Date Received 8-13-84

MECK CO. ..Y DEPARTMENT OF
RECEIVED
AUG 13 1984
ENVIRONMENTAL HEALTH

SIR No. 21336
T. C. No. PO 135-391-99
Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Bob McLemore Co. INC.

2) ADDRESS OF OWNER (LAST) Po Box 25746 (FIRST) Chas (MIDDLE) ZIP 28212

3) PHONE NO. Home —— Office 545-6111

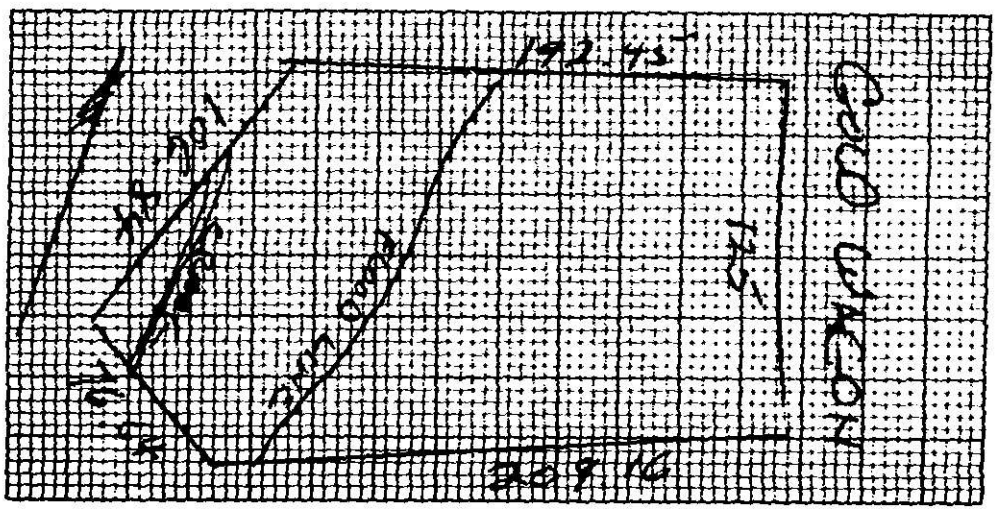
4) LOCATION OF PROPERTY 6201 Gold Wagon Lane (STREET OR COUNTY ROAD)

5) SUBDIVISION Farmwood Sect 20 LOT NO. 30 BLOCK NO. W

MAP BOOK NO. 20 PAGE NO. 612

6) DEED REFERENCE: DEED BOOK ____ PAGE NO. ____

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

Bob McLemore Co. Inc.
OWNER
7-11-84

EHS-5-76

Environmental Health Department's Copy

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21336

T.C. NO. PO 135-391-99

(Ground Absorption Sewage Disposal)

OWNER: BOB McILEMORE CO.
ADDRESS: PO BOX 25746
Charlotte 28212
LOCATION OF SITE: 6201 Gold Wagon RD

PLAT NO:
LOT SIZE: 25,000 ± .5

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS U 2-10	S PS U 2-8	S PS U Flood Plain	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S PS U Mixed Clay	S PS U Clayey	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S PS U Weak Blocky	S PS U Blocky	S PS U	S PS U
4. SOIL DEPTH (inches)	S PS U 10-15"	S PS U 20"-22"	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S PS U none	S PS U None	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S PS U slow	S PS U Adequate	S PS U	S PS U
7. OTHER (Specify)	S PS U Rock out Cropping	S PS U inadequate SPACE	S PS U	S PS U
8. SOIL GROUP	IVa	IVc		
9. SITE CLASSIFICATION	Unsuitable	Unsuited	Unsuitable	
10. SOIL SERIES	Wilkes	Eroded Cecil	MONACAN	

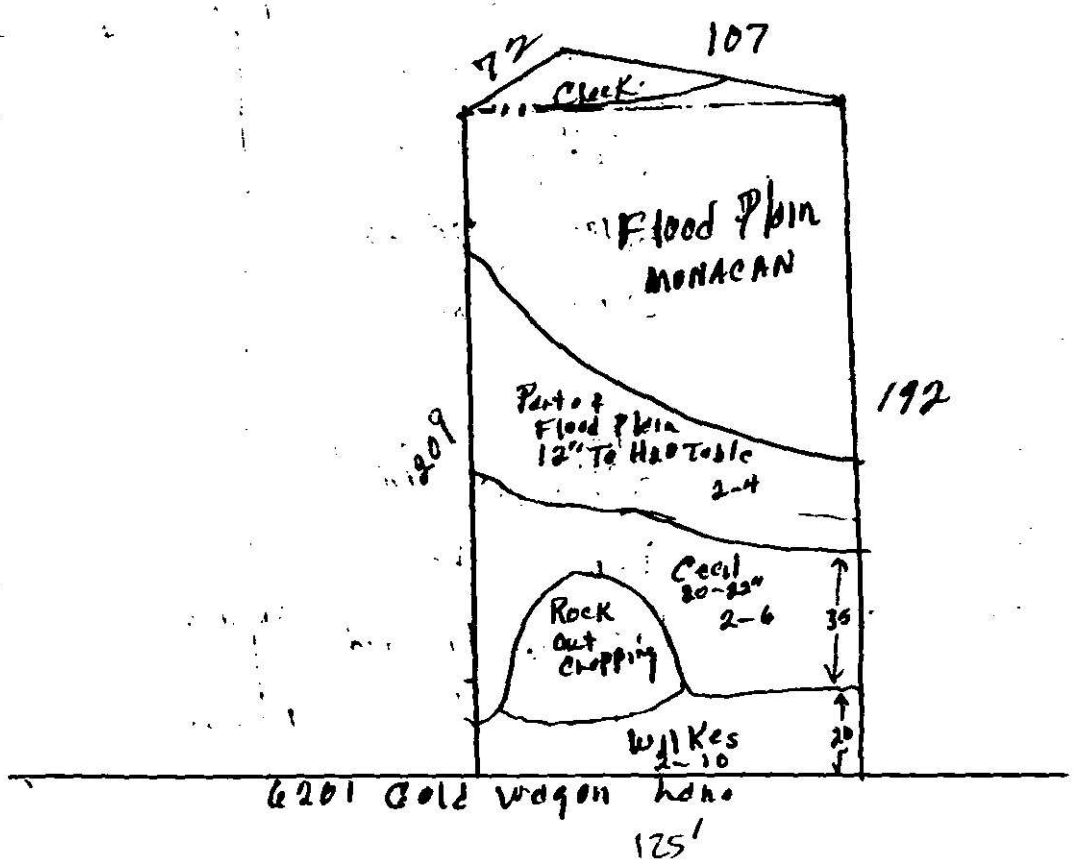
S - Suitable PS - Provisionally Suitable U - Unsuitable

**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 Lemaire
Title: Soil SCIENTIST

Date: 11-2-84


77
107
Clock
Flood Plain
MONACAN
Part of Flood Plain 12" To H2O Table
192
209
2-4
Cecil 20-22"
2-6
35
Rock Out Cropping
Wilkes
2-10
20
6201 Cold Wagon Road
125'

MECKLENBURG COUNTY
Department of Environmental Health

November 5, 1984

Bob McLemore Company
P. O. Box 25746
Charlotte, NC 28212

Re: Property located at 6201 Gold Wagon Lane, SIR 21336, TC #PO 135-391-99

Dear Sir:

At your request a soils investigation was conducted on the property designated above. Results of this investigation showed the site to be classified as unsuitable under criteria as set forth in Section .1900 of the North Carolina Administrative Code, Title 10, Department of Human Resources, Chapter 10, Division of Health Services; Sanitary Engineering Section, Subchapter 10A, Sanitation.

The soil on this property is not suitable for use with any conventional system, modified or alternative, with which I am aware.

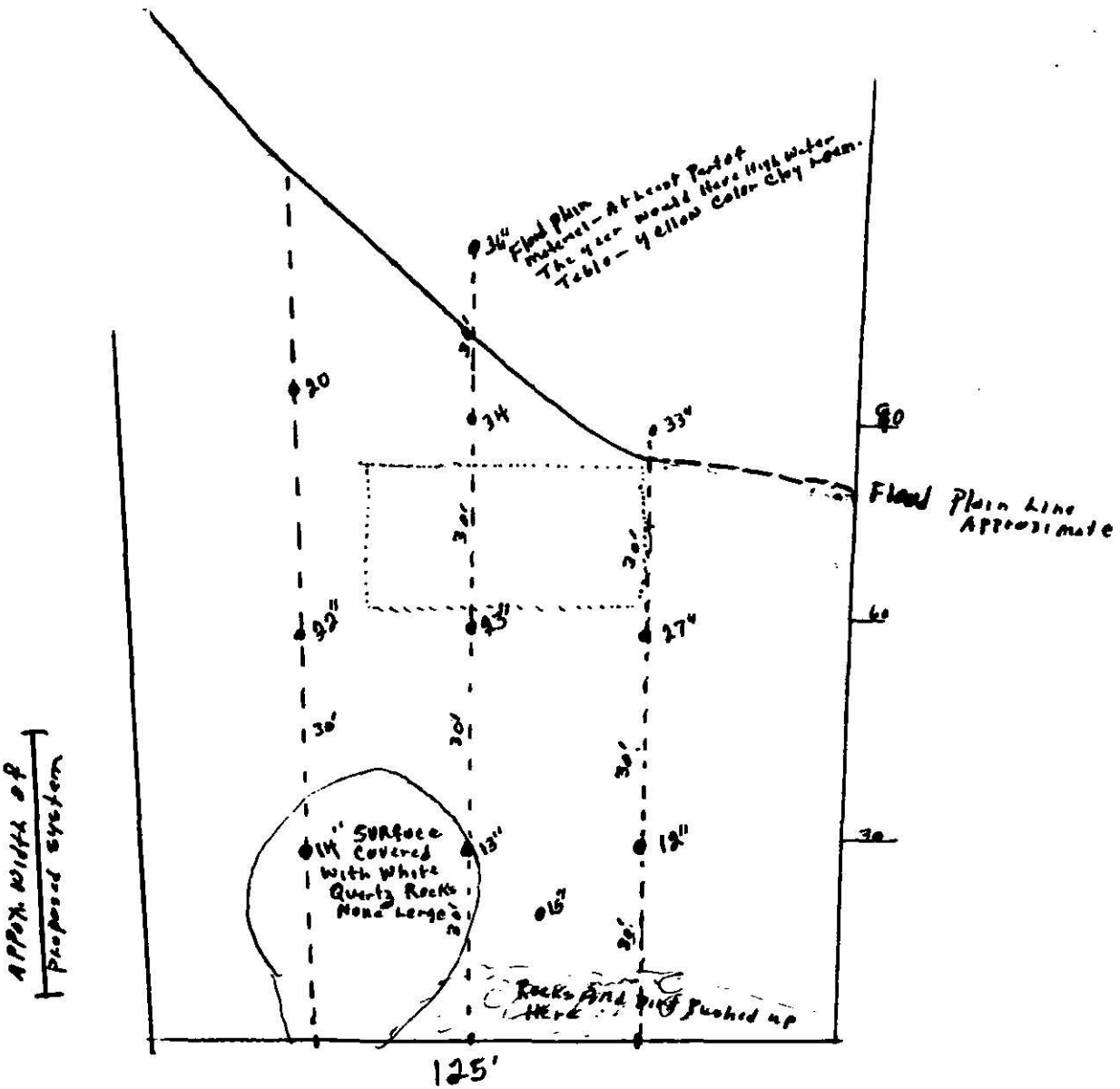
If I can be of assistance, please feel free to call.

Sincerely,

Bill D. Hardister Jr

Bill D. Hardister, Jr.
Environmental Health Supervisor

Enclosure



5-29-85

Recheck of Lot

21336

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

FILE: 21336

TC: Po 135-391-99

JOB LOCATION

① ADDRESS: 6201 (STREET NO) GOLD WAGON (STREET) LANE ③ FILE: 21336

③ CITY: CHARLOTTE ④ TAX PARCEL NO.: Po 135-391-99

⑤ SUBDIVISION: FARMWOOD SECT# 20 ⑥ LOT: 30 ⑦ BLOCK: W

OWNER

⑧ NAME: BOB (FIRST) MCLEMORE (MIDDLE) & INC. (LAST)

⑨ MAILING ADDRESS: PO Box 25746

⑩ CITY: CHARLOTTE ⑪ STATE: NC ⑫ ZIP: 28212

⑬ PHONE: (WORK) 545-6111 ⑭ (HOME) —

REQUEST

This request is for a(n):

⑮ ☑ New installation permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify) _____

DESIGN CRITERIA

System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 4 ㉕ Type? _____

㉓ Maximum occupancy? _____ ㉖ Maximum number of employees? _____

㉔ Basement? ☑ yes ☐ no ㉗ Maximum number of seats? _____

SEE ATTACHED

WATER SUPPLY

㉙ Water supply from (present or proposed):

A ☐ Individual well

B ☐ Municipal system

C ☑ Community well

D ☐ Community system

㉚ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: BOB MCLEMORE & INC. Richard P. Sloan

Date: 5-23-85

㉛ Accurately dimensioned plot

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. _____

T.C. NO. _____

(Ground Absorption Sewage Disposal)

OWNER: _____ PLAT NO: _____

ADDRESS: _____ LOT SIZE: _____

LOCATION OF SITE: _____

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 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S PS U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S PS U	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S PS U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S PS U	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				
9. SITE CLASSIFICATION				
10. SOIL SERIES				

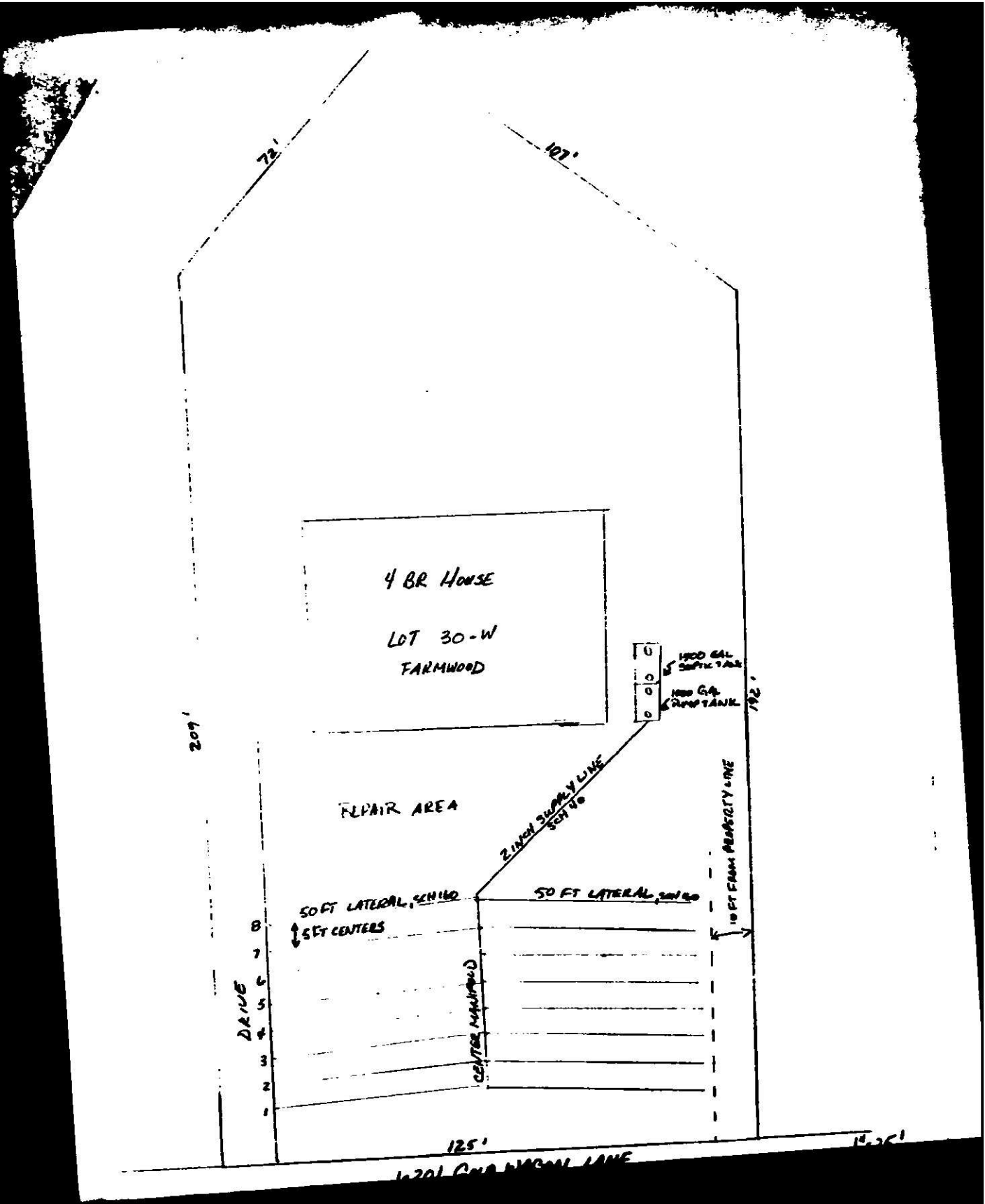
S - Suitable PS - Provisionally Suitable U - Unsuitable

**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: _____

Described by: _____

Title: _____ Date: _____


72'
107'
4 BR HOUSE
LOT 30-W
FARMWOOD
1500 GAL SEPTIC TANK
1000 GAL PUMP TANK
209'
192'
REPAIR AREA
2 INCH SUPPLY LINE SCH 40
50 FT LATERAL, SCH 40
50 FT LATERAL, SCH 40
10 FT FROM PROPERTY LINE
6 FT CENTERS
DRIVE
CENTER MARKING
8
7
6
5
4
3
2
1
125'

R. C. S., Inc.

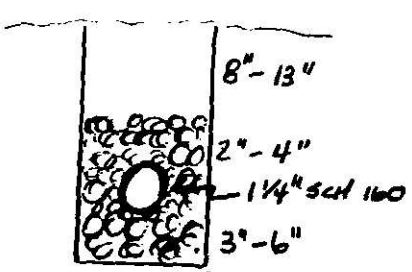
Septic Tank Installation & Service

Stafford Street
Post Office Box 708
Monroe, North Carolina 28110
Phones: 704-283-7539 or 376-9359

BOB MCLEMORE
LOT 30-W FARMWOOD

DUMP REQUIREMENTS	54.74 GPM , 205B FT OF HEAD
STORAGE VOL. IN LATERALS	72 GAL.
STORAGE VOL IN SUPPLY LINE	9.072 GAL.
TOTAL STORAGE VOL.	81.072 GAL.
DOSING VOL	279.072 GAL.
DOSING DEPTH	8.4 INCHES
CHECK VALVE?	NO

	LINE	PRESSURE HEAD	FLOW/ HOLE	NO. HOLES/ LINE	FLOW/LINE	HOLE SPACING	FIRST HOLE
HIGH	1	2'	.41	9 | 18	7.38	5'	30"
	2	2'8"	.47	7 | 14	6.58	9'	30"
	3	3'5"	.54	6 | 12	6.48	11.3'	30"
	4	2'	.41	9 | 18	7.38	5'	30"
	5	2'8"	.47	7 | 14	6.58	9'	30"
	6	3'5"	.54	6 | 12	6.48	11.3'	30"
	7	2'	.41	9 | 18	7.38	5'	30"
LOW	8	2'7"	.47	7 | 14	6.58	9'	30"



R. C. S., Inc.

Septic Tank Installation & Service

Stafford Street
Post Office Box 709
Monroe, North Carolina 28110
Phones: 704-283-7538 or 376-9359

BOB McLEMORE HOMES

LOT 30-W FARMWOOD, 6201 GOLD WAGON LANE

SIR. NO. 21336

DAILY WASTE FLOW	480 GAL.
SEPTIC TANK SIZE	1500 GAL
PUMP TANK SIZE	1000 GAL.
EFFLUENT LOADING RATE	.12 GAL/FT²/DAY
ABSORPTION AREA	4000 FT²
TOTAL LENGTH OF LATERALS	800 FT
LATERAL DIAMETER	1¼ IN, SCH 160
LATERAL CONFIGURATION	8 X 100 FT LINES
SUPPLY LINE LENGTH	56 FT
SUPPLY LINE DIAMETER	2 INCH, SCH 40
MANIFOLD PLACEMENT	CENTER
HOLE SIZE	5/32 INCH
HOLE SPACING	SEE CHART
NUMBER OF HOLES	120
PRESSURE HEAD	SEE CHART
FLOW PER HOLE	SEE CHART
TOTAL FLOW	54.74 GPM
ELEVATION HEAD	15 FT
FRICTION HEAD	2.58 FT
PRESSURE HEAD	3 FT
TOTAL HEAD	20.58 FT

Date Issued 5-11-85

Serial No. 8607

SIR No. 21336

T. C. No. PO 135-391-99

Map Date L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

IMPROVEMENT PERMIT

TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

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

ADDRESS OF OWNER P.O. Box 25746, Charlotte, NC ZIP 28212

LOCATION OF LOT 6201 Gold Wagon Lane
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. 30 BLOCK NO. W

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 21336. 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.

*** AGREEMENT FORM ON FILE ***

Cynthia G. Bass
Environmentalist

Eric D. Henderson Jr.
Environmental Health Director, or Authorized Section Head

EHD-S-76

Site reclassified Provisionally Suitable pursuant to 10 NCAC 10A .1948(c) and Departmental policy regarding alternate septic tank system installation.

Environmental Health Department's Copy

PRESENTED FOR REGISTRATION

JUN 10 1 43 PM '85

CHARLES E. SNYDER
REGISTER OF DEEDS
MECKLENBURG CO. N.C.

5032 0524

209

FILE NO. 21336

RETURN TO: DEPARTMENT OF ENVIRONMENTAL HEALTH

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

ACKNOWLEDGEMENT OF REQUEST BY OWNER FOR RECLASSIFICATION OF SITE FROM "UNSUITABLE" TO "PROVISIONALLY SUITABLE" UNDER 10 NCAC 10A .1948(c)

The undersigned, Robert V. McLemore, President, Bob McLemore & Co., INc., owner of property located at 6201 Gold Wagon Lane, Farmwood, Section #20, Lot #30-W ("the site") and described in an instrument recorded in Book 4647 at Page 939, Mecklenburg Public Registry, hereby acknowledges that he applied to the Mecklenburg County Department of Environmental Health ("the Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 10 NCAC 10A .1934 et seq; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested pursuant to 10 NCAC 10A .1948(c) that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data and other information which indicate to the Department that the septic tank system proposed by the undersigned can reasonably be expected to function satisfactorily and thus that the findings specified in 10 NCAC 10A .1948(c)(1), (2), and (3) can be made; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is his responsibility and that neither the Department nor its officials, employees or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

The undersigned further agrees for his heirs and assigns that, in the event any septic tank system installed under authority of the aforesaid permit fails to perform adequately in any respect, he will take whatever measures are required to correct same; or if such is impossible he will discontinue use of said system immediately.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the names or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

This 5th day of June, 19 85.

Attested By: SEAL

Billy E. Coggins, Asst. Secty.

Prepared By: _____ (SEAL)
Robert V. McLemore
President
Bob McLemore & Co., Inc. (SEAL)

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

FEE 5.00
<> 5.00
CASH 5.00

I, _____, a Notary Public for said County and State, do hereby certify that _____ personally appeared before me this day and acknowledged the due execution of the foregoing instrument. 06/10/85

WITNESS my hand and notarial seal, this _____ day of _____, 1984.

_____
Notary Public

My Commission Expires: _____

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG - UNION

I, Kristy McLemore (Carriker), a Notary Public for said County and State, do hereby certify that Robert V. McLemore personally came before me this day and acknowledged that he is President of Bob McLemore & Co., Inc, and that by authority duly given and as the act and deed of said corporation, the foregoing instrument was signed in its name by its President, sealed with its corporate seal and attested by Billy E. Coggins, Asst. Secty.

WITNESS my hand and notarial seal, this 5th day of June, 1984- 1985

PUBLIC

Kristy McLemore (Carriker)
Notary Public

My Commission Expires: 12/08/87

REAL ESTATE
PAGE

REAL ESTATE
BOOK PAGE

5032 0525

State of North Carolina, County of Mecklenburg
The foregoing certificate(s) of Kristy McLemore (Carriker)

a Notary(ies) Public of Union County and State of North Carolina
is/are certified to be correct. This 10 day of June 1985
Charles E. Crowder, Register of Deeds, By: Mary A. Poole DEPUTY

C of A (s) No. 21336

Date Issued 9-24-85 **Serial** 7908 T.C. No. 135-391-99 PO

L CRI

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner McLemore Co. Bob (LAST FIRST MIDDLE)

Location of Property 6201 Gold Wagon Ln

Application Number — Permit Number —

Inspection Data:

Liquid Capacity of Tank 1500 + 1000 Tank Material PCC

Total Length of Drain Tile 800' Number of Lines 8

Depth of Filter Material 8" Cover Depth 8"

Water Supply Source Comm. Distance from Water Source —

Excavation Inspected 9-24-85 (DATE) Tank Inspected 9-24-85 (DATE)

Nitrification Field Inspected 9-24-85 (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 1985, 1500 ST, 1000 DT, P1, LPP, ~~2400 SF~~ 4000 SF, 8 G, Cecil

B. R. Ferguson
Environmentalist

EHD-5-76

Environmental Health Department's Copy

Date Issued 8-16-85

Serial No. 08438

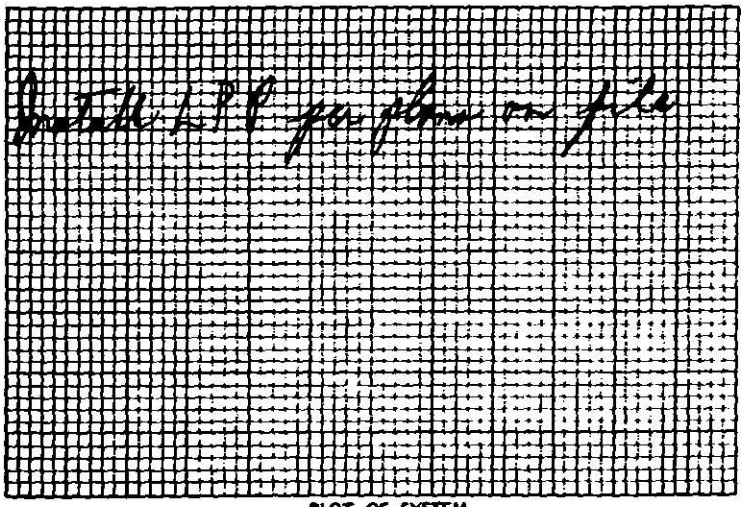
ICAR (S) Permit No. 21336

P.C. No. 135-391-99

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 21336, dated 5-23-85 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 9-16-85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate IV-A

Liquid Capacity of Tank 1500 + 1000

Tank Construction STC

Absorption and/or Nitrification Lines:

Total Line Length 800'

Number of Lines 8

Distance from House 15'

Distance from Property Line 10'

Distance from Well Comm

NAME OF OWNER Bob McTeamore

LOCATION OF PROPERTY 6201 Old Wagon Trl

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: _____

Division or Section Head

B.R. Ferguson
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.

BHB-5-76

Environmental Health Department's Copy