Date Received 7-5-73

APT No 5930

T. C No 213-13-10

Map Date 2-14-73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

Mail to: Richard Turner Rd. 6010 Monroe 28112

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER FINGER (LAST) JON (FIRST) Robert (MIDDLE)

2) ADDRESS OF OWNER 114 Springway Dr, Concord, N.C. ZIP 28025

3) PHONE NO Home 786-1763 Office SAME

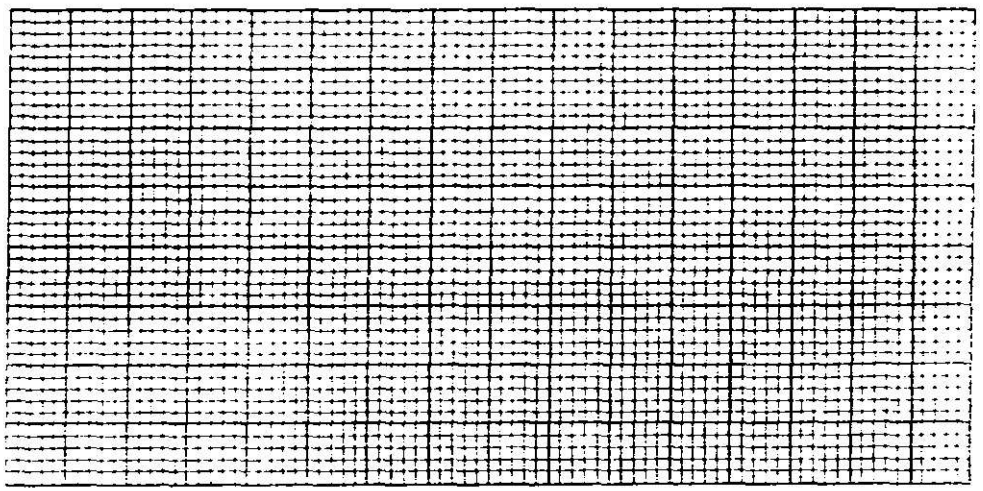
4) LOCATION OF PROPERTY Beverly Circle (STREET OR COUNTY ROAD)

5) SUBDIVISION Sardis Beverly Park LOT NO 10 BLOCK NO B

MAP BOOK NO 8 PAGE NO. 161

6) DEED REFERENCE DEED BOOK [redacted] PAGE NO. [redacted]

Application is hereby made to the Mecklenburg County Health Department for the conduct of a percolation test 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

OWNER Jon R. Finger

FORM NO. E-1-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 2169

PTR No 5930

T.C No. 213-113-10

Date Issued April 25, 1973

Map Date 2-14-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

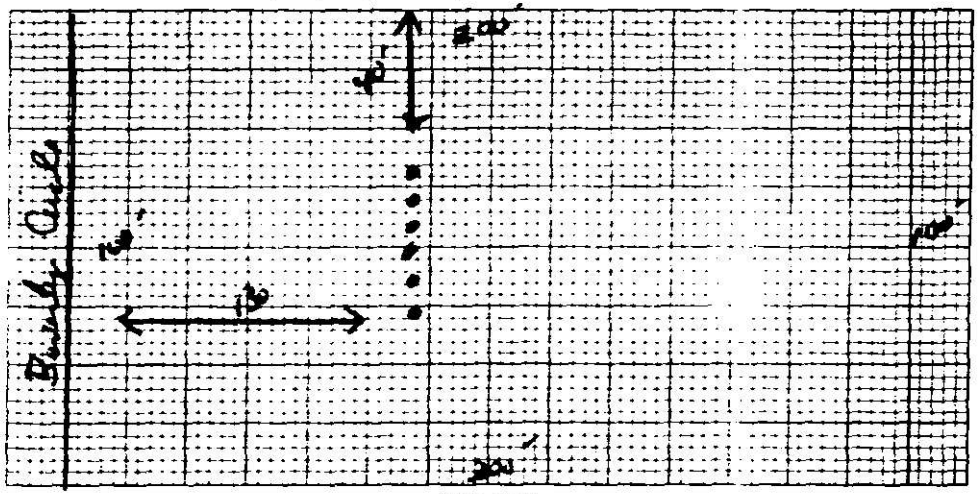
PERCOLATION TEST REPORT

NAME OF OWNER Finger (LAST) Jon (FIRST) Robert (MIDDLE)

ADDRESS OF OWNER 114 Springway Dr., Concord, N.C. ZIP 28025

LOCATION OF PROPERTY Beverly Circle (STREET OR COUNTY ROAD)

SUBDIVISION Sardis Beverly Park LOT NO 10 BLOCK NO B



PLOT PLAN

This is to certify that a percolation test has been run and an on-site inspection made by the Mecklenburg County Health Department on the lot described above. The said test was conducted on that portion of the lot as indicated on above plot

The percolation rate determined by the test was 60 min/in 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 Health Department 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 Health Department prior to installation based on the percolation 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 where the percolation test was run.
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 Health Department, renders the area where the percolation test was run unsuitable for the 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 State Board of Health and the Mecklenburg County Board of Health which were in effect on the date of issuance and is void if at any time in the future, prior to the 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.

John R. Robinson

Director, Environmental Health Division or Authorized Section Head

FORM NO E-2-4-1-71

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 2-28-74

ICAR (S) Application No 5930

T C No 213-113-10

Map Date 2-14 73

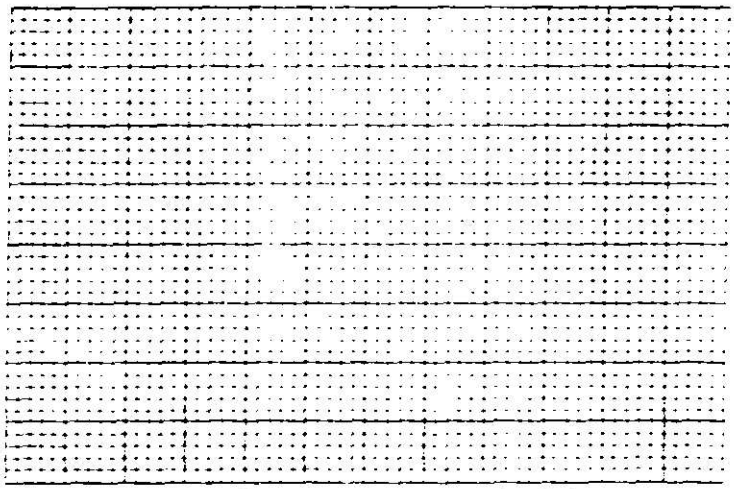
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 Health Department 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 No of Bedrooms 2 ___

5 Business Use Yes ___ No ___
Employees ___

6 Washing Machine Yes ✓ No ___

7 Garbage Disposal Yes ___ No ✓

8 Dishwasher Yes ✓ No ___

9 Water Supply
A Individual Well ✓
B Government ___
C Community System
1 Well ___
2 Government ___

Sewage System
Is there a public sewer within 200 feet of property? Yes ___ No ✓
Is there a community sewer within 200 feet of property? Yes ___ No ___

11 EHA Case No N/A

12 LA Case No N/A

13) NAME OF OWNER C.R. TURNER (LAST, FIRST, MIDDLE)

14) ADDRESS OF OWNER 6010 Monroe Rd.

15) PHONE NO Home 537-0702 Office ___

16) LOCATION OF SYSTEM Beverly Circle (STREET OR COUNTY ROAD)

17) SUBDIVISION Sardis Beverly Park Lot No. 10 Block No B

Map Book No 213 Page No. 11

18) DEED REFERENCE — DEED BOOK 8 AT PAGE 161

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ___ NO DATE RUN 4 73 PR>60

20) PTR NUMBER (See Instructions) 5930

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.

2-27-74
DATE OF APPLICATION

C. R. Turner
OWNER

FORM NO E-4-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3868

LA No 5930

Date Issued February 28, 1974

T. C. No. 213-113-10

IMPROVEMENTS PERMIT

Map Date 2-14-73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Turner (LAST) C. (FIRST) R. (MIDDLE)

ADDRESS OF OWNER 6010 Monroe Road ZIP

LOCATION OF LOT Beverly Circle (STREET OR COUNTY ROAD)

SUBDIVISION Sardis Beverly Park LOT NO 10 BLOCK NO B

MAP BOOK NO PAGE NO

The above specified lot is approved by the Mecklenburg County Health Department for the installation of an individual septic tank system with subsurface, soil absorption effluent discharge based on the percolation test results which yielded a percolation rate of 60 min/in 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 5930. 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 percolation test 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

John R. Atkisson

Director, Environmental Health Division or Authorized Section Head

FORM NO E-3-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 4951 ICAR(S) Permit No. 5930

Date Issued 11-[illegible]-74

T C No 213-413-10

Map Date 14-[illegible]-73

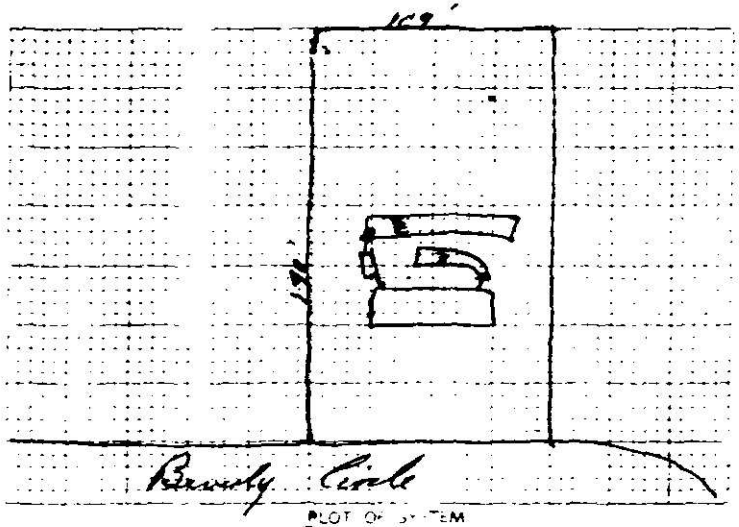
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 5930, dated 28-[illegible]-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 11-[illegible]-74 after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 1500

Tank Construction FC

Absorption and/or Nitrification Lines

Trench Length 600' +150' WM 3 (75' +50' +17')

Number of Lines 6 (5'x50'+36")

Distance from House 15'

Distance from Property Line 10'

Distance from Well 75'

NAME OF OWNER [illegible]

LOCATION OF PROPERTY 3601 Beverly Circle (Lot 10 - Block A)

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used.

Comments Septic (Conte)

Division or Section Head

M. D. Easley
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 Environmental Health Division in order to be valid. Only the signature of the Environmental is required where an existing system is being altered or repaired.

Form No. E-S-9-1-72

HEALTH DEPARTMENT'S COPY

Serial 4571

C of A (s) No. 5930

Date Issued 18 Mar 74

T. C No 213-113-10

Map Date 4 Jul 73

CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Lemmon, C. E. (LAST, FIRST, MIDDLE)

Location of Property 360 Beverly Circle

Application Number 5930 Permit Number 5930

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PC

Total Length of Drain Tile 600'+150'=750' Number of Lines 6 (75'x3') 3 (75'x50'x17")

Depth of Filter Material 12" Cover Depth 18-24"

Water Supply Source Drilled Well Distance from Water Source 100'

Excavation Inspected 18 Mar 74 (DATE) Tank Inspected 18 Mar 74 (DATE)

Nitrification Field Inspected 18 Mar 74 (DATE)

Washing Machine Line Inspected, If Applicable 18 Mar 74 (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 Board of Health 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: Maple (Center)

Environmentalist

FORM NO. E-6-4-1-71

HEALTH DEPARTMENT'S COPY