


9420 BRIEF RD

19713108

6/17/08

marliwr

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

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

3600

Sheet 1 of
PROPERTY ID #:
COUNTY:

# SOIL/SITE EVALUATION *for* ON-SITE WASTEWATER SYSTEM

#1 10715
197-131-08

OWNER: Ruth M. Bartlett APPLICANT:
ADDRESS: 9420 Brief Road, Chas. APPLICATION DATE: DATE EVALUATED:
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949): 360gpd PROPERTY SIZE: Approx. 5
LOCATION OF SITE: 9420 Brief Road PROPERTY RECORDED:
WATER SUPPLY: ☑ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

| PROFILE # | 3/4pcs 5-15% 1940 LANDSCAPE POSITION/ SLOPE % | HORIZON DEPTH (IN.) | SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE | SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY | OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR | .1943 SOIL DEPTH | .1956 SAPRO CLASS | .1944 RESTR HORIZ | PROFILE CLASS & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| 1 | LS | 0-4" | gr/sc/ | Fr/SEXP/SS/SP | >46" TO soil wetness | 46" | N/A | None | PS .39/P2 IV |
| | | 4-36" | SBK/c | F:/SEXP/SS/P | | | | | |
| | | 36-48" | SBK/c/ | Fr/SEXP/SS/SP | | | | | |
| 2 | LS | 0-3 | gr/sc/ | Fr/SEXP/SS/SP | >46" TO soil wetness | 46" | N/A | None | PS .39/P2 IV |
| | | 3-46" | SBK/c | F:/SEXP/S/P | | | | | |
| 3 | LS | 0-4" | gr/sc/ | Fr/SEXP/SS/SP | >48" TO soil wetness | 46" | N/A | None | PS .39/P2 IV |
| | | 4-46" | SBK/c | F:/SEXP/S/P | | | | | |
| 4 | LS | 0-6" | gr/sc/ | Fr/SEXP/SS/SP | >46" TO soil wetness | 40" | N/A | None | PS .39/P2 IV |
| | | 6-46" | SBK/c | F:/SEXP/S/P | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | PS | PS |
| System Type(s) | | |
| Site LTAR | | |

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): Provisionally Suitable
EVALUATED BY: W. R. Marlin 5-2097
OTHER(S) PRESENT: LSS

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COUNTY:

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## *for* ON-SITE WASTEWATER SYSTEM

~~10715~~

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ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: _____ PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

| PROFILE # | 1940 LAND-SCAPE POSITION/ SLOPE % | HORI-ZON DEPTH (IN.) | SOIL MORPHOLOGY (.1941) 1941 STRUCTURE/ TEXTURE | 1941 CONSISTENCE/ MINERALOGY | OTHER PROFILE FACTORS 1942 SOIL WETNESS/ COLOR | 1943 SOIL DEPTH | 1956 SAPRO CLASS | 1944 RESTR HORIZ | PROFILE CLASS & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| 5 | LS | 0-6" | gr/sc/ | Fr/SEXP/SS/SP | 7 46" TO Soil wetness | 46" | N/A | None | PS .39/ft² IV |
| | | 6-48" | SBK/C | Fi/SEXP/SS/P | | | | | |
| 6 | LS | 0-5" | ~~gr/sc/ Fi/SEXP/S~~ | Fr/SEXP/SS/SP | 746" TO Soil wetness | 46" | N/A | None | PS .39/ft² IV |
| | | 5-48" | SBK/C | Fi/SEXP/SS/P | | | | | |
| 7 | LS | 0-4" | gr/sc/ | Fr/SEXP/SS/SP | 746" TO Soil wetness | 46" | N/A | None | PS .39/ft² IV |
| | | 4-46" | SBK/C | Fi/SEXP/SS/P | | | | | |
| 4 | | | | | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | PS | PS |
| System Type(s) | | |
| Site LTAR | | |

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): Provisionally Suitable
EVALUATED BY: William R. Marlin 5-20-92
OTHER(S) PRESENT: LSS

COMMENTS: 2 sites checked, only one will be used

# LEGEND

*use the following standard abbreviations*

| LANDSCAPE POSITION | GROUP | SOIL TEXTURE | CONVENTIONAL 1955 LTAR | LPP 1957 LTAR | MINERALOGY/ CONSISTENCE | STRUCTURE |
|---|---|---|---|---|---|---|
| C (Concave Slope) | I | S (Sand) | 1.2 - 0.8 | 0.6 - 0.4 | NEXP (Non-expansive) | G (Single Grain) |
| V (Convex Slope) | | LS (Loamy Sand) | | | SEXP (Slightly Expansive) | M (Massive) |
| (Drainage Way) | | | | | EXP (Expansive) | CR (Crumb) |
| S (Debris Slump) | II | SL (Sandy Loam) | 0.8 - 0.6 | 0.4 - 0.3 | | GR (Granular) |
| P (Flood Plain) | | L (Loam) | | | | SBK (Subangular Blocky) |
| S (Foot Slope) | | | | | | ABK (Angular Blocky) |
| (Head Slope) | III | SI (Silt) | 0.6 - 0.3 | 0.3 - 0.15 | | PL (Platy) |
| (Linear Slope) | | SICL (Silty Clay Loam) | | | | PR (Prismatic) |
| (Nose Slope) | | CL (Clay Loam) | | | MOIST | WET |
| (Ridge) | | SCL (Sandy Clay Loam) | | | | |
| (Shoulder Slope) | | SLC (Silt Loam Clay) | | | VFR (Very Friable) | NS (Non-sticky) |
| (Terrace) | | | | | FR (Friable) | SS (Slightly Sticky) |
| | IV | SC (Sandy Clay) | 0.4 - 0.1 | 0.2 - 0.05 | FI (Firm) | S (Sticky) |
| | | SIC (Silty Clay) | | | VFI (Very Firm v. Very Sticky) | VS (Very Sticky) |
| | | | | | EFI (Extremely Firm) | NP (Non-plastic) |
| | | O (Organic) | None | | | SP (Slightly Plastic) |
| | | | | | | P (Plastic) |
| | | | | | | VP (Very Plastic) |

*OTES*

*ORIZON DEPTH* In inches below natural soil surface

*EPTH OF FILL* In inches from land surface

*ESTRICTIVE HORIZON* Thickness and depth from land surface

*APROLITE* S(suitable) or U(unsuitable)

*OIL WETNESS* Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation

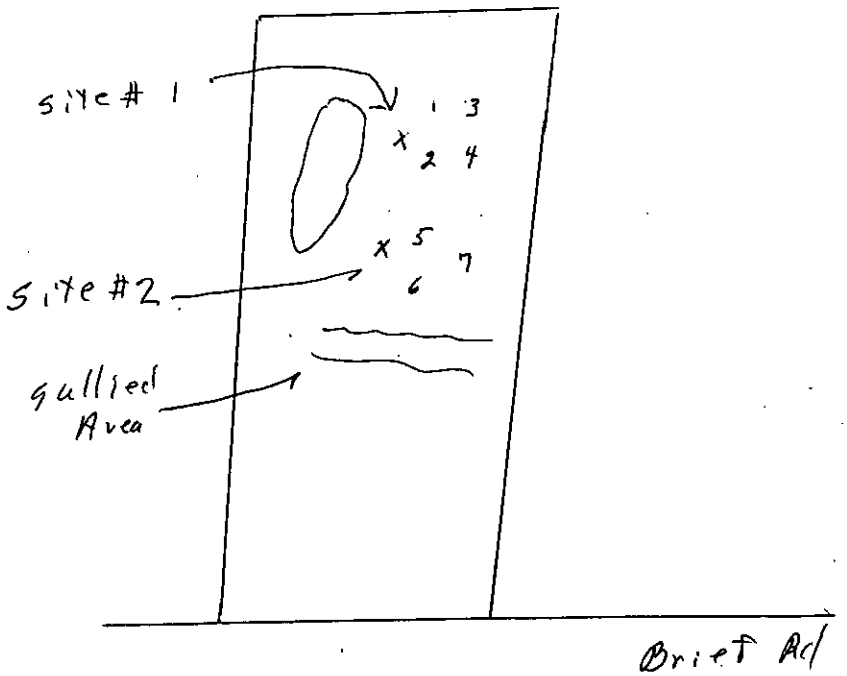
*LASSIFICATION* S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

valuation of saprolite shall be by pits.

ong-term Acceptance Rate (LTAR): gal/day/ft²

**Show profile locations and other site features (dimensions, reference or benchmark, and North).**

10 715




N

2nd site evaluation
Pd $175.00 Chk # 2950
@ C 5/13/97

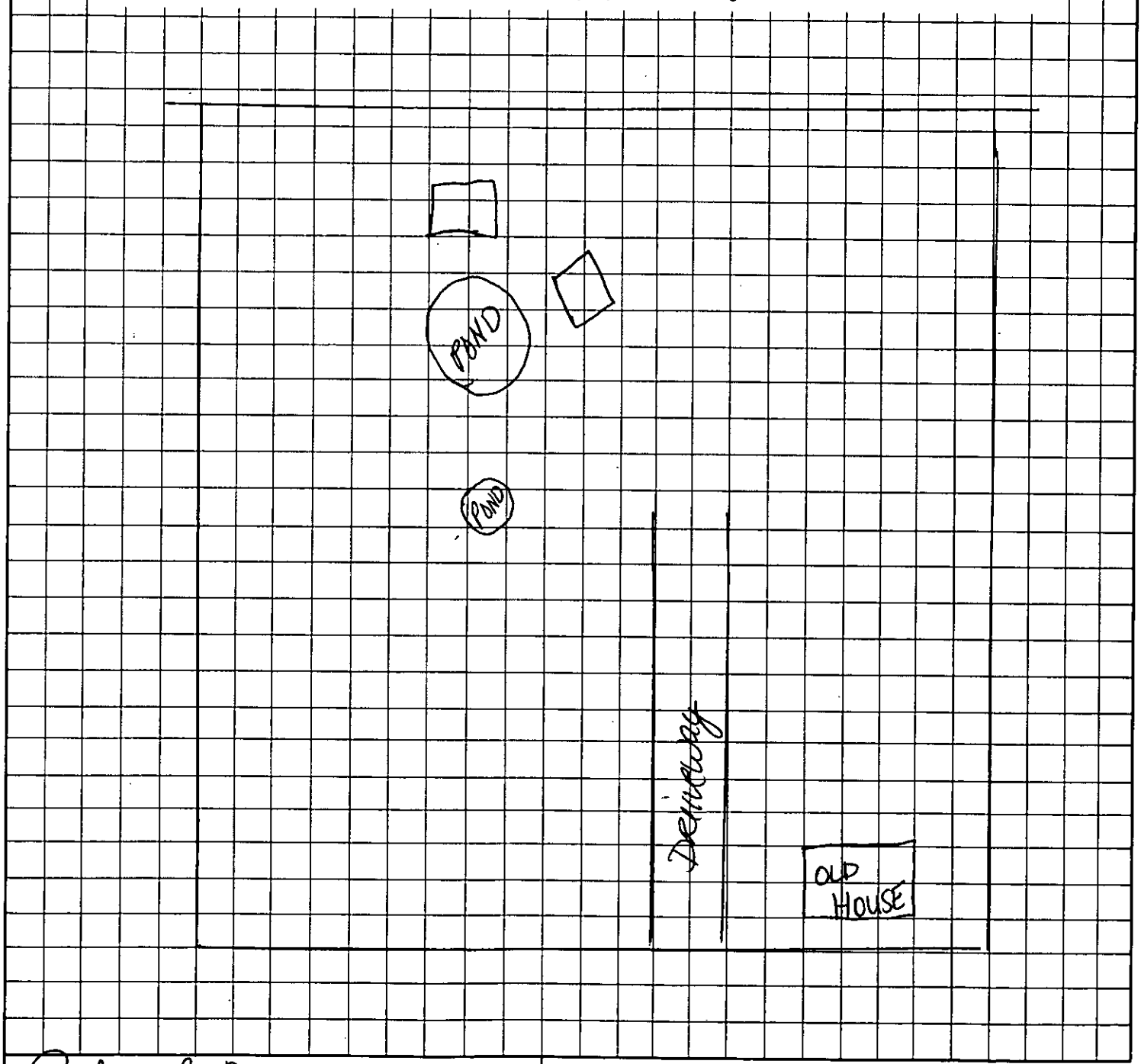
# PROPOSED PLOT PLAN

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

FILE: 10715

TC: 197-131-08

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.




Robert S. Toney
OWNER/AGENT SIGNATURE

DATE 5-13-97

APPROVAL DATE _____

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

2nd site evaluation
PD 475 sq
C.L.K. 2.95
9 C 5/13/97

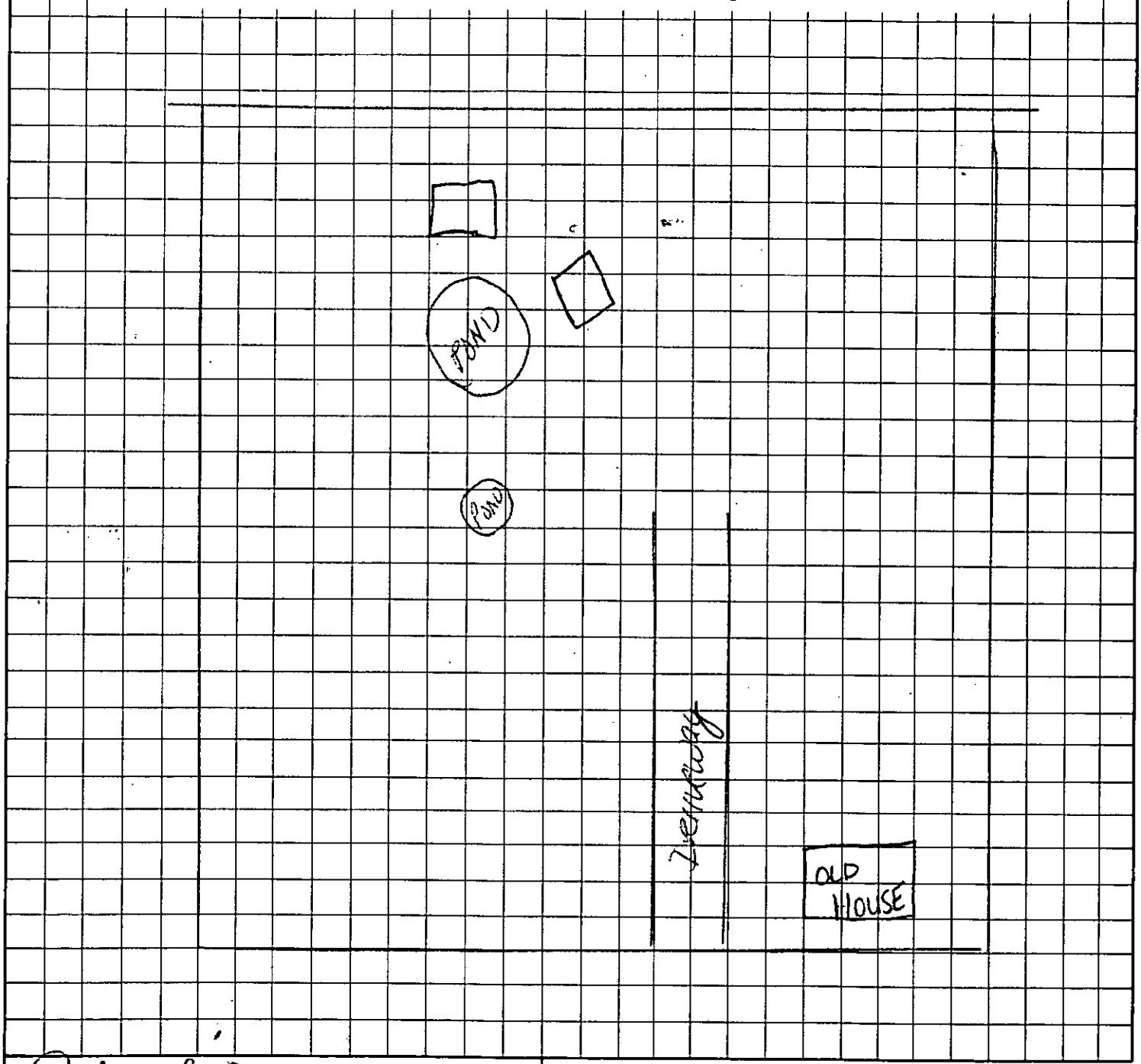
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2nd site evaluation
Pd $75.00 Chk # 2950
@ C 5/13/97

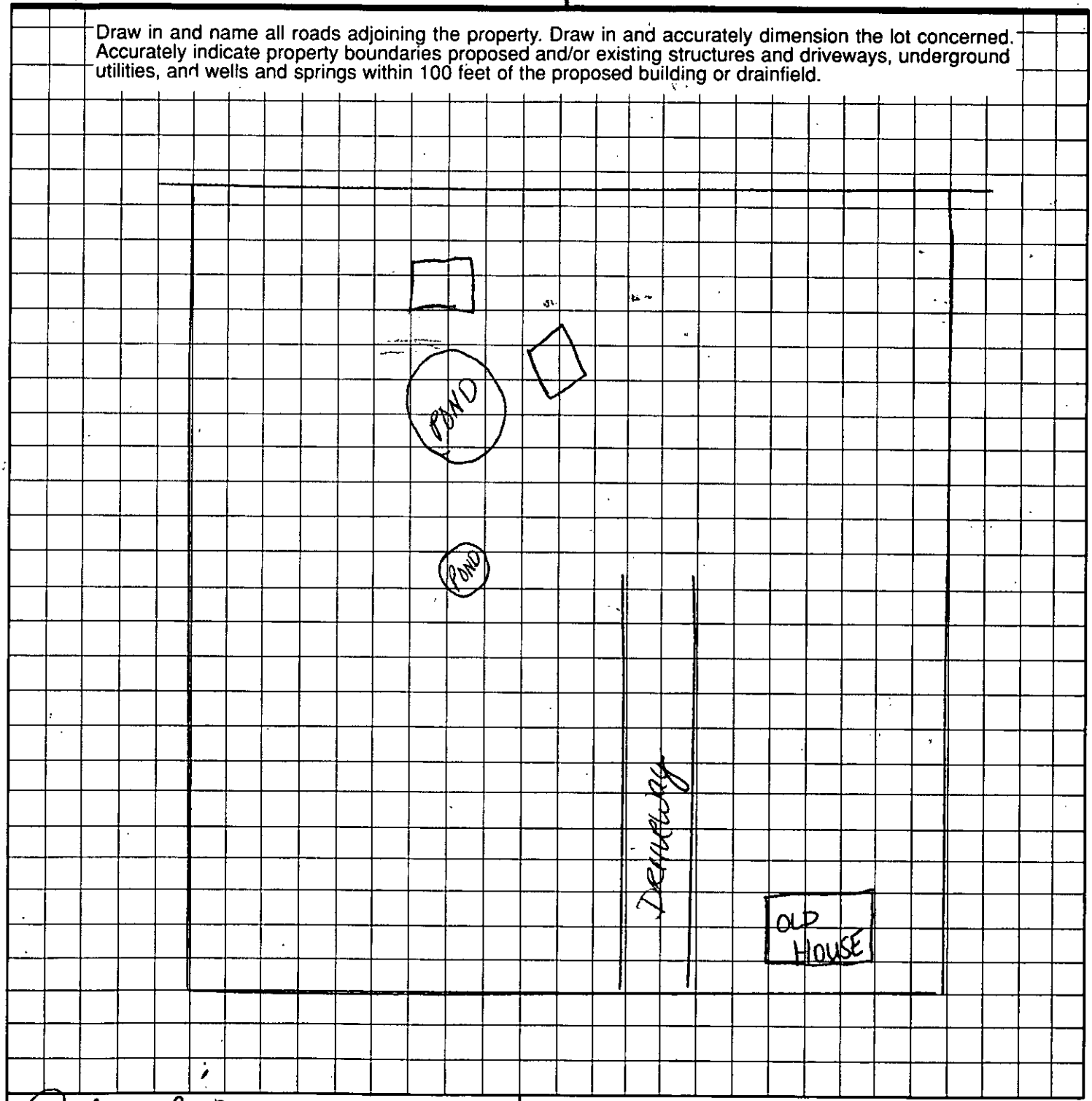
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FEE: 100.00
DATE: 5-1-97
Cash 2932

**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 #: 10715

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 19713108

STREET ADDRESS: ~~9420~~ Brief Rd.

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER:

TOWNSHIP (CHECK ONE):

TYPE OF BUILDING (CHECK ONE):

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

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

HEATED SQUARE FOOTAGE: 2800 to 3000 sq. ft.

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 4

CLOSING DATE ASAP hopefully within 30 days

FOUNDATION FOR RESIDENCE:

[ ] WITHOUT BASEMENT
[ ] ON SLAB
[✓] CRAWL SPACE
[ ] WITH BASEMENT /PLUMBING
[ ] WITH BASEMENT /NO PLUMBING

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

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: Bartlett (LAST) Ruth (FIRST) M (MI) | NAME: Toney (LAST) Robin (FIRST) S. (MI) |
| ADDRESS: 9420 Brief Rd. | DAYTIME PHONE: (704) 573-9460 |
| CITY: Charlotte STATE: NC ZIP: 28227 | |
| DAYTIME PHONE: ( ) - | |

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

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: Robin S. Toney DATE: 5-1-97

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

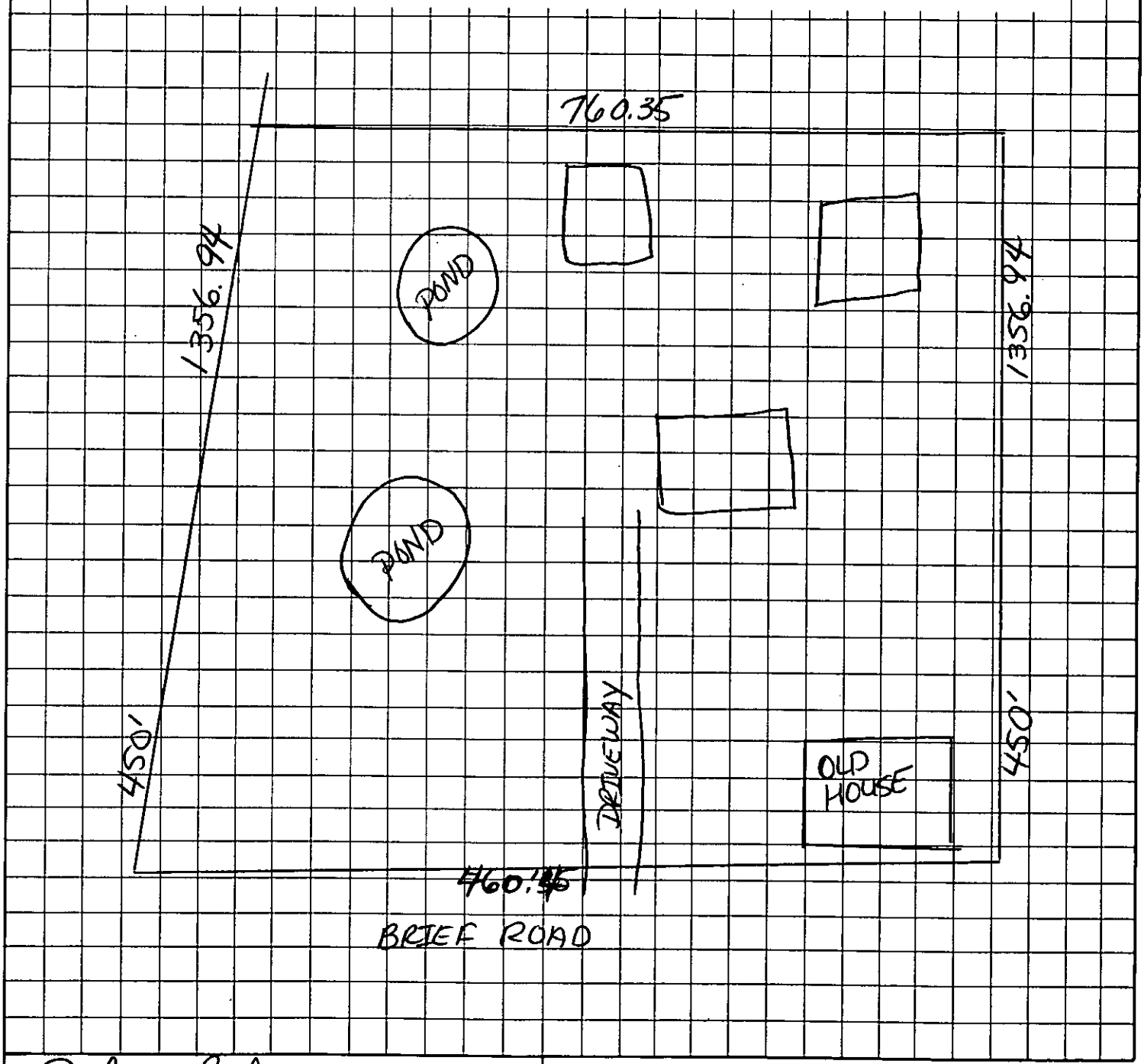
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700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 10715

TC: 197-131-08

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Robin S. Toney
OWNER/AGENT SIGNATURE

