Date Received 6-7-74

Application No. 6033

T. C. No. 111-161-08

Map Date 9-1-70

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Jackson (LAST) Herbert (FIRST) Howes (MIDDLE)

ADDRESS OF OWNER 1558 Lakedell Dr. ZIP _____

PHONE NO. Home 536-4749 Office 374-2584

LOCATION OF PROPERTY 7123 Cedarbrook Drive (STREET OR COUNTY ROAD)

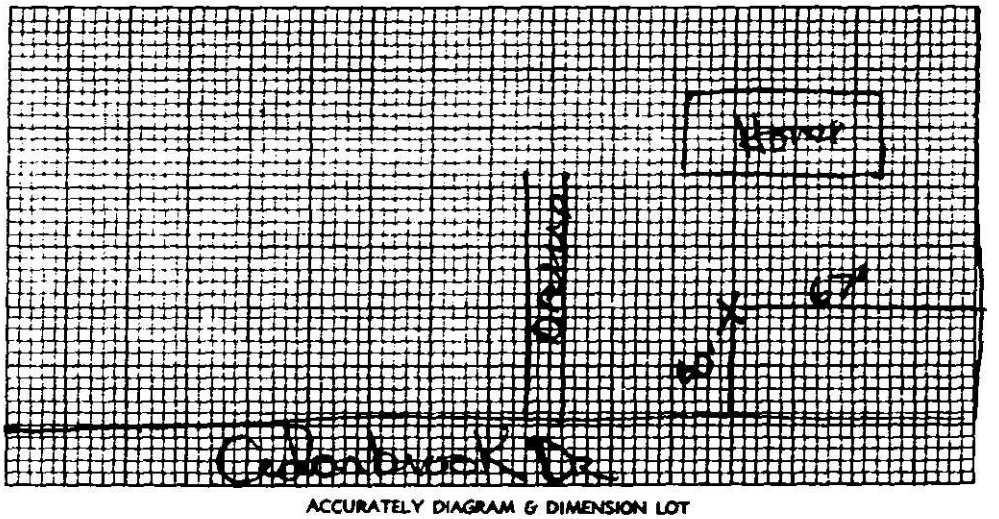
SUBDIVISION Cedarbrook Acres LOT NO. 76+77 BLOCK NO. A

MAP BOOK NO. _____ PAGE NO. _____

DEED REFERENCE: DEED BOOK _____ PAGE NO. _____

WELL CONTRACTOR _____ LICENSE NO. _____

Application is hereby made to the Mecklenburg County Health Department for a permit to drill a water well on the hereinabove described lot to be used as a source of X individual, _____ semi public, or _____ public water supply:



ACCURATELY DIAGRAM & DIMENSION LOT

6-7-74
DATE OF APPLICATION

Herbert J. Jackson
OWNER

Application approved and permit hereby granted

Permit No: 6033

R. M. Reynolds
ENVIRONMENTALIST

FORM NO. E-20-8-1-72

HEALTH DEPARTMENT'S COPY

Date Received 4-17-73 APT No. 6033

T C No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Norman Construction Co.
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER 1709 E. Independence Blvd ZIP 28205

3) PHONE NO. Home — Office 332-7713

4) LOCATION OF PROPERTY Lots 76 & 77 - Cedarbrooke Dr.
(STREET OR COUNTY ROAD)

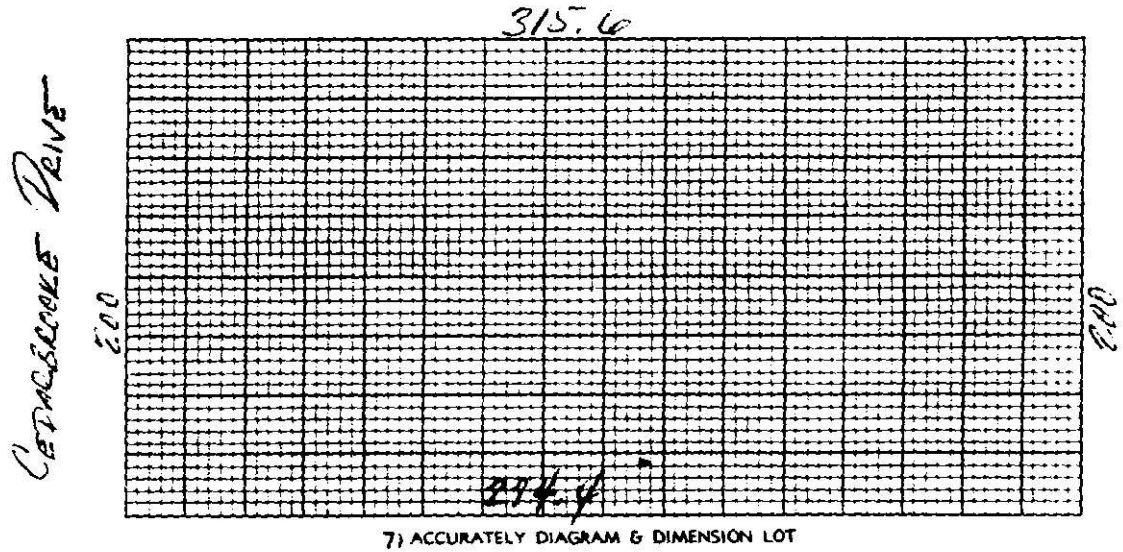
5) SUBDIVISION Cedarbrooke Acres LOT NO. 76, 77 BLOCK NO. A

