Date Received 11-8-83

MECK[illegible] DEPARTMENT OF
RECEIVED
[illegible] 1983
ENVIRONMENTAL HEALTH

SIR No. 90276
T. C. No. 001-121-03
Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Knox (LAST) Russell (FIRST) B (MIDDLE)
Knox Bobby B

2) ADDRESS OF OWNER Roberty Davidson Nc ZIP 28036

3) PHONE NO. Home 8920248 Office 8920196

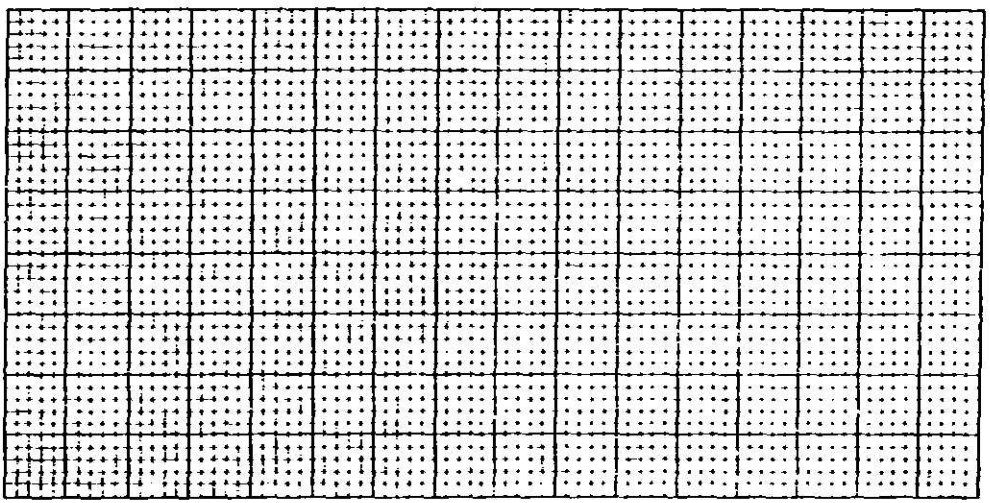
4) LOCATION OF PROPERTY Bethel Church Rd. (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. 5 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

Bobby B. Knox
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20276

T.C. NO. PO 001-121-03

(Ground Absorption Sewage Disposal)

OWNER: Russell & Bobby Knox
ADDRESS: PO Box 4
Davidson, N.C. 28036
LOCATION OF SITE: Bethel Church Road

PLAT NO: Lot #5
LOT SIZE: 26,571

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS 2-8% U	(S) PS 2-8% 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) 36-48" U	S (PS) 36-48" 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) > 48" PS To ground water U	S Depression PS (U)	S PS U	S PS U
7. OTHER (Specify)	S PS See Note U	S PS U	S PS U	S PS U
8. SOIL GROUP	10 A	10A		
9. SITE CLASSIFICATION	Provisionally suitable	unsuitable		
10. SOIL SERIES	Cecil Like	Depression		

S - Suitable PS - Provisionally Suitable U - Unsuitable

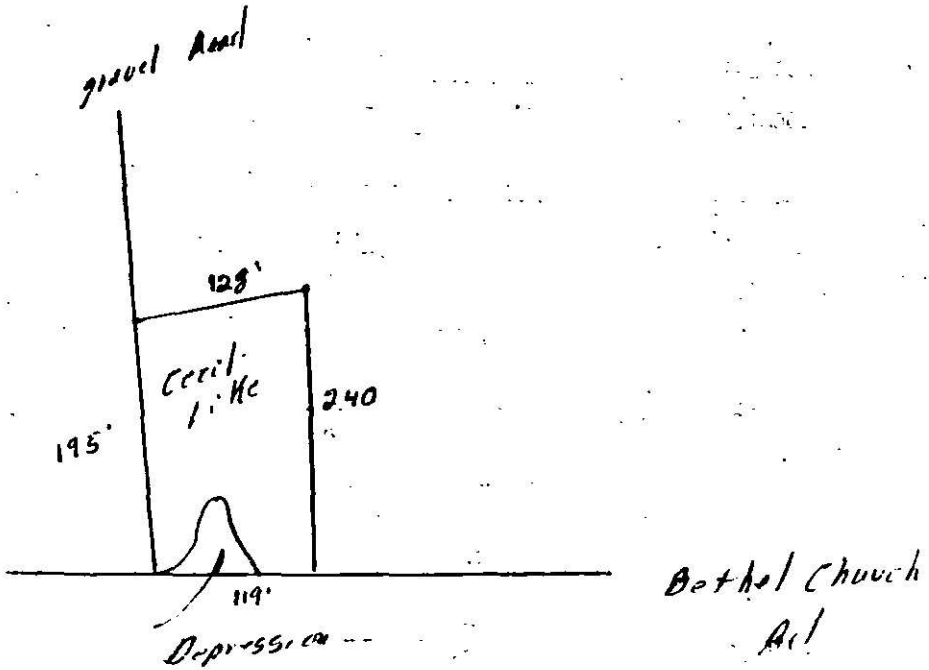
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: Recommend plans for house system & well locations be submitted. System may need lift station

Described by: William R. Marlin
Title: Soil Scientist

Date: 12-5-83

EHD 539 (Revised: 6/82)


gravel Road
128'
Cecil
Pike
240
195'
119'
Depression
Bethel Church
Rd

DEPARTMENT OF ENVIRONMENTAL HEALTH
1300 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203

SIR. NO. 20276
T.C. NO. PO 001-121-03
DATE: 12-6-83

Bobby B. Knox
P.O. Box 4
Davidson, NC 28036

Re: Property located at Bethel Church Road, Lot 5

Dear Mr. Knox:

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,

Bill D. Hardister, Jr.
Environmental Health Supervisor

BDH/kbg

Enclosure

APPLICATION FOR AN IMPROVEMENT PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

(OFFICE USE ONLY)
FILE: 20272
TC: 001-121-64
SERIAL: № 16893
L CRT

JOB LOCATION

① ADDRESS: 20722 (STREET NO) Bethel Church Rd. (STREET) ② FILE: 20272
③ JURISDICTION: Meck. ④ TAX PARCEL NO.: 001-121-64
⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: Say (FIRST) Alan (MIDDLE) Young (LAST)
⑨ MAILING ADDRESS: P.O. Box 992
⑩ CITY: Huntersv. ⑪ STATE: N.C. ⑫ ZIP: 28078
⑬ PHONE: (WORK) 892-5345 ⑭ (HOME) same

REQUEST

This request is for a(n):
⑮ ☑ New permit ⑰ ☐ Authorization for mobile home exchange
⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify)

DESIGN CRITERIA

System will serve:
⑲ ☑ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 3 ㉕ Type?
㉓ Maximum occupancy? 4 ㉖ Maximum number of employees?
㉔ Basement? ☐ yes ☑ no ㉗ Maximum number of seats?

WATER SUPPLY

㉘ Water supply from (present or proposed):
A ☑ Individual well
B ☐ Municipal system
C ☐ Community well
D ☐ Community system

㉙ 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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Agent
Date: 9-20-88

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG CO. HEALTH DEPARTMENT, certifies that the Department has approve Request for the Job Location contained in this document. This appr granted in accordance with the provisions of Laws And Rules For Sa Sewage Collection, Treatment And Disposal in effect at the t issuance of the permit and is subject to the following provisions
... No work shall be conducted on the septic tank system unti stallation, Construction, Alteration and/or Repair permit is issuec Department.
... This permit is not transferable, and shall become null and vo months from the date of issuance.

Environmentalist Date
Director or Authorized Section Head Date

*This permit must be signed by the Director of Mecklenburg Coun Department or an authorized section head in order to be valid.

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date _____

Name/Company _____

Sanitation _____
Vector Control _____
O.P.W.D. _____

Service: _____

_____

_____

_____

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

SEP 20 1988

CR # 1263

Fee: $ _____ 11.50

_____ _____
Completed by Collected by

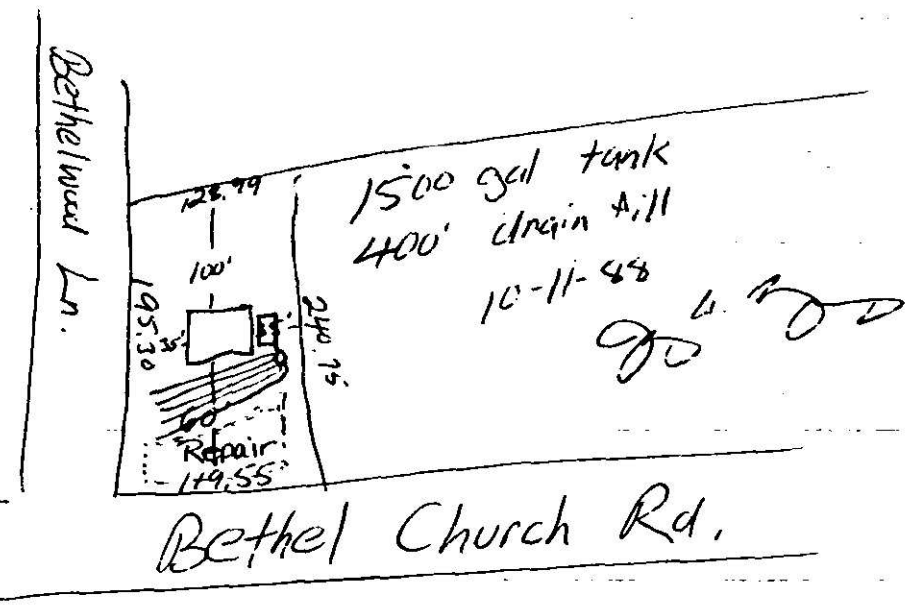
PROPOSED PLOT PLAN

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH

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

FILE: 80276
TC: 001-1264

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Signed:

Date: 9-20-88

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

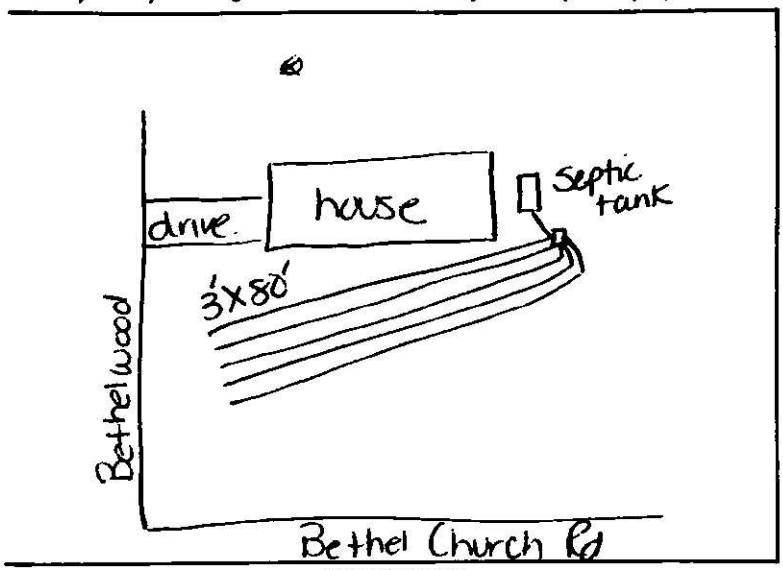
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 20276 DATE: 10/11/88

TC: 001-121-69 ☐ L

SERIAL № 12257

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 the application dated 9/30/88. All work shall be completed on or before 12/11/88, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Department of Environmental Health before any system can be covered up or placed into service. 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank – gallons

Tank Construction PVC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 400 feet

Number of Lines 5

Depth of Stone 12 inches

Distance from House >5 feet

Distance from Property Line >10 feet

Distance from Well >50 feet

NAME OF OWNER Jay Allan Young

LOCATION OF PROPERTY 20722 Bethel Church Rd

Comments: 5 trenches 3'X80'x12" Stone; Straw Cover

Division or Section Head

Karla W. Johnson RS
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.

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH

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

FILE: 20276 DATE: 1-18-89

TC: 001-121-64 ☑ L ☐ CRT

SERIAL № 11676

Name of Owner Jay Allen Young Juris.:

Address of Property 20722 Bethel Church rd.

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400

Number of Lines 5 @ 80'

Cover Depth 12"

Water Supply Source well

Distance to Water Source >50'

Excavation Inspected 1-18-89

Tank(s) Inspected 1-18-89

Wash Line Inspected —

High Water Alarm Inspected —

PLOT

Design: 1989, 1500ST, conv, 1200SFT, 126, conv CTR# 69

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☑ installed or constructed ☐ altered or repaired

☑ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The issuance of this

☑ Certificate of Completion ☐ Operation Permit

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 document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 10 NCAC 10A .1900 in addition to those listed below under "COMMENTS." This document 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: System designed for Three bedroom House

Jim Grimm
Environmentalist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.