Date Received 5-4-79

Application No. 7441

T. C. No. 231-02213

Map Date 14 Mar 73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Deaton (LAST) James (FIRST) F. (MIDDLE)

ADDRESS OF OWNER 5411 Foxbrook Dr. ZIP 28210

PHONE NO. Home 525 5513 Office 372 6131

LOCATION OF PROPERTY Providence Rd. (STREET OR COUNTY ROAD)

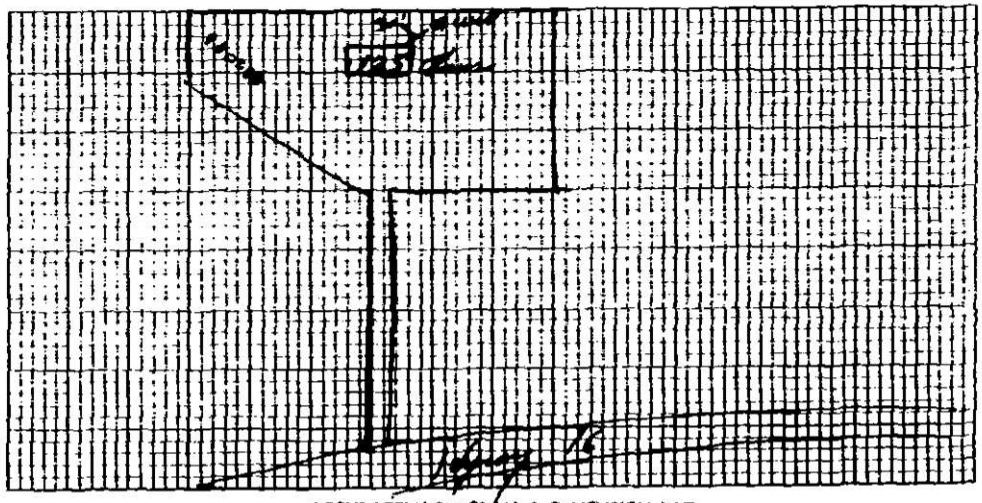
SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. _____

DEED REFERENCE: DEED BOOK _____ PAGE NO. _____

WELL CONTRACTOR _____ LICENSE NO. _____

Application is hereby made to the Mecklenburg County Health Department for a permit to drill a water well on the hereinabove described lot to be used as a source of _____ individual, _____ semi public, or _____ public water supply:



ACCURATELY DIAGRAM & DIMENSION LOT

9-5-79
DATE OF APPLICATION

James F. Deaton
OWNER

Application approved and permit hereby granted

Permit No: 7441

ENVIRONMENTALIST

FORM NO. E-20-8-1-72

HEALTH DEPARTMENT'S COPY

Date Received 1-28-74

RECEIVED
JAN 2 5 1974
ENVIRONMENTAL HEALTH DIVISION

APT No 7441

T. C. No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Deaton (LAST) James (FIRST) Farrell (MIDDLE)

2) ADDRESS OF OWNER 5411 Farmbrook Dr. ZIP 28210

3) PHONE NO Home 525-5313 Office 392-6131

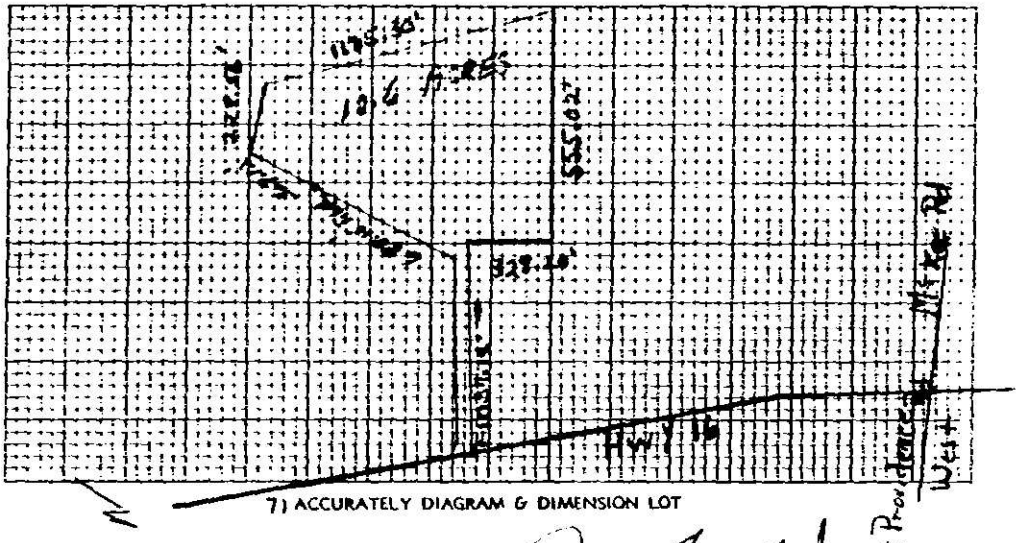
4) LOCATION OF PROPERTY Highway 16 - Providence Rd West (STREET OR COUNTY ROAD) Mt. Kee Rd. ?

5) SUBDIVISION S.W. Matthew's Estate LOT NO. 8 BLOCK NO.

MAP BOOK NO 4 PAGE NO. 289

6) DEED REFERENCE DEED BOOK 3300 PAGE NO 503

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 James Farrell 1-28-74

FORM NO. E-1-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 4113

PTR No 7441

T C No 231-023-13

Date Issued March 11, 1974

Map Date 12-14-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

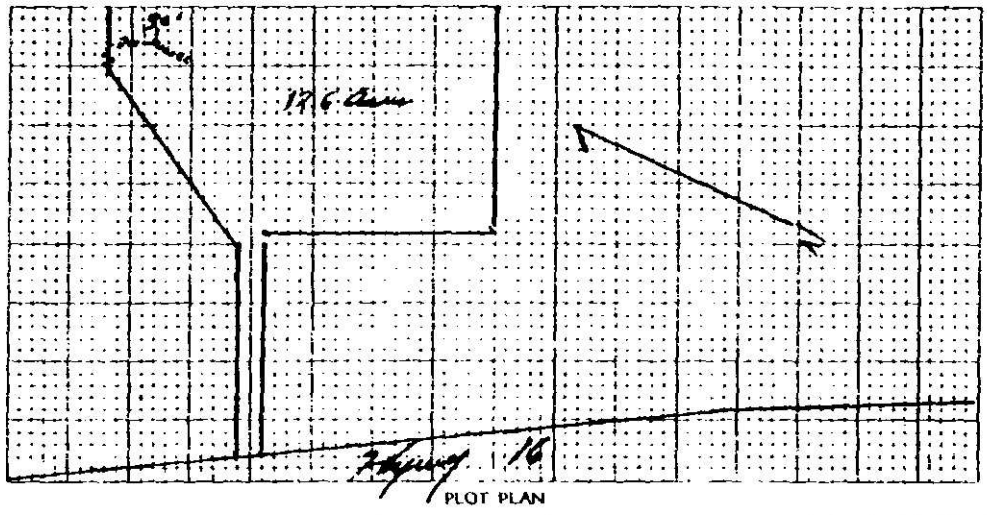
PERCOLATION TEST REPORT

NAME OF OWNER Deaton (LAST) James (FIRST) Farrell (MIDDLE)

ADDRESS OF OWNER 5411 Farmbrook Drive ZIP 28210

LOCATION OF PROPERTY Providence Road West and McKee Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 8 BLOCK NO



PLOT PLAN

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

The percolation rate determined by the test was 48 min/in. The said lot is approved for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption effluent discharge subject to the following terms and conditions:

1. A permit to install, construct, alter, or repair the specific system shall be obtained from the Mecklenburg County Health Department prior to the beginning of any construction of buildings or 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 Health Department prior to installation based on the percolation rate obtained above, and on the size and type of building constructed thereon.
3. This approval is valid only if the system is installed in the immediate area where the percolation test was run.
4. This approval is void if any grading, filling, or construction (including the drilling of a well) is performed on the lot which in the opinion of the Health Department renders the area where the percolation test was run unsuitable for the installation, construction, alteration, and/or repair of such a system.

This approval is granted based on the laws of the State of North Carolina and the rules and regulations of the North Carolina State Board of Health and the Mecklenburg County Board of Health which were in effect on the date of issuance and is void if at any time in the future, prior to the completion of the system, these laws, rules, and regulations are changed such that this approval would not have been granted had the new or revised laws, rules, and regulations been in effect on the issue date.

John R. Atkisson

Director, Environmental Health Division or Authorized Section Head

FORM NO. E-2-8-1-72

HEALTH DEPARTMENT'S COPY

Date Received 3-13-74

RECEIVED
MAR 13 1974
ENVIRONMENTAL HEALTH DIVISION

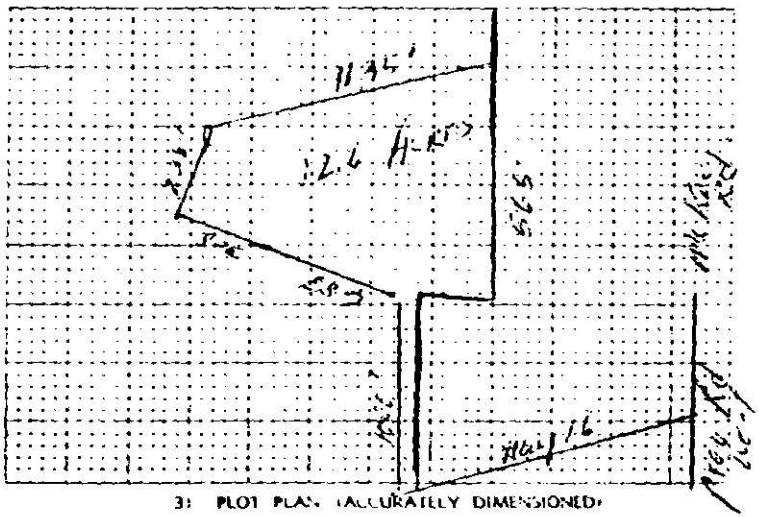
ICAR-S Application No 7441
T C No 231-073-1
Map Date 12-14-73

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

Application for an
Installation, Construction, Alteration, and/or Repair Permit
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

The owner of the property described hereinafter hereby applies to the Mecklenburg County Health Department 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) No. of Bedrooms 4
5) Basement or Crawl Space / Engineer
6) Washing Machine ✓ Yes No
7) Garbage Disposal ✓ Yes No
8) Dishwasher ✓ Yes No
9) Water Supply
A Individual Well ✓
B Government System
C Community System
1 Well on site
2 Government
10) Sewage System
A Septic Tank ✓ Yes
B Public Sewer Yes ✓ No
11) Community Sewer Yes ✓ No
12) FHA Case No.
13) VA Case No.

131 NAME OF OWNER Deaton (LAST) James (FIRST) Fairlee (MIDDLE)

141 ADDRESS OF OWNER 5711 Fairlawn Dr. Charlotte

151 PHONE NO Home 525 5313 Office 392-6131

161 LOCATION OF SYSTEM Hwy 16 - Boulevard Rd. North Mileage Rd
(STREET OR COUNTY ROAD)

171 SUBDIVISION Sta Hilton Estates Lot No 5 Block No

Map Book No 4 Page No. 284

181 DEED REFERENCE — DEED BOOK ~~3306~~ 3306 AT PAGE ~~507~~ 503 BK 48

191 HAS A PERCOLATION TEST BEEN RUN? ✓ YES NO DATE RUN 3-1-74

201 PTR NUMBER (See Instructions) 74-41

The undersigned person hereby agrees that he has read the foregoing application and that the contents of same are true. It is understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

3-11-74
DATE OF APPLICATION

James F. Deaton
OWNER

FORM NO. E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued March 13, 1974 **Serial No. 3905**

LA No 7441

T C No 231-023-13

IMPROVEMENTS PERMIT

Map Date 12-14-73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Deaton (LAST) James (FIRST) Farrell (MIDDLE)

ADDRESS OF OWNER 5411 Farmbrook Drive ZIP

LOCATION OF LOT Providence Road West and McKee Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO

MAP BOOK NO PAGE NO

The above specified lot is approved by the Mecklenburg County Health Department for the installation of an individual septic tank system with subsurface, soil absorption effluent discharge based on the percolation test results which yielded a percolation rate of 48 min/in on an on site inspection of the said lot, and upon the information supplied in the "Application for an Installation Construction, Alteration and/or Repair Permit", number 7441. This approval is subject to the following terms and conditions

1. That the nitrification field be installed, constructed, altered, and/or repaired in the same area where the percolation test was run.
2. That an "Installation, Construction, Alteration, and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altred, and/or repaired and that the system be installed in accordance with same

This approval may be revoked and the building inspection department requested to revoke any building permit(s) which have been issued to authorize construction on the said lot if at any time it is determined that any information contained in the "Application for an Installation, Construction, Alteration, and/or Repair Permit" is not correct or is untrue or that the septic-tank system is not being installed, constructed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit

W. A. Keesler
Environmentalist

John R. Allison
Director Environmental Health Division or Authorized Section Head

FORM NO E-3-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 3/20/15

Serial No. [illegible]9

ICARIS Permit No 7441

T C No 231-023-12

Map Date 12-14-73

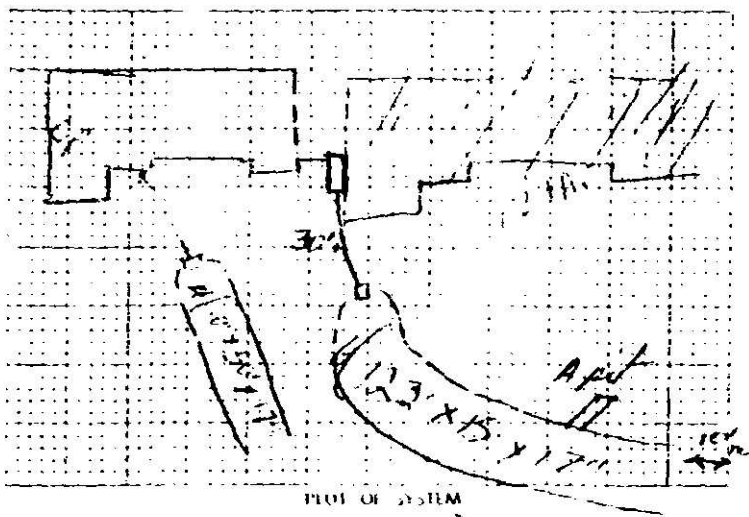
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

Permission is hereby given to X 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 7441 dated 3-13-74 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 5-1-75, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 45 mpi

Liquid Capacity of Tank 1500 gal

Tank Construction PC

Absorption and/or Notification Lines ST 2CM

Total Line Length 135' 200'

Number of Lines 6 4

Distance from House 10' min

Distance from Property Line 10' min

Distance from Well 100' +

NAME OF OWNER James F Dixon

LOCATION OF PROPERTY Residence (Just Dixon Prov. Prosch)

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used.

Comments Hold ALL GRADES TO MIN.

Division or Section Head [illegible]

Environmentalist [illegible]

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 Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

Form E-5-9-1-72

Serial No. 5764

C of A Ist No 7441

Date Issued 4/17/75

T C No 231-023-12

Map Date 12-14-73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner D. HICK JAMES F. (LAST, FIRST, MIDDLE)

Location of Property 14 EVIDENCE RD (JUST S. OF PROVIDENCE RES. CH.)

Application Number 7441 Permit Number 7441

Inspection Date:

Liquid Capacity of Tank 1500 gal Tank Material P.C.

Total Length of Drain Tile ST 75' WM 200' Number of Lines ST 6 WM 4

Depth of Filter Material 17" Cover Depth 14"

Water Supply Source IND WELL Distance from Water Source 100+

Excavation Inspected 4-17-75 (DATE) Tank Inspected 4-17-75 (DATE)

Nitrification Field Inspected 4-17-75 (DATE)

Washing Machine Line Inspected, If Applicable 4-17-75 (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 Board of Health 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 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 and 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 BUILDER OR LANDSCAPER TO GRADE FOR STORM DRAINAGE AWAY FROM NITRIFICATION FIELDS

J. P. Brigman

Environmentalist

FORM NO E-6-9-1-72