Date Received 10/9/78

MECK. COUNTY DEPARTMENT OF
RECEIVED
OCT [illegible]
ENVIRONMENTAL HEALTH

APT No. 14615
231-05-1-23
T. C. No.

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Key Homes, Inc.
(LAST, FIRST, MIDDLE)

2) ADDRESS OF OWNER P. O. Box 20207, Greensboro, N. C. ZIP 27420

3) PHONE NO Home Office 919-273-2521

4) LOCATION OF PROPERTY East Providence Drive
(STREET OR COUNTY ROAD)

5) SUBDIVISION East Providence Estates LOT NO 6 BLOCK NO 4

MAP BOOK NO 9 PAGE NO 357

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 an on site inspection of the lot hereinafter 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

See Map Attached

7) ACCURATELY DIAGRAM & DIMENSION LOT

Charles T. Gordon
XXXXXX Vice President

EHO-S-76

Apt. 14615

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

APPENDIX H
SITE EVALUATION

(Ground Absorption Sewage Disposal)

OWNER: Key Homes, Inc. DATE REQUESTED: 10/9/78
ADDRESS: PO Box 2020 Greensboro, NC PLAT NO.:
COUNTY: Wake LOT SIZE: 43,900 sq Ft.
LOCATION OF SITE: East Forestdale Rd 0231-051-23

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (8-12%) PS U	S (8-12%) PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S Sand to clay PS U (2:1)	S Sand PS (some) U 2:1 clays	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S PS Sandy to U massive	S PS (sand) U	S PS U	S PS U
4. SOIL DEPTH (In.)	S PS (>48") U	S PS (>48" to clay) U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Imprevious Strata, Rock)	S PS (none noted) U	S PS (none noted) U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	S Possibly PS Perched U (water table)	S PS (>6' to water table) U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S PS Slow U	S PS (moderate) U	S PS U	S PS U
8. OTHER (Specify)	S — PS U	S PS (Sand) U	S PS U	S PS U
9. SITE CLASSIFICATION	UNSUITABLE	Provisional Suitable		
SOIL SERIES	(HELENA)	—		

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, etc)

Recommendations/Comments: _____

Described By: Steve Wood

Title: Environmentalist Date: 10/10/78

DHS Form 2601 (2/77)
Sanitation

Serial No. 2256

PTR No. 1461

Date Issued October 11, 1978

T. C. No. 231-051-23

Map Date

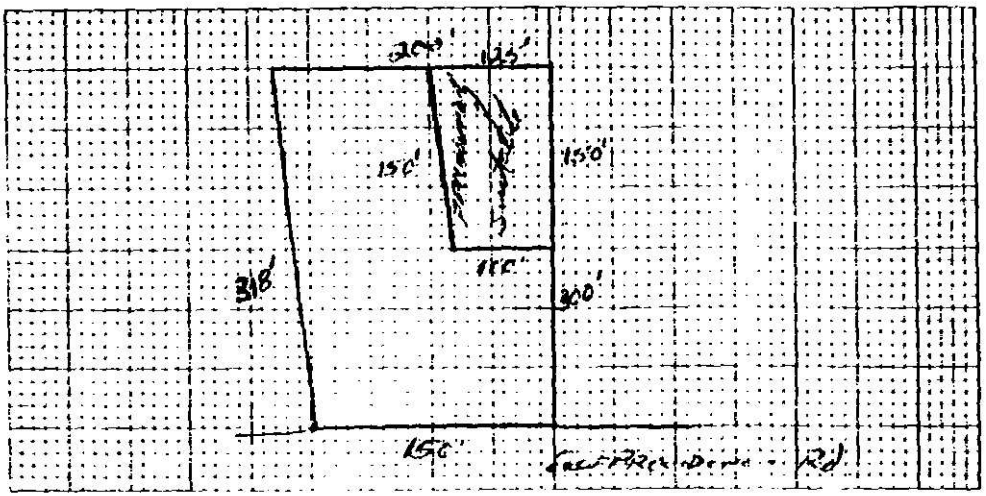
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Key Homes, Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER P.O. Box 20207, Greensboro, NC ZIP 27420

LOCATION OF PROPERTY East Providence Drive
STREET OR COUNTY ROAD

SUBDIVISION East Providence Estates LOT NO 6 BLOCK NO. 4



PLOT PLAN

This lot was staked, platted and evaluated in accordance with the soil profile evaluation as specified by the Mecklenburg County Department of Environmental Health. The soil investigation was conducted on the date shown on the lot as indicated on the above plat. **Provisionally Suitable**

The permeability rate determined for this lot was The said lot is approved for the installation of an individual single family residence wastewater treatment system with subsurface, soil absorption effluent discharge subject to the following terms and conditions:

1. A permit application for the proposed residence to be served by the Mecklenburg County Department of Environmental Health for the installation of the wastewater treatment system on the lot.
2. The size of the septic tank and absorption area which must be installed is to be determined by the Mecklenburg County Department of Environmental Health according to the rate indicated above and on the soil profile evaluation.
3. The lot must not be altered from the condition which existed at the time of the system installation or the issuance of the permit.
4. The above described lot is approved for the specific proposed residence only. Any change in the lot which, in the opinion of the Mecklenburg County Department of Environmental Health, may render the lot unsuitable as acceptable for the proposed system will void this permit.

This approval is granted pursuant to the provisions of North Carolina General Statutes and the rules and regulations of the North Carolina Department of Human Resources, Division of Health Services and the Mecklenburg County Health Commission governing the subdivision of land and is void if at any time in the future the proposed residence, these laws, rules and regulations are changed such that this approval would not have been granted had the revised laws, rules and regulations been in effect on the issue date.

Date 9-78 Environmentalist

Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 5/18/79

ICAR(S) Application No. 14615

T. C. No. 231-051-23

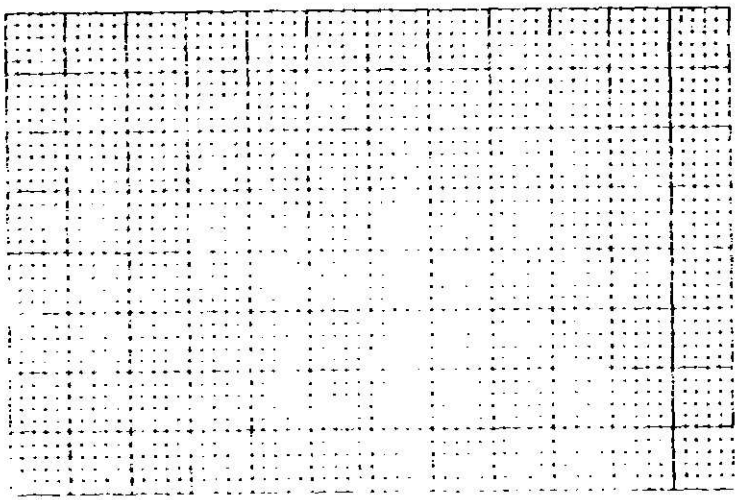
Map Date _____

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)

Mobile Home ✓ Yes ___ No

Residence ✓ Yes ___ No

4. No. of Bedrooms 3

5. Business Use - Max No Employees ___

6. Washing Machine ✓ Yes ___ No

7. Garbage Disposal ___ Yes ___ No

8. Dishwasher ✓ Yes ___ No

9. Water Supply
   A. Individual Well ✓
   B. Environmental System ___
   C. Community System
      1. Well source ___
      2. Governmental source ___

10. Sewage System
    A. Property located within 200 feet of public sewer ___ Yes ___ No
    B. Property located within 200 feet of community sewer ___ Yes ✓ No

11. EHA Case No. ___

12. Other ___

13) NAME OF OWNER Akerman R. Gerald (LAST / FIRST) R (MIDDLE)

14) ADDRESS OF OWNER 1832 Moore Rd.

15) PHONE NO Home 8478115 Office 523-3212

16) LOCATION OF SYSTEM East Providence Dr. (STREET OR COUNTY ROAD)

17) SUBDIVISION East Providence Estates Lot No 6 Block No. 4

Map Book No ___ Page No ___

18) DEED REFERENCE - DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN MADE ✓ YES ___ NO DATE RUN 10/11/79 → PS

20) PTR NUMBER (See Instruction) 14615

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.

DATE OF APPLICATION ___

Akerman R. Gerald
OWNER

HS 5 74

Environmental Health Department's Copy

Serial No. 3068

LA No. 14615

Date Issued May 18, 1979

T. C. No. 231-051-23

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 Akerman, R. Gerald
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 1832 Moore Road ZIP _____

LOCATION OF LOT East Providence Drive
(STREET OR COUNTY ROAD)

SUBDIVISION East Providence Estates LOT NO. 6 BLOCK NO. 4

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 14615. 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

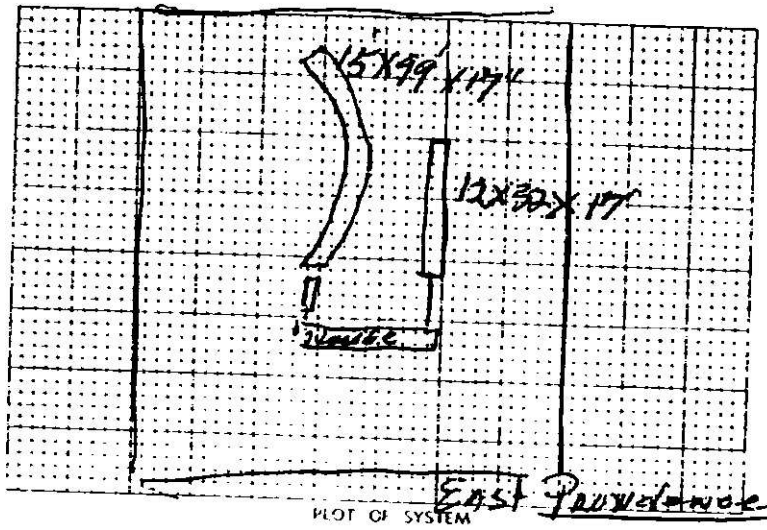
Date Issued 11-29-79 Serial 3420 ICAR (S) Permit No 14615

T. C. 23-051-23

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 14651, dated 5-18-79 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 12-29-79, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate P/S

Liquid Capacity of Tank 1500

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 JERALD R. AKERMAN

LOCATION OF PROPERTY EAST Providence 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.

Division or Section Head

Environmentalist Wardlow Edwards

* 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

Health Department's Copy

C of A (s) No. 14615

Serial 3301

Date Issued 7 Dec 79

T. C. No. 231-051-23

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 Herman (Last) Gerald (First) R. (Middle)

Location of Property 2000 ~~the~~ East Providence Dr

Application Number _____ Permit Number 14615

Inspection Data:

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

Total Length of Drain Tile 49' & 125' Number of Lines 3 & 4

Depth of Filter Material 12" Cover Depth 15

Water Supply Source well Distance from Water Source 75'

Excavation Inspected _____ (Date) Tank Inspected 7 Dec (Date)

Nitrification Field Inspected 14 Dec (Date)

Washing Machine Line Inspected If Applicable 7 Dec (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 As permitted by W E.

Environmentalist(s)

EHD-5-76

Environmental Health Department's Copy