Date Received 7-3-73

APT No. 6574

T C. No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Carter, (LAST) Conrad (FIRST) Norwood (MIDDLE)

2) ADDRESS OF OWNER 5336 Surman Place ZIP 28210

3) PHONE NO. Home 523-0476 Office 376-3353

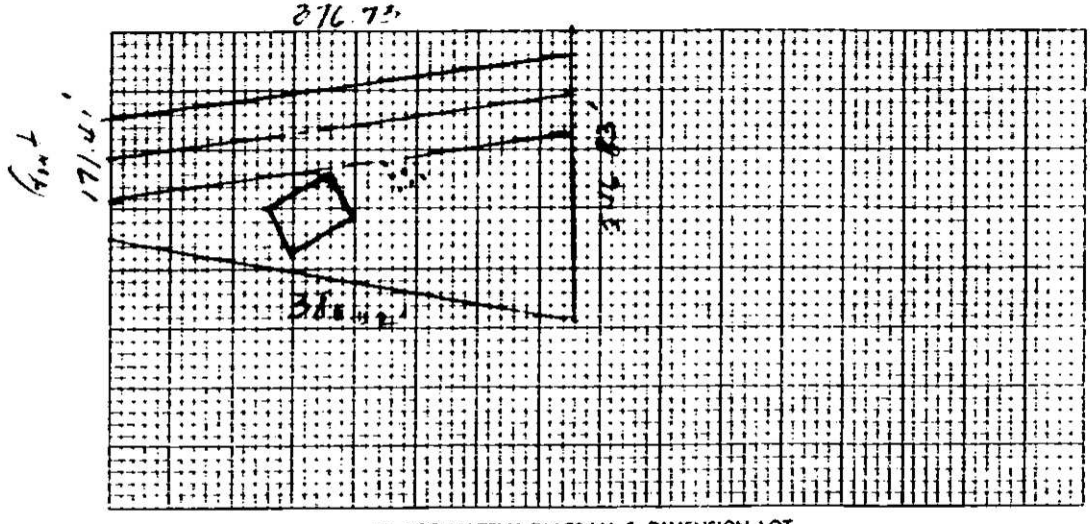
4) LOCATION OF PROPERTY Country Estates- Mt. Holly-Huntersville Road (STREET OR COUNTY ROAD)

5) SUBDIVISION LOT NO. 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

1" = 1'

Conrad N Carter
OWNER

FORM NO E-1-9-1-72

HEALTH DEPARTMENT'S COPY

File

MECKLENBURG COUNTY
Department of Public Health
1200 Blythe Boulevard
Charlotte, North Carolina 28203

Telephone 374-2113

Date Issued
1. 7-13-73
2. 8-14-73
3. _____

SITE DISAPPROVAL REPORT
INDIVIDUAL SEPTIC TANK SYSTEM WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

SDR No. 6570
T.C. No. _____

NAME OF OWNER Carter, Conrad Norwood

ADDRESS OF OWNER 5336 Furman Place ZIP 28210

LOCATION OF LOT Country Estates, Mt. Holly-Huntersville Road

The lot described above has been disapproved for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge due to the following:

FAILURE TO PASS PERCOLATION TEST (60 minutes per inch or less)

	Test No.	Date of Test	Percolation Rate
X	1.	7-12-73	150+ min/in
X	2.	8-10-73	200+ min/in
____	3.	_____	_____ min/in

X ON SITE INSPECTION REVEALED LOT TO BE UNSUITABLE FOR THE FOLLOWING REASON(S) The soils are of the Wilkes series. These soils have plastic clay subsoils which contain swelling clay minerals. As a result, they have slow permeability and percolation rate. In addition, the soils are shallow to impervious, partially decomposed rock material.

W. Earle Lyon, Jr.
Soil Scientist

Environmentalist

(Stencil No.)
EHD 398
8/70

FORM NO.
E-19-8-14-70

Serial No. 3538

PTR No. 6574
P.O.
T. C. No. 031-183-03

Date Issued August 27, 1973

Map Date 4-27-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

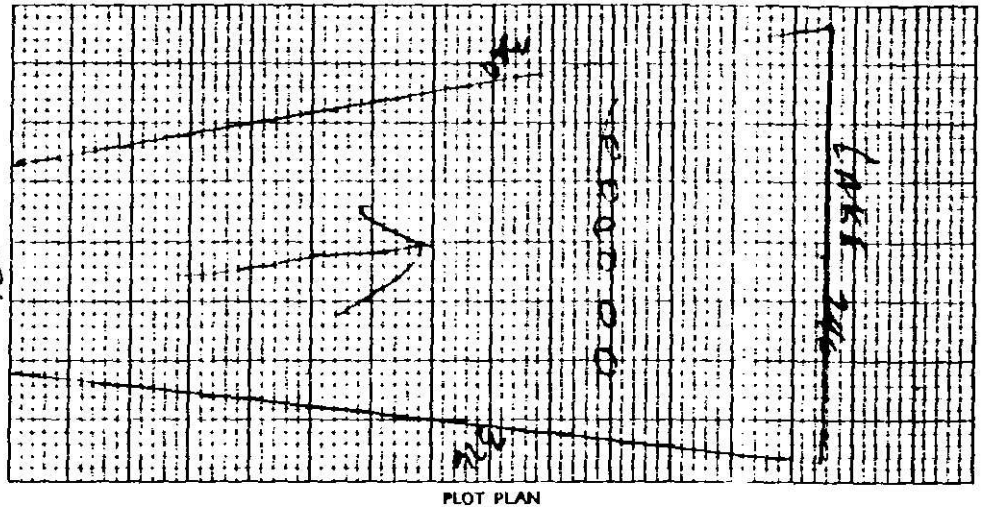
PERCOLATION TEST REPORT

NAME OF OWNER Carter (LAST) Conrad (FIRST) Norwood (MIDDLE)

ADDRESS OF OWNER 5336 Rm Furman Place ZIP 28210

LOCATION OF PROPERTY Mt. Holly-Huntersville Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO. 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 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.

A. R. Dickerson

Director, Environmental Health Division or
Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

Date Received 7-11-73

ICAR(S) Application No 6574

T C No

Map Date

1500 [illegible]

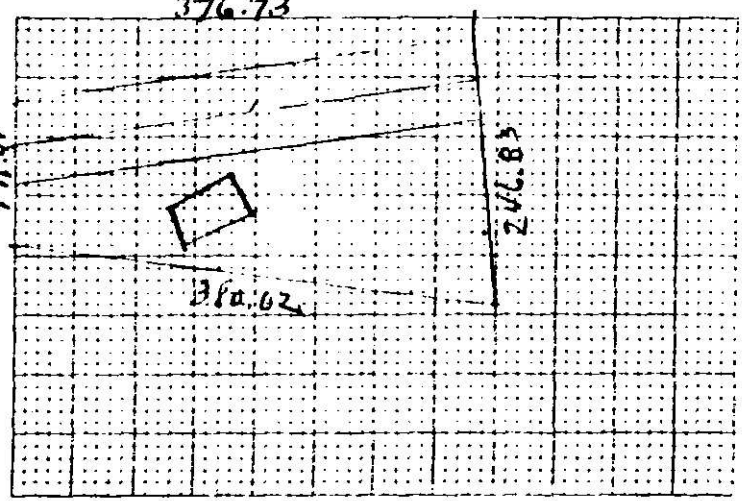
MECKLENBURG COUNTY HEALTH DEPARTMENT

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) 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)

4) No of Bedroom 5

5) Income Dwg Map No
Employee

6) Washing Machine X Yes No

7) Garbage Disp X Yes No

8) Dishwasher X Yes No

9) Water Supply
A) Individual Well X
B) Government System
C) Community System
1 Well owned
2 Government system

10) Sewage System
House located within 200 feet of public sewer Yes No
House located within 200 feet of community sewer Yes No

11) FHA Case No

12) VA Case No

13) NAME OF OWNER CARTER (LAST) CONRAD (FIRST) NORWOOD (MIDDLE)

14) ADDRESS OF OWNER 5336 FURMAN PLACE

15) PHONE NO Home 523-0476 Office 376-3353

16) LOCATION OF SYSTEM MT. HOLLY - HUNTERSVILLE ROAD, COUNTRY EST. (STREET OR COUNTY ROAD)

17) SUBDIVISION COUNTRY EST. Lot No 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) 6574

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.

7-11-73
DATE OF APPLICATION

Conrad N Carter
OWNER

FORM NO. E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued August 27, 1973 **Serial No. 3351**

LA No. 6574
P.O.
T. C. No. 031-183-03

Map Date 4-27-73

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 Carter (LAST) Conrad (FIRST) Norwood (MIDDLE)

ADDRESS OF OWNER 5336 Furman Place ZIP 28210

LOCATION OF LOT Mt. Holly-Huntersville Road (STREET OR COUNTY ROAD)

SUBDIVISION Country Estates LOT NO _____ 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/inch 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 6574. 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

T. P. Bridgeman
Environmentalist

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

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

HEALTH DEPARTMENT'S COPY

Date Issued 7/24/74 Serial No. 5078 C of A (s) No. 6574

T C No 8031-183-03

Map Date 4-27-73

John M Atkinson
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 CARTER (LAST) CONRAD (FIRST) (MIDDLE)

Location of Property COUNTRY ESTATES - MT HOLLY - HUNTERSVILLE RD

Application Number 6574 Permit Number 6574

Inspection Date:

Liquid Capacity of Tank 1500gal Tank Material PC

Total Length of Drain Tile 150' ST 990' WW Number of Lines 4

Depth of Filter Material 3' 0" Cover Depth 2'

Water Supply Source 2ND WELL Distance from Water Source 100'+

Excavation Inspected 7-15, 22, 24-74 (DATE) Tank Inspected (DATE)

Nitrification Field Inspected 7-22 24-74 (DATE)

Washing Machine Line Inspected, If Applicable 7-22-74 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been X 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(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 Rocky

K P Bingham
Environmentalist

FORM NO E-6-9-1-72

SEE REVERSE SIDE

Date Received 7-3-73

APT No. 6574

T. C. No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Carter, (LAST) Conrad (FIRST) Norwood (MIDDLE)

2) ADDRESS OF OWNER 5336 Surman Place ZIP 28210

3) PHONE NO. Home 523-0476 Office 376-3353

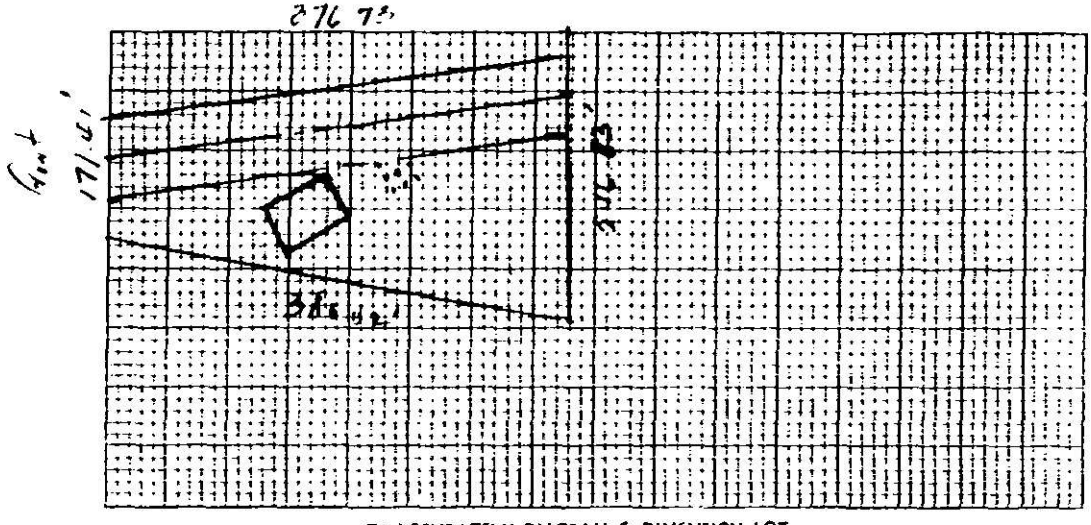
4) LOCATION OF PROPERTY Country Estates- Mt. Holly-Huntersville Road (STREET OR COUNTY ROAD)

5) SUBDIVISION LOT NO 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

Conrad N Carter

OWNER

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

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 7-11-73

ICAR (S) Application No 6574

T C No

Map Date

1500

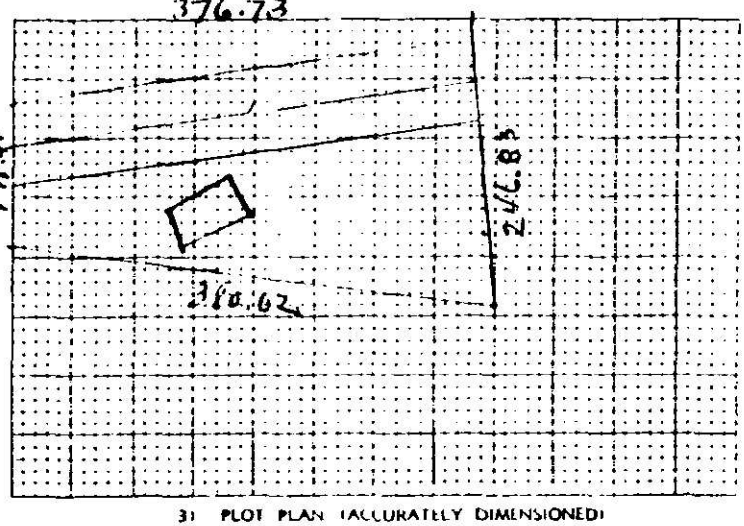
MECKLENBURG COUNTY HEALTH DEPARTMENT

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) 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)

