

5211 MOUNTAIN POINT LN

02316403

5/31/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 5337-A DATE: 6-12-96

TC: 023-164-03 ☐ L ☑ CRT

SERIAL Nº 16682

Name of Owner Kevin Dunn Juris.:

Address of Property 5211 Mountain Point Lane

Inspection Data:

Tank Material PCC

Total Length of Drainfield 406

Number of Lines 6 @ 67

Cover Depth 12"

Water Supply Source comm. well

Distance to Water Source 100'+

Excavation Inspected 5-7-96

Tank(s) Inspected 5-5-95

Wash Line Inspected —

High Water Alarm Inspected 7-19-96

PLOT

Design 1996 1500 ST 1000 DT PI CON 1200 FT 12G CECIC CTR# Dennis JOYCE

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☐ installed or constructed ☐ altered or repaired

☐ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 15A NCAC 18A. 1900, "Laws And Rules For Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. This issuance of this

☐ Certificate of Completion ☑ Operation Permit

does not in any way guarantee that the system will operate properly or relieve any person now or hereafter owning, controlling, or using such system from any liability resulting from the failure of the system to operate properly. This document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 15A NCAC 18A. 1990 in addition to those listed below under "COMMENTS." This document shall be null and void if any information contained in the application is untrue or if any additions are made to the property which would increase the requirements for said system.

Notice: Disturbance of the designated repair area may result in the suspension/revocation of this permit.

COMMENTS: Tank #2

Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

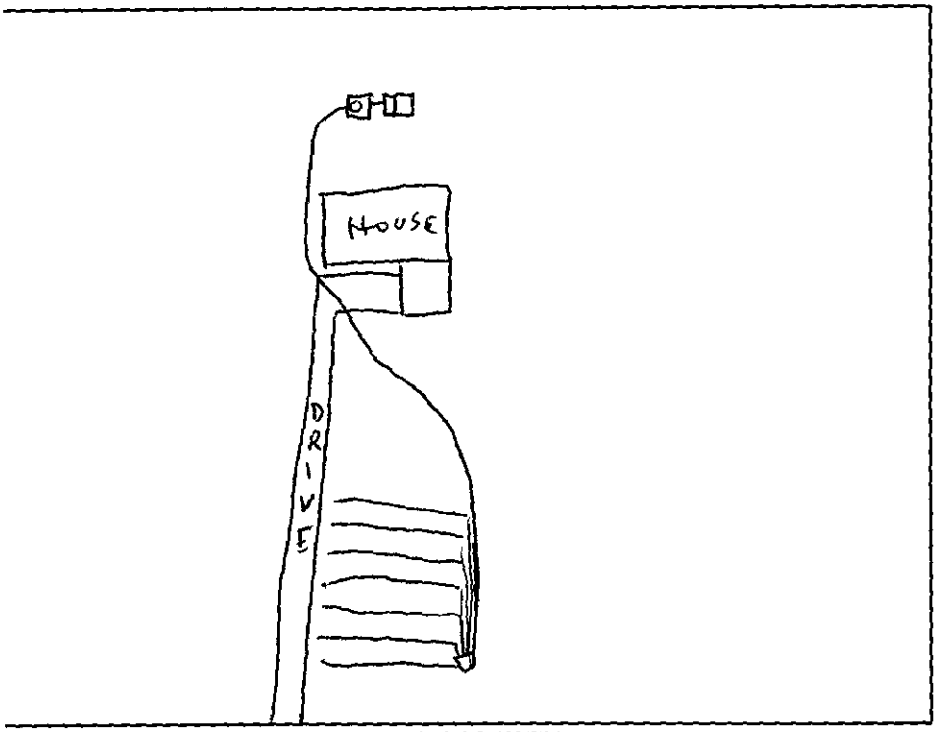
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 5337-A DATE: 5-6-96

TC: 023-164-03 ☐ L

SERIAL Nº 16808

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 10-5-95. All work shall be completed on or before 6-16-96, 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank existing 1500 gallons

Liquid Capacity of Dosing Tank existing 1000 gallons

Tank Construction PCC

Trench Depth 24"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous Yes

Total Line Length 400' feet

Number of Lines 7 x 60

Depth of Stone 12" inches

Distance from House 25'+ feet

Distance from Property Line 10'+ feet

Distance from Well 100'+ feet

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

NAME OF OWNER Kevin Dunn

LOCATION OF PROPERTY 5211 MOUNTAIN POINT LANE

Comments: INSTALL 7 lines @ 60' each x 3' wide x 12" rock

Environmental Health Specialist

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

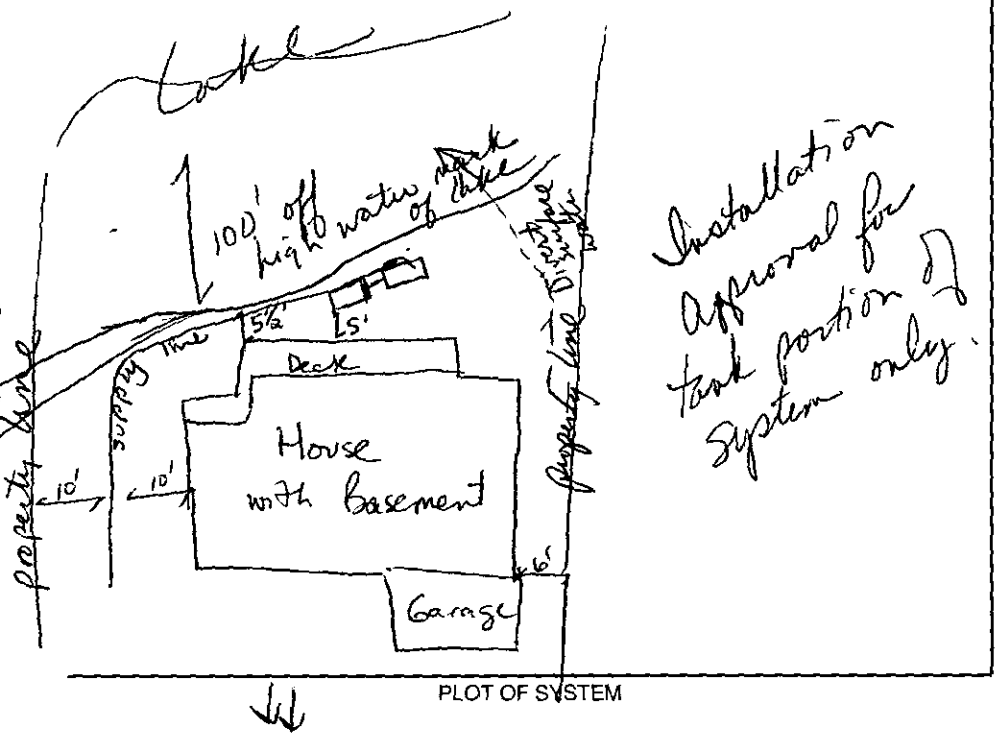
INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

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

FILE: 5337 A DATE: 5-9-95
023-164-03
TC: ~~023011350~~ L

SERIAL Nº 16190

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 10-5-92. All work shall be completed on or before 6-9-95, 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank 1000 gallons

Tank Construction PCC

Trench Depth —

Absorption and/or Nitrification Lines:

Trench Width new installation feet

Trench Walls Scored and Porous _____

Total Line Length approx to be feet

Number of Lines one of feet

Depth of Stone one foot inches

Distance from House 5 to 6 feet

Distance from Property Line as installed feet

Distance from Well 50' min feet

10' off any water line cross water line with supply line per Rule .1950(F)

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

NAME OF OWNER Kevin Dunn

LOCATION OF PROPERTY 5211 Mtn. Island Ln Three bedroom design

Comments: Must keep min 100' off lake high water mark with any part of septic tank system. Keep bldg. foundation (including deck min 5' from septic tank, pump tank & supply line. (10' min when no basement foundation) Install riser(s) according to NC State Regs.

S Bateman for S David, Program Chief 5-24-95

Environmental Health Specialist

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

PROPOSED PLOT PLAN

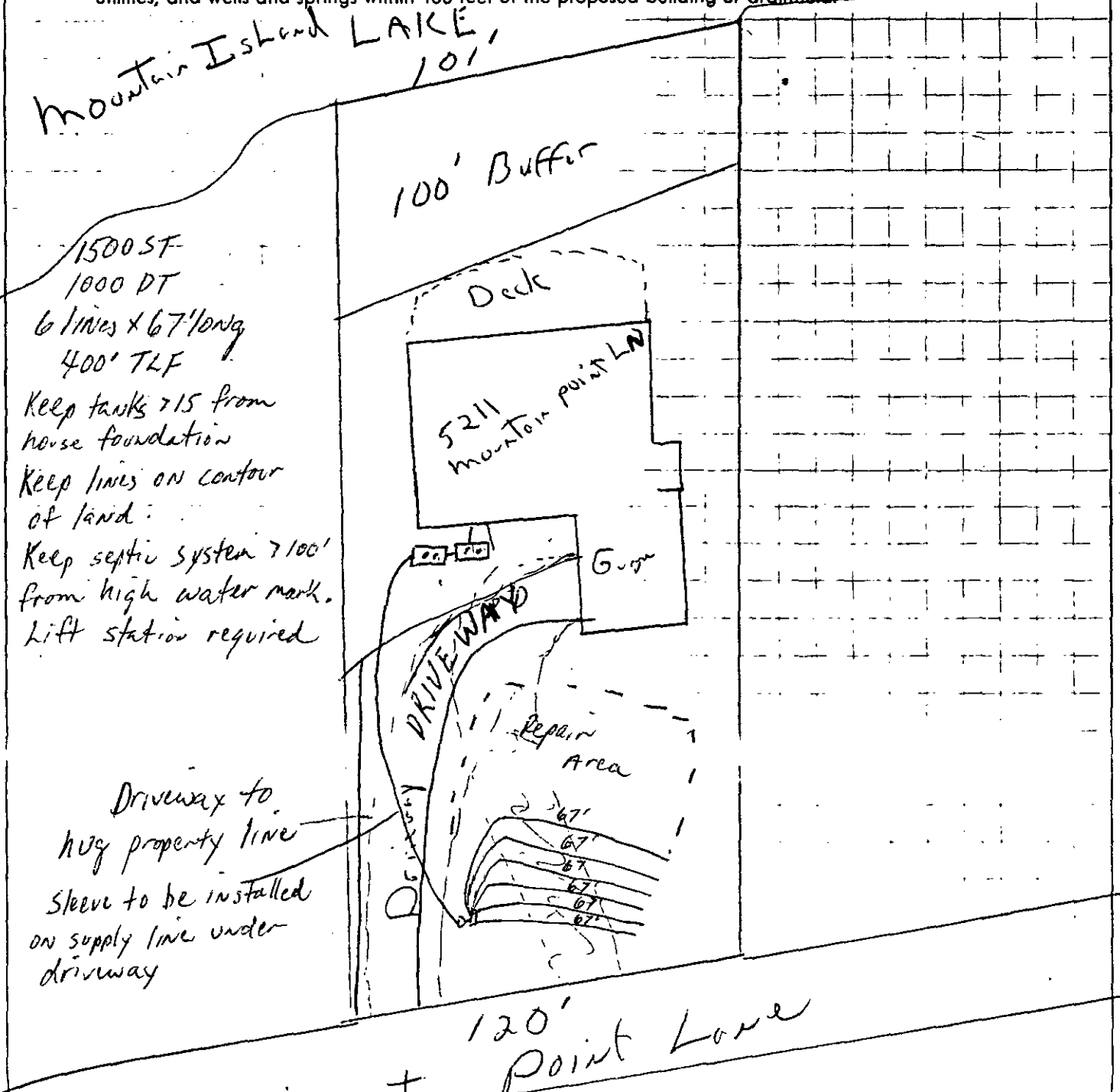
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

LOT 39

FILE: 5337A

TC: 023-011-35P0

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.



APPROVAL DATE PSW appr 10/9/92

Kevin B Dunn 10-9-92

PD 200.00 10/5/92 D4/7

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

CLR

[ ] 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: Dunn (last) Kevin (first) B (mi)

ADDRESS: 5237 Oak Drive PHONE: 704 598 0013

CITY: Charlotte STATE: NC ZIPCODE: 28216

Date:

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: ~~023-011-33A~~

STREET ADDRESS: 5211 Mt Pontoon

023-164-03

ZONING:

PROPERTY OWNER:

NAME: Dunn (last) Kevin (first) B (mi)

ADDRESS: 5237 Oak Drive PHONE: ( ) 598 0013

CITY: Charlotte STATE: NC ZIPCODE: 28216

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

TYPE APPLICATION (check one):

LOT NUMBER: 39 LOT SIZE (in acres): 1.0

[ ] SOIL TEST - INDIVIDUAL LOT (D)
[X] 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)

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: 3

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):
[X] 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: Kevin B Dunn Date: 10-5-92

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.

... Lift station required

1500 ST, 1000 DT

[X] 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 R.S. 10/9/92
Environmentalist Date

Director or Authorized Section Head Date

WWATER : 122791

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 5337A DATE: _____

TC: 023-011-35PO ☐ L ☐ CRT

SERIAL Nº 16340

Name of Owner Ken Dunn Juris.: _____

Address of Property 5211 Mountain Point Lane

Inspection Data:

Tank Material PCC

Total Length of Drainfield _____

Number of Lines _____ @ _____

Cover Depth _____

Water Supply Source _____

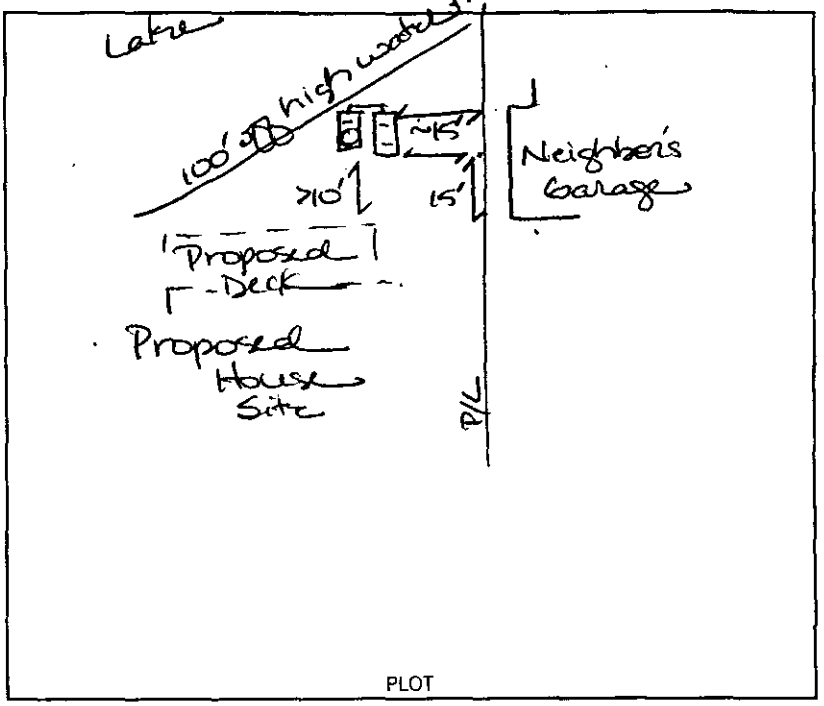
Distance to Water Source _____

Excavation Inspected _____

Tank(s) Inspected 7/5/95

Wash Line Inspected _____

High Water Alarm Inspected _____



PLOT

Design _____ CTR# 57 Dennis Joyce

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: _____

_____

_____

_____
Environmental Health Specialist

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

Mecklenburg County
Health Department

Basil G. Deltas, M.D., M.P.H.
Health Director

May 19th, 1989

Crescent Land & Timber Corp.
2305 Randolph Road, Suite C
Charlotte, NC 28207

RE: Property located at Mountain Point Lane 39
FILE: 5337A
PARCEL: 02301135 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. The property was found to contain a limited area of soils which were classified as provisionally suitable for such an installation. A copy of the Site Evaluation Report (Serial Number 12090) is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit 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 to this office. The plan will be reviewed and if it is found that the area of provisionally suitable soils is adequate for the proposed construction, an Improvement Permit will be issued by this Department.

If I may be of assistance, please do not hesitate to contact me.

Very truly yours,

Sylvia D Daniel

Sylvia D. Daniel, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure

Environmental Health Division
1200 Blythe Boulevard • Charlotte, North Carolina 28203 • (704) 376-4603

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 12090

File: 5339 A Action: 1

Parcel: PO 023-011-35 ☐ PC

Location:

Subdivision:

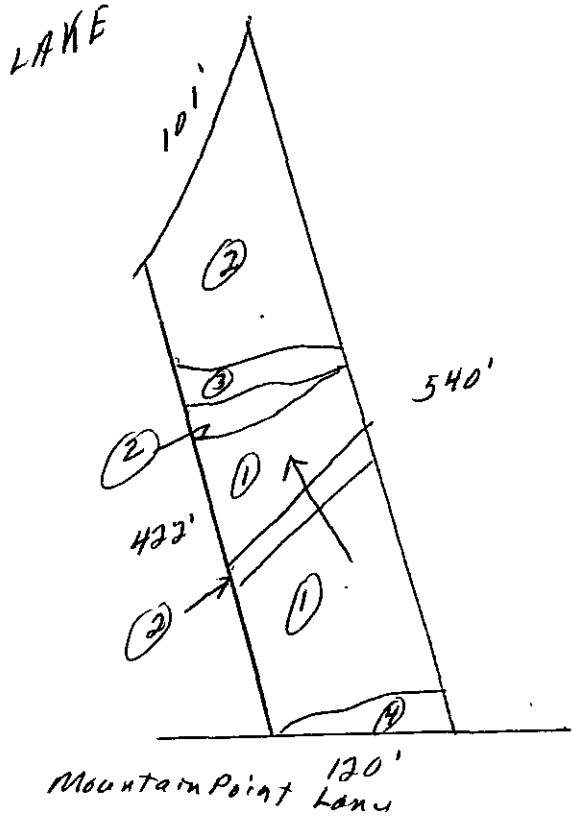
Lot: 34 Block: Acres: .99

Owner:
Address:

Comments: Recommend system site be approved before lot is closed

Described by: William A. Marlin

Date: 5-18-89



***** 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 6-15%	S PS (U) complex slopes	S PS (U) Drainageway Depression	(S) PS U 6-15%	S PS U	S PS U
Texture	S (PS) U Clay	S PS U —	S PS U —	S (PS) U Clay	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U —	S PS U —	S (PS) U Blocky	S PS U	S PS U
Drainage	S (PS) U 736" to water	S PS U —	S PS U —	S (PS) U 736" to water	S PS U	S PS U
Depth	S (PS) U 36-40"	S PS U —	S PS U —	S PS (U) 24-36"	S PS U	S PS U
Restrictive Horizons	S (PS) U 736"	S PS U —	S PS U —	S (PS) U 736"	S PS U	S PS U
Available Space	S (PS) U	S PS U —	S PS U —	S PS (U) Restrictive	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	IVA Cecil-Lilla	Complex Slopes	Drainageway Depression	IVA Pacolet-Lilla		
Area Classification	S (PS) U	S PS (U)	S PS (U)	S PS (U)	S PS U	S PS U

30

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 5337A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: Mountain Point Lane

② SUBDIVISION: Mountain Point Ph. 2 ③ LOT: 39 ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: 023 PAGE NO.: 13 PARCEL NO.: _____

⑥ DEED REFERENCE: BOOK NO.: 436 426 (LMI-90) PAGE NO.: 204 254

OWNER

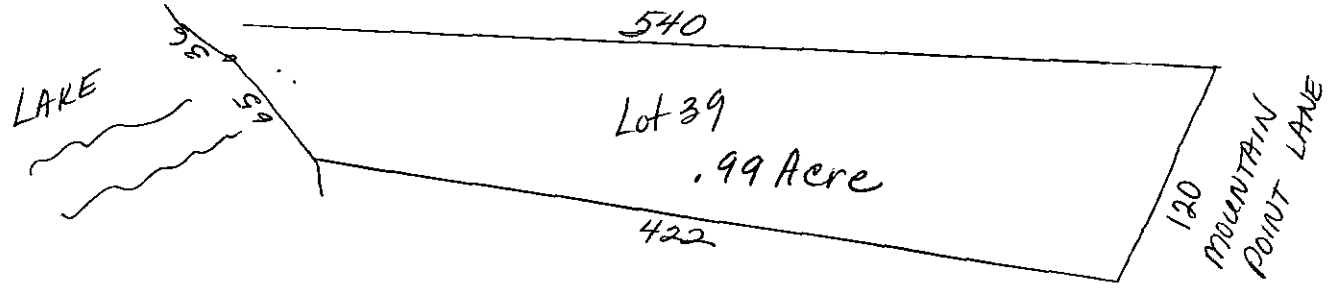
⑦ NAME: Crescent Land & Timber Corp. (c/o Lana Hathaway)
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: 2305 Randolph Road, Suite C

⑨ CITY: Charlotte, ⑩ STATE: N.C. ⑪ ZIP: 28207

⑫ PHONE: (WORK) (704) 332-9340 (HOME) (704) 892-9811

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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Ethelene L. Williams

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

Date: March 23, 1989

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER'S COPY

Mecklenburg County
Health Department

Basil G. Velta, M.D., M.P.H.
Health Director

February 2nd, 1989

Crescent Land & Timber Corp.
2305 Randolph Road, Suite C
Charlotte, NC 28207

RE: Property located at Mountain Point Lane 39
FILE: 5337A
PARCEL: 02301135 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. The property was found to contain a limited area of soils which were classified as provisionally suitable for such an installation. A copy of the Site Evaluation Report (Serial Number 15884) is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit 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 to this office. The plan will be reviewed and if it is found that the area of provisionally suitable soils is adequate for the proposed construction, an Improvement Permit will be issued by this Department.

If I may be of assistance, please do not hesitate to contact me.

Very truly yours,

Sylvia D. Daniel, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 15884

File: 5337A Action 1

Parcel: 02301135 PO ☐ PC

Location: Mountain Point Lane

Subdivision:

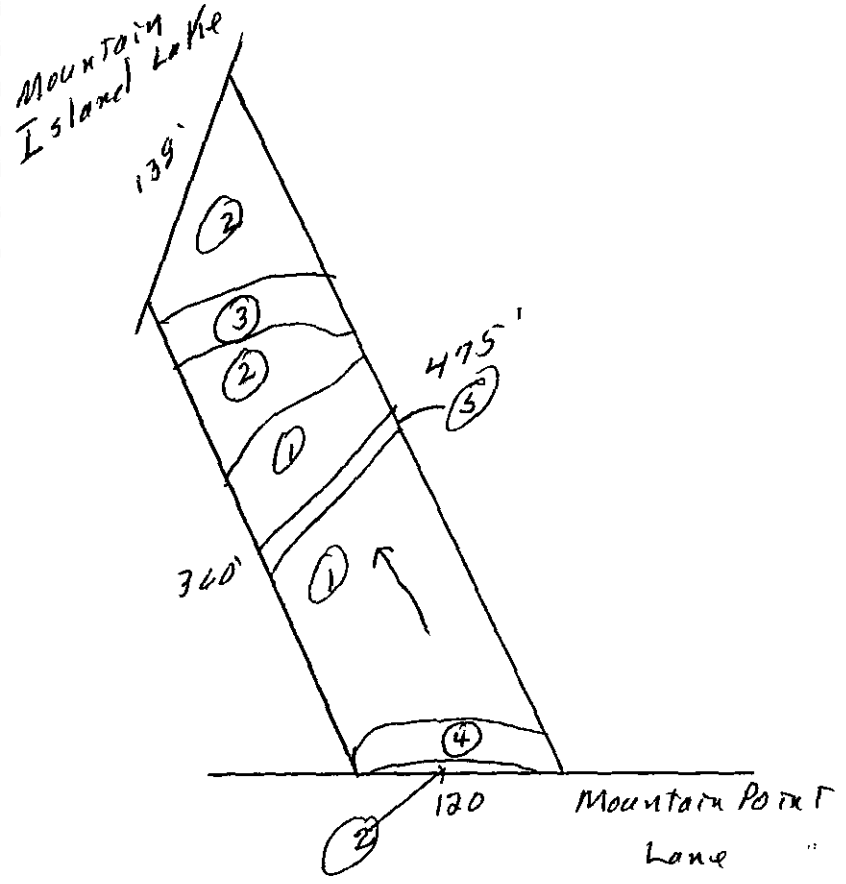
Lot: 39 Block: Acres: .86

Owner: Crescent Land & Timber Corp.
Address: 2305 Randolph Road, Suite C
Charlotte, NC 28207

Comments: System may need lift pump

Described by: William A. Marlin

Date: 2-2-88



***** 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 6-15%	S PS (U) complex slopes	S PS (U) Drainageway Depression	(S) PS U 6-15%	S PS (U) Old Road	S PS U
Texture	S (PS) U clay	S PS U	S PS U	S (PS) U clay	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U	S PS U	S (PS) U Blocky	S PS U	S PS U
Drainage	S (PS) U >36" to water	S PS U	S PS U	S (PS) U >36" to water	S PS U	S PS U
Depth	S (PS) U 36"+	S PS U	S PS U	S PS (U) 30-36"	S PS U	S PS U
Restrictive Horizons	S (PS) U >36"	S PS U	S PS U	S (PS) U >36"	S PS U	S PS U
Available Space	S (PS) U	S PS U	S PS U	S PS (U) Restricted	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	IUA Cecil-Lilla	Complex Slopes	Drainageway Depression	IUA Pacolet-Lilla	Old Road	
Area Classification	S (PS) U	S PS (U)	S PS (U)	S PS (U)	S PS (U)	S PS U

APPLICATION FOR SOIL INVESTIGATION

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
JAN 11 1989
$30.

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

(OFFICE USE ONLY)

FILE: 5337A

TC:

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: Mountain Point Lane

② SUBDIVISION: Mountain Point Ph. 2 ③ LOT: 39 ④ BLOCK:

⑤ PARCEL REFERENCE: BOOK NO.: 023 PAGE NO.: 13 PARCEL NO.:

⑥ DEED REFERENCE: BOOK NO.: 436, 426 (LMI-90) PAGE NO.: 204, 354

OWNER

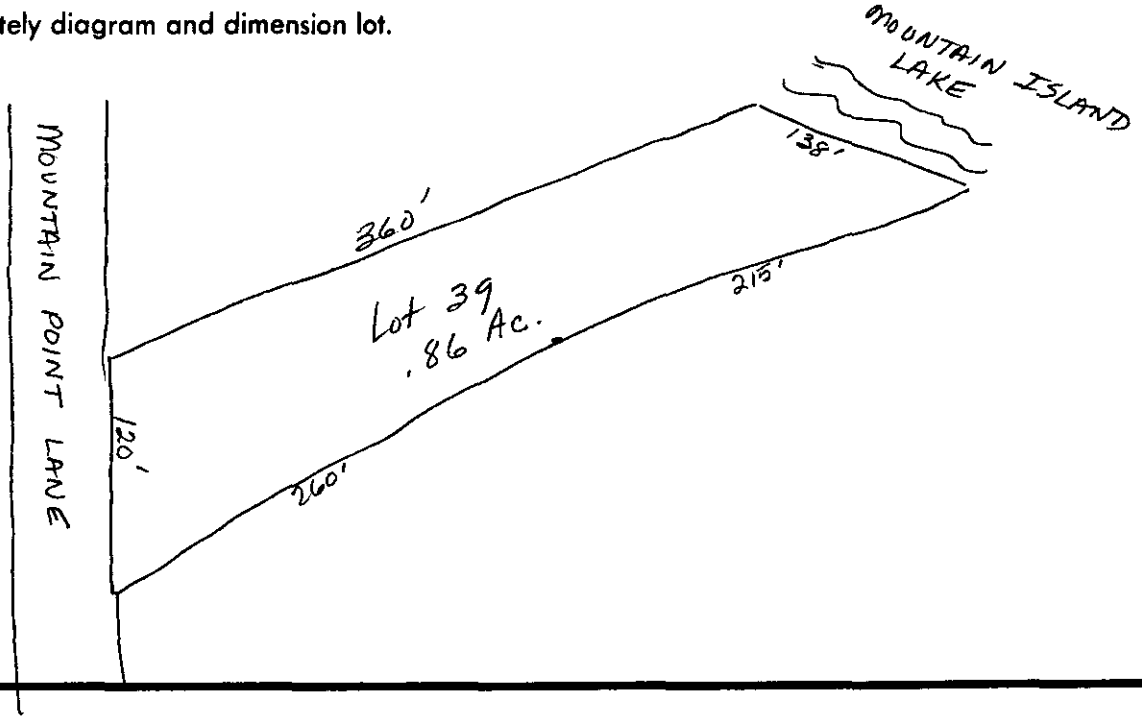
⑦ NAME: Crescent Land & Timber Corp. (c/o Lana Hathaway)
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: 2305 Randolph Rd., Suite C

⑨ CITY: Charlotte ⑩ STATE: N.C. ⑪ ZIP: 28207

⑫ PHONE: (WORK) (704) 332-9340 (HOME) (704) 892-9811

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: Miles J. Boyer, V.P.

Date: 1/11/89

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

4:00 p.m. 4-4-89

Phone conversation - Marvin Bethune

RE: Waive costs for soil investigations for applications submitted after changing lot lines to cooperate with Meck Co. Watershed Area Protection. (Mountain Pt. Phase II)
WAIVER REQUESTED BY LANDCRAFT Properties, Inc.

Response: Would support the County Managers office in their recommendation to waive fees since LANDCRAFT Properties, Inc. voluntarily changed lot sizes to comply with the WATERSHED AND SUBDIVISION ORDINANCE.

DOCUMENTED - 4-4-89 S. Dorsett

WAIVER GRANTED - 4-5-89 - Bobby Cobb

Bobby Cobb