Date Received 9-22-82

MECK COUNTY DEPARTMENT OF
RE[illegible]
SFP 22 [illegible]
ENVIRONMENTAL HEALTH

SIR No. 19017

T. C. No. 227-134-31

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER J. KEN Williams Co. Inc.
LAST FIRST MIDDLE

2) ADDRESS OF OWNER 7050 Boulwood Rd. ZIP 28211

3) PHONE NO. Home 366-0913 Office 366-0913

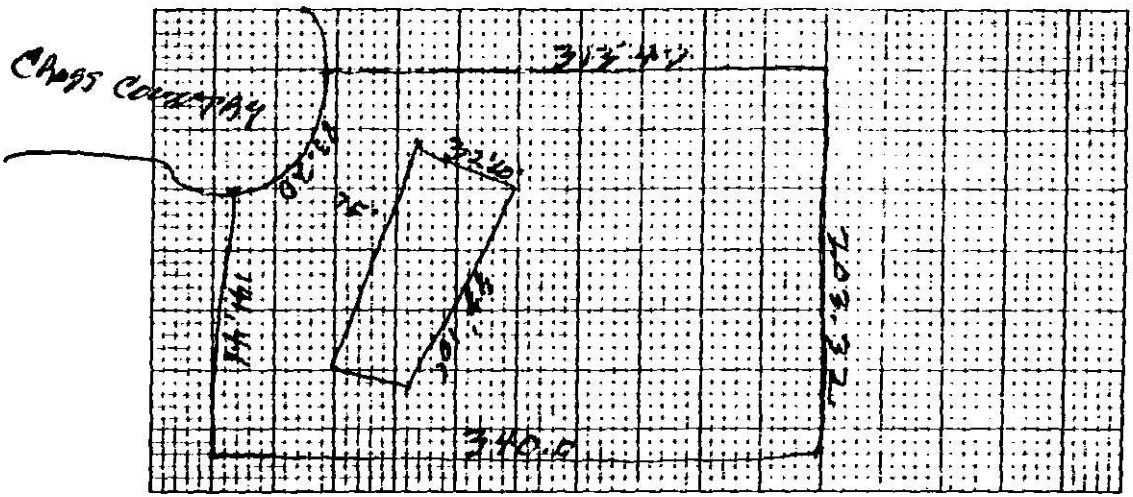
4) LOCATION OF PROPERTY 2922 Cross Country Rd
STREET OR COUNTY ROAD

5) SUBDIVISION Providence Plantation LOT NO. 31 BLOCK NO. C

MAP BOOK NO _____ PAGE NO. _____

6) DEED REFERENCE DEED BOOK _____ PAGE NO. _____

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

J. K. Williams
OWNER

EHD-S-76

Environmental Health Department's Copy

Serial No. 4722

PTR No. 19017

T. C. No. 227-134-31

Date Issued 9-27-82

Map Date

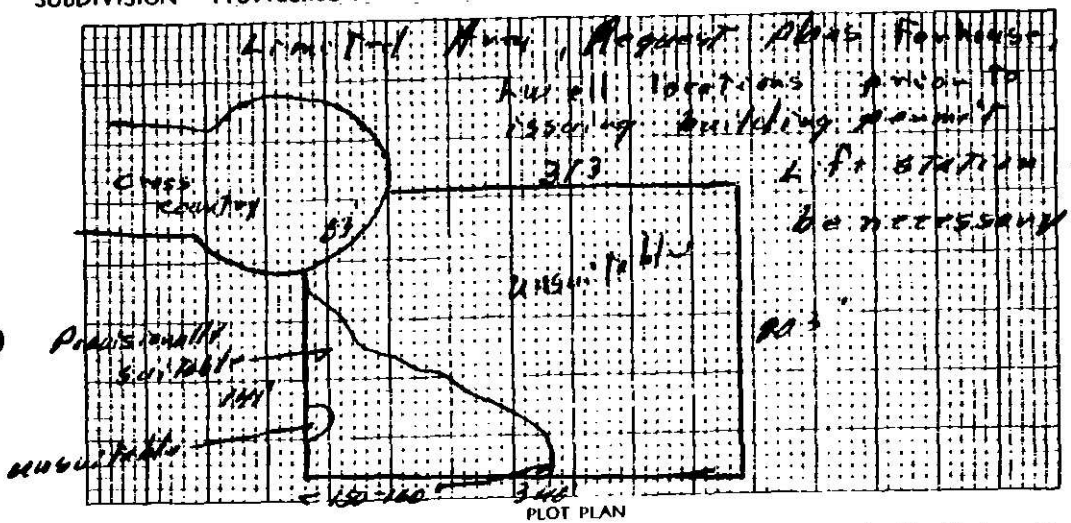
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER J. Ken Williams Co., Inc. (LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 7050 Burlwood Rd., Charlotte, NC ZIP 28211

