Date Received 6-4-82

MECK COUNTY DEPARTMENT OF
RECEIVED
JUN 4 1982
ENVIRONMENTAL HEALTH

SIR No. 18772

P.O T. C. No. 001-091-07

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER JONES (LAST) CLIFFORD (FIRST) BARRY (MIDDLE)

2) ADDRESS OF OWNER 4213 MAUREEN DRIVE CHARLOTTE, NC ZIP 28205

3) PHONE NO Home 568-3154 Office 598-7040

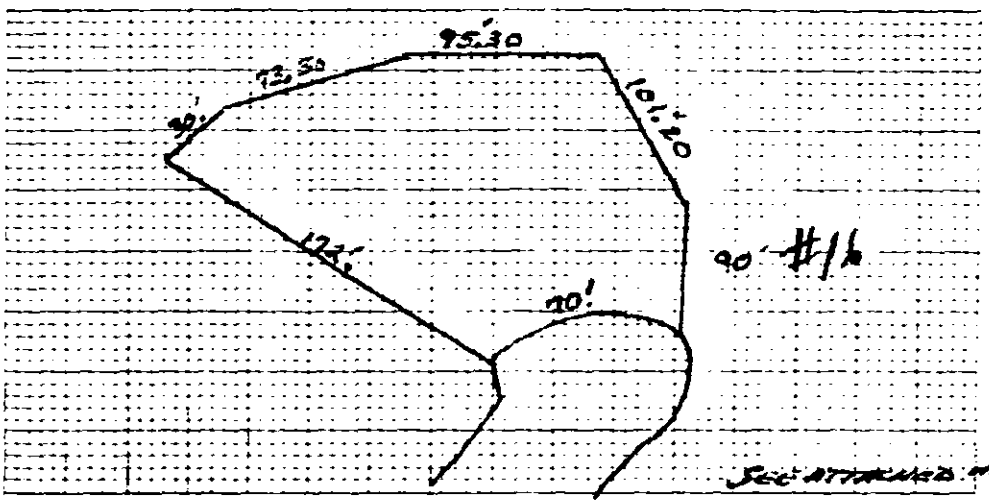
4) LOCATION OF PROPERTY BEAVERS CIRCLE (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO 15 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 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 disposal.



7) ACCURATELY DIAGRAM & DIMENSION LOT

OWNER

EHO-5-76

Environmental Health Department's Copy

Serial No. 4571

PTR No. 18772

T. C. No. P0 001-091-07

Date Issued 6-10-82

Map Date

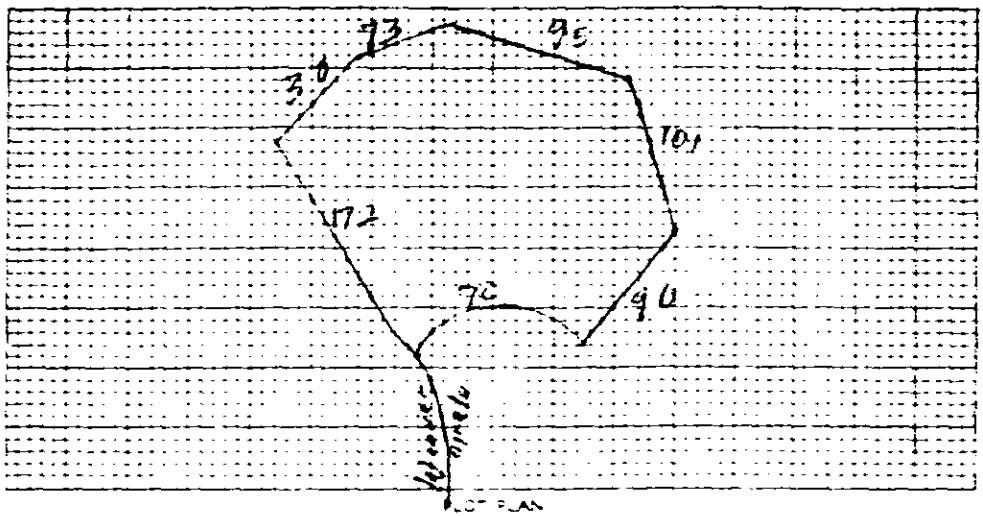
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Jones, (LAST) Clifford (FIRST) Barry (MIDDLE)

ADDRESS OF OWNER 4213 Maureen Dr., Charlotte, NC ZIP 28205

LOCATION OF PROPERTY Weavers Circle (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 15 BLOCK NO



LOT PLAN

This is to certify that [illegible] on the [illegible] made by the Mecklenburg County Department of Environmental Health on the [illegible] described [illegible] was conducted on that part of the [illegible] described in the above [illegible]

Provisionally Suitable

The permeability [illegible] determined, the [illegible] lot is approved for the installation of an [illegible] and subsurface soil absorption [illegible]

1. [illegible] the Mecklenburg County Department [illegible] system [illegible]
2. [illegible] the Mecklenburg County Department [illegible] as above and in the [illegible]
3. [illegible] system here at [illegible]
4. [illegible] in the [illegible] area as acceptable [illegible]

This approval is granted based [illegible] System Construction Rules and Regulations of the North Carolina Department [illegible] and the Mecklenburg County Health Department [illegible] and void at any time in the future should the [illegible] system [illegible] and regulations be changed such that this property would not have been granted had the new [illegible] been in effect on the issue date.

W. B. Ramsey
Soil Scientist

Mike Sexton
Environmental Health Director
Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

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

APPENDIX H
SITE EVALUATION

18772
PO 001-091-07

(Ground Absorption Sewage Disposal)

OWNER: Clifford Jones
ADDRESS: 4213 MAUREEN DRIVE
COUNTY: Charlotte 28205
LOCATION OF SITE: Weavers Circle

DATE REQUESTED: _____
PLAT NO.: _____
LOT SIZE: 1AT-

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) 2-10 U	S PS U	S PS U	S PS U +
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S (PS) Clay U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S (PS) Blocky U	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	S (PS) 48 U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Inprevious Strata, Rock)	S (PS) None U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	S (PS) Adequate U	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) Moderate U	S PS 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	P. Suitable			
SOIL SERIES	Cecil			

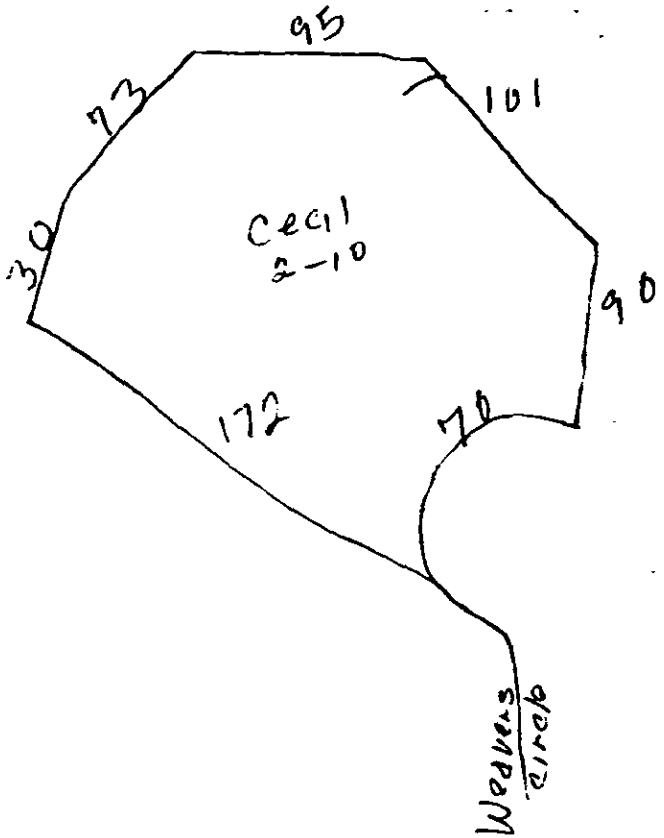
S - Suitable PS - Provisionally Suitable U - Unsuitable

* 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: 6-8-82

DHS Form 2604 (2/77)
Sanitation


95
73
101
30
Cecil
2-10
90
172
70
Weavers
Creek

Date Issued 9-17-82

Serial No. 5918

LA No. 18772

T. C. No. PO 001-091-07

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

IMPROVEMENT PERMIT

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Jones, (LAST) Clifford (FIRST) Barry (MIDDLE)

ADDRESS OF OWNER 4213 Maureen Dr., Charlotte, NC ZIP 28205

LOCATION OF LOT 19629 Weaver's Circle (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO 15 & PO 14 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 18772 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, 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 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

Mike Sutton
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 9-16-82

RECEIVED
SEP 16 1982
ENVIRONMENTAL HEALTH

ICAR(S) Application No. 18772

T.P. No. 001-091-07

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) ✓ 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 4
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 Jones (LAST) Clifford (FIRST) Barry (MIDDLE)

14) ADDRESS OF OWNER 4213 Maureen Dr Charlotte, NC 28205

15) PHONE NO Home 568 3154 Office 598-7040

16) LOCATION OF SYSTEM 9629 Weavers Circle (STREET OR COUNTY ROAD)

17) SUBDIVISION Alice's Addition Lot No 15 and a portion of 14 Block No. _____

Map Book No 20 Page No. 72

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ___ NO DATE RUN 6-10-82

20) PTR NUMBER (See Instructions) 18772

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.

9-7-82
DATE OF APPLICATION

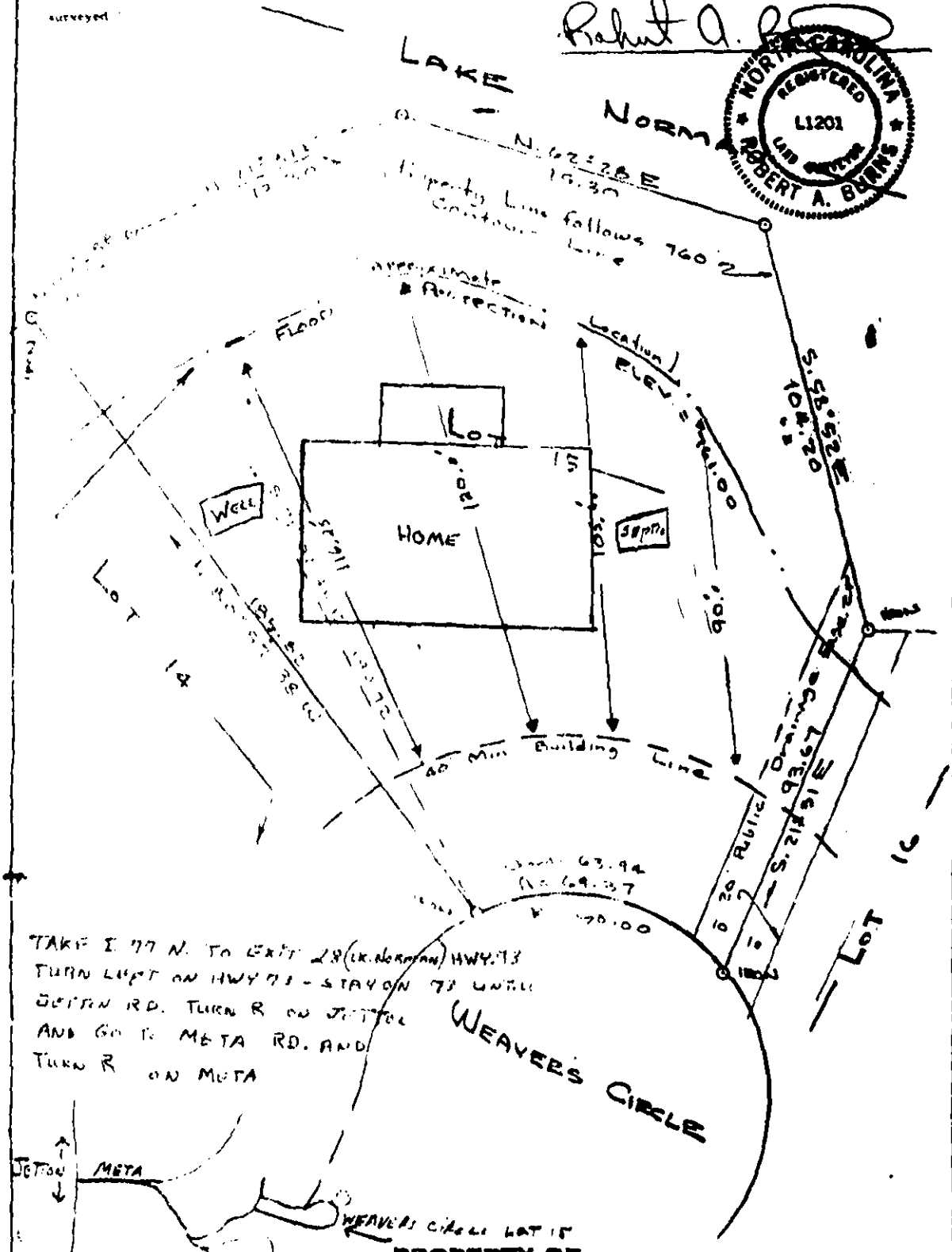
Clifford B. Jones
OWNER

EHD-S-76

I ROBERT A. BURNS certify that on August 13, 1982, I surveyed the property shown on this plat; that the property lines and location of all structures are accurately shown hereon; that no structure located on this property encroaches on any adjacent street or property, and that no structure on adjacent property encroaches on the premises surveyed.

Robert A. Burns

NORTH CAROLINA REGISTERED L1201 LAND SURVEYOR ROBERT A. BURNS



TAKE I 77 N. TO EXIT 28 (LK. NORMAN) HWY. 73
TURN LEFT ON HWY 73 - STAY ON 73 UNTIL
JETTON RD. TURN R ON JETTON
AND GO TO META RD. AND
TURN R ON META

PROPERTY OF

CLIFFORD B. JONES & WIFE

LOT NO. 15 and a Portion of Lot 16 MAP OF Fairlicks Addition To Fairlicks Purchase BLOCK NO. _____

PLAT BOOK 22 PAGE 72 MECKLENBURG COUNTY, N. C.
Lemley Township

SCALE: 1 INCH = 30 FEET

JOB NO. _____

Serial No. 5942

ICAR(S) Permit No. 18772

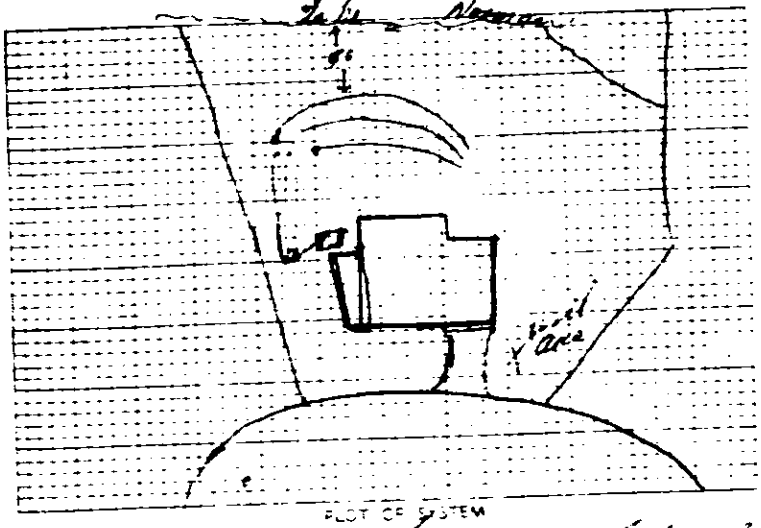
T. C. No. [illegible]

Date Issued 26 Jan 83

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 18772, dated 16 July 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 26 Jan 83, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500

Tank Construction PC

Absorption and or Nitrification Line

Total Line Length 444'

Number of Lines 3

Distance from House 216'

Distance from Property Line 216'

Distance from Well 266'

NAME OF OWNER Larry Clifford Berry

LOCATION OF PROPERTY 19629 Mount Holly

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Health Ordinance 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 3 Tanks 3 X 147 X 12

Environmentalist

Division or Section Head

* 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.

EHO-5-76

C of A (s) No. 18772

Date Issued 1-13-83 Serial 5568 C. No. 001-411-07

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF COMPLETION

CERTIFICATE OF APPROVAL

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

Name of Owner Jane (LAST) Clifford (FIRST) B. (MIDDLE)

Location of Property 19629 Weaver circle

Application Number 18772 Permit Number 18772

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material p/c concrete

Total Length of Drain Tile 440' Number of Lines 3

Depth of Filter Material 12" Cover Depth 1'-1½'

Water Supply Source Well Distance from Water Source 75' not in yet

Excavation Inspected — (DATE) Tank Inspected 1-13-83 (DATE)

Nitrification Field Inspected 1-13-83 (DATE)

Washing Machine Line Inspected If Applicable — (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 and 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

Environmentalist

EHD-5-76