

3910 WADE E MORGAN RD

02701104

7/14/08

marliwr

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

7/11/85

No referral —

work — completed

Jon D. Bolen

7/11/95

Thanks

Welcome Home Ted

PH 150' 11" 347° 8/4/94 ES

14581 ~~3-2478~~

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

1 450' 1/27/94 ch#0274

☒ 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: Minnie Cavelock (last) (first) (mi)
ADDRESS: 3910 Wade E. Morgan Rd PHONE: (704) 568-1204
CITY: Charlotte STATE: NC ZIPCODE: 28269

Date:

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 027-011-04
STREET ADDRESS: 3910 Wade E. Morgan Rd.
ZONING:

PROPERTY OWNER:
NAME: Minnie Cavelock Sr. (last) (first) (mi)
ADDRESS: 3910 WADE E. MORGAN PHONE: (704) 568-1204
CITY: Charlotte STATE: N.C. ZIPCODE: 28269

SUBDIVISION OR MOBILE HOME PARK NAME:

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

LOT NUMBER: LOT SIZE (in acres):

TYPE APPLICATION (check one):
☐ SOIL TEST - INDIVIDUAL LOT (D)
☒ NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N) U X SM
☐ 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: 3 NUMBER OCCUPANTS: 6

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: X Minnie Cavelock Date: X 7-27-94

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

...use existing system for 2 bedroom house only. New house will replace existing house. If existing house remains as a storage bldg. Then all plumbing + fixtures must be removed from it. See letter in file dated 9-2-94. Statement

Environmentalist — 7-10-95 Date

Director or Authorized Section Head — 7-11-95 Date

WATER : 122791

New house (2 bedroom only) connected to existing septic system. Existing house converted into accessory building (non-residential) and shall not be used for residence or living purposes. 7-10-95

COPY

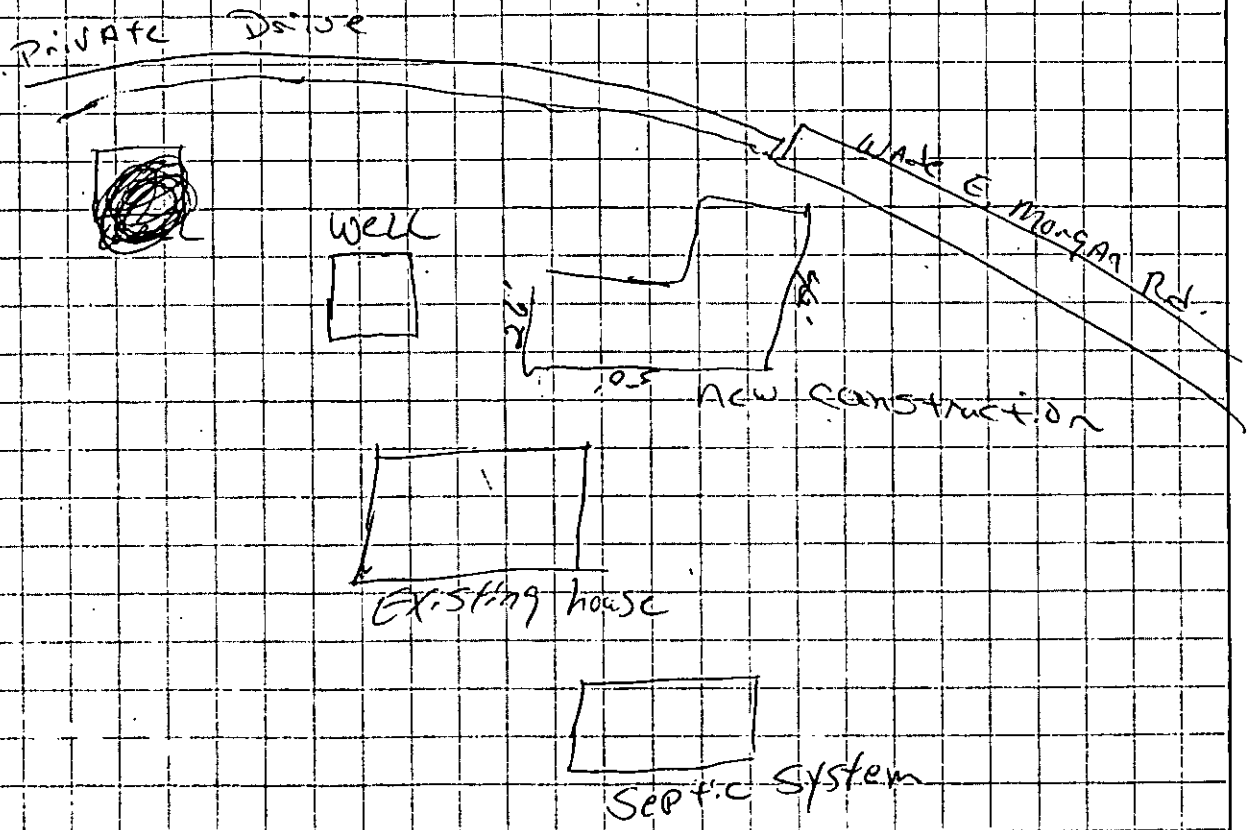
PROPOSED PLOT PLAN

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

FILE: 32498

TC: 07-011-04

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

8006 9709- 14581
16741 440 A 104 E

3/24/98

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

$1 450 1/27/94 Ck # 0274 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

COPY

Date:

PERSON FILING APPLICATION:
NAME: Minnie Cavelock (last) (first) (mi)
ADDRESS: 3910 Wade E. Morgan Rd PHONE: 704 598-1204
CITY: Charlotte STATE: NC ZIPCODE: 28269

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 127-011-04
STREET ADDRESS: 3910 Wade E. Morgan Rd.
ZONING:

PROPERTY OWNER:
NAME: Minnie Cavelock Sr. (last) (first) (mi)
ADDRESS: 3910 WADE E. MORGAN RD PHONE: 704 598-1204
CITY: CHARLOTTE STATE: N.C. ZIPCODE: 28269

SUBDIVISION OR MOBILE HOME PARK NAME:

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

LOT NUMBER: LOT SIZE (in acres):

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[] SOIL TEST - INDIVIDUAL LOT (D)
[X] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N) W X STK. NW
[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (M)
[] SOIL TEST DEVELOPMENT (P)
[] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
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[] 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: 3 KWS 9-7-94 NUMBER OCCUPANTS: 4 9-7-94
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: Minnie Cavelock Date: X 7-27-94

NOTICE:

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...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 : 1227

Mecklenburg County
Health Department

September 2, 1994

Mr. & Mrs. Carelock
3910 Wade E. Morgan Road
Charlotte, NC 28269

Re: 3910 Wade E. Morgan Road
File: 14581
Parcel: 027-011-04

Dear Mr. & Mrs. Carelock:

Receipt of the plans and specifications for an upgrade to the existing wastewater treatment and disposal system for the above property is hereby acknowledged. Your plans indicate that you propose to build a new 3 bedroom house on the property and remove the existing 2 bedroom house. Upon receipt of the information, a review was made of the material on file and a site evaluation was conducted. The plan was then reviewed in conjunction with provisions of 15A NCAC 18A .1900, "Laws and Rules for Sewage Treatment and Disposal Systems." Our comments are listed below:

1- The available area on this site is classified as Unsuitable according to the following rules (1) .1941 Soil Characteristics and (2) .1940 Topography and Landscape Position.

2- The records on file indicate that the existing septic tank system was designed and permitted to be used for a two bedroom house.

For these reasons, the plans as submitted to upgrade the septic tank system to accommodate a proposed three bedroom house are disapproved.

Please be aware that according to Rule .1948 (d) "A site classified as UNSUITABLE may be used for a ground absorption sewage treatment and disposal system specifically identified in Rules .1955,.1956, or .1957 of this Section or a system approved under Rule .1969 if written documentation, including engineering, hydrogeologic, geologic or soil studies, indicates to the local health department that the proposed system can be expected to function satisfactorily. Such sites shall be reclassified as PROVISIONALLY SUITABLE if the local health department determines that the substantiating data indicate that:

(1) a ground absorption system can be installed so that the effluent will be non-pathogenic, non-infectious, non-toxic, and non-hazardous;
(2) the effluent will not contaminate groundwater or surface water; and
(3) the effluent will not be exposed on the ground surface or be discharged to surface waters where it could come in contact with people, animals, or vectors.

The State shall review the substantiating data if requested by the local health department."

You also have the right to an informal review by the Department, the right to appeal under G.S. 130A-24, and to have the appeal held in the county in which the site for which the improvement permit was requested is located.

As we discussed at the site visit, you may use the existing system for one two-bedroom house. If you would like to change your proposed house plans so that it will be a two bedroom house and also change your application on file, then we can approve the use of your existing system. A condition of the approval would be that the existing house needs to either be removed or converted to a storage building which would require that all plumbing fixtures and running water be removed from the building. You may wish to consult with the Zoning Department and Building Standards concerning the use of the existing house as a storage building.

You may wish to contact the Division of Environmental Management concerning the distance between an existing well and a new building foundation. The phone number for that office is 663-1699. They should be able to answer any questions concerning water supplies.

If you have any questions concerning this matter, please contact me at 336-5569.

Sincerely,

Susan M. Bateman, R.S.
Individual Water and Wastewater Systems

SB:gf

DATE 9/7/94

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION Char

027-011-04
PARCEL NUMBER

3910 Wade E Morgan Rd
ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

N/A
PROJECT NAME (IF APPLICABLE)

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

1. SUBDIVISION REGULATIONS	**_____APPROVED**	**_____NOT APPROVED**
2. FLOODWAY REGULATIONS	**_____APPROVED**	**_____NOT APPROVED**
3. WATERSHED PROTECTION	**_____APPROVED**	**_____NOT APPROVED**
4. COMMERCIAL DRAINAGE PLAN	**_____APPROVED**	**_____NOT APPROVED**
5. PUBLIC UTILITY EASEMENT	**_____PRESENT**	**_____NOT PRESENT**
6. PROPERTY FRONTS ON THOROUGHFARE	**_____YES**	**_____NO**
7. DRIVEWAY PERMIT REQUIRED	**_____YES**	**_____NO**
8. DOES PROJECT CONFLICT WITH ROAD PROJECT?	**_____YES**	**_____NO**

REMARKS: new home / old home to be used as storage

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE WHEN PAYING PERMIT FEE. CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

ALL OTHER FORMS OBSOLETE

☐ NEW ADDRESS

SIGNED: JCN

REVISED 1/91

THIS IS TO CERTIFY THAT ON THE 8th DAY OF JANUARY 19 92 I SURVEYED THE PROPERTY SHOWN ON THIS PLAT. AND THAT THE TITLE LINES AND THE WALLS OF THE BUILDINGS IF ANY. ARE AS SHOWN HEREON.

#1	S 33-48-08 E	49.86
#2	S 06-30-00 E	40.43
#3	S 84-18-25 W	60.00

SIGNED _____ REGISTERED SURVEYOR

THIS PROPERTY DOES NOT LIE WITHIN ANY FLOOD PRONE HAZARD AREA.

NORTH CAROLINA REGISTERED SEAL L-2646 LAND SURVEYOR HUGH E. WHITE JR.

CONBRACO INDUSTRIES, INC.
(NOW OR FORMERLY)
DEED: 4785-736

PER DEED 5796 - 542

#1 OI

OI

S 34-22-11 W 211.53

FANNIE MORGAN (NOW OR FORMERLY) DEED: 5632-428

S 89-08-42 E 164.62

OI

1.275 AC.

FANNIE MORGAN (NOW OR FORMERLY) DEED: 5796-542

IRON

IRON

N 06-35-38 W 124.85

S 83-51-55 W 148.26

RICHARD THOMAS (NOW OR FORMERLY) DEED: 3111-259

CHAIN LINK FENCE

1-STORY FRAME POULTRY HOUSE (OLD)

30.0 20.1 1.8 6.0 22.0 12.4

43' x 43' x 5.8' WELL HOUSE

IRON

N 84-13-26 E 300.30

N 79-29-43 W 144.93

GRAVEL DRIVE

#2

OI IRON

#3

FANNIE MORGAN (NOW OR FORMERLY) DEED: 5593-995

SITE

MORGAN RD.

MALLARD CREEK RD.

CHESHIRE RD.

VICINITY MAP
(NO SCALE)

MORGAN RD.
S.R. # 2648
~UNPAVED~

IRON 100.54 IRON

N 06-40-04 W

ROBERT L. LEE (NOW OR FORMERLY) DEED: 2976-153

PHYSICAL SURVEY OF

A 1.275 AC. LOT AS SHOWN

CAROLINA SURVEYORS INC
P O BOX 267
PINEVILLE N C 28134

SCALE 1"=60' MALLARD CREEK TOWNSHIP, MECKLENBURG CO., N.C.

THE PROPERTY OF MINNER CARELOCK, JR. & WIFE GWENDOLYN R. CARELOCK

MAP RECORDED IN BOOK _____ AT PAGE _____ DEED RECORDED IN BOOK 1548 PAGE 081

DRAWN BY JG FIELD WORK _____ FIELD BOOK # 91-C

PROPOSED PLOT PLAN

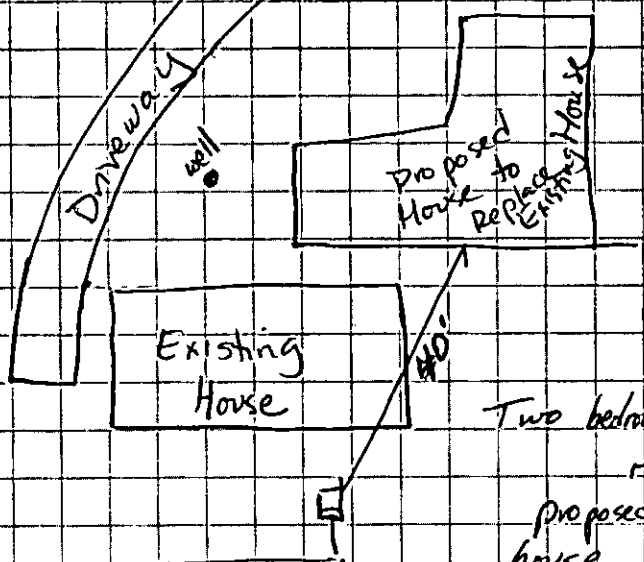
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 14581

TC: 027-011-04 PO

Wade E Morgan

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.



Two bedroom Only!

Two bedroom Existing house to be replaced with two bedroom proposed house as shown. Existing house may not have any plumbing left in it if structure is used as storage bldg once proposed house is done.

Recommend Separation distance of 25' between house and well. Set house foundation & plumbing to accomodate existing septic tank or you may be required to install new septic tank with lift station to pump to existing system. (This would require a permit from this dept.)

may wish to contact Dept of Env Management in reference to private wells 704-663-1699.

property owner sign / date

Kurt N. Stark
Agent - Jim Walter Homes

APPROVAL DATE 8-8-94

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

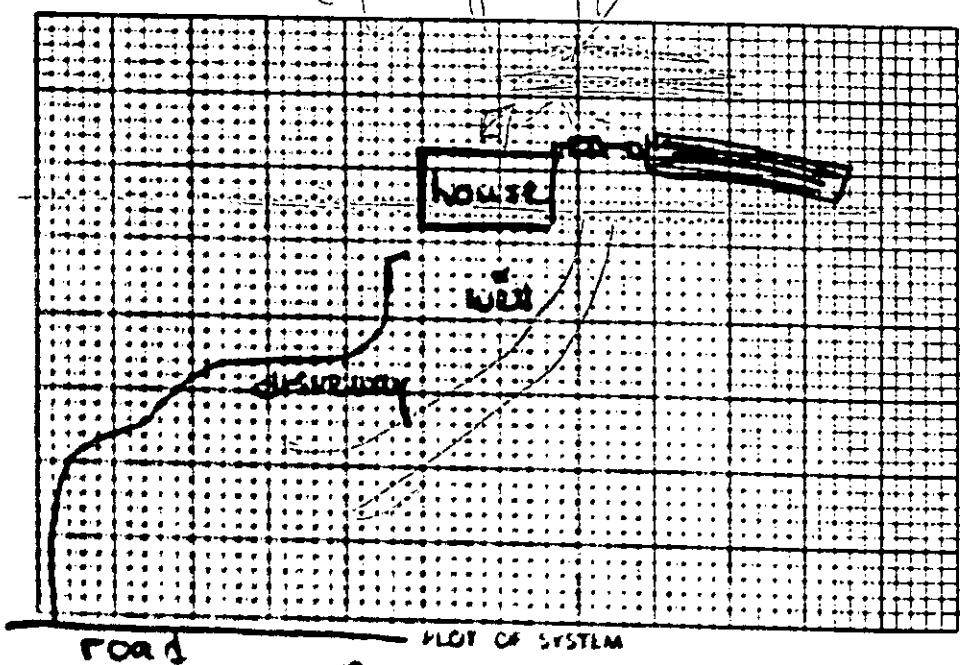
Date Issued 7-14-80 Serial No. 4078 ICARIS Permit No 1458

P.O. T.C No 027-011-04

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

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 application 14581 dated 9-28-78 and this permit shall be void and of no effect if the information provided in the application is not true or is erroneous. All work shall be completed on or before 8-14-80, after which date this permit shall be null and void.



Permeability Rate Unsuitable

Liquid Capacity of Tank 1000 gallons

Tank Construction precast concrete

Absorption and/or Nitrification Lines:

Total Line Length 330'

Number of Lines 5

Distance from House 10'

Distance from Property Line 10'

Distance from Well >50'

NAME OF OWNER Morgan, Fannie W.

LOCATION OF PROPERTY 3916 Wade E. Morgan Road

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Health Commission which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Environmental Health Director before any system can be covered up or otherwise rendered uninspectable or can be used. 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.

Comments: 15' wide x 66' long x 17" of stone

Division or Section Head

Mike Sexton
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.

EHD 5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 9-28-78

ICAR (S) Application No. [illegible]

T. C. No. [illegible]

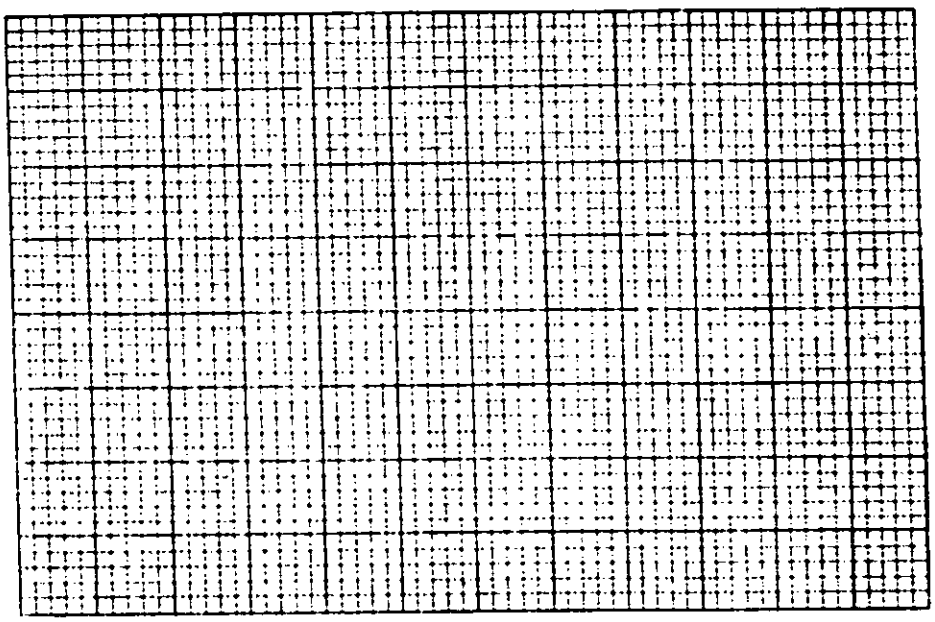
Map Data [illegible]

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

Application for an
Installation, Construction, Alteration, and/or Repair Permit
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge

The owner of that property described hereinafter hereby applies to the Mecklenburg County Department of Environmental Health for a permit to: moved house several hundred feet from original location

1) ✓ Install or Construct 2) ___ Alter or Repair an individual septic tank wastewater treatment system with a subsurface, soil absorption, effluent discharge.



3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ___ Yes ___ No
Residence ✓ Yes ___ No

4) No. of Bedrooms 2
5) Business Use — Max. No. Employees ___
6) Washing Machine ___ Yes ✓ No
7) Garbage Disposal ___ Yes ✓ No
8) Dishwasher ___ Yes ✓ No
9) Water Supply:
A) Individual Well NA
B) Governmental System ___
C) Community System
1. Well source ___
2. Governmental source ___
10) Sewage System
House located within 200 feet of public sewer ___ Yes ___ No
House located within 200 feet of community sewer ___ Yes ___ No
11) FHA Case No ___
12) VA Case No ___

13) NAME OF OWNER MORGAN (LAST) FANNIE (FIRST) W. (MIDDLE)

14) ADDRESS OF OWNER 3916 WADE E. MORGAN RD. CHARLOTTE, 28213

15) PHONE NO. Home 596-9483 Office ___

16) LOCATION OF SYSTEM 3916 WADE E. MORGAN RD. CHARLOTTE, 28213 (STREET OR COUNTY ROAD)

17) SUBDIVISION MALLARD CREEK Lot No. ___ Block No. ___

Map Book No. ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? ___ YES ✓ NO DATE RUN

20) PTR NUMBER (See Instructions) ___

The undersigned person hereby agrees that he has read the foregoing applications and that the contents of same are true. It is understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

9-28-78
DATE OF APPLICATION

Fannie W. Morgan by Ricky Morgan
OWNER SON

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203

SITE INVESTIGATION REPORT
INDIVIDUAL SEPTIC TANK SYSTEM
WITH SUBSURFACE,
SOIL ABSORPTION,
EFFLUENT DISCHARGE

SIR. NO. 14581
T. C. No P.0.027-011-04
MAP DATE
DATE 10-13-78

NAME OF OWNER Morgan, Fannie W.

ADDRESS OF OWNER 3916 Wade E. Morgan Road, Charlotte, NC 28213

LOCATION OF LOT 3916 Wade E. Morgan Road

At your request and pursuant to Section .1900 of the North Carolina Administrative Code, Title 10, Department of Human Resources, Chapter 10, Health Services, Subchapter 10A, a site evaluation has been made for an on premises ground absorption sewage disposal system on the property designated above and the following conditions were found:

Soil Structure Massive.
Soil Permeability Unsuitable.

Section 10 fo the North Carolina Administrative Code 10A, .1910 of these regulations states "Sites originally classified as unsuitable may be used for soil absorption disposal systems, provided engineering, hydrogeologic, and soils studies indicate to the local agency that a suitable alternate system can reasonably be expected to function satisfactorily.

Section 10, North Carolina Administrative Code 10A, .1916 states that "The design, construction, and maintenance of ground absorption sewage systems, whether septic tank systems or alternate systems shall be the responsibility of the owner, developer, installer, and user of the system as applicable in the circumstances".

We would also advise you that according to Regulation 10, North Carolina Administrative Code 10A, .1916(b), "Actions of representatives of state or local agencies engaged in the evaluation and determination of measures required to effect compliance with the provisions of this section shall in no way be taken as a guarantee that sewage disposal systems approved and permitted will function in a satisfactory manner for any given period of time or that such employees assume any liability for damages, consequential or direct, which are caused or which may be caused, by a malfunction of such system.

These regulations became effective July 1, 1977. Since that time the second sentence of Section .1910(c) has been found to be nugatory. For this reason, if you desire to file for permission to install an "alternate" system you should present this office with your proposals in the form of plans and specifications. These would be reviewed and if it is found that the system may reasonably be expected to function satisfactorily approval may be given on the execution by you of a "Septic Tank Agreement Form" available in this office.

EHD #584

John R. Adkisson, Environmentalist
On Premises Waste Disposal Section

Date Issued 8-5-80 Serial 3916 P.O. of A (s) No. 14581 T. C. No. 027-C11-0-4

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL HEALTH DIVISION

Certificate of Completion
CERTIFICATE OF APPROVAL
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner Morgan (LAST), Fannie (FIRST) W. (MIDDLE)

Location of Property 3916 Wade E. Morgan Road

Application Number 14581 Permit Number 14581

Inspection Date:

Liquid Capacity of Tank 1000 gallons Tank Material precast concrete

Total Length of Drain Tile 330' Number of Lines 5

Depth of Filter Material 17" Cover Depth >15"

Water Supply Source well Distance from Water Source >50'

Excavation Inspected — Tank Inspected 8-5-80 (DATE)

Nitrification Field Inspected 8-5-80 (DATE)

Washing Machine Line Inspected, If Applicable — (DATE)

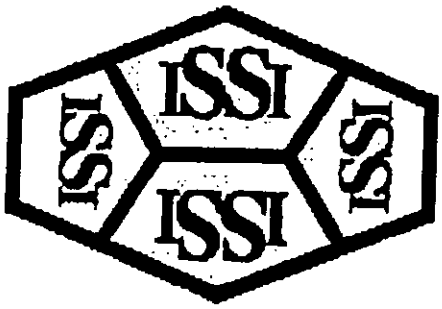
The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been ✓ installed or constructed, _____ altered or repaired in accordance with the permit issued and the regulations of the Mecklenburg County Health Commission in effect on the date of issuance of the permit. The issuance of this Certificate of Approval 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 Certificate of Approval is issued subject to those restrictions and conditions shown on the permit(s) in addition to those listed below under comments. This Certificate of Approval 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 poor soil modified system agreement card on file

Mike Sexton
Environmentalist

EHD-5-76

Environmental Health Department's Copy



Imaging Solutions and Services, Inc

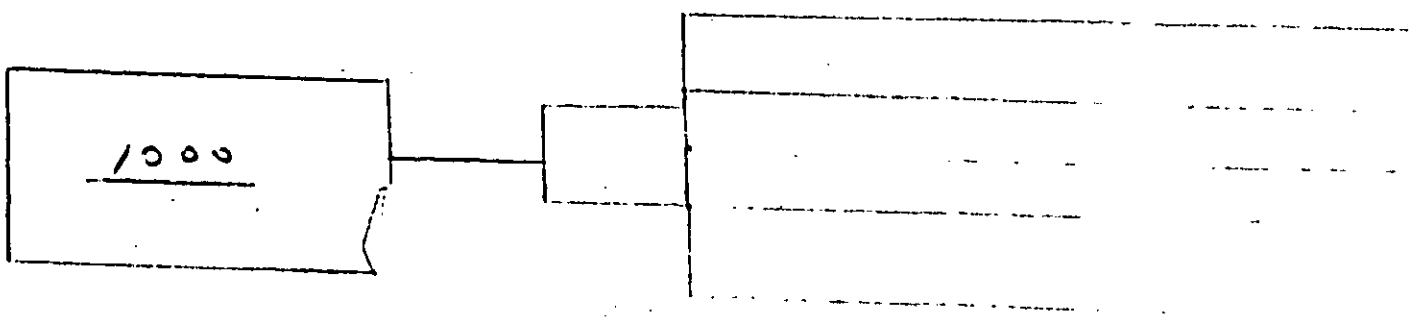
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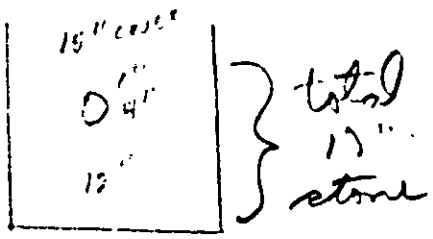
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ISSI Operations Center Staff

#14504





Submitted for approval

Fannie W. Morgan

1000 GALLON TANK

330 1/4.

192

5 Lines 66 ft.

99 sq. ft.

batter. case

OF NORTH CAROLINA
/ OF MECKLENBURG

SEPTIC TANK AGREEMENT 14581

COPY

The undersigned, Fannie W. Morgan, owner of property located at Wade E. Morgan Road, (Parcel #: P.O.027-011-04), ("the site") and described strument recorded in Book 1548 at Page 81, Mecklenburg Public Registry, y acknowledges that he applied to the Department of Environmental Health for a permit to in- a septic tank sewage disposal system on the site; the Department evaluated the site for bility for such a system in accord with the regulations promulgated by the North Carolina ssion for Health Services as 10 NCAC 10A .1900 et seq; that the Department classified the as Unsuitable and an appropriate permit was issued by the tment.

The undersigned further acknowledges that the proper design, construction and maintenance of septic tank system is his responsibility and that neither the Department nor its officials, oyees, or agents warrant or guarantee that the said system installed pursuant to the permit ed by the Department will function in a satisfactory manner for any given period of time, or the Department, its officials, employees or agents assume any liability for damages, con- ential or direct, which are caused, or which may be caused, by a malfunction of such system.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg ty and indexed therein under the Grantor Index in the name or names of the undersigned, and foregoing acknowledgements shall henceforth be binding on all persons claiming any right, e, or interest in the site.

And the undersigned further agrees for himself, his heirs and assigns, that he shall idemnify hold harmless the Department and its successors, as well as Mecklenburg County, for any dam- or other claims of any person or persons whatsoever arising out of the installation, oper- n, or failure, of said septic tank system.

And the undersigned further agrees for his heirs and assigns that, in the event any septic system installed under authority of the aforesaid permit fails to perform adequately, in respect, he will take whatever measures are required to correct same; or if such is impossible will discontinue use of said system immediately.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural feminine forms as the context may require.

This 16th day of Oct, 1978

Fannie W. Morgan (Seal)

(Seal)

TE OF NORTH CAROLINA,
NTY OF MECKLENBURG

I, Pam M. Compton, a Notary Public for said County and State, hereby certify that Fannie W. Morgan, personally appeared before this date and acknowledged the due execution of the foregoing instrument.
WITNESS my hand and notarial seal, this 16th day of Oct, 1978.

Pam M. Compton
Notary Public
My Commission Expires: 5/16/79

PRESENTED FOR REGISTRATION
OCT 16 1978
AT 11:42 A.M.
MECKLENBURG COUNTY, N. C.
REGISTER OF DEEDS

ATE OF NORTH CAROLINA,
UNTY OF MECKLENBURG

I, _____, a Notary Public for said County and State, hereby certify that _____ personally came before me this day and acknowledged that he is _____, and that by authority duly given and the act and deed of said corporation, the foregoing instrument was signed in its name by its _____, sealed with its corporate seal and attested by _____ as its _____.

WITNESS my hand and notarial seal, this _____ day of _____, 19 ___.

Notary Public

My Commission Expires _____

LA No. 14581

Serial No. 2342

T. C. No. E.O.027-011-04

Date Issued October 16, 1978

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

IMPROVEMENT PERMIT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Morgan (LAST) Fannie (FIRST) W. (MIDDLE)

ADDRESS OF OWNER 3916 Wade E. Morgan Road, Charlotte, NC ZIP 28213

LOCATION OF LOT 3916 Wade E. Morgan Road (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO._____ BLOCK NO._____

MAP BOOK NO._____ PAGE NO._____

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, on an on-site inspection of the said lot; and upon the information supplied in the "Application for an Installation, Construction, Alteration, and/or Repair Permit", number 14581. This approval is subject to the following terms and conditions:

Agreement Forms signed and presented for recording on October 16, 1978

1. That the nitrification field be installed, constructed, altered and/or repaired in the same area where the soil investigation was run.

2. That an "Installation, Construction, Alteration, and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altred, and/or repaired and that the system be installed in accordance with same.

This approval may be revoked and the building inspection department requested to revoke any building permit(s) which have been issued to authorize construction on the said lot if at any time it is determined that any information contained in the "Application for an Installation, Construction, Alteration, and/or Repair Permit" is not correct or is untrue or that the septic-tank system is not being installed, constructed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit.

John R Atkisson

Environmentalist

Environmental Health Director or Authorized Section Head

EHD-5-76

Apl. 17551

NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX H
SITE EVALUATION

(Ground Absorption Sewage Disposal)

OWNER: Jannie W. Morgan
ADDRESS: 3916 Wade E Morgan Rd.
COUNTY:
LOCATION OF SITE: Wade E Morgan Rd.

DATE REQUESTED: 9-28-78
PLAT NO.: P.O. 027-011-04
LOT SIZE: 20,000 SQ FT.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS U 2-6%	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S (PS) Saprolite	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S (PS) Massive	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	S (PS) ≤ 36"	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Imprevious Strata, Rock)	S PS U —	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) PS U ≥ 4' to water	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) Slow U	S PS U	S PS U	S PS U
8. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	Unsuitable			
SOIL SERIES				

S - Suitable PS - Provisionally Suitable U - Unsuitable

* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

Recommendations/Comments: Area around house checked as requested by owner.

Described By: Eddie Reynolds

Title: Environmental Sanit Date: Oct. 13 1978

DHS Form 2601 (2/77)
Sanitation

9709

40'

4'= 1"

10"

PG. 02

1
10 AC.
394.3
330.66
348.91
321.41
761.88
760.5
699.01
291.08

2
36.94AC

819.27
FLOOD PLAIN

11

27
16.6 AC

19
177.12
250.99
1.453 AC.

26
290.96
1.001 AC.
251.06

3
187.38
353.51

WADE E. MORGAN ROAD

422.39
2.9AC.±
12
371.27

1.64AC
7
174
#2648

13
170

14
181.41

23
184.59

24
209.77

16
148.41

18
186.37

578.07
577.87
LINE

41
7.217AC

693.57

743.28
325
460
177.34

7.69AC.±
40

BLOCK
396.87
170
5.472 AC.
542.97
177 AC.
38
296.84

39

HUBBARD
300±
258.50

516.81
87.63
145.57
4.061AC
42
436.55
287.05
1.166 AC
131
225.63
415.43
2.91

1.099AC
30
148.57
128.59
250
250

22
100
28
100
20
200
435.34

25
18.6287AC

3.041AC
29
380.1
4.121
470.8

538.2
505AC.
32
1209.7

4.32 AC.
43
395.19
454.67
561.47
1.99 AC.
37
135.62
202.22
180.28

22.994 AC.
33
311.03
339.49±
1302.08± TOTAL

36
153.42
180.28

24.38
522.13±

HEDGECREST PL.
HAYBRIDGE RD.

BK. 43

PG. 13

PG. 50

1089.73

1.325 AC.
384.93
365.43
44
246.61

1.029 AC.
19
304.32
88.02
200
100
200
100
200
128.59

773.82±

MASON DR
#2495
367.02±

329.45±
82±
17
384±
147.03
147.10
403.36

16
3.09AC.±

24
135±
200.23±
199.53±
15
100
40
12
119
192

14
110
192
13
110
119
1200±

11
5 AC.
384±
367.64±

6.3 AC.
10
890.32

3.56 AC.
9
777±

1.88 AC.
8
711.91±

1.55AC
7
644.84

1.4 AC
6
581.67±

3 AC.±
5
410.54
416.87
2.09AC.±
4
510±

#2467
384±
176.44
1005
1005
176.44

552.77
260.61
5±
18±
769.57
5.44 AC.±P.

13
26

518.78
111.21
573.92
623.2
3.07AC.±
18
326.7
233.64
1.48AC.±
23
239.66
241.06
224.24
110±

577.6
592.37
4.49AC.±
46
375.81±
150±
400.91
12
320±
138±
103.48
320±
138±
200±

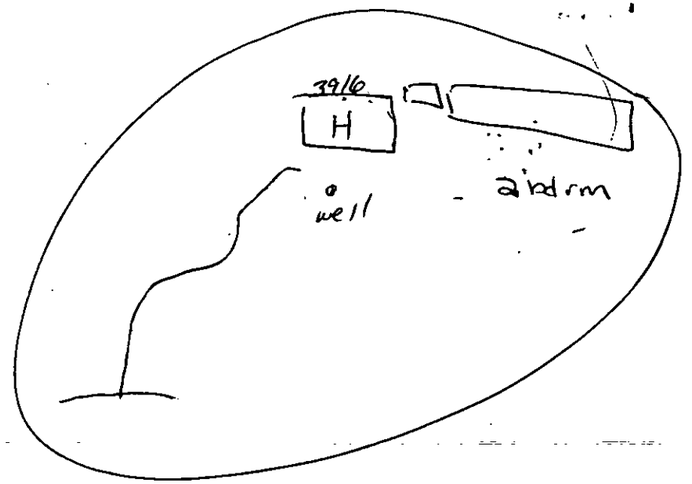
330±
MALLARD CREEK RD.
PENNINGER CIR.
#2650

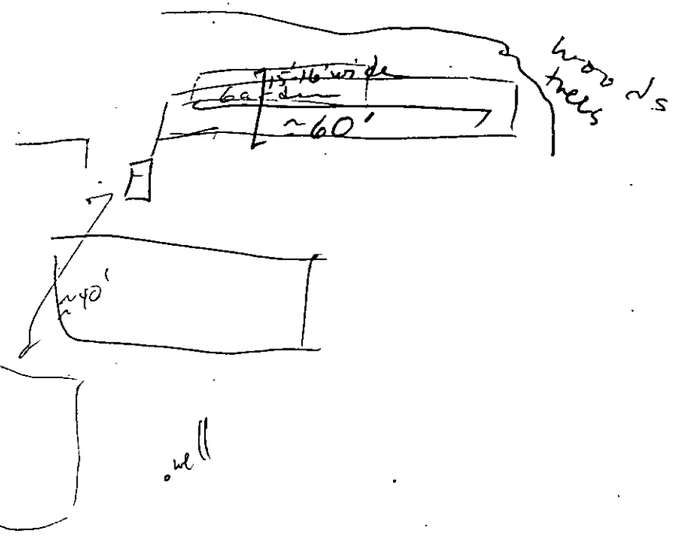
BISANER ST.

BK. 47

TAX LINE MAP BOOK 27 PAGE 01
MECKLENBURG COUNTY, NORTH CAROLINA
REVISED 9-21-93 | SCALE 1"= 400'

Black 241-66 N RAVEN 7891O-24166
MADE IN MEXICO





15
60
900

8/4/94

Sue

Mr Cueloch came in & paid the additional fee to upgrade the system @ 3910 Wade Ct. Mayfield for a 3 bdrm house. Old # File # (3249B) File 14581

File will be under 14581

or

Bill + I evaluated site - cannot upgrade