

5800 BRICKSTONE DR

10934104

6/12/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 6195-A DATE: 6-18-92

TC: 109-341-04 ☐ L ☒ CRT

SERIAL № 12881

Name of Owner Barie Bynum Juris.:

Address of Property 5800 Brickstone Dr.

Inspection Data:

Tank Material PLL

Total Length of Drainfield 400'

Number of Lines 4 @ 100'

Cover Depth 12"-18"

Water Supply Source well

Distance to Water Source >50'

Excavation Inspected 6-18-92

Tank(s) Inspected 6-18-92

Wash Line Inspected

High Water Alarm Inspected

PLOT

Design: 1992, 1500ST, CON, 1200SFT, 12", Cecil 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: Installed for 3 bedrooms Type II

B.R. Ferguson
Environmentalist

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

APPLICATION FOR AN IMPROVEMENT PERMIT

Pd. 6/28/91
Ck # 20479
Amt. 200.00

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
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) 6195A
FILE: 109-341-04
TC: 109-341-04
SERIAL: № 19626
Issued 7/30/91 ☐ L ☑ CRT

JOB LOCATION

① ADDRESS: ~~5730~~ 5800 (STREET NO.) BRICKSTONE DR. (STREET) ② FILE:
③ JURISDICTION: CHARLOTTE - MECK. ④ TAX PARCEL NO.: 109-341-04
⑤ SUBDIVISION: SUNSET HILLS ⑥ LOT: 107 + 108 ⑦ BLOCK:

OWNER

⑧ NAME: BARIS (FIRST) – (MIDDLE) BYRUM (LAST)
⑨ MAILING ADDRESS: 4430 - APT. 3-A ROLLING HILL DR.
⑩ CITY: CHARLOTTE, ⑪ STATE: N.C. ⑫ ZIP: 28213
⑬ PHONE: (WORK) 704-392-6195 ⑭ (HOME) 704-359-2746

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? 4
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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Baris Byrum
Date: 6-28-91

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

... No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by this Department.

... This permit is not transferable, and shall become null and void 36 months from the date of issuance.

Environmentalist — 7-25-91 (Date)

Director or Authorized Section Head — 7-25-91 (Date)

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

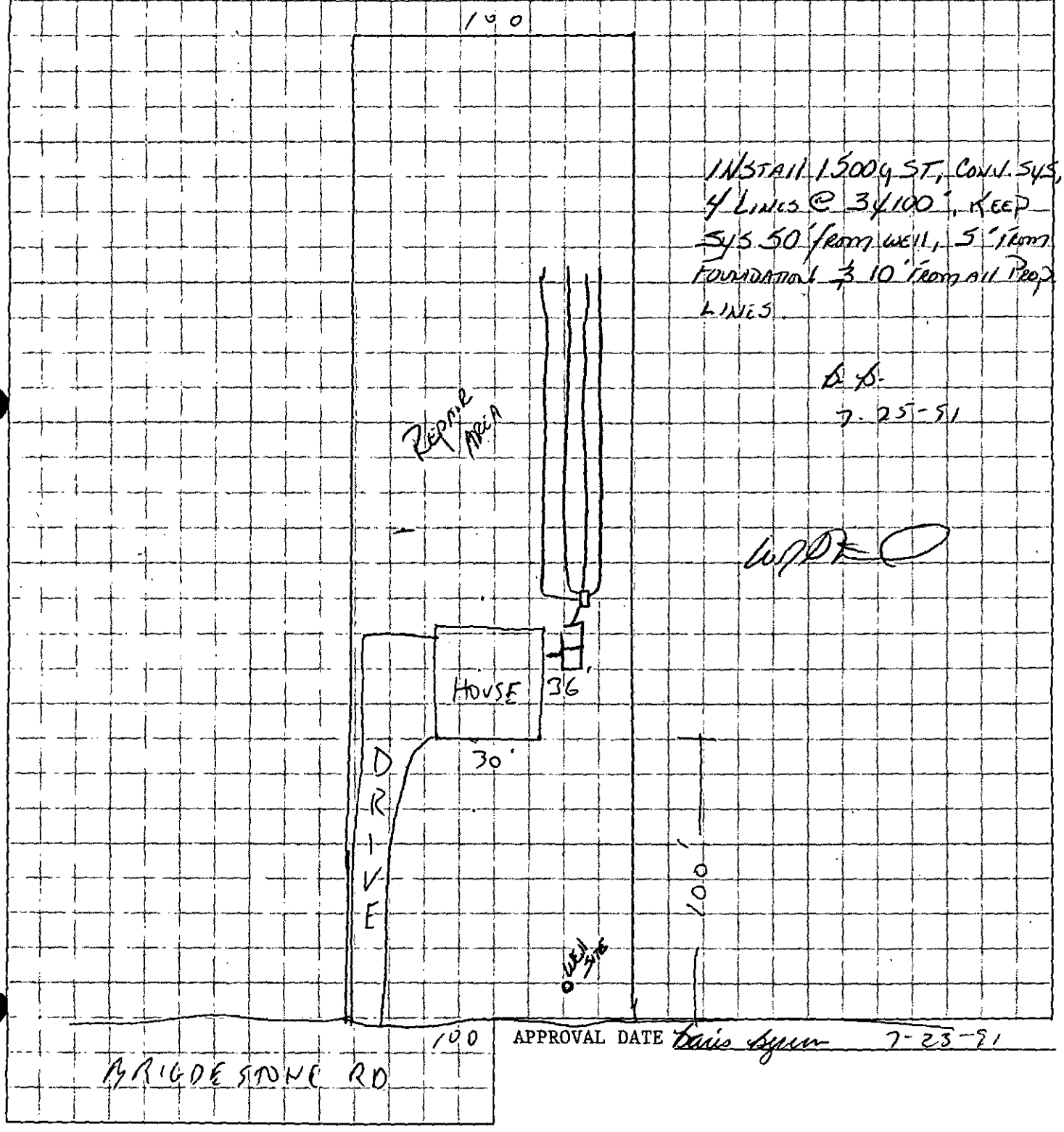
PROPOSED PLOT PLAN

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

FILE: 6195-A

TC: 109-341-04

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 Davis Lyon 7-23-91

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy

W2470

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

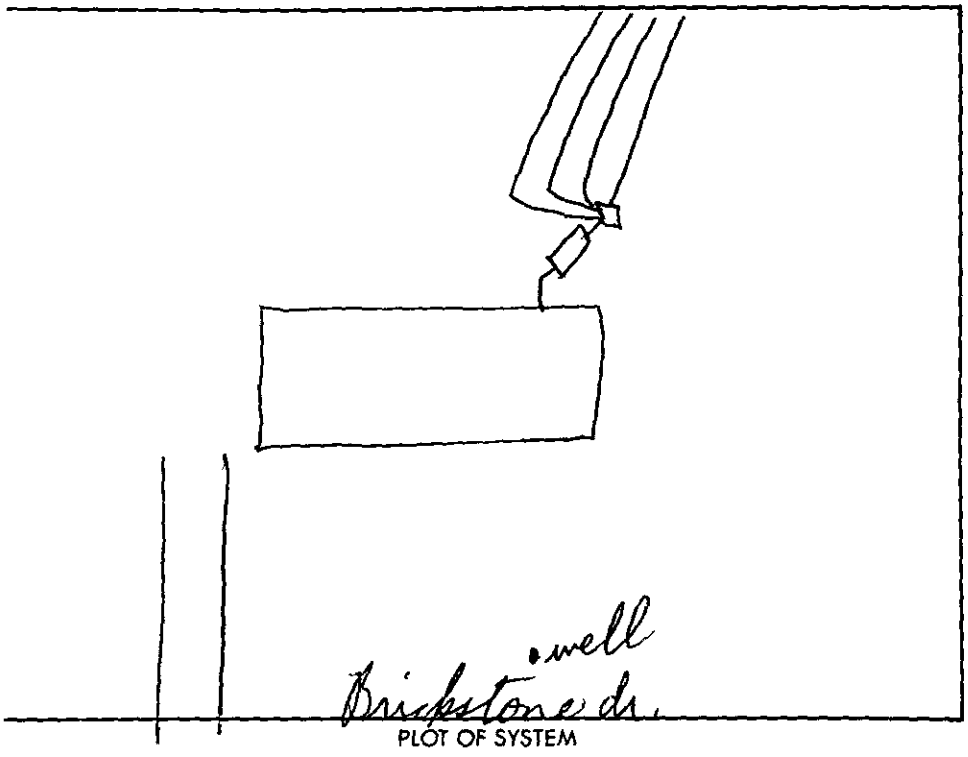
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 6195-A DATE: 5-14-92

