Date Received 10/10/79

MECK COUNTY DEPARTMENT OF
RECEIVED
OCT 5 - 1979
ENVIRONMENTAL HEALTH

APT No 16232
T C No 135-242-17
Map Date 5/16/79

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Bob McLemore & Co.
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER P. O. Box 25746, Charlotte, N. C. ZIP 28212

3) PHONE NO Home _____ Office 545-9742

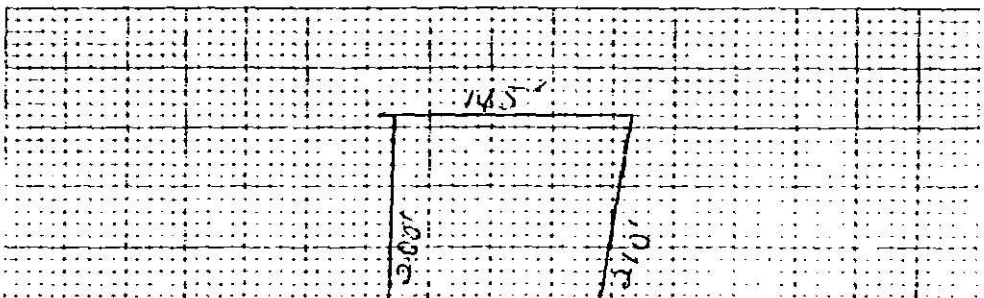
4) LOCATION OF PROPERTY Corkstone Dr.
(STREET OR COUNTY ROAD)

5) SUBDIVISION FArmwood LOT NO 27 BLOCK NO S

MAP BOOK NO 18 PAGE NO 9 & 10

6) DEED REFERENCE DEED BOOK _____ PAGE NO _____

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

Bob McLemore Co. Etc
OWNER

EHO-S-76

Environmental Health Department's Copy

S. I. R. NO. 16232

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

APPENDIX II
SITE EVALUATION

T. C. # 135-242-17

(Ground Absorption Sewage Disposal)

OWNER: Ada McLemore & Co.
ADDRESS: Box 25748
COUNTY: Charlotte, N.C.
LOCATION OF SITE: Carmeta

DATE REQUESTED
PLAT NO.: 27-5
LOT SIZE: 25,010

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS U 2-8%	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) PS 40" 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) PS >40" U To ground 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

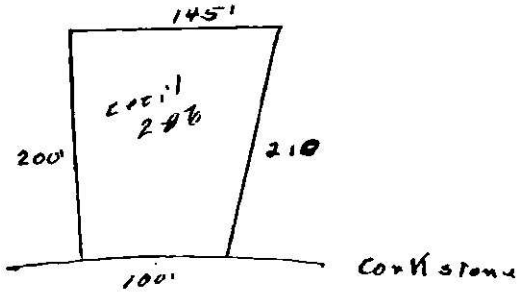
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies wet areas, fill areas, wells, water bodies, slope patterns, etc

Recommendations/Comments:

Described By: William A. Martin

Title: Soil Scientist Date: 10-30-79

DHS Form 2601
Sanitation
EHD 539 (3/79)


145'
Lot 1
2 Fb
200'
210
100'
Conk stone

Serial No. 3180

PTR No. 16232

Date Issued November 1, 1979

T C No 135-242-17

Map Date 5/16/79

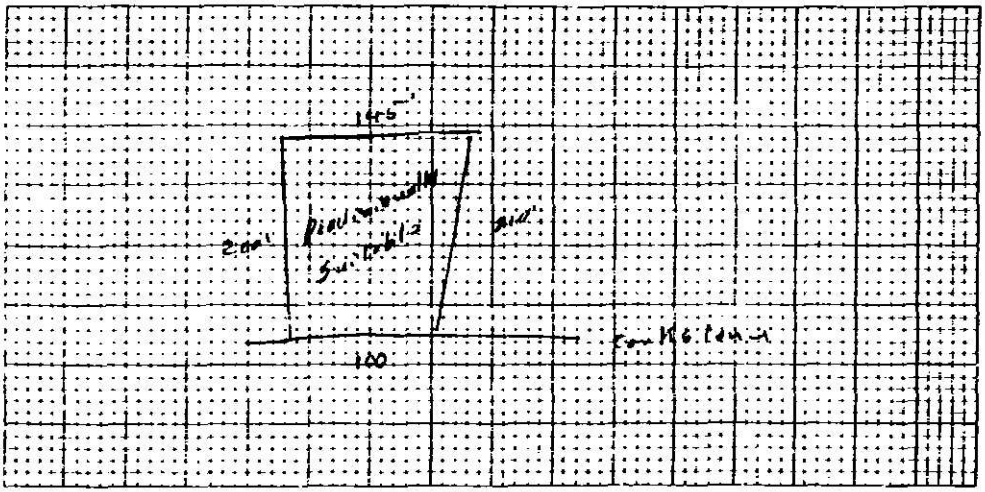
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER _____ (LAST) Bob McLemore and Company, Inc. (FIRST) (MIDDLE)

ADDRESS OF OWNER PO Box 25746, Charlotte, North Carolina 28212

LOCATION OF PROPERTY Corkstone Drive (STREET OR COUNTY ROAD)

SUBDIVISION Farmwood LOT NO #27 BLOCK NO. "S"



PLOT PLAN

This is to certify that a soil investigation and on-site investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The said investigation was conducted on that portion of the lot as indicated on the above plot. **Provisionally Suitable** 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. [illegible] from the Mecklenburg County Department [illegible] the wastewater treatment system [illegible]
2. The [illegible] wastewater treatment system which must [illegible] be determined by the Mecklenburg County Department of Environmental Health [illegible] the permeability rate obtained above, and on the [illegible]
3. This approval [illegible] system [illegible] on the above plot plan is acceptable for system installation on the above lot.
4. This approval [illegible] any grading [illegible] construction [illegible] on the drainage [illegible] performed on the lot which, in the opinion of the Mecklenburg County Department of Environmental Health renders the area indicated as acceptable for system installation unsuitable. Installation, construction, alteration and repair of such a system

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 A. Marlow
Soil Scientist

John D. Adkisson
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

APPLICATION FOR AN IMPROVEMENT PERMIT

MECK COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH
RECEIVED
JUL 1 0 1985

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)
FILE: 16232
TC: 135-242-17 L

JOB LOCATION

① ADDRESS: 6124 (STREET NO) QUARRYSTONE (STREET) DRIVE ② FILE: 16232
③ CITY: CHARLOTTE ④ TAX PARCEL NO.: 135-242-17
⑤ SUBDIVISION: FAIRWOOD SEC 1 # 5 ⑥ LOT: 27 ⑦ BLOCK: 5

OWNER

⑧ NAME: BOB (FIRST) MCLEMORE (MIDDLE) & CO. INC. (LAST)
⑨ MAILING ADDRESS: PO BOX 25746
⑩ CITY: CHARLOTTE ⑪ STATE: N.C. ⑫ ZIP: 28212
⑬ PHONE: (WORK) 545-6111 ⑭ (HOME)

REQUEST

This request is for a(n):

⑮ ☒ New installation permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☐ Other (specify)

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 3
㉕ Type?
㉓ Maximum occupancy?
㉖ Maximum number of employees?
㉔ Basement? ☐ yes ☐ no
㉗ Maximum number of seats?

20170 PROVOST DRIVE

3 BR House

146.67

QUARRYSTONE DRIVE

WATER SUPPLY

㉙ Water supply from (present or proposed):

A ☐ Individual well
B ☐ Municipal system
C ☒ Community well
D ☐ Community system

㉘ Accurately dimensioned plot

㉚ The undersigned, 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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: BOB MCLEMORE & CO. INC. By Nathan W. Shepard

Date: 7-15-85

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY

Date Issued 7-17-85

Serial No. 8728

SIR No. 16232

T. C. No. 135-242-17

Map Date CLT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
IMPROVEMENT PERMIT
TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Bob McLemore & Co., Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER PO Box 25746 Charlotte, NC ZIP 28212

LOCATION OF LOT 6124 Corkstone Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Farmwood Section #15 LOT NO. 27 BLOCK NO. 5

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 _____. 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 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.

B. R. Ferguson
Environmentalist

Eric D. Hardister Jr.
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued 1-21-86

Serial No. 08893

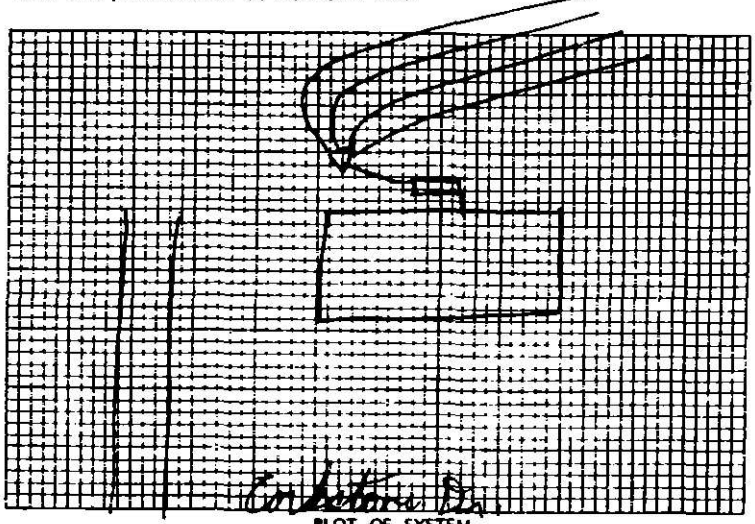
ICAR(S) Permit No. 16232

T C No. 135-242-17

Map Date L

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 _____, dated 7-15-85 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 2-21-86, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PP

Liquid Capacity of Tank 1500

Tank Construction Pcc

Absorption and/or Nitrification Lines.

Total Line Length 400'

Number of Lines 4

Distance from House 5'

Distance from Property Line 10'

Distance from Well Comm.

NAME OF OWNER Bob McLemore Co.

LOCATION OF PROPERTY 6124 Corbetone Dr.

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.

4 lines 3'X100'X12" stone

Comments: _____

Division or Section Head

D. R. Ferguson
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

Mecklenburg County Health Department's Copy

C of A (s) No 16232

Date Issued 1-21-86 **Serial** 8185 T C No 135-242-17 L CKT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF COMPLETION
CERTIFICATE OF APPROVAL
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner Bob McLemore Co. (LAST / FIRST / MIDDLE)

Location of Property 6124 Cobblestone Dr.

Application Number — Permit Number —

Inspection Date:

Liquid Capacity of Tank 1500 Tank Material PCC

Total Length of Drain Tile 400' Number of Lines 4

Depth of Filter Material 12" Cover Depth 12"-24"

Water Supply Source Comm. Distance from Water Source —

Excavation Inspected 1-21-86 (DATE) Tank Inspected 1-21-86 (DATE)

Nitrification Field Inspected 1-21-86 (DATE)

Washing Machine Line Inspected, If Applicable — (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 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 1124, 1500ST, con, 1200SFT, 12", Conc.

System designed to serve 3 bedroom, single family residence.

B. A. Ferguson
Environmentalist

EHD-5-76

Environmental Health Department's Copy