Date Received 5-17-84

SIR No. 21029

T. & P. No. 001-201-05

Map Date 1978

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Martin Development Group
(LAST)

2) ADDRESS OF OWNER 1800 One Tryon Center (FIRST) (MIDDLE) ZIP 28284

3) PHONE NO Home _____ Office 332-1242

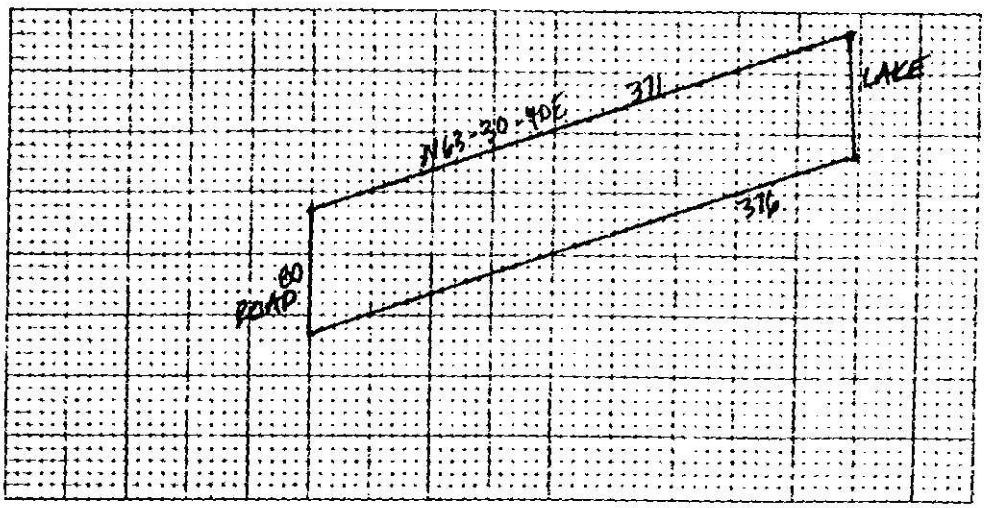
4) LOCATION OF PROPERTY North Point Rd.
(STREET OR COUNTY ROAD)

5) SUBDIVISION Lookout Point LOT NO [redacted] 48 1 BLOCK NO _____

MAP BOOK NO [redacted] 1 PAGE NO [redacted] 20

6) DEED REFERENCE DEED BOOK N/A 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

_____
OWNER

EHO-5-74

ENVIRO[illegible] HEALTH DEPARTMENT'S COPY

30

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 210 ~~27~~

T.C. NO. PO 001-201-05

(Ground Absorption Sewage Disposal)

OWNER: Martin Dean Group
ADDRESS: [illegible] Tyson Center, Charlotte ~~[illegible]~~
PLAT NO: 140
LOT SIZE: Approx 29,600 .06
LOCATION OF SITE: North Point Rd

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S / PS 2-12% / U	S / PS complex slopes / U	S / PS / U	S / PS / U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S / PS clay / U	S / PS clay / U	S / PS / U	S / PS / U
3. SOIL STRUCTURE (12-36 inches)	S / PS Blocky / U	S / PS Blocky / U	S / PS / U	S / PS / U
4. SOIL DEPTH (inches)	S / PS 36-40" / U	S / PS <36" / U	S / PS / U	S / PS / U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S / PS >36" / U	S / PS <36" / U	S / PS / U	S / PS / U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S / PS >36" to ground water / U	S / PS >36" to ground water / U	S / PS / U	S / PS / U
7. OTHER (Specify)	S / PS See Route / U	S / PS / U	S / PS / U	S / PS / U
8. SOIL GROUP	10A	10A		
9. SITE CLASSIFICATION	Provisionally suitable	unsuitable		
10. SOIL SERIES	Cecil Lake	complex slopes		

