Date Received 5-9-84

SIR No. 21004

T. C. No. 001-201-05

Map Date 1978

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER (LAST) MARTIN (FIRST) DEVELOPMENT (MIDDLE) GROUP

2) ADDRESS OF OWNER 1800 ONE TRYON CENTER CHARLOTTE ZIP 28284

3) PHONE NO. Home _____ Office 332-1242

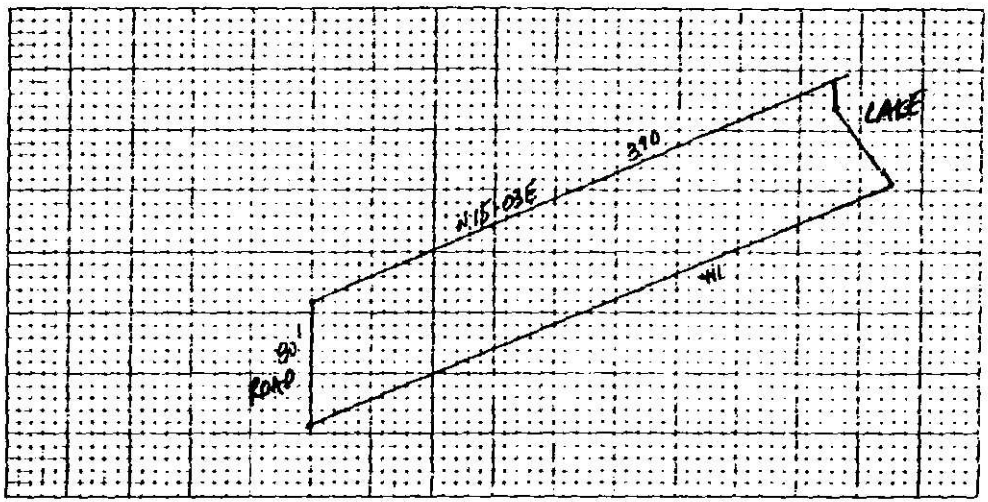
4) LOCATION OF PROPERTY NORTH POINT RD (STREET OR COUNTY ROAD)

5) SUBDIVISION LOOKOUT POINT LOT NO [redacted]24 BLOCK NO _____

MAP BOOK NO [redacted]1 PAGE NO [redacted]20

6) DEED REFERENCE DEED BOOK N/A 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

Carl A. McNeil

OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'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

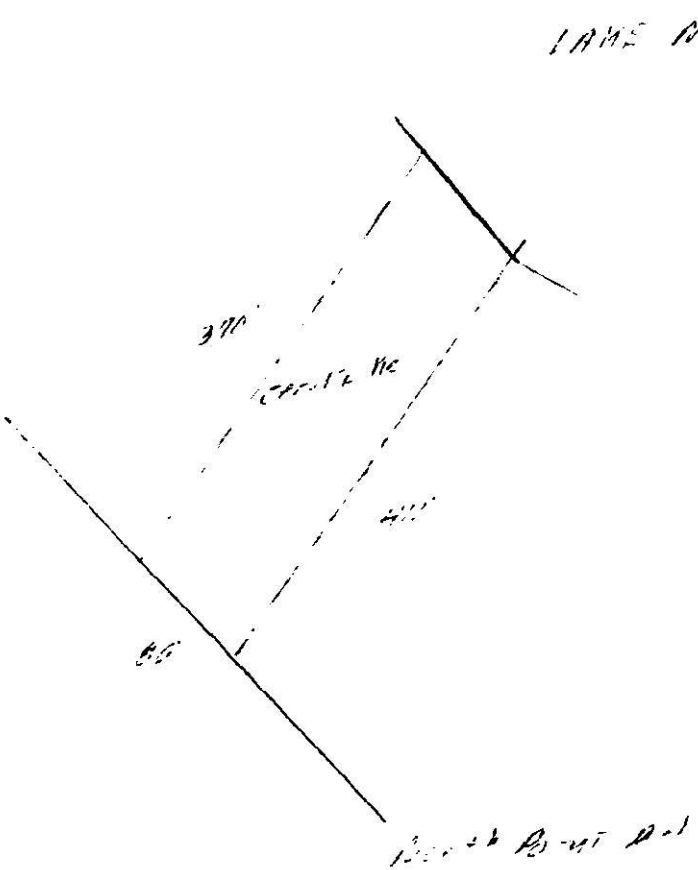
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: _____

Described by: _____
Title: _____

Date: _____

H



Serial No. 6480

SIR No. 21004

T. C No. PO 001-201-05

Date Issued 7-31-85

Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

SOIL INVESTIGATION REPORT

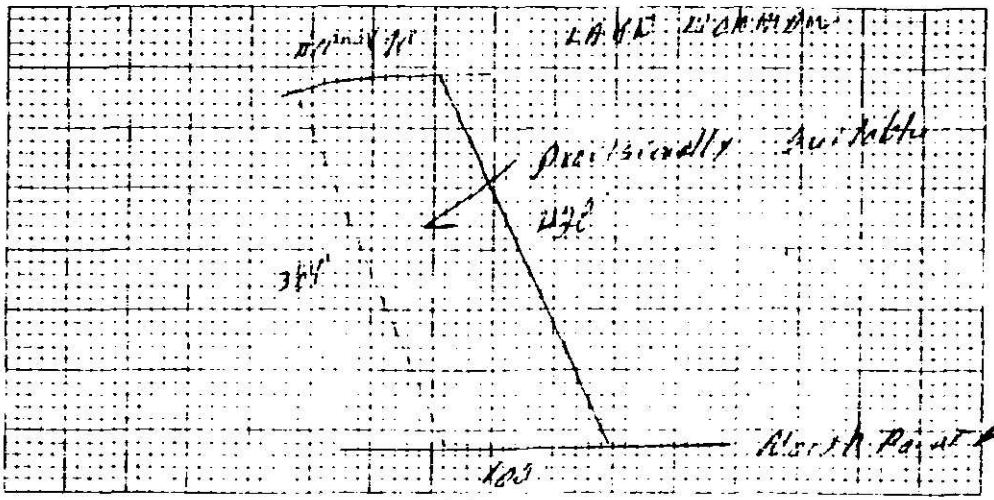
" REVISED REPORT DUE TO LOT RECONFIGURATION"

NAME OF OWNER Martin Development Group
LAST FIRST MIDDLE

ADDRESS OF OWNER 1800 One Tryon Center, Charlotte, NC ZIP 28284

LOCATION OF PROPERTY North Point Road
STREET OR COUNTY ROAD

SUBDIVISION Lookout Point LOT NO 21 BLOCK NO



PLOT PLAN

This [illegible] the Mecklenburg County Department of Environmental Health [illegible] was conducted on [illegible] PROVISIONALLY SUITABLE

The permeability [illegible] The said lot is approved for the installation of [illegible] tank [illegible] treatment [illegible] subsurface, soil absorption effluent [illegible] subject to the following terms and conditions:

1. [illegible] Mecklenburg County Department of Environmental Health [illegible] wastewater treatment system on the said lot.
2. The [illegible] Mecklenburg County Department of Environmental Health [illegible]
3. [illegible]
4. [illegible] accepted as acceptable [illegible] 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.

[signature]
Soil Scientist

[signature]
Environmental Health Director or
Authorized Section Head

EHD-5-76

Environmental Health Department [illegible]

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

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

Mecklenburg County services are available without regard to ethnic origin, sex, or disability

MECK COUNTY DEPARTMENT OF
RECEIVED
APR 1 1987
ENVIRONMENTAL HEALTH

OFFICE USE ONLY:

FILE: 21004

TC:

SERIAL: № 12951 ☒ L ☐ CRT

JOB LOCATION

① ADDRESS: 16224 North Point Road (STREET NO / STREET) ② FILE:

③ JURISDICTION: Lemley Township ④ TAX PARCEL NO.: PO 001-201-05

⑤ SUBDIVISION: Lookout Point ⑥ LOT: 21 ⑦ BLOCK:

OWNER

⑧ NAME: Carlos (FIRST) Rudolph (MIDDLE) Hunt (LAST)

⑨ MAILING ADDRESS: P.O. Box 760

⑩ CITY: Davidson ⑪ STATE: N.C. ⑫ ZIP: 28036

⑬ PHONE: (WORK) 892-8245 ⑭ (HOME) 892-3755

REQUEST

This request is for a(n):

⑮ ☒ New 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? 3 ㉕ Type?

㉓ Maximum occupancy? 2 ㉖ Maximum number of employees?

㉔ Basement? ☐ yes ☒ no ㉗ Maximum number of seats?

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☐ Individual well

B ☐ Municipal system

C ☐ Community well

D ☒ Community system

㉙ 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: Mary T. Hunt

Date: 3/30/87

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by the Department.

This permit is not transferable and shall become null and void 36 months from the date of issuance.

B.R. Ferguson — Environmental Date: 4-30-87

S.R. [illegible] — Director or Authorized Section Head Date: 5-1-87

*This permit must be signed by the Director of Environmental Health or an authorized section head in order to be valid.

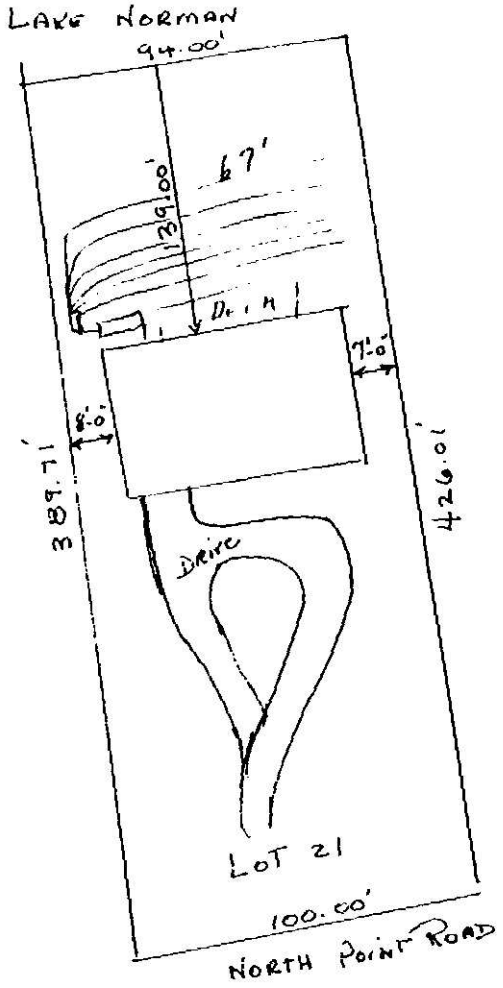
PROPOSED PLOT PLAN

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

FILE: 21604

TC: _____

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Signed: Mary T. Hunt

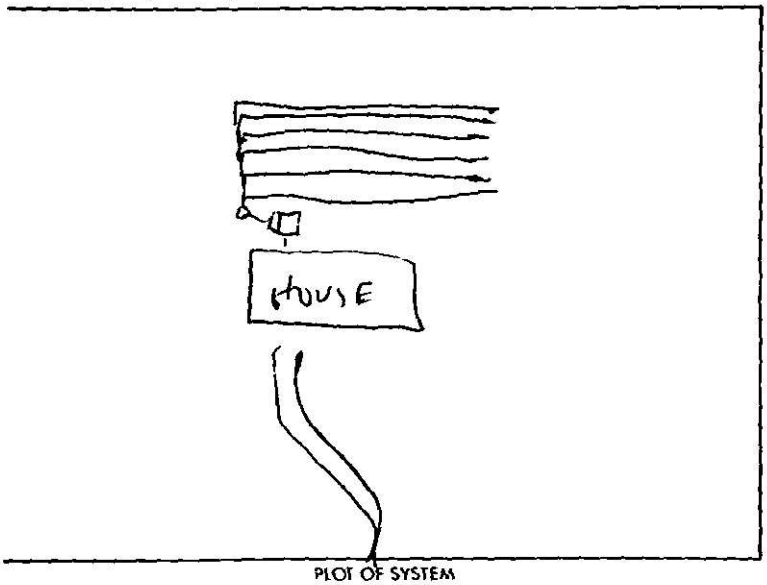
Date: 3/30/07

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

FILE: 21004 DATE: 10-2-07
TC: 001-201-05
SERIAL Nº 11292

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 the application dated 9 30 07. All work shall be completed on or before 11 2 07, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Department of Environmental Health before any system can be covered up or placed into service. 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons
Liquid Capacity of Dosing Tank — gallons
Tank Construction PCC

Absorption and or Nitrification Lines:
Trench Width 3 feet
Total Line Length 6 x 67 400 feet
Number of Lines 6
Depth of Stone 12 inches
Distance from House 5 feet
Distance from Property Line 10 feet
Distance from Well 100 feet

NAME OF OWNER HUNT CARLOS R.
LOCATION OF PROPERTY 1624 NORTH PT RD
Comments: 6 lines 67'long

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.

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 21004 DATE: 10-5-87

TC: 001-201-05 ☐ L ☑ CRT

SERIAL № 10580

Name of Owner HUNT, CARLOS Juris.:

Address of Property 16224 NORTH PT RD

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400

Number of Lines 6 @

Cover Depth 1-2'

Water Supply Source well

Distance to Water Source 100'

Excavation Inspected 10-5-87

Tank(s) Inspected 10-5-87

Wash Line Inspected ✓

High Water Alarm Inspected ✓

PLOT

Design: 1987 1500ST CON 1200SFT 12G GEOTIC CTR#

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☑ installed or constructed ☐ altered or repaired

☐ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The issuance of this

☑ Certificate of Completion ☐ Operation Permit

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 document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 10 NCAC 10A .1900 in addition to those listed below under "COMMENTS." This document 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:

Kelly Randolf
Environmentalist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.