Date Received 12-21-83

DEC 21 1983
ENVIRONMENTAL HEALTH

SIR No. 20418
T.P.No. 135-311-04

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Holton (LAST) A. (FIRST) L. (MIDDLE)

2) ADDRESS OF OWNER 5817 Lebanon Road, Mint Hill, NC ZIP 28212

3) PHONE NO. Home 545-9933 Office 289-9421

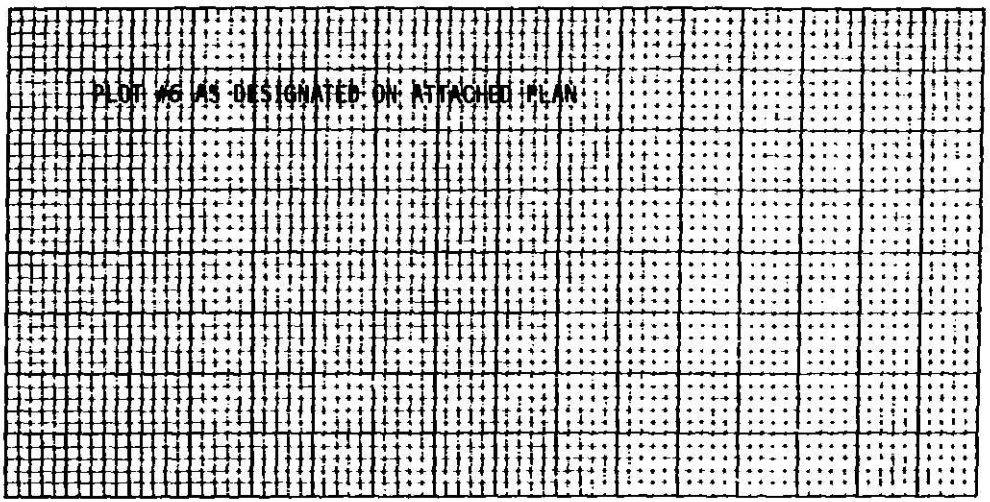
4) LOCATION OF PROPERTY East side of Lebanon - across from Birdie Court lying between T. F. Helms, Jr. (3107-7) and Southern Builders Corp. (4462-040) and as designated on attached preliminary plan.

5) SUBDIVISION _____ LOT NO. 6 BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. _____

6) DEED REFERENCE: DEED BOOK 1012 PAGE NO. 235
Tax Parcel No. 135-312-04

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

NOTE: Soil test signs up...each lot is staked at a point in approximately the center of plot. Weeds are cut for easy access.

_____
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1000 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203

SIR. NO. 20418
T.C. NO. P0.135-311-04
DATE: 1-11-84

Zula Cochrane
% Billy Cochrane
Route 3, Box 344
Statesville, NC 28677

Re: Property located at Off Lebanon Road, Lot 6

Dear Ms. Cochrane:

At your request, a field investigation was conducted on the property designated above. The soils on the property were found to contain a limited area of provisionally suitable soil for the installation of a ground absorption sewage disposal system. A copy of the site evaluation report is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit plot plans for the proposed construction, well, and ground absorption sewage disposal system to this office. They will be reviewed and if it is found that there is an adequate area of provisionally suitable soil to accommodate the proposed installation, an Improvements Permit will be issued by this office.

If I may be of assistance, please feel free to call.

Sincerely,

Bill D. Hardister, Jr.

Bill D. Hardister, Jr.
Environmental Health Supervisor

BDH/kbg

Enclosure

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20 418

T.C. NO. PO 135-31104

(Ground Absorption Sewage Disposal)

OWNER: Jack Cochran - Billy Cochran PLAT NO: Lot #6
ADDRESS: Rt 3, Box 344 Statesville N.C. 28677 LOT SIZE: 32,600
LOCATION OF SITE: off Jetton Road

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) 2 @ 6 PS U	(S) 2-6% PS 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 2-1 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 48" (U)	S PS 18-30" (U)	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	(S) 48" PS U	S 130" PS To ground water (U)	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	(S) 48" PS To ground water U	S (PS) 36" To ground water U	S PS U	S PS U
7. OTHER (Specify)	S see PS Note U	S PS U	S PS U	S PS U
8. SOIL GROUP	10A	10B		
9. SITE CLASSIFICATION	Provisionally Suitable	unsuitable		
10. SOIL SERIES	Cecil-Like	Enon-Like		

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)

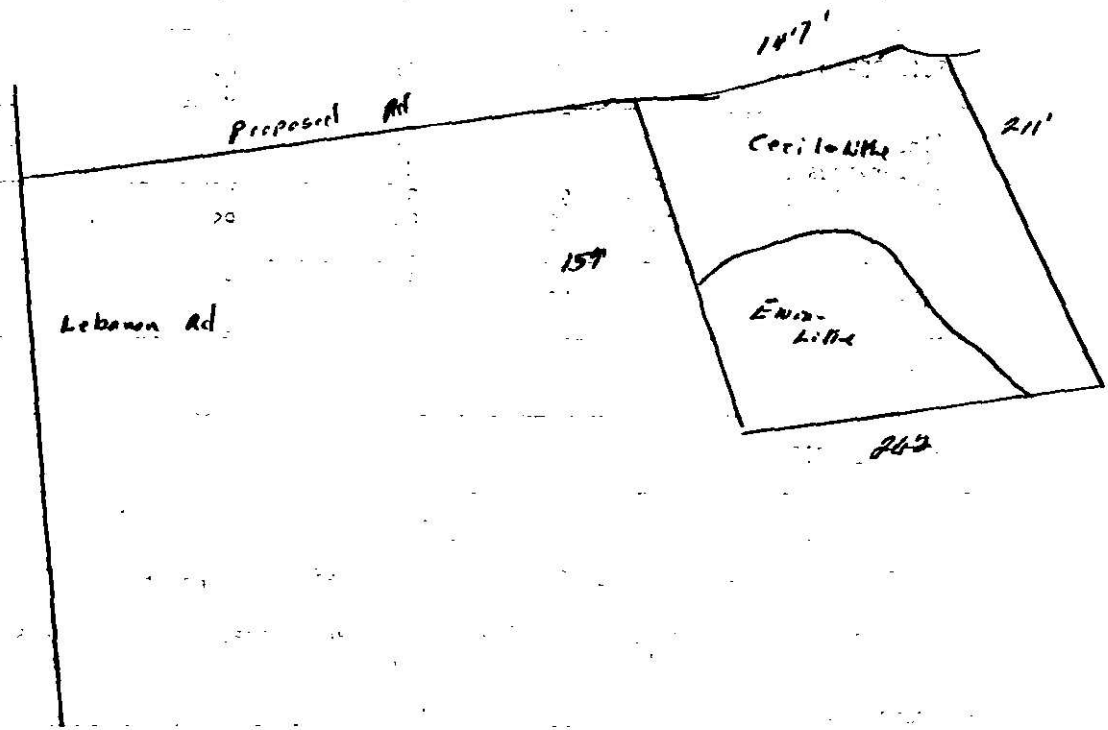
Recommendations/Comments: Somewhat limited area- system may need lift station: recommend plans for house, system, & well locations be submitted

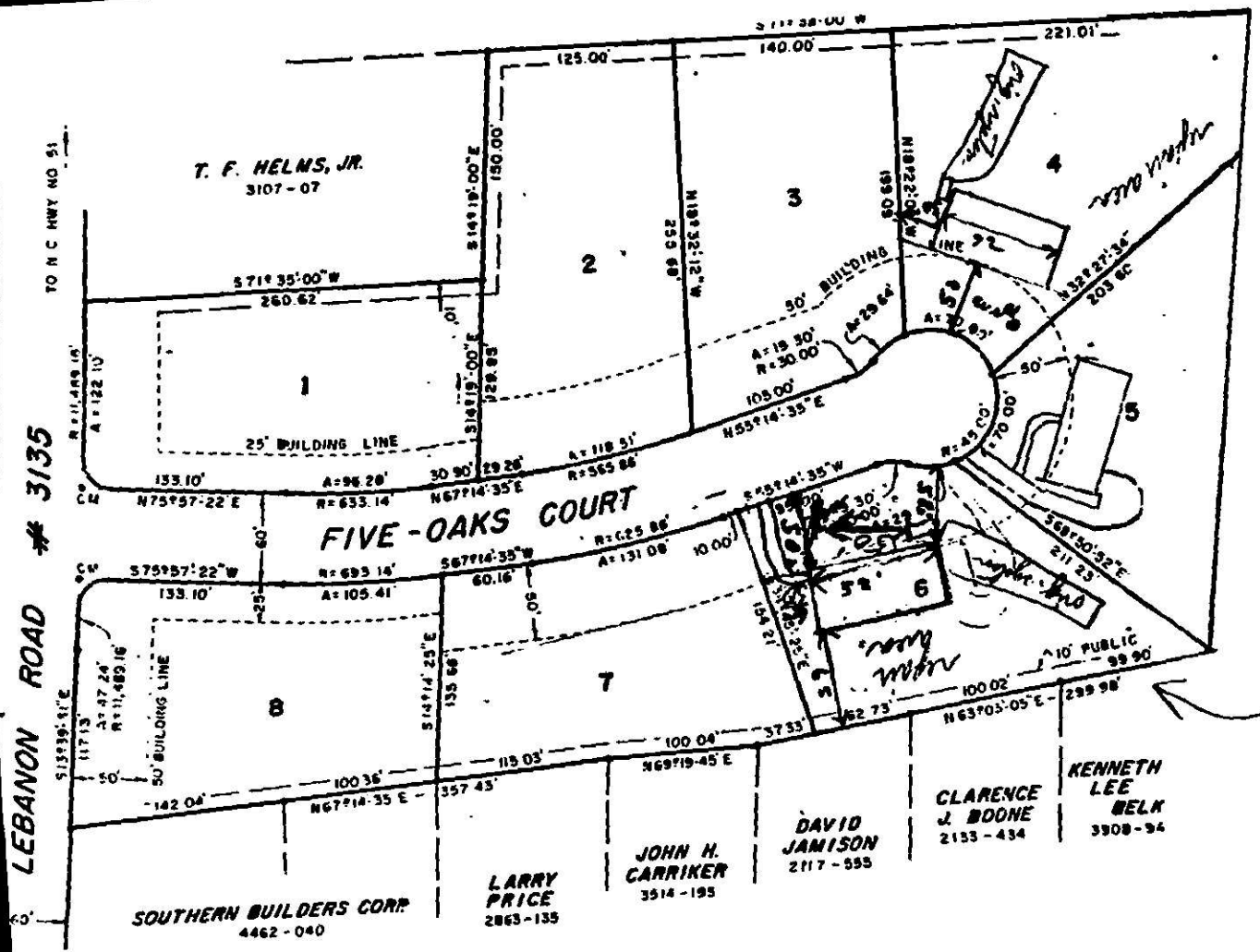
Described by: W. William Bridgers
Title: Soil Scientist

Date: 1-10-84

EHD 539 (Revised: 6/82)

1H


147'
Proposed Rd
211'
Cecil Hill
159'
Lebanon Rd
Ennis Hill
262'



File 20418
4015 Five Oaks Ct

Serial No. 9218

SIR No. 20418

Date Issued 1/3/86

T. C. No. 135-311-04 PO

Map Date L CK 7

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 W. K. Gladden Construction Co., Ltd.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 9925 Hannon Rd. ZIP 29212

LOCATION OF LOT 4015 Five Oaks Court
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO _____ 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 20418. 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.

D. R. Ferguson
Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

FILE: 20418

TC: 135-311-04 PO

JOB LOCATION

① ADDRESS: 4015 (STREET NO) Five Oaks Court (STREET) ② FILE: 20418

③ CITY: Charlotte ④ TAX PARCEL NO.: 135-311-04 PO

⑤ SUBDIVISION: A.L. Holton Subdivision ⑥ LOT: #6 ⑦ BLOCK: _____

OWNER

⑧ NAME: W.K. (FIRST) Gladden (MIDDLE) Const Co Ltd. (LAST)

⑨ MAILING ADDRESS: 9425 Hannon Rd.

⑩ CITY: Charlotte ⑪ STATE: N.C. ⑫ ZIP: 28212

⑬ PHONE: (WORK) 545-4718 ⑭ (HOME) _____

REQUEST

This request is for a(n):

⑮ ☑ New installation permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify) _____

DESIGN CRITERIA

System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? ~~three~~ 4 ㉕ Type? _____

㉓ Maximum occupancy? 8 ㉖ Maximum number of employees? _____

㉔ Basement? ☐ yes ☒ no ㉗ Maximum number of seats? _____

WATER SUPPLY

㉙ Water supply from (present or proposed):

A ☑ Individual well

B ☐ Municipal system

C ☐ Community well

D ☐ Community system

㉚ The undersigned, owner of the property described above as "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Mark Gladden

Date: _____

㉘ Accurately dimensioned plot

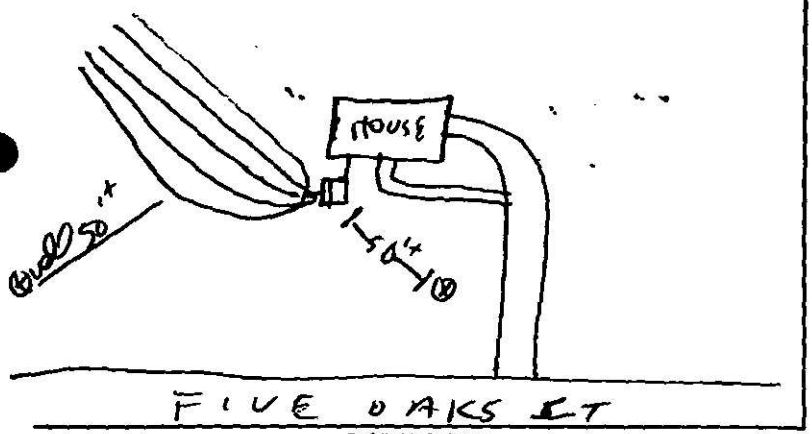
WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 20418 DATE: 9-12-06
TC: PO 135-311-04 pl
SERIAL № 10380

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 the application dated _____. All work shall be completed on or before 12-12-06, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Department of Environmental Health before any system can be covered up or placed into service. 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons
Liquid Capacity of Dosing Tank _____ gallons
Tank Construction PCC

Absorption and/or Nitrification Lines:
Trench Width 3 feet
Total Line Length 535 feet
Number of Lines 5
Depth of Stone 12 inches
Distance from House 5 feet
Distance from Property Line 10 feet
Distance from Well 50 feet

NAME OF OWNER W K GLADDEN CONST. CO.
LOCATION OF PROPERTY 4015 FIVE OAKS CT
Comments: 5 line x 107' long each x 3' wide x 12" rock

_____ 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.

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER OR AGENTS COPY

C of A (s) No. 20418

Date Issued 10-7-86 Serial 8837 T. C. No. 135-311-04

V ORT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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

Name of Owner W. K. GLADDEN CONST CO (LAST, FIRST, MIDDLE)

Location of Property 4015 FIVE OAKS CT

Application Number 20418 Permit Number 20418

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PVC

Total Length of Drain Tile 535 Number of Lines 5

Depth of Filter Material 12 Cover Depth 1

Water Supply Source well Distance from Water Source 50''

Excavation Inspected 10-7-86 (DATE) Tank Inspected 10-7 (DATE)

Nitrification Field Inspected 10-7-86 (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 1986, 1500 ST, CON, 1605 SFT, 12G, ELEC

Kelly Caudill
Environmentalist

EHD-5-76

Environmental Health Department's Copy