Date Received 4-13-84

MECK COUNTY DEPARTMENT OF
RECEIVED
APR 13 1984
ENVIRONMENTAL HEALTH

SIR No. 20904

T. C. No. PO 135-211-22+25

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER BOB McLEMORE Co.

2) ADDRESS OF OWNER (LAST) PO BOX 25746 (FIRST) CHARLOTTE (MIDDLE) ZIP 28212

3) PHONE NO. Home —— Office 545-6111

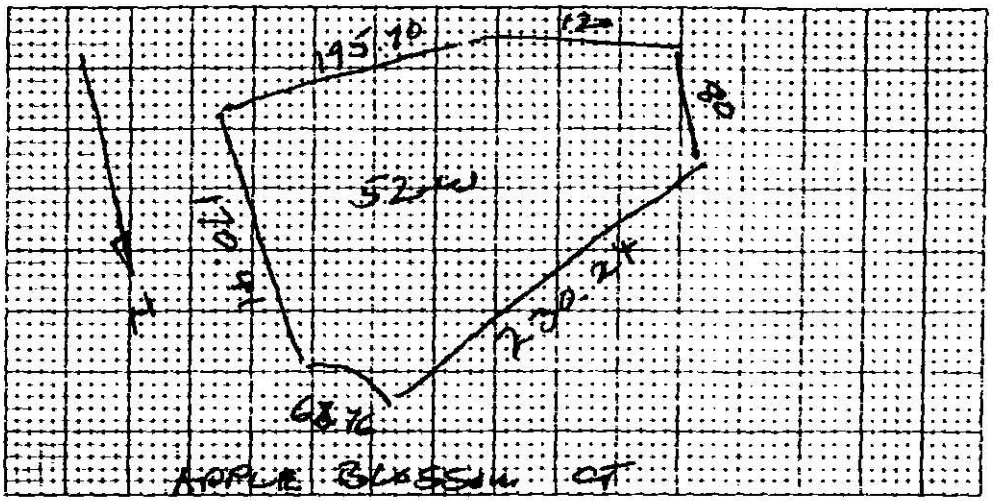
4) LOCATION OF PROPERTY 5300 APPLE BLOSSOM CT
(STREET OR COUNTY ROAD)

5) SUBDIVISION FARMWOOD SEC #20 LOT NO. 52 BLOCK NO. W

MAP BOOK NO 20 PAGE NO. 417

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 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

OWNER Bob McLemore Co.

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20904

T.C. NO. ~~RC 135-[illegible]~~ 135-392-08

(Ground Absorption Sewage Disposal)

OWNER: Bob The Lemon Co
ADDRESS: PO Box 25746 Matthews, NC 28212
PLAT NO: 52-W
LOT SIZE: Approx 25 ac
LOCATION OF SITE: Apple Blossom

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S / PS 2 [illegible] / U	S / PS complex slopes / U	S / PS / U	S / PS / U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S / PS clay / U	S / PS clay / U	S / PS / U	S / PS / U
3. SOIL STRUCTURE (12-36 inches)	S / PS Blocky / U	S / PS Blocky / U	S / PS / U	S / PS / U
4. SOIL DEPTH (inches)	S / PS 36-40" / U	S / PS <30" / U	S / PS / U	S / PS / U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S / PS >30" / U	S / PS <30" / U	S / PS / U	S / PS / U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S / PS >30" to ground water / U	S / PS Eroded Areas channel runoff / U	S / PS / U	S / PS / U
7. OTHER (Specify)	S / PS see note / U	S / PS / U	S / PS / U	S / PS / U
8. SOIL GROUP	[illegible]	[illegible]		
9. SITE CLASSIFICATION	Provisionally suitable	unsuitable		
10. SOIL SERIES	Cecil Lake	complex slopes		

S - Suitable PS - Provisionally Suitable U - Unsuitable

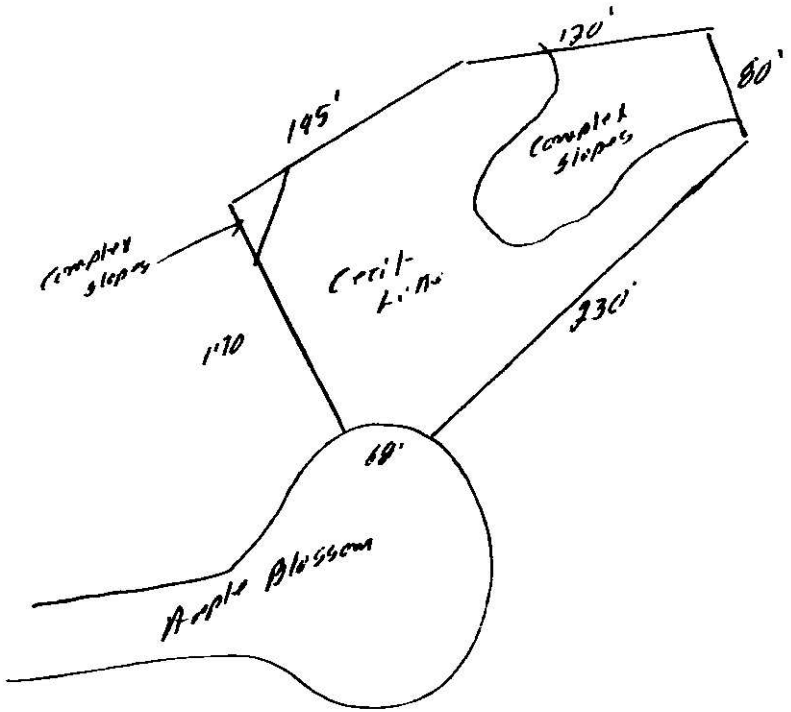
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: recommend plans be submitted for house & system locations

Described by: William R. Martin
Title: Soil Scientist

Date: 6-5-94

14



130'
80'
145'
Complex slopes
Complex slopes
Cecil Lake
170
230'
68'
Apple Blossom

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203

SIR. NO. 20904
T.C. NO. 135-398-08
DATE: 6-6-84

Bob McLemore Company
P. O. Box 25746
Charlotte, NC 28212

RE: Property located at 5300 Apple Blossom Court

Dear Sir:

At your request, a field investigation was conducted on the property designated above. The soils on the property were found to contain a limited area of provisionally suitable soil for the installation of a ground absorption sewage disposal system. A copy of the site evaluation report is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit plot plans for the proposed construction, well, and ground absorption sewage disposal system to this office. They will be reviewed and if it is found that there is an adequate area of provisionally suitable soil to accommodate the proposed installation, an Improvements Permit will be issued by this office.

If I may be of assistance, please feel free to call.

Sincerely,

Bill D. Hardister, Jr.
Environmental Health Supervisor

BDH/kbg

Enclosure

IP # 7590 issued 6-18-84. 3DB-9-13-84

Serial No. 07558

ICAR(S) Permit No. 20904

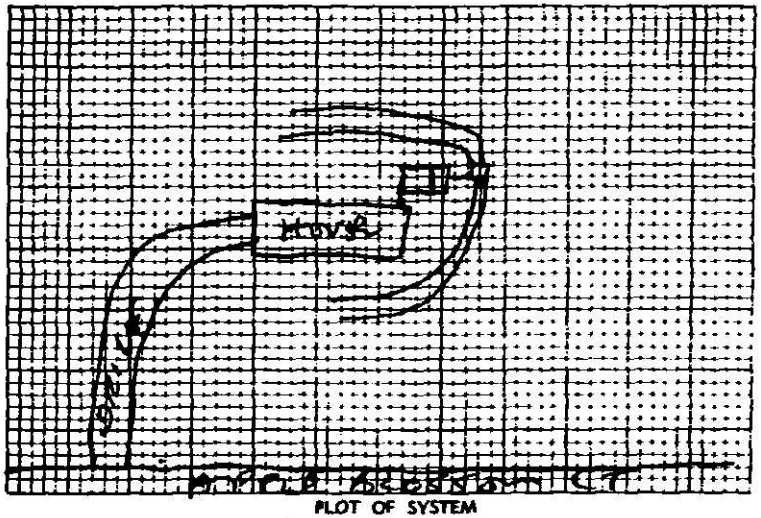
Date Issued 9-12-84

T. C. No. 135-398-08

Map Date L

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 20904, 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 10-12-84, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500

Tank Construction PCC

Absorption and/or Nitrification Lines:

Total Line Length 400'

Number of Lines 4 x 100

Distance from House 5'+

Distance from Property Line 10'+

Distance from Well 50'+

NAME OF OWNER BOB McLEMORE CO.

LOCATION OF PROPERTY 5300 APPLE BLOSSOM CT

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.

4 line x 100' long x 3' wide x 12" stone w/ stone/w grd board

Comments:

B. Hardister 4 Bedroom max. 9-13-84

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.

BHD-5-76

Environmental Health Department's Copy

C of A (s) No. 20904

Date Issued 10-3-84 **Serial** 6969 T C. No. 135-348-08 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 BOB (FIRST) McELMORE (LAST) (MIDDLE)

Location of Property 5300 APPLE BLOSSOM CT

Application Number 20904 Permit Number 20904

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material P.C.C

Total Length of Drain Tile 900' Number of Lines 4 x 100

Depth of Filter Material 12" Cover Depth 2'

Water Supply Source Well Distance from Water Source 50' +

Excavation Inspected 10-3-84 (DATE) Tank Inspected 10-3-84 (DATE)

Nitrification Field Inspected 10-3-84 (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 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

Kelly Randall
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Received 6-14-84

SEE INSTRUCTIONS ON BACK

ICAR(S) Application No. 20904

T. C. No. 135-378-06

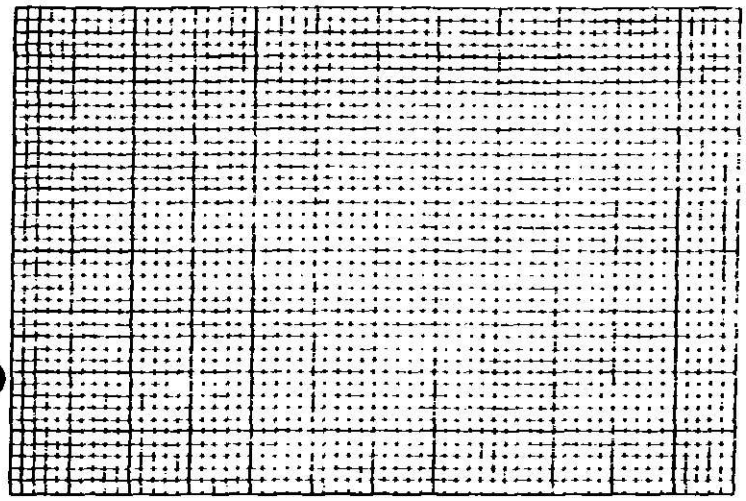
Map Date L

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 4
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 BOB McLENAHAN CO. INC.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER PO BOX 25746 CHARLOTTE 28212

15) PHONE NO. Home ____ Office 545-6111

16) LOCATION OF SYSTEM 5300 APPLE BLOSSOM CT
STREET OR COUNTY ROAD

17) SUBDIVISION FARMWOOD Lot No. 52 Block No. W

Map Book No. 20 Page No. 417

18) DEED REFERENCE — DEED BOOK ____ AT PAGE ____

19) HAS A SOIL INVESTIGATION BEEN RUN? ___ YES ✓ NO DATE RUN 6-6-84

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.

6-14-84
DATE OF APPLICATION

BOB McLENAHAN CO. INC
OWNER By Richard L. Boyd

EHD-5-76

Environmental Health Department's Copy

Serial No. 7590

SIR No. 20904

Date Issued June 18, 1984

T. C. No. 135-398-08

Map Date L

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 Bob McLemore Co.
LAST FIRST MIDDLE

ADDRESS OF OWNER PO Box 25746 , Charlotte, NC ZIP 28212

LOCATION OF LOT 5300 Apple Blossom Court
STREET OR COUNTY ROAD

SUBDIVISION Farmwood LOT NO. 52 BLOCK NO. 3

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 20904. 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.

Kelly Rowell
Environmentalist

David D. Hamilton Jr.
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy