Date Received 5/16/72

APT No. 1099

T. C. No. 215-042

Map Date 6-21-75

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Alexander (LAST) Kenneth (FIRST) Heirs c/o Mildred A. Smith (MIDDLE)

2) ADDRESS OF OWNER E John St PO Box 391 Matthews NC ZIP 28105

3) PHONE NO. Home 847 6392 Office 596 4411

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

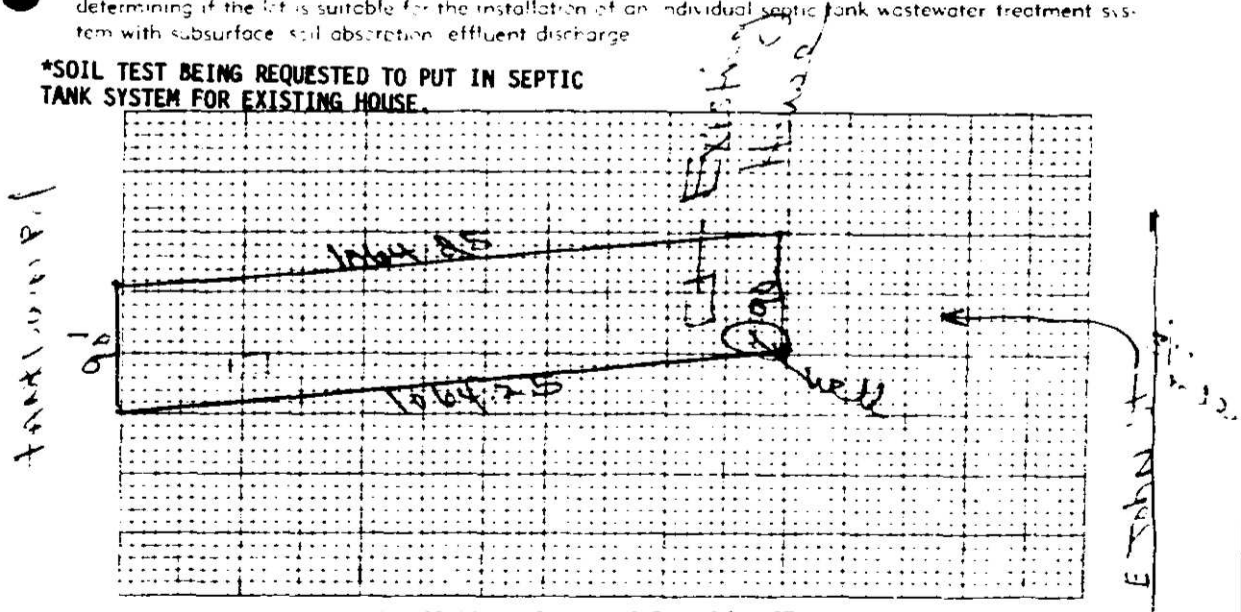
5) SUBDIVISION ____ LOT NO ____ BLOCK NO ____

MAP BOOK NO ____ PAGE NO ____

6) DEED REFERENCE DEED BOOK 49 PAGE NO 49

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation and 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.

*SOIL TEST BEING REQUESTED TO PUT IN SEPTIC TANK SYSTEM FOR EXISTING HOUSE.



7) ACCURATELY DIAGRAM & DIMENSION LOT

William L. Smith
OWNER

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 5/10/76

ICAR (S) Application No 14699

T C No 115-042-11

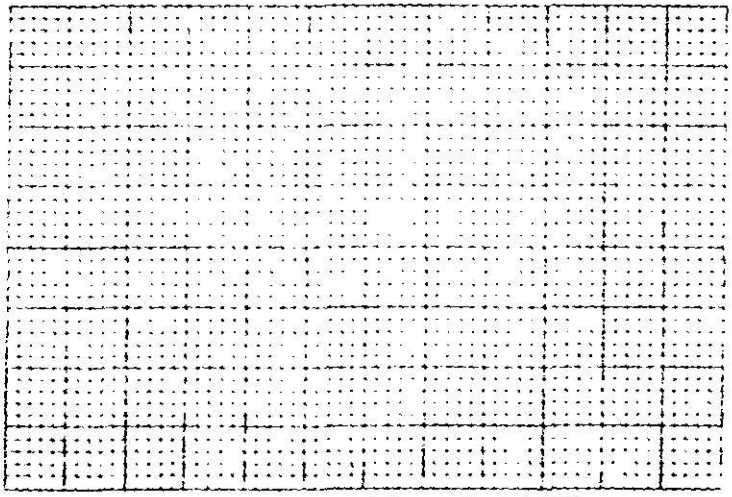
Map Date 2-1-75

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: **INSTALL SYSTEM FOR EXISTING HOUSE**

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 X No
Residence X Yes ____ No

4 No. of Bedrooms 2
5 Business Use — Max No. Employees ____
6 Washing Machine ____ Yes ____ No
7 Garbage Disposal ____ Yes X No
8 Dishwasher ____ Yes X No
9 Water Supply
A Individual Well Yes
B Governmental System NO
C Community System
1 Well source yes
2 Governmental source ____
10 Sewage System
House located within 200 feet of public sewer ____ Yes X No
House located within 200 feet of community sewer ____ Yes X No
11 FHA Case No NO
12 VA Case No NO

13) NAME OF OWNER Alexander Darrell Brown Smith
LAST FIRST MIDDLE

14) ADDRESS OF OWNER E. John St - Box 241 Matthews

15) PHONE NO. Home 847 6392 Office 596 44 11

16) LOCATION OF SYSTEM E. Tanktown Rd.
STREET OR COUNTY ROAD

17) SUBDIVISION ____ Lot No. ____ Block No. ____

Map Book No. ____ Page No. ____

18) DEED REFERENCE — DEED BOOK 1129 AT PAGE 29

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.

DATE OF APPLICATION ____

William D. Smith
OWNER

EHD-S-76

Environmental Health Department's Copy

Apt. 14099.

NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX H
SITE EVALUATION

(Ground Absorption Sewage Disposal)

OWNER: [illegible] DATE REQUESTED: [illegible]
ADDRESS: [illegible] PLAT NO.: [illegible]
COUNTY: [illegible] LOT SIZE: [illegible]
LOCATION OF SITE: [illegible]

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S PS U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S PS U	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	S PS U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Imprevious Strata, Rock)	S PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	S PS U	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S PS U	S PS U	S PS U	S PS U
8. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION				
SOIL SERIES				

S - Suitable PS - Provisionally Suitable U - Unsuitable

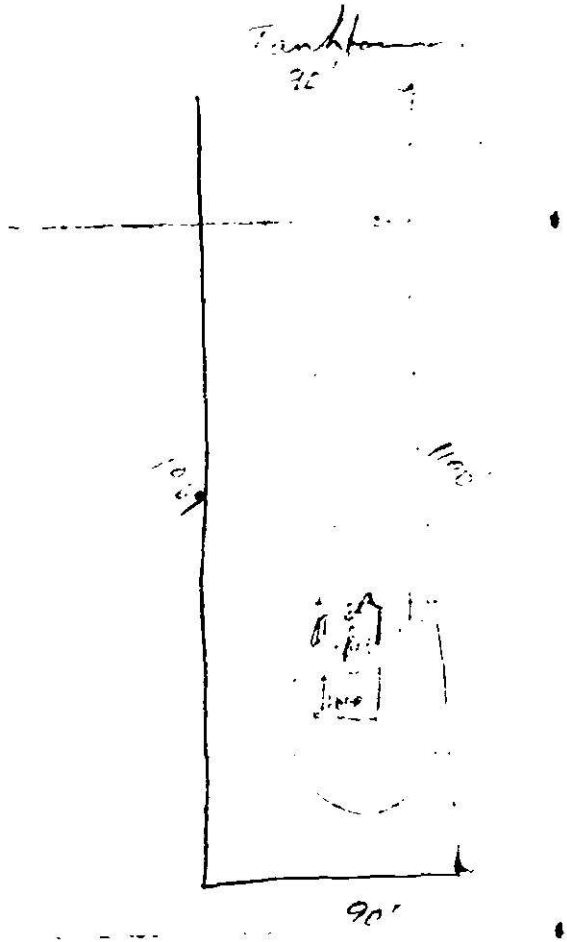
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

Recommendations/Comments: [illegible]

Described By: [illegible]

Title: [illegible] Date: [illegible]

DHS Form 2601 (2/77)
Sanitation


90'
90'

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203

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

SIR.NO. 14099
T. C.NO. 215-042-11
MAP DATE 2-21-75
DATE 6-1-78

NAME OF OWNER Alexander, Kenneth Heirs c/o Mildred H. Smith

ADDRESS OF OWNER E. John St. P. O. Box 391 Matthews, NC 28105

LOCATION OF LOT Tanktown Road

At your request and pursuant to Section. 1900 of the North Carolina Administrative Code, Title 10, Department of Human Resources, Chapter 10, Health Services, Subchapter 10A, a site evaluation has been made for an on premises ground absorption sewage disposal system on the property designated above and the following conditions were found:

Soil Structure Massive
Soil Permeability Unsuitable
Site Classification Unsuitable

Section 10 of the North Carolina Administrative Code 10A, .1910 of these regulations states "Sites originally classified as unsuitable may be used for soil absorption disposal systems, provided engineering, hydrogeologic, and soils studies indicate to the local agency that a suitable alternate system can reasonably be expected to function satisfactorily.

Section 10, North Carolina Administrative Code 10A, .1916 states that "The design, construction, and maintenance of ground absorption sewage systems, whether septic tank systems or alternate systems shall be the responsibility of the owner, developer. installer, and user of the system as applicable in the circumstances."

We would also advise you that according to Regulation 10, North Carolina Administrative Code 10A, . 1916(b), "Actions of representatives of state or local agencies engaged in the evaluation and determination of measures required to effect compliance with the provisions of this section shall in no way be taken as a guarantee that sewage disposal systems approved and permitted will function in a satisfactory manner for any given period of time or that such employees assume any liability for damages, consequential or direct, which are caused or which may be caused, by a malfunction of such system.

These regulations became effective July 1, 1977. Since that time the second sentence of Section .1910(c) has been found to be nugatory. For this reason, if you desire to file for permission to install an "alternate" system you should present this office with your proposals in the form of plans and specifications. These would be reviewed and if it is found that the system may reasonably be expected to function satisfactorily approval may be given on the execution by you of a "Septic Tank Agreement Form" available in this office.

John R. Adkisson, Environmentalist
On Premises Waste Disposal

EHD #504

R

SEE INSTRUCTIONS ON BACK

Date Received 10-27-80

ICAR(S) Application No 14099

T. C No 213202-11

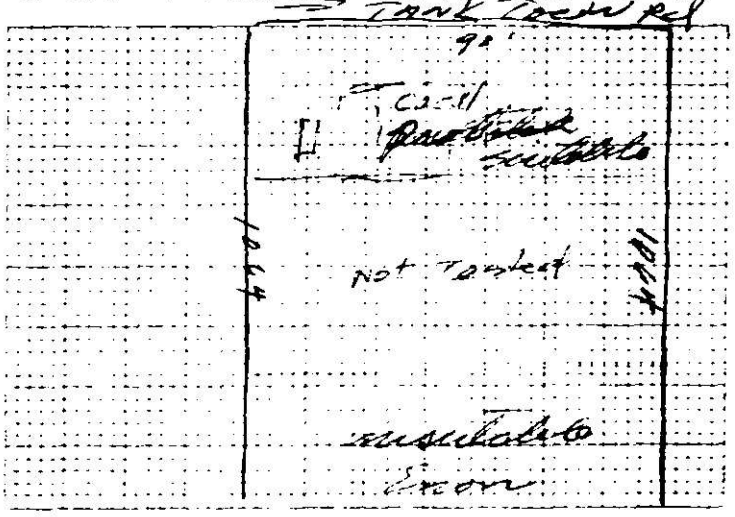
Map Date _____

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 propert, 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 ___ 1
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 Supply ✓
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. EHA Case No ___
12. VA Case No ___

13) NAME OF OWNER Alexander (LAST) Mildred (FIRST) Laurence (MIDDLE)

14) ADDRESS OF OWNER Mann Rd

15) PHONE NO Home 847-6392 Office 847-8011 - 2413 mainly

16) LOCATION OF SYSTEM _____ (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? YES NO DATE RUN _____

20) PTR NUMBER (See Instructions) _____

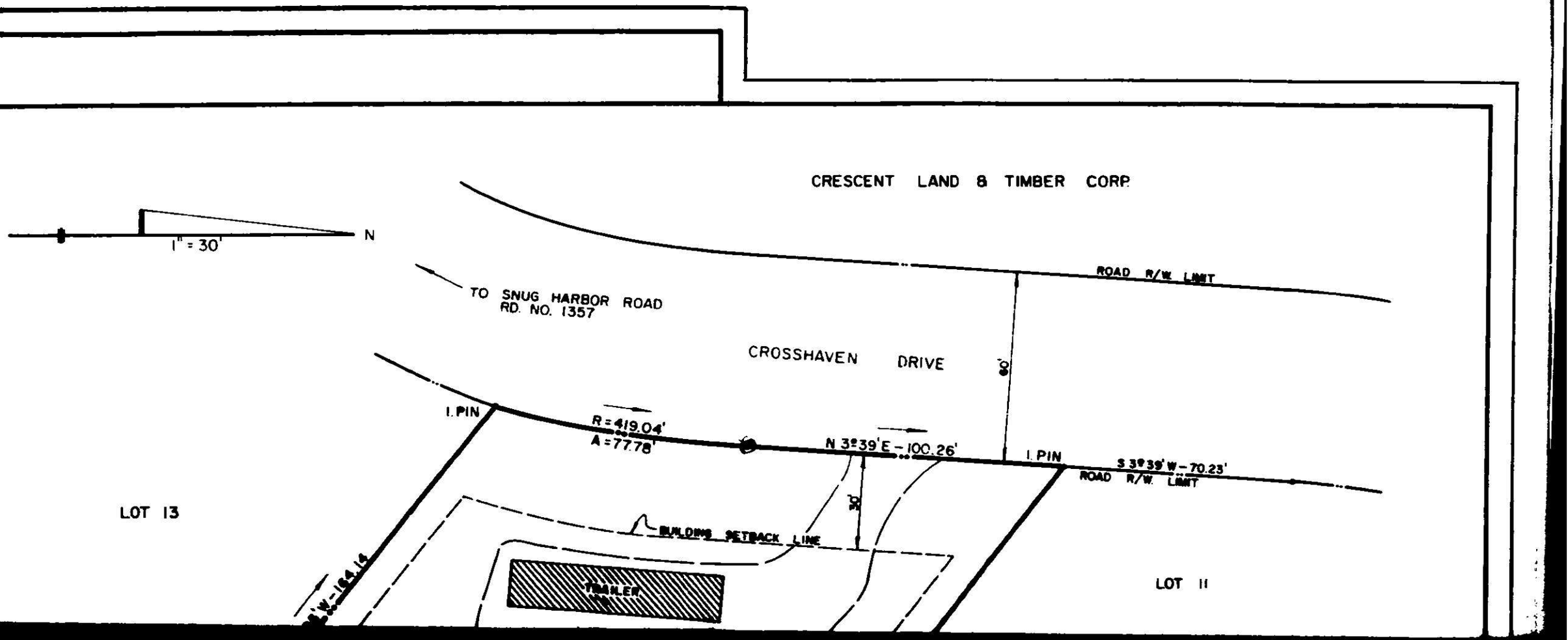
The undersigned person hereby agrees that he has read the foregoing application and that the contents of same are true. It is understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

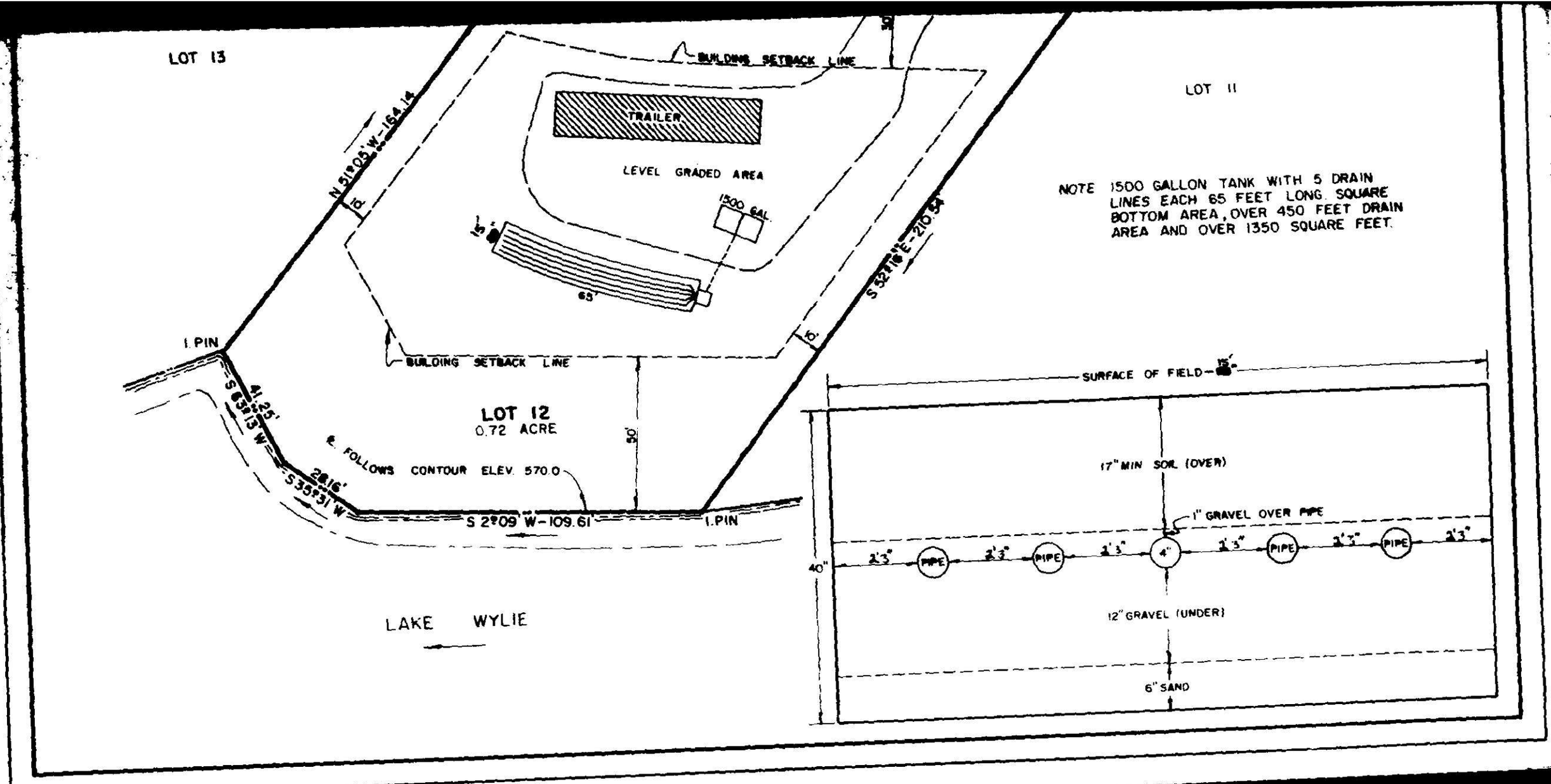
Oct 27, 1980
DATE OF APPLICATION

Mildred Alexander Smith
OWNER Mary Alexander

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY


CRESCENT LAND & TIMBER CORP.
1" = 30'
N
TO SNUG HARBOR ROAD
RD. NO. 1357
ROAD R/W LIMIT
CROSSHAVEN DRIVE
50'
I. PIN
R = 419.04'
A = 77.78'
N 3°39'E - 100.26'
I. PIN
S 3°39'W - 70.23'
ROAD R/W LIMIT
LOT 13
BUILDING SETBACK LINE
50'
TRAILER
LOT 11


LOT 13
BUILDING SETBACK LINE
TRAILER
LEVEL GRADED AREA
1500 GAL.
65'
N 51°05' W - 164.14
10'
I PIN
BUILDING SETBACK LINE
LOT 12
0.72 ACRE
50'
S 63°13' W
41.25'
S 35°31' W
28.16'
FOLLOWS CONTOUR ELEV. 570.0
S 2°09' W - 109.61
I PIN
LAKE WYLIE
LOT 11
S 32°18' E - 210.54
10'
NOTE 1500 GALLON TANK WITH 5 DRAIN LINES EACH 65 FEET LONG. SQUARE BOTTOM AREA, OVER 450 FEET DRAIN AREA AND OVER 1350 SQUARE FEET.
SURFACE OF FIELD
17" MIN SOIL (OVER)
1" GRAVEL OVER PIPE
2'3"
PIPE
4"
40"
12" GRAVEL (UNDER)
6" SAND