Date Received 10/8/79

MECK COUNTY DEPARTMENT OF
RECEIVED
OCT 5 - 1979
ENVIRONMENTAL HEALTH

APT No. 16205
T. & P. No. 111-091-14

Map Date _____

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Helms (LAST) Charlie (FIRST) Lee (MIDDLE)

2) ADDRESS OF OWNER 7907 Albemarle Rd. Charlotte N.C. ZIP 28212

3) PHONE NO. Home 537-3060 Office 537-3443

4) LOCATION OF PROPERTY on Camp Stewart Road (STREET OR COUNTY ROAD) (on left)

5) SUBDIVISION No. LOT NO. #1 BLOCK NO. _____

MAP BOOK NO _____ PAGE NO _____

6) DEED REFERENCE: DEED BOOK _____ PAGE NO. _____

Application is hereby made to the Mecklenburg County Health Department for the conduct of a percolation test 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

Lot is marked.



7) ACCURATELY DIAGRAM & DIMENSION LOT

Charlie Helms Jr
OWNER
Little Inv. Co.

FORM NO. E1-11-3M-6-75

HEALTH DEPARTMENT'S COPY

S. I. R. NO. [illegible]

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

APPENDIX H
SITE EVALUATION

T. C. # [illegible]

(Ground Absorption Sewage Disposal)

OWNER: Charles E. Holmes
ADDRESS: 811 Albemarle Rd.
COUNTY: Charlotte, N.C.
LOCATION OF SITE: Camp Stewart Rd

DATE REQUESTED:
PLAT NO.: Lot #1
LOT SIZE: 28,000

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 in.) (Sandy, loamy, clayey, Note 2:1 Clay)	S (PS) U Clay	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S (PS) U Blocky	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	(S) PS U 40"	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata Rock)	(S) PS U None	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	S PS U >6' To ground water	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) U Moderate	S PS 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			
SOIL SERIES	Cecil			

S - Suitable PS - Provisionally Suitable U - Unsuitable

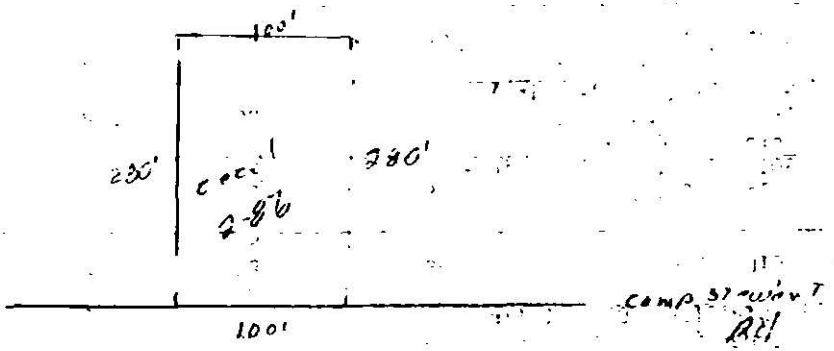
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies wet areas, fill areas, wells, water bodies, slope patterns, etc.

Recommendations/Comments:

Described By: William R. Marlin

Title: Soil Scientist Date: 10-11-79

DHS Form 2601
Sanitation
EHD 539 (0/79)


100'
230'
280'
100'

Serial No. 3153

PTR No. 16205

T C No po 111-091-14

Date Issued October 12, 1979

Map Date

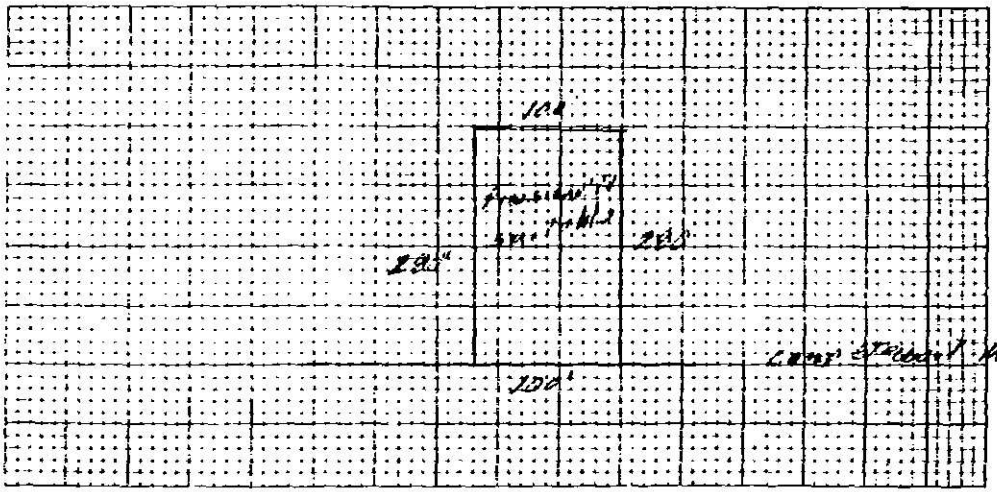
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Helms, (LAST) Charlie (FIRST) L. (MIDDLE)

ADDRESS OF OWNER 7907 Albemarle Road, Charlotte ZIP 28212

LOCATION OF PROPERTY Camp Stewart Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO #1 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. [illegible] the Mecklenburg County Department of Environmental Health [illegible] the wastewater treatment system [illegible].
2. The [illegible] determined by the Mecklenburg County Department of Environmental Health [illegible] the permeability rate obtained above, and [illegible].
3. [illegible] the investigation [illegible] acceptable for system installation [illegible].
4. This approval is void if [illegible] construction [illegible] the on-site investigation was performed on the lot which is the subject of this Mecklenburg County Department of Environmental Health number, the area indicated as acceptable for system installation unsuitable for installation, construction, alteration, 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 R. Merlin
Soil Scientist

John P. Atkisson
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Received 3-1-84

RECEIVED

Application No 16205

T C No. 20111-091-14

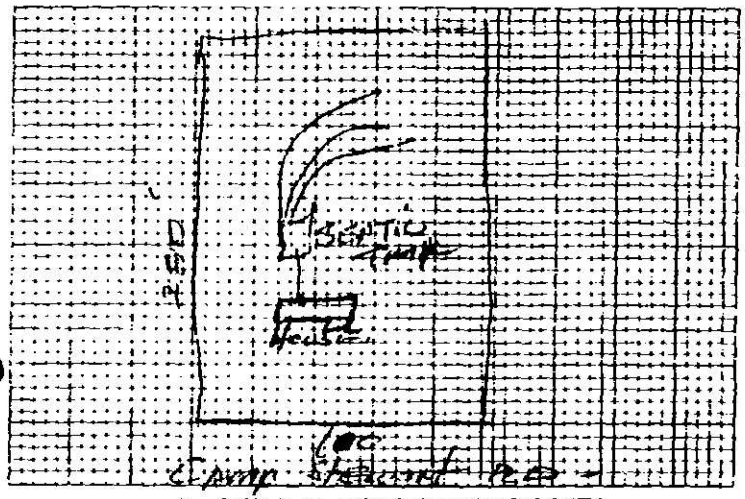
Map Date

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 a ____ Alter or Repair on individual septic tank wastewater treatment system with 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 400'
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 HEMS (LAST) CHARLIE (FIRST) LEE. (MIDDLE)

14) ADDRESS OF OWNER 7907 ALBEMARLE RD.

15) PHONE NO Home 537-3060 Office 537-3443

16) LOCATION OF SYSTEM 5208 CAMP STEWART RD. (STREET OR COUNTY ROAD)

17) SUBDIVISION ____ Lot No. 1 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 ____

20) PTR NUMBER (See Instructions) ____

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.

3-1-84
DATE OF APPLICATION

Charlie Hems
OWNER

EHD-5-76

Environmental Health Department's Copy

Date Issued 3-30-84

Serial No. 7356

SIR No 16205

T C No PO 111-091-14

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 Helms, (LAST) Charlie (FIRST) Lee (MIDDLE)

ADDRESS OF OWNER 7907 Albemarle Road, Charlotte, NC ZIP 28212

LOCATION OF LOT 5208 5218 Camp Stewart 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 16205. 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 Hulles
Environmentalist

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

EHD-5-76

Environmental Health Department's Copy

C of A (s) No. 16205

Date Issued 5-21-84 **Serial** 6614 T C No 111-09-14 PO L CRT

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 Helms (LAST) Charlie (FIRST) (MIDDLE)

Location of Property 5208 Camp Stewart Rd.

Application Number 16205 Permit Number 16205

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material FCC

Total Length of Drain Tile 300' Number of Lines 4

Depth of Filter Material 12" Cover Depth 12"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 5-21-84 (DATE) Tank Inspected 5-21-84 (DATE)

Nitrification Field Inspected 5-21-84 (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

D. R. Ferguson
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT COPY