Date Received 5-15-72

APT No. 3888

T. C. No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Bob McLemore & Co., Inc.
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER 6129 Lebanon Rd. ZIP 28105

3) PHONE NO Home Office 545 4507

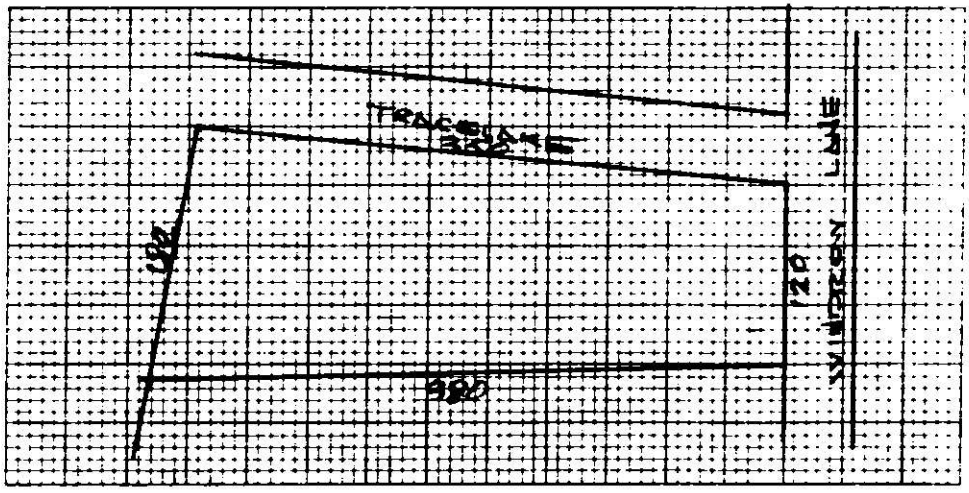
4) LOCATION OF PROPERTY [illegible]
(STREET OR COUNTY ROAD)

5) SUBDIVISION Windrow Acres LOT NO 22 BLOCK NO B

MAP BOOK NO PAGE NO

6) DEED REFERENCE DEED BOOK PAGE NO

Application is hereby made 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

OWNER

FORM NO. E-1-11-1-70

HEALTH DEPARTMENT'S COPY

Serial No. 1 [illegible]

PTR No. 3888
P.O.
T C No 215-161-01
Map Date 5/3/72

Date Issued May 24, 1972

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

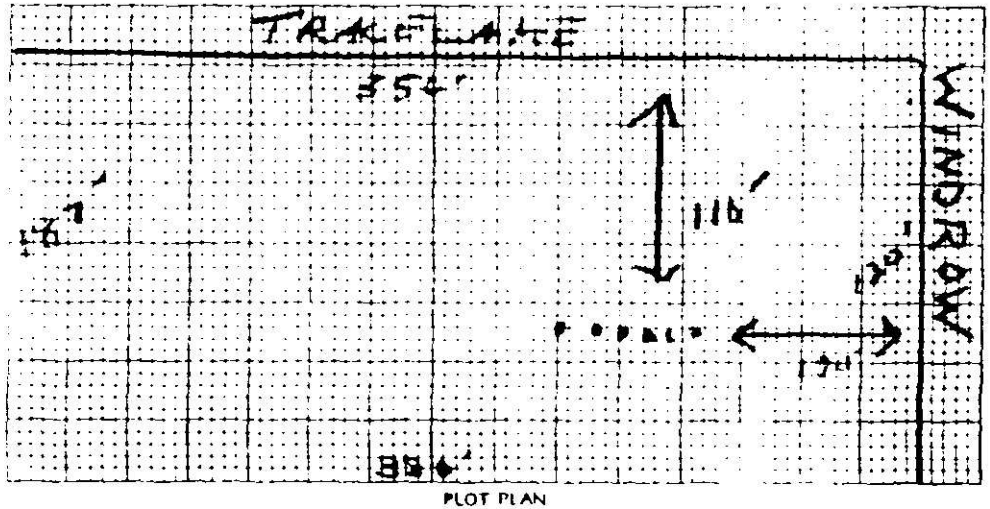
PERCOLATION TEST REPORT

NAME OF OWNER Bob McLemore & Co., Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER 6129 Lebanon Road ZIP

LOCATION OF PROPERTY Windrow Lane
STREET OR COUNTY ROAD

SUBDIVISION Windrow Acres LOT NO 22 BLOCK NO B



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 58 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 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 building, or of the wastewater treatment system on the said lot.
2. The size of the septic tank wastewater treatment 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 wells) 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.

J. Edwin Hobson
Director, Environmental Health Division or
Authorized Section Head

FORM NO E-2-4-1-71

HEALTH DEPARTMENT'S COPY

W

Date Received 8-1-72

ICAR (S) Application No. 3888

T C No 21-5-161-01

Map Date 5 3 72

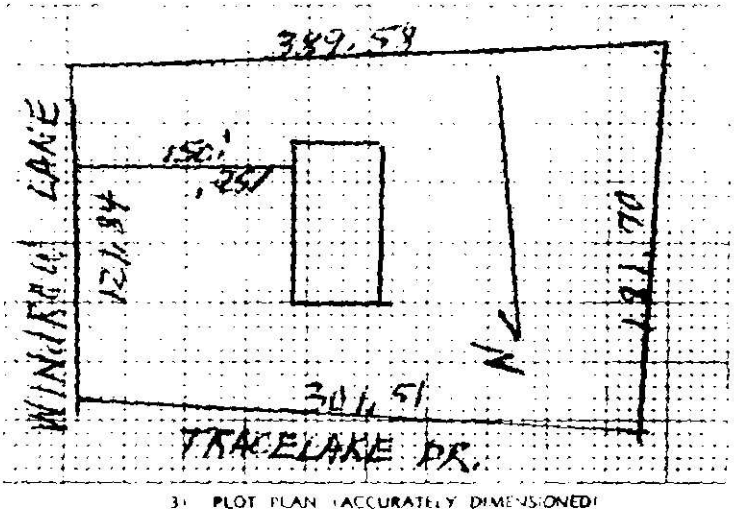
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 the property described hereinafter hereby applies to the Mecklenburg County Health Department for a permit to

✓ Install or Construct ___ A new or Repair an individual septic tank wastewater treatment system with subsurface soil absorption or effluent discharge



3) PLOT PLAN (ACCURATELY DIMENSIONED)

3

✓ ___ ✓ No

D ___ ✓ No ___

___

A ___ YES

B Government ___ system

C Community ___ system

Well ___

___

___ system

___

___ Yes ✓ No

FHA Case No. N/A

VA Case No. ___

4) NAME OF OWNER RALPH SQUIRES CO.
LAST FIRST MIDDLE

5) ADDRESS OF OWNER 2600 WILTON Rd.

6) PHONE NO Home 537-9553 Office 537-9553

7) LOCATION OF SYSTEM 3231 WINDRAW LN.
STREET OR COUNTY ROAD

8) SUBDIVISION WINDRAW ESTATES Lot No 22 Block No B

Map Book No 15 Page No 527

9) DEED REFERENCE — DEED BOOK 3438 AT PAGE [redacted] 445

10) HAS A PERCOLATION TEST BEEN RUN? YES ___ NO DATE RUN 7-31-72

11) PTR NUMBER (See Instructions) 7359

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.

7-31-72
DATE OF APPLICATION

Maurice McAlpin Const Mgr.
OWNER

HEALTH DEPARTMENT'S COPY

Date Issued August 1, 1972 **Serial No.** 1964

LA No. 3888
P.O.
T C. No. 215-161-01

Map Date 5/3/72

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 Ralph Squires, Company
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 2600 Milton Road ZIP

LOCATION OF LOT 3231 Windrow Lane
(STREET OR COUNTY ROAD)

SUBDIVISION Windrow Estates LOT NO. 22 BLOCK NO B

MAP BOOK NO 15 PAGE NO 527

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 58 min/in 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 3888 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

Thomas R. Ward
Environmentalist

John Dobbin
Director, Environmental Health Division or Authorized Section Head

FORM NO E-3-4-1-71

HEALTH DEPARTMENT'S COPY

Serial No. 3206

ICAR(S) Permit No. 5888

Date 12-27-72

T C No 215-NW-4

Map Date 5-3-72

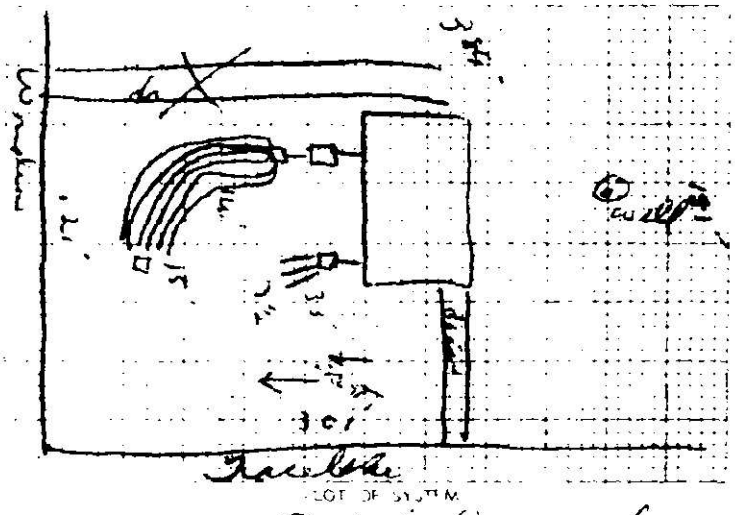
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

Construct Alter or Repair the individual septic tank waste-
effluent discharge as specified herein at the de-
tes based upon the information supplied in application 5888
8-1-72 and of no effect if the information provided in the ap-
pleted on or before 1-27-73 after which



Percolation Rate 60

Liquid Capacity of Tank 1500 gals

Tank Construction pre cast con

Absorption Unit or Application Lines

Total Line Length 600'

Number of Lines 6

Distance from Building 10'

Distance from Property Line 10'

Distance from Well 100

Ralph Sgaus Co.

3231 Windsor Lane (22-B)

construction requirements as set forth in the Regulations of the Mecklenburg
in effect on the date of the granting of this permit. A certificate of ap-
Health Director before any system can be covered up or otherwise rendered un-

15 x 100' - center line 3'x2'6"x4'

with 7½x35

Thomas R. Ward

Environmentalist

For installation or construction of a new system, it must be signed by the division or a
Environmental Health Division in order to be valid. Only the signature of the Environ-
mentalist is required where an existing system is being altered or repaired

DEPARTMENT'S COPY

Date Issued 1-5-73

Serial No. 2946

C of A (s) No. 3884

T C. No P.U. 115-161-01

Map Date 5-3-74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Ralph Sigmon Const. Co
(LAST, FIRST, MIDDLE)

Location of Property 3031 Windsor Lane - LL-B

Application Number 3884 Permit Number 3884

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material precast con.

Total Length of Drain Tile 600' Number of Lines 6

Depth of Filter Material 17" Cover Depth 18"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 1-8-73 (DATE) Tank Inspected 1-8-73 (DATE)

Nitrification Field Inspected 1-8-73 (DATE)

Washing Machine Line Inspected, If Applicable 1-8-73 (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 Installed by Const. Septic Tanks

Thomas R. Wood
Environmentalist

FORM NO E-6-4-1-71

HEALTH DEPARTMENT'S COPY