Date Received 6-7 84

SIR No. 21125

T. C. No. 2 2.3 -381-10

Map Date L

# MECKLENBURG COUNTY
# DEPARTMENT OF ENVIRONMENTAL HEALTH

## APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER King (LAST) Candace (FIRST) W. (MIDDLE)

2) ADDRESS OF OWNER 3819 Dunlanwood Circle, Matthews ZIP 28105

3) PHONE NO. Home 542-9617 Office 542-7215

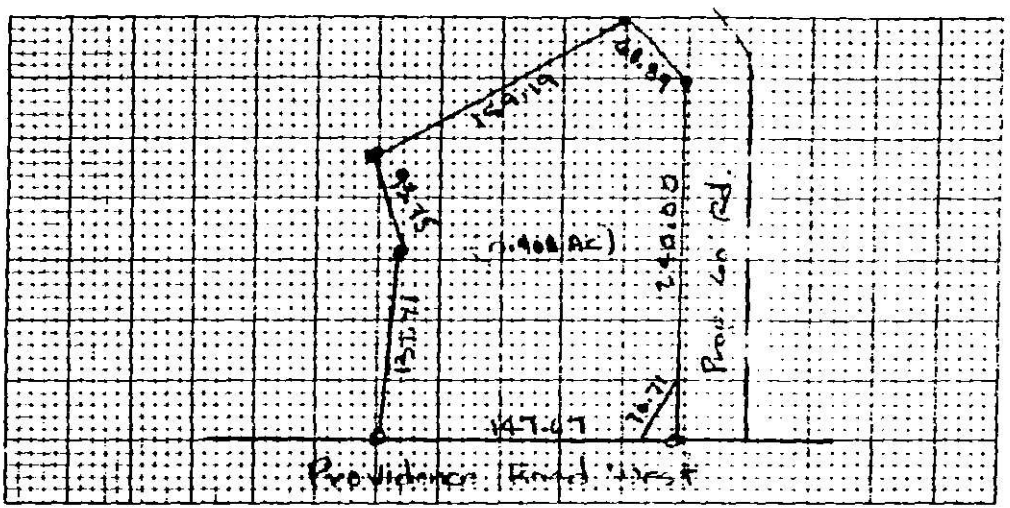
4) LOCATION OF PROPERTY 8710 Providence Road West (STREET OR COUNTY ROAD)

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

MAP BOOK NO _____ PAGE NO _____

6) DEED REFERENCE DEED BOOK 4614 PAGE NO 877

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




7) ACCURATELY DIAGRAM & DIMENSION LOT

~~King~~ Candace W. King
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT S COPY

Serial No. 5706

SIR No. 21125

Date Issued 6-20-06

T. C No. 223-281-19

Map Date 2

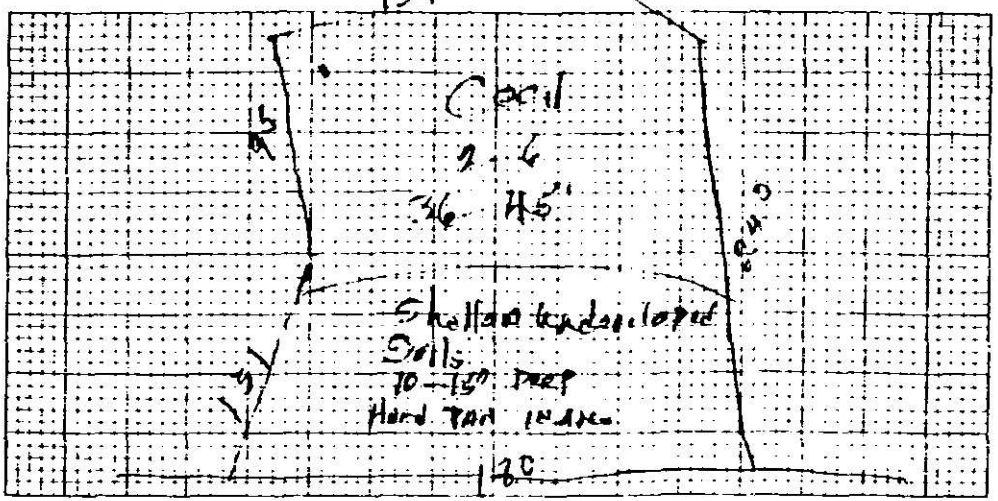
# MECKLENBURG COUNTY
# DEPARTMENT OF ENVIRONMENTAL HEALTH
## SOIL INVESTIGATION REPORT

NAME OF OWNER King, W Cancace
LAST FIRST MIDDLE

ADDRESS OF OWNER 3616 Dunlanwood Dr., Matthews, NC ZIP 28105

LOCATION OF PROPERTY 8719 Providence Road west
STREET OR COUNTY ROAD

SUBDIVISION 159 LOT NO BLOCK NO




PLOT PLAN

This is to certify that a soil investigation and on-site inspection 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 system must be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction of the wastewater treatment system on the said lot.
2. The size of the septic tank and wastewater treatment unit and the total trench bottom area shall be determined by the Mecklenburg County Department of Environmental Health at the time of application for a permit to install the system on this lot above and on the size and type of unit and as indicated thereon.
3. This approval is for the system as stated only and does not guarantee that a satisfactory system installation can be made on the above lot.
4. This approval is granted only after a thorough investigation of the soil and other conditions on the lot which in the opinion of the Mecklenburg County Department of Environmental Health indicates the lot as acceptable for system installation. Failure to install a system that functions properly in accordance with these regulations may require the repair or replacement of the system at the owner's expense.

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 at 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 laws and 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

Date Issued 7/22/86

Serial No. 9578

SIR No. 21126

T. C. No. 223-281-10

Map Date L CR 7

# 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 Horton, James Edward
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 2243 Falmouth Road, Charlotte ZIP 28205

LOCATION OF LOT 8710 Providence Road, West
(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.

Bob Wilson
Environmentalist

John R. Atkinson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21125

T.C. NO. 293-281-10

(Ground Absorption Sewage Disposal)

OWNER: CANDACE W. KING PLAT NO:
ADDRESS: 3719 Dunlenwood Circle LOT SIZE: 90 FA
MATTHEWS 28105
LOCATION OF SITE: 8716 Providence Rd West

| FACTORS | AREA 1 | AREA 2 | AREA 3 | AREA 4 |
|---|---|---|---|---|
| 1. SLOPE (%) | S (PS) U 2-4 | S PS U | S (PS) U 2-6 | 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 clayey | S PS U |
| 3. SOIL STRUCTURE (12-36 inches) | S (PS) U Blocky | S PS U | S (PS) U Blocky | S PS U |
| 4. SOIL DEPTH (inches) | S PS (U) 8-12" | S PS U | S (PS) U 36-48 | S PS U |
| 5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock) | S Almost None (U) Hard Pan | S PS U | S (PS) U None | S PS U |
| 6. SOIL DRAINAGE/GROUNDWATER (external and internal) | S PS slow (U) | S PS U | S (PS) U Adequate | S PS U |
| 7. OTHER (Specify) | S PS U | S PS U | S PS U | S PS U |
| 8. SOIL GROUP | IVa | | IVa | |
| 9. SITE CLASSIFICATION | Unsuitable | | Pisuitable | |
| 10. SOIL SERIES | Undeveloped Area | | Cecil | |

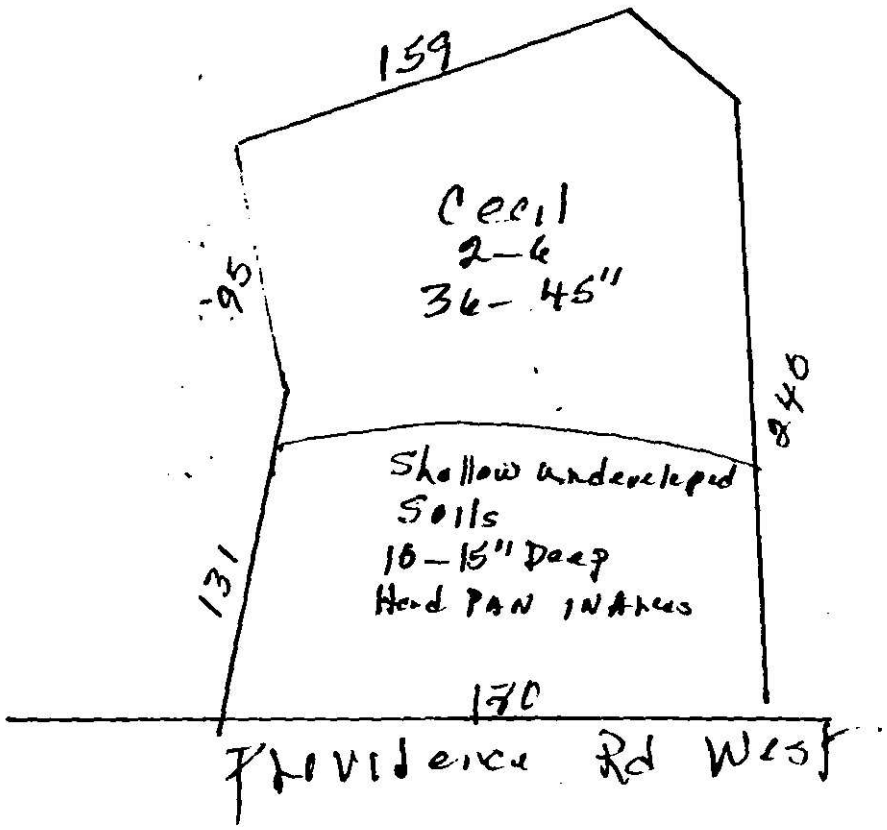
S - Suitable PS - Provisionally Suitable U - Unsuitable

**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: 6-19-84


159
Cecil
2–6
36–45"
95
240
Shallow undeveloped
Soils
16–15" Deep
Hard PAN Within
131
170
Providence Rd West

# INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

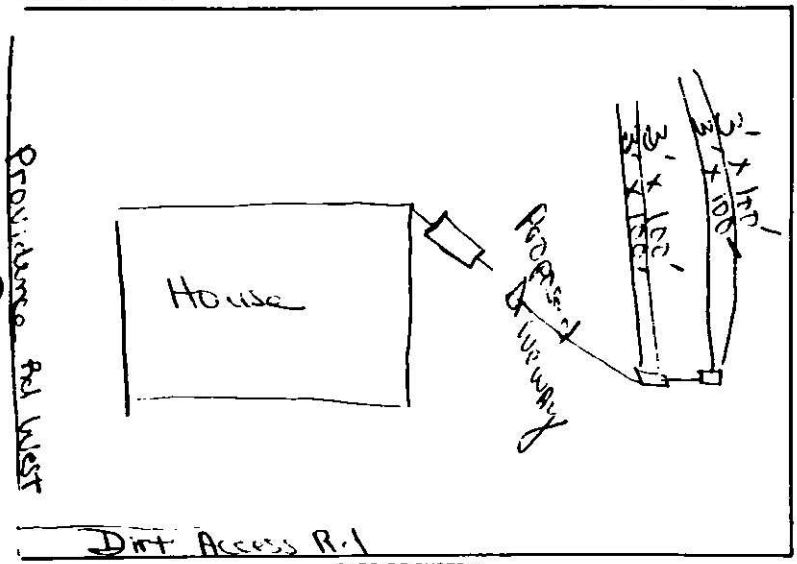
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 2123 DATE: 4/6/87

TC: 223-281-10 ☐ L

SERIAL № 10774

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 12/1/86. All work shall be completed on or before 5/6/87, 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 PRECAST

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 400' feet

Number of Lines 4

Depth of Stone 12" inches

Distance from House 5' feet

Distance from Property Line 10' feet

Distance from Well Not In feet

NAME OF OWNER Horton James

LOCATION OF PROPERTY 8717 Providence Rd. West

Comments: Install In 4 Trenches 3' x 100', 12" Stone. With Straw Cover.

S. Lenk R.S.
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: 2125 DATE: 4/10/87

TC 223-281-10 ☐ L ☐ CRT

SERIAL № 10022

Name of Owner Horton, James Juris.:

Address of Property 8710 Providence Rd. West

**Inspection Data:**

Tank Material Pre-Cast

Total Length of Drainfield 400

Number of Lines 4 @ 100

Cover Depth 12-18"

Water Supply Source Well

Distance to Water Source 75'

Excavation Inspected 4/9/87

Tank(s) Inspected 4/9/87

Wash Line Inspected N/A

High Water Alarm Inspected —

PLOT

Design: 1987 1500 Stcm 1200 SFT Cecil CTR#

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: System Installed for 3 bedroom Home

Marsh Enterprises, Inc. Wingate

Judy J. Kuin R.S.
Environmentalist

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

Date Received [illegible] RECEIVED

SEE INSTRUCTIONS ON BACK

ICAR(S) Application No 21125

T C. No. 223-281-1C

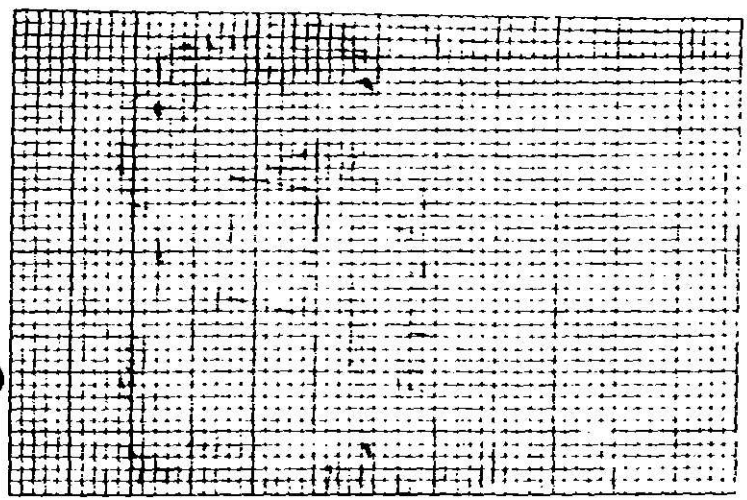
Map Date _____

# 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

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 — May No
Employees 1 1 =
6) Washing Machine ✓ Yes ___No
7) Garbage Disposal ___Yes ✓ No
8) Dishwasher ✓ Yes ___No
9) Water Supply
A) Indiv. dual 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 _____ (LAST) _____ (FIRST) _____ (MIDDLE)

14) ADDRESS OF OWNER _____

15) PHONE NO. Home _____ Office _____

16) LOCATION OF SYSTEM _____ (STREET OR COUNTY ROAD)

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

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ___ NO DATE RUN 6-3-86

20) PTR NUMBER (See Instructions) 2[illegible]

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.

7/21/86
DATE OF APPLICATION

James Edward Hester
OWNER

EHD-5-76

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