

11928 RAMAH CHURCH RD

01926407

6/6/2007

duponbj

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

Mecklenburg County
Health Department

October 31, 1994

Mr. Al Rusak
201 Post Oak Road
Charlotte, NC 28270

Post-it® Fax Note 7671	Date 1-9-04	# of pages ▶
To Sherry Moore	From T. Aidoo	
Co./Dept.	Co. Meck County	
Phone #	Phone # 336-5103	
Fax #	Fax # 336-6594	

Re: 11928 Ramah Church Road
File: 5873A
Parcel: 019-262-16

Dear Mr. Rusak:

Receipt of the plans and specifications for a conventional system of sewage treatment and disposal for the above property is hereby acknowledged. 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 (see enclosed soil report):

1- The available area on this site is classified as **UNSUITABLE** according to the following rules:

(a) .1941 Soil Characteristics (Morphology)
(b) .1942 Soil Wetness Conditions
(c) .1943 Soil Depth

For these reasons, the plans as submitted are disapproved. This Department is not aware of any site modifications or alternative systems that would allow for the issuance of an Improvement Permit for a wastewater treatment and disposal system on this property.

However, 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 the 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.

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

You also have the right to an informal review with this Department, you have the right to appeal under G.S. 130A-24 through the State Office of Administrative Hearings (OAH), and to have the appeal held in Mecklenburg County.

If the proposed warehouse building is not required to have any running water for handsinks, then you may wish to consider a non-ground absorption sewage treatment system. Enclosed is a copy of Rule .1958. If you would like additional information concerning any of these types of toilets please contact me at 336-5569.

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

cc: Mr. William Marlin, Soil Scientist
Ms. Teresa Vickers, property owner

Enclosure

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 20479

File: 58 73A

Action 3

Parcel: 019-262-16

☐ PC

Location: 11929 Ramah Ch. Road

Subdivision:

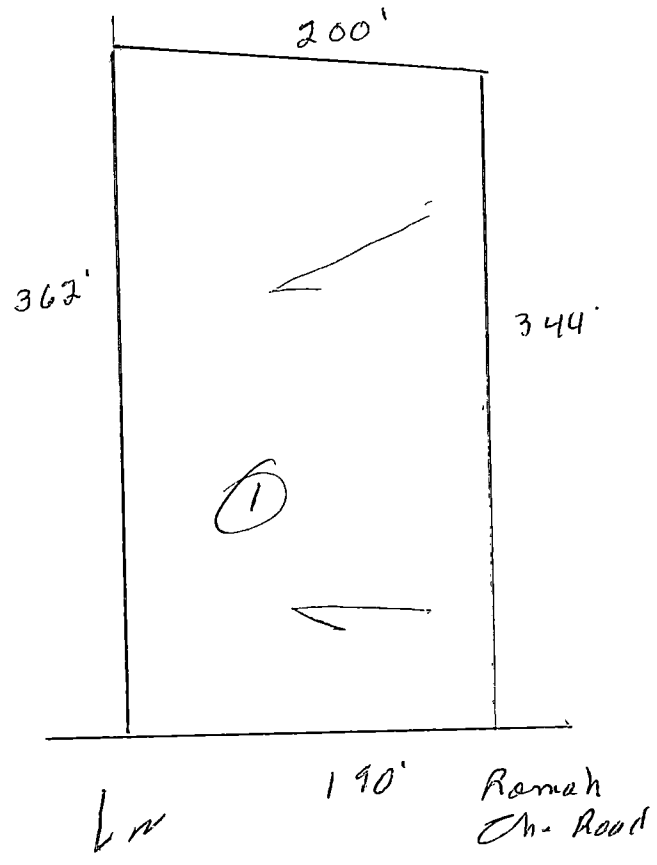
Lot: Block: Acres: 1.5

Owner: Teresa Vickers
Address: PO Box 611
Denver, N.C. 28037

Comments: _____

Described by: William R. Mullis

Date: 9-27-94



*** EVALUATION KEY ***

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	(S) PS U 2-6%	S PS U	S PS U	S PS U	S PS U	S PS U
Texture	S PS (U) Ex passive clay	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Lt Sub L Blocky	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S PS (U) Some perched water-24-36"	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S PS (U) 24-36"	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	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	Enon/ Helena					
Area Classification	S PS (U)	S PS U	S PS U	S PS U	S PS U	S PS U

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

☐ CRT

5873A

Pd #150 9/9/94 ck #2148

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

Date:

PERSON FILING APPLICATION:
NAME: Rusak Al (last) (first) (mi)
ADDRESS: 201 Post Oak Rd PHONE: (704) 334-2247
CITY: Charlotte STATE: NC ZIPCODE: 28270

PROPERTY OWNER:
NAME: Teresa Vickers (first) (last) (mi)
PO Box 611 Denver N.C. 28037
ADDRESS: 11928 Ranch Rd PHONE: (___) _____
CITY: Huntersville STATE: NC ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 019-262-16
STREET ADDRESS: 11928 Ranch Church Rd
ZONING:

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

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: LOT SIZE (in acres):

TYPE APPLICATION (check one):
☒ 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: NUMBER OCCUPANTS:

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business Warehouse # Employees 2 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: _____ Date: Sep 9, 1994

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

_____ Date
Environmentalist

_____ Date
Director or Authorized Section Head

WWATER : 1227

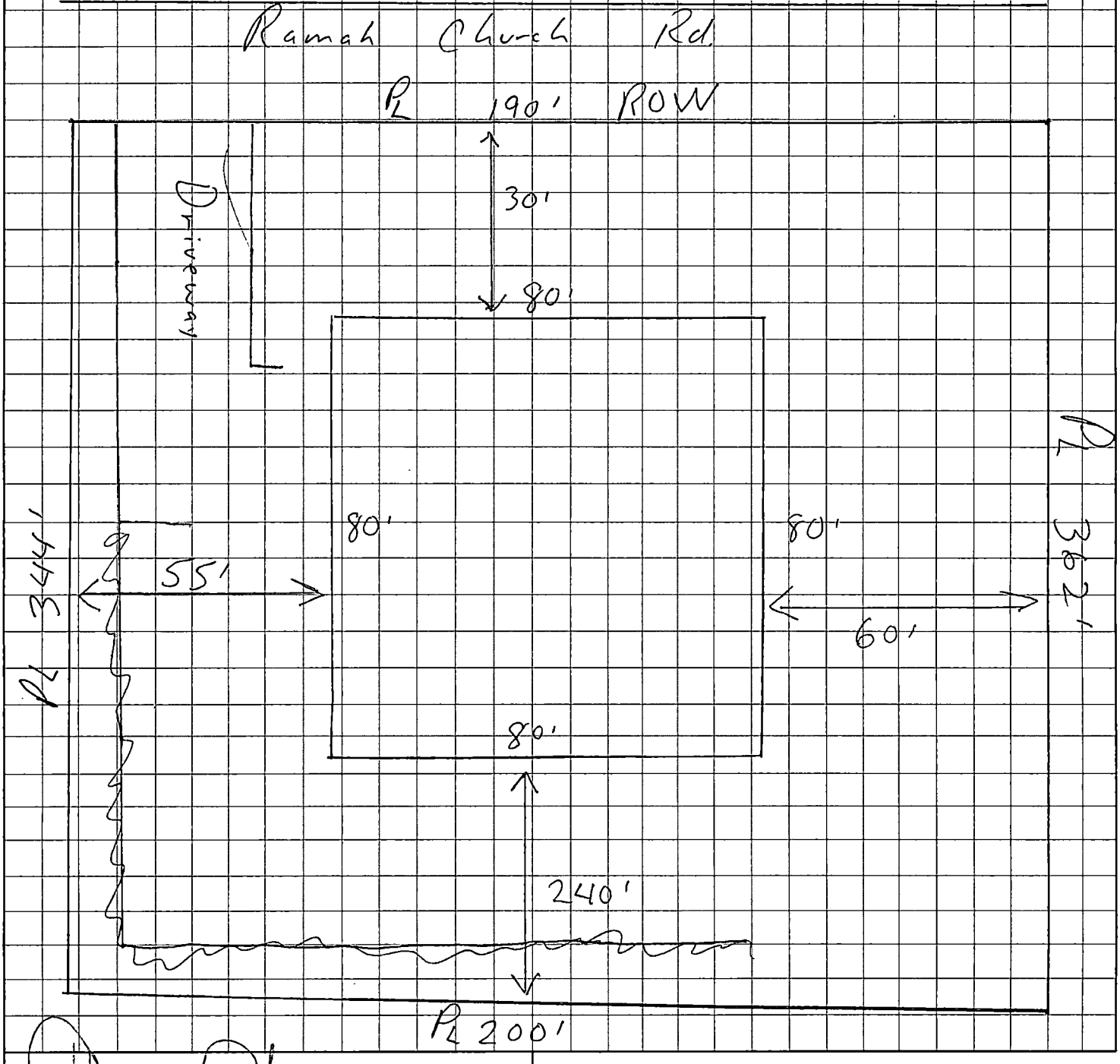
PROPOSED PLOT PLAN

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

FILE: SP73A

TC: 019-162-16

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.

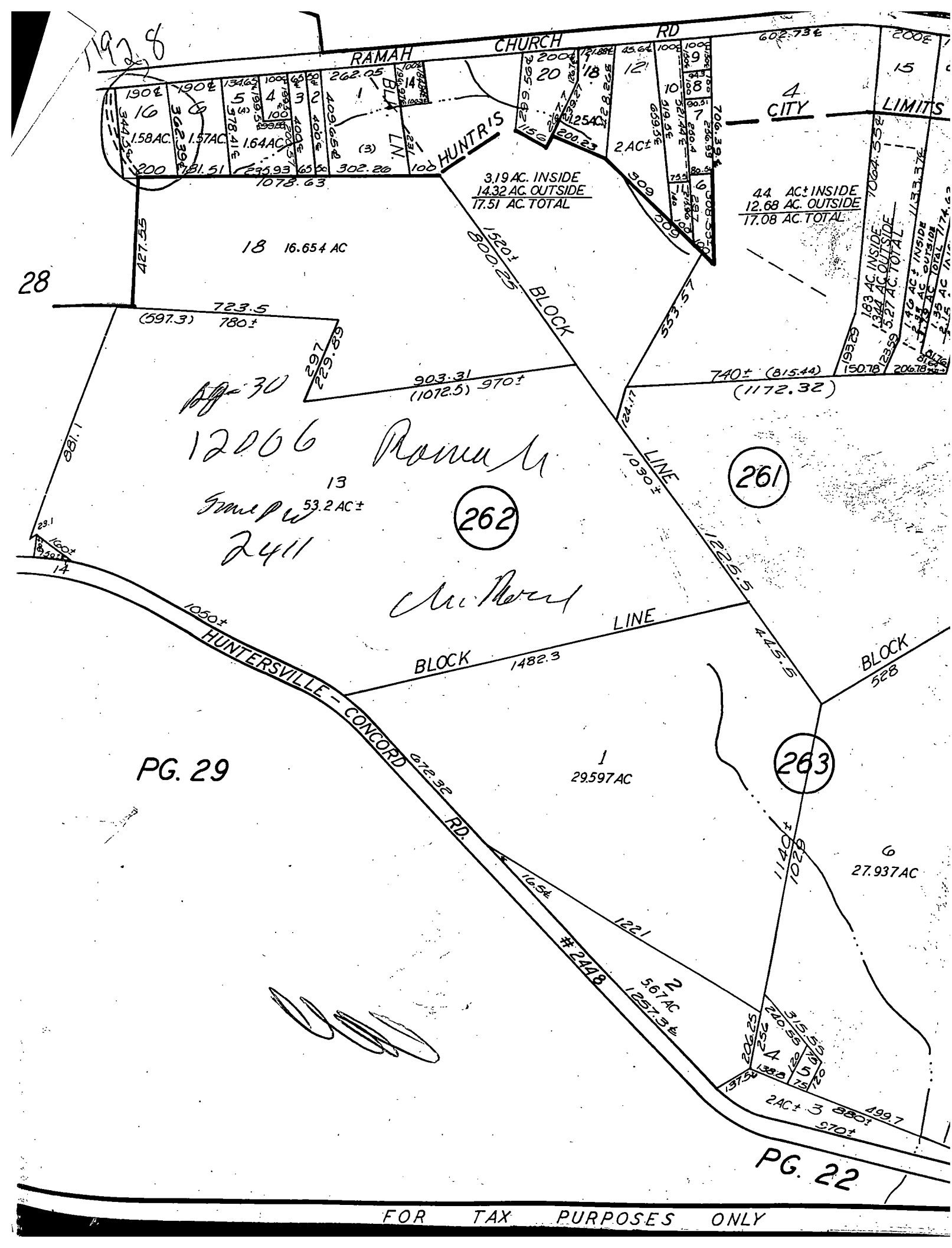


OWNER/AGENT SIGNATURE

DATE Sept 1994

APPROVAL DATE _____

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy


1928
RAMAH CHURCH RD
CITY LIMITS
HUNTRIS LN.
BLK
HUNTRIS
3.19 AC. INSIDE
14.32 AC. OUTSIDE
17.51 AC. TOTAL
44 AC± INSIDE
12.68 AC. OUTSIDE
17.08 AC. TOTAL
1.58 AC.
1.57 AC.
1.64 AC.
2 AC±
1.25 AC
16.654 AC
18
28
BLOCK
LINE
1520±
800.25
903.31
(1072.5) 970±
740± (815.44)
(1172.32)
1030±
1226.5
1482.3
445.5
528
261
262
263
53.2 AC±
13
12066
2411
1050±
HUNTERSVILLE - CONCORD RD.
#2448
672.32
1140±
1028
29.597 AC
27.937 AC
5.67 AC
1257.3±
2 AC±
3
880±
970±
PG. 29
PG. 22
FOR TAX PURPOSES ONLY

Mecklenburg County
Health Department

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

July 13th, 1989

Teresa Mary Vickers Whitlow
7477 Lynwood Lane
Sherrills Ford, NC 28673

RE: Property located at Ramah Church Road
FILE: 5873A
PARCEL: 01926216

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 16248) 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 16248

