

PROPERTY SERVICE CHART

4306 Hines Chapel Rd

ADDRESS (Print)

S/T Permit: _____ Date: _____

Name: _____

Well Permit: _____ Date: _____

Name: _____

Subd: _____ Sec. _____ Lot _____

SERVICE	COMMENTS	DATE	SANITARIAN
Filed	Not Surfacing	12/17/93	EJL
Septic Malfunction	Probed + Flagged septic system. Sewage is surfacing at the end of the last line, GPS'd system. (C)	7/22/16	EGD
Repair Permit	Issued CA repair permit.	7/26/16	EGD
Septic Final	C. Driggers 300' x 3' Gravel 18" stone	8/31/16	BGM
Follow up	- met w/ C. Drigger + owners father. Has been surfacing after rain (C) lost new line - All lines completely full - Need to level yard + get grass cover established + route 2 front gutters to R side ditch	1-31-17	TJS
Phone Call	From Christy King - hold off for 1 week on site visit. Had ST pumped Have drainage issue in house	2/11/19	KJJ LKH
Site Visit	System breaking out in same "bld spot". Talked w/ Joe.	3/22/19	LKH

SERVICE CHART

4306 Hines Chapel Rd

ADDRESS (Print)

Tax Map Number

Owner and/or Manager

Telephone

SERVICE	COMMENTS	DATE	STAFF MEMBER
Site Visit	malf noted from road	5/18/92	EJL
10 Day Ltr	Forwarded	5/22/92	EJL
Site Visit	No visible sign of malf at time of inspection	9/15/92	EJL
	Will continue to monitor Pipe closed	9/28/92	EJL
Site Visit	Malfunction noted in two places in front yard - Observed from Hines Chapel Rd	12/21/92	EJL RAB
10-Day Ltrs	1 Forwarded by Certified mail 1 Forwarded by 1st Class mail	12/21/92	EJL
Site Visit	Need to make necessary adjustment to the Distribution Box w/ system	12/30/92	EJL
	Need to Damp up last line,		
Permit	Written and Issued w/ 30 Day	2/3/93	EJL
Site Visit	malf (No visible sign this day)	6/24/93	EJL

Site Visit
Site Visit

No visible sign of malf
No visible sign of malf

11/8/93
12/16/93

EJL
EJL

PROPERTY SERVICE CHART

4306 Hines Chapel Road

ADDRESS (PRI)

S/T Permit: _____ Date: _____

Name: _____

Well Permit: _____ Date: _____

Name: _____

Subd: _____ Sec. _____ Lot _____

SERVICE	COMMENTS	DATE	SANITARIAN
S-14	Mal f. Front yard	1/23/91	JCF
Side visit	confirmed malfunction continues	3/4/91	RLP
ISSUED	letter #2 per KC	3/14/91	RLP
Phone Call	from Bob Falls - sent Wm a copy of COC on repair installed 1977	8/20/91	RLP
met mr Wyrick &	Bob Falls on site. Need to divert eaves trough drainage off	4/1/91	RLP
	Must redistribute system effluent st syst. weeping		
Issued	letter	4/3/91	RLP
Site Visit	No visible sign of septic tank system - malfunction.	8/16/91	EJL



Environmental Health Division
 Water Quality Section
 201 S. Eugene St.
 Greensboro, NC 27401
 (336) 641-7613



Authorization for Wastewater System Construction

Address: 4306 Hines Chapel RD, McLeansville, NC 27301

Permit Number: 16-07-SCHR-03691

This Construction Authorization shall be valid. The area designated for a Subsurface Sewage Treatment and Disposal System shall not be graded and appropriate measures shall be taken to prevent vehicular traffic, erosion, or any other disturbance to the site. Disturbance of this area, change of site plan, or change of intended use could result in the suspension or revocation of this Authorization.

System Type:	2a - Conventional	Wastewater Flow:	240	GPD	
Repair System Type:	2a - Conventional	Facility Type:	Residence		
Trench Length:	300	ft	Bedrooms:	2	
Trench Depth:	48	in to	48	in	
Trench Width:	36	in	<u>Site Requirements:</u>		
Gravel Depth:	18	in	Setback:	ft off of the	
Trench Separation:	9	ft On-Center	Offset:	ft off of the	
Soil Cover:	30	in to	30	in Setup:	ft off of the Rear
Septic Tank Size:	1000	gal	Basement:	N	
Pump Tank Size:	N/A	gal	Well Site:	Center Rear	
Dosing Volume:	N/A	gal to	gal	Repair Area Maintained:	

Authorization Issued:

Eric Dobbins REHS-I

Environmental Health Specialist

Date Issued: 7/26/16

Owner or Authorized Agent:

Owner or Authorized Agent

Date: _____

Comments:

- Check condition of tank before installation begins. If structural integrity is compromised or if no baffle wall is present, pump, crush and fill old tank and replace with new 1000 gallon septic tank. Install system in approved repair area between existing system as shown on permit. No reduction granted for type 3g system use. Right property line must be flagged at time of septic installation. Property owner is responsible for marking property lines for septic contractor. Maintain 50' + from any well unless otherwise noted on permit or site plan.

IMPROVEMENT PERMIT

Guilford County Department of Public Health Septic Tank System

No 01093

Grid _____

Address: 4306 Hines Chapel Rd. Name Wyrick, Jesse

Location: 29th T/R Hicone T/R Hines Chapel

Lot Size: ? House Size: ? Number of Bedrooms: P

Basement: _____ Yes X No _____ Fixture: _____ Yes _____ No _____ Number: _____

Garbage Disposal _____ Yes X No _____ Number of Baths ? Total Fixtures: ?

New well _____ Existing Well X Public _____

New _____ Repair X Addition _____ Mobile Home _____ Accessory Use _____

Above information certified by: _____

Following is the minimum specification for sewage disposal system on above captioned property. Subject to final approval by the Health Director and compliance with local zoning and building regulations.

System: Conventional ✓ LPP _____ T&J _____ Other _____

Size of Tank: Existing Pump System _____ Yes X No _____ System Size 200' per bedroom shallow placement 400' minimum

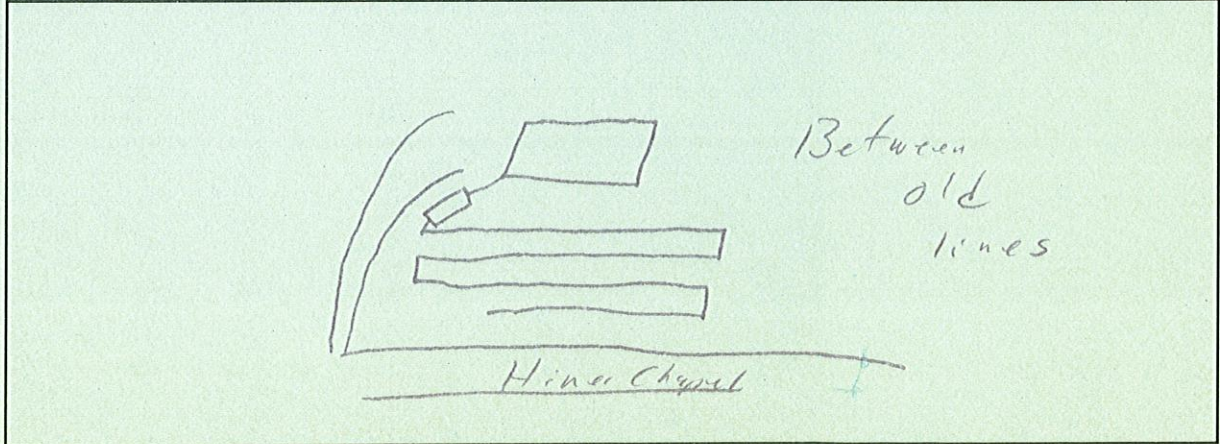
Setback Off Road Center: _____ Set Up Off Rear: _____ Offset _____

Remarks: 3' ditch 12" rock - 50-100' from any well

Permit: Granted ✓ Denied _____ Signed: [Signature]

this permit expires five years from NA, and is subject to revocation if site plans or the intended use changes.
1/23/91

Drawing



Fees Due \$ NA Fees Paid \$ _____ Date: _____ Receipt # _____ Rec'd by _____



IMPROVEMENT PERMIT

REPAIR RESIDENTIAL SEPTIC SYSTEM

PERMIT NO. 9302591

REF: 4306 HINES CHAPEL RD

IMPROVEMENT OF YOUR PROPERTY AS REFERENCED ABOVE, BY REPAIR OF AN ON-SITE SEWAGE DISPOSAL SYSTEM MUST BE COMPLETED WITHIN 30 DAYS UPON RECEIPT OF THIS PERMIT.

SYSTEM REQUIREMENTS:

TRENCH LENGTH	320 FEET	NUMBER OF BEDROOMS	2
TRENCH DEPTH	24 - 26 INCHES	SYSTEM TYPE	SINGLE FAMILY/480G
TRENCH WIDTH	36 INCHES		
DEPTH OF GRAVEL	12 INCHES		
TRENCH SEPARATION	10 FEET CENTER		
SOIL COVER	12 - 14 INCHES	SETUP	
SIZE OF TANK	GALS.	SETBACK	
SIZE OF PUMP TANK	GALS.	OFFSET	
DOSING VOLUME	0.0 - 0.0 GALS.		

OTHER

[Handwritten Signature]

ENV. HEALTH SPECIALIST 02/03/93
ISSUANCE DATE

THE AREA DESIGNATED FOR YOUR SUBSURFACE SEWAGE TREATMENT AND DISPOSAL AREA IS DENOTED ON THE IMPROVEMENT PERMIT. DO NOT GRADE OR DISTURB THIS AREA. THE GRADING AND/OR DISTURBANCE OF THIS AREA COULD RESULT IN THE SUSPENSION OR REVOCATION OF THIS PERMIT.

OWNER/AUTHOR, AGENT SIGNATURE DATE

FLOOR PLAN / SITE PLAN REVIEW

MUST BE COMPLETED BY THE COUNTY HEALTH DEPARTMENT PRIOR TO ISSUANCE OF BUILDING PERMITS

REPAIR AREA MAINTAINED _____

WELL LOCATION AVAILABLE _____

SETBACKS MAINTAINED _____

BASEMENT NA

NUMBER OF BEDROOMS 02

ALTERNATIVE SYSTEM _____

DESIGN APPROVED NA

ENV. HEALTH DIV. RELEASE

[Handwritten Signature] 02/03/93

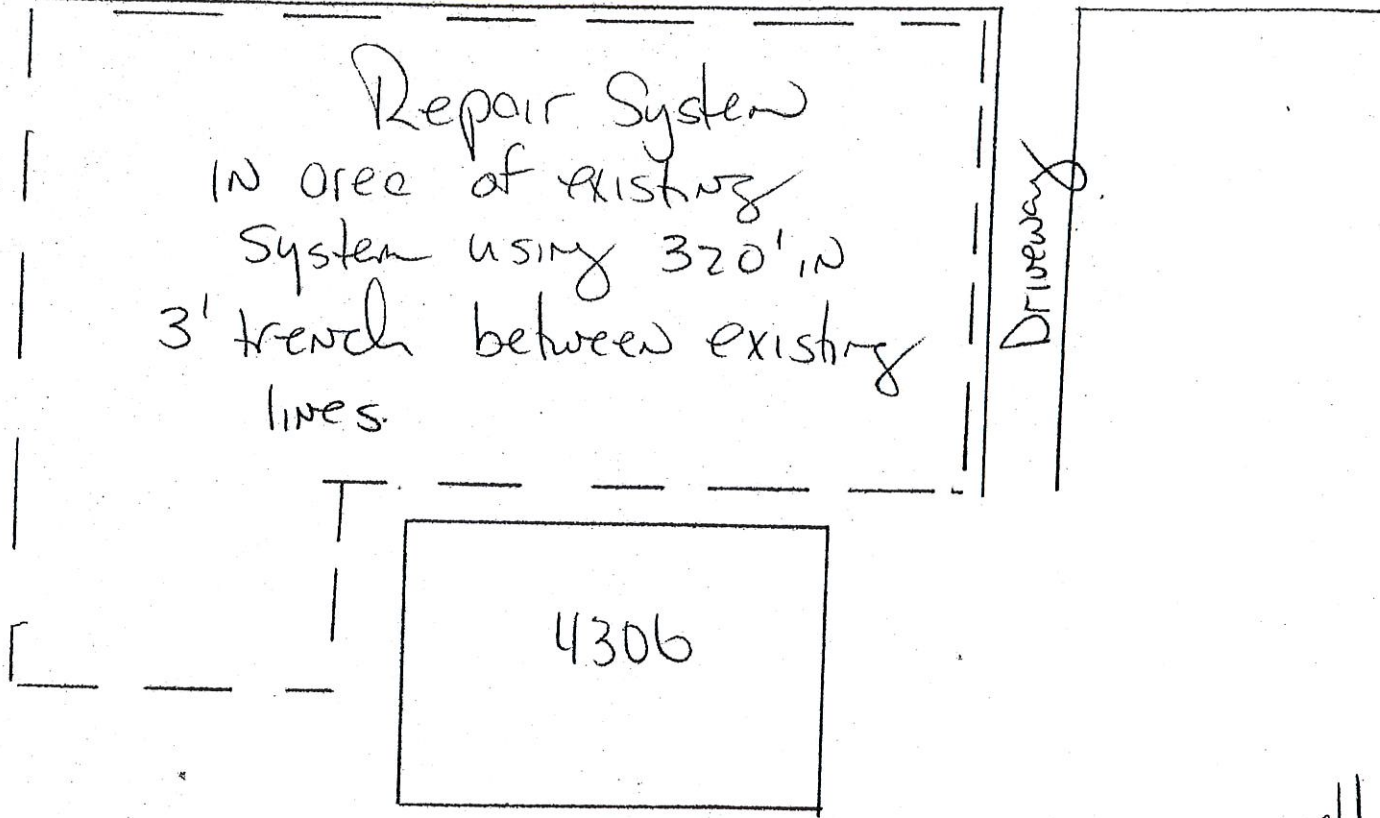
ENV. HEALTH SPECIALIST RELEASE DATE



LOT ADDRESS

PERMIT NO. 9302591

4306 HINES CHAPEL RD



well stay 50' from Any well.

SETBACK REQUIREMENTS

- HOUSE WITH BASEMENT - 15'
- HOUSE WITHOUT BASEMENT - 5'
- SEPTIC SYSTEM TO PROPERTY LINE - 10'
- HOUSE TO FRONT PROPERTY LINE - 40'
- HOUSE TO SIDE PROPERTY LINE - 10'
- SEPTIC SYSTEM TO WELL - 100'
- BUILDINGS TO WELL - 50'
- WELL TO PROPERTY LINE - 10'
- HOUSE TO REAR PROPERTY LINE - 30'



APPLICATION FOR ENVIRONMENTAL HEALTH SERVICE

APPLICATION TYPE: REPAIR RESIDENTIAL SEPTIC SYSTEM NUMBER: 9302591
DATE PRINTED 02/03/93

PROPERTY ADDRESS: 4306 HINES CHAPEL RD
DIRECTIONS:
29N T/R HICONE RD T/L HINES CHAPEL RD

PROPERTY OWNER/ADDRESS PHONE: H W
JESSE WYRICK TAX #: - -
4306 HINES CHAPEL RD LOT SIZE: 0,000 ACRES
GREENSBORO, NC 27406
SUBDIV/M HOME PARK NAME LOT # SEC # NEW SUB/LOT REC PRIOR '83

PROPOSED
WATER SUPPLY: WATER USAGE INCREASE: N POWER ON:
LOC:
SEWAGE DISPOSAL:
LOC:
NO BDRMS: NO RES: BASEMENT: PLUMBING: FIXTURES:

EXISTING:
WATER SUPPLY: PRIVATE TYPE WELL: WELL HEAD ABOVE GROUND:
LOC: REAR
SEWAGE DISPOSAL: SINGLE FAMILY/480GPD OR LESS YR INSTALLED:
LOC: FRONT
NO BDRMS: 2 NO RES: 2 BASEMENT: N PLUMBING: N FIXTURES:

NATURE OF REPAIRS (IF APPLICABLE):

IMPORTANT

I HEREBY GRANT AUTHORIZED COUNTY AND/OR STATE OFFICIALS RIGHT OF ENTRY TO CONDUCT NECESSARY INSPECTIONS AND EVALUATIONS TO DETERMINE COMPLIANCE WITH THE APPLICABLE RULES.

OWNER/AUTHORIZED AGENT SIGNATURE DATE COUNTY REPRESENTATIVE DATE



GUILFORD COUNTY
DEPARTMENT OF PUBLIC HEALTH

FEBRUARY 3, 1993

CERTIFIED MAIL

JESSE WYRICK
4306 HINES CHAPEL RD
GREENSBORO, NC 27406

DEAR JESSE WYRICK,

YOU WILL FIND ENCLOSED A PERMIT TO MAKE REPAIRS TO YOUR MALFUNCTIONING SEPTIC SYSTEM. A MALFUNCTIONING SEPTIC SYSTEM POSES A POTENTIAL THREAT TO PUBLIC HEALTH BY DISCHARGING EFFLUENT INTO THE ENVIRONMENT. SUCH DISCHARGE ALSO REPRESENTS A VIOLATION OF BOTH COUNTY AND STATE REGULATIONS GOVERNING PROPER SEWAGE DISPOSAL.

THE ISSUANCE OF THIS REPAIR PERMIT REQUIRES YOU TO MAKE THE NECESSARY REPAIRS AS PRESCRIBED BY NORTH CAROLINA GENERAL STATUTE 130A-19 "SEWAGE TREATMENT AND DISPOSAL SYSTEMS". FAILURE TO REPAIR THE SYSTEM BY 03-03-93, MAY RESULT IN ENFORCEMENT ACTION BY THIS DEPARTMENT.

IF YOU HAVE QUESTIONS OR IF WE MAY BE OF FURTHER ASSISTANCE, PLEASE CONTACT THIS OFFICE AT 373-7613 BETWEEN THE HOURS OF 8:00 A.M. AND 10:00 A.M.

SINCERELY,


ENVIRONMENTAL HEALTH SPECIALIST

ENCLOSURE

CC: WATER QUALITY UNIT MANAGER
PROPERTY FILE

301 North Eugene Street
P.O. Box 3508
Greensboro, N. C. 27401

501 E. Green Dr.
High Point, N. C. 27260



GUILFORD COUNTY
DEPARTMENT OF PUBLIC HEALTH

DATE 12/21/92

CERTIFIED MAIL

Jesse Wyrick
4306 Hines Chapel Rd.
Greensboro, NC 27405

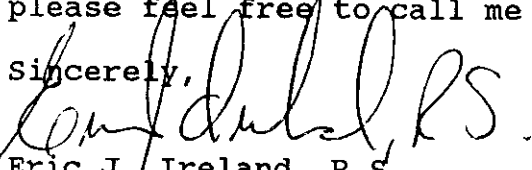
Dear Mr. Wyrick:

On Dec. 21, 1992 a malfunction of your septic tank system was observed on your property at 4306 Hines Chapel Rd.

In order for this office to further assess this situation, you are required to contact this office at 373-7613 within ten (10) days of receipt of this letter to arrange a meeting on the property.

If you have any questions or if I can be of any assistance to you, please feel free to call me at 373-7613.

Sincerely,


Eric J. Ireland, R.S.
Environmental Health Specialist

301 North Eugene Street
P.O. Box 3508
Greensboro, N. C. 27401

501 E. Green Dr.
High Point, N. C. 27260



GUILFORD COUNTY
DEPARTMENT OF PUBLIC HEALTH

DATE 05/22/92

CERTIFIED MAIL

Resident
4310 Hines Chapel Rd.
McLeansville, NC 27301

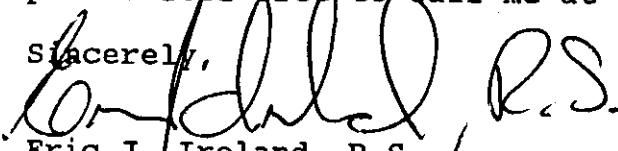
Dear Resident:

On May 18, 1992 a malfunction of your septic tank system was observed in the front of your property from Hines Chapel Rd.

In order for this office to further assess this situation, you are required to contact this office at 373-7613 within ten (10) days of receipt of this letter to arrange a meeting on the property.

If you have any questions or if I can be of any assistance to you, please feel free to call me at 373-7613.

Sincerely,


Eric J. Ireland, R.S.
Environmental Health Specialist

301 North Eugene Street
P.O. Box 3508
Greensboro, N. C. 27401

501 E. Green Dr.
High Point, N. C. 27260

Ken-ok
to send?
Ren



OK
to send
K. S.
4/3/91

GUILFORD COUNTY
DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH

April 3, 1991

CERTIFIED MAIL

Jesse Wyrick
4306 Hines Chapel Road
Greensboro, NC 27405

Dear Mr. Wyrick:

Thank you for speaking with me on your property at 4306 Hines Chapel Road on April 1, 1991 regarding the malfunctioning septic tank system serving that house. You will recall that Mr. Bob Falls met us on the property, and had the following recommendations:

- 1) The drainage of water from the house eavestrough drains must be diverted away from the septic tank field lines, and
- 2) The distribution of septic tank effluent within the drainfield must be adjusted to reduce the excessive pressure within the malfunctioning line.

This office believes this to be a prudent course of action. Please arrange for these recommendations to be carried out within thirty (30) days of the receipt of this notice. Please feel free to contact me at 373-7613 if you have any questions or if I may be of any assistance to you.

Sincerely,

Ronald D. Clise, R.S.
Environmental Health Specialist

301 North Eugene Street
P.O. Box 3508
Greensboro, N. C. 27401
Phone: (919) 373-3771

501 E. Green Dr.
High Point, N. C. 27260
Phone: (919) 884-7758



GUILFORD COUNTY
DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH

March 14, 1991

CERTIFIED MAIL

Jesse Wyrick
4306 Hines Chapel Road
Greensboro, NC 27405

Dear Sir:

On January 23, 1991 Repair Permit #1093, (enclosed), was issued to you requiring you to have your malfunctioning septic system repaired. Since that date, this office has been contacted by your septic tank contractor regarding the repair of the system.

It is the request of this office that you have your septic tank contractor meet a representative of this office at your house to determine if other alternatives are available to repair your on-site sewage disposal system. I must request that these arrangements be made by March 30, 1991.

If you have any further questions, or if I may be of assistance, please feel free to contact me at 373-7613.

Sincerely,

Ronald D. Clise, R.S.
Environmental Health Specialist

enclosure

301 North Eugene Street
P.O. Box 3508
Greensboro, N. C. 27401
Phone: (919) 373-3771

501 E. Green Dr.
High Point, N. C. 27260
Phone: (919) 884-7758



GUILFORD COUNTY
DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH

March 4, 1991

CERTIFIED MAIL

Jesse Wyrick
4306 Hines Chapel Road
Greensboro, NC 27405

Dear Sir:

On January 23, 1991 Repair Permit #1093 was issued to you requiring you to have your malfunctioning septic system repaired. ~~It has now been 30 days since the permit was issued and we have received no indication that the required repairs have been made.~~ By continuing to malfunction, your septic system creates a potential health hazard by discharging effluent into the environment. This discharge also constitutes a violation of both county and state regulations governing proper sewage disposal.

Since that date, this office has been contacted by your septic tank contractor regarding the repair of the system.

~~This is to advise you that an administrative penalty will begin thirty (30) days from the receipt of this notice. This penalty may amount to \$50.00 per day for each day thereafter.~~

It is the request of this office that you have you contact meet a representative of this office at your house and determine if other alternatives are available to repair your on-site sewage system. I would request that these arrangements be made by March 30, 1991.

~~It is the request of this Department that you make the necessary repairs as soon as possible. You will find enclosed a photocopy of the repair permit which details the nature of the repairs to be made.~~

If you have any further questions or if I can be of any assistance to you, please feel free to call me at 373-7613.

Sincerely,

Ronald D. Clise
Ronald D. Clise, R.S.
Environmental Health Specialist

enclosure

cc: Brian Greene
Larry A. Leach, MPS
Kenneth L. Carter, R.S.

301 North Eugene Street
P.O. Box 3508
Greensboro, N. C. 27401
Phone: (919) 373-3771

~~If case~~
The discharge of sewage effluent does present a public health nuisance and does require that the system be repaired. If the system is not repaired or alternative it could in the results of administrative penalty assessed against you
501 E. Green Dr.
High Point, N. C. 27260
Phone: (919) 884-7758



GUILFORD COUNTY
DEPARTMENT OF PUBLIC HEALTH

January 23, 1991

Jesse Wyrick
4306 Hines Chapel Road
Greensboro, NC 27405

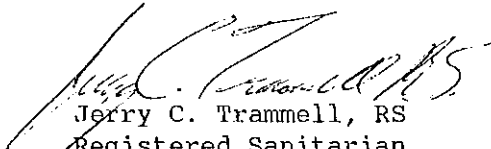
Dear Property Owner,

You will find enclosed a permit #001093 to make repairs to your malfunctioning septic system. A malfunctioning septic system poses a potential threat to public health by discharging effluent into the environment. Such discharge also represents a violation of both county and state regulations governing proper sewage disposal.

You are required to make the necessary repairs within 30 days as prescribed by Guilford County Board of Health Rules and Regulations Governing Design, Construction, Installation, Cleaning, Repairs and Use of Ground Absorption Sewage Treatment and Disposal Systems. Failure to do so may result in the assessment of an administrative penalty, for every day beyond the 30 day limit. This penalty may amount to \$50 per day for each day after the deadline indicated.

If you have any questions or if I can be of any further assistance to you, please feel free to call me at 373-7613.

Sincerely,


Jerry C. Trammell, RS
Registered Sanitarian

JCT/sf

Enclosure

cc: Kenneth L. Carter

301 North Eugene Street
P.O. Box 3508
Greensboro, N. C. 27401

501 E. Green Dr.
High Point, N. C. 27260

GUILFORD COUNTY
DIVISION OF ENVIRONMENTAL HEALTH

No. _____

DATE 1/24/91
RECEIVED RDC

ENVIRONMENTAL COMPLAINT
INVESTIGATION

SECTION _____
ASSIGNED _____

PROPERTY CONCERNED: 4306 Hines Chapel Rd.

LOCATION: _____

OWNER: _____ ADDRESS: _____

TENANT: _____ ADDRESS: _____

COMPLAINT: water leaking out of septic system to front - can be seen from road

REPORTED BY: Wouldn't leave name PHONE: _____

ADDRESS: _____

REMARKS: _____

INVESTIGATION REPORT: _____

ACTION TAKEN - Recommendations - Referrals: Site visit - still malfunctioning on last 2 lines. 3/4/91 JH

RESULTS: Follow-up visits - DATE: _____, DATE: _____, DATE: _____, DATE: _____

INVESTIGATION COMPLETED BY: _____ DATE: _____

COMPLAINANT CONTACTED BY: _____ DATE: _____

FINAL DISPOSITION: _____ CORRECTED / _____ ACTIVE / AUTHORIZED BY: _____ DATE: _____

GUILFORD COUNTY
DIVISION OF ENVIRONMENTAL HEALTH

No. _____

DATE 1-18-91
RECEIVED BAB

ENVIRONMENTAL COMPLAINT
INVESTIGATION

SECTION _____
ASSIGNED _____

PROPERTY CONCERNED: 4306 Hines Chapel Rd

LOCATION: 29N, TR Hicone, TR Hines Chapel, Lot
on Right

OWNER: _____ ADDRESS: _____

TENANT: _____ ADDRESS: _____

COMPLAINT: malfunctioning septic system in front yard

REPORTED BY: Anonymous PHONE: _____

ADDRESS: _____

REMARKS: _____

INVESTIGATION REPORT: _____

ACTION TAKEN - Recommendations - Referrals: _____

RESULTS: Follow-up visits - DATE: _____, DATE: _____, DATE: _____, DATE: _____

INVESTIGATION COMPLETED BY: _____ DATE: _____

COMPLAINANT CONTACTED BY: _____ DATE: _____

FINAL DISPOSITION: _____ CORRECTED / _____ ACTIVE / AUTHORIZED BY: _____ DATE: _____

30-3c

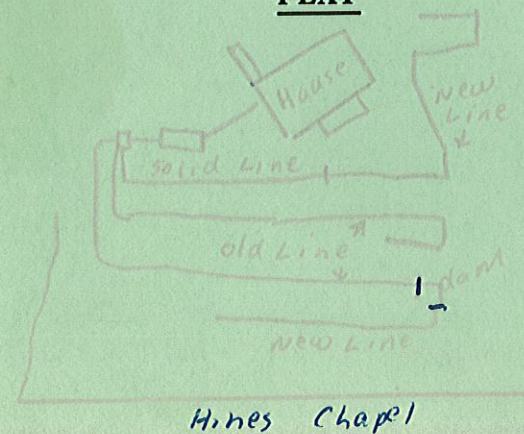
CERTIFICATE OF COMPLETION
GUILFORD COUNTY DEPARTMENT OF PUBLIC HEALTH
SEPTIC TANK INSPECTION CERTIFICATE

Repair

Name Wyck Lawrence - Rt 1 Box 622 - McLeansville Date August 17, 1977
Location 29 N - RR Hines - TL Hines Chapel Rd. - House on Rt. 1
before and beside Colons Grocery (Exxon) - 1 story frame
Installation Regrate Tank - add 200' to system Contractor Falls

Colons Grocery

PLAT



Remarks

Approved Disapproved

Michael S. Bennett
(Sanitarian)

Building Permit No. Repair

Health Department Permit No. 05010

Fees 2.00 30-30

IMPROVEMENTS PERMIT
 Guilford County Department of Public Health
 Septic Tank System

N^o 05010

Name Wyrick, Lawrence Address RT 1, Box 622 Mcmansville
 Property Location 29N, T/RT Hicone T/L Hines Chaple House on
Right B-4 Colons Exon
 Total fixtures: 6 Number of bedrooms: 2 Basement: Yes No Fixtures: Yes No
 Lot size: _____ Water supply: Well City
 New Mobile Home Addition REPAIR Garbage disposal: Yes No
 Above information certified by: A. Falls

Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval by the Health Director and compliance with local zoning and building regulations.

Size of tank: Renovate Existing System Conventional line: Add 200' to
 Siphon with block system line _____

Remarks: _____

Permit: Granted Denied Date: 8-10-77
 This permit expires one year from date of issue. Signed: Lacey R. Smith R.S.

- NEW HOUSE EXISTING HOUSE TRAILER 3 People
 REPAIR FINAL 2:30 PERK TEST H₂O SAMPLE COMPLAINTS 12 yrs old

NAME Wyrick, Lawrence PHONE # _____

MAILING ADDRESS RT 1, Box 622 Mcmansville DATE _____

LOT SIZE 100x150 DISHWASHER _____

BEDROOMS 2 DISPOSAL _____ FIXTURES: 1 1/2 Bath HOUSE _____

LOAN: FHA GI CONVENTIONAL BASEMENT _____

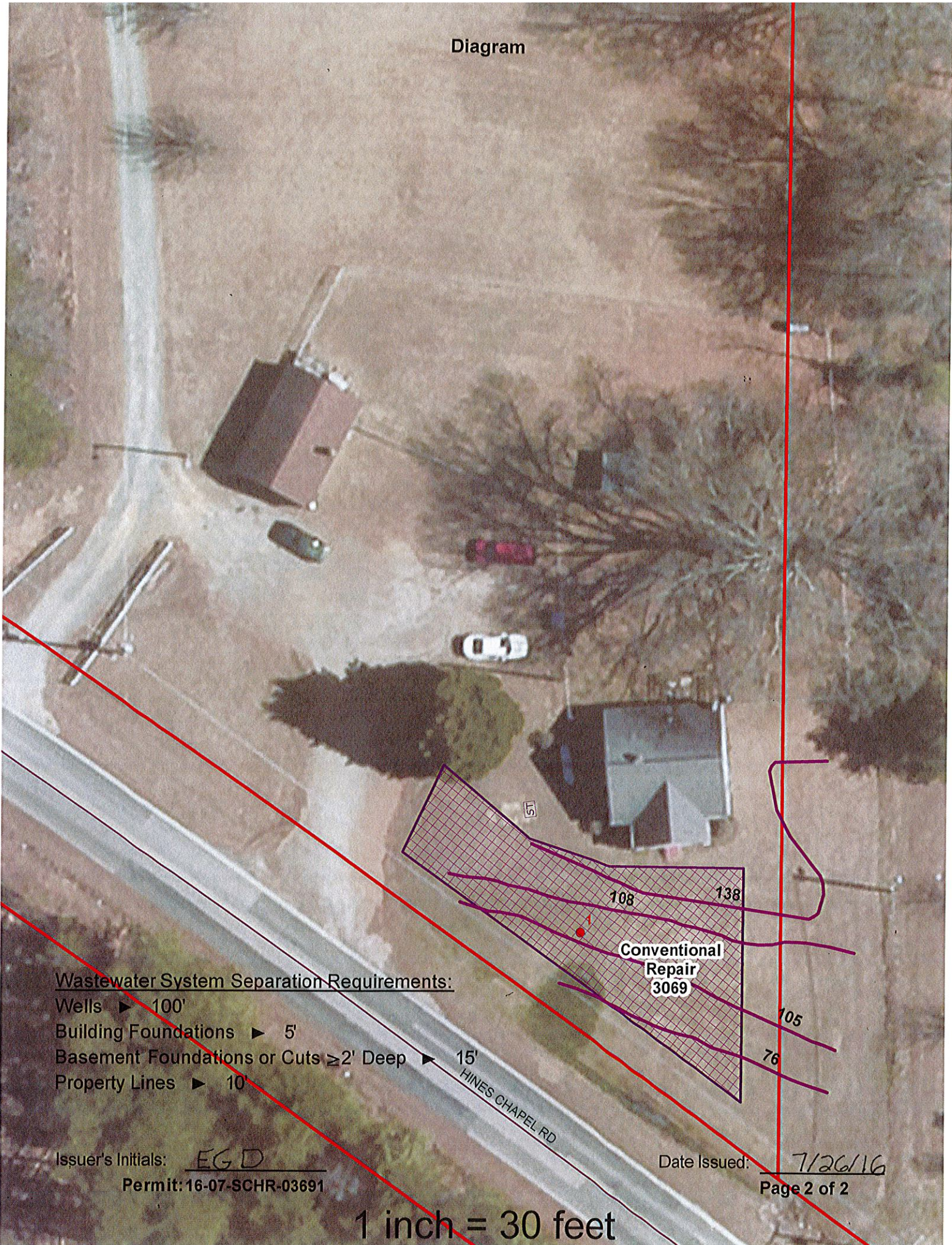
LOCATION: 29N, T/RT Hicone T/L Hines Chaple Co to Colons Exon on RT

FINAL _____ PERMIT NO. _____ TANK SIZE _____ LINE _____

REMARKS:

18-469

Diagram



Wastewater System Separation Requirements:

- Wells ▶ 100'
- Building Foundations ▶ 5'
- Basement Foundations or Cuts $\geq 2'$ Deep ▶ 15'
- Property Lines ▶ 10'

Issuer's Initials: EGD
Permit: 16-07-SCHR-03691

Date Issued: 7/26/16
Page 2 of 2

1 inch = 30 feet

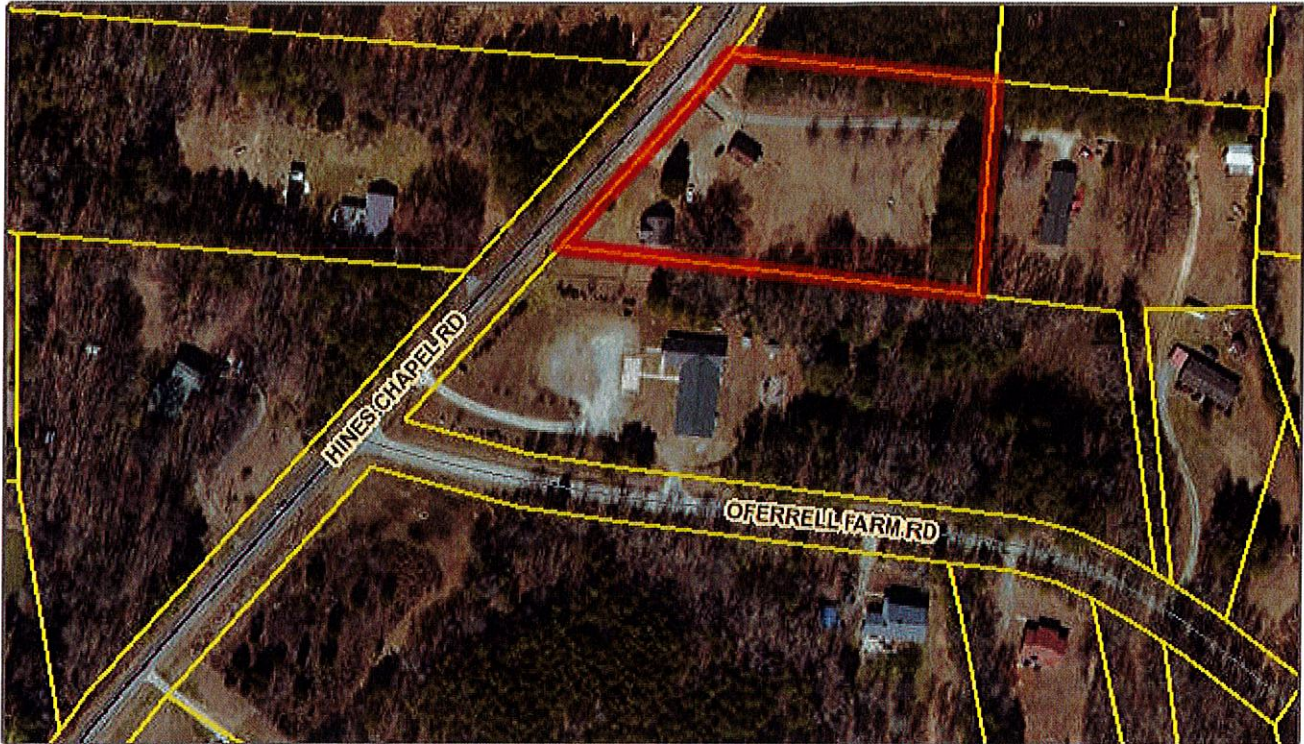
Guilford County, NC



Disclaimer: While every effort is made to keep information provided over the internet accurate and up-to-date, Guilford County does not certify the authenticity or accuracy of such information. No warranties, express or implied, are provided for the records and/or mapping data herein, or for their use or interpretation by the User.

Map Scale
1 inch = 50 feet
3/30/2016

Guilford County, NC



Parcel Number	0113696	Total Land Value	\$30,000
PIN	7897794282	Total Deferred Value	\$0
Owner	KING, CHRISTINA EDMONDS	Bldg Card	1
Mail Address	4919 OFERRELL FARM RD	Appraisal Model Code	SFR
Mail City	MCLEANSVILLE	Deed Date	2/5/2002
Mail State	NC	Neighborhood	7897A01
Mail Zip	27301	Property Type	RESIDENTIAL
Property Address	4306 HINES CHAPEL RD	Structure Size	1119
Legal Description	2.19 AC WYRICK 5433-412	Lot Size	2.19
Deed	005436-00171	Year Built	1946
Plat	0	Bedrooms	2
Condo	0	Bathrooms	1
Total Assessed Value	\$76,900	Grade	C 100%
Total Building Value	\$44,300	ShortParcel ID	113696
Total Out Building Value	\$2,600		

Disclaimer: While every effort is made to keep information provided over the internet accurate and up-to-date, Guilford County does not certify the authenticity or accuracy of such information. No warranties, express or implied, are provided for the records and/or mapping data herein, or for their use or interpretation by the User.

Map Scale
1 inch = 212 feet
 3/30/2016

Malfunction - To front!!