

13804 HOLGATE HILL DR

19519105

6/13/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

WKEP

FILE: 6235A DATE: 5/11/93

TC: 195-191-05 ☐ L ☐ CRT

SERIAL № 15696

Name of Owner Smith Bldrs./PARKS Hemms Juris.:

Address of Property 13804 HOLGATE Hills

Inspection Data:

Tank Material 1500

Total Length of Drainfield 533

Number of Lines 5 @ 107

Cover Depth min. 12"

Water Supply Source Well

Distance to Water Source ≥100'

Excavation Inspected 5/11/93

Tank(s) Inspected (3/2/93) 5/11/93

Wash Line Inspected —

High Water Alarm Inspected —

PLOT

Design: 1993 CONV, 1500 ST, 1600 SQFT, 12"G, CCIL CTR# 90

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: Type III - 4 BEDROOM

SEPTIC TANK ABOVE SURFACE GRADE FOR

GRAVITY FLOW TO BE ESTABLISHED AS PER DESIGN.

JK

John H Newell, RS.
Environmentalist

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

400 LY

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

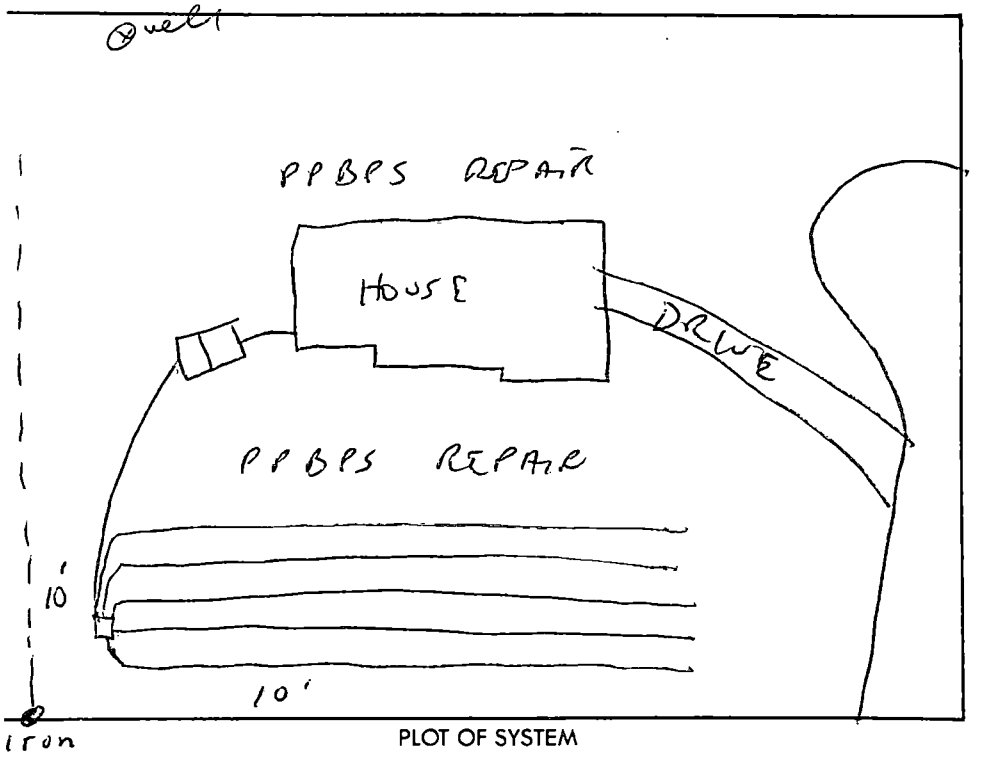
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 6235-A DATE: 3-3-93

TC: 195-191-05 ☐ L

SERIAL Nº 14485

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 6-4-92. All work shall be completed on or before 4-3-92, 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 535 feet

Number of Lines 5

Depth of Stone 12" inches

Distance from House 5'+ feet

Distance from Property Line 10'+ feet

Distance from Well 50'+ feet

NAME OF OWNER HELMS PARKS H.

LOCATION OF PROPERTY 13804 HOLGATE HILL DR

Comments: 5 lines @ 107' each x 3' wide x 12" rock
remove piedmont gas line before starting work

Division or Section Head

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

Conversation & response ~~[redacted]~~ & Parks
Helms 2-18-93 -
well installation VOIDED orig. Imp. permit.
INFRINGED ON repair AREA -

Mr. Helms -

We think we'll be able to work it out
Fortunately Many options available to you -
others not so fortunate -

- This situation is a result of not having
a private well ordinance -
Service level 2
Health Stds. require us to respond to the
public on any private well issue;

But most questions come from concerned
citizens re: health effects; i.e.
pregnant women, ~~etc.~~ individuals suffering
from cancer, ~~etc.~~ families & small children -

Not required to test / we ~~will~~ consult & Dr. Keplar for medical concerns

- well Do the name / educate
him

How did the activity get started -
From whom -

Mr. Parks → explain layout / small lots; 100' separation

Builder - with Kelly Randall on the lot -

Options:

- Preferred - abandon the well
  protects you & future buyer
  completely meets the rules
- Orig. system (converted) in front -
  modified repair -
  (system pushed through legislature by developers to allow bigger houses on small lots -
  Env. concern!)
- Reduce the loading rate (Soil acceptance rate) to do - is legal
- Letter for abandonment like needed -
  Problem: sets precedent.

- fee for modified use $100

Certified operators not required — in betterment if system required LPP design contract & certified operator to ensure system op. & Maintenance — ($300/yr)

(No white fee - Commissioner Decision

We prefer abandonment —

Conversation ⊂ Mr. Helms
11:05 AM 2-18-93

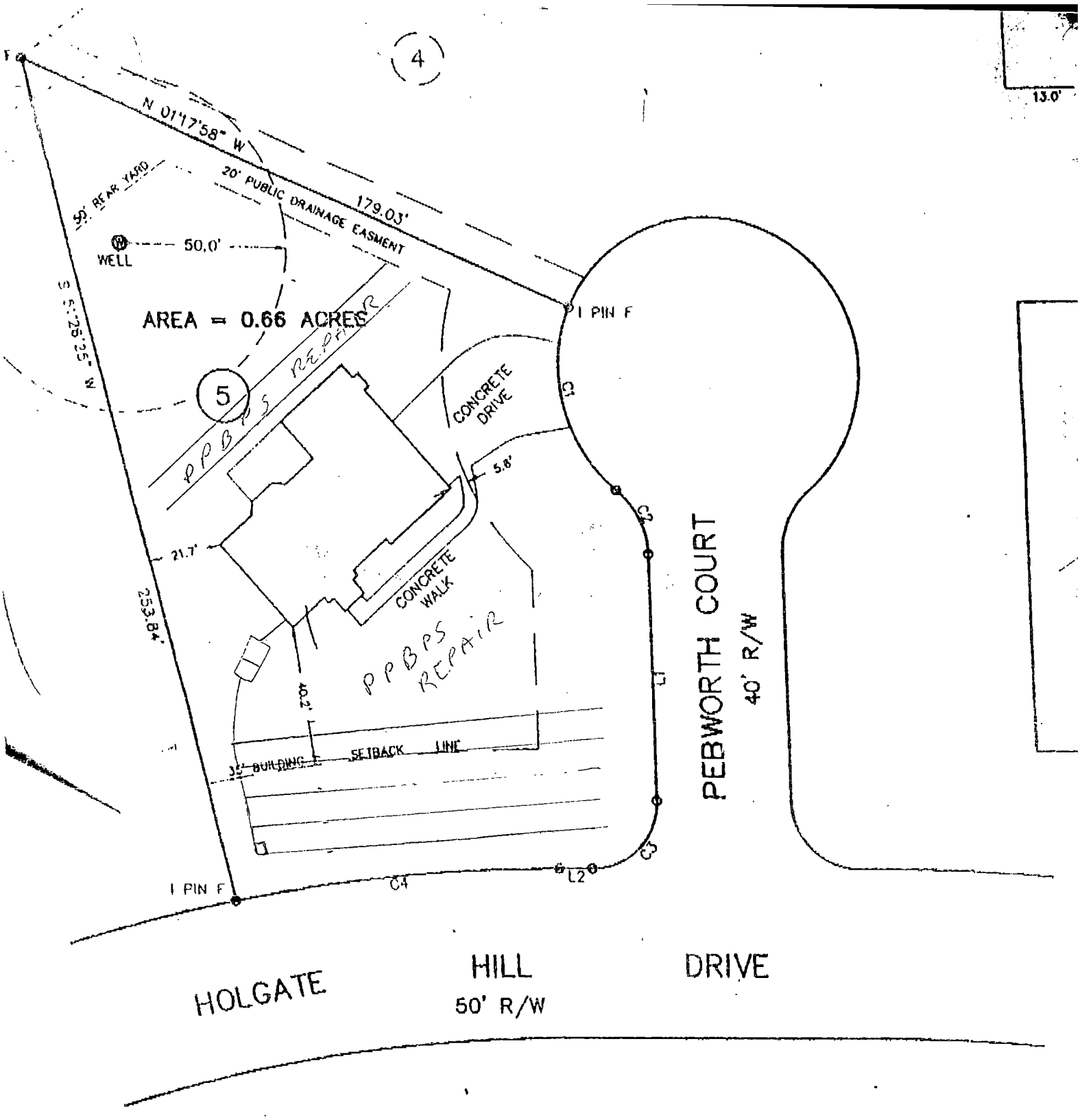
Re: 6235A / 13804 Holgate Hill Dr

Requests conv. system ⊂ mod. repair-
as a solution to the problem-

Mr. Helms is in partnership ⊂ Smith Bldgrs.

[History note: decision to install well determined by Builder]

Mr. Helms felt the decision is better based on the drainage easement location.



NOTES

AREA BY COMPUTER
ERROR OF CLOSURE = 1:10,000
I PIN F = IRON PIN FOUND

	BEARING
	N 51°26'53" E
	N 39°11'31" E
	S 70°47'39" E
	S 31°26'29" E

1" = 40'

NORTH CAROLINA REGISTERED SEAL L-1519 LAND SURVEYOR EDWARD J. KILLOUGH

Edward J. Killough

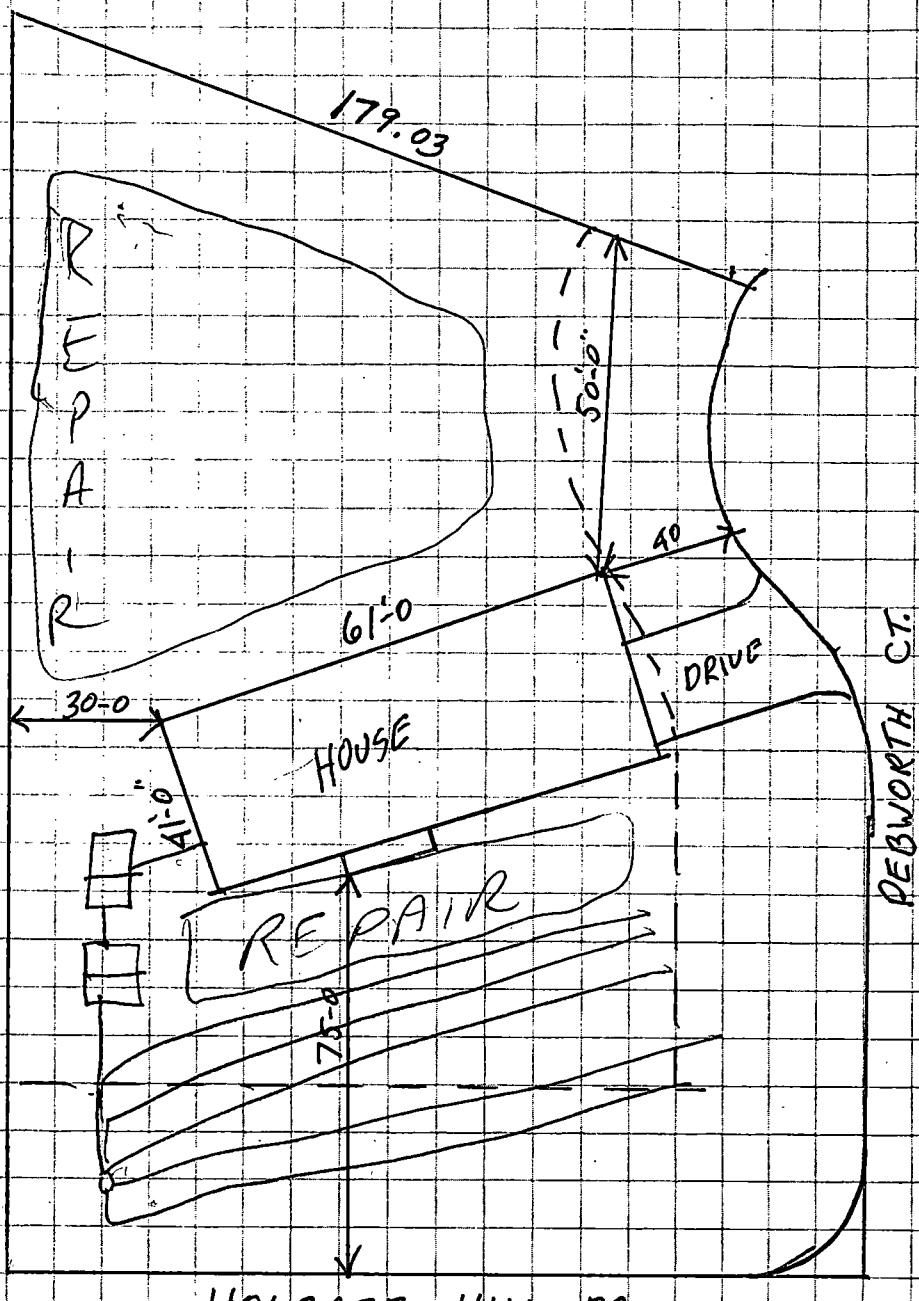
PROPOSED PLOT PLAN

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

FILE: 6235A

TC: _____

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.



Signed: X _____

Date: 6/4/93

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

pd. $200 6-4-92 CRT #1329 BOK

6235 A

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: HELMS, H. PARKS (last) (first) (mi)

ADDRESS: 2300 Two First Union Center PHONE: 704 372-4884

CITY: Charlotte, STATE: NC ZIPCODE: 28282

Date: June 4, 1992

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 195-191-05

STREET ADDRESS: 13804 Holgate Hill Dr.
Charlotte, NC 28227

ZONING:

PROPERTY OWNER:

NAME: JONATHAN'S LANDING DEVELOPMENT (last) (first) (mi)

ADDRESS: c/o 2300 Two First Union Center PHONE: 704 372-4884

CITY: Charlotte, STATE: NC ZIPCODE: 28282

SUBDIVISION OR MOBILE HOME PARK NAME:

JONATHAN'S LANDING

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

TYPE APPLICATION (check one):

LOT NUMBER: 5 LOT SIZE (in acres): .65

[ ] SOIL TEST - INDIVIDUAL LOT (D)
[X] 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) [X] HOUSE (H) [ ] MULTIPLE FAMILY (U)
[ ] DOUBLE WIDE (D) [ ] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: 4 NUMBER OCCUPANTS:

SYSTEM CLASSIFICATION:

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

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

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[ ] Swimming Pool [ ] Jacuzzi [ ] Stable/Barn [ ] Workshop [ ] None
[ ] Garage [ ] Storage Building [ ] Deck/Patio [ ] Bedrooms [ ] 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: H. Parks Helms Date: June 4, 1992

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.

...

LIFT STATION MAY BE REQUIRED

[X] 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 6/10/92 Date

WWATER : 122791

NOTES
AREA BY COMPUTER
ERROR OF CLOSURE = 1:10,000
I PIN F = IRON PIN FOUND

	BEARING
	N 51°26'53" E
	N 39°11'31" E
	S 70°47'39" E
	S 31°26'29" E

1" = 40'

NORTH CAROLINA REGISTERED SEAL L-1519 LAND SURVEYOR EDWARD J. KILLOUGH

Edward J. Killough

Mecklenburg County
Health Department

January 23rd, 1990

Jonathan's Landing Development
2300 Two First Union Center
Charlotte, NC 28282

RE: Property located at Pebworth Court
FILE: 6235A
PARCEL: 19510103,04,05

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 16541) 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

Environmental Health Division
1200 Blythe Boulevard • Charlotte, North Carolina 28203 • (704) 376-4603

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 16541

File: 6235A Action 1

Parcel: PO 195-101-04 ☐ PC

Location: Pebworth Court

Subdivision:

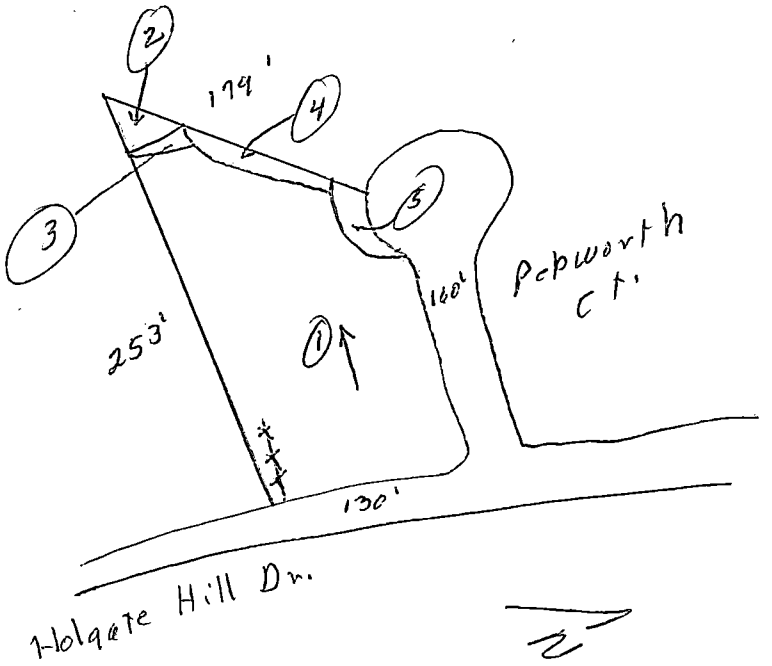
Lot: 5 Block: Acres: .65

Owner:
Address: Jonathan's Landing Development
2300 Two First Union Center
Charlotte, NC 28282

Comments: 100% Repair recorded

Described by: William R. Marks

Date: 1-22-90



***** 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 2-8%	S PS (U) Depression	(S) PS U 2-8%	S PS U —	S PS U —	S PS U
Texture	S (PS) U Clay	S PS U —	S PS (U) 2-Clay 29-30"	S PS U —	S PS U —	S PS U
Structure	S (PS) U Blocky	S PS U —	S (PS) U Blocky	S PS U —	S PS U —	S PS U
Drainage	S (PS) U 7-36" to water	S PS U —	S PS (U) Perched water 30"	S PS U —	S PS U —	S PS U
Depth	S (PS) U 7-36"	S PS U —	S (PS) U 36" +	S PS U —	S PS U —	S PS U
Restrictive Horizons	S (PS) U 7-36"	S PS U —	S (PS) U 7-36"	S PS U —	S PS U —	S PS U
Available Space	S (PS) U Limited	S PS U —	S PS (U) Restricted	S PS U —	S PS U —	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS (U) Drainage pipe	S PS (U) Fill	S PS U
Soil Group/Series	III Cecil-Urban	Depression	Cecil/Helena Expansive clay	Drainage pipe	Fill	
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: 6235A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: 14208 Pebworth Court or 13804 Holgate Hill Drive

② SUBDIVISION: Jonathan's Landing ③ LOT: 5 ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: PO 195 PAGE NO.: 101 PARCEL NO.: 03, 04 & 05

⑥ DEED REFERENCE: BOOK NO.: DB 6001 PAGE NO.: 348

OWNER

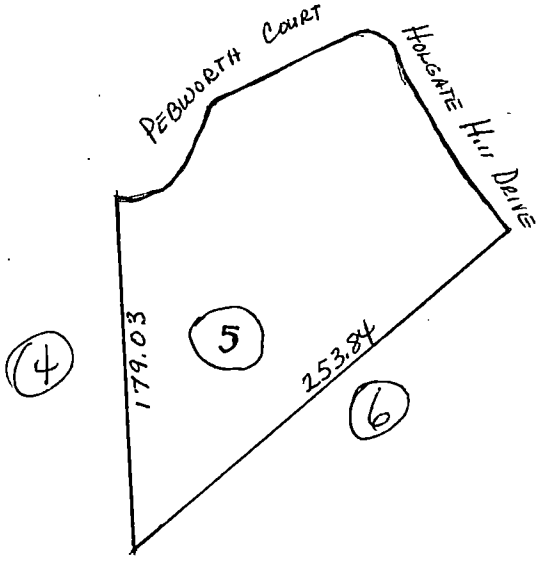
⑦ NAME: JONATHAN''S LANDING DEVELOPMENT, a North Carolina General Partnership
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: 2300 Two First Union Center

⑨ CITY: Charlotte ⑩ STATE: N.C. ⑪ ZIP: 28282

⑫ PHONE: (WORK) 704-372-4884 (HOME) 704-366-9509

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: W. PARKS HELMS, Partner

Date: 10/6/84

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