

RAMAH CHURCH ROAD

6/22/2007

duponbj

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

MECKL... HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR AN IMPROVEMENT PERMIT

PAID

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)
FILE: 6974A
TC: 011-082-02
SERIAL: № 19788

OCT 2[illegible] 1990

☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 14900 (STREET NO.) RAMAH Ch. Rd, HUNTERSVILLE (STREET) ② FILE: ____

③ JURISDICTION: ____ ④ TAX PARCEL NO.: ____

⑤ SUBDIVISION: ____ ⑥ LOT: ____ ⑦ BLOCK: ____

OWNER

⑧ NAME: CARI (FIRST) E. (MIDDLE) SIMS (LAST)

⑨ MAILING ADDRESS: P.O. Box 673

⑩ CITY: HUNTERSVILLE ⑪ STATE: NC ⑫ ZIP: 28078

⑬ PHONE: (WORK) — ⑭ (HOME) 704/896-7770

REQUEST

This request is for a(n):

⑮ ☒ New permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify) ____

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 2 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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: C. E. Sims

Date: 7-26-90

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 / Date

Director or Authorized Section Head / Date

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 10-26-90

Name/Company: Carl E. Sims

Sanitation _____

Vector Control _____

O.P.W.D. X

Service: L.P.

14900 Ramah Church Rd

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
OCT 26 1990

3300 # 9+200.00

Fee: $ 200.00

NOTICE:

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

P. Johnstone
Completed by

Collected by

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY HEALTH DEPT
ENVIRONMENTAL HEALTH DIVISION
PAID
OCT 26 1990
$200.00
☐ L ☐ CRT

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)
FILE: 6974A
TC: 011-082-02
SERIAL: HP 19789

JOB LOCATION

① ADDRESS: 14900 (STREET NO.) RAMAH Ch. Rd. (STREET), HUNTERSVILLE ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.:
⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: CARI (FIRST) E (MIDDLE) SIMS (LAST)
⑨ MAILING ADDRESS: P.O. Box 673
⑩ CITY: HUNTERSVILLE ⑪ STATE: NC ⑫ ZIP: 28078
⑬ PHONE: (WORK) — ⑭ (HOME) 704/896-7770

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⑯ ☐ Repair or alteration permit
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Environmentalist / Date

Director or Authorized Section Head / Date

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Mecklenburg County
Health Department

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

February 20, 1991

TO: Susan P. Latimer
Accountant I

FROM: Lorraine C. Whitaker
Accounting Technician I

SUBJECT: Request for Refund/ Environmental Health Services

The following refund is requested:

AMOUNT: $200.00

ORG/ACCOUNT # 462-3511

PAYABLE: Mr. Carl Sims
P. O. Box 673
Huntersville, N. C. 28078

File #6974A

DATE OF ORIGINAL DEPOSIT: 10/26/90

REASON: Imp/Instal Permit Fee New $200.00
No action taken on this account....

/Enclosures

249 Billingsley Road • Charlotte, North Carolina 28211 • (704) 375-1885

Mecklenburg County
Health Department

MEMORANDUM

TO: Lorraine Whittaker

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

DATE: February 20, 1991

SUBJECT: Refund on 14900 Ramah Church Road

Please issue a refund in the amount $200.00 for an Application for Improvement/Installation Permit at 14900 Ramah Church Road, Huntersville (File No. 6974A), tax parcel No. 011-082-02. The property owner has requested cancellation. Please make refund payable to the following address:

Mr. Carl E. Sims
P. O. Box 673.
Huntersville, North Carolina 28078

Thank you for your prompt attention to this matter.

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

For Gene Vaughan

Date 11-1-90 Time 10:05

WHILE YOU WERE OUT

Mr. Rod Autry

From V. Chairman of City Commissioners

Phone No. 365-6900

Area Code Number Extension

TELEPHONED	X	URGENT	
PLEASE CALL	X	WANTS TO SEE YOU	
WILL CALL AGAIN		CAME TO SEE YOU	
		RETURNED YOUR CALL	

Sept 23

Message Suitable location for septic System
Carl Sims to Gene Vaughan
Bldg Permit at 14900 Rome Church Rd
File 6974-A Parcel P0011-082-02

Left Pres 50 11-1-90 11-2-90 left msg 2

WT
Operator

DataCom 9161

APPLICATION FOR AN IMPROVEMENT PERMIT

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)

FILE: 6974A

TC: 011-082-02

SERIAL: 13783

ENVIRONMENTAL HEALTH DIVISION
PAID
OCT 26 1990
$200.00
☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 14900 (STREET NO.) RAMAH Ch. Rd. (STREET), HUNTERSVILLE ② FILE: _____

③ JURISDICTION: _____ ④ TAX PARCEL NO.: _____

⑤ SUBDIVISION: _____ ⑥ LOT: _____ ⑦ BLOCK: _____

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⑧ NAME: CARI (FIRST) E (MIDDLE) SIMS (LAST)

⑨ MAILING ADDRESS: P.O. Box 673

⑩ CITY: HUNTERSVILLE ⑪ STATE: NC ⑫ ZIP: 28078

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Signed: C. Sims

Date: 7-26-90

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Environmentalist / Date

Director or Authorized Section Head / Date

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INSTRUCTIONS

PLEASE PRINT OR TYPE ALL REQUESTED INFORMATION

ITEM(S) . . . . INSTRUCTIONS

① . . . . . Indicate location of property for which the request is being made. Give **street number** and street or road name. If you do not know the street number, you must contact the Mecklenburg County Engineering Department to have one assigned.