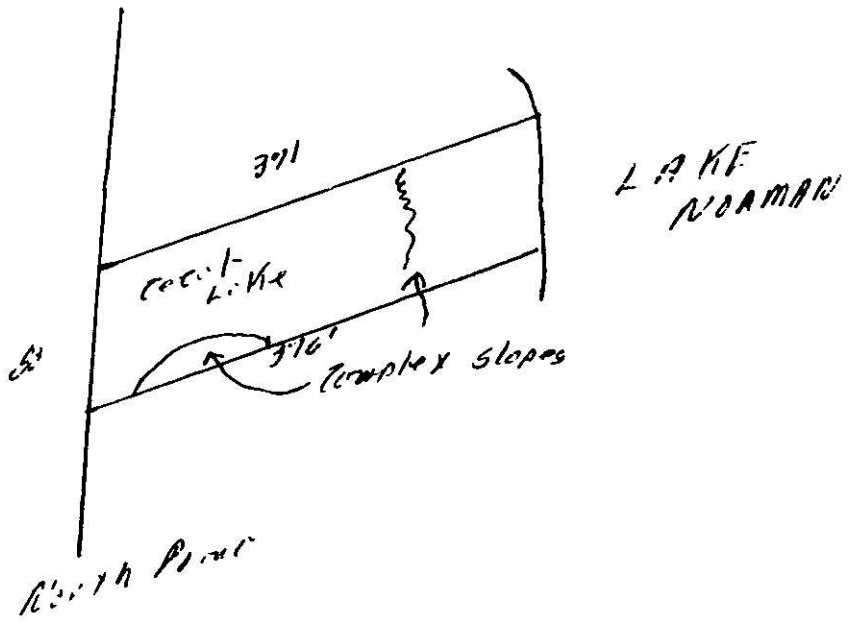
S - Suitable PS - Provisionally Suitable U - Unsuitable

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

Recommendations/Comments: Narrow lot, may require pump & 30' liner

Described by: William R. Martin
Title: Soil Scientist

Date: 7/13/84



391
LAKE NORMAN
Cecil Lake
376'
Complex slopes
North Point

29

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 210-[illegible]

T.C. NO. 001 20105

(Ground Absorption Sewage Disposal)

OWNER: Martin Dev. Group PLAT NO: Lot 49
ADDRESS: [illegible] LOT SIZE: [illegible]
Charlotte, N.C.
LOCATION OF SITE: Note 2 Point Rd

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S / PS 2-10% / U	S / PS complex slopes / U	S / PS — / U	S / PS / U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S / PS clay / U	S / PS clay / U	S / PS — / U	S / PS / U
3. SOIL STRUCTURE (12-36 inches)	S / PS Blocky / U	S / PS Blocky / U	S / PS — / U	S / PS / U
4. SOIL DEPTH (inches)	S / PS 30-40" / U	S / PS <30" / U	S / PS — / U	S / PS / U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S / PS >36" / U	S / PS <30" / U	S / PS — / U	S / PS / U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S / PS >36" Ground water / U	S / PS >36" to ground water / U	S / PS Depression / U	S / PS / U
7. OTHER (Specify)	S / PS See Note / U	S / PS / U	S / PS / U	S / PS / U
8. SOIL GROUP	10A	10A	—	
9. SITE CLASSIFICATION	Provisionally suitable	unsuitable	~~[illegible]~~ unsuitable	
10. SOIL SERIES	Cecil Like	complex slopes	Depression	

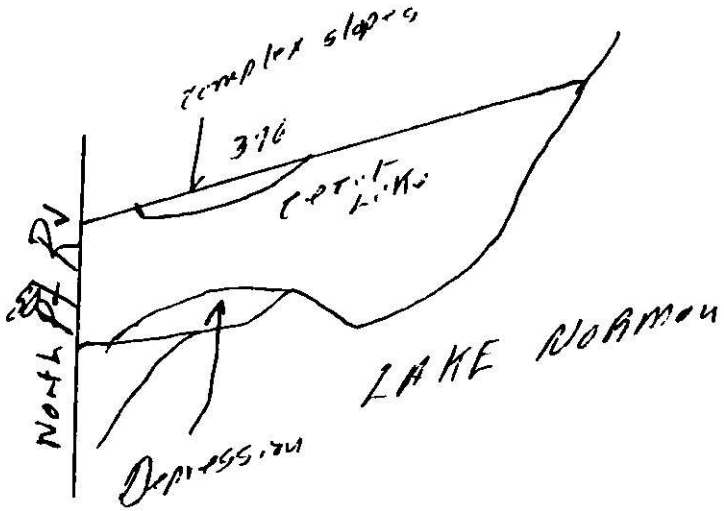
S - Suitable PS - Provisionally Suitable U - Unsuitable

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

Recommendations/Comments: System may require lift station

Described by: William R. Martin
Title: Soil Scientist

Date: 9 13 84


complex slopes
376
LAKE NORMAN
Depression

Serial No. 6476

SIR No. 21029

T C No. PO 001-201-05

Date Issued 7-31-85

Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

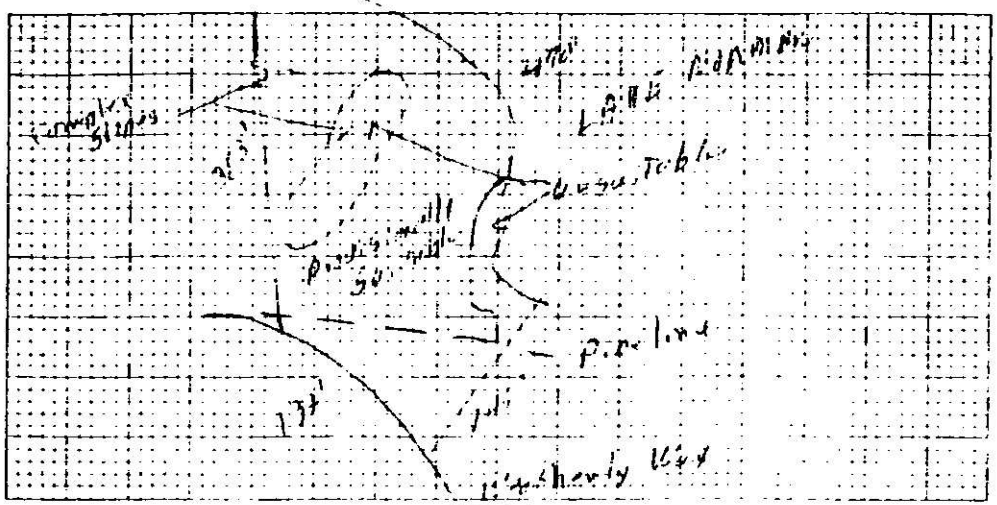
" REVISED REPORT DUE TO LOT RECONFIGURATION"

NAME OF OWNER Martin Development Group
LAST FIRST MIDDLE

ADDRESS OF OWNER 1800 One Tryon Center, Charlotte, NC ZIP 28284

LOCATION OF PROPERTY North Point Road
STREET OR COUNTY ROAD

SUBDIVISION Lookout Point LOT NO BLOCK NO



PLOT PLAN

This is to certify that [illegible] Mecklenburg County Department of Environmental [illegible] was conducted on that portion of the [illegible] PROVISIONALLY SUITABLE

The permeability rate determined by the investigation was [illegible] approved for the installation of an individual [illegible] subsurface soil absorption effluent discharge [illegible]

1. [illegible]
2. [illegible]
3. [illegible]
4. [illegible]

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 [illegible] 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 [illegible] laws, rules and regulations been in effect on the issue date.

Soil Scientist

Environmental Health Director or Authorized Section Head

EHD-5 76

Date Issued 12-4-85 **Serial No. 9135**

SIR No. 21029

T C. No. 001-201-05 PO

Map Date 1 · CE 7

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 Sorchfield, (LAST) Larry (FIRST) D. (MIDDLE)

ADDRESS OF OWNER P.O. Box 451, Cornilius, NC ZIP 28063

LOCATION OF LOT 16231 Heatherly Way (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO 1 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 21029. 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.

~~"Lift station will be required"~~ Per L Randall

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-S-76

Health Department's Copy

APPLICATION FOR AN IMPROVEMENT PERMIT

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

(OFFICE USE ONLY)

FILE: 21029

TC: 001-201-05 PC

JOB LOCATION

① ADDRESS: 16231 (STREET NO) Westhaven Lane (STREET) ② FILE: 21029

③ CITY: Huntersville ④ TAX PARCEL NO. P.O 001-201-05

⑤ SUBDIVISION: Lake Point ⑥ LOT: 1 ⑦ BLOCK:

OWNER

⑧ NAME: LARRY (FIRST) D (MIDDLE) Barnfield (LAST)

⑨ MAILING ADDRESS: P.C Box 451 Cornelius N.C.

⑩ CITY: Cornelius ⑪ STATE: N.C. ⑫ ZIP: 2803[illegible]

⑬ PHONE: (WORK) ⑭ (HOME) 892-4429

REQUEST

This request is for a(n):

⑮ [X] New installation permit ⑰ [ ] Authorization for mobile home exchange

⑯ [ ] Repair or alteration permit ⑱ [ ] Other (specify)

DESIGN CRITERIA

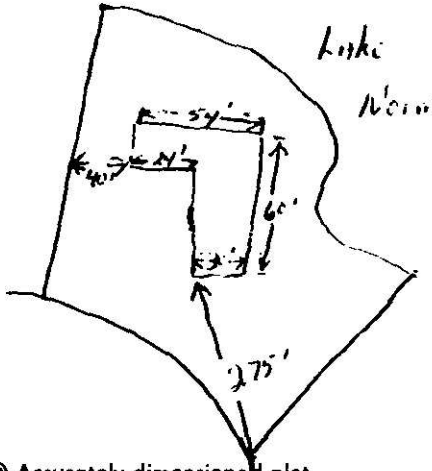
System will serve:

⑲ [X] Residence ⑳ [ ] Mobile home ㉑ [ ] Business or place of public assembly

㉒ Number of bedrooms? 3 ㉕ Type?

㉓ Maximum occupancy? 3 ㉖ Maximum number of employees?

㉔ Basement? [X] yes [ ] no ㉗ Maximum number of seats?



㉘ Accurately dimensioned plot

WATER SUPPLY

㉙ Water supply from (present or proposed):

A [ ] Individual well

B [X] 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: Larry Barnfield

Date: 12-4-85

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

Serial No. 08947

Date Issued 2/6/86

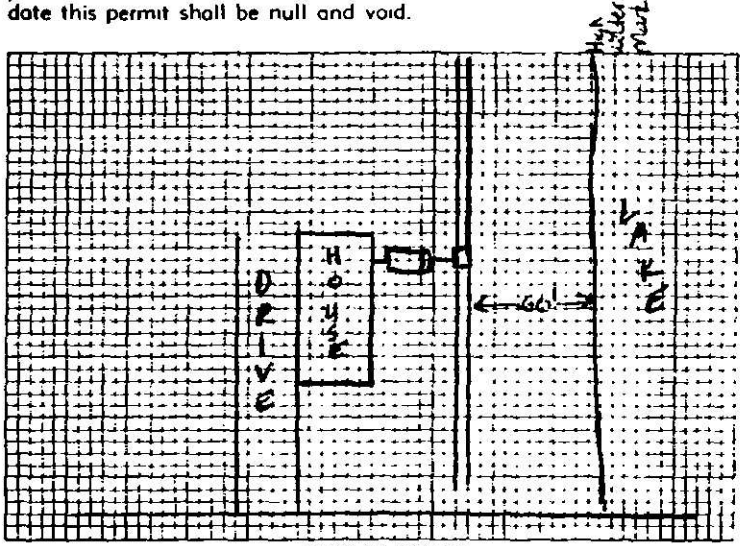
ICAR(S) Permit No 21029

TPP No. 001-201-05

Map Date V

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 21029, 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 3/6/86, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate P5

Liquid Capacity of Tank 1500 gal

Tank Construction PCC

Absorption and or Nitrification Lines

Total Line Length 400'

Number of Lines 4 X 100'

Distance from House 15'

Distance from Property Line 10'

Distance from Well community

NAME OF OWNER Burchfield, Larry D.

LOCATION OF PROPERTY 16231 Weatherly Way

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 Trenches 3'X19.5'X12" stone with gradeboards, straw as cover

Comments:

B. Hardister
Division or Section Head

Cynthia G. Bass
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

C of A (s) No. 21029

Date Issued 2-14 86 **Serial** 8241 T C No [illegible]

CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner GORCHFIELD LARRY
LAST FIRST MIDDLE

Location of Property 16231 WEATHERLY LAY

Application Number 21029 Permit Number 21620

Inspection Date:

Liquid Capacity of Tank 15[illegible] gal Tank Material [illegible]

Total Length of Drain Tile 4[illegible] Number of Lines 4

Depth of Filter Material 12" Cover Depth 2-[illegible]

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

Excavation Inspected 2-14 86 DATE Tank Inspected 2-14-86 DATE

Nitrification Field Inspected 2-14-86 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 1986, 500 ST, CON, 1200 SFT, 12G, [illegible]

[signature]
Environmentalist

EHD-5-76

Environmental Health Department's Copy