

15342 AUGUST LN

13934133

6/27/08

marliwr

Groundwater and Wastewater Services File Imaging Project
May 2007
Barcode Font = IDAutomationHC39M

Mecklenburg County
Health Department

Note Tax map no. change WAM 4-13-00

November 17, 1995

Mr. Raymond T. Carlton
7500 Sheffingdell Drive
Charlotte, NC 28226

Re: 15342 August Lane
File: 12193
Parcel: ~~139-129-20~~ 139-341-33

Dear Mr. Carlton:

Receipt of your Application for Improvement Permit for the above referenced property is acknowledged. A soil evaluation and a site visit have been conducted. The results of the evaluation indicated that the site is **UNSUITABLE** under Rules .1942 **SOIL WETNESS CONDITIONS**, .1943(a) **SOIL DEPTH**, and .1941(a)(3)(b) **SOIL CHARACTERISTICS (MORPHOLOGY)**. For these reasons your Application for Improvement Permit is denied. A possible way to develop the site exists under Rule .1948(d) which reads as follows:

> A site classified as **UNSUITABLE** may be used for a ground absorption sewage treatment and disposal system specifically identified in Rules .1955, .1956, or .1957 of this Section or a system approved under Rule .1969 if written documentation, including engineering, hydrogeologic, geologic or soil studies, indicates to the local Health Department that the proposed system can be expected to function satisfactorily. Such sites shall be reclassified as **PROVISIONALLY SUITABLE** if the local health department determines that the substantiating data indicated that:
> (1) a ground absorption system can be installed so that the effluent will be non-pathogenic, non-infectious, non-toxic, and non-hazardous;
> (2) the effluent will not contaminate groundwater or surface water, and
> (3) the effluent will not be exposed on the ground surface or be discharged to the surface waters where it could come in contact with people, animals, or vectors.

The state shall review the substantiating data if requested by the local health department.

Please be advised that you have the right to an informal review by this department. You also have the right to appeal under G.S. 130A-24, and to have the appeal held in Mecklenburg County.

If you have any questions regarding this matter please do not hesitate to call me at 336-5575.

Sincerely,

Kelly Randall, R.S., Soil Scientist
Individual Water and Wastewater Systems

KR:gf

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Fil 12193

Page #1 Sheet ___ of ___
PROPERTY ID #: ___
COUNTY: ___

SOIL/SITE EVALUATION #3 *for* ON-SITE WASTEWATER SYSTEM

139-129-20
Lots 138, 139

OWNER: Raymond Carlton
APPLICANT: Guy Hucks
ADDRESS: 7500 Sheffield Dr. Chas.
APPLICATION DATE: 10-12-95
DATE EVALUATED: 11-6-95
PROPOSED FACILITY: Residential
PROPOSED DESIGN FLOW (.1949): 360
PROPERTY SIZE: .8
LOCATION OF SITE: 15342 August Lane
PROPERTY RECORDED: ___
WATER SUPPLY: ☑ Private ☐ Public ☐ Well ☐ Spring ☐ Other ___
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTA
1	LS 15%	0-2"	sl / gr	Fr/SExP/NS/NP	No chroma 2 observed To 26"	26"	N/A	None	US
		2-8"	scl / sBK	SExP/Fr/SS/SP					
		8-26"	sc / sBK/ABK	ExP/Fi/VS/VP					
2	LS 9%	0-5"	scl / sBK	Fr-Fi/ExP/SP	10YR6/1 @ 4"	24"	N/A	None	US
		5-24"	sc / sBK/ABK	Fi/ExP/VS/VP					
3	LS 9%	0-9"	sl / gr-sBK	Fr/SExP/VS/NP	2.5Y6/2 @ 8"	28"	N/A	None	US
		9-15"	scl / sBK	Fr-Fi SExP/SP					
		15-28"	sc / sBK/ABK	ExP/Fi/VS/VP					
4	LS 12%	0-8"	sl / gr	SExP/ Fr NS/NP	No Chroma 2 observed To 21"	21"	N/A	None	US
		8-21"	sc / sBK-ABK	ExP/Fi/SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): US
EVALUATED BY: W. A. Marlin
OTHER(S) PRESENT: ___

COMMENTS:

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL 1955 LTAR	LPP 1957 LTAR	MINERALOGY/ CONSISTENCE	STRUCTURE
C (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive)	G (Single Grain)
V (Convex Slope)		LS (Loamy Sand)			SEXP (Slightly Expansive)	M (Massive)
(Drainage Way)					EXP (Expansive)	CR (Crumb)
S (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
P (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
S (Foot Slope)						ABK (Angular Blocky)
(Head Slope)	III	SI (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
(Linear Slope)		SICL (Silty Clay Loam)				PR (Prismatic)
(Nose Slope)		CL (Clay Loam)			MOIST	WET
(Ridge)		SCL (Sandy Clay Loam)				
(Shoulder Slope)		SLC (Silt Loam Clay)			VFR (Very Friable)	NS (Non-sticky)
(Terrace)					FR (Friable)	SS (Slightly Sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FI (Firm)	S (Sticky)
		SIC (Silty Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None		EFI (Extremely Firm)	NP (Non-plastic)
						SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

OTES

ORIZON DEPTH	In inches below natural soil surface
EPTH OF FILL	In inches from land surface
ESTRICTIVE HORIZON	Thickness and depth from land surface
APROLITE	S(suitable) or U(unsuitable)
OIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
LASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

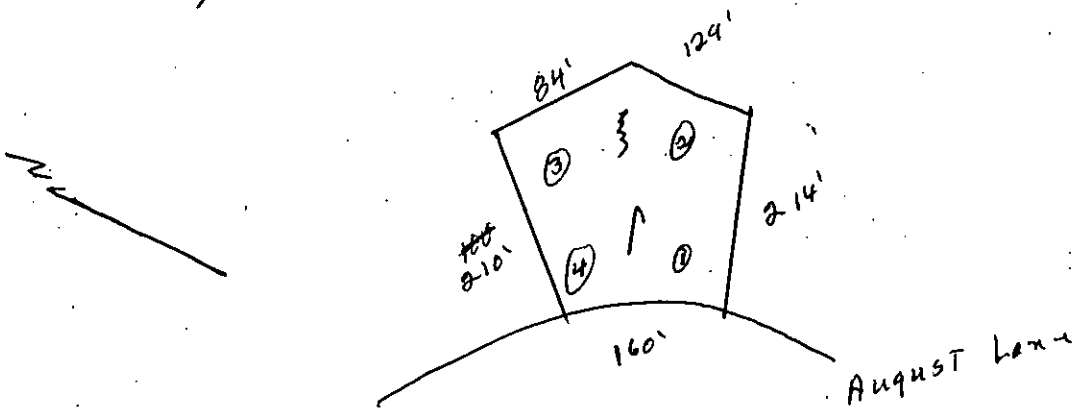
valuation of saprolite shall be by pits.
ong-term Acceptance Rate (LTAR): gal/day/ft².

Show profile locations and other site features (dimensions, reference or benchmark, and North).

(1) Boring Sites

~~~ Complex slope

→ general slope direction


~~~

FEE: 100.00

DATE: 10/12/95

Ck# 1171

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR IMPROVEMENT PERMIT FOR RESIDENTIAL SITE

[ ] CRT

TYPE APPLICATION: [X] NEW SYSTEM [ ] EXPANSION OF EXISTING SYSTEM [ ] REPAIR OF EXISTING SYSTEM

NORTH CAROLINA
DEPARTMENT OF ENVIRONMENT,
HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

FILE #: 12193

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 139-129-20

STREET ADDRESS: 15342 August Lane

SUBDIVISION OR MOBILE HOME PARK NAME: Arlington Forest

LOT NUMBER: 138&139

TYPE OF BUILDING, (CHECK ONE)

[ ] SINGLE MOBILE HOME(S) [ ] MODULAR HOME (M)
[ ] DOUBLE WIDE (D) [ ] MULTIPLE FAMILY (U)
[X] HOUSE (H) [ ] OTHER (O)

TOWNSHIP (CHECK ONE):

[X] 0 MECKLENBURG [ ] 4 PINEVILLE
[ ] 1 CHARLOTTE [ ] 5 MATTHEWS
[ ] 2 DAVIDSON [ ] 6 HUNTERSVILLE
[ ] 3 CORNELIUS [ ] 7 MINT HILL

HEATED SQUARE FOOTAGE: 1380

NUMBER OF BEDROOMS: 3 NUMBER OF OCCUPANTS: 4

FOUNDATION FOR RESIDENCE:

[ ] WITHOUT BASEMENT
[ ] ON SLAB
[X] CRAWL SPACE
[ ] WITH BASEMENT /PLUMBING
[ ] WITH BASEMENT /NO PLUMBING

IF EXPANSION OF EXISTING SYSTEM, DESCRIBE THE PROPOSED ADDITION:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE: [ ] YES [X] NO TYPE: _____

WATER SUPPLY (CHECK ONE):

[ ] COMMUNITY (C) [ ] MUNICIPAL (M) [X] PRIVATE WELL (P)
[ ] SHARED WELL (S) [ ] OTHER 'SPRINGS' (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED CABLES, LANDFILLS, STUMPHOLES [ ] YES [X] NO
EXISTING WASTE WATER SYSTEMS [ ] YES [X] NO
EASEMENTS OR RIGHT-OF-WAYS [ ] YES [ ] NO
WELL SPRINGS OR WATERLINES [ ] YES [X] NO
DESIGNATED WETLANDS [ ] YES [X] NO

PROPERTY OWNER:

NAME: (LAST) ~~Hucks~~ Carlton (FIRST) ~~Guy~~ Raymon (MI) ~~R~~ I

ADDRESS: ~~PO Box 7500 Sheffield Dr~~ 15342 August Lane

CITY: Charlotte STATE: NC ZIP: ~~28207~~ 28278

DAYTIME PHONE: ~~704~~ 455 - ~~1721~~

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: (LAST) Hucks (FIRST) Guy (MI) R

DAYTIME PHONE: 704) 455 - 1721

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? _____

THE UNDERSIGNED, OWNER, OR LEGAL AGENT FOR THE OWNER, OF THE PROPERTY DESCRIBED ABOVE AS THE "JOB LOCATION" HAS READ THE FOREGOING APPLICATION, ACKNOWLEDGES THAT THE CONTENTS OF SAME ARE TRUE, AND AUTHORIZES AGENTS OF THE MECKLENBURG COUNTY HEALTH DEPARTMENT TO ENTER ONTO THE PROPERTY FOR THE PURPOSE OF PROCESSING THIS REQUEST.

SIGNED: Sheri Hucks

DATE: 10-12-95

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202., (704) 336-5102

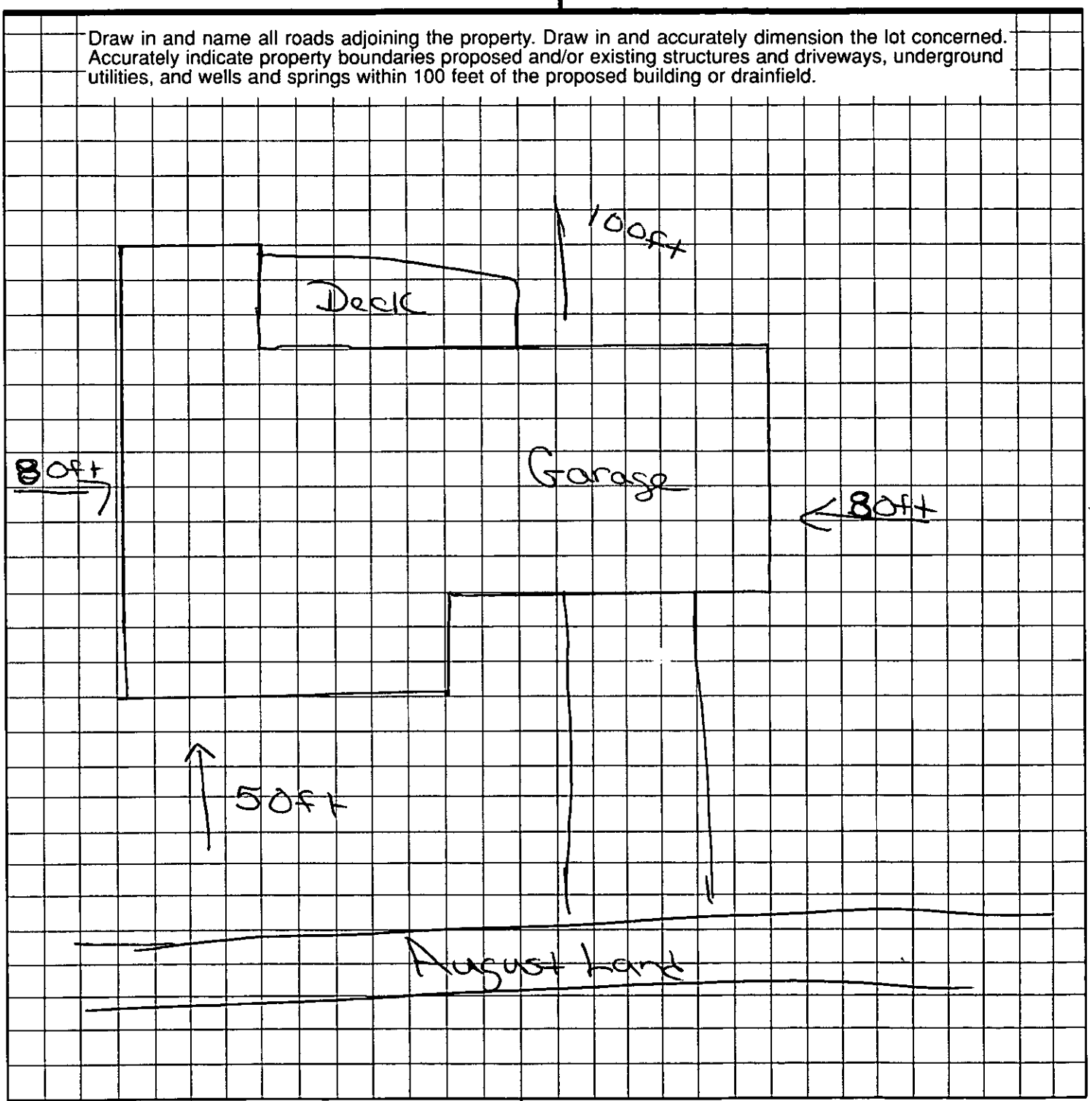
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 12193

TC: _____

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Sheri Hucks
OWNER/AGENT SIGNATURE

DATE 10-12-95

APPROVAL DATE _____

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

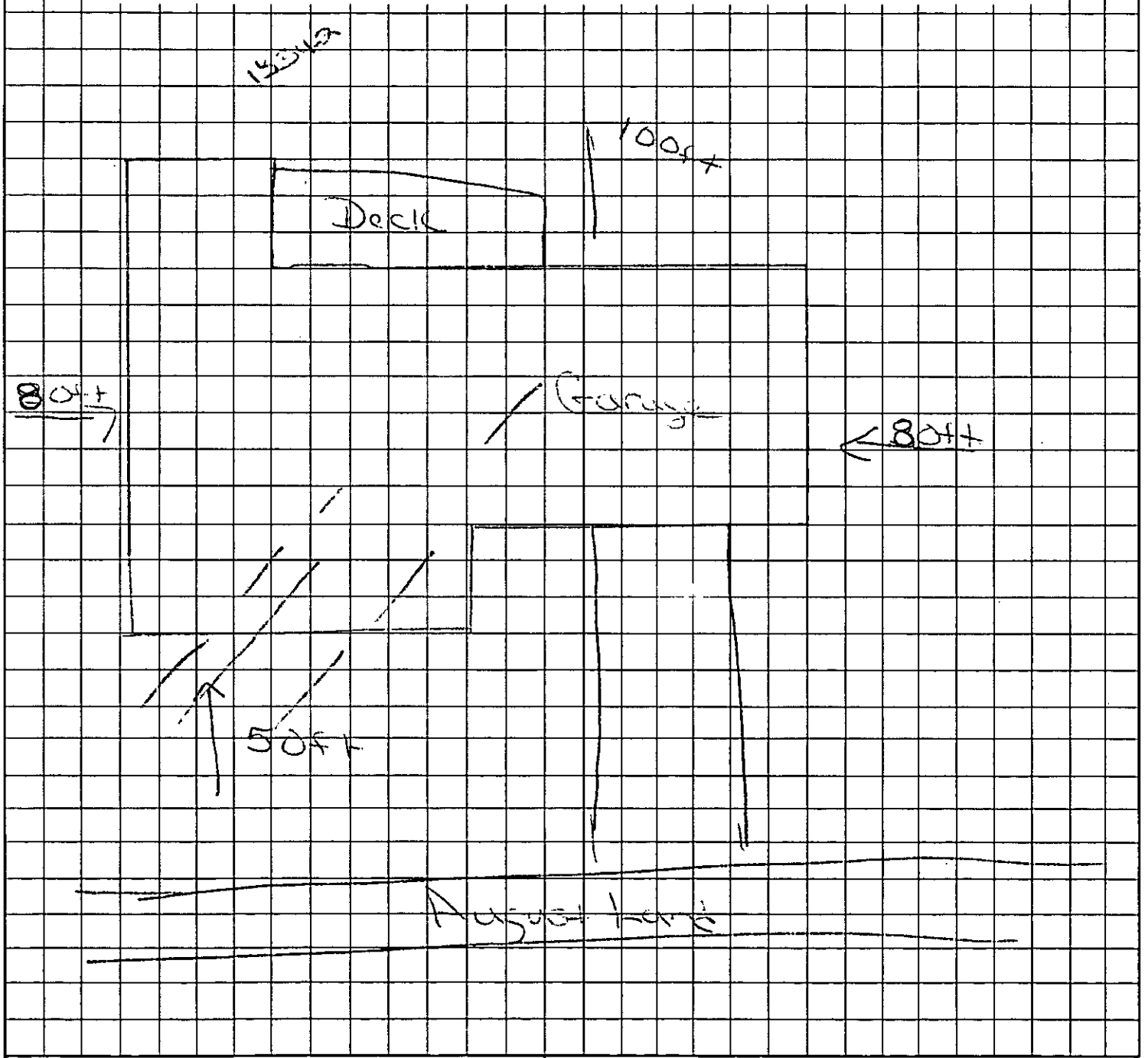
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ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 12193

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Shawn Hucks
OWNER/AGENT SIGNATURE

DATE 10-12-95

APPROVAL DATE _____

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

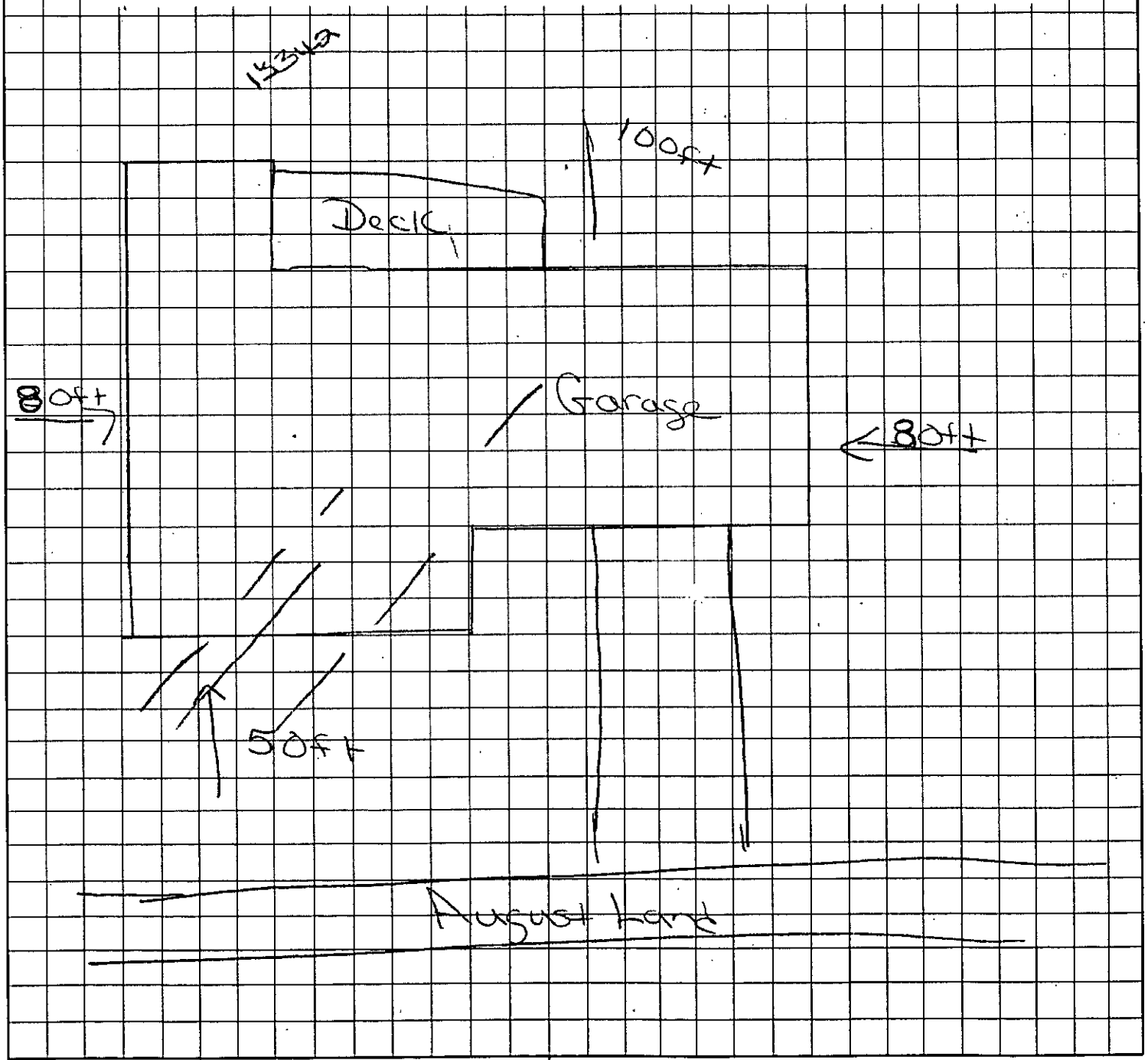
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PHONE (704) 336-5102

FILE: 12193

TC: _____

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Sheri Hucks
OWNER/AGENT SIGNATURE

DATE 10-12-95

APPROVAL DATE _____

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

12193

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

Consultation #35 2/27/95 ☐ CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

Date:

PERSON FILING APPLICATION:
NAME: Willaing (last) Colette (first) (mi)
ADDRESS: 5200 Shadow Pond Ln PHONE: (704) 542-8956
CITY: Charlotte STATE: NC ZIPCODE: 28226

PROPERTY OWNER:
NAME: Mr. Raymond Carlton (last) (first) (mi)
ADDRESS: 7500 Sheffingdell PHONE: (704) 541-7184
CITY: Charlotte STATE: NC ZIPCODE: 28226

After 3/1/95 704-926-3232

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 139-129-20
STREET ADDRESS: August Lane 15842
ZONING: R3

SUBDIVISION OR MOBILE HOME PARK NAME: Subdivision

Township (check one):
☒ 0 Mecklenburg County ☐ 2 Davidson ☐ 4 Pineville ☐ 6 Huntersville
☐ 1 Charlotte ☐ 3 Cornelius ☐ 5 Matthews ☐ 7 Mint Hill

LOT NUMBER: LOT #138, 139 LOT SIZE (in acres): 1.8

TYPE APPLICATION (check one):
☐ SOIL TEST - INDIVIDUAL LOT (D)
☒ NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
☐ EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
☐ ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
☐ COMMERCIAL OR INDUSTRIAL (N)
☐ SOIL TEST DEVELOPMENT (P)
☐ ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
☐ MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
☐ REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
☐ SINGLE MOBILE HOME (S) ☒ HOUSE (H) ☐ MULTIPLE FAMILY (U)
☐ DOUBLE WIDE (D) ☐ MODULAR HOME (M) ☐ OTHER _____ (O)

NUMBER BEDROOMS: 4 NUMBER OCCUPANTS: 4

SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ___ Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type _____

WATER SUPPLY (check one):
☐ Community (C) ☐ Shared Well (S)
☐ Municipal (M) ☐ Other 'spring' (O)
☒ Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
☐ Swimming Pool ☐ Jacuzzi ☐ Stable/Barn ☐ Workshop ☐ None
☒ Garage ☐ Storage Building ☐ Deck/Patio ☐ Bedrooms ☐ Other

The undersigned, owner, or legal agent for the owner, of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Colette Willaing Date: 2/27/95

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

...No work shall be conducted on the septic tank system until an installation, Construction, Alteration and/or Repair approval is granted by this Department.

...This permit is not transferable.

...

☐ IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
☐ MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
☐ ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Environmentalist Date

Director or Authorized Section Head Date

WATER : 122791

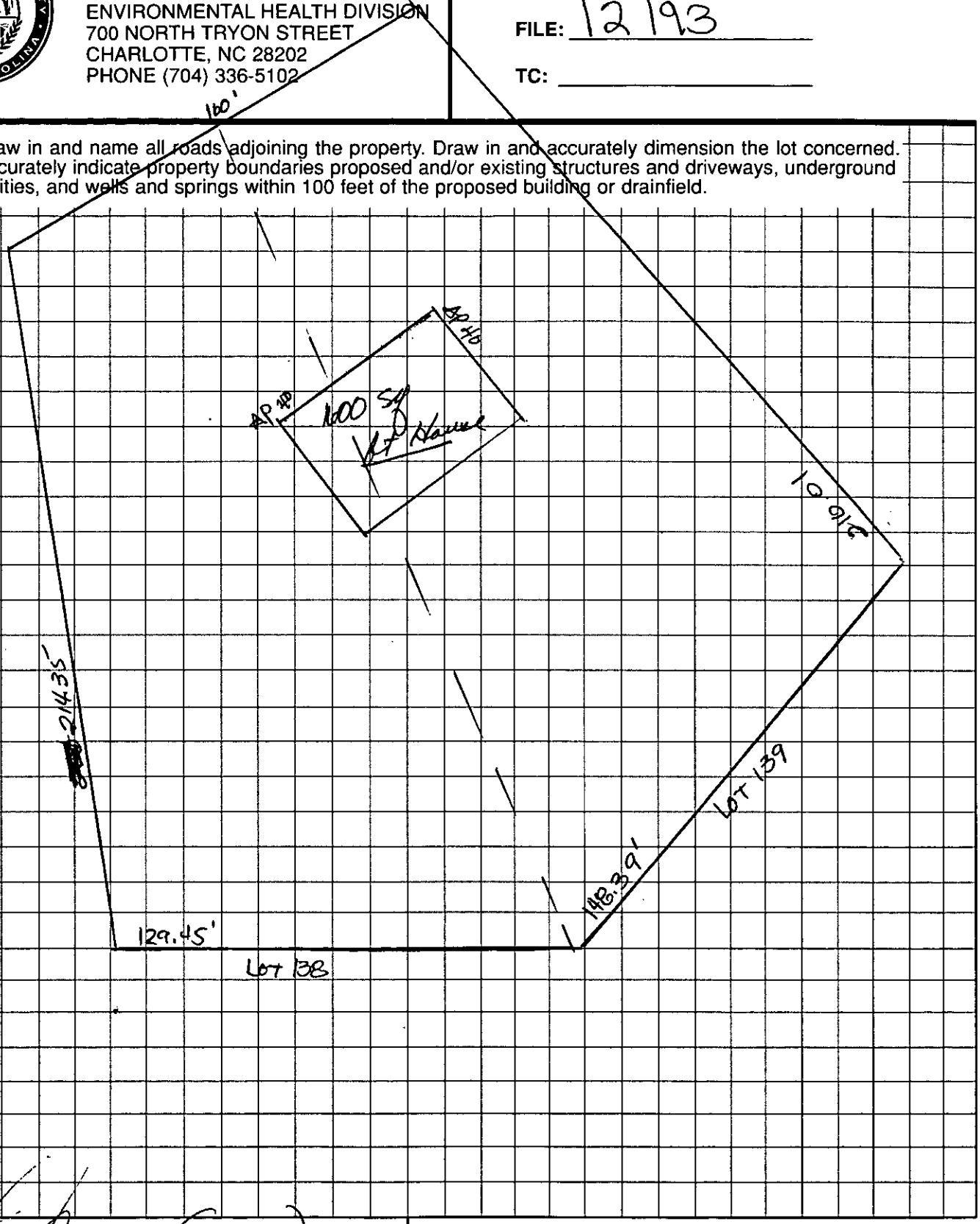
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 12193

TC: _____

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Lacette Pellegrino (Agent)
OWNER/AGENT SIGNATURE

DATE 9/27/95

APPROVAL DATE _____

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

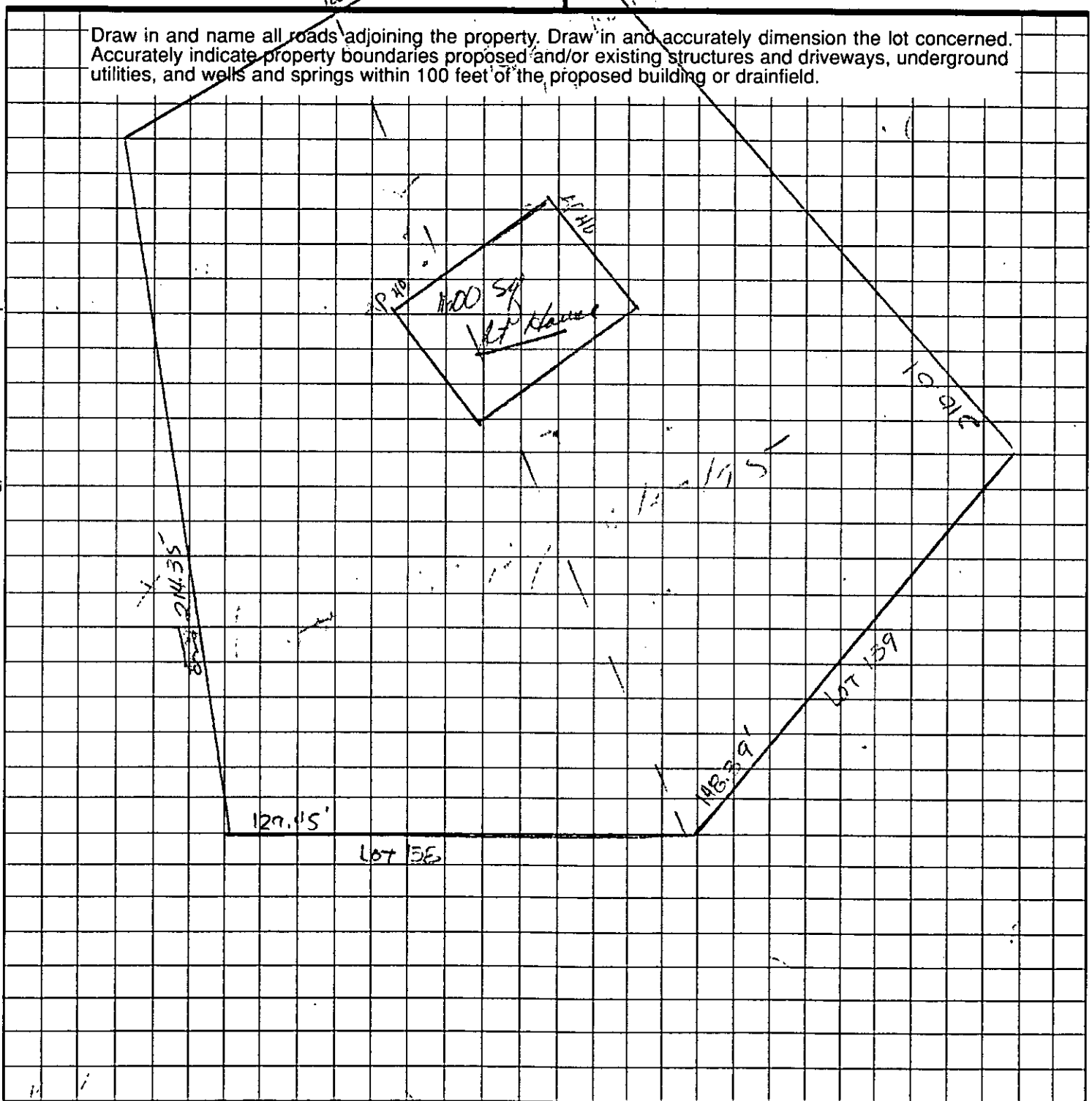
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Vicette H. Hellams (agent)
OWNER/AGENT SIGNATURE

DATE 7/27/95

APPROVAL DATE _____

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

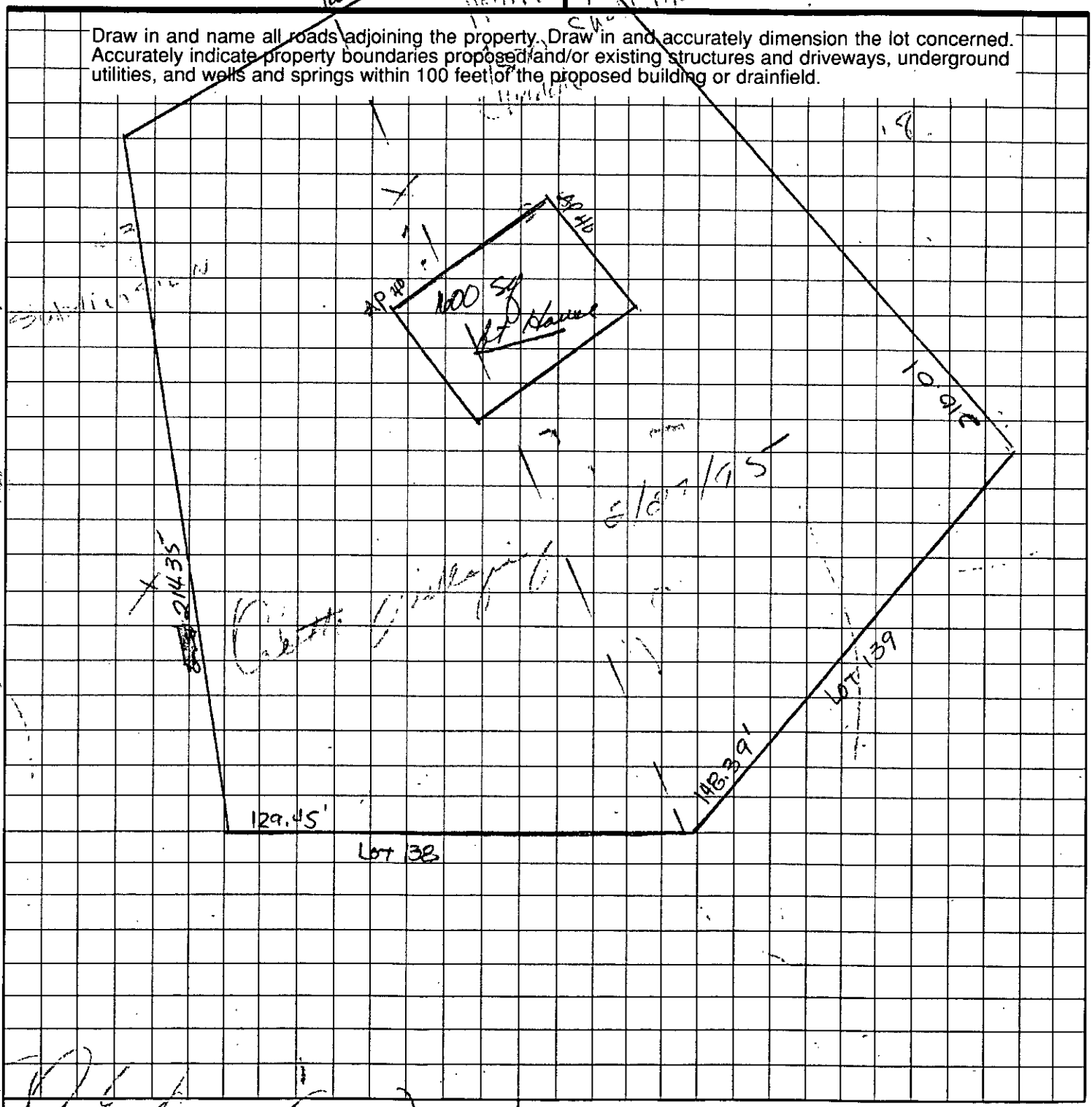
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ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 12193

TC:

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Vacette Shelley (Agent)
OWNER/AGENT SIGNATURE

DATE 7/27/95

APPROVAL DATE _____

White - Health Department's Copy Canary - E.H.S. Copy Pink - Owner's Copy

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203

DATE ISSUED
1. 4/22/77
2. _____
3. _____

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

SIR NO. ~~12193~~
T.C. NO. ~~139-129-20~~
MAP DATE _____

NAME OF OWNER Carlton, Raymond T.

ADDRESS OF OWNER 1420 Wicker Drive

LOCATION OF LOT August Lane, Lot 188, Block B Arlington Forest

The lot described above is not recommended for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge due to the following:

Soil permeability unsuitable

Percolation rate in excess of 200 min./in.

