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Date Received 7-2-73

MECK COUNTY HEALTH DEPT.
RECEIVED
JUL 02 1973
ENVIRONMENTAL HEALTH DIVISION

APT No. 6567

T. C. No. _____

Map Date _____

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Lewis (LAST) Roy (FIRST) Grady (MIDDLE)

2) ADDRESS OF OWNER 1003 Spring St. Gastonia N.C. ZIP 28052

3) PHONE NO. Home 865-1041 Office _____

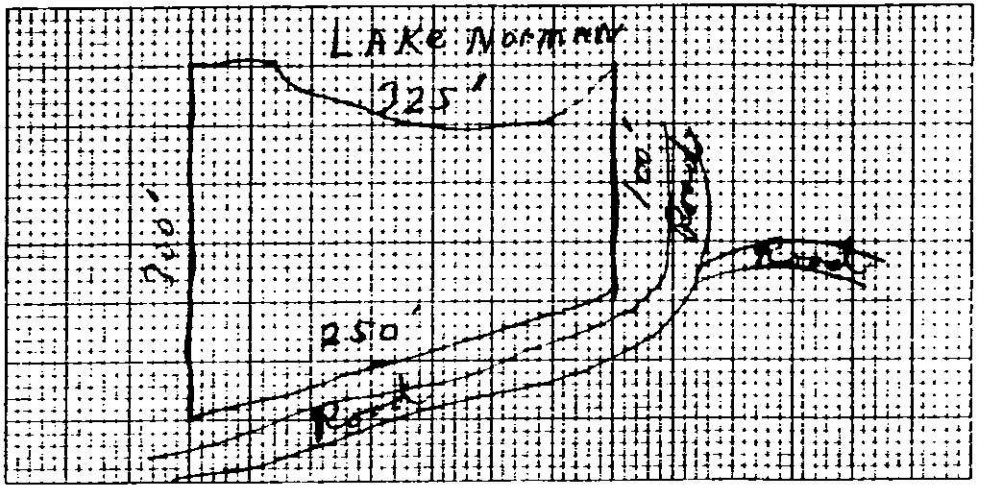
4) LOCATION OF PROPERTY Mecklenburg Neck, Lake Norman, Rt. # 2153 (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ DP 6 _____ LOT NO. 238 BLOCK NO. _____

Parcel # MAP BOOK NO 001 _____ PAGE NO. 281

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 on 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

Roy Grady Lewis, Jr
OWNER

FORM NO E-1-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3308

PTR No. 6567

Date Issued July 11, 1973

T. C. No. 081-281-03D

Map Date 3-24-72

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

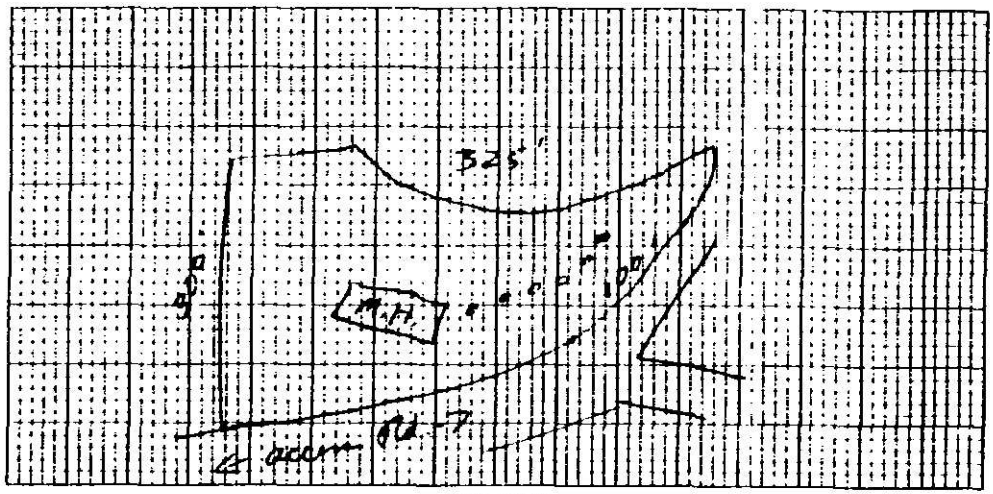
PERCOLATION TEST REPORT

NAME OF OWNER Lewis (LAST) Roy (FIRST) Grady (MIDDLE)

ADDRESS OF OWNER 1003 Spring Street, Gastonia ZIP 28052

LOCATION OF PROPERTY Co. Rd. #2153 (STREET OR COUNTY ROAD)

SUBDIVISION DP 6 LOT NO 238 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.

Director, Environmental Health Division or
Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

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Date Received 7-2-73

MECK. COUNTY HEALTH DEPT.
RECEIVED
JUL 02 1973
ENVIRONMENTAL HEALTH DIVISION

ICAR (S) Application No 6567

T C No

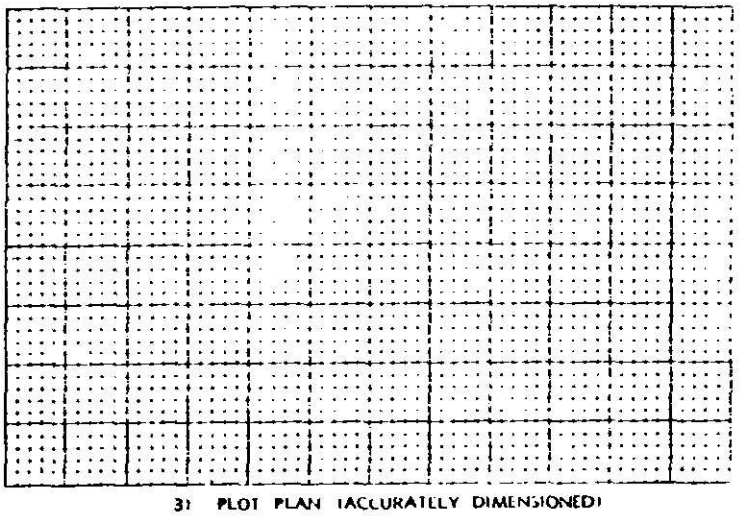
Map Date

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 Bedroom 2
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 System
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 (lease) Lewis (LAST) Roy (FIRST) Grady (MIDDLE)

14) ADDRESS OF OWNER 1003 Spring St Gastonia, N.C. 28052

15) PHONE NO Home 863-1041 Office

16) LOCATION OF SYSTEM Mecklenburg Neck, Rt. # 2153
(STREET OR COUNTY ROAD)

17) SUBDIVISION DP 6 Lot No. 238 Block No

(Parcel) Map Book No. 66 Page No 281

18) DEED REFERENCE — DEED BOOK AT PAGE

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.

June 25 1973
DATE OF APPLICATION

Roy Grady Lewis, Jr.
OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued July 11, 1973 Serial No. 3156

LA No. 6567

T. C. No. 021-281-03D

Map Date 3-24-72

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 Lewis (LAST) Roy (FIRST) Grady (MIDDLE)

ADDRESS OF OWNER 1003 Spring Street, Gastonia ZIP 28052

LOCATION OF LOT County Road #2153 (STREET OR COUNTY ROAD)

SUBDIVISION DP 6 LOT NO 238 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 6567. 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

Director, Environmental Health Division or Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

Date Issued 12 July 73

Serial No. 3976

ICAR(S) Permit No. 6567

T. C. No. C01-2871-C30-C

Map Date 24 May 72

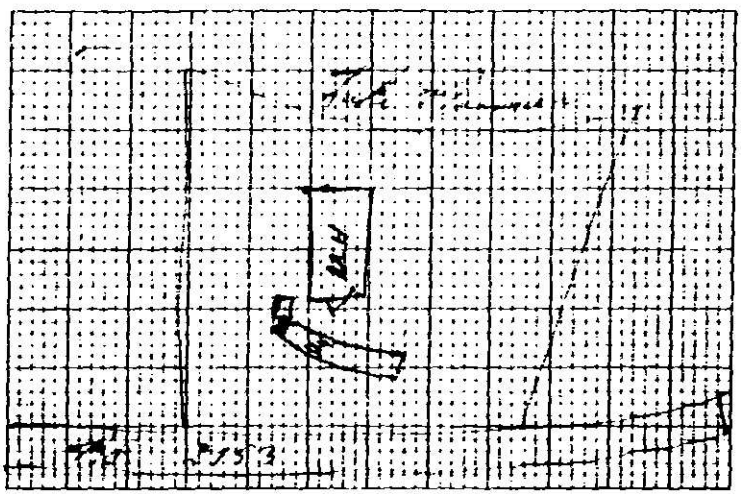
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 6567, dated 5 July 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 12 July 73, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 6C

Liquid Capacity of Tank 1000

Tank Construction SC

Absorption and/or Nitrification Lines:

Total Line Lenght 300'

Number of Lines 4(6 X 75' XD)

Distance from House 16'

Distance from Property Line 15'

Distance from Well 60'

NAME OF OWNER [illegible]

LOCATION OF PROPERTY 6[illegible] #2153 (Mint Tech)

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: [illegible] (Tech)

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 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

Date Issued 13 July 73 Serial No. 3603 C of A (s) No. 6562

T. C. No. 001-281-030

Map Date 24 Nov 72

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Lewis, Guy, Grady (LAST, FIRST, MIDDLE)

Location of Property E. Trail 2153 (Mt. Holly)

Application Number 6562 Permit Number 6562

Inspection Data:

Liquid Capacity of Tank 1000 Tank Material STC

Total Length of Drain Tile 300' Number of Lines 4 (10' x 75' x 12")

Depth of Filter Material 12" Cover Depth 18"

Water Supply Source Well Distance from Water Source 65'

Excavation Inspected 13 July 73 (DATE) Tank Inspected 12 July 73 (DATE)

Nitrification Field Inspected 13 July 73 (DATE)

Washing Machine Line Inspected, If Applicable NA (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: Tie to Sewer (Central)

W. G. Kirby
Environmentalist

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

HEALTH DEPARTMENT'S COPY