

PROPERTY WHERE RESIDENCE WAS LOCATED HAS BEEN SUBDIVIDED, ORIGNAL RESIDENCE DOES NOT EXIST

8/19/08

marliwr

Groundwater and Wastewater Services File Imaging Project
May 2007

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6.8.04
chg $100 VBD
B95890

AS ND 83676

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

☐ CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Nal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202
(704)336-5102 18580

PERSON FILING APPLICATION:
NAME: Young (last) JAY (first)
ADDRESS: 7911 Babe Stillwell Farm Rd (mi) PHONE: 704-947-7630
CITY: Huntersville STATE: NC ZIPCODE: 28078

te:

OPERTY INFORMATION (FROM ENGINEERING FORM):
X/PARCEL NUMBER: 00915344
REET DRESS: 7911 Babe Stillwell Farm Rd

WING:

JBDIVISION OR MOBILE HOME PARK NAME:

PROPERTY OWNER:
NAME: JAY YOUNG (last) (first) (mi)
ADDRESS: 15669 Birkdale Commons Pkwy PHONE: 704 947-7630
CITY: Huntersville STATE: NC ZIPCODE: 28078

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

LOT NUMBER: LOT SIZE (in acres):

YPE APPLICATION (check one):

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

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

ESIDENTIAL PROPERTY (Type Building, check one):
] SINGLE MOBILE HOME (S) ☐ HOUSE (H) ☐ MULTIPLE FAMILY (U)
] DOUBLE WIDE (D) ☐ MODULAR HOME (M) ☒ OTHER Garage (O)

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 3

SYSTEM CLASSIFICATION:

OMMERCIAL/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 ☐ None
☐ Garage ☐ Storage Building ☐ Deck/Patio ☐ Bedrooms ☐ Other

he undersigned, owner, or legal agent for the owner, of the property described above as the "JOB LOCATION" has read the oregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH EPARTMENT to enter onto the property for the purpose of processing this request.

Signed [signature] Date: 6-3-03

NOTICE:

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

...O.K. to use existing system for a detached garage

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

[signature] Jeremy Mitchell R.S. 6/15/04
Environmentalist Date

WATER : 122791

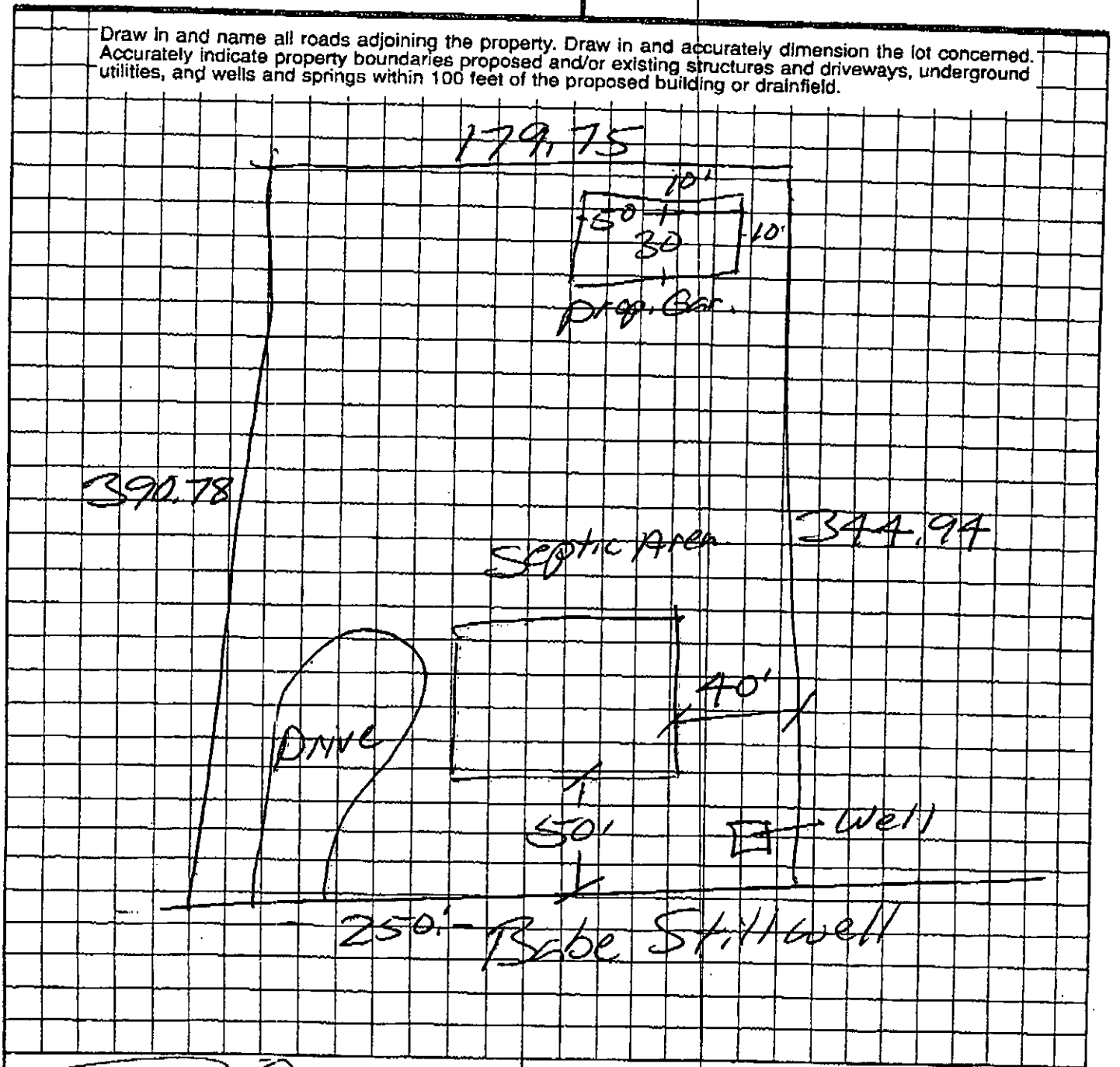
PROPOSED PLOT PLAN

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

FILE: _____

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.



OWNER/AGENT SIGNATURE _____

DATE 6-3-04

APPROVAL DATE _____

Canary - E.H.S. Copy

Pink - Owner's Copy

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	06/08/04	**Amount:**	100.00
Receipt #:	26190	**Tendered:**	100.00
Check / Auth #:	CHARGE	**Returned:**	0.00
Received By:	DAUGHVB		

Account Information

Account #: B55890
Contractor: YOUNG BUILDERS INC
Attn:
Address: 15669 BIRKDALE COMMONS PRKWY
Address:
City/State/Zip: HUNTERSVILLE, NC 28078

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	MH Exc/Add/Repl w/o System Mod 7911 BABE STILLWELL FARM RD		1	100.00	100.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
1,329.00					

009-157-13
'29

009-357-04

6.8.04
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garage

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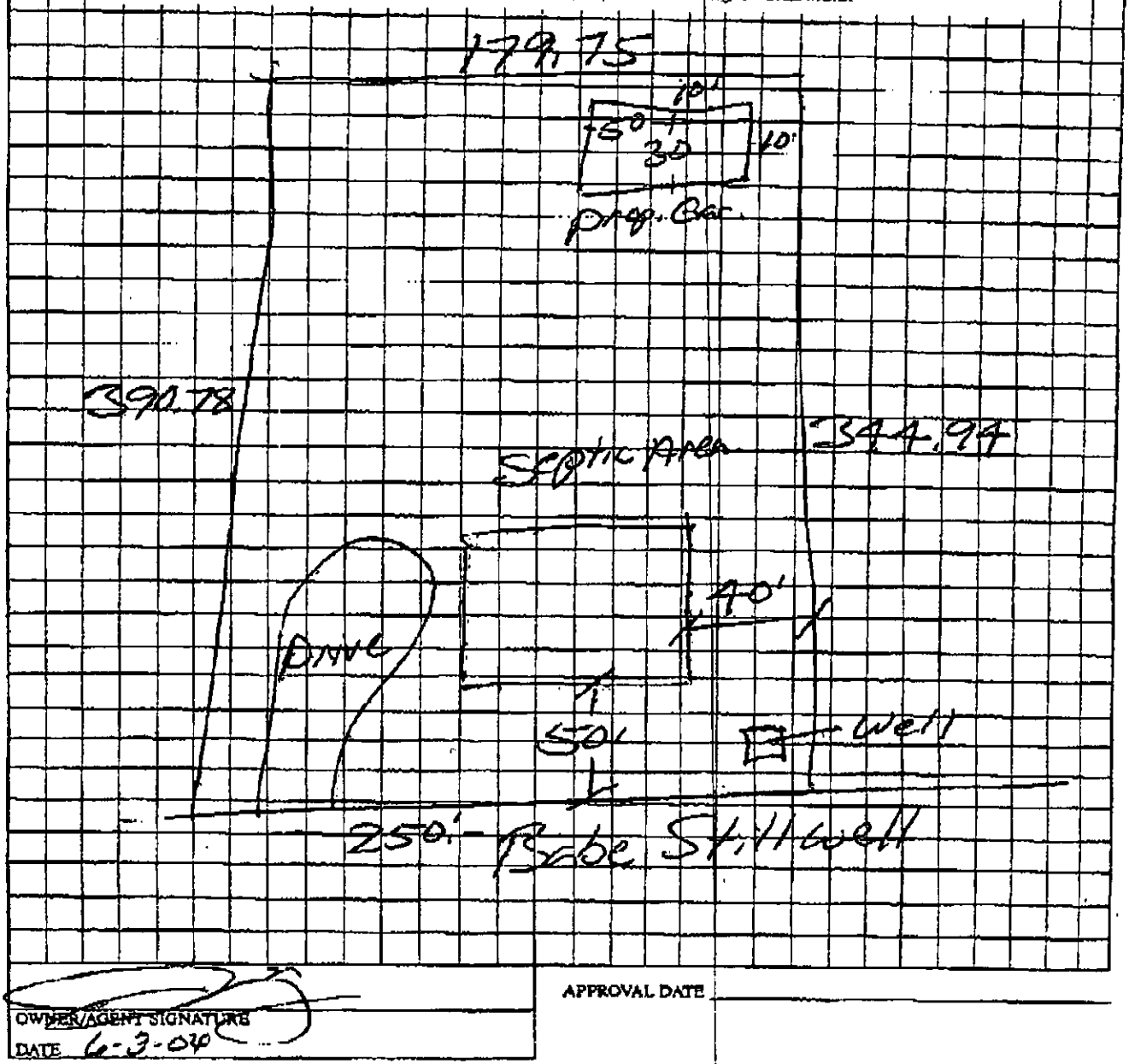
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PHONE (704) 336-5102

FILE: 18580

TO: 009-153-44

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