Date Received 1/17/80

APT No. 16464

T C No. 215/131 15,16

Map Date JAN, '79

# MECKLENBURG COUNTY
# DEPARTMENT OF ENVIRONMENTAL HEALTH

## APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER RALPH SQUIRES CONST CO INC
LAST FIRST MIDDLE

2) ADDRESS OF OWNER PO Box 25178 ZIP 28212

3) PHONE NO Home ___ Office 537 9553

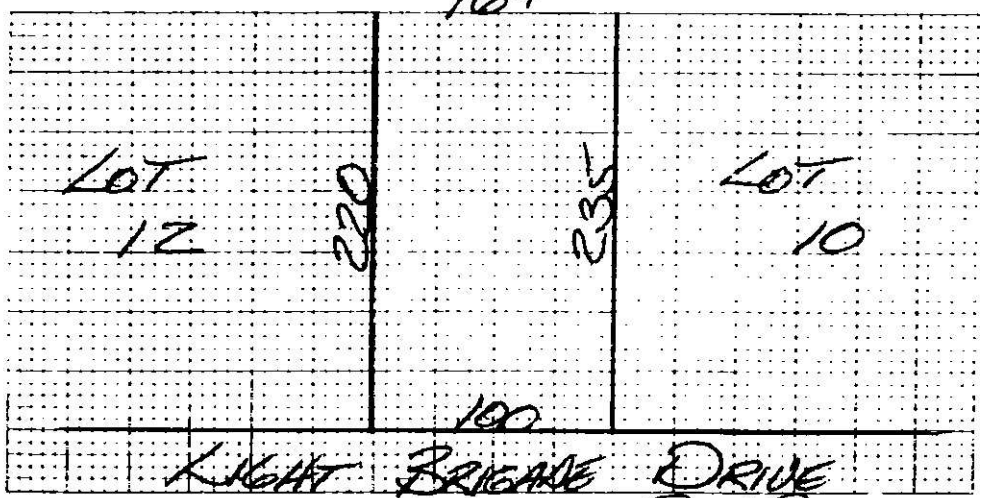
4) LOCATION OF PROPERTY LIGHT BRIGADE DRIVE
STREET OR COUNTY ROAD

5) SUBDIVISION WINDSOR LOT NO 11 BLOCK NO T

MAP BOOK NO ___ PAGE NO ___

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 property 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

EHD-5-76

Environmental Health Department's Copy

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

APPENDIX II
SITE EVALUATION
(Ground Absorption Sewage Disposal)

S.I.R. No. 16464
T.C. No. PO 215-131-15/16

OWNER: RALPH SQUIRES CONST. CO. DATE REQUESTED: 1-17-80
ADDRESS: PO BOX 25178 PLAT NO:
COUNTY: MECK. 28212 LOT SIZE: 30,780
LOCATION OF SITE: LIGHT BRIGADE S. . . . DRIVE Lot 10 - Block T.

| FACTORS | AREA 1 | AREA 2 | AREA 3 | AREA 4 |
|---|---|---|---|---|
| 1. SLOPE (%) | S (PS) 2-10 U | S (PS) 2-10 U | S PS U | S PS U |
| 2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2:1 Clay) | S (PS) Clayey U | S PS (U) mixed Clay U | S PS U | S PS U |
| 3. SOIL STRUCTURE (12-36 inches) | S (PS) Blocky U | S PS (U) massive U | S PS U | S PS U |
| 4. SOIL DEPTH (inches) | S (PS) 48> U | S PS (U) 48 U | S PS U | S PS U |
| 5. RESTRICTIVE HORIZONS (inches) (Impervious strata, Rock) | S (PS) NONE U | S PS (U) Clays U | S PS U | S PS U |
| 6. SOIL DRAINAGE/GROUNDWATER (external and internal) | S (PS) Adequate U | S PS (U) slow U | S PS U | S PS U |
| 7. SOIL PERMEABILITY (percolation rate) | S (PS) Moderate U | S PS (U) slow U | S PS U | S PS U |
| 8. OTHER (specify) | S PS U | S PS U | S PS U | S PS U |
| 9. SITE CLASSIFICATION | / P. Suitable | Unsuitable | | |
| 10. SOIL SERIES | Cecil | Helena | | |

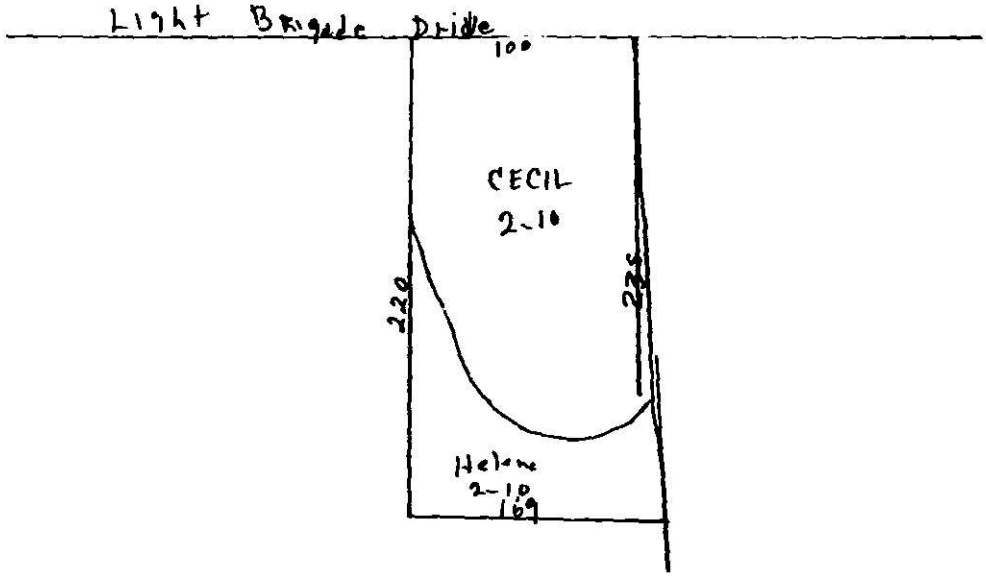
S - Suitable PS - Provisionally Suitable U - Unsuitable

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

Recommendations/Comments:

Described By: W. B. Ramsey
Title: Soil Scientist
Date: 3-12-80

DHS Form 2601
Sanitation
EHD 539 (2/80)


Light Brigade Bridge
100
CECIL
2-10
220
235
Helena
2-10
169

Serial No. 3434

PTR No 16464

T C No po 215-131-15,16

Date Issued March 25,1980

Map Date

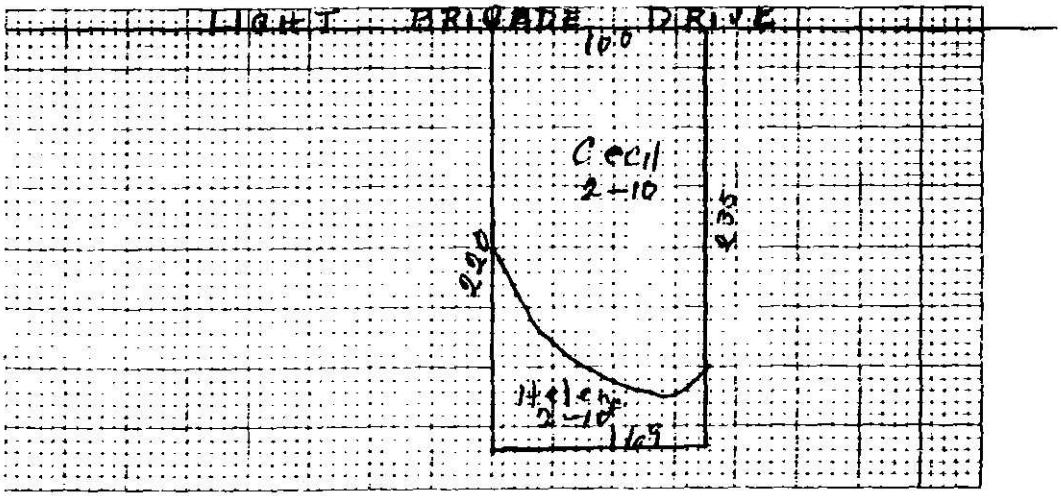
# MECKLENBURG COUNTY
# DEPARTMENT OF ENVIRONMENTAL HEALTH
## SOIL INVESTIGATION REPORT

NAME OF OWNER (LAST) (FIRST) (MIDDLE) Ralph Squires Const. Co;

ADDRESS OF OWNER PO Box 25178, Charlotte, NC ZIP 28212

LOCATION OF PROPERTY Light Brigade Drive (STREET OR NEAREST ROAD)

SUBDIVISION Windrow LOT NO #11 BLOCK NO "T"




PLOT PLAN

This soil test was investigated in accordance with rules made by the Mecklenburg County Department of Environmental Health. The soil investigation was conducted

**Provisionally Suitable**

The soil lot is approved

with the subsurface, soil ab-

with the Mecklenburg County Depart-
the wastewater treatment

with the Mecklenburg
the plumbing code and

system installation

permit issued on the lot which
the soil indicated as acceptable for

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.

W.B. Ramsey
Soil Scientist

John B. Adkisson
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 4-12-83 ICAR(S) Application No 16464

T C No 215-131-

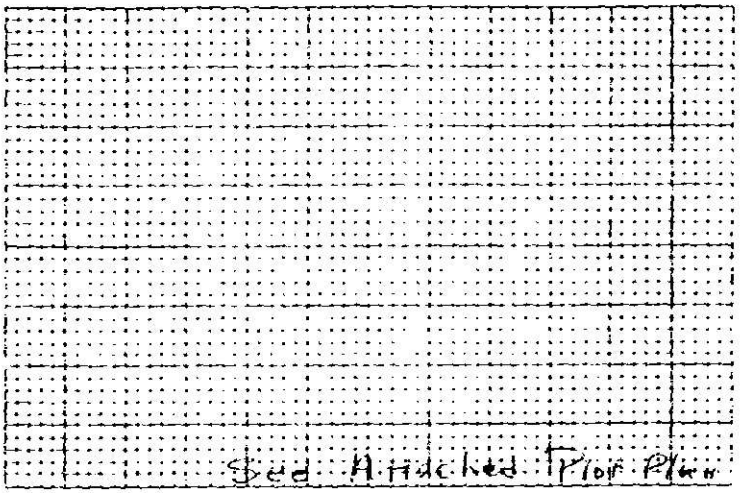
Map Date

# 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 N/A
12) VA Case No ___

13) NAME OF OWNER Kavi Squires Const Co.
(LAST FIRST MIDDLE)

14) ADDRESS OF OWNER P.O. Box 25178

15) PHONE NO Home ___ Office 537-9553

16) LOCATION OF SYSTEM 22... North Bridge Dr.
(STREET OR COUNTY ROAD)

17) SUBDIVISION Windrow Lot No 5 Block No. T
Formerly Lot 11 B.S.

Map Book No ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES NO DATE RUN 3/25/83

20) PTR NUMBER (See Instructions) 16464

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.

4-7-83
DATE OF APPLICATION

Larry Schuster
OWNER

EHD-5-76 ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

BT 40785

SIR No. 16464

Serial No. 6344

Date Issued 4-13-83

T. C. No. PO 215-131-[redacted] Portion

Map Date _____

# 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 Ralph Squires Const. Co.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P. O. Box 25178, Charlotte, NC ZIP 28212

LOCATION OF LOT 2211 Light Brigade Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Windrow II LOT NO 5 BLOCK NO. T

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 16464. 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.

Ralph Miller
Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-S-76

**Environmental Health Department's Copy**

Serial No. 6369

ICAR(S) Permit No 16464 Partial

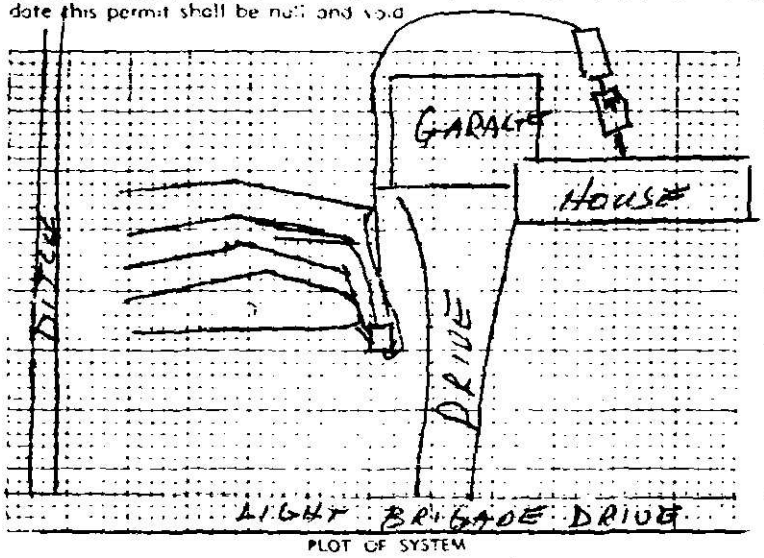
Date Issued 7-8-83

T.C.No. 215-131-#31

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 16464, dated 4-7-83 and this permit shall be void and of no effect if the information provided in the application is not true or is incorrect. All work shall be completed on or before 4th 2088 1983, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate: P.S. 11A

Liquid Capacity of Tank: 1500 gal

Tank Construction: Pre Cast Concrete

Absorption Area: Trenches or Lines

Trench or Line Length: 300 Lin. FT

Number of Trenches or Lines: FIVE

Trench or Line Width: 10 FT

Trench or Line Depth: 15 FT

Kelp 100 Hunday

Distance from Water Supply: NOT IN YET

NAME OF OWNER RALPH SQUIRES CO INC

LOCATION OF PROPERTY 2211 LIGHT BRIGADE DRIVE

The system shall meet all applicable requirements as set forth in the Regulations of the Mecklenburg County Health Commissioners 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. The issuing 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: 5 Trenches to be 60 FT x 3 FT. x 12 inches Stone - Hay on Straw cover - Grade Bldg - Lift Station. Plumb w/in inst. Lift Station

Division or Section Head

Rebel Miller
Environmentalist

* If this permit is for the installation or construction of a new system, it must be signed by the division or 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

HEALTH DEPARTMENT COPY

BS 8-11-83

C of A (s) No 16464

Date Issued 8-10-83 **Serial** 6045 T C No 215-131- part of 31

# MECKLENBURG COUNTY
# DEPARTMENT OF ENVIRONMENTAL HEALTH

## CERTIFICATE OF APPROVAL

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

Name of Owner RALPH (LAST) SQUIRES (FIRST) CONSTRUCTION, INC (MIDDLE)

Location of Property 2211 LIGHT BRIGADE DR

Application Number 16464 Permit Number 16464

**Inspection Data:**

Liquid Capacity of Tank 1500 gal Tank Material Pre Cast Concrete

Total Length of Drain Tile 400 lin FT Number of Lines FOUR

Depth of Filter Material 12 inches Cover Depth 12 inches
Need 100 FT

Water Supply Source well Distance from Water Source NOT IN YET

Excavation Inspected 8-10-83 (DATE) Tank Inspected 8-10-83 (DATE)

Nitrification Field Inspected 8-10-83 (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 X 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

Ralph Wells
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

16464

Date Received _____ ICAR(S) Application No _____

T. C./No. _____

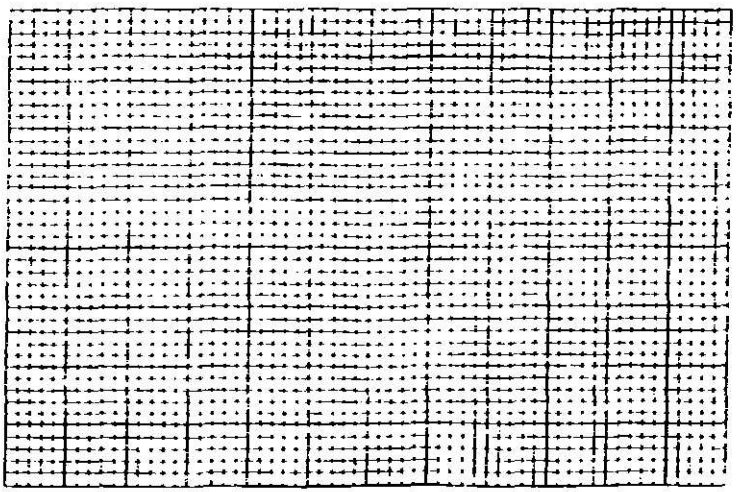
Map Date _____

# 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) ✓ Install or Construct 2) ✓ Alter or Repair on 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 BINGHAM (LAST) JAMES (FIRST) C (MIDDLE)

✓ 14) ADDRESS OF OWNER 2011 LIGHT BRIGADE DR MATTHEWS NC

✓ 15) PHONE NO Home 704-841-3158 Office 704-376-6113

16) LOCATION OF SYSTEM LIGHT BRIGADE DR (STREET OR COUNTY ROAD)

✓ 17) SUBDIVISION [illegible] Lot No. 32 Block No. 131

Map Book No 5 Page No. 415

18) DEED REFERENCE — DEED BOOK 4155 AT PAGE 924

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.

1-5-86
DATE OF APPLICATION

✓ James C. Bingham
OWNER

EHD-5-76