T. C. No. _____

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

WELL RECORD

Drilling Contractor McCALL Bros Reg. No. 30 Well Permit No. 12371

1. Town Cornelius County _____
2. Location _____ Quadrangle No. C-67
   Show a sketch of location on back of form
3. Owner Mady Const Co
   Address 3547 N. Sharon Amity
4. Topography: (hill, side hill, top, valley, flat) ENHANCE
5. Use of Well House Date Completed 7-11-77
6. Rig type or method Diamond Total Depth 50
7. Casing: Depth Diam. Type
   From 0 to 23 ft. _____ in. _____
8. Grout: Depth Material Method
   From 0 to 20 ft. _____ in. _____
9. Screen: Depth Diam. Type and Opening
   From _____ to _____ ft. _____ in. _____
10. Water Zones (depth) _____
11. Static Water Level 15 ft. (above) (below) top of casing
    which is _____ ft. above land surface. Elev. _____
    Date 7-11-77
12. Yield (gpm) _____ Method of testing _____
13. Pumping Water Level 15 ft. after 1 hrs.
    at 5 gpm.
14. Water Quality _____ Temperature (°F) _____
15. Well sterilization method _____
16. Permanent Pump: Type _____ Make _____
    Installed — Date _____ By _____
    Capacity _____ (gpm) Hp. _____
    Intake depth _____ Airline depth _____
17. Remarks _____

I do hereby certify that this well record is true and exact.

William Sprinkle
SIGNATURE OF CONTRACTOR OR AGENT

DRILLING LOG

From	To	Formation
0	3	[illegible]
3	-	[illegible]

FORM NO. E-22-9-1-72

Date Received 5/9/77

APT No. 1239 1

T. C. No. 001-081-10

Map Date 6.4.76

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Duckworth (LAST) James (FIRST) Thomas (MIDDLE)

2) ADDRESS OF OWNER C/O 3549 N. Sharon-Amity-Suite 303 Charlotte, NC ZIP 28205

3) PHONE NO Home _____ Office 568-7740

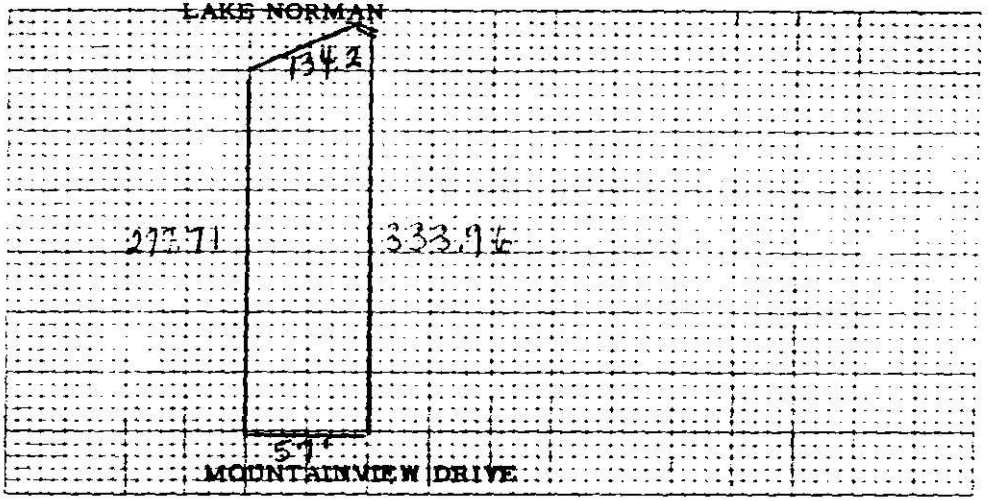
4) LOCATION OF PROPERTY Mountainview Drive (STREET OR COUNTY ROAD)

5) SUBDIVISION Mountain View Beach LOT NO 10 BLOCK NO. _____

MAP BOOK NO 11 PAGE NO 343

6) DEED REFERENCE DEED BOOK 3058 PAGE NO 165

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

OWNER James Thomas Duckworth

EHD-5-76

Environmental Health Department's Copy

SOIL INVESTIGATION REPORT

Date of Investigation May 24, 1977 APT NO. 12391

Owner J. T. Duckworth

Location of Property Mountainview Drive lot no 10 Tax Code No. 001-081-10

Soil Suitability Ratings

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Cecil			
2. Soil Slope	suitable 3-8%			
3. Soil Depth	suitable >46"			
4. Soil Texture	provisionally suitable clay			
5. Soil Structure	provisionally suitable blocky			
6. Restrictive Horizons	—			
7. Soil Drainage	suitable water table >6'			
8. Soil Permeability (Percolation Rate)	provisionally suitable moderate			
9. Other	60 min/in. —			
10. Overall Rating	provisionally suitable			

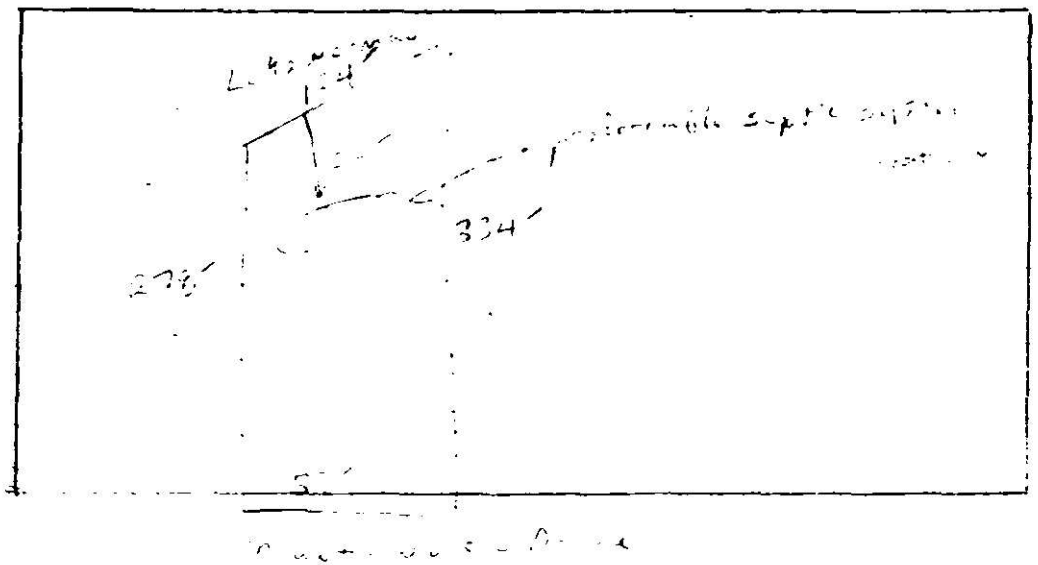
Recommendations Based on this investigation, an area of acceptable (provisionally suitable soils) area was found for installation of a septic tank system. System design should be based on a percolation rate of 60 min/in.

See diagram on back

W. Edward Grant
Soil scientist

3/10/75
EHS 539

DIAGRAM OF PROPERTY



3/18/75
EHD 539

Serial No. 0808

PTR No. 12391

T C No. 001-081-10

Map Date 6-4-76

Date Issued May 26, 1977

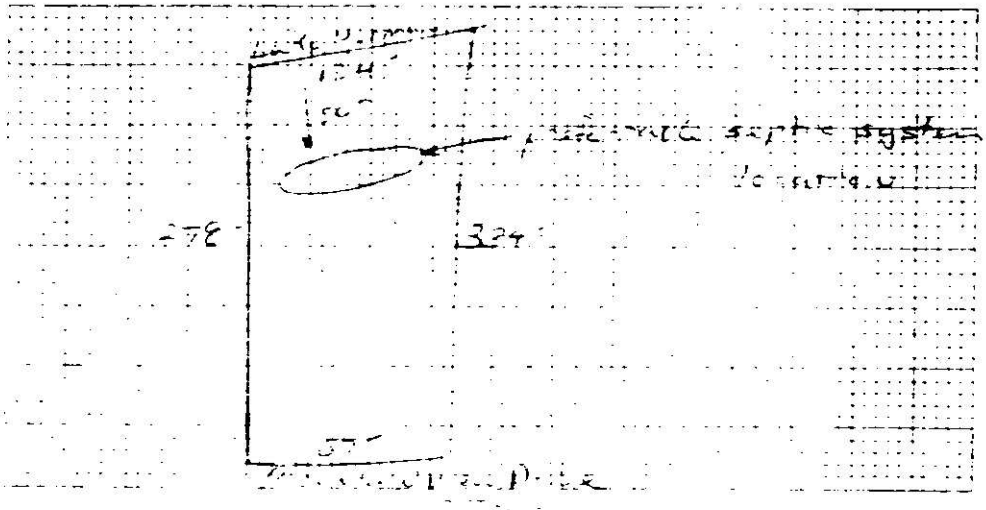
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Duckworth (LAST) James (FIRST) Thomas (MIDDLE)

ADDRESS OF OWNER % 3549 N. Sharon-Amity Rd., Suite 303, Charlotte NC ZIP 28205

LOCATION OF PROPERTY Mountainview Drive

SUBDIVISION LOT NO 10 BLOCK NO



Provisionally Suitable
60 min/in.

The application is granted subject to the laws of the State of North Carolina, the rules and regulations of the North Carolina Department of Human Resources, Division of Health Services and the Mecklenburg County Health Ordinance in effect at the date of issue. This permit may be withdrawn at any time in the future if it is found that the system fails to function properly or if the laws, rules and regulations are changed such that the application would not have been granted had the new laws, rules and regulations been in effect on the issue date.

Soil Scientist

John R Adkisson

Environmental Health Director

Environmental Health Department's Copy

Date Received 5/31/77

RECEIVED MAY 31

ICAR(S) Application No. 12391

T C No. 001-08-10

Map Date 6-4-76

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 undersigned property owner hereinafter hereby applies to the Mecklenburg County Department of Environmental Health for a permit to

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

LANE NORMAN

134.2'

278'

254'

59'

MOUNTAINVIEW DRIVE

3 PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home Yes X No
Trailer Yes X No
4 No. of Bedrooms 2
5 Business Use Max No. Employees
6 Washing Machine X Yes No
7 Garbage Disposal Yes X No
8 Dishwasher Yes X No
9 Water Supply
A Individual Well X
B Governmental System
C Community System
1 Well Source
2 Governmental Source
Sewage System
Public Sewer within 200 feet Yes X No
Public Sewer Yes X No
Public sewer within 200 feet of property Yes X No
11 FHA Case No.
12 VA Case No.

13) NAME OF OWNER Duckworth (LAST) James (FIRST) Thomas (MIDDLE)

14) ADDRESS OF OWNER 3549 N. Sharon-Amity Rd. Suite 303, Charlotte, NC 28205

15) PHONE NO. Home ___ Office 568-7740

16) LOCATION OF SYSTEM Mountainview Drive (STREET OR COUNTY ROAD)

17) SUBDIVISION Mountainview Beach Lot No 10 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 5/26/77

20) PTR NUMBER (See Instructions) 12391

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.

May 27, 1977
DATE OF APPLICATION

Thomas Duckworth
OWNER

EHD-5-76

Environmental Health Department's Copy

Serial No. 0848

LA No. 12391

T. C. No. 001-081-10

Date Issued May 31, 1977

Map Date 6-4-76

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 Duckworth (LAST) James (FIRST) Thomas (MIDDLE)

ADDRESS OF OWNER 3549 N. Sharon-Amity Rd., Suite 303, Charlotte NC Zip 28205

LOCATION OF LOT Mountainview Drive (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO 10 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 onsite inspection of the said lot and upon the information supplied in the "Application for an Installation Construction, Alteration and/or Repair Permit", number _____. 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 permits which have been issued to authorize construction on the said lot 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

E M Reynolds
Environmentalist

John R. Atkisson
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued

Serial No.0972

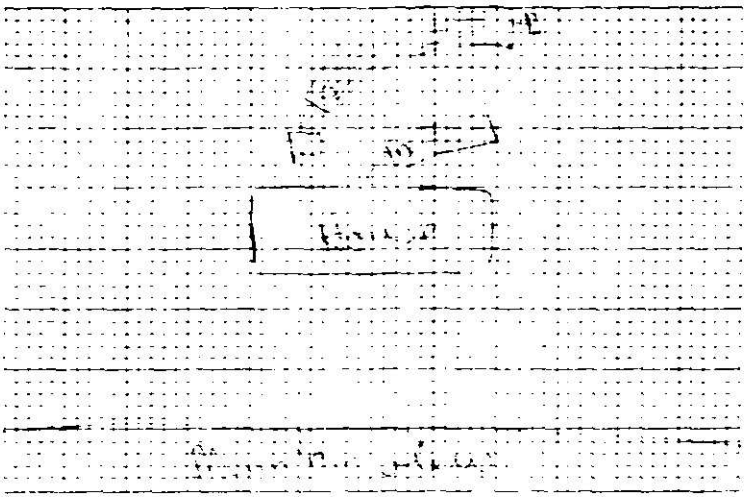
ICAR(S) Permit No. 12391

T C No.

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 ___ dated ___ and this permit shall be void and of no effect if the information provided in the application is not true and correct as stated. All work shall be completed on or before ___ after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate

Septic Tank Size

Tank Construction

Absorption Area Required

Total Line Length

Number of Lines

Distance to Water Supply

Distance to Property Line

Date Permit Issued

NAME OF OWNER

LOCATION OF PROPERTY

The following items must be installed or requirements set forth in the Regulations of the Mecklenburg County Health Commission are in effect at the time of granting of this permit. A certificate of final must be issued by the Environmental Health Division before a residence is occupied or rendered for inspection by a lender.

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 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-5-76

Environmental Health Department's Copy

Date Issued 29 Jul 71 **Serial No. 0941** C of A (s) No. 12391

T C No

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 [illegible] Terry T.
LAST FIRST MIDDLE

Location of Property [illegible]

Application Number [illegible] Permit Number [illegible]

Inspection Data:

Liquid Capacity of Tank [illegible] Tank Material Concrete

Total Length of Drain Tile [illegible] Number of Lines 5-4

Depth of Filter Material [illegible] Cover Depth 24"

Water Supply Source [illegible] Distance from Water Source

Excavation Inspected [illegible] DATE Tank Inspected 29 July DATE

Nitrification Field Inspected DATE

Washing Machine Line Inspected If Applicable [illegible] 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 and 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 [illegible]

[illegible]
Environmentalist

EHD-5-76

Environmental Health Department's Copy