b

Date Received 9-20-73

APT No 7024

T C No 113-240-0049

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER YOUNG MEN'S CHRISTIAN ASSOCIATION, CHARLOTTE, N. C.
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER 400 East Morehead St., Charlotte, N.C. ZIP 28202

3) PHONE NO Home 333-7773 Office Tom Clark: 374-2230

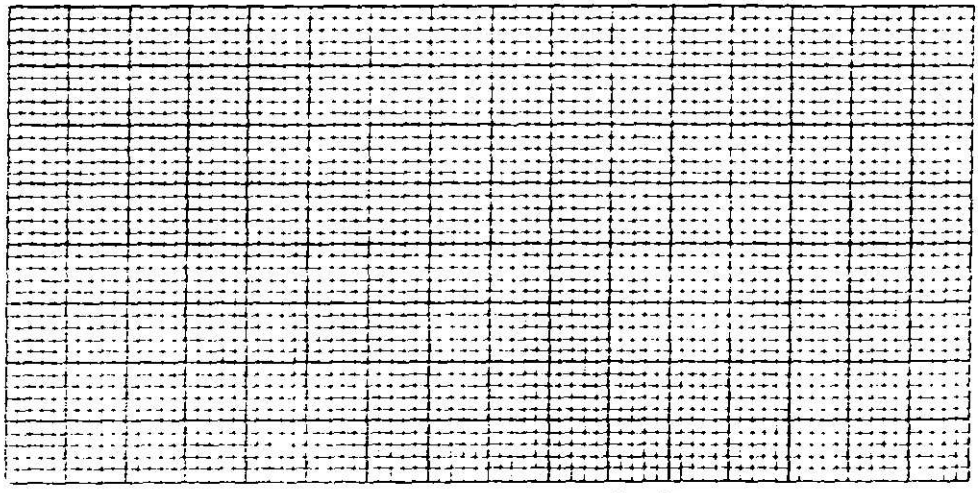
4) LOCATION OF PROPERTY DIXIE RIVER ROAD
(STREET OR COUNTY ROAD)

5) ~~SUBDIVISION~~ Section 37 LOT NO 35 BLOCK NO N/A

MAP BOOK NO _____ PAGE NO _____

6) DEED REFERENCE DEED BOOK _____ PAGE NO _____

Application is hereby made to the Mecklenburg County Health Department for the conduct of a percolation test and an on site inspection of the lot hereinabove described for the purpose of determining if the lot is suitable for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge



7) ACCURATELY DIAGRAM & DIMENSION LOT

George Grandell
OWNER

FORM NO E-1-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No.

PTR No 7024

Date Issued September 25, 1973

T C No 113-240-00-01

Map Date

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

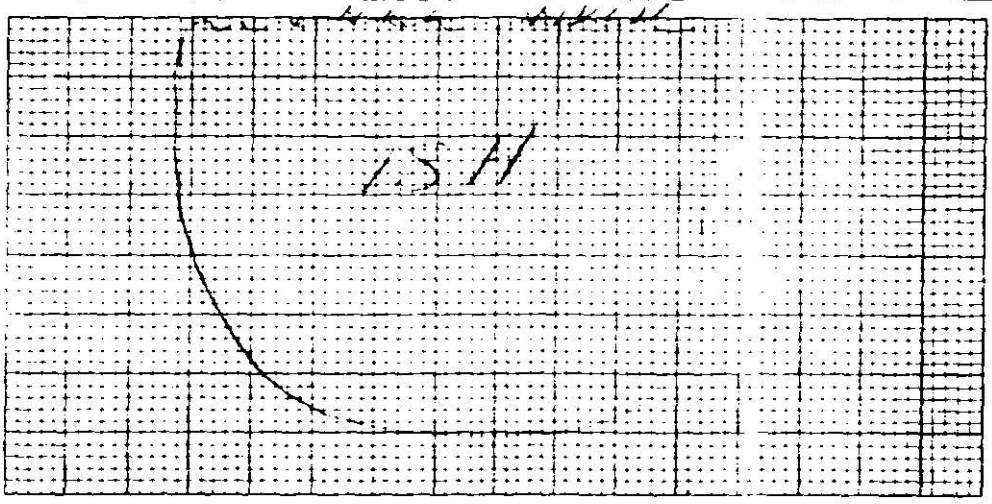
PERCOLATION TEST REPORT

NAME OF OWNER Young Men's Christian Association
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 400 East Morehead Street ZIP 28202

LOCATION OF PROPERTY Dixie River Road
(STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 35 BLOCK NO Section 37



PLOT PLAN

This is to certify that a percolation test has been run and an on-site inspection made by the Mecklenburg County Health Department on the lot described above. The said test was conducted on that portion of the lot as indicated on above plot.

The percolation rate determined by the test was 40 min/in. The said lot is approved for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption effluent discharge subject to the following terms and conditions

1. A permit to install, construct, alter, or repair the specific system shall be obtained from the Mecklenburg County Health Department prior to the beginning of any construction of buildings, or of the wastewater treatment system on the said lot.
2. The size of the septic tank wastewater tercatment system which must be installed will be determined by the Health Department prior to installation based on the percolation rate obtained above, and on the size and type of building constructed thereon.
3. This approval is valid only if the system is installed in the immediate area where the percolation test was run.
4. This approval is void if any grading, filling, or construction (including the drilling of a well) is performed on the lot which, in the opinion of the Health Department renders the area where the percolation test was run unsuitable for the installation, construction, alteration, and/or repair of such a system.

This approval is granted based on the laws of the State of North Carolina and the rules and regulations of the North Carolina State Board of Health and the Mecklenburg County Board of Health which were in effect on the date of issuance and is void if at any time in the future, prior to the completion of the system, these laws, rules, and regulations are changed such that this approval would not have been granted had the new or revised laws, rules, and regulations been in effect on the issue date.

Director, Environmental Health Division or
Authorized Section Head

FORM NO. E-2-4-1-71

HEALTH DEPARTMENT'S COPY

B

SEE INSTRUCTIONS ON BACK

Date Received 9-20-73

ICAR(S) Application No 7024

T C No

Map Date

1000 gal
300 0/H

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

Application for an
Installation, Construction, Alteration, and/or Repair Permit
Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge

The owner of that property described hereinafter hereby applies to the Mecklenburg County Health Department for a permit to

1) ✔ Install or Construct 2) ___ Alter or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption, effluent discharge

20 members

3) PLOT PLAN (ACCURATELY DIMENSIONED)

4) No of Bedrooms 0

5) Business Use Max No Employees

6) Washing Machine Yes X No

7) Garbage Disposal Yes X No

8) Dishwasher Yes X No

9) Water Supply
A Individual Well X
B Government
C Community
Well
Government

Sewage System
Septic tank Yes X No
Public sewer
Community sewer Yes X No

11) FHA Case No

12) VA Case No

13) NAME OF OWNER YOUNG MEN'S CHRISTIAN ASSOCIATION, CHARLOTTE, N. C.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 400 East Morehead St., Charlotte, N. C. 28202

15) PHONE NO Home 333-7773 Office Town Clerk 374 2130

16) LOCATION OF SYSTEM Dixie River Road
STREET OR COUNTY ROAD

17) [redacted] Section 37 Lot No 35 Block No N/A

Map Book No Page No.

18) DEED REFERENCE — DEED BOOK AT PAGE

19) HAS A PERCOLATION TEST BEEN RUN? YES NO DATE RUN

20) PTR NUMBER (See Instructions)

The undersigned person hereby agrees that he has read the foregoing application and that the contents of same are true. It is understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

DATE OF APPLICATION

OWNER George Crawford

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3535

LA No. 7024

Date Issued October 18, 1973

T C. No. 113-240-00-01

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Young Men's Christian Association
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 400 East Morehead Street ZIP 28202

LOCATION OF LOT Dixie River Road
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. 35 BLOCK NO. Section 37

MAP BOOK NO. _____ PAGE NO. _____

The above specified lot is approved by the Mecklenburg County Health Department for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the percolation test results which yielded a percolation rate of 40 min/in, on an on-site inspection of the said lot; and upon the information supplied in the "Application for an Installation, Construction, Alteration, and/or Repair Permit", number 7024. This approval is subject to the following terms and conditions:

1. That the nitrification field be installed, constructed, altered, and/or repaired in the same area where the percolation test was run.
2. That an "Installation, Construction, Alteration, and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altred, and/or repaired and that the system be installed in accordance with same.

This approval may be revoked and the building inspection department requested to revoke any building permit(s) which have been issued to authorize construction on the said lot if at any time it is determined that any information contained in the "Application for an Installation, Construction, Alteration, and/or Repair Permit" is not correct or is untrue or that the septic-tank system is not being installed, constructed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit.

L. C. Brisson
Environmentalist

John R. Atkisson
Director, Environmental Health Division or Authorized Section Head

FORM NO. E-3-4-1-71

HEALTH DEPARTMENT'S COPY