Date Received 3-1-84

RECEIVED

SIB No. 20687
P0
T. C. No 231-111-84

Map Date 8/83

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Providence Woods, Inc.
(LAST, FIRST, MIDDLE)

2) ADDRESS OF OWNER 1740 E. Independence Blvd, Charlotte, NC 28205
(ZIP)

3) PHONE NO. Home _____ Office 704-372-2565

4) LOCATION OF PROPERTY Amanda Dr
(STREET OR COUNTY ROAD)

5) SUBDIVISION Providence Woods LOT NO 13 BLOCK NO. V

MAP BOOK NO _____ PAGE NO. _____

6) DEED REFERENCE DEED BOOK 4571 PAGE NO 693-694

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

Please see attached map

7) ACCURATELY DIAGRAM & DIMENSION LOT

OWNER / Agent

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 5599

SIR No. 20687

T. C. No. PO 231-111-04

Date Issued April 17, 1984

Map Date L

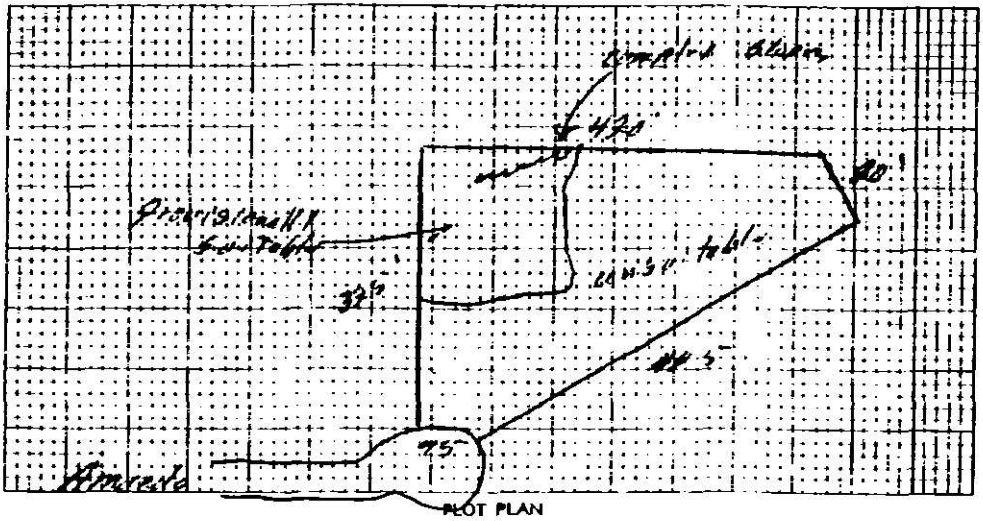
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Providence Woods, Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER 1740 E. Independence Boulevard, Charlotte, NC ZIP 28205

LOCATION OF PROPERTY Amanda Drive
STREET OR COUNTY ROAD

SUBDIVISION Providence Woods LOT NO 13 BLOCK NO. V



PLOT PLAN

This is to certify that a soil investigation and [illegible] site investigation [illegible] the Mecklenburg County Department of Environmental Health on the [illegible] described above. The [illegible] 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 [illegible] with subsurface, soil absorption effluent discharge subject to the following terms and conditions:

1. A permit [illegible] the Mecklenburg County Department of Environmental Health [illegible] wastewater treatment system on the said lot.
2. The [illegible] be determined by the Mecklenburg County Department of Environmental Health [illegible] permeability rate obtained above, and on the size and type of building constructed there.
3. This approval [illegible] system installation on the above plot.
4. The [illegible] on the lot which in the [illegible] Mecklenburg County Department of Environmental Health [illegible] as acceptable for system installation [illegible]

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.

William [illegible]
Soil Scientist
EHD-5-76

Bill D. Harkston Jr.
Environmental Health Director or
Authorized Section Head

Environmental Health Department's Copy

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20687

T.C. NO PO 231-111-04

(Ground Absorption Sewage Disposal)

OWNER: [illegible]
ADDRESS: [illegible]
Charlotte, N.C. [illegible]
LOCATION OF SITE: [illegible]

PLAT NO: Lot 13
LOT SIZE: Approx 100 ft

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS U 2-10%	S PS U complex slopes	S PS U 2-8%	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S PS U clay	S PS U clay	S PS U clay	S PS U
3. SOIL STRUCTURE (12-36 inches)	S PS U Blocky	S PS U Blocky	S PS U Blocky	S PS U
4. SOIL DEPTH (inches)	S PS U 30-48"	S PS U <36"	S PS U >36"	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S PS U >36"	S PS U <36"	S PS U >36"	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S PS U >36" To ground water	S PS U Eroded Areas channel [illegible]	S PS U Drainageway Depression	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IVA	IVA	IVA	
9. SITE CLASSIFICATION	Provisionally Suitable	unsuitable	unsuitable	
10. SOIL SERIES	Cecil Litho	Complex slopes	Drainageway Depression	

S - Suitable PS - Provisionally Suitable U - Unsuitable

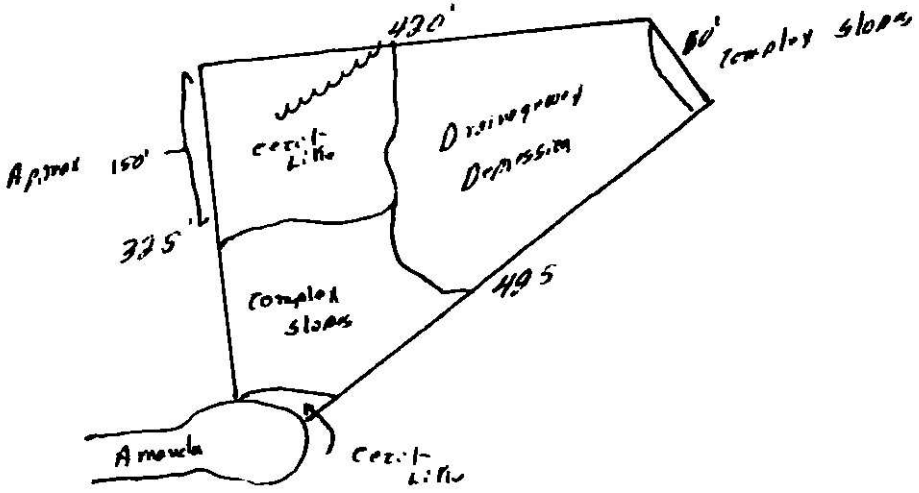
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: William A. Marlin
Title: Soil Scientist

Date: 4-18-84

#


420'
80'
Complex slopes
Approx 150'
Cerit Lithe
Drainageway Depression
325'
495
Complex slopes
Amoeba
Cerit Lithe

Date Received 3-18-85

ICAR(S) Application No. 20687

P.O No 231-111-04

Map Date L

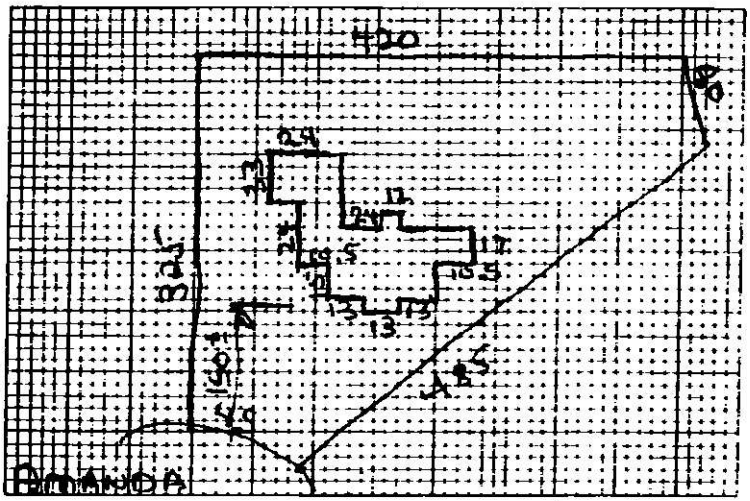
ENVIRONMENTAL HEALTH

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 hereb. 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 DICKIE, MEL CONST. CO., INC.
(LAST, FIRST, MIDDLE)

14) ADDRESS OF OWNER 1219 JAMESTOWNE DR., MONROE - 28110

15) PHONE NO. Home 283-1302 Office 283-1302

16) LOCATION OF SYSTEM 909 AMANDA DR.
(STREET OR COUNTY ROAD)

17) SUBDIVISION PROVIDENCE WOODS Lot No. 13 Block No. V

Map Book No 231 Page No. 11

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.

3/18/85
DATE OF APPLICATION

Mel Dickie
OWNER

EHD-S-76

Environmental Health Department's Copy

Date Issued 3-18-85

Serial No. 8295

SIR No. 20687

T. C. No. PO 231-111-04

Map Date L

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 Mel Dickie Const. Co., Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER 1219 Jamestowne Dr., Monroe, NC ZIP 28110

LOCATION OF LOT 909 Amanda Dr.
STREET OR COUNTY ROAD

SUBDIVISION _____ LOT NO 13 BLOCK NO. V

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 20687. 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 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.

Cynthia G Bass
Environmentalist

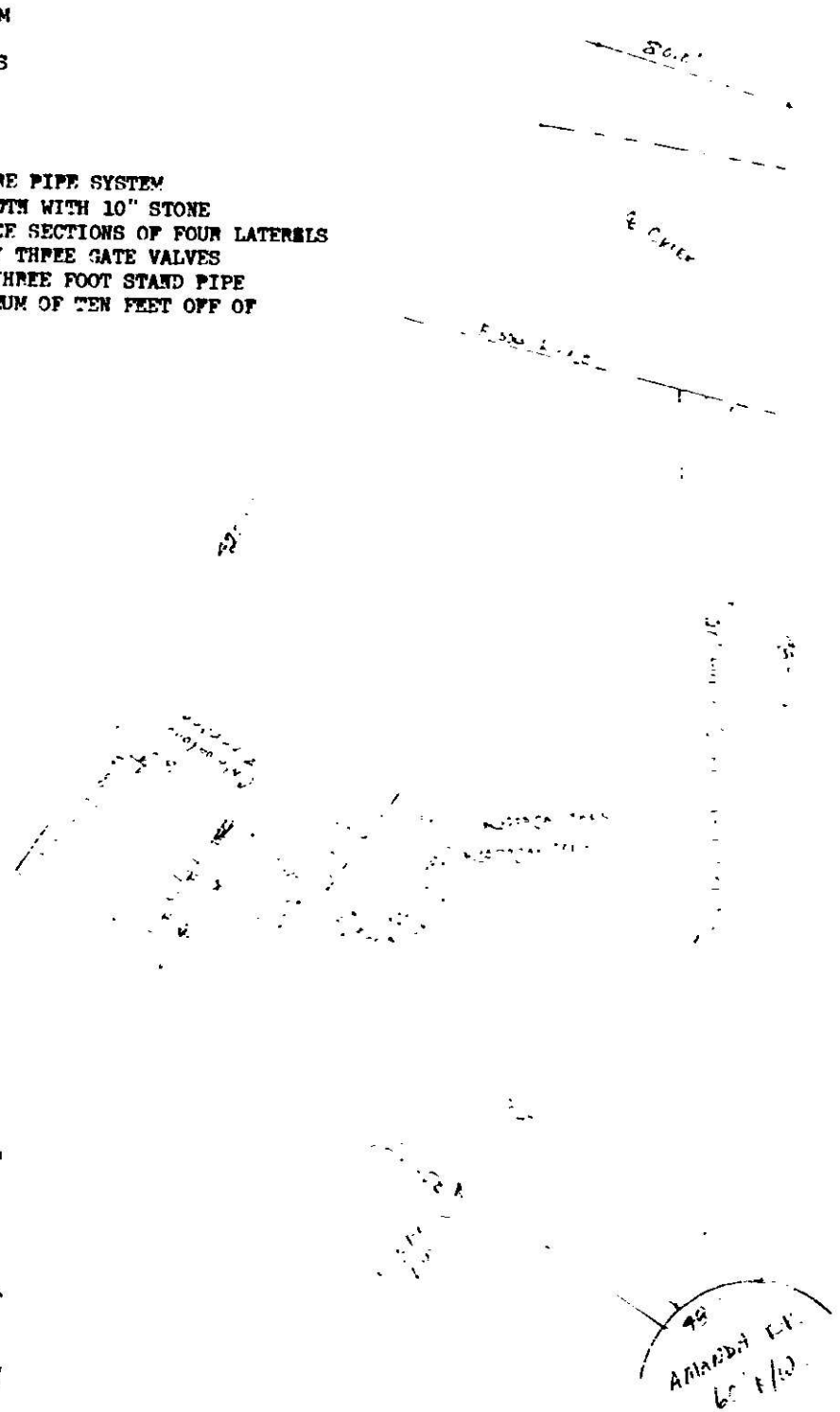
Bill D. Hardister Jr.
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

PROPOSED SEPTIC SYSTEM
MEL DICKIE BUILDERS
LOT #13 PROVIDENCE WOODS
PHASE V MAP 2
BOOK 20 MAP 775

SYSTEM TO BE LOW PRESSURE PIPE SYSTEM
TRENCHES TO BE 8" in WIDTH WITH 10" STONE
LATERALS WILL BE IN THREE SECTIONS OF FOUR LATERALS
PER SECTION REGULATED BY THREE GATE VALVES
EACH LATERAL WILL HAVE THREE FOOT STAND PIPE
LATERALS WILL BE A MINIMUM OF TEN FEET OFF OF
PROPERTY LINE



Date Issued 8-14-85

Serial No. 08409

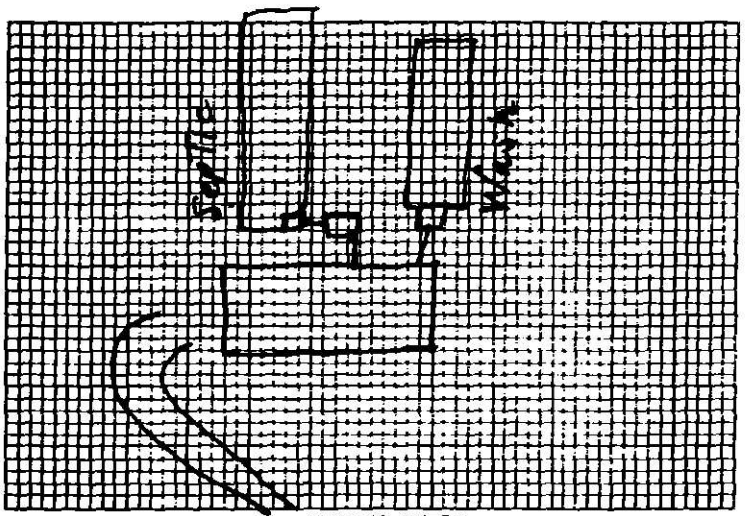
ICAR(S) Permit No. 20687

P.E. No. 231-111-04

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 20687, dated 3-18-85 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 9-14-85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PT

Liquid Capacity of Tank 1500

Tank Construction PCC

Absorption and/or Nitrification Lines.

Total Line Length 400' + 200'

Number of Lines 5 + 5

Distance from House 5'

Distance from Property Line 10'

Distance from Well not in use keep 100' from septic

NAME OF OWNER Mel Dickie Const.

LOCATION OF PROPERTY 909 Amanda 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: 1 bed 15'X80'X17" stone - septic system
1 bed 15X40'X17" stone - Wash line

B. Hartsfield
Division or Section Head

B. R. Ferguson
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.

BHP-5-76

Environmental Health Department's Copy

C of A (s) No. 20687
Po
T. C. No. 231-111-04
L CET

Date Issued 8/28/85 **Serial** 7805

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner Mel Dickie Construction
LAST FIRST MIDDLE

Location of Property 909 Amanda Drive

Application Number 20687 Permit Number 20687

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material PCC

Total Length of Drain Tile 400' + 200' Number of Lines 5+5

Depth of Filter Material 17" Cover Depth 8"-12"

Water Supply Source well Distance from Water Source stay 100'

Excavation Inspected 8/28/85 DATE Tank Inspected 8/28/85 DATE

Nitrification Field Inspected 8/28/85 DATE

Washing Machine Line Inspected, If Applicable 8/28/85 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 1500ST, CON, 1800SFB, 17G,

Cynthia G. Bass
Environmentalist

EHD-5-76

Environmental Health Department Copy