Date Received 1-23-73

APT No 5452

T C No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Barnette (LAST) Henry (FIRST) H. (MIDDLE)

2) ADDRESS OF OWNER Rt. 1, Box 496 A Huntersville ZIP 28078

3) PHONE NO Home 875-6849 Office

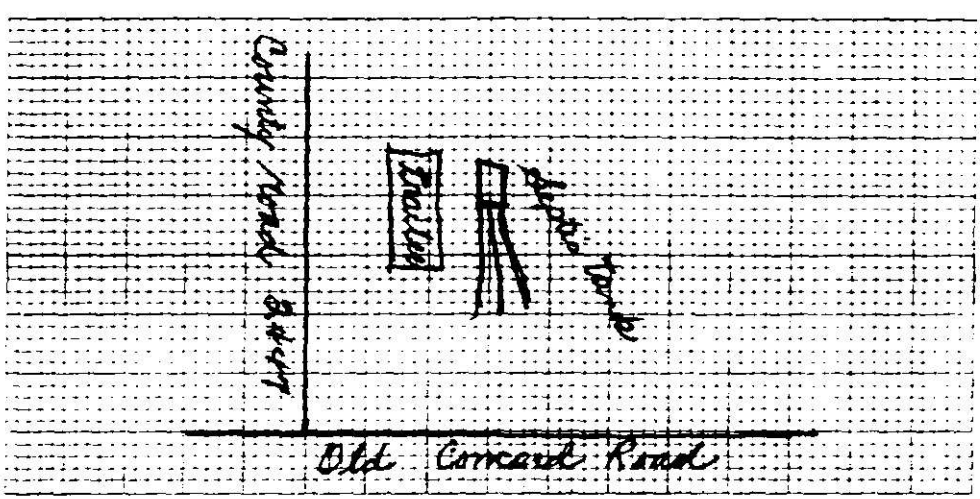
4) LOCATION OF PROPERTY road 3447 of Old Concord Road (STREET OR COUNTY ROAD)

5) SUBDIVISION LOT NO BLOCK NO

MAP BOOK NO PAGE NO

6) DEED REFERENCE DEED BOOK 1657 PAGE NO 4

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 here inabove 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

Henry H. Barnette
OWNER

FORM NO E-1-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No.

PTR No. 5452

T C No 019-221-03

Date Issued January 26, 1973

Map Date 2-23-72

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

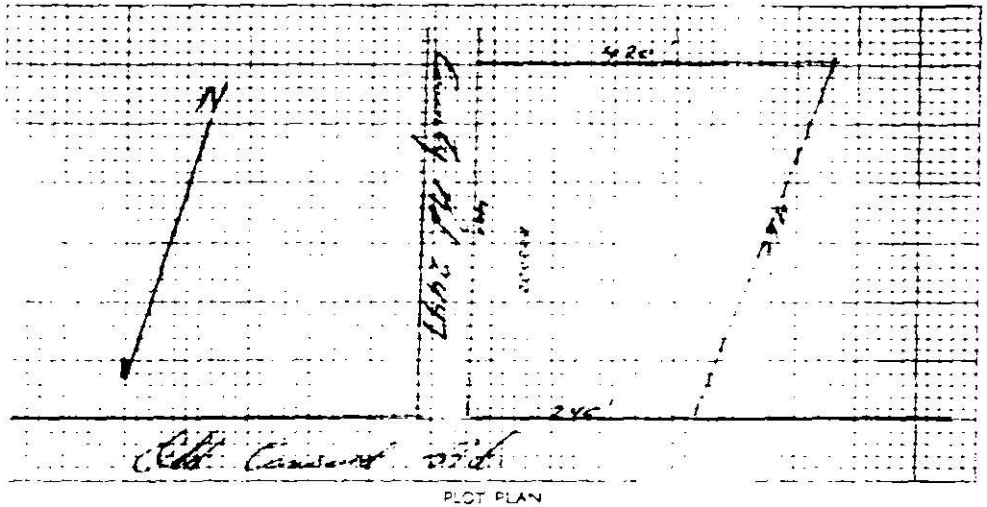
PERCOLATION TEST REPORT

NAME OF OWNER Barnette (LAST) Henry (FIRST) (MIDDLE)

ADDRESS OF OWNER Route 2, Box 496-A, Huntersville, (ZIP) 28078

LOCATION OF PROPERTY County Road 2447 (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO



PLOT PLAN

This is to certify that a percolation test has been run and 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 plat.

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 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 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 which this percolation test was run.
4. This approval is void if any grading, filling or construction, including the placing of fill material 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.

John A. Rhinson

Director, Environmental Health Division or Authorized Section Head

FORM NO. E-2-4-1-71

HEALTH DEPARTMENT'S COPY

Date Received 1/23/73

ICAR (S) Application No. 5452

T. C. No. _____

Map Date _____

MECKLENBURG COUNTY HEALTH DEPARTMENT

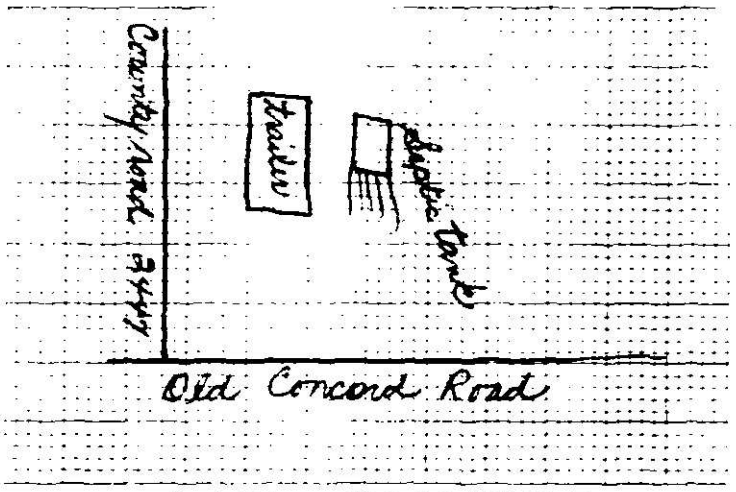
ENVIRONMENTAL HEALTH DIVISION

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

Install a new individual septic tank wastewater treatment system with subsurface soil absorption effluent discharge

Alter or Repair an individual septic tank wastewater treatment system with subsurface soil absorption effluent discharge



2

4 Water Supply
A Individual Well
B Governmental System
C Community System
Well source
2 Governmental
Sewage System
House located within 200 feet of public sewer Yes X No
House located within 200 feet of community sewer Yes X No
FHA Case No.
VA Case No.

3 PLOT PLAN ACCURATELY DIMENSIONED

13 NAME OF OWNER Barnette (LAST) Henry (FIRST) G. (MIDDLE)

14 ADDRESS OF OWNER Route 1, Box 496A Huntersville N C

15 PHONE NO Home 875-6849 Office

16 LOCATION OF SYSTEM Road 2447 (STREET OR COUNTY ROAD) of Old Concord Road

17 SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No. _____ Page No. _____

18 DEED REFERENCE - DEED BOOK 1657 AT PAGE 4

19 HAS A PERCOLATION TEST BEEN RUN? YES X NO DATE RUN _____

20 PTR NUMBER (See Instructions) _____

The undersigned property owner agrees that he has read the foregoing application and that the contents of same are true and understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true

January 23, 1973
DATE OF APPLICATION

Henry G. Barnette
OWNER

FORM NO. E-4A(1)

HEALTH DEPARTMENT'S COPY

Date Issued January 26, 1973

Serial No. 2469

LA No. 5452

T C No 019-221-03

Map Date 2-23-72

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 Barnette (LAST) Henry (FIRST) G. (MIDDLE)

ADDRESS OF OWNER Route 1, Box 496-A, Huntersville, N.C. ZIP 28078

LOCATION OF LOT County Road 2447 (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. _____ BLOCK NO _____

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 5452. 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

M. L. Kelly
Environmentalist

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

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

HEALTH DEPARTMENT'S COPY

Serial No. [illegible]510

ICAR(S) Permit No. 5782

Date Issued 17 Apr 73

T.C. No. C19-221-03

Map Date 23 Feb 72

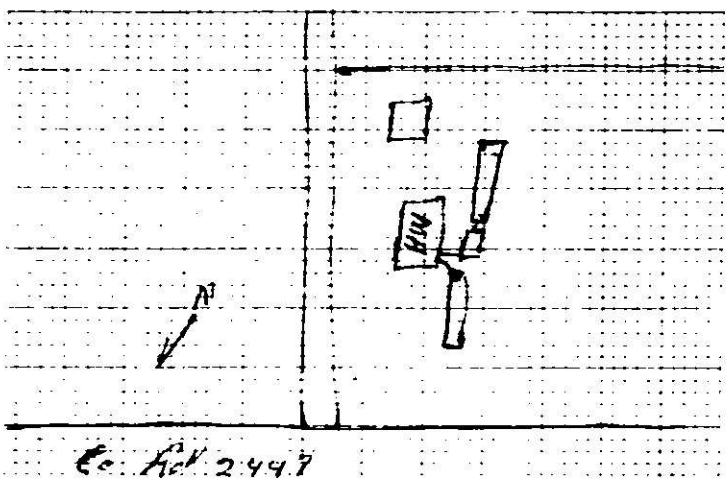
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

Permission is hereby granted 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 5952 dated 23 Jan 73 and is void if the information provided in the application is not true or erroneous. All work shall be completed on or before 26 May 73 after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 1000

Tank Construction PC

Absorption and/or Nitrification Lines

Total Line Length 200' + 100' = 300'

Number of Lines 4 (10' x 25' x 12")

Distance from House 10'

Distance from Property Line 15'

Distance from Well 100'

NAME OF OWNER B. Smith Henry St.

LOCATION OF PROPERTY adj. 624 Concord Rd. (2447)

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 unusable.

Comments Claudius Morrison

Division or Section Head

M. L. Kirby
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 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 NO. E 5-4-[illegible]

[illegible] CLIENT'S COPY

Date Issued 19 Apr 73

Serial No. 3159

C of A (s) No 5952

T C No C19-221-C3

Map Date 23 Feb 72

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Barnette, Henry W.
LAST FIRST MIDDLE

Location of Property E. Side 2447 Statesville Ave (Hwy 21)

Application Number 5952 Permit Number 5952

Inspection Data:

Liquid Capacity of Tank 1000 Tank Material PE

Total Length of Drain Tile 300' + 100' Lat Number of Lines 9 (3 x 75' + 1 x 17')

Depth of Filter Material 12" Cover Depth 18"

Water Supply Source Well Distance from Water Source 100'+

Excavation Inspected 18 Apr 73 DATE Tank Inspected 18 Apr 73 DATE

Nitrification Field Inspected 18 Apr 73 DATE

Washing Machine Line Inspected, If Applicable 19 Apr 73 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 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(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 Claudius Harrison (Contr.)

Environmentalist

FORM NO. E-6-4-1-71

HEALTH DEPARTMENT'S COPY