Date Received 6-28-84

MECK CO[illegible] DEPARTMENT OF
RECEIVED
JUN 2[illegible]84
ENVIRONMENTAL HEALTH

SIR No. 21184
PC No 011-062-04
Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Burris (LAST) Paul (FIRST) Robert (MIDDLE)

2) ADDRESS OF OWNER Route 2 Box 348 ZIP 28078

3) PHONE NO. Home 892 7909 Office —

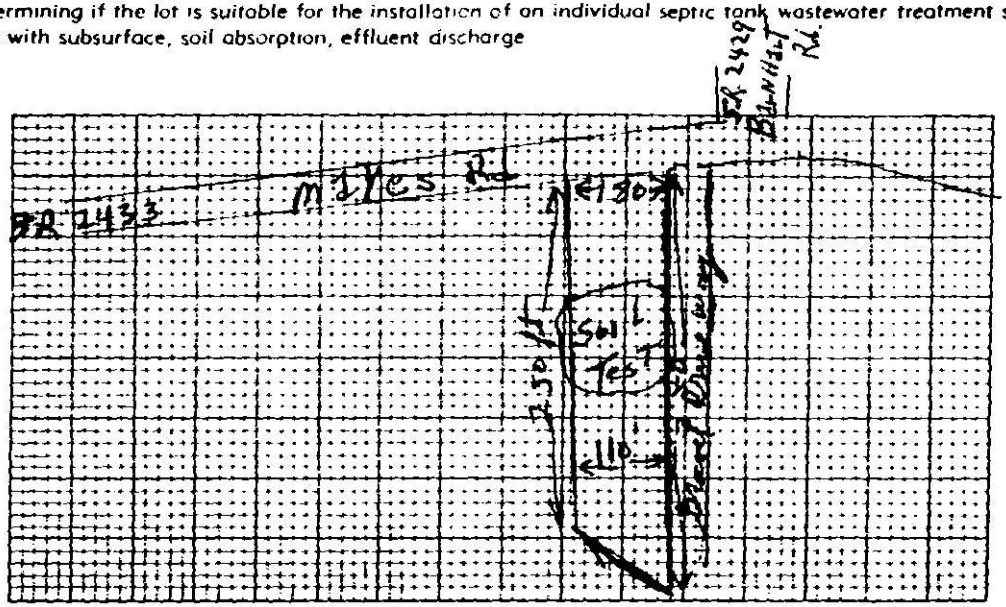
4) LOCATION OF PROPERTY Mays Road (STREET OR COUNTY ROAD)

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



7) ACCURATELY DIAGRAM & DIMENSION LOT

Paul R Burris
OWNER

EHD-5-76

Environmental Health Department's Copy

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21184

T.C. NO. P84-062-04

(Ground Absorption Sewage Disposal)

OWNER: Paul Robert Burris
ADDRESS: R-2 Box 348 Huntersville 28078
LOCATION OF SITE: Mays Rd

PLAT NO:
LOT SIZE: 34,250 .83

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) 2-8 U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) Clayey U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) Blocky U	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) 40-48 U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) None U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) Adequate U	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	IVa			
9. SITE CLASSIFICATION	Suitable			
10. SOIL SERIES	Cecil			

S - Suitable PS - Provisionally Suitable U - Unsuitable

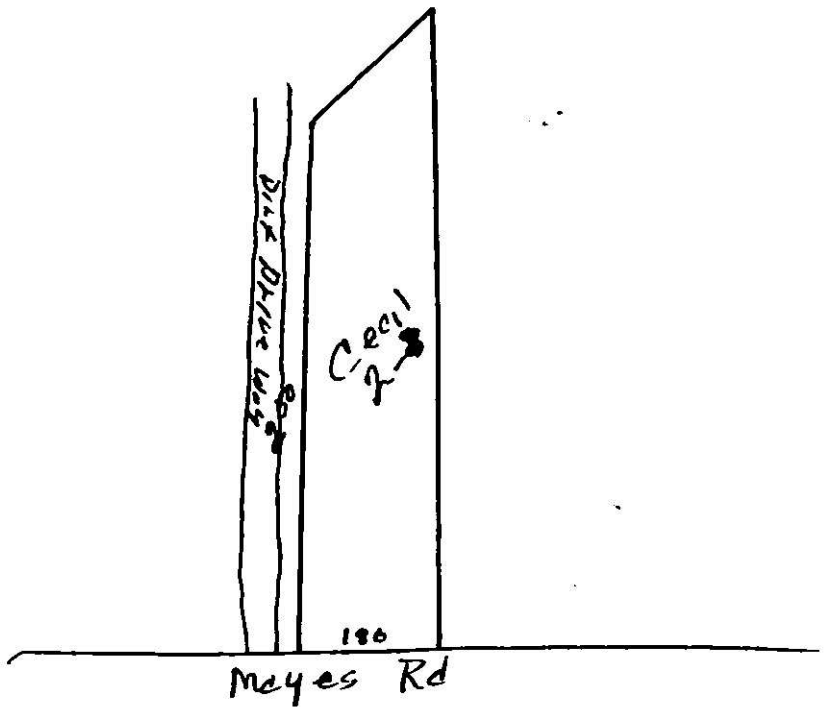
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: Willard B. Ramsey
Title: Sanitarian

Date: 7-10-84

+


Dirt Drive 40'
Cecil
180
Mayes Rd

Serial No. 5756

SIR No. 21184

T C. No. PO 011-062-04

Date Issued 7-11-84

Map Date L

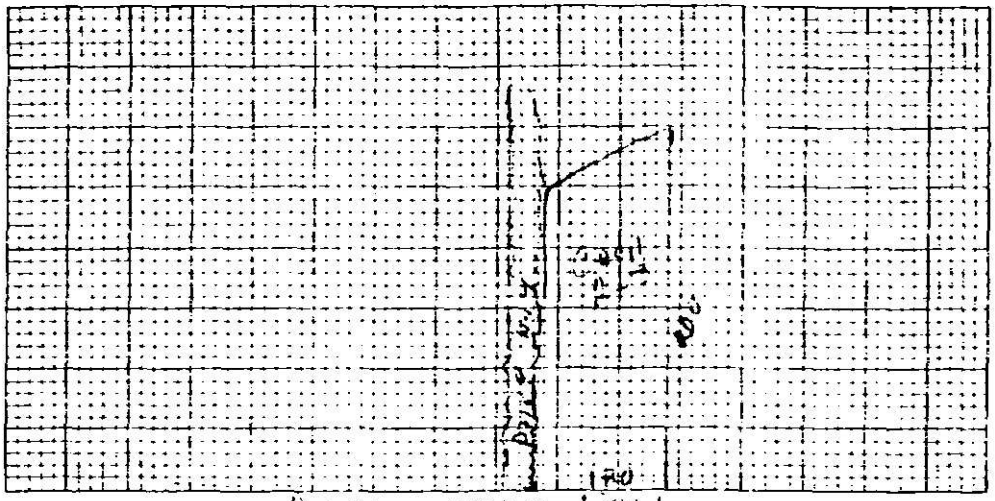
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Paul R. Burris
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER Rt. 2, Box 348, Huntersville, NC ZIP 28078

LOCATION OF PROPERTY Mayes Road
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO _____ BLOCK NO _____



PLOT PLAN

This is to certify that a soil investigation and onsite investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The soil investigation was conducted on that portion of the lot as indicated on the above plot. The permeability rate determined by the investigation was PROVISIONALLY SUITABLE. 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 an individual septic tank wastewater treatment system shall be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction of the wastewater treatment system on the said lot.
2. The size of the septic tank wastewater treatment system which must be installed shall be determined by the Mecklenburg County Department of Environmental Health according to the number of bedrooms in the proposed structure, the soil permeability rate obtained above and on the size and type of building to be constructed thereon.
3. The approved area for the system installation is the area indicated on the above plot as acceptable for system installation on the above plot.
4. This approval is valid only for the grading of the lot existing at the time of the investigation performed on the date which is the basis of this approval. The Mecklenburg County Department of Environmental Health has designated as acceptable for system installation only that area for installation and shall not permit alteration of such area.

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.

Soil Scientist

Environmental Health Director or Authorized Section Head

EHD-5-74

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 9-12-84

ICAR (5) Application No. 21184

T. Pkt No. C11-663-04

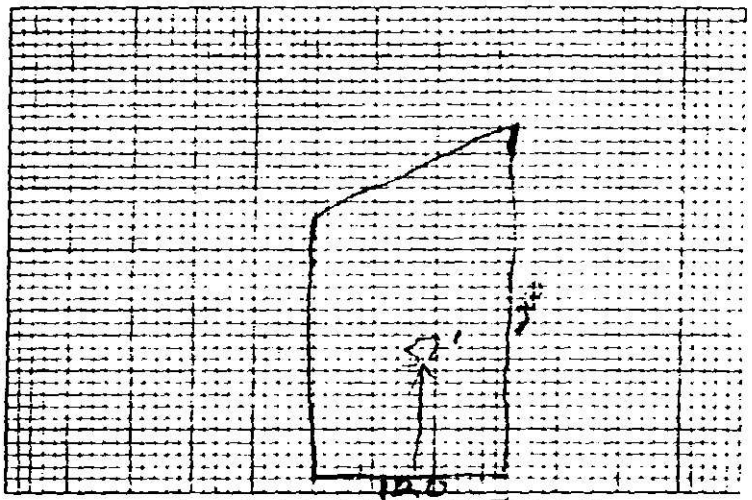
Map Date L

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) X 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)

Mobile Home ___ Yes ___ No
Residence X Yes ___ No

4) No. of Bedrooms 3

5) Business Use — Max No Employees ___

6) Washing Machine X Yes ___ No

7) Garbage Disposal ___ Yes X No

8) Dishwasher ___ Yes X No

9) Water Supply
A. Individual Well X
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 LANGLEY (LAST) LINDA (FIRST) B (MIDDLE)

14) ADDRESS OF OWNER 2527 TODDLER RD CHARLOTTE NC 28214

15) PHONE NO. Home 3992310 Office 3736761

16) LOCATION OF SYSTEM 12CC MAYES RD (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 SOIL INVESTIGATION BEEN RUN? ✓ YES ___ NO DATE RUN 7/84 JPS

20) PTR NUMBER (See Instructions) 21184

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.

9/12/84
DATE OF APPLICATION

Linda B. Langley
OWNER

EHD-5-76

Environmental Health Department's Copy

Date Issued 9-12-84

Serial No. 7839

SIR No. 21184

T. C. No. PO 011-062-04

Map Date L ORT

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 Langley, (LAST) Linda (FIRST) B. (MIDDLE)

ADDRESS OF OWNER 2527 Toddville Rd., Charlotte, NC ZIP 28214

LOCATION OF LOT 12900 Hayes 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 21184 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.

Ralph Hillis
Environmentalist

Bill D. Hardister
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

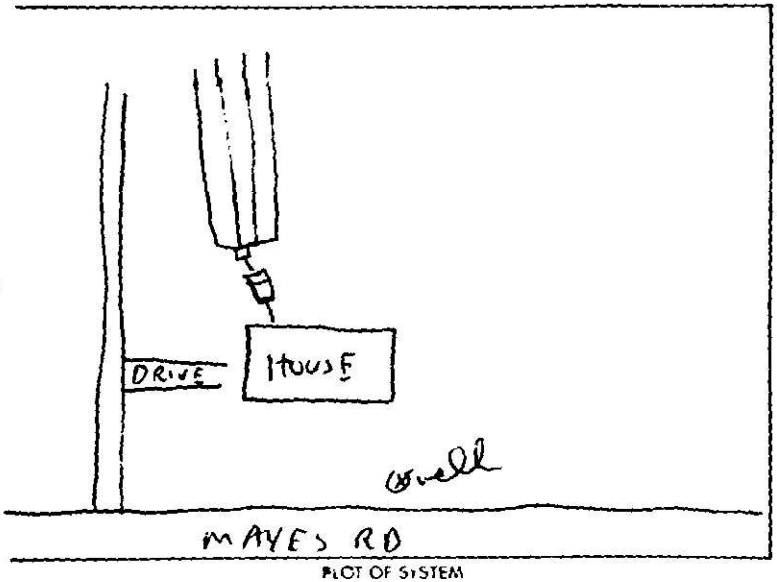
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 21134 DATE: 6-9-06

TC: 011-060-04 pt

SERIAL Nº 10072

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 9-12-04 All work shall be completed on or before 7-1-96, 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 400' feet

Number of Lines 4

Depth of Stone 12" inches

Distance from House 5'+ feet

Distance from Property Line 10'+ feet

Distance from Well 50'+ feet

NAME OF OWNER LANGLEY, LINDA B

LOCATION OF PROPERTY 12900 MAYES RD

Comments: 4 line x 100 long - 3' wide x 12" stone

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 21184

Date Issued 6-11-86 **Serial** 8663 T C No 011-060-04

L IRT

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 LANGLEY (LAST) LINDA (FIRST) B (MIDDLE)

Location of Property 12900 MAYES RD

Application Number 21184 Permit Number 21184

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material PVC

Total Length of Drain Tile 400' Number of Lines 4

Depth of Filter Material 12" Cover Depth 2'

Water Supply Source well not in yet Distance from Water Source pump 100'

Excavation Inspected 6-11-86 (DATE) Tank Inspected 6-11-86 (DATE)

Nitrification Field Inspected 6-11-86 (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, 1200SFT 12G, CCCIC

Environmentalist

EHD-5-76