C of A (s) No. 21856

Date Issued 3/13/87 **Serial** 9190 T. C. No. PO 053-092.07

✓ ORT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner Griffin (LAST) Charles (FIRST) (MIDDLE)

Location of Property 1600 Hanfield Rd.

Application Number 21856 Permit Number

Inspection Date:

Liquid Capacity of Tank 1500 Tank Material Pre CAST

Total Length of Drain Tile 270' Number of Lines 3

Depth of Filter Material 12" Cover Depth 24"

Water Supply Source Well Distance from Water Source 90'

Excavation Inspected 3/13/87 (DATE) Tank Inspected 3/13/87 (DATE)

Nitrification Field Inspected 3/18/87 (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

1987 1500 ST, CON. 810 SFT, 12 S, Cecil

Jim Boris Contractor

Judy J Kiser, R.S.
Environmentalist

EHD-5-76

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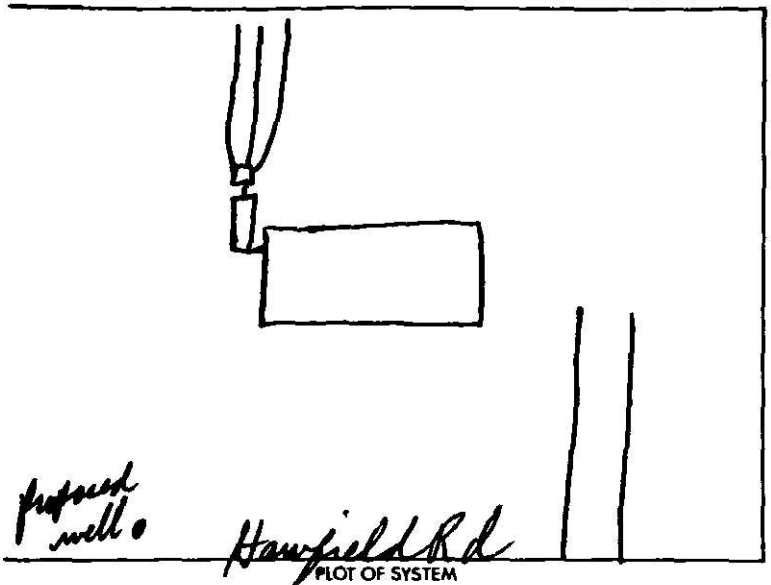
Environmental Health Department's Copy

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 2856 DATE: 10-23-86
PE: 053-092-07 ✓ L
SERIAL № 10497

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 the application dated 2-18-85. All work shall be completed on or before 11-23-86, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Department of Environmental Health before any system can be covered up or placed into service. 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons
Liquid Capacity of Dosing Tank _____ gallons
Tank Construction ttt

Absorption and/or Nitrification Lines:
Trench Width 3 feet
Total Line Length 270 feet
Number of Lines 3
Depth of Stone 12 inches
Distance from House 5 feet
Distance from Property Line 10 feet
Distance from Well ~~50~~ in feet

NAME OF OWNER Charles Griffin
LOCATION OF PROPERTY 1600 Hawfield Rd.
Comments: 3 lines 3'x90'x12" stone

J. H. Johnson
Division or Section Head

B. R. Ferguson
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.

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER OR AGENTS COPY

Serial No. 8236

SIR No. 21856

Date Issued 2-26-85

T. C. No. PO 053-092-07

Map Date L 661

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 Griffin, (LAST) Charles (FIRST) Wilson (MIDDLE)

ADDRESS OF OWNER Rt. 5, Box 1023, Charlotte, NC ZIP 28214

LOCATION OF LOT 1600 Hawfield Road (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO 2 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 21856 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 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.

D. R. Ferguson
Environmentalist

Environmental Health Director, or Authorized Section Head

BHD-5-76

Environmental Health Department's Copy

Date Received 2-18-86

MECK COUNTY DEPARTMENT OF
SEE INSTRUCTIONS ON BACK
RECEIVED
19 [illegible]
ENVIRONMENTAL HEALTH

ICAR(S) Application No. 21856

T. C. No. PO 053-092-07

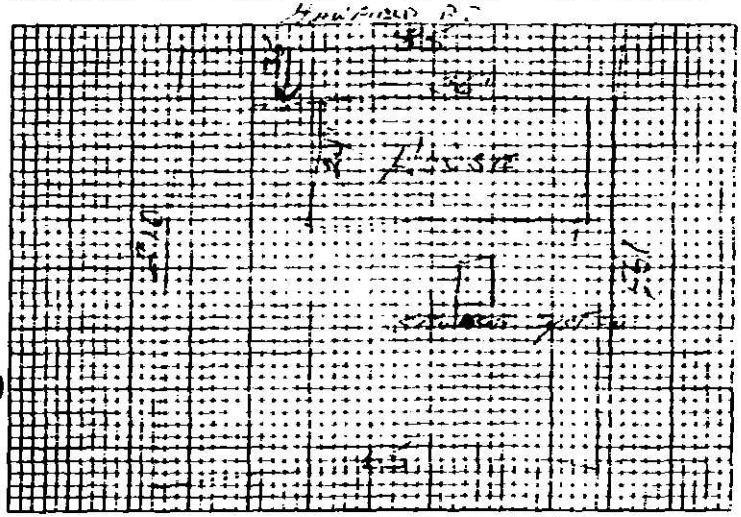
Map Date L

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 2

5) Business Use — Max No. Employees NA

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 PRIVATE
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 [illegible] (LAST) CHARLES (FIRST) WILSON (MIDDLE)

14) ADDRESS OF OWNER [illegible] 28214

15) PHONE NO. Home [illegible] Office ___

16) LOCATION OF SYSTEM 1600 [illegible] (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. +2 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.

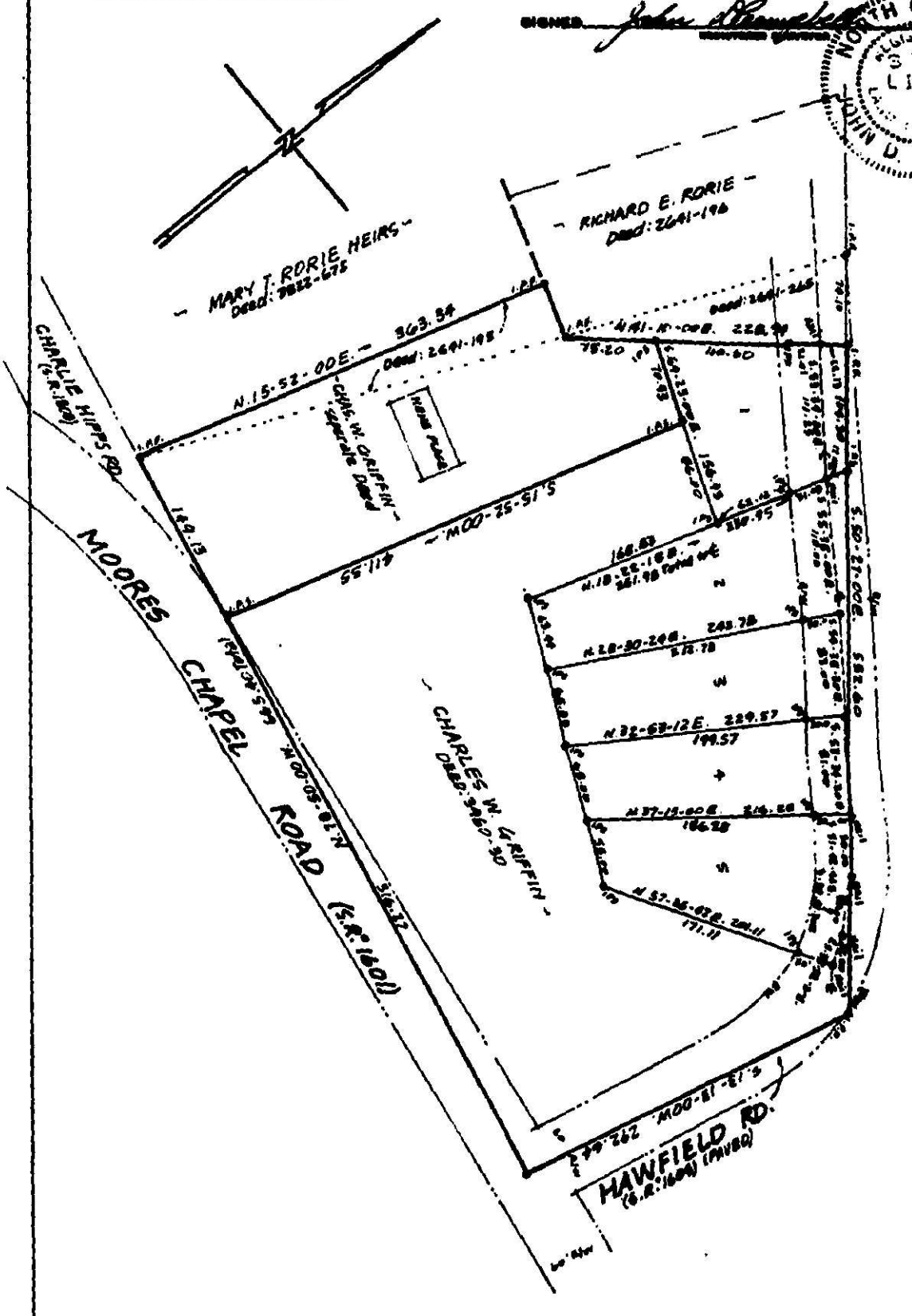
DATE OF APPLICATION ___ OWNER [signature]

BHD-5-76

THIS IS TO CERTIFY THAT ON THE 24TH. DAY OF JANUARY 19 86 I SURVEYED THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE TITLE LINES AND THE WALLS OF THE BUILDINGS IF ANY, ARE AS SHOWN HEREON.

SIGNED John D. Campbell
REGISTERED SURVEYOR

NORTH CAROLINA
REGISTERED
L.S.
JOHN D. CAMPBELL



BOUNDARY & DIVISION **SURVEY**
OF

A PORTION OF CHARLES W. GRIFFIN PROPERTY

PAW CREEK TOWNSHIP, MECKLENBURG COUNTY, N.C.

SURVEY FOR CHARLES W. GRIFFIN

MAP RECORDED IN BOOK ____ AT PAGE ____ DEED RECORDED IN BOOK 3960 PAGE 330

SCALE 1" = 100' DRAWN BY JDC FIELD WORK JDC/RA/MR FIELD BOOK # 41

PARCEL I.D. NO. 053-092-07 I.R.F. = IRON PIN FOUND I.P.S. = IRON PIN SET

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

SIR. NO. 21856
T.C. NO. PO 053-092-07
DATE: 2-14-85

Charles W. Griffin
Route 5, Box 1023
Charlotte, NC 28214

RE: Property located at Hawfield Road, Lot + 2, 16 RM

Dear Mr. Griffin:

At your request, a field investigation was conducted on the property designated above. The soils on the property were found to contain a limited area of provisionally suitable soil for the installation of a ground absorption sewage disposal system. A copy of the site evaluation report is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit plot plans for the proposed construction, well, and ground absorption sewage disposal system to this office. They will be reviewed and if it is found that there is an adequate area of provisionally suitable soil to accommodate the proposed installation, an Improvements Permit will be issued by this office.

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

Sincerely,

Bill D. Hardister, Jr.

Bill D. Hardister, Jr.
Environmental Health Supervisor

BDH/kbg

Enclosure

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21856

T.C. NO. 90 053 092 07

(Ground Absorption Sewage Disposal)

OWNER: Charles L. Griffin
ADDRESS: P.O. Box 423
Davidson, N.C. 28036

PLAT NO: Lot #1 Lot #2
LOT SIZE: 15,156

LOCATION OF SITE: Hampton Road

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS 2-6 U	S PS — U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S PS Clay U	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"+ U	S PS — U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S PS U	S PS — U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S PS U	S PS — U	S PS U	S PS U
7. OTHER (Specify)	S Limited PS Bedrock U see back	S Limited PS Stumps, U	S PS U	S PS U
8. SOIL GROUP				
9. SITE CLASSIFICATION				
10. SOIL SERIES				

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:
Title:

Date: 2-13-85

14

Date Received 1-30-85

SIR No. 21856

T.P.C. No. 053-092-07

Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER GRIFFIN (LAST) CHARLES (FIRST) WILSON (MIDDLE)

2) ADDRESS OF OWNER RT 5 BOX 1023 Hwy, NC ZIP 28214

3) PHONE NO. Home 393 1456 Office _____

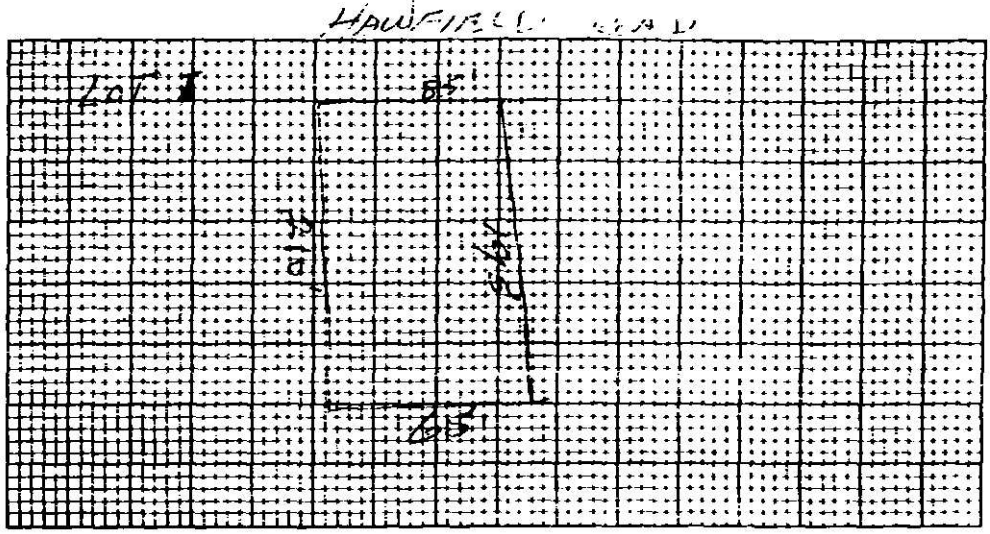
4) LOCATION OF PROPERTY HAWFIELD RD (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. 1 BLOCK NO. _____

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

Charles W Griffin
OWNER

EHD-S-76

Environmental Health Department's Copy