

12/17/07

duponbj

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

Mecklenburg County
Health Department

March 12, 1992

Dan L. Moser
2101 Sardis Road N. #110
Charlotte, NC 28227

RE: Property located at Edward's Place Lot #21/22
FILE: 8082A (192B)
PARCEL: 137-132-03PD

Dear Mr. Moser:

At your request a soils investigation was conducted on the property designated above. Results of this investigation showed the site to be classified as **UNSUITABLE** under criteria as set forth in Section .1900 of the North Carolina Administrative Code, Title 10, Department of Human Resources, Chapter 10, Division of Health Services; Sanitary Engineering Section, Subchapter 10A, Sanitation. A copy of the Site Evaluation Report (Serial Number 12567) is enclosed.

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

If there are any questions, please contact Bill Marlin at 336-5574.

Sincerely,

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

Enclosure

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 12567

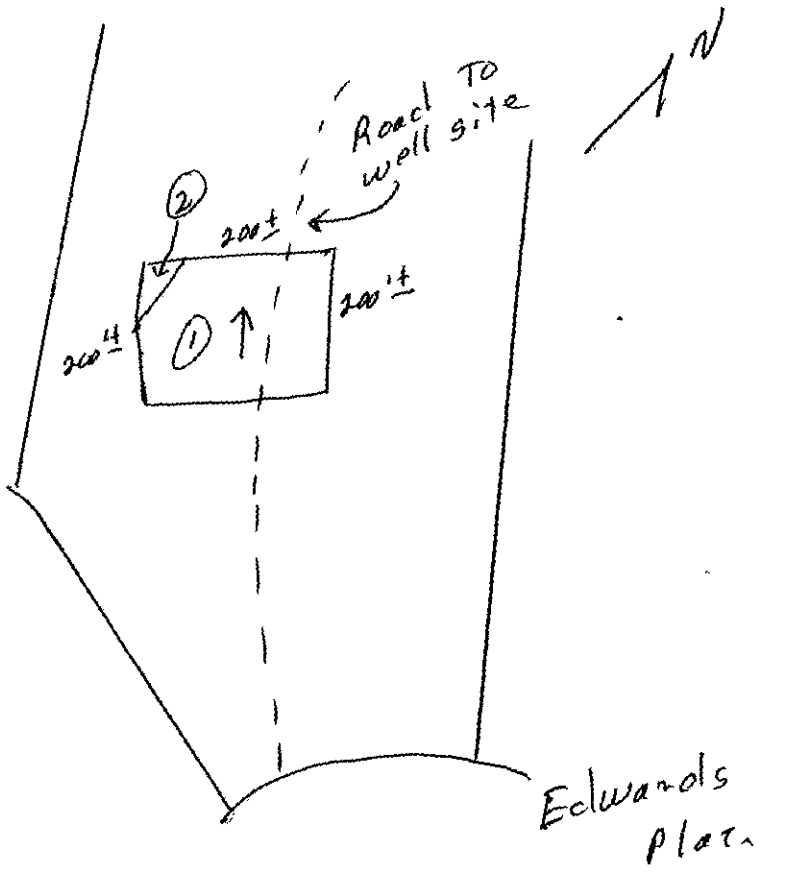
File: 0092A/192B Action 3

Parcel: 137-132-03 PC

Location: Edward's Place
Subdivision: Bainbridge III
Lot: 21/22 Block: Acres: 1.0
Owner: Dan Moser
Address: 2101 Sardis Road N.
Charlotte, N.C. 28227

Comments: Repair area for well filler backwash

Described by: William R. Marlin
Date: 3-6-92



***** 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 6-12%	S PS (U) Drainageway/ Depression	S PS U	S PS U	S PS U	S PS U
Texture	S PS (U) Expansive clay	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Sab & Black Hy	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U 7½" to water	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S PS (U) 2 4-7½"	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 7½"	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	Ventre - Lilac	Drainageway/ Depression				
Area Classification	S PS (U)	S PS (U)	S PS U	S PS U	S PS U	S PS U

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER [illegible] 32539

File: [illegible] Action 3

Parcel: [illegible] ☑ PC

Location:

Subdivision:

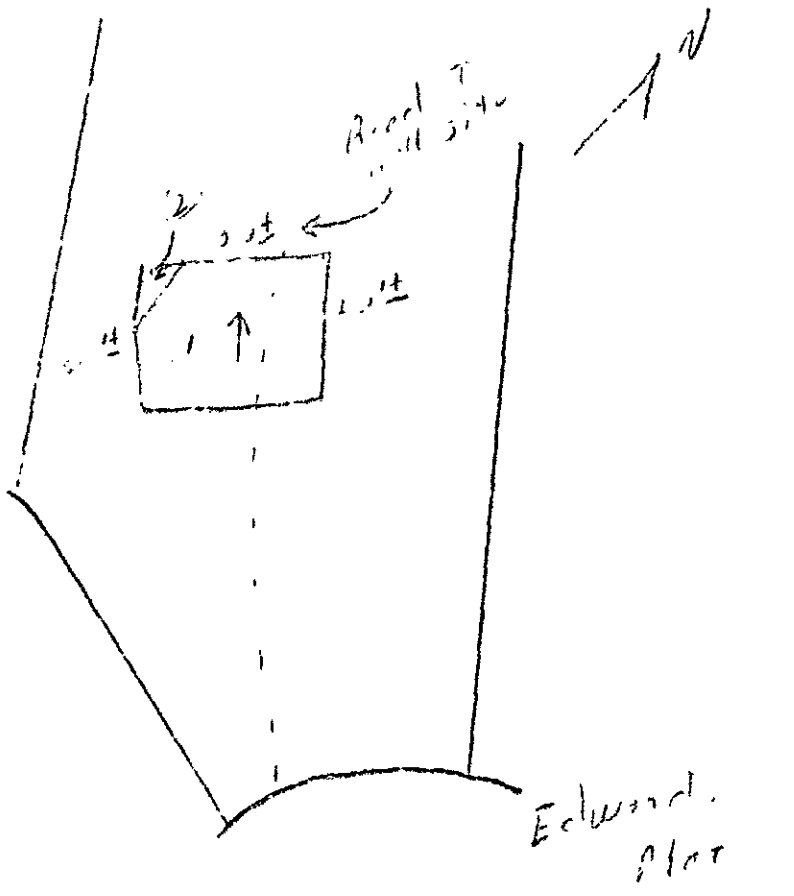
Lot: [illegible] Block: Acres:

Owner:
Address:

Comments:

Described by: [illegible]

Date: 3-1-12



***** EVALUATION KEY *****

S = Suitable U = Unsuitable
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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	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series						
Area Classification	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U

UPDATE COMPLETE

Applicant MOSER DAN Appl.Date 02/28/92 Updated 03/02/92
Mail Addr 2101 SARDIS ROAD NORTH Phone 704 845-1278
City CHARLOTTE State NC Zipcode 28227
Prop Ownr MOSER DAN
Mail Addr 2101 SARDIS ROAD NORTH Phone 704 845-1278
City CHARLOTTE State NC Zipcode 28227 Township 7
Tax Map No. 13713203PO015 Road EDWARD'S PLACE BK1 Zoning
Sub/Mobil Sec Lot No. 21 Lot Size
Type App D Site Y or Tract Type Bldg System Classif NOT REQUIRED
Resident. Specif: No. Bedrooms 00 No. Occupants Undgrnd. Stor. (Y/N)
Commercial/Industrial/Other Specifications:
Type No. Empl. No. Empl. per Shift
Industrial or Mfg. Wastes (Y/N) Underground Stor. Tank (Y/N)
Prop. Water Sup. C Proposed Sewage I Construct. Status P Sites 1
Planned Future Additions (Y/N) Fee 0000.00 EHS Assigned 25001
Directions:

Date Appl. Recd. 02/28/92 Date Insp. Insp. Status
Date Letr. Sent Type Letr. Date Eval. Eval. Status
Date Perm. Date Cert.Iss. Disp.Code Followup
Denial Codes:
Repaired (Y/N) Rep. Date Perm. No. 00192B Operat. Permit (Y/N)
3/02/92 13:37:51
01-03 SA MW KS DM IM II S1 S1037498 KB

PROPOSED PLOT PLAN

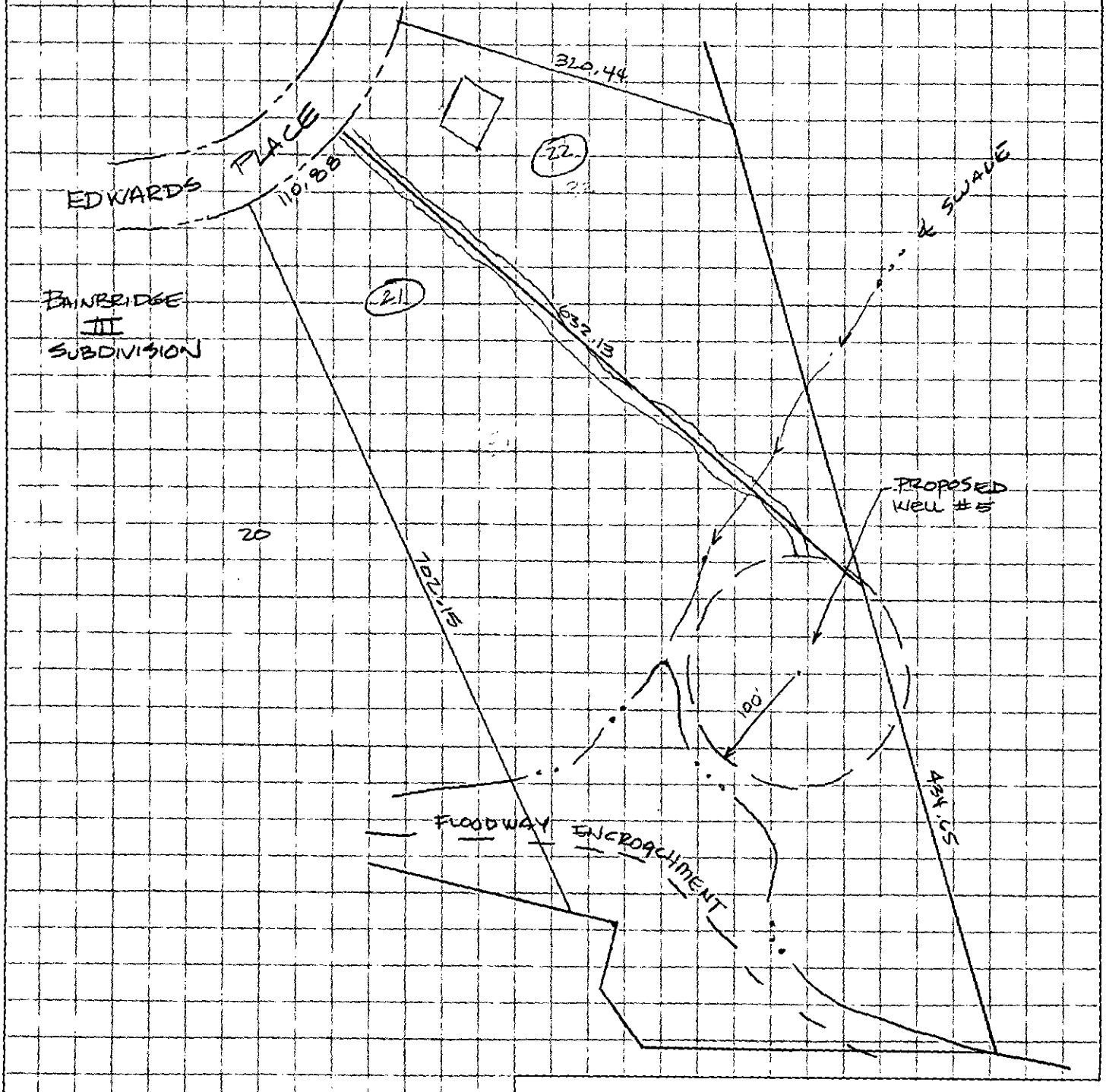
P-2450-00

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

FILE: 8082AC(92B)

TC: _____

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: _____

Date: _____

LANDDESIGN ENGINEERING SERVICES, INC.
1700 East Blvd.
CHARLOTTE, NORTH CAROLINA 28203

(704) 376-7777

LETTER OF TRANSMITTAL

DATE 3/3/92	JOB NO. 9495
ATTENTION	
RE: BAINBRIDGE III LOT 21 SEPTIC DISPOSAL SYSTEM	

TO Bill MARLIN

WE ARE SENDING YOU ☐ Attached ☐ Under separate cover via _____ the following items:

☐ Shop drawings ☐ Prints ☐ Plans ☐ Samples ☐ Specifications
☐ Copy of letter ☐ Change order ☐ _____

COPIES	DATE	NO.	DESCRIPTION

THESE ARE TRANSMITTED as checked below:

☐ For approval ☐ Approved as submitted ☐ Resubmit _____ copies for approval
☒ For your use ☐ Approved as noted ☐ Submit _____ copies for distribution
☐ As requested ☐ Returned for corrections ☐ Return _____ corrected prints
☐ For review and comment ☐ _____
☐ FOR BIDS DUE _____ 19____ ☐ PRINTS RETURNED AFTER LOAN TO US

REMARKS

Bill,

PLEASE FIND ENCLOSED THE SUBMITTAL PACKAGE FOR SOILS REVIEW FOR LOT 21 @ BAINBRIDGE III. PLEASE LET ME KNOW WHEN YOU PLAN TO GO. I WOULD LIKE TO BE THERE SO WE CAN ADDRESS ALL OF YOUR CONCERNS. IF YOU HAVE ANY QUESTIONS PLEASE CALL

RAYMOND WAUGH

COPY TO _____

SIGNED: Ray

If enclosures are not as noted, kindly notify us at once.

W4100 015 02/02/92 529458 $50

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

8082AC(192B)

[] 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: MOSER (last) DAN (first) (mi)

ADDRESS: 2101 SARDIS RD NORTH PHONE: (704) 845-1378

CITY: CHARLOTTE STATE: NC ZIPCODE: 28227

Date:

PROPERTY OWNER:

NAME: MOSER (last) DAN (first) (mi)

ADDRESS: 2101 SARDIS RD NORTH PHONE: (704) 845-1378

CITY: CHARLOTTE STATE: NC ZIPCODE: 28227

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: PO 137-132-03

STREET ADDRESS: LOT 21 BL 1 EDWARDS PLACE BAINBRIDGE III

ZONING: R-30

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
[X] 0 Mecklenburg County [] 2 Davidson [] 4 Pineville [] 6 Huntersville
[] 1 Charlotte [] 3 Cornelius [] 5 Matthews [X] 7 Mint Hill

LOT NUMBER: 21 / BK1 LOT SIZE (in acres): 5.84 AC

TYPE APPLICATION (check one):

[X] SOIL TEST - INDIVIDUAL LOT (D)
[] 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) [] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [] MODULAR HOME (M) [X] OTHER WELL LOT (O)

NUMBER BEDROOMS: 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):
[X] Community (C) [] Shared Well (S)
[] Municipal (M) [] Other 'spring' (O)
[] 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: Dan Moser Date: 2/28/92

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.

...

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

_____ Environmentalist Date

_____ Director or Authorized Section Head Date

WWATER : 122791

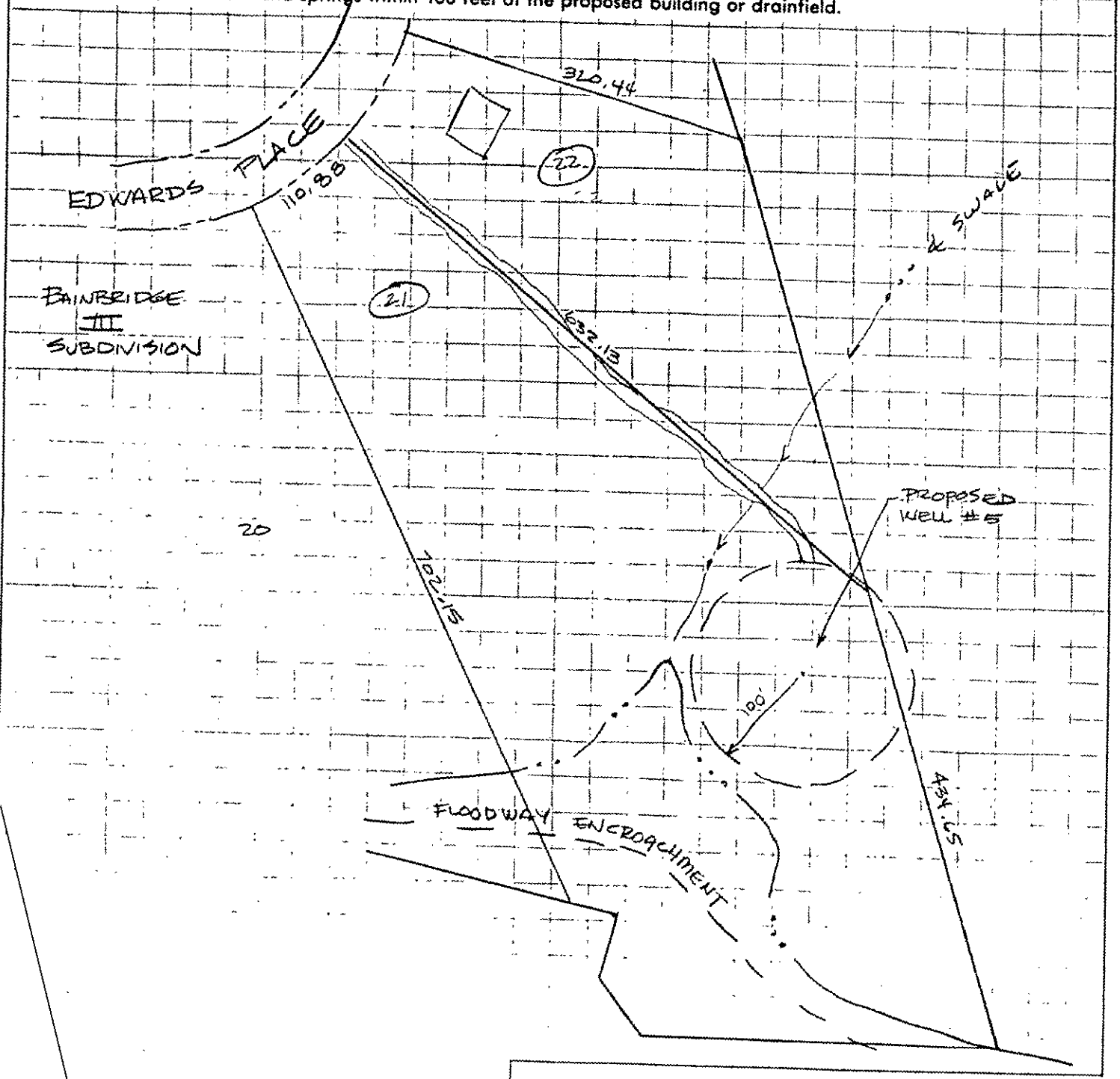
PROPOSED PLOT PLAN

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

FILE: 8082AC(92B)

TC: _____

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Signed: _____

Date: _____