Date Received 5/19/80

APT No. 16885

T. C No. 139-274-12

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Freeland (LAST) Robert (FIRST) Moss (MIDDLE)

2) ADDRESS OF OWNER 701 Old Bell Rd., Matthews, N.C. ZIP 28105

3) PHONE NO. Home 704-364-1394 Office same

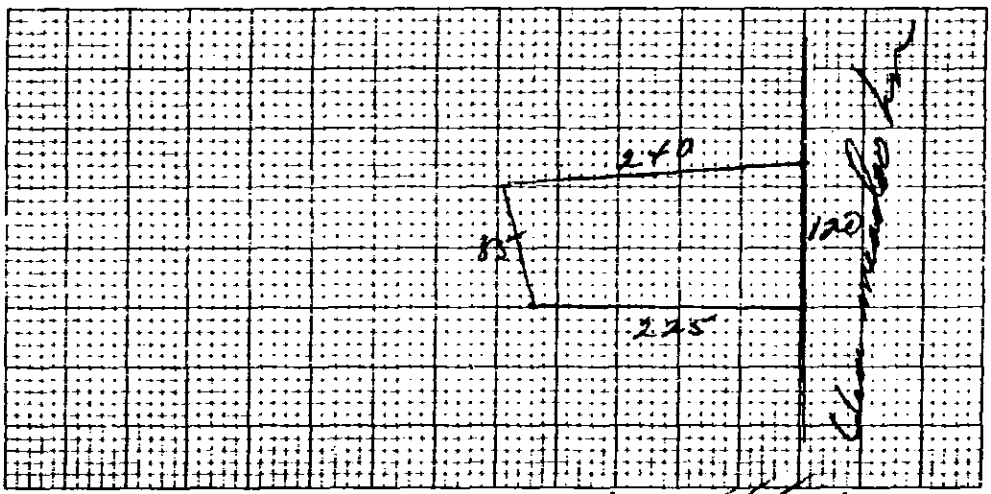
4) LOCATION OF PROPERTY 8313 Clear Meadow Lane (STREET OR COUNTY ROAD)

5) SUBDIVISION Clear Meadow LOT NO. 3 BLOCK NO. C

MAP BOOK NO 19 PAGE NO 204

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

Robert Freeland
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

S.I.R. No. 16885
T.C. No. PO 134-274-12

(Ground Absorption Sewage Disposal)

OWNER: Robert M. Engelhardt
ADDRESS: 201 Old Bell Road
COUNTY: Matthews N.C. 28105
LOCATION OF SITE: Clear Meadow Farms

DATE REQUESTED:
PLAT NO: Lot #3 - C.
LOT SIZE: 23,664

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS U — 2-10%	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2:1 Clay)	S (PS) U — Clay	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) U — Blocky	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	(S) PS U — 48"	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (inches) (Impervious strata, Rock)	(S) PS U — None	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	(S) PS U — >6' to ground water	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (percolation rate)	S (PS) U — Moderate	S PS 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	Provisionally suitable			
10. SOIL SERIES	Georgeville			

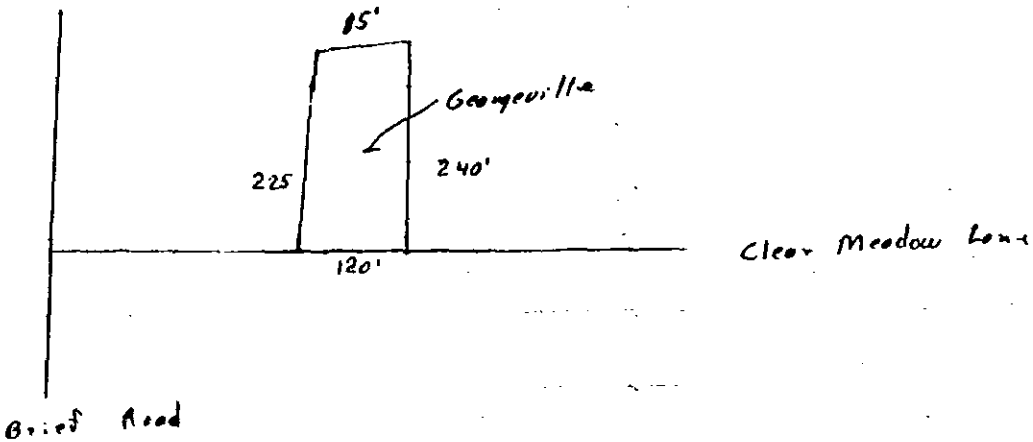
S - Suitable PS - Provisionally Suitable U - Unsuitable

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

Recommendations/Comments:

Described By: William A. Marlin
Title: Soil Scientist
Date: 6-2-80

DHS Form 2601
Sanitation
EHD 539 (2/80)


85'
Georgeville
225
240'
120'
Clear Meadow Lane
Brief Road

Serial No. 3518

PTR No. 16885

Date Issued June 3, 1980

T C No po 139-274-12

Map Date

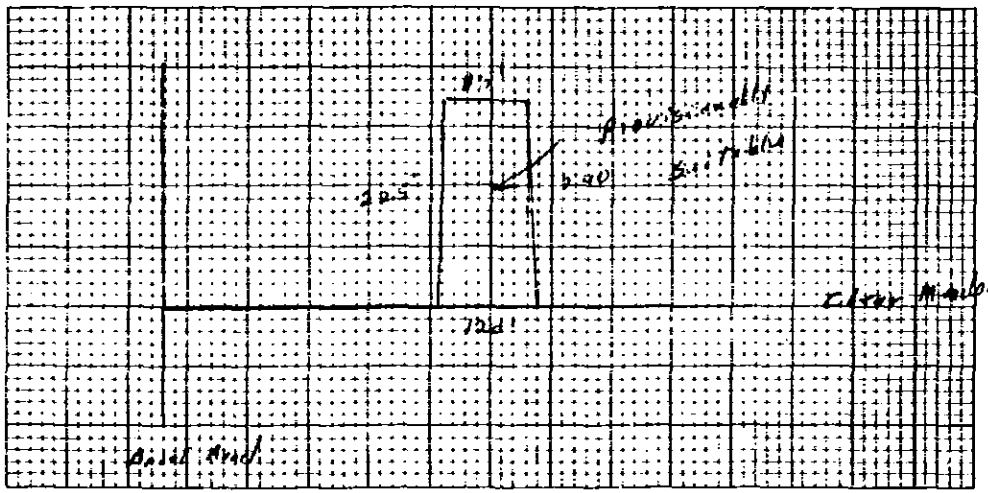
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Freeland, Robert Moss
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 701 Old Bell Road, Matthews, NC ZIP 28105

LOCATION OF PROPERTY 8313 Clear Meadow Lane
(STREET OR COUNTY ROAD)

SUBDIVISION Clear Meadow LOT NO #3 BLOCK NO. "C"



PLOT PLAN

This is to certify that a soil investigation and on-site investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The said investigation was conducted on that portion of the lot as indicated on the above plot. The permeability rate determined by the investigation was **Provisionally Suitable**. 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 must be obtained from the Mecklenburg County Department of Environmental Health prior to the construction, alteration or repair of 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 Mecklenburg County Department of Environmental Health at the time of application for permit, the permeability rate obtained above, and the size and type of building constructed thereon.
3. This approval is valid only if the system is installed in the immediate area indicated as acceptable for system installation on the above plot.
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 Mecklenburg County Department of Environmental Health renders the area indicated as acceptable for system installation unsuitable for 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 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.

William R. Marler
Soil Scientist

John R. Johnson
Environmental Health Director or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 6/4/80

ICAR(S) Application No. 16885

T C No. pro 139-294-12

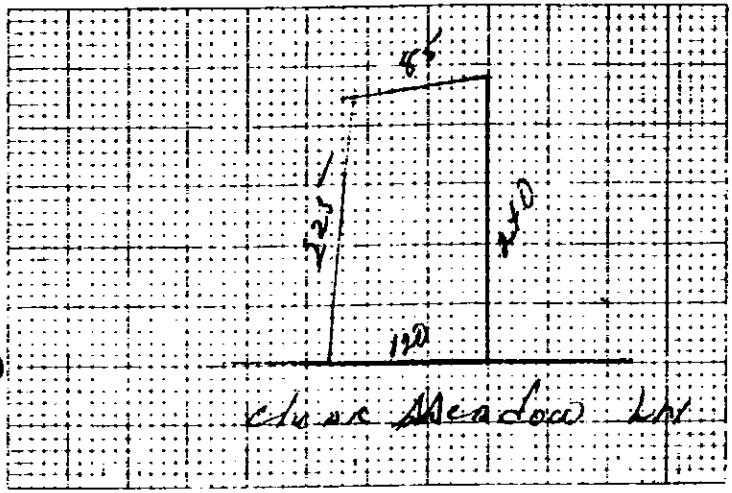
Map Date _____

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.



31 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 ____ Yes X No
9) Water Supply
A) Individual Well ____
B) Governmental System ____
C) Community System:
1 Well source X
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 Freeland (LAST) Robert (FIRST) Moss (MIDDLE)

14) ADDRESS OF OWNER 701 Old Bell Rd., Matthews, N.C. 28105

15) PHONE NO Home 704-364-1394 Office same

16) LOCATION OF SYSTEM 8313 Clear Meadow Lane (STREET OR COUNTY ROAD)

17) SUBDIVISION Clear Meadow Lot No. 3 Block No. C

Map Book No 19 Page No. 204

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? X 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

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued June 4, 1980

Serial No. 4152

LA No. 16885

T C. No po 139-274-12

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 Freeland, (LAST) Robert (FIRST) Moss (MIDDLE)

ADDRESS OF OWNER 701 Old Bell Road, Matthewws, NC ZIP 28105

LOCATION OF LOT 8313 Clear Meadow Lane (STREET OR COUNTY ROAD)

SUBDIVISION Clear Meadow LOT NO #3 BLOCK NO. "C"

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 16885. 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.

Adam Wipfield
Environmentalist

John R Atkisson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 12/31/80

ICAR(S) Application No. 16825

T C No. 139-274-44

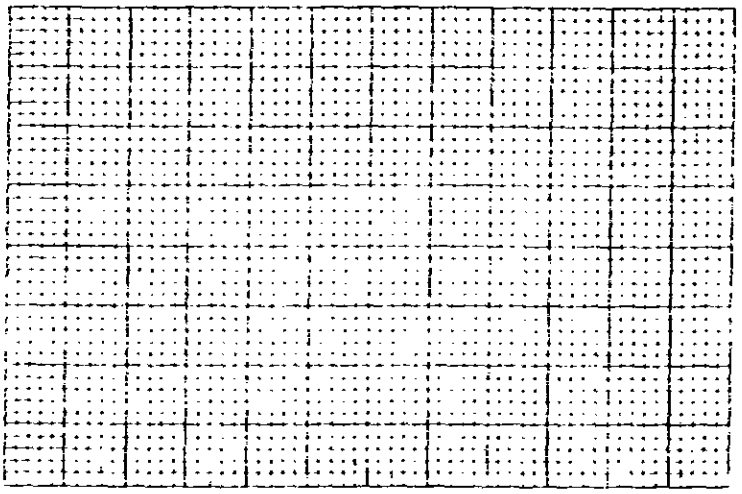
Map Date ____

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



31 PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ___ Yes ___ No
Residence X Yes ___ No
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 ____
B. Governmental System ____
C. Community System:
1) Well source X
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 RMT AND ASSOC.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 2405 E. Independence BLVD

15) PHONE NO. Home 375-0400 Office 375-0400

16) LOCATION OF SYSTEM 8313 CLEAR MEADOW LN
STREET OR COUNTY ROAD

17) SUBDIVISION CLEAR MEADOW Lot No. 3 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 12/3/80 ⇒

20) PTR NUMBER (See Instructions) ____

The undersigned person hereby agrees that he has read the foregoing application and that the contents of some 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.

12/31/80
DATE OF APPLICATION

George S. Trakas
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 4666

LA No. 16885

Date Issued Dec. 31, 1980

T C. No. 139-274-44

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 RIT and Associates
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 2405 E. Independence Blvd, Charlotte NC
(ZIP)

LOCATION OF LOT 8313 Clear Meadow Lane
(STREET OR COUNTY ROAD)

SUBDIVISION Clear Meadow LOT NO. #3 BLOCK NO. "C"

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 16885. 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 on "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.

Bob Wilson
Environmentalist

John B Hickerson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued 5-22-81

Serial No. 4759

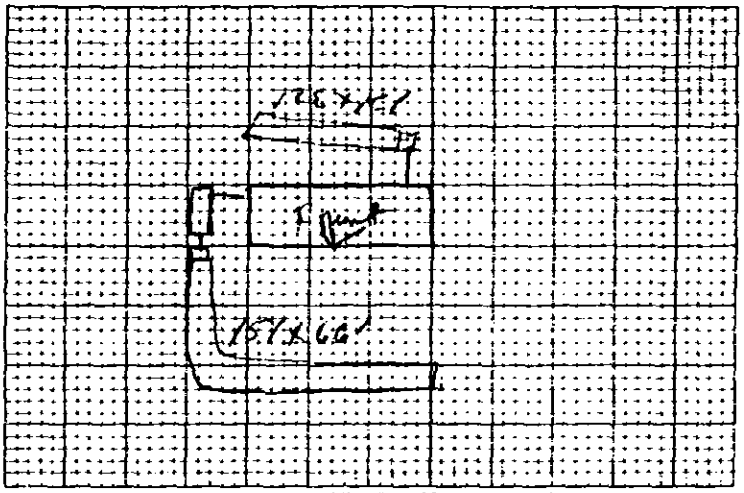
ICAR(S) Permit No. 16885

T C No. 139-274-4

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 16885, dated 12/24/80 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 6-15-81, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate P.S

Liquid Capacity of Tank 1000 gal

Tank Construction P.C

Absorption and/or Nitrification Lines:

Total Line Length 330 + 125

Number of Lines 5 + 4

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'+

NAME OF OWNER KMT and Assoc.

LOCATION OF PROPERTY 8313 Clear Meadow Ln.

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.

Comments: 15'x66' +17" Slope on Septic System
12'+32' +17" Slope on Washing Machine

Bob Lawson

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

C of A (s) No. 16885

Date Issued 6-2-81 Serial 4488 T C No 139-274-44

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 Britt & Dixon. (LAST FIRST MIDDLE)

Location of Property 8313 Clear Meadow

Application Number 16885 Permit Number 16885

Inspection Data:

Liquid Capacity of Tank 1000 gal Tank Material P.C.

Total Length of Drain Tile 330'+125' Number of Lines 5 & 4

Depth of Filter Material 17" Cover Depth 15"

Water Supply Source Com well Distance from Water Source 100'+

Excavation Inspected 6-2-81 (DATE) Tank Inspected 6-2-81 (DATE)

Nitrification Field Inspected 6-2-81 (DATE)

Washing Machine Line Inspected, If Applicable 6-2-81 (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 _____

Bob Wilson
Environmentalist

END-5-76

Environmental Health Department's Copy