

13448 GRAYMIST DR

11123311

1/2/2008

duponbj

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

Mecklenburg County
Health Department

April 19, 1994

Betty S. Snow, R.N., M.A.
Health Director

Oscar Lee Flowe
13335 Albemarle Road
Charlotte, NC 28227

RE: Property located at off Greymist Drive
FILE: 3025B/9396A
PARCEL: 111-231-07

Dear Mr. Flowe:

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 20297) 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 15A NCAC 18A .1948 (d) 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 there are any questions, please contact Bill Marlin at 336-5574.

Sincerely,

Kelly Randall, R.S., Soil Scientist
Individual Water and Wastewater Systems

KR:lw

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 20297

File: 302501 / 9396A Action 2

Parcel: 111-231-07 CPC 400

Location: off Greymist Drive

Subdivision:

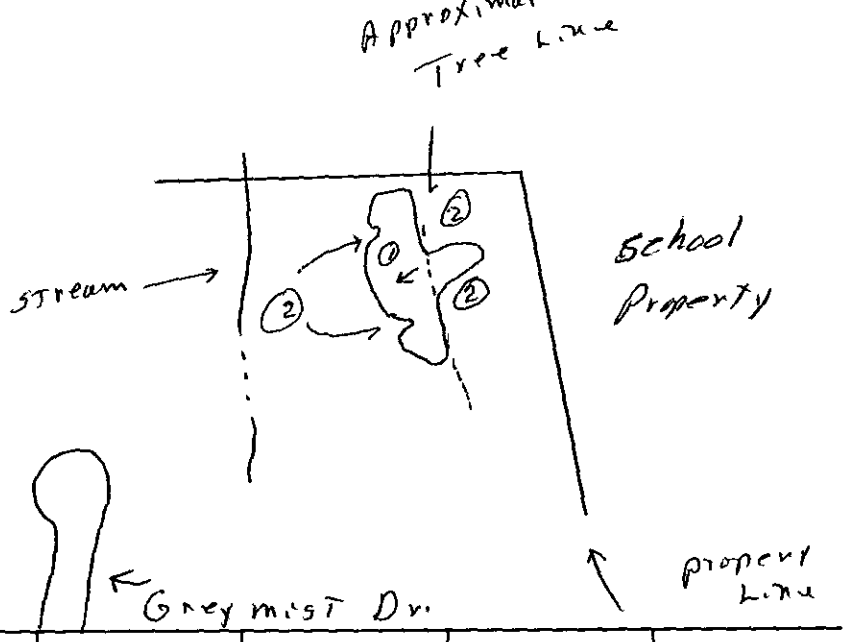
Lot: Block: Acres: Approx .5 ac.

Owner: Oscar Lee Flowe
Address: 13335 Albemarle Road
Charlotte, N.C. 28227

Comments: 100% Repair, 3 gall/ft/day LTAR

Described by: William A. Medlin

Date: 4-18-94



*** 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 6-15%	S PS (U) Complex Slopes	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U slightly Expansive 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 40" To Water	S PS U —	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 40"+	S PS U —	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 40"	S PS U —	S PS U	S PS U	S PS U	S PS U
Available Space	S PS (U) Restricted	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	IV Cecil/Ville	Complex Slopes				
Area Classification	S PS (U)	S PS (U)	S PS U	S PS U	S PS U	S PS U

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 20297

File: 3025 31 93114 Action ☐ PC

Parcel: 111-231-11

Location:

Subdivision:

Lot: Block: Acres:

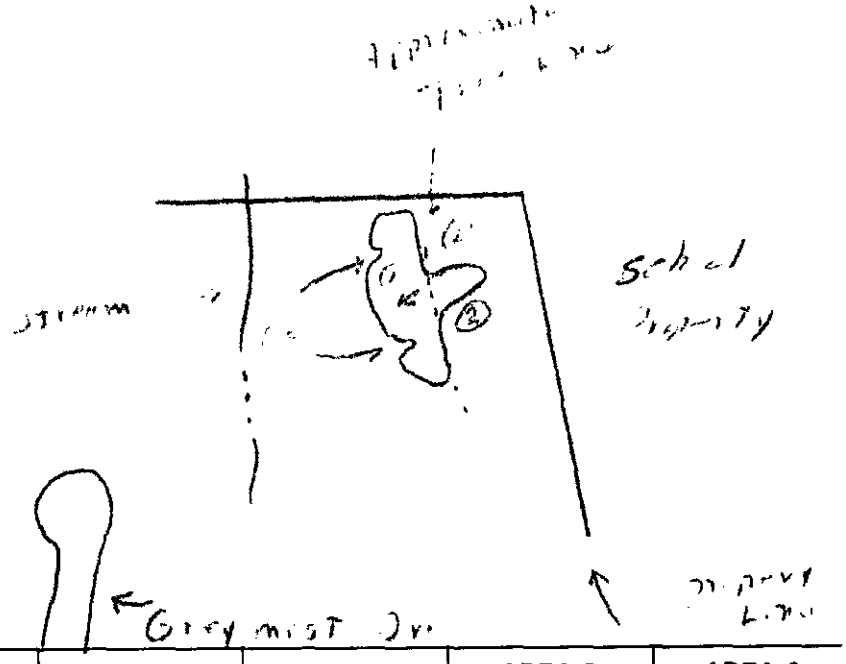
Owner:

Address:

Comments:

Described by:

Date: 4/15/14



***** 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	S PS U (complex slopes)	S PS U	S PS U	S PS U	S PS U
Texture	S PS U (highly Enon silty clay)	S PS U —	S PS U	S PS U	S PS U	S PS U
Structure (sub)	S PS U (blocky)	S PS U —	S PS U	S PS U	S PS U	S PS U
Drainage	S PS U (well drained)	S PS U —	S PS U	S PS U	S PS U	S PS U
Depth	S PS U 48" +	S PS U —	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S PS U >40"	S PS U —	S PS U	S PS U	S PS U	S PS U
Available Space	S PS U (restricted)	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	II (Cecil like)	II (complex slopes)				
Area Classification	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U

Sports Car Authority 1121 Industrial Dr 28105 Matthews

50 cents 3/14/94 mlb

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

[] CRT

3025B/1396A

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

COPY

PERSON FILING APPLICATION: Elizabeth Flowe

NAME: Flowe, Oscar Lee
(last) (first) (mi)

ADDRESS: 13335 Albemarle Rd PHONE: (704) 545-4708

CITY: Charlotte, NC STATE: NC ZIPCODE: 28227

Date:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 111-231-07

STREET ADDRESS: GREYMIST DRIVE

Charlotte NC.

ZONING:

PROPERTY OWNER:

NAME: Flowe, Oscar Lee
(last) (first) (mi)

ADDRESS: 13335 Albemarle Rd PHONE: (704) 545-4708

CITY: Charlotte STATE: NC ZIPCODE: 28227

SUBDIVISION OR MOBILE HOME PARK NAME:

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

LOT NUMBER: LOT SIZE (in acres): 5

TYPE APPLICATION (check one):

[X] SOIL TEST - INDIVIDUAL LOT (D)
[] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (N)
[] SOIL TEST DEVELOPMENT (P)
[] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
[] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[] REPAIR TO SYSTEM (R)

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

NUMBER BEDROOMS: NUMBER OCCUPANTS:

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)
[] 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: Elizabeth Flowe Date: 3/14/94

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the 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

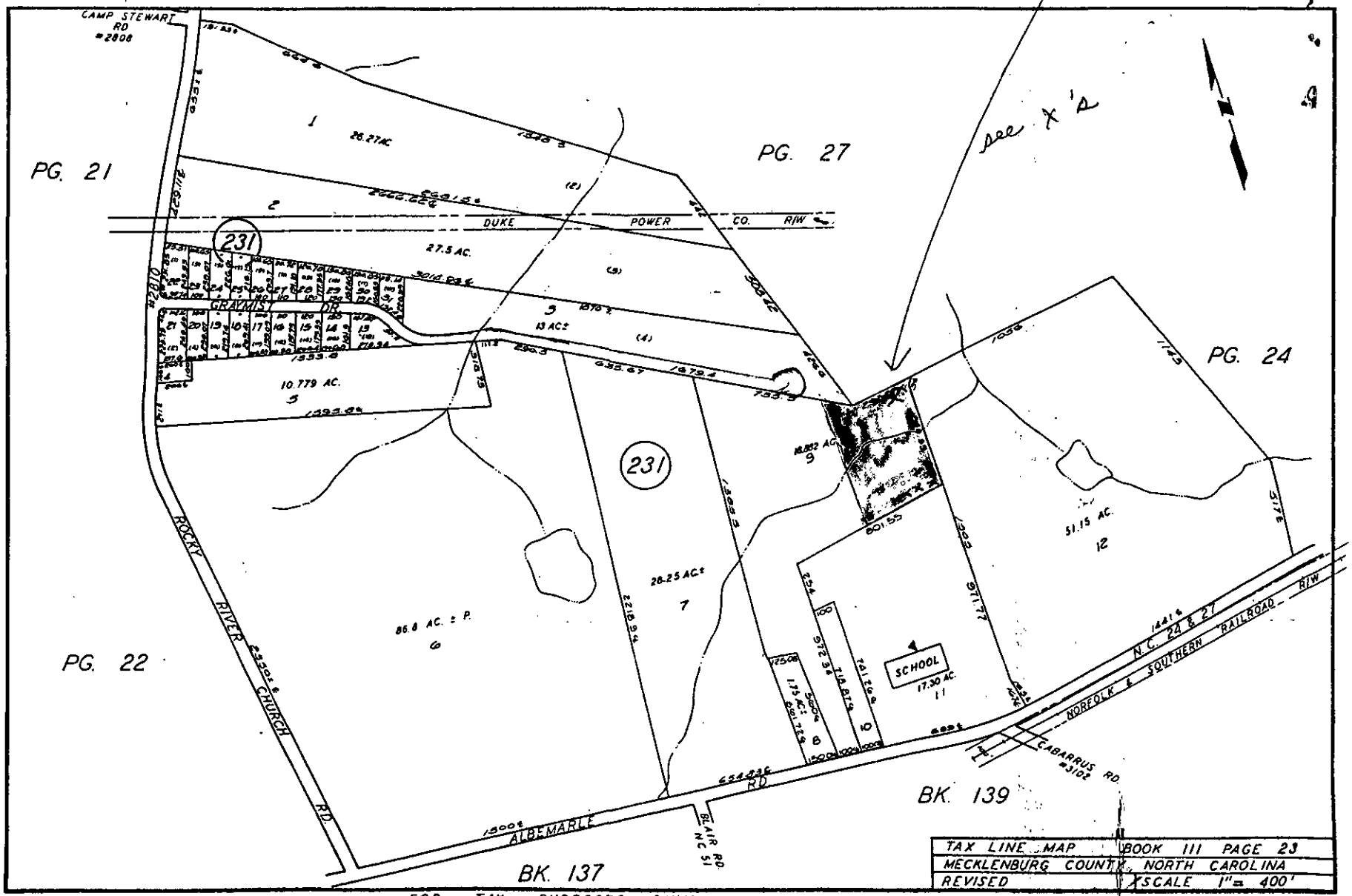
Environmentalist Date

Director or Authorized Section Head Date

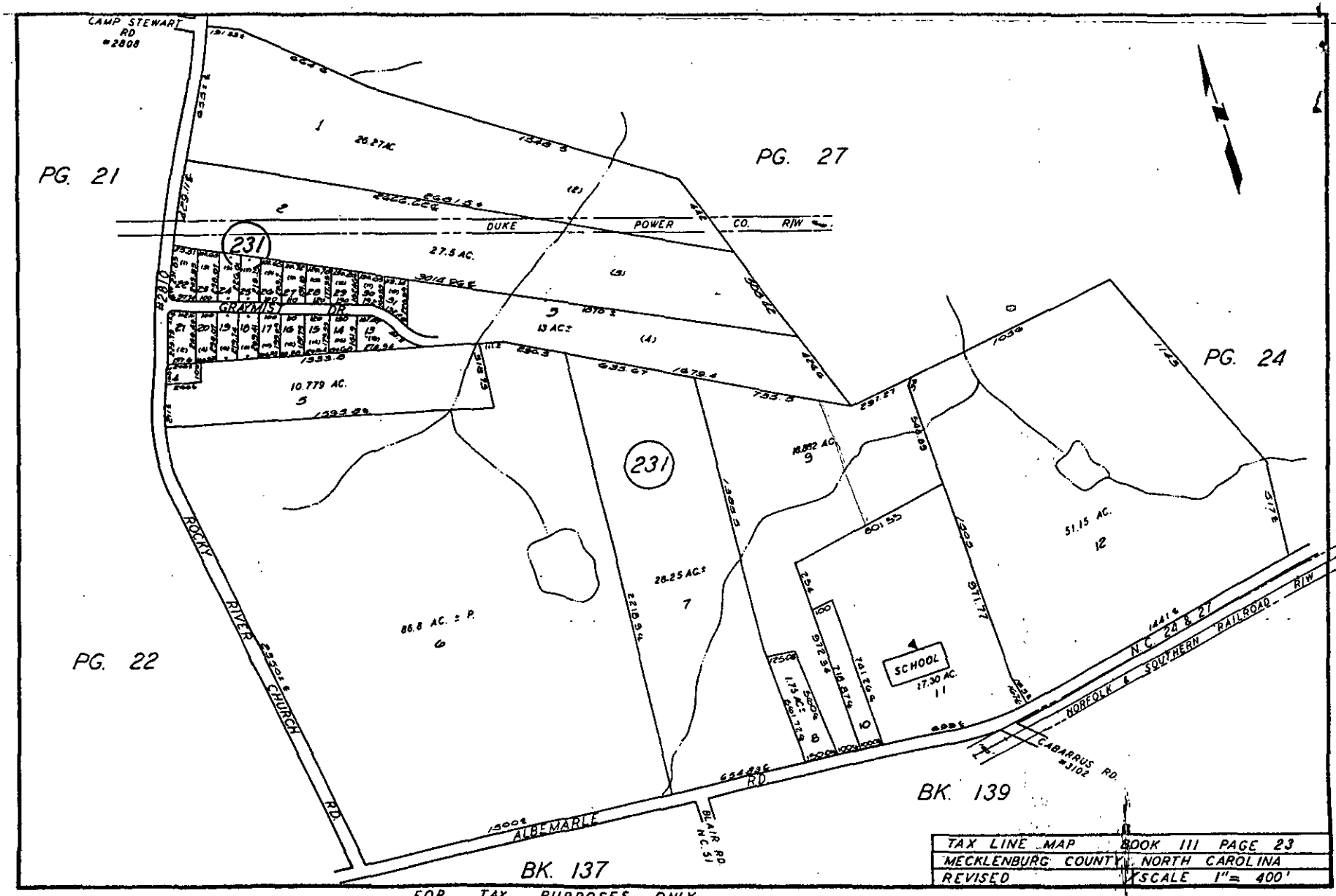
WATER : 122791

green area approx 5 - 5 1/4 acres

perk test at each corner of lot for potential house site



FOR TAX PURPOSES ONLY


CAMP STEWART RD #2808
PG. 21
PG. 27
PG. 24
PG. 22
BK. 137
BK. 139
DUKE POWER CO. R/W
GRAHMS DR
231
ROCKY RIVER CHURCH RD.
ALBEMARLE RD.
BLAIR RD N.C. 51
CABARRUS #3102 RD.
N.C. 24 & 27
NORFOLK & SOUTHERN RAILROAD R/W
SCHOOL
17.30 AC.
11
27.5 AC.
3
13 AC.±
4
10.779 AC.
5
86.8 AC. ± P.
6
28.25 AC.±
7
9
51.15 AC.
12
1.75 AC. ±
8
TAX LINE MAP BOOK 111 PAGE 23
MECKLENBURG COUNTY, NORTH CAROLINA
REVISED SCALE 1" = 400'
FOR TAX PURPOSES ONLY

APPLICATION FOR SOIL INVESTIGATION

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

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

(OFFICE USE ONLY)

FILE: _____

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: Greymist Drive (End of Road Rt. Side)

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

⑤ PARCEL REFERENCE: BOOK NO.: 111 PAGE NO.: 23 PARCEL NO.: 1162307

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

OWNER

⑦ NAME: Oscar (FIRST) Lee (MIDDLE) Howe (LAST)

⑧ MAILING ADDRESS: 13335 Albemarle Rd

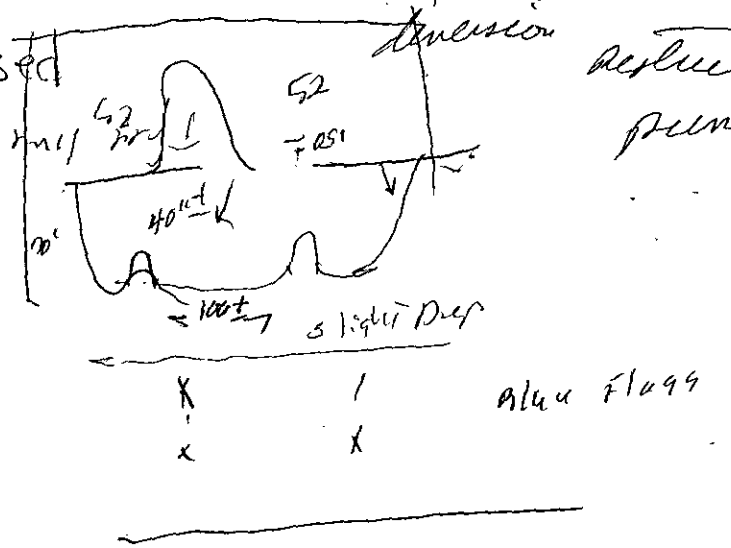
⑨ CITY: Charlotte ⑩ STATE: NC ⑪ ZIP: 28227

⑫ PHONE: (WORK) 847-7742 (HOME) 545-4708

⑬ Accurately diagram and dimension lot.

would need surface water diversion around pump

See map enclosed



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: 3/14/94 Oscar Lee Howe

Date: 3/14/94

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

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

[ ] CRT

3025B/1396A

50 cat 3/14/94 mlb

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: ~~Beckett~~, Elizabeth Flowe

NAME: Flowe (last), Oscar (first) Lee (mi)

ADDRESS: 13335 Albemarle Rd PHONE: (704) 545-4708

CITY: Charlotte, NC STATE: NC ZIPCODE: 28227

Date:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 111-231-07

STREET ADDRESS: GREYMIST DRIVE

Charlotte NC.

ZONING:

PROPERTY OWNER:

NAME: Flowe (last), Oscar (first) Lee (mi)

ADDRESS: 13335 Albemarle Rd PHONE: (704) 545-4708

CITY: Charlotte STATE: NC ZIPCODE: 28227

SUBDIVISION OR MOBILE HOME PARK NAME:

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

LOT NUMBER: LOT SIZE (in acres): 5

TYPE APPLICATION (check one):

[X] SOIL TEST - INDIVIDUAL LOT (D)
[ ] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
[ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[ ] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[ ] COMMERCIAL OR INDUSTRIAL (N)
[ ] SOIL TEST DEVELOPMENT (P)
[ ] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
[ ] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[ ] REPAIR TO SYSTEM (R)

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

NUMBER BEDROOMS: NUMBER OCCUPANTS:

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)
[ ] 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: Elizabeth Flowe Beckett Date: 3/14/94

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

Environmentalist Date

Director or Authorized Section Head Date

WWATER : 122791

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: _____

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: Greymist Drive (End of Road Rt. Side)

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

⑤ PARCEL REFERENCE: BOOK NO.: 111 PAGE NO.: 23 PARCEL NO.: 1123107

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

OWNER

⑦ NAME: Oscar (FIRST) Lee (MIDDLE) Flowe (LAST)

⑧ MAILING ADDRESS: 13335 Albemarle Rd

⑨ CITY: Charlotte ⑩ STATE: NC ⑪ ZIP: 28227

⑫ PHONE: (WORK) 847-7742 (HOME) 545-4708

⑬ Accurately diagram and dimension lot.

See map enclosed

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Signed: 3/14/94 Oscar Lee Flowe

Date: 3/14/94

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

APPLICATION FOR SOIL INVESTIGATION

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH

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

(OFFICE USE ONLY)

FILE: _____

TC: _____

☐ PC ☐ REPT

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

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

OWNER

⑦ NAME: _____
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: _____

⑨ CITY: _____ ⑩ STATE: _____ ⑪ ZIP: _____

⑫ PHONE: (WORK) _____ (HOME) _____

⑬ Accurately diagram and dimension lot.

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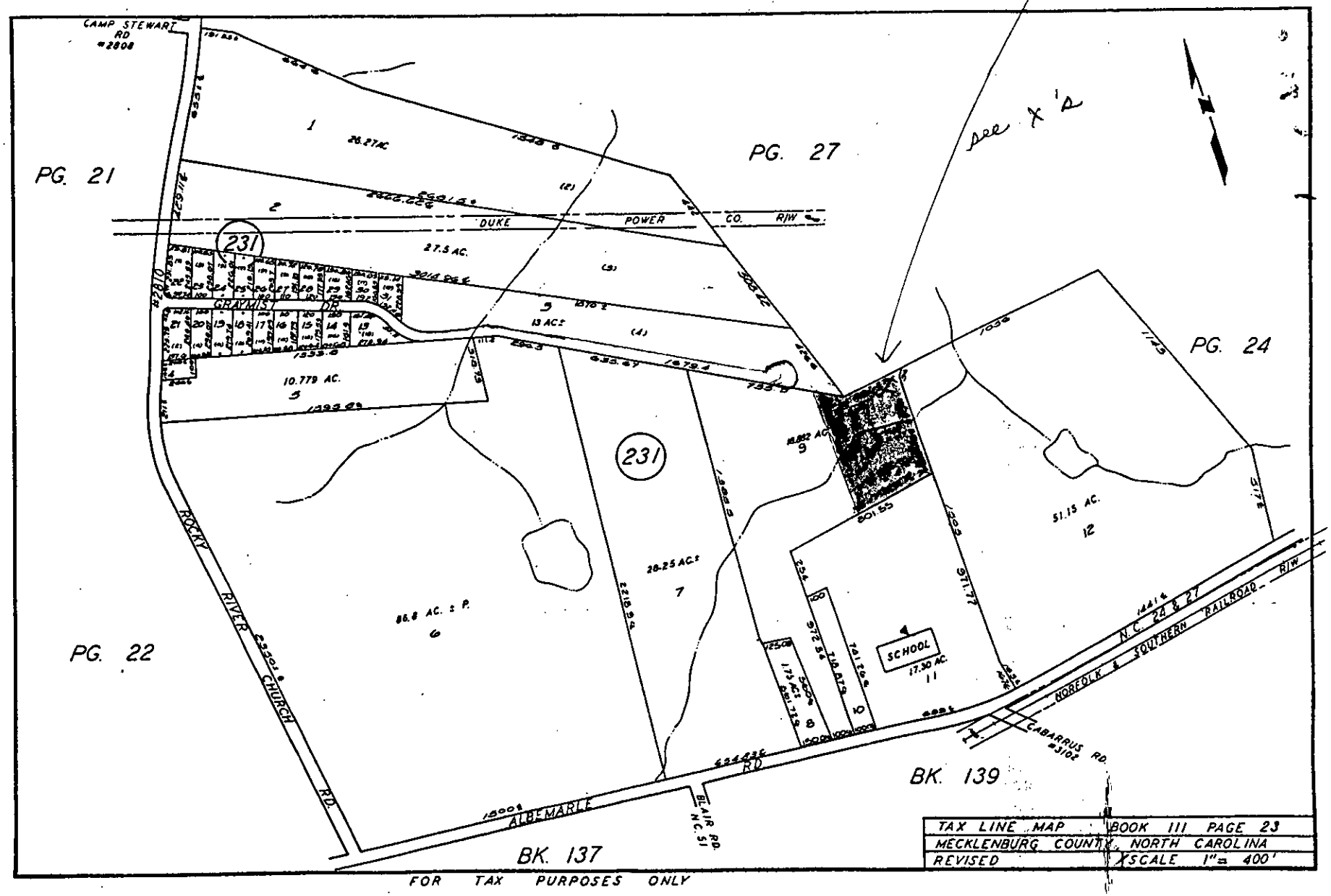
Signed: _____

Date: _____

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

green area approx 5 - 5 1/4 acres

... each corner of lot for potential house site



FOR TAX PURPOSES ONLY

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: _____

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: Greymist Drive (End of Road Rt. Side)

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

⑤ PARCEL REFERENCE: BOOK NO.: 111 PAGE NO.: 23 PARCEL NO.: 1123107

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

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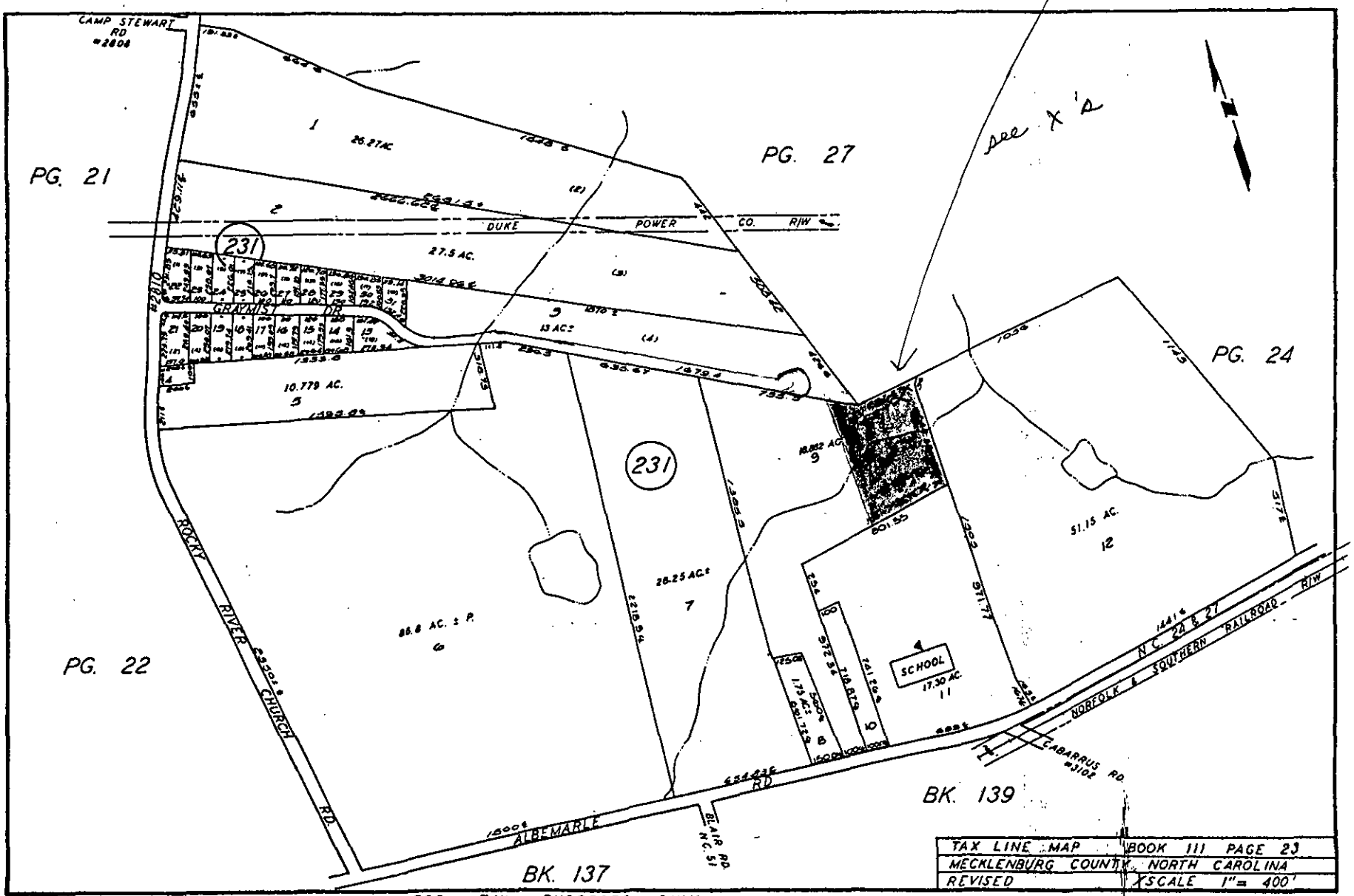
Date: 3/14/94

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

green area appox 5 - 5 1/4 acres

each corner of lot for potential house site



green area appox 5 - 5 1/4 acres

put x's in each corner of lot for potential house site

