Date Received 6 August 74

Application No. 5786

T. C. No. 059-212-28

Map Date _____

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Harold Clarke Eugene
(LAST) (FIRST) (MIDDLE)

ADDRESS OF OWNER [illegible] ZIP _____

PHONE NO. Home _____ Office _____

LOCATION OF PROPERTY 612 Dan Cook Rd.
(STREET OR COUNTY RADD)

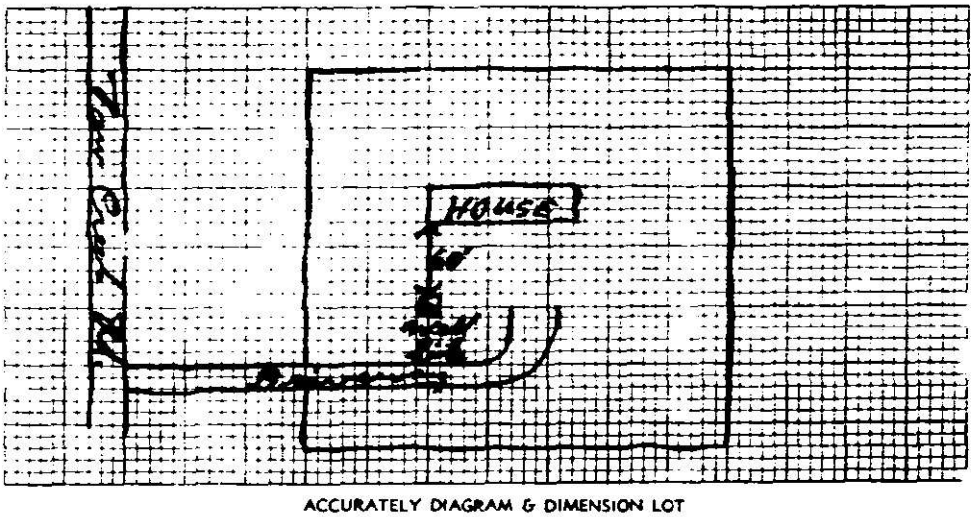
SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

MAP BOOK NO. [illegible] PAGE NO. [illegible]

DEED REFERENCE DEED BOOK [illegible] PAGE NO. [illegible]

WELL CONTRACTOR Cooper - (Carolina) LICENSE NO. 226

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



ACCURATELY DIAGRAM & DIMENSION LOT

6 August 74
DATE OF APPLICATION

[signature]
OWNER

Application approved and permit hereby granted

Permit No: 5786

[signature]
ENVIRONMENTALIST

FORM NO. E-28-8-1-72

HEALTH DEPARTMENT'S COPY

Date Received 3-21-73

APT No 5286

T C No 059-212-28

Map Date 10-16-72

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

Howard Mary S. (seller)

1) NAME OF OWNER Hendricks (LAST) Charles (FIRST) Eugene (MIDDLE) (buyer)

2) ADDRESS OF OWNER 6628 Dartmouth Dr Gastonia, NC ZIP 28052

3) PHONE NO Home 864-8512 Office NONE

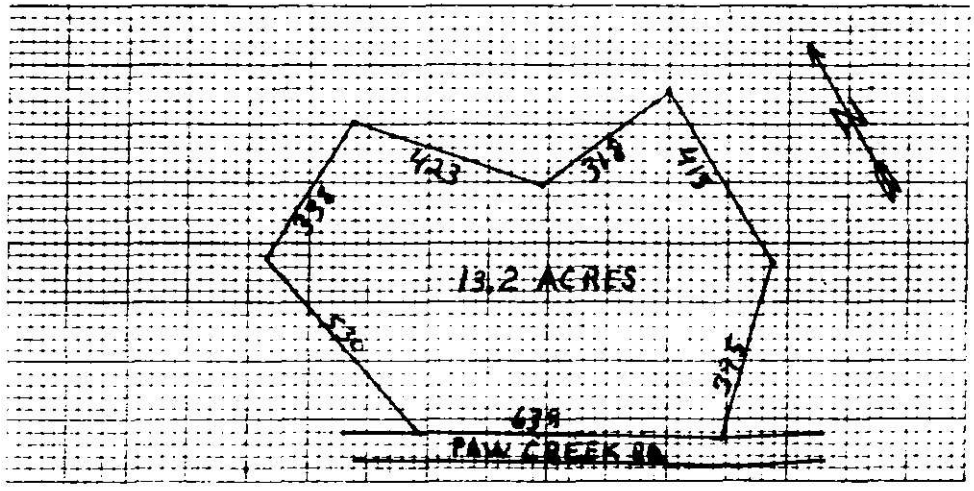
4) LOCATION OF PROPERTY Paw Creek Rd. Tax Map bk. 51, pg. 21, Block 121, lot 25 (STREET OR COUNTY ROAD)

5) SUBDIVISION ____ LOT NO ____ BLOCK NO ____

MAP BOOK NO ____ PAGE NO ____

6) DEED REFERENCE DEED BOOK 837 PAGE NO 33

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 here nabove 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 E. Hendricks (buyer)
OWNER
Mary S. Howard (seller)

FORM NO E-1-9-1-72

HEALTH DEPARTMENT'S COPY

MECKLENBURG COUNTY
Department of Public Health
1200 Blythe Boulevard
Charlotte, North Carolina 28203

Telephone 374-2113

Date Issued
1. April 13, 1973
2. _____
3. _____

SITE DISAPPROVAL REPORT
INDIVIDUAL SEPTIC TANK SYSTEM WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

SDR No. 7386
T.C. No. 055-212-28
10-16-72

NAME OF OWNER Howard, Mary S.

ADDRESS OF OWNER 609 Dartmouth Drive, Gastonia, N.C. ZIP 28052

LOCATION OF LOT Fox Creek Road

The lot described above has been disapproved for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge due to the following:

FAILURE TO PASS PERCOLATION TEST (60 minutes per inch or less)

	Test No.	Date of Test	Percolation Rate
____	1.	_____	_____ min/in
____	2.	_____	_____ min/in
____	3.	_____	_____ min/in

X ON SITE INSPECTION REVEALED LOT TO BE UNSUITABLE FOR THE FOLLOWING REASON(S) 4-11-73 1. Holes improperly set up.

