NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX H
SITE EVALUATION

015-131-02
14413
~~1-9-57~~

(Ground Absorption Sewage Disposal)

OWNER: James H Shorrell DATE REQUESTED: 8-4-78
ADDRESS: Rt 5 Box 75 PLAT NO.:
COUNTY: Statesville, N.C. LOT SIZE: 44,000±
LOCATION OF SITE: Nc Hwy 21 Statesville
875-2615

| FACTORS | AREA 1 | AREA 2 | AREA 3 | AREA 4 |
|---|---|---|---|---|
| 1. SLOPE (Z) | S (PS) 2-10% U | S PS U | S PS U | S PS U + |
| 2. SOIL TEXTURE (12-36 in.) (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 in.) (Clayey Soils) | S (PS) Blocky U | S PS U | S PS U | S PS U |
| 4. SOIL DEPTH (In.) | (S) PS 48" U | S PS U | S PS U | S PS U |
| 5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock) | (S) PS None U | S PS U | S PS U | S PS U |
| 6. SOIL DRAINAGE/GROUNDWATER (External & Internal) | S Well To (PS) Carrying Water U | S PS U | S PS U | S PS U |
| 7. SOIL PERMEABILITY (Percolation Rate) | S (PS) U Moderate | S PS U | S PS U | S PS U |
| 8. OTHER (Specify) | S Adequate (PS) AREA U | S PS U | S PS U | S PS U |
| 9. SITE CLASSIFICATION | Provisionally Suitable | | | |
| SOIL SERIES | | | | |

S - Suitable PS - Provisionally Suitable U - Unsuitable

* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

Recommendations/Comments:

Described By: Marshall Edwards

Title: Sanit II Date: 8-4-78

DHS Form 2601 (2777)
Sanitarian

14413

Serial No. 2105

PTR No. [redacted]

T. C. No. p.o. 015-071-02

Date Issued August 8, 1978

Map Date

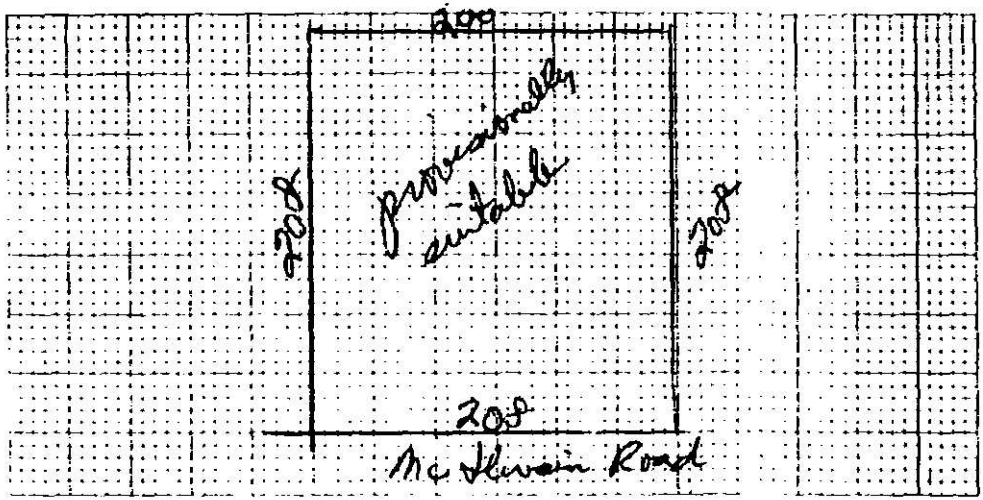
# MECKLENBURG COUNTY
# DEPARTMENT OF ENVIRONMENTAL HEALTH
## SOIL INVESTIGATION REPORT

NAME OF OWNER Sherrill (LAST) James (FIRST) H. (MIDDLE)

ADDRESS OF OWNER Route 3, Box 210, Huntersville, N.C. ZIP

LOCATION OF PROPERTY McIlwain Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO




PLOT PLAN

This [illegible] investigation [illegible] by the Mecklenburg County Department of Environmental Health [illegible]. The soil investigation was conducted so that [illegible] of the lot can be determined.

The permeability rate determined by the investigation was **provisionally suitable**. 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. [illegible] the Mecklenburg County Department [illegible] the wastewater treatment system [illegible].
2. [illegible] by the Mecklenburg [illegible] Department [illegible] and on [illegible].
3. [illegible] a temporary installation [illegible].
4. [illegible] met in the [illegible] acceptable for [illegible].

This [illegible] and in accordance with the State of North Carolina laws and regulations governing Sanitary Engineering, the Department of Human Resources, Division of Health Services, and the Mecklenburg County Health Commission which [illegible] and shall if not on time in the future [illegible] of the items listed above and regulations are changed such that this approval would not have been granted if the new revised laws, rules and regulations been in effect on the issue date.

Environmentalist

Environmental Health Director or Authorized Section Head

[illegible] Copy

RECEIVED
Date Received SEP 25 1978
ENVIRONMENTAL HEALTH

SEE INSTRUCTIONS ON BACK

ICAR(S) Application No. 114139 12457

T. C No. P.O. 015-071-02

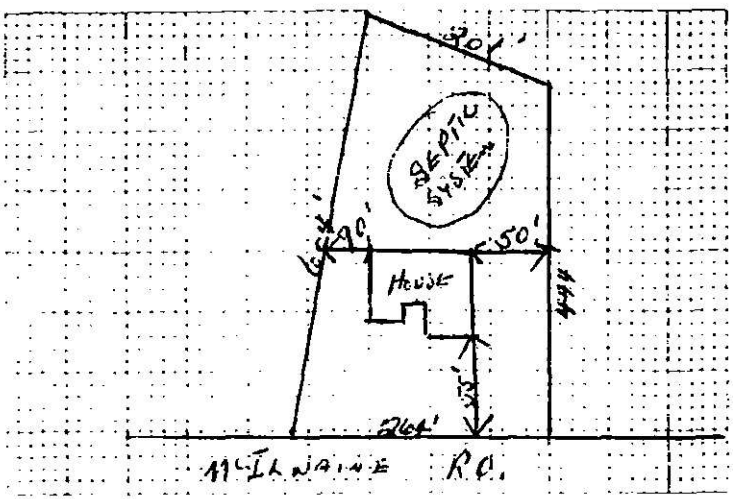
Map Date

# 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 ? Alter or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption, effluent discharge.




2) PLOT PLAN (AS CLEARLY AS RECOMMENDED)

3) Mobile Home Yes ___ No ___
4) Residence ✓ Yes ___ No ___
5) No. of Bedrooms 3
6) Business Use Max No Employees ___
7) Washing Machine ✓ Yes ___ No
8) Garbage Disposal ___ Yes ✓ No
9) Dishwasher ✓ Yes ___ No
10) Water Supply
A) Individual Well ✓
B) Environmental System ___
C) Community System
1) Well Source ___
2) Environmental Source ___
Sewage System
Is property located within 200 feet of public sewer? Yes ___ No
Is property located within 200 feet of community sewer? Yes ___ No
EHA Case No. ___
LA 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 SITE VISIT BEEN MADE? ✓ YES NO DATE RUN 9/2/78 → ?
20) PERMIT NUMBER 12457

The undersigned property owner attests that he has read the foregoing application and that the contents of same are true to the best of his knowledge and that the permit applied for herein shall be void and of no effect if any of the above facts are not true.

