Date Received_____

APT No. 15744

T. C. No._____

Map Date_____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Ash Development Company
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER 5511 Monroe Road ZIP 28212

3) PHONE NO. Home - Office 568-5517

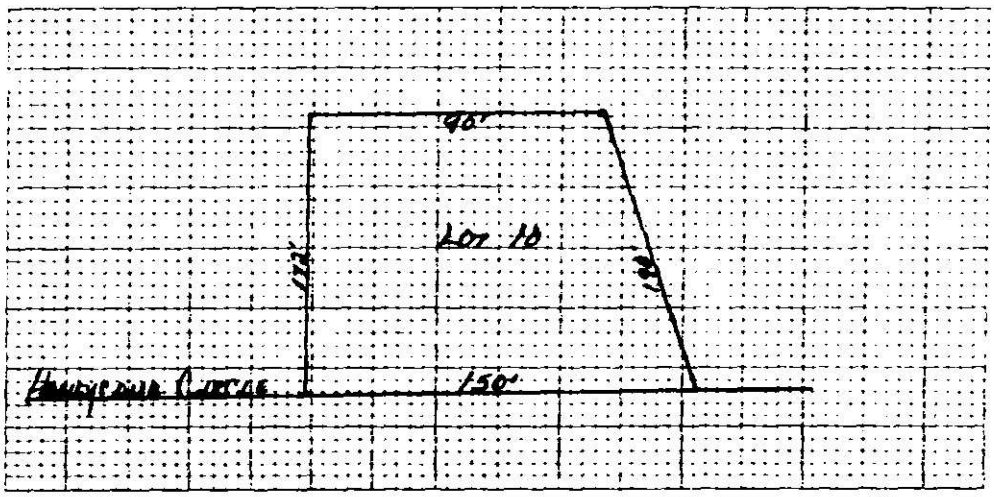
4) LOCATION OF PROPERTY Honeycomb Circle
(STREET OR COUNTY ROAD)

5) SUBDIVISION Farmington LOT NO 10 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

OWNER

EHD-5-76

Environmental Health Department's Copy

S. I. R. NO. 15744

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

APPENDIX II
SITE EVALUATION

T. C. # 223-271-34

(Ground Absorption Sewage Disposal)

OWNER: ASH DEVELOPMENT CO DATE REQUESTED:
ADDRESS: 5511 MONROE RD PLAT NO.:
COUNTY: MECKLENBURG 28212 LOT SIZE: 192001
LOCATION OF SITE: HONEYCOMB CIRCLE FARMINGTON
LOT 10

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U 2-10	S (PS) U 2-10	S PS U	S PS U
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, note 2:1 Clay)	S (PS) U Clayey	S PS (U) Mixed Clays	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S (PS) U Blocky	S (PS) U Blocky TO Massive	S PS U	S PS U
4. SOIL DEPTH (In.)	S (PS) U 48>	S PS (U) 48<	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock)	S (PS) U None	S PS (U) Clays	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & internal)	S (PS) U Adequate	S PS (U) Slow	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) U Moderate	S PS (U) SLOW	S PS U	S PS U
8. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	✓ P. Suitable	Unsuitable		
SOIL SERIES	APPLING	HELENA		

S - Suitable PS - Provisionally Suitable U - Unsuitable

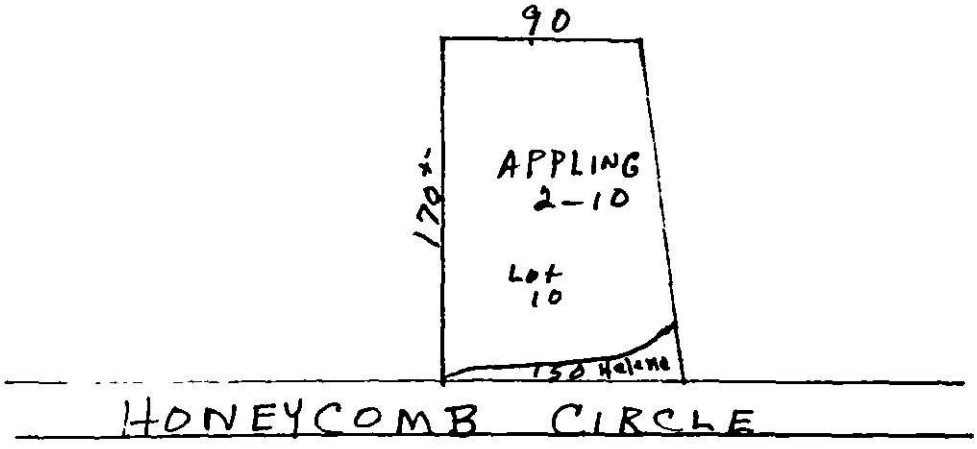
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies wet areas, fill areas, wells, water bodies, slope patterns, etc.

Recommendations/Comments:

Described By: W. B. Ramsey

Title: Soil Scientist Date: 12-17-79

DHS Form 2601
Sanitation
EHD 539 (2/79)


90
170 +-
APPLING
2-10
Lot
10
130 Halsey
HONEYCOMB CIRCLE

Serial No. 3307

PTR No. 15744

Date Issued January 29, 1980

T. C. No 223-22/34

Map Date

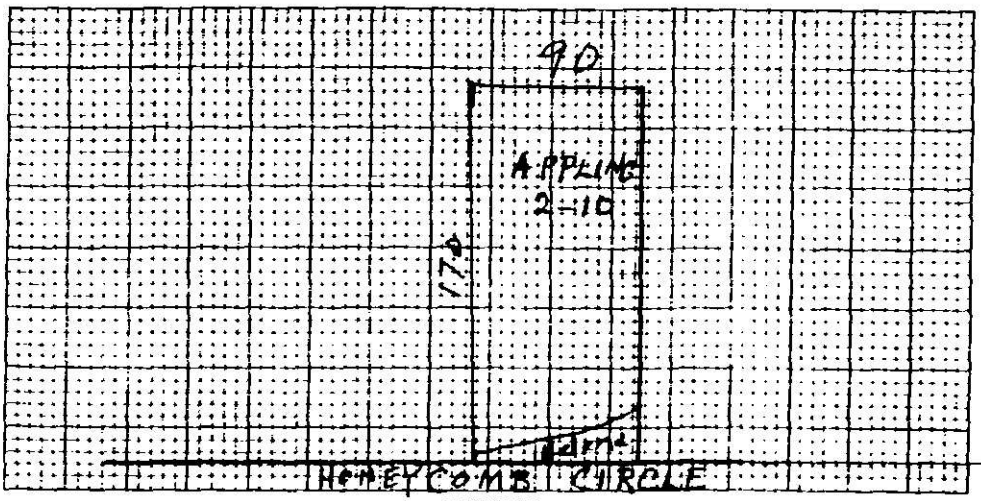
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER ASH DEVELOPMENT CO.
LAST FIRST MIDDLE

ADDRESS OF OWNER 5511 Monroe Rd., Charlotte, NC ZIP 28212

LOCATION OF PROPERTY Honeycomb Circle (Farmington)
STREET OR COUNTY ROAD

SUBDIVISION LOT NO 10 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. 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, 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.

W. B. Ramsey
Soil Scientist

John R. Adkinson
Environmental Health Director or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 8-27-81

ICAR(S) Application No. 15744

T. C. No 223-271-34

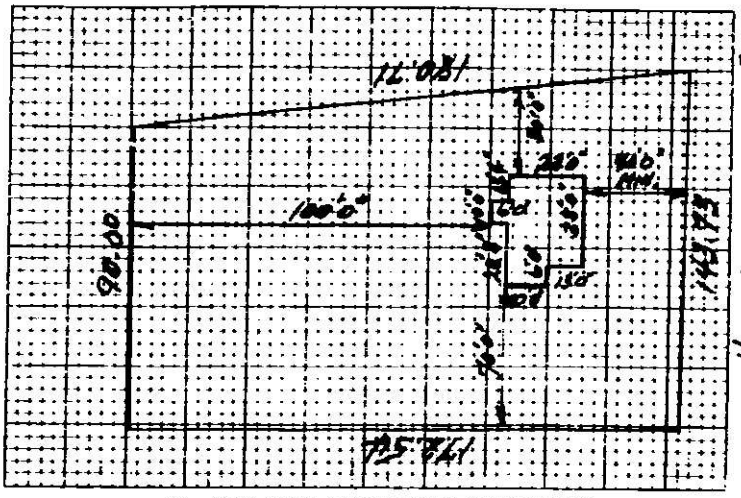
Map Date

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)

Mobile Home ___ Yes ___ No
Residence ✓ Yes ___ No

4) No of Bedrooms 3
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 SMITH-ALLEN Co. Inc
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 5507 Monroe Road

15) PHONE NO. Home ___ Office 568-5517

16) LOCATION OF SYSTEM 16437 HONEYCOMB CIRCLE
STREET OR COUNTY ROAD

17) SUBDIVISION FARMINGTON Lot No. 10 Block No. ___

Map Book No. 19 Page No. 325

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ___ NO DATE RUN 1/29/80

20) PTR NUMBER (See Instructions) 15744

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.

8/27/81
DATE OF APPLICATION

Owner Orin H Byram
OWNER

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued 9-3-81

Serial No. 5232

LA No. 15744

T. C. No. 223-271-34

Map Date

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 Smith-Allen Company, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 5507 Monroe Road, Charlotte, NC ZIP 28212

LOCATION OF LOT 16437 Honeycomb Circle
(STREET OR COUNTY ROAD)

SUBDIVISION Farmington LOT NO 10 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. 15744 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.

Mike Sexton
Environmentalist

John A Adkinson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Serial No. 6580

Date Issued Aug 31st 1983

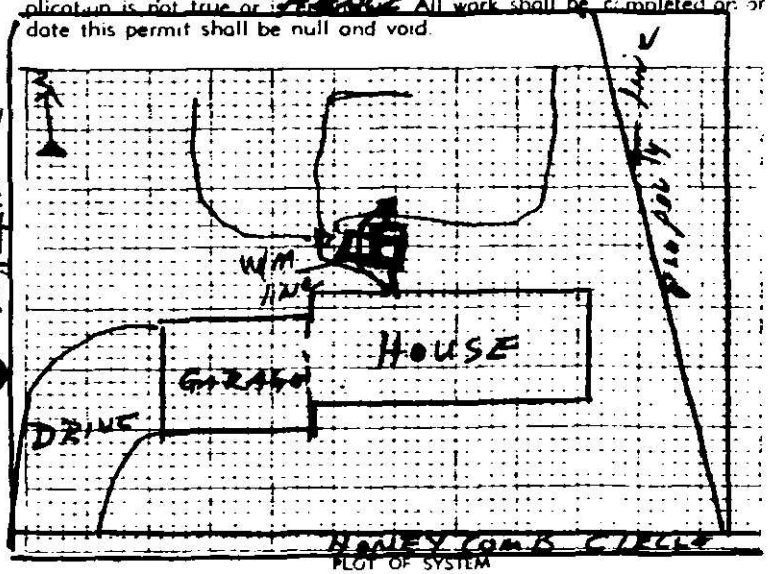
ICAR(S) Permit No. 15794

T. C No. 223-271-34

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 15794, dated Aug 23rd 1983 and this permit shall be void and of no effect if the information provided in the application is not true or is FALSE. All work shall be completed on or before SEPT 30th 1983, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS IE4

Liquid Capacity of Tank 1500 gal

Tank Construction PreCast

Absorption and/or Nitrification Lines

Total Line Length 300 lin FT.

Number of Lines THREE (3)

Distance from House 10 FT

Distance from Property Line 10 FT

Distance from Well 700 FT.

NAME OF OWNER SMITH-ALLEN Co, INC

LOCATION OF PROPERTY 16437 HONEY COMB CIRCLE

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.

+~~THREE~~ lines to be 75 FT x 3 FT x 12 inches stone - hay or straw cover - Grade Borrow - D-box & w/m line into Dist. Box.

Comments:

Division or Section Head

Ralph Miller
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-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

4

BT 9-2-83

C of A (s) No. 15744

Date Issued Sept 1st 1983 Serial 6105

T. C. No. 223-271-34

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 SMITH-ALLEN Co, INC (LAST / FIRST / MIDDLE)

Location of Property 16437 Harvey Comb Circle

Application Number 15744 Permit Number 15744

Inspection Date:

Liquid Capacity of Tank 1500 gal Tank Material Pre Cast Concrete

Total Length of Drain Tile 300 lin FT. Number of Lines ~~Two~~

Depth of Filter Material 12 inches Cover Depth 12 inches

Water Supply Source Well Distance from Water Source 700 FT.

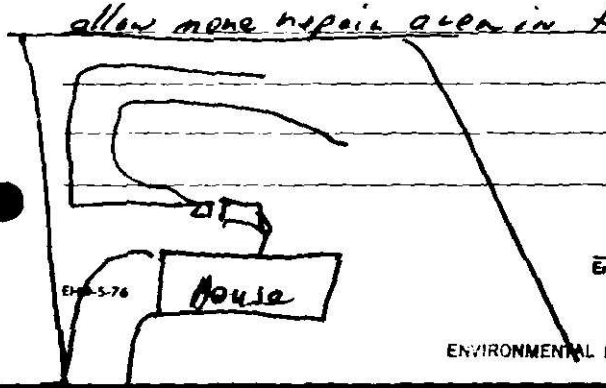
Excavation Inspected Sept 1st 1983 (DATE) Tank Inspected Sept 1st 1983. (DATE)

Nitrification Field Inspected Sept 1st 1983 (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 X 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 Three Trenches changed ~~Two~~ - 150 FT long each ~~to~~ allow room repair area in future



Rdyd Miller
Environmentalist

EH-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY