Date Received 3/29/76

APT No. 10789

T. C. No. 001291-06

Map Date 3/9/76

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Mintz (LAST) William (FIRST) L (MIDDLE)

2) ADDRESS OF OWNER 1720 E. Independence Blvd., Charlotte, ZIP 28205

3) PHONE NO. Home 525-1106 Office 377-6519

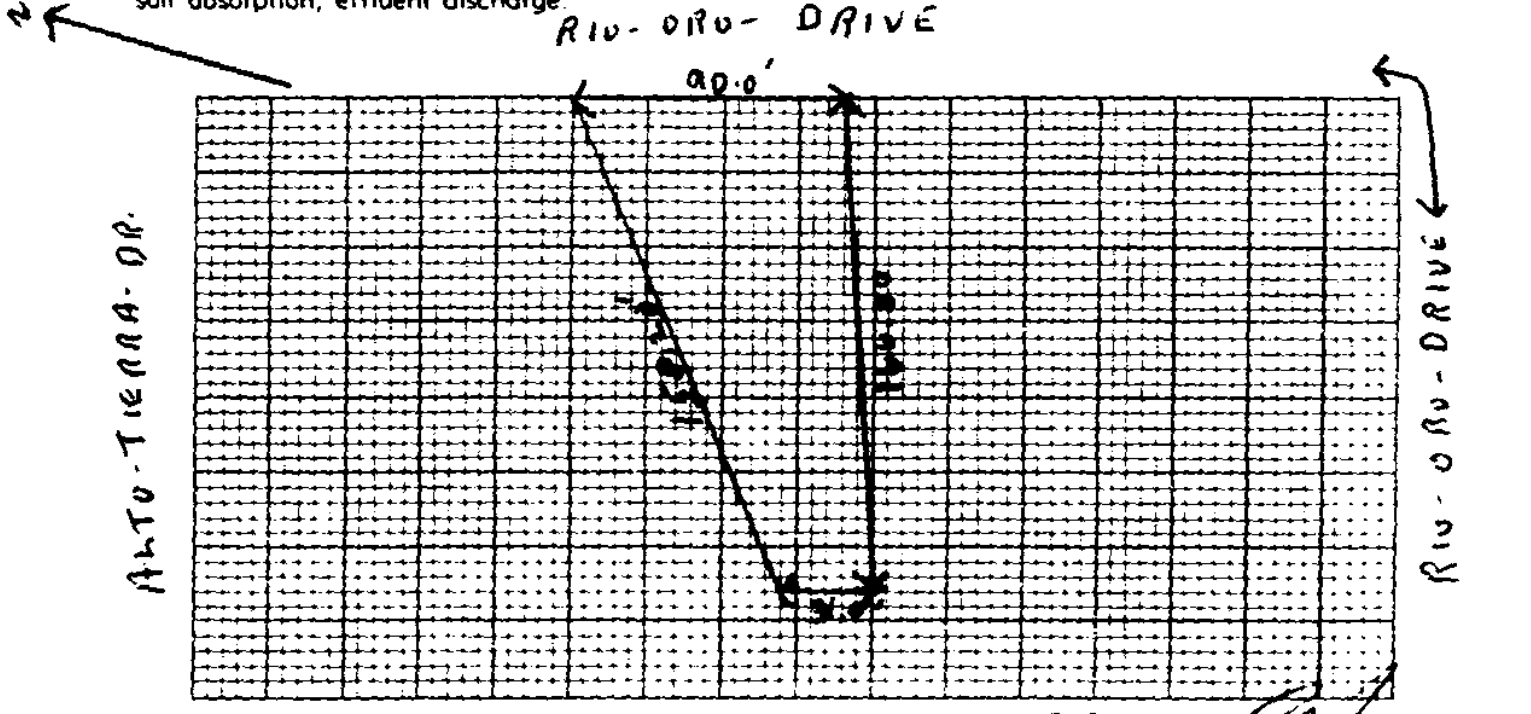
4) LOCATION OF PROPERTY Rio Oro Drive, Lake Norman (STREET OR COUNTY ROAD)

5) SUBDIVISION Bahia Bay LOT NO. 110 BLOCK NO. Sec. two

MAP BOOK NO. 11 PAGE NO. 339

6) DEED REFERENCE DEED BOOK 3169 PAGE NO. 153

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

OWNER

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

HEALTH DEPARTMENT'S COPY

SOIL INVESTIGATION REPORT

Date of Investigation March 29, 1976 APT NO. 10789

Owner W. L. Mintz

Location of Property Rio One Drive lot No. 110 sec. 2 Tax Code No 001-291-06

Soil Suitability Ratings

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Cecil			
2. Soil Slope	acceptable 2-6a°			
3. Soil Depth	acceptable >48"			
4. Soil Texture	acceptable Clay			
5. Soil Structure	acceptable subangular blocky			
6. Restrictive Horizons	—			
7. Soil Drainage	acceptable water table 76"			
8. Soil Permeability (Percolation Rate)	acceptable 60 min/in.			
9. Other	—			
10. Overall Rating	acceptable			

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.

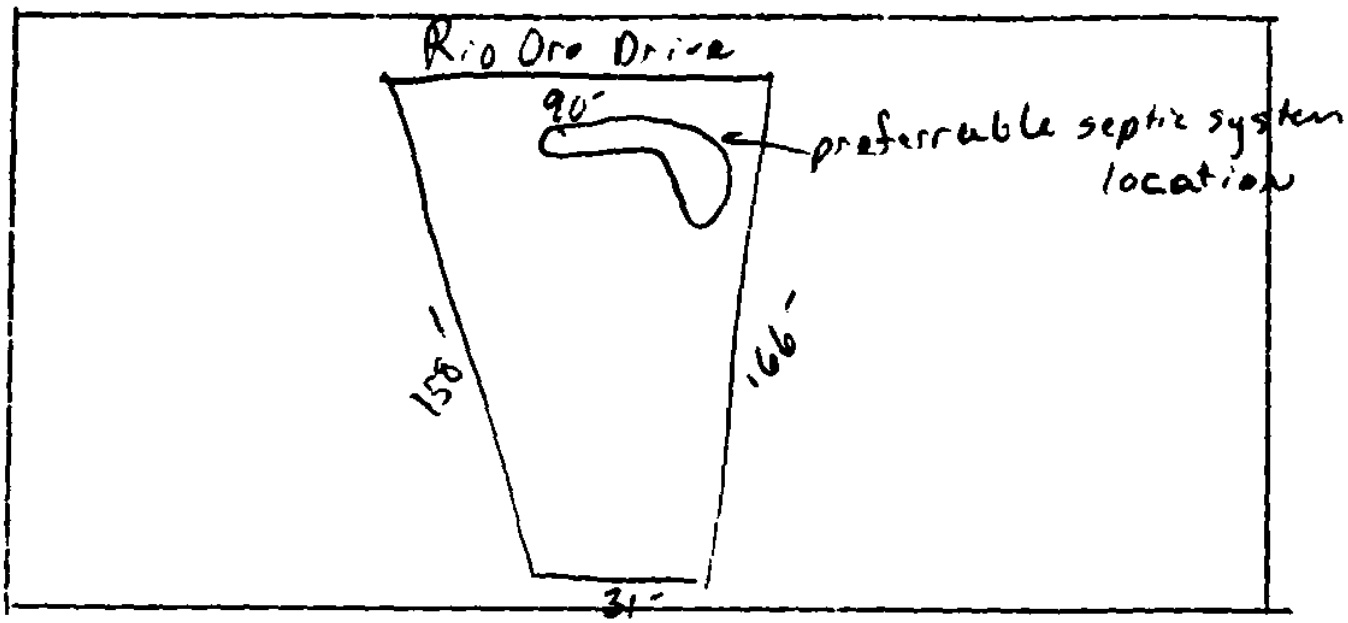
See diagram on back

W. Edward Casavant
Soil Scientist

WEC

3/18/75
EHD 539

DIAGRAM OF PROPERTY



3/18/75

339

Serial No. 6200

PTR No. 10789

T C No 001-291-06

Date Issued 3/30/76

Map Date -

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

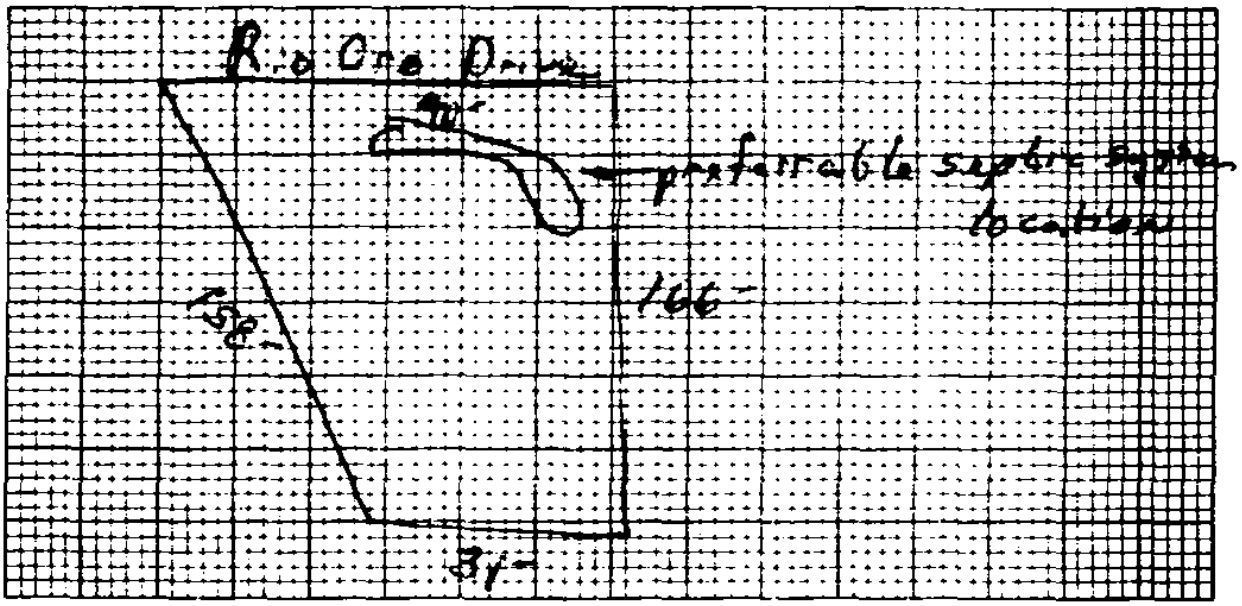
PERCOLATION TEST REPORT

NAME OF OWNER Mintz (LAST) William (FIRST) L. (MIDDLE)

ADDRESS OF OWNER 1720 E. Independence Blvd., Charlotte ZIP 28205

LOCATION OF PROPERTY Rio Dro Drive (STREET OR COUNTY ROAD)

SUBDIVISION Bahia Bay II LOT NO 117 BLOCK NO



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 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.

*Results determined by soil analysis

W. Edward Caswell Soil Scientist

John R. Adkisson

Director, Environmental Health Division or Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 3/29/76

ICAR(S) Application No. 10789

T C No 031291.06

Map Date 3/9/76

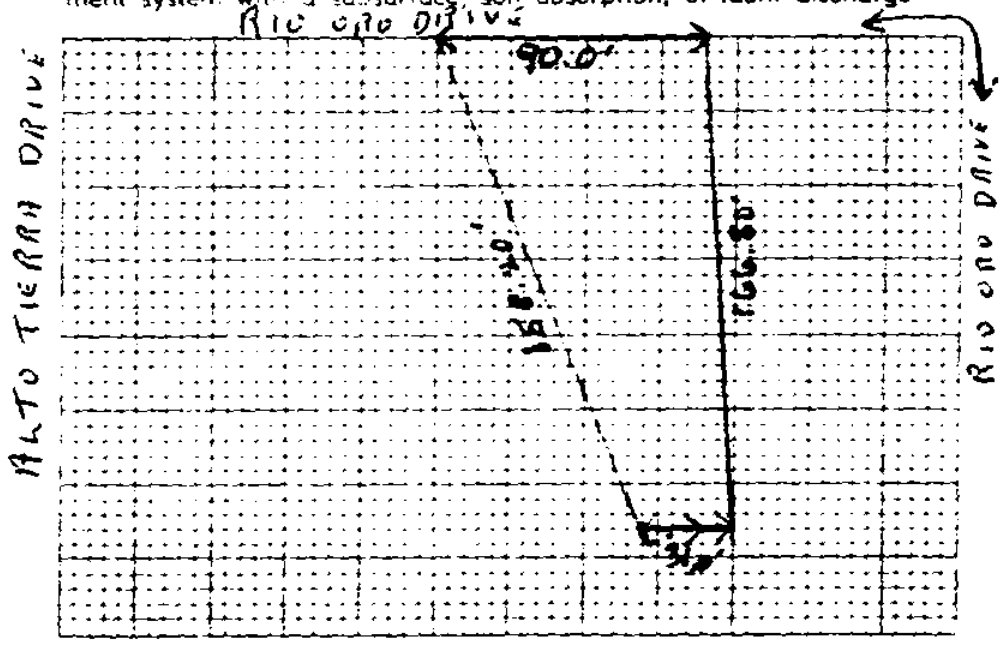
MECKLENBURG COUNTY HEALTH DEPARTMENT

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) 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)

4) No of Bedrooms 3

5) Business Use Max No Employees _____

6) Washing Machine X Yes _____ No

7) Garbage Disposal Yes X No

8) Dishwasher Yes X No

9) Water Supply:
A) Individual Well _____
B) Governmental System _____
C) Community System
1 Well source X
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 X No

11) FHA Case No _____

12) VA Case No _____

13) NAME OF OWNER Wintz (LAST) William (FIRST) L (MIDDLE)

14) ADDRESS OF OWNER 1720 E. Independence Blvd., Charlotte, N.C. 28205

15) PHONE NO. Home 525-1106 Office 377-6549

16) LOCATION OF SYSTEM Rio Cra Drive, Lake Norman (STREET OR COUNTY ROAD)

17) SUBDIVISION Bahia Bay Lot No. 110 Block No. Sec. two

Map Book No. 24 Page No. 339

18) DEED REFERENCE — DEED BOOK 3169 AT PAGE 153

19) HAS A PERCOLATION TEST BEEN RUN? _____ YES X 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.

March 24, 1976
DATE OF APPLICATION

William L Wintz
OWNER

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

HEALTH DEPARTMENT'S COPY

Date Issued 3/30/76

Serial No. 5777

IMPROVEMENTS PERMIT

LA No. 10789

T. C. No. 001-291-06

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 Mintz (LAST) William (FIRST) L. (MIDDLE)

ADDRESS OF OWNER 1720 E. Independence Blvd. ZIP 28205

LOCATION OF LOT Rio Oro Drive (STREET OR COUNTY ROAD)

SUBDIVISION Bahia Bay II LOT NO 110 BLOCK NO.

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 60Min./In 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 10789. 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.

Samuel Spencer Jr
Environmentalist

John R Atkinson
Director, Environmental Health Division or Authorized Section Head

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

HEALTH DEPARTMENT COPY

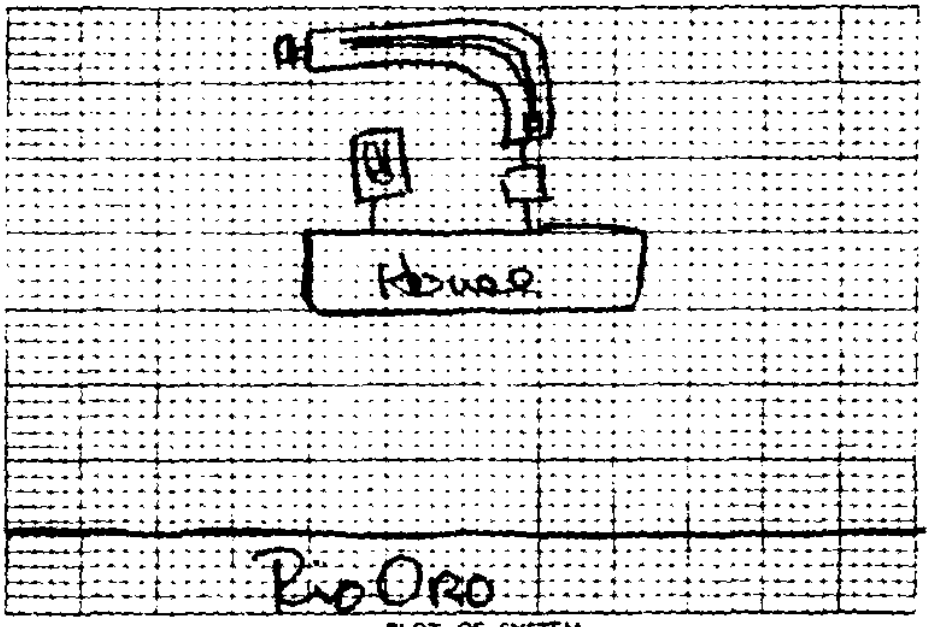
Date Issued 2 Sept 76 **Serial No.** 0179 ICAR(S) Permit No. 10789

T C No 001-391-06

Map Date 3-9-76

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 10789 dated 24 Mar 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 2 Oct 76, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate 60

Liquid Capacity of Tank 1000 gal

Tank Construction Precast Concrete

Absorption Area Determination

Total Line Length 400'-150'

Number of Lines 5-3

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Mintz, Wm. L.

LOCATION OF PROPERTY Rio Oro Drive Lot #10

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 aeration pit / All stone 34"

** May use 15' wide

A. 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 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 7 Sept 76 **Serial No.** 0183 C of A (s) No. 10789

T C No. 001-291-06

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF COMPLETION **CERTIFICATE OF APPROVAL**

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

Name of Owner Mintz, Wm. L.
(LAST, FIRST, MIDDLE)

Location of Property Rio Oro Drive

Application Number 10789 Permit Number 10789

Inspection Data:

Liquid Capacity of Tank 1000 gal Tank Material Precast Concrete

Total Length of Drain Tile 400'-150' Number of Lines 6-3

Depth of Filter Material 34" Cover Depth 36"

Water Supply Source Community Distance from Water Source 100'

Excavation Inspected 7 Sept 76 (DATE) Tank Inspected 7 Sept 76 (DATE)

Nitrification Field Inspected 7 Sept 76 (DATE)

Washing Machine Line Inspected, If Applicable 7 Sept 76 (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.

A. M. Reynolds
Environmentalist

EHD-5-76

Environmental Health Department's Copy