Date Received 2-12-74

APT No 7478

T C No 231-032-03

Map Date 12-14-73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

547-9336

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER GRIER (LAST) WILLIE (FIRST) BIGGERS (MIDDLE)

2) ADDRESS OF OWNER 3700 McKEE RD. MATTHEWS, N.C. ZIP 28105

3) PHONE NO Home 764-3232 Office

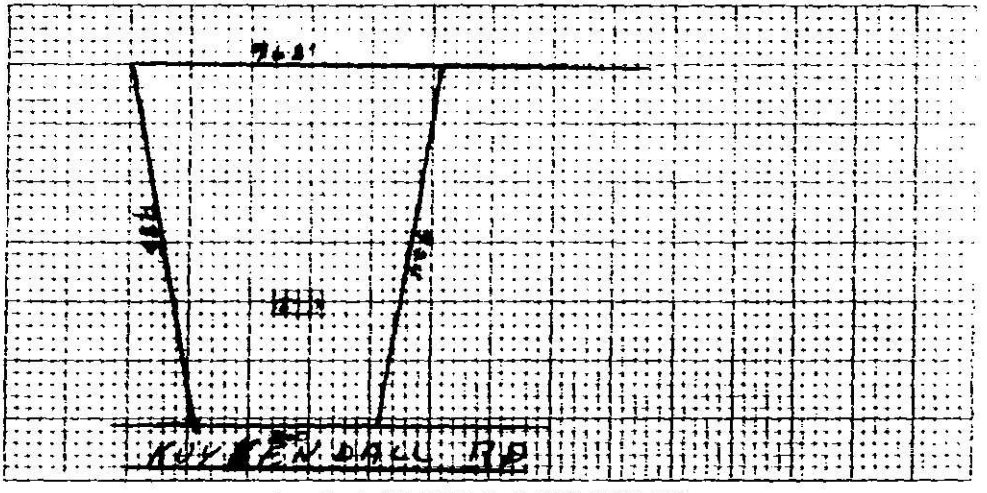
4) LOCATION OF PROPERTY KUYKENDALL (STREET OR COUNTY ROAD) ROAD # 3441

5) SUBDIVISION _____ LOT NO _____ BLOCK NO _____

MAP BOOK NO 231 PAGE NO 3

6) DEED REFERENCE DEED BOOK 1844 PAGE NO 188

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

Willie Biggers Grier
OWNER

FORM NO E-1-9-1-72

HEALTH DEPARTMENT'S COPY

Date Received 2-12-74 SEE INSTRUCTIONS ON BACK

ICAR(S) Application No 7478

T C No 231-032-03

Map Date 12-14-73

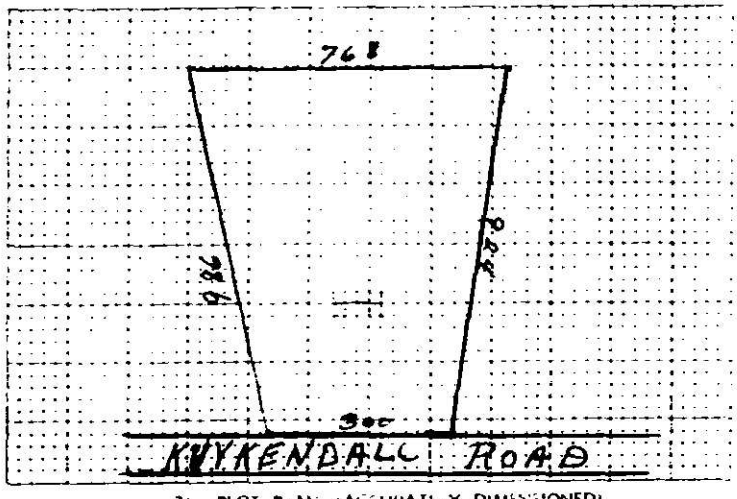
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 the property or parts 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) Type of Unit: 4

5) Water Meter: X

6) Garbage Disposal: X No

7) Dishwasher: X No

8) Water Softener: X

9) Well: X No

10) Yes X No

11) FHA Case No.

12) VA Case No.

13) NAME OF OWNER GRIER (LAST) WILLIE (FIRST) BIGGERS (MIDDLE)

14) ADDRESS OF OWNER 3700 McKEE ROAD, MATTHEWS, N.C. 847-9356

15) PHONE NO Home ~~764-3232~~ Office

16) LOCATION OF SYSTEM KUYKENDALL ROAD #3441 (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No _____ Block No _____

Map Book No 231 Page No. 3

18) DEED REFERENCE — DEED BOOK 1844 AT PAGE 3

19) HAS A PERCOLATION TEST BEEN RUN? ___ YES X 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

Feb 11 1974
DATE OF APPLICATION

Willie Biggers Grier
OWNER

REV. 10 E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3842

LA No. 7478

Date Issued February 14, 1974

T C No 231-032-03

IMPROVEMENTS PERMIT

Map Date 12-14-73

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 Grier (LAST) Willie (FIRST) Biggers (MIDDLE)

ADDRESS OF OWNER 3700 McKee Road, Matthews, N.C. ZIP 28105

LOCATION OF LOT Kuykendall Road (STREET OR COUNTY ROAD)

SUBDIVISION 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 56 min/in and 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 7478. 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, 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

M. D. Eady
Environmentalist

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

FORM NO E-3-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 4028

PTR No 7478

Date Issued February 14, 1974

T C No 231-032-03

Map Date 12-14-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

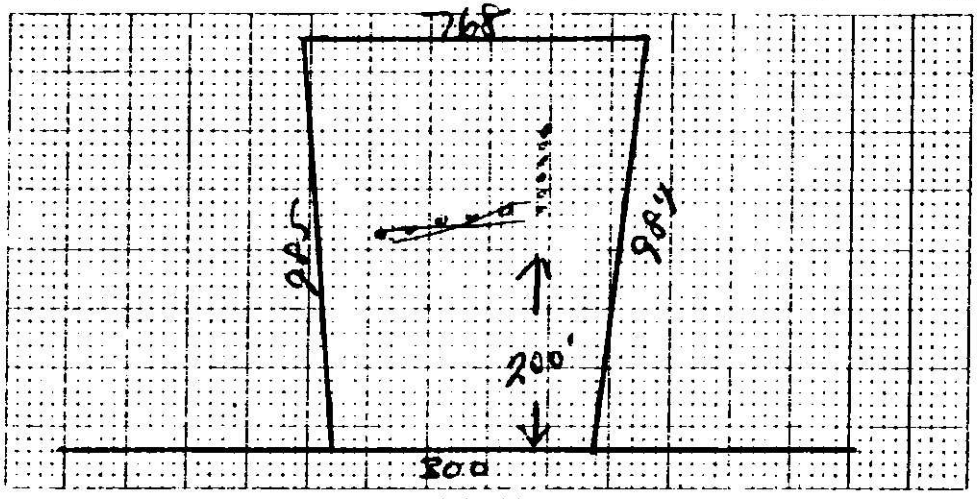
PERCOLATION TEST REPORT

NAME OF OWNER Grier (LAST) Willie (FIRST) Biggers (MIDDLE)

ADDRESS OF OWNER 3700 McKee Road, Matthews, N.C. ZIP 28105

LOCATION OF PROPERTY Kuykendall 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 56 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 building 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.

Director, Environmental Health Division or
Authorized Section Head

FORM NO E-2-9-1-72

HEALTH DEPARTMENT'S COPY

Date Received 7/27/73

SEE INSTRUCTIONS ON BACK

ICAR(S) Application No 7478

T C No 231-032-03

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 XX Install or Construct 2 Alter or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption effluent discharge

SEE PREVIOUS PERMIT ISSUED - #7478

3) PLOT PLAN (ACCURATELY DIMENSIONED)

4 No. of Bedrooms 5

5 Type of Unit Mfg. No.

6 Occupancy

7 Water Meter Yes No

8 Water Under Drain Yes No

9 Disposer Yes No

10 Water Supply

A) Individual Well

B) Governmental System

C) Community System

1 Well Source

2 Governmental Source

11 Sewage System

A) Is property within 200 feet of public sewer Yes No

B) Is property located within 200 feet of community sewer Yes No

12 FHA Case No.

13 VA Case No.

13) NAME OF OWNER GILBERT (LAST), MICHAEL (FIRST) JOSEPH (MIDDLE)

14) ADDRESS OF OWNER 531 ASHLEY RD, CHARLOTTE, N.C. 28211

15) PHONE NO Home 364-3375 Office 333-0571

16) LOCATION OF SYSTEM Kuykendall Road (STREET OR COUNTY ROAD)

17) SUBDIVISION Lot No. Block No

Map Book No Page No.

18) DEED REFERENCE -- DEED BOOK AT PAGE

19) HAS A SOIL INVESTIGATION BEEN RUN? XX YES NO DATE RUN 2/14/74 P.S.

20) PTR NUMBER (See Instruction) 2478

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

7-26-73
DATE OF APPLICATION

Michael Joseph Gilbert
OWNER

Rev 5 76

Environmental Health Department's Copy

Date Issued 7-28-78

Serial No. 2073

LA No. 7478

T. C. No. 231-032-03

Map Date 12-14-73

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

IMPROVEMENT PERMIT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Gilbert (LAST) Michael (FIRST) Hildreth (MIDDLE)

ADDRESS OF OWNER 539 Ashworth Road, Charlotte, N. C. ZIP 28211

LOCATION OF LOT Kuykendall Road (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 7478. 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, 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, construct ed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit

Environmentalist

John R. Albuson

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy