Date Received 3/3/78

APT No. 13788

W. H. Allred
P.O. Box 375 - Pineville, N.C. 28134

T. C. No. 217-61-3

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER TO Enterprises, Inc.
(LAST, FIRST, MIDDLE)

2) ADDRESS OF OWNER 810 Baxter St., Charlotte ZIP 28203

3) PHONE NO Home 588-1560 Office 333-0511

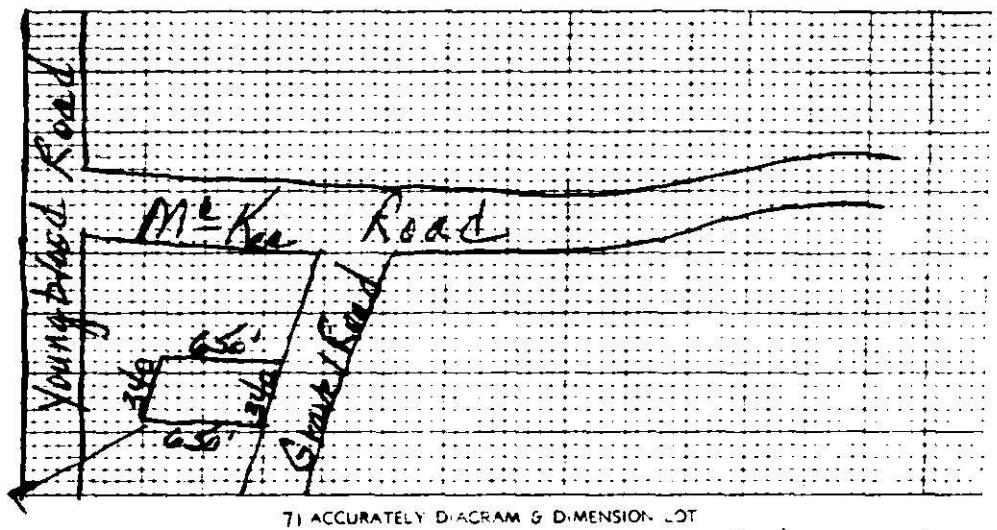
4) LOCATION OF PROPERTY Off McKee Road
(STREET OR COUNTY ROAD)

5) SUBDIVISION LOT NO BLOCK NO.

MAP BOOK NO PAGE NO

6) DEED REFERENCE DEED BOOK 3289 PAGE NO 523

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



+ 3.51 tract on right

7) ACCURATELY DIAGRAM & DIMENSION LOT

J. F. Odom, Jr. C
OWNER

EHD-5-76

Environmental Health Department's Copy

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

APPENDIX B
SITE EVALUATION

AI'T 13788

(Ground Absorption Sewage Disposal)

OWNER: 10 Enterprise Inc
ADDRESS: 310 Austell St. Cha. NC 28202
COUNTY: Mecklenburg
LOCATION OF SITE: off McKee Rd

DATE REQUESTED: 3-30-78
PLAT NO.: 217-061-03
LOT SIZE: 22,000 Ft²

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS 2-30% U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S (PS) Some silt U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S (PS) blocky U	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	S (PS) 4'± U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock)	S (PS) ≥4' U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) PS none noted U	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) 90 mpi U	S PS U	S PS U	S PS U
8. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	provisionally Suitable			
SOIL SERIES	Cecil [illegible]			

S - Suitable PS - Provisionally Suitable U - Unsuitable

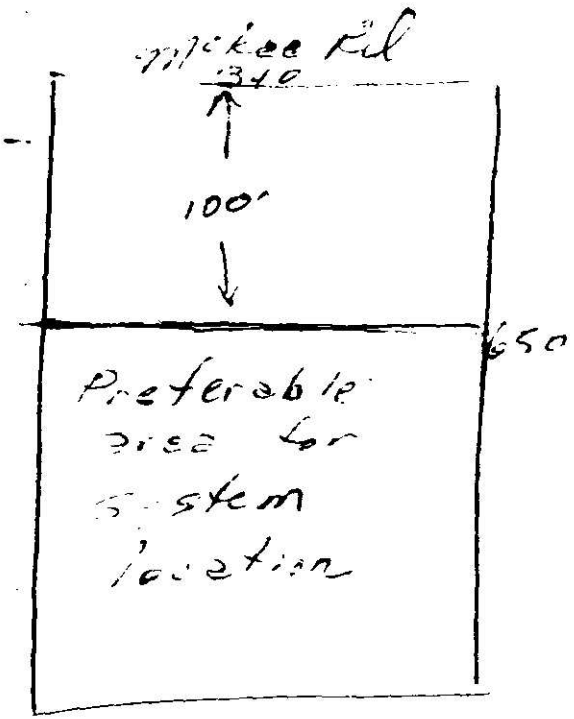
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

Recommendations/Comments: Based on this investigation it is the opinion of this Sanitarian that a conventional subsurface sewage disposal system may be installed to serve the proposed

Described By: J P Linkenauger

Title: [illegible] Date: 4-5-78

DHS Form 2601 (2/77)
Sanitation


Mckee Rd
340
100'
650
Preferable
area for
system
location

Serial No. 1731

PTR No. _____

T C No. 217-061-03

Date Issued 4/14/78

Map Date -

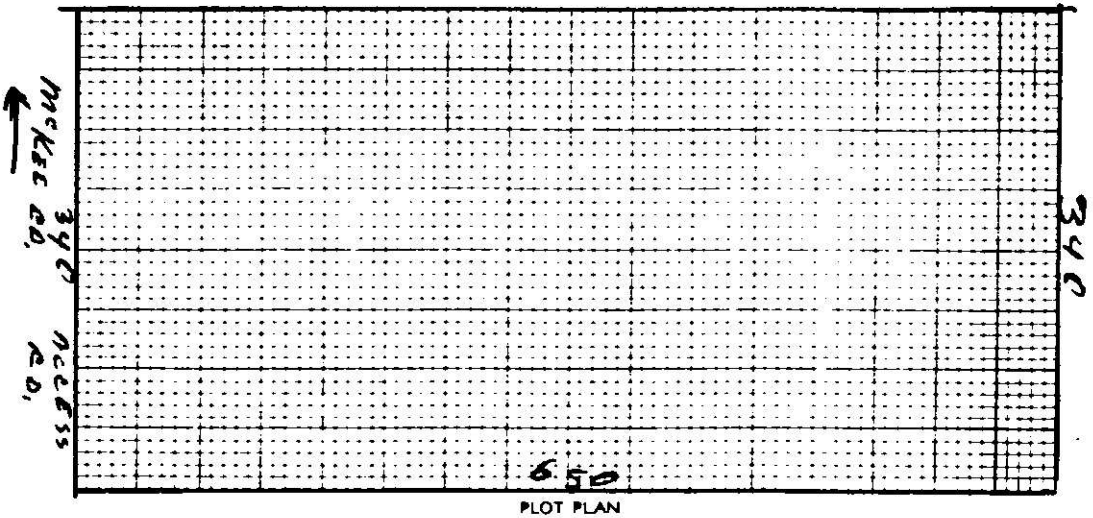
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER 70 Enterprises, Inc.

ADDRESS OF OWNER 810 Baxter St., Charlotte, N. C. ZIP 28202
(LAST, FIRST, MIDDLE)

LOCATION OF PROPERTY Off: McKee Road
STREET OR COUNTY ROAD

SUBDIVISION _____ LOT NO _____ BLOCK NO _____



PLOT PLAN

This is to certify that a soil investigation and on-site investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The said investigation was conducted on that portion of the lot as indicated on the above plot. **Provisionally Suitable**

The permeability rate determined by the investigation was _____. 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 complete installation sketch showing the septic system must be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction 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 Mecklenburg County Department of Environmental Health prior to issuance of a permit in accordance with the permeability rate obtained above and on the size and type of building that will be served.
3. This approval is valid only for the system as located on the immediately above indicated acceptable area for system installation on the above plot.
4. This approval is void if any grading or other construction activities including the installation of water lines is performed on the lot which is the subject of this approval prior to inspection by the Mecklenburg County Department of Environmental Health of the specific area indicated as acceptable for system installation and prior to installation construction permit issuance for the said system.

This approval is granted based on the laws of the State of North Carolina and the rules and regulations of the North Carolina Department of Human Resources, Division of Health Services and the Mecklenburg County Health Commission which were in effect on the date of issuance and is void if at any time in the future, prior to 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.

L P Bridgeman
EHD-5-76 Environmentalist

J M Reynolds
Environmental Health Director or
Authorized Section Head

Environmental Health Department's Copy

Date Received 11/28/79

ICAR(S) Application No. 13788

T C No. 217-061-03

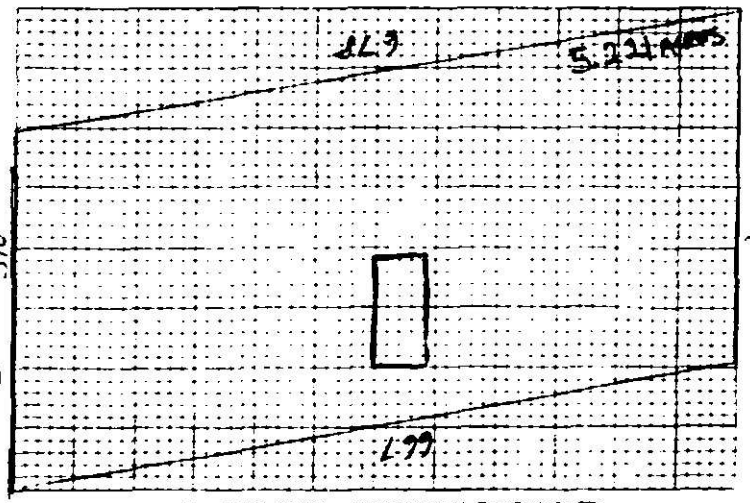
Map Date

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



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 X Yes ___ No
7) Garbage Disposal ___ Yes X No
8) Dishwasher ___ Yes X No
9) Water Supply
A Individual Well X
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 HUNTLEY (LAST) AARON (FIRST) C. (MIDDLE)

14) ADDRESS OF OWNER [illegible]

15) PHONE NO. Home 535-[illegible] Office 392-3261

16) LOCATION OF SYSTEM OFF McKEE RD. (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. # 3 & 2 Block No. ___

Map Book No ___ Page No. [illegible]

18) DEED REFERENCE — DEED BOOK 4066 AT PAGE 0[illegible]

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ___ NO DATE RUN 11/78 → B.

20) PTR NUMBER (See Instructions) 13788

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 [signature]

EHD-5-76

Environmental Health Department's Copy

Serial 3656

Date Issued 2-21-80

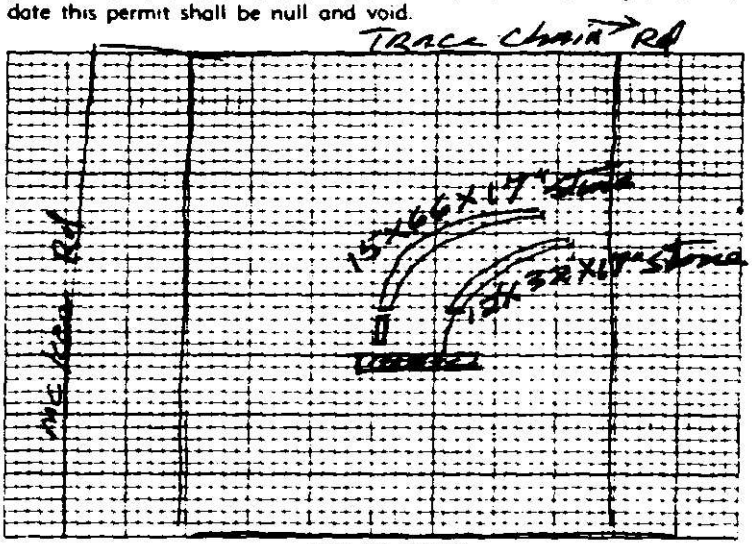
ICAR(S) Permit No. 13788

T. C. No. 217-061-08

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 13788 dated 11-28-79 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 3-31-80 after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate P/S

Liquid Capacity of Tank 1000

Tank Construction P/C

Absorption and/or Nitrification Lines

Total Line Length 330-125

Number of Lines 5-4

Distance from House 10'+

Distance from Property Line 10'+

Distance from Well 50'+

NAME OF OWNER Aaron Huntley

LOCATION OF PROPERTY 977 McKee Rd. Trace Chain 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.

Division or Section Head

Environmentalist Michael Edwards

* 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 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-S-76

Environmental Health Department's Copy

Date Issued 4-18-80 Serial 3645 C of A (s) No. 13788 T C No 217-061-08

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF COMPLETION

CERTIFICATE OF APPROVAL

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

Name of Owner Huntley (LAST) Aaron (FIRST) ____ (MIDDLE)

Location of Property SFS McKee Rd (TRACE CHAIN)

Application Number 13788 Permit Number 13788

Inspection Data:

Liquid Capacity of Tank 1000 Tank Material P/C

Total Length of Drain Tile 330'-125' Number of Lines 5-5

Depth of Filter Material 17" Cover Depth 4'

Water Supply Source Well Distance from Water Source 50'+

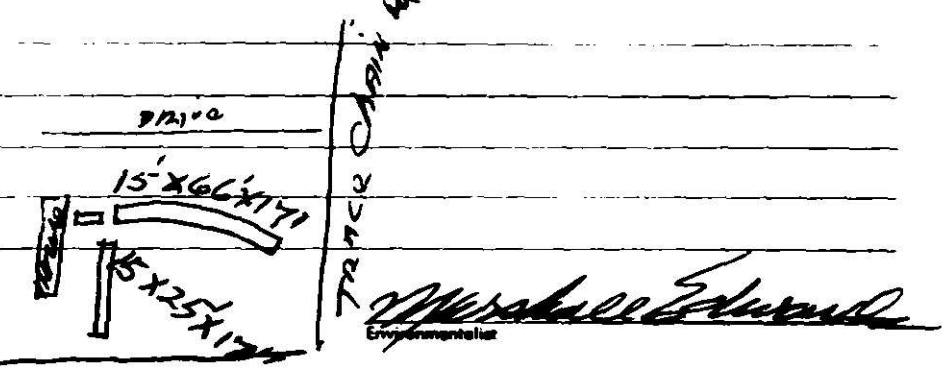
Excavation Inspected 4-18-80 (DATE) Tank Inspected 4-18-80 (DATE)

Nitrification Field Inspected 4-18-80 (DATE)

Washing Machine Line Inspected, If Applicable 4-18-80 (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



Environmentalist

EHD-S-76

Environmental Health Department's Copy