

8210 JEFFERSON COLONY RD

13901521

6/5/08

marliwr

Groundwater and Wastewater Services File Imaging Project
May 2007
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FEE: $ N/A

DATE: _____

APPLICATION FOR IMPROVEMENT PERMIT FOR RESIDENTIAL SITE INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM

( ) CRT

TYPE APPLICATION: ___ NEW SYSTEM ___ EXPANSION/ ALTERATION OF EXISTING SYSTEM ✓ REPAIR OF EXISTING SYSTEM

NORTH CAROLINA
DEPARTMENT OF ENVIRONMENT,
HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

FILE #: 8343

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 137-012-01

STREET ADDRESS: 8210 Jefferson Colony Rd

SUBDIVISION OR MOBILE HOME PARK NAME: Jefferson Colony

LOT NUMBER: 21, Block D

TOWNSHIP (CHECK ONE):

___ 0 MECKLENBURG ___ 4 PINEVILLE
___ 1 CHARLOTTE ___ 5 MATTHEWS
___ 2 DAVIDSON ___ 6 HUNTERSVILLE
___ 3 CORNELIUS ✓ 7 MINT HILL

TYPE OF BUILDING (CHECK ONE):

___ SINGLE MOBILE HOME(S) ___ MODULAR HOME (M)
___ DOUBLE WIDE (D) ___ MULTIPLE FAMILY (U)
✓ HOUSE (H) ___ OTHER (O)

HEATED SQUARE FOOTAGE:

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 4

FOUNDATION FOR RESIDENCE:

___ WITHOUT BASEMENT ON SLAB
✓ CRAWL SPACE
___ WITH BASEMENT /PLUMBING
___ WITH BASEMENT /NO PLUMBING

3/13/96 met (B. Howell Grading) on lot. Damp spot located on back of lot. Plumbing for washer line had been disconnected and plumbed to tank when house renovated. Advised client to re-plumb washer line and ~~retank~~ recheck system in 60 days.

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION: Estimated repair of 200' bed system 9'wd x 67'long x 18" stone PSW

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: ___ YES ✓ NO TYPE: _____

WATER SUPPLY (CHECK ONE):
___ COMMUNITY (C) ___ MUNICIPAL (M) ✓ PRIVATE WELL (P)
___ SHARED WELL (S) ___ OTHER (SPRINGS) (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES ✓ YES ___ NO
EXISTING WASTEWATER SYSTEMS ___ YES ___ NO
EASTMENTS OR RIGHT-OF-WAYS ___ YES ___ NO
WELL, SPRINGS OR WATERLINES ✓ YES ___ NO
DESIGNATED WETLANDS ___ YES ___ NO

PROPERTY OWNER:	LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:
NAME: Schongkas Russell J (LAST) (FIRST) (MI)	NAME: (LAST) (FIRST) (MI)
ADDRESS: 8210 Jefferson Colony Road	DAYTIME PHONE: ( ) -
CITY: Charlotte STATE: NC ZIP: 28227	
DAYTIME PHONE: (704 545-9001	

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 1/9/87

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. 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: Russell J Schongkas Jr DATE: 3/6/96

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102

Serial No.

Date Issued 6 DEC 74

ICARIS Permit No. 2342
T C No. 257-16
Map Date 4-18-80

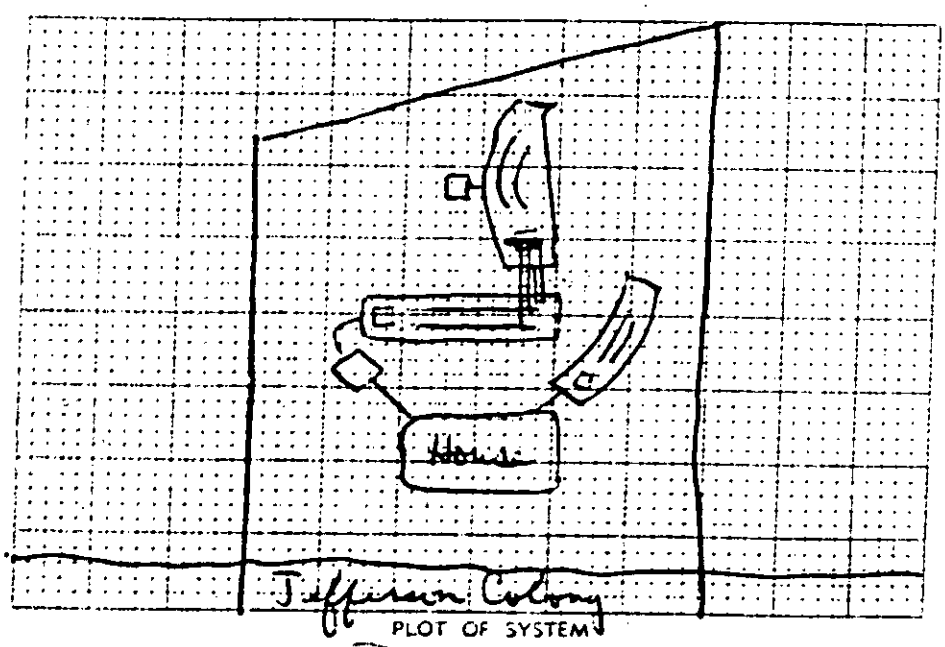
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT

(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge:

Permission is hereby given to ✓ Install or Construct, __ Alter or Repair the individual septic tank wa water treatment system with subsurface, soil absorption, effluent discharge as specified hereon at the scribed location. This permit is granted based upon the information supplied in application E 343 dated 11-4-74 and this permit shall be void and of no effect if the information provided in the plication is not true or is erroneous. All work shall be completed on or before 6 JAN. 75 after wh date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 1500

Tank Construction PC

Absorption and/or Nitrification Lines

Total Line Length 600, 150

Number of Lines 2 (6) 36' x 15' x 2
64' x 15' x 2

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER RALPH SQUIRES

LOCATION OF PROPERTY 8216 JEFFERSON COUNTY RD

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

Comments: WAGNER LINE 37½' x 10' x 17"
- The septic tank nitrification fields connected by stipulation, 3 "T"s in each, Aeration pit (2½' x 4' x 7')
or 6 "T"s in one, dist box. in 2nd.

Division or Section Head

Paul A. Kiefer
Environmentalist

If this permit is for the installation or construction of a new system, it must be signed by the division or section head of the Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

E-5-9-1-72

Cat A (s) No 2343

Serial No. 5539

T C No. 139-011-36

Date Issued 11 Dec 74

Map Date 4-19-74

DATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner SQUIRES (LAST) RALPH (FIRST) (MIDDLE)

Location of Property 8210 JEFFERSON COLONY RD

Application Number 8343

Permit Number 8343

Inspection Data:

Liquid Capacity of Tank 1500 gal

Total Length of Drain Tile 60, 150

Depth of Filter Material 17"

Water Supply Source private well

Excavation Inspected 11 DEC 74 (DATE)

Nitrification Field Inspected 11 DEC 74 (DATE)

Washing Machine Line Inspected, If Applicable 11 DEC 74 (DATE)

Tank Material PC

Number of Lines 2 @ 36' x 15' x 17"

~~24' x 15' x 17"~~

Cover Depth 24"

Distance from Water Source 100'

Tank Inspected 11 DEC 74 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been ✓ installed or constructed, altered or repaired in accordance with the permit issued and the regulations of the Mecklenburg County Board of Health in effect on the date of issuance of the permit. The issuance of this Certificate of Approval does not in any way guarantee that the system will operate properly or relieve any person now or hereafter owning, controlling, or using such system from any liability resulting from the failure of the system to operate properly. This Certificate of Approval is issued subject to those restrictions and conditions shown on the permit or in addition to those listed below under comments. This Certificate of Approval shall be null and void if any information contained in the application is untrue or if any additions are made to the property which would increase the requirements for said system.

Comments: WASHER LINE 37½' x 15' x 17"

AERATION PIT ADEQUATE

Paul A Kiefer

Environmentalist

FORM NO E-6-9-1-72

HEALTH DEPARTMENT'S COPY

Fax 366-6874

Cambridge Realty, Inc.

Fax

Date: 3-6-96

To: Farlow Walker

From: Vee Proctor (Fax 545-0281)

Number of Pages: 4

(If you do not receive all pages of this fax, call 545-9700)

Message: Farlow, Here is the app. for 8210 Jefferson Colony. Please let me know when you're going out. Thanks Vee (VM 582-0932)

Mecklenburg County
Health Department

Dear Sir/Madam:

A request for repair to your septic system has come to our attention.

In addition to the enclosed application form, there is information that we will need in order to assist us in determining the best means of repair to your system.

Please supply the following information, if possible, along with your completed, signed, and dated application:

1) Tax number (account number from tax bill). 13901521001

2) Provide the name of the original property owner. Donald Ratliff

3) Do you have visible sewage on the surface of the ground? No

4) Is septic water backing up into the house -- gurgling pipes and/or slow draining toilets, etc? No

5) Is there a separate wastewater line from your washing machine? ? Dishwasher? ?

6) Has your septic tank ever been pumped out? If so, approximately when? Not in last 9 years

7) Has there been any other type of maintenance or repair done to your system? If so, what was done, and approximately when? Not in last 9 years

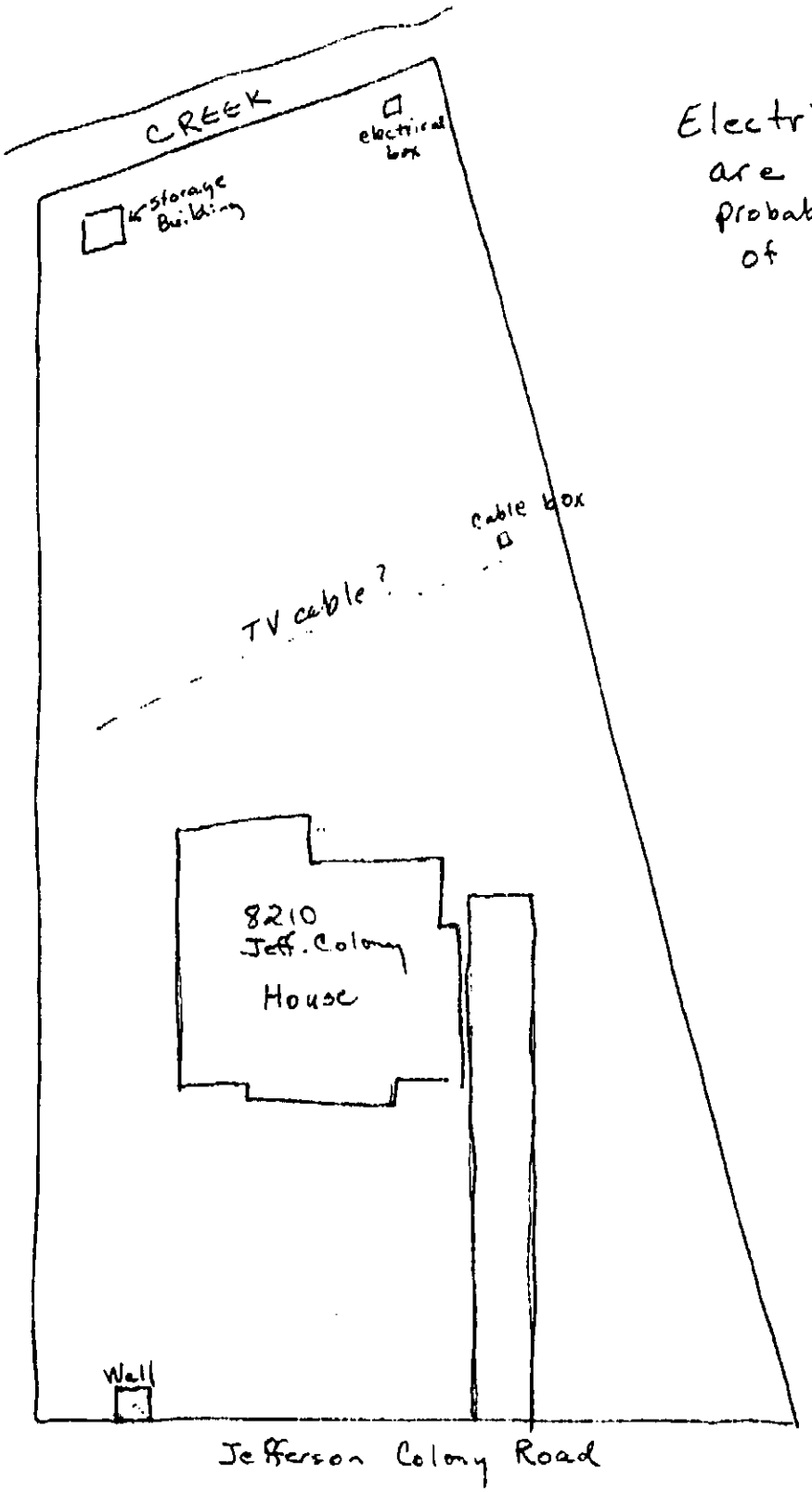
8) Approximately what year was your septic system installed? 1974

9) Have you had any other plumbing leaks (dripping faucets/leaking toilets, etc)? tub faucet drips

Upon receipt of your repair application, an Environmental Health Specialist will contact you to discuss your septic problem. If it is determined that a repair to the system is needed, you will need to contact a registered septic contractor -- if you do not know of one, check the yellow pages of your telephone directory. The contractor will, in return, contact our office to set up an appointment with an Environmental Health Specialist to meet with you on the site to assess the problem and make arrangements to repair the septic system if necessary.

By complying with our requests and supplying the needed information in its entirety, you will be helping us to serve you as quickly as possible.

Should you have questions concerning the requested information, please feel free to call us at 336-5102.



Electric lines are buried - probably at back of lot