Date Received 7/19/78
Meck County Health Dept.
RECEIVED
JUL 19 1978
ENVIRONMENTAL HEALTH

APT No. 14345
T. C. No. 005-171-07
Map Date 3-22-78

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER SMITH (LAST) HUGH (FIRST) ROY (MIDDLE)

2) ADDRESS OF OWNER Box 96 CORNELIUS, N.C. ZIP 28031

3) PHONE NO. Home 892-7731 Office CHERK REALTY 892-7056

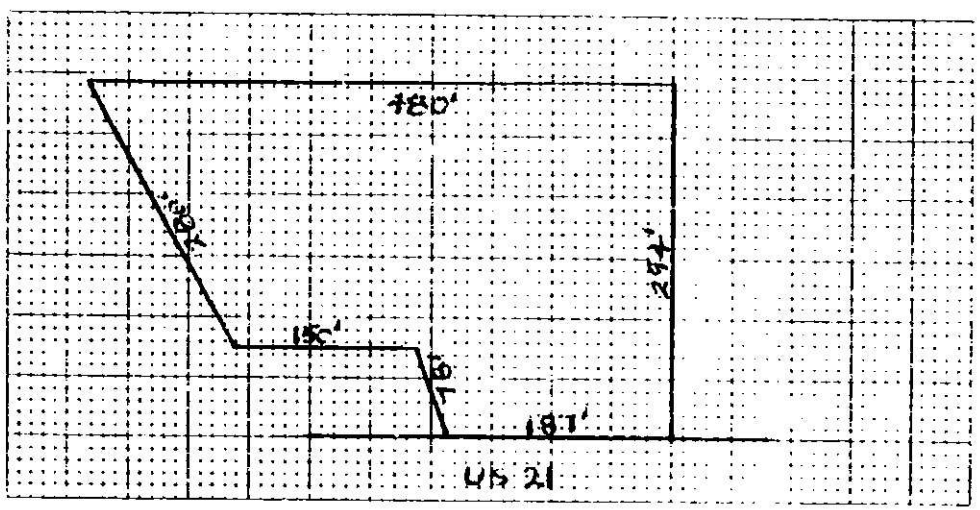
4) LOCATION OF PROPERTY US 21 APPROXIMATELY 3000' SOUTH OF THE INTERSECTION OF US 21 - NC 73 & I-77 (STREET OR COUNTY ROAD)

5) SUBDIVISION LOT NO BLOCK NO

MAP BOOK NO PAGE NO

6) DEED REFERENCE DEED BOOK 1952 PAGE NO 372

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 hereinafter 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

Hugh R Smith
OWNER

EHD-5 76

Environmental Health Department's Copy

NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX II
SITE EVALUATION

A.O.T 14345
PO 005-171-07

(Ground Absorption Sewage Disposal)

OWNER: Hugh Roy Smith
ADDRESS: Box 96
COUNTY: Cornelius
LOCATION OF SITE: Highway 21

DATE REQUESTED:
PLAT NO.:
LOT SIZE: 82,000 (Approx)

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) 2-6 % PS U	(S) PS 2-6% U	S PS U	S PS U +
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S PS Mod (U) Fill	S (PS) Clay U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 in.) (Clayey Soils)	S PS Massive (U)	S (PS) Blocky U	S PS U	S PS U
4. SOIL DEPTH (In.)	S Fill to PS 48" + (U)	(S) 40" PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock)	S Compacted PS (U) Layers	(S) None PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	S Poor PS Intermed (U) Drainage	(S) 70-90 PS ground U water	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S PS U Slow (U)	S (PS) Moderate U	S PS U	S PS U
8. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	unsuitable	Provisionally Suitable		
SOIL SERIES	Fill	Cecil		

S - Suitable PS - Provisionally Suitable U - Unsuitable

* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

Recommendations/Comments:

Described By: William A. Marlin

Title: Soil Scientist Date: 9-15-78

DHS Form 2601 (2/77)
Sanitation

Serial No. 2124

PTR No 14345

Date Issued Augsut 17, 1978

T. C. No. P.0.005-171-07

Map Date 3-22-78

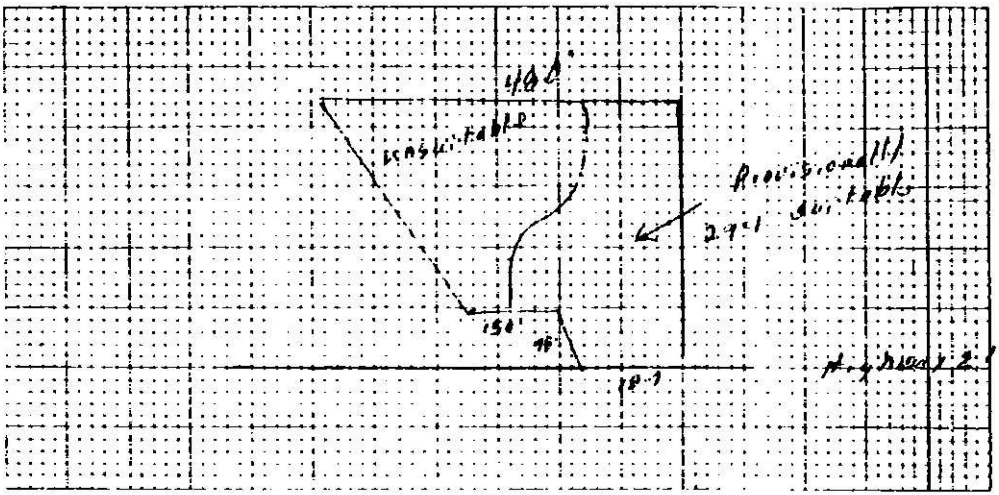
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Smith (LAST) Hugh (FIRST) Roy (MIDDLE)

ADDRESS OF OWNER Box 96, Cornelius, NC ZIP 28031

LOCATION OF PROPERTY Highway 21, near Highway 73 (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO.



PLOT PLAN

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:

Provisionally Suitable

Soil Scientist

Environmental Health Director or Authorized Section Head

Mecklenburg County Health Department

SEE INSTRUCTIONS ON BACK

Date Received 8/4/80

(CAR(S) Application No. 14345

T. C. No. pa 005-171-07

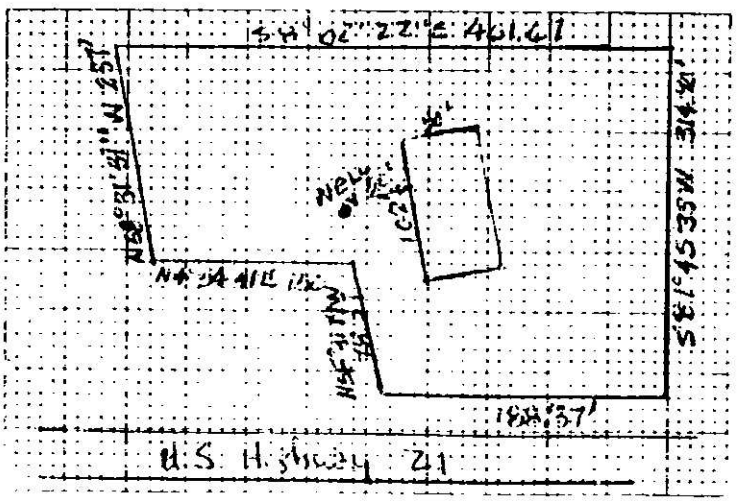
Map Date 3-22-78

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
Pesthouse ___ Yes ___ No
4. No. of Bedrooms 5
5. Business Use Max No Employees 6 (total)
6. Washing Machine ✓ Yes ___ No
7. Food or Drink ___ Yes ✓ No
8. Swimming Pool ___ Yes ✓ No
9. Water supply
A. Individual Well ✓
B. Environmental System ___
1. Community System ___
2. Well ___
3. Environmental Source ___
C. Sewage System
1. Is any part within 200 feet ___ Yes ✓ No
2. Is any part within 200 feet of ___ Yes ___ No
10. For Agent ___
11. Authorized ___

12. NAME OF OWNER CHANDLER (LAST) ROBERT (FIRST) L (MIDDLE)

14. ADDRESS OF OWNER Route 1 Box 1226 Huntersville NC

15. PHONE NO Home 892-1996 Office 392-0207

16. LOCATION OF SYSTEM Highway 21 near Highway 73
(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 SOIL INVESTIGATION BEEN RUN? ✓ YES NO DATE RUN 8/15/78

20. PTR NUMBER (See instructions) 14-345

The undersigned property owner 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 ___ OWNER Robert L. Chandler

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued August 6, 1980

Serial No. 4306

LA No. 14345

T. C. No. po 005-171-07

Map Date 3/22/78

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Gochnauer, (LAST) Robert (FIRST) L. (MIDDLE)

ADDRESS OF OWNER Route 1, Box 1026, Huntersville, NC 28078

LOCATION OF LOT Highway 21, (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 14345. 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, 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

John R Adkisson

(Environmental Health Director, or Authorized Section Head)

EHD-S 76

Environmental Health Department's Copy

Date Issued _____

Serial No. 4332

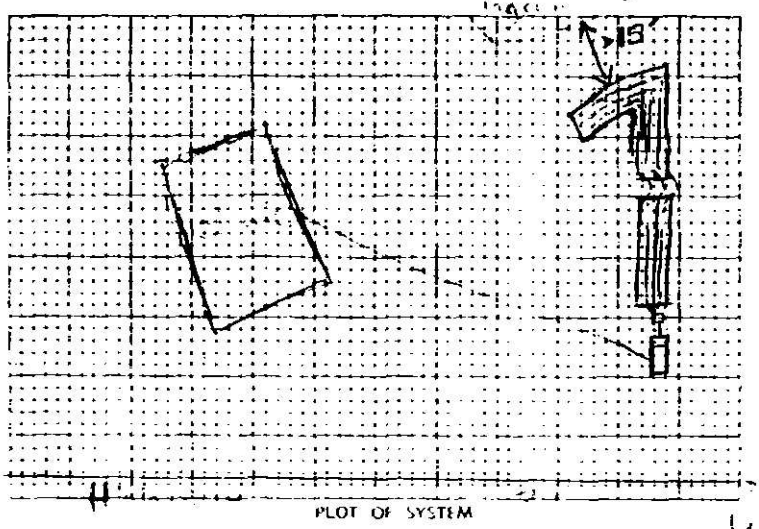
ICAR(S) Permit No. 14345

pl. T. C. No. 005-171-07

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 14345, dated _____ 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 _____, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate _____

Liquid Capacity of Tank _____

Tank Construction _____

Absorption and or Nitrification Lines

Total Line Length 300'

Number of Lines 5

Distance from House _____

Distance from Property Line _____

Distance from Well _____

NAME OF OWNER _____

LOCATION OF PROPERTY _____

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 at 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.

Comments _____

_____ 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 5 /6

Environmental Health Department's Copy

C of A (s) No. 14345

✓ Date Issued 10-21-80 Serial 4093 p.o. T C. No. 005-171-07

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF COMPLETION

CERTIFICATE OF APPROVAL

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

Name of Owner Cochnauer (LAST), Robert (FIRST), L. (MIDDLE)

Location of Property Highway 21

Application Number 14345 Permit Number 14345

Inspection Date:

Liquid Capacity of Tank 1500 gallons Tank Material precast concrete

Total Length of Drain Tile 500' Number of Lines 5

Depth of Filter Material 17" Cover Depth 15" to 30"

Water Supply Source well Distance from Water Source >100' (not in yet)

Excavation Inspected ____ (DATE) Tank Inspected 10-21-80 (DATE) used plastic tee

Nitrification Field Inspected 10-21-80 (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 Landscape so as to divert all surface water away from tank + drainfield.

Mike Sexton
Environmentalist

EHD 5 76

Environmental Health Department's Copy