

3029 POLK AND WHITE RD

02934115

12/31/2007

duponbj

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

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Sheet: 1 of 2
Property ID: 105-142-13
Lot #:
File #: 2380B
Code: 3

ACS

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Vyacheslav & Sophia Agafonov
Applicant:
Address: 8121 Tremaine Ct., Charlotte, N. C. 28227
Date Evaluated: 4/19/2005
Proposed Facility: Residence
Design Flow (.1949): 360gpd
Property Size: .6a
Location of Site: 9200 Pinenoll Lane
Property Recorded:
Water Supply: [x] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [ ] Auger boring [x] Pit [ ] Cut
Type of Wastewater: [x] 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 (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS, 15	0-21	GR/SCL	FR/SEXP/SS/SP	2.5Y7/1 at 21"	60	N/A	NONE	US
		21-45	SBK/SC	VFI/EXP/VS/VP					
		45-60	M/C	"					
2	"	0-9	GR/SCL	FR/SEXP/SS/SP	2.5Y7/1 at 22"	58	"	"	"
		9-22	SBK/SCL	"					
		22-58	SBK/SC	VFI/EXP/VS/VP					
3	"	0-14	GR/SCL	FR/SEXP/SS/SP	2.5Y7/1 at 14"	64	"	"	"
		14-64	SBK/SC	VFI/EXP/VS/VP					

Description	Initial System	Repair System
Available Space (.1945)	US	
System Type(s)		
Site LTAR		

Other Factors (.1946):
Site Classification (.1948): UNSUITABLE
Evaluated By: W. R. Marlin, LSS, 5/20/2005, W. R. Marlin
Others Present: S. Agafonov, B. McCarver

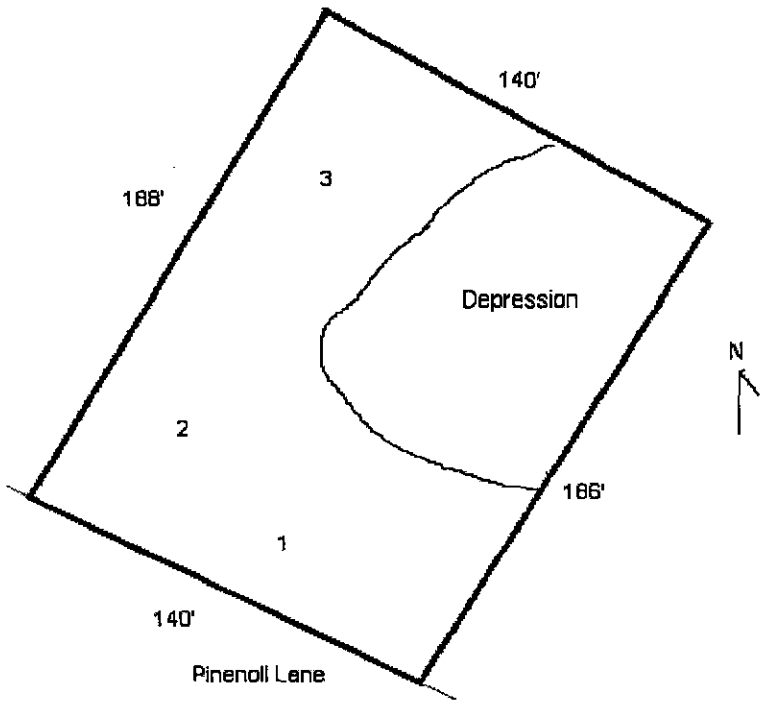
COMMENTS:

Topsoils of profiles 1 & 2 very wet

Landscape Position	**Group**	**Texture**	**.1955 LTAR**	**Structure**
R-Ridge	I	S-Sand	1.2 - 0.8	SG-Single Grain
SS-Shoulder Slope		LS-Loamy Sand		M-Massive
LS-Linear Slope				CR-Crumb
FS-Foot Slope	II	SL-Sandy Loam	0.8 - 0.6	GR-Granular
NS-Nose Slope		L-Loam		SBK-Subangular Blocky
HS-Head Slope				ABK-Angular Blocky
CC-Concave Slope	III	SI-Silt	0.6 - 0.3	PL-Platy
CV-Convex Slope		SICL-Silty Clay Loam		PR-Prismatic
T-Terrace		CL-Clay Loam		
FP-Flood Plain		SCL-Sandy Clay Loam		
	IV	SC-Sandy Clay	0.4 - 0.1	
		SIC-Silty Clay		
		C-Clay		

Consistence Moist	**Consistence Wet**	**Mineralogy**
VFR-Very Friable	NS-Non-Sticky	SEXP-Slightly Expansive
FR-Friable	SS-Slightly Sticky	EXP-Expansive
FI-Firm	S-Sticky	
VFI-Very Firm	VS-Very Sticky	
EFI-Extremely Firm	NP-Non-Plastic	
	SP-Slightly Plastic	
	P-Plastic	
	VP-Very Plastic	

Sketch of Soil Evaluation Locations



Waiting for paperwork re T. & V. entry from Mike Thornwell

Application not processed on CRT - Inspection completed by P.W.

Per Directions to Mike on 12/15/17 3:28

Vendor Table Int dept. Address

Do a JV from dept expenditure acct to our revenue acct.

OTS	Rev acct
3620	3623

$50.00

Send us a copy of J.V.

Send Susan a copy of J.V.

LENBURG COUNTY HEALTH DEPART
SUPPLY ORDER FORM

TE: _____

_

COUNT MBER	ITEM DESCRIPTION (List stock number, color, identifying information)

Chick W/
Susan 12211
About JV
Procedure

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

4" Copy of SS attached for 1988 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 2380B

PERSON FILING APPLICATION:
NAME: Thornwell, Mike (last) (first) (mi)
ADDRESS: 700 N Tryon St PHONE: (__) 4319
CITY: Charlotte, NC 28269 STATE: ZIPCODE:

Date: Dec. 5, 1997

PROPERTY OWNER:
NAME: Barringer John Henry (last) (first) (mi)
ADDRESS: 3029 Point White Rd PHONE: (__) 547-0298
CITY: Charlotte, NC STATE: ZIPCODE: 28269

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 029-341-15
STREET ADDRESS: 3029 Point White Rd.
Charlotte, NC 28269
ZONING:

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
[X] 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):

[redacted] WXS for New House

[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (N)

[redacted] 1953 originally
[] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
[redacted]

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: 3 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 [X] 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: [signature] Date: 12/12/97

NOTICE:

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 approval is granted by this Department.

...This permit is not transferable.

... Approval for 3 bedroom residence

Use existing system

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

Philip S. Walker R.S. 12/5/97
Environmentalist Date

Director or Authorized Section Head Date

WATER : 122791

Fund GRNT Org CDEV Acct 8000

Act.: 7100 Prg 00408CP1

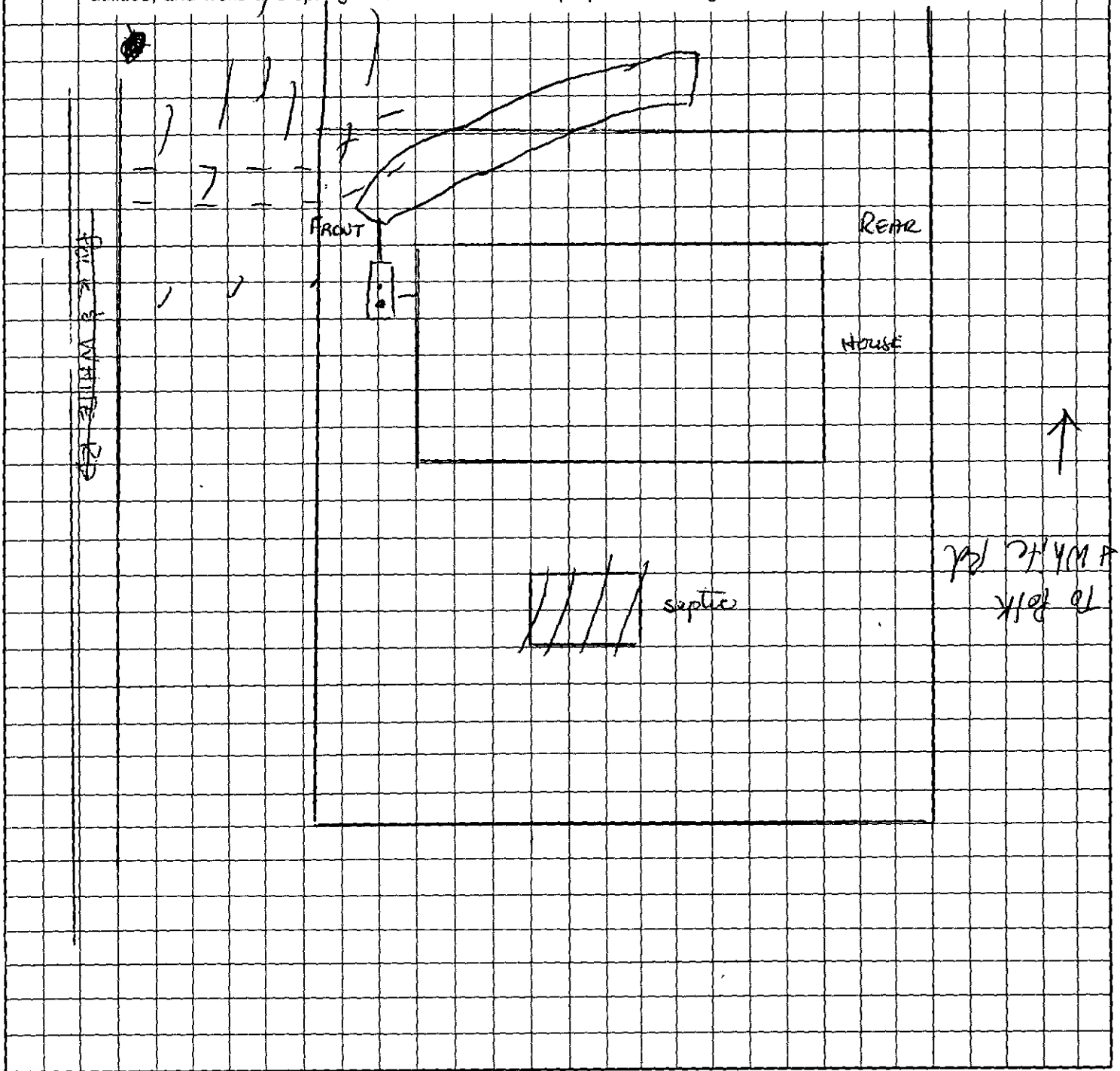
PROPOSED PLOT PLAN

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

FILE: 23808

TC: 029-341-15

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.



OWNER/AGENT SIGNATURE

DATE 12-12-97

APPROVAL DATE 7/W 12/5/97 VES

White - Health Department's Copy

Canary - E.H.S. Copy

Pink - Owner's Copy

MECKLENBURG COUNTY

JOURNAL VOUCHER # FIN 0000 1192

PREPARED BY: RWilson DATE: 1/28/98

APPROVED BY: ~~Bobbie Sb~~ Robin Wilson

KEYED BY: RW

BATCH TOTAL:

DESCRIPTION	FUND	AGCY	ORG	ACT	REV./ OBJEC	SUB/ OBJ/REV	BS ACCT	AMOUNT	DR CR
INSPECTION FEE FOR SEPTIC TANK	GRNT	ENG	CDEV	8000	7100			50.00	DR
	GRNT						1000	50.00	CR
	0001	ENH	3620		3650			50.00	CR
	0001						1000	50.00	DR
BUILDING PERMIT FEE	9001	ENG	CRES	8000	9110			33.00	DR
	9001						1000	33.00	CR
	0001	ENG	3050		3122			33.00	CR
	0001						1000	33.00	DR
PERMIT FEE	GRNT	ENG	CDEV	8000	7100			320.04	DR
	GRNT						1000	320.04	CR
	0001	ENG	3050		3122			320.04	CR
	0001						1000	320.04	DR

C:\MY DOCUMENTS\JVFORM