Date Received 4-583

SIR No. 19521

T.E. No. 025-171-14409

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER KIDD (LAST) William Brevard (FIRST) Brevard (MIDDLE)

2) ADDRESS OF OWNER R-4, 9, Box 358 ZIP 28[illegible]

3) PHONE NO. Home 392-3487 Office

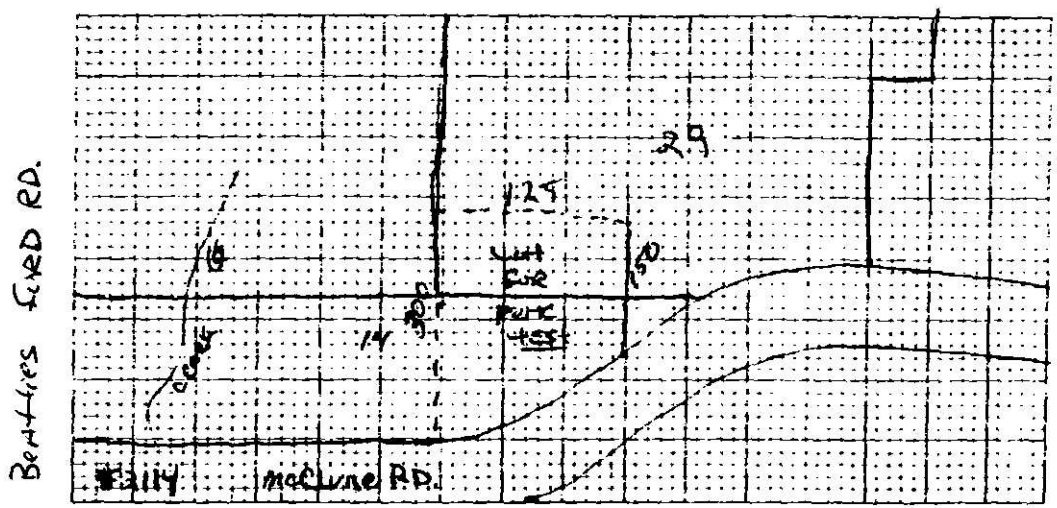
4) LOCATION OF PROPERTY McCLURE RD. (STREET OR COUNTY ROAD)

5) SUBDIVISION LOT NO BLOCK NO.

MAP BOOK NO 25 PAGE NO. 17

6) DEED REFERENCE DEED BOOK 4225 PAGE NO 402 (4154 - 772)

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

W. Brevard Kidd
OWNER

EHD-5-76

Environmental Health Department's Copy

Serial No. 4980

PTR No. 19521

T C. No. PO 025-171-14,15

Date Issued 4-25-83

Map Date

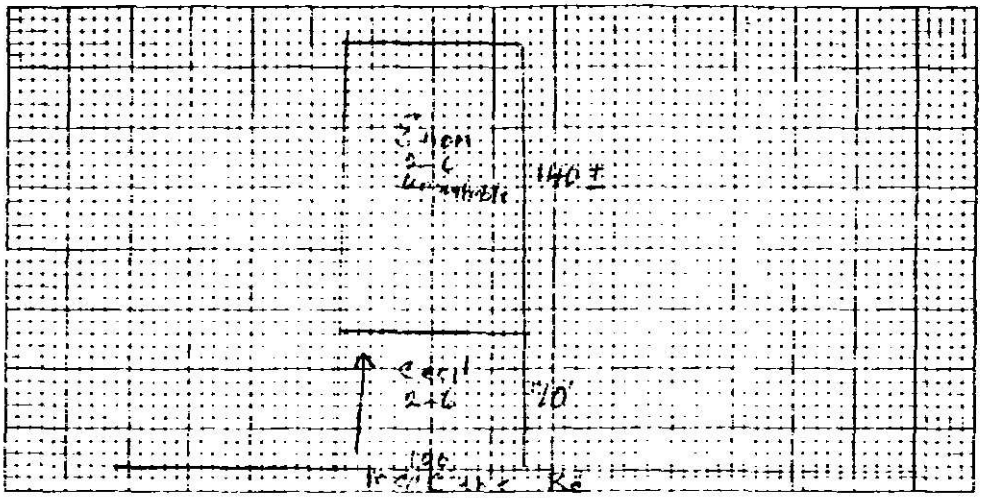
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Kidd, (LAST) William (FIRST) Brevard (MIDDLE)

ADDRESS OF OWNER Rt. 9, Box 255, ~~Matthews~~, NC ZIP ~~28105~~ 28208

LOCATION OF PROPERTY McClure Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO.



PLOT PLAN

This is to certify that the soil and site evaluation made by the Mecklenburg County Department of Environmental Health on the lot described on the plot plan was investigated 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 ~~with~~ subsurface, soil absorption effluent disposal subject to the following requirements and stipulations:

1. [illegible] the Mecklenburg County Department [illegible] wastewater treatment system [illegible]
2. The [illegible] determined by the Mecklenburg County Department [illegible] above and in the [illegible]
3. The [illegible] system installed in [illegible]
4. This [illegible] indicated as acceptable for [illegible] 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. Kearney
Soil Scientist

EHO-5-76

Mike Sekta
Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 19521

T.C. NO. PO 025-171-14,15

(Ground Absorption Sewage Disposal)

OWNER: William Kidd
ADDRESS: R-9 Box 258 28

PLAT NO:
LOT SIZE: 20,000

LOCATION OF SITE: McClure Rd

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U 2-6	S (PS) U 2-6	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) Mixed Clay	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) U Blocky	S PS (U) Weak Blocky	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) U 40"	S PS (U) 30-40	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U None	S PS (U) Clay	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) U Adequate	S PS (U) slow	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IVa	IVa		
9. SITE CLASSIFICATION	P. Suitable	U Unsuitable		
10. SOIL SERIES	Cecil	ENON		

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)

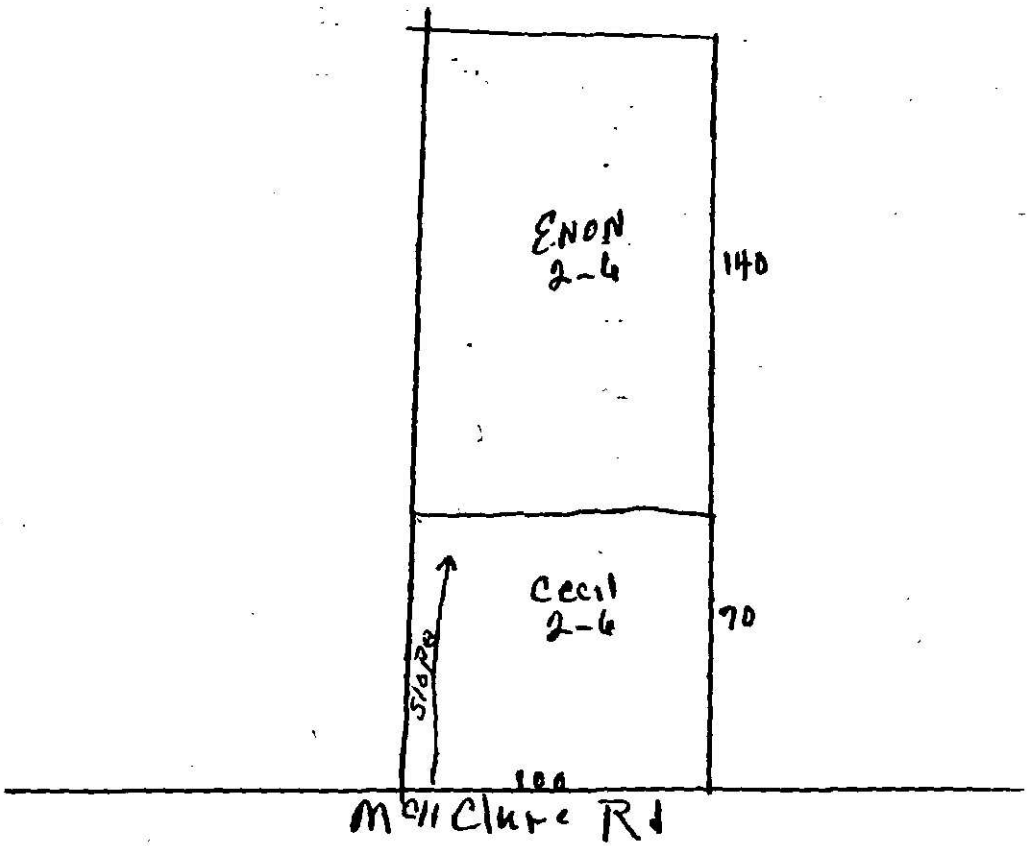
Recommendations/Comments: The P. Suitable Soil CANNot Be Reached By Gravity.

Described by: W. B. Ramsey
Title: Soil Scientist

Date: 4-20-83

EHD 539 (Revised: 6/82)

✓


ENON
2-4
140
Cecil
2-6
70
SLOPE
100
McClure Rd

Date Issued 1-15-85 Serial No. 8114

SIR No. 19521

T. C. No. 025-171-32

Map Date L, CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

IMPROVEMENT PERMIT

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Kidd, (LAST) James (FIRST) K. (MIDDLE)

ADDRESS OF OWNER Rt. 1, Box 276, Huntersville, NC ZIP 28078

LOCATION OF LOT 4219 McClure 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 ~~19521~~ 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.

*** LIFT STATION WILL BE REQUIRED ***

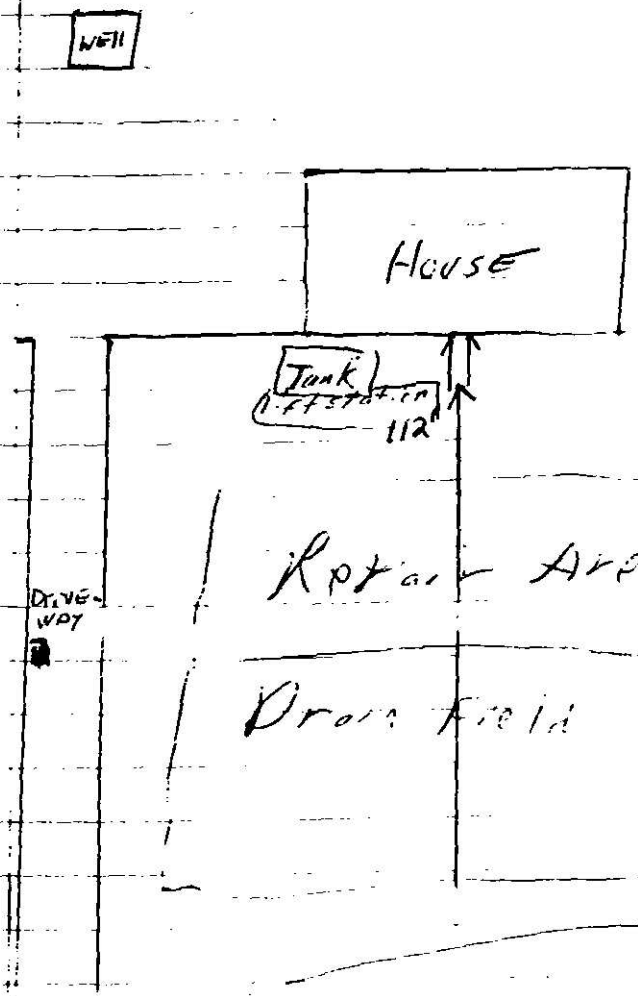
Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

File # 19521



James K. Kadel
1-25-85

Date Received 1-14-85

SEE INSTRUCTIONS ON BACK

CAR (S) Application No. 19521

~~No~~ 025-171-~~14,15~~

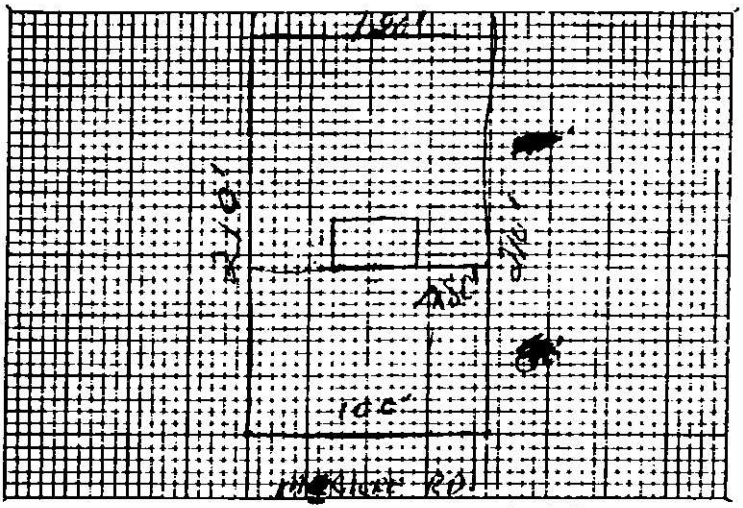
Map Date L 32

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 K.D.J. (LAST) JAMES (FIRST) E (MIDDLE)

14) ADDRESS OF OWNER Rt. 1, Box 276 Huntersville, NC 28078

15) PHONE NO. Home 399-3161 Office 393-4567

16) LOCATION OF SYSTEM 4219 McClure Rd. (STREET OR COUNTY ROAD)

17) SUBDIVISION ____ Lot No. 32 Block No. ____

Map Book No. 025 Page No. 171

18) DEED REFERENCE — DEED BOOK 1755 [redacted] AT PAGE 662

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ____ NO DATE RUN 4-85 PS

20) PTR NUMBER (See Instructions) 19521

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.

1-14-85
DATE OF APPLICATION

OWNER K.D.J. James E

EHD-S-76

Environmental Health Department's Copy

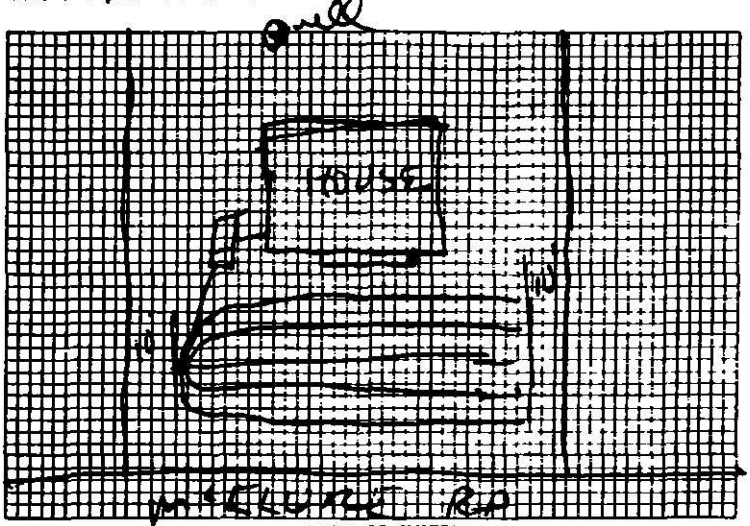
Date Issued 10-19-85 Serial No. 08587 ICAR(S) Permit No. 19521

T. C. No. 0025-171-32

Map Date 6

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 19521, dated 1-14-85 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 11-14-85, 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 5 x 80'

Distance from House 5'+

Distance from Property Line 10'+

Distance from Well 50'+

NAME OF OWNER KIDD, JAMES K

LOCATION OF PROPERTY 4219 McCLURE 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.

5 line x 80 long x 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

Department's Copy

C of A (s) No. 19521

Date Issued 11-12-05 **Serial** 8029 T C. No. PO 025 171 32 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 KIDD (LAST) JAMES (FIRST) K (MIDDLE)

Location of Property 4219 MCCLURE RD

Application Number 19521 Permit Number 19521

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PVC

Total Length of Drain Tile 400 Number of Lines 5

Depth of Filter Material 12" Cover Depth 2

Water Supply Source well Distance from Water Source 50'

Excavation Inspected 11-12-05 (DATE) Tank Inspected 11-12-05 (DATE)

Nitrification Field Inspected 11-12-05 (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, 1500ST, CON, 1200SFT, 12-, CEDIC

Environmentalist

EHD-5-76

Environmental Health Department's Copy