Date Received 11-5-71

APT No. 2682

T. C. No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER McCoy (LAST) Samuel (FIRST) Conder (MIDDLE)

2) ADDRESS OF OWNER 5133 Princess St Char. ZIP 28213

3) PHONE NO Home 5965763 Office 3742205

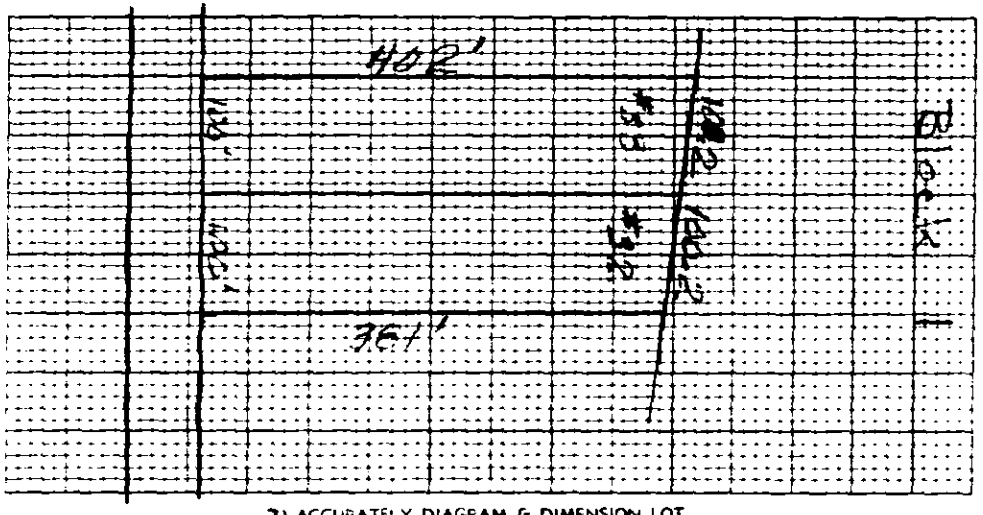
4) LOCATION OF PROPERTY 9400 [redacted] Wedgewood Dr. (STREET OR COUNTY ROAD)

5) SUBDIVISION Westminster Park LOT NO 32 & 33 BLOCK NO. 1

MAP BOOK NO 6 PAGE NO 313

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

Samuel C McCoy
OWNER

FORM NO. E-1-11-1-70

HEALTH DEPARTMENT'S COPY

Serial No. 1138

PTR No. _____

Date Issued November 10, 1971

T C. No. 015-252-21, 22 as one

Map Date 10/20/71

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

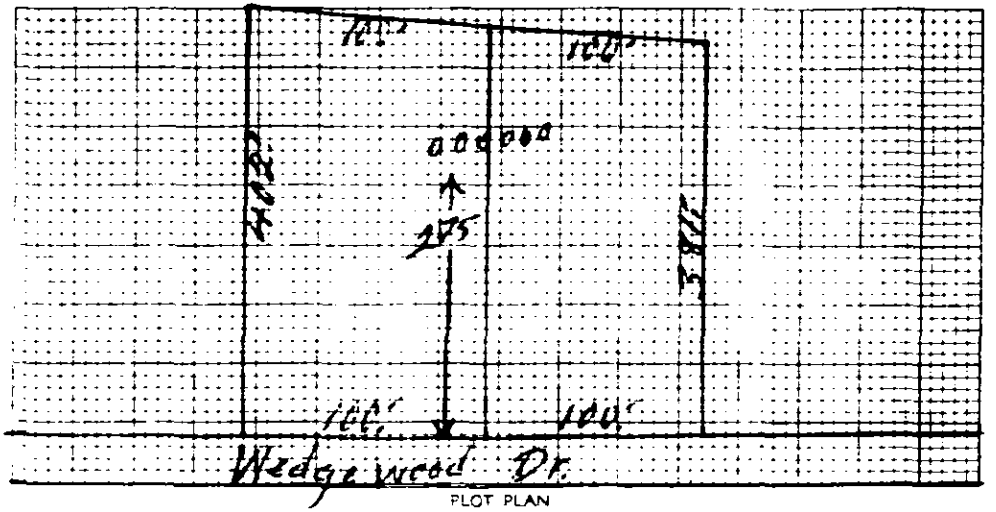
PERCOLATION TEST REPORT

NAME OF OWNER McCoy (LAST) Samuel (FIRST) Conder (MIDDLE)

ADDRESS OF OWNER 5133 Princess Street **ZIP** 28213

LOCATION OF PROPERTY 9400 Wedgewood Drive (STREET OR COUNTY ROAD)

SUBDIVISION Westminster Park **LOT NO** 32 & 33 **BLOCK NO** 1



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 43 min/in. 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 septic system shall be obtained from the Mecklenburg County Health Department prior to the beginning of the construction of building and of the wastewater treatment system on the said lot.
2. The size of the septic tank and 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 only for the system installed in the immediate area where the percolation test was run.
4. This approval shall void any grading, filling or construction including the drilling of wells 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.

W. D. Johnson

Director, Environmental Health Division or Authorized Section Head

FORM NO. E-2-4-1-71

APPLICANT'S COPY

Date Received 12 22 71

ICAR(S) Application No. 2682

T. C. No.

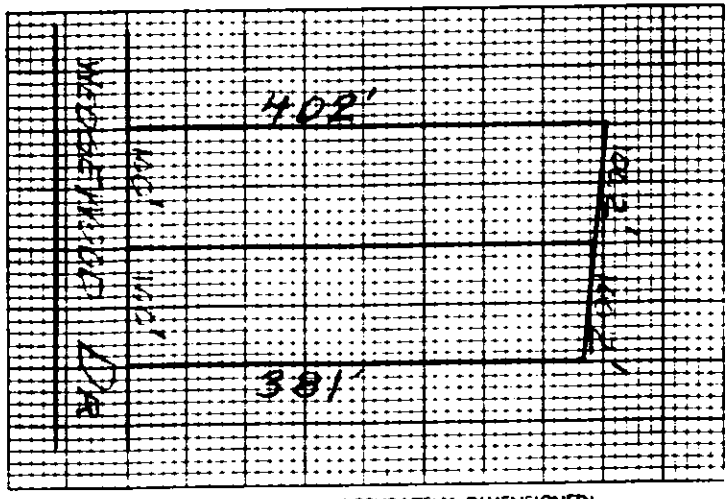
Map Date

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 0

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 [illegible] Samuel [illegible]
LAST FIRST MIDDLE

14) ADDRESS OF OWNER [illegible] St Charlotte [illegible]

15) PHONE NO Home [illegible] Office [illegible]

16) LOCATION OF SYSTEM [illegible]
STREET OR COUNTY ROAD

17) SUBDIVISION [illegible] Lot No. [illegible] Block No 1

Map Book No [illegible] Page No. 13

18) DEED REFERENCE — DEED BOOK [illegible] AT PAGE 35

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.

Samuel C. McCoy
OWNER

DATE OF APPLICATION

FORM NO. E-4-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued December 22, 1971 Serial No. 1236

LA No. 2

T. C. No. 015-252-21 22

Map Date 10/20/71

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER McCoy (LAST) Samuel (FIRST) Conder (MIDDLE)

ADDRESS OF OWNER 5133 Princess Street ZIP

LOCATION OF LOT 9400 Wedgewood Drive (STREET OR COUNTY ROAD)

SUBDIVISION Westminster Park LOT NO 32 & 33 BLOCK NO 1

MAP BOOK NO. 8 PAGE NO 313

The above specified lot is approved by the Mecklenburg County Health Department for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the percolation test results which yielded a percolation rate of 43 min/in 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 2682. 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 percolation test 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 permits which have been issued to authorize construction on the subject lot at any time it is determined that any statement contained in the Application for an Installation, Construction, Alteration, and/or Repair Permit is not complied with or that the septic tank system as being installed, constructed, altered and operated is not in accordance with the valid Installation, Construction, Alteration, and/or Repair Permit.

Environmentalist

John R. Hickson
Director Environmental Health Division or Authorized Section Head

FORM NO. E 3-4-1-71

HEALTH DEPARTMENT'S COPY

set

Date Issued 22 Dec 71

Serial No. 1971

ICAR(S) Permit No. 2682

T C No 015-252-1/32

Map Date 20 Oct 71.

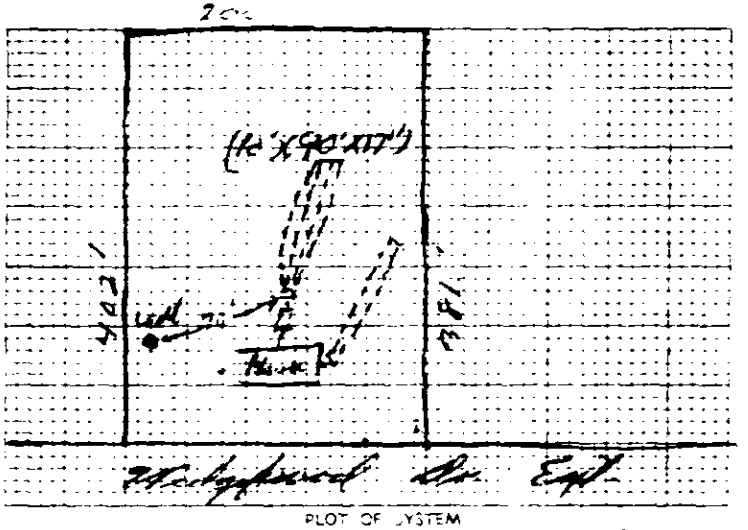
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 # 2682 dated 12-22-71 and this permit shall be void and of no effect if the information provided in the application is not true and correct as set forth. All work shall be completed on or before 1 Apr 72, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 43

Liquid Capacity of Tank 1000

Tank Construction PC

Absorption and/or Notification Lines

Total Line Length 360' ± 100' W/M

Number of Lines 4 ± 2 (10'X90'X17")

Distance from House 20'

Distance from Property Line 25'

Distance from Well 70'

NAME OF OWNER Mr. Guy Samuel Contractor

LOCATION OF PROPERTY Wedgewood Dr. (Westmonte)

This system must meet the requirements as set forth in the Regulations of the Mecklenburg [illegible] and is subject to the date of the granting of this permit. A certificate of approval for the sanitary sewage system can be issued upon final inspection and approval rendered in writing by the Environmentalist.

Contractor Eagle Contracting Co. Mooresville (Conty)

Division of Environmental Health

W. A. Berry
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 Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

FORM NO. E-[illegible]

HEALTH DEPARTMENT'S COPY

Date Issued 18 Apr 72 **Serial No.** 1782 C of A (s) No. 2682

T C. No. 015-252 2/32

Map Date 20 Oct 72

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner M Coy (LAST) Samuel (FIRST) L (MIDDLE)

Location of Property Wedgewood Dr.

Application Number 2682 Permit Number 2682

Inspection Date:

Liquid Capacity of Tank 1000 Tank Material PC

Total Length of Drain Tile 360' + 100' WM Number of Lines 3 + 2

Depth of Filter Material 12" Cover Depth 18"

Water Supply Source And' Well Distance from Water Source 70'

Excavation Inspected 18 Apr 72 (DATE) Tank Inspected 18 Apr 72 (DATE)

Nitrification Field Inspected 18 Apr 72 (DATE)

Washing Machine Line Inspected, If Applicable 18 Apr 72 (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 Board of Health 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 as well as 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 Sigma Contracting Co. (Cont.)

M. L. Ivey
Environmentalist

FORM NO. E-6-4-1-71

HEALTH DEPARTMENT'S COPY