

14901 BOYD FUNDERBURK DR

12/26/2007

duponbj

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

February 10, 2003

MECKLENBURG COUNTY
Health Department

Jerry M. Funderburk
14901 Boyd Funderburk Dr.
Matthews, NC 28105

Dear Mr. and Mrs. Funderburk:

The North Carolina Administrative Code requires routine maintenance and inspections of certain septic tank systems that utilize pumps. Our records indicate that the required inspection of the Type IIIb septic system, which serves as the wastewater treatment and disposal system for the residence located at 14901 Boyd Funderburk Dr., Matthews, NC. is due.

> In accordance with Section .1900 of the North Carolina Administrative Code, North Carolina Department of Environment and Natural Resources, Division of Environmental Health, On-Site Wastewater Section, Subchapter 10A, Sanitation, states in part: " System management in accordance with Tables V(a) and V(b) of this Rule shall be required for all systems installed or repaired after July 1, 1992."

This department will be making inspections on all systems that fall under this requirement. The fee for this service is $85.00. In addition, if you have a well, a bacterial sample will be collected to help assess the quality of your water supply source. The water analysis will be performed at no additional cost.

The inspection program and the water analysis are very important initiatives intended to protect the public's health while improving and preserving our groundwater resources. We highly recommend and prefer that you contact our office to make an appointment for the inspection of your system. If we have not heard from you by February 26, 2003 we will proceed with our inspection activities on your property. You will be apprised of our assessments and recommendations for the continued efficient operation of your septic tank system.

To set up an appointment for an inspection, or if you should have any questions regarding this matter, please feel free to contact me at (704) 336-5571.

Sincerely,

David Cornelius, R.S.I., Coordinator
Managed Systems Program
Individual Water and Wastewater Systems

Enclosure: Inspection Statement

INSPECTION STATEMENT
MECKLENBURG COUNTY HEALTH DEPARTMENT

Jerry M. Funderburk
14901 Boyd Funderburk Dr.
Matthews, NC 28105

Please Make Check Payable To:

Mecklenburg County Health Department
700 N. Tryon Street Suite 211
Charlotte, NC 28202

Note: THIS COMPLETED FORM MUST ACCOMPANY PAYMENT!

DESCRIPTION OF PROPERTY

Name	Site Address	Tax Parcel	File Number	System Type
Jerry M. Funderburk	14901 Boyd Funderburk Dr.	21514103	1619B	IIIb
				Total Amount Due: $85.00

Please use the following space below, to make any corrections to property information.

Name _____

Site Address _____

_____

# of Bedrooms _____

BILL INFORMATION

Billing Date: 2/10/03

Payment Due Date: 3/10/03

Direct Questions Concerning This Bill to .....(704) 336-5571

☐ *Please check if you have a well.*

Make Check Payable To Mecklenburg County Health Department
Your Cancelled Check Is Your Receipt

DO NOT SEND CASH

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 1619-B DATE: 3-6-98

TC: 215141-20 03 ☒ L ☒ CRT

SERIAL Nº 17490 40

Name of Owner JERRY FUNDERBURK Juris.:

Address of Property 14910 IDLEWILD ROAD

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400

Number of Lines 4 @ 100

Cover Depth 18" SOIL

Water Supply Source ~~375'~~ WELL

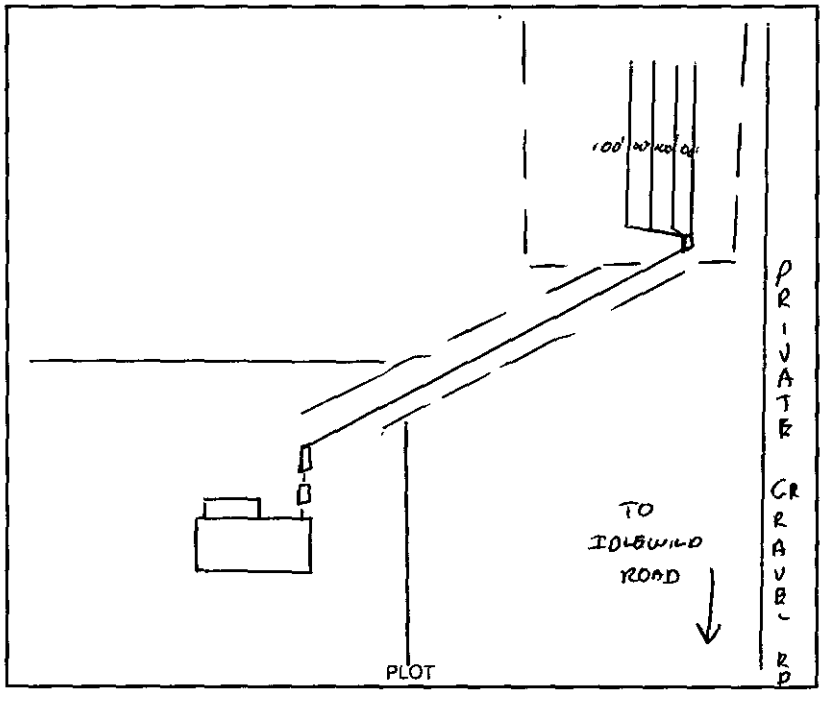
Distance to Water Source >75'

Excavation Inspected 10-24-97

Tank(s) Inspected 10-24-97

Wash Line Inspected NA

High Water Alarm Inspected 3-6-98



Design 1500 ST 1000 OT P1 MOD 1200 SF T 12 C CTR# BOBBY HOWELL

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 I5A 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 I5A 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: SYSTEM TYPE III B

Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

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

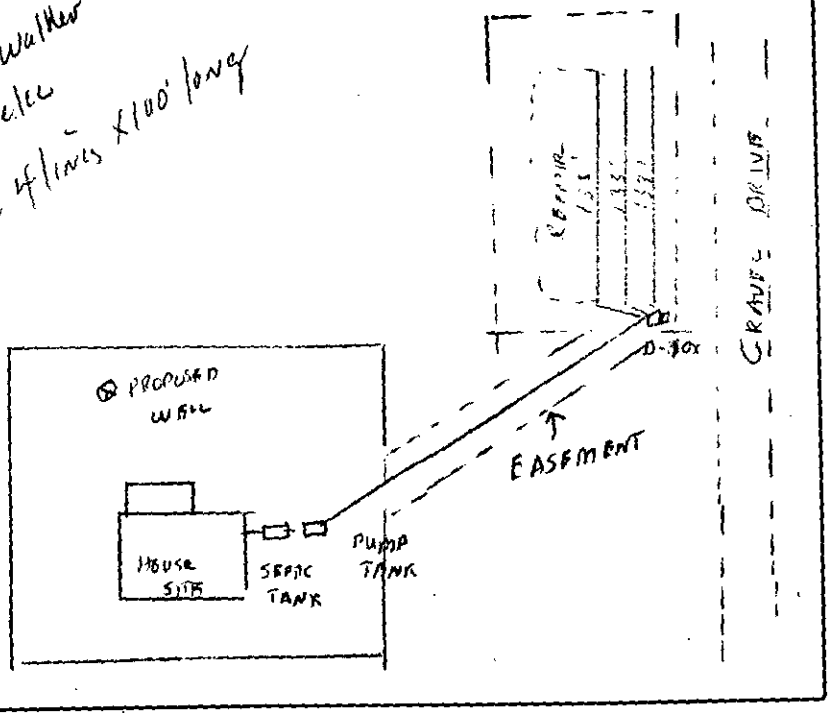
FILE: 1619-B DATE: 10-22-96

TC: 215-141-03 ☐ L

SERIAL Nº 17341

Permission is hereby given to ✓ 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 the application dated 10-21-96. All work shall be completed on or before 11-22-97, after which date this permit 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 the granting of this permit. A Certificate of Completion or 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 or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

10/24/97 Inspected w/ D. Walker everything but elec Drainfield 4 lines x 100' long



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank _____ gallons

Tank Construction PCC

Trench Depth 24"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous ✓

Total Line Length 400 feet

Number of Lines 3 @ 133'

Depth of Stone 12" inches

Distance from House 160' feet

Distance from Property Line 10' feet

Distance from Well 250 feet

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

NAME OF OWNER JERRY FUNDERBURK

LOCATION OF PROPERTY 14910 IDLEWILD RD

Comments: 1500 SEPTIC TANK, 1000 DT, 3 LINES @ 133', 36" WIDE, 12" STONE KEEP SEPTIC SYSTEM 250' FROM WELL. PUMP TO WASHBOX, THEN FEEDING TO D-BOX

Phyllis S. Walker R.S.

Environmental Health Specialist

WHITE - HEALTH DEPARTMENT's COPY • CANARY - E.H.S. COPY • PINK - OWNER OR AGENT's COPY

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

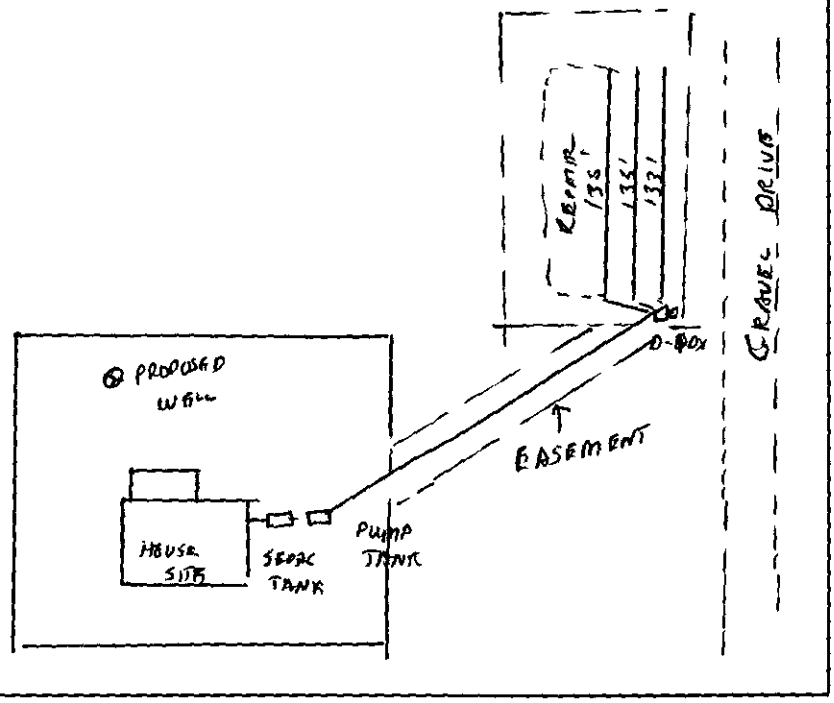
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 1619-B DATE: 10-22-97

TC: 215-141-03 20-Hour ~~X~~ L Mail filed

SERIAL Nº 17341

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PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank _____ gallons

Tank Construction PCC

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Absorption and/or Nitrification Lines:

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Comments: 1500 SEPTIC TANK, 1000 DT, 3 LINES @ 133', 3FT WIDE, 12" STONE KEEP SEPTIC SYSTEM 250' FROM WELL & PUMP TO WASHBOX, THEN FEEDING TO D-BOX

Phillip S. Walker R.S.
Environmental Health Specialist

WHITE - HEALTH DEPARTMENT's COPY • CANARY - E.H.S. COPY • PINK - OWNER OR AGENT's COPY

Mecklenburg County
Health Department

October 27, 1997

Jerry Funderburk
14900 Idlewild Road
Matthews, NC 28105

Re: 14910 Idlewild Road
File: 1619B
Parcel: 215-141-03

Dear Mr. & Funderburk:

At your request an inspection was made at the above referenced property to facilitate the issuance of an Operation Permit for the Sewage Treatment and Disposal system. During the inspection it was found that the following items did not meet the regulations set forth in the "Laws and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A .1900;.1952 Septic Tank, Dosing, Dosing Tank and Lift Station Design." Our comments follow:

1) (6) Pump and control circuits shall be provided with manual circuit disconnects within a watertight, corrosion-resistant, outside enclosure (NEMA 4X or equivalent) adjacent to the pump tank, securely mounted at least 12 inches above the finished grade. The pump(s) shall be manually operable without requiring the use of special tools or entrance into the tank for testing purposes. Conductors shall be conveyed to the disconnect enclosure through water proof, gasproof, and corrosion-resistant conduits, with no splices or junction boxes provided inside the tank. Wire grips, duct seal, or other suitable material shall be used to seal around wire and wire conduit openings inside the pump tank and disconnect enclosure.

2) (9) The pump tank shall have a properly functioning high-water alarm. The alarm circuit shall be supplied ahead of any pump overload and short circuit protective devices. The alarm shall be audible and visible by system users and weatherproof if installed outdoors in an enclosure (NEMA 4X or equivalent).

The above mentioned items must be installed and inspected prior to the Operation Permit being issued. The Operation Permit is required for the Certificate of Occupancy and the permanent electric hook-ups. Please schedule the inspections at least five (5) working days in advance to ensure no delays in the Operation Permit issuance.

Please call me at 336-5570 to discuss any question you may have concerning this matter.

Sincerely,

Philo S. Walker, R.S.
Individual Water and Wastewater Systems

PW:gc

chk # 1486

FEE: 200.00 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: 12/13/96 **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: 12/16/96 PERMIT NO: 1619B 63
PARCEL NO: 215-141-20

JOB LOCATION ADDRESS: 14910 Idlewild Rd
PROPERTY OWNER: Jerry M. Funderburk
BUILDING CONTRACTOR:
SUBDIVISION NAME: NA
AUTHORIZATION ISSUED BY: Iqbal B. Malik RS DATE: 12/16/96
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 1619B, AND THE ATTACHED SITE PLAN WITH SYSTEM DETAILS. CONSTRUCTION AND INSTALLATION MUST ALSO MEET ALL REQUIREMENTS SET FORTH IN THE RULES GOVERNING SANITARY SEWAGE COLLECTION, TREATMENT, AND DISPOSAL AND ANY OTHER APPLICABLE RULES AND LAWS.

2. AN INSTALLATION, CONSTRUCTION, ALTERATION AND/OR REPAIR APPROVAL MUST BE SECURED **PRIOR** TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH MECKLENBURG COUNTY HEALTH DEPARTMENT.

3. ANY ALTERATION IN SITE OR SOIL CONDITIONS (INCLUDING LOCATION OF STRUCTURES AND APPURTENANCES) OR MODIFICATION IN USE, DESIGN WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS AS SPECIFIED IN THE ASSOCIATED IMPROVEMENT PERMIT AND APPLICATION, MAY SUBJECT THIS AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: See conditions of Improvement Permit + associated plot plan
See Agreement Forms on File AND Easement Form on File.

OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITIONS OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

Irma L. Funderburk 12-16-96
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

CONDITIONS OF IMPROVEMENT PERMIT

Permit Number: 1619B House Tax Number: 215-141-20

14910 Idlewild Rd Mainfield 215-141-03

- The IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be NO grading, filling or disturbance of the soil in the area of the septic tank system or repair area.
- CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a Building Permit. The Construction Authorization is NOT transferable. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.
- Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

Basement	___ Yes	✓ No	___ Partial Basement
Type Primary Wastewater System Type (circle one): I II (III) IV V VI	✓ Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1

3 Long-term acceptance rate	360 Max gallons/day wastewater flow	1197 Absorption Area (sq ft)	9' Trench spacing (min. on centers)
Yes Serviced by private well	1500 Gallon septic tank	399 Total trench length (ft)	~31" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)
3 Bedrooms in residence	1000 Gallon pump tank	12" Depth of stone	

Any surface waters present: NO Type: Minimum separation distance:

Site modifications required: NO

Additional Conditions: (1) one step down per nitrification line.
(2) keep installation 100' from any well.
(3) keep installation of supply line & nitrification field within easement as specified on plot plan.

Repair Area System Type Type (circle one): I II (III) IV V VI	___ Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	✓ (Innovative) or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1

900 Absorption Area (Sq ft) 300 Total Trench Length (Ft)	NA Depth of Stone Trench	9' Trench spacing (min. on centers)	~30" Maximum Trench Depth

For existing system, enter the year originally installed: NA

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 Sewage, 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
- Improvement Permit Valid 5 years from date of issuance.
- This Improvement permit is transferable.

Joe B. Mialik, RS 12/16/96
DEHNR Authorized Agent Date

Irma L. Funderburk 12-16-96
Owner/Agent Signature Date

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

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

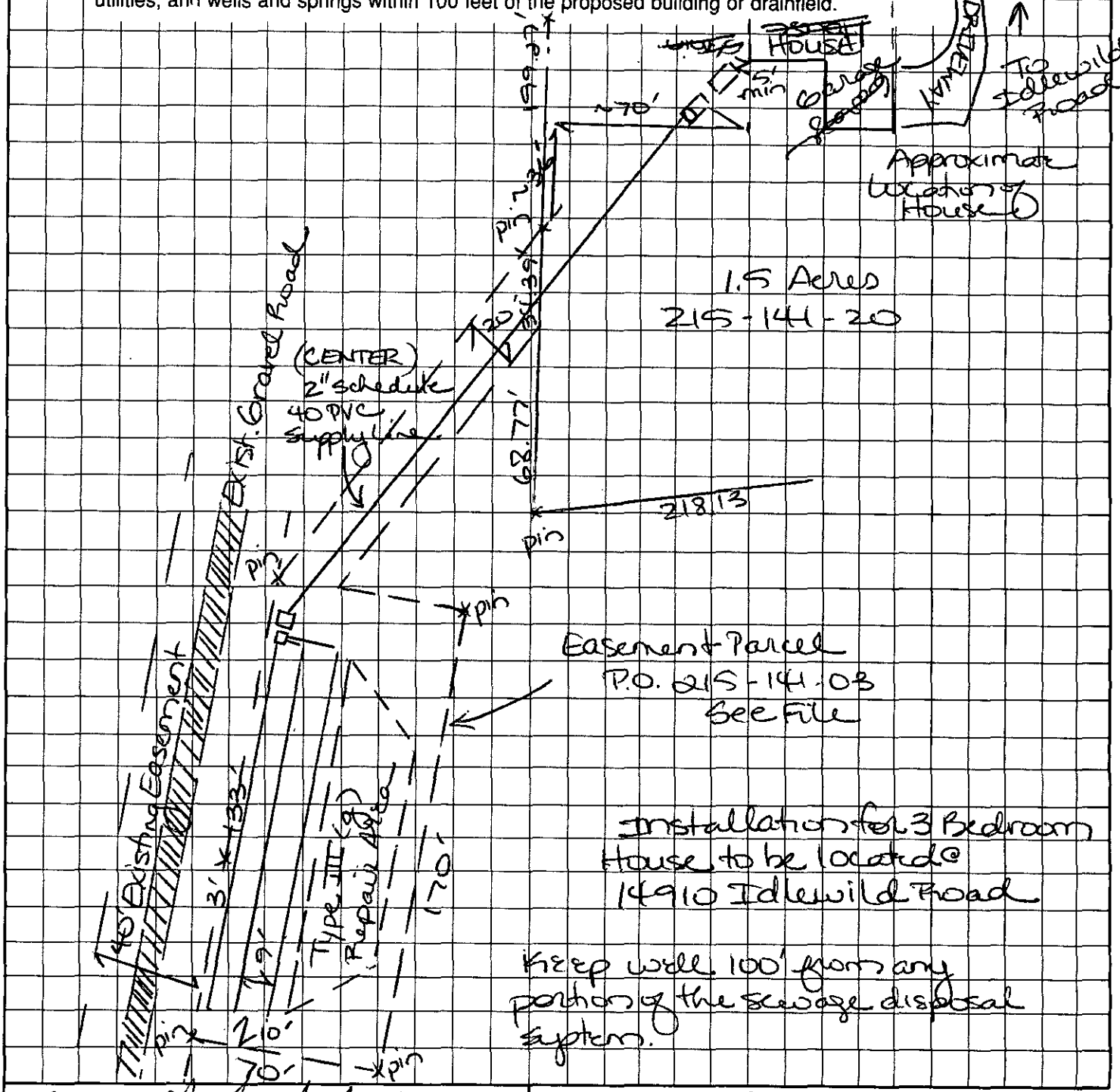
PROPOSED PLOT PLAN

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

FILE: 1619B

TC: 215-141-20

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.



Irma L. Funderburk
OWNER/AGENT SIGNATURE

DATE 12-16-96

APPROVAL DATE Joe B. Mialik, RS
12/16/96

pg 1 of 2

White - Health Department's Copy

Canary - E.H.S. Copy

Pink - Owner's Copy

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

4x40

Sheet
PROPERTY ID #:
COUNTY:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

#3
1619 B
PO 215-14103

OWNER: Jerry M. Funderburk
ADDRESS: 14900 Idlewild Rd. Matthews
PROPOSED FACILITY: residence
LOCATION OF SITE: off Idlewild Road

APPLICANT:
APPLICATION DATE:
PROPOSED DESIGN FLOW (.1949): 360gpd
DATE EVALUATED:
PROPERTY SIZE: 1.5
PROPERTY RECORDED:

WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	5-10 % .1940 LANDSCAPE POSITION/ SLOPE %	HORIZON 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 & LTA
1	B	0-4"	gr/sl	Fr/sEAP/NS/NP	> 17" to Chroma 2	17"	N/A	None	US
		4-17"	sBK/c	Fr-VFi/EXP/VS/VP					
2	B	0-6"	gr/sl	Fr/sEAP/NS/NP	> 31" to chroma 2	31"	N/A	None	US III 125gpd
		6-31"	sBK/c	Fr-Fi/sEXP/S/P					
3	A	0-6"	gr/sl	Fr/sEAP/NS/NP	2.5Y 6/1 @ 24"	27"	N/A	None	US
		6-12"	sBK/sc	Fr-Fi/sEAP/S/P					
		12-27"	sBK/sc	Fi-VFi/EXP/VS/VP					
4	B	0-2"	gr/sl	Fr/sEAP/NS/NP	2.5Y 6/2 @ 22"	23"	N/A	None	US
		2-23"	sBK/sc	Fr-VFi/EXP/VS/VP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (1945)	US	US

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): Unsuitable
EVALUATED BY: W. R. Marlin LSS 11-7-96

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

Sheet
PROPERTY ID #:
COUNTY:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

1619B

OWNER: _____ APPLICANT: _____
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 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTA
5	A	0-3"	gvl sl	FvI SE XPI NS/NP	7.5" To Chroma 2	25"	N/A	None	U S
		3-6"	sBK sc	FvI SE XPI SS/SP					
		6-25"	sBK C	VFi E XPI VS/VP					
6	A	0-3"	gv sl	FvI SE XPI NS/NP	7.13" To Chroma 2	13"	N/A	None	U S
		3-13"	sBK C	VFi E XPI VS/VP					
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: _____

COMMENTS: 100% Repair.

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL 1955 LTAR	LPP 1957 LTAR	MINERALOGY/ CONSISTENCE	STRUCTURE
C (Concave Slope) V (Convex Slope) (Drainage Way) S (Debris Slump) P (Flood Plain) S (Foot Slope) (Head Slope) (Linear Slope) (Nose Slope) (Ridge) (Shoulder Slope) (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) SUC (Silt Loam Clay)	0.6 - 0.3	0.3 - 0.15		
					MOIST	WET
	IV	SC (Sandy Clay) SIC (Silty Clay)	0.4 - 0.1	0.2 - 0.05	VFR (Very Friable) FR (Friable) FI (Firm) VFI (Very Firm v. Very Sticky) EFI (Extremely Firm)	NS (Non-sticky) SS (Slightly Sticky) S (Sticky) VS (Very Sticky) NP (Non-plastic) SP (Slightly Plastic) P (Plastic) VP (Very Plastic)
		O (Organic)	None			

OILS

ORIGIN DEPTH In inches below natural soil surface

TYPE OF FILL In inches from land surface

RESTRICTIVE HORIZON Thickness and depth from land surface

SAPROLITE S(suitable) or U(unsuitable)

WATER 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 designatio

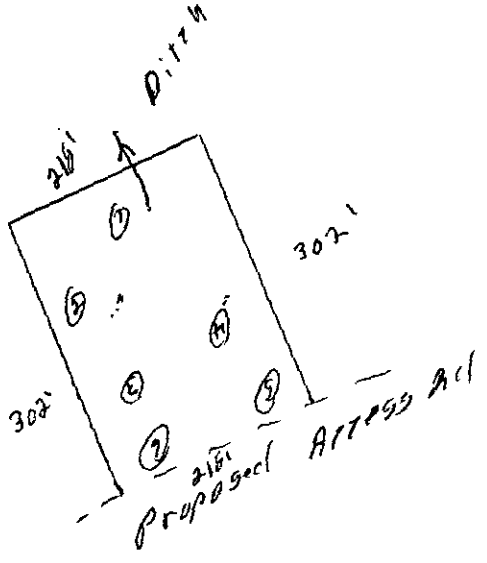
CLASSIFICATION S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

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

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

1619B



Idlewild Rd

BK: 08857 PG: 0912/0914 #:0053 13.05
JUDITH A GIBSON REG OF DEEDS MECK NC
FILED FOR REGISTRATION 12/16/96 09:34

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

WASTEWATER TREATMENT AND DISPOSAL SYSTEM DESIGN AGREEMENT: 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c); OR .1969

FILE # 1619 B
PARCEL # 215-141-20

The undersigned, JERRY M. FUNDERBURK, owner of property located at 14910 IDLEWILD RD, MATTHEWS, NC, (the "site") and described in an instrument recorded in Book 27 at Page 843, Mecklenburg Public Registry, hereby acknowledges that the undersigned applied to the Mecklenburg County Health Department (the "Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 15A NCAC 18A .1900 et seq.; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data, and other information which indicate to the Department that the septic tank system proposed by the undersigned is allowed by the rules; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is the responsibility of the designer, owner, developer, installer, or user of the system, as applicable, and that neither the Department nor its officials, employees, or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further acknowledges that the following conditions will apply to the site:

- Any changes on the property may make the Improvement Permit Null and void and may make the Improvement Permit subject to revocation.

This instrument was prepared by: JERRY M. FUNDERBURK
Mail after recording to: JERRY M. FUNDERBURK
14900 IDLEWILD RD, MATTHEWS NC 28105

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees, and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, this 16th day of December, 1996.

_____ (SEAL)
(Corporate Name)

By: _____

_____ President

ATTEST:

_____

_____ Secretary

(Corporate Seal)

Jerry M Funderburk (SEAL)

_____ (SEAL)

_____ (SEAL)

_____ (SEAL)

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, NELL C HENDERSON, a Notary Public for said County and State, do hereby certify that JERRY M FUNDERBURK personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 16th day of December, 1996.

NELL C. HENDERSON NOTARY PUBLIC MECKLENBURG COUNTY

Nell C Henderson
Notary Public

My Commission Expires:
March 19, 2000

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

OWNER'S ACKNOWLEDGMENT OF MODIFIED/ALTERNATIVE REPLACEMENT SYSTEM REQUIREMENT

Site Address: 14910 IDLEWILD RD, MATTHEWS NC 28105

File Number: 1619 B

Parcel Number: 215-141-20

Owner/Agent Name: JERRY M. FUNDERBURK
(Please print)

Date: 12-16-96 Number of Bedrooms: 3

Receipt of the plan and specifications for a conventional system of sewage 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 - "Sewage Treatment and Disposal Systems." The plan as submitted is disapproved because there is not sufficient available space for a repair area for a conventional replacement system.

This site may be developed if the repair area is found to be acceptable for either a modified system (Rule .1956) or an alternative system (Rule .1957) for the replacement system as allowed by the following Rule 15A NCAC 18A .1945(b).

(b) Sites shall have sufficient available space for a repair area separate from the area determined in Paragraph (a) of this Rule. The repair area shall be based upon the area of the nitrification field required to accommodate the installation of a replacement system as specified in Rule .1955, .1956, or .1957 of this Section. Prior to issuance of the initial Improvement Permit for a site, the local health department shall designate on the permit the original system layout, the repair area, and the type of replacement system.

Please be advised that you have the right of an informal review by this Department and the right of appeal under G.S. 130A-335(g) and 130A-24, which appeal can be held in Mecklenburg County.

By signing this form, and signing and recording in the Mecklenburg County Register of Deeds Office the attached reclassification form entitled, **WASTEWATER TREATMENT AND DISPOSAL SYSTEM DESIGN AGREEMENT: 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c)**, or .1969, you the property owner, understand and acknowledge your option to develop this site initially with a

conventional sewage system and when needed, subsequently to repair or replace said system with a modified or alternative system as described in Rules .1956 "Modification to Septic Tank Systems," or .1957(a), (b), or (c) "Design Criteria for Design of Alternative Sewage Systems." The completed reclassification form must be approved by this office before it can be recorded.

In addition, you the property owner, also understand that the following conditions will apply:

- Any changes on the property may make the Improvement Permit null and void and may make the Improvement Permit subject to revocation.

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement system.

Lisa B. Mialik, RS — 12/16/96

Environmental Health Specialist — Date

I have reviewed this document and understand its provisions and implications concerning the issuance of the Improvement Permit for the above-referenced site.

Jerry W. Lunsford — 12-16-96

Property Owner Signature — Date

700 North Tryon Street, Suite 211, Charlotte, North Carolina 28202,
(704) 336-5102

BK: 08857 PG: 0904/0911 #:0052 24.45
JUDITH A GIBSON REG OF DEEDS MECK NC
FILED FOR REGISTRATION 12/16/96 09:34

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

SEPTIC TANK DRAIN FIELD EASEMENT DECLARATION AND AGREEMENT

This DECLARATION AND EASEMENT made this 16TH day of DECEMBER, 1996, by and between JERRY M. FUNDERBURK, ("Declarant"), and any and all persons, firms or corporations hereafter acquiring any of the lots referred to herein.

WITNESSETH:

WHEREAS, Declarant is the owner of the Easement Parcel and the Benefitted Parcel, as described herein; and

WHEREAS, Declarant wishes to create a Septic Tank Drain Field Easement to control the development and the use of the Easement Parcel and the Benefitted Parcel for the protection of the owner of the Benefitted Parcel and the future owners thereof.

NOW, THEREFORE, Declarant hereby declares that the Easement Parcel and the Benefitted Parcel, as hereinafter defined, shall be held, sold and conveyed subject to the following Easement, which shall run with such parcels and be binding on all parties having any right, title or interest in such parcels, their heirs, successors and assigns, and shall be binding upon each owner thereof.

Declarant hereby creates an Easement as hereinafter described, to run with the land, upon that certain lot or parcel of land owned by Declarant, referred to herein as the "Easement Parcel", and located in the City of MATTHEWS, MORNINGSTAR Township, Mecklenburg County, North Carolina, and more particularly described as follows:

Mecklenburg Tax Parcel No. PO#215-141-03, as shown on a page of the County Tax Map attached hereto as Exhibit A
Lot NA Block NA of NA recorded in Map Book 5164 Page 521 (if applicable)

See the plat attached hereto as Exhibit B for the legal description of the parcel labeled thereon as the "Easement Parcel" and of the Septic Tank Drain Field Easement Area located thereon.

This instrument was prepared by: JERRY M. FUNDERBURK
Mail after recording to: JERRY M. FUNDERBURK
14900 IOLEWILD RD, MATTHEWS NC 28105

Declarant hereby imposes said Easement for the benefit of itself as the present owner and for the benefit of future owners of the following lot or parcel of land, referred to herein as the "Benefitted Parcel", situated in the City of MATTHEWS, MORNINGSTAR Township, Mecklenburg County, North Carolina, and more particularly described as follows:

Mecklenburg Tax Parcel No. 215-141-20, as shown on a page of the County Tax Map attached hereto as Exhibit A
Lot NA Block NA of NA recorded in Map Book 27 Page 843 (if applicable)

See the plat attached hereto as Exhibit B for the legal description of the parcel labelled thereon as the "Benefitted Parcel".

Said Easement shall enable the owner of the Benefitted Parcel to place, if, as and when needed, such need to be determined by the owner of the Benefitted Parcel in his sole discretion, a septic tank and drain field or portions thereof, upon the Septic Tank Drain Field Easement Area on the Easement Parcel and to inspect, maintain, repair and replace the components of said septic tank and drain field at any time and from time to time. If the Easement Area also includes a connector strip for ingress and egress, the owner of the Benefitted Parcel shall have the right to use said connector strip for access as needed. ***This Easement may not be altered, amended or cancelled without the express written permission of the Mecklenburg County Health Department, which written permission must be part of any document recorded to alter, amend or cancel this Easement.*** This Easement shall automatically expire, however, should the owner of the Benefitted Parcel ever hook up the structure located or to be located on the Benefitted Parcel to a public or community sanitary sewage system but shall otherwise be perpetual.

Declarant as the owner of the Easement Parcel acknowledges that the Septic Tank Drain Field Easement Area cannot be used and will not be used for any of the following activities or in any of the following ways:

- Grading or filling
- Parking or driving heavy equipment in the area or in any other way compacting the soil in the Area
- Excavating soil from the Area
- Placing footings or foundations or engaging in any other construction activity in the Area
- Placing in-ground or above-ground swimming pools in the Area
- Placing irrigation systems in the Area
- Placing underground utility lines or cables in the Area
- Planting trees or gardens in the Area
- Removing any large trees in the Area unless dead or diseased
- Using the area for the burial of stumps, trash, or any other type of construction material
- Using the Area for gravesites

-- Diverting the natural flow of water onto the Area by way of drainage ditches or diversion ditches or using the Area to receive water from any gutter or downspout discharges

IN WITNESS WHEREOF, the Declarant has hereunto set his/her/their hand(s) and seal(s), or, if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by the authority of its Board of Directors, the day and year first above written.

DECLARANT

_____ Jerry M Funderburk (SEAL)
(Corporate Name)

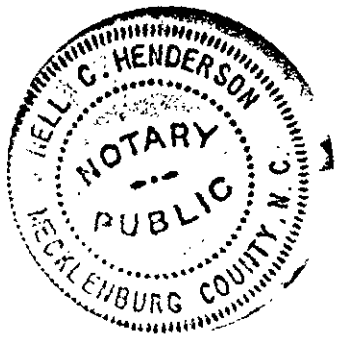
BY: _____ _____ (SEAL)
_____ President

_____ (SEAL)

ATTEST:

_____ _____ (SEAL)
_____ Secretary (Corporate Seal)

SEAL-STAMP



North Carolina, Mecklenburg County

I, a Notary Public of the County and State aforesaid, certify that Jerry M Funderburk, Declarant, personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official stamp or seal, this 16th day of December, 1996.

My Commission Expires: 3-19-2000 Nell C Henderson
(Notary Public)

Surveyed By: Ben M. Flowe & Son;
11316 Brief Road
Charlotte, N.C.
28227
(704) 545-3060

Gregory S. Flowe 12/02/96

NORTH CAROLINA REGISTERED SEAL L-3600 LAND SURVEYOR GREGORY S. FLOWE

Grid North NAD 83

R/W Mon.(F)

199.27'

302.43'

I.PIN(S)

34.39'

N 16°16'03" W

(Not to Scale)

68.77'

1.500 Acres

TAX Parcel #215-141-20 (Map Book 27, Page 43)

159.37'

N 19°17'27" E

121.37'

S 19°17'27" W

20.0'

(Not to Scale)

S 65°48'17" W

218.13'

I.PIN(S)

22.37'

N 82°41'24" E 70.00'

47.63'

I.PIN(S)

Exhibit 'B'

Part of Tax Parcel 215-141-03 (MAP Book 5164 Page 521)

Jerry M. Funderburk
5164 / 521

40' Existing Easement

Existing Gravel Drive

170.00

N 07°18'36" W

Septic Tank Easement

170.00'

S 07°18'36" E

Jerry M. Funderburk
5164 / 521

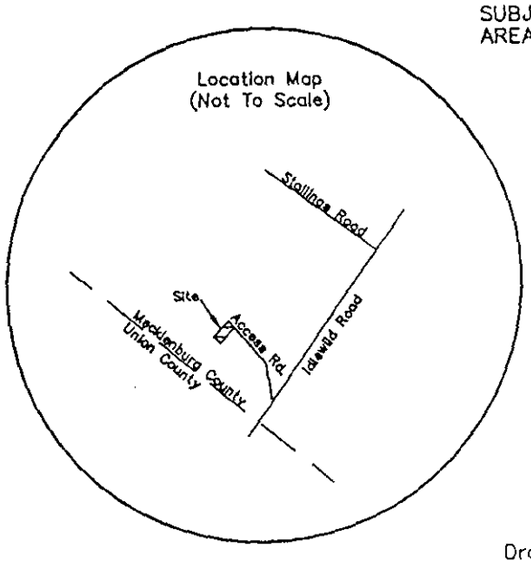
I.PIN(S)

S 82°41'24" W 70.00'

I.PIN(S)

NOTE:
THIS PLAT IS OF A SURVEY OF ANOTHER CATEGORY, SUCH AS THE RECOMBINATION OF EXISTING PARCELS, A COURT-ORDERED SURVEY OR OTHER EXCEPTION TO THE DEFINITION OF SUBDIVISION.

SUBJECT PROPERTY IS NOT LOCATED IN A SPECIAL FLOOD HAZARD AREA AS DETERMINED BY FLOOD INSURANCE RATE MAP.



Tax Parcel: 215-141-3

E.C. = 1' : 10,000' +

Deed Ref: 5164 / 521

Easement Survey
For

Jerry M. Funderburk

Morningstar Township
Mecklenburg County, N.C.

Drawing No. 96600 Scale: 1" = 40' August 20, 1996

PG. 15

BK. 195-11

PG. 13

Exhibit 'A'
This map is not a certified survey & no reliance may be placed in its accuracy.

TAX LINE MAP	BOOK 215	PAGE 14
MECKLENBURG COUNTY, NORTH CAROLINA		
REVISED 11-17-94 BK	SCALE 1" = 400'	

FEE: 100.00
DATE: 10-22-96
Soil 1993

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

1 1 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 #: 1993

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: *215-141-03

STREET ADDRESS: *(Part of) 055 Idlewild Road

SUBDIVISION OR MOBILE HOME PARK NAME: NA

LOT NUMBER:

TYPE OF BUILDING (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 1650 sq ft approx

NUMBER OF BEDROOMS: 3

NUMBER OF OCCUPANTS: 1

FOUNDATION FOR RESIDENCE:

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

TOWNSHIP (CHECK ONE):

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

CLOSING DATE_____

House being moved onto 1.5 acre tract @ 14910 Idlewild Rd

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION: NA (Easement for septic system drainfield)

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	WELL, SPRINGS OR WATERLINES	__ YES ✓ NO
EXISTING WASTEWATER SYSTEMS	__ YES ✓ NO	DESIGNATED WETLANDS	__ YES ✓ NO
EASTMENTS OR RIGHT-OF-WAYS	__ YES ✓ NO		

PROPERTY OWNER:

NAME: Funderburk, Jerry M.
(LAST) (FIRST) (MI)

ADDRESS: 14900 Idlewild Rd.

CITY: Matthews STATE: NC ZIP: 28105

DAYTIME PHONE: (704) 847-6122

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: NA
(LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) - NA

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 10-4-96

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: Jerry M. Funderburk DATE: 10-21-96

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

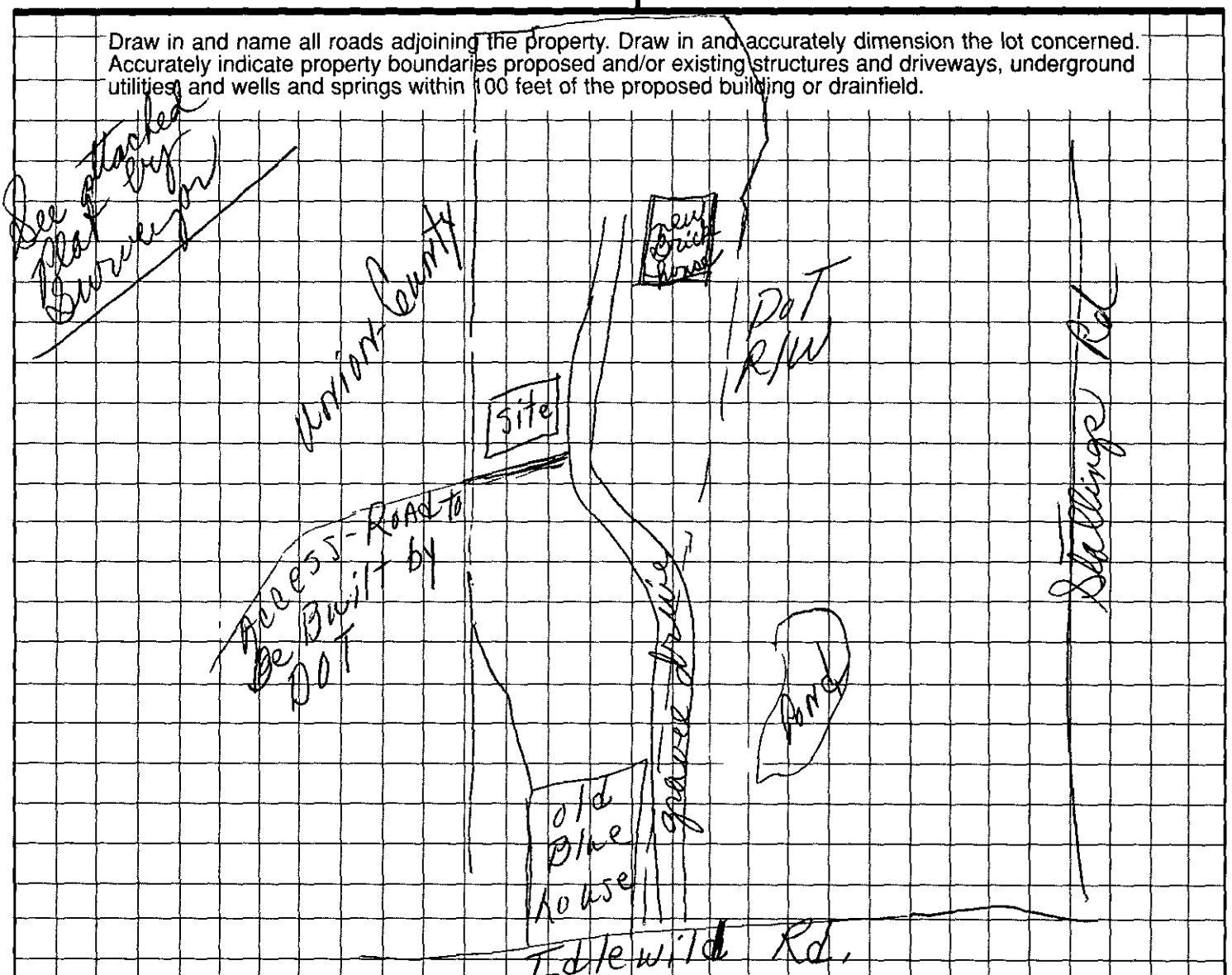
PROPOSED PLOT PLAN

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

FILE: 1619B

TC: PO 215-141-03

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 _____

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

DATE 12-13-96

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION MATT

215-141-20
PARCEL NUMBER

14910 Idlewild Rd.
ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

N/A
PROJECT NAME (IF APPLICABLE)

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

1. SUBDIVISION REGULATIONS	**____APPROVED**	**____NOT APPROVED**
2. FLOODWAY REGULATIONS	**____APPROVED**	**____NOT APPROVED**
3. WATERSHED PROTECTION	**____APPROVED**	**____NOT APPROVED**
4. COMMERCIAL DRAINAGE PLAN	**____APPROVED**	**____NOT APPROVED**
5. PUBLIC UTILITY EASEMENT	**____PRESENT**	**____NOT PRESENT**
6. PROPERTY FRONTS ON THOROUGHFARE	**____YES**	**____NO**
7. DRIVEWAY PERMIT REQUIRED	**____YES**	**____NO**
8. DOES PROJECT CONFLICT WITH ROAD PROJECT?	**____YES**	**____NO**

REMARKS: S.F. House

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE WHEN PAYING PERMIT FEE. CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

ALL OTHER FORMS OBSOLETE

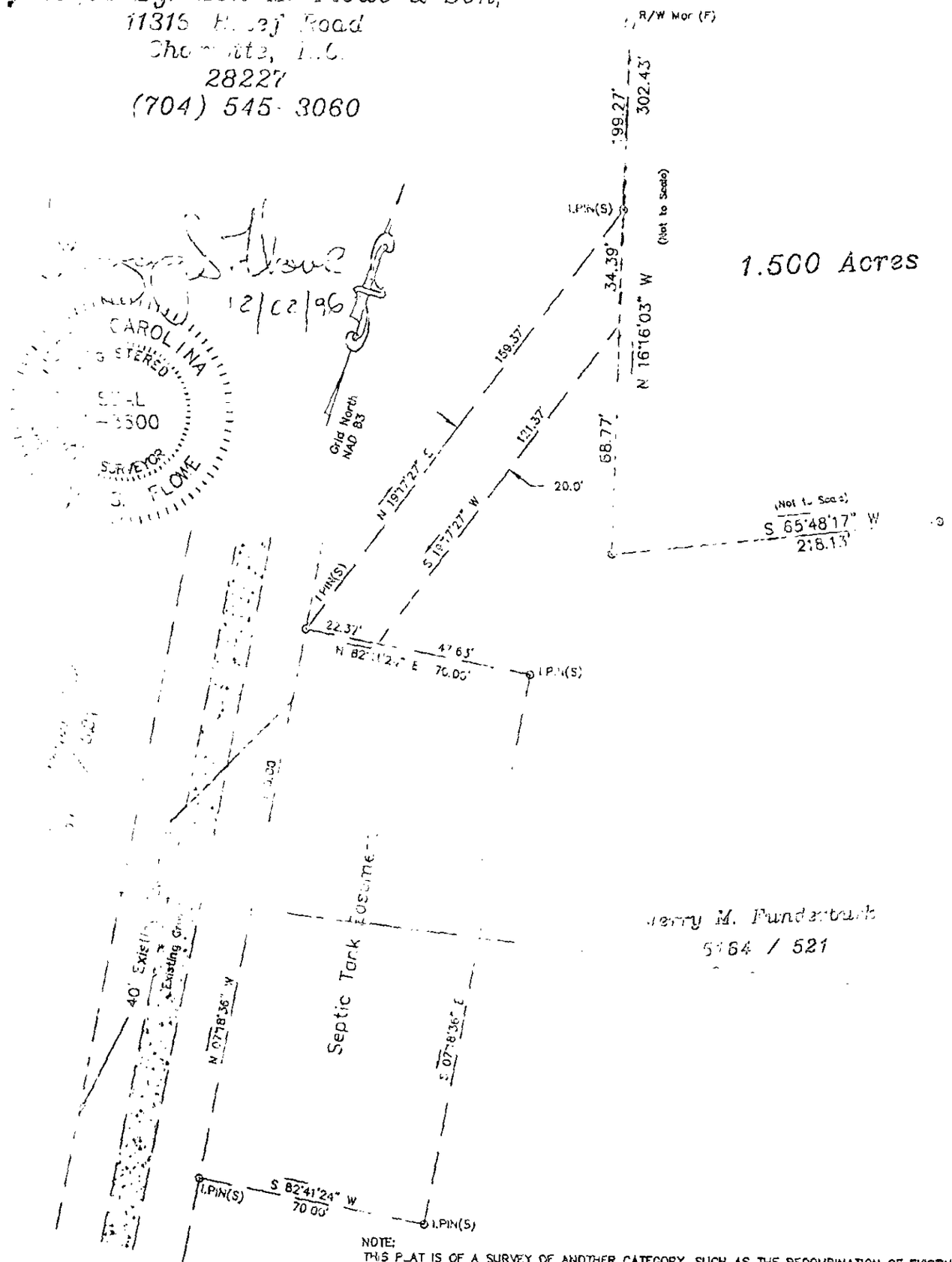
☐ NEW ADDRESS

SIGNED: H. Davis

REVISED 1/91

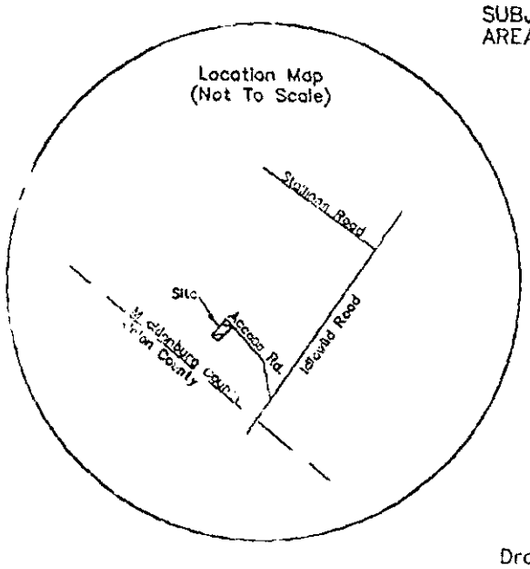
Ms. Lisa Mulik File 1619B

Prepared By: Ben M. Flowe & Son,
11315 [illegible] Road
Charlotte, N.C.
28227
(704) 545-3060



NOTE:
THIS PLAT IS OF A SURVEY OF ANOTHER CATEGORY, SUCH AS THE RECOMBINATION OF EXISTING PARCELS, A COURT-ORDERED SURVEY OR OTHER EXCEPTION TO THE DEFINITION OF SUBDIVISION.

SUBJECT PROPERTY IS NOT LOCATED IN A SPECIAL FLOOD HAZARD AREA AS DETERMINED BY FLOOD INSURANCE RATE MAP.



Tax Parcel: 215-141-3

E.C. = 1' : 10,000' +

Deed Ref: 5164 / 521

Easement Survey
For

Jerry M. Funderburk

Morningstar Township
Mecklenburg County, N.C.

Drawing No. 98600 Scale: 1" = 40' August 20, 1996

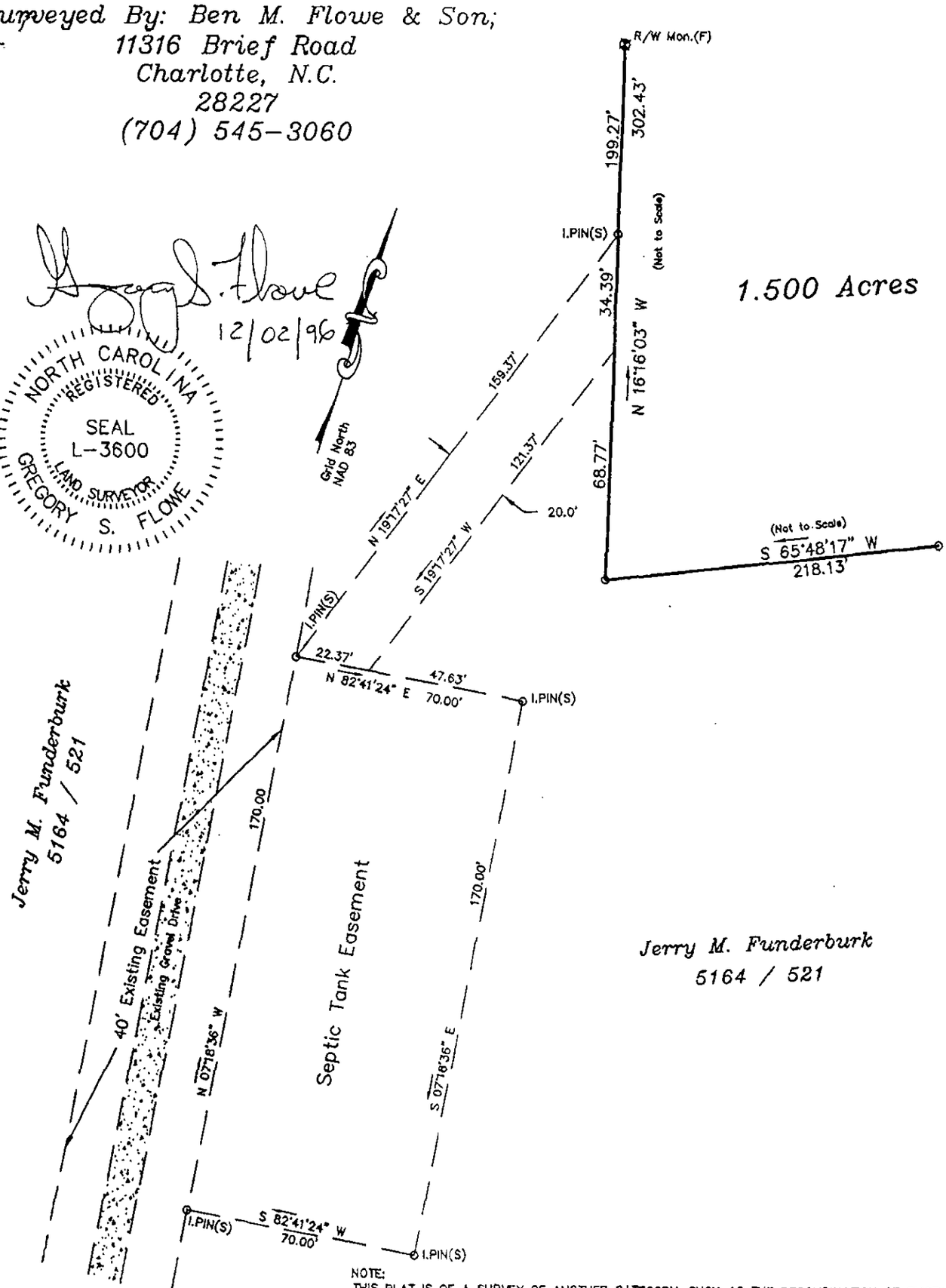
ATTN: LISA MIALIK

File 1619B

Surveyed By: Ben M. Flowe & Son;
11316 Brief Road
Charlotte, N.C.
28227
(704) 545-3060

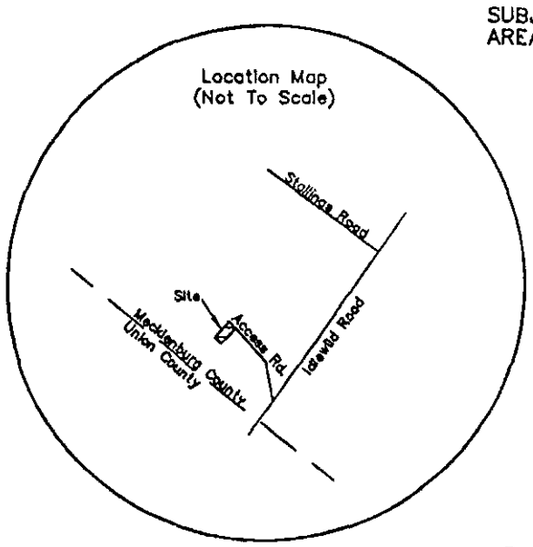
Gregory S. Flowe 12/02/96

NORTH CAROLINA REGISTERED SEAL L-3600 LAND SURVEYOR GREGORY S. FLOWE



NOTE:
THIS PLAT IS OF A SURVEY OF ANOTHER CATEGORY, SUCH AS THE RECOMBINATION OF EXISTING PARCELS, A COURT-ORDERED SURVEY OR OTHER EXCEPTION TO THE DEFINITION OF SUBDIVISION.

SUBJECT PROPERTY IS NOT LOCATED IN A SPECIAL FLOOD HAZARD AREA AS DETERMINED BY FLOOD INSURANCE RATE MAP.



Tax Parcel: 215-141-3

E.C. = 1' : 10,000' +

Deed Ref: 5164 / 521

Easement Survey
For

Jerry M. Funderburk

Morningstar Township
Mecklenburg County, N.C.

Drawing No. 96600 Scale: 1" = 40' August 20, 1996

Idlewild Road

PROPOSED PLOT PLAN

2nd Site Evaluation

Ck # 2009 $75.00

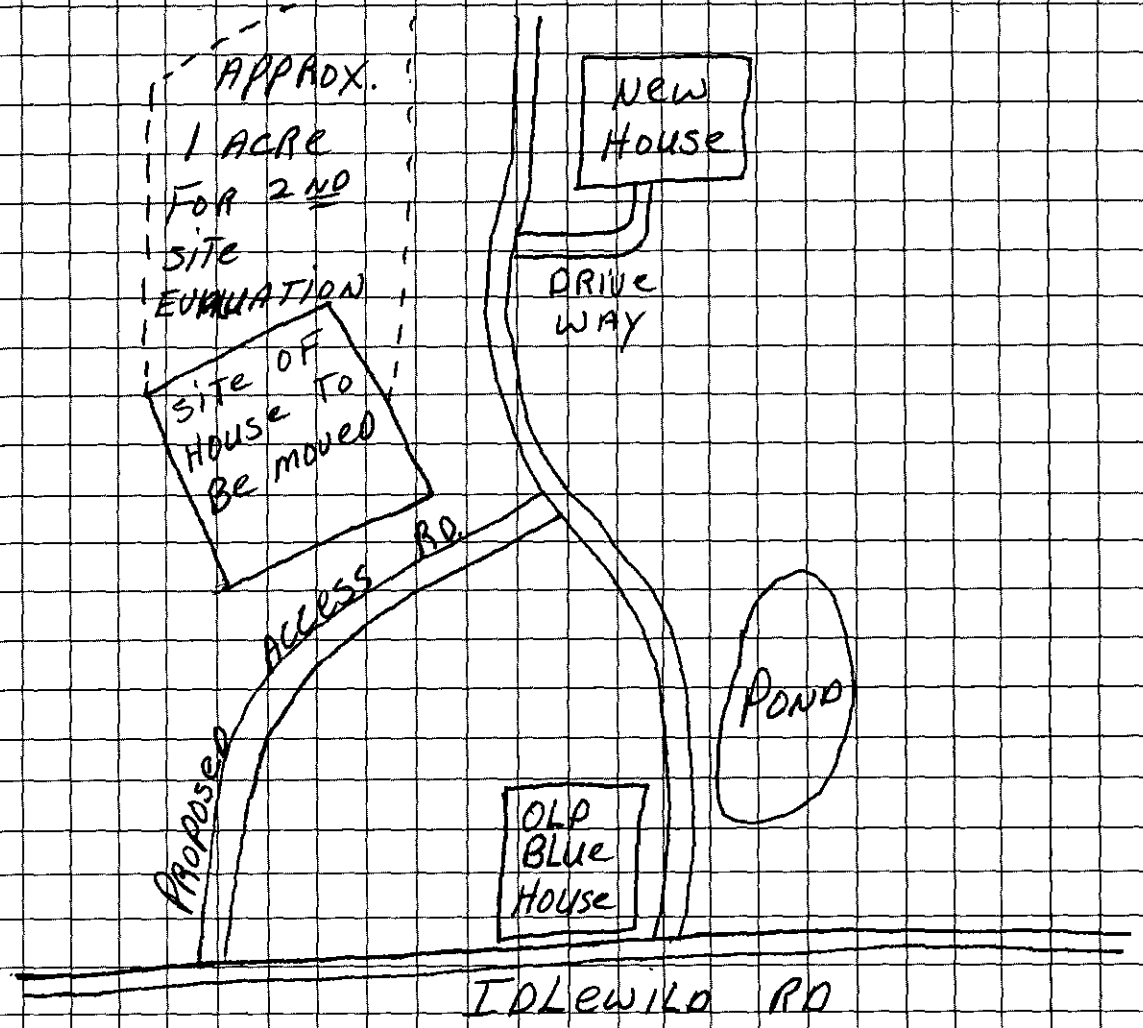
11-12-96

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

FILE: 16198

TC: 215-141-03

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.



X Terry M Henderson
OWNER/AGENT SIGNATURE

DATE 11-12-96

APPROVAL DATE _____

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

WITNESSETH, That said part ...les... of the first part in consideration of .....

----------TEN DOLLARS AND OTHER VALUABLE CONSIDERATIONS---------- ~~DOLLARS~~,

to .....them..... paid by the part ...les... of the second part, the receipt of which is hereby acknowledged, ha..Vbargained and sold, and by these presents do..... bargain, sell and convey to said part ...les... of the second part and .....their..... heirs and assigns, a tract or lot of land in Union County, State of North Carolina, in ....Vance.....Township, adjoining the lands of .....

.....

and others, and bounded as follows, viz:

BEGINNING at an iron pipe at a fence corner in the Mecklenburg-Union County line and in Arnold M. Nelson's property line and runs thence with Nelson's property line South 6 degrees 25 minutes East 952.8 feet to an old iron pipe located in the property line of J. E. Price; thence with J. E. Price's property line, South 83 degrees 11 minutes West, passing J. E. Price and Roy C. Price's common corner at 104.3 feet and continuing with Roy C. Price's property line a total distance, including the 104.3 feet, of 929.1 feet to a point located in North Fork Crooked Creek indicated by an iron pipe in the range of this line, West of the creek 11.4 feet distant; thence with the center of North Fork Crooked Creek, North 42 degrees 10 minutes West 206.5 feet to a point located in the center of said creek indicated by an iron pipe by Walnut in the range of the following line 8.4 feet distant, said point also being in the Union-Mecklenburg County line; thence with the Union-Mecklenburg County line, North 46 degrees 35 minutes East 1315.7 feet to the point of BEGINNING, and containing 13.28 acres, more or less, as surveyed by Ronald M. Lemmond, R.L.S., October 11, 1971.

The above described property is a part of the 83.95 acre tract recorded in Deed Book 958, at page 121, Mecklenburg County Registry. Said deed is also recorded in the Office of the Register of Deeds for Union County, North Carolina.

→ * The parties of the first part also grant unto the parties of the second part and their successors in title a right of way forty (40) feet in width running along the existing road located across the property of the parties of the first part adjoining the above described property and on the county line to the property above described from the Secrest Short Cut Road (now Idlewilde Road) for the purpose of ingress and egress from said Secrest Short Cut Road (Idlewilde Road) to the above described property. The parties of the first part shall have no responsibility for the maintenance of said road.

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

2400

Sheet
PROPERTY ID #:
COUNTY:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

#2 16191B
PO 215-141-03

OWNER: Geary Funderburke
ADDRESS: 14700 Idlewild Rd, Matthews
PROPOSED FACILITY: residence
LOCATION OF SITE: Idlewild Road

APPLICANT:
APPLICATION DATE:
PROPOSED DESIGN FLOW (.1949): 360gpd

DATE EVALUATED:
PROPERTY SIZE: 15 ±
PROPERTY RECORDED:

WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	slopes 2-6% .1940 LANDSCAPE POSITION/ SLOPE %	HORIZON 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 & LTA
1	Ridge	0-6"	gr/sl	Fr/SEXP/SS/SP	> 48" TO chroma 2	48"	N/A	None	PS .39 Pz IV
		6-48"	SBK/C	Fr-Fi/SEXP/SP					
2	Ridge	0-5"	gr/sl	Fr/SEXP/SS/SP	> 49" TO chroma 2	46"	N/A	None	PS .39 Pz IV
		5-46"	SBK/C	Fr-Fi/SEXP/SP					
3	Ridge	0-6"	gr/sl	Fr/SEXP/SS/SP	> 42" TO chroma 2	42"	N/A	None	PS .39 Pz IV
		6-42"	SBK/C	Fr-Fi/SEXP/SP					
4	Ridge	0-5"	gr/sl	Fr/SEXP/SS/SP	> 50" TO chroma 2	50"	N/A	None	PS .39 Pz IV
		5-50"	SBK/C	Fr-Fi/SEXP/SP					
5	Ridge	0-6"	gr/sl	Fr/SEXP/SS/SP	> 48" TO chroma 2	43"	N/A	None	PS .39 Pz IV
		6-43"	SBK/C	Fr-Fi/SEXP/SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	NS
System Type(s)		

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): Unsuitable
EVALUATED BY: W. A. Mauk 11-15-96

COMMENTS: 100% Repair - Would need pump

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)				
(Ridge)		SCL (Sandy Clay Loam)			MOIST	WET
(Shoulder Slope)		SIC (Silt Loam Clay)				
(Terrace)					VFR (Very Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Friable)	SS (Slightly Sticky)
		SIC (Silty Clay)			FI (Firm)	S (Sticky)
					VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None		EFI (Extremely Firm)	NP (Non-plastic)
						SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

OTES

ORIZON DEPTH In inches below natural soil surface

PTH OF FILL In inches from land surface

STRUCTIVE HORIZON Thickness and depth from land surface

APROLITE S(suitable) or U(unsuitable)

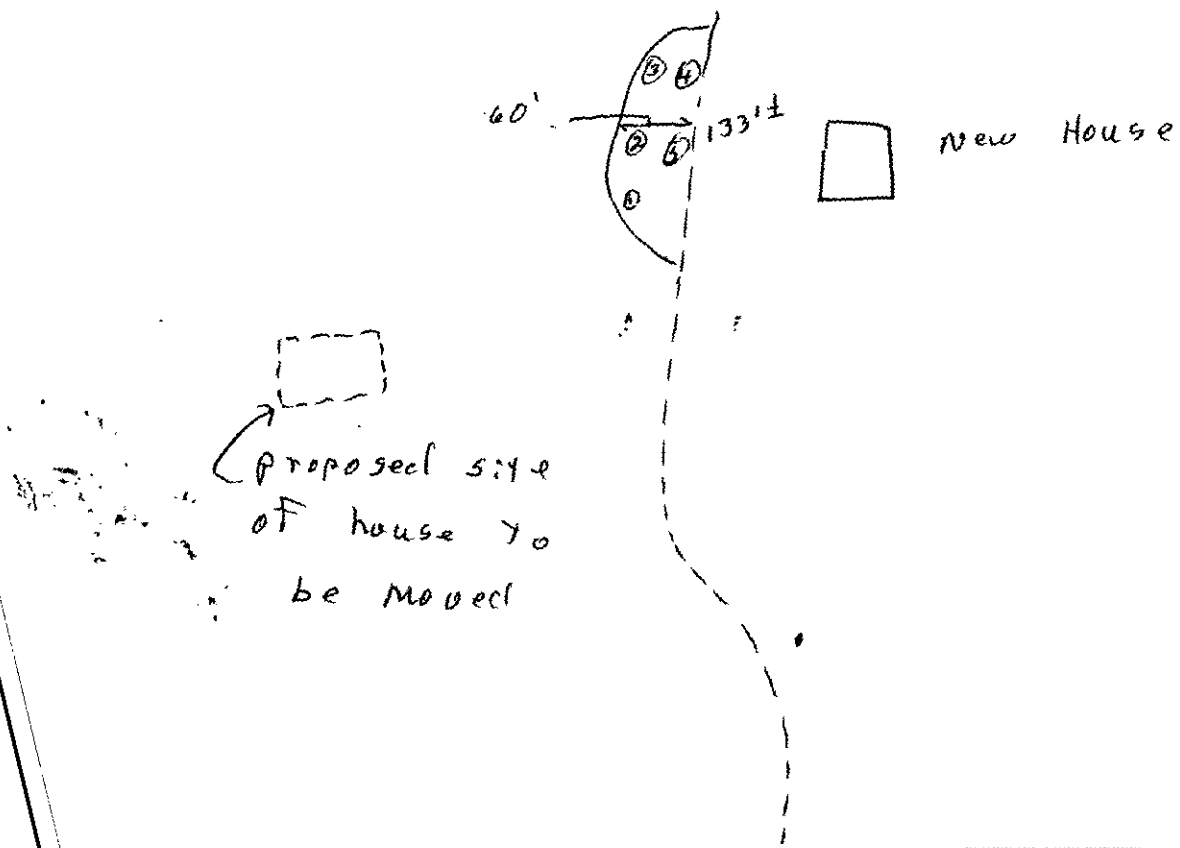
IH WETNESS Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designatic

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).



~~Dot~~ Idlewild Rd

OMMENTS: Lot does not appear to be 100% Repair

LEGEND

use the following standard abbreviations

ANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR	LPP .1957 LTAR	MINERALOGY/ CONSISTENCE	STRUCTURE
C (Concave Slope) V (Convex Slope)) (Drainage Way) S (Debris Slump) P (Flood Plain) S (Foot Slope) I (Head Slope) (Linear Slope) (Nose Slope) (Ridge) (Shoulder Slope) (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) SLC (Silt Loam Clay)	0.6 - 0.3	0.3 - 0.15		
	IV	SC (Sandy Clay) SIC (Silty Clay)	0.4 - 0.1	0.2 - 0.05		
		O (Organic)	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)

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)

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