

12013 SHADY OAK CT

19518132

6/1/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 5567-A DATE: 6-17-92

TC: 195-051-06 ☐ L ☒ CRT

SERIAL Nº 14136

Name of Owner Dr Joe Brown Juris.:

Address of Property 12013 Shady Oaks Court

Inspection Data:

Tank Material —

Total Length of Drainfield 200'

Number of Lines 2 @ 50

Cover Depth 3' +-

Water Supply Source comm system

Distance to Water Source 100' +

Excavation Inspected 6-17-92

Tank(s) Inspected —

Wash Line Inspected —

High Water Alarm Inspected —

PLOT

Design: 1992 Repair CTR#

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:

Kelly Randall
Environmentalist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

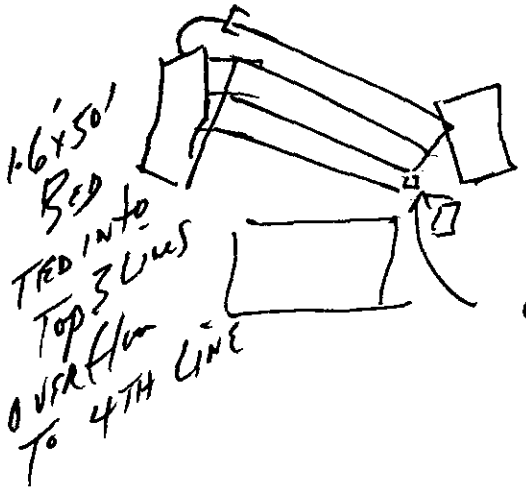
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 5562A DATE: 6-02-92

TC: 195-051-06 ☐ L

SERIAL Nº 14123

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 6-02-92. All work shall be completed on or before 7-02-92, 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 Health Department 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.



Liquid Capacity of Septic Tank — gallons

Liquid Capacity of Dosing Tank — gallons

Tank Construction ____

Absorption and/or Nitrification Lines:

Trench Width (2) 6 feet

Total Line Length (2) 50 feet

Number of Lines 2 Reds 2 Lines Each

Depth of Stone 18" each inches

Distance from House >10 feet

Distance from Property Line 10 feet

Distance from Well N/A feet

PLOT OF SYSTEM

NAME OF OWNER Dr Joe Kloud

LOCATION OF PROPERTY 12013 Shag Oaks Trail All Roof Gutters To Be Disconnected From System

Comments: System Age Less Than 1 Year

Division or Section Head

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 Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER OR AGENT'S COPY

400

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 55602A DATE: 02/5/92

TC: 195-051-0620 ☒ L ☐ CRT

SERIAL № 14023

Name of Owner Bob McLemore Homes Juris.:

Address of Property 10213 SHADY OAK CT.

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400/140'W

Number of Lines 4/2'W @ 100/70'W

Cover Depth 12"

Water Supply Source Com Well

Distance to Water Source N/A

Excavation Inspected 2/5

Tank(s) Inspected 2/5

Wash Line Inspected 2/5

High Water Alarm Inspected -

PLOT

Design: 1992, 1500 Gal, 1200 S/F, 420 S/F W/L, 12" G. Cell CTR# 113

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: ST III

Environmentalist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

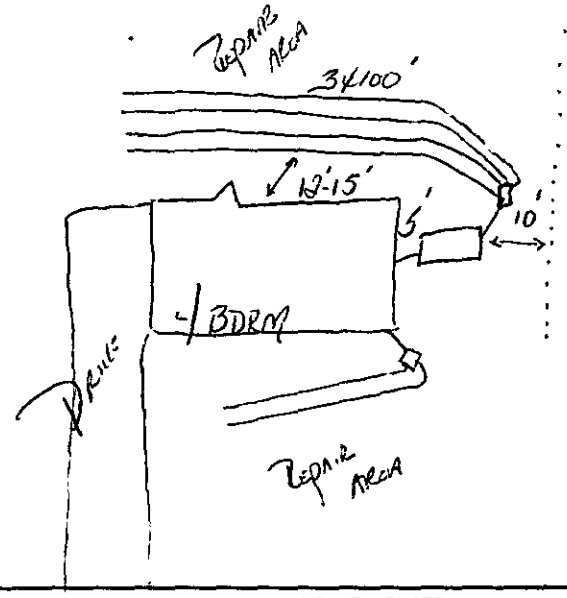
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 55602A DATE: 11-13-91

TC: 195-051-0620 ☑ L

SERIAL Nº 13858

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 11-13-91. All work shall be completed on or before 12-13-91, 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 Health Department 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.



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 400/140 WL feet

Number of Lines 4/2 WL

Depth of Stone 12 inches

Distance from House >5 feet

Distance from Property Line >10 feet

Distance from Well N/A feet

NAME OF OWNER Bob McLemore Co.

LOCATION OF PROPERTY 1613 Shady Oak Ct.

Comments: Install 4 trenches 34'100', 3 Washer Line 2 Trenches 34'70'

Division or Section Head

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 Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER OR AGENT'S COPY

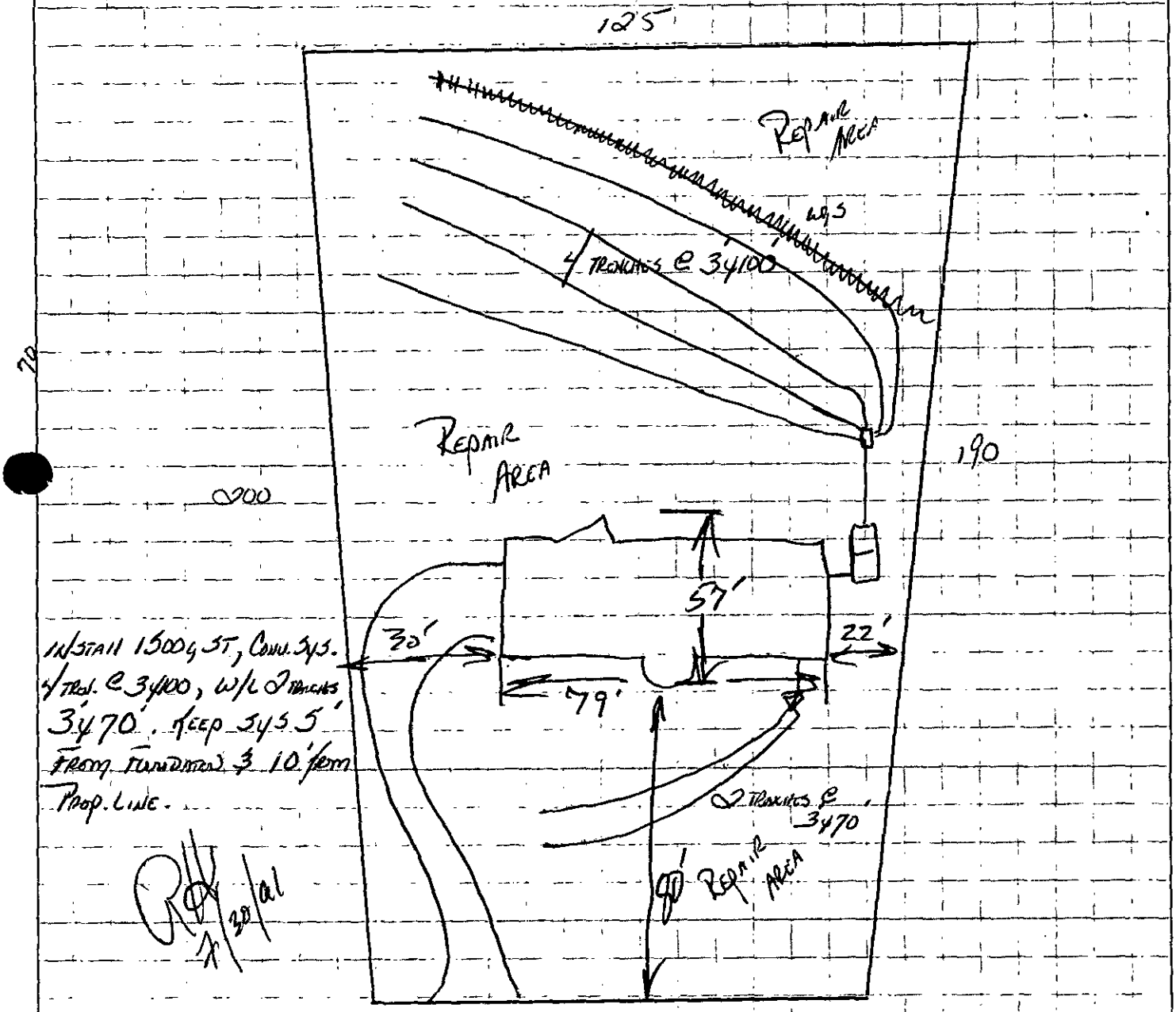
PROPOSED PLOT PLAN

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

FILE: #5562A

TC: 19505106P.O.

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.



INSTALL 1500g ST, CONV. SYS. 4/TRE. @ 34100, W/L 2 TRENCHES 3470'. KEEP SYS 5' FROM FOUNDATION & 10' FROM PROP. LINE.

7-30-91

Signed: [signature]

Date: 7/23/91

APPLICATION FOR AN IMPROVEMENT PERMIT

CK# 16420
7/26/91
$200.00

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

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: #5562A
TC: 19505106 P.O.
SERIAL: № 15818
☑ L ☐ CRT

JOB LOCATION

① ADDRESS: 12013 (STREET NO.) SHADY OAK Court (STREET) ② FILE: #5562A
③ JURISDICTION: ④ TAX PARCEL NO.: #19505106 P.O.
⑤ SUBDIVISION: FARMWOOD EAST ⑥ LOT: #62 ⑦ BLOCK:

OWNER

⑧ NAME: BOB McLEMORE & Co. (FIRST) (MIDDLE) (LAST)
⑨ MAILING ADDRESS: P.O. Box 25746
⑩ CITY: CHARLOTTE ⑪ STATE: NC ⑫ ZIP: 28229
⑬ PHONE: (WORK) 545-6112 ⑭ (HOME)

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? 5
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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed:
Date: 7/23/91

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, 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 Environmental Health or an authorized section head in order to be valid.

DATE	FAMILY MEMBER	DESCRIPTION	TOTAL FEE	PAYMENT / CREDITS	ADJ.	BALANCE
01/26/11		[illegible]	200.00	200.00	—	0

PREVIOUS BALANCE	PATIENT'S NAME
—	[illegible] Inc.

This is your **RECEIPT** for this amount

This is a **STATEMENT** of your account to date

Please present this slip to receptionist before leaving office

Mecklenburg County Health Department
ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203
TELEPHONE: (704) 376-4603

Fade #5562A

CR # 16420
$200.00

Thank You

DLP _____

AFP _____

YOUR NEXT APPOINTMENT WILL BE			
PATIENT NAME	DATE	DAY	TIME

..... Days ..... Weeks ..... Months

TIME NEEDED .....

5320

5320

Mecklenburg County
Health Department

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

April 26th, 1989

Harry Grimmer & Co., Inc.
P. O. Box 898
Matthews, NC 28106

RE: Property located at 12013 Shady Oak Court 62
FILE: 5562A
PARCEL: 19505106 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. Results of the investigation revealed that the lot contains soils which have been classified as PROVISIONALLY SUITABLE in accordance with the provisions of 10 NCAC 10A .1900. A copy of the Site Evaluation Report (Serial Number 12053) deliniating the soil types and their respective classifications is enclosed.

While this classification indicates the site is acceptable for the installation of a septic tank system, no specific system or plans have been approved. The area available for such an installation may impose limitations on the size and/or type construction permitted on the lot. Specific plan approval will be provided upon submission of 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 and determination that the area is adequate to accomodate the proposed construction.

Please note that this classification may be revoked if any filling, grading or construction (including the drilling of a well) is performed on the lot which in the opinion of this Department renders any area previously designated suitable for system installation, unsuitable. Futhermore, this approval may be revoked should any changes occur in the regulations under which it was granted, if such changes would have prevented its approval had they been in effect on the date of issuance.

If there are any questions concerning this matter, do not hesitate to contact me.

Very truly yours,

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

Enclosure

Environmental Health Division
1200 Blythe Boulevard • Charlotte, North Carolina 28203 • (704) 376-4603

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 12053

File: 5562A

Action 4

Parcel: 195-051-06

☐ PC

Location: 12013 Shady Oak Ct.

Subdivision: Hollow Oak Estates

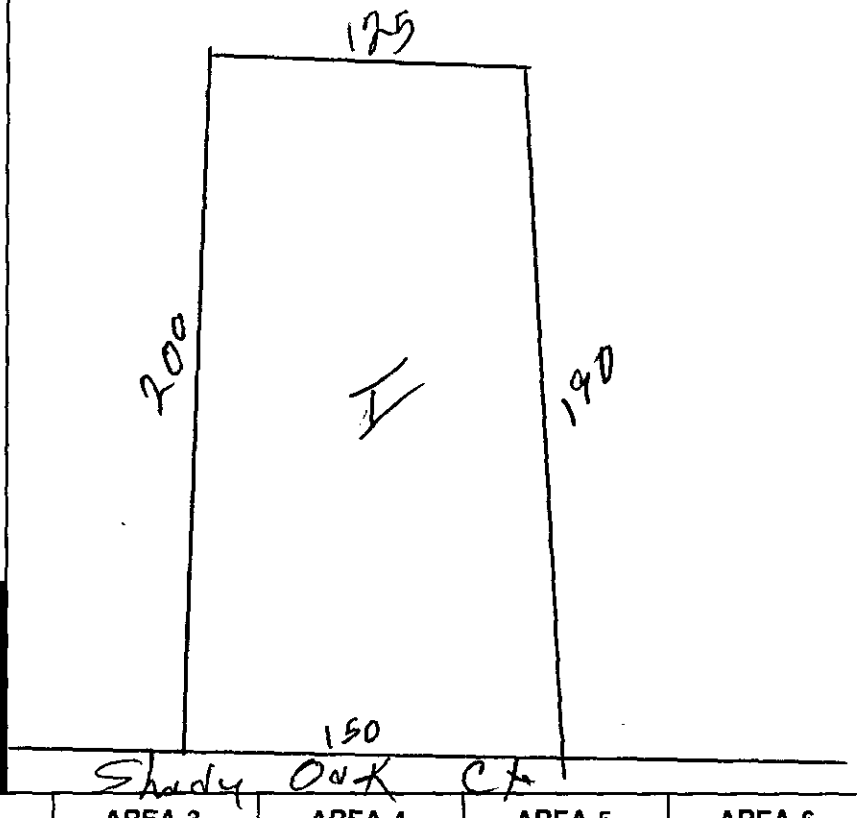
Lot: 62 Block: Acres: .64A

Owner: Harry Grimmer & Co., Inc.
Address: PO Box 898
Matthews, NC 28106

Comments: _____

Described by: W. B. Ramsey

Date: 4 25 -89



***** 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 2-5	S PS U	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 42	S PS U	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	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	IIa Cecil					
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

(OFFICE USE ONLY)

FILE: 5562A

TC:

☑ PC ☐ REPT

see file 5561A for charge slip

✓

JOB LOCATION

① ADDRESS: 12013 Shady Oak Court

② SUBDIVISION: Hollow Oak Estates ③ LOT: 62 ④ BLOCK: 1

⑤ PARCEL REFERENCE: BOOK NO.: 195 PAGE NO.: 05 PARCEL NO.: 051-06

⑥ DEED REFERENCE: BOOK NO.: 5857 PAGE NO.: 410

OWNER

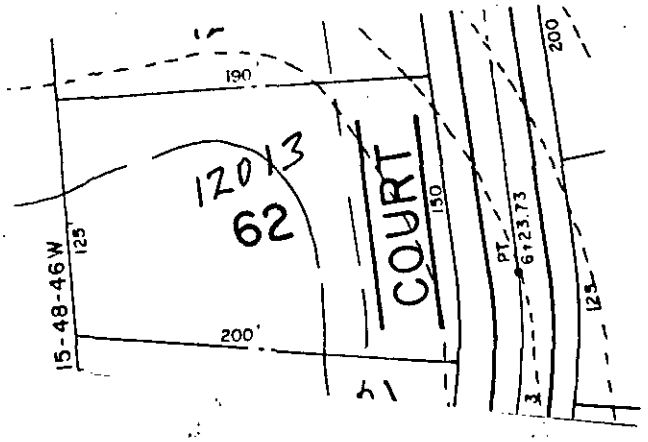
⑦ NAME: Harry Grimmer & Co., Inc.
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: P.O. Box 898

⑨ CITY: Matthews, ⑩ STATE: NC ⑪ ZIP: 28106

⑫ PHONE: (WORK) 704/847-8823 (HOME)

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: [signature]

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

Date: 3-27-89

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