B

Date Received 5-9-23

APT No. 6208

T. C. No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER JOHNSON, (LAST) KENNETH (FIRST) DWIGHT (MIDDLE)

2) ADDRESS OF OWNER 4601 WEST. BLVD, CHARLOTTE, N.C. ZIP 28208

3) PHONE NO. Home 392-2442 Office 535-2582

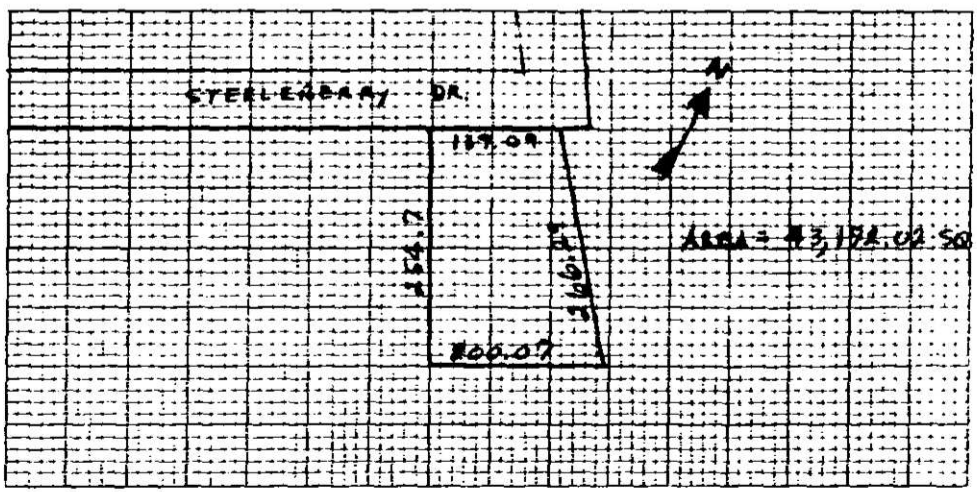
4) LOCATION OF PROPERTY STEELEBERRY DR. (STREET OR COUNTY ROAD)

5) SUBDIVISION STEELEBERRY LOT NO. ~~13~~ 14 BLOCK NO. A

MAP BOOK NO. 11 PAGE NO. 65

6) DEED REFERENCE: DEED BOOK PAGE NO.

Applicotion is hereby mode 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

Kenneth D. Johnson
OWNER

FORM NO E-1-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3088

PTR No. 6208

T C No. 141-097-01

Date Issued May 15, 1973

Map Date

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

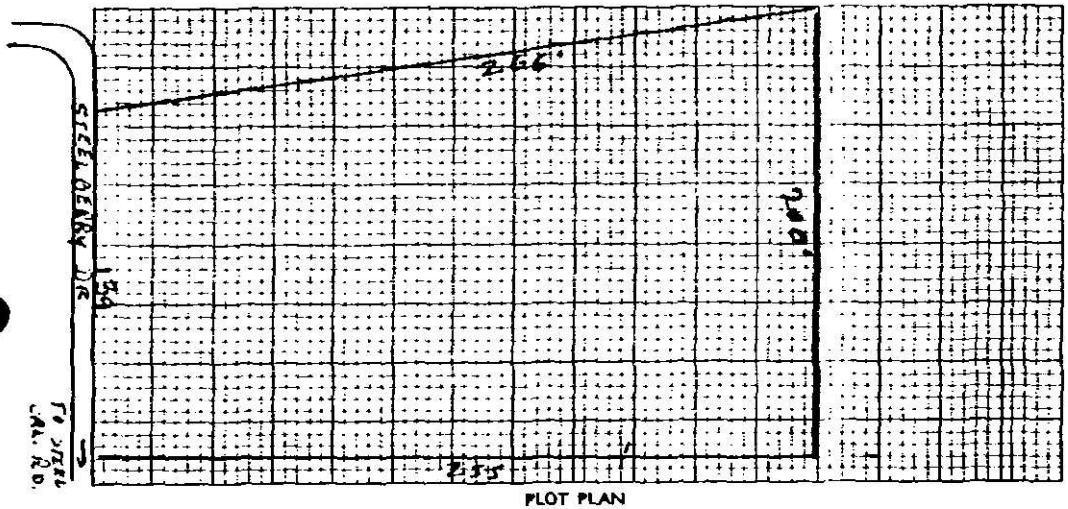
PERCOLATION TEST REPORT

NAME OF OWNER Johnson (LAST) Kenneth (FIRST) Dwight (MIDDLE)

ADDRESS OF OWNER 4601 West Blvd. ZIP 28208

LOCATION OF PROPERTY Steeleberry Drive (STREET OR COUNTY ROAD)

SUBDIVISION Steeleberry LOT NO. 14 BLOCK NO. A



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 @ 35 min/in the said lot is approved for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption effluent dischorge 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.

Director, Environmental Health Division or Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

B

SEE INSTRUCTIONS ON BACK

Date Received 6-4-93

ICAR(S) Application No 6208

T C No 141-097-01

Map Date

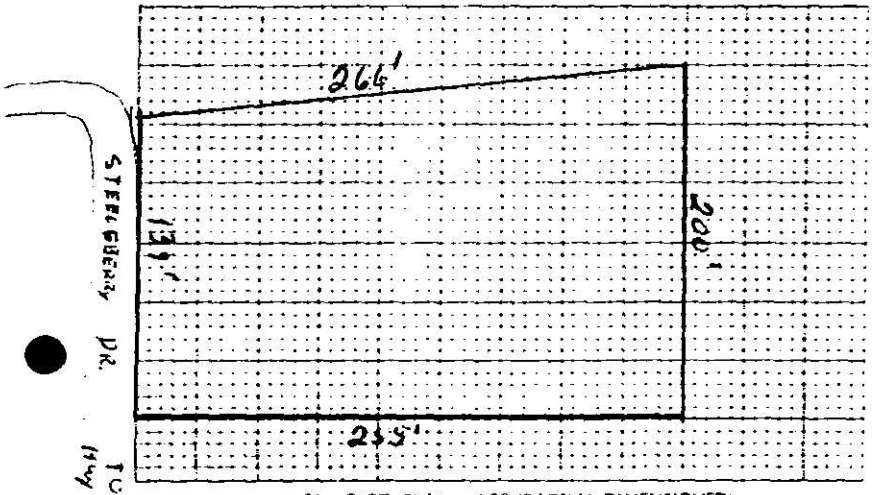
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 Yes No
Employees N/A

6) Washing Machine Yes No

7) Garbage Disposal Yes No

8) Dishwasher Yes No

9) Water Supply
A) Individual Well
B) Governmental System CITY
C) Community System
1) Well source
2) Governmental System

10) Sewage System
Property located within 200 feet of public sewer Yes No
Property located within 200 feet of community sewer Yes No

11) FHA Case No

12) VA Case No

13) NAME OF OWNER JOHNSON (LAST) KENNETH (FIRST) DWIGHT (MIDDLE)

14) ADDRESS OF OWNER 4601 W BLVD

15) PHONE NO Home 392-2442 Office 535-2552

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

17) SUBDIVISION STEELBERRY ACRES Lot No. 14 Block No A

Map Book No. 11 Page No. 65

18) DEED REFERENCE — DEED BOOK 3506 AT PAGE 213

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES _____ NO DATE RUN 5/5 23 R 235

20) PTR NUMBER (See Instructions) 6208

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.

JUNE 4, '93
DATE OF APPLICATION

Kenneth D. Johnson
OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued June 4, 1973

Serial No. 3000

LA No. 6208

T. C. No 141-097-01

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 Johnson (LAST) Kenneth (FIRST) Dwight (MIDDLE)

ADDRESS OF OWNER 4601 West Blvd. ZIP

LOCATION OF LOT Steeleberry Drive (STREET OR COUNTY ROAD)

SUBDIVISION Steeleberry Acres LOT NO 14 BLOCK NO. A

MAP BOOK NO. 11 PAGE NO. 65

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 35 min/in 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 6208. 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

L R Bridgeman
Environmentalist

John R Adkisson
Director Environmental Health Division or Authorized Section Head

FORM NO. E-3-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 8-13-73 Serial No. 4159 ICAR(S) Permit No. 6208

T C. No.

Map Date

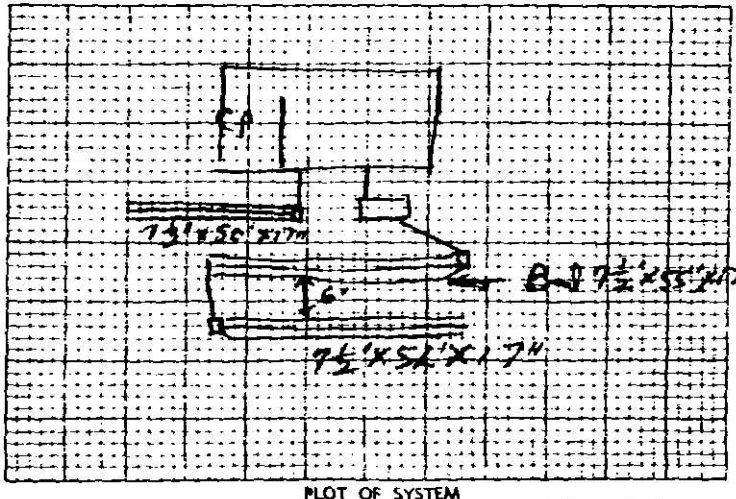
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTRUCTION, 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 6208 dated 6-4-73 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 8/30/73 after which date this permit shall be null and void.



PLOT OF SYSTEM

Percelation Rate 35

Liquid Capacity of Tank 1000

Tank Construction PC

Absorption and/or Nitrification Lines ST WM

Total Line Lenght 320 150

Number of Lines 6 3

Distance from House 10' 10'

Distance from Property Line 10' min

Distance from Well 117

NAME OF OWNER KENNETH D JOHNSON

LOCATION OF PROPERTY STEELBERRY @ END ON L SIDE

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: N. M^c Webb

JA/RPB

Division or Section Head

Environmentalist

* 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 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 NO E-5-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 21 Aug 1973 Serial No. 3506 C of A (s) No. 6208

T. C. No. /

Map Date /

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Johnson, Kenneth (LAST, FIRST, MIDDLE)

Location of Property Steelberry Rd

Application Number 6208 Permit Number 6208

Inspection Data:

Liquid Capacity of Tank 1000 gal Tank Material precast

Total Length of Drain Tile 320 Number of Lines 5 (12½ x 64)

Depth of Filter Material 17" Cover Depth 24"

Water Supply Source Municipal Distance from Water Source NA

Excavation Inspected 21 Aug 1973 (DATE) Tank Inspected 21 Aug 1973 (DATE)

Nitrification Field Inspected 21 Aug 1973 (DATE)

Washing Machine Line Inspected, If Applicable 21 Aug 1973 (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 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(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: wash line in bed 10'x 32'

John R Atkinson

Environmentalist

FORM NO. E-6-4-1-71

HEALTH DEPARTMENT'S COPY