

8631 GETALONG RD

10503510

5/31/2007

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: 5330-A DATE: 3/29/00

TC: 105-035-10 ☒ L ☒ CRT

SERIAL Nº 18130

Name of Owner Eugene Merchant Juris.:

Address of Property 8631 Getalong Road

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400'

Number of Lines 4 @ 100'

Cover Depth 18"

Water Supply Source Well

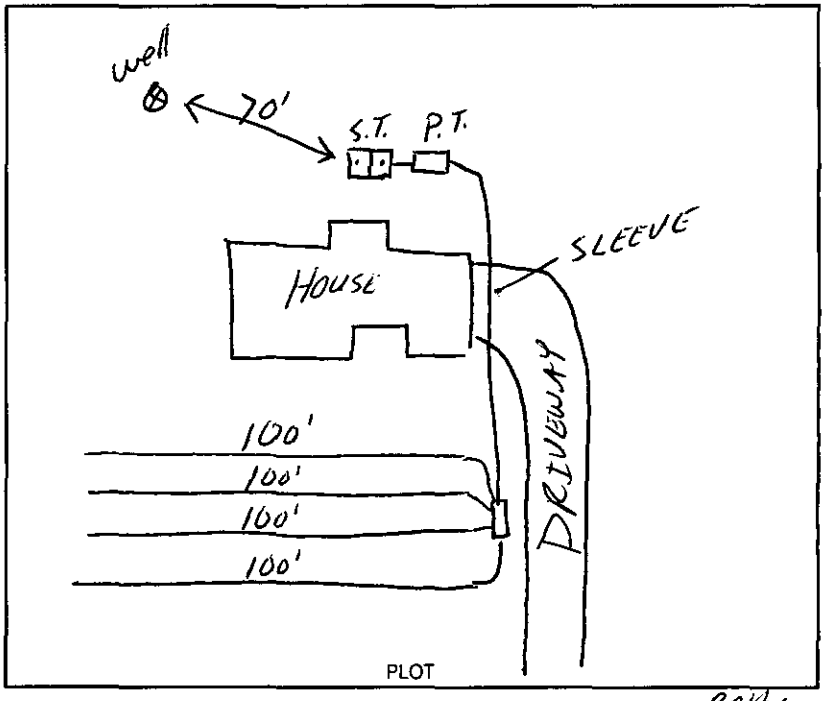
Distance to Water Source 70'

Excavation Inspected 3/29/00

Tank(s) Inspected 3/29/00

Wash Line Inspected NA

High Water Alarm Inspected 3/29/00



Design 2000, 1500ST, 1000DT, P1, 1600SFT, INV, CTR# Robby McCarver

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 I5A 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 I5A 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: // System designed for four bedroom Residence
Type III b Innovative System (4 lines x 100')
EEE-222 Lay, NEMA 4X Alarm Box

Jenny P. Mecklenburg
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

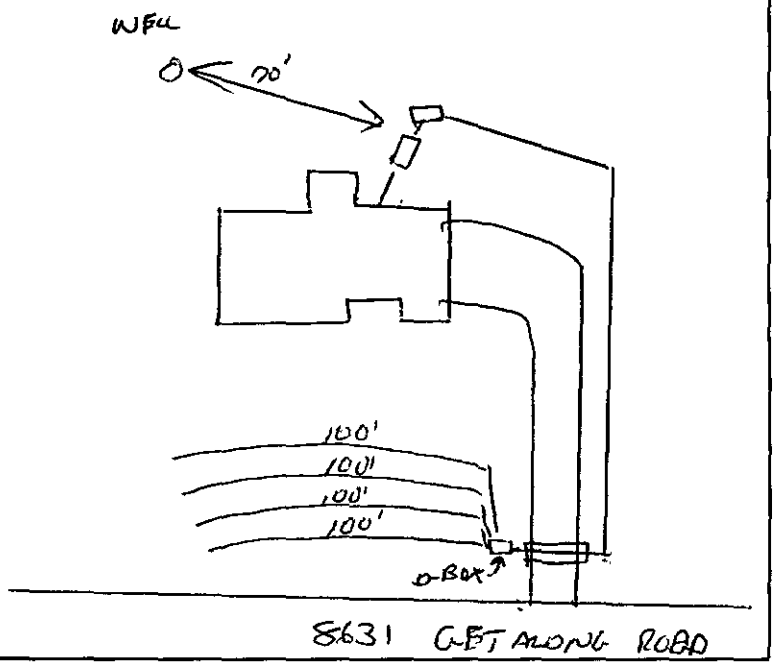
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 5330A DATE: 3-27-2000

TC: 105-035-10 ☒ L

SERIAL No 18289

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 12-6-95. All work shall be completed on or before 4-27-2000, 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 PCL

Trench Depth 30"

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Trench Walls Scored and Porous YES

Total Line Length 400 feet

Number of Lines 4

Depth of Stone NA inches

Distance from House 5' feet

Distance from Property Line 10' feet

Distance from Well 20+ feet

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

NAME OF OWNER EUGENE MERCHANT

LOCATION OF PROPERTY 8631 GETALONG ROAD

Comments: (1) REQUIRES TYPE III-G INNOVATIVE DESIGN

(2) SLEEVE W/ SCHEDULE 40 2" SUPPLY LINE UNDER DRIVE

Environmental Health Specialist

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

ck# 1073

FEE: 200 **AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION**
DATE: 3/18/99 **VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE**

DATE: 1-28-99 **PERMIT NO:** 5330 A
PARCEL NO: 105-035-10

JOB LOCATION ADDRESS: 8631 GETALONG ROAD
PROPERTY OWNER: EUGENE MERCHANT
BUILDING CONTRACTOR:
SUBDIVISION NAME: EASTERN HIGHLANDS
AUTHORIZATION ISSUED BY: Andrew Welch RF **DATE:** 1-28-99
DEHNR AUTHORIZED AGENT

AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NO. _____, 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: ① INSTALL AN EFFLUENT FILTER AND RISER OVER OUTLET END OF SEPTIC TANK.

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 L.H. McCallon Jr 3-8-99
SIGNATURE OF OWNER/OWNER'S REPRESENTATIVE DATE

Permit Number: 5330A

Tax Number: 105 03370

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.

(01)

Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

Basement	___ Yes	X 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	X Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1	
.3 Long-term acceptance rate	480 Max gallons/day wastewater flow	1600 Absorption Area (sq ft)	9' Trench spacing (min. on centers)	
GFS Serviced by private well	~~480~~ 1500 Gallon septic tank	400 Total trench length (ft)	24" Maximum trench depth (At least 12" of provisionally suitable soil must remain between trench bottom and unsuitable soil conditions)	
4 Bedrooms in residence	1000 Gallon pump tank	NA Depth of stone TYPE III-C		
Any surface waters present:	Type:	Minimum separation distance:		
Site modifications required:				
Additional Conditions: (1) INSTALL AN EFFLUENT FILTER AND RISER OVER OUTLET END OF SEPTIC TANK. (2) LOCATE ALL WELLS 100' FROM ALL PARTS OF SEPTIC TANK SYSTEM; IF NO TIMR LESS THAN 50'				
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	X Innovative or Experimental: ___ IWWS-93-1 ___ IWWS-93-2 ___ IWWS-94-1	
1600 Absorption Area (Sq ft) 400 Total Trench Length (Ft)	NA Depth of Stone Trench	9' Trench spacing (min. on centers)	24" Maximum Trench Depth	
For existing system, enter the year originally installed:				

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
- This Improvement permit is transferable.

DEHNR Authorized Agent — Date: 1-28-99

X L. H. Gladden — Owner/Agent Signature — Date: 3-8-99

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

PROPOSED PLOT PLAN

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

FILE: 5330A

TC: 105-035-10

(10)

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.

SCALE 1" = 40'

(1) THIS DESIGN REQUIRES THE USE OF AN EFFLUENT PUMP TO OVERCOME RISE IN LINE TO DRAINFIELDS - F

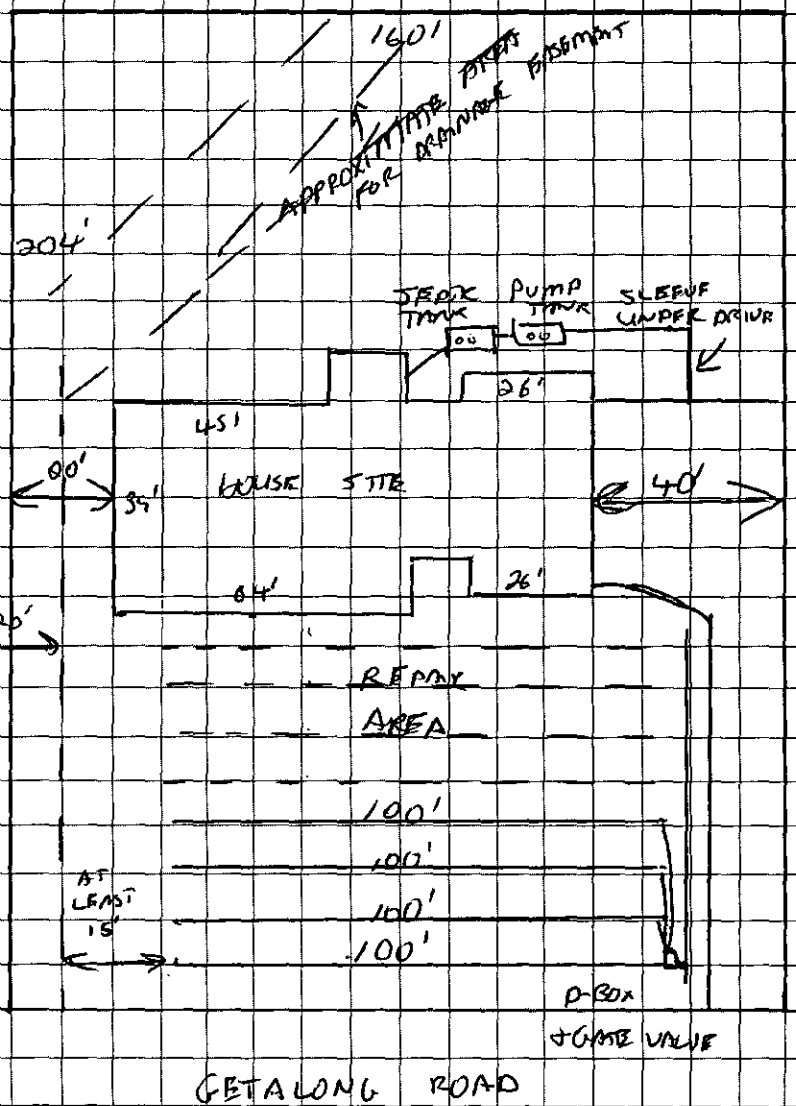
(2) SYSTEM DESIGN REQUIRES A TYPE III-G DESIGN THAT ALLOWS 25% REDUCTION IN DRAINLINE LENGTH.

(3) THIS DESIGN REQUIRES AGREEMENT FORMS TO BE SIGNED AND FILED W/ THE REGISTER OF DEEDS OFFICE PRIOR TO ISSUANCE OF CONSTRUCTION AUTHORIZATION.

(4) INSTALL DRAINLINES SHALLOW 24" AND ON CONTOUR, 20' DRAINAGE

(5) SEPTIC TANK CONTRACTOR, EASEMENT BUILDER, AND ENVIRONMENTAL HEALTH SPECIALIST SHALL MEET ONSITE PRIOR TO ROUGH PLUMBING INSTALLATION TO LOCATE WASTE DRAIN OUTLET

(6) INSTALL A BALL OR GATE VALVE INSIDE RISER OR @ D-BOX TO REGULATE FLOW TO LINES.



X L. H. Gladden Jr
OWNER/AGENT SIGNATURE

DATE 3-8-99

APPROVAL DATE 1-27-99 [signature]

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

FOR REGISTRATION JUDITH A. GIBSON
REGISTER OF DEEDS
MECKLENBURG COUNTY, NC
1999 MAR 10 11:22 AM
BOOK:10312 PAGE:517-520 FEE:$12.00
INSTRUMENT # 1999041888

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 # 5330A
PARCEL # 105-035-10

The undersigned, L. H. Gladden Jr., owner of property located at 8631 Getalong Rd Charlotte NC (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: L
Mail after recording to: L L.H. GLADDEN JR
2727 MCLEAN RD. CHARLOTTE, NC. 28213

- 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 10 day of March, 1999.

_____ (SEAL)
(Corporate Name)

By: _____

_____ President

ATTEST:

_____

_____ Secretary

(Corporate Seal)

X L.H. Gladden Jr (SEAL)

_____ (SEAL)

_____ (SEAL)

_____ (SEAL)

STATE OF NORTH CAROLINA
COUNTY OF Mecklenburg

I, Mary M. James, a Notary Public for said County and State, do hereby certify that L. H. Gladden Jr personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 10 day of March, 1999.

Mary M. James
Notary Public

My Commission Expires:
8-2-02

MARY M. JAMES
NOTARY PUBLIC
MECKLENBURG COUNTY, N.C.

RBCWM:24751_1/8-30-95



JUDITH A. GIBSON
REGISTER OF DEEDS , MECKLENBURG COUNTY
COUNTY & COURTS OFFICE BUILDING
720 EAST FOURTH STREET
CHARLOTTE NC 28202

****

Filed For Registration:	**03/10/1999 11:22 AM**
Book:	**RE 10312 Page: 517-520**
Document No.:	**1999041888**
	PRMIT 4 PGS $12.00
Recorder:	**DOROTHY MCCLELLAND**

****

State of North Carolina, County of Mecklenburg

The foregoing certificate of MARY M. JAMES Notary is certified to be correct. This 10TH of March 1999

JUDITH A. GIBSON, REGISTER OF DEEDS By: Dorothy McClelland
Deputy/Assistant Register of Deeds

****



1999041888

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURSES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

#2 (400)

Sheet: _____
Property ID: 105-035-10
Lot #: 31
File #: 5330A

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Eugene E. Merchant APPLICANT: L. H. Middleton, Jr.
ADDRESS: 4636 Marthas Ridge Dr, Charlotte DATE EVALUATED: 1-6-99
PROPOSED FACILITY: residence PROPOSED DESIGN FLOW (.1949) 480gpd PROPERTY SIZE: .75
LOCATION OF SITE: 8631 Idlelong Rd PROPERTY RECORDED: _____
WATER SUPPLY: ☒ Private ☐ Public ☒ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☒ Augur Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	Slopes 2-6% .1940 Landscape Position/ Slope %	Horizon Depth (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS &LTAR
1	LS	0-4"	gr/lcl	Fr/SE/Pl/SP	730" TO SOIL WETNESS	30"	N/A	None	US .391 Fx IV
		4-30"	SBMlc	Fi/SE/Pl/SP					
2	R	0-6"	gr/lcl	Fr/SE/Pl/SP	736" TO SOIL WETNESS	36"	N/A	None	US .391 Fx IV
		6-30"	SBMlc	Fi/SE/Pl/SP					
		30-36"	SBMlcl	Fr/SE/Pl/SP					
3	LS	0-3"	gr/lcl	Fr/SE/Pl/SP	736" TO SOIL WETNESS	36"	N/A	None	PS .391 Fx IV
		3-29"	SBMlc	Fi/SE/Pl/SP					
		29-36"	SBMlcl	Fr/SE/Pl/SP					
4	R	0-3"	gr/lcl	Fi/SE/Pl/SP	726" TO SOIL WETNESS	29"	N/A	None	US LL .12 91 Fx + PP
		3-29"	SBMlc	Fi/SE/Pl/SP					
5	R	0-7"	gr/lcl	Fr/SE/Pl/SP	748" TO SOIL WETNESS	46"	N/A	None	PS IV .391 Fx
		7-46"	SBMlc	Fi/SE/Pl/SP					
6	LS	0-28"	SBMlc	Fi/SE/Pl/SP	734" TO SOIL WETNESS	34"	N/A	None	US IV .391 Fx
		28-34"	SBMlcl	Fr/SE/Pl/SP					

DESCRIPTION	INTIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	US
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): unsuitable
EVALUATED BY: W. R. Marlin 1-7-99
OTHER(S) PRESENT: LSS

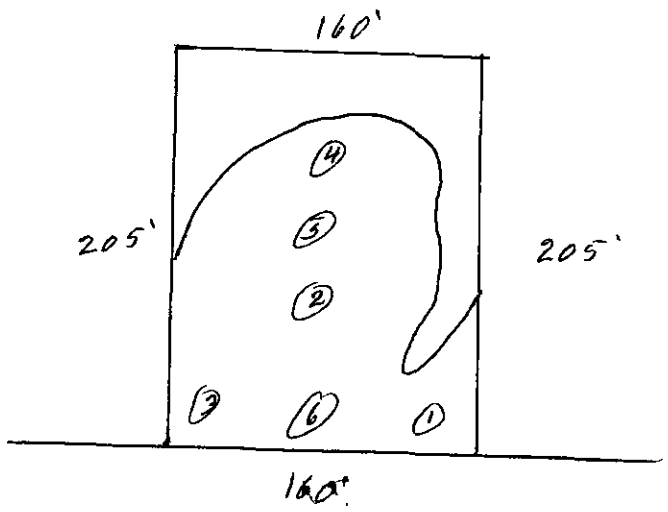
FILE # 5330A

COMMENTS 100% Repair

LANDSCAPE POSITION	GROUP	TEXTURE	.1955 LTAR
R-RIDGE	I	S-SAND	1.2-0.8
S-SHOULDER SLOPE		LS-LOAMY SAND	
L-LINEAR SLOPE			
FS-FOOT SLOPE	II	SL-SANDY LOAM	0.8-0.6
N-NOSE SLOPE		L-LOAM	
H-HEAD SLOPE			
CC-CONCLAVE SLOPE	III	SI-SILT	0.6-0.3
CV-CONVEX SLOPE		SICL-SILTY CLAY LOAM	
T-TERRACE		CL-CLAY LOAM	
FP-FLOOD PLAIN		SCL-SANDY CLAY LOAM	
	IV	SC-SANDY CLAY	0.4-0.1
		SIC-SILTY CLAY	
		O-ORGANIC	

CONSISTENCE MOIST	WET
VFR-VERY FRIABLE	NS-NON-STICKY
FR-FRIABLE	SS-SLIGHTLYSTICKY
FI-FIRM	S-STICKY
VFI-VERY FIRM	VS-VERY STICKY
EFI-EXTREMELY FIRM	NP-NON-PLASTIC
	SP-SLIGHTLYSTICKY
	P-PLASTIC
	VP-VERY PLASTIC

STRUCTURE	MINERALOGY
SG-SINGLE GRAIN	SLIGHTLY EXPANSIVE
M-MASSIVE	
CR-CRUMB	EXPANSIVE
GR-GRANULAR	
SBK-SUBANGULAR BLOCKY	
ABK-ANGULAR BLOCKY	
PL-PLATY	
PR-PRISMATIC	



Cotalong Rd

FEE: 100.00 CK # 1037
DATE: 12/7/98 SC

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

1 1 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 #: 5330A

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 105-035-10

STREET ADDRESS: 8631 GETALONG RD

SUBDIVISION OR MOBILE HOME PARK NAME: EASTERN HIGHLANDS

LOT NUMBER: 31 BA

TYPE OF BUILDING (CHECK ONE):

__ SINGLE MOBILE HOME(S)
__ DOUBLE WIDE (D)
H HOUSE (H)
__ MODULAR HOME (M)
__ MULTIPLE FAMILY (U)
__ OTHER (O)

TOWNSHIP (CHECK ONE):

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

HEATED SQUARE FOOTAGE: 3,561

NUMBER OF BEDROOMS: 4 NUMBER OF OCCUPANTS: 3

CLOSING DATE _____

FOUNDATION FOR RESIDENCE:

__ WITHOUT BASEMENT
__ ON SLAB
✓ 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 ✓ NO TYPE: _____

WATER SUPPLY (CHECK ONE):

__ COMMUNITY (C)
__ MUNICIPAL (M)
✓ 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 __ NO	WELL, SPRINGS OR WATERLINES	__ YES __ NO
EXISTING WASTEWATER SYSTEMS	__ YES __ NO	DESIGNATED WETLANDS	__ YES __ NO
EASTMENTS OR RIGHT-OF-WAYS	✓ YES __ NO		

PROPERTY OWNER:

NAME: MERCHANT, EUGENE. E
(LAST) (FIRST) (MI)

ADDRESS: 4630 MARTHAS RIDGE DR.

CITY: CHARLOTTE STATE: N.C. ZIP: 28212

DAYTIME PHONE: (704 - 568-6085

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: L.H. GLADDEN JR.
(LAST) (FIRST) (MI)

DAYTIME PHONE: (704 - 597-5423

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 9-8-98

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: L.H. Gladden Jr. DATE: 12-6-98

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

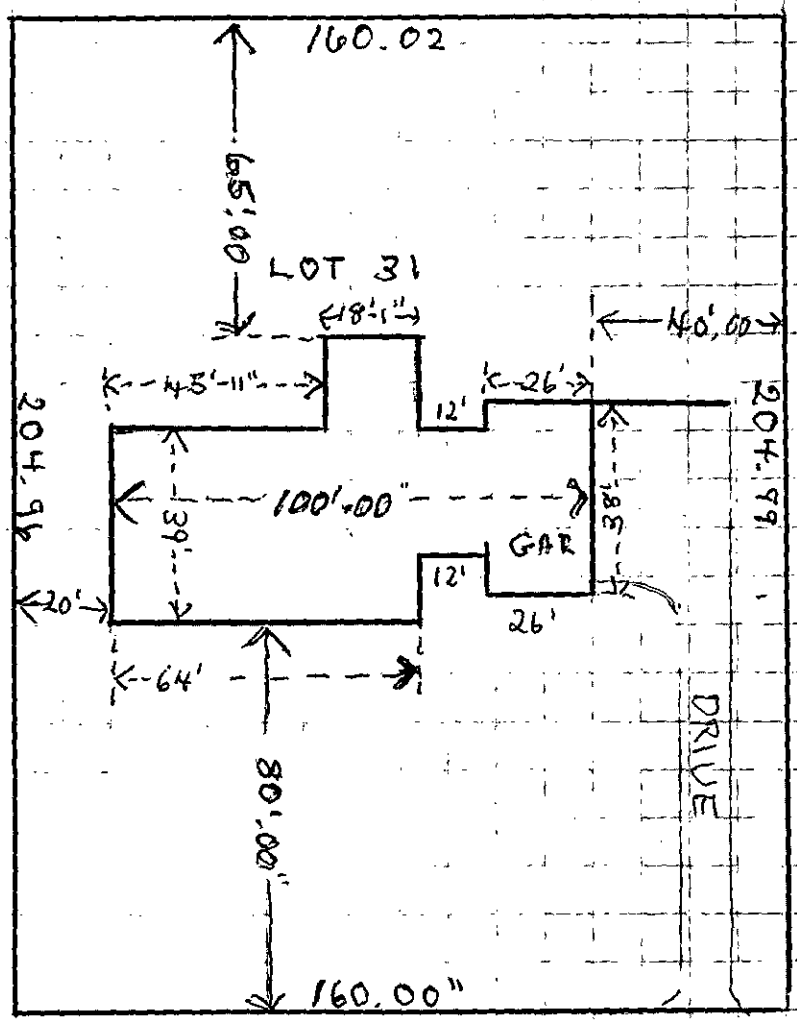
PROPOSED PLOT PLAN

[redacted]
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 5330A

TC: 105-035-10

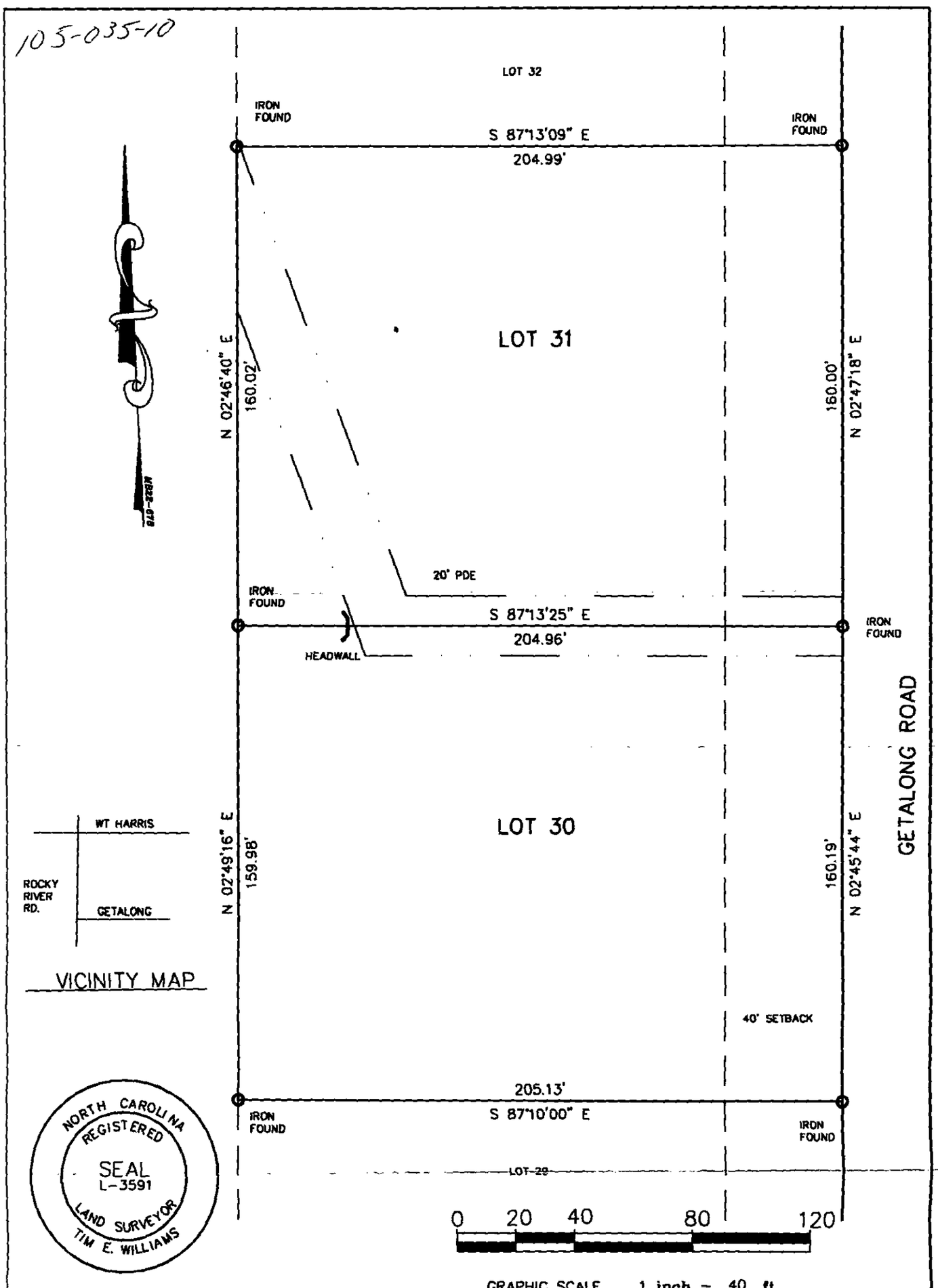
Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Signed: L. H. Maddox Jr.

Date: 12-3-98

105-035-10



VICINITY MAP

NORTH CAROLINA REGISTERED SEAL L-3591 LAND SURVEYOR TIM E. WILLIAMS

NOTE: THIS PLAT IS SUBJECT TO ANY EASEMENTS, AGREEMENTS, OR RIGHTS-OF-WAY OF RECORD PRIOR TO DATE OF THIS PLAT, WHICH WAS NOT VISIBLE AT THE TIME OF OUR INSPECTION.

NOTE: MAP NOT FOR RECORDATION.

BEARINGS BASED ON RECORD PLAT NOTED BELOW.

"I CERTIFY THAT ON THE DATE SPECIFIED HEREON, I SURVEYED THE PROPERTY SHOWN ON THIS PLAT; ALL OF WHICH WAS DONE UNDER MY SUPERVISION."

TIM E. WILLIAMS NCRLS

MAP FOR: EUGENE E. AND CYNTHIA A. MERCHANT

SCALE	TOWNSHIP	COUNTY	STATE	DATE
1"=40'	CITY	MECK.	N.C.	9-08-98

8615 AND 8631 GETALONG ROAD
LOTS 30 AND 31 OF EASTERN HIGHLANDS

SURVEYED DMM | MAPPED TEW

TARHEEL SURVEYING CO.
4326 SAXONBURY WAY CHARLOTTE, N.C. 28269
O:(704)547-8960 FAX:(704)548-9328

MAP RECORDED 22-678 | DEED RECORDED

ATTACHED 8615GETA

S-330A

Mecklenburg County
Health Department

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

February 14th, 1989

Baucom's Nursery Company
P. O. Box 25558
Charlotte, NC 28212

RE: Property located at Getalong Road 31
FILE: 5330A
PARCEL: 10503499

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 15878) 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,

