Date Received 7-2-84

SIR No. 01194

T. C. No. 011-032-02

Map Date 1

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER CRAIG (LAST) ALTHEA ROBERT (FIRST) MAY (WIFE) CHESTER (MIDDLE)

2) ADDRESS OF OWNER RT. 2, BOX 373, HUNTERSVILLE, N.C. ZIP 28078

3) PHONE NO. Home NONE Office 373-1931 EX 460

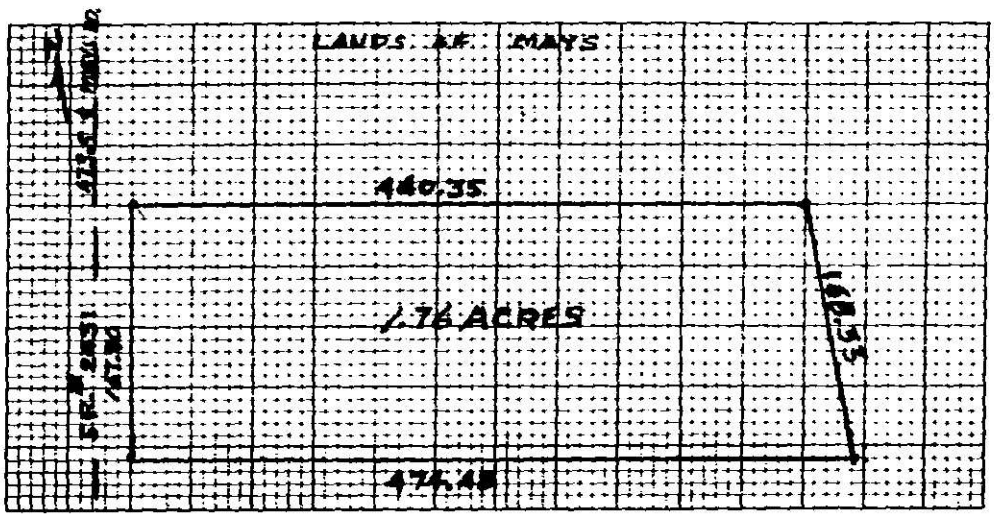
4) LOCATION OF PROPERTY 17634 22 MAYS RD. (STREET OR COUNTY ROAD) (2431, CALDWELL SIA.)

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

Robert Chester Craig
OWNER

EHD-5-76

Environmental Health Department's Copy

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21194

T.C. NO. 011-032-02

(Ground Absorption Sewage Disposal)

OWNER: Robert CRAIG
ADDRESS: R-2 Box 373 Huntersville 28078
PLAT NO:
LOT SIZE: 1.76

LOCATION OF SITE: 11634 Mayes Rd

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) 2-6 U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) clayey U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) Blocky U	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) 40-48 U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) None U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) Adequate U	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	IIa			
9. SITE CLASSIFICATION	P. Suitable			
10. SOIL SERIES	Cecil			

S - Suitable PS - Provisionally Suitable U - Unsuitable

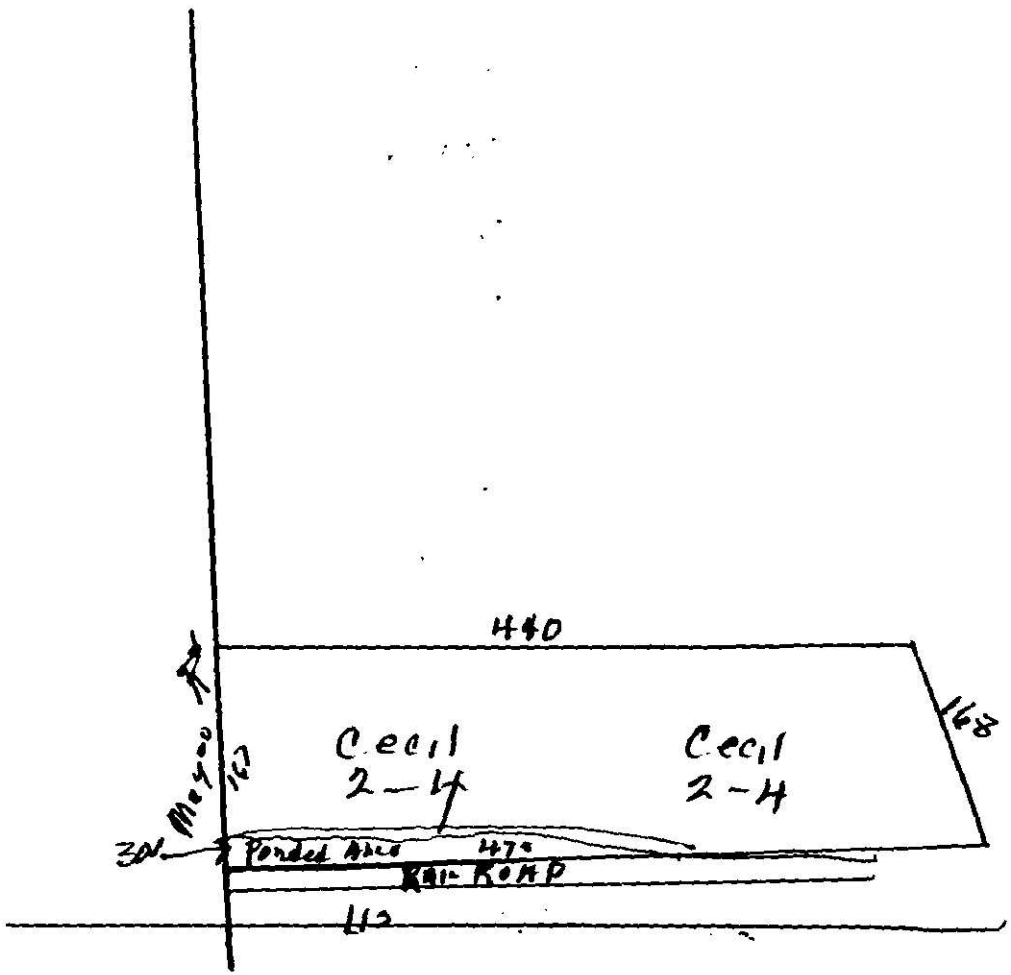
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: Willard B. Ramsey
Title: Soil Scientist

Date: 7-10-84

4


440
168
Cecil
2-4
Cecil
2-4
Mayo Rd
167
30'
Ponded Area
47'
RAIL ROAD
440

Serial No. 5757

SIR No. 21194

Date Issued 7-11-84

T C No. 011-032-02

Map Date L

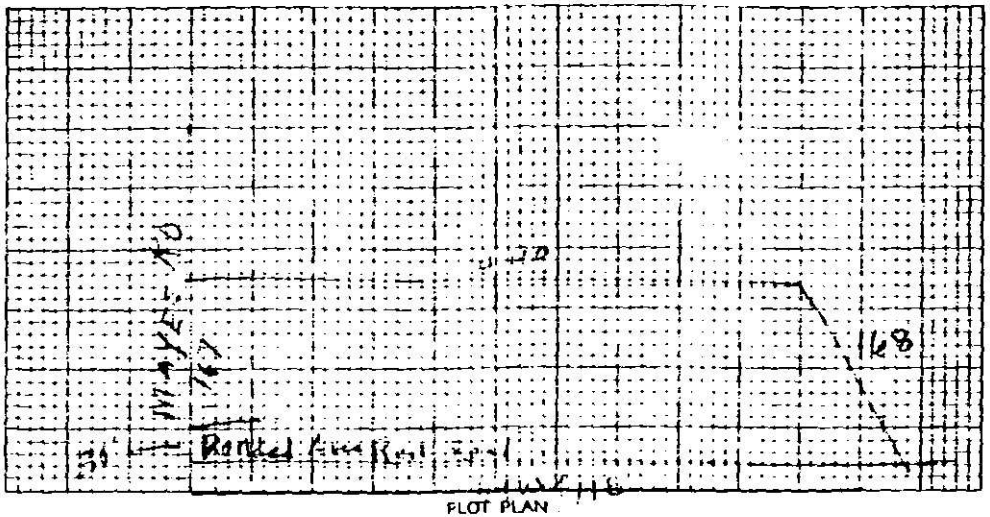
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Craig, (LAST) Robert (FIRST) C. (MIDDLE)

ADDRESS OF OWNER Rt. 2, Box 373, Huntersville, NC ZIP 28078

LOCATION OF PROPERTY 17634 ZZ Mayes Road (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO _____ BLOCK NO _____



PLOT PLAN

This is to certify that a soil investigation and on-site investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The said investigation was conducted on that portion of the lot as indicated on the above plot **PROVISIONALLY SUITABLE**

The permeability rate determined by the investigation was _____. 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 a subsurface system may be issued from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction activity on the wastewater treatment system on the said lot.
2. The size of the septic tank, wastewater treatment system absorption area will be determined by the Mecklenburg County Department of Environmental Health according to the information on the percolation rate obtained above and on the size of the building proposed thereon.
3. The approval is valid only for the location and the extent of the immediate area shown acceptable for system installation on the plot plan.
4. This approval is subject to any changes in the construction requirements of the laws governing the location of the system, the Rules and Regulations of the North Carolina Department of Environmental Health, and the requirements as acceptable for system installation at the time of the construction or repair of the subject system.

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 valid 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.

Wilma C. Kennedy
Soil Scientist

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

EHD-5-76

Environmental Health Department's Copy

Date Received 7-20-84

SEE INSTRUCTIONS ON PAGE 1
RECEIVED
JUL 20 1984
ENVIRONMENTAL HEALTH

ICAR(S) Application No. 21194

T. C. No. 011-032-02

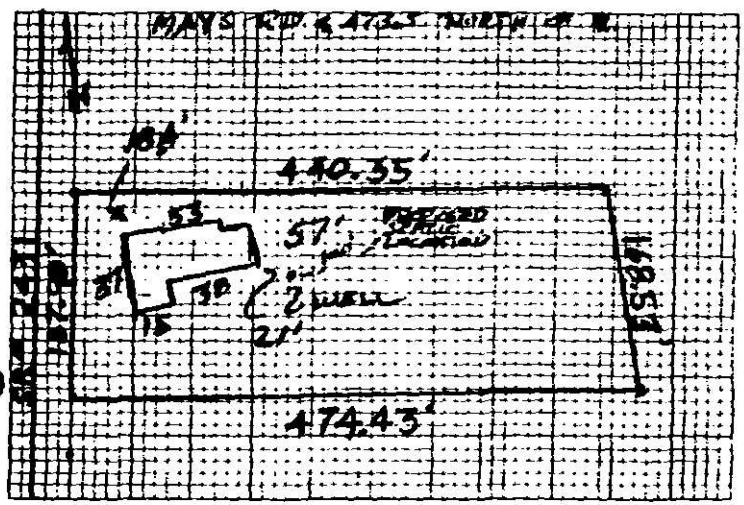
Map Date X L

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) X 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) Mobile Home ___ Yes X No
Residence X Yes ___ No

4) No. of Bedrooms 2

5) Business Use — Max No Employees ___

6) Washing Machine X Yes ___ No

7) Garbage Disposal ___ Yes X No

8) Dishwasher ___ Yes X No

9) Water Supply
A) Individual Well X
B) Governmental System ___
C) Community System
1 Well source ___
2 Governmental source ___

10) Sewage System
House located within 200 feet of public sewer ___ Yes X No
House located within 200 feet of community sewer ___ Yes X No

11) FHA Case No ___

12) VA Case No ___

13) NAME OF OWNER CRAIG (LAST) ROBERT (FIRST) CHESTER (MIDDLE)

14) ADDRESS OF OWNER RT. 2, BOX 373, HUNTERSVILLE, N.C. 28078

15) PHONE NO. Home NONE Office 373-1931 EXT. 460

16) LOCATION OF SYSTEM 17634 E. MAYES RD. (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. ___ Block No. ___

Map Book No ___ Page No. ___

18) DEED REFERENCE — DEED BOOK 4654 AT PAGE 716

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES ___ NO DATE RUN 07-11-84

20) PTR NUMBER (See Instructions) 21194

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.

07-14-84
DATE OF APPLICATION

Robert C Craig
OWNER

EHD-S-76

Environmental Health Department's Copy

Serial No. 7692

SIR No. 21194

Date Issued July 20, 1984

T. C. No. 011-032-02

Map Date L COPY

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

IMPROVEMENT PERMIT

TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Craig (LAST) Robert (FIRST) Chester (MIDDLE)

ADDRESS OF OWNER Rt.2, Box 373, Huntersville, NC 28078 ZIP 28078

LOCATION OF LOT 17634 Mayes Rd. (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO _____ BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. 716

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 21194. 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.

Rdh Hilles
Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

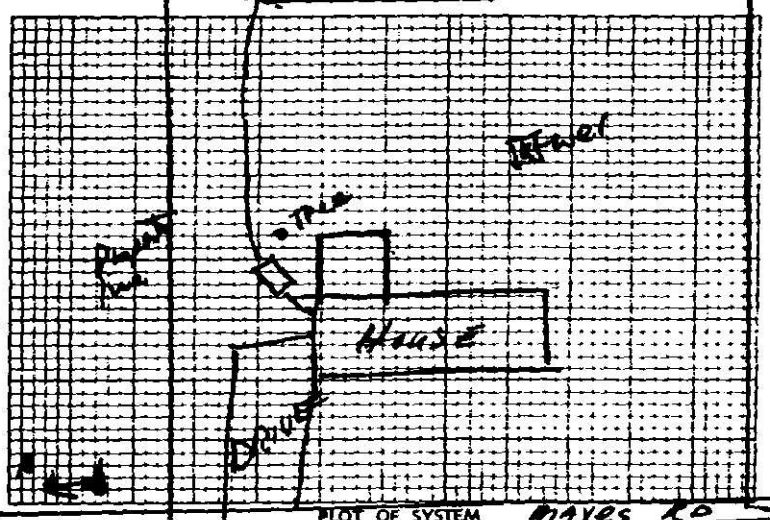
Date Issued July 25th 87 Serial No. 07432 ICAR(S) Permit No. 21194

T C No 011-032-02

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 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 21194, dated 7-14-87 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 Aug 25th 1987, after which date this permit shall be null and void.



Permeability Rate PS 1104

Liquid Capacity of Tank 1500 gal

Tank Construction Pre Cast Concrete

Absorption and/or Nitrification Lines:

Total Line Length 200 LIN FT

Number of Lines Four

Distance from House 5 FT

Distance from Property Line 10FT

Distance from Well 52 FT

NAME OF OWNER CRAIG, ROBERT

LOCATION OF PROPERTY 17634 22 MAYES 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 To be 50FT x 3FT x 12 INCHES stone - hay or straw over-grade Bds - Keep Tank Shallow - use 1FT Fall / 100 plumbing 4 ton line between Tank & DIST Box

Division or Section Head Water Property Lines Environmentalist Ralph Miller

* If this permit is for the installation or construction of a new system, it must be signed by the division or o 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.

BHD-S-76

Environmental Health Department's Copy

C of A (s) No. 21194

Date Issued 6-21-84 **Serial** 6887 T. C. No 011-032-02 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 Craig (LAST) Robert (FIRST) (MIDDLE)

Location of Property 17634 [redacted] Mateo Rd

Application Number 21194 Permit Number 21194

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material PVC

Total Length of Drain Tile 300' Number of Lines Four

Depth of Filter Material 12" Cover Depth 24"

Water Supply Source Well Distance from Water Source 50'

Excavation Inspected 8-21-84 (DATE) Tank Inspected 8-21-84 (DATE)

Nitrification Field Inspected 8-21-84 (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 _____

Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH AGENCY'S COPY