

921 BREEZEWOOD DR

02957117

1/3/2008

duponbj

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

SOIL AND SITE REPORT FOR A GROUND ABSORPTION WASTEWATER SYSTEM FOR ANGELA GRANT

by

JOE LYNN, REGIONAL SOIL SPECIALIST
ON-SITE WASTEWATER SECTION
DIVISION OF ENVIRONMENTAL HEALTH

Submitted to:

BILL MARLIN, SOIL SCIENTIST
MECKLENBURG COUNTY HEALTH DEPARTMENT

OCTOBER 31, 1995

Joe Lynn
Regional Soil Specialist

CLAY MINERALOGY: 0 to 24 inches to expansive clay

SOIL DEPTH: 17 to 24 inches to saprolite, rock, or parent material

SAPROLITE: 17 to 24 inches to unsuitable saprolite

SOIL WETNESS: 18 inches to chromas of 2 or less

RESTRICTIVE HORIZONS: None

AREA of S or PS SOIL: None found

CONCLUSIONS

This site is Unsuitable for the installation of a conventional ground absorption wastewater system due to:

1. Unsuitable Topography and Landscape Position — Section .1940
   Drainage features (gullies) and depressions
2. Unsuitable Soil Characteristics — Section .1941
   Expansive clay mineralogy
3. Unsuitable Soil Wetness — Section .1942
   Chromas of 2 or less from Munsell Color Book
4. Insufficient Soil Depth — Section .1943
   Soil depths of less than 36 inches
5. Insufficient Available Space — Section .1945
   Not enough area for an initial sewage system and a repair if needed.

The site is Unsuitable under Rule .1956 Modifications to Septic Tank Systems:

1. Shallow conventional systems — NO
2. Large Diameter Pipe systems — NO
3. Prefabricated Porous Block Panel systems — NO
4. Drainage will not be sufficient to reclassify the site to Provisionally Suitable.
5. The saprolite is unsuitable by this rule, the texture is to clayey.

The site is Unsuitable under Rule .1957 Alternative Sewage Systems:

1. Low Pressure Pipe Systems — NO
2. Fill Systems — NO
3. Aerobic Treatment Systems — NO

RECOMMENDATIONS

The owner has the following options that might allow the use of this property as desired:

1. The applicant may purchase other Suitable or Provisionally Suitable property to place the ground absorption sewage system on.

2. The applicant may obtain an easement on a Suitable or Provisionally Suitable property to place the ground absorption sewage system on.
3. The Division of Environmental Management in Mooresville, N. C. at (704) 663-1699 may be contacted to pursue options available through that office. The applicant should contact someone with a demonstrated knowledge of discharge systems to evaluate the site before contacting this office.
4. A sewage system can be pursued under Rule 1948 (d). Written documentation must be submitted to your office showing that the proposed sewage system can be expected to function properly. The data must contain the following:
   A. The effluent must be non-pathogenic, non-infectious, non-toxic, and non-hazardous.
   B. The ground water and the surface water must not be contaminated by the effluent.
   C. The effluent must not be exposed to the ground surface or discharged to surface waters where it could come into contact with people, animals, or vectors.

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 028667

File: 36548 (S460) Action 3

Parcel: 029-141-46 ☐ PC

Location: 921 Breezewood Dr.

Subdivision:

