WELL RECORD Well Permit No. 8752

MAIL COMPLETED FORM TO: WELL WATER SUPPLIES

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

1200 BLYTHE BOULEVARD, CHARLOTTE, N C 28203

Drilling Contractor LASSITER WELL DRILLING CO.

1 Location of property Isaac Dr.

2 Name of owner White, Wm. E.

Address 1610 Van Buren Ave

3 Does this well replace an existing well?

4 Topography (circle one): draw, slope, hilltop, valley, flat

5 Use of well res. Date completed 4-[illegible]-77

6 Rig type or method air Total depth 115

7 Casing

Depth From	Depth To	Inside Diam	Wall thick or Wt. ft	Type
0	0 ft	2		

8 Grout

Depth From	Depth To	Material	Method
0	20 ft	cement	poured

9 Liner(s) Depth Diameter

Was casing pulled and abandoned

10 Additional casing depth and gpm

11 Static water level 20 ft. above / below top of casing

Artesian ft. above land surface Elev.

Date

12 Yield gpm 6 Method of testing air

13 Pumping water level ft. after hrs

at gpm

14 Water quality clear Temperature (°F)

15 Well sterilization method HTH

16 Permanent pump Type Make

Installed – Date By

Capacity gpm H.P. TDH

Intake depth Approx. depth

17 Remarks

I do hereby certify that this well record is true and exact.

VL/bps

SIGNATURE OF CONTRACTOR OR AGENT

ENVIRONMENTAL HEALTH

DRILLING LOG

Depth From	Depth To	Formation
0	90	red dirt
90	115	Green and blue granite

EHD-5-76

Date Received 4 Apr 77 Apt No. (S) ____ Application No. (W) 8752

T. C. No. 037-121-12

Map Date 4-27-77

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER White, Wm. E.
LAST FIRST MIDDLE

ADDRESS OF OWNER 1610 Van Buren Ave ZIP

PHONE NO Home 377-2409 Office

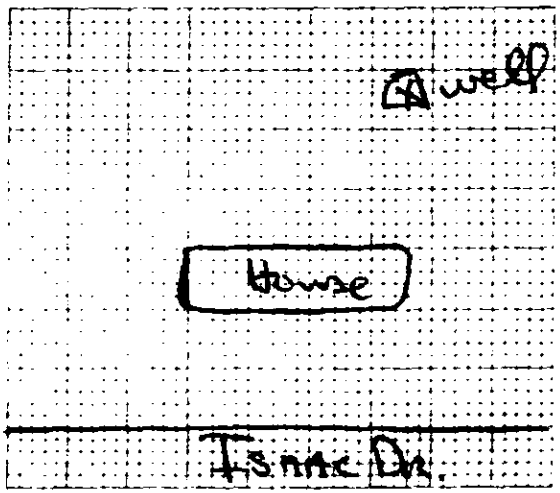
LOCATION OF PROPERTY Isaac Dr
STREET OR COUNTY ROAD

WELL CONTRACTOR Lassiter LICENSE NO

Application is hereby made to the Mecklenburg County Department of Environmental Health for a permit to drill a water well on the hereinabove described lot to be used as a source of individual, semi-public or public water supply

4 Apr 77
DATE OF APPLICATION

OWNER



LOCATION SKETCH & DIRECTIONS

Application approved and permit granted

Permit No

ENVIRONMENTALIST A. M. Reynolds

Env 5-76

Environmental Health Department's Copy

Date Received 1-13-78

APT No 8752
P.C. No 337-171 12
Map Date 4-27-13

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Americana Park, Inc. (LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER 4935 Albemarle Rd.,Suite 202,Charlotte, N.C. ZIP 28205

3) PHONE NO Home Office 537-6231

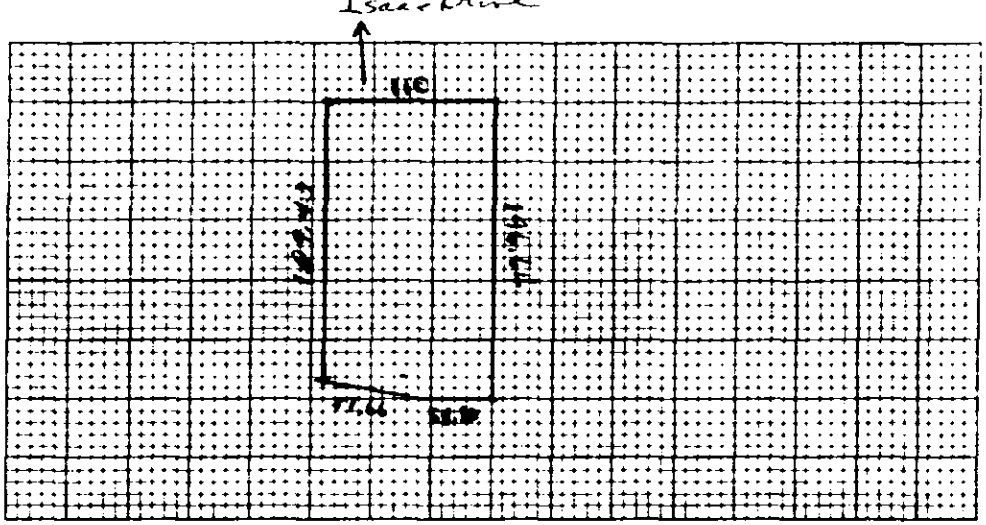
4) LOCATION OF PROPERTY Isaac Drive (STREET OR COUNTY ROAD)

5) SUBDIVISION Bahama Park II LOT NO 8 BLOCK NO C

MAP BOOK NO 17 PAGE NO 362

6) DEED REFERENCE DEED BOOK 3437 PAGE NO 307
(Portion of)

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

Americana Park, Inc.
By: [signature]
OWNER

FORM NO. E-1-9-1-72

HEALTH DEPARTMENT'S COPY

Date Received 6/3/75

APT No [redacted] 9752

T C No 037-163-36

Map Date 2/21/75

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

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

2) ADDRESS OF OWNER [redacted] ZIP [redacted]

3) PHONE NO Home [redacted] Office

4) LOCATION OF PROPERTY [redacted] STREET OR COUNTY ROAD

5) SUBDIVISION [redacted] LOT NO [redacted] BLOCK NO [redacted]

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

[redacted]
OWNER

FORM NO. E-1-9-1-72

HEALTH DEPARTMENT'S COPY

Date Received 9/1/2024

APT No 8752

T C No 037-163-36

Map Date 2/24/25

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER _____ (LAST) _____ (FIRST) _____ (MIDDLE)

2) ADDRESS OF OWNER _____ ZIP _____

3) PHONE NO Home _____ Office _____

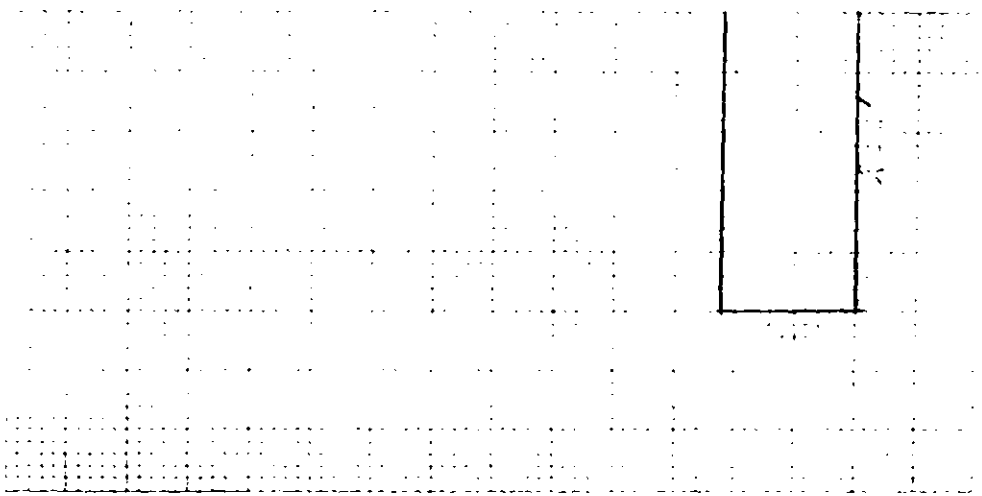
4) LOCATION OF PROPERTY _____ (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO _____ BLOCK NO _____

MAP BOOK NO _____ PAGE NO _____

6) DEED REFERENCE DEED BOOK _____ PAGE NO _____

A [illegible]



7) ACCURATELY DIAGRAM & DIMENSION LOT

_____
OWNER

EHD 5 76

Environmental Health Department's Copy

Serial No [illegible]

PTR No 8752

Date Issued Jan. 15, 1975

T C No 037=171-12

Map Date 4-27-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

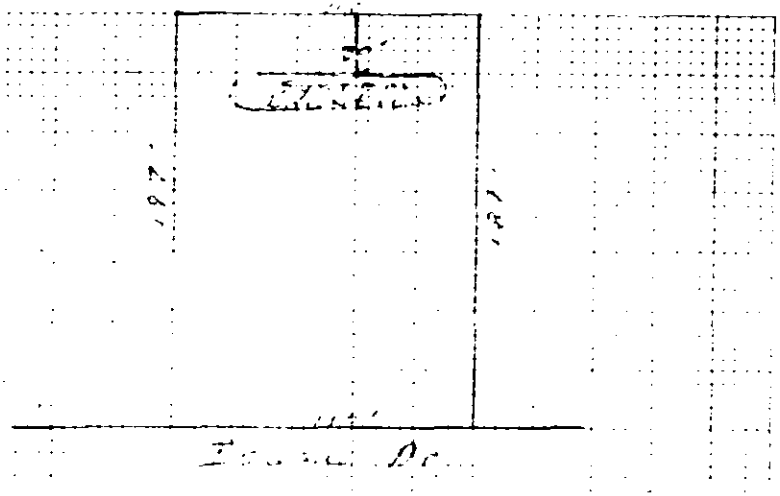
PERCOLATION TEST REPORT

NAME OF OWNER Americana Farms, Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER 4935 Albemarle Rd., Suite 230 ZIP 28205

LOCATION OF PROPERTY [illegible]

SUBDIVISION Americana Farm II LOT NO 8 BLOCK NO C



PLAN

[illegible] Mecklenburg [illegible] that portion of [illegible]

*60 Min./In. [illegible]

[illegible] Health Dep[illegible]

[illegible] the Health D[illegible]

[illegible] and regulations [illegible] Health which were in effect on the date of issuance and is valid for a 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.

*Results determined by soil analysis

[illegible] Soil Scientist

John R. Dickinson

Director, Environmental Health Division or Authorized Section Head

FORM NO E-2-9-1-72

HEALTH DEPARTMENT'S COPY

Date Received 2/2/75

ICAR (S) Application No 8752

T C No

Map Date 2/21/75

MECKLENBURG COUNTY HEALTH DEPARTMENT

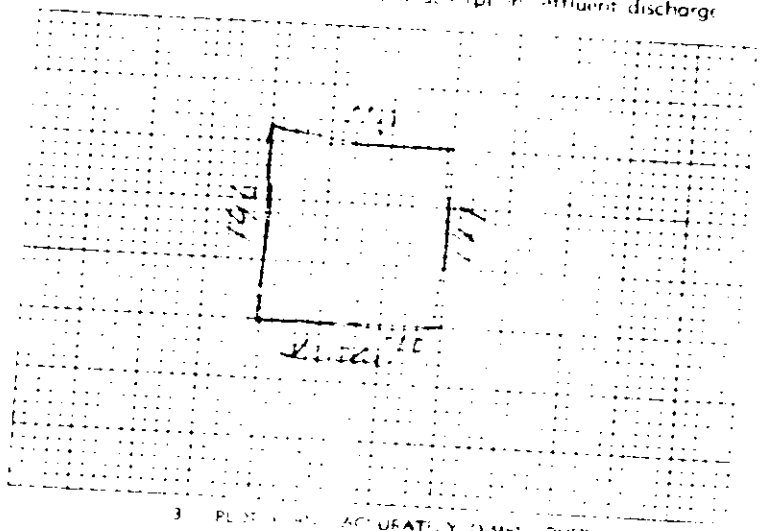
ENVIRONMENTAL HEALTH DIVISION

Application for an
Installation, Construction, Alteration, and/or Repair Permit
Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge

The undersigned property describes hereinafter hereby applies to the Mecklenburg County Health Department for a Permit to

✓ Install or Construct a ... ment system with a subsurface soil absorption effluent discharge

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



3 PLOT PLAN ACCURATELY DIMENSIONED

3

Water Supply ✓ Yes No

Yes ✓ No

Yes No

Yes ✓ No

Yes ✓ No

13. NAME OF OWNER Last First Middle

14. ADDRESS OF OWNER

15. PHONE NO. Home Office

16. LOCATION OF SYSTEM Street or County Road

17. SUBDIVISION Lot No Block No

Map Book No Page No

18. DEED REFERENCE - DEED BOOK AT PAGE

19. HAS A PERCOLATION TEST BEEN RUN? YES NO DATE RUN

20. PER NUMBER (see attached)

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

DATE OF APPLICATION

OWNER

FORM NO. E 4 4

HEALTH DEPARTMENT'S COPY

LA No [illegible] 8752

Serial No. 3086

T C No 037-163-36

Date Issued June 30, 1975

IMPROVEMENTS PERMIT

Map Date 2-21-75

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 White (LAST) William (FIRST) Edward (MIDDLE)

ADDRESS OF OWNER 1610 Van Buren Avenue, Charlotte, ZIP 28216

LOCATION OF LOT Isaac Road (STREET OR COUNTY ROAD)

SUBDIVISION Bahama Park LOT NO 8 BLOCK NO C

MAP BOOK NO PAGE NO

The above described lot is approved by the Mecklenburg County Health Department for the installation of a [illegible] septic tank system with subsurface effluent disposal located on the lot as shown on the plot plan which yielded a percolation rate of 60Min/In. as per the inspection of the soil and [illegible] the information supplied in the "Application for an Installation Construction Alteration and/or Repair Permit" number 8752 [illegible]. This approval is subject to the following terms and conditions

1. That the subsurface 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 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 which has been issued to authorize construction on the said lot at any time it is determined that any of the 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

Director, Environmental Health Division or Authorized Section Head

FORM NO E-3-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 0491

ICAR'S Permit No 8752

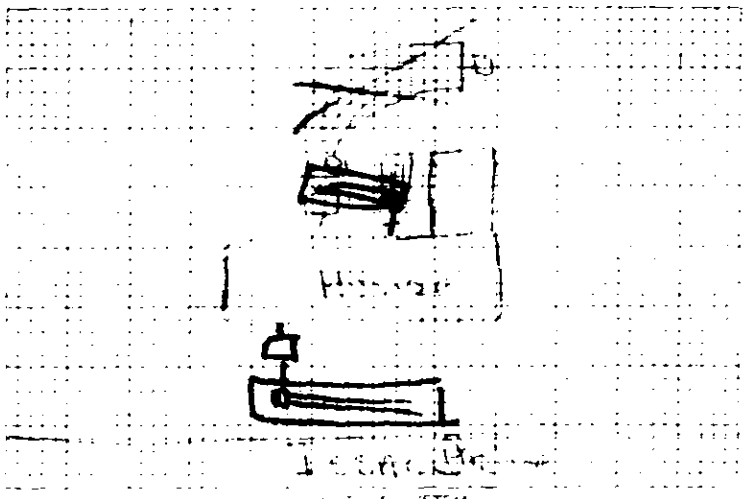
Date Issued

T C No

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 to ✓ Install or Construct After 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 on application # 1553 dated and is void and of no effect if the information provided in the application is found to be false. All work shall be completed on or before 1-[illegible] after which date this permit shall be null and void.



SYSTEM

Permeameter No. 62

Septic Tank Capacity 1500 gal. Pumped to

[illegible] 69

[illegible] 18"

[illegible] 12"

[illegible] 150'

NAME OF OWNER [illegible]

LOCATION OF PROPERTY [illegible] Lot 2 Indian Acres

This permit is issued subject to the conditions set forth in the Regulations of the Mecklenburg County Board of Commissioners governing Sewage Disposal. This permit shall become void unless the work authorized by the permit is commenced within 60 days from the date of the granting of this permit. A certificate of approval must be obtained from the Health Department before any system is covered up or otherwise rendered inaccessible for inspection.

Comments [illegible]

Division / 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 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-S-76

Environmental Health Department's Copy