Date Received 3-1-84

MECK COUNTY DEPARTMENT OF
RECEIVED
ENVIRONMENTAL HEALTH

SIR No. 20683
PO
T. C. No. 231-111-04
Map Date 8/83

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Providence Woods, Inc.
LAST FIRST MIDDLE

2) ADDRESS OF OWNER 1740 E. Independence Blvd. Charlotte, NC 28205
ZIP

3) PHONE NO. Home _____ Office 704-372-2565

4) LOCATION OF PROPERTY Amanda Dr.
STREET OR COUNTY ROAD

5) SUBDIVISION Providence Woods LOT NO 9 BLOCK NO V

MAP BOOK NO _____ PAGE NO _____

6) DEED REFERENCE DEED BOOK 4571 PAGE NO 693-694

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

Please see attached map

7) ACCURATELY DIAGRAM & DIMENSION LOT

[signature]
~~OWNER~~ Agent

EHD-5-74

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20683

T.C. NO. 00 231-111-84

(Ground Absorption Sewage Disposal)

OWNER: [illegible] PLAT NO: 19 BV
ADDRESS: [illegible] LOT SIZE: [illegible]
[illegible]
LOCATION OF SITE: [illegible]

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS [illegible] 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 Clay 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 36-48" U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S PS >36" U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S > 48" to ground water PS 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	10 A			
9. SITE CLASSIFICATION	Provisionally suitable			
10. SOIL SERIES	[illegible]			

S - Suitable PS - Provisionally Suitable U - Unsuitable

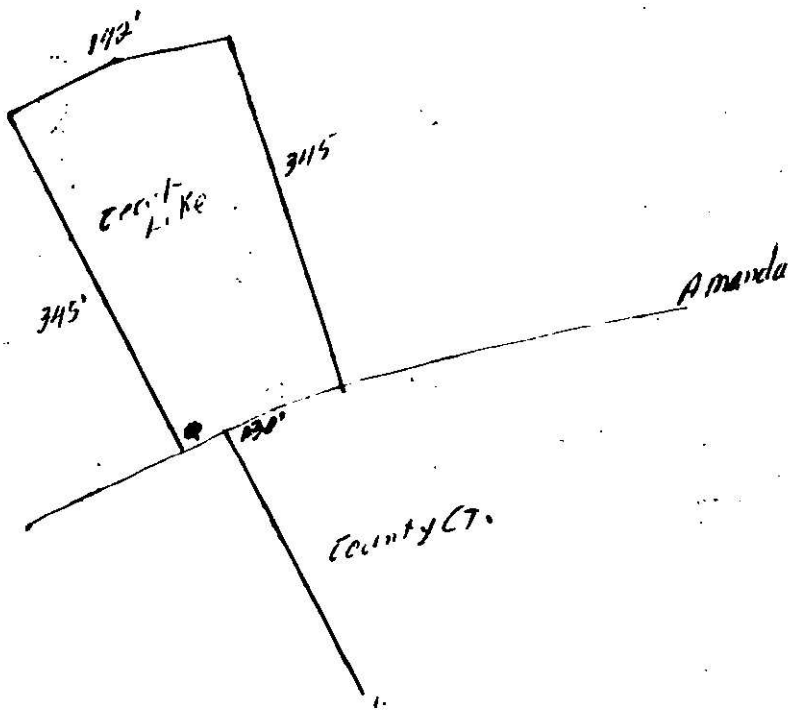
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: Old well in left front corner of lot

Described by: William A. Martin
Title: Soil Scientist

Date: 3-14-84

EHD 539 (Revised: 6/82)



142'
345
Cecil Lake
345'
Amanda
130'
County Ct.

Serial No. 5521

SIR No. 20683

T. C. No. PO 231-111-04

Date Issued 3-15-84

Map Date

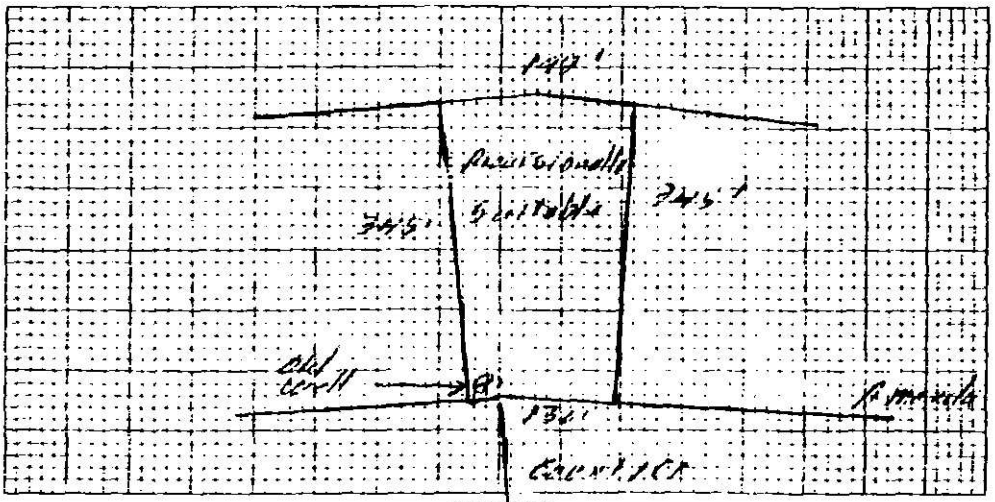
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Providence Woods, Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER 1740 E. Independence Blvd., Charlotte, NC ZIP 28205

LOCATION OF PROPERTY Amanda Drive
STREET OR COUNTY ROAD

SUBDIVISION Providence Woods LOT NO 9 BLOCK NO. 5



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 soil 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 [illegible] 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 [illegible] the Mecklenburg County Department of Environmental Health [illegible] the wastewater treatment system on the said lot.
2. The size of the septic tank wastewater treatment system [illegible] determined by the Mecklenburg County Department of Environmental Health [illegible] obtained above and on the size and type of building [illegible]
3. This approval [illegible] for system installation on the above plot.
4. This approval [illegible] performed on the lot which in the opinion of the Mecklenburg County Department of Environmental Health [illegible] indicated as acceptable for system installation [illegible] 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 R. Martin
Soil Scientist

Bob D. Harlestine Jr.
Environmental Health Director or
Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

PROPOSED PLOT PLAN

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

FILE: 106 83

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.



Signed: [signature]

Date: June 24, 1987

DATE: 6/25/87

TO: ENVIRONMENTAL HEALTH

FROM: COUNTY ENGINEERING

EHD FILE 20683 JURISDICTION CODE Meck.

PARCEL NUMBER 231-111-26

ASSIGNED ADDRESS 817 Amanda Dr

EXISTING ADDRESS lot 4

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	NOT APPROVED
1. SUBDIVISION REGULATIONS	☑	☐ *
2. FLOODWAY REGULATIONS	☑	☐ *
3. EROSION CONTROL REGULATIONS	☑	☐ *
4. COMMERCIAL DRAINAGE PLAN	☑	☐ *
	PRESENT	**NOT PRESENT**
5. PUBLIC UTILITY EASEMENT	☐ *	☑
	YES	**NO**
6. PROPERTY FRONTS ON THOROUGHFARE	☐ *	☑
	YES	**NO**
7. DRIVEWAY PERMIT REQUIRED	☐ *	☑

*** If checked, further investigation will be required to determine whether a building permit may be issued by Building Standards for the site.**

REMARKS: S.F. house

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE AT BUILDING STANDARDS WHEN PAYING PERMIT FEES.
A CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL THE TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

SIGNED: [signature]

OPWEAR 02/86

APPLICATION FOR AN IMPROVEMENT PERMIT

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

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

(OFFICE USE ONLY)
FILE: 2683
TC:
SERIAL: Nº 13892

MECK COUNTY DEPARTMENT OF
RECEIVED
JUN 26 1987
ENVIRONMENTAL HEALTH
☒ LL ☐ CRT

JOB LOCATION

① ADDRESS: 317 [illegible] Drive (STREET NO / STREET) ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.: 2-1-111-2k
⑤ SUBDIVISION: [illegible] ⑥ LOT: 9 ⑦ BLOCK:

OWNER

⑧ NAME: [illegible] (FIRST / MIDDLE / LAST)
⑨ MAILING ADDRESS: [illegible]
⑩ CITY: [illegible] ⑪ STATE: [illegible] ⑫ ZIP: [illegible]
⑬ PHONE: (WORK) [illegible] ⑭ (HOME) [illegible]

REQUEST

This request is for a(n):

⑮ ☒ New 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? 4
㉓ Maximum occupancy? 4
㉕ Type?
㉖ Maximum number of employees?
㉔ Basement? ☐ yes ☒ no
㉗ Maximum number of seats?

WATER SUPPLY

㉘ Water supply from (present or proposed):

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

㉙ 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: [signature]
Date: June 24, 1987

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH certifies that the Department has approved 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 permit is issued by this Department.

. . . This permit is not transferable, and shall become null and void 36 months from the date of issuance.

[signature] 6-30-87
Environmentalist / Date

[signature] 6-30-87
Director or Authorized Section Head / Date

*This permit must be signed by the Director of Environmental Health or an authorized section head in order to be valid.

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

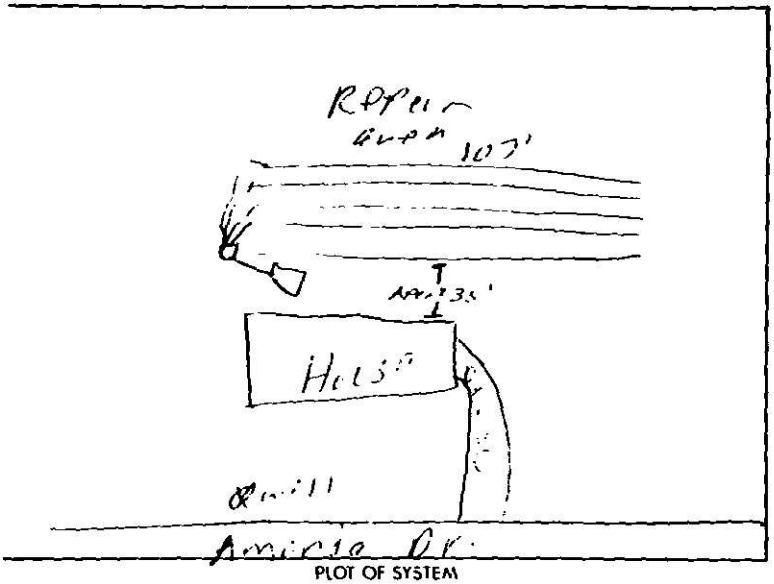
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 20683 DATE: 12-23-87

TC: 231-111-26 ☐ L

SERIAL № 11539

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 the application dated 6-24-87. All work shall be completed on or before 1-23-88, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Department of Environmental Health before any system can be covered up or placed into service. 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank _____ gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 535 feet

Number of Lines Five

Depth of Stone 12" inches

Distance from House 5 feet

Distance from Property Line 10' feet
Road Well

Distance from Well 100' away feet

NAME OF OWNER David, Linda Barefoot

LOCATION OF PROPERTY 81 Amerise

Comments: Five Trench 107' X 3' X 12" Stone

Division or 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.

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

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 20683 DATE: 12-29-87
TC: 231-111-26 ☑ L ☑ CRT
SERIAL № 10810

Name of Owner David & Linda Barefoot Juris.:

Address of Property 817 Amanda Dr

Inspection Data:

Tank Material PCC

Total Length of Drainfield 535

Number of Lines 5 @ 107'

Cover Depth 12"

Water Supply Source well

Distance to Water Source >100'

Excavation Inspected 12-29-87

Tank(s) Inspected 12-29-87

Wash Line Inspected —

High Water Alarm Inspected —

PLOT

Design: 1987, 1500ST, con, 1605 SFT, 12 G, cool CTR# 113

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☑ installed or constructed ☐ altered or repaired
☑ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The issuance of this

☑ Certificate of Completion ☐ Operation Permit

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 document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 10 NCAC 10A .1900 in addition to those listed below under "COMMENTS." This document 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 Ericson
Environmentalist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.