Date Received 3-1-84

MECK COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH RECEIVED

SIR No. 20679
PO
T. C. No 231-111-64
Map Date 8/83

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Providence Woods, Inc.
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER 7740 E Independence Blvd. Charlotte, N.C. 28205
(ZIP)

3) PHONE NO. Home — Office 704-372-2565

4) LOCATION OF PROPERTY Amanda Dr.
(STREET OR COUNTY ROAD)

5) SUBDIVISION Providence Woods LOT NO 5 BLOCK NO. II

MAP BOOK NO _____ PAGE NO _____

6) DEED REFERENCE DEED BOOK 4571 PAGE NO 693-694

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation and on 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

Please see attached map

7) ACCURATELY DIAGRAM & DIMENSION LOT

J. P. Norman
OWNER Agent

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20699

T.C. NO. PO 231-11-04

(Ground Absorption Sewage Disposal)

OWNER: Providence Woods, Inc.
ADDRESS: 1940 E. Dale Blvd
Charlotte, N.C. 28205
LOCATION OF SITE: Amanda Drive

PLAT NO: Lot 3 BV
LOT SIZE: Approx 51,000

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS 2-10% U	S PS Complex Slopes U	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 Clay U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S PS Blocky U	S PS Blocky U	S PS U	S PS U
4. SOIL DEPTH (inches)	S PS 36-48" U	S PS <36" U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S >36" PS U	S PS <36" U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S >48" PS To ground water U	S Eroded PS Areas U Channel runoff	S PS U	S PS U
7. OTHER (Specify)	S PS System may need pump U	S + Drainage PS Easement U	S PS U	S PS U
8. SOIL GROUP	11A	11A		
9. SITE CLASSIFICATION	Provisionally Suitable	Unsuitable		
10. SOIL SERIES	Creek Little	Complex Slopes + Drainage Easement		

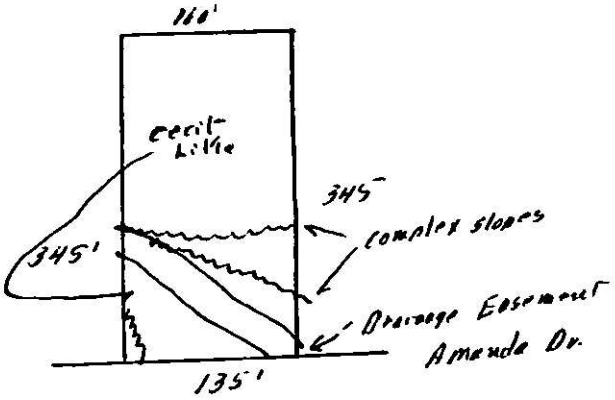
S - Suitable PS - Provisionally Suitable U - Unsuitable

**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: System may need pump

Described by: William R. Martin
Title: Soil Scientist

Date: 4-3-84


110'
Cecil Lane
345'
345'
complex slopes
Drainage Easement
Amanda Dr.
135'

Serial No. 5571

SIR No. 20679

T C No. PO 231-111-04

Date Issued 4-6-84

Map Date

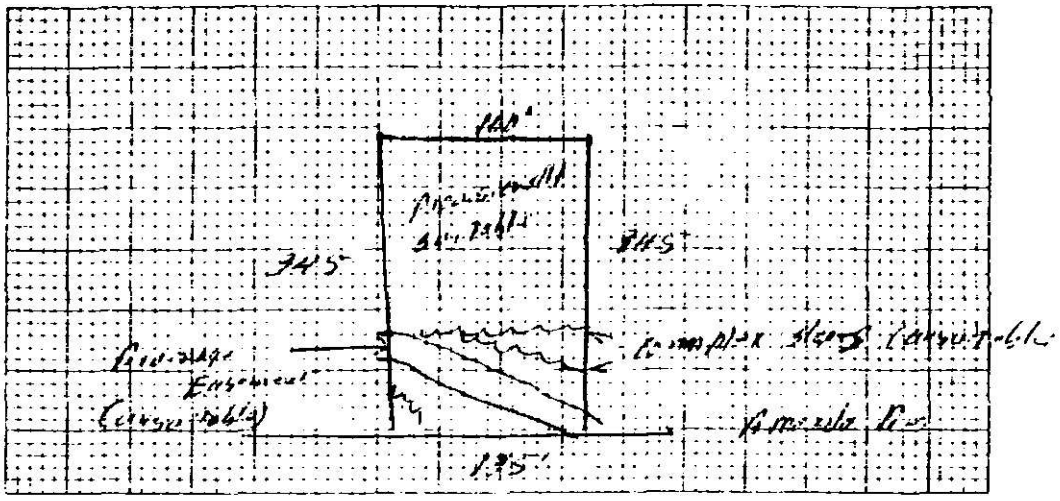
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Providence Woods, Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER 1740 E. Independence Blvd., Charlotte, NC ZIP 28205

LOCATION OF PROPERTY Amanda Dr.
STREET OR COUNTY ROAD

SUBDIVISION Providence Woods LOT NO 5 BLOCK NO 5



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 soil 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 [illegible] 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 [illegible] be obtained from the Mecklenburg County Department of Environmental Health [illegible] 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 [illegible] above and on the size and type of building [illegible]
3. This approval [illegible] system installation on the above plot.
4. [illegible] on the lot which in the [illegible] Mecklenburg County Department of Environmental Health [illegible] 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 A. Martin
Soil Scientist

Bill D. Hardister
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department

SEE INSTRUCTIONS ON BACK

Date Received 4-4-85

RECEIVED

ENVIRONMENTAL HEALTH

CAR(S) Application No. 20679 x

T. C. No. Po 231-111-04

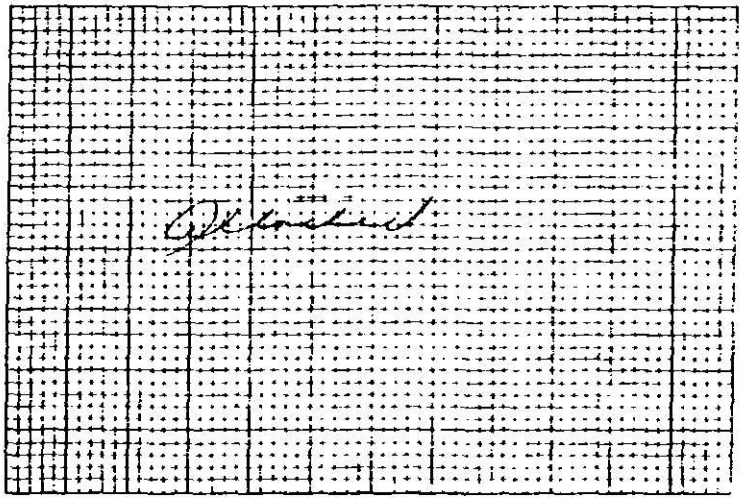
Map Date L

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 X Yes ___ No
4) No of Bedrooms 3
5) Business Use — Max No Employees ___
6) Washing Machine X Yes ___ No
7) Garbage Disposal X Yes ___ 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 MacTaggart (LAST) William (FIRST) Gunlan (MIDDLE)

14) ADDRESS OF OWNER 229 Furrow Dr., Matthews, NC

15) PHONE NO. Home 847-7808 Office 552-7946

16) LOCATION OF SYSTEM 733 Amanda Dr., Matthews, NC (STREET OR COUNTY ROAD)

17) SUBDIVISION Providence Woods Lot No. 5 Block No. 5

Map Book No. 20 Page No. 776

18) DEED REFERENCE — DEED BOOK 4982 AT PAGE 0879

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES ___ NO DATE RUN 4-6-84

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.

4-4-85
DATE OF APPLICATION

William MacTaggart
OWNER

EHD-5-76

Serial No. 8379

SIR No. 20679

Date Issued 4-9-85

T. C. No. PO 231-111-04

Map Date L CRT

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 MacTaggart, (LAST) William (FIRST) Quinlan (MIDDLE)

ADDRESS OF OWNER 629 Furrow Dr., Matthews, NC ZIP 28105

LOCATION OF LOT 733 Amanda Drive (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO 5 BLOCK NO. V

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 20679. 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.

*** LIFT STATION MAY BE REQUIRED ***

Cynthia C. Bass
Environmentalist

Environmental Health Director, or Authorized Section Head

END-5-76

Environmental Health Department's Copy

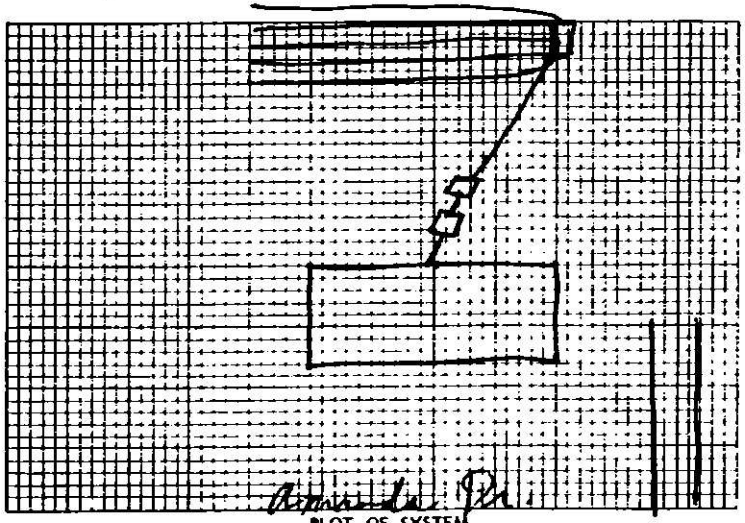
Date Issued 9-26-85

Serial No. 08533

ICAR (S) Permit No. 20679
T.C No 231-111-04
Map Date 1

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 20679 dated 9-4-85 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 10-26-85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate P.P.

Liquid Capacity of Tank 1500 + 1000

Tank Construction Pcc

Absorption and/or Nitrification Lines

Total Line Length 400'

Number of Lines 5

Distance from House 5'

Distance from Property Line 10'

Distance from Well not in use 100'

NAME OF OWNER William Mac Taggart

LOCATION OF PROPERTY 733 Amanda 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.

5 lines 3'X80'X12" stone

Comments:

B. Houston
Division or Section Head

B.R. Ferguson
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

C of A (s) No 20679

Date Issued 3-28-86 **Serial** 8392 T. C. No 231-111-04 PI L CKT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

OPERATION PERMIT

CERTIFICATE OF APPROVAL

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

Name of Owner Mac Taggart (LAST) William (FIRST) _____ (MIDDLE)

Location of Property 733 Amanda Dr.

Application Number — Permit Number —

Inspection Data:

Liquid Capacity of Tank 1500 + 1000 Tank Material PCC

Total Length of Drain Tile 400' Number of Lines 5

Depth of Filter Material 12" Cover Depth 15"-20"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 3-28-86 (DATE) Tank Inspected 3-28-86 (DATE)

Nitrification Field Inspected 3-28-86 (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 1952, 1500 ST 1000 DT, PI, TCH, 1200 SFT, 12 E, Cecil

B. R. Ferguson
Environmentalist

EHD-5-76

Environmental Health Department Copy