Date Received 9-19-83

...CK COUNTY DEPARTMENT OF
RECEIVED
SEP 19 83
ENVIRONMENTAL HEALTH

SIR No. 20050

PID 227-141-01

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Medlin Builders, Inc.
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER 4704 Secrest Short Cut Rd. Monroe, N. C. ZIP 28110

3) PHONE NO. Home _____ Office 847-1523

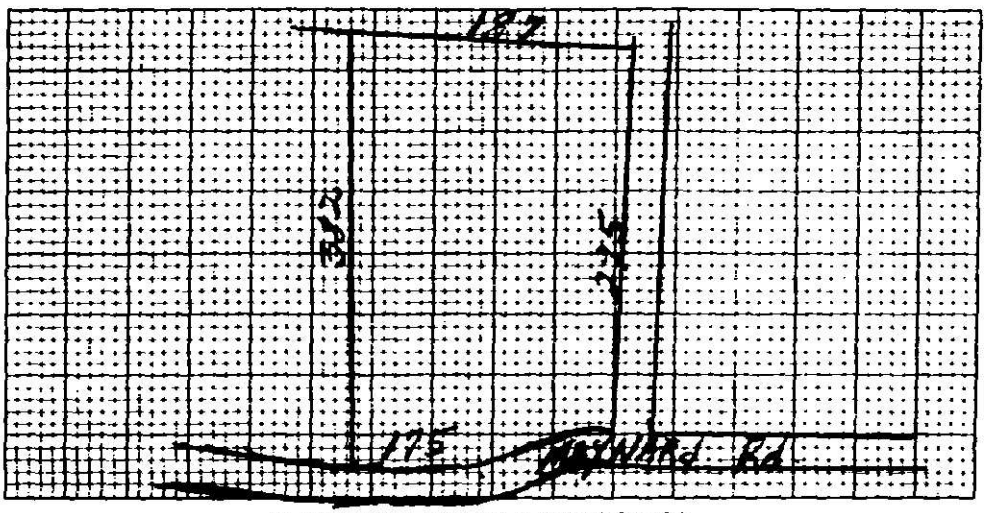
4) LOCATION OF PROPERTY 2429 Maynard Rd
(STREET OR COUNTY ROAD)

5) SUBDIVISION Plantation Road ~~Providence Plantation~~ LOT NO. 32 BLOCK NO. E

MAP BOOK NO. 20 PAGE NO. 343

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

Medlin Builders, Inc.
Maurice Medlin, Pres.
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 5231

SIR No. 20050

T. C. No. PO 227-141-01

Date Issued 10-10-83

Map Date

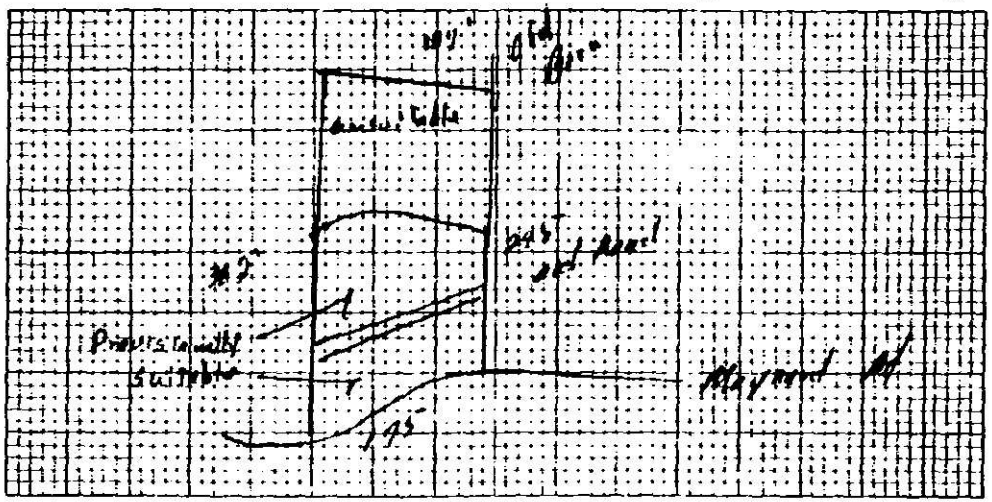
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Medlin Builders, Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER 4704 Secrest Short Cut Rd., Monroe, NC ZIP 28110

LOCATION OF PROPERTY 2429 Maynard Road
STREET OR COUNTY ROAD

SUBDIVISION Plantation LOT NO. 32 BLOCK NO. E



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 permeability rate determined by the investigation was Provisionally Suitable. 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 A. Marlin
Soil Scientist

Eric D. Hardister
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. 20050

T.C. NO. PO 227-141-01

(Ground Absorption Sewage Disposal)

OWNER: Medlin Builders Inc. PLAT NO: 232-BE
ADDRESS: 4704 Secrest Shortcut Rd. LOT SIZE: Approx 61,000
Monroe, N.C. 28110
LOCATION OF SITE: 2429 Maynard Road

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS 6-15% U	S PS Complex slopes 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 clay U	S PS — U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S PS Blocky U	S PS Blocky U	S PS — U	S PS U
4. SOIL DEPTH (inches)	S PS 36-40" U	S PS Depth Variable U	S PS — U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S PS >30" U	S PS <30" in places U	S PS — U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S PS >36" to ground water U	S PS Eroded Areas Channel Runoff U	S PS Drainage-way U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IVA	IVA	—	
9. SITE CLASSIFICATION	Provisionally Suitable	unsuitable	unsuitable	
10. SOIL SERIES	Cecil-Lite	Complex slopes	Drainageway	

S - Suitable PS - Provisionally Suitable U - Unsuitable

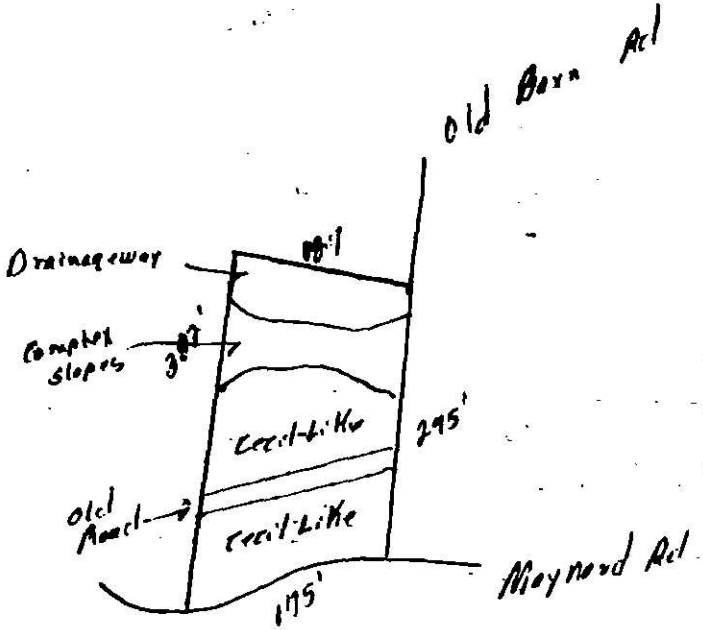
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: William A. Martin
Title: Soil Scientist

Date: 10-7-83

EHD 539 (Revised: 6/82)


Old Barn Rd
Drainageway
Compact slopes
3%
Cecil-like
295'
Old Road
Cecil-like
Maynard Rd
175'

MECK COUNTY DEPARTMENT OF
SEE INSTRUCTIONS ON PAGE 2
RECEIVED
SEP 19 1983
ENVIRONMENTAL HEALTH

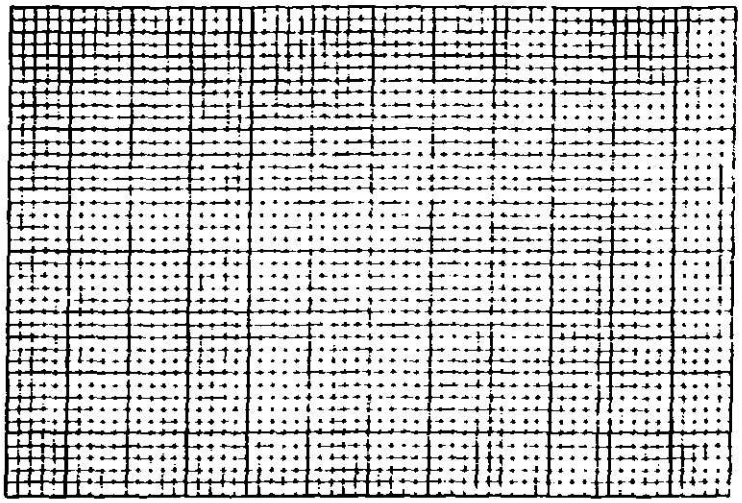
Date Received 9-19-83 TCAR (S) Application No. 20050
TRQ 227-141-01
Map Date

