Date Received 6-26-73

APT No. 6537

T. C No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER (LAST) Lawing's (FIRST) Incorporated* (MIDDLE)

2) ADDRESS OF OWNER 5521 Bellhaven Blvd ZIP 28208

3) PHONE NO Home — Office 399-6372

4) LOCATION OF PROPERTY ½ mile West OF (STREET OR COUNTY ROAD) Highway 16 west, ½ mile past Shuffletown

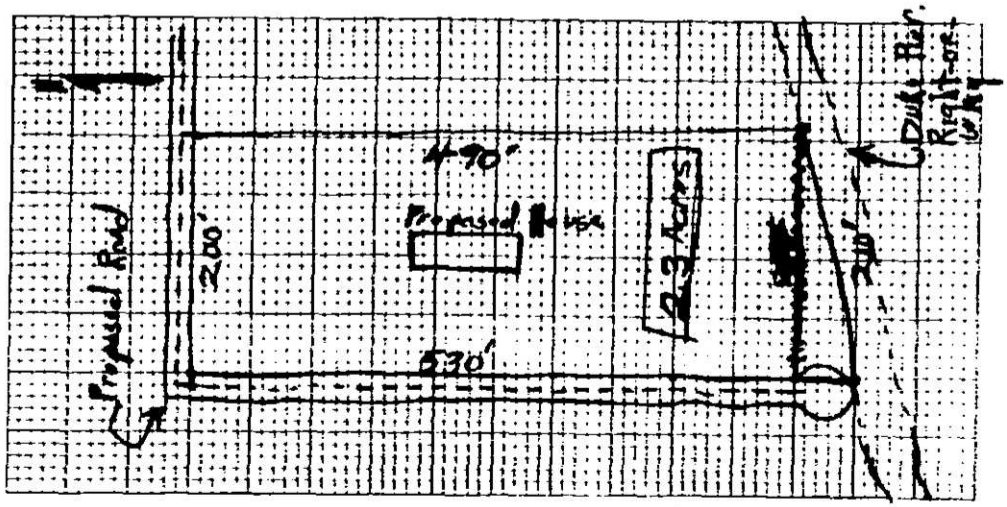
5) SUBDIVISION None LOT NO — BLOCK NO —

MAP BOOK NO — PAGE NO —

6) DEED REFERENCE DEED BOOK 3373 PAGE NO 325

* Please Send Results to Robert F. Edmonds, Jr 116 Park Fairfax Dr, Charlotte, NC 28208 Phone 332-4531 ext 49.

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

Robert F. Edmonds Jr.
OWNER Buyer

116 Park Fairfax Dr
Charlotte N.C. 28208

FORM NO E-1-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3263

PTR No. 6537

T. C. No PO 031-183-03

Date Issued June 29, 1973

Map Date 4-27-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

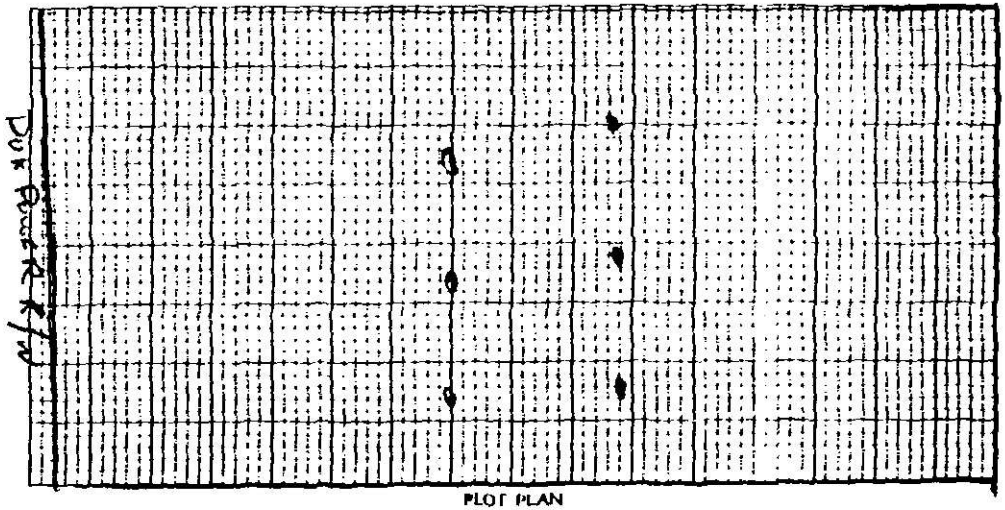
PERCOLATION TEST REPORT

NAME OF OWNER Lewing's Incorporated (LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 5521 Belhaven Boulevard ZIP 28208

LOCATION OF PROPERTY Highway 16 (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 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.

J. R. Buchanan

Director, Environmental Health Division or
Authorized Section Head

FORM NO E-2-4-1-71

HEALTH DEPARTMENT'S COPY

Date Received 4-4-74

RECEIVED
APR 4 1974
MECK. COUNTY HEALTH DEPT.
ENVIRONMENTAL HEALTH DIVISION

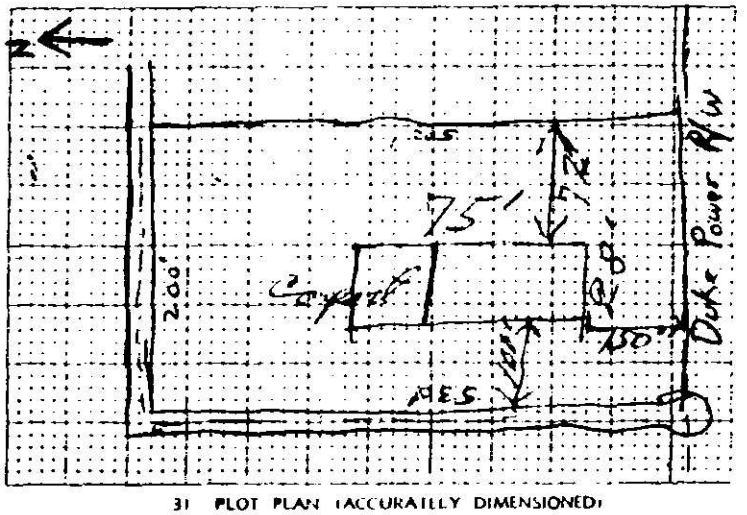
(CARES) Application No 6537
T C No 031-183-03
Map Date 4-27-73

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



4) No of Bedrooms 5
5) Income - 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 Government System
C Community System
1 Well source
2 Government
10) Sewage System
House located within 200' of public sewer Yes ✓ No
House located within 200' of community sewer Yes ✓ No
11) FHA Case No
12) VA Case No

13) PLOT PLAN (ACCURATELY DIMENSIONED)

13) NAME OF OWNER Edmonds (LAST) Robert (FIRST) Fredrick, Jr. (MIDDLE)

14) ADDRESS OF OWNER 116 Park Fairfax Dr.

15) PHONE NO Home 392-4531 Office 374-4976

16) LOCATION OF SYSTEM ¼ mile west of Hwy. 16 (STREET OR COUNTY ROAD) Highway 16, ¼ mile past Shirleton

17) SUBDIVISION None Lot No _____ Block No _____

Map Book No _____ Page No. _____

18) DEED REFERENCE — DEED BOOK 3605 AT PAGE 359

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES _____ NO DATE RUN 6-28-73 & 6-?

20) PTR NUMBER (See Instructions) 6537

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.

4-1-74
DATE OF APPLICATION

Robert F. Edmonds Jr.
OWNER

E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued April 4, 1974

Serial No. 3956

LA No. 6537
P.O.
T C No. 031-183-03

IMPROVEMENTS PERMIT

Map Date 4-27-73

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 Edmonds (LAST) Robert (FIRST) Fredrick, Jr. (MIDDLE)

ADDRESS OF OWNER 116 Park Fairfax Drive ZIP

LOCATION OF LOT Highway 16 (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 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 6537. 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-3-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 6161

Date Issued 7 Mar 75

ICAR(S) Permit No. 6577

T C No. 631-283 & 3

Map Date 23

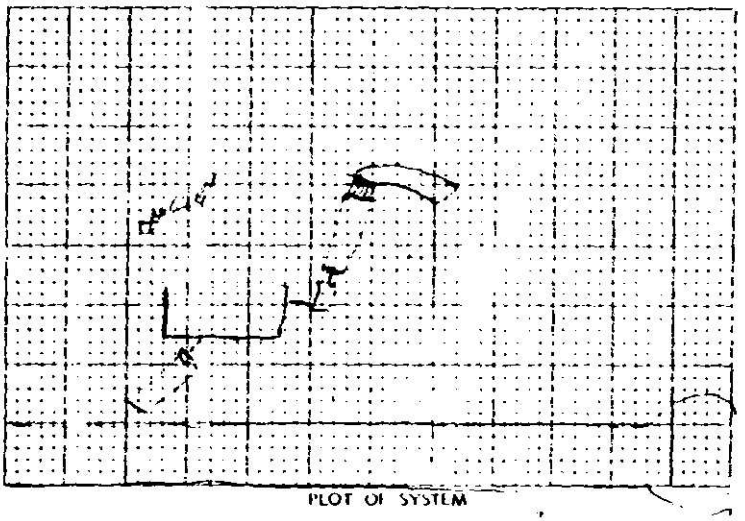
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 6577, dated 26 Feb 75 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 7 Mar 75, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 1000

Tank Construction RC

Absorption and/or Nitrification Lines

Total Line Lenght 60' + 30' + 60' + 30' + 60' + 30'

Number of Lines 6 (3 Lines 2 Trenches)

Distance from House 20'

Distance from Property Line 50'

Distance from Well 75'

NAME OF OWNER [illegible]

LOCATION OF PROPERTY [illegible]

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]

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.

E-5-9-1-72

Serial No. 5659

C of A (s) No. 6537

Date Issued [illegible]

T C No C31-1336

Map Date [illegible]

CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner [illegible] (LAST) [illegible] (FIRST) [illegible] (MIDDLE)

Location of Property [illegible] Hwy 16

Application Number 6537 Permit Number 6537

Inspection Data:

Liquid Capacity of Tank 1000 Tank Material [illegible]

Total Length of Drain Tile [illegible] Number of Lines [illegible]

Depth of Filter Material [illegible] Cover Depth [illegible]

Water Supply Source [illegible] Distance from Water Source [illegible]

Excavation Inspected [illegible] (DATE) Tank Inspected [illegible] (DATE)

Nitrification Field Inspected [illegible] (DATE)

Washing Machine Line Inspected, If Applicable [illegible] (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 as well as 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 [illegible]

[illegible]
Environmentalist

FORM NO E-6-9-1-72

[illegible]