

3525 KIDD LN

03709211

5/15/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

0400

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

FILE: 4094 A DATE: 5/27/94

TC: 037 092 11 ☐ L ☐ CRT

SERIAL № 15922

Name of Owner Gary King Juris.:

Address of Property 3525 Kidd Ln

Inspection Data:

Tank Material 1500

Total Length of Drainfield 270'

Number of Lines 4 @ 67'

Cover Depth 12" - 18"

Water Supply Source existing well

Distance to Water Source 100'+

Excavation Inspected 5/27/94

Tank(s) Inspected 5/27/94

Wash Line Inspected —

High Water Alarm Inspected —

PLOT

Design: 1994, 1500ST, CON, 888SFT, 12" stone ceil CTR# Gary King

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~~ 15A 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: Septic system designed for 2 bedroom residence

Type II

Phillip S. Walker

Environmentalist

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

5/24

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

Approval
2400

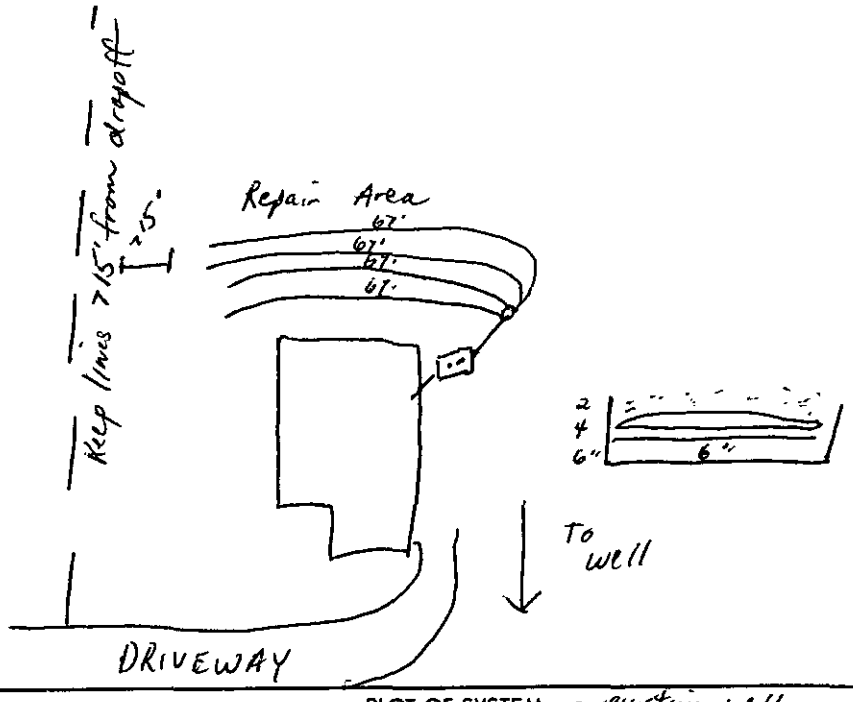
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 4094A DATE: 5/24/94

TC: 037 092 11 ☐ L

SERIAL Nº 15719

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 5/15/94. All work shall be completed on or before 6/24/94, 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 ⊗ existing well

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 270' feet

Number of Lines 4 (67')

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line _____ feet

Distance from Well existing well 100'+ feet

NAME OF OWNER Gary King

LOCATION OF PROPERTY 3525 Kidd Ln

Comments: 1500ST, 4 lines x 67' long x 3' wd x 12" stone / Keep lines on contour of land / Keep lines >15' from dropoff. Keep septic system >50' from well and >10' from water line.

Division or Section Head

Phila A. Walker
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

4094A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

Pd $200 cash 3/4/94 DK

[ ] 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

Date:

PERSON FILING APPLICATION:

NAME: KING (last) GARY (first) J. (mi)

ADDRESS: 3725 KIDD LN. PHONE: (704) 336-2049 (mi) WORK 399-5552 HOME

CITY: CHARLOTTE, N.C. STATE: ZIPCODE: 28216

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 03709211

STREET ADDRESS: 3525 KIDD LN. CHARLOTTE, N.C.

ZONING:

PROPERTY OWNER:

NAME: SAME AS ABOVE (last) (first) (mi)

ADDRESS: PHONE: (__) __

CITY: STATE: ZIPCODE:

SUBDIVISION OR MOBILE HOME PARK NAME:

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

LOT NUMBER: LOT SIZE (in acres): 3.80 ACRES

TYPE APPLICATION (check one):

[ ] 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 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) [x] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: 2 NUMBER OCCUPANTS: 3

SYSTEN 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 [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: 04 MARCH, 1994

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.

... Use existing well (well >100' from proposed septic system layout.

[ ] 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 A. Walker R.I. 3/15/94
Environmentalist Date

P. Walker for S. Daniel 3/15/94
Director or Authorized Section Head Date

WATER : 122791

Mecklenburg County

Health Department

Betty S. Snow, R.N., M.A.
Health Director

March 2, 1994

Gary J. King
3525 Kidd Lane
Charlotte, NC 28216

RE: Property located at Kidd Lane
FILE: 4094A
PARCEL: 037-092-11PO

Dear Mr. King:

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 results of this investigation showed the property to be classified **UNSUITABLE** for the installation of such a system. A copy of the Site Evaluation Report (Serial Number 20238) is enclosed.

State regulations provide that sites originally classified unsuitable may be utilized for the installation of alternate or modified sewage disposal systems provided the requirements of 15A NCAC 18A .1948 (d) are met. A reprint of this section is enclosed for your information.

Should you desire to file for permission to install an alternate or modified sewage treatment system on the property, 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. They will be reviewed, and if it is determined that the proposed system may reasonably be expected to function satisfactorily, an Improvement Permit will be issued by the Department upon completion by you, of a formal request for lot reclassification.

If there are any questions, please contact Bill Marlin at 336-5574.

Sincerely,

Kelly Randall, R.S., Soil Scientist
Individual Water and Wastewater Systems

KR:lw
Enclosure (2)

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 20238

File: 4094A

Action 2

Parcel: PO 037-092-11

☐ PC

Location: Kidd Lane

Subdivision:

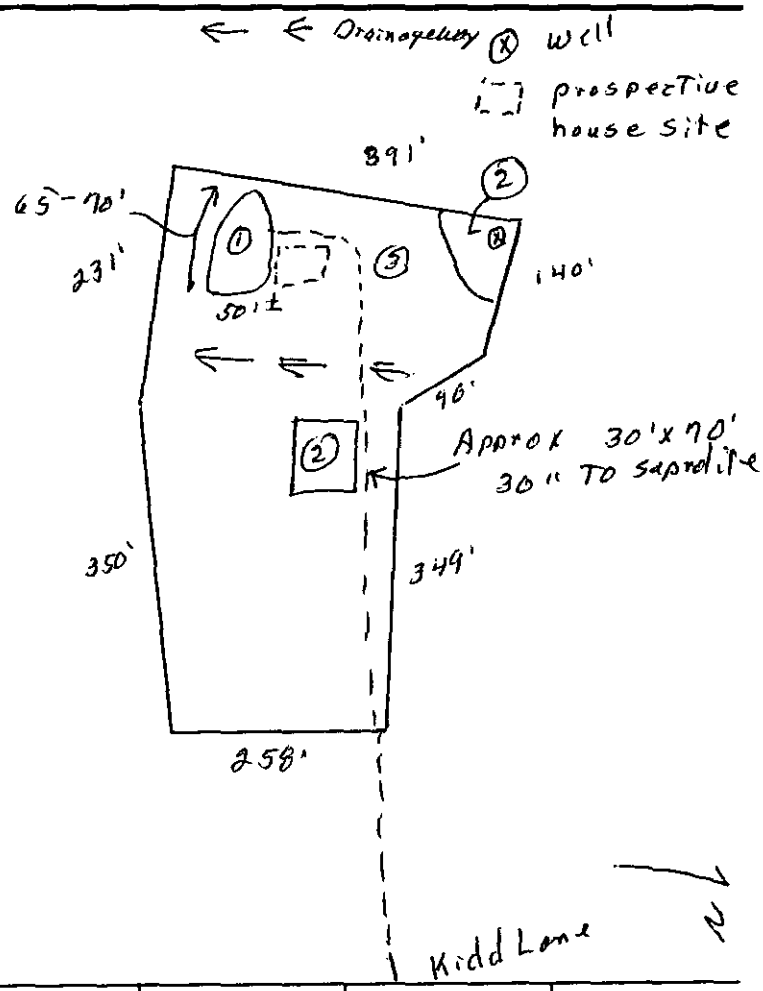
Lot: Block: Acres: Approx 1.0

Owner: Gary J. King
Address: 3525 Kidd Lane
Charlotte, N.C. 28216

Comments: Lot does not require 100% repair, 3 gal/ft/day LTAR

Described by: William R. Mullis

Date: 3-1-94



*** 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 2-8%	(S) PS U 2-8%	S PS U	S PS U	S PS U
Texture	S (PS) U slightly Expansive clay	S (PS) U slightly Expansive clay	S PS (U) Expansive Clay	S PS U	S PS U	S PS U
Structure	S (PS) U +2 Subt Blocky	S (PS) U Subt Blocky	S (PS) U Subt Blocky	S PS U	S PS U	S PS U
Drainage	S (PS) U 740" ~~TO~~ Water	S (PS) U 736" To water	S PS (U) some perched water 24"	S PS U	S PS U	S PS U
Depth	S (PS) U 40"	S PS (U) 26"-30"	S PS (U) 12-30"	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 740"	S (PS) U 736"	S (PS) U 736"	S PS U	S PS U	S PS U
Available Space	S PS (U) Restricted	S PS (U) Restricted	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	IV Cecil Lilly	IV Pacolet Lilly	Series Not Determined			
Area Classification	S PS (U)	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

02/08/94

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

4094A

CK#0501 $50.00 [] 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

PERSON FILING APPLICATION:

NAME: KING (last) GARY (first) J. (mi)

ADDRESS: 3525 KIDD LANE PHONE: (704) 399-5552

CITY: CHARLOTTE, N.C. STATE: ZIPCODE: 28216

Date: 08 FEB. 94

PROPERTY OWNER:

NAME: SAME AS ABOVE (last) (first) (mi)

ADDRESS: _____ PHONE: (___) _____

CITY: STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 03709211

STREET ADDRESS: 3525 KIDD LN.

ZONING: R-3

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

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: LOT SIZE (in acres): 3.80 AC

TYPE APPLICATION (check one):

[X] 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) [] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [X] MODULAR HOME (M) [] OTHER _____ (O)

NUMBER BEDROOMS: 2 NUMBER OCCUPANTS: 3

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 [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: Gary J. King Date: 08 FEB. 94

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 : 122791

MECKLENBURG COUNTY

Department of Environmental Health
December 15th, 1987

John L. Irvin
3607 Kidd Lane
Charlotte, NC 28216

RE: Property located at Kidd Lane
FILE: 4094A
PARCEL: 03709211

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. Results of the investigation revealed that the lot contains soils which have been classified as PROVISIONALLY SUITABLE in accordance with the provisions of 10 NCAC 10A .1900. A copy of the Site Evaluation Report (Serial Number 14771) deliniating the soil types and their respective classifications is enclosed.

While this classification indicates the site is acceptable for the installation of a septic tank system, no specific system or plans have been approved. The area available for such an installation may impose limitations on the size and/or type construction permitted on the lot. Specific plan approval will be provided upon submission of 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 and determination that the area is adequate to accomodate the proposed construction.

Please note that this classification may be revoked if any filling, grading or construction (including the drilling of a well) is performed on the lot which in the opinion of this Department renders any area previously designated suitable for system installation, unsuitable. Futhermore, this approval may be revoked should any changes occur in the regulations under which it was granted, if such changes would have prevented its approval had they been in effect on the date of issuance.

If there are any questions concerning this matter, do not hesitate to contact me.

Sincerely,

Sylvia D. Daniel, R.S.
Environmental Health Supervisor
Environmental Resources Division

enclosure

#30.00 Paid 11-09-87 rec

APPLICATION FOR SOIL INVESTIGATION

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

FILE: 4094A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: 3525 Kidd Ln. Chas.

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

⑤ PARCEL REFERENCE: BOOK NO.: 037-092-11 PAGE NO.: _____ PARCEL NO.: 037-092-11

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

OWNER

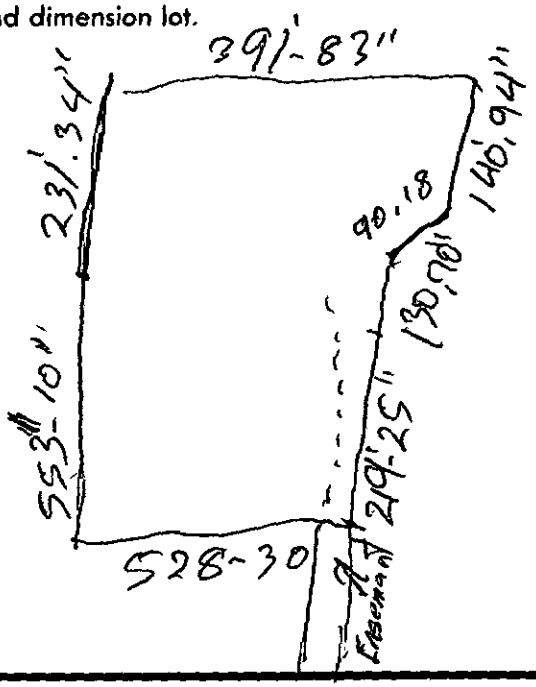
⑦ NAME: John (FIRST) L (MIDDLE) Irvin (LAST)

⑧ MAILING ADDRESS: 3607 Kidd Ln

⑨ CITY: Chas. ⑩ STATE: N.C. ⑪ ZIP: 28216

⑫ PHONE: (WORK) _____ (HOME) 391-7815

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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: John L Irvin Sr.

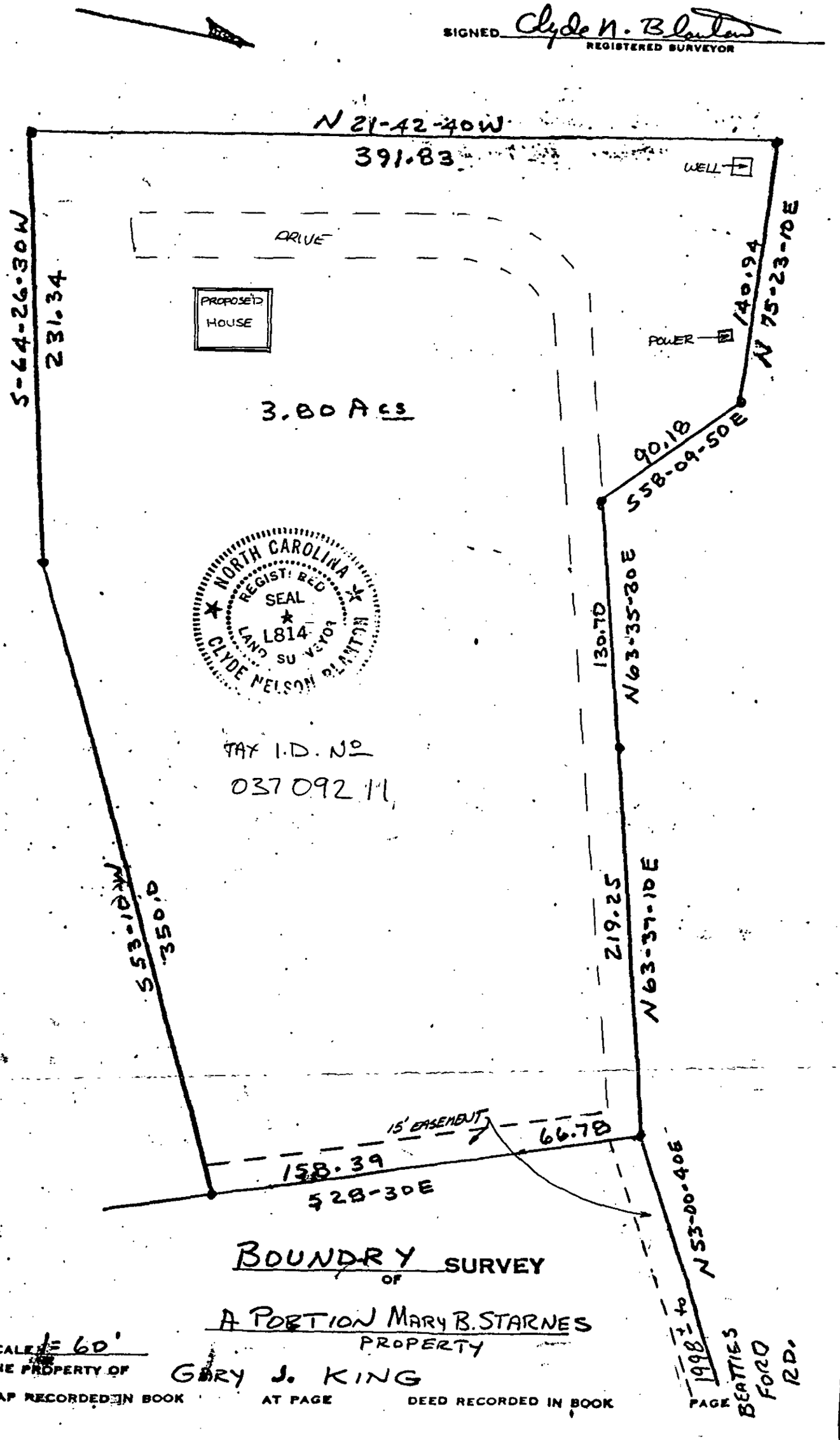
Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

Date: 11-9-87

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY

THIS IS TO CERTIFY THAT ON THE 18th DAY OF JAN 1981 I, SURVEYED THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE TITLE LINES AND THE WALLS OF THE BUILDINGS IF ANY ARE SHOWN HEREON.

SIGNED Clyde N. Blanton
REGISTERED SURVEYOR



BOUNDRY SURVEY
OF
A PORTION MARY B. STARNES PROPERTY

SCALE 1" = 60'

THE PROPERTY OF GARY J. KING

MAP RECORDED IN BOOK AT PAGE DEED RECORDED IN BOOK PAGE

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 14771

File: 4094A Action 4

Parcel: 03709211 ☐ PC

Location: Kidd Lane

Subdivision:

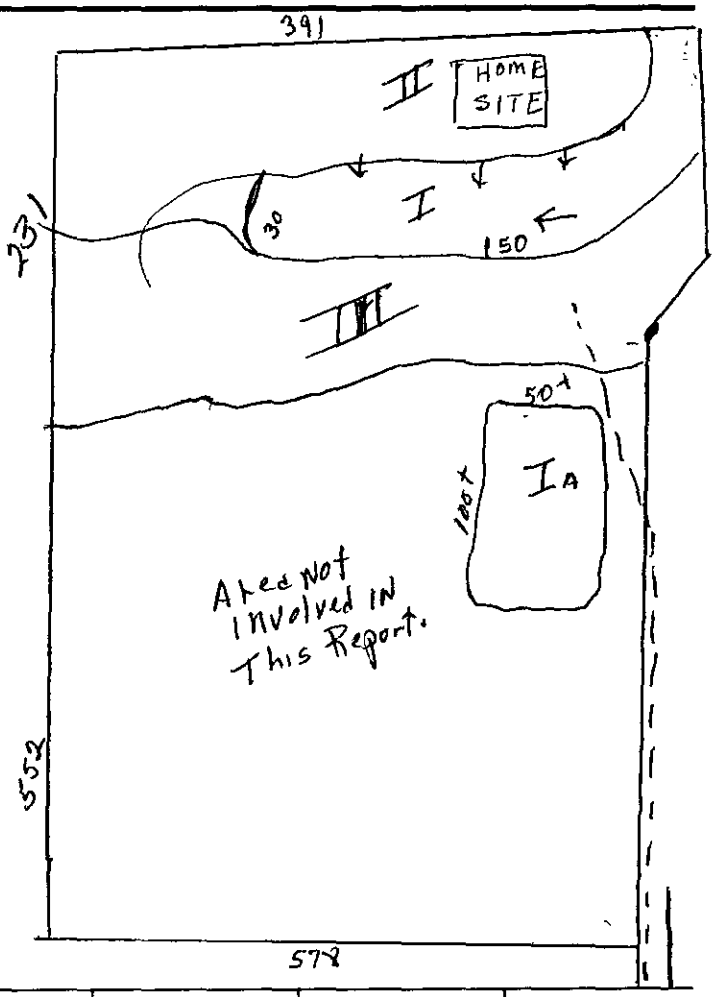
Lot: Block: Acres: 1 P.O.3.5A

Owner: John L. Irvin
Address: 3607 Kidd Lane
Charlotte, NC 28216

Comments: IA To Be Used As Repair Area

Described by:

Date:



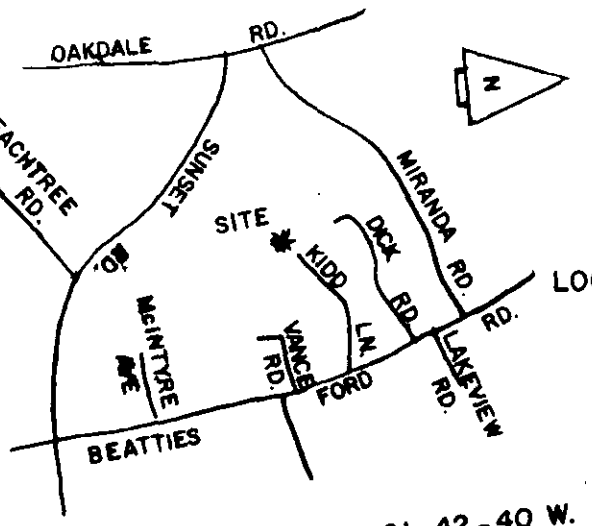
***** EVALUATION KEY *****

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 4–10	S (PS) U 2–8	S (PS) U 2–10	S PS U	S PS U	S PS U
Texture	S (PS) U	S PS (U) 2–1	S PS (U) Mixed Clay	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) Drainageway	S PS U	S PS U	S PS U
Depth	S (PS) U 36–38	S PS (U) 20–30	S PS (U) 15–30	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	IVb Cecil	IVb Enon	IVb Enon Like			
Area Classification	S (PS) U	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

CRAIG L. LONG R.L.S.
21030 BETHEL CHURCH ROAD
DAVIDSON, NORTH CAROLINA
28036
704-892-0621

NORTH CAROLINA REGISTERED SEAL L-2993 LAND SURVEYOR CRAIG L. LONG



LOCATION MAP
N.T.S.

6903-172
T.W. KISSEE

N. 21-42-40 W. 391.83' I.F.

TIE LINE N. 3-30-30 W. 144.19'

I.F.

231.34'

45' REAR LINE

48.64'

48.26'

50'

27.6"

15'-9"

12'

30'

PROP. FOUNDATION

Existing well

N. 75-23-10 E. 140.94'

I.F.

Repair Area 4 lines x 67' long

Keep septic drainfield 15' from property

S. 64-26-30 W. 350.00'

S. 58-09-50 E. 90.18'

I.F.

1500 ST
4 lines x 67' long x 3' wd x 12" stone
270 TLF

Keep septic system > 50' from any well
Keep septic drainfield > 15 from dropoff.

Repair Area
no 100% repair area required

Existing well to be used

Gary James King
15 MARCH '94

N. 63-35-30 E. 130.70'

6' SIDE LINE

I.F.

N. 63-37-10 E.

I.F.

T. W. KISSEE
6903-172

6' SIDE LINE

S. 53-10 W.

R.C. EVANS JR.
5015-542

E.O.C > 1: 10,000
I.F. = IRON FOUND

3525 KIDD LANE
3.8 AC.
ZONING R3

JSW appr 3/15/94

219.25'

NORTH PER D.B. 7296-830

30' BLDG. LINE

I.F.

15' ACCESS ESMT.

S. 28-30 E. 225.18'

15' ACCESS ESMT.

I.F.

R.B. MAULDWIN
5353-983

BOUNDARY & PROPOSED FOUNDATION SURVEY OF
A PORTION MARY B. STARNES PROPERTY

PROPERTY OF **GARY JAMES KING & WF. LISA CAROL KING**
SCALE: 1" = 60' LONG CREEK TWSP MECK. CO. N. C. DATE: MAR. 11, 1994
AS RECORDED IN D.B. 7296-838 TAX CODE 0370921I