Date Received 1-5-84

MECK COUNTY DEPARTMENT OF
RECEIVED
JAN 5 1984
ENVIRONMENTAL HEALTH

SIR No. 2048 ✓

T. C. No. 227 29: 52

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Foster (LAST) Lawn (FIRST) Junior's (MIDDLE)

2) ADDRESS OF OWNER 3900 Lafeline Drive ZIP 28105

3) PHONE NO. Home 847-5824 Office 542 7276

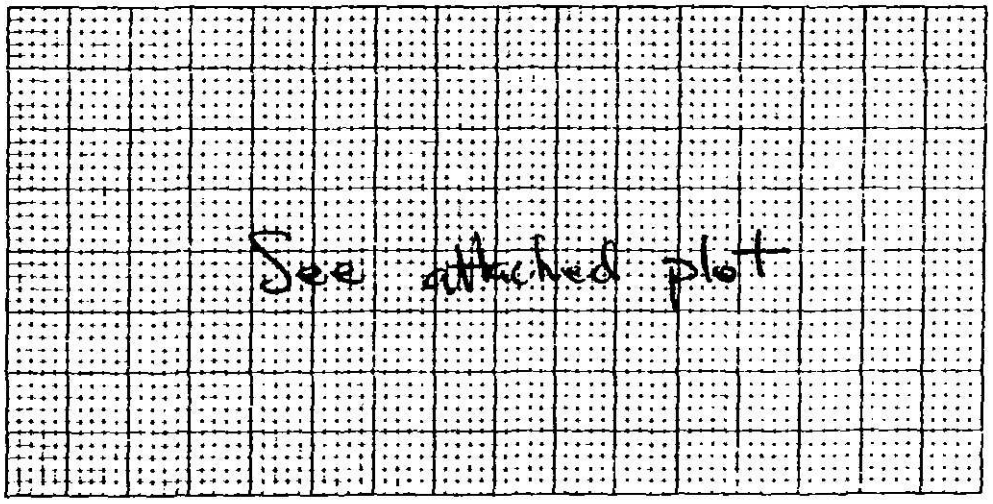
4) LOCATION OF PROPERTY 9109 Pine Circle (STREET OR COUNTY ROAD)

5) SUBDIVISION Waxhaw Acres LOT NO. _____ BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. _____

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 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

Steven N. Foster
OWNER

EHD-S-74

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20491

T.C. NO. Po 227 0002

(Ground Absorption Sewage Disposal)

OWNER: Vivian H. Faulk
ADDRESS: 3400 Johnston Rd.
Matthews N.C.
LOCATION OF SITE: 4109 Alpine Dr.

PLAT NO:
LOT SIZE: 46,917

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U — 2-8%	S PS (U) complex slopes	S (PS) U — 2-8%	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) U Clay	S PS U —	S PS U 2-1 Clay	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) U Blocky	S PS U —	S (PS) U Blocky	S PS U
4. SOIL DEPTH (inches)	S (PS) U 30-40"	S PS U —	S PS U 10-30"	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U >36"	S PS U —	S PS U <36"	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) U >36" to ground water	S PS (U) Eroded Areas drainage needed	S (PS) U >36" to ground water	S PS U
7. OTHER (Specify)	S Somewhat PS Limited U Area sewer	S PS U	S PS U	S PS U
8. SOIL GROUP	IUA	—	IUB	
9. SITE CLASSIFICATION	provisionally suitable	unsuitable	unsuitable	
10. SOIL SERIES	Cecil-Lilly	complex slopes	Blue Ridge-Lilly	

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: Somewhat limited area recommend plans for pump, well, & system installation be submitted

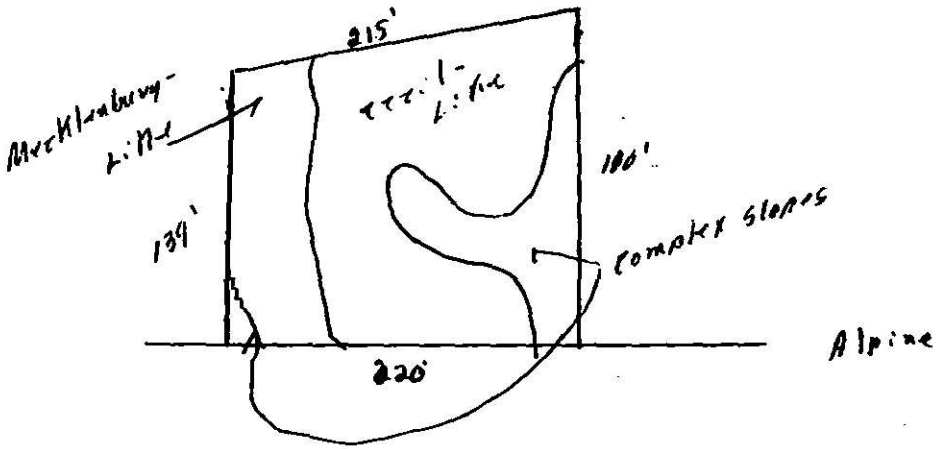
Described by: William A. Marlin
Title: Soil Scientist

Date: 1-30-87

EHD 539 (Revised: 6/82)

1

20494
PO 227091-02



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

SIR. NO. 20484
T.C. NO. PO 227-091-02
DATE: 1-30-84

Dawn H. Foster
3900 Lakeside Drive
Matthews, NC 28105

Re: Property located at Alpine Circle

Dear Ms. Foster:

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,

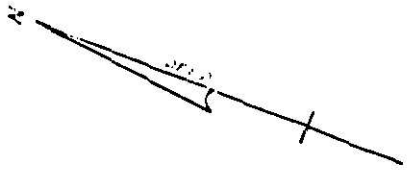
for Bill D. Hardister, Jr.
Environmental Health Supervisor

BDH/kbg

Enclosure

... 31 DAY OF OCTOBER 1985 I SURVEYED THE PROPERTY ... AND THAT THE TITLE LINES AND THE WALLS OF THE BUILDINGS IF ANY ARE ...

... Edward L Killough
... REGISTERED SURVEYOR





DONALD C O'HAIR
D.B. 4278 PG 448
M.B. 1 PG 69

... A MOORE, JR.
... PG 448
M.B. 1 PG 69

IRON SET

S 32°58'E 215.00'

IRON SET

S 68°22'30" W 215.11'

DAWN HUMENIK FOSTER
D.B. 4586 PG. 079

SUE PERRY DEATON
... 4228 PG 046
M.B. 1 PG. 69

0.96 Acre

227-091-07

N 72°42'00" E 188.06'
139.06'

IRON SET

IRON SET

UNNAMED STREET

N 18°24' W 142.5'

N 20°11' W 16.41'

N 40° 2'00" E 73.0'

S R/W

ALPINE CIRCLE

... 227-091-07 out of 227-091-02

BOUNDARY SURVEY
OF
0.96 ACRE LOT ON
ALPINE CIRCLE
PROVIDENCE TOWNSHIP, MECKLENBURG COUNTY, N.C.

1" = 50'

SEE INSTRUCTIONS ON BACK

Date Received _____

ICAR(S) Application No. 20484

T. C. No. EO 227-091-02

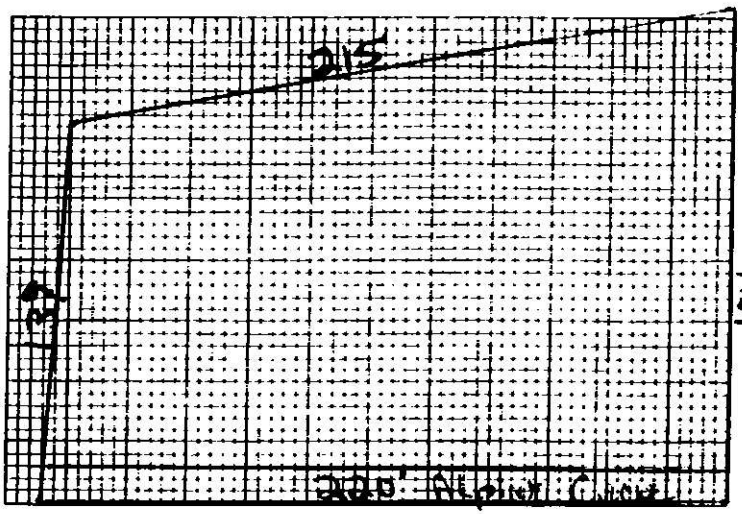
Map Date _____

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 (X)
B) Governmental System _____
C) Community System
1 Well source _____
2 Governmental source CMUD
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 Fietrafesa (LAST) Arthur (FIRST) V. (MIDDLE)

14) ADDRESS OF OWNER 317 Hillside Ave. Charlotte, N.C.

15) PHONE NO. Home 376-23[illegible] Office 552-3211

16) LOCATION OF SYSTEM 9109 Alpine Circle (STREET OR COUNTY ROAD)

17) SUBDIVISION Lakeside Lot No. _____ Block No. _____

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK 45[illegible] AT PAGE 0[illegible]

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES ___ NO DATE RUN 1/30/84

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.

9/23/85
DATE OF APPLICATION

Arthur V. Fietra
OWNER

EHD-5-76

Environmental Health Department's Copy

Serial No. 8941

SIR No. 20484

Date Issued 9-26-85

T. C. No. PO 227-091-02

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 Pietrafesa, (LAST) Arthur (FIRST) V. (MIDDLE)

ADDRESS OF OWNER 317 Hillside Ave., Charlotte, NC ZIP 28209

LOCATION OF LOT 9109 Alpine Circle (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

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 21284. 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.

B. R. Ferguson
Environmentalist

Eric D. Hardesty
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued 11-27-85

Serial No. 08731

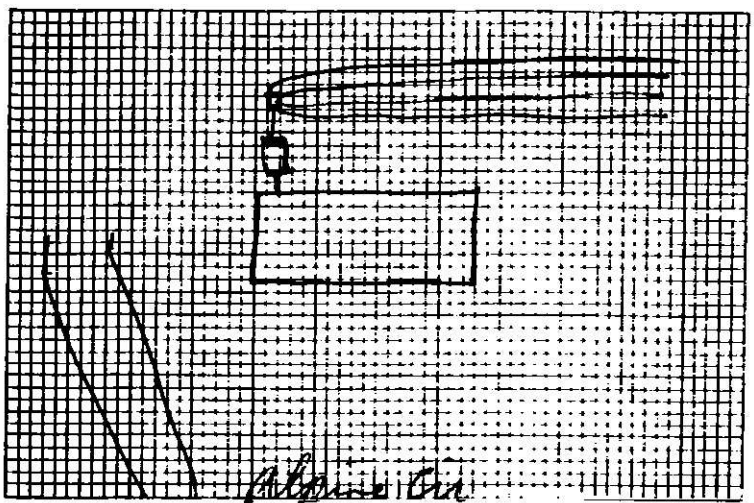
ICAR(S) Permit No. 20484

T. P. No. 227-091-02

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 20484 dated 9-23-85 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 12-27-85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate Pt

Liquid Capacity of Tank 1500

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 City

NAME OF OWNER Arthur Pietrafesa

LOCATION OF PROPERTY 9109 Alpine Circle

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'X100'X12" stone

Comments:

B. Henderson
Division or Section Head

D. R. 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-S-76

Property Owner's Copy

C of A (s) No. 20484

Date Issued 12-30-85 **Serial** 8099 PD T. C. No. 227-091-02 L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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

Name of Owner Pietrafesa (LAST) Arthur (FIRST) ____ (MIDDLE)

Location of Property 9109 Alpine Circle

Application Number — Permit Number —

Inspection Date:

Liquid Capacity of Tank 1500 Tank Material PVC

Total Length of Drain Tile 400' Number of Lines 4

Depth of Filter Material 12" Cover Depth 15" - 24"

Water Supply Source City Distance from Water Source —

Excavation Inspected 12-30-85 (DATE) Tank Inspected 12-27-85 (DATE) by Bass

Nitrification Field Inspected 12-30-85 (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, 1500 ST, TCH, 1200 SFT, 12 G, Tan/l

D. R. Ferguson
Environmentalist

EHD-5-76

Environmental Health Department's Copy