Date Received 8-12-83

RECEIVED
AUG 12 1983
ENVIRONMENTAL HEALTH

SIR No. 19945

T. C. No. 197-101-22

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Herron (LAST) Julius (FIRST) Wayne (MIDDLE)

2) ADDRESS OF OWNER 108 Morning Wood Dr. Mathews ZIP 28105

3) PHONE NO. Home 821-7745 Office 376-3661

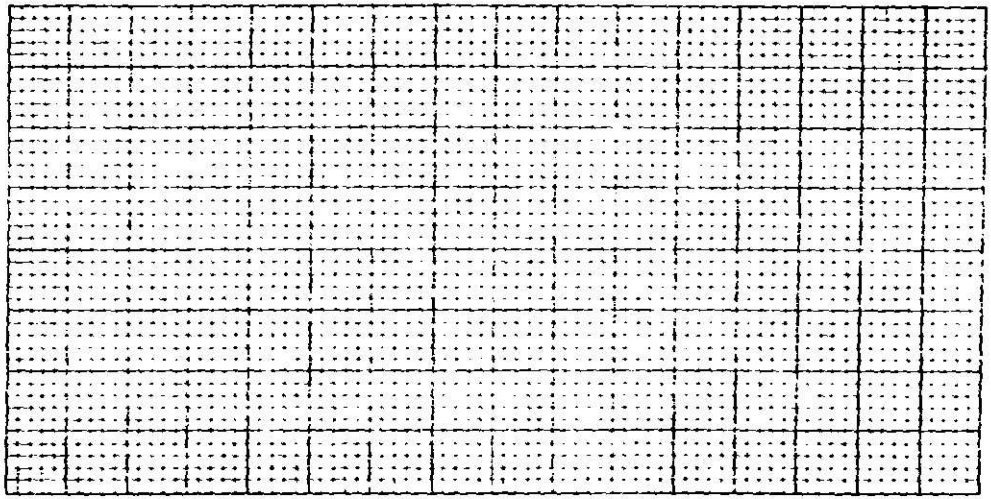
4) LOCATION OF PROPERTY 9116 Brief Rd. S.R. # 3106 (STREET OR COUNTY ROAD)

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

MAP BOOK NO _____ PAGE NO. _____

6) DEED REFERENCE. DEED BOOK 4600 PAGE NO 0207

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

Julius W. Herron
OWNER

EHD-5-76

Environmental Health Department's Copy

Serial No. 5173

SIR No. 19945

T. C. No. 197-101-22

Date Issued 8-23-83

Map Date

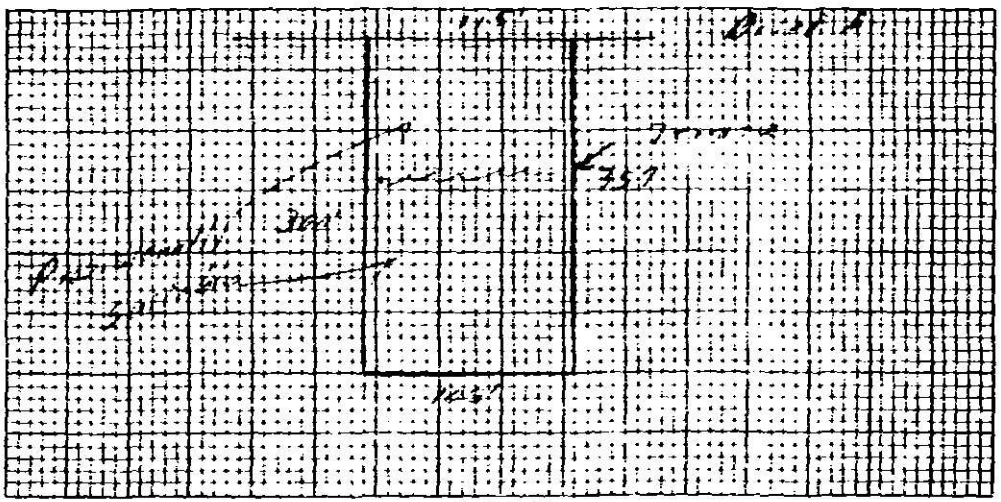
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Herron, (LAST) Julius (FIRST) Wayne (MIDDLE)

ADDRESS OF OWNER 108 Morningwood Dr., Matthews, NC ZIP 28105

LOCATION OF PROPERTY 9116 Brief Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO. 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 **Provisionally Suitable**

The permeability rate determined by the investigation was 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 for 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.

Soil Scientist

Environmental Health Director or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 19445

T.C. NO. 117-101-22

(Ground Absorption Sewage Disposal)

OWNER: Julius H. Gibson
ADDRESS: 106 Mainwaring Dr.
Matthews, NC. 28105
LOCATION OF SITE: 9116 Bain Road

PLAT NO:
LOT SIZE: #3466

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S / PS 2-8% / U	S / PS / 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 / U	S / PS / U	S / PS / U
3. SOIL STRUCTURE (12-36 inches)	S / PS Blocky / U	S / PS / U	S / PS / U	S / PS / U
4. SOIL DEPTH (inches)	S / PS 36-40" / U	S / PS / U	S / PS / U	S / PS / U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S / PS 36" / U	S / PS / U	S / PS / U	S / PS / U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S / PS 36" Ground water / U	S / PS / U	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 P			
9. SITE CLASSIFICATION	Provisionally Suitable			
10. SOIL SERIES	Cullen Loam			

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)

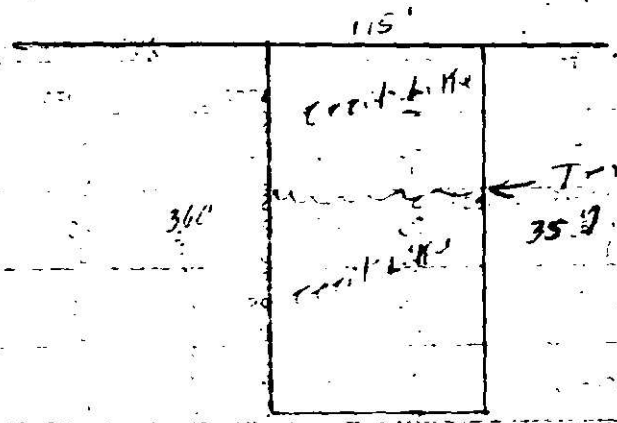
Recommendations/Comments: _____

Described by: William J. Martin
Title: Soil Scientist

Date: 5-27-83

EHD 539 (Revised: 6/82)

K


115'
Brick Rd
Terrace
36'
35'
70'

Date Received 8-12-83 AUG 12 ENVIRONMENTAL HEALTH — SEE INSTRUCTIONS ON BACK

ICAR (S) Application No. _____

T. C. No. 197-M1-22

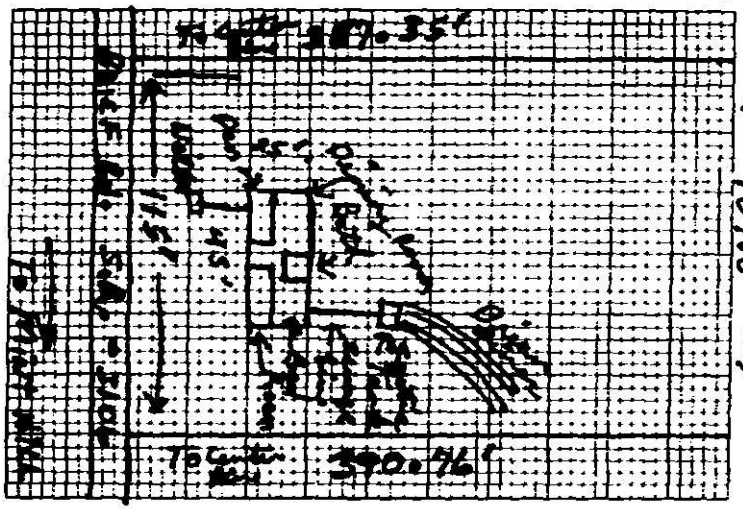
Map Date _____

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) 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)

4) Mobile Home ___ Yes X No
Residence X Yes ___ No

4) No of Bedrooms 2

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 Herron (LAST) Julius (FIRST) Wayne (MIDDLE)

14) ADDRESS OF OWNER 108 Morning Wood Dr. Matthews, NC. 28105

15) PHONE NO. Home 821-7745 Office 376-3661

16) LOCATION OF SYSTEM 9116 Briar Rd. S.R. # 3106 (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK 4600 AT PAGE 0207

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.

8/4/83
DATE OF APPLICATION

Julius W. Herron
OWNER

EHB-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

BI. 8-25-83

SIR No. 19945

Serial No. 6708

Date Issued 8-23-83

T. C. No. 197-101-22

Map Date

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 Herron, (LAST) Julius (FIRST) Wayne (MIDDLE)

ADDRESS OF OWNER 108 Morningwood Dr., Matthews, NC ZIP 28105

LOCATION OF LOT 9116 Brief 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 19945 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.

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

Serial No. 6875

ICAR(S) Permit No. 19945

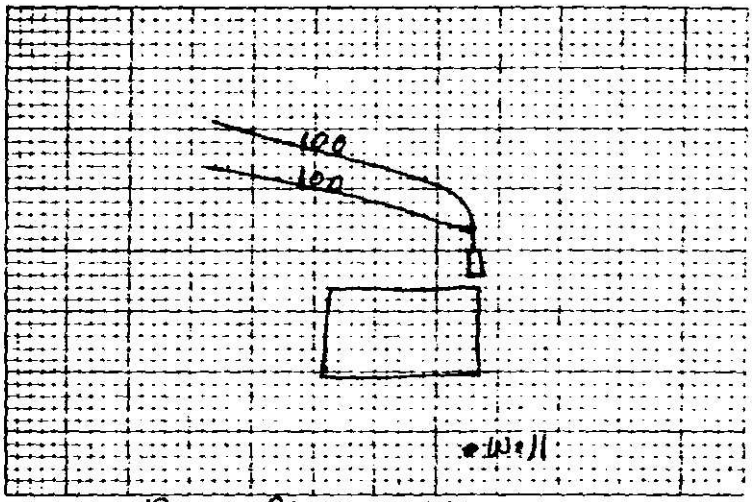
Date Issued 1-12-34

T C No 197-101-22

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 19945, dated 34-23 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 Feb 1, 1934, after which date this permit shall be null and void.



Brief Rd PLOT OF SYSTEM

Permeability Rate 3.5

Liquid Capacity of Tank 1500

Tank Construction Pre Cast

Absorption and/or Nitrification Lines

Total Line Length 200

Number of Lines 2

Distance from House 15

Distance from Property Line 10

Distance from Well 100

NAME OF OWNER Julis Herrer

LOCATION OF PROPERTY 9116 Brief 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.

2 Lines 9' Apart - 12" Stone - Straw on rock

Comments: 2

B. Hartsell
Division or Section Head

Willard Ramsey
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.

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

C of A (s) No. 19945

T.C. No 197-101-22

Date Issued 1-26-84 Serial 6397

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 Herron Jules (LAST, FIRST, MIDDLE)

Location of Property Briar Rd 9116

Application Number 19945

Permit Number 19945

Inspection Data:

Liquid Capacity of Tank 1500

Total Length of Drain Tile 200

Depth of Filter Material 12

Water Supply Source well

Excavation Inspected 1-26-84 (DATE)

Nitrification Field Inspected 1-26-84 (DATE)

Washing Machine Line Inspected, If Applicable NA (DATE)

Tank Material Concrete

Number of Lines 2

Cover Depth 12

Distance from Water Source 100'

Tank Inspected 1-26-84 (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

W. B. Ramsey
Environmentalist

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

B 1-27-84

C of A (s) No. 19945

Date Issued 1-26-84 **Serial** 6397 T C. No. 197-101-22

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 Herron (LAST) Julis (FIRST) (MIDDLE)

Location of Property Briggs Rd 9116

Application Number 19945 Permit Number 19945

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material Concrete

Total Length of Drain Tile 200 Number of Lines 2

Depth of Filter Material 12 Cover Depth 12

Water Supply Source well Distance from Water Source 100+

Excavation Inspected 1-26-84 (DATE) Tank Inspected 1-26-84 (DATE)

Nitrification Field Inspected 1-26-84 (DATE)

Washing Machine Line Inspected, If Applicable NA (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been K 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 _____

W. B. Ramsey
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY