Date Received 7-18-74

Application No. 6558

T. C. No. 029-171-18

Map Date 3-1-72

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER NETTLES (LAST) MICHAEL (FIRST) (MIDDLE)

ADDRESS OF OWNER RT. 7, BOX 524-E ZIP

PHONE NO. Home 596-8555 Office 596-8414

LOCATION OF PROPERTY MALLARD CREEK RD. (STREET OR COUNTY ROAD)

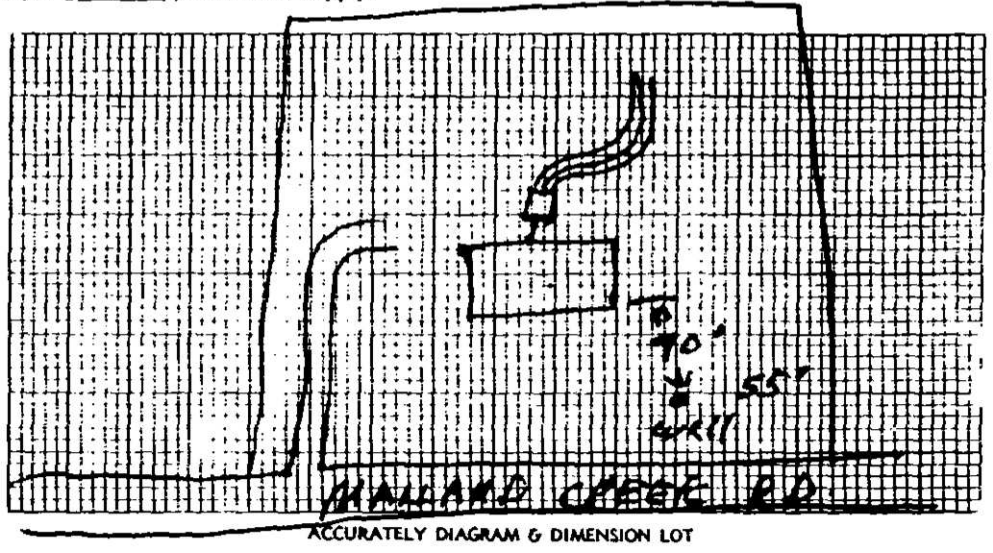
SUBDIVISION LOT NO. BLOCK NO.

MAP BOOK NO. PAGE NO.

DEED REFERENCE: DEED BOOK 1353 PAGE NO. 392

WELL CONTRACTOR Stewart 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

7-18-74
DATE OF APPLICATION

Mike N. Nettles
OWNER
by: Rachel C. Brown

Application approved and permit hereby granted

Permit No: 6558

J. E. Glenn
ENVIRONMENTALIST

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

HEALTH DEPARTMENT'S COPY

Date Received 6-21-73

RECEIVED
JUN 21 1973
ENVIRONMENTAL HEALTH DIVISION

APT No 6558

T. C. No.

Map Date

MECKLENBURG ~~COUNTY HEALTH~~ DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER WETTLES (LAST) MICHAEL (FIRST) WAYNE (MIDDLE)

2) ADDRESS OF OWNER ROUTE 7 BOX 524E CHARLOTTE N.C. ZIP 28213

3) PHONE NO. Home 596-8555 Office 596-8414

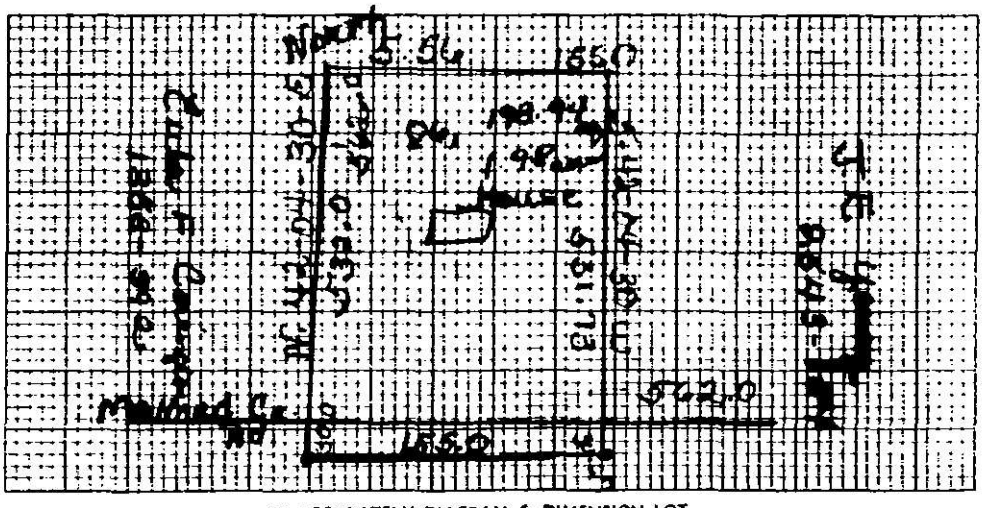
4) LOCATION OF PROPERTY Rt 10, Box 293-N Mallard Ch. Rd. (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. _____

6) DEED REFERENCE. DEED BOOK 1353 PAGE NO. 392

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

OWNER

FORM NO. E-1-9-1-72

HEALTH DEPARTMENT'S COPY

MECKLENBURG COUNTY
Department of Public Health

1200 Blythe Boulevard
Charlotte, North Carolina 28203
Telephone 374-2113

Date Issued
1. 7-9-73
2. _____
3. _____

SDR No. 6558
T.C. No. 029-171-18

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

NAME OF OWNER Nettles, Michael Wayne

ADDRESS OF OWNER Route 7, Box 524 -E, Charlotte ZIP _____

LOCATION OF LOT Hallard Creek Road

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.	7-6-73	150 min/in
____	2.	_____	_____ min/in
____	3.	_____	_____ min/in

____ ON SITE INSPECTION REVEALED LOT TO BE UNSUITABLE FOR THE FOLLOWING REASON(S) _____

R. M. Reynolds
Environmentalist

(Stencil No.)
EHD 398
8/70

FORM NO.
E-19-8-14-70

Serial No. 3419

PTR No. 6558

T C No. 029-171-18

Map Date 3-1-72

Date Issued July 30, 1973

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

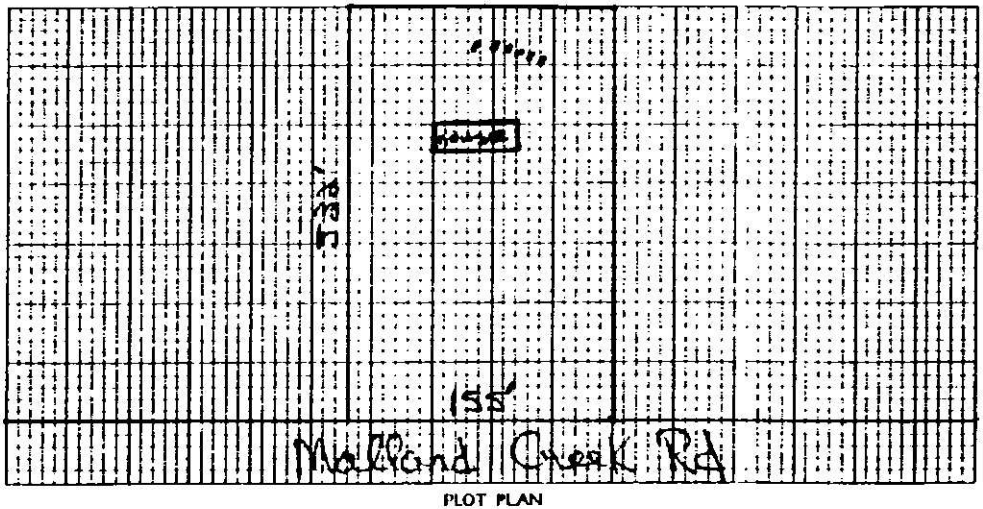
PERCOLATION TEST REPORT

NAME OF OWNER Nettles (LAST) Michael (FIRST) (MIDDLE)

ADDRESS OF OWNER Route 7, Box 524-E ZIP

LOCATION OF PROPERTY Mallard Creek Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO



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. Wesson

Director, Environmental Health Division or
Authorized Section Head

FORM NO E-2-4-1-71

HEALTH DEPARTMENT'S COPY

Date Received 6-21-73

MECK CO HEALTH DEPT
RECEIVED
JUN 25 1973
Environmental Health Division

ICAR (S) Application No. 76558

T. C. No.

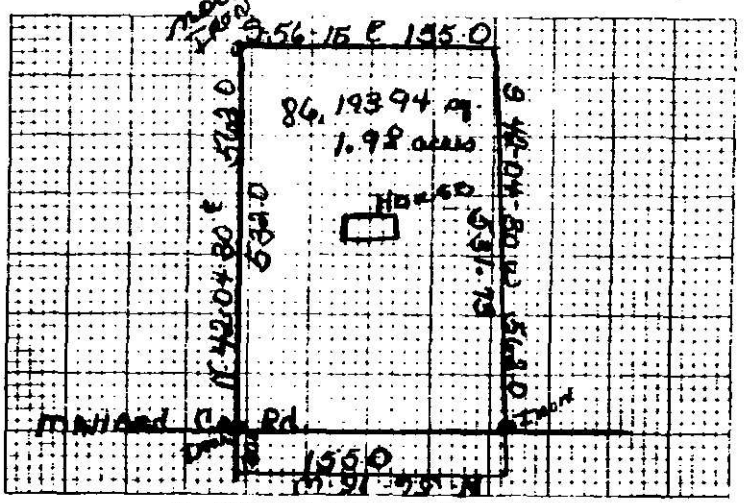
Map Date

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



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) Governmental System ___
   C) Community System
      1 Well source ___
      2 Governmental source ___
10) Sewage System
   House located within 200 feet of public sewer — Yes ___ No ✓
   House located within 200 feet of community sewer — Yes ___ No ✓
11) FHA Case No. ___
12) VA Case No. ___

13) NAME OF OWNER WEHLES (LAST) MICHAEL (FIRST) WAYNE (MIDDLE)

14) ADDRESS OF OWNER ROUTE 7 BOX 524-E CHARLOTTE N.C.

15) PHONE NO. Home 596-5555 Office 596-8444

16) LOCATION OF SYSTEM MALLARD CREEK ROAD (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. ___ Block No. ___

Map Book No. ___ Page No. ___

18) DEED REFERENCE — DEED BOOK 1353 AT PAGE 392

19) HAS A PERCOLATION TEST BEEN RUN? ___ 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.

6-20-73
DATE OF APPLICATION

[redacted] Michael W Wehles
OWNER

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

HEALTH DEPARTMENT'S COPY

Date Issued July 30, 1973

Serial No. 3243

LA No 6558

T. C. No 029-171-18

Map Date 3-1-72

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 Nettles (LAST) Michael (FIRST) _____ (MIDDLE)

ADDRESS OF OWNER Route 7, Box 524-E ZIP _____

LOCATION OF LOT Mallard Creek 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 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 6558. 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. Adkisson
Director, Environmental Health Division or Authorized Section Head

FORM NO E-3-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 2 Aug 73

Serial No. 4112

ICAR (S) Permit No. 6558

T. C. No. 029-171-18

Map Date 1 Mar 73

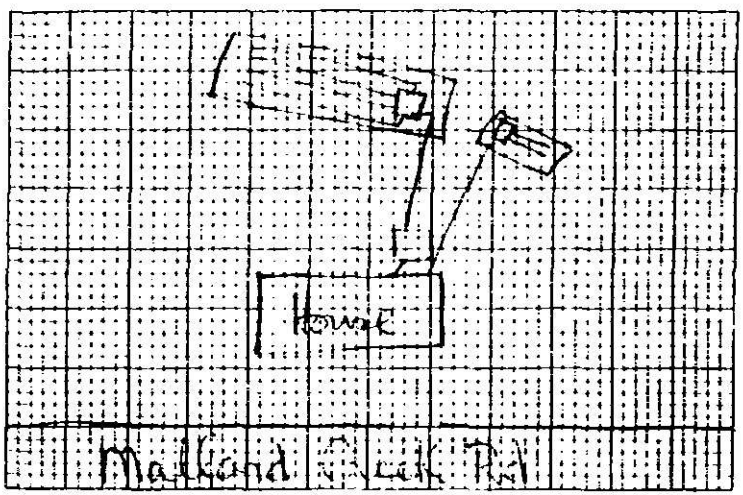
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTRUCTION, 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 _____, 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 2 Oct 73, after which date this permit shall be null and void



PLOT OF SYSTEM

Percolation Rate 60 min/in

Liquid Capacity of Tank 1000 gal

Tank Construction Precast Concrete

Absorption and/or Nitrification Lines.

Total Line Lenght 400' & 150'

Number of Lines (4) 10' x 75'

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Nettles, Michael

LOCATION OF PROPERTY Maitland Creek Rd

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: 12" from bottom to top of GRADE boards / 4" perforated pipe / #10 stone or #1 / Cover job with straw / * Washed 5'x4'x4' stone 24" from top of stone to ground level. / Dig Ditch 6' deep

owner to install

Division or Section Head

E. 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.

FORM NO E S-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 29 Aug 73 Serial 3867

C of A (s) No. 6558

T. C. No. 029-17-18

Map Date 1 Mar 72

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Nettles, Michael (LAST, FIRST, MIDDLE)

Location of Property Mallard Creek Rd

Application Number 6558 Permit Number 6558

Inspection Data:

Liquid Capacity of Tank 1000 gal Tank Material Precast Concrete

Total Length of Drain Tile 400' Number of Lines (4) 10'x75'

Depth of Filter Material 17" Cover Depth 24"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 29 Aug 73 (DATE) Tank Inspected 29 Aug 73 (DATE)

Nitrification Field Inspected 29 Aug 73 (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 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: washer line not installed

G. M. Reynolds

Environmentalist

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

HEALTH DEPARTMENT'S COPY