John R. Adkisson

John R. Adkisson, Environmentalist
On Premises Waste Disposal Branch

lot 38

JRA:jjk

(Stencil No.)
EHD 368
8/74

FORM NO.
E-19-8-21-74

12T93

Mecklenburg County
Health Department

TELECOPIER TRANSMITTAL COVER SHEET

*** NOTICE ***

THE INFORMATION CONTAINED IN THIS TELECOPY MAY BE PRIVILEGED AND/OR CONFIDENTIAL AND IS INTENDED ONLY FOR THE USE OF THE PERSON TO WHOM IT IS ADDRESSED. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT (OR SUCH RECIPIENT'S EMPLOYEE OR AGENT), YOU ARE HEREBY NOTIFIED NOT TO READ, DISTRIBUTE OR COPY THE MATERIALS ATTACHED HERETO WITHOUT THE PRIOR WRITTEN CONSENT OF THE SENDER. IF YOU HAVE RECEIVED THIS TELECOPY IN ERROR, PLEASE NOTIFY THE SENDER BY TELEPHONE CALL AND RETURN THE ORIGINAL TELECOPY TO US BY MAIL AND WE WILL REIMBURSE YOU FOR THE REQUIRED POSTAGE. THANK YOU.

TO: [illegible] TELECOPIER # 336-6894

FROM: Raymond Carlton DATE

NUMBER OF PAGES TRANSMITTED: (including cover sheet)

COMMENTS:
I am trying Guy Hucks to have a
Perk test done at 1534 N August Lane

If you do not receive all pages, please call us as soon as possible at the following number: (704)336-5102.

[ ] Original will not follow [ ] Original will follow via:

[ ] U.S. Mail [ ] Hand Delivery [ ]

Facsimile Cover Sheet

To: L W Patterson
Company: Mecklenburg Health Dept
Phone:
Fax:

From: Janet Mangus
Company: The Prudential Carolinas Realty
Phone: 704-542-1100
Fax: 704-542-1774

Date:
Pages including this cover page:

Comments:

To: Janet Mangus
From: Guy Hucks

Janet, Dave Meinderhall asked that I fax this to you. Please have Mr. Carlton Sign the transmittal cover Sheet giving us permission to have the perk test done and fax it to the #(336-6894) on the transmittal sheet.

Thanks

12197

SOIL INVESTIGATION REPORT

Date of Investigation April 14, 1977 APT NO. 12197

Owner Raymond T. Carlton 2n-134-129-2c

Location of Property August Lane Lot 130

Soil Suitability Ratings

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Lignum	Helena	Georgeville	
2. Soil Slope	Suitable 10-15%	Suitable 2-6%	Suitable 10-15%	
3. Soil Depth	unsuitable 24"	Suitable 48"	Suitable 740"	
4. Soil Texture	unsuitable 2-1 Expanding Clay	unsuitable 2-1 Expanding Clay	Provisionally Suitable Clay	
5. Soil Structure	unsuitable Massive	unsuitable Massive	Provisionally Suitable Blocky	
6. Restrictive Horizons	-			
7. Soil Drainage	Suitable water Table 76'	unsuitable Perched high water Table	Suitable 76' To water Table	
8. Soil Permeability (Percolation Rate)	unsuitable slow 120 min/in	unsuitable slow 120 min/in	Provisionally suitable Moderate 60 Min/in	
9. Other			Lack of Adequate Area For System installation	
10. Overall Rating	unsuitable	unsuitable	unsuitable	

Remarks: Recommendations Based on this investigation, there is not an adequate area of previously suitable soil for installation of septic tank system.

See diagram on back

William A. Merlin
Soil Scientist

3/10/75
EHD 539

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

APPENDIX H
SITE EVALUATION

S.I.S. NO. 12[illegible]3
T.C. NO. [illegible]

(Ground Absorption Sewage Disposal)

OWNER: Tina Jenera Wood
ADDRESS: 1201 Wood Circle
COUNTY: Avery, N.C. 28607
LOCATION OF SITE: August Lane

DATE REQUESTED:
PLAT NO: Lot 142 [illegible]
LOT SIZE: [illegible]

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U 2-10%	S (PS) U 2-6%	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2:1 Clay)	S PS (U) 2-1 Clay	S PS (U) 2-1 Clay	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) U Weak Blocky	S (PS) U Weak Blocky	S PS U	S PS U
4. SOIL DEPTH (inches)	S PS (U) 34-36"	S (PS) U 48"	S PS U	S PS U
5. RESTRICTIVE HORIZONS (inches) (Impervious strata, Rock)	S PS (U) Saprolite ± 30"	S Seasonal perched PS (U) water table	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	(S) PS U 70" to ground water	S Seasonal perched PS (U) water Table	S PS U	S PS U
7. SOIL PERMEABILITY (percolation rate)	S PS (U) Slow → V. Slow	S PS (U) V. Slow	S PS U	S PS U
8. OTHER (specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	unsuitable	unsuitable		
10. SOIL SERIES	Lignum	Helew		

S - Suitable PS - Provisionally Suitable U - Unsuitable

** See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope)

Recommendations/Comments:

Described By: William R. Nagle
Title: Soil Scientist
Date: 7-20-81

DHS Form 2601
Sanitation
EHD 539 (2/80)

2

T-0-4 Sic/-gr. | SEXP SB/SP T-

4-#4 Sic /Sb M | EXP FI-S/P 2.54/6/2 @ 18"

w/ ~~S-H~~
Si/ Longsway

(B)-0-4- Si/ /gr/ SEXP, NSNP Fn FS
3-0-3" Sic/gr. SSSP

4-10' Sic / FiBExr SP 3- 13" 54 6/1
SC1 EXP

10-16" /w Sic#
Lng Fi EXP -

