Date Received [illegible] RECEIVED JAN 1 [illegible]

APT No. 14467

T. C. No. 001-111-56

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Wooten (LAST) Woodrow (FIRST) Bert (MIDDLE)

2) ADDRESS OF OWNER 20444 Island Forest Dr ZIP 28036

3) PHONE NO Home 892-5972 Office 376-3410 Davidson NC

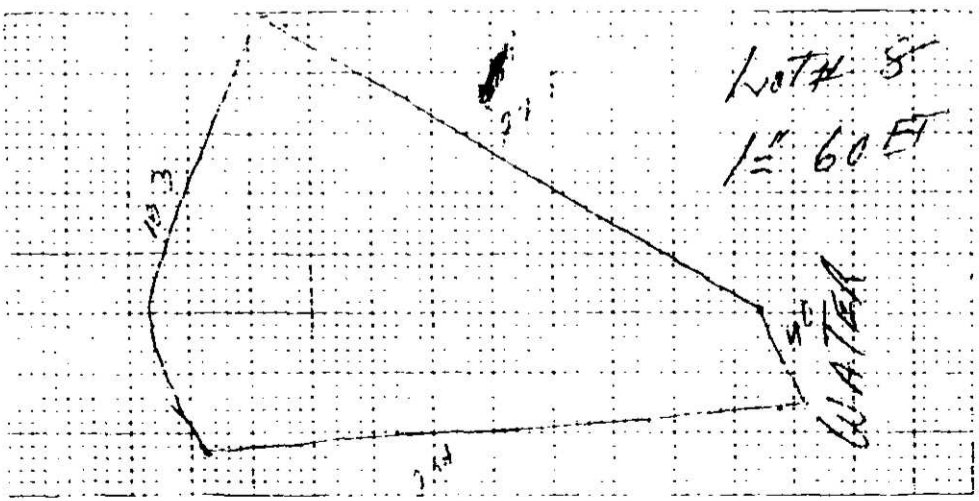
4) LOCATION OF PROPERTY Bethel Church Rd (STREET OR COUNTY ROAD) Oak River Rd

5) SUBDIVISION Haven View LOT NO 8 BLOCK NO. _____

MAP BOOK NO _____ PAGE NO _____

6) DEED REFERENCE DEED BOOK _____ PAGE NO _____

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of [illegible] and inspection of the property described for the purpose of determining if the site is suitable for the installation of a septic tank wastewater treatment system with [illegible] effluent [illegible]



7) ADDITIONAL PLAN OR DIMENSIONS

Woodrow Bert Wooten
OWNER

Environmental Health Department's Copy

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

APPENDIX H
SITE EVALUATION

APT 14467
PO 001-111-56
LOT #E

(Ground Absorption Sewage Disposal)

OWNER: Woodrow B Wilson
ADDRESS: [redacted] 20444 Island Forest Dr.
COUNTY:
LOCATION OF SITE: Bethel Church Rd.

DATE REQUESTED:
PLAT NO.:
LOT SIZE: 25,230

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S 2 to 6 PS U	S complex slopes PS U	S 2 to 6 PS U	S PS U +
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S PS clay U	S PS clay U	S PS clay U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S PS Blocky U	S PS Blocky U	S PS Blocky U	S PS U
4. SOIL DEPTH (In.)	S 48" PS U	S Depth variable PS U	S 48" PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Improvious Strata, Rock)	S None PS U	S None PS U	S None PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	S Slight PS Moderate U Wetness	S Good PS Some U Wetness	S Drainage PS Very U Poor	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S Moderate PS U	S Moderate PS U	S Slow PS U	S PS U
8. OTHER (Specify)	S Some PS Slight U Poor	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	Suitable with limitations	Suitable with limitations	Unsuitable	
SOIL SERIES	Cor. I	Complex slope Ala	Dor. variant	

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: Depends on how well-drained soil is. Lot section may be required

Described By: W. Glenn Whitley

Title: Soil Scientist Date: 1-16-79

DHS Form 2601 (2/77)
Sanitation

Serial No. 2477

PTR No. 14467

T C No. po 001-111-56

Date Issued January 16, 1979

Map Date

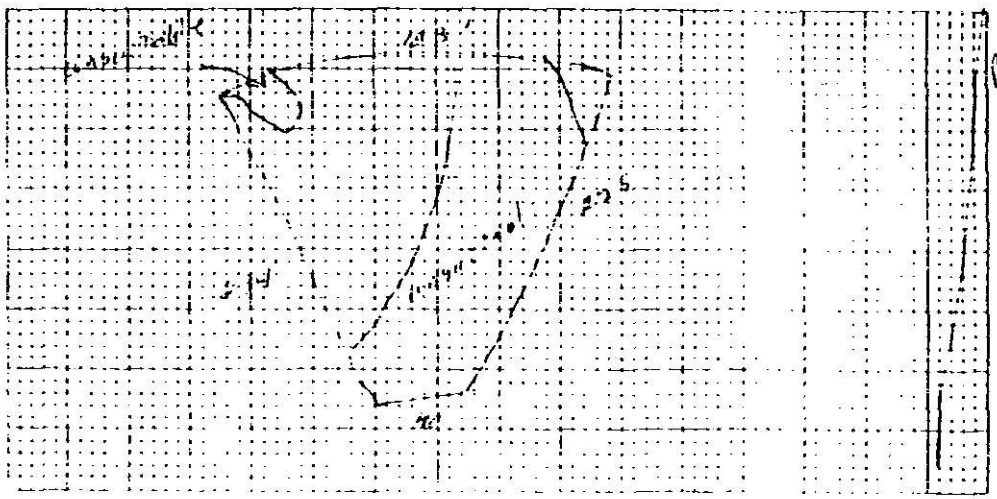
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Wooten, Woodrow
LAST FIRST MIDDLE

ADDRESS OF OWNER 20444 Island Forest Dr. ZIP

LOCATION OF PROPERTY off: Bethel Church Road
STREET OR COUNTY ROAD

SUBDIVISION LOT NO #8 BLOCK NO



PLOT PLAN

Provisionally Suitable

Soil Scientist

John R. Atkinson
Health Director
Authorized Sanitarian Head

Date Received 5-13-83

RECEIVED MAY 13 1983 ENVIRONMENTAL HEALTH

ICAR(S) Application No. 14467

T. C. No. 001-111-63

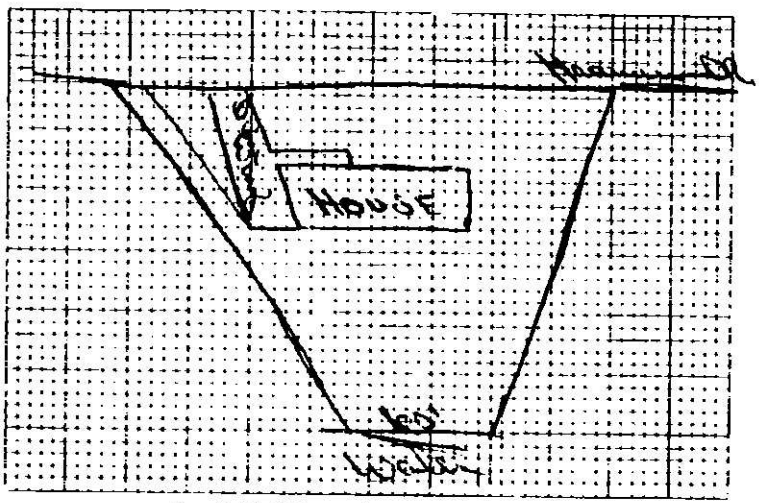
Map Date

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 on 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 RMS 9-6-83
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 SMITH (LAST) RANDY (FIRST) MC GIRT (MIDDLE)

14) ADDRESS OF OWNER 202 Carrington St Box 176 28031

15) PHONE NO Home 892-3047 Office 372-2780

16) LOCATION OF SYSTEM Lot #8 Hawthorne DR (STREET OR COUNTY ROAD)

17) SUBDIVISION Hawthorne DR Lot No #8 Block No.

Map Book No. Page No.

18) DEED REFERENCE - DEED BOOK AT PAGE

19) HAS A SOIL INVESTIGATION BEEN RUN? Yes YES NO DATE RUN 1-16-1979

20) PTR NUMBER (See instructions) 14467

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.

5-13-83
DATE OF APPLICATION

Randy M Smith
OWNER

EHD-S 76

DEPARTMENT'S COPY

AI 6-6-83

Serial No. 6432

SIR No. 14467

Date Issued 5-13-83

T. C. No. 001-111-63

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 Smith, (LAST) Randy (FIRST) McGirt (MIDDLE)

ADDRESS OF OWNER 202 Cornelius St., Box 176, Cornelius, NC ZIP 28031

LOCATION OF LOT 20407 Havenview Drive (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 8 BLOCK NO

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 14467 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 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

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD 5-76

Environmental Health Department's Copy

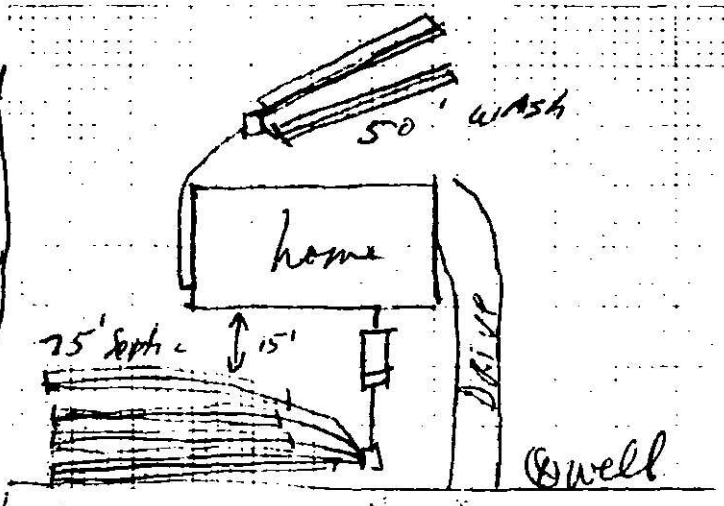
Date Issued 9-6-83 Serial No. 6570 ICAR(S) Permit No. 14467

T C No 001-111-63

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 granted ✓ 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 14467, dated 5-13-83 and this permit shall be void and of no effect if the information provided in the application is not correct. All work shall be commenced on or before 10-6-83, after which date this permit shall be null and void



P.S.
1500 gal
p/c Concrete
300' +100'
4 + 2
15'
10'
50'
not in yet

Haven View

OWNER'S NAME Randy M. Smith

LOCATION OF PROPERTY 2407 Haven View Dr

This system is approved in accordance with the Regulations governing Individual Water Supply and Sewage Disposal Systems in Mecklenburg County, North Carolina. The granting of this permit does not relieve the owner of the responsibility for securing required permits or from complying with any law, ordinance or regulation affecting the installation. This permit does not guarantee that the system will operate properly. It is the responsibility of the property owner to maintain the system in proper working condition. Failure to do so may result in the premature failure of the system.

Septic - 4 - 75' x 3' x 12" stone (15' from basement)

Comments Wash - 2 - 50' x 3' x 12" Stone

Sanitarian's Signature Environmentalist

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

EHDS 76

BT 10-19-83
C of A (s) No. 14467

Date Issued 10-17-83 **Serial** 6181 T C. No. 001-111-65

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF COMPLETION
CERTIFICATE OF APPROVAL

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

Name of Owner Smith (LAST) Randy (FIRST) M (MIDDLE)

Location of Property 20407 Havenview D1

Application Number 14467 Permit Number 14467

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material P/C Concrete

Total Length of Drain Tile 300' + 100' Number of Lines 4 + 2

Depth of Filter Material 12" Cover Depth 2'-4'

Water Supply Source well Distance from Water Source 50'+ not in yet

Excavation Inspected ——— (DATE) Tank Inspected 10-17-83 (DATE)

Nitrification Field Inspected 10-17-83 (DATE)

Washing Machine Line Inspected If Applicable 10-17-83 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface soil absorption of effluent discharge as described above and it has been ✓ installed / not installed in accordance with the permit issued and the regulations of the Mecklenburg County Health Commissioner in effect at 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 'permits' in addition to those listed below under comment. 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: ———

R P Rodgers
Environmentalist

EHD 5-76