

PROPERTY NOW PART OF iREDELL COUNTY

7/7/08

marliwr

Groundwater and Wastewater Services File Imaging Project
May 2007
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CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 13210 DATE: 5 21 98

TC: 001-391-65 ☒ L ☒ CRT

SERIAL Nº 17624

Name of Owner PAUL MORLOCK Juris.: _____

Address of Property 16545 ~~13270~~ CHASESTONE LANE

Inspection Data:

Tank Material PCC

Total Length of Drainfield 300

Number of Lines 5 @ varies

Cover Depth 17"

Water Supply Source well

Distance to Water Source 50 FT

Excavation Inspected 5-21 98

Tank(s) Inspected 5-21 98

Wash Line Inspected /

High Water Alarm Inspected /

PLOT

Design 1998 1500 ST TYPE III INNOVATIVE CTR# DELLINGER

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 15A 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 15A 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: _____

Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

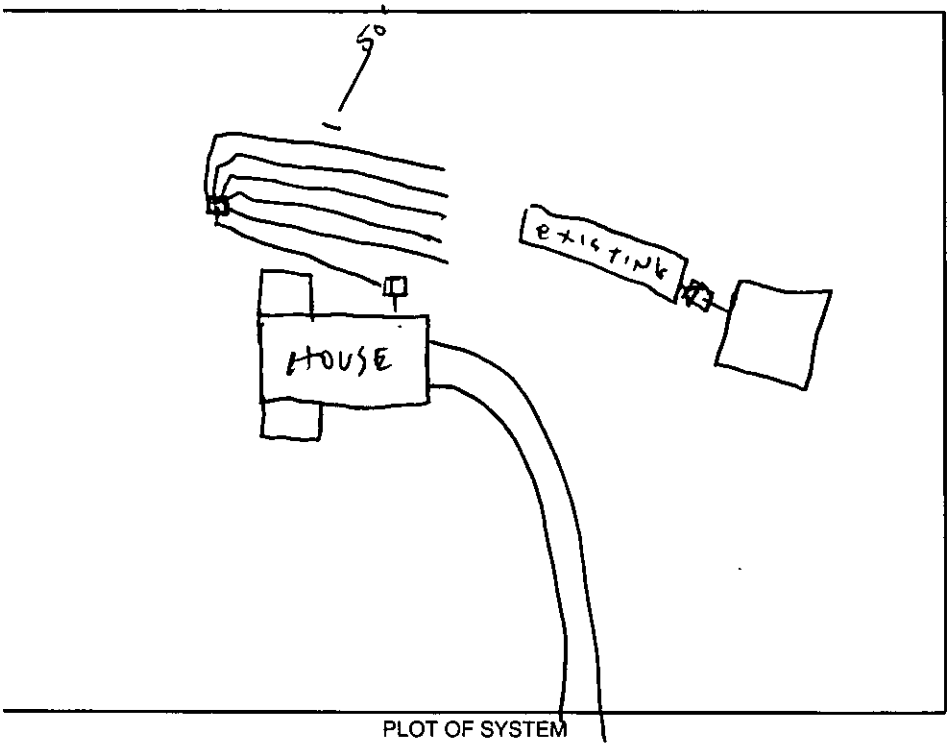
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 13210 DATE: 4-18-98

TC: 001-391-65 ☒ L

SERIAL Nº 17697

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 ~~5-18-98~~ 5-5-97. All work shall be completed on or before 5-18-98, after which date this permit shall be null and void. The system shall meet all of the construction requirements of I5A 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

