Date Received 3/14/79 (see file #8378)

APT No. 15246 ✓

T. C. No. 023-122-03

Map Date + 23

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Rozzelle (LAST) John (FIRST) H. (MIDDLE)

2) ADDRESS OF OWNER Route 9 Box 156 City ZIP 28208

3) PHONE NO Home 399-5186 Office 374-2123

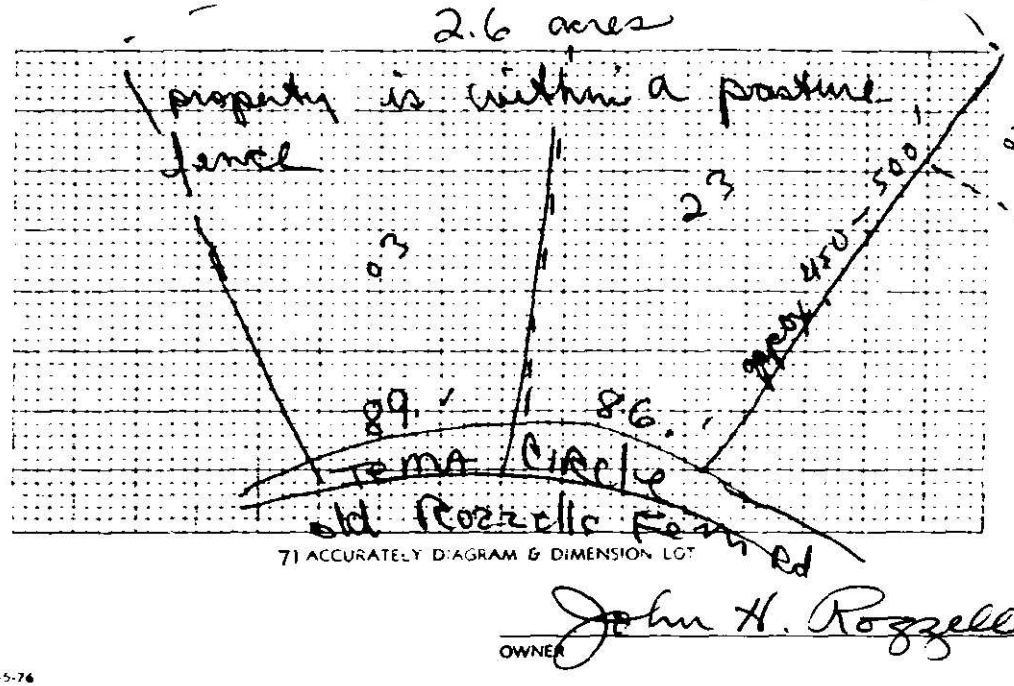
4) LOCATION OF PROPERTY Jema Circle - off NC 16 N (Statesville) (STREET OR COUNTY ROAD)

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 upon 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

John H. Rozzelle
OWNER

EHD-5-76

Environmental Health Department's Copy

NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX H
SITE EVALUATION
(Ground Absorption Sewage Disposal)

S.I.R. No. 15246

OWNER: John H. Ragsdill
ADDRESS: Rt. 9, Box 121
COUNTY: Rockett, N.C. 28115
LOCATION OF SITE: Iona Lake

DATE REQUESTED:
PLAT NO.: PO 023-122-C 3 23
LOT SIZE: 146.66

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS U 2 to 6%	(S) PS U 2-6%	S PS U	S PS U
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S PS 2-1 (C) Clay	S PS U N/A	S PS U	S PS U
3. SOIL STRUCTURE (12-36 in.) (Clayey Soils)	S PS Muscive (U)	S PS U N/A	S PS U	S PS U
4. SOIL DEPTH (In.)	S Lap" PS (U)	S Lap" PS (U)	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock)	(S) None PS U	S Rock PS outcrops (U)	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) 36" to PS ground U water	(S) 24" to PS ground U water	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S ~~PS~~ slow (U)	S PS slow (U)	S PS U	S PS U
8. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	unsuitable	unsuitable		
SOIL SERIES	Iredell	Rock outcrops		

S - Suitable PS - Provisionally Suitable U - Unsuitable

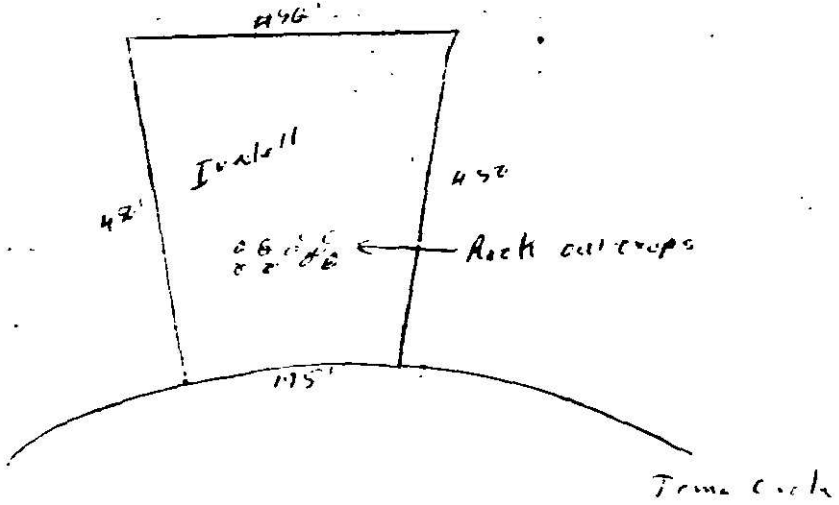
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns)

Recommendations/Comments:

Described By: William R. Martin

Title: Soil Scientist Date: 3-23-79

dhs form 2601 (1/79)
Sanitation


496'
Invalid
452
42'
Rock outcrops
195'
Trona Creek

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

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

SIR.NO. 15246
T.C.NO. po 023-122-03 & 23
MAP DATE
DATE March 27, 1979

NAME OF OWNER Rozzelle, John H.

ADDRESS OF OWNER Route 9, Box 156, Charlotte, N.C. 28206

LOCATION OF LOT Tema Circle

At your request and pursuant to Section .1900 of the North Carolina Administrative Code, Title 10, Department of Human Resources, Chapter 10, Health Services, Subchapter 10A, a site evaluation has been made for an on premises ground absorption sewage disposal system on the property designated above and the following conditions were found:

Soil Structure Massive
Soil Permeability Unsuitable

Sites classified as Unsuitable are not acceptable for soil absorption of sewage effluent. However, if engineering, geologic, soil, and environmental studies indicate that a suitable septic tank system or a suitable alternate system can be expected to function satisfactorily, such sites may be re-classified as Provisionally Suitable. (Section 10 of the North Carolina Administrative Code 10 A,.1910)

If you desire to file for permission to install an "alternate or modified" system, you should present this office with your proposals in the form of plans and specifications. These would be reviewed and if it is found that the system may reasonably be expected to function satisfactorily, approval may be given on the execution by you of a "Septic Tank Agreement Form" available in this office.

John R. Adkisson

John R. Adkisson, Environmentalist

EHD 999 (1/79)

R

Mecklenburg County

Department Of Building Standards
And Code Enforcement

P. O. Box 16040

Charlotte, North Carolina 28216

To: John K. Atkinson, Environmentalist
Dept. of Environmental Health
1200 Blythe Blvd.
Charlotte, NC 28203

Reference: John W. Rozzell
Tax Parcel 023-122-23

Dear Mr. Atkinson.

The parcel of land located at on Tema Circle

and further identified by tax parcel number 023-122-23

is zoned RR (Sq. 131)

Permitted uses in this district include: Use of Mobil Home as a Residence

If this office can be of further assistance, please contact us.

Very truly yours,

Bunny Benson #602
Zoning Inspector

SEE INSTRUCTIONS ON BACK

Date Received 25 Oct 1979

ICAR (S) Application No. 15246

T. C. No. 023-122-[illegible]

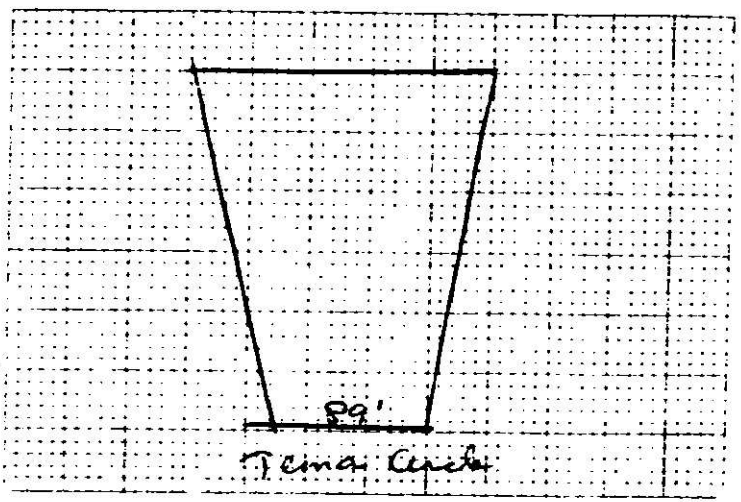
Map Date [illegible]

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 2
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 Rozzelle (LAST), John (FIRST), R. (MIDDLE)

14) ADDRESS OF OWNER Rt 9 Box 156 Charlotte, N.C 28208

15) PHONE NO Home 399-5186 Office 374-2123

16) LOCATION OF SYSTEM Tema Circle (STREET OR COUNTY ROAD)

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

Map Book No ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ___ NO DATE RUN unsuitable 3/79

20) PTR NUMBER (See Instructions) ___

The undersigned person hereby agrees that he has read the foregoing application and that the contents of some 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.

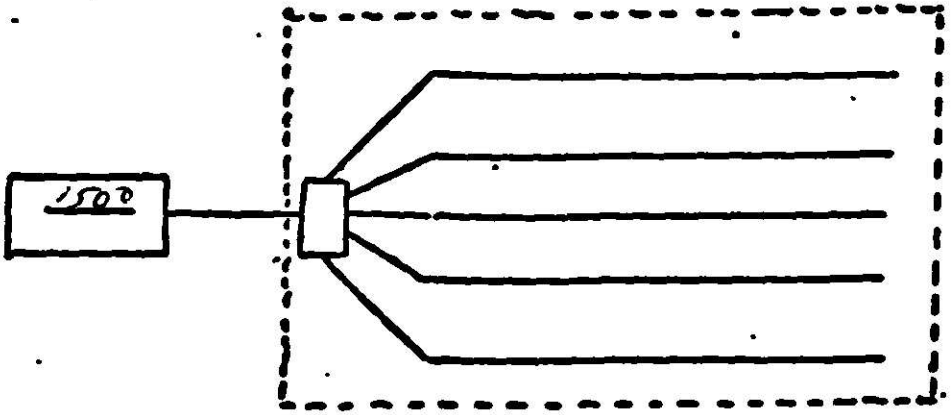
25 Oct 1979
DATE OF APPLICATION

✓ John H Rozzelle
OWNER

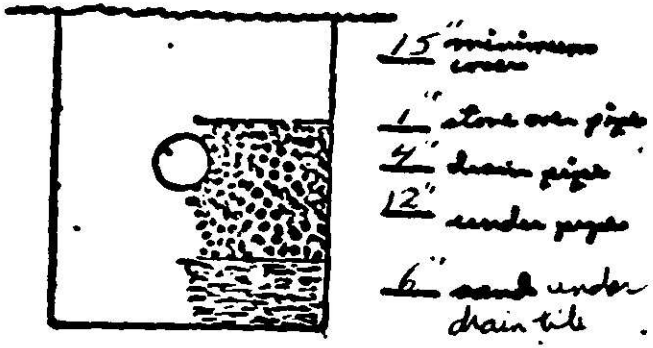
EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

15-246



4 drain pipe ~~8'~~ 2'
long 3' on center
990 sq foot
bottom area.



Submitted for consideration and approval:

Tena Circle
Property Location

Joblin H Rozzelle
Owner's Signature

Bed System

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

TANK AGREEMENT 15296

COPY

The undersigned, Rozzelle, John H., owner of property located at Paw Creek Twp., ("the site") and described in instrument recorded in Book 4142 at Page 761, Mecklenburg Public Registry, hereby acknowledges that he applied to the Department of Environmental Health for a permit to install a septic tank sewage disposal system on the site; the Department evaluated the site for suitability for such a system in accord with the regulations promulgated by the North Carolina Commission for Health Services as 10 NCAC 10A .1900 et seq; that the Department classified the site as Unsuitable and an appropriate permit was issued by the Department.

The undersigned further acknowledges that the proper design, construction and maintenance of such septic tank system is his responsibility and that neither the Department nor its officials, employees, or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time, or that the Department, its officials, employees or agents assume any liability for damages, consequential or direct, which are caused, or which may be caused, by a malfunction of such system.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

And the undersigned further agrees for himself, his heirs and assigns, that he shall idemnify and hold harmless the Department and its successors, as well as Mecklenburg County, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure, of said septic tank system.

