Date Received 16 May 74

Application No. 7550

T. C. No. 001-281-072

Map Date 12-14-74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Fleirl (LAST) Howard (FIRST) _____ (MIDDLE)

ADDRESS OF OWNER Hwy 73 DAVIDSON, NC ZIP _____

PHONE NO. Home 892-1366 Office 875 2941

LOCATION OF PROPERTY Tuscarora Trail (STREET OR COUNTY ROAD)

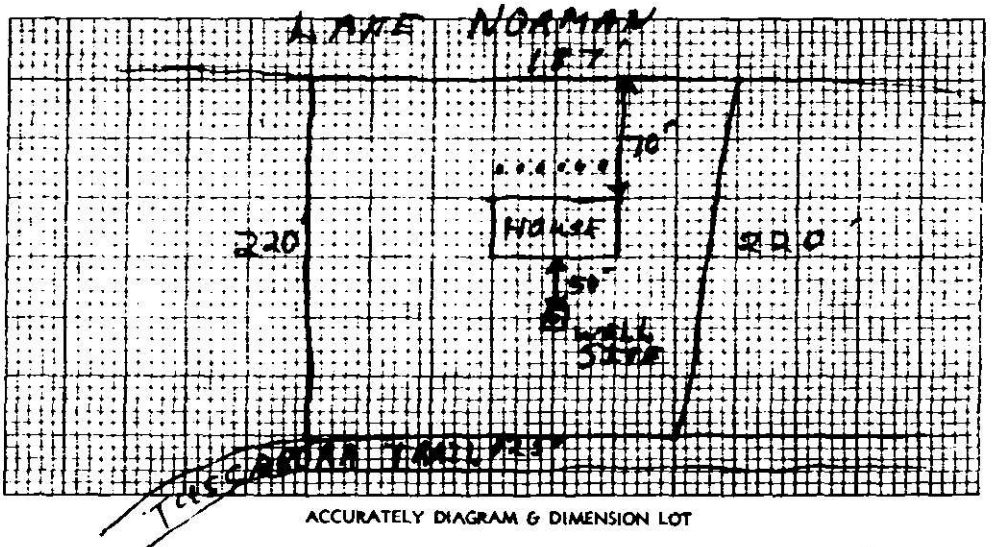
SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. _____

DEED REFERENCE: DEED BOOK _____ PAGE NO. _____

WELL CONTRACTOR McCALL LICENSE NO. 30

Application is hereby made to the Mecklenburg County Health Department for a permit to drill a water well on the hereinabove described lot to be used as a source of ✓ individual, _____ semi public, or _____ public water supply.



ACCURATELY DIAGRAM & DIMENSION LOT

16 May 74
DATE OF APPLICATION

Howard Fleirl
OWNER
by Robert Crossman

Application approved and permit hereby granted

Permit No: 7550

Jerry Bowleson
ENVIRONMENTALIST

FORM NO. E-28-8-1-72

HEALTH DEPARTMENT'S COPY

MECK COUNTY HEALTH DEPT.
RECEIVED
JUN 3 1974
ENVIRONMENTAL HEALTH DIVISION

T. C. No. 001-381-01

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

WELL RECORD

Driller [illegible] Reg. No. [illegible] Well Permit No. 7550

1. Town [illegible] County [illegible]
2. Location [illegible] Quadrangle No. [illegible]
   Show a sketch of location on back of form
3. Owner [illegible]
   Address [illegible]
4. Topography draw, slope, hilltop, valley, flat
5. Use of Well [illegible] Date Completed [illegible]
6. Rig type or method [illegible] Total Depth [illegible]
7. Casing: Depth Diam. Type
   From [illegible] to [illegible] ft. [illegible] in. [illegible]
8. Grout: Depth Material Method
   From [illegible] to [illegible] ft. [illegible] in. [illegible]
9. Screen: Depth Diam. Type and Opening
   From [illegible] to [illegible] ft. [illegible] in. [illegible]
10. Water Zones (depth) [illegible]
11. Static Water Level: [illegible] ft. above / below top of casing
    which is [illegible] ft. above land surface Elev [illegible]
    Date [illegible]
12. Yield (gpm) [illegible] Method of testing [illegible]
13. Pumping Water Level: [illegible] ft. after [illegible] hrs.
    at [illegible] gpm.
14. Water Quality [illegible] Temperature (°F) [illegible]
15. Well sterilization method [illegible]
16. Permanent Pump: Type [illegible] Make [illegible]
    Installed — Date [illegible] By [illegible]
    Capacity [illegible] (gpm) Hp. [illegible]
    Intake depth [illegible] Airline depth [illegible]
17. Remarks: [illegible]

I do hereby certify that this well record is true and exact.

[illegible]
SIGNATURE OF CONTRACTOR OR AGENT

DRILLING LOG

Depth From	Depth To	Formation
0	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]
4	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]

FORM NO. E-22-9-1-72

Date Received 2-27-24

APT No 7550

T C No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER FIERL (LAST) Howard (FIRST) A. (MIDDLE)

2) ADDRESS OF OWNER box 2384 Davidson, NC ZIP 28036

3) PHONE NO Home 892-1663 Office 875-2941

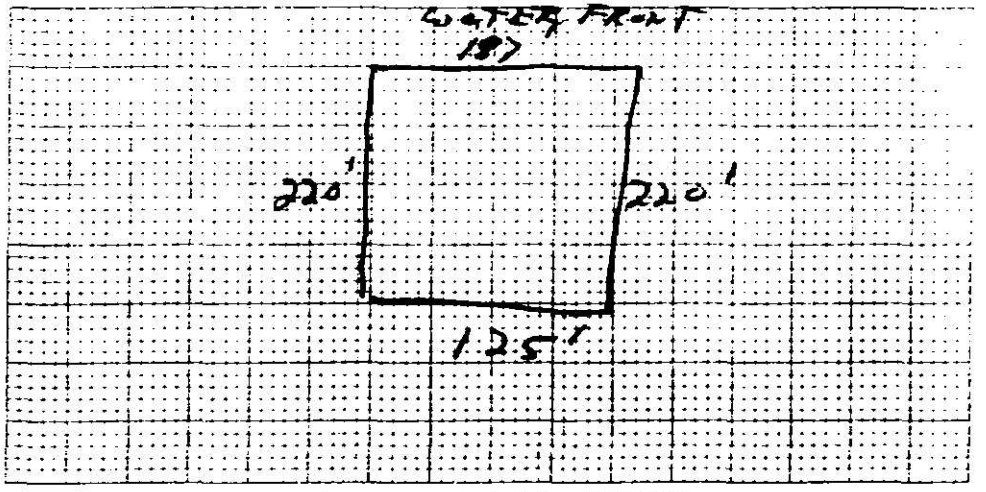
4) LOCATION OF PROPERTY Tuscarora Trail (STREET OR COUNTY ROAD) Mecklenburg Rock

5) SUBDIVISION Section 6 LOT NO 347 BLOCK NO

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

Howard A. Fierl
OWNER

FORM NO E-1-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 4104

PTR No 7550

T C No 001-281-07I

Map Date 12-14-73

Date Issued March 6, 1974

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

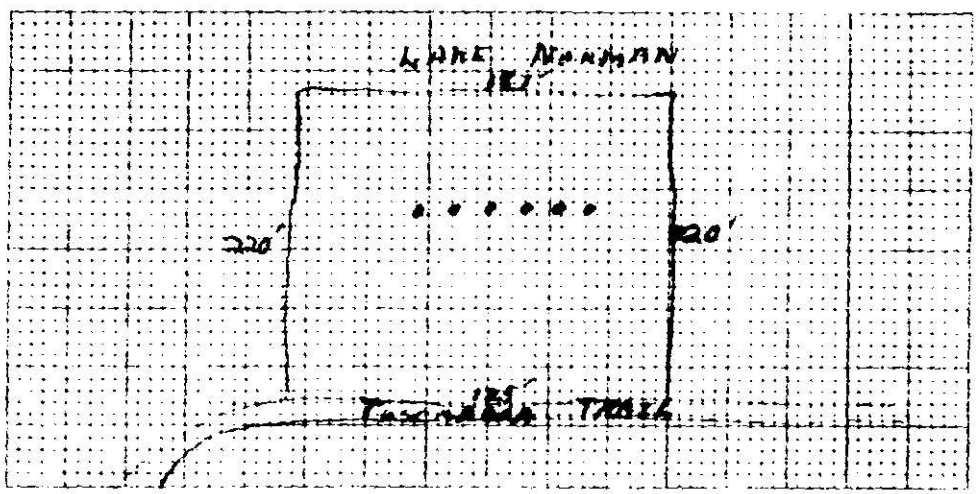
PERCOLATION TEST REPORT

NAME OF OWNER Flierl (LAST) Howard (FIRST) A. (MIDDLE)

ADDRESS OF OWNER Box 2344, Davidson ZIP 28036

LOCATION OF PROPERTY Cascarora Trail (Mecklenburg Neck) (STREET OR COUNTY ROAD)

SUBDIVISION Section 6 LOT NO 347 BLOCK NO



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 60 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 building or of the wastewater treatment system on the subject lot.
2. The size of the septic tank wastewater treatment 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.

Jerry Burleson

John R. Hickerson

Director, Environmental Health Division or Authorized Section Head

FORM NO E-2-9-1-72

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS (T M R

Date Received 2-27-74

ICAR'S Application No 7550

T C No

Map Date

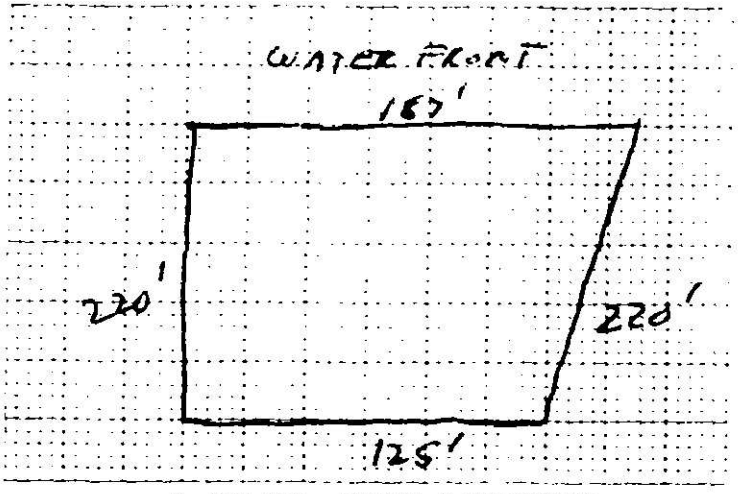
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

The undersigned hereby applies to the Mecklenburg County Health Department for a permit to

[X] Install or Construct [ ] Alter or Repair an individual septic tank wastewater treatment system with subsurface soil absorption, effluent discharge



3) PLOT PLAN (ACCURATELY DIMENSIONED)

13) NAME OF OWNER FLIERL (LAST) Howard (FIRST) A. (MIDDLE)

14) ADDRESS OF OWNER Box 2344 Davidson, N.C 28036

15) PHONE NO Home 892-1663 Office 875-2941

16) LOCATION OF SYSTEM Tuscarora Trail (STREET OR COUNTY ROAD) Mecklenburg Rock

17) SUBDIVISION Section 6 Lot No 347 Block No

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 statements are true. It is understood that any permit applied for hereunder will be void and of no effect if any of the above facts are not true

2-27-74
DATE OF APPLICATION

Howard A. Flierl
OWNER

FORM NO E-4-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3878

LA No 7550

Date Issued March 6, 1974

T C No 001-261-071

INPROVEMENTS PERMIT

Map Date 12-14-74

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 Flierl (LAST) Howard (FIRST) A. (MIDDLE)

ADDRESS OF OWNER Box 2344, Davidson ZIP 28036

LOCATION OF LOT Tuscarora Trail (Mecklenburg Neck) (STREET OR COUNTY ROAD)

SUBDIVISION Section 6 LOT NO 347 BLOCK NO

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 60 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 7550. 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

Jerry Emerson
Environmentalist

John R Atkisson
Director Environmental Health Division or Authorized Section Head

FORM NO E-3-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 18 June 74 Serial No. ICAR(S) Permit No 7550

T C No 001-281-071

Mail Date 14 Dec 73

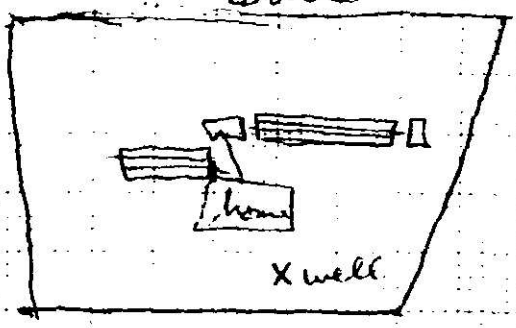
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT

(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Permission is hereby granted to Install or Construct ... After or Repair the individual septic tank waste-water treatment ... and effluent discharge ... specified herein for the dwelling ... 7550 ... Test 2-27-74 ... issued based upon the representations ... This permit is void if the ... not effected within ... from the date issued. All work shall be performed ... 10 July 74 ... otherwise ... Date ... Permit ...



Minimum ... 600

Liquid ... Tank ... 1000 gal

Type ... Concrete

Absorption ... Trench

Dimensions ... 400 x 150 cm (6'15" x 67½" x 17")

Number ... 3 (7½' x 50 x 17")

Depth ... 20"

Distance ... Property ... 10'

Distance ... Water ... 100'

LOCATION

NAME OF OWNER Fluerl, H. A.

LOCATION OF PROPERTY Tuscarora Trail

This ... installation requirements as set forth in the Regulations of the Mecklenburg County ... effect on the date of the granting of this permit. A certificate of approval must be issued by the Director before any system can be covered or otherwise rendered uninspectable or can be used.

Comments: Aeration pit 2½ x 7 x 4½' Stone

F. J. Ervin

Date ... Health Officer ... Environmentalist Richard Christmas

This permit ... alter or construct ... new system ... issued by the division or a ... Health Department ... signature of the Environmental ... existing system is being altered or repaired.

E-5-9-1-72

C of A (s) No 7550

Serial No.

T C No 601-381-071

Date Issued 16 July 74

Map Date 14 Dec 73

John O. Robinson
CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner Fleck, H. A.
LAST FIRST MIDDLE

Location of Property Tuscarora Trail

Application Number 7550 Permit Number 7550

Inspection Date:

Liquid Capacity of Tank 1000 gal Tank Material PE

Total Length of Drain Tile 400' & 150' Lin Number of Lines 3 (7½' x 50' trench)

Depth of Filter Material 12" Cover Depth 15"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 16 July 74 DATE Tank Inspected 16 July 74 DATE

Nitrification Field Inspected 16 July 74 DATE

Washing Machine Line Inspected, If Applicable 16 July 74 DATE

The undersigned has inspected the Individual Septic Tank System with subsurface soil absorption, effluent discharge as described above and it has been installed or constructed, altered or repaired in accordance with the permit issued and the regulations of the Mecklenburg County Board of Health on the date of issuance of the permit. The issuance of this Certificate of Approval does not in any way guarantee that the system will operate properly or relieve any person now or hereafter owning, occupying or using such system from any liability resulting from the failure of the system to operate properly. This Certificate of Approval is issued subject to these restrictions and conditions as are in the permit and in addition to those listed below under comments. This Certificate of Approval shall be void and of no effect 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.

Comments Aeration pit 2½' x 7' x 4' Tone

Environmentalist

FORM NO E-6-8-1-72

HEALTH DEPARTMENT'S COPY