SEE INSTRUCTIONS ON BACK

Date Received _____

ICAR(S) Application No. 14686 2

T. C. No. 135-331-38

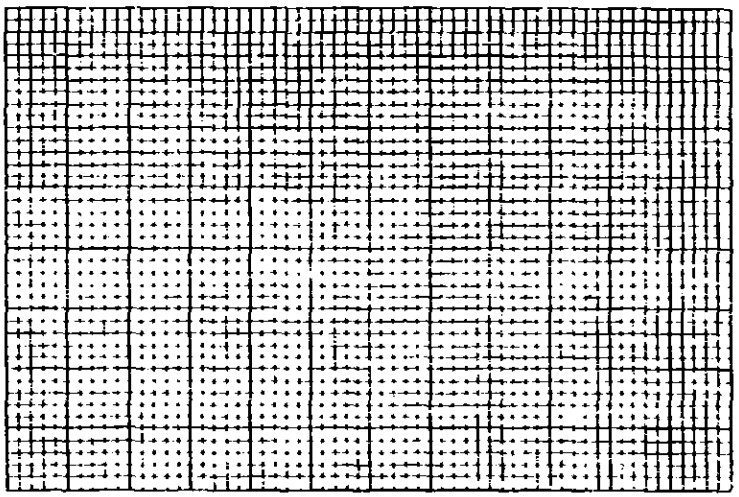
Map Date _____

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 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 _____
      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 Towler (LAST) John (FIRST) Stephen (MIDDLE)

14) ADDRESS OF OWNER 3554 Jared Circle Matthews, NC 28105

15) PHONE NO. Home 847-5134 Office 519-6300

16) LOCATION OF SYSTEM 3554 Jared Circle Matthews N.C. 28105 (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No _____ Page No. _____

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.

_____ _____
DATE OF APPLICATION OWNER

EHO-5-76

Serial 3501

Date Issued 10 Dec 79

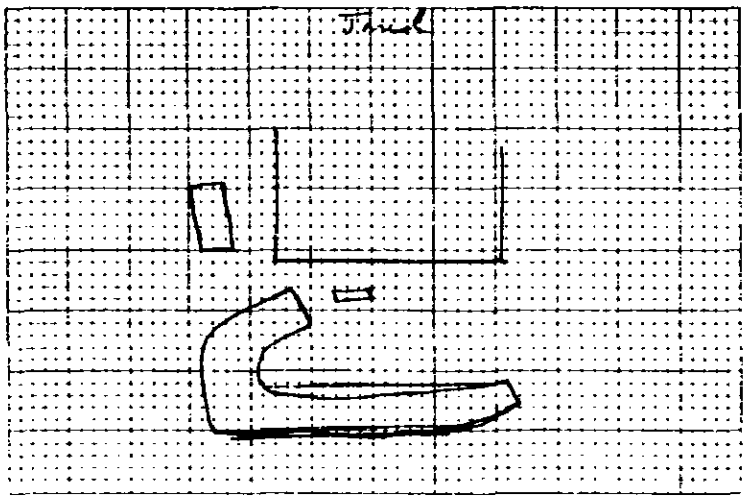
ICAR(S) Permit No. 14686

T. C. No 135-BX-28

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 14686, dated 9/10/79 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 10 Jan, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate P. 5.

Liquid Capacity of Tank 1500 gal

Tank Construction P.C. Conc.

Absorption and Nitrification Lines

Total Line Length 495' & 125'

Number of Lines 5 & 4

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'-50' min

NAME OF OWNER Ralph Squires Const. Co

LOCATION OF PROPERTY 3554 Jared Circle

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.

(12' x 32' x 13" stone
15' x 99'

Division or Section Head

Environmentalist Steve Wood

* 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-S-76

Environmental Health Department's Copy

Date Issued 20 Dec 79

Serial 3361

C of A (s) No. 14686

T C No. 135-331-

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL HEALTH DIVISION

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

Name of Owner Ralph Squires Company (LAST, FIRST, MIDDLE)

Location of Property 3554 Jared Circle

Application Number _____ Permit Number 14686

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 18"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected — Tank Inspected 20 Dec (DATE)

Nitrification Field Inspected 20 Dec (DATE)

Washing Machine Line Inspected If Applicable 20 Dec (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 CRR

Environmentalist

EHD-5-76

Environmental Health Department's Copy

Date Received 2/14/79

APT No. 14686

T. C. No. ~~193-30-04~~ 135-321-28

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER RALPH SQUIRES CONST. CO., INC.
(LAST, FIRST, MIDDLE)

2) ADDRESS OF OWNER PO BOX 25178 ZIP 28212

3) PHONE NO Home _____ Office 537-9553

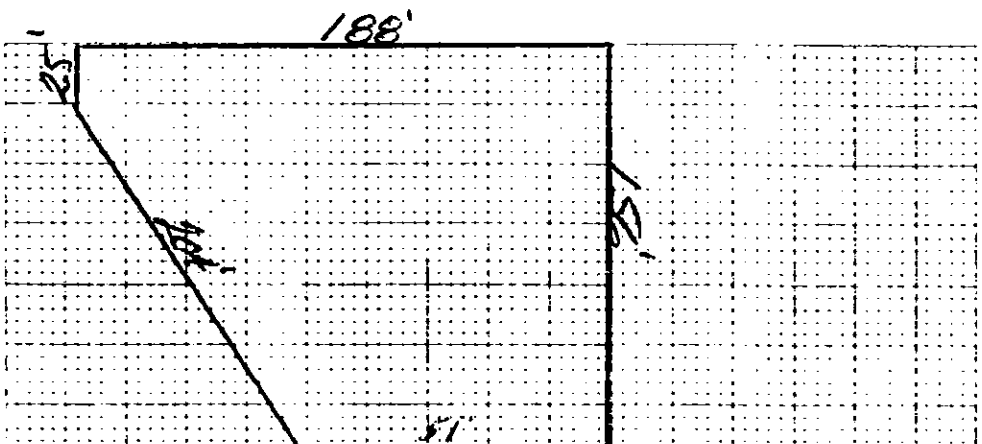
4) LOCATION OF PROPERTY 3542 TWIN HOME LN.
(STREET OR COUNTY ROAD)

5) SUBDIVISION HOMESTEAD LOT NO 4 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/or an on site inspection of the lot hereinabove described for the purpose of determining if this 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.

OWNER

EHD 5 76

Environmental Health Department's Copy

Date Received 10/20/78

APT No. 14656
P.O. 135-331-2
T. C. No. 93-312-04

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Ralph Squires Const Co.
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER P.O. Box 2508 ZIP 28212

3) PHONE NO Home _____ Office 537-9553

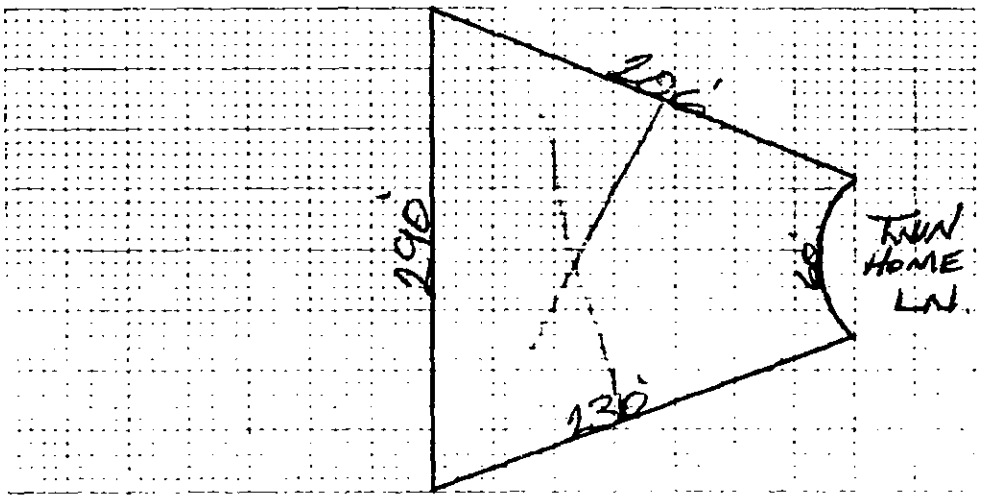
4) LOCATION OF PROPERTY Twin Home Ln.
(STREET OR COUNTY ROAD)

5) SUBDIVISION Homestead II LOT NO 54 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 property described for the purpose of determining if the site is suitable for the installation of an individual septic tank wastewater treatment system with subsurface soil absorption effluent discharge.



7. ACCURATELY DRAW OR DESCRIBE PROPERTY

See enclosed copy for correct lot dimensions.
W. A. Mack

OWNER

Environmental Health Department's Copy

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

APPENDIX H
SITE EVALUATION

(Ground Absorption Sewage Disposal)

APT 14006
PO 193-322-04
Lot 24

OWNER: Ralph Squires Const. Co. DATE REQUESTED: _____
ADDRESS: PO Box 2516 PLAT NO.: _____
COUNTY: Charlotte, N.C. LOT SIZE: 22,774
LOCATION OF SITE: Twin Home Lane

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS 2-8% 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) 48" PS U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Imprevious Strata, Rock)	(S) None PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) >6' to ground PS water 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	Provisionally suitable			
SOIL SERIES	Enon			

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: William R. Martin

Title: Soil Scientist Date: 12-13-78

DHS Form 2601 (2/77)
Sanitation

Serial No. 2403

PTR No. 14686

T C. No. po 193-322-04

Date Issued Dec. 14, 1978

Map Date

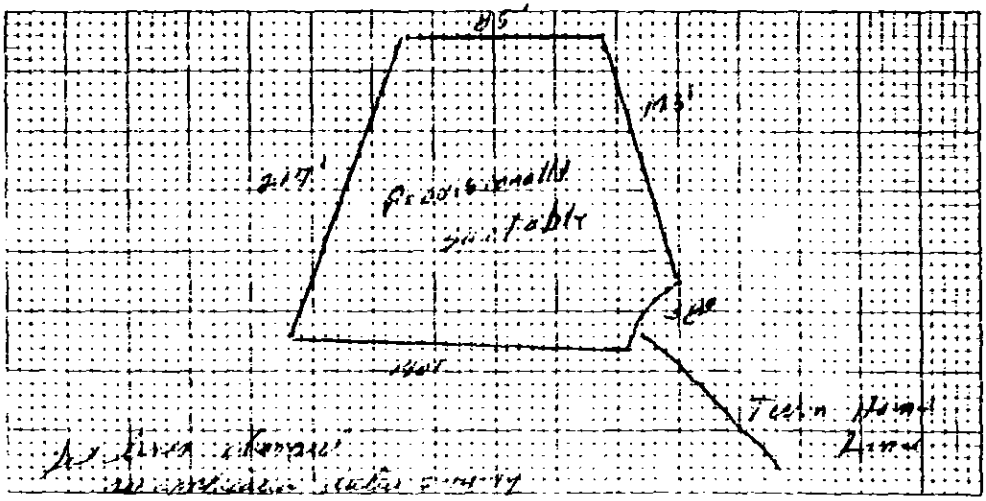
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER (LAST) (FIRST) Ralph Squires Const. Co. (MIDDLE)

ADDRESS OF OWNER P.O. Box 25178 ZIP 28212

LOCATION OF PROPERTY Twin Home Lane (STREET OR COUNTY ROAD)

SUBDIVISION Homestead II LOT NO 4 BLOCK NO.



PLOT PLAN

This is to certify that a soil investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The soil investigation was conducted in that portion of the lot designated in the above plot.

The permissible rate determined by the investigation was **Provisionally Suitable**. 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 construct after inspection of the septic tank installation will be issued from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction of the wastewater treatment system on the said lot.
2. The [illegible] wastewater treatment system and [illegible] as determined by the Mecklenburg County Department of Environmental Health, [illegible] stated above, and in accordance with [illegible].
3. [illegible] system installation [illegible].
4. [illegible] the [illegible] at which [illegible] Department of Environmental Health [illegible] stated as acceptable for [illegible].

This permit is granted based upon 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 Board of Commissioners as they relate to [illegible] and that at any time [illegible] the [illegible] of the system to these laws and regulations are changed such that this permit would not have been granted and the new revised laws, rules and regulations been in effect on the issue date.

Dec 5 76 William A. Miller
Soil Scientist

John R. Atkisson
Environmental Health Director or
Authorized Section Head

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 9/10/79

ICAR (S) Application No. 14686

T C. No. 135-331-28

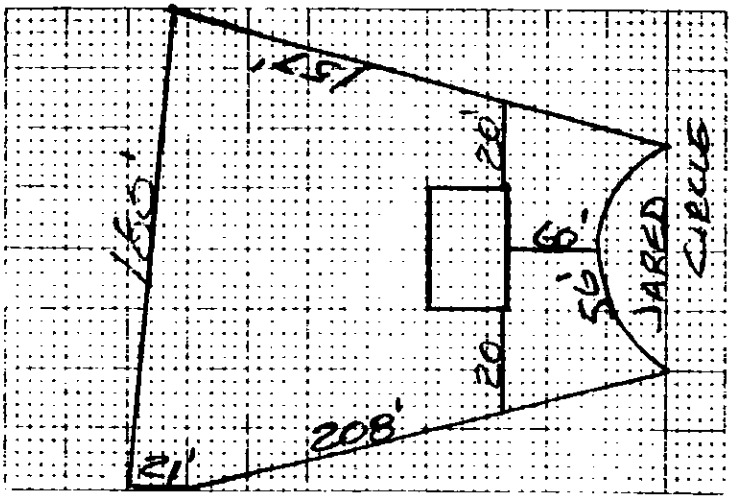
Map Date _____

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 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 ___
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 RALPH (LAST) SQUIRES (FIRST) CONST. CO. INC. (MIDDLE)

14) ADDRESS OF OWNER P.O. Box 25178 28212

15) PHONE NO. Home ___ Office 537-9553

16) LOCATION OF SYSTEM 3554 JARED CIRCLE (STREET OR COUNTY ROAD)

17) SUBDIVISION FOX LANDING Lot No. 4 Block No. ___

Map Book No. ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN MADE ✓ YES NO DATE RUN 12-14-78

20) PER NUMBER (See Instructions) 14686

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.

DATE OF APPLICATION 6-6-79

OWNER Ralph Squires

EHD-5-76

Environmental Health Department's Copy

Serial No. 3495

LA No. 14686

Date Issued Sept. 10, 1979

T. C. No. 135-331-28

Map Date _____

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 _____ Ralph Squires Const. Co., Inc. _____
LAST FIRST MIDDLE

ADDRESS OF OWNER PO Box 25178, Charlotte ZIP 28212

LOCATION OF LOT 3554 Jared Circle
STREET OR COUNTY ROAD

SUBDIVISION Fox Landing LOT NO. #4 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 14686 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 ***SYSTEM TO BE BASED ON .6 GALLONS PER SQUARE FOOT BOTTOM AREA***

Environmentalist

John R Atkisson
Environmental Health Director, or Authorized Section Head

EHD 5 75

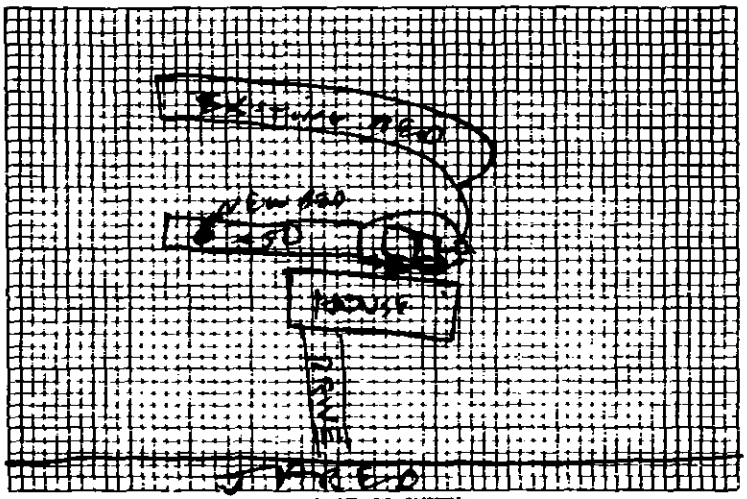
Environmental Health Department's Copy

R

Date Issued 4-27-84 Serial No. 07169 ICAR (S) Permit No. 14686
T C. No. 155-331-28
Map Date 1

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 14686, dated _____ 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 5-27-84, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500

Tank Construction PRECAST

Absorption and/or Nitrification Lines:

Total Line Length 6 x 50

Number of Lines 2 x 50

Distance from House 5+

Distance from Property Line 10+

Distance from Well 50+

NAME OF OWNER [redacted] FOWLER, JOHN STEPHEN

LOCATION OF PROPERTY 3554 JARED CIRCLE

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.

1 line 6' x 50' long x 12" stone w/straw cover

Comments: _____

Division or Section Head

Kelly Randall
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.

EHD-5-76

Date Issued A-30-84 Serial 6587

C of A (s) No. 14686

T. C. No. 135-331-38 L CRT

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 FOWLER (LAST) JOHN (FIRST) STEPHEN (MIDDLE)

Location of Property 3554 JARED CIRCLE

Application Number 14686 Permit Number 14686

Inspection Data: REPAIR

Liquid Capacity of Tank _____ Tank Material REPAIR

Total Length of Drain Tile 100' Number of Lines 2 x 50

Depth of Filter Material 12" Cover Depth 2'

Water Supply Source well Distance from Water Source 50+

Excavation Inspected 4-30-84 (DATE) Tank Inspected _____ (DATE)

Nitrification Field Inspected 4-30-84 (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 reconstructed 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

Kelly Kendall
Environmentalist

EHD-5-76