

11717 REAMES RD

02504218

6/12/2007

duponbj

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 16513

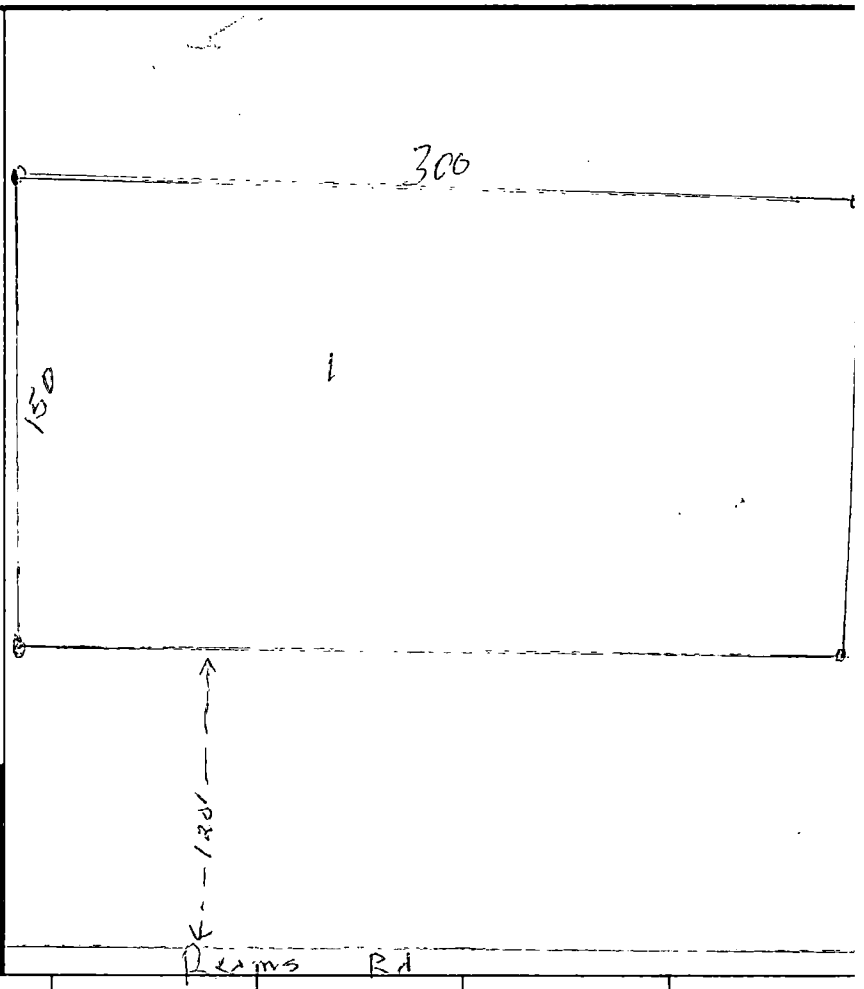
File: 6210A
Parcel: 02504209
Action 1
☐ PC

