WELL RECORD . . . . Well Permit No. 13818

MAIL COMPLETED FORM TO: WELL WATER SUPPLIES

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

1200 BLYTHE BOULEVARD, CHARLOTTE, N. C. 28203

Drilling Contractor McCALL Bros

1. Location of property Charlotte
2. Name of owner Ben H. McCoskle
   Address Rt 9 Box 377-B Charlotte
3. Does this well replace an existing well? no
4. Topography (circle one): draw, slope, hilltop, valley, flat
5. Use of well Home Date completed 8-9-78
6. Rig type or method air Total depth 160 ft
7. Casing:

	Depth		Inside Diam.	Wall thick. or Wt. ft.	Type
From	0 to	90 ft.	6¼ in.		Jaw

8. Grout:

	Depth		Material	Method
From	0 to	20 ft.	Cement	pound

9. Liner, if used: Depth _____ Diameter _____
   No holes drilled and abandoned _____
10. Water zones (depth and gpm) _____
11. Static water level: 35 ft. above/below top of casing
    which is _____ ft. above land surface. Elev. _____
    Date _____
12. Yield (gpm) 4 Method of testing _____
13. Pumping water level: _____ ft. after _____ hrs.
    at _____ gpm.
14. Water quality _____ Temperature (°F) _____
15. Well sterilization method _____
16. Permanent pump: _____ Type _____ Make _____
    Installed – Date _____ By _____
    Capacity _____ gpm. Hp _____ TDH _____
    Intake depth _____ Airline depth _____
17. Remarks: _____

DRILLING LOG

Depth From	Depth To	Formation
0	5	Red Clay
5	90	Sand & gravel
90	160	Speckled Granite

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

Willis Sherrill
SIGNATURE OF CONTRACTOR OR AGENT

EHD-S-76

Date Received 4/1/78

APT No. 13818

T. C. No. 037-062-21

Map Date 3-22-78

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER McCORKLE (LAST) JULIA (FIRST) BEATRICE (MIDDLE)

2) ADDRESS OF OWNER Route 9, Box 377-B ZIP 28208

3) PHONE NO Home 399-1557 Office 376-2711

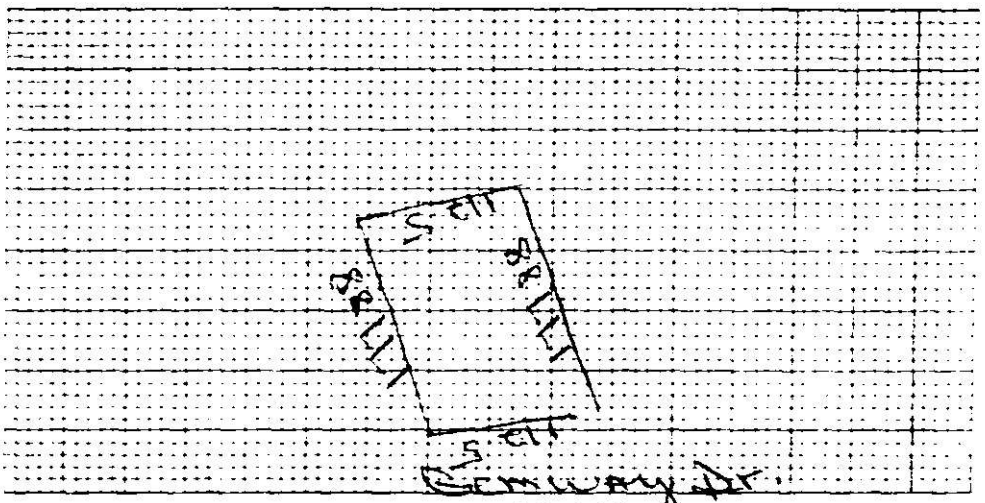
4) LOCATION OF PROPERTY GERNWAY DRIVE (STREET OR COUNTY ROAD)

5) SUBDIVISION EDMORE ESTATES LOT NO 7A BLOCK NO 1

MAP BOOK NO 9 PAGE NO 239

6) DEED REFERENCE DEED BOOK 2860 PAGE NO 198

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



7) ACCURATELY DIAGRAM & DIMENSION LOT

Julia B McCorkle
OWNER

EHD-5-76

Environmental Health Department's Copy

Apl. 13918

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

APPENDIX H
SITE EVALUATION

(Ground Absorption Sewage Disposal)

OWNER: Julia B McCorkle
ADDRESS: Rt 9 Box 337-B 28205
COUNTY: Mecklenburg
LOCATION OF SITE: 033-012-21 Gramny Dr Lot 78

DATE REQUESTED: 4/11/78
PLAT NO.:
LOT SIZE: ~20,000 sq ft

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS U 2-5%	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) PS U >48"	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock)	(S) PS U none noted	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) PS U Fair to mod 26" ft H2O	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 area	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	Provisionally Suitable			
SOIL SERIES	Cecil			

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: Steve Wood

Title: Environmentalist Date: 22 April 78

DHS Form 2601 (2/77)
Sanitation

Serial No. 1804

PTR No. 13018

T. C. No. 037-062-21

Date Issued 4/28/78

Map Date 3-22-78

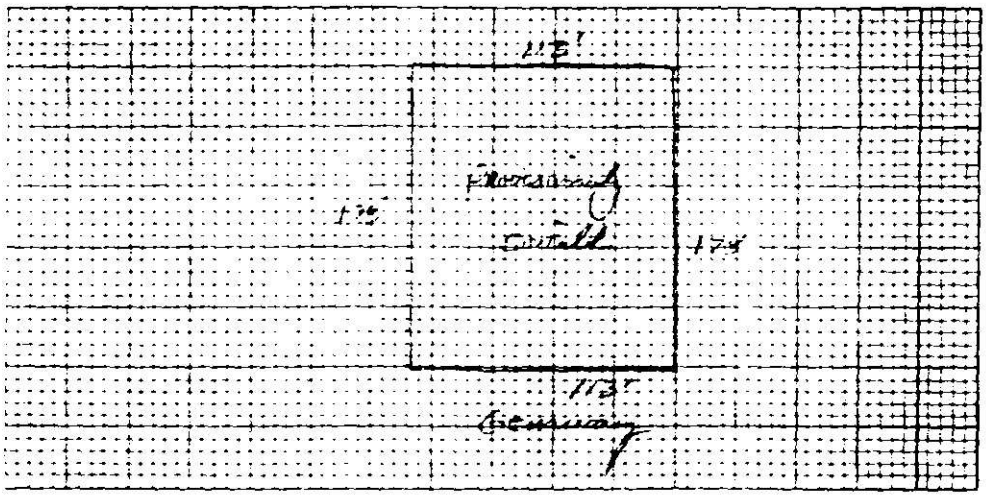
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER McCorkle (LAST) Julia (FIRST) Beatrice (MIDDLE)

ADDRESS OF OWNER Route 9, Box 377 B, Charlotte, N. C. ZIP 28208

LOCATION OF PROPERTY Gemway Drive (STREET OR COUNTY ROAD)

SUBDIVISION Edmore Estates LOT NO 7 A BLOCK NO. 1



PLOT PLAN

This is to certify that a soil investigation and on-site investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The soil 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 system with subsurface, soil absorption effluent discharge subject to the following terms and conditions:

1. A permit to install [illegible] the [illegible] system [illegible] the Mecklenburg County Department of Environmental Health [illegible] the beginning of any construction of building [illegible] 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 Mecklenburg County Department of Environmental Health [illegible] based on the permeability rate obtained above and on the size and type of building [illegible].
3. This approval [illegible] the system [illegible] the immediate area indicated as acceptable for system installation on the above plot.
4. This approval [illegible] including the drilling of a well is performed on the lot which [illegible] the Mecklenburg County Department of Environmental Health [illegible] the area indicated as acceptable for system installation [illegible] construction [illegible] 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 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.

Stephen J. Wood
Soil Scientist
Environmentalist

EHB-5-76

John R. Hanson
Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

Date Received 4/11/78

ICAR(S) Application No 13818

T C No. 027-062-21

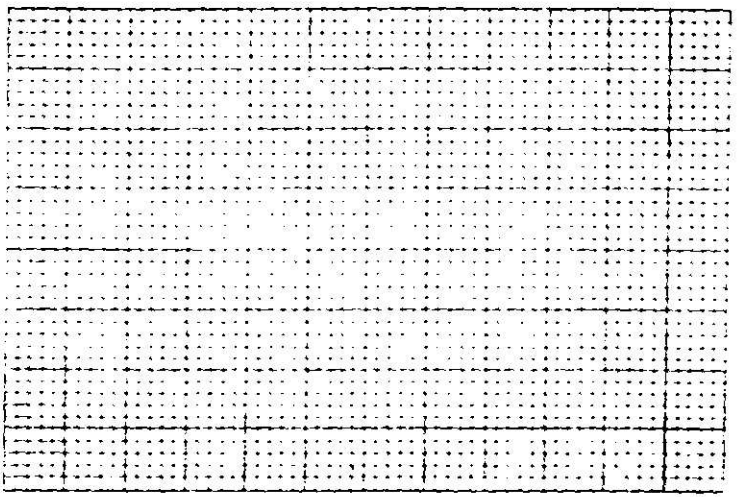
Map Date 3-22-78

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) X 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 X Yes ___No
4) No. of Bedrooms 3
5) Business Use Max No Employees ___
6) Washing Machine X Yes ___No
7) Garbage Disposal ___Yes X No
8) Dishwasher X Yes ___No
9) Water Supply
A) Individual Well X
B) Governmental System ___
C) Community System
Well source ___
2 Governmental source ___
10) Sewage System
House located within 200 feet of public sewer ___Yes X No
House located within 200 feet of community sewer ___Yes X No
11) FHA Case No ___
12) VA Case No ___

13) NAME OF OWNER McCORKLE (LAST) JUNIA (FIRST) BEATRICE (MIDDLE)

14) ADDRESS OF OWNER ROUTE 9, Box 377-B

15) PHONE NO Home 399-1557 Office 376-2711

16) LOCATION OF SYSTEM GERMANY DRIVE (STREET OR COUNTY ROAD)

17) SUBDIVISION EDMORE ESTATES Lot No. 7A Block No. 1

Map Book No 9 Page No. 239

18) DEED REFERENCE — DEED BOOK 2866 AT PAGE 239

19) HAS A SOIL INVESTIGATION BEEN RUN? YES X 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.

4-10-78
DATE OF APPLICATION

Junia B McCorkle
OWNER

EHB-5-76

Environmental Health Department's Copy

Date Issued 4/28/78

Serial No. 1778

LA No. 13818

T. C. No. 037-062-21

Map Date 3-22-78

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

IMPROVEMENT PERMIT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER McCofkle, (LAST) Julia (FIRST) Beatrice (MIDDLE)

ADDRESS OF OWNER Rt. 9, Box 377 B, Charlotte, N. C. ZIP 28208

LOCATION OF LOT Gemway Drive (STREET OR COUNTY ROAD)

SUBDIVISION Edmore Estates LOT NO. 7A BLOCK NO. 1

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 13818. 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.

Stephen Linard
Environmentalist

John R. Adkisson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Serial No. 1640

Date Issued 25 July 1978

ICAR(S) Permit No 13818

T C No 037-062-21

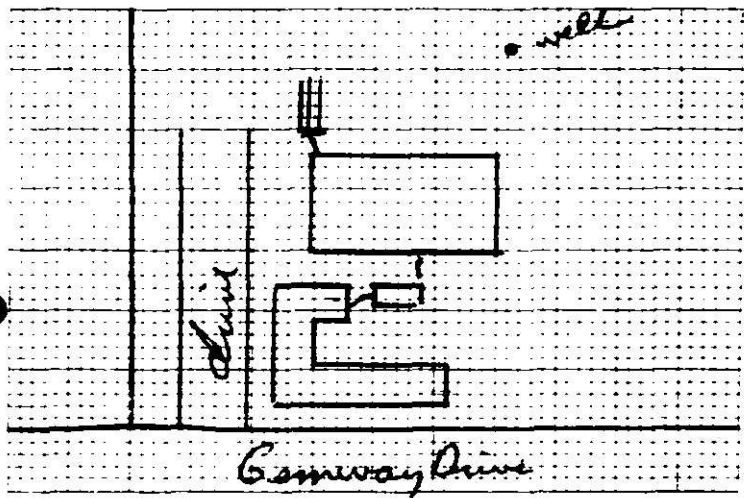
Map Date 3-22-78

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 13818, dated 4-10-78 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 1 Sept 78, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate prov suitable

Liquid Capacity of Tank 1500

Tank Construction pre cast

Absorption and/or Nitrification Lines

Total Line Length 495' & 125'

Number of Lines 5 & 4

Distance from House 10'

Distance from Property Line 10'

Distance from Well 50'

NAME OF OWNER McCorkle, Julia B.

LOCATION OF PROPERTY 2300 Gemway Drive

The [illegible] 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

in bed 15 x 99 x 17" stone - wash line in bed 12 x 32 x 17" stone

John R. Ackisson

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.

EHD-5-76

Environmental Health Department's Copy

Date Issued 8-24-78 Serial No. 1812 C of A (s) No. 13818

T C No 037-062-21

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF COMPLETION

CERTIFICATE OF APPROVAL

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

Name of Owner McCORKLE (LAST) JULIA (FIRST) B (MIDDLE)

Location of Property 2300 GENWAY DR.

Application Number 13818 Permit Number 13818

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PRECAST

Total Length of Drain Tile 495-125 Number of Lines 5-4

Depth of Filter Material 17" Cover Depth 20"

Water Supply Source WELL Distance from Water Source 60

Excavation Inspected 8-24-78 (DATE) Tank Inspected 8-24-78 (DATE)

Nitrification Field Inspected 8-24-78 (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

Marshall Edwards
Sanitarian

EHD-5-76

Environmental Health Department's Copy