

6208 OLD PLANK RD

03508122

1/4/2008

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 4251B DATE: 06-01-2000

TC: 035-081-1170 ☐ L ☑ CRT

SERIAL № 18198

Name of Owner Kevin Barnes Juris.: _____

Address of Property 6208 Old Plank Rd.

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400'

Number of Lines 4 @ 100'

Cover Depth 6-12"

Water Supply Source Munic.

Distance to Water Source >50'

Excavation Inspected 06-01-2000

Tank(s) Inspected 06-01-2000

Wash Line Inspected N/A

High Water Alarm Inspected N/A

See Installation approval.

PLOT

Design 2000 1500ST 1200SFT MOD 126 PS- CTR# W. Christenbury

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 I5A NCAC 18A. 1900, "Laws And Rules For Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. This 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 I5A NCAC 18A. 1990 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.

Notice: Disturbance of the designated repair area may result in the suspension/revocation of this permit.

COMMENTS: System designed for a (2) Bedroom design Unit. Type ~~200~~ GHC

Joshua R. Sellers R.S.
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

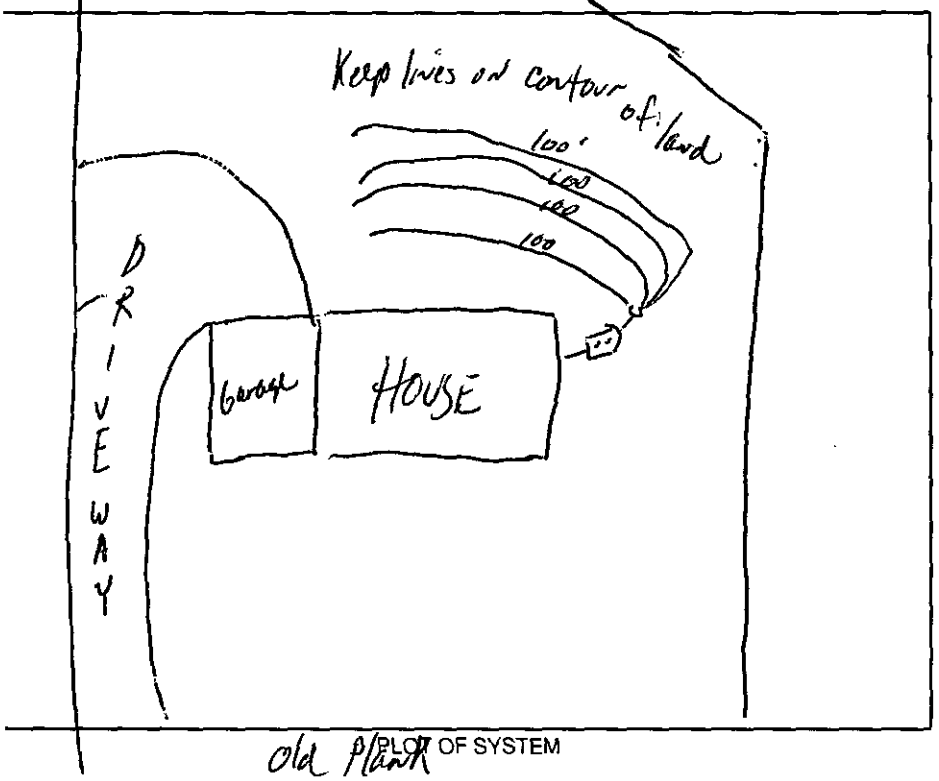
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 4251B DATE: 5/8/2000

TC: 035 081 07 Po ☐ L

SERIAL Nº 18372

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 3/14/00. All work shall be completed on or before 6/8/00, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A. 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

Old Plank

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank NA gallons

Tank Construction PCC

Trench Depth 18"

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Trench Walls Scored and Porous yes

Total Line Length 400' feet

Number of Lines 4 (100')

Depth of Stone 12" inches

Distance from House 5' feet

Distance from Property Line 10' feet

Distance from Well > 100' feet

NOTICE: This system shall not be installed while soils are in a wet condition.

NAME OF OWNER Kevin Barnes

LOCATION OF PROPERTY 6208 Old Plank Rd

Comments: Shallow placed Conventional System 1150GST 4 lines X 100'/ea x 3'wd & 12"Stone, Municipal water

Phillip S. Walker RS

Environmental Health Specialist

WHITE - HEALTH DEPARTMENT's COPY • CANARY - E.H.S. COPY • PINK - OWNER OR AGENT's COPY

AC) 4/7/2000 jcl #1438 $150.00 Mg Jones

FEE: $150.00 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: _____ **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: 4/6/2000 **PERMIT NO:** 4251B
PARCEL NO: 035 081 07 P0

JOB LOCATION ADDRESS: 6208 Old Plank Rd
PROPERTY OWNER: Opal Barnes (pres buyer Kevin Barnes)
BUILDING CONTRACTOR: —
SUBDIVISION NAME: —
AUTHORIZATION ISSUED BY: Phil A Walker Jr. **DATE:** 4/6/2000
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 4251B, 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: Agreement forms to be on file before the construction Authz. release.

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.

X _____ 4/6/00
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

Permit Number: 4251B

Tax Number: 03508107 PO

- 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	✓ No	___ Partial Basement	
Type Primary Wastewater System Type (circle one): I II (III) IV V VI	___ 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	
.2 Long-term acceptance rate	240 Max gallons/day wastewater flow	1200 Absorption Area (sq ft)	9' Trench spacing (min. on centers)	
NO Municipal Serviced by private well	1500 Gallon septic tank	400' Total trench length (ft)	18" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)	
2 Bedrooms in residence	NA Gallon pump tank	12" Depth of stone		
Any surface waters present: NO Type:		Minimum separation distance:		
Site modifications required:				
Additional Conditions: Shallow placed conventional system, Agreement forms to be on file before the const. auths. release Municipal water				
Repair Area System Type Type (circle one): I II (III) IV V VI	✓ 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	
1200 Absorption Area (Sq ft) 400' Total Trench Length (Ft)	12" Depth of Stone Trench	9' Trench spacing (min. on centers)	18" 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.

Thilo S Walker RS 4/6/00
DEHNR Authorized Agent — Date

x [signature] 4/6/2000
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

FOR REGISTRATION JUDITH A GIBSON
REGISTER OF DEEDS
MECKLENBURG COUNTY NC
2000 APR 06 04 58 PM
BOOK 11203 PAGE 521-524 FEE 312 00
INSTRUMENT # 2000047979

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

WASTEWATER TREATMENT AND DISPOSAL SYSTEM DESIGN AGREEMENT: 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956, .1957(a); .1957(b); or .1957(c); OR .1969

FILE # 4251B
PARCEL # 035 081 07 10

The undersigned, Kevin Barnes, owner of property located at 6208 Old Plank Road, (the "site") and described in an instrument recorded in Book 11203 at Page 518, Mecklenburg Public Registry, hereby acknowledges that the undersigned applied to the Mecklenburg County Health Department (the "Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 15A NCAC 18A .1900 et seq., that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations, that the undersigned requested that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data, and other information which indicate to the Department that the septic tank system proposed by the undersigned is allowed by the rules; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is the responsibility of the designer, owner, developer, installer, or user of the system, as applicable, and that neither the Department nor its officials, employees, or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further acknowledges that the following conditions will apply to the site.

- Any changes on the property may make the Improvement Permit Null and void and may make the Improvement Permit subject to revocation

This instrument was prepared by: _____
Mail after recording to 6205 Old Plank Rd
Charlotte NC 28216

Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees, and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, this 6 day of April, ~~1998~~ 2000

_____ (SEAL)
(Corporate Name)

_____ (SEAL)

By _____ _____ (SEAL)

_____ President _____ (SEAL)

ATTEST

_____
_____ Secretary

(Corporate Seal)

STATE OF NORTH CAROLINA
COUNTY OF Mecklenburg

I, Chris Bryant, a Notary Public for said County and State, do hereby certify that Kyra S. Barnes personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 6 day of April, 2000.

