25.03

APPLICATION FOR AN IMPROVEMENT PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4403

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

(OFFICE USE ONLY)
FILE: 21663
TC: _____
SERIAL: No 21073 ☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 4500 (STREET NO.) Bakewell Court (STREET) ② FILE: _____
③ JURISDICTION: _____ ④ TAX PARCEL NO.: 231-031-01
⑤ SUBDIVISION: South Hall ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: Thomas (FIRST) F. (MIDDLE) O'Regan (LAST)
⑨ MAILING ADDRESS: 4750 Whetstone Court
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28226
⑬ PHONE: (WORK) 522 2343 ⑭ (HOME) 541-7314

REQUEST

This request is for a(n): Extend house + deck
⑮ ☐ New permit ⑰ ☐ Authorization for mobile home exchange
⑯ ☐ Repair or alteration permit ⑱ ☒ Other (specify) Locate septic system

DESIGN CRITERIA

System will serve:
⑲ ☒ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 3 ㉓ Type? _____
㉔ Maximum occupancy? 5 ㉕ Maximum number of employees? _____
㉖ Basement? ☐ yes ☒ no ㉗ Maximum number of seats? _____

WATER SUPPLY

㉘ Water supply from (present or proposed):
A ☐ Individual well
B ☐ Municipal system
C ☒ Community well
D ☐ Community system

㉙ 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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Thomas F. O'Regan
Date: 8/30/90

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

... No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by this Department.

... This permit is not transferable, and shall become null and void 36 months from the date of issuance

Environmentalist / Date

Director or Authorized Section Head / Date

*This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.

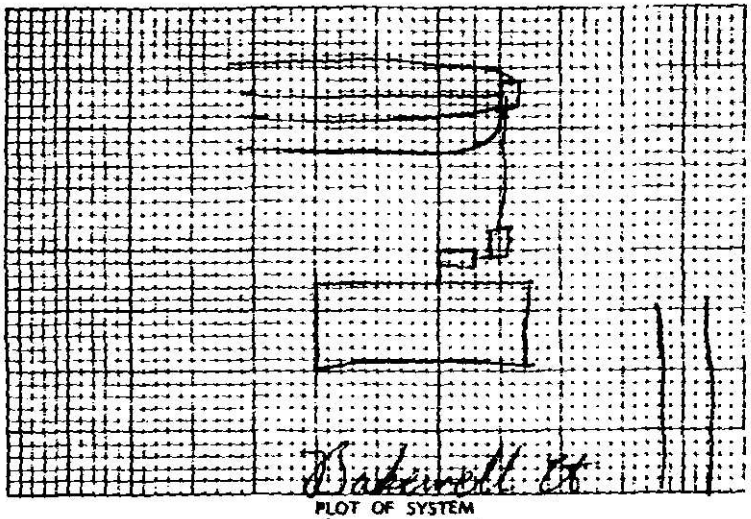
Serial No. 08658

Date Issued 10-7-85

ICAR(S) Permit No. 21663
T.C. No 231-031-01
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 21663, dated 12-4-85 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 11-7-85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate Pb

Liquid Capacity of Tank 1500 + 1000

Tank Construction PCC

Absorption and/or Nitrification Lines

Total Line Length 400'

Number of Lines 4

Distance from House 5'

Distance from Property Line 10'

Distance from Well Comm.

NAME OF OWNER The Dowd Co.

LOCATION OF PROPERTY 4500 Bakewell Ct.

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.

4 Lines 3' X 100 X 12' Stone

Comments:

[signature]
Division or Section Head

B. K. Ferguson
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-5-74

Environmental Health Department Copy

Date Received _____

SEE INSTRUCTIONS ON BACK

RECEIVED

CAR(S) Application No. 21663

T. C. No. 231-031-01

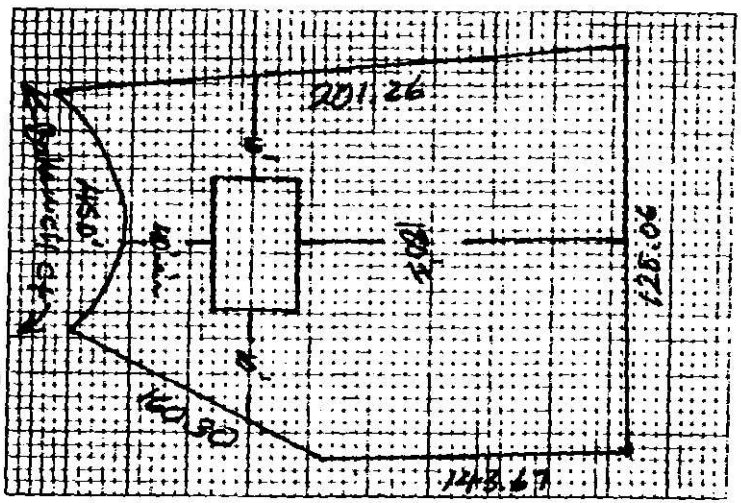
Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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 Department of Environmental Health for a permit to

1) X 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)

Mobile Home ___ Yes ___ No
Residence X Yes ___ No

4) No. of Bedrooms 3
5) Business Use — Max No. Employees _____
6) Washing Machine X Yes ___ No
7) Garbage Disposal X Yes ___ No
8) Dishwasher X Yes ___ No
9) Water Supply
A) Individual Well _____
B) Governmental System _____
C) Community System
1) Well source 200'
2) Governmental source _____
10) Sewage System
House located within 200 feet of public sewer ___ Yes X No
House located within 200 feet of community sewer ___ Yes X No
11) FHA Case No _____
12) VA Case No _____

13) NAME OF OWNER The Dowd Co.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER P.O. Box 220333 Clt. 28222

15) PHONE NO. Home 364-0943 Office _____

16) LOCATION OF SYSTEM 4500 Bakewell Ct.
STREET OR COUNTY ROAD

17) SUBDIVISION South Hall Lot No 17 Block No. 2

Map Book No 20 Page No 753

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL [illegible] 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.

12/4/84
DATE OF APPLICATION

[signature]
OWNER

EHD-5-76

Environmental Health Department's Copy

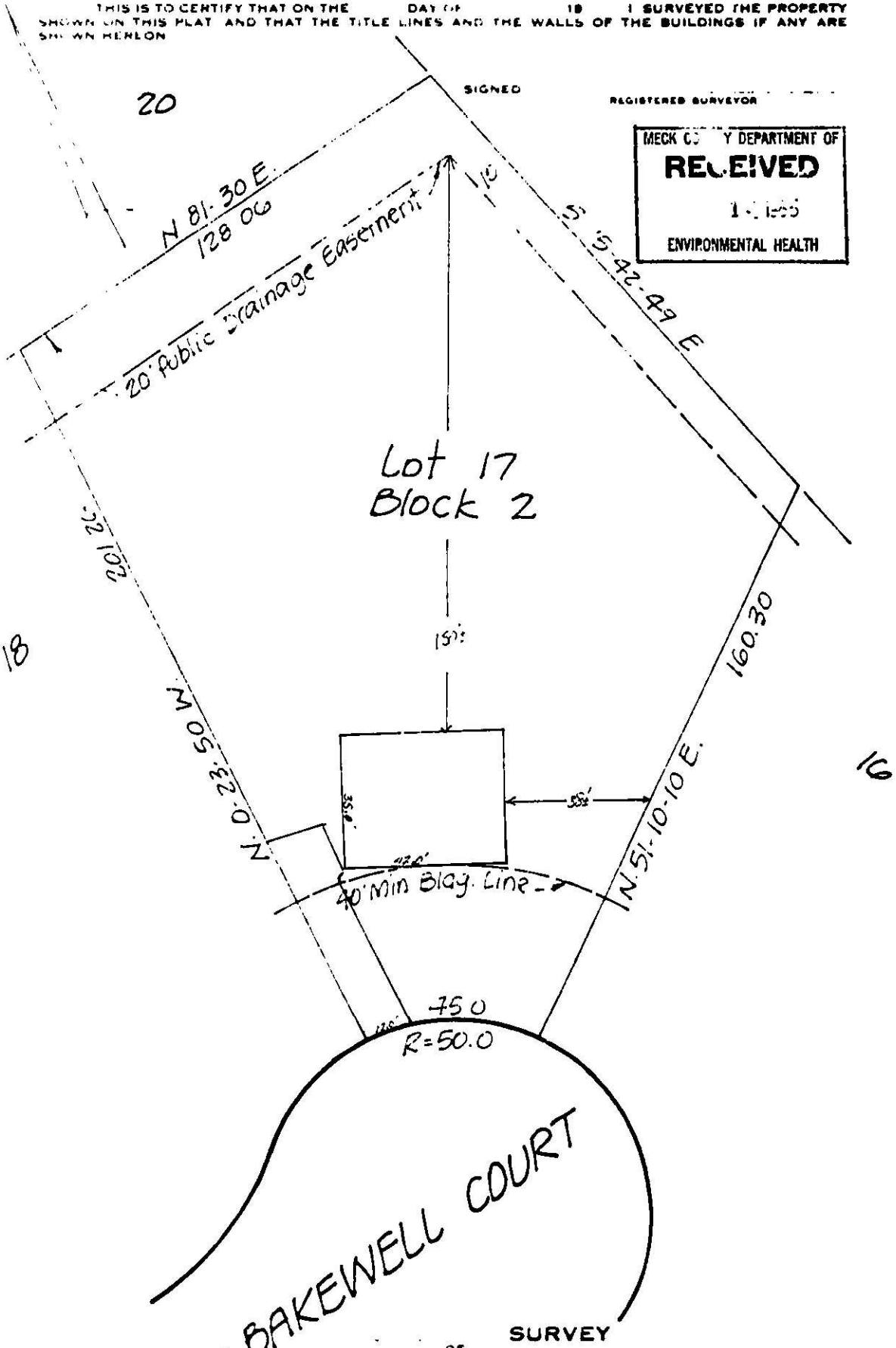
SIR 21663

THIS IS TO CERTIFY THAT ON THE DAY OF 18 I SURVEYED THE PROPERTY SHOWN ON THIS PLAT AND THAT THE TITLE LINES AND THE WALLS OF THE BUILDINGS IF ANY ARE SHOWN HEREON

SIGNED

REGISTERED SURVEYOR

MECK CO Y DEPARTMENT OF
RECEIVED
1
ENVIRONMENTAL HEALTH



SURVEY OF

Lot 17 Block 2 South Hall
Providence Township, Mecklenburg Co., N.C.

SCALE 1" = 30'

THE PROPERTY OF

MAP RECORDED IN BOOK 20 AT PAGE 103 DEED RECORDED IN BOOK PAGE

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203

SIR. NO. 21663
T.C. NO. PO 231-031-01
DATE: 2-4-85

The Dowd Company
P.O. Box 220333
Charlotte, NC 28222

RE: Property located at 4500 Bake Well Court

Dear Sirs:

At your request, a field investigation was conducted on the property designated above. The soils on the property were found to contain a limited area of provisionally suitable soil for the installation of a ground absorption sewage disposal system. A copy of the site evaluation report is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit plot plans for the proposed construction, well, and ground absorption sewage disposal system to this office. They will be reviewed and if it is found that there is an adequate area of provisionally suitable soil to accommodate the proposed installation, an Improvements Permit will be issued by this office.

If I may be of assistance, please feel free to call.

Sincerely,

Bill D. Hardister, Jr.
Environmental Health Supervisor

BDH/kbg

Enclosure

Date Issued 8-30-85

Serial No. 8856

SIR No. 21663

T. C. No. PO 231-031-01

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 The Dowd Co.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P.O. Box 220333, Charlotte, NC ZIP 28222

LOCATION OF LOT 4500 Bakewell Court
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. 17 BLOCK NO. 2

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 21663. 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. *** [illegible] WILL BE REQUIRED ***

D. K. Ferguson
Environmentalist

Bill D. Anderson Jr.
Environmental Health Director, or Authorized Section Head

EHD-S-76

[illegible] Copy

C of A (s) No. 21663

Date Issued 10-28-85 **Serial** 7965 T C. No 231-031-01 PO L CKT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
OPERATION PERMIT

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

Name of Owner The Dowd Co. (LAST, FIRST) _____ (MIDDLE)

Location of Property 4500 Bakewell Ct.

Application Number — Permit Number —

Inspection Date:

Liquid Capacity of Tank 1500 + 1000 Tank Material PCC

Total Length of Drain Tile 400 Number of Lines 4

Depth of Filter Material 12" Cover Depth 18"-21"

Water Supply Source Comm. Distance from Water Source —

Excavation Inspected 10-28-85 (DATE) Tank Inspected 10-28-85 (DATE)

Nitrification Field Inspected 10-28-85 (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 1985, [illegible]

B. R. Ferguson
Environmentalist

EHD-5-76

Environmental Health Department's Copy

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21663

T.C. NO. 231-031-01

(Ground Absorption Sewage Disposal)

OWNER: THE DOWD COMPANY
ADDRESS: P.O. BOX 220333
CHARLOTTE 20222
LOCATION OF SITE: [illegible] 4500 Bakewell Ct.

PLAT NO:
LOT SIZE: 24,768 0.57

LOT 17 BLOCK 2

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS 2-6 U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S PS Clayey U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S PS BLOCKY U	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S PS 40-45" U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S PS NONE U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S PS Adequate U	S PS U	S PS U	S PS U
7. OTHER (Specify)	S Dirt, stumps PS Building Trash U Covers Part of Lot	S PS U	S PS U	S PS U
8. SOIL GROUP	IVa			
9. SITE CLASSIFICATION	Unsuitable			
10. SOIL SERIES	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)

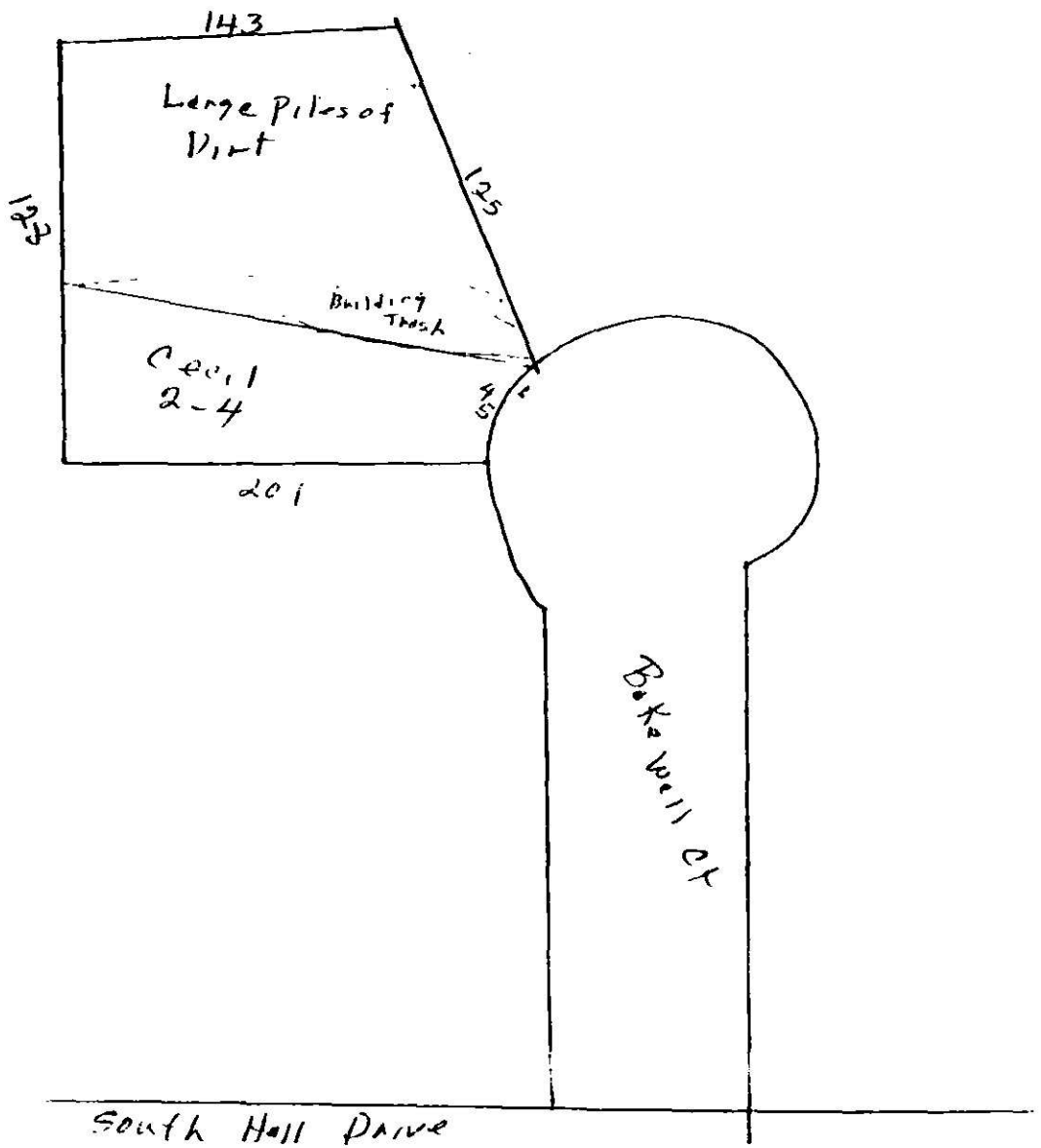
Recommendations/Comments: Need to find out what is under the large dirt piles & if Trash is buried on lot.

Described by: Willard Ramsey
Title: SOIL SCIENTIST

Date: 1-30-85

HJ

Lot 17 Block II



Date Received _____

MECK C[illegible]Y DEPARTMENT OF
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[illegible] - 1-84
ENVIRONMENTAL HEALTH

SIR No. 21663

T. C. No. PO 231 031 01

Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER THE DOWD CO.
LAST FIRST MIDDLE

2) ADDRESS OF OWNER P.O.BOX 220333 CHARLOTTE ZIP 28222

3) PHONE NO. Home 8472162 Office _____

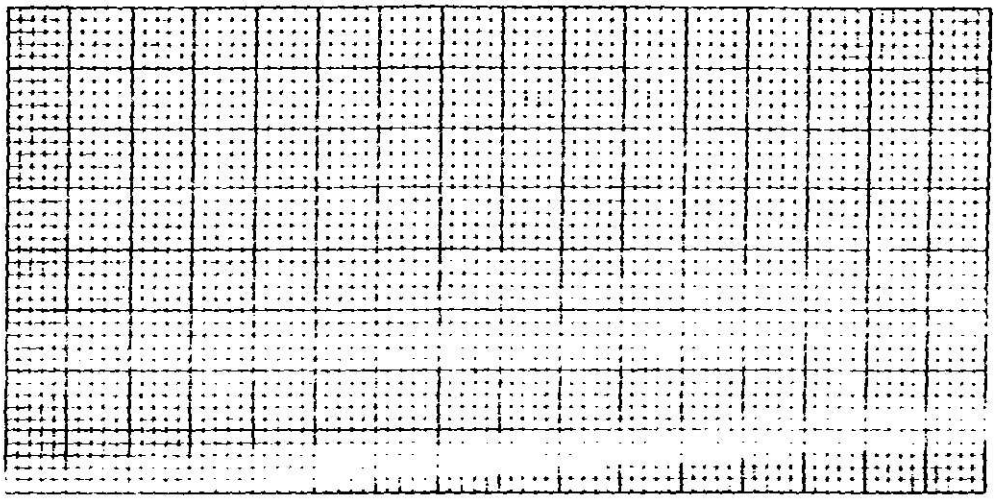
4) LOCATION OF PROPERTY 4500 BAKE WELL CT.
STREET OR COUNTY ROAD

5) SUBDIVISION SOUTH HALL LOT NO. 17 BLOCK NO. 2

MAP BOOK NO 20 PAGE NO. 753

6) DEED REFERENCE DEED BOOK _____ PAGE NO. _____

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

E. A. Westerlund

OWNER

EHD-5-76

Environmental Health Department's Copy