Date Received 6/9/72

APT No. 12582

T. & D. No. 135-361-0

Map Date _____

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Bob McLEMORE & CO, INC.
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER P.O. Box 25746 CHAR. ZIP 28212

3) PHONE NO. Home _____ Office 545-6111

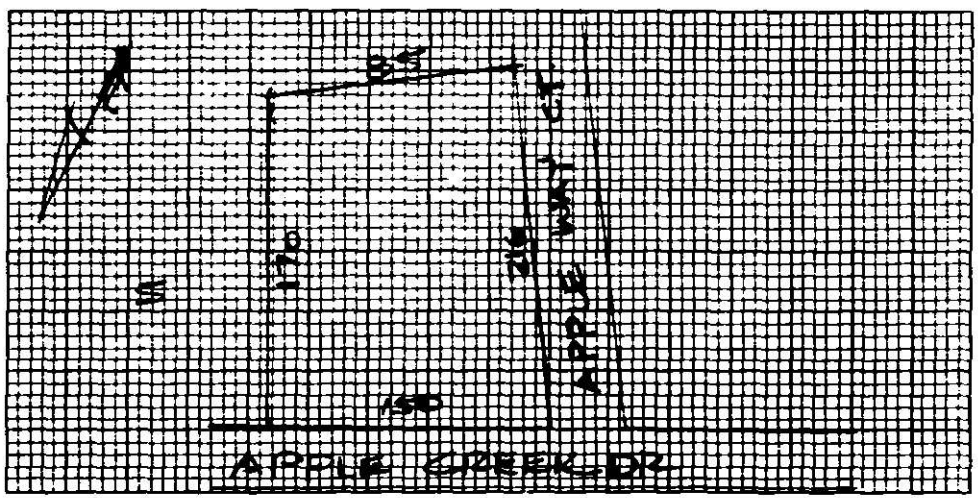
4) LOCATION OF PROPERTY APPLE CREEK DR.
(STREET OR COUNTY ROAD)

5) SUBDIVISION APPLE CREEK LOT NO. 6 BLOCK NO. E

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.



7) ACCURATELY DIAGRAM & DIMENSION LOT

Robert L Bobel
OWNER

FORM NO. E-1-9-1-72

HEALTH DEPARTMENT'S COPY

SOIL INVESTIGATION REPORT

Date of Investigation June 21, 1977 APT NO. 12582

Owner Bob Mahemore & Co., Inc.

Location of Property Apple Creek Dr. lot no. 6 Block E

Soil Suitability Ratings Taylor No. P-0.135—361-C1

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Holona	Coil-Holona Intergradient		
2. Soil Slope	suitable 2-6%		suitable 2-6%	
3. Soil Depth	suitable >48"		suitable >48"	
4. Soil Texture	unsuitable 2:1 clays		provisionally suitable some 2:1 clays	
5. Soil Structure	unsuitable massive		provisionally suitable blocky	
6. Restrictive Horizons	—		—	
7. Soil Drainage	unsuitable perched high water table		suitable water table >6'	
8. Soil Permeability (Percolation Rate)	unsuitable very slow >120 min/in.		provisionally suitable moderate to slow 90 min/in.	
9. Other	—		—	
10. Overall Rating	unsuitable		provisionally suitable	

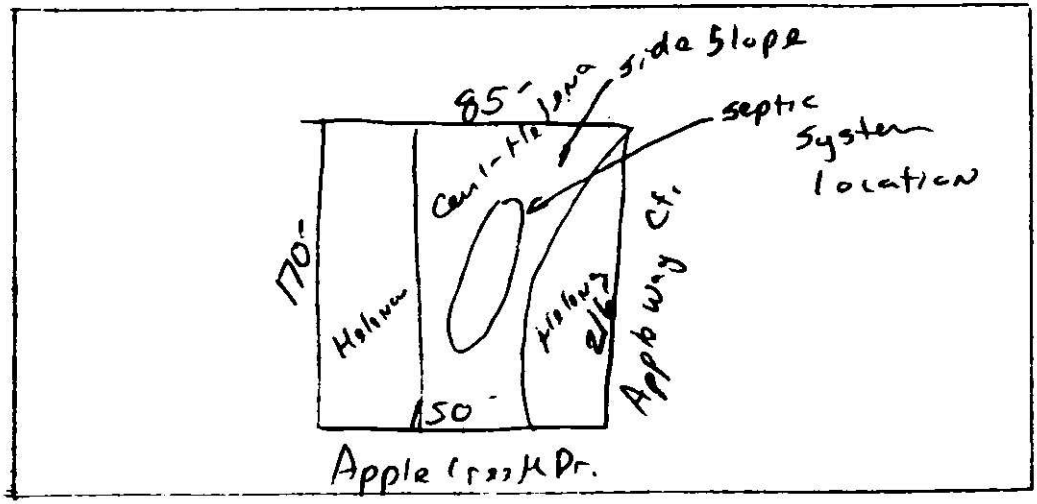
Recommendations Based on this investigation, the lot was found to have an adequate area of provisionally suitable soils for installation of a septic tank system. System design should be based on a percolation rate of 90 min/in. and should be placed in the area of Intergradient soils.

See diagram on back

W. Edward Casement
Soil Scientist

3/18/75
EHD 539

DIAGRAM OF PROPERTY



3/18/75
EHD 539

Serial No. 1025

PTR No. 12582

T C. No. P.0.135-361-01

Date Issued June 29, 1977

Map Date

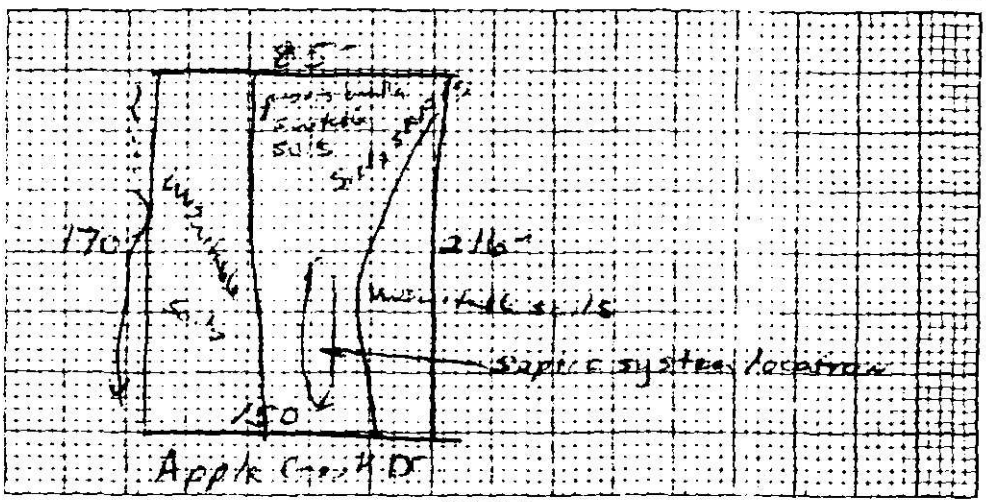
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Bob McLemore & Company, Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER P.O. Box 25746, Charlotte, NC ZIP 28212

LOCATION OF PROPERTY Apple Creek Drive
STREET OR COUNTY ROAD

SUBDIVISION Apple Creek LOT NO 6 BLOCK NO. E



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 soil 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 **90 min/in.** 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 [illegible] before the septic 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 and wastewater system which must be installed will be determined by the Mecklenburg County Department of Environmental Health prior to issuance of the permit based on the permeability rate obtained above, and on the size and type of building, or facility proposed thereon.
3. This approval is valid only for the system installed in the immediate area indicated as acceptable for system installation on the above plot.
4. This approval is [illegible] prohibiting any construction including the drilling of a well 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 the wastewater construction, enlargement 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. Edward Lippincott
EHD-5-76 Soil Scientist

John M. Atkinson
Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received _____

ICAR(S) Application No. 12582

T C No. 135-341-01

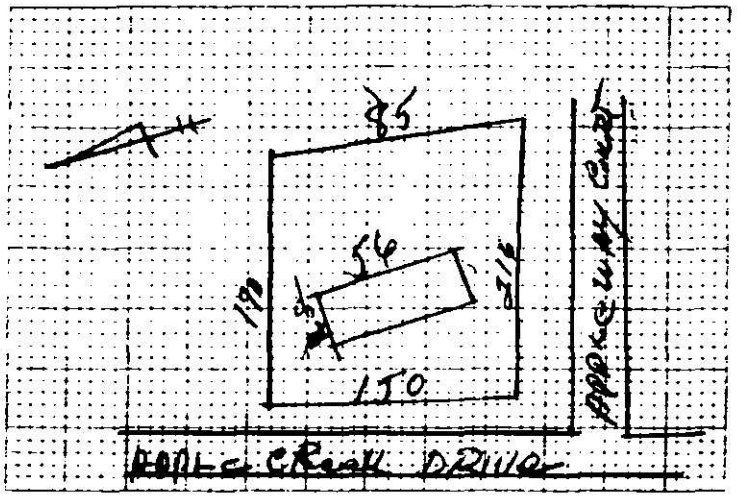
Map Date 12-27-79

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 WATER Co
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 Bolt McLemore J. G. (LAST, FIRST, MIDDLE)

14) ADDRESS OF OWNER Po Box 25746 CHAR 28212

15) PHONE NO Home _____ Office 545-6111

16) LOCATION OF SYSTEM Apple Creek DRIVE (STREET OR COUNTY ROAD)
(FARM #ocd 16)

17) SUBDIVISION Apple Creek Lot No 6 Block No. E

Map Book No. 18 Page No. 321

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES NO DATE RUN 6-29-77

20) PTR NUMBER (See Instructions) 12582

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.

1-5-79
DATE OF APPLICATION

Tyrie Kuykendall V.P.
OWNER

EHD-5-76

Environmental Health Department's Copy

Serial No. 2591

LA No. 12582

Date Issued Jan. 10, 1979

T. C. No. po 135-361-01

Map Date 12/27/78

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

~~CERTIFICATE~~ PERMIT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Bob McLemore Company
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P.O. Box 25746 ZIP

LOCATION OF LOT Apple Creek Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Apple Creek LOT NO. 6 BLOCK NO. E

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 12582 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.

Steve Wood
Environmentalist

John R Atkisson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

R

Date Issued 30 Oct 79

Serial 3287

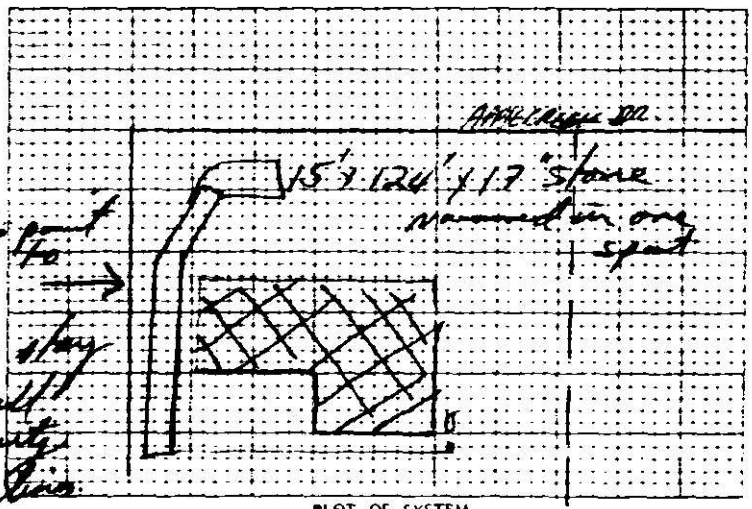
ICAR (S) Permit No. 12582

T. C. No. 135-761-01

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 12582 dated 1/10/79 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 3 Nov -, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate P.S. *

Liquid Capacity of Tank 1500 gal / 600 gal

Tank Construction P.C. Conc.

Absorption and/or Nitrification Lines

Total Line Length 620'

Number of Lines 5

Distance from House 10'

Distance from Property Line 10'

Distance from Well Comm.

NAME OF OWNER Bob McLemore & Co.

LOCATION OF PROPERTY 6 E. Apple Creek 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.

System located in area of possible poorer soils due to change of location of house on Lot

Division or Section Head

Environmentalist Steve Wood

* 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

Date Issued 19 Oct 79 Serial 3148 C of A (s) No. 12582

T C No 135-361-01

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION

FOR BOARD OF COMMISSIONERS

CERTIFICATE OF APPROVAL

(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner McLemore, Bob (LAST, FIRST, MIDDLE)

Location of Property 6E Apple Creek Dr.

Application Number _____ Permit Number 12582

Inspection Data:

Liquid Capacity of Tank 1500 gal / 400 gal pump Tank Material P.C. Conc - metered

Total Length of Drain Tile 620' Number of Lines 5 (manured to 2)

Depth of Filter Material 17" Cover Depth 18"

Water Supply Source Comm Distance from Water Source 100'

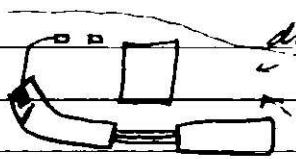
Excavation Inspected — (DATE) Tanks Inspected 19 Oct (DATE)

Nitrification Field Inspected 19 Oct (DATE)

Washing Machine Line Inspected, If Applicable 19 Oct (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 6 cu ft pump - drainage



Steve Wood

Environmentalist

EHD-5-76

Environmental Health Department's Copy