Date Received 3-15-84

RECEIVED
MAR 15 '84
ENVIRO MENTAL HEALTH

SIR No 20766

T. C. No 011-042-2

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER WAYLAND, III (LAST) JOHN (FIRST) EDWIN (MIDDLE)

2) ADDRESS OF OWNER 4914 WIMBLEDON DR, WILSON, N C ZIP 27893
(PARENTS 292-7538 - CURRENT)

3) PHONE NO. Home 919-291-2981 Office _____

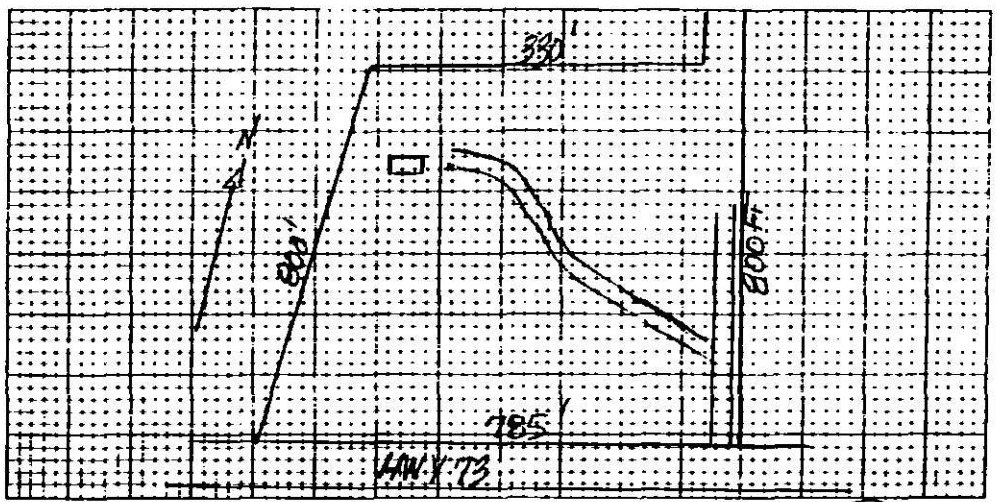
4) LOCATION OF PROPERTY 12417 SAM FURR ROAD
STREET OR COUNTY ROAD

5) SUBDIVISION _____ LOT NO _____ BLOCK NO. _____

MAP BOOK NO _____ PAGE NO. _____

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

J. Ed. Wayland
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20766

T.C. NO. 011-042-07

(Ground Absorption Sewage Disposal)

OWNER: John Wayland III
ADDRESS: 4914 Winbleden Dr. Wilson, N.C. 27893
PLAT NO:
LOT SIZE: 10A (1A)
LOCATION OF SITE: 12417 Sam Furr Road

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U — 2-8	S PS U	S PS U	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	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) U — Blocky	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) U — 40 - 48	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U — None	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) U — Adequate	S PS U	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U

8. SOIL GROUP — IVa

9. SITE CLASSIFICATION — P. Suitable

10. SOIL SERIES — Cecil

S - Suitable PS - Provisionally Suitable U - Unsuitable

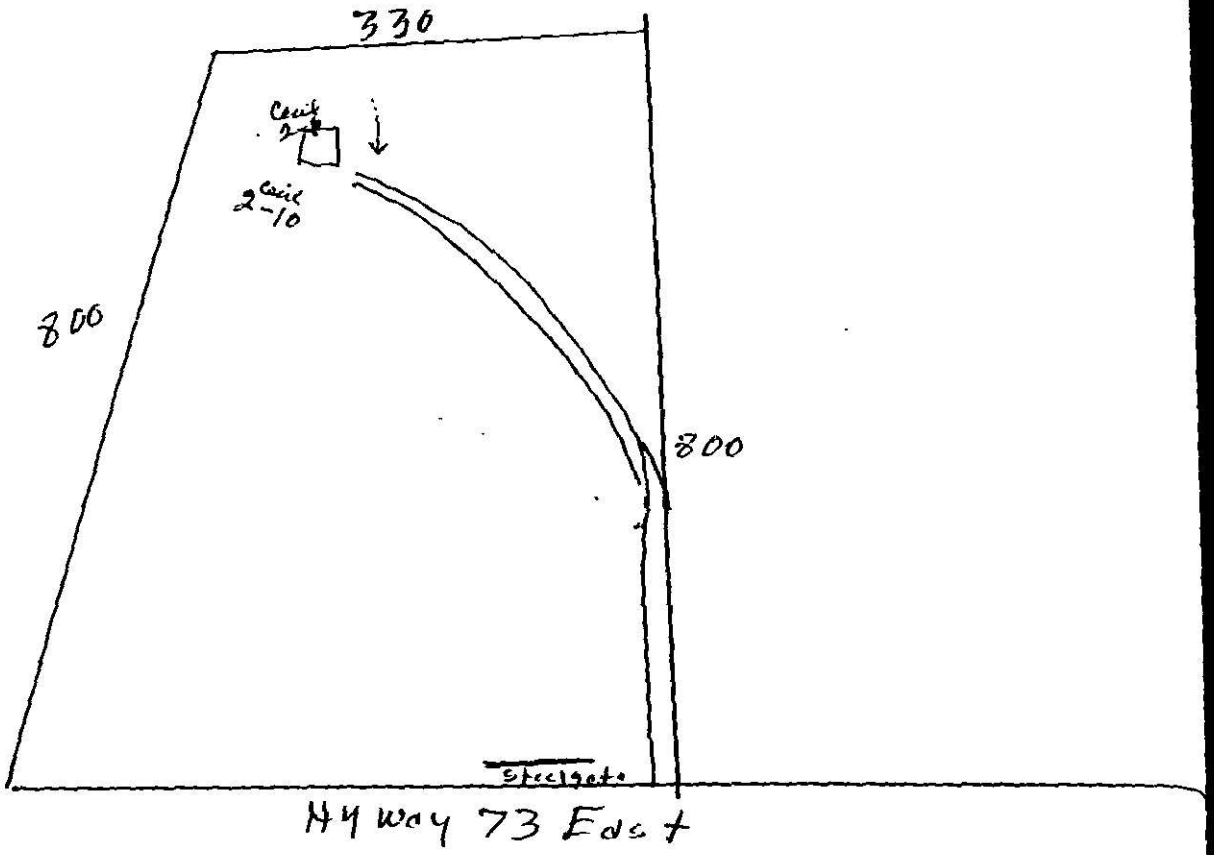
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: W.B. Ramsey
Title: Soil Scientist

Date: 4-4-84

4


330
Circle 2
2 Circle 2-10
800
800
Steel gate
Hyway 73 East

Serial No. 5576

SIR No. 20766

T. C. No. 011-042-07

Date Issued 4-6-84

Map Date

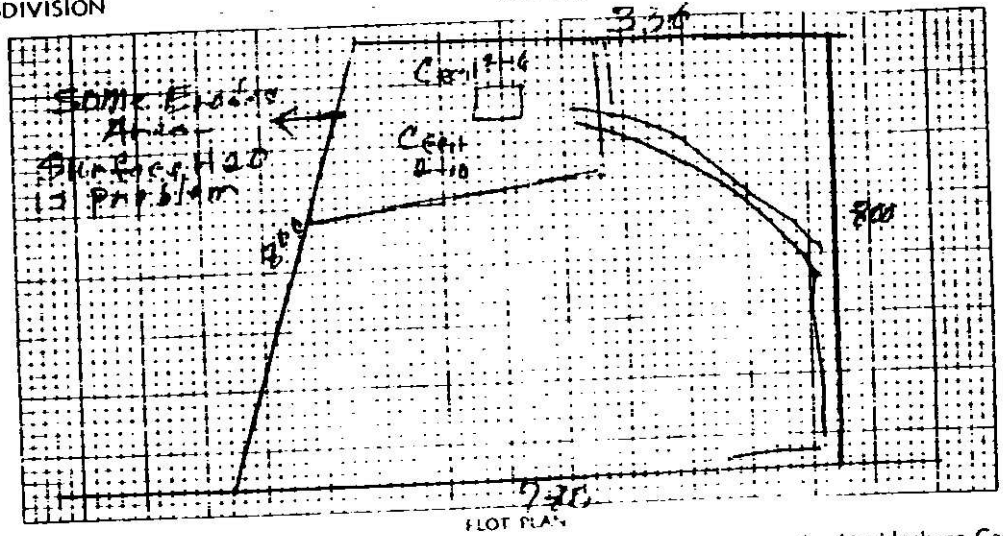
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Wayland, III (LAST) John (FIRST) Edwin (MIDDLE)

ADDRESS OF OWNER 4814 Wimbledon Dr., Wilson NC ZIP 27893

LOCATION OF PROPERTY 12417 Sam Furr Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO.



FLOT PLAN

This is to certify that [illegible] the Mecklenburg County Department of Environmental [illegible] was conducted on that portion of the lot as indicated [illegible] PROVISIONALLY SUITABLE. The said lot is approved for the installation of an individual [illegible] tank wastewater treatment system with subsurface, soil absorption effluent discharge subject to the following terms and conditions:

1. A permit to install [illegible] the Mecklenburg County Department of Environmental Health [illegible] wastewater treatment system on the said lot.
2. The size of the [illegible] determined by the Mecklenburg County Department [illegible] the size and type [illegible] system installation.
3. This approval [illegible] in the [illegible]
4. This approval [illegible] in the [illegible] system installation [illegible]

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 on 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 or revised laws, rules and regulations been in effect on the issue date.

[signature]
Soil Scientist

Bill D. Hardisty Jr.
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department

SEE INSTRUCTIONS ON BACK

Date Received 3-13-84

RECEIVED
[illegible]
ENVIRONMENTAL HEALTH

ICAR(S) Application No. 20766

T. C. No. 011-042-07

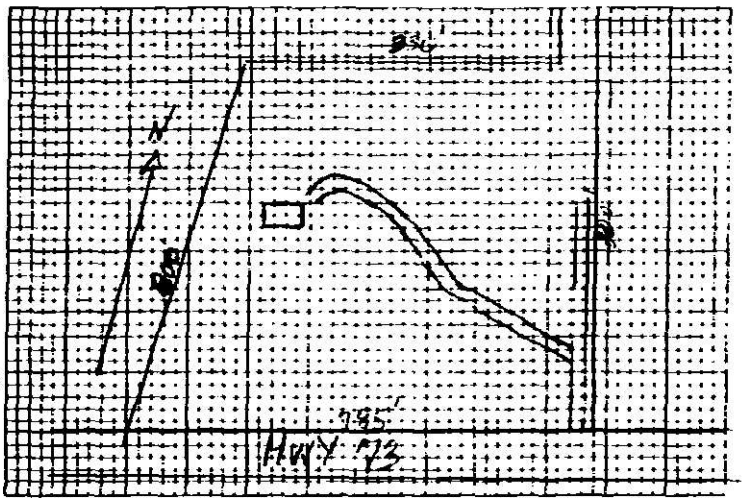
Map Date _____

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 3

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 WAYLAND, III (LAST) JOHN (FIRST) EDWIN (MIDDLE)

14) ADDRESS OF OWNER 4514 WIMBLEDON DR, WILSON, N C 27893
PARENTS - 892-7536 CORNELIUS

15) PHONE NO Home [illegible] Office _____

16) LOCATION OF SYSTEM ~~[illegible]~~ 12417 SAM FURR RD
STREET OR COUNTY ROAD

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

Map Book No. 011-042-07 Page No. _____

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.

MARCH 12, 1984
DATE OF APPLICATION

J. Ed. Wayland
OWNER

EHD-5-76

Environmental Health Department's Copy

Serial No. 7379

SIR No. 20766

Date Issued 4-6-84

T. C. No. 011-042-07

Map Date 1 CRT

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 Wayland, III (LAST) John (FIRST) Edwin (MIDDLE)

ADDRESS OF OWNER 4814 Wimbledon Dr., Wilson, NC ZIP 27893

LOCATION OF LOT 12417 Sam Furr 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 20766. 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.

Ralph Killian
Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Serial No. 07110

Date Issued APRIL 12TH 1984

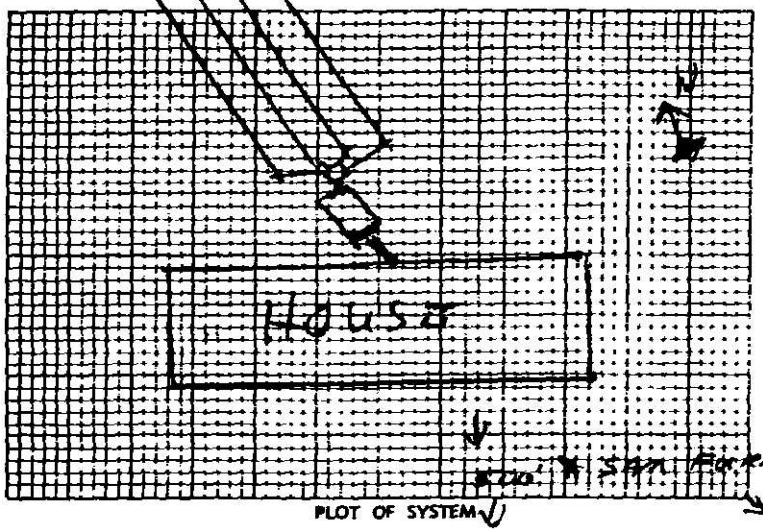
ICAR (S) Permit No. 20766

T. C. No 611-042-07

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 X 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 20766, dated 3-12-84 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 MAY 14TH 1984, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS IV4

Liquid Capacity of Tank 1500 GAL

Tank Construction Pre Cast Concrete

Absorption and/or Nitrification Lines:

Total Line Length 300 Lin FT

Number of Lines FOUR

Distance from House 10 FT

Distance from Property Line 50 FT

Distance from Well 100 FT NOT IN YET

NAME OF OWNER WAYLAND, JOHN III

LOCATION OF PROPERTY 12417 SAN FURR RD

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.

Comments: FOUR TRENCHES TOBE 75FTX 3FTX 12inches STONE-bay OF STRAW COVER-GRADE Boards

Division or Section Head

Ralph Miller
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. 20766

Date Issued 12-14-94 **Serial** 7205 T. C. No. 011-047-07 L CRT

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 Williams (LAST) John (FIRST) III (MIDDLE)

Location of Property 12417 Sam Furr Rd

Application Number 20766 Permit Number 20766

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PVC

Total Length of Drain Tile 300' Number of Lines 1 Color

Depth of Filter Material 12" Cover Depth 24"

Water Supply Source Well Distance from Water Source 75'

Excavation Inspected 12-14-94 (DATE) Tank Inspected 12-14-94 (DATE)

Nitrification Field Inspected [illegible] (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 as 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

Jim Tricia
Environmentalist

EHD-5-76

Environmental Health Department's Copy