Date Received 8-1-83

AUG 1 1983
ENVIRONMENTAL HEALTH

SIR No. 19922

T. C. No. PO 139-221-03

Map Date _____

# MECKLENBURG COUNTY
# DEPARTMENT OF ENVIRONMENTAL HEALTH

## APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER (LAST) ROGERS (FIRST) Fred (MIDDLE) William

2) ADDRESS OF OWNER 8630 Ira Flowe Rd ZIP 28212

3) PHONE NO Home 545-4441 Office 545-0159

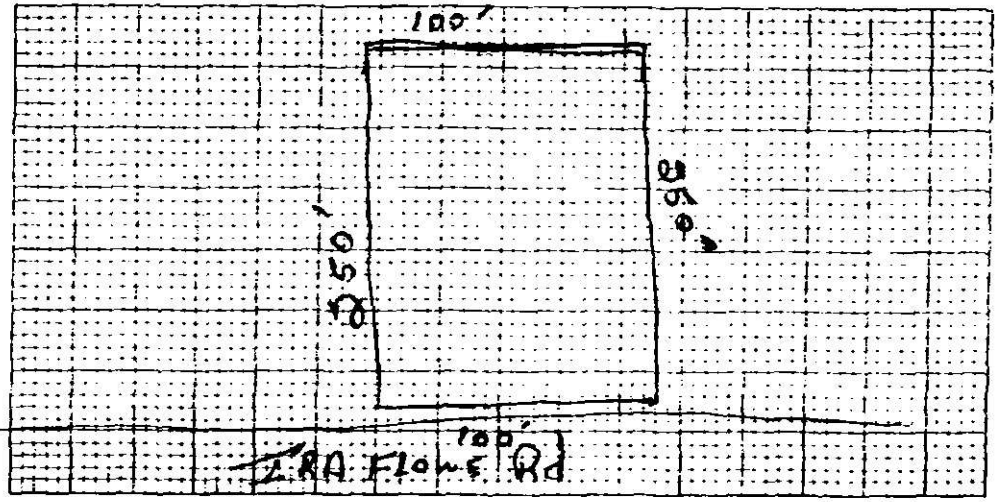
4) LOCATION OF PROPERTY Ira Flowe Rd (STREET OR COUNTY ROAD)

5) SUBDIVISION NONE LOT NO NONE BLOCK NO NONE

MAP BOOK NO 3386 PAGE NO 49

6) DEED REFERENCE DEED BOOK _____ PAGE NO _____

Application is hereb, made to the Mecklenburg Count. 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

Fred W Rogers
OWNER

EHD-5-76

Environmental Health Department's Copy

Serial No. 5149

SIR No. 19922

T C. No. PO 139-221-03

Date Issued 8-5-83

Map Date

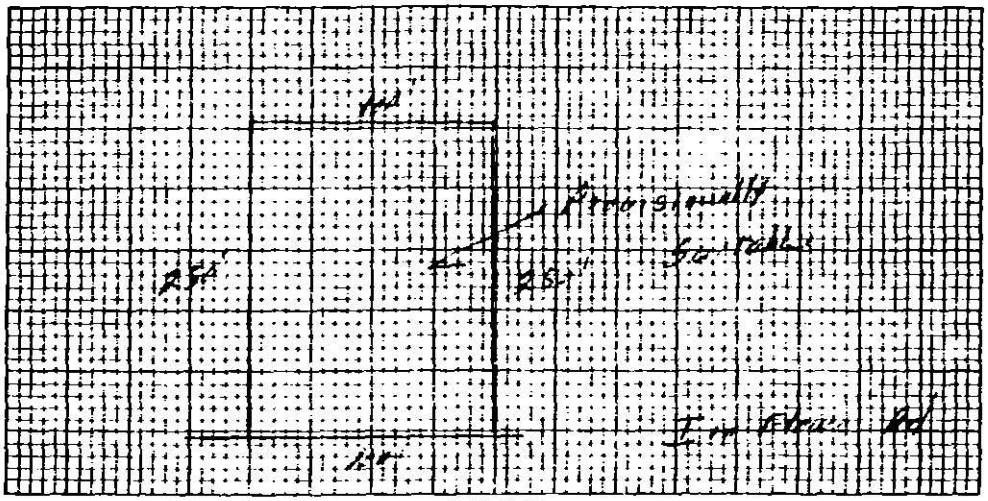
# MECKLENBURG COUNTY
# DEPARTMENT OF ENVIRONMENTAL HEALTH
## SOIL INVESTIGATION REPORT

NAME OF OWNER Rogers, (LAST) Fred (FIRST) William (MIDDLE)

ADDRESS OF OWNER 8630 Ira Flowe Road, Charlotte, NC ZIP 28212

LOCATION OF PROPERTY Ira Flowe Road (STREET OR COUNTY ROAD)

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 **Provisionally Suitable**

The permeability rate determined by the investigation was _____ 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 new or revised laws, rules, and regulations been in effect on the issue date.

William R. Markin Jr.
EHD-S-76 Soil Scientist
W.B. Hawley

Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 19922

T.C. NO. PO 139-221-03

(Ground Absorption Sewage Disposal)

OWNER: Fred Rogers
ADDRESS: 8630 Tte Flower Rd 28212
LOCATION OF SITE: Tte Flower Rd

PLAT NO:
LOT SIZE: 25,000 .58

| FACTORS | AREA 1 | AREA 2 | AREA 3 | AREA 4 |
|---|---|---|---|---|
| 1. SLOPE (%) | S (PS) U — 2-4 | 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 — Clayey | S PS U | S PS U | S PS U |
| 3. SOIL STRUCTURE (12-36 inches) | S (PS) U — Blocky | S PS U | S PS U | S PS U |
| 4. SOIL DEPTH (inches) | S (PS) U — 48" | S PS U | S PS U | S PS U |
| 5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock) | S (PS) U — None | S PS U | S PS U | S PS U |
| 6. SOIL DRAINAGE/GROUNDWATER (external and internal) | S (PS) U — Adequate | 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 — IIa

9. SITE CLASSIFICATION — P. suitable

10. SOIL SERIES — Cecil

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)

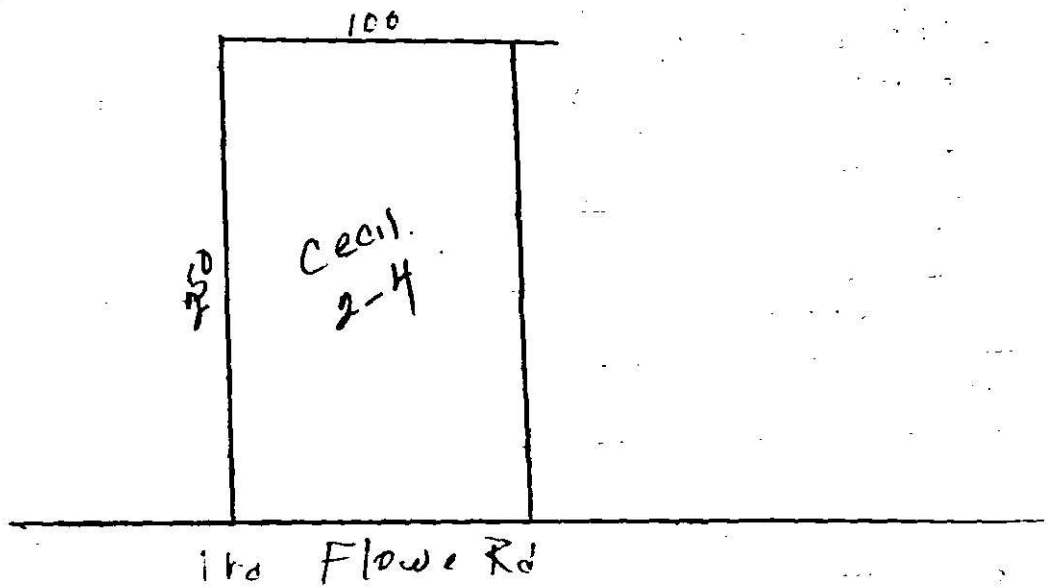
Recommendations/Comments:

Described by: W. B. Ramsey
Title: Soil Scientist

Date: 8-3-83

EHD 539 (Revised: 6/82)

H


100
250
Cecil
2-4
1 Rd Flower Rd

Date Received 6-25-84

RECEIVED
SEE INSTRUCTIONS ON BACK
JUN 25 1984

CAR(S) Application No. 19922

T. C. No. PO 199-221-05

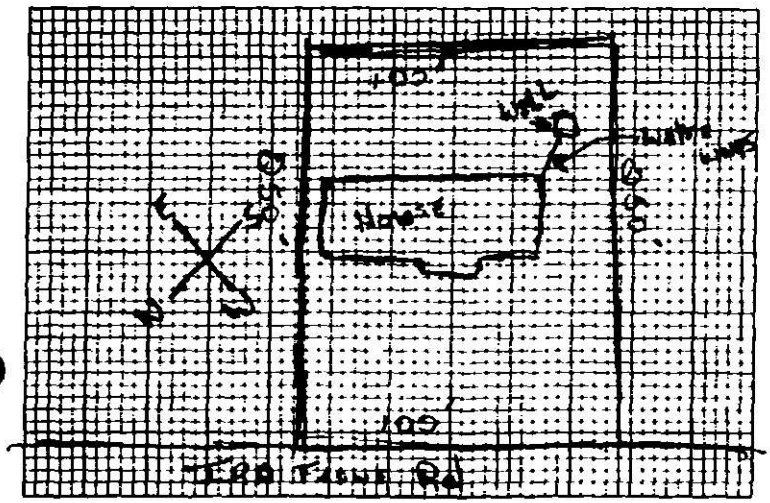
Map Date L

# 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 X Yes ____ No
4) No of Bedrooms THREE
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 ____
10) Sewage System
House located within 200 feet of public sewer ____ Yes X No
House located within 200 feet of community sewer ____ Yes X No
11) FHA Case No NONE
12) VA Case No NONE

13) NAME OF OWNER RONALD (1st) ROGERS (last) ALAN (middle)

14) ADDRESS OF OWNER 8630 IRA FLONE Rd 28212

15) PHONE NO. Home 545 4441 Office 376-9181

16) LOCATION OF SYSTEM 8640 IRA FLONE RD.
STREET OR COUNTY ROAD

17) SUBDIVISION NONE Lot No. NONE Block No. NONE

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES ____ NO DATE RUN 8-5-83

20) PTR NUMBER (See Instructions) 19922

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.

6/22/84
DATE OF APPLICATION

Ronald A Rogers
OWNER

EHB-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued 7-5-84

Serial No. 7652

SIR No. 19922

T C. No. PO 139-221-03

Map Date L CRT

# MECKLENBURG COUNTY
# DEPARTMENT OF ENVIRONMENTAL HEALTH

IMPROVEMENT PERMIT

**TO THE BUILDING INSPECTION DEPARTMENT**

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Rogers, (LAST) Ronald (FIRST) Alan (MIDDLE)

ADDRESS OF OWNER 8630 Ira Flowe Rd., Charlotte, NC ZIP 28212

LOCATION OF LOT 8640 Ira Flowe Road (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 19922. 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.

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued 7-3-84

Serial No. 7648

SIR No. 19922

T. C. No. PO 139-221-03

Map Date L CRT

# MECKLENBURG COUNTY
# DEPARTMENT OF ENVIRONMENTAL HEALTH

IMPROVEMENTS PERMIT

**TO THE BUILDING INSPECTION DEPARTMENT**

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Rogers, (LAST) Ronald (FIRST) Alan (MIDDLE)

ADDRESS OF OWNER 8630 IRA Flowe Rd., Charlotte, NC ZIP 28212

LOCATION OF LOT 8640 Ira Flowe Road (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 19922 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.

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-S-76

**Environmental Health Department's Copy**

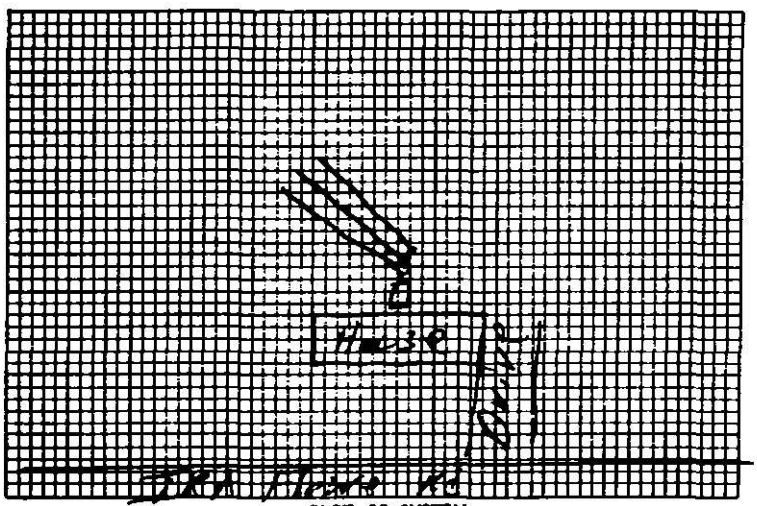
Date Issued 9-27-84 Serial No. 07591 ICAR (S) Permit No. 19922

T. C. No. 139-221-03

Map Date L

# 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 19922, dated 6-22-84 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 10-26-84, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate IV-G

Liquid Capacity of Tank 1500 gl

Tank Construction PCC

Absorption and/or Nitrification Lines:

Total Line Length 300'

Number of Lines Three

Distance from House 5'

Distance from Property Line 10'

Distance from Well 50'

NAME OF OWNER Rogers, Ronald

LOCATION OF PROPERTY 4640 IRA Flowe Rd.

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.

Three Trenches of 100' X 3' X 12' Stone

Comments:

B. Hardin
Division or Section Head

Tim Ericson
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.

BHD-5-76

Environmental Health Department's Copy

C of A (s) No. 19922

Date Issued 9-27-84 **Serial** 6994 T C No. 139-22/03 L CRT

# 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 Rogers (LAST) Ronald (FIRST) (MIDDLE)

Location of Property 8640 IRA Flowe RL

Application Number 19922 Permit Number 19922

**Inspection Data:**

Liquid Capacity of Tank 1500 Tank Material PVC

Total Length of Drain Tile 300' Number of Lines Three

Depth of Filter Material 12" Cover Depth 12" to 24"

Water Supply Source well Distance from Water Source 50'

Excavation Inspected 9-27-84 (DATE) Tank Inspected 9-27-84 (DATE)

Nitrification Field Inspected 9-27-84 (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 ____

Jim Tinsley

Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY