

19619 STOUGH FARM RD

00141203

5/15/2007

duponbj

Groundwater and Wastewater Services File Imaging Project

May 2007

Barcode Font = IDAutomationHC39M

PD. 7/31/91
Ck. #0679
Amt. 25.00

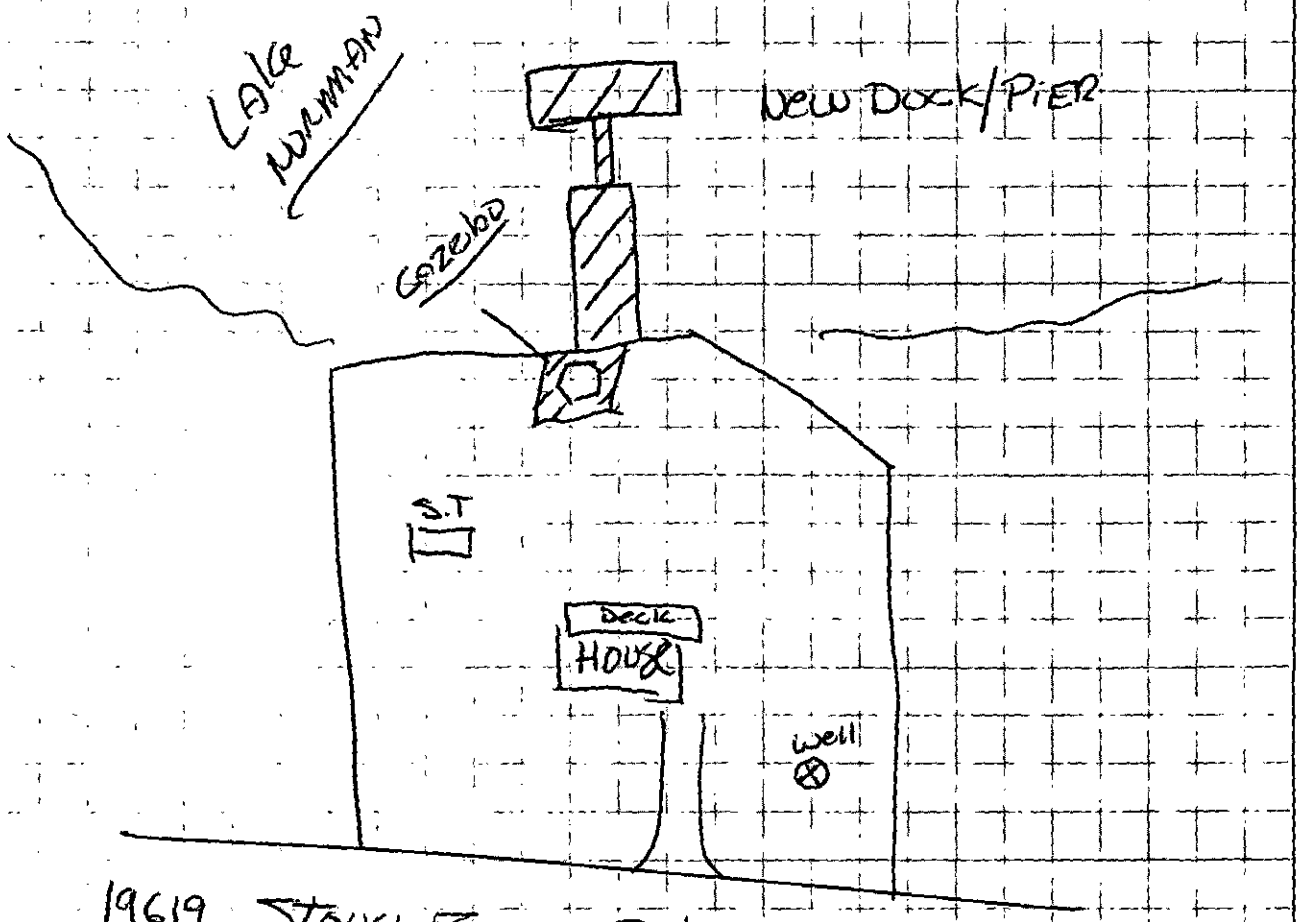
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 4073 A

TC: 001-412-03

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



APPROVAL DATE PSW appr 8/2/91

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy

JW

Pd. 7/31/91
Ck. #0679
Amt. 25.00
AD.

APPLICATION FOR AN IMPROVEMENT PERMIT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr 2nd Floor
700 N. Tryon Street
Charlotte, NC 28202

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

(OFFICE USE ONLY)
FILE: 4073A
TC: 001-412-03
SERIAL: №0019679
☑ ☐ CRT

JOB LOCATION

① ADDRESS: 19619 (STREET NO.) Stough Farm (STREET) Rd. ② FILE:
③ JURISDICTION: Mecklenburg ④ TAX PARCEL NO.: 001-412-03
⑤ SUBDIVISION: Patrick's Purchase ⑥ LOT: 03 ⑦ BLOCK:

OWNER

⑧ NAME: Arthur (FIRST) T. (MIDDLE) McMahon (LAST)
⑨ MAILING ADDRESS: 19619 Stough Farm Rd.
⑩ CITY: Huntersville ⑪ STATE: N.C. ⑫ ZIP: 28078
⑬ PHONE: (WORK) 372-4281 ⑭ (HOME) 896-0464

REQUEST

This request is for a(n):

⑮ ☐ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☒ Other (specify) Addition

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 3 bdrm. ㉕ Type?
㉓ Maximum occupancy? 3 ㉖ Maximum number of employees?
㉔ 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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Arthur T. McMahon

Date: 7/31/91

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, 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 60 months from the date of issuance.

Environmentalist / Date

Director or Authorized Section Head / Date

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

DATE 7-31-91

TO: CHARLOTTE-MECKLENBURG BUILDING STANDARDS
PERMIT ISSUING SECTION

FROM: MECKLENBURG COUNTY ENGINEERING

JURISDICTION Meck

001-412-03
PARCEL NUMBER

19619 Stough Farm Rd
ASSIGNED STREET ADDRESS (ADDRESS OF RECORD)

EXISTING STREET ADDRESS (IF DIFFERENT FROM ASSIGNED)

N/A
PROJECT NAME (IF APPLICABLE)

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

1. SUBDIVISION REGULATIONS	✓ APPROVED	____ NOT APPROVED
2. FLOODWAY REGULATIONS	✓ APPROVED mme 7/31/91	____ NOT APPROVED
3. EROSION CONTROL REGULATIONS	✓ APPROVED	____ NOT APPROVED
4. COMMERCIAL DRAINAGE PLAN	✓ APPROVED	____ NOT APPROVED
5. PUBLIC UTILITY EASEMENT	____ PRESENT	✓ NOT PRESENT
6. PROPERTY FRONTS ON THOROUGHFARE	____ YES	✓ NO
7. DRIVEWAY PERMIT REQUIRED	____ YES	✓ NO
8. DOES PROJECT CONFLICT WITH ROAD PROJECT?	____ YES	✓ NO

REMARKS: pier permit

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

ALL OTHER FORMS OBSOLETE

☐ NEW ADDRESS

SIGNED: JCN

REVISED 1/91

CERTIFICATE OF COMPLETION/OPERATION PERMIT

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 4073-A DATE: 4-25-89

TC: ad-412-03 ☐ L ☑ CRT

SERIAL № 11823

Name of Owner Jeffrey Bost Juris.:

Address of Property 19619 Stough Farm Rd.

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400

Number of Lines 5 @ 80'

Cover Depth 12"

Water Supply Source Well Not In yet

Distance to Water Source >50'

Excavation Inspected 4-25-89

Tank(s) Inspected 4-25-89

Wash Line Inspected —

High Water Alarm Inspected —

PLOT

Design: 1989, 1500ST con, 1200SFT, 12G, Cec. I CTR# 46

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☒ installed or constructed ☐ altered or repaired

☒ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The issuance of this

☒ Certificate of Completion ☐ Operation Permit

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 document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 10 NCAC 10A .1900 in addition to those listed below under "COMMENTS." This document 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: System designed for Three bedroom House

Jim Emmi
Environmentalist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH

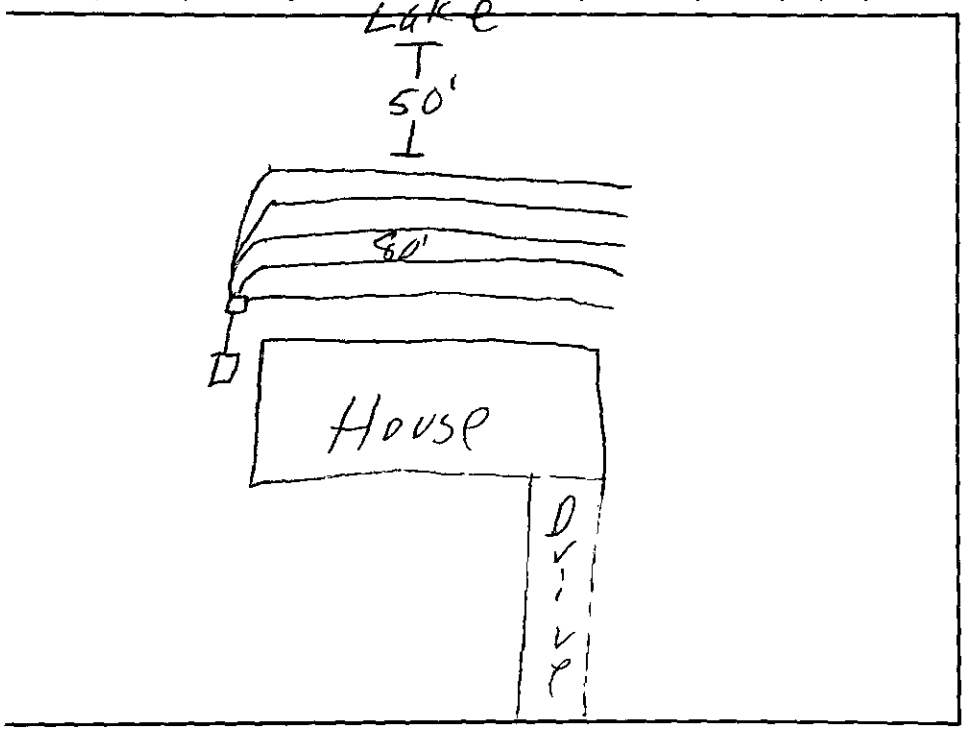
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 4073-A DATE: 4-20-89

TC: 041-412-03 ☐ L

SERIAL № 12621

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 the application dated 3-8-89. All work shall be completed on or before 5-20-89, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Department of Environmental Health before any system can be covered up or placed into service. 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank — gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 400' feet

Number of Lines 5

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10' feet

Distance from Well >50' feet

NAME OF OWNER Jeffrey Best

LOCATION OF PROPERTY 19619 Stough Farm Rd

Comments: 5 Trenches 80' X 3' X 12" Stone

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 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.

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

DATE: 3/15/89

TO: HEALTH DEPARTMENT - ENVIRONMENTAL HEALTH

FROM: COUNTY ENGINEERING

EHD FILE _____ JURISDICTION CODE MCR

PARCEL NUMBER 001-412-03

ASSIGNED ADDRESS 19619 Stough Farm Rd

EXISTING ADDRESS Lot 2

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	☐ *	☐
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: Septic Tank - SF House

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: Digi

OPWEAR 02/86

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 3/15/89

Name/Company East Building

Sanitation ____

Vector Control ____

C.F.W.P. ✓

Service: Drip Inst
#4073A

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
MAR 15 1989

Fee: $ 150 CK # 652 1150.00

Collected by

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

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: 4073A

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.

TC: _____

SERIAL: № 11944

☑ ENVIRONMENTAL HEALTH DIVISION ☑ CRT

JOB LOCATION

① ADDRESS: Lot 2 (19619) Stough Farm Rd.
STREET NO. STREET

② FILE: 4073A SR# 14755

③ JURISDICTION: _____

④ TAX PARCEL NO.: 001-412-03

⑤ SUBDIVISION: Patricks Purchase

⑥ LOT: 2

⑦ BLOCK: _____

OWNER

⑧ NAME: Jeffrey (FIRST) L. (MIDDLE) Bost (LAST)

⑨ MAILING ADDRESS: P.O. Box 991

⑩ CITY: Cornelius

⑪ STATE: N.C.

⑫ ZIP: 28031

⑬ PHONE: (WORK) 892-5333

⑭ (HOME) 892-5333

REQUEST

This request is for a(n):

⑮ ☒ New permit

⑯ ☐ Repair or alteration permit

⑰ ☐ Authorization for mobile home exchange

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

㉕ Type? _____

㉓ Maximum occupancy? 4

㉖ Maximum number of employees? _____

㉔ 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: Jeffrey L. Bost

Date: 3-8-89

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: 3-21-89

Director or Authorized Section Head — Date: 3-22-89

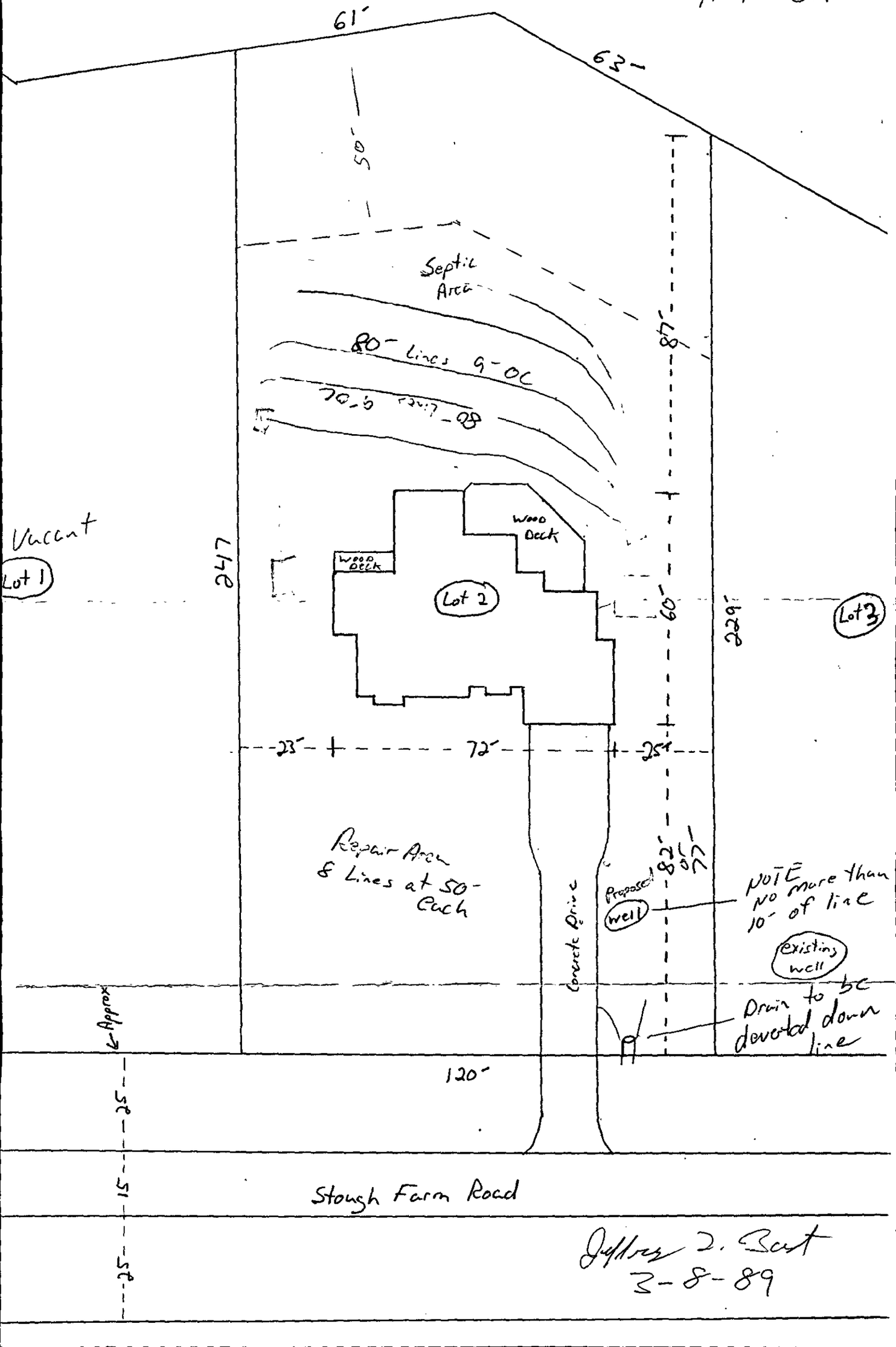
*This permit must be signed by the Director of Environmental Health or an authorized section head in order to be valid.

BOST BUILDING CO.
Post Office Box 991
Cornelius, N. C. 28031
Job #16

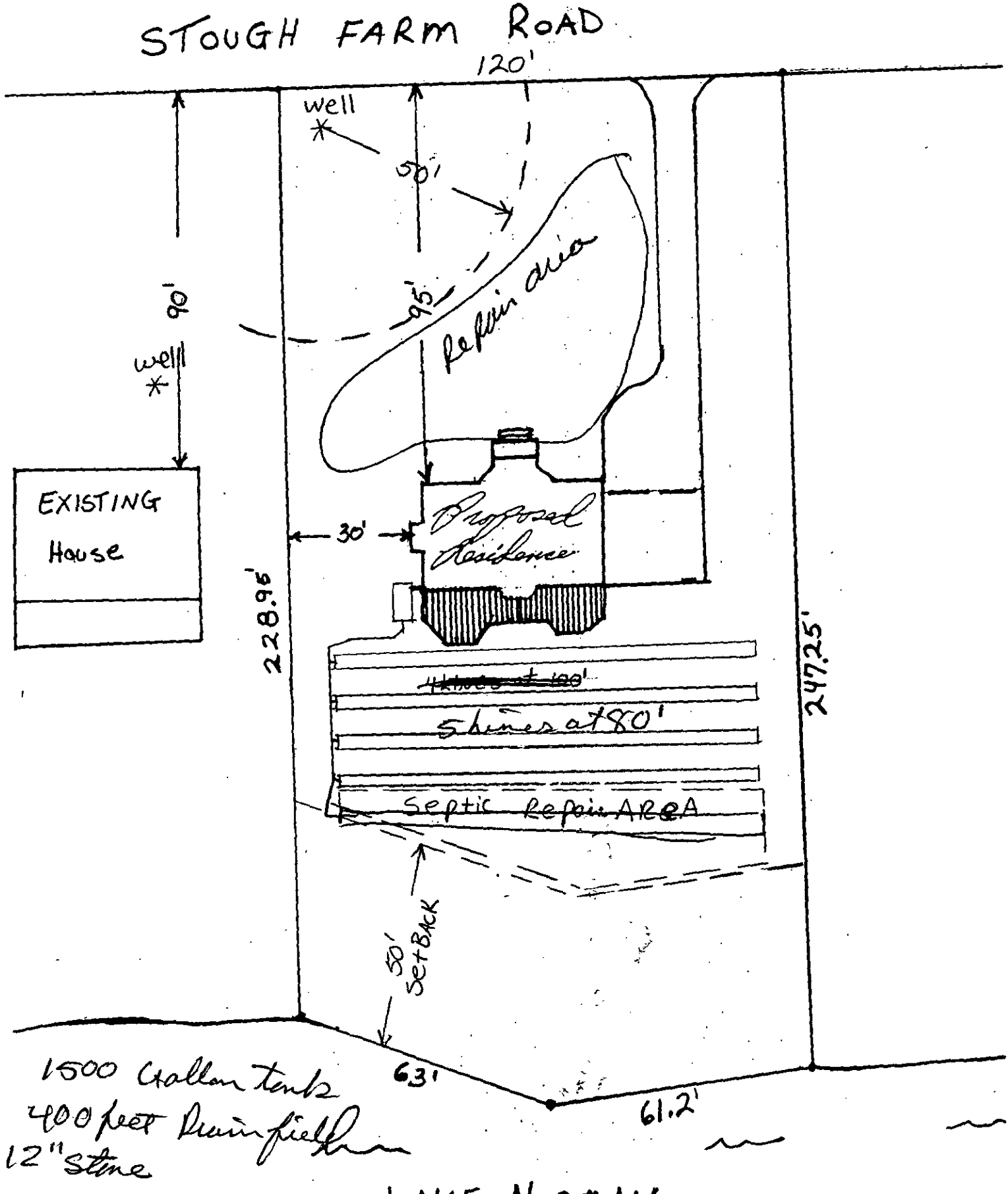
Lake

Lake Norman

#4073A



Jeffrey D. Bost
3-8-89


STOUGH FARM ROAD
120'
well
90'
95'
Repair area
90'
well
EXISTING
House
30'
Proposal
Residence
228.96'
247.25'
5 lines at 80'
Septic Repair AREA
50'
SETBACK
63'
61.2'
1500 Gallon tank
400 feet Drainfield
12" Stone
LAKE NORMAN
4-25-88
3-4-88

CK#1161 Pd 2/29/88 #100.00 Sewage Permit Fee

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
FEB 2[illegible]

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

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: 4073A

TC: _____

SERIAL: Nº 15300

ENVIRONMENTAL HEALTH DIVISION

☐ L ☑ CRT

JOB LOCATION

① ADDRESS: 19820 Stough Farm Road (Patrick's Purchase) ② FILE: 4073A
STREET NO. STREET

③ JURISDICTION: Huntersville ④ TAX PARCEL NO.: 001-41-218

⑤ SUBDIVISION: _____ ⑥ LOT: 2 ⑦ BLOCK: _____

OWNER

⑧ NAME: Mady Construction Company, Inc.
(FIRST) (MIDDLE) (LAST)

⑨ MAILING ADDRESS: 18808 Hwy. 73 West

⑩ CITY: Huntersville ⑪ STATE: NC ⑫ ZIP: 28078

⑬ PHONE: (WORK) 892-5105 ⑭ (HOME) _____

REQUEST

This request is for a(n):

⑮ ☑ *New permit*

⑯ ☐ Repair or alteration permit

⑰ ☐ Authorization for mobile home exchange

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

㉕ Type? _____

㉓ Maximum occupancy? 2

㉖ Maximum number of employees? _____

㉔ 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 C. Mays

Date: 2-26-88

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.

Judy J. Kuei RS, 4/26/88
Environmentalist Date

4-26-88
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.

MECKLENBURG COUNTY
Department of Environmental Health

January 22, 1988

M E M O R A N D U M

TO: Keith Stiwalt
Budget/Fiscal Officer

Re: Refund $100.00(ref#4073A)
Mady Construction Company,Inc.
Deposit date 1/19/88

Dear Mr. Stiwalt:

Please refund the amount of $100.00 to the above client . This client has withdrawn an application for Improvement/Installment permit.

Thank you.

Sincerely,

Lorraine C. Whitaker
Acct Tech
Environmental Health Division

Address and make check payable to:

Mady Construction Company,Inc.
18808 Highway 73 West
Huntersville, N. C. 28078

Enclosure documentation

APPLICATION FOR AN IMPROVEMENT PERMIT

1/19/88 Pd 100.00
Ck# 9406 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: 4073A
TC:
SERIAL: № 15299

RECEIVED
MECKLENBURG COUNTY HEALTH DEPT.
JAN 19 1988
ENVIRONMENTAL HEALTH DIVISION
☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 19820 Stough Farm Road (Patrick's Purchase) ② FILE: 4073A
(STREET NO.) (STREET)
③ JURISDICTION: Huntersville ④ TAX PARCEL NO.: 001-41-218
⑤ SUBDIVISION: ⑥ LOT: 2 ⑦ BLOCK:

OWNER

⑧ NAME: Mady Construction Company, Inc.
(FIRST) (MIDDLE) (LAST)
⑨ MAILING ADDRESS: 18808 Hwy. 73 West
⑩ CITY: Huntersville ⑪ STATE: NC ⑫ ZIP: 28078
⑬ PHONE: (WORK) 892-5105 ⑭ (HOME)

REQUEST

This request is for a(n):

⑮ ☒ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☐ Other (specify)

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home
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㉒ Number of bedrooms? 3
㉕ Type?
㉓ Maximum occupancy? 2
㉖ Maximum number of employees?
㉔ 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: Ronald Mayer

Date: 1-15-88

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 / 1-15-88 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.

MECKLENBURG COUNTY
Department of Environmental Health

December 23rd, 1987

Robert L. Harm
18808 Hwy. 73 West
Huntersville, NC 28078

RE: Property located at Stough Farm Road 2
FILE: 4073A
PARCEL: 00141218

Dear Sir:

At your request, a field investigation was conducted on the property designated above for the purpose of determining site suitability for the installation of a ground absorption sewage disposal system. The property was found to contain a limited area of soils which were classified as provisionally suitable for such an installation. A copy of the Site Evaluation Report (Serial Number 14755) is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit an Application For An Improvement Permit with an ACCURATELY dimensioned plot plan detailing the location of current and/or proposed buildings, wells and sewage disposal systems to this office. The plan will be reviewed and if it is found that the area of provisionally suitable soils is adequate for the proposed construction, an Improvement Permit will be issued by this Department.

If I may be of assistance, please do not hesitate to contact me.

Sincerely,

Sylvia D. Daniel, R.S.
Environmental Health Supervisor
Environmental Resources Division

Enclosure

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 14755

File: 4073A Action 1

Parcel: 00141218 ☐ PC

Location: Stough Farm Road

Subdivision:

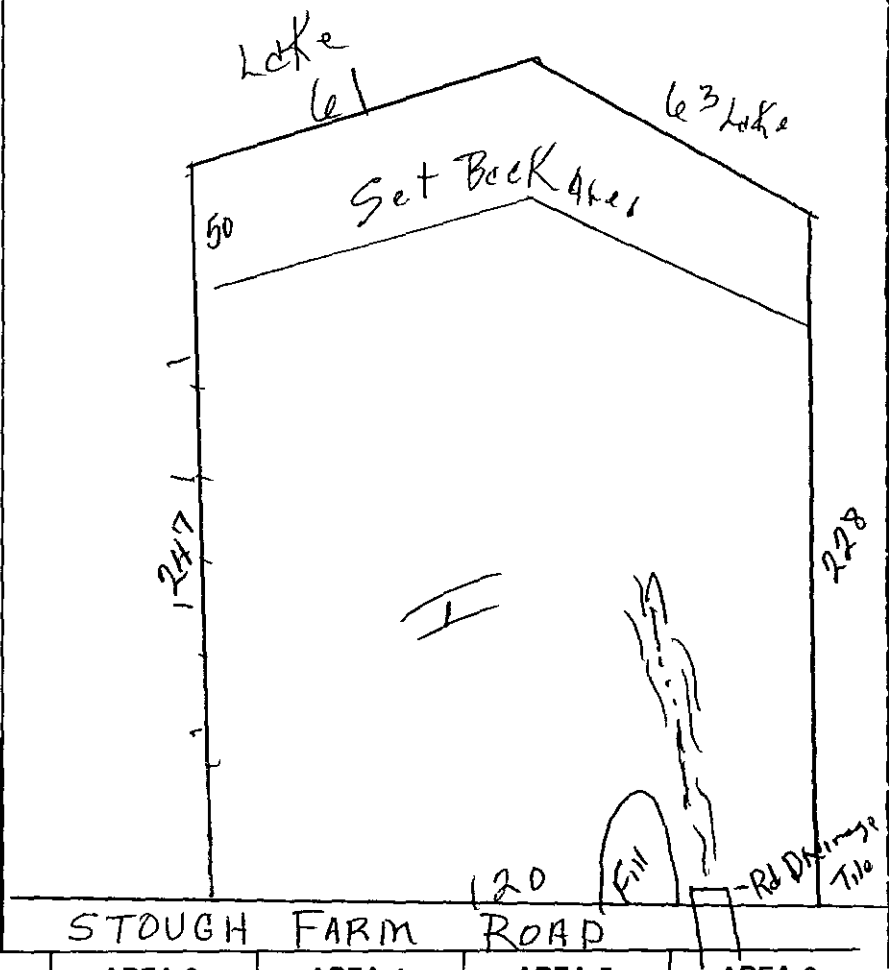
Lot: 2 Block: Acres: .65

Owner: Robert L. Harm
Address: 18808 Hwy. 73 West
Huntersville, NC 28078

Comments: Pump may be Required
New Lot
Surface Drainage will Need
To Be Changed.

Described by: W. B. Ramsey

Date: 12-22-87



*** EVALUATION KEY ***

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	S (PS) U 2-8	S PS U	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 36-43	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S (PS) U Restrictive Hor.	S PS U	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	IVa Cecil					
Area Classification	S (PS) U	S PS U	S PS U	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

pd 10/30/87 CK# 8722 30.00

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

(OFFICE USE ONLY)

FILE: 48737

TC: 001-412-18

JOB LOCATION

① ADDRESS: Stough Farm Road (Patrick's Purchase)

② SUBDIVISION: _____ ③ LOT: 2 ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: 18 PAGE NO.: 33 PARCEL NO.: _____

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

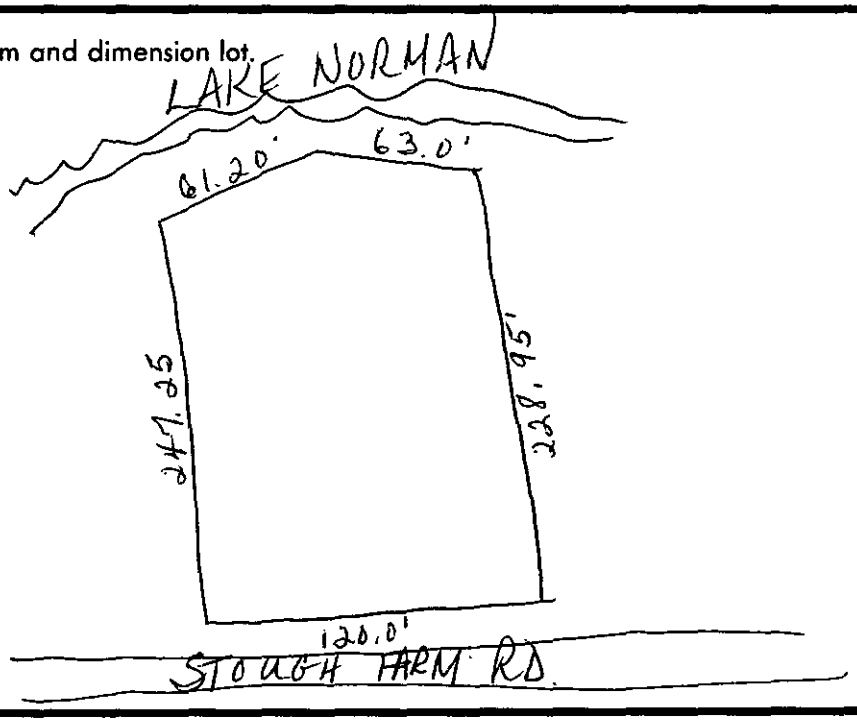
⑦ NAME: Robert L. Harm
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: 18808 Hwy. 73 West

⑨ CITY: Huntersville ⑩ STATE: NC ⑪ ZIP: 28078

⑫ PHONE: (WORK) 892-5105 (HOME) _____

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: Robert L. Harm

Date: Oct. 29, 1987

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