Date Received 5-2-73

APT No. 6129

P.O.T.C. No. 031-213-06

Map Date 4-27-73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Davis (LAST) Robert (FIRST) James (MIDDLE)

2) ADDRESS OF OWNER 401 Hunsacker Dr. ZIP

3) PHONE NO. Home None Office

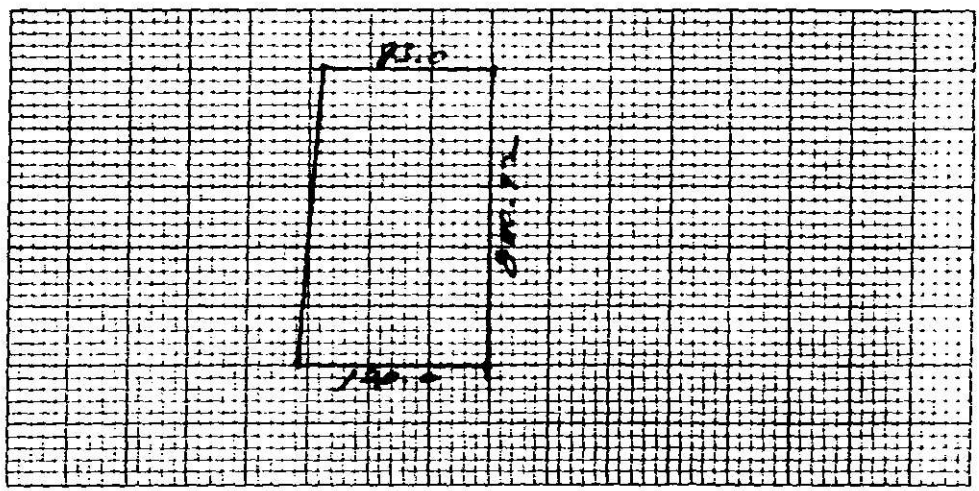
4) LOCATION OF PROPERTY Lot 6 - Block D - Hart Rd. Mck. County. (STREET OR COUNTY ROAD)

5) SUBDIVISION Riverhaven LOT NO. 6 BLOCK NO. D

MAP BOOK NO. 8 PAGE NO. 405

6) DEED REFERENCE. DEED BOOK 3560 PAGE NO. 276

Application is hereby made to the Mecklenburg County Health Department for the conduct of a percolation test and on 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

Robert James Davis
OWNER

FORM NO E-1-8-1-72

HEALTH DEPARTMENT'S COPY

MECKLENBURG COUNTY
Department of Public Health
1200 Blythe Boulevard
Charlotte, North Carolina 28203

Telephone 374-2113

Date Issued
1. May 5, 1973
2. _____
3. _____

SITE DISAPPROVAL REPORT
INDIVIDUAL SEPTIC TANK SYSTEM WITH SUBSURFACE,
SOIL ABSORPTION, EFFLUENT DISCHARGE

SDR No. 6129
T.C. No. P.O. 031-213-06

NAME OF OWNER Davis, Robert James

ADDRESS OF OWNER 401 Huntsmoor Drive, ZIP _____

LOCATION OF LOT Hart Road, Lot 5 of Block D

The lot described above has been disapproved for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge due to the following:

FAILURE TO PASS PERCOLATION TEST (60 minutes per inch or less)

	Test No.	Date of Test	Percolation Rate
____	1.	_____	_____ min/in
____	2.	_____	_____ min/in
____	3.	_____	_____ min/in

__X__ ON SITE INSPECTION REVEALED LOT TO BE UNSUITABLE FOR THE FOLLOWING REASON(S) 5-3-73 - In my opinion test holes were improperly prepared; no water was left on lot to conduct test - please refer to enclosed procedure for obtaining test.

John R. Atkinson
Environmentalist

(Stencil No.)
EHD 398
8/70

FORM NO.
E-19-8-14-70

SEE INSTRUCTIONS ON BACK

Date Received 5-2-73

ICAR(S) Application No 6125

P.C.T.C No 031-213-06

Map Date 4-27-73

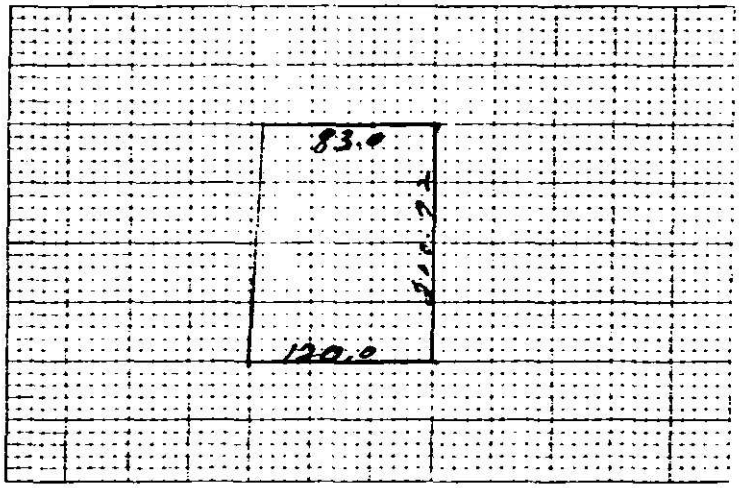
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 Health Department 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) 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) 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 Davis (LAST) Robert (FIRST) James (MIDDLE)

14) ADDRESS OF OWNER 401 Huntsman Dr. / Charlotte, N.C.

15) PHONE NO. Home None Office ___

16) LOCATION OF SYSTEM Lot 6 Block D. Hart Rd. Meck. County (STREET OR COUNTY ROAD)

17) SUBDIVISION Riverhaven Lot No 6 Block No. D

Map Book No. 8 Page No. 405

18) DEED REFERENCE — DEED BOOK 3560 AT PAGE 246

19) HAS A PERCOLATION TEST 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.

4/30/73
DATE OF APPLICATION

Robert James Davis
OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Received 5/5/75

MECK COUNTY HEALTH DEPT. RECEIVED MAY 5 1975 ENVIRONMENTAL HEALTH DIVISION

APT No 6129

T. C. No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Stephens (LAST) Donald (FIRST) Wilson (MIDDLE)

2) ADDRESS OF OWNER 8131 Cheshire Rd. ZIP 28213

3) PHONE NO. Home 596-9371 Office 373-4333 Duke Power

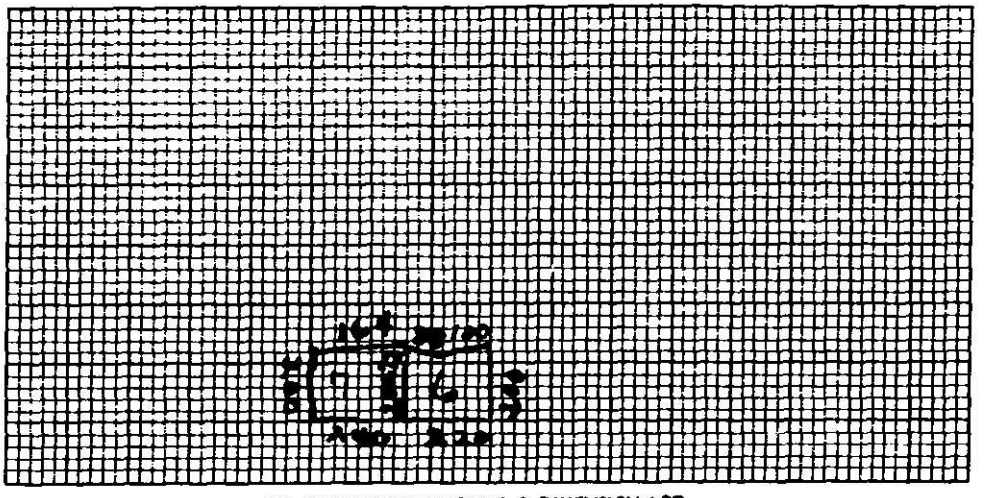
4) LOCATION OF PROPERTY Hart Rd. (STREET OR COUNTY ROAD)

5) SUBDIVISION River Haven LOT NO. 6+7 BLOCK NO. D

MAP BOOK NO 8 PAGE NO. 405

6) DEED REFERENCE: DEED BOOK PAGE NO.

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

Mrs. Donald Stephens
OWNER

FORM NO. E-1-9-1-72

HEALTH DEPARTMENT'S COPY

SOIL INVESTIGATION REPORT

Date of Investigation 5-6-75 Apt. No. 6129

Owner D. W. Stephens

Location of Property Lot Nos 6 and 7 Blk D Hart Rd.
TCN: 031-213-06

Soil Suitability Ratings

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Appling	Helena	Appling-Helena Intergrade	
2. Soil Slope	Suitable 4-6%	Suitable 2-6%	Suitable 2-4%	
3. Soil Depth	Suitable >48"	Suitable >48"	Suitable >48"	
4. Soil Texture	Marginal clay	Unsuitable Sil clay	Marginal clay	
5. Soil Structure	Marginal blocky	Marginal blocky	Marginal blocky	
6. Restrictive Horizons	—	—	—	
7. Soil Drainage	Suitable W.T. 748"	Unsuitable Perched W.T. < 30"	Suitable W.T. 748"	
8. Soil Permeability (Percolation Rate)	Marginal 60 min/in	Unsuitable >200 min/in	Marginal 90 min/in	
9. Other	—	—	—	
10. Overall Rating	Marginal	Unsuitable	Marginal	

Recommendations Conditional Approval - System located in area of Appling soils; system design based on a 60 min/in. perc. rate.

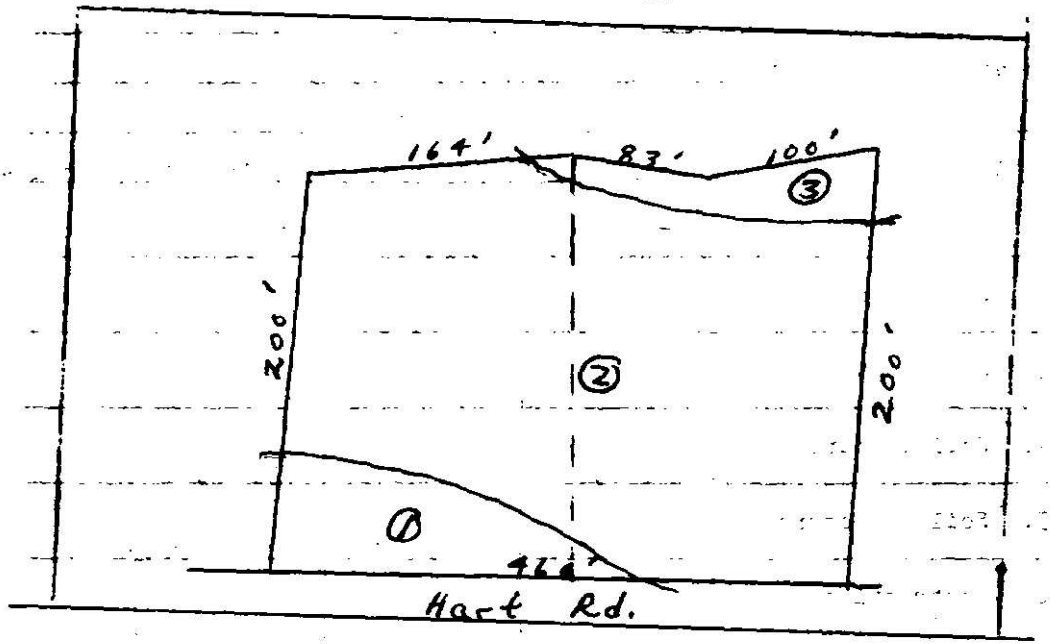
Note: A pump may be required to get septic tank effluent to absorption field.

See Diagram on Back

W. Everette Symmyhe
Soil Scientist

3/18/75
EHD 539

DIAGRAM OF PROPERTY



3/18/75
EHD 539

Serial No. 5191

PTR No. 6129

Date Issued May 7, 1975

T. C No 031-213-06

Map Date 12/14/73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

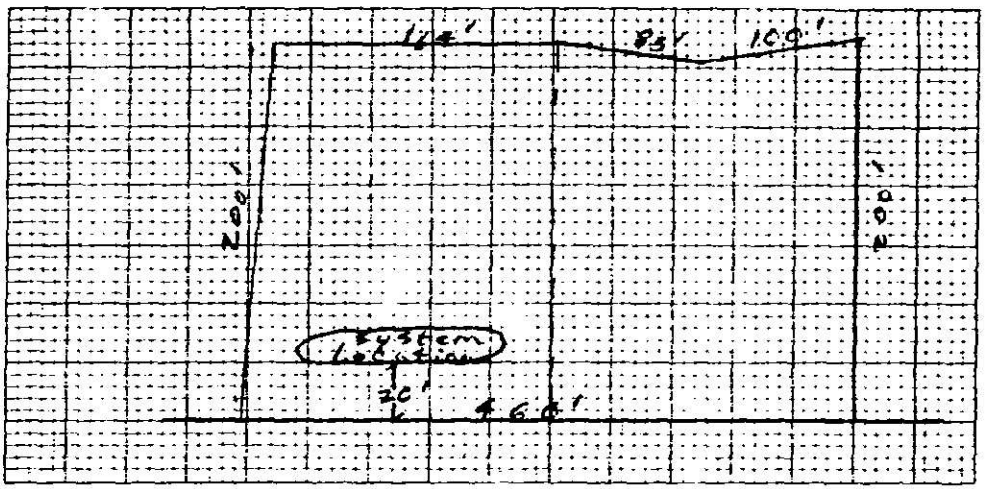
PERCOLATION TEST REPORT

NAME OF OWNER Stephens (LAST) Donald (FIRST) Wilson (MIDDLE)

ADDRESS OF OWNER 8131 Cheshire Road, Charlotte, N. C. ZIP 28213

LOCATION OF PROPERTY Hart Road (STREET OR COUNTY ROAD)

SUBDIVISION River Haven LOT NO 6 & 7 BLOCK NO B



PLOT PLAN

This is to certify that a percolation test has been run and an on-site inspection made by the Mecklenburg County Health Department on the lot described above. The said test was conducted on that portion of the lot as indicated on above plot

The percolation rate determined by the test was *60Min./In. The soil on 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 Health Department 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 Health Department prior to installation based on the percolation 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 where the percolation test was run.
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 Health Department, renders the area where the percolation test was run unsuitable for the 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 State Board of Health and the Mecklenburg County Board of Health which were in effect on the date of issuance and is void if at any time in the future, prior to the 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.

*Results determined by soil analysis

W. Scott, Engr. Soil Scientist

John R. Atkinson Director, Environmental Health Division or Authorized Section Head

FORM NO. E-2-9-1-72

HEALTH DEPARTMENT'S COPY