Date Received 11-17-77

APT No. 12678

T. C. No. 215.P1.01

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Ralph Squires Construction Company, Inc.
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER P.O. Box 25178 Charlotte, N. C. ZIP 28212

3) PHONE NO. Home _____ Office 537-9553

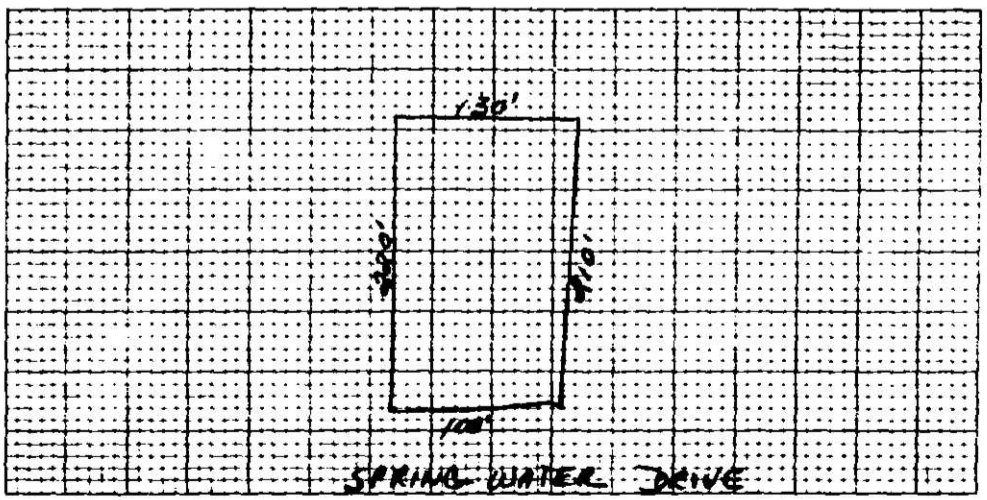
4) LOCATION OF PROPERTY 14019 Springwater Drive
(STREET OR COUNTY ROAD)

5) SUBDIVISION Widdrow Estates LOT NO. 7 BLOCK NO. N

MAP BOOK NO _____ PAGE NO. _____

6) DEED REFERENCE DEED BOOK _____ PAGE NO. _____

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

Jim Bogan
OWNER

EHD-5-76

Environmental Health Department's Copy

SOIL INVESTIGATION REPORT

Date of Investigation June 24, 1977 APT NO. 12678

Owner Ralph Sparks Construction Co., Inc.

Location of Property 14019 Springwater Dr. Lot No. 7 Block N

Soil Suitability Ratings TxCode No. P.O. 215-131-62

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Coeil			Coeil Depression
2. Soil Slope	suitable 3-8%			unsuitable depression
3. Soil Depth	suitable >48"			suitable >48"
4. Soil Texture	provisionally suitable clay			provisionally suitable clay
5. Soil Structure	provisionally suitable blocky			provisionally suitable blocky
6. Restrictive Horizons	———			———
7. Soil Drainage	suitable water table >6'			unsuitable water drains through carbs.
8. Soil Permeability (Percolation Rate)	provisionally suitable			unsuitable slow >120 min/in.
9. Other	moderate Coarse fr.			———
10. Overall Rating	provisionally suitable			unsuitable

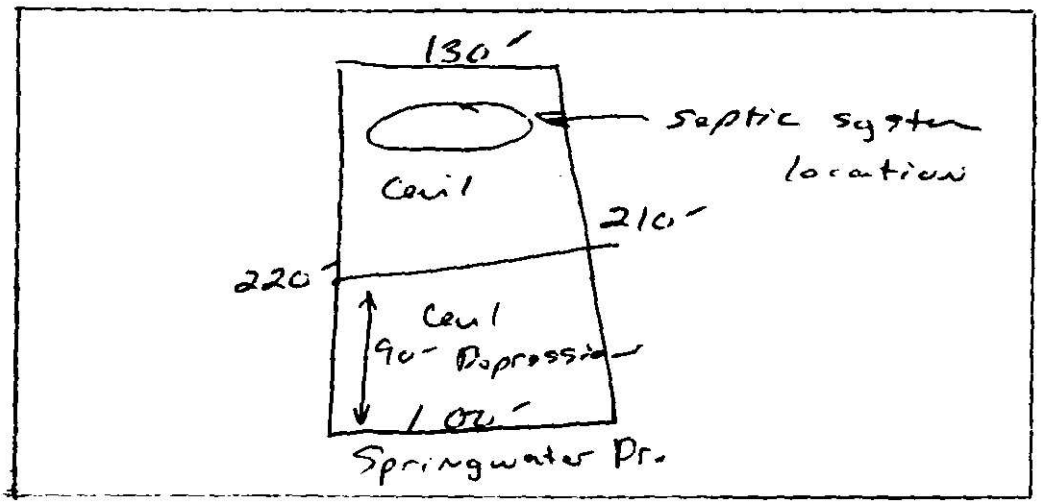
Recommendations Based on this investigation, the lot was found to have an adequate area of provisionally suitable soils for installation of a septic tank system. System design should be based on a percolation rate of 60 min/in. and should be placed in the area of Coeil soils.

See diagram on back

W. Edward Casnett
Soil Scientist

3/18/75
HUD 539

DIAGRAM OF PROPERTY



3/18/75
EHD 539

Serial No. 1005

PTR No. 12678

Date Issued June 27, 1977

T C No. P.0.215-131-01

Map Date

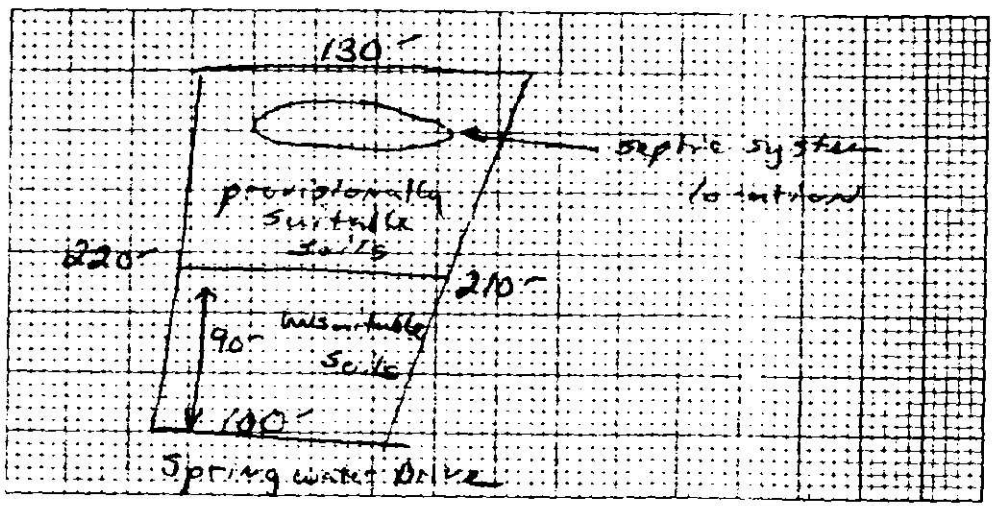
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

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

ADDRESS OF OWNER P.O. Box 25178, Charlotte, NC ZIP 28212

LOCATION OF PROPERTY 14019 Springwater Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Windrow Estates LOT NO 7 BLOCK NO N



PLOT PLAN

This is to certify that a soil investigation and waste investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The soil investigation was conducted on that portion of the lot as indicated on the above plot. **Provisionally Suitable**

The permeability rate determined by the investigation 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 must be obtained before repairing the septic system may be started from the Mecklenburg County Department of Environmental Health in accordance with the regulations governing the construction of wastewater treatment systems in the said lot.
2. The size of the septic tank wastewater treatment system which must be installed will be determined by the Mecklenburg County Department of Environmental Health according to the rate of percolation in the permeability rate obtained above, and on the size and type of building proposed thereon.
3. This approval applies only to the system location as indicated in the immediate area indicated as acceptable for system installation on the above plot.
4. This approval is void if any grading or construction, including the drilling of a well, is performed on the lot which in the opinion of the Mecklenburg County Department of Environmental Health renders the area indicated as acceptable for system installation unsuitable. 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 Department of Human Resources Division of Health Services and the Mecklenburg County Health Commission which were in effect on the date of issuance and is void if at any time in the future, prior to 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.

W. Edward Casement
EHD-5-76 Soil Scientist

John R. Atkinson
Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 2/13/79

ICAR(S) Application No. 12678

T & C No. 215-132-62

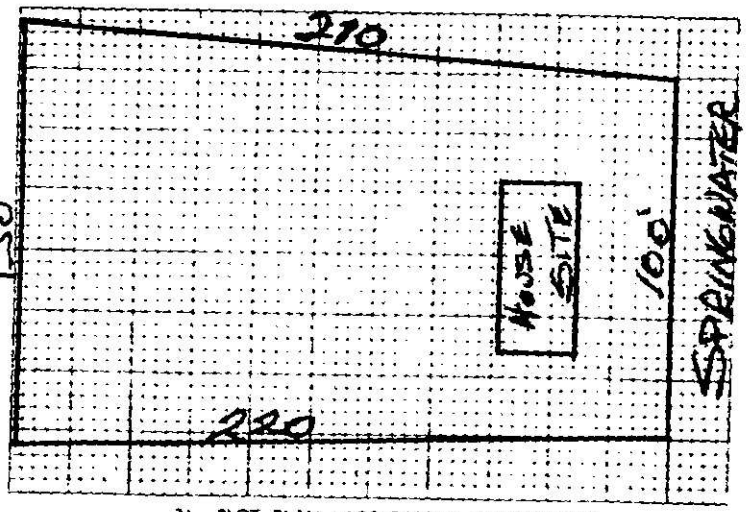
Map Date

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



31 PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ____Yes ____No
Residence ✓Yes ____No
4. No. of Bedrooms 4
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. N/A

13) NAME OF OWNER RALPH SQUIRES CONST CO INC (LAST, FIRST, MIDDLE)

14) ADDRESS OF OWNER PO Box 25178 28212

15) PHONE NO Home ____ Office 537-9553

16) LOCATION OF SYSTEM 14019 SPRINGWATER DR. (STREET OR COUNTY ROAD)

17) SUBDIVISION WINDROW Lot No. 7 Block No. N

Map Book No ____ Page No. ____

18) DEED REFERENCE — DEED BOOK ____ AT PAGE ____

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ____ NO DATE RUN ____

20) PTR NUMBER (See Instructions) 12678

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.

2-9-79
DATE OF APPLICATION

OWNER

END-5-76

Environmental Health Department's Copy

Serial No. 2677

LA No. 12678

Date Issued February 13, 1979

T. C. No. po 215-132-62

Map Date

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 Ralph Squires Construction Company
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER PO Box 25178, Charlotte, N.C. ZIP 28212

LOCATION OF LOT 14019 Springwater Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Windrow LOT NO. 7 BLOCK NO. N

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 12678. 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

Michael C. Sexton
Environmentalist

Stephen M. Wood
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

R

Serial No. 2840

Date Issued 11 June 79

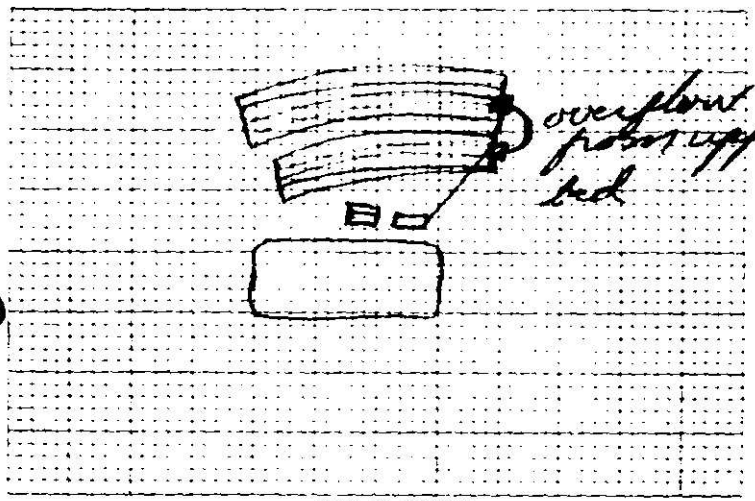
(CAR'S) Permit No. 12678

T C No 215-132 x 2

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 12678 dated 21 May 79 and this permit shall be void and of no effect if the information provided in the application is not true as determined. All work shall be completed on or before 11 July, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate 7.5

Liquid Capacity of Tank 1500 gal, 1000 gal

Tank Construction PC Conc.

Absorption Line or Nitrification Line

Total Line Length 660', 167' (827)

Number of Lines 5, 5

Distance from House 10'

Distance from Property Line 40'

Distance from Well 100'

NAME OF OWNER Ralph Squires

LOCATION OF PROPERTY 4019 Springwater Dr.

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 at superintendents request

2 beds (15' x 83' x 17" stone)

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 Steve Wood

* 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.

EMD-S-76

Environmental Health Department's Copy

Date Received 8/9/79

SEE INSTRUCTIONS ON BACK

ICAR(S) Application No. 12674

T C No. [illegible]

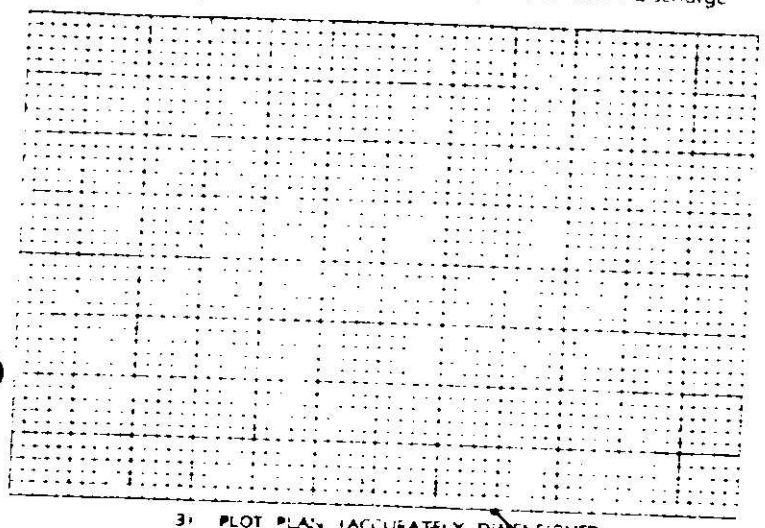
Map Date ___

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 propert, 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)

4) Mobile Home ___ Yes ✓ No
Realtor ✓ Yes ___ No

4 No. of Bedrooms 4

5 Business Use - Max No Employees ___

6 Washing Machine ✓ Yes ___ No

7 Garbage Disposal ✓ Yes ___ No

8 Dishwasher ✓ Yes ___ No

9 Water Supply
A Private Well ✓
B Environmental System ___
C Community System
1 Well source ___
2 Environmental 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 The Ralph Squires Co.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER P.O. Box 35178 Charlotte, N.C.

15) PHONE NO Home ___ Office 537-9553

16) LOCATION OF SYSTEM 14019 Springwater Dr.
STREET OR COUNTY ROAD

17) SUBDIVISION Windrow 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 ___

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.

7/16/79
DATE OF APPLICATION

[signature] Asst. Superintendent
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued 21 Aug 79

Serial No. 2973

C of A (s) No. 12678

T C No 215-132-62

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Ralph Squires Const. Co.
(LAST, FIRST, MIDDLE)

Location of Property 14019 Springwater Dr

Application Number _____ Permit Number 12678

Inspection Data:

Liquid Capacity of Tank 1500 gal / 1000 gal Tank Material PC Conc

Total Length of Drain Tile 4 @ 167' Number of Lines 5 ; 5

Depth of Filter Material 12 Cover Depth 18

Water Supply Source well Distance from Water Source 100'

Excavation Inspected _____ (DATE) Tank Inspected 21 Aug (DATE)

Nitrification Field Inspected 21 Aug (DATE)

Washing Machine Line Inspected, If Applicable 21 Aug (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 permits 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 _____

Environmentalist

EHD-5-76

Environmental Health Department's Copy