Date Received 3-1-84

MECK COUNTY DEPARTMENT OF
RECEIVED
ENVIRONMENTAL HEALTH

SIR No. 20697
PO
T. C. No. 231-111-04
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 ZIP NC 28205

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

4) LOCATION OF PROPERTY County Court
STREET OR COUNTY ROAD

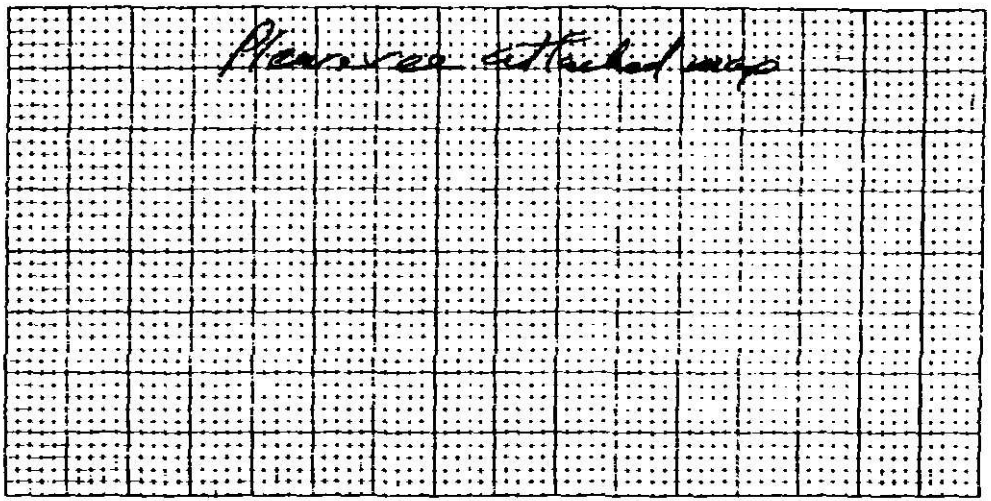
5) SUBDIVISION Providence Woods LOT NO. 23 BLOCK NO. V

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

[signature]
OWNER Agent

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 5558

SIR No. 20697

Date Issued 3-28-84

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

Map Date

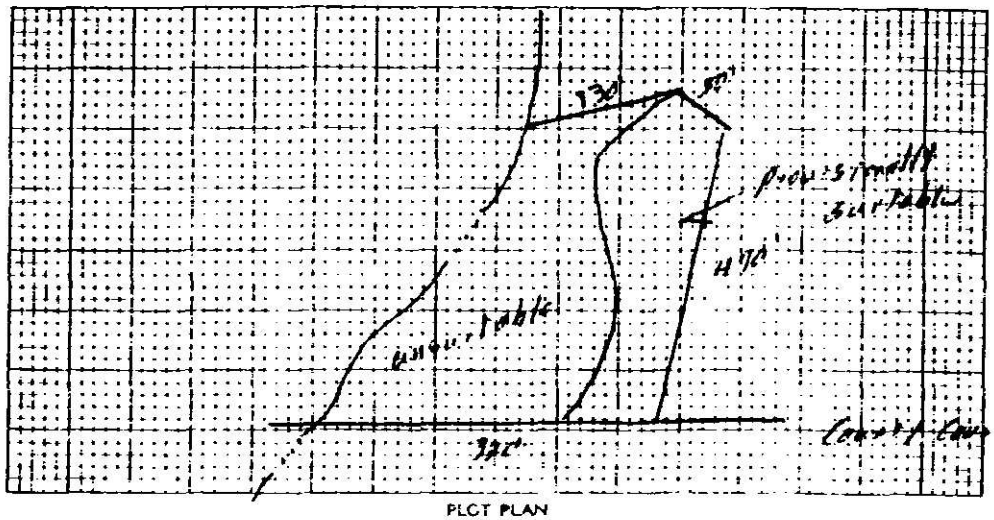
# MECKLENBURG COUNTY
# DEPARTMENT OF ENVIRONMENTAL HEALTH
## SOIL INVESTIGATION REPORT

