Date Received 3-1-84

MECK COUNTY DEPARTMENT OF
RECEIVED
ENVIRONMENTAL HEALTH

SIR No. 20678
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 Amanda Dr.
STREET OR COUNTY ROAD

5) SUBDIVISION Providence Woods LOT NO. 4 BLOCK NO V

MAP BOOK NO _____ PAGE NO _____

6) DEED REFERENCE DEED BOOK 4571 PAGE NO 692-694

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

F. P. Merman
~~OWNER~~ Agent

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. [illegible]

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

(Ground Absorption Sewage Disposal)

OWNER: [illegible]
ADDRESS: [illegible]
Charlotte, N.C. [illegible]
LOCATION OF SITE: Amanda Drive

PLAT NO: L4-BV
LOT SIZE: [illegible]

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S 2-10% PS U	S Complex slopes PS 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 36-48" U	S PS <36" U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S PS >36" U	S PS <36" U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S >48" PS U	S 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	10 ft	10 ft		
9. SITE CLASSIFICATION	Provisionally suitable	unsuitable		
10. SOIL SERIES	Cecil Lilli	complex slopes		

S - Suitable PS - Provisionally Suitable U - Unsuitable

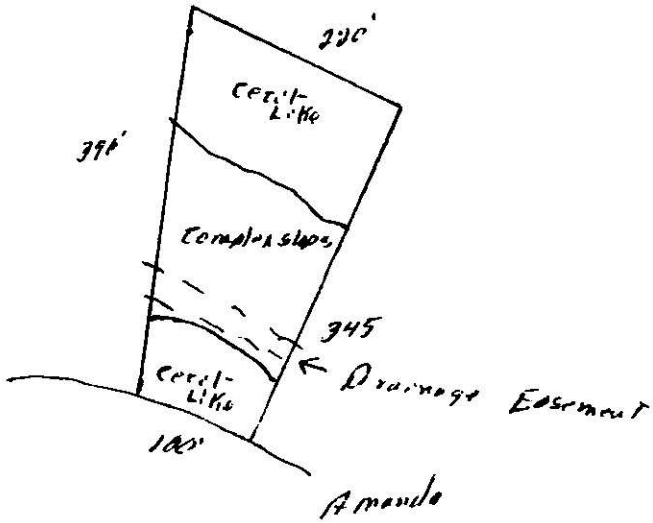
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: System may require lift station recommend plans for house, system, & well locations

Described by: William R. Marlin
Title: Soil Scientist

Date: 4-27-84

14


220'
Cecil-Like
390'
Complex slope
345
Cecil-Like
Drainage Easement
100'
Amando

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

SIR. NO. 20678
T.C. NO. PO 231-111-04
DATE: 5-1-84

Providence Woods, Inc.
1740 E. Independence Boulevard
Charlotte, NC 28205

RE: Property located at Amanda Drive, Lot 4, Blk. 5

Dear Sirs:

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

Date Received 5-20-85

SEE INSTRUCTIONS ON BACK OF

MECK. COUNTY DEPARTMENT OF
RECEIVED
ENVIRONMENTAL HEALTH

ICAR(S) Application No. 20678

T. C. No. 231-111-04

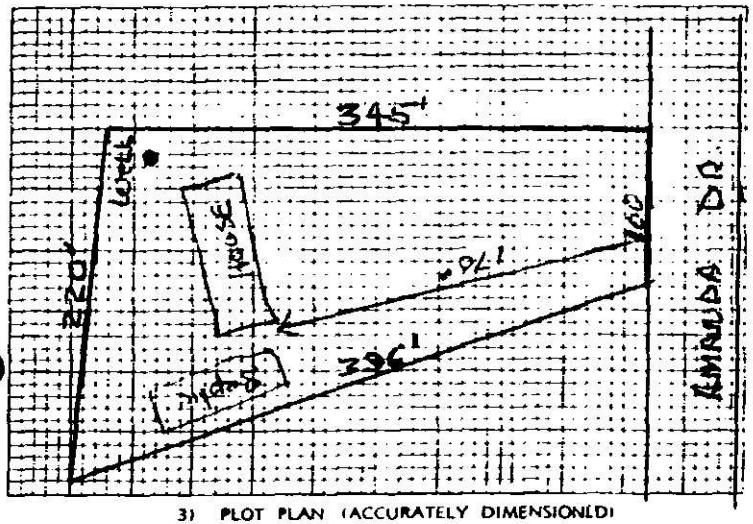
Map Date

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
1) 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 Partridge Construction Co. Inc.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 2922 Wheelock Rd., Charlotte, N.c. Call Ken Knight 8-33-45-38

15) PHONE NO. Home 364 8368 Office 336 1460

16) LOCATION OF SYSTEM 725 Amanda Drive
STREET OR COUNTY ROAD

17) SUBDIVISION Providence Woods Lot No 4 Block No. Phase 5

Map Book No. 20 Page No. 774-775-776

18) DEED REFERENCE — DEED BOOK 4986 AT PAGE 728

19) HAS A SOIL INVESTIGATION 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.

5/20/85
DATE OF APPLICATION

S.H. Partridge Jr.
OWNER

EHD-5-76

Serial No. 8589

SIR No. 20678

Date Issued June 3, 1985

T. C. No. 231-111-04

Map Date L CPT PJ.

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

IMPROVEMENT PERMIT

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Partridge Construction Co., Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 2922 Wheelock Rd. Charlotte, NC ZIP 28211

LOCATION OF LOT 725 Amanda Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Providence Woods LOT NO. 4 BLOCK NO. Phase 5

MAP BOOK NO. 20 PAGE NO. 774-775-776

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 20678. 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. *May require lift station*

Cynthia G Bass
Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

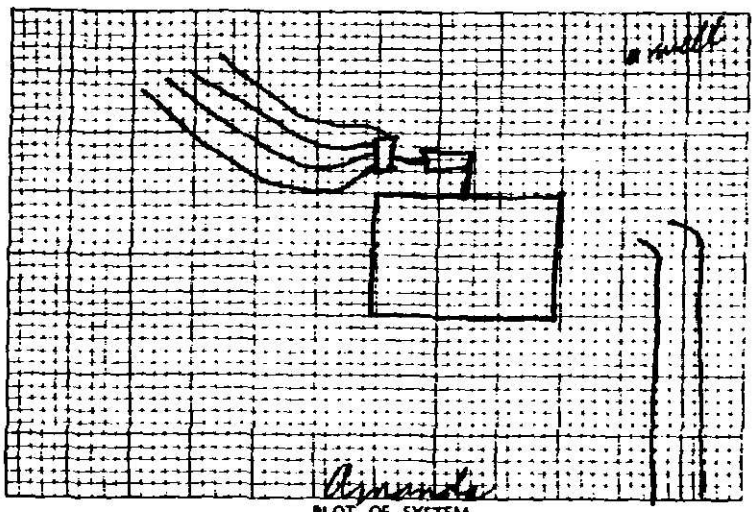
Date Issued 8-20-85

Serial No. 08442

ICAR(S) Permit No. 20678
PC No. 231-111-04
Map Date

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 20678, dated 5-20-85 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 9-20-85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate 1500 bl

Liquid Capacity of Tank 1500

Tank Construction PCC

Absorption and or Nitrification Lines

Total Line Length 400'

Number of Lines 4

Distance from House 5'

Distance from Property Line 10

Distance from Well 100'

NAME OF OWNER Partridge Construction Co.

LOCATION OF PROPERTY 725 Amanda Dr.

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 lines 3'X100'X12" stone

Comments:

Division or Section Head

B. R. Ferguson
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

C of A (s) No 20678

Date Issued 9-6-85 **Serial** 7887 T C No. PO 231-111-04

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 Partridge Const. Co. (LAST / FIRST / MIDDLE)

Location of Property 725 Amanda Dr.

Application Number — Permit Number —

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PCC

Total Length of Drain Tile 400' Number of Lines 4

Depth of Filter Material 12" Cover Depth 12"-18"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 9-6-85 (DATE) Tank Inspected 8-27-85 (DATE)

Nitrification Field Inspected 9-6-85 (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 1985, 1500ST, CCA, 1200SFT, 12 G, Cecil

B. R. Ferguson
Environmentalist

EHD-S-76

Environmental Health Department

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

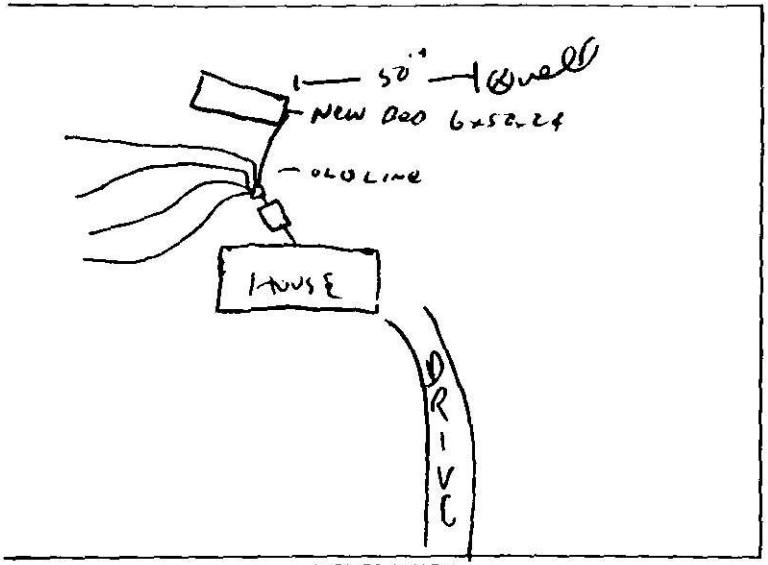
FILE: 20678 DATE: 12-10-86

TC: 231-111-08 9/L

SERIAL № 10487

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 12-10-86. All work shall be completed on or before 1-10-87, 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.

REPAIR



PLOT OF SYSTEM

Liquid Capacity of Septic Tank _____ gallons

Liquid Capacity of Dosing Tank _____ gallons

Tank Construction _____

Absorption and or Nitrification Lines:

Trench Width 6 x 50 x 24 feet

Total Line Length 200' feet

Number of Lines 2

Depth of Stone 24 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well 50 feet

NAME OF OWNER WILKINS, HAROLD R

LOCATION OF PROPERTY 725 AMANDA DR

Comments: 1 Bed 6'x50'x24"

Sylvia F. Daniel, by B.F.T.
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.

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

APPLICATION FOR AN IMPROVEMENT PERMIT

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: 20678
TC: 231-111-04
SERIAL: № 12017 ☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 725 (STREET NO) AMANDA (STREET) DR ② FILE: 20678
③ JURISDICTION ④ TAX PARCEL NO.: 231-111-04
⑤ SUBDIVISION ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME Harold (FIRST) Russell (MIDDLE) WILKINS (LAST)
⑨ MAILING ADDRESS: SAME
⑩ CITY MATTHEWS ⑪ STATE NC ⑫ ZIP: 28212
⑬ PHONE WORK ⑭ HOME 846 3915

REQUEST

This request is for a n

⑮ ☐ New permit ⑰ ☐ Authorization for mobile home exchange
⑯ ☑ Repair c alification 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? 3 ㉕ Type?
㉓ Maximum occupancy? 4 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: X Harold C. Wilkins
Date: Dec. 10, 1986

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 a satisfactory 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.

C of A Isl No. 20678

Date Issued 2-25-07 **Serial** 9178 T C. No. 231-111-08

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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

Name of Owner VILKINS (LAST) HAROLD (FIRST) (MIDDLE)

Location of Property 725 AMANDA DR

Application Number 20678 Permit Number 20678

Inspection Date: REPAIR

Liquid Capacity of Tank _____ Tank Material —

Total Length of Drain Tile 6 x 50 x 24" Number of Lines 2

Depth of Filter Material 24" Cover Depth 3

Water Supply Source well Distance from Water Source 50

Excavation Inspected 2-25 (DATE) Tank Inspected 2-25 (DATE)

Nitrification Field Inspected 2-25-07 (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 1987 - REPAIR - ENFORMED OWNER THAT SOME FIXTURE IN HOUSE WAS LEAKING

Environmentalist

EHD-5-76

Environmental Health Department's Copy