Date Received 10-8-73

MECK COUNTY HH RECEIVED OCT 05 1973 ENVIRONMENTAL HEALTH DIVISION

APT No. 7028

T. C. No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER James (LAST) Ernest (FIRST) Eugene (MIDDLE)

2) ADDRESS OF OWNER 8832 Windsong Dr Charlotte ZIP 28210

3) PHONE NO. Home 527-1581 Office 333-9291

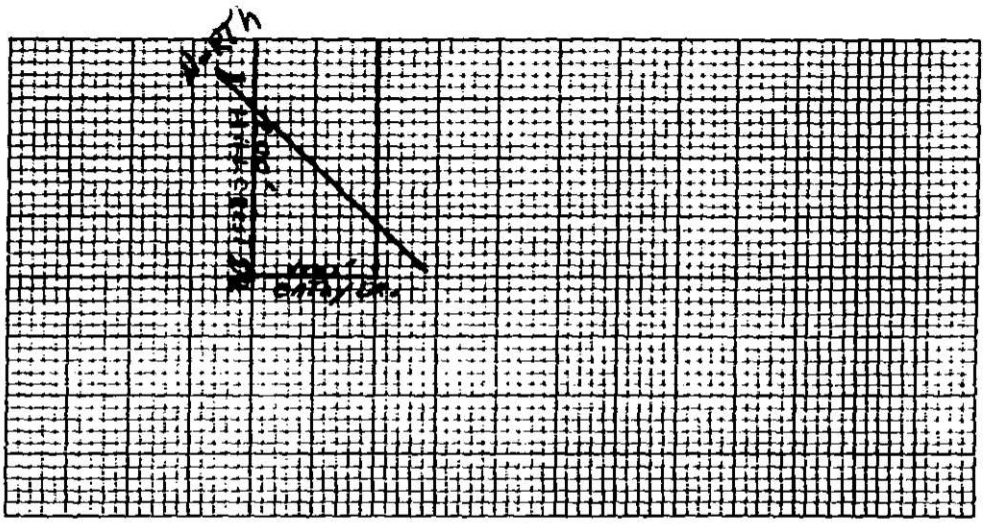
4) LOCATION OF PROPERTY Cathy Dr. AND Hillcrest Dr. (STREET OR COUNTY ROAD)

5) SUBDIVISION Berryhill Acres LOT NO. 14-17 BLOCK NO. F

MAP BOOK NO. 1907 PAGE NO. 435

6) DEED REFERENCE: DEED BOOK 6 PAGE NO. 561

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

Ernest Eugene James
OWNER

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

HEALTH DEPARTMENT'S COPY

MECKLENBURG COUNTY
Department of Public Health

1200 Blythe Boulevard
Charlotte, North Carolina 28203
Telephone 374-2113

Date Issued
1. October 29, 1973
2. _____
3. _____

SITE DISAPPROVAL REPORT
INDIVIDUAL SEPTIC TANK SYSTEM WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

SDR No. 7078
T.C. No. 113-102-01
2-23-73

NAME OF OWNER James, Ernest Eugene

ADDRESS OF OWNER 8832 Windsong Drive ZIP 28210

LOCATION OF LOT Cathy Dr. and Millcrest Dr.

The lot described above has been disapproved for the installation of an individual septic tank system with subsurface soil absorption, effluent discharge due to the following:

FAILURE TO PASS PERCOLATION TEST (60 minutes per inch or less)

	Test No.	Date of Test	Percolation Rate
____	1.	_____	_____ min/in
____	2.	_____	_____ min/in
____	3.	_____	_____ min/in

X ON SITE INSPECTION REVEALED LOT TO BE UNSUITABLE FOR THE FOLLOWING REASON(S) 10-25-73 - Soils were found to be of the Mecklenburg series. These soils have very plastic and sticky clay subsoils which contain swelling clay minerals. These factors result in inadequately slow percolation rate and permeability (mean percolation rate of 90 min./in.).

W. Gentle Lyon, Jr.
Soil Scientist

Environmentalist

(Stencil No.)
EHD 398
8/70

FORM NO.
E-19-8-14-70

MECKLENBURG COUNTY HEALTH DEPARTMENT
INTER-OFFICE COMMUNICATION

DATE: October 29, 1973

TO: Luther P. Bridgeman
Environmentalist

FROM: W. Everette Lynn, Jr. wel
Soil Scientist

SUBJECT: APT #7078 (E. E. James)
Lot No. 14-17, Block F
Corner of Cathy Dr. and Hillcrest Dr.
10-25-73

Soils were found to be of the Mecklenburg series. These soils have very plastic and sticky clay subsoils which contain swelling clay minerals. These factors result in inadequately slow percolation rate and permeability (mean percolation rate of 90 min./in.).

Based on this investigation, it appears that the lot is unsuitable for a conventional septic tank system.

WEL:jdg

Date Received 10-8-73

RECEIVED
OCT 05 1973
MECK COUNTY ENVIRONMENTAL HEALTH DIVISION

LOAR(S) Application No 7078

T C No 113-102-01

Map Date 2-23-73

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 Bedroom 3

5) Business Use NO Max No Employees NONE

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 YES
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 James (LAST) Ernest (FIRST) Eugene (MIDDLE)

14) ADDRESS OF OWNER 8832 Windsong DR. Charlotte

15) PHONE NO. Home 527-1581 Office 333-9291

16) LOCATION OF SYSTEM CORNER OF Cathy DR + HILLCREST DR. (STREET OR COUNTY ROAD)

17) SUBDIVISION Berryhill Acres Lot No. 14-17 Block No. E

Map Book No. 1907 Page No. 430

18) DEED REFERENCE — DEED BOOK 6 AT PAGE 561

19) HAS A PERCOLATION TEST 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 10/1/73

Ernest Eugene James
OWNER

FORM NO E-4-8-1-72

HEALTH DEPARTMENT'S COPY

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

SEPTIC TANK AGREEMENT

APT #7078

Date November 27, 1973

I acknowledge that I have been informed by the Mecklenburg County Health Department that the property described as

Lot 14-17, Block F, of Berryhill Acres Subdivision, as recorded in Map Book 1907, Page 435, of the Mecklenburg County Registry (tax code Number 113-102-01)

is not a recommended site for the installation of a septic tank and nitrification system for the reason or reasons listed below. I agree to immediately abate any nuisance which occurs from a septic tank installed at this location for as long as I am the owner. I also agree to inform any person, firm or corporation buying or accepting transfer of this property from me of this agreement.

Unsuitable Soil

Percolation rate 120 min./in.

COPY

PRESENTED FOR REGISTRATION
1973 Nov 28 AM 8 20
CHARLES E. CROWDER
REGISTER OF DEEDS
MECKLENBURG CO. N.C.

Owner Ernest Eugene James

Attested Margie L. Deaton

State of North Carolina
County of Mecklenburg

STATE OF N.C.

COUNTY OF Meck.

I, R.L. Deaton, a Notary Public, do hereby certify that Ernest Eugene James personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and Notarial seal, this 27 day of Nov. 1973

(seal)
My commission expires:
8-5-75

R.L. Deaton
NOTARY PUBLIC 8.5.75

Serial No. 3655

LA No. 7078

Date Issued November 28, 1973

T. C. No. 113-102-01

IMPROVEMENTS PERMIT

Map Date 2-23-73

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 James (LAST) Ernest (FIRST) Eugene (MIDDLE)

ADDRESS OF OWNER 8832 Windsong Drive ZIP _____

LOCATION OF LOT Cathy Dr. & Hillcrest Dr. (STREET OR COUNTY ROAD)

SUBDIVISION Berryhill Acres LOT NO 14-17 BLOCK NO. F

MAP BOOK NO. _____ PAGE NO. _____

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 X, 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 7078. 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.

Environmentalist

John R. Robertson

Director, Environmental Health Division or Authorized Section Head

FORM NO. E-3-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 11-1-73

Serial No. 4600

ICAR (S) Permit No. 7078
T. C. No. 113-102-01
Map Date 8-23-73

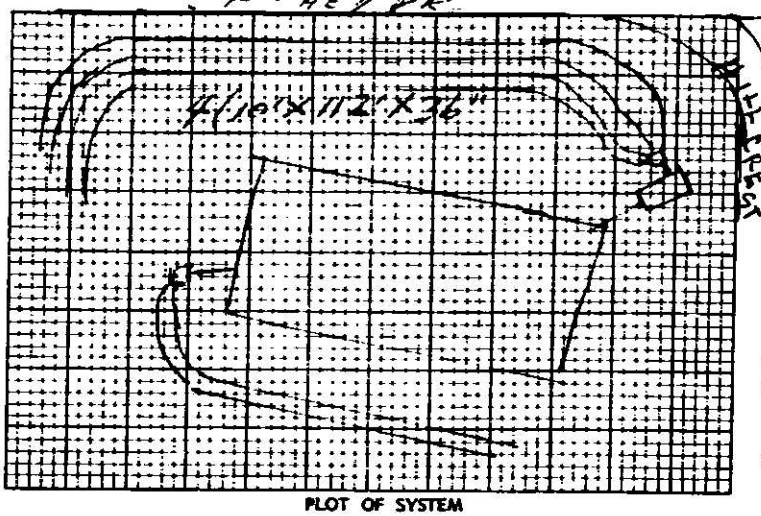
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

Permission is hereby given to X 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 7078, dated 10-8-73 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 11-20-73, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 90

Liquid Capacity of Tank 1500

Tank Construction PC

Absorption and/or Nitrification Lines:

Total Line Lenght S.T. 900 W.M. 200'
ST 4(10'X112'X3')

Number of Lines WM 2(5'X100'X17")

Distance from House 10' min

Distance from Property Line 10' min

Distance from Well 50'+

NAME OF OWNER ERNEST EUGENE JAMES

LOCATION OF PROPERTY CAITHEY DR. @ HILLCREST.

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: TANK TO HAVE MAX 4" SOIL COVER

T A [illegible] 73
Division or Section Head

L P Burleson
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-5-4-1-71

HEALTH DEPARTMENT'S COPY

Serial 4229

C of A (s) No. 7078

Date Issued 11-27-73

T. C. No.

Map Date

CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner JAMES (LAST) EUGENE (FIRST) ERNEST (MIDDLE)

Location of Property CATHEY DR. @ HILLCREST

Application Number 7078 Permit Number 7078

Inspection Data:

Liquid Capacity of Tank 1500 ST WM Tank Material PC ST. WM

Total Length of Drain Tile 700 sq. 200 sq. Number of Lines 4 2

JA

Depth of Filter Material 36" 17" Cover Depth

Water Supply Source CITY WATER Distance from Water Source 50'+

Excavation Inspected 11-21 & 27-73 (DATE) Tank Inspected 11-21-73 (DATE)

Nitrification Field Inspected 11-21-73 (DATE)

Washing Machine Line Inspected, If Applicable 11/27/73 (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: self contracted.

L P Brinkman

Environmentalist

FORM NO. E-6-4-1-71

HEALTH DEPARTMENT'S COPY