

10001 JANEIRO DR

01521305

7/13/2007

duponbj

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 7862A DATE: 8/10/94

TC: 015 213 05 ☐ L ☐ CRT

SERIAL № 14275

Name of Owner Harvey Barnett Juris.:

Address of Property 10000 Al Janeiro Dr

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400'

Number of Lines 4 @ 100'

Cover Depth 6" soil brought in

Water Supply Source well

Distance to Water Source ≥50 not installed

Excavation Inspected 8/10/94

Tank(s) Inspected 8/10/94

Wash Line Inspected —

High Water Alarm Inspected —

PLOT

Design: 1994 1500ST, MOD, 1200 SFT, 12 'stone Cecil CTR# Ch. Morrison
Shallow placed conventional

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: Septic system designed for 3 bedroom residence
shallow placed conventional. 6" cover minimum Type II

A. Newell for A. Daniel Phil S. Walker R.S.
Environmentalist

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

413

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR ~~PERMIT~~ Approval

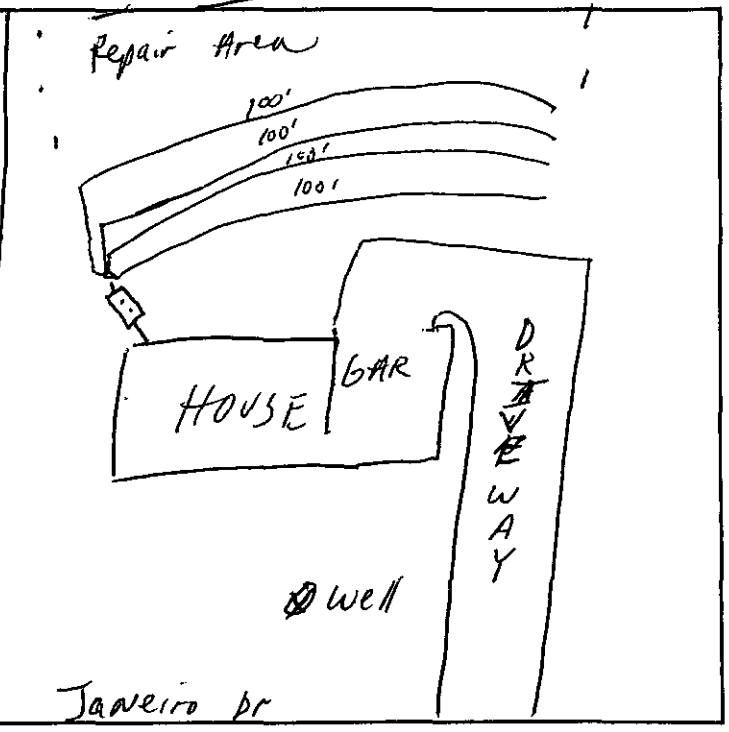
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 7862A DATE: 8/3/94

TC: 015 213 05 ☐ L

SERIAL Nº 15800

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 3/21/94. All work shall be completed on or before 9/3/94, 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 PCC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 400' feet

Number of Lines 4 (100')

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well ≥ 50 feet

NAME OF OWNER Harvey Barnett

LOCATION OF PROPERTY 10001 Janeiro Dr

Comments: Shallow placed conventional | 1500 ST 4 lines x 100' long x 3' wd x 12" stone | Keep drainfield shallow, trench bottom 12" from grade. Bring in 6" cover | Keep proposed well ≥ 50' from ~~any wells~~ septic system

Jane H Sewell, R.S.
Division or Section Head

Philo S. Walker R.S.
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

7862A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

2400 2 lk 749 3/15/94 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: Barnett (last) Harvey (first) W M N (mi)
ADDRESS: 5110 Casino PHONE: (704) 598-0483
CITY: Charlotte STATE: NC ZIPCODE: 28216

Date: 3-15-94

PROPERTY OWNER:
NAME: Barnett (last) Harvey (first) (mi)
ADDRESS: 5110 Casino PHONE: (704) 598-0483
CITY: Charlotte STATE: NC ZIPCODE: 28216

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 015-213-05
STREET ADDRESS: 10001 Janeiro Do
ZONING:

Township (check one):
[X] 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)
[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:
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)
[X] 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: [signature] Date: 3-15-94

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.

...Shallow placed conventional 6" cover to be installed over drainfield

Agreement for to be filed before IP Release

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

Phillip L. Walker 3/29/94
Environmentalist Date

J. Walker for S. Daniel 3/29/94
Director or Authorized Section Head Date

WWATER : 122791

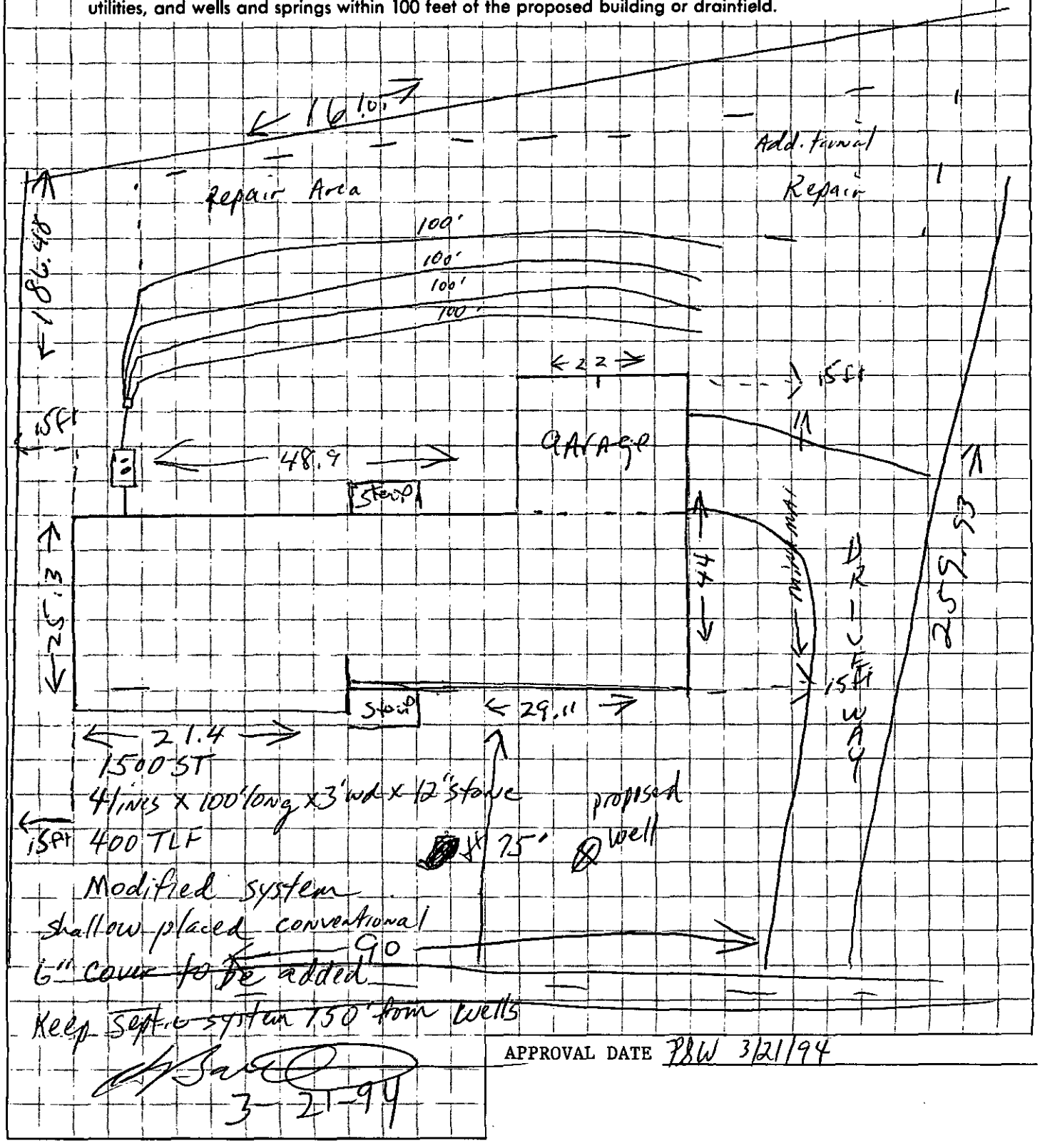
PROPOSED PLOT PLAN

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

FILE: 7862A

TC: 015-213-05

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 PBW 3/21/94

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

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 12370

File: 7862-A Action 2

Parcel: 015-213-05 PC

Location: 10001 JANEIRO DR

Subdivision: BRAZILLA PARK

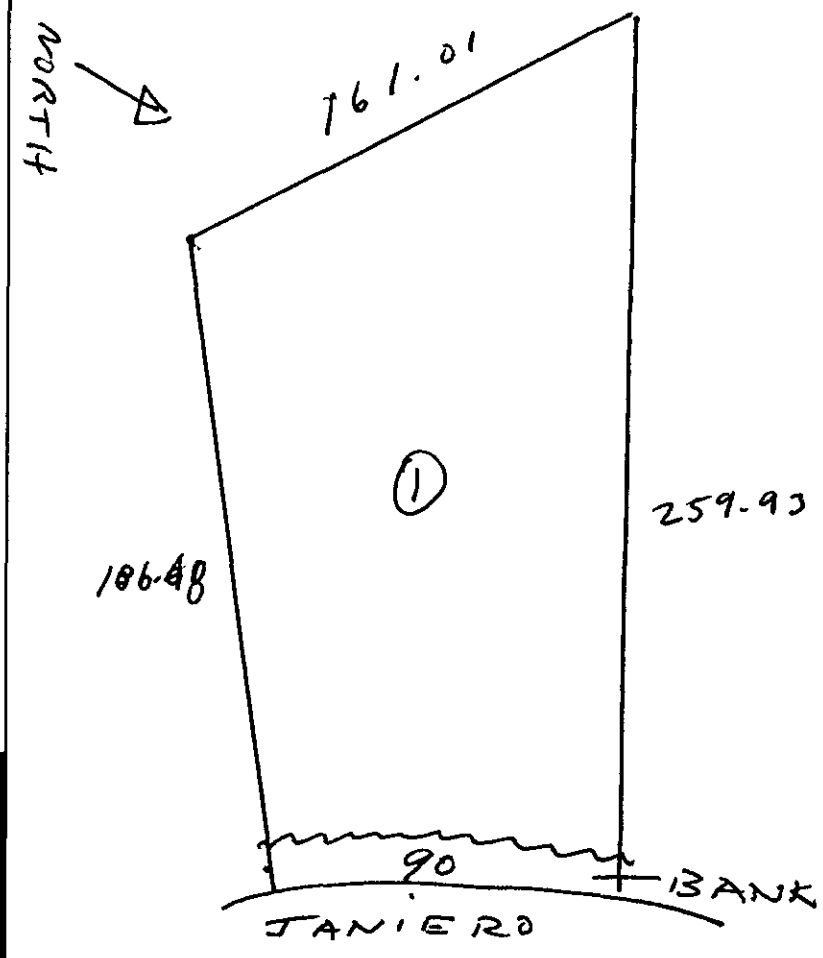
Lot: Block: Acres: 2.63

Owner: VIVIAN GRANGER
Address: 3156 BLUEBIRD LANE
DECATUR, GA. 30032

Comments: 100% Repair

Described by: Kelly Randall

Date: 11-27-91



***** 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 SLIGHTLY EXPANSIVE CLAY	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S ~~PS~~ U SUBANG BLOCKY	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U 36"	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S PS (U) 24"-28"	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S PS U none	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	PACOLET LIKE					
Area Classification	S PS (U)	S PS U	S PS U	S PS U	S PS U	S PS U

Mecklenburg County
Health Department

November 29th, 1991

Vivian Granger
3156 Bluebird Lane
Decatur, GA 30032

RE: Property located at 10001 Janeiro Drive
FILE: 7862A
PARCEL: 015-213-05

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 12370) 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

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

Enclosure (2)

APPLICATION FOR SOIL INVESTIGATION

Pd. 50.00
CK# 4481
11-14-91
MB

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

(OFFICE USE ONLY)

FILE: 786ZA

TC: _____

☒ PC ☐ REPT

JOB LOCATION

① ADDRESS: 10001 Janeiro Dr. Tax Code 0152130500 1

② SUBDIVISION: Brazilia Park ③ LOT: _____ ④ BLOCK: 213

⑤ PARCEL REFERENCE: BOOK NO.: 15 PAGE NO.: 21 PARCEL NO.: 05001
L12 B E M 15-49

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

OWNER

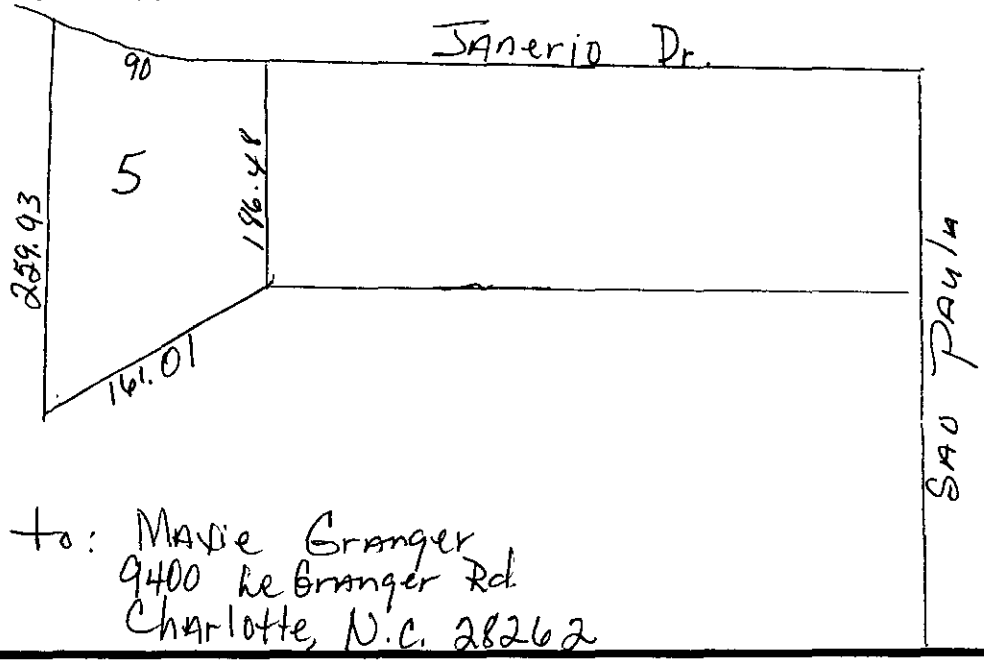
⑦ NAME: Vivian (FIRST) Granger (MIDDLE) (LAST)

⑧ MAILING ADDRESS: 3156 Bluebird Lane

⑨ CITY: Decatur, GA ⑩ STATE: GA ⑪ ZIP: 30032

⑫ PHONE: (WORK) 404-616-3496 (HOME) 404-284-6768

⑬ Accurately diagram and dimension lot.



Please mail to: Marie Granger
9400 Le Granger Rd
Charlotte, N.C. 28262

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: Marie S. Granger, Realtor

Date: 11-11-91

Off. 547-8900 – 547-0665 Res. 521-0281 digital Pager

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

DIGH FRANK B &WF
CECELIA H

209 PINE ISLAND

DR 031 091 08
BOOK PAGE LOT INT SPL
ID NO:
CARD NO. 1 OF 1

MECKLENBURG COUNTY 1993

L4&5B3M12-369 209 PINE ISLAND 0.934CA SRC= 4INS

APPRAISED BY 18 ON 08/13/91 03102 COULWOOD TW-01 C-1 EX- AT-5 LAST ACTION 910415

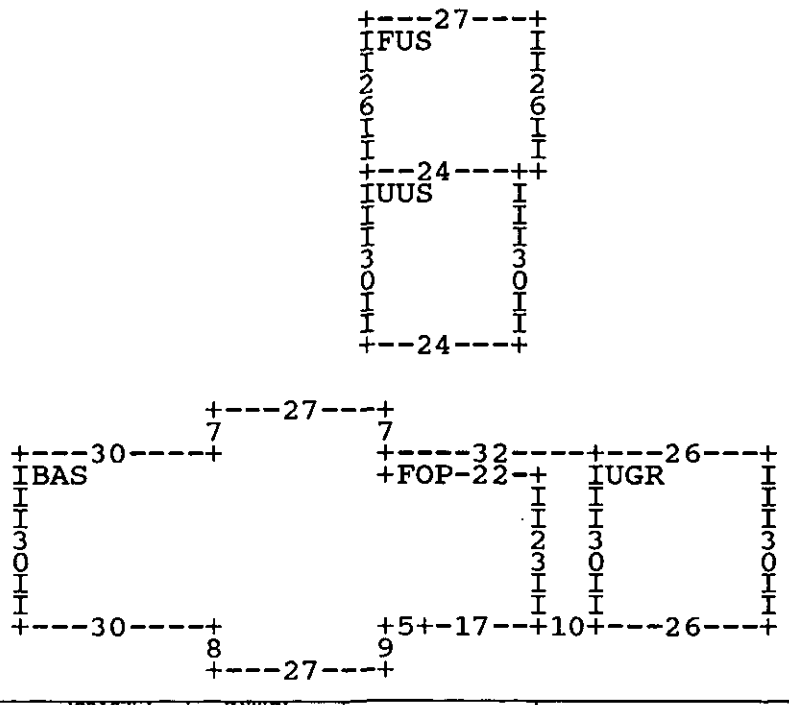
CONSTRUCTION DETAIL

FOUND *	3	CONT FOOTING *	5
SUBFLR*	5	WOOD *	10
EX WL1*	21	FACE BRICK *	34
RF STR*	03	GABLE *	8
RF CVR*	10	WDD SHG/310 L*	6
INT W1*	4	PLYWOOD PANEL*	18
INT W2*	5	DRYWALL *	
FLOOR1*	14	CARPET *	6
FUEL *	04	ELECTRIC *	
HEAT *	10	HEAT PUMP *	5
AC *	03	CENTRAL *	4
BEDRMS*	BAS-0FUS-3LL- 0	*	
BATHS *	BAS-1FUS-3LL- 0	*	15
FCTR:	DESIGN*QUAL*SIZE	*	111
GOOD	1.00 1.10 .95=	*1.05	
TOTAL QUALITY INDEX		*	117

MARKET VALUE

USE	MOD	EFF. AREA	QUAL	BASE RATE	REPL. COST NEW
0100	01	4,040	117	53.24	217,290

SINGLE FAMILY RESIDENTIAL - SFR CONSTRUCTION
SCALE 1/354 STORIES 03 2.0 STORIES



DEPRECIATION

EYB	AYB	NORM	ECO	FUN	PCT. COND
1986	1986	0	0	0	91

CORRELATION OF VALUE

CREDENCE TO	MARKET
DEPRECIATED BUILDING VALUE	197,730
TOTAL DEPR. OB/XF VALUE	11,840
TOTAL LAND VALUE - MARKET	34,000
TOTAL MARKET VALUE - CARD	243,570
TOTAL APPRAISED VALUE - CARD	243,570
TOTAL APPRAISED VALUE - PARCEL	243,570

PRIOR PERMIT INFO
34,000
209,570
243,570

TYP	GS	AREA	PCT	RPL CS
BAS		2,616	100	139,276
FOP		454	035	8,465
UGR		780	035	14,535
FUS		702	090	33,648
UUS		720	050	19,166

FIREPL 3 1 STY SINGL $2200
5,272 217,290

SALES DATA

OFF. RECORD BOOK	OFF. RECORD PAGE	DATE MO	DATE YR	TYPE FIN.	V U	V I	INDICATED SALES PRICE
4238	0380	09	79		X	I	

NOTES
FR 8/13/91 CH

CODE	DESCRIPTION	LTH	WTH	UNITS	UNIT PRICE	ORIG BLD COND	L/B	AYB	EYB	ANN DEPR	OVR	PCT. COND.	OB/XF DEPR. VALUE
07	POOL/CON	20	40	800.00	18.50	100	L	1987	1987	05		080	11,840
TOTAL OB/XF VALUE													11,840

HTD AREA 3318

BUILDING DIMENSIONS
BAS=W22N14W27S7W30S30E30S8E27N9E5S1E17FOP=E10 UGR=E26N30W26S30$N30W32S7E22S23$N23$PTR=N80FU S=W27S26UUS=S30E24N30W24$E27N26$S80$.

HIGHEST AND BEST USE	USE CODE	LOCAL ZONING	FRONTAGE	DEPTH	DEPTH /SIZE	LND MOD	COND FACT	OTHER ADJUST AND NOTES	LAND UNIT PRICE	TOTAL LAND UNITS	UNIT TYP	TOTAL ADJST	ADJUSTED UNIT PRICE	LAND VALUE	LAND NOTES
SFR	0100	R3	220	185	1.00	00	085	P GSZ	20,000.00	2.00	LT	85	17,000.00	34,000	0220X0185
TOTAL LAND DATA														34000	

TUE, DEC 7, 1993, 3:12 PM