Date Received 2-11-74

APT No. 7474

T C No 134-126 S-2

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Hurlocker, (LAST) Thelma (FIRST) ~~Bobby~~ B. (MIDDLE)

2) ADDRESS OF OWNER Route 1, Blair Road, Charlotte, N.C. ZIP 28212

3) PHONE NO Home Office 537-9228

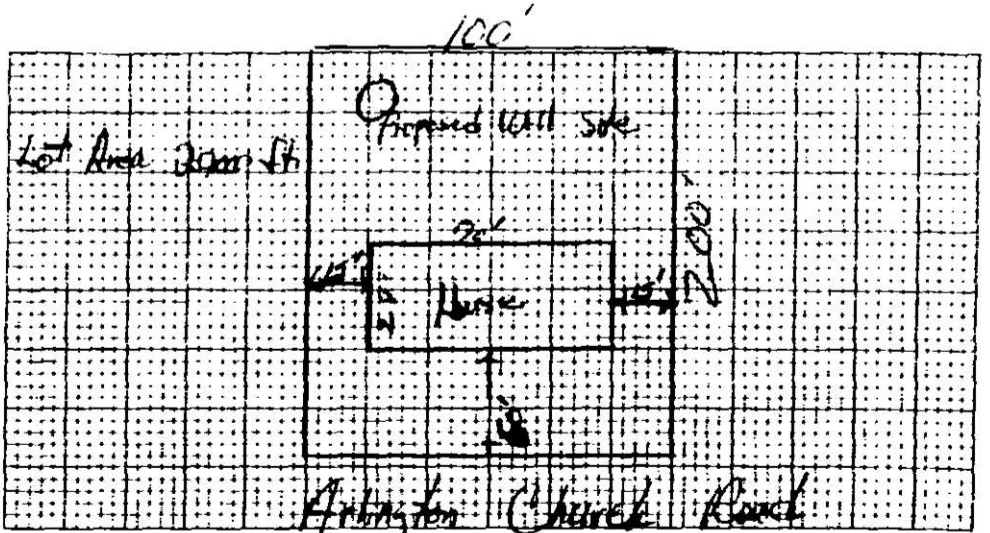
4) LOCATION OF PROPERTY Arlington Church Road (STREET OR COUNTY ROAD)

5) SUBDIVISION Arlington Forrest LOT NO 2 BLOCK NO. 8

MAP BOOK NO 10 PAGE NO. 139

6) DEED REFERENCE DEED BOOK 3200 PAGE NO 95

Application is hereby made to the Mecklenburg County Health Department for the conduct of a percolation test and on 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

Thelma B. Hurlocker
OWNER

FORM NO. E-1-11-1-70

HEALTH DEPARTMENT'S COPY

Serial No. 4066

PTR No 7474

Date Issued February 28, 1974

T C No 139-126-02

Map Date 1-28-74

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

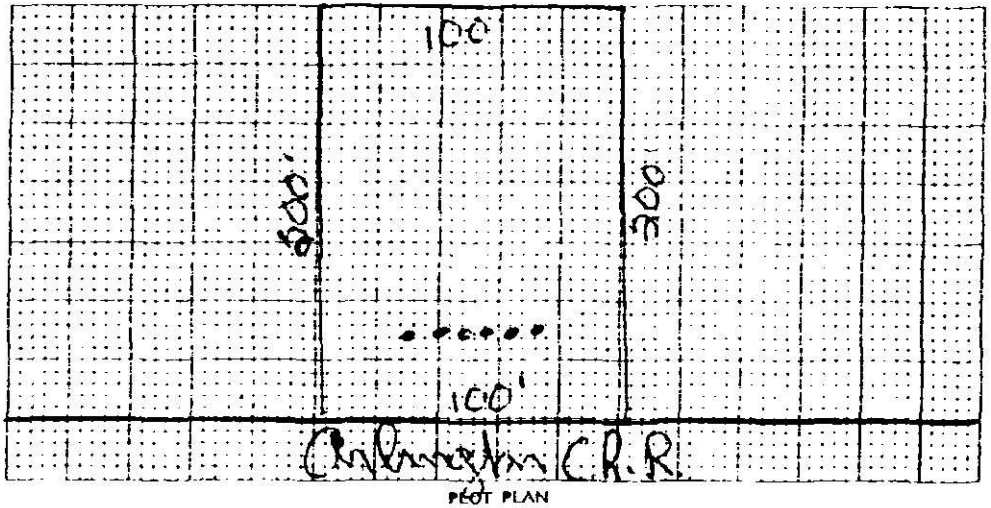
PERCOLATION TEST REPORT

NAME OF OWNER Hurlocker (LAST) Thelma (FIRST) B. (MIDDLE)

ADDRESS OF OWNER Route 1, Blair Road ZIP 28212

LOCATION OF PROPERTY Arlington Church Road (STREET OR COUNTY ROAD)

SUBDIVISION Arlington Forest LOT NO 2 BLOCK NO 8



PLOT PLAN

This is to certify that a percolation test has been run and an on-site inspection made by the Mecklenburg County Health Department on the lot described above. The said test was conducted on that portion of the lot as indicated on above plot

The percolation rate determined by the test was 50 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 to install, construct, alter or repair the specific system shall be obtained from the Mecklenburg County Health Department prior to the beginning of any construction of building, 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 Health Department prior to installation based on the percolation 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 where the percolation test was run.
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 Health Department, renders the area where the percolation test was run unsuitable for the 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 State Board of Health and the Mecklenburg County Board of Health which were in effect on the date of issuance and is void if at any time in the future, prior to the 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.

R. M. Reynolds

John R. Robinson

Director, Environmental Health Division or Authorized Section Head

FORM NO E-2-9-1-72

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 3-7-74

ICARUS Application No 7474

T C No 139-126 02

Map, Page 128 74

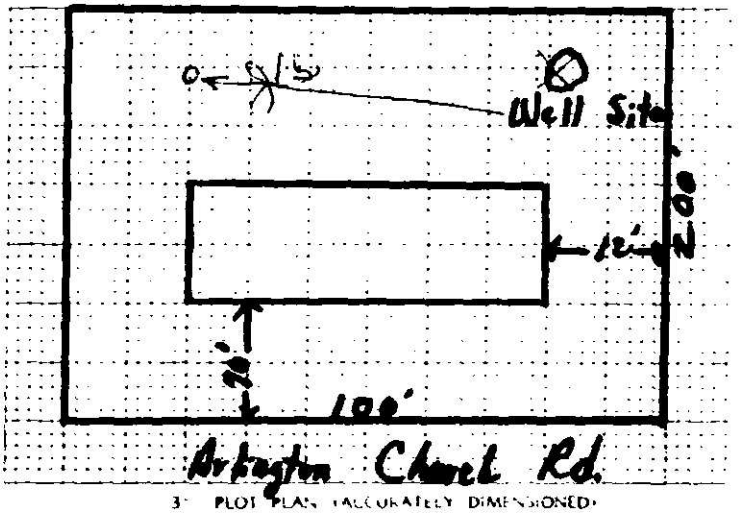
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

Application for an
Installation, Construction, Alteration, and/or Repair Permit
Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge

The owner of that or parts described hereinafter hereby applies to the Mecklenburg County Health Department for a permit to:

1 [X] 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)

3

[X]

[X] No

[X] No

[X]

[X]

Yes [X] No

13) NAME OF OWNER **Huntley Bros., Inc.**
LAST FIRST MIDDLE

14) ADDRESS OF OWNER **Rt. 1 Box 430-D Charlotte, N.C. 28212**

15) PHONE NO Home _____ Office **545-5109**

16) LOCATION OF SYSTEM **Arlington Church Rd.**
STREET OR COUNTY ROAD

17) SUBDIVISION **Arlington Forest** Lot No **2** Block No **B**

Map Book No **10** Page No **139**

18) DEED REFERENCE -- DEED BOOK **3200** AT PAGE **95** PR 50

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES _____ NO DATE RUN 2 28 74

20) PTR NUMBER See Instructions 7474

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 hereunder shall be void and of no effect if any of the above facts are not true.

March 6, 1974
DATE OF APPLICATION

OWNER Huntley Bros., Inc.
By Clarice C. Huntley

REV. 12 E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3885

LA No 7474

Date Issued March 7, 1974

T C No 139-126-02

IMPROVEMENTS PERMIT

Map Date 1-28-74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Huntley Bros., Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER Route 1, Box 430-D ZIP 28212

LOCATION OF LOT Arlington Church Road
(STREET OR COUNTY ROAD)

SUBDIVISION Arlington Forest LOT NO 2 BLOCK NO B

MAP BOOK NO PAGE NO

The above specified lot is approved by the Mecklenburg County Health Department for the installation of an individual septic tank system with subsurface, soil absorption effluent discharge based on the percolation test results which yielded a percolation rate of 50 min/in 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 7474. 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 percolation test 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

C. M. Reynolds
Environmentalist

John R. Robinson
Director Environmental Health Division or Authorized Section Head

FORM NO E-3-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 16 May 74 Serial No. [illegible] ICAR(S) Permit No. 7474

T C No. 139-136 07

Map Date 1-28-74

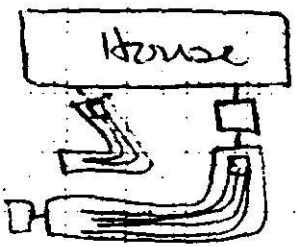
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

Permission is hereby granted to ✓ Install or Construct / Alter or Repair the [illegible] septic tank waste water treatment [illegible] with subsurface soil absorption effluent discharge [illegible] This permit is granted based upon the information supplied on application No. 7474 [illegible] septic tank location noted [illegible] This permit shall be void and of no effect if the [illegible] system is not completed and in operation prior to 16 June 74 [illegible] Date this permit is issued and void.



Arlington Ch Road

Proposed Number of Bedrooms 50

Septic Tank Size and Type 1500 gal Precast Concrete

Absorption Area [illegible]

Trench Size 540' @ 150'

Type Distribution Box (5) 12" x 58" 68' @ 17" stone 20' @ 34" stone

Distance from Well 10'

Distance from Property Line 10'

Distance from Stream 100'

NAME OF OWNER Huntley Bros

LOCATION OF PROPERTY Arlington Ch. Road

This system must be installed in accordance with the minimum requirements as set forth in the Regulations of the Mecklenburg County Board of Health which were in effect on the date of the granting of this permit. A permit to operate must be issued by the Health Director before any system can be covered or otherwise rendered uninspectable or can be used.

Comments washer line 7½' x 50'
aeration pit 24½ x 7' x 4' stone

G. M. Reynolds
Environmentalist

Director of Environmental Health

If this permit is for the installation or construction of a new system, it must be understood that the department or a representative of the Health Department will be notified by the owner or his agent at the following stages of construction: when the excavation is complete and before any stone is placed in the trench; when the stone is in place and before the trench is backfilled; when an existing system is being altered or repaired.

E-5-9-1-72

Date Issued 17 May 74 Serial 4936 C of A (s) No. 7474

T C No 139-12607

Map Date 1-28-74

CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Hinshley Bros, Inc. (LAST, FIRST)

Location of Property Arlington Church (NUMBER) Road

Application Number 7474 Permit Number 7474

Inspection Date:

Liquid Capacity of Tank 1500gal Tank Material Precast Concrete

Total Length of Drain Tile 540' & 150' Number of Lines (5) 12½' 58' (68' at 17" stone 20' at 34" stone)

Depth of Filter Material 17" Cover Depth 17"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 17 May 74 Tank Inspected 17 May 74 (DATE)

Nitrification Field Inspected 17 May 74 (DATE)

Washing Machine Line Inspected, If Applicable 17 May 74 (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 Board of Health 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. aeration pit O.K.

G M Reynolds

Environmentalist

FORM NO. E-6-4-1-71

HEALTH DEPARTMENT'S COPY