6

MECKLENBURG COUNTY
Department of Public Health

1200 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203
Telephone 374-2113

Date Issued
1. 10-19-70
2. _____
3. _____

SDR No. 397
T.C. No. 037-163-04

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

NAME OF OWNER Williams, Milas

ADDRESS OF OWNER 3719-B Cascade Circle, Charlotte, N. C. ZIP 28211

LOCATION OF LOT Rego Street, Lot 5-1

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	1.	10-19-70	120 min/in
~~2~~	2.	~~10-19-70~~	~~24~~ min/in
____	3.	_____	_____ min/in

____ ON SITE INSPECTION REVEALED LOT TO BE UNSUITABLE FOR THE FOLLOWING REASON(S) _____

Michael K. Thomas
Environmentalist

(Stencil No.)
END 398
8/70

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

C

Date Received 1-20-70 APT No 397

T C No

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

NAME OF OWNER Williams (LAST) Miles (FIRST) (MIDDLE)

ADDRESS OF OWNER 3719-D Cascade Circle Char. N.C. ZIP 28211

PHONE NO Home 364-7390 Office 376-7770

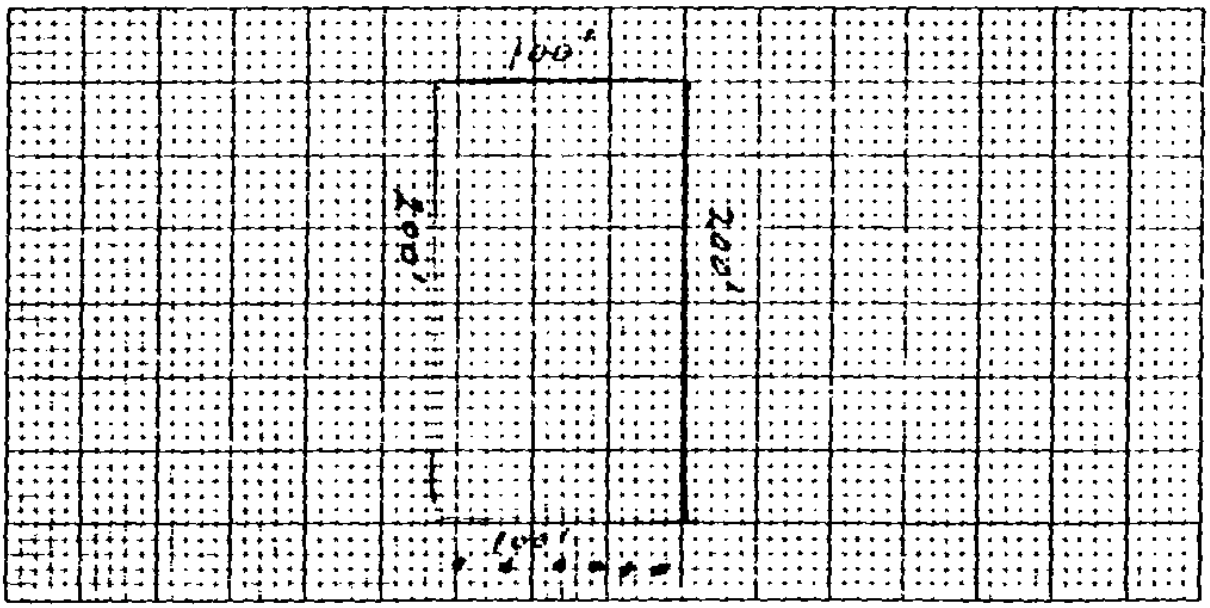
LOCATION OF PROPERTY Rea Street (STREET OR COUNTY ROAD)

SUBDIVISION Babcock Park LOT NO 5 BLOCK NO 1

MAP BOOK NO 14 PAGE NO 71

DEED REFERENCE DEED BOOK 2677 PAGE NO 503

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



ACCURATELY DIAGRAM & DIMENSION LOT

Miles Williams
OWNER

FORM NO E-1-1-1-70

HEALTH DEPARTMENT'S COPY

Serial No. 405 PTR No 397

Date Issued 2-17-71 T C No 027-163-04

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

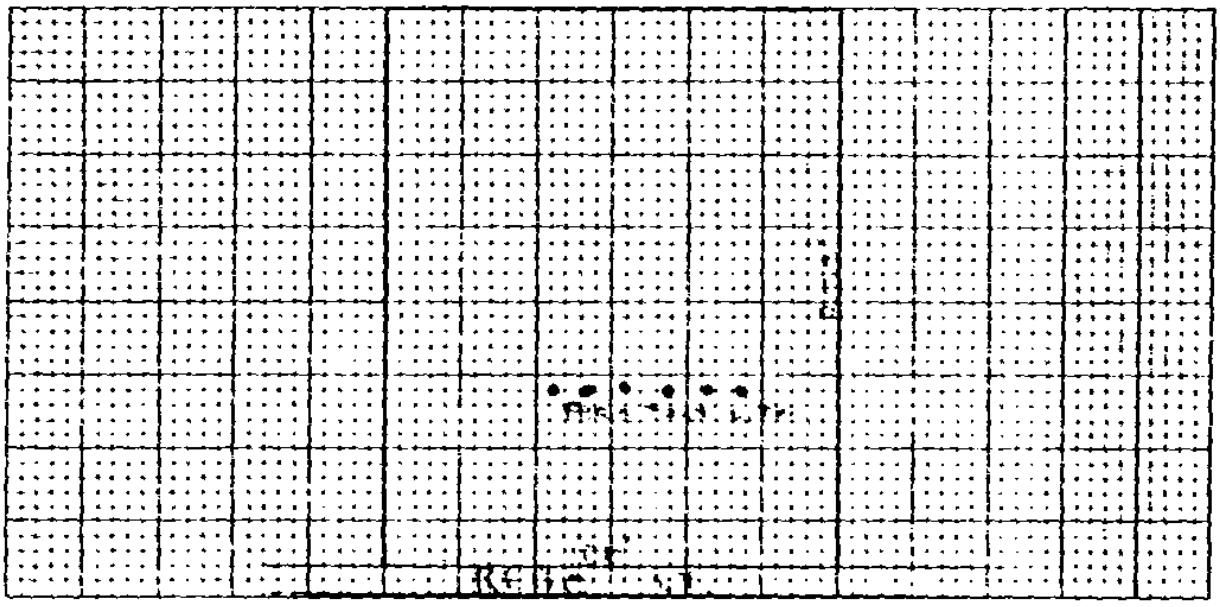
PERCOLATION TEST REPORT

NAME OF OWNER Williams (LAST) Milas (FIRST) (MIDDLE)

ADDRESS OF OWNER Apt 3719-B Cascade Circle ZIP

LOCATION OF PROPERTY Rego Street (STREET OR COUNTY ROAD)

SUBDIVISION Bahama Park LOT NO 5 BLOCK NO 1



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 **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 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 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.

W. H. Wilkinson

Director, Environmental Health Division or Authorized Section Head

FORM NO. E-2-1-1-70

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 2-17-71 ICAR(S) Application No. 397

T C No. 03-16-04

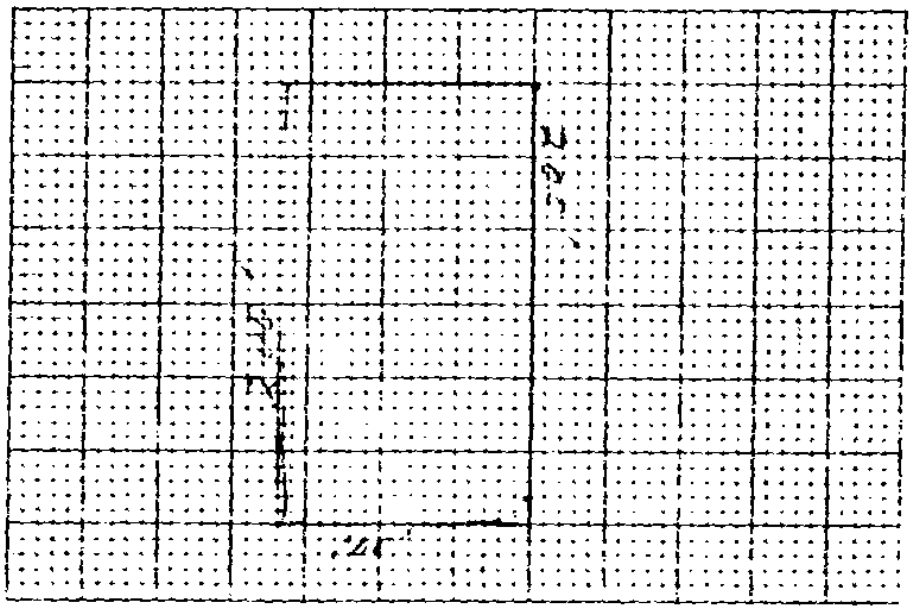
MECKLENBURG COUNTY HEALTH DEPARTMENT

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) Business Use - Max No Employees
6) Washing Machine X Yes No
7) Garbage Disposal X Yes No
8) Dishwasher X Yes 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 X

13) NAME OF OWNER (LAST) (FIRST) (MIDDLE)

14) ADDRESS OF OWNER

15) PHONE NO Home Office

16) LOCATION OF SYSTEM (STREET OR COUNTY ROAD)

17) SUBDIVISION Lot No. Block No.

Map Book No Page No.

18) DEED REFERENCE -- DEED BOOK AT PAGE 6

19) HAS A PERCOLATION TEST BEEN RUN? X YES NO DATE RUN 2-16-71

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.

2-17-71
DATE OF APPLICATION

William Tiddlemire
OWNER

FORM NO. E-4-7-1-70

HEALTH DEPARTMENT'S COPY

Serial No: 435

Date Issued 2-17-71

LA No. 397

T C. No 037-163-04

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 Williams (LAST) Miles (FIRST) (MIDDLE)

ADDRESS OF OWNER 3719-B Cascade Circle ZIP

LOCATION OF LOT Rego Street (STREET OR COUNTY ROAD)

SUBDIVISION Bahama Park LOT NO 5 BLOCK NO 1

MAP BOOK NO 14 PAGE NO 71

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. 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 397. 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

Environmentalist

Director, Environmental Health Division or Authorized Section Head

FORM NO. E-3-7-1-70

HEALTH DEPARTMENT'S COPY

Date Issued 10/26/71 Serial No. 1443 ICARIS Permit No 397

T C No 037-163-04

Map, Date

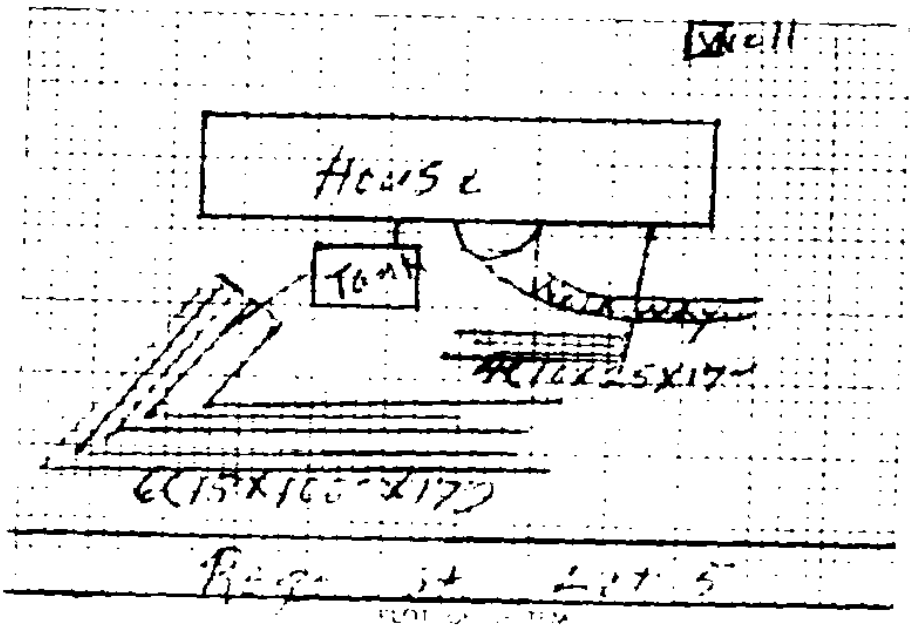
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 following 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 # 341 dated 10/26/71 and this permit shall be void and of no effect if the information provided in the application is found to be erroneous. All work shall be completed on or before 11/26/71, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permitted Use 6 BR

Liquid Capacity of Tank 1500 gal

Tank Construction P.C.

Absorption Area Determination

Total Trench Length 600'-100'

No. & Size 6(15'x16'x17")

Trench Width 18"

Trench Depth 18"

Distance Between Lines 100'

NAME OF OWNER Mecklenburg, Miles

LOCATION OF PROPERTY Hoyo St.

This permit is issued for the installation of the system 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 of the installation must be obtained before any system can be covered or otherwise rendered unavailable for examination.

Comments: Stay 10' of each property line

Date Approved 10/26/71

Charles R. Williams
Environmentalist

This permit for the installation or construction of a new system, if 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 HD-5-71

Date Issued 17 Nov 1971 **Serial No.** 1388 C of A (s) No. 392

T C No 032-163 04

Map Date ———

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Williams (LAST) Mike (FIRST) ____ (MIDDLE)

Location of Property Rego St

Application Number 392 Permit Number 392

Inspection Data:

Liquid Capacity of Tank 150 gal + Tank Material pound concrete

Total Length of Drain Tile 60' Number of Lines 6

Depth of Filter Material 12" Cover Depth 15" - 24"

Water Supply Source well Distance from Water Source 50 +

Excavation Inspected 11/12/71 (DATE) Tank Inspected 11/12/71 (DATE)

Nitrification Field Inspected 11/12/71 (DATE)

Washing Machine Line Inspected, If Applicable 11/12/71 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface soil absorption, effluent discharge as described above, and it has been ~~not~~ installed or constructed, ~~not~~ properly 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 liabilities 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

/

J R Hickson
Environmentalist

FORM NO E-6 4-1-71

MECKLENBURG COUNTY 392