MECKLENBURG COUNTY HEALTH DEPT.

RECEIVED

NOV 1974

ENVIRONMENTAL HEALTH DIVISION

T. C. No. 139-015-09

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

WELL RECORD

Drilling Contractor Crawford Well Drilling Reg No. 222 Well Permit No. 6637

1. Town Mint Hill County Mecklenburg
2. Location 8104 Jefferson Colony Rd. - Lot 9 Quadrangle No.
   Show a sketch of location on back of form Block D
3. Owner Ralph Squires Const. Co., Inc.
   Address P.O. Box 25178 - Crwk - 28212
4. Topography draw, slope, hilltop, valley, flat
5. Use of Well Domestic Date Completed 11-1-74
6. Rig type or method Air Rotary Total Depth 105
7. Casing: Depth From 0 to 78 ft. Diam. 6¼ in. Type 185
8. Grout: Depth From 0 to 30 ft. Material in. Method Sakrete
9. Screen: Depth From to ft. Diam. in. Type and Opening
10. Water Zones (depth) 85
11. Static Water Level: 30 ft. above/below top of casing
    which is 1 ft. above land surface Elev.
    Date 11-1-74
12. Yield (gpm) 10 Method of testing Air
13. Pumping Water Level: 50 ft. after 5 hrs.
    at 10 gpm.
14. Water Quality Temperature (°F)
15. Well sterilization method HTH
16. Permanent Pump: ✓ Type Deepwell Make Myers
    Installed — Date 11-1-74 By Crawford
    Capacity 10 (gpm) Hp ½
    Intake depth Airline depth
17. Remarks:

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

Charles E. Crawford

SIGNATURE OF CONTRACTOR OR AGENT

DRILLING LOG

From	To	Formation
0	48	Red clay
48	105	Blue Granite

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

Application No. 6637

T. C. No. 139-015-09

Map Date 12-14-73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER (LAST) THE (FIRST) RALEIGH SQUARES CONSTRUCTION (MIDDLE) CO., INC

ADDRESS OF OWNER P.O. Box 25178 ZIP 28212

PHONE NO. Home _____ Office 537-9553

LOCATION OF PROPERTY 8104 JEFFERSON COLONY ROAD (STREET OR COUNTY ROAD)

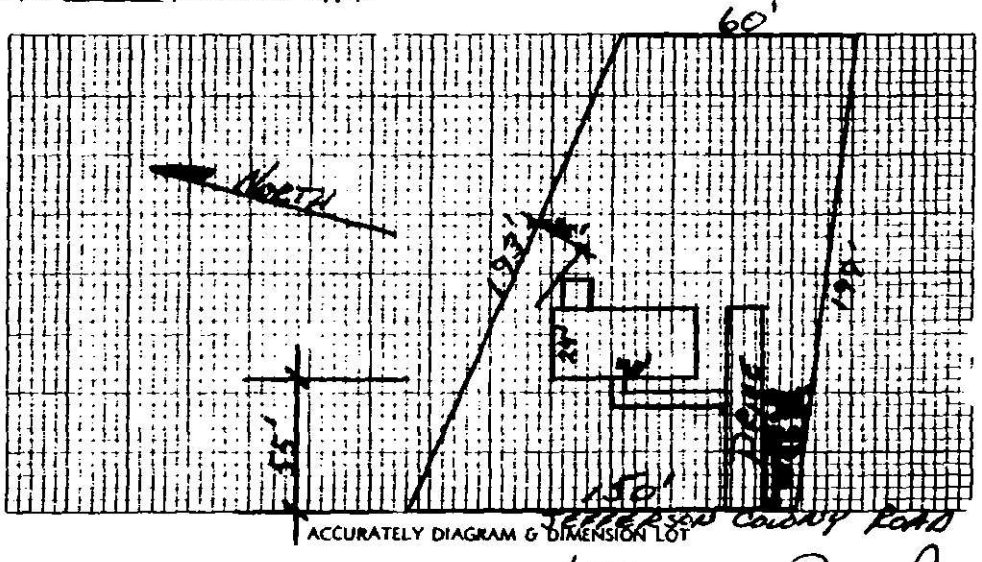
SUBDIVISION JEFFERSON COLONY LOT NO. 9 BLOCK NO. D

MAP BOOK NO. 17 PAGE NO. 133

DEED REFERENCE: DEED BOOK 3482 PAGE NO. 458

WELL CONTRACTOR CRAWFORD WELL DRILLING LICENSE NO. 232

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

8-12-74
DATE OF APPLICATION

William K. Rice, Jr.
OWNER

Application approved and permit hereby granted

Permit No: 6637

Jerry Burleson
ENVIRONMENTALIST 21 August 74

FORM NO. E-20-9-1-72

HEALTH DEPARTMENT'S COPY

R

Date Received 7-12-73

APT No 4637

T. C No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER RALPH SQUIRES CONST. CO. INC
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER 2600 MILTON ROAD P.O. BOX 25178 ZIP 28213

3) PHONE NO Home _____ Office 5374553

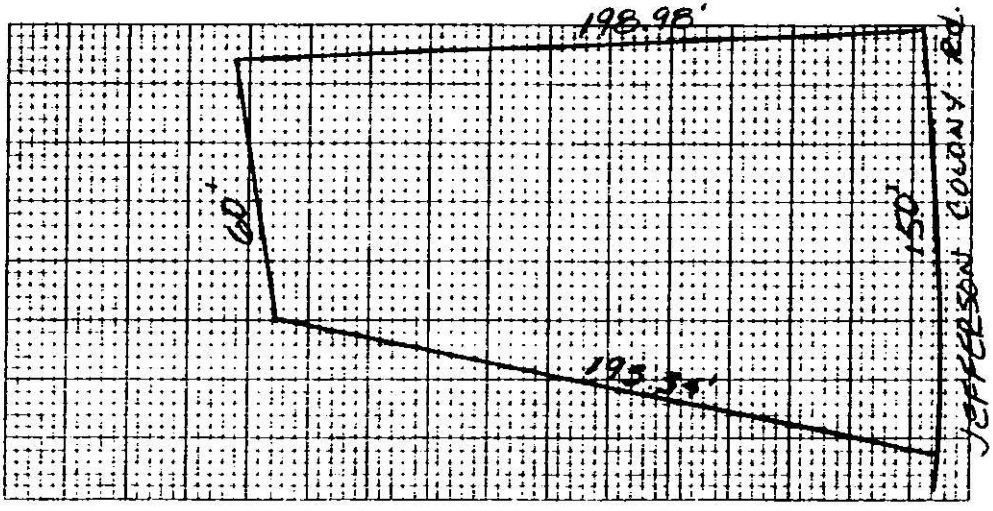
4) LOCATION OF PROPERTY 6104 JEFFERSON COLONY RD
(STREET OR COUNTY ROAD)

5) SUBDIVISION JEFFERSON COLONY LOT NO 9 BLOCK NO 2

MAP BOOK NO 17 PAGE NO 133

6) DEED REFERENCE DEED BOOK 3482 PAGE NO 458

Application is hereby made to the Mecklenburg County Health Department for the conduct of a percolation test and on 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

Bill Harris
OWNER

FORM NO E-1-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3966

PTR No 6637

T C No 139-015-09

Map Date 12-14-73

Date Issued January 4, 1974

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

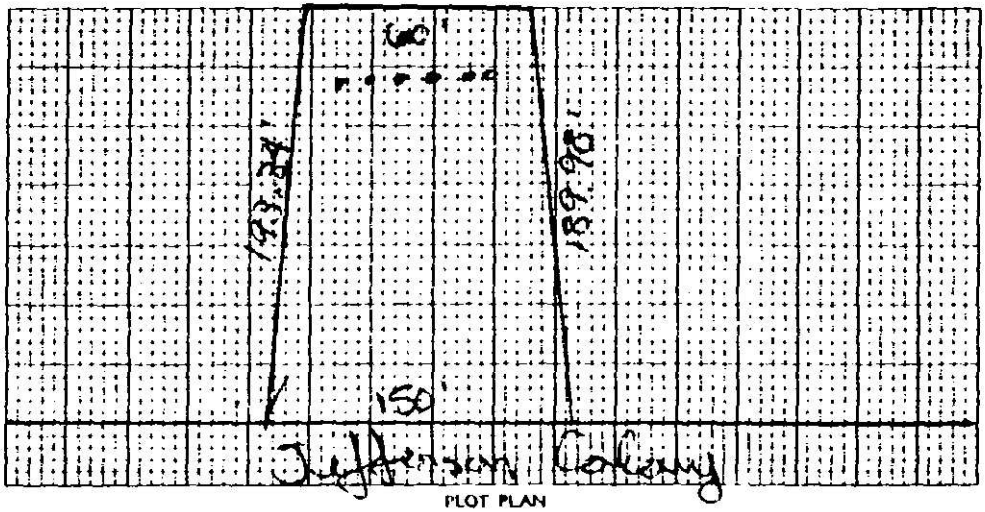
PERCOLATION TEST REPORT

NAME OF OWNER The Ralph Squires Construction Co., Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER 2600 Milton Road ZIP

LOCATION OF PROPERTY 8104 Jefferson Colony Road
STREET OR COUNTY ROAD

SUBDIVISION Jefferson Colony LOT NO 9 BLOCK NO D



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 **50 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 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

G.M. Reynolds

John R. Robinson

Director, Environmental Health Division or Authorized Section Head

FORM NO E-2-9-1-72

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received _____

ICAR(S) Application No 6637

T C No 139-015-09

Map Date 14 Dec 73

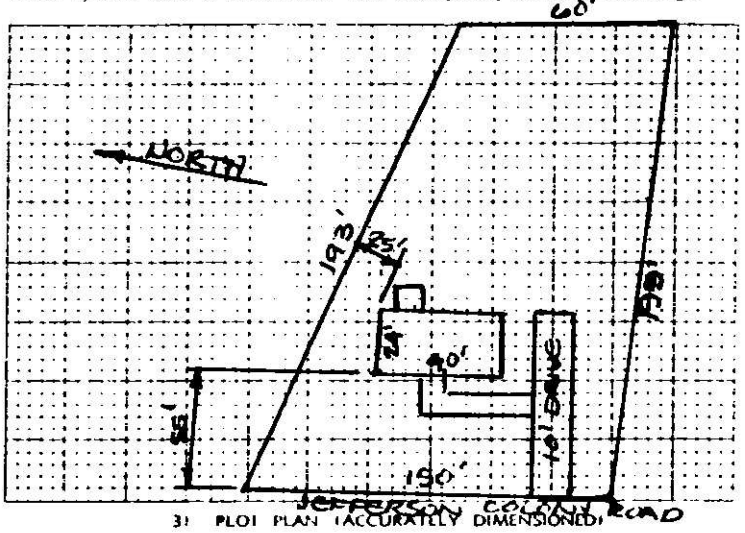
MECKLENBURG COUNTY HEALTH DEPARTMENT

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



3) PLOT PLAN (ACCURATELY DIMENSIONED)

4) No of Bedrooms 4

5) Business Use Max No Employees _____

6) Washing Machine Yes ✓ No _____

7) Garbage Disposal Yes ✓ No _____

8) Dishwasher Yes ✓ No _____

9) Water Supply
A) Individual Well YES
B) Government System _____
C) Community System
1. Well System _____
2. Government System _____

10) Sewage System
House Located within 200' of Public Sewer Yes ✓ No _____
House Located within 200' of Community Sewer Yes _____ No ✓

11) FHA Case No. _____

12) VA Case No. _____

13) NAME OF OWNER THE (LAST) RALPH SQUIRES (FIRST) CONSTRUCTION CO, INC. (MIDDLE)

14) ADDRESS OF OWNER 2600 MILTON ROAD P.O. BOX 25178

15) PHONE NO Home _____ Office 537-9553

16) LOCATION OF SYSTEM 8104 JEFFERSON COLONY ROAD (STREET OR COUNTY ROAD)

17) SUBDIVISION JEFFERSON COLONY Lot No 9 Block No D

Map Book No 17 Page No. 133

18) DEED REFERENCE — DEED BOOK 3482 AT PAGE 458

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.

DECEMBER 31, 1973
DATE OF APPLICATION

James W Boggan
OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued January 4, 1974

Serial No. 3738

LA No. 6637

T. C. No. 139-015-09

Map Date 12-14-73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

IMPROVEMENT PERMIT

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER The Ralph Squires Construction Co., Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 2600 Milton Road ZIP

LOCATION OF LOT 8104 Jefferson Colony Road
(STREET OR COUNTY ROAD)

SUBDIVISION Jefferson Colony LOT NO. 9 BLOCK NO. D

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 58 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 6637 _ ____. 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

A. M. Reynolds
Environmentalist

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

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

BUILDING DEPARTMENT'S COPY

Date Issued 4 Nov 74 Serial No. 5956 ICAR (S) Permit No. 6637

T C No 139-018-09

Map Date 14 Dec 73

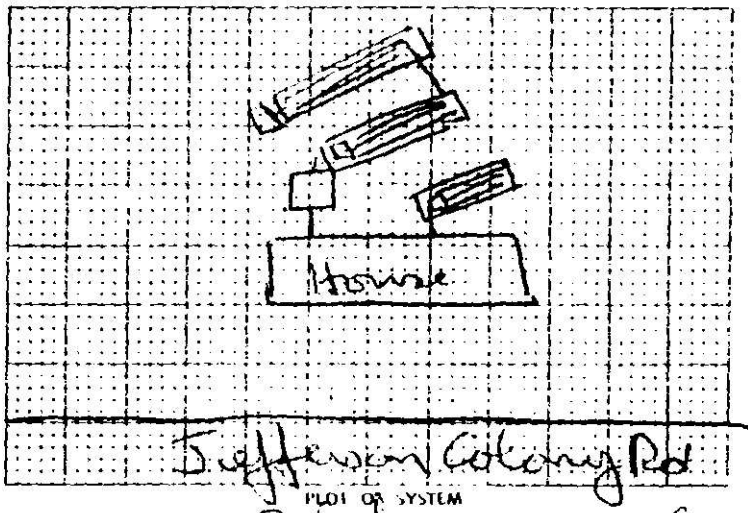
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

Permission is hereby given to ✓ Install or Construct, Alter or Repair the individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge as specified herein at the described location. This permit is granted based upon the information supplied in application dated and this permit shall be void and of no effect if the information provided in the application is not true or is erroneous. All work shall be completed on or before 4 Dec 74, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 1500 gal

Tank Construction Precast Concrete

Absorption and/or Nitrification Lines

Total Line Length 295' & 200'

Number of Lines Two Beds (5) 125' 150'

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Ralph Squires Co

LOCATION OF PROPERTY 8104 Jefferson Colony

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used.

Comments washer 10' X 50'

Division or Section Head

Environmentalist A M Reynolds

If this permit is for the installation or construction of a new system, it must be signed by the division or a section head of the Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

E-5-9-1-72

Serial No. 5479

C of A (s) No 6637

Date Issued 4 Nov 74

T C No 139-015-09

John A Adkinson
CERTIFICATE OF COMPLETION

Map Date 14 Dec 73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Ralph Squires Co. (LAST FIRST MIDDLE)

Location of Property 8104 Jefferson Colony

Application Number _____ Permit Number _____

Inspection Date:

Liquid Capacity of Tank 1500 Tank Material Precast Concrete

Total Length of Drain Tile 795' & 150' Number of Lines Two Beds @ 12' x 80'

Depth of Filter Material 17" Cover Depth 24"

Water Supply Source well Distance from Water Source 102'

Excavation Inspected 4 Nov 74 (DATE) Tank Inspected 4 Nov 74 (DATE)

Nitrification Field Inspected 4 Nov 74 (DATE)

Washing Machine Line Inspected, If Applicable 4 Nov 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 in effect 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, controlling 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 those restrictions and conditions shown on the permit as well as in addition to those listed below under comments. This Certificate of Approval shall be null and void 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 O.K.

R. M. Reynolds
Environmentalist

FORM NO E-6-9-1-72

U.S. GOVERNMENT PRINTING OFFICE