2. Relocate test site to proposed area of septic tank system installation.

John R. Rhinehardt
Environmentalist

(Stencil No.)
MED 396
8/70

FORM NO.
E-19-8-14-70

Serial No. 2172

PTR No. 5786

Date Issued April 16, 1973

T C No. 059-212-28

Map Date 10-16-72

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

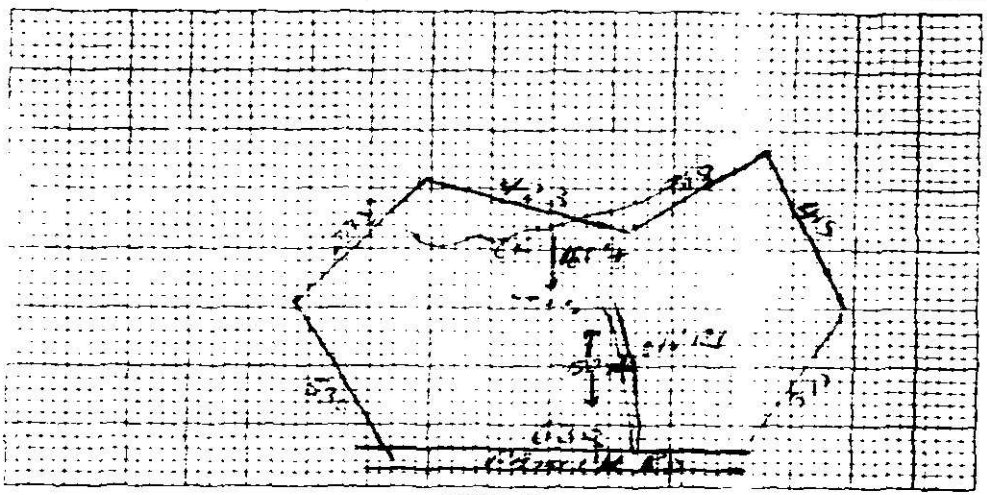
PERCOLATION TEST REPORT

NAME OF OWNER Howard (LAST) Mary (FIRST) S. (MIDDLE)

ADDRESS OF OWNER 608 Dartmouth Drive ZIP 28052

LOCATION OF PROPERTY Paw Creek Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO



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 plot.

The percolation rate determined by the test was 50 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 install, construct, alter or repair the specific system shall be obtained from the Mecklenburg County Health Department prior to the beginning of any construction of buildings 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 wells) 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.

Director, Environmental Health Division or Authorized Section Head

FORM NO E-2-4-1-71

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 4-11-74

ICAR'S Application No 5786

T C No 059-212-28

Map Date 10 16 72

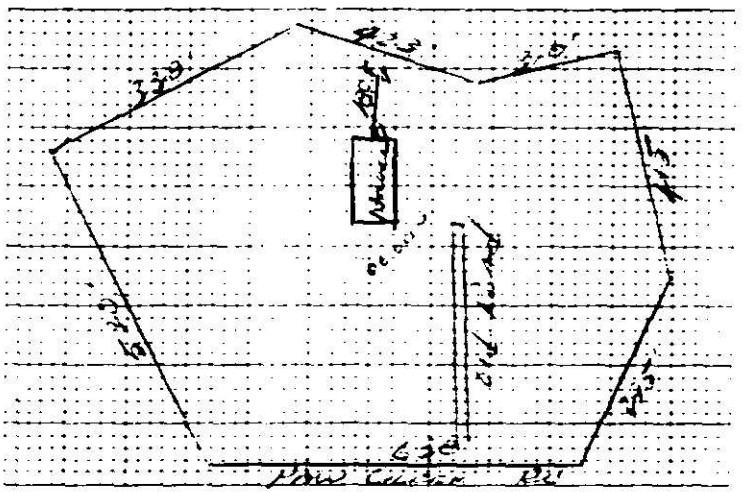
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 that 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 a subsurface soil absorption, effluent discharge



3 PLOT PLAN (ACCURATELY DIMENSIONED)

4 No of Bedrooms 3

5 Equivalent Units for Commercial Establishment ____

6 Water Supply Well ✓ Yes ____ No

7 Garbage Disposal ____ Yes ✓ No

8 Dishwasher ✓ Yes ____ No

9 Absorption Area 6"

10 ____ Yes ✓ No

11 ____

12 ____

13) NAME OF OWNER Hendrick (LAST) Charles (FIRST) Eugene (MIDDLE)

14) ADDRESS OF OWNER 603 Dartmouth Dr Pineville, NC.

15) PHONE NO Home 864-8578 Office City Fire Dept.

16) LOCATION OF SYSTEM Pow Creek Rd. Tax map 84-59-B21 W/S Lot 2 (STREET OR COUNTY ROAD)

17) SUBDIVISION ____ Lot No ____ Block No ____

Map Book No 57 Page No 21

18) DEED REFERENCE — DEED BOOK 872 AT PAGE 22

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ____ NO DATE RUN 4/3/73 PRT

20) PTR NUMBER See Instructions 5786

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 4/11/74

Charles E. Hendrick
OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued April 12, 1974

Serial No. 3971

LA No 5786

T C No 059-212-28

IMPROVEMENTS PERMIT

Map Date 10-16-72

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 Hendrick (LAST) Charles (FIRST) Eugene (MIDDLE)

ADDRESS OF OWNER 608 Dartmouth Drive, Gastonia, N.C ZIP

LOCATION OF LOT Paw Creek 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 Health Department for the installation of one (1) dual septic tank system with subsurface, soil absorption effluent discharge based on the percolation test results which yielded a percolation rate of 50 min/in 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 5786. 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

L. B. Bridgeman
Environmentalist

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

FORM NO E-3-9-1-72

HEALTH DEPARTMENT'S COPY

10-10-74 Serial No. [illegible] ICAR(S) Permit No 5786

Date Issued ~~9-3-74~~ T C No 059-202-28

Map Date 10-76-72

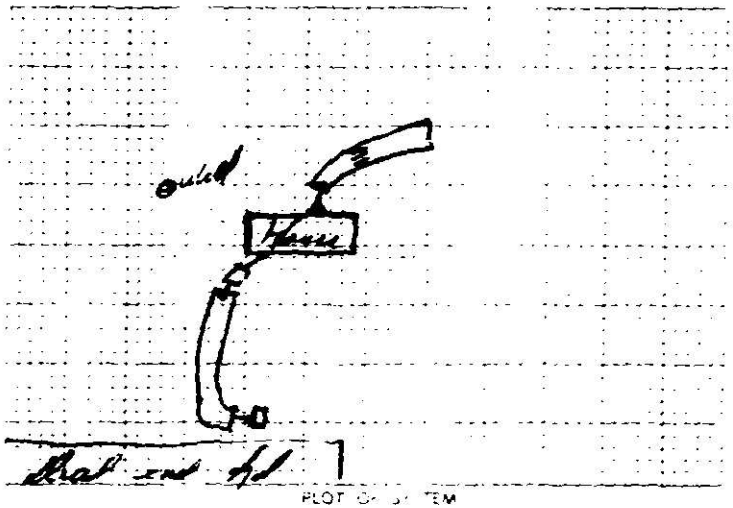
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

Permission is hereby given to ✓ Install or Construct Alter or Repair the individual septic tank waste water 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 5786 dated 9/11/74 and this permit shall be void and of no effect if the information provided in the application is not true and complete. All work shall be completed on or before ~~9-3-74~~ after which date this permit shall be null and void



PLOT OF SYSTEM

Percolation Rate 50

Liquid Capacity of Tank 1500

Tank Construction PC

As right or angle of intersection

Total Line Length 55'+150'+150'

Number of Lines

Distance from Lines 10'+

Distance from Lines 10'+

Distance from Well 100'

NAME OF OWNER Hendrick, Charles Eugene

LOCATION OF PROPERTY Paw Creek Rd

This system must 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 uninspectable or can be used

Comments House (Cont)

Director of Section Head

M. A. Hardy
Environmentalist

If this permit is for the installation or construction of a new system, it must be signed by the division or section head of the Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired

Form E-5-8-1-72

[illegible] CARBONLESS COPY

Serial No.

C of A Isl No. 5786

Date Issued 25 Oct 1974

T C No 059-212-28

John R Atkisson

Map Date 10-16-72

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 Hendrick, Charles Eugene
(LAST, FIRST, MIDDLE)

Location of Property Paw Creek Rd

Application Number 5786 Permit Number 5786

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material concrete

Total Length of Drain Tile 555 L/Ft Number of Lines 6

Depth of Filter Material 12" Cover Depth 30" over

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 10/25/74 (DATE) Tank Inspected 10/25/74 (DATE)

Nitrification Field Inspected 10/25/74 (DATE)

Washing Machine Line Inspected If Applicable 10/25/74 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface soil absorption effluent disposal as described above and it has been ___ installed or constructed, ___ obtained in substantial compliance 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 as well 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 wash line in bed 7½'x50'x12"

John R. Atkisson
Environmentalist

FORM NO E-6-9-1-72

HEALTH DEPARTMENT'S COPY