Date Received 2-19-75

APT No. 5598

T C No 135-155-01

Map Date 5-9-74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Bob McLemore & Co. (LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER 6124 Lebanon Rd ZIP

3) PHONE NO Home _____ Office 545-4507

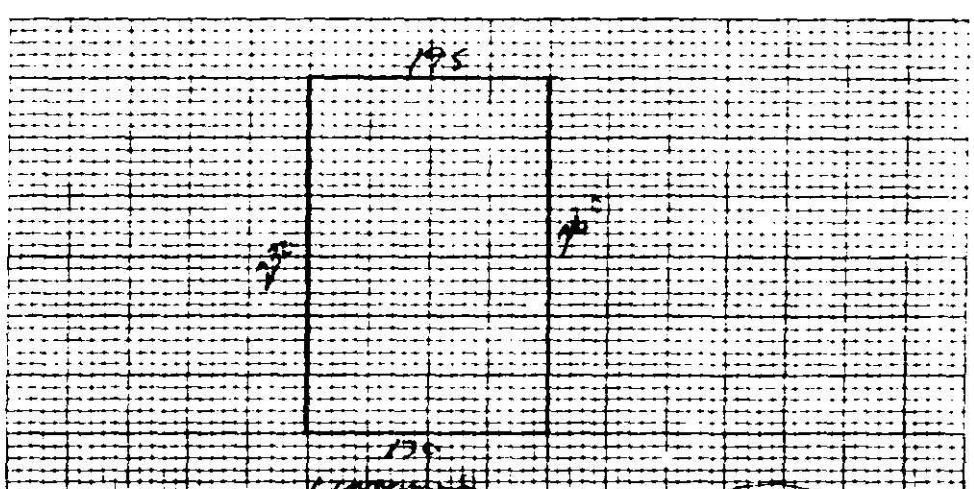
4) LOCATION OF PROPERTY Unknown (STREET OR COUNTY ROAD)

5) SUBDIVISION Fairwood III LOT NO. 20 BLOCK NO. H

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 on 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

OWNER

FORM NO. E-1-11-1-70

HEALTH DEPARTMENT'S COPY

Serial No. [illegible]

PTR No. 5598
P.O.
T C No. 135-255-08

Date Issued February 22, 1973

Map Date 12-15-72
5-9-74

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

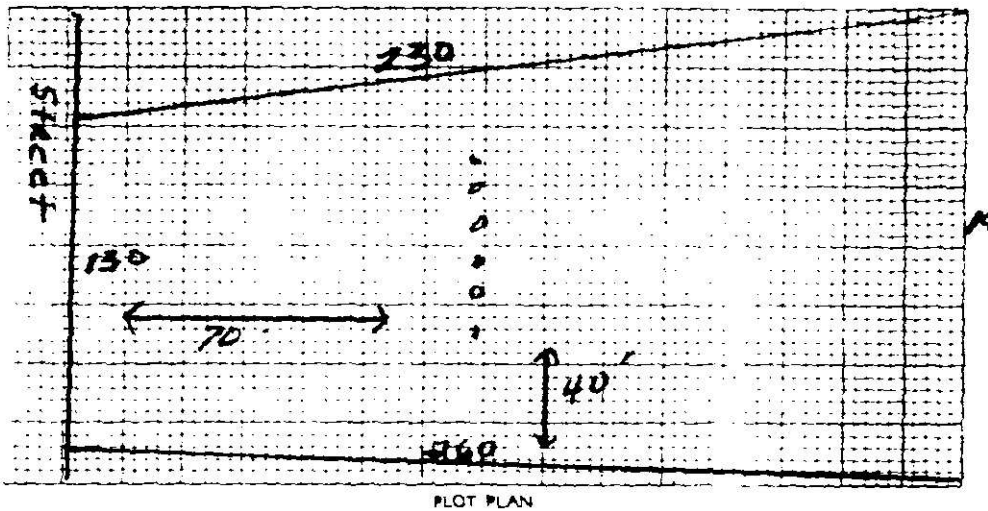
PERCOLATION TEST REPORT

NAME OF OWNER Bob McLemore & Company
LAST FIRST MIDDLE

ADDRESS OF OWNER 6129 Lebanon Rd., Matthews, N.C. ZIP 28105

LOCATION OF PROPERTY

SUBDIVISION Farmwood VI STREET OR COUNTY ROAD LOT NO 2 BLOCK NO H



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 60 min/in. 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, 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 wastewater 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 a well) 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.

John R. Adkinson

Director, Environmental Health Division or
Authorized Section Head

FORM NO. E-2-4-1-71

HEALTH DEPARTMENT'S COPY

Date Received 4-29-74

RECEIVED 1974

ICAP(S) Application No 5598

T C No 135-256-0601

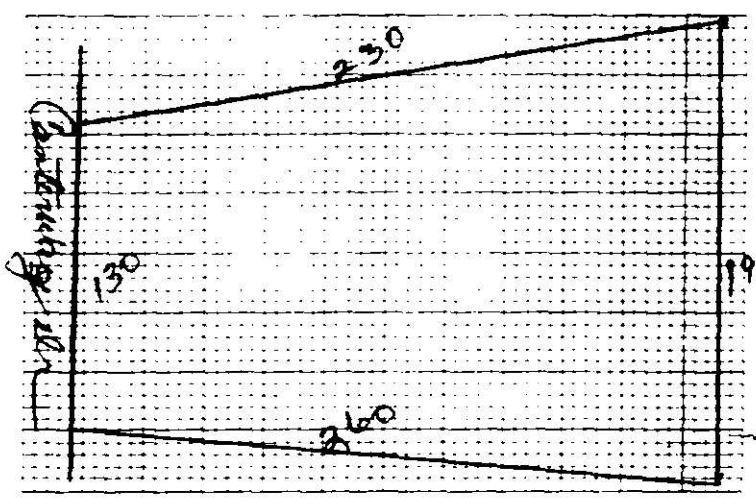
Map Date 12-7-92 5-7-94

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 ✓ Install or Construct ☐ Alter or Repair an individual septic tank wastewater treatment system with subsurface soil absorption effluent discharge



4. No. of Bedrooms 4
5. Business Use Yes 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. PLOT PLAN (ACCURATELY DIMENSIONED)

13. NAME OF OWNER Bob McLemore & Co Inc (LAST, FIRST, MIDDLE)

14. ADDRESS OF OWNER P. O. Box 27546, Charlotte NC 28212

15. PHONE NO Home Office 545-6111

16. LOCATION OF SYSTEM 7120 Canterway Dr. (STREET OR COUNTY ROAD)

17. SUBDIVISION Idlewood 4 & 6 Lot No. 20 Block No. H

Map Book No Page No.

18. DEED REFERENCE — DEED BOOK AT PAGE

19. HAS A PERCOLATION TEST BEEN RUN? ✓ YES NO DATE RUN 2-21-73 R260

20. PTR NUMBER (See Instructions) 5598

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 hereon shall be void and of no effect if any of the above facts are not true.

4-26-74
DATE OF APPLICATION

Leo D. Klapp, VP
OWNER

FORM NO E-4-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued April 30, 1974

Serial No. 4020

LA No 5598

T C. No 135-255-060/

IMPROVEMENTS PERMIT

Map Date ~~12-26-72~~ 5-7-74

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 Bob McLemore & Co., Inc.
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER P.O. Box 27546 ZIP 28212

LOCATION OF LOT 7120 Canterway Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Farmwood VI LOT NO. 20 BLOCK NO H

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 60 min/in and 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 5598. 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

M. B. Kirby
Environmentalist

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

FORM NO E-3-B-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 25 Sep 74

Serial No. 5[illegible]7

ICAR(S) Permit No. 5598

T C No 135-251-Cic

Map Date 12-15-72

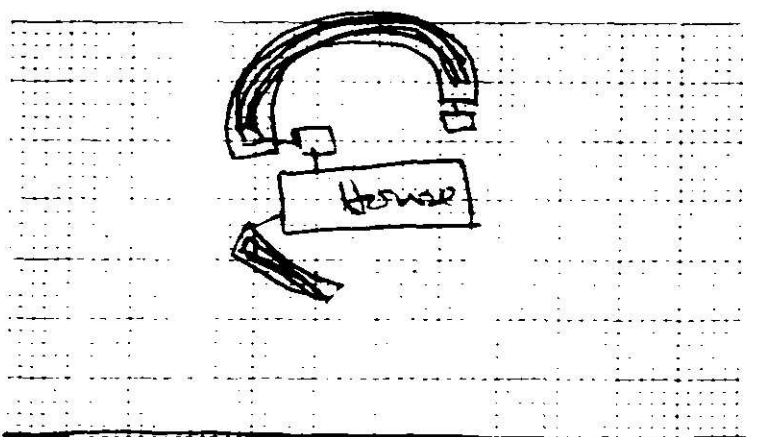
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 5598, dated 9-26-74 and this permit shall be void and of no effect if the information provided in the application is found to be erroneous. All work shall be completed on or before 25 Sept 74 after which date this permit shall be null and void.



PLOT OF SYSTEM

Permitted Use 60

Liquid Capacity of Tank 1500

Type Construction Precast Concrete

Absorption Area or Irrigation Area

Trench Width & Length 795' & 200'

Number & Length of Laterals 6 @ 15' x 133'

Distance from Tank to Trench 10'

Distance from Trench to Property Line 10'

Distance from Any Well 100'

NAME OF OWNER Bob McLemore Co.

LOCATION OF PROPERTY 7120 Canterway DR

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: washer 10' X 50'
aeration 2½'x7'x4'

R M Reynolds
Environmentalist

Division or Section Head

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 E-5-9-1-72

[illegible] COPY

Serial No. 3342

C of A (s) No. [illegible]

Date Issued [illegible]

T C No [illegible]

Map Date [illegible]

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

Location of Property [illegible]

Application Number [illegible] Permit Number [illegible]

Inspection Data:

Liquid Capacity of Tank [illegible] Tank Material [illegible]

Total Length of Drain Tile [illegible] Number of Lines [illegible]

Depth of Filter Material [illegible] Cover Depth [illegible]

Water Supply Source [illegible] Distance from Water Source [illegible]

Excavation Inspected [illegible] (DATE) Tank Inspected [illegible] (DATE)

Nitrification Field Inspected [illegible] (DATE)

Washing Machine Line Inspected, If Applicable [illegible] (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption et fluent discharge as described above and it has been [illegible] 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 as well as 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 [illegible]

[illegible]

Environmentalist

FORM NO E-8-9-1-72

HEALTH DEPARTMENT'S COPY