Date Received 7/31/79

APT No. 16010

T. C. No. 003-191-05

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Home Federal Savings & Loan Association
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER 139 South Tryon Street, Charlotte, N. C. ZIP 28202

3) PHONE NO. Home 704-373-0400 Office _____

4) LOCATION OF PROPERTY 2651 Catawba Avenue (STREET OR COUNTY ROAD), Highway # 73

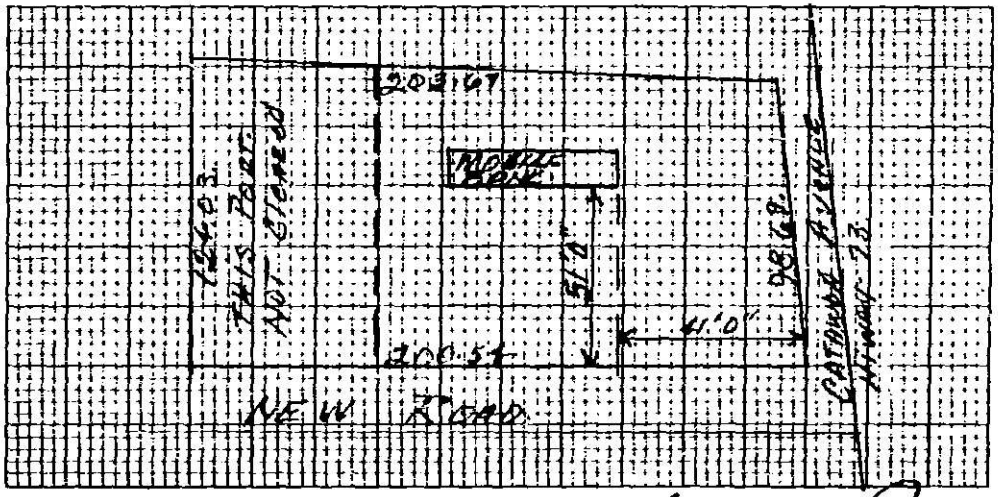
5) SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

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

This trailer only has one bath room. No shower or tub



7) ACCURATELY DIAGRAM & DIMENSION LOT

OWNER _____

EHD-5-76

Environmental Health Department's Copy

1 Area 1

S. I. R. NO. 16010

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

APPENDIX II
SITE EVALUATION

T. C. # 003-191-05

(Ground Absorption Sewage Disposal)

OWNER: Home Federal Saving & Loan
ADDRESS: 139 South Tryon St.
COUNTY:
LOCATION OF SITE: 2651 Co Fowler Ave Hy 73 *

DATE REQUESTED: 7-31-79
PLAT NO.:
LOT SIZE: .5

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U — 2-10	S PS U	S PS U	S PS U +
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, *Note 2:1 Clay)	S (PS) U — Clayey	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 in.) (Clayey Soils)	S (PS) U — Blocky	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	S (PS) U — 48	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock)	S (PS) U — NONE	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & internal)	S (PS) U — Adequate	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) U — Moderate	S PS U	S PS U	S PS U
8. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	Provisionally Suitable			

SOIL SERIES: Cecil

S - Suitable PS - Provisionally Suitable U - Unsuitable

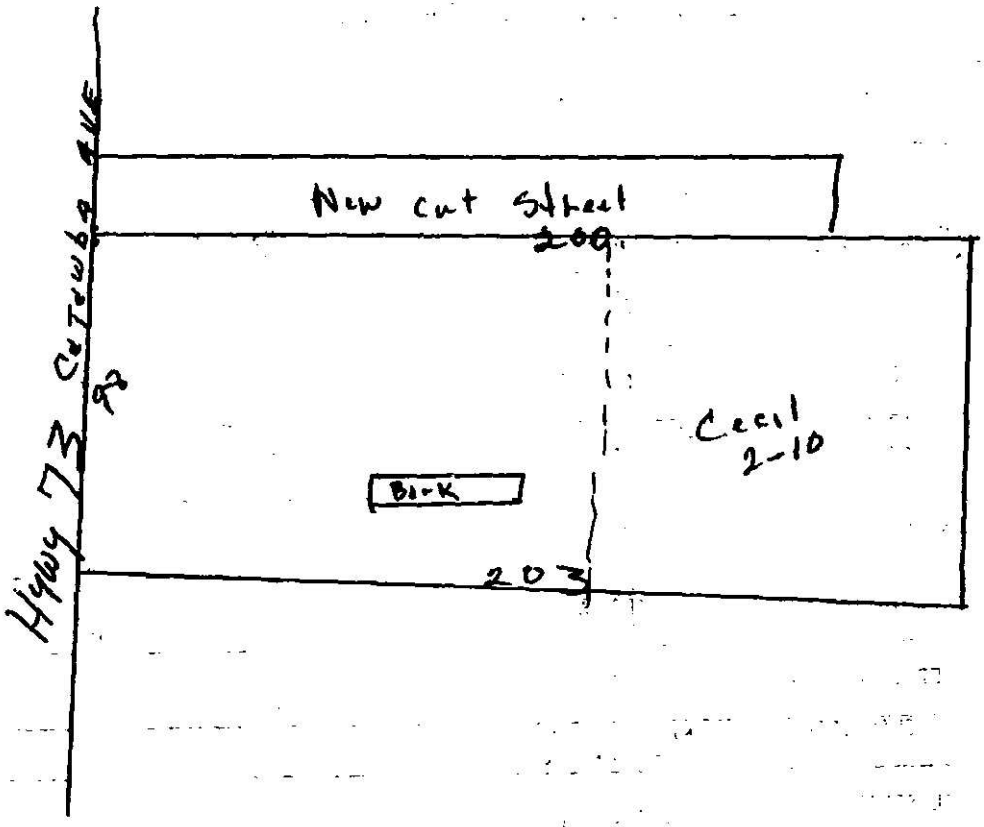
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc.

Recommendations/Comments:

Described By: W. B. Ramsey

Title: Soil Scientist Date: 8-7-79

DHS Form 2601
Sanitation
EHD 539 (3/79)


Highway 73 Catawba Ave
New cut Street
209
203
Cecil
2-10
Brick

Serial No. 3028

PTR No. 16010

Date Issued August 8, 1979

T. C. No. 003-191-05

Map Date

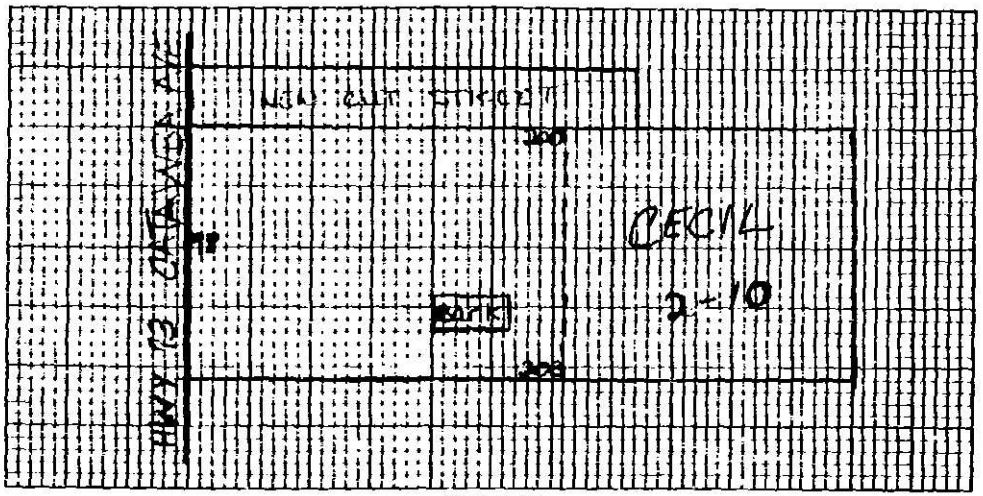
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER (LAST) Home (FIRST) Federal Savings and Loan Association (MIDDLE)

ADDRESS OF OWNER 139 South Tryon St., Charlotte ZIP 28202

LOCATION OF PROPERTY 2651 Catawba Avenue (STREET OR COUNTY ROAD) (off Highway 73)

SUBDIVISION LOT NO. BLOCK NO.



PLOT PLAN

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

The permeability rate determined by the investigation was **Provisionally Suitable**. 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 to install, construct, alter, or repair the specific system shall be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction of buildings, or of the wastewater treatment system on 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 prior to installation based on the permeability rate obtained above, and on the size and type of building constructed thereon.
3. This approval is valid only if the system is installed in the immediate area indicated as acceptable for system installation on the above plot.
4. This approval is void if any grading, filling, 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 for 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 newer revised laws, rules and regulations been in effect on the issue date.

W. B. Ramsay
Soil Scientist

John R. Adkisson
Environmental Health Director or Authorized Section Head

EHD-5-74

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 8/8/79

ICAR(S) Application No. 16010

T. C. No. 003-191-05

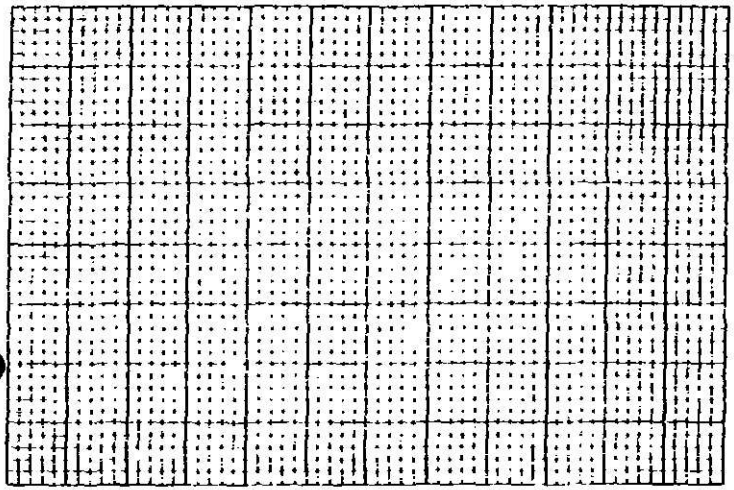
Map Date

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 0

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 Home Federal Saving & Loan
(LAST / FIRST / MIDDLE)

14) ADDRESS OF OWNER 139 South Tryon St.

15) PHONE NO. Home 372-0400 Office SAME

16) LOCATION OF SYSTEM 20651 Catawba Ave (Hiway) 73.
(STREET OR COUNTY ROAD)

17) SUBDIVISION ___ 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 8/8/79

20) PTR NUMBER (See Instructions) 16010

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.

8-8-79.
DATE OF APPLICATION

Jerry U. Lewis
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 3364

LA No. 16010

Date Issued August 9, 1979

T. C No. 003-191-05

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 Home Federal Savings and Loan Association
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 139 South Tryon Street, Charlotte ZIP 28202

LOCATION OF LOT 2651 Catawba Avenue
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. _____ 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 16010 — 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 A. Sexton
Environmentalist

John R Atkisson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

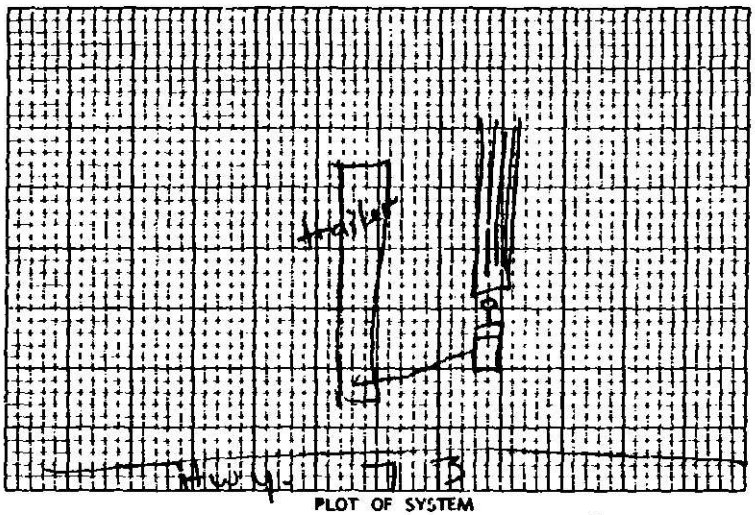
Date Issued 8-9-79 **Serial** 3098 ICAR(S) Permit No. 16010 ✓

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 16010, dated 8-8-79 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 11-9-79, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1000 gallons

Tank Construction P/C

Absorption and/or Nitrification Lines

Total Line Length 220'

Number of Lines 3

Distance from House 10'

Distance from Property Line 10'

Distance from Well _____

NAME OF OWNER Home Federal Savings + Loan

LOCATION OF PROPERTY 20651 Catawba Avenue

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.

9'x 74'x 17" of 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.

_____ Michael A. Sexton

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-5-74

Environmental Health Department's Copy

Date Issued 8-16-79

Serial No. 2964

C of A (s) No. 16010

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 Home Federal Savings + Loan
(LAST / FIRST / MIDDLE)

Location of Property 20651 Catawba Avenue

Application Number 16010 Permit Number 16010

Inspection Data:

Liquid Capacity of Tank 1000 gallons Tank Material precast concrete

Total Length of Drain Tile 220' Number of Lines 3

Depth of Filter Material 17" Cover Depth 24"

Water Supply Source city Distance from Water Source —

Excavation Inspected — (DATE) Tank Inspected 8-16-79 (DATE)

Nitrification Field Inspected 8-16-79 (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 ____

Michael A. Sexton
Environmentalist

EHD-5-76

Environmental Health Department's Copy