Date Received 7-8-74

Application No. 7530

T. C. No. 143-334.35

Map Date 6-10-74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Klutts Realty & Construction Co., Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 1433 Emerywood Dr., Charlotte, NC ZIP 28210

PHONE NO. Home 525-5265 Office same

LOCATION OF PROPERTY 1101 Reid Harkey Road
(STREET OR COUNTY ROAD)

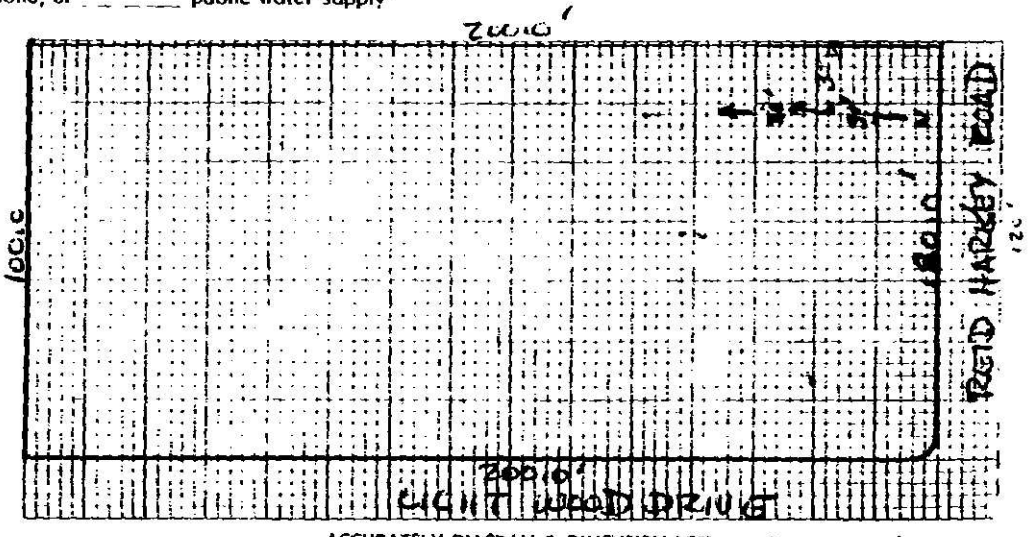
SUBDIVISION Wood Hollow LOT NO. 35 BLOCK NO 3

MAP BOOK NO. 17 PAGE NO. 71

DEED REFERENCE: DEED BOOK _____ PAGE NO. _____

WELL CONTRACTOR [illegible] LICENSE NO. 232

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 _x_ individual, _____ semi public, or _____ public water supply



ACCURATELY DIAGRAM & DIMENSION LOT

February 14, 1974
DATE OF APPLICATION

Robert D. Beam Jr.
OWNER

Vice President, Klutts Realty & Construction Co., Inc.

Application approved and permit hereby granted

Permit No: 7530

M. A. Kirby
ENVIRONMENTALIST

FORM NO. E-20-9-1-72

HEALTH DEPARTMENT'S COPY

Date Received 2-26-74

APT No 7530

T C No 193-334.35

Map Date 6-10-74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Klutts Realty & Construction Co., Inc.
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER 1433 Emerywood Dr., Charlotte, NC ZIP 28210

3) PHONE NO Home 525-5265 Office same

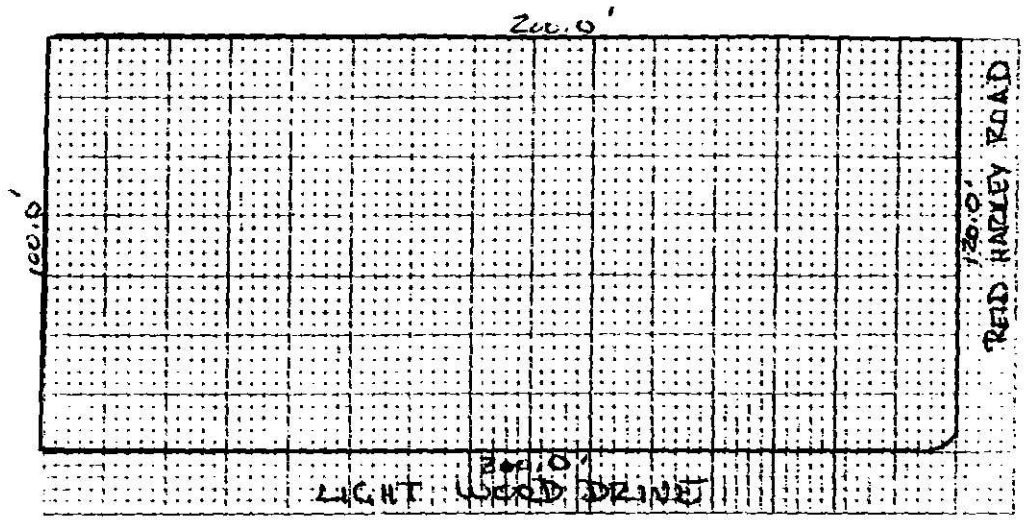
4) LOCATION OF PROPERTY 1101 Reid Harkey Road
(STREET OR COUNTY ROAD)

5) SUBDIVISION Wood Hollow LOT NO 35 BLOCK NO 3

MAP BOOK NO 17 PAGE NO 71

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 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

Charles P. Beam Jr.
OWNER

Vice President, Klutts Realty & Construction Co., Inc.

FORM NO E-1-3-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 4082

PTR No 7530
~~P-0.334-35~~
T C No 193-~~323-06~~ 6 10-74
Map Date ~~10-11-73~~

Date Issued March 1, 1974

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

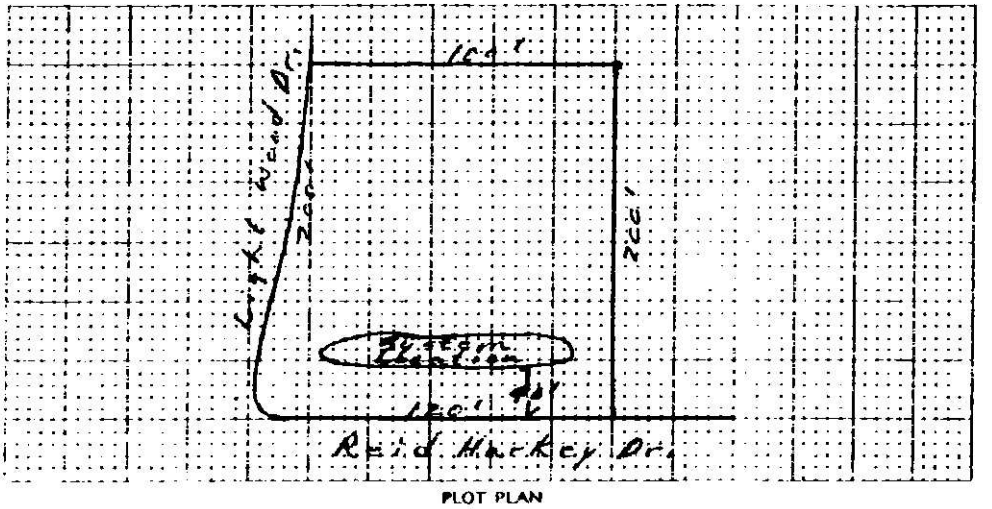
PERCOLATION TEST REPORT

NAME OF OWNER Klutts Realty & Construction Co., Inc.
(LAST FIRST MIDDLE)

ADDRESS OF OWNER 1433 Emerywood Drive ZIP 28210

LOCATION OF PROPERTY 1101 Reid Harkey Road
(STREET OR COUNTY ROAD)

SUBDIVISION Wood Hollow LOT NO 35 BLOCK NO 3



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 plat.

The percolation rate determined by the test was 60*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 erect, reconstruct, alter or repair the specific system shall be obtained from the Mecklenburg County Health Department prior to the beginning of any construction of building, 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 installed 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 a well) is performed on the lot which in the opinion of the Health Department, renders the area where the 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.

*Results determined by soil analysis.

John R. Henderson
Director, Environmental Health Division or Authorized Section Head

W. Scott Lynn Jr.
Soil ~~Sanitarian~~ Scientist

FORM NO E-2-9-1-72

HEALTH DEPARTMENT'S COPY

K

SEE INSTRUCTIONS ON BACK

Date Received 6-26-74

ICAR(S) Application No 7530

T C No 143-354-32

Map Date 10-11-73 4 10 74

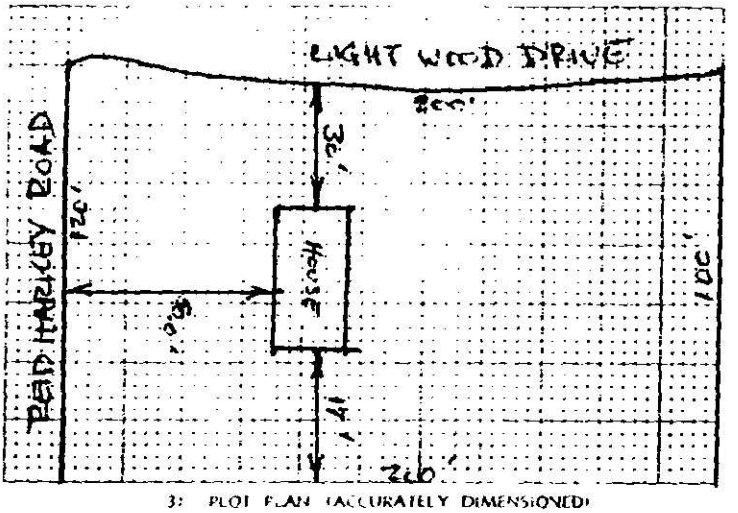
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 the property described hereinafter hereby applies to the Mecklenburg County Health Department for a permit to:

1) ✓ Install or Construct 2) Alter or Repair an individual septic tank wastewater treatment system with subsurface soil absorption, effluent discharge



3) PLOT PLAN (ACCURATELY DIMENSIONED)

4) No of Beds 3
5) Business Use (Yes No)
Employees
6) Washing Machine ✓ Yes No
7) Garbage Disposal Yes ✓ No
8) Dishwasher ✓ Yes No
9) Water Supply
A) Individual Well ✓
B) Government 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 500 feet of community sewer Yes ✓ No
11) FHA Case No N/A
12) VA Case No UNKNOWN

13) NAME OF OWNER Klutts Realty & Construction Co., Inc.
(LAST FIRST MIDDLE)

14) ADDRESS OF OWNER 1433 Emerywood Drive, Charlotte, NC 28210

15) PHONE NO Home 525-5265 Office same

16) LOCATION OF SYSTEM 1101 Reid Harkey Road
(STREET OR COUNTY ROAD)

17) SUBDIVISION Wood Hollow Lot No 35 Block No. 3

Map Book No 17 Page No. 71

18) DEED REFERENCE - DEED BOOK _____ AT PAGE _____

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES NO DATE RUN 2-28-74 SB → 6.0

20) PTR NUMBER (See Instructions) 7530

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.

DATE OF APPLICATION 5/22/74

OWNER Vice President, Klutts Realty & Construction Co., Inc.

FORM NO. E-6A (7/71)

HEALTH DEPARTMENT'S COPY

Date Issued June 27, 1974

Serial No. 4227

LA No 7530

T C No 193-334-35

IMPROVEMENTS PERMIT

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 Klutts Realty & Construction Co., Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER R 1433 Emerywood Drive ZIP 28210

LOCATION OF LOT 1101 Reid Harkey Road
(STREET OR COUNTY ROAD)

SUBDIVISION Wodd Hollow LOT NO 35 BLOCK NO 3

MAP BOOK NO PAGE NO

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 60 min/in and 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 7530. 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, 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

M. L. Kirby
Environmentalist

John R. Adkisson
Director, Environmental Health Division or Authorized Section Head

FORM NO E-3-8-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 8/22/74 Serial No. ICAR(S) Permit No 7530

T C No 19-3-33a -35

Map Date 6-10-74

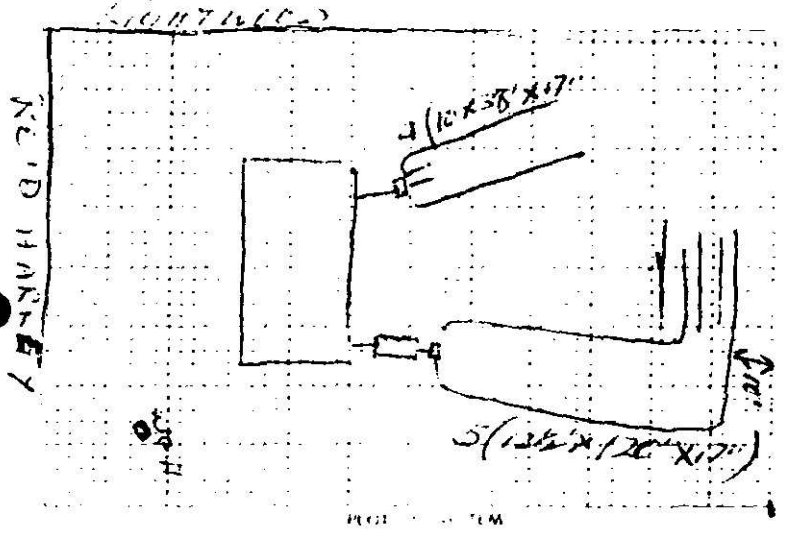
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

Permission is hereby granted to Install or Construct, Alter or Repair the individual septic tank waste water treatment and disposal system consisting of absorption effluent discharge as described hereon all as described hereon and as indicated based upon the information supplied in application # 7530 dated 6/26/74 which permit will be void and of no effect if the work is not commenced in the approved manner. All work shall be completed and ready for inspection on or before 9/10/74 after which date this permit will expire.



Percolation Rate (RSB)

Liquid Capacity of Tank 1500 gal

Tank Construction PC

Absorption Field Dimensions 3' 4 LINES

Total Linear Footage 600 150'

Number of Lines 5 4

Distance from Water Line 10' min

Distance from Property Lines 10' min

Distance from Well 75'

NAME OF OWNER KELLY RESLEY ALUMINUM CO. INC. (FOR SALE)

LOCATION OF PROPERTY 11011 REID HARKEY RD.

This 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 unavailable or can be used

Comments TO MAINTAIN UNIFORM SOIL COVER PLEASE TO SHIFT EXCESS DIRT FILL TO END OF LINE.

Sanitarian

Environmentalist

This permit is not transferable to any person to whom a new system is to be assigned by the division or a change in ownership occurs. Health Department must be notified for the signature of the Environmentalist in charge when an existing system is being altered or repaired

E-5-8-1-72

Serial No. 5182

C of A (s) No 7530

Date Issued

T C No

Map Date 6/10/74

CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner (LAST) (FIRST) (MIDDLE)

Location of Property

Application Number Permit Number

Inspection Date:

Liquid Capacity of Tank Tank Material

Total Length of Drain Tile Number of Lines

Depth of Filter Material Cover Depth

Water Supply Source Distance from Water Source

Excavation Inspected (DATE) Tank Inspected (DATE)

Nitrification Field Inspected (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 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

Environmentalist

FORM NO E-6-9-1-72

HEALTH DEPARTMENT