

3432 BACK CREEK CHURCH RD

10504104

9/5/08

marliwr

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

400 ☐

File 21641

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

Pd #200 5/26/94 Ck # 1837 ☒ 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: Lambert (last) Howard (first) H (mi)
ADDRESS: 3506 Back Creek Ch. Rd PHONE: (704) 596-2568
CITY: Charlotte STATE: N.C. ZIPCODE: 28213

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 105-041-04-P0
STREET ADDRESS: 3432 Back Creek Church Road
ZONING:

PROPERTY OWNER:
NAME: Lambert (last) Howard (first) H (mi)
ADDRESS: 3506 Back Creek Ch Rd PHONE: (704) 596-2568
CITY: Charlotte STATE: NC. ZIPCODE: 28213

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)
☐ 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: 2
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: L. H. Gladden Date: 8-8-94

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

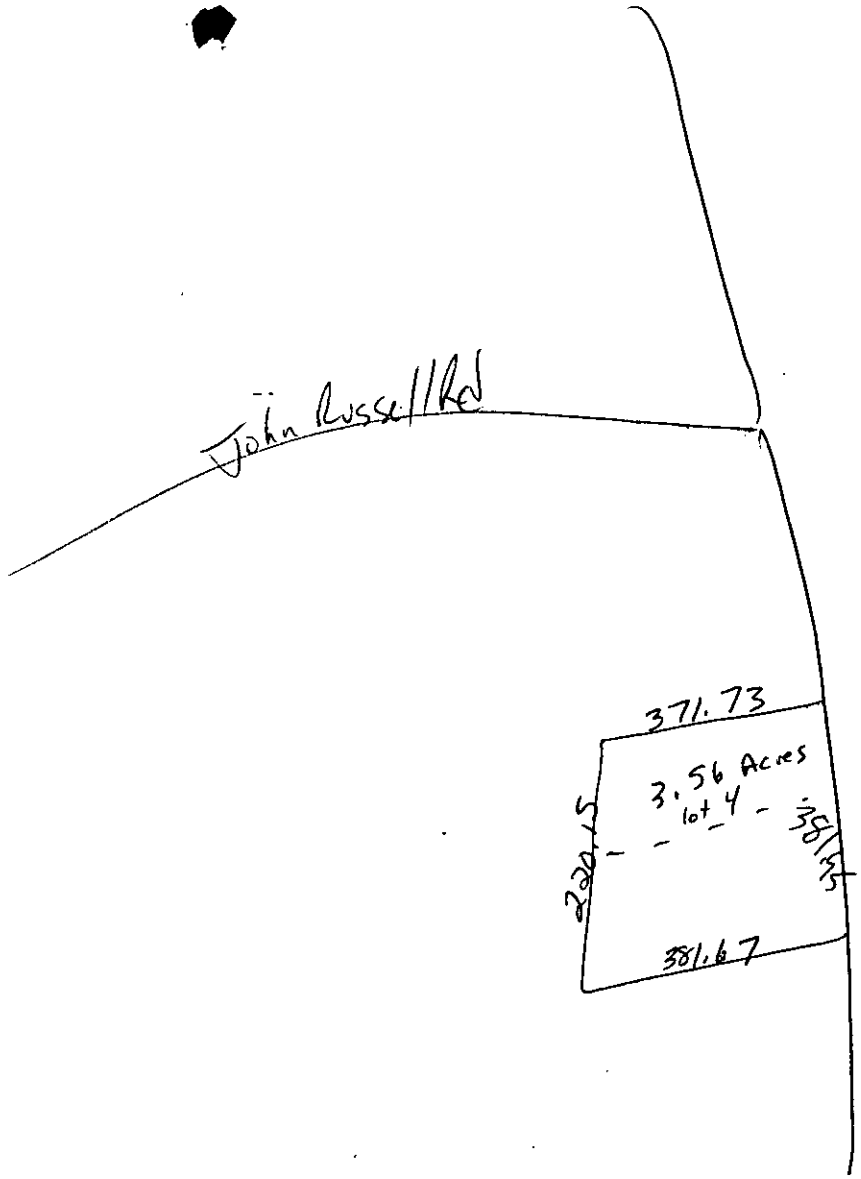
Environmentalist Date

Director or Authorized Section Head Date

WATER : 122791

6-8 site visit need to have Soil Scientist look at lot + review old soil report left message w/ J. Gladden, builder, that I visited working on lot. 597-5423 Jr Gladden 6-29-94 Gave me his telephone

6-22 letter drawn up + sent


John Russell Rd
371.73
3.56 Acres
lot 4
330.45
381.67

Mecklenburg County
Health Department

Septic OK
Electrical
11/6/95

December 19, 1994

COPY

Mr. Howard Lambert
3506 Back Creek Church Road
Charlotte, North Carolina 28213

Dear Mr. Lambert:

Re: 3432 Back Creek Church Road
File: 21641 (Tax Parcel No. 105-041-04PO)

At your request an inspection was made at the above referenced property to facilitate the issuance of an Operation Permit for the sewage treatment and disposal system. During the inspection it was found that the following items did not meet the regulations set forth in the "Laws and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A .1900;.1952 Septic Tank, Dosing, Dosing Tank and Lift Station Design." Our comments follow:

1) (6) Pump and control circuits shall be provided with manual circuit disconnects within a watertight, corrosion-resistant, outside enclosure (NEMA 4X or equivalent) adjacent to the pump tank, securely mounted at least 12 inches above the finished grade. The pump(s) shall be manually operable without requiring the use of special tools or entrance into the tank for testing purposes. Conductors shall be conveyed to the disconnect enclosure through water proof, gasproof, and corrosion-resistant conduits, with no splices or junction boxes provided inside the tank. Wire grips, duct seal, or other suitable material shall be used to seal around wire and wire conduit openings inside the pump tank and disconnect enclosure.

2) (9) The pump tank shall have a properly functioning high-water alarm. The alarm circuit shall be supplied ahead of any pump overload and short circuit protective devices. The alarm shall be audible and visible by system users and weatherproof if installed outdoors in an enclosure (NEMA 4X or equivalent).

The above mentioned items must be installed and inspected prior to the Operation Permit being issued. The Operation Permit is required for the Certificate of Occupancy and the permanent electric hook-ups. Please schedule the inspections at least five (5) working days in advance to ensure no delays in the Operation Permit issuance.

Please call me at 336-5570 to discuss any question you may have concerning this matter.

Sincerely

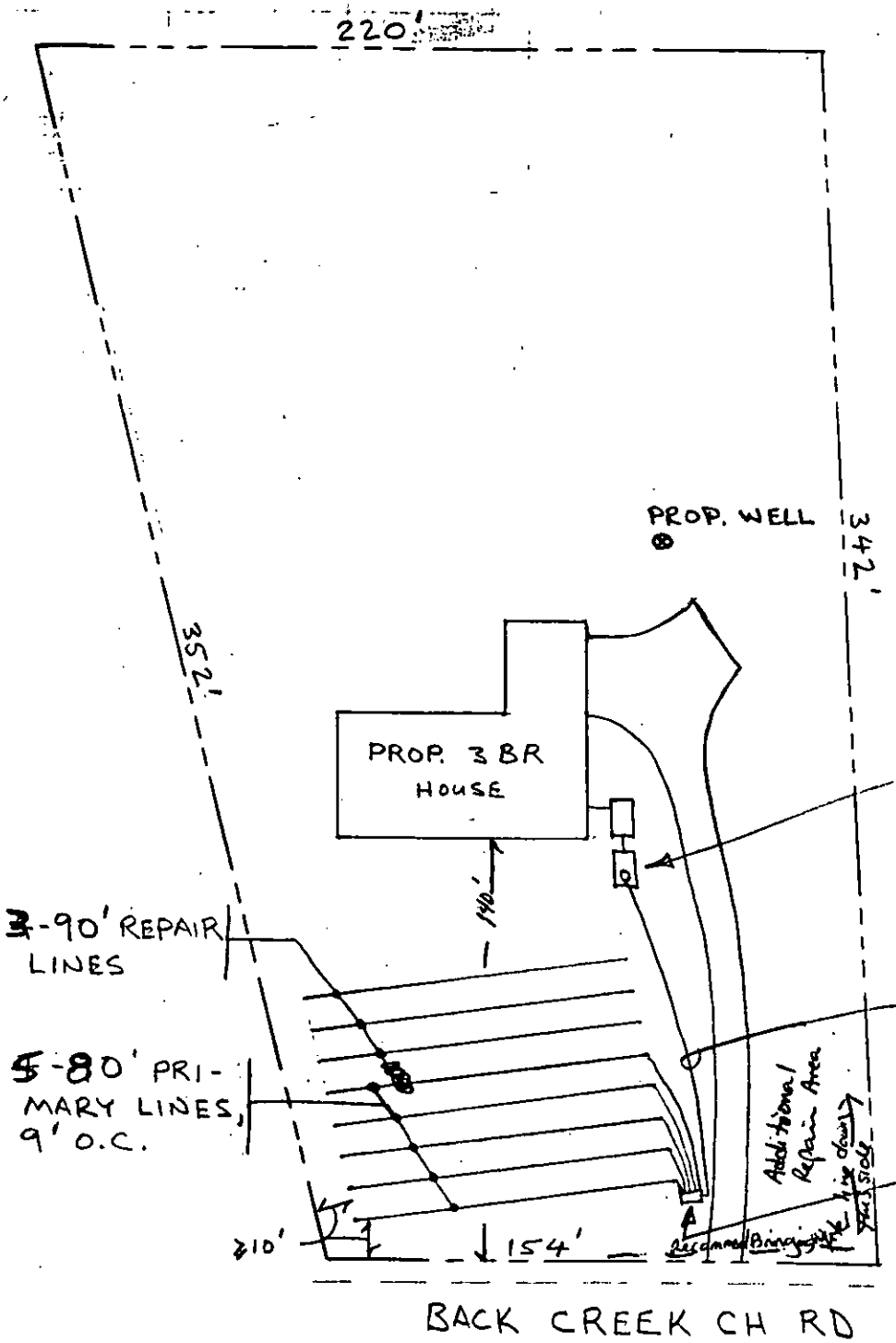
Philo S. Walker R.S.

Philo S. Walker, R.S.
Individual Water and Wastewater Systems

Environmental Health Division
700 North Tryon Street • Suite 211 • Charlotte, North Carolina 28202-2236

FILE: 216841

TC: P0105 041 04



1500 g septic tank
1000 g pump tank
1200 sq ft drainfield
See Rule .1945(C) - concerning repair area -
See survey of property dated 4-16-79.
See reclassification form on file.
Water line must stay min. 10' from any part of septic tank system and its repair a.
Keep min 50', preferably 100' min, from any well with septic tank system
Keep min 10' from any property line and out of any right-of-way.

Pump, pump controls & alarm to be installed according to current NC State Regulation

property owner sign + date

SITE PLAN

1" = 50'

Driveway cut in at time of review of submitted plan.

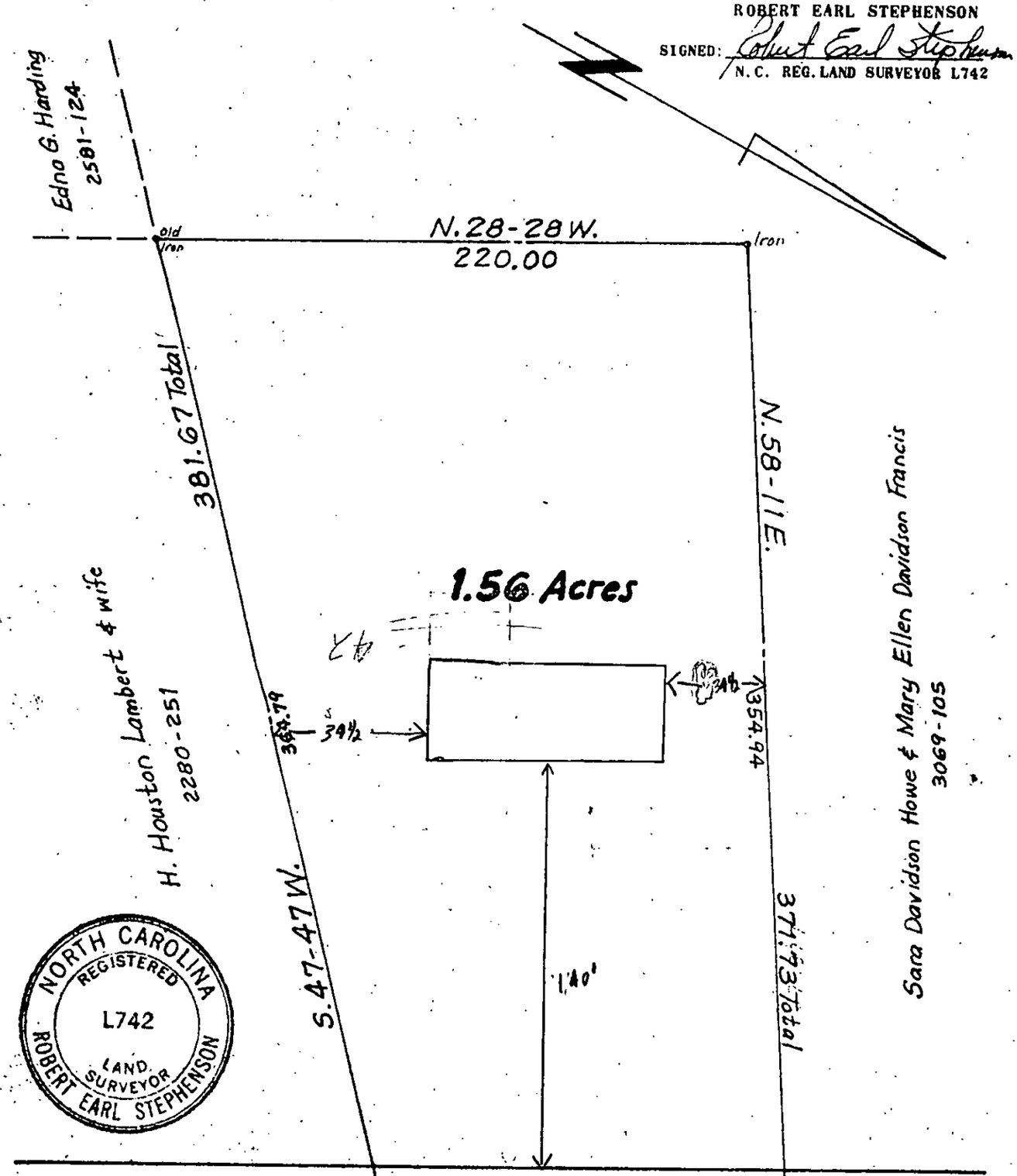
File 21641

THIS IS TO CERTIFY THAT ON THE 16th DAY OF April 1979. I SURVEYED THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE PROPERTY LINES, WALLS, AND BUILDINGS ARE AS SHOWN HEREON: THAT THE BUILDINGS LOCATED ON SAID LOT DO NOT ENCROACH OR PROJECT ON ADJACENT STREETS OR PROPERTY: AND THAT NO ADJACENT BUILDINGS OR WALLS ENCROACH OR PROJECT ON SAID PREMISES.

ROBERT EARL STEPHENSON

SIGNED: Robert Earl Stephenson

N.C. REG. LAND SURVEYOR L742



PHYSICAL SURVEY

OF

1.56 Acre Tract, Crab Orchard Twnsp., Mecklenburg Co., N.C.

Near CHARLOTTE, MECKLENBURG COUNTY, NORTH CAROLINA

PROPERTY OF

Howard Houston Lambert & wife, Shirley C. Lambert

SCALE: 1" = 50'

DEED BOOK: _____ PAGE: _____ MAP BOOK: _____ PAGE: _____

CERTIFICATE OF COMPLETION/OPERATION PERMIT ok D.400

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 21641 DATE: 11/6/95

TC: 105 041 04 PO ☐ L ☒ CRT

SERIAL Nº 16424

Name of Owner Howard Lambert Juris.: _____

Address of Property 3432 Back Creek Church Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400'

Number of Lines 5 @ 80'

Cover Depth 8" - 12"

Water Supply Source well

Distance to Water Source >50'

Excavation Inspected 12/23/94

Tank(s) Inspected 12/23/95

Wash Line Inspected –

High Water Alarm Inspected 11/6/95

PLOT

Design 1995, 1500ST, 1000DT, PL, 1200SFT, 12" stone cecil CTR# 117 B. McCann
(low pressure manifold)

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 I5A NCAC 18A. 1900, "Laws And Rules For Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. This 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 I5A NCAC 18A. 1990 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.

Notice: Disturbance of the designated repair area may result in the suspension/revocation of this permit.

COMMENTS: septic system designed for 3 bedroom residence

Type III

Philo L. Walker R.S.
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 21641 (1400) DATE: 12/12/94

TC: 105041/04P0 ☐ L

SERIAL Nº 16019

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 8/8/94. All work shall be completed on or before _____, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A. 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.

septic system to be installed in accordance with approved plot plan.

PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank 1000 gallons

Tank Construction PCC

Trench Depth ≤ 3'

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous ✓

Total Line Length 400 feet

Number of Lines 5 (80')

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well ≥ 50' feet

NOTICE: This system shall not be installed while soils are in a wet condition.

NAME OF OWNER Howard Lambert

LOCATION OF PROPERTY 3432 Back Creek Church Rd

Comments: Pressure manifold system, 5 lines x 80'long x 3'wd x 12"Stone
Keep septic system > 50' from any wells, Septic system to be installed in accordance with approved plot plan.

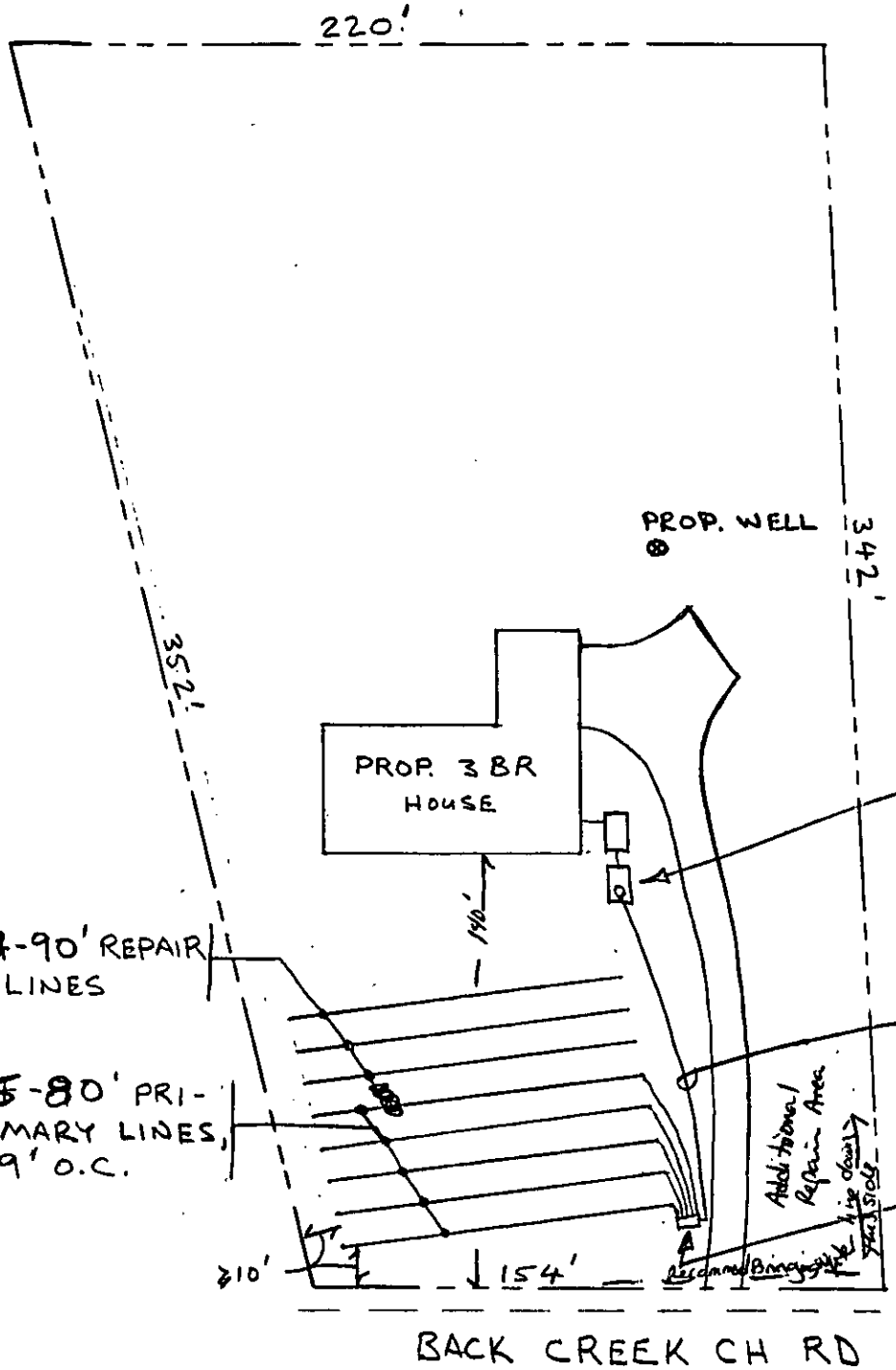
J Newell for S Davis

Phil S. Walker R.S.
Environmental Health Specialist

WHITE - HEALTH DEPARTMENT's COPY • CANARY - E.H.S. COPY • PINK - OWNER OR AGENT's COPY

FILE: 216&41

TC: P0105 041 04



1500 g septic tank
1000 g pump tank
1200 sq ft drainfield
See Rule .1945(C) - concerning repair area -
See survey of property dated 4-16-94.
See reclassification form on file.
Water line must stay min. 10' from any part of septic tank system and its repair area
Keep min 60', preferably 100' min, from any well with septic tank system.
Keep min 10' from any property line and out of any right-of-way.

Pump, pump controls & alarm to be installed according to current NC State Regulations

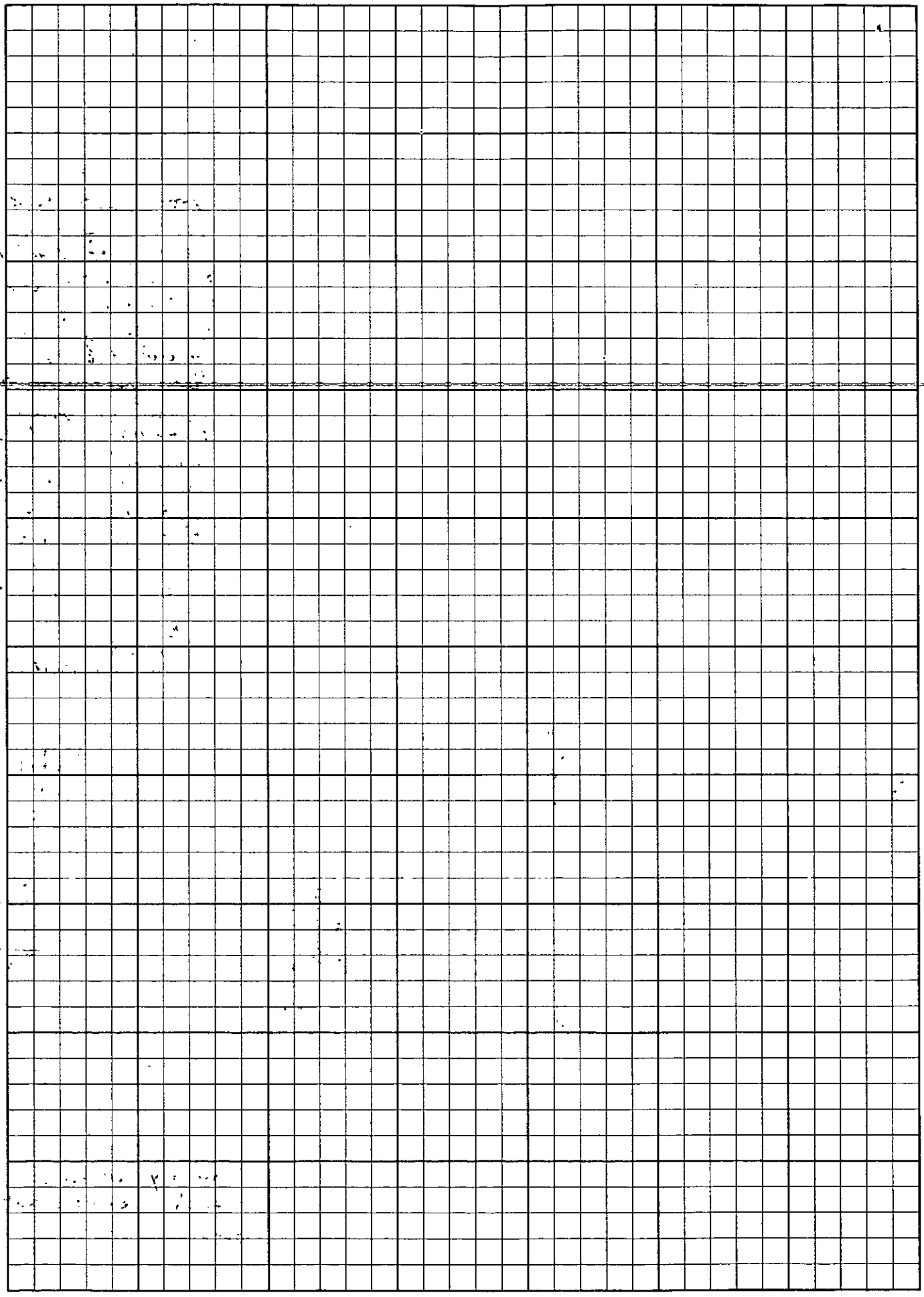
8-8-94 L.H. Hall
property owner sign & date

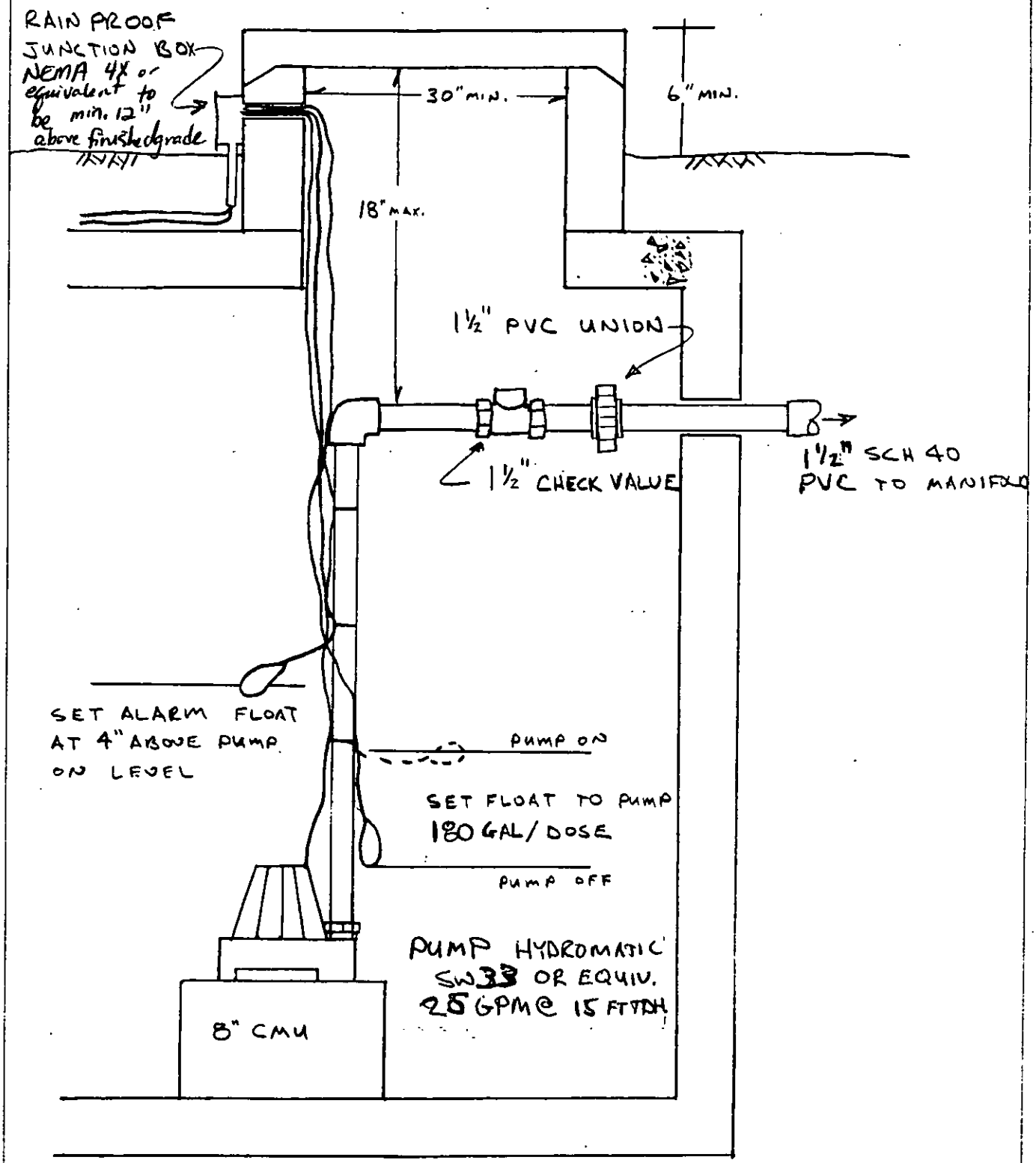
Driveway cut in at time of review of submitted plan.

Bateman
8-1-94

SITE PLAN

1" = 50'

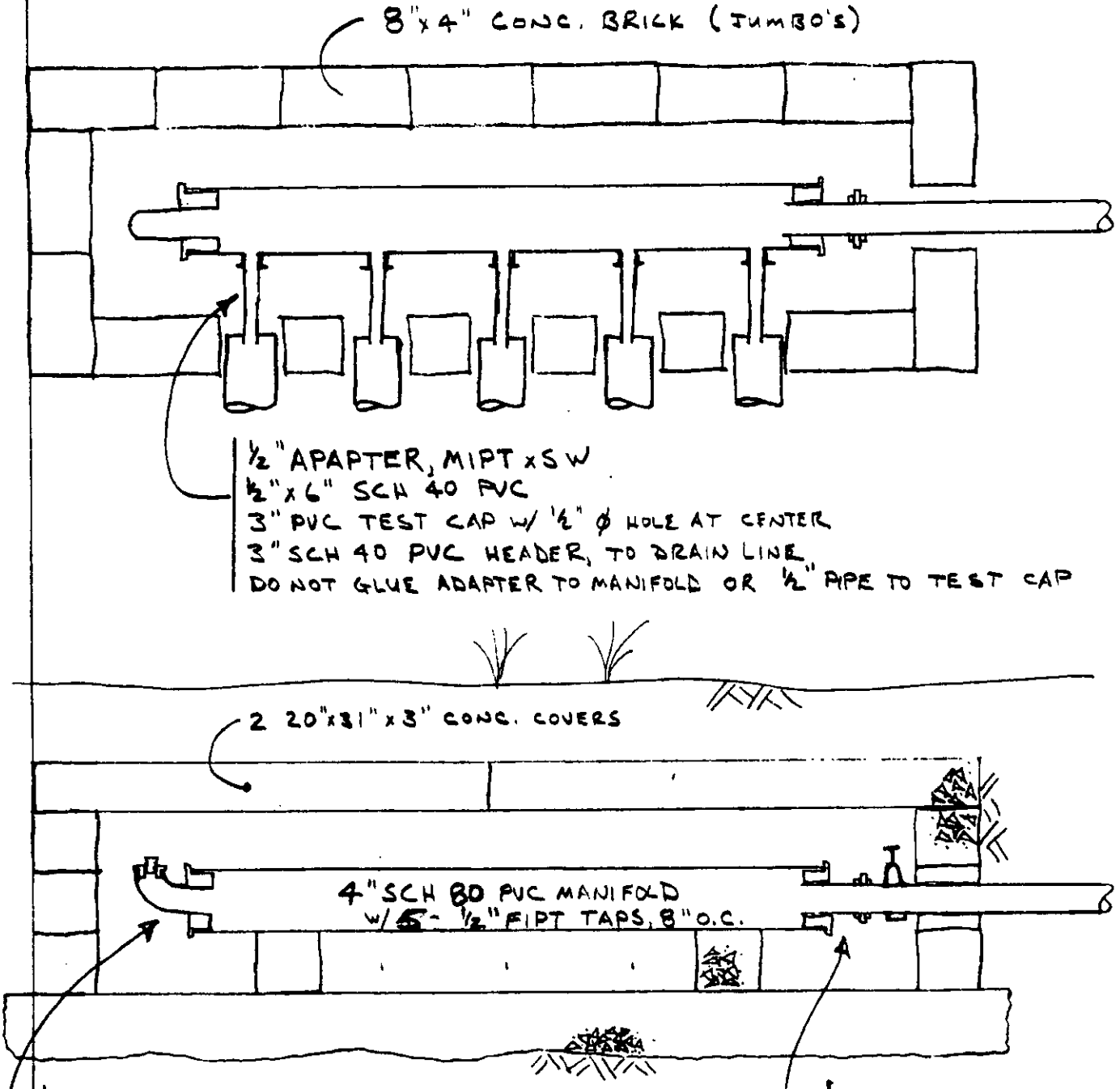




PUMP TANK DETAIL

NTS

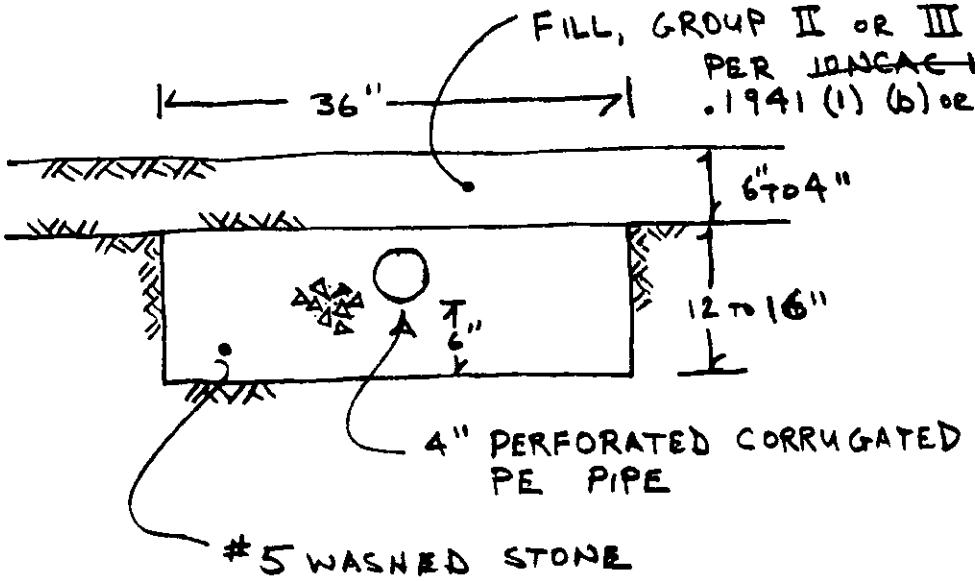
FILE: 216841



MANIFOLD DETAILS

1" = 10"

FILE: 21641



TRENCH DETAIL

NTS

PLS COPY FURNISHED TO:

EDDIE BAUCOM
W K BAUCOM, INC
PO BOX 23325
CHARLOTTE, NC 28227
545 4028
536-4103

FILE: 216141

DESIGN CALCULATIONS

1) FLOW: 3BR x 120 GPD/BR = 360 GPD

2) AREA: 360 GPD ÷ ~~0.25~~ 0.3 GPD/SF = ~~1080~~ 1200 SF

3) TRENCH LENGTH: ~~1080~~ 1200 SF ÷ 3 SF/LF = ~~360~~ 400 LF

4) MANIFOLD: USE ½" (.622 ID) TAPS, 1.2' HEAD

FLOW IS $Q = 11.79\ D^2\ H^{1/2}$

WHERE Q = FLOW, GPM
D = TAP DIAMETER, INCHES
H = HEAD, FEET

$Q = 11.79\ (.622)^2\ (1.2)^{1/2}$

Q = 5.0 GPM PER TAP

FOR 80FT LINES, ~~400~~ LF / 80 LF = ~~5~~ LINES ∴ 5 TAPS

~~5~~ TAPS x 5.0 GPM/TAP = 25 GPM TOTAL FLOW

5) HEAD:

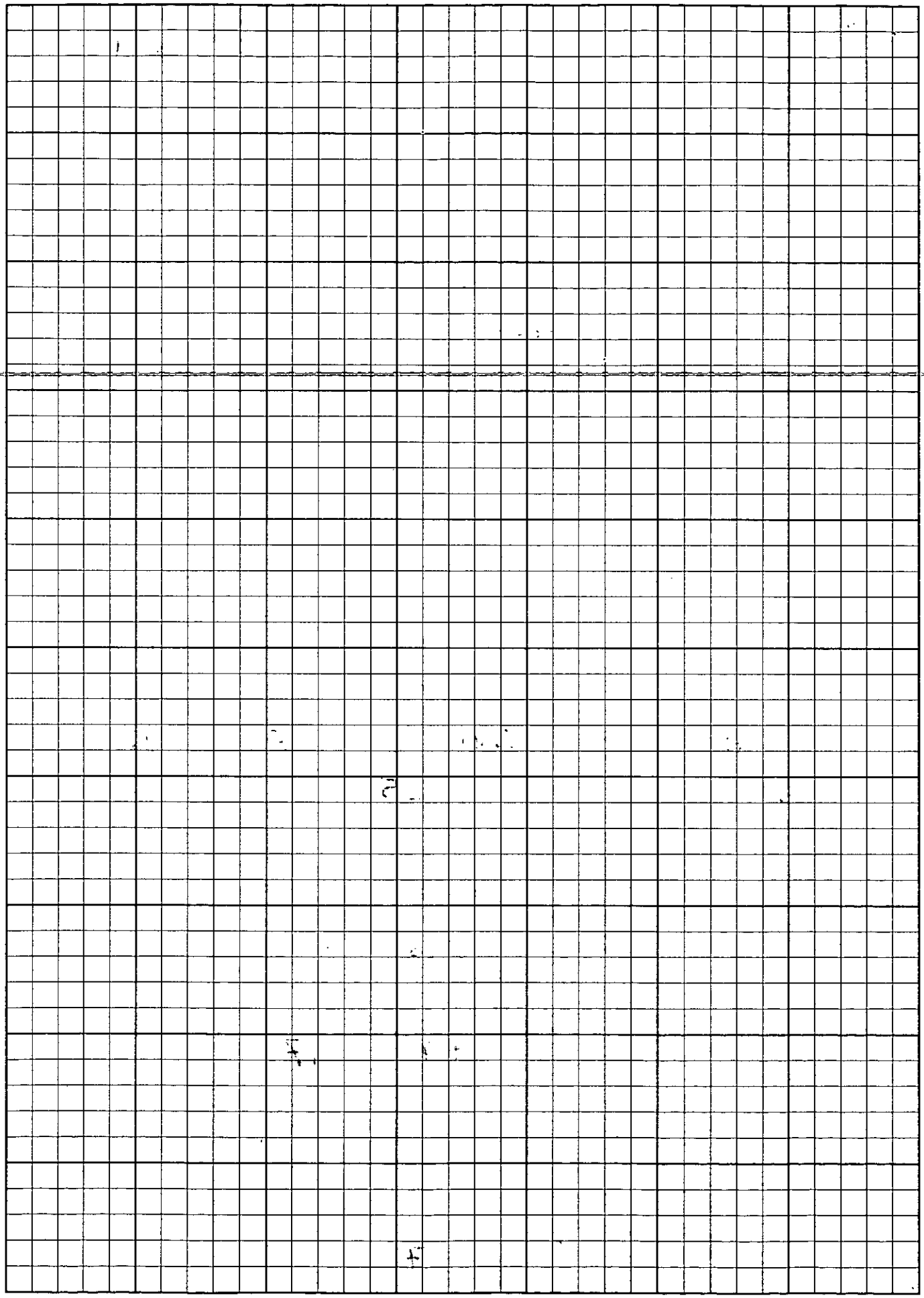
ELEVATION	~10'	
FRICTION	~~3.75~~	100' 1½" PVC @ 20 GPM
PRESSURE	1.2	
	~~14.9~~ SAY ~~15~~	

6) DOSING VOLUME & DURATION

360 GPD ÷ 2 DOSES/DAY = 180 GAL

180 GAL ÷ 25 GPM = ~~7~~ MINUTES

13-782 500 SHEETS, FILLER 5 SQUARE
42-381 50 SHEETS EYE-EASE 5 SQUARE
42-382 100 SHEETS EYE-EASE 5 SQUARE
42-389 200 SHEETS EYE-EASE 5 SQUARE
42-392 100 RECYCLED WHITE 5 SQUARE
42-399 200 RECYCLED WHITE 5 SQUARE
Made in U.S.A.
National Brand

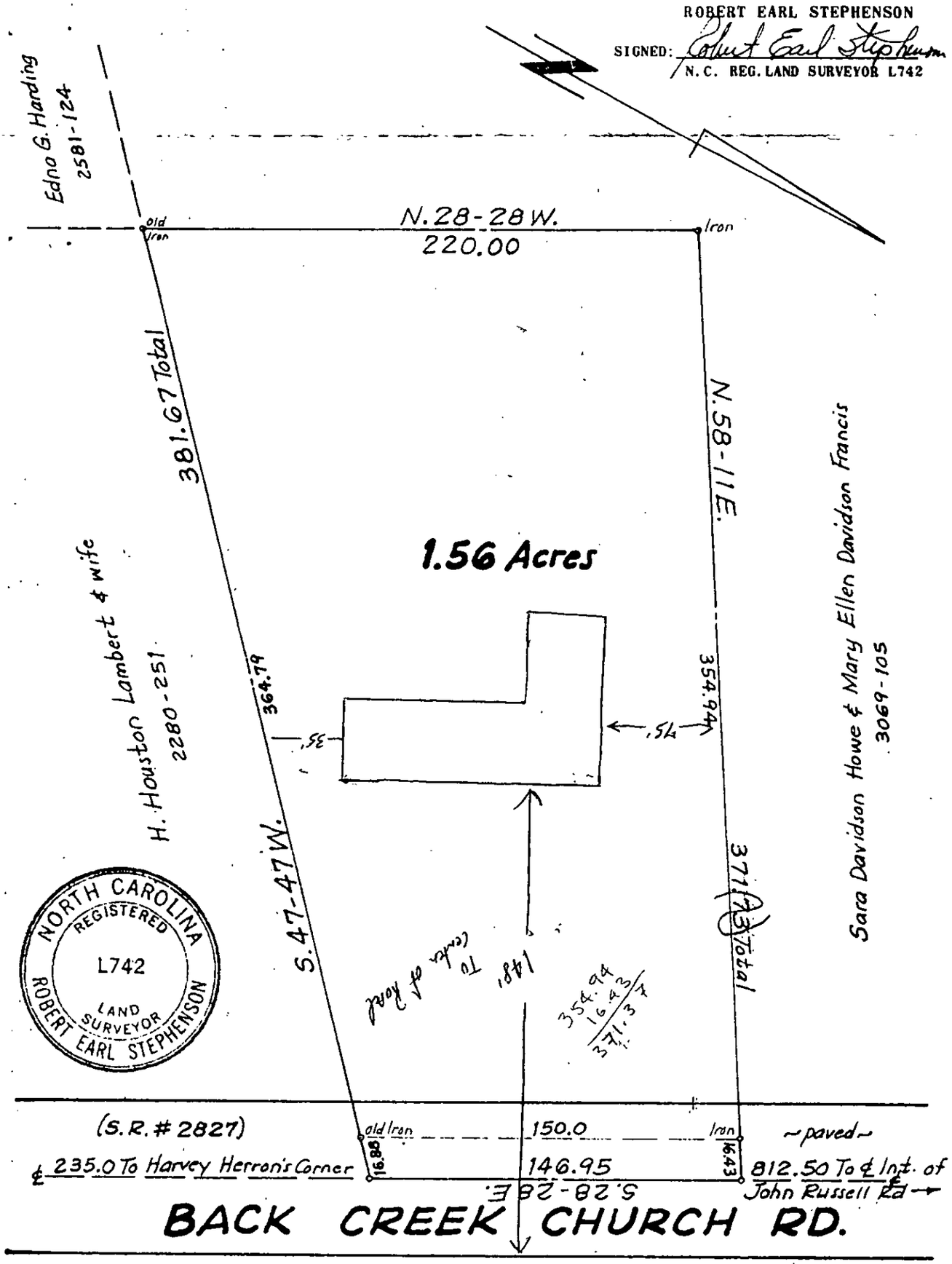


THIS IS TO CERTIFY THAT ON THE 16th DAY OF April 1979. I SURVEYED THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE PROPERTY LINES, WALLS, AND BUILDINGS ARE AS SHOWN HEREON: THAT THE BUILDINGS LOCATED ON SAID LOT DO NOT ENCROACH OR PROJECT ON ADJACENT STREETS OR PROPERTY: AND THAT NO ADJACENT BUILDINGS OR WALLS ENCROACH OR PROJECT ON SAID PREMISES.

ROBERT EARL STEPHENSON

SIGNED: Robert Earl Stephenson

N. C. REG. LAND SURVEYOR L742



PHYSICAL SURVEY

OF

1.56 Acre Tract, Crab Orchard Twnsp., Mecklenburg Co., N.C.

Near CHARLOTTE, MECKLENBURG COUNTY, NORTH CAROLINA

PROPERTY OF

Howard Houston Lambert & wife, Shirley C. Lambert

SCALE: 1" = 50'

DEED BOOK: _____ PAGE: _____

MAP BOOK: _____ PAGE: _____

MECKLENBURG COUNTY REGISTER OF DEEDS
JUDITH A. GIBSON - REGISTER

CUSTOMER RECEIPT: 08/01/94

Date	Time	Inst #	Type	Book	Page	Trx	Amount
08/01/94	04:56	766	PERMIT	7865	348	FEE	12.00
08/01/94	04:56					TOT	12.00
08/01/94	04:56					CASH	20.00
08/01/94	04:56					CHNG	8.00

BK: 07865 PG: 0948/0950 #:0766 12.00
JUDITH A GIBSON REG OF DEEDS MECK NC
FILED FOR REGISTRATION 08/01/94 16:56

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

ACKNOWLEDGEMENT OF REQUEST BY OWNER FOR RECLASSIFICATION OF SITE FROM *"UNSUITABLE" TO "PROVISIONALLY SUITABLE"* UNDER 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c)

FILE # 21641
PARCEL # 90 105-041-04

The undersigned, Howard Houston Lambat & wife Shirley C. Lambat, owner of property located at 3432 Back Creek Church Road, (the "site") and described in an instrument recorded in Book 2487 at Page 93, Mecklenburg Public Registry, hereby acknowledges that the undersigned applied to the Mecklenburg County Health Department (the "Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 15A NCAC 18A .1900 et seq.; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data, and other information which indicate to the Department that the septic tank system proposed by the undersigned is allowed by the rules; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

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

The undersigned further acknowledges that the following conditions will apply to the site:

- Any changes on the property may make the Improvement Permit Null and void and may make the Improvement Permit subject to revocation.

This instrument was prepared by: Howard Houston Lambat
Mail after recording to: 3506 Back Creek Church Rd
Charlotte NC 28213

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees, and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

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

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

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

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, this 1 day of August, 1994.

_____ (Corporate Name)

Howard Houston Lambert (SEAL)

Shirley C. Lambert (SEAL)

By: _____ _____ (SEAL)

_____ President _____ (SEAL)

ATTEST:

_____ (SEAL)

_____ Secretary

(Corporate Seal)

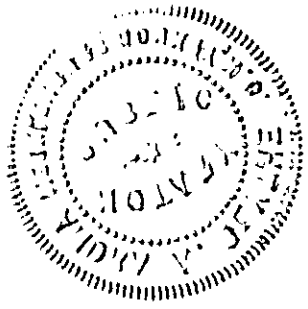
STATE OF NORTH CAROLINA
COUNTY OF Meck.

I, Andra A. Blythe, a Notary Public for said County and State, do hereby certify that Howard Houston Lambert & Shirley C. Lambert personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 1st day of August, 1994.

Andra A. Blythe
Notary Public

My Commission Expires:
Dec. 30, 1997



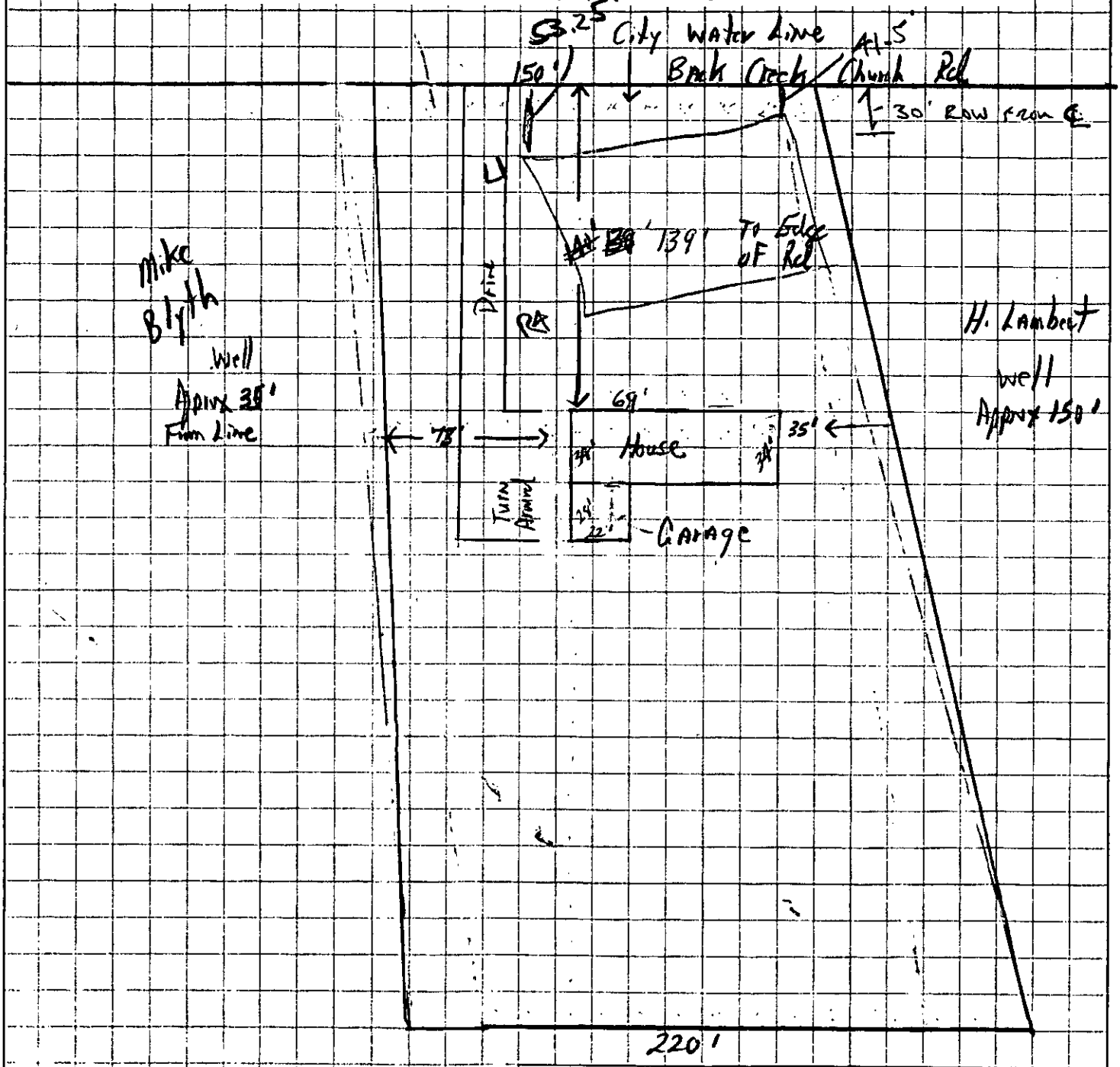
PROPOSED PLOT PLAN

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

FILE: 21641

TC: 105 091 04 PO

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

Mecklenburg County

Health Department

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

June 22, 1994

Mr. Howard Lambert
3506 Back Creek Church Road
Charlotte, NC 28213

Re: 3432 Back Creek Church Road
File: 21641
Tax Parcel No: 105-041-04PO

Dear Mr. Lambert:

Receipt of the plans for a conventional system of sewage disposal for the above property is hereby acknowledged. A field investigation was conducted by Mr. William Marlin, Soil Scientist, and myself for determining site suitability for the installation of a subsurface sewage treatment and disposal system. The results of this investigation showed the property to be classified unsuitable as to soil depth for the installation of such a system.

State regulations provide sites originally classified unsuitable may be utilized for the installation of alternative or modified sewage disposal systems provided the requirements of 15A NCAC 18A .1900. .1956 and/or .1957 are met. A reprint of this section is enclosed for your information.

Should you desire to file for permission to install an alternative or modified sewage disposal system on the property, please submit the appropriate additional fee plus a detailed plan of the proposed sewage disposal system including the location of all proposed buildings, driveways, well(s) and water lines. They will be reviewed, and if it is determined that the proposed system may be reasonably 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 you have any questions concerning this matter, please contact me at 336-5569.

Sincerely,

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

Mecklenburg County

Health Department

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

June 22, 1994

Mr. Howard Lambert
3506 Back Creek Church Road
Charlotte, NC 28213

Dear Mr. Lambert:

Receipt of the plans for a conventional system of sewage disposal for the above property is hereby acknowledged. A field investigation was conducted by Mr. William Marlin, Soil Scientist, and myself for determining site suitability for the installation of a subsurface sewage treatment and disposal system. The results of this investigation showed the property to be classified unsuitable as to soil depth for the installation of such a system.

State regulations provide sites originally classified unsuitable may be utilized for the installation of alternative or modified sewage disposal systems provided the requirements of 15A NCAC 18A .1900. .1956 and/or .1957 are met. A reprint of this section is enclosed for your information.

Should you desire to file for permission to install an alternative or modified sewage disposal system on the property, please submit the appropriate additional fee plus a detailed plan of the proposed sewage disposal system including the location of all proposed buildings, driveways, well(s) and water lines. They will be reviewed, and if it is determined that the proposed system may be reasonably 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 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:lw

Enclosure

File 21641

Rd #200 5/26/94 Ck # 183 Ck # 1126 11/26/94 Ck # 1412 #100.00

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

[ ] 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: Lambert (last) Howard (first) H (mi)
ADDRESS: 3506 Back Creek Ch. Rd PHONE: (704) 596-2568
CITY: Charlotte STATE: N.C. ZIPCODE: 28213

Date:

PROPERTY OWNER:
NAME: Lambert (last) Howard (first) H (mi)
ADDRESS: 3506 Back Creek Ch Rd PHONE: (704) 596-2568
CITY: Charlotte STATE: NC. ZIPCODE: 28213

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 105-041-04-PO
STREET ADDRESS: 3432 Back Creek Church Road
ZONING:

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

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: LOT SIZE (in acres):

TYPE APPLICATION (check one):
[ ] SOIL TEST - INDIVIDUAL LOT (D)
[x] 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: 3 NUMBER OCCUPANTS: 2
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)
[x] 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: Date:

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.

... lift station required, additional soil cover required, see plan on file, see acknowledgment form on file

[x] 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 8-8-94 Date

Director or Authorized Section Head 8/25/94

WATER : 122791

PROPOSED PLOT PLAN

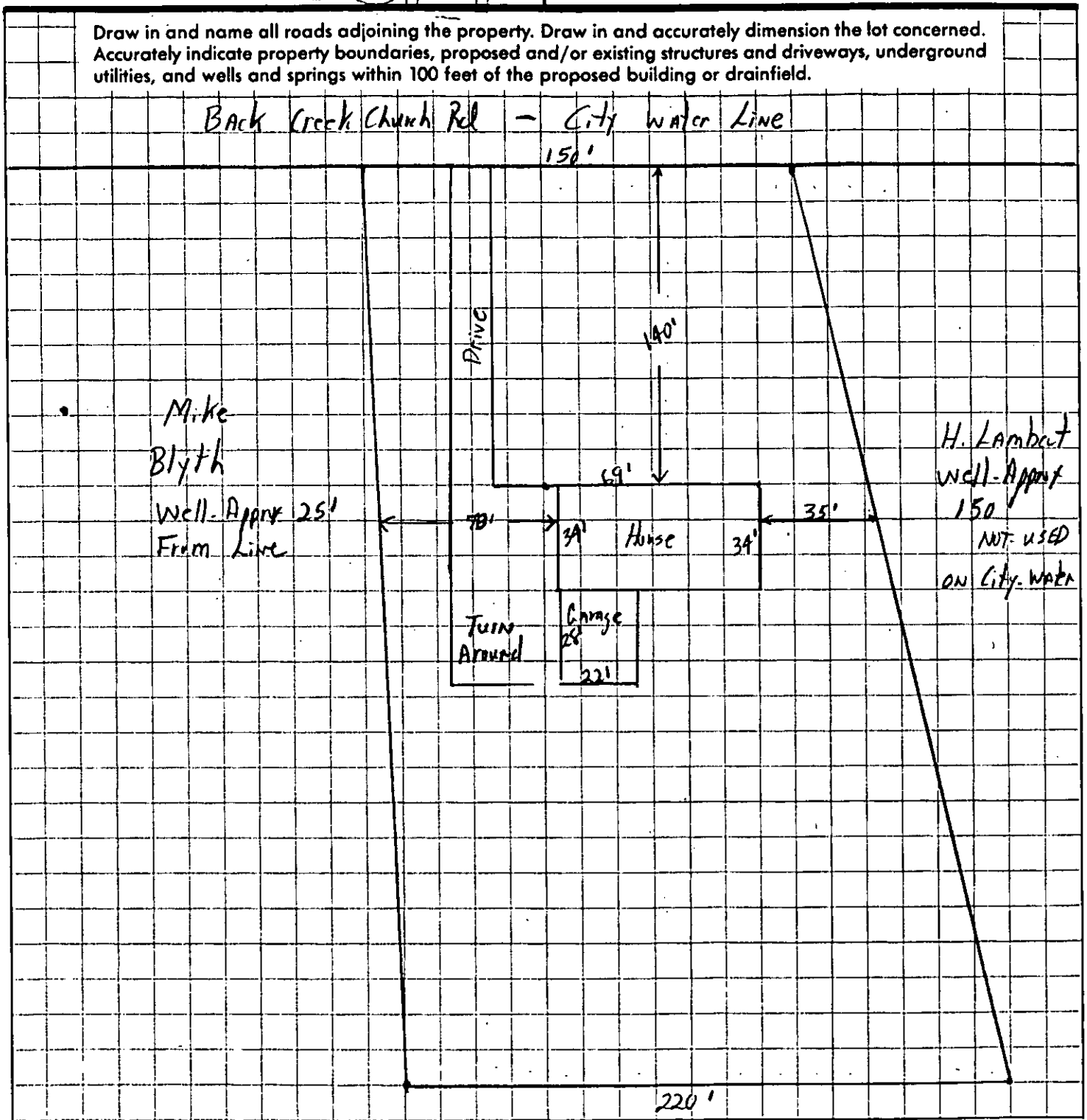
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

COPY

FILE: 21641

TC: 105-041-04 PP

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

DATE 12/29/93

TO: ~~CHARLOTTE-MECKLENBURG BUILDING STANDARDS~~
PERMIT ISSUING SECTION E.H.D

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION Meck

105-041-04p0
PARCEL NUMBER

~~35~~ 3432 Back Creek Church 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: Septic tank

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: [signature]

REVISED 1/91

file 21641

DATE 8/8/94

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION Meck

105-041-04
PARCEL NUMBER

3432 Back Creek Church Rd
ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

NA
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: S Done

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: Pace

REVISED 1/91