Date Received 7-14-83

MECK COUNTY DEPARTMENT OF
RECEIVED
JUL 14 1983
ENVIRONMENTAL HEALTH

APT No. 19866
PO No. 231-031-3925.11

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER HARRY (LAST) GRIMMER (FIRST) & Co INC (MIDDLE)

2) ADDRESS OF OWNER PO Bx 898 MATTHEWS NC ZIP 28105

3) PHONE NO. Home N/A Office

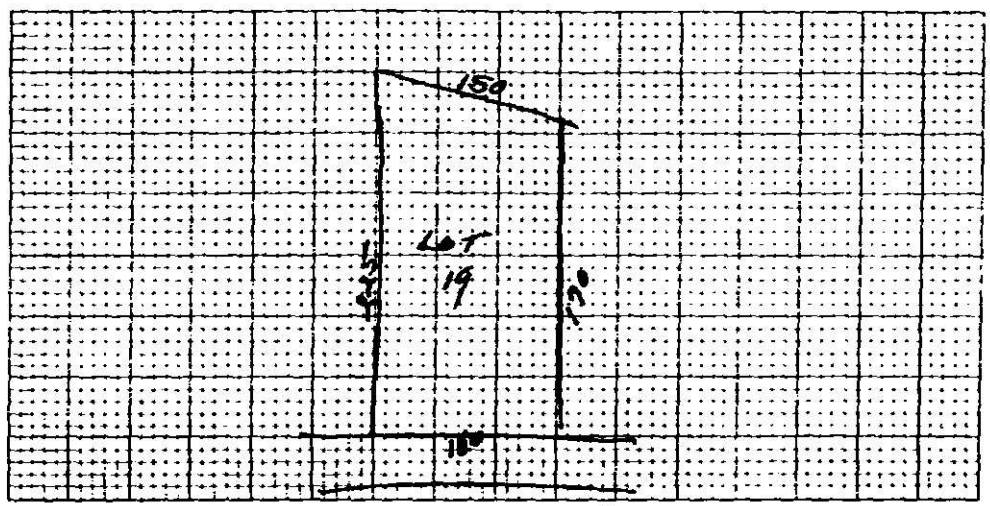
4) LOCATION OF PROPERTY 9945 PROVIDENCE FOREST LANE (STREET OR COUNTY ROAD)

5) SUBDIVISION LOT NO 19 BLOCK NO. A

MAP BOOK NO PAGE NO

6) DEED REFERENCE DEED BOOK 4518 (4637) PAGE NO 602 (111)

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation and on 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

OWNER

ENO-5-74

Environmental Health Department's Copy

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 19866

T.C. NO AO 231-83+254

(Ground Absorption Sewage Disposal)

OWNER: Harry Zimmer & Co. Inc. PLAT NO: 19-A
ADDRESS: P.O. Box 896 LOT SIZE: 29,560
Matthews N.C. 28105
LOCATION OF SITE: 9445 Providence Forest Lane

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) U Clay	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) U Blocky	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) U 36-40"	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S >36" (PS) U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) >36" To ground U water	S PS U	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IIA			
9. SITE CLASSIFICATION	Provisionally Suitable			
10. SOIL SERIES	Cecil			

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)

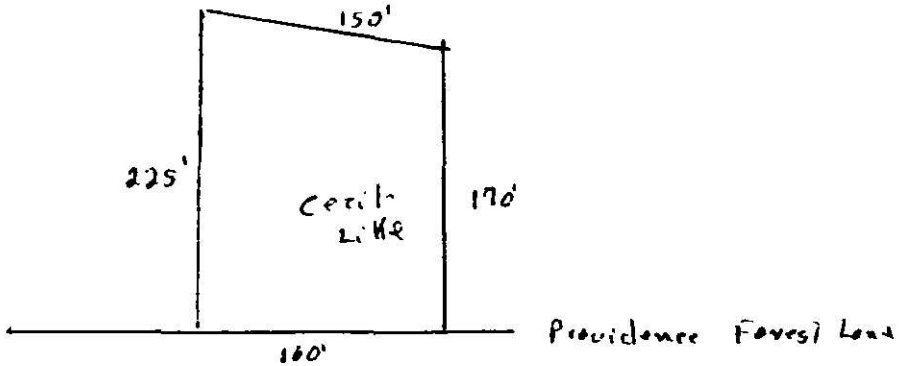
Recommendations/Comments: _____

Described by: William R. Mullis
Title: Soil Scientist

Date: 8-4-83

EHD 539 (Revised: 6/82)

4


150'
225'
Cecil-
Like
170'
160'
Providence Forest Lane

Serial No. 5143

SIR No. 19866

T. C. No. PO 231-031-25,11

Date Issued 8-5-83

Map Date

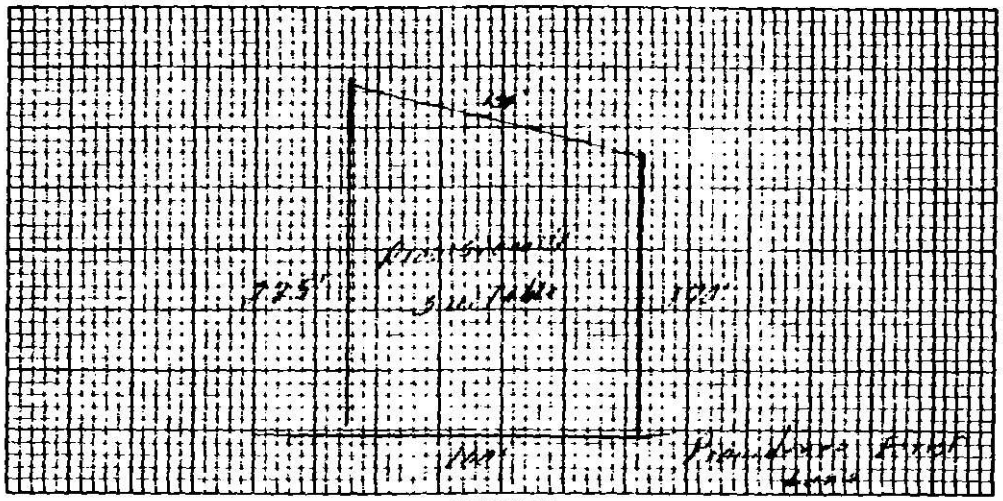
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Harry Grimmer & Co., Inc.
(LAST) (FIRST) (MIDDLE)

ADDRESS OF OWNER P.O. Box 898, Matthews, NC ZIP 28105

LOCATION OF PROPERTY 9945 Providence Forest Lane
(STREET OR COUNTY ROAD)

SUBDIVISION Providence Forest II LOT NO 19 BLOCK NO. A



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 **Provisionally Suitable**
The permeability rate determined by the investigation was . 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 Department of Environmental Health 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 Mecklenburg County Department of Environmental Health prior to installation based on the permeability 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 indicated as acceptable for system installation on the above plot.
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 Mecklenburg County Department of Environmental Health renders the area indicated as acceptable for system installation unsuitable for 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 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. Mackin
END-5-76 Soil Scientist

Dale D. Henderson Jr.
Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

Date Received 3-12-84

MECK. COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH
SEE INSTRUCTIONS ON BACK
RECEIVED
MAR 12 1984

YEAR(S) Application No. 19866

T. Ch. 23-031-25,11

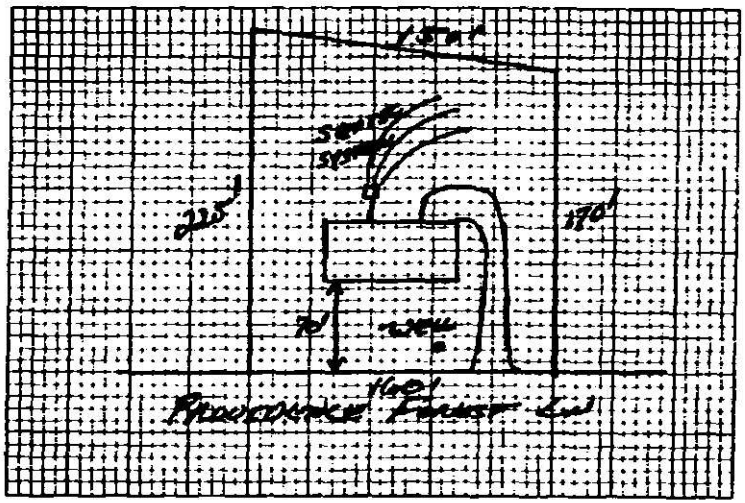
Map Date

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
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 Harry Grommon Co. Inc.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER P.O. Box 898 Matthews, N.C.

15) PHONE NO. Home ___ Office 847-8823

16) LOCATION OF SYSTEM 9945 Providence Forest Ln.
STREET OR COUNTY ROAD

17) SUBDIVISION Providence Forest Lot No. 19 Block No. A

Map Book No. 20 Page No. 425

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ___ NO DATE RUN 85-83

20) PTR NUMBER (See Instructions) 19866

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.

3-7-84
DATE OF APPLICATION

Harry Grommon V. Pres.
OWNER

EHB-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

AS 3-22-84

SIR No. 19866

Serial No. 7304

Date Issued 3-14-84

T. C. No. PO 231-031-25,11

Map Date

CAT

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 Harry Grimmer Co., Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P.O. Box 898, Matthews, NC ZIP 28105

LOCATION OF LOT 9945 Providence Forest Lane
(STREET OR COUNTY ROAD)

SUBDIVISION Providence Forest LOT NO. 19 BLOCK NO. A

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 19866. 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.

William Flannery
Environmentalist

Bill D. Hudson Jr.
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

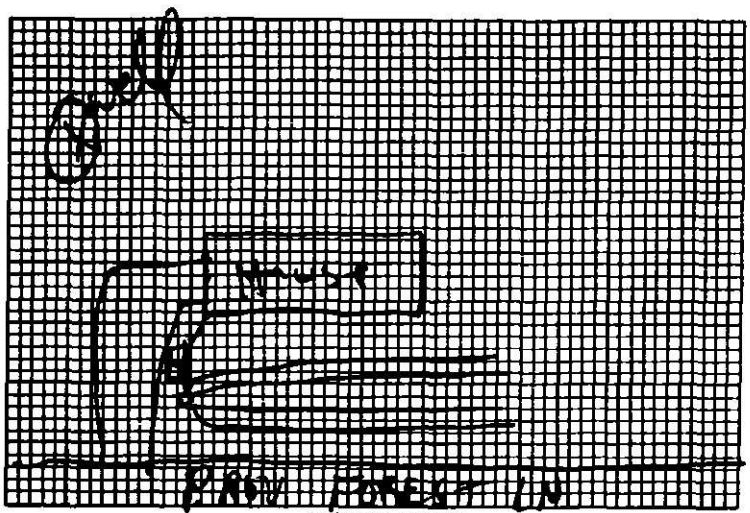
Date Issued 4-3-84 Serial No. 07049 ICAR (S) Permit No. 19866

T. C. No. 231-03-25

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, ____ 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 19866, dated _____ 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 5-4-84, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500

Tank Construction PRE CAST

Absorption and/or Nitrification Lines:

Total Line Length 400

Number of Lines 4 X 100

Distance from House 5'

Distance from Property Line 10'.

Distance from Well 50'

NAME OF OWNER HARRY GRIMES + COMPANY

LOCATION OF PROPERTY 9945 PROVIDENCE FOREST LN

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.

4 LINE X 100' long x 3' wide x 12" stone w/ strawor

Comments: hay w/ grd board

B. Hankins
Division or Section Head

Kelly Randall
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

C of A (s) No. 19866

Date Issued 4-12-84 Serial 6547

T C. No. 231-031-25 L

CPT

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 HARRY GRIMMER + CO INC
(LAST FIRST MIDDLE)

Location of Property 9945 PROVIDENCE FOREST LN.

Application Number 19866 Permit Number 19866

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material PRECAST

Total Length of Drain Tile 400' Number of Lines 4 x 100'

Depth of Filter Material 12" Cover Depth 2'

Water Supply Source well Distance from Water Source 30'

Excavation Inspected 4-12-84 (DATE) Tank Inspected 4-12-84 (DATE)

Nitrification Field Inspected 4-12-84 (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 ~~_____~~ 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 SHERICE JOB

Kelly Randall
Environmentalist

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY