Date Received 7-16-84

MECK CO ''Y DEPARTMENT OF
RECEIVED
JUL 16 1984
ENVIRONMENTAL HEALTH

SIR No. 21232
T.P. No. 005-221-01
Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Noles (LAST) James (FIRST) Eugene (MIDDLE)

2) ADDRESS OF OWNER Rt 4 - Box 422 Huntersville NC.

3) PHONE NO. Home 875-6381 Office 875-1353

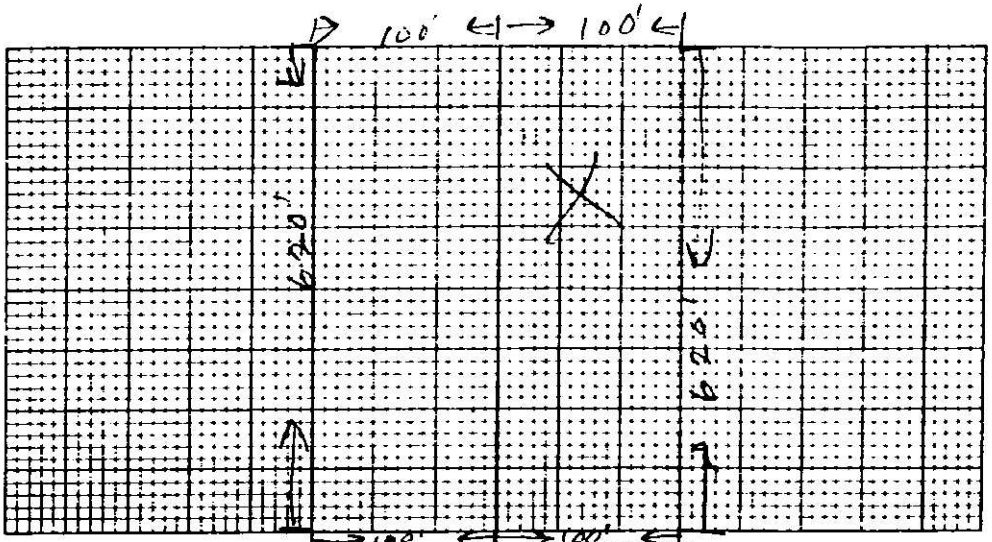
4) LOCATION OF PROPERTY Bailey Rd. (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. _____

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 on on site inspection of the lot hereinobove 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

US-21

Reeves Boro.

Bailey Rd.

James E Noles
OWNER

EHD-S-76

Environmental Health Department's Copy

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21232

T.C. NO. 80 025-241-01

(Ground Absorption Sewage Disposal)

OWNER: James E Ross
ADDRESS: P.O. Box 224 Huntersville, N.C.
LOCATION OF SITE: Beatty Rd

PLAT NO: #1
LOT SIZE: Irregular .69 acres

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U 2 to 6%	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 36 48	S (PS) U 36 40	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U 36"	S (PS) U 36	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	(S) PS U 24" to Mottled 40-60"	S Somewhat PS Poorly U Drained	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	II B	II B		
9. SITE CLASSIFICATION	Provisionally Suitable due to depth	Unsuitable		
10. SOIL SERIES	Enon Loam	Enon and Tarrus		

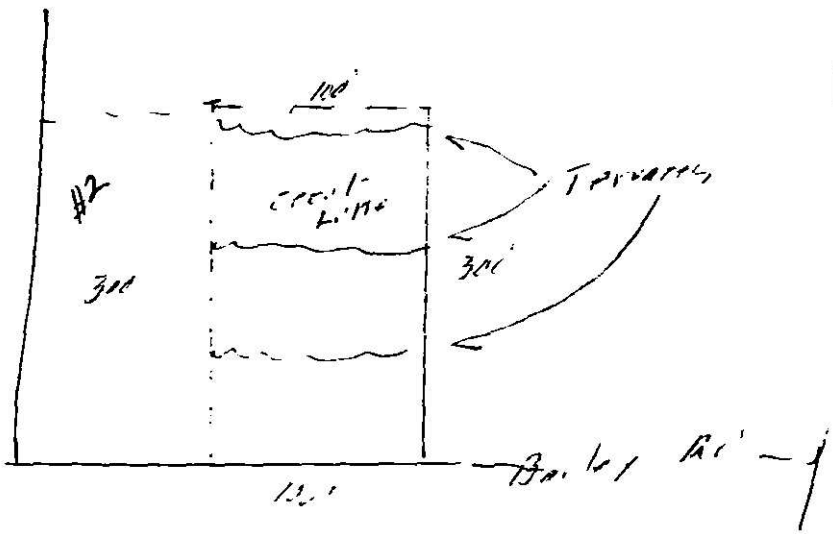
S - Suitable PS - Provisionally Suitable U - Unsuitable

**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 F. Martin
Title: Soil Scientist

Date: 7-23-84


100'
#2
300'
Spec. Line
300'
Highway 115

Serial No. 5783

SIR No. 21232

Date Issued 7-23-84

T C. No. PU 005-221-01

Map Date L

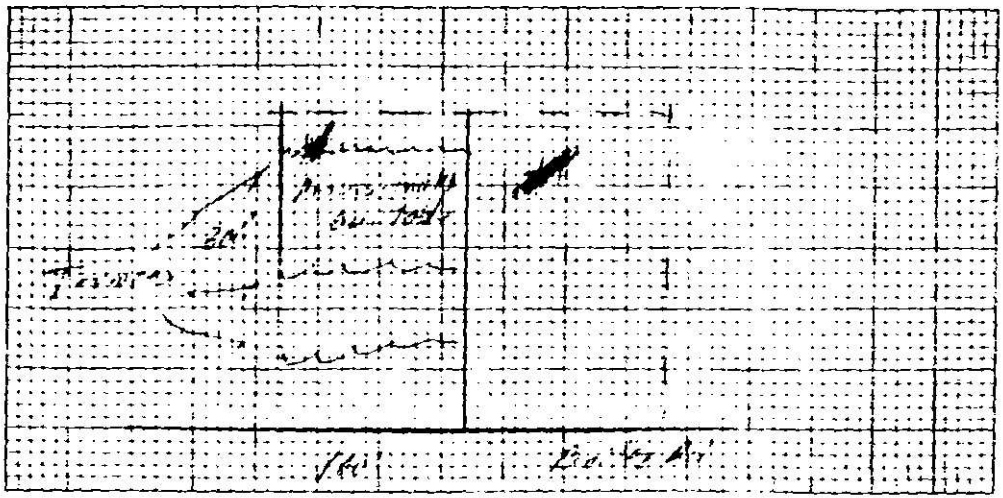
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Yates, James Eugene
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER Rt. 4, Box 422, Huntersville, NC ZIP 28078

LOCATION OF PROPERTY 10531 Bailey Road
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO #2 BLOCK NO _____



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 soil 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 sewage treatment and disposal system, subsurface soil absorption effluent discharge, subject to the following terms and conditions:

1. A permit shall be obtained from the Mecklenburg County Department of Environmental Health prior to construction of the wastewater treatment system.
2. The location of the system shall be staked out and approved by the Mecklenburg County Department of Environmental Health prior to construction. All trees to be retained shall be staked and flagged.
3. The approved system shall be located on the lot as shown on the above plot plan.
4. The system shall be installed by a licensed septic tank contractor. Before backfilling, the system shall be inspected by the Mecklenburg County Department of Environmental Health and indicated as acceptable for system type and size. It is the responsibility of the property owner to obtain this inspection.

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 are in effect on the date of this approval 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 revised laws rules or regulations been in effect on the issue date.

Soil Scientist

Environmental Health Director or Authorized Section Head

EHD-S-7e

Environmental Health Commission Copy

Date Received 7-14-94

SEE INSTRUCTIONS ON BACK

MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH
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ENVIRONMENTAL HEALTH

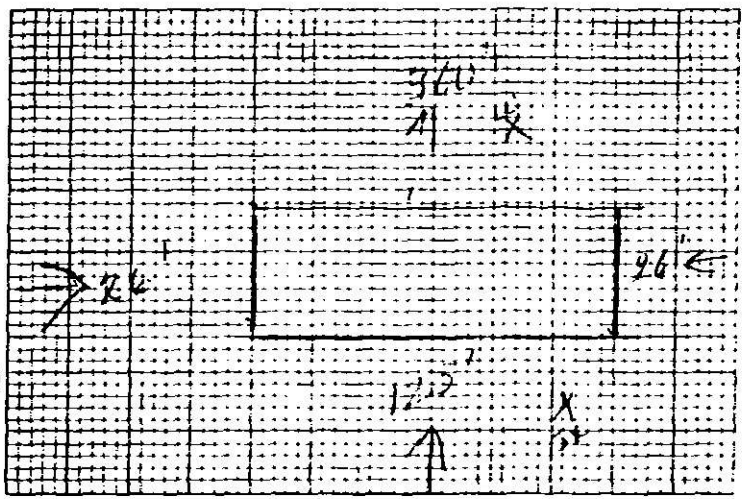
Application No. 21232
T. C. No. 005-221-01
Map Date 005-221-01
L

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) X 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 X Yes ___ No
4) No of Bedrooms 3
5 Business Use — Max No Employees ___
6 Washing Machine X Yes ___ No
7 Garbage Disposal ___ Yes X 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 Carrigan Joseph Craig
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 9C Point E Pelican 116 Bay Pt Dr, Huntersville 28078

15) PHONE NO. Home 892-3603 Office ___

16) LOCATION OF SYSTEM Bay Pt Dr (2915) 1053
STREET OR COUNTY ROAD

17) SUBDIVISION Bay Pt Lot No. 4/8 Block No. 4/8

Map Book No. 4/8 Page No. 4/8

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.

7-14-94
DATE OF APPLICATION

OWNER

EHD-S-76

Environmental Health Department's Copy

Serial No. 7698

SIR No. 21232

Date Issued 7-23-84

T. C. No. PC 005-221-01

Map Date L 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 Carrigan, (LAST) Joseph (FIRST) Craig (MIDDLE)

ADDRESS OF OWNER E James Coles Rt. 4, Box 422, Huntersville, NC ZIP 28078

LOCATION OF LOT 10531 Bailey Road (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO _____ BLOCK NO _____

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 21232. 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

William B. Lamar
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Serial No. 07446

Date Issued 7-26-87

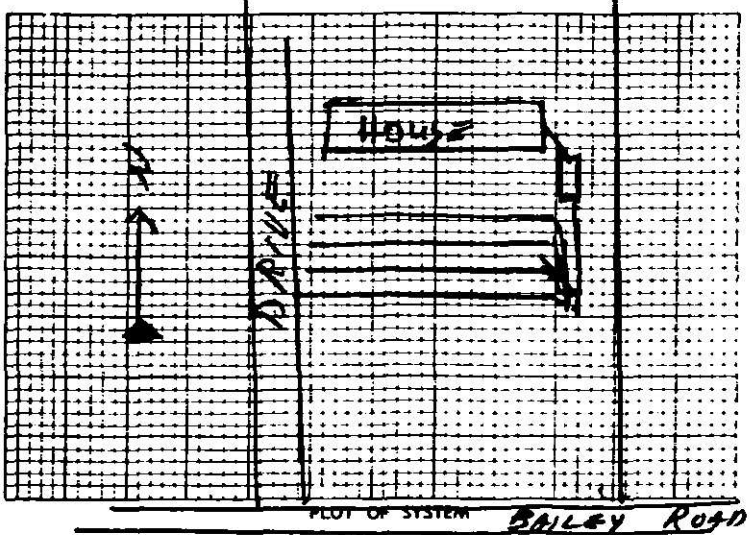
ICAR (S) Permit No. 21232 P.9

T C No. 005-221-01

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 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 21232 dated 7-19-84 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 Aug 30th 1984, after which date this permit shall be null and void.



Permeability Rate PS IIIA

Liquid Capacity of Tank 1500 GAL

Tank Construction One Pass Pumped

Absorption and/or Nitrification Lines

Total Line Length 300 LIN FT

Number of Lines FOUR

Distance from House 5 FT

Distance from Property Line 10 FT

Distance from Well KEEP 100' AWAY NOT IN YET

NAME OF OWNER CARRIGAN, JOSEPH

LOCATION OF PROPERTY 10531 BAILEY 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.

Comments: FOUR TRENCHES TO BE 75FT x 3FT x 12 inches STONE hay OR STRAW COVER - 9 wide boards

Division or Section Head

Environmentalist Ralph Miller

* 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

C of A (s) No. 21232

Date Issued 8-1-84 Serial 6854 T C. No 005-221-01 P.O. L 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 CARRIGAN, JOSEPH
LAST FIRST MIDDLE

Location of Property 10531 BAILEY ROAD

Application Number 21232 Permit Number 21232

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material Pre Cast Concrete

Total Length of Drain Tile 300 LIN. FT. Number of Lines FOUR

Depth of Filter Material 12 INCHES Cover Depth 1ft 1½ FT

Water Supply Source Well Distance from Water Source KEEP 100' AWAY NOT IN YET

Excavation Inspected 8-1-84 DATE Tank Inspected 8-1-84 DATE

Nitrification Field Inspected 8-1-84 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 / 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