T. C. No. 105-165-44

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

WELL RECORD

Drilling Contractor Robert M Cobler Reg. No. 87 Well Permit No. 7824

1. Town Charlotte County Mecklenburg
2. Location Rolling Acres Quadrangle No.
   Show a sketch of location on back of form
3. Owner Frank Scutton
   Address Rt. 10 Box 366-B
4. Topography: draw, flat, hilltop, valley, flat
5. Use of Well Domestic Date Completed 3-7-75
6. Rig type or method Diamond Total Depth 92
7. Casing: Depth Diam. Type
   From 0 to 84 ft. 2 in. Steel Col
8. Grout: Depth Material Method
   From 0 to 25 ft. Sacked cement poured
9. Screen: Depth Diam. Type and Opening
   From ____ to ____ ft. ____ in. ____
10. Water Zones (depth) 92
11. Static Water Level: 14 ft. above (below) top of casing
    which is 1 ft. above land surface. Elev. ____
    Date 3-7-75
12. Yield (gpm) 5 Method of testing Pumped
13. Pumping Water Level: 14 ft. after 24 hrs.
    at 5 gpm.
14. Water Quality Good Temperature (°F) ____
15. Well sterilization method HTH
16. Permanent Pump: ____ Type Jet Make Myers
    Installed — Date 3-7-75 By Robert Cobler
    Capacity 5 (gpm) Hp. 1/2
    Intake depth 31 Airline depth ____
17. Remarks: ____

I do hereby certify that this well record is true and exact.

Robert M Cobler Jr
SIGNATURE OF CONTRACTOR OR AGENT

Depth From	Depth To	Formation
0	10	Clay
10	84	Sand
84	92	Sand Stone

FORM NO. E-22-9-1-72

Date Received 10-25-74

Application No. 7224
T. C. No. 105-165-44
Map Date 4-27-73

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Scotten (LAST) Frank (FIRST) Paul (MIDDLE)

ADDRESS OF OWNER RT 10 Box 366 B ZIP 28213

PHONE NO. Home 596-7795 Office

LOCATION OF PROPERTY Rollingwood Acres Rd (STREET OR COUNTY ROAD)

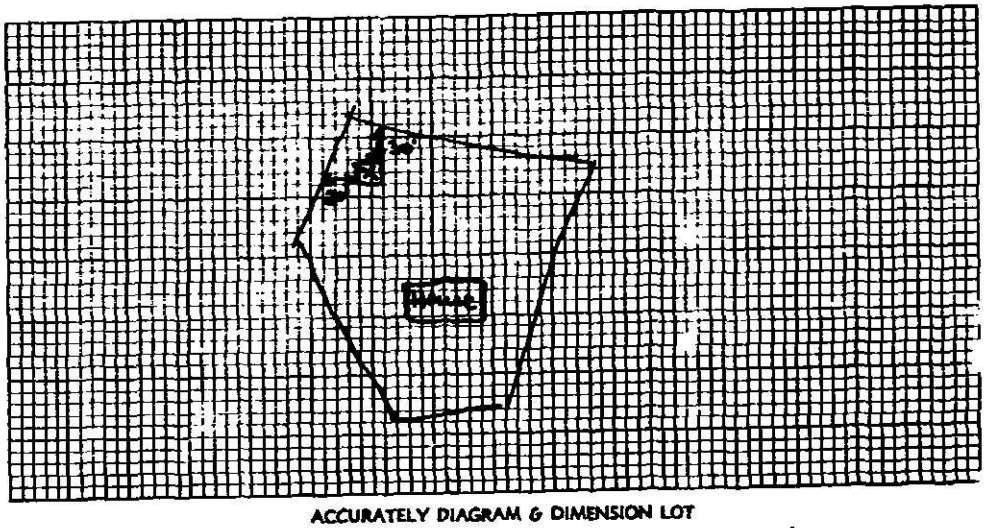
SUBDIVISION Rollingwood Acres LOT NO. 17 BLOCK NO. B

MAP BOOK NO. 15 PAGE NO. 239

DEED REFERENCE: DEED BOOK PAGE NO.

WELL CONTRACTOR LICENSE NO.

Application is hereby made to the Mecklenburg County Health Department for a permit to drill a water well on the hereinabove described lot to be used as a source of _____ individual, _____ semi public, or _____ public water supply:



ACCURATELY DIAGRAM & DIMENSION LOT

10-25-74
DATE OF APPLICATION

Frank P. Scotten
OWNER

Application approved and permit hereby granted

Permit No:

Paul A. Kiefer
ENVIRONMENTALIST

FORM NO. E-28-8-1-72

HEALTH DEPARTMENT'S COPY

Rolling Acres Rd
Rocky River
Hood
Plaza
Beaver Creek Dr

Home

Date Received 11-13-73

APT No. 7224

T. C. No.

Map Date

NOV 13 1973

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Hodges (LAST) James (FIRST) Franklin (MIDDLE)

2) ADDRESS OF OWNER Rt 9 Boyd Charlotte ZIP 28212

3) PHONE NO. Home 596-0772 Office

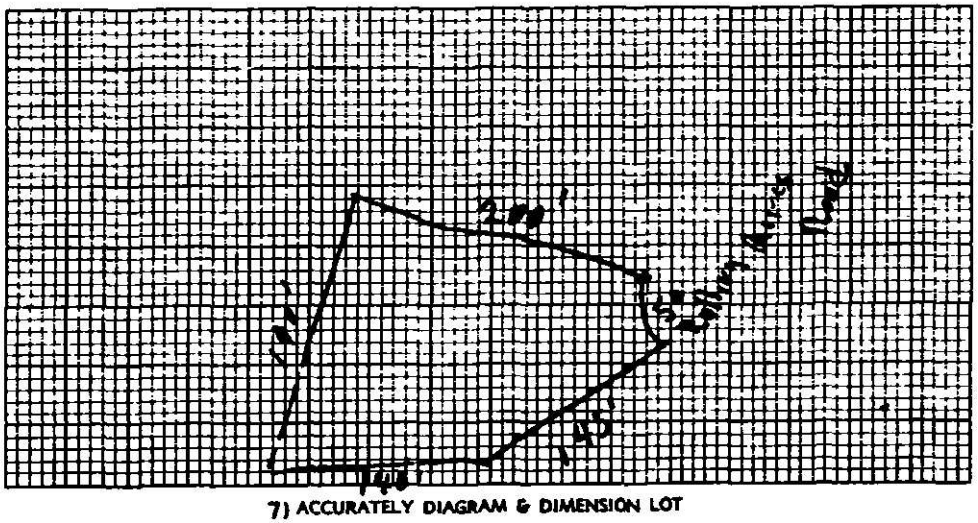
4) LOCATION OF PROPERTY Rolling Acres Road (STREET OR COUNTY ROAD)

5) SUBDIVISION Rolling Acres LOT NO. 17 BLOCK NO. B

MAP BOOK NO 15 PAGE NO. 239

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

James F. Hodges
OWNER

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

HEALTH DEPARTMENT'S COPY

MECKLENBURG COUNTY HEALTH DEPARTMENT

INTER-OFFICE COMMUNICATION

DATE: February 17, 1975

TO: John R. Adkisson

FROM: Edward Casavant EC
Soil Scientist

SUBJECT: APT. 7224 (Frank Paul Scotton)
Rolling Acres Road, Lot No. 17
Date: 2/14/75

The lot consists of soils of the Cecil and Cecil intergrading to Helena series.

The Cecil soils have good aeration, good drainage, and moderate permeability. These soils occur in the rear portion of the lot. The true mean percolation rate is 60 min./in.

The Cecil intergrading to Helena soils give an indication of expanding clay minerals in the subsoil. There also is a tendency for water moving downslope to collect and pond on the surface in this particular soil. These soil characteristics result in limited permeability and percolation rate (true mean perc. rate in excess of 90 Min./in.).

Based on this investigation, the lot is conditionally recommended for approval for installation of a septic tank system. The system should be placed in the rear portion of the lot with design being based on a percolation rate of 60 min./in.

EC:jjk

Serial No. 3824

PTR No. 7224

T. C. No. 105-165-44

Date Issued November 16, 1973

Map Date 4-27-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

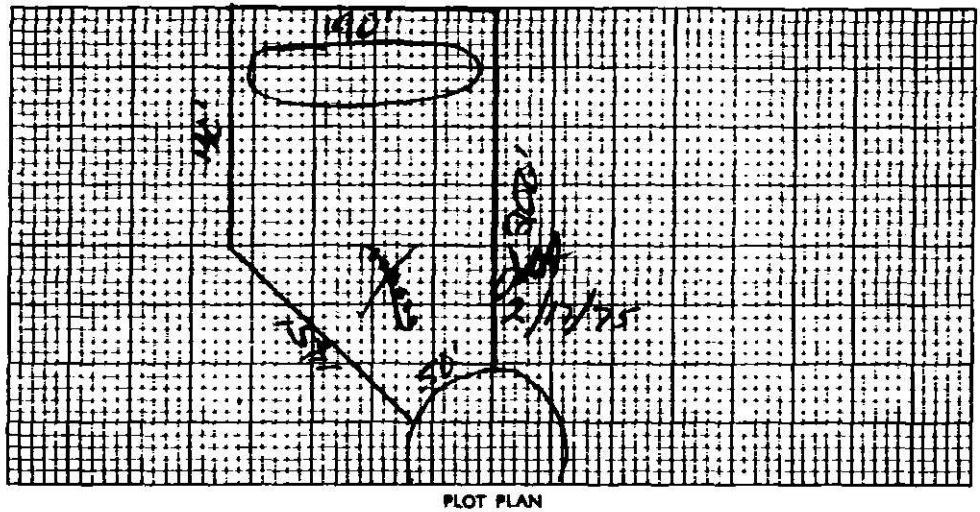
PERCOLATION TEST REPORT

NAME OF OWNER Hodges (LAST) James (FIRST) Franklin (MIDDLE)

ADDRESS OF OWNER Route 8, Box 95 ZIP

LOCATION OF PROPERTY Rolling Acres Road (STREET OR COUNTY ROAD)

SUBDIVISION Rolling Acres LOT NO. 17 BLOCK NO. B



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 55 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 will 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 a well) 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.

R. M. Reynolds John R. Adkinson

Director, Environmental Health Division or Authorized Section Head

FORM NO. E-2-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 4943

PTR No. 7224

Date Issued Feb. 17, 1975

T C. No. 105-165-44

Map Date 4-27-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

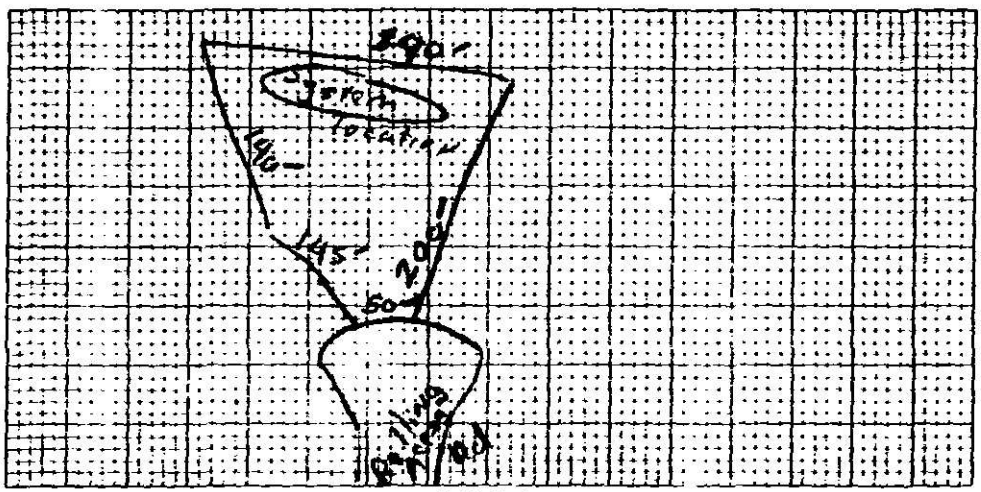
PERCOLATION TEST REPORT

NAME OF OWNER Scotton (LAST) Frank (FIRST) Paul (MIDDLE)

ADDRESS OF OWNER Route 10, Box 366-B ZIP

LOCATION OF PROPERTY Rolling Acres Road (STREET OR COUNTY ROAD)

SUBDIVISION Rolling Acres LOT NO. 17 BLOCK NO. B



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 *60Min./In. The soil 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 teretment system which must be installed will 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 void ab initio 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 a well) 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.

*Results determined by soil analysis

W. Edward Cavenaugh Soil Scientist

John R. Johnson

Director, Environmental Health Division or Authorized Section Head

FORM NO. E-2-9-1-72

HEALTH DEPARTMENT'S COPY

R

SEE INSTRUCTIONS ON BACK

Date Received 10-25-74

ICAR(S) Application No 7224

T C No 105165-44

Map Date 42713

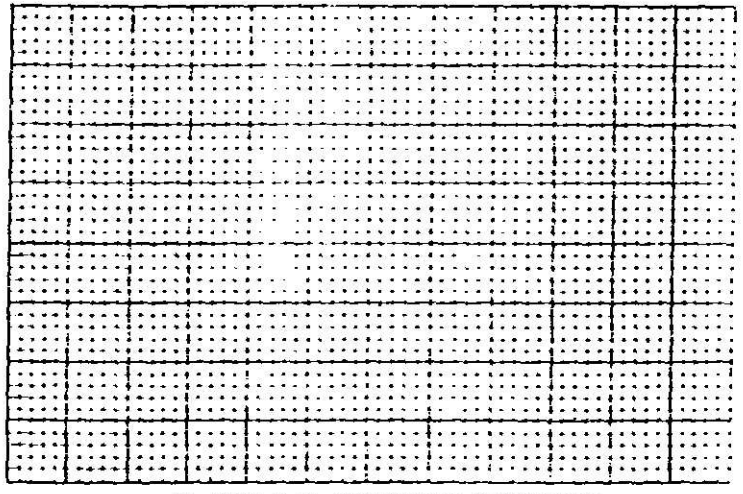
MECKLENBURG COUNTY HEALTH DEPARTMENT

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) ✓ 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) 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) Government System ___
- C) Community System ___
  - 1 Well source ___
  - 2 Government 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 [illegible] (LAST) [illegible] (FIRST) [illegible] (MIDDLE)

14) ADDRESS OF OWNER Route 10 Box 366 B

15) PHONE NO. Home 536 2955 Office ___

16) LOCATION OF SYSTEM Rolling Acres Rd (STREET OR COUNTY ROAD)

17) SUBDIVISION Rolling Acres Lot No. 17 Block No. B

Map Book No. 15 Page No. 239

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___ PB 55

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ___ NO DATE RUN 11-15-73

20) PTR NUMBER (See Instructions) 7224

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.

10-25-74
DATE OF APPLICATION

Frank P. Scott
OWNER

FORM NO E-4-8-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 10-28-74

Serial No. 4511

LA No. 7224

T. C. No. 105-165-44

IMPROVEMENTS PERMIT

Map Date 4-27-73

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 Scotton (LAST) Frank (FIRST) Paul (MIDDLE)

ADDRESS OF OWNER Route 10, Box 366-B ZIP

LOCATION OF LOT Rolling Acres Road (STREET OR COUNTY ROAD)

SUBDIVISION Rolling Acres LOT NO. 17 BLOCK NO. B

MAP BOOK NO. 15 PAGE NO. 239

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 55 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 7224. 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.

R. M. Reynolds
Environmentalist

John R. Atkisson
Director, Environmental Health Division or Authorized Section Head

FORM NO. E-3-8-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 31 July 1975 Serial No. 6552 ICAR (S) Permit No. 7224

T C No 105-165-44

Map Date 4-27-73

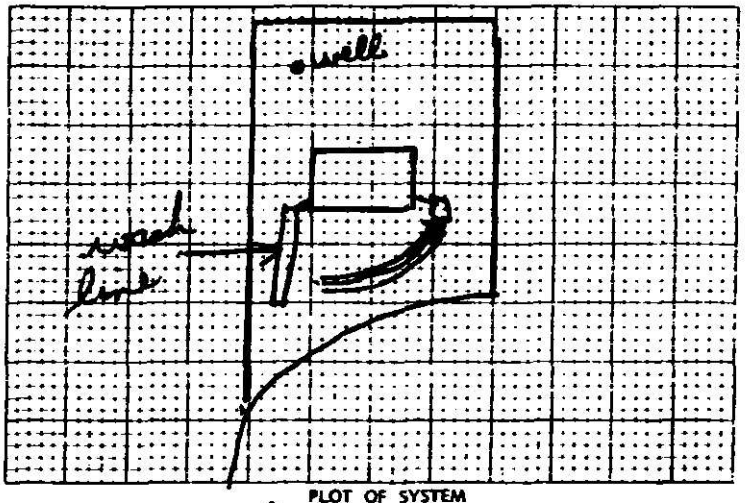
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 7224, dated 10-25-74 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 15 Dec 1975 after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 55

Liquid Capacity of Tank 1000 gal

Tank Construction pre cast

Absorption and/or Nitrification Lines:

Total Line Lenght 400 ; 150

Number of Lines 5(12½ x 60) x 17"

Distance from House 10' +

Distance from Property Line 10'

Distance from Well 50' +

NAME OF OWNER Stotton, Frank Paul

LOCATION OF PROPERTY Rolling Acres Road

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: wash line in bed 10'x30'x17"

Division or Section Head

John R Atkinson
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-5-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 6521

C of A (s) No. 7224

Date Issued 12/29/75

T C. No. MX-165-M4

CERTIFICATE OF COMPLETION

Map Date 4/27/23

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner SCOTTON (LAST) FRANK (FIRST) PAUL (MIDDLE)

Location of Property ROLLING ACRES RD

Application Number 7224 Permit Number 7224

Inspection Data:

Liquid Capacity of Tank 1000gal Tank Material PC

Total Length of Drain Tile ST 400 WM 450 Number of Lines ST 5 WM 4

Depth of Filter Material 17" Cover Depth 2'

Water Supply Source 2ND WELL Distance from Water Source 50'+

Excavation Inspected 12/22 & 12/29/75 (DATE) Tank Inspected 12/22/75 (DATE)

Nitrification Field Inspected 12/22/75 (DATE)

Washing Machine Line Inspected, If Applicable 12/29/75 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been X 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: INSP; S.T. & D.T. DRAIN - R. Reynolds

W.R. FLOYD.

Environmentalist

FORM NO E-8-9-1-72

HEALTH DEPARTMENT'S COPY