MAP BOOK NO. 70-1-701 PAGE NO.

6) DEED REFERENCE: DEED BOOK 3135-347 PAGE NO.

Tax Parcel No. 111-161-08 - 2.04 ± Tax Value

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

Jerry A. Norman
OWNER

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

HEALTH DEPARTMENT'S COPY

MECKLENBURG COUNTY
Department of Public Health
1200 Blythe Boulevard
Charlotte, North Carolina 28203

Telephone 374-2113

Date Issued
1. April 26, 1973
2. _____
3. _____

SITE DISAPPROVAL REPORT
INDIVIDUAL SEPTIC TANK SYSTEM WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

SDR No. 6033
T.C. No. 111-161-08
9-1-70

NAME OF OWNER Norman Construction Company

ADDRESS OF OWNER 1705 East Independence Blvd. ZIP 28205

LOCATION OF LOT Cedarcrest Drive, Lots 76 & 77-A

The lot described above has been disapproved for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge due to the following:

FAILURE TO PASS PERCOLATION TEST (60 minutes per inch or less)

	Test No.	Date of Test	Percolation Rate
X	1.	4-27-73	138 min/in
X	2.	5-1-73	120 min/in
____	3.	_____	_____ min/in

X ON SITE INSPECTION REVEALED LOT TO BE UNSUITABLE FOR THE FOLLOWING REASON(S) Holes less than 36 inches deep, some less than 24 inches deep.

R. M. Reynolds
Environmentalist

(Stencil No.)
EHD 398

FORM NO.

Serial No. [illegible]

PTR No. 6033

T C No. 111-161-08

Date Issued May 8, 1973

Map Date 9-1-70

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

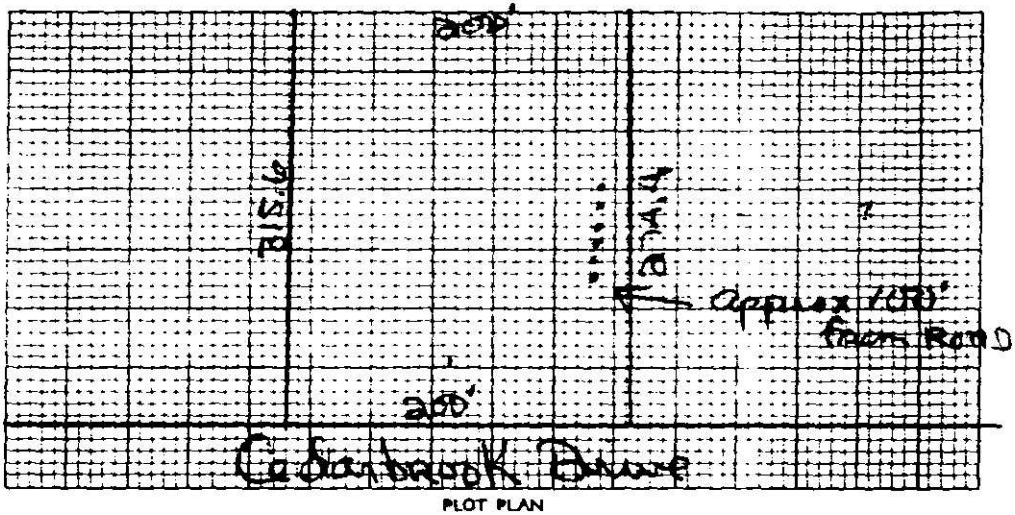
PERCOLATION TEST REPORT

NAME OF OWNER Norman Construction Company
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 1709 East Independence Blvd. ZIP 28205

LOCATION OF PROPERTY Cedarbrooke Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Cedarbrooke Acres LOT NO 76 & 77 BLOCK NO A



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 60 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 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 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.

