

1829 BURGIN ST

1/2/2008

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Groundwater and Wastewater Services File Imaging Project

May 2007

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Mecklenburg County
Health Department

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

April 14, 1994

Susan J. Dixon
7675 Wallace Lane
Charlotte, NC 28212

RE: Property located at 1833 Burgin Street
FILE: 3028B/9399A
PARCEL: 101-161-27

Dear Ms. Dixon:

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 20295) 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
Enclosure (2)

MECKLENBURG COUNTY HEALTH DEPARTMENT File: 3025 B/9399A Action 2
SITE EVALUATION REPORT
SERIAL NUMBER 20295 Parcel: 101-161-27 PC

Location: 1633 Burgin St.

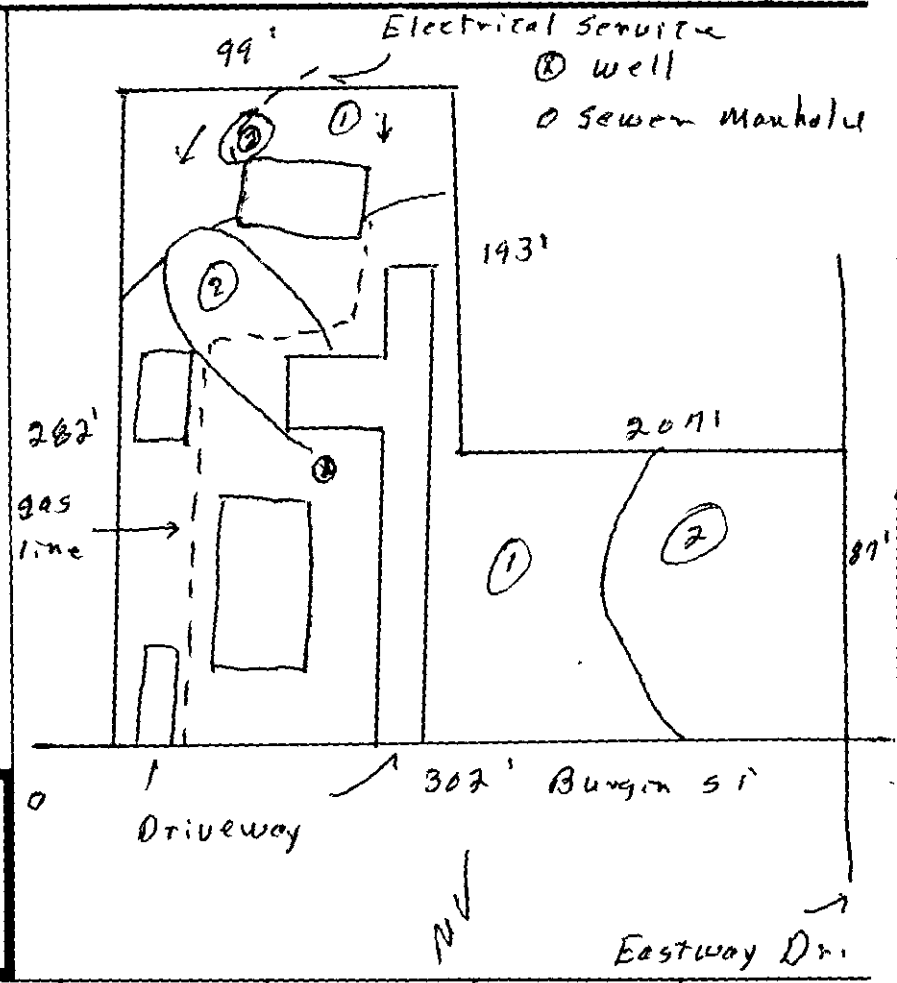
Subdivision:

Lot: Block: Acres: 1.0

Owner: Susan J. Dixon
Address: 7675 Wallace Lane
Charlotte, N.C. 28212

Comments: Sewer Manhole 35'± From property line

Described by: William R. Marks
Date: 4-14-94



*** 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) Depression	(S) PS U 2-10%	S PS U	S PS U	S PS U	S PS U
Texture	S PS U	S (PS) U slightly Expansive clay	S PS U	S PS U	S PS U	S PS U
Structure	S PS U	S (PS) U subt Block 1	S PS U	S PS U	S PS U	S PS U
Drainage	S PS U	S (PS) U To >36" water	S PS U	S PS U	S PS U	S PS U
Depth	S PS U	S PS (U) 18-35"	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S PS U	S (PS) U >36"	S PS U	S PS U	S PS U	S PS U
Available Space	S PS U	S PS (U) Restricted	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	Depression	IIe Parolee Silt				
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 20295

File: 1-31/13114 Action 2

Parcel: 111-111-27 PC

Location: 1133 Burgan Dr

Subdivision:

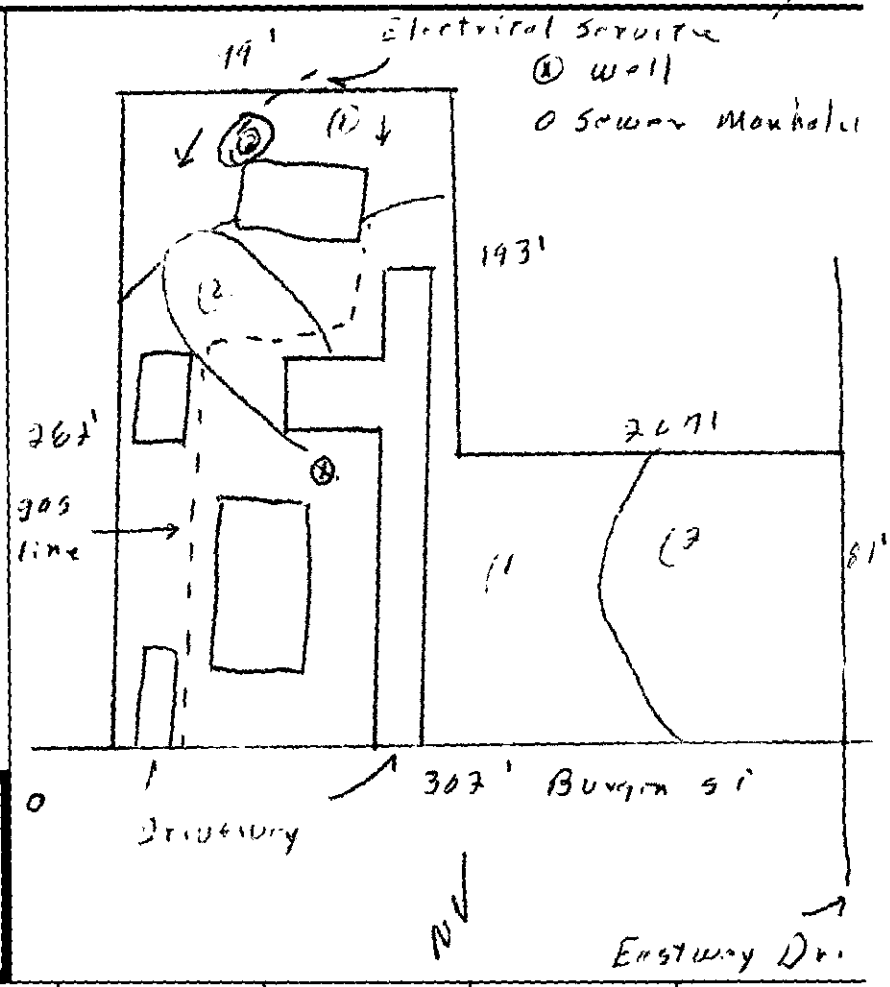
Lot: Block: Acres: 1.0

Owner: [illegible]
Address: 1133 Burgan Dr
Charlotte N.C. 28212

Comments: Sewer Manhole 35' from property line

Described by: [illegible]

Date: 4-14-201



***** EVALUATION KEY *****

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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 Depression	S PS U 2-10%	S PS U	S PS U	S PS U	S PS U
Texture	S PS U —	S PS U Sandy Clay	S PS U	S PS U	S PS U	S PS U
Structure	S PS U —	S PS U Sub Blocky	S PS U	S PS U	S PS U	S PS U
Drainage	S PS U	S PS U 36" limit	S PS U	S PS U	S PS U	S PS U
Depth	S PS U —	S PS U 16-39'	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S PS U —	S PS U 36"	S PS U	S PS U	S PS U	S PS U
Available Space	S PS U	S PS U Restricted	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	Depression	Iredell Loam				
Area Classification	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U

Jack D Ellard 536-877377

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM 3/15/94
APPLICATION FOR SERVICES Case #50.-

3028B|9399A

[] 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: Dixon, (last) Susan (first) J. (mi)
ADDRESS: 7675 Wallace Lane PHONE: 704 568-2617
CITY: Charlotte, STATE: N.C. ZIPCODE: 28212

Date: February 23, 1994

PROPERTY OWNER:
NAME: Dixon, (last) Susan (first) J. (mi)
ADDRESS: ~~1833~~ 1829 Burgin St. PHONE: (704) 568-2617
CITY: Charlotte, STATE: N.C. ZIPCODE: 28205

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 101-161-27
STREET ADDRESS: 1829 Burgin St. ~~1833~~ Charlotte, N.C. 28205
ZONING:

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

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: LOT SIZE (in acres):

TYPE APPLICATION (check one):
[X] SOIL TEST - INDIVIDUAL LOT (O)
[] 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) [X] 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 [X] 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: X Susan J. Dixon Date: X February 23, 1994

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

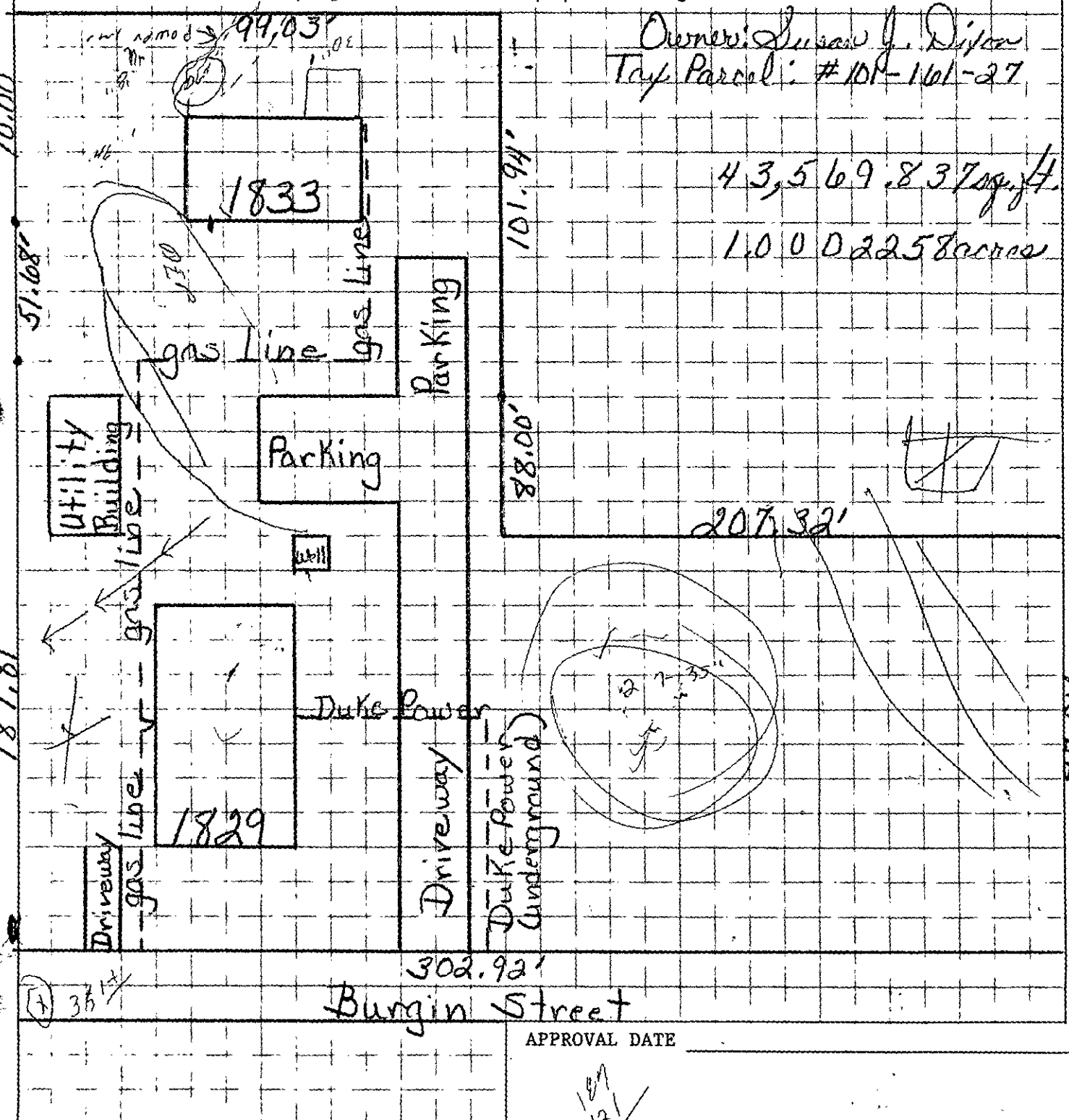
PROPOSED PLOT PLAN

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

FILE: 3028 Pol 9399A

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.



APPROVAL DATE _____

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM 3/15/94
APPLICATION FOR SERVICES Case #50.00

3028B/9399A

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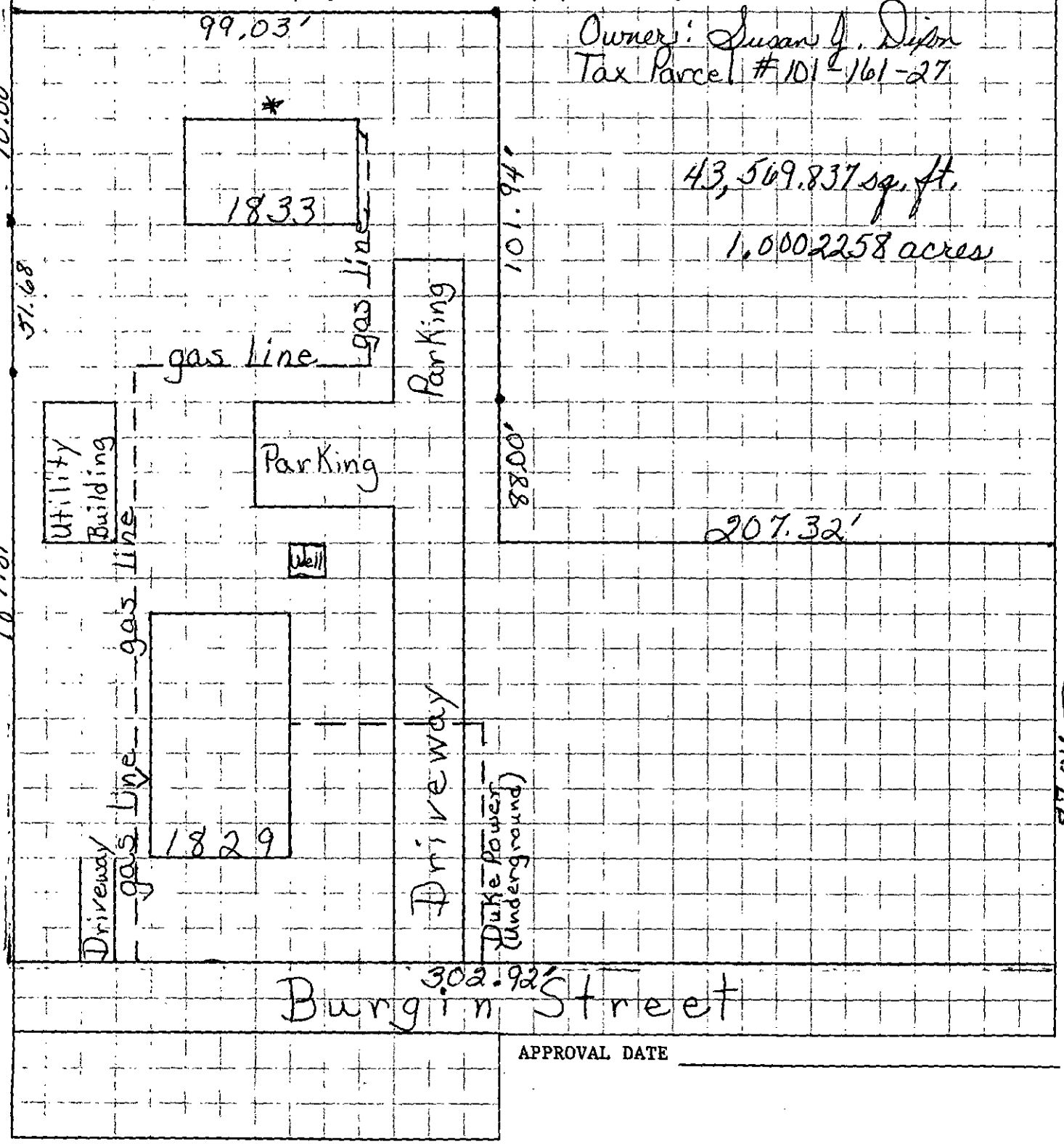
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TC: _____

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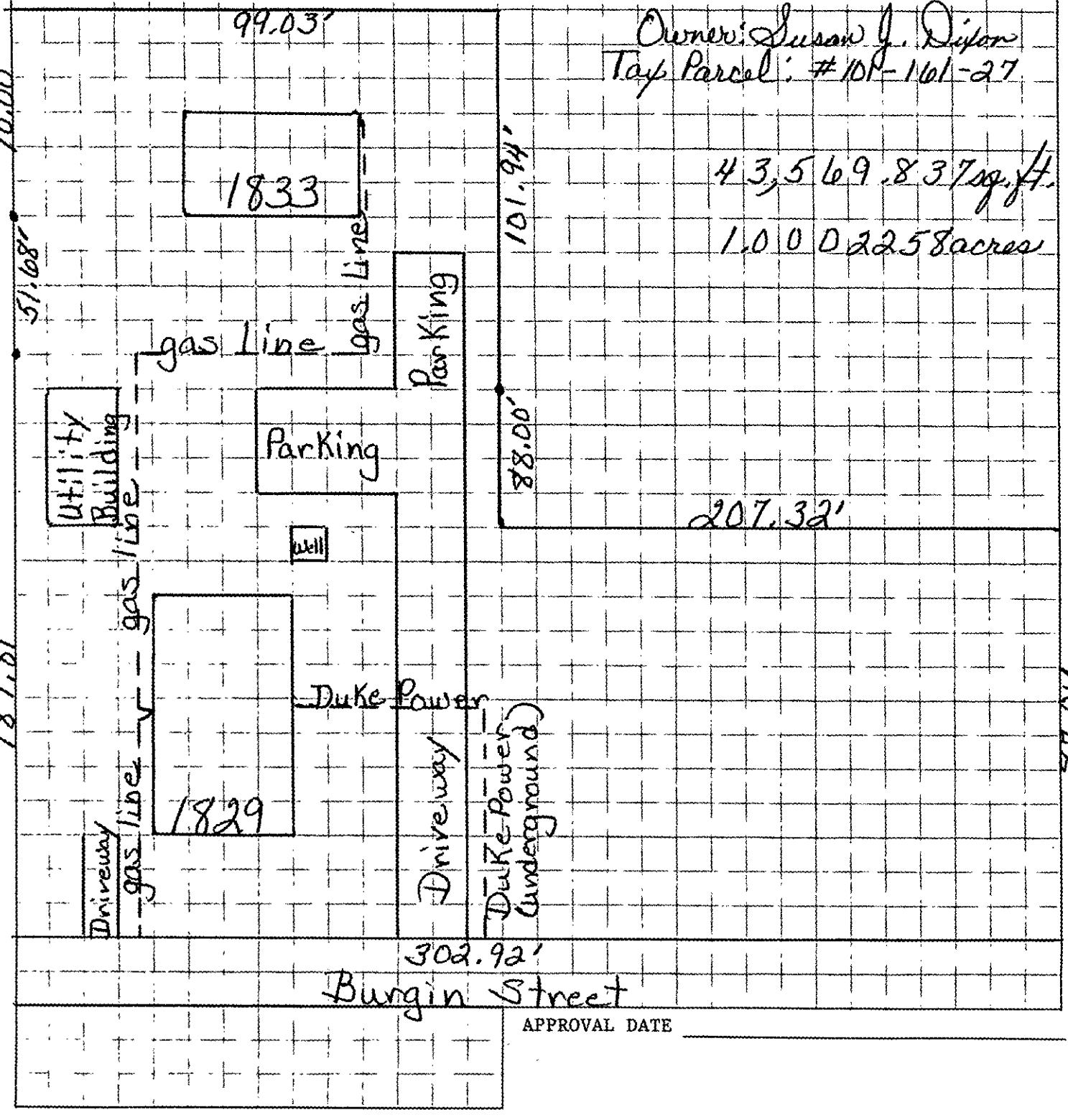
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