Date Received 11-9-89

MECK COUNTY DEPARTMENT OF
RECEIVED
NOV 9 1984
ENVIRONMENTAL HEALTH

SIR No. 21604
T. C. No. 005-012-35
Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Knox (LAST) Bobby (FIRST) Boyle (MIDDLE)

2) ADDRESS OF OWNER Rt #2 Box 385 Huntersville NC ZIP 28078

3) PHONE NO. Home 8920248 Office 8920196

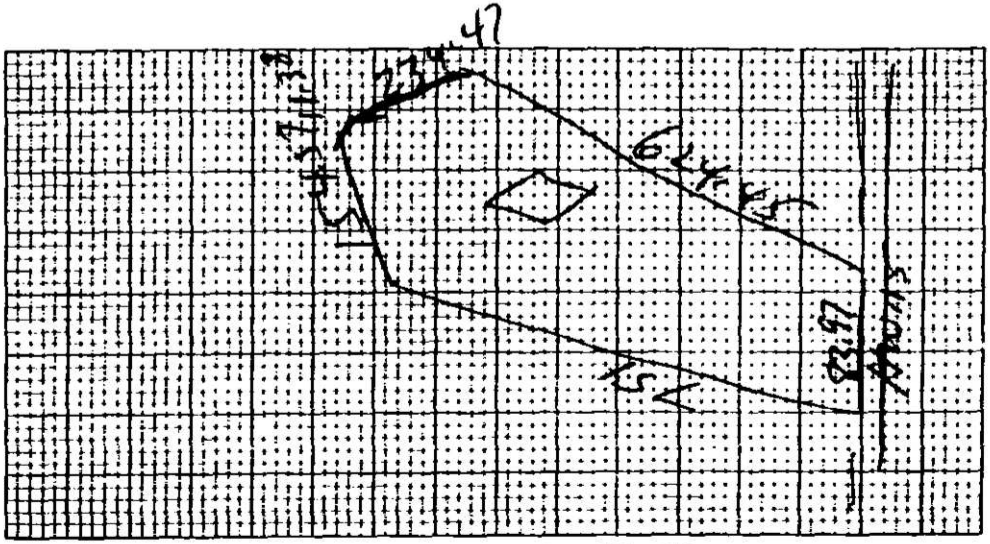
4) LOCATION OF PROPERTY Hwy 115 17101 old Statesville Rd (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. _____

6) DEED REFERENCE: DEED BOOK 4690 PAGE NO. 583

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

Bobby B. Knox
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

MECK COUNTY DEPARTMENT OF SEE INSTRUCTIONS ON BACK

Date Received 11-9-84

RECEIVED
NOV 9 1984
ENVIRONMENTAL HEALTH

ICAR(S) Application No. 21604

T. C. No. 005-012-35

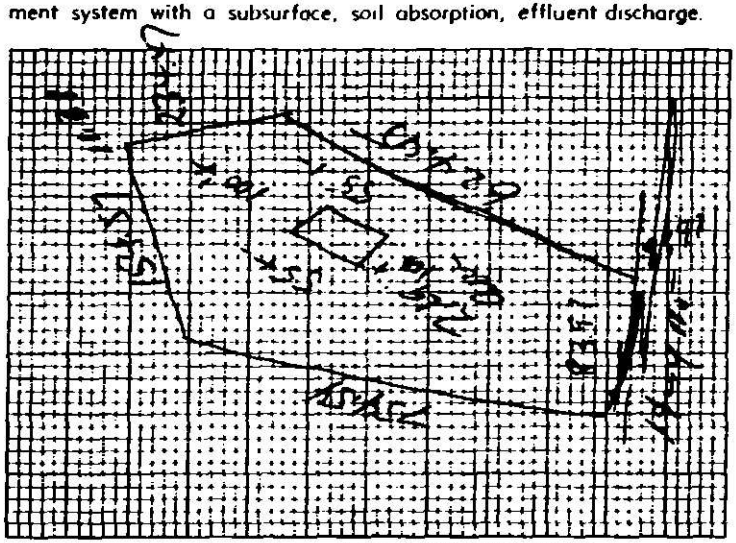
Map Date L

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 2
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 Bobby (LAST) KNOX (FIRST) Bobby (MIDDLE) Boyce

