

4019 MT HOLLY-HUNTERSVILLE RD

02326106

12/26/2007

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: 1538-B DATE: 1-26-99

TC: 023-111-03 ☒ L ☒ CRT

SERIAL Nº 17933

Name of Owner DAVID METENEY Juris.:

Address of Property 4019 MT HOLLY - HUNTERSVILLE RD

Inspection Data:

Tank Material PLC.

Total Length of Drainfield 300

Number of Lines 5 @

Cover Depth 18"

Water Supply Source CMUD

Distance to Water Source keep 10' from H2O line

Excavation Inspected 1-26-99

Tank(s) Inspected 1-26-99

Wash Line Inspected ✓

High Water Alarm Inspected 1-26-99

PLOT

Design 1999 1500 ST 1000 DT P1 INV. CTR# GARY BARNEY

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: TYPE III

Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

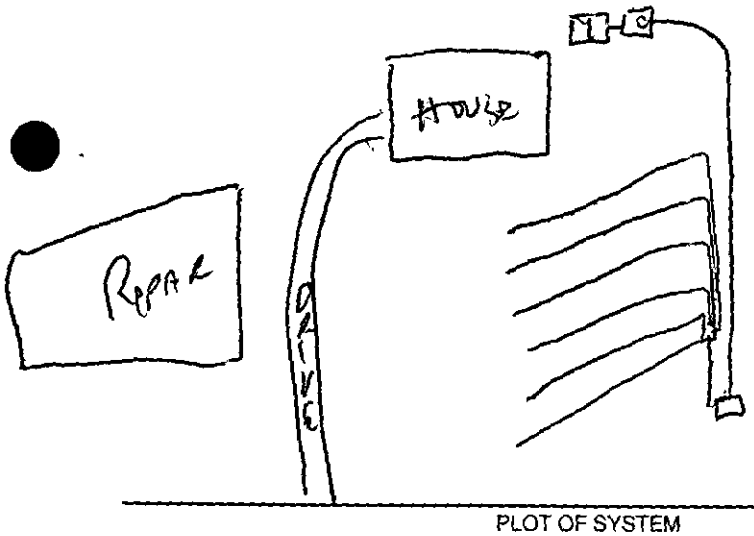
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 1538-B DATE: 1-15-99

TC: 023-111-03 ☐ L

SERIAL Nº 17992

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 2-2-99. All work shall be completed on or before 2-15-99, 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 24"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous yes

Total Line Length 300 feet

Number of Lines 5 x 60

Depth of Stone — inches

Distance from House 15+ feet

Distance from Property Line 10+ feet

Distance from Well Municipal feet

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

NAME OF OWNER DAVID METENEY

LOCATION OF PROPERTY 4019 Mt Holly - Huntersville Rd

Comments: Install innovative system as per improvement permit

Kelly Randell
Environmental Health Specialist

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

CK 1458 4017

FEE: 100.00 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: 2/2/97 **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE** X

DATE: 9/24/96 PERMIT NO: 1538B
PARCEL NO: 023-111-03
JOB LOCATION ADDRESS: 4019 Mt. Holly-Huntersville Road
PROPERTY OWNER: David C. Meterbey
BUILDING CONTRACTOR: Same
SUBDIVISION NAME: NA
AUTHORIZATION ISSUED BY: Joan B. Mialik, RS DATE: 9/24/96
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. 1538B, AND THE ATTACHED SITE PLAN WITH SYSTEM DETAILS. CONSTRUCTION AND INSTALLATION MUST ALSO MEET ALL REQUIREMENTS SET FORTH IN THE RULES GOVERNING SANITARY SEWAGE COLLECTION, TREATMENT, AND DISPOSAL AND ANY OTHER APPLICABLE RULES AND LAWS.

2. AN INSTALLATION, CONSTRUCTION, ALTERATION AND/OR REPAIR APPROVAL MUST BE SECURED PRIOR TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A REGISTERED SEPTIC TANK CONTRACTOR WITH MECKLENBURG COUNTY HEALTH DEPARTMENT.

3. ANY ALTERATION IN SITE OR SOIL CONDITIONS (INCLUDING LOCATION OF STRUCTURES AND APPURTENANCES) OR MODIFICATION IN USE, DESIGN WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS AS SPECIFIED IN THE ASSOCIATED IMPROVEMENT PERMIT AND APPLICATION, MAY SUBJECT THIS AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. OTHER CONDITIONS: See conditions of improvement permit & associated plot plan.

OWNER CERTIFICATION

I CERTIFY THAT THERE HAVE BEEN NO ALTERATIONS IN SITE OR SOIL CONDITIONS OR MODIFICATIONS TO FACILITY, WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS FROM THOSE SPECIFIED IN THE ORIGINAL APPLICATION OR ASSOCIATED IMPROVEMENT PERMIT UNLESS AUTHORIZED IN WRITING BY THE MECKLENBURG COUNTY HEALTH DEPARTMENT. I ALSO UNDERSTAND THAT ANY SUCH ALTERATIONS, MODIFICATIONS, OR FALSE INFORMATION ARE GROUNDS FOR REVOCATION OF PERMITS AND AUTHORIZATION TO CONSTRUCT.

X David C. Meterbey 2/2/97
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

Permit Number: 1538B

CONDITIONS OF IMPROVEMENT PERMIT

Tax Number: 093-111-03

4019 Mt Holly-Huntersville Road

- The IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be NO grading, filling or disturbance of the soil in the area of the septic tank system or repair area.
- CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a Building Permit. The Construction Authorization is NOT transferable. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.
- Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

Basement	___ Yes	✓ No	___ Partial Basement	
Type Primary Wastewater System Type (circle one): I II (III) IV V VI	___ Conventional ___ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	✓ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1	25% reduction system
3 Long-term acceptance rate	360 Max gallons/day wastewater flow	900 Absorption Area (sq ft)	9' Trench spacing (min. on centers)	
No Municipal Serviced by private well	1500 Gallon septic tank	300 6@50 each Total trench length (ft)	~22" Downslope side Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions) trench	
3 Bedrooms in residence	1000 Gallon pump tank	NA Depth of stone Group I, II, or III backfill to manufacturer's specifications		
Any surface waters present: No Type:		Minimum separation distance		
Site modifications required:				
Additional Conditions: - Keep installation 15' minimum from house foundation drain. - Keep waterline 10' minimum from any portion of the sewage disposal system & its designated repair area.				
Repair Area System Type Type (circle one): I II III (IV) V VI	___ Conventional ✓ Prefabricated, permeable block panel system ___ Shallow Placed Conventional	___ Low Pressure Pipe ___ Large Diameter Pipe ___ Fill ___ Other	___ Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1	
400 Absorption Area (Sq ft) 200 Total Trench Length (Ft)	NA Depth of Stone Trench See manufacturers specifications	8 Trench spacing (min. on centers)	38" Maximum Trench Depth	
For existing system, enter the year originally installed: NA				

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 Sewage, 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
- Improvement Permit Valid 5 years from date of issuance.
- This Improvement permit is transferable.

Lisa B. Mialik RS 9/24/96
DEHNR Authorized Agent Date

Owner/Agent Signature 2/27/97
Date

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

NORTH CAROLINA DEPARTMENT OF
ENVIRONMENTAL, HEALTH,
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

IWWS-100195

573-2805

PROPOSED PLOT PLAN

ALTH DEPARTMENT
/IRONMENTAL HEALTH DIVISION
NORTH TRYON STREET
...ARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 1538B

TC: 023-111-03

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.

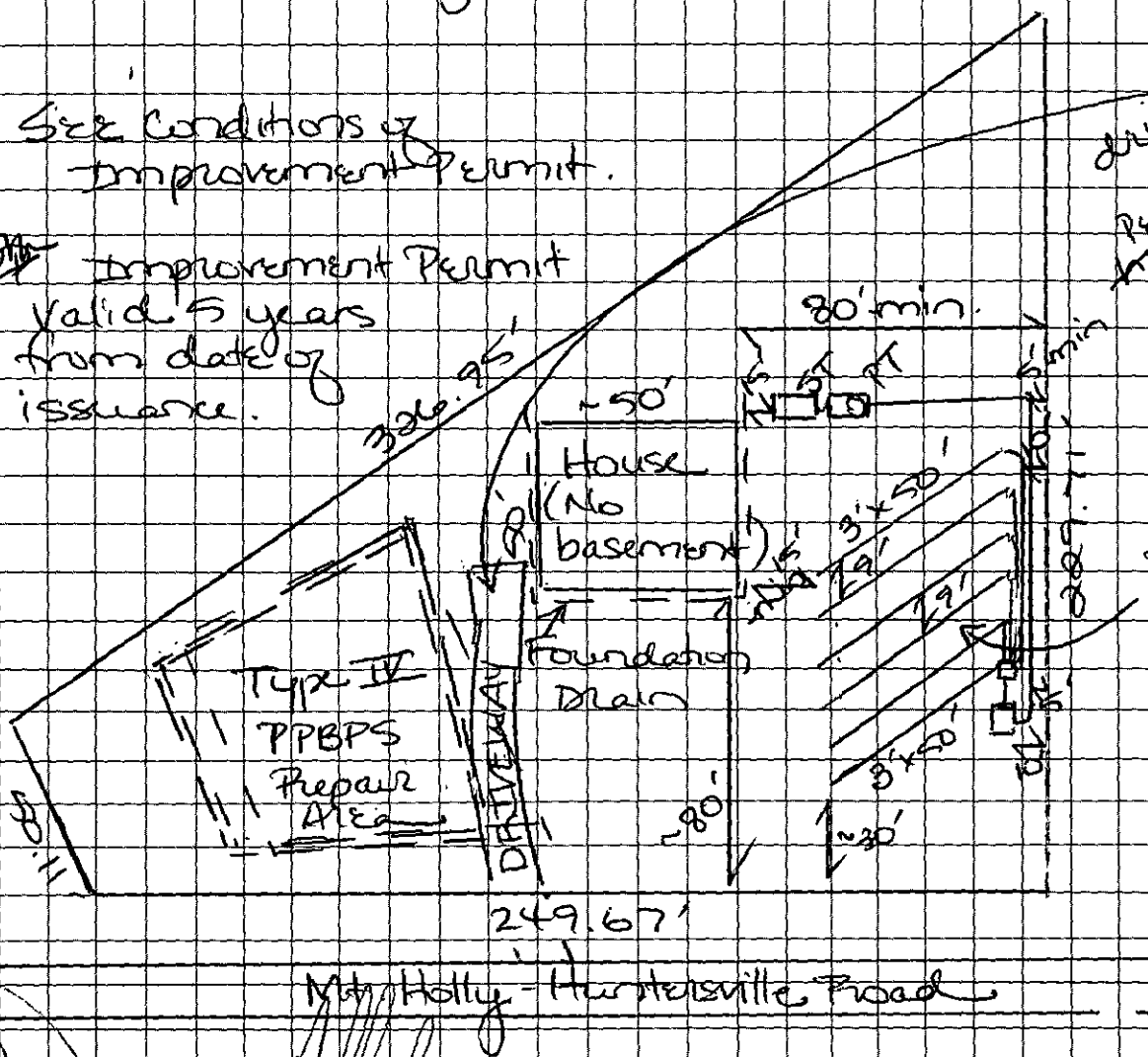
Installation for 3 bedroom house (No basement) to be located at 4019 Mt. Holly-Huntersville Road

See conditions of Improvement Permit.

Improvement Permit Valid 5 years from date of issuance.

Proposed location driveway 2/24/97 per Larry Thompson. Per driveway location discussed & depicted 2/20 on site. Pond will remain.

35% reduction system.



APPROVAL DATE 9/24/96 Joda B. Malik, RS

OWNER/AGENT SIGNATURE

DATE 2-20-97

pg 182

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

BK: 08939 PG: 0399/0402 #:0147 15.40
JUDITH A GIBSON REG OF DEEDS MECK NC
FILED FOR REGISTRATION 02/21/97 12:02

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

WASTEWATER TREATMENT AND DISPOSAL SYSTEM DESIGN AGREEMENT: 15A NCAC 18A .1948 AND ANY OF THE FOLLOWING RULES: .1956; .1957(a); .1957(b); or .1957(c); OR .1969

FILE COPY

FILE # 1538 B
PARCEL # 023-111-03

The undersigned, MARYANN METENEY, owner of property located at 4019 Mt. Holly - Huntersville Rd., (the "site") and described in an instrument recorded in Book _____ at Page _____, Mecklenburg Public Registry, hereby acknowledges that the undersigned applied to the Mecklenburg County Health Department (the "Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 15A NCAC 18A .1900 et seq.; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data, and other information which indicate to the Department that the septic tank system proposed by the undersigned is allowed by the rules; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is the responsibility of the designer, owner, developer, installer, or user of the system, as applicable, and that neither the Department nor its officials, employees, or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further acknowledges that the following conditions will apply to the site:

- Any changes on the property may make the Improvement Permit Null and void and may make the Improvement Permit subject to revocation.

This instrument was prepared by: DAVID METENEY
Mail after recording to: 6500 CARSDALE PLACE Charlotte NC 28210

- Do not grade, cut, fill, pave, construct a building or deck, dig a well, install a swimming pool or otherwise cover or disturb the soil (except for planting and maintaining grass or other ground covers) in a manner which will adversely affect the repair area or area where the septic tank system is located.

- When a private certified operator is required, no improvement permit for the designated repair shall be issued unless there is a private certified operator to carry out this management program in the service area where the proposed system is to be located. (Refer to Rule .1961, "Maintenance of Sewage Systems," for further information.)

- Additional fees will be required according to the Mecklenburg County user fee schedule applicable at the time for the issuance of a repair permit for any subsequent repairs to the sewage treatment and disposal system or for installation of a replacement system.

- At the time repairs to the sewage treatment and disposal system are to be made or a replacement system installed, the regulations in effect at that time will govern the repairs or installation of a replacement system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees, and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, this _____ day of _____, 199__.

DAVID METENEY (SEAL)
(Corporate Name)

(SEAL)

By: P.O.A. for MARY ANN METENEY (SEAL)

President

DAVID METENEY (SEAL)

ATTEST:

Secretary

(Corporate Seal)

STATE OF NORTH CAROLINA
COUNTY OF Mecklenburg

I, Jane E. Anglin, a Notary Public for said County and State, do hereby certify that David Carl Meteney personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 21st day of February, 1997.

Notary Public

My Commission Expires:
My Commission Expires July 21, 2001

North Carolina

Mecklenburg County

I, Rachelle G. Sidway, a Notary Public for said County and State, do hereby certify that David Meteney, Attorney in fact for Mary Ann Meteney, personally appeared before me this day, and being by me duly sworn, says that he executed the foregoing and annexed instrument for and in behalf of the said Mary Ann Meteney, and that his authority to execute and acknowledge said instrument is contained in an instrument duly executed, acknowledged, and recorded in the office of Register of Deeds in the County of Mecklenburg State of North Carolina, on the 13th day of November, 1996, and that this instrument was executed under and by virtue of the authority given by said instrument granting him power of attorney.

I do hereby further certify that the said David Meteney acknowledged the due execution of the foregoing and annexed instrument for the purposes therein expressed for and in behalf of the said MARY ANN METENEY

Witness my hand and official seal, this the 21st day of February, 1997.

(Official Seal)

Rachelle G. Sidway
Notary Public

My commission expires May 21, 1997.

RACHELLE G. SIDWAY NOTARY PUBLIC MECKLENBURG COUNTY, NC

PARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
VISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet
PROPERTY ID #: #1538B
COUNTY: ~~023-111-45~~ 023-111-03

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: David C. McInerney APPLICANT:
ADDRESS: 6500 Carnlake Place Mar APPLICATION DATE: DATE EVALUATED:
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949): 360 gpd/ PROPERTY SIZE:
LOCATION OF SITE: 404 Mt. Holly - Huntersville Rd PROPERTY RECORDED:
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LS 2%	0-4"	gr/cl	Fr/SE/SP/SMP	38" TO Chroma 2 Colors	36"	N/A	None	PS IV .39/F2
		4-36"	SBK/c	Fr-Fi/SE-NP/SM					
2	LS 10%	0-6"	gr/cl	Fr/SE/SP/SMP	50" TO Chroma 2 Colors	50"	N/A	None	PS IV .39/F2
		6-50"	SBK/c	Fr-Fi/SE/NP/SM					
3	LS 10%	0-4"	gr/cl	Fr/SE/SP/SMP	38" TO Chroma 2 Colors	38"	N/A	None	PS IV .39/F2
		4-38"	SBK/c	Fr-Fi/SE/NP/SM					
4	LS ~~15~~ 10%	0-12"	gr/sl	Fr/SE/SP/SM/SP	46" TO Chro	48"	N/A	None	PS IV .39/F2
		12-48"	SBK/c	Fr-Fi/SE/NP/SM					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS Limited	PS
System Type(s)		

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): Provisionally Suitable
EVALUATED BY: William A. Mace
OTHER(S) PRESENT:

MENTS: appears to need little repair
drive could probably not be traveled

LEGEND

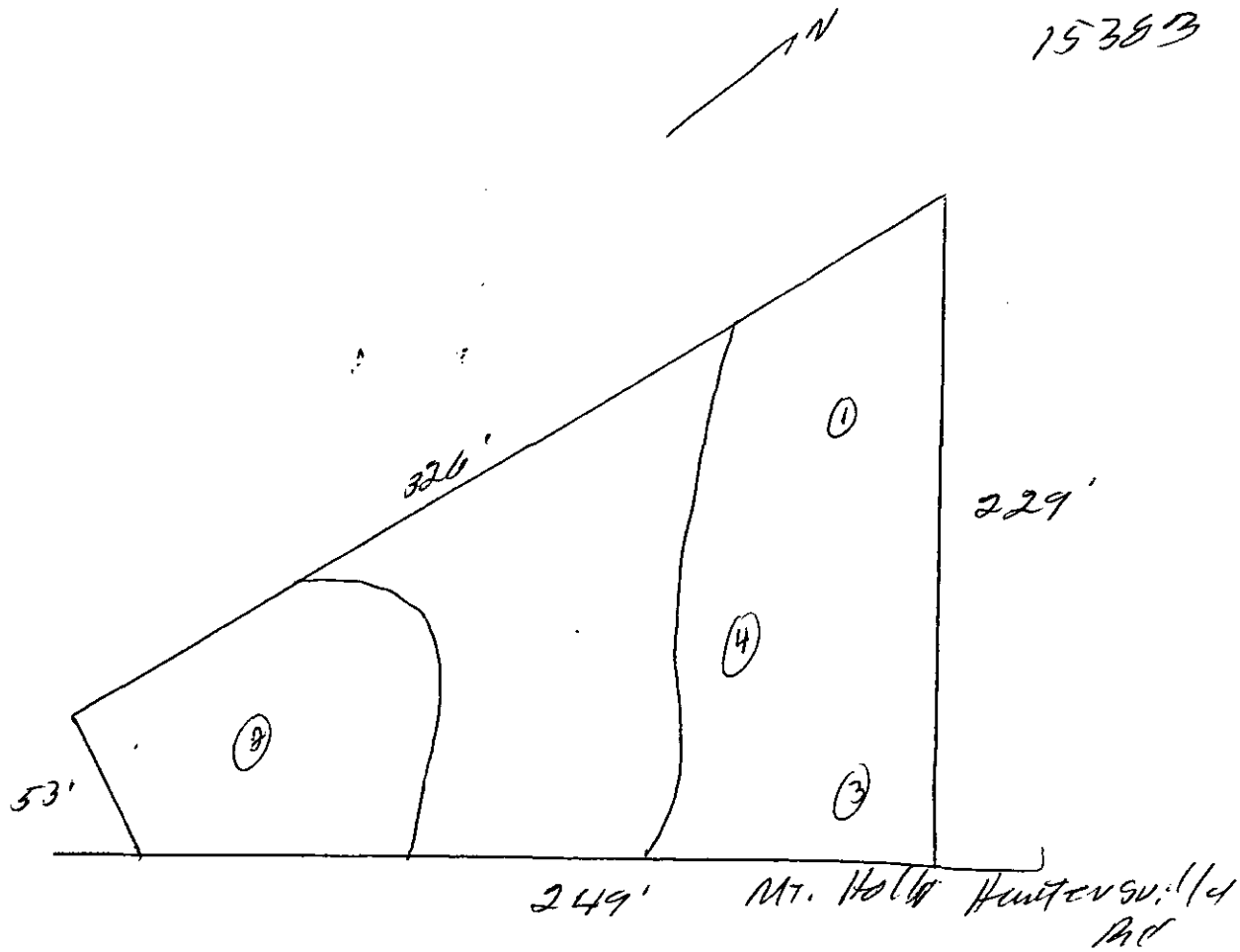
use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL 1955 LTAR	LPP 1957 LTAR	MINERALOGY/ CONSISTENCE	STRUCTURE
C (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive)	G (Single Grain)
V (Convex Slope)		LS (Loamy Sand)			SEXP (Slightly Expansive)	M (Massive)
(Drainage Way)					EXP (Expansive)	CR (Crumb)
S (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
P (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
S (Foot Slope)						ABK (Angular Blocky)
(Head Slope)	III	SI (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
(Linear Slope)		SICL (Silty Clay Loam)				PR (Prismatic)
(Nose Slope)		CL (Clay Loam)			MOIST	WET
(Ridge)		SCL (Sandy Clay Loam)				
(Shoulder Slope)		SUC (Silt Loam Clay)			VFR (Very Friable)	NS (Non-sticky)
(Terrace)					FR (Friable)	SS (Slightly Sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FI (Firm)	S (Sticky)
		SIC (Silty Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
					EFI (Extremely Firm)	NP (Non-plastic)
		O (Organic)	None			SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

OTES	
ORIZON DEPTH	In inches below natural soil surface
PTH OF FILL	In inches from land surface
STRICTIVE HORIZON	Thickness and depth from land surface
APROLITE	S(suitable) or U(unsuitable)
IL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
LASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

valuation of saprolite shall be by pits.
ong-term Acceptance Rate (LTAR): gal/day/ft²

Show profile locations and other site features (dimensions, reference or benchmark, and North).



FEE: 100.00
DATE: 8/14/96
Ck #5114

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

[ ] CRT

TYPE APPLICATION: ___ NEW SYSTEM ___ 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 #: 1538B

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 023-111-45

STREET ADDRESS: 4019 N Holly- Huntersville

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: 3

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):

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

HEATED SQUARE FOOTAGE: 2000

NUMBER OF BEDROOMS: 3

NUMBER OF OCCUPANTS: 2

CLOSING DATE_____

FOUNDATION FOR RESIDENCE:

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

IF EXPANSION/ALTERATION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED BUILDING ADDITION:

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	___ YES X NO	WELL, SPRINGS OR WATERLINES	___ YES X NO
EXISTING WASTEWATER SYSTEMS	___ YES X NO	DESIGNATED WETLANDS	___ YES X NO
EASTMENTS OR RIGHT-OF-WAYS	X YES ___ NO		

PROPERTY OWNER:

NAME: METENEY (LAST) DAVID (FIRST) C. (MI)

ADDRESS: 6500 CARSDALE PLACE

CITY: CHARLOTTE STATE: NC ZIP: 28210

DAYTIME PHONE: (704) 552-9918

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) (FIRST) (MI)

DAYTIME PHONE: ( ) -

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 C. Meteney DATE: 8/14/96

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

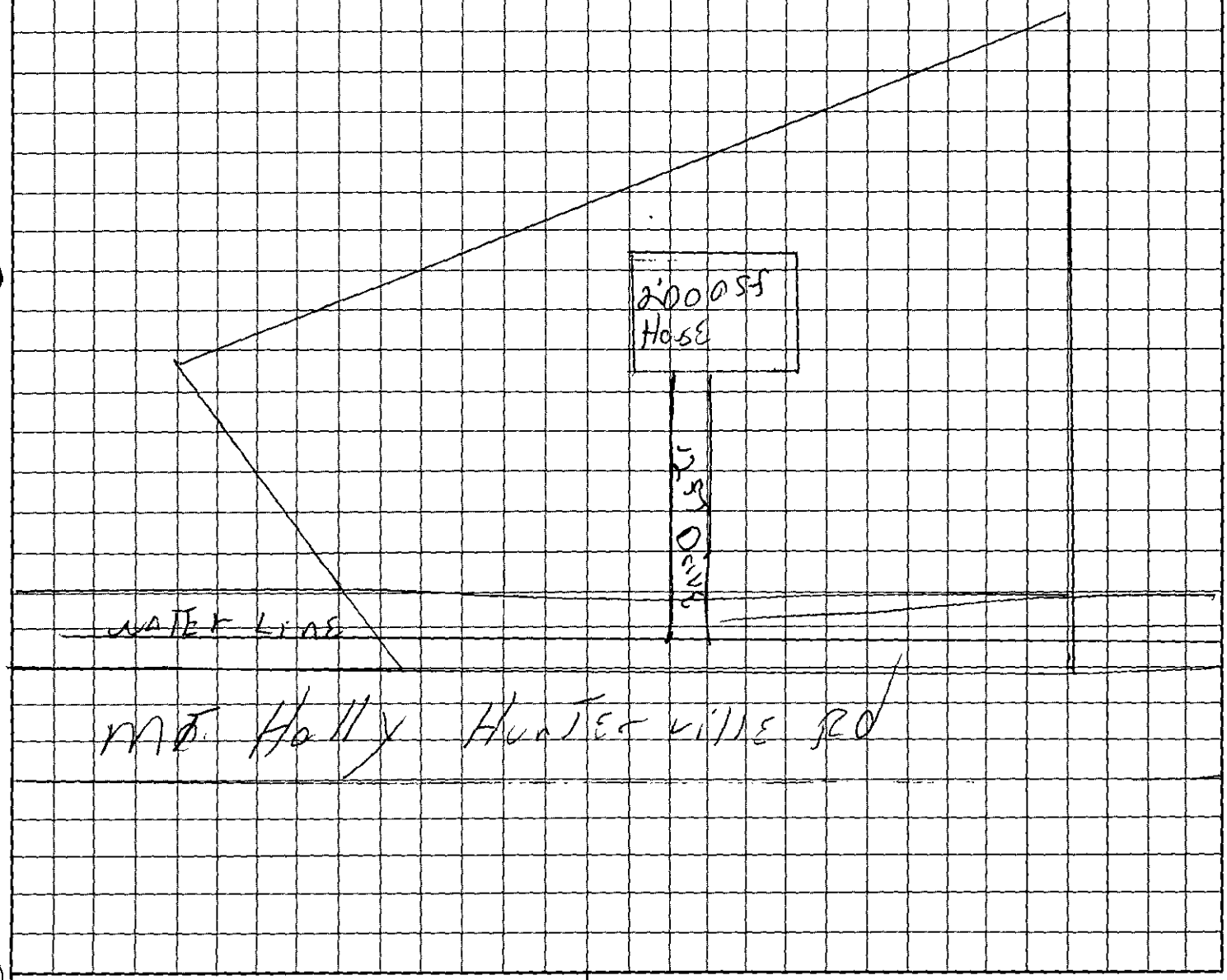
PROPOSED PLOT PLAN

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

FILE: 1938B

TC: 023-111-45

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 _____

OWNER/AGENT SIGNATURE

DATE

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

1538B

THIS IS TO CERTIFY THAT ON THE 16 DAY OF July 19 96 AN ACTUAL SURVEY WAS DONE UNDER MY SUPERVISION OF THE PROPERTY SHOW HEREON. THIS MAP IS NOT INTENDED TO MEET GS 47-30 RECORDING REQUIREMENTS.

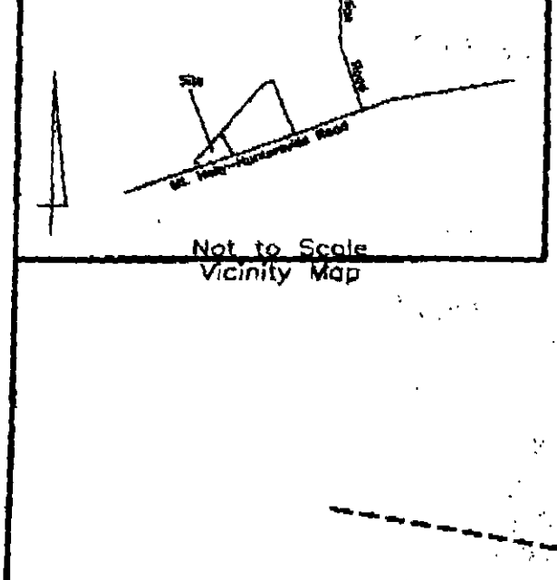
SIGNED Martin L. Baucom

BAUCOM-CLARK & ASSOCIATES, REGISTERED SURVEYORS
5103-12 NORTH I-85 SERVICE ROAD
CHARLOTTE N.C. 28206
PHONE (704) 598-0080

NORTH CAROLINA REGISTERED SEAL L-2733 LAND SURVEYOR MARTIN L. BAUCOM

LEGEND

E.I.P.	EXISTING IRON PIN
E.C.M.	EXISTING CONCRETE MONUMENT
S.I.P.	SET IRON PIN
———	PROPERTY LINE
— —	ADJOINER PROPERTY LINE BY DEED OR PLAT
P.U.E.	PUBLIC DRAINAGE EASEMENT
CLOSURE	EXCEEDS 1'in 10,000'



Not to Scale
Vicinity Map

M.B. PG.

N

S 39° 35' 00" W

1

2

3

45

N 5° 18' 47" E 326.95'

Axle

Power Pole

S 50° 28' 42" E 229.71'

E.C.M.

N 74° 53' 52" W 50.11'

E.I.P.

S 39° 0' 26" W 171.13'

E.I.P.

S 39° 35' 00" W 249.67'

18" Iron Pipe Found

E.I.P.

Vacant Lot

Mt. Holly-Huntersville Rd.

-℄ of Road-

80' Public R/W

Physical SURVEY
OF
Lot 3,
Charlotte, Mecklenburg County, N.C.

SCALE 1"=60'

THE PROPERTY OF John Watkins

MAP RECORDED IN BOOK _____ AT PAGE _____ DEED RECORDED IN BOOK 7462 PAGE 0059

Drawn By: DEREK

12436

1538B

TAX PARCEL INFORMATION

PARCEL # 023-111-03 001 ADDRESS 4019 MT HOLLY-HUNTERSVILL RD
OWNERS NAME WATKINS JOHN ROBERT &WF PATRICIA
MAILING ADDR 8112 HUNTS END COURT CHARLOTTE NC 28214
LEGAL DESC N/A

TAX LAND VALUE	20,000	ACRES 1.000	YEAR BUILT 0000
TAX BLDG VALUE	0	HEAT SF 0	ZONING R3
TAX OBLDG VALUE	0	AUX SF 0	PRES USE SINGLE FAMILY R
TAX TOTAL VALUE	20,000	TOT SF 0	FARM HISTORIC

	CURRENT SALE	PREVIOUS SALE	PREVIOUS SALE
SALE DATE	09/93	01/75	/
SALE PRICE	0	0	0
SOURCE	DS		
DEED BOOK/PAGE	7462 0059	2735 0371	

MUNICIPALITY	MECKLENBURG COU	RES BATH	0	A/C	RESTROOMS 0
TOWNSHIP	PAW CREEK	RES HBATH		HEAT	FLOORS
SPECIAL TAX		RES BDRM	0	FUEL	APT UNITS
FIRE DISTRICT	COOKS	FIRE PLACE			

TAX PARCEL INFORMATION

PARCEL # 023-111-03 001 ADDRESS 4019 MT HOLLY-HUNTERSVILL RD

BLDG SF	BLDG SF	STRUCTURAL ELEMENTS
0	0	STYLE
0	0	EXTERIOR WALL
0	0	EXTERIOR WALL
0	0	ROOFING STRUCTURE
0	0	ROOFING COVER
0	0	INTERIOR WALL
0	0	INTERIOR WALL
0	* DENOTES HTAR	FLOORING
		FLOORING

THIS INFORMATION MAY BE SUBJECT TO ERRORS AND SHOULD BE VERIFIED BY THE USER.

OFFER TO PURCHASE AND CONTRACT 1538B

DAVID METENEY as Buyer,
hereby offers to purchase and JOHN WATKINS & WIFE PATRICIA as Seller,
upon acceptance of said offer, agrees to sell and convey, all of that plot, piece or parcel of land described below, together with all improvements located thereon and such personal property as is listed below (the real and personal property are collectively referred to as "the Property"), in accordance with the Standard Provisions on the REVERSE SIDE HEREOF and upon the following terms and conditions:

1. **REAL PROPERTY:** Located in the City of CHARLOTTE, County of MECKLENBURG, State of North Carolina, being known as and more particularly described as:
Street Address 4019 MT. HOLLY-HUNTERSVILLE RD Zip 28214
Legal Description TAX # 023-111-03.001

2. **PERSONAL PROPERTY:** NONE

3. **PURCHASE PRICE:** The purchase price is $ 18,500.00 and shall be paid as follows:
(a) $ 500.00 in earnest money paid by PERSONAL CHECK (cash, bank, certified or personal check) with the delivery of this contract, to be held in escrow by _____ as agent, until the sale is closed, at which time it will be credited to Buyer, or until this contract is otherwise terminated and it is disbursed in accordance with the Standard Provisions on the REVERSE SIDE HEREOF;
(b) $ N/A by assumption of the unpaid principal balance and all obligations of Seller on the existing loan secured by a deed of trust on the Property;
(c) $ N/A by a promissory note secured by a purchase money deed of trust on the Property with interest prior to default at the rate of N/A % per annum payable as follows: N/A
Prepayment restrictions and/or penalties, if any, shall be: N/A
Assumption or transfer rights, if any, shall be: N/A
(d) $ 18,000 the balance of the purchase price in cash at closing.

4. **CONDITIONS:** (State N/A in each blank of paragraph 4(a) and 4(b) if not a condition to this contract.)
(a) The Buyer must be able to obtain a firm commitment on or before 8/15/96, effective through the date of closing, for a 15 year CONVENTIONAL loan in the principal amount of $ [illegible] for a term of [illegible] year(s), at an interest rate not to exceed 8.5 % per annum, with mortgage loan discount points not to exceed [illegible] % of the loan amount. Buyer agrees to use his best efforts to secure such commitment and to advise Seller immediately upon receipt of the lender's decision. If Seller is to pay any loan closing costs, those costs are as follows: NONE
(b) The Buyer must be able to assume the unpaid principal balance of the existing loan described in paragraph 3(b) above for the remainder of the loan term, at an interest rate not to exceed N/A % per annum fixed (or describe type of loan) N/A with mortgage loan assumption and/or discount points not to exceed N/A % of the loan balance. (See Standard Provision No. 2) If such assumption requires the lender's approval, approval must be granted on or before N/A. Buyer agrees to use his best efforts to secure such approval and to advise Seller immediately upon his receipt of the lender's decision. If Seller is to pay any loan assumption costs, those costs are as follows: NONE
(c) There must be no restriction, easement, zoning or other governmental regulation that would prevent the reasonable use of the real property for RESIDENTIAL purposes.

5. **ASSESSMENTS:** Seller warrants that there are no special assessments, either pending or confirmed, for sidewalk, paving, water, sewer or other improvements on or adjoining the Property, except as follows: NONE (Insert "None" or the identification of such assessments, if any. The agreement for payment or proration of any assessments indicated is to be set forth in paragraph 6 below.)

6. **OTHER PROVISIONS AND CONDITIONS:**
(a) All of the Standard Provisions on the REVERSE SIDE HEREOF are understood and shall apply to this instrument, except the following numbered Standard Provisions shall be deleted: (If none are to be deleted, state "None".) 2, 3, 11
SUBJECT TO ACCEPTABLE SOIL TEST FOR SEWAGE DISPOSAL SYSTEM AT VARIOUS LOCATIONS. COMPLETE LOT TO BE TESTED. SOIL TESTING TO BE PAID FOR BY SELLER. - AT SUCCESSFUL CLOSING ONLY.

IF THERE ARE ANY ADDENDA TO THIS CONTRACT, INDICATE ABOVE AND ATTACH HERETO.

7. **CLOSING:** All parties agree to execute any and all documents and papers necessary in connection with closing and transfer of title on or before AUG 28, 1996, at a place designated by BUYER
The deed is to be made to MARY METENEY AT CLOSING

8. **POSSESSION:** Possession shall be delivered AT CLOSING
In the event that Buyer has agreed that possession is not delivered at closing, then Seller agrees to pay to Buyer the sum of $ _____ per day from and including the date of closing to and including the date that possession is to be delivered as above set forth.

9. **COUNTERPARTS:** This offer shall become a binding contract when signed by both Buyer and Seller. It is to be signed in 4 counterparts with a signed counterpart being retained by each party hereto and the escrow agent, if any.

Date of Offer 7/29/96 Date of Acceptance 7/31/96
Buyer _____ (SEAL) SELLER John R Watkins (SEAL)
Buyer _____ (SEAL) SELLER Patricia A Watkins (SEAL)

I hereby acknowledge receipt of the earnest money herein set forth and agree to hold and disburse the same in accordance with the terms hereof.
Date 7/29/96 Firm CENTURY 21 GARY COOPER REALTY
By: _____

Selling Agent/Firm CENTURY 21 GARY COOPER REALTY Acting as ☑ Buyer's Agent ☐ Seller's (sub)agent ☐ Dual Agent
Listing Agent/Firm Harold E. Blackwelder / BESTWAY REALTY, INC. Acting as ☐ Buyer's Agent ☑ Seller's (sub)agent ☐ Dual Agent

REALTOR®

This Standard Form has been approved jointly by the: NORTH CAROLINA BAR ASSOCIATION as Form No. 2
NORTH CAROLINA ASSOCIATION OF REALTORS®, INC. as Standard Form No. 301
Copyright © 1985