File: 5873A

Parcel: 01926216

Action 2

☐ PC

Location: Ramah Church Road

Subdivision:

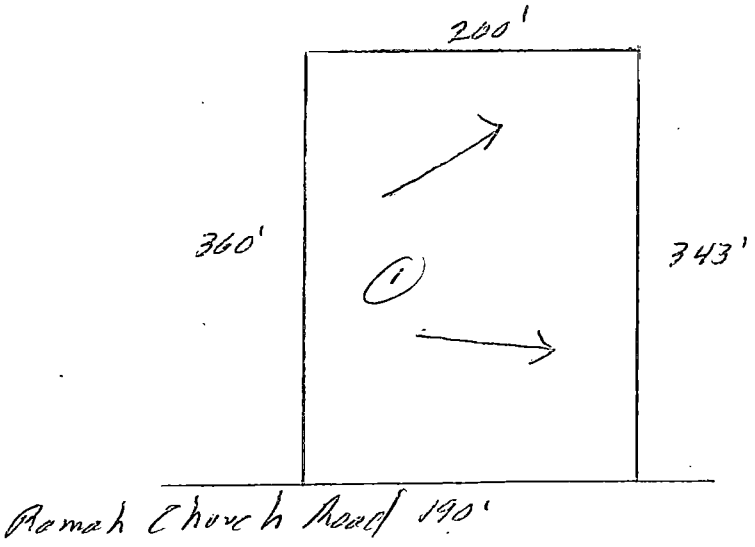
Lot: Block: Acres: 1.57

Owner: Teresa Mary Vickers Whitlow
Address: 7477 Lynwood Lane
Sherrills Ford, NC 28673

Comments: _____

Described by: William R. Marbi

Date: 7-13-89



***** 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	S PS U	S PS U	S PS U	S PS U
Texture	S PS (U) 2-1c loam	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 7-36" To water	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S PS (U) 20-36"	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 7-36"	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	10B Mecklenburg 2-6%					
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.
JUL [illegible]
ENVIRONMENTAL HEALTH
DIVISION

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

(OFFICE USE ONLY)

FILE: 5873A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: RAMAH CHURCH RD

② SUBDIVISION: NONE ③ LOT: NONE ④ BLOCK: NONE

⑤ PARCEL REFERENCE: BOOK NO.: 019 PAGE NO.: 262 PARCEL NO.: 16

⑥ DEED REFERENCE: BOOK NO.: 4654 PAGE NO.: 788

OWNER

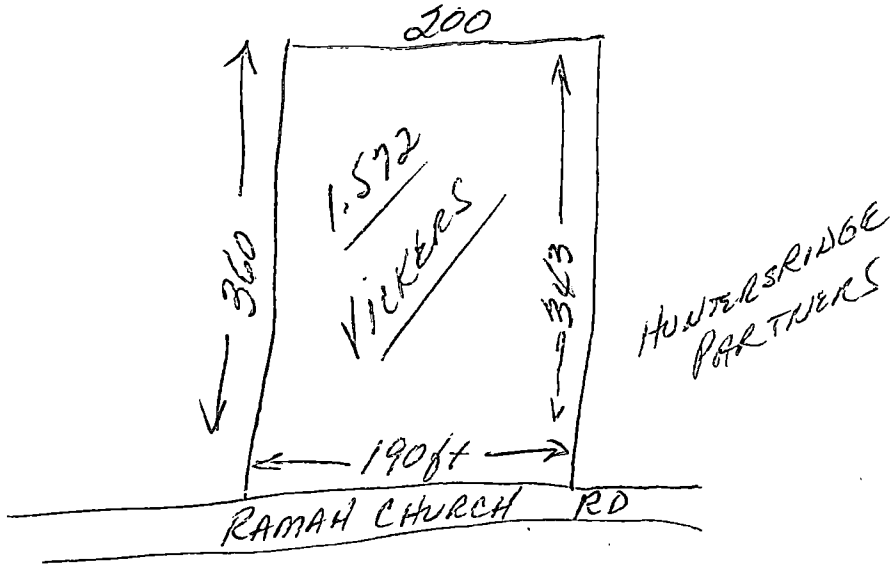
⑦ NAME: TERESA (FIRST) MARIE (MIDDLE) VICKERS WHITLOW (LAST)

⑧ MAILING ADDRESS: C/O BETTY TABLE 7477 Lynwood LANE

⑨ CITY: Sherrills Ford ⑩ STATE: NC ⑪ ZIP: 28673

⑫ PHONE: (WORK) 892-1886 (HOME) 4834863

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: Teresa Vickers Whitlow

Date: June 30 1989

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 7/3/89

Name/Company Betty J. Dale

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: coil test
#5873A

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

JUL 3 1989

cost 7.46
4.45.00

Fee: $ 45 —

Collector