Date Received 5-4-78

APT No. 140 14
P.O.
T. C. No. 231-101-05

Map Date 4-5-78

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Smith-Allen Company, Inc.
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER 5511 Monroe Road ZIP 28212

3) PHONE NO Home _____ Office 568-5517

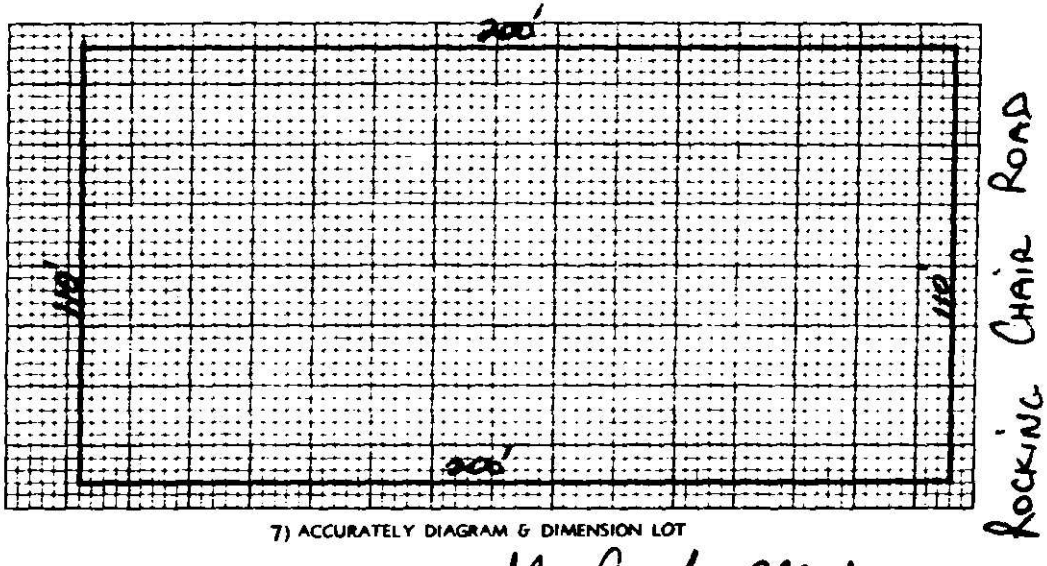
4) LOCATION OF PROPERTY Rocking Chair Road
(STREET OR COUNTY ROAD)

5) SUBDIVISION Hearthstone LOT NO 13 BLOCK NO. 1

MAP BOOK NO 18 PAGE NO 213

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

Grady L. Allen Jr.
OWNER

EHB-5-76

Environmental Health Department's Copy

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

APPENDIX H
SITE EVALUATION

APT 1H01H
PC 231-191-95
LOT 13 Blk-K1

(Ground Absorption Sewage Disposal)

OWNER: Smith Allen & Assoc. DATE REQUESTED: _____
ADDRESS: 5511 Monroe Rd PLAT NO.: _____
COUNTY: Charlotte, 28212 LOT SIZE: 22,000
LOCATION OF SITE: Parking Area

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) 2-7 PS U	S PS U	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 U	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S (PS) 2-1 Kl U	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	(S) 46+ PS U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Imprevious Strata, Rock)	(S) None PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) 70"+ PS Ground U Water	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) Moderate U	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			
SOIL SERIES	Cecil			

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: _____

Described By: William A. Marks

Title: Soil Scientist Date: 7-10-78

DHS Form 2604 (2/77)
Sanitation

Title: _____ Date: _____

DHS Form 2601 (2777)
Sanitation

Serial No. 2045

PTR No. 14014

Date Issued 7/11/78

T C No P.O. 231-101-05

Map Date 4-5-78

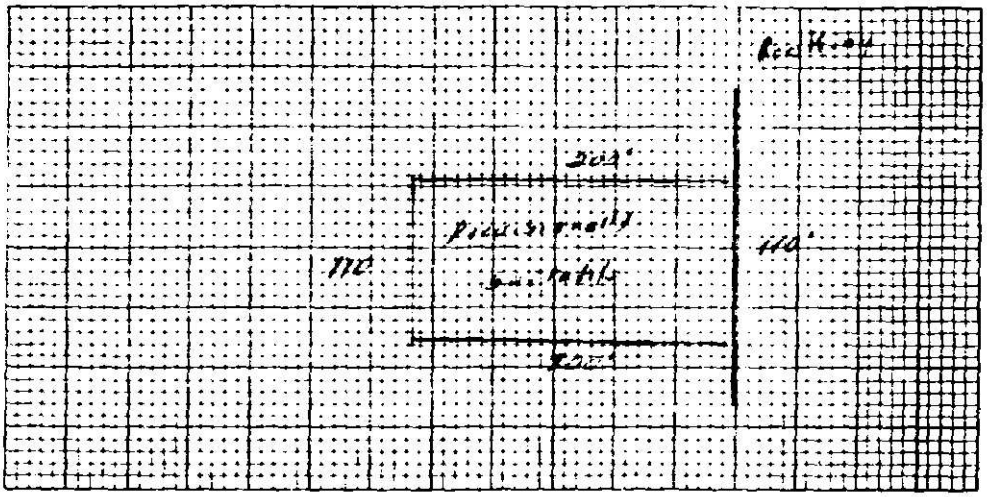
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Smith-Allen Company, Inc.
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 5511 Monroe Road, Charlotte, N. C. ZIP 28212

LOCATION OF PROPERTY Rocking Chair Road
(STREET OR COUNTY ROAD)

SUBDIVISION Hearthstone LOT NO 13 BLOCK NO. 1



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 **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, construct, alter, or repair the specific system shall be obtained from the Mecklenburg County Department of Environmental Health 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 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 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 A. Marion
EHD-S-76 Soil Scientist

Environmental Health Director or
Authorized Section Head

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received _____

ICAR(S) Application No. 14014

T C No. P.O. 231-1

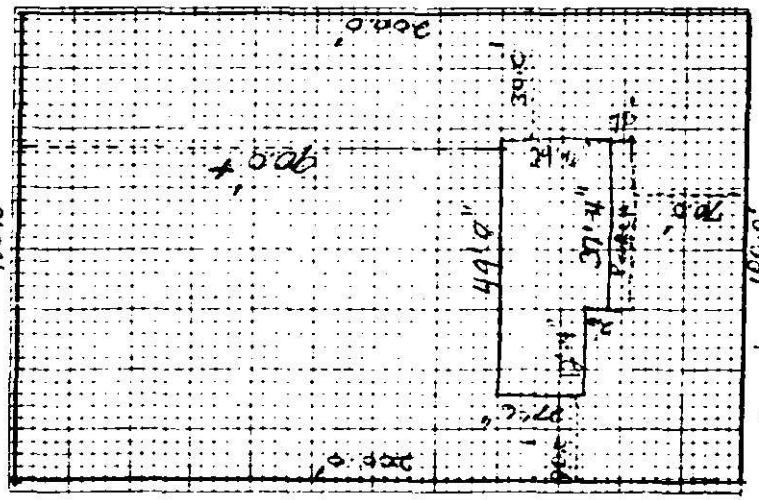
Map Date _____

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 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 Smith Allen Company, Inc.
(LAST, FIRST, MIDDLE)

14) ADDRESS OF OWNER 5511 Monroe Rd.

15) PHONE NO Home _____ Office 568-5517

16) LOCATION OF SYSTEM 10308 Rocking Chair Rd.
(STREET OR COUNTY ROAD)

17) SUBDIVISION Hearthstone Lot No. 13 Block No. 1

Map Book No. 18 Page No. 213

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.

7/31/78
DATE OF APPLICATION

Grady L. Allen, Jr.
OWNER

EHD-5-76

Environmental Health Department's Copy

Serial No. 2086

LA No. 14014

Date Issued August 3, 1978

T. C. No. P.O. 231-101-05

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 Smith Allen Company, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 5511 Monroe Rd. Charlotte, NC ZIP 28212

LOCATION OF LOT 10308 Rocking Chair Road
(STREET OR COUNTY ROAD)

SUBDIVISION Hearthstone LOT NO. 13 BLOCK NO. 1

MAP BOOK NO. 18 PAGE NO. 213

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 14014. 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.

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-S-76

Environmental Health Department

Date Issued 30 Jun 74

Serial No. 2361

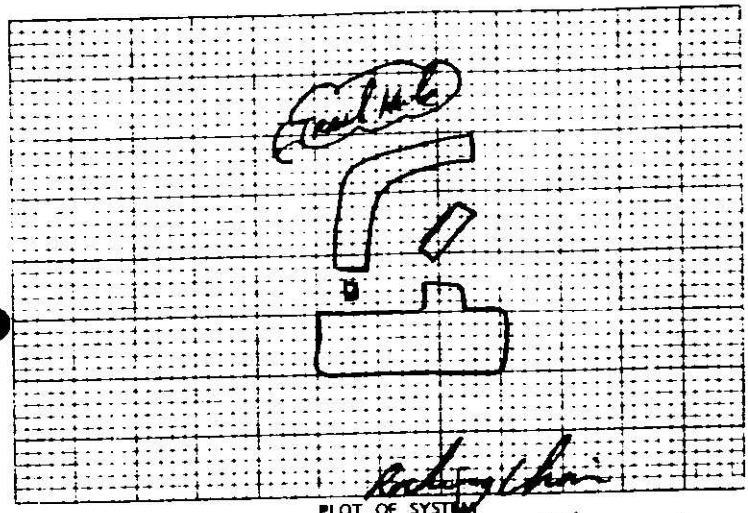
ICAR (S) Permit No. 14014

T C No. 10-231-101-05

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 14014 dated 7/3/74 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 1 Mar ___, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate P.S.

Liquid Capacity of Tank 1500 gal

Tank Construction P.C. Conc.

Absorption and or Nitrification Lines

Total Line Length 660' & 167'

Number of Lines 5 & 4

Distance from House 101

Distance from Property Line 10'

Distance from Well Comm.

NAME OF OWNER Smith Allen Comp. Inc.

LOCATION OF PROPERTY 10308 Rocking Chair Rd.

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.**

(12'×42'×17" stone) & (15'×132'×17" stone) * of (2 12'×83' beds)

Steve Ward

Environmentalist

Division or Section Head

* 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 2-2-79

Serial No. 2308

C of A (s) No. 14014

P.O. T C No 231-101-05

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 Smith (LAST) Allen (FIRST) Company, Inc. (MIDDLE)

Location of Property 10308 Rocking Chair Road

Application Number 14014 Permit Number 14014

Inspection Data:

Liquid Capacity of Tank 1500 gallons Tank Material precast concrete

Total Length of Drain Tile 660+167' Number of Lines 4 + 5

Depth of Filter Material 17" Cover Depth 15"

Water Supply Source well Distance from Water Source not in yet

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

Nitrification Field Inspected 2-2-79 (DATE)

Washing Machine Line Inspected, If Applicable 2-2-79 (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 system placed in two 12'×83' beds.
Installed according to permit.

Michael A. Sexton

EHD-5-76

Environmental Health Department's Copy