Date Received 5-4-83

SEE INSTRUCTIONS ON BACK
MECK COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH
RECEIVED
MAY 4 1983

ICAR (S) Application No. 19629

T. C. No. 023-124-42

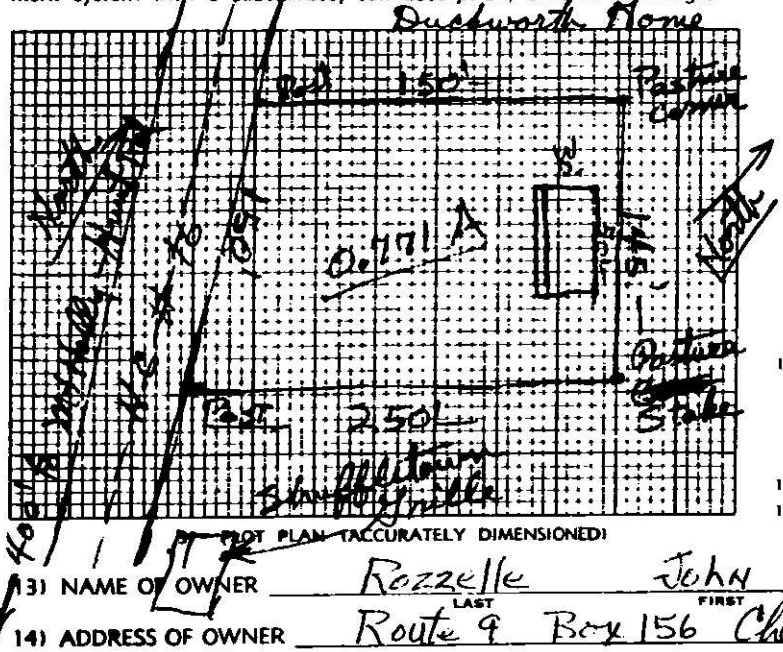
Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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 Department of Environmental Health 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.


Duckworth Home
Pasture
Pasture
Shuffletown
0.191 A
150'
250'
40'
20'
50'
100'
100'
100

Date Received 5-4-83

MECK COUNTY DEPARTMENT OF
RECEIVED
MAY 4 1983
ENVIRONMENTAL HEALTH

SIR No. 19629
T. C. No. 023-124-42
Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Rozzelle (LAST) John (FIRST) Hooper (MIDDLE)

2) ADDRESS OF OWNER Route 9 Box 156 Charlotte ZIP 28208

3) PHONE NO. Home 399-5186 Office 563-2096 (Shuffletown)

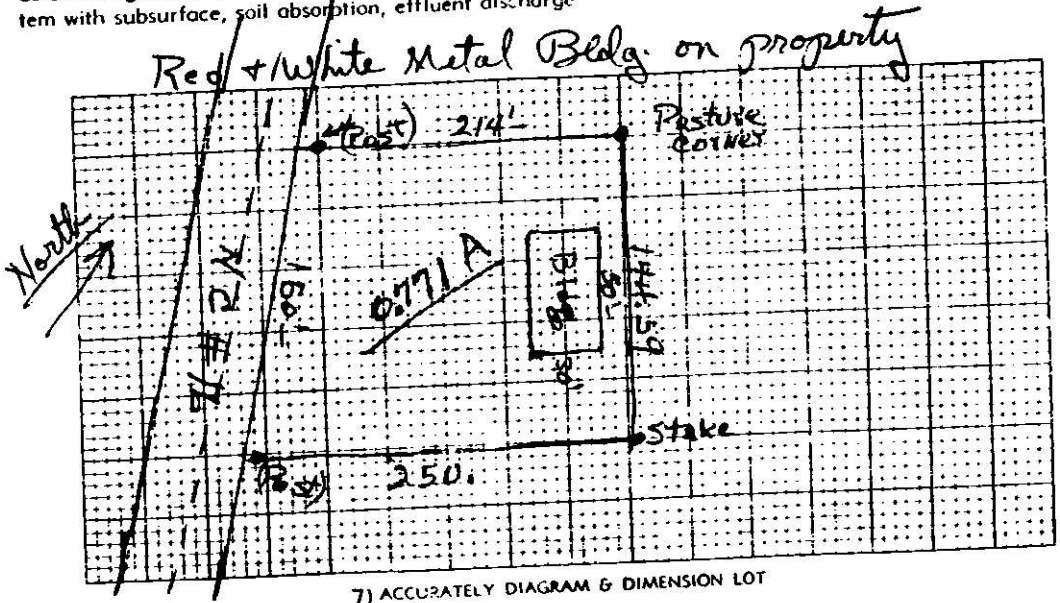
4) LOCATION OF PROPERTY #16 North, on right 400/ft from Intersection (STREET OR COUNTY ROAD)

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

MAP BOOK NO. _____ PAGE NO _____

6) DEED REFERENCE: DEED BOOK ~~1574~~ 4600 PAGE NO ~~1471~~ 778 PNo 023-124-33

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation 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

400' North of Mt Holly Hunters Road.

OWNER John H. Rozzelle

EHD-5-76

Environmental Health Department's Copy

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 19629

T.C. NO. 023-124-42

(Ground Absorption Sewage Disposal)

OWNER: John H. Rozzelle
ADDRESS: R-9 Box 156 23208

PLAT NO:
LOT SIZE: .77A

LOCATION OF SITE: #16 North West of Huntersville Mt Holly Rd
10300 Rozzelle Ferry Rd

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) 2-4 U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S PS (U) 2-1 thick Clay	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S PS (U) Weak Blocky	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S PS (U) 4-15"	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S PS (U) Sapralite Clay	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S PS (U) Slow	S PS U	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U

8. SOIL GROUP: TVb

9. SITE CLASSIFICATION: Unsuitable

10. SOIL SERIES: Wilkes

S - Suitable PS - Provisionally Suitable U - Unsuitable

**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

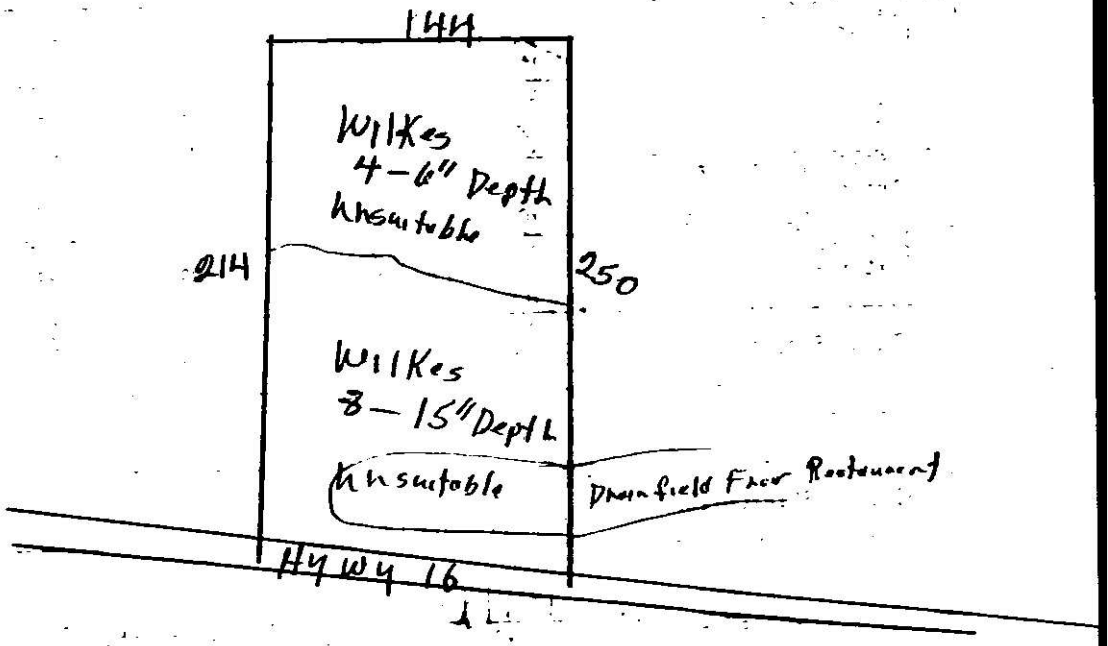
Recommendations/Comments:

Described by: W. B. Ramsey
Title: Soil Scientist

Date: 5-18-83

EHD 539 (Revised: 6/82)

2


144
Wilkes
4-6" Depth
Unsuitable
214
250
Wilkes
8-15" Depth
Unsuitable
Drainfield Facer Restaurant
Hwy 16

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1200 Blythe Boulevard
Charlotte, North Carolina 28203

SIR. NO. 19629
T.C. NO. 023-124-42
DATE: 5-23-83

Mr. John A. Rozzelle
Route 9, Box 156
Huntersville, N.C. 28078

RE: Property located at 10300 Rozzells Ferry Road

Dear Mr. Rozzelle:

At your request, a field investigation was conducted on the property designated above and was classified unsuitable for the installation of a ground absorption sewage disposal system. A copy of the site evaluation report is enclosed for your information.

Sites classified as unsuitable may be utilized for soil absorption systems provided engineering, hydrogeologic, soil and environmental studies indicate that a suitable septic tank system or a suitable alternate system can be reasonably expected to function satisfactorily.

If you desire to file for permission to install an alternate system, please submit your proposals, in the form of plans and specifications, to this office. They will be reviewed and if it is found that the system may be reasonably expected to function satisfactorily, approval will be given upon the submission by you of "Septic Tank Agreement Form" provided by this office.

If I may be assistance, please feel free to call.

Sincerely,

John R. Adkisson
John R. Adkisson
Consumer Services Programs Manager

JRA:kbg

Enclosure

APPLICATION FOR AN IMPROVEMENT PERMIT

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

(OFFICE USE ONLY)
FILE: 19629
TC:
SERIAL: № 18826

ENVIRONMENTAL HEALTH DIVISION ☑ CRT

JOB LOCATION

① ADDRESS: 10316 Rozelle's Ferry Rd. (STREET NO / STREET) ② FILE:
③ JURISDICTION: Mecklenburg ④ TAX PARCEL NO.: 033-124-42
⑤ SUBDIVISION: NA ⑥ LOT: NA ⑦ BLOCK: NA

OWNER

⑧ NAME: (D) Jimmy (FIRST) Wayne (MIDDLE) Richardson (LAST)
⑨ MAILING ADDRESS: 10316 Rozelle's Ferry Rd
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28214
⑬ PHONE: (WORK) (704) 398-3218 ⑭ (HOME) (704) 393-0568

REQUEST

This request is for a(n):

⑮ ☐ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☑ Other (specify) Addition to existing Bldg (Electrical Engineering)

DESIGN CRITERIA

System will serve:

⑲ ☐ Residence ⑳ ☐ Mobile home
㉑ ☑ Business or place of public assembly
㉒ Number of bedrooms?
㉓ Maximum occupancy?
㉔ Basement? ☐ yes ☐ no
㉕ Type? Parking Lot (Metal)
㉖ Maximum number of employees? 2
㉗ Maximum number of seats? N/A

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☑ Individual well
B ☐ Municipal system
C ☐ Community well
D ☐ Community system

㉙ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Jimmy Richardson
Date: July 11, 1989

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

... No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by this Department.

... This permit is not transferable, and shall become null and void 36 months from the date of issuance. Many Use of Existing System

Environmentalist — Date: 8/16/89

Director or Authorized Section Head — Date:

* This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.

HECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

DATE: 7/21/89

NAME/COMPANY: Whittle Building Shop

Sanitation ____

Vector Control ____

OPWD ✓

SERVICE: MP - 1.50.

19639

M...
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
JUL 13 1989

FEE: 25.00

Check 1521
$25.00

K Z
Completed By

T. Jenkins
Collected By

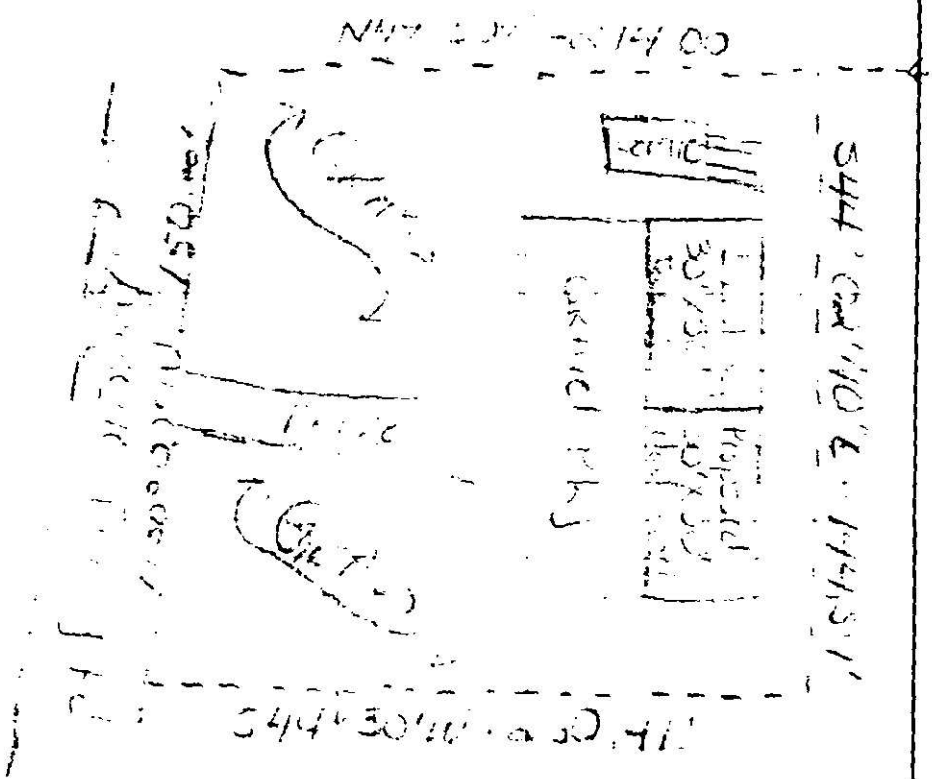
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 19629

TC: _____

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Signed: Dennis Clarkson

Date: July 11, 1985

DATE

I[illegible] PERMIT

FRO[illegible]

JURISDICTION Heck

[illegible] 124-42
PARCEL NUMBER

10310 Rozell Ferry Rd
[illegible] STREET ADDRESS (ADDRESS OF RECORD)

[illegible] ADDRESS (IF DIFFERENT FROM ASSIGNED)

[illegible]
[illegible] NAME (IF APPLICABLE)

THE A[illegible] [illegible] HAS CHECKED CONCERNING

1.	[illegible]	APPROVED	[illegible]
2.	[illegible]	[illegible]PROVED	NOT APPROVED
3.	EROSION [illegible]	APPROVED	NOT APPROVED
	[illegible]	APPROVED	NOT APPROVED
5.	PUBLIC UTILITY EASEMENT	PRESENT	NOT PRESENT
6.	PROPERTY FRONTS ON [illegible]	Y[illegible]	NO
7.	DRIVEWAY PERMIT REQUIRED	YES	NO

REMARKS: Adjustable to 4 x 2 solution

NOTE: THIS FORM MUST BE [illegible] IN AT THE CASHIERS OFFICE WHEN PAYING PERMIT FEE. CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

7/7/88
ALL OTHE[illegible] ARE OBSOLETE

☐ NEW ADDRESS

SIGNED: JPW

[illegible] 89 05/23 13[illegible]

This building was constructed in October of 1982 on a permit issued only as a storage building. The contractor knew it had to be rezoned before a proper permit was granted. He was anxious to make a sale.

The property has been rezoned. It was constructed to be used as a Paint and Body Shop. There will be a maxium of two employees. The only plumbing facilities will be a Comode and a Lavatory.

John H. Rozzelle

Serial No. 6489

SIR No. 19629

Date Issued 5-27-83

T. C. No. 023-124-42

Map Date

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 Rozzelle, (LAST) John (FIRST) Hooper (MIDDLE)

ADDRESS OF OWNER Rt. 9, Box 156, Charlotte, NC ZIP 28208

LOCATION OF LOT 10310 Rozzelle Ferry 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 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 19629. 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,altered, 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.

*** AGREEMENT CARD ON FILE ***

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

COPY

SEPTIC TANK AGREEMENT 1929

The undersigned, John H. Rozzelle, owner of property located at 10300 Rozzelles Ferry Rd ("the site") and described in instrument recorded in Book 4600 at Page 772, Mecklenburg Public Registry, hereby acknowledges that he applied to the Department of Environmental Health for a permit to install a septic tank sewage disposal system on the site; the Department evaluated the site for suitability for such a system in accord with the regulations promulgated by the North Carolina Commission for Health Services as 10 NCAC 10A .1900 et seq; that the Department classified the site as unsuitable and an appropriate permit was issued by the Department.

The undersigned further acknowledges that the proper design, construction and maintenance of such septic tank system is his responsibility and that neither the Department nor its officials, employees or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for damages, consequential or direct, which are caused, or which may be caused by a malfunction of such system.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

And the undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department and its successors, as well as Mecklenburg County, for any damages or other claims of any person or persons whatsoever arising out of the installation operation, or failure of said septic tank system.

And the undersigned further agrees for his heirs and assigns that, in the event any septic tank system installed under authority of the aforesaid permit fails to perform adequately, in any respect, he will take whatever measures are required to correct same; or if such is impossible he will discontinue use of said system immediately.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This 19th day of May, 1983

John H. Rozzelle (Seal)
(Seal)

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, Marlene Wise, a Notary Public for said County and State, do hereby certify that John H. Rozzelle personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 19th day of May, 1983

Marlene Wise
Notary Public
My Commission Expires: 3-15-88

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, _____, a Notary Public for said County and State, do hereby certify that _____ personally came before me this day and acknowledged that he is _____ of _____, and that by authority duly given and as the act and deed of said corporation, the foregoing instrument was signed in its name by its _____, sealed with its corporate seal and attested by _____.

WITNESS my hand and notarial seal, this _____ day of _____, 19 ___.

Notary Public
My Commission Expires: _____

MECK COUNTY DEPARTMENT OF
RECEIVED
MAY 20 1983
ENVIRONMENTAL HEALTH

Date Issued 2 June 1967 Serial No. 6328 ICAR(S) Permit No. 19629

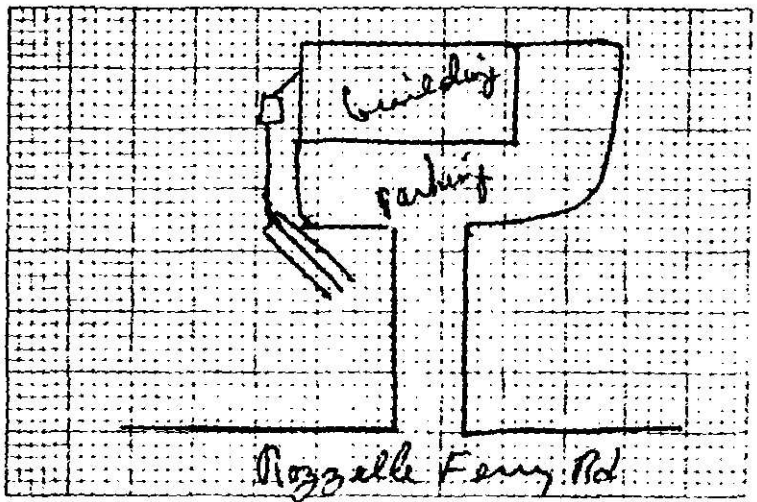
T C No 023-124-42

Map Date —

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 19629 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 20 June 1967, after which date this permit shall be null and void.

agreement on file



PLOT OF SYSTEM

Permeability Rate IVB

Liquid Capacity of Tank 1000 gal

Tank Construction pre cast

Absorption and or Nitrification Lines:

Total Line Length 150

Number of Lines 3

Distance from House 10

Distance from Property Line 10

Distance from Well 100' +

NAME OF OWNER Rozzelle, John

LOCATION OF PROPERTY 10310 Rozzelle Ferry Rd

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. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed 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.

In bed 6 X 50 X 17" + 6" sand

Comments: _____

_____ John R. Adkisson

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 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

C of A (s) No. 19629

Date Issued 2 June 1987 Serial 5881

T. C. No. 023-124-42

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner Rozzelle, John (LAST, FIRST, MIDDLE)

Location of Property 10310 Rozzelle Ferry Rd

Application Number _____ Permit Number 19629

Inspection Data:

Liquid Capacity of Tank 1000 gal Tank Material pre-cast

Total Length of Drain Tile 150 Number of Lines 3

Depth of Filter Material 17" to 6" sand Cover Depth 12"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected ✓ Tank Inspected 2 June 1987 (DATE)

Nitrification Field Inspected 2 June 1987 (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 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(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: As permitted

John R. Adkinson
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY