SEE INSTRUCTIONS ON BACK

21114

Date Received _____

ICAR(S) Application No 21114

T C No 113-16-08

Map Date 6-24-86

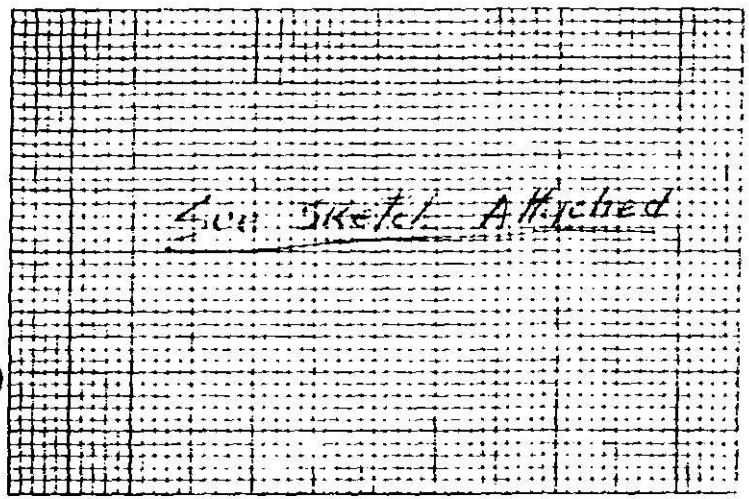
MECK COUNTY DEPARTMENT OF
RECEIVED
JUL 1 1986
ENVIRONMENTAL HEALTH

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 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 ✓ (4 Lots)
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 WILLIAMS (LAST) JANE (FIRST) / SMOKY HOLLOW CORP. (MIDDLE)

14) ADDRESS OF OWNER P.O. Box 6067 CHARLOTTE - 28207

15) PHONE NO. Home 525-2514 Office 376-6353

16) LOCATION OF SYSTEM 4321 NO. PINE CHURCH RD. (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. See Sketch Block No. _____

Map Book No. 113 Page No. 16 (Smoky Holler Corp)

18) DEED REFERENCE — DEED BOOK 4234 AT PAGE 502

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES _____ NO DATE RUN _____

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.

_____ (Agent)
DATE OF APPLICATION OWNER
Smoky Holler Corp.
376-6353

EHD-S-76

Environmental Health Copy

Date Received 12-11-84

RECEIVED
DEC 11 1984
ENVIRONMENTAL HEALTH

SIR No. 21114
T.C. No. 13-164-08
Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

SMOKY HOLLAR CORP. (OWNER)

1) NAME OF OWNER SLOAN (LAST), MANGUM (FIRST) IV (MIDDLE)

2) ADDRESS OF OWNER P.O. Box 35450 Charlotte ZIP 28235

3) PHONE NO. Home 333-1879 Office 376-6353

4) LOCATION OF PROPERTY MOUNT OLIVE CHURCH ROAD (STREET OR COUNTY ROAD)

5) SUBDIVISION — LOT NO — BLOCK NO.

MAP BOOK NO 113/164 PAGE NO 16

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

See Sketch Attached

7) ACCURATELY DIAGRAM & DIMENSION LOT

SMOKY HOLLAR CORP.
OWNER By: M. M. SLOAN, AGT.

EHD-S-76

Environmental Health Department's Copy

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21114

T.C. NO. P.0113-164-08

(Ground Absorption Sewage Disposal)

OWNER: MANCUM SLOAN
ADDRESS: P.O. Box 35450
Charlotte 28235

PLAT NO:
LOT SIZE: 20,000 ±

LOCATION OF SITE: Mt. Olive Church Rd

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

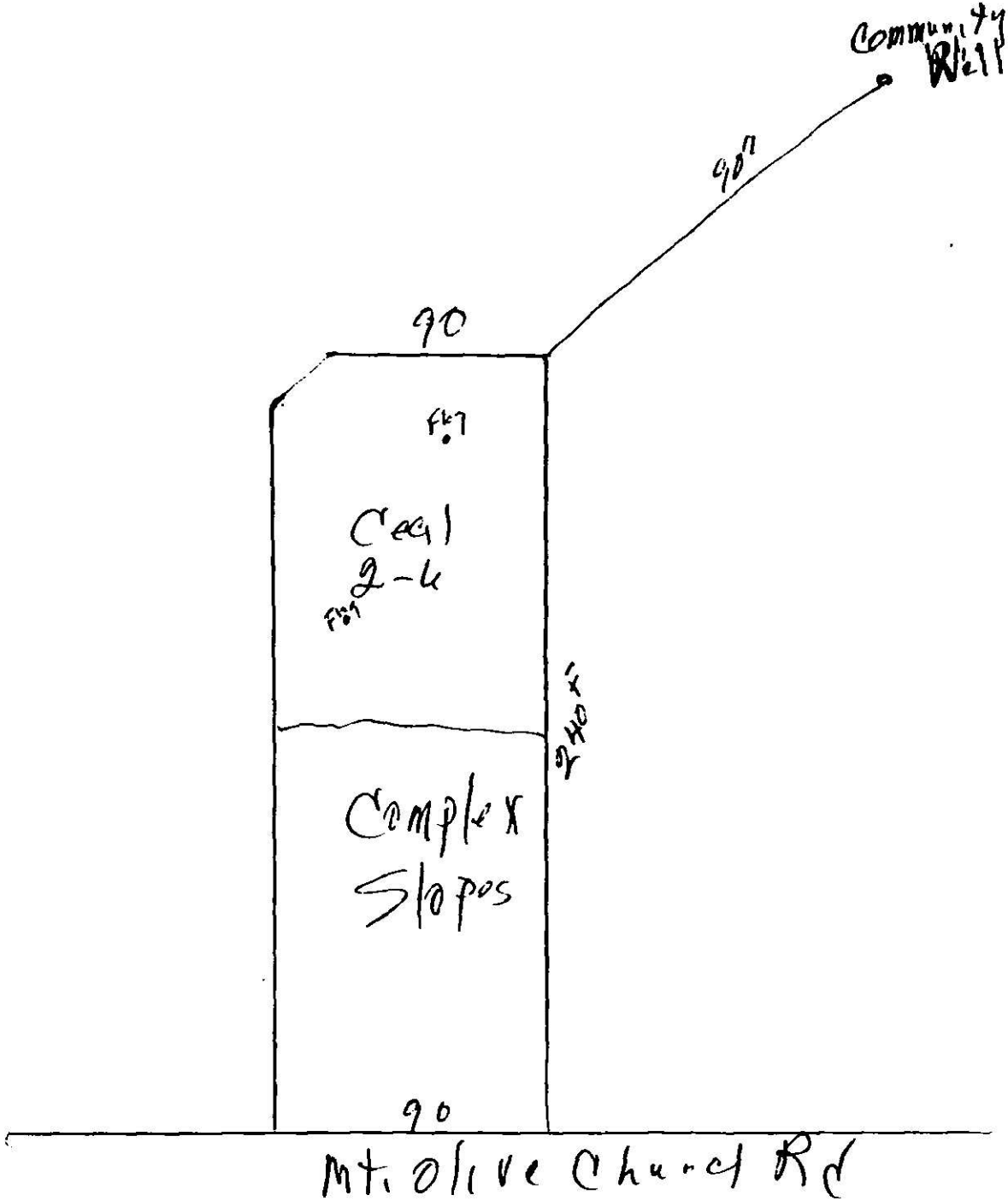
S - Suitable PS - Provisionally Suitable U - Unsuitable

**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: Soil Scientist

Date: 12-12-84


Community Well
90'
90
Flat
Cecil
2-4
Flat
240'
Complex
Slopes
90
Mt. Olive Church Rd

Serial No. 5979

SIR No. 21114

Date Issued 12-12-84

T. C. No. PO 113-164-08

Map Date L

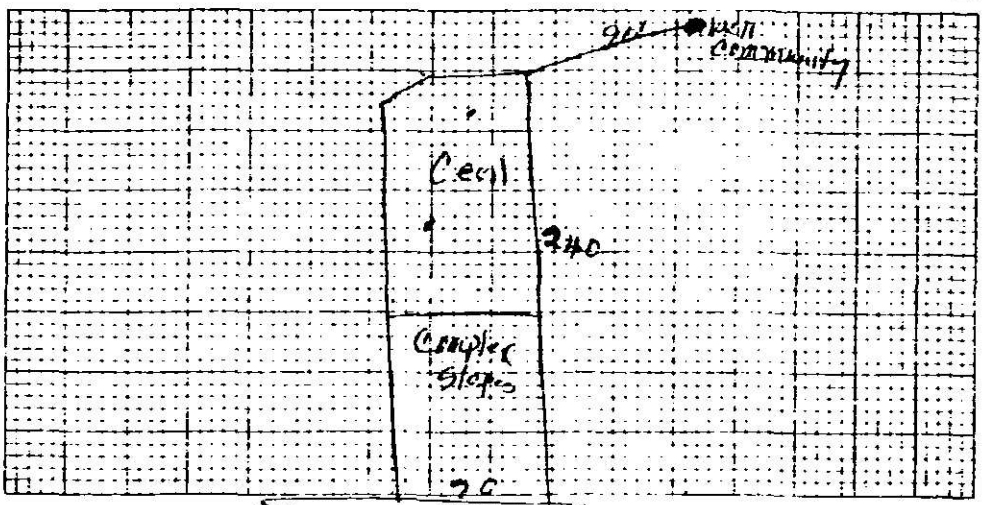
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Smoky Hollar Corp.
LAST FIRST MIDDLE

ADDRESS OF OWNER P. O. Box 35450, Charlotte, NC ZIP 28235

LOCATION OF PROPERTY Mt. Olive Church Road
STREET OR COUNTY ROAD

SUBDIVISION _____ LOT NO _____ BLOCK NO _____



PLOT PLAN

This is to certify that a soil investigation on the above property 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 plat.

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 shall be obtained from the Mecklenburg County Department of Environmental Health prior to the construction of the wastewater treatment system on the said lot.
2. The size of the septic tank and the system must be determined by the Mecklenburg County Department of Environmental Health prior to the issuance of the permit to construct the system on the above lot and on the proposed building constructed thereon.
3. This approval is valid for three years from the date of issuance of the permit to install the system as noted on the above plat.
4. This approval is based on the soil conditions encountered on the lot at the time of the investigation by the Mecklenburg County Department of Environmental Health. These conditions are indicated as acceptable for a system meeting the requirements of the Mecklenburg County Health Department. Any changes in the soil conditions from those encountered at the time of the investigation may void this approval.

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 Commissioner 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

Boyd D. Hudson
Environmental Health Director or
Authorized Section Head

EHD-5-76

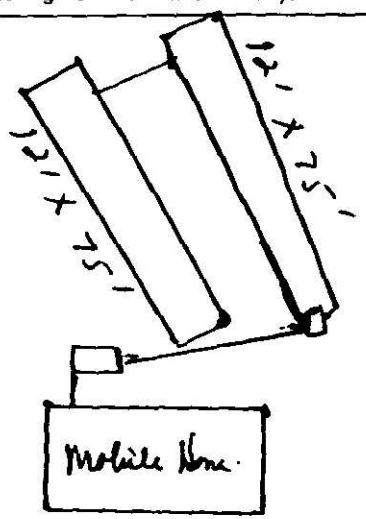
Environmental Health Department's Copy

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

FILE: 21114 DATE: 7/25/86
TC: 113-164-08 ☐ L
SERIAL Nº 10183

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 6/24/86. All work shall be completed on or before 8/30/86, 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 0 gallons
Tank Construction P.C.C.

Absorption and or Nitrification Lines:
Trench Width 12' x 75" x 2 feet
Total Line Length 600 feet
Number of Lines 4+4
Depth of Stone 12" inches
Distance from House 10' feet
Distance from Property Line 10' feet
Distance from Well 100 feet

NAME OF OWNER Jane Wilson
LOCATION OF PROPERTY 4321 Mt Olive Church Rd
Comments: Two beds 12' x 75' +17" Stone

John R Atkisson
Division or Section Head

Bob Wilson
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

Date Issued 7/8/86

Serial No. 9572

SIR No. 21114

T. C. No. 113-164-08 PO

Map Date V CK7

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 Williams, Jan
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P. O. Box 667953 ZIP _____

LOCATION OF LOT 4321 Mt. Olive Church 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 _____. 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.

Cynthia G Bass
Environmentalist

John R Albuson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department Copy

C of A (s) No. 21114

Date Issued 8/13/86 **Serial** 8740 T C. No. 113-164-08 L CFT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner William Jane. (LAST FIRST MIDDLE)

Location of Property 4321 Mt Olive Church Rd

Application Number 21114 Permit Number 21114

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material P.C.C

Total Length of Drain Tile 600' Number of Lines 4+4

Depth of Filter Material 17" Cover Depth 24"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 8/13/86 (DATE) Tank Inspected 8/13/86 (DATE)

Nitrification Field Inspected 8/13/86 (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 1500 gal ST Two Beds 12'x75' +17" 2.

Bob Wilson
Environmentalist

EHD-5-76

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