Date Received 8-12-83

APT No. 19944

T. C. No. 041-081-02

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Norris (LAST) Hazel (FIRST) (MIDDLE)

2) ADDRESS OF OWNER 1932 Slater Rd. ZIP 28216

3) PHONE NO. Home 399-5550 Office 568-9100

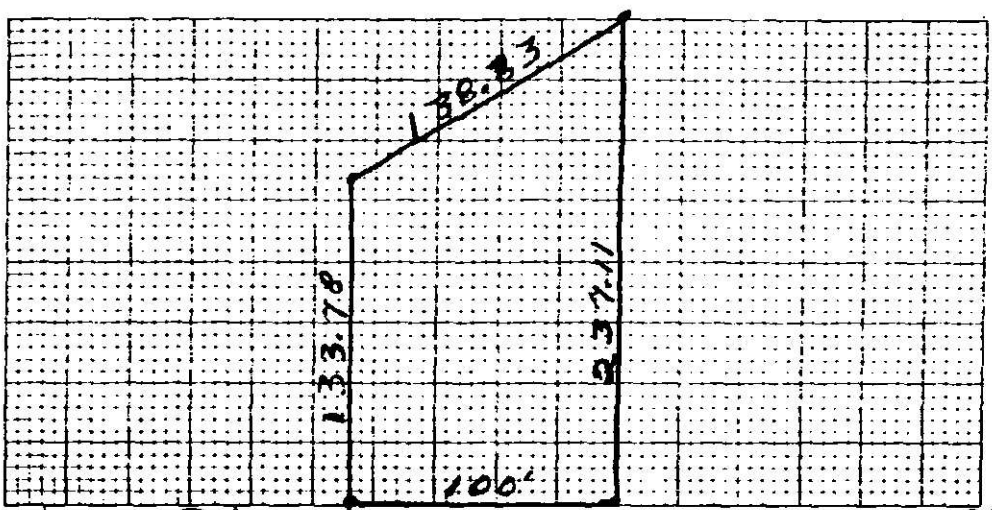
4) LOCATION OF PROPERTY 1924 Slater Rd. (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO _____ BLOCK NO. _____

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



Slater Rd. 7) ACCURATELY DIAGRAM & DIMENSION LOT

1309.4 Curtis 70

Hazel G. Norris
OWNER

EHD-S-76

Environmental Health Department's Copy

Serial No. 5165

SIR No. 19944

T. C. No. 041-081-02

Date Issued 8-16-83

Map Date

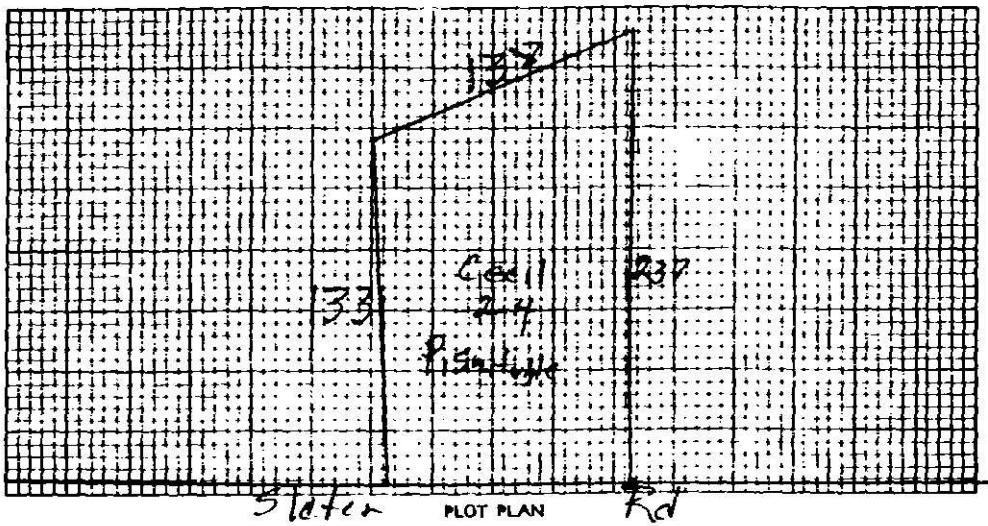
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Norris, Hazel
LAST FIRST MIDDLE

ADDRESS OF OWNER 1932 Slater Rd., Charlotte, NC ZIP 28216

LOCATION OF PROPERTY 1924 Slater Road
STREET OR COUNTY ROAD

SUBDIVISION LOT NO 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, construct, alter or repair the septic system shall be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction of building sewer or 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 or future 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.

W. B. Tapscott
Soil Scientist

Environmental Health Director or
Authorized Section Head

END-5-76

Environmental Health Department's Copy

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 19944

T.C. NO. 041-021-02

(Ground Absorption Sewage Disposal)

OWNER: Hazel Norris
ADDRESS: 1932 Slater Rd

PLAT NO:
LOT SIZE: 22,800 .53

LOCATION OF SITE: Slater Rd

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U — 2-4	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) U — Clayey	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) U — Blocky	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) U — 48"	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U — None	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) U — Adequate	S PS U	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IIa			
9. SITE CLASSIFICATION	Suitable			
10. SOIL SERIES	Cecil			

S - Suitable PS - Provisionally Suitable U - Unsuitable

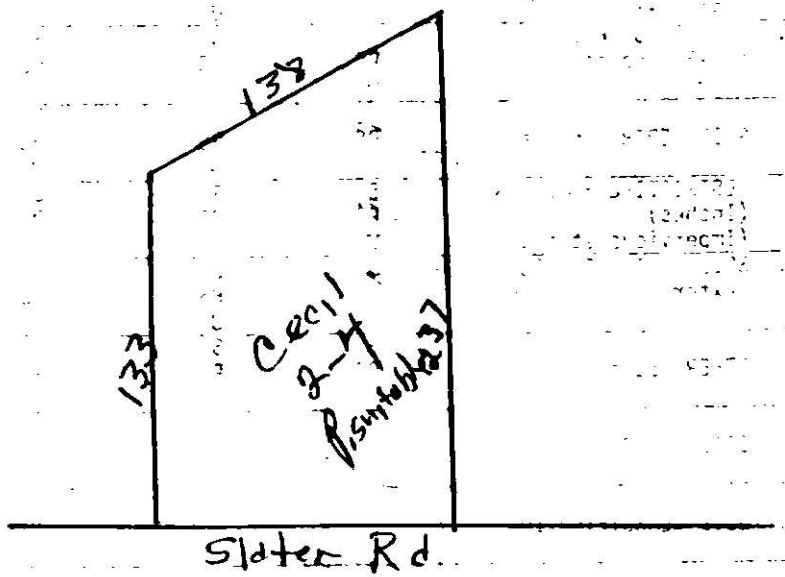
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: W B Rainey
Title: Sanitarian

Date: 2-15-83

EHD 539 (Revised: 6/82)


138
133
Cecil
2-4
Plymouth 37
Slater Rd.

Date Received 8-12-83

RECEIVED
AUG 12 1983
ENVIRONMENTAL HEALTH

INSTRUCTIONS ON BACK

ICAR(S) Application No. 19944

T. C. No. 041-081-02

Map Date _____

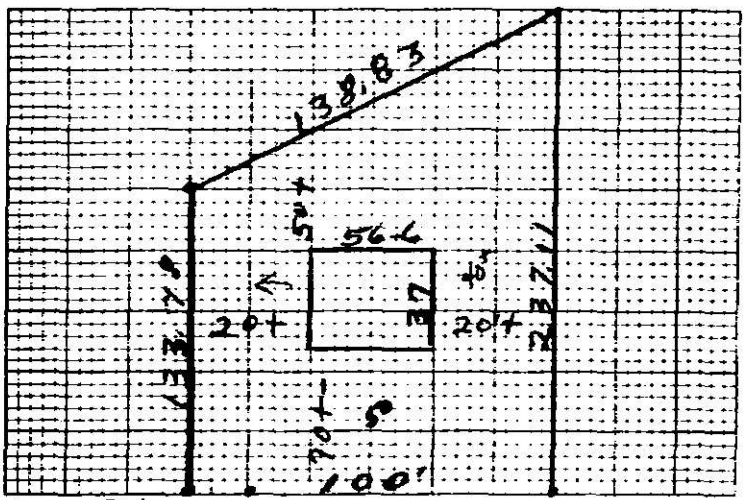
MECKLENBURG COUNTY HEALTH DEPARTMENT

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



4) No of Bedrooms 2

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 City
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. _____

Slater Rd 3) PLOT PLAN (ACCURATELY DIMENSIONED) 1309 ft to Beatties Ford Rd.

13) NAME OF OWNER Norris (LAST) Hazel (FIRST) _____ (MIDDLE)

14) ADDRESS OF OWNER 1932 Slater Rd, City 28216

15) PHONE NO. Home 399 8850 Office 568-9100

16) LOCATION OF SYSTEM 1924 Slater Rd. #2094 (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A PERCOLATION TEST BEEN RUN? ___ YES ✓ NO DATE RUN applied 8-10-83

20) PTR NUMBER (See Instructions) _____

The undersigned person hereby agrees that he has read the foregoing application and that the content of same are true. It is understood that any permit applied for herein shall be void and of no effect if any the above facts are not true.

8-10-83
DATE OF APPLICATION

Hazel Y. Norris
OWNER

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

HEALTH DEPARTMENT'S COPY

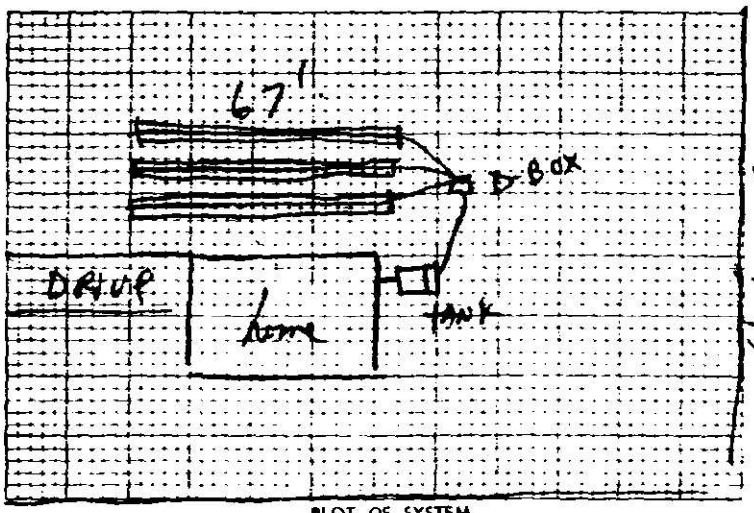
Date Issued 8-18-83 Serial No. 6533 ICAR(S) Permit No. 19944

T C No. 041-081-02

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 19944 dated 8-18-83 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 9-18-83, after which date this permit shall be null and void.



PLOT OF SYSTEM

Slaten Road

Permeability Rate P.S.

Liquid Capacity of Tank 1500 gal

Tank Construction RC Concrete

Absorption and or Nitrification Lines

Total Line Length 200'

Number of Lines 3

Distance from House 5' +

Distance from Property Line 10' +

Distance from Well city

NAME OF OWNER Hazel Norris

LOCATION OF PROPERTY 1924 Slater Road

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.

3-67' X 3' X 12" Stone ~~Tank~~ Trenches

Comments:

Division or Section Head

Environmentalist R R Edgs

* 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

BJ-8-17-83

SIR No. 19944

Serial No. 6675

Date Issued 8-16-83

T. C. No. 041-081-02

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
IMPROVEMENT PERMIT

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Norris, (LAST) Hazel (FIRST) (MIDDLE)

ADDRESS OF OWNER 1932 Slater Road, Charlotte, NC ZIP 28216

LOCATION OF LOT 1924 Slater Road (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 19944 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

@ 10-10-83

C of A (s) No. 19944

Date Issued 10-7-83 Serial 6178 T C. No. 041-081-02

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 Norris (LAST) Hazel (FIRST) (MIDDLE)

Location of Property 1924 S Tryon Rd

Application Number 19944 Permit Number 19944

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material P/C Concrete

Total Length of Drain Tile 200' Number of Lines 3

Depth of Filter Material 12" Cover Depth 2'

Water Supply Source City Distance from Water Source City

Excavation Inspected — (DATE) Tank Inspected 10-7-83 (DATE)

Nitrification Field Inspected 10-7-83 (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

R Phelps

Environmentalist

EHD-5-74

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY