Date Received 12-21-83

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DEC 21 1983
ENVIRONMENTAL HEALTH

SIR No. 20413
T. R. 135-318-04
Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Holton (LAST) A. (FIRST) L. (MIDDLE)

2) ADDRESS OF OWNER 5817 Lebanon Road, Mint Hill, NC ZIP 28212

3) PHONE NO. Home 545-9933 Office 289-9421

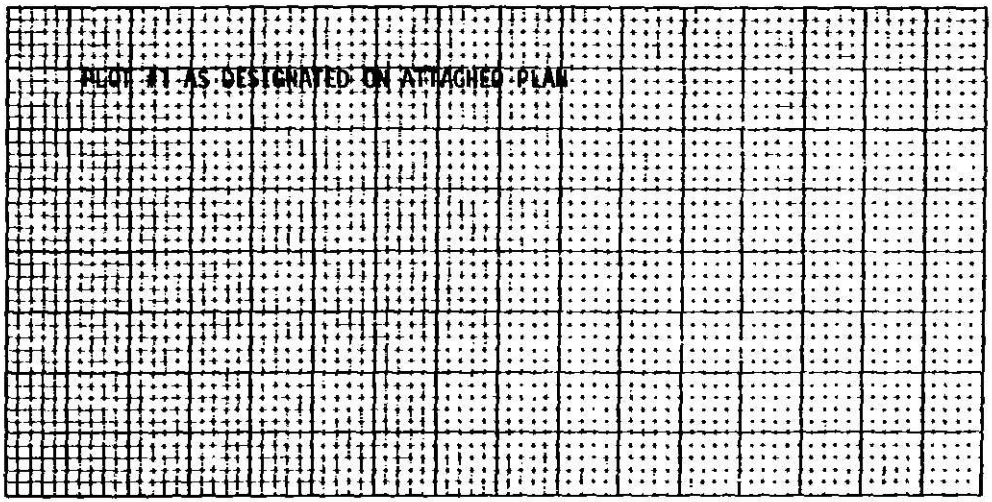
4) LOCATION OF PROPERTY East side of Lebanon - across from Birdie Court lying between T. F. Helms, Jr. (3107-7) and Southern Builders Corp. (4462-040) and as designated on attached preliminary plan.

5) SUBDIVISION _____ LOT NO. 1 BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. _____

6) DEED REFERENCE: DEED BOOK 1012 PAGE NO. 235
Tax Parcel No. 135-318-04

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

NOTE: Soil test signs up...each lot is staked at a point in approximately the center of plot. Weeds are cut for easy access.

_____
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20413

T.C. NO. PO135-311-04

(Ground Absorption Sewage Disposal)

OWNER: Zula Cochrane c/o Billy Cochrane PLAT NO: #1
ADDRESS: Rx3 Box 344 LOT SIZE: 32,461
Statesville, NC 28677
LOCATION OF SITE: Johnson Road

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 36-48" 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 >48" to 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	IVA			
9. SITE CLASSIFICATION	Provisionally suitable			
10. SOIL SERIES	Cerit Lake			

S - Suitable PS - Provisionally Suitable U - Unsuitable

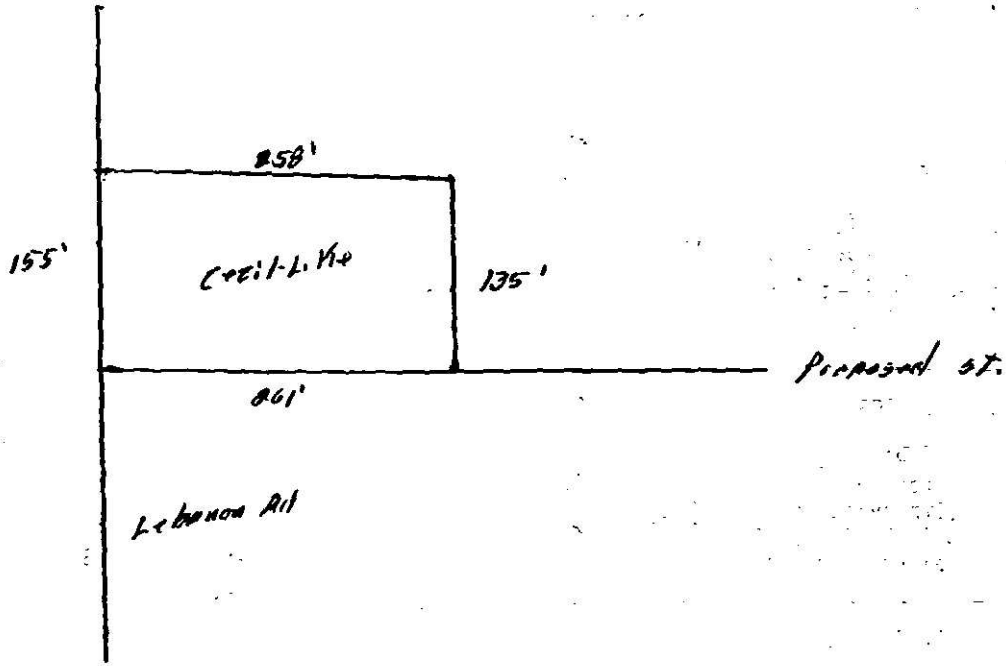
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: William A. Martin
Title: Soil Scientist

Date: 1-10-84

EHD 539 (Revised: 6/82)


858'
155'
Cattle Lick
135'
Proposed St.
861'
Lebanon Rd

Serial No. 5408

SIR No. 20413

T. C. No. PO 135-311-04

Date Issued 1-13-84

Map Date

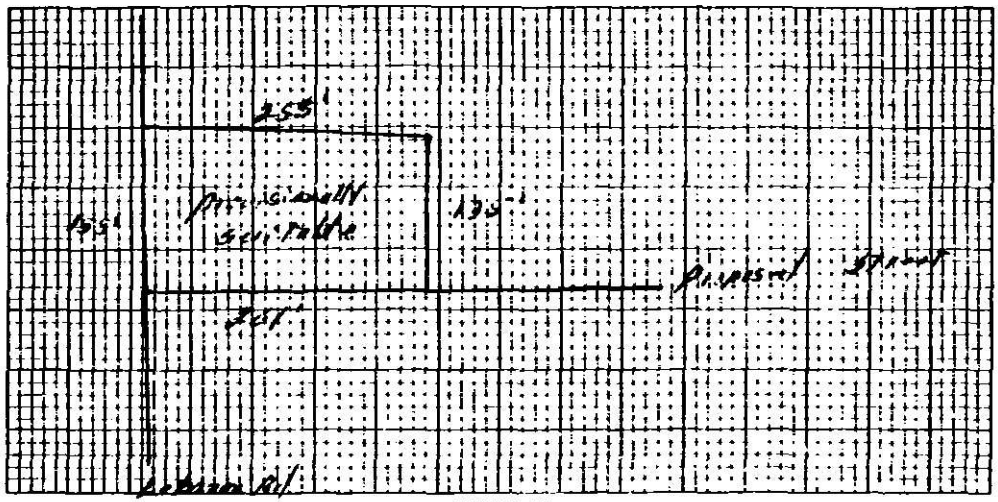
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Zula Cochrane
LAST FIRST MIDDLE

ADDRESS OF OWNER % Billy Cochrane Rt. 3, Box 344, Statesville, NC ZIP 28677

LOCATION OF PROPERTY Lebanan Road
STREET OR COUNTY ROAD

SUBDIVISION LOT NO. 1 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 therein.
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.

William A. Martin
Soil Scientist

Bill D. Hardesty Jr.
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

APPLICATION FOR AN IMPROVEMENT PERMIT

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

MCK COUNTY DEPARTMENT OF
RECEIVED
AUG 11 1987
ENVIRONMENTAL HEALTH

(OFFICE USE ONLY)
FILE: 20413
TC: _____
SERIAL: Nº 14218

☒ L ☐ CRT

JOB LOCATION

① ADDRESS: 4044 (STREET NO.) FIVE OAKS (STREET) CT. ② FILE: _____
③ JURISDICTION: Meck. Co. ④ TAX PARCEL NO.: 135-311-14
⑤ SUBDIVISION: A L HOLTON ⑥ LOT: #1 ⑦ BLOCK: _____

OWNER

⑧ NAME: Gary (FIRST) Paul (MIDDLE) Mullis (LAST)
⑨ MAILING ADDRESS: 12312 Grier Place
⑩ CITY: Mathews ⑪ STATE: N.C. ⑫ ZIP: 28105
⑬ PHONE: (WORK) 336-3527 (8-9am) ⑭ (HOME) 847-1387

REQUEST

This request is for a(n):

⑮ ☑ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☐ Other (specify) _____

DESIGN CRITERIA

System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 4
㉕ Type? _____
㉓ Maximum occupancy? 4
㉖ Maximum number of employees? _____
㉔ Basement? ☐ yes ☑ no
㉗ Maximum number of seats? _____

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☑ Individual well
B ☐ Municipal system
C ☐ Community well
D ☐ Community system

㉙ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Gary P Mullis
Date: 8-10-87

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG CO. DEPARTMENT OF ENVIRONMENTAL HEALTH, certifies that the Depa[rtment] has approved the Request for the Job Location contained in this doc[ument]. This approval is granted in accordance with the provisions of Lo[cal] Rules For Sanitary Sewage Collection, Treatment And Disposal in e[ffect] the time of issuance of the permit and is subject to the following pro[visions]

. . . No work shall be conducted on the septic tank system [or] Installation, Construction, Alteration and/or Repair permit is issue[d] Department.

. . . This permit is not transferable, and shall become null and [void] months from the date of issuance

Environmentalist: _____ Date: 8-19-87

Director or Authorized Section Head: _____ Date: 8-19-87

*This permit must be signed by the Director of Environmental Heal[th] authorized section head in order to be valid.

PROPOSED PLOT PLAN

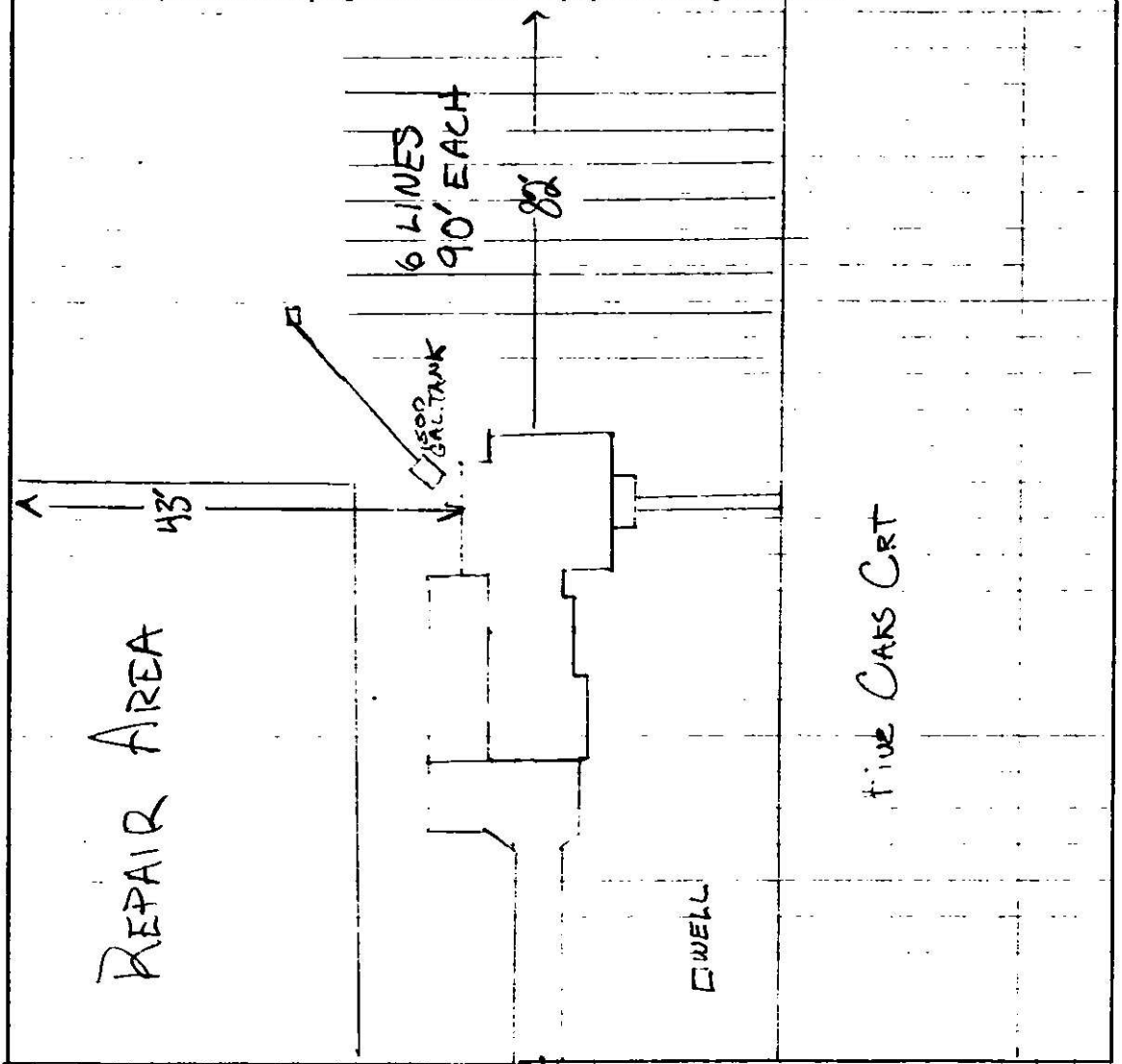
MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 20413

TC: _____

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Signed: Gary P Mullis

Date: 8-17-87

MECK COUNTY DEPARTMENT OF
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ENVIRONMENTAL HEALTH

DATE: 8/11/87

TO: ENVIRONMENTAL HEALTH

FROM: COUNTY ENGINEERING

EHD FILE _____ JURISDICTION CODE MINT

PARCEL NUMBER #135-311-14

ASSIGNED ADDRESS 4044 FIVE OAKS, C.T.

EXISTING ADDRESS _____

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	NOT APPROVED
1. SUBDIVISION REGULATIONS	☐	☐ *
2. FLOODWAY REGULATIONS	☐	☐ *
3. EROSION CONTROL REGULATIONS	☐	☐ *
4. COMMERCIAL DRAINAGE PLAN	☐	☐ *

	PRESENT	NOT PRESENT
5. PUBLIC UTILITY EASEMENT	☐ *	☑
	YES	NO
6. PROPERTY FRONTS ON THOROUGHFARE	☑ BM *	☐
	YES	NO
7. DRIVEWAY PERMIT REQUIRED	☐ *	☑

* If checked, further investigation will be required to determine whether a building permit may be issued by Building Standards for the site.

REMARKS: SEPTIC TANK.

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE AT BUILDING STANDARDS WHEN PAYING PERMIT FEES.
A CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL THE TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

SIGNED: B. McConnico

OPWEAR 02/86

RECEIVED

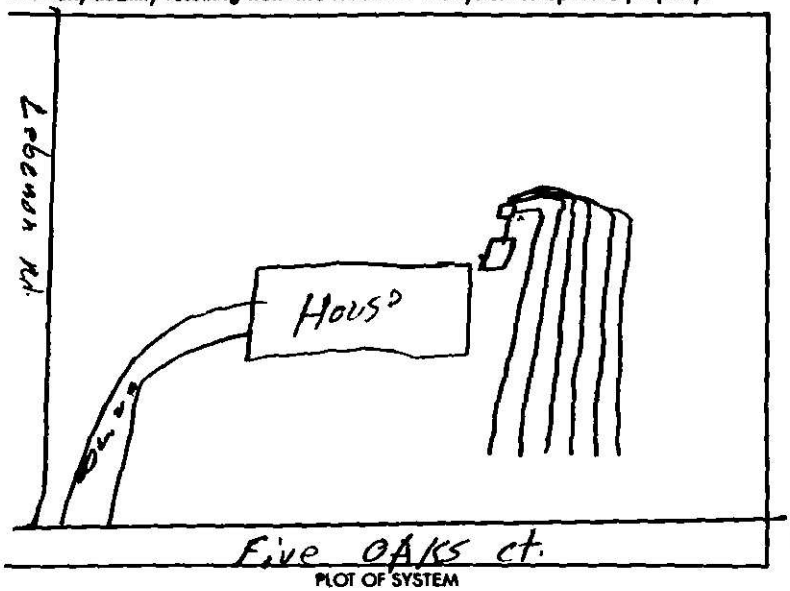
Not on
CRT -
Please add.
Thanks
JR

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 20413 DATE: 2-25-98
TC: 135-311-14 PI
SERIAL № 11620

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 the application dated 2-10-98. All work shall be completed on or before 3-25-98, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Department of Environmental Health before any system can be covered up or placed into service. 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons
Liquid Capacity of Dosing Tank — gallons
Tank Construction PCC

Absorption and/or Nitrification Lines:
Trench Width 3 feet
Total Line Length 540 feet
Number of Lines SIX
Depth of Stone 12 inches
Distance from House 5 feet
Distance from Property Line 10 feet
Distance from Well 756 feet

NAME OF OWNER Gary Mullis
LOCATION OF PROPERTY 4044 Five OAKS Ct
Comments: Six Trenches 90' X 3' X 12" Stone

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.

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER OR AGENTS COPY

CERTIFICATE OF COMPLETION/OPERATION PERMIT

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 20413 DATE: 3-3-88
TC: 135-311-14 ☐ L ☒ CRT
SERIAL № 10892

Name of Owner Gary Mullis Juris.:
Address of Property 4044 Five Oaks Ct.

Inspection Data:

Tank Material PCC
Total Length of Drainfield 540
Number of Lines 6 @ 90'
Cover Depth 24"
Water Supply Source well
Distance to Water Source >50'
Excavation Inspected 3-3-88
Tank(s) Inspected 3-3-88
Wash Line Inspected —
High Water Alarm Inspected —

PLOT

Design: 1968, 1500 ST CCN, ~~1200~~ 1620 SFT, 12G, CCC CTR#

The undersigned has inspected the Septic Tank System described above, and certifies it has been
☒ installed or constructed ☐ altered or repaired
☒ in accordance with the permit issued ☐ as detailed in the plot above
and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The issuance of this
☒ Certificate of Completion ☐ Operation Permit
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 document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 10 NCAC 10A .1900 in addition to those listed below under "COMMENTS." This document 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:

[signature]
Environmentalist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.