Date Received_____

APT No. 12332
P.O.
T. C. No. 281-101-01

Map Date_____

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER BOB (FIRST) McLEMORE (LAST) & CO., INC.

2) ADDRESS OF OWNER P.O. Box 25746 CHAR. ZIP 28212 (MIDDLE)

3) PHONE NO. Home_____ Office 545-6111

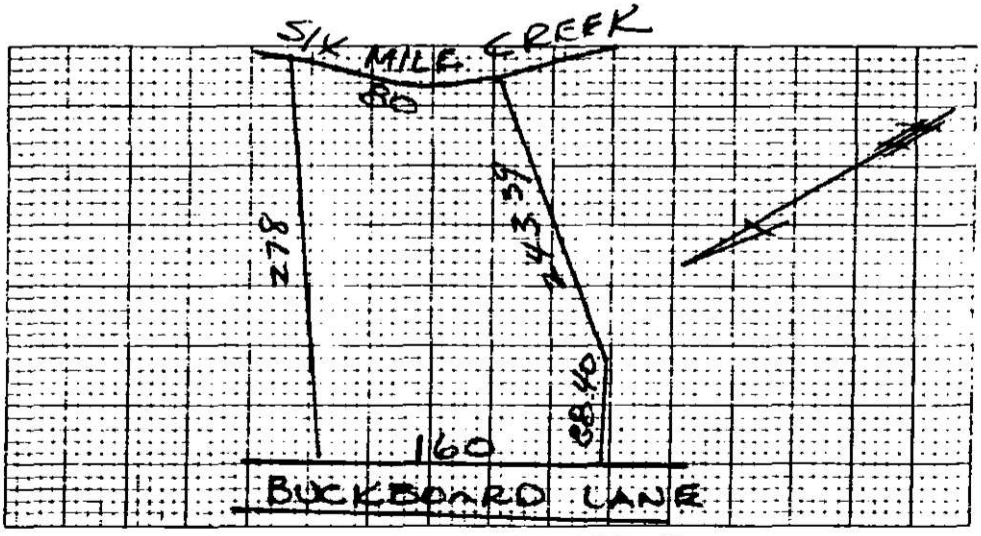
4) LOCATION OF PROPERTY BUCKBOARD LANE (STREET OR COUNTY ROAD)

5) SUBDIVISION PROVIDENCE RIDGE LOT NO. 19 BLOCK NO. A

MAP BOOK NO_____ PAGE NO._____

6) DEED REFERENCE: DEED BOOK_____ PAGE NO._____

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

Peter Orchel
OWNER

FORM NO. E1-11-3M-6-75

HEALTH DEPARTMENT'S COPY

SOIL INVESTIGATION REPORT

Date of Investigation May 4, 1977 APT NO. 12332

Owner Bob McLemore & Co. Inc.

Location of Property Buckboard Lane lot No. 19 Block A

Soil Suitability Ratings Tax Code No. PD.231-101-01

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Pacolet		Chewacla	
2. Soil Slope	suitable 2-6%		—	
3. Soil Depth	suitable >48"		—	
4. Soil Texture	provisionally suitable clay		—	
5. Soil Structure	provisionally suitable blocky		—	
6. Restrictive Horizons	—		—	
7. Soil Drainage	suitable moderately well >6'		unsuitable poorly drainage	
8. Soil Permeability (Percolation Rate)	provisionally suitable moderate		unsuitable seasonal high water table < 1½' from surface	
9. Other	60 min. —		unsuitable floods	
10. Overall Rating	provisionally suitable		unsuitable	

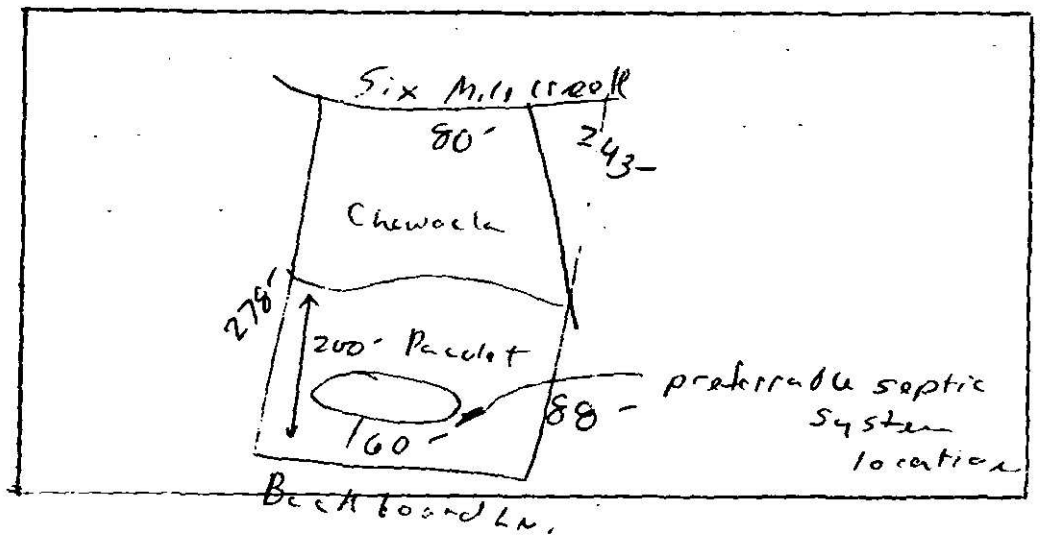
Remarks Recommendations Based on this investigation, the lot is recommended to have an acceptable area of provisionally suitable soils for installation of a septic tank system. System design should be based on a percolation rate of 60 min/in and should be placed in the area of Pacolet soils.

See diagram on back

W. Edward Gaunt
Soil Scientist

3/10/75
FHA 935

DIAGRAM OF PROPERTY



3/18/75
EHD 539

Serial No. 0758

PTR No. 12392

T. C. No. P.O.231-101-01

Date Issued May 18, 1977

Map Date

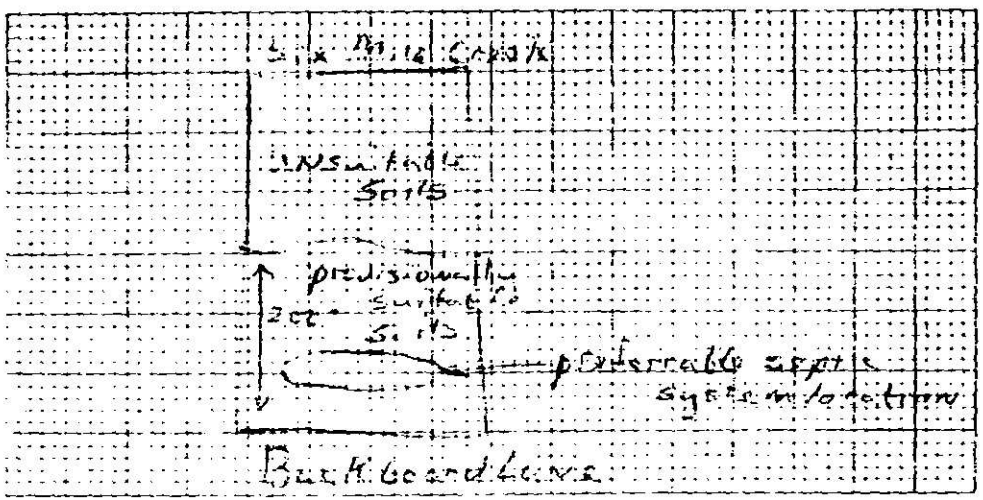
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Bob McLemore & Company, Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER P. O. Box 25746, Charlotte, NC ZIP 28212

LOCATION OF PROPERTY Buckboard Lane
STREET OR COUNTY ROAD

SUBDIVISION LOT NO 19 BLOCK NO A



PLOT PLAN

This is to certify that the soil at the above described location was investigated by the Mecklenburg County Department of Environmental Health on the date indicated and that said investigation was conducted on that portion of the property indicated on the above plot. **Provisionally Suitable 60 min/in.**

The permeability rate determined by the investigator was _____. The said lot is approved for the installation of an individual septic tank wastewater treatment system with subsurface soil absorption effluent disposal subject to the following terms and conditions:

1. A system design approved by the Mecklenburg County Department of Environmental Health must be submitted before a permit for the wastewater treatment system will be issued.
2. The rate of the soil for wastewater treatment and disposal must be determined by the Mecklenburg County Department of Environmental Health to be in accordance with the permeability rate obtained above and the design must be based thereon.
3. The approved system is to be installed in the area indicated on acceptable for system installation on the above plot.
4. The approval is granted only for the system as indicated on the plot plan which was performed on the lot and is made by the Mecklenburg County Department of Environmental Health and does not include the grading of lot or any other factors which may affect the installation, construction, alteration and operation of the 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.

Soil Scientist

Environmental Health Director or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 3/24/78

ICAR (S) Application No. 12332

T. C. No. 231-101 25

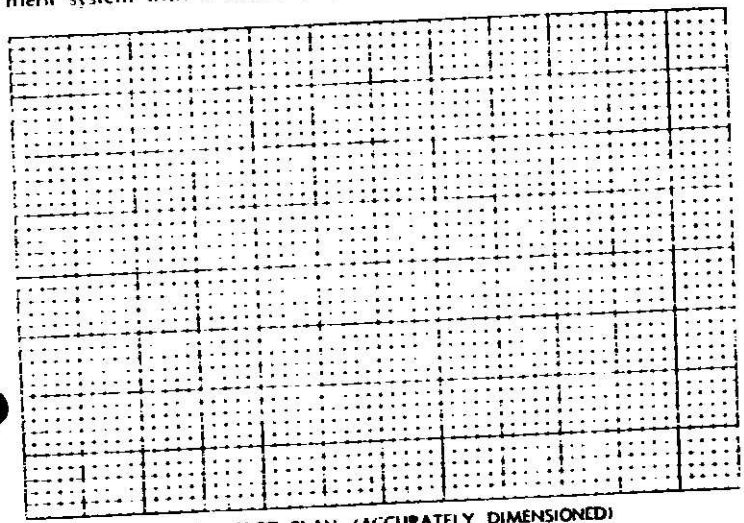
Map Date _____

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 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 ____ Yes X No

9) Water Supply:
A) Individual Well ____
B) Governmental System ____
C) Community System: X
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 Williams (LAST) John (FIRST) Henley (MIDDLE)

14) ADDRESS OF OWNER 5700 Camelot Dr. Matthews NC 28105

15) PHONE NO. Home 847-6504 Office SAME

16) LOCATION OF SYSTEM Shamrock LA (STREET OR COUNTY ROAD)

17) SUBDIVISION Eden Ridge Lot No. 19 Block No. A

Map Book No. ____ Page No. ____

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.

John K. Williams
OWNER

DATE OF APPLICATION ____

EHD-5-76

Environmental Health Department's Copy

Date Issued 3/2/78

Serial No. 1581

LA No. 12332

T. C. No. 231-101-25

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 John (FIRST) Henry (MIDDLE) Williams (LAST)

ADDRESS OF OWNER 5700 Camelot Drive, Matthews, N. C. ZIP 28105

LOCATION OF LOT Stonemede Lane (STREET OR COUNTY ROAD)

SUBDIVISION Providence Ridge 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 12332. 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, 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

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

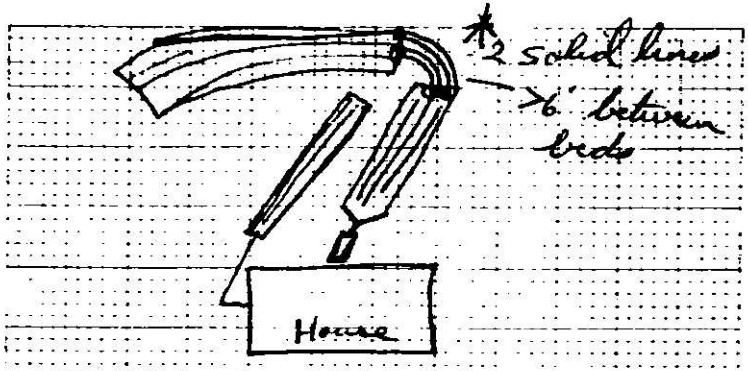
Date Issued 7 April 78 **Serial No. 1499** ICAR(S) Permit No. 12332

T. C. No 231-101-25

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 12332, dated 3/2/78 and this permit shall be void and of no effect if the information provided in the application is not true or accurate. All work shall be completed on or before 7 May, after which date this permit shall be null and void



Permeability Rate P.S.

Liquid Capacity of Tank 1500 gal

Tank Construction Pre Cast Conc.

Absorption and Distribution Lines

Total Line Length 660' & 167

Number of Lines 5 & 3

Distance from House 10'

Distance from Property Line 10'

Distance from Well N/a Community

NAME OF OWNER John H. Williams

LOCATION OF PROPERTY Stonemede Ln - Lot 19 A

This system shall meet all applicable construction requirements as set forth in the Regulations of the Mecklenburg County Health Commission in effect at 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 unimpossible before it 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

(15'X132'X17" stone) ST. (9'X56'X17" stone) W.M.

Division or Section Head

Environmentalist Stephen J. Wood

* 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

Date Issued 20 April 78 Serial No. 1483 C of A (s) No. 12332

T. C. No. 231-101-25

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF COMPLETION
CERTIFICATE OF APPROVAL

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

Name of Owner Williams (LAST) H. (FIRST) John (MIDDLE)

Location of Property 10501 Stonemede Ln [194]

Application Number 12332 Permit Number 12332

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material Pre Cast

Total Length of Drain Tile 660' & 167' Number of Lines 5 & 3

Depth of Filter Material 17" Cover Depth 18"

Water Supply Source Community Distance from Water Source N/A

Excavation Inspected 20 April 78 (DATE) Tank Inspected 20 April 78 (DATE)

Nitrification Field Inspected 20 April 78 (DATE)

Washing Machine Line Inspected, If Applicable 20 April 78 (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, constructing, 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 Hyatt

Stephen J. Wood
Environmentalist

EHD-5-76

Environmental Health Department's Copy