Date Received 1-20-84

MECK COUNTY DEPARTMENT OF
RECEIVED
JAN 17 19:4
ENVIRONMENTAL HEALTH

SIR No. 20541
T.C. No. 195-141-04

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 703 Monroe, N.C. ZIP 28110

3) PHONE NO. Home _____ Office 372-0088

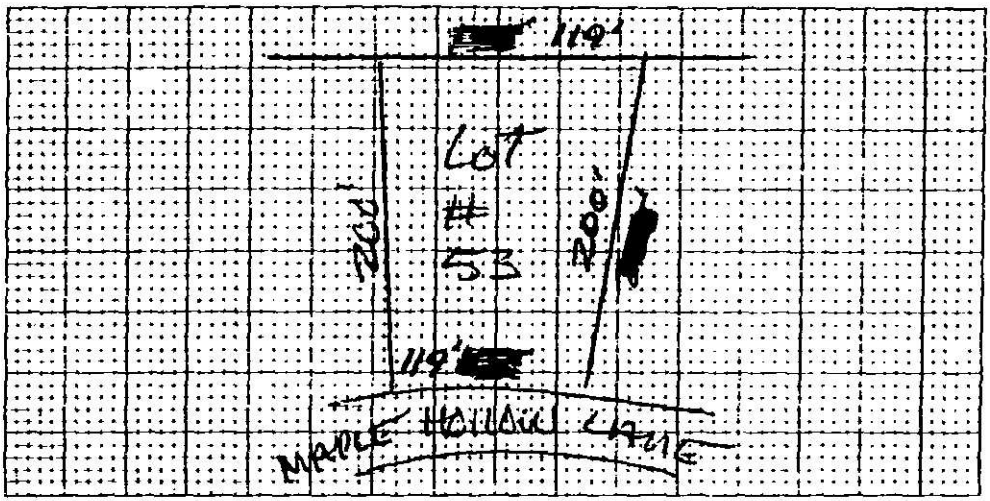
4) LOCATION OF PROPERTY 14035 Maple Hollow Lane
(STREET OR COUNTY ROAD)

5) SUBDIVISION Country Woods LOT NO. 53 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

Edw Par Ty-Par Realty
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20541

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

(Ground Absorption Sewage Disposal)

OWNER: TY-PAR Realty, INC
ADDRESS: P.O. Box 763 Mineral 22110

PLAT NO:
LOT SIZE: 2.3200 . 160A

LOCATION OF SITE: 11035 Maple Hollow Lane

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U — 2-7	S PS U	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	S PS U	S PS U
3. SOIL STRUCTUR (12-36 inches)	S (PS) U — Blocky	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) U — 36-45"	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U — None	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) U — Adequate	S PS U	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IIIe			
9. SITE CLASSIFICATION	P. Suitable			
10. SOIL SERIES	Cecil			

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)

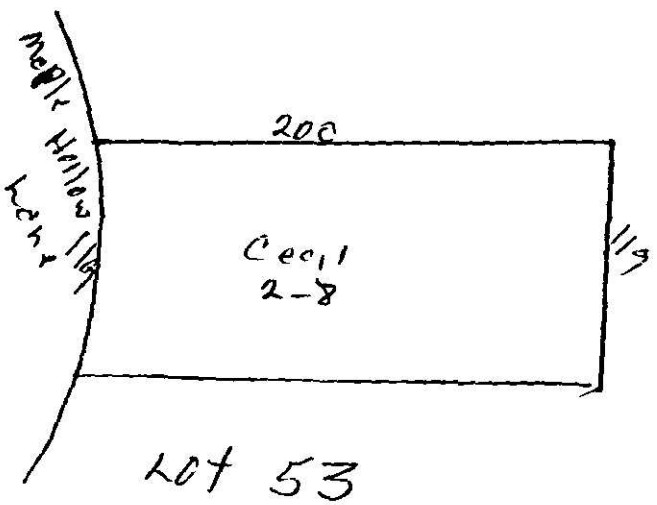
Recommendations/Comments:

Described by: Willard B. Ramsey
Title: Soil Scientist

Date: 2 — 18 — 84

EHD 539 (Revised: 6/82)

4



Lot 53

Serial No. 5475

SIR No. 20541

T C No. PO 195-141-04

Date Issued 2-21-84

Map Date

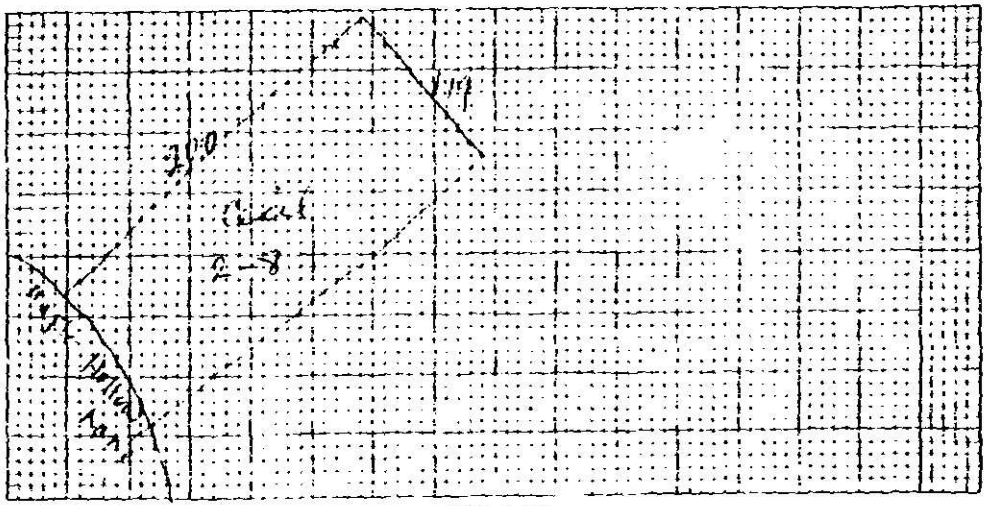
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

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

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

LOCATION OF PROPERTY 14035 Maple Hollow Lane
(STREET OR COUNTY ROAD)

SUBDIVISION Country Woods LOT NO 53 BLOCK NO



PLOT PLAN

This is to certify that a soil investigation and onsite inspection was made by the Mecklenburg County Department of Environmental Health on the lot described above. The soil investigation was conducted on that portion of the lot as indicated in 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 soil absorption treatment system with subsurface, soil absorption effluent discharge subject to the following terms and conditions:

1. A permit to install a system must be issued by the Mecklenburg County Department of Environmental Health prior to the beginning of any construction of the wastewater treatment system on the said lot.
2. The size of the septic tank, absorption system and the specific location of the system as determined by the Mecklenburg County Department of Environmental Health must be in accordance with the information given on the application and on the size and type of building contemplated for the lot.
3. This approval is void if any alteration is made in the property lines, topography or drainage of the lot after installation of the absorption system.
4. The installation of the system must be completed within one year of the date of this approval or the approval is void. Mecklenburg County Department of Environmental Health reserves the right to withdraw approval if conditions change such that the system is no longer acceptable for use.

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 are subject to change at any time in the future, prior to completion of the system, if such laws, rules and regulations are changed such that this approval would not have been granted and the new or revised laws, rules and regulations been in effect on the issue date.

Soil Scientist

Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department File

SEE INSTRUCTIONS ON BACK

Date Received 2-7-85

ICAR (S) Application No. 20541

T.P. No. 195-141-04

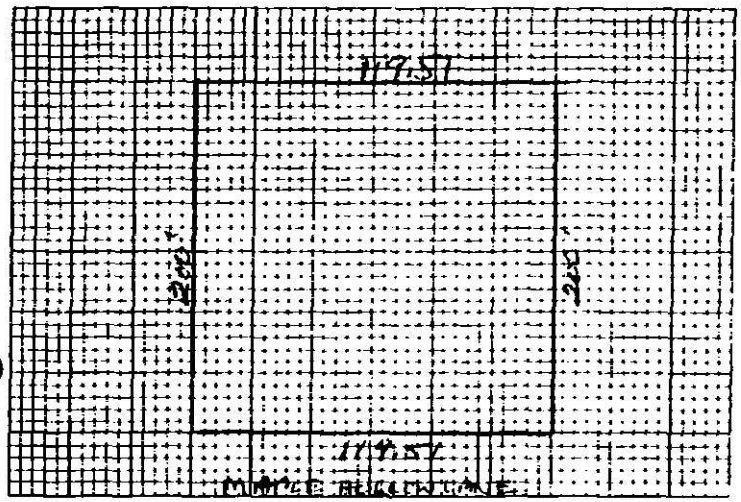
Map Date L CRT

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 14035 Maple Hollow Lane (STREET OR COUNTY ROAD)

17) SUBDIVISION Country Woods Lot No. 53 Block No. —

Map Book No. 20 Page No. 5

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.

2-6-85
DATE OF APPLICATION

W. B. Flanigan Jr.
OWNER for Ty-Par Realty, Inc.

EHD-5-76

Date Issued 3-20-85

Serial No. 8302

SIR No. 20541

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

Map Date L CCT

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 14035 Maple Hollow Lane
(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 20541. 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.

*** LIFT STATION MAY BE REQUIRED ***

Cynthia G. Bass
Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department Copy

Date Issued 5-28-85

Serial No. 08164

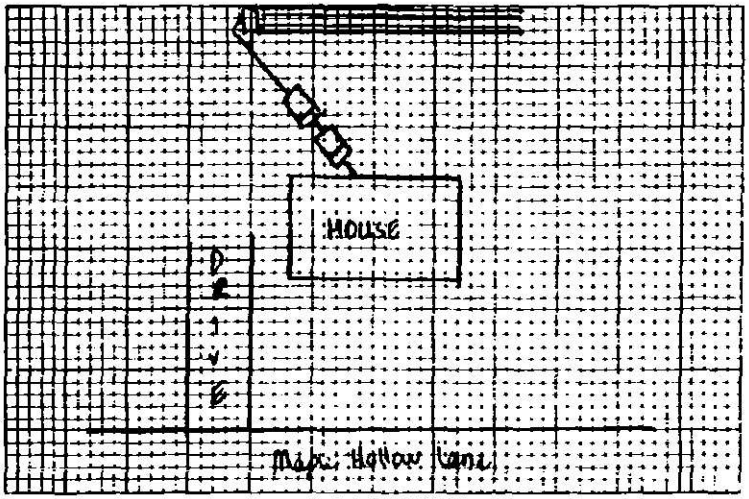
ICAR(S) Permit No. 20541

T C PO No. 195-141-04

Map Date L

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 20541, dated 2/7/85 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 6/24/85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500+1000

Tank Construction PCC

Absorption and or Nitrification Lines:

Total Line Length 400'

Number of Lines 4 X 100'

Distance from House 5'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Ty-Par Realty

LOCATION OF PROPERTY 14035 Maple Hollow Lane

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 Trenches 3'X100' x12" stone with gravelboards, straw as cover

Comments: Slope lines as needed

B. Hamilton
Division or Section Head

Cynthia G. Bass
Environmentalist

* 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

C of A (s) No. 20541

Date Issued 6/12/85 **Serial** 7622 PO T C No. 195-141-04

L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

OPERATION PERMIT

CERTIFICATE OF APPROVAL

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

Name of Owner Ty-Par Realty (LAST / FIRST / MIDDLE)

Location of Property 14035 Maple Hollow Lane

Application Number 20541 Permit Number 20541

Inspection Date:

Liquid Capacity of Tank 1500+1000 Tank Material PVC

Total Length of Drain Tile 400' Number of Lines 4X100'

Depth of Filter Material 12" Cover Depth 12"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 6/12/85 (DATE) Tank Inspected 6/12/85 (DATE)

Nitrification Field Inspected 6/12/85 (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 1500 ST, 1000 DT, PI, CON, 1200 FT, 12", CECIL

Environmentalist

EHD-5-76