John R. Thisson

Director, Environmental Health Division or
Authorized Section Head

FORM NO. E-2-4-1-71

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 11-13-73

ICAR (S) Application No 6033

T C No 111-161-03

Map Date 9/70

MECKLENBURG COUNTY HEALTH DEPARTMENT

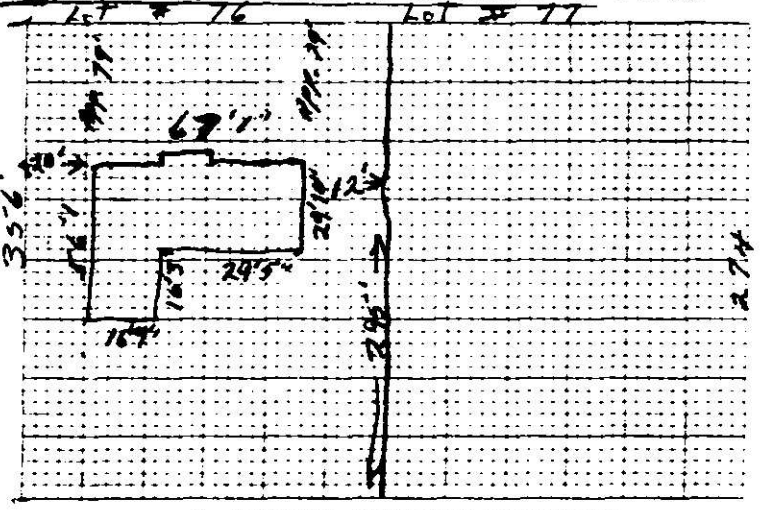
ENVIRONMENTAL HEALTH DIVISION

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

The owner of that property described hereinafter hereby applies to the Mecklenburg County Health Department 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

CEDAR BROOK DRIVE



3) PLOT PLAN (ACCURATELY DIMENSIONED)

4) No of Bedrooms 3

5) Business Use Max No Employees

6) Washing Machine ✓ Yes No

7) Garbage Disposal ✓ Yes No

8) Dishwasher ✓ Yes No

9) Water Supply
A) Individual Well ✓
B) Government
C) Community System
1) Well
2) Government

10) Sewage System
House (with 2 bdrms) connected to public sewer ✓ Yes No
House (with 2 bdrms) connected to community sewer Yes No

11) FHA Case No

12) VA Case No

13) NAME OF OWNER Jackson (LAST) Herbert (FIRST) Hames (MIDDLE)

14) ADDRESS OF OWNER 1538 Lakedell Dr. Charlotte

15) PHONE NO Home 536-4749 Office 374-5284

16) LOCATION OF SYSTEM 7123 Cedarbrook (STREET OR COUNTY ROAD) Dr.

17) SUBDIVISION Cedar Brook Lot No. 76-77 Block No A

Map Book No ~~3576~~ 7 Page No ~~92~~ 701

18) DEED REFERENCE — DEED BOOK 3576 AT PAGE 92

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ____ NO DATE RUN 5-9-73 OR 6-0

20) PTR NUMBER (See Instructions) 6033

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.

Nov-13-1973
DATE OF APPLICATION

Hubert James Jackson
OWNER

FORM NO E-4-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3613

LA No. 6033

Date Issued November 14, 1973

T. C. No. 111-161-08

Map Date 9-1-70

IMPROVEMENTS PERMIT

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 Jackson (LAST) Herbert (FIRST) James (MIDDLE)

ADDRESS OF OWNER 1558 Lakedell Drive ZIP

LOCATION OF LOT 7123 Cedarbrook Drive (STREET OR COUNTY ROAD)

SUBDIVISION Cedarbrook LOT NO. 76-77 BLOCK NO. A

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 60 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 6033. 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 on "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

G.M. Reynolds
Environmentalist

John R. Atkinson
Director, Environmental Health Division or Authorized Section Head

FORM NO. E-3-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 10 June 74 Serial No. 6999 ICARIS Permit No 6033
T C No 111-161-08
Map Date 9-1-70

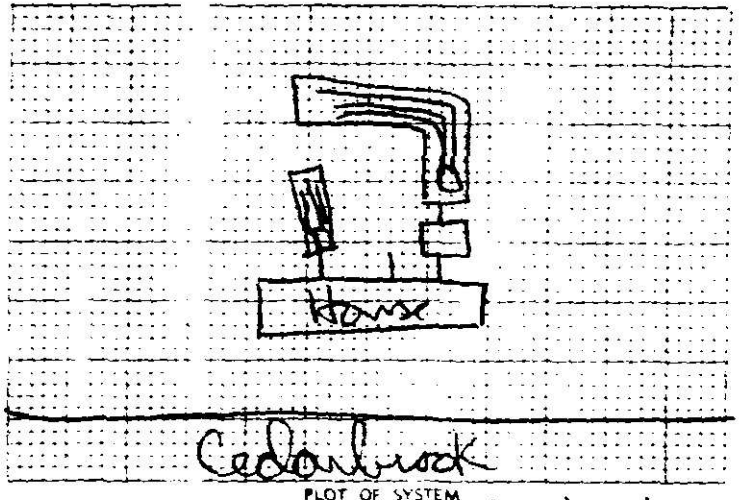
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

Permission is hereby 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 6033 dated 13 Nov 73 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 July 74, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 1500 gal

Tank Construction Cement Block

Absorption and/or Nitrification Lines

Total Line Length 600 ft @ 15' ft

Number of Lines (6) 15' x 100'

Distance from House 10'

Distance from Property Line 10'+

Distance from Well 100 ft

NAME OF OWNER Jackson, Herbert James

LOCATION OF PROPERTY 7123 Cedarbrook Dr.

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used.

Comments: washer 7½' x 50'
aeration pit 2½' x 7' x 4' stone
Tank Dimensions - Length 10'5" / width 4'0" / Liquid Depth 5'0"
Top Tank 8" below ground

Division or Section Head

R.M. Reynolds
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 Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

E-5-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 20 Sept 74 Serial No. 5268 C of A (s) No. 6033

T C. No 111-161-08

Map Date 9-1-70

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 Jackson, Herbert James (LAST, FIRST, MIDDLE)

Location of Property 7123 Cedarbrook Dr.

Application Number 6033 Permit Number 6033

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material Precast Concrete

Total Length of Drain Tile 600' & 150' Number of Lines (6) 15'4100'

Depth of Filter Material 17" Cover Depth 24"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 20 Sept 74 (DATE) Tank Inspected 20 Sept 74 (DATE)

Nitrification Field Inspected 20 Sep 74 (DATE)

Washing Machine Line Inspected, If Applicable 20 Sept 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.

R. M Reynolds
Environmentalist

FORM NO. E-6-8-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 4-16-76

Serial No. 7402

ICAR (S) Permit No. 6033

T. C. No. 111-161-03

Map Date 9-1-70

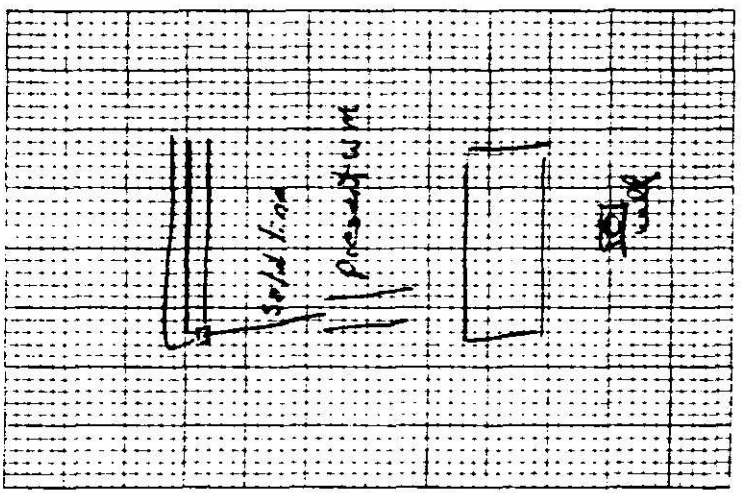
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

Permission is hereby given to ____ Install or Construct X Alter (W M) 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 _____, dated _____ 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 _____, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate REPAIR

Liquid Capacity of Tank 1 t

Tank Construction 1 t

Absorption and/or Nitrification Lines

Total Line Lenght 100'

Number of Lines 3 (7½ X 33 X 17)

Distance from House 100' ±

Distance from Property Line 10'

Distance from Well 100 ±

NAME OF OWNER HERBERT JACKSON

LOCATION OF PROPERTY 7123 CEDARBROOK DR.

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used.

Comments: _____

Division or Section Head

L R Bridgeman
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 Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

FORM NO E-5-4-2M-6-75

HEALTH DEPARTMENT COPY

Date Issued 4-16-76 Serial No. 6748 C of A (s) No. 6033

T C. No III-161-08

Map Date 9-1-70

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner JACKSON (LAST) HERBERT (FIRST) (MIDDLE)

Location of Property 7123 CED AR 300K

Application Number 6033 Permit Number 6033

Inspection Data:

Liquid Capacity of Tank REP Tank Material R

Total Length of Drain Tile 100 Number of Lines 3

Depth of Filter Material 12" Cover Depth 18"

Water Supply Source IND WELL Distance from Water Source 150'

Excavation Inspected 4-16-76 (DATE) Tank Inspected (DATE)

Nitrification Field Inspected ~~4-16-76~~ (DATE)

Washing Machine Line Inspected, If Applicable 4-16-76 (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, X 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 R. Farmer

L W Bruseman

Environmentalist

FORM NO E-6-9-1-72

HEALTH DEPARTMENT'S COPY