

16710 GREEN DOLPHIN LN

00107146

7/7/08

marliwr

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

Recorded @ CMUD

5/28/96 CR# 3370 $50.00

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

13510

[] 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

PERSON FILING APPLICATION:

NAME: Burkett, Marjorie Mills (last) (first) (mi)

ADDRESS: 5224 Guildbrook PHONE: 704 366-6064

CITY: Charlotte STATE: NC ZIPCODE: 28226

Date: 5-28-96

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 061-071-46

STREET ADDRESS: 16710 Green Dolphin Lane

Sec 2, Lot 118

ZONING:

PROPERTY OWNER:

NAME: (last) (first) (mi)

ADDRESS: PHONE: (__) ____

CITY: STATE: ZIPCODE:

SUBDIVISION OR MOBILE HOME PARK NAME:

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

TYPE APPLICATION (check one):

LOT NUMBER: LOT SIZE (in acres):

[X] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y) SFR to be built on lot
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (N)
[] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)

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: 2 NUMBER OCCUPANTS: 1

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: Marjorie Burkett Date: May 28, 1996

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.

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

...6/11/96 OSV. Marjorie Burkett + her builder, Wayne, present. Need: ① property corners - 760' high water mark indicated on site ② house plan with closet removed from "den/office"

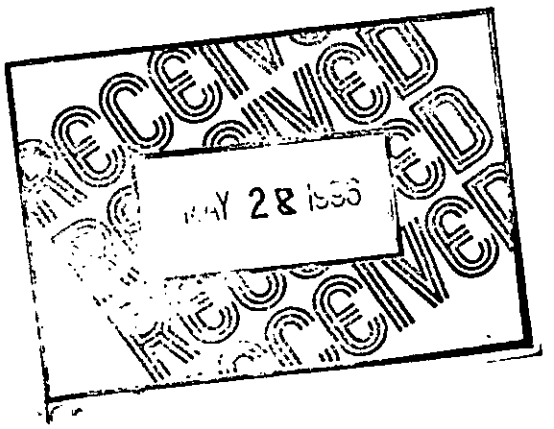
8/22/96 OSV. Steve Pelchat, builder present. S.T. damaged - needs replacing. Need 760' high water mark to be determined. Alteration possible - for separate washer drainfield on lot 14?8

NA
Environmentalist Date

NA
Director or Authorized Section Head Date

9/16/96 Steve Pelchat in office & submitted copy of CMUD tap fee receipt. Phoned Pelchat to DEM - Chuck Pippin regarding wells

WATER : 122791


RECEIVED
MAY 28 1953

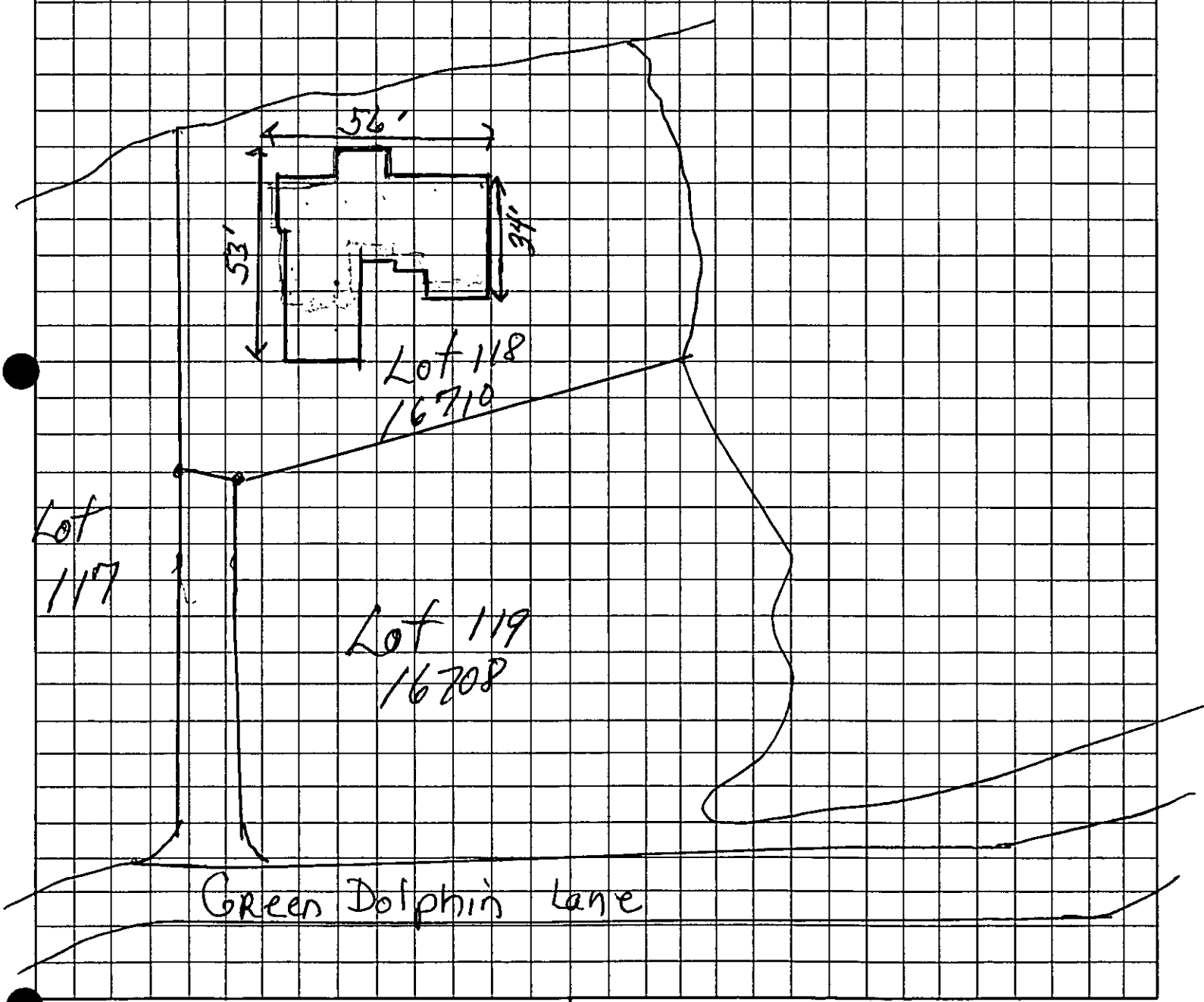
PROPOSED PLOT PLAN

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

FILE: 13510

TC: 001-071-46

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.



Marjorie M. Burkett
OWNER/AGENT SIGNATURE

DATE 5-28-96

APPROVAL DATE _____

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

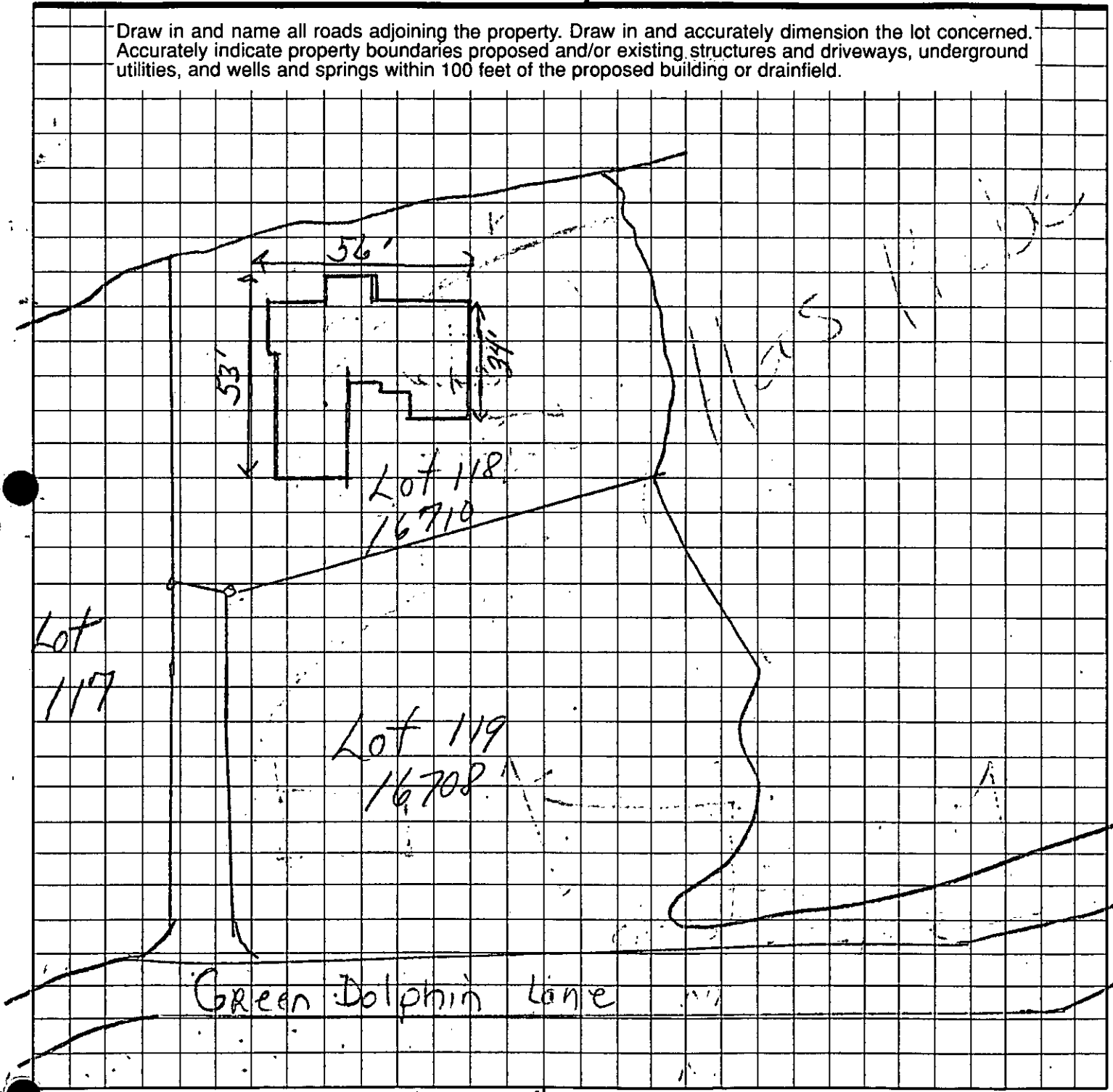
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Marjorie M. Beisel
OWNER/AGENT SIGNATURE

DATE 5-28-96

APPROVAL DATE _____

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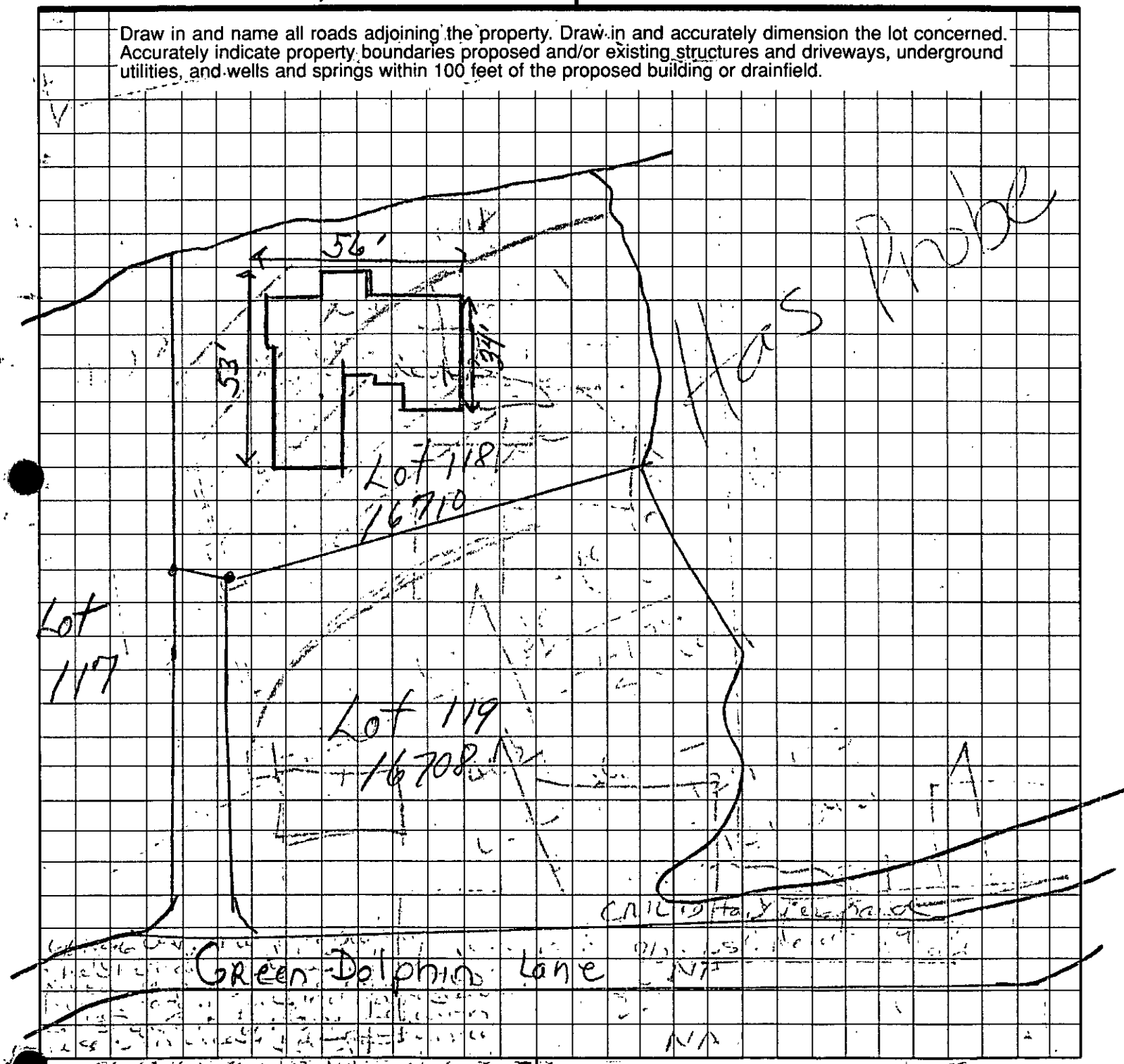
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OWNER/AGENT SIGNATURE Maurice M. Burkett

DATE 5-28-96

APPROVAL DATE

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Canary - E.H.S. Copy

Pink - Owner's Copy

File 13510

CHARLOTTE MECKLENBURG UTILITY DEPT.

DATE: 9-4-96

№ 38981

RECEIVED FROM: Marjorie M Burkett

Seventeen Hundred Fifty Dollars & no/100 — $ 1750

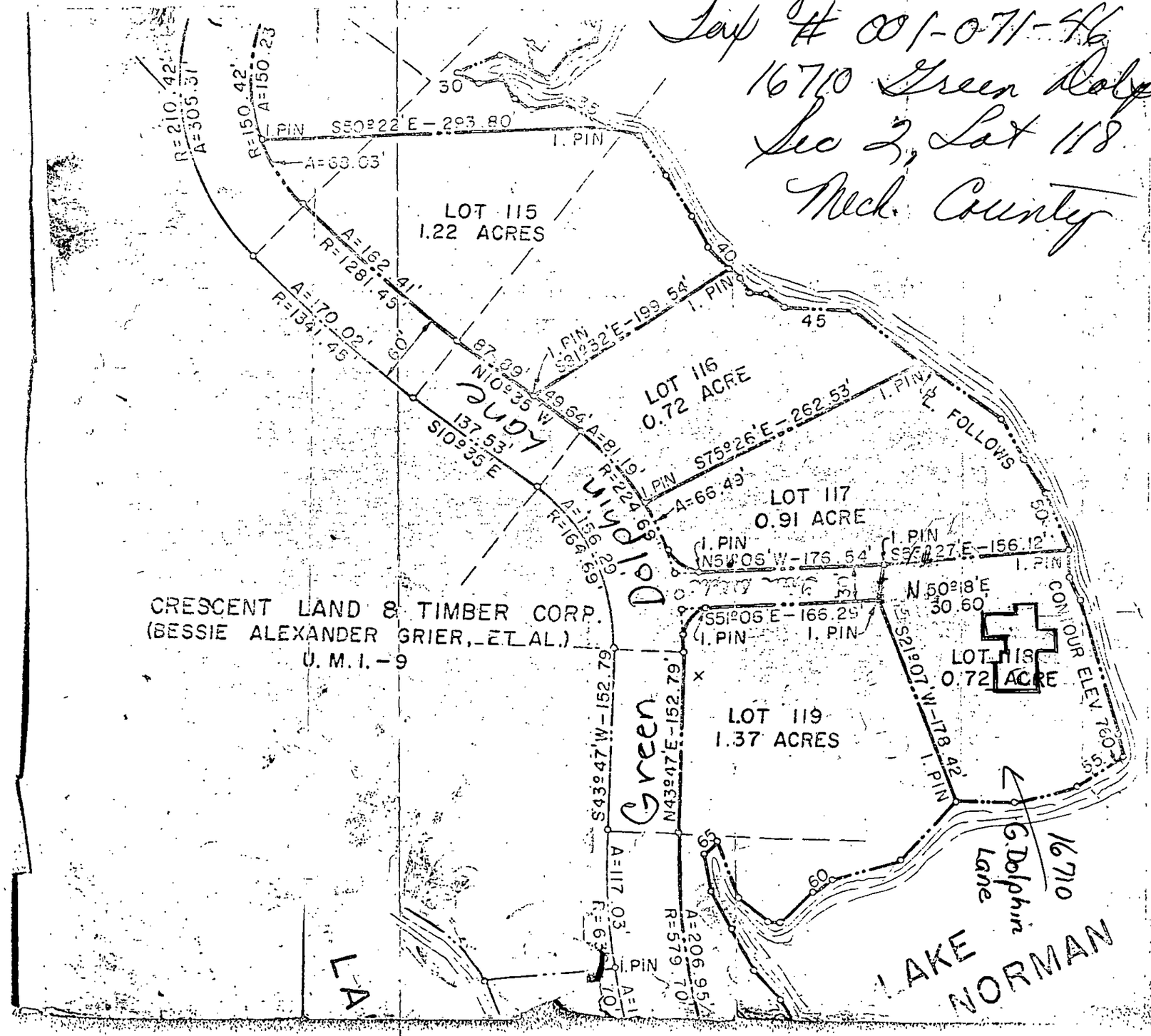
FOR: 16710 Green Dolphin Ln
4" Sewer Tap
366-6064

CASH ☐

CHECK ☒ 3048

RECEIVED BY: Willie Mae Trapp
Trapp

Marjorie Burkett
Tax # 001-071-46
1670 Green Dolphin
Sec 2, Lot 118
Meck. County



Mecklenburg County

This page is left in the original file as a placeholder. The following item(s) were removed from the original file prior to scanning and returned post scanning:

Large-format Drawings

Original File Number: 16710 Green Dolphin Lane

Box Number: 12

Number of pages associated with file: 1

General Comments: _____

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