Date Received 31 Oct 74

Application No. 7476

T. C. No 005-111-01

Map Date —

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Crossman (LAST) Robert (FIRST) M. (MIDDLE)

ADDRESS OF OWNER I C Box 712 Cornelius ZIP 28031

PHONE NO. Home 892-1866 Office _____

LOCATION OF PROPERTY 11417 73 (STREET OR COUNTY ROAD) Coronado Dr.

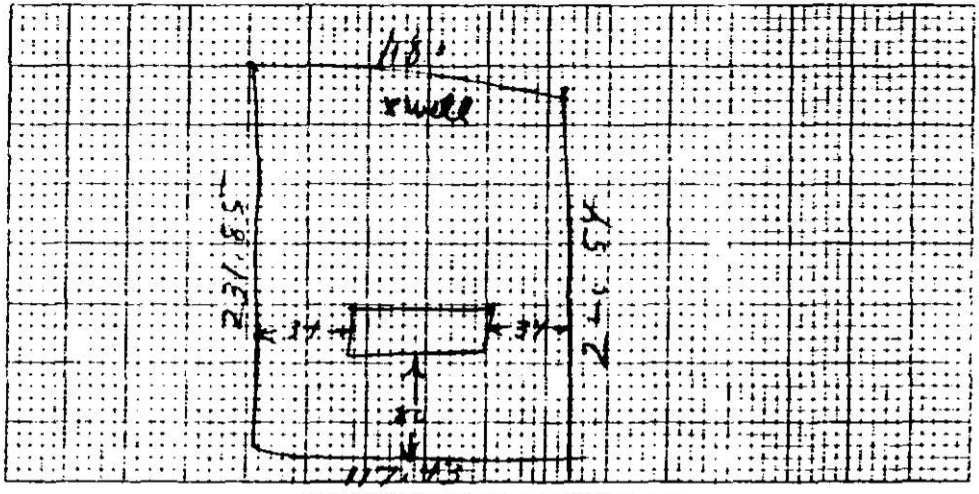
SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. _____

DEED REFERENCE: DEED BOOK _____ PAGE NO. _____

WELL CONTRACTOR McCall LICENSE NO. _____

Application is hereby made to the Mecklenburg County Health Department for a permit to drill a water well on the hereinabove described lot to be used as a source of ✓ individual, _____ semi public, or _____ public water supply:



ACCURATELY DIAGRAM & DIMENSION LOT

31 Oct 74
DATE OF APPLICATION

OWNER Robert M. Crossman

Application approved and permit hereby granted

Permit No: 7476

31 Oct 74
ENVIRONMENTALIST

FORM NO. E-28-4-1-71

HEALTH DEPARTMENT'S COPY

Date Received 2-11-71

APT No 7476

T C No 005-111-01

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Nantz (LAST) Graham (FIRST) Walker (MIDDLE)

2) ADDRESS OF OWNER RFD 6, Box 590A, Charlotte, N. C. ZIP 28206

3) PHONE NO Home 392-3144 Office

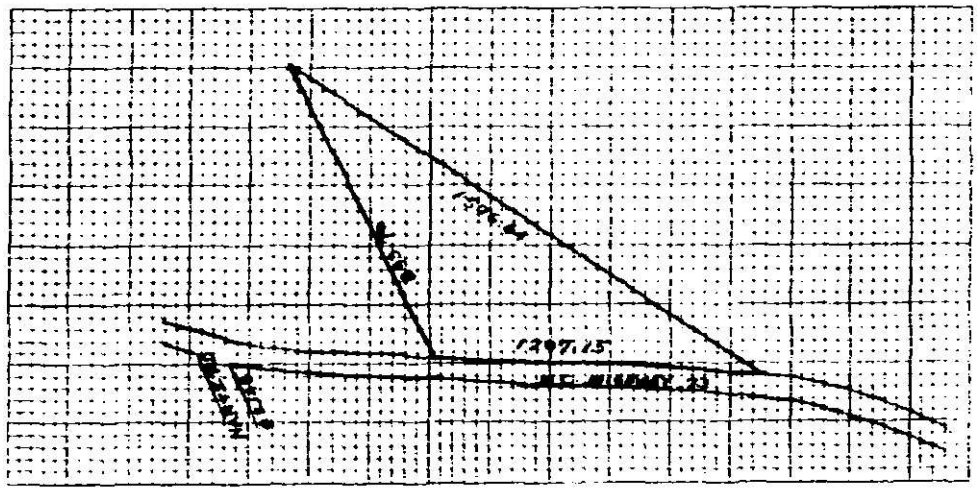
4) LOCATION OF PROPERTY N.C.Highway 73 near Nantz Rd., Lemley Township (STREET OR COUNTY ROAD)

5) SUBDIVISION LOT NO BLOCK NO

MAP BOOK NO PAGE NO TAX CODE 005-111-01 (8.281 acres)

6) DEED REFERENCE DEED BOOK 2393 PAGE NO 413

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

Graham Walker Nantz

OWNER, Graham Walker Nantz
By Ray Rankin, Attorney

FORM NO E-1-9-1-70

HEALTH DEPARTMENTS COPY

MECKLENBURG COUNTY HEALTH DEPARTMENT

INTER-OFFICE COMMUNICATION

DATE: October 4, 1974

TO: John R. Adkisson

FROM: W. Everette Lynn, Jr. WEL
Soil Scientist

SUBJECT: Apt. 7476 (R. M. Croasmun)
Highway 73
10-4-74

The lot consists of soils of the Cecil series. These soils have good drainage, good aeration and moderate permeability.

Based on this investigation, the lot is recommended for installation of a septic tank system. System design should be based on a 60 min./in. perc. rate.

WEL:dsb

Serial No. 4690

PTR No 7476

T C No 005-111-01

Date Issued 10-4-74

Map Date

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

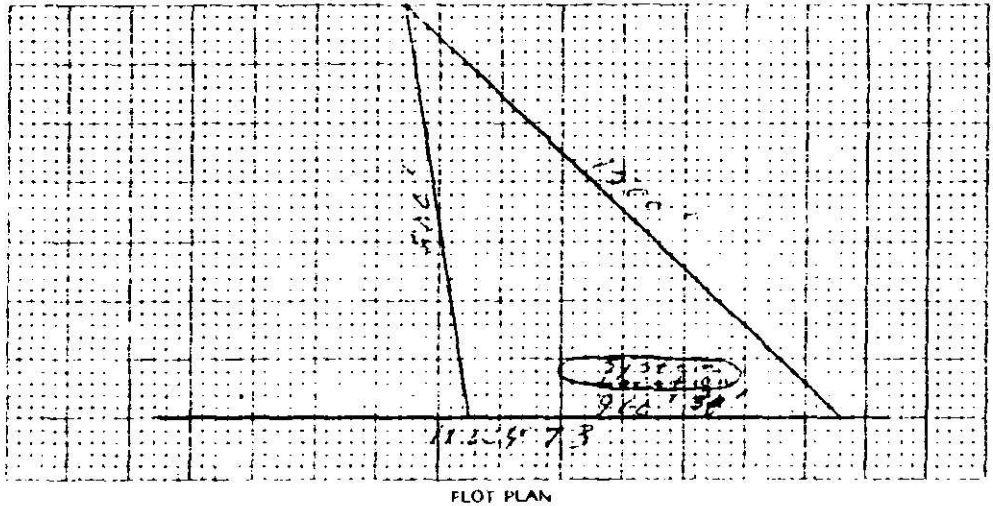
PERCOLATION TEST REPORT

NAME OF OWNER Croasmun (LAST) Robert (FIRST) McHenry (MIDDLE)

ADDRESS OF OWNER P. O. Box 712, Cornelius, N.C. ZIP

LOCATION OF PROPERTY Highway 73 (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 3 BLOCK NO



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 septic 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 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

John A. Brunson
Director, Environmental Health Division or Authorized Section Head

Soil Scientist

FORM NO. E-2-9-1-72

HEALTH DEPARTMENT'S COPY

Date Received 10-3-74

ICAR(S) Application No. 7496

T C No 005-111-01

Map Date

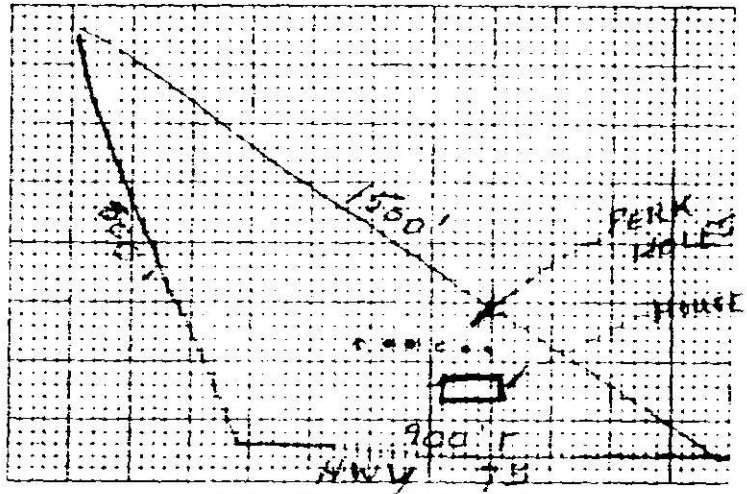
MECKLENBURG COUNTY HEALTH DEPARTMENT

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

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) 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 [illegible] (LAST) [illegible] (FIRST) [illegible] (MIDDLE)

14) ADDRESS OF OWNER [illegible]

15) PHONE NO Home [illegible] Office —

16) LOCATION OF SYSTEM [illegible] (STREET OR COUNTY ROAD)

17) SUBDIVISION [illegible] Lot No. 3 Block No. _____

Map Book No _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES _____ NO DATE RUN [illegible]

20) PTR NUMBER (See Instructions) _____

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

[illegible]
DATE OF APPLICATION

[illegible]
OWNER

FORM NO. E-4-4-1-(2)

HEALTH DEPARTMENT'S COPY

Date Issued 10-4-74

Serial No. 4471

IMPROVEMENTS PERMIT

LA No 7476

T C No 005-111-01

Map Date

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 Croasmun (LAST) Robert (FIRST) Mellenry (MIDDLE)

ADDRESS OF OWNER P.O. Box 712, Cornelius, N.C. ZIP

LOCATION OF LOT Highway 73 (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 7476. 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

Director Environmental Health Division or Authorized Section Head

FORM NO E-3-9-1-72

HEALTH DEPARTMENTS COPY

Date Issued 5 Dec 74

Serial No. [illegible]

ICAR(S) Permit No 7976

T C No C05-111-01

Map Date

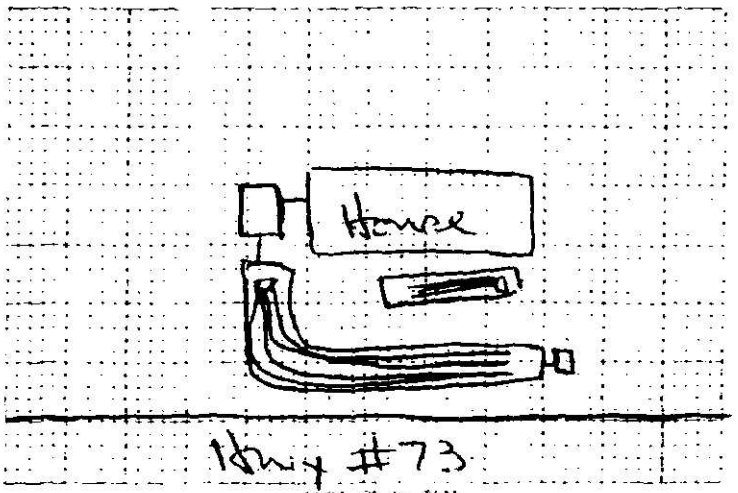
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 ✓ 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 7976, dated 10-4-74 and this permit shall be void and of no effect if the information provided in the application is not factual or is erroneous. All work shall be completed on or before 5 Jan 74 after which date this permit will be null and void.



PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 1000 gal

Tank Construction Precast Concrete

Absorption Trench or Bed Dimensions

Total Length 400' & 150'

Number & Lines @ 10' x 100'

Distance from Well 100'

NAME OF OWNER Robert Crossman

LOCATION OF PROPERTY 18760 Hwy #73

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 water 75 x 50'

aeration pit 2½' x 7' x 4'

Division of Sanitation Head

G. McReynolds
Environmentalist

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

Form E-5-9-1-72

Serial No.

C of A (s) No 7476

Date Issued 13 Dec 74

T C No 005-111-01

Map Date —

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 Crossmon, Robert (LAST, FIRST, MIDDLE)

Location of Property 18760 Hwy 73

Application Number 7476 Permit Number 7476

Inspection Data:

Liquid Capacity of Tank 1000 gal Tank Material AC

Total Length of Drain Tile 400' & 150' Number of Lines 4 (10' x 100' ft) 3 (7½' x 50' ft)

Depth of Filter Material 17 Cover Depth 15"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 13 Dec 74 (DATE) Tank Inspected 17 Dec 74 (DATE)

Nitrification Field Inspected 13 Dec 74 (DATE)

Washing Machine Line Inspected, If Applicable 13 Dec 74 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface soil absorption, effluent discharge as described above and it has been ~~installed~~ 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 is not in any way a 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 as are in the permit 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 Aeration pit 7½' x 4' x 4½' deep

F. J. Ervin

Environmentalist

FORM NO E-6-9-1-72

SEE INSTRUCTIONS ON BACK

Date Received 12/2/7[illegible]

ICAR (S) Application No 7476

T C No 5-III-14

Map Date [illegible]

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

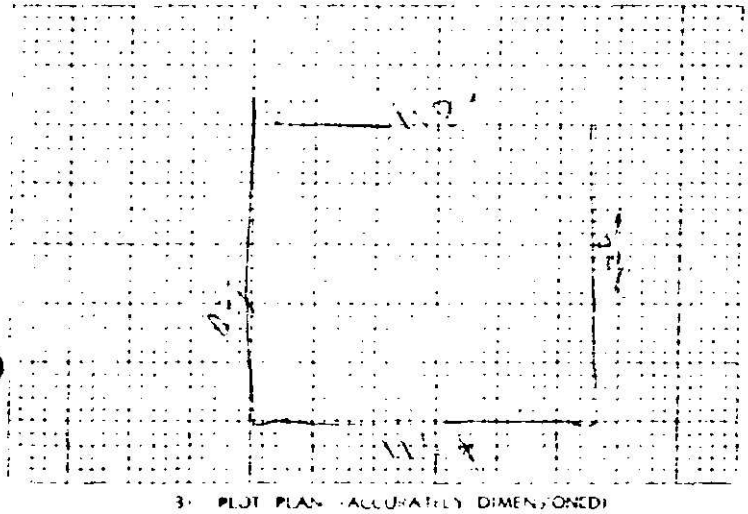
Application for an
Installation, Construction, Alteration, and/or Repair Permit
Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge

The owner of the property described hereinafter hereby applies to the Mecklenburg County Department of Environmental Health for a permit to

1) Install or Construct 2) 1/4 Alter or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption effluent discharge

		Yes	No
3)	Mobile Home		
4)	Pool		
5)	No. of Bedrooms		
6)	Business Use		
	Employees		
7)	Washing Machine		
8)	Garbage Disposal		
9)	Dishwasher		
10)	Water Supply		
	A. Individual Well		
	B. Governmental System		
	C. Community System		
	1. Well Name		
	2. Community Name		
11)	Sewage System		
	Property located within 200 feet of public sewer		
	Property located within 200 feet of community sewer		
12)	FHA Case No.		
13)	VA Case No.		

3) PLOT PLAN (ACCURATELY DIMENSIONED)



13) NAME OF OWNER _____ (LAST) _____ (FIRST) _____ (MIDDLE)

14) ADDRESS OF OWNER _____

15) PHONE NO Home _____ Office _____

16) LOCATION OF SYSTEM _____ (STREET OR COUNTY ROAD) _____

17) SUBDIVISION _____ Lot No _____ Block No. _____

Map Book No _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? YES NO DATE RUN _____

20) PTR NUMBER (See Instructions)

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.

DATE OF APPLICATION _____ OWNER _____

EHD-5-76

Environmental Health Department's Copy

Date Issued 12/6/76

Serial No. 0340

LA No. 7476

T.C No 005=111-16

Map Date 6-4-76

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 Croasmun (LAST) Robert (FIRST) M. (MIDDLE)

ADDRESS OF OWNER P. O. Box 712, Cornelius, N. C. ZIP

LOCATION OF LOT Highway 73 (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 16 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 7476 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

Environmentalist

Environmental Health Director, or Authorized Section Head

EHC 5-76

Environmental Health Department's Copy