Date Received 3/8/79

APT No. 15224

T. C. No. 215-131-15,

Map Date 11+18

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER RALPH SQUIRES CONST. CO. INC.

2) ADDRESS OF OWNER (LAST) PO Box 25178 (FIRST) (MIDDLE) ZIP 28212

3) PHONE NO. Home _____ Office 537-9553

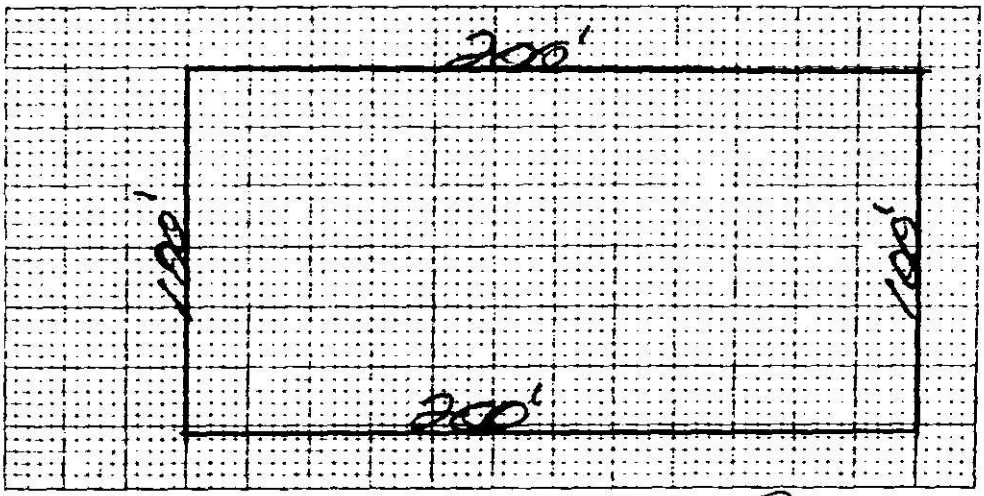
4) LOCATION OF PROPERTY CAVALRY DR. (STREET OR COUNTY ROAD)

5) SUBDIVISION Windrow LOT NO 37 BLOCK NO. L

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 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

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

S.I.R. No. 15224

(Ground Absorption Sewage Disposal)

OWNER: Ralph Squires Const. DATE REQUESTED:
ADDRESS: Po Box 25178 PLAT NO.: PO 215-131-15, 16,
COUNTY: Charlotte, N.C. 28212 LOT SIZE: 20,000
LOCATION OF SITE: Caraway Dr.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS U 2-8%	S complex PS slopes (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) clay U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 in.) (Clayey Soils)	S (PS) Blocky U	S (PS) Blocky U	S PS U	S PS U
4. SOIL DEPTH (In.)	(S) PS 48" U	S Depth PS variable (U)	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock)	(S) None PS U	(S) None PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) >6' To PS ground U water	S Eroded PS Area Channels (U) water	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) Moderate U	S (PS) Moderate 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	unsuitable		
SOIL SERIES	Cecil	Eroded, complex slopes		

S - Suitable PS - Provisionally Suitable U - Unsuitable

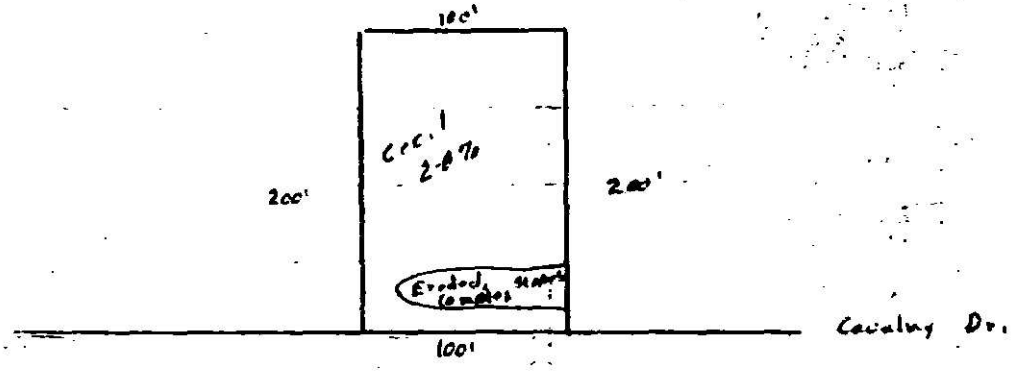
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns)

Recommendations/Comments:

Described By: William A. Martin

Title: Soil Scientist Date: 4-3-74

dhs form 2601 (1/79)
Sanitation


100'
Lot 1
2.0 ac
200'
200'
Existing
Cavalry Dr.
100'

Serial No. 2672

PTR No. 15224

T. C. No. 215-131-15,16 & 18

Date Issued 4-6-79

Map Date

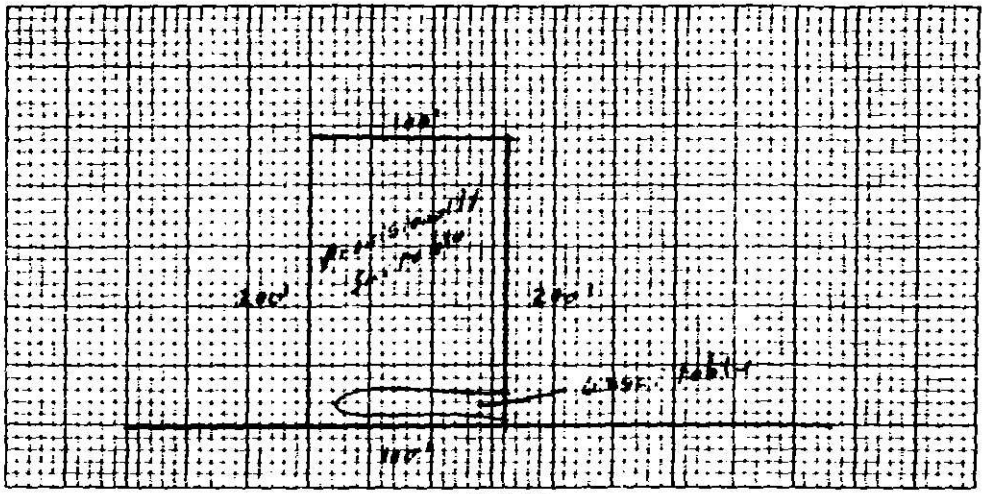
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Ralph Squires Construction Co., Inc.
(LAST FIRST MIDDLE)

ADDRESS OF OWNER P. O. Box 25178 ZIP 28212

LOCATION OF PROPERTY Cavalry Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Windrow LOT NO. 37 BLOCK NO. L



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, construct, alter, or repair the specific system shall be obtained from the Mecklenburg County Department of Environmental Health 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 Mecklenburg County Department of Environmental Health prior to installation based on the permeability 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 indicated as acceptable for system installation on the above plot.
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 Mecklenburg County Department of Environmental Health, renders the area indicated as acceptable for system installation unsuitable for 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 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
EHD-5-76 Soil Scientist

Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

R

Date Received 8/21/79

ICAR(S) Application No. 15224

T. C. No. 02215-131-15, 16, 18

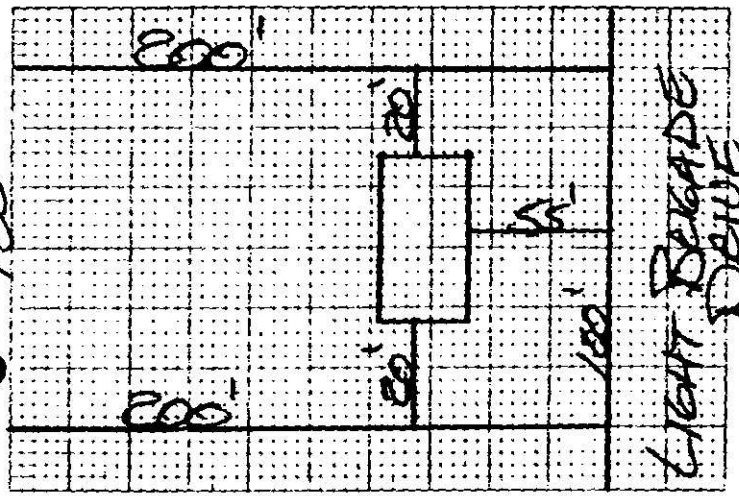
Map Date _____

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)

4) Mobile Home ____ Yes ____ No
Residence ✓ Yes ____ No

5) No. of Bedrooms 4

6) Business Use — Max No. Employees ____

7) Washing Machine ✓ Yes ____ No

8) Garbage Disposal ✓ Yes ____ No

9) Dishwasher ✓ Yes ____ No

10) Water Supply
A) Individual Well ✓
B) Governmental System ____
C) Community System.
1 Well source ____
2 Governmental source ____

11) Sewage System
House located within 200 feet of public sewer ____ Yes ✓ No
House located within 200 feet of community sewer ____ Yes ✓ No

12) FHA Case No. ____

13) VA Case No. ____

13) NAME OF OWNER Ralph Squires Const. Co., Inc.
FIRST MIDDLE

14) ADDRESS OF OWNER PO Box 25178

15) PHONE NO. Home _____ Office 537-9553

16) LOCATION OF SYSTEM LIGHT ~~BAGPIPE~~ DRIVE
STREET OR COUNTY ROAD

17) SUBDIVISION Windlow II Lot No. 37 Block No. L

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____ A.S.

