Date Received 9-21-78

MECK COUNTY DEPARTMENT OF
RECEIVED
SEP 21 1978
ENVIRONMENTAL HEALTH

APT No. 14565 1
T. C. No. P.D. 013-062-05
Map Date 5-23-78

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER J. L. Lewis Lewis (LAST FIRST MIDDLE)

2) ADDRESS OF OWNER Rt 9, Box 248, Charlotte N.C. ZIP 28208

3) PHONE NO Home _____ Office 399-2273

4) LOCATION OF PROPERTY Jim Kidd Rd. (STREET OR COUNTY ROAD)

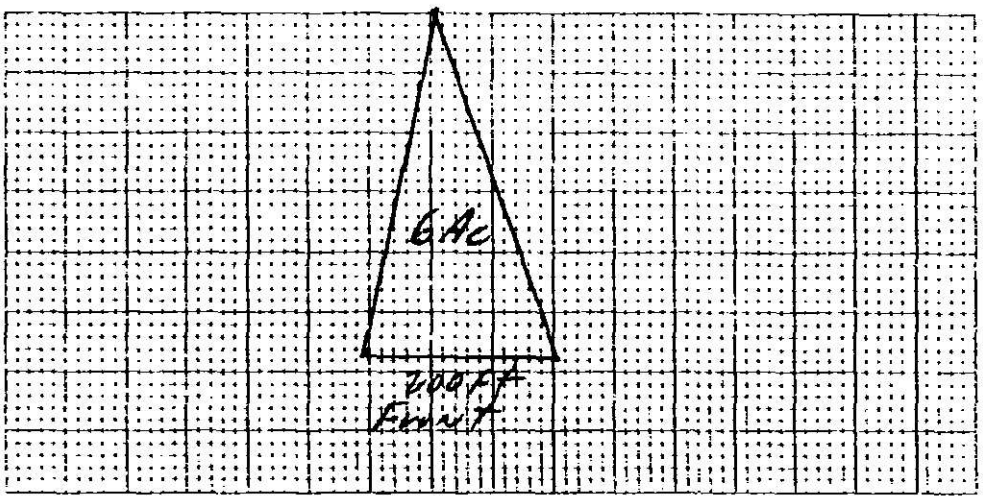
5) SUBDIVISION None LOT NO _____ BLOCK NO _____

MAP BOOK NO _____ PAGE NO _____

6) DEED REFERENCE DEED BOOK _____ PAGE NO _____

Taf No. 013-062-05

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

Bradshaw Realty Co.
OWNER Agents for owner

FORM NO E-1-9-1-72

HEALTH DEPARTMENT'S COPY

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

APPENDIX H
SITE EVALUATION

(Ground Absorption Sewage Disposal)

APT IN 565
PO 013- 002-05

OWNER: J. L. Lawing Heirs
ADDRESS: R.F.D. Box 248
COUNTY: Charlotte, N.C.
LOCATION OF SITE: Jim Hill Rd

DATE REQUESTED:
PLAT NO.:
LOT SIZE: 22,500

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS 2-8% U	S PS U	S PS U	S PS U +
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S (PS) clay U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S (PS) Blocky U	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	(S) 48" PS U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Imprevious Strata, Rock)	(S) None PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) 76-70 PS ground U water	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) Moderate U	S PS U	S PS U	S PS U
8. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	✓ Provisionally Suitable			
SOIL SERIES	Cecil			

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:

Described By: William A. Martin

Title: Soil Scientist Date: 10-19-78

DHS Form 2601 (2/77)
Sanitation

Serial No. 2274

PTR No. 14565

Date Issued 10/24/78

T C No. P.O. 013-062-05

Map Dat6-23-78

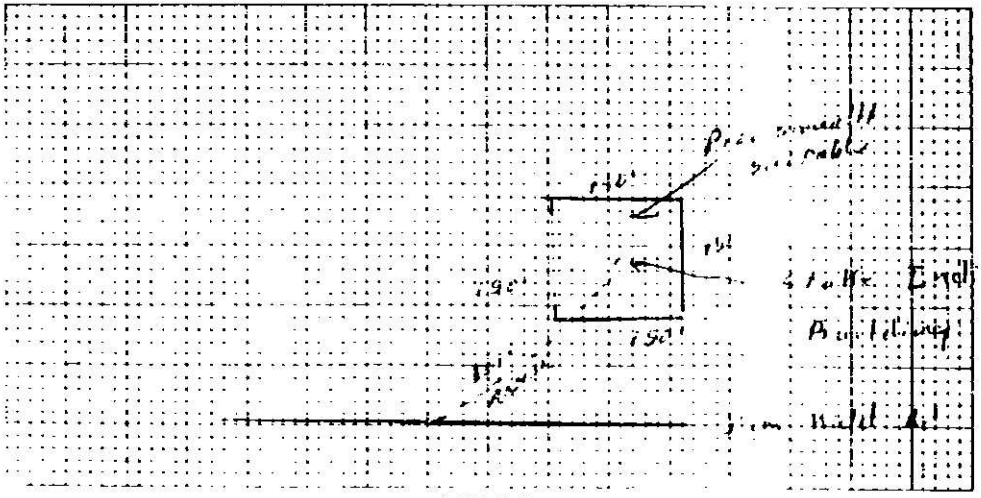
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER J. L. Lawing, Heirs
LAST FIRST MIDDLE

ADDRESS OF OWNER Route 9, Box 248, Charlotte, N. C. ZIP 28208

LOCATION OF PROPERTY Jim Kidd Road
STREET OR COUNTY ROAD

SUBDIVISION LOT NO BLOCK NO



PLOT PLAN

Mecklenburg County
conducted

PROVISIONALLY SUITABLE

said lot is approved
subsurface, soil ob-

County Depart
wastewater treatment
the Mecklenburg
above and on
new installation
the subject lot
regulations
and the Mecklen
at any time
are changed such that
the new regulations
be in effect
on the above date

Soil Scientist

Environmental Health Supervisor
Assistant Section Head

Date Received 3/12/79

SEE INSTRUCTIONS ON BACK

ICAR(S) Application No. 14565

T. C. No. 93-36205

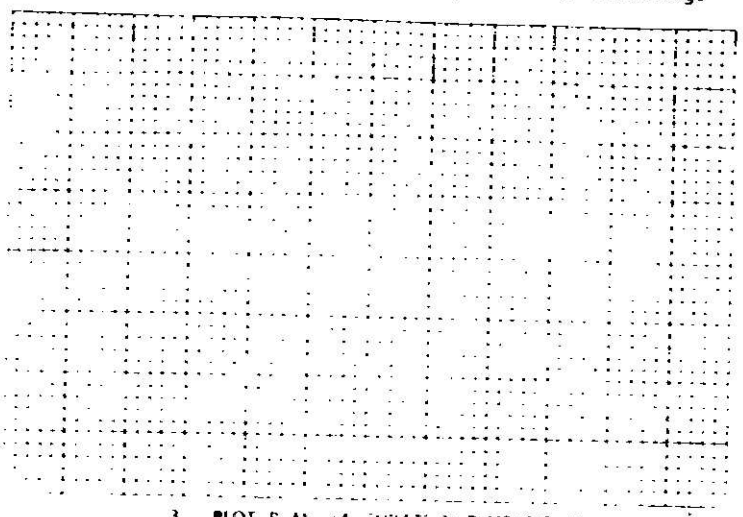
Map Date 5-25-78

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 an individual septic tank wastewater treatment system with a subsurface soil absorption effluent discharge



3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ___Yes ✓No
Rental ✓Yes ___No
4) No. of Bedrooms 3
5) Business Use Number of Employees ___
6) Washing Machine ✓Yes ___No
7) Garbage Disposal ✓Yes ___No
8) Dishwasher ✓Yes ___No
9) Water Supply ✓

12) NAME OF OWNER Talley Norman Jr. & Nussell

13) ADDRESS OF OWNER 1216 Interstate Ave

14) PHONE NO. Home 399-0354 Office 394-6183

15) LOCATION OF SYSTEM Jim Kidd Rd. (County)
STREET OR COUNTY ROAD

16) SUBDIVISION ___ Lot No. ___ Block No. ___

Map Book No. ___ Page No. ___

17) DEED REFERENCE DEED BOOK ___ AT PAGE ___

18) TAX PARCEL NUMBER ___ 19) FAIR MARKET VALUE $ ___

20) ESTIMATED COST OF SYSTEM $ 1,425.00

The undersigned person hereby agrees that he has read the foregoing application and that the contents thereof are true. He understands that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

March 12 1979
DATE OF APPLICATION

Talley F. Talley
OWNER

Environmental Health Department's Copy

Serial No. 2751

LA No. 14565

Date Issued March 12, 1979

T. C. No. po 013-062-05

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 Talley, (LAST) Norman (FIRST) & Nancy (MIDDLE)

ADDRESS OF OWNER 1216 Interurban Avenue ZIP

LOCATION OF LOT Jim Kidd Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO. 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 14565 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 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 system is not being installed, constructed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit

M. Edwards
Environmentalist

John W. Hasson
Environmental Health Director or Authorized Section Head

LHD S 76

Environmental Health Department's Copy

R

Date Issued 6-10-79

Serial 3101

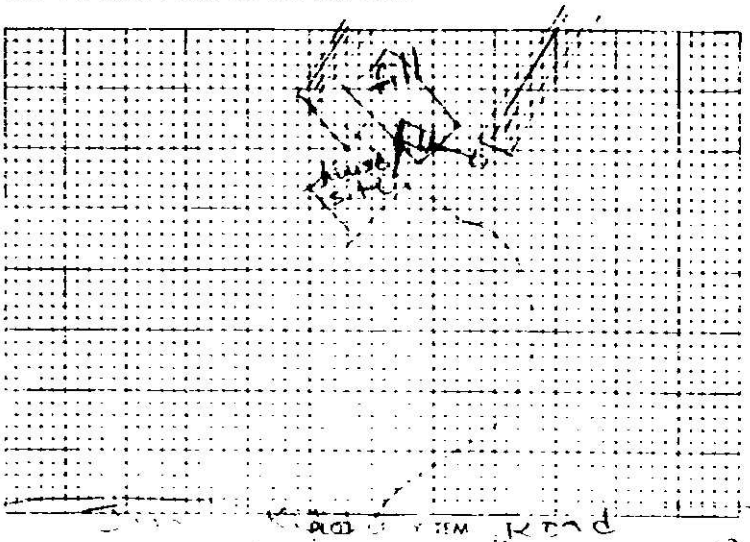
ICAR(S) Permit No. 14565

T. C. No. 013-062-08

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 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 14565, dated 3-12-79 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 11-10-79, after which date this permit shall be null and void.



Permeability Rate ps

Liquid Capacity of Tank 1500 gallons

Tank Construction precast concrete

Absorption Area Nitrification Lines

Total Line Length 495' + 125'

Number of Lines 5 + 3

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Herman Russell

LOCATION OF PROPERTY 5520 Jim Kidd Road

The system shall meet all of the requirements as set forth in the Regulations of the Mecklenburg County Health Commission which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Environmental Health Director before any system can be covered up or otherwise rendered inoperable or can be used. The issuance of this permit does not in any way guarantee that the system constructed to be covered 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.

Stay 5' from ...

THE ISSUANCE OF THIS PERMIT DOES NOT IN ANY WAY GUARANTEE THAT THE SYSTEM CONSTRUCTED OR ALTERED UNDER THIS PERMIT 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 Michael A. Jetton

* 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-5-74

Copy

Date Issued 9-19-79 Serial 3021

C of A (s) No. 14565

T C No. 013-062-08

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 Talley (LAST) Norman (FIRST) Russell (MIDDLE)

Location of Property 6520 Jim Kidd Road

Application Number 14565 Permit Number 14565

Inspection Data:

Liquid Capacity of Tank 1500 gals Tank Material p/c conc.

Total Length of Drain Tile 475+125' Number of Lines 5+4

Depth of Filter Material 7" Cover Depth 7"

Water Supply Source well Distance from Water Source >100'

Excavation Inspected — Tank Inspected 9-19-79 (DATE)

Nitrification Field Inspected 9-19-79 (DATE)

Washing Machine Line Inspected If Applicable 9-19-79 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been ✓ installed / constructed, altered or repaired in accordance 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, 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

Michael R. Jarkon
Environmentalist

EHD 5-76

Environmental Health Department's Copy