21761

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5100

PERSON FILING APPLICATION:

NAME: Parsons (last) Clifford (first) C. (mi) 545-6300 (W)

ADDRESS: 1200 Albemarle PHONE: ( ) 332 1958 H

CITY: STATE: ZIPCODE: 28227

Date:

PROPERTY OWNER:

NAME: Parsons (last) Cliff (first) C. (mi)

ADDRESS: 6705 Stanley PHONE: ( ) 332 8958

CITY: McElwee Rd STATE: NC ZIPCODE: 28036

PROPERTY INFORMATION (FROM ENGINEERING FORM):

TAX/PARCEL NUMBER: 027 301 09

STREET ADDRESS: 6705 Stanley McElwee Rd

ZONING:

Township (check one):
- [X] 0 Mecklenburg County
- [ ] 1 Charlotte
- [ ] 2 Davidson
- [ ] 3 Cornelius
- [ ] 4 Pineville
- [ ] 5 Matthews
- [ ] 6 Huntersville
- [ ] 7 Mint Hill

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT NUMBER: 18 LOT SIZE (in acres):

TYPE APPLICATION (check one):

- [ ] SOIL TEST - INDIVIDUAL LOT (D)
- [ ] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
- [X] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
- [ ] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
- [ ] COMMERCIAL OR INDUSTRIAL (H)
- [ ] SOIL TEST DEVELOPMENT (P)
- [ ] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
- [ ] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
- [ ] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
- [ ] SINGLE MOBILE HOME (S)
- [ ] HOUSE (H)
- [ ] MULTIPLE FAMILY (U)
- [ ] DOUBLE WIDE (D)
- [ ] MODULAR HOME (M)
- [ ] OTHER _____ (O)

NUMBER BEDROOMS: NUMBER OCCUPANTS:

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ___ Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type _____

WATER SUPPLY (check one):
- [ ] Community (C)
- [ ] Municipal (M)
- [ ] Private Well (P)
- [ ] Shared Well (S)
- [ ] Other 'spring' (O)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
- [ ] Swimming Pool
- [ ] Jacuzzi
- [ ] Stable/Barn
- [ ] Workshop
- [ ] None
- [ ] Garage
- [ ] Storage Building
- [ ] Deck/Patio
- [ ] Bedrooms
- [ ] Other

The undersigned, owner, or legal agent for the owner, of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Clifford C Parsons Date:

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

...No work shall be conducted on the septic tank system until an installation, Construction, Alteration and/or Repair approval is granted by this Department.

...This permit is not transferable.

...

- [ ] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
- [ ] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
- [ ] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Environmentalist — Date 7/30/97

Director or Authorized Section Head — Date 7-30-97

WATER : 122791

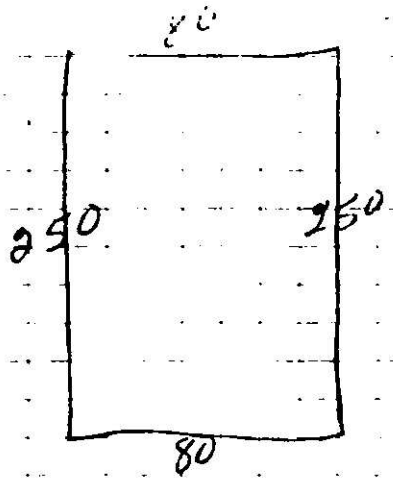
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 21761

TC: 007-201-07

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



APPROVAL DATE _____

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy

C of A (s) No. 21761

Date Issued 3-6-85 **Serial** 7303 T. C. No. 007-201-07

L CRT

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 Parsons, Clifford
(LAST, FIRST, MIDDLE)

Location of Property 16705 Stanley McElvain Rd lot 19

Application Number 21761 Permit Number 21761

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material PVC

Total Length of Drain Tile 400' Number of Lines Seven

Depth of Filter Material 12" Cover Depth 24"

Water Supply Source Drilled Distance from Water Source 7100'

Excavation Inspected 3-6-85 (DATE) Tank Inspected 3-6-85 (DATE)

Nitrification Field Inspected 3-6-85 (DATE)

Washing Machine Line Inspected, If Applicable ____ (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

Jim Ervin
Environmentalist

EHD-5-76

Environmental Health Department's Copy

Date Issued 2-23-84

Serial No. 07920

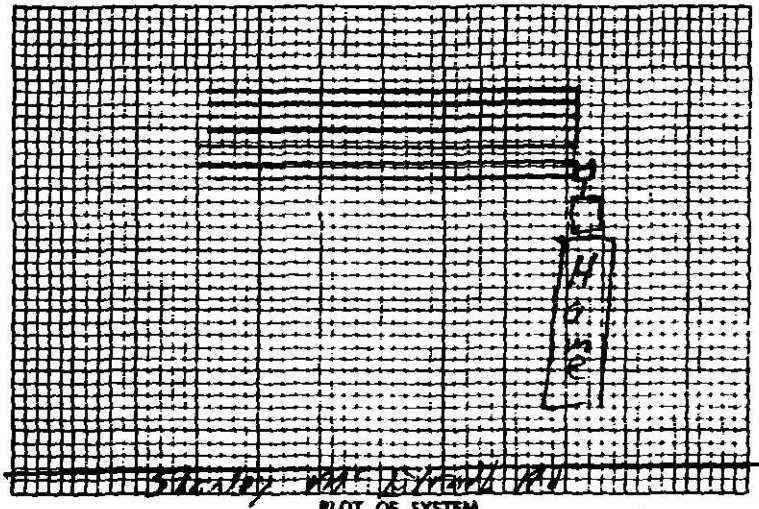
ICAR(S) Permit No. 21761

T. C. No. 007-201-07

Map Date L

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 21761, dated 2-17-84 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 3-23-85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate IIa

Liquid Capacity of Tank 1500

Tank Construction RC

Absorption and/or Nitrification Lines

Total Line Length 490'

Number of Lines Seven

Distance from House 5'

Distance from Property Line 10'

Distance from Well Community 700'

NAME OF OWNER Parsons, Clifford

LOCATION OF PROPERTY 1615 Stanley McElrath Rd. Lot 18

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.

Seven Trench 57'x5' x 12" Stone

Comments:

B. Hardister
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.

BHD-5-76

Environmental Health Department's Copy

Date Issued 2-18-85

Serial No. 8206

SIR No. 21761

T. C. No. 00 007-201-07

Map Date L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

[illegible]

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Parsons, (LAST) Clifford (FIRST) C. (MIDDLE)

ADDRESS OF OWNER 11200 Albemarle Rd., Charlotte, NC ZIP 28212

LOCATION OF LOT 16705 Stanley McElrath Road (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO 18 BLOCK NO. _____

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 21761. 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 Installation, Construction, Alteration, and/or Repair Permit.

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Received 2-18-85

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MECK CO ENVIRONMENTAL HEALTH DEPARTMENT

CAR(S) Application No. 21761

T. C. No. PP 007-201-07

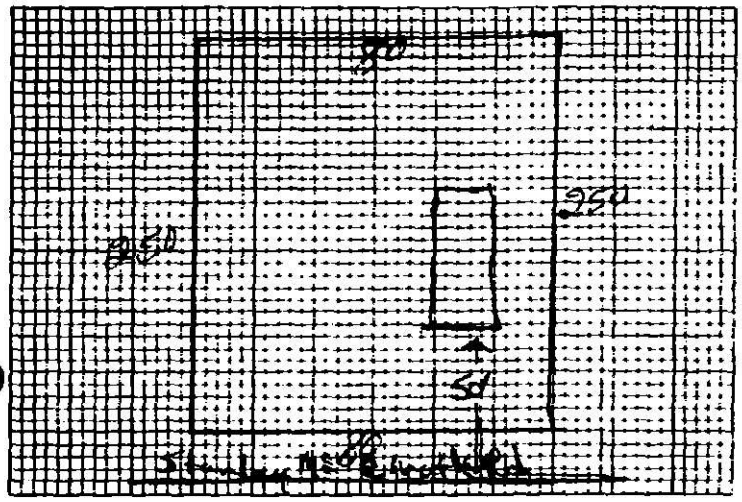
Map Date

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 ____ Yes ____ No

4) No of Bedrooms 3
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 Parsons (LAST) Clifford (FIRST) C (MIDDLE)

14) ADDRESS OF OWNER 7101 Allenwood Rd

15) PHONE NO. Home [illegible] Office 3328958

16) LOCATION OF SYSTEM 6705 Sterling McGrath Rd (STREET OR COUNTY ROAD)

17) SUBDIVISION ____ Lot No. 18 Block No. ____

Map Book No. ____ Page No. ____

18) DEED REFERENCE — DEED BOOK 4954 AT PAGE 0832

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ____ NO DATE RUN 2-13-85

20) PTR NUMBER (See Instructions) 21761

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.

2/17/85
DATE OF APPLICATION

Clifford C Parsons
OWNER

ENO-S-76

Environmental Health Department's Copy

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21761

T.C. NO. [illegible]

(Ground Absorption Sewage Disposal)

OWNER: Clifton E. Powers
ADDRESS: 1120 Plymouth Road Charlotte, N.C. 28214
PLAT NO: [illegible]
LOT SIZE: [illegible] C.46
LOCATION OF SITE: 6705 Stanley McClintock Road

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS 2 8% U	S PS Complex (U) Old Terrace	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) 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 inches)	S (PS) Blocky U	S PS — U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) 36 40" U	S PS — U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) 32-36" U	S PS — U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S 7-36" To (PS) ground U water	S Very rolled PS runoff (U) water	S PS U	S PS U
7. OTHER (Specify)	S Area PS Limited U	S PS U	S PS U	S PS U
8. SOIL GROUP	A			
9. SITE CLASSIFICATION	[illegible]	[illegible]		
10. SOIL SERIES	[illegible]	Old Terrace		

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, slopes)

Recommendations/Comments: _____

Described by: William A. Martin
Title: Soil Scientist

Date: 2-12-85

Mecklenburg County

Department Of Building Standards And Code Enforcement

P. O. Box 31697

Charlotte, North Carolina 28231-1697

Environmental Health Department
1200 Blythe Boulevard
Charlotte, North Carolina 28203

Attention: Mr. Sexton

Subject: Mobile Home Placement

Dear Mr. Sexton:

The parcel of land located at 16705 STANLY McELRATH RD and further identified by tax parcel number 047-201-07 P.O. is zoned RU (RURAL). Jul 18

Permitted uses in this district include: Mobile Homes ON INDIVIDUAL LOTS.

If this office can be of further assistance, please contact us.

Sincerely,

R. L. Caldwell
Zoning Inspector

Form B-152 NS
59/bbb

Serial No. 6065

SIR No. 21761

T. C. No. PO 007-201-07

Date Issued 2-13-85

Map Date L

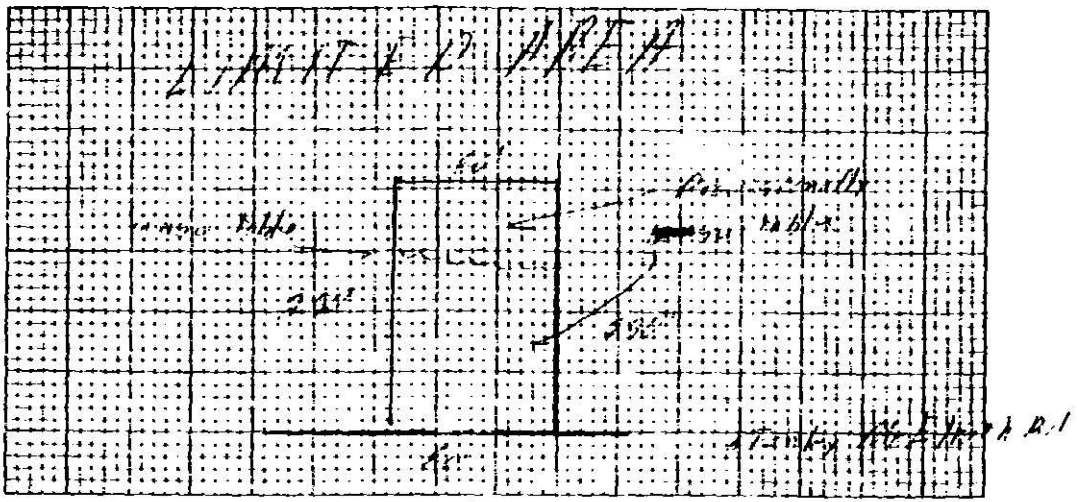
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Parsons, (LAST) Clifford (FIRST) C. (MIDDLE)

ADDRESS OF OWNER 11200 Albemarle Rd., Charlotte, NC ZIP 28212

LOCATION OF PROPERTY 16705 Stanley McElrath Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 18 BLOCK NO.



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 [illegible] after a review of the plot plan [illegible] obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction activities [illegible] the wastewater treatment system on the lot.
2. The size of the septic tank, wastewater treatment system and the [illegible] will be determined by the Mecklenburg County Department of Environmental Health prior to the issuance of the permit. The rate obtained above and on the size and type of building constructed thereon.
3. This approval [illegible] the system [illegible] area indicated is acceptable for system installation on the above lot.
4. This approval [illegible] wells performed on the of which [illegible] and indicated as acceptable for system installation [illegible]

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 S. Mullin
Soil Scientist

Dale D. [illegible]
Environmental Health Director or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

Date Received 1-9-85

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ENVIRONMENTAL HEALTH

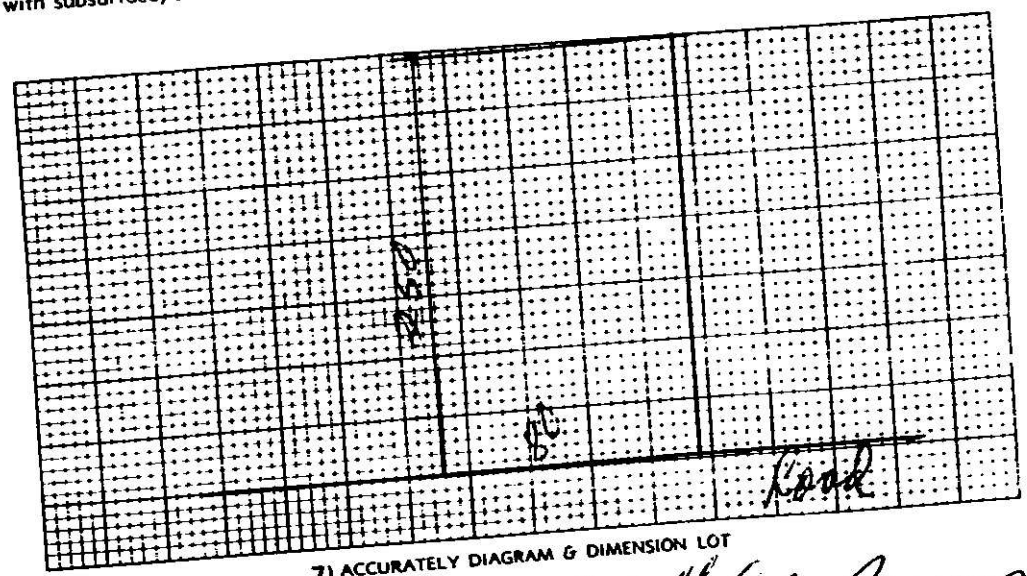
SIR No. 21761
T.P. No. 007-201 07
Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Parsons (LAST) Clifford (FIRST) C (MIDDLE)
2) ADDRESS OF OWNER 11200 Albemarle Rd ZIP 28212
3) PHONE NO. Home 545-6302 Office 3328958
4) LOCATION OF PROPERTY 16705 Stanley McElrath Rd (STREET OR COUNTY ROAD)
5) SUBDIVISION _____ LOT NO. 18 BLOCK NO. _____
MAP BOOK NO. _____ PAGE NO. _____
6) DEED REFERENCE DEED BOOK _____ PAGE NO. _____

Appiication is hereby mode 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

C Clifford C Parsons
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY