

7342 SARDIS RD

18730115

7/29/08

marliwr

Barcode Font = IDAutomationHC39M

FEE: 200.00 6/16/04 X36943
DATE: 6-16-04
CRAFTSMEN CONSTRUCTION

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

HD 84829
I J CRT

TYPE APPLICATION: ___ NEW SYSTEM X 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 #: 16129

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 18730115

STREET ADDRESS: 7342 SARDIS RD.

SUBDIVISION OR MOBILE HOME PARK NAME: ON LANE OFF SARDIS RD NEAR CHARLOTTE CHRISTIAN SCHOOL

LOT NUMBER:

TYPE OF BUILDING (CHECK ONE):

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

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 2800

NUMBER OF BEDROOMS: 6 NUMBER OF OCCUPANTS: 7

CLOSING DATE

* Approval Granted for a 49 x 49 addition
* New basement room + porch 6/17/04
USE existing system Philip L. Walker RS

FOUNDATION FOR RESIDENCE:

___ WITHOUT BASEMENT ON SLAB
X CRAWL SPACE
X WITH BASEMENT /PLUMBING
___ WITH BASEMENT /NO PLUMBING

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION: ADDITION ACCROSS BACK OF EXISTING HOUSE WITH NEW BSMT. ROOM ON RIGHT REAR & A 49 x 49 IN LAW RESIDENCE ATTACKED TO BACK LEFT CORNER

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: ___ YES X NO TYPE:

WATER SUPPLY (CHECK ONE):

___ COMMUNITY (C)
___ MUNICIPAL (M)
X 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 X YES ___ NO
EXISTING WASTEWATER SYSTEMS X YES ___ NO
EASTMENTS OR RIGHT-OF-WAYS ___ YES ___ NO
WELL, SPRINGS OR WATERLINES X YES ___ NO
DESIGNATED WETLANDS ___ YES ___ NO

PROPERTY OWNER:

NAME: BICKET JACK & JEANETTE
(LAST) (FIRST) (MI)

ADDRESS: 7342 SARDIS RD.

CITY: CHARLOTTE STATE: N.C. ZIP: 28270

DAYTIME PHONE: (704-364-8798

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: BROWN DAVID W. GC
(LAST) (FIRST) (MI)

DAYTIME PHONE: (704-537-7337

C: 704-361-0846

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?

