Date Received 10/23/79

APT No. 1625

T C. No. 231-051-05

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER DAVIS (LAST) HELEN (FIRST) M (MIDDLE)

2) ADDRESS OF OWNER C/O WELLINGTON REALTY CO ZIP 28036

3) PHONE NO Home RT 1 Box 350 DAVIDSON N.C. Office 892-6606 333-4457

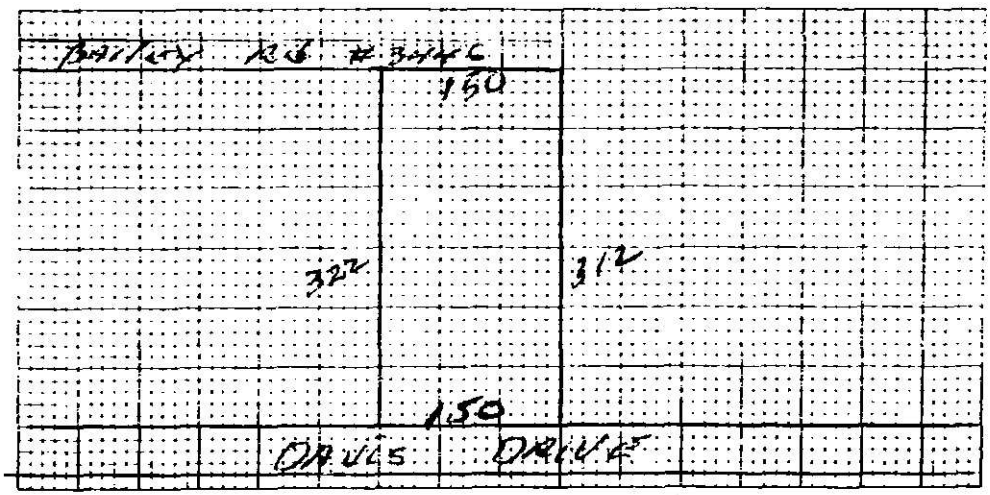
4) LOCATION OF PROPERTY DAVIS DRIVE (STREET OR COUNTY ROAD)

5) SUBDIVISION EAST DAVIDSON ESTATES LOT NO. 7 BLOCK NO 7

MAP BOOK NO 9 PAGE NO 357

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

Helen M. Davis
OWNER

EHD-5-76

Environmental Health Department's Copy

S. I. R. NO. 16256

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

APPENDIX II
SITE EVALUATION

T. C. # 231-053-05

(Ground Absorption Sewage Disposal)

OWNER: ROY Wilson DAVIS Jr.
ADDRESS: % Wellworth Realty CO
COUNTY: R-1 Box 390 DAVIDSON, N.C. 28036
LOCATION OF SITE: DAVIS DRIVE

DATE REQUESTED: 10-23-79
PLAT NO.:
LOT SIZE: 48,300
LOT 7

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U 2-10	S (PS) U 2-10	S PS U	S PS U +
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy clayey, Note 2:1 Clay)	S (PS) U Clayey	S PS U SANDY	S PS U	S PS U
3. SOIL STRUCTURE (12-36 in.) (Clayey Soils)	S (PS) U Blocky	S PS (U) MASSIVE	S PS U	S PS U
4. SOIL DEPTH (In.)	S (PS) U 48>	S (PS) U 48>	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata Rock)	S (PS) U NONE	S PS (U) HARD PAN	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & internal)	S (PS) U Adequate	S PS (U) SLOW	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) U Moderate	S PS (U) SLOW	S PS U	S PS U
8. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	✓ P. SUITABLE	Unsuitable		
SOIL SERIES	APPLING Cecil	VANCE		

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:

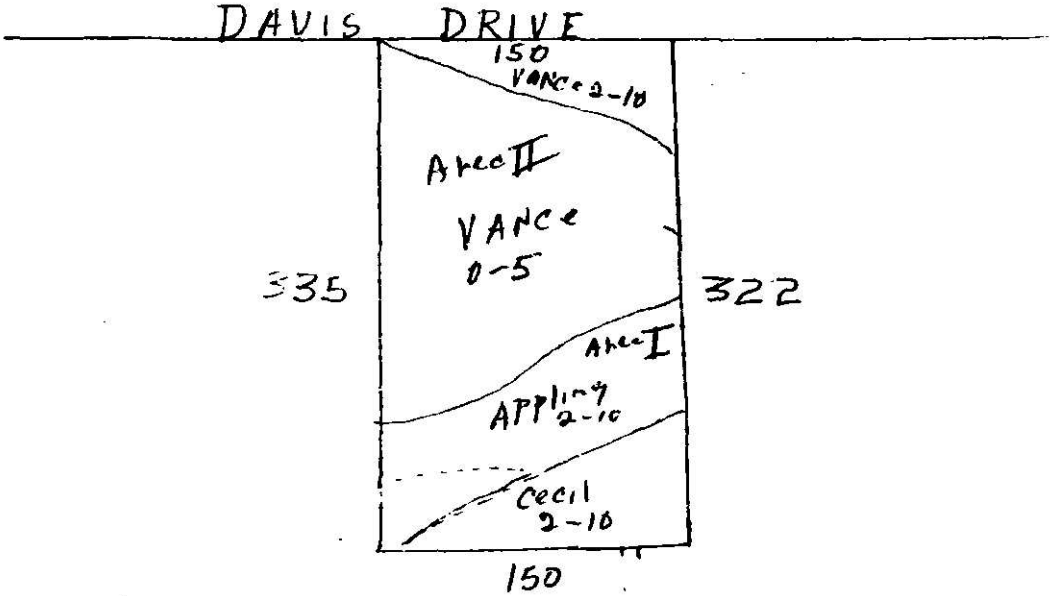
Described By: W. B. Ramsey

Title: Soil Scientist Date: 11-16-79

DHS Form 2601
Sanitation
EHD 539 (3/79)

✓

LOT 7


DAVIS DRIVE
150
VANCE 2-10
Area II
VANCE
0-5
335
322
Area I
APPLING
2-10
Cecil
2-10
150

Serial No. 3203

PTR No. 16256

T C No. 231-053-05

Date Issued 11-20-79

Map Date

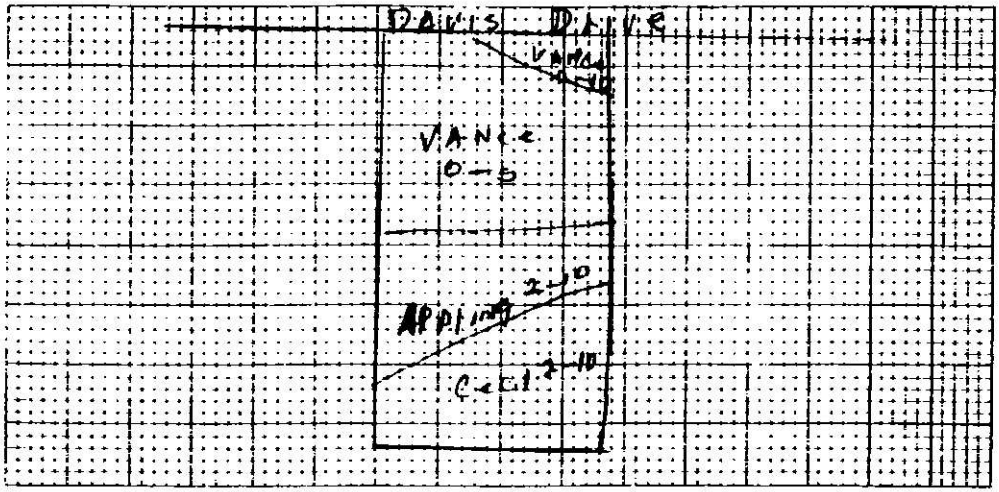
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Davis, Jr. (LAST) Roy (FIRST) Wilson (MIDDLE)

ADDRESS OF OWNER % Wellworth Realty Co., Rt. 1, Box 390 Davidson ZIP, N. C. 28036

LOCATION OF PROPERTY Davis Drive (STREET OR COUNTY ROAD)

SUBDIVISION EAST PROVIDENCE ESTATES LOT NO 7 BLOCK NO. 7



PLOT PLAN

This is to certify that a soil investigation and on site investigation was made by the Mecklenburg County Department of Environmental Health on the property described above. The said investigation was conducted on that portion of the lot as indicated on the above plot. **PROVISIONALLY SUITABLE**

The permeability rate determined by the investigation was The said lot is approved for the installation of an individual single family wastewater treatment system with subsurface, soil absorption effluent discharge subject to the following terms and conditions:

1. A plan of the proposed system must be submitted to the Mecklenburg County Department of Environmental Health for review and approval before the wastewater treatment system is installed.
2. The absorption field must be located in the area determined by the Mecklenburg County Department of Environmental Health to have the percolation rate obtained above, and on the contour as shown on the plot plan.
3. The application rate for the absorption area indicated is acceptable for system installation as shown on the plot plan.
4. This approval is granted provided that the site evaluation and percolation tests were performed on the lot which is the subject of this Mecklenburg County Department of Environmental Health review, the area indicated as acceptable for system installation is unsuitable if made unusable by cuts, fills or other site alterations, and proper operation 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 Department of Human Resources, Division of Health Services and the Mecklenburg County Health Commission which were in effect on the date of issuance and is void if at any time in the future, prior to 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.

W. B. Ramsey
Soil Scientist

John R. Atkinson
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Received 1-20-82

MECK COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH
SEE INSTRUCTIONS ON BACK
JAN 19 1982

ICAR(S) Application No 16256

T C No. 231-[illegible]

Map Date

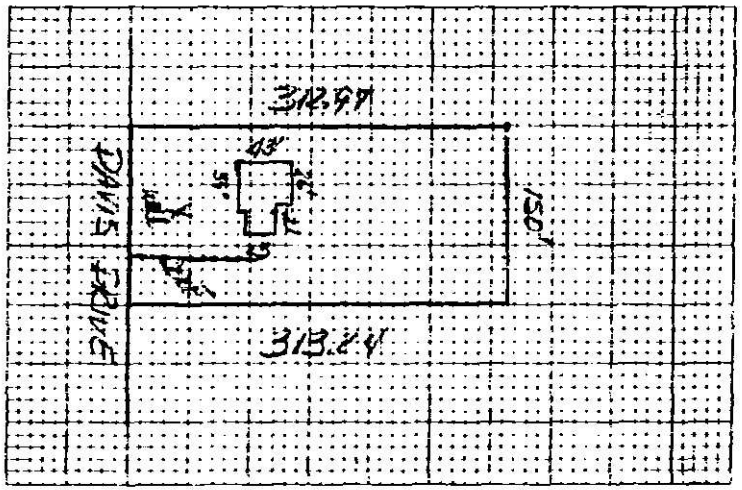
PTR NO. 16256

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:

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 3
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 Well ✓
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) FHA Case No ____
12) VA Case No ____

13) NAME OF OWNER FAGAN, JR (LAST) ROBERT (FIRST) WARREN (MIDDLE)

14) ADDRESS OF OWNER 11712 FIVE CEDARS ROAD, PINEVILLE, NC 28134

15) PHONE NO Home 542-1514 4136 Office 588-0510 374-2713

16) LOCATION OF SYSTEM DAVIS DRIVE (STREET OR COUNTY ROAD)

17) SUBDIVISION E. PINEVILLE ESTATES Lot No 7 Block No. 7

Map Book No 7 Page No. 127

18) DEED REFERENCE — DEED BOOK 4428 AT PAGE 0039

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ____ NO DATE RUN 11-20-79 P.T.

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.

1-18-82
DATE OF APPLICATION

Robert W. Fagan Jr.
OWNER

EHD-5-76 ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

BI. 1-26-82

Serial No. 5445

LA No 16256

Date Issued 1-25-82

T. C No 231-053-05

Map Date

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 Fagan, Jr. (LAST) Robert (FIRST) Warren (MIDDLE)

ADDRESS OF OWNER 11712 Five Cedars Rd., Pineville, NC ZIP 28134

LOCATION OF LOT 4136 Davis Drive (STREET OR COUNTY ROAD)

SUBDIVISION East Providence Estates LOT NO 7 BLOCK NO. 7

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 16256. 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.

Lift station maybe needed.

Mike Sexton
Environmentalist

John A. Adkisson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

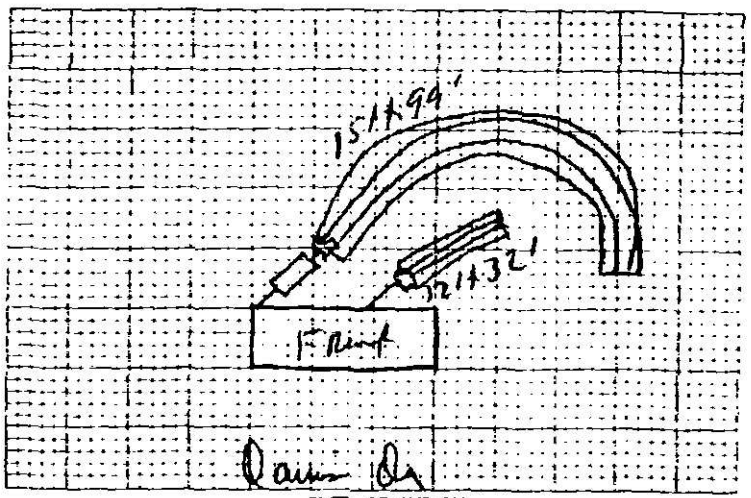
Date Issued 4-19-12 Serial No. 5383 ICARIS Permit No 16256

Tax No 231-053-05

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 16256, dated 1-20-12 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 5/31/12, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500 gal

Tank Construction PC

Absorption and Distribution Lines

Total Line Length 495' +125'

Number of Lines 5 + X

Distance from House 101

Distance from Property Line 101

Distance from Well 501+

NAME OF OWNER Robert Warren Fagan

LOCATION OF PROPERTY 4136 Davis 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: 151' +99' +17" Stone on Septic System
121' +32' +17" Stone on Washing Machine

Bob Wilson

Division or 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-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

BZ-5-5-82

C of A (s) No 16256

Date Issued 5-4-82 **Serial** 5120 T C No 23-053-05

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner Fagan (LAST) Robert (FIRST) Warren (MIDDLE)

Location of Property 4136 Dawn Dr

Application Number 16256 Permit Number 16256

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material PC

Total Length of Drain Tile 495'+125 Number of Lines 5+4

Depth of Filter Material 17" Cover Depth 15"+

Water Supply Source Well Distance from Water Source 50'+

Excavation Inspected 5-4-82 (DATE) Tank Inspected 5-4-82 (DATE)

Nitrification Field Inspected 5-4-82 (DATE)

Washing Machine Line Inspected, If Applicable 5-4-82 (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

END-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY