Date Received Feb 20, 1973

APT No 5609

T C No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Ascanio Construction Co. Inc
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER 735 Hawthorne Ave Charlotte ZIP 28203

3) PHONE NO. Home Office 333-7931

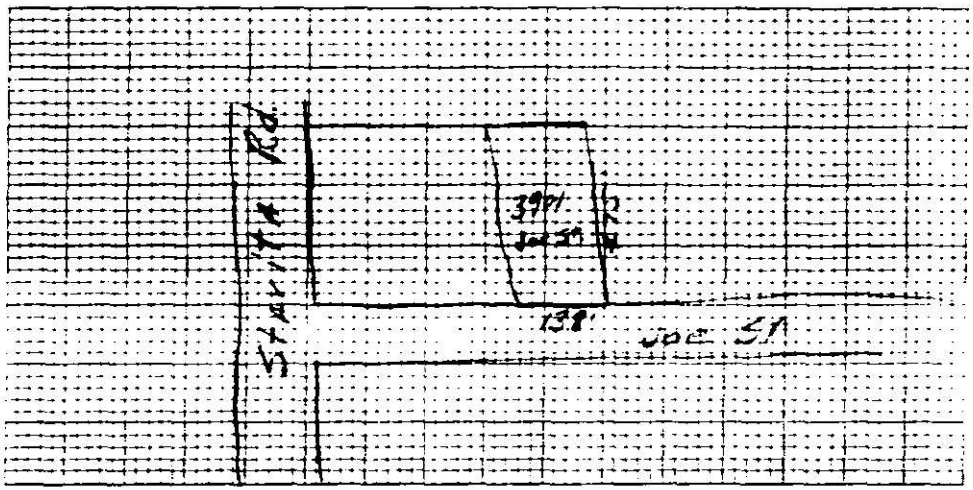
4) LOCATION OF PROPERTY 3901 Joe St Charlotte
(STREET OR COUNTY ROAD)

5) SUBDIVISION LOT NO BLOCK NO

MAP BOOK NO PAGE NO

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

OWNER John L Black

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

HEALTH DEPARTMENT'S COPY

MECKLENBURG COUNTY
Department of Public Health
1200 Blythe Boulevard
Charlotte, North Carolina 28203 Telephone 374-2113

Date Issued
1. February 26, 1973 SITE DISAPPROVAL REPORT SDR No. 5000
2. _____ INDIVIDUAL SEPTIC TANK SYSTEM WITH SUBSURFACE, T.C. No. 077-131-10
3. _____ SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Asphalt Construction Company, Inc.

ADDRESS OF OWNER 735 Herrin Avenue ZIP 28205

LOCATION OF LOT 3901 Joe Street

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
X	1.	2-23-73	Infinity min/in
____	2.	_____	_____ min/in
____	3.	_____	_____ min/in

____ ON SITE INSPECTION REVEALED LOT TO BE UNSUITABLE FOR THE FOLLOWING REASON(S) _____

_____

_____

_____

M. D. Kirby
Environmentalist

(Stencil No.)
EHD 398
8/70

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

Serial No. [illegible]

PTR No. 5609

Date Issued March 1, 1973

T C No 077-131-10

Map Date

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

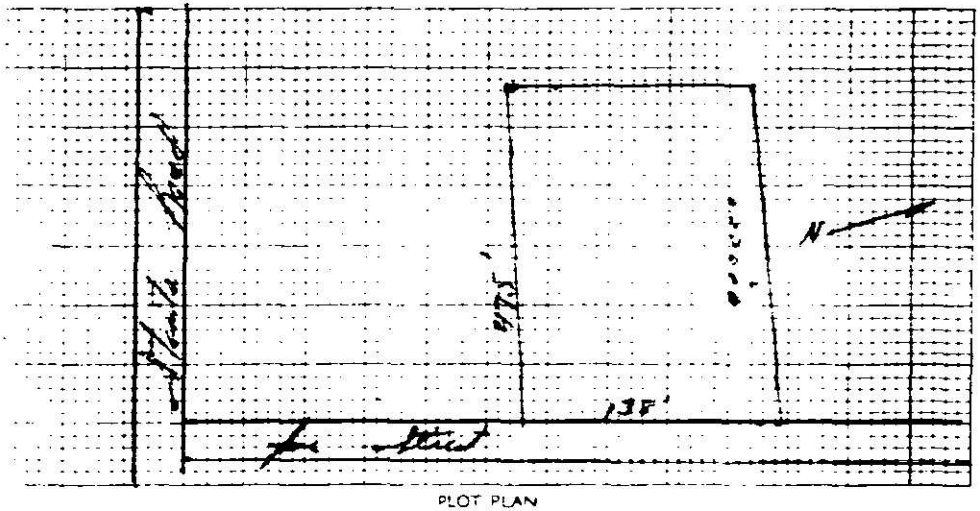
PERCOLATION TEST REPORT

NAME OF OWNER Asphalt Construction Company, Inc.
(LAST FIRST MIDDLE)

ADDRESS OF OWNER 735 Herrin Avenue ZIP 28205

LOCATION OF PROPERTY 3911 Doe Street
(STREET OR OTHER ROAD)

SUBDIVISION LOT NO BLOCK NO



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 60 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 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 wells 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.

John M. Robinson

Director, Environmental Health Division or
Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

Date Received Feb 20 1973

ICAR (S) Application No. 5609

T. C. No. _____

Map Date _____

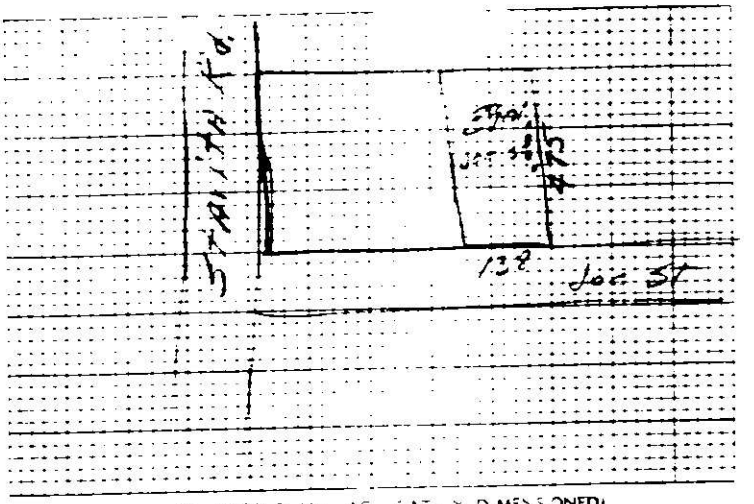
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 the property described in this matter hereby applies to the Mecklenburg County Health Department for a permit to:

Install or Construct ☐ Alter or Repair an individual septic tank wastewater treatment system with subsurface soil absorption effluent discharge



4. No. of Bedrooms _____
5. Business Use ☐ Max. No. Employees 2
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. PLOT PLAN ACCURATELY DIMENSIONED

13. NAME OF OWNER Hunnicutt Construction Co Inc (LAST / FIRST / MIDDLE)

14. ADDRESS OF OWNER 732 [illegible] Huntersville

15. PHONE NO. Home _____ Office 333-7931

16. LOCATION OF SYSTEM 2121 Joe St (STREET OR COUNTY ROAD)

17. SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No. _____ Page No. _____

18. DEED REFERENCE — DEED BOOK _____ AT PAGE _____

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.

Feb 20 1973
DATE OF APPLICATION

Jake L Black
OWNER

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

HEALTH DEPARTMENT'S COPY

Date Issued March 1, 1973

Serial No. 2583

LA No. 5609

T C No 077-131-10

Map Date

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 Asphalt Construction Company, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 735 Herrin Avenue ZIP 28205

LOCATION OF LOT 3901 Joe Street
(STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO

MAP BOOK NO PAGE NO

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 60 min/inch and 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 5609 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, 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

M. L. Kirby
Environmentalist

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

FORM NO E-3-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 23 May 73 Serial No [illegible] ICAR(S) Permit No 5609

T C No

Map Date

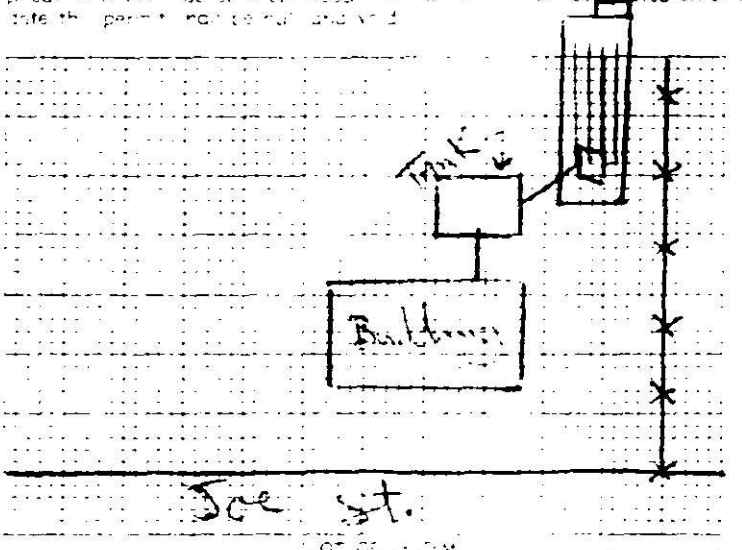
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 granted based upon the information supplied in application 5609 dated 20 Feb 73 and the plans submitted and is void and of no effect if the information provided in the application is not true and correct. All work to be completed on or before 23 June 73 after which date the permit may be null and void.



Percolation Rate 6C

Liquid Capacity of Tank 1000 gal

Type of Tank Precast Concrete

Absorption Lines

Length of Lines 3 @ 75'

No. of Lines 4 (16'x75')

Distance from Tank 16'

Distance between Lines 10'

Distance from Well 50'+

LOT OF [illegible]

NAME OF OWNER Cleo's Construction Co. Inc.

LOCATION OF PROPERTY 2111 Joe St.

This system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg [illegible] Health which are in effect at the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used.

Comments: Collection unit 2½ x 7 x 4' steel

R. M. Reynolds
Environmentalist

Division of Sanitation Head

If this permit is for the installation of a septic tank for 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. EH-4

[illegible] COPY

Date Issued 28 May 73 **Serial No.** 3443 C of A (s) No. 5609

T C No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Asphalt Construction Co. Inc.
(LAST, FIRST, MIDDLE)

Location of Property 3901 Jacs St.

Application Number 5609 Permit Number 5609

Inspection Data:

Liquid Capacity of Tank 1000 gal Tank Material Precast Concrete

Total Length of Drain Tile 300 +/- ft Number of Lines 4 (10'x75')

Depth of Filter Material 17" Cover Depth 24"

Water Supply Source well Distance from Water Source 100'+

Excavation Inspected 28 May 73 (DATE) Tank Inspected 28 May 73 (DATE)

Nitrification Field Inspected 28 May 73 (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 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 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: Aeration pit 2½'x7'x4' stone

A. M. Reynolds
Environmentalist

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

HEALTH DEPARTMENT'S COPY