

4505 JOHNSTON OEHLER RD

02932106

5/21/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 4489-A DATE: 7-18-88
PO
TC: 029-321-06 ☐ L ☑ CRT
SERIAL № 11284

Name of Owner Stanley Smith Juris.:
Address of Property 4505 Johnston Oehler Rd.

Inspection Data:

Tank Material PCC
Total Length of Drainfield 400'
Number of Lines 5 @ 80'
Cover Depth 18"-20"
Water Supply Source well
Distance to Water Source >50'
Excavation Inspected 7-18-88
Tank(s) Inspected 7-18-88
Wash Line Inspected
High Water Alarm Inspected

PLOT

Design: 1988, 1500 ST, con, 1200 SFT, 12 G, cecil-appling CTR# 22

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 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The 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 10 NCAC 10A .1900 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.

COMMENTS:

B. R. Ferguson
Environmentalist

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

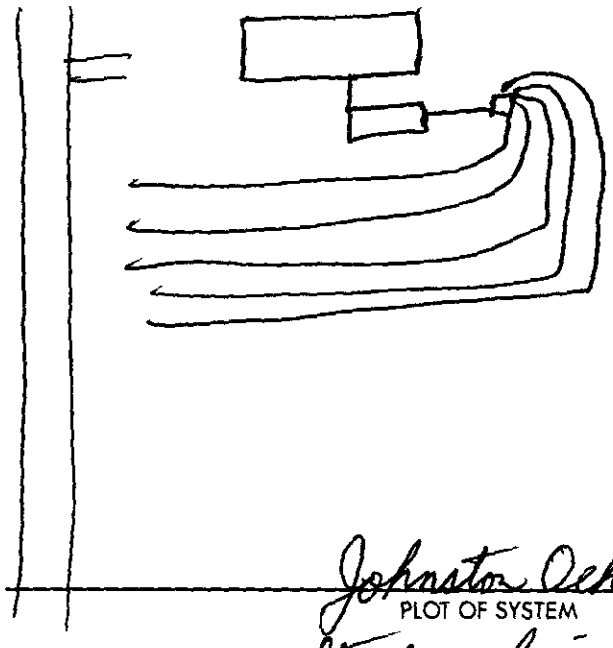
INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

FILE: 4489-A DATE: 6-17-88
PO TC: 029-321-06 ☐ L
SERIAL № 11944

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 6-16-88. All work shall be completed on or before 7-19-88, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .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 Department of Environmental Health 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.

well



Johnston Oehlund
PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons
Liquid Capacity of Dosing Tank _____ gallons
Tank Construction PCC

Absorption and/or Nitrification Lines:
Trench Width 3 feet
Total Line Length 400' feet
Number of Lines 5
Depth of Stone 12 inches
Distance from House 5 feet
Distance from Property Line 10 feet
Distance from Well > 75 feet

NAME OF OWNER Stanley Smith
LOCATION OF PROPERTY 4505 Johnston Oehler Rd.
Comments: 5 lines 3'x80'x12" stone, grade boards, straw cover

S Davis, RS
Division or Section Head

B.R. Ferguson
Environmentalist

* If this permit is for the installation or construction of a new system, it must be signed by the division or a section head of the Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

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

MECKLENBURG COUNTY

Charlotte-Mecklenburg

Building Standards Department

Environmental Health Dept. June 16, 1988

Subject:

Dear

The parcel of land located at 4505 Johnston-Oehler Rd and further identified by tax parcel number 029-321-06 P.O. is zoned RU (Pg. 42), (Rural).

permitted uses include: Mobil Homes are permitted as a use by right on individual lots.

If this office can be of any further assistance, please contact us.

Sincerely,

Z.L. Benson #605
Zoning Inspector

Form B-150 NS
10/84 59/b

6/16/88 PL 100 - CK#2757 DR

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: 4489A
TC: _____
SERIAL: № 16324 ☐ L ☑ CRT

JOB LOCATION

① ADDRESS: 4505 JOHNSTON OEHLER RD (STREET NO. / STREET) ② FILE: _____
③ JURISDICTION: _____ ④ TAX PARCEL NO.: 029-321-06 P.O.
⑤ SUBDIVISION: _____ ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: STANLEY (FIRST) WALTER (MIDDLE) SMITH (LAST)
⑨ MAILING ADDRESS: 4501 JOHNSTON OEHLER RD
⑩ CITY: CHARLOTTE ⑪ STATE: N.C. ⑫ ZIP: 28213
⑬ PHONE: (WORK) 596-4017 ⑭ (HOME) 547-0275

REQUEST

This request is for a(n):

⑮ ☒ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
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? 4
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 on the property for the purpose of processing this request.

Signed: Stanley Smith
Date: 6/16/88

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.

B. R. Ferguson 6-17-88
Environmentalist Date

S. D. Davis RS 6-20-88
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.

Need Zoning letter for MH

700 N. Tryon St.

DATE: 6-16-88

TO: HEALTH DEPARTMENT - ENVIRONMENTAL HEALTH

FROM: COUNTY ENGINEERING

EHD FILE _____ JURISDICTION CODE Meck

PARCEL NUMBER 029-321-06po

ASSIGNED ADDRESS 4505 Johnston-Oehler Rd

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: Septic tank

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: Ruf

OPWEAR 02/86

PROPOSED PLOT PLAN

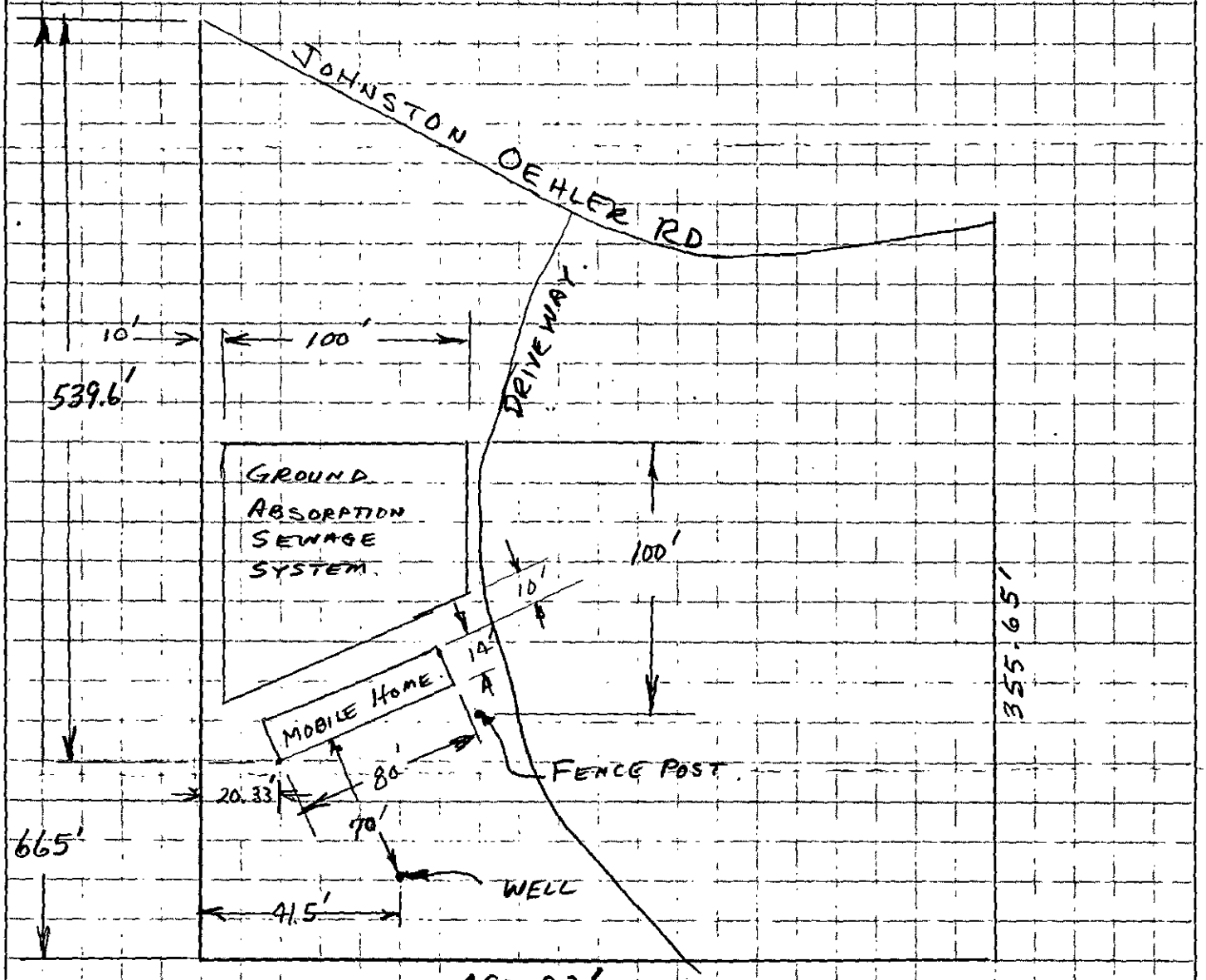
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 4489A

TC: _____

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.



Signed: Stanley Smith

Date: 6/16/88

MECKLENBURG COUNTY
Department of Environmental Health

May 11th, 1988

Stanley Walter Smith
4501 Johnston Oehler Road
Charlotte, NC 28213

RE: Property located at Johnston Oehler Road
FILE: 4489A
PARCEL: 02932106 PO

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 property was found to contain a limited area of soils which were classified as provisionally suitable for such an installation. A copy of the Site Evaluation Report (Serial Number 15173) is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, 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. The plan will be reviewed and if it is found that the area of provisionally suitable soils is adequate for the proposed construction, an Improvement Permit will be issued by this Department.

If I may be of assistance, please do not hesitate to contact me.

Sincerely,

Sylvia D. Daniel, R.S.
Environmental Health Supervisor
Environmental Resources Division

Enclosure

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 15173

File: 4448?9A Action 1

Parcel: 02932106 PO ☐ PC

Location: Johnston Oehler Road

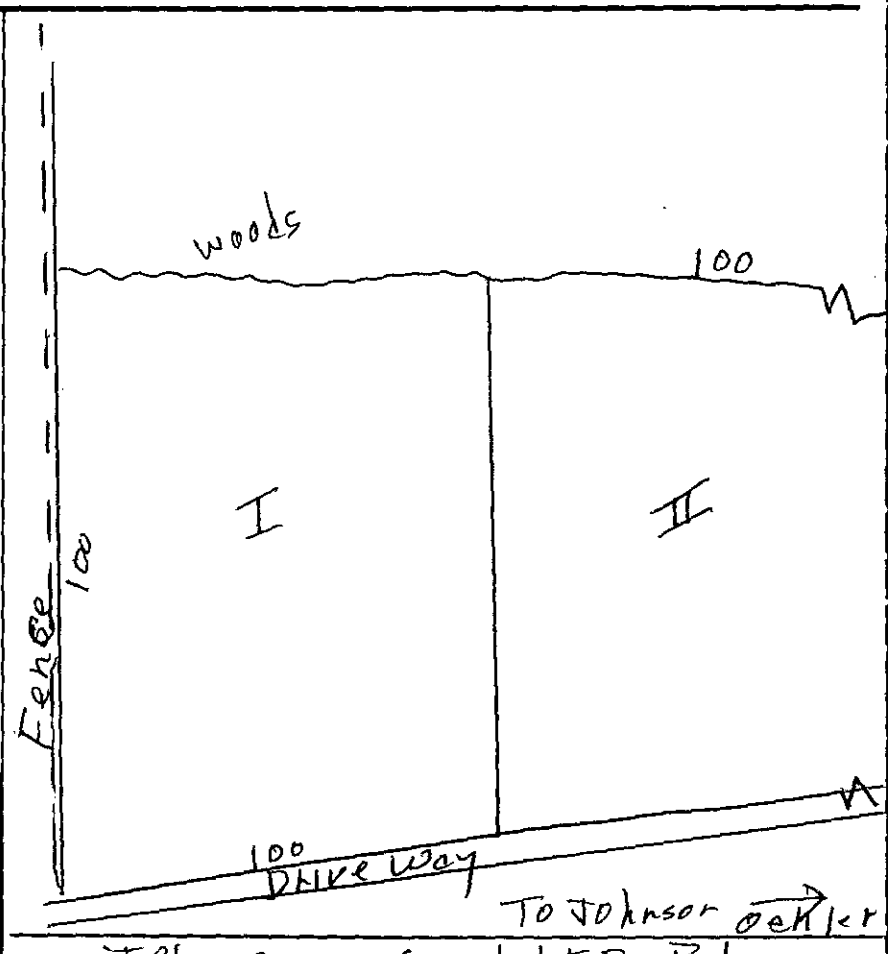
Subdivision:

Lot: Block: Acres: .75+

Owner: Stanley Walter Smith
Address: 4501 Johnston Oehler Road
Charlotte, NC 28213

Comments: mobile Home

Described by: W. B. Ramsey
Date: 5-10-88



***** 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 2-7	S (PS) U 2-8	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U	S PS (U) Mixed Clay	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U	S PS (U) Weak Blocky	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U	S PS (U) Poorly Drained below 12"	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 36-37	S PS (U) 18-25	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U	S (PS) U	S PS U	S PS U	S PS U	S PS U
Available Space	S (PS) U Part of Farm	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	~~IVa~~ Cecil-Appling Like	~~IVa~~ Mecklenburg				
Area Classification	S (PS) U	S PS (U)	S PS U	S PS U	S PS U	S PS U

4/21/88 Paid $30.00 Ck # EW

APPLICATION FOR SOIL INVESTIGATION

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

FILE: 4489A

TC: 029-321-06

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: 4501 JOHNSTON OEHLER RD

② SUBDIVISION: _____ ③ LOT: _____ ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: _____ PAGE NO.: _____ PARCEL NO.: _____

⑥ DEED REFERENCE: BOOK NO.: _____ PAGE NO.: _____

OWNER

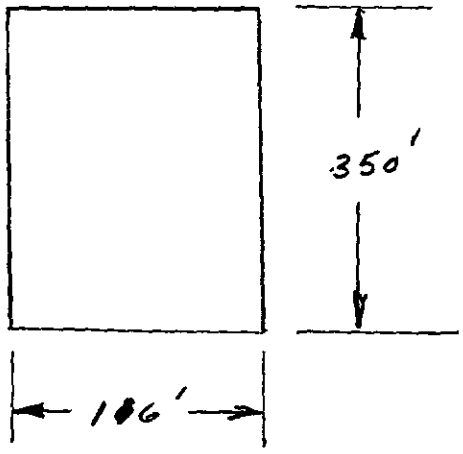
⑦ NAME: STANLEY (FIRST) WALTER (MIDDLE) SMITH (LAST)

⑧ MAILING ADDRESS: 4501 JOHNSTON OEHLER RD

⑨ CITY: CHARLOTTE ⑩ STATE: N.C ⑪ ZIP: 28213

⑫ PHONE: (WORK) 596-4017 (HOME) 547-0275

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: Stanley Smith

Date: 4/21/88

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