Date Received September 11, 1979

APT No. 16164

T. C. No. 193-241-C1

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER McLaughlin (LAST) Nelson (FIRST) Edward (MIDDLE)

2) ADDRESS OF OWNER 8817 Old Concord Rd. Newell, N.C. ZIP 28126

3) PHONE NO. Home 598-7539 Office 375-9225

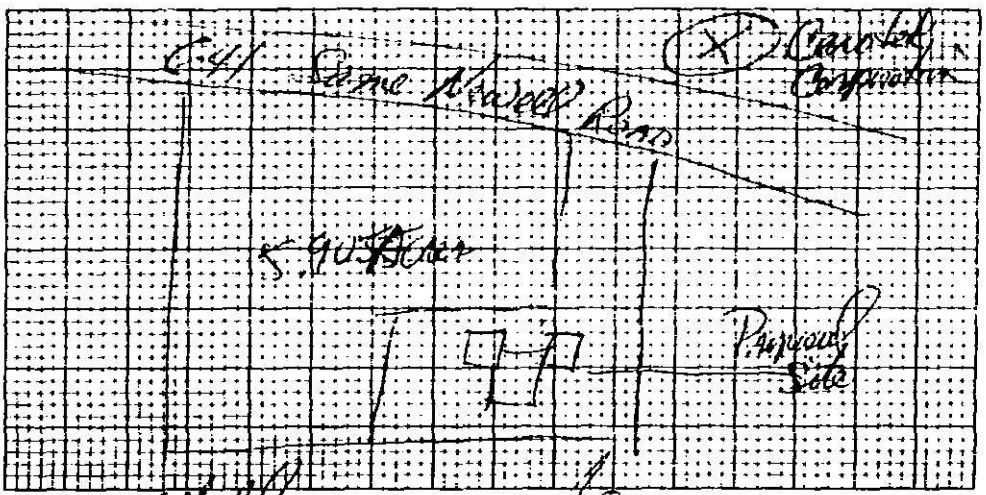
4) LOCATION OF PROPERTY 641 Sam Newell Rd. (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO _____ BLOCK NO. _____

MAP BOOK NO _____ PAGE NO. _____

6) DEED REFERENCE: DEED BOOK 4231 PAGE NO 245

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



See Attached Drawing

7) ACCURATELY DIAGRAM & DIMENSION LOT

Edward McLaughlin
OWNER

EHD-5-76

Environmental Health Department's Copy

S. I. R. NO. 16164

NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX II
SITE EVALUATION

T. C. # 193.241-07

(Ground Absorption Sewage Disposal)

OWNER: NELSON M^C/LOUGLIN
ADDRESS: 8517 OLD CONCORD RD
COUNTY: NEWELL RD 28126
LOCATION OF SITE: 641 SAM NEWELL RD South of 74

DATE REQUESTED: 9-11-79
PLAT NO.:
LOT SIZE: 5.9A

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U 2-10	S (PS) U 0-10	S PS U	S PS U +
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1 Clay)	S (PS) U CLAYEY	S (PS) U Clayey 2-1 Clay	S PS U	S PS U
3. SOIL STRUCTURE (12-36 in.) (Clayey Soils)	S (PS) U Blocky	S PS (U) Massive	S PS U	S PS U
4. SOIL DEPTH (In.)	S (PS) U 48	S PS (U) 48	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock)	S (PS) U NONE	S PS (U) Clays	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & internal)	S (PS) U Adequate	S PS (U) Slow	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) U Moderate	S PS (U) Slow	S PS U	S PS U
8. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	✓ P. Suitable	Unsuitable		
SOIL SERIES	Cecil	HELENA		

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:

Described By: W. B. Ramsey

Title: Soil Scientist Date: 9-12-79

DHS Form 2601
Sanitation
EHD 539 (3/79)

✓

SAM NEWELL RD
834
Not Surveyed
667
Area III
Helena
9-10
100
Area II
Cecil
9-10
354
Woods

Serial No. 3121

PTR No. 16164

T C No. 193-241-07

Date Issued Sept. 14, 1979

Map Date

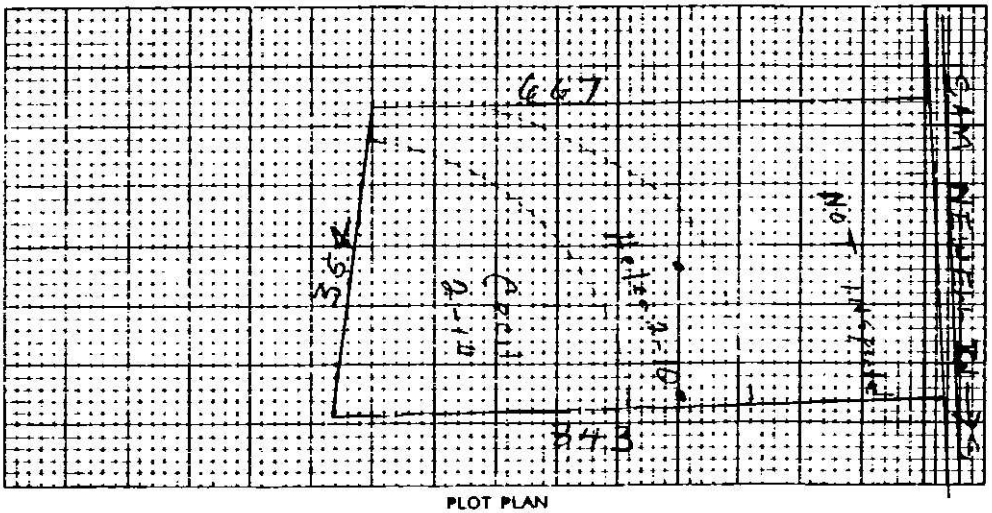
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER McLouglin, Nelson
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 8517 Old Concord Road, Newell, NC 28126

LOCATION OF PROPERTY 641 Sam Newell Road
(STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO.



PLOT PLAN

This is to certify that a soil investigation and on site investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The said investigation was conducted on that portion of the lot as indicated on the above plot. The permeability rate determined by the investigation was Provisionally Suitable. 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 or construct alter or repair the septic tank system shall be obtained from the Mecklenburg County Department of Environmental Health 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 shall be determined by the Mecklenburg County Department of Environmental Health at the time of application for a permit, the permeability rate obtained above, and on the size and type of building or facility proposed.
3. This approval is valid only for the system installed on the immediate area indicated as acceptable for system installation on the above plot.
4. This approval is void and any pending application for permit to install or repair including the drilling of a well is 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 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 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.

Willard Ramsey
Soil Scientist

EHD-3-79

John M. Johnson
Environmental Health Director or
Authorized Section Head

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 9/17/79

ICAR(S) Application No 16164

T. C. No. 193-241-07

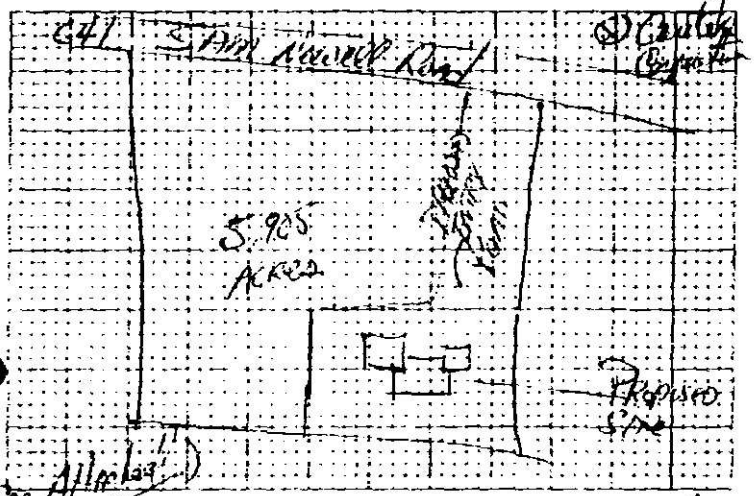
Map Date

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 on individual septic tank wastewater treatment system with a subsurface, soil absorption, effluent discharge.



3) PLOT PLAN (ACCURATELY DIMENSIONED)

See Attachment

4) Mobile Home Yes ___ No ___
Residence Yes X No

4) No of Bedrooms 3

5) Business Use X Yes No
Employees Three

6) Washing Machine ___ Yes X No

7) Garbage Disposal ___ Yes X No

8) Dishwasher ___ Yes X No

9) Water Supply
A. Individual Well X
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 NA

12) VA Case No NA

13) NAME OF OWNER McLaughlin (LAST) Nelson (FIRST) Edward (MIDDLE)

14) ADDRESS OF OWNER 5517 Old Concord Rd.

15) PHONE NO Home 598-7539 Office 375-9225

16) LOCATION OF SYSTEM 641 Sam Newell Rd. (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. ___ Block No. ___

Map Book No. ___ Page No. ___

18) DEED REFERENCE — DEED BOOK 4231 AT PAGE 245

19) HAS A SOIL INVESTIGATION BEEN RUN? ___ YES X NO DATE RUN ___

20) PTR NUMBER (See Instructions) 16164

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.

September 11, 1979
DATE OF APPLICATION

Edward McLaughlin
OWNER

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued Sept. 14, 1979

Serial No. 3521

LA No. 16164

T. C. No. 193-241-07

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER McLouglin, Nelson
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 8517 Old Concord Road, Newell, N.C. ZIP 28126

LOCATION OF LOT 641 Sam Newell Road
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

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 16164. 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 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.

~~**SYSTEM MUST BE INSTALLED BEFORE POWER IS GRANTED**~~ **TRAILER OFFICE**

John R Atkinson

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 18 Sept 79

ICAR(S) Application No 16164

T C. No. _____

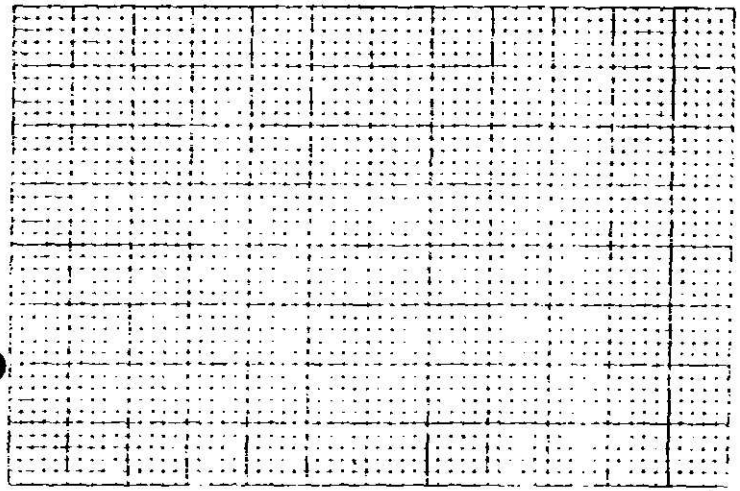
Map Date _____

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)

4) Mobile Home ___Yes ___No
Residence ___Yes X No

5) No of Bedrooms ____

6) Business Use X Max No Employees 4

7) Washing Machine ___Yes X No

8) Garbage Disposal ___Yes X No

9) Dishwasher ___Yes X No

10) Water Supply
A) Individual Well X
B) Governmental System ____
C) Community System
1 Well source ____
2 Governmental source ____

11) Sewage System
House located within 200 feet of public sewer ___Yes X No
House located within 200 feet of community sewer ___Yes X No

12) FHA Case No NA

13) VA Case No NA

13) NAME OF OWNER McLaughlin (LAST) Nelson (FIRST) Edward (MIDDLE)

14) ADDRESS OF OWNER 8517 Old Concord Rd.

15) PHONE NO Home 598-7539 Office 375-4225

16) LOCATION OF SYSTEM 641 Sam Newell RD (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK 4231 AT PAGE 245

19) HAS A SOIL INVESTIGATION 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.

Sept 18, 1979
DATE OF APPLICATION

Edward McLaughlin
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial 3176

* Date Issued 18 Sept 79

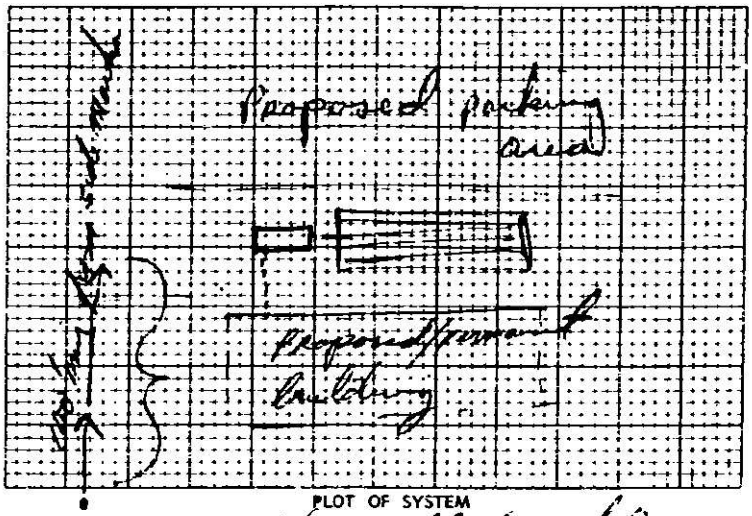
ICAR(S) Permit No. 16164

T C No. 193-244-07

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 16164, dated 18 Sept 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 18 Oct. 79, 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 RC Concrete

Absorption and/or Nitrification Lines:

Total Line Length 300' (Recommended)

Number of Lines 4

Distance from House 10'

Distance from Property Line 10'

Distance from Well to be 100'

NAME OF OWNER Nelson McLaughlin

LOCATION OF PROPERTY 641 Sam Newell Rd.

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. 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.

Division or Section Head

Environmentalist Steve Wood

* 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.

END-5-76

Environmental Health Department's Copy

C of A (s) No 16164

Date Issued 3-19-80 Serial 3554 T C No 193-241-05

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 Mc Laughlin (LAST) Nelson (FIRST) ____ (MIDDLE)

Location of Property 641 San Mwell.

Application Number 16164 Permit Number 16164

Inspection Date:

Liquid Capacity of Tank 1500 gal Tank Material P.C.

Total Length of Drain Tile 300' Number of Lines 5

Depth of Filter Material 17" Cover Depth 15"

Water Supply Source well Distance from Water Source 100'+

Excavation Inspected 3-19-80 (DATE) Tank Inspected 3-15-80 (DATE)

Nitrification Field Inspected 3-19-80 (DATE)

Washing Machine Line Inspected, If Applicable 3-19-80 (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 ____

Bob Wilson
Environmentalist

EHD-S-76

Environmental Health Department's Copy