Date Received 2-28-71 APT No 7556

T C No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Vance (LAST) James (FIRST) Franklin (MIDDLE)

2) ADDRESS OF OWNER Box 31 Davidson, N.C. ZIP 28036

3) PHONE NO Home 892-1757 Office 375-2251

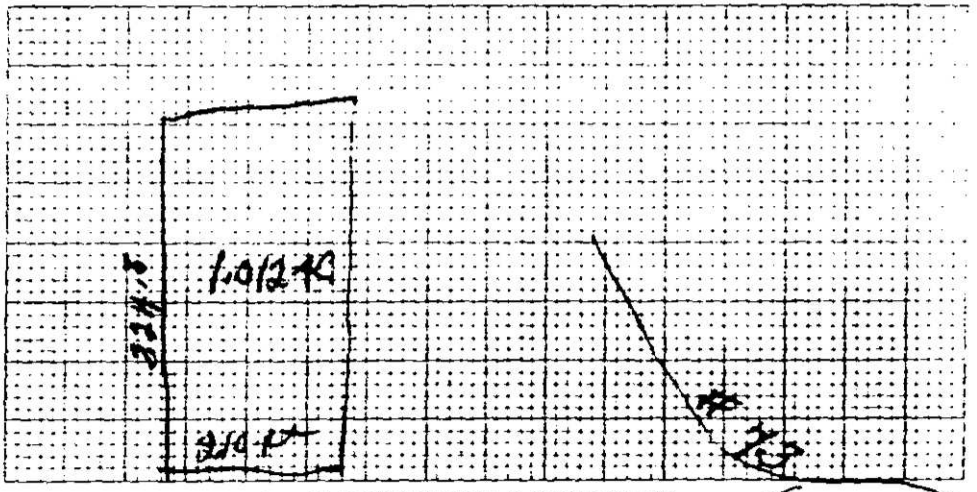
4) LOCATION OF PROPERTY County Rd 2420 (STREET OR COUNTY ROAD)

5) SUBDIVISION LOT NO BLOCK NO

MAP BOOK NO PAGE NO

6) DEED REFERENCE DEED BOOK 3044 PAGE NO 1346

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

Face is a house on right side of the road.

OWNER James F Vance

FORM NO E-1-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 4148

PTR No 7556
P.O.
T C No 007-271-02
Map Date 3-1-72

Date Issued March 14, 1972

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

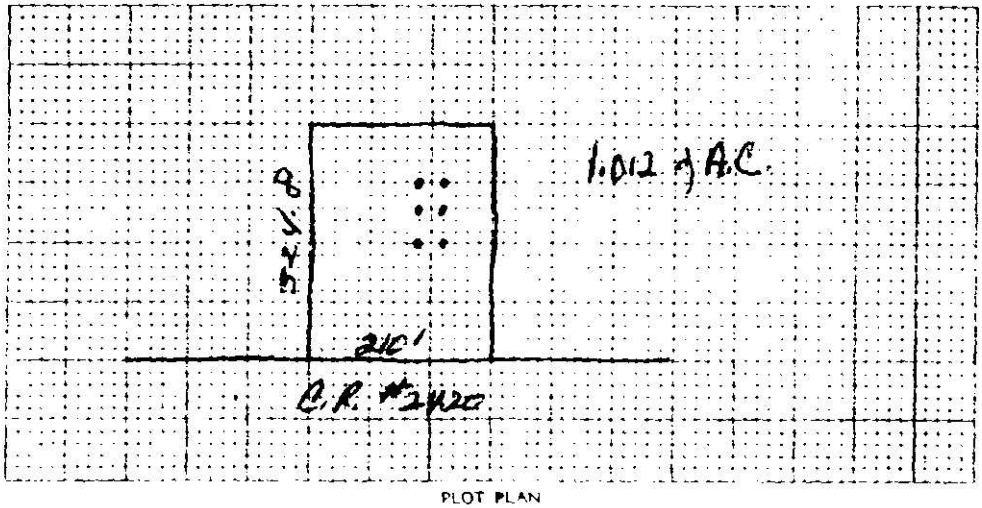
PERCOLATION TEST REPORT

NAME OF OWNER Nance (LAST) James (FIRST) Franklin (MIDDLE)

ADDRESS OF OWNER P.O. Box # 31, Davidson, N.C. ZIP 28036

LOCATION OF PROPERTY County Road 2422 (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO



PLOT PLAN

This is to certify that a percolation test has been run and an on site inspection made by the Mecklenburg County Health Department on the lot described above. The said test was conducted on that portion of the lot as indicated on above plot.

The percolation rate determined by the test was 58 min/in. 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, construct, alter, or repair the septic system shall be obtained from the Mecklenburg County Health Department prior to the beginning of any construction of a building on 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 Health Department prior to installation based on the percolation rate obtained above and on the size and type of building constructed thereon.
3. This approval is valid only if the system is installed in the immediate area where the percolation test was run.
4. This approval is void if any grading, filling, or construction including the drilling of a well is performed on the lot which in the opinion of the Health Department renders the area where the percolation test was run unsuitable for the installation, construction, alteration, and/or repair of 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 State Board of Health and the Mecklenburg County Board of Health which were in effect on the date of issuance and is void if at any time in the future, prior to the 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.

Richard Hartman

John R. Atkisson

Director, Environmental Health Division or Authorized Section Head

FORM NO E-2-9-1-72

HEALTH DEPARTMENT'S COPY

Date Received 3-22-74

ICAR (S) Application No. 7556

T. C No. COR-221-02

Map Date 3/72

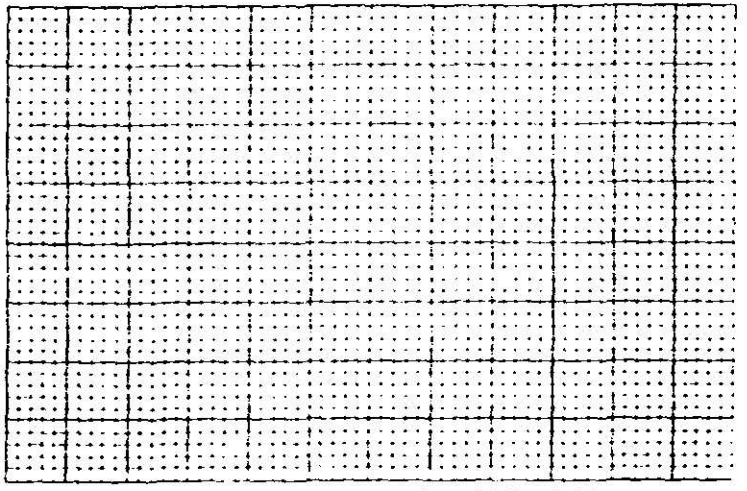
MECKLENBURG COUNTY HEALTH DEPARTMENT

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) 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)

4) No. of Bedrooms 4

5) Business Use Max No Employees _____

6) Washing Machine X Yes ___ No

7) Garbage Disposal ___ Yes X No

8) Dishwasher ___ Yes X No

9) Water Supply
- A) Individual Well X
- 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 James F Nance
(LAST, FIRST, MIDDLE)

14) ADDRESS OF OWNER Rt 3 1 Davidson, N.C.

15) PHONE NO Home 892-1750 Office 875-2450

16) LOCATION OF SYSTEM County 20. 2420
(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 PERCOLATION TEST BEEN RUN? X YES ___ NO DATE RUN 3-14-74 PR> 58

20) PTR NUMBER (See Instructions) 7556

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.

3-22-74
DATE OF APPLICATION

James F Nance
OWNER

FORM NO E-4-4-[illegible]

HEALTH DEPARTMENT'S COPY

Date Issued March 22, 1974

Serial No. 3931

LA No 7556
P.O.
T C No 007-271-02

IMPROVEMENTS PERMIT

Map Date 3-1-72

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 Nance (LAST) James (FIRST) Franklin (MIDDLE)

ADDRESS OF OWNER P. O. Box 31, Davidson, N.C. ZIP 28036

LOCATION OF LOT County Road 2420 (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO

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 58 min/in 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 7556. 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

Richard Hartman
Environmentalist

John R Atkinson
Director Environmental Health Division or Authorized Section Head

FORM NO E-3-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 26 July 71 Serial No. ICAR/S Permit No 7556

P O & C No 007-271-02

Visit Date 3-1-72

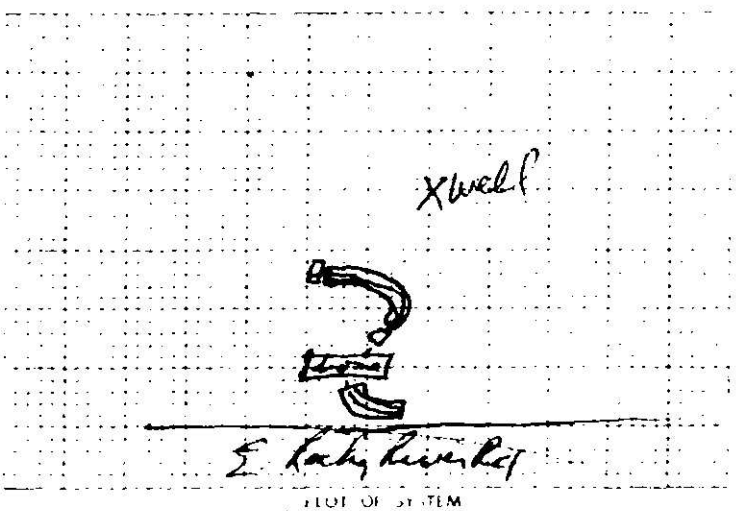
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 [illegible] septic tank wastewater treatment system with subsurface soil absorption effluent discharge [illegible] at the described location. This permit is granted based upon the information submitted on [illegible] 7556 dated 3-22-74 and the permit shall be void if the installation, alteration or repair is not completed in the approved manner and in accordance with all requirements. All work shall be completed not later than 26 Aug 74 after which date this permit shall be null and void.



PLOT OF SYSTEM

Proposed Use 3 B

Liquid Capacity of Tank 1000 gal

Tank Material R

Absorption Area or Application Rate

Total Trench Length 300 1½ 150 on 5 (2½ x 60 x 17")

Number of Trenches 3 (9½ x 50 x 17")

Distance from Well 10'

Distance from Property Lines 10'

Distance from Water Supply 90'

NAME OF OWNER Jones Nance

LOCATION OF PROPERTY E. Rocky River Rd

This 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 unserviceable or can be used.

Comments Aeration Unit 2½ x 7 x 4 Stone (Bradford Bros)

Director or Health Head

Environmentalist

This permit is for the installation or construction of a new system and must be signed by the division or a [illegible] County Environmental Health Director in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

E-5-8-1-72

Serial No.

C of A Issued No 7556

Date Issued 13 Aug 74

T C No CC7-711-C

Map Date 3-1-72

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 Nance James (LAST FIRST MIDDLE)

Location of Property 2 Lochy Rose

Application Number 7556 Permit Number 7556

Inspection Data:

Liquid Capacity of Tank 1000 gal Tank Material PC

Total Length of Drain Tile 200' 150' Number of Lines 3(3 1/2' x 60' x 17") 3(4 1/2' x 50' x 17")

Depth of Filter Material 12" Cover Depth 15"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 13 Aug 74 (DATE) Tank Inspected 13 Aug 74 (DATE)

Nitrification Field Inspected 13 Aug 74 (DATE)

Washing Machine Line Inspected If Applicable 13 Aug 74 (DATE)

This system is approved as an individual Septic Tank System with subsurface soil absorption of effluent. The system is constructed and it has been installed and constructed in accordance with the permit issued and the regulations of the Mecklenburg County Board of Health governing the issuance of the permit. The issuance of this Certificate of Approval is with the notice that the system will operate properly or relieve any person now or hereafter owning 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 in addition to those listed below under comments. This Certificate of Approval shall be void and of no effect if 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 aeration unit 2½' x 7' x 4' tank

Environmentalist

FORM NO E-6-9-1-72

HEALTH DEPARTMENT'S COPY