Sylvia D. Daniel, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure (2)

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

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 15878

File: 5330A Action 2

Parcel: 10503499 ☐ PC

Location: Getalong Road

Subdivision:

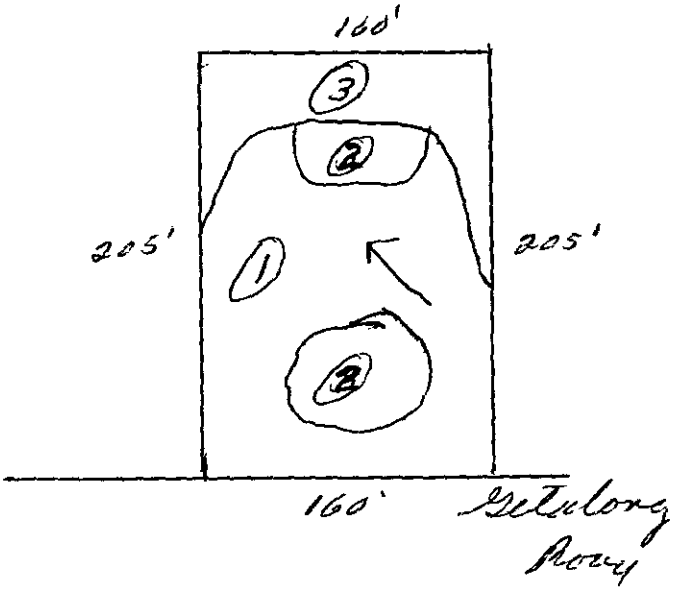
Lot: 31 Block: Acres: .75

Owner: Baucom's Nursery Company
Address: P. O. Box 25558
Charlotte, NC 28212

Comments: Recommend that lot be re-checked when piled stumps & brush is removed

Described by: William R. Marlin

Date: 2-9-89



*** 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 2-10%	S PS U	S PS (U) Drainageway Depression	S PS U	S PS U	S PS U
Texture	S (PS) U 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 >36" to water	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 36"+	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U >36"	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S PS (U) Restricted	S PS U	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS (U) stumps, etc	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	10A Cecil-Urban	stumps ETC	Drainageway Depression			
Area Classification	S PS (U)	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

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

(OFFICE USE ONLY)

FILE: 5330A

TC: _____

☐ PC ☐ REPT

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
JAN
ENVIRONMENTAL HEALTH
DIVISION

JOB LOCATION

① ADDRESS: Getalong Rd.

② SUBDIVISION: Eastern Highlands-Section Two ③ LOT: 31 ④ BLOCK: A

⑤ PARCEL REFERENCE: BOOK NO.: 4160 PAGE NO.: 972 PARCEL NO.: _____

⑥ DEED REFERENCE: BOOK NO.: 22 PAGE NO.: 678

OWNER

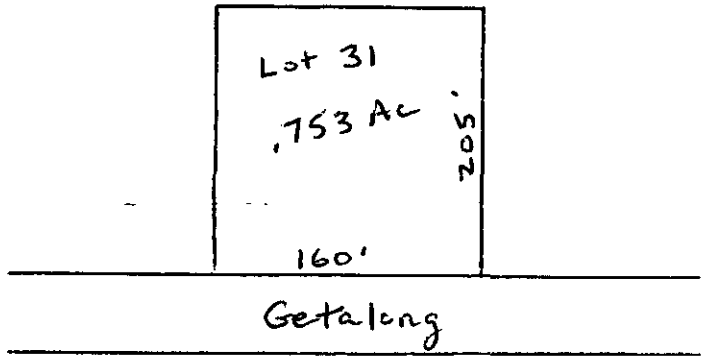
⑦ NAME: Baucom's Nursery Co.
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: P.O. Box 25558

⑨ CITY: CHARLOTTE ⑩ STATE: N.C. ⑪ ZIP: 28212

⑫ PHONE: (WORK) 704-596-3220 (HOME) _____

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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Doug. Baucom

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

Date: 1-5-89

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY