


7151 PITCHFORK LN

13525323

6/13/08

marliwr

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

# INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
# APPLICATION FOR SERVICES

[ ] 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 10370

PERSON FILING APPLICATION:
NAME: Brock, Calvan E. T. (last) (first) (mi)
ADDRESS: 3600 N. Tryon St. PHONE: 704 347-5998
CITY: Charlotte STATE: N.C. ZIPCODE: 28206

Date:

PROPERTY OWNER:
NAME: ~~Arba E. Peck, Jr.~~ Peck, Arba, Jr. E. (last) (first) (mi)
ADDRESS: 7151 Pitchfork Ln. PHONE: 704 545-9687
CITY: Charlotte STATE: N.C. ZIPCODE: 28227

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 135-253-23
STREET ADDRESS: 7151 Pitchfork Ln
ZONING:

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

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: 12 LOT SIZE (in acres):

TYPE APPLICATION (check one):

[ ] [redacted] 1976
[ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[ ] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[ ] COMMERCIAL OR INDUSTRIAL (N)

[X] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X) Add Garage to existing house
[ ] [redacted]

RESIDENTIAL PROPERTY (Type Building, check one):
[ ] SINGLE MOBILE HOME (S) [X] HOUSE (H) [ ] MULTIPLE FAMILY (U)
[ ] DOUBLE WIDE (D) [ ] MODULAR HOME (M) [ ] OTHER _____ (O)

NUMBER BEDROOMS: 3 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 [ ] 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: Calvan J. Brock Date: 6-30-99

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.

... OK To Use Existing System For proposed Garage addition.

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

Joshua R. Sellers R.S. 07-01-99
Environmentalist Date

JS

WATER : 122791

City of Charlotte/Mecklenburg County

CHARLOTTE

# Services Bill

| | | |
|---|---|---|
| Name | ARBA PECK JR | |
| Address | 7151 PITCHFORK LN | |
| | CHARLOTTE | NC 28227-5126 |
| Service Address | 7151 PITCHFORK LN | |
| | CHARLOTTE | NC 28227 |

| Account Number | Parcel |
|---|---|
| 125495 - 166709 | 135 - 253 - 23 |

## Account Summary

CSB For Payment of Tap-on Fee

| | |
|---|---|
| Previous Balance | $1,764.73 |
| Payments & Credits | $1,764.73 |
| Past Due Balance | |
| Total New Charges | $19.05 |
| Balance | $19.05 |

| | |
|---|---|
| Bill Date | 11/11/1999 |
| Payment Due Date | 12/01/1999 |
| Amount Due | $19.05 |

METER READINGS

| TYPE OF SERVICE | CURRENT DATE | CURRENT READING | PREVIOUS DATE | PREVIOUS READING | USAGE |
|---|---|---|---|---|---|
| Water | 11/09/99 | 329 | 10/30/99 | 327 | 2 TGAL |

Your water usage of 2 TGALs equals 2,000 gallons

| CHARGES | AMOUNT |
|---|---|
| Water | 16.03 |
| Storm Water | 3.02 |
| Total New Charges | $19.05 |

Impervious Area for Storm Water: 2000 or more square feet

6854 11/22

Please see reverse for important information

# PROPOSED PLOT PLAN

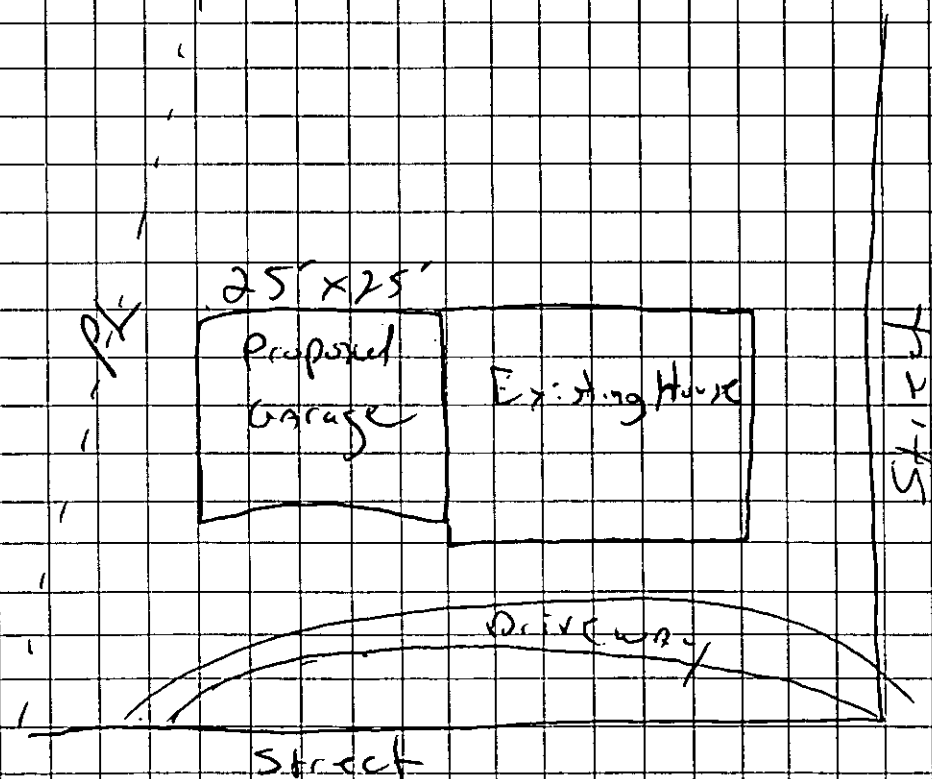
COPY

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

FILE: 10270

TC: 135-253-23

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.




Calvin S. Brock
OWNER/AGENT SIGNATURE

DATE

APPROVAL DATE

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