Date Received 30 May 14

Application No. 6245
T. C. No. 10 - 022
Map Date 9-1-20

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Cole Kelly
LAST FIRST MIDDLE

ADDRESS OF OWNER P.O. Box 12054 ZIP

PHONE NO. Home Office 536-9536

LOCATION OF PROPERTY Lori Drive (5607)
STREET OR COUNTY RADIL

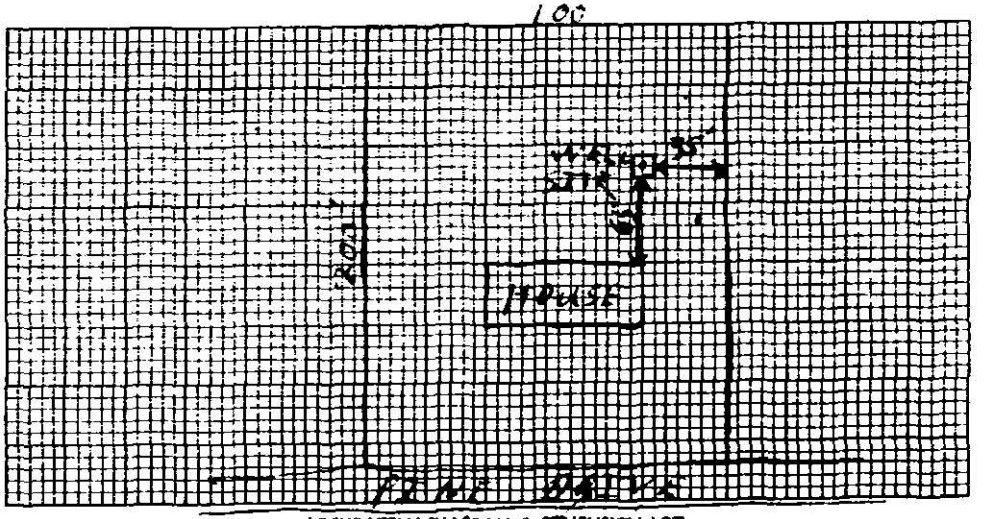
SUBDIVISION LOT NO. 21 BLOCK NO. 6

MAP BOOK NO. PAGE NO.

DEED REFERENCE: DEED BOOK PAGE NO.

WELL CONTRACTOR McCALL Bros LICENSE NO. 30

Application is hereby made to the Mecklenburg County Health Department for a permit to drill a water well on the hereinabove described lot to be used as a source of 1 individual, _____ semi public, or _____ public water supply:



ACCURATELY DIAGRAM & DIMENSION LOT

DATE OF APPLICATION

OWNER

Application approved and permit hereby granted

Permit No: 6245

ENVIRONMENTALIST

FORM NO. E-20-8-1-72

HEALTH DEPARTMENT'S COPY

Date Received 5-14-73

APT No 6245

T. C No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Curl (LAST) Realty, Inc (FIRST) (MIDDLE)

2) ADDRESS OF OWNER Rt. Box 13054 Charlotte ZIP 28203

3) PHONE NO Home 5350509 Office 536836

4) LOCATION OF PROPERTY Pine Circle (Pine Dr.) off Irwin (STREET OR COUNTY ROAD)

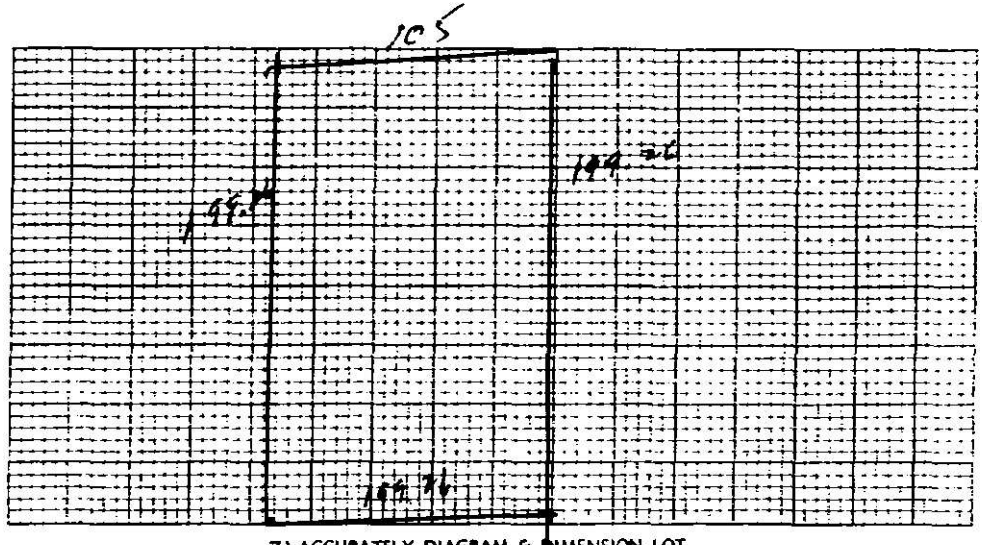
5) SUBDIVISION Hickory Acres LOT NO 21 B BLOCK NO.

MAP BOOK NO 6 PAGE NO. 873

6) DEED REFERENCE. DEED BOOK PAGE NO.

Application is hereby made to the Mecklenburg County Health Department for the conduct of a percolation test and on 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

N



7) ACCURATELY DIAGRAM & DIMENSION LOT

Pine Circle

John B Curl
OWNER

Curl Realty

FORM NO. E-1-8-1-72

S

HEALTH DEPARTMENT'S COPY

MECKLENBURG COUNTY
Department of Public Health

1200 Blythe Boulevard
Charlotte, North Carolina 28203
Telephone 374-2113

Date Issued
1. October 12, 1973 SITE DISAPPROVAL REPORT
2. _____ INDIVIDUAL SEPTIC TANK SYSTEM WITH SUBSURFACE,
3. _____ SOIL ABSORPTION, EFFLUENT DISCHARGE

SDR No. 6285
T.C. No. ~~108-022-07~~ 9-1-70

NAME OF OWNER Civil Realty, Inc.

ADDRESS OF OWNER P.O. Box 12054 ZIP 28205

LOCATION OF LOT Pine Drive, Lot 21-B

The lot described above has been disapproved for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge due to the following:

FAILURE TO PASS PERCOLATION TEST (60 minutes per inch or less)

	Test No.	Date of Test	Percolation Rate
Ax	1.	10-12-73	170 min/in
____	2.	_____	_____ min/in
____	3.	_____	_____ min/in

X ON SITE INSPECTION REVEALED LOT TO BE UNSUITABLE FOR THE FOLLOWING REASON(S) 10-17-73 - Soils were found to be of the Helena series. These soils have very plastic and sticky clay subsoils which contain swelling clay minerals. In addition, they may have a perched high water table during periods of high rainfall. These factors result in inadequately slow percolation rate and permeability.

W. Scott Lynn, Jr. / John R Adkisson
Soil Scientist / Environmentalist

(Stencil No.)
EHD 398
8/70

FORM NO.
E-19-8-14-70

MECKLENBURG COUNTY HEALTH DEPARTMENT
INTER-OFFICE COMMUNICATION

DATE: October 22, 1973

TO: John Adkisson
Environmentalist

FROM: W. Everette Lynn, Jr. W. E. L.
Soil Scientist

SUBJECT: APT #6245 (Civil Realty)
Lot No. 21-B, Pine Circle
Hickory Acres Subdivision
10-17-73

Soils were found to be of the Helena series. These soils have very plastic and sticky clay subsoils which contain swelling clay minerals. In addition, they may have a perched high water table during periods of high rainfall. These factors result in inadequately slow percolation rate and permeability.

Based on this investigation, it appears that the lot is unsuitable for installation of a septic tank system.

WEL:jdg

[redacted]

3639 0321

State of North Carolina

County of Mecklenburg

This 26th day of November, 1973, personally came before me John K. Civil, who, being by me duly sworn, says that he is the President of Civil Realty, Inc. and that the seal affixed to the foregoing instrument in writing is the corporate seal of the Company, and that said writing was signed and sealed by him, in behalf of said Corporation, by its authority duly given. And the said John K. Civil acknowledged the said writing to be the act and deed of said Corporation.

Evelyn B. Stevens
Notary Public

My Commission Expires: July 12, 1976

State of North Carolina, County of Mecklenburg
The foregoing certificate(x) of Evelyn B. Stevens

a Notary(xxx) Public of said County and State
is xxx certified to be correct. This 4 day of December, 1973
Charles E. Crowder, Register of Deeds, By: Carolyn Ford
DEPUTY

DRAWN BY:

MAIL:
ENVIRONMENTAL HEALTH DIVISION
MECKLENBURG COUNTY HEALTH DEPT.
JOHN ATKISSON, DIRECTOR
1200 BLYTHE BLVD.
CHARLOTTE, N.C. 28203

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

REAL ESTATE BOOK
3639 0320

SEPTIC TANK AGREEMENT

PRESENTED FOR REGISTRATION
1973 DEC 7 PM 2 34
REGISTER OF DEEDS MECKLENBURG CO. N.C.

Date November 26, 1973

I acknowledge that I have been informed by the Mecklenburg County Health Department that the property described as

Lot 21B, Block ___, of Hickory Acres Subdivision, as recorded in Map Book 6, Page 873, of the Mecklenburg County Registry (tax code number 103-022-06) - 1

82

is not a recommended site for the installation of a septic tank and nitrification system for the reason or reasons listed below. I agree to immediately abate any nuisance which occurs from a septic tank installed at this location for as long as I am the owner. I also agree to inform any person, firm or corporation buying or accepting transfer of this property from me of this agreement.

Unsuitable soil - Percolation rate 120 min./in.

MECK COUNTY HEALTH DEPT.
RECEIVED
NOV 29 1973
ENVIRONMENTAL HEALTH DIVISION

MECK COUNTY HEALTH DEPT.
RECEIVED
DEC 6 1973
ENVIRONMENTAL HEALTH DIVISION

CIVIL REALTY, INC.
By: John K Civil President
Attested: [redacted] Secretary

Seal

State of North Carolina
County of Mecklenburg

I, [redacted] a notary public of Mecklenburg County, North Carolina, Certify that John K. Civil personally came before me this day and acknowledged that he or she is the President of Civil Realty Co., a corporation and that by authority duly given and as the act of the corporation, the foregoing instrument was signed in its name by its President, sealed with its corporate seal, and attested by himself or herself as its President.

Witness my hand and official seal, this the 27 day of _____, _____.

_____

My commission expires 7-1-75

EHD 507
11/16/73

R

Date Received 12-17-73

SEE INSTRUCTIONS ON BACK

MECK. COUNTY HEALTH DEPT.
RECEIVED
DEC 1 : 1973
ENVIRONMENTAL HEALTH DIVISION

CAR(S)

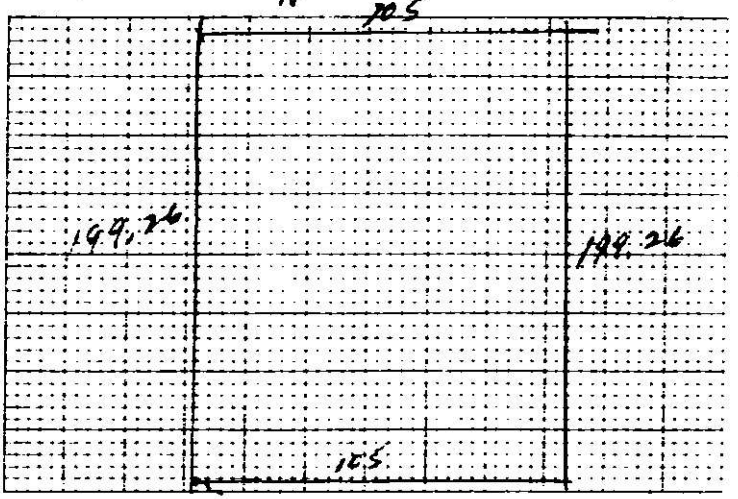
Application No 6245
T C No 108-022-06
Map Date 9170

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 property described hereinafter hereby applies to the Mecklenburg County Health Department 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)

4) No of Bedroom 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 ___

Pine Circle

13) NAME OF OWNER Carl Realty, Inc (LAST / FIRST / MIDDLE)
14) ADDRESS OF OWNER P.O. Box 12054, Charlotte, N.C. 28205
15) PHONE NO. Home 536-0509 Office 536-8836
16) LOCATION OF SYSTEM Pine Circle (STREET OR COUNTY ROAD)
17) SUBDIVISION Hickory Acres Lot No 21-B Block No. ___
Map Book No. 6 Page No. 873
18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___
19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ___ NO DATE RUN PR-7120
20) PTR NUMBER (See Instructions) 6245

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.

12-13-73
DATE OF APPLICATION

John K Carl
OWNER Carl Realty, Inc.

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3690

LA No. 6245 P.O.

Date Issued December 10, 1973

T. C. No. 108-022-0906

IMPROVEMENTS PERMIT

Map Date 9-1-70

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 Civil Realty, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P.O. Box 12054 ZIP

LOCATION OF LOT Pine Drive, Lot 21-B
(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 120*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 6245. 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.

*Agreement Card signed December 4, 1973, recorded in book 3639 at page 0320.

Environmentalist

John A. Robinson

Director, Environmental Health Division or Authorized Section Head

FORM NO. E-3-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 12 Feb 74

Serial No. 5075

ICAR(S) Permit No 6245

T C No 108-053-06

Map Date 9-1-76

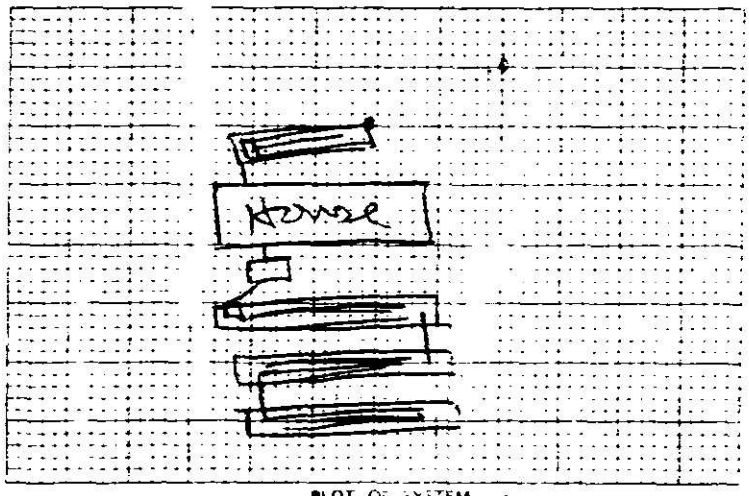
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 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 6245 dated 12-13-73 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 12 May 74, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 120

Liquid Capacity of Tank 1000 gal

Tank Construction Precast Concrete

Absorption and/or Nitrification Lines

Total Line Length 800' & 300'

Number of lines ~~3 beds~~ To Inf 5 12½'x160'

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100' 75'

NAME OF OWNER Civil Realty

LOCATION OF PROPERTY Pine Circle

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: washer 5'x45'x4'stone

** 3 beds 12½'x53'

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 Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

FORM NO. E-5-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 7 May 74 Serial 4759

C of A (s) No. 6245

T C No 108-232-06

Map Date 9-1-72

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 Civil Realty (LAST) (FIRST) (MIDDLE)

Location of Property Pine Circle

Application Number 6245 Permit Number 6245

Inspection Date:

Liquid Capacity of Tank 1000 gal Tank Material Precast Concrete

Total Length of Drain Tile 500' & 300' Number of Lines (5) 13½' x 160'

Depth of Filter Material 17" Cover Depth 15"

Water Supply Source well Distance from Water Source 75'

Excavation Inspected 7 May 74 (DATE) Tank Inspected 7 May 74 (DATE)

Nitrification Field Inspected 7 May 74 (DATE)

Washing Machine Line Inspected, If Applicable 7 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: Alteration pat O.K

G. M. Reynolds
Environmentalist

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

HEALTH DEPARTMENT'S COPY