6

Date Received 10-23-73

MECK COUNTY HEALTH DEPT.
RECEIVED
OCT 23 1973
ENVIRONMENTAL HEALTH DIVISION

APT No. 7172

T. C. No. _____

Map Date _____

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER [illegible] (LAST FIRST MIDDLE)

2) ADDRESS OF OWNER [illegible] ZIP _____

3) PHONE NO. Home _____ Office _____

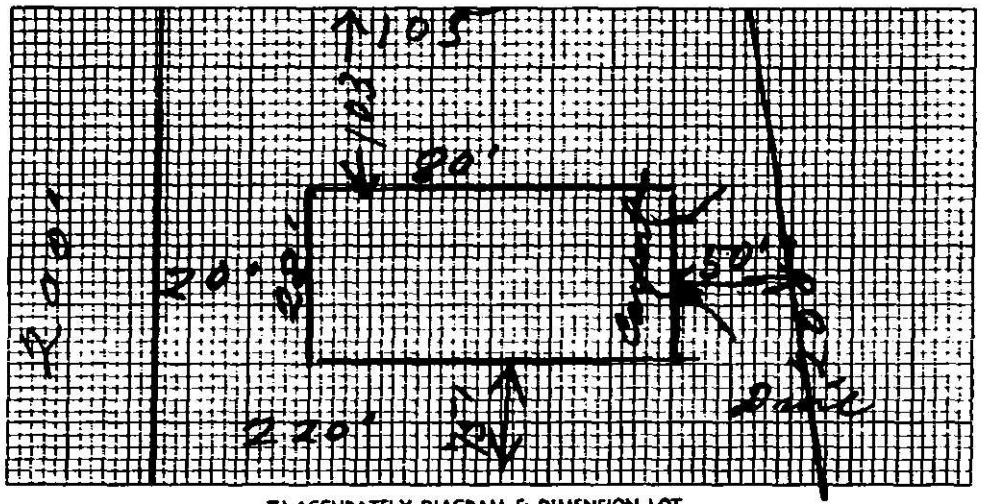
4) LOCATION OF PROPERTY [illegible] (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. 4 BLOCK NO. 8

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 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

[signature] OWNER

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

HEALTH DEPARTMENT'S COPY

MECKLENBURG COUNTY HEALTH DEPARTMENT
INTER-OFFICE COMMUNICATION

DATE: March 8, 1974

TO: Luther Bridgeman
Environmentalist

FROM: W. Everette Lynn, Jr. WEL
Soil Scientist

SUBJECT: APT #7172 (F. Erskine)
Lot No. 4-B, Gum Branch Road
3-7-74

Soils were found to be intergradient between the Helena and Appling series. These soils show indications of containing a small amount of swelling clay minerals. This soil characteristic results in limited permeability and percolation rate (mean percolation rate of 90-120 min./in.).

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

WEL:jdg

MECKLENBURG COUNTY
Department of Public Health
1200 Blythe Boulevard
Charlotte, North Carolina 28203

Telephone 374-2113

Date Issued
1. 2-28-74
2. 3-8-74
3. _____

SDR No. 7172
T.C. No. 031-067-12

SITE DISAPPROVAL REPORT
INDIVIDUAL SEPTIC TANK SYSTEM WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Foard, Erskine

ADDRESS OF OWNER 5503 Northstream Drive ZIP _____

LOCATION OF LOT Gum Branch Road, Lot 4-8

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
X	1.	2-27-74	300+ min/in
X	2.	3-5-74	86 min/in
____	3.	_____	_____ min/in

ON SITE INSPECTION REVEALED LOT TO BE UNSUITABLE FOR THE FOLLOWING REASON(S) 3-7-74 - Soils were found to be intergradient between the Helena and Appling series. These soils show indications of containing a small amount of swelling clay minerals. This soil characteristic results in limited permeability and percolation rate (mean percolation rate of 90-120 min./in.).

W. Everette Eppes, Jr. _____
Soil Scientist Environmentalist

(Stencil No.)
HSD 398
8/70

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

REAL ESTATE BOOK PAGE

3080 0653

Drawn By:

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

APT #7172

SEPTIC TANK AGREEMENT

Date March 13, 1974

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

Lot 4, Block B, of Coulwood Subdivision, 36
as recorded in Map Book _____, Page _____, of
the Mecklenburg County Registry (tax code Number 031-067-12)

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 of 90 minutes per inch

MECK COUNTY HEALTH DEPT.
RECEIVED
APR 2 1974
ENVIRONMENTAL HEALTH DIVISION

RECORDED
FOR
REGISTRATION
1974 Mar 13 PM 1 19
CHARLES E. CRUMPLER
REG. OF DEEDS
MECKLENBURG CO. N.C.

Owner Herbert Erskine Foard

Attested _____

State of North Carolina
County of Mecklenburg

I, James C. Nuse, Jr. a notary public in and for the said County and State, do hereby certify that Herbert Erskine Foard personally appeared before me this day and ~~being duly sworn, certified that~~ ~~in his presence~~ he signed the foregoing instrument.

James C. Nuse, Jr.
Notary Public

My commission expires 6-29-77

EHD 506
11/16/73

Note: Herbert Erskine Foard, 5509-2 Northstream Dr., Charlotte, N.C. 28205

REAL ESTATE BOOK PAGE

3660 0654

State of North Carolina, County of Mecklenburg
The foregoing certificate(s) of James A. Muse, Jr.

a Notary(~~Public~~) Public of said County and State
is ~~are~~ certified to be correct. This 19 day of March 19 74
Charles E. Crowder, Register of Deeds. By: Mary C. Rue
DEPUTY

Date Received 10 23 73

RECEIVED
OCT 23 1973
MECK COUNTY HEALTH DEPT.
ENVIRONMENTAL HEALTH DIVISION

ICAR(S) Application No 7172

T C No

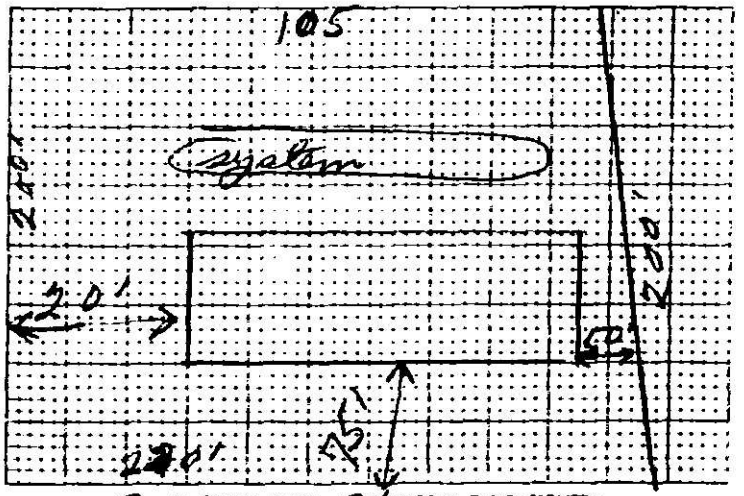
Map Date

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) 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 Private
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 _____

Cumberland Rd

13) NAME OF OWNER Foard Eudie
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 5607 N. Tryon St

15) PHONE NO. Home _____ Office _____

16) LOCATION OF SYSTEM Yarmouth Dr
STREET OR COUNTY ROAD

17) SUBDIVISION _____ Lot No. 4 Block No. B

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

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.

10-23-73
DATE OF APPLICATION

Eudie Foard
OWNER

FORM NO E-4-8-1-72

HEALTH DEPARTMENT'S COPY

Date Issued April 3, 1974

Serial No. 3953

LA No. 7172

T. C. No. 031-067-12

IMPROVEMENTS PERMIT

Map Date _____

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 Foard (LAST) Erskine (FIRST) _____ (MIDDLE)

ADDRESS OF OWNER 5509 Northstream Drive ZIP _____

LOCATION OF LOT Gum Branch Road (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. 4 BLOCK NO. 8

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 90*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 7172. 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 and recorded March 13, 1974, recorded in book 3660 at page 0653.

L. R. Williamson
Environmentalist

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

FORM NO. E-3-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 5784 ICAR (S) · Permit No. 7172

Date Issued 1 Oct 74

T. C. No. 031-067-17

Map Date 8204-22

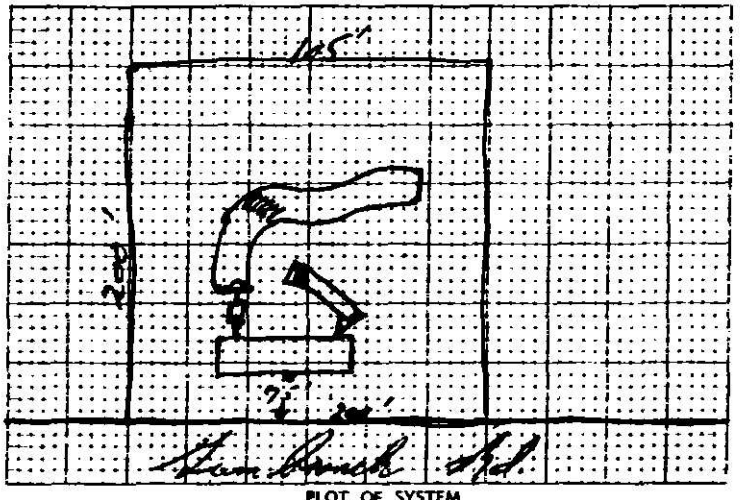
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 7172, dated 23 Aug 74 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 1 Jan 74, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 86 *

Liquid Capacity of Tank 1500

Tank Construction PC

Absorption and/or Nitrification Lines

Total Line Lenght 750' + 175' (4" CM" x 24" x 17")

Number of Lines 6 (15' x 125' x 17")

Distance from House 40'

Distance from Property Line 10'

Distance from Well City

NAME OF OWNER Foard, Earlie

LOCATION OF PROPERTY 608 Hunsucker Road (Lot 4-B)

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: K. Robinson (Contr)

* Agreement signed & entered by owner.

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.

Rev. 1-1 E-S-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 5357

C of A (s) No. 7172

Date Issued 9 Oct 74

T. C. No. 031-067-17

Map Date 22 Apr 73

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 Ford, Erskine
LAST FIRST MIDDLE

Location of Property 608 Seaboard Road (Tract 4-A)

Application Number 7172 Permit Number 7172

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PE-4 (6" x 44' x 1)

Total Length of Drain Tile 230' + 175' long Number of Lines 6 (15' x 125' x 12")

Depth of Filter Material 17" Cover Depth 18-24"

Water Supply Source City Distance from Water Source —

Excavation Inspected 9 Oct 74 DATE Tank Inspected 9 Oct 74 DATE

Nitrification Field Inspected 9 Oct 74 DATE

Washing Machine Line Inspected, If Applicable 9 Oct 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: R. Subdivision (Contr.)

Note: Agreement signed & notarized by owner.

Environmentalist

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

HEALTH DEPARTMENT'S COPY