Date Received 1/28/80

JAN

APT No. 16499

T C No 0227-141-03

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Fulks (LAST) Rex (FIRST) M. (MIDDLE)

2) ADDRESS OF OWNER 8312 Arleyne Dr. Charlotte ZIP 28134

3) PHONE NO Home 542 8615 Office 527 3348

4) LOCATION OF PROPERTY CROSS COUNTRY ROAD (STREET OR COUNTY ROAD)

5) SUBDIVISION Providence Road Section 1 map 1 LOT NO 6 BLOCK NO "E"

MAP BOOK NO 19 PAGE NO 183

6) DEED REFERENCE DEED BOOK 4272 PAGE NO 396

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation on the property described for the purpose of determining the suitability for the installation of a septic tank wastewater treatment system with subsurface soil absorption.

7) ACCURATELY DIAGRAM LOT DIVISION

OWNER Rex M Fulks

EHD 5-74

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. 16484

T. C. # Co 227-1410 3

(Ground Absorption Sewage Disposal)

OWNER: R. & M. Enterprises
ADDRESS: 5312 Wedgefield Lane
COUNTY: Pemville, N.C. 28384
LOCATION OF SITE: Cross Country

DATE REQUESTED:
PLAT NO.: Lot #6, Block E
LOT SIZE: 43,560

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS U 2-10%	S (PS) U Complex slopes	S PS U	S PS U
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy clayey, Note 2:1 Clay)	S (PS) U Clay	S (PS) U Clay	S PS U	S PS U
3. SOIL STRUCTURE (12-36 in.) (Clayey Soils)	S (PS) U Blocky	S (PS) U Blocky	S PS U	S PS U
4. SOIL DEPTH (In.)	(S) PS U 48"	S PS (U) Depth Variable	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata Rock)	(S) PS U None	(S) PS U None	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & internal)	(S) PS U 24" to ground water	S (PS) U Eroded Areas Channel Water	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) U Moderate	S (PS) U Moderate	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	Unsuitable		
SOIL SERIES	Coxville	Eroded Areas		

S - Suitable PS - Provisionally Suitable U - Unsuitable

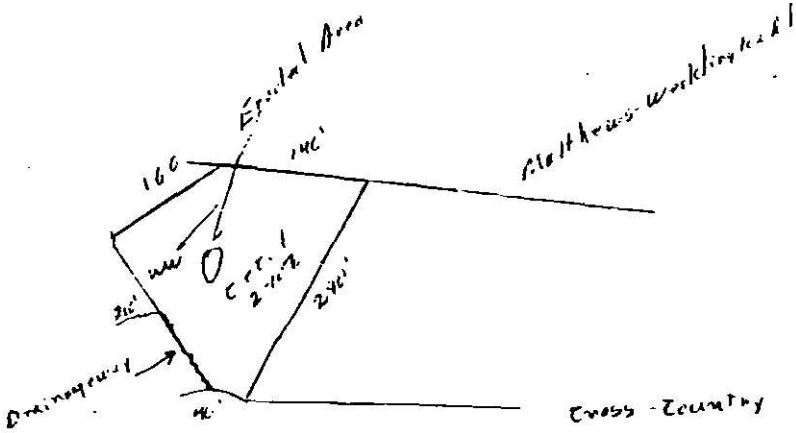
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc.)

Recommendations/Comments:

Described By: William R. Martin

Title: Soil Scientist Date: 1-31-80

DHS Form 2601
Sanitation
EHD 539 (3/79)


Special Area
166
140'
Athletics-Workout
210'
240'
Drainage
Cross-Country

Serial No. 3323

PTR No. 16499

I C No po 227-141-03

Date Issued January 31, 1980

Map Date

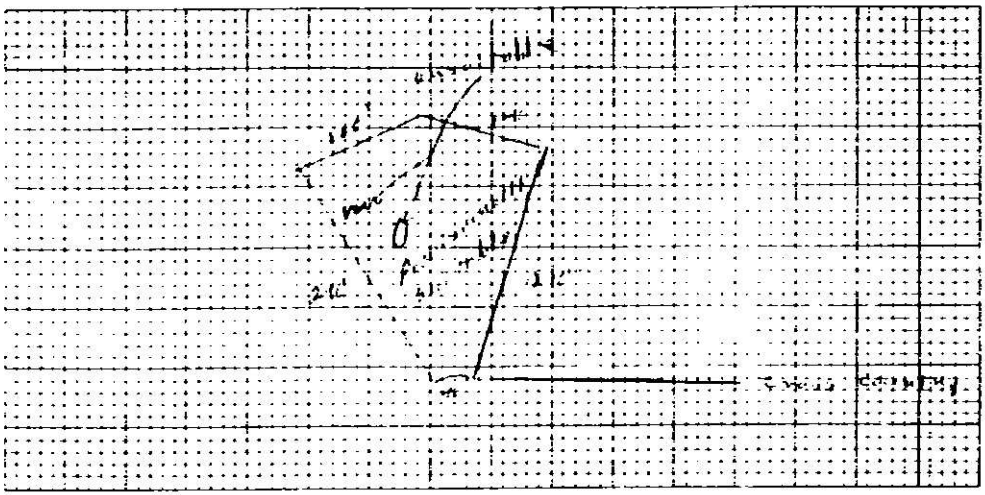
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Fulks, Rex M.
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 8312 Woodgate Lane, Pineville, NC ZIP 28134

LOCATION OF PROPERTY CROSS COUNTRY ROAD
(STREET OR COUNTY ROAD)

SUBDIVISION LOT NO #6 BLOCK NO "E"



PLOT PLAN

This report is that a soil investigation and onsite investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The soil investigation was conducted in that area of the lot designated on the accompanying plot plan.

Provisionally Suitable

The said lot is approved for the installation of an individual subsurface soil absorption wastewater treatment system subject to the following terms and conditions:

1. The wastewater treatment system shall be designed by a duly registered engineer in accordance with the Mecklenburg County Department of Environmental Health Regulations governing individual wastewater treatment systems.
2. The wastewater treatment system shall be designed by the Mecklenburg County Department of Environmental Health and shall be installed by a licensed septic tank installer.
3. The wastewater treatment system shall be installed in the area of the lot designated on the accompanying plot plan.
4. The wastewater treatment system shall be installed in accordance with the soil evaluation performed on the lot which is the basis for the approval by the Mecklenburg County Department of Environmental Health and the area indicated as acceptable for the installation of the wastewater treatment 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. Meier
Soil Scientist

John R. Adkisson
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 1/31/80

ICAR(S) Application No 16499

T C No pc 227-141-03

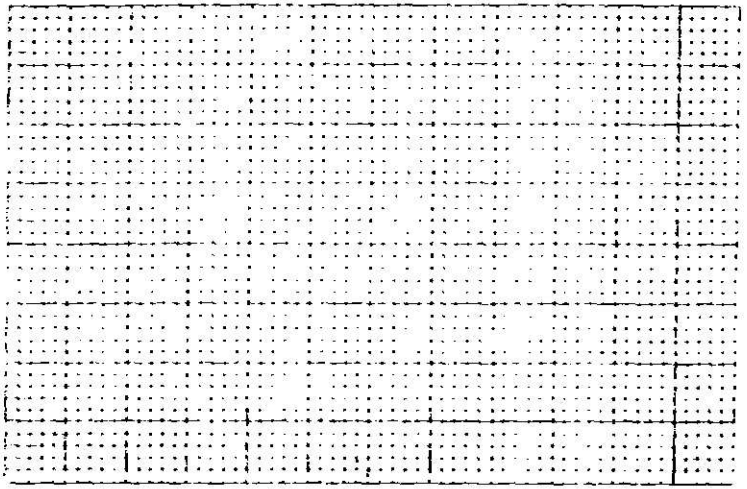
Map Date

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
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 X Yes ___ No
9) Water Supply
A) Individual Well X
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 ___
12) VA Case No ___

13) NAME OF OWNER Fulks (LAST) Rex (FIRST) M. (MIDDLE)

14) ADDRESS OF OWNER 8312 Knight Ln Huntersville, NC 28134

15) PHONE NO Home 542 8615 Office 527 3348

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

17) SUBDIVISION Map 1 Providence Road Section 1 Lot No 6 Block No "E"

Map Book No 19 Page No 193

18) DEED REFERENCE — DEED BOOK 4272 AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? YES X 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 Rex M Fulks

EHD-5-76

Environmental Health Department's Copy

Serial No. 3885

LA No. 16499

Date Issued January 31, 1980

T C No. po 227-141-03

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 Fulks, (LAST) Rex (FIRST) M. (MIDDLE)

ADDRESS OF OWNER 8312 Woodgate Lane, Pineville, NC ZIP 28134

LOCATION OF LOT Cross Country Road (STREET OR COUNTY ROAD)

SUBDIVISION ____ LOT NO #6 BLOCK NO. E

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 — 16499 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

Marshall Edwards
Environmentalist

John R Atkinson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

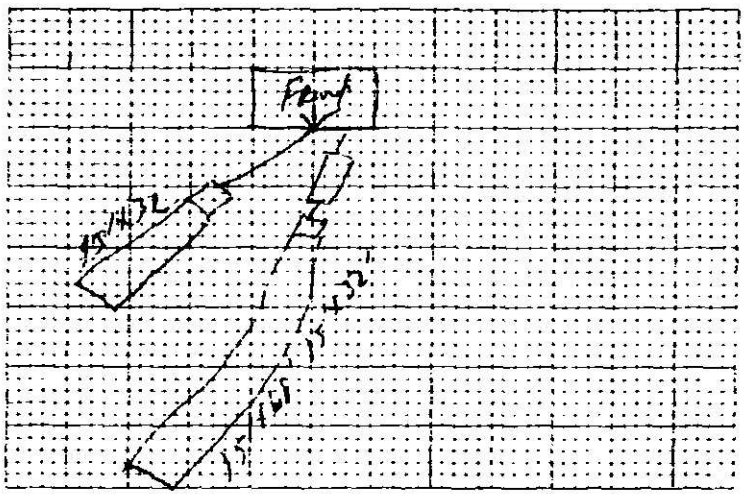
Date Issued 5-19-80 **Serial No. 4016** ICARUS Permit No 16456

T C No 77-141-1

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 _____ 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 P.S.

Liquid Capacity of Tank 1500 gal

Tank Construction P.C.

Absorption and or Nitrification Lines

Total Line Length 660' +16?

Number of Lines 5 & 5

Distance from House 60'

Distance from Property Line 10'

Distance from Well 50' +

NAME OF OWNER Faulks

LOCATION OF PROPERTY Cross Country 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.

Comments 15' x 680'+ 15' + 32 + 34" Stone on Septic System

15' + 33' + 17" Stone on Washin Machine

Division or Section Head

Bob Carlan
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 7-23-80 Serial 3898 C of A Ist No 16495

T C No 227-141-15

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 Faulks (LAST) M. (FIRST) (MIDDLE)

Location of Property Cora Country Dr.

Application Number 16499 Permit Number 16499

Inspection Data:

Liquid Capacity of Tank 1500 Gal Tank Material P.C

Total Length of Drain Tile 660+160' Number of Lines 5+5

Depth of Filter Material 12" Cover Depth 15"

Water Supply Source well Distance from Water Source 50+

Excavation Inspected 7-23-80 (DATE) Tank Inspected 7-23-80 (DATE)

Nitrification Field Inspected 7-23-80 (DATE)

Washing Machine Line Inspected If Applicable 7-23-80 (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 Welch
Environmentalist

EHO-5-76

Environmental Health Department's Copy