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

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

LOCATION OF PROPERTY County Court
(STREET OR COUNTY ROAD)

SUBDIVISION Providence Woods LOT NO 23 BLOCK NO. 5




PLOT PLAN

This is to certify that a soil investigation and site evaluation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The said investigation was conducted on that portion of the lot as indicated on the above plot. **PROVISIONALLY SUITABLE**

The permeability rate determined by the investigation was . 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 the wastewater treatment system must be obtained 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 size of the septic tank wastewater treatment system must be determined by the Mecklenburg County Department of Environmental Health prior to the issuance of the permit to install and on the size and type of building to be constructed thereon.
3. This approval is valid only for the system described herein and does not guarantee system installation on the above plot.
4. This approval is granted based on the conditions existing at the time of the investigation which, in the opinion of the Mecklenburg County Department of Environmental Health, indicate the soil is acceptable for system installation. Unsuitable soil conditions may develop by raising the water table, by filling, by excavation, or by other alterations to the site.

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 valid for 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 C. Mavin
Soil Scientist

Brice D. Hendrix Jr.
Environmental Health Director or
Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

# APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)
FILE: [illegible]
TC: _____
SERIAL: 10462
☐ L ☐ CRT

**JOB LOCATION**

① ADDRESS: 3633 (STREET NO) BOUNTY COURT (STREET) ② FILE: 20697
③ JURISDICTION: _____ ④ TAX PARCEL NO.: [illegible]
⑤ SUBDIVISION: PROVIDENCE WOODS ⑥ LOT: 25 ⑦ BLOCK: 5

**OWNER**

⑧ NAME: HARRY (FIRST) FERGUSON (MIDDLE) JOHNSON (LAST)
⑨ MAILING ADDRESS: 201 MT. VERNON AVE.
⑩ CITY: CHARLOTTE ⑪ STATE: NC ⑫ ZIP: 28203
⑬ PHONE: (WORK) 376-3613 ⑭ (HOME) 376-1611

**REQUEST**

This request is for a(n):

⑮ ■ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☐ Other (specify) _____

**DESIGN CRITERIA**

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 5
㉕ Type? _____
㉓ Maximum occupancy? _____
㉖ Maximum number of employees? _____
㉔ Basement? ☒ yes ☐ no
㉗ Maximum number of seats? _____

**WATER SUPPLY**

㉘ Water supply from (present or proposed):

A ☒ Individual well
B ☐ Municipal system
C ☐ Community well
D ☐ Community system

㉙ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: [signature]
Date: 6/11/91

## IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

. . No work shall be conducted on the septic tank system until an Installation Construction, Alteration and or Repair permit is issued by this Department

This permit is not transferable, and shall become null and void 36 months from the date of issuance.

Environmentalist _____ Date _____

Director or Authorized Section Head _____ Date _____

*This permit must be signed by the Director of Environmental Health or an authorized section head in order to be valid.

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20697

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

(Ground Absorption Sewage Disposal)

OWNER: Providence Woods Inc.
ADDRESS: 1940 E. Independence Blvd.
Charlotte, N.C. 28205
LOCATION OF SITE: County Court

PLAT NO: L23V
LOT SIZE: 109,000

| FACTORS | AREA 1 | AREA 2 | AREA 3 | AREA 4 |
|---|---|---|---|---|
| 1. SLOPE (%) | S<br>PS 2-10%<br>U | S<br>PS 2-8%<br>U | S<br>PS —<br>U | S<br>PS<br>U |
| 2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay) | S<br>PS Clay<br>U | S 2-1<br>PS Clay<br>U | S<br>PS —<br>U | S<br>PS<br>U |
| 3. SOIL STRUCTURE (12-36 inches) | S<br>PS Blocky<br>U | S<br>PS Blocky<br>U | S<br>PS —<br>U | S<br>PS<br>U |
| 4. SOIL DEPTH (inches) | S<br>PS 36-48"<br>U | S<br>PS 36-40"<br>U | S<br>PS —<br>U | S<br>PS<br>U |
| 5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock) | S<br>PS >36"<br>U | S<br>PS >36"<br>U | S<br>PS —<br>U | S<br>PS<br>U |
| 6. SOIL DRAINAGE/GROUNDWATER (external and internal) | S<br>PS >48" to ground water<br>U | S Perched water table 24-36"<br>PS<br>U | S Drainage-wet<br>PS<br>U Depression | S<br>PS<br>U |
| 7. OTHER (Specify) | S<br>PS System May Need Lift Pump<br>U | S<br>PS<br>U | S<br>PS<br>U | S<br>PS<br>U |
| 8. SOIL GROUP | 10A | 10B | — | |
| 9. SITE CLASSIFICATION | Provisionally suitable | unsuitable | unsuitable | |
| 10. SOIL SERIES | Cecil-Lite | Helena-Lite | Depression-Drainageway | |

