Date Received 10-13-83

MECK COUNTY DEPARTMENT OF
RECEIVED
OCT 13 1983
ENVIRONMENTAL HEALTH

SIR No. 20126

T.R. No. 193-141-04
5

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Ty-Par Realty, Inc.
LAST FIRST MIDDLE

2) ADDRESS OF OWNER P.O. Box 763 Monroe N.C. ZIP 28110

3) PHONE NO. Home _____ Office 372-0088

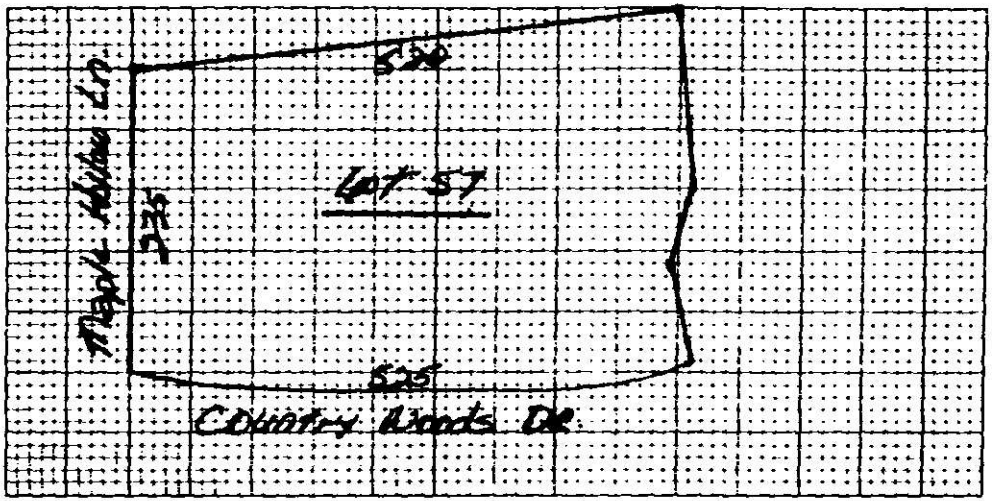
4) LOCATION OF PROPERTY 14121 Maple Hollow Ln.
STREET OR COUNTY ROAD

5) SUBDIVISION Country Woods LOT NO 57 BLOCK NO. _____

MAP BOOK NO _____ PAGE NO. _____

6) DEED REFERENCE DEED BOOK 4411 PAGE NO. 46

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

[signature] For: Ty-Par Realty
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 5427

SIR No. 20126

T. C. No. PO 195-141-04

Date Issued 2-1-84

Map Date

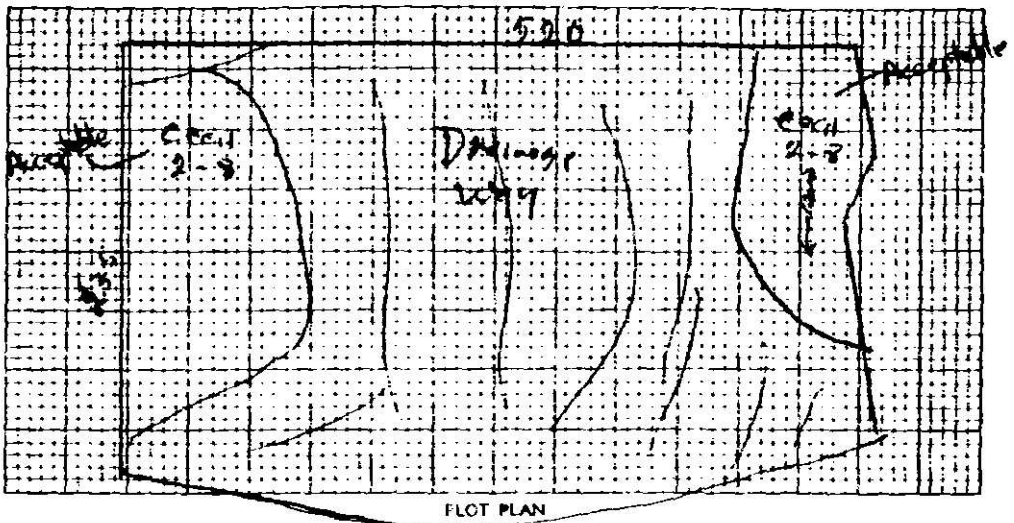
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Ty-Par Realty, Inc.
(LAST FIRST MIDDLE)

ADDRESS OF OWNER P.O. Box 763, Monroe, NC ZIP 28110

LOCATION OF PROPERTY 14121 Maple Hollow Lane
(STREET OR COUNTY ROAD)

SUBDIVISION Country Woods LOT NO 57 BLOCK NO.



PLOT PLAN

This is to certify that a soil investigation and [illegible] 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 **PROVISIONALLY SUITABLE**

The permeability rate determined by the investigation was 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 septic tank system must be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction of building sewer of the wastewater treatment system on the said lot
2. The size of the septic tank wastewater treatment system which must be installed on this lot will be determined by the Mecklenburg County Department of Environmental Health at the time of application for a permit based on the permeability rate obtained above and on the size and type of building to be constructed thereon
3. This approval is only for the system as shown on the plot plan submitted with the application for the above lot
4. This approval is not to be construed as a guarantee of the performance of the well system installed 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 or construction thereon or any 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 at the issue date.

Vincent B. Kenney
Soil Scientist

Bill D. Hardister
Environmental Health Director or
Authorized Section Head

5-76

Environmental Health Department's Copy

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20126

T.C. NO. PO 196-141-84

(Ground Absorption Sewage Disposal)

OWNER: TY-PAR REALITY, INC. PLAT NO: _____
ADDRESS: PO BOX 763 LOT SIZE: 3.0
MONROE, N.C. 28110
LOCATION OF SITE: MAPLE HOLLOW LANE

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U 1-8	S (PS) U 2-10	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) U Clayey	S (PS) U Clayey	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) U Blocky	S (PS) U Blocky	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) U 36-46"	S PS (U) 20-30	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U None	S (PS) U None	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) U Adequate	S (PS) U Adequate	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IIe	IIe		
9. SITE CLASSIFICATION	P. Suitable	Unsuitable		
10. SOIL SERIES	Cecil	Cecil IN Drainageway		

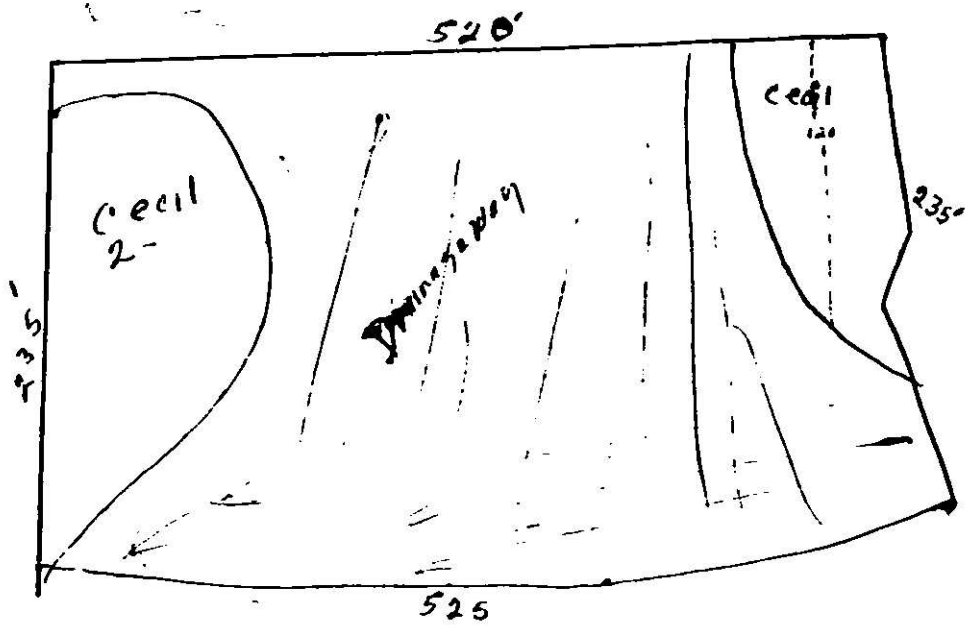
S - Suitable PS - Provisionally Suitable U - Unsuitable

**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: _____

Described by: W. B. Ramsey
Title: Sanitarian

Date: 1-31-84


520'
Cecil
2-
Cecil
235'
525

MECK COUNTY DEPARTMENT OF
RECEIVED
OCT 13 1983
ENVIRONMENTAL HEALTH

Date Received 10-13-83

SEE INSTRUCTIONS ON BACK

ICAR(S) Application No. 20126

T&R No. 195-141-04

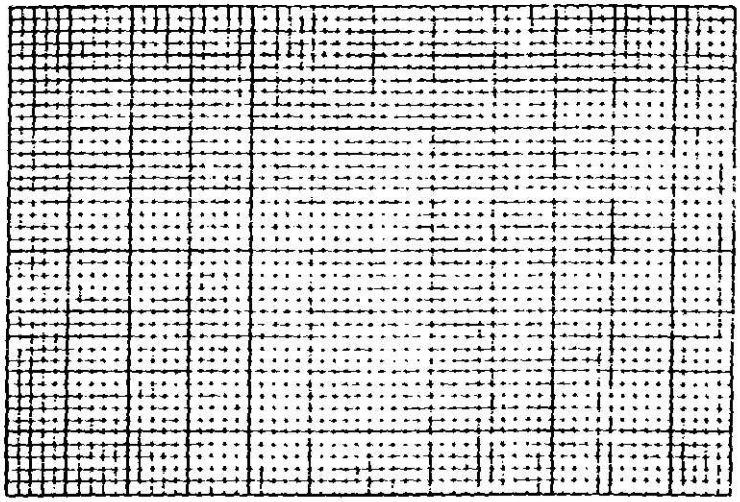
Map Date 5

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 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 Ty-Par Realty, Inc.
(LAST FIRST MIDDLE)
14) ADDRESS OF OWNER P.O. Box 763 Monroe N.C. 28110
15) PHONE NO. Home ____ Office 372-0088
16) LOCATION OF SYSTEM 14121 Maple Hollow Ln.
(STREET OR COUNTY ROAD)
17) SUBDIVISION Country Woods Lot No. 57 Block No. ____
Map Book No. ____ Page No. ____
18) DEED REFERENCE — DEED BOOK 441 AT PAGE 46
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.

10-6-83
DATE OF APPLICATION

[signature] for Ty-Par Realty
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 7175

SIR No. 20126

Date Issued 2-1-84

T. C. No. PO 195-141-04

Map Date L CRT

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 Ty-Par Realty, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P.O. Box 763, Monroe, NC ZIP 28110

LOCATION OF LOT 5201 Country Woods Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Country Woods LOT NO. 57 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 20126. 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, altered, 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.

Cynthia E. Sass
Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 5-11-85

ICAR(S) Application No. 20126

T. C. No. 195-141-04

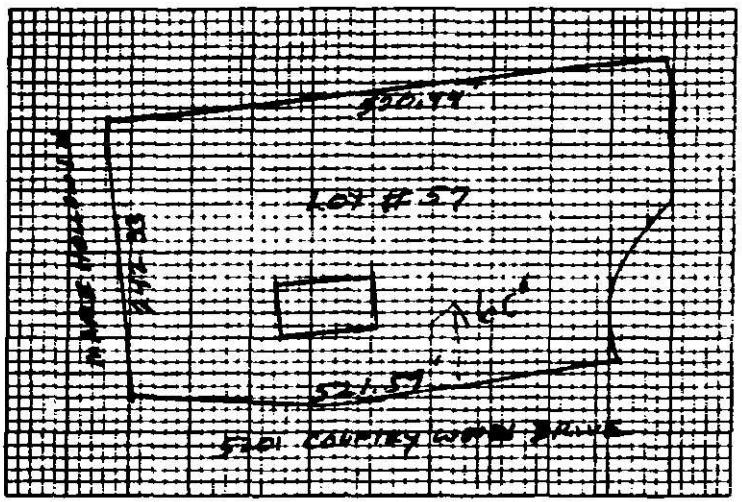
Map Date _____

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 ____ No

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 Ty-Par Realty, Inc.
(LAST FIRST MIDDLE)

14) ADDRESS OF OWNER P.O. Box 763, Monroe, N.C. 28110

15) PHONE NO. Home _____ Office 372-0088

16) LOCATION OF SYSTEM 5201 Country Woods Drive
(STREET OR COUNTY ROAD)

17) SUBDIVISION Country Woods Lot No. 57 Block No. —

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK 4411 AT PAGE 46

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.

6-6-85
DATE OF APPLICATION

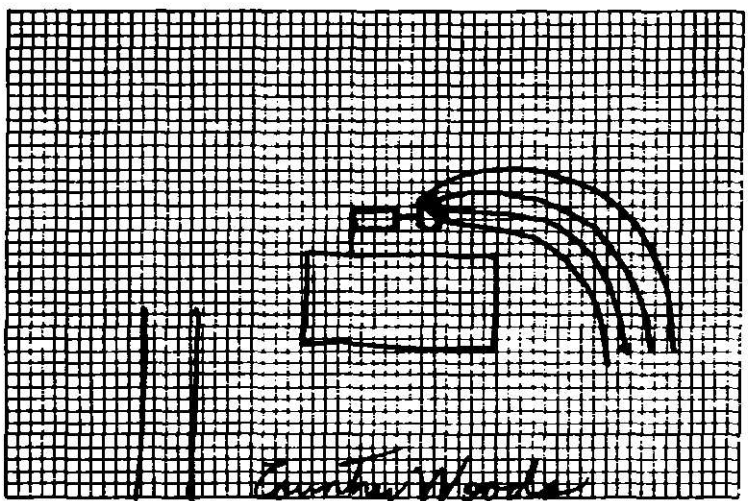
William Phillips Jr
OWNER
Agent for Ty-Par Realty, Inc.

EHD-5-76

Date Issued 9-23-85 Serial No. 08493 ICAR(S) Permit No. 20126
T. C. No. 195-141-04
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 20126 dated 6-6-85 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 10-23-85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PT

Liquid Capacity of Tank 1500

Tank Construction PCC

Absorption and/or Nitrification Lines:

Total Line Length 400'

Number of Lines 4

Distance from House 5'

Distance from Property Line 10'

Distance from Well Not in Dep 100'

NAME OF OWNER Ty-Par Realty

LOCATION OF PROPERTY 5201 Country Woods Dr.

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.

4 lines 3'X100'X12" stone

Comments:

B Hardister
Division or Section Head

B. R. Ferguson
Environmentalist

* If this permit is for the installation or construction of a new system, it must be signed by the division or c 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.

BHD-5-76

Environmental Health Department's Copy

C of A (s) No. 20126

Date Issued 10-3-85 Serial 7915 P.E. No. 195-141-04

L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF COMPLETION

CERTIFICATE OF APPROVAL

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

Name of Owner Ivy-Par Realty (LAST FIRST MIDDLE)

Location of Property 5201 Country Woods Dr.

Application Number — Permit Number —

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PCC

Total Length of Drain Tile 400' Number of Lines 4

Depth of Filter Material 12" Cover Depth 12"-18"

Water Supply Source well Distance from Water Source not in

Excavation Inspected 10-3-85 (DATE) Tank Inspected 10-3-85 (DATE)

Nitrification Field Inspected 10-3-85 (DATE)

Washing Machine Line Inspected, If Applicable — (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

B. R. Ferguson
Environmentalist

EHD-5-76

Environmental Health Department's Copy