Date Received 11/18/76 Apt. No. (S) _____ Application No. (W) 7018

T. C. No. 105-165-55

Map Date _____

MECK COUNTY DEPARTMENT OF
RECEIVED
NOV 19 1976
ENVIRONMENTAL

MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER REED (LAST) PHILLIP (FIRST) DAVID (MIDDLE)

ADDRESS OF OWNER 6102 BARRINGTON DR. APT C ZIP 28215

PHONE NO. Home 536-1278 Office 392-3282

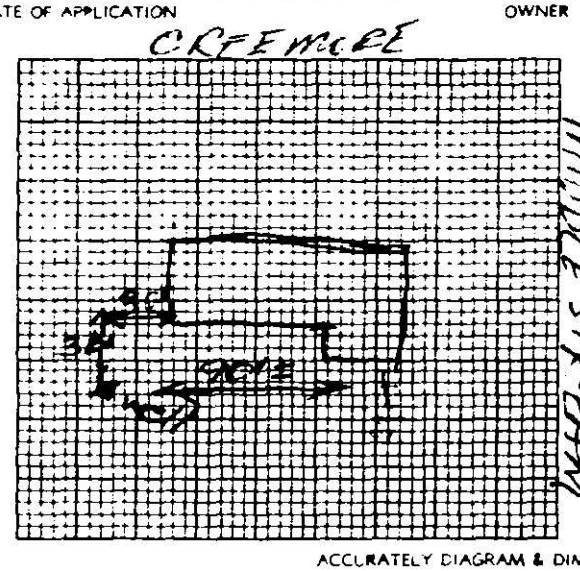
LOCATION OF PROPERTY CNR. MIDSTREAM & CREEMORE
STREET OR COUNTY ROAD

WELL CONTRACTOR _____ LICENSE NO. _____

Application is hereby made to the Mecklenburg County Department of Environmental Health for a permit to drill a water well on the hereinabove described lot to be used as a source of ✓ individual, semi public, or public water supply

11-18-76
DATE OF APPLICATION

Philip D Reed
OWNER



Remarks

ACCURATELY DIAGRAM & DIMENSION LOT

Application approved and permit hereby granted

Permit No: 7018

ENVIRONMENTALIST

EHD-5-76

Environmental Health Department's Copy

Date Received 9-19-73

MECK COUNTY HEALTH DEPT.
RECEIVED
SEP 19 1973
ENVIRONMENTAL HEALTH DIVISION

APT No. 7018

T. C No. _____

Map Date _____

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Hodges (LAST) James (FIRST) Frank (MIDDLE)

2) ADDRESS OF OWNER RFD 5 Rolling Acres ZIP 28212

3) PHONE NO. Home 596-0772 Office _____

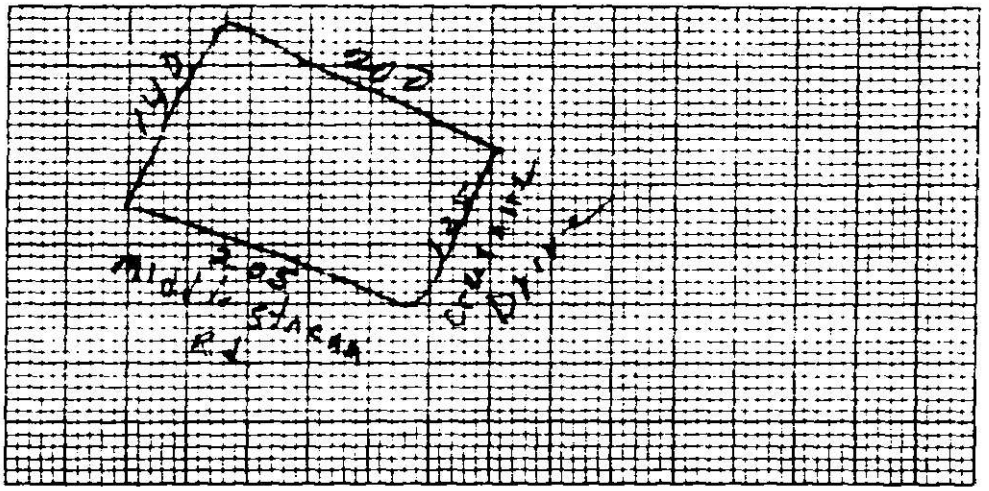
4) LOCATION OF PROPERTY corner of Hillcrest & Cumberland (STREET OR COUNTY ROAD)

5) SUBDIVISION Rolling Acres LOT NO. 3 BLOCK NO. D

MAP BOOK NO. 1 PAGE NO. 239

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 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

James F. Hodges
OWNER

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

HEALTH DEPARTMENT'S COPY

Serial No.

PTR No 7018

T C No 105-165-55

Map Date 4-27-73

Date Issued September 26, 1973

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

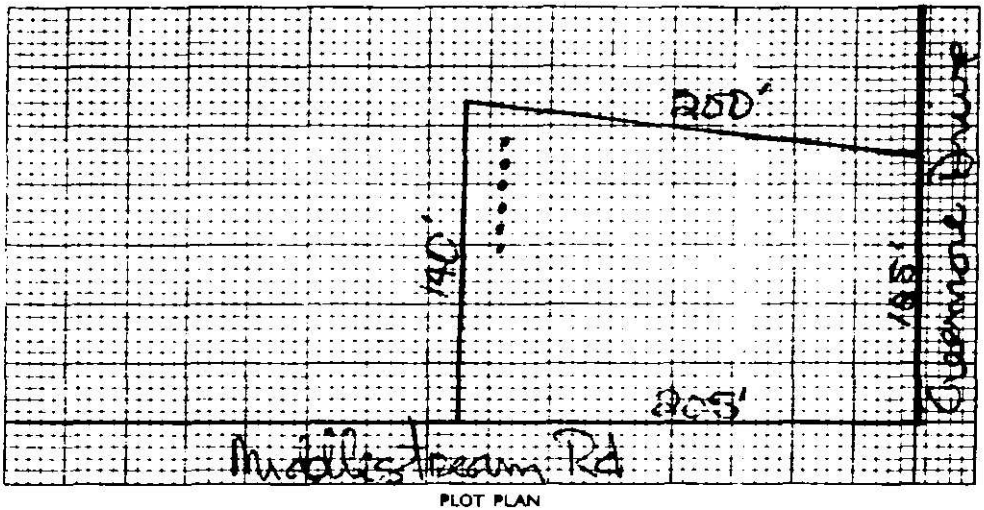
PERCOLATION TEST REPORT

NAME OF OWNER Hodges (LAST) James (FIRST) Franklin (MIDDLE)

ADDRESS OF OWNER Route 8, Box 95 ZIP 28212

LOCATION OF PROPERTY corner of Middlestream & Creemore (STREET OR COUNTY ROAD)

SUBDIVISION Rolling Acres LOT NO 3 BLOCK NO D



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 50 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 treatment 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. Wesson

Director, Environmental Health Division or Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

Date Received 5/19/76

APT No. 7018

T. C. No. 105-165-55

63

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER REEL (LAST) PHILIP (FIRST) DAVID (MIDDLE)

2) ADDRESS OF OWNER 6102 BARRINGTON DR. APT. C CHARLOTTE ZIP 28215

3) PHONE NO. Home 536-1278 Office 372-3282

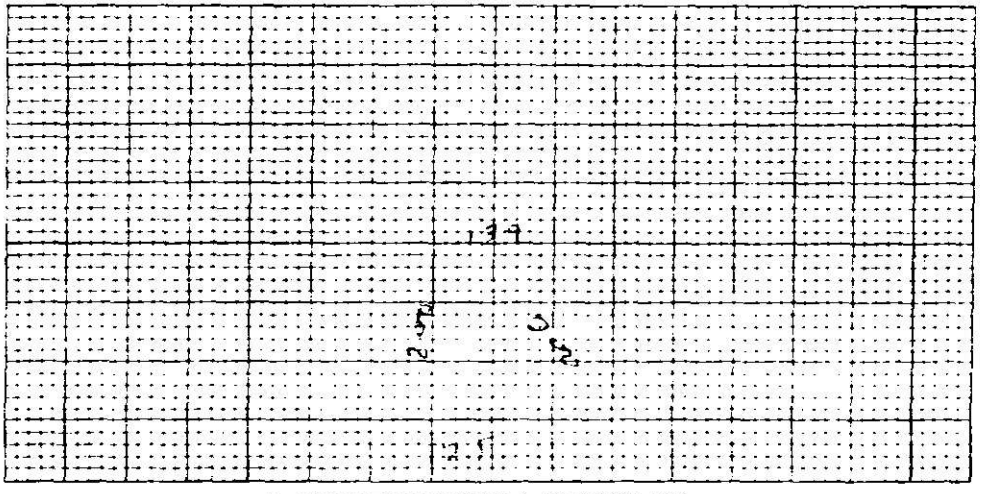
4) LOCATION OF PROPERTY CORNER OF MIDDLESTREAM & CREEMORE (STREET OR COUNTY ROAD)

5) SUBDIVISION ROLLING ACRES LOT NO. 3 BLOCK NO. D

MAP BOOK NO 105 PAGE NO. 16

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 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

Philip D Reel
OWNER

FORM NO. EI-11-3M-6-75

The owner of this property is James Franklin Hooker. I put a binder on this lot 5-11-76.

HEALTH DEPARTMENT'S COPY

SOIL INVESTIGATION REPORT

Date of Investigation May 21, 1976 AFT NO. 7018

Owner P. D. Reel

Location of Property Corner of Middlestream & Creamore

Soil Suitability Ratings lot no. 3 Block D TCN: 105-165-55

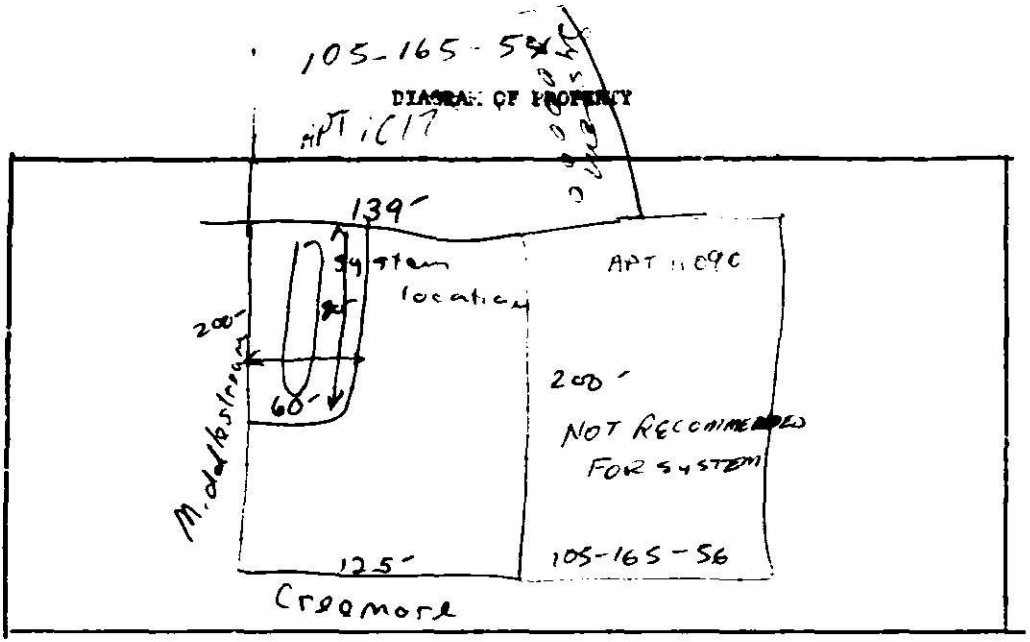
Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Cecil	Enon		
2. Soil Slope	acceptable 2-6%	acceptable 2-6%		
3. Soil Depth	acceptable 48"	unacceptable <40"		
4. Soil Texture	acceptable clay	unacceptable 2:1 Expanding clay		
5. Soil Structure	acceptable subangular blocky	unacceptable massive		
6. Restrictive Horizons	—	—		
7. Soil Drainage	acceptable water table >6'	acceptable water table >6'		
8. Soil Permeability (Percolation Rate)	acceptable 60 min/in	unacceptable >200 min/in.		
9. Other	Limited area 60'x80'	—		
10. Overall Rating	acceptable	unacceptable		

Recommendations Based on this investigation, the lot is recommended for approval for installation of a septic tank system. System design should be based on a percolation rate of 60 min/in. and should be placed in the area of Cecil soils. Note: the area of Cecil soils is site limited 60' x 80'.

See diagram on back

W. Edmund Gossett
Soil Scientist

3/18/75
EHD 539


105-165-55
DIAGRAM OF PROPERTY
APT #C17
139'
System location
200'
60'
Middle Street
APT #C9C
200'
NOT RECOMMENDED FOR SYSTEM
125'
105-165-56
Cromore

3/18/75

339

Serial No. 6324

PTR No. 7018

T C No. 105-166-55

Date Issued 5/24/76

Map Date -

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

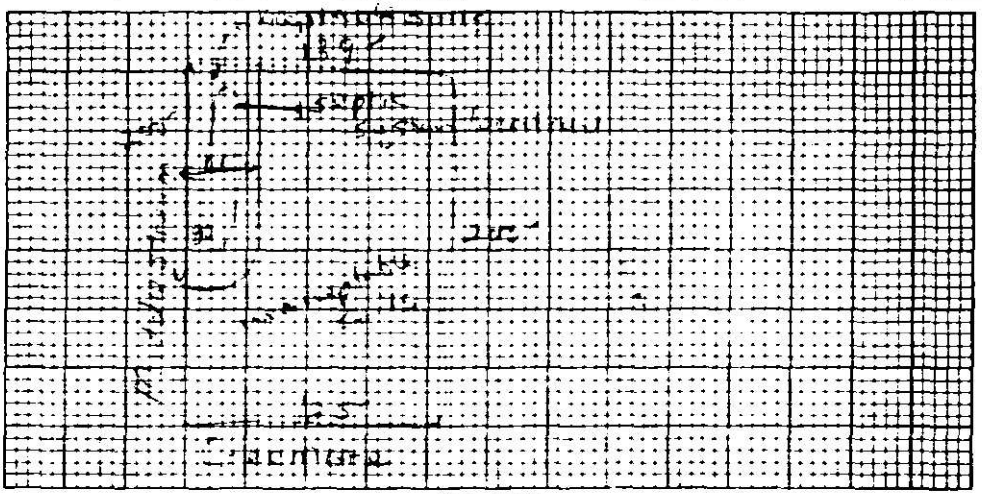
PERCOLATION TEST REPORT

NAME OF OWNER Reel (LAST) Phillip (FIRST) David (MIDDLE)

ADDRESS OF OWNER 6102 Barrington Drive, Apt C, Charlotte ZIP 28215

LOCATION OF PROPERTY Corner: Middlestream & Creemore (STREET OR COUNTY ROAD)

SUBDIVISION Rolling Acres LOT NO 3 BLOCK NO D



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 *60Min./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 treatment 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.

*Results determined by soil analysis

Soil Scientist

Director, Environmental Health Division or Authorized Section Head

FORM NO E-2-4-1-71

HEALTH DEPARTMENT'S COPY

Date Received 5/27/76 **RECEIVED** MAY 27 1976

ICAR(S) Application No. 7018

T.C. No. 5.165.55

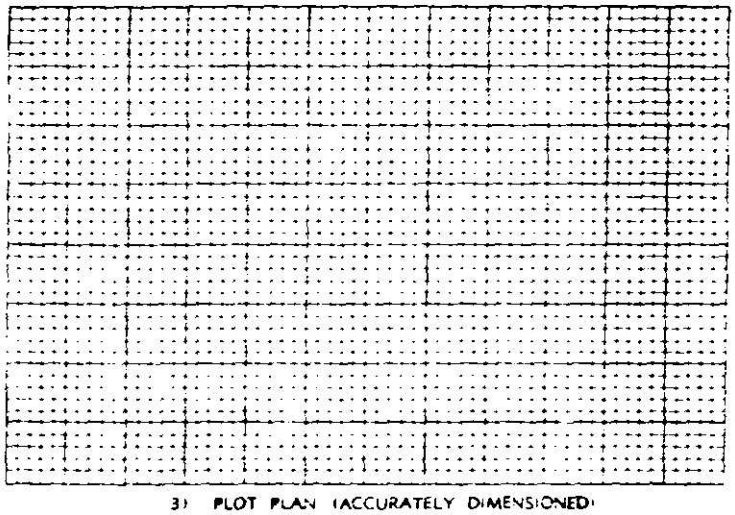
Map Date

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:

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)

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 REEL (LAST) PHILIP (FIRST) DAVID (MIDDLE)

14) ADDRESS OF OWNER 6102 BARRINGTON DR. APT C CHARLOTTE, N.C. 28215

15) PHONE NO. Home 536-1278 Office 392-3282

16) LOCATION OF SYSTEM CORNER: MIDDLESTREAM + CREEMORE (STREET OR COUNTY ROAD)

17) SUBDIVISION ROLLING ACRES Lot No. 3 Block No. D

Map Book No. 105 Page No. 16

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ___ NO DATE RUN 5/11/76 >60

20) PTR NUMBER (See Instructions) 7018

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.

5-25-76
DATE OF APPLICATION

Philip D Reel
OWNER

A binder was put on this property 5-11-76.

FORM NO. E-4-4-2M-6-785

HEALTH DEPARTMENT'S COPY

Date Issued 5/28/76

Serial No. 5959

IMPROVEMENTS PERMIT

LA . 7018

T. C. No. 105-165-55

Map Date -

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 Reel (LAST) Phillip (FIRST) David (MIDDLE)

ADDRESS OF OWNER 6102 Barrington Drive, Apt C ZIP 28215

LOCATION OF LOT corner: Middlestream & Creemore (STREET OR COUNTY ROAD)

SUBDIVISION Rolling Acres LOT NO 3 BLOCK NO. D

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 _____, 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 7018. 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.

Environmentalist

Director, Environmental Health Division or Authorized Section Head

FORM NO. E-3-9-2M-6-75

HEALTH DEPARTMENT COPY

Date Issued 2/14/77

Serial No. 0443

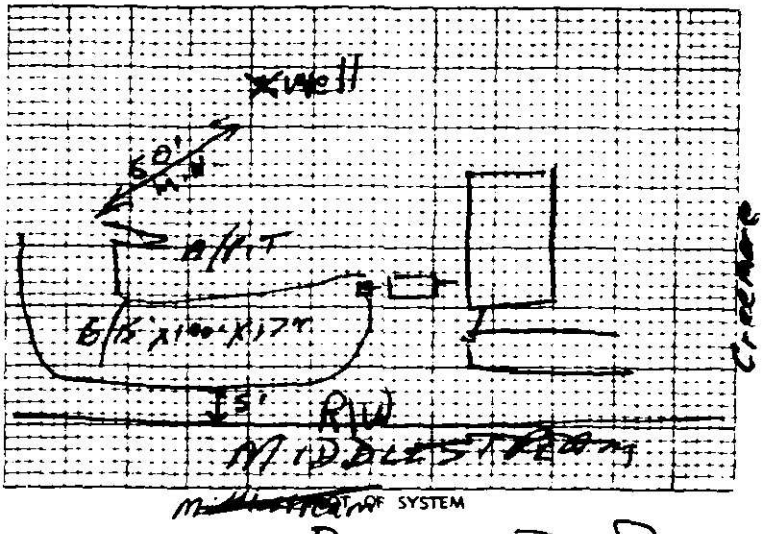
ICAR(S) Permit No. 7018

T. C No. 105-165-155

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 X 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 7018 dated 5/27/76 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 105-165-155, after which date this permit shall be null and void.



Permeability Rate 60

Liquid Capacity of Tank 1500 gal

Tank Construction PC

Absorption and or Nitrification Lines

Total Line Length 600 / 6 — 150 / 4

Number of Lines

Distance from House 10' min

Distance from Property Line 10' min

Distance from Well

NAME OF OWNER PHILLIP D. REEL

LOCATION OF PROPERTY CNR MIDDLESTREAM & CREEMORE

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.

Comments: OPTION 5 (12½" X 30' X 17"

R. Oaks.

Division or Section Head

L. P. Brinkman

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.

EHD-5-76

Environmental Health Department's Copy

Date Issued 14 Feb 77 **Serial No. 0489** C of A (s) No 7018

T C No

CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL HEALTH DIVISION

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

Name of Owner Reel, Phillip (LAST, FIRST, MIDDLE)

Location of Property Creemore Dr.

Application Number 7018 Permit Number 7018

Inspection Data:

Liquid Capacity of Tank 1500gal Tank Material Precast Concrete

Total Length of Drain Tile 600'-150' Number of Lines 6-4

Depth of Filter Material 17" Cover Depth 36"

Water Supply Source well Distance from Water Source 50'

Excavation Inspected 14 Feb 77 (DATE) Tank Inspected 14 Feb 77 (DATE)

Nitrification Field Inspected 14 Feb 77 (DATE)

Washing Machine Line Inspected, If Applicable 14 Feb 77 (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 aeration O.K.

** 36" cover at owners & builders insistance.

R. M. Reynolds
Environmentalist

EHD-5-76

Environmental Health Department's Copy