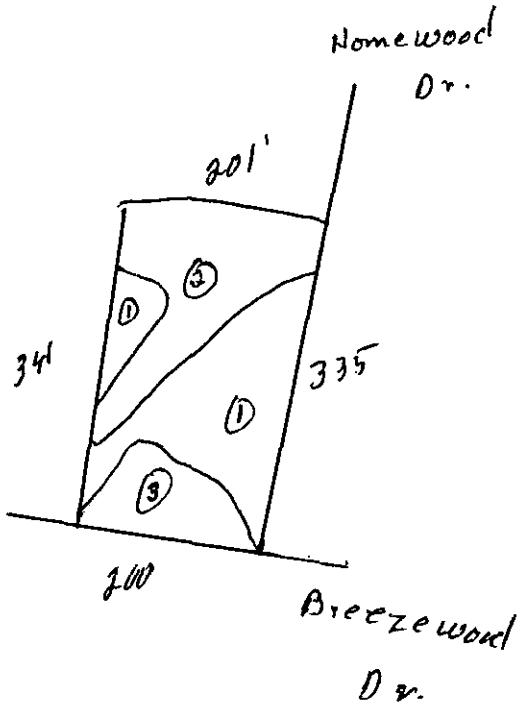
Lot: Block: Acres: 1.5

Owner: Verlene H. Moseley
Address: 1518 Newcastle St.
Charlotte, N.C. 28216

Comments:

Described by: William A. Marlin

Date: 8-21-95



***** EVALUATION KEY *****

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	(S) PS U 2-10%	S PS (U) Drainageway/ Depression	S PS (U) Complex Slopes	S PS U	S PS U	S PS U
Texture	S PS (U) Expansive clay	S PS U —	S PS U —	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U —	S PS U —	S PS U	S PS U	S PS U
Drainage	S (PS) U 736" To soil wetness	S PS U —	S PS U —	S PS U	S PS U	S PS U
Depth	S PS (U) 14-20"	S PS U —	S PS U —	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 736"	S PS U —	S PS U —	S PS U	S PS U —	S PS U
Available Space	S (PS) U Limited	S PS U —	S PS U —	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	Series Not Determined	Drainageway/ Depression	Complex Slopes			
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 028667

File: 36548 Action 3

Parcel: 029-141-46 ☐ PC

Location: 921 Breezewood Dr.

Subdivision:

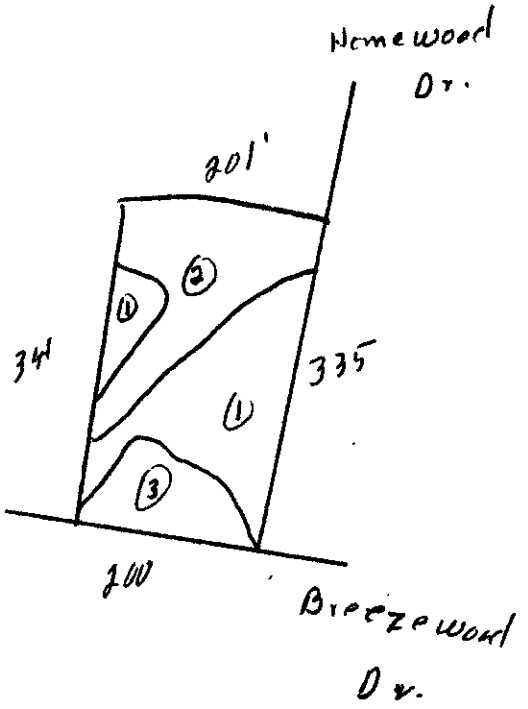
Lot: Block: Acres: 1.5

Owner: Verlene H. Moseley
Address: 1518 Newcastle St.
Charlotte, N.C.
28216

Comments: _____

Described by: William R. Marlin

Date: 8-21-95



***** EVALUATION KEY *****

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	(S) PS U 2-10%	S PS (U) Drainageway Depression	S PS (U) complex slopes	S PS U	S PS U	S PS U
Texture	S PS (U) Expansive clay	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U >36" To soil wetness	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S PS (U) 14-26"	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U >36"	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S (PS) U limited	S PS U	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	Series Not Determined	Drainageway/ Depression	Complex slopes			
Area Classification	S PS (U)	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

3654B

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

See file #40084 50' from pool 7/14/95 pd wait pt. ☐ cbr

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: GRANT (last) ANGELIA (first) BRAWLEY (mi)

ADDRESS: 13806 Holbrook Rd PHONE: 704 948-1574 (after 7pm) (w) 598-1544 (9-5)

CITY: Charlotte STATE: NC ZIPCODE: 28216

Date: 7-24-95

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 029-141-46

STREET ADDRESS: 921 Breezewood Drive Charlotte NC

ZONING:

PROPERTY OWNER:

NAME: Moseley (last) Verlene (first) H. (mi)

ADDRESS: 1518 Newcastle St PHONE: (704) 334-2523

CITY: Charlotte STATE: N.C ZIPCODE: 28216

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

LOT NUMBER: LOT SIZE (in acres):

TYPE APPLICATION (check one):

☑ SOIL TEST - INDIVIDUAL LOT (D)
☐ NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
☐ EXCHANGE MOBILE HOME - SAME # BEDROOMS (T)
☐ ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or N)
☐ 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: 3 NUMBER OCCUPANTS: 5

SYSTEM CLASSIFICATION:

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

WATER SUPPLY (check one):
☐ Community (C) ☐ Shared Well (S)
☐ Municipal (M) ☐ Other 'spring' (O)
☒ 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: X Verlene H. Moseley Date: X July 24, 1995

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

_____ Environmentalist Date

_____ Director or Authorized Section Head Date

WATER 22 '91

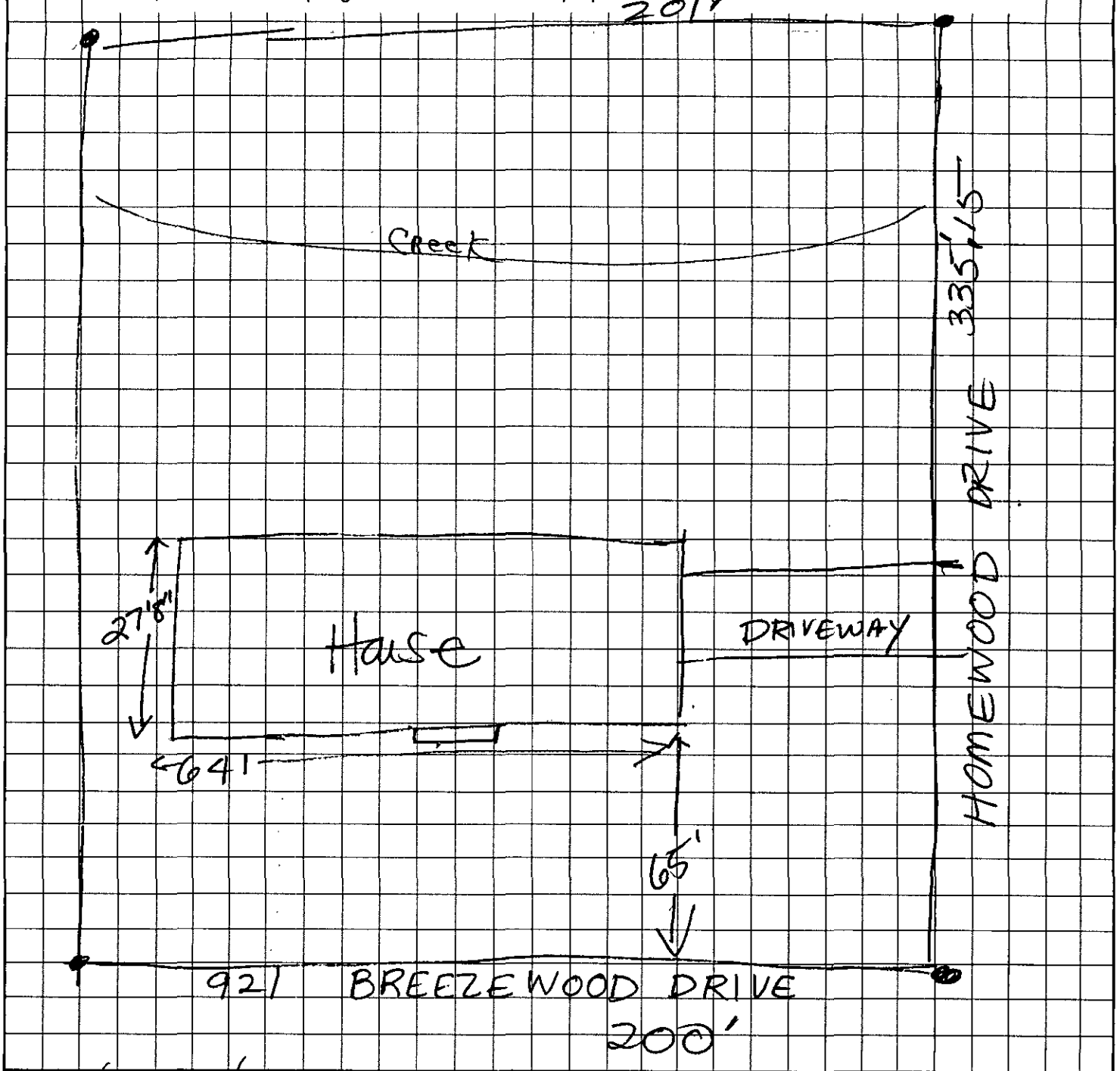
PROPOSED PLOT PLAN

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

FILE: 3654B

TC: 129-141-46

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.



X Verlene H. Moseley
OWNER/AGENT SIGNATURE

DATE July 24, 1995

APPROVAL DATE _____

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

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

DATE: 7/24/95

FROM: COUNTY ENGINEERING DEPARTMENT

EHD FILE _____ JURISDICTION CODE Meck

PARCEL NUMBER 029-141-46

ASSIGNED ADDRESS 921 Breezewood Dr

EXISTING ADDRESS _____

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	DISAPPROVED
1. SUBDIVISION REGULATIONS		_____*
2. FLOODWAY REGULATIONS		_____*
3. EROSION CONTROL REGULATIONS		_____*
4. PUBLIC UTILITY EASEMENT		_____*

	PRESENT	NOT PRESENT
5. PUBLIC UTILITY EASEMENT	_____*	
6. PROPERTY FRONTS ON THOROUGHFARE	_____*	
7. DRIVEWAY PERMIT REQUIRED	_____*	

*If checked, further investigation will be required to determine whether a building permit can be issued by Building Standards for the site.

REMARKS: Perk test

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIER'S OFFICE AT BUILDING STANDARDS WHEN PAYING PERMIT FEES.

A CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL THE TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAYS.

SIGNED: Rob

OPWEAR 06-88

NEW ADDRESS _____*

FORM 100

SUMMARY

This site is **UNSUITABLE** for a ground absorption wastewater treatment and disposal system under current laws and rules 15A NCAC 18A .1900. **No ground absorption wastewater (septic tank) system can be permitted on this site.**

This report gives a brief summary of the findings, conclusions, and recommendations.

If you have any questions or I can be of assistance contact me at the Mooresville Regional Office (704) 663-1699.

INTRODUCTION

COUNTY: Mecklenburg

OWNER/APPLICANT: Angela Grant

LOCATION: Breezewood Drive and Homewood Drive

TYPE OF FACILITY: Residence

DESIGN UNIT: 360 gpd

PROPOSED WATER SUPPLY: On-site well

EVALUATED BY: Joe Lynn assisted by Bill Marlin using hand augers

DATE OF EVALUATION: September 14, 1995

OTHER(S) PRESENT: N/A

SITE INFORMATION

AREA/PRESENT USE: 1.54 acres / wooded

TOPOGRAPHY: 3 to 10 percent

LANDSCAPE POSITION: Linear slopes and flood plain

SITE LIMITATIONS: Gullies, flood plain, and stream

SOIL INFORMATION

SOIL TEXTURE: (surface) Sandy loam to clay
(subsoil) Sandy clay and clay

SOIL STRUCTURE: (subsoil) Blocky