Date Received 8 Apr 77

Application No. 15518

T. C. No. 197-073-04

Map Date _____

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Roberts Dev & Const Inc
(LAST) (FIRST) (MIDDLE)

ADDRESS OF OWNER 3801 Lawyers Rd. ZIP 28211

PHONE NO. Home 364-4561 Office 364-4561

LOCATION OF PROPERTY 6933 Fieldcrest Lane
(STREET OR COUNTY ROAD)

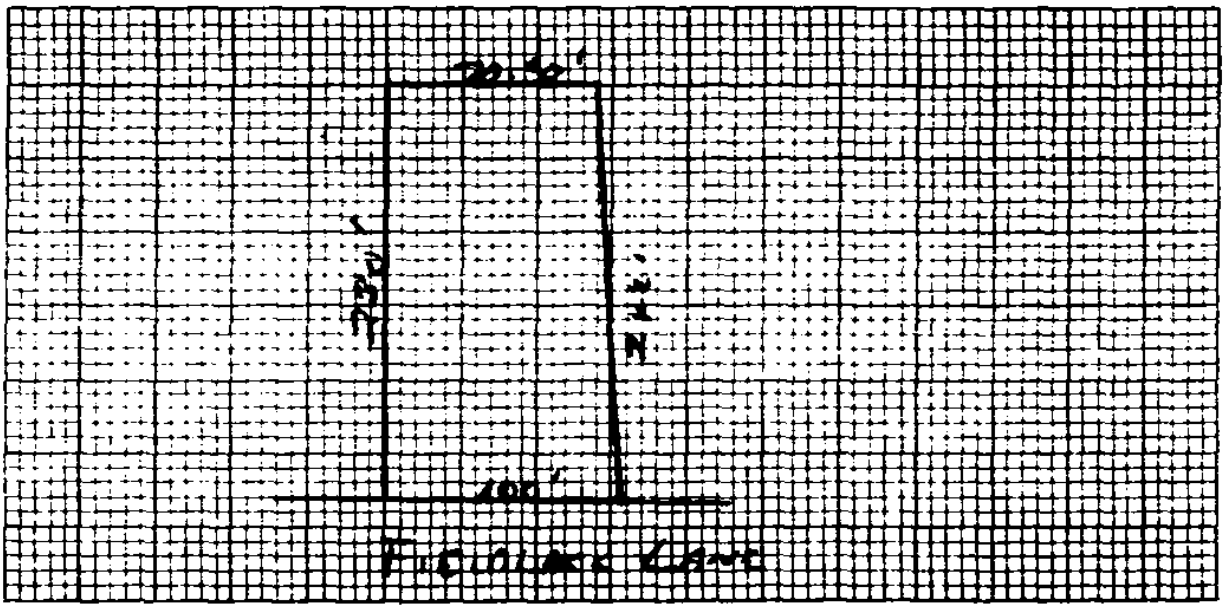
SUBDIVISION Fieldcrest Trails LOT NO. 4 BLOCK NO. 5

MAP BOOK NO. _____ PAGE NO. _____

DEED REFERENCE: DEED BOOK _____ PAGE NO. _____

WELL CONTRACTOR Carolina Well 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 ✓ individual, _____ semi public, or _____ public water supply:



ACCURATELY DIAGRAM & DIMENSION LOT

3/23/77
DATE OF APPLICATION

~~REALTY FUND, INC.~~ Roberts Dev & Const Inc.
OWNER

Application approved and permit hereby granted

Permit No: _____

_____
ENVIRONMENTALIST

FORM NO. E-28-8-1-72

HEALTH DEPARTMENT'S COPY

NORTH CAROLINA DEPARTMENT OF NATURAL AND ECONOMIC RESOURCES
DIVISION OF ENVIRONMENTAL MANAGEMENT
GROUNDWATER SECTION
P.O. BOX 27687 - RALEIGH, N.C. 27611

WELL RECORD

DRILLING CONTRACTOR _____ REG. NO. _____ WELL CONSTRUCTION PERMIT NO. _____

1. WELL LOCATION: (Show sketch of the location below)
Nearest Town: _____ County: _____
_____ Quadrangle No. _____
(Road, Community or Subdivision and Lot No.)

2. OWNER: _____

3. ADDRESS: _____

4. TOPOGRAPHY: draw, valley, slope, hilltop, flat (circle one)

5. USE OF WELL: _____ DATE: _____

6. DOES THIS WELL REPLACE AN EXISTING WELL? _____

7. TOTAL DEPTH: _____ RIG TYPE OR METHOD: _____

8. FORMATION SAMPLES COLLECTED: YES _____ NO _____

9. CASING:

	Depth From	to	ft	Inside Dia.	Wall thick. or weight/ft.	type

10. GROUT:

	Depth From	to	ft	Material	Method

11. SCREEN:

	Depth From	to	ft	Dia.	Type & Opening

12. GRAVEL:

	Depth From	to	ft	Size	Material

13. WATER ZONES (depth): _____

14. STATIC WATER LEVEL: _____ ft. above / below top of casing
Casing is _____ ft. above land surface ELEV: _____

15. YIELD (gpm): _____ METHOD OF TESTING: _____

16. PUMPING WATER LEVEL: _____ ft after _____ hours
at _____ gpm.

17. CHLORINATION: Type _____ Amount _____

18. WATER QUALITY: _____ TEMPERATURE (°F) _____

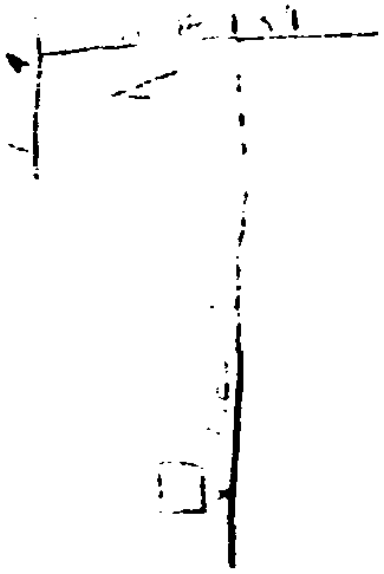
19. PERMANENT PUMP: Date Installed _____
Type _____ Capacity _____ (gpm) HP _____
Make _____ Intake Depth _____
Airline Depth _____

DRILLING LOG

DEPTH FROM	TO	FORMATION DESCRIPTION

If additional space is needed, use back of form

LOCATION SKETCH
(Show distance to numbered roads, or other map reference points)



20. HAS THE OWNER BEEN PROVIDED A COPY OF THIS RECORD AND INFORMED OF THE DEPARTMENTS REQUIREMENTS AND RECOMMENDATIONS? _____

21. REMARKS _____

I do hereby certify that this well was constructed in accordance with N.C. Well Construction Regulations and Standards and that this well record is true and exact.

_____
SIGNATURE OF CONTRACTOR OR AGENT DATE

Form GW-1 Revised 10/1/76 Submit one copy to Groundwater Section and one to owner

Date Received 9/15/76

APT No. 1378

T. C. No. 197-073-04

Map Date 6-29-76

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Realty Fund, Inc
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER PO Box 25884 Chas NC ZIP 28212

3) PHONE NO. Home — Office 5683473

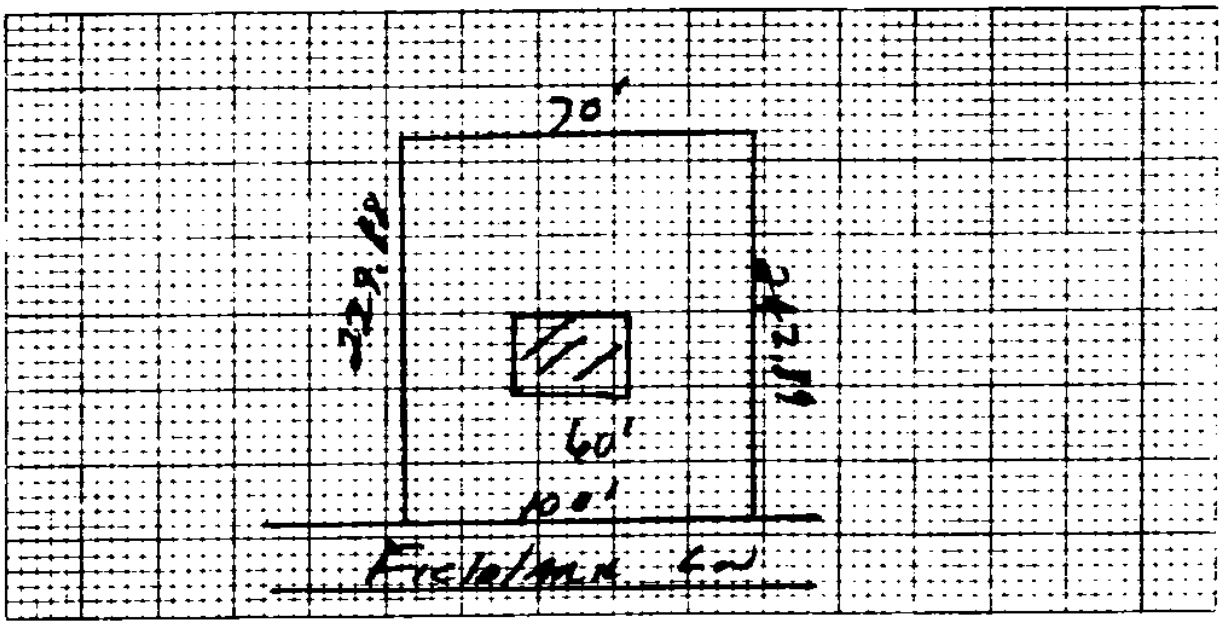
4) LOCATION OF PROPERTY 6933 Fieldmark Ln
(STREET OR COUNTY ROAD)

5) SUBDIVISION Fieldmark LOT NO. 4 BLOCK NO. B

MAP BOOK NO 16 PAGE NO. 204

6) DEED REFERENCE DEED BOOK — PAGE NO. —

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

REALTY FUND, INC.
J. E. Robert Sec
OWNER

FORM NO. E1-11-3M-6-75

HEALTH DEPARTMENT'S COPY

SOIL INVESTIGATION REPORT

Date of Investigation September 10, 1976 APT NO. 11378

Owner Reality Fund Inc.

Location of Property Fieldcrest Trail lot 4 Block B

Soil Suitability Ratings Texlade No. 197-072-04

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Appling		Cecil	
2. Soil Slope	suitable 2-4%		same	
3. Soil Depth	suitable >48"		same	
4. Soil Texture	provisionally suitable clay		same	
5. Soil Structure	provisionally suitable blocky		same	
6. Restrictive Horizons	—		—	
7. Soil Drainage	suitable water-table 76"		same	
8. Soil Permeability (Percolation Rate)	provisionally suitable moderate		same	
9. Other	—		—	
10. Overall Rating	provisionally suitable		same	

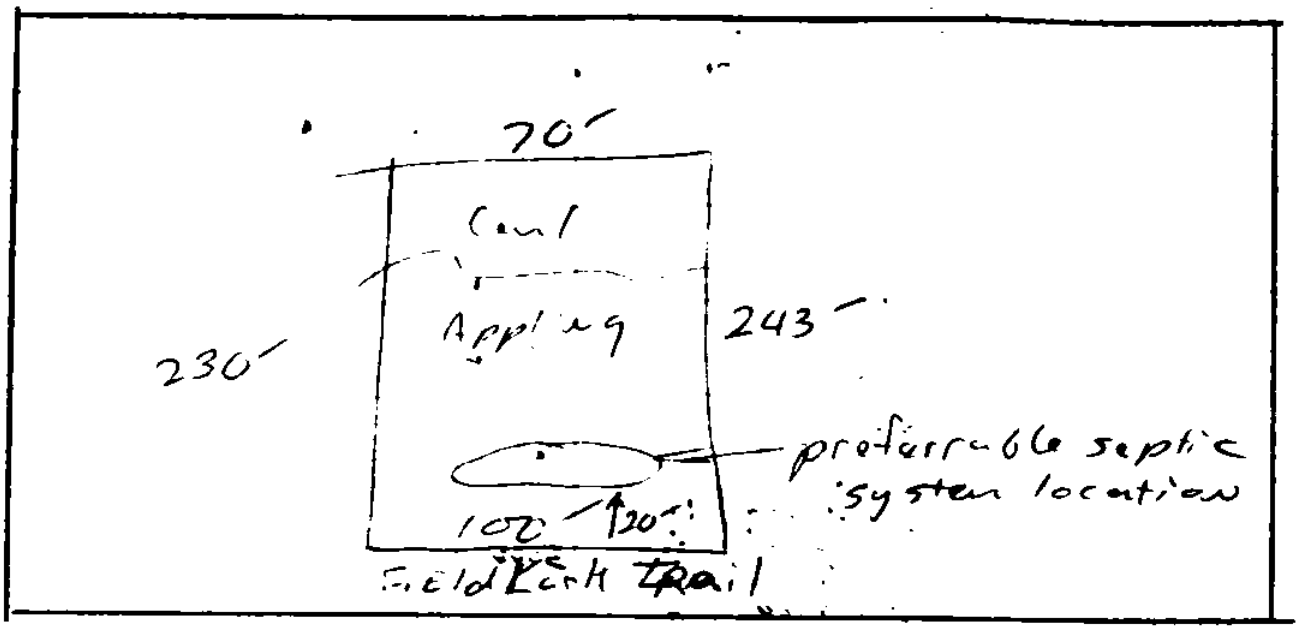
Recommendations Based on this investigation, the lot is recommended for approval for installation of a septic tank system. System design should be based on a percolation rate of 60 min/in.

See diagram on back

Edward Vaquette
Soil Scientist

3/18/75
RMD 539

DIAGRAM OF PROPERTY



3/18/75

EHB 339

Serial No. 0141

PTR No. 11378

Date Issued 9/14/76

T C. No. 197-072-04

Map Date 6-29-76

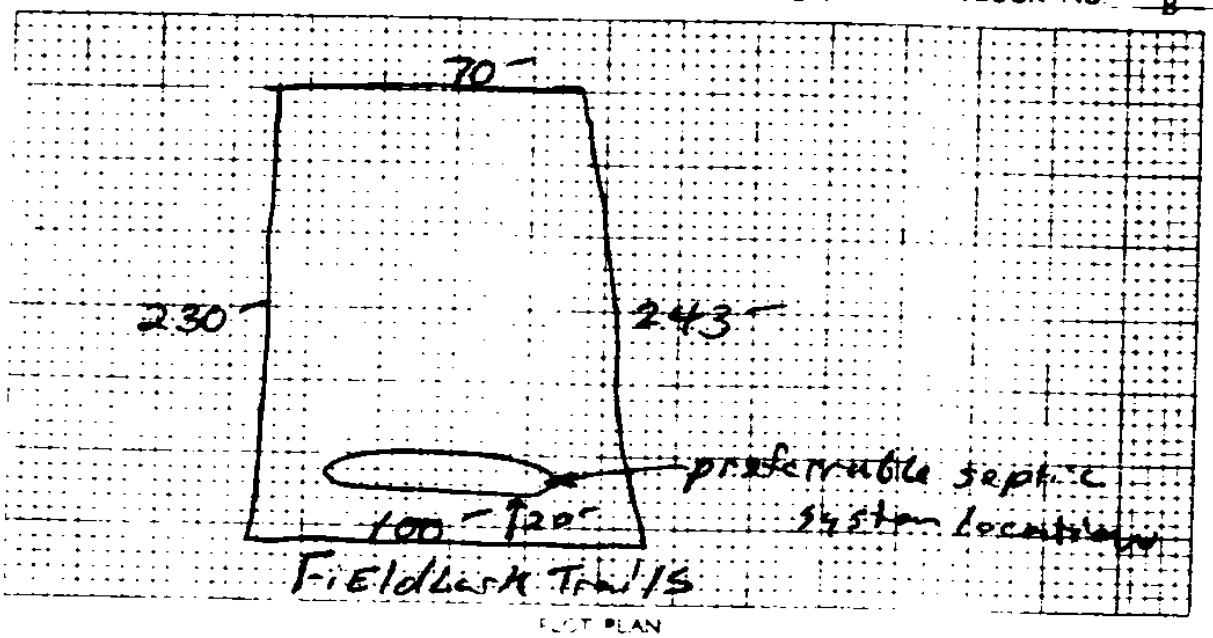
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Realty Fund, Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER P. O. Box 25884, Charlotte, N. C. ZIP 28212

LOCATION OF PROPERTY 6933 Fieldlark Lane
STREET OR COUNTY ROAD

SUBDIVISION Fieldlark Trail LOT NO 4 BLOCK NO. B



PLOT PLAN

...Mecklenburg County. ...was conducted ...Provisionally Suitable ...60Min./In. ...and it is approved ...subsurface soil ab-...

...Mecklenburg County Depart... ...sewage treatment s...

...the Mecklenburg ...above, and on ...

...system installation.

...the ...which ...to acceptable for ...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 are in effect on the date of issuance and 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 newly revised laws, rules, and regulations been in effect on the issue date.

W. Edward Casavant
Soil Scientist

John R. Johnson
Environmental Health Director or Authorized Section Head

EHD 5-76

Environmental Health Department's Copy

A.

Date Received 9/10/76

ICAR(S) Application No. 11018

T. C. No. 97-078A

Map Date 6-29-76

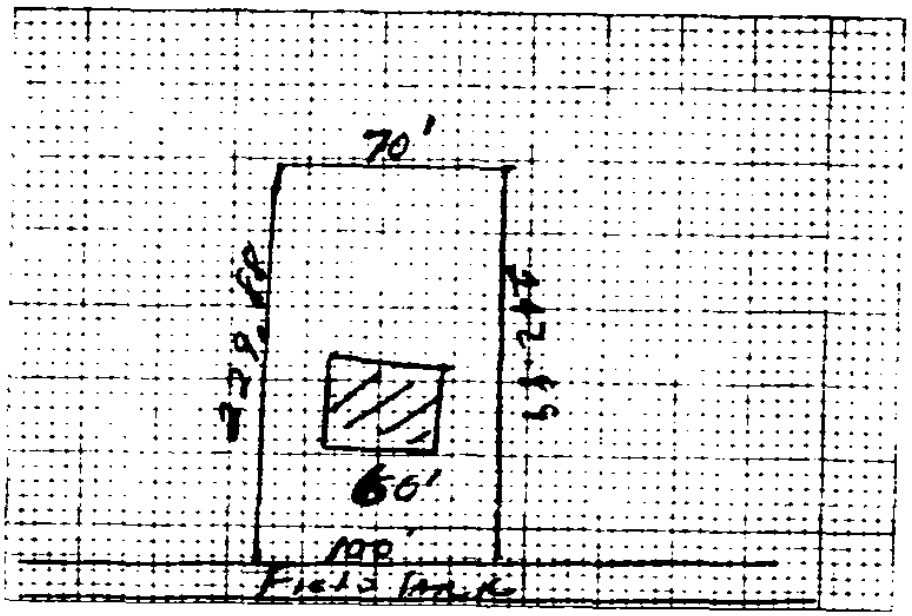
MECKLENBURG COUNTY HEALTH DEPARTMENT

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) 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)

4) No. of Bedrooms 3

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
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. ____

12) VA Case No. ____

13) NAME OF OWNER Realty Fund (LAST) (FIRST) (MIDDLE)

14) ADDRESS OF OWNER PO Box 35884 Chas NC

15) PHONE NO Home - Office 5683473

16) LOCATION OF SYSTEM 6933 Fieldark Ln (STREET OR COUNTY ROAD)

17) SUBDIVISION Fieldark Lot No. 4 Block No. B

Map Book No. 16 Page No. 204

18) DEED REFERENCE — DEED BOOK ____ AT PAGE ____

19) HAS A PERCOLATION TEST BEEN RUN? X YES ____ NO DATE RUN ____

20) PTR NUMBER (See Instructions) ____

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.

9/7/76
DATE OF APPLICATION

Realty Fund, Inc.
J. E. Roberts, Sec.
OWNER

FORM NO. E-4-4-2M-6-76S

HEALTH DEPARTMENT'S COPY

Date Issued 9/14/76

Serial No. 0153

IMPROVEMENTS PERMIT

LA No. 11378

T. C. No. 197-073-04

Map Date 6-29-76

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 Realty Fund
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P. O. Box 25884, Charlotte, N. C. ZIP _____

LOCATION OF LOT 6933 Fieldlark Lane
(STREET OR COUNTY ROAD)

SUBDIVISION Fieldlark LOT NO 4 BLOCK NO. B

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 11378. 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

L. C. Brinkman
Environmentalist

John R. Atkisson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

R

Date Issued 30 Dec 26

Serial No. 0406

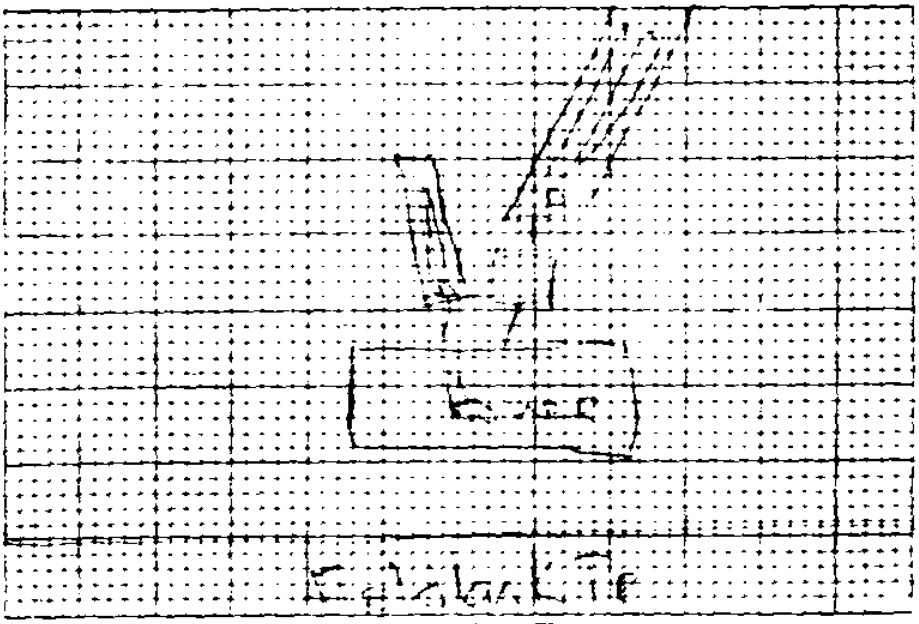
ICAR (S) Permit No. 11378

T C. No. 197-078-04

Map Date 6-29-26

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 11378, dated 9-7-26 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 30 Jun 26, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate 60

Liquid Capacity of Tank 1000 gal

Tank Construction PC

Absorption Area or Nitrification Lines

Total Line Length 400'-150'

Number of Lines 4-3

Distance from House 10'

Distance from Property Line 10'

Distance from Well 75'

NAME OF OWNER [illegible]

LOCATION OF PROPERTY [illegible]

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.

Comments: Curtain, pd

G McGee Jr

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-5-76

Environmental Health Department's Copy

Date Issued 1/28/77

Serial No. 0400

C of A (s) No.

T C No. 197073-04

CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY

DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner REAMY, [illegible] (FOR SALE)
LAST FIRST MIDDLE

Location of Property FIELDLARK TRAIL (LOT 4B)

Application Number 11378 Permit Number 11378

Inspection Data:

Liquid Capacity of Tank 1000 gal ST WTH Tank Material P.C.

Total Length of Drain Tile 400 ISC Number of Lines 4 3

Depth of Filter Material 12" Cover Depth 18"

Water Supply Source IND WELL Distance from Water Source 95'

Excavation Inspected 1/28/77 DATE Tank Inspected 1/28/77 DATE

Nitrification Field Inspected 1/28/77 DATE

Washing Machine Line Inspected, If Applicable 1/28/77 DATE

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been X 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 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 SEPTIC COUNTY SYSTEM.
THIS SYSTEM DESIGNED FOR DISHWASHER & CLOTHES WASHER DISPOSALL

L P Briggeman
Environmentalist

EHD-5-76

Environmental Health Department's Copy