9-25-78
DATE OF APPLICATION

OWNER

Environmental Health Department's Copy

Serial No. 2254

LA No. 14413

Date Issued September 25, 1978

T. C. No. P.0.015-071-02

Map Date

# 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 Flynn (LAST) Kelly (FIRST) D. (MIDDLE)

ADDRESS OF OWNER McIlwaine Road, Huntersville, NC ZIP 28078

LOCATION OF LOT McIlwaine 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 14413 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 interment contained in the "Application for an Installation, Construction, Alteration, and/or Repair Permit" is not correct as 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

Marshall Edwards
Environmentalist

John R. Allison
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Serial No. 2665

Date Issued 16 May 1979

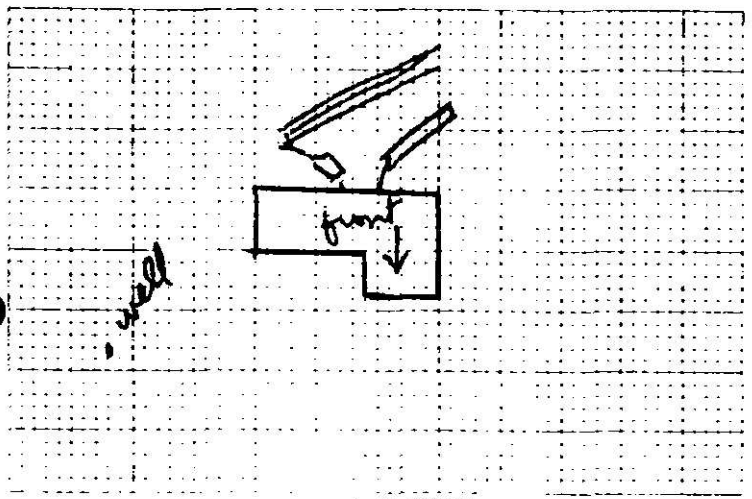
ICAR(S) Permit No. 14413

T. C. No. 015-071-06

Map Date —

# 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 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 14413, dated 9-22-78 and this permit shall be void and of no effect if the information provided in the application is not true and accurate. All work shall be completed on or before 15 June 1979 after which date this permit shall be null and void.




Permitted Use Rate: present

Liquid Capacity of Tank: 1500 gal

Type of Construction: present

Absorption Area or Disinfection Unit: —

Total Line Length: 495 & 125

Number of Lines: 5 & 4

Distance from Line to Well: 10'

Distance from Line to Property Line: 10'

Distance from Line to Water: 100'

PLAT OF SYSTEM

NAME OF OWNER: Flynn, Kelly D

LOCATION OF PROPERTY: McIlwaine Rd

This system shall meet all construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health in effect on the date of the granting of this permit. A certificate of approval shall be issued by the Health Department before any system can be covered up or otherwise rendered inaccessible for inspection.

Comments: bed is 5'x96'x17"
wash line 12x3'x17"

THE ISSUANCE OF THIS PERMIT DOES NOT IN ANY WAY GUARANTEE THAT THE SYSTEM AS INSTALLED OR CONSTRUCTED WILL OPERATE PROPERLY OR RELIEVE ANY PERSON NOW OR HEREAFTER OWNING, CONTROLLING OR USING THE SYSTEM FROM ANY LIABILITY RESULTING FROM THE FAILURE OF THE SYSTEM TO OPERATE PROPERLY.

Division Section Head: John R Adkisson — 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-5-76

Yellow Copy for Health Department's Copy

Date Issued 5-22-79 Serial No. 2627 C of A (s) No. 14413

T C. No. 015-071-06

# 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 Flynn (LAST) Kelly (FIRST) D. (MIDDLE)

Location of Property McIlwaine Road

Application Number 14413 Permit Number 14413

**Inspection Date:**

Liquid Capacity of Tank 1500 gallons Tank Material precast concrete

Total Length of Drain Tile 495'+125' Number of Lines 5+4

Depth of Filter Material 17" Cover Depth 18"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected — Tank Inspected 5-22-79 (DATE)

Nitrification Field Inspected 5-22-79 (DATE)

Washing Machine Line Inspected, If Applicable 5-22-79 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been ✓ installed / constructed, altered / repaired in accordance with the permit issued and the regulations of the Mecklenburg County Health Commission effective 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, using, living or doing 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 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:

Michael A. Sexton
Environmentalist

EHD-5-76

Environmental Health Department's Copy