

17811 MCKEE RD

21727107

5/15/2007

duponbj

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

Mecklenburg County
Health Department

M E M O R A N D U M

TO: Susan Uzzell
Accountant II

FROM: Sylvia D. Daniel, R.S.
Program Chief

Date: August 14, 1995

Ref: File 3968A/17811 McKee Road

SUBJECT: Refund

(Mr./Mrs./Co.) Ms. Lisa Hathcock, originally paid $200.00

for an alteration to the septic system on May 26, 1995

.

A refund should be issued for $200.00 because

Ms. Hathcock cancelled her request prior to any services being

provided by this office.

Please make check payable to: Lisa Hathcock

17811 McKee Road

Charlotte, NC 28278

Near Lake Wylie - Steele Crk.

3968A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

PD #300.00 5/26/95 Ck.# 0314 ☐ 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: Hathcock (last) Lisa (first) L T
ADDRESS: 17811 McKee Rd. PHONE: (704) 588-0212 (376-9896) (m)
CITY: Charlotte STATE: NC ZIPCODE: 28278

Date: 5-26-95

PROPERTY OWNER:
NAME: Same (last) (first) (mi)
ADDRESS: PHONE: (___)
CITY: STATE: ZIPCODE:

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 217-062-08
STREET ADDRESS: 17811 McKee Rd Charlotte NC 28278
ZONING:

Township (check one):
☒ 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: LOT SIZE (in acres):

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)
☐ MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
☒ REPAIR TO SYSTEM (R) Alteration

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: NUMBER OCCUPANTS:

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 ☐ 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: Lisa L. Hathcock Date: 5-26-95

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.

...

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

Environmentalist Date

Director or Authorized Section Head Date

WATER : 12/94

CERTIFICATE OF COMPLETION/OPERATION PERMIT

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 3968A DATE: 9/28/88

TC: 217-062.02 ☐ L ☐ CRT

SERIAL № 11437

Name of Owner Hathcock, Avery & Lisa Juris.:

Address of Property 17811 McKee Rd

Inspection Data:

Tank Material Pcc

Total Length of Drainfield 400'

Number of Lines 4 @ 100'

Cover Depth 24"

Water Supply Source Well

Distance to Water Source > 50'

Excavation Inspected 9/28/88

Tank(s) Inspected 9/28/88

Wash Line Inspected

High Water Alarm Inspected

PLOT

Design: 1988 1500 St Con. 1200 SFt 12'6 Cover CTR# 82

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 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The 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 10 NCAC 10A .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.

COMMENTS:

Judy J. Kuen R.S.
Environmentalist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

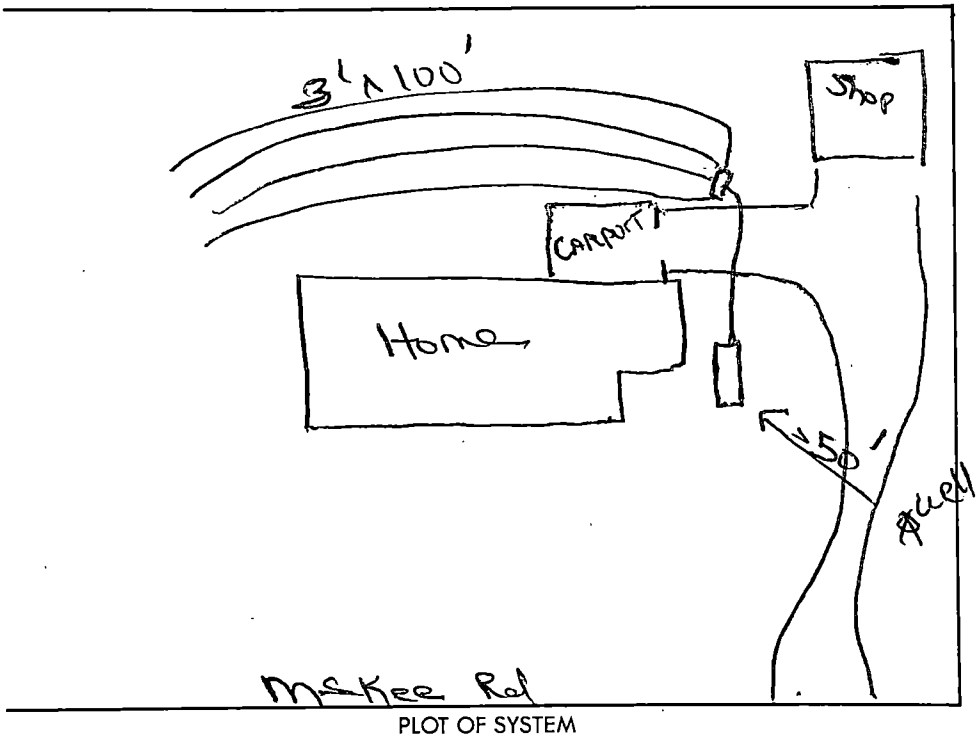
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 3968A DATE: 9/19/88

TC: 217-062.02P0 ☐ L

SERIAL Nº 12187

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 11/27/88. All work shall be completed on or before 10/19/88, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .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 Department of Environmental Health 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank ____ gallons

Tank Construction Pre Cast

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 400' feet

Number of Lines 4

Depth of Stone 12 inches

Distance from House 51' feet

Distance from Property Line 10' feet

Distance from Well ≥ 50 feet

NAME OF OWNER Hathcock Avery & Lisa

LOCATION OF PROPERTY 17811 McKee Rd

Comments: Install 4 Trenches 3' x 100' 12" Stone Straw Cover - Solid - Re-inforced line required under driveway.

Division or Section Head

Environmentalist

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

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER OR AGENTS COPY

APPLICATION FOR AN IMPROVEMENT PERMIT

1/28/88 pd 100.00
CK#1635 JR

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

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

(OFFICE USE ONLY)
FILE: 3968A
TC: _____
SERIAL: Nº 15267
☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 17811 (STREET NO.) McKee Rd. (Pineville) (STREET) ② FILE: 3968A
③ JURISDICTION: Mecklenburg ④ TAX PARCEL NO.: 21706202 PO
⑤ SUBDIVISION: n/a ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: Avery (FIRST) Lisa Todd (MIDDLE) Litaker Hathcock (LAST) Hathcock
⑨ MAILING ADDRESS: 2308 Vail Ave.
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28207
⑬ PHONE: (WORK) 704-376-9896 (Mrs.) ⑭ (HOME) 704-376-8693

REQUEST

This request is for a(n):

⑮ ☒ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☐ Other (specify) _____

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 3
㉕ Type? _____
㉓ Maximum occupancy? 2
㉖ Maximum number of employees? _____
㉔ Basement? ☐ yes ☒ no
㉗ Maximum number of seats? _____

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☒ Individual well
B ☐ Municipal system
C ☐ Community well
D ☐ Community system

㉙ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Lisa Litaker Hathcock
Date: 1-27-88

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:
. . . No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by this Department.
. . . This permit is not transferable, and shall become null and void 36 months from the date of issuance.

RS 1/29/88
Environmentalist Date

Director or Authorized Section Head 1/29/88 Date

*This permit must be signed by the Director of Environmental Health or an authorized section head in order to be valid.

PROPOSED PLOT PLAN

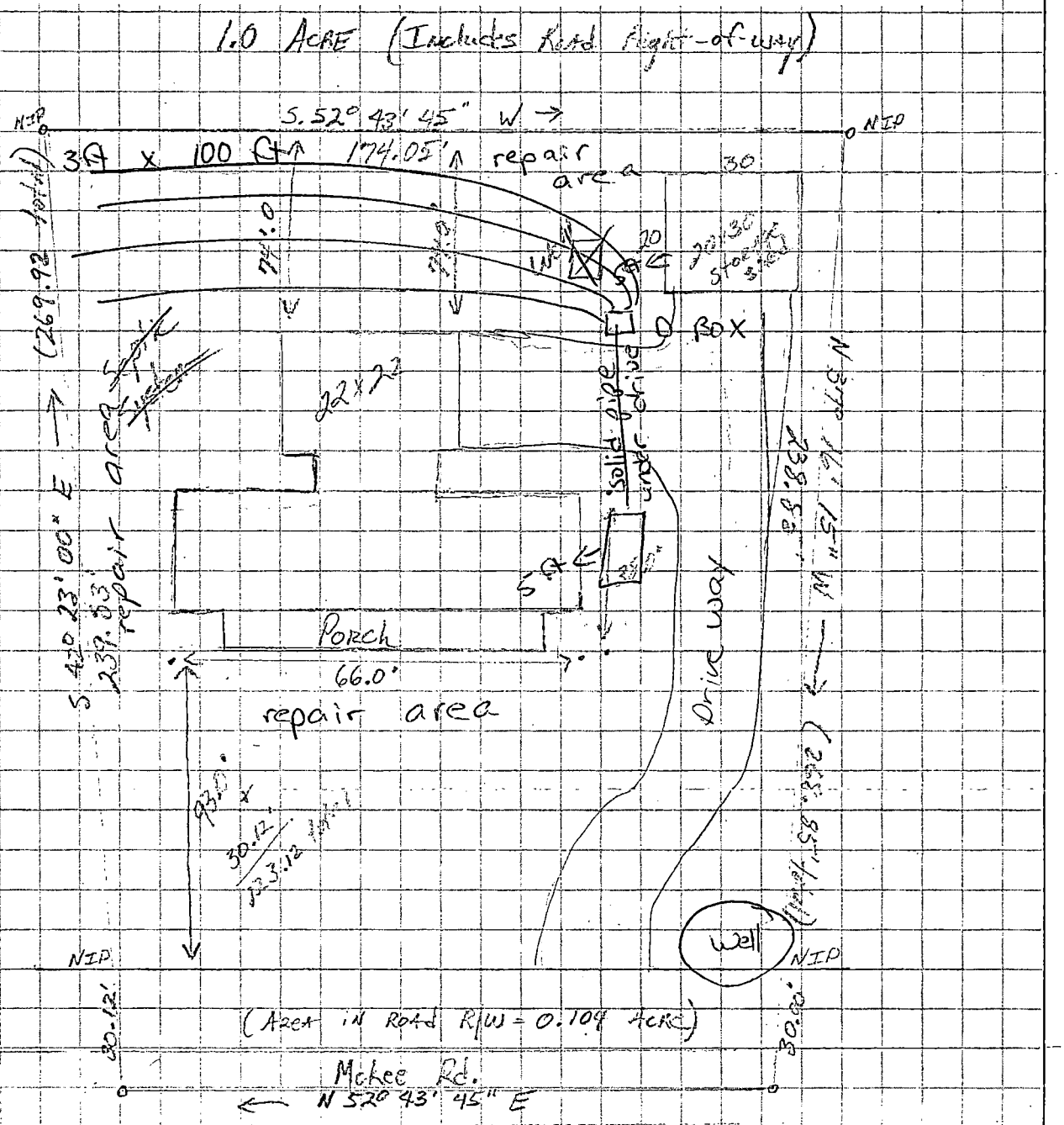
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 3968A

TC: _____

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.



1500 gal. tank
400 Sq. ft. drain field
12" stone
solid line from tank to "D"
under drive

Signed: Lisa L. Hathcock

Date: 1-27-88

DATE: 1/26/88

TO: ENVIRONMENTAL HEALTH

FROM: COUNTY ENGINEERING

EHD FILE _____ JURISDICTION CODE Meck

PARCEL NUMBER 217-062-02

ASSIGNED ADDRESS 17811 McKee Rd

EXISTING ADDRESS _____

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	NOT APPROVED
1. SUBDIVISION REGULATIONS	☒	☐ *
2. FLOODWAY REGULATIONS	☒	☐ *
3. EROSION CONTROL REGULATIONS	☒	☐ *
4. COMMERCIAL DRAINAGE PLAN	☒	☐ *

	PRESENT	NOT PRESENT
5. PUBLIC UTILITY EASEMENT	☐ *	☒
	YES	NO
6. PROPERTY FRONTS ON THOROUGHFARE	☐ *	☒
	YES	NO
7. DRIVEWAY PERMIT REQUIRED	☐ *	☒

* If checked, further investigation will be required to determine whether a building permit may be issued by Building Standards for the site.

REMARKS: _____

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

SIGNED: JCM

OPWEAR 02/86

MECKLENBURG COUNTY

Department of Environmental Health

October 8th, 1987

Charles Hart Litaker
7232 Alexander Road
Matthews, NC 28105

RE: Property located at McKee Road
FILE: 3968A
PARCEL: 21706202 PO

Dear Sir:

At your request, a field investigation was conducted on the property designated above for the purpose of determining site suitability for the installation of a ground absorption sewage disposal system. Results of the investigation revealed that the lot contains soils which have been classified as PROVISIONALLY SUITABLE in accordance with the provisions of 10 NCAC 10A .1900. A copy of the Site Evaluation Report (Serial Number 14660) deliniating the soil types and their respective classifications is enclosed.

While this classification indicates the site is acceptable for the installation of a septic tank system, no specific system or plans have been approved. The area available for such an installation may impose limitations on the size and/or type construction permitted on the lot. Specific plan approval will be provided upon submission of an Application For An Improvement Permit with an ACCURATELY dimensioned plot plan detailing the location of current and/or proposed buildings, wells and sewage disposal systems and determination that the area is adequate to accomodate the proposed construction.

Please note that this classification may be revoked if any filling, grading or construction (including the drilling of a well) is performed on the lot which in the opinion of this Department renders any area previously designated suitable for system installation, unsuitable. Futhermore, this approval may be revoked should any changes occur in the regulations under which it was granted, if such changes would have prevented its approval had they been in effect on the date of issuance.

If there are any questions concerning this matter, do not hesitate to contact me.

Sincerely,

Sylvia D. Daniel, R.S.
Environmental Health Supervisor
Environmental Resources Division

enclosure

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 14660

File: 3968A Action 4

Parcel: 21706202 PO ☐ PC

Location: McKee Road

Subdivision:

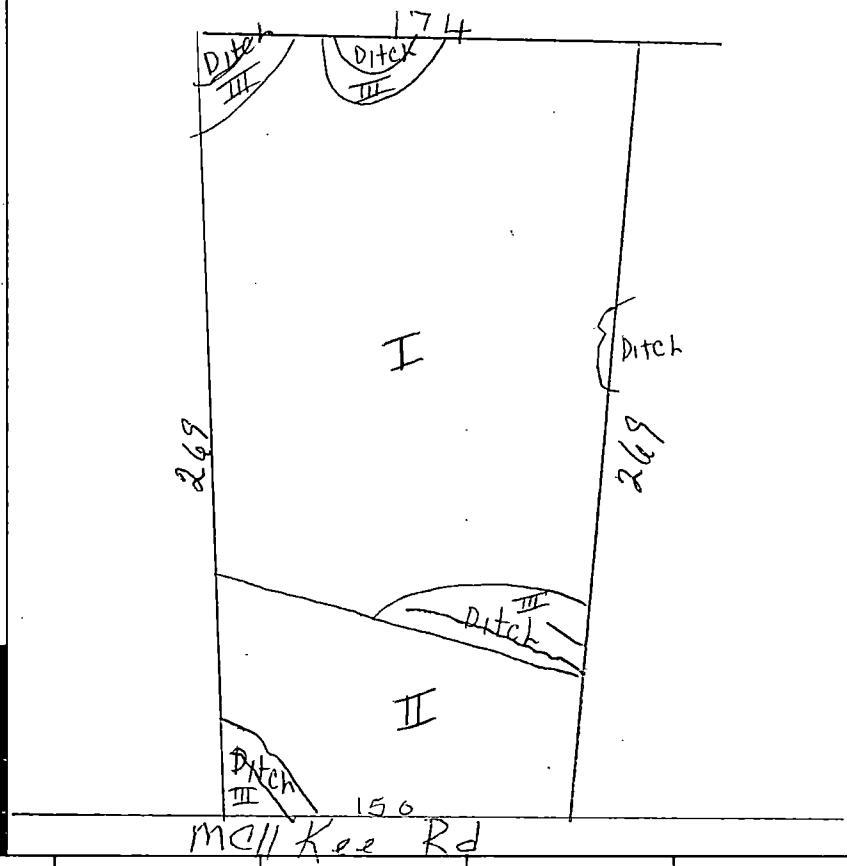
Lot: Block: Acres: 1

Owner: Charles Hart Litaker
Address: 7232 Alexander Road
Matthews, NC 28105

Comments: Minimum Depth

Described by: W. B. Ramsay

Date: 10-1-87



***** EVALUATION KEY *****

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	S (PS) U 2-10	S (PS) U 2-10	S PS (U) Ditched	S PS U	S PS U	S PS U
Texture	S (PS) U	S (PS) U	S (PS) U	S PS U	S PS U	S PS U
Structure	S (PS) U	S (PS) U	S (PS) U	S PS U	S PS U	S PS U
Drainage	S (PS) U	S (PS) U	S (PS) U	S PS U	S PS U	S PS U
Depth	S (PS) U 36-37	S PS (U) 30-31	S PS (U) Various	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U	S (PS) U	S (PS) U	S PS U	S PS U	S PS U
Available Space	S (PS) U	S PS (U)	S PS (U)	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	IVe Cecil-Appling	IVe Eroded Cecil Appling	IVe Eroded Cecil Appling			
Area Classification	S (PS) U	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
SEP 25 1987
ENVIRONMENTAL HEALTH
DIVISION

FILE: 39681A

TC: 217-062-02 PO

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: McKee Rd, Steele Creek area, no street #

② SUBDIVISION: n/a ③ LOT: n/a ④ BLOCK: n/a

⑤ PARCEL REFERENCE: BOOK NO.: "PO" 217 PAGE NO.: 6 PARCEL NO.: 02

⑥ DEED REFERENCE: BOOK NO.: 3604 PAGE NO.: 348

OWNER

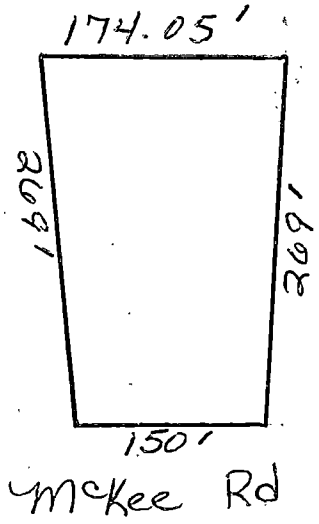
⑦ NAME: Charles (FIRST) Hart (MIDDLE) Litaker (LAST)

⑧ MAILING ADDRESS: 7232 Alexander Rd.

⑨ CITY: Matthews ⑩ STATE: NC ⑪ ZIP: 28105

⑫ PHONE: (WORK) (704) 376-9896 (HOME) (704) 366-2682

⑬ Accurately diagram and dimension lot.



