Date Received 6-13-84

RECEIVED

SIR No. 21149

T. C. No. 001-401-30

Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER McGuire Construction Co.
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER c/oWellworth Rlty.Co.,Rt.2,Box 390,Davidson,N.C. ZIP 28036

3) PHONE NO. Home _____ Office 892-6606

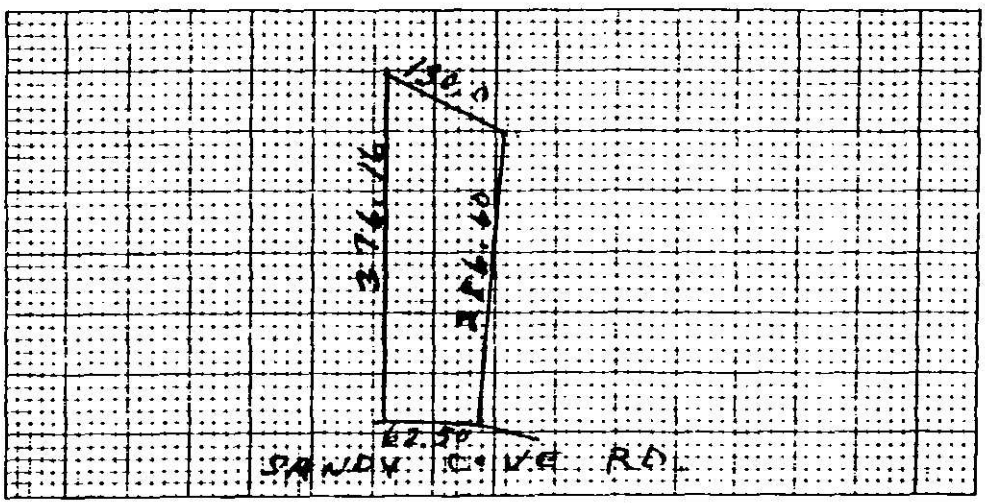
4) LOCATION OF PROPERTY 00000 Sandy Cove Rd.
(STREET OR COUNTY ROAD)

5) SUBDIVISION Rockridge Shores LOT NO 21A BLOCK NO. A

MAP BOOK NO See Attached Map PAGE NO. _____

6) DEED REFERENCE DEED BOOK 4147 PAGE NO 144

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation 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

J. E. McGuire Jr
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

(Ground Absorption Sewage Disposal)

S.I.R. NO. 21149

T.C. NO. 09-401-30

(Sub By Survey Plat)
WM = Part of
30 - Part of 29

McGuire Const. Co.
OWNER: % Wellworth RH4 Co
ADDRESS: R-2 Box 330 Davidson 28036
PLAT NO:
LOT SIZE: 31,776 .76
LOCATION OF SITE: SANDY COVE Rd

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U — 2-7	S (PS) U — 2-8	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S PS (U) — Mixed clay	S (PS) U — Clayey	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S PS (U) — Weak Blocky	S (PS) U — Blocky	S PS U	S PS U
4. SOIL DEPTH (inches)	S PS (U) — 20-35	S (PS) U — 40-48'	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U — None	S (PS) U — None	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S PS (U) — Slow	S (PS) U — Adequate	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IIIe	IVe		
9. SITE CLASSIFICATION	Unsuitable	P. Suitable		
10. SOIL SERIES	ENON	Cecil		

S - Suitable PS - Provisionally Suitable U - Unsuitable

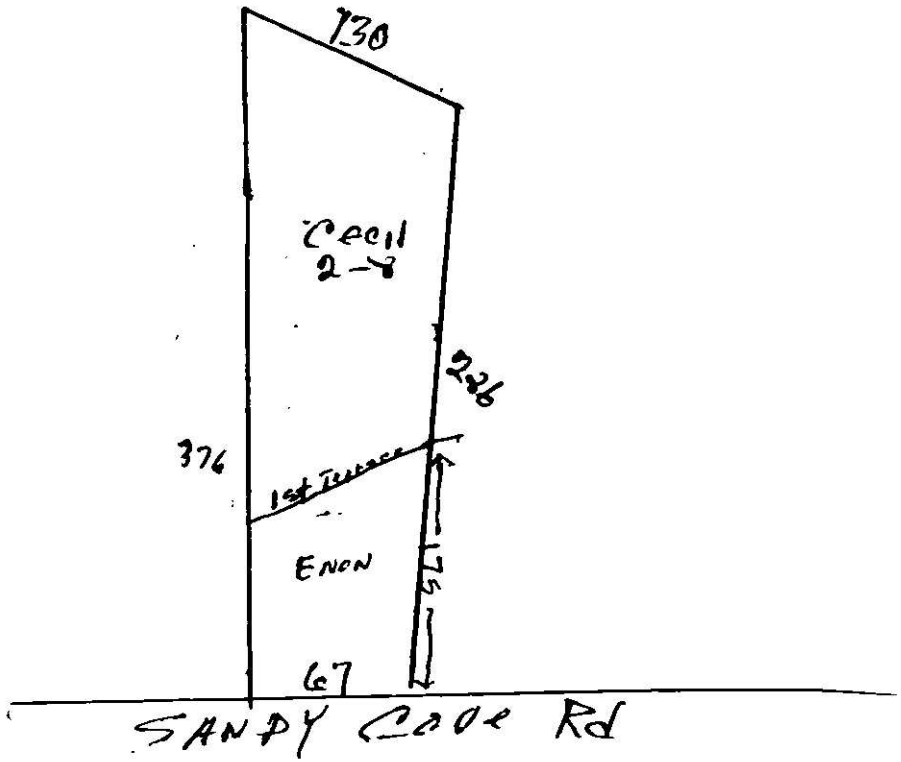
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: W. B. Ramsey
Title: Soil Scientist

Date: 6-13-84

#


130
Cecil
2-8
226
376
1st Terrace
ENON
175
67
SANDY Cove Rd

Serial No. 5696

SIR No. 21149

T. C No. 001-401-30

Date Issued 6-15-84

Map Date /

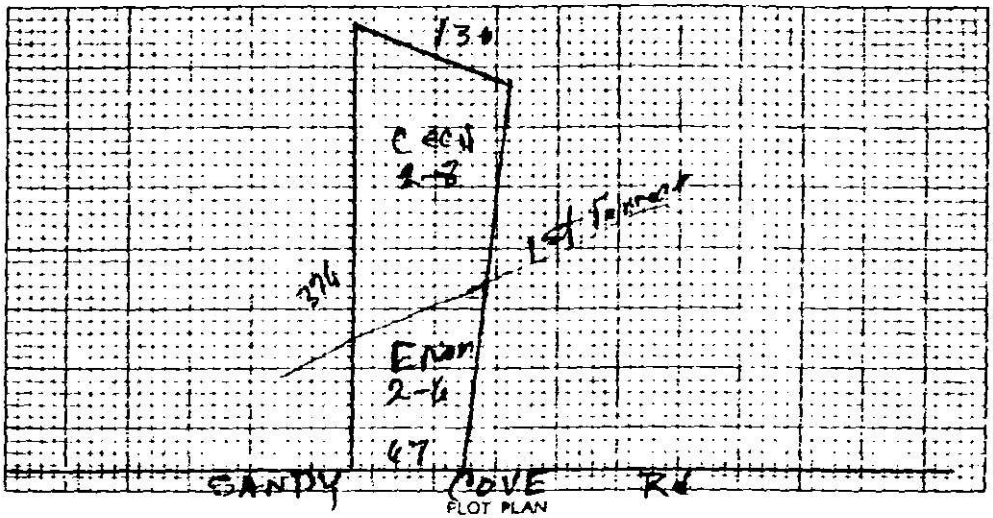
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER McGuire Const. Co. % Wellworth Realty Co.
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER Rt. 2, Box 390, Davidson, NC ZIP 28036

LOCATION OF PROPERTY Sandy Cove Road
(STREET OR COUNTY ROAD)

SUBDIVISION Rockridge Shores LOT NO 21A BLOCK NO A



PLOT PLAN

This is to certify that a soil investigation and site investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The said investigation was conducted on that portion of the lot as indicated on the above plot. PROVISIONALLY SUITABLE

The permeability rate determined by the investigation was . 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 said system (except the pump system) shall be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of construction of the drainfield of the wastewater treatment system on the said lot.
2. The size of the septic tank and the treatment system which must be installed shall be determined by the Mecklenburg County Department of Environmental Health prior to its issuance based on the permeability rate indicated above and on the size and type of building proposed thereon.
3. This approval is valid only for the system specified in the immediate area indicated for actual system installation on the above plot.
4. This approval is granted only under the following conditions: that the drainfield area shall not be altered in the area in which, in the opinion of the Mecklenburg County Department of Environmental Health Director, it is located is acceptable for system installation; and that this plot plan must not be altered in any manner.

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

W. B. Ramsey
SOIL SCIENTIST

Environmental Health Director
Authorized Section Head

EHD-5-76

[illegible] Department's Copy

APPLICATION FOR AN IMPROVEMENT PERMIT

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

FILE: 21149

TC: 001 401-30

JOB LOCATION

① ADDRESS: 21427 (STREET NO) SANDY CUE RD (STREET) ② FILE:

③ CITY: DAVIDSON, N.C. 28036 ④ TAX PARCEL NO.: 001-401-19 ALSO 001-401-30 PART 001-401-29

⑤ SUBDIVISION: ROCK RIDGE SHORES ⑥ LOT: 21 & 21A ⑦ BLOCK: A

OWNER

⑧ NAME: FLETCHER (FIRST) HAMPTON (MIDDLE) BOBBITT (LAST)

⑨ MAILING ADDRESS: RT #2, BOX 296 CA

⑩ CITY: DAVIDSON, N.C. 28036 ⑪ STATE: N.C. ⑫ ZIP: 28036

⑬ PHONE: (WORK) 372-3827 ⑭ (HOME) 892-3232

REQUEST

This request is for a(n):

⑮ ☑ New installation permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify)

DESIGN CRITERIA

System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 3 ㉕ Type?

㉓ Maximum occupancy? ㉖ Maximum number of employees?

㉔ Basement? ½ ☑ yes ☐ no ㉗ Maximum number of seats?

WATER SUPPLY

㉙ Water supply from (present or proposed):

A ☑ Individual well

B ☐ Municipal system

C ☐ Community well

D ☐ Community system

㉚ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Hamp Bobbitt

Date: 11/12/85

㉘ Accurately dimensioned plot

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY

Serial No. 9079

SIR No. 21149

T. C. No. 001 401 30

Date Issued 11/14/85

Map Date L, CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Doubitt (LAST) Fletcher (FIRST) Hampton (MIDDLE)

ADDRESS OF OWNER Rt. #2, Box 296CA, Davidson, NC ZIP 28036

LOCATION OF LOT 21427 Sandy Cove Rd. (STREET OR COUNTY ROAD)

SUBDIVISION Rock Ridge Shores LOT NO. 21 & 21A BLOCK NO. A

MAP BOOK NO. _____ PAGE NO. _____

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, 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 _____. 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 soil investigation 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, altered, 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.

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

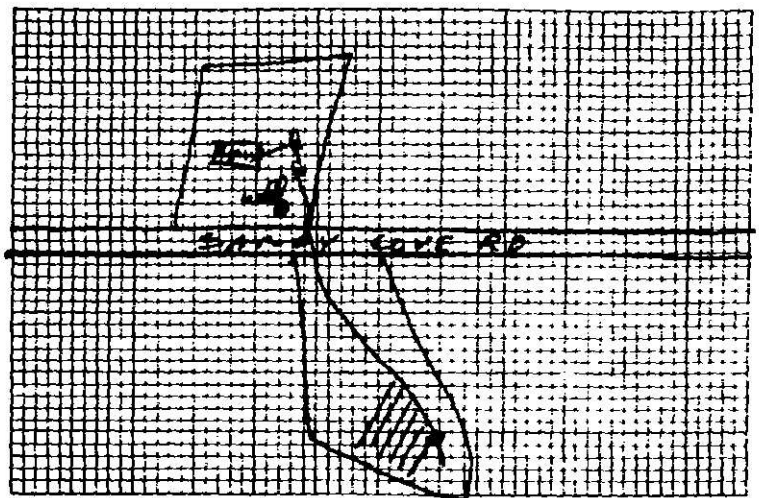
Date Issued 2-28-86 Serial No. 09013 ICAR(S) Permit No. 21149

T C No. 001-401-30

Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
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 21149, dated 11-12-85 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 3-28-86, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank ST 1500 + PT 1000

Tank Construction PCC

Absorption and/or Nitrification Lines

Total Line Length 400'

Number of Lines 6

Distance from House 5'+

Distance from Property Line 10'+

Distance from Well 50'+

NAME OF OWNER BOBBIT, FLETCHER H.

LOCATION OF PROPERTY 21427 SANDY COVE

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Health Commission which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Environmental Health Director before any system can be covered up or otherwise rendered uninspectable or can be used. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed 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.

6 Line x 67' long x 3' wide x 12" stone

Comments:

Division or Section Head

Kelly Kendall
Environmentalist

* 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 Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

EHD-5-76

Environmental Health Dept.

C of A (s) No. 21149

Date Issued 3-25-86 **Serial** 8370 T C No CC 1-401-30

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

~~CERTIFICATE OF COMPLETION~~ **OPERATION PERMIT**

CERTIFICATE OF APPROVAL

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

Name of Owner BOBBIT (LAST) FLETCHER (FIRST) (MIDDLE)

Location of Property 3427 [illegible] CLUB RD

Application Number 21149 Permit Number 21149

Inspection Date:

Liquid Capacity of Tank 1000 gal. Tank Material PVC

Total Length of Drain Tile 140' Number of Lines 6

Depth of Filter Material 12" Cover Depth 24"

Water Supply Source well Distance from Water Source 50'

Excavation Inspected 3-26-86 (DATE) Tank Inspected 3-26-86 (DATE)

Nitrification Field Inspected 3-26-86 (DATE)

Washing Machine Line Inspected If Applicable ____ (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 Health Commission 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(s) 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 [illegible]

Environmentalist

EHD-5-76

[illegible] Public Health Department