Date Received 2-19-13

APT No. 5584

T C No 135-261-45

Map Date 6-10-74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

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

2) ADDRESS OF OWNER 612 Hebron Rd ZIP

3) PHONE NO Home Office 545-1151

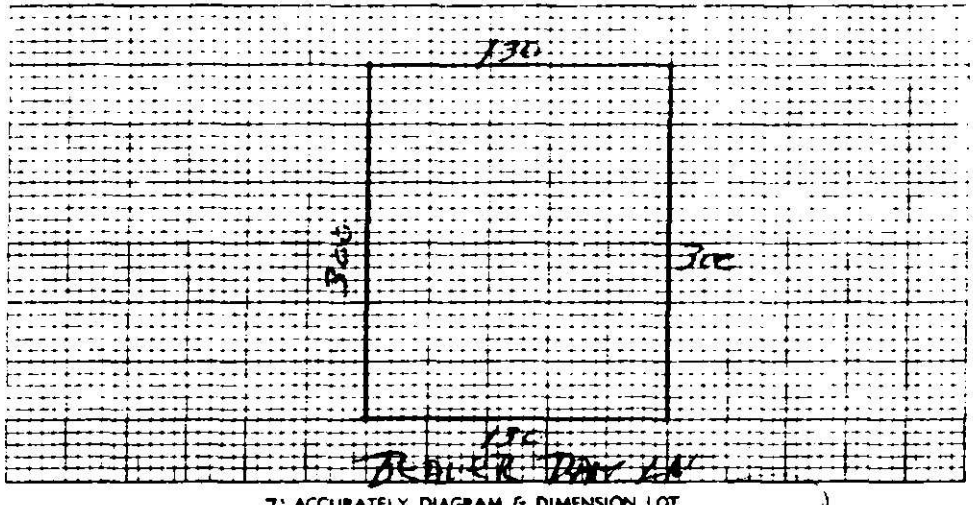
4) LOCATION OF PROPERTY Beaver Dam Lane (STREET OR COUNTY ROAD)

5) SUBDIVISION Farmwood III LOT NO 6 BLOCK NO. H

MAP BOOK NO PAGE NO

6) DEED REFERENCE DEED BOOK PAGE NO

Application is hereby made to the Mecklenburg County Health Department for the conduct of a percolation test and an on site inspection of the lot here nabove 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

OWNER

FORM NO. E-1-11-1-70

HEALTH DEPARTMENT'S COPY

Serial No. [illegible]

PTR No 5584

T C No 135-[illegible]

Date Issued April 9, 1973

Map Date 6-10-74

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

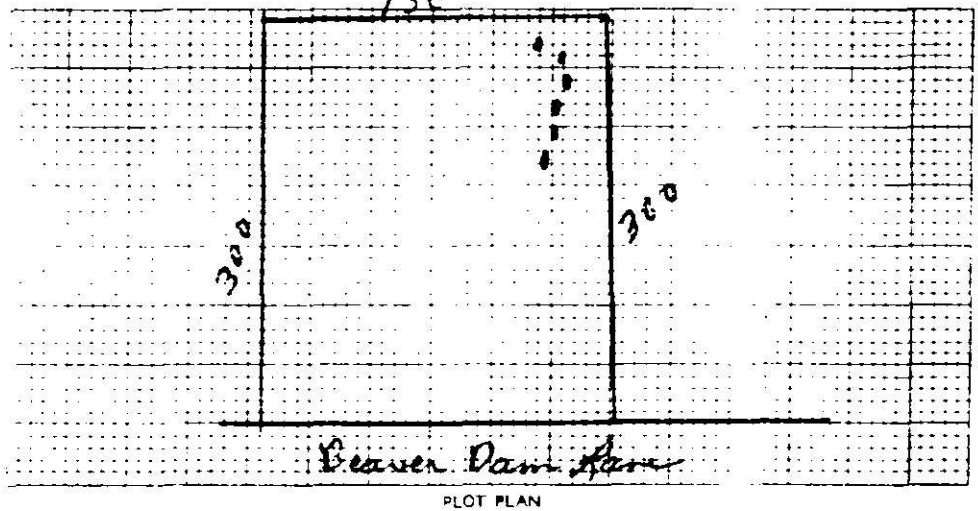
PERCOLATION TEST REPORT

NAME OF OWNER Bob McLemore & Company
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 6123 Lebanon Road, Matthews, N.C. ZIP 28105

LOCATION OF PROPERTY Beaver Dam Lane
(STREET OR COUNTY ROAD)

SUBDIVISION Farmwood VI LOT NO 6 BLOCK NO II



PLOT PLAN

This is to certify that a percolation test has been run and an on-site inspection made by the Mecklenburg County Health Department on the lot described above. The said test was conducted on that portion of the lot as indicated on above plot.

The percolation rate determined by the test was 57 min/in. 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 Health Department 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 Health Department prior to installation based on the percolation rate obtained above, and on the size and type of building constructed thereon.
3. This approval is valid only if the system is located in the immediate area where the percolation test was run.
4. This approval is void if any grading, filling, or construction including the drilling of wells is performed on the lot which in the opinion of the Health Department, renders the area where this percolation test was run unsuitable for the 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 State Board of Health and the Mecklenburg County Board of Health which were in effect on the date of issuance and is void if at any time in the future, prior to the 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.

John R. Robinson

Director, Environmental Health Division or
Authorized Section Head

FORM NO. E-2-4-1-71

HEALTH DEPARTMENT'S COPY

Date Received 4-26-73

ICAR(S) Application No. 5584

T C No. [redacted] 185-341-45

Map Date 6-10-74

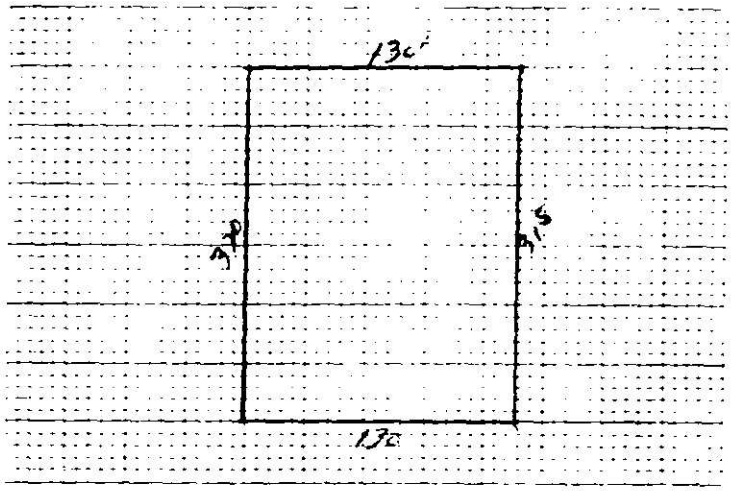
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 Health Department for a permit to

✓ Install or Construct ☐ Alter ☐ Repair an individual septic tank wastewater treatment system with subsurface soil absorption effluent discharge



3 PLOT PLAN (ACCURATELY DIMENSIONED)

4 [illegible] 4

5 Well [illegible] Yes No

7 Garbage Disposal [illegible] Yes No

8 Dishwasher [illegible] Yes No

9 Water Supply

A Individual Well

B Governmental System

C Community System

Well Private ✓

Governmental

Private System

Private Well located within 25' of [illegible]

Public Sewer [illegible] Yes No

Private Well located within 25' of [illegible]

Community Sewer [illegible] Yes ✓ No

EHA Case No. [illegible]

1 EHA Case No. [illegible]

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

14) ADDRESS OF OWNER 6129 Lebanon Road

15) PHONE NO. Home [illegible] Office 545 4507

16) LOCATION OF SYSTEM 5911 Beaver Dame Lane
STREET OR COUNTY ROAD

17 SUBDIVISION Farmwood 6 Lot No. 6 Block No. H

Map Book No 17 Page No 81

18) DEED REFERENCE — DEED BOOK [illegible] AT PAGE [illegible]

19 HAS A PERCOLATION TEST BEEN RUN? X YES ____ NO DATE RUN 4-11-73

20) PTR NUMBER See Instructions 5584

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.

4-25-73
DATE OF APPLICATION

[signature] OWNER

FORM NO. E 4-4-[illegible]

HEALTH DEPARTMENT'S COPY

Date Issued April 26, 1973

Serial No. 2807

LA No. 5584

T C No 135-261-45

Map Date 6-10-74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 & Company, Inc. (LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 6129 Lebanon Road, Matthews, N.C. ZIP 28105

LOCATION OF LOT 5911 Beaver Dam Lane (STREET OR COUNTY ROAD)

SUBDIVISION Farmwood 6 LOT NO 6 BLOCK NO H

MAP BOOK NO 17 PAGE NO 81

The above specified lot is approved by the Mecklenburg County Health Department for the installation of an individual septic tank system with subsurface, soil absorption effluent discharge based on the percolation test results which yielded a percolation rate of 57 min/in 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 5584. 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 percolation test 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 permits 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

Thomas R. Ward — Environmentalist

John R Atkinson — Director, Environmental Health Division or Authorized Station Head

FORM NO E 3-4-1 71

HEALTH DEPARTMENT'S COPY

Serial No. 4127

Date Issued 8-9-73

ICAR (S) Permit No. 5594

T C No. 135-

Map Date 6-10-74

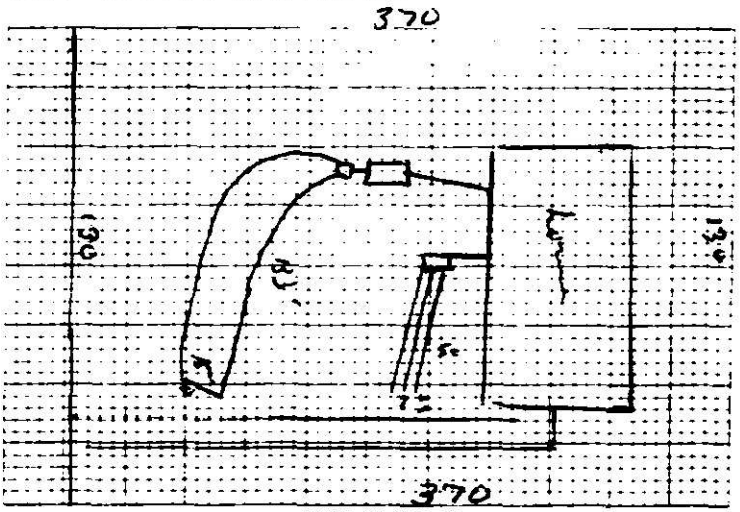
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTRUCTION, 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 5594, dated 4-26-73 and this permit shall be void if any information provided in the application is not true. A work shall be completed on or before 9-9-73 after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 1500 gal.

Tank Construction pre cast con.

Absorption and/or Nitrification Lines

Total Line Length 195'

Number of Lines 6

Distance from House 0'

Distance from Property Line 10'

Distance from Well NA

NAME OF OWNER Bob McLemore & Co.

LOCATION OF PROPERTY 5911 Beam Dam Rd (G-H)

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used.

Comments: 15 x 135 x 1½" - crushed stone
washed ½" x 5" x ½" stone
G. M. Shamell & Son

Division or Section Head

Thomas R. Ward
Environmentalist

* If this permit is for the installation or construction of a new system, it must be signed by the division or section head of the Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

FORM NO E 5-4-1-71

HEALTH DEPARTMENT'S COPY

Serial 3765

Date Issued 8-17-73

C of A (s) No. 5584
261-45

T C No. 135-
6-10-74

Map Date Oct-20

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 5911 Beaver Dam Lane

Application Number 5584 Permit Number 5584

Inspection Data:

Liquid Capacity of Tank 1500 gal. Tank Material Precast Conc.

Total Length of Drain Tile 795' Number of Lines 6

Depth of Filter Material 17" Cover Depth 18"

Water Supply Source Comm. Wells Distance from Water Source —

Excavation Inspected 8-17-73 (DATE) Tank Inspected 8-17-73 (DATE)

Nitrification Field Inspected 8-17-73 (DATE)

Washing Machine Line Inspected, If Applicable 8-17-73 (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 Board of Health 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: Installed by G. M. Shuill & Son

Thomas R. Ward
Environmentalist

FORM NO E-6-4-1-71

HEALTH DEPARTMENT'S COPY