

13912 IDLEWILD RD

21526118

12/31/2007

duponbj

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

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

DATE: 02-08-01 PERMIT NO: 2590B

PARCEL NO: 215-152-72

JOB LOCATION ADDRESS: Idlewild Rd.

PROPERTY OWNER: Johnnie L. Laddie

BUILDING CONTRACTOR: Spurlock Homes

SUBDIVISION NAME: _____

AUTHORIZATION ISSUED BY: Joshua R. Sellers R.S DATE: 02-08-01

DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 2590B, 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: _____

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.

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

Hold For
Fees
$502-08-01

Permit Number: 2590 B

Tax Number: 215-152-72

- 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	X No	___ Partial Basement
Type Primary Wastewater System Type (circle one): I (II) III IV V VI	X 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

.28 Long-term acceptance rate	480 Max gallons/day wastewater flow	1714 Absorption Area (sq ft)	9' Trench spacing (min. on centers)
NO Serviced by private well	1500 Gallon septic tank	572 Total trench length (ft)	24" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
4 Bedrooms in residence	___ Gallon pump tank	12" Depth of stone	

Any surface waters present: Type: Minimum separation distance:

Site modifications required:

Additional Conditions: 1) Keep trenches on contour and shallow - 24" maximum.
2) Keep all parts of septic system at least 100' from any well.

Repair Area System Type Type (circle one): I II III IV V VI	X 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

___ Absorption Area (Sq ft) ___ Total Trench Length (Ft)	___ Depth of Stone Trench	___ Trench spacing (min. on centers)	___ Maximum Trench Depth

For existing system, enter the year originally installed:

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.

Judy Kain 8/8/98
DEHNR Authorized Agent Date

Jeffrey A. Knight

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

CERTIFICATE OF OWNERSHIP AND DEDICATION:

I HEREBY CERTIFY THAT I AM THE OWNER OF THE PROPERTY SHOWN AND DESCRIBED HEREON AND THAT I HEREBY ADOPT THIS PLAN OF SUBDIVISION WITH MY FREE CONSENT, ESTABLISH MINIMUM BUILDING SETBACK LINES, AND DEDICATE ALL STREETS, ALLEYS, WALKS, PARKS, AND OTHER SITES AND EASEMENTS TO PUBLIC OR PRIVATE USE AS NOTED. FURTHER MORE, I DEDICATE ALL SEWER LINES AND WATER LINES TO THE TOWN OF MATTHEWS, IF APPLICABLE.

Johnnie L. Gaddy
Jimmy F. Cloninger (Virginia H. Cloninger)
4-24-94 Kenneth G. Cloninger, Sheila S. Cloninger
(DATE) (OWNERS)

NORTH
* BEARINGS ORIENTED WITH LINE NOTED (1) IN DEED BOOK 2851, P. 362

MECKLENBURG / UNION CO. LINE

JOHNSON

TRACT XII
1.000 Acre (Comp.)

TRACT IX
2.000 Acre (Comp.)

TRACT X
2.000 Acre (Comp.)

TRACT III
2.000 Acre (Comp.)

TRACT II
2.000 Acre (Comp.)

TRACT VII
2.000 Acre (Comp.)

EASEMENT FOR NOTE (1)

EASEMENT FOR TRACT III

EASEMENT FOR TRACT II

EASEMENT FOR TRACT VII

EASEMENT FOR TRACT XII

EASEMENT FOR TRACT IX

EASEMENT FOR TRACT X

CLONINGER LOT 3

CLONINGER LOT 2

CLONINGER LOT 1

JOHNNIE L. GADDY (OWNER) DEED BOOK 2851, P. 362 REMAINDER TRACT 2.139 Ac.

S 66°55'00" E 250.45'

S 66°55'00" E 1847'

S 66°55'00" E 1325.00'

N 23°01'00" E 322.00'

N 23°01'00" E 322.00'

N 23°01'00" E 322.00'

N 23°01'00" E 322.00'

S 23°05'00" W 1325.00'

S 23°05'00" W 1325.00'

N 23°05'00" E 1325.00'

N 23°05'00" E 1325.00'

N 23°05'00" E

2590B/215-152-78

03:05PM FROM PIC 'N PAY

...TE O ...AROLINA

...UNTY OF MECKLENBURG

I, William A. Sciset, ...rvision from (an actual ... ... shown as broken lines ... ... that this plat was prepared ... ... original signature registration ... ... day of APRIL, A.D. 19 94.

William A. Sciset
Surveyor
L-1415
Registration Number

(1)

North Carolina

MECKLENBURG County

I, A ... ... that WILLIAM A. SCISET A Registered Surveyor personally appeared before me this ... and foregoing instrument. Witness my hand and official seal this 26 day of APRIL, 1994

D Marlowe
Notary

(Official seal or stamp)

My commission expires JAN 30, 1999.

VICINITY MAP
(NOT TO SCALE)

SITE

FOR REVIEW ONLY

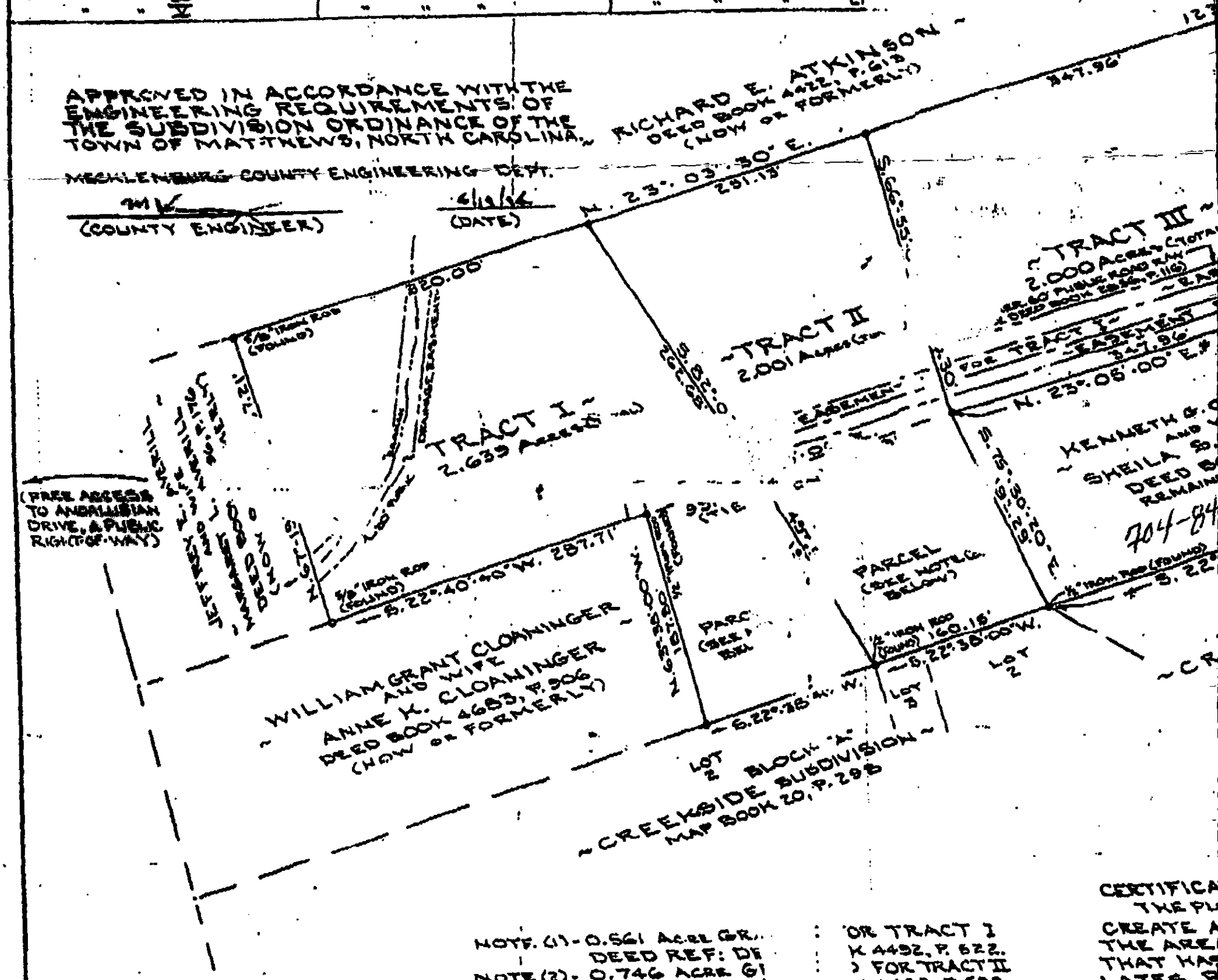
EASEMENT SCHEDULE

EASEMENT to SERVE:	POINT of BEGINNING FROM CONC. R/W MON.	COURSE of EASM'T ℄
TRACT 2	N. 47°-27'-50" W. 112.03'	S. 25°-06'-00" W. 212.04'
KENNETH G. CLOANINGER	" " " 127.94'	" " " 617.23'
WILLIAM GRANT CLOANINGER	" " " 143.85'	" " " 1219.37'