TC: 109-341-04 ☐ L

SERIAL Nº 14092

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 6-28-91. All work shall be completed on or before 6-14-92, 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 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 _____ gallons

Tank Construction STT

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 5 feet

Distance from Property Line 10 feet

Distance from Well > 50' feet

NAME OF OWNER Baris Byrum

LOCATION OF PROPERTY 5800 Brickstone dr.

Comments: 4 lines 3'X100'X12" stone

C V Aff
Division or Section Head

B. R. Ferguson
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 Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

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

Mecklenburg County
Health Department

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

October 13th, 1989

Frank Hanson, Heritage Homes
5609 Monroe Road
~~Rock Hill, SC 29731~~
Charlotte, N.C. 28212

RE: Property located at 5730 Brickstone Drive 107/108
FILE: 6195A
PARCEL: 10934104

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 16486) 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,

Gene Vaughan

Gene Vaughan, 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 HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 16486

File: 6195A Action 1

Parcel: 10934104 ☐ PC

Location: 5730 Brickstone Drive

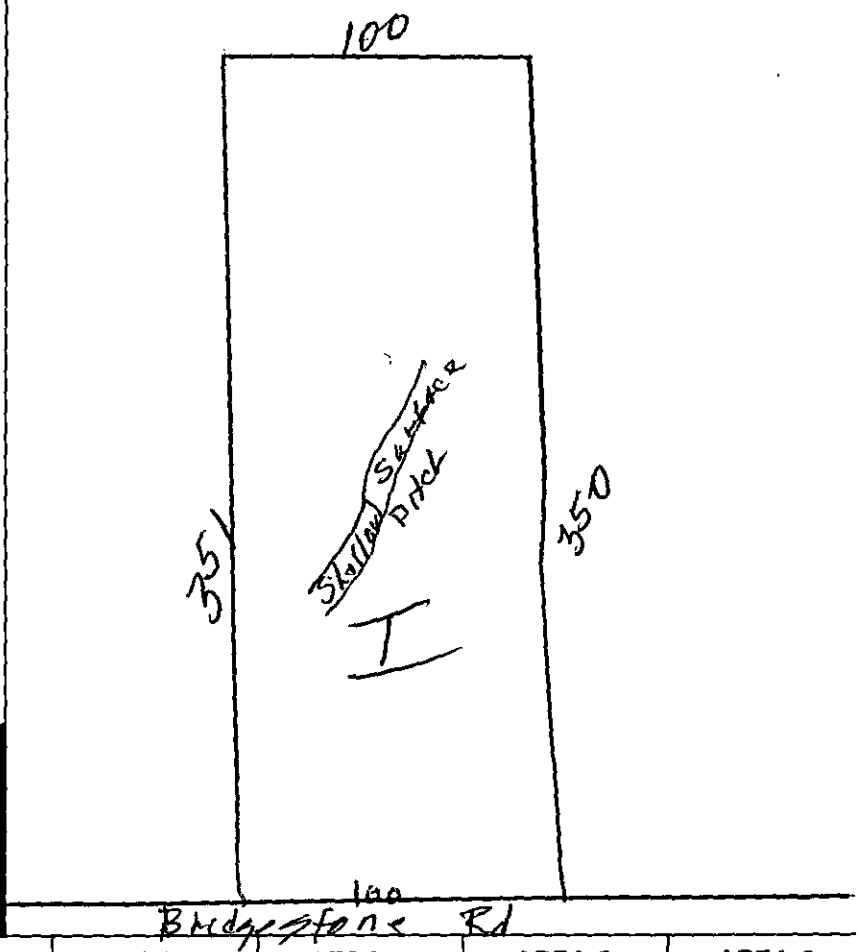
Subdivision:

Lot: 107/108 Block: Acres: .81

Owner: Frank Hanson, Heritage Homes
Address: 5609 Monroe Road
~~Rock Hill, SC 29731~~
Charlotte, N.C 28212

Comments: Lot Before 1983
Mdy Need Surface H20
Control At Center of lot

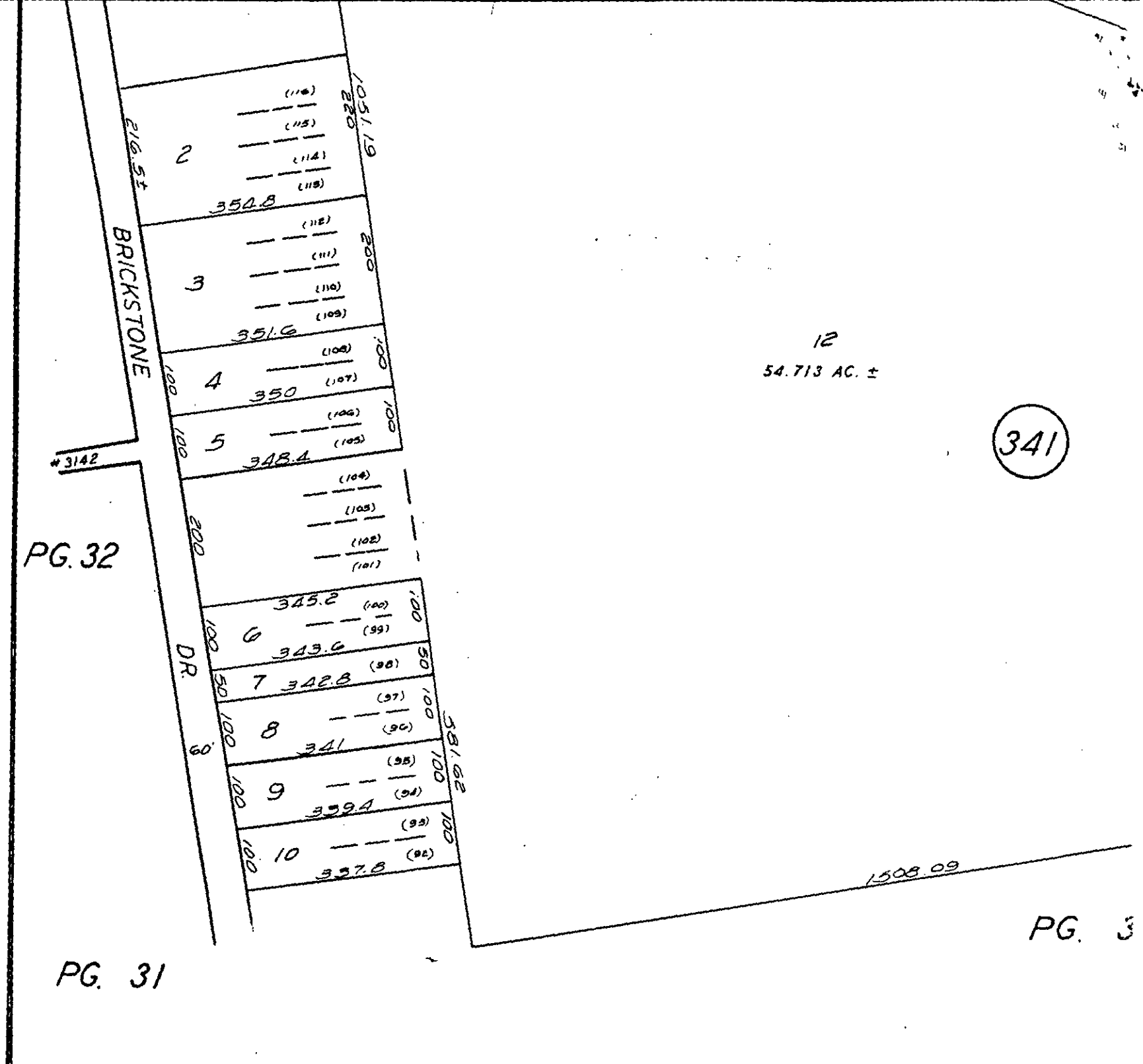
Described by: W. B. Ramsey
Date: 10-12-89