Location: Reames Rd.
Subdivision:
Lot: Block: Acres: 1 A

Owner:
Address: Sunbelt Steel Properties
PO Box 26784
Charlotte, nC 28221

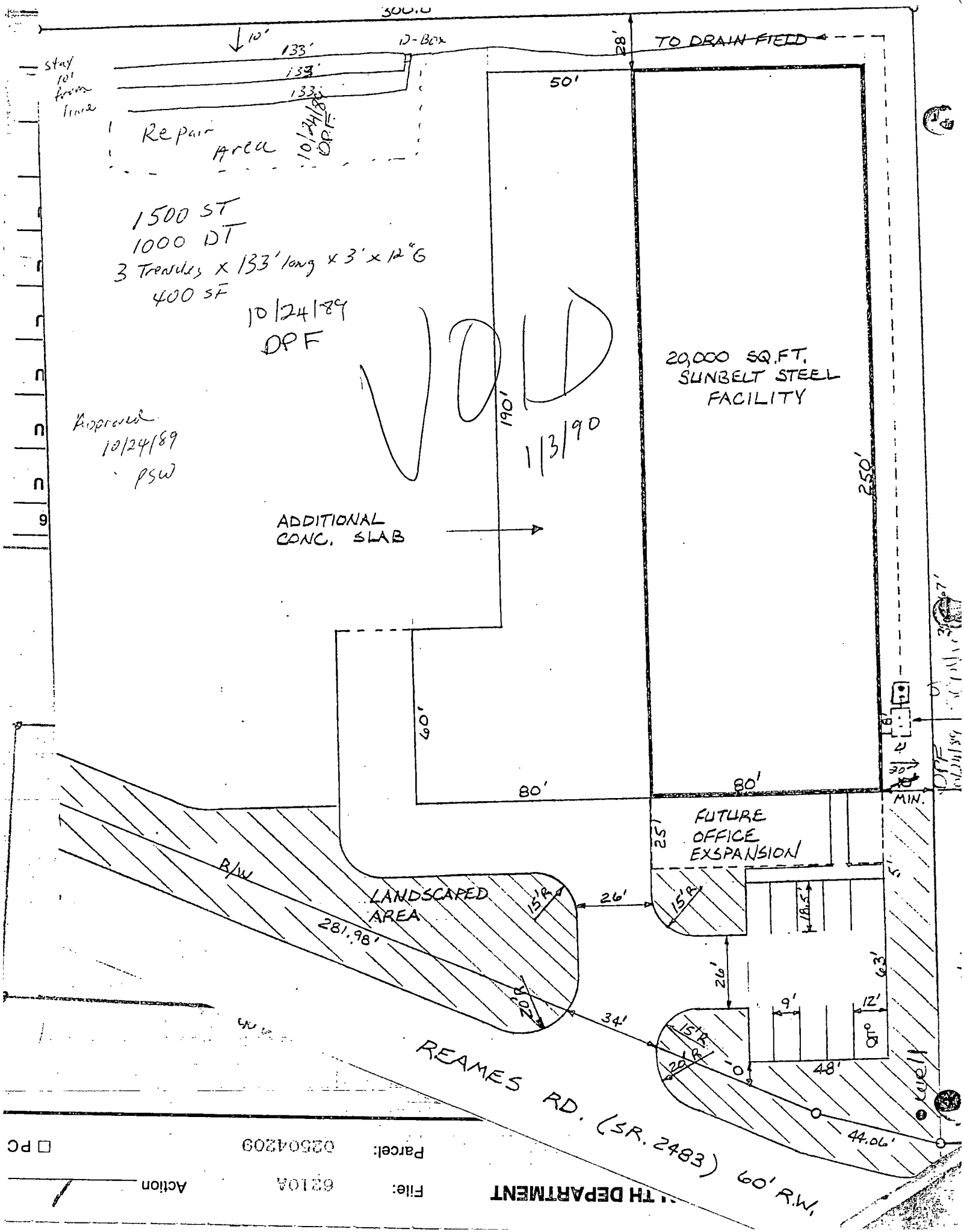
Comments: _____

Described by: W. B. Ramsey
Date: 10-16-89



***** 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 2-4	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 45-48	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	~~Ha~~ Cecil					
Area Classification	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U


TO DRAIN FIELD
D-Box
10'
133'
133'
133'
stay 10' from line
Repair Area
10/24/89 DPF
50'
28'
1500 ST
1000 DT
3 Trenches x 133' long x 3' x 12"G
400 SF
10/24/89
DPF
VOID
1/3/90
Approved
10/24/89
PSW
190'
20,000 SQ.FT. SUNBELT STEEL FACILITY
250'
ADDITIONAL CONC. SLAB
60'
80'
80'
30'
MIN.
FUTURE OFFICE EXSPANSION
25'
5'
R/W
LANDSCAPED AREA
281.98'
15'R.
26'
15'R.
18.5'
26'
63'
9'
12'
20'R.
34'
15'R.
20'R.
48'
44.06'
REAMES RD. (SR. 2483) 60' R.W.
Parcel: 02504209
File: 6810A
Action

