

1905 STONEYRIDGE DR

03139106

5/29/2007

duponbj

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

75 ck check

DATE: 11/2/88

TO: HEALTH DEPARTMENT - ENVIRONMENTAL HEALTH

FROM: COUNTY ENGINEERING

EHD FILE [redacted] 5089A JURISDICTION CODE Chur

PARCEL NUMBER 031 09 308 DR

ASSIGNED ADDRESS 1905 stoneyridge Dr

EXISTING ADDRESS

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	NOT APPROVED
1. SUBDIVISION REGULATIONS	☐	☐ *
2. FLOODWAY REGULATIONS	☐	☐ *
3. EROSION CONTROL REGULATIONS	☐	☐ *
4. COMMERCIAL DRAINAGE PLAN	☐	☐ *

	PRESENT	NOT PRESENT
5. PUBLIC UTILITY EASEMENT	☐ *	☐
	YES	NO
6. PROPERTY FRONTS ON THOROUGHFARE	☐ *	☐
	YES	NO
7. DRIVEWAY PERMIT REQUIRED	☐ *	☐

*** If checked, further investigation will be required to determine whether a building permit may be issued by Building Standards for the site.**

REMARKS: SF House - Septic Dsgn

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

SIGNED: [signature]

OPWEAR 02/86

APPLICATION FOR AN IMPROVEMENT PERMIT

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

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

(OFFICE USE ONLY)

FILE: 5089A

TC: _____

SERIAL: No 17192 ☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 1905 (STREET NO.) STONERIDGE (STREET) DRIVE Dr. ② FILE: 5089A

③ JURISDICTION: CHAR ④ TAX PARCEL NO.: 03109308

⑤ SUBDIVISION: PINE ISLAND COUNTRY CLUB ⑥ LOT: 2 ⑦ BLOCK: 6

OWNER

⑧ NAME: BILLY (FIRST) G. I (MIDDLE) BENNETT (LAST)

⑨ MAILING ADDRESS: 4943 TANGLE BRIAR DRIVE

⑩ CITY: CHARLOTTE ⑪ STATE: NC ⑫ ZIP: 28208

⑬ PHONE: (WORK) _____ ⑭ (HOME) 399-9968

REQUEST

This request is for a(n):

⑮ ☑ New permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify) _____

DESIGN CRITERIA

System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 3 ㉕ Type? _____

㉓ Maximum occupancy? 6 ㉖ Maximum number of employees? _____

㉔ Basement? ☐ yes ☑ no ㉗ Maximum number of seats? _____

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☑ Individual well

B ☐ Municipal system

C ☐ Community well

D ☐ Community system

㉙ 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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: AGENT

Date: 11-2-88

IMPROVEMENT PERMIT

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 permit is issued by this Department.

... This permit is not transferable, and shall become null and void 36 months from the date of issuance.

_____ / _____
Environmentalist Date

_____ / _____
Director or Authorized Section Head Date

*This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION



CHARGE SLIP

Date 11/2/88

Name/Company Barry Simpson Const

Sanitation _____

Vector Control _____

O.P.W.D. ✓

(Modified Septic)

Service: Imp Permit #5089A

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
NOV 2 1988

Fee: $ 75.00 Ck#3613 #15.00

Completed by

Collected by

Mecklenburg County
Health Department

Basil G. Deltu, M.D., M.P.H.
Health Director

October 17th, 1988

Billy G. Bennett
4743 Tanglevriar Drive
Charlotte, NC 28208

RE: Property located at Stoneyridge Drive
FILE: 5089A
PARCEL: 03109308

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. 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 15695) 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 10 NCAC 10A .1948 (c) 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 I may be of any assistance, please feel free to call.

Very truly yours,

Sylvia D. Daniel, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure (2)

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 15695

File: 5089A Action 2

Parcel: 03109308 ☐ PC

Location: Stoneyridge Drive

Subdivision:

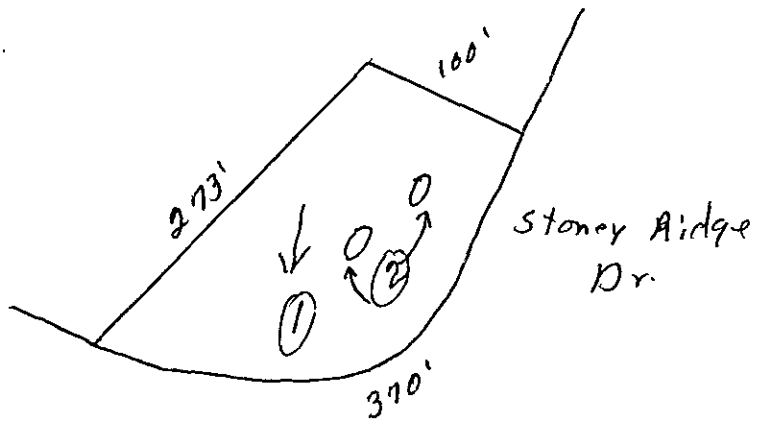
Lot: Block: Acres: .66

Owner: Billy G. Bennett
Address: 4743 Tanglevriar Drive
Charlotte, NC 28208

Comments: Heavy 2-1 clay

Described by: William A. Marlin

Date: 10-14-98



***** 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 8-15%	S PS (U) complex slopes	S PS U	S PS U	S PS U	S PS U
Texture	S PS (U) 2-1 clay	S PS U —	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U —	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U >36" To water	S PS U —	S PS U	S PS U	S PS U	S PS U
Depth	S PS (U) 23-36"	S PS U —	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U >36"	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	1UB Enon-like	complex slopes				
Area Classification	S PS (U)	S PS (U)	S PS U	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

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

RECEIVED
MECKLENBURG COUNTY HEALTH DEPT.
OCT 5 ..
ENVIRONMENTAL HEALTH DIVISION

(OFFICE USE ONLY)
FILE: 5089A
TC: _____
☐ PC ☐ REPT

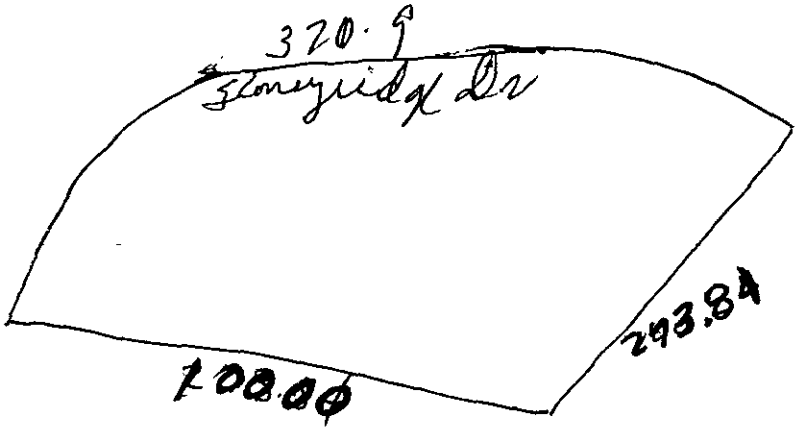
JOB LOCATION

① ADDRESS: 347 Stonegridge Dr.
② SUBDIVISION: Pine Island Country Club ③ LOT: 2 ④ BLOCK: 6
⑤ PARCEL REFERENCE: BOOK NO.: 12 PAGE NO.: 367 PARCEL NO.: 031-097-08
⑥ DEED REFERENCE: BOOK NO.: 3484 PAGE NO.: 163

OWNER

⑦ NAME: Billy G and Geneva H. Bennett (FIRST) (MIDDLE) (LAST)
⑧ MAILING ADDRESS: 4743 Tanglewinan Dr
⑨ CITY: Charlotte ⑩ STATE: N.C. ⑪ ZIP: 28208
⑫ PHONE: (WORK) _____ (HOME) 399-9968

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: Billy G Bennett
Date: 9-28-88

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

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 10/5/88

Name/Company Barry Simpson Const.

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Soil Test

#5089A

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

OCT 5 1988

Fee: $30 — Ck# 3593

$30.00

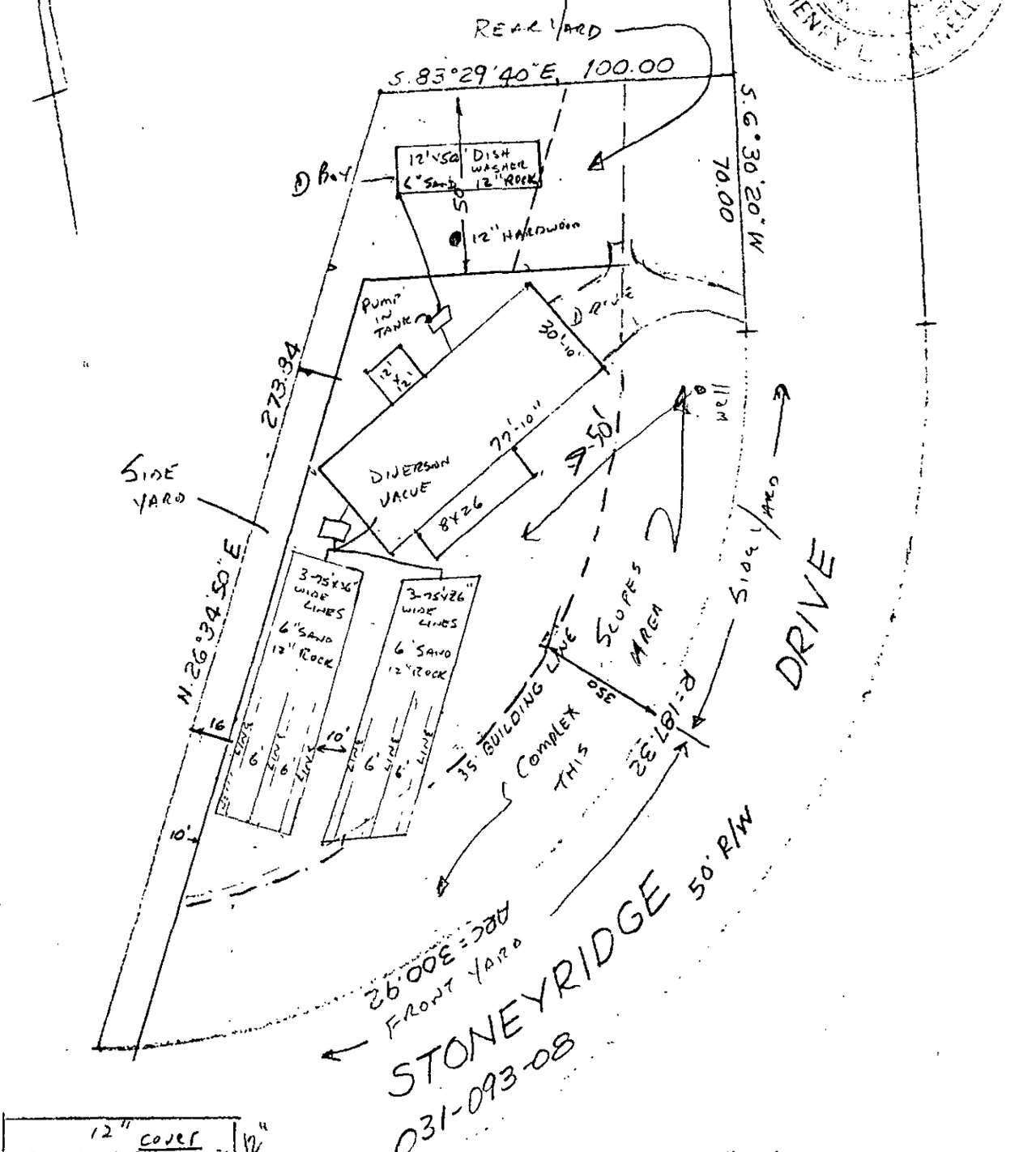
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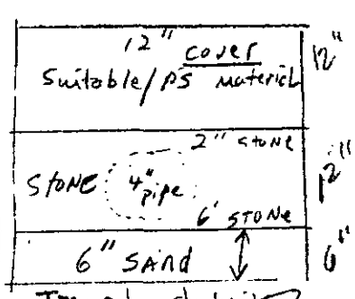
Collected by

THIS IS TO CERTIFY THAT ON THE 12TH DAY OF OCTOBER 19 88 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 Henry L Farrell REGISTERED SURVEYOR

NORTH CAROLINA REGISTERED L.S. HENRY L. FARRELL





NOTE
SUBDIVISION SIDE YARD RESTRICTION ON CORNER LOTS TO 35'-MIN.

11-2-88 AGENT.

BOUNDARY SURVEY OF

LOT 2 BLOCK G PINE ISLAND COUNTRY CLUB

SCALE 1" = 40'

THE PROPERTY OF

MAP RECORDED IN BOOK AT PAGE DEED RECORDED IN BOOK PAGE

SOUTHERN PHOTO PRINT & SUPPLY CO