Date Received 11-17-78 Apt. No. (S) _____ Application No. (W) 13928

T. C. No. 001-143-09 & 14

Map Date 10 & 15

(A-FRAME)

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Rodgers (LAST) John (FIRST) Calvin (MIDDLE)

ADDRESS OF OWNER 400 Stilwell Oaks Rd. ZIP 28212

PHONE NO. Home 536-1094 Office 892-7171 892-3816

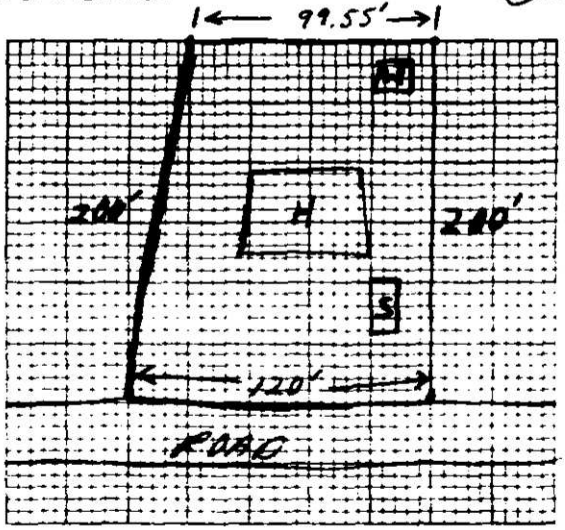
LOCATION OF PROPERTY 19811 Schooner Dr. (STREET OR COUNTY ROAD)

WELL CONTRACTOR Lesiter (Vernon) 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

11- -78
DATE OF APPLICATION

John C. Rodgers
OWNER



ACCURATELY DIAGRAM & DIMENSION LOT

Remarks: Lot #7
Rockridge Shores Sub-Div.
Address: 19811 Schooner Dr.
A-Frame

Application approved and permit hereby granted

Permit No. _____

Marshall Edwards
ENVIRONMENTALIST

EHD-5-76

Environmental Health Department's Copy

Date Received 3/16/78

APT No. 13728
001-143-09 - 14
T. C. No. 001-143-10 - 15

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Rhyne (LAST) Benjamin (FIRST) Garrison (MIDDLE)

2) ADDRESS OF OWNER Rt. 1, Box 210, Davidson, N. C. ZIP 28036

3) PHONE NO Home 892-1884 Office _____

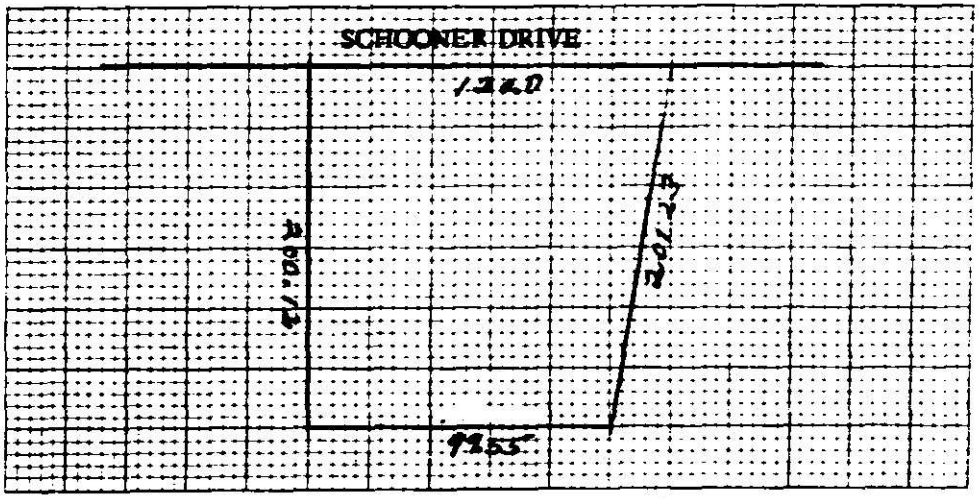
4) LOCATION OF PROPERTY Off Torrence Chapel Road (2159) on road leading to Rockridge Shores Subdivision (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO 7 BLOCK NO _____

MAP BOOK NO _____ PAGE NO _____

6) DEED REFERENCE DEED BOOK 3778 PAGE NO 434

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation 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

Benjamin Garrison Rhyne
OWNER

EHD-5-76

Environmental 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 13726
PO 001-143-14
Lot #7

OWNER: Benjamin Harrison Rhyne
ADDRESS: Rt. 6 Box 216
COUNTY: Davidson NC 27292
LOCATION OF SITE: Schumann Dr.

DATE REQUESTED: 3-16-78
PLAT NO.:
LOT SIZE: 22,000

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) 8-15% PS U	(S) 2-8% 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) 40" PS U	S PS — U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock)	(S) None PS U	S PS — U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) ground water PS U	S Surface PS water (U) drainage Area	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S Moderate (PS) U	S PS U	S PS U	S PS U
8. OTHER (Specify)	S* Limited PS Area U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	Provisionally Suitable	unsuitable		
SOIL SERIES	Cecil	Drainageway Area		

S - Suitable PS - Provisionally Suitable U - Unsuitable

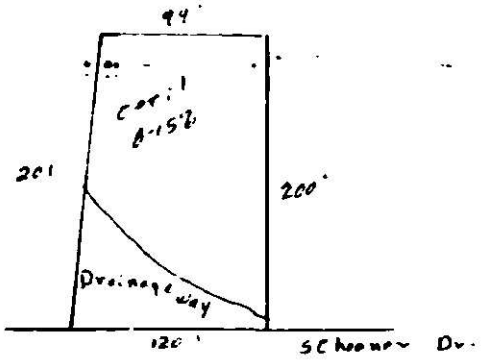
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

Recommendations/Comments: * limited area of suitable soils - Plans for system, system location, building & well location to be reviewed and approved by CHD sanitarian before issuance of permit for septic tank system installation

Described By: William A Marlin

Title: Soil Scientist Date: 3-22-78

DHS Form 2601 (2/77)
Sanitation


94'
Lot 1
B-15-2
201'
200'
Drainage way
120'
Schooner Dr.

Serial No. 1679

PTR No. 19[illegible]

T. C No. 001-143-09 & 14 10 & 15

Date Issued 3/23/78

Map Date

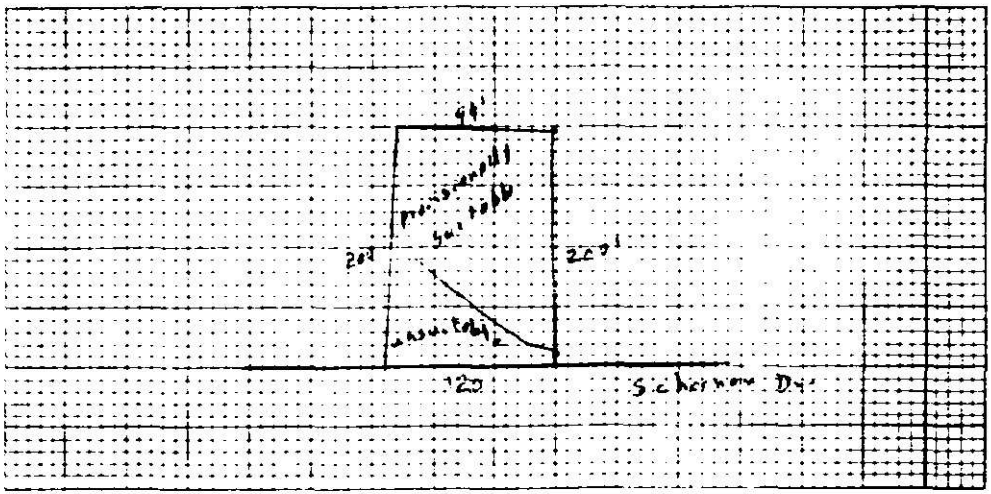
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Rhyne (LAST) Benjamin (FIRST) Garrison (MIDDLE)

ADDRESS OF OWNER Route 1, Box 210, Davidson, N. C. ZIP 28036

LOCATION OF PROPERTY Schooner Drive (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO 7 BLOCK NO



PLOT PLAN

This is to certify that a soil investigation and site investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The soil investigation was conducted on that part of the lot shaded on the above plot. Provisionally Suitable

The permeability rate determined by the investigation was The said lot is approved for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption effluent discharge subject to the following terms and conditions:

1. A permit for the installation of the system may be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of construction of the wastewater treatment system on the said lot.
2. The size of the septic tank and the number of linear feet of absorption trench will be determined by the Mecklenburg County Department of Environmental Health in accordance with the permeability rate obtained above, and on the design of the building to be served.
3. This approval is valid only for the system installed in the area indicated as acceptable for system installation on the above plot.
4. This approval is granted only after a satisfactory percolation test has been performed on the lot which shows a percolation rate of not more than 60 minutes per inch as determined by the Mecklenburg County Department of Environmental Health in the area indicated as acceptable for system installation and only after the installation of the system has been approved by the Health Department.

This approval is granted based on the laws of the State of North Carolina and the rules and regulations of the North Carolina Department of Human Resources, Division of Health Services and the Mecklenburg County Health Commission which were in effect on the date of issuance and is void if at any time in the future, prior to 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.

William B. Martin
Soil Scientist

John R. Atkinson
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Received 11-17-78

ICAR(S) Application No. [illegible]

T C. No. 001-143-09 + 14

Map Date 10 + 15

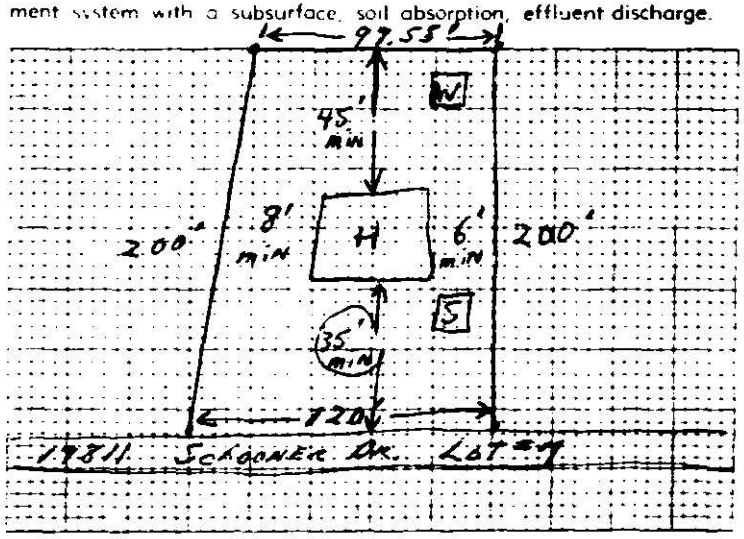
(A-FRAME)

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
Residence ✓ Yes ___ No

4) No. of Bedrooms 4

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 Rodgers (LAST) John (FIRST) Calvin (MIDDLE)

14) ADDRESS OF OWNER 400 Stilwell Oaks Rd.

15) PHONE NO. Home 536-1094 Office 892-7171 892-3816

16) LOCATION OF SYSTEM 19811 Schooner Dr. (STREET OR COUNTY ROAD)

17) SUBDIVISION Rookridge Shores Lot No. 7 Block No. ___

Map Book No. ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES NO DATE RUN 3-23-78

20) PTR NUMBER (See Instructions) 13728

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.

11-17-78
DATE OF APPLICATION

John C. Rodgers
OWNER

EHD-5-76

Environmental Health Department's Copy

Date Issued November 17, 1978 Serial No. 2439

LA No. 13728

T. C. No. 001-143-09 & 14
10 & 15

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

IMPROVEMENT PERMIT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Rodgers, (LAST) John (FIRST) Calvin (MIDDLE)

ADDRESS OF OWNER 400 Stilwell Oaks Road ZIP _____

LOCATION OF LOT 19811 Schooner Drive (STREET OR COUNTY ROAD)

SUBDIVISION Rockridge Shores LOT NO. 7 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 13728. 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, 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

Marshall Edwards
Environmentalist

John R. Abernathy
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued 10-18-79

Serial 3321

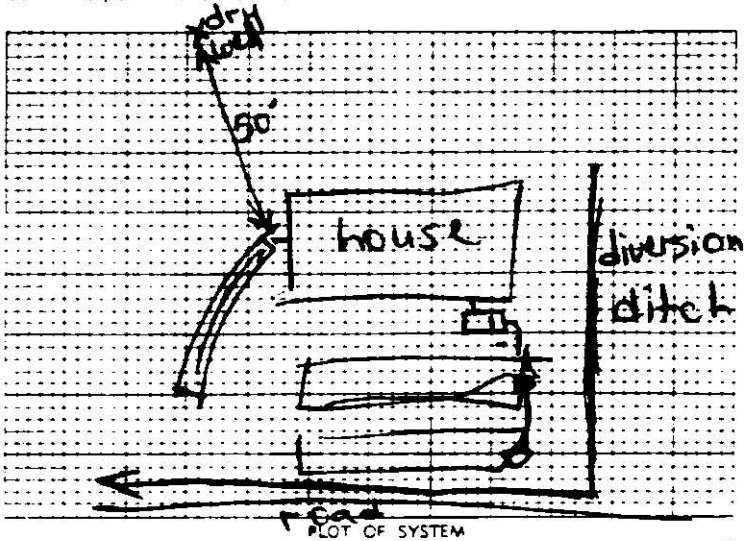
ICAR(S) Permit No. 13728

T C No 001-143-09-14

Map Date 10-15

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 13728, dated 11-17-78 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 1-18-80, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate P5

Liquid Capacity Tank 1500 gallons

Tank Construction p/c conc.

Absorption and/or Nitrification Lines

Total Line Length 660'+167'

Number of Lines 4-4-3

Distance from House 10'

Distance from Property Line 10'

Distance from Well >50' not in yet

NAME OF OWNER Rodgers, John Calvin

LOCATION OF PROPERTY 19811 Schooner Drive

The system shall meet all of the construction 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 uninspectable or can be used. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed 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.

2 – 12'×83'×17" of stone beds

9'×56'×17" of stone for washer

Division or Section Head

Mike Sexton
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-5-76

Environmental Health Department's Copy