Date Received 1-4-84

MECK COUNTY DEPARTMENT OF
RECEIVED
JAN 4 1984
ENVIRONMENTAL HEALTH

SIR No. 20463

T. C. No. 001-342-05

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

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

2) ADDRESS OF OWNER _____ ZIP _____

3) PHONE NO. Home _____ Office _____

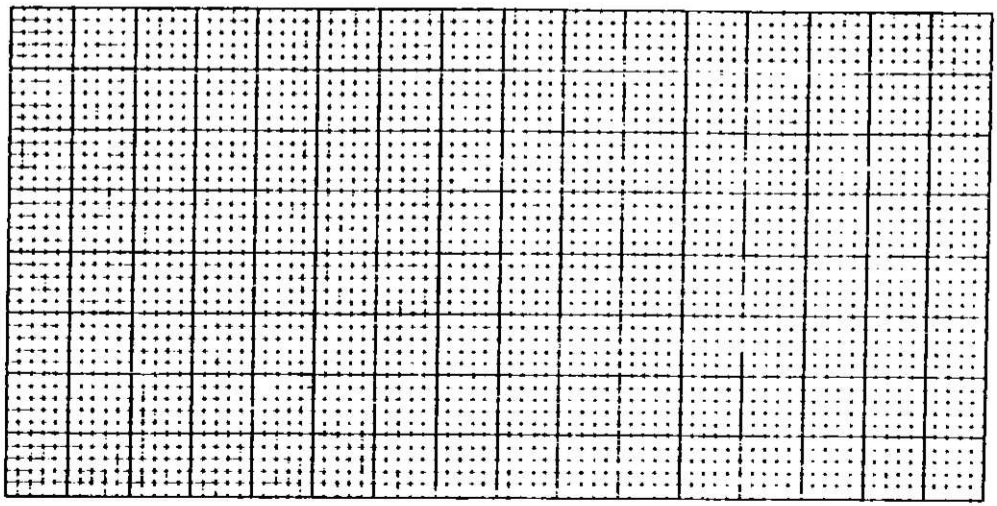
4) LOCATION OF PROPERTY _____ (STREET OR COUNTY ROAD) _____

5) SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

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 o 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

Elvah B Williams
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20463

T.C. NO. 041-3423

(Ground Absorption Sewage Disposal)

OWNER: Clark D. Williams
ADDRESS: 752 Carmella Cir.
Mooresville, N.C. 28115
LOCATION OF SITE: off Davis Road 28115

PLAT NO:
LOT SIZE: 43,560

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS U 2-8%	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) Clay U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) Blocky U	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) 36-48" U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) 36" U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	(S) 48" to PS Ground U water	S PS U	S PS U	S PS U
7. OTHER (Specify)	S PS Note 3 U	S PS U	S PS U	S PS U
8. SOIL GROUP	IVH			
9. SITE CLASSIFICATION	Provisionally Suitable			
10. SOIL SERIES	Cecil Clay Loam			

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)

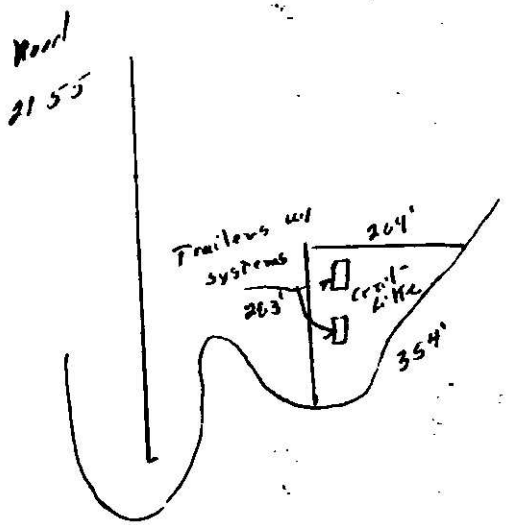
Recommendations/Comments: Lot already has two trailers w/ systems on it.

Described by: William R. Martin
Title: Soil Scientist

Date: 1-05-84

EHD 539 (Revised: 6/82)

14



LAKE
RICHMAN

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203

SIR. NO. 20463
T.C. NO. 001-342-05
DATE: 1-6-84

Elak D. Williams
752 Carpenter Avenue
Mooresville, NC 28115

Re: Property located at Williams Road

Dear Mr. Williams:

At your request, a field investigation was conducted on the property designated above. The soils on the property were found to contain a limited area of provisionally suitable soil for the installation of a ground absorption sewage disposal system. A copy of the site evaluation report is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit plot plans for the proposed construction, well, and ground absorption sewage disposal system to this office. They will be reviewed and if it is found that there is an adequate area of provisionally suitable soil to accommodate the proposed installation, an Improvements Permit will be issued by this office.

If I may be of assistance, please feel free to call.

Sincerely,

Bill D. Hardister, Jr.

Bill D. Hardister, Jr.
Environmental Health Supervisor

BDH/kbg

Enclosure

Date Received 1-20-84

MECK COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH
SEE INSTRUCTIONS ON BACK
RECEIVED
JAN 20 1984
ENVIRONMENTAL HEALTH

CAR(S) Application No. 20463

T. C. No. 001-342-05

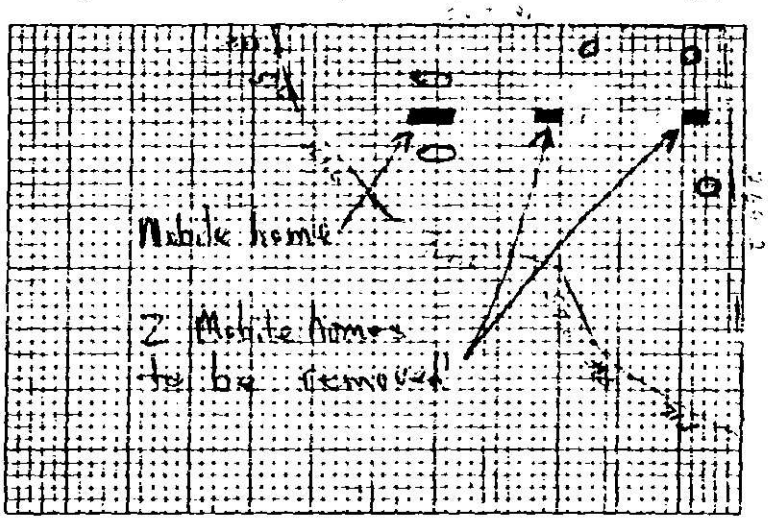
Map Date _____

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 BPM 1/20/84

4) No of Bedrooms 2
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) K. (MIDDLE)

14) ADDRESS OF OWNER [illegible]

15) PHONE NO. Home _____ Office _____

16) LOCATION OF SYSTEM 16029 [illegible] Rd [illegible] Mck Rock
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 [illegible]

20) PTR NUMBER (See Instructions) [illegible]

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.

January 19, 1984
DATE OF APPLICATION

Clark Williams
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Mecklenburg County

Department Of Building Standards And Code Enforcement

P. O. Box 31097

Charlotte, North Carolina 28231-1097

Environmental Health Department
1200 Blythe Boulevard
Charlotte, North Carolina 28203

Attention: Mr. Sexton

Subject: Mobile Home Placement

Dear Mr. Sexton:

The parcel of land located at 16729 Williams Rd. 001-342-05

and further identified by tax parcel number 001-342-05

is zoned RR (Pg. 102).

Permitted uses in this district include: Mobile Homes

Mobile Home Placement on Individual lots are permitted in the RR zoned district

If this office can be of further assistance, please contact us.

Sincerely,

T.H. Benson #605
Zoning Inspector

Form B-152 NS
59/bbb

DATE 1/20/84

TO: COUNTY BUILDING STANDARDS DEPARTMENT
PERMIT ISSUING SECTION

FROM: COUNTY ENGINEERING DEPARTMENT

C01-341-05
PARCEL NUMBER

ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

PROJECT NAME (IF APPLICABLE)

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

		APPROVED		NOT APPROVED
1. SUBDIVISION REGULATIONS		☐		☐
2. FLOODWAY REGULATIONS		☐		☐
3. EROSION CONTROL REGULATIONS		☐		☐
4. COMMERCIAL DRAINAGE PLAN		☐		☐
PROPERTY FRONTS ON THOROUGHFARE	YES	☐	NO	☒
DRIVEWAY PERMIT REQUIRED	YES	☐	NO	☒
PRELIMINARY DRIVEWAY APPROVAL *	APPROVED	☐	NOT APPROVED	☐

REMARKS : _____

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE WHEN PAYING PERMIT FEE.

* PRELIMINARY APPROVAL ENTAILS APPROVAL OF NUMBER OF DRIVEWAYS AND DISTANCE FROM PROPERTY LINE ONLY. CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

8-20-81

ALL OTHER FORMS OBSOLETE

SIGNED: _____

Serial No. 6910

Date Issued 1-24-1984

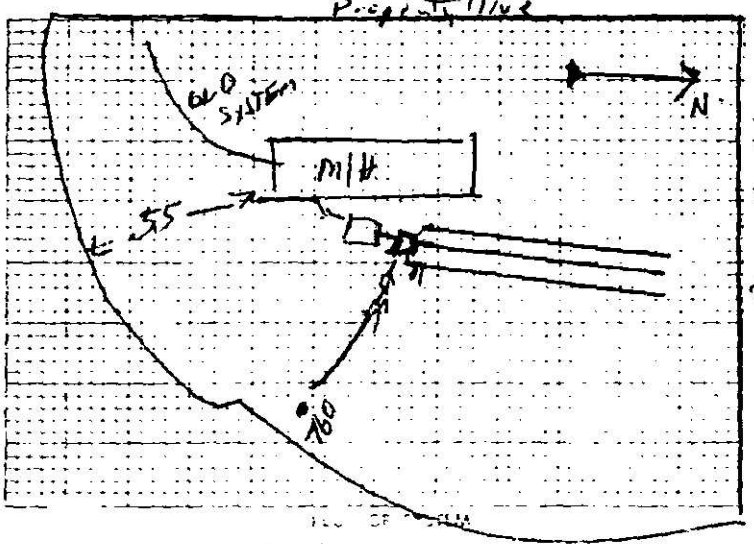
ICAR(S) Permit No. 20463

T. C No. 001-3412-05

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 ___ Install or Construct, X 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 20463 dated 1-19-84 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 FEB 24th 1984 after which date this permit shall be null and void



Permeability Rate PS LTA

Capacity of Tank 1500 gal tank

Construction Pre Cast Concrete

Trench Length 300 lin FT

Number of Trenches Three

Trench Depth 5FT

Distance to Property Line 50 FT Lin. Rear 50 Min

Distance from Well NOT IN USE

NAME OF OWNER Williams, ELAR

LOCATION OF PROPERTY 16721 Williams 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 unaccessible for examination. 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 of any liability resulting from the failure of the system to operate properly.

Comments: Three Trenches to be 100 FT x 3 FT x 12 in Lay on Stone - Lay on Stone Cover - Grade Ads - Plumb w/in Line into Dist Box

Keep Trenches Shallow - 12 inches cover

Install old System completely

Division Section Head

Environmentalist Ralph Mills

* 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

C of A (s) No. 20463

Date Issued 5-16-84 **Serial** 6629 T C. No. 001-342-04

L. CUT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner WILLIAM, ELAK (LAST, FIRST, MIDDLE)

Location of Property 16729 WILLIAMS RD

Application Number 20463 Permit Number 20463

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material Pre Cast Concrete

Total Length of Drain Tile 300 lin FT Number of Lines THREE

Depth of Filter Material 12 inches Cover Depth 1 TO 2 FT
KEEP 100 FT.

Water Supply Source WELL Distance from Water Source NOT INVOLT

Excavation Inspected 5-16-84 (DATE) Tank Inspected 5-16-84 (DATE)

Nitrification Field Inspected 5-16-84 (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 Miller
Environmentalist

EHD-5-76

ENVIRONMENTAL H... USE'S COPY

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY DEPARTMENT OF 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: 20463
TC: 601-342-05
SERIAL: № 13287

RECEIVED
APR 27 1987
ENVIRONMENTAL HEALTH

☒ L ☐ CRT

JOB LOCATION

① ADDRESS: 16729 (STREET NO) Williams (STREET) Rd ② FILE:
③ JURISDICTION: Mecklenburg ④ TAX PARCEL NO: 001-342-05
⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: Elak (FIRST) D (MIDDLE) Williams (LAST)
⑨ MAILING ADDRESS: 752 Carpenter Ave.
⑩ CITY: Mooresville (w.t.s.) ⑪ STATE: N.C ⑫ ZIP: 28115
⑬ PHONE: (WORK) 664-5343 ⑭ (HOME) 664-3116

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? 3
㉕ Type?
㉓ Maximum occupancy? 3
㉖ Maximum number of employees?
㉔ Basement? ☐ yes ☒ no
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: April 23 1987
Date: Ruth O. Williams

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. Use existing system

D. R. Flagmeyer — 4-29-87
(Environmental Health Specialist) (Date)

D. D. Davis — 4-30-87
(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.

DATE: 4/23/87

TO: ENVIRONMENTAL HEALTH

FROM: COUNTY ENGINEERING

EHD FILE _____ JURISDICTION CODE Merk

PARCEL NUMBER 001-342.05

ASSIGNED ADDRESS 16729 Williams Rd

EXISTING ADDRESS _____

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	NOT APPROVED
1. SUBDIVISION REGULATIONS	☐	☐ *
2. FLOODWAY REGULATIONS	☐	☐ *
3. EROSION CONTROL REGULATIONS	☐	☐ *
4. COMMERCIAL DRAINAGE PLAN	☐	☐ *
	PRESENT	**NOT PRESENT**
5. PUBLIC UTILITY EASEMENT	☐ *	☐
	YES	**NO**
6. PROPERTY FRONTS ON THOROUGHFARE	☐ *	☐
	YES	**NO**
7. DRIVEWAY PERMIT REQUIRED	☐ *	☐

*** If checked, further investigation will be required to determine whether a building permit may be issued by Building Standards for the site.**

REMARKS: _____

_____

_____

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE AT BUILDING STANDARDS WHEN PAYING PERMIT FEES.
A CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL THE TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

SIGNED: _____

OPWEAR 02/86