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank — gallons

Tank Construction PCC

Trench Depth 24"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous yes

Total Line Length 300 feet

Number of Lines 5 x 60

Depth of Stone — inches

Distance from House 5' + feet

Distance from Property Line 5' + feet

Distance from Well 100' + feet

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

NAME OF OWNER PAUL MORLOCK

LOCATION OF PROPERTY 16545 CHASESTONE LANE

Comments: _____

Kelly Randall
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

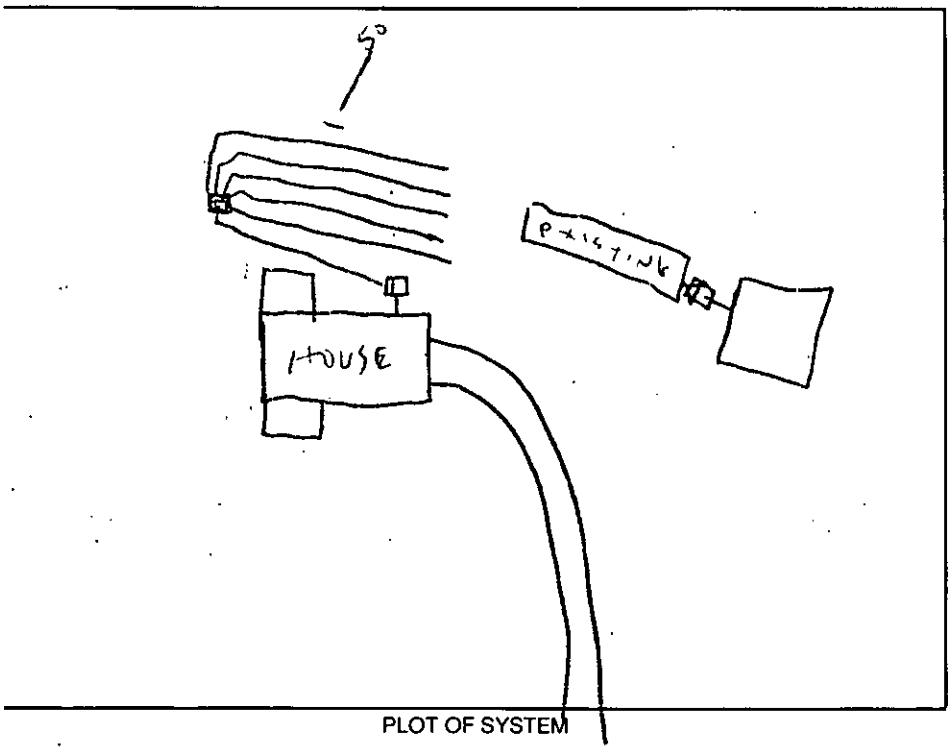
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 13210 DATE: 4-18-98

TC: ~~001~~-391-65 ☐ L

SERIAL No 17697

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PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank — gallons

Tank Construction PCC

Trench Depth 24"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous yes

Total Line Length 300 feet

Number of Lines 5 x 60

Depth of Stone — inches

Distance from House 51+ feet

Distance from Property Line 51+ feet

Distance from Well 100'+ feet

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

NAME OF OWNER PAUL MORLOCK

LOCATION OF PROPERTY ~~16345~~ CHASESTONE LANE

Comments: _____

Kelly Randall
Environmental Health Specialist

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

PROPOSED PLOT PLAN

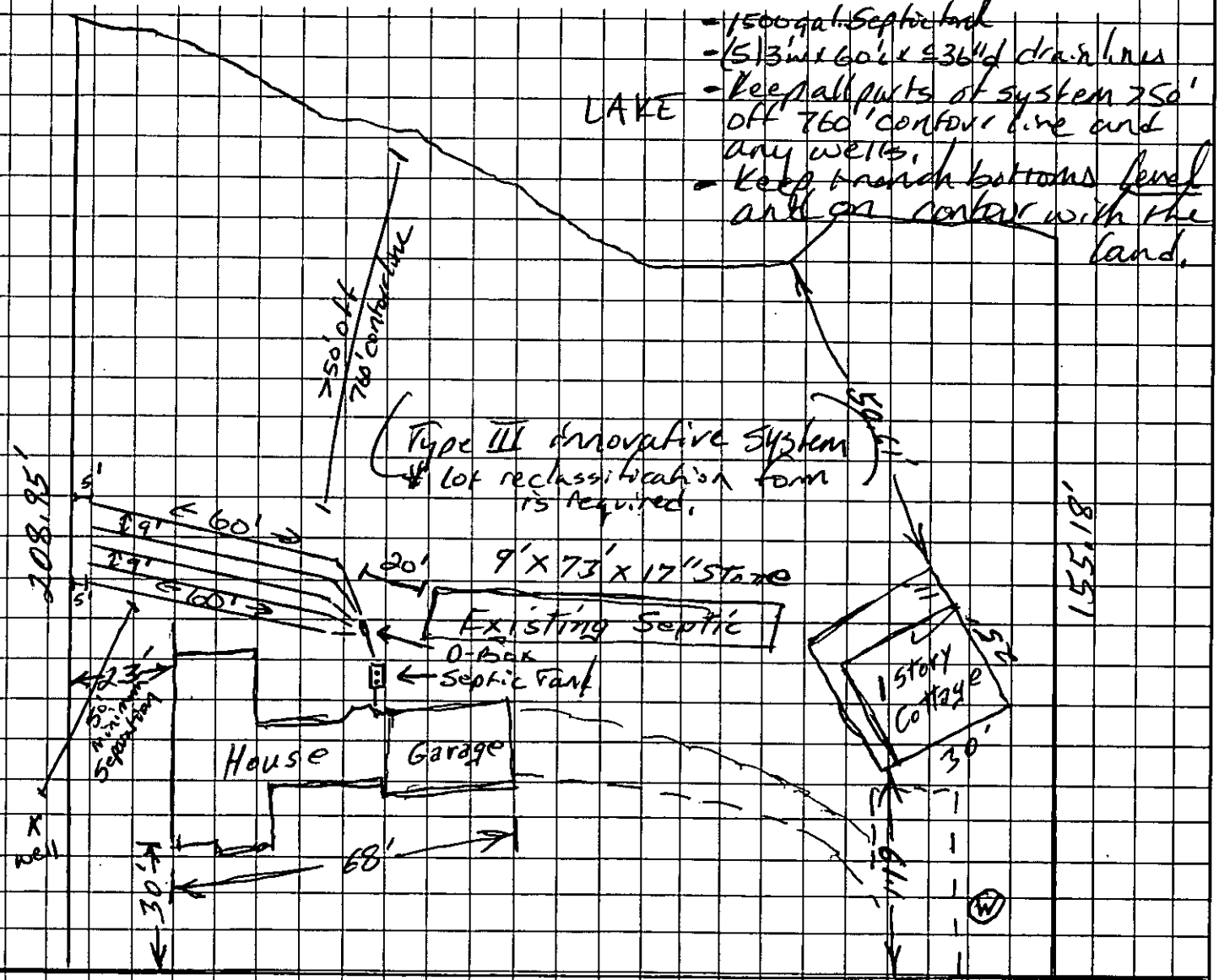
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: ~~13228~~ 13210

TC: 001-391-65

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.

- ~~1500 gal. Septic tank~~
- (5) 3' x 60' x 36" d drain lines
- Keep all parts of system 250' off 760' contour line and any wells.
- Keep trench bottoms level and on contour with the land.



Paul A. Morlock
OWNER/AGENT SIGNATURE

DATE 5/5/97

APPROVAL DATE 5-19-97 J. Thompson, R.S.

White - Health Department's Copy

Canary - E.H.S. Copy

Pink - Owner's Copy

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

Sheet 1 of
PROPERTY ID #:
COUNTY:

"Guest House"

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

#2 13210
001-391-65

OWNER: Paul A. Moelock APPLICANT:
ADDRESS: 165 45 Chesapeake Landing - APPLICATION DATE: DATE EVALUATED:
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949): 360gpd / PROPERTY SIZE: .73
LOCATION OF SITE: 165 45 Chesapeake Farm PROPERTY RECORDED:
WATER SUPPLY: ☑ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	Slopes 5-15% 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"	gr/sc/	Fr/SEXP/SS/SP	>48" TO soil wetness	48"	N/A	None	PS .39/F2 IV
		3-40"	SBK/C	F/SEXP/SP					
		40-48"	SBK/C/	Fr/SEXP/SS/SP					
2	LS	0-4"	gr/sc/	Fr/SEXP/SS/SP	>48" TO soil wetness	48"	N/A	None	PS .39/F2 IV
		4-40"	SBK/C	F/SEXP/SP					
		40-46	SBK/C/	Fr/SEXP/SS/SP					
3	LS	0-4"	gr/sc/	Fr/SEXP/SS/SP	>48" TO soil wetness	48"	N/A	None	PS .39/F2 IV
		4-35"	SBK/C	F/SEXP/SP					
		35-48"	SBK/C/	Fr/SEXP/SS/SP					
4									

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

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): Unsuitable
EVALUATED BY: W. A. Marlin 5-15-97
OTHER(S) PRESENT: LSS

COMMENTS: May be planning to leave existing building intact

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL 1955 LTAR	LPP 1957 LTAR	MINERALOGY/ CONSISTENCE	STRUCTURE
C (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive)	G (Single Grain)
V (Convex Slope)		LS (Loamy Sand)			SEXP (Slightly Expansive)	M (Massive)
(Drainage Way)					EXP (Expansive)	CR (Crumb)
S (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
P (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
S (Foot Slope)						ABK (Angular Blocky)
(Head Slope)	III	SI (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
(Linear Slope)		SICL (Silty Clay Loam)				PR (Prismatic)
(Nose Slope)		CL (Clay Loam)			MOIST	WET
(Ridge)		SCL (Sandy Clay Loam)				
(Shoulder Slope)		SUC (Silt Loam Clay)			VFR (Very Friable)	NS (Non-sticky)
(Terrace)					FR (Friable)	SS (Slightly Sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FI (Firm)	S (Sticky)
		SIC (Silty Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
					EFI (Extremely Firm)	NP (Non-plastic)
		O (Organic)	None			SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

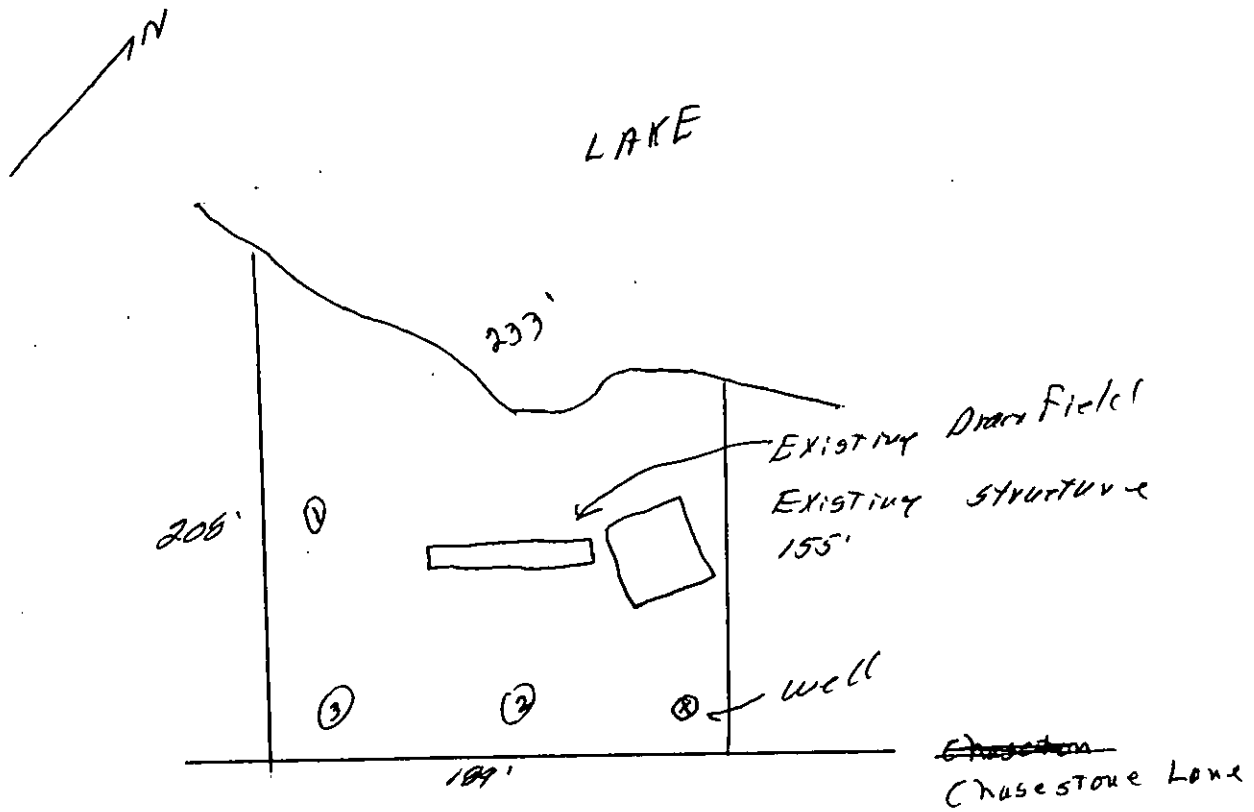
OTES

ORIZON DEPTH	In inches below natural soil surface
EPTH OF FILL	In inches from land surface
ESTRICTIVE HORIZON	Thickness and depth from land surface
PROLITE	S(suitable) or U(unsuitable)
OIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
LASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

valuation of saprolite shall be by pits.

ong-term Acceptance Rate (LTAR): gal/day/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).



cert 1006 Rev 12/5/00 4/4/00

FEE: 200.00 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: 5/20/97 **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE** CRS D

DATE: 5-19-97 **PERMIT NO:** 13210
PARCEL NO: 001-391-65

JOB LOCATION ADDRESS: 16545 Chasestone Lane
PROPERTY OWNER: Paul A. Morlock
BUILDING CONTRACTOR: Same
SUBDIVISION NAME:
AUTHORIZATION ISSUED BY: Larry B. Thompson, J.R.S. **DATE:** 5-19-97
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 13210, 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: See Conditions of Improvement Permit

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.

Paul A. Morlock 5/20/97

SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

Same address as house -

DATE 5/20/97

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION MECK

001-391-65
PARCEL NUMBER

16545 CHASESTONE LN
ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

PROJECT NAME (IF APPLICABLE)

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

1. SUBDIVISION REGULATIONS	**_____APPROVED**	**_____NOT APPROVED**
2. FLOODWAY REGULATIONS	**_____APPROVED**	**_____NOT APPROVED**
3. WATERSHED PROTECTION	**_____APPROVED**	**_____NOT APPROVED**
4. COMMERCIAL DRAINAGE PLAN	**_____APPROVED**	**_____NOT APPROVED**
5. PUBLIC UTILITY EASEMENT	**_____PRESENT**	**_____NOT PRESENT**
6. PROPERTY FRONTS ON THOROUGHFARE	**_____YES**	**_____NO**
7. DRIVEWAY PERMIT REQUIRED	**_____YES**	**_____NO**
8. DOES PROJECT CONFLICT WITH ROAD PROJECT?	**_____YES**	**_____NO**

REMARKS: ADDRESS VERIFICATION
"Next House"

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE WHEN PAYING PERMIT FEE. CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

ALL OTHER FORMS OBSOLETE

☐ NEW ADDRESS

SIGNED: [signature]

REVISED 1/91

MECKLENBURG COUNTY REGISTER OF DEEDS
JUDITH A. GIBSON - REGISTER

CUSTOMER RECEIPT: 05/20/97

Date	Time	Inst #	Type	Book	Page	Trx	Amount
05/20/97	11:53	167	PERMIT	9064	774	FEE	12.00
05/20/97	11:53	167	PERMIT	9064	774	COPY	1.05
05/20/97	11:53					TOT	13.05
05/20/97	11:53					CHCK	13.05

JUDITH A GIBSON REG OF DEEDS MECK NC
FILED FOR REGISTRATION 05/20/97 11:53
BK: 09064 PG: 0774/0776 #:0167 13.05

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 COPY

FILE # 13210
PARCEL # 001-391-65

The undersigned, Paul A Morlock, owner of property located at 16545 Chasestone Lane, (the "site") and described in an instrument recorded in Book 9044 at Page 169, 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: Paul A. Morlock
Mail after recording to: 16545 Chasestone Lane
Mooresville, N.C. 28115

- 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 20th day of May, 1997.

Paul A. Morlock
(Corporate Name)

By: Paul A. Morlock

_____ President

ATTEST:

_____

_____ Secretary

(Corporate Seal)

Paul A. Morlock (SEAL)

_____ (SEAL)

_____ (SEAL)

_____ (SEAL)

STATE OF NORTH CAROLINA
COUNTY OF Iredell

I, Kathleen S. Laurina, a Notary Public for said County and State, do hereby certify that Paul A. Morlock personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 19 day of May, 1997.

Kathleen S. Laurina
Notary Public

My Commission Expires:
April 20, 1999

KATHLEEN S. LAURINA NOTARY PUBLIC IREDELL COUNTY, NC

Permit Number: 13210

CONDITIONS OF IMPROVEMENT PERMIT

Tax Number: 001-391-65

- 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	
.3 Long-term acceptance rate	360 Max gallons/day wastewater flow	900 Absorption Area (sq ft)	9' Trench spacing (min. on centers)	
Yes Serviced by private well	1500 Gallon septic tank	300 Total trench length (ft)	36" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)	
3 Bedrooms in residence	N/A Gallon pump tank	N/A Depth of stone innovative		
Any surface waters present:	Type:	Minimum separation distance:		
Site modifications required:				
Additional Conditions: - Keep all parts of system 750' off of the 760' contour line and any wells. - Sand backfill required if using a chambered system. - Lot does not require 100% repair				
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	
___ 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.

Larry B. Thompson Jr. RS 5-19-97
DEHNR Authorized Agent — Date

Paul A Matlock 5/20/97
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

FEE: 100.00 ck# 4607

DATE: 5/5/97 JC

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

[ ] CRT

TYPE APPLICATION: [X] 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 #: SM 3845704 ~~[illegible]~~ /3210

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 001-391-65

STREET ADDRESS: ~~[illegible]~~ Chasestone Ln

SUBDIVISION OR MOBILE HOME PARK NAME: Section 6 Crescent Land + Timber

LOT NUMBER: 337

TOWNSHIP (CHECK ONE):

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

CLOSING DATE _____

TYPE OF BUILDING (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 1450

NUMBER OF BEDROOMS: 3 | NUMBER OF OCCUPANTS: 2

FOUNDATION FOR RESIDENCE:

[ ] WITHOUT BASEMENT
[ ] ON SLAB
[ ] CRAWL SPACE
[X] 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 [X] NO TYPE: _____

WATER SUPPLY (CHECK ONE):

[ ] COMMUNITY (C)
[ ] MUNICIPAL (M)
[X] 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 [X] NO
EXISTING WASTEWATER SYSTEMS [X] YES [ ] NO
EASTMENTS OR RIGHT-OF-WAYS [ ] YES [X] NO
WELL, SPRINGS OR WATERLINES [X] YES [ ] NO
DESIGNATED WETLANDS [ ] YES [X] NO

PROPERTY OWNER:

NAME: Morlock Paul A
(LAST) (FIRST) (MI)

ADDRESS: 16545 Chasestone Ln

CITY: Mooresville STATE: NC ZIP: 28115

DAYTIME PHONE: (704) 664-5807

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME:
(LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) -

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: Paul A. Morlock DATE: 5/5/97

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

File 13210

DAS DON ALLEN & ASSOCIATES, P.A.
ENGINEERING - SURVEYING - PLANNING
933 Brawley School Rd. - Mooresville, N.C. 28115
(704) 664-7029 (704) 664-8041 Fax

I, certify that this map was drawn under my supervision from an actual survey made under my supervision recorded in deed book 5271, page 706, and/or plat book 17, page 619, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina Chapter 88C my hand and seal on the 28, day of APRIL, A.D. 19 97

William M. Allen RLS

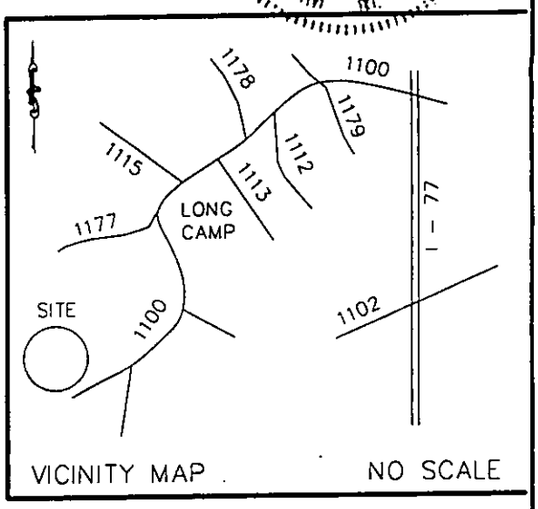
NORTH CAROLINA REGISTERED SEAL L-3499 LAND SURVEYOR WILLIAM M. ALLEN

0' 20' 40' 100'
SCALE IN FEET

PG. 17 PG. 619

LINE DATA TABLE

LINE	DIRECTION	DISTANCE
L1	N 29°27'39" W	4.71'
L2	N 29°27'39" W	2.53'
L3	N 85°40'33" E	9.62'
L4	S 75°33'33" E	24.16'
L5	S 87°56'57" E	17.86'
L6	N 72°53'09" E	21.86'
L7	S 81°55'00" E	24.11'
L8	S 74°08'05" E	29.12'
L9	N 51°01'32" E	32.10'
L10	N 19°45'05" E	15.67'
L11	N 50°41'48" E	22.34'
L12	N 69°25'10" E	4.32'
L13	N 74°34'56" E	19.92'
L14	N 28°40'05" W	14.13'



VICINITY MAP NO SCALE

#4 REBAR ON LINE

760' CONTOUR LINE PER DUKE POWER DB. 639 PG. 644

LAKE NORMAN

OLD PROPERTY LINE

761' CONTOUR LINE PER ACTUAL FIELD SURVEY.

N 29°27'39" W 208.95' TOTAL

LOT 338
WILLIAM H. SMITH, III
5082/387

LOT 337
0.73 AC.

50.61'
39.8'
11.0'
30.7'
DECK
25.0'
1 STORY STUCCO COMP. ROOF
25.0'
5.8'
30.7'
3.5'
141.67'

S 28°40'05" E

LOT 335
BOBBY G. FAULK
8867/899

Gravel Drive
30' FRONT SETBACK
1.1'

#4 REBAR
#4 REBAR
#4 REBAR

(TIE ONLY)
N 59°06'58" E
116.81'

R/W
S 60°45'00" W 189.26'
(BASE BEARING)

PK NAIL SET IN THE INTERSECTION OF CHASESTONE LANE AND BALLYCASTLE ROAD

60.00'
R/W

CHASESTONE LANE
(GRAVEL)

NOTES
1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENT AND/OR RIGHTS-OF-WAY OF RECORD.
2) AREA COMPUTED BY THE COORDINATE METHOD.
3) EXISTING 760' & 761' CONTOUR ELEVATION BASED ON LAKE NORMAN LAKE LEVEL AT COWAN'S FORD DAM (READING ON APRIL 23, 1997) ELEVATION: 756.5'

LEGEND
P.P. = POWER POLE
DUKE POWER TRANS.
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY
W = WELL

PHYSICAL SURVEY

OF
16545 CHASESTONE LANE
LOT 337, SECT. 6, CRESCENT LAND & TIMBER CORP.
LEMLEY TWSP., MECKLENBURG CO., N.C.
PAUL A. & VALERIE B. MORLOCK

SCALE 1" = 40'
ACQUIRED BY:

FIELD BOOK: 127
FILE: SM-3845704
TAX MAP NO: 001-391-65