MECKLENBURG COUNTY HEALTH DEPARTMENT
INTER-OFFICE COMMUNICATION

DATE: December 27, 1973

TO: John Adkisson
Environmentalist

FROM: W. Everette Lynn, Jr. WEL
Soil Scientist

SUBJECT: APT #7303 (W. K. Gladden)
Lot 3, Bain School Road
12-27-73

Soils were found to be of the Cecil series. These soils have good drainage, good aeration and moderate permeability.

It is recommended that the lot be granted approval for installation of a septic tank system. Design should be based on a 60 min./in. percolation rate.

WEL/jdg

MECKLENBURG COUNTY
Department of Public Health

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

Date Issued
1. December 14, 1973 SITE DISAPPROVAL REPORT SDR No. 7303
2. _____ INDIVIDUAL SEPTIC TANK SYSTEM WITH SUBSURFACE, T.C. No. P.O. 197-011-05
3. _____ SOIL ABSORPTION, EFFLUENT DISCHARGE 9-5-73

NAME OF OWNER Gladden, Walter King

ADDRESS OF OWNER 9925 Hannon Road ZIP 28212

LOCATION OF LOT Bain School 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.	12-14-73	140 min/in
____	2.	_____	_____ min/in
____	3.	_____	_____ min/in

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

John R Adkisson
Environmentalist

(Stencil No.)
EHD 398
8/70

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

W

Date Received 12-6-73

APT No. 7303

T. C. No. _____

Map Date _____

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Haddin (LAST) Walter (FIRST) King (MIDDLE)

2) ADDRESS OF OWNER 9925 Harrisburg Road ZIP 28212

3) PHONE NO. Home 545-4715 Office 545-4718

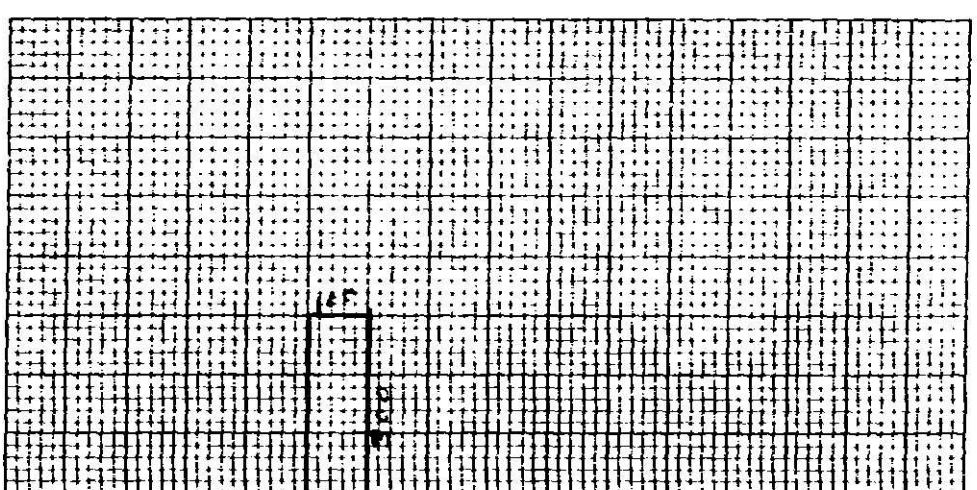
4) LOCATION OF PROPERTY Bain School Rd. (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. 3 BLOCK NO. _____

MAP BOOK NO _____ PAGE NO. _____

6) DEED REFERENCE DEED BOOK 3547 PAGE NO. 319

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

Bain School Rd.

W. K. Haddin
OWNER

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

HEALTH DEPARTMENT'S COPY

Serial No. 3902

PTR No 7303
P.O.
T C No 197-011-05

Date Issued December 27, 1973

Map Date 9-5-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

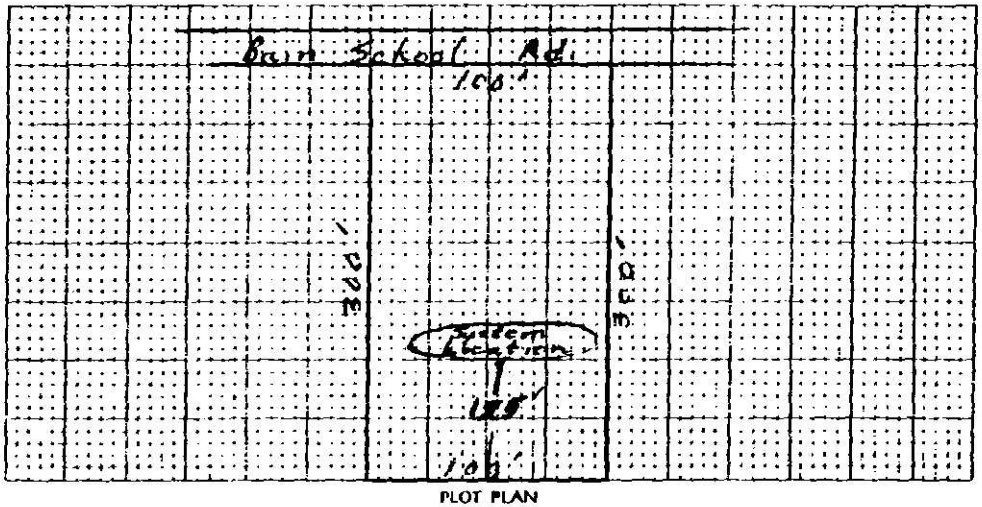
PERCOLATION TEST REPORT

NAME OF OWNER Gladden (LAST) Walter (FIRST) Kline (MIDDLE)

ADDRESS OF OWNER 2425 Hannon Road ZIP 28212

LOCATION OF PROPERTY Bain School Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 3 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.

*Results determined by soil analysis.

W. Everette Tysinger
Soil Scientist

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

FORM NO. E-2-9-1-72

HEALTH DEPARTMENT'S COPY

Date Received 12-6-73 ICAR(S) Application No. 7303

T C No.

Map Date

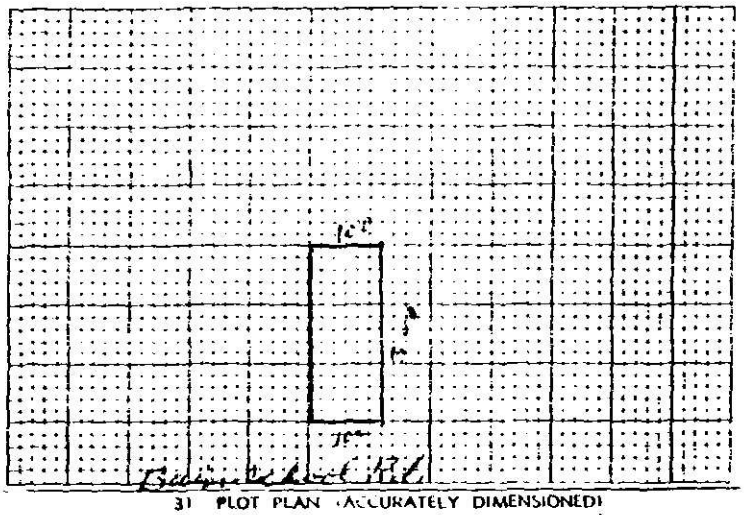
MECKLENBURG COUNTY HEALTH DEPARTMENT

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) 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.
1 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 Gladden (LAST) Walter (FIRST) King (MIDDLE)

14) ADDRESS OF OWNER 7725 Harrison Rd Charlotte N.C. 28212

15) PHONE NO Home 545-4715 Office 545-4715

16) LOCATION OF SYSTEM Bain School Rd. (STREET OR COUNTY ROAD)

17) SUBDIVISION Lot No. 3 Block No.

Map Book No Page No.

18) DEED REFERENCE — DEED BOOK 3547 AT PAGE 319

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.

12-6-73
DATE OF APPLICATION

Walter Gladden
OWNER

FORM NO. E-4-4-1-73

HEALTH DEPARTMENT'S COPY

Date Issued December 28, 1973

Serial No. 3715

LA No. 7303
P.O.
T C No. 197-011-05

IMPROVEMENTS PERMIT

Map Date 9-5-73

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 Gladden (LAST) Walter (FIRST) King (MIDDLE)

ADDRESS OF OWNER 9925 Hannon Road ZIP

LOCATION OF LOT Bain School Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 3 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 7303. 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.

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 18 Feb 74 Serial No. 4834 ICAR(S) Permit No. 7303

T C No

Map Date

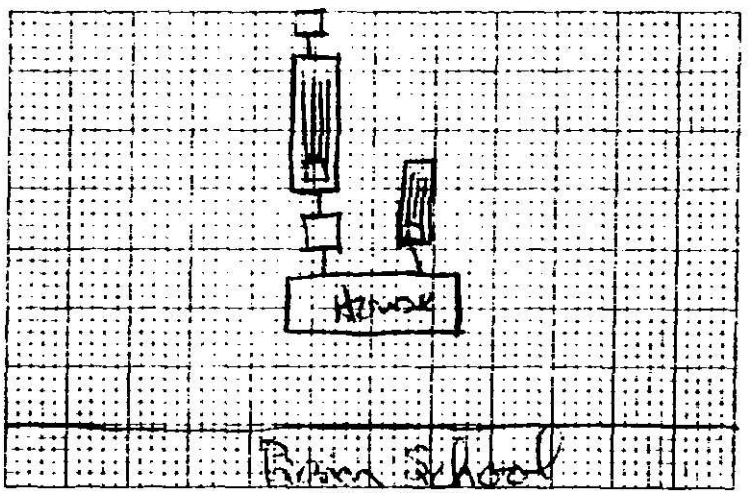
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 7323, dated 12-6-73 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 18 Mar 74, after which date this permit shall be null and void



PLOT OF SYSTEM

Percolation Rate 60

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 100'

Distance from House 10'

Distance from Property Line 10'±

Distance from Well 100'

NAME OF OWNER Graham, W. K.

LOCATION OF PROPERTY 11734 Brown School

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: aeration pit 2½' x 7' x 4' deep

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.

FORM NO. E-5-4-1-71

HEALTH DEPARTMENT'S COPY

Serial 4449

C of A (s) No. 7303

Date Issued 22 Feb 74

T. C. No

John S. Dickinson
CLERK OF COURT

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Gladden, W. K.
LAST FIRST MIDDLE

Location of Property 11734 Bruns School Rd

Application Number 7303

Permit Number 7303

Inspection Data:

Liquid Capacity of Tank 1000 gal

Tank Material Precast Concrete

Total Length of Drain Tile 400' & 150'

Number of Lines (4) 10' x 100'

Depth of Filter Material 17"

Cover Depth 24"

Water Supply Source well

Distance from Water Source 100'

Excavation Inspected 22 Feb 74
DATE

Tank Inspected 22 Feb 74
DATE

Nitrification Field Inspected 22 Feb 74
DATE

Washing Machine Line Inspected, If Applicable 22 Feb 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.

E. M. Ferguson
Environmentalist

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

HEALTH DEPARTMENT'S COPY