Date Received 2/4/80

APT No. 16567

T. C. No. 231-033-01

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Harry Grimmer & Co., Inc.
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER P. O. Box 898, Matthews, N. C. ZIP 28105

3) PHONE NO. Home _____ Office 847-8823

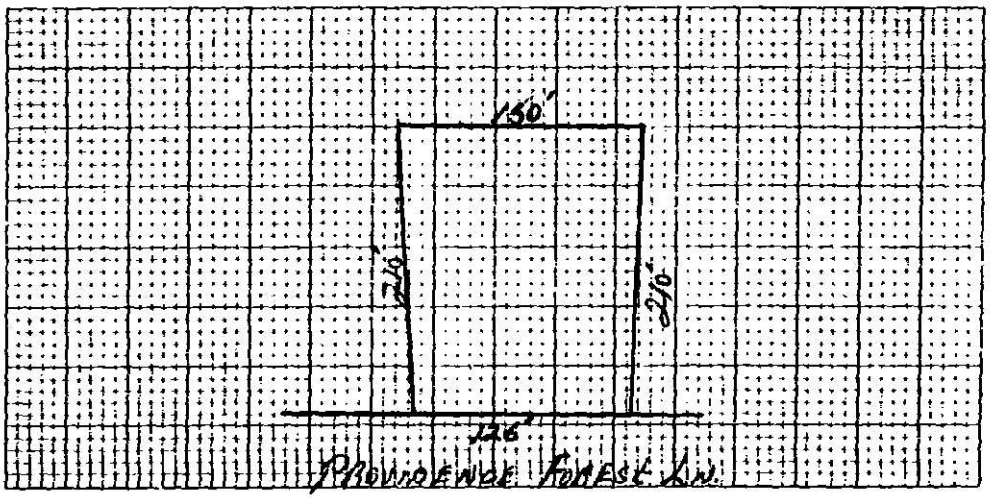
4) LOCATION OF PROPERTY 9614 Providence Forest Ln.
(STREET OR COUNTY ROAD)

5) SUBDIVISION Providence Forest LOT NO 3 BLOCK NO. B

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

Harry Grimmer
OWNER

EHD-5-76

Environmental Health Department's Copy

NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX II
SITE EVALUATION

S.I.R. No. 16567
T.C. No. 80 231-033-01

(Ground Absorption Sewage Disposal)

OWNER: Henry Stevens & Co, Inc.
ADDRESS: PO Box 848
COUNTY: Matthews, N.C. 28105
LOCATION OF SITE: 2614 Providence Forest

DATE REQUESTED:
PLAT NO:
LOT SIZE: 24,770

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS U 2-8%	S (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 mild (U)	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) Blocky U	S PS massive (U)	S PS U	S PS U
4. SOIL DEPTH (inches)	(S) PS 48" U	S PS 48" (U)	S PS U	S PS U
5. RESTRICTIVE HORIZONS (inches) (Impervious strata, Rock)	(S) PS None U	S PS temporal (U)	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	(S) PS >6' to ground water U	(S) PS >6' to ground water U	S PS U	S PS U
7. SOIL PERMEABILITY (percolation rate)	S (PS) Moderate U	S PS v.slow (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		
10. SOIL SERIES	Creal	Fill		

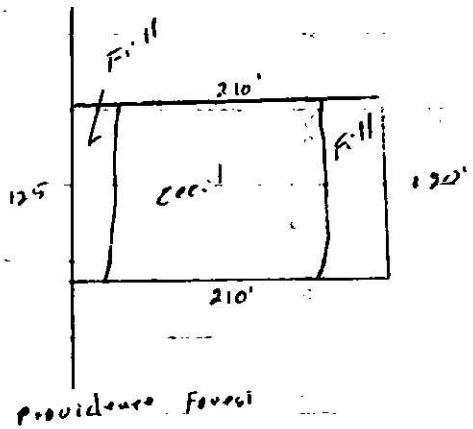
S - Suitable PS - Provisionally Suitable U - Unsuitable

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

Recommendations/Comments: Removal of fill material would allow additional room for system installation & repair

Described By: William R. Marlin
Title: Soil Scientist
Date: 7-24-80

DHS Form 2601
Sanitation
EHD 539 (2/80)


Fill
210'
Fill
Cocoa
125
190'
210'
Providence Forest

Serial No. 3611

PTR No. 16567

I C No. po 231-033-01

Date Issued July 29, 1980

Map Date

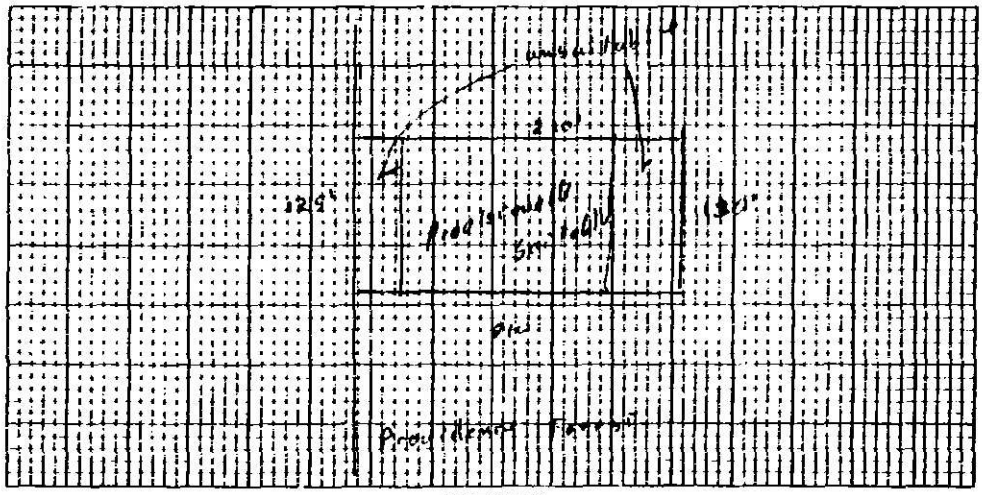
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER (LAST) (FIRST) (MIDDLE) Harry Grimmer and Company, Inc.

ADDRESS OF OWNER PO Box 898, Matthews, NC ZIP 28105

LOCATION OF PROPERTY 9614 Providence Forest Lane (STREET OR COUNTY ROAD)

SUBDIVISION Providence Forest LOT NO #3 BLOCK NO. "B"



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 on 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. Wallin
Soil Scientist

John N. Johnson
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

APPLICATION FOR AN IMPROVEMENT PERMIT

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

(OFFICE USE ONLY)

FILE: 16567

TC: 231-151-09
L

JOB LOCATION

① ADDRESS: 9614 (STREET NO) Providence Forest Lane (STREET) ② FILE:

③ CITY: Matthews ④ TAX PARCEL NO.:

⑤ SUBDIVISION: ~~Providence~~ Prov. Forest ⑥ LOT: 3 ⑦ BLOCK: 5

OWNER

⑧ NAME: Thomas (FIRST) (MIDDLE) Dimmer & Co. (LAST)

⑨ MAILING ADDRESS: P O Box 898

⑩ CITY: Matthews ⑪ STATE: NC ⑫ ZIP: 28106

⑬ PHONE: (WORK) 847-8823 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

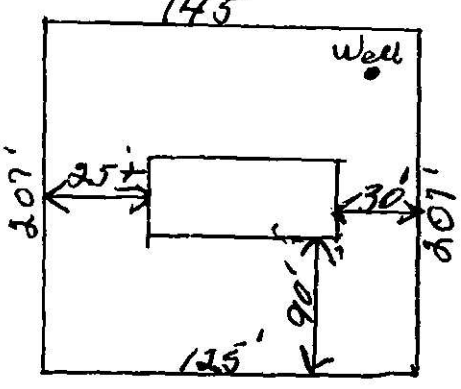
System will serve:

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

㉒ Number of bedrooms? 4 ㉕ Type?

㉓ Maximum occupancy? ㉖ Maximum number of employees?

㉔ Basement? ☐ yes ☑ no ㉗ Maximum number of seats?



PROVIDENCE FOREST Ln.

㉘ Accurately dimensioned plot

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

Signed: [signature]

Date: 7-9-85

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

Serial No. 8704

Date Issued 7-10-85

SIR No. 16567

T. C. No. 231-151-09

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 Harry Grimmer & Co.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P. O. Box 898, Matthews, NC ZIP 28106

LOCATION OF LOT 9614 Providence Forest Lane
(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 16567. 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.

B. R. Ferguson
Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

Date Issued 8-15-85

Serial No. 08410

ICAR (S) Permit No. 16567

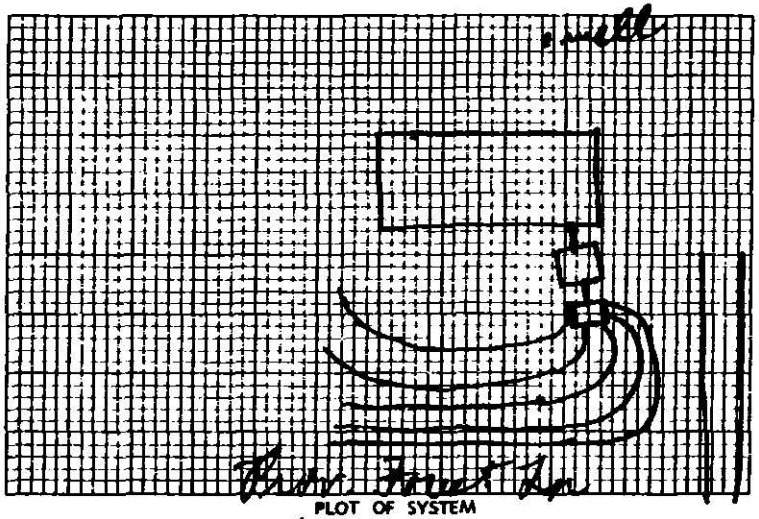
T C No 231-151-09

Map Date _____

L

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 16567, dated 7-6-85 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 9-15-85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate Pl

Liquid Capacity of Tank 1500

Tank Construction Ycc

Absorption and/or Nitrification Lines:

Total Line Length 535'

Number of Lines 5

Distance from House 5'

Distance from Property Line 10'

Distance from Well > 50'

NAME OF OWNER Harry Deimmer Co.

LOCATION OF PROPERTY 9614 Providence Forest 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' X 107' X 12" stone

Comments: _____

B Sanders
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-S-76

Environmental Health Department's Copy

C of A (s) No 16567

Date Issued 8-23-85 **Serial** 7740 T C. No 231-151-09 L CET

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 Rimmer (LAST) Harry (FIRST) (MIDDLE)

Location of Property 9614 Providence Forest Ln.

Application Number — Permit Number —

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 12"-24"

Water Supply Source well Distance from Water Source 750'

Excavation Inspected 8-23-85 (DATE) Tank Inspected 8-23-85 (DATE)

Nitrification Field Inspected 8-23-85 (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: 1500ST, con, 1605FT, 12G, Cecil

B. R. Ferguson
Environmentalist

EHD-5-76

Environmental Health Department's Copy