Date Received 13 June 1979

API No. 15-119-30 1

T. C. No. 215-112-47

Map Date 4-5-79

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER RHYNE (LAST) RUBY (FIRST) M. (MIDDLE)

2) ADDRESS OF OWNER 2216 KIMWAY DRIVE, MATTHEWS, N. C. ZIP 28105

3) PHONE NO. Home 847-6609 Office N/A

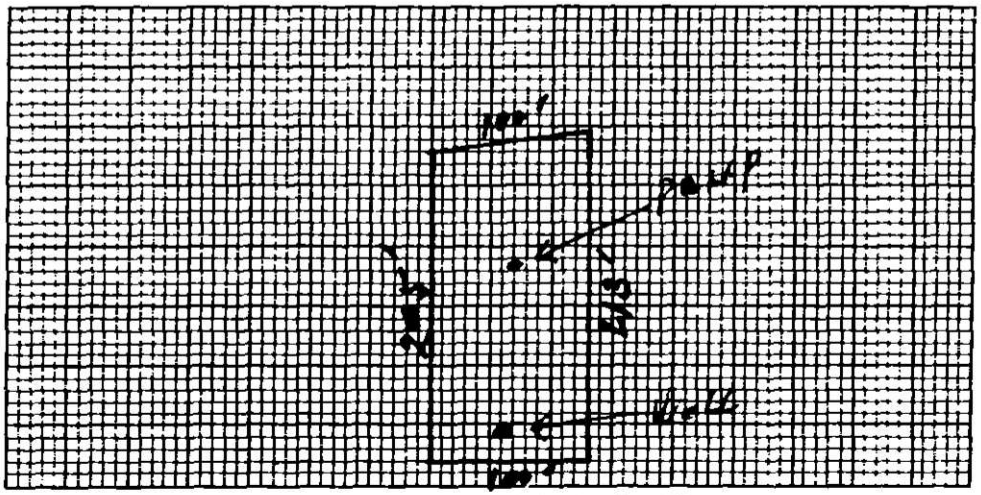
4) LOCATION OF PROPERTY 2216 KIMWAY DRIVE (STREET OR COUNTY ROAD)

5) SUBDIVISION N/A LOT NO. 26 BLOCK NO.

MAP BOOK NO. 10 PAGE NO. 657

6) DEED REFERENCE: DEED BOOK 3116 PAGE NO. 253

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

Ruby M. Rhyne

OWNER RUBY M. RHYNE

FORM NO. E-1-8-1-72

HEALTH DEPARTMENT'S COPY

NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX H
SITE EVALUATION

S.I.R. No. 15 728

(Ground Absorption Sewage Disposal)

OWNER: Ruby M. Rhyne
ADDRESS: 2216 Kimway Dr.
COUNTY: Matthews, N.C. 28105
LOCATION OF SITE: Kimway Drive

DATE REQUESTED:
PLAT NO.: 215-112-47
LOT SIZE: 20,900

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS 2 to 8% U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S (PS) Clay U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 in.) (Clayey Soils)	S (PS) Blocky U	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	(S) PS 48" U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock)	(S) None PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) 7 6' To ground water PS U	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) Moderate U	S PS U	S PS U	S PS U
8. OTHER (Specify)	S PS Site Work U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	Provisionally Suitable			
SOIL SERIES	Cecil			

S - Suitable PS - Provisionally Suitable U - Unsuitable

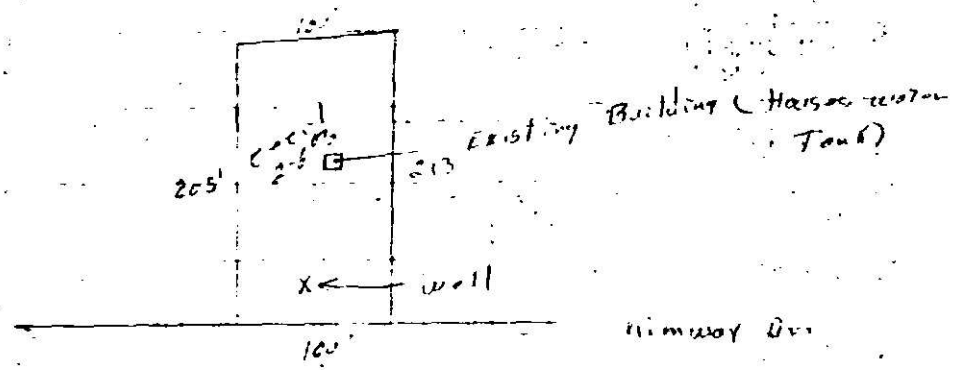
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns)

Recommendations/Comments: Water lines are buried on property - not sure of exact location -

Described By: William A. Martin

Title: Soil Scientist Date: 6-25-79

dhs form 2601 (1/79)
Sanitation



Described By: _____

Title:

dhs form 2801 (1/79)
Sanitation

Serial No. 2921

PTR No. 157[illegible]

T. C. No. 215-112-47

Date Issued June 26, 1979

Map Date 4/5/78

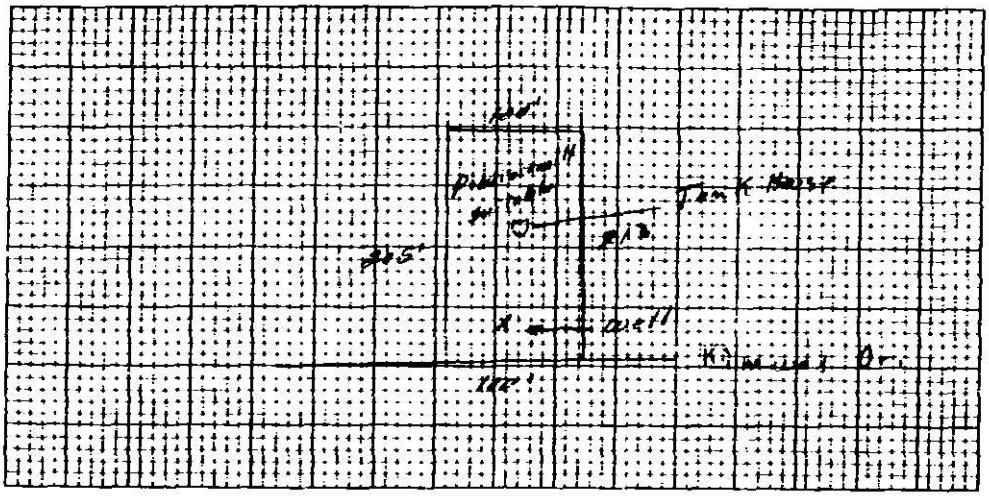
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Rhyne, Ruby M.
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 2216 Kimway Drive, Matthews, N.C. ZIP 28105

LOCATION OF PROPERTY Kimway Drive
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. 26 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 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.

EHD-S-76 William A. Mullen
Soil Scientist

Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

R

SEE INSTRUCTIONS ON BACK

Date Received 10/9/79

ICAR (S) Application No. 15730

T. C. No. 215 112-47

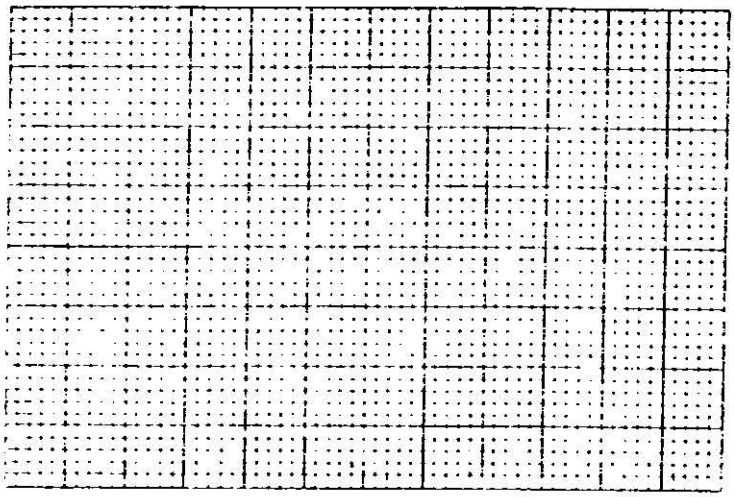
Map Date 11/2/78

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

4) No of Bedrooms 3

5) Business Use ~~Yes~~ 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 ~~JAMES~~ COLLEY (LAST) JAMES (FIRST) HARVEY (MIDDLE)

14) ADDRESS OF OWNER 4525 MURRAYHILL RD, CHAR. NC 28209

15) PHONE NO. Home 527-4708 Office 527-2121

16) LOCATION OF SYSTEM KIMWAY DRIVE (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. 26 Block No ___

Map Book No. ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___ PS

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES NO DATE RUN 6/26/79

20) PTR NUMBER (See Instructions) 15730

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.

10/9/79
DATE OF APPLICATION

James H. Colley
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 3594

LA No. 15730

Date Issued Oct. 9, 1979

T. C. No. 215-112-47

Map Date 4/5/78

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 Colley, James Harvey
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 4525 MurrayHill Road, Charlotte ZIP 28209

LOCATION OF LOT KIMWAY DRIVE
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. #26 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 15730 15730
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.

Steve Wood

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued 3-10-80

Serial 3695

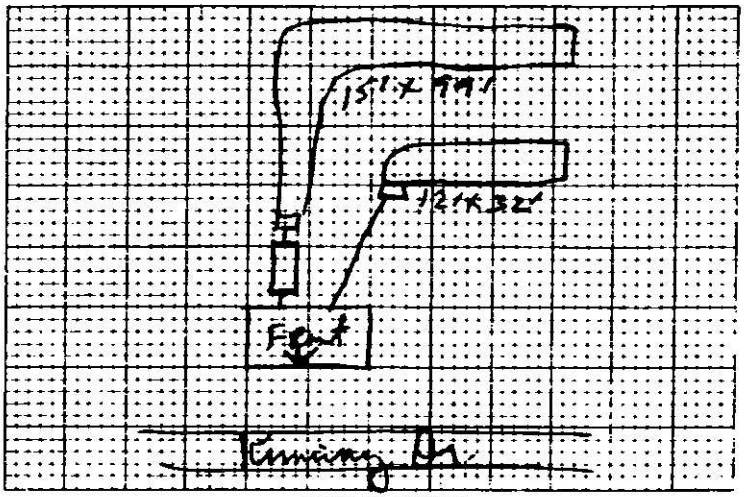
ICAR (S) Permit No. 15730

T. C. No. 215-11247

Map Date 4/5/78

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 15730, dated 10/9/79 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 3/31/80, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate P S

Liquid Capacity of Tank 1500 gal

Tank Construction P C.

Absorption and/or Nitrification Lines

Total Line Length 495' + 125'

Number of Lines 5' + 4'

Distance from House 10'

Distance from Property Line 10'

Distance from Well 50'

NAME OF OWNER James Harvey Colley

LOCATION OF PROPERTY Kimway Dr.

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.

151' x 99' + 17" Stone on Septic System

121' x 32' + 17" Stone on Washing Machine

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.

BMD-5-76

Environmental Health Department's Copy

Date Issued 4-18-80 Serial 3582 C of A (s) No. 15730 T C. No. 215-112-47

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL HEALTH DIVISION

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

Name of Owner Colley (LAST) James (FIRST) Howey (MIDDLE)

Location of Property Kennedy Dr.

Application Number 15730 Permit Number 15730

Inspection Data:

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

Total Length of Drain Tile 495 + 125 Number of Lines 495 + 125

Depth of Filter Material 17" Cover Depth 17"

Water Supply Source well. Distance from Water Source 50+

Excavation Inspected 4-18-80 (DATE) Tank Inspected 4-18-80 (DATE)

Nitrification Field Inspected 4-18-80 (DATE)

Washing Machine Line Inspected, If Applicable 4-18-80 (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

Bob Wilson
Environmentalist

EHD-S-76

Environmental Health Department's Copy