An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

SIGNED: David W. Brown, Resident CRAFTSMEN CONST. CO, INC DATE: 6-16-04

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

10309
Sedgewood

PROPOSED PLOT PLAN

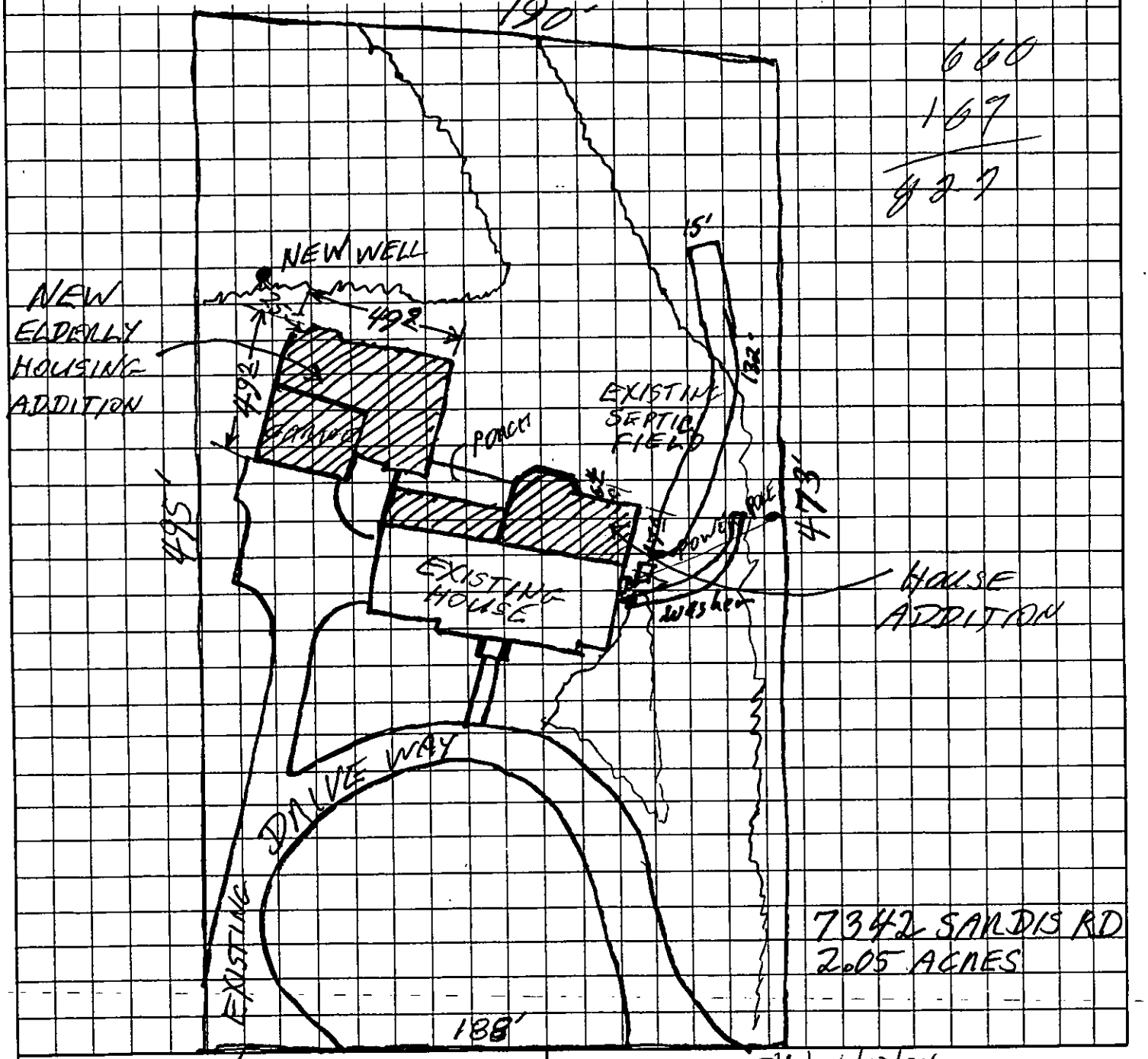
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6/12

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

FILE: 16129

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.



David L. Braun
OWNER/AGENT SIGNATURE

DATE 6-16-04

APPROVAL DATE JW 6/17/04

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



MECKLENBURG COUNTY LAND USE AND ENVIRONMENTAL SERVICES AGENCY
CREDIT/REFUND APPLICATION & ADJUSTMENT FORM

See back for completion instructions and the Credit/Refund Schedule

PVQ LUE 000

SECTION I - IF CREDIT OR REFUND (To Be Completed By Requestor)

CREDIT ☑

OR

REFUND ☐

1. Property Owner's Name: JACK BICKET 2. Permit Number: _____
3. Address: 7342 SANDIS RD. CHARLOTTE 4. Date Issued: 6-21-04
5. Reason for Request: (✓one) ☐ Plan Change ☐ Duplicate Permit _____ Duplicate Permit # _____ Date of Duplicate _____
☐ Not Doing Work
☑ Other (Specify) Change in Plans/over payment
6. Account Name: CRAFTSMEN CONST. CO, INC Account # X36943
7. If Refund, Check payable to: CREDIT ACCOUNT (Please Print) 8. Phone _____
9. Address: 4901 SILBERT AVE (Street) CHARLOTTE (City) NC (State) 28205 (Zip)
10. Signature: David W. Brown 11. Printed Name DAVID W. BROWN 12. Date: 6-21-04

For Departmental use only - Do not write below this line

SECTION II - IF ADJUSTMENT (To Be Completed By Employee & Supervisor)

Incorrect Entry	Correct Entry	Reason	Emp Initials	Date	Superv Initials	Date

SECTION III - INSPECTION COUNT AND PURGING (To Be Completed By Applicable Core Process)

# Of made Inspections	B	E	M	P	F	L

Purging: ☐B ☐E ☐M ☐P ☐S ☐F ☐L

Initials _____ Date _____

Expired Permit ☐

SECTION IV - CALCULATIONS (To Be Completed By Applicable Core Process)

Plan Review? (Y/ N)	Inspection Info	Credit/Refund%	Min Fee? (Y/N)	Permit Fee	Credit/Refund Amount
N %	%	%	$	$ 100.00	
Y=80%, N=90%	ea. Insp=10%	PR % - Insp %			Permit Fee X C/R% or Min Fee Whichever is greater

Initials JKA Date 6/21/04

SECTION V - VERIFICATION (To Be Completed By Revenue Collection)

If Refund, Org/Account	Refund with Credit Balance	If Credit, Trans #	Account #	Initials	Entry Date
	8_03=0 9004=$				
8_03 = 0	Refund / Charge on account	88---			

Section VI - APPROVALS (To Be Completed By Department And Finance Representatives)

Department Approval: _____ Date _____

Finance Approval: _____ Date _____

_____ Refund from Account #

_____ Check #

Daily Counter Transactions - Environmental Health

Printed On June 16, 2004 3:09 PM
Printed By Aidoojk

Transaction Date 06/16/04

Receipt#	Account#	Name	Transaction Type	Comments	Pymt Method	Check/Auth No.	User	Amount
26343	X33670	INDEPENDENT POOL & FENCE, INC.	0718 Residential Pool Permit	11425 INNES COURT	CHARGE		AIDOOJK	75.00
26344	200000	PIATT REALTY ASSOCIATES	0708 Realty Closing-Conventional	13527 LIPIZZAN CT	CHECK	6027	CRAIGGY	85.00
26346	X34544	ANTHONY & SYLVAN POOLS CORP	0718 Residential Pool Permit	6317 TRIPP PLACE	CHARGE		CRAIGGY	75.00
26349	B90310	REGAL CUSTOM HOME BUILDERS LLC	0734 Auth for Waste Wtr Sys Constr	5149 SADDLE HORN TRAIL/FILE 1378	CHARGE		CRAIGGY	50.00
26350	B90310	REGAL CUSTOM HOME BUILDERS LLC	0703 Installation/Final Approval	5149 SADDLE HORN TRAIL/FILE 1378	CHARGE		CRAIGGY	150.00
26352	200000	FERGUSON RODNEY N	0705 MH Exc/Add/Repl w/o System Mod	9901 FERGUSON ROAD	CHECK	7288	CRAIGGY	100.00
26353	200000	LITTLEWOOD NANCY	0708 Realty Closing-Conventional	9417 VALLEY ROAD	VISA	149987	AIDOOJK	85.00
26355	X36943	CRAFTSMEN CONST CO INC	0701 Improvment Permit App-Residen	7342 SARDIS ROAD	CHARGE		AIDOOJK	200.00
26357	200000	HPKINS & HOPKINS CONSTRUCTION	0703 Installation/Final Approval	13410 HIWASSEE ROAD	CHECK	24063	AIDOOJK	150.00

Total for Transaction Date 06/16/04: **970.00**

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Sheet: 1 of 2
Property ID: 187-301-15
Lot #:
File #: 16129
Code: 1

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: Jack Bicket
Applicant: David W. Brown
Address: 7342 Sardis Road, Charlotte, N. C. 28270
Date Evaluated: 06/17/2004
Proposed Facility: Residence
Design Flow (.1949): 720gpd
Property Size: .1a inv.
Location of Site: 7342 Sardis Road
Property Recorded:
Water Supply: [ ] Public [x] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [x] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [x] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.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 (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
1	LS, 7	0-6	GR/CL	FR/SEXP/SS/SP	>38" TO SOIL WETNESS	38	N/A	NONE	PS, IV
		6-38	SBK/C	FI/SEXP/S/P					.275G/D/FT^2
2	"	0-4	GR/CL	FR/SEXP/SS/SP	>30" TO SOIL WETNESS	30	"	"	US, IV
		4-30	SBK/C	FI/SEXP/S/P					.275GPD/FT^2
		SEE	COMMENTS	EXISTING SYSTEM	WILL BE USED				

Description	Initial System	Repair System
Available Space (.1945)		
System Type(s)		
Site LTAR		

Other Factors (.1946):
Site Classification (.1948):
Evaluated By: W. R. Marlin, LSS, 6/17/2004, W R Marlin
Others Present:

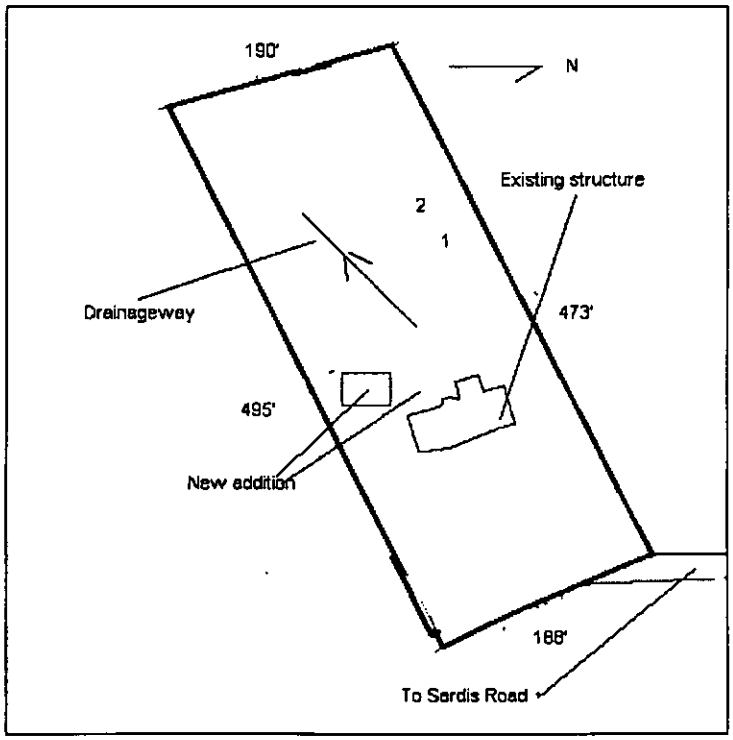
COMMENTS:

Area spot-checked to confirm previous soil investigation, drainageway not shown on original investiation report

Landscape Position	Group	Texture	.1955 LTAR	Structure
R-Ridge	I	S-Sand	1.2 - 0.8	SG-Single Grain
SS-Shoulder Slope		LS-Loamy Sand		M-Massive
LS-Linear Slope				CR-Crumb
FS-Foot Slope	II	SL-Sandy Loam	0.8 - 0.6	GR-Granular
NS-Nose Slope		L-Loam		SBK-Subangular Blocky
HS-Head Slope				ABK-Angular Blocky
CC-Concave Slope	III	SI-Silt	0.6 - 0.3	PL-Platy
CV-Convex Slope		SICL-Silty Clay Loam		PR-Prismatic
T-Terrace		CL-Clay Loam		
FP-Flood Plain		SCL-Sandy Clay Loam		
	IV	SC-Sandy Clay	0.4 - 0.1	
		SIC-Silty Clay		
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	NS-Non-Sticky	SEXP-Slightly Expansive
FR-Friable	SS-Slightly Sticky	EXP-Expansive
FI-Firm	S-Sticky	
VFI-Very Firm	VS-Very Sticky	
EFI-Extremely Firm	NP-Non-Plastic	
	SP-Slightly Plastic	
	P-Plastic	
	VP-Very Plastic	

Sketch of Soil Evaluation Locations



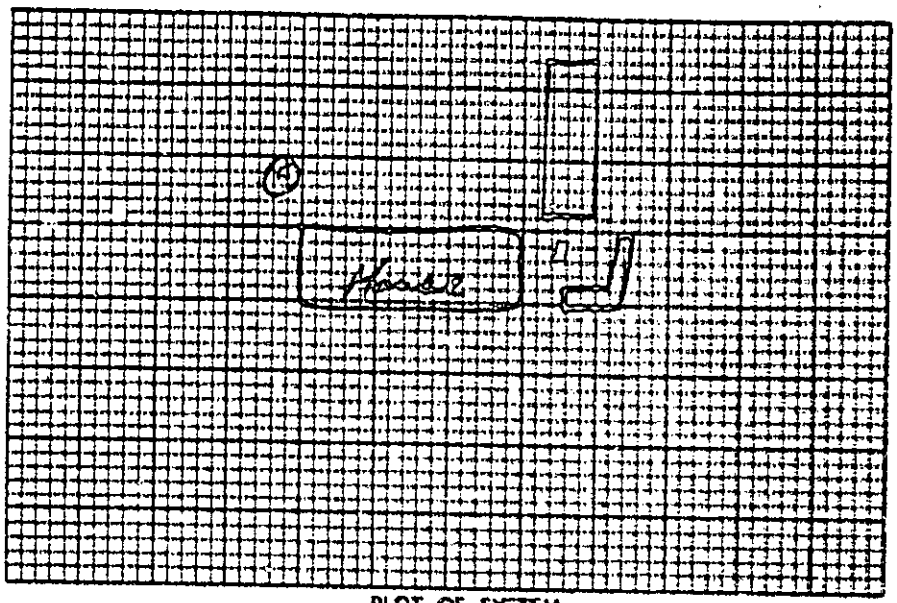
Date Issued 30 Oct 79 Serial 3267 ICAR(S) Permit No. 16129

T. C. No 82-201-15

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Permission is hereby given to ✓ Install or Construct, ____ Alter or Repair the individual septic tank waste-water 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 application 16129, dated 9/29/79 and this permit shall be void and of no effect if the information provided in the application is not true or is erroneous. All work shall be completed on or before 3 Mar 80, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500 gal

Tank Construction RC Conc

Absorption and/or Nitrification Lines:

Total Line Length 660' & 165'

Number of Lines 5 & 4

Distance from House 10'

Distance from Property Line 10'

Distance from Well 75'

NAME OF OWNER Maurice Moore

LOCATION OF PROPERTY 7342 Sardis Rd.

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Health Commission which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Environmental Health Director before any system can be covered up or otherwise rendered uninspectable or can be used. 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.

(15'x132'x13"stone) 5 ft (12'x32 & 9'x42 x12"stone)

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.

EHD-S-76

Environmental Health Department Copy

C of A (s) No. 16129

Serial 3334

T. C. No. 197-3017-5

Date Issued 12 December 77

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION
CERTIFICATE OF COMPLETION
CERTIFICATE OF APPROVAL

(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner Moore (LAST) Maurice (FIRST) (MIDDLE)

Location of Property 7392 Sardis Rd.

Application Number _____ Permit Number 16129

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material R.C. Conc.

Total Length of Drain Tile 660' & 167' Number of Lines 5 & 3

Depth of Filter Material 12" Cover Depth 15"

Water Supply Source Well Distance from Water Source 95'

Excavation Inspected ____ (DATE) Tank Inspected 12 Dec (DATE)

Nitrification Field Inspected 12 Dec (DATE)

Washing Machine Line Inspected, If Applicable 12 Dec (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been ~~installed~~ or constructed, ~~altered~~ or repaired in accordance with the permit issued and the regulations of the Mecklenburg County Health Commission in effect on the date of issuance of the permit. The issuance of this Certificate of Approval 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 Certificate of Approval is issued subject to those restrictions and conditions shown on the permit(s) in addition to those listed below under comments. This Certificate of Approval 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: Locust

[illegible]

[illegible]

IV

NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX H
SITE EVALUATION

S. I. R. NO. 16129
T. C. # 187-301-15

(Ground Absorption Sewage Disposal)

OWNER: MAURICE H. MOORE, JR. DATE REQUESTED: 8-29-79
ADDRESS: 5927 BRACE RD PLAT NO.:
COUNTY: CHARLOTTE, LOT SIZE: 2.09A
LOCATION OF SITE: 7342 Sardis Rd

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U 2-10	S PS U	S PS U	S PS U +
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1 Clay)	S (PS) U Clayey	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S (PS) U BLOCKY	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	S (PS) U 48 >	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock)	S (PS) U NONE	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & internal)	S (PS) U Adequate	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) U moderate	S PS U	S PS U	S PS U
8. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	P. SUITABLE			
SOIL SERIES	CECIL			

S - Suitable PS - Provisionally Suitable U - Unsuitable

See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc.

Recommendations/Comments:

Described By: W. B. Ramsey
Title: Soil Scientist Date: 8-27-79

S Form 2601
Limitation
D 539 (8/79)



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ISSI Operations Center Staff

SARDIS RD

Plat Rd
opposite side

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-20 in.) (Sandy loamy clayey, Note 2 & Clay)	S PS U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-20 in.) (Clayey soils)	S PS U	S PS U	S PS U	S PS U
4. SOIL DEPTH (in.)	S PS U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (in.) (Impervious Strata, Rock)	S PS	S PS	S PS	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	S PS U	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S PS U	S PS U	S PS U	S PS U
8. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION				
SOIL SERIES				

(A40-2.09A)
Cecil
2-10
Cecil
2-10

S - Suitable PS - Provisionally Suitable U Unsuitable

* See diagram on back (Include: Soil areas, property lines, roads, streams, outlet area, fill areas, wells, water bodies, slope patterns, etc.

Recommendations/Comments

Described By: _____

Title: _____ Date: 7-23-20

EHS Form 2001
Sanitation
EHS 325 (8/79)

Serial 3267

Date Issued 30 Oct 79

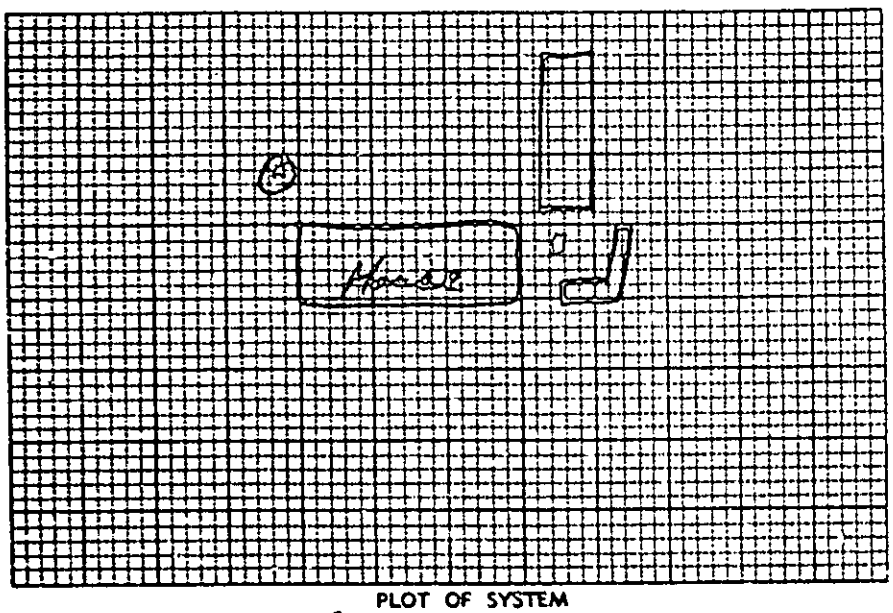
ICAR(S) Permit No. 16129

T. C. No 87-301-15

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT
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PLOT OF SYSTEM

Permeability Rate P.S.

Liquid Capacity of Tank 1500 gal

Tank Construction P.C. Conc

Absorption and/or Nitrification Lines:

Total Line Length 660' & 167'

Number of Lines 5 & 4 ✓

Distance from House 10'

Distance from Property Line 10'

Distance from Well 75'

NAME OF OWNER Maurice Moore

LOCATION OF PROPERTY 7342 Sardis Rd.

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(15'x132'x17" stone) 5 ft. (12'x32 or 9'x42 x12" tank

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.

EKD-5-76

Environmental Health Department's Copy