Mecklenburg County
Health Department

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

October 18th, 1989

Sunbelt Steel Properties
PO Box 26784
Charlotte, NC 28221

RE: Property located at Reames Rd.
FILE: 6210A
PARCEL: 02504209

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 16513) 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

20 00/

APPLICATION FOR AN IMPROVEMENT PERMIT

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

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

(OFFICE USE ONLY)
FILE: 6210A
TC: _____
SERIAL: № 19397
☐ L ☑ CRT

JOB LOCATION

① ADDRESS: 11717 (STREET NO.) Reames Road (STREET) ② FILE: _____
③ JURISDICTION: _____ ④ TAX PARCEL NO.: 02504209
⑤ SUBDIVISION: _____ ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: Sunbelt Steel (FIRST)
⑨ MAILING ADDRESS: PO Box 26784, (MIDDLE) 6015 Racine (LAST) Avenue
⑩ CITY: Charlotte ⑪ STATE: N.C. ⑫ ZIP: 28144
⑬ PHONE: (WORK) 596-1570 ~~⑭ (HOME)~~ Contact: Dan Fisher 704 633 6124

REQUEST

This request is for a(n):

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

DESIGN CRITERIA

System will serve:

⑲ ☐ Residence ⑳ ☐ Mobile home
㉑ ☑ Business or place of public assembly
㉒ Number of bedrooms? _____
㉕ Type? Distributer
㉓ Maximum occupancy? _____
㉖ Maximum number of employees? 10
㉔ Basement? ☐ yes ☐ no
㉗ Maximum number of seats? _____

WATER SUPPLY

㉘ Water supply from (present or proposed):

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

㉙ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Daniel P. Fisher
Date: 10/18/89

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

... No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by this Department.

... This permit is not transferable, and shall become null and void 36 months from the date of issuance.

Philo S. Walker, 10/24/89
Environmentalist — Date

_____, 10-25-89
Director or Authorized Section Head — Date

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

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 6210 A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: REAMES RD

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

⑤ PARCEL REFERENCE: BOOK NO.: 025 PAGE NO.: 042 PARCEL NO.: 09

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

OWNER

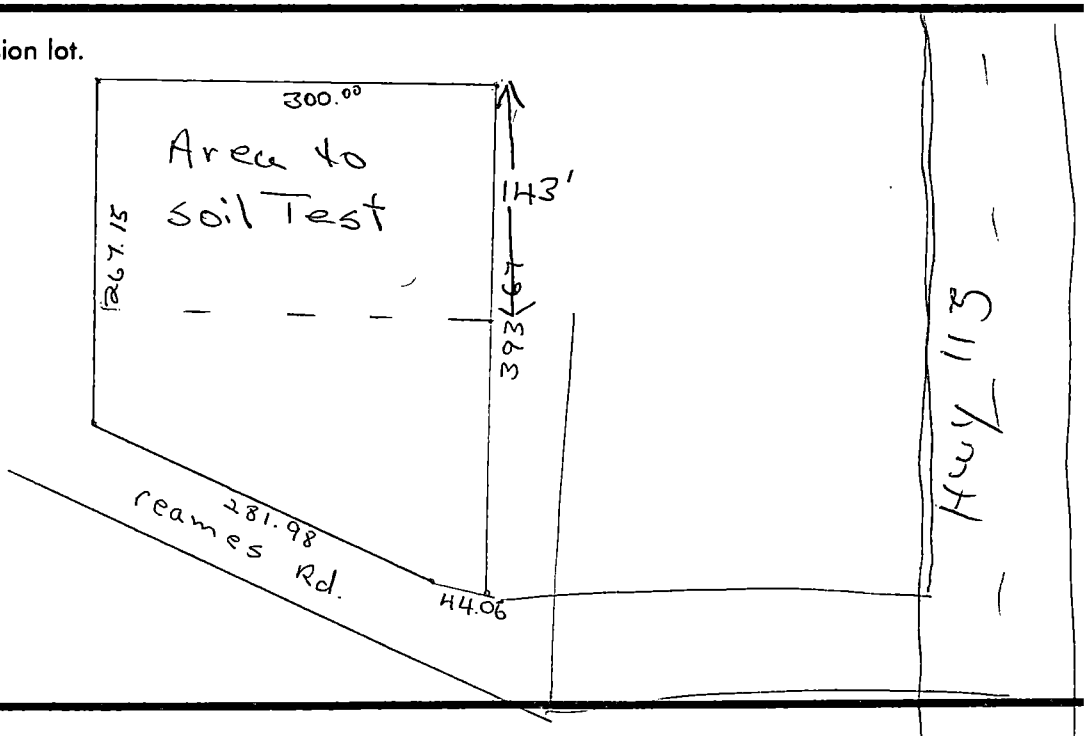
⑦ NAME: Sunbelt (FIRST) Steel (MIDDLE) Properties (John Klein) (LAST)

⑧ MAILING ADDRESS: P.O. Box 26784

⑨ CITY: Charlotte ⑩ STATE: NC ⑪ ZIP: 28221

⑫ PHONE: (WORK) 704-596-1570 (HOME) 875-6802

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: John L Klein

Date: 10-05-89

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

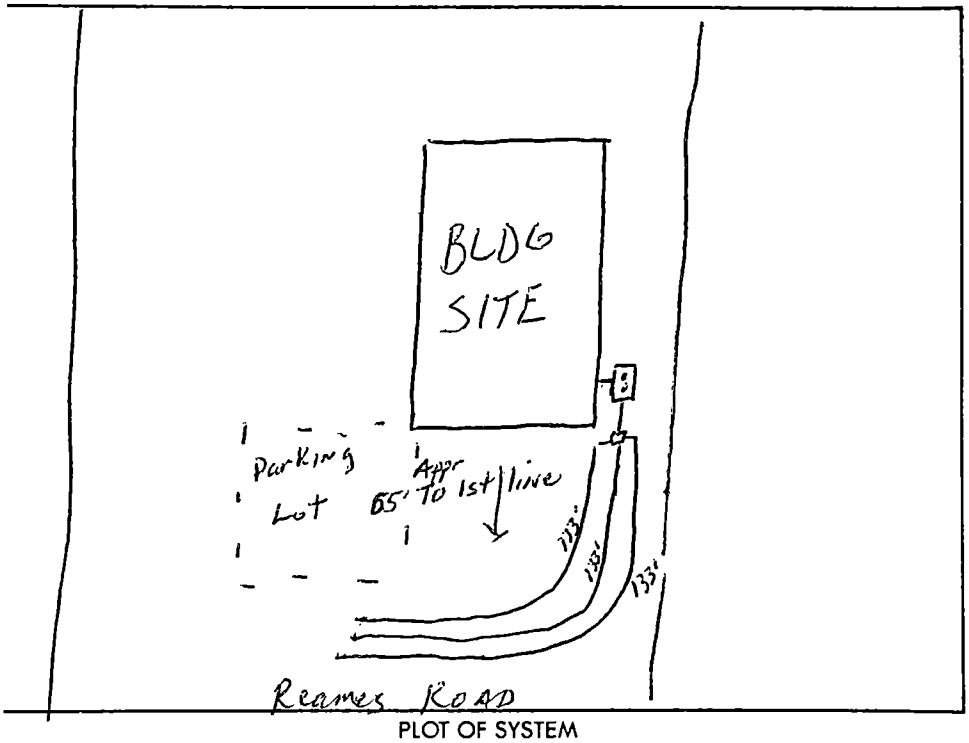
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 6210 A DATE: 3/21/90

TC: 025-042-09 ☐ L

SERIAL Nº 14609

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 10/18/89. All work shall be completed on or before 4/21/90, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Health Department before any system can be covered up or placed into service. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed will operate properly, or relieve any person now or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 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 3

Depth of Stone 12 inches

Distance from House 75 feet

Distance from Property Line ≥10 feet

Distance from Well ≥50 feet

NAME OF OWNER Sunbelt Steel

LOCATION OF PROPERTY 11717 Reames Rd

Comments: 3 Trenches x 133' long x 3' x 12" stone
Stay ≥10 from property lines. Parking deck to extend 55' from bld foundation. Keep out of road right of way.

Division or Section Head

Philip S. Walker R.S.
Environmentalist

* If this permit is for the installation or construction of a new system, it must be signed by the division or a section head of the Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 6210 A DATE: 3/28/90

TC: 025-042-09 ☑ L ☑ CRT

SERIAL № 13142

Name of Owner Sunbelt Steel Juris.:

Address of Property 11717 Reames Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400

Number of Lines 3 @ 133'

Cover Depth 20"

Water Supply Source Well

Distance to Water Source 750

Excavation Inspected 3/28/90

Tank(s) Inspected 3/28/90

Wash Line Inspected NA

High Water Alarm Inspected NA

PLOT

Design: 1990 1500ST, CON, 1200SFT, 12" Gravel CTR# 122

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☑ installed or constructed ☐ altered or repaired

☑ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The issuance of this

☑ Certificate of Completion ☐ Operation Permit

does not in any way guarantee that the system will operate properly or relieve any person now or hereafter owning, controlling, or using such system from any liability resulting from the failure of the system to operate properly. This document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 10 NCAC 10A .1900 in addition to those listed below under "COMMENTS." This document shall be null and void if any information contained in the application is untrue or if any additions are made to the property which would increase the requirements for said system.

COMMENTS: System installed appr 40" deep because of building plumbing.

Philo S. Walker R.S.
Environmentalist

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MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 10/18/89

Name/Company: Carroll Fisher Co.

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Insp - new
Le 210 A

MECK. COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
OCT 18 1989

Fee: $ 200.00

CR # 12814
$200.00

NOTICE:

A processing fee of $15.00 will be charged for all returned checks in accordance with N.C. General Statute 25-3-512.

Completed by

Collected by

BILLING — WHITE CUSTOMER COPY — YELLOW

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 10-5-89.

Name/Company: Daniel W. Fisher

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Soil Investigation
6210 A
Grover Rd.

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
OCT 5 1989

CR# 365
140.00

Fee: 40 00

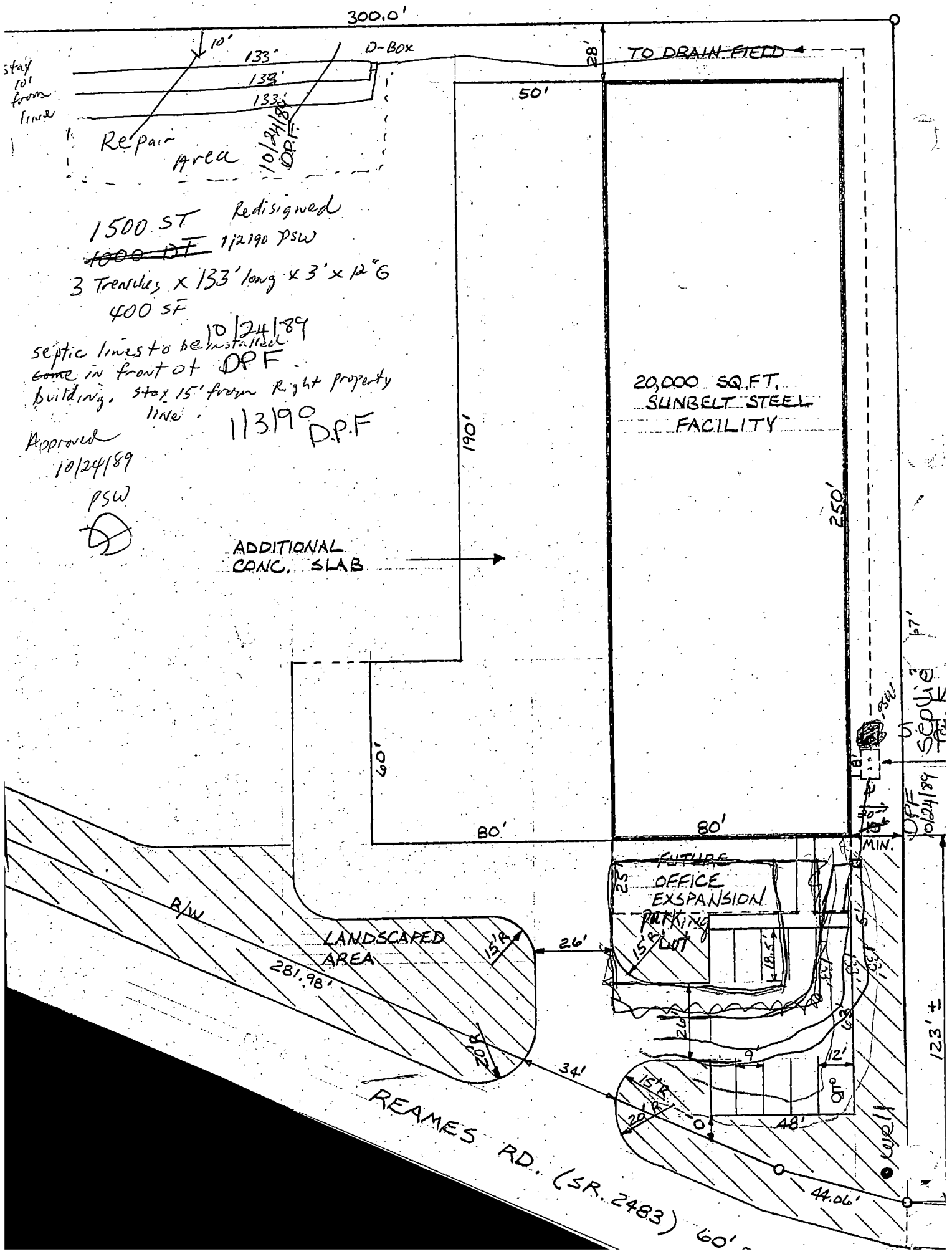
NOTICE:

A processing fee of $15.00 will be charged for all returned checks in accordance with N.C. General Statute 25-3-512.

Elizabeth Johnston
Completed by

Elizabeth Johnston
Collected by

BILLING — WHITE CUSTOMER COPY — YELLOW


300.0'
10'
133'
139'
133'
D-Box
28'
TO DRAIN FIELD
50'
stay 10' from line
Repair Area
10/24/89 D.P.F.
1500 ST Redisigned
~~1000 SF~~ 1/2190 PSW
3 Trenches x 133' long x 3' x 12"G
400 SF
10/24/89
septic lines to be installed
~~come~~ in front of DPF.
building. stay 15' from Right property line.
1/3/90 D.P.F
Approved
10/24/89
PSW
20,000 SQ.FT.
SUNBELT STEEL
FACILITY
190'
250'
ADDITIONAL
CONC. SLAB
40'
80'
80'
FUTURE
OFFICE
EXSPANSION
PARKING
LOT
25'
15'R
26'
LANDSCAPED
AREA
B/W
281.98'
20'
34'
REAMES RD. (SR. 2483) 60'
18.5'
24'
9'
12'
15'R
20'R
48'
44.06'
123'±
Septic
DPF
10/24/89
MIN.