Date Received 7/16/79

MECK COUNTY DEPARTMENT OF
RECEIVED
JUL 16 1979
ENVIRONMENTAL HEALTH

APT No. 1593C

T. C. No. 217.03

Map Date 9-57

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Adkins (LAST) James (FIRST) David (MIDDLE)

2) ADDRESS OF OWNER Rte 1 Pineville, N.C ZIP 28134

3) PHONE NO. Home 588-2425 Office

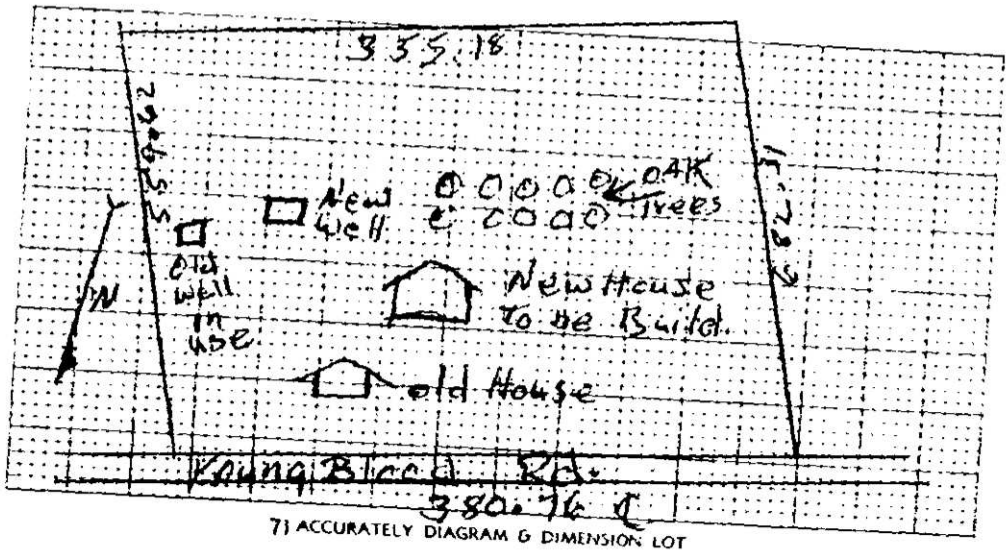
4) LOCATION OF PROPERTY Rt # 1 Youngblood Rd. (STREET OR COUNTY ROAD)

5) SUBDIVISION LOT NO BLOCK NO

MAP BOOK NO 217 PAGE NO 03

6) DEED REFERENCE DEED BOOK 3417 PAGE NO 499

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 James David Adkins

EHD-5-74

Environmental Health Department's Copy

15930
217-031-09

NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX H
SITE EVALUATION

(Ground Absorption Sewage Disposal)

OWNER: AMES ADKINS
ADDRESS: R-1 FINEVILLE N.C.
COUNTY: DUPLIN 28134
LOCATION OF SITE: Kenansville Rd

DATE REQUESTED: 7-12-79
PLAT NO.:
LOT SIZE: 225,000 (SA)

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) 2-10 U	S PS 0-5 (U)	S PS U	S PS U +
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S (PS) Clayey U	S PS Clayey (U) 2:1	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S (PS) Blocky U	S (PS) Blocky U	S PS U	S PS U
4. SOIL DEPTH (In.)	S (PS) 48 U	S (PS) 48 U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Imprevious Strata, Rock)	S (PS) NONE U	S Some Clay PS Layer (U)	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	S (PS) Adequate U	S PS Slow (U)	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) Moderate U	S PS Slow (U)	S PS U	S PS U
8. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	Provisionally Suitable	Unsuitable		
SOIL SERIES	Appling	VANCE Helena		

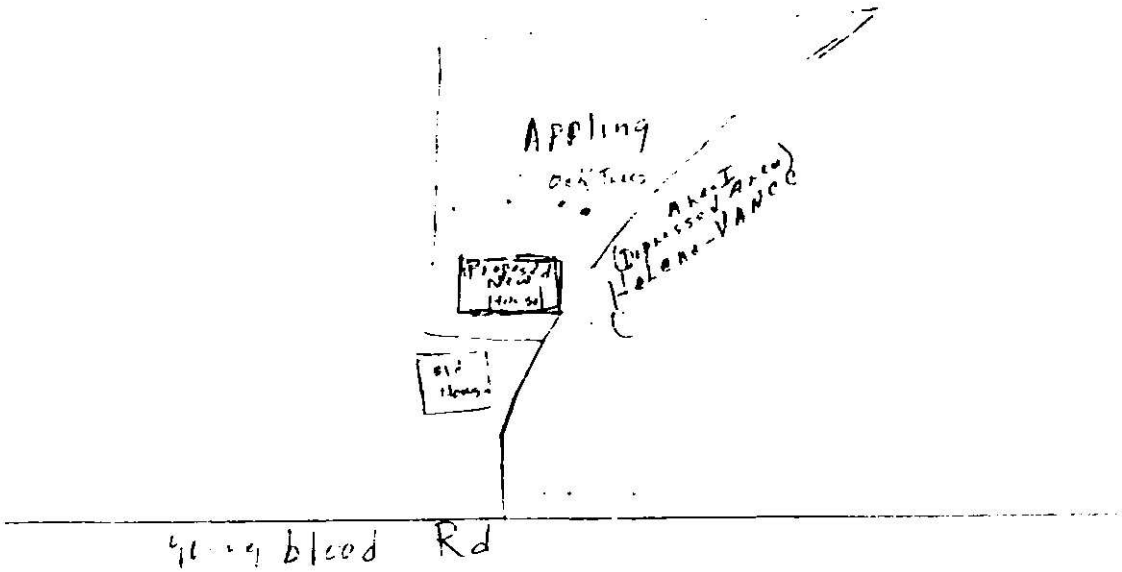
S - Suitable PS - Provisionally Suitable U - Unsuitable

* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

Recommendations/Comments:

Described By: W. B. Ramsey
Title: Soil Scientist Date: 8-2-79

DHS Form 2601 (2/77)
Sanitation


Appling
Rd

Serial No. 3010

PTR No. 15930

Date Issued August 3, 1979

T. C. No. 217-031-09

Map Date

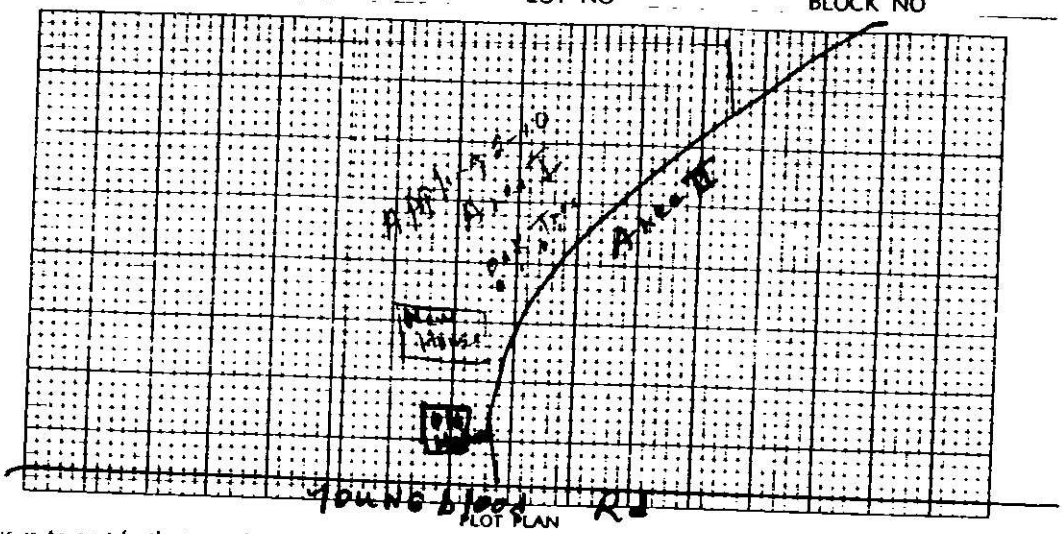
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Adkins (LAST) James (FIRST) David (MIDDLE)

ADDRESS OF OWNER Route 1, Pineville, NC ZIP

LOCATION OF PROPERTY YOUNGBLOOD RD. (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO



PLOT PLAN

This is to certify that a soil investigation and on-site investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The said investigation was conducted on that portion of the lot as indicated on the above plot.

The permeability rate determined by the investigation was **Provisionally Suitable**. 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 Department of Environmental Health 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 Mecklenburg County Department of Environmental Health prior to installation based on the permeability 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 indicated as acceptable for system installation on the above plot.
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 Mecklenburg County Department of Environmental Health, renders the area indicated as acceptable for system installation unsuitable for 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 Department of Human Resources, Division of Health Services and the Mecklenburg County Health Commission which were in effect on the date of issuance and is void if at any time 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 new or revised laws, rules, and regulations been in effect on the issue date.

Willard B. Ramsey — Soil Scientist

John B. Atkinson — Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

R

Date Received 7/9/79

RECEIVED 7/9/79 ENVIRONMENTAL HEALTH

ICAR(S) Application No. 15930

T. C. No. 3 17 82 9

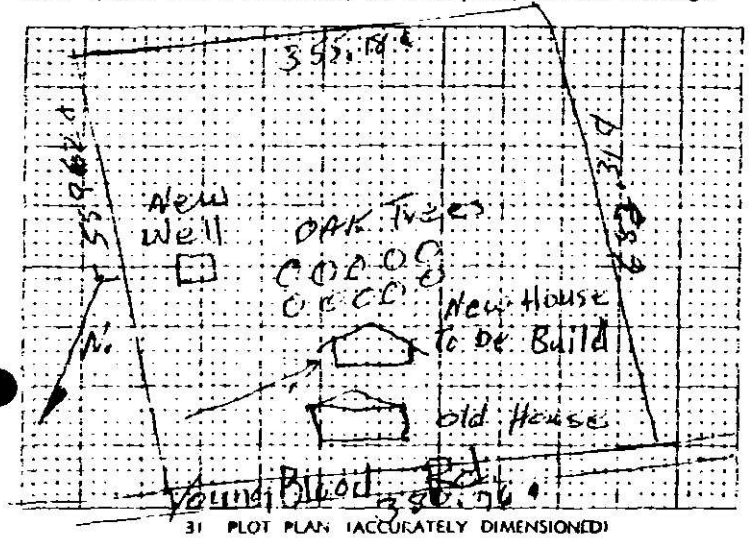
Map Date 7-5-79

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) ✓ Install or Construct 2) ___ Alter or Repair an individual septic tank wastewater treatment system with a subsurface, soil absorption, effluent discharge.



31 PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ___ Yes ___ No
Residence ✓ Yes ___ No

4) No of Bedrooms 2
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 source ___
2 Governmental source ___
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 Adkins (LAST) James (FIRST) David (MIDDLE)

14) ADDRESS OF OWNER Rt # 1 Pineville, N.C.

15) PHONE NO Home 588 2925 Office ___

16) LOCATION OF SYSTEM Young blood Rd. (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. ___ Block No. ___

Map Book No. 217 Page No. 03

18) DEED REFERENCE — DEED BOOK 3417 AT PAGE 499

19) HAS A SOIL INVESTIGATION BEEN RUN? ___ YES ✓ 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.

7-5-79
DATE OF APPLICATION

James David Adkins
OWNER

EHD-5-74

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 4-11-80

ICAR(S) Application No. 1593

T. C. No. 217-031-09

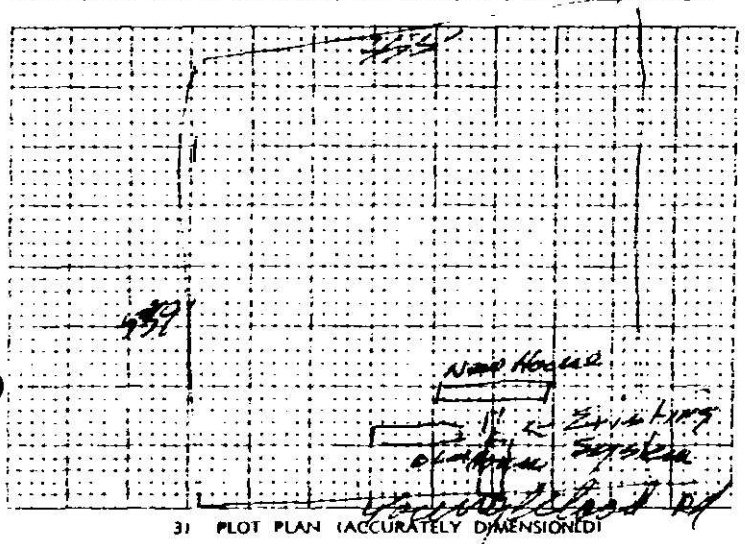
Map Date 9/5/78

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: use existing system and C.M.F.

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)

Mobile Home ___ Yes ___ No
Residence ✓ Yes ___ No
4) No. of Bedrooms 2
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) Government System ___
C) Community System
1 Well source ___
2 Government source ___
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 Adkins (LAST) James (FIRST) David (MIDDLE)

14) ADDRESS OF OWNER Rt #1 Pineville, N.C

15) PHONE NO Home 588-2925 Office ___

16) LOCATION OF SYSTEM Youngblood Rd (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. ___ Block No. ___

Map Book No. 217 Page No. 03

18) DEED REFERENCE — DEED BOOK 3417 AT PAGE 497

19) HAS A SOIL INVESTIGATION BEEN RUN? ___ YES 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.

4-11-80
DATE OF APPLICATION

James David Adkins
OWNER

EHO-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

15930

Date Received 2-1-82

ICAR (S) Application No. [redacted]

T. C. No. 217-031-09

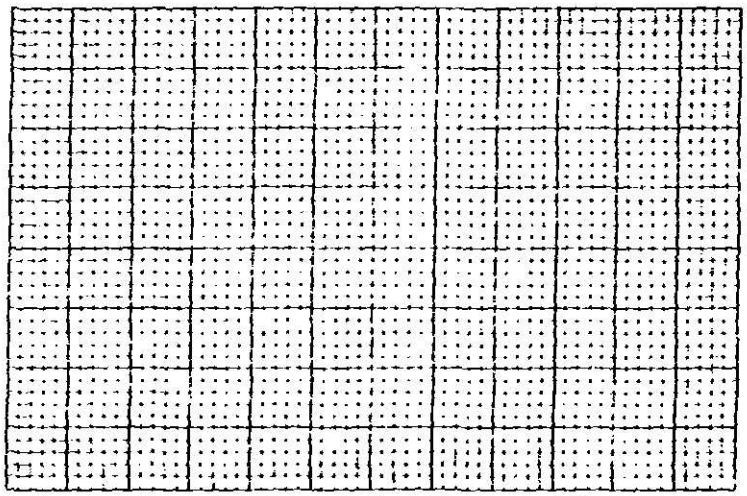
Map Date _____

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: Add Washing drain Fill 3'x100'

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)

Mobile Home ___ Yes ___ No
Residence ✓ Yes ___ No

4) No. of Bedrooms Four
5) Business Use — Max No Employees _____
6) Washing Machine ✓ Yes ___ No
7) Garbage Disposal ___ Yes X No
8) Dishwasher ___ Yes X No
9) Water Supply:
A) Individual Well Yes
B) Governmental System _____
C) Community System:
1. Well source _____
2. Governmental source _____
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 Adkins (LAST) James (FIRST) David (MIDDLE)

14) ADDRESS OF OWNER ~~15515 Youngblood Rd.~~ Rt. 1 Pineville, N.C.

15) PHONE NO. Home 588 2425 Office _____

16) LOCATION OF SYSTEM 15515 Youngblood Rd. (STREET OR COUNTY ROAD)

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

Map Book No. _____ Page No. 174

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ___ 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.

2-1-82
DATE OF APPLICATION

James David Adkins
OWNER

EHD-5-76 ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 3346

LA No. 15930

Date Issued August 6, 1979

T. C. No. 217-031-09

Map Date _____

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 Adkins, (LAST) James (FIRST) D. (MIDDLE)

ADDRESS OF OWNER Route 1, Pineville, North Carolina (ZIP)

LOCATION OF LOT Youngblood 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 15930. 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, constructed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit

Marshall Edwards
Environmentalist

John B. Dickson
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

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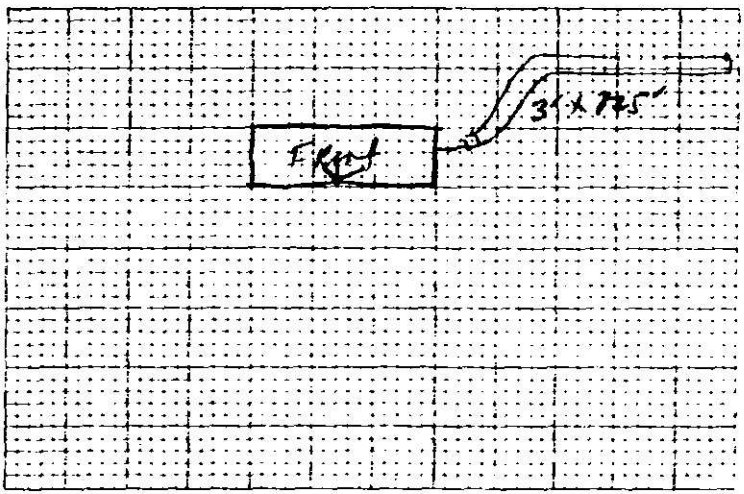
Date Issued 2-15-82 Serial No. 5225 ICAR(S) Permit No. 15930

T C. No. 217-031-09

Map Date

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 15930, dated 2-1-82 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 2/30/82, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate P 5

Liquid Capacity of Tank Existing

Tank Construction PC

Absorption and or Purification Line

Total Line Length 125 washing Machine Drain

Number of Lines one

Distance from House 10'

Distance from Property Line 10'

Distance from Well 50'

NAME OF OWNER James D. Adkins

LOCATION OF PROPERTY 15515 Youngblood Road

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

Adding washing Machine drain 3' x 125'

Comments:

Division or Section Head

Bob Wilson
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

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

C of A (s) No. 15930

Date Issued 3-3-82 **Serial** 4966 T C No. 217-031-09

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Adkins (LAST) James (FIRST) O. (MIDDLE)

Location of Property 15515 Youngblood Road

Application Number 15930 Permit Number 15930

Inspection Data:

Liquid Capacity of Tank N/A Tank Material N/A

Total Length of Drain Tile 125' Washing Machine Line Number of Lines One

Depth of Filter Material 17" Cover Depth 15"+

Water Supply Source well. Distance from Water Source 50'

Excavation Inspected 3-3-82 (DATE) Tank Inspected 3-3-82 (DATE)

Nitrification Field Inspected 3-3-82 (DATE)

Washing Machine Line Inspected, If Applicable 3-3-82 (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

Bob Wilson
Environmentalist

EHD-5-76

Environmental Health Department's Copy