Date Received 11-14-73 APT No. 7226

T. C. No. 091 221-04 G

Map Date 4 Mar 74

# MECKLENBURG COUNTY HEALTH DEPARTMENT

## ENVIRONMENTAL HEALTH DIVISION

### APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Swearngan (LAST) Clarence (FIRST) Le Roy (MIDDLE)

2) ADDRESS OF OWNER 4603 Shea Lane Matthews NC ZIP 28105

3) PHONE NO. Home 5456907 Office _____

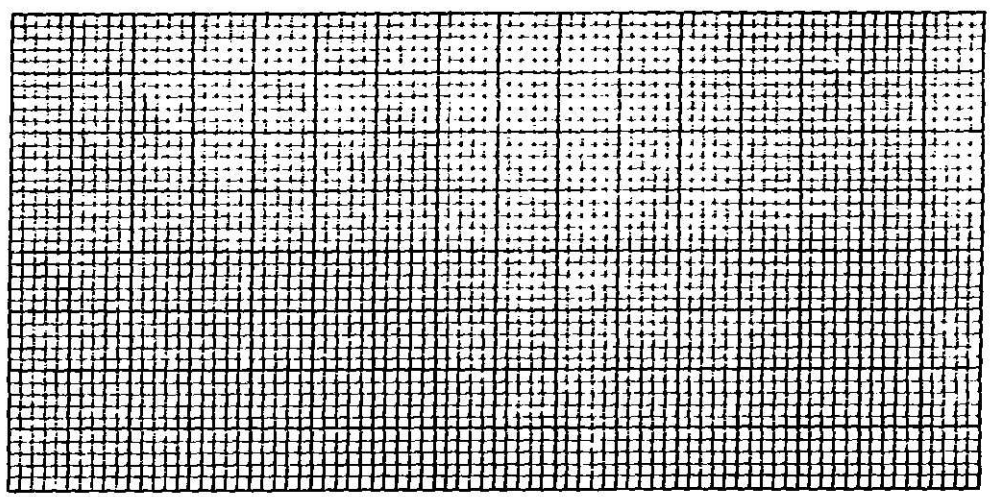
4) LOCATION OF PROPERTY Lake Norman - Sec 2 Lot 124 (STREET OR COUNTY ROAD)

5) SUBDIVISION Duke Power LOT NO. 124 Sec 2 BLOCK NO. _____

MAP BOOK NO _____ PAGE NO. _____

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 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

Clarence LeRoy Swearngan
OWNER

FORM NO. E-1-8-1-72

HEALTH DEPARTMENT'S COPY

# Serial No. 3831

PTR No. 7226

T. C. No. 001-221-04 Q

Date Issued November 21, 1973

Map Date N 3-4-72

**Do Not Issue A Building Permit Based On This Form**

# MECKLENBURG COUNTY HEALTH DEPARTMENT

## ENVIRONMENTAL HEALTH DIVISION

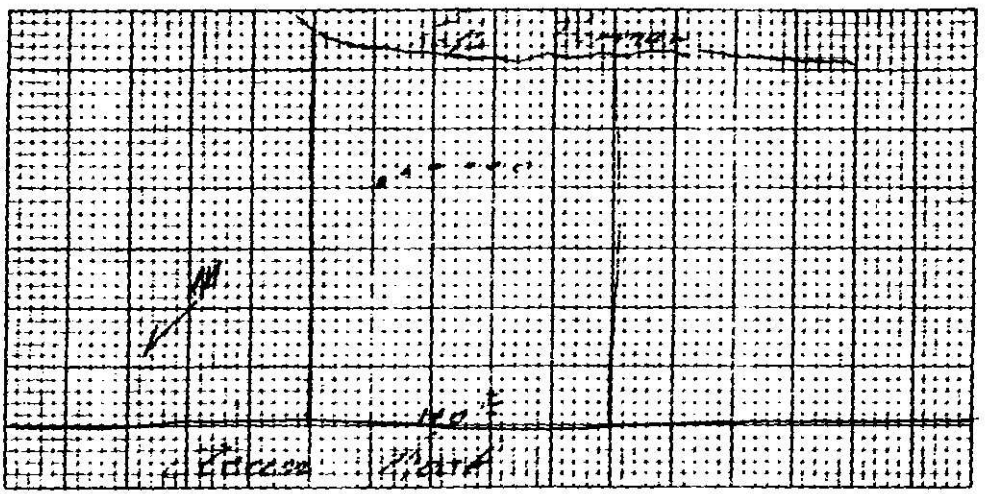
## PERCOLATION TEST REPORT

NAME OF OWNER Swearngan (LAST) Clarence (FIRST) LeRoy (MIDDLE)

ADDRESS OF OWNER 4603 Shea Lane, Matthews, N.C. ZIP 28105

LOCATION OF PROPERTY Lake Norman (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO. 124 BLOCK NO. 2



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 30 min/in. The said lot is approved for the installation of an individual septic tank wastewater treatment system with sub-surface, 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 waste water 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 wells) 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 Sanitarian Head

FORM NO. E-2-8-1-72

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 11-14-73

ICAR(S) Application No 7226

T C No 001-221 C4 a'

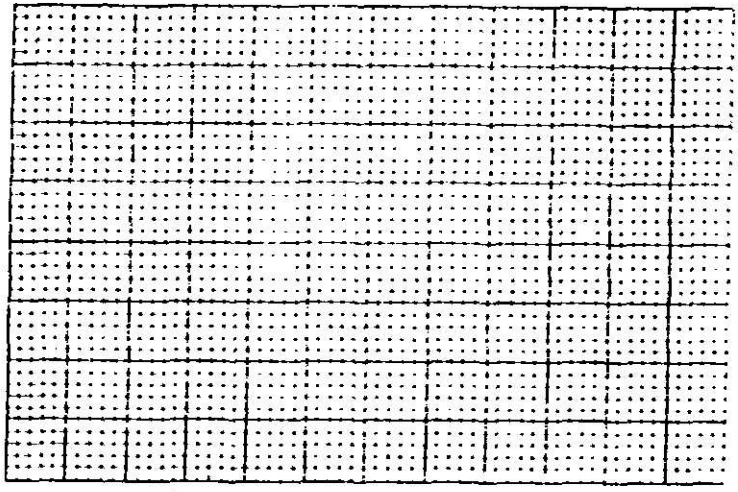
Map Date 4 Mar 72

# 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 3

5) Business Use - Max No Employees _____

6) Washing Machine X Yes _____ No

7) Garbage Disposal _____ Yes _____ No

8) Dishwasher X Yes _____ No

9) Water Supply
- A) Individual Well X
- B) Government 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 Swearngan (LAST) Clarence (FIRST) LeRoy (MIDDLE)

14) ADDRESS OF OWNER 4603 Shea Lane Matthews N.C.

15) PHONE NO. Home 545 6927 Office _____

16) LOCATION OF SYSTEM _____ (STREET OR COUNTY ROAD)

17) SUBDIVISION Lake Norman - Dockery Lot No. Sec - 2 Lt 124 Block No. _____

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A PERCOLATION TEST BEEN RUN? X YES _____ NO DATE RUN 11-14-73

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.

11-14-73
DATE OF APPLICATION

LeRoy Swearngan
OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3635

LA No. 7226 R

Date Issued November 21, 1973

T. C. No. 001-221-04 Q

IMPROVEMENTS PERMIT

Map Date 3-4-72

# 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 Swearngan (LAST) Clarence (FIRST) LeRoy (MIDDLE)

ADDRESS OF OWNER 4603 Shea Lane, Matthews, N.C. ZIP 28105

LOCATION OF LOT Lake Norman (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO 124 BLOCK NO. 2

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 30 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 7226. 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.

W. H. Kirby
Environmentalist

John R Adkisson
Director, Environmental Health Division or Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

Serial No. 4633

Date Issued 10 Jan 72

ICAR(S) Permit No. 7226

T. C. No. 021 - 221-01 &

Map Date 4 Jul 22

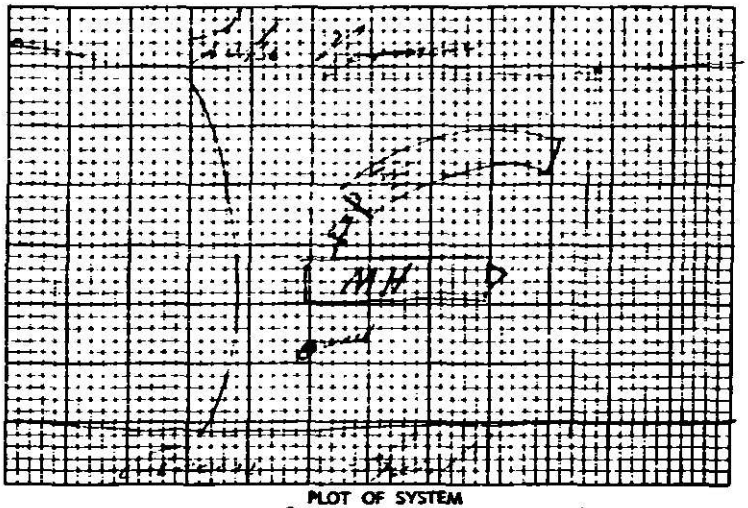
# MECKLENBURG COUNTY HEALTH DEPARTMENT

## 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 7226, dated 14 Dec 71, 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 2 Dec 73, after which date this permit shall be null and void.




PLOT OF SYSTEM

Percolation Rate 30

Liquid Capacity of Tank 1000

Tank Construction C

Absorption and/or Nitrification Lines:

Total Line Lenght 300'

Number of Lines 4(10'X75'X12")

Distance from House 10'

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: Hand (CC)

Division or Section Head

[signature] 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 4192

C of A (s) No. 7726

Date Issued 24 May 73

T. C. No. 021-111-54-01

Map Date 4 May 73

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 Lawrence (LAST) Thomas (FIRST) [illegible] (MIDDLE)

Location of Property [illegible] (3rd Fl) [illegible]

Application Number 7726 Permit Number 7726

**Inspection Data:**

Liquid Capacity of Tank 1000 Tank Material Conc

Total Length of Drain Tile 30' Number of Lines 4 (10' 7" 11")

Depth of Filter Material 17" Cover Depth 18"

Water Supply Source Well Distance from Water Source 75'

Excavation Inspected 24 May 73 (DATE) Tank Inspected 24 May 73 (DATE)

Nitrification Field Inspected 24 May 73 (DATE)

Washing Machine Line Inspected, If Applicable N/A (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: J. Stuart (Cont.)

Environmentalist

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

HEALTH DEPARTMENT'S COPY