LOCATION OF PROPERTY 2922 Cross Country Road (STREET OR COUNTY ROAD)

SUBDIVISION Providence Plantation LOT NO. 31 BLOCK NO. C



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 said investigation was conducted on that portion of the lot as indicated on the above plot. The said lot is approved **Provisionally Suitable** 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] after [illegible] the proposed [illegible] be issued by the Mecklenburg County Department of Environmental Health prior to the [illegible] of the wastewater treatment system on the said lot.
2. The size of the septic tank wastewater treatment system which must be [illegible] be determined by the Mecklenburg County Department of Environmental Health [illegible] the permeability rate obtained above, and on the size and type of building constructed there on.
3. This approval is valid only if the system is installed on the [illegible] and staked as acceptable for system installation on the above plot.
4. This approval is not [illegible] grade; filling [illegible] the original [illegible] a well is 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 unacceptable for installation. Construction [illegible] 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.

William B. Marsh
Soil Scientist

Mike Sekler
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 19017

T.C. NO. 229-1343/

(Ground Absorption Sewage Disposal)

OWNER: J. Ham Williams Co Inc. PLAT NO: L31 BC
ADDRESS: 7050 Fernwood Rd LOT SIZE: Approx 70 acre
Charlotte N.C.
LOCATION OF SITE: 2722 Cross Country Road

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. ~~SLOPE~~ (%)	(S) PS U 2-8%	(S) PS U 2-6%	S PS (U) Complex slopes	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) Clay U	S PS (U) 2-1 Clay	S (PS) Clay U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) Blocky U	S (PS) Blocky U	S (PS) Blocky U	S PS U
4. SOIL DEPTH (inches)	(S) PS U 48"	(S) PS U 48"	S PS (U) Depth Variable	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	(S) None PS U	(S) None PS U	(S) None PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	(S) Prior to ground water PS U	S Seasonal / Perched Water table PS (U) 36"	S Eroded Areas Channel Water PS (U)	S PS U
7. OTHER (Specify)	S (PS) Limited Area-size U Lots	S PS U	S PS U	S PS U
8. SOIL GROUP	IVA	IVB	IVA	
9. SITE CLASSIFICATION	Provisionally Suitable	unsuitable	unsuitable	
10. SOIL SERIES	Cecil	Helena	Eroded	

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: Strongly recommend plans for house, well & system Location be submitted & Field-checked prior to issuance of permit to Building Insp.*

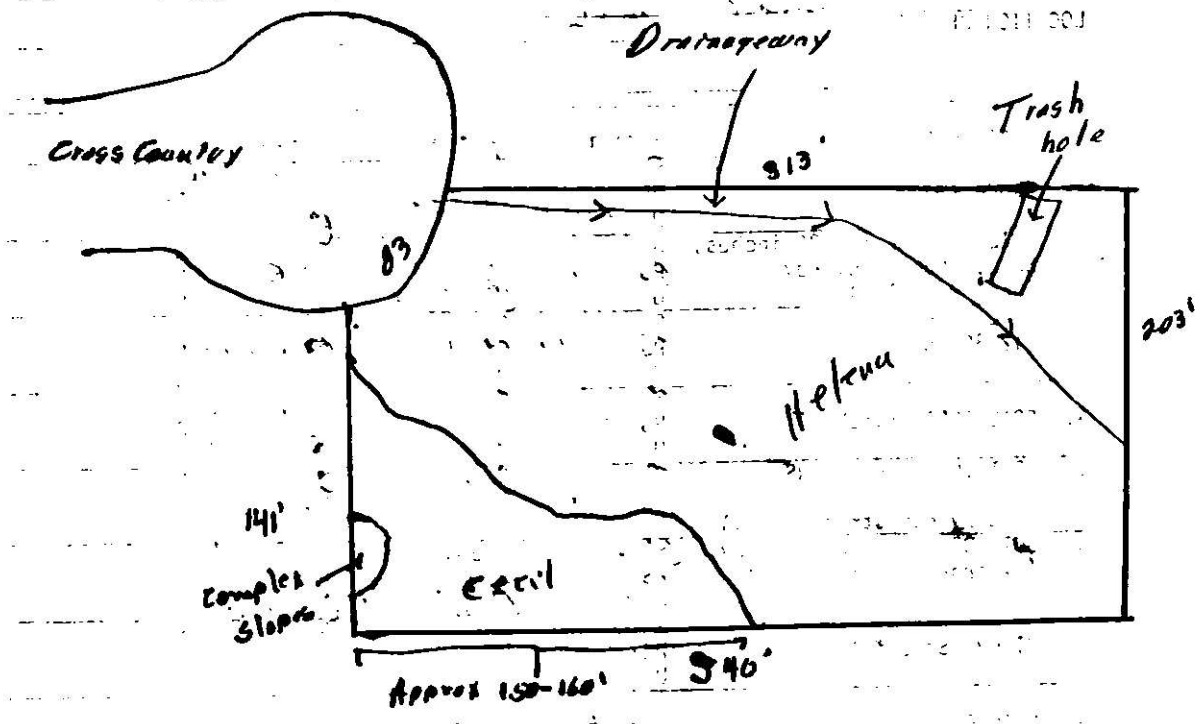
Described by: William R. Mayberry
Title: Soil Scientist

Date: 9-24-82

EHD 539 (Revised: 6/82)

* Lift station may be required

✓


Drainageway
Trash hole
Cross Country
913'
83
203'
Helena
141'
complex slopes
Excel
Approx 150-160'
340'

SEE INSTRUCTIONS ON BACK

Date Received 9-27-82

ICAR(S) Application No. 19017

T. C. No. 227-17-31

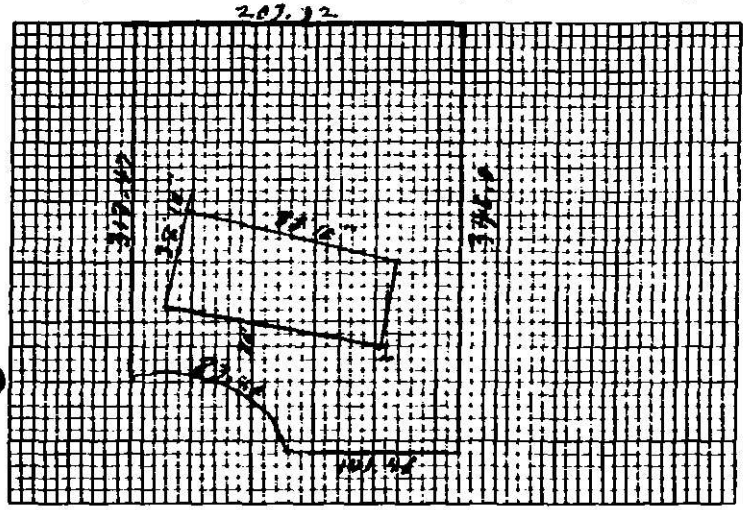
Map Date 4

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.



31) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ____Yes ____No
Residence ✓Yes ____No

4) No. of Bedrooms 4

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 J. Ken Williams Co. Inc.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 7066 Braywood Rd.

15) PHONE NO. Home 366-0913 Office 366-0913

16) LOCATION OF SYSTEM 2922 Cross Country Rd
STREET OR COUNTY ROAD

17) SUBDIVISION Prev. Plantation Lot No. 31 Block No. C

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.

9-27-82
DATE OF APPLICATION

J. Ken Williams
OWNER

EHD-5-76

Date Issued 10-1-82

Serial No. 5949

LA No. 19017

T. C. No. 227-131-31

Map Date

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 J. Ken Williams Co., Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 7050 Burlwood Road, Charlotte, NC ZIP 28211

LOCATION OF LOT 2922 Cross Country Road
(STREET OR COUNTY ROAD)

SUBDIVISION Providence Plantation LOT NO 31 BLOCK NO. C

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 19017. 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.

*** LIFT STATION MAY BE NEEDED ***

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

Serial No. 6020

ICAR(S) Permit No. 19017

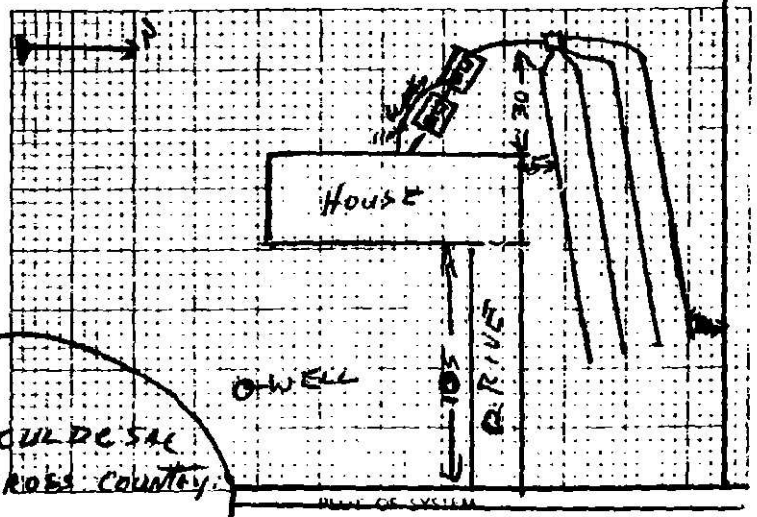
Date Issued 2-21-83

T. C. No. 227-134-31

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 Y 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 19017, dated 9-27-82 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 MARCH 28, 1983 after which date this permit shall be null and void



COULD SELL TO CROSS COUNTRY.

Permeability Rate P.S. 1in

Liquid Capacity of Tank 1500 gal

Tank Construction Pre Cast Concrete

Absorption and or Nitrification Lines

Total Line Length 400 Lin. FT

Number of Lines FOUR

Distance from House 5 FT

Distance from Property Line 10 FT

Distance from Well 750 FT

NAME OF OWNER J. KEN WILLIAMS COMPANY

LOCATION OF PROPERTY 2922 CROSS COUNTRY 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.

FOUR Trenches @ 100FT x 3FT x 12 inches Stone - Grade 885 - Hay on Stone Cover w/m line Plumbed into LIFT STATION. LIFT STATION installed as per State

Comments: ST. Requirements 4 high water alarm - effluent pump - float switches - separate elec. switches -

Division or Section Head

Ralph Miller

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

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

AI-3-30-83

C of A (s) No. 19017

Date Issued 3-30-83 Serial 5691 T. C. No. 227-134-3,

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 J. KEN WILLIAMS Co
LAST FIRST MIDDLE

Location of Property 2922 CROSS COUNTRY RD

Application Number 19017 Permit Number 19017

Inspection Data:

Liquid Capacity of Tank 1500 1000 Tank Material Pre Cast Concrete

Total Length of Drain Tile 400 lin FT. Number of Lines FOUR

Depth of Filter Material 12 inches Cover Depth 12 inches

Water Supply Source well Distance from Water Source 100 FT

Excavation Inspected 3-30-83 DATE Tank Inspected 3-30-83 DATE

Nitrification Field Inspected 3-30-83 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 X 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

Ralph Mullis
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH
RECEIVED
JAN 14 1987
ENVIRONMENTAL HEALTH

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603
Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

(OFFICE USE ONLY)
FILE: 19017
TC:
SERIAL: № 12223
☒ L ☐ CRT

JOB LOCATION

① ADDRESS: 2922 Cross Country Rd (STREET NO. / STREET) ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.: 227 134-31
⑤ SUBDIVISION: Providence Plantation ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: James & Charlotte (FIRST) Kenneth (MIDDLE) Brown Jr. (LAST)
⑨ MAILING ADDRESS: 2922 Cross Country Rd
⑩ CITY: Matthews ⑪ STATE: NC ⑫ ZIP: 28105
⑬ PHONE: (WORK) 376-8561 ⑭ (HOME) 847-0172

REQUEST

This request is for a(n):

⑮ ☐ New permit
⑯ ☒ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☐ Other (specify)

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 4
㉓ Maximum occupancy? 4
㉔ Basement? ☐ yes ☒ no
㉕ Type?
㉖ Maximum number of employees?
㉗ Maximum number of seats?

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☒ Individual well
B ☐ Municipal system
C ☐ Community well
D ☐ Community system

㉙ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Charlotte K Brown
Date: 1-14-87

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

. . . No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by this Department.

. . . This permit is not transferable, and shall become null and void 36 months from the date of issuance.

Environmentalist / Date

Director or Authorized Section Head / Date

*This permit must be signed by the Director of Environmental Health or an authorized section head in order to be valid.

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

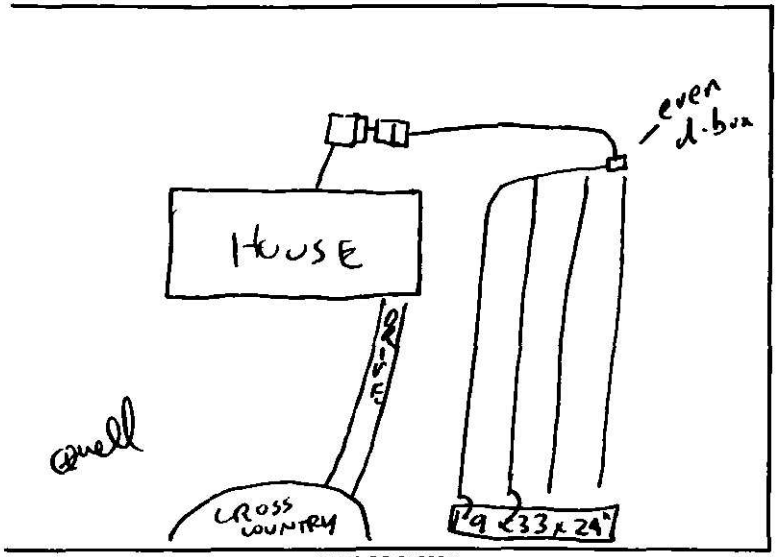
FILE: 19017 DATE: 2-6 87

TC: 227-134 31 p/l

SERIAL № 10417

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 the application dated 1-14-87. All work shall be completed on or before 2-20 87, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Department of Environmental Health before any system can be covered up or placed into service. 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.

REPAIR



PLOT OF SYSTEM

Liquid Capacity of Septic Tank ____ gallons

Liquid Capacity of Dosing Tank — gallons

Tank Construction —

Absorption and/or Nitrification Lines:

Trench Width 9 x 33 x 24" feet

Total Line Length 594 ft³ feet

Number of Lines 2

Depth of Stone 24 inches

Distance from House 5' feet

Distance from Property Line 10' + feet

Distance from Well 50' + feet

NAME OF OWNER BROWN, CHARLOTTE

LOCATION OF PROPERTY 2922 CROSS COUNTRY RD

Comments: 1 Bed 9'x33'x24" trnp on to bottom 2 lines w/ over flow - replace d.box and even distribution 1/4 each

Division or Section Head

Environmentalist Kelly Rudd

* 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.

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER OR AGENTS COPY

C of A (s) No. 19017

Date Issued 2-24-87 Serial 9179 T. C. No. 227-134-31

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner BROWN (LAST) CHARLOTTE (FIRST) (MIDDLE)

Location of Property 2922 CROSS COUNTRY RD

Application Number 19017 Permit Number 19017

Inspection Data:

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile 9x33x24 Number of Lines 2

Depth of Filter Material 24 Cover Depth 2

Water Supply Source well Distance from Water Source 50

Excavation Inspected 2-24-87 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 2-24-87 (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 1987 - REPAIR

Kelly Rawls
Environmentalist

EHD-5-76

Environmental Health Department's Copy