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) _Y_ 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 X No
Residence X Yes ___ No
4) No of Bedrooms 4
5) Business Use — Max No Employees ___
6) Washing Machine X Yes ___ No
7) Garbage Disposal Y Yes ___ No
8) Dishwasher X Yes ___ No
9) Water Supply
A) Individual Well X
B) Governmental System ___
C) Community System
1 Well source ___
2 Governmental source ___
10) Sewage System
House located within 200 feet of public sewer ___ Yes Y No
House located within 200 feet of community sewer ___ Yes X No
11) FHA Case No ___
12) VA Case No. ___

13) NAME OF OWNER Medlin Builders, Inc.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 2014 Secrest Short Cut Rd., Monroe, N.C. 28110

15) PHONE NO. Home ___ Office 847-1523

16) LOCATION OF SYSTEM 2429 Maynard Rd.
STREET OR COUNTY ROAD

17) SUBDIVISION ~~Providence Plantation~~ Plantation Road Lot No. 32 Block No. E

Map Book No. 26 Page No. 343

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? ___ YES X 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.

Sept. 19, 1983
DATE OF APPLICATION

Medlin Builders, Inc
OWNER Maurice Medlin, Pres.

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

BT 10-12-83

SIR No. 20050

Serial No. 6834

Date Issued 10-10-83

T. C. No. PO 227-141-01

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
IMPROVEMENT PERMIT
TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Medlin Builders, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 4704 Secrest Short Cut Rd., Monroe, NC ZIP 28110

LOCATION OF LOT 2429 Maynard Road
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. 32 BLOCK NO. E

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 20050 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.

Ralph Miller
Environmentalist

Dale D. Faulkner Jr.
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Serial No. 6837

ICAR(S) Permit No. 20050

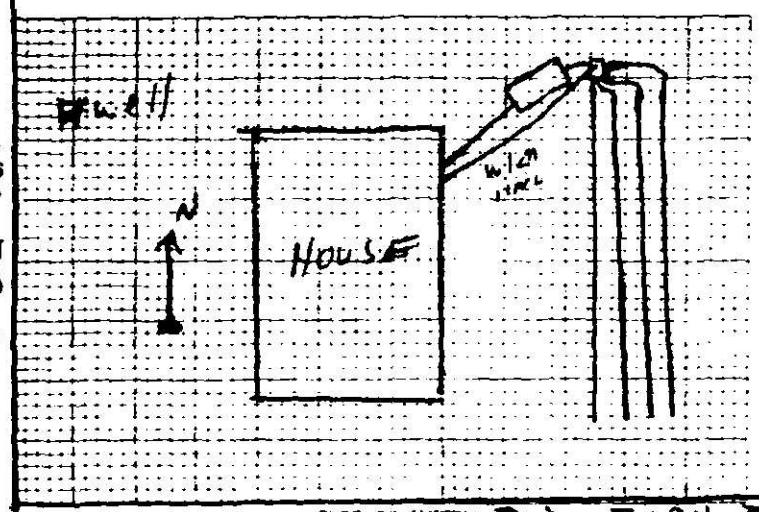
Date Issued JAN 5th 1984

T. C No. 227-141-81

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 X 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 20050, dated Sept 19th 1983 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 JAN 31st 1985, after which date this permit shall be null and void.



PLOT OF SYSTEM OLD BARN RD

MAYNARD RD.

Permeability Rate PS IVA

Liquid Capacity of Tank 1500 gal

Tank Construction Pre Cast Concrete

Absorption and/or Nitrification Line

Total Line Length 400 Lin. FT.

Number of Lines FOUR

Distance from House 10 FT.

Distance from Property Line 50 FT.

Distance from Well 125 FT.

NAME OF OWNER MEDLIN BUILDERS, INC.

LOCATION OF PROPERTY 2429 MAYNARD 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.

Comments: FOUR Trenches to be 100 FT x 3FT x 12 inches stone - hay or Straw cover - grade Bds - ∅down w/in line into DIST

Ralph Miller
Environmentalist

_____
Division or Section Head

* 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

BI 1-9-84

C of A (s) No. 20050

Date Issued 1-6-84 Serial 6370 T. C. No 227-141-01

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner MEDLIN BUILDERS, INC
LAST FIRST MIDDLE

Location of Property 2429 MAYNARD RD.

Application Number 20050 Permit Number 20050

Inspection Data:

Liquid Capacity of Tank 1500 gal 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 1-6-84 DATE Tank Inspected 1-6-84 DATE

Nitrification Field Inspected 1-6-84 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-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 2/28/85

ICAR (S) Application No. 20050

T. C. No. 227-141-01

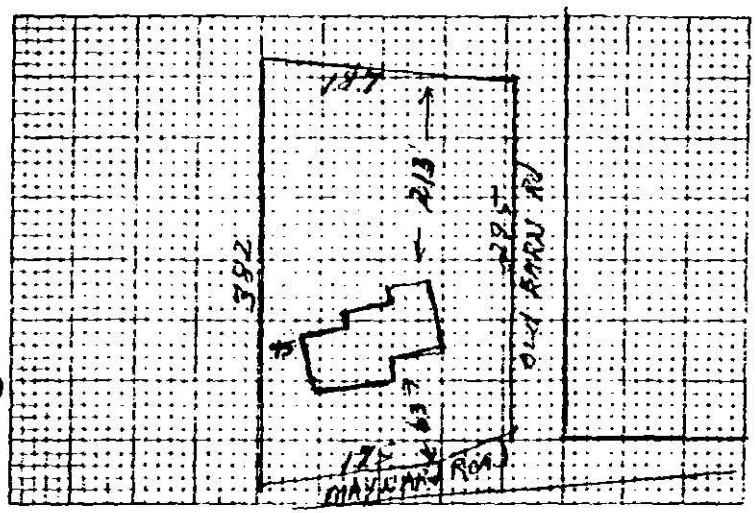
Map Date

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) X 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 X No
Residence X Yes ___ No

4) No of Bedrooms 4
5) Business Use — Max No Employees ___
6) Washing Machine X Yes ___ No
7) Garbage Disposal X Yes ___ No
8) Dishwasher X Yes ___ No
9) Water Supply
A) Individual Well X
B) Governmental System ___
C) Community System:
1. Well source ___
2 Governmental source ___
10) Sewage System
House located within 200 feet of public sewer ___ Yes X No
House located within 200 feet of community sewer ___ Yes X No
11) FHA Case No ___
12) VA Case No. ___

13) NAME OF OWNER DeDECKER (LAST) WILLEM (FIRST) O. (MIDDLE)

14) ADDRESS OF OWNER 2429 MAYNARD RD. MATTHEWS, N.C. 28105

15) PHONE NO Home ___ Office ___

16) LOCATION OF SYSTEM 2429 MAYNARD RD. MATTHEWS, N.C. 28105 (STREET OR COUNTY ROAD)

17) SUBDIVISION PLANTATION ROAD Lot No. 32 Block No. E

Map Book No. 20 Page No. 343

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES ___ NO DATE RUN 10/10/83

20) PTR NUMBER (See instructions) 20050

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.

Feb. 27, 1985
DATE OF APPLICATION

OWNER

EHD-5-76

Environmental Health Department's Copy

Date Issued 2/28/85

Serial No. 07943

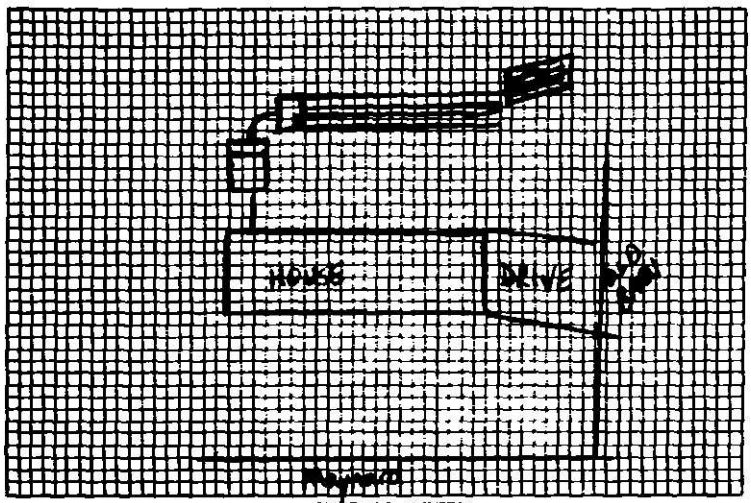
ICAR(S) Permit No. 20050

T. C. No. 227-161-01

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 20050, dated 2/27/85 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 3/28/85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank Repair

Tank Construction —

Absorption and/or Nitrification Lines:

Total Line Length 100'

Number of Lines 9'X33'

Distance from House 5'

Distance from Property Line 10'

Distance from Well >100'

NAME OF OWNER DeDecker Willem O

LOCATION OF PROPERTY 2429 Maynard Road

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.

1 Bed 9'X33'X17" stone with 3 pipes, gradeboards, straw as cover

Comments: ___

Division or Section Head

Cynthia G. Bass
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.

EHB-5-76

Environmental Health Department's Copy

C of A (s) No. 20050

Date Issued 3/1/85 Serial 7312 T. C. No. 227-141-01 I

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 DeDecker (LAST) Willem (FIRST) O (MIDDLE)

Location of Property 2429 Maynard Road

Application Number 20050 Permit Number 20050

Inspection Data:

Liquid Capacity of Tank Repair Tank Material —

Total Length of Drain Tile 100' (9'x33) Number of Lines 3

Depth of Filter Material 17" Cover Depth 18"

Water Supply Source well Distance from Water Source >100'

Excavation Inspected 3/1/85 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 3/1/85 (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:

Cynthia G. Bass
Environmentalist

END-5-76

Environmental Health Department's Copy

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH

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

(OFFICE USE ONLY)

FILE: 20050

TC: 227-14-01 V

JOB LOCATION

① ADDRESS: 2429 (STREET NO) MAYNARD ROAD (STREET) ② FILE: 20050

③ CITY: _____ ④ TAX PARCEL NO.: 227-14-01

⑤ SUBDIVISION: PLANTATION ROAD ⑥ LOT: 32 ⑦ BLOCK: E

OWNER

⑧ NAME: WILLEM (FIRST) O. (MIDDLE) DE DECKER (LAST)

⑨ MAILING ADDRESS: 2429 MAYNARD ROAD

⑩ CITY: MATTHEWS, ⑪ STATE: N.C. ⑫ ZIP: 28105

⑬ PHONE: (WORK) _____ ⑭ (HOME) 847-7648

REQUEST

This request is for a(n):

⑮ ☐ New installation permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☒ Repair or alteration permit 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 ㉕ Type? _____

㉓ Maximum occupancy? _____ ㉖ Maximum number of employees? _____

㉔ Basement? ☐ yes ☒ no ㉗ Maximum number of seats? _____

WATER SUPPLY

㉙ Water supply from (present or proposed):

A ☑ Individual well

B ☐ Municipal system

C ☐ Community well

D ☐ Community system

㉚ The undersigned, owner of the property described above as "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: _____

Date: _____

㉘ Accurately dimensioned plot

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

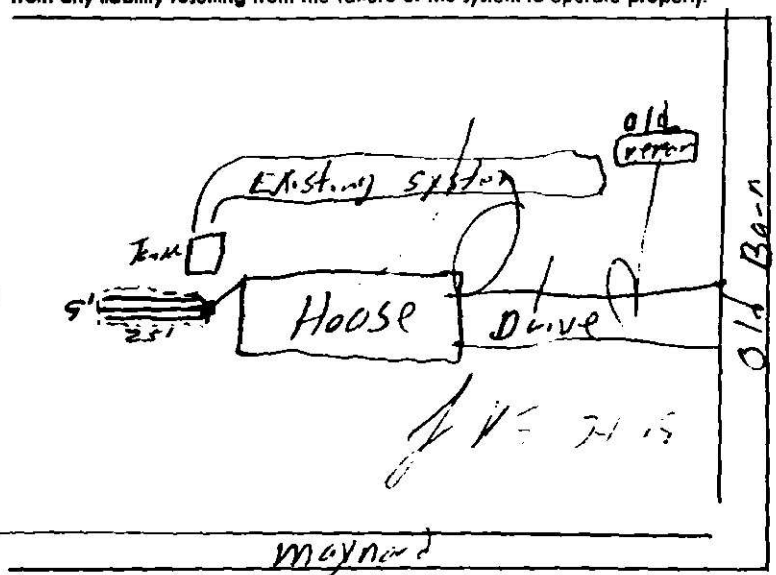
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 20050 DATE: 5-9-88

TC: 227-141-01 ☐ L

SERIAL № 11681

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 4-27-88. All work shall be completed on or before 6-9-88, 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank — gallons

Liquid Capacity of Dosing Tank — gallons

Tank Construction 1

Absorption and/or Nitrification Lines:

Trench Width 9' feet

Total Line Length 75' feet

Number of Lines Three

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10' feet

Distance from Well 750' feet

NAME OF OWNER Willem DeDecker

LOCATION OF PROPERTY 2429 Maynard Dr.

Comments: Bed 9' X 25' X 12" Stone; Hot tub drain line drain line from House not to exceed two inches in diameter

Division or Section Head

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.

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

4/27/88 Pd 50- Ck#564 JR 5/2/88 Pd $50.00 Endorsement Permit ck# 0575 EW

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: 20050

TC:

SERIAL: № 16067 ☑ ☑ CRT

JOB LOCATION

① ADDRESS: 2429 (STREET NO.) Maynard (STREET) Dr ② FILE:

③ JURISDICTION: Matthews ④ TAX PARCEL NO.: 227-141-41

⑤ SUBDIVISION: Providence Plantations ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: Willem (FIRST) (MIDDLE) De Decker (LAST)

⑨ MAILING ADDRESS: 2429 Maynard Drive

⑩ CITY: Matthews ⑪ STATE: NC ⑫ ZIP: 28150

⑬ PHONE: (WORK) 394-6151 ⑭ (HOME) 847-7648

REQUEST

This request is for a(n):

⑮ ☐ New permit ⑰ ☐ Authorization for mobile home exchange w/Hot tub

⑯ ☐ Repair or alteration permit ⑱ ☒ Other (specify) Sunroom Addition

DESIGN CRITERIA

System will serve:

⑲ ☐ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 4 ㉕ Type?

㉓ Maximum occupancy? 2 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: [signature]

Date: April 27, 1988

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.

Hot Tub equipped with Chlorine & Filter System; No discharge to system

[signature] 7-12-88

Environmentalist Date

[signature], RS 7-14-88

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.

PROPOSED PLOT PLAN

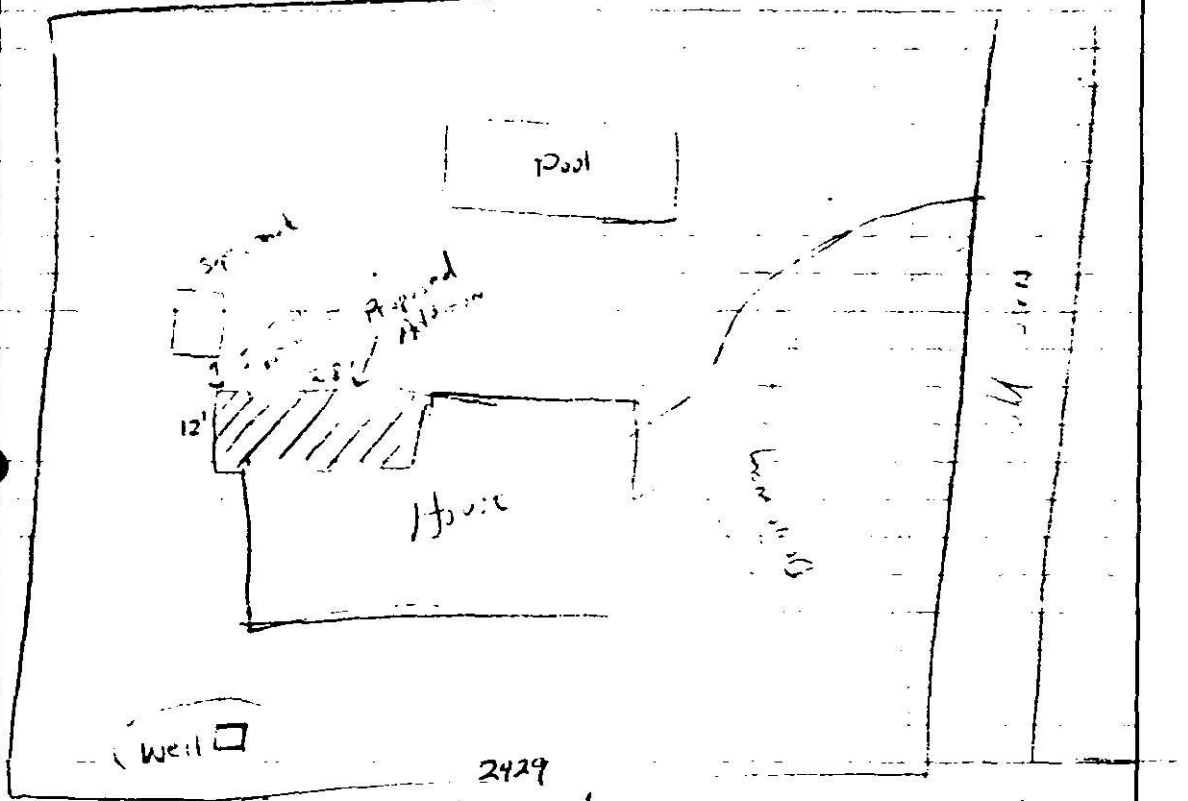
MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

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

FILE: 20050

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 disinfield.



Signed: Roy W Lockett

Date: April 27, 1994

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

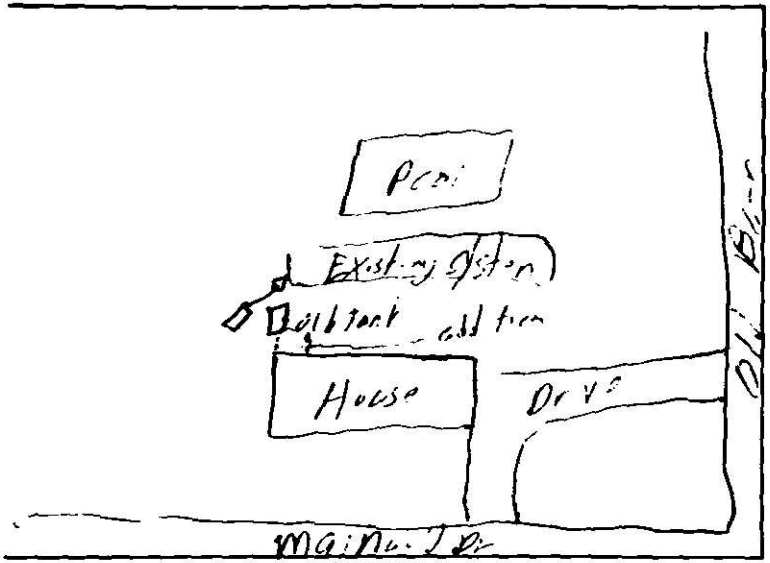
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 20050 DATE: 7-11-88

TC: 227-141-41 ☐ L

SERIAL № 12037

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 4-27-88. All work shall be completed on or before 7-15-88, 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank — gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width — feet

Total Line Length — feet

Number of Lines —

Depth of Stone — inches

Distance from House >5 feet

Distance from Property Line 10' feet

Distance from Well >50' feet

NAME OF OWNER Willem DeDecker

LOCATION OF PROPERTY 2439 Maynard Dr

Comments: New Tank installation; Old Tank too close to proposed foundation, connect new tank to existing D.Box; pump; fill old tank

Division or Section Head

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.

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 20050 DATE: 7-12-89

TC: 227-141-41 ☑ L ☐ CRT

SERIAL № 11304

Name of Owner Willem DeDecker Juris.:

Address of Property 2429 Maynard Dr.

Inspection Data:

Tank Material PCC

Total Length of Drainfield —

Number of Lines — @ —

Cover Depth 6'

Water Supply Source Well

Distance to Water Source 250'

Excavation Inspected —

Tank(s) Inspected 7-12-89

Wash Line Inspected —

High Water Alarm Inspected —

PLOT

Design: 1989, Repair Robert Brigman CTR#

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☐ installed or constructed ☑ altered or repaired

☑ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The issuance of this

☐ Certificate of Completion ☐ Operation Permit

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 document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 10 NCAC 10A .1900 in addition to those listed below under "COMMENTS." This document 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:

Jim Gruin
Environmentalist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.