

MEMORANDUM

To: Zoning Board of Appeals

From: Kariline P. Littlebear, Zoning Administrator

Date: May 21, 2025 Re: ZBA25-10

> 3569 Woodland Dr 11-12-407-014

Applicant: Black Wolf Custom Builders - Brian Slating

Owner: Thomas Cullen

The subject parcel is zoned LV – Lake and Village Single-Family Residential District. The total parcel size is approximately 0.336 acres with approximately 0.234 acres of land not underwater (~10,200 sq ft).

The required setbacks for this parcel are as follows:

Front yard (from property line not road edge): 34 ft

Ordinary High-water mark: 37 ft

Side yards: 10 ft minimum for the smallest side yard with a total of 30 ft minimum when both side yards are added together.

This variance request is for a 19-foot variance from the calculated 34-foot front yard setback to 15-feet provided for the construction of a covered front porch, a 16-foot variance from the calculated 34-foot front yard setback to 18-feet provided for the renovation of the existing residence and for the construction of a second story addition, and a 15-foot 6-inch variance from the calculated 37-foot ordinary high-water mark setback to 21-feet 6-inches provided for the renovation of the existing residence and for the construction of a second story addition and rear deck. This request is for a variance from Section 9.02.B.a. and 9.02.D. of the Zoning Ordinance.

For the variance request, the applicant has provided a scaled site plan, construction drawings, and well and septic information. Staff has supplied assessing records, a zoning map, aerial approximations of the property, and Section 9.02. of the Zoning Ordinance.

Case # 25-10

NOTARY PUBLIC - STATE OF MICHIGAN COUNTY OF GENESEE My Commission Expires 11/30/2029 Acting in the County of <u>Oakland</u> Hearing Date 5/21/25

CHARTER TOWNSHIP OF HIGHLAND ZONING BOARD OF APPEALS APPLICATION FOR APPEAL

APPLICANT	OWNER			
NAME: Black Wolf Custom Builders	NAME: Thomas Culler			
	1100 0101101			
1-1	ADDICESS. 100 TOTAL TOTAL			
Fenton MI 48430	Milford MI 48381			
PHONE: 248-400-9358	PHONE: 248.249.0654			
EMAIL: blackwolfbuilders Cognail.	EMAIL:			
PROPERTY ADDRESS: 3569 Woodland	DY.			
THOTERT THE NO.	12-407-014			
ORDINANCE SECTIONS BEING APPEALED: 9.02.B.	a., 9.02.D.			
variances requested: 19'Variance From 16'Variance From 34'Front to 18' 6" variance From 37' high-water	34 Front to 15 For Front por			
16'variance From 34' Front to 18	'For reno and 2nd Stony,			
6 variance From 37 high-water	to 21'6" provided for the			
reno, second story, and	rear deck			
	adding an addition - 2nd stong			
only: Current home already out				
to top agraphy, water table being canel front & engineered septic				
in places and when current home	was constructed being before			
Volinoince changes) 50100			
I certify that all required information is shown on the attached plan and i am granting the right of the Zoning Board of appeals members, insperproperty. All statements are true to the best of my knowledge.	ncluded on this form. I acknowledge that by signing this application, I ectors and administrators to conduct a site inspection of the subject			
SIGNATURE OF OWNER: Junifer Child	DATE: 4/11/25			
SIGNATURE OF APPLICANT:	DATE: 4-11-25			
Signature of applicant must be no	otakized.			
Subscribed and sworn to before me this	APPLICATION FEE: 275			
day of April ,20,25	Receipt#106239 bate Paid 4/11/25			
Wendy Warten (Notary Public	Received by			
My Commission expires 113012029 Wendy Maertens	Form revised 12/21/2015			
NOTARY PUBLIC - STATE OF MICHIGAN	S:\Planning Department New Folder\Zoning Board of Appeals\forms\ZBA Application form			

CHARTER TOWNSHIP OF HIGHLAND ZONING BOARD OF APPEALS WORKSHEET

The worksheet is designed to help you understand the appeal process and to help you submit a complete application for review by the Zoning Board of Appeals. If you have any questions after reading this worksheet you may contact the Planning and Zoning Department for assistance.

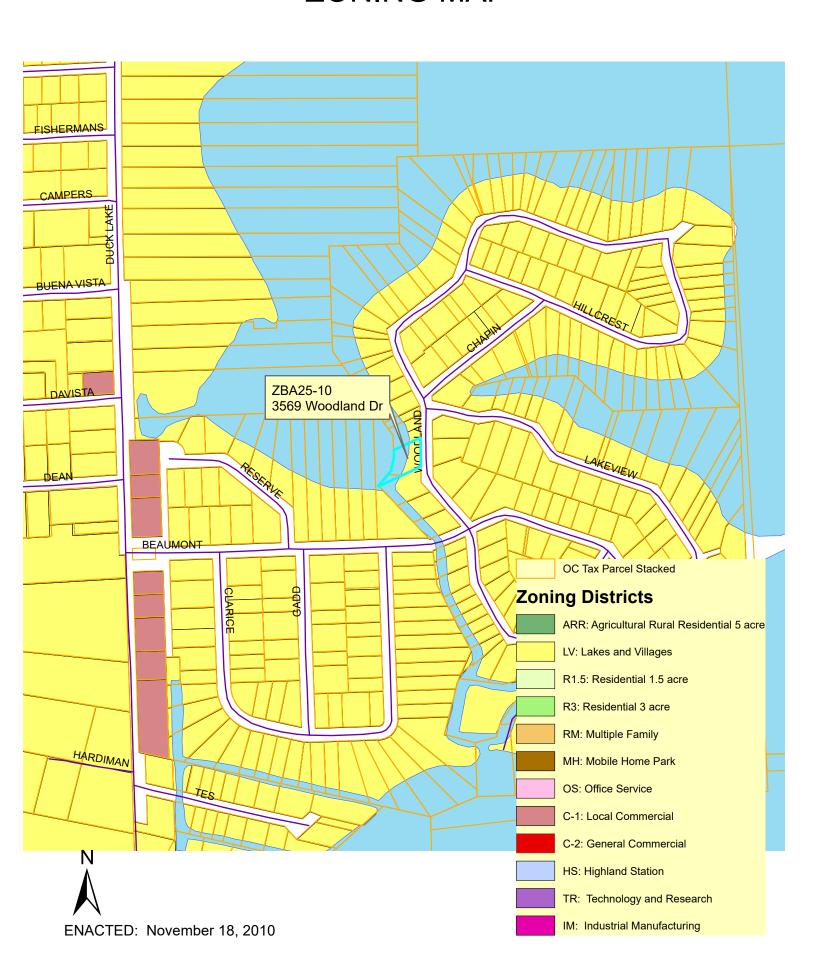
HAVE YOU MET ALL OF THE FOLLOWING CRITERIA?

1)	Do the characteristics of the property include exceptional narrowness, shallowness, smallness, irregular shape, topography, vegetation or other similar characteristics? If so, please describe here.
	Yes, Lot is exceptionally shallow, part of which is submurged
	under water by the canal. Engineered septic field done in 2009
	takes up the west postion of lot.
2)	Can the project be redesigned to meet the zoning requirements without the need for a variance?
	No. Original home was built prior to current
	No. Original home was built prior to current set backs/requirements, therefore is already against
	Current variance requirements. Addition requested
	will be a second story, not expanding outward.
3)	Is the reason for a variance request of a personal nature? (for example: financial impact, physical and/or mental characteristics of the household members, inconvenience, etc.)
	No

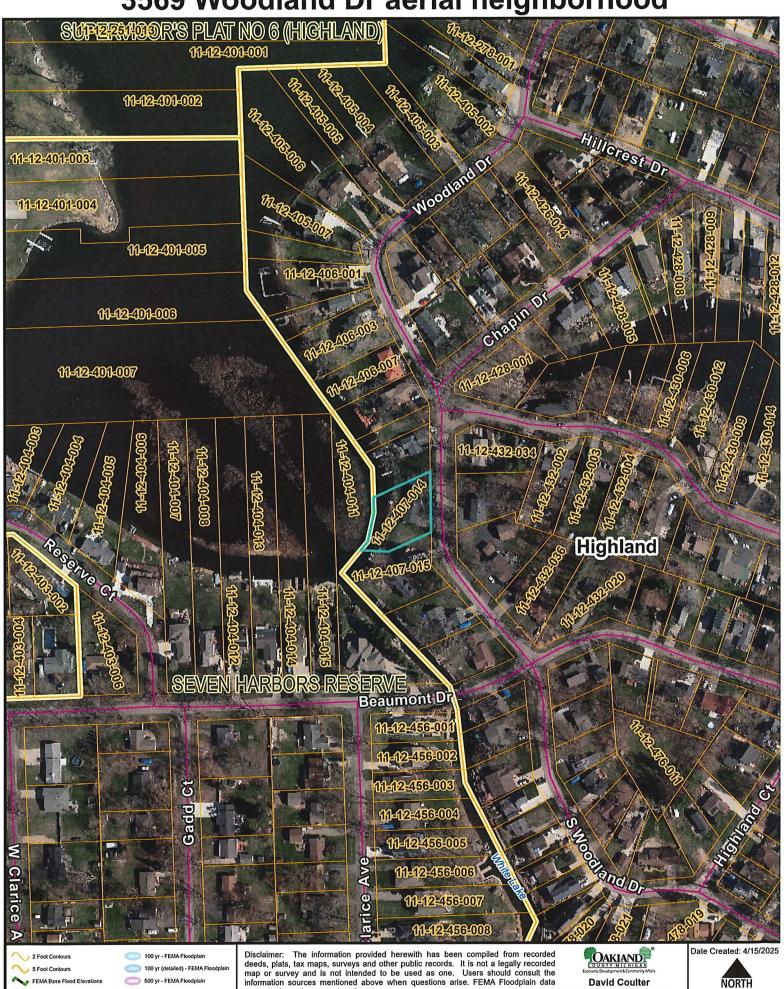
Will the p which the	roposed variance be harmful to or alter the essential character of the area in property is located?
No	
Will the p	roposed variance be the minimum necessary?
Ves.	

Signature

CHARTER TOWNSHIP OF HIGHLAND ZONING MAP



3569 Woodland Dr aerial neighborhood

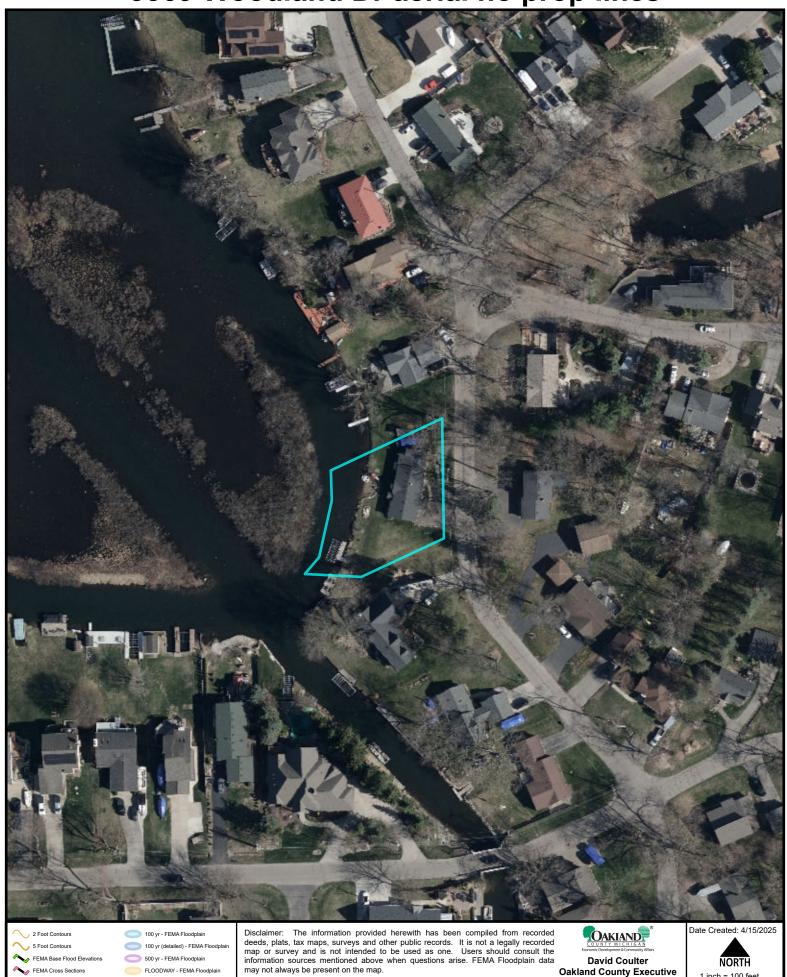


may not always be present on the map.

FEMA Cross Sections

Oakland County Executive

3569 Woodland Dr aerial no prop lines



3569 Woodland Dr



Final Sketch PIN 11-12-407-014

Legend

GPS Well

GPS Septic Tanks

Septic Lid

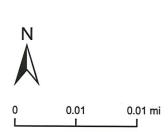
Alternative Treatment Unit

GPS Septic Field

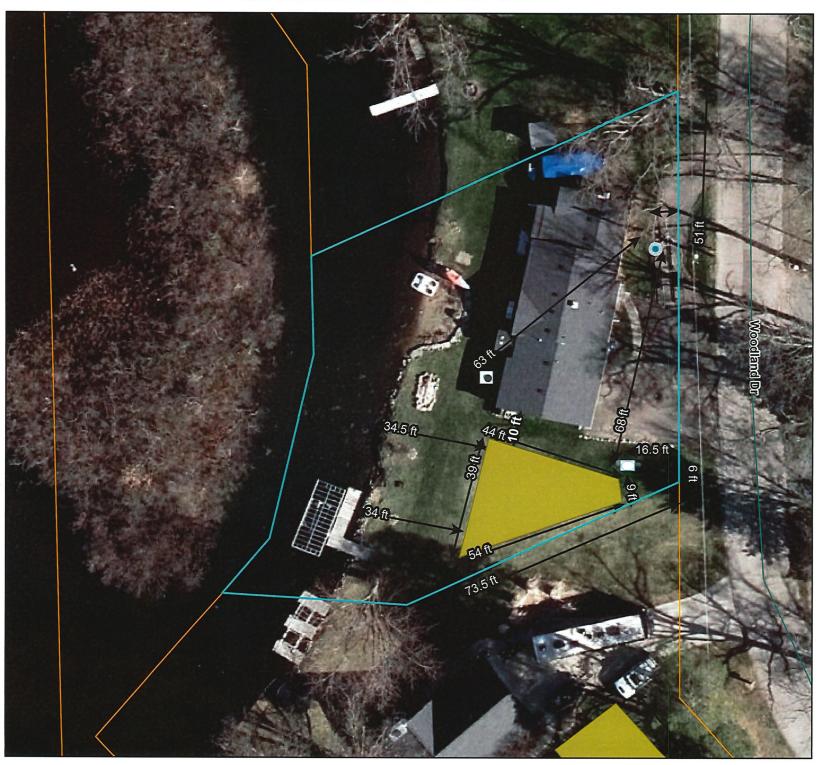
Dimension Line - Applicant

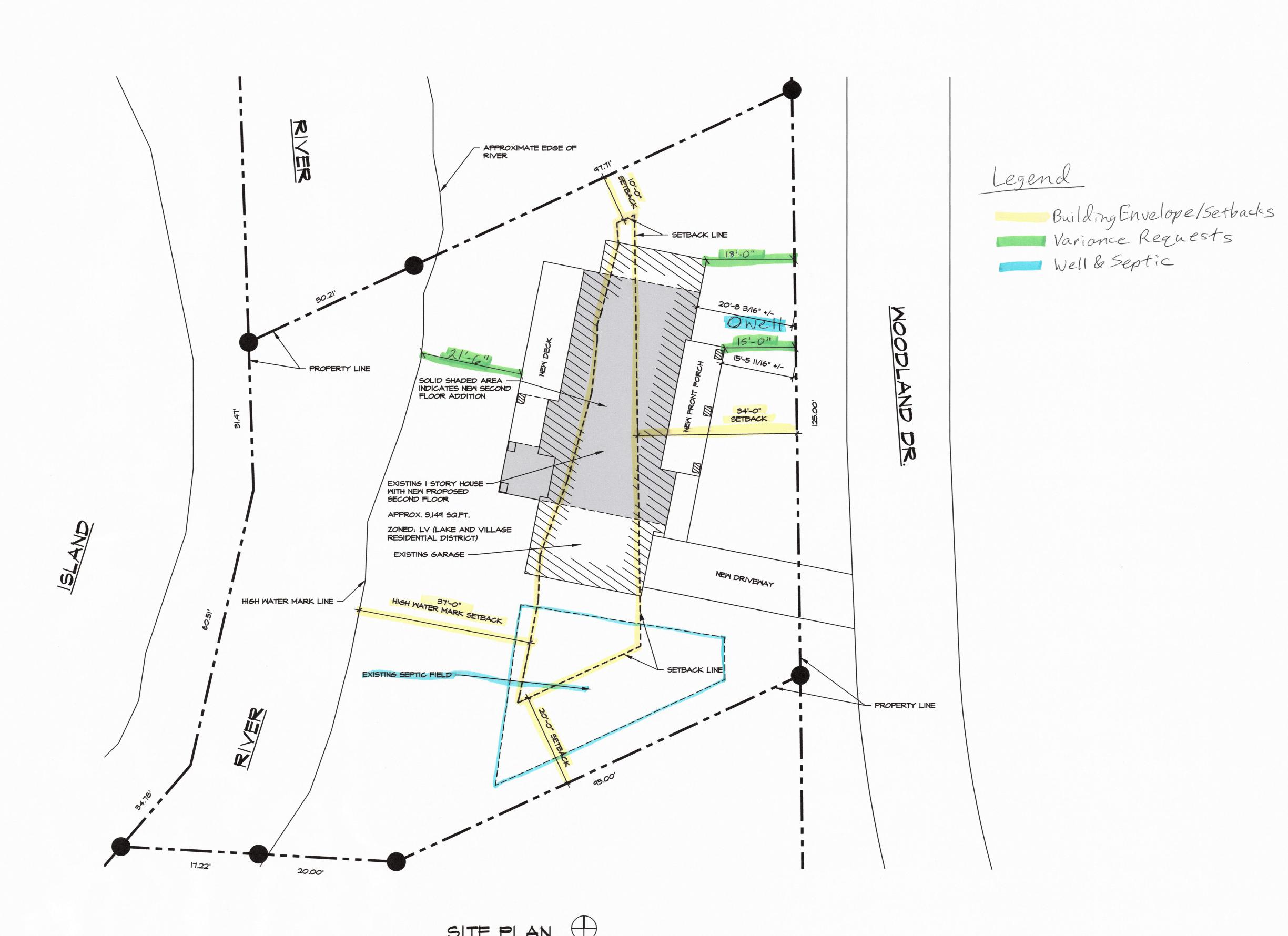
Dimension Line - Final

OC Tax Parcel



Oakland County Health Division Oakland County, MI 3/11/2025, 2:36:21 PM







7300 DIXIE HWY. #600 CLARKSTON, MI 48346 PHONE 248.605.2030 FAX 248.605.2030 WEB DSARCHITECTS.COM

Seal

Project GELEN RESIDENCE

Drawing Title

SITE PLAN

Project Number **24-208**

Checked DJS

Scale 3/32" = 1'-0"

Dwg. CULLEN RESIDENCE

OWNER REVIEW 3-20-25 DJS
OWNER REVIEW 4-14-25 DJS
OWNER REVIEW 4-21-25 DJS

Sheet Number

SIT

of

CULLEN RESIDENCE

3596 WOODLAND DR. HIGHLAND CHARTER TWP. MI 48356

DRAWING INDEX

6-001	COVER	SHEET

G-002 FOUNDATION AND WALL CONSTRUCTION CODE REQUIREMENTS

G-003 ROOF FRAMING CODE REQUIREMENTS

G-004 ROOF, ADHERED MASONRY VENEER, ACCESS HATCHES AND DOOR CODE REQUIREMENTS

A-101 FOUNDATION PLAN

A-102 FIRST FLOOR - FLOOR PLAN, FIRST FLOOR - FLOOR FRAMING PLAN

A-103 SECOND FLOOR - FLOOR PLAN SECOND FLOOR - FLOOR FRAMING PLAN

A-104 FIRST FLOOR - ROOF FRAMING PLAN

SECOND FLOOR - ROOF FRAMING PLAN

A-105 ROOF PLAN

A-201 ELEVATIONS

A-202 ELEVATIONS

A-301 BUILDING SECTIONS

A-401 WALL SECTIONS

GLIVLI	TAL CONCINCTION LEGEND
INTERIOR	INTERIOR WALLS ARE 2X4 WOOD STUDS AT 16" O.C. WITH 1/2" GYPSUM BOARD EACH SIDE.
EXTERIOR	EXTERIOR WALLS ARE EXISTING 2X4 STUD WALL BEING PACKED OUT NEW 2X WOOD STUDS AT EACH STUD, SILL PLATE AND TOP PLATES TO HAVE A NEW 5 1/2" STUD CAVITY FOR NEW R-21 MIN. BATT. INSULATION. EXTERIOR SIDE OF STUDS TO HAVE 1/16" EXTERIOR SHEATHING, WEATHER BARRIER AND FINISHED SIDING. ON THE INTERIOR SIDE OF STUDS TO HAVE 1/2" GYPSUM BOARD.
GARAGE	EXTERIOR WALLS ARE EXISTING 2X4 STUD WALL BEING PACKED OUT NEW 2X WOOD STUDS AT EACH STUD, SILL PLATE AND TOP PLATES TO HAVE A NEW 5 1/2" STUD CAVITY FOR NEW R-21 MIN. BATT. INSULATION. EXTERIOR SIDE OF STUDS TO HAVE 1/16" EXTERIOR SHEATHING, WEATHER BARRIER AND FINISHED SIDING. ON THE INTERIOR SIDE OF STUDS TO HAVE 1/2" GYPSUM BOARD.
INTERIOR BEARING WALL	INTERIOR BEARING WALL ARE 2X6 WOOD STUDS AT 16" O.C. WITH 1/2" GYPSUM BOARD EACH SIDE.

GENERAL CONSTRUCTION LEGEND

ARCHITECT

DS ARCHITECTS, INC.
ATTN.: DEREK SLUPKA
1300 DIXIE HMY., SUITE 600
CLARKSTON, MI 48346
PHONE: I-248-605-2030
FAX: I-248-605-2030
CELL: I-248-310-3899
EMAIL: DEREK@DSARCHITECTS.COM

CONTRACTOR

BLACK WOLF CUSTOM BUILDERS ATTN.: BRIAN SLATING HIGHLAND, MI CELL: 1-248-600-9358 EMAIL: BLACKWOLFBUILDERS@GMAIL.COM

OWNER

JENNY CULLEN 3596 WOODLAND RD. HIGHLAND CHARTER TWP. MI 48356

SQUARE FOOTAGE

FIRST FLOOR = 1,328 S.F. GARAGE = 395 S.F. SECOND FLOOR = 1,426 S.F. TOTAL S.F. = 3,149 S.F.

FOUNDATION NOTES

FLOOR LOADS

LIVING AREAS

DEAD LOAD: 20 PSF LIVE LOAD: 40 PSF

SLEEPING AREAS

DEAD LOAD: 20 PSF

LIVE LOAD: 30 PSF

- I. THE MINIMUM ALLOWABLE SOIL BEARING VALUE IS 2,500 PSI FOR FOOTINGS.
- 2. THE MINIMUM FROST LINE DEPTH IS 42" DEPTH. VERIFY ALL LOCAL REQUIREMENTS.
 3. BACKFILL SHALL BE COMPLETED WITH CLEAN FILL FREE OF DEBRIS, ORGANIC MATTER AND
- 4. FINAL GRADE SHALL BE MINIMUM 8" BELOW FINISHED SIDING WITH A 6" FALL WITHIN THE FIRST 10' FROM THE FOUNDATION OR 5%. 2% MINIMUM SLOPE WHEN GREATER THAN 10' FROM FOUNDATION.
 5. TREATED LUMBER TO BE USED FOR ALL WOOD IN CONTACT WITH CONCRETE INCLUDING MUDSILL.

CODE INFORMATION AND DESIGN LOADS

ROOF LOADS

WIND LOADS:

EXPOSURE= D

DEAD LOAD: 20 PSF

SNOW LOAD: 25 PSF

3 SECONDS GUST WIND SPEED

6. VERIFY AND PROVIDE REQUIRED SLEEVES FOR MECHANICAL, ELECTRICAL AND PLUMBING.

CONCRETE NOTES

BUILDING CODE: 2015 MICHIGAN RESIDENTIAL CODE

- ALL CONCRETE SHALL BE DESIGNED AND TESTED AS OUTLINED IN THE ACI SPECIFICATIONS.
 ALL FOOTING CONCRETE; MIN. 3,000 PSI COMP. STRENGTH AT 28 DAYS. 6" MAX. SLUMP, AGGREGATE - 1 1/2" MINUS. NOT LESS THAN 3/4".
- 3. ALL SLAB CONCRETE; MIN. 3,000 PSI COMP. STRENGTH AT 28 DAYS. 6" MAX. SLUMP, AGGREGATE 3/4" MINUS, 5% AIR ENTRAINING ON ALL GARAGE FLOORS, STOOPS AND SIDEWALKS.
- 4. ALL WALL CONCRETE; MIN. 3,000 PSI COMP. STRENGTH AT 28 DAYS. 6" MAX. SLUMP, AGGREGATE
 3/4" MINUS, 5% AIR ENTRAINING ON ALL WALLS.
 5. MAINTAIN SUBGRADE AND FILL MOISTURE CONTENT UNTIL FOUNDATIONS ARE PLACED.
- 6. DO NOT PLACE FOOTINGS OR SLABS AGAINST SUBGRADE CONTAINING FREE WATER, FROST OR ICE.
- MAINTAIN PROPER SITE DRAINAGE DURING CONSTRUCTION TO ENSURE SURFACE RUNOFF AWAY
 FROM STRUCTURES AND TO PREVENT PONDING F SURFACE RUNOFF NEAR THE STRUCTURES.
 MAINTAIN THE FOLLOWING CONCRETE COVERAGE FOR REINFORCING STEEL UNLESS OTHERWISE
- 8.1. CONCRETE CAST AGAINST EARTH: 3 INCHES 8.2. CONCRETE EXPOSED TO WEATHER

NO. 6 AND LARGER: 2 INCHES

NO. 5 AND SMALLER: 1 1/2 INCHES.

8.3. CONCRETE NOT EXPOSED TO WEATHER OR IN CONTACT WITH THE GROUND: SLABS AND WALLS

NO. 14 AND NO. 18: 1 1/2 INCHES NO. 11 AND SMALLER: 3/4 INCHES

NO. II AND SMALLER: 3/4 INCHES

9. CONCRETE SHALL HAVE THE INDICATED VALUES MINIMUM:
FOOTINGS
5,000 PSI
FOUNDATION WALLS
5,000 PSI
FLOOR SLABS
3,000 PS

LUMBER NOTES

- LATERAL SUPPORT OF BEAMS IS REQUIRED AT BEARING LOCATIONS.
- 2. ALL FLOOR JOISTS AND FLOOR TRUSSES SHALL ALIGN OVER WALL STUD.
 3. ALL LYLS TO BE INSTALLED PER MANUFACTURER'S RECOMMENDATION.
- 4. ALL PARALLAM COLUMNS TO BE INSTALLED PER MANUFACTURER'S RECOMMENDATION.
- 5. SEE LVL MANUFACTURER'S REQUIREMENTS FOR MULTIPLE PLY LVLS FASTENERS.
 6. SEE CONNECTOR MANUFACTURER'S REQUIREMENTS FOR SIZE AND NUMBER OF FASTENERS.
- 6. SEE CONNECTOR MANUFACTURER'S REQUIREMENTS FOR SIZE AND NUMBER OF FASTENERS.
- 7. ALL STUDS SHALL BE 'DOUGLAS FIR LARCH' #3 OR BETTER. 8. ALL JOISTS HANGERS BY 'SIMPSON STRONG-TIE' OR EQUAL.
- 8. ALL JOISTS HANGERS BY 'SIMPSON STRONG-TIE' OR EQUAL.
 9. LAMINATED VENEER LUMBER SHALL PROVIDE VALUES EQUAL TO OR EXCEEDING THE FOLLOWING:

Fb = 2,600 PSI, Fv = 285 PSI, E= 1,800,000 PSI

STAIR / HANDRAIL NOTES

- I. STAIRS: 8 1/4" MAX. RISER. 9" MIN. TREAD W / I" MIN. NOSING.
- 2. HANDRAIL GRIP SIZE: HANDRAILS WITH A CIRCULAR CROSS SECTION SHALL HAVE AN OUTSIDE DIAMETER OF AT LEAST I 1/4" AND NOT GREATER THAN 2". IF THE HANDRAIL IS NOT CIRCULAR IT SHALL HAVE A PERIMETER DIMENSION OF AT LEAST 4" AND NOT GREATER THAN 6 1/4" WITH A MAXIMUM CROSS SECTION DIMENSION OF 2 1/4".
- 3. HANDRAIL HEIGHT, MEASURED VERTICALLY FROM THE SLOPED PLANE ADJOINING THE TREAD NOSING, SHALL NOT BE LESS THAN 34 INCHES AND NOT MORE THAN 38 INCHES.

MISC. NOTES

- PROVIDE THE FOLLOW MINIMUM INSULATION R VALUES
- .l. ROOF: R-38
- I.2. WALLS: R-21 I.3. CRAWL SPACE WALLS: R-13 PLUS R-5 MIN. RIGID
- I.4. CONCRETE SLAB: R-IO FOR 2" DEPTHI.5. FENESTRATION U-FACTORS: 0.32 OR LOWER
- 2. ALL INTERIOR PREHUNG DOORS TO BE OFFSET 3" FROM INSIDE OF CORNERS OF A ROOM TO START OF DOOR OPENING UNLESS OTHERWISE NOTED BY DIMENSIONS.
- 3. HOUSEWRAP TO BE USED AS EXTERIOR WIND WALL BARRIER AND SHALL BE CONTINUOUS TO THE UNDERSIDE OF THE RAFTER OR TRUSS TOP CHORD. ALL SEAMS MUST BE SEALED. ALL EXTERIOR WALL SHEATHING PENETRATIONS MUST BE SEALED.
- 4. ALL INTERIOR AND EXTERIOR PREHUNG DOORS TO BE 6'-8" A.F.F., UNLESS OTHERWISE NOTED.
 5. ALL WINDOW AND DOOR HEADERS TO BE (2) 2X6 HEADERS, UNLESS NOTED OTHERWISE.



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N RESIDENCE

Drawing Title

COVER SHEET

Checked

Project Number **24-208**

wn KJM

cale N/A

Dwg. CULLEN RESIDENCE

DJS

Date By
OWNER REVIEW 2-11-25 DJS
PERMIT 2-18-25 DJS
PERMIT 3-11-25 DJS

Sheet Number

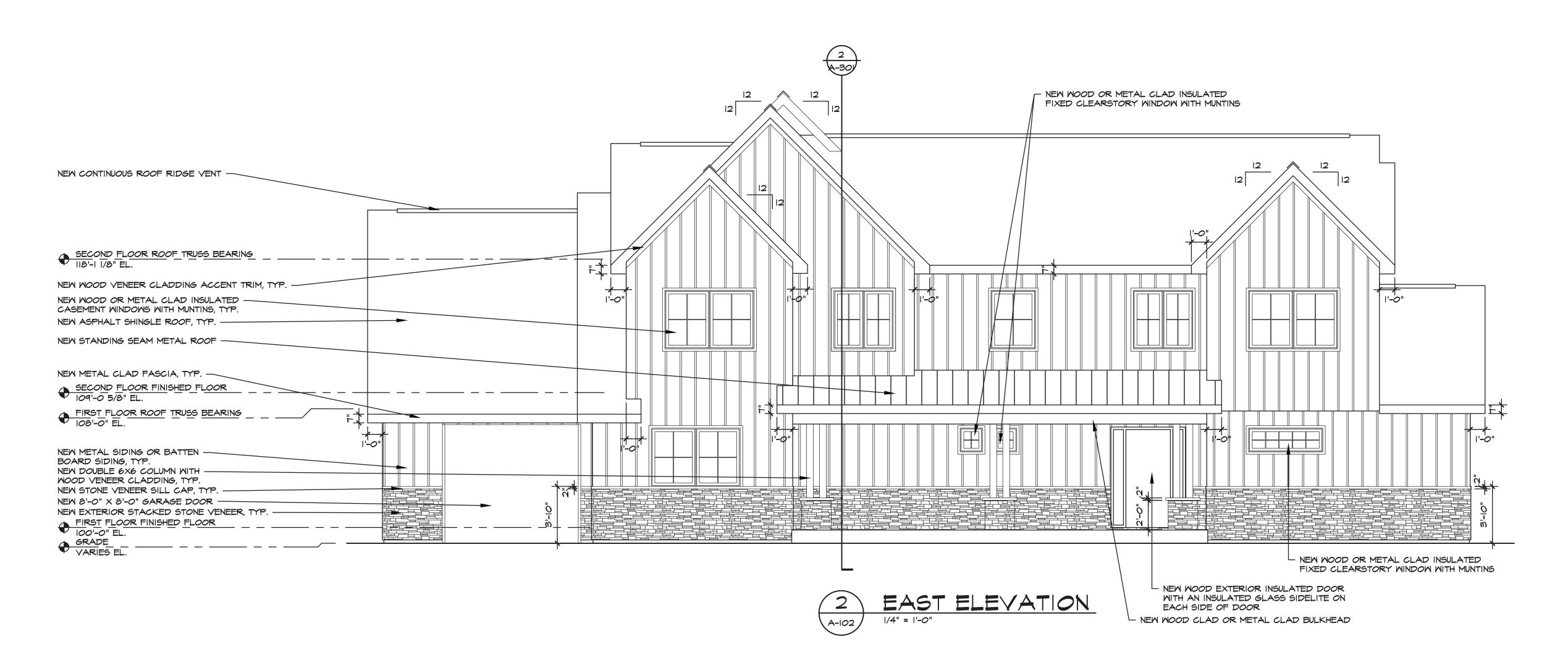
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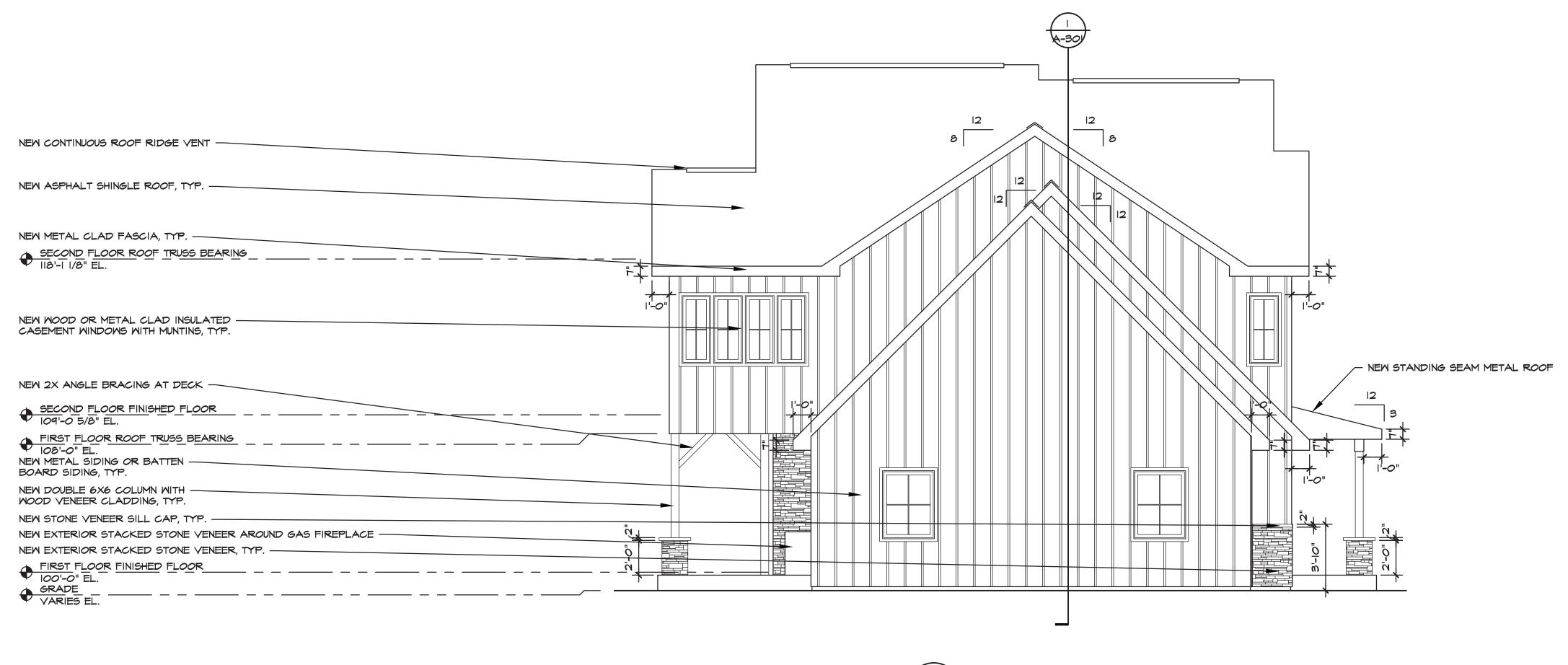
13

CULLEN RESIDENCE RENDERINGS











Drawing Title
ELEVATIONS

Project Number **24-208**

n KJM

Checked

ale 1/4" = 1'-0"

Dwg. CULLEN RESIDENCE

Issued for Date By

OWNER REVIEW 2-11-25 DJS

PERMIT 2-18-25 DJS

PERMIT 3-11-25 DJS

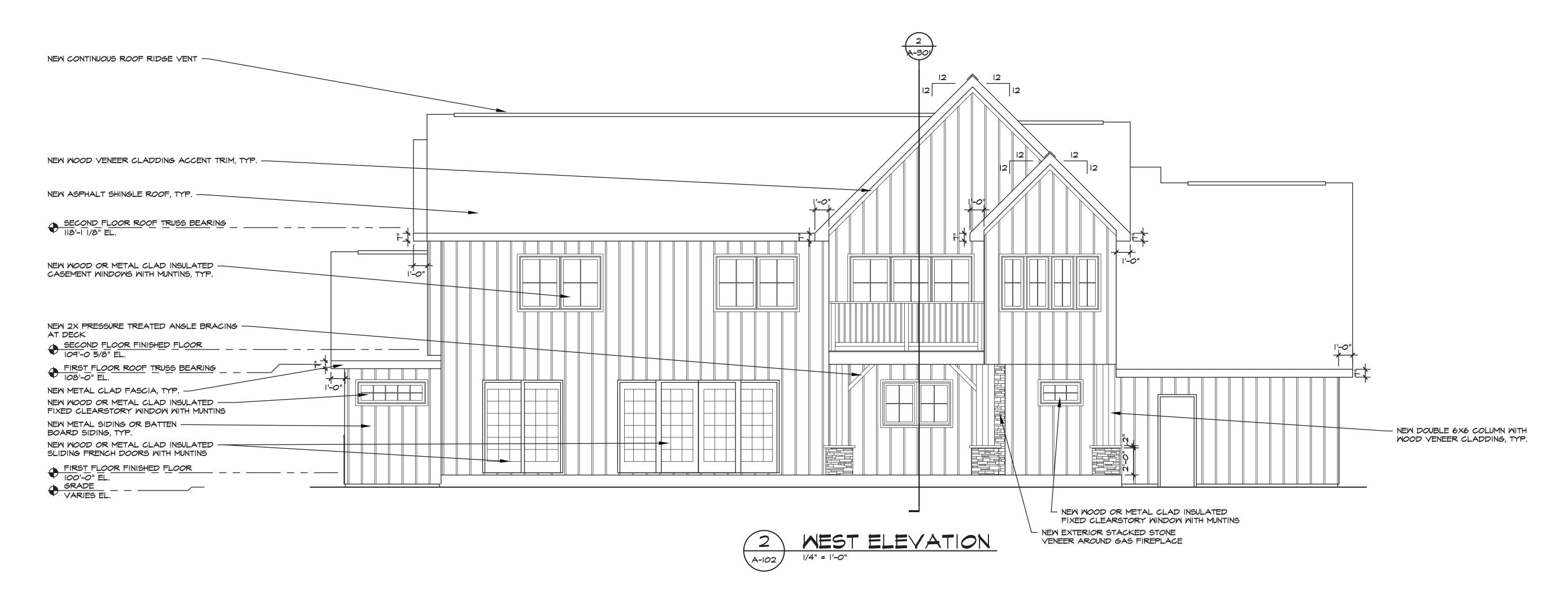
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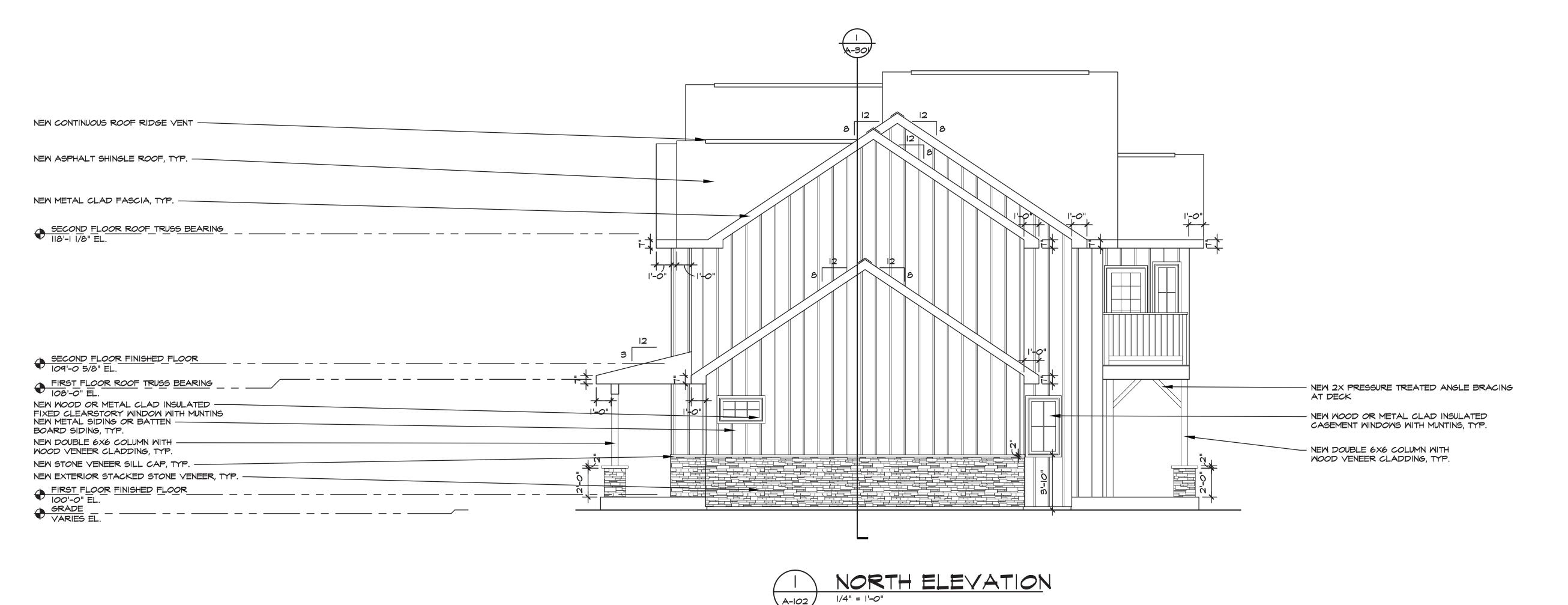
A-201

13

SOUTH ELEVATION

| SOUTH ELEVATION





\ A-102



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SIDENCE

Drawing Title ELEVATIONS

Project Number

KJM

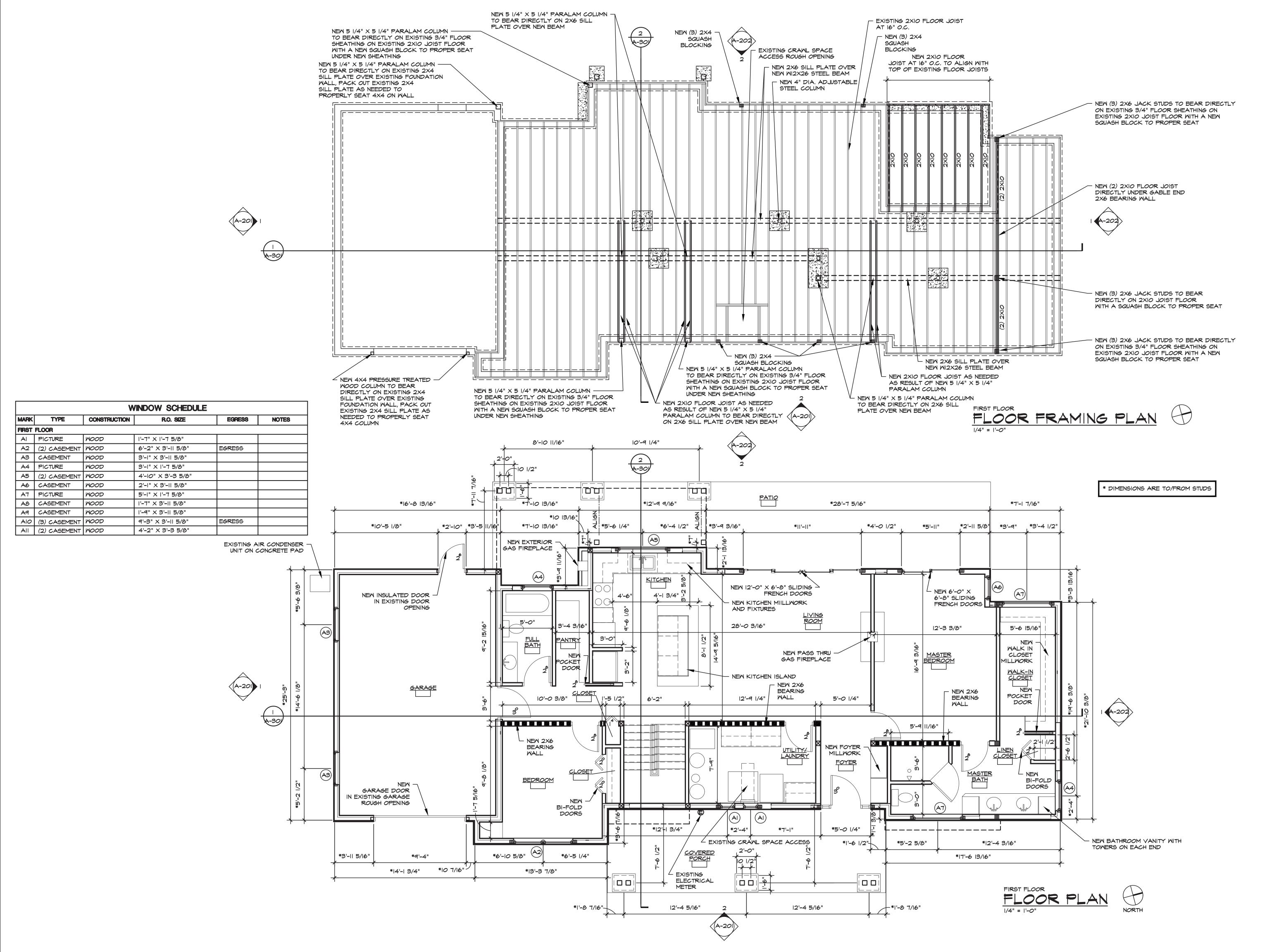
24-208

1/4" = 1'-0"

Dwg. CULLEN RESIDENCE

OWNER REVIEW 2-11-25 DJ: PERMIT 2-18-25 DJ 3-11-25 DJS

Sheet Number **A-202**





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Seal

GULLEN RESIDENCE

Drawing Title

FIRST FLOOR - FLOOR PLAN FIRST FLOOR - FLOOR FRAMING PLAN

Project Number

24-208

Checked DJS

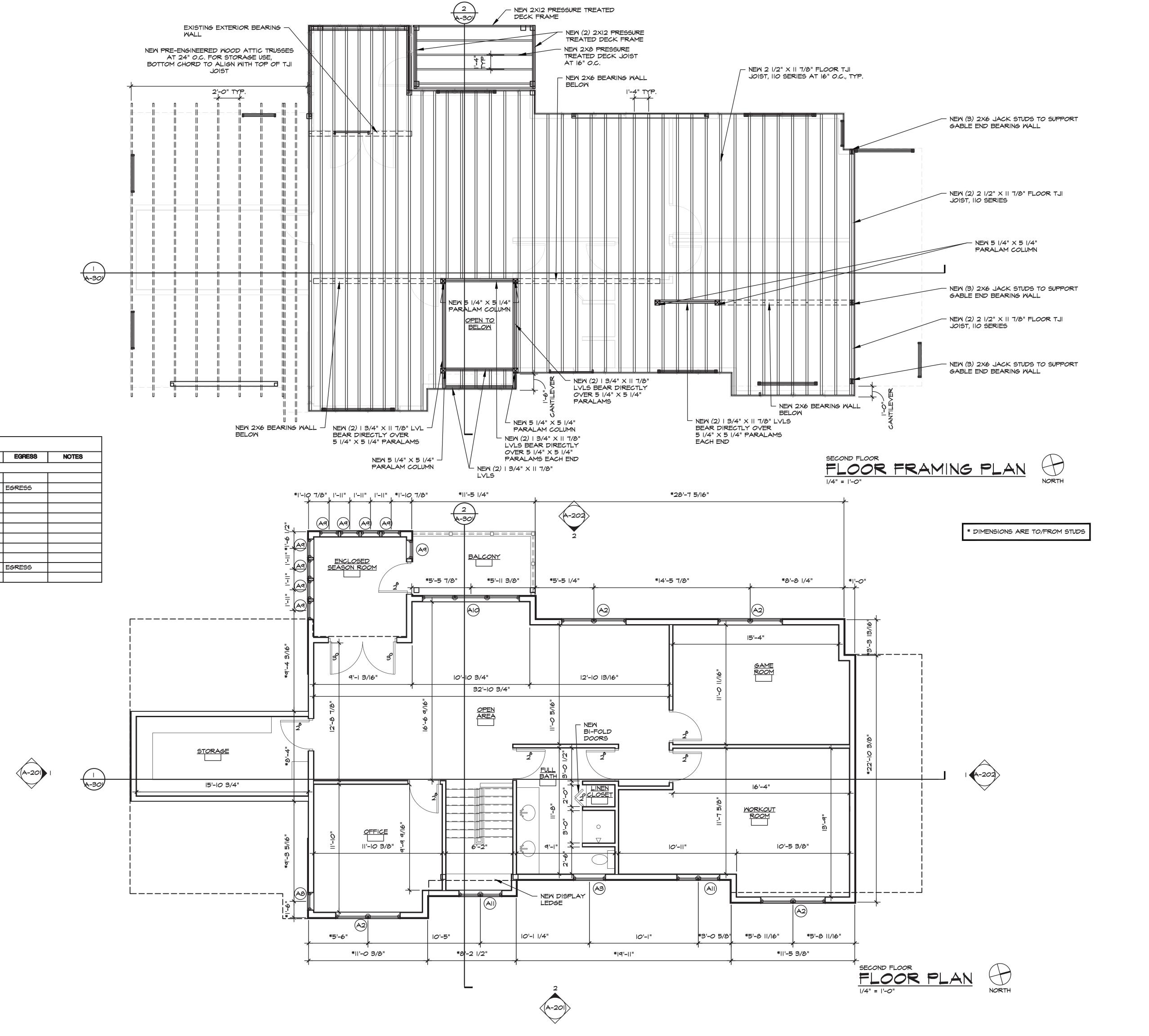
1/4" = 1'-0"

Dwg.
CULLEN RESIDENCE
Issued for Date By

OWNER REVIEW 2-11-25 DJS
PERMIT 2-18-25 DJS
PERMIT 3-11-25 DJS

Sheet Number

A-102



WINDOW SCHEDULE

|'-7" × |'-7 5/8"

6'-2" × 3'-11 5/8"

3'-1" X 3'-11 5/8"

3'-1" X 1'-7 5/8"

2'-1" X 3'-11 5/8"

5'-1" X 1'-7 5/8"

1'-7" × 3'-11 5/8"

1'-9" × 3'-11 5/8"

9'-3" × 3'-11 5/8"

4'-2" × 3'-3 5/8"

4'-10" × 3'-3 5/8"

CONSTRUCTION

MOOD

MOOD

MOOD

MOOD

MOOD

FIRST FLOOR

AI PICTURE

A4 PICTURE

A3 CASEMENT

A7 PICTURE

AS CASEMENT

A9 CASEMENT

A2 (2) CASEMENT WOOD

A5 (2) CASEMENT WOOD

A6 CASEMENT WOOD

AIO (3) CASEMENT MOOD

All (2) CASEMENT WOOD

R.O. SIZE



7300 DIXIE HWY. #600 CLARKSTON, MI 48346 PHONE 248.605.2030 FAX 248.605.2030 WEB DSARCHITECTS.COM

Seal

GULLEN RESIDENCE

Drawing Title

SECOND FLOOR - FLOOR PLAN SECOND FLOOR - FLOOR FRAMING PLAN

Project Number

24-208

cked DJS

1/4" = 1'-0"

CULLEN RESIDENCE

Issued for Date By

OWNER REVIEW 2-11-25 DJS

PERMIT 2-18-25 DJS
PERMIT 3-11-25 DJS

Sheet Number

A-103of
13



Charter Township of Highland (H) 11-12-407-014 Active

Print Date: Date

3569 Woodland Dr Highland MI 48356

View: FrontStructure: PrimaryPhoto Date: 09/29/2011

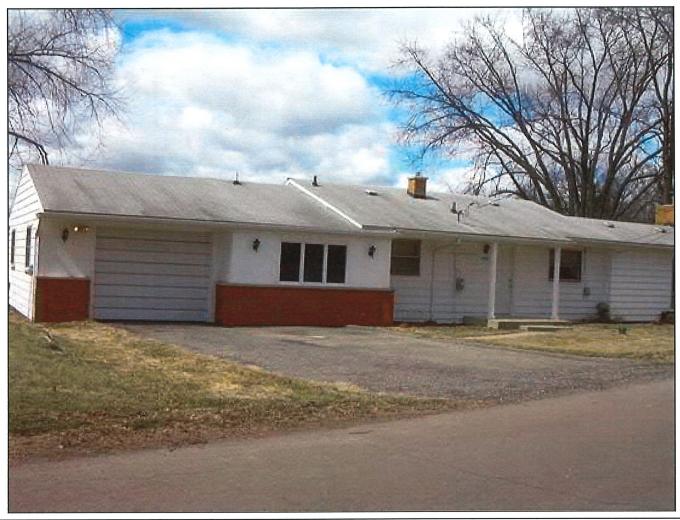


3569 Woodland Dr Highland MI 48356

View: Front

Structure: Primary

Photo Date: 04/15/2013



3569 Woodland Dr Highland MI 48356

View: Rear

Structure: Primary

Photo Date: 09/29/2011







HEALTH DIVISION

Leigh-Anne Stafford, Health Officer (248) 858-1280 | health@oakgov.com

February 15, 2024

THOMAS URBAS CHRISTINA CORCORAN 3751 ORMOND RD WHITE LAKE MI 48383-1837

Record Number: EHW-2023-00693

Parcel ID: 11-12-407-014

RE: REPLACEMENT DRINKING WATER WELL AT 3569 WOODLAND DR, HIGHLAND, MI 48356

Dear Christina Corcoran & Thomas Urbas:

Your water supply has been tested and reviewed for the attached parameters with the accompanying results and interpretations. A well education packet has been produced for your information. At the time of applying for a well permit the applicant acknowledged they would deliver the packet to you, the well owner. If you have not received the information please contact the applicant or you may obtain a replacement by contacting one of the below offices.

The above referenced water well system is <u>APPROVED</u> and has been evaluated as meeting permit conditions along with minimum requirements of Part 127 of the Michigan Public Health Code, Act 368, Public Acts of 1978.

WATER SAMPLE RESULTS

The Oakland County Health Division (OCHD) analyzes drinking water for Total Coliform and, if necessary, E. coli, in a test referred to as a bacteria test. OCHD also analyzes drinking water for five parameters in a routine testing procedure referred to as a partial chemical analysis. Below the analysis results is a list of these parameters and associated problems or concerns. Except for Total Coliform, E. coli, Fluoride and Nitrate, the levels listed below are general guidelines. State drinking water standards have been established for Total Coliform, E. coli, Fluoride and Nitrate and are listed below.

Water Sample Analysis Results				
Collection Date	Lab	Sample Point	Sample Reason	Test Type
11/14/2023	OCHD Lab	KITCHEN	New Well	Chemical Analysis
Chemical Results: FLUORIDE = ND CHLORIDE = 230.6 NITRITE = ND NITRATE = 3.6 SULFATE = 56.7				
02/14/2024	OCHD Lab	KITCHEN	Resample	Bacti Analysis
Bacteriological Results: TCOLIFORM = ND E COLI =				
02/14/2024 OCHD Lab KITCHEN Resample Bacti Analysis				
Bacteriological Results: TCOLIFORM = ND E COLI =				

INTERPRETATION OF DRINKING WATER SAMPLE RESULTS			
Partial Chemical Test (mg/l)	MCL/AL	Problem/Concern	
Fluoride	4.0	Low levels are beneficial in preventing tooth decay. High levels may cause mottling of teeth	
Chloride	250	Taste; corrosion	
Nitrite	1.0	Nitrite poisoning especially infants	
Nitrate as N	10	Nitrate poisoning especially infants	
Sulfate	250	Laxative, taste odor, scaling in boilers, heat exchangers	
Bacteria Test (MPN/100 ml)	MCL/AL	Problem/Concern	
Total Coliform	ND or 0	Organisms which when found in drinking water alert us to the potential of finding harmful organisms which are not specifically tested for.	
E. coli	ND or 0	May be an indicator of fecal contamination since E. coli organisms originate in the intestinal tract of humans and all other warm blooded mammals.	

*A doctor/dentist prescribed fluoride supplement may be appropriate below 0.8 mg/l. ** Method SM 9223B

AL	Action Level: The Action Level is the concentration of a contaminant that, if exceeded, triggers treatment or other requirements that a water supply shall follow.
MCL	Maximum Contaminant Level: the highest level of a contaminant that is allowed in drinking water. These are enforceable standards.
MPN	Most Probable Number: laboratory method used to quantify bacteria. Note: if coliform bacteria are present upon resample, results would be reported as MPN.
ND	Not Detected: a way of reporting coliform bacteria sample results to indicate the absence of coliform bacteria.
POS	Positive: indicates the water sample contains coliform bacteria.

Please contact the Oakland County Health Division with any questions at 248 858-1312. Our office hours are 8:00 a.m. to 5:00 p.m., Monday through Friday.

Sincerely,

OAKLAND COUNTY HEALTH DIVISION Department of Health and Human Services

7. Rhosee, REHS

Frank Rhodes, REHS Senior Public Health Sanitarian

Environmental Health Services

cc: Highland Township Building Department



Kathleen Forzley, R.S., M.P.A., Manager HEALTH DIVISION

Department of Health & Human Services

September 4, 2009

DAVIS, DEANNA J DAVIS, MARY L 3569 WOODLAND DR HIGHLAND, MI 48356

Permit Number: 128-09-000043

Parcel ID: 11-12-407-010

Application Tracking Number: 63185954

RE: APPROVAL OF ON-SITE SEWAGE DISPOSAL SYSTEM AT 3569 WOODLAND DR, HIGHLAND, OAKLAND COUNTY, MI.

Dear DAVIS, MARY L DAVIS, DEANNA J:

This letter shall certify that the on-site sewage disposal system at the above referenced address has been evaluated by this Division. Based upon observable features it was determined that the system is in compliance with the Oakland County Health Division Sanitary Code, Article III.

Attached you will find a copy of your on-site sewage disposal system final inspection report.

Should you have any questions regarding the inspection process or require additional information **regarding the maintenance** of your system, please contact this office at (248) 926-3305.

Sincerely,

OAKLAND COUNTY HEALTH DIVISION Department of Health and Human Services

Matt Mehnert, R.S.

Senior Public Health Sanitarian Environmental Health Services

cc: Highland Twp.



Kathleen Forzley, R.S., M.P.A., Manager **HEALTH DIVISION**

Department of Health & Human Services

PERMIT TO INSTALL AN ON-SITE SEWAGE DISPOSAL SYSTEM

PERMIT #:

128-09-000043

Issue Date:

05/22/2009 11:25

APPLICATION TRACKING #:

63185954

APPLICATION RECEIPT DATE:

10/23/2008

PARCEL ID #:

11-12-407-010

LAST ACTIVITY:

PROPERTY ADDRESS:

3569 WOODLAND DR HIGHLAND

SUBDIVISION NAME:

Supervisor's Plat of Seven

MI 48356 -2366

Harbors

SEPTIC INFORMATION:

Proposed Use of Septic: Residential

Type of Septic:

Repair

Type of Establishment:

No. of Bedrooms:

2

OWNER: Name:

APPLICANT:

JW Field Grading & Excavating LLC

Address: Phone:

Home:

3569 WOODLAND DR HIGHLAND MI 48356 Work: (248)887-5015

Name: Address:

909 N Milford Rd Highland MI 48357

Phone:

Home:

Work: (888)685-9335

PERMIT APPROVED SUBJECT TO THE FOLLOWING CONDITIONS:

Tank: Two compartment tank recommended

Size of Septic Tank (Gallons) No. of Compartments Tank Type

DAVIS, MARY L / DAVIS, DEANNA J

Risers Required

1300.0 500.0

2 1 Septic Tank (Concrete) Pump Chamber

Yes Yes

Final Disposal:

Drainage beds consisting of 1122.0 sq.ft.

Stipulations:

Locate drain field Over hole2 per eng plan Cut drainage bed 100% 0.0 ft. to 0.0 ft. to cut down vegetation to ground, see eng. plan Call for a cut down inspection prior to backfilling. Backfill 2NS sand to drainage system grade

Replacement Area:

Adequate replacement space available. No

STANDARD PERMIT REQUIREMENTS:

- · Must install system in accordance with OCHD Sanitary Code, Article III and/or Michigan Criteria for Subsurface Sewage Disposal.
- · Required isolation distances must be verified by the installer.
- Call to schedule all necessary inspections prior to the completion of the Installation.
- ACT 53 P.A. 1974 requires the applicant to notify the public utilities prior to excavation. In addition you must call 1-800-MISS DIG to locate public underground utilities.
- . This On-Site Sewage Permit DOES NOT apply to any addition or expansion of the proposed/existing building.
- · This On-Site Sewage Disposal Permit does not ensure a Water Well Permit. An On-Site Sewage Disposal installation may reduce or eliminate an approved well area resulting in denial of an application for a Water Well Permit.

THIS PERMIT IS VOID AFTER TWO (2) YEARS FROM DATE OF ISSUE

Sanitarian: Matt Mehnert

Supervisor: Mark Hansell

SEE PAGE 2 FOR SPECIAL CONDITIONS AND ADDITIONAL REQUIREMENTS

SOUTH OAKLAND HEALTH CENTER 27725 GREENFIELD RD. SOUTHFIELD, MI 48076-3663

General Information 248-424-7000

Page 1 of 4 WEST OAKLAND HEALTH CENTER 1010 E. WEST MAPLE RD WALLED LAKE, MI 48390-3571 General Information 248-926-3300

1200 N. TELEGRAPH RD. PONTIAC, MI 48341-0432 General Information 248-858-1280

NORTH OAKLAND HEALTH CENTER



Kathleen Forzley, R.S., M.P.A., Manager HEALTH DIVISION

Department of Health & Human Services

PERMIT#: 128-09-000043 Parcel ID: 11-12-407-010

Application Tracking Number: 63185954

Property Address: 3569 WOODLAND DR

HIGHLAND MI 48356 -2366

Pre-Final Inspection:

Bed-Call for Midcut Inspection prior to backfilling

Comments:

OK to use existing 500 gallon tank as a pump chamber if in sound condition. Install system per eng. plan #08-3675 from BF Thompson Rev. 4/24/09. A copy of the recorded deed restriction must be submitted to OCHD before final approval can be

Special Conditions:

Plan#: 2008-3675 Rev. Date: 04/24/2009 Eng's Name:

BF Thompson

Plan approval is contingent upon the designing engineer establishing all grades. Making sufficient inspections during construction to assure compliance with plans and providing this office with a signed statement to that affect. A final inspection by the Health Division is required.

- Prevailing small sized lot, or poor soil quality will limit the service of the installation. This repair permit is issued with no assurances for a normal use period.
- This repair permit DOES NOT apply to any addition or expansion to the existing building.
- Plan was approved based on the May 18, 2009 Sanitary Code Appeals Board resolution.

APPROVED BORINGS:

Date Observed: 05/21/2009 Soils Observed by: Matt Mehnert

Boring:1

Boring Label:

1

GPS Coordinates: HSWT Observed:

X:

Yes

HSWT Indicator:

Y:

Mottled

Depth of HSWT: 2.50 Feet

Ground Water Observed:

Yes

Depth of Ground

Water:

5.00 Feet

Captured Date:

10/27/2008 Captured By: 11:05

mehnertm

Texture:

Depth:	12.00 Inch	Soil Info:	Topsoil
Size:		Topsoil Texture:	Loamy Sand
Wetness:		Color:	
Depth:	1.50 Feet	Soil Info:	Sand
Size:		Topsoil Texture:	
Wetness:		Color:	Gray
Depth:	3.00 Feet	Soil Info:	Sand
Size:		Topsoil Texture:	
Wetness:	Wet	Color:	Mottled



Kathleen Forzley, R.S., M.P.A., Manager **HEALTH DIVISION**

Department of Health & Human Services

PERMIT#: 128-09-000043 Parcel ID: 11-12-407-010

Application Tracking Number: 63185954

Property Address: 3569 WOODLAND DR

HIGHLAND

MI 48356 -2366

APPROVED BORINGS:

Soils Observed by: Matt Mehnert

Date Observed: 05/21/2009

Boring:1

Boring Label:

1

GPS Coordinates: HSWT Observed:

X: Yes

HSWT Indicator:

Y:

Depth of HSWT: 2.50 Feet

Ground Water Observed:

Yes

Depth of Ground

Mottled 5.00 Feet

Water:

Captured Date:

10/27/2008 Captured By: 11:05

mehnertm

Texture:

Depth:

2.00 Feet

Soil Info:

Sand

Size: Wetness:

Wet

Topsoil Texture:

Color:

Boring:2

Boring Label:

2

GPS Coordinates: HSWT Observed:

X:

HSWT Indicator:

Y:

Mottled

Depth of HSWT: 3.00 Feet

Ground Water Observed:

Yes Yes

11:08

Depth of Ground

5.00 Feet

Captured Date:

10/27/2008 Captured By:

Water:

mehnertm

Texture:

Depth:	12.00 Inch	Soil Info:	Topsoil
Size:		Topsoil Texture:	Loamy Sand
Wetness:		Color:	
Depth:	2.00 Feet	Soil Info:	Sand
Size:		Topsoil Texture:	
Wetness:		Color:	Brown
Depth:	2.00 Feet	Soil Info:	Sand
Size:		Topsoil Texture:	
Wetness:)	Color:	Mottled
Depth:	1.00 Feet	Soil Info:	Sand
Size:		Topsoil Texture:	
Wetness:	Water Sand	Color:	

Disclaimer: The Oakland County Health Division will not deny participation in its programs based on race, sex, religion national origin, age or disability. State and federal eligibility requirements apply for certain programs.

NORTH OAKLAND HEALTH CENTER 1200 N. TELEGRAPH RD. PONTIAC, MI 48341-0432 General Information 248-858-1280

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Page 3 of 4 WEST OAKLAND HEALTH CENTER 1010 E. WEST MAPLE RD WALLED LAKE, MI 48390-3571 General Information 248-926-3300



Kathleen Forzley, R.S., M.P.A., Manager HEALTH DIVISION

Department of Health & Human Services

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HIGHLAND MI 48356 -2366





Disclaimer: The information provided herewith has been compiled from recorded deeds, plats, tax maps, surveys and other public records. It is not a legally recorded map or survey and is not intended to be used as one. Users should consult the information sources mentioned above when questions arise.

3569 WOODLAND DR HIGHLAND MI 48356

OAKIAND COUNTY MICHIGAN PROPERTY GATEWAY

2 beds / 1 full baths / 1 half baths / 1340 sq ft

Residential Property Profile

11-12-407-014

Note: Please be advised the data included in Property Gateway originates from multiple local municipalities. Data, in regard to properties, may be classified and updated differently by municipalities. If you have any questions, please contact the local community where the data originated.

	Own	er Information		
Owner(s)	: THOMAS CULLEN 8	JENNIFER CULLEN		
Postal Address	: 408 STONE WOOD	CT MILFORD MI 48381-1759		
Location Information				
Site Address	te Address : 3569 WOODLAND DR HIGHLAND MI 48356			
PIN	: 11-12-407-014	Neighborhood Code	: L12	
Municipality	: Charter Township of Highland			
School District	School District : 63220 HURON VALLEY SCHOOLS			
Class Code	ss Code : 401 Residential - Improved			
Property Description				

T3N, R7E, SEC 12 SUPERVISOR'S PLAT OF SEVEN HARBORS PART OF LOTS 443 & 444, ALSO ALL OF LOT 445 ALL DESC AS BEG AT NE COR OF SD LOT 445, TH S 01-04-00 W 125 FT, TH S 69-46-30 W 95 FT, TH N 85-03-30 W 20 FT TO PT 'B', TH N 85-03-30 W 33.17 FT, TH N 42-21-00 E 17.22 FT, TH N 14-37-00 E 60.51 FT, TH N 31.47 FT, TH N 66-45-30 E 38.98 FT TO PT 'A' LOC N 13-45-50 E 124.56 FT FROM SD PT 'B', TH N 66-45-30 E 88.98 FT TO BEG 6-29-22 FR 010

Split/Combination Information				
Added Status	: Added Parcel			
Added Date	: 01/19/2023	Added From	: FROM 1112407010	
Most Recent Sale Since 1994				
Date	: 09/05/2024			
Amount	: \$385,000	Liber	: 59633:326	
		Grantee	: CULLEN, THOMAS	
Grantor	: THOMAS J URBAS	TR	CULLEN, JENNIFER	

3569 WOODLAND DR HIGHLAND MI 48356



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	Tax Inf	ormation	
Taxable Value	: \$228,780	State Equalized Value	: \$228,780
Current Assessed Value	: \$228,780	Capped Value	: \$156,670
Effective Date For Taxes	: 12/01/2024	Principal Residence Exemption Type	: N/A
Summer Principal Residence Exemption Percent	: 0%	Winter Principal Residence Exemption Percent	: 0%
2023 Taxes		2024 Taxes	
Summer	: \$5,863.55	Summer	: \$6,151.11
Winter	: \$1,911.54	Winter	: \$1,942.62
Village	:	Village	:
Lot Information			
Description	:	Area	: 0.336 ACRES
Primary Structure			
Structure	: Ranch	Living Area	: 1340 SQ FT
Ground Floor	: 1340 SQ FT	Year Built	: 1954
Effective Year	: 1970	Remodel Year	: 0
Stories	: 1 Story	Rooms	: 6
Bedrooms	: 2	Full Baths	: 1
Half Baths	: 1	Fireplaces	: 1
Ext Walls	: Aluminum	Basement	: NO - CRAWL SPACE
Garage	: ATTACHED - 1 car (422 SQ FT)	Heat	: Forced Heat & Cool
Fuel Type	: Gas	Central Air	: Yes
Basement Information			
Finish	: UNFINISHED	Area	: 0 SQ FT
Porch Information			
	Туре		Area
	CCP (1 Story)		44 SQ FT
	CGEP (1 Story)		115 SQ FT