Date Received #6173

APT No 6399

T. C. No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Lane (LAST) D. (FIRST) R. (MIDDLE)

2) ADDRESS OF OWNER 2121 Linalda Court, Charlotte, N. C. ZIP 28214

3) PHONE NO. Home 399-6142 Office 889-7600

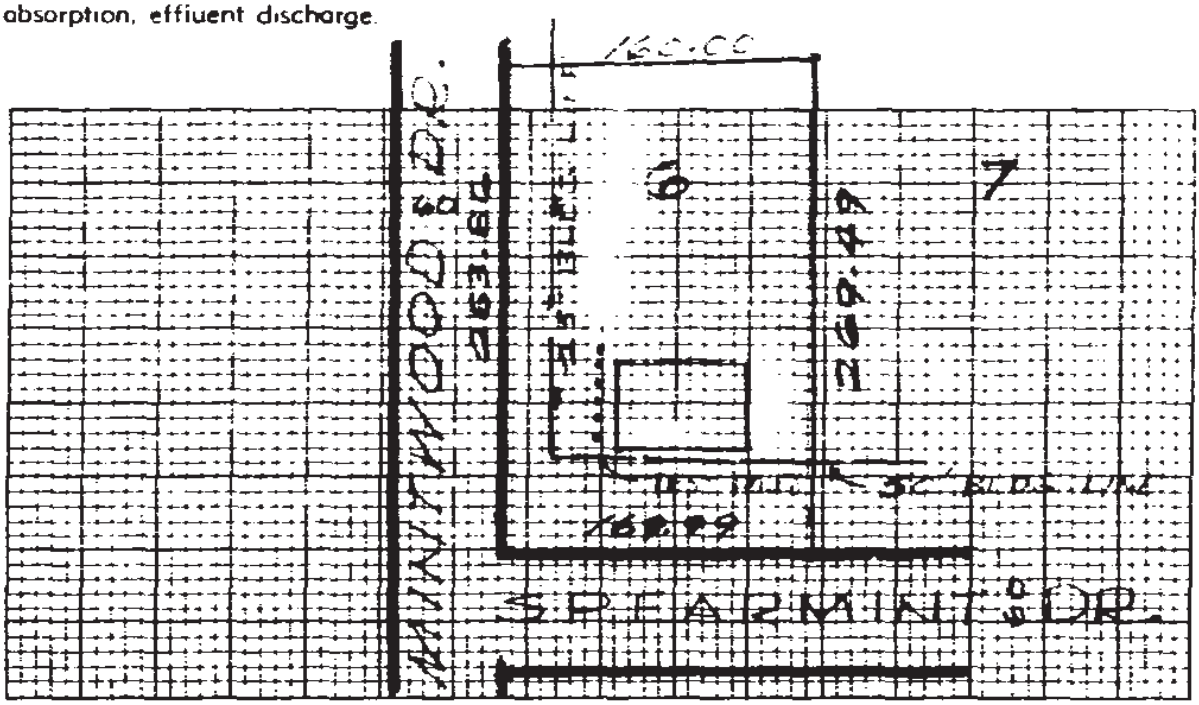
4) LOCATION OF PROPERTY Spearmint Drive (STREET OR COUNTY ROAD)

5) SUBDIVISION Mintwood Estates LOT NO. 6 BLOCK NO. --

MAP BOOK NO. 15 PAGE NO. 593

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 D. L. Lane

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

HEALTH DEPARTMENT'S COPY

MECKLENBURG COUNTY
Department of Public Health

1200 Blythe Boulevard
Charlotte, North Carolina 28203

Telephone 374-2113

Date Issued
1. ~~7-10-73~~
2. _____
3. _____

SDR No. ~~6338~~
T.C. No. ~~195-341-53~~ 2-14-73

SITE DISAPPROVAL REPORT
INDIVIDUAL SEPTIC TANK SYSTEM WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER ~~Lane, L. S.~~

ADDRESS OF OWNER ~~2121 Linalda Court, Charlotte~~ ZIP ~~28214~~

LOCATION OF LOT ~~Spearmint Drive, Lot 6~~

The lot described above has been disapproved for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge due to the following:

FAILURE TO PASS PERCOLATION TEST (60 minutes per inch or less)

	Test No.	Date of Test	Percolation Rate
~~X~~	1.	~~7-6-73~~	~~150~~ min/in
____	2.	_____	_____ min/in
____	3.	_____	_____ min/in

____ ON SITE INSPECTION REVEALED LOT TO BE UNSUITABLE FOR THE FOLLOWING REASON(S) _____

_____

_____

_____

Thomas R. Ward
Environmentalist

(Stencil No.)
EHD 398
8/70

FORM NO.
E-19-8-14-70

Serial No. [illegible]43

PTR No. 6399

Date Issued July 19, 1973

T C No 195-041-50

Map Date 2-14-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

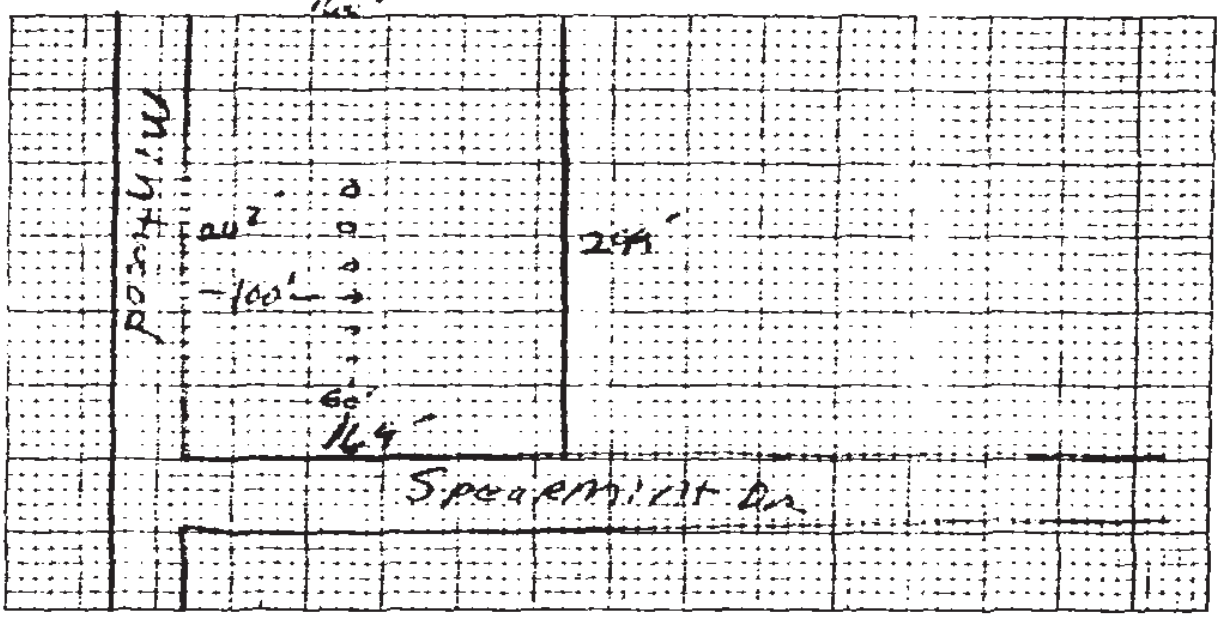
PERCOLATION TEST REPORT

NAME OF OWNER Lane (LAST) D. (FIRST) R. (MIDDLE)

ADDRESS OF OWNER 2121 Linalda Court ZIP 28214

LOCATION OF PROPERTY Spearmint Drive (STREET OR COUNTY ROAD)

SUBDIVISION Mintwood Estates LOT NO 6 BLOCK NO



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 60 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 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.

John R. Hobson

Director, Environmental Health Division or
Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

W

SEE INSTRUCTIONS ON BACK

Date Received 8/20/76

ICAR(S) Application No. 6349

T C No. 145-041-50

Map Book 2-1473

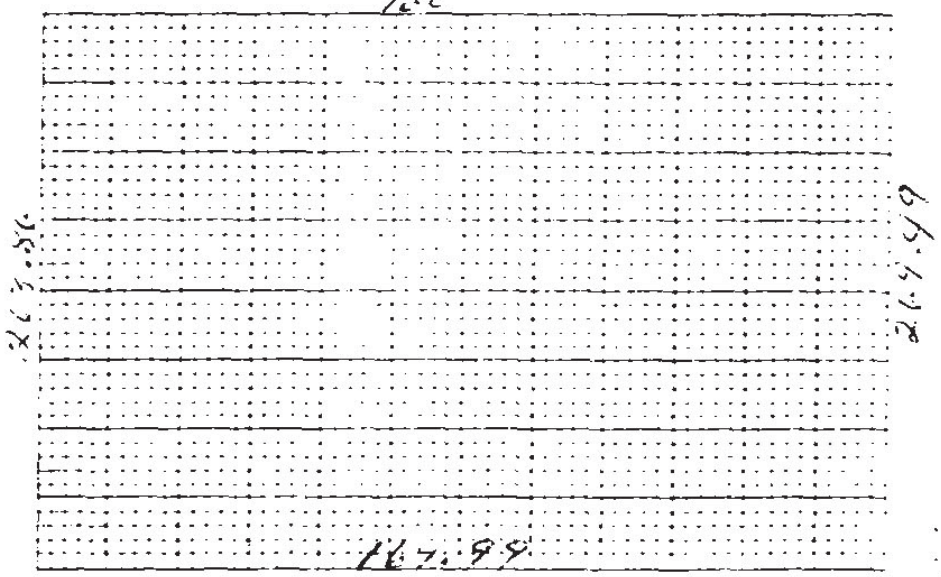
MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

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. Bdrms 4
5. Est. Gal. Wastewater/Day Employees
6. Water Main Yes No
7. Sewer Main Yes No
8. Driveway Yes No
9. Water Supply
A. Public or Community ✓
B. Ground Water
C. Surface Water
D. Well
E. Spring
Sewage System
A. Septic Tank
B. Public Sewer Yes No
C. Community Sewer Yes No
11. EHA Case No.
12. VA Case No.

13) NAME OF OWNER Pilkington Eugene E
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 4125 Wilgrove Road

15) PHONE NO Home 366-2371 Office

16) LOCATION OF SYSTEM Sycamore Dr
STREET OR COUNTY ROAD

17) SUBDIVISION Wynwood Dr Lot No. 6 Block No.

Map Book No 15 Page No. 553

18) DEED REFERENCE — DEED BOOK _____ AT PAGE

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES _____ NO DATE RUN 7-18-73 K>60

20) PTR NUMBER (See Instructions) 6349

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.

8-21-76
DATE OF APPLICATION

Eugene E Pilkington
OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 2147

LA No 6399

Date Issued August 21, 1978

T. C. No. 195-041-50

Map Date 2-14-73

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 McLendon (LAST) Eugene (FIRST) B. (MIDDLE)

ADDRESS OF OWNER 2735 Sharon Road, Charlotte, NC ZIP

LOCATION OF LOT Spearmint Drive (STREET OR COUNTY ROAD)

SUBDIVISION Mintwood LOT NO 6 BLOCK NO.

MAP BOOK NO. 15 PAGE NO. 593

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 6399. 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.

Stephen J. Wood
Environmentalist

John R. Hobson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

THE END OF
MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH
DIVISION

"INDIVIDUAL SEPTIC TANK SYSTEMS"

RECORDED IN NUMERICAL ORDER
BY FILES

Date Issued 12-17-80

Serial No. 4472

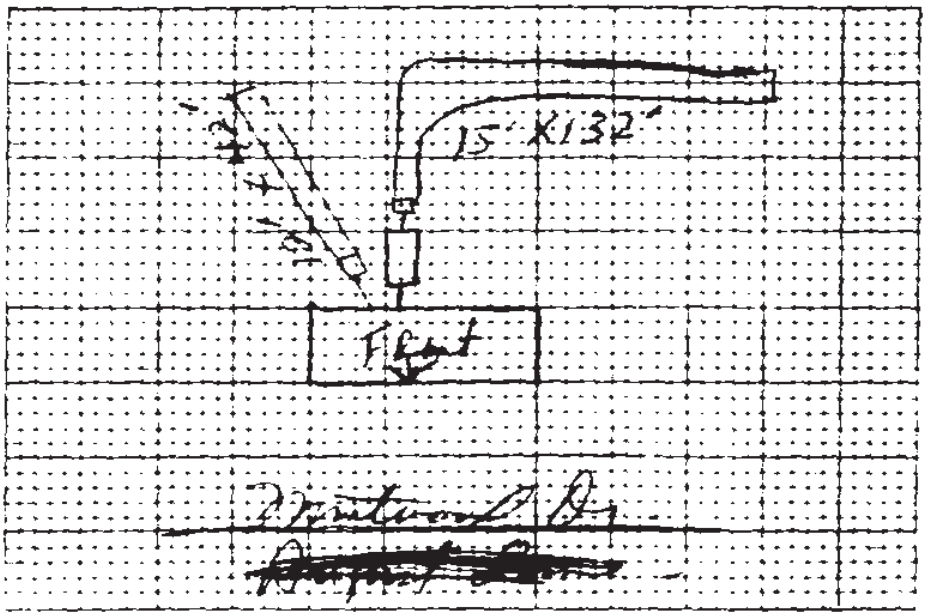
ICAR (S) Permit No. 6399

T C No. 19-043-54

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 6399, dated _____ 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 1/15/81, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate .25

Liquid Capacity of Tank 1500 gal

Tank Construction p.c.

Absorption and or Nitrification Lines

Total Line Length 660' + 162'

Number of Lines 5 + 4

Distance from House 101

Distance from Property Line 12'

Distance from Well 50' +

NAME OF OWNER McLendon

LOCATION OF PROPERTY 370 Montwood 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.

Comments: 15' x 132' + 17" Stone or Septic Tanker
12' x 42' + 12" Stone or Washing Machine

Bob Wilson

Division / Section Head — 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. 6399

Date Issued 12-18-80 Serial 4222 T C No. 195-043-57

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 McLendon (LAST) M. (FIRST) E (MIDDLE)

Location of Property 3708 Montwood Dr

Application Number 6395 Permit Number 6399

Inspection Data:

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

Total Length of Drain Tile 660'+167' Number of Lines I + X

Depth of Filter Material 17" Cover Depth 15"

Water Supply Source well Distance from Water Source 30'+

Excavation Inspected 12-18-80 (DATE) Tank Inspected 12-18-80 (DATE)

Nitrification Field Inspected 12-18-80 (DATE)

Washing Machine Line Inspected, If Applicable 12-18-80 (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-5-76

Environmental Health Department's Copy