Date Received 5-5-83

MECK COUNTY DEPARTMENT OF
RECEIVED
MAY 5 1983
ENVIRONMENTAL HEALTH

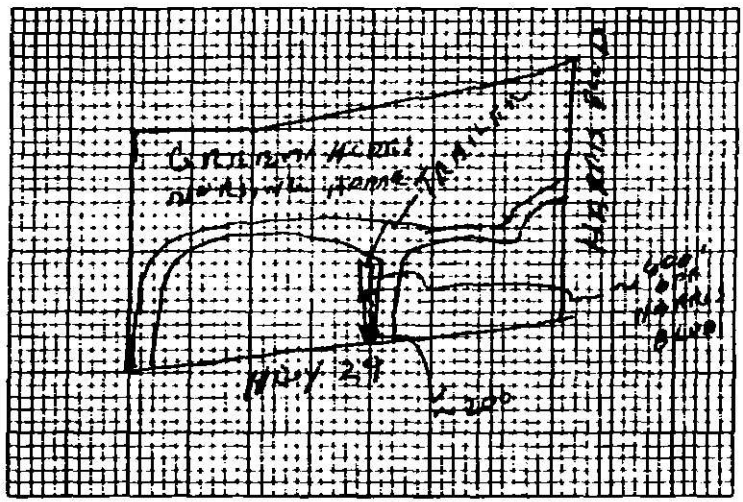
ICAR (S) Application No. 19636
P.C. No. 049-311-08
Map Date

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.



3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ✓ Yes ____ No
Residence ____ Yes ____ No
4) No. of Bedrooms NONE
5) Business Use — Max No Employees 3
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 Charlotte Mecklenburg Hospital Authority (LAST FIRST MIDDLE)

14) ADDRESS OF OWNER P.O. Box 3286 ZIP 28232

15) PHONE NO. Home 563-2116 Office 597-0444

16) LOCATION OF SYSTEM 8100 Hwy. 29 North (Green Acres Nursing Home) (STREET OR COUNTY ROAD)

17) SUBDIVISION N/A Lot No. N/A Block No. N/A

Map Book No. ____ Page No. ____ PARCEL # 049-311-08

18) DEED REFERENCE — DEED BOOK ____ AT PAGE ____

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

20) PTR NUMBER (See Instructions) N/A

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.

5/5/83
DATE OF APPLICATION

Curtis L Penn
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Received 5-5-83

MECK COUNTY DEPARTMENT OF
RECEIVED
MAY 5 1983
ENVIRONMENTAL HEALTH

SIR No. 19636
T.C. Ro. 047-311-08
Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Charlotte Mecklenburg Hospital Authority
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER P.O. Box 32861 ZIP 28232

3) PHONE NO. Home 563-2116 Office 597-0444

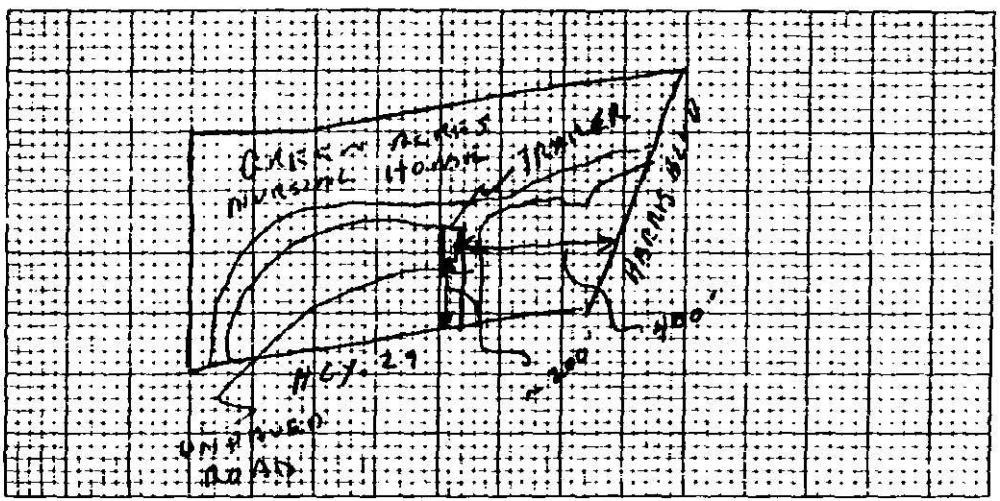
4) LOCATION OF PROPERTY 8700 Hwy. 29 North (Green Acres Nursing Home)
STREET OR COUNTY ROAD

5) SUBDIVISION [redacted] LOT NO. N/A BLOCK NO. N/A

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

Curtis H Penn
OWNER

EHD-5-76

Environmental Health Department's Copy

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 10636

T.C. NO. 80 049-31-80

(Ground Absorption Sewage Disposal)

OWNER: Charlotte - Mecklenburg Hospital Authority
ADDRESS: P.O. Box 32861 Charlotte 28232

PLAT NO:
LOT SIZE: Approx 10,000 sq. ft.