4) No of Bedrooms 5

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 X
B) Governmental System ___
C) Community System ___
1 Well Source ___
2 Governmental ___

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 CARTER (LAST) CONRAD (FIRST) NORWOOD (MIDDLE)

14) ADDRESS OF OWNER 5336 FURMAN PLACE

15) PHONE NO Home 523-0476 Office 376-3353

16) LOCATION OF SYSTEM MT. HOLLY - HUNTERSVILLE ROAD, COUNTRY EST. (STREET OR COUNTY ROAD)

17) SUBDIVISION COUNTRY EST. Lot No. ___ 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) 6574

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.

7-11-73
DATE OF APPLICATION

Conrad N Carter
OWNER

FORM NO. E-4-9-1-72

HEALTH DEPARTMENT'S COPY

File

MECKLENBURG COUNTY
Department of Public Health
1200 Blythe Boulevard
Charlotte, North Carolina 28203

Telephone 374-2113

Date Issued
1. 7-13-73
2. 8-15-73
3. _____

SITE DISAPPROVAL REPORT
INDIVIDUAL SEPTIC TANK SYSTEM WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

SDR No. 6574
T.C. No. _____

NAME OF OWNER Carter, Conrad Norwood

ADDRESS OF OWNER 5336 Furman Place ZIP 28210

LOCATION OF LOT Country Estates, Mt. Holly-Huntersville Road

The lot described above has been disapproved for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge due to the following:

FAILURE TO PASS PERCOLATION TEST (60 minutes per inch or less)

	Test No.	Date of Test	Percolation Rate
X	1.	7-12-73	150+ min/in
X	2.	8-10-73	200+ min/in
____	3.	_____	_____ min/in

X ON SITE INSPECTION REVEALED LOT TO BE UNSUITABLE FOR THE FOLLOWING REASON(S) The soils are of the Wilkes series. These soils have plastic clay subsoils which contain swelling clay minerals. As a result, they have slow permeability and percolation rate. In addition, the soils are shallow to impervious, partially decomposed rock material.

W. Curtis Lyon, Jr.
Soil Scientist

Environmentalist

(Stencil No.)
EHD 398
/70

FORM NO.
E-19-8-14-70

Serial No. 3538

PTR No. 6574
P.O.
T. C. No. 031-183-03
Map Date 4-27-73

Date Issued August 27, 1973

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

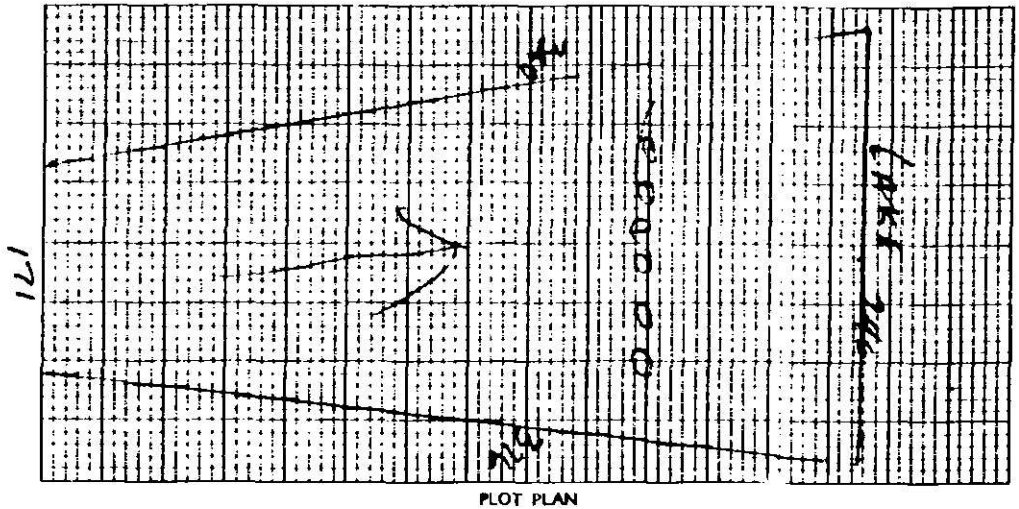
PERCOLATION TEST REPORT

NAME OF OWNER Carter (LAST) Conrad (FIRST) Norwood (MIDDLE)

ADDRESS OF OWNER 5336 Rm Furman Place ZIP 28210

LOCATION OF PROPERTY Mt. Holly-Huntersville Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 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 buildings, or of the wastewater treatment system on the said lot.
2. The size of the septic tank wastewater teratment 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

Date Issued August 27, 1973 **Serial No. 3351**

LA No. 6574
P.O.
T. C. No. 031-183-03

Map Date 4-27-73

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 Carter (LAST) Conrad (FIRST) Norwood (MIDDLE)

ADDRESS OF OWNER 5336 Furman Place ZIP 28210

LOCATION OF LOT Mt. Holly-Huntersville Road (STREET OR COUNTY ROAD)

SUBDIVISION Country Estates LOT NO. _____ 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 6574. 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

Environmentalist

Director, Environmental Health Division or Authorized Section Head

FORM NO E-3-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 7/15/74 Serial No. 5495 ICAR(S) Permit No 6574

T C No

Map Date

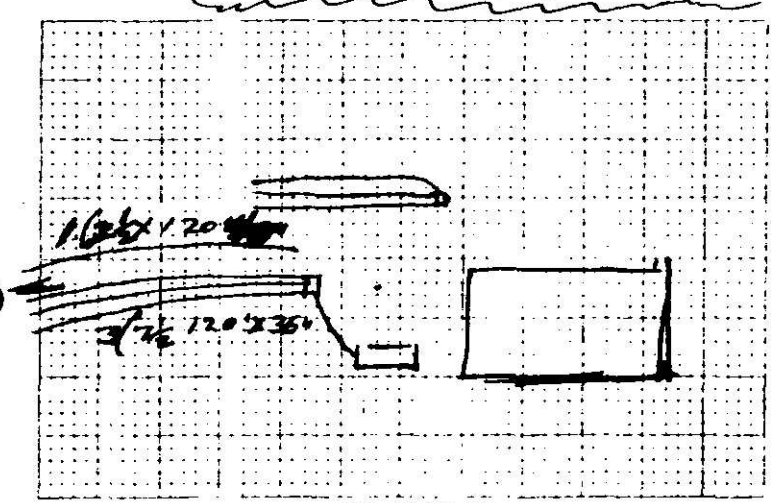
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 X Install or Construct, Alter or Repair the individual septic tank waste water 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 6574, dated 5/11/74 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 7/30/74, after which date this permit shall be null and void LAKE



PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 1500 gal

Tank Construction PE

Absorption and/or Nitrification Lines ST WM

Total Line Length ST 100' WM 150'

Number of Lines ST 4 WM-3

Distance from House 10'

Distance from Property Line 20'+

Distance from Well 75'+

NAME OF OWNER CONRAD N. CARTER

LOCATION OF PROPERTY (COUNTRY ESTATES Off Holly - Hunters Hill Rd

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 SOIL APPEARS POOR

R Brisman

RAB/RAB

Division or Section Head

L R Bridgeman

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 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

Form E-5-9-1-72

Date Issued 7/24/74 Serial No. 5078 C of A (s) No. 6574

T C No 8021-183-03

Map Date 4-27-73

John R Atkinson
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 CARTER (LAST) CONRAD (FIRST) (MIDDLE)

Location of Property COUNTRY ESTATES - MOBILE - HUNTERSVILLE RD

Application Number 6574 Permit Number 6574

Inspection Data:

Liquid Capacity of Tank 1500gal Tank Material PC

Total Length of Drain Tile 5T 990', WM 150' Number of Lines 4

Depth of Filter Material 3' Cover Depth 2'

Water Supply Source 2ND WELL Distance from Water Source 100'+

Excavation Inspected 7-15, 22, 24-74 (DATE) Tank Inspected (DATE)

Nitrification Field Inspected 7-22 24-74 (DATE)

Washing Machine Line Inspected, If Applicable 7-22-74 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been X 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 (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 Rocky

R P Bingham
Environmentalist

FORM NO E-6-9-1-72

IMPROVEMENTS NOT