Date Received 1-17-23 APT No. 5432

T. C. No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Century Home Builders (LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER 4401 Colwick Rd., Charlotte, N.C. ZIP 28211

3) PHONE NO. Home Office 364-6001

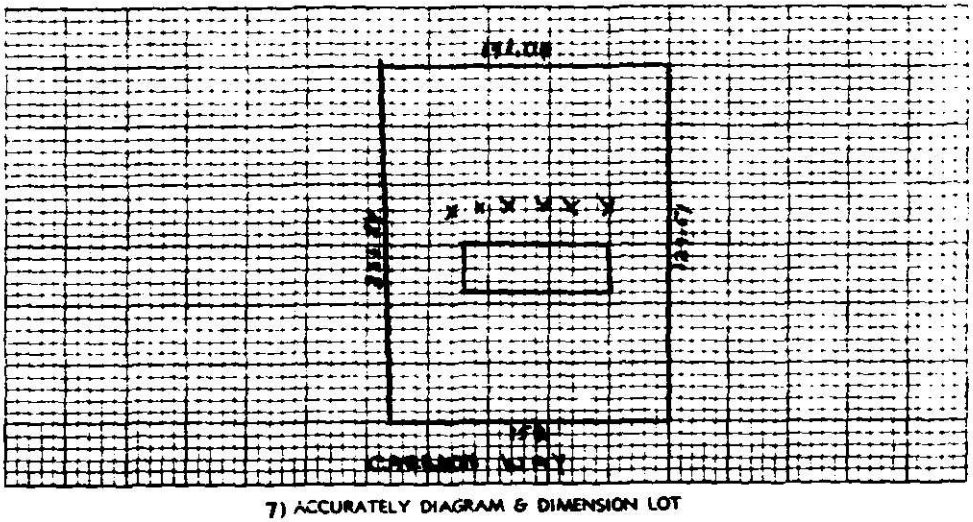
4) LOCATION OF PROPERTY Carillon Way (STREET OR COUNTY ROAD)

5) SUBDIVISION Camelot LOT NO 3 BLOCK NO. A

MAP BOOK NO 10 PAGE NO. 222

6) DEED REFERENCE DEED BOOK 2052 PAGE NO 100

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

Century Home Builders, Inc
OWNER
by Don A Gilbert

FORM NO. E-1-11-1-70

HEALTH DEPARTMENT'S COPY

Serial No. 6

PTR No. 5432

T C No. 227-095-03

Map Date 3-1-72

Date Issued January 18, 1973

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

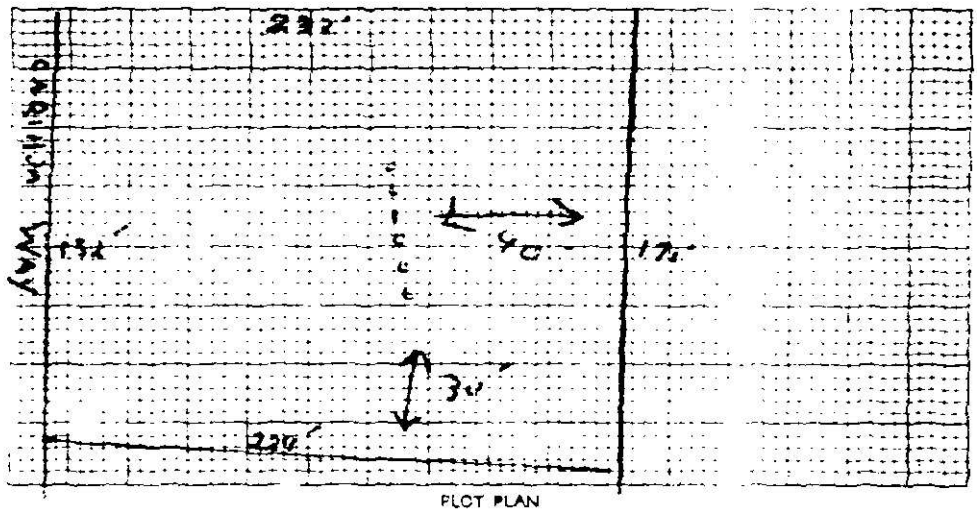
PERCOLATION TEST REPORT

NAME OF OWNER Century Home Builders
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 4401 Colwick Road ZIP 28211

LOCATION OF PROPERTY Carillon Way
(STREET OR COUNTY ROAD)

SUBDIVISION Camelot LOT NO 3 BLOCK NO A



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 57 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 wastewater treatment system on the said lot.
2. The size of the septic tank wastewater treatment system which must be installed is to 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 wells) 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 Adkinson

Director, Environmental Health Division or Authorized Section Head

FORM NO. E-2-4-1-71

HEALTH DEPARTMENT'S COPY

W

Date Received 1-17-73

ICAR(S) Application No. 5432

T C No. _____

Map Date _____

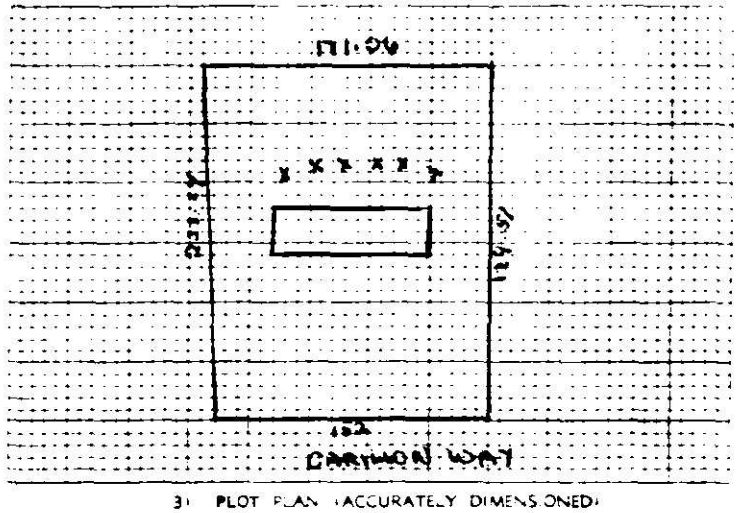
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 X Install or Construct 2 ___ Alter 3 Repair an individual septic tank wastewater treatment system with a subsurface soil absorption effluent discharge



4 Number of Bedrooms 3

5 Bathroom Units Not Including Extra Sinks ___

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
Well Private ___
Governmental ___
Sewage System
House located within 200 feet
Public sewer ___ Yes X No
House located within 200 feet of community sewer ___ Yes X No

10 FHA Case No. ___

11 VA Case No. ___

31) PLOT PLAN (ACCURATELY DIMENSIONED)

13) NAME OF OWNER Century Home Builders, Inc. (LAST / FIRST / MIDDLE)

14) ADDRESS OF OWNER 4421 Colwick Rd., Charlotte, N.C. 28211

15) PHONE NO Home ___ Office 364-6001

16) LOCATION OF SYSTEM Carillon Way (STREET OR COUNTY ROAD)

17) SUBDIVISION Camelot Lot No. 3 Block No. A

Map Book No. 10 Page No. 273

18) DEED REFERENCE — DEED BOOK 2552 AT PAGE 100

19) HAS A PERCOLATION TEST BEEN RUN? X YES ___ NO DATE RUN Nov. 1972

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.

1/16/73
DATE OF APPLICATION

Century Home Builders, Inc.
OWNER
By: Don A. Dellinger

FORM NO. E-4-4-[illegible]

HEALTH DEPARTMENT'S COPY

Date Issued January 18, 1973 **Serial No.** 2450

LA No. 5432

T. C. No 227-095-03

Map Date 3/1/72

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 Century Home Builders (LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 4401 Colwick Road ZIP 28211

LOCATION OF LOT Carillon Way (STREET OR COUNTY ROAD)

SUBDIVISION Camelot LOT NO 3 BLOCK NO A

MAP BOOK NO 10 PAGE NO 273

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 57 min/in 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 5432. 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.

Environmentalist

Director, Environmental Health Division or Authorized Section Head

FORM NO E-3-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 7-24-73

Serial No. 4083

ICAR(S) Permit No. 5432

T. C. No. 027-095-03

Map Date 3-1-72

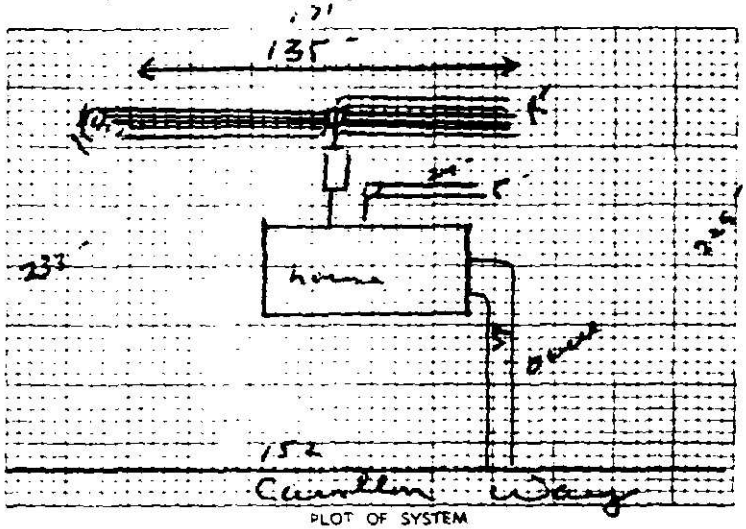
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTRUCTION, ALTERATION, AND OR REPAIR PERMIT

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

Permission is hereby granted to ✓ 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 issued based upon the information supplied in application 5432, dated 7-17-73. This permit shall be void and of no effect if the information provided in the application is in error. All work shall be completed on or before 8-24-73 after which date this permit shall be void and of no effect.



PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 1500 gal.

Tank Construction pre cast concrete

Absorption and/or Nitrification Lines:

Total Line Length 795'

Number of Lines 6

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Century Home Builders Inc.

LOCATION OF PROPERTY Carillon Ways

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: 15" x 133' x 12" stone - Gravity Lateral
Washed ¾" x 2" x 4" Stone

Division or Section Head

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.

FORM NO E 5-4-1-71

HEALTH DEPARTMENT'S COPY

Serial No. 3667

C of A (s) No. 5432

Date Issued 7-25-73

T C No 227-095-03

Map Date 3-1-72

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Century Home Builders (LAST FIRST MIDDLE)

Location of Property Carlton Way

Application Number 5432 Permit Number 5432

Inspection Data:

Liquid Capacity of Tank 1500 gal. Tank Material one piece conc.

Total Length of Drain Tile 795' Number of Lines 6

Depth of Filter Material 17" Cover Depth 20"

Water Supply Source Well Distance from Water Source 100'

Excavation Inspected 7-25-73 (DATE) Tank Inspected 7-25-73 (DATE)

Nitrification Field Inspected 7-25-73 (DATE)

Washing Machine Line Inspected, If Applicable 7-25-73 (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 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(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: Installed by Slagle + Winchester

Thomas R. Ward
Environmentalist

FORM NO. E-6-4-1-71

HEALTH DEPARTMENT'S COPY