Type (circle one): I II (III) IV V VI	✓ Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1
3 long-term acceptance rate	480 Max gallons/day wastewater flow	1596 Absorption Area (sq ft)	9' Trench spacing (min. on centers)
yes Serviced by private well	1500 Gallon septic tank	532 Total trench length (ft)	24-28" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
4 Bedrooms in residence	1000 Gallon pump tank	12" Depth of stone	
Any surface waters present: yes	Type: WS IV, B	Minimum separation distance:	50' from 760 mark supply line per .1950(e)(3)
Site modifications required:	See reclassification form on file		
Additional Conditions: Supply line shall be installed in designated "10' sanitary sewer easement" between parcels 001-341-17 & 001-342-21 as specified in recorded deed & associated plat. Supply line shall be installed to meet all applicable requirements as specified in .1950 (e)(2) & (3), (c), (f), (g) & any other applicable rule.			
Repair Area System Type Type (circle one): I II III (IV) V VI	___ Conventional ✓ Prefabricated, permeable block panel system (PPBPS) ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1
798 Absorption Area (Sq ft) 266 Total Trench Length (Ft)	NA Depth of Stone Trench	8'-9' Trench spacing (min. on centers)	28" Maximum Trench Depth
For existing system, enter the year originally installed: NA			

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 Sewage, 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 Improvement permit is transferable.

Lisa B. Mialik, RS 11/15/95
DEHNR Authorized Agent Date

Lisa B. Mialik, RS 11/15/95
Owner/Agent Signature Date

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

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

IWWS:100195

PROPOSED PLOT PLAN

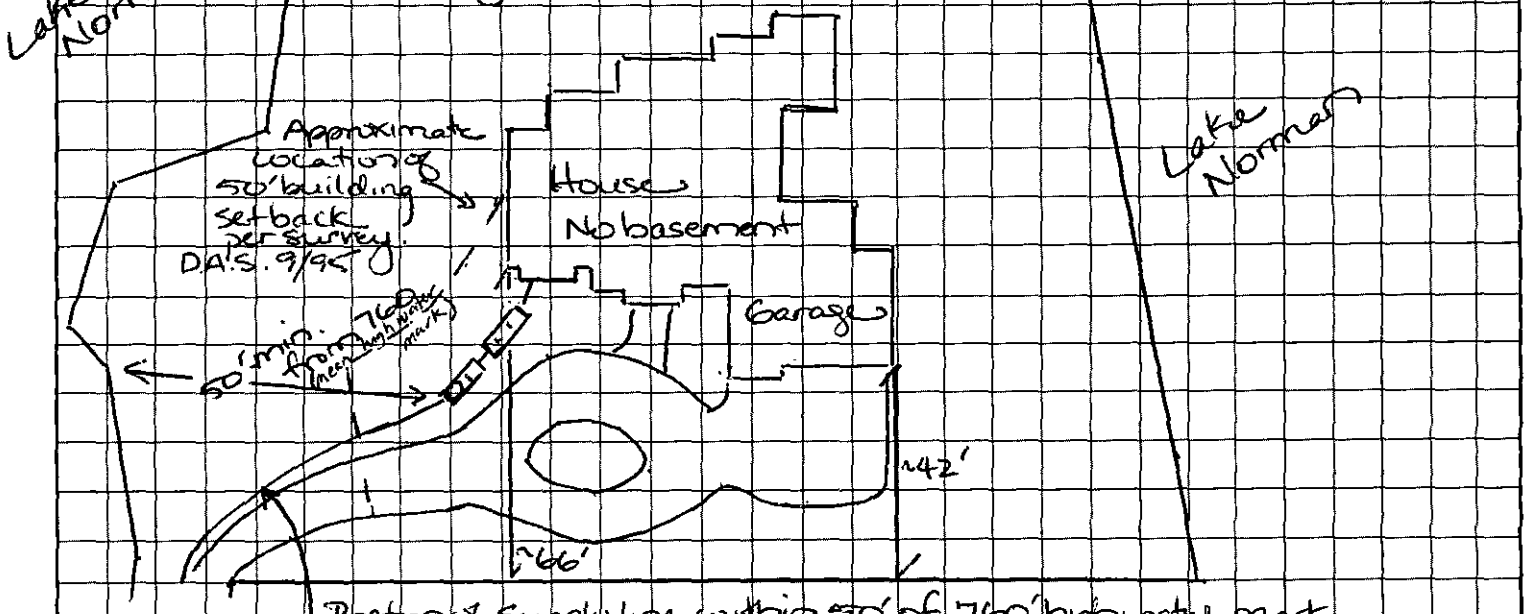
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 6637 A

TC: 001-341-17 House ST, PT
(TC 001-342-21 Drainfield)

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.

001-341-17 Lot 1
4 Bedroom house @
24901 Wellcraft Court
(Drainfield located @
TC 001-342-21)
See attached plat with
Supplyline Easement.



Portion of Supplyline within 50' of 760' high water mark must be constructed of ductile iron pipe with mechanical joints per .1950(e)(3)

Improvement Permit Plot Plan - Part ~~III~~ I of III

Install:
1500 gal Septic Tank
1000 gal Pump Tank
Septic Tank + Pump Tank must be at least 50' from the 760' high water mark.

- Keep well 100' from any part of septic system or at least the maximum feasible distance, however no less than 50'
- Do not park or drive over septic tank + pump tank.

Chet A Mullis
OWNER/AGENT SIGNATURE

DATE 11-15-95

APPROVAL DATE 11/15/95
Joab B. Mialik, RS

pg 2 of 5

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

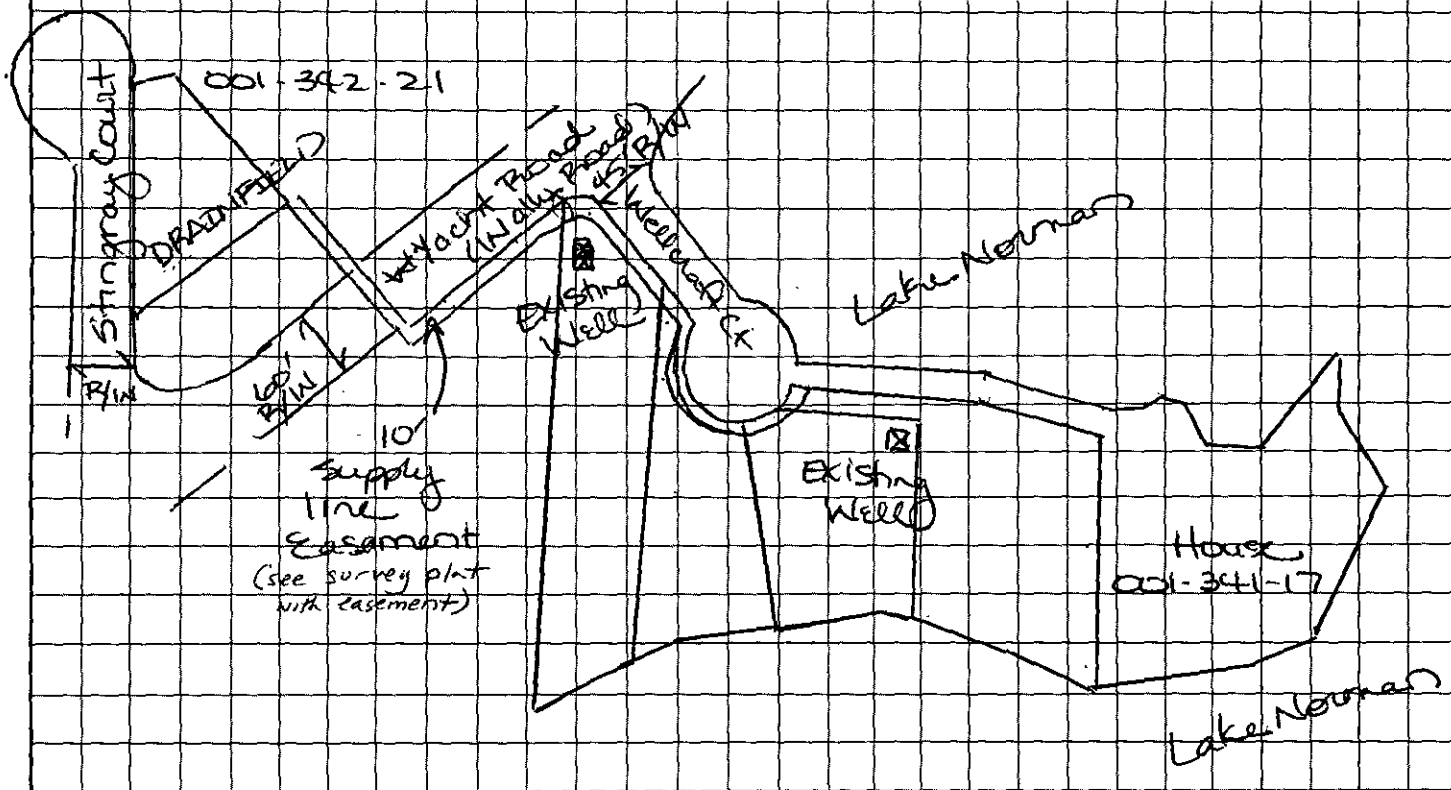
PROPOSED PLOT PLAN

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

FILE: 6637A

TC: 001-341-17 House
001-342-21 Drainfield

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.



Improvements Permit Plot Plan - Part II of III
See plat exhibit to Deed.

- Supply line shall be installed in designated "10' sanitary sewage easement" between parcels 001-341-17 AND 001-342-21 as described in attached plat recorded with Deed
- Supply line shall meet all setback & construction standards as specified in .1950(e)(1) & (3) & (6), 4, f, g, & any other applicable rule.
- Supply line shall be 50' from any well, unless constructed of similar leakproof pipe, such as ductile iron pipe with mechanical joints equivalent to water main standards, in which case the minimum setback may be reduced to 25'.
- Supply line shall be 50' from the 760' high water mark, unless constructed of similar leakproof ~~meet~~ pipe, such as ductile iron with mechanical joints equivalent to water main standards in which case the minimum setback may be reduced to 10'.
- Supply line must be at least 5' from any property line.

OWNER/AGENT SIGNATURE Chuck Q. Mullis

DATE 11-15-95

APPROVAL DATE 11/15/95

Lisa B. Malik RS

PG 3 of 5

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

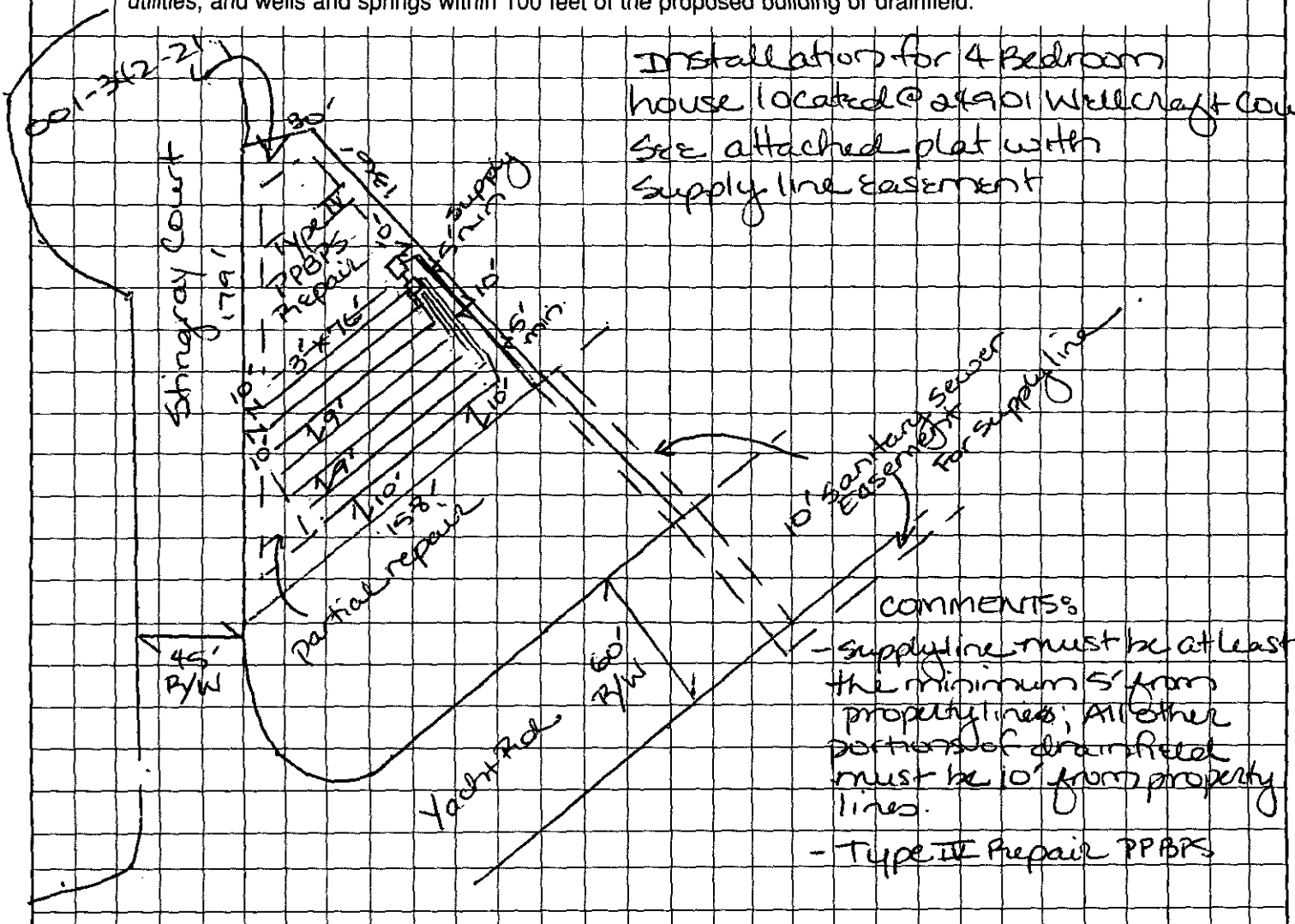
PROPOSED PLOT PLAN

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

FILE: 6637A

TC: 001-341-17 House
001-342-21 Drainfield

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.



Installation for 4 Bedroom house located @ 4901 Wellcraft Court. See attached plat with supply line easement

COMMENTS:
- supply line must be at least the minimum 5' from property lines; All other portions of drainfield must be 10' from property lines.
- Type IV Repair PPBPS

Improvement Permit Plot Plan - Part III of III

Install:
- 540 gal PCC "Master" Box
- D-Box
Schedule 40 PVC shall be utilized from D-Box to nitrification lines AND special levelers.
- 4 nitrification lines - 3' x 16' x 12" gravel each.
Trench Depth 24"

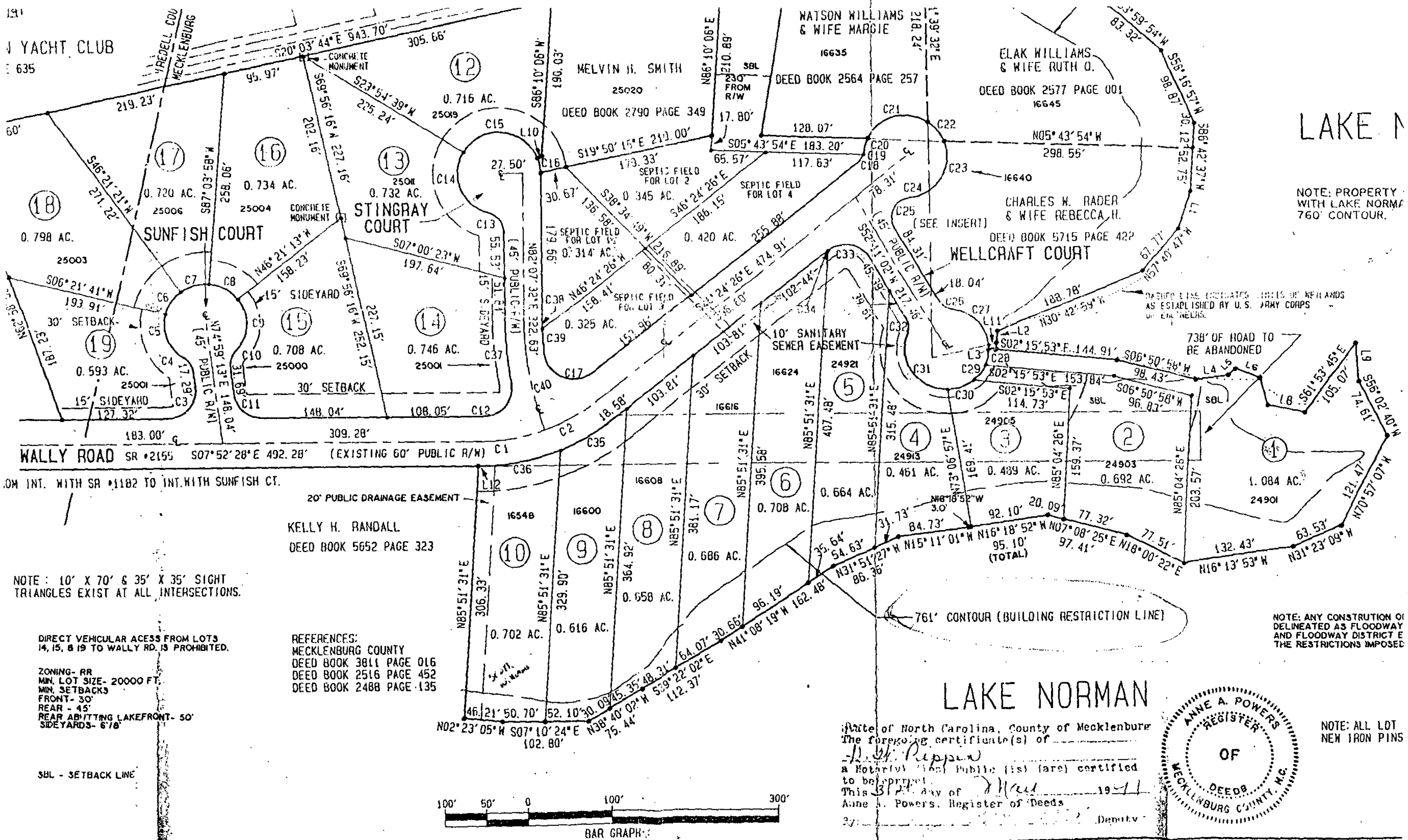
OWNER/AGENT SIGNATURE

DATE 11-15-95

APPROVAL DATE 11/15/95
Joan B. Mialik, RS

PG 4 of 5

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



NOTE: 10' X 70' & 35' X 35' SIGHT TRIANGLES EXIST AT ALL INTERSECTIONS.

DIRECT VEHICULAR ACESS FROM LOTS 14, 15, & 19 TO WALLY RD. IS PROHIBITED.

ZONING- RR
MIN. LOT SIZE- 20000 FT.
MIN. SETBACKS
FRONT- 30'
REAR - 45'
REAR ABUTTING LAKEFRONT- 50'
SIDEYARDS- 6'/8'

SBL - SETBACK LINE

REFERENCES:
MECKLENBURG COUNTY
DEED BOOK 3811 PAGE 016
DEED BOOK 2516 PAGE 452
DEED BOOK 2488 PAGE 135

NOTE: ANY CONSTRUTION O[...]
DELINEATED AS FLOODWAY [...]
AND FLOODWAY DISTRICT E[...]
THE RESTRICTIONS IMPOSED[...]

State of North Carolina, County of Mecklenburg
The foregoing certificate(s) of
D. H. Rippon
a Notary(ies) Public (is) (are) certified to be correct.
This 31st day of May 1991
Anne A. Powers, Register of Deeds
By Deputy

ANNE A. POWERS REGISTER OF DEEDS MECKLENBURG COUNTY, N.C.

NOTE: ALL LOT
NEW IRON PINS

GRAY, PATE & ASSOCIATES
ENGINEERS - SURVEYORS
4715 PARK ROAD, SUITE 105
CHARLOTTE, N.C. 28209

SCALE	DATE
1" = 100'	3/11/90
FLD. BK. PG. DATA COLLECTOR	DRAWN AND CALCULATED BY: GWP

OWNED AND DEVELOPED BY
ELAK WILLIAMS & WIFE RUTH O.
TOM WILLIAMS, ET AL.
OREAL WILLIAMS
CHARLES W. RADER

LEMLEY TOWNSHIP
MECKLENBURG

Improvement Permit
File #6637A
Pg 5 of 5

Law Offices of
HOMESLEY, JONES, GAINES & FIELDS

T. C. Homesley, Jr.
Walter H. Jones, Jr.
Edmund L. Gaines
T. Eric Fields
Clifton W. Homesley
L. Ragan Dudley

Offices:
Mooresville
Statesville

TELEFAX COVER SHEET

Date: *November 2, 1995* *Fax No:* *336-6894*

To: *Lisa Mialak*
Mecklenburg County

From: *Selena J. Sawyer, Real Estate Assistant*

HOMESLEY, JONES, GAINES & FIELDS
P.O. BOX 1235
385-387 NORTH MAIN STREET
MOORESVILLE, NC 28115
TELEPHONE: (704)664-1127
FAX: (704)664-6596

RE: *Chester Adams Michael, III*
Lot 1, Williams Subdivision

TOTAL PAGES SENT INCLUDING THIS COVER SHEET: 3

****
IF YOU DO NOT RECEIVE ALL PAGES INDICATED ABOVE, PLEASE CONTACT **SELENA** *AT OUR OFFICE AS SOON AS POSSIBLE. THANK YOU!*
****

REMARKS: At the request of Mr. Michael, I am faxing herewith a copy of his deed for Lot 1, Williams Subdivision which also deeds to him the Septic Field for Lot 1 and an easement from his lot to the septic field, all as shown on the record plat. We recorded this deed on October 30, 1995. Inasmuch as it usually takes about six weeks to get the original back from the Register of Deeds, please accept this copy and our certification that the deed was recorded as proof of Mr. Michael's ownership. Please call me at the above number if you have any questions. Thank you in advance for your assistance.

This information contained in this facsimile message is attorney privileged and confidential information intended only for the use of the individual or entity named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication in error, please notify us immediately by telephone and return the original message to HOMESLEY, JONES, GAINES & FIELDS, P.O. Box 1235, Mooresville, NC 28115 via U.S. Postal Service. Thank you.

Recorded:
Date: 10-20-95
Time:
Book: 8344
Page: 458

Recording Time, Book and Page

Sales Price: $230,000.00

Revenue Stamps: $460.00

Excise Tax $

Tax Lot No. Parcel Identifier No. 001-341-17
Verified by _____ County on the _____ day of _____, 19___
by _____

Mail after recording to Homesley, Jones, Gaines & Fields, P. O. Box 1235, Mooresville, NC 28115
This instrument was prepared by Clifton W. Homesley, Attorney at Law

Brief Description for the Index: Lot 1, Williams Subdivision

NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED made this October 13, 1995, by and between

GRANTOR	GRANTEE
ELAK D. WILLIAMS and wife, RUTH O. WILLIAMS (conveying an undivided one-fourth interest); TOM W. WILLIAMS, Single, (conveying an undivided one-fourth interest); RACHEL WILLIAMS, Single, (conveying an undivided one-fourth interest) and REBECCA W. HOWARD, Single, (conveying an undivided one-fourth interest)	CHESTER ADAMS MICHAEL, III, and wife, TERESA TUTTLE MICHAEL Whose Address Is: P.O. Box 5257 Winston-Salem, NC 27113

Enter in appropriate block for each party: name, address, and, if appropriate, character of entity, e.g., corporation or partnership.

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in the City of _____, **Lemley** Township, **Mecklenburg** County, North Carolina and more particularly described as follows:

BEING all of Lot 1 of WILLIAMS SUBDIVISION as the same is platted, planned and recorded on a Plat recorded in Map Book 24, at Page 353, of the Mecklenburg County Registry.

Also conveyed herewith is that piece of property described on the above-referenced plat as "Septic Field of Lot 1" as well as a sanitary sewer easement leading from the Northernmost end of Lot 1 around Wellcraft Court and across Wally Road as shown on the plat.

N.C. Bar Assoc. Form No. 3 © 1977
Printed by Agreement with the N.C. Bar Assoc. #003

The property hereinabove described was acquired by Grantor by instrument recorded in Book 6635, Page 442.

A map showing the above described property is recorded in Plat Book 24, Page 353.

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple.

And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever except for the exceptions hereinafter stated.

Title to the property hereinabove described is subject to the following exceptions:

1. ANY AND ALL EASEMENTS, RIGHTS OF WAY AND RESTRICTIONS OF RECORD.
2. ANY AND ALL ZONING AND PLANNING ORDINANCES.
3. ANY DISCREPANCIES AS AN ACCURATE SURVEY OF THE PREMISES MIGHT REVEAL.

IN WITNESS WHEREOF, the Grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, the day and year first above written.

_____ (Corporate Name)

By: _____

_____ President

ATTEST:

_____

_____ Secretary (Corporate Seal)

Elak D Williams (SEAL)
Elak D. Williams

Ruth O. Williams (SEAL)
Ruth O. Williams

Tom W. Williams (SEAL)
Tom W. Williams

Rachel Williams (SEAL)
Rachel Williams

Rebecca W Howard by Alan C Howard her attorney in fact (SEAL)
Rebecca W. Howard by Alan C. Howard, her attorney-in-fact

SEAL-STAMP NORTH CAROLINA, Iredell County.
I, a Notary Public of the County and State aforesaid, certify that Elak D. Williams and wife, Ruth O. Williams, Grantor, personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official stamp or seal, this 6th day of October, 1995.

My commission expires: 3/18/96

Silvia A Sanders Notary Public

SEAL-STAMP NORTH CAROLINA, Iredell County.
I, a Notary Public of the County and State aforesaid, certify that Tom W. Williams, Grantor, personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official stamp or seal, this 24th day of October, 1995.

My commission expires: 3/18/96

Silvia A Sanders Notary Public

SEAL-STAMP NORTH CAROLINA, Iredell County.
I, a Notary Public of the County and State aforesaid, certify that Rachel Williams, Grantor, personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official stamp or seal, this 24th day of October, 1995.

My commission expires: [illegible]

[illegible] Notary Public

SEAL-STAMP NORTH CAROLINA, Iredell County.

I, Selena J. Sawyer, a Notary Public of said County and State, do hereby certify that ALAN C. HOWARD, Attorney-in-Fact for REBECCA W. HOWARD, personally appeared before me this day and being by me duly sworn, says that he executed the foregoing and annexed instrument for and in behalf of REBECCA W. HOWARD and that his authority to execute and acknowledge said instrument is contained in an instrument duly executed, acknowledged and recorded in the office of the Register of Deeds for Mecklenburg County, North Carolina, on the 18th day of September, 1991, and that said instrument was executed under and by virtue of the authority given by said instrument granting him power of attorney; that the said ALAN C. HOWARD acknowledged the due execution of the foregoing and annexed instrument for the purposes therein expressed for and in behalf of the said REBECCA W. HOWARD. WITNESS my hand and official seal, this 27th day of October, 1995.

My commission expires: 3/18/96

Selena J. Sawyer Notary Public

The foregoing Certificate(s) of _____

_____

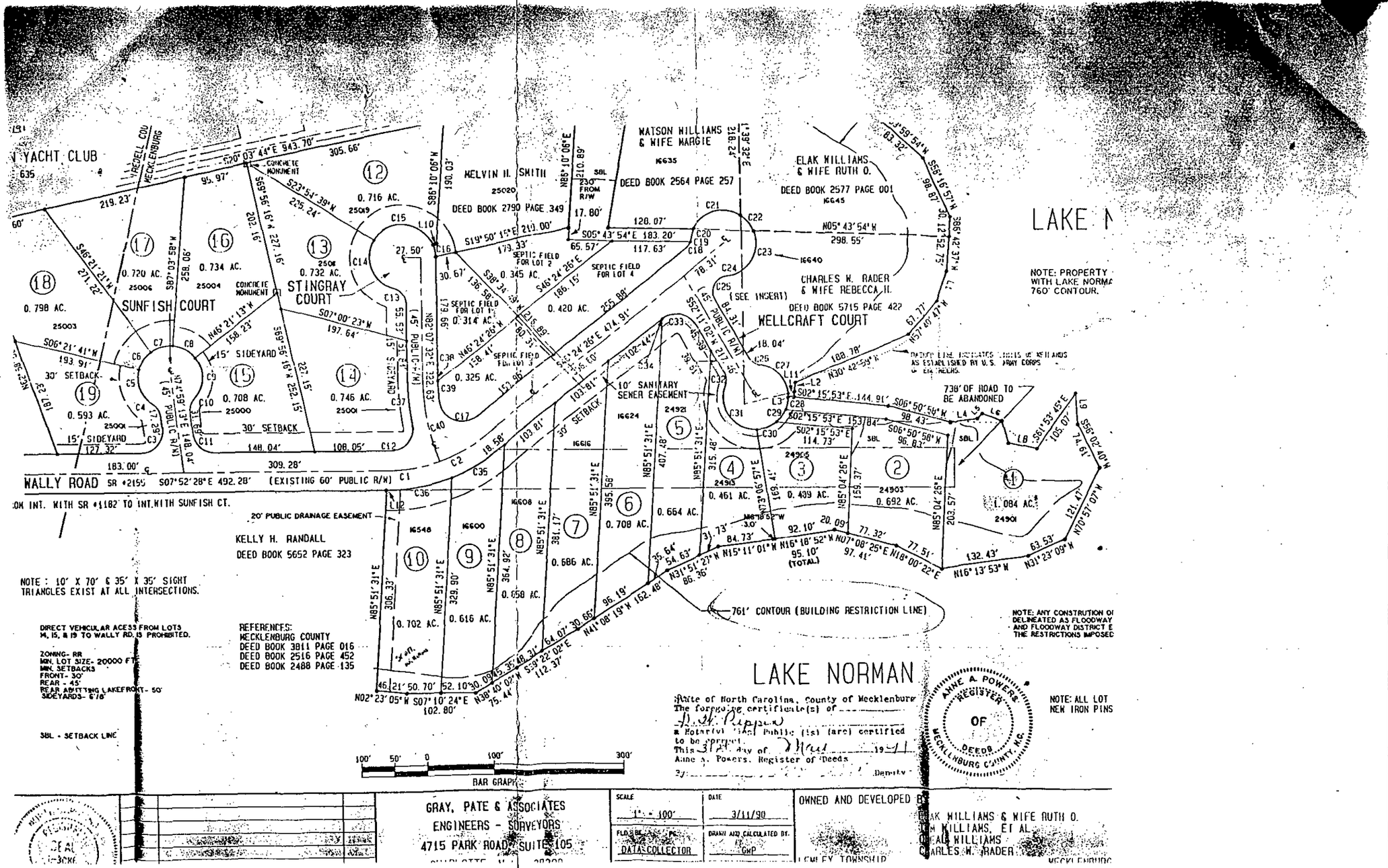
_____

is/are certified to be correct. This instrument and this certificate are duly registered at the date and in the Book and Page shown on the first page hereof.

_____ REGISTER OF DEEDS FOR _____ COUNTY

By _____ Deputy/Assistant-Register of Deeds.

N.C. Bar Assoc. Form No. 3 © 1977
Printed by Agreement with the N.C. Bar Assoc. #003

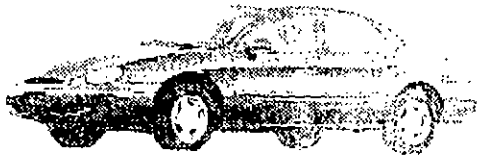

V YACHT CLUB
635
HEDELL COU
MECKLENBURG
N70° 03' 44"E 943.70'
305.66'
95.97'
219.23'
60'
S46° 21' 21"W
271.22'
S87° 03' 58"W
258.06'
S69° 56' 16"W 227.16'
202.16'
S23° 54' 39"W
225.24'
18
0.798 AC.
25003
17
0.720 AC.
25006
16
0.734 AC.
25004
CONCRETE MONUMENT
13
25008
0.732 AC.
25019
12
0.716 AC.
25019
S86° 10' 00"E
190.03'
KELVIN H. SMITH
25020
DEED BOOK 2790 PAGE 349
N86° 10' 00"E
210.89'
SBL
230' FROM R/W
17.80'
S19° 50' 15"E 213.00'
179.33'
SEPTIC FIELD FOR LOT 2
0.345 AC.
SEPTIC FIELD FOR LOT 4
0.420 AC.
SEPTIC FIELD FOR LOT 1
0.314 AC.
SEPTIC FIELD FOR LOT 3
0.325 AC.
WATSON WILLIAMS & WIFE MARGIE
16635
DEED BOOK 2564 PAGE 257
S05° 43' 54"E 183.20'
117.63'
65.57'
120.07'
ELAK WILLIAMS & WIFE RUTH O.
DEED BOOK 2577 PAGE 001
16645
N05° 43' 54"W
298.55'
CHARLES W. RADER & WIFE REBECCA H.
DEED BOOK 5715 PAGE 422
16640
(SEE INSERT)
WELLCRAFT COURT
SUNFISH COURT
STINGRAY COURT
CONCRETE MONUMENT
N46° 21' 13"W
158.23'
S07° 00' 23"W
197.64'
S06° 21' 41"W
193.91'
30' SETBACK
15' SIDEYARD
127.32'
19
0.593 AC.
25001
15
0.708 AC.
25000
14
0.746 AC.
25001
15' SIDEYARD
30' SETBACK
148.04'
108.05'
183.00'
309.28'
WALLY ROAD SR #2155 S07°52'28"E 492.28' (EXISTING 60' PUBLIC R/W)
ON INT. WITH SR #1182 TO INT. WITH SUNFISH CT.
N82° 07' 32"E 322.63'
179.66'
55.57'
(45' PUBLIC R/W)
10' SANITARY SEWER EASEMENT
16616
16624
24921
5
0.664 AC.
4
24905
0.461 AC.
3
0.439 AC.
2
24903
0.692 AC.
1
1.084 AC.
24901
738' OF ROAD TO BE ABANDONED
S02° 15' 53"E 144.91'
S06° 50' 56"W
98.43'
S02° 15' 53"E 153.84'
S06° 50' 56"W
96.83'
S02° 15' 53"E
114.73'
N85° 51' 31"E
407.48'
315.48'
N85° 04' 26"E
159.37'
203.57'
N73° 06' 57"E
169.41'
N85° 51' 31"E
395.58'
6
0.708 AC.
7
0.686 AC.
8
0.650 AC.
9
10
0.702 AC.
0.616 AC.
N85° 51' 31"E
306.33'
329.90'
364.92'
381.17'
20' PUBLIC DRAINAGE EASEMENT
KELLY H. RANDALL
DEED BOOK 5652 PAGE 323
16548
16600
16608
N31° 51' 27"W
86.36'
N15° 11' 01"W
95.10' (TOTAL)
N16° 18' 52"W
92.10'
N07° 08' 25"E
97.41'
N18° 00' 22"E
77.51'
N16° 13' 53"W
132.43'
N31° 23' 09"W
63.53'
N70° 57' 07"W
121.47'
N05° 56' 02"E
105.07'
761' CONTOUR (BUILDING RESTRICTION LINE)
N41° 08' 19"W 152.48'
S39° 22' 02"E
112.37'
96.19'
64.07'
30.66'
N02° 23' 05"W 102.80'
S07° 10' 24"E
N38° 40' 02"W
75.44'
46.21' 50.70' 52.10' 30.09' 35.46' 31'
NOTE: 10' X 70' & 35' X 35' SIGHT TRIANGLES EXIST AT ALL INTERSECTIONS.
DIRECT VEHICULAR ACESS FROM LOTS 14, 15, & 19 TO WALLY RD. IS PROHIBITED.
ZONING- RR
MIN. LOT SIZE- 20000 FT.
MIN. SETBACKS
FRONT- 30'
REAR - 45'
REAR ABUTTING LAKEFRONT- 50'
SIDEYARDS- 6'/8'
SBL - SETBACK LINE
REFERENCES:
MECKLENBURG COUNTY
DEED BOOK 3811 PAGE 016
DEED BOOK 2516 PAGE 452
DEED BOOK 2488 PAGE 135
100' 50' 0 100' 300'
BAR GRAPH
LAKE N
NOTE: PROPERTY WITH LAKE NORMA 760' CONTOUR.
PATTERN LINE INDICATES LIMITS OF WETLANDS AS ESTABLISHED BY U.S. ARMY CORPS OF ENGINEERS.
NOTE: ANY CONSTRUTION OF DELINEATED AS FLOODWAY AND FLOODWAY DISTRICT E THE RESTRICTIONS IMPOSED
NOTE: ALL LOT NEW IRON PINS
LAKE NORMAN
State of North Carolina, County of Mecklenburg
The foregoing certificate(s) of
a Notary(ies) Public (is) (are) certified to be correct.
This 31st day of March 1991
Anne A. Powers, Register of Deeds
By: Deputy
ANNE A. POWERS REGISTER OF DEEDS MECKLENBURG COUNTY N.C.
SEAL
GRAY, PATE & ASSOCIATES
ENGINEERS - SURVEYORS
4715 PARK ROAD, SUITE 105
SCALE 1" = 100'
DATE 3/11/90
FIELD BK. - PG. DATA COLLECTOR
DRAWN AND CALCULATED BY GWP
OWNED AND DEVELOPED BY
ELAK WILLIAMS & WIFE RUTH O.
KEN WILLIAMS, ET AL
ELAK WILLIAMS
CHARLES W. RADER
LEMLEY TOWNSHIP
MECKLENBURG

PARKWAY Ford

PARKWAY FORD, INC.

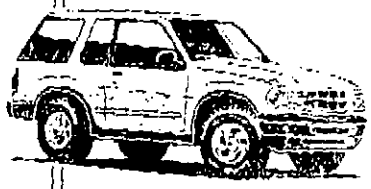
Phone (910) 724-5921 2104 Peters Creek Parkway

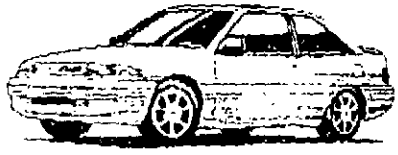
WINSTON-SALEM, NORTH CAROLINA 27127-3713



FAX #910-631-5705

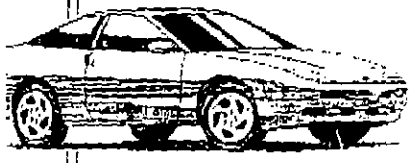
FAX TRANSMITTAL FORM

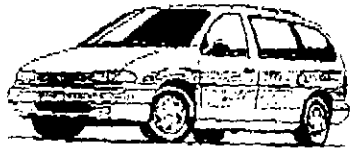




FAX #:

DATE: 11/10/95

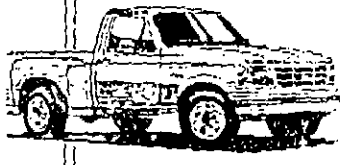


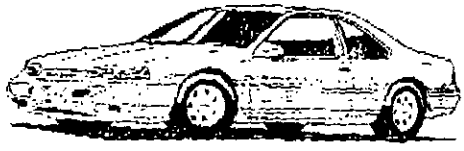


TO: Lisa Mialik

FROM: Junie Michael

SUBJECT:



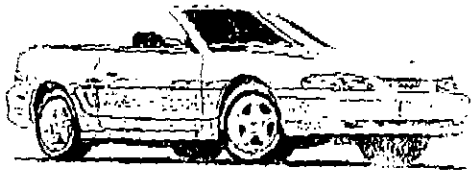


 # OF PAGES
(Including Cover Sheet) 6



FORD

Motorcraft
EXCEEDS THE NEED



Red Carpet Lease

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

OWNER'S ACKNOWLEDGMENT OF MODIFIED/ALTERNATIVE REPLACEMENT SYSTEM REQUIREMENT

Site Address: 24901 Wellcraft Court, Mooresville, N.C. 28115

File Number: 6637A

Parcel Number: ~~00134201/34106~~ 001-341-17 / 001-342-21

Owner/Agent Name: Chester Adams Michael III/Teresa Tuttle Michael
(Please print)

Date: November 9, 1995 Number of Bedrooms: 4

Receipt of the plan and specifications for a conventional system of sewage disposal for the above property is hereby acknowledged. Upon receipt of the information, a review was made of the material on file and a site evaluation was conducted. The plan was then reviewed in conjunction with provisions of 15A NCAC 18A .1900 - "Sewage Treatment and Disposal Systems." The plan as submitted is disapproved because there is not sufficient available space for a repair area for a conventional replacement system.

This site may be developed if the repair area is found to be acceptable for either a modified system (Rule .1956) or an alternative system (Rule .1957) for the replacement system as allowed by the following Rule 15A NCAC 18A .1945(b).

> (b) Sites shall have sufficient available space for a repair area separate from the area determined in Paragraph (a) of this Rule. The repair area shall be based upon the area of the nitrification field required to accommodate the installation of a replacement system as specified in Rule .1955, .1956, or .1957 of this Section. Prior to issuance of the initial Improvement Permit for a site, the local health department shall designate on the permit the original system layout, the repair area, and the type of replacement system.

Please be advised that you have the right of an informal review by this Department and the right of appeal under G.S. 130A-335(g) and 130A-24, which appeal can be held in Mecklenburg County.

By signing this form, and signing and recording in the Mecklenburg County Register of Deeds Office the attached reclassification form entitled, **WASTEWATER TREATMENT AND DISPOSAL SYSTEM DESIGN AGREEMENT: 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c)**, you, the property owner, understand and acknowledge your option to develop this site initially with a

conventional sewage system and when needed, subsequently to repair or replace said system with a modified or alternative system as described in Rules .1956 "Modification to Septic Tank Systems," or .1957(a), (b), or (c) "Design Criteria for Design of Alternative Sewage Systems." The completed reclassification form must be approved by this office before it can be recorded.

In addition, you the property owner, also understand that the following conditions will apply:

- Any changes on the property may make the Improvement Permit null and void and may make the Improvement Permit subject to revocation.

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement system.

Environmental Health Specialist _____ Date _____

I have reviewed this document and understand its provisions and implications concerning the issuance of the Improvement Permit for the above-referenced site.

Property Owner Signature _____ Date 11-9-95

_____ 11-9-95

700 North Tryon Street, Suite 211, Charlotte, North Carolina 28202,
(704) 336-5102

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

WASTEWATER TREATMENT AND DISPOSAL SYSTEM DESIGN AGREEMENT: 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c)

FILE # 6637A
PARCEL # ~~09134201/34106~~ 001-341-17 / 001-342-21

The undersigned, Chester Adams Michael III/Teresa Tuttle Michael, owner of property located at 24901 Wellcraft Court, Mooresville, NC 28115 (the "site") and described in an instrument recorded in Book 24 at Page 253, Mecklenburg Public Registry, hereby acknowledges that the undersigned applied to the Mecklenburg County Health Department (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 15A NCAC 18A .1900 et seq.; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested 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 is allowed by the rules; 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 the responsibility of the designer, owner, developer, installer, or user of the system, as applicable, 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 acknowledges that the following conditions will apply to the site:

- Any changes on the property may make the Improvement Permit Null and void and may make the Improvement Permit subject to revocation.

This instrument was prepared by: Chester Adams Michael III
Mail after recording to: 700 North Tryon Street, Suite 211
Charlotte, North Carolina 28202

RBCWM:24751_1/8-30-95

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement 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.

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.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, this 9th day of November, 1995.

_____ (Corporate Name)

By: _____

_____ President

ATTEST:

_____

_____ Secretary

(Corporate Seal)

Chester A. Michael III (SEAL)

Teresa Tuttle Michael (SEAL)

_____ (SEAL)

_____ (SEAL)

STATE OF NORTH CAROLINA
COUNTY OF Forsyth

I, Bridget A. Brogan, a Notary Public for said County and State, do hereby certify that Chester A. Michael III and Teresa Tuttle Michael personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 10 day of November, 1995.

Bridget A. Brogan
Notary Public

My Commission Expires:
8-25-96

OFFICIAL SEAL
NOTARY PUBLIC, NORTH CAROLINA
COUNTY OF FORSYTH
My Commission Expires August 25, 1996

RBCWM:24751_1/8-30-95

To: Junie
From: Buster
Call w/ Any Questions
9-25-95

Mecklenburg County Health Department

May 18th, 1990

William Family Heirs
Rt. 6 Box 742
Mooresville, NC 28115

RE: Property located at Wally Rd.
FILE: 6637A
PARCEL: 00134201/34106

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 17763) 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,

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

Enclosure

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 17763

File: Action 1
Parcel: ☐ PC

Location:

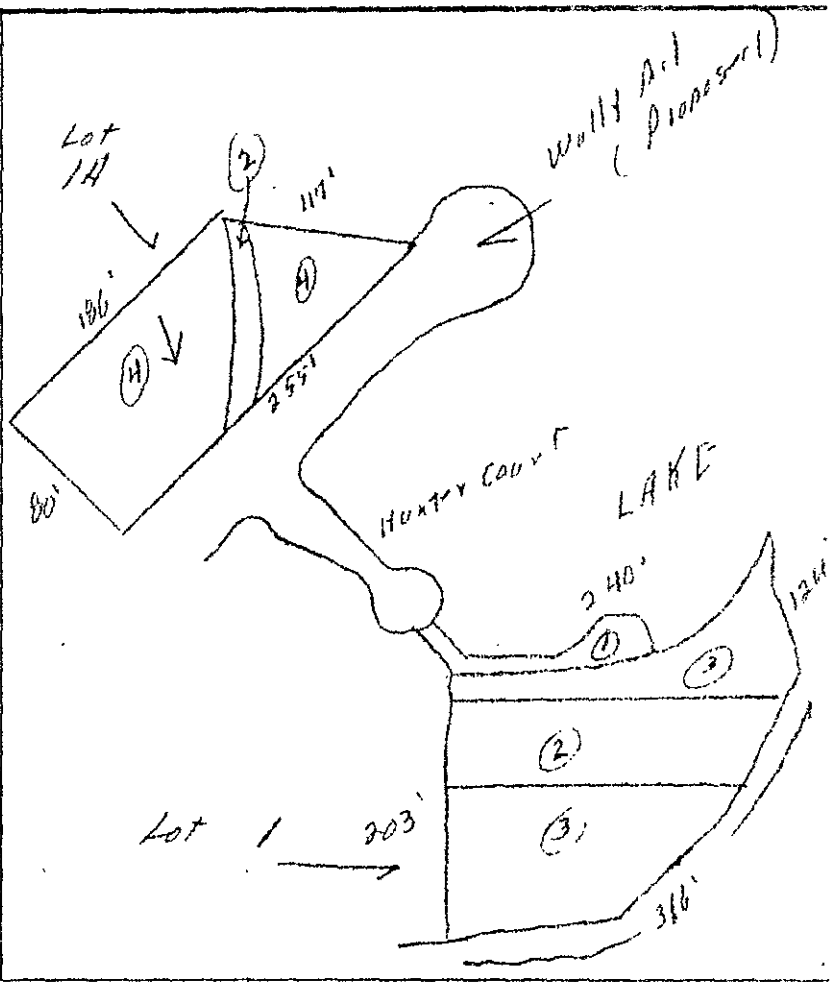
Subdivision:

Lot: 12/A Block: Acres: 1.5

Owner:
Address:

Comments: 100% Repair - Pump area (3) subject to seasonal water shallower than 36", system moved west left pump

Described by:
Date: William A. Marlin 5-16-90



*** 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) Drainageway	S PS U —	(S) PS U 2-9%	(S) PS U 2-6%	S PS U	S PS U
Texture	S — PS U	S — PS U	S (PS) U Clay	S (PS) U Clay	S PS U	S PS U
Structure	S — PS U	S — PS U	S (PS) U Blocky	S (PS) U Blocky	S PS U	S PS U
Drainage	S — PS U	S — PS U	S PS (U) see Note	S (PS) U 736" To water	S PS U	S PS U
Depth	S — PS U	S PS U	S (PS) U 736"	S (PS) U 40"+	S PS U	S PS U
Restrictive Horizons	S PS U —	S PS U —	S (PS) U 736"	S (PS) U 736"	S PS U	S PS U
Available Space	S PS U —	S PS U	S PS (U) Restricted	S (PS) U limited	S PS U	S PS U
Other (specify)	S PS U	S PS (U) Old Road	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	Drainageway	Old Road	III Cecil-Lilla	III Cecil-Lilla		
Area Classification	S PS (U)	S PS (U)	S PS (U)	S (PS) U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 66371A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: Meck Neck - end of Wally Rd.

② SUBDIVISION: Williams ③ LOT: 1 ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: _____ PAGE NO.: _____ PARCEL NO.: 001-342-01
001-341-06

⑥ DEED REFERENCE: BOOK NO.: _____ PAGE NO.: _____

OWNER

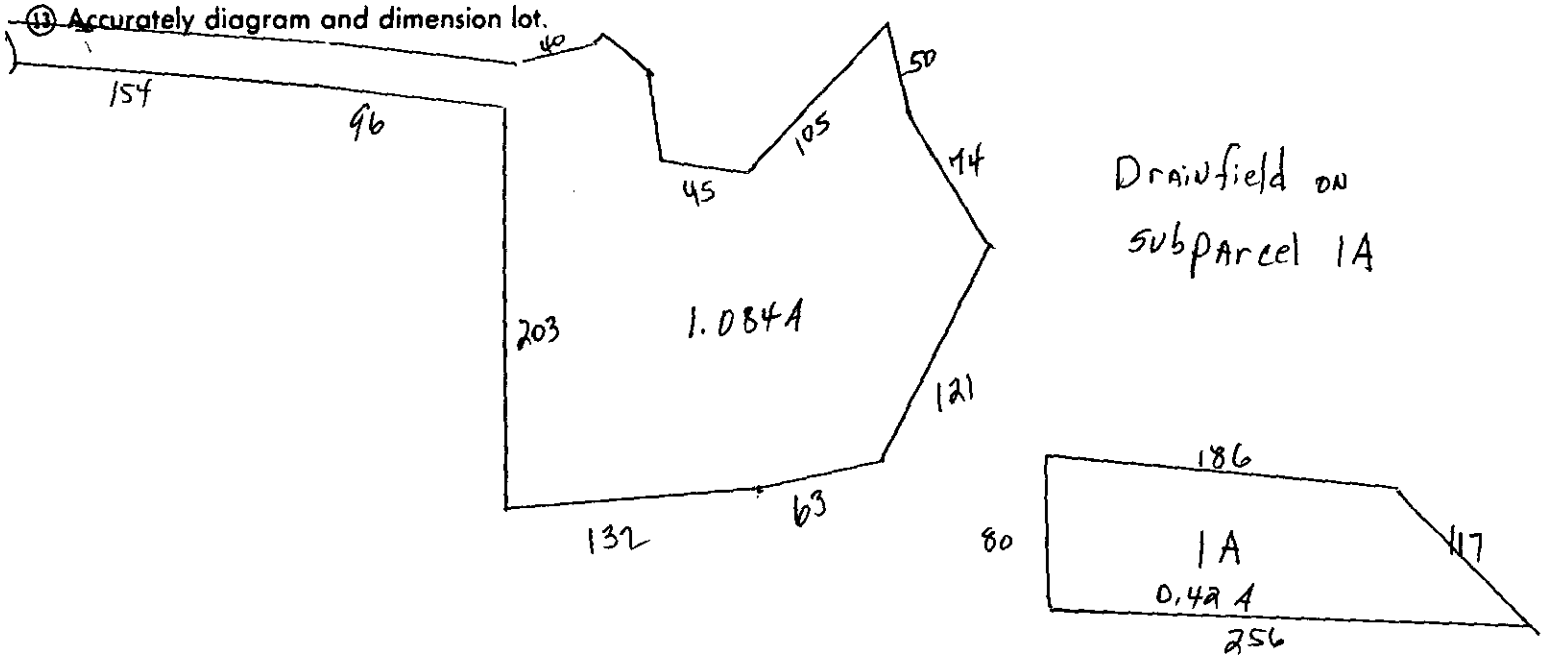
⑦ NAME: Williams Family Heirs
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: Rt. 6 Box 752

⑨ CITY: Mooresville ⑩ STATE: N.C. ⑪ ZIP: 28115

⑫ PHONE: (WORK) 663-1563 (HOME) _____

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

Signed: Tony C. Gaskin, CPSS

Date: 4-2-90

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

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER'S COPY

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 4-4-90

Name/Company: Torey JACOBS

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Soil Investigation
F&O 6637A → through
6655A inclusive

MECKLENBURG COUNTY 19 F&S
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

APR 4 1990

Fee: $ 760.00

Ck#1085
$760.00

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

Mecklenburg County
Health Department

May 18th, 1990

Send to:
Ruth Williams
Rt. 6, Box 742
Mooresville, NC 28115

William Family Heirs
Rt. 6 Box 742
Mooresville, NC 28115

RE: Property located at Wally Rd.
FILE: 6637A
PARCEL: 00134201/34106

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 17763) 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,

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

Enclosure

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 17763

File: 6637A Action 1

Parcel: 00134201/34106 ☐ PC

Location: Wally Rd.

Subdivision:

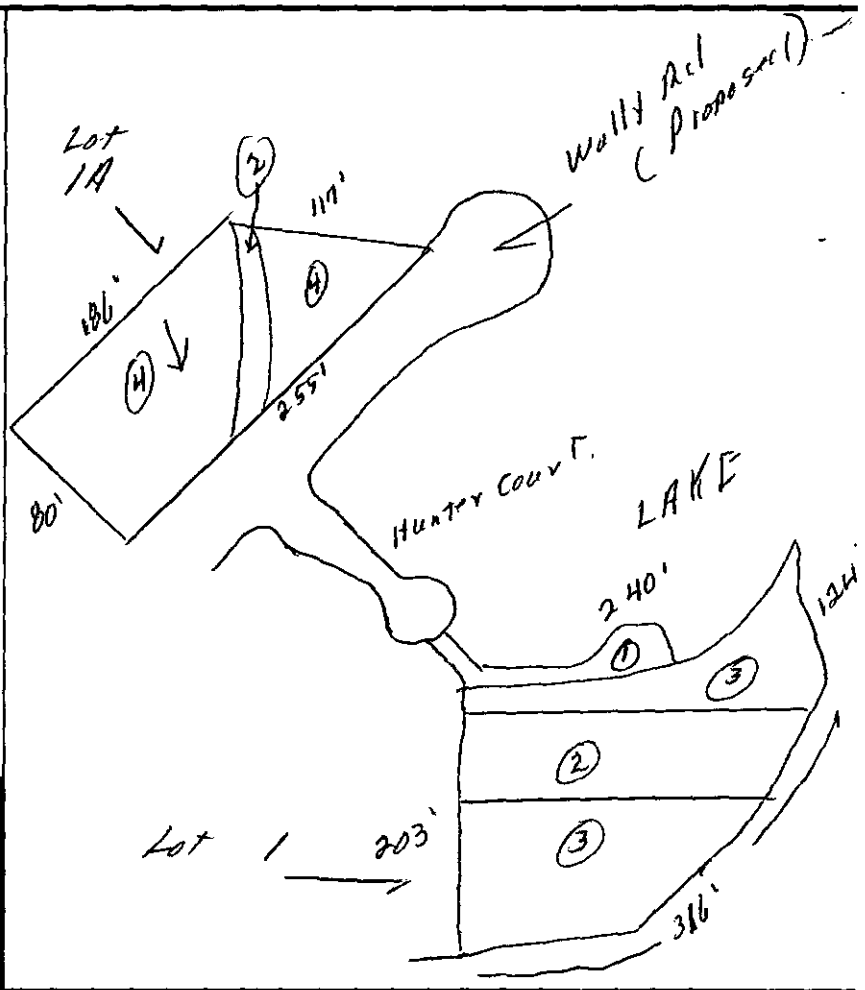
Lot: 12/A Block: Acres: 1.5

Owner: William Family Heirs
Address: Rt. 6 Box 752
Mooresville, NC 28115

Comments: 100% Repair - pump over (3) subject to seasonal water shallower than 36", system would need lift pump

Described by:

Date: William A. Marlin 5-16-90



***** 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) Drainageway	S PS U —	(S) PS U 2-8%	(S) PS U 2-6%	S PS U	S PS U
Texture	S PS U —	S PS U —	S (PS) U clay	S (PS) U Clay	S PS U	S PS U
Structure	S PS U —	S PS U —	S (PS) U Blocky	S (PS) U Blocky	S PS U	S PS U
Drainage	S PS U —	S PS U —	S PS (U) see Note	S (PS) U 736" To water	S PS U	S PS U
Depth	S PS U	S PS U —	S (PS) U 736"	S (PS) U 40"+	S PS U	S PS U
Restrictive Horizons	S PS U —	S PS U —	S (PS) U 736"	S (PS) U 736"	S PS U	S PS U
Available Space	S PS U —	S PS U	S PS (U) Restricted	S (PS) U limited	S PS U	S PS U
Other (specify)	S PS U	S PS (U) Old Road	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	Drainageway	Old Road	IV Cecil-Lilla	VI Cecil-Lilla		
Area Classification	S PS (U)	S PS (U)	S PS (U)	S (PS) U	S PS U	S PS U

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 17763

File:

Action

Parcel:

☐ PC

Location:

Subdivision:

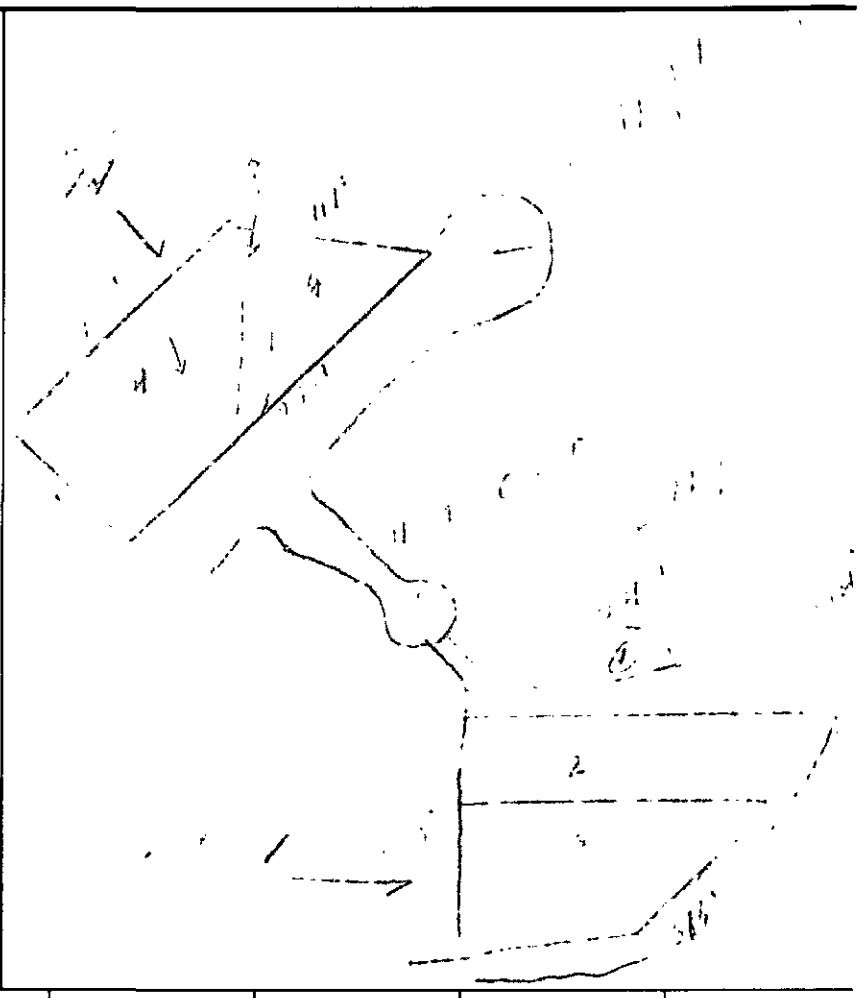
Lot: Block: Acres:

Owner:
Address:

Comments:

Described by:

Date:



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Topography	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Texture	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S PS U	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						
Area Classification	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 6637 A

TC: _____

☐ PC ☐ REPT

195

150 ¢ 210

JOB LOCATION

① ADDRESS: Hock Nock west of Wally Rd.

② SUBDIVISION: Williams ③ LOT: 1 ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: _____ PAGE NO.: _____ PARCEL NO.: 001-342-01 001-341-66

⑥ DEED REFERENCE: BOOK NO.: _____ PAGE NO.: _____

OWNER

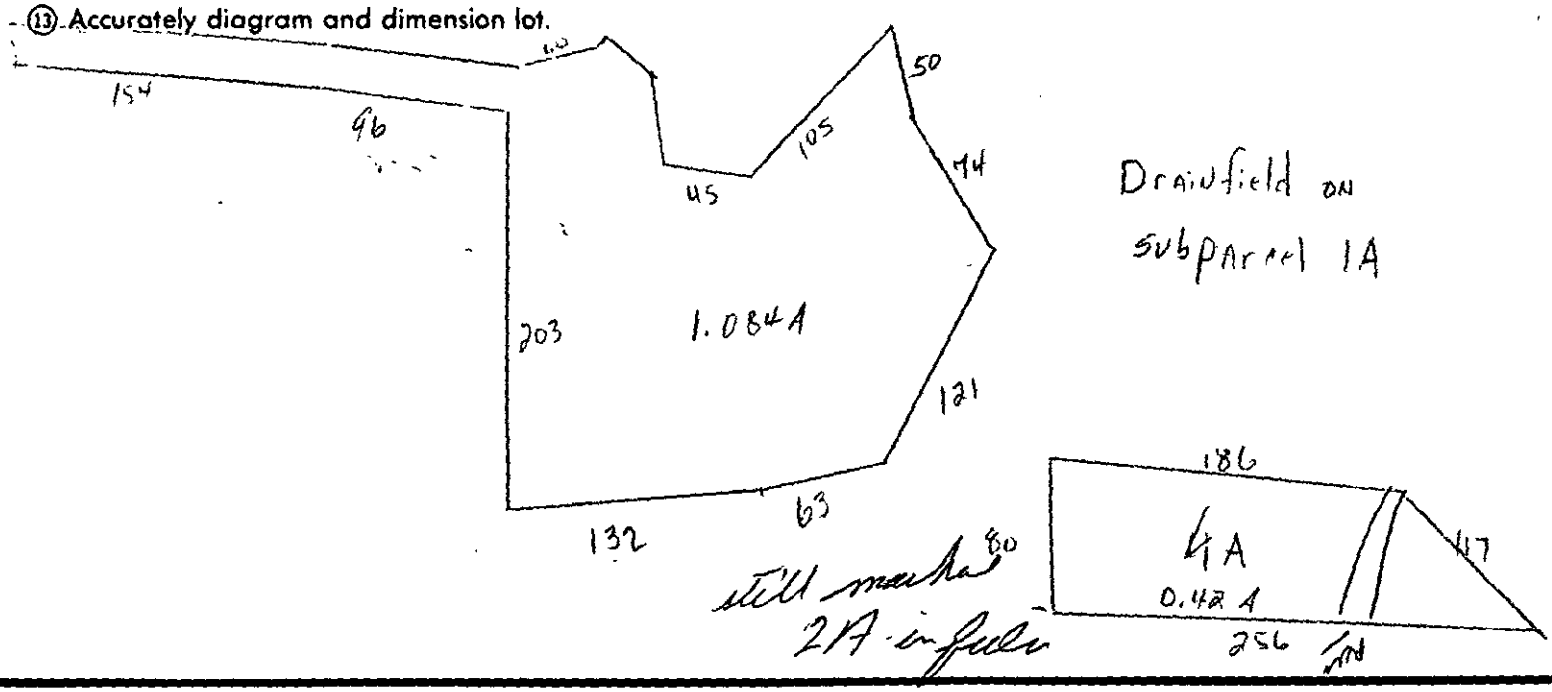
⑦ NAME: Williams Family Heirs
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: RT 6 Box 152

⑨ CITY: Mooresville ⑩ STATE: N.C. ⑪ ZIP: 3[illegible]

⑫ PHONE: (WORK) 662 1[illegible] (HOME) _____

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

Signed: Tawn Cochran, CPSS

Date: 4-6-90

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

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER'S COPY