Date Received 3-19-84

MECK COUNTY DEPARTMENT OF
RECEIVED
MAR 19 1984
ENVIRONMENTAL HEALTH

SIR No. 20802
T. C. No. PO 215-163-06
Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER SUMMEY BUILDING SYSTEMS INC.
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER P.O. BOX 497, DALLAS, N.C. ZIP 28034

3) PHONE NO. Home _____ Office 922-7883

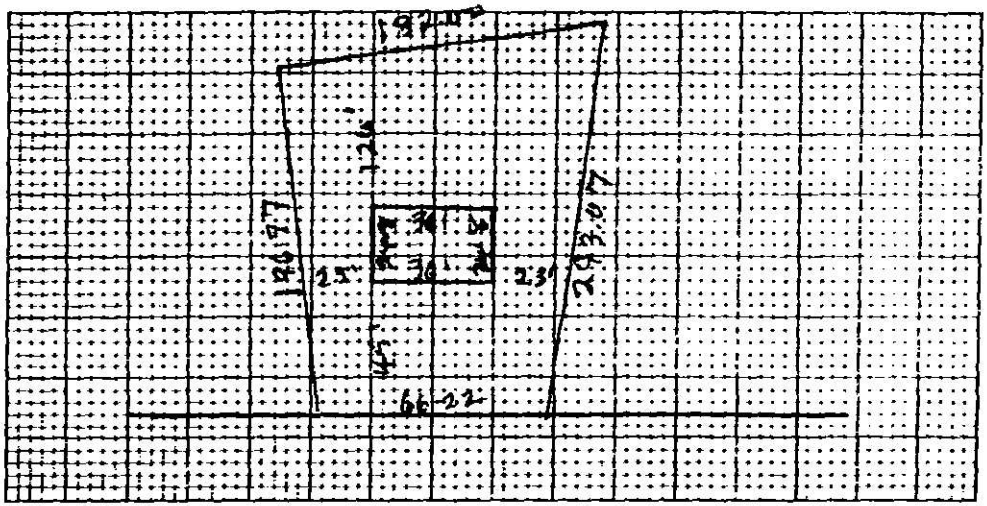
4) LOCATION OF PROPERTY 3029 WINDING TRAIL
(STREET OR COUNTY ROAD)

5) SUBDIVISION SADDLEBROOK LOT NO. 17 BLOCK NO A

MAP BOOK NO 20 PAGE NO 480

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

SUMMEY BUILDING SYSTEMS INC.
By: Phillip H. Helms
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20812

T.C. NO. AO 715-103246

(Ground Absorption Sewage Disposal)

OWNER: Summey Building Systems PLAT NO: 119-A
ADDRESS: PO Box 447 LOT SIZE: Acre + 22x15
Dallas, NC 28034
LOCATION OF SITE: 3029 Building Trail

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS U 2-9%	S PS (U) complex slopes	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 clay	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) U Blocky	S (PS) U Blocky	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) U 30-48"	S PS (U) 2 36"	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U 7 30"	S PS (U) 2 36" to saprolite	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	(S) 7 48" PS U to groundwater	S PS (U) Area would collect water	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	WA	WA		
9. SITE CLASSIFICATION	Provisionally Suitable	Unsuitable		
10. SOIL SERIES	Cecil Lilly	Eroded		

S - Suitable PS - Provisionally Suitable U - Unsuitable

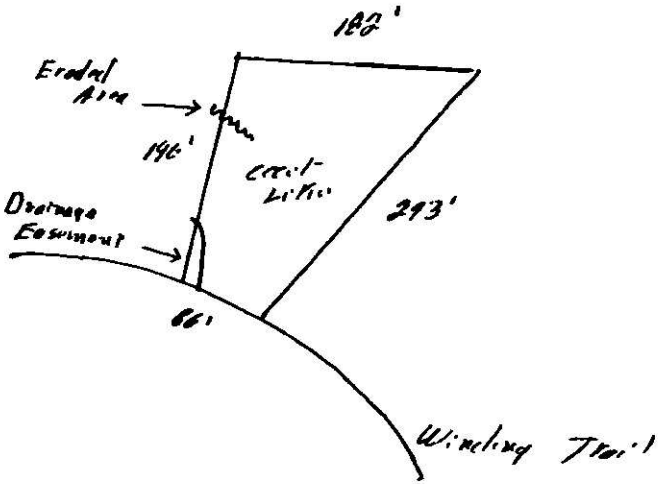
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: _____

Described by: William Goodman
Title: Soil Scientist

Date: 4-4-84

A


182'
Erodal Area
196'
Creek-Like
293'
Drainage Easement
66'
Winding Trail

Serial No. 5577

SIR No. 20802

Date Issued 4-6-84

T. C. No. PO 215-163-06

Map Date

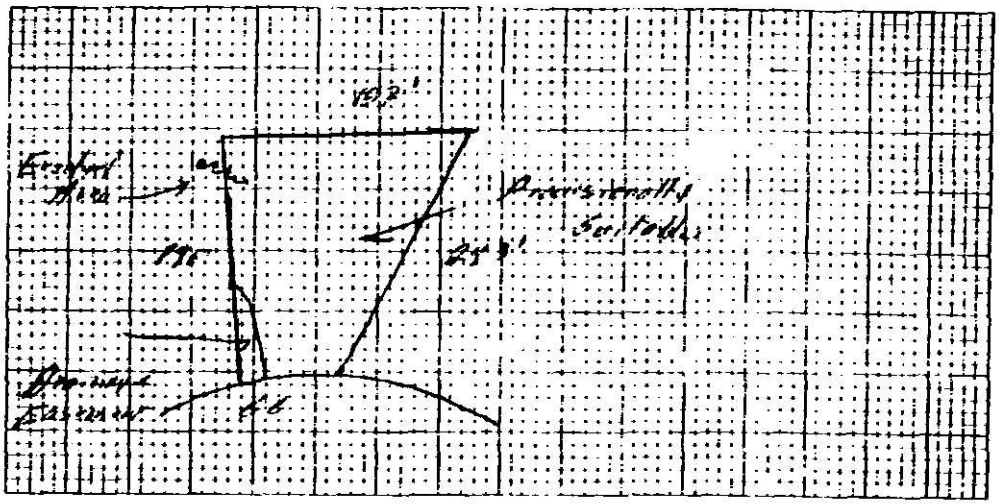
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER (LAST, FIRST, MIDDLE) Summey Building Systems, Inc.

ADDRESS OF OWNER P. O. Box 497, Dallas, NC ZIP 28034

LOCATION OF PROPERTY 3029 Winding Trail (STREET OR COUNTY ROAD)

SUBDIVISION Saddlebrook LOT NO 17 BLOCK NO. A



PLOT PLAN

This is to certify that a soil investigation and on-site inspection 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 a septic tank system shall be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction of the wastewater treatment system on the lot.
2. The size of the septic tank wastewater treatment system must be established by the Mecklenburg County Department of Environmental Health prior to the issuance of the permit. The lot size and the size and type of building constructed thereon.
3. This approval is void if the [illegible] on the above plot.
4. This approval is [illegible] which in the opinion of the Mecklenburg County Department of Environmental Health renders the area indicated unacceptable for system installation. A suitable site for installation, construction, enlargement or repair of such 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 A. Mullin
Soil Scientist

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

EHD-S-76

Environmental Health Department's Copy

Date Received 3-19-84

RECEIVED
MAR 19 1984
ENVIRONMENTAL HEALTH

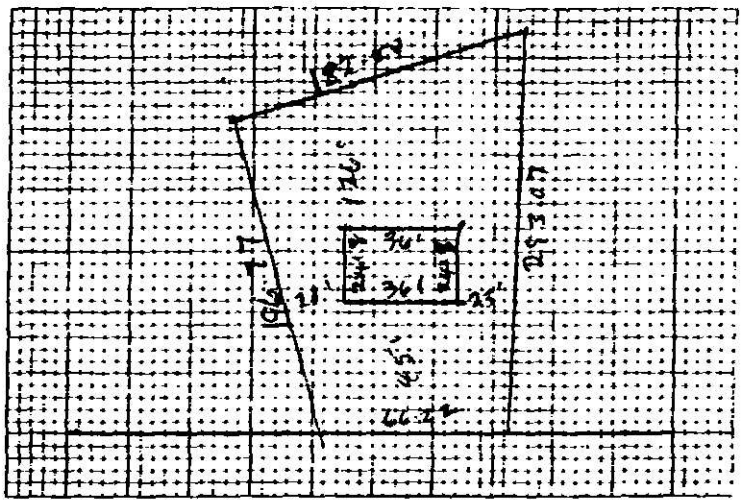
ICAR(S) Application No. 20802
T. C. No. 215-163-06
Map Date

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)

4) Mobile Home ____ Yes ____ No
Residence ✓ Yes ____ No
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 SUMMEY (LAST) BUILDING SYSTEMS (FIRST) INC. (MIDDLE)

14) ADDRESS OF OWNER P.O. BOX 497, DALLAS, N.C. 28034

15) PHONE NO. Home ____ Office 922-7883

16) LOCATION OF SYSTEM 3029 WINDING TRAIL (STREET OR COUNTY ROAD)

17) SUBDIVISION SADDLEBROOK Lot No. 17 Block No. A

Map Book No 20 Page No. 480

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.

3-19-84
DATE OF APPLICATION

SUMMEY BUILDING SYSTEMS INC.
By: Phillip H. Nelms
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 7380

SIR No. 20802

Date Issued 4-6-84

T. C. No. PO 215-163-06

Map Date /

CRT

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 Summey Building Systems, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P. O. Box 497, Dallas, NC ZIP 28034

LOCATION OF LOT 3029 Winding Trail
(STREET OR COUNTY ROAD)

SUBDIVISION Saddlebrook LOT NO 17 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 20802. 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.

Kelly Linville
Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

C of A (s) No. 20802

Date Issued 6-8-84 **Serial** 6737 T C. No. 215-163-06 CRT

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 SUMNEY BUILDING SYSTEMS INC (LAST / FIRST / MIDDLE)

Location of Property 3029 WINDING TRAIL

Application Number 20802 Permit Number 20802

Inspection Date:

Liquid Capacity of Tank 1500 gal Tank Material P.C.C.

Total Length of Drain Tile 300' Number of Lines 3 x 100'

Depth of Filter Material 12" Cover Depth 3'

Water Supply Source Comm. well Distance from Water Source 50' FT

Excavation Inspected 6-8-84 (DATE) Tank Inspected 6-8-84 (DATE)

Nitrification Field Inspected 6-8-84 (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 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

Environmentalist

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

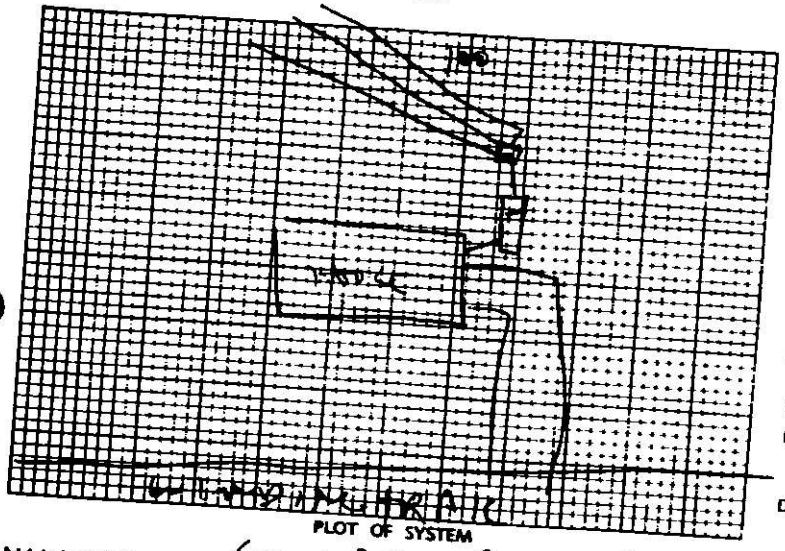
Date Issued 5-22-84 Serial No. 07228 ICAR(S) Permit No. 20802

T.E. No. 215/63 06

Map Date L

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 20802, 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 6-27-84, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500 gal

Tank Construction precast

Absorption and/or Nitrification Lines:

Total Line Length 700

Number of Lines 3 x 100

Distance from House 5'+

Distance from Property Line 10'+

Distance from Well 50'+

NAME OF OWNER SUMMIT BUILDING SYSTEMS INC

LOCATION OF PROPERTY 3029 WINDING TRAIL

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.

Comments: 3 line x 100' long x 3' wide x 12" stone w/ grd bond up
stone cover

B. Hardister
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-S-76

Environmental Health Department's Copy

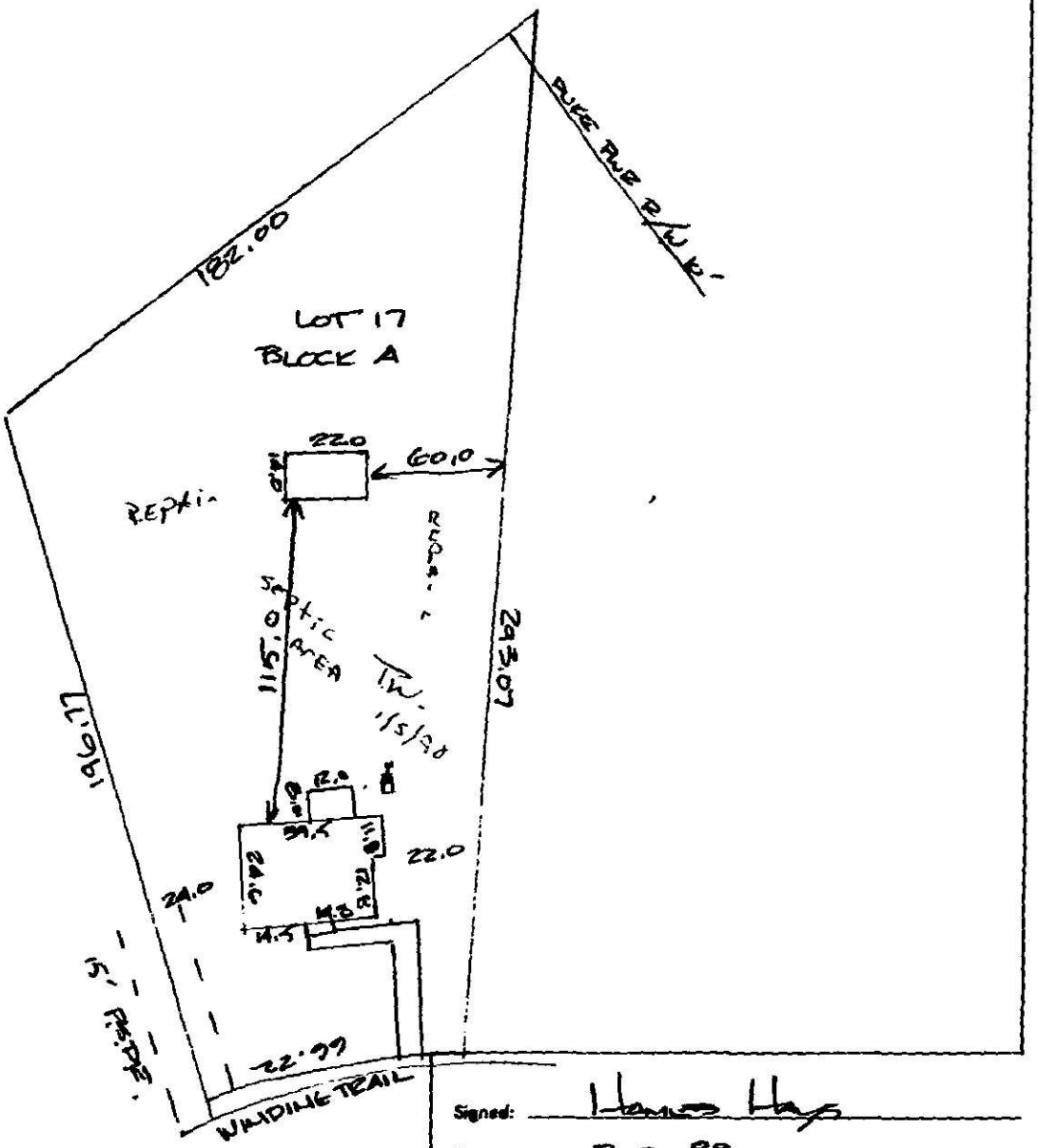
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 20802

TC: _____

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Signed: Howard Hays

Date: 7-7-88

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 7/7/89

Name/Company [illegible]

Sanitation ____

Vector Control ____

O.P.W.D. ✓

Service: [illegible]

[illegible]

[illegible] COUNTY
[illegible] DEPARTMENT
[illegible] DIVISION
1810

JUL 7 1989

File # 20402

Fee: $ 25.00

[illegible]

APPLICATION FOR AN IMPROVEMENT PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
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: 20802
TC:
SERIAL: № 18816 ☐ L ☑ CRT

JOB LOCATION

① ADDRESS: 3029 (STREET NO) WINDING TRAIL (STREET) ② FILE: 20802
③ JURISDICTION: ④ TAX PARCEL NO.: 215-163-06
⑤ SUBDIVISION: SADDLE BROOK ⑥ LOT: 17 ⑦ BLOCK: A

OWNER

⑧ NAME: HAMES (FIRST) MacDONALD (MIDDLE) HAYS (LAST)
⑨ MAILING ADDRESS: 3029 WINDING TRAIL
⑩ CITY: MATTHEWS ⑪ STATE: N.C. ⑫ ZIP: 28105
⑬ PHONE: (WORK) 847-1666 ⑭ (HOME) 847-3528

REQUEST

This request is for a(n):

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

DESIGN CRITERIA

System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? ∅
㉕ Type?
㉓ Maximum occupancy? ∅
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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Hames Hays
Date: 7-7-89

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, 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.

Tim Whittington, 1/8/90
Environmentalist Date

[signature], 1/5/90
Director or Authorized Section Head Date

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