K Date Received 10873

APT No 7307

T. C No

Map Date

MECK COUNTY HEALTH DEPT.
RECEIVED
OCT 15 1973
ENVIRONMENTAL HEALTH DIVISION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER [illegible] (LAST) [illegible] (FIRST) [illegible] (MIDDLE)

2) ADDRESS OF OWNER [illegible] NC ZIP [illegible]

3) PHONE NO. Home [illegible] Office [illegible]

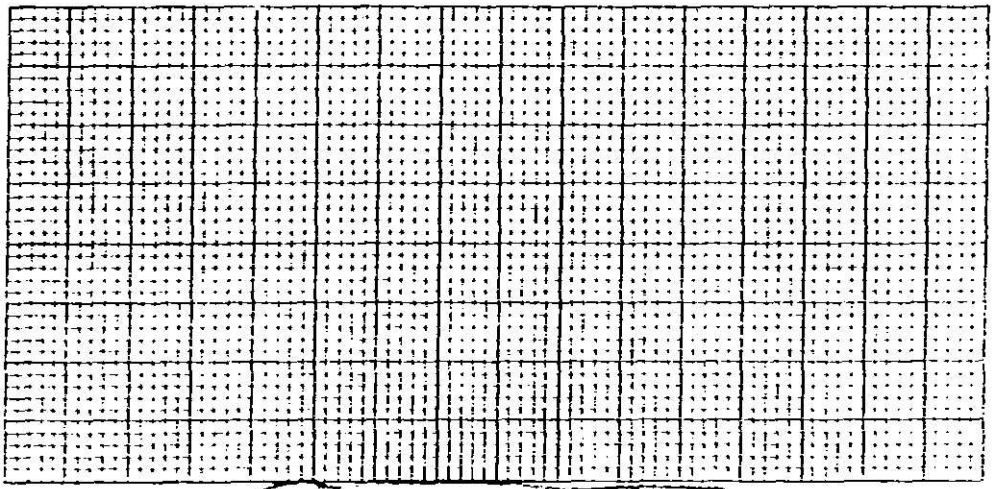
4) LOCATION OF PROPERTY [illegible] (STREET OR COUNTY ROAD) [illegible]

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

[illegible]
OWNER

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

HEALTH DEPARTMENT'S COPY

Serial No. 3870

PTR No. 7307
P.O.
T C No 001-281-01
Map Date 1-26-71

Date Issued December 11, 1973

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

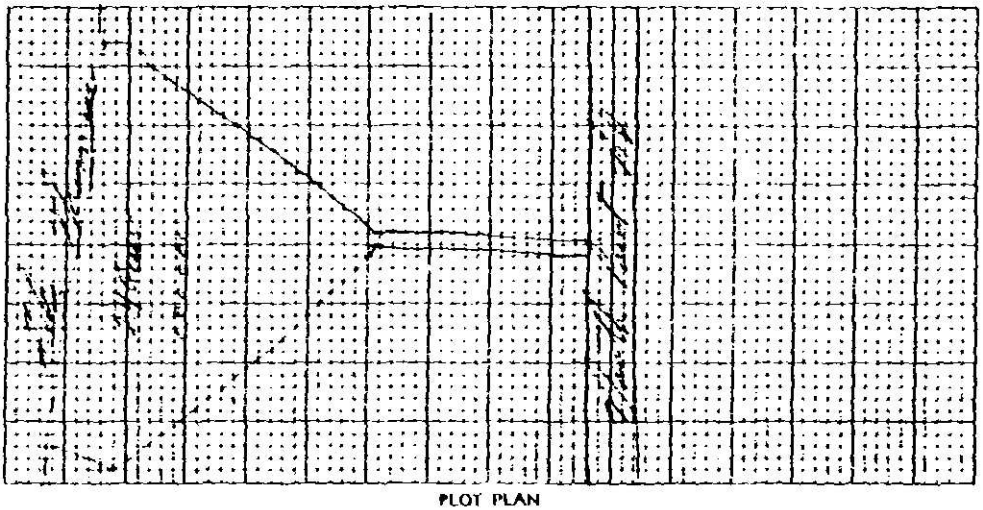
PERCOLATION TEST REPORT

NAME OF OWNER Groves (LAST) Monroe (FIRST) J. (MIDDLE)

ADDRESS OF OWNER Route 3, Box 87, Huntersville, N.C. ZIP 28078

LOCATION OF PROPERTY off North Point Road (STREET OR COUNTY 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 45 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 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.

~~Director, Environmental Health Division or Authorized Section Head~~

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

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 12-10-23

ICAR(S) Application No 7307

T C No

Map Date

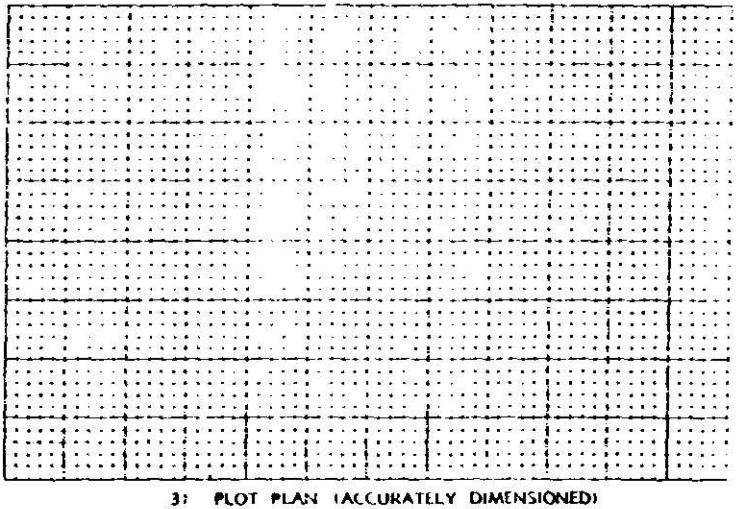
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 hereinafter hereby applies to the Mecklenburg County Health Department for a permit to

1) b 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 Disposer Yes No

8) Dishwasher Yes No

9) Water Supply
A) Individual Supply b
B) Governmental System
C) Community System
1 Well
2 Governmental

10) Sewage System
House connected to a public sewer Yes No
House connected to a community sewer Yes No

11) FHA Case No

12) VA Case No

13) NAME OF OWNER Moore (LAST) Monroe (FIRST) C (MIDDLE)

14) ADDRESS OF OWNER [illegible] Huntersville, NC

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

16) LOCATION OF SYSTEM 3[illegible] North Point Ln
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.

DATE OF APPLICATION

Monroe C Moore
OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3696

LA No. 7307
P.O.

Date Issued December 11, 1973

T. C. No. 001-281-01

IMPROVEMENTS PERMIT

Map Date 1-26-71

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 Groves (LAST) Monroe (FIRST) J. (MIDDLE)

ADDRESS OF OWNER Route 3, Box 87, Huntersville, N.C. ZIP 28078

LOCATION OF LOT off North Point 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 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 45 min/inon 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 7307. 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

Environmentalist

Director, Environmental Health Division or Authorized Section Head

FORM NO F-3-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 29 Aug 74

Serial No. 5678

ICAR(S) Permit No. 7307

Pot C No 001-281-01

Map Date 26 Jan 71

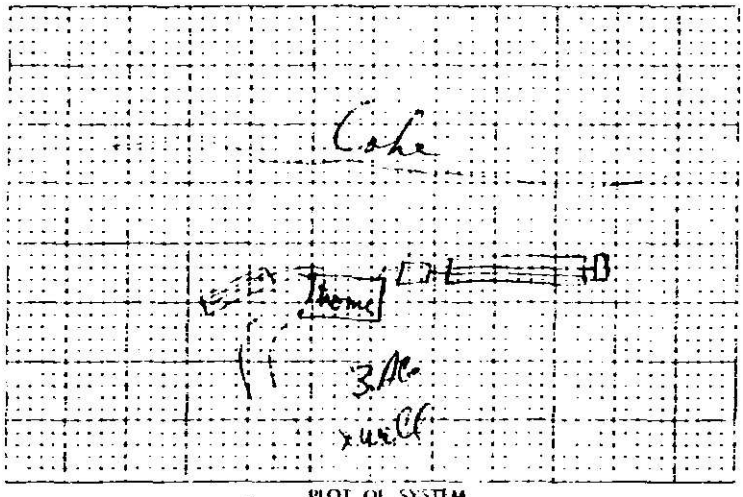
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 waste water 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 7307 dated 17-10-73 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 29 Sept 74, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 45

Liquid Capacity of Tank 1500

Tank Construction PC

Absorption and/or Nutrification Lines 500 gal 150' (x 17") ~~(x 17")~~

Total Line Lenght ~~3[illegible]~~ 6(15' x 50' (x 17"))

Number of Lines ~~3(7½' x 50' x 1')~~

Distance from House 10'

Distance from Property Line 12'

Distance from Well 100'

NAME OF OWNER Grover Monroe

LOCATION OF PROPERTY Northpoint Rd (off of)

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on 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 Aeration grid 2½ x 7' x 4' of Stone

Division or Section Head

Environmentalist Richard Gonsalves

In this permit for the installation or construction of a new system it must be signed by the division or a [illegible] 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 E-5-9-1-72

Serial No. 5249

C of A (s) No 7307

Date Issued 3 Aug 1977

P.O.T.C No 001-281-01

Map Date 1-26-72

CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Groves, Monroe (LAST, FIRST) (MIDDLE)

Location of Property Northpoint Road

Application Number 7307 Permit Number 7307

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material concrete

Total Length of Drain Tile 540' Number of Lines 6 (15 x 90

Depth of Filter Material 12" Cover Depth 24"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 8-30-77 (DATE) Tank Inspected 8-30-77 (DATE)

Nitrification Field Inspected 8-30-77 (DATE)

Washing Machine Line Inspected, If Applicable 9-3-77 (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 or using the property 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 wash line in bed 7½ x 50 x 12"

John R. Atkinson

Environmentalist

FORM NO E-6-9-1-72

MECKLENBURG COUNTY HEALTH DEPARTMENT