***** 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 2–6	S PS U	S PS U	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 Maybe Necessary	S (PS) U *	S PS U	S PS U	S PS U	S PS U	S PS U
Depth To Control Surface H20	S (PS) U 48+	S PS U	S PS U	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					
Area Classification	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U


BRICKSTONE DR.
#3142
216.5±
2
(116)
(115)
(114)
(113)
354.8
022
617.50
3
(112)
(111)
(110)
(109)
351.6
002
4
(108)
(107)
350
100
5
(106)
(105)
348.4
100
200
(104)
(103)
(102)
(101)
345.2
6
(100)
(99)
343.6
100
100
7
342.8
(98)
50
50
8
(97)
(96)
341
100
100
9
(95)
(94)
339.4
100
100
10
(93)
(92)
337.8
100
581.62
12
54.713 AC. ±
341
1508.09
PG. 32
PG. 31
PG. 3

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 6195A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: 5730 BRICKSTONE DRIVE

② SUBDIVISION: ~~NONE~~ SUNSET HILLS ③ LOT: 107 & 108 ④ BLOCK: None

⑤ PARCEL REFERENCE: BOOK NO.: 109 PAGE NO.: 341 PARCEL NO.: 04

⑥ DEED REFERENCE: BOOK NO.: 5715 PAGE NO.: 827 (SEE DEED ATTACHED)

OWNER

**MAIL REPORT TO: FRANK HANSON, HERITAGE HOMES, 5609 MONROE RD, CHARLOTTE, NC 28212 Work: 532-2121

⑦ NAME: L. (FIRST) LOYD (MIDDLE) ARDREY (LAST)

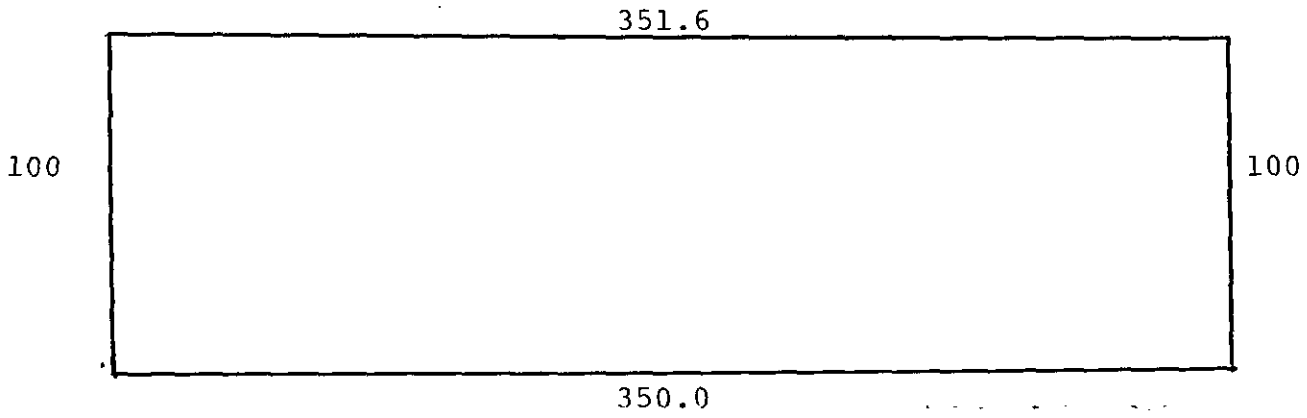
**SEE ABOVE

⑧ MAILING ADDRESS: P. O. BOX 11071

⑨ CITY: ROCK HILL ⑩ STATE: SC ⑪ ZIP: 29731

⑫ PHONE: (WORK) 803-327-6070 (HOME) 803-366-3503

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: Loyd Ardrey

Date: 9-15-89

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

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 9/19/89

Name/Company: Paris Bynum

Sanitation _____

Vector Control _____ Century 21

O.P.W.D. ✓

Service: Soil
Tacie
6195A

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

SEP 19 1989

CR# 0268
$40.00

Fee: $ 40.00

NOTICE:

A processing fee of $15.00 will be charged for all returned checks in accordance with N.C. General Statute 25-3-512.

Completed by

Collected by

BILLING — WHITE CUSTOMER COPY — YELLOW

DEED BOOK PAGE

5715 0827

PRESENTED FOR REGISTRATION

MAR 17 4 32 PM '88

CHARLIE REGISTER OF DEEDS MECKLENBURG CO. N.C.

201

Excise Tax $0.00

Recording Time, Book and Page

Tax Lot No. ..... Parcel Identifier No. 171-341-01

Verified by ..... County on the ..... day of ....., 19.....

by .....

Mail after recording to Kennedy Covington Lobdell & Hickman

Box 47

This instrument was prepared by Kennedy Covington Lobdell & Hickman

Brief description for the Index Lots 107 & 108, Sunset Hills

NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED made as of this 15th day of March, 1988, by and between

GRANTOR	GRANTEE
ANNABEL REAMES, widowed	L. LOYD ARDREY, married P. O. Box 4662 Rock Hill, SC 29731

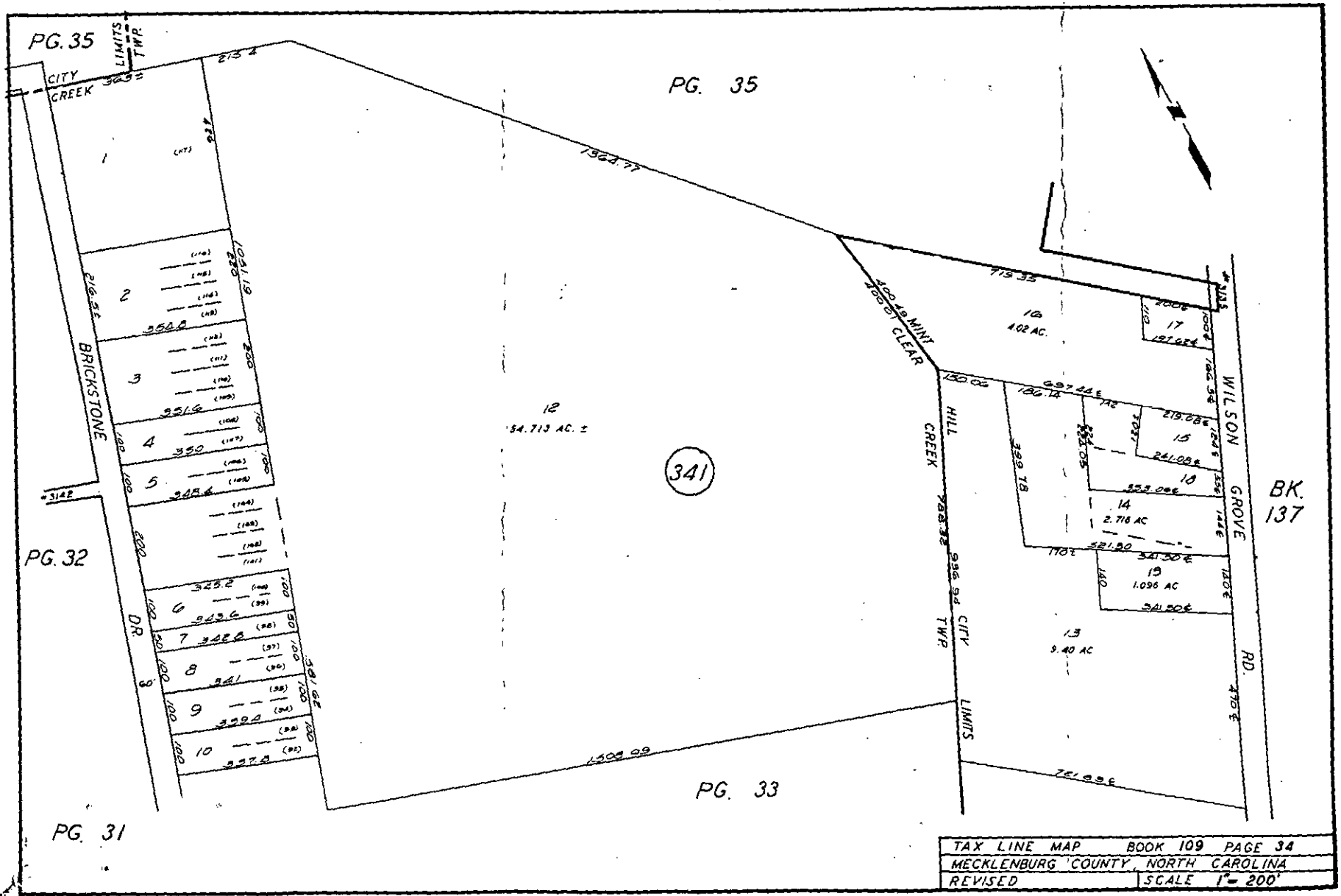
Enter in appropriate block for each party: name, address, and, if appropriate, character of entity, e.g. corporation or partnership.

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in the City of ..... Township, Mecklenburg County, North Carolina and more particularly described as follows:

BEING all of Lots 107 and 108 as shown upon the map of Sunset Hills recorded in the Mecklenburg County, North Carolina, Public Registry in Map Book 6, Page 593, to which reference is hereby made.

N.C. Bar Assoc. Form No. 3 © 1976, Revised 1977.
Printed by Agreement with the N.C. Bar Assoc.-1981.



FOR TAX PURPOSES ONLY

HELEN ADAMS Realty

2301-C Randolph Rd. • Charlotte, North Carolina 28207

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
SEP
ENVIRONMENTAL HEALTH
DIVISION

September 18, 1989

Mecklenburg County Health Department
Environmental Health Division
1200 Blythe Blvd.
Charlotte, North Carolina 28203

Re: Application for Soil Investigation

Gentlemen:

Enclosed is an application signed by the property owner along with a check for the $40.00 fee.

Please note on the application the address to mail your findings.

As the Realtor for the owner, I will be happy to receive your call should you need additional information.

Sincerely,

HELEN ADAMS REALTY

Anita Kirby

Anita Kirby
Realtor

AHK/jb

Enclosure

CC: Frank Hanson
Century 21 Heritage Homes
5609 Monroe Road
Charlotte, N.C. 28212

P.S. "Soil Test" sign & boundary markers are in place.

TO: ENVIRONMENTAL HEALTH DEPT.
BUILDING STANDARDS DEPT.
DEPT. OF ENVIRONMENTAL PROTECTION/
SOLID AND HAZARDOUS WASTE

DATE 7-29-91

FROM: COUNTY ENGINEERING DEPARTMENT

ADD FILE _____ JURISDICTION CODE Mech.

PARCEL NUMBER 109-341-04

ASSIGNED ADDRESS 5800 Brickstone Dr

EXISTING ADDRESS _____

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	DISAPPROVED
1. SUBDIVISION REGULATIONS	/ /	/ /*
2. FLOODWAY REGULATIONS	/ /	/ /*
3. EROSION CONTROL REGULATIONS	/ /	/ /*
4. PUBLIC UTILITY EASEMENT	/ /	/ /*

	PRESENT	NOT PRESENT
5. PUBLIC UTILITY EASEMENT	/ /*	/ /
6. PROPERTY FRONTS ON THOROUGHFARE	/ /*	/ /
7. DRIVEWAY PERMIT REQUIRED	/ /*	/ /

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

REMARKS: _____

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIER'S 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: _____

OFWEAR 06-88

NEW ADDRESS / /*

FORM 100

DATE 7/23/91

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION Meck

109-341-04
PARCEL NUMBER

5800 Brickstone Dr
ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

5730 Brickstone Dr
EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

NA
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. EROSION CONTROL REGULATIONS	**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: 2 story Home & Deck

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: DM

REVISED 1/91

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 16486

File: Action _____

Parcel: ☐ PC

Location:

Subdivision:

Lot: Block: Acres:

Owner:
Address:

Comments: _____

_____

_____

_____

Described by: _____

Date: _____

***** 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	S PS U	S PS U	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	S PS U	S PS U	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						
Area Classification	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U