DATE 5-1-97

APPROVAL DATE _____

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Canary - E.H.S. Copy

Pink - Owner's Copy

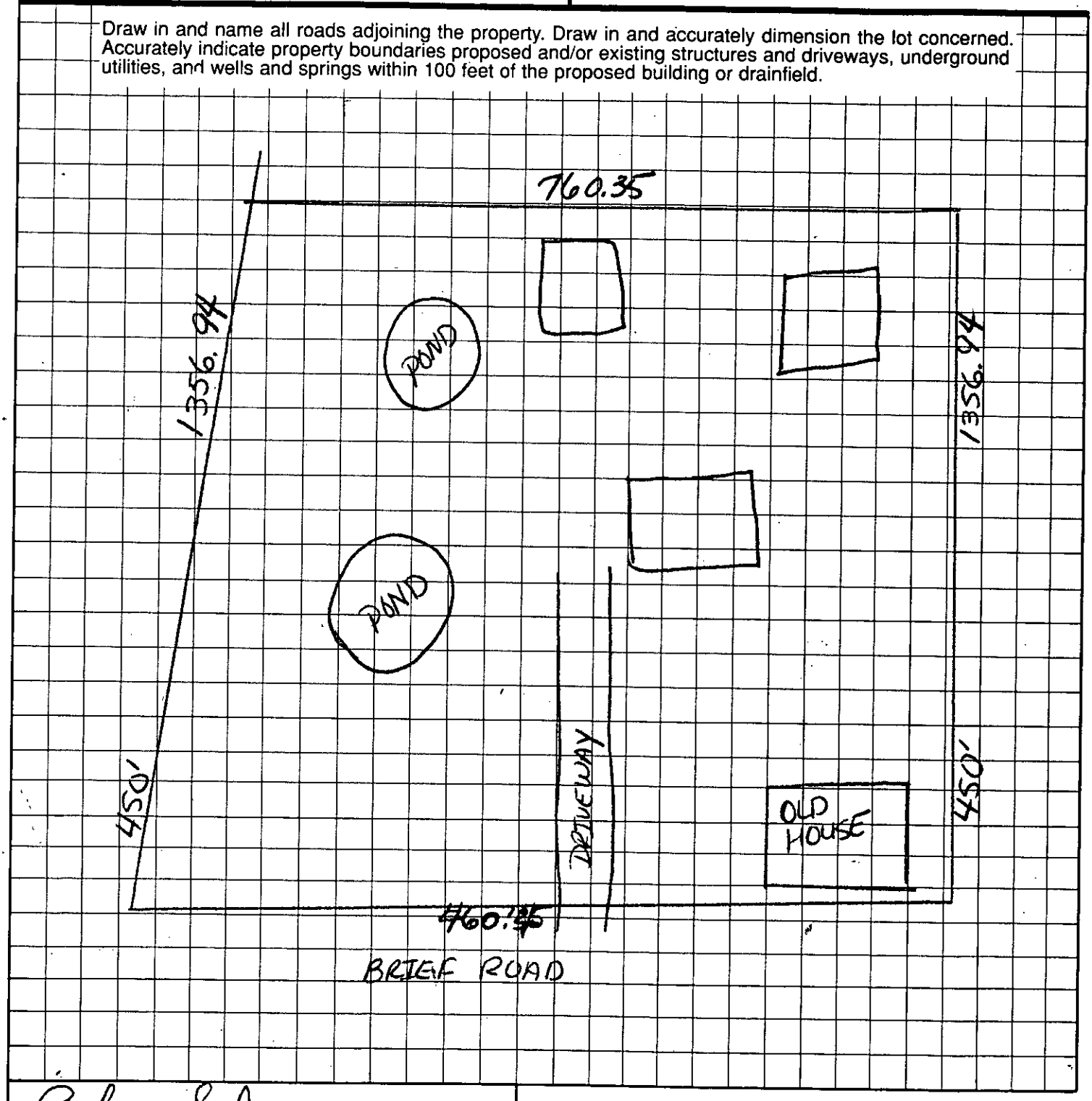
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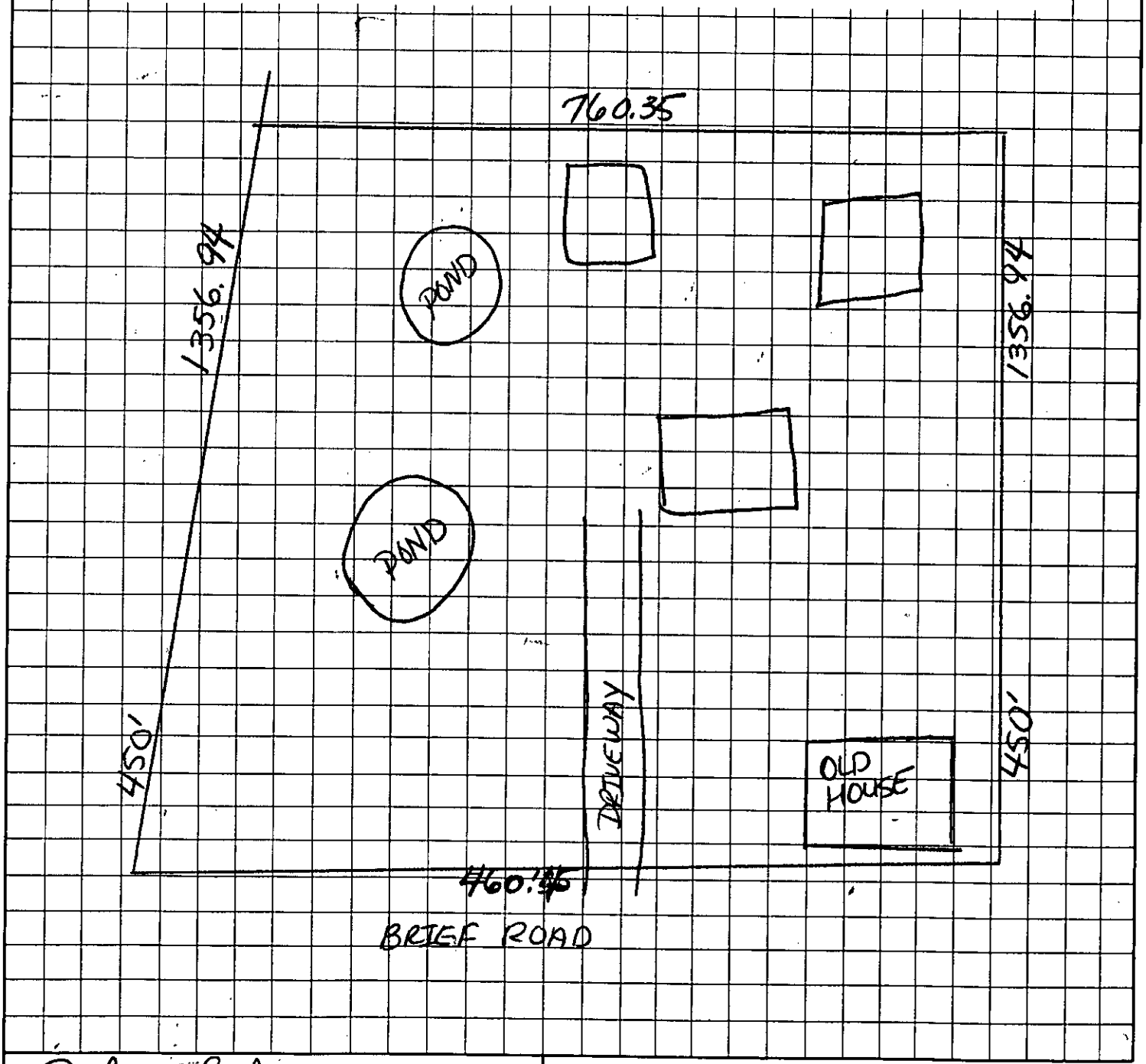
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PHONE (704) 336-5102

FILE: 10715

TC: 197-131-08

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BK. 139-30

#3106

BRIEF RD.

ARLINGTON CHURCH RD.

1098.99

1197.90

390.90

262.12

1.221 AC

820.524

214.5

1023

627

181.5

103.368 AC

1089

PG. 14

1011

199

201

232.05

232.04

460

431.54

400.58

332.57

322.26

190

1018.87

262.59

703.031

351

677.56

450

409

700.35

15

16

8

15.08 AC.

5.45 AC

5.86 AC

13

3.29 AC

14

4.51 AC.

10

2.29 AC

9

6.93 AC.

300

6

32.305 AC.

5

38.018 AC.

4

26.53 AC.

131

1487.76

638.34

1818.98

1823.71

348.72

429.66

543.14

546.26

510.28

1183.3

246

330.71

1064.25

215.54

718.07

12

1.82 AC.

11

1.50 AC

1.50 AC

1.50 AC

1.41 AC

2.00 AC

3

2.00 AC

300

137.4

137.22

233.5

155.54

153.65

266.39

396.07

PG. 18

TAX LINE MAP BOOK 197 PAGE 13

MECKLENBURG COUNTY, NORTH CAROLINA

REVISED 5-4-95 EAB | SCALE 1" = 400'

FOR TAX PURPOSES ONLY

PD 10% CK# 3588 2/11/14 SD

# CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 10716 DATE: 3/13/97

TC: 141-095-18 ☒ L ☒ CRT

SERIAL № 17074

Name of Owner Darlene Moore Juris.: _____

Address of Property 7823 Cooper Lane

**Inspection Data:**

Tank Material 1500

Total Length of Drainfield 420

Number of Lines 6 @ 50' septic line 2 @ 70' washer

Cover Depth 3'-4'

Water Supply Source Municipal

Distance to Water Source 10'

Excavation Inspected 3/13/97

Tank(s) Inspected 3/2/97

Wash Line Inspected 3/13/97

High Water Alarm Inspected —

PLOT

Design 1500 ST, Drop Boxs, 1200 SQ FT, 12"G, Cell-like CTR# Property Owner's requested to do themselves

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 15A 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 15A 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: Used drop boxes at the beginning of each drainfield line. Type II

Joni Maggio Bunn, R.S.
Environmental Health Specialist

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