Date Received 6/15/77

APT No. 1267D

T. C. No. 17-141

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Ralph Squires Construction Company, Inc.
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER P. O. Box 25178 Charlotte, N. C. ZIP 28212

3) PHONE NO Home Office 537-9553

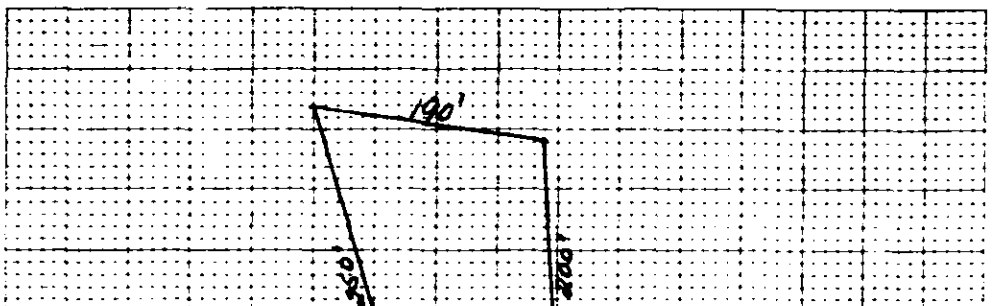
4) LOCATION OF PROPERTY 14008 Creekside Drive
(STREET OR COUNTY ROAD)

5) SUBDIVISION Windrow Estates LOT NO 29 BLOCK NO F

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



7) ACCURATELY DIAGRAM & DIMENSION LOT

Jim Bryan
OWNER

EHD-5-76

Environmental Health Department's Copy

Apl. 12670

DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES

APPENDIX H
SITE EVALUATION
(Ground Absorption Sewage Disposal)

OWNER: [illegible] DATE REQUESTED: January 14 1977

ADDRESS: [illegible] PLAT NO.: ——

COUNTY: [illegible] LOT SIZE: 4,000 sq. ft.

LOCATION OF SITE: 1408 Crooks Avenue Lot No. 29 Block F
Tax Map No. PIN 21-151-62

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS U 3-8	S PS — U	S PS U	S PS U
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1 clay)	S (PS) U C	S PS — U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 in.) (Clayey soils)	S (PS) U blocky	S — PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	(S) PS U >48"	S PS — U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, rock)	S PS — U	S PS — U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	S PS U >24"	S PS (U)	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) U	S PS (U)	S PS U	S PS U
8. OTHER (Specify)	S PS — U	S PS (U)	S PS U	S PS U
9. SITE CLASSIFICATION*	[illegible]	[illegible]		
SOIL SERIES	Cecil	Cecil		

S - Suitable PS - Provisionally Suitable U - Unsuitable

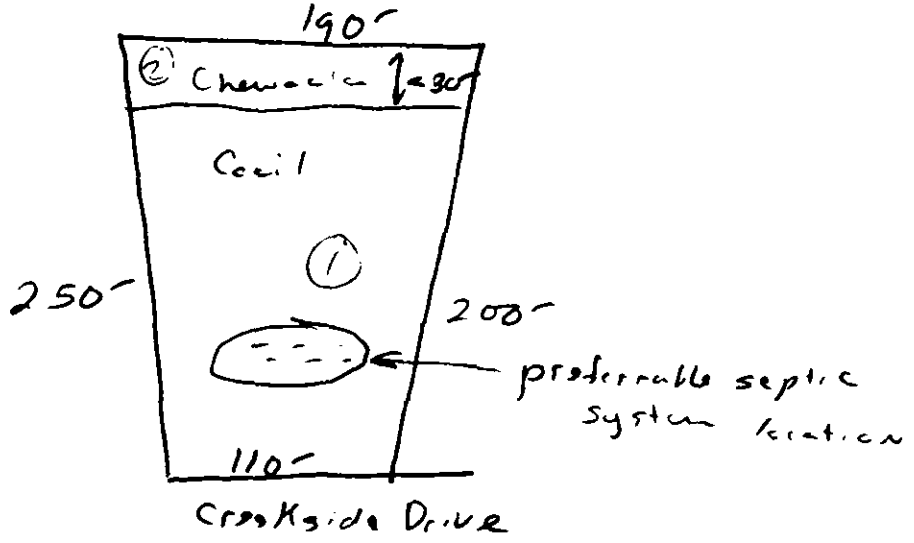
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc.)

Recommendations/Comments: [illegible]

Described By: [illegible]

Title: Soil Scientist Date: July 1, 1977

DHS Form 2601 (2/77)
Sanitation


190'
Chemocline
<30'
Cecil
1
250'
200'
preferrable septic system location
110'
Creekside Drive

Serial No. 1052

PTR No. 12670

T C. No. P.O.215-131-01

Date Issued July 5, 1977

Map Date

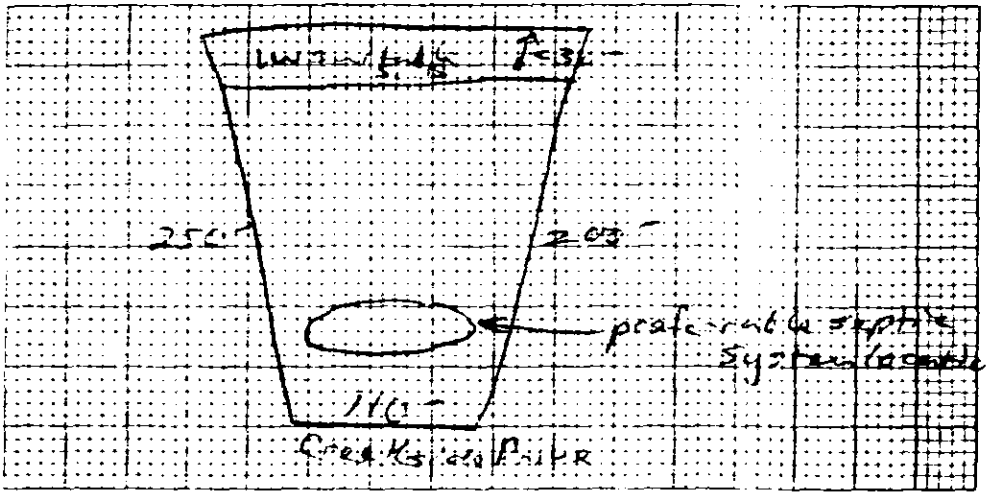
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Ralph Squires Construction Company, Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER P.O. Box 25178, Charlotte, NC ZIP 28212

LOCATION OF PROPERTY 14008 Creekside Drive
STREET OR COUNTY ROAD

SUBDIVISION Windrow Estates LOT NO 29 BLOCK NO F



PLOT PLAN

This is to certify that an investigation and on site investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The investigation was conducted on that portion of the lot as indicated on the above plot **Provisionally Suitable**

The permeability rate determined by the investigation 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 must be obtained before any repair, alteration or addition to the system and the attached form from the Mecklenburg County Department of Environmental Health prior to the beginning of any such work or changing of the wastewater treatment system or the soil.
2. The size of the septic tank and absorption field system which must be installed will be determined by the Mecklenburg County Department of Environmental Health prior to the issuance of the permit, the rate obtained above, and on the size and type of building or structure to be served.
3. This approval is granted only for the system installation in the immediate area indicated as acceptable for system installation on the site plan.
4. The approval is granted only after grading of the lot is completed, including the drilling of the well, 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 such installation. Any alteration, repair or addition to the 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. Edmund Cassuto
EHD-S 76 **Soil Scientist**

John R. Atkinson
Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 1/10/79

ICAR(S) Application No 12670

T C No 215-B1-01

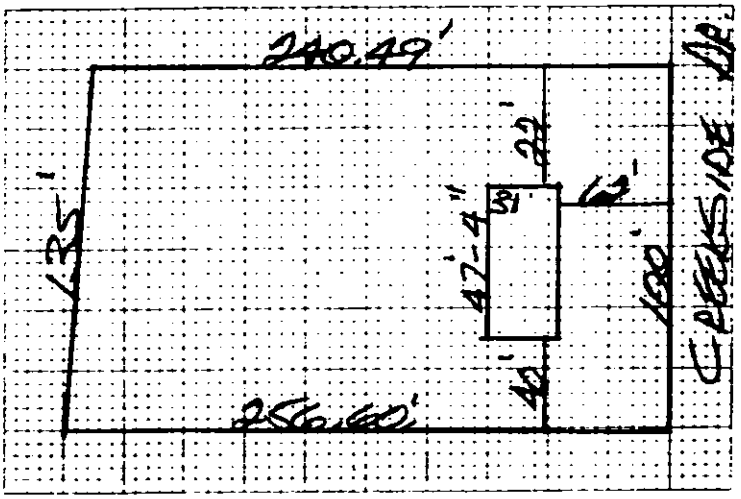
Map Date

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) ✓ 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 ✓ Yes ___ No

4) No. of Bedrooms 4

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 N/A

12) VA Case No ___

13) NAME OF OWNER RALPH SQUIRES CONST. CO., INC.
(LAST FIRST MIDDLE)

14) ADDRESS OF OWNER P O Box 25178 28212

15) PHONE NO Home ___ Office 537-9553

16) LOCATION OF SYSTEM 14008 CREEKSIDE DR.
(STREET OR COUNTY ROAD)

17) SUBDIVISION Window Lot No 29 Block No. F

Map Book No ___ Page No. ___

18) DEED REFERENCE — DEED BOOK 18 AT PAGE 308

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ___ NO DATE RUN 7-5-77

20) PTR NUMBER (See Instructions) 12670

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.

1-10-79
DATE OF APPLICATION

OWNER

EHD-5-76

Department's Copy

SEE INSTRUCTIONS ON BACK

ICAR(S) Application No. 12670

Date Received Dec. 7, 1978

T C No. PO 215-131-01

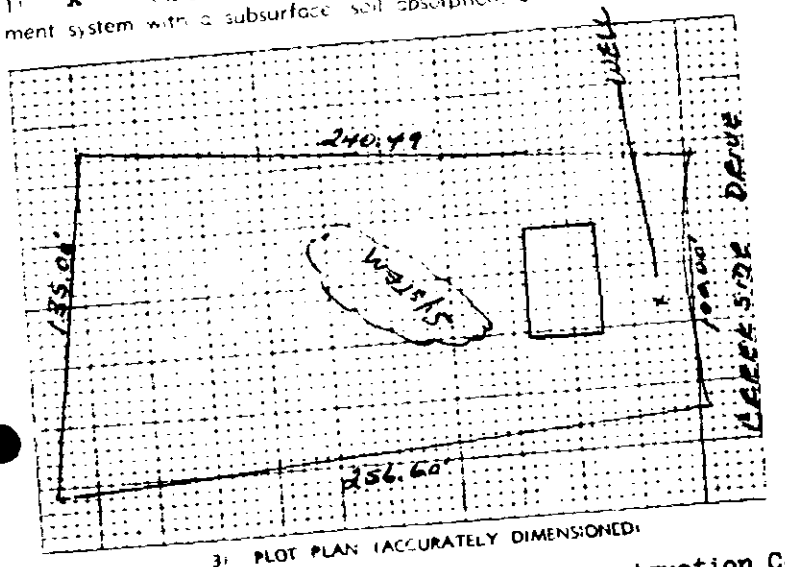
Map Date

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 X No
Residence X Yes ___ No

4) No. of Bedrooms 4
5) Business Use ___ Yes N/A 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 Yes
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 X No
11) FHA Case No N/A
12) VA Case No N/A

13) NAME OF OWNER Ralph Squires Construction Company (LAST / FIRST / MIDDLE)

14) ADDRESS OF OWNER P. O. Box 25178, Charlotte, N. C. 28212

15) PHONE NO Home ___ Office 537-9553

16) LOCATION OF SYSTEM 14008 Creekside Drive (STREET OR COUNTY ROAD) Block No. F

17) SUBDIVISION Windrow Estates Lot No 29

Map Book No. ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES ___ NO DATE RUN 7-5-77

20) PTR NUMBER (See Instructions) 12670

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.

Mary Jean Eblick
OWNER

12-6 ~~12-20~~-78
DATE OF APPLICATION

Health Department's Copy

EHD-5-76

Serial No. 2509

LA No. 12670

Date Issued Dec. 7, 1978

T. C. No. po 215-131-01

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

IMPROVEMENT PERMIT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Ralph Squires Construction Company
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P.O. Box 25178, Charlotte,N.C. ZIP

LOCATION OF LOT 14008 Creekside Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Windrow Estates LOT NO 29 BLOCK NO. F

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 12670. 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, 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 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

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

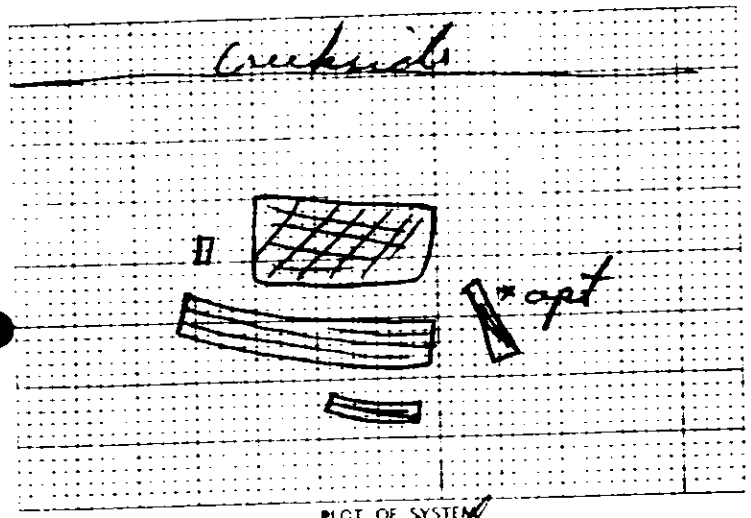
Date Issued 30 April 79 Serial No. 2671 ICAR(S) Permit No. 12670

T C No 215-13-01

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 ✓ 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 12670 dated 1/10/79 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 30 May, after which date this permit shall be null and void



PLOT OF SYSTEM

Permeability Rate P.S

Liquid Capacity of Tank 1500 gal

Tank Construction P.C. Conc

Absorption and or Nitrification Lines

Total Line Length 440' & 167

Number of Lines 5 & 4

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Ralph Squires

LOCATION OF PROPERTY 14008 Creekside DR.

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Health Commissioners 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.

THE ISSUANCE OF THIS PERMIT DOES NOT IN ANY WAY GUARANTEE THAT THE SYSTEM AS OPERATED OR 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.

Comments

15'x88'x17" Stone
12'x42'x17" Stone

Steve Wood
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 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-S-76

Environmental Health Department's Copy

Date Issued 4 June 79 Serial No. 2742 C of A (s) No. 12670

T C No. 215-131-01

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 Ralph Sprinkle Const Co. (LAST / FIRST / MIDDLE)

Location of Property 1402 S. Cricklewood Dr

Application Number _____ Permit Number 12670

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material F C Conc

Total Length of Drain Tile 440' ; 167' Number of Lines 5 ; 4

Depth of Filter Material 17" Cover Depth 18"

Water Supply Source Well Distance from Water Source 100

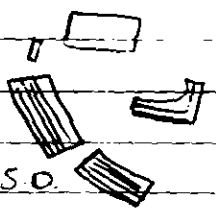
Excavation Inspected — (DATE) Tank Inspected 4 June (DATE)

Nitrification Field Inspected 4 June (DATE)

Washing Machine Line Inspected, If Applicable 4 June (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 Corr



Environmentalist

EHD-5-76

Environmental Health Department's Copy

Date Issued 4 June 79

Serial No. 2667

C of A (s) No. 12670

T C No 215-131-01

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 Ralph Squires Const. Co
(LAST, FIRST, MIDDLE)

Location of Property 1488 Creekside Dr

Application Number _____ Permit Number 12671

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material F.C. Conc.

Total Length of Drain Tile 440' & 167' Number of Lines 6 & 4

Depth of Filter Material 17" Cover Depth 15"

Water Supply Source well Distance from Water Source 100'

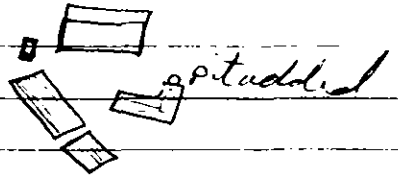
Excavation Inspected _____ (DATE) Tank Inspected 4 Jun (DATE)

Nitrification Field Inspected 4 Jun (DATE)

Washing Machine Line Inspected, If Applicable 4 Jun (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 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 S. Dan



Steve Wood
Environmentalist

EHD-5-76

Environmental Health Department's Copy

Date Received 2/19/80

ICAR(S) Application No. 12670

T C. No. 215-13-01

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) Install or Construct 2) ✓ Alter or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption effluent discharge

Mobile Home ___Yes ___No
Residence ✓Yes ___No
4 No. of Bedrooms 4
5 Business Use Max. No. Employees
6 Washing Machine ✓Yes ___No
7 Garbage Disposal ✓Yes ___No
8 Dishwasher ✓Yes ___No
9 Water supply
a. Public or Community System yes
b. Development Name
c. Community Well Name
Well Permit #
d. Individual Well Permit #
10 Private System
a. Any well within 100 feet Yes ___No
b. Any stream Yes ___No
c. Any well within 100 feet of stream Yes ✓No
11 FHA Case No.
12 VA Case No.

3 PLOT PLAN ADEQUATELY DIMENSIONED

13) NAME OF OWNER Wenkee (LAST) Ronald (FIRST) D (MIDDLE)

14) ADDRESS OF OWNER 7465 Shackside Dr

15) PHONE NO. Home 537-0356 Office 575-1174

16) LOCATION OF SYSTEM 7465 Shackside Dr (STREET OR COUNTY ROAD)

17) SUBDIVISION Cumberland Lot No 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.

2-5-80
DATE OF APPLICATION

Ronald D Wenkee
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial 3911

Date Issued 5/16/80

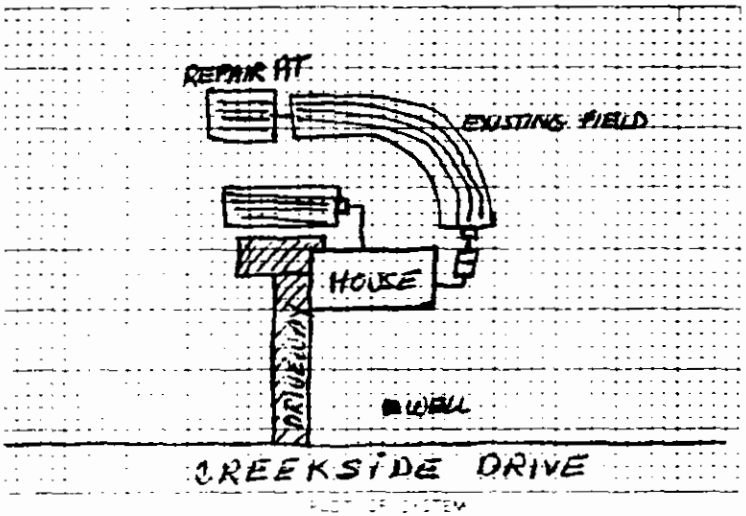
ICAR (S) Permit No. 12670

T. C. No. 215-131-01

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 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 12670 dated 3/6/80 and is void and of no effect if the information provided in the application is found to be false. All work shall be completed on or before 6/20/80 after which date this permit shall be null and void.



PLOT OF SYSTEM

Permit is for: REPAIR

Liquid Capacity of Tank: —

Type Construction: —

Absorption Area Required in Square Feet: 400'

Trench Length: 400'

Number of Lines: 4

Distance from Nearest Property Line: >10'

Distance from Nearest Water Line: >10'

Distance from Well: 100'

NAME OF OWNER: MEAKER, RONALD D.

LOCATION OF PROPERTY: 14008 CREEKSIDE DRIVE WINDSOR

This system must 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 unacceptable or can be used. The issuance of this permit does not in any way guarantee that the system constructed will operate properly or relieve any person now or hereafter owning or using such system from any liability resulting from the failure of the system to operate properly.

PIT: 12'X12'X10' of STONE

Division or Section Head

Environmentalist Robert Wingfield

* 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 5/22/80 Serial 3711 C of A (s) No 12670 T C No 215-131-01

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 MEAKER, RONALD D.
LAST FIRST M Init

Location of Property 14008 CREEKSIDE DRIVE

Application Number 12670 Permit Number 12670

Inspection Date:

Liquid Capacity of Tank REPAIR Tank Material —

Total Length of Drain Tile 400' Number of Lines 4'

Depth of Filter Material 10' Cover Depth 24"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected — DATE Tank Inspected — DATE

Installation Finally Inspected 5/22/80 DATE

Flushing Manifold Inspected If Applicable — DATE

The undersigned has inspected the Individual Septic Tank System with subsurface soil absorption and effluent discharge as described above and it has been installed or constructed ✓ and repaired in accordance with the permit issued and the regulations of the Mecklenburg County Board of Commissioners 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 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

PIT: 12'x15'x10' of STONE

Adam Upchurch
Environmental Specialist

EHD-5-76

Environmental Health Department's Copy