Date Received 4-27-73

APT No. 6N3

T. C. No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Hicks, III; (LAST) Eugene (FIRST) C. (MIDDLE)

2) ADDRESS OF OWNER 209 Middleton Drive, Charlotte, N. C. ZIP 28207

3) PHONE NO. Home 377-6353 Office 334-5375

4) LOCATION OF PROPERTY Silver Fox Road (formerly Gray Fox Road), Charlotte, N.C. (STREET OR COUNTY ROAD)

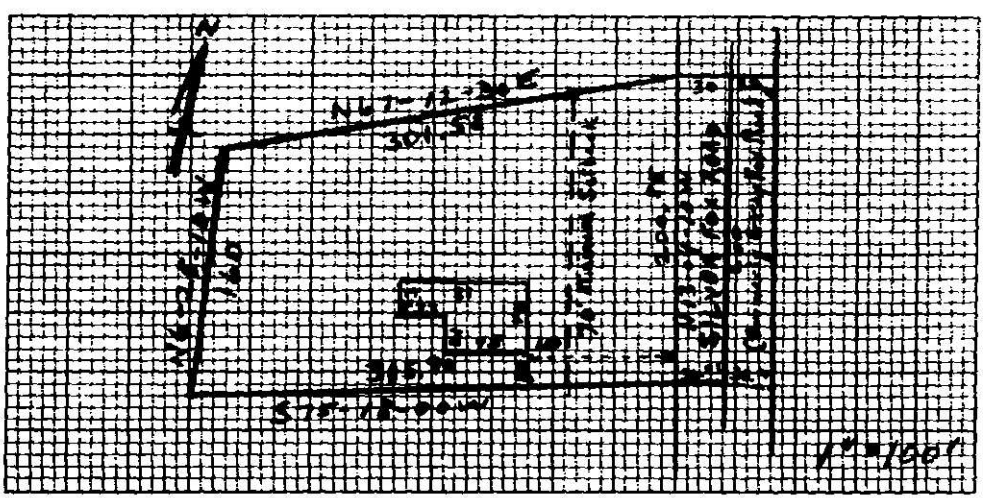
5) SUBDIVISION Providence Plantation LOT NO. 15 BLOCK NO. 5

MAP BOOK NO. 15 PAGE NO. 65, Mecklenburg Registry.

6) DEED REFERENCE: DEED BOOK 3236 PAGE NO. 266

(Eugene C. Hicks, III and wife, Tirzah T. Hicks)

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

Eugene C. Hicks, III
OWNER

4/24/73

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

HEALTH DEPARTMENT'S COPY

Serial No. 3194

PTR No. 6113

Date Issued May 16, 1973

T C. No. 227-084-15

Map Date 2-14-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

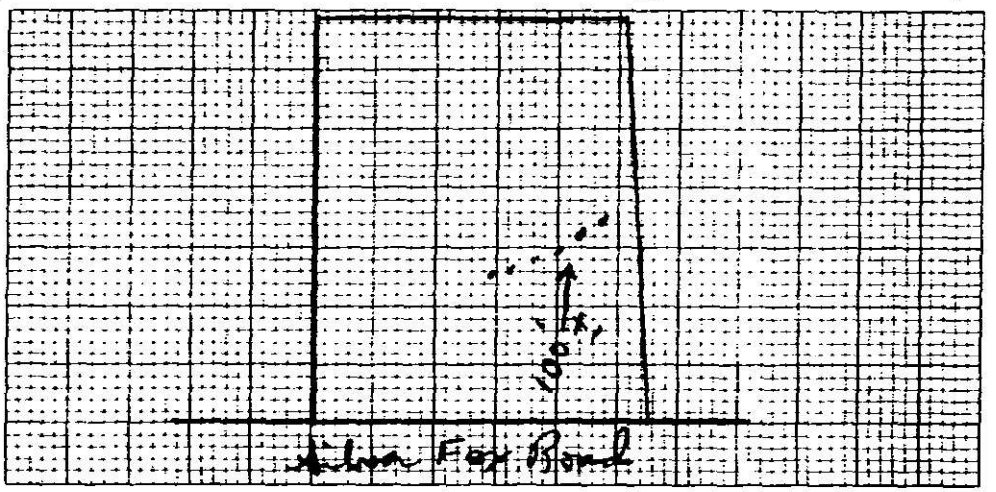
PERCOLATION TEST REPORT

NAME OF OWNER Hicks, III (LAST) Eugene (FIRST) C. (MIDDLE)

ADDRESS OF OWNER 209 Middleton Drive ZIP 28207

LOCATION OF PROPERTY Silver Fox Road (STREET OR COUNTY ROAD)

SUBDIVISION Providence Plantation LOT NO. 15 BLOCK NO. 5



PLOT PLAN

This is to certify that a percolation test has been run and on 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 teratment 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. Henson

Director, Environmental Health Division or Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

SEE INSTRU

Date Received 4-27-73

ICAR(S) Application No. 6113

T. C. No.

Map Date

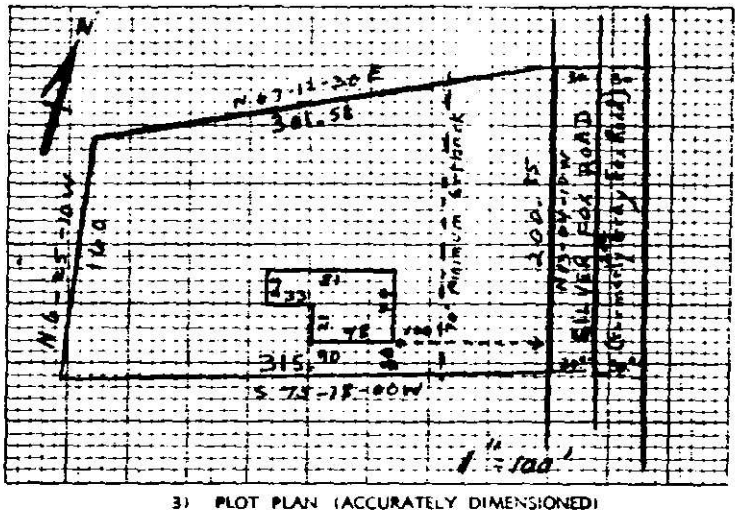
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 4

5) Business Use — Max No Employees ___

6) Washing Machine X Yes ___ No

7) Garbage Disposal ___ Yes X No

8) Dishwasher X Yes ___ No

9) Water Supply:
A) Individual Well Yes
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 Hicks, III (LAST) Eugene (FIRST) C. (MIDDLE)

14) ADDRESS OF OWNER 209 Middleton Drive, Charlotte, N. C. 28207

15) PHONE NO. Home 377-6353 Office 334-5375

16) LOCATION OF SYSTEM Silver Fox Road (formerly Gray Fox Road), Charlotte, N. C.
(STREET OR COUNTY ROAD)

17) SUBDIVISION Providence Plantation Lot No. 15 Block No. 5

Map Book No. 15 Page No. 65, Mecklenburg Registry.

18) DEED REFERENCE — DEED BOOK 3236 AT PAGE 266
(Eugene C. Hicks, III and wife, Tirzah T. Hicks)

19) HAS A PERCOLATION TEST BEEN RUN? ___ YES X 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.

April 26, 1973
DATE OF APPLICATION

Eugene C. Hicks, III
OWNER

FORM NO E-4-4-1-71

HEALTH DEPARTMENT'S COPY

W

Date Issued 9 Oct 1973

Serial No. 4242

ICAR (S) Permit No. 6113

T. C. No. /

Map Date /

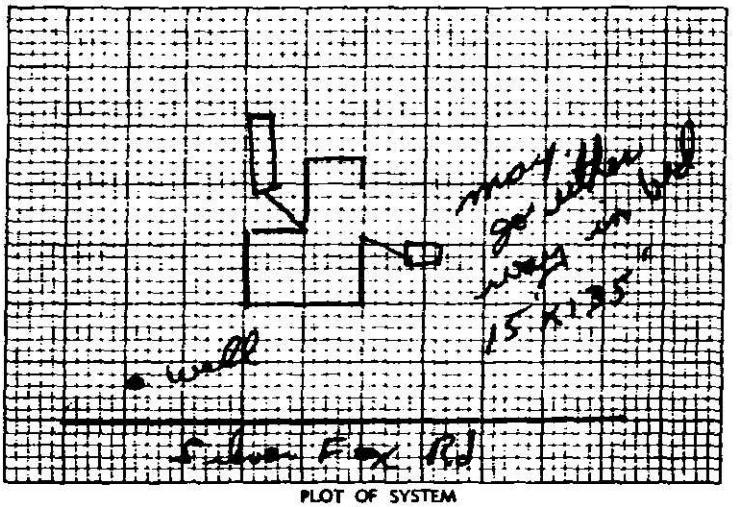
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 6113, dated 4-26-73 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 9 Nov 1973, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 1500 gal

Tank Construction concrete

Absorption and/or Nitrification Lines:

Total Line Lenght 795 +

Number of Lines 6 (15 x 135) absolution pit

Distance from House 20'

Distance from Property Line 10'

Distance from Well 100' +

NAME OF OWNER Hicks, III Eugene C.

LOCATION OF PROPERTY Silver Fox 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: wash line in bed 10 x 50 x 12"

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

Serial 4196

C of A (s) No. 6113

Date Issued 11-20-73

T. C. No. 227-084-15

John R. Anderson
CERTIFICATE OF COMPLETION

Map Date 9-14-73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Hicks, III (LAST) Eugene (FIRST) C. (MIDDLE)

Location of Property Silver Fox Rd.

Application Number 6113 Permit Number 6113

Inspection Data:

Liquid Capacity of Tank 1500 gal. Tank Material Pre Cast Con.

Total Length of Drain Tile 795'+ Number of Lines 6

Depth of Filter Material 12" Cover Depth 18"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 11-20-73 (DATE) Tank Inspected 11-20-73 (DATE)

Nitrification Field Inspected 11-20-73 (DATE)

Washing Machine Line Inspected, If Applicable 11-20-73 (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: Installed by Parks Septic Tank Co.

Thomas R. Ward
Environmentalist

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

HEALTH DEPARTMENT'S COPY