Chris Bryant
Notary Public

My Commission Expires:
7-10-2000

CHARLOTTE-MECKLENBURG COUNTY, N.C. NOTARY PUBLIC

JUDITH A. GIBSON
REGISTER OF DEEDS , MECKLENBURG COUNTY
COUNTY & COURTS OFFICE BUILDING
720 EAST FOURTH STREET
CHARLOTTE NC 28202

Filed For Registration: 04/06/2000 04:59 PM

Book: RE 11203 Page: 521-524

Document No.: 2000047379

PRMIT 4 PGS $12.00

Recorder: SERENA ROSS

State of North Carolina, County of Mecklenburg

The foregoing certificate of CHRIS BRYANT Notary is certified to be correct, This 6TH of April 2000

JUDITH A. GIBSON, REGISTER OF DEEDS By: Serena M Ross
Deputy/Assistant Register of Deeds

2000047379

FEE: 200.00 check
DATE: 3/14/00 SC

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 #: 42516

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 035 08107 PO

STREET ADDRESS: 6208 Old Plank Rd.

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

TYPE OF BUILDING (CHECK ONE):

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

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 986

NUMBER OF BEDROOMS: 2 NUMBER OF OCCUPANTS: 1

CLOSING DATE_____

FOUNDATION FOR RESIDENCE:

✓ WITHOUT BASEMENT
__ ON SLAB
✓ CRAWL SPACE
__ WITH BASEMENT /PLUMBING
__ WITH BASEMENT /NO PLUMBING

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	WELL, SPRINGS OR WATERLINES	__ YES __ NO
EXISTING WASTEWATER SYSTEMS	__ YES ✓ NO	DESIGNATED WETLANDS	__ YES __ NO
EASTMENTS OR RIGHT-OF-WAYS	__ YES ✓ NO		

PROPERTY OWNER: OPAL BARNES

NAME: BARNES (LAST) OPAL (FIRST) D. (MI)

ADDRESS: 6232 Old Plank Rd

CITY: Charlotte STATE: N.C. ZIP: 28216

DAYTIME PHONE: (704) 392-1962

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: BARNES (LAST) Kevin (FIRST) S. (MI)

DAYTIME PHONE: (704) 609-3526 616 Pinoca St.

~~6208 Old Plank Rd.~~

Charlotte, N.C. 28208

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: [signature] DATE: 3-14-00

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

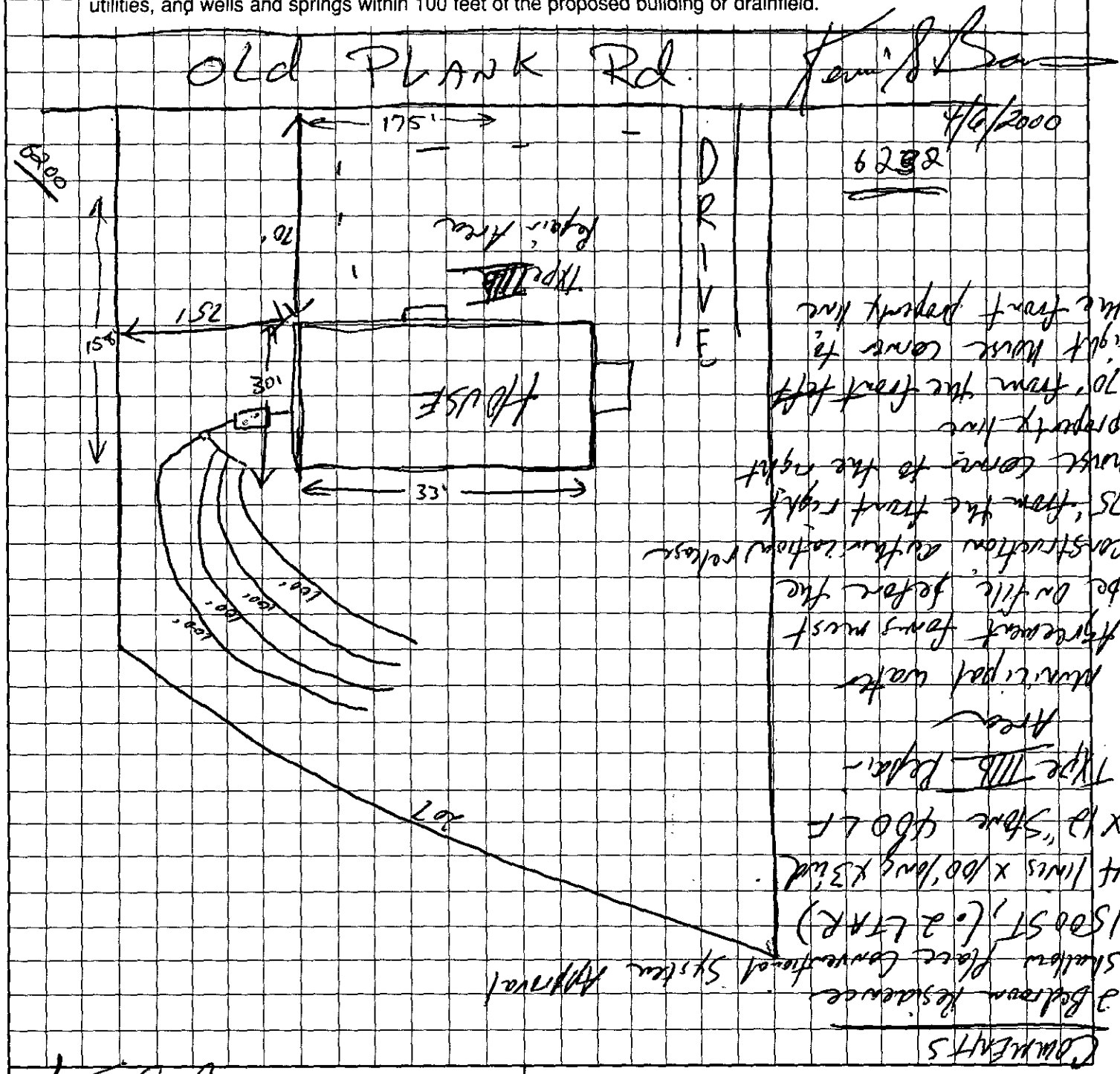
PROPOSED PLOT PLAN

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

FILE: 425B

TC: 035-081-07PA

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.



Kevin S. Barnes
4/6/2000
6282

3 Bedroom Residence
Shallow Place Conventional System Approval
1500 ST. (e 2 STAR)
14 lines x 100'long x 3' wide
x 12" Stone depth
Type IIB Repair
Area
Minimum soil work
requirements shall must
be outside future the
construction authorized replace
75' from the front road
house corner to the right
property line
70' from the front left
house corner to the
right property line

COMMENTS

Kevin S. Barnes
OWNER/AGENT SIGNATURE
DATE 3-14-00

APPROVAL DATE _____

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

DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

#2

Property ID: 035-061-07

Lot #:

File #: 4215B

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Opal Barnes APPLICANT: Kevin Barnes

ADDRESS: 6232 Old Plank Road, Charlotte, N.C. DATE EVALUATED: 3-29-00

PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949) 240gpd PROPERTY SIZE: .84

LOCATION OF SITE: 6206 Old Plank Road PROPERTY RECORDED:

WATER SUPPLY: ☐Private ☒Public ☐Well ☐Spring ☐Other

EVALUATION METHOD: ☒Augur Boring ☐Pit ☐Cut

TYPE OF WASTEWATER: ☐Sewage ☐Industrial Process ☐Mixed

PROFILE #	Slopes 2-6% .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
1	LS	0-3"	grlcl	Fr/SE/AP/SS/SP	2.5Y 3/1 @ 32"	37"	N/A	None	US
		3-31"	SBK/C	F:/SE/AP/SP					
		31-37"	SBK/C	VF:/Mixed//US/UP					
2	LS	0-3"	grlcl	Fr/SE/SI/SS/SP	732" TO soil wetness	37"	N/A	None	PS .25 Ft² IV
		3-34"	SBK/C	F:/SE/AP/SP					
3	LS	0-6"	grlscl	Fr/SE/SI/SS/SP	2.5Y 3/1 @ 36"	37"	N/A	None	US
		6-30"	SBK/C	F:/SE/AP/SP					
		30-37"	SBK/C	VF:/Mixed//US/UP					
4	LS	0-4"	grlcl	Fr/SE/SI/SS/SP	737" TO soil wetness	37"	N/A	None	US
		4-33"	SBK/C	F:/SE/AP/SP					
		33-37"	SBK/C	VF:/Mixed//US/UP					
5	LS	0-3"	grlcl	Fr/SE/SI/SS/SP	743" TO soil wetness	43"	N/A	None	PS .25 Ft² IV
		3-36"	SBK/C	F:/SE/AP/SP					
		36-43"	SBK/C	Fr/SE/AP/SS/SP					
6	LS	0-4"	grlcl	Fr/SE/SI/SS/SP	742" TO soil wetness	42"	N/A	None	PS .25 Ft² IV
		4-34"	SBK/C	F:/SE/AP/SP					
		34-42"	SBK/SCl	Fr/SE/AP/SS/SP					
7	LS	0-4"	grlcl	Fr/SE/AP/SS/SP	738" TO soil wetness	38"	N/A	None	US .25 Ft² IV
		4-24"	SBK/C	F:/SE/AP/SP					
		24-32"	SBK/ scl	Fr/SE/AP/SS/SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	US	US
System Type(s)		
Site LTAR	.25 Ft²	.25 Ft²

OTHER FACTORS (.1946):

SITE CLASSIFICATION (.1948): Unsuitable

EVALUATED BY: W. R. Marlin LSS - 3-29-00

OTHER(S) PRESENT: K. Barnes

DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Property ID _____

Lot #: _____

File #: 4251B

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: ☐Augur 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
8	LS	0-4"	gr/rl	Fr/SE/P/SS/SP	733" TO soil wetness	34"	N/A	None	US
		4-29"	SBK/c	F:/SE/P/SP					
		29-34"	SBK/c	Vf:/Mixed/US/MP					
9	LS	0-4"	gr/rl	Fr/SE/P/SS/SP	734" TO soil wetness	34"	N/A	None	US
		4-29"	SBK/c	F:/SE/P/SP					
		29-34"	SBK/c	Vf:/Mixed/US/MP					

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 # 42513

COMMENTS 1002 Repair

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

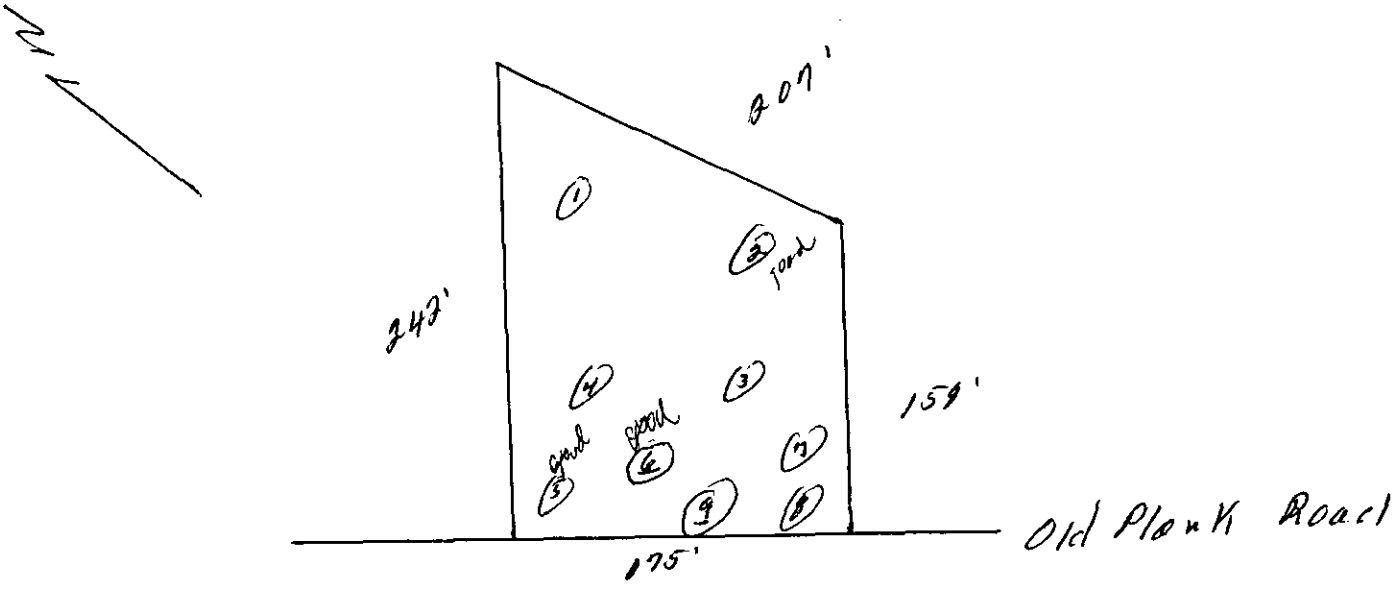
STRUCTURE

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

MINERALOGY

SLIGHTLY EXPANSIVE

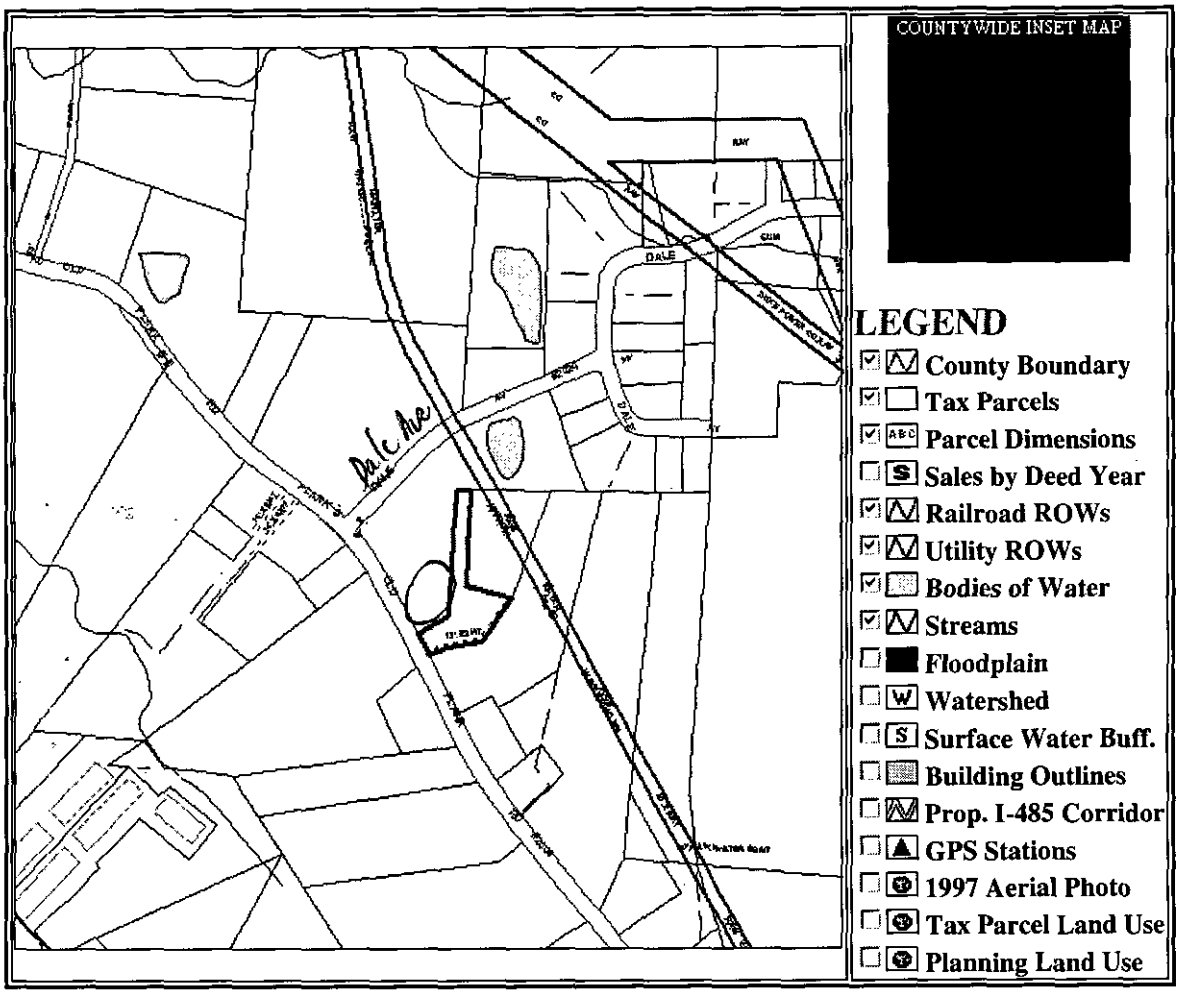
EXPANSIVE





Click on Map to Perform Operation

○ Refresh Map ○ Pan ○ Zoom In ◉ Zoom Out Zoom Factor 1X ○ Identify Parcels ○ Surveyor's Report
○ Adjoining Owner's Report within 10 FEET ○ Measure Start Line Label Parcels by:



Date and Time Stamp 3/15/00 1:35:39 PM EST	This map is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, planimetric maps, and other public records and data. Users of this map are hereby notified that the aforementioned public primary information sources should be consulted for verification. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.

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

Sheet: 1

Property ID: 035-081-07

Lot #:

File #: 42518 ~~42158~~

#2

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Opal Barnes APPLICANT: Kevin Barnes

ADDRESS: 6232 Old Plank Road, Charlotte, N.C. DATE EVALUATED: 3-29-00

PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949) 2 Bdrm PROPERTY SIZE: .84

LOCATION OF SITE: 6206 Old Plank Road PROPERTY RECORDED:

WATER SUPPLY: ☐Private ☒Public ☐Well ☐Spring ☐Other

EVALUATION METHOD: ☒Augur Boring ☐Pit ☐Cut

TYPE OF WASTEWATER: ☐Sewage ☐Industrial Process ☐Mixed

PROFILE #	Slopes 2-6% .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
1	LS	0-3"	grlcl	Fr/SE/P/SS/SP	2.5Y 7/1 @ 32"	37"	N/A	None	US
		3-31"	SBK/C	Fi/SE/P/SP					
		31-37"	SBK/C	VF:/Mixed//VS/VP					
2	LS	0-3"	grlcl	Fr/SE/P/SS/SP	37" TO SOIL wetness	37"	N/A	None	PS .25 Fz IV
		3-31"	SBK/C	Fi/SE/P/SP					
3	LS	0-6"	grlscl	Fr/SE/P/SS/SP	2.5Y 7/1 @ 36"	37"	N/A	None	US
		6-30"	SBK/C	Fi/SE/P/SP					
		30-37"	SBK/C	VF:/Mixed//VS/VP					
4	LS	0-4"	grlcl	Fr/SE/P/SS/SP	37" TO SOIL wetness	37"	N/A	None	US
		4-33"	SBK/C	Fi/SE/P/SP					
		33-37"	SBK/C	VF:/Mixed//VS/VP					
5	LS	0-3"	grlcl	Fr/SE/P/SS/SP	43" TO SOIL wetness	43"	N/A	None	PS .25 Fz IV
		3-38"	SBK/C	Fi/SE/P/SP					
		38-43"	SBK/C	Fr/SE/P/SS/SP					
6	LS	0-4"	grlcl	Fr/SE/P/SS/SP	42" TO SOIL wetness	42"	N/A	None	PS .25 Fz IV
		4-34"	SBK/C	Fi/SE/P/SP					
		34-42"	SBK/SCl	Fr/SE/P/SS/SP					
7	LS	0-4"	grlcl	Fr/SE/P/SS/SP	36" TO SOIL wetness	36"	N/A	None	US .25 Fz IV
		4-24"	SBK/C	Fi/SE/P/SP					
		24-32"	SBK/SCl	Fr/SE/P/VS/SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	US	US
System Type(s)		
Site LTAR	.25 Fz	.25 Fz

OTHER FACTORS (.1946):

SITE CLASSIFICATION (.1948): Unsuitable

EVALUATED BY: W. A. Marlin LSS - 3-29-00

OTHER(S) PRESENT: K. Barnes

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

Sheet: 2

Property ID: _____

Lot #: _____

File #: 4251B

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: ☐Augur 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
B	LS	0-4"	gr/sl	Fr/SE/SP/SS/SD	33" TO soil wetness	34"	N/A	None	U S
		4-29"	SBK/c	F:/SE/SP/SS/P					
		29-34"	SBK/c	VF:/Mixed//US/UP					
9	LS	0-4"	gr/sl	Fr/SE/SP/SS/SD	34" TO soil wetness	34"	N/A	None	U S
		4-29"	SBK/c	F:/SE/SP/SS/P					
		29-34"	SBK/c	VF:/Mixed//US/UP					

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 # 42513

COMMENTS 1002 Repeat

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	

