Date Received 6/9/77

APT No. 12559
PO
T. C. No. 35.361.01

Map Date _____

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER BOB McLEMORE & CO, INC.
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER P O Box 25746 CHAR. ZIP 28212

3) PHONE NO. Home _____ Office 545-6111

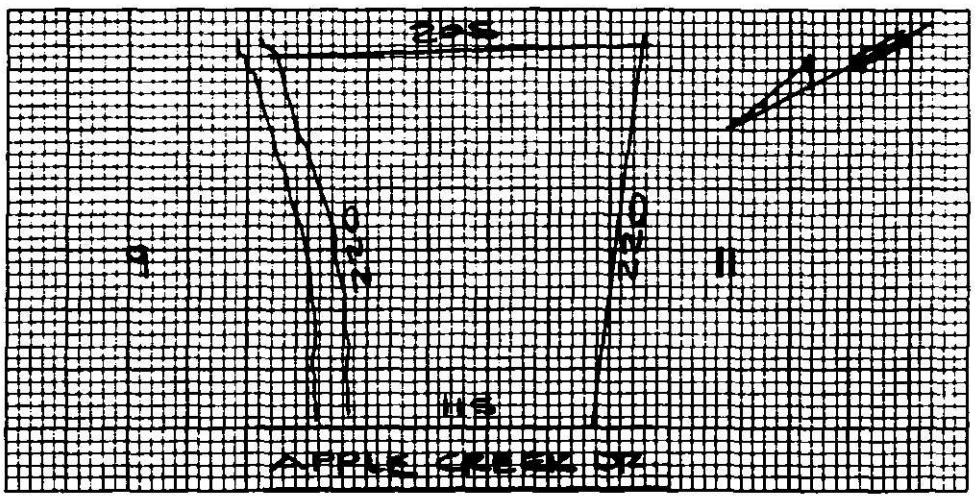
4) LOCATION OF PROPERTY APPLE CREEK DR.
(STREET OR COUNTY ROAD)

5) SUBDIVISION APPLE CREEK LOT NO. 10 BLOCK NO. A

MAP BOOK NO _____ PAGE NO. _____

6) DEED REFERENCE: DEED BOOK _____ PAGE NO. _____

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

Peter L. Bodel
OWNER

FORM NO. E-1-9-1-72

HEALTH DEPARTMENT'S COPY

SOIL INVESTIGATION REPORT

Date of Investigation June 15, 1977 APT NO. 12559

Owner Bob McLemore & Co. Inc.

Location of Property Apple Creek Dr. lot No. 10 Block A

Soil Suitability Ratings

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Cecil		Helena	Chewacla
2. Soil Slope	suitable 2-6%		suitable 3-25%	———
3. Soil Depth	suitable >48"		suitable >48"	———
4. Soil Texture	provisionally suitable clay		unsuitable 2' clay	———
5. Soil Structure	provisionally suitable blocky		unsuitable massive	———
6. Restrictive Horizons	———		———	———
7. Soil Drainage	suitable water table 66-76"		unsuitable perched high water table	unsuitable poorly drained
8. Soil Permeability (Percolation Rate)	provisionally suitable moderate (60 min/in.)		unsuitable very slow >120 min/in	unsuitable seasonal high water table 6-18" from surface
9. Other	———		———	unsuitable floods
10. Overall Rating	provisionally suitable		unsuitable	unsuitable

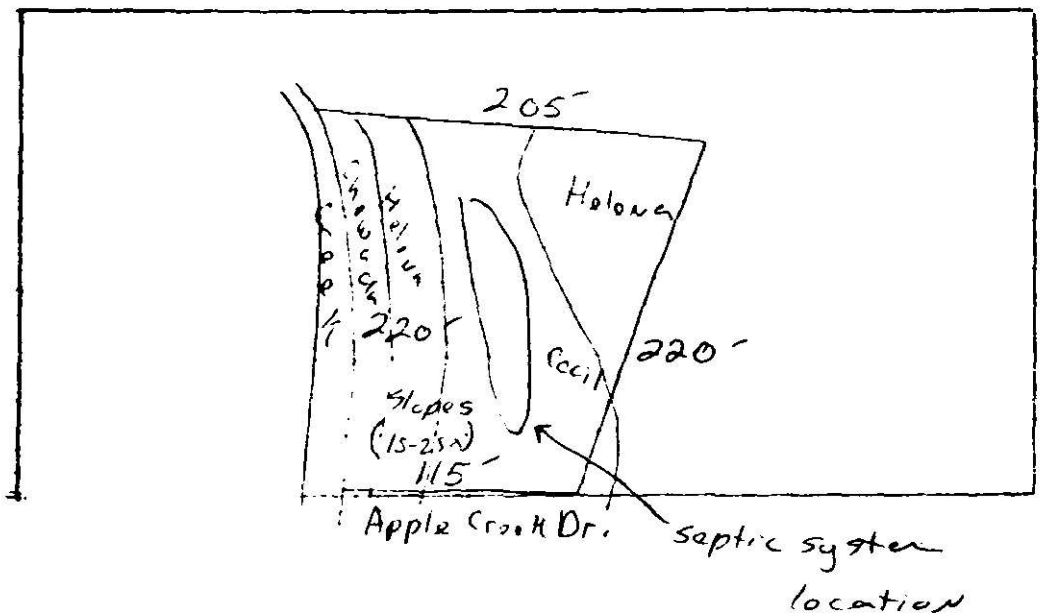
Recommendations Based on this investigation, the lot was found to have an adequate area of provisionally suitable soils for installation of a septic tank system. System design should be based on a percolation rate of 60 min/in. and should be placed in the area of Cecil soils.

See diagram on back

W. Edward Casement
Soil Scientist

3/10/75
EXD 539

DIAGRAM OF PROPERTY



3/18/75
EHD 539

Serial No. 0931

PTR No. 12559

T. C No. P-0.135-361-01

Date Issued June 20, 1977

Map Date

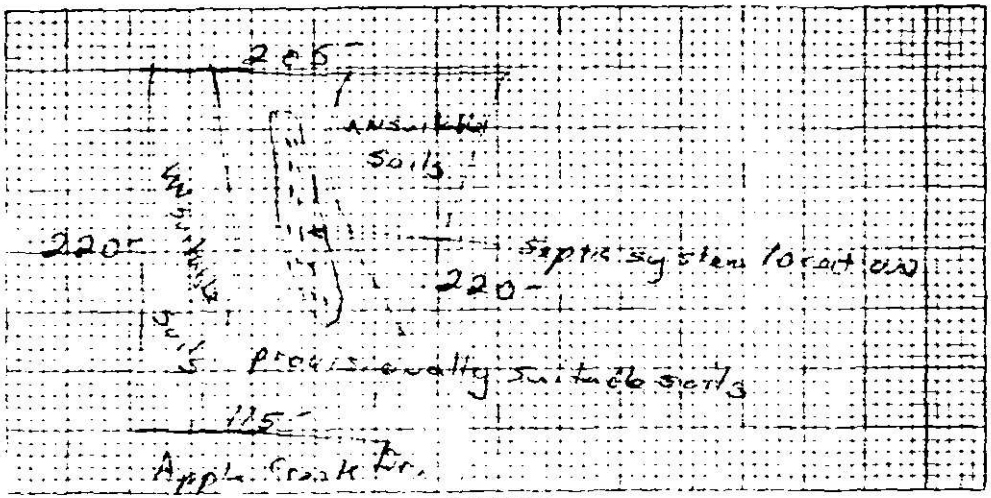
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Bob McLemore & Company, Inc. (LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P.O.Box 25746, Charlotte, NC ZIP 28212

LOCATION OF PROPERTY Apple Creek Drive (STREET OR COUNTY ROAD)

SUBDIVISION Apple Creek LOT NO 10 BLOCK NO A



PLOT PLAN

The [illegible] investigation and on-site inspection was made by the Mecklenburg County Department of Environmental Health on the date described above. The said investigation was conducted on that part of the subdivided area shown on the above plot. **Provisionally Suitable**

The percolation rate determined by the investigation was **60 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 authorizing construction of the specific system to be installed on the Mecklenburg County Department of Environmental Health prior to the issuance of a building permit for the wastewater treatment system on this said lot.
2. The size of the septic tank and wastewater treatment system which must be installed will be determined by the Mecklenburg County Department of Environmental Health prior to the issuance of the permit. The rate obtained above and on the site plan must be used therein.
3. The [illegible] system installed on the area indicated is acceptable for system installation on the said lot.
4. The required [illegible] shall be made by the installer including the drilling of a well performed on the lot which the [illegible] Mecklenburg County Department of Environmental Health considers the area indicated as acceptable for system installation subject to the location, construction, operation and 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.

W. Edward Lancaster
Soil Scientist

John W. Atkinson
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received _____

ICAR (S) Application No. 12559

T. C. No. 00.135-361-01

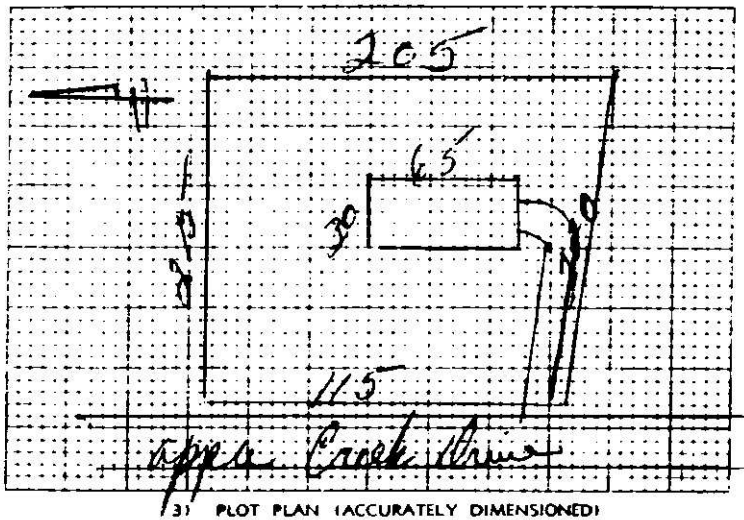
Map Date 12-27-79

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.



3) PLOT PLAN (ACCURATELY DIMENSIONED)

4) Mobile Home ____ Yes ____ No
Residence ✓ Yes ____ No

4 No. of Bedrooms 3

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 WATER CO
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 Bob (LAST) McElmore (FIRST) & (MIDDLE)

14) ADDRESS OF OWNER PO Box 25746 CHAR. 28212

15) PHONE NO. Home _____ Office 545-6111

16) LOCATION OF SYSTEM Apple Creek Drive (FARMWOOD SEC #6) (STREET OR COUNTY ROAD)

17) SUBDIVISION Apple Creek Lot No. 10 Block No. A

Map Book No 18 Page No. 321

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ____ NO DATE RUN 6-20-77

20) PTR NUMBER (See Instructions) 12559

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.

1-5-79
DATE OF APPLICATION

Lucas Reynolds (by)
OWNER

EHD-5-76

Environmental Health Department's Copy

Serial No. 2595

LA No. 12559

Date Issued Jan. 10, 1979

T. C. No. po 135-361-01

Map Date

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 Bob McLemore Company
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P.O. Box 25746 ZIP

LOCATION OF LOT Apple Creek Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Apple Creek LOT NO 10 BLOCK NO. A

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 12559 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.

Steve Wood
Environmentalist

John R Adkisson
Environmental Health Director, or Authorized Section Head

EHD-5-76

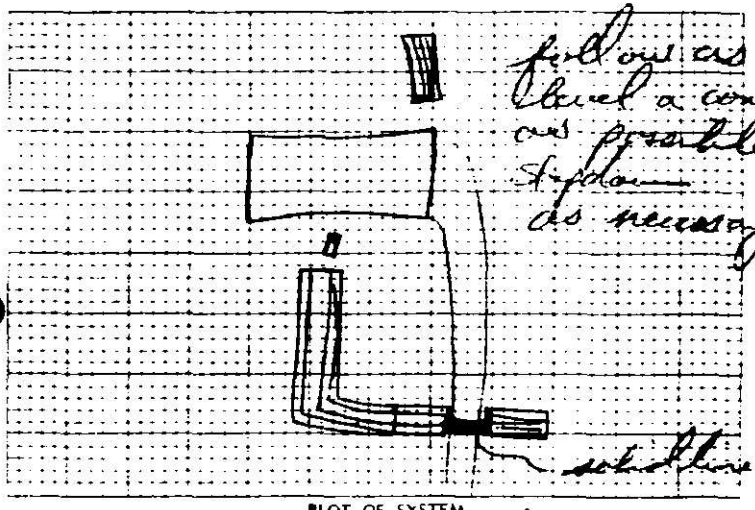
Environmental Health Department's Copy

R

Date Issued 23 May 79 Serial No. 2756 ICAR(S) Permit No. 12559
T C No. 80-135-361-01
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 12559, dated 23 May 79 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 23 June, after which date this permit shall be null and void



PLOT OF SYSTEM

Permeability Rate P5
Liquid Capacity of Tank 1500 gal
Tank Construction P.C Conc

Absorption and/or Nitrification Lines
Total Line Length 495' & 125'
Number of Lines 5 & 4
Distance from House 10'
Distance from Property Line 12'
Distance from Well common

NAME OF OWNER Bob McLemore
LOCATION OF PROPERTY (10 A) 3720 Apple Creek Dr

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.

Comments
(15' x 99' x 17" stone)
(12' x 82' x 17" stone)

Division or Section Head

Environmentalist Steve Ward

* 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

Serial No. 2665

C of A (s) No. 12559

Date Issued 25 May 79

T C No 135-361-01

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION
CERTIFICATE OF COMPLETION
CERTIFICATE OF APPROVAL

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

Name of Owner Bob McLemore (LAST FIRST MIDDLE)

Location of Property 3720 Apple Creek Dr.

Application Number 12559 Permit Number 12559

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material P.C. Conc.

Total Length of Drain Tile 495' ; 125' Number of Lines 5 ; 4

Depth of Filter Material 17" Cover Depth 15"

Water Supply Source Comm Distance from Water Source 100' Comm

Excavation Inspected ____ (DATE) Tank Inspected 25 May 79 (DATE)

Nitrification Field Inspected 25 May (DATE)

Washing Machine Line Inspected, If Applicable 25 May (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

(15'x99'x17" stone) - Step down

(12'x32'x17" stone)

Steve Wood

Environmentalist

EHD-5-76

Environmental Health Department's Copy