Date Received 2-4-74

APT No 7454

T C No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER [illegible] (LAST) [illegible] (FIRST) [illegible] (MIDDLE)

2) ADDRESS OF OWNER [illegible] ZIP [illegible]

3) PHONE NO Home [illegible] Office

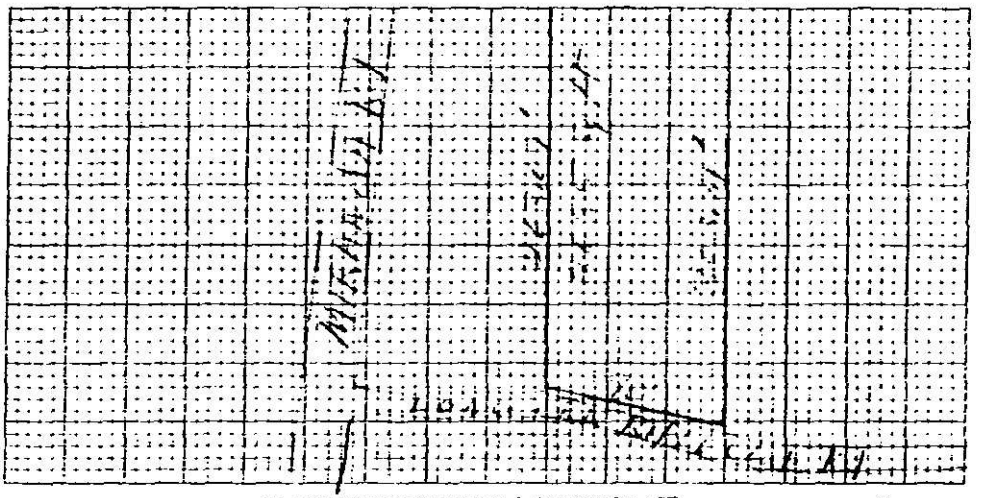
4) LOCATION OF PROPERTY [illegible] (STREET OR COUNTY ROAD)

5) SUBDIVISION [illegible] LOT NO [illegible] BLOCK NO [illegible]

MAP BOOK NO 201 PAGE NO 6

6) DEED REFERENCE DEED BOOK 2611 PAGE NO 64

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

[illegible]
OWNER

FORM NO E-1-6-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 4026

PTR No. 7454

T C No 033-132-10

Date Issued February 13, 1974

Map Date 9-1-70

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

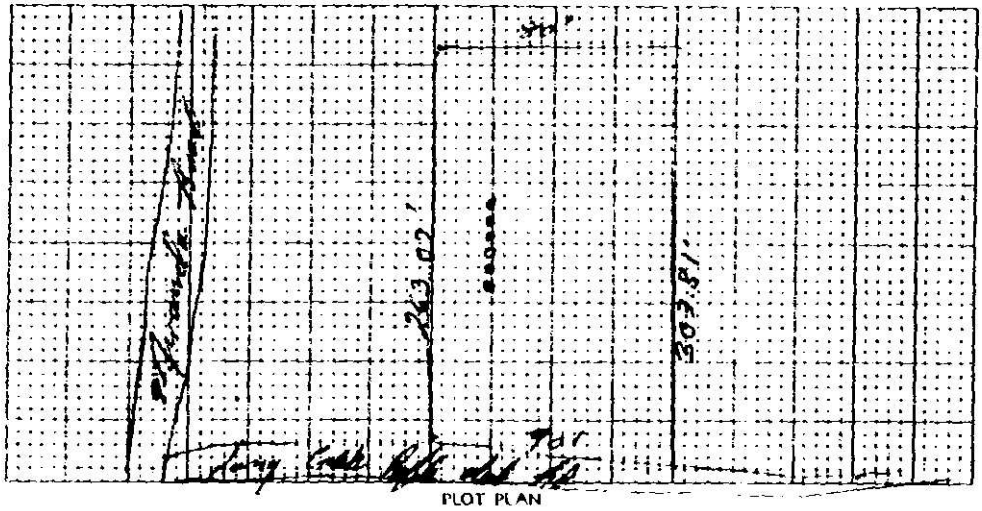
PERCOLATION TEST REPORT

NAME OF OWNER McGee (LAST) Garland (FIRST) Douglas (MIDDLE)

ADDRESS OF OWNER Route 9, Box 411-E ZIP 28208

LOCATION OF PROPERTY Rifle Club Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 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 36 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 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

Jerry Buchanan

Director, Environmental Health Division or
Authorized Section Head

FORM NO E-2-9-1-72

HEALTH DEPARTMENT'S COPY

#6w

SEE INSTRUCTIONS ON BACK

Date Received 2-26-74

ICAR'S Application No 7454

T C No 033-132-10

Map Date

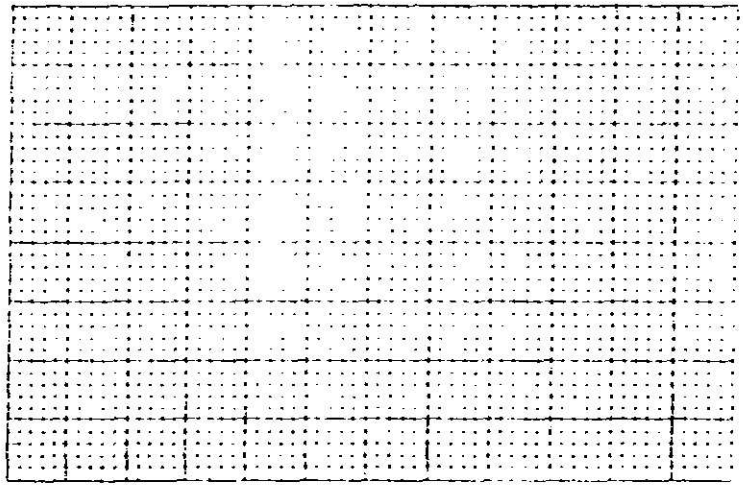
MECKLENBURG COUNTY HEALTH DEPARTMENT

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

1) X Install or Construct 2) Alter or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption, effluent discharge



4) No of Bedrooms 2

5) Source of Water Supply
Emp. Well

6) Within Mecklenburg Co. No

7) Within 100' of Drainage Ditch No

8) Within 100' of Stream No

9) Water Supply
A) Individual Well
B) Community System
Well
Community System
Yes No

10) FHA Case No

11) VA Case No

12) PLOT PLAN (ACCURATELY DIMENSIONED)

13) NAME OF OWNER MCGEE (LAST) CARLAND (FIRST) DOUGLAS (MIDDLE)

14) ADDRESS OF OWNER RT. 9 Box 411-L

15) PHONE NO Home 399-6659 Office 537-6774

16) LOCATION OF SYSTEM LONG CREEK RIFLE CLUB RD (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No _____ Block No _____

Map Book No _____ Page No. _____

18) DEED REFERENCE — DEED BOOK 3649 AT PAGE 534

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ___ NO DATE RUN 2-12-74 @ 36

20) PTR NUMBER (See Instructions) 7454

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

2-25-74
DATE OF APPLICATION

Carland Douglas McGee
OWNER

FORM NO E-4-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3862

LA No 7454

Date Issued February 27, 1974

T C No 033-132-10

IMPROVEMENTS PERMIT

Map Date

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 McGee (LAST) Garland (FIRST) Douglas (MIDDLE)

ADDRESS OF OWNER Route 9, Box 411-E ZIP

LOCATION OF LOT Rifle Club Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO.

MAP BOOK NO. PAGE NO.

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 36 min/in 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 7454. 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

Environmentalist

Director, Environmental Health Division or Authorized Section Head

FORM NO E-3-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 6 May 74 Serial No. 5271 ICARUS Permit No. 7454

T C No 033-132-C

Map Date

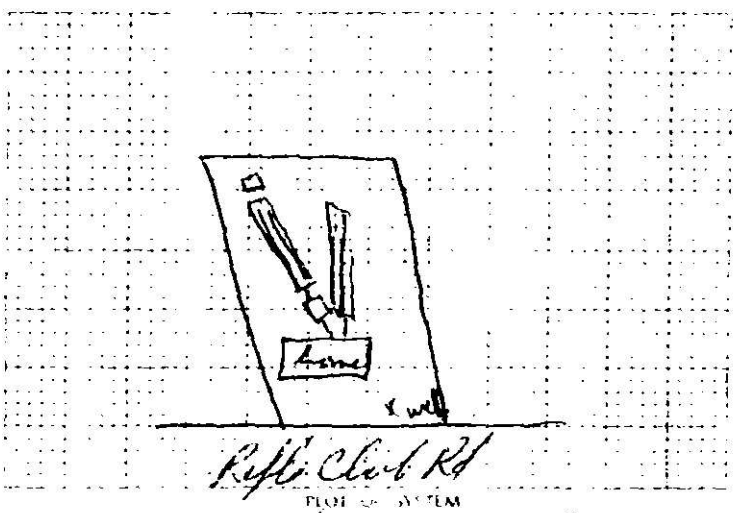
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 waste water treatment ~~,~~ with subsurface soil absorption effluent discharge as specified herein at the described location. This permit is granted based upon the information supplied in application 7454, dated 7-26-74 and this permit shall be void and of no effect if the information provided in the application is misrepresentative. All work shall be completed on or before , after which date this permit shall be null and void



PLOT OF SYSTEM

Percolation Rate 36

Liquid Capacity of Tank 1000

Tank Construction PC

Absorption and/or Notification Line

Total Line Length 300 & 150 lin ft

Number of Lines 5 (12½' x 6 c/c x 17") 3 (7½' x 5 c/c x 17")

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER McGee, Garland D

LOCATION OF PROPERTY Long creek Rifle Club Rd

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used

Comments Aeration pit 2½' x 2' x 4'/Stone

Division of Sanitation Head

Environmentalist

If this permit is for the installation or construction of a new system of any type designed by the division or a new system for Environmental Health Division order, the signature of the Environmental Specialist is required where an existing system is being altered or repaired

Form E-5-9-1-72

Date Issued 16 May 74 Serial 4785

C of A (s) No. 7454

T C No 033-132-16

Map Date

CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner McGee (LAST), Garland D. (FIRST), (MIDDLE)

Location of Property Knife Club Rd

Application Number 7454 Permit Number 7454

Inspection Date:

Liquid Capacity of Tank 1000 gal Tank Material PC

Total Length of Drain Tile 300' & 150' Vm Number of Lines 5 (12½' x 60' x 11") 3 (7½' x 50' x 12")

Depth of Filter Material 17" Cover Depth 15"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 10 May 74 (DATE) Tank Inspected 10 May 74 (DATE)

Nitrification Field Inspected 10 May 74 (DATE)

Washing Machine Line Inspected, If Applicable 10 May 74 (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: Recreation pit 2½' x 7' x 4½' Stone

Burl Lee

Environmentalist

FORM NO. E-6-4-1-71

HEALTH DEPARTMENT'S COPY