" " " " " "		S. 22°-03'-00" W. 269.
" " " " " "		S. 67°-19'-20" E. 22.
TRACT 1	N. 47°-27'-50" W. 159.76'	S. 23°-06'-00" W. 122
" "	" " "	S. 22°-03'-00" W. 19
" "	" " "	S. 23°-06'-00" W. 122
" "	" " "	" " " 86
" "	" " "	" " " 54
" "	" " "	" " " 21

APPROVED IN ACCORDANCE WITH THE ENGINEERING REQUIREMENTS OF THE SUBDIVISION ORDINANCE OF THE TOWN OF MATTHEWS, NORTH CAROLINA.

MECKLENBURG COUNTY ENGINEERING DEPT.

(COUNTY ENGINEER) (DATE) 4/13/94



NOTE (1) - 0.561 Acre GR. ... FOR TRACT I
DEED REF: DE ... K 4492, P. 522.
NOTE (2) - 0.746 ACRE GI ... FOR TRACT II
DEED REF: DE ... K 4492, P. 522.

CERTIFICATE OF APPROVAL:

I HEREBY CERTIFY THAT THE SUBDIVISION PL... SHOWN HEREON HAS BEEN FOUND TO COMPLY WITH THE SUBDIVISIO... REGULATIONS FOR MATTHEWS, NORTH CAROLINA, AND HAS BEEN APP... BY THE TOWN COMMISSIONERS FOR RECORDING IN THE OFFICE OF THE... DEEDS FOR MECKLENBURG COUNTY. THE TOWN AC... HEREBY DEDICA-TION OF STREETS, EASEMENTS, AND PUBLIC PARKS, ... TOWN ASSUMES NO RESPONSIBILITY TO OPEN OR MAINTA... STREETS, EASEMENTS, RIGHT-OF-WAYS, AND PUBLIC PARKS, OR OTHER LANDS SHOWN THEREON AND HEREBY FOR PUBLIC PURPOSES UNTIL IN THE OPINION OF THE ... COMMISSIONERS OF MATTHEWS IT IS IN THE PUBLIC INTEREST TO

CERTIFICA... THE PU... CREATE A... THE ARE... THAT HAS... LATES P...

GOF

Driveway

109'

Building Line

55'

228'

164'

Robert E. Shaw
Johnson

Steel Rod

Phillip Lloyd
Meyers

SITE PLAN

13912 IDLEWILD ROAD, MATTHEWS, N.C. 28105

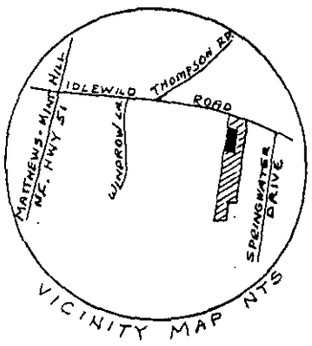
PROPERTY **TRACT V of Subdivision of 13900 IDLEWILD ROAD**

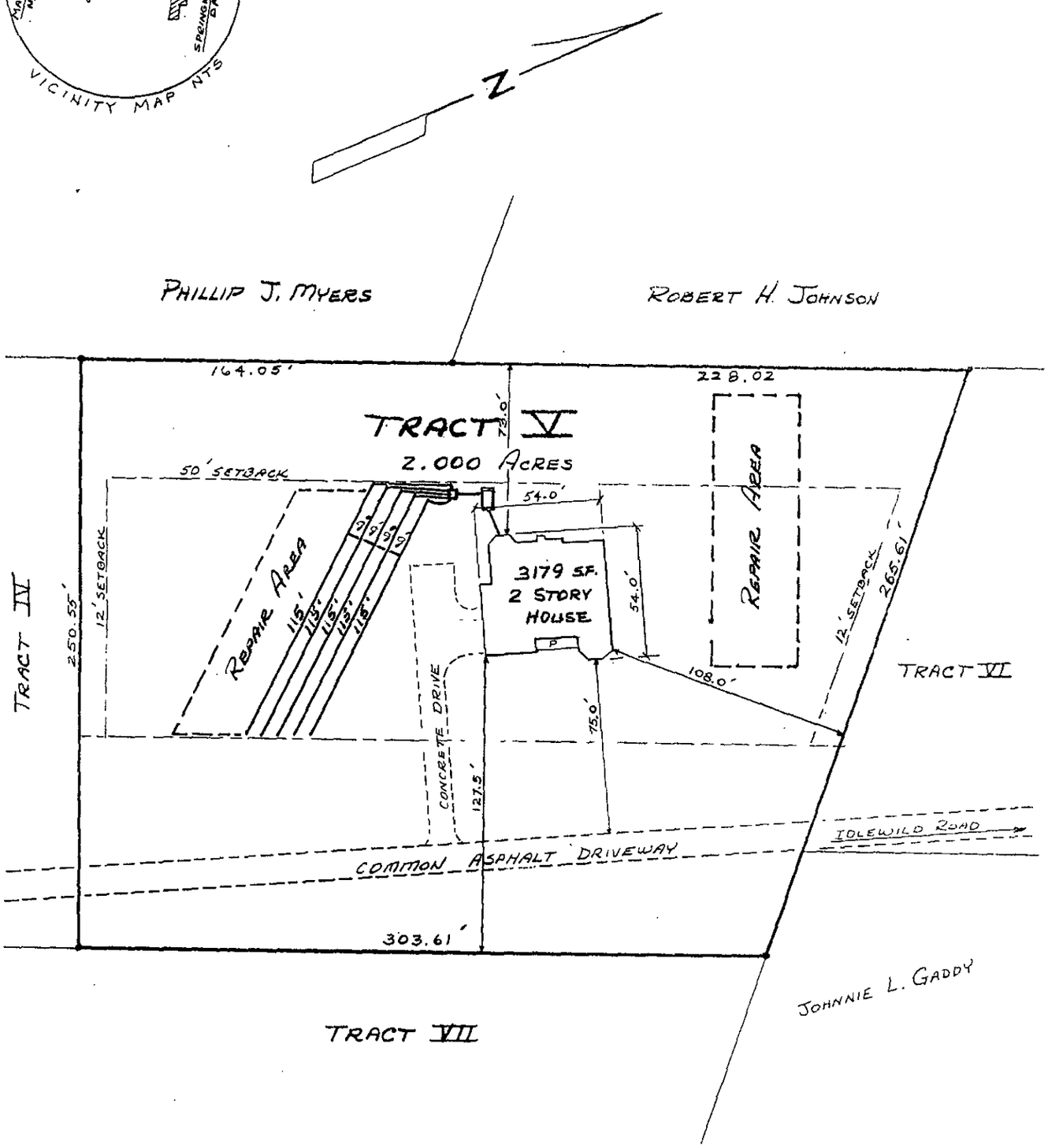
MORNING STAR TOWNSHIP, MECKLENBURG COUNTY, N.C.

MAP RECORDED IN BOOK _____ AT PAGE _____

DEED RECORDED IN BOOK 995 AT PAGE 664Z

TAX CODE # 215-152-72





SPURLOCK HOMES, INC
611 Greenfield Dr.
Monroe, NC 28112
(704) 764-7562

SCALE 1" = 60.0'

FILE #

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

#1 (400)

Sheet 1
PROPERTY ID #: 215-152-72
Lot # : Tract E
File # : 2590A

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Johnnie L. Faddy
APPLICANT: Steven Schaffer
ADDRESS: 13900 Dillsworth Road, Matthews N.C.
DATE EVALUATED: 7-15-96
PROPOSED FACILITY: residence
PROPOSED DESIGN FLOW (.1949): 400gpd
PROPERTY SIZE: 2.0 A
LOCATION OF SITE: Dillsworth Road
PROPERTY RECORDED:
WATER SUPPLY: ☐ Private ☑ Public ☐ Well ☐ Spring ☐ Other Community
EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	Slope 3-10% .1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LS	0-6"	gr/cl	Fr/SEXP/SS/SP	>46" TO soil wetness	46"	N/A	None	.275 gl/P2 PS IV
		6-46"	3BK/C	Fi/SEXP/SP					
		46-46+	3BK/C	Fr-Fi/SEXP/SS/SP					
2	LS	0-7"	gr/cl	Fr/SEXP/SS/SP	>47" TO soil wetness	47"	N/A	None	.275 gl/P2 PS IV
		7-47"	3BK/C	Fi/SEXP/SS/SP					
3	LS	0-5"	gr/cl	Fr/SEXP/SS/SP	>48" TO soil wetness	48"	N/A	None	.35 gl/P2 PS IV
		5-46"	3BK/C	Fi/SEXP/SP					
4	LS	0-6"	gr/cl	Fr/SEXP/SS/SP	>46" TO soil wetness	46"	N/A	None	.35 gl/P2 PS IV
		6-46"	3BK/C	Fi/SEXP/SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): Provisionally Suitable
EVALUATED BY: [signature] 7-17-96
OTHER(S) PRESENT: LSS

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

Sheet 2
PROPERTY ID #: _____
Lot # : _____
File # : 2590B

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: _____ APPLICANT: _____
ADDRESS: _____ DATE EVALUATED: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: _____ PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
5	LS	0-6"	gr/cl	Fr/SEAP/SS/SP	7-46" TO soil wetness	48"	N/A	None	PS .39/F2 IV
		6-46"	SBK/C	Fi/SEAP/SS/P					
6	LS	0-4"	gr/cl	Fr/SEAP/SS/SP	7-48" TO soil wetness	46"	N/A	None	PS .39/F2 IV
		4-46"	SBK/C	Fi/SEAP/SS/P					
7	LS	0-8"	gr/	Fr/SEAP/SS/SP	7-46" TO soil wetness	46"	N/A	None	PS .39/F2 IV
		8-46"	SBK/C	Fi/SEAP/SS/P					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: _____
OTHER(S) PRESENT: _____

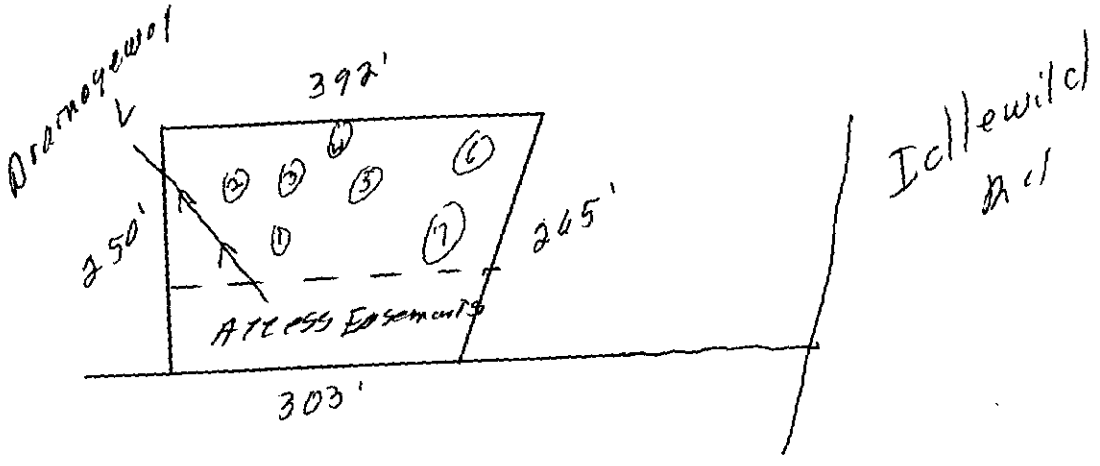
FILE # 23903

COMMENTS Not sure if 1000 Report is required

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR
R-RIDGE	I	S-SAND	1.2-0.8
S-SHOULDER SLOPE		LS-LOAMY SAND	
L-LINEAR SLOPE			
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6
N-NOSE SLOPE		L-LOAM	
H-HEAD SLOPE			
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM	
T-TERRACE		CL-CLAY LOAM	
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM	
	IV	SC-SANDY CLAY	0.4-0.1
		SIC-SILTY CLAY	
		O-ORGANIC	

CONSISTENCE	
MOIST	WET
VFR-VERY FRIABLE	NS-NON-STICKY
FR-FRIABLE	SS-SLIGHTLYSTICKY
FI-FIRM	S-STICKY
VFI-VERY FIRM	VS-VERY STICKY
EFI-EXTREMELY FIRM	NP-NON-PLASTIC
	SP-SLIGHTLYSTICKY
	P-PLASTIC
	VP-VERY PLASTIC

STRUCTURE	MINERALOGY
SG-SINGLE GRAIN	SLIGHTLY EXPANSIVE
M-MASSIVE	
CR-CRUMB	EXPANSIVE
GR-GRANULAR	
SBK-SUBANGULAR BLOCKY	
ABK-ANGULAR BLOCKY	
PL-PLATY	
PR-PRISMATIC	



PROPOSED PLOT PLAN

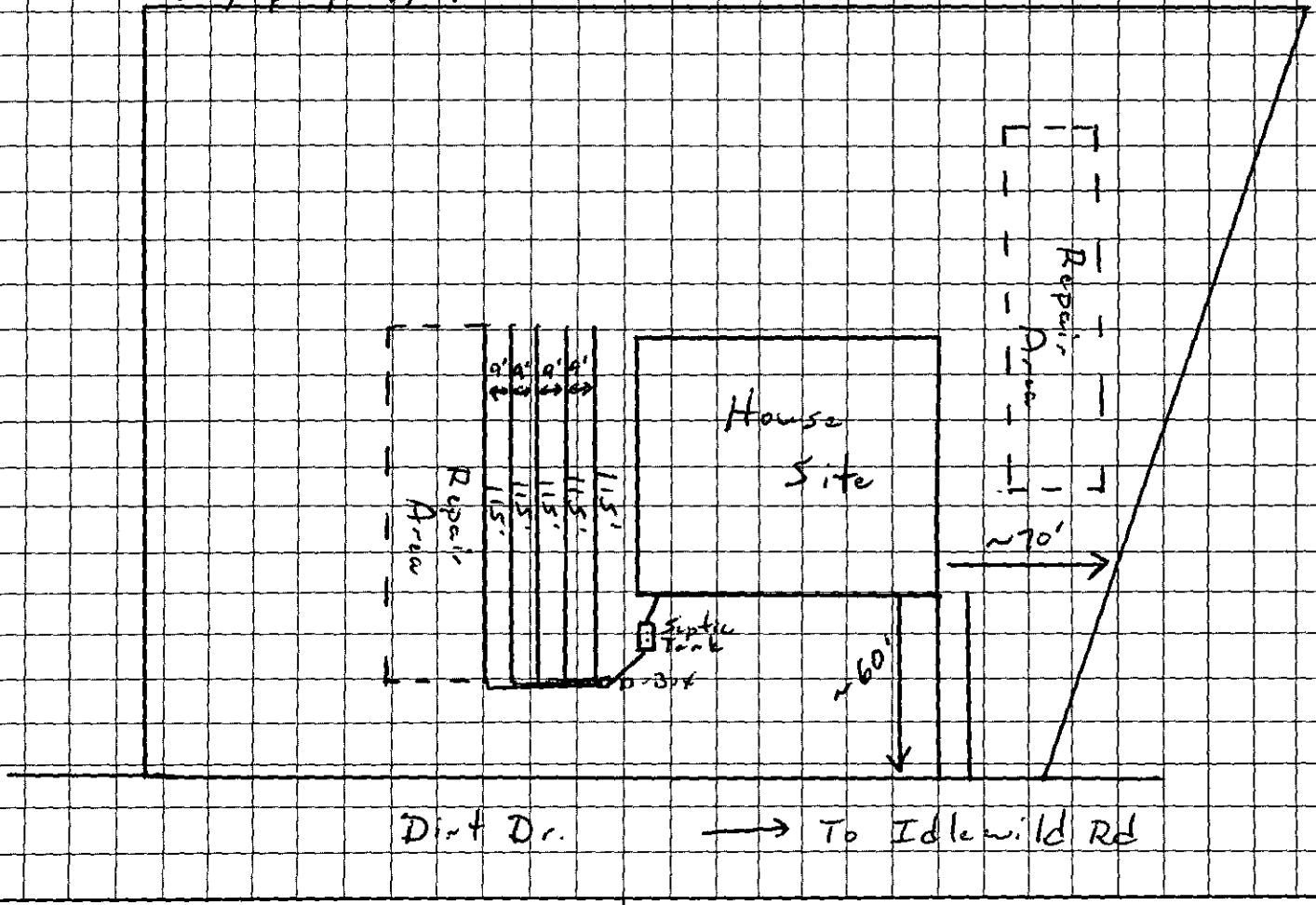
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 2590 B

TC: 215-152-72

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.

1) Scale 1" = 60'
2) Keep lines level and on contour of land.
3) Keep trenches shallow - 24" maximum
4) Keep all parts of septic system at least 5' from any building foundation.
5) Keep all parts of septic system at least 100' from any well.
6) Keep all parts of septic system at least 10' from any property line.



APPROVAL DATE _____

OWNER/AGENT SIGNATURE

DATE

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

FEE: 100.00 ck # 1239
DATE: 7-3-98 VC

APPLICATION FOR IMPROVEMENT PERMIT FOR RESIDENTIAL SITE INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM

[ ] CRT

TYPE APPLICATION: ___ NEW SYSTEM __ EXPANSION/ ALTERATION OF EXISTING SYSTEM ___ REPAIR OF EXISTING SYSTEM

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

FILE #: 2570B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 215-152-72

STREET ADDRESS: ~~13902~~ Idlewild Road

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: TRACT #E

TYPE OF BUILDING (CHECK ONE):

___ SINGLE MOBILE HOME(S)
___ DOUBLE WIDE (D)
✓ HOUSE (H)
___ MODULAR HOME (M)
___ MULTIPLE FAMILY (U)
___ OTHER (O)

HEATED SQUARE FOOTAGE: 4400

NUMBER OF BEDROOMS: ~~3~~ 4 NUMBER OF OCCUPANTS: 3

FOUNDATION FOR RESIDENCE:

___ WITHOUT BASEMENT
___ ON SLAB
X CRAWL SPACE
___ WITH BASEMENT /PLUMBING
___ WITH BASEMENT /NO PLUMBING

TOWNSHIP (CHECK ONE):

___ 0 MECKLENBURG
___ 1 CHARLOTTE
___ 2 DAVIDSON
___ 3 CORNELIUS
___ 4 PINEVILLE
___ 5 MATTHEWS
___ 6 HUNTERSVILLE
___ 7 MINT HILL

CLOSING DATE_____

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: ___ YES ✓ NO TYPE: _____

WATER SUPPLY (CHECK ONE):

✓ COMMUNITY (C)
___ MUNICIPAL (M)
___ PRIVATE WELL (P)
___ SHARED WELL (S)
___ OTHER 'SPRINGS' (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES ___ YES ___ NO
EXISTING WASTEWATER SYSTEMS ___ YES ___ NO
EASTMENTS OR RIGHT-OF-WAYS ___ YES ___ NO
WELL, SPRINGS OR WATERLINES ___ YES ___ NO
DESIGNATED WETLANDS ___ YES ___ NO

PROPERTY OWNER:	LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:
NAME: Gaddy (LAST) Johnnie (FIRST) L. (MI)	NAME: SCHAFFER (LAST) STEVEN (FIRST) D. (MI)
ADDRESS: 13900 Idlewild Rd	DAYTIME PHONE: 704 783 - 0963
CITY: Matthews STATE: NC ZIP: 28105	7108 Benhaet Dr
DAYTIME PHONE: ( ) —	Raleigh, NC 27613

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. 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: _____ DATE: 7/3/98

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

2906
215-152-72

215-152-72

JULY 6, 1998

CHARLOTTE - MECKLENBURG HEALTH DEPT.

RE: 13900 IDLEWILD ROAD
TRACT 5
MATTHEWS, NORTH CAROLINA

GENTLEMAN:

PLEASE BE ADVISED THAT I DO GRANT AUTHORITY TO PERFORM A SOIL TEST AT THE ABOVE LOCATION. MR. STEVE SCHAFFER IS REQUESTING THE TEST TO DETERMINE SUITABILITY OF THE PROPERTY FOR HOME CONSTRUCTION.

IF YOU HAVE ANY QUESTIONS OR NEED ANY ADDITIONAL INFORMATION DO NOT HESITATE TO CALL.

SINCERELY,
Johnnie L. Gaddy

JOHNNIE GADDY
13900 IDLEWILD ROAD
MATTHEWS NC 28105
847-6536

8'

LINE

5'

98'

11'

11'

11'

13'

18'

25'

65'

28'8"

20'

5'

18'2"

5'

17'

18'

DRIVEWAY

245'

20'

IDELWILD ROAD

13900 IDELWILD ROAD

SCALE: 1" = 20'	APPROVED BY:	DRAWN BY STEVE S.
DATE:		REVISED

STEVEN & ANITA SCHAFFER

DRAWING NUMBER

392'

PHILLIP & LAURA MYERS

STEEL ROAD

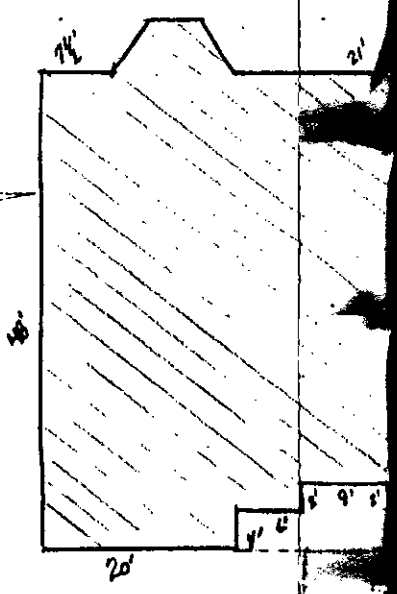
ROBERT E. & SARA JOHNSON

164'

N 1/2

189'9'

250'



— RIGHT OF WAY —

303'

10 X 56