Date Received 6/1/77

APT No. 12660

T.C No. [illegible] 01

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Ralph Squires Construction Company, Inc.
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER P. O. Box 25178 Charlotte, N. C. ZIP 28212

3) PHONE NO Home _____ Office 537-9653

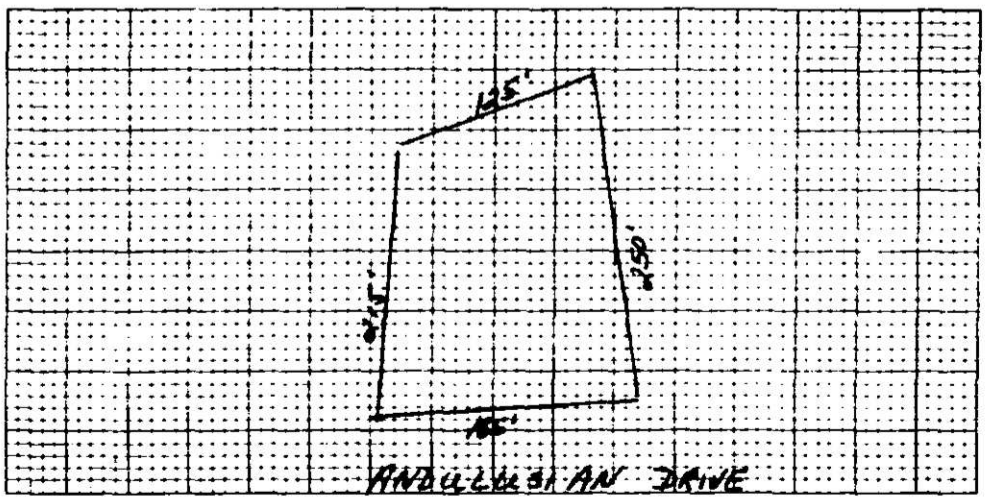
4) LOCATION OF PROPERTY 13716 Andulusian Drive
(STREET OR COUNTY ROAD)

5) SUBDIVISION Windrow Estates LOT NO 37 BLOCK NO. F

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 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 Jim Bagwell

EHD-5-74

Environmental Health Department's Copy

Date Received 9/16/77

MECK COUNTY DEPARTMENT OF
RECEIVED
SEP 16 '77

APT No. 12660
P.P.
T. C. No. 215-131-01

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Ralph Squires Construction Company, Inc.
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER P. O. Box 25178, Charlotte, North Carolina ZIP 28212

3) PHONE NO. Home _____ Office 537-9553

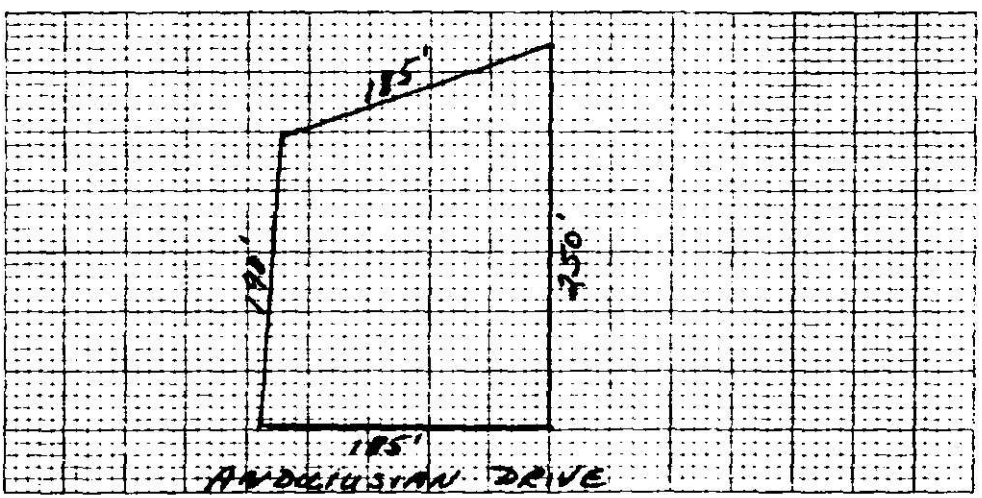
4) LOCATION OF PROPERTY 13716 Andulusian Drive
(STREET OR COUNTY ROAD)

5) SUBDIVISION Windrow Estates LOT NO. 37 BLOCK NO. F

MAP BOOK NO. _____ PAGE NO. _____

6) DEED REFERENCE DEED BOOK _____ PAGE NO. _____

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

OWNER Mary Jane Ellick

FORM NO. E1-11-3M-6-75

HEALTH DEPARTMENT'S COPY

Apt. 12660

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

APPENDIX H
SITE EVALUATION

(Ground Absorption Sewage Disposal)

OWNER: Ralph Sanders
ADDRESS: PO Box 25178
COUNTY: Mecklenburg
LOCATION OF SITE: 13716 Andalusian Drive lot 37F Includes No. PO 215-131-01

DATE REQUESTED: 9-16-77
PLAT NO.: Not Available
LOT SIZE: 40,000 sq. ft.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS 3-6% U	S PS (U) floodplain	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 mixed (U)	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S (PS) blocky U	S PS massive (U)	S PS U	S PS U
4. SOIL DEPTH (In.)	(S) PS >48- U	S PS Variable (U)	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Imprevious Strata, Rock)	(S) PS none U	(S) none PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) water table 24- PS U	S poorly PS drained (U)	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) moderate U	S seasonal PS high water table (U) 12-	S PS U from 3-6ft	S PS U
8. OTHER (Specify)	(S) adequate PS size U	S potential PS flooding (U)	S PS U	S PS U
9. SITE CLASSIFICATION	provisionally suitable	unsuitable		
SOIL SERIES	Cecil	Chewacla		

S - Suitable PS - Provisionally Suitable U - Unsuitable

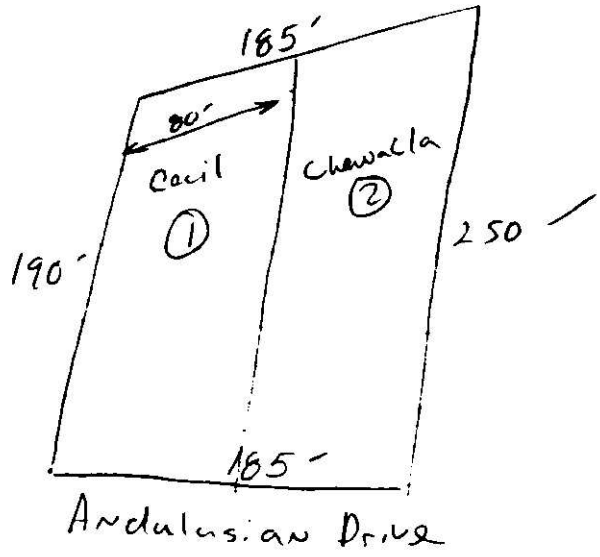
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

Recommendations/Comments: Based on this investigation, an adequate area of provisionally suitable soils was found on the lot for installation of a septic tank system. System should be placed in the area of Cecil soils.

Described By: W Edward Casavant

Title: Soil Scientist Date: 9-19-77

DHS Form 2601 (2/77)
Sanitation


185'
80'
Cecil
①
Chewalla
②
190'
250'
185'
Andalusian Drive

Serial No. 1330

PTR No. 12660

Date Issued September 19, 1977

T C No. P.0.215-131-01

Map Date

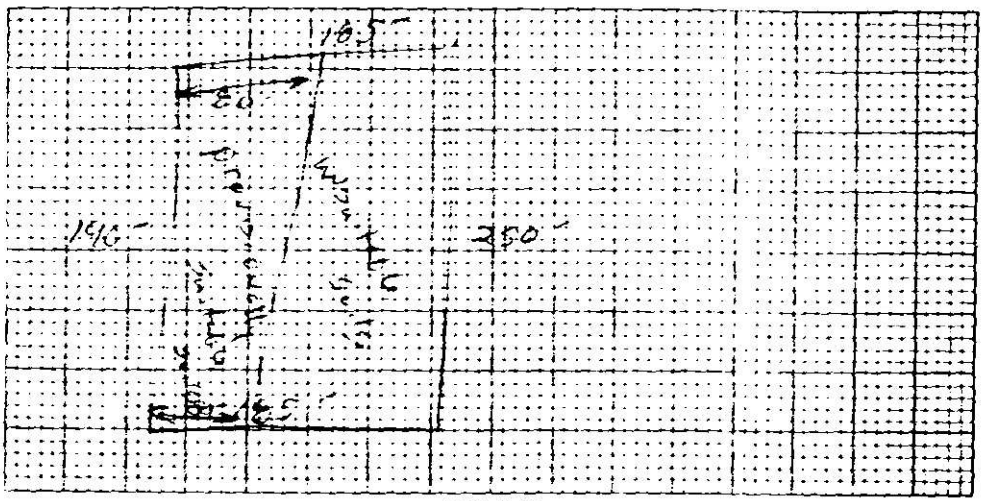
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Ralph Squires Construction Company, Inc.
(LAST, FIRST, MIDDLE)

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

LOCATION OF PROPERTY 13716 Andulusian Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Windrow Estates LOT NO 37 BLOCK NO F



PLOT PLAN

This soil survey, soil profile 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. **Provisionally Suitable**

The permeability rate determined by the investigation was 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 or alter must be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction of the proposed wastewater treatment system on the said lot.
2. The size of the approved wastewater treatment system which must be installed will be determined by the Mecklenburg County Department of Environmental Health prior to installation based on the permeability rate obtained above and on the size and type of building constructed thereon.
3. This approval is valid only for the system as installed in the immediate area indicated as acceptable for system installation on the above plot.
4. This approval is void if any grading or construction activity takes place on the lot which, in the opinion of the Mecklenburg County Department of Environmental Health, renders the area indicated as acceptable for system installation unsuitable due to soil compaction, alteration of the soil profile or other factors.

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.

Soil Scientist

Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Serial No. 2156

LA No. 12660

Date Issued August 22, 1978

T. C. No. P.0.215-131-01

Map Date

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 Ralph Squires Construction Company
(LAST / FIRST / MIDDLE)

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

LOCATION OF LOT 13716 Andulusian Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Windrow Estates LOT NO 37 BLOCK NO. F

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 12660. 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, 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

Stephen J. Wood
Environmentalist

John R Adkisson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 8/22/78

ICAR(S) Application No 12260

T C No P.O. 215-131-01

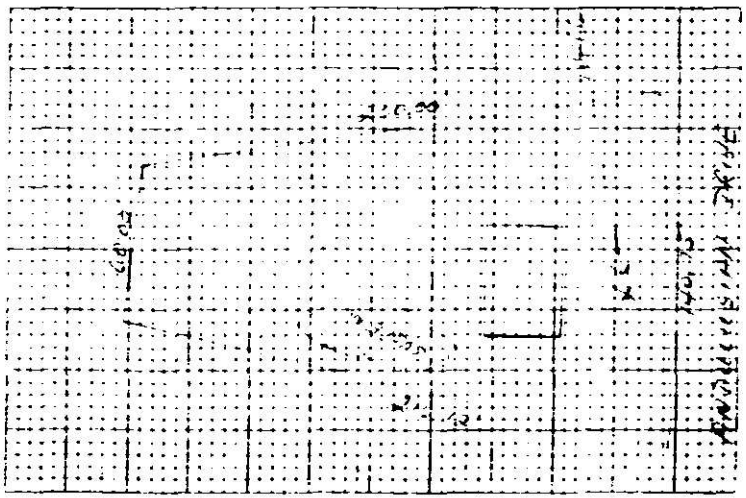
Map Date

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)

4) Mobile Home Yes X No
Residence X Yes No

4) No of Bedrooms 3

5) Business Use Max No Employees N/A

6) Washing Machine X Yes No

7) Garbage Disposal Yes X No

8) Dishwasher Yes X No

9) Water Supply
A) Individual Well Yes
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 N/A

13) NAME OF OWNER Ralph Squires Construction (LAST / FIRST / MIDDLE)

14) ADDRESS OF OWNER P. O. Box 25178, Charlotte, North Carolina 28212

15) PHONE NO. Home Office 537-9553

16) LOCATION OF SYSTEM 13716 Andulusian Drive (STREET OR COUNTY ROAD)

17) SUBDIVISION Windrow Estates Lot No. 37 Block No. F

Map Book No Page No.

18) DEED REFERENCE -- DEED BOOK AT PAGE

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES NO DATE RUN 9/19/77

20) PTR NUMBER (See Instructions) 12660

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.

8-21-78
DATE OF APPLICATION

Mary Jean Eklund
OWNER

EHD-5-76

Environmental Health Department's Copy

Date Received 10/2/78

SEE INSTRUCTIONS ON BACK
MECK COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH
APPROVED
SANITARIAN(S)

Application No. 12660

T C No. P.O. 215-131-01

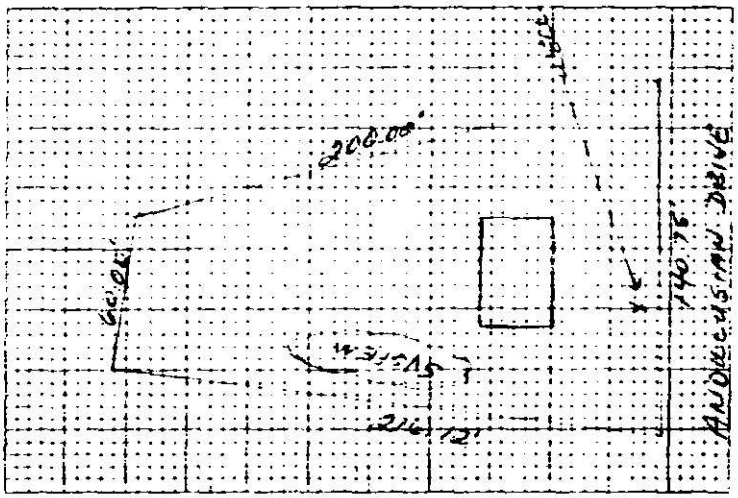
Map Date

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
Res. fence X Yes ___No
4) No. of Bedrooms 4 (Four)
5) Business Use Max No. Employees N/A
6) Washing Machine X Yes ___No
7) Garbage Disposal ___Yes X No
8) Dishwasher ___Yes X No
9) Water Supply
A) Individual Well YES
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 N/A

13) NAME OF OWNER RALPH SMILLES CONSTRUCTION (LAST / FIRST / MIDDLE)

14) ADDRESS OF OWNER P.O. Box 35128, CHARLOTTE, N.C. 28212

15) PHONE NO. Home ___ Office 537 9553

16) LOCATION OF SYSTEM 13716 ANDALUSIAN DRIVE (STREET OR COUNTY ROAD)

17) SUBDIVISION WINDROW ESTATES Lot No 37 Block No. F

Map Book No ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES ___ NO DATE RUN 9/19/78

20) PTR NUMBER (See Instructions) 12660

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.

9/28/78
DATE OF APPLICATION

Mary Jean E Klein
OWNER

EHD-5-76

Environmental Health Department's Copy

Date Issued 22 Mar. 79

Serial No. 2498

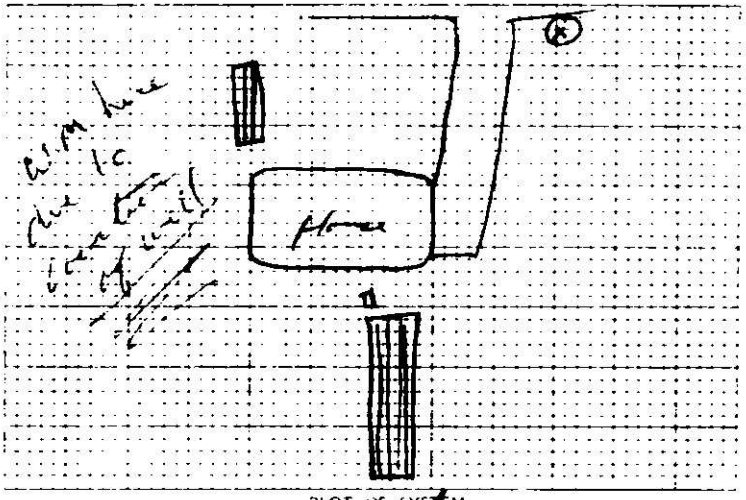
ICAR(S) Permit No. 12660

T C No 215-131-01

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 12660 dated 10/2/78 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 22 Apr ___ after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500 gal

Tank Construction ? (Conc.

Absorption and/or Nitrification Line

Total Line Length 440' ; 167'

Number of Lines 6 ; 4

Distance from House 10'

Distance from Property Line 10'

Distance from Well 75'

NAME OF OWNER Ralph Squires Const.

LOCATION OF PROPERTY 13716 Andulusian

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 unacceptable 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: (12'x42'x17"Stone)

(18'x74'x17"Stone)

Division or Section Head ___ Environmentalist Steve Wood

* 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.

EHO-5-76

Environmental Health Department's Copy

Date Issued 12 Apr. 79 Serial No. 2477 C of A (s) No. 12660

T C No 215-131-01

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 Ralph Squires Const. Co.
LAST FIRST MIDDLE

Location of Property 13716 Andalusian

Application Number 12660 Permit Number 12660

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material PC Concrete

Total Length of Drain Tile 440' & 167' Number of Lines 6 & 4

Depth of Filter Material 17" Cover Depth 18" - 24"

Water Supply Source — Distance from Water Source 60'

Excavation Inspected ____ DATE Tank Inspected 12 Apr DATE

Nitrification Field Inspected 12 Apr DATE

Washing Machine Line Inspected, If Applicable 12 Apr 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 permits 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 Tanks Ok

Steve Wood
Environmentalist

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 12 June 19[illegible]

ICAR (S) Application No. 12660

T. C No. po 215-131-01

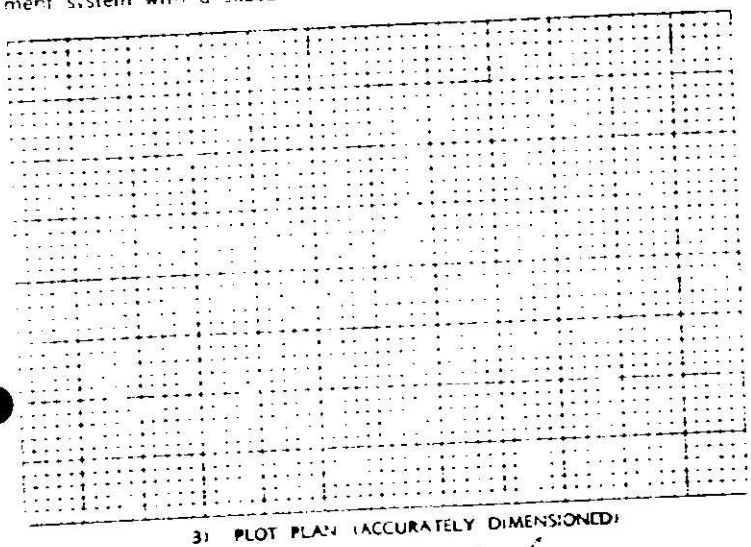
Map Date ___

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~~ an individual septic tank wastewater treatment system with a subsurface soil absorption effluent discharge



3) PLOT PLAN (ACCURATELY DIMENSIONED)

4) Mobile Home ___Yes ___No
Residence ___Yes ___No

4) No. of Bedrooms ___

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 Laberge (LAST) (FIRST) (MIDDLE)

14) ADDRESS OF OWNER 13716 Andalusian Dr

15) PHONE NO. Home ___ Office ___

16) LOCATION OF SYSTEM Same (STREET OR COUNTY ROAD)

17) SUBDIVISION Windermere Lot No. 11 Block No. F

Map Book No. ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

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.

12 June
DATE OF APPLICATION

X Joyce Laberge
OWNER

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued 12 June 79

Serial No. 2846

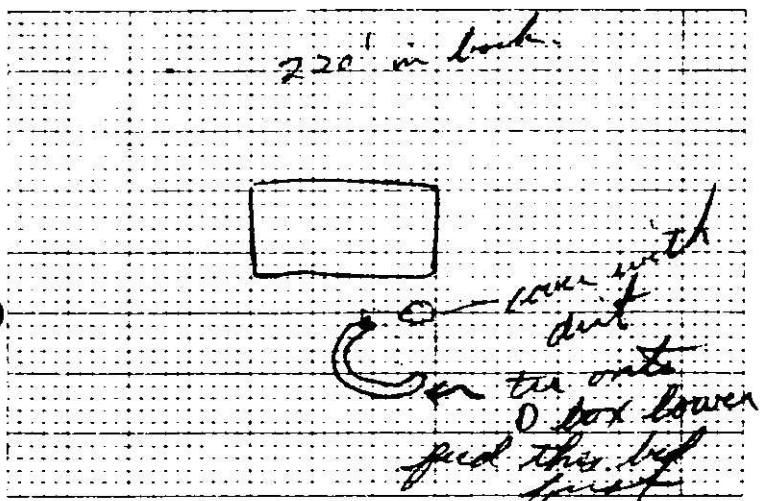
ICAR(S) Permit No. 12660

T C No 215-131-6

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 _____, dated 12 June 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 ___ ___, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate Repair

Liquid Capacity of Tank ___

Tank Construction ___

Absorption and or Nitrification Lines

Total Line Length 100', 220'

Number of Lines 1

Distance from House 10'

Distance from Property Line 10'

Distance from Well 50'

NAME OF OWNER Laberge

LOCATION OF PROPERTY 13716 Andulusian 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.

Comments

3'x50'x24" Stone

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.

Steve Wood

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 12 July 79 **Serial No. 2838** C of A (s) No. 12660

T C No 215-131-01

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL HEALTH DIVISION

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

Name of Owner Laberge (LAST) (FIRST) (MIDDLE)

Location of Property 13716 Andulusian Dr

Application Number _____ Permit Number 12660

Inspection Data:

Liquid Capacity of Tank _____ Tank Material Repair/Addition

Total Length of Drain Tile 100' w/m/220' Number of Lines 3

Depth of Filter Material 48" Cover Depth 18"

Water Supply Source well Distance from Water Source 50'

Excavation Inspected _____ (DATE) Tank Inspected _____ (DATE)

Nitrification Field Inspected 12 July (DATE)

Washing Machine Line Inspected, If Applicable 28 Jun (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 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



Environmentalist

EHD-S-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received _____

ICAR(S) Application No 12660

T C No _____

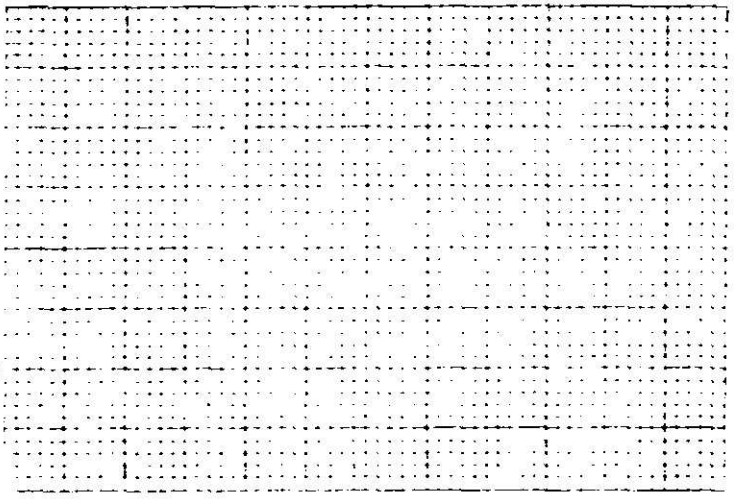
Map Date _____

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 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 Lange (LAST) Robert (FIRST) H. (MIDDLE)

14) ADDRESS OF OWNER 1227 Lindsay Dr

15) PHONE NO Home 847-4496 Office ___

16) LOCATION OF SYSTEM _____ (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 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.

8/8/79
DATE OF APPLICATION

Joyce R. Laberge
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial 3084

Date Issued 8 Aug

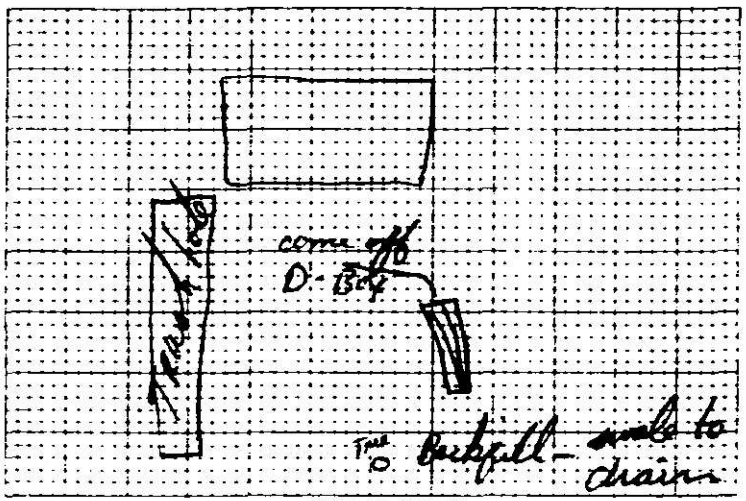
ICAR (S) Permit No. 12660

T. C. No. 215-13-121

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 _____, dated 8 Aug 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 _____, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate

Liquid Capacity of Tank Repair

Tank Construction

Absorption and or Nitrification Lines

Total Line Length 80'

Number of Lines 2

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Mrs Laberge

LOCATION OF PROPERTY 13716 Andulusian 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.

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.

Division or Section Head

Steve Wood
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

Serial No. 2976

C of A (s) No. 12660

Date Issued 21 Aug 79

T C No 215-131-01

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL HEALTH DIVISION

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

Name of Owner Mrs. Laberge (LAST / FIRST / MIDDLE)

Location of Property 12716 Andalusian Dr.

Application Number _____ Permit Number 12660

Inspection Data:

Liquid Capacity of Tank _____ Tank Material _____

Total Length of Drain Tile 80' + Number of Lines 2

Depth of Filter Material 38" Cover Depth 36"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected — (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 21 Aug (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 soil improved in this repair

Environmentalist

EHD-S-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 13 Sept 1979

ICAR(S) Application No. 12660

T. C. No. 215-131-01

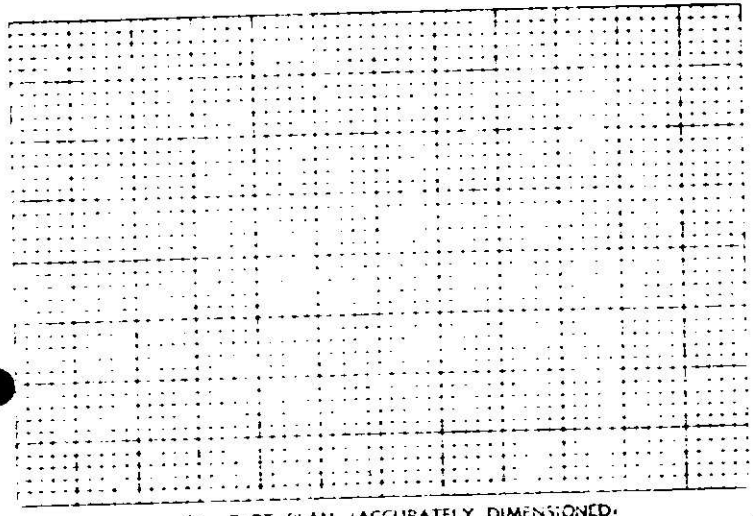
Map Date

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 an individual septic tank wastewater treatment system with a subsurface, soil absorption, effluent discharge.



3) PLOT PLAN (ACCURATELY DIMENSIONED)

4) 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) Private Dug Well ✓
B) Governmental System ___
C) Community System
1) Well source ___
2) Governmental source ___

10) Sewage System
Home 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 Lagorce (LAST) Joyce (FIRST) ___ (MIDDLE)

14) ADDRESS OF OWNER 13716 Birkdale Dr.

15) PHONE NO Home ___ Office ___

16) LOCATION OF SYSTEM Birkdale (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 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.

DATE OF APPLICATION

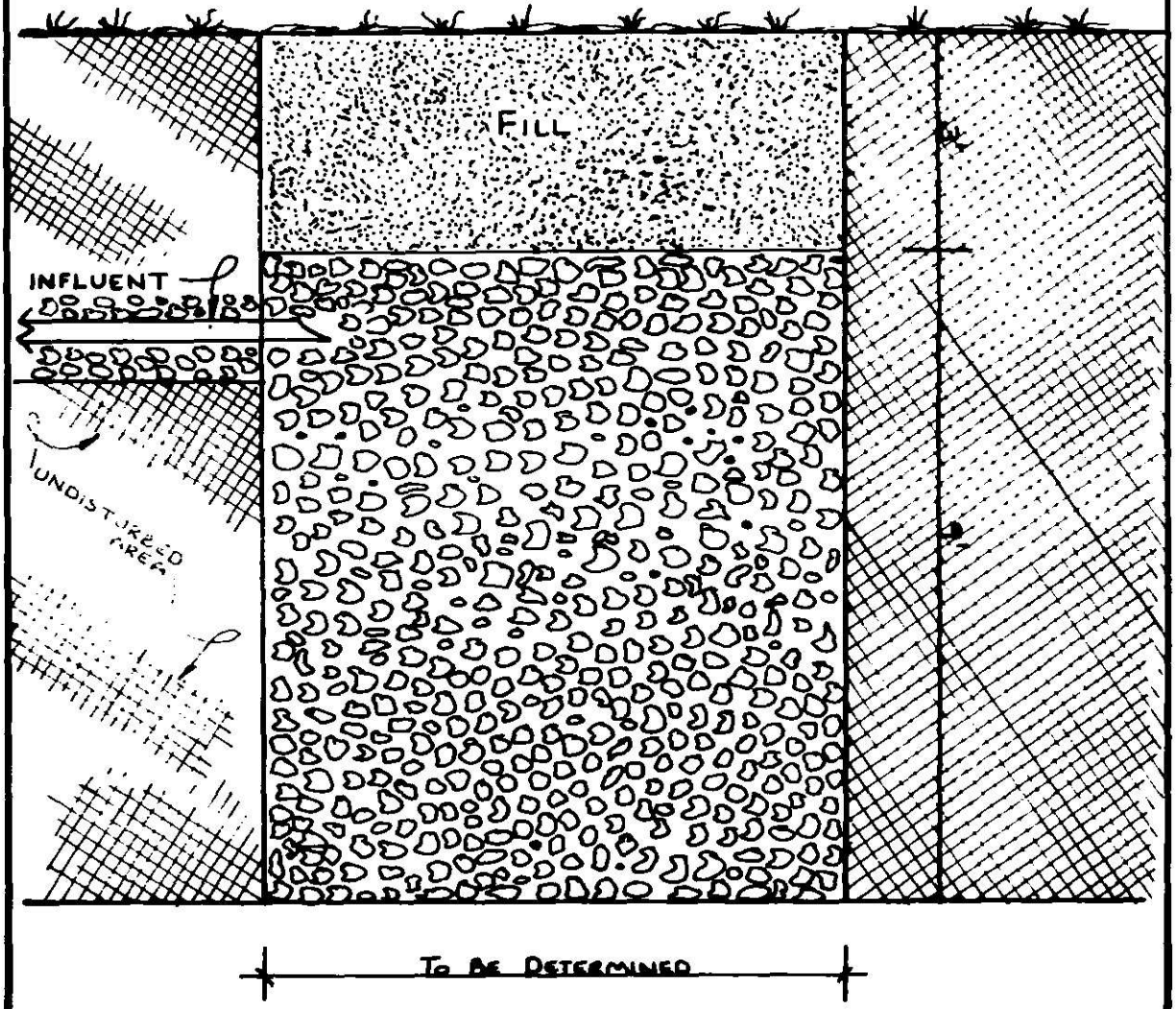
OWNER Joyce H. Lagorce

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

THIS IS TO CERTIFY THAT ON THE 30TH DAY OF OCT. 19 79 I. PLATTED [redacted] THE PROPERTY SHOWN ON THIS PLAT AND THAT THE TITLE LINES AND THE WALLS OF THE BUILDINGS IF ANY ARE SHOWN HEREON

SIGNED B. RICE [redacted]



SKETCH PLAN SURVEY

SEEPAGE PIT

SCALE 1" = 2'

THE PROPERTY OF

MAP RECORDED IN BOOK AT PAGE DEED RECORDED IN BOOK PAGE

RALPH
SQUIRES
HOMES

November 16, 1979

NOV 1 0 19/9

ENVIR. HEALTH

Mr. Thomas W. Bivens, Director
Environmental Health
Mecklenburg County Health Department
1200 Blythe Blvd.
Charlotte, N. C. 28204

Re: Mr. and Mrs. Laberge
13716 Andulusian Drive
Matthews, N. C. 28105

Dear Mr. Bivens:

We propose to install a 9'x15'x12' (6 x 25) seepage pit suggested by M. Bass in the front yard. It will be placed next to the small natural area.

If this is satisfactory we will proceed with this repair.

Yours truly,

Larry Schuster
Construction Manager

LS:as

Attachment

P.O. BOX 25178 / CHARLOTTE, NORTH CAROLINA 28212 / TELEPHONE 704-537-9553

Serial 3439

Date Issued 20 Nov. 79

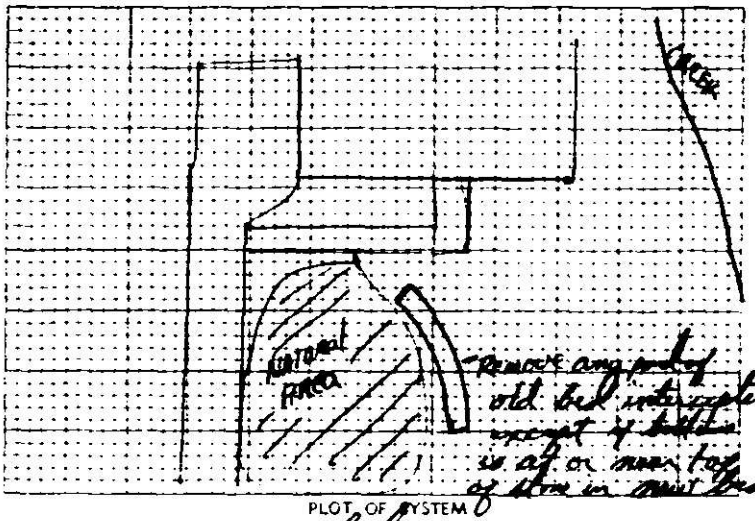
ICAR(S) Permit No. 12660

T. C. No. 215-131-01

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 12660, dated 16 Nov. 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 20 Dec., after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate Repair

Liquid Capacity of Tank

Tank Construction ✓

Absorption and or Nitrification Lines

Total Line Length ✓

Number of Lines 2

Distance from House 10'

Distance from Property Line 10'

Distance from Well 50'

NAME OF OWNER Laberge

LOCATION OF PROPERTY 13716 Andulusian 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.

(6'x25'x9' stone under 3' dirt) As proposed by Ralph Squires Company.

Division or Section Head

Steve Wood
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 21 Nov 79 Serial 3282 C of A (s) No. 12660

T C No 215-131-01

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL HEALTH DIVISION

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

Name of Owner Laberge (LAST) Robert (FIRST) H. (MIDDLE)

Location of Property 1311 Andulusian Dr

Application Number _____ Permit Number 12660

Inspection Data:

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile * Number of Lines 1, 2

Depth of Filter Material 3½' → 8'+ Cover Depth 2½ → 3'

Water Supply Source well Distance from Water Source 50'

Excavation Inspected — (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected — (DATE)

Washing Machine Line Inspected, If Applicable 21 Nov 79 (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 3'x25'x3½' of stone joining 6'x25'x8' stone min weight more ≈300' - Installed in this fashion by S.T. Contractor due to rock outcropping under initial section of bed.

Environmental Specialist

EHD-5-76

Environmental Health Department's Copy