

19200 BETTY STOUGH RD

00141228

6/6/2007

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: 5843-A DATE: 11/16/90

TC: 0014128 ☐ L ☑ CRT

SERIAL Nº 13618

Name of Owner Thomas Lubatty Juris.:

Address of Property 19200 Betty Stough Rd.

Inspection Data:

Tank Material PCC

Total Length of Drainfield 535'+

Number of Lines 6 @ 90'

Cover Depth 12"+

Water Supply Source P/well

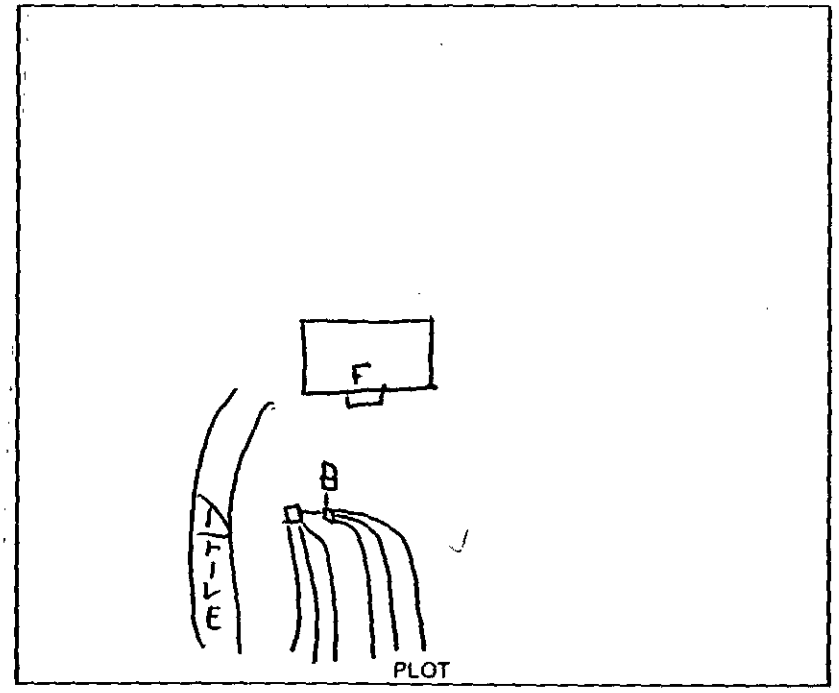
Distance to Water Source >50'

Excavation Inspected Y

Tank(s) Inspected Y

Wash Line Inspected \

High Water Alarm Inspected \



Design: 1,500 ST, CON, 1605 SFT, 12"G, Cecil CTR# 103

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 T.W. ☑ 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: (4) bedrm. (6) 3'x90'x12"G. Additional D-bx added to handle upper 3 lines.

Tim Whittaker, R.S.
Environmentalist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

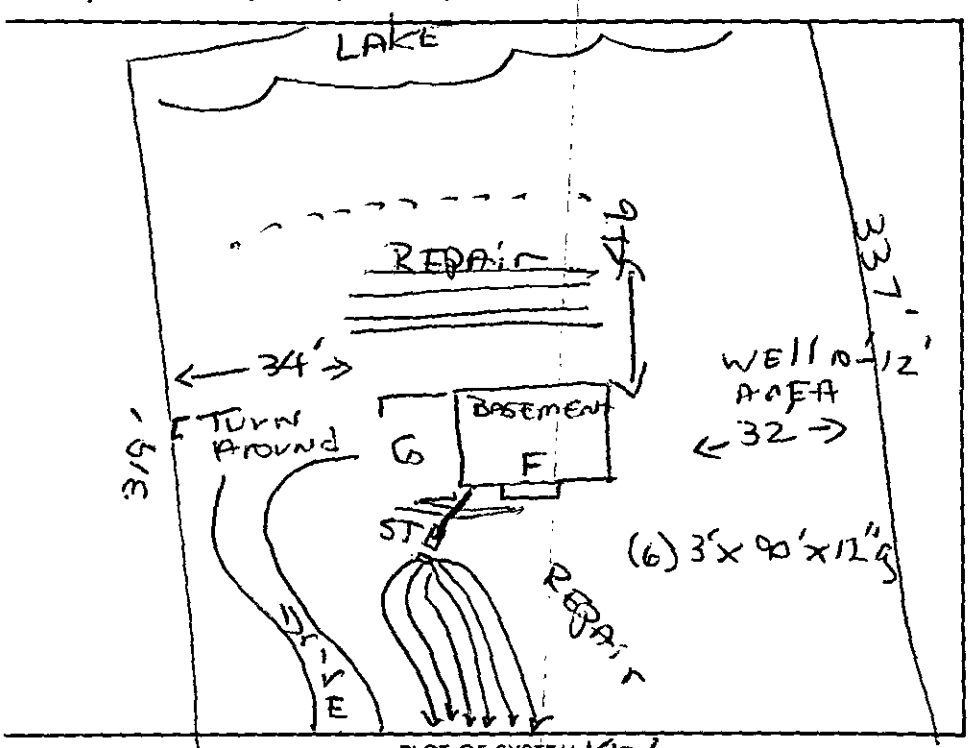
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 5843 A DATE: 10/31/90

TC: 001 412 28 L

SERIAL Nº 14837

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 4/30/90. All work shall be completed on or before 11/30/90, 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 145'

Liquid Capacity of Septic Tank 1,500 gallons

Liquid Capacity of Dosing Tank _____ gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Total Line Length 535' feet

Number of Lines 6

Depth of Stone 12" inches

Distance from House 10 feet

Distance from Property Line 10' feet

Distance from Well >50 feet

NAME OF OWNER Thomas Lubatty

LOCATION OF PROPERTY 19200 Bethy Stough Rd.

Comments: 4 bedrm. Contractor to get gravity flow to tank. (6) 3'x 90'x 12" g.s. SLEEVE WALK AREA ON Stub out from house to tank. TREES to be REMOVED AS NECESSARY to install sys.

Division or Section Head

Tim Whittaker, R.S.
Environmentalist

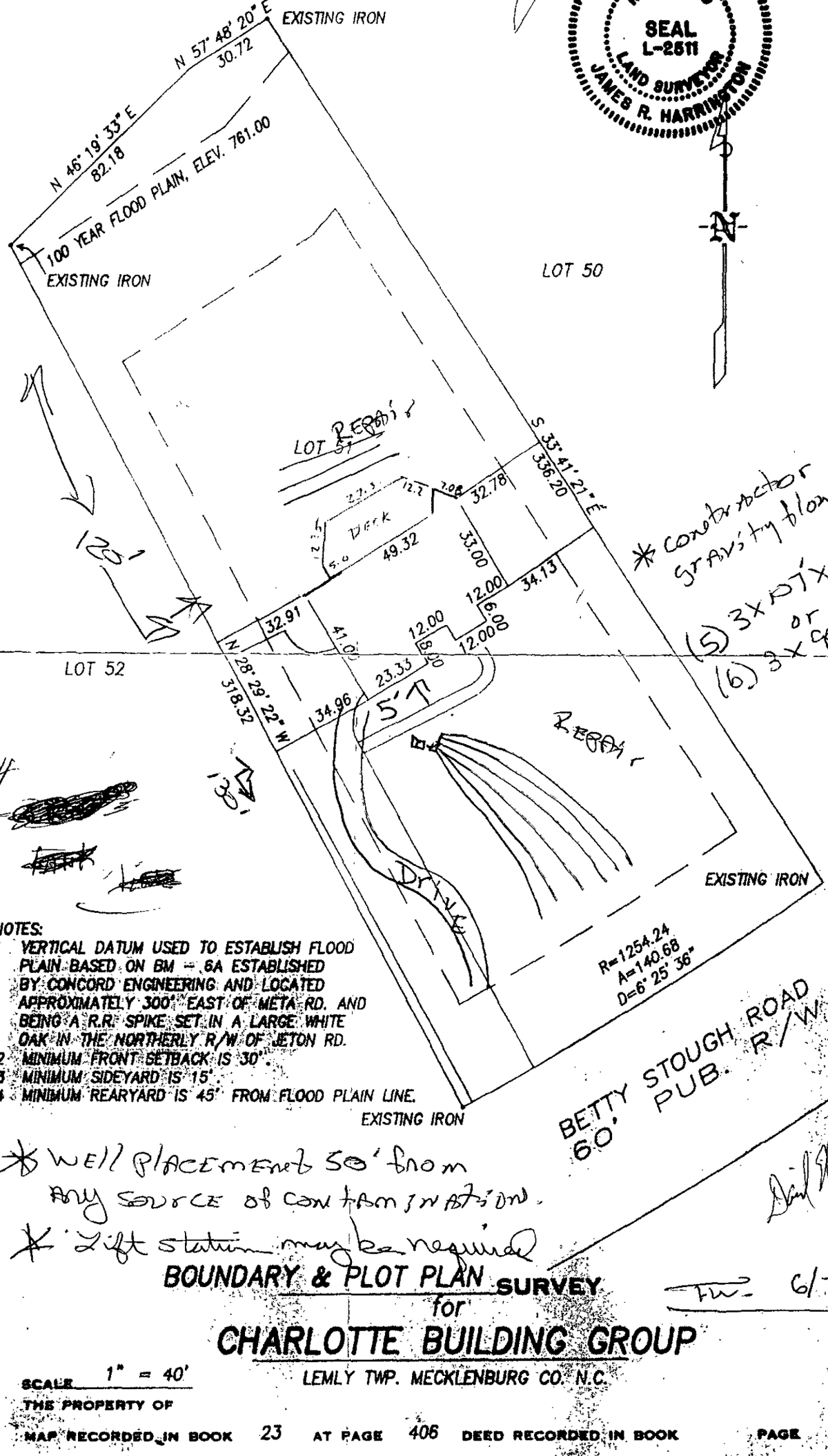
* If this permit is for the installation or construction of a new system, it must be signed by the division or a section head of the Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

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

THIS IS TO CERTIFY THAT ON THE 11th DAY OF MAY 19 90 I, SURVEYED THE PROPERTY SHOWN ON THIS PLAT. AND THAT THE TITLE LINES AND THE WALLS OF THE BUILDINGS IF ANY ARE SHOWN HEREON.

SIGNED _____ REGISTERED LAND SURVEYOR

NORTH CAROLINA REGISTERED SEAL L-2511 LAND SURVEYOR JAMES R. HARRINGTON



* contractor to get stability flow to tank

(5) 3x07'x12'6"
or
(6) 3x09x13'6"

NOTES:
1. VERTICAL DATUM USED TO ESTABLISH FLOOD PLAIN BASED ON BM = 6A ESTABLISHED BY CONCORD ENGINEERING AND LOCATED APPROXIMATELY 300' EAST OF META RD. AND BEING A R.R. SPIKE SET IN A LARGE WHITE OAK IN THE NORTHERLY R/W OF JETON RD.
2. MINIMUM FRONT SETBACK IS 30'.
3. MINIMUM SIDEYARD IS 15'.
4. MINIMUM REARYARD IS 45' FROM FLOOD PLAIN LINE.

* WELL PLACEMENT 50' from ANY SOURCE OF CONTAMINATION.

* Lift station may be required

BOUNDARY & PLOT PLAN SURVEY
for
CHARLOTTE BUILDING GROUP

LEMLY TWP. MECKLENBURG CO. N.C.

6/7/90

SCALE 1" = 40'

THE PROPERTY OF

MAP RECORDED IN BOOK 23 AT PAGE 406 DEED RECORDED IN BOOK PAGE

DATE 4/30/90

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION Meck

#001-412-28
PARCEL NUMBER

19200 Betty Stough Rd
ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

lot 51
EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

N/A
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	

REMARKS: Septic tank + well

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).

7/7/88
ALL OTHER FORMS OBSOLETE

☐ NEW ADDRESS

SIGNED: [signature]

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: ~~5843~~ 5843A
TC: _____
SERIAL: № 20782
☒ L ☐ CRT

JOB LOCATION

① ADDRESS: 19200 (STREET NO.) Betty Stough Rd. (STREET) ② FILE: _____
③ JURISDICTION: _____ ④ TAX PARCEL NO.: # 001-412-28
⑤ SUBDIVISION: Patrick's Purchase ⑥ LOT: 51 ⑦ BLOCK: _____

OWNER

⑧ NAME: Thomas (FIRST) _____ (MIDDLE) Lubatty (LAST)
⑨ MAILING ADDRESS: c/o Donna Kelly, Allen Tate, 10613 Johnston Rd.
⑩ CITY: Charlotte ⑪ STATE: N.C. ⑫ ZIP: 28226
⑬ PHONE: (WORK) 541-6200 (Donna) ⑭ (HOME) 846-8650 (Donna)

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? 4 ㉕ Type? _____
㉓ Maximum occupancy? 8 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

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. Lift station may be required.

Tim Whittaker, R.S., 6/7/90
Environmentalist Date

_____ R.S. 6/8/90
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.

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: Donna Kelly, Allen Tate
Date: 4/30/90

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 4/30/90

Name/Company: Thomas Lubarth

#9 Hamilton Dr.
P.O Box 147
Mogadore, PA.
19452

Sanitation _____

Vector Control _____

O.P.W.D. V

Service: Insp - new
12317

MECKL[illegible]
HEALTH [illegible]RTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

APR 30 1990

CR# 0190

Fee: $ 200.00 $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.

Completed by

Collected by

Tim Wh

~~Hold, please~~

Bill Marlin. 001 – 4-12-28

DAVID VERSAGE
335-7592. DIGITAL PAGE
549-9290 OFFICE

5843A



LAKE NORMAN

BASIS OF BEARI
M.B. 23, PG. 40

N46°24'00"E 82.15'

N57°50'00"E 30.74'

EIP # 5 REBAR

EIP # 5 REBAR

EIP # 5 REBAR

761 CONTOUR BLDG. RESTRICTI
LINE (AS SCALE FROM M.B. 23,
PG. 406)

APPROXIMATE LOCATION
YEAR FLOOD PLAIN LINE
FROM MAP IN NOTE # 4,
FROM AN ACTUAL FIELD
BY CONCORD ENGINEERIN
SURVEYING INC.

NORTH CAROLINA REGISTERED SEAL L-3168 LAND SURVEYOR JOHNNY D. VARNEY 4-2[illegible]-90

SHIRLEY D. EARLEY NOTARY PUBLIC CABARRUS COUNTY, N. C.

LOT 52

SETBACKS
FRONT - 30'
SIDE - 15'
REAR - 45'

N28°29'22"W 389.23'

LOT 51

STOUGH FARMS - DEVELOPMENT CO. 5123 - 663

0.956 ACRES

S35°39'59"E 387.04'

LOT 50

57'4" SETBACK LINE

100' DRIVEWAY

CB= S56°40'32"W
C= 140.55'
A= 140.63'
R= 1254.24

R/W

EIP # 5 REBAR

EIP # 5 REBAR

BETTY STOUGH ROAD
(60' PUBLIC R/W)

R/W

NOTES:

1. AREAS DETERMINED BY COORDINATE COMPUTATIONS.
2. ALL DISTANCES SHOWN ARE HORIZONTAL GROUND DISTANCES.
3. TRAVERSE ADJUSTED BY THE COMPASS RULE ADJUSTMENT METHOD.
4. A PORTION OF THE PROPERTY SHOWN IS LOCATED IN A FLOOD HAZARD AREA AS PER F.I.R.M. COMMUNITY PANEL NO. 370158 0075 A.
5. PROPERTY LINE ALONG LAKE NORMAN IS BASED ON M.B. 23, PG. 406 AND NOT ON CONTOUR ELEVATION 760.
6. THERE MAY BE FLOOD RIGHTS AFFECTING THIS PROPERTY. NO RECORD SEARCH WAS MADE BY CONCORD ENGINEERING & SURVEYING INC.

REFERENCES:

1. DEEDS SHOWN HEREON.
2. MAP TITLED "PATRICK'S PURCHASE PHASE II MAP RECORDED IN M.B. 23, PG. 406

LEGEND

- EIP - EXISTING IRON PIN (AS DESCRIBED)
- R/W - RIGHT OF WAY LINE
- PROPERTY LINE

I, JOHNNY D. VARNEY, CERTIFY THAT THIS MAP WAS DRAWN FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION, THAT THE ERROR OF CLOSURE AS CALCULATED BY LATITUDES AND DEPARTURES IS 1 : 10,000 +; THAT THE BOUNDARIES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION FOUND IN D.B. _____ PG. _____; THAT THIS MAP WAS PREPARED IN ACCORDANCE WITH G.S. 47-30 AS AMENDED; AND THAT THE ANGULAR ERROR WAS .04" PER TURN.

WITNESS MY HAND AND OFFICIAL SEAL THIS 24 th DAY OF APRIL 19 90.

L-3168
LICENSE NO.

Johnny D. Varney
REGISTERED LAND SURVEYOR

NORTH CAROLINA, CABARRUS COUNTY

I, SHIRLEY D. EARLEY, A NOTARY PUBLIC OF THE COUNTY AND STATE AFORESAID, CERTIFY THAT JOHNNY D. VARNEY, A REGISTERED SURVEYOR, PERSONALLY APPEARED BEFORE ME THIS DAY AND ACKNOWLEDGED THE EXECUTION OF THE FOREGOING INSTRUMENT. WITNESS MY HAND AND OFFICIAL STAMP OR SEAL, THIS 24 th DAY OF APRIL, 19 90.

Shirley D. Earley
NOTARY PUBLIC

2-12-95
MY COMMISSION EXPIRES

BOUNDARY SURV

LOT IN LEMLEY TWP. MECKLENBURG CO.
IN THE CITY OF _____ ON BETTY STOUGH RD. LO
NO. 51 IN BLOCK NO. _____ ON MAP OF PATRICK'S PURCHASE
MAP RECORDED IN BOOK 23 PG. 406; DEED RECORDE
BOOK _____, PG. _____, OFFICE OF THE REGISTER OF DEEDS
MECKLENBURG COUNTY, N.C. (FIELD BOOK NOS. _____
THIS PROPERTY OF _____

SCALE: 1" = 60' FT. DATE: APRIL 23, 1990

CONCORD ENGINEERING & SURVEYING, INC.
ENGINEERS - SURVEYORS - PLANNERS
45 Spring Street S.W. Concord (704) 786-11
Concord, N.C. 28025 • Charlotte (704) 332-9
Fax (704) 786-

Mecklenburg County
Health Department

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

July 13th, 1989

William Kimbrough
19529 Weavers Circle
Huntersville, NC 28078

RE: Property located at 19200 Betty Stough Rd
FILE: 5843A
PARCEL: 00141228

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 16225) 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,

Jim Ericson, 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 ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 16225

File: 5843A Action 1

Parcel: 00141228 ☐ PC

Location: 19200 Betty Stough Rd

Subdivision:

