Date Received 11-29-83

CAR(S) Application No. 20342

T. C. No. PO 135-211-22

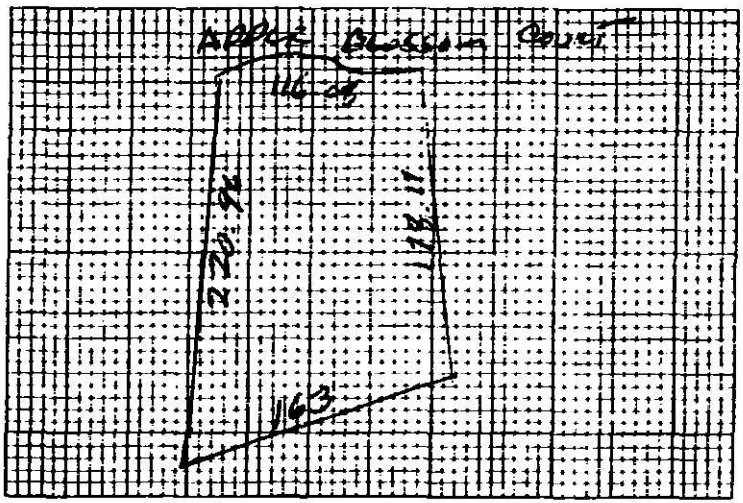
Map Date _____

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 4
5) Business Use — Max No Employees ____
6) Washing Machine ✓ Yes ____ No
7) Garbage Disposal ____ Yes ✓ No
8) Dishwasher ✓ Yes ____ No
9) Water Supply
A) Individual 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 Bob McLemore Co
(LAST FIRST MIDDLE)
14) ADDRESS OF OWNER Po Box 25746 Charlotte NC 28212
15) PHONE NO. Home ____ Office 545-6111
16) LOCATION OF SYSTEM 5309 Apple Blossom Court
(STREET OR COUNTY ROAD)
17) SUBDIVISION Fairwood Sect 20 Lot No. 54 Block No. W
Map Book No. 20 Page No. 417
18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____
19) HAS A SOIL INVESTIGATION BEEN RUN? ____ YES ____ NO DATE RUN _____
20) PTR NUMBER (See Instructions) _____

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.

11-16-83
DATE OF APPLICATION

OWNER Bob McLemore Co.

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Received 4-13-84

RECEIVED
APR 13 1984
ENVIRONMENTAL HEALTH

20342
SIR No. 20905

T. C. No. 135-211-22/25

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

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

2) ADDRESS OF OWNER Po Box 25746 Charlotte ZIP 28212

3) PHONE NO. Home — Office 545-6111

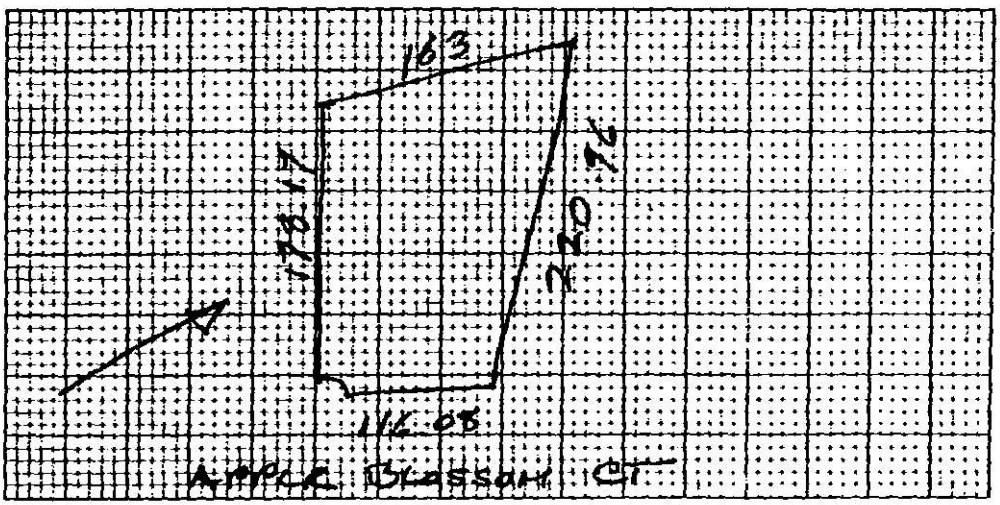
4) LOCATION OF PROPERTY 5309 Apple Blossom Ct.
(STREET OR COUNTY ROAD)

5) SUBDIVISION Parkwood Sect #2 LOT NO. 54 BLOCK NO. W

MAP BOOK NO. 20 PAGE NO. 417

6) DEED REFERENCE: DEED BOOK PAGE NO.

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.



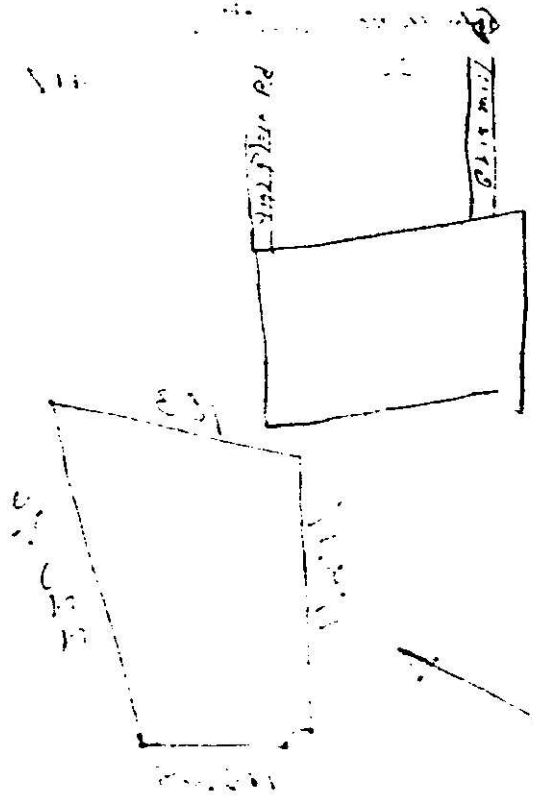
7) ACCURATELY DIAGRAM & DIMENSION LOT

Nathaniel P. Sloan
OWNER Bob McLemore Co.

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Received 4-13-84



DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20342

T.C. NO. PO 135-24-22,25

(Ground Absorption Sewage Disposal)

OWNER: [illegible] Co.
ADDRESS: PO Box 25746
Charlotte, N.C. 28212
LOCATION OF SITE: 5307 Apple Blossom Court

PLAT NO: 1-54-W
LOT SIZE: Approx 22,000 .64

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S / PS 2-8% / U	S / PS 2-10% / U	S / PS Complex Slopes / U	S / PS 2-8% / U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S / PS Clay / U	S / PS Clay / U	S / PS — / U	S / PS — / U
3. SOIL STRUCTURE (12-36 inches)	S / PS Blocky / U	S / PS Blocky / U	S / PS — / U	S / PS — / U
4. SOIL DEPTH (inches)	S / PS 36-40" / U	S / PS ~~[illegible]~~ 40-36" / U	S / PS — / U	S / PS — / U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S / PS <36" / U	S / PS <36" / U	S / PS — / U	S / PS — / U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S / PS >40" to ground water / U	S / PS >36" to ground water / U	S / PS channels runoff / U	S / PS Depression Drainage / U
7. OTHER (Specify)	S / PS Restricted Area / U	S / PS / U	S / PS / U	S / PS / U
8. SOIL GROUP	10A	10A	—	—
9. SITE CLASSIFICATION	unsuitable	unsuitable	unsuitable	unsuitable
10. SOIL SERIES	Cecil Lake	Parolet Lake	Complex Slopes	Depression

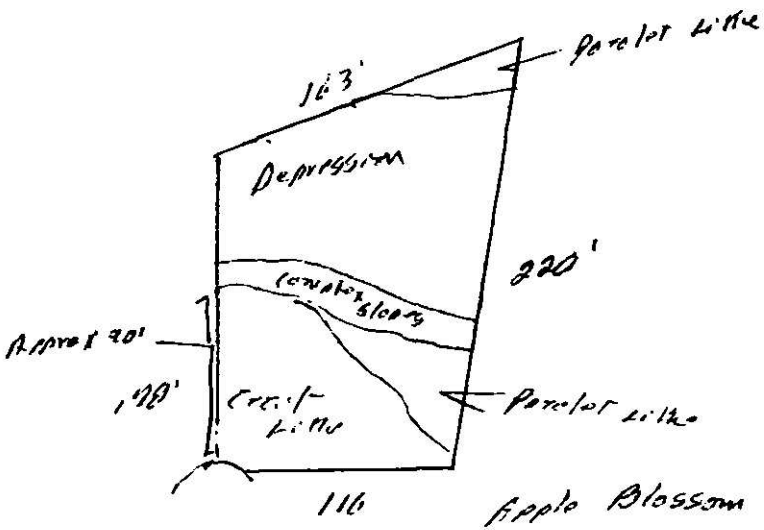
S - Suitable PS - Provisionally Suitable U - Unsuitable

**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: William B. Martin
Title: [illegible]

Date: [illegible]


Parcel line
163'
Depression
220'
Approx 90'
198'
Parcel line
116
Apple Blossom

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203

SIR. NO. 20342
T.C. NO. PO 135-211-22,25
DATE: 8-2-84

Bob McLemore Company
P. O. Box 25746
Charlotte, NC 28212

RE: Property located at 5309 Apple Blossom Court

Dear Sir:

At your request, a field investigation was conducted on the property designated above. The soils on the property were found to contain a limited area of provisionally suitable soil for the installation of a ground absorption sewage disposal system. A copy of the site evaluation report is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit plot plans for the proposed construction, well, and ground absorption sewage disposal system to this office. They will be reviewed and if it is found that there is an adequate area of provisionally suitable soil to accommodate the proposed installation, an Improvements Permit will be issued by this office.

If I may be of assistance, please feel free to call.

Sincerely,

Bill D. Hardister, Jr.
Environmental Health Supervisor

BDH/kbg

Enclosure

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

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

(OFFICE USE ONLY) L

FILE: 20342

PO TC: 135-211-22-25

RECEIVED
JUN 21 1985

JOB LOCATION

① ADDRESS: 5309 (STREET NO) APPLE BLOSSOM COURT (STREET) ② FILE: 20342

③ CITY: CHARLOTTE ④ TAX PARCEL NO.: PO 135-211-22-25

⑤ SUBDIVISION: FARMWOOD SEC. # 20 ⑥ LOT: 54 ⑦ BLOCK: W

OWNER

⑧ NAME: BOB MCLEMORE (FIRST) CO. INC. (MIDDLE) (LAST)

⑨ MAILING ADDRESS: PO BOX 25746

⑩ CITY: CHARLOTTE ⑪ STATE: NC ⑫ ZIP: 28212

⑬ PHONE: (WORK) 545 6111 ⑭ (HOME) ———

REQUEST

This request is for a(n):

⑮ ☒ New installation permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify) ———

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 4 ㉕ Type? ———

㉓ Maximum occupancy? ——— ㉖ Maximum number of employees? ———

㉔ Basement? ☐ yes ☐ no ㉗ Maximum number of seats? ———

WATER SUPPLY

㉙ Water supply from (present or proposed):

A ☐ Individual well

B ☐ Municipal system

C ☒ Community well

D ☐ Community system

SEPTIC TANK

㉚ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: BOB MCLEMORE CO. INC. BY: [signature]

Date: 6-14-85

㉘ Accurately dimensioned plot

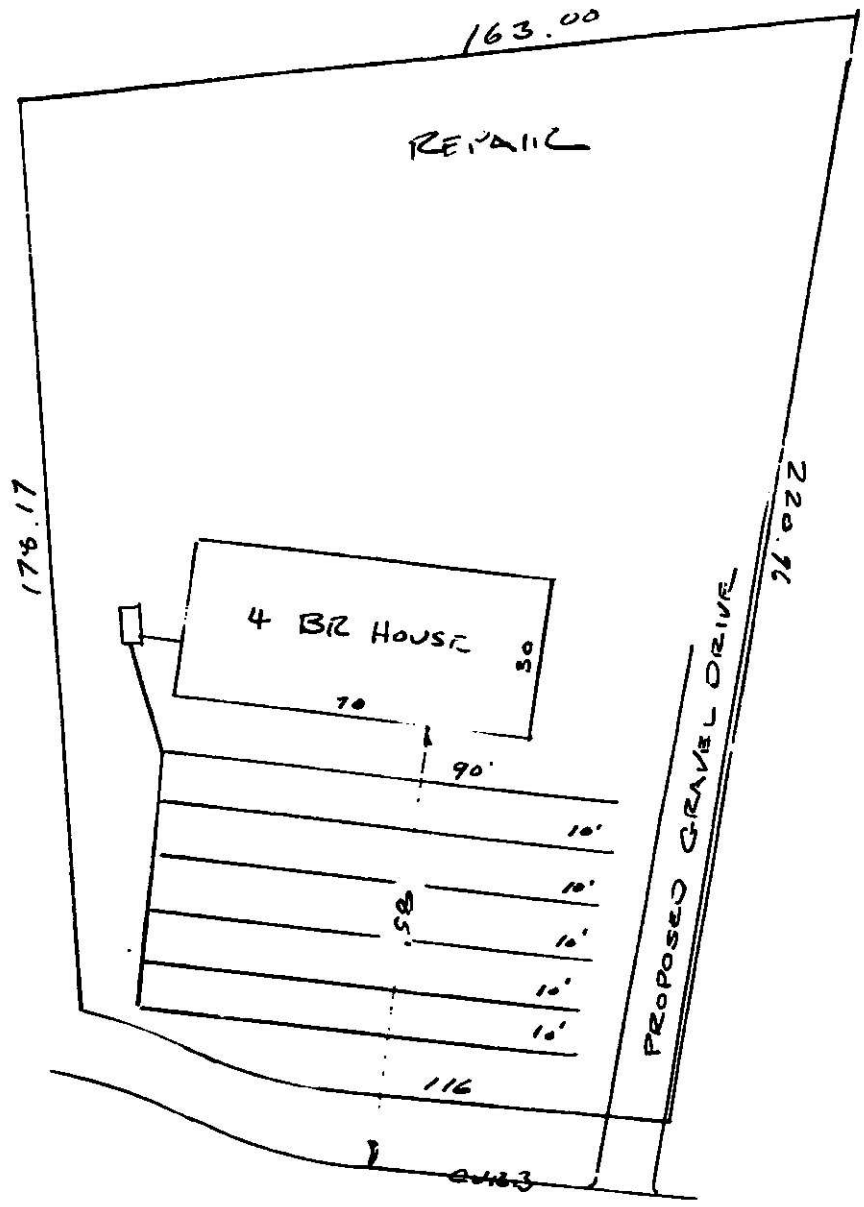
WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY

20342

PO 135-211-22-25

BOB McLEMORE Co Inc

6-19-85



5309 APPLE BLOSSOM COURT LOT # 54-W

Date Issued 6-25-85

Serial No. 8650

SIR No. 20342

T. C. No. PO 135-211-22,25

Map Date L 393-1 CPC

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 Bob McLemore Co., Inc.
(LAST) (FIRST) (MIDDLE)

ADDRESS OF OWNER P. O. Box 25746, Charlotte, NC ZIP 28212

LOCATION OF LOT 5309 Apple Blossom Court
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO 54 BLOCK NO. W

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 20342. 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.

Cynthia G. Bass
Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

Date Issued 1-21-86

Serial No. 08894

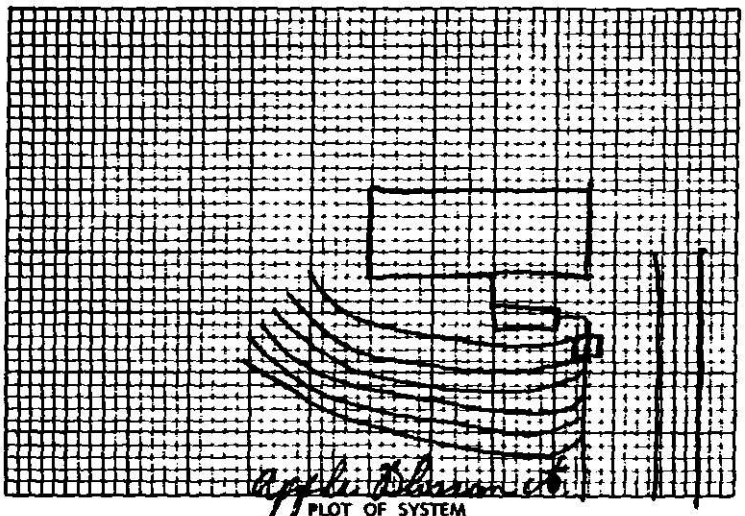
ICAR(S) Permit No. 20342

T. C. No. 135-211-22,25

Map Date L

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 _____, dated 6-14-85 and this permit shall be void and of no effect if the information provided in the application is not true or is erroneous. All work shall be completed on or before 2-21-86, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PT

Liquid Capacity of Tank 1500

Tank Construction RCC

Absorption and/or Nitrification Lines:

Total Line Length 540'

Number of Lines 6

Distance from House 5'

Distance from Property Line 10'

Distance from Well Comm.

NAME OF OWNER Bob McLemore Co.

LOCATION OF PROPERTY 5309 Apple Blossom Court

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

6 lines 3'X90'X12" stone

Comments: _____

_____ Division or Section Head

B. R. Ferguson 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

C of A (s) No. 20342

Date Issued 1-22-86 **Serial** 8187 P.C. No. 135-211-22.25 CR1

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
CERTIFICATE OF COMPLETION

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 5309 Apple Blossom Court

Application Number — Permit Number —

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PVC

Total Length of Drain Tile 540' Number of Lines 6

Depth of Filter Material 12" Cover Depth 12"-18"

Water Supply Source Comm. Distance from Water Source —

Excavation Inspected 1-22-86 (DATE) Tank Inspected 1-22-86 (DATE)

Nitrification Field Inspected 1-22-86 (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 Health Commission 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: 1986, 1500 ST, CON, 1620 SFT, 12G, Excil

D. R. Ferguson
Environmentalist

EHD-5-76

Environmental Health Department's Copy