⑭ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: [signature]

Date: 9/21/87

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

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY

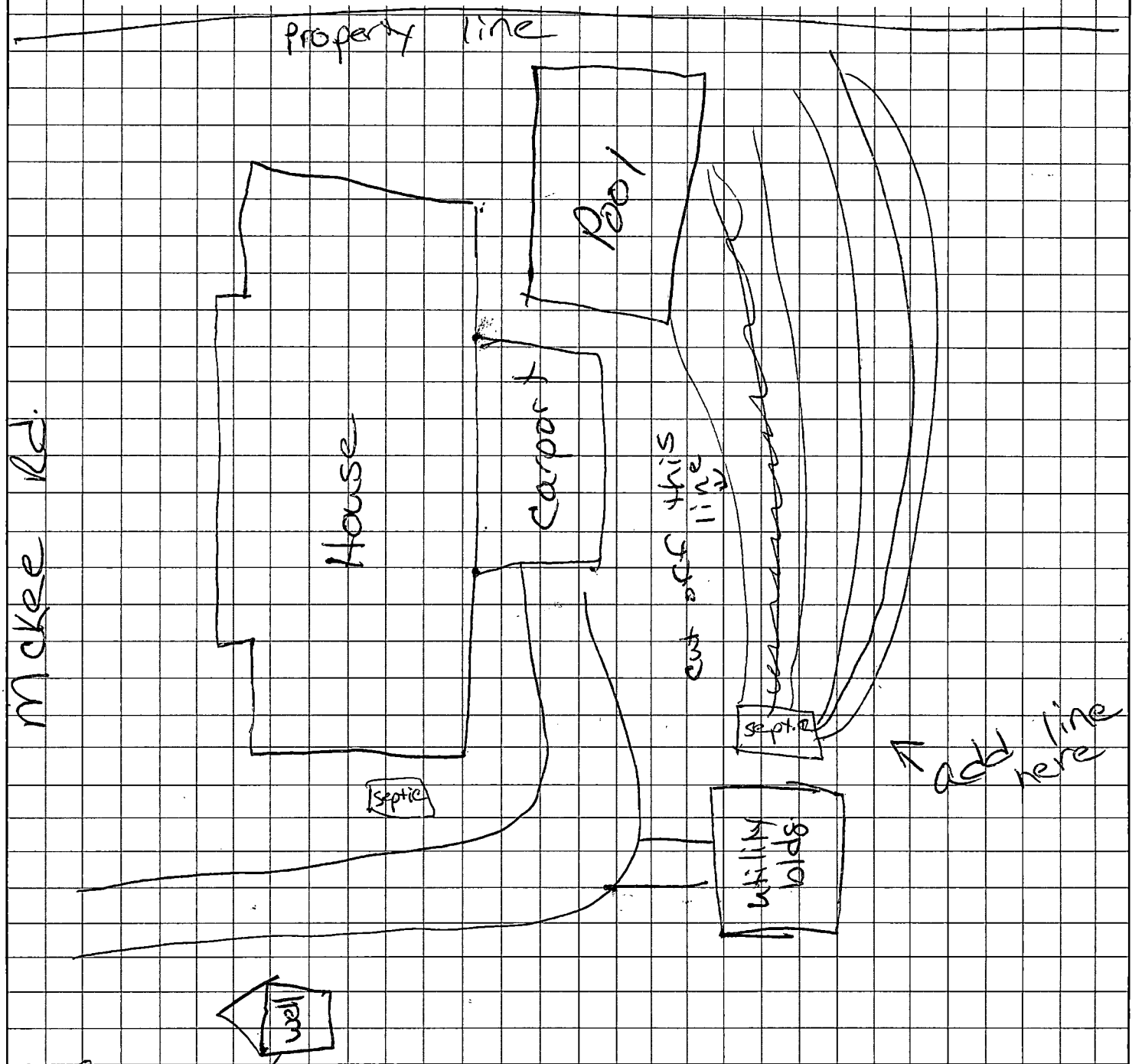
PROPOSED PLOT PLAN

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

FILE: 3968A

TC: 217-062-08

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.



Lisa Hathcock
OWNER/AGENT SIGNATURE

DATE

APPROVAL DATE _____

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