② . . . . . If a soil investigation has been run, copy the file number from the report. This may appear as SIR, ICAR(S) or APT numbers on older reports.

③ . . . . . Indicate the jurisdiction in which the property is located. The jurisdiction is assigned by County Engineering.

④ . . . . . Indicate the tax account or parcel number for the property (example 000-000-00). If the property is comprised of a portion of a large tract, precede the parcel number with the letters "PO."

⑤-⑦ . . . . . Indicate the subdivision name and the lot and block numbers in the subdivision if applicable.

⑧-⑭ . . . . . Indicate, in the requested format, the information as it pertains to the person to whom the permit should be issued.

⑮-⑱ . . . . . Indicate the purpose of the request by placing an "X" in the appropriate box.

⑲-㉑ . . . . . Indicate the type structure the system will serve by placing an "X" in the appropriate box.

- Residence means a single or multi-family dwelling (duplex, apartment, hotel, motel) or any other place where people reside.
- Mobile home means a trailer used as a residence that is designed without a permanent foundation and is capable of being moved to another location.
- Business or place of public assembly means non-residential use of buildings such as manufacturing, office space, warehousing operations, place of amusement or recreation, church, fairground, stadium, campground or any other place where people work or assemble.

㉒-㉔ . . . . . If the system will serve a residence or a mobile home, indicate the number of bedrooms, the maximum occupancy of the residence and whether or not the structure will have a basement. When calculating the number of bedrooms include all rooms which are intended to be used as bedrooms or might later be furnished or converted to bedroom use and any additional bedrooms to be constructed in the future.

㉕-㉗ . . . . . If the system will serve a business, indicate the type business, the maximum number of employees and the maximum number of seats to be provided. Include in these figures projections for future expansions.

㉘ . . . . . Indicate the type water supply by placing an "X" in the appropriate box.

- Individual well means a well located on the lot, serving a building occupied by only one family or one business establishment and will not be a public place, a place of public gathering, or business which processes or manufactures any product which is used as, or is used in a food product.
- Municipal system means a water supply furnished by a city, county, town or other governmental authority.
- Community well means a privately owned water system originating from a well source.
- Community system means a privately owned water system originating from a source other than a well.

㉙ . . . . . Once you have completed the application, read the certification statement in the lower, left hand corner. The statement must be signed, dated, and returned to the Department along with a Proposed Plot Plan and a copy of the Engineering Address Record prior to the issuance of any permits. **IN ORDER FOR YOU TO RECEIVE A COPY OF THE COMPLETED PERMIT FOR CONSTRUCTION, ALL COPIES OF THIS FORM MUST BE RETURNED TO THE ADDRESS LISTED ON THE FRONT OF THE APPLICATION.**

Huntersville, NC
September 23, 1990

RECEIVED
MECKLENBURG COUNTY
SEP
ENVIRONMENTAL HEALTH
DIVISION

Mr. Gene Vaughan,
Environmental Health Division,
Mecklenburg County Health Department,
1200 Blythe Boulevard,
Charlotte, NC 28203

Re: 14900 Ramah Church Road
File: 6974A
Parcel: PO 011-082-02

Dear Mr. Vaughan;

This refers to your letter dated 9/20/90 advision me that soil tests done on subject property was found unsuitable for a septic system.

My efforts are directed at building myself a two bedroom house on a sixteen (16) acre tract of land. I find it inconceivable, with the area I have, that any reasonable guidelines you may have would class this property as unsuitable. Possibly so if I were building an apartment house or a 15 bedroom mansion. However, this is not the case. I want to build a two bedroom house for two people.

Another reason, in my judgement, a hard look needs to be taken at my site is that within 200 yards of my site a house is now under construction and a like distance in the other direction three houses are occupied.

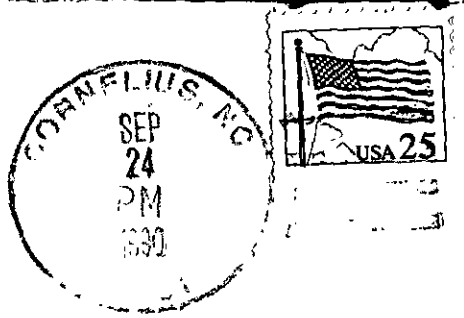
I ask for your help in clearing this problem so I can get my house under roof before winter sets in. Please come to my aid.

Sincerely,

Carl Sims

cc: Mr. Rod Autrey,
5425 Summerpond Ct.,
Charlotte, NC 28226

Carl Sims,
P.O. Box 673,
Huntersville, NC 28078



Mr. Gene Vaughan,
Environmental Health Division,
Mecklenburg County Health Department,
1200 Blythe Blvd.,
Charlotte, NC 28203

PROPOSED PLOT PLAN

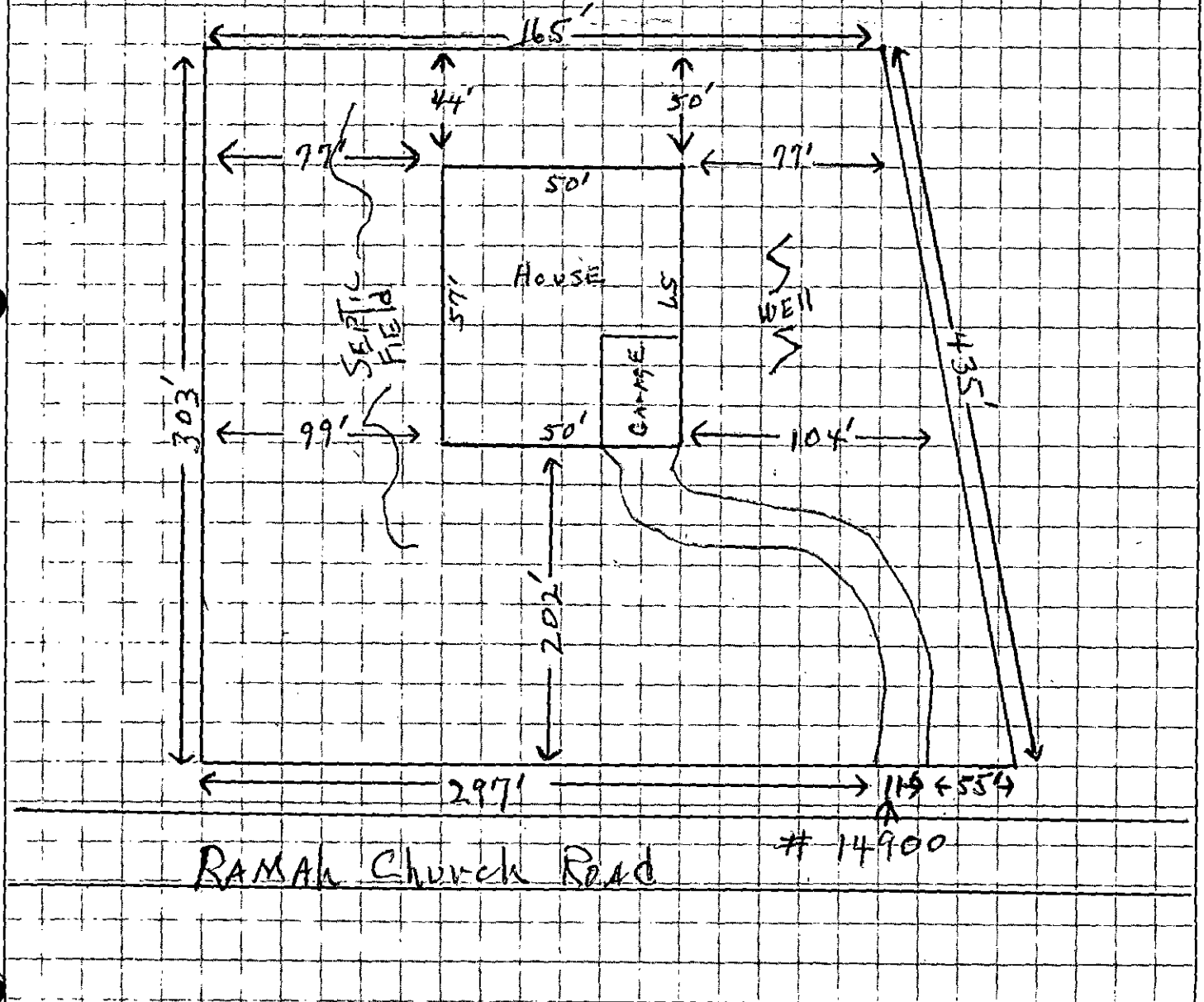
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 6974 A

TC: 011-082-02

CARL SIMS

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 _____

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

10-19-60

Gene - I think this may solve Mr. Sims' problem. I am not sure ~~that~~ if he will need a pump - he may be able to move things around so he will not.

I just made the memorandum for the file. Let me know if we need to change anything

Bill

Mecklenburg County
Health Department

M E M O R A N D U M

TO: W. R. Marlin

FROM: W. R. Marlin, Soil Scientist

DATE: October 24, 1990

RE: File No. 6974A. Saprolite investigation on area described in soil investigation report dated September 20, 1990.

An investigation of saprolite was made on October 19, 1990. Backhoe pits were dug a depth of 50 inches. The saprolite material was found to be of loam texture with no continuous joints or fractures to a depth of 50 inches. The subsoil depth in this area ranges from approximately 23 to 36 inches. Some additional area would be available outside the area investigated.

A septic tank system installed in this site would require a 100% repair area to be available.

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

Mecklenburg County
Health Department

M E M O R A N D U M

TO: W. R. Marlin

FROM: W. R. Marlin, Soil Scientist

DATE: October 24, 1990

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

Mecklenburg County
Health Department

September 20th, 1990

Carl Sims
PO Box 673
Huntersville, NC 28078

RE: Property located at 14900 Ramah Church Road
FILE: 6974A
PARCEL: P0011-082-02

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 results of this investigation showed the property to be classified UNSUITABLE for the installation of such a system. A copy of the Site Evaluation Report (Serial Number 16727) is enclosed.

State regulations provide that sites originally classified unsuitable may be utilized for the installation of alternate or modified sewage disposal systems provided the requirements of 10 NCAC 10A .1948 (c) are met. A reprint of this section is enclosed for your information.

Should you desire to file for permission to install an alternate or modified sewage treatment system on the property, 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. They will be reviewed, and if it is determined that the proposed system may reasonably be expected to function satisfactorily, an Improvement Permit will be issued by the Department upon completion by you, of a formal request for lot reclassification.

If I may be of any assistance, please feel free to call.

Very truly yours,

Gene Vaughan, R.S., Supervisor
Individual Water and Wastewater Systems

Enclosure (2)

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 16727

File: 6974A

Action 2

Parcel: Po 011-062-02

PC

Location: 14900 Ramah Ch. Road

Subdivision:

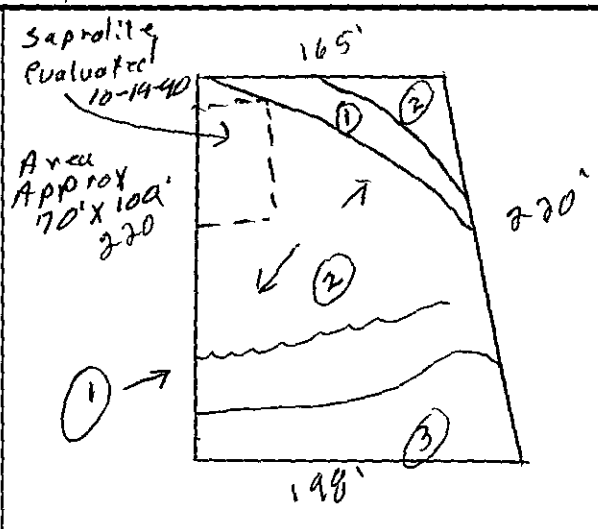
Lot: Block: Acres: .91

Owner: Carl E. Sims
Address: P.O. Box 673
Huntersville, NC 28078

Comments: 100% Repair
see memorandum - saprolite evaluation
10-19-90 - acceptable to 50" WT

Described by: William A. Marlin

Date: 9-20-90



Ramah Ch. Rd

***** 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) complex slopes	(S) PS U 6-12%	(S) PS U 2-10%	S PS U	S PS U	S PS U
Texture	S PS U —	S (PS) U clay	S PS (U) some 2-1 clay	S PS U	S PS U	S PS U
Structure	S PS U —	S (PS) U Blocky	S (PS) U Blocky	S PS U	S PS U	S PS U
Drainage	S PS U	S (PS) U >36" To water	S PS (U) some perched water 24"	S PS U	S PS U	S PS U
Depth	S PS U —	S PS (U) 24-36"	S PS (U) 28-30"	S PS U	S PS U	S PS U
Restrictive Horizons	S PS U	S (PS) U >36"	S (PS) U >36"	S PS U	S PS U	S PS U
Available Space	S PS U	S (PS) U	S PS (U) Restricted	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	complex slopes	IV Parolet-like	Mecklenburg-Helena			
Area Classification	S PS (U)	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 16727

File: Action

Parcel: PC

Location:

Subdivision:

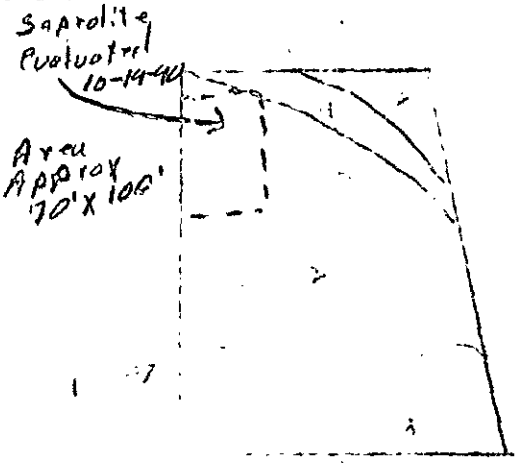
Lot: Block: Acres:

Owner:
Address:

Comments:
see memorandum - saprolite evaluation
10-19-90 - acceptable to 50" WA

Described by:

Date:



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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

8-30-90

~~Bill~~,

Please call me the afternoon before or the morning of the day you will be here.

Thanks!

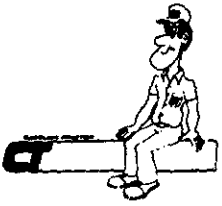
896-7770

15458

C Sun

115

HB



$50.00 per acre

APPLICATION FOR SOIL INVESTIGATION

6974A

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

(OFFICE USE ONLY)

FILE: [redacted]

TC: 011-082-02

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: 14920 Ramah Church Rd, Huntersville, NC 28078

② SUBDIVISION: _____ ③ LOT: _____ ④ BLOCK: _____

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

⑥ DEED REFERENCE: BOOK NO.: _____ PAGE NO.: _____

OWNER

⑦ NAME: CARI (FIRST) E (MIDDLE) SIMS (LAST)

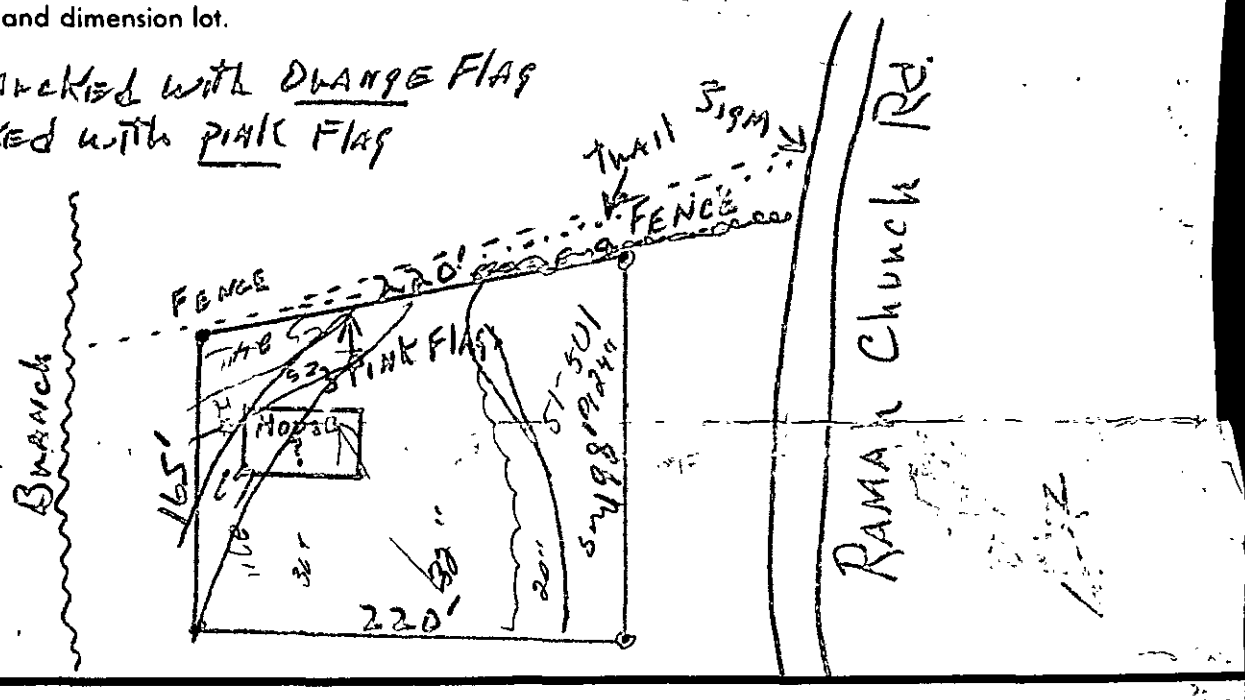
⑧ MAILING ADDRESS: P.O. Box 673

⑨ CITY: Huntersville ⑩ STATE: NC ⑪ ZIP: 28078

⑫ PHONE: (WORK) — (HOME) 704/896-7[illegible]0

⑬ Accurately diagram and dimension lot.

All corners marked with Orange Flag
All lines marked with Pink Flag



Scale: 1" = 25(?)'

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.

See attached note to call. Signed: [signature]

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

Date: 8-30-90

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

Mecklenburg County
Health Department

August 28th, 1990

Carl Sims
PO Box 673
Huntersville, NC 28078

RE: Property located at Ramah Church Road
FILE: 6974A
PARCEL: 01108202

Dear Sir:

At your request a soils investigation was conducted on the property designated above. Results of this investigation showed the site to be classified as UNSUITABLE under criteria as set forth in Section .1900 of the North Carolina Administrative Code, Title 10, Department of Human Resources, Chapter 10, Division of Health Services; Sanitary Engineering Section, Subchapter 10A, Sanitation. A copy of the Site Evaluation Report (Serial Number 16639) is enclosed.

The soil on this property is not suitable for use with any conventional, modified or alternative system of which I am aware. If you wish to exercise your right of appeal concerning the interpretation and enforcement of these rules you may do so in accordance with G.S. 150B and 10 NCAC 1B.

If I can be of assistance, please do not hesitate to call.

Very truly yours,

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 16639

File: 6974A Action 3

Parcel: 01108202 ☐ PC

Location: Ramah Church Road

Subdivision:

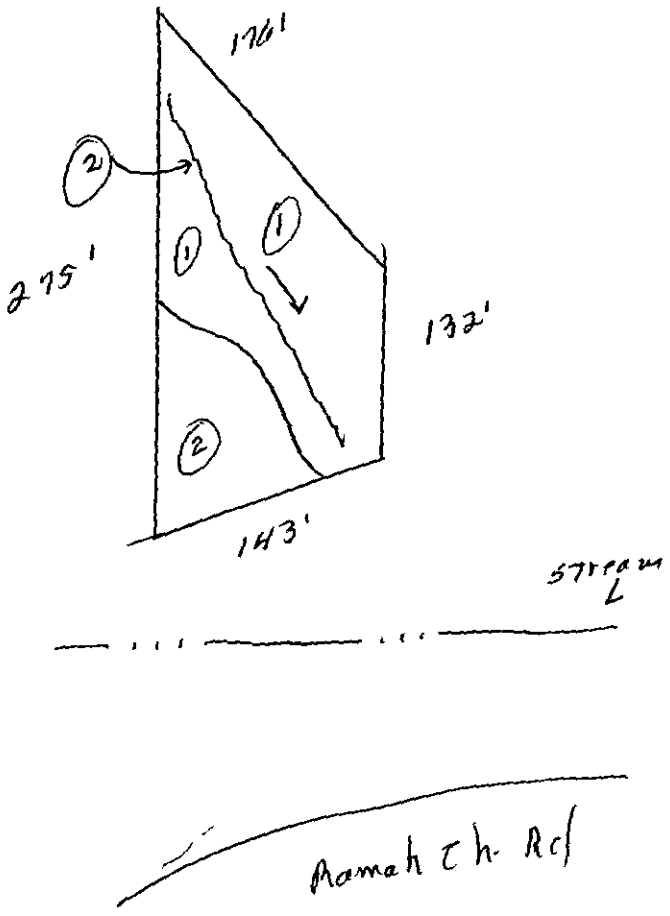
Lot: Block: Acres: .74

Owner: Carl Sims
Address: PO Box 673
Hunterssville, NC 28078

Comments: _____

Described by: William A. Marlin

Date: 8-24-90



***** 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) complex slopes	S PS U	S PS U	S PS U	S PS U
Texture	S PS (U) Expanding Clay	S PS U —	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U —	S PS U	S PS U	S PS U	S PS U
Drainage	S PS (U) some perched water 20-36"	S PS U —	S PS U	S PS U	S PS U	S PS U
Depth	S PS (U) 13-36"	S PS U —	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 7-36"	S PS U —	S PS U	S PS U	S PS U	S PS U
Available Space	S (PS) U limited	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	Enon-Helena Expanding Clay	complex slopes				
Area Classification	S PS (U)	S PS (U)	S PS U	S PS U	S PS U	S PS U

MECKLENBURG COUNTY HEALTH DEPARTMENT
SITE EVALUATION REPORT
SERIAL NUMBER 16639

File:

Action

Parcel:

☐ P.C

Location:

Subdivision:

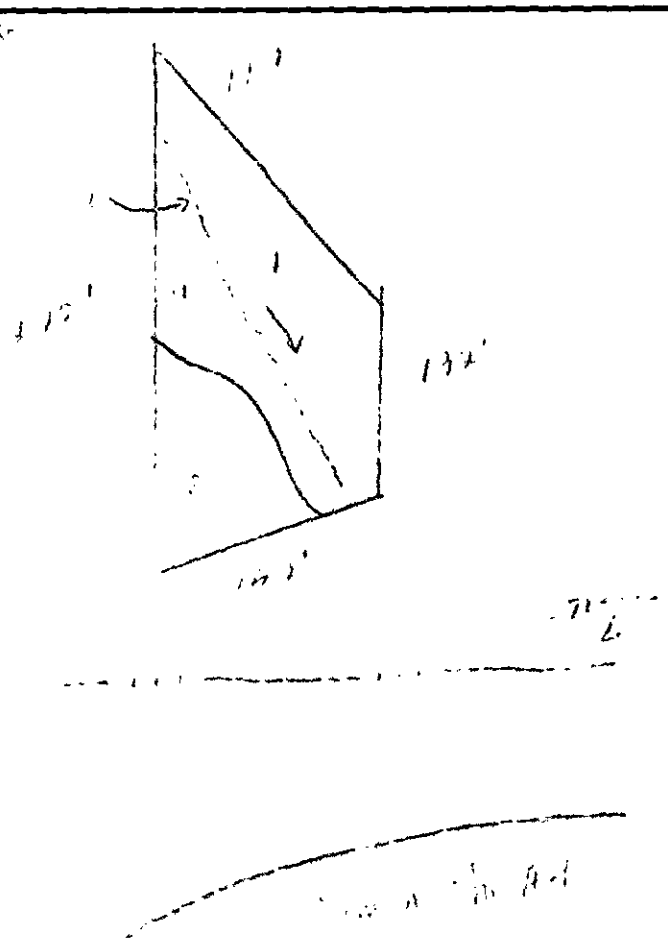
Lot: Block: Acres:

Owner:
Address:

Comments: _____

Described by: _____

Date: 10-11



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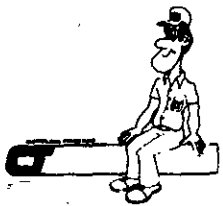
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Restrictive Horizons	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
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Soil Group/Series						
Area Classification	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U

7-26-90

Please call me day before or morning test is to be done. I will meet you there.

896-7770

Thanks
C. E. Sims



APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 16974-A

TC: 011-082-02

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: 14900 RAMAH Ch. Rd., HUNTERSVILLE, NC 28078

② SUBDIVISION: _____ ③ LOT: _____ ④ BLOCK: _____

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

⑥ DEED REFERENCE: BOOK NO.: _____ PAGE NO.: _____

OWNER

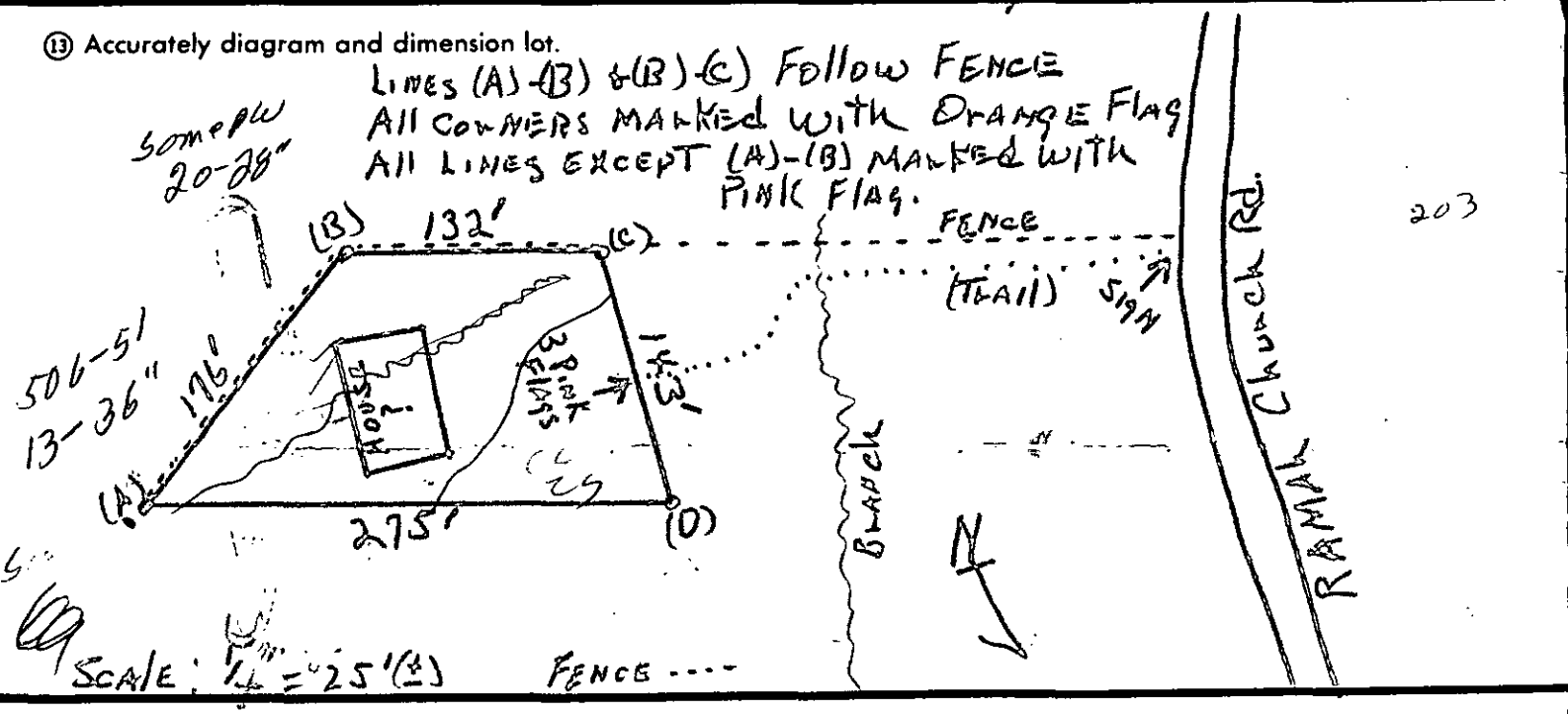
⑦ NAME: CARL (FIRST) E (MIDDLE) SIMS (LAST)

⑧ MAILING ADDRESS: P.O. Box 673

⑨ CITY: HUNTERSVILLE ⑩ STATE: NC ⑪ ZIP: 28078

⑫ PHONE: (WORK) — (HOME) 704/896-7770

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.

SEE ATTACHED NOTE TO CALL

Signed: C. E. Sims

Date: 7-26-90

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

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 6974A

TC: 011-082-02

☐ PC ☐ REPT

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
AUG 1 - 1990
ENVIRONMENTAL HEALTH
DIVISION

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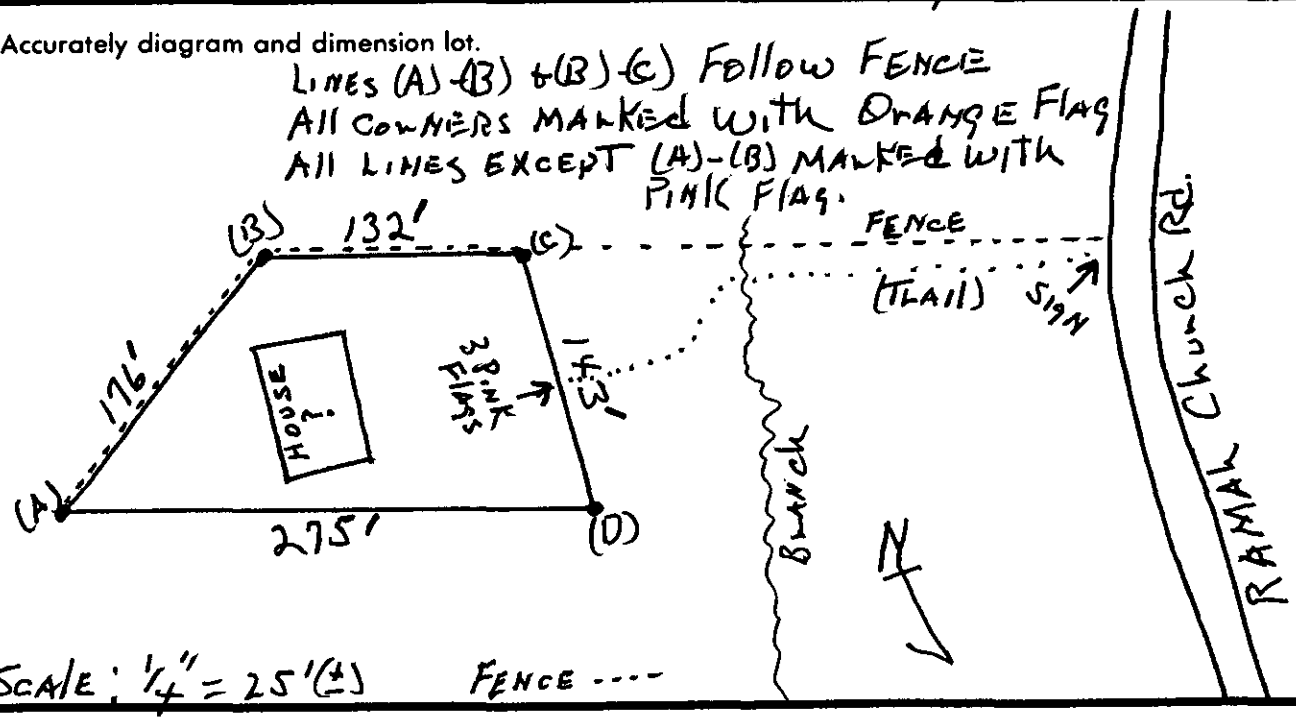
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LINES (A)-(B) & (B)-(C) FOLLOW FENCE
ALL CORNERS MARKED WITH ORANGE FLAG
ALL LINES EXCEPT (A)-(B) MARKED WITH PINK FLAG.



SCALE: 1/4" = 25'(±) FENCE ----

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MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 8/14/90

Name/Company: Carl Sims

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Soil
Lake
6974A

COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
AUG 14 1990

Fee: $ 50.00 Rec# 3217

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