Date Received 8-31-84

RECEIVED
AUG 31 1984
ENVIRONMENTAL HEALTH

SIR No. 21401
T. C. No. 005-221-01
Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Barton (LAST) Walter (FIRST) S. (MIDDLE)

2) ADDRESS OF OWNER c/oWellworth Rlty.Co.,Rt.2,Box 390,Davidson,N.C. ZIP 28036

3) PHONE NO. Home _____ Office 892-6606

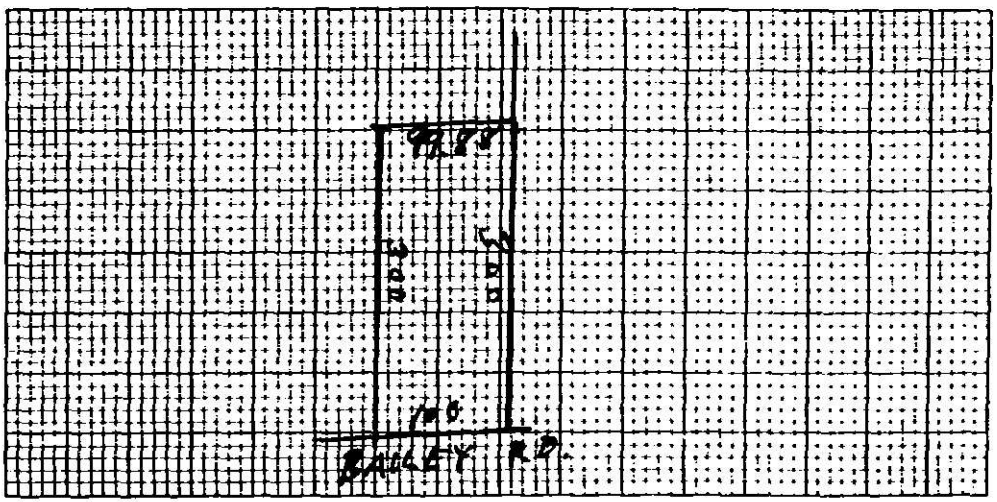
4) LOCATION OF PROPERTY Bailey Rd. Between Hwy. 21 and Hwy. 115 (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. 9 BLOCK NO. _____
As per attached map.

MAP BOOK NO _____ PAGE NO. _____

6) DEED REFERENCE: DEED BOOK 4854 PAGE NO. 303

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

Walter S. Barton
OWNER

EHO-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21401

T.C. NO. P.O. 005-221-01

(Ground Absorption Sewage Disposal)

OWNER: WALTER Barton
ADDRESS: % Wellworth Rety. Co
R-2 Box 390
Davidson 28036
LOCATION OF SITE: Bailey Road.

PLAT NO:
LOT SIZE: .68

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U 2-6	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 40"+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 Moderate	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 IIe

9. SITE CLASSIFICATION Suitable

10. SOIL SERIES Cecil

S - Suitable PS - Provisionally Suitable U - Unsuitable

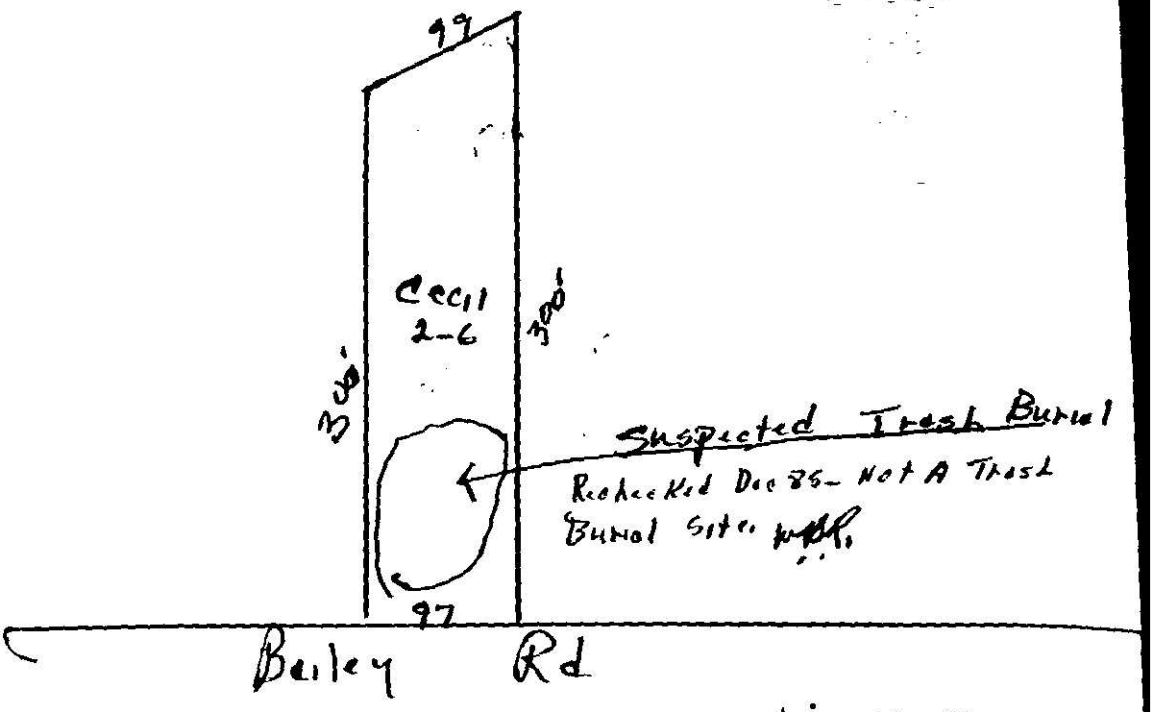
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: W. B. Kanoy
Title: Sanitarian

Date: 8-17-84

4


99
Cecil
2-6
300'
300'
Suspected Trash Burial
Rockcliff Dec 85- Not A Trash
Burial Site.
97
Bailey Rd

Serial No. 5878

SIR No. 21401

T. C. No. PO 005-221-01

Date Issued 9-17-84

Map Date L

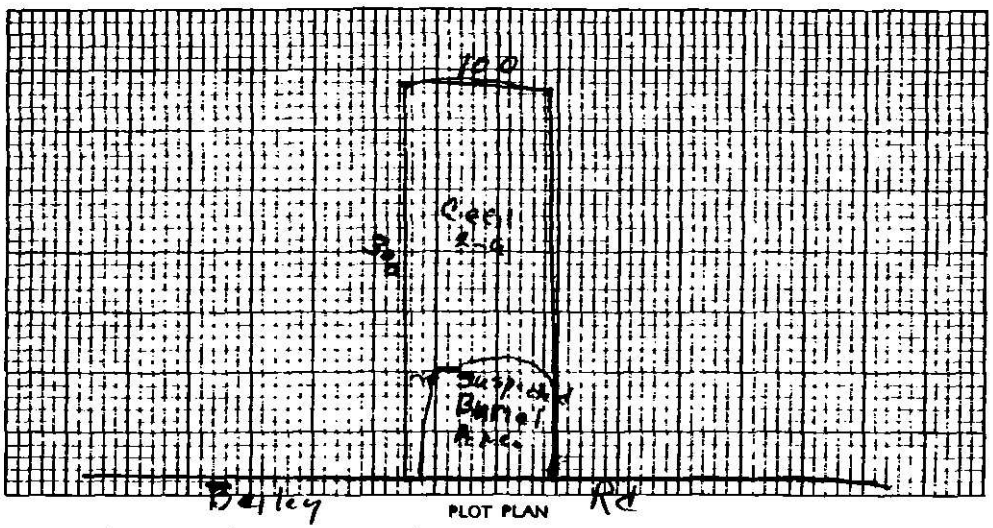
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Barton, (LAST) Walter (FIRST) S. (MIDDLE)

ADDRESS OF OWNER % Wellworth Realty Rt. 2, Box 390, Davidson, NC ZIP 28036

LOCATION OF PROPERTY Bailey Road (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. 9 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 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 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, 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

Environmental Health Director or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

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

(OFFICE USE ONLY)
FILE: 21401 ~~21395~~
TC: PO 005-221-01 C'RT

MECK COUNTY DEPARTMENT OF
RECEIVED
NOV 19 1985
ENVIRONMENTAL HEALTH

JOB LOCATION

① ADDRESS: Bailey Rd. 10513 (STREET NO / STREET) ② FILE:
③ CITY: Huntersville ④ TAX PARCEL NO.: PO 005-221-01
⑤ SUBDIVISION: ⑥ LOT: 9 ⑦ BLOCK:

OWNER

⑧ NAME: Don Rick Enterprises Inc (FIRST / MIDDLE / LAST)
⑨ MAILING ADDRESS: RT 2 Box 667
⑩ CITY: Mooresville ⑪ STATE: N.C. ⑫ ZIP: 28115
⑬ PHONE: (WORK) 704 379-1988 ⑭ (HOME) 892-7020

REQUEST

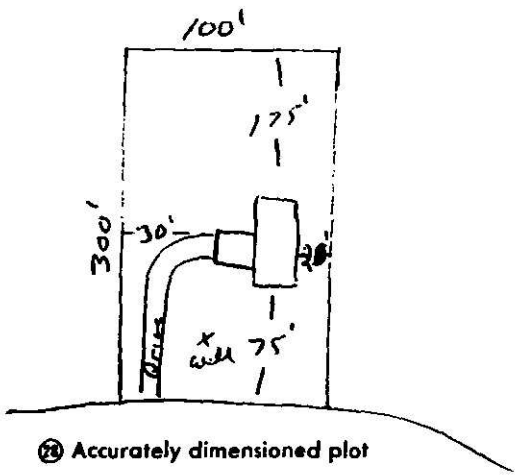
This request is for a(n):

⑮ ☑ New installation permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☐ Other (specify)

DESIGN CRITERIA

System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 3
㉕ Type?
㉓ Maximum occupancy? 4
㉖ Maximum number of employees?
㉔ Basement? ☐ yes ☑ no
㉗ Maximum number of seats?



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: Richard B. Howell
Date: 11-19-85

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

Serial No. 9123

SIR No. 21401

Date Issued 11-29-85

T. C. No. PO 005-221 -01

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 Don Ric h Enterprises, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER Rt. 2, Box 667, Mooresville, NC ZIP 28115

LOCATION OF LOT 10513 Bailey Road
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. 9 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 21401 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.

Kelly Randall
Environmentalist

Bill D. Henderson Jr.
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

21401

Serial No. 08702

ICAR(S) Permit No. 21395

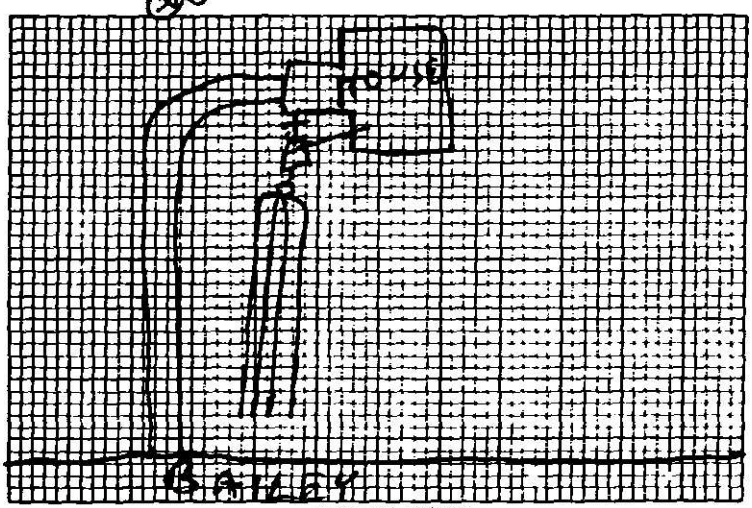
Date Issued 12-10-85

T C. No. 00 005-221-01

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 21395, dated 11-19-85 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 1-10-86, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500

Tank Construction PCC

Absorption and/or Nitrification Lines:

Total Line Length 400'

Number of Lines 4 x 100'

Distance from House 5'

Distance from Property Line 10'

Distance from Well 50'

NAME OF OWNER DON RICK ENTERPRISES

LOCATION OF PROPERTY 10513 BAILEY RD

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.

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

Comments:

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.

EHD-5-76

Environmental Health Department's Copy

C of A (s) No. 21401 21395

Date Issued 12-23-05 **Serial** 8127 T. C. No. 00522101 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 DON RICK ENTERPRISES (LAST FIRST MIDDLE)

Location of Property 10513 BAILEY RD

Application Number 21345-CH01 Permit Number 21345-21401

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PCC

Total Length of Drain Tile 400' Number of Lines 4

Depth of Filter Material 12" Cover Depth 2'

Water Supply Source well Distance from Water Source 50'H

Excavation Inspected 12-23-05 (DATE) Tank Inspected 12-23-05 (DATE)

Nitrification Field Inspected 12-23-05 (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 1995 1500 ST CONV. SFT 12 CCC

Environmentalist

EHD-S-76

Environmental Health Department's Copy