Date Received 7-23-73

RECEIVED
JUL 23 1973

APT No 6721

T. C No 135-73-20

Map Date 5-9-74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Dellinger, Madison & Associates, Inc.
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER 411 South Sharon Amity Road, Charlotte, NC ZIP 28211

3) PHONE NO Home — Office 364-7155

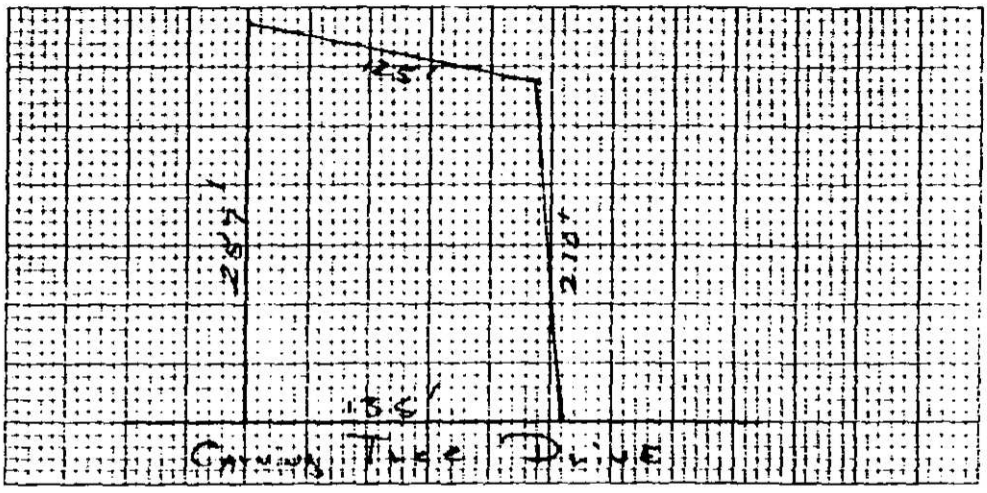
4) LOCATION OF PROPERTY Canary Tree Drive
(STREET OR COUNTY ROAD)

5) SUBDIVISION TARAwoods LOT NO 19 BLOCK NO. C

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

OWNER M L Dellinger

FORM NO E-1-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3896

PTR No 6721

T C No 135-28-04

Map Date 5-9-74

Date Issued December 27, 1973

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

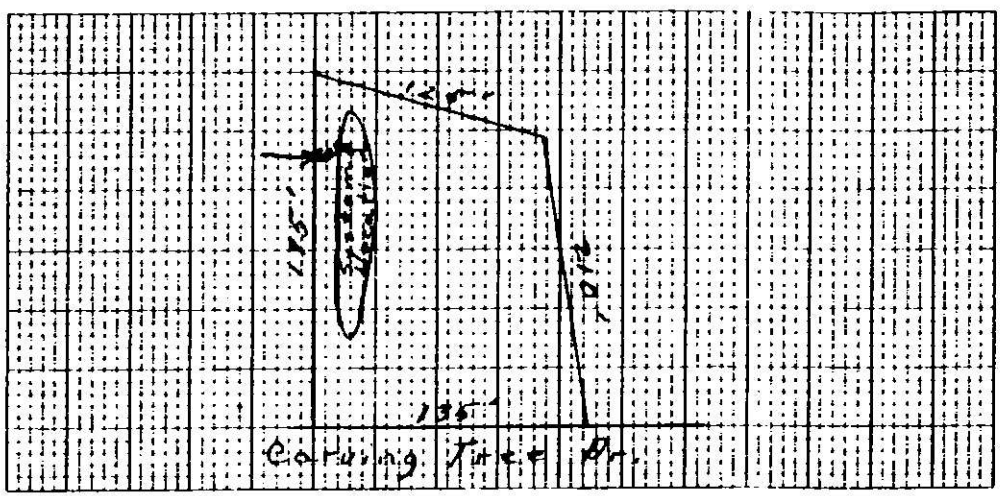
PERCOLATION TEST REPORT

NAME OF OWNER Dellinger, Madison & Associates, Inc.

ADDRESS OF OWNER 411 South Sharon Amity Road ZIP 28211
(LAST, FIRST, MIDDLE)

LOCATION OF PROPERTY Carving Tree Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Tarawoods LOT NO 19 BLOCK NO C



PLOT PLAN

This is to certify that a percolation test has been run and an on-site inspection made by the Mecklenburg County Health Department on the lot described above. The said test was conducted on that portion of the lot as indicated on above plot

The percolation rate determined by the test was 60*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 to install, construct, alter, or repair the specific system shall be obtained from the Mecklenburg County Health Department prior to the beginning of any construction of building, 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 Health Department prior to installation based on the percolation 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 where the percolation test was run
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 Health Department, renders the area where the percolation test was run unsuitable for the 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 State Board of Health and the Mecklenburg County Board of Health which were in effect on the date of issuance and is void if at any time in the future, prior to the 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.

*Results determined by soil analysis.

W. Everette Lyons, Jr. — Soil Scientist

John R. Robinson
Director Environmental Health Division or Authorized Section Head

FORM NO E-2-9-1-72

HEALTH DEPARTMENT'S COPY

Date Received 1-7-74

RECEIVED JAN 6 1974 ENVIRONMENTAL HEALTH DIVISION

Application No 6721

T C No 135 58 20

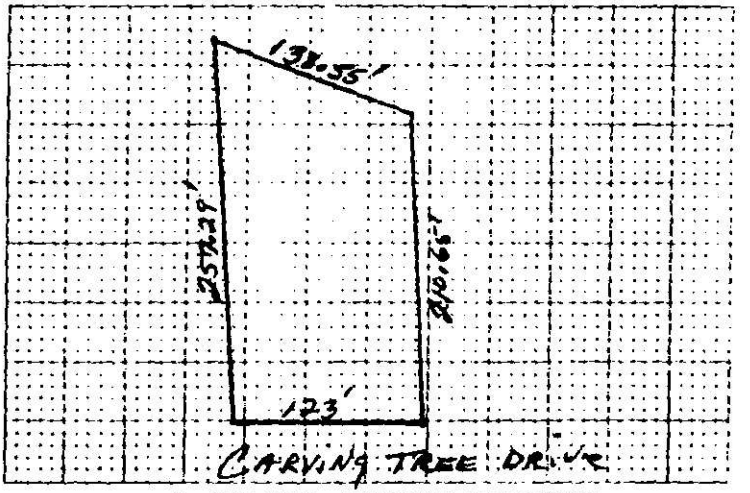
Map Date 3-9-74

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

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 Health Department 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)

4) No. of Bedrooms 4

5) Business Use Max. No. Employees 0

6) Washing Machine X Yes ___ No

7) Garbage Disposal X Yes ___ No

8) Dishwasher X Yes ___ No

9) Water Supply
A) Individual Well ___
B) Government ___
C) Community System
1 Well ___ X
2 Government ___

10) Sewage System
House located within 200 feet of public sewer Yes X No
House located within 200 feet of community sewer Yes X No

11) FHA Case No ___

12) VA Case No ___

13) NAME OF OWNER DELLINGER Madison & Assoc INC (LAST FIRST MIDDLE)

14) ADDRESS OF OWNER 411 S Sharon Amity Rd - Charlotte, NC 28211

15) PHONE NO Home ___ Office 364-7155

16) LOCATION OF SYSTEM Carving Tree Drive (STREET OR COUNTY ROAD)

17) SUBDIVISION Tara Woods Lot No 19 Block No C

Map Book No ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ___ NO DATE RUN PR 6 C

20) PTR NUMBER (See Instructions) 6721

The undersigned person hereby agrees that he has read the foregoing application and that the content 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.

1-4-74
DATE OF APPLICATION

Hugh Dellinger
OWNER

FORM NO. E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued January 7, 1974 **Serial No. 3743**

LA No. 6721
T C. No. 135-28
Map Date 6-9-72

IMPROVEMENTS PERMIT

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Dellinger, Madison & Associates, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 411 S. Sharon Amity Road ZIP 28211

LOCATION OF LOT Carving Tree Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Tarwoods LOT NO. 19 BLOCK NO. C

MAP BOOK NO. PAGE NO.

The above specified lot is approved by the Mecklenburg County Health Department for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the percolation test results which yielded a percolation rate of 60 min/in 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 6721. 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 percolation test 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

Environmentalist

John R. Atkinson
Director, Environmental Health Division or Authorized Section Head

FORM NO. E-3-4-1-71

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 12/26/74

ICAR (S) Application No 6721

T C No 135-2[illegible]

Map Date 8-9-72

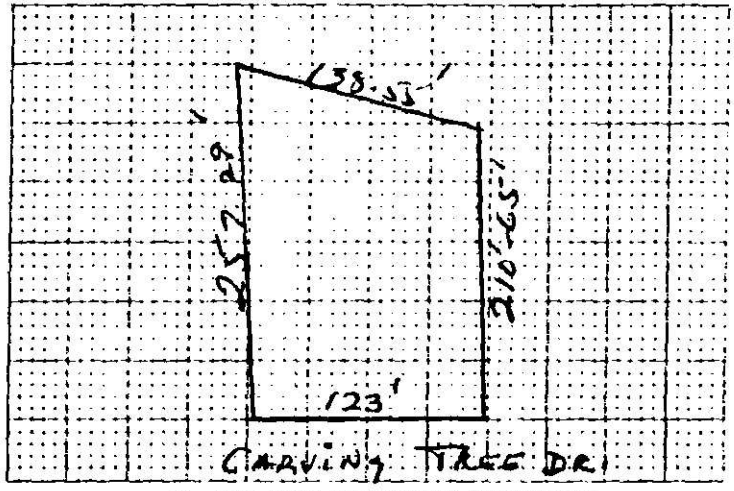
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

Application for an
Installation, Construction, Alteration, and/or Repair Permit
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

The owner(s) of the property described hereinafter hereby applies to the Mecklenburg County Health Department 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)

(4) No. of Bedrooms 3

(5) Employees: Max No. 0

(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 ✗
  - (2) Governmental System ____

(10) Sewage System:
- House Lateral to Connect to Sewer Line of public sewer: Yes ✗ No
- House Lateral to Connect to Septic Tank: Yes ____ No
- Community system: Yes ✗ No

(11) FHA Case No. ____

(12) VA Case No. ____

(13) NAME OF OWNER Dellinger (LAST) Madison & Assoc Inc. (FIRST) (MIDDLE)

(14) ADDRESS OF OWNER 5501 Executive Center Dr. Suite 223 Charlotte, NC 28212

(15) PHONE NO Home ____ Office 568-4140

(16) LOCATION OF SYSTEM Carving Tree Dr. (STREET OR COUNTY ROAD)

(17) SUBDIVISION Tarawoods Lot No 19 Block No C

Map Book No ____ Page No ____

(18) DEED REFERENCE — DEED BOOK ____ AT PAGE ____

(19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ____ NO DATE RUN PR→CO

(20) PTR NUMBER (See Instructions) 6721

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.

12-26-74
DATE OF APPLICATION

OWNER [signature]

FORM NO. E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 3/20/75

Serial No. 6132 ICARIS Permit No. 6721

PC
T C No 135-281-09

Map Date 3-3 72

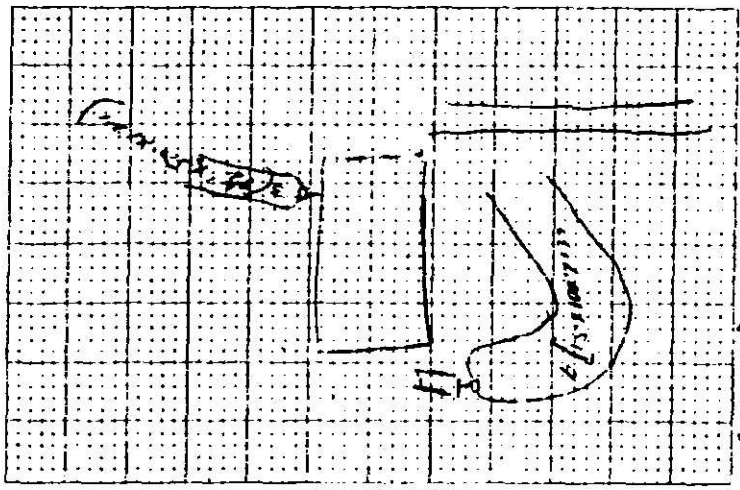
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

Permission is hereby given to X 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 6721, dated 1-7-74 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 4-10-75, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 60 mpi.

Liquid Capacity of Tank 1500 gal.

Tank Construction PC

Absorption and/or Nitrification Lines ST WM

Total Line Length 600 150

Number of Lines 6 3

Distance from House 10'

Distance from Property Line 10

Distance from Well Comm

NAME OF OWNER D. Dellinger & Madison & Assocs. Inc.

LOCATION OF PROPERTY Carving Tree Dr. Lot 19C

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used.

Comments THIS HOUSE IS PD. IT IS A 3ER HOUSE NOT 4 as per 4pl ST DRAIN FIELD AREA TO BE LANDSCAPED MAX SOIL COVER 36" at any point.

Pc. ST Svc.

Division or Section Head JH/KHB

Environmentalist L. F. Bargeman

If this permit ... for the installation or construction of a new system, it must be signed by the division or a section head of the Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

Form E-5-9-1-72

Serial No. 5682

C of A (s) No 6721
PO
T C No 135-281-09

Date Issued 3/26/75

Map Date 9-7-72

CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Dellinger & Madison Assoc. Inc. (For Sale)
LAST FIRST MIDDLE

Location of Property 1210 Carving Tree Dr. Lot 19C

Application Number 6721 Permit Number 6721

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material PC

Total Length of Drain Tile ST 600 WM 150 Number of Lines ST 6 WM 3

Depth of Filter Material 12" Cover Depth 4'

Water Supply Source Comm Distance from Water Source —

Excavation Inspected 3/21/75 DATE Tank Inspected 3/21/75 DATE

Nitrification Field Inspected 3/21/75 DATE

Washing Machine Line Inspected, If Applicable 3/21/75 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 Board of Health 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 list 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 Developer should landscape this lot so that surface water is away from drain field!

J P Bridgman
Environmentalist

FORM NO E-6-9-1-72

SOUTH DEDICATION PLAT