

3032 SADLER RD

11327119

7/18/08

marliwr

Groundwater and Wastewater Services File Imaging Project
May 2007
Barcode Font = IDAutomationHC39M

Date Issued 6-29-79 Serial No. 2808 C of A (s) No. 15094

T & N 3-271-19

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 BERRY (LAST) Louise (FIRST) ____ (MIDDLE)

Location of Property Saddle Rd

Application Number 15094 Permit Number 15094

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material P/C

Total Length of Drain Tile 330 Number of Lines 4

Depth of Filter Material 17" Cover Depth 24"

Water Supply Source Well Distance from Water Source 50'+

Excavation Inspected 6-29-79 (DATE) Tank Inspected 6-29-79 (DATE)

Nitrification Field Inspected 6-29-79 (DATE)

Washing Machine Line Inspected, If Applicable N/A (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 ____

Marshall Edwards
Environmentalist

EHD-5-76

Environmental Health Department's Copy

Serial No. 2875

Date Issued 6-27-79

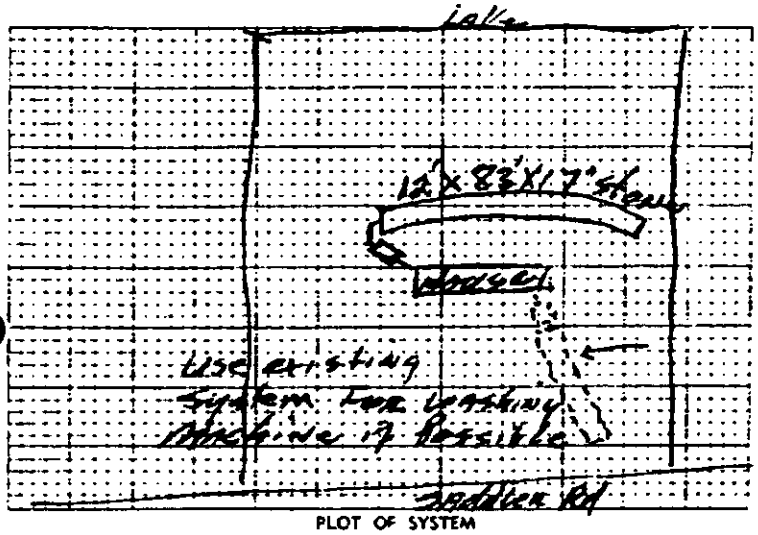
ICAR (5) Permit No. 15094

T. C No 113-271-19

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 13-094 dated 2-26-79 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 P/S

Liquid Capacity of Tank 1500

Tank Construction P/C

Absorption and or Nitrification Lines

Total Line Length 330

Number of Lines 4

Distance from House 10'+

Distance from Property Line 10'+

Distance from Well 50'+

NAME OF OWNER Louise Berry

LOCATION OF PROPERTY Saddle Rd.

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.

Comments. 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.

Division or Section Head _____ Environmentalist [signature]

* 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.

FHO-5-76

Environmental Health Department's Copy

Date Received 2/7/79

Copy to: Asher Realty Co

APT No. 15094

T. C. No. 113-271-19

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER BERRY (LAST) LOUISE (FLOYD) (FIRST) C. (MIDDLE)

2) ADDRESS OF OWNER 5801 PRESTON LN, CHARLOTTE ZIP 28211

3) PHONE NO Home 364-6256 Office —

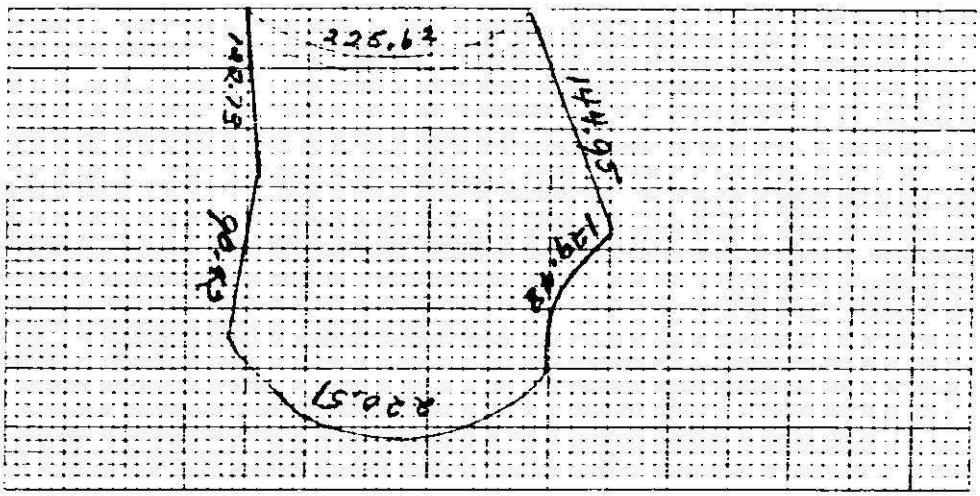
4) LOCATION OF PROPERTY SADLER RD. (STREET OR COUNTY ROAD) LOT 28 SECTION 36

5) SUBDIVISION LAKE WILEY LOT NO 28 SECTION BLOCK NO 36

MAP BOOK NO 4145 PAGE NO 0752

6) DEED REFERENCE DEED BOOK PAGE NO CRESENT LAND & TIMBER CORP. LEASE LOT

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

Louise C Berry
OWNER

EHD-5-76

Environmental Health Department's Copy

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

APPENDIX H
SITE EVALUATION

S.I.R. No. 15094

(Ground Absorption Sewage Disposal)

OWNER: Jamal (Effie) Berry
ADDRESS: 5911 Foulon Farm
COUNTY: Charlotte, N.C. 28211
LOCATION OF SITE: Faulk Road

DATE REQUESTED:
PLAT NO.: 113-271-18 Lot 25 Sect 3C
LOT SIZE: Approx 50,000

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS U 2-10%	(S) PS U 2-15%	S Complex PS Slopes (U)	(S) PS U 0-15%
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S (PS) Clay U	S PS 2:1 (U) Clay	S 2:1 PS Clay (U)	S PS 2:1 (U) Clay
3. SOIL STRUCTURE (12-36 in.) (Clayey Soils)	S (PS) Blocky U	S PS Massive (U)	S Massive PS (U)	PS (U) Massive
4. SOIL DEPTH (In.)	(S) 48" PS U	(S) 48" PS U	S Depth PS Variable (U)	(S) 48" PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock)	(S) None PS U	(S) None PS U	(S) None PS U	(S) None PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) PS Perched ground water U	S Seasonal PS Perched water (U) Table	S Eroded PS Stream (U) Channel water	(S) Perched PS ground U water
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) Moderate U	S PS Slow (U) V Slow	S PS Slow (U)	S PS Slow (U) V Slow
8. OTHER (Specify) ✔	S Shallow PS Area (U)	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION ✔	unsuitable	unsuitable	unsuitable	unsuitable
SOIL SERIES	Cecil	Helena	Eroded Areas	Enon

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)

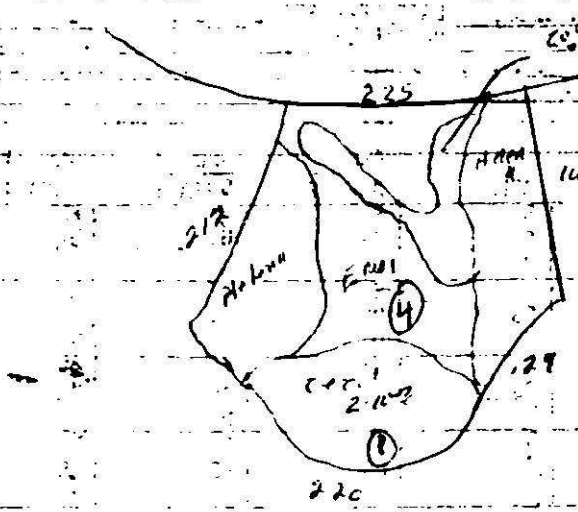
Recommendations/Comments:

Described By: William A. Marlow

Title: Soil Scientist Date: 2-16-79

dhs form 2601 (1/79)
Sanitation

✔


225
Saddle Ridge
104
4
1
220

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203

SITE INVESTIGATION REPORT
INDIVIDUAL SEPTIC TANK SYSTEM
WITH SUBSURFACE,
SOIL ABSORPTION,
EFFLUENT DISCHARGE

SIR.NO. 15094
T.C.NO. ~~113-271-19~~
MAP DATE
DATE ~~February 21, 1979~~

NAME OF OWNER Louise (Floyd G.) Berry

ADDRESS OF OWNER 5801 Preston Lane

LOCATION OF LOT Sadler Road, Lot 28, Section 36

At your request and pursuant to Section .1900 of the North Carolina Administrative Code, Title 10, Department of Human Resources, Chapter 10, Health Services, Subchapter 10A, a site evaluation has been made for an on premises ground absorption sewage disposal system on the property designated above and the following conditions were found:

Site Classification Unsuitable
Inadequate area available for installation of ground absorption sewage disposal system in accordance with North Carolina Department of Human Resources specifications.

Sites classified as Unsuitable are not acceptable for soil absorption of sewage effluent. However, if engineering, geologic, soil, and environmental studies indicate that a suitable septic tank system or a suitable alternate system can be expected to function satisfactorily, such sites may be re-classified as Provisionally Suitable. (Section 10 of the North Carolina Administrative Code 10 A,.1910)

If you desire to file for permission to install an "alternate or modified" system, you should present this office with your proposals in the form of plans and specifications. These would be reviewed and if it is found that the system may reasonably be expected to function satisfactorily, approval may be given on the execution by you of a "Septic Tank Agreement Form" available in this office.

Stephen J. Wood

Stephen J. Wood, Environmentalist

EHD 999 (1/79)

R

SEE INSTRUCTIONS ON BACK

Date Received 26 Feb 1979

ICAR(S) Application No. 15094

T. C. No. 113-221-19

Map Date _____

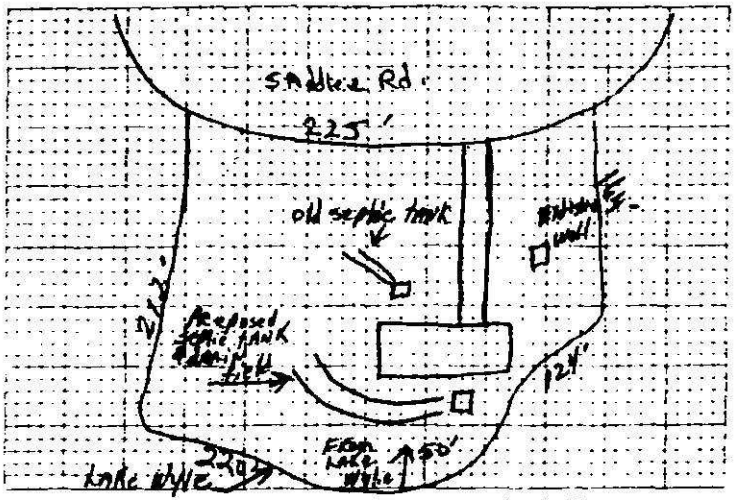
1500
230

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 3
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 Berry (LAST) Louise (FIRST) ___ (MIDDLE)

14) ADDRESS OF OWNER 5801 Reston Lane

15) PHONE NO Home ___ Office ___

16) LOCATION OF SYSTEM Sadler Rd. (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No 28 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 2-10-79

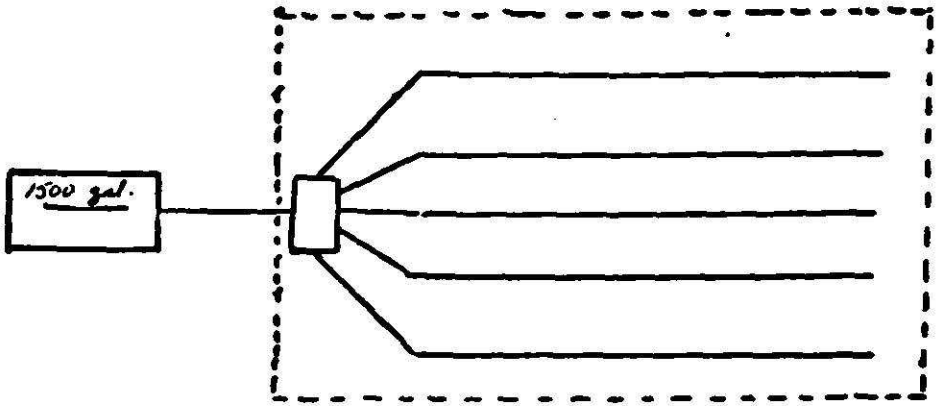
20) PTR NUMBER (See Instructions) ___

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 ___ OWNER Louise C. Berry

EHD-5-76

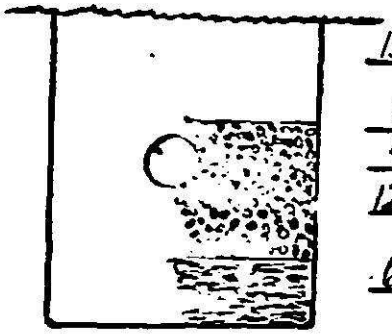
Environmental Health Department's Copy



4/ 83

~~5~~ drain pipe ~~100'~~
long 3' on center
990 sq foot
bottom area.

Request that washer drain be connected to old septic tank and add more drain line if necessary.



Proposed septic Tank system submitted for consideration and approval

Louise C Berry

Bed System

Date Issued February 28, 1979 Serial No. 2710

LA No. 15094

T. C. No. 113-271-19

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

IMPROVEMENT PERMIT

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

NAME OF OWNER Berry (LAST) Louise (FIRST) _____ (MIDDLE)

ADDRESS OF OWNER 5801 Preston Lane ZIP _____

LOCATION OF LOT Sadler Road (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. 28 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 15094. 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

John R. Atkinson

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

R

Serial No. 2875

Date Issued 6-27-79

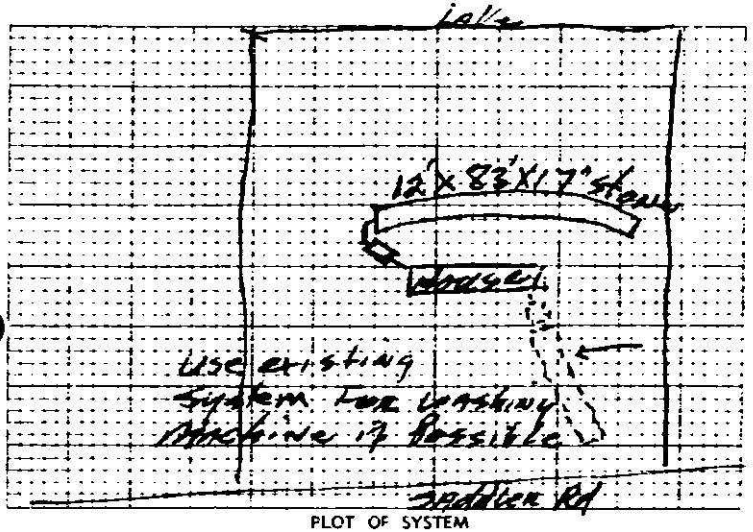
ICAR (S) Permit No. 15094

T. C No 113-271-19

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 15094 dated 2-26-79 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 P/S

Liquid Capacity of Tank 1500

Tank Construction P/C

Absorption and or Nitrification Lines

Total Line Length 330

Number of Lines 4

Distance from House 10'+

Distance from Property Line 10'+

Distance from Well 50'+

NAME OF OWNER Louise Berry

LOCATION OF PROPERTY Saddler Rd.

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.

Comments. 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.

Division or Section Head

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.

FHD-5-76

Environmental Health Department's Copy

Date Issued 6-29-79 Serial No. 2808 C of A (s) No. 15094

T & N 3-271-19

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 Berry (LAST) Louise (FIRST) ____ (MIDDLE)

Location of Property Saddler Rd

Application Number 15094 Permit Number 15094

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material P/C

Total Length of Drain Tile 330 Number of Lines 4

Depth of Filter Material 17" Cover Depth 24"

Water Supply Source Well Distance from Water Source 50'+

Excavation Inspected 6-29-79 (DATE) Tank Inspected 6-29-79 (DATE)

Nitrification Field Inspected 6-29-79 (DATE)

Washing Machine Line Inspected. If Applicable N.A (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 ____

Marshall Edwards
Environmentalist

EHD-S-76

Environmental Health Department's Copy