WELL RECORD Well Permit No. 6336

MAIL COMPLETED FORM TO: WELL WATER SUPPLIES

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION, 1200 BLYTHE BOULEVARD, CHARLOTTE, N. C. 28203

Drilling Contractor McCall Bros Charlotte

1. Location of property Falcon Aviat
2. Name of owner Charlotte Dept
   Address Charlotte
3. Does this well replace an existing well? Yes. New
4. Topography (circle one): draw, slope, hilltop, valley, flat
5. Use of well [illegible] Date completed 11-25-75
6. Rig type or method D. D Total depth
7. Casing:

From	to	ft.	Depth	Inside Diam.	Wall thick. or Wt./ft.	Type

8. Grout:

From	to	ft.	Depth	Material	Method
0	[illegible]				

9. Liner, if used: Depth Diameter
   No. holes drilled and abandoned
10. Water zones (depth and gpm)
11. Static water level: [illegible] ft. above / below top of casing
    which is ft. above land surface. Elev.
    Date
12. Yield (gpm) 5 Method of testing Jet
13. Pumping water level: 15 ft. after 2 hrs.
    at 5 gpm.
14. Water quality Temperature (°F)
15. Well sterilization method
16. Permanent pump: Type Make
    Installed – Date By
    Capacity gpm. Hp TDH
    Intake depth Airline depth
17. Remarks:

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

William Shearin
SIGNATURE OF CONTRACTOR OR AGENT

DRILLING LOG

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

RECEIVED NOV 26 1975

FORM NO. E-22-5-1-73

Date Received 11/12/75 Apt. No. (S) Application No. (W) #6336

MCMANUS-305 T. C. [redacted]

FALCON CREST Map Date 835-126-22

MECKLENBURG COUNTY HEALTH DEPARTMENT 11-12-75

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Charlotte Dev. Co
LAST FIRST MIDDLE

ADDRESS OF OWNER 6725 Old Providence ZIP

PHONE NO. Home Office 366 2243

LOCATION OF PROPERTY
STREET OR COUNTY ROAD

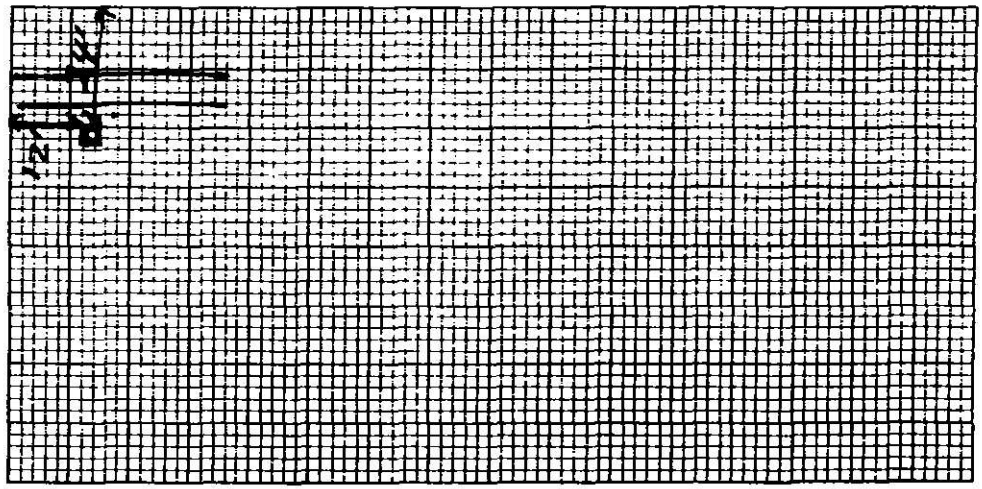
SUBDIVISION LOT NO. BLOCK NO.

MAP BOOK NO. PAGE NO. FHA LOAN

DEED REFERENCE: DEED BOOK PAGE NO. VA LOAN

WELL CONTRACTOR McCall Bros 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 X individual, _____ semi public, or _____ public water supply:



ACCURATELY DIAGRAM & DIMENSION LOT

11/12/75
DATE OF APPLICATION

OWNER

Application approved and permit hereby granted

Permit No: 6336

ENVIRONMENTALIST

FORM NO. E-20-5-1-73

HEALTH DEPARTMENT'S COPY

K

Date Received 10 12 73

MECK COUNTY HEALTH DEPT.
RECEIVED
OCT 12 1973
ENVIRONMENTAL HEALTH DIVISION

APT No 6336

T C No _____

Map Date _____

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Charlotte Development Co
LAST FIRST MIDDLE

2) ADDRESS OF OWNER 6225 Old Providence Rd ZIP 28211

3) PHONE NO. Home _____ Office 366-2223

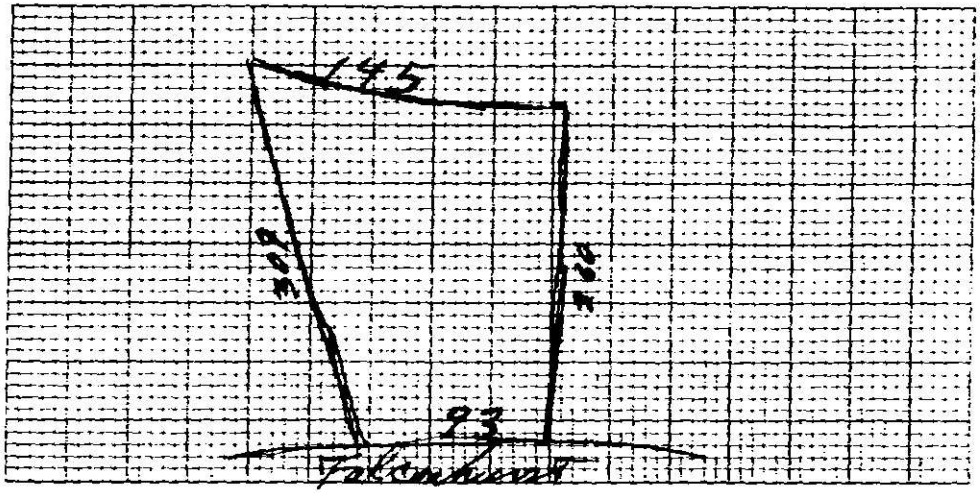
4) LOCATION OF PROPERTY Falconhurst Drive
STREET OR COUNTY ROAD

5) SUBDIVISION Westhaven LOT NO. 6 BLOCK NO 3

MAP BOOK NO 9 PAGE NO. 325

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

OWNER

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

HEALTH DEPARTMENT'S COPY

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

Telephone 374-2113

Date Issued
1. July 13, 1973
2. Sept. 11, 1973
3. Sept. 27, 1973
4. Oct. 29, 1973

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

SDR No. 6336
T.C. No. 035-176-22
1-22-73

NAME OF OWNER Charlotte Development Company

ADDRESS OF OWNER 6725 Old Providence Road, Charlotte ZIP 28211

LOCATION OF LOT Falconhurst Drive, Lot 6, Block 3

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.	7-13-73	90 min/in
X	2.	9-26-73	120 min/in
X	3.	10-26-73	200 min/in

9-10-73 - These soils have very plastic and sticky clay subsoils which contain swelling clay minerals. They [illegible] of REASON(S) rainfall. These factors result in inadequately slow percolation rate and permeability.

D. Everette Cummings Jr.
Soil Scientist

Environmentalist

(Stencil No.)
MED 398
8/71

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
INTER-OFFICE COMMUNICATION

DATE: September 11, 1973

TO: Moffitt Kirby
Environmentalist

FROM: W. Everette Lynn, Jr. W.E.L.
Soil Scientist

SUBJECT: APT #6336 (Charlotte Development Company)
Lot No. 6, Block 3 on Falconhurst Drive
Westbourne Subdivision
9/10/73

Soils were found to be of the Helena series. These soils have very plastic and sticky clay subsoils which contain swelling clay minerals. They may also have a perched high water table during periods of high rainfall. These factors result in inadequately slow percolation rate and permeability.

Based on this investigation, it is recommended that the lot be disapproved for installation of a septic tank system.

WEL:jdg

Serial No. 3813

PTR No 6336

T C No. 035-176-22

Date Issued November 7, 1973

Map Date 1-22-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

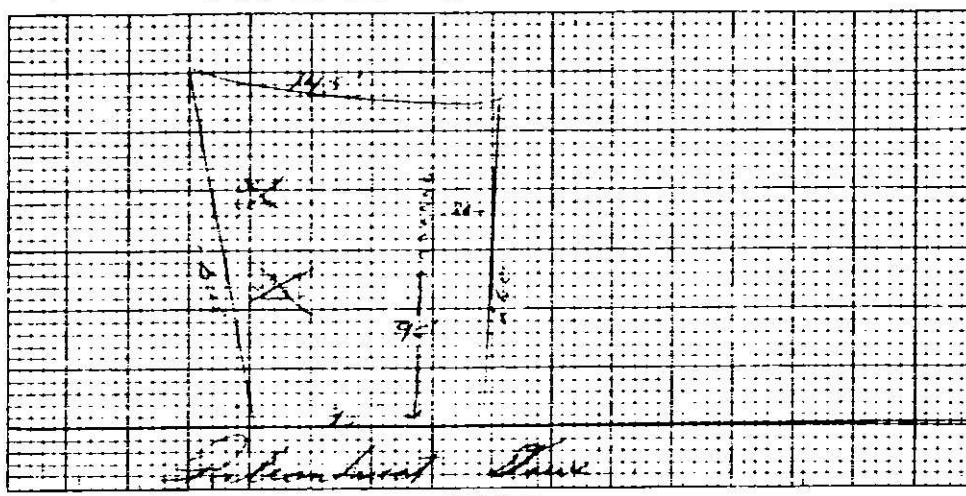
PERCOLATION TEST REPORT

NAME OF OWNER Charlotte Development Company
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 6725 Old Providence Road ZIP 28211

LOCATION OF PROPERTY Falconhurst Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Westbourne LOT NO 6 BLOCK NO 3



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 waste water 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.

John R. Adkisson

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 11-20-73

MECK COUNTY HEALTH DEPT
RECEIVED
NOV 2 1973
ENVIRONMENTAL HEALTH DIVISION

Application No 6336

T C No 135-176-22

Map Date 1-22 73

MECKLENBURG COUNTY HEALTH DEPARTMENT

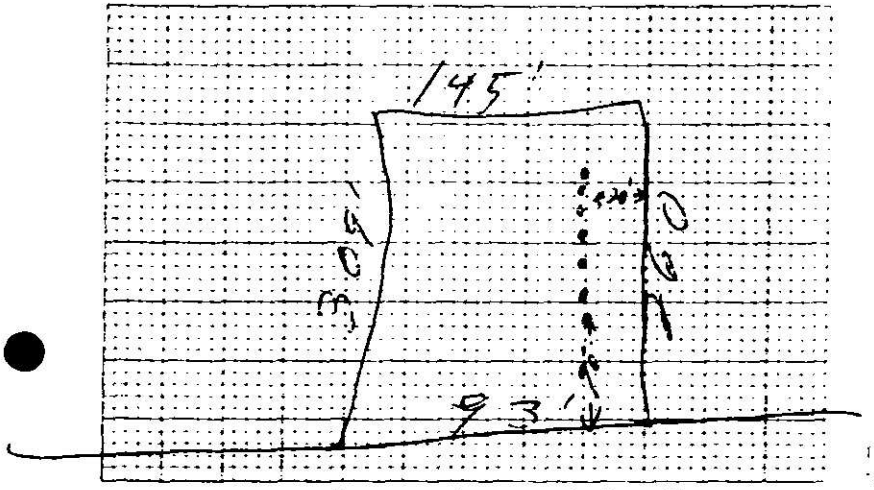
ENVIRONMENTAL HEALTH DIVISION

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 3

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 ✓
B) Governmental System
C) Community System
1) Well
2) Governmental System

10) Sewage System
House occupied within 2 years of public sewer Yes ✓ No
House occupied within 2 years of community sewer Yes ✓ No

11) FHA Case No.

