Date Received 3-7-74 APT No 7585

T C No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Thomas (LAST) William (FIRST) P. (MIDDLE)

2) ADDRESS OF OWNER 4921 Nelson Ln Matthews ZIP 28105

3) PHONE NO Home 545-[illegible] Office 554-[illegible]

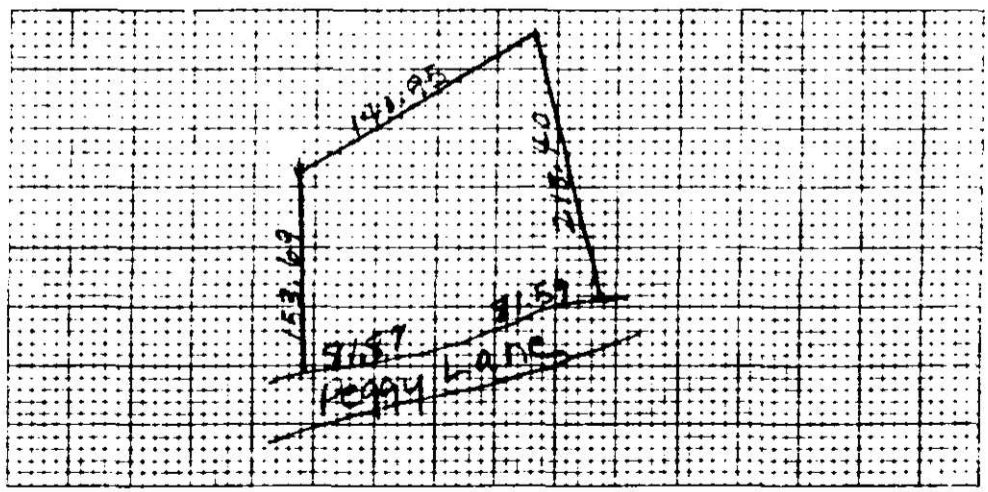
4) LOCATION OF PROPERTY 3826 Peggy Lane (STREET OR COUNTY ROAD) Matthews

5) SUBDIVISION N.E. Thomas Property LOT NO 12 BLOCK NO A

MAP BOOK NO 17 PAGE NO 252

6) DEED REFERENCE DEED BOOK 3E 2 PAGE NO 526

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 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

W. P. Thomas
OWNER

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

HEALTH DEPARTMENT'S COPY

Serial No 4121

PTR No 7585
P.O.
T C No 195-041-22

Date Issued March 12, 1974

Map Date 12-14-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

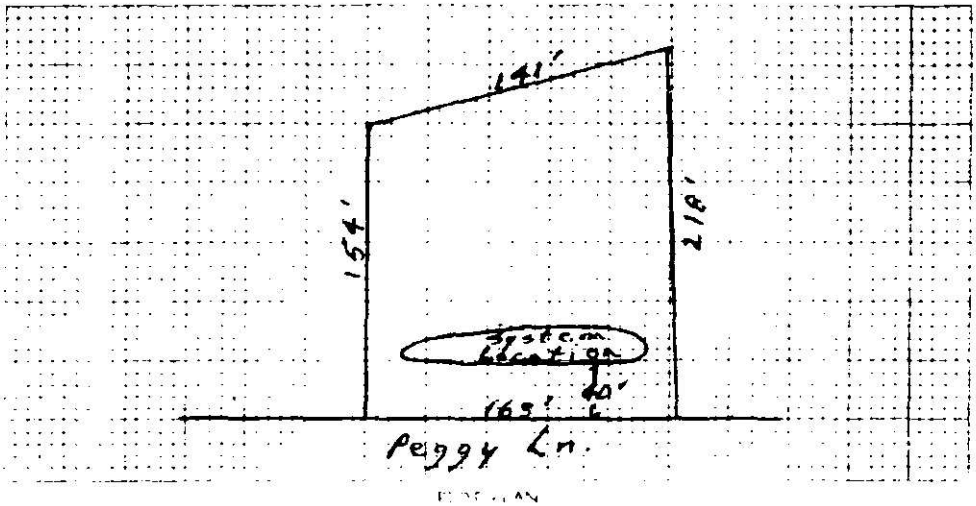
PERCOLATION TEST REPORT

NAME OF OWNER Mr Thomas (LAST) William (FIRST) P. (MIDDLE)

ADDRESS OF OWNER 4901 Meliana Lane, Matthews, N.C. ZIP 28105

LOCATION OF PROPERTY 3516 Peggy Lane (STREET OR RFD)

SUBDIVISION W. P. Thomas Property LOT NO 12 BLOCK NO A



PLOT PLAN

This is to certify that [illegible] Mecklenburg County Health Department [illegible] described above. The soil test was located in that portion of the lot as indicated on above plot.

The percolation rate determined from the test was 60*min./in. The [illegible] approved for the installation of [illegible] absorption effluent discharge subject to the following terms and conditions:

1. A permit for [illegible] Mecklenburg County Health Department [illegible] system on the lot.
2. The [illegible] wastewater treatment system which must be installed [illegible] determined by the Health Department [illegible] on the plot plan and which shall have a minimum size and type of building constructed thereon.
3. The [illegible] shall be installed in the manner and [illegible] percolation test was run.
4. This approval [illegible] wells are performed on the lot which [illegible] plot plan. Only those [illegible] will be suitable for the installation [illegible] such a system.

This approval is subject to the laws of the State of North Carolina and the rules and regulations of the North Carolina State Board of Health or the Mecklenburg County Board of Health which were in effect on the date of issuance and are applicable to the [illegible] 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.

*Results determined by soil analysis

W. Everette Lyon, Jr. — Soil Scientist

M. D. Lisby — Director, Environmental Health Division or Authorized Section Head

FORM NO E-2-9-1-72

HEALTH DEPARTMENT'S COPY

Date Received MECK COUNTY DEPARTMENT OF RECEIVED

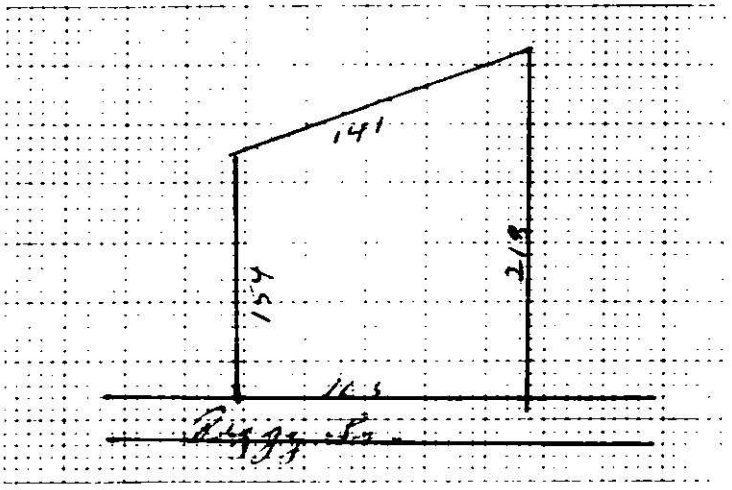
ICAR(S) Application No 7585
T C No 195-041-22
Map Date 12-14-73

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL [illegible] 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 or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption, effluent discharge



3 PLOT PLAN (ACCURATELY DIMENSIONED)

13) NAME OF OWNER Thomas (LAST) William (FIRST) F. (MIDDLE)

14) ADDRESS OF OWNER 4411 Nilwood Ln, Charlotte, N.C. 28212

15) PHONE NO Home 545-4993 Office None

16) LOCATION OF SYSTEM 3836 Riggs Farm (STREET OR LOCATION ROAD)

17) SUBDIVISION W. P. Thomas (prop.) Lot No 12 Block No H

Map Book No 17 Page No 252

18) DEED REFERENCE — DEED BOOK 3523 AT PAGE 526

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES NO DATE RUN 5-11-74 SB

20) PTR NUMBER (See instructions) 7585

The undersigned person hereby agrees that he has read the foregoing application and that the statements of same are true. It is understood that any permit applied for hereunder shall be void and of no effect if any of the above facts are not true.

Nov. 28, 1977
DATE OF APPLICATION

W. P. Thomas
OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 1375

LA No. 7585

Date Issued November 29, 1977

T C No. P.O.195-041-22

Map Date 12-14-73

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT
IMPROVEMENT PERMIT
APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Thomas (LAST) William (FIRST) P. (MIDDLE)

ADDRESS OF OWNER 4901 Melissa Lane, Charlotte, NC ZIP 28212

LOCATION OF LOT 3836 Peggy Lane (STREET OR COUNTY ROAD)

SUBDIVISION ____ LOT NO. 12 BLOCK NO. A

MAP BOOK NO 17 PAGE NO 252

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 7585 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, altred, 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

Environmentalist

Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued 3 May 77

Serial No. 1560

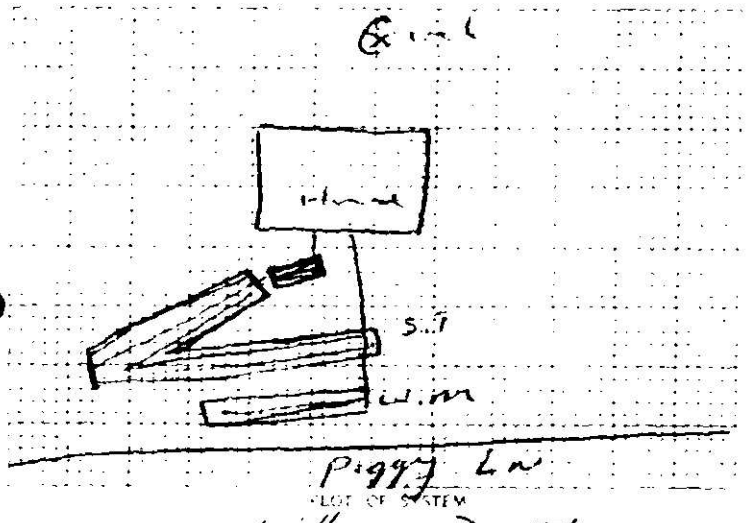
ICAR S[illegible] Permit No. 7555

T C [illegible], 95-041-12

Map Date 12-14-73

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 [illegible] septic tank wastewater treatment [illegible] with subsurface, soil absorption effluent discharge [illegible] at the described location [illegible] This permit is granted based upon the information supplied [illegible] 7555 dated 11/24/77 [illegible] this permit shall be void and of no effect if the [illegible] in the application [illegible] A work authorized by this permit must be completed within 5 years after which date this permit shall be void.



PLOT OF SYSTEM

PS

1500 gal Pre Cast

495' : 125

4 : 3

10'

10'

90°

NAME OF OWNER William P Thomas

LOCATION OF PROPERTY 3936 Piggy Ln

This [illegible] requirements set forth in the Regulations of the Mecklenburg County Health Department [illegible] effect on the date of granting this permit. A certificate of approval [illegible] by the Environmental Health Director before any system can be covered up or otherwise rendered unin[illegible] 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.**

Comments

(12' x 124' x 17" stone) S.T.

*(option 15' x 99' x 17" stone) S.T.

WM (9' x 42' x 17" stn)

[illegible] Test

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

Environmental Health Department's Copy

Date Issued 5 May 78

Serial No. 1521

C of A (s) No 7585

T C No 195-C-1102

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF COMPLETION
CERTIFICATE OF APPROVAL

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

Name of Owner Thomas (LAST) William (FIRST) P. (MIDDLE)

Location of Property 3336 Peggy Ln.

Application Number 7595 Permit Number 7595

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material Pre Cast

Total Length of Drain Tile 475' & 125' Number of Lines 4 & 3

Depth of Filter Material 17" Cover Depth 20"

Water Supply Source Well Distance from Water Source 30'

Excavation Inspected 5 May 78 (DATE) Tank Inspected 5 May 78 (DATE)

Nitrification Field Inspected 5 May 78 (DATE)

Washing Machine Line Inspected If Applicable 5 May 78 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent disposal as described above and it has been installed / reconstructed in accordance with the permit issued and the requirements of the Mecklenburg County Health Department at the time of issuance of the permit. The issuance of this Certificate of Approval does not, in any way, guarantee that the system will operate satisfactorily or relieve any person now or hereafter owning the property served by such system from any liability arising from the failure of the system to operate satisfactorily. This Certificate of Approval is issued subject to the use restrictions and conditions set forth 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: Accept - Staplawn used instead of Fescue - Lime & seed

Environmentalist

EHD-5-76

Environmental Health Department's Copy

Date Received 3/26/12 Apt. No. (S) _____ Application No. _____

T. C. No. 195-091-22

Map Date 12-14-73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Roush (LAST) Terry (FIRST) L (MIDDLE)

ADDRESS OF OWNER 1931-B Evelyn Dr. ZIP 28205

PHONE NO. Home 537-3093 Office 334-5353

LOCATION OF PROPERTY 3321 Peggy Ln. (STREET OR COUNTY ROAD)

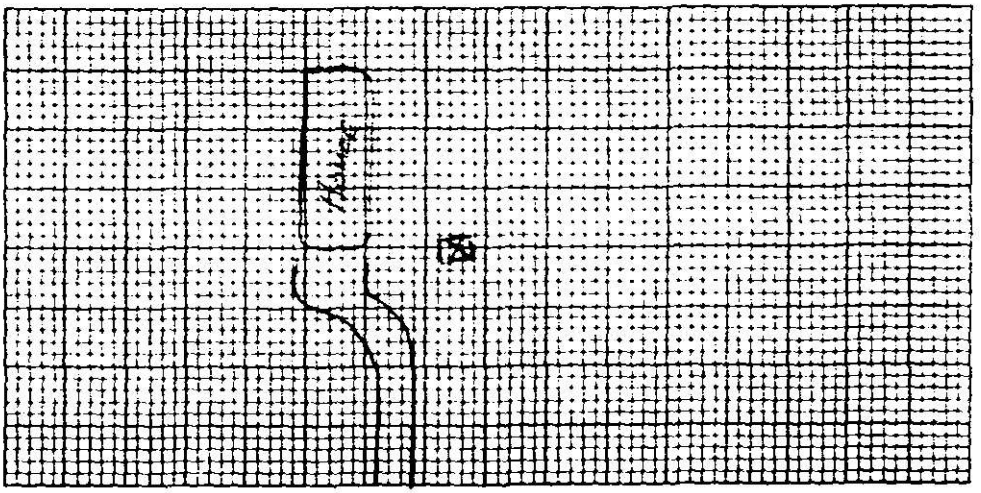
SUBDIVISION _____ LOT NO. 13 BLOCK NO 17

MAP BOOK NO. _____ PAGE NO. _____ FHA LOAN

DEED REFERENCE: DEED BOOK _____ PAGE NO _____ VA LOAN

WELL CONTRACTOR _____ LICENSE NO. _____

Application is hereby made to the Mecklenburg County Health Department for a permit to drill a water well on the hereinabove described lot to be used as a source of _ _ individual, _____ semi public, or _____ public water supply



ACCURATELY DIAGRAM & DIMENSION LOT

3/26/12
DATE OF APPLICATION

Terry L Roush
OWNER

Application approved and permit hereby granted

Permit No: 7586

ENVIRONMENTALIST

FORM NO. E-20-5-1-73 HEALTH DEPARTMENT'S COPY