Date Received 3-14-83

SIR No. 19444

T. C. No. 043-111-11

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Harvey (LAST) Herbert (FIRST) (MIDDLE)

2) ADDRESS OF OWNER 5733 Torrence Street ZIP _____

3) PHONE NO. Home _____ Office _____

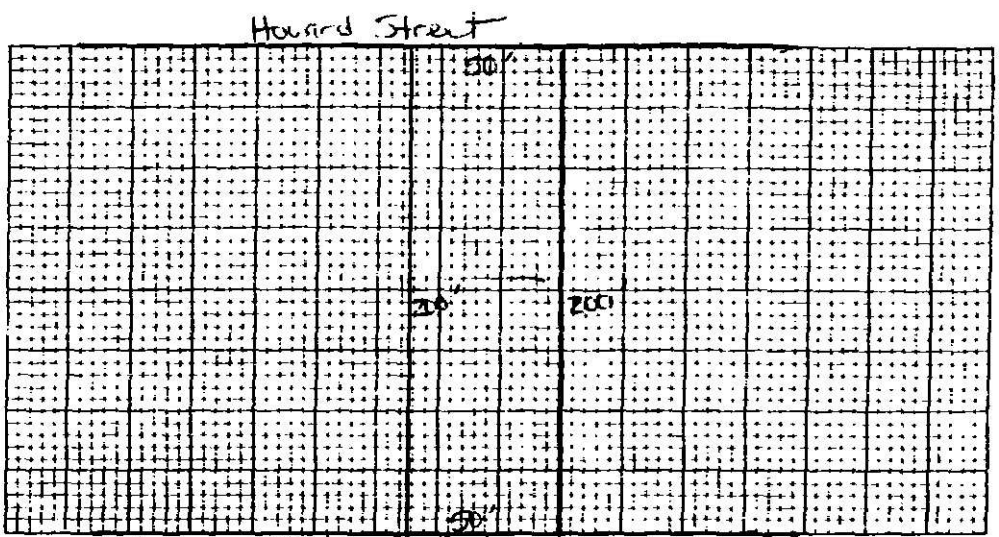
4) LOCATION OF PROPERTY 5525 Torrence Street (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. _____

6) DEED REFERENCE: DEED BOOK _____ PAGE NO. _____

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



1) ACCURATELY DIAGRAM & DIMENSION LOT

Herbert Harvey
OWNER

EHD-5-76

Environmental Health Department's Copy

Serial No. 4938

PTR No. 19444

Date Issued 3-31-83

T. C. No. 043-111-11,12,13

Map Date

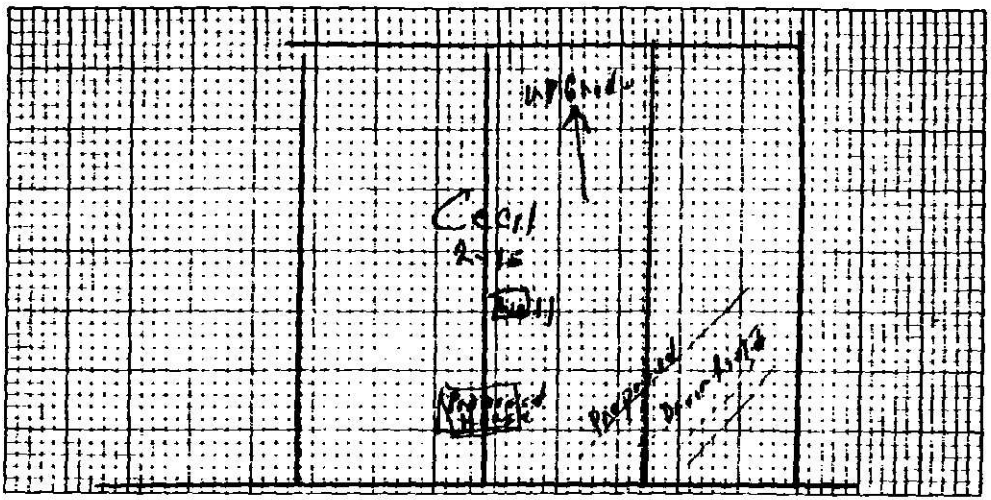
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Harvey, (LAST) Herbert (FIRST) (MIDDLE)

ADDRESS OF OWNER 5833 Torrence St., Charlotte, NC ZIP 28213

LOCATION OF PROPERTY 5833 Torrence Street (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 9 & 36 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. The permeability rate determined by the investigation was **Provisionally Suitable**. 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 a complete system, except the specific system, shall be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction. Any change in 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 on the basis of the rate obtained above, and on the size and type of building to be constructed thereon.
3. This approval is valid only if the system is installed in the immediate area indicated acceptable for system installation on the above plot.
4. This approval is void if any grading, filling or construction activity, including the drilling of wells is performed on the lot which in the opinion of the Mecklenburg County Department of Environmental Health renders the area indicated as acceptable for system installation unsuitable for 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 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.

W. B. Ramsey
Soil Scientist

EHD-S-75

Mike Sutton
Environmental Health Director or
Authorized Section Head

Environmental Health Department's Copy

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 14444

T.C. NO. 043-111-1 1/12/13

(Ground Absorption Sewage Disposal)

OWNER: Herbert Harvey
ADDRESS: 5933 Terrance St.

PLAT NO:
LOT SIZE: 30,000 .69a

LOCATION OF SITE: Terrance St

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) 2 – 15 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) Clayey U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) Blocky U	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) 40-48" U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) None U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) Adequate 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	IIe			
9. SITE CLASSIFICATION	P.Suitable			
10. SOIL SERIES	Cecil			

S - Suitable PS - Provisionally Suitable U - Unsuitable

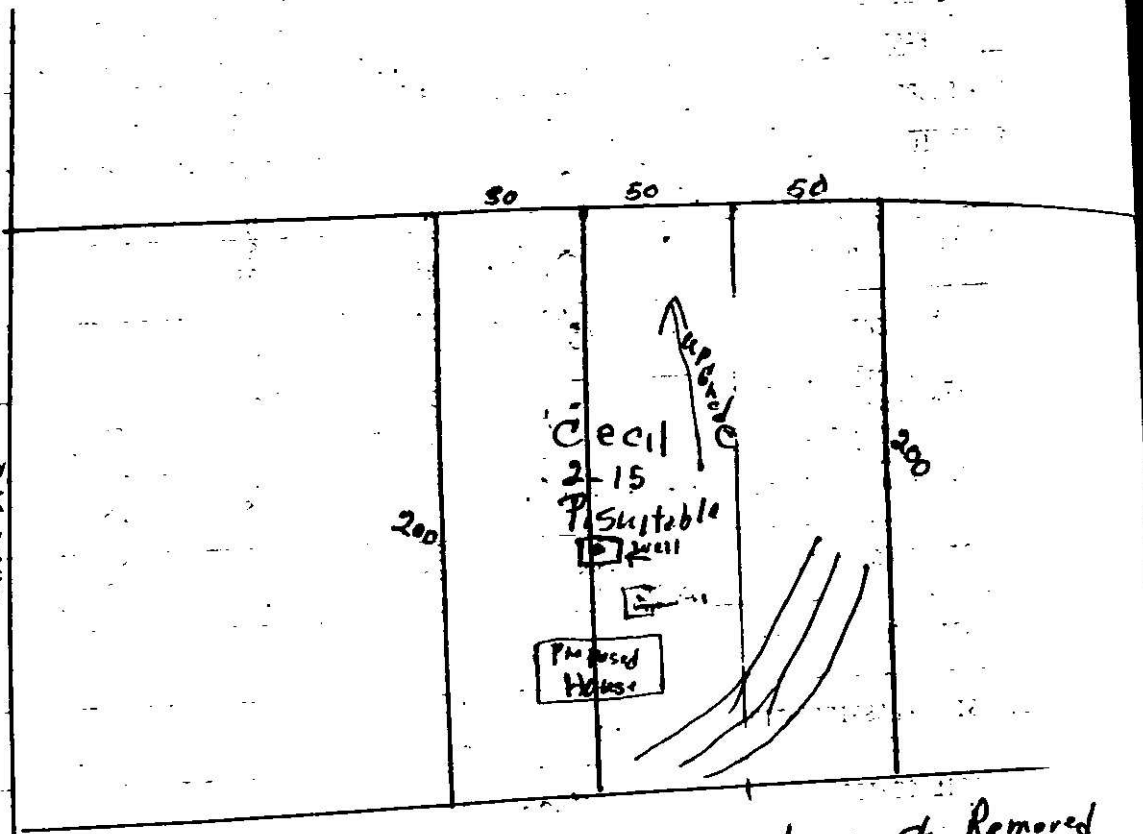
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: W. B. Ramsey
Title: Soil Scientist

Date: 3-29-82

EHD 539 (Revised: 6/82)



All Buildings To Be Tore down & Removed From Lot. All Junk To Be Cleaned From Lot Well Near the Center of Lot- Might work IN System IN Right Front Corner. by Gravity.

Date Received 3-21-83

MAR 21 1983

ICAR (S) Application No. 19424

T. C. No. 043-111-11

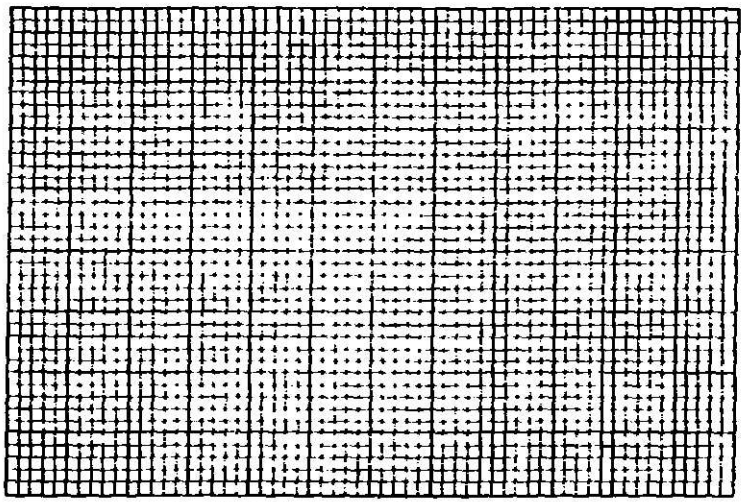
Map Date

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 ___ Yes X 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 ___ No
11) FHA Case No. ___
12) VA Case No. ___

13) NAME OF OWNER Harvey, (LAST) Herbert (FIRST) (MIDDLE)

14) ADDRESS OF OWNER 5833 Torrence St., Charlotte, NC 28213

15) PHONE NO. Home XXXXXXXXXXXXXXX None Office ___

16) LOCATION OF SYSTEM 5833 Torrence St. (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. 9 & 36 Block No. ___

Map Book No. ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

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.

3-21-83
DATE OF APPLICATION

Herbert Harvey
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 6325

SIR No. 19444

Date Issued 3-31-83

T. C. No. 043-111.11,12,13

Map Date

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 Harvey, Herbert
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 5833 Torrence St. Charlotte, NC ZIP 28213

LOCATION OF LOT 5833 Torrence Street
(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 19444. 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 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.

R Phelps
Environmentalist

Mike Sexton
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

3/14/88 Pd 100.00
CK# 16491 JR

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

(OFFICE USE ONLY)

FILE: 19943

TC: 023-085-18

SERIAL: № 12977

RECEIVED
FEB 10 19
MECKLENBURG COUNTY HEALTH DEPT.
ENVIRONMENTAL HEALTH DIVISION

JOB LOCATION

① ADDRESS: 7516 (STREET NO.) River (STREET) Circle ② FILE:

③ JURISDICTION: Long Creek Twp - Meck Co. ④ TAX PARCEL NO.: 023-085-18

⑤ SUBDIVISION: Riverview Acres Extention ⑥ LOT: 4+5 ⑦ BLOCK: K

OWNER

⑧ NAME: Donald (FIRST) E. (MIDDLE) Jones (LAST)

⑨ MAILING ADDRESS: 300 Iverson Way

⑩ CITY: Charlote, ⑪ STATE: N.C. ⑫ ZIP: 28203

⑬ PHONE: (WORK) 704-588-2360 ⑭ (HOME) 704-527-4573

REQUEST

This request is for a(n):

⑮ ☑ New permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify) _____

DESIGN CRITERIA

System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 3 ㉓ Type? _____

㉔ Maximum occupancy? 4 ㉕ Maximum number of employees? _____

㉖ Basement? ☐ yes ☑ no ㉗ Maximum number of seats? _____

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☑ Individual well

B ☐ Municipal system

C ☐ Community well

D ☐ Community system

㉙ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Donald E Jones

Date: February 8, 1988

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

. . . No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by this Department.

. . . This permit is not transferable, and shall become null and void 36 months from the date of issuance.

_____ / _____
Environmentalist Date

_____ / _____
Director or Authorized Section Head Date

*This permit must be signed by the Director of Environmental Health or an authorized section head in order to be valid.

DATE: 7/13/87

TO: ENVIRONMENTAL HEALTH

FROM: COUNTY ENGINEERING

EHD FILE 19943 , JURISDICTION CODE Mech

PARCEL NUMBER 023-085-18

ASSIGNED ADDRESS 7516 River Cr

EXISTING ADDRESS lots 4+5

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	NOT APPROVED
1. SUBDIVISION REGULATIONS	☑	☐ *
2. FLOODWAY REGULATIONS	☑	☐ *
3. EROSION CONTROL REGULATIONS	☑	☐ *
4. COMMERCIAL DRAINAGE PLAN	☑	☐ *

	PRESENT	NOT PRESENT
5. PUBLIC UTILITY EASEMENT	☐ *	☑
	YES	NO
6. PROPERTY FRONTS ON THOROUGHFARE	☐ *	☑
	YES	NO
7. DRIVEWAY PERMIT REQUIRED	☐ *	☒

* If checked, further investigation will be required to determine whether a building permit may be issued by Building Standards for the site.

REMARKS: soil test

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE AT BUILDING STANDARDS WHEN PAYING PERMIT FEES.
A CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL THE TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

SIGNED: [signature]

OPWEAR 02/86

APPLICATION FOR SOIL INVESTIGATION

1300 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4403

(OFFICE USE ONLY)

FILE: _____

TC: _____

☐ PC ☐ REPT

① ADDRESS: 5530 Howard St

② SUBDIVISION: Hemphill Heights ③ LOT: L 11+34 ④ BLOCK: 2

⑤ PARCEL REFERENCE: BOOK NO.: 043 PAGE NO.: 11 PARCEL NO.: 043-111-13

⑥ DEED REFERENCE: BOOK NO.: 1404 PAGE NO.: 191

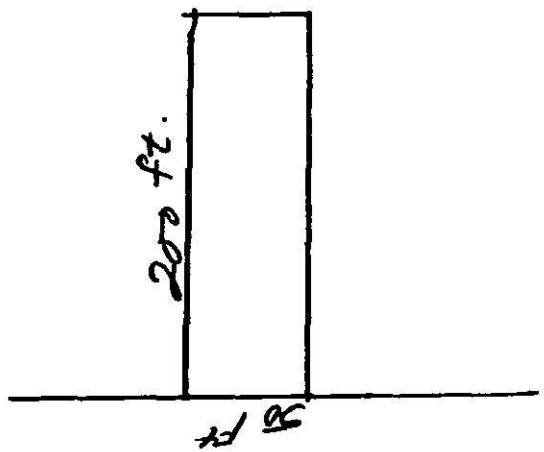
⑦ NAME: Herbert (FIRST) (MIDDLE) Harvey (LAST)

⑧ MAILING ADDRESS: 5530 Howard St

⑨ CITY: Charlotte ⑩ STATE: N. C. ⑪ ZIP: 28213

⑫ PHONE: (WORK) _____ (HOME) 597-1516

⑬ Accurately diagram and dimension lot.



⑭ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Herbert Harvey

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

Date: March 3, 1988

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY