Date Received 2-9-73

APT No. 5544

T. C No. 169-026-20

Map Date 10/6-72

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Sterling Development Company - Moore, James M.
(LAST, FIRST, MIDDLE)

2) ADDRESS OF OWNER 2311 Rosedale Ave. - ZIP 28204

3) PHONE NO Home _____ Office 375-4864

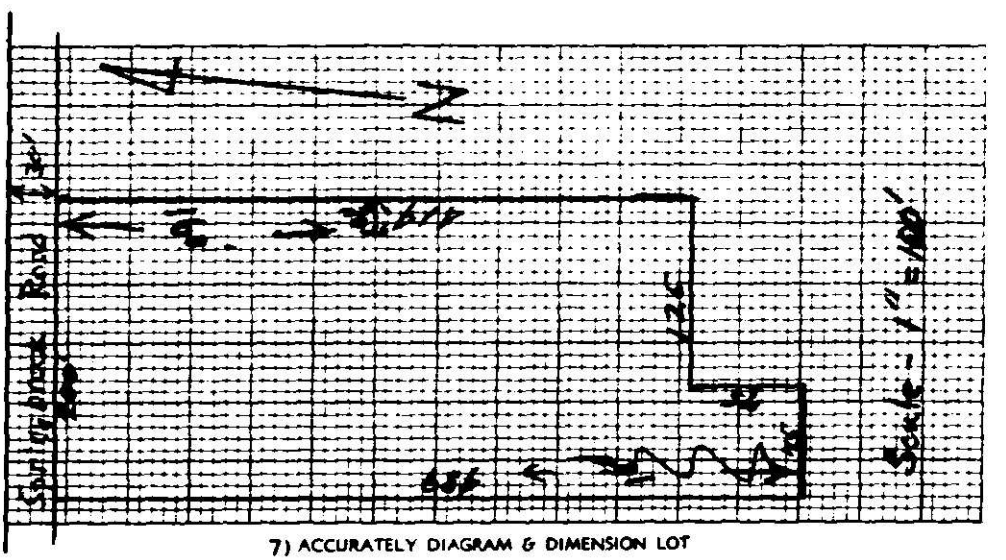
4) LOCATION OF PROPERTY S/S Springbrook Road - Tentative No. to be 932 Springbrook
(STREET OR COUNTY ROAD)

5) SUBDIVISION Maplehurst LOT NO 41, 42 & 43 BLOCK NO. 3

MAP BOOK NO 3 PAGE NO 205

6) DEED REFERENCE DEED BOOK 2950 PAGE NO 236

Application is hereby made to the Mecklenburg County Health Department for the conduct of a percolation test 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

OWNER James M. Moore, Pres.

FORM NO. E-1-11-1-70

HEALTH DEPARTMENT'S COPY

Serial No. [illegible]-B

PTR No. 5544

Date Issued June 20, 1973

T C No. 169-076-20

Map Date 10-16-72

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

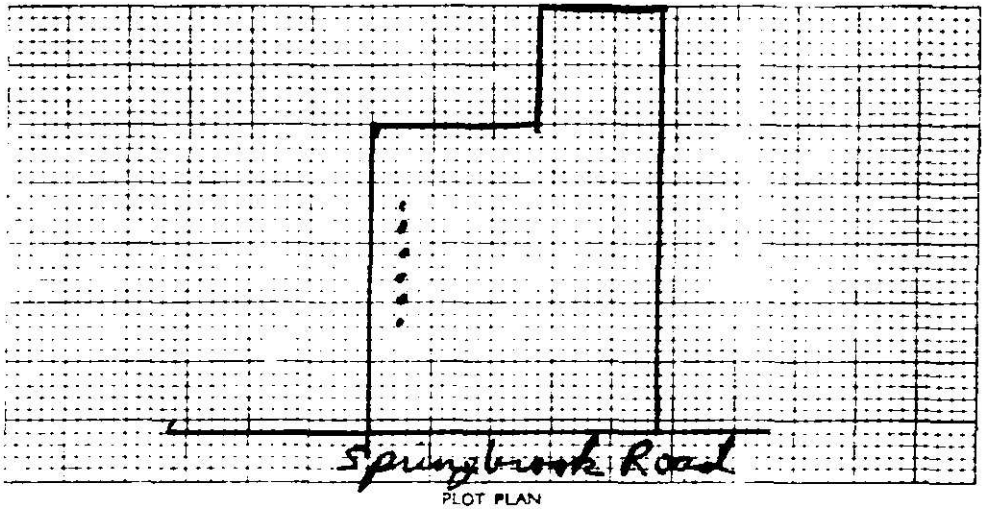
PERCOLATION TEST REPORT

NAME OF OWNER Zeigler (LAST) Jack (FIRST) Montgomery (MIDDLE)

ADDRESS OF OWNER 700 Nestle Way ZIP 28211

LOCATION OF PROPERTY Springbrook Road (STREET OR COUNTY ROAD)

SUBDIVISION Maplehurst LOT NO 41,42,43 BLOCK NO



PLOT PLAN

This is to certify that a percolation test has been run and an on-site inspection made by the Mecklenburg County Health Department on the lot described above. The said test was conducted on that portion of the lot as indicated on above plot.

The percolation rate determined by the test was 60 min/in. 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 Health Department 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 teratment system which must be installed will be determined by the Health Department prior to installation based on the percolation 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 where the percolation test was run.
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 Health Department, renders the area where the percolation test was run unsuitable for the 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 State Board of Health and the Mecklenburg County Board of Health which were in effect on the date of issuance and is void if at any time in the future, prior to the 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.

John R. Atkisson

Director, Environmental Health Division or Authorized Section Head

FORM NO E-2 4-1-71

HEALTH DEPARTMENT'S COPY

Date Received 5-30-73

ICAR-S Application No 5544

T C No 169-076-20

Map Date 10-16-72

15-00 Soil
500 Perk

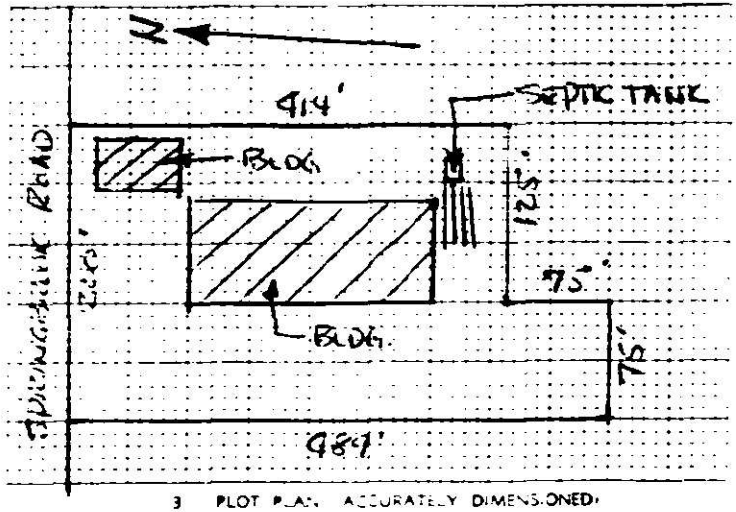
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 Health Department for a permit to

✓ Install or Construct ☐ Alter or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption, effluent discharge



3 PLOT PLAN ACCURATELY DIMENSIONED

4 No. of Bedrooms 0

5 Estimated Water Use Per Employee 18

6 Will any Water Use Be Commercial? ✓ No

7 Garbage Disposal? ✓ No

8 Dishwasher? ✓ No

9 Automatic Washer? ✓ No

10 Any Water Softener? ✓ No

11 Any Swimming Pool? ✓ No

12 Any Other Water Use? ✓ No

13 NAME OF OWNER ZEIGLER (LAST) JACK (FIRST) MONTGOMERY (MIDDLE)

14 ADDRESS OF OWNER 700 NESTLE WAY CHARLOTTE, N.C. 28211

15 PHONE NO Home 366-0080 Office 525-5095

16 LOCATION OF SYSTEM S/S SPRINGBROOK ROAD (STREET OR COUNTY ROAD) TENTATIVE NO. TO BE 436

17 SUBDIVISION MAPLEHURST Lot No 44, 46, & pt 43 Block No 3

Map Book No 3 Page No. 208

18 DEED REFERENCE — DEED BOOK 2950 AT PAGE 236

19 HAS A PERCOLATION TEST BEEN RUN? ☐ YES ✓ NO DATE RUN APRIL 1973

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.

May 29, 1973
DATE OF APPLICATION

OWNER Jack M. Zeigler

Form No. E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3067

LA No. 5544

Date Issued June 20, 1973

T C No 169-076-20

Map Date 10-16072

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Zeigler (LAST) Jack (FIRST) Montgomery (MIDDLE)

ADDRESS OF OWNER 700 Nestle Way ZIP 28211

LOCATION OF LOT Springbrook Road (STREET OR COUNTY ROAD)

SUBDIVISION Maplehurst LOT NO 41,42,43 BLOCK NO

MAP BOOK NO PAGE NO

The above specified lot is approved by the Mecklenburg County Health Department for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the percolation test results which yielded a percolation rate of 60 min/in 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 5544. 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 percolation test 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

Environmentalist

John R. Robinson
Director, Environmental Health Division or Authorized Section Head

FORM NO. E-3-4-1-71

city

HEALTH DEPARTMENT'S COPY

Date Issued 7/19/73

Serial No. 4330

ICAR(S) Permit No. 5544

T. C. No.

Map Date

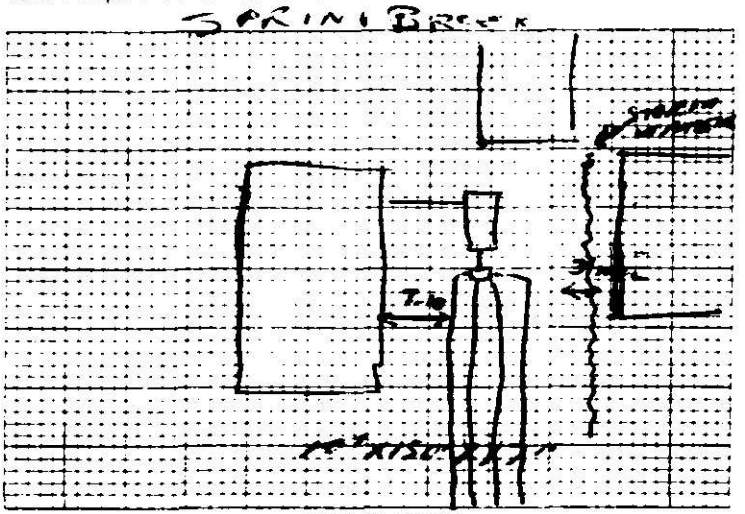
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTRUCTION, 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 5544, dated 7/19/73 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 12/15/73 after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 1000

Tank Construction PC

Absorption and/or Nitrification Lines:

Total Line Lenght 60

Number of Lines 4 (10' x 75' x 17")

Distance from House 10'

Distance from Property Line 10' min

Distance from Well —

NAME OF OWNER JACK ZIEGLER (STERLING DEPT.)

LOCATION OF PROPERTY 432 SPRING-BROOK RD.

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used.

Comments: Staple

JAFPB

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 Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

FORM NO. E-5-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 9/25/73 Serial 3925

C of A (s) No. 5046

T. C. No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner [illegible] (LAST) (FIRST) (MIDDLE)

Location of Property [illegible]

Application Number [illegible] Permit Number [illegible]

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PC

Total Length of Drain Tile 600 Number of Lines 4 (150' x 10' x 1')

Depth of Filter Material 1' Cover Depth 2'

Water Supply Source City Distance from Water Source —

Excavation Inspected 9 28 73 (DATE) Tank Inspected 9/28/73 (DATE)

Nitrification Field Inspected 9/28/73 (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 Board of Health 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: ____

[illegible]

(Environmentalist)

FORM NO. E-6-4-1-71

HEALTH DEPARTMENT'S COPY

out

1643

Accepted 5/15/70

CHARLOTTE - MECKLENBURG HEALTH DEPARTMENT
PERCOLATION TEST RESULTS

Location (St., Rd., Hwy.) Mt. Holly-Huntersville Road
Subdivision
Lot No. & Block No.
FHA Case No.

Owner Jerry Fox
Builder
No. Perc. Holes 6

6-Hole Average

1st. Perc. Rate	40	Min./In.	Date 5/14/70
2nd. Perc. Rate		Min./In.	Date
3rd. Perc. Rate		Min./In.	Date
4th. Perc. Rate		Min./In.	Date

Lowest Rate Above = Average Perc. Rate 40

No. Bedrooms 2 Baths 1
Washing Machine ✓ (Yes) (No) Disposal ✓ (Yes) (No)

Separate (Yes) (No) Separate (Yes) (No)

Tank Capacity 1000 gal. Gallons
Nitrification Line 230 Lin. Ft. Sq. Ft.

BUSINESS OR INDUSTRIAL BUILDINGS

W. C. Urinals Laveratories
Showers Sinks Other

Check:
Approved ✓
Disapproved
Conditional Agreement Card Signed

Michael R. Shaw
Sanitarian - Engineer

EH: #85
9/1968