Date Received 5-9-84

SIR No. 21005

T. C. No. 80 001-201-05

Map Date 1978

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER MARTIN DEVELOPMENT GROUP (LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER 1800 ONE TRYON CENTER CHARLOTTE NC ZIP 28284

3) PHONE NO. Home _____ Office 332-1242

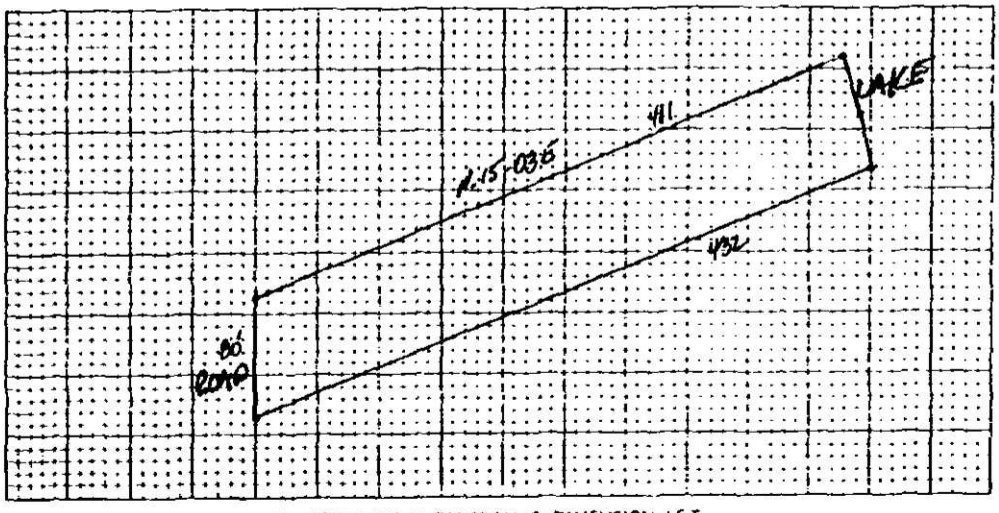
4) LOCATION OF PROPERTY NORTH POINT RD. (STREET OR COUNTY ROAD)

5) SUBDIVISION LOOKOUT POINT LOT NO [redacted]25 BLOCK NO. _____

MAP BOOK NO [redacted]1 PAGE NO [redacted] 20

6) DEED REFERENCE DEED BOOK N/A 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

Carl J McGhee
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 6479

SIR No. 21005

T C No. PO 001-201-05

Date Issued 7-31-85

Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

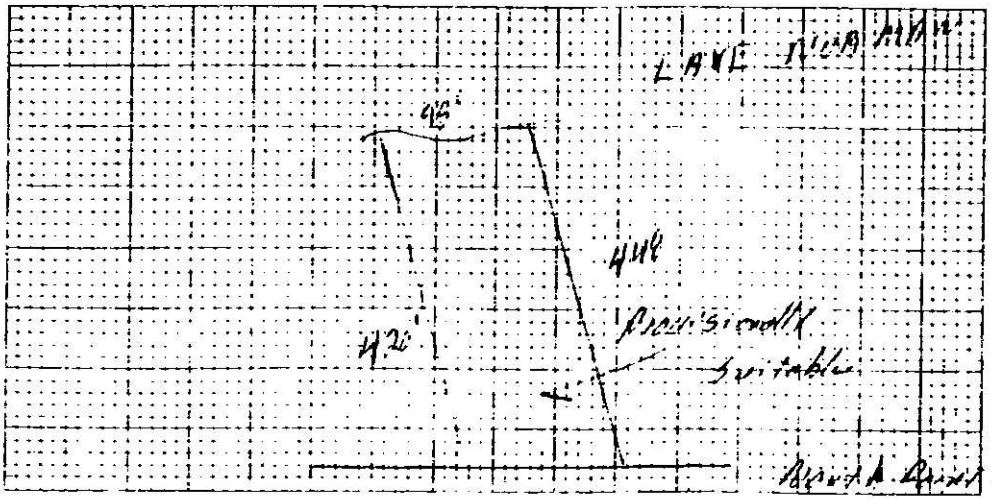
"Revised report due to lot reconfiguration"

NAME OF OWNER Martin Development Group
LAST FIRST MIDDLE

ADDRESS OF OWNER 1800 One Tryon Center, Charlotte, NC ZIP 28284

LOCATION OF PROPERTY North Point Road
STREET OR COUNTY ROAD

SUBDIVISION Lookout Point LOT NO 20 BLOCK NO



PLOT PLAN

This is to certify that [illegible] investigation and [illegible] investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The soil investigation was conducted on that portion of the lot [illegible] in the above lot.

The permeability rate determined by the investigation was PROVISIONALLY SUITABLE. The said lot is approved for the installation of [illegible] septic tank wastewater treatment system with subsurface soil absorption effluent discharge subject to the following terms and conditions:

1. [illegible] Mecklenburg County Department [illegible]
2. [illegible] Mecklenburg [illegible]
3. [illegible]
4. [illegible] Mecklenburg County Department [illegible] as acceptable for [illegible]

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 valid 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. Martin
Soil Scientist

Bill D. Hardester
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. [illegible]

T.C. NO. [illegible]

(Ground Absorption Sewage Disposal)

OWNER: [illegible] PLAT NO: [illegible]
ADDRESS: [illegible] LOT SIZE: [illegible] SC
[illegible]
LOCATION OF SITE: [illegible]

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S [illegible] PS 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 [illegible] U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S [illegible] PS U	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S [illegible] PS U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S [illegible] PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S [illegible] PS [illegible] U [illegible]	S PS U	S PS U	S PS U
7. OTHER (Specify)	S [illegible] PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	[illegible]			
9. SITE CLASSIFICATION	[illegible]			
10. SOIL SERIES	[illegible]			

S - Suitable PS - Provisionally Suitable U - Unsuitable

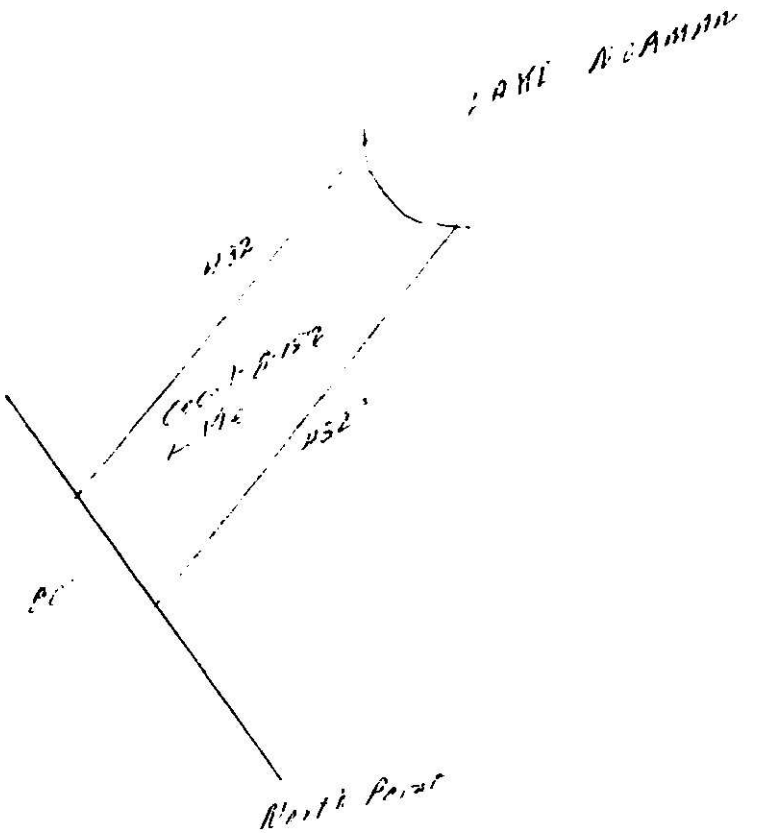
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: [illegible]

Described by: [illegible]
Title: [illegible]

Date: [illegible]

4



DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. _____

T.C. NO. _____

(Ground Absorption Sewage Disposal)

OWNER: _____ PLAT NO: _____

ADDRESS: _____ LOT SIZE: _____

LOCATION OF SITE: _____

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS 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 U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S PS U	S PS U	S PS U	S PS U
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6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S PS U	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				
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**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

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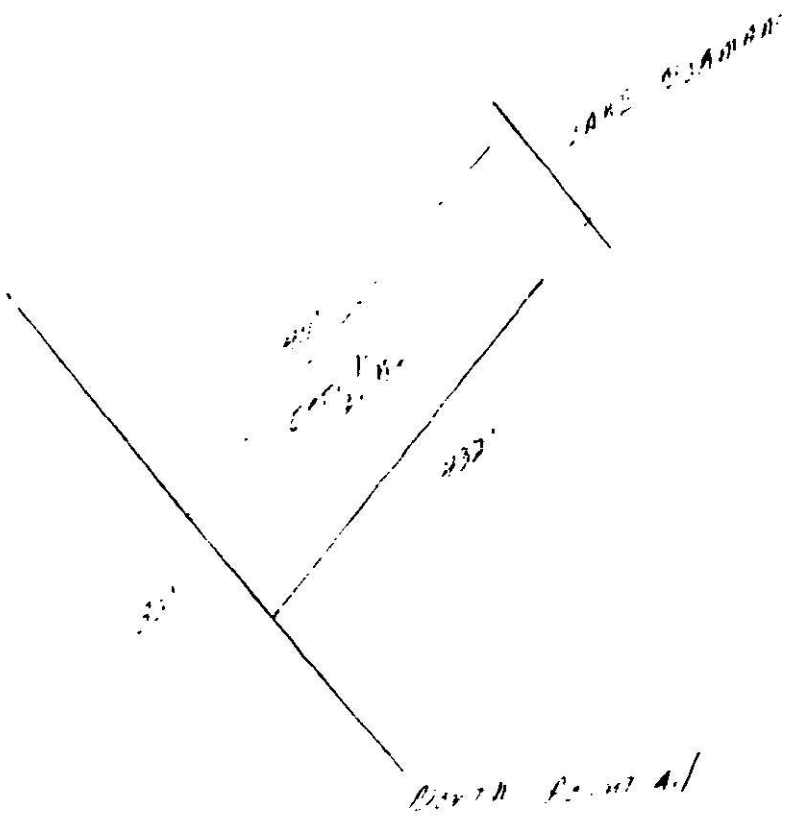
Described by: _____

Title: _____ Date: _____

4



PROPOSED PLOT PLAN

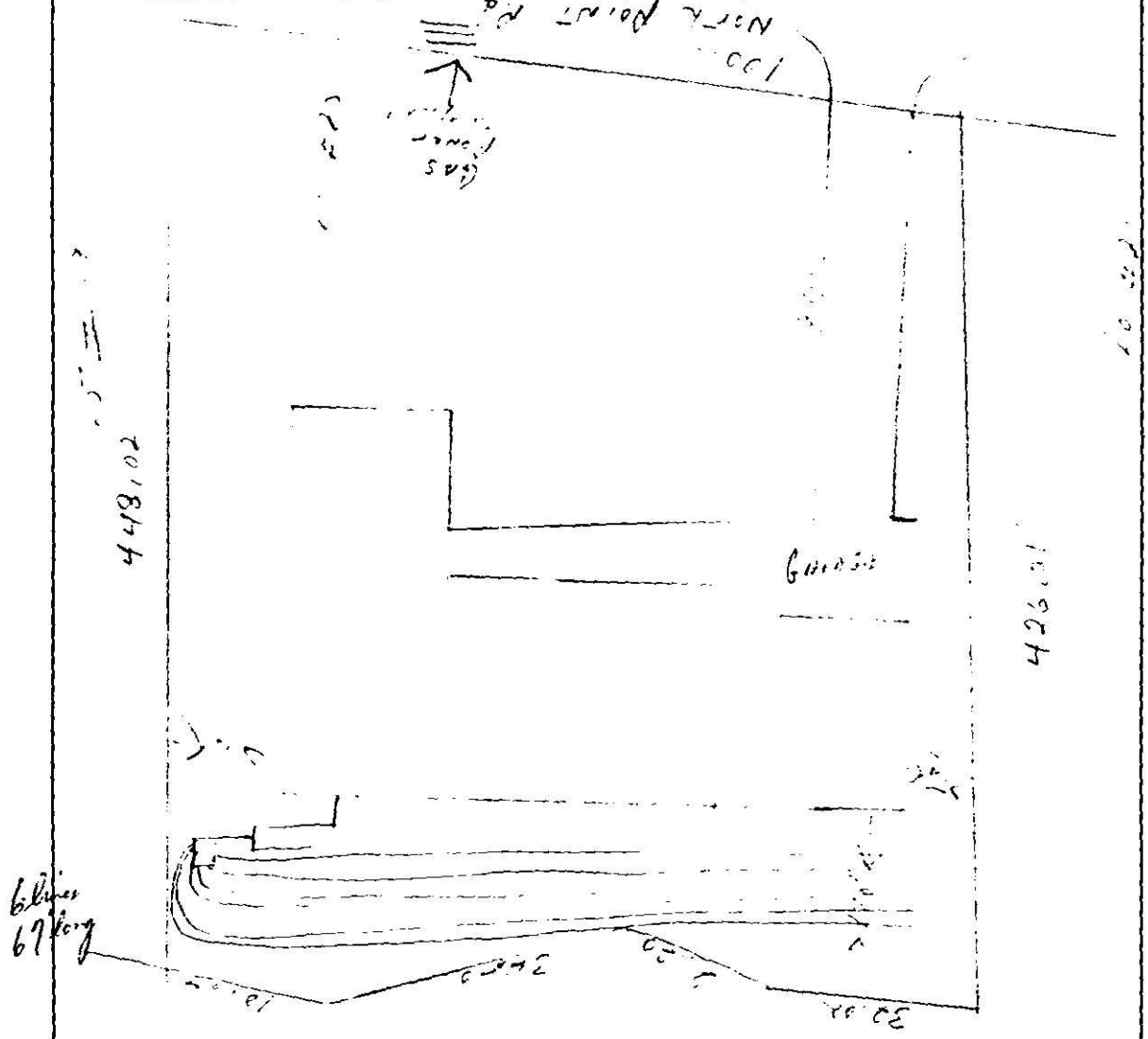
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

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

FILE: 21005

TC:

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Signed: Royce F. Wilson

Date: 2/10/82

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

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

RECEIVED
FEB 10 1987
Environmental Health

OFFICE USE ONLY
FILE: 21005
TC:
SERIAL: № 12409
☒ CRT ☐ CRT

JOB LOCATION

① ADDRESS: Lot 24 (STREET NO.) North Point Rd (STREET) ② FILE:
③ JURISDICTION Meck. ④ TAX PARCEL NO.: 021-432-28
⑤ SUBDIVISION: Lawyers Point ⑥ LOT: 24 ⑦ BLOCK:

OWNER

⑧ NAME: Boyce (FIRST) Lamp (MIDDLE) Wilson (LAST)
⑨ MAILING ADDRESS: 1130 Trilou Rd
⑩ CITY: Huntersville ⑪ STATE: NC ⑫ ZIP: 28078
⑬ PHONE: (WORK) 373 5677 ⑭ (HOME) 892 1643

REQUEST

This request is for a/an:

⑮ ☒ New permit
⑰ ☐ Authorization for mobile home exchange
⑯ ☐ Repair or alteration permit
⑱ ☐ Other (specify)

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 3
㉕ Type?
㉓ Maximum occupancy? 3
㉖ Maximum number of employees?
㉔ Basement? ☒ yes ☐ no
㉗ Maximum number of seats?

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☐ Individual well
B ☐ Municipal system
C ☒ Community well
D ☐ Community system

㉙ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Boyce L Wilson
Date: 2/9/87

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provision:

No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by this Department.

This permit is not transferable, and shall become null and void 36 months from the date of issuance.

B.R. Ferguson (Sanitarian) 2-12-87 (Date)
S.D. Conrad (Director or Authorized Section Head) 2-13-87 (Date)

*This permit must be signed by the Director of Environmental Health or an authorized section head in order to be valid.

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

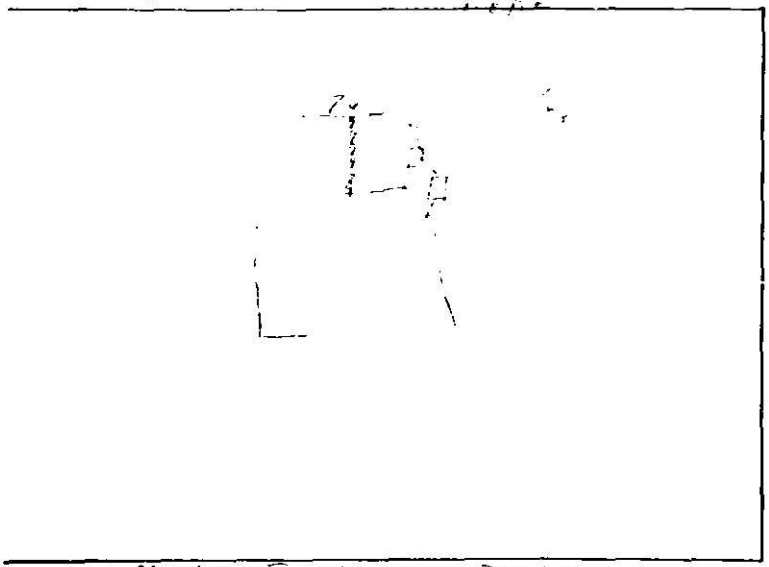
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: [illegible] DATE: [illegible]

TC: [illegible]

SERIAL № 10803

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 [illegible]. All work shall be completed on or before [illegible] 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.



Liquid Capacity of Septic Tank [illegible] gallons

Liquid Capacity of Dosing Tank [illegible] gallons

Tank Construction [illegible]

Absorption and or Nitrification Lines:

Trench Width [illegible] feet

Total Line Length [illegible] feet

Number of Lines 7

Depth of Stone [illegible] inches

Distance from House [illegible] feet

Distance from Property Line [illegible] feet

Distance from Well [illegible] feet

North PLOT OF SYSTEM ROAD

NAME OF OWNER [illegible]

LOCATION OF PROPERTY [illegible]

Comments: 4 Bedroom House plan

[illegible]
Division or Section Head

[illegible]
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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 4005 DATE: 4-30-87
TC: 001-432-28 ☐ L ☑ CRT
SERIAL № 10131

Name of Owner Boyce Wilson Juris.:
Address of Property 16216 North Point Rd

Inspection Data:

Tank Material PCC
Total Length of Drainfield 532
Number of Lines 7 @ 76'
Cover Depth 15"-21"
Water Supply Source Comm
Distance to Water Source -
Excavation Inspected 4-30-87
Tank(s) Inspected 4-30-87
Wash Line Inspected
High Water Alarm Inspected

PLOT

Design: 1987, 1500ST, CON, 1596SFT, 12G, Cecil CTR# 121

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☑ installed or constructed ☐ altered or repaired
☑ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The issuance of this

☑ Certificate of Completion ☐ Operation Permit

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 document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 10 NCAC 10A .1900 in addition to those listed below under "COMMENTS." This document 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 Installed as permitted 4 bedroom

B.R. Ferguson
Environmentalist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.