Date Received 7-26-84

SIR No. 21266

T. C. No. 19904121

Map Date 1

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Covil (LAST) Carrol (FIRST) James (MIDDLE)

2) ADDRESS OF OWNER 14300 Shopton Rd West ZIP 28210

3) PHONE NO. Home 588-1332 Office 554 1421

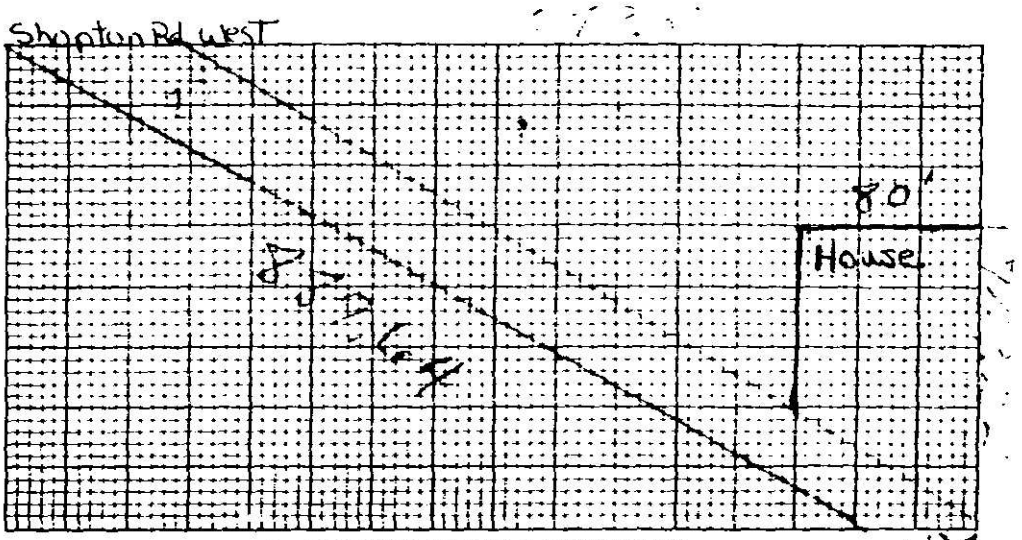
4) LOCATION OF PROPERTY Shopton Rd West (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO _____ BLOCK NO. _____

MAP BOOK NO _____ PAGE NO. _____

6) DEED REFERENCE DEED BOOK 2860 PAGE NO. 132

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

Carrol Covil
OWNER

END-5-76

Environmental Health Department's Copy

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. _____

T.C. NO. _____

(Ground Absorption Sewage Disposal)

OWNER: _____ PLAT NO: _____

ADDRESS: _____ LOT SIZE: _____

LOCATION OF SITE: _____

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS 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	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S PS U	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S PS U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S PS U	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				
9. SITE CLASSIFICATION				
10. SOIL SERIES				

S - Suitable PS - Provisionally Suitable U - Unsuitable

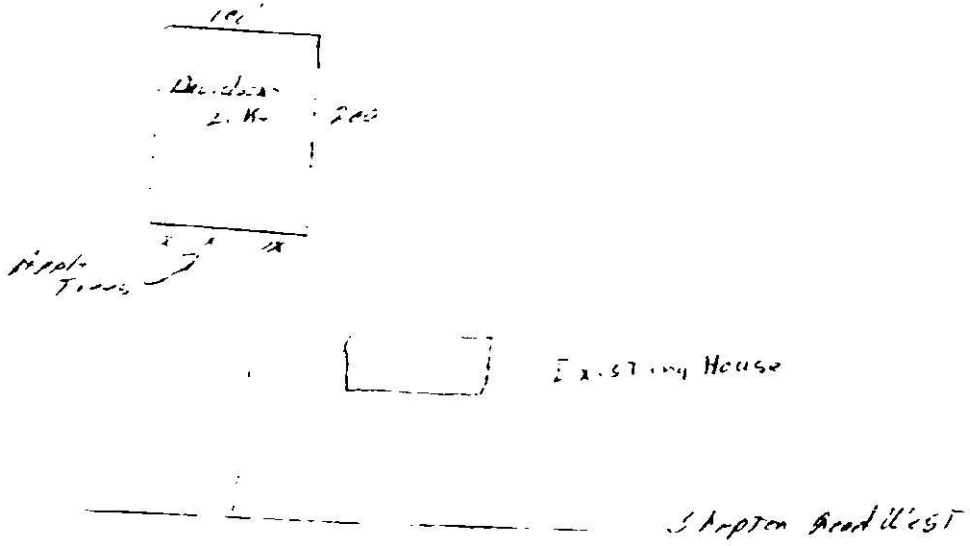
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: _____

Described by: _____

Title: _____

Date: _____


Existing House
Hampton Road West

Serial No. 5814

SIR No. 21256

T. C. No. 199-041-21

Date Issued 8-8-84

Map Date L

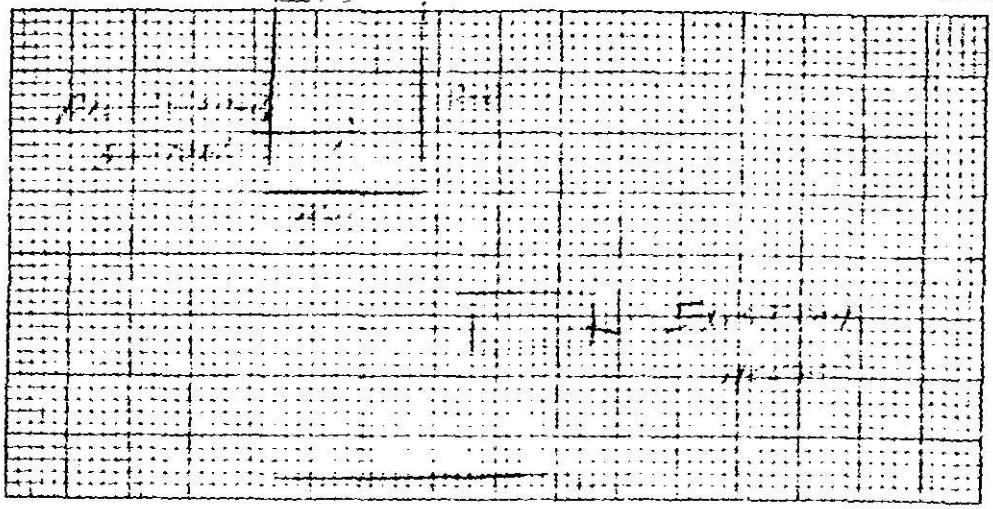
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Covil, (LAST) Carrol (FIRST) James (MIDDLE)

ADDRESS OF OWNER 14300 Shopton Road West, Charlotte, NC ZIP 28210

LOCATION OF PROPERTY 14200 Shopton Road West (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO



PLOT PLAN

This is to certify that a preliminary investigation and/or investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above and that 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 subsurface wastewater treatment system with subsurface soil absorption effluent discharge subject to the following terms and conditions:

1. A permit to install the wastewater treatment system shall be required from the Mecklenburg County Department of Environmental Health prior to any installation. The permit will be for the specific system on the said lot.
2. The size of the septic tank and the layout of the system shall be subject to the determination of the Mecklenburg County Department of Environmental Health according to the rules governing the type and the size and type of building which is there.
3. This approval is valid for [illegible] from the date of issuance. Failure to obtain a permit and installation on the above plot
4. This approval is [illegible] in the opinion of the Mecklenburg County Department of Environmental Health that the proposed subsurface system installation [illegible]

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 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.

Soil Scientist

Environmental Health Director or Authorized Section Head

EHO-5-76

[illegible] Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 7-26-84

ICAR (S) Application No. 21266

T. C. No. 19904121

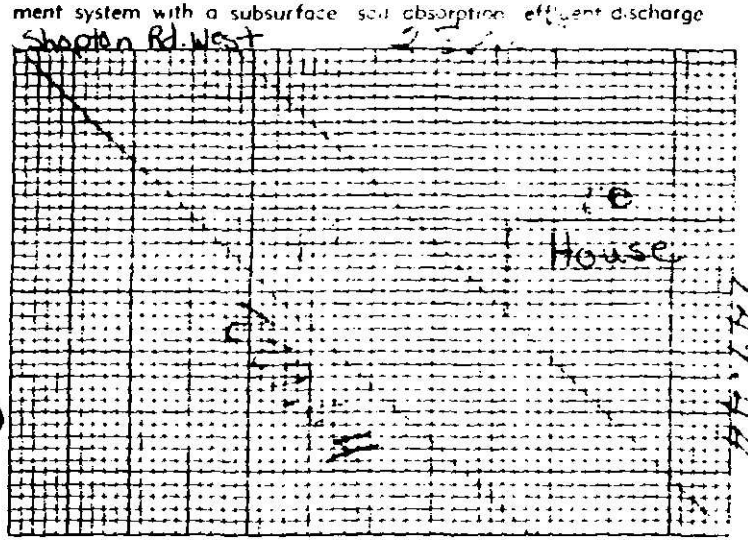
Map Date L

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) ✓ 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 ✓ 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 Well ✓
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 Covil (LAST) Carrol (FIRST) James (MIDDLE)

14) ADDRESS OF OWNER 14300 Shopton Rd West Charlotte, NC 28210

15) PHONE NO. Home 588-1332 Office 554-1421

16) LOCATION OF SYSTEM 1/4 mi Shopton Rd West (STREET OR COUNTY ROAD)

17) SUBDIVISION ____ Lot No ____ Block No. ____

Map Book No. ____ Page No. ____

18) DEED REFERENCE — DEED BOOK 2860 AT PAGE 152

19) HAS A SOIL INVESTIGATION BEEN RUN? ____ YES ✓ 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.

July 24, 1984
DATE OF APPLICATION

Carrol Covil
OWNER

EHD-S-76

Environmental Health Copy

Date Issued 8-8-84

Serial No. 7750

SIR No. 21266

T. C. No. 199-041-21

Map Date L, CLT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
IMPROVEMENT PERMIT
TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Covil, (LAST) Carrol (FIRST) James (MIDDLE)

ADDRESS OF OWNER 14300 Shopton Road W., Charlotte, NC ZIP 28210

LOCATION OF LOT 14200 Shopton Road West (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 21266. This approval is subject to the following terms and conditions:

1. That the trification 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

B. K. Ferguson
Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued 7-16-84

Serial No. 08318

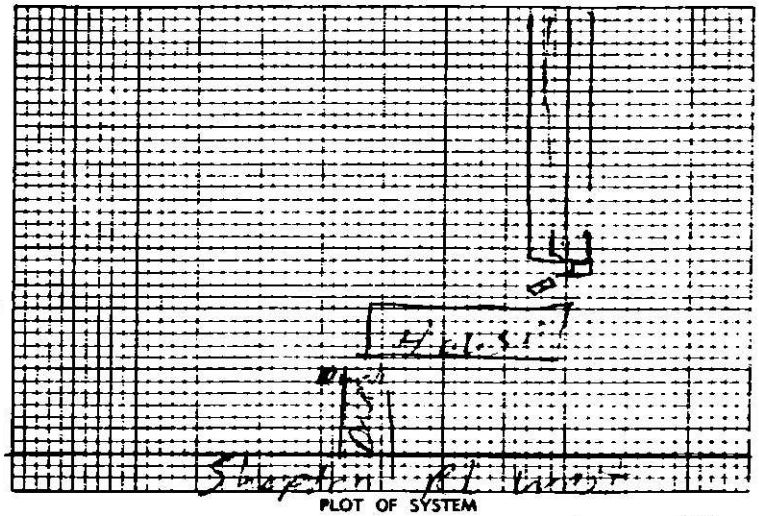
ICAR(S) Permit No. 21266

T C No 199-041-21

Map Date L

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 21256, dated 7-24-84 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 8-16-85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate IV-g

Liquid Capacity of Tank 1500

Tank Construction PCC

Absorption and or Nitrification Lines

Total Line Length 400'

Number of Lines Four

Distance from House 5'

Distance from Property Line 10'

Distance from Well 50'

NAME OF OWNER Cavil Carol S.

LOCATION OF PROPERTY 14xx Shepherd Rd West

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.

Four Trench 100'x2'x12' Stone

Comments:

B. Henderson
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-S-76

Environmental Health Department's Copy

C of A (s) No. 21266

Date Issued 9-5-85 **Serial** 7829 T. C. No. 199-041-21 L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF COMPLETION
CERTIFICATE OF APPROVAL
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner Cov. (LAST) Carrol (FIRST) J. (MIDDLE)

Location of Property 14200 Shopton Rd west

Application Number 21266 Permit Number 21266

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PCC

Total Length of Drain Tile 400' Number of Lines Four

Depth of Filter Material 12" Cover Depth 24"

Water Supply Source well Distance from Water Source 250'

Excavation Inspected 9-5-85 (DATE) Tank Inspected 9- (DATE)

Nitrification Field Inspected 9-5-85 (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 1485, 1500ST, Con 1200SFT, 12G, Cov'l

Jim Ewen
Environmentalist

EHD-S-76