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Date Received 8.10.23

RECEIVED
AUG 1 0 1973
ENVIRONMENTAL HEALTH DIVISION

APT No. 6824

T. C. No.

Map Date

# MECKLENBURG COUNTY HEALTH DEPARTMENT

## ENVIRONMENTAL HEALTH DIVISION

### APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER LEE (LAST) WILLIAM (FIRST) DENNIS (MIDDLE)

2) ADDRESS OF OWNER RT 1 Box 606, CHARLOTTE ZIP 28212

3) PHONE NO. Home 545-4913 or 4410 Office 376-5356

4) LOCATION OF PROPERTY BLAIR ROAD - Hwy No. 51 (STREET OR COUNTY ROAD)

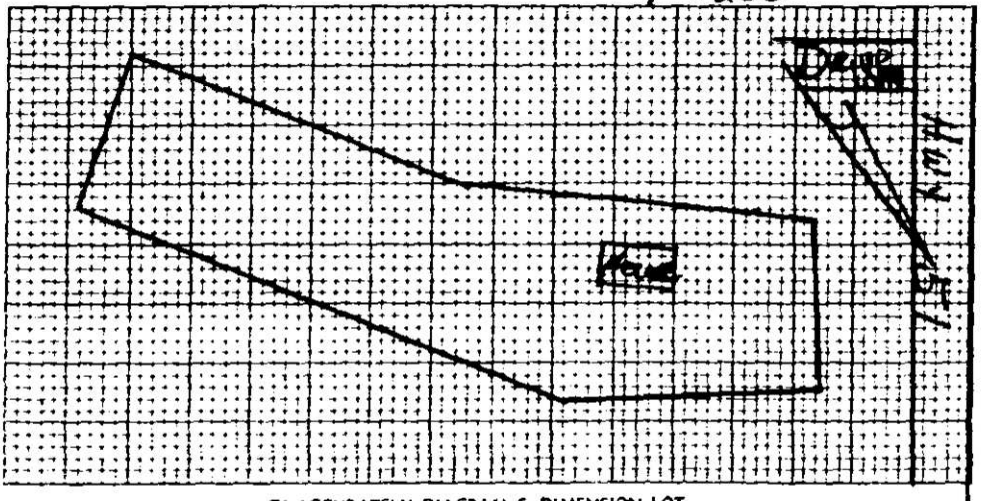
5) SUBDIVISION _____ LOT NO _____ BLOCK NO _____

MAP BOOK NO _____ PAGE NO _____

6) DEED REFERENCE DEED BOOK 3343 PAGE NO 400

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 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

1" = 200'




7) ACCURATELY DIAGRAM & DIMENSION LOT

William Dennis Lee
OWNER

FORM NO E-1-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3487

PTR No. 6824

Date Issued August 16, 1973

T C No 139-011-35

Map Date 2-23-72

**Do Not Issue A Building Permit Based On This Form**

# MECKLENBURG COUNTY HEALTH DEPARTMENT

## ENVIRONMENTAL HEALTH DIVISION

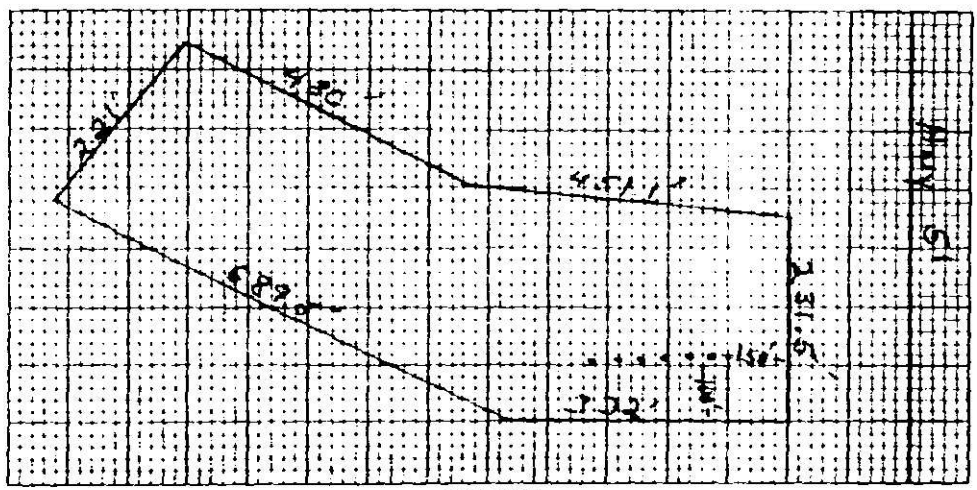
## PERCOLATION TEST REPORT

NAME OF OWNER Lee (LAST) William (FIRST) Dennis (MIDDLE)

ADDRESS OF OWNER Route 1, Box 606 ZIP 28212

LOCATION OF PROPERTY Blair Road - Hwy. 51 (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO.




PLOT PLAN

This is to certify that a percolation test has been run and an on-site inspection made by the Mecklenburg County Health Department on the lot described above. The said test was conducted on that portion of the lot as indicated on above plot

The percolation rate determined by the test was 60 min/in The said lot is approved for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption effluent discharge subject to the following terms and conditions

1. A permit to install, construct, alter, or repair the specific system shall be obtained from the Mecklenburg County Health Department prior to the beginning of any construction of buildings, or of the wastewater treatment system on the said lot
2. The size of the septic tank wastewater teratment system which must be installed will be determined by the Health Department prior to installation based on the percolation rate obtained above, and on the size and type of building constructed thereon
3. This approval is valid only if the system is installed in the immediate area where the percolation test was run.
4. This approval is void if any grading, filling, or construction (including the drilling of a well) is performed on the lot which, in the opinion of the Health Department, renders the area where the percolation test was run unsuitable for the installation, construction, alteration, and/or repair 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 State Board of Health and the Mecklenburg County Board of Health which were in effect on the date of issuance and is void if at any time in the future, prior to the 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.

John D. Robinson

Director, Environmental Health Division or Authorized Section Head

FORM NO E-2-4-1-71

HEALTH DEPARTMENTS COPY

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Date Received 8-10-73

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AUG 10 1973
ENVIRONMENTAL HEALTH DIVISION

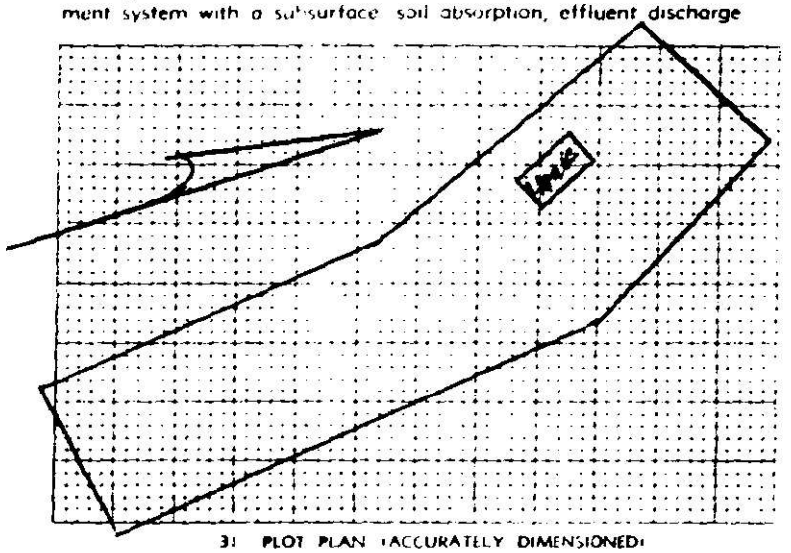
ICAR(S) Application No 6824
T C No
Map Date

# 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 Bedrooms 3
5) Income Use Multiple Family
Employer
6) Washing Machine ✓ Yes No
7) Garbage Disposal Yes ✓ No
8) Dishwasher Yes ✓ No
9) Water Supply
A) Individual Well ✓
B) Government
C) Community System
1) Well Source
2) Government
Sewage System
House Connection to Public Sewer Yes ✓ No
House Connection to Community Sewer Yes ✓ No
11) FHA Case No
12) VA Case No

13) NAME OF OWNER LEE, (LAST) WILLIAM (FIRST) DENNIS (MIDDLE)
14) ADDRESS OF OWNER RT 1 Box 606 CHARLOTTE, N.C. 28212
15) PHONE NO Home 545-4913 or 400 Office 366-5356
16) LOCATION OF SYSTEM BLAIR ROAD (STREET OR COUNTY ROAD) Hwy 51
17) SUBDIVISION ___ Lot No ___ Block No ___
Map Book No ___ Page No ___
18) DEED REFERENCE — DEED BOOK 3343 AT PAGE 400
19) HAS A PERCOLATION TEST BEEN RUN? YES NO DATE RUN
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

Aug 7, 1973
DATE OF APPLICATION

William D. Dennis Lee
OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued August 16, 1973

Serial No. 3290

LA No. 6824

T. C. No. 139-011-35

Map Date 2-23-72

# 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 Lee (LAST) William (FIRST) Dennis (MIDDLE)

ADDRESS OF OWNER Route 1, Box 606 ZIP 28212

LOCATION OF LOT Blair Road - Hwy. 51 (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 60 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 6824. 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

T. M. Reynolds
Environmentalist

John R. Atkinson
Director, Environmental Health Division or Authorized Section Head

FORM NO E 3-4 1-71

HEALTH DEPARTMENT'S COPY

Date Issued 18 Apr 74 Serial No. 5139 ICAR(S) Permit No 6824

T C No

Map Date

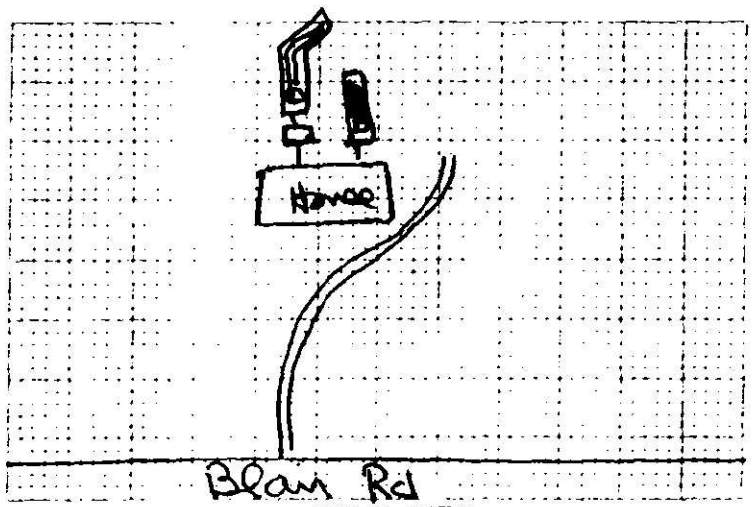
# MECKLENBURG COUNTY HEALTH DEPARTMENT

## 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 waste water treatment [illegible] with subsurface, soil absorption, effluent discharge as specified herein at the described location [illegible] permit is granted based upon the information supplied in application 6824 dated [illegible] and this permit shall be void and of no effect if the information provided in the application is not [illegible] previous. All work shall be completed on or before 18 May 74 after which date this permit shall be null and void




PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 1000 gal

Tank Construction Precast Concrete

Absorption and/or Nitrification Lines

Total Line Length 400' & 150'

Number of Lines

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Lee, William Dennis

LOCATION OF PROPERTY Blair Road

The [illegible] 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 7½'X50'
aeration pit 2½'X7'X4' stone

Division or Sector Head

R. M. Reynolds
Environmentalist

If this permit is for the installation or construction of a new system it must be signed by the division or a sector head of the Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required when an existing system is being altered or repaired

E-5-9-1-72

[illegible] DEPARTMENT'S COPY

Serial 4696

C of A (s) No. 6824

Date Issued 18 Apr 74

T C. No.

Map Date

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 Lee, William Dennis (LAST, FIRST, MIDDLE)

Location of Property Blair Road

Application Number 6824 Permit Number 6824

**Inspection Data:**

Liquid Capacity of Tank 1000 gal Tank Material Precast Concrete

Total Length of Drain Tile 400' & 950' Number of Lines (5) 12½' x 80'

Depth of Filter Material 17" Cover Depth 15"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 18 Apr 74 (DATE) Tank Inspected 18 Apr 74 (DATE)

Nitrification Field Inspected 18 Apr 74 (DATE)

Washing Machine Line Inspected, If Applicable 18 Apr 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: aeration pit O.K.

R. M. Reynolds
Environmentalist

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

HEALTH DEPARTMENT'S COPY