Date Received 5/1/77

APT No. 2436

T. C. No. 231-[illegible]

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER BOB McLEMORE & CO, INC
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER P.O. Box 25746 CHAR. ZIP 28212

3) PHONE NO. Home ___ Office 545-6111

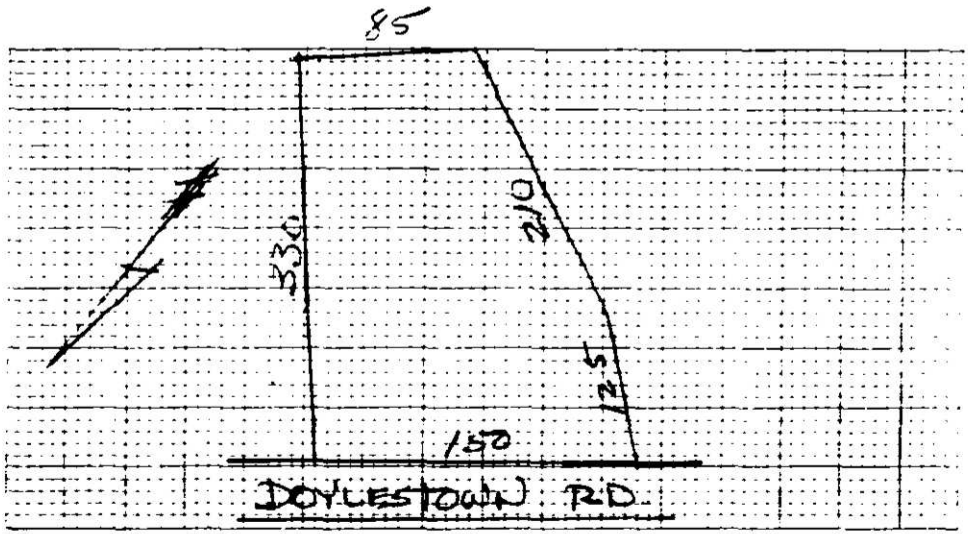
4) LOCATION OF PROPERTY DOYLESTOWN RD.
(STREET OR COUNTY ROAD)

5) SUBDIVISION PROVIDENCE RIDGE LOT NO. 54 BLOCK NO. B

MAP BOOK NO. ___ PAGE NO. ___

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 an on site inspection of the lot here inabove 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

Peter L Bobel
OWNER

FORM NO. EH-11-3M-5-75

HEALTH DEPARTMENT'S COPY

SOIL INVESTIGATION REPORT

Date of Investigation May 16, 1977 APT NO. 12436

Owner Bob McLemore & Co., Inc.

Location of Property Doylestown Rd. lot No. 54 Block B

Soil Suitability Ratings Ordinance No. P.O. 231-10-01

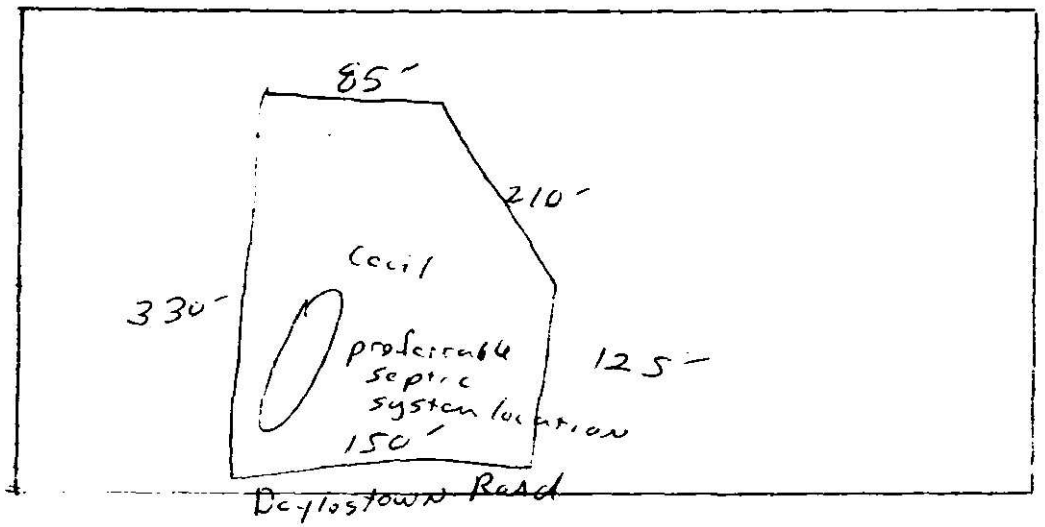
Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Codorus			
2. Soil Slope	suitable 8-15%			
3. Soil Depth	suitable >48"			
4. Soil Texture	provisionally suitable silty			
5. Soil Structure	provisionally suitable blocky			
6. Restrictive Horizons	—			
7. Soil Drainage	suitable water table >6'			
8. Soil Permeability (Percolation Rate)	provisionally suitable moderate			
9. Other	Seasonal —			
10. Overall Rating	provisionally suitable			

Recommendations Based on this investigation, the lot was found to have an acceptable area of provisionally suitable soils for installation of a septic tank system. System design should be based on a percolation rate of 60 min/in.

Soil Scientist W. Edward Gemmill

3/10/75
MD 558

DIAGRAM OF PROPERTY



3/18/75
EHD 539

Serial No. 0794

PTR No. 12436

T. C. No. P.0.231-101-01

Date Issued May 24, 1977

Map Date

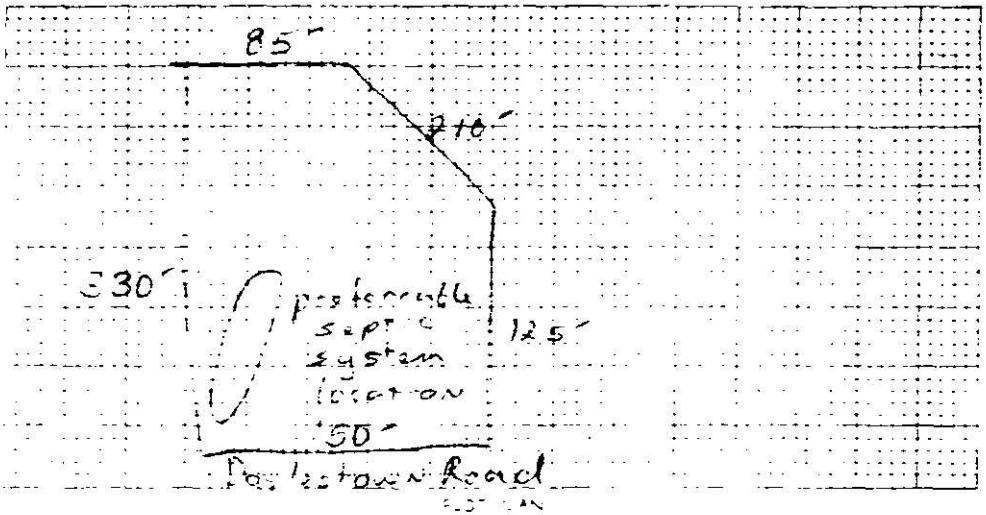
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Bob McLemore & Company, Inc.
(LAST, FIRST, MIDDLE)

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

LOCATION OF PROPERTY Doylestown Road
(STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 54 BLOCK NO B



PLOT PLAN

Provisionally Suitable
60 min/in.

This approval granting a permit is given with 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 in effect on the date of issuance and is valid at any time in the future prior to construction of the system, these laws, rules and regulations are changed such that this permit would not have been granted had the new or revised laws, rules and regulations been in effect on the issue date.

W. Edwards
EHS Title Soil Scientist

John W. McLemore
Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

Date Received 3/24/78

SEE INSTRUCTIONS ON BACK

ICAR(S) Application No 12436

T C No 231-02 05

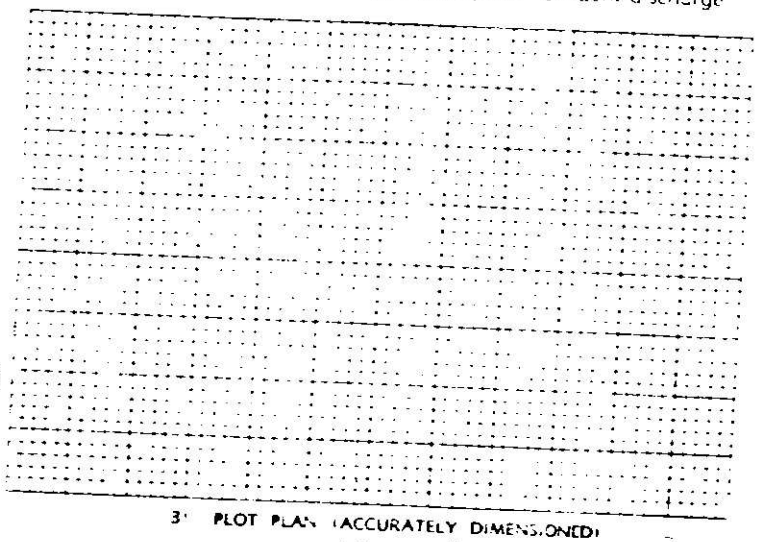
Map Date 11977

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) X 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) Mobile Home ___ Yes ___ No
Residence ___ Yes ___ No
4) No of Bedrooms 3
5) Business Use ___ Yes ___ 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
Well Source ___
2 Governmental Source ___
Sewage System
Well is within 200 feet of Septic System ___ Yes ___ No
Septic System is within 200 feet of Well ___ Yes ___ No
EHA Code No ___
EHA Code No ___

13) NAME OF OWNER ___ (LAST) ___ (FIRST) ___ (MIDDLE)

14) ADDRESS OF OWNER ___

15) PHONE NO Home ___ Office ___

16) LOCATION OF SYSTEM ___ (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No 54 Block No B

Map Book No ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ___ NO DATE RUN 3/24/77

20) PTR NUMBER (See Instructions) 12436

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.

DATE OF APPLICATION 3-24-78

OWNER ___

EHC-5-76

Environmental Health Department's Copy

Date Issued 3/24/78

Serial No. 1656

LA No. 12436

T. C. No. 231-102-05

Map Date 11-9-77

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

IMPROVEMENT PERMIT

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

NAME OF OWNER Williams (LAST) John (FIRST) H. Builders, Inc. (MIDDLE)

ADDRESS OF OWNER 5700 Camelot Drive, Matthews, N. C. ZIP

LOCATION OF LOT Doylestown Road (STREET OR COUNTY ROAD)

SUBDIVISION Providence Ridge LOT NO 54 BLOCK NO B

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 12436. 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 permits 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

Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued 6/2/78

Serial No. 1690

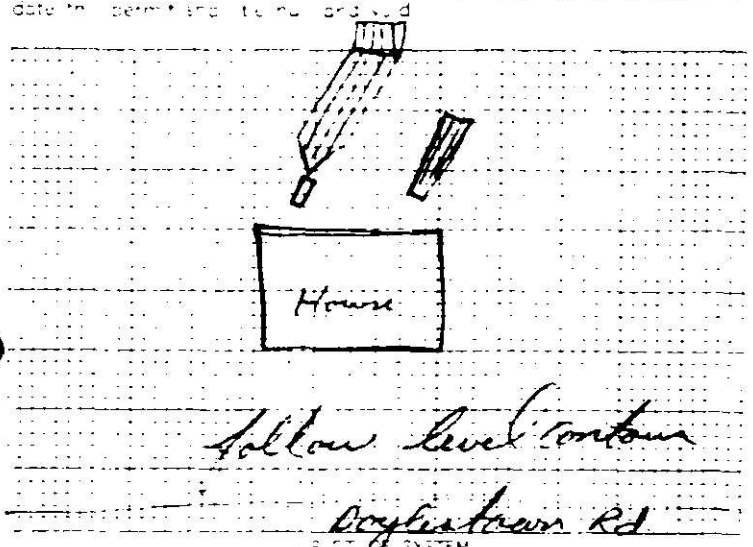
ICAR(S) Permit No. 12436

T C No. RD 23402-05

Map Date 11-9-77

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 granted 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 12436 dated 3/24/78 and this permit shall be void and of no effect if the information supplied in the application proves to be false. All work shall be completed on or before 7/31/78 after which date this permit shall be null and void.



PLOT OF SYSTEM

P.S.

1500 gal

Pre Cast

495' & 125'

5 & 3

10'

10'

community

NAME OF OWNER John H. Williams

LOCATION OF PROPERTY 10425 Doylestown Rd.

This system is approved as required by the Regulations of the Mecklenburg County Board of Health effective as of the date of the granting of this permit. A certificate of satisfactory completion will be issued by the Department of Environmental Health upon completion of the system as constructed or repaired in accordance with these regulations.

Comments: 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.

Division or Section Head

Environmentalist Stephen J. Wood

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-5-76

Environmental Health Department's Copy

Date Issued June 23 1978 Serial No. 1634

C of A (s) No. 12436

P.O. T C No 231-102-05

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF COMPLETION
CERTIFICATE OF APPROVAL

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

Name of Owner Williams (LAST) John (FIRST) H. (MIDDLE)

Location of Property Doyletown Rd.

Application Number 12436 Permit Number 12436

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 18"

Water Supply Source Comm. Distance from Water Source —

Excavation Inspected — (DATE) Tank Inspected 6-23-78 (DATE)

Nitrification Field Inspected 6-23-78 (DATE)

Washing Machine Line Inspected If Applicable 6-23-78 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface soil absorption, effluent discharge on the above described lot and it has been ✓ installed or constructed in substantial compliance 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, occupying 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 the restrictions and conditions shown in this permit 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

Environmentalist

EHD-S-76

Environmental Health Department's Copy