14) ADDRESS OF OWNER Rt # 2 Box 385 Huntersville NC

15) PHONE NO. Home 8920248 Office 8920196

16) LOCATION OF SYSTEM Off Hwy 115 12101 Old Statesville Rd (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. ___ Block No. ___

Map Book No. 4690 Page No. 583

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ___ NO DATE RUN Apr. 27, 1983

20) PTR NUMBER (See Instructions) ___

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.

10/30/84
DATE OF APPLICATION

Bobby B. Knox
OWNER

EHB-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21604

T.C. NO. 005-012-36

(Ground Absorption Sewage Disposal)

OWNER: Bobby Knox
ADDRESS: R. 2 Box 386 Huntersville 28078
PLAT NO:
LOT SIZE: 2.49A
LOCATION OF SITE: Hyway 115 - (Gray Mobile Home)

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U — 2-6	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) U — Clayey	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) U — Blocky	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) U — 40-48"	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U — None	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) U — Adequate	S PS U	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IIa			
9. SITE CLASSIFICATION	Suitable			
10. SOIL SERIES	Cecil			

S - Suitable PS - Provisionally Suitable U - Unsuitable

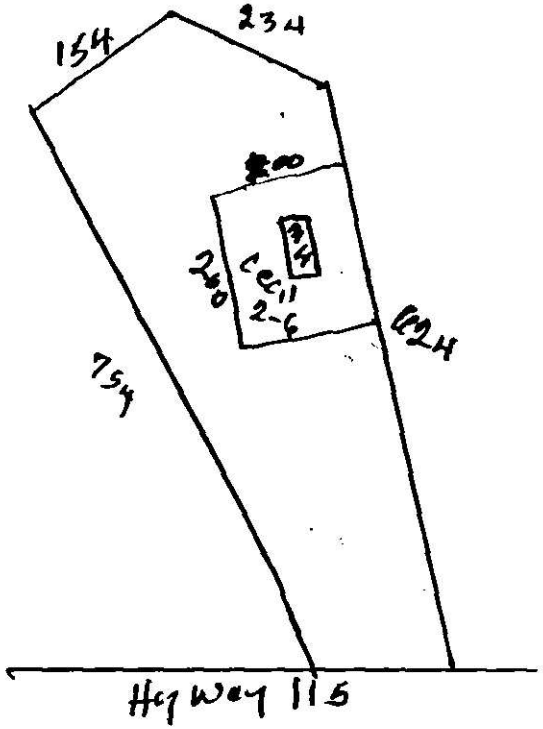
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: 40,000 sq. ft. of land Around Mobile Home Checked

Described by: W. B. Ramsey
Title: Sanitarian

Date: 11-20-84

4


154
234
200
3/4
260
cec 11
2-6
224
754
Hy Way 115

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21604

T.C. NO. 005-012-35

(Ground Absorption Sewage Disposal)

OWNER: Bobby Knox
ADDRESS: R-2 Box 335 Huntersville 28078
PLAT NO:
LOT SIZE: 2.49A
LOCATION OF SITE: HWY 115 (Clay mobile home)

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) 2-6 U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) Clayey U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) Blocky U	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) 40-48 U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) None U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) Adequate U	S PS U	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IIe			
9. SITE CLASSIFICATION	Suitable			
10. SOIL SERIES	Cecil			

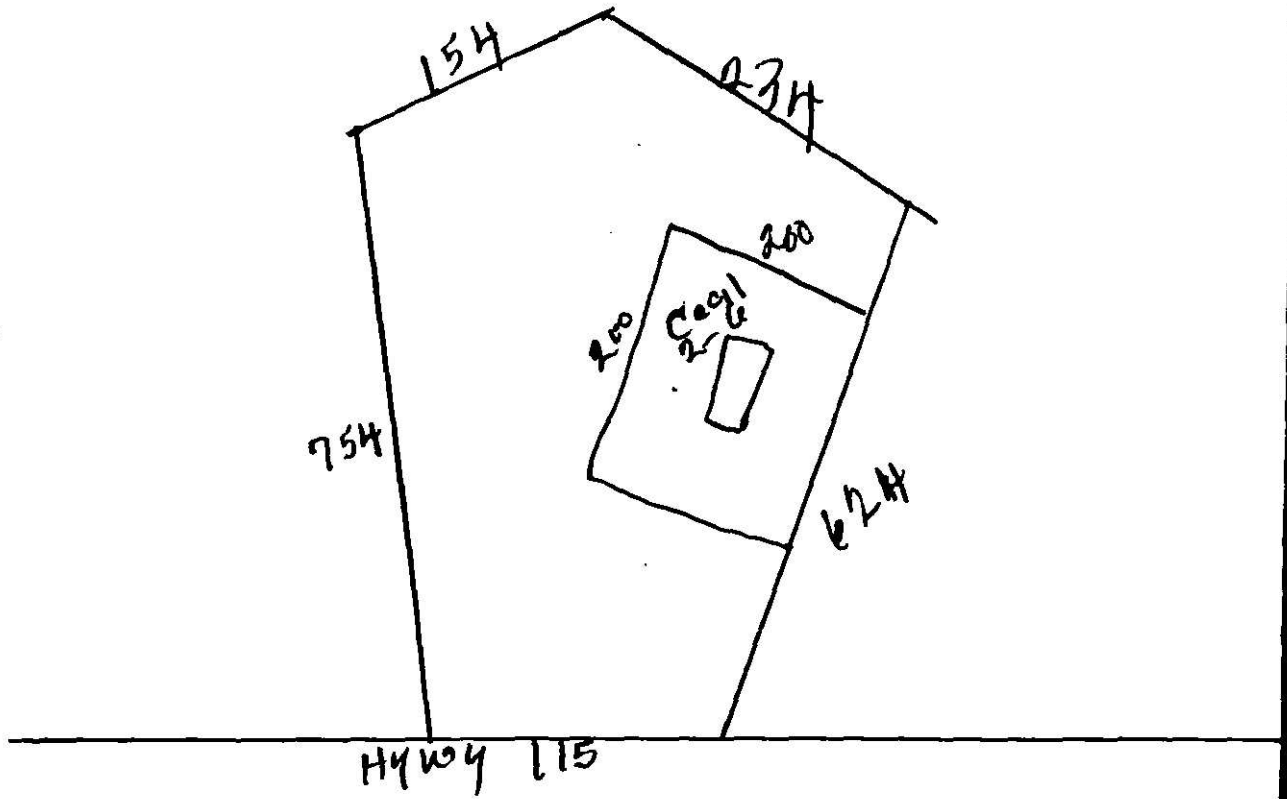
S - Suitable PS - Provisionally Suitable U - Unsuitable

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

Recommendations/Comments:

Described by: W. B. Ramsey
Title: Sanitarian

Date: 11-20-84


154
234
200
200
754
624
HYWY 115

Serial No. 5956

SIR No. 21604

T. C. No. 005-012-35

Date Issued 11-21-84

Map Date L

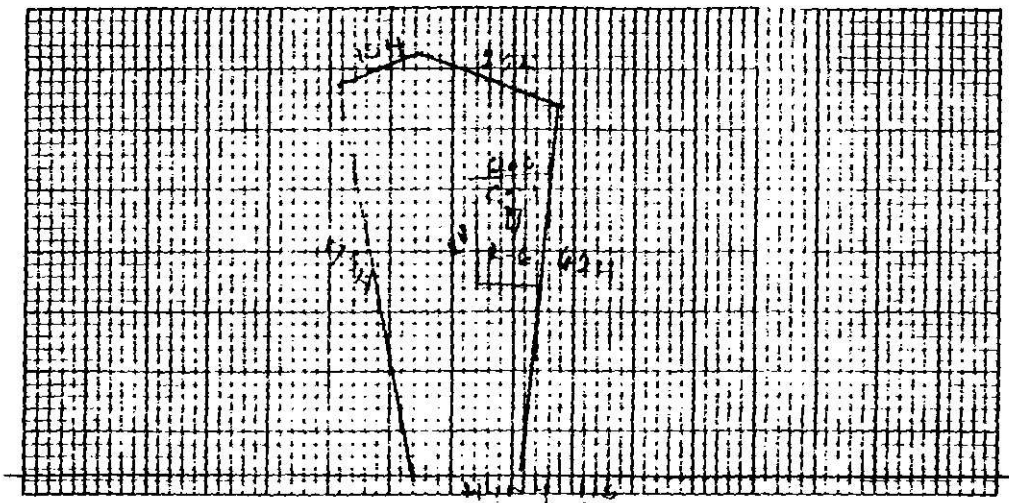
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Knox, (LAST) Bobby (FIRST) B. (MIDDLE)

ADDRESS OF OWNER Rt. 2, Box 385, Huntersville, NC ZIP 28078

LOCATION OF PROPERTY 17101 Old Statesville Road (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO _____ BLOCK NO. _____



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 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 to install, construct, alter, or repair the specific system shall be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction of buildings or of the wastewater treatment system on the said lot.
2. The size of the septic tank wastewater treatment system which must be installed will be determined by the Mecklenburg County Department of Environmental Health prior to installation based on the permeability rate obtained above, and on the size and type of building constructed thereon.
3. This approval is valid only if the system is installed on the immediate area indicated as acceptable for system installation on the above plot.
4. This approval is void if any grading, filling, or construction including the drilling of a well is 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 for installation, construction, alteration, and/or 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.

W. B. Ramsey
Soil Scientist

Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued 11-21-84

Serial No. 8015

SIR No. 21604

T. C. No. 005-012-35

IMPROVEMENT PERMIT Map Date L C&T

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 Knox, (LAST) Bobby (FIRST) B. (MIDDLE)

ADDRESS OF OWNER Rt. 2, Box 385, Huntersville, NC ZIP 28078

LOCATION OF LOT 17101 Old Statesville 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 21604. 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.

Jim Ervin
Environmentalist

Bill D. Anderson Jr.
Environmental Health Director, or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

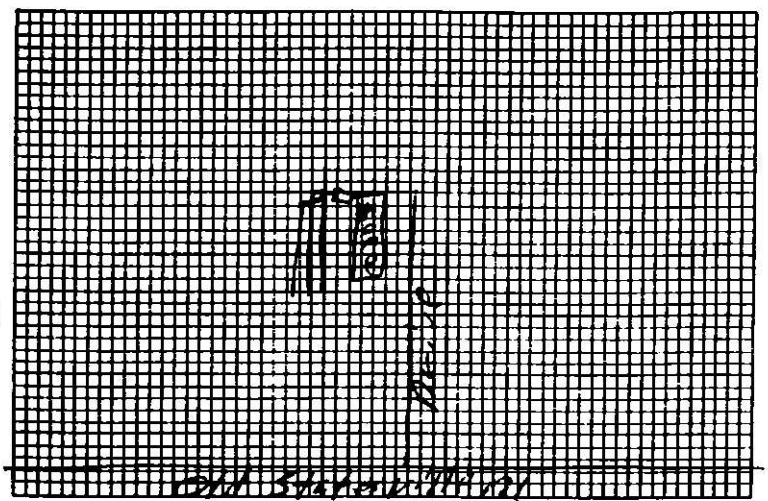
Date Issued 12-7-84

Serial No. 07791

ICAR(S) Permit No. 21604
T. C. No. 005-012-35
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 21604, dated 10-30-84 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 1-7-84, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate IVA

Liquid Capacity of Tank 1500

Tank Construction PCC

Absorption and/or Nitrification Lines:

Total Line Length 270'

Number of Lines 3

Distance from House 5'

Distance from Property Line 10'

Distance from Well 50'

NAME OF OWNER Knox, Bobby

LOCATION OF PROPERTY 17101 Old Statesville Rd

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.

JRL ~~Four~~ Three Trenches 90'x3'x12' Stone

Comments:

Division or Section Head

Jim Ericson
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

C of A (s) No. 21604

Date Issued 12-11-84 **Serial** 7187 T. C. No. 005-012-55

L CRT

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 Knox (LAST) Bobby (FIRST) (MIDDLE)

Location of Property 17101 Old Statesville Rd

Application Number 21604 Permit Number 21604

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PCC

Total Length of Drain Tile 270' Number of Lines Three

Depth of Filter Material 12" Cover Depth 12"

Water Supply Source Well Distance from Water Source 100'

Excavation Inspected 12-11-84 (DATE) Tank Inspected 12-11-84 (DATE)

Nitrification Field Inspected 12-11-84 (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 ———

Jim Ervin

Environmentalist

EHD-5-76

Environmental Health Department's Copy

MECK COUNTY DEPARTMENT OF

Date Received RECEIVED

SEE INSTRUCTIONS ON BACK

ICAR(S) Application No. 21604

T. C. No. 005-012-35

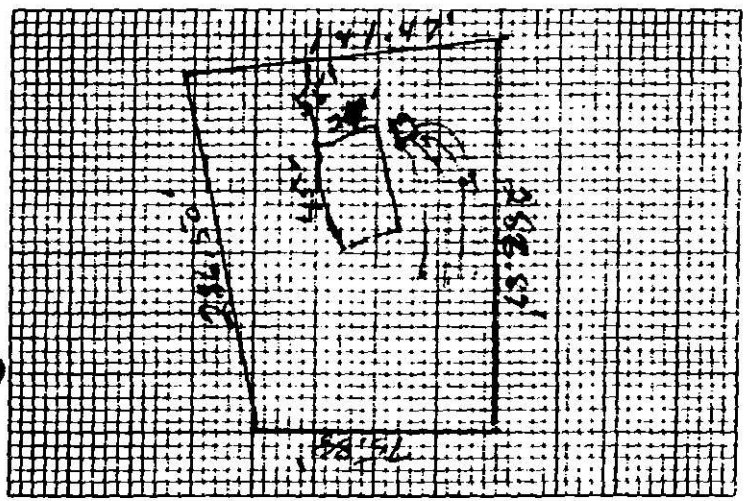
Map Date

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: use existing system

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 3
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 Knox (LAST) William (FIRST) Rodney (MIDDLE)

14) ADDRESS OF OWNER 17101 Old Statesville Rd. 28078

15) PHONE NO. Home 892-4082 Office 892-0196

16) LOCATION OF SYSTEM 17101 Old Statesville Rd. ~~(Front lot)~~ (STREET OR COUNTY ROAD)

17) SUBDIVISION ____ Lot No. 35 Block No. 012

Map Book No. 005 Page No. 01

18) DEED REFERENCE — DEED BOOK ____ AT PAGE ____

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ____ NO DATE RUN 11-84

20) PTR NUMBER (See Instructions) 21604

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.

7-2-85
DATE OF APPLICATION

William R. Knox
OWNER

EHD-5-76

Serial No. 8746

SIR No. 21604

Date Issued 7-22-85

T. C. No. 005-012-35

Map Date L C&S

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 Knox, (LAST) William (FIRST) R. (MIDDLE)

ADDRESS OF OWNER 17101 Old Statesville Rd., Huntersville, NC ZIP 28078

LOCATION OF LOT 17101 Old Statesville 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 21604. 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.

*** USE EXISTING SYSTEM ***

Kelly Isbell
Environmentalist

Environmental Health Director, or Authorized Section Head

EHB-5-76

Environmental Health Department's Copy