Garrett, Kimberly

From: Garrett, Kimberly
Sent: Friday, March 25, 2016 9:29 AM
To: 'leroy@hendricks-builders.com'
Subject: use existing system application

Leroy,

Your application can be approved for a 2-bedroom house. If you want a larger home, then you will have to submit an application for an alteration. (The $100 fee that you have paid will be put towards the alteration permit which is $300.)

Based on our conversations, it sounded like you want to build a 2-bedroom house. If that is the case, please resubmit an application showing one 2-bedroom home (you can just cross through the 4 and put a 2 and initial) and then submit a copy of the plan for the 2-bedroom, and a plot plan showing the house location in relation to the existing septic system and well.

If you want to build an additional home on the parcel, you will need to submit an application for a new system and pay the $250 (of the total $650 permit fee). We ask at that time that you mark the property boundaries clearly in the field and flag the 4 corners of the approximate location of the new home. After that has been done, Jacob our soil scientist will make a site visit and determine if and where suitable soils exist for another system.

I will be out of the office on Monday abut will be back on Tuesday if you have additional questions.

Thank you,
Kim

Kim Garrett, REHS
Environmental Specialist
Environmental Health Program
Mecklenburg County Health Department
980-721-2054 (cell)
kimberly.garrett@mecklenburgcountync.gov

CONFIDENTIALITY NOTICE: *This message and any attachments included are from the Mecklenburg County Health Department and are for sole use by the intended recipient(s). The information contained herein may include confidential or privileged information. Unauthorized review, forwarding, printing, copying, distributing, or using such information is strictly prohibited and may be unlawful. If you received this message in error, or have reason to believe you are not authorized to receive it, please contact the sender by reply email and destroy all copies of the original message. Thank you!*

App. #: 8078

Fee: 100.0000

Date: 3/7/2016

CRT[ ]

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM / WATER SUPPLY WELL

MECKLENBURG COUNTY HEALTH DEPARTMENT

Groundwater & Wastewater Services

FILE #: 5860A

TYPE APPLICATION:

(•) SEPTIC ONLY ( ) WELL ONLY ( ) SEPTIC AND WELL

( ) ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE ( ) EXCHANGE MOBILE HOME - SAME # OF BEDROOMS

(•) ADDITION - RENOVATION OR GARAGE WITH NO MAJOR CHANGES ( ) COMMERCIAL OR INDUSTRIAL

PERSON FILING APPLICATION

NAME: LEROY HENDRICKS JR

ADDRESS: 14315 HUS MCGINNIS RD

CITY: HUNTERSVILLE

STATE: NORTH CAROLINA ZIP: 28078

PRIMARY PHONE: 704-726-2800 ALTERNATE PHONE:

EMAIL: LEROY@HENDRICKS-BUILDERS.COM

JOB LOCATION INFORMATION:

TAX / PARCEL #: 02103114

STREET ADDRESS: 14315 HUS MCGINNIS RD

CITY: HUNTERSVILLE NC ZIP: 28078

SUBDIVISION OR MOBILE HOME PARK NAME: LOT #: 0

PROPERTY OWNER: [ ] Same as Filer

NAME: LEROY HENDRICKS JR

ADDRESS: 14315 HUS MCGINNIS RD

CITY: HUNTERSVILLE

STATE: NORTH CAROLINA

ZIP: 28078

PRIMARY PHONE: 704-726-2800

ALTERNATE PHONE:

EMAIL: LEROY@HENDRICKS-BUILDERS.C(

General Comments:

WATER SUPPLY:

[✓] MUNICIPAL (M) [ ] PUBLIC (C) [ ] PRIVATE WELL (P) [ ] SHARED WELL (S) [ ] OTHER 'SPRINGS' (O)

RESIDENTIAL PROPERTY TYPE:

(•) HOUSE ( ) MODULAR HOME ( ) MULTIPLE FAMILY

( ) SINGLE MOBILE HOME ( ) DOUBLE WIDE ( ) OTHER

NUMBER OF BEDROOMS: 4

NUMBER OF OCCUPANTS: 3

COMMERCIAL / INDUSTRIAL PROPERTY TYPE:

NUMBER OF EMPLOYEES PER SHIFT: 0

NUMBER OF SHIFTS: 0

INDUSTRIAL WASTES?: ( ) YES ( ) NO

UNDERGROUND STORAGE TANKS?: ( ) YES ( ) NO

ADDITION TYPE ATTACHED TO EXISTING STRUCTURE:

[ ] BEDROOM [ ] BATHROOM [ ] KITCHEN [ ] DINING ROOM [ ] DEN [ ] GARAGE

[ ] SUNROOM [ ] PORCH [ ] DECK [ ] OTHER

ADDITION TYPE DETACHED FROM EXISTING STRUCTURE:

[ ] DETACHED GARAGE [ ] DETACHED GARAGE WITH PLUMBING [ ] POOL HOUSE [ ] SHOP [ ] BARN

[ ] STORAGE SHED [ ] DETACHED PORCH/DECK [✓] OTHER

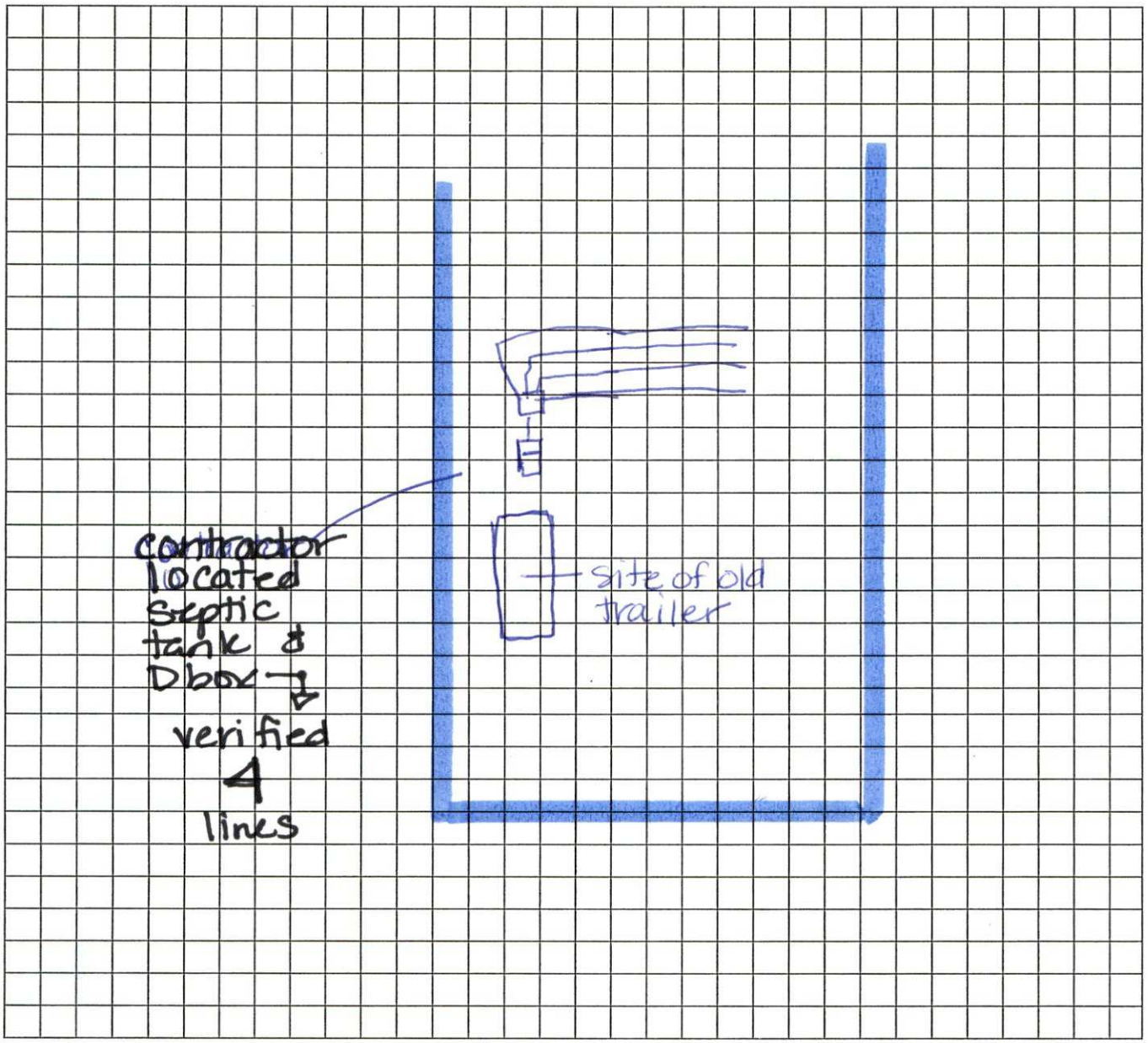
Print Update Go to Front Counter

File #: 58160 A

PROPOSED PLOT PLAN

A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

Street Address: 14315 Hus McGinnis Rd Tax Parcel #: 021-031-014



*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 and Water Supply Wells 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.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

Project approved for two bedroom house.

Kim Garnett 3/24/16

REHS Signature Date

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

Revised on: 01/03/11

Polaris 3G Map – Mecklenburg County, North Carolina

Date Printed: 3/25/2016 9:11:39 AM



This map or report is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, planimetric maps, and other public records and data. Users of this map or report are hereby notified that the aforementioned public primary information sources should be consulted for verification. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.

Arlington Cornelius

COPY

5860A #8078

3/15/16

4 liner Rock tank

7 MAR '16 AM 11:41

MECKLENBURG COUNTY
HEALTH DEPARTMENT

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM / WATER SUPPLY WELL

APPLICATION TYPE: (●) SEPTIC ONLY ( ) WELL ONLY ( ) SEPTIC & WELL
( ) ADDITION OR RENOVATION WITH OCCUPANCY INCREASE
(●) ADDITION OR RENOVATION WITH NO OCCUPANCY INCREASE
( ) EXCHANGE MOBILE HOME (SAME # BEDROOMS)
( ) COMMERCIAL OR INDUSTRIAL

PERSON FILING APPLICATION:
NAME: Leroy Hendricks JR
ADDRESS: 14315 Hwy McGinnis Rd
CITY: Huntersville
STATE: NC ZIP: 28078
PHONE: 704-726-2820
ALTERNATE PHONE: 0210314
E-MAIL: leroy@hendricks-builders.com

PROPERTY OWNER: (✓) SAME AS PERSON FILING APPLICATION
NAME:
ADDRESS:
CITY:
STATE: ZIP:
PHONE:
ALTERNATE PHONE:
E-MAIL:

JOB LOCATION INFORMATION
TAX PARCEL #:
STREET ADDRESS: 14315 Hwy McGinnis Rd
CITY: Huntersville
STATE: NC **ZIP:** 28078

SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #:

WATER SUPPLY:
(●) MUNICIPAL ( ) PRIVATE WELL ( ) PUBLIC WELL ( ) SHARED WELL ( ) OTHER

RESIDENTIAL PROPERTY TYPE: ( ) N/A
(●) HOUSE ( ) MODULAR HOME ( ) MULTIPLE FAMILY
( ) SINGLE MOBILE HOME ( ) DOUBLE WIDE
( ) OTHER

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 4/5
NUMBER OF OCCUPANTS: 3

COMMERCIAL / INDUSTRIAL PROPERTY TYPE: ( ) N/A
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:
INDUSTRIAL WASTES? ( ) YES ( ) NO
UNDERGROUND STORAGE TANKS? ( ) YES ( ) NO

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:
( ) BEDROOM ( ) BATHROOM ( ) KITCHEN ( ) DINING ROOM ( ) LIVING ROOM ( ) DEN
( ) GARAGE ( ) SUNROOM ( ) PORCH ( ) DECK ( ) OTHER

ADDITION/RENOVATION TYPE DETACHED FROM EXISTING STRUCTURE:
( ) DETACHED GARAGE ( ) DETACHED GARAGE WITH PLUMBING ( ) POOL HOUSE ( ) SHOP ( ) BARN
( ) STORAGE SHED ( ) DETACHED PORCH / DECK (●) 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 the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Leroy Hendricks — 3-7-16
Owner's/Agent's Signature — Date

A PROPOSED PLOT PLAN (see page 2) is required to be submitted with each application.

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

2011 - trailer prior to 2009 trailer

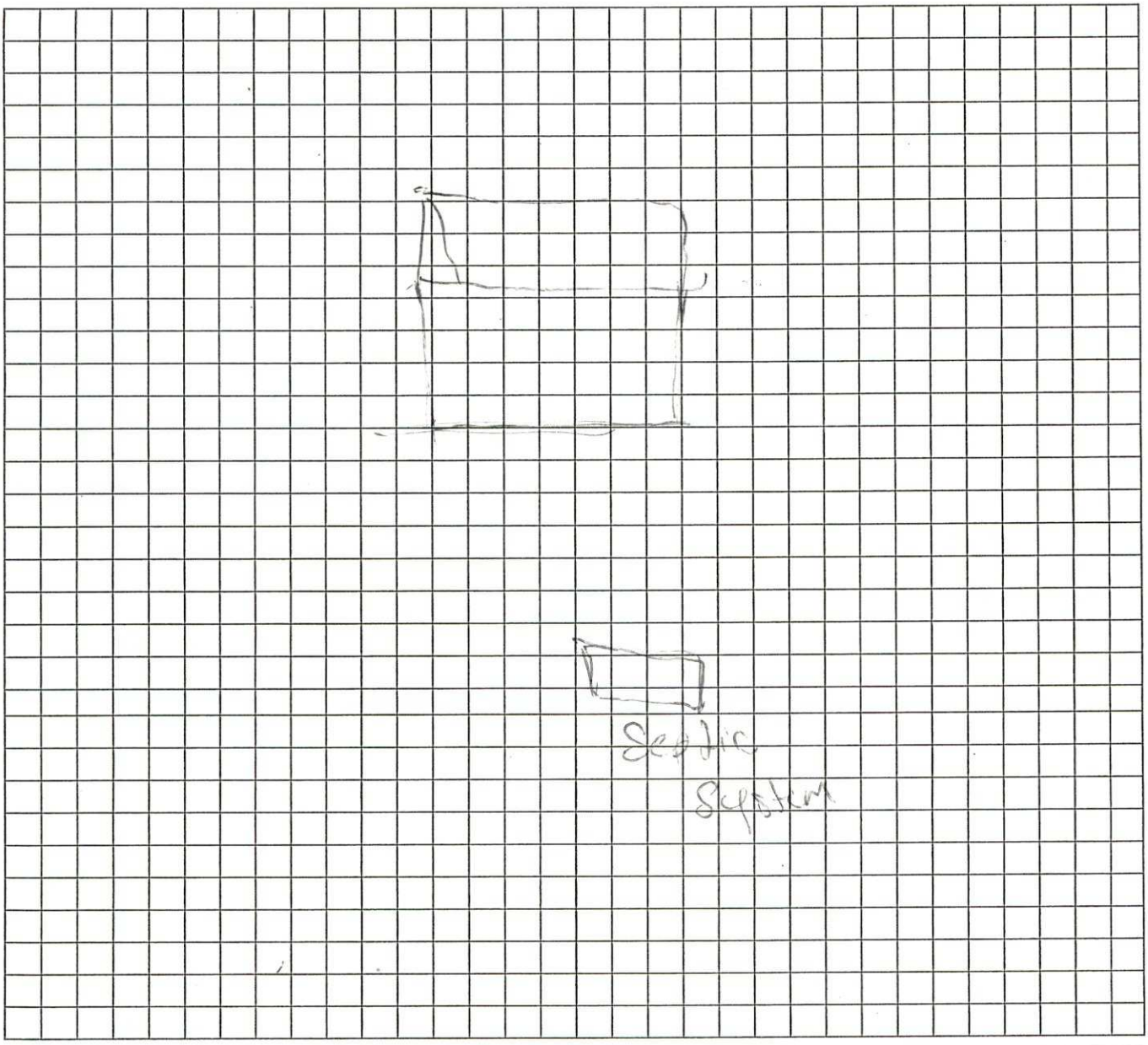
Revised on: 01/03/11

File #: _____

PROPOSED PLOT PLAN

A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

Street Address: 1435 Hwy McGinnis RD Tax Parcel #: _____



*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 and Water Supply Wells 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.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

_____

_____

_____ _____

REHS Signature Date

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

Revised on: 01/03/11

Mecklenburg County
Health Department

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

July 10th, 1989

Shirley Foster Gattis
14413 Hus McGinnis Road
Huntersville, NC 28078

RE: Property located at Hus McGinnis Road
FILE: 5860A
PARCEL: 02103114

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. 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 12127) 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 10 NCAC 10A .1948 (c) 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 I may be of any assistance, please feel free to call.

Very truly yours,

Jim Ericson, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure (2)

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 12127

File: 5860A Action 2

Parcel: PO 021-031-14 ☐ PC

Location: Hus McGinnis Rd.

Subdivision:

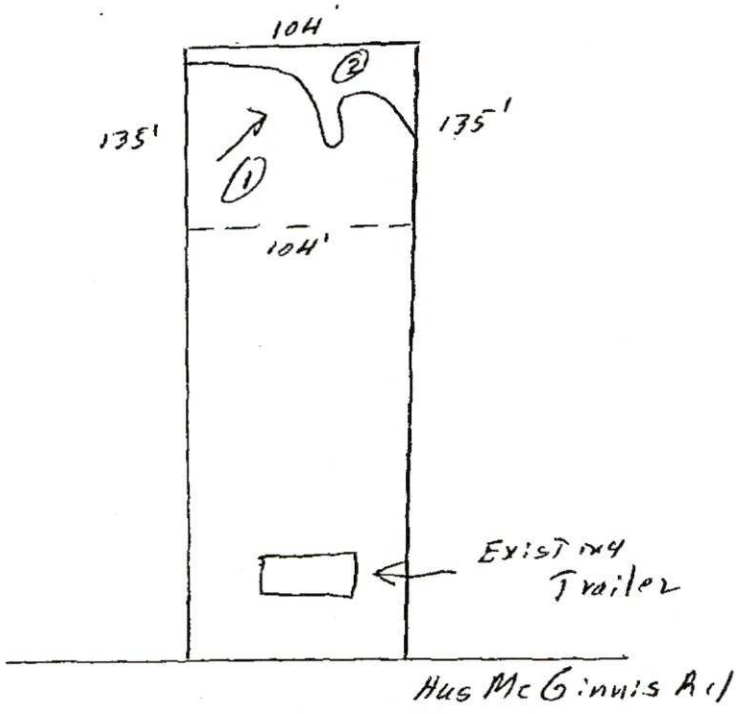
Lot: Block: Acres: .32

Owner: Shirley Gattis
Address: 14413 Hus McGinnis Rd.
Huntersville, NC 28078

Comments: _____

Described by: William R. Martin

Date: 7-10-89



***** 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 6-12%	S PS (U) Depression Drainageway	S PS U	S PS U	S PS U	S PS U
Texture	S PS (U) 2-1 Clay	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S PS (U) perched water 24-36"	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 36+	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U >36"	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S PS (U) Restricted	S PS U	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	IVB Helena-like	Depression-Drainageway				
Area Classification	S PS (U)	S PS (U)	S PS U	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
JUN 2 0 1989
ENVIRONMENTAL HEALTH
DIVISION

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

(OFFICE USE ONLY)

FILE: 5860A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: 14413 Hus McGinnis Rd. Huntersville NC 28078 SR#2444

② SUBDIVISION: n/a ③ LOT: n/a ④ BLOCK: n/a

⑤ PARCEL REFERENCE: BOOK NO.: 021 PAGE NO.: 031 PARCEL NO.: 14

⑥ DEED REFERENCE: BOOK NO.: 4404 PAGE NO.: 068

OWNER

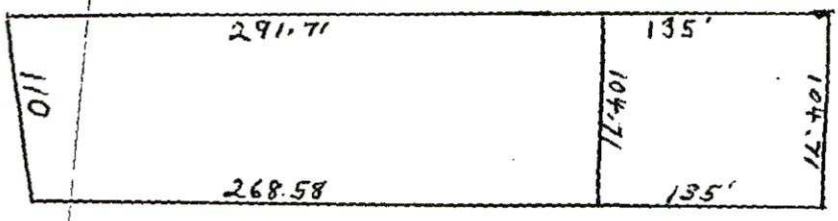
⑦ NAME: Shirley (FIRST) Foster (MIDDLE) Gattis (LAST)

⑧ MAILING ADDRESS: 14413 Hus McGinnis Rd.

⑨ CITY: Huntersville ⑩ STATE: NC ⑪ ZIP: 28078

⑫ PHONE: (WORK) None (HOME) (704) 865-2024

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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Shirley Gattis

Date: 5/21/89

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

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

4404 0068 **INDIVIDUAL DEED** Revenue Stamp affixed $_____

63

STATE OF NORTH CAROLINA—Mecklenburg County

THIS DEED, Made this 12th day of January, A. D., 1981, by and between
Herman M. Ferrell and wife, Thelma G. Ferrell

of the County of Mecklenburg and State of ~~North Carolina~~ Florida part ies of the first part, and
Shirley Mae Foster Gattis

of the County of Mecklenburg and State of North Carolina, part y of the second part.

WITNESSETH, That the said part ies of the first part in consideration of ONE HUNDRED DOLLARS AND OTHER VALUABLE CONSIDERATIONS to them paid by the part y of the second part, the receipt of which is hereby acknowledged, ha ve bargained and sold, and by these presents do grant, bargain, sell and convey unto the said part y of the second part, her heirs, successors or assigns, all that certain lot or parcel of land, situate, lying and being in Mallard Creek Township, Mecklenburg County, State of North Carolina, and more particularly described and defined as follows:

Beginning at a point in the northerly edge of State Road No. 2444 which point is located 187.78 feet measured along the said northerly edge (if extended) of S. R. No. 2444 in an easterly direction from the point of intersection of the said northerly edge of S. R. No. 2444 and the easterly edge (if extended) of Asbury Chapel Road, and running thence north 3-29-40 E. 479.11 feet to a point in the Armond B. Jordon Property running thence with the Jordon line (S. 86-26 E. 135) feet to a point; running thence S. 3-29-40E., 471.87 feet to a point in the northerly edge of S. R. No. 2444; running thence with the said northerly edge of S. R. No. 2444 two lines as follows: (1) S. 88-03 W. 5.31 feet to a point; (2) with the arc of a curve to the right having a radius of 1449.54 feet a distance of 129.04 feet to the point and place of beginning all as shown on that certain unrecorded map of a revised portion of Asbury Hills made by R. B. Pharr and Associates on the 5th day of March, 1973.

Being a portion of the property conveyed to the said parties of the first part by Lillie Mae Bridges Ritchie, et al., by deed dated October 15, 1956 and recorded in book 2181, page 589 in the Mecklenburg County Registry.

PRESENTED FOR REGISTRATION FEB 4 11 59 AM '81 CHARLES E. CONDER REGISTER OF DEEDS MECKLENBURG COUNTY, N.C.

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the said part y of the second part, her heirs, successors or assigns, to their only use and behoof forever.

And the said part ies of the first part for themselves, their heirs, successors, executors and administrators, covenant with the said part y of the second part, her heirs, successors and assigns, that they are seized of said premises in fee and ha ve the right to convey the same in fee simple, that the same are free and clear from all encumbrances, and that they will warrant and defend the said title to the same against the lawful claims of all persons whomsoever.

HOWEVER, there is excepted from these warranties all such valid and enforceable easements, conditions and restrictions as may appear of record and the lien of ad valorem taxes for the current year, which the grantee(s) hereby assumes and agrees to pay

IN TESTIMONY WHEREOF, The said part ies of the first part to these Presents ha ve hereunto set their hand s and seal s the day and year above written.

Signed, Sealed and Delivered in presence of

Herman M. Ferrell (Seal)
Herman M. Ferrell

(Seal)

Thelma G. Ferrell (Seal)
Thelma G. Ferrell

STATE OF ~~NORTH CAROLINA~~ FLORIDA, COUNTY OF ~~MECKLENBURG~~

I, _____, a Notary Public for said County and State, do hereby certify that Herman M. Ferrell and wife, Thelma G. Ferrell personally appeared before me this day, and acknowledged the due execution of the foregoing (or annexed) instrument.

Witness my hand and notarial seal, this 12 day of January A. D., 19 81

My Commission Expires _____ Notary Public

STATE OF NORTH CAROLINA, COUNTY OF MECKLENBURG

The foregoing (or annexed) Certificate of _____ a Notary Public for said County and State, is certified to be correct.

This _____ day of _____

_____ Reg. of Deeds, By _____

Presented for registration _____ o'clock, _____ M., on the _____ day of _____ and recorded in book _____ page _____

Drawn By: John A. McRae, Jr., Attorney

STATE OF NORTH CAROLINA Real Estate Excise Tax 0.10

Mail to Grantee, 2526 Mt. Forest Ave, Baltimore, M.D. 21234

Mecklenburg County
Health Department

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

September 20, 1989

MEMORANDUM

TO: Lorraine Whitaker

FROM: Sylvia D. Daniel, R.S., Program Chief
On Premises Waste Disposal & Water Supply

Please issue a refund for incorrect fee charges of $125.00 resulting from overpayment of $25.00 on modified system and duplicate payment of $100.00 on improvement permit. (See file #5859A; 18916 Evanston Lane). The refund should be made to the following:

Charles Rader
PO Box 1076
Cornelius, NC 28031

Thank you in advance for your prompt attention to this matter.

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



Print

Close

Parcel Information

Parcel ID	Account	Parent	Previous
02103114	INDIVIDUAL		

Owner(s)

Owner Name	Mailing Address	City/State
GATTIS SHIRLEY MAE LIFE ESTATE	1214 MOORESVILLE RD	KANNAPOLIS NC 28081

Legal Information

Legal	Municipality	Date Annexed	Special District	Fire District	Acreage
P3-6 M12-347	MECKLENBURG COUNTY-UNINCORPORATED		FIRE SERVICE D	HUNTERSVILLE RURAL	0

Total Parcel Assessment

Building	Land	Features	Total
0	63600	0	63600

Exemptions

Exemption	Year Approved	Review Date	Amount

Sales Information

Sale	Price	Stamps	Qualify	VI	Type	Legal Ref.	Grantor
Dec 19 2008	0		LESS $3000	IMP	WARRANTY D	24317-632	GATTIS,SHIRLEY MAE F
Jan 12 1981	10000			VAC	DEED STAMPS	04404-068	

Land Use

Use	Units	Type	Neighborhood	Assessment
R120	1.47	SMAC	C101	63600

Building Information

Bldg	Description	Type	Year	Property Location
				14315 HUS MCGINNIS RD UNINC

Bldg	Story	Units	Total SqFt	Heated SqFt	Foundation	Ext. Wall	Grade	Value

Bldg	Heat	Fuel	Fire Place	AC	Fixtures	Bedrooms	Full Baths	3/4 Baths	1/2 Baths

Sub Area

Bldg	Description	Size

Depreciation

Bldg	Physical	Functional	Economic	Special	Override

Special Features & Yard Items

Bldg	Built	Type	Quantity	Units	Value

Notes

Tax Year	Notes	Note Date

Value Changes

Notice Date	Tax Year	Reason	Changed To	Deferred
Feb 8 2011	2011	Countywide Revaluation	63600	0
Jan 17 2003	2003	Countywide Revaluation	39200	0
Jan 5 1998	1998	Countywide Revaluation	29640	
Jan 2 1991	1991	Countywide Revaluation	13500	

Polaris 3G Map – Mecklenburg County, North Carolina

14315 Hus McGinnis

Date Printed: 3/9/2016 12:37:32 PM



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Meck. County Envir. Health
1200 Blyth Blvd
Area #2

DATE 2-16-90

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION Mech

14
001-331-~~88~~
PARCEL NUMBER

18900 ~~[illegible]~~ Evanstone LN
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	PE APPROVED		NOT APPROVED
3.	EROSION CONTROL REGULATIONS	✓ 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

REMARKS: ~~addition to home~~ renovating attic

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).

7/7/88
ALL OTHER FORMS OBSOLETE

☐ NEW ADDRESS

SIGNED: JCN

APPLICATION FOR AN IMPROVEMENT PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
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: 5860A
TC: 001-331-14
SERIAL: № 20124
L M CRT

JOB LOCATION

① ADDRESS: 18900 (STREET NO.) Evanston (STREET) Lane ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.:
⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: Kannapolis (FIRST) Construction (MIDDLE) Co. (LAST)
⑨ MAILING ADDRESS: PO Box 105 716 Fairview St
⑩ CITY: Kannapolis ⑪ STATE: NC ⑫ ZIP: 28081
⑬ PHONE: (WORK) 932-6181 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) addition/renovating attic

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 3
㉕ Type?
㉓ Maximum occupancy? 6
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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed:
Date: 3-19-90

IMPROVEMENT PERMIT

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 permit is issued by this Department.

... This permit is not transferable, and shall become null and void 36 months from the date of issuance.

NO closets to be installed in attic renovation. Use existing system

Philo A. Walker, 3/21/90
Environmentalist — Date

3-22-90
Director or Authorized Section Head — Date

*This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.



18900 EVANSTON LN

00133114

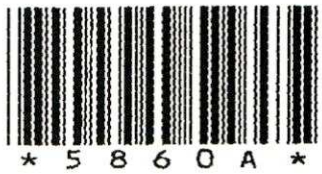
6/6/2007

duponbj

Groundwater and Wastewater Services File Imaging Project

May 2007

Barcode Font = IDAutomationHC39M



18900 EVANSTON LN

00133114

6/6/2007

duponbj

Groundwater and Wastewater Services File Imaging Project

May 2007

Barcode Font = IDAutomationHC39M

APPLICATION FOR AN IMPROVEMENT PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
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: 5860A
TC: 001-331-14
SERIAL: № 20124
☒ L ☐ CRT

JOB LOCATION

① ADDRESS: 18900 (STREET NO.) Evanston Lane (STREET) ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.:
⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: Kannapolis Construction Co. (FIRST) (MIDDLE) (LAST)
⑨ MAILING ADDRESS: PO Box 105 716 Fairview St
⑩ CITY: Kannapolis ⑪ STATE: NC ⑫ ZIP: 28081
⑬ PHONE: (WORK) 932-6181 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) addition/renovating attic

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 3
㉕ Type?
㉓ Maximum occupancy? 6
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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed:
Date: 3-19-90

IMPROVEMENT PERMIT

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 permit is issued by this Department.

... This permit is not transferable, and shall become null and void 36 months from the date of issuance.

NO closets to be installed in attic. renovation
use existing system

Philo S. Walker, 3/21/90
Environmentalist — Date

3-22-90
Director or Authorized Section Head — Date

*This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.

Meck. County Envir. Health
1200 Blyth Blvd
Area #2

DATE 2-16-90

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION Meck

14
001-331-~~80~~
PARCEL NUMBER

18900 ~~[illegible]~~ Evanstone LN
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	PLP	APPROVED	NOT APPROVED
3.	EROSION CONTROL REGULATIONS	✓	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

REMARKS: ~~addition to home~~ renovating attic

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).

7/7/88
ALL OTHER FORMS OBSOLETE

☐ NEW ADDRESS

SIGNED: GCN

Mecklenburg County
Health Department

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

September 20, 1989

MEMORANDUM

TO: Lorraine Whitaker

FROM: Sylvia D. Daniel, R.S., Program Chief
On Premises Waste Disposal & Water Supply

Please issue a refund for incorrect fee charges of $125.00 resulting from overpayment of $25.00 on modified system and duplicate payment of $100.00 on improvement permit. (See file #5859A; 18916 Evanston Lane). The refund should be made to the following:

Charles Rader
PO Box 1076
Cornelius, NC 28031

Thank you in advance for your prompt attention to this matter.

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

Mecklenburg County
Health Department

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

July 10th, 1989

Shirley Foster Gattis
14413 Hus McGinnis Road
Huntersville, NC 28078

RE: Property located at Hus McGinnis Road
FILE: 5860A
PARCEL: 02103114

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. 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 12127) 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 10 NCAC 10A .1948 (c) 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 I may be of any assistance, please feel free to call.

Very truly yours,

Jim Ericson, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure (2)

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

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 12127

File: 5860A Action 2

Parcel: PO 021-031-14 ☐ PC

Location: Hus McGinnis Rd.

Subdivision:

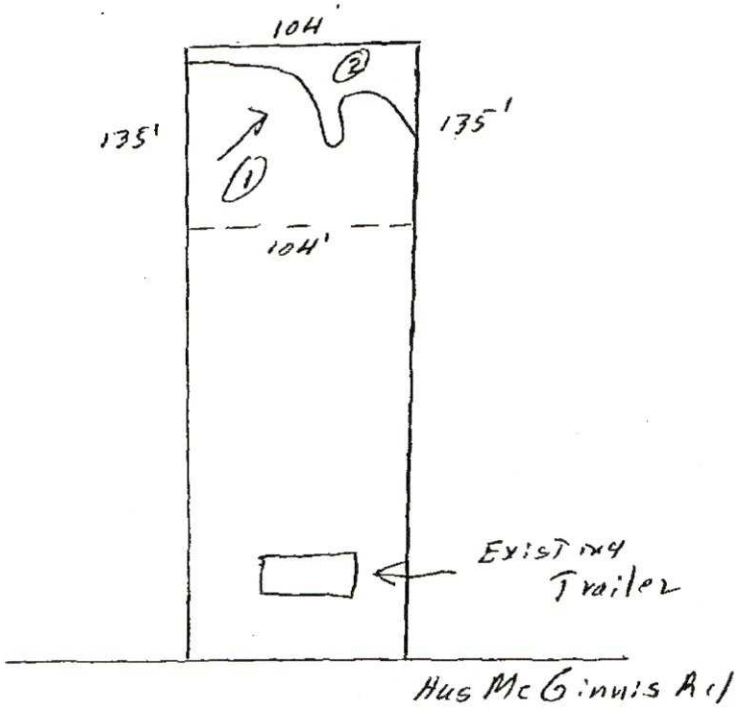
Lot: Block: Acres: .32

Owner: Shirley Gattis
Address: 14413 Hus McGinnis Rd.
Huntersville, NC 28078

Comments:

Described by: William R. Medlin

Date: 7-10-89



***** 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 6-12%	S PS (U) Depression Drainageway	S PS U	S PS U	S PS U	S PS U
Texture	S PS (U) 2-1 Clay	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S PS (U) Perched Water 24-36"	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 36"+	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U >36"	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S PS (U) Agricultural	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	IvB Helena-Ile	Depression-Drainageway				
Area Classification	S PS (U)	S PS (U)	S PS U	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
JUN 20 1989
ENVIRONMENTAL HEALTH
DIVISION

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

(OFFICE USE ONLY)
FILE: 5860A
TC:
☐ PC ☐ REPT

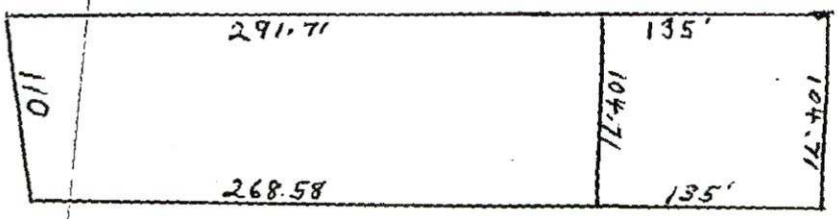
JOB LOCATION

① ADDRESS: 14413 Hus McGinnis Rd. Huntersville NC 28078 SR#2444
② SUBDIVISION: n/a ③ LOT: n/a ④ BLOCK: n/a
⑤ PARCEL REFERENCE: BOOK NO.: 021 PAGE NO.: 031 PARCEL NO.: 14
⑥ DEED REFERENCE: BOOK NO.: 4404 PAGE NO.: 068

OWNER

⑦ NAME: Shirley (FIRST) Foster (MIDDLE) Gattis (LAST)
⑧ MAILING ADDRESS: 14413 Hus McGinnis Rd.
⑨ CITY: Huntersville ⑩ STATE: NC ⑪ ZIP: 28078
⑫ PHONE: (WORK) None (HOME) (704) 865-2024

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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Shirley Gattis

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

Date: 5/21/89

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

4404 0068 **INDIVIDUAL DEED** Revenue Stamp affixed $_____ 63

STATE OF NORTH CAROLINA—Mecklenburg County

THIS DEED, Made this 12th day of January, A. D., 1981, by and between
Herman M. Ferrell and wife, Thelma G. Ferrell

of the County of Mecklenburg and State of North Carolina, part ies of the first part, and
Florida
Shirley Mae Foster Gattis

of the County of Mecklenburg and State of North Carolina, part y of the second part.

WITNESSETH, That the said part ies of the first part in consideration of ONE HUNDRED DOLLARS AND OTHER VALUABLE CONSIDERATIONS to them paid by the part y of the second part, the receipt of which is hereby acknowledged, ha ve bargained and sold, and by these presents do grant, bargain, sell and convey unto the said part y of the second part, her heirs, successors or assigns, all that certain lot or parcel of land, situate, lying and being in Mallard Creek Township, Mecklenburg County, State of North Carolina, and more particularly described and defined as follows:

Beginning at a point in the northerly edge of State Road No. 2444 which point is located 187.78 feet measured along the said northerly edge (if extended) of S. R. No. 2444 in an easterly direction from the point of intersection of the said northerly edge of S. R. No. 2444 and the easterly edge (if extended) of Asbury Chapel Road, and running thence north 3-29-40 E. 479.11 feet to a point in the Armond B. Jordon Property running thence with the Jordon line (S. 86-26 E. 135) feet to a point; running thence S. 3-29-40E., 471.87 feet to a point in the northerly edge of S. R. No. 2444; running thence with the said northerly edge of S. R. No. 2444 two lines as follows: (1) S. 88-03 W. 5.31 feet to a point; (2) with the arc of a curve to the right having a radius of 1449.54 feet a distance of 129.04 feet to the point and place of beginning all as shown on that certain unrecorded map of a revised portion of Asbury Hills made by R. B. Pharr and Associates on the 5th day of March, 1973.

Being a portion of the property conveyed to the said parties of the first part by Lillie Mae Bridges Ritchie, et al., by deed dated October 15, 1956 and recorded in book 2181, page 589 in the Mecklenburg County Registry.

Mail to Grantee, 2526 Mallard Hill, Charlotte, N.C. 28052

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the said part y of the second part, her heirs, successors or assigns, to their only use and behoof forever.

And the said part ies of the first part for themselves, their heirs, successors, executors and administrators, covenant with the said part y of the second part, her heirs, successors and assigns, that they are seized of said premises in fee and ha ve the right to convey the same in fee simple, that the same are free and clear from all encumbrances, and that they will warrant and defend the said title to the same against the lawful claims of all persons whomsoever.

HOWEVER, there is excepted from these warranties all such valid and enforceable easements, conditions and restrictions as may appear of record and the lien of ad valorem taxes for the current year, which the grantee(s) hereby assumes and agrees to pay

IN TESTIMONY WHEREOF, The said part ies of the first part to these Presents ha ve hereunto set their hand s and seal s the day and year above written.

Signed, Sealed and Delivered in presence of

Herman M. Ferrell (Seal)
Herman M. Ferrell

(Seal)

Thelma G. Ferrell (Seal)
Thelma G. Ferrell

STATE OF ~~NORTH CAROLINA~~ FLORIDA, COUNTY OF ~~MECKLENBURG~~

I, _____, a Notary Public for said County and State, do hereby certify that Herman M. Ferrell and wife, Thelma G. Ferrell personally appeared before me this day, and acknowledged the due execution of the foregoing (or annexed) instrument.

Witness my hand and notarial seal, this 12 day of January, A. D., 19 81

My Commission Expires _____, Notary Public

STATE OF NORTH CAROLINA, COUNTY OF MECKLENBURG

The foregoing (or annexed) Certificate of _____, a Notary Public for said County and State, is certified to be correct.

This _____ day of _____

_____, Reg. of Deeds, By _____

Presented for registration _____ o'clock, _____ M., on the _____ and ver.

Drawn By: John A. McRae, Jr., Attorney

REGISTERED FEB 24 11 59 AM '81 CHARLES E. CRANDER REGISTER OF DEEDS MECKLENBURG CO., N.C.

STATE OF NORTH CAROLINA Real Estate Excise Tax FEB 24 '81 0.10-0 EBI 10709

5860A
#28078

7 MAR '16 AM 11:41

MECKLENBURG COUNTY
HEALTH DEPARTMENT

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM / WATER SUPPLY WELL

APPLICATION TYPE: (●) SEPTIC ONLY ( ) WELL ONLY ( ) SEPTIC & WELL
( ) ADDITION OR RENOVATION WITH OCCUPANCY INCREASE
(●) ADDITION OR RENOVATION WITH NO OCCUPANCY INCREASE
( ) EXCHANGE MOBILE HOME (SAME # BEDROOMS)
( ) COMMERCIAL OR INDUSTRIAL

PERSON FILING APPLICATION:
NAME: Leroy Hendricks JR
ADDRESS: 14315 Hwy NC Gunnis Rd
CITY: Huntersville
STATE: NC ZIP: 28078
PHONE: 704-726-2820
ALTERNATE PHONE: 0210314
E-MAIL: leroy@hendricks-builders.com

PROPERTY OWNER: (✓) SAME AS PERSON FILING APPLICATION
NAME: _____
ADDRESS: _____
CITY: _____
STATE: _____ ZIP: _____
PHONE: _____
ALTERNATE PHONE: _____
E-MAIL: _____

JOB LOCATION INFORMATION
TAX PARCEL #: _____
STREET ADDRESS: 14315 Hwy NC Gunnis Rd
CITY: Huntersville
STATE: NC **ZIP:** 28078

SUBDIVISION OR MOBILE HOME PARK NAME: _____
LOT #: _____

WATER SUPPLY:
(●) MUNICIPAL ( ) PRIVATE WELL ( ) PUBLIC WELL ( ) SHARED WELL ( ) OTHER _____

RESIDENTIAL PROPERTY TYPE: ( ) N/A
(●) HOUSE ( ) MODULAR HOME ( ) MULTIPLE FAMILY
( ) SINGLE MOBILE HOME ( ) DOUBLE WIDE
( ) OTHER _____

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 4/5
NUMBER OF OCCUPANTS: 3

COMMERCIAL / INDUSTRIAL PROPERTY TYPE: ( ) N/A
TYPE OF BUSINESS: _____
EMPLOYEES PER SHIFT: _____
OF SHIFTS: _____
INDUSTRIAL WASTES? ( ) YES ( ) NO
UNDERGROUND STORAGE TANKS? ( ) YES ( ) NO

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:
( ) BEDROOM ( ) BATHROOM ( ) KITCHEN ( ) DINING ROOM ( ) LIVING ROOM ( ) DEN
( ) GARAGE ( ) SUNROOM ( ) PORCH ( ) DECK ( ) OTHER _____

ADDITION/RENOVATION TYPE DETACHED FROM EXISTING STRUCTURE:
( ) DETACHED GARAGE ( ) DETACHED GARAGE WITH PLUMBING ( ) POOL HOUSE ( ) SHOP ( ) BARN
( ) STORAGE SHED ( ) DETACHED PORCH / DECK (●) 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 the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Leroy Hendricks — 3-7-16
Owner's/Agent's Signature — Date

A PROPOSED PLOT PLAN (see page 2) is required to be submitted with each application.

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

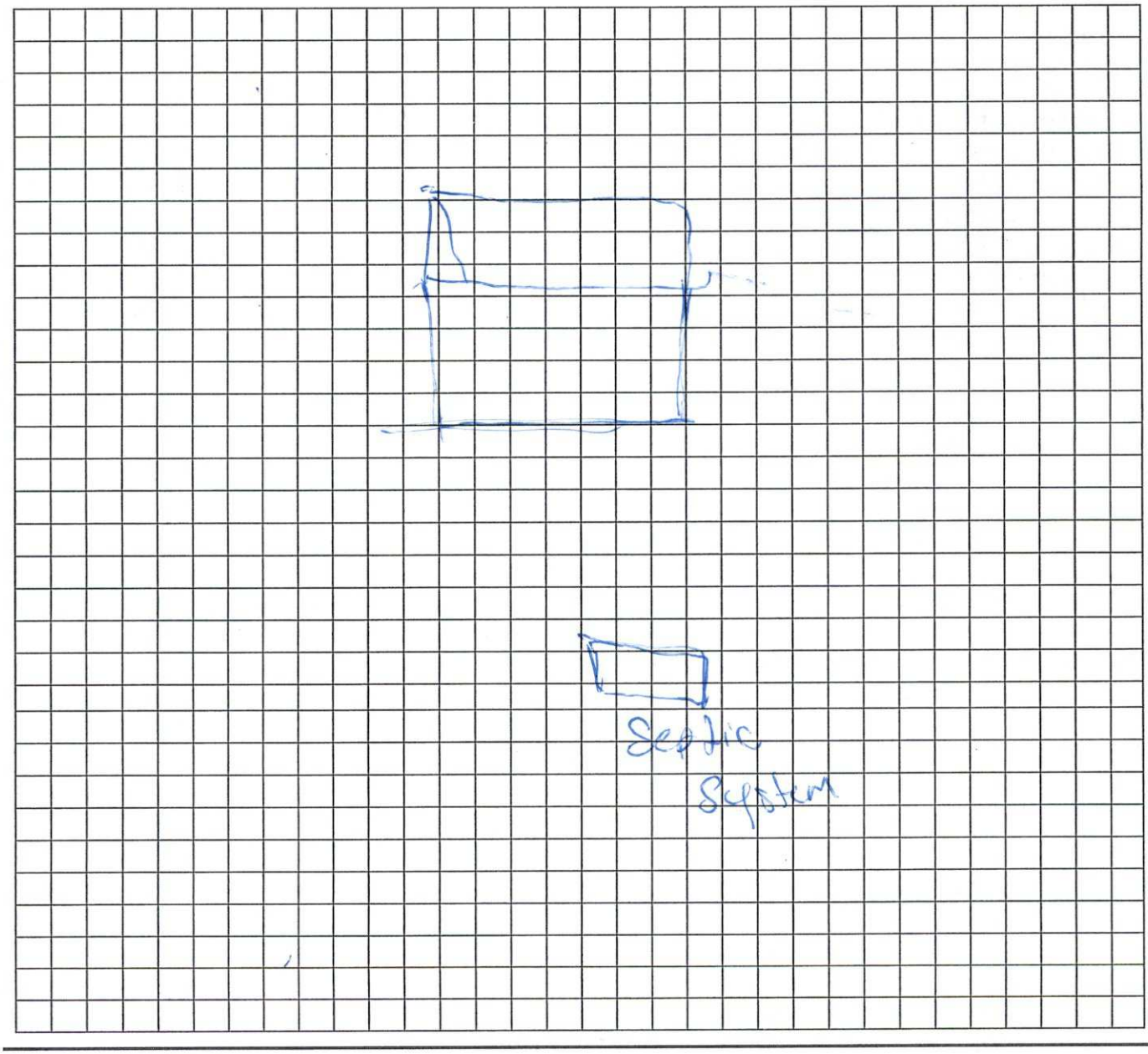
Revised on: 01/03/11

File #: _____

PROPOSED PLOT PLAN

A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

Street Address: 1435 Hwy McCunnis RD Tax Parcel #: _____



*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 and Water Supply Wells 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.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

_____

_____

_____ _____

REHS Signature Date

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

Revised on: 01/03/11

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 03/07/16
Receipt #: 99310
Check / Auth #: MC 151694
Received By: ELLISLW

Amount: 100.00
Tendered: 100.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: HENDRICKS JR, LEROY
Attn:
Address: 8539 SUTTON VIEW DR
Address:
City/State/Zip: CHARLOTTE, NC 28269

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	Use Existing System 14315 HUS MCGINNIS RD		1	100.00	100.00

----------Outstanding Balances----------

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
730.00	130.00				

Supervisor/Administrative Professional Checklist

New Septic ☐ New Well ☐ Use Existing ☑ Alteration ☐ Modified Plot Plan ☐

New Septic Fees Paid:

IP ($250.00) _____ Initials/Date

CA ($200.00) _____ Initials/Date

OP ($200.00) _____ Initials/Date

(CA and OP fees need to be paid before a building permit can be issued)

New Well Fee Paid: $550.00 _____ Initials/Date

Use Existing Fee Paid: $100.00 LE 3/7/16 Initials/Date

Alteration Fee Paid: $300.00 (Total) $200 (If use existing was paid)_____ Initials/Date

Modified Plot Plan Fee Paid: $100.00 _____ Initials/Date

Floor plans need to be submitted and reviewed before CA can be issued. ☐ Reviewed ☐ ____

This site is served by septic and well. Verify each is complete before final hold is released. ☐

Septic file completed. ☐ _____ Well file completed. ☐ _____

Send permit for signature. ☐ Signature received. ☐ _____

This septic system requires a certified operator contract before final hold is released. ☐

Certified operator contract is on file. ☐ _____