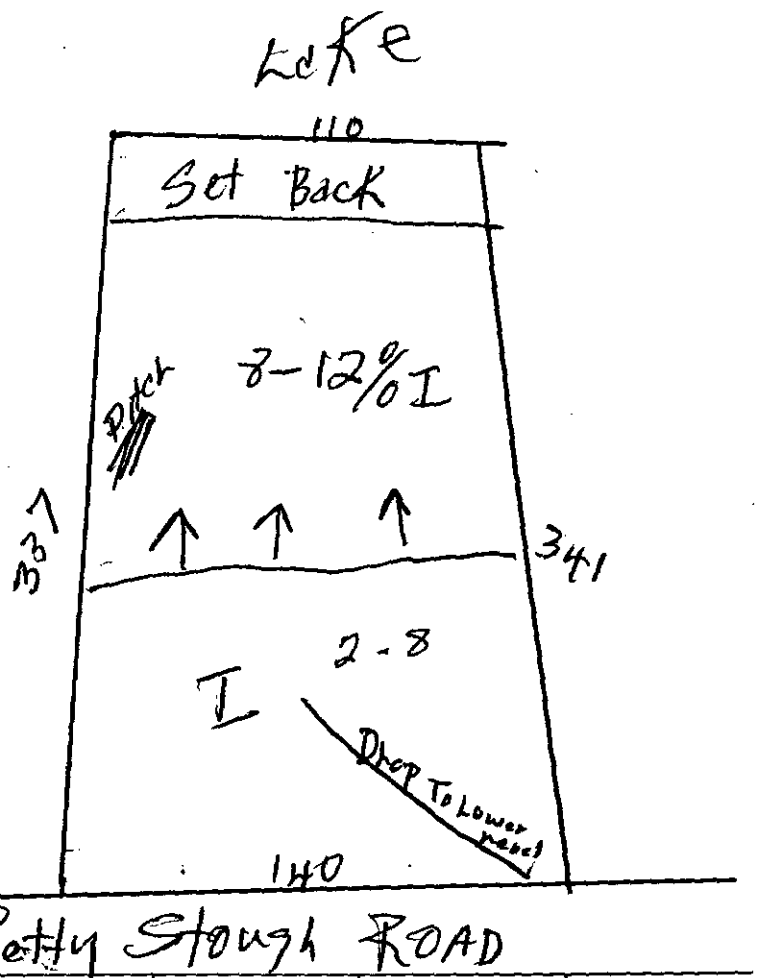
Lot: Block: Acres: .87

Owner: William Kimbrough
Address: 19529 Weavers Circle
Huntersville, NC 28078

Comments: Lift Station may be Required

Described by: W. B. Ramsey

Date: 7-13-89



***** 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 2-12	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 47	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	Hta Cecil					
Area Classification	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U

30 d1

APPLICATION FOR SOIL INVESTIGATION

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

(OFFICE USE ONLY)

FILE: 5843A

TC: _____

☐ PC ☐ REPT

✓ see 5839A for change slip

JOB LOCATION

① ADDRESS: 19200 BETTY STOUGH ROAD, HUNTERSVILLE NC 28078

② SUBDIVISION: PATRICKS PURCHASE PHASE II ③ LOT: 51 ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: _____ PAGE NO.: _____ PARCEL NO.: 001-412-28

⑥ DEED REFERENCE: BOOK NO.: 5123 PAGE NO.: 663

OWNER

STOUGH FARM DEVELOPMENT COMPANY

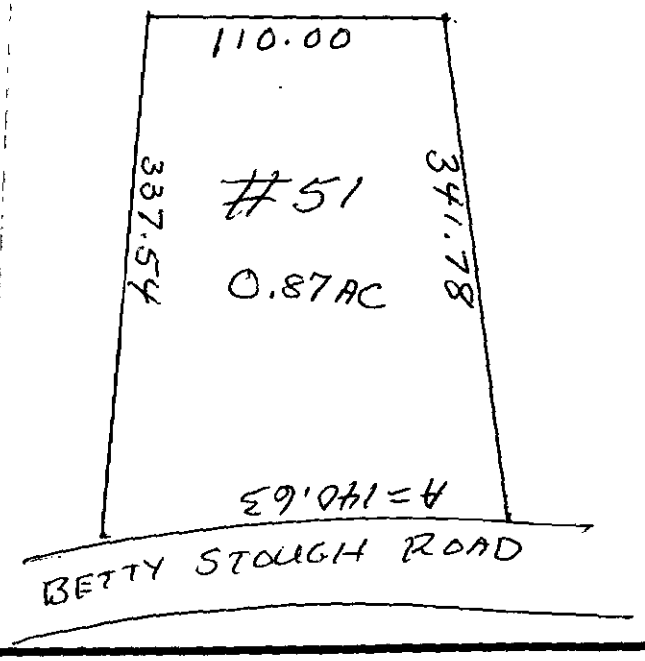
⑦ NAME: WILLIAM (FIRST) AUDREY (MIDDLE) KIMBROUGH (LAST)

⑧ MAILING ADDRESS: 19529 WEAVERS CIRCLE

⑨ CITY: HUNTERSVILLE ⑩ STATE: N.C. ⑪ ZIP: 28078

⑫ PHONE: (WORK) 892 3683 (HOME) 892 3683

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: William A. Kimbrough

Date: 6-22-89

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