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ____ NO DATE RUN 4/4/79

20) PTR NUMBER (See Instructions) 15224

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.

8-21-79
DATE OF APPLICATION

OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received _____

ICAR(S) Application No. 15224

T. C. No. 215-131-15 P.U.

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)

4) Mobile Home ____ Yes ____ No
Residence ✓ Yes ____ No

4) No of Bedrooms 4

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 The Ralph Squires Co (LAST / FIRST / MIDDLE)

14) ADDRESS OF OWNER P.O. Box 25178

15) PHONE NO. Home _____ Office 537-9553

16) LOCATION OF SYSTEM 8417 Light Bicycle Drive (STREET OR COUNTY ROAD)

17) SUBDIVISION Windsor II Lot No. 37 Block No. 2

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ____ NO DATE RUN 4/4/79 P.S.

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.

11/23/79
DATE OF APPLICATION

Mitch Bass
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 3420

LA No. 15224

Date Issued August 21, 1979

T. C. No. po 215-131-15,16,18

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

IMPROVEMENT PERMIT

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

NAME OF OWNER Ralph Squires Const. Co.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER PO Box 25178, Charlotte ZIP 28212

LOCATION OF LOT Light Brigade Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Windrow II LOT NO. #37 BLOCK NO. "L"

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. 15224 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.

Steve Wood
Environmentalist

John R. Johnson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued 23 Nov 79

Serial 3451

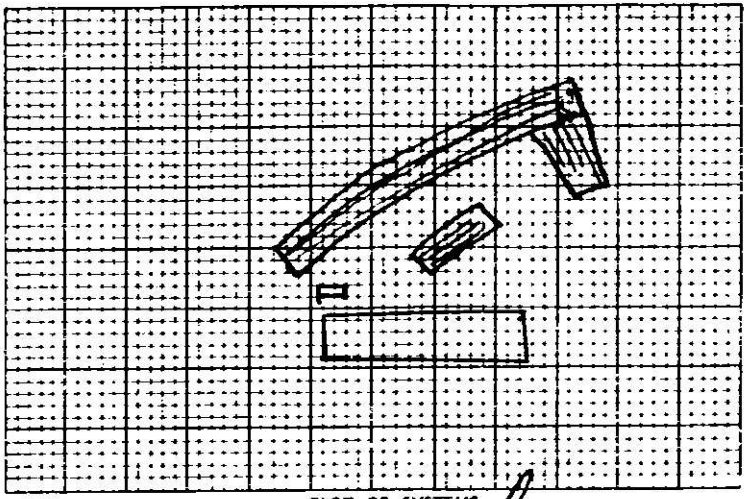
ICAR(S) Permit No. 15224

T. C. No. 215-131-16

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 15224, dated 8/21/79 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 8/21/79, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500 gal

Tank Construction P.C. Conc.

Absorption and/or Nitrification Lines

Total Line Length 495' ; 125'

Number of Lines 5 ; 4

Distance from House 10'

Distance from Property Line 10'

Distance from Well 50'

NAME OF OWNER Ralph Squires Comp

LOCATION OF PROPERTY 2417 Light Brigade 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.

(15'x99'x17") (12'x32'x17")

Division or Section Head

Environmentalist Steve Wood

* 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 11-30-79 Serial 3294 C of A (s) No 15-2324

T. C. No 15-131-16

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: Ralph Squires Co. (LAST / FIRST / MIDDLE)

Location of Property 2417 Light Brigade DR.

Application Number 15224 Permit Number 15224

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material P/C

Total Length of Drain Tile 495-125' Number of Lines 5-4

Depth of Filter Material 17" Cover Depth 24"-

Water Supply Source Well Distance from Water Source 50'+

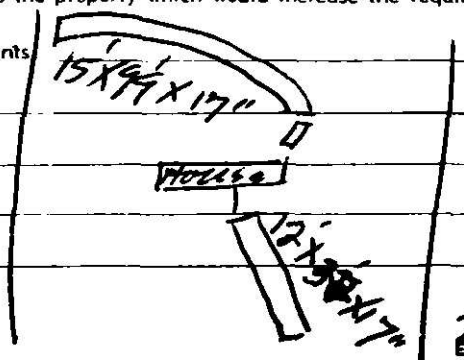
Excavation Inspected 11-30-79 (DATE) Tank Inspected 11-30-79 (DATE)

Nitrification Field Inspected 11-30-79 (DATE)

Washing Machine Line Inspected, If Applicable 11-30-79 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent dischorge 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:



Environmentalist

EHD-5-76

Light Brigade DR.

Environmental Health Department's Copy