LOCATION OF SITE: Highway 29 N.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS U 6-10%	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S PS (U) 2-1 Clay	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) Blocky U	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S PS 24-30" (U)	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S saprolite PS 30" or (U) less	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	(S) 48"+ PS to U groundwater	S PS U	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U

8. SOIL GROUP: IVB

9. SITE CLASSIFICATION: Unsuitable

10. SOIL SERIES: Mecklenburg - Like

S - Suitable PS - Provisionally Suitable U - Unsuitable

**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: William R. Marlin
Title: Soil Scientist

Date: 5-16-83

EHD 539 (Revised: 6/82)

2

Highway 29
Mecklenburg Life
100'
100'
Trailer

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

SIT. NO. 19636
T. C. NO. PO 049-311-08
DATE. 5-17-83

Charlotte-Mecklenburg Hospital Authority
P. O. Box 32816
Charlotte, NC 28232

Re: Property located at 8700 Highway 29 North

At your request, a field investigation was conducted on the property designated above and was classified unsuitable for the installation of a ground absorption sewage disposal system. A copy of the site evaluation report is enclosed for your information.

Sites classified as unsuitable may be utilized for soil absorption disposal systems provided engineering, hydrogeologic, soil and environmental studies indicate that a suitable septic tank system or a suitable alternate system can be reasonably expected to function satisfactorily.

If you desire to file for permission to install an alternate system, please submit your proposals, in the form of plans and specifications, to this office. They will be reviewed and if it is found that the system may be reasonably expected to function satisfactorily, approval will be given upon the execution by you of a 'Septic Tank Agreement Form' provided by this office.

If I may be of assistance, please feel free to call at any time.

Sincerely,

for Michael A. Sexton
Environmentalist
On Premises Waste Disposal Section

Enclosure

EHD #37 (11-82)

Serial No. 6322

ICAR (S) Permit No. 19636

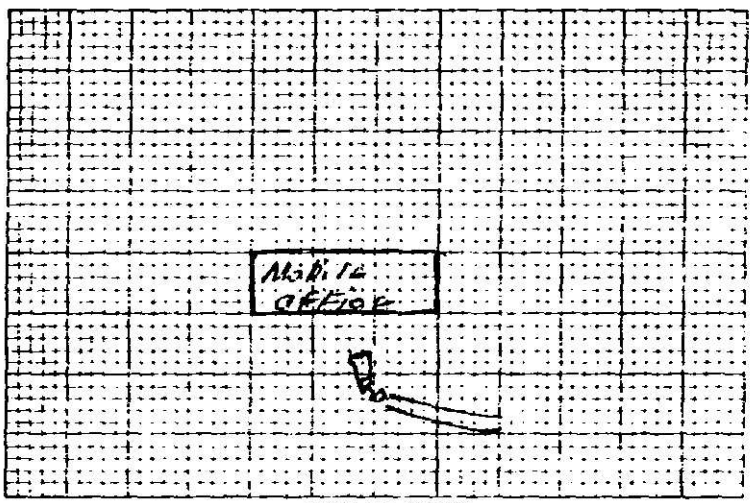
Date Issued 25 May 83

T. C. No. 10 049-311-08

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 19636, dated 17 May 83 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 25 Jun 83, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate _____

Liquid Capacity of Tank 1000

Tank Construction RC

Absorption and/or Nitrification Lines

Total Line Length 100'

Number of Lines 2

Distance from House 210'

Distance from Property Line >10'

Distance from Well City water

NAME OF OWNER Charlotte-Mecklenburg Hospital Auth.

LOCATION OF PROPERTY 5700 Hwy 29 North

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. 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.

2 Trenches * 3' X 50' X 12" 9' Centers

Comments: The system is for Temporary Office Trailer.

_____ M. L. Kirby

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.

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

C of A (s) No. 19636

Date Issued 25 May 83 Serial 5844 T. C. No. CA049-311-05

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF COMPLETION

CERTIFICATE OF APPROVAL

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

Name of Owner Charlotte-Mecklenburg Baptist Church (LAST, FIRST, MIDDLE)

Location of Property 8700 Highway 29 North (Knox Acres)

Application Number 19636 Permit Number 19636

Inspection Data:

Liquid Capacity of Tank 1000 Tank Material PE

Total Length of Drain Tile 100' Number of Lines 2

Depth of Filter Material 12" Cover Depth 15-15"

Water Supply Source City Distance from Water Source —

Excavation Inspected 25 May 83 (DATE) Tank Inspected 25 May 83 (DATE)

Nitrification Field Inspected 25 May 83 (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: 2 trenches 3'X50'X12" 9' centers

This system was designed for a temporary mobile office.

Environmentalist

EHD-5-74

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY