Date Received _____ Apt. No. (S) _____ Application No. (W) 15678

T. C. No. 43-081 23

Map Date 4-4-79

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Allison Joe
LAST FIRST MIDDLE

ADDRESS OF OWNER P.O. Box 3232 Christ ZIP 28203

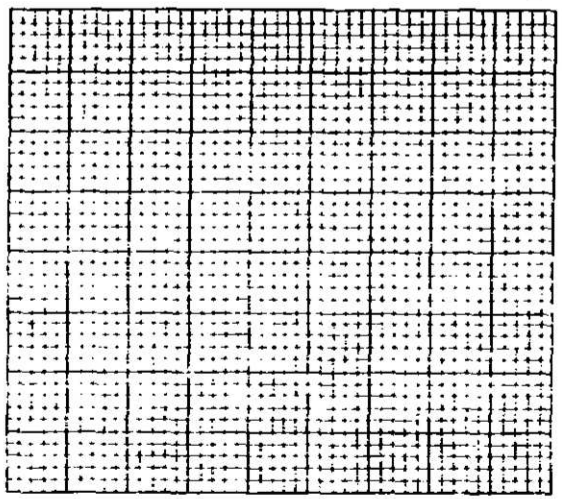
PHONE NO. Home 375-3567 Office

LOCATION OF PROPERTY ~~Unnamed~~ Rd off West Blvd Dawnlia D.C.
STREET OR COUNTY ROAD

WELL CONTRACTOR _____ LICENSE NO. _____

Application is hereby made to the Mecklenburg County Department of Environmental Health 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.

DATE OF APPLICATION _____ OWNER Joe T. Allison



ACCURATELY DIAGRAM & DIMENSION LOT

Remarks

Application approved and permit hereby granted

Permit No: _____

_____
ENVIRONMENTALIST

EHD-5-76

Environmental Health Department's Copy

Date Received 6/5/79

APT No. 15678

T. C. No. 143.081.23

Map Date 4-4-79

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Allison (LAST) Joe (FIRST) (MIDDLE)

2) ADDRESS OF OWNER P.O. Box 3232 Christ ZIP 28203

3) PHONE NO Home 375-3567 Office

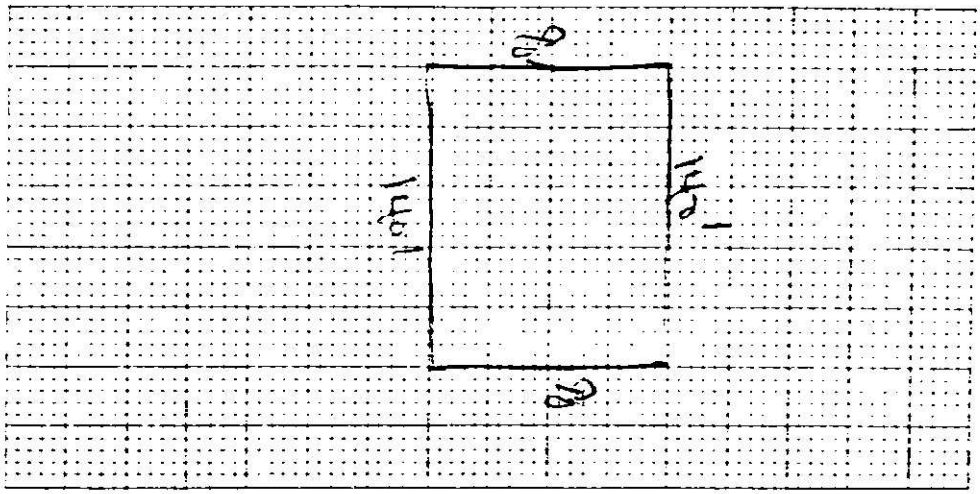
4) LOCATION OF PROPERTY ~~Unname Rd off West Blvd~~ Dawnlift Dr. (STREET OR COUNTY ROAD)

5) SUBDIVISION LOT NO 23 BLOCK NO.

MAP BOOK NO 2414 PAGE NO 84

6) DEED REFERENCE DEED BOOK ~~3429~~ PAGE NO ~~2414~~

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

Joe L. Allison
OWNER

EHD-5-76

Environmental Health Department's Copy

NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX H
SITE EVALUATION

15678
TC. 143-081-23

(Ground Absorption Sewage Disposal)

OWNER: JOE ALLISON
ADDRESS: P.O. Box 3232
COUNTY: Meck. 28203
LOCATION OF SITE: Dawnlia Drive

DATE REQUESTED: 6-5-79
PLAT NO.:
LOT SIZE: 12,600

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) 2-10 U	S (PS) 2-10 U	S PS U	S PS U +
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S (PS) Clayey U	S PS 2-1 (U)	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S (PS) Blocky U	S PS Massive (U)	S PS U	S PS U
4. SOIL DEPTH (In.)	S (PS) 48" U	S PS >47" (U)	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Imprevious Strata, Rock)	S (PS) None U	S PS Clay (U)	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	S (PS) Adequate U	S PS Slow (U)	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) Moderate U	S PS Slow (U)	S PS U	S PS U
8. OTHER (Specify) Size *	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	Provisionally Suitable	Unsuitable		
SOIL SERIES	Cecil	Wilkes		

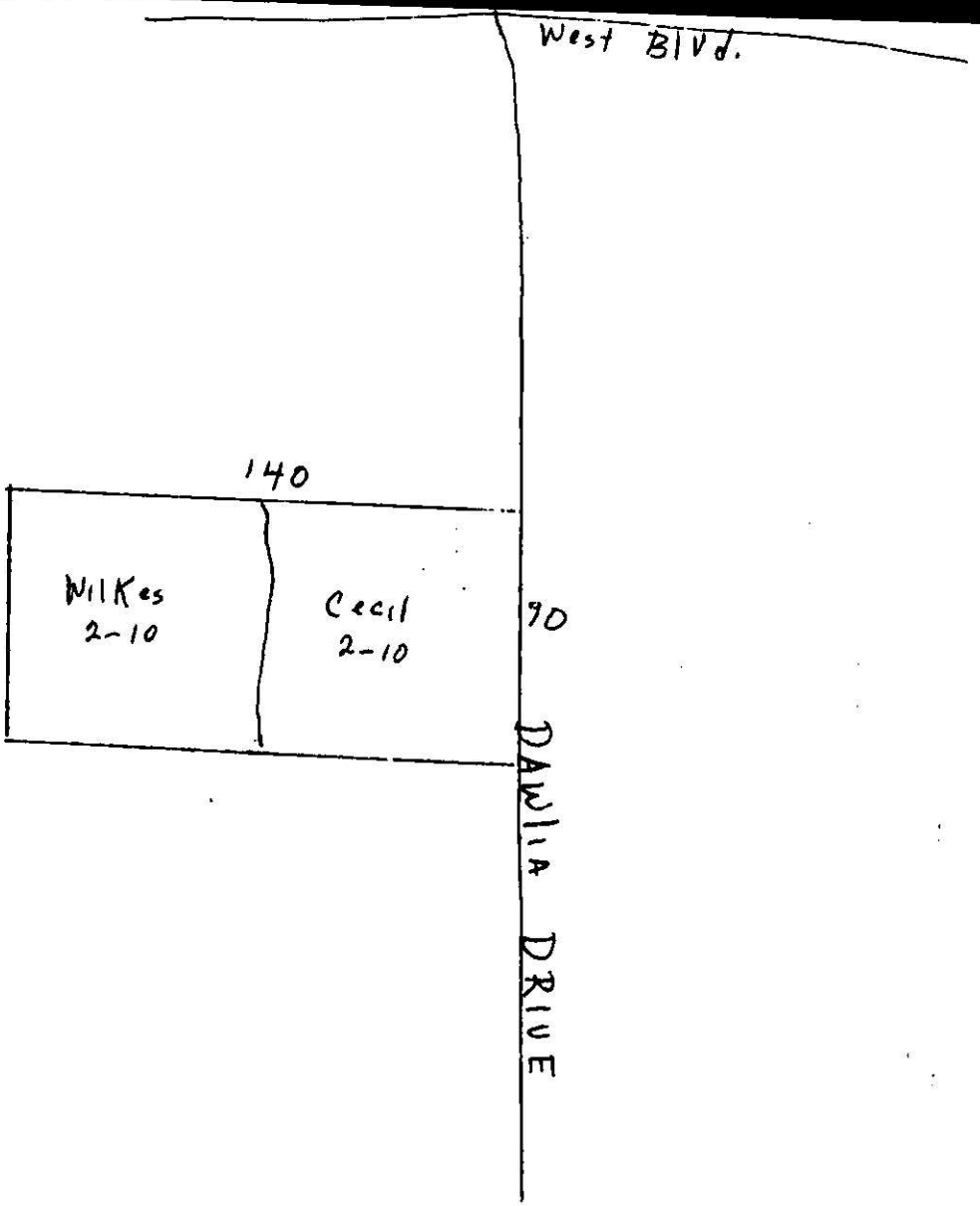
S - Suitable PS - Provisionally Suitable U - Unsuitable

* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

Recommendations/Comments: Small Lot And Small Suitable Area

Described By: W. B. Ramsey
Title: Soil Scientist Date: 7-16-78

DHS Form 2601 (2/77)
Sanitation


West Blvd.
140
Wilkes
2-10
Cecil
2-10
90
DAWLIA DRIVE

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203

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

SIR.NO. 15678
T.C. NO. 143-081-23
MAP DATE 4/4/79
DATE 7/18/79

NAME OF OWNER Allison, Joe

ADDRESS OF OWNER PO Box 3232 Charlotte, NC 28203

LOCATION OF LOT Dawnlia Drive Lot 23

As determined under the Rules and Regulations promulgated by the Commission for Health Services, Division of Health Services, North Carolina Department of Human Resources, Raleigh, North Carolina, the soils on the lot described above were found to be unsuitable for the installation of an individual septic tank-soil absorption system. [redacted]

Inadequate area available for installation of ground absorption sewage disposal system in accordance with North Carolina Department of Human Resources specifications.

Please submit plot plans of proposed construction.

John R. Adkisson, Environmentalist

EHD 398
7/77

R

SEE INSTRUCTIONS ON BACK

Date Received 6/5/79

ICAR (S) Application No. 1567B

T C. No. 43.08123

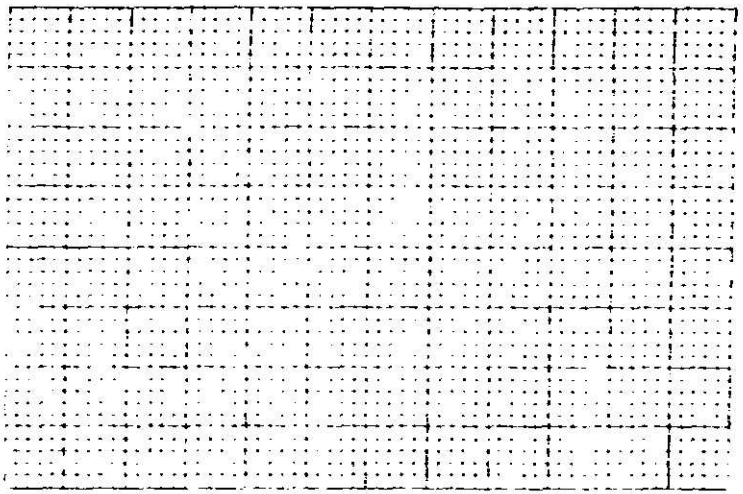
Map Date 4.4.79

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.



3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ___Yes ___No
Residence X Yes ___ No
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 ___
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 Allison (LAST) Joe (FIRST) ___ (MIDDLE)

14) ADDRESS OF OWNER P.O. Box 3232 28203

15) PHONE NO. Home 375-3567 Office ___

16) LOCATION OF SYSTEM ~~W. Wames~~ Rd - Off West Blvd DAWNITA DR. (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No 23 Block No. ___

Map Book No. 2414 Page No. 84

18) DEED REFERENCE — DEED BOOK 4129 AT PAGE 0414

19) HAS A SOIL INVESTIGATION 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.

DATE OF APPLICATION ___

OWNER Joe L. Allison

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY