

2524 GEMWAY DR

03706123

12/17/07

duponbj

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

400 ☒

Pd. 25.00
Ck# 0665 HB
2-6-92

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

PCR ☒ CRT

#8038A/148B

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

(704)336-5102

PERSON FILING APPLICATION:

NAME: HONEYCUTT, CHARLES S
(last) (first) (mi)

ADDRESS: 2524 GEMWAY PHONE: (704) 392-7653

CITY: CHARLOTTE STATE: NC ZIPCODE: 28216

Date: 2-5-92

PROPERTY OWNER:

NAME: SAME /\
(last) (first) (mi)

ADDRESS: _____ PHONE: (__) _____

CITY: STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 037-061-23

STREET ADDRESS: 2524 Gemway DR

ZONING:

SUBDIVISION OR MOBILE HOME PARK NAME:

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

LOT NUMBER: 20/21 LOT SIZE (in acres): 1 1/2 AC

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) garage
[] 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: 3 NUMBER OCCUPANTS: 2

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ___ 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 /GARAGE [] 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: C R Honeycutt Date: 2/6/92

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the 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.

... Use existing system

[] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Philo S. Walker 2/10/92
Environmentalist Date

Kelly Randall 2-6-92
Director or Authorized Section Head Date

WWATER : 122791

RW

PROPOSED PLOT PLAN

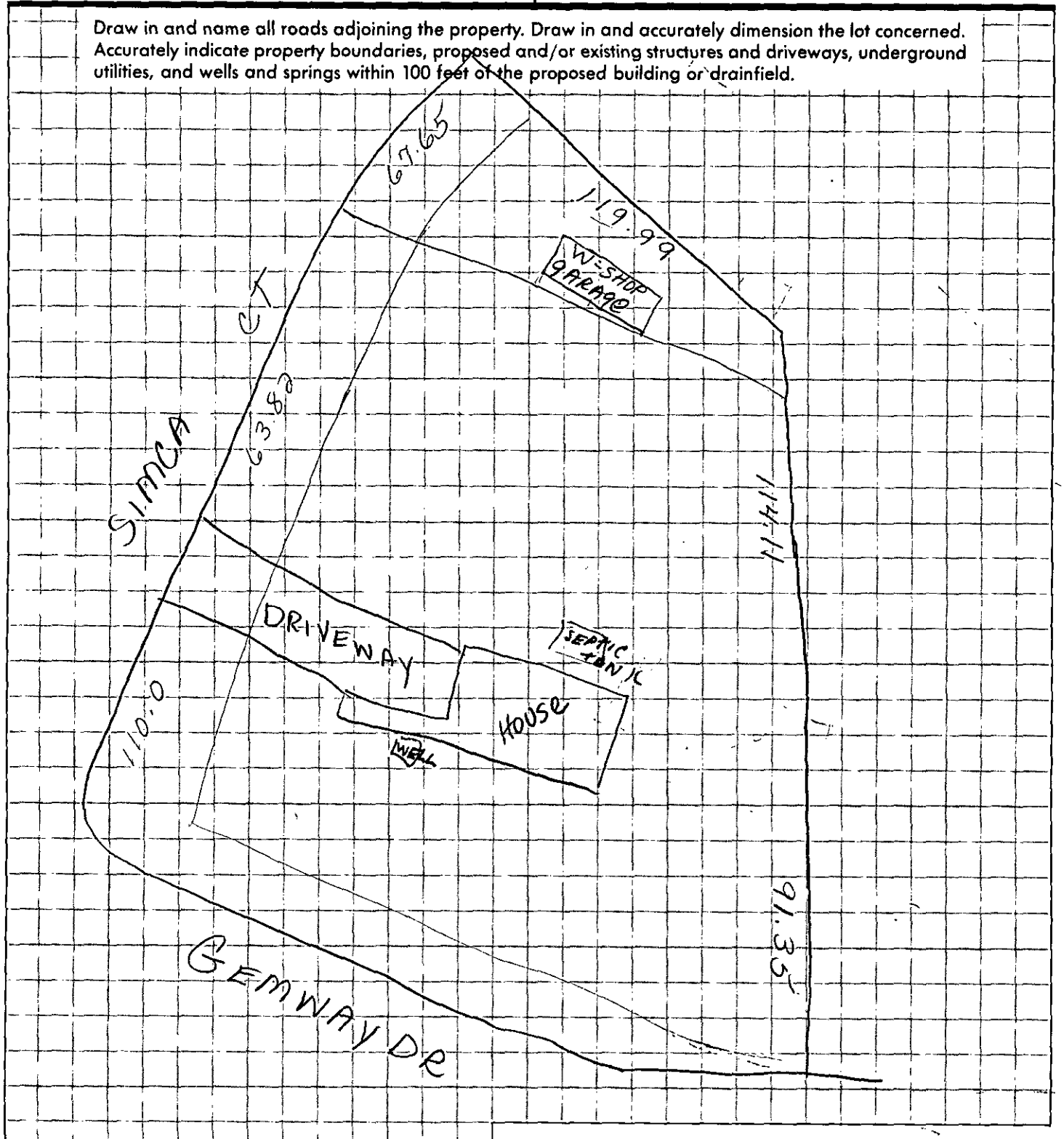
Workshop and garage
AD 2524 Hemway Dr

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

FILE: 8038A /148B

TC: 037-061-23

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.



Signed: _____

Date: _____

PROPOSED PLOT PLAN

COPY

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

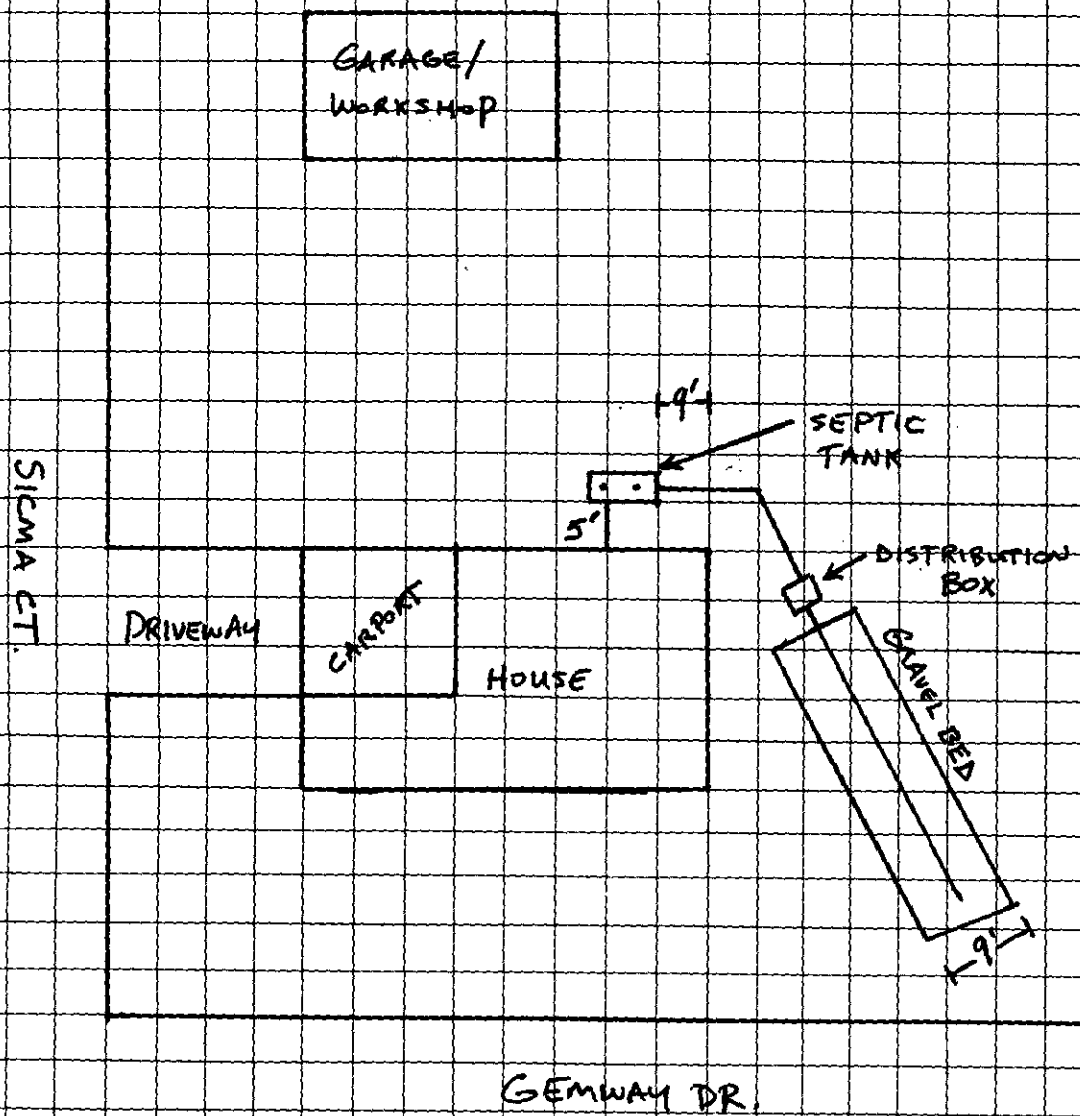
FILE: B038A/01488

TC: 037-061-23

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.

*2524 GEMWAY DRIVE

SKETCH CREATED FROM REALESTATE INSPECTION CONDUCTED ON 06/09/2004.



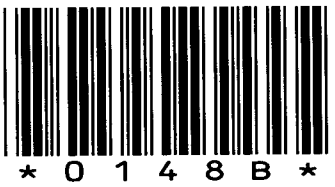
OWNER/AGENT SIGNATURE

DATE

APPROVAL DATE

DRAWN BY: T. THOMASON 6/9/04

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



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03706123

12/17/07

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Groundwater and Wastewater Services File Imaging Project
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Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

NC DENR
Division of Environmental Health
On-Site Wastewater Section

OPERATION PERMIT for an ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 8038A/148B Permit #: _____ Tax Parcel #: 037-061-23

Property Owner: SFRH Charlotte Rental, LLC

Job Location Address: 2524 Gemway Drive

City: Charlotte State: NC Zip Code: 28216

Operation Permit Issuance Date: 3/13/14 Contractor Name: Steve Autry

Permitted Design Flow: 360 GPD

Liquid Capacity of Septic Tank: Existing gallons

Liquid Capacity of Dosing Tank: — gallons

Effluent Pump Model: —

Drainfield Installation ☒ N/A

Trench Depth: _____ inches

Trench Width: _____ feet

Line Spacing: _____ feet (O.C.)

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Typ

Depth of Cover: _____ inches

Distribution Device: _____

Inspection Dates

Tank(s) Inspected: N/A

3/13/14

ected: N/A

WAITING ON APPLICATION

Bed Installation *(For Repair Installatio*

Bed Depth: 36 inches

Bed Width: 12 feet

Total line length: 240 feet

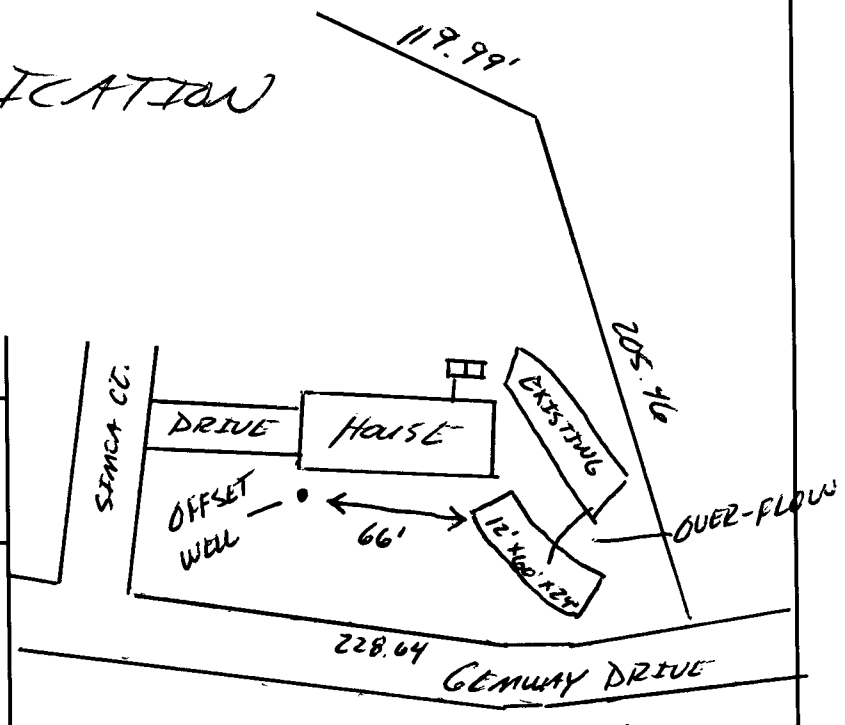
# of Lines: 4 @ 60 feet

Depth of Media: 24 inches (T

Depth of Cover: 12 inches

Distribution Device: D-Box

SYSTEM INSTALLATION
(As-Built Drawing)



Water Supply Source

☒ Municipal ☐ Private Well ☐ Community Well

☐ Other _____

System Installation Setbacks

Distance from Building Foundation: >75' feet

Distance from Property Line: >10' feet

Distance from Water Supply Source: >50' feet (66')

The undersigned has inspected the Septic Tank System described above, and certifies it has been ☐ installed ☐ altered ☒ repaired ☒ as detailed in the plot above ☐ in accordance with the permit issued 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. The issuance of this 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. 1900 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 or Revocation of this permit.

Comments: System Classification & Type: IIa, GRAVITY, TCHP, NA, NA

DENR Authorized Agent: Jeremy Michelau, REHS Signature: Jeremy Michelau, REHS

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

NC DENR
Division of Environmental Health
On-Site Wastewater Section

OPERATION PERMIT for an
ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 8038A/1488 Permit #: _____ Tax Parcel #: 037-061-23

Property Owner: SFRH Charlotte Rental, LLP

Job Location Address: 2524 Gennway Drive

City: Charlotte State: NC Zip Code: 28216

OPERATION PERMIT CONDITIONS:

I. Performance: System shall perform in accordance with 15A NCAC 18A .1961.

II. Monitoring: System shall be monitored as required by 15A NCAC 18A .1961.

III. Maintenance: Ground absorption sewage treatment and disposal systems shall be checked, and the contents of the septic tank removed, periodically from all compartments, to ensure proper operation of the system. The contents shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.

IV. Operation: System shall be operated in accordance with 15A NCAC 18A .1961.

System Classification: IIa

*Operation Permits for Type V and VI systems expire five (5) years from the date of issuance (in accordance with Table V(a)). The system owner must contact GWS six (6) months prior to expiration for permit renewal.

Subsurface system operator required: Yes ☐ No ☒

☐ This type of system requires the system owner to maintain a contract with a certified operator to perform system inspection, maintenance, and reporting as required in 15A NCAC 18A .1961. and Table V(a). The system owner is responsible for all fees associated with these services.

☒ System does not require inspection by GWS on a routine frequency.

☐ System requires inspection by GWS once every five (5) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every three (3) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every twelve (12) months. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every six (6) months. The system owner is responsible for all fees associated with the inspection.

V. Other: 2014 REPAIR

DENR Authorized Agent: Jeremy Mickelson, REHS Date: 3/13/14

Signature: Jeremy Mickelson, REHS

Mecklenburg County Groundwater & Wastewater Services
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

NC DENR
Division of Environmental Health
On-Site Wastewater Section

INSTALLATION APPROVAL for an ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 8038A/1488 Permit #: _____ Tax Parcel #: 037-061-23

Property Owner: SFRH CHARLOTTE RENTAL, LLP

Job Location Address: 2524 GERMANY DRIVE

City: CHARLOTTE State: NC Zip Code: 28216

Installation Approval Issuance Date: 2/17/14

Permission is hereby given to ☐ install ☐ alter ☒ repair an on-site wastewater treatment & and disposal system, with subsurface soil absorption and effluent discharge, as specified herein at the described location. This approval is granted based upon the application information submitted to our office. All work shall be completed on or before 3/17/14, after which date this approval shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A. 1900 which are in effect on the date of granting this approval. An **Operation Permit** must be obtained from the Mecklenburg County Health Department before any system can be covered up or placed into service. 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 of hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

***NOTICE: This system shall not be installed while soils are in a wet condition.**

Permitted Design Flow: 360 GPD

Site LTAR: 0.5 GPD/ft² (For new installations only.)

Liquid Capacity of Septic Tank: EXISTING gallons

Liquid Capacity of Dosing Tank: N/A gallons

Drainfield Design ☒ N/A

Trench Depth: _____ inches

Trench Width: _____ feet

Line Spacing: _____ feet (O.C.)

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Distribution Device: _____

Bed Design *(For Repair Installations ONLY.)* ☐ N/A

Bed Depth: 36 inches

Bed Width: 12 feet

Total line length: 200 feet

# of Lines: 4 @ 50 feet

Depth of Media: 24 inches (Type) STONE/TCHP

Distribution Device: D-BOX

Water Supply Source (POSSIBLE OFFSET WELL)

☒ Municipal ☐ Private Well ☐ Community Well

☐ Other _____

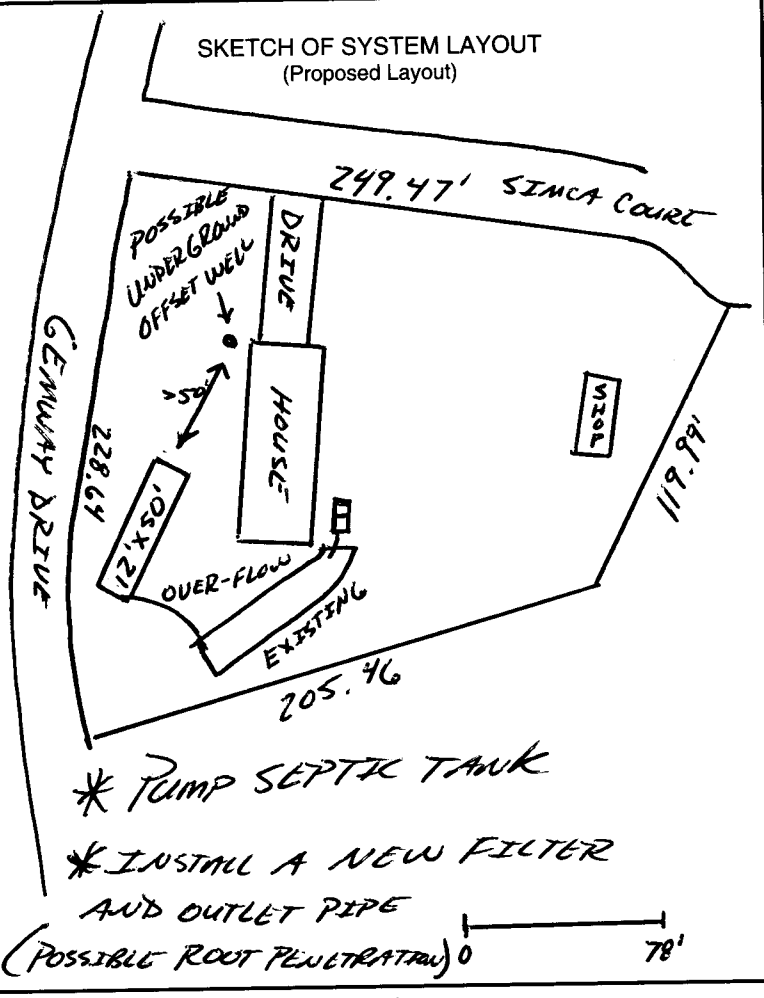
Minimum System Setbacks

Distance from Building Foundation: >5' feet

Distance from Property Line: >10' feet

Distance from Water Supply Source: 750' feet

SKETCH OF SYSTEM LAYOUT
(Proposed Layout)



* PUMP SEPTIC TANK

* INSTALL A NEW FILTER AND OUTLET PIPE (POSSIBLE ROOT PENETRATION)

Comments: System Classification & Type: II CONVENTIONAL SYSTEM REPAIR

DENR Authorized Agent: Jeremy Micholone, REHS Signature: Jeremy Micholone, REHS

DENR/DEH

ON-SITE WASTEWATER SECTION

Sheet 1 of 2
PROPERTY ID #: 037-061-23
COUNTY: Meck

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: SFRH Charlotte Rental
ADDRESS: 5531 Equipment Drive Suite B Charlotte NC 28262
PROPOSED FACILITY: Home
PROPOSED DESIGN FLOW (.1949): 360
LOCATION OF SITE: 7524 Gramercy Drive
APPLICATION DATE
DATE EVALUATED: 2/17/17
PROPERTY SIZE: 1/2
PROPERTY RECORDED: 1967
WATER SUPPLY: • Private • ~~Public~~ • Well • Spring • Other
EVALUATION METHOD: • Auger Boring • Pit • Cut
TYPE OF WASTEWATER: • Sewage • Industrial Process • Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	CS 5%	0-2	GR/SCL	FR/SS/SP/SMP	>48" TO SOTC WETNESS	48"	NA	NA	PS 0.36 A/D/FT² II
		2-48	SBK/C	FI/S/P/SMP					
2									
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	IIa	IIa
Site LTAR	0.3	0.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Jimmy York, REHS
OTHER(S) PRESENT:

COMMENTS:

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope) CV (Convex Slope) D (Drainage Way) DS (Debris Slump) FP (Flood Plain) FS (Foot Slope) H (Head Slope) L (Linear Slope) N (Nose Slope) R (Ridge) S (Shoulder Slope) T (Terrace)	I	S (Sand) LS (Loamy Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive) SEXP (Slightly Expansive) EXP (Expansive)	G (Single Grain) M (Massive) CR (Crumb) GR (Granular) SBK (Subangular Blocky) ABK (Angular Blocky) PL (Platy) PR (Prismatic)
	II	SL (Sandy Loam) L (Loam)	0.8 - 0.6	0.4 - 0.3		
	III	Si (Silt) SiCL (Silty Clay Loam) CL (Clay Loam) SCL (Sandy Clay Loam) SiL (Silt Loam)	0.6 - 0.3	0.3 - 0.15		
	IV	SC (Sandy Clay) SiC (Silty Clay) C (Clay)	0.4 - 0.1	0.2 - 0.05		
		O (Organic)	None	None		

MOIST	WET
VFR (Very Friable)	NS (Non-sticky)
FR (Friable)	SS (Slightly Sticky)
FI (Firm)	S (Sticky)
VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
EFI (Extremely Firm)	NP (Non-plastic)
	SP (Slightly Plastic)
	P (Plastic)
	VP (Very Plastic)

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

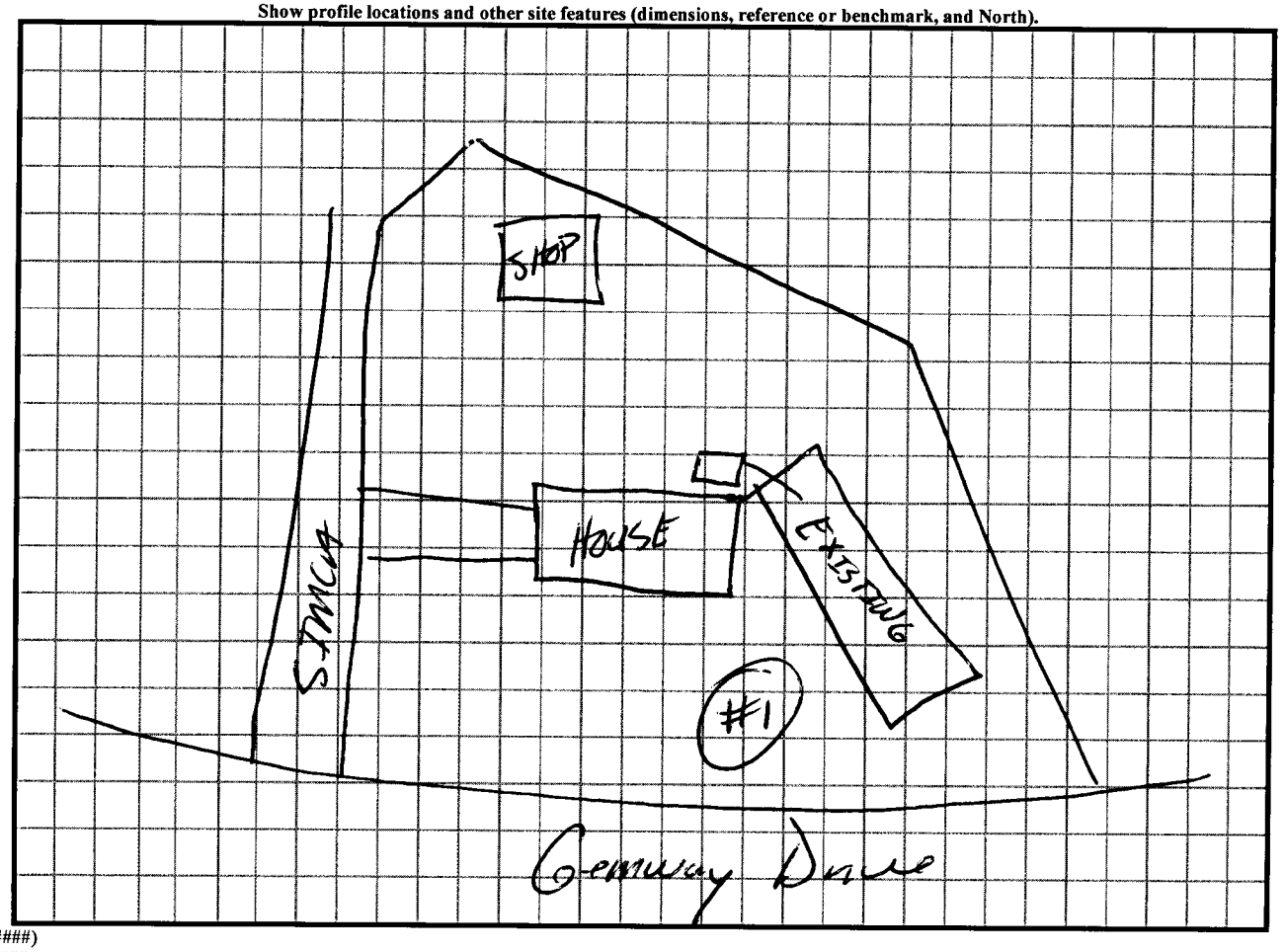
NOTES

HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL 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
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft^2

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



DENR (######)
Review (#####)

Mecklenburg County, North Carolina
POLARIS
Parcel Ownership and GIS Summary

148B

Date and Time: 2/18/2014 11:25:56 AM

Parcel ID #: 03706123 GIS ID #: 03706123	
Owner Name:	SFRH CHARLOTTE RENTAL LLP
Mailing Address:	5531 EQUIPMENT DR STE B CHARLOTTE, NC 28262
Property Characteristics	
Legal Desc.:	L20&21 BC M10-1
Land Area:	1 LT
Fire District:	00-CITY OF CHARLOTTE
Special District:	N/A
Account Type:	NC CORP
Municipality:	1-CHARLOTTE
Property Use:	SINGLE-FAM

Deed Reference(s) and Sales Price

28512-807 (7/10/2013) $82,000.00
17558-345 (7/30/2004) $117,500.00
09226-819 (8/28/1997) $108,000.00

Situs Addresses Tied to This Parcel

2524 GEMWAY DR

Site Location Information	
Zoning Boundaries:	Contact Appropriate Planning Department or See Map.
ETJ Area: CHARLOTTE	
Charlotte Historic Districts: NO	
Within Charlotte 6/30/2011 Annexation Area: NO	
Census Tract #: 61.02	
Parcel Falls Inside a Water Quality Buffer?: NO	
Post Construction District	
Jurisdiction:	Charlotte
District:	West Catawba

FEMA Flood Information	
FEMA Panel #:	3710453700J
FEMA Flood Zone:	OUT
FEMA Panel Date:	03/02/2009
Community Flood Information	
Community Flood Zone:	OUT
Watershed Protection Districts	
Watershed Name:	LONG
Watershed Class:	

Building Photography

PHOTO #1
Location: 2524 GEMWAY DR



Information contained within this photo may be used as a visual aid and to generally locate, identify, and inventory parcels in Mecklenburg County, North Carolina. There are inherent errors and limitations associated with this type of electronic medium. Mecklenburg County cannot warrant or guarantee the information contained herein including but not limited to its accuracy or completeness.

Powered by

MECKLENBURG COUNTY GIS

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

Real Estate Lookup

Print

Close

Parcel Information

Parcel ID	Account	Parent	Previous
03706123	NC CORP		

Owner(s)

Owner Name	Mailing Address	City/State
SFRH CHARLOTTE RENTAL LLP	5531 EQUIPMENT DR STE B	CHARLOTTE NC 28262

Legal Information

Legal	Municipality	Date Annexed	Special District	Fire District	Acreage
L20&21 BC M10-1	CHARLOTTE	06/30/2003		CITY OF CHARLOTTE	0

Total Parcel Assessment

Building	Land	Features	Total
Under Reval Review			

Exemptions

Exemption	Year Approved	Review Date	Amount

Sales Information

Sale	Price	Stamps	Qualify	VI	Type	Legal Ref.	Grantor
Jul 10 2013	82000	164	FORECLOSURE	IMP	TRUSTEE DEED	28512-807	VANG,KAO
Jul 30 2004	117500	235		IMP	WARRANTY D	17558-345	MAZZIOTTA,TERESA C
Aug 28 1997	108000			IMP	DEED STAMPS	09226-819	HONEYCUTT CHARLES S

Land Use

Use	Units	Type	Neighborhood	Assessment
R100	1	LT	D711	

Building Information

Bldg	Description	Type	Year	Property Location
1	Single-Fam	RES	1967	2524 GEMWAY DR CHARLOTTE

Bldg	Story	Units	Total SqFt	Heated SqFt	Foundation	Ext. Wall	Grade	Value
1	1 STORY	1	2002	1222	CRAWL SPACE	FACE BRICK -	AVERAGE 03	

Bldg	Heat	Fuel	Fire Place	AC	Fixtures	Bedrooms	Full Baths	3/4 Baths	1/2 Baths
1	AIR-DUCTED	GAS		AC-CENTRAL		3	2		0

Sub Area

Bldg	Description	Size
1	BASE (FIRST FLOOR)	1222
1	PORCH - OPEN - FINISHED	200
1	CARPORT - FINISHED	400
1	UTILITY - UNFINISHED	180

Depreciation

Bldg	Physical	Functional	Economic	Special	Override
1	AV - 21.00%				

Special Features & Yard Items

Bldg	Built	Type	Quantity	Units	Value
1	1967	TERRACE	1	4X8	
1	1992	GARAGE	1	36X17	

Notes

Tax Year	Notes	Note Date

Value Changes

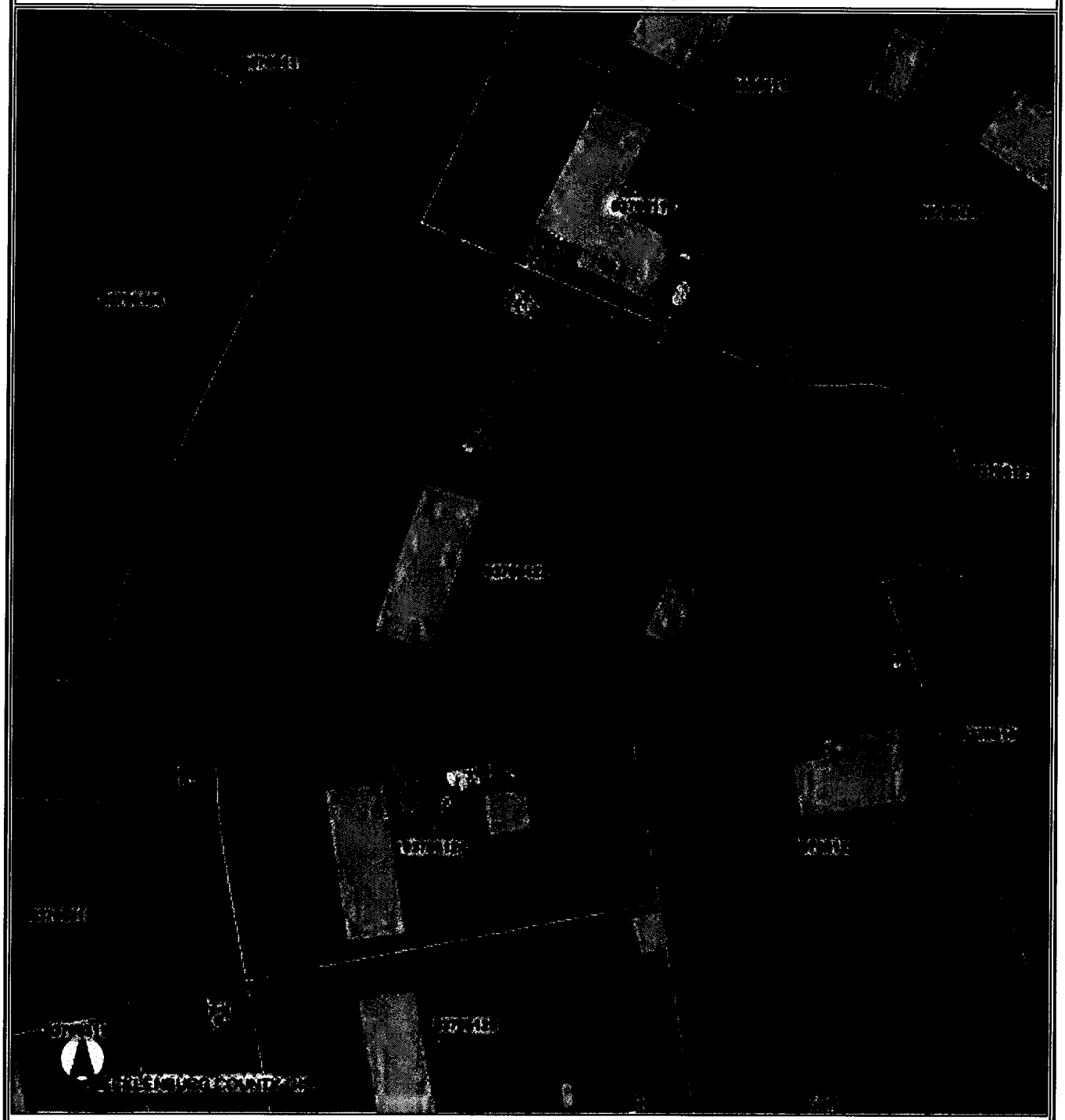
Notice Date	Tax Year	Reason	Changed To	Deferred
Feb 8 2011	2011	Countywide Revaluation	133100	0
Jan 17 2003	2003	Countywide Revaluation	101200	0
Jan 5 1998	1998	Countywide Revaluation	98470	
Feb 19 1993	1993	Remodeled and/or New Addition	86310	
Feb 19 1993	1993	Remodeled Improvements and/or New Additi	86310	
Jan 2 1991	1991	Countywide Revaluation	80190	

Mecklenburg County, North Carolina

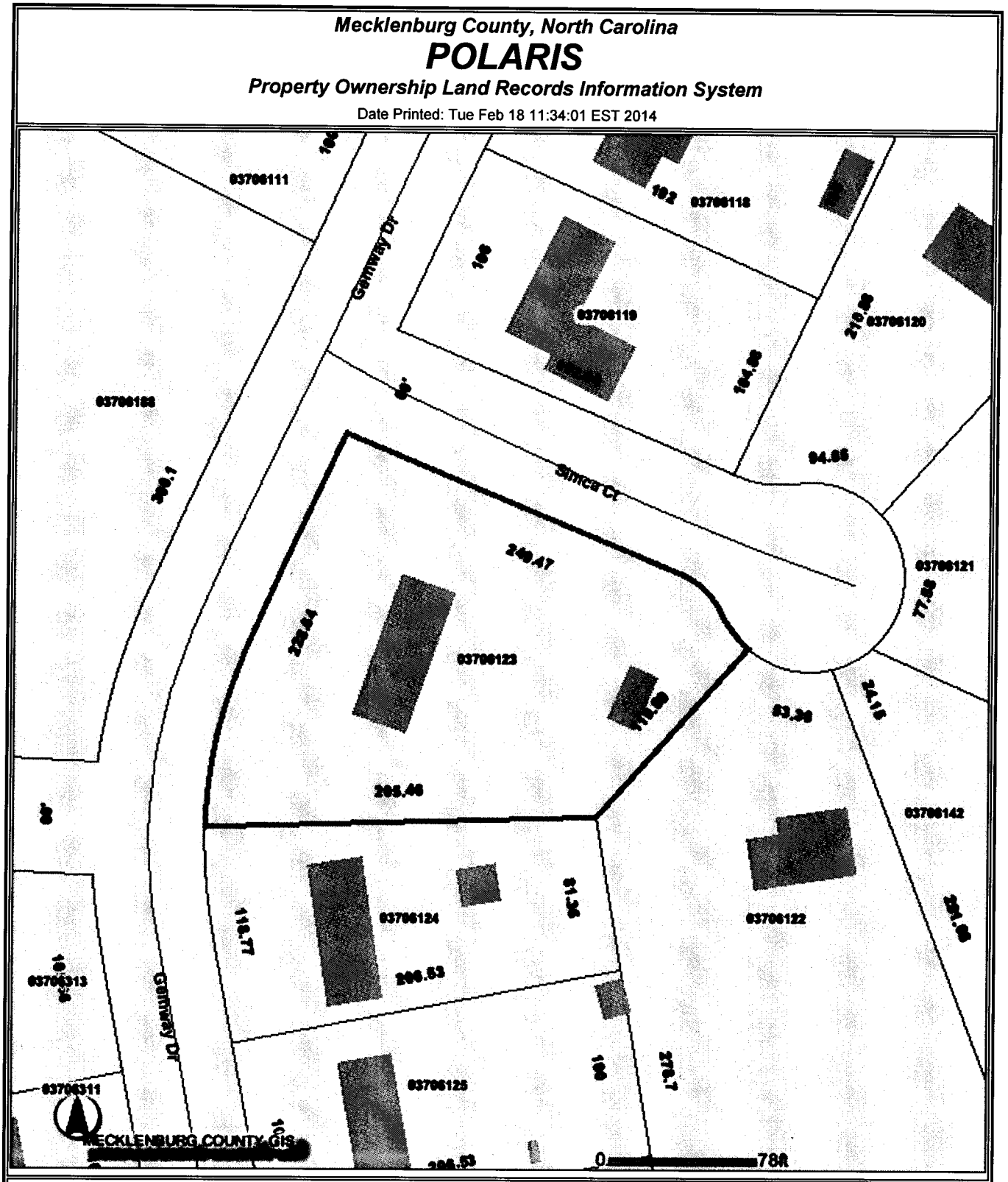
POLARIS

Property Ownership Land Records Information System

Date Printed: Tue Feb 18 11:34:01 EST 2014



This map 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 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.



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400 ☒ Pd. 25.00 Ck# 0665 HB 2-6-92

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APPLICATION FOR SERVICES

#8038A/148B PC ☒ CRT

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

(704)336-5102

PERSON FILING APPLICATION:
NAME: HONEYCUTT, CHARLES S (last) (first) (mi)
ADDRESS: 2524 GEMWAY PHONE: (704) 392-7653
CITY: CHARLOTTE STATE: NC ZIPCODE: 28216

Date: 2-5-92

PROPERTY OWNER:
NAME: SAME /\ (last) (first) (mi)
ADDRESS: _____ PHONE: (__) _____
CITY: STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 037-061-23
STREET ADDRESS: 2524 Gemway Dr
ZONING: _____

Township (check one):
[X] 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: 20/21 LOT SIZE (in acres): 1 1/2 AC

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)
[X] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X) garage
[] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
[] SINGLE MOBILE HOME (S) [X] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [] MODULAR HOME (M) [] OTHER _____ (O)

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 2

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ___ 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)
[X] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[] Swimming Pool [] Jacuzzi [] Stable/Barn [X] Workshop /GARAGE [] None
[X] 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: Charles S Honeycutt Date: 2/6/92

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.

... Use existing system

[] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Philo S. Walker 2/10/92
Environmentalist Date

Kelly Randall 2-10-92
Director or Authorized Section Head Date

WWATER : 122791

RO

PROPOSED PLOT PLAN

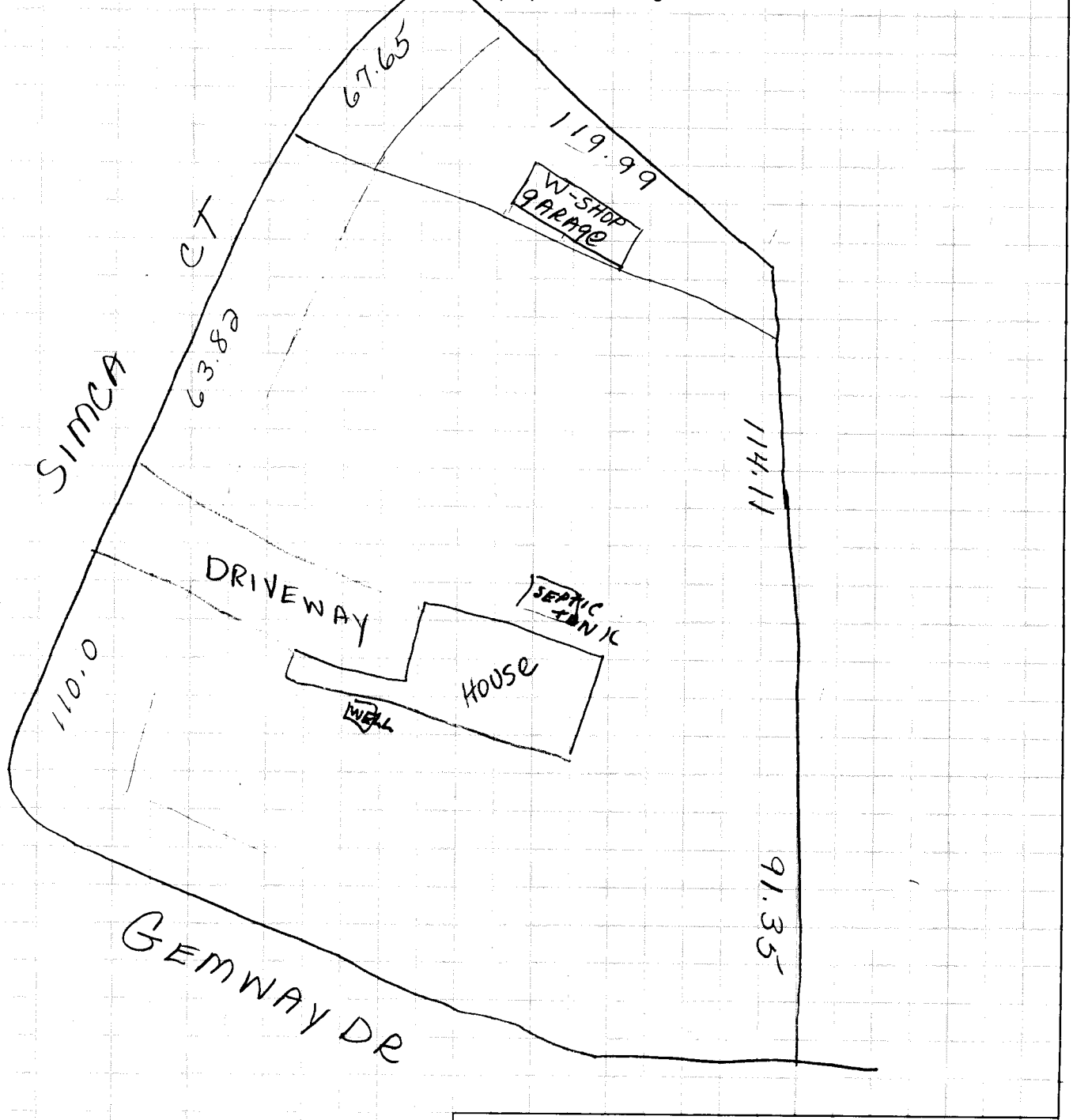
Workshop and garage
AD 2524 Gemway Dr

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

FILE: 8038A /148B

TC: 037-061-23

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.



Signed: _____

Date: _____

PROPOSED PLOT PLAN

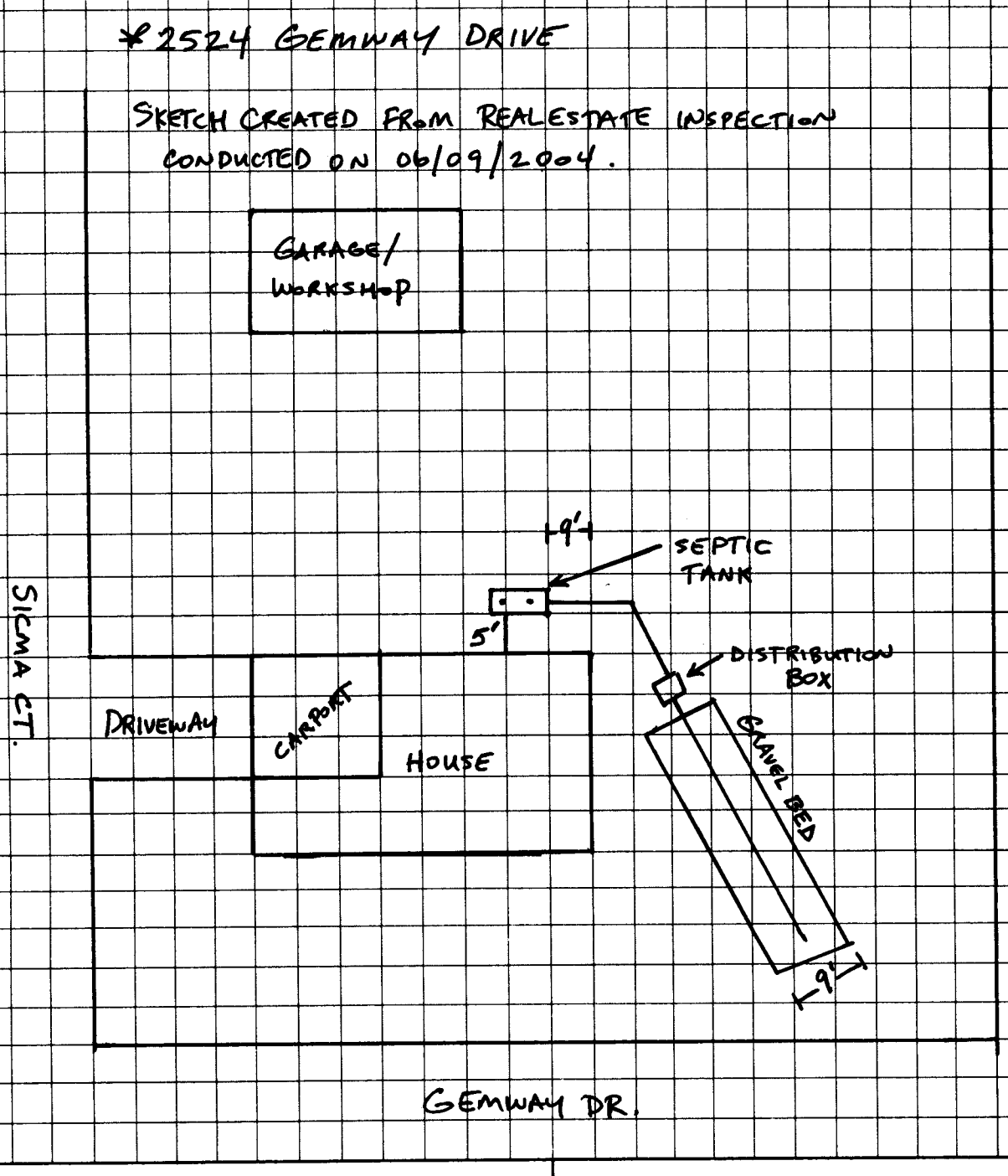
COPY

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

FILE: 8038A/0148B

TC: 037-061-23

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

APPROVAL DATE

DRAWN BY: T. THOMASON 6/9/04

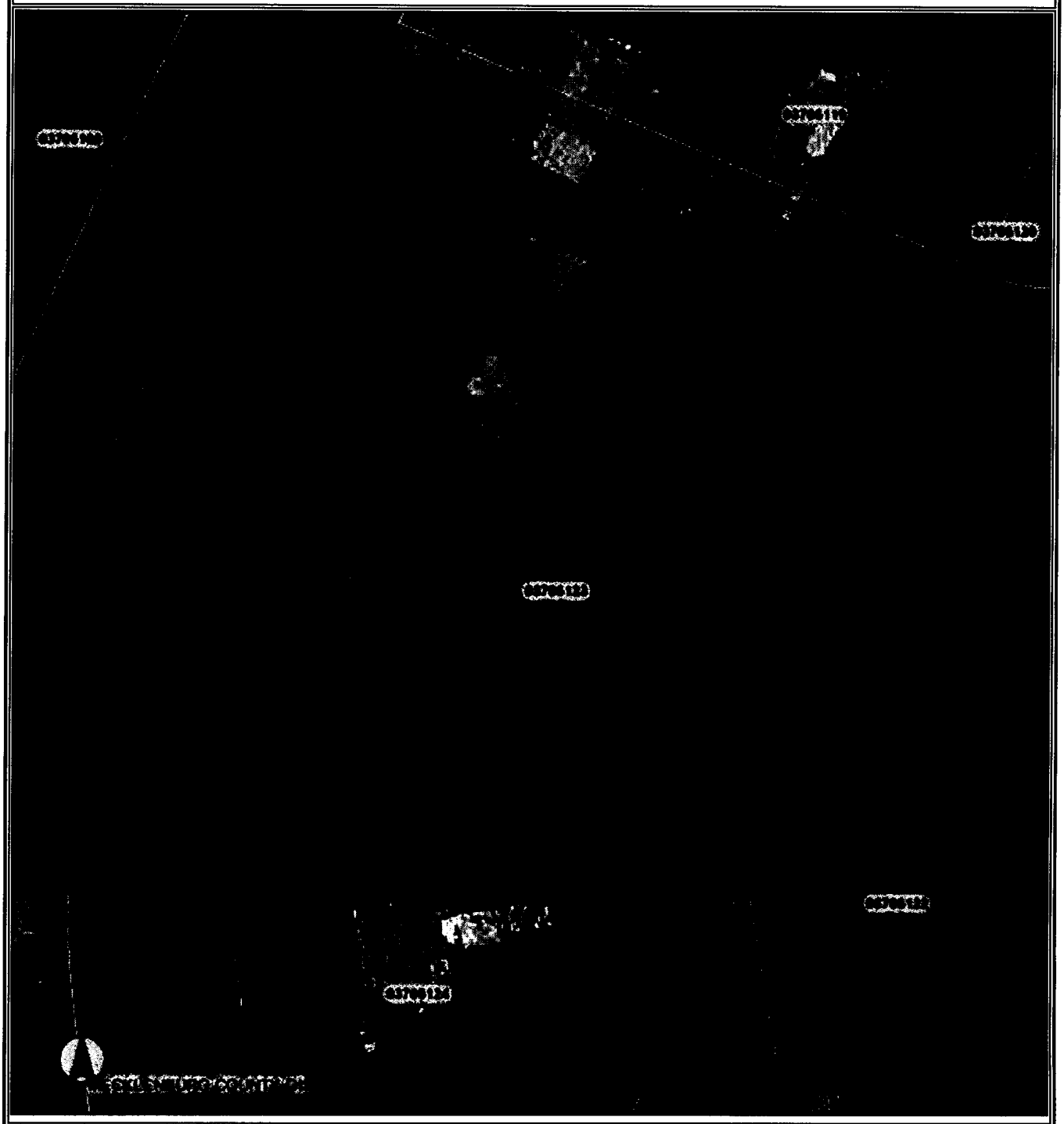
White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Tue Feb 18 11:22:42 EST 2014



This map 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 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.