MECK COUNTY DEPARTMENT OF
RECEIVED
APR 21 1983
ENVIRONMENTAL HEALTH

Date Received 4-21-83

SIR No. 19591

T. C. 227-121-05

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER *Yount* (LAST) *Alan* (FIRST) *Thompson* (MIDDLE)

2) ADDRESS OF OWNER *4445 McKee Road, Matthews, N.C.* ZIP *28105*

3) PHONE NO. Home *(704) 847-3376* Office *(704) 821-9229*

4) LOCATION OF PROPERTY *McKee Road* (STREET OR COUNTY ROAD)

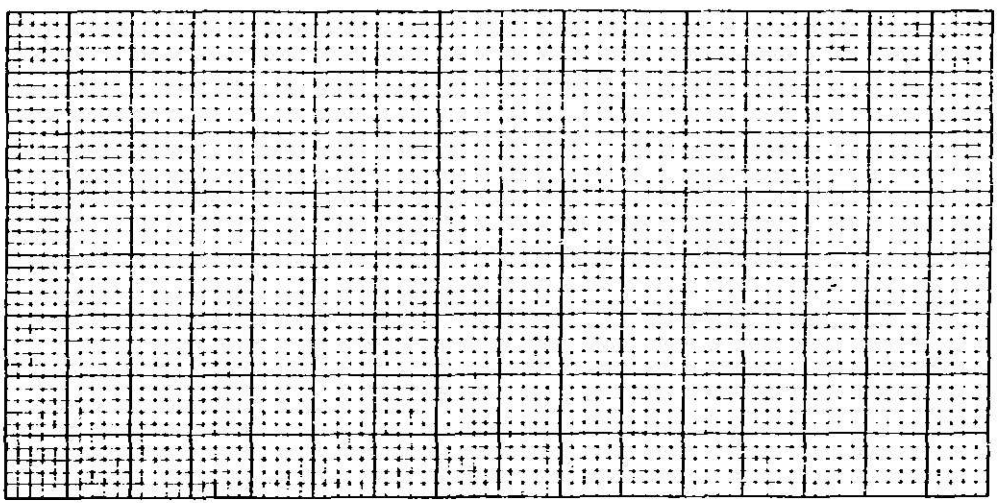
5) SUBDIVISION *Providence Plantation* LOT NO. *#7* BLOCK NO.

MAP BOOK NO *227* PAGE NO. *121*

6) DEED REFERENCE DEED BOOK PAGE NO.

PLEASE SEE ATTACHED DRAWING

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

Alan T Yount

OWNER

EHD-5-76

Environmental Health Department's Copy

Serial No. 5011

SIR No. 19591

T. C. No. PO 227-121-05

Date Issued 5-17-83

Map Date

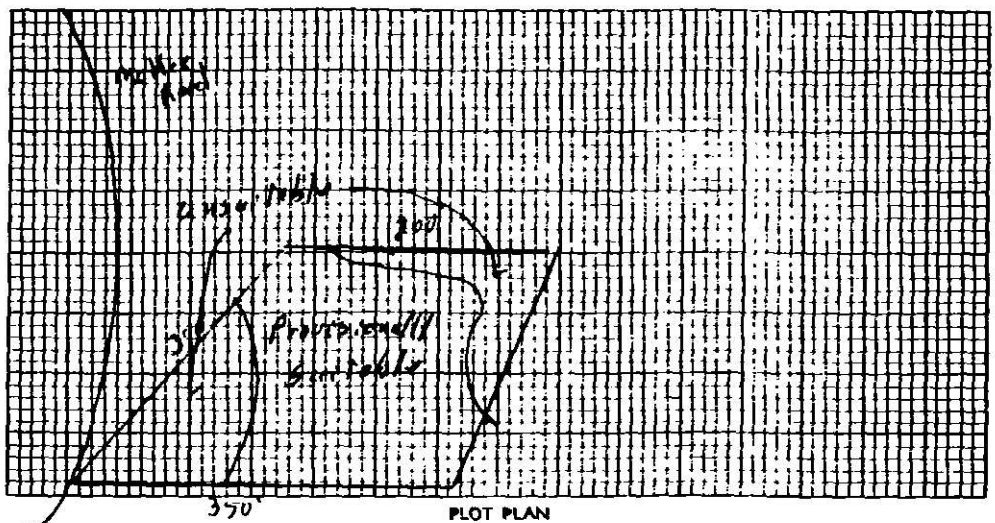
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Grier (Estate) N. C.
LAST FIRST MIDDLE

ADDRESS OF OWNER 3316 McKee Road, Matthews, NC ZIP 28105

LOCATION OF PROPERTY Off McKee Road
STREET OR COUNTY ROAD

SUBDIVISION LOT NO. 7 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, 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 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.

William A. Martin
EHD-5-76 Soil Scientist

John P. Atkinson
Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 19591

T.C. NO. 80227-12/85

(Ground Absorption Sewage Disposal)

OWNER: W.C. Grier Estate
ADDRESS: 3316 McKee Road, Matthews, N.C. 28105

PLAT NO: Lot #1
LOT SIZE: 83,000 Acres

LOCATION OF SITE: off McKee Road

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS U 2-8%	(S) PS U 2-8%	S PS (U) Complex Slopes	(S) PS U 2-8%
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) U Clay	S PS (U) 2-1 Clay	S PS — U	S PS (U) 2-1 Clay
3. SOIL STRUCTURE (12-36 inches)	S (PS) U Blocky	S (PS) U Blocky	S PS — U	S (PS) U Blocky
4. SOIL DEPTH (inches)	S (PS) U 36-40"	S PS (U) 30-36"	S PS (U) Depth Variable	S PS (U) 30-36"
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U Saprolite 36"+	S PS (U) Saprolite ∠36"	S PS — U	S PS (U) Saprolite ∠36"
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) U 36"+ to groundwater	S PS (U) Some indication of Perched water table	S Eroded PS Areas Channel U Walls	S PS (U) Depression
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IUA	IUB	—	IUB
9. SITE CLASSIFICATION	Provisionally Suitable	unsuitable	Unsuitable	unsuitable
10. SOIL SERIES	Cecil-Like	Vance-Like	Complex Slopes	Nahunta-Like

S - Suitable PS - Provisionally Suitable U - Unsuitable

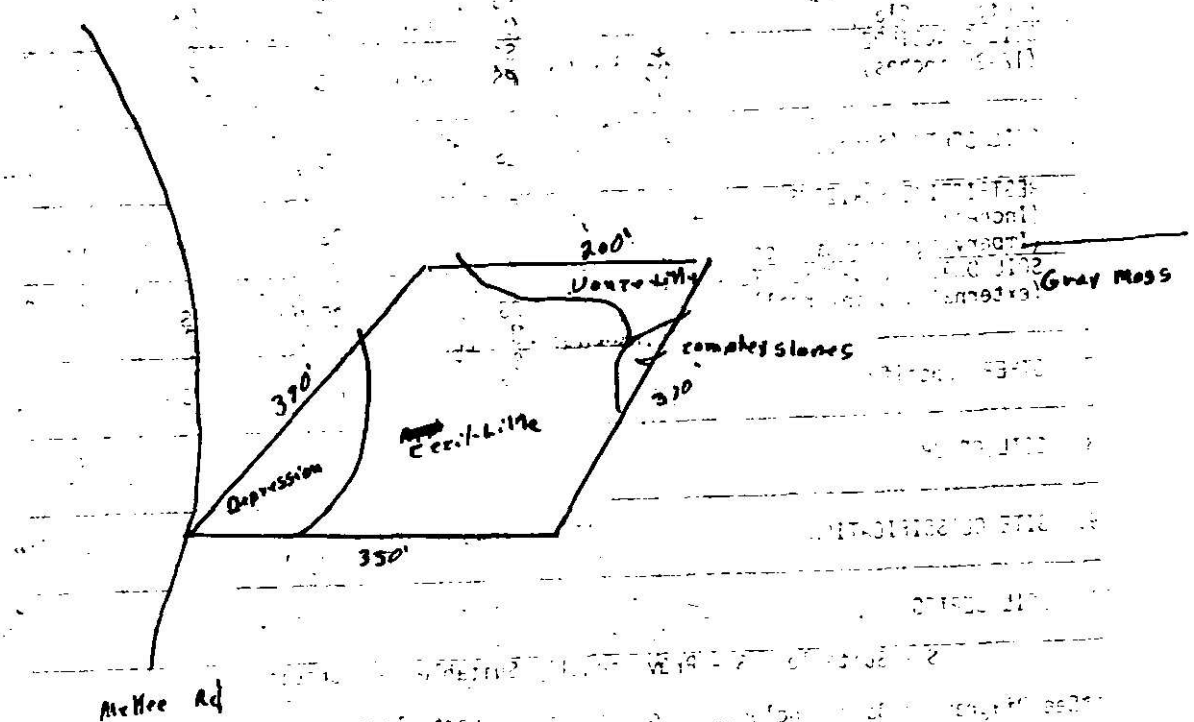
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: _____

Described by: William R. Maples
Title: Soil Scientist

Date: 5-11-83

EHD 539 (Revised: 6/82)


200'
Gray Moss
concrete slopes
370'
370'
Depression
Creek-Line
350'
McHee Rd

Date Received 11-29-84

RECEIVED
NOV 29 1984
ENVIRONMENTAL HEALTH

LOCAL(S) Application No. 19591

T. C. No. PO 227-121-05

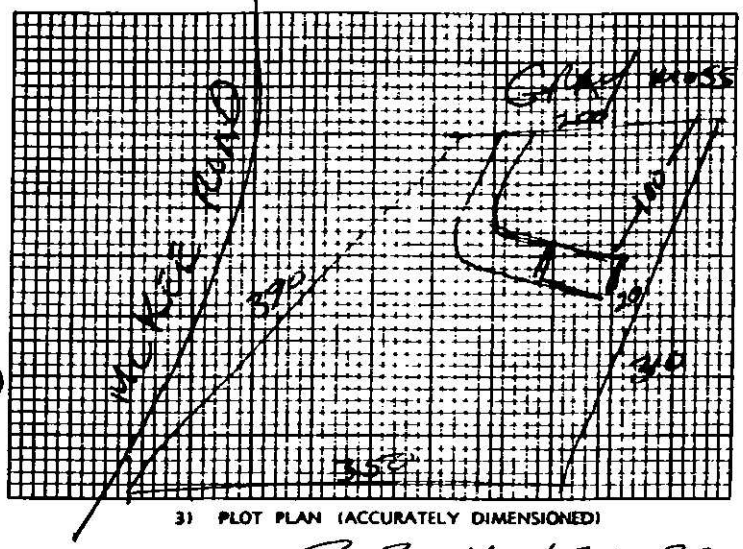
Map Date L

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 4
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 BOB MCLEMORE C. INC.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER PO BOX 25746

15) PHONE NO. Home — Office 545-6111

16) LOCATION OF SYSTEM 34-39 GRAY MOSS ROAD
STREET OR COUNTY ROAD

17) SUBDIVISION ___ Lot No. 7 Block No. ___

Map Book No. ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ___ NO DATE RUN 5-17-84

20) PTR NUMBER (See Instructions) 19591

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.

11-28-84
DATE OF APPLICATION

BOB MCLEMORE C. INC.
OWNER

BY [signature]

END-S-76

Environmental Health Department Copy

Date Issued 11-29-84

Serial No. 8030

SIR No. 19591

T. C. No. PO 227-121-05

Map Date L, SBT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

Building Permit

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

NAME OF OWNER Bob McLemore Co., Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P. O. Box 25746, Charlotte, NC ZIP 28212

LOCATION OF LOT 3439 Gray Moss 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 19591. 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.

Cynthia G. Bass
Environmentalist

Eric P. Hendricks
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Serial No. 07942

ICAR(S) Permit No. 19591

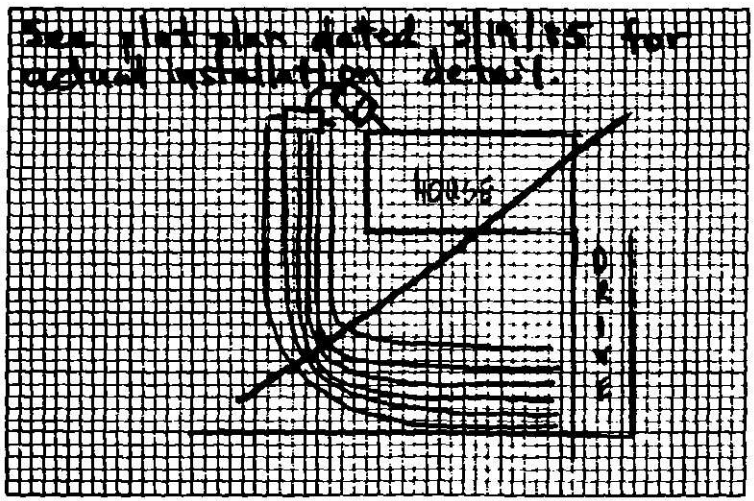
Date Issued 2/28/85

T. C. No. 27-121-05

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 19591, dated 11/29/84 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 3/28/85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500gal

Tank Construction PCC

Absorption and/or Nitrification Lines:

Total Line Length 533

Number of Lines 6 X 89'

Distance from House 5'

Distance from Property Line 10' stay 100'

Distance from Well away

NAME OF OWNER Bob McLemore

LOCATION OF PROPERTY 3439 Gay Moss Road

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.

6 Trenches x 3'x 89'x 12" stone with gradeboards and straw as cover

Comments:

B. Hankins
Division or Section Head

Cynthia G. Bass
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-S-76

Environmental Health Department's Copy

C of A (s) No. 19591

Date Issued 3/18/85 Serial 7369 PO T. C. No. 227-121-05

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

OPERATION PERMIT

CERTIFICATE OF APPROVAL

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

Name of Owner Bob McLemore
LAST FIRST MIDDLE

Location of Property 3439 Gray Moss Road

Application Number 19591 Permit Number 19591

Inspection Data:

Liquid Capacity of Tank 1500+1000 Tank Material Pcc

Total Length of Drain Tile 550 Number of Lines 5

Depth of Filter Material 12" Cover Depth 12"-24"

Water Supply Source well Distance from Water Source >100'

Excavation Inspected 3/18/85 DATE Tank Inspected 3/18/85 DATE

Nitrification Field Inspected 3/18/85 DATE

Washing Machine Line Inspected, If Applicable _____ 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 Pump was installed due to placement of drainfield in backyard - this was done because well was drilled in front yard

Williams ST

Cynthia G. Boss
Environmentalist

EHD-S-76

Environmental Health Department's Copy

Date Issued 3-19-85

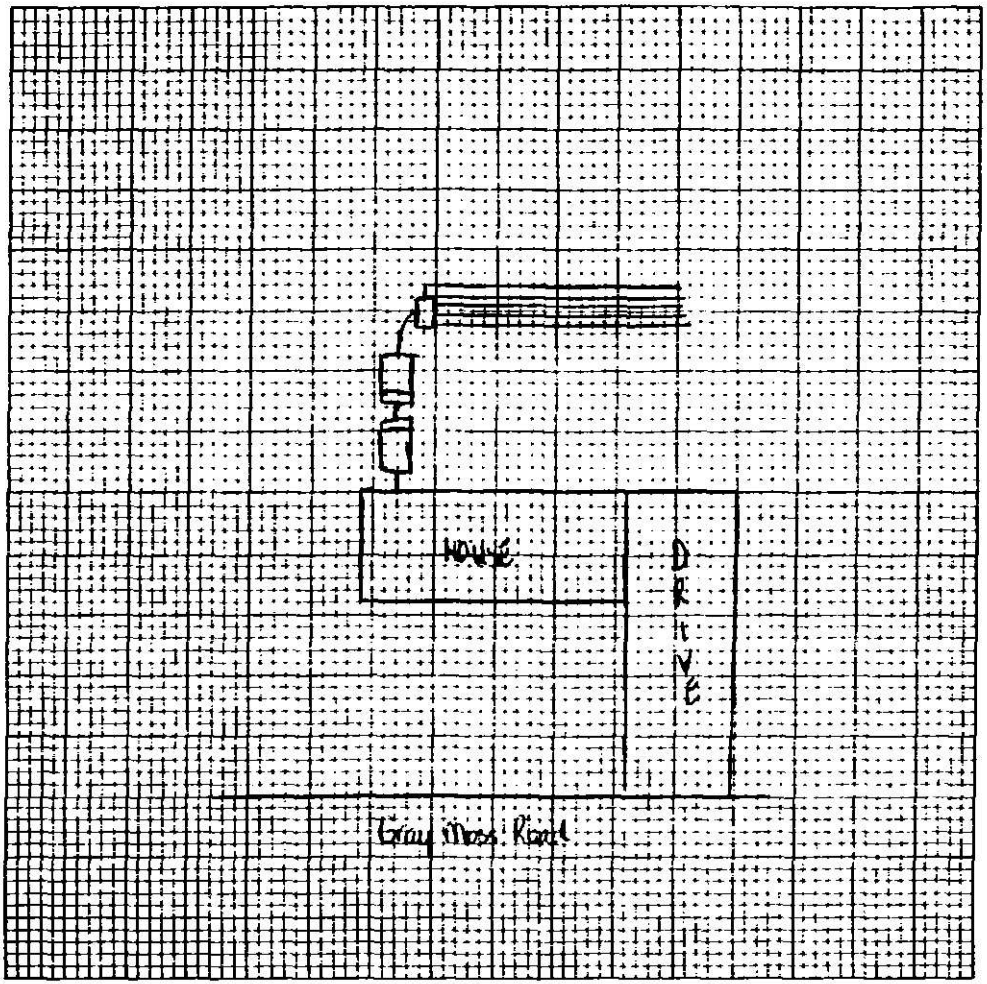
C of A (s) No. 1959

T. C. No. 10227-121-06

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

3439 Gray Moss Road
System installed in back yard

PLOT PLAN SHEET



PLOT PLAN

ACCURATE DIAGRAM OF SYSTEM AS INSTALLED

Cynthia C. Bass
Environmentalist

EHD-S-76

Environmental Health Department's Copy

APPLICATION FOR AN IMPROVEMENT PERMIT

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

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

(OFFICE USE ONLY)
FILE: 19591
TC: _____
SERIAL: № 16940
☒ CRT

JOB LOCATION

① ADDRESS: 3439 (STREET NO.) Grey Moss Rd (STREET) ② FILE: _____
③ JURISDICTION: _____ ④ TAX PARCEL NO.: 227-242-38
⑤ SUBDIVISION: _____ ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: Tom (FIRST) H (MIDDLE) Ertel (LAST)
⑨ MAILING ADDRESS: 3439 Grey Moss Rd
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: _____
⑬ PHONE: (WORK) 394 3121 ⑭ (HOME) 846 842 1

REQUEST

This request is for a(n):

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

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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: _____
Date: 8-20-88

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

... No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by this Department.

... This permit is not transferable, and shall become null and void ~~36~~ months from the date of issuance. See existing system

B. R. Ferguson (Environmentalist) 9-21-88 (Date)
D. D. David RS (Director or Authorized Section Head) 9-22-88 (Date)

*This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 1/20/88

Name/Company [illegible]

Sanitation _____
Vector Control _____
O.P.W.D. ✓

Service: [illegible]
#14541

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

SEP 20 1988

Check #130

Fee: $ 0

Completed by [signature]

Collected by [signature]

PROPOSED PLOT PLAN

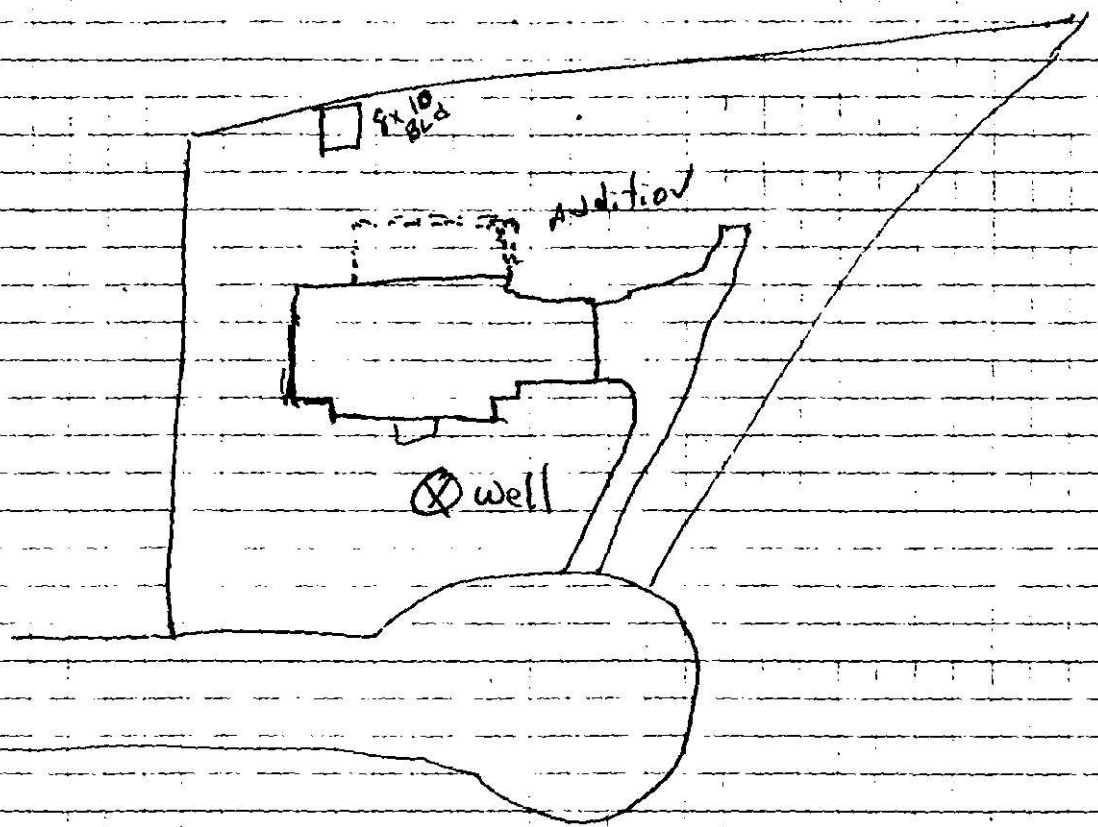
MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

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

FILE: 19591

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: Ben H. Ervin

Date: 9-20-86