Date Received 8/11/86

APT No. 14456
P.D.
T. C. No. 005-012-08

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Knox (LAST) Bobby (FIRST) Boyce (MIDDLE)

2) ADDRESS OF OWNER Rt #3 Box 355 Huntersville NC ZIP 28078

3) PHONE NO Home 892-6248 Office 892-6196

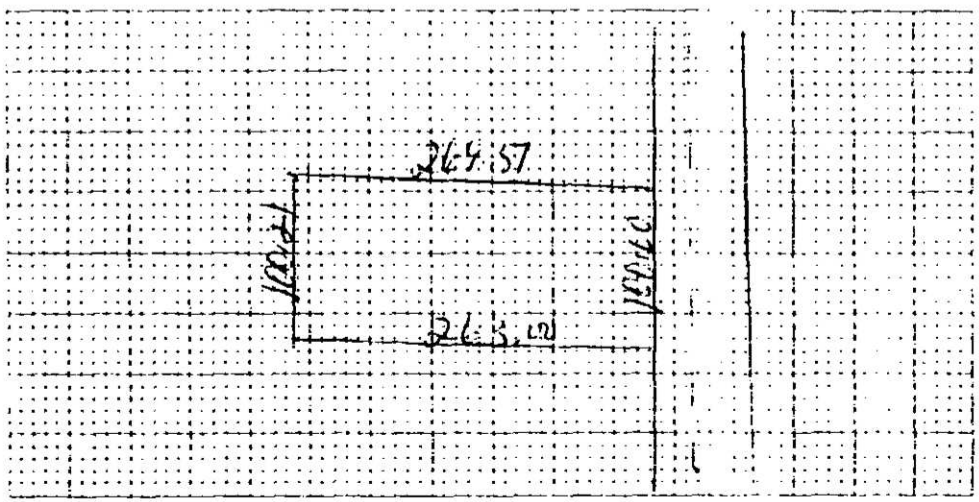
4) LOCATION OF PROPERTY Brawley Dr (STREET OR COUNTY ROAD)

5) SUBDIVISION Knox Est LOT NO 7A BLOCK NO ____

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 construction of a [illegible] and on the property described for the purpose of determining the [illegible] for the installation of a wastewater treatment system with subsurface soil disposal of effluent.



7) ACCURATELY DIAGRAM & DIMENSION LOT

Bobby B. Knox
OWNER

EHD 5-76

Environmental Health Department's Copy

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

APPENDIX H
SITE EVALUATION

MP 10.456
PO -005-013-05
Lot 7A

(Ground Absorption Sewage Disposal)

OWNER: Bobby Boyce Knott
ADDRESS: Rt 2 Box 305
COUNTY: Statesville, N.C.
LOCATION OF SITE: Hopkins Dr

DATE REQUESTED:
PLAT NO.:
LOT SIZE: 36,000

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) 2-8% 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) Blocky U	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	(S) 48" 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) 75' to 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. Martin

Title: Soil Scientist Date: 9-18-78

DHS Form 2601 (2/77)
Sanitation

Serial No. 2181

PTR No. 14456

T. C. No. P.0.005-012-08

Date Issued September 19, 1978

Map Date _____

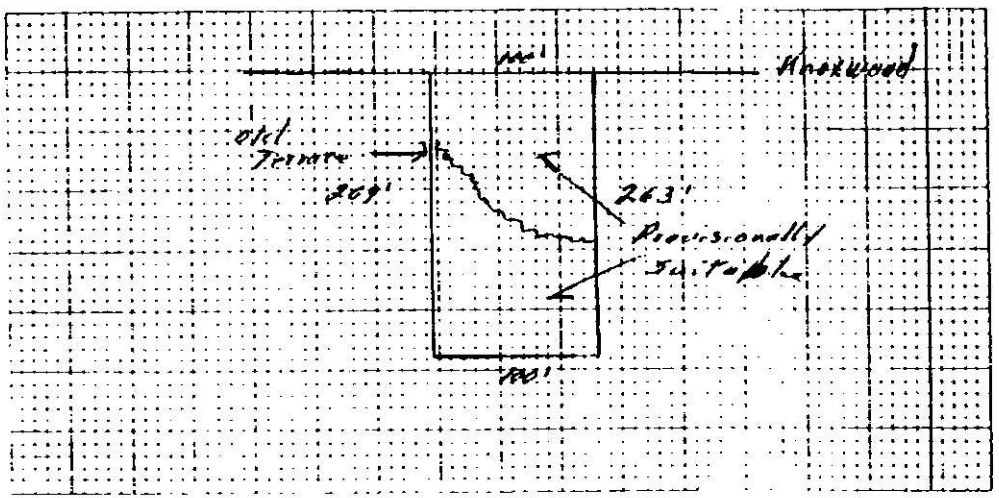
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Knox (LAST) Bobby (FIRST) Boyce (MIDDLE)

ADDRESS OF OWNER Route 2, Box 385, Huntersville, NC ZIP 28078

LOCATION OF PROPERTY Knoxwood Drive (STREET OR COUNTY ROAD)

SUBDIVISION Knoxwood LOT NO 7A BLOCK NO. _____



PLOT PLAN

[illegible] Mecklenburg County [illegible] was conducted [illegible] **Provisionally Suitable** The [illegible] and lot is approved [illegible] with subsurface, soil ab- [illegible] effluent discharge [illegible] the following terms and conditions

- [illegible] the Mecklenburg County Depart- [illegible] the wastewater treatment sy- [illegible]
- [illegible] by the Mecklenburg [illegible] and [illegible]
- [illegible] item installat- [illegible] which [illegible] complete [illegible]

[illegible] and regulations [illegible] and the Mecklen- [illegible] at any time [illegible] are changed such that [illegible] been in effect on the issue date.

William R. Martin
Soil Scientist

John N. Hobson
Environmental Health Specialist
Authorized Section Head

SEE INSTRUCTIONS ON BACK

Date Received 1-4-83

ICAR(S) Application No. 14456

T. C. P00005-062-08

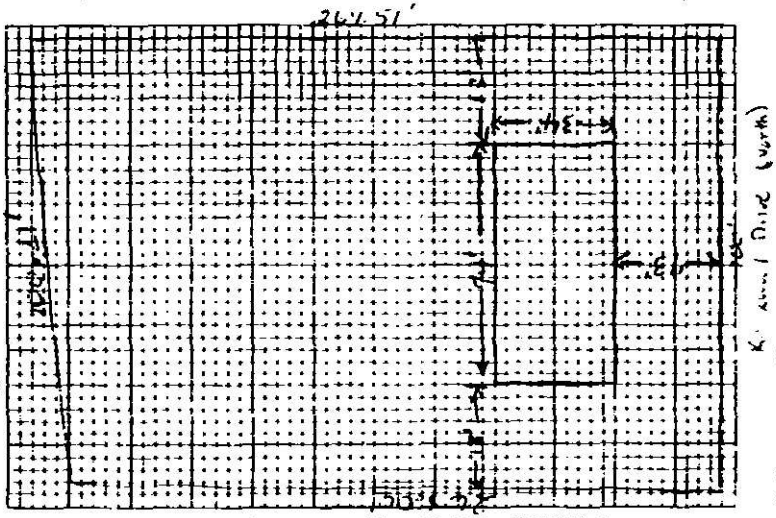
Map Date

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 1 ✓ Yes ___ No
4) No of Bedrooms 2
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 McAuley (LAST) Robert (FIRST) William (MIDDLE)

14) ADDRESS OF OWNER P.O. 243 Huntersville, N.C. 28078

15) PHONE NO Home 875 6816 Office ___

16) LOCATION OF SYSTEM 16125 Arrow Drive (STREET OR COUNTY ROAD)

17) SUBDIVISION [illegible] Lot No 7 Block No. A

Map Book No 10 Page No. 230

18) DEED REFERENCE -- DEED BOOK 5461 AT PAGE 0077

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES NO DATE RUN 9/28 PS

20) PTR NUMBER (See Instructions) 14456

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.

1-3-83
DATE OF APPLICATION

Robert W. McAuley
OWNER

EHD-5-76

BT-1-6 P2-1

SIR No. 14456

Serial No. 6122

Date Issued 1-4-83

T. C. No. PO 005-012-08

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
IMPROVEMENT PERMIT
TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER McAuley, (LAST) Robert (FIRST) William (MIDDLE)

ADDRESS OF OWNER P. O. Box 245, Huntersville, NC ZIP 28078

LOCATION OF LOT 16925 Knoxwood Drive (STREET OR COUNTY ROAD)

SUBDIVISION Knoxwood LOT NO 7 BLOCK NO. A

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, or 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 14456 – 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 Instaliation, Construction, Alteration, and/or Repair Permit

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued 5-2-83

Serial No. 6246

ICAR(S) Permit No. 14456

PO No 005-012-08

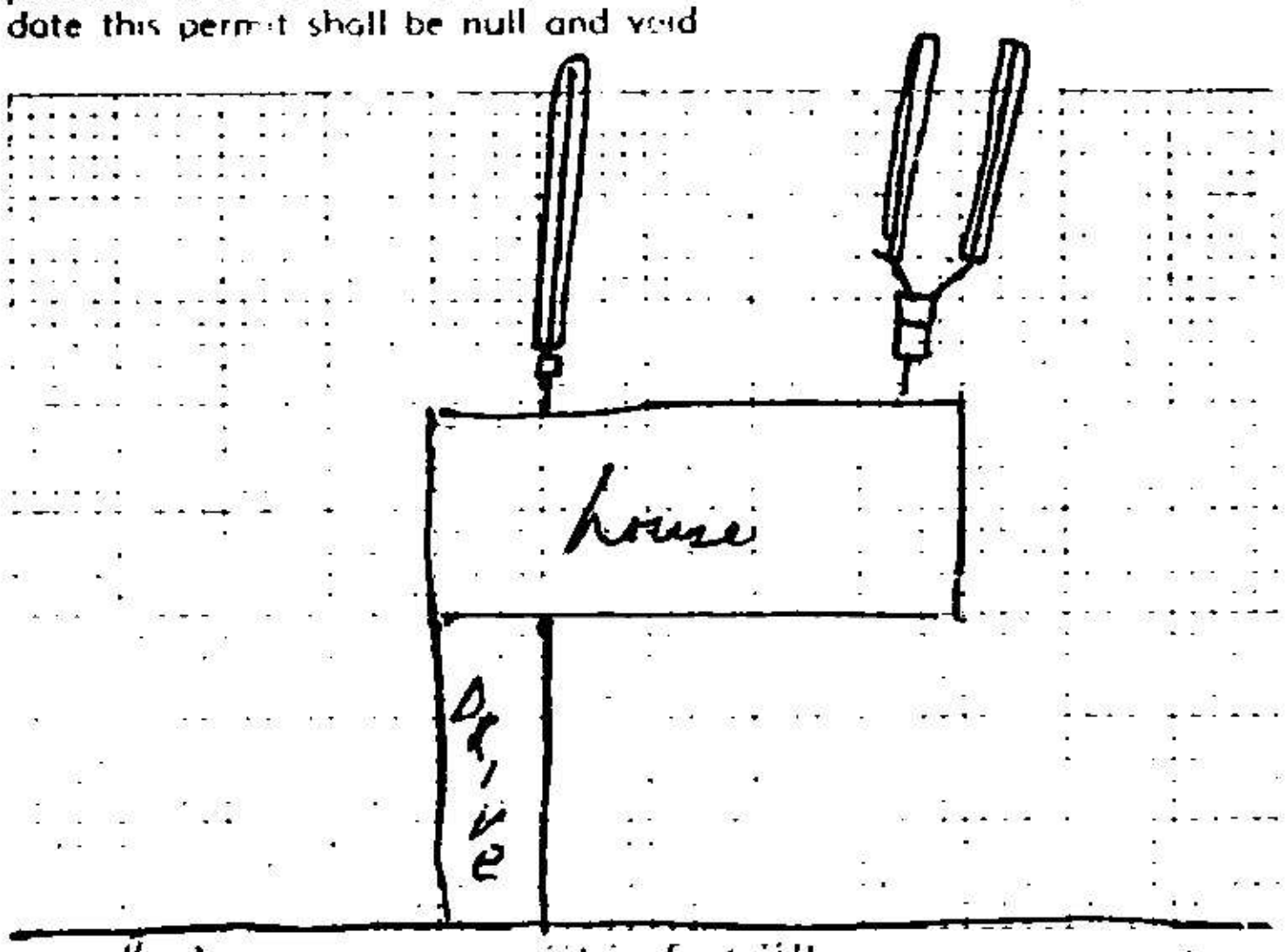
Map Date ____________

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 waste-water 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 14456, dated 12-30-82 and the 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 6-2-83, after which date this permit shall be null and void.



[illegible] P.S

[illegible] 1500 gal

[illegible] P/C Concrete

[illegible] 200' + 100'

[illegible] 2 + 1

[illegible] 75'

[illegible] >10'

[illegible] >100'

Knopwood Dr

NAME OF OWNER Robert W. McAuley

LOCATION OF PROPERTY 16925 Knopwood Drive

[illegible]

Comments: 2 - 100 ft long x 3 ft long x 12" stone for septic
1 - 100 ft long x 3 ft wide x 12" stone for wash.

[illegible] Head

Environmentalist R Phelps

* 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

BE-5-12-83

C of A (s) No. 14456

Date Issued 5-10-83 Serial 5817

PC T C No. 005-012-08

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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

Name of Owner McAuley (LAST) Robert (FIRST) W. (MIDDLE)

Location of Property 16925 Knotwood Dr

Application Number 14456 Permit Number 14456

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material P/C Concrete

Total Length of Drain Tile 200 + 100 Number of Lines 2 + 1

Depth of Filter Material 12" Cover Depth 1'-18"

Water Supply Source ~~Well~~ Comm. Well Distance from Water Source >100'

Excavation Inspected — (DATE) Tank Inspected 5-10-83 (DATE)

Nitrification Field Inspected 5-10-83 (DATE)

Washing Machine Line Inspected If Applicable 5-10-83 (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 Commissioner 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