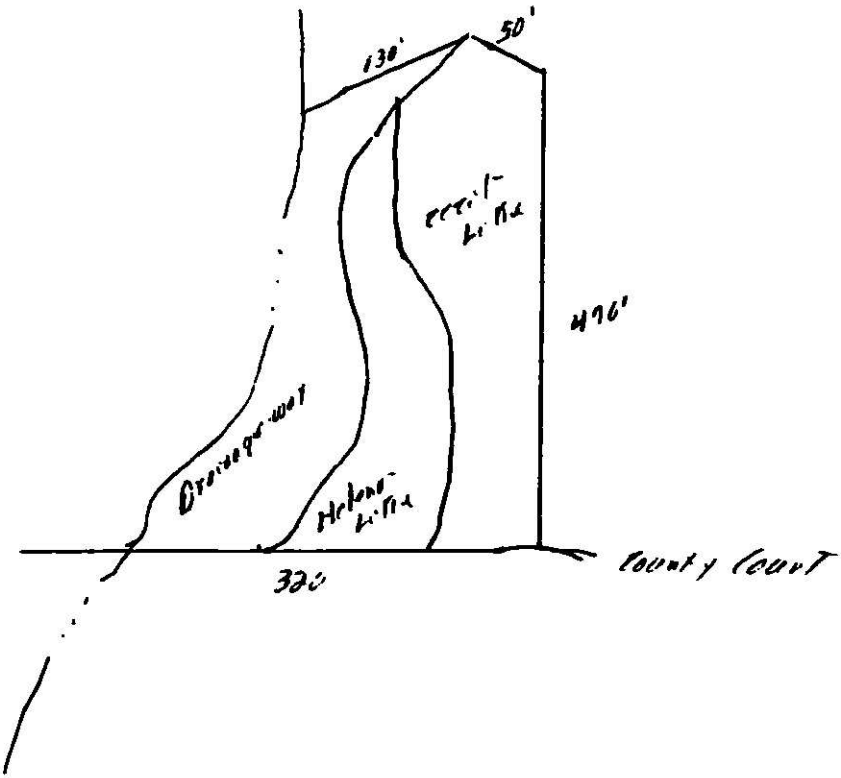
S - Suitable PS - Provisionally Suitable U - Unsuitable

**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 R. Marlin
Title: Soil Scientist

Date: 3-27-84


130'
50'
476'
320
County Court

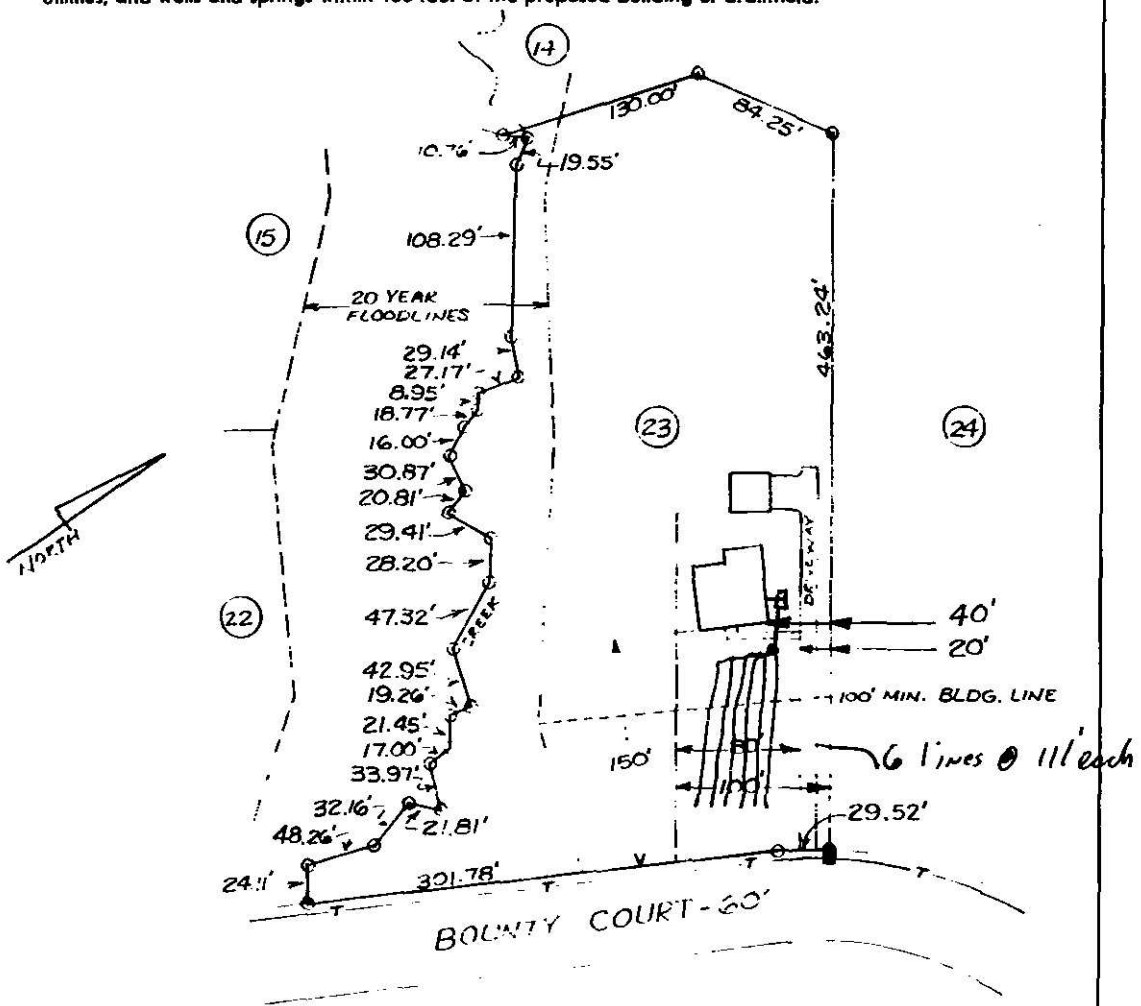
# PROPOSED PLOT PLAN

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 70697

TC: _____

Draw in and name all roads adjoining the property. Drew in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.




LOT 23, PHASE V - PROVIDENCE WOODS
PROPOSED HOUSE & DRIVEWAY

—T—S—T— BURIED TELEPHONE CABLE AND PEDESTAL

Signed: [signature]

Date: 6/7/96

# APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

(OFFICE USE ONLY)

FILE: 20697

TC:

SERIAL: № 10462

☒ L ☐ CRT

JUL 1

**JOB LOCATION**

① ADDRESS: 3633 BOUNTY COURT (STREET NO / STREET) ② FILE: 20697

③ JURISDICTION: ④ TAX PARCEL NO.: 231·111·40

⑤ SUBDIVISION: PROVIDENCE WOODS ⑥ LOT: 23 ⑦ BLOCK: 5

**OWNER**

⑧ NAME: HARRY (FIRST) FERGUSON (MIDDLE) JOHNSON (LAST)

⑨ MAILING ADDRESS: 601 MT. VERNON AVE.

⑩ CITY: CHARLOTTE ⑪ STATE: NC ⑫ ZIP: 28203

⑬ PHONE: WORK: 376-3613 ⑭ (HOME) 376-9619

**REQUEST**

This request is for a(n):

⑮ ☒ New permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify)

**DESIGN CRITERIA**

System will serve

⑲ ☒ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 5 ㉕ Type?

㉓ Maximum occupancy? 6 ㉖ Maximum number of employees?

㉔ Basement? ☒ yes ☐ no ㉗ Maximum number of seats?

**WATER SUPPLY**

㉘ Water supply from present or proposed:

A ☒ Individual well

B ☐ Municipal system

C ☐ Community well

D ☐ Community system

㉙ The undersigned owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: [signature]

Date: 6·17·86

## IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by this Department.

This permit is not transferable and shall become null and void 36 months from the date of issuance.

* LIFT STATION MAY BE REQUIRED *

[signature] 7-15-86
Environmental Sr. Date

[signature] 7/15/86
Director or Authorized Section Head Date

*This permit must be signed by the Director of Environmental Health or an authorized section head in order to be valid.

# INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

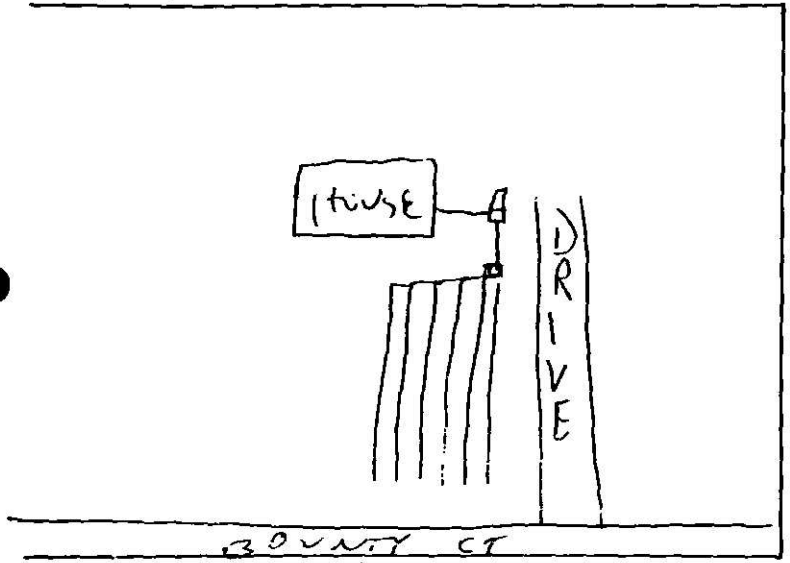
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 10697 DATE: 2-5-87

TC: 231-111-40 L

SERIAL № 10442

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 the application dated 6-17-86. All work shall be completed on or before 3-5-87, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Department of Environmental Health before any system can be covered up or placed into service. 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.




PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank — gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 667' feet

Number of Lines 6

Depth of Stone 12" inches

Distance from House 5 feet

Distance from Property Line 10' feet

Distance from Well 50 feet

NAME OF OWNER JOHNSON HARRY F

LOCATION OF PROPERTY 3633 BOUNTY COURT

Comments: 6 lines x 111' x 3' wide x 12" rock

Division or Section Head

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.

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER OR AGENTS COPY

C of A (s) No. 20697

Date Issued 3-6-87 **Serial** 9199 T. C. No. 231-111-40

V CRT

# MECKLENBURG COUNTY
# DEPARTMENT OF ENVIRONMENTAL HEALTH

## CERTIFICATE OF APPROVAL

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

Name of Owner JOHNSON HARRY
LAST FIRST MIDDLE

Location of Property 3033 [illegible] CT

Application Number 20697 Permit Number 20697

**Inspection Date:**

Liquid Capacity of Tank 1500 Tank Material [illegible]

Total Length of Drain Tile 667 Number of Lines 7

Depth of Filter Material 12 Cover Depth 2'

Water Supply Source Well not used Distance from Water Source 50'

Excavation Inspected 3-6-87 DATE Tank Inspected 3-6-87 DATE

Nitrification Field Inspected 3-6-87 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(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 [illegible]

[signature]
Environmentalist

EHD-5-76

Environmental Health Department's Copy