12) VA Case No.

13) NAME OF OWNER Charlotte Development Co
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 6725 Providence Rd

15) PHONE NO Home Office 366-2273

16) LOCATION OF SYSTEM Falconhurst Drive
STREET OR COUNTY ROAD

17) SUBDIVISION Westhaven Lot No. 6 Block No 3

Map Book No Page No.

18) DEED REFERENCE — DEED BOOK AT PAGE

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES NO DATE RUN 11-6-73 PK260

20) PTR NUMBER (See Instructions) 6336

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.

DATE OF APPLICATION 11-16-73

OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3629

LA No. 6336

Date Issued November 20, 1973

T C No 035-176-22

IMPROVEMENTS PERMIT

Map Date 1-22-73

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 Charlotte Development Company
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 6725 Old Providence Road ZIP

LOCATION OF LOT Falconhurst Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Westbourne LOT NO 6 BLOCK NO. 3

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 6336. 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.

M. A. Hicks
Environmentalist

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

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

HEALTH DEPARTMENT'S COPY

Date Issued 5/30/75 Serial No. 6423 ICAR(S) Permit No. 6336

T C No 035-176-22

Map Date 1-22-23

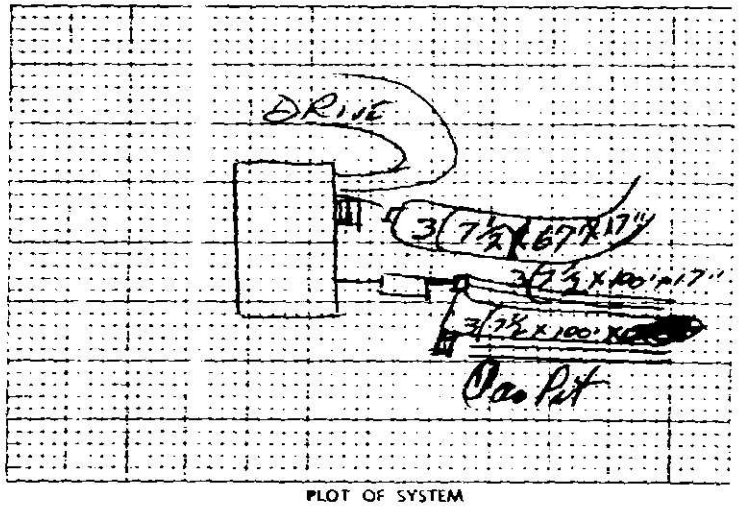
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 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 6336, dated 11/20/73 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 6/30/75, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 500 gal

Tank Construction PC

Absorption and/or Nitrification Lines

Total Line Length 600 ST 200 WM

Number of Lines 3 3

Distance from House 10'

Distance from Property Line 10'

Distance from Well 80'+

NAME OF OWNER CHARLOTTE DEV. CO (McMANUS)

LOCATION OF PROPERTY FALCONHURST LOT 6-3

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: S.T. drain 2 Beds 7½'x100'x17" line & 2nd box 1" (min) above high bed -

JA/LPB

Division or Section Head

L P 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.

REV. E-5-9-1-72

Serial No. 5345

C of A Ist No C336

Date Issued 1/[illegible]/73

T C No C33 [illegible]

Map Date [illegible]

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 [illegible] (LAST) (FIRST) (MIDDLE)

Location of Property [illegible]

Application Number C336 Permit Number C336

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material [illegible]

Total Length of Drain Tile [illegible] Number of Lines [illegible]

Depth of Filter Material 12" Cover Depth 36-48"

Water Supply Source [illegible] Distance from Water Source [illegible]

Excavation Inspected 15 Jan 73 (DATE) Tank Inspected 15 Jan 73 (DATE)

Nitrification Field Inspected 15 Jan 73 (DATE)

Washing Machine Line Inspected, If Applicable 15 Jan 73 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been [illegible] installed or constructed, [illegible] 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 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]

[illegible]

[illegible]

[illegible]

[illegible]

Environmentalist

FORM NO E-6-9-1-72

[illegible] DEPARTMENT CO.