Date Received 10-25-83

COUNTY DEPARTMENT OF
RECEIVED
OCT 24 1983

SIR No. 3218

T. C. No. P.O. 017-232-02

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Donco Properties, Inc.
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER 1720 E. Independence Blvd. Charlotte ZIP 28205

3) PHONE NO. Home _____ Office 377-6549

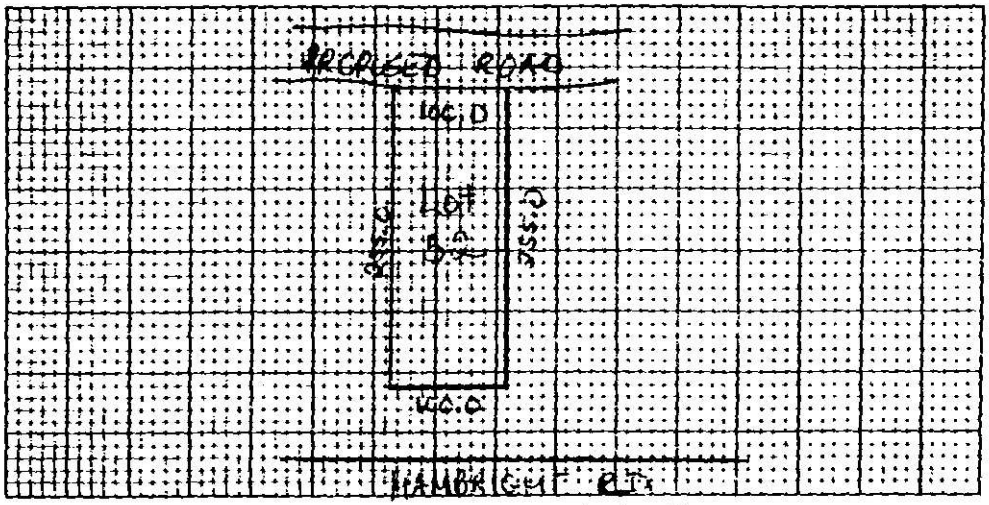
4) LOCATION OF PROPERTY Hambright Road
(STREET OR COUNTY ROAD)

5) SUBDIVISION Yorkdale LOT NO. 52 BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. _____

6) DEED REFERENCE. DEED BOOK _____ PAGE NO. _____

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation and an on site inspection of the lot hereinabove described for the purpose of determining if the lot is suitable for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge



7) ACCURATELY DIAGRAM & DIMENSION LOT

Assistant Secretary

EHD-5-74

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 5318

SIR No. 20218

T. C. No. PO 017-232-02

Date Issued 11-4-83

Map Date

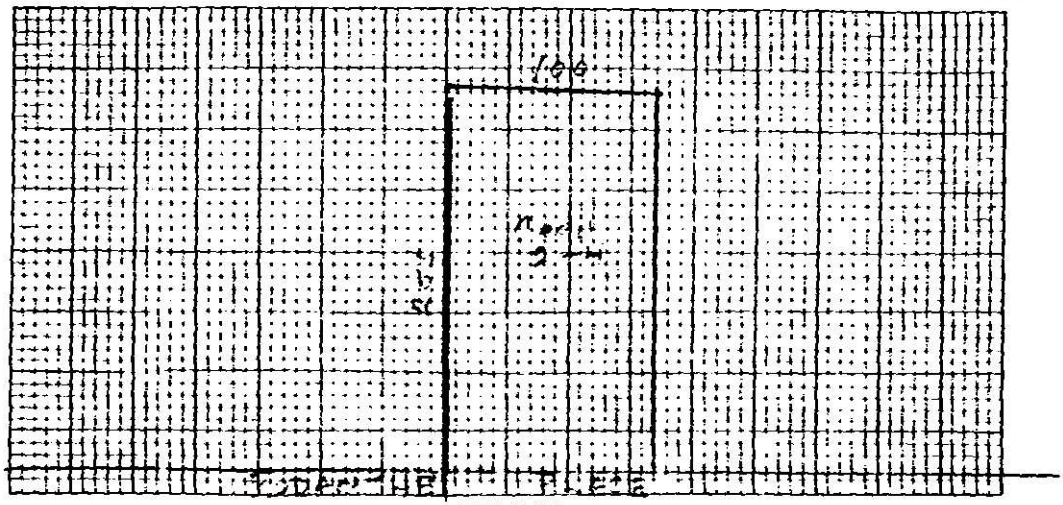
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Donco Properties, Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER 1720 E. Independence Blvd. ZIP 28205

LOCATION OF PROPERTY Rodanthe Place
STREET OR COUNTY ROAD

SUBDIVISION LOT NO. 52 BLOCK NO.



PLOT PLAN

This is to certify that a soil investigation and on-site investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The said investigation was conducted on that portion of the lot as indicated on the above plot. The permeability rate determined by the investigation was provisionally suitable. The said lot is approved for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption effluent discharge subject to the following terms and conditions.

1. A permit to install, construct, alter, or repair the specific system shall be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction of buildings, or of the wastewater treatment system on the said lot.
2. The size of the septic tank wastewater treatment system which must be installed will be determined by the Mecklenburg County Department of Environmental Health prior to installation based on the permeability rate obtained above, and on the size and type of building constructed thereon.
3. This approval is valid only if the system is installed in the immediate area indicated as acceptable for system installation on the above plot.
4. This approval is void if any grading, filling or construction, including the drilling of a well, is performed on the lot which, in the opinion of the Mecklenburg County Department of Environmental Health, renders the area indicated as acceptable for system installation unsuitable for installation, construction, alteration and/or repair of such a system.

This approval is granted based on the laws of the State of North Carolina and the rules and regulations of the North Carolina Department of Human Resources, Division of Health Services and the Mecklenburg County Health Commission which were in effect on the date of issuance and is void if at any time in the future, prior to completion of the system, these laws, rules and regulations are changed such that this approval would not have been granted had the new or revised laws, rules, and regulations been in effect on the issue date.

W. B. [illegible]
Soil Scientist
EHD-5-76

Bill D. Hardester
Environmental Health Director or
Authorized Section Head

Environmental Health Department's Copy

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 2018

T.C. NO. PO 017-238-02

(Ground Absorption Sewage Disposal)

OWNER: Donco Properties Inc. PLAT NO:
ADDRESS: 1720 E. Independence Blvd 28205 LOT SIZE: 25500 .59
LOCATION OF SITE: Rodanthe Place
Lot 52

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)*	S (2-4) PS U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (Clayey) PS U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (Blocky) PS U	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (40-48) PS U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (None) PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (Adequate) PS U	S PS U	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IIa			
9. SITE CLASSIFICATION	P. Suitable			
10. SOIL SERIES	Cecil			

S - Suitable PS - Provisionally Suitable U - Unsuitable

**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: W. B. Ramsey
Title: Soil Scientist

Date: 11-2-83

EHD 539 (Revised: 6/82)

255
100
Ceal
2-4
PALANTHE PLACE

Serial No. 6895

Date Issued 1-18-94

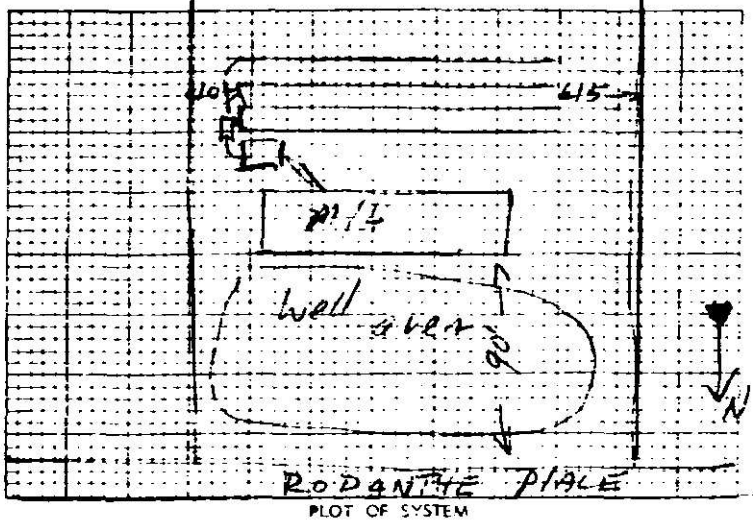
ICAR(S) Permit No. 20218

T C No. 017-232

Map Date

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

Permission is hereby given to X Install or Construct, ___Alter or Repair the individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge as specified herein at the described location. This permit is granted based upon the information supplied in application 20218, dated 1-11-94 and this permit shall be void and of no effect if the information provided in the application is not true or is erroneous. All work shall be completed on or before FEB 20TH 1994, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS IVA

Liquid Capacity of Tank 1500 gal

Tank Construction Pre Cast Low

Absorption and/or Nitrification Lines

Total Line Length 300 LIN FT

Number of Lines Four

Distance from House 10 FT

Distance from Property Line 1 KEEP 100 FT

Distance from Well NOT IN YRT

NAME OF OWNER STRAWN, HUBERT Lot #52

LOCATION OF PROPERTY 9724 RODANTHE PLACE

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Health Commission which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Environmental Health Director before any system can be covered up or otherwise rendered uninspectable or can be used. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed will operate properly, or relieve any person now or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

Comments: FOUR Trenches To be 75 FT x 3 FT x 12 inches STONE - Hot or Stone COVER - grade D's - plumb w/ line into DUST Pan

Division or Section Head

Ralph Wilkie
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 Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

C of A (s) No. 20218

Date Issued 3-15-84 **Serial** 6443 T. C. No. T.0017-~~239-02~~ 301-09

CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF COMPLETION

CERTIFICATE OF APPROVAL

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

Name of Owner Strawn (LAST) Hubert (FIRST) _____ (MIDDLE)

Location of Property 9724 Rodanthe Place

Application Number 20218 Permit Number 20218

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material Precast

Total Length of Drain Tile 300 Number of Lines 4

Depth of Filter Material 12 Cover Depth 12

Water Supply Source Well Distance from Water Source 100

Excavation Inspected 3-15-84 (DATE) Tank Inspected 3-14-84 (DATE)

Nitrification Field Inspected 3-15-84 (DATE)

Washing Machine Line Inspected, If Applicable NA (DATE)

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

Comments _____

Willard Ramsey
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

BL 1-9-84

Serial No. 7125

SIR No. 20218

Date Issued 1-12-84

T. C. No. PO 017-222-02

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Strawn, (LAST) Hubert (FIRST) L. (MIDDLE)

ADDRESS OF OWNER 2300 Dion Ave., Charlotte, NC ZIP 28212

LOCATION OF LOT 9724 Rodanthe Place (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. 52 BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. _____

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, on an on-site inspection of the said lot; and upon the information supplied in the "Application for an Installation, Construction, Alteration, and/or Repair Permit", number 20218. This approval is subject to the following terms and conditions:

1. That the nitrification field be installed, constructed, altered and/or repaired in the same area where the soil investigation was run.
2. That an "Installation, Construction, Alteration, and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altered, and/or repaired and that the system be installed in accordance with same.

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

Ralph Mills
Environmentalist

David D. Hawkins Jr.
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Received 1-11-84

RECEIVED
JAN 11 '84
ENVIRONMENTAL HEALTH

ICAR 6) Application No. 20218

T. C. No. PO 017-232 -02

Map Date

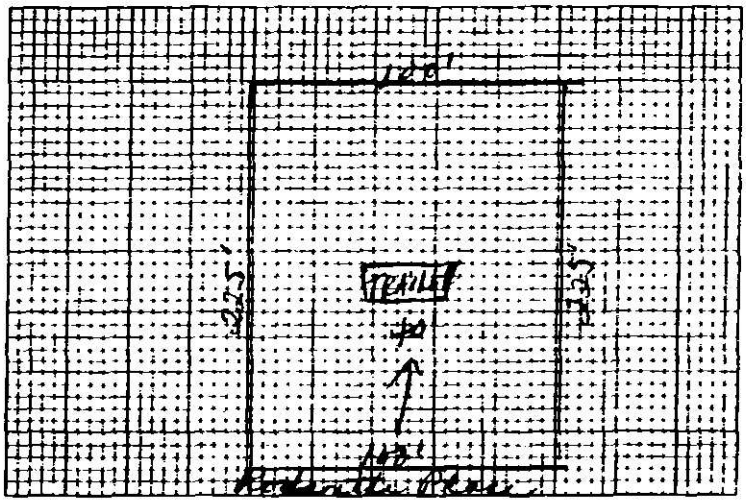
MOBILE HOME

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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

The owner of that property described hereinafter hereby applies to the Mecklenburg County Department of Environmental Health for a permit to:

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



3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home X Yes No
Residence Yes No

4) No. of Bedrooms 3
5) Business Use — Max No Employees
6) Washing Machine X Yes No
7) Garbage Disposal X Yes No
8) Dishwasher X Yes No
9) Water Supply
A) Individual Well X
B) Governmental System
C) Community System
1 Well source
2 Governmental source
10) Sewage System
House located within 200 feet of public sewer Yes X No
House located within 200 feet of community sewer Yes X No
11) FHA Case No.
12) VA Case No.

13) NAME OF OWNER Strawn, (LAST) Hubert (FIRST) L. (MIDDLE)

14) ADDRESS OF OWNER 2300 Dion Ave., Charlotte, NC 28212

15) PHONE NO. Home 537-3177 Office

16) LOCATION OF SYSTEM 9724 Rodanthe Place (STREET OR COUNTY ROAD)

17) SUBDIVISION Lot No. 52 Block No.

Map Book No. Page No.

18) DEED REFERENCE — DEED BOOK AT PAGE

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES NO DATE RUN 11/83 PS

20) PTR NUMBER (See Instructions) 28218

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

1-11-84
DATE OF APPLICATION

H. L. Strawn
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Mecklenburg County

Department Of Building Standards And Code Enforcement

P. O. Box 31097

Charlotte, North Carolina 28231-1097

Environmental Health Department
1200 Blythe Boulevard
Charlotte, North Carolina 28203

Attention: Mr. Sexton

Subject: Mobile Home Placement

Dear Mr. Sexton:

The parcel of land located at 9724 Rodanthe PL and further identified by tax parcel number 017232.02 pt of is zoned R-11 (_____).

Permitted uses in this district include: Mobile Homes

If this office can be of further assistance, please contact us.

Sincerely,

J C McCoy

Zoning Inspector

Form B-152 NS
59/bbb

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: 20218

TC: 017-232-02

SERIAL: № 19844 ☐ L ☒ CRT

JOB LOCATION

① ADDRESS: 9724 (STREET NO) Rodanthe (STREET) Place ② FILE: 20218

③ JURISDICTION: Mecklenburg ④ TAX PARCEL NO.: 01723202

⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: Chris (FIRST) Damon (MIDDLE) Strawn (LAST)

⑨ MAILING ADDRESS: 9724 Rodanthe Place

⑩ CITY: Huntersville ⑪ STATE: NC ⑫ ZIP: 28078

⑬ PHONE: (~~WORK~~ Mobile) 827 3971 ⑭ (HOME) 875 9781

REQUEST

This request is for a(n):

⑮ ☐ New permit ⑰ ☒ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify)

DESIGN CRITERIA

System will serve:

⑲ ☐ Residence ⑳ ☒ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 4 3 C.D.S. ㉕ Type?

㉓ Maximum occupancy? 5 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: Chris D. Strawn

Date: 6-15-90

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 3[illegible] months from the date of issuance. Use existing [illegible]

[illegible] R.C. 6/[illegible]

Environmentalist Date

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.

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 6-15-90

Name/Company: Chris Strawn

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Apply to Impt Permit MH/Exchg - Tab 20218

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

JUN 15 1990

Fee: $ 25.00 Cash $25.00

NOTICE:

A processing fee of $15.00 will be charged for all returned checks in accordance with N.C. General Statute 25-3-512.

Completed by

Collected by

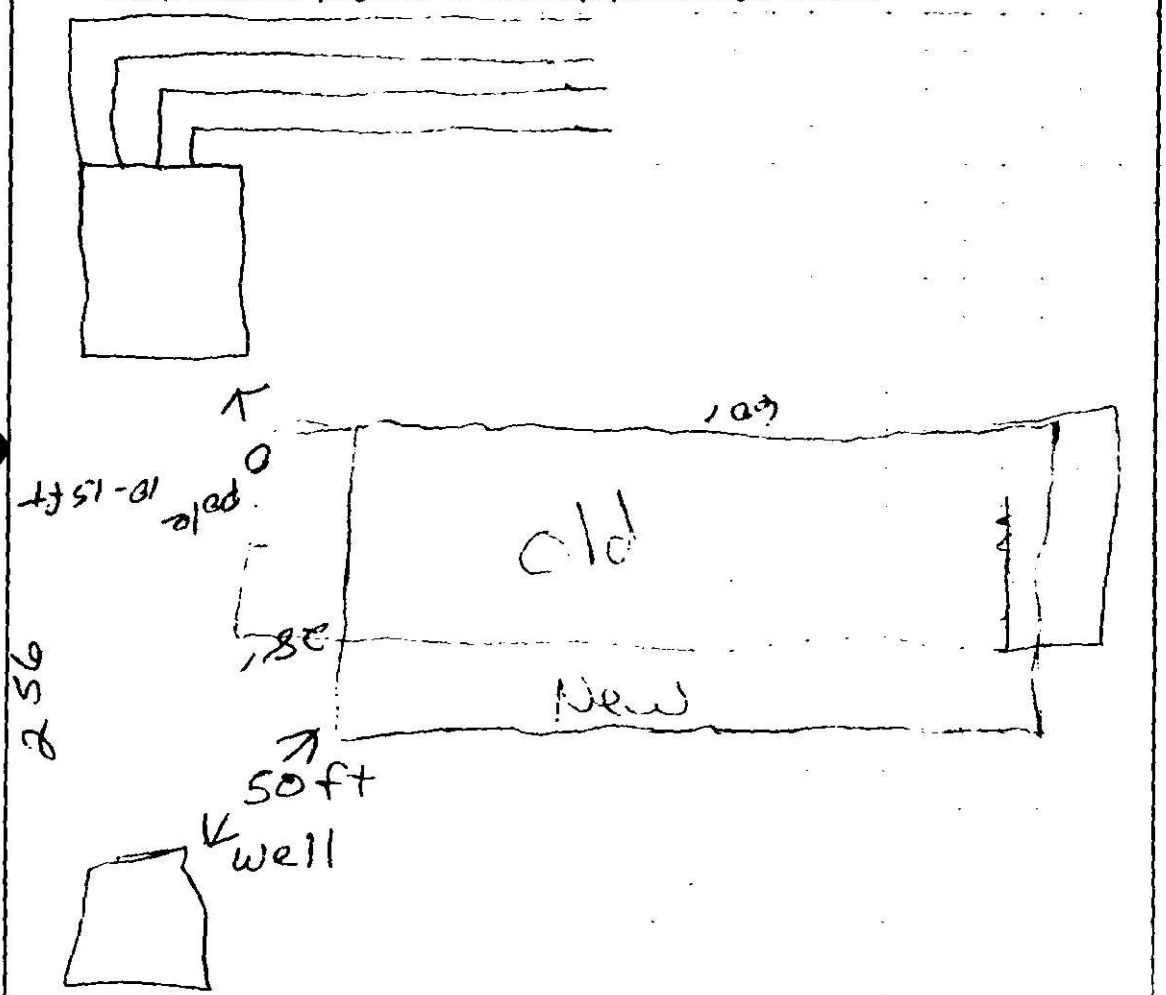
PROPOSED PLOT PLAN

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

FILE: 7218

TC: 017-232-02

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.

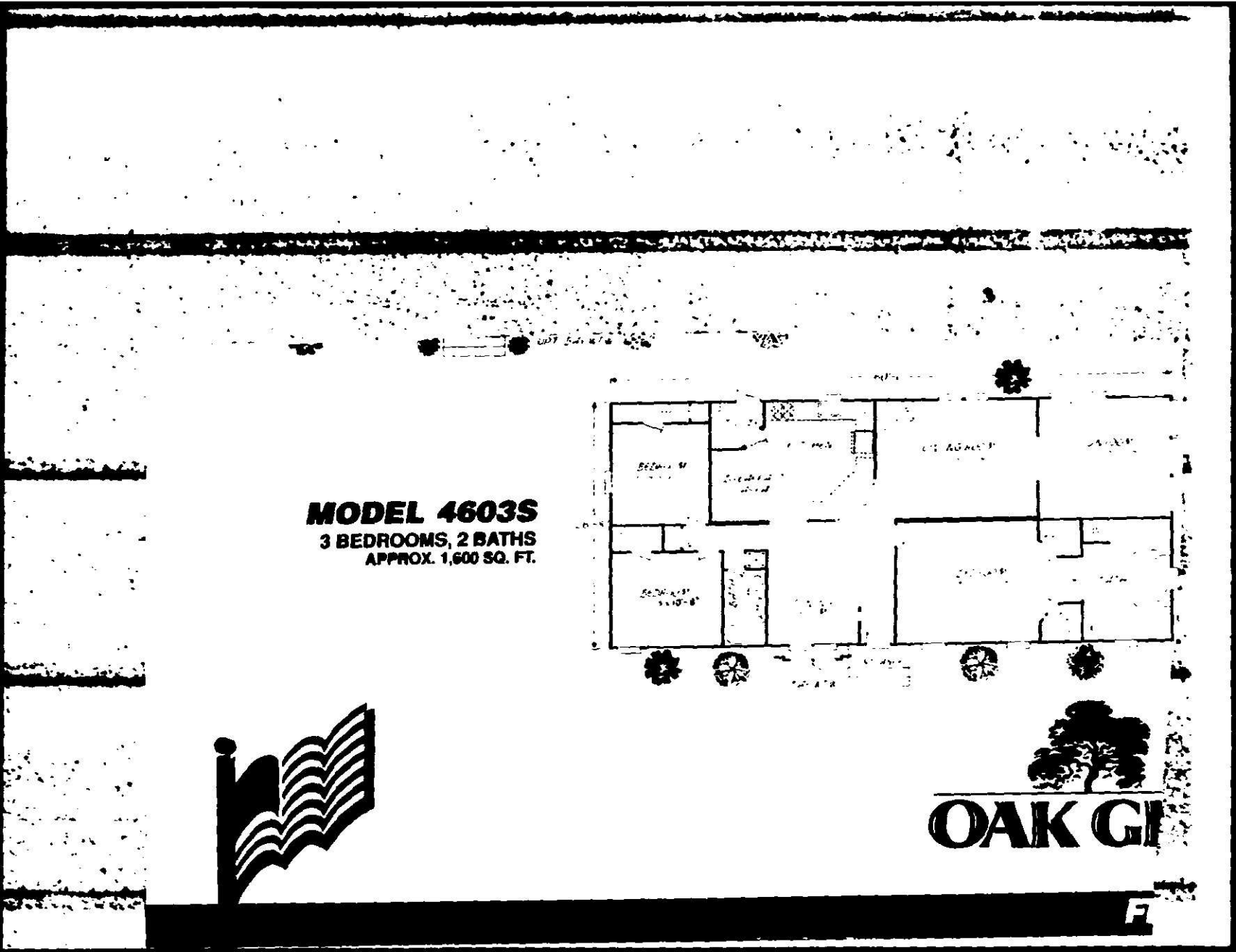


FRONT 100 Feet

YES 1/19/90

APPROVAL DATE

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


MODEL 4603S
3 BEDROOMS, 2 BATHS
APPROX. 1,600 SQ. FT.
OAK G