And the undersigned further agrees for his heirs and assigns that, in the event any septic tank system installed under authority of the aforesaid permit fails to perform adequately, in any respect, he will take whatever measures are required to correct same; or if such is impossible he will discontinue use of said system immediately.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This 25th day of October, 1979

John H. Rozzelle (Seal)

_____ (Seal)

STATE OF NORTH CAROLINA,
COUNTY OF MECKLENBURG

I, Anne H. Goss, a Notary Public for said County and State, do hereby certify that John H. Rozzelle, personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 25 day of Oct, 1979.

Anne H. Goss
Notary Public

My Commission Expires: 4/24/83

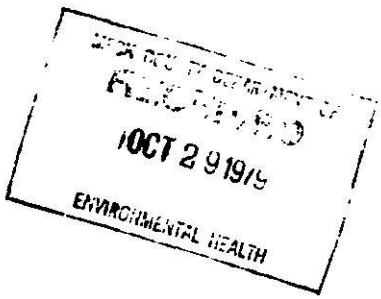
STATE OF NORTH CAROLINA,
COUNTY OF MECKLENBURG

I, _____, a Notary Public for said County and State, do hereby certify that _____ personally came before me this day and acknowledged that he is _____ of _____, and that by authority duly given and as the act and deed of said corporation, the foregoing instrument was signed in its name by its _____, sealed with its corporate seal and attested by _____ as its _____.

WITNESS my hand and notarial seal, this _____ day of _____, 19 ___.

_____
Notary Public

My Commission Expires _____


OCT 29 1979
ENVIRONMENTAL HEALTH

Serial No. 3673

LA No. 15246

Date Issued October 30, 1979

T. C. No. 023-122-23

Map Date

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 Rozzelle, (LAST) John (FIRST) R. (MIDDLE)

ADDRESS OF OWNER Rt. 9, Box 156, Charlotte, NC ZIP 28208

LOCATION OF LOT Tema Circle (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 15246. 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, 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.

******AGREEMENT FORMS SIGNED, NOTARIZED, AND PLACED ON RECORD AT REGISTER OF DEEDS OFFICE**********

Environmentalist

John R Jackson

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 7-3-84

ICAR (S) Application No 15246

T. C. No. 023-122-23

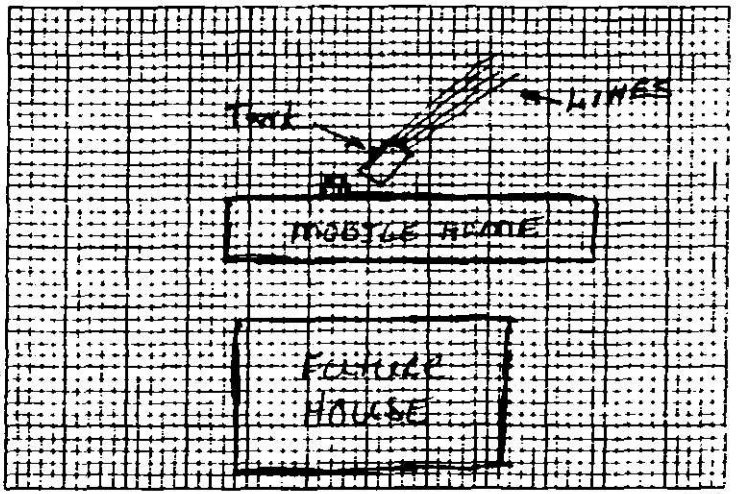
Map Date /

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) use existing system 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 N/A
6) Washing Machine ✓ Yes ___ No
7) Garbage Disposal ___ Yes ✓ No
8) Dishwasher ___ Yes ✓ No
9) Water Supply
A) Individual Well ✓
B) Governmental System N/A
C) Community System
1 Well source N/A
2 Governmental source N/A
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 N/A
12) VA Case No. N/A

13) NAME OF OWNER Ridenhour, Jimmy + Teena Wayne Henline
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 11410 Tenna Circle

15) PHONE NO. Home 393-0568 Office 392-8141 ext 237

16) LOCATION OF SYSTEM 11410 Tenna Circle
STREET OR COUNTY ROAD

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

Map Book No. _____ 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.

July 3, 1984
DATE OF APPLICATION

Teena Ridenhour
OWNER

EHD-5-76

Environmental Health Department's Copy

Date Received 7-16-84

MECK CO. HEALTH DEPARTMENT OF
RECEIVED
JUL 16 1984
ENVIRONMENTAL HEALTH

CAR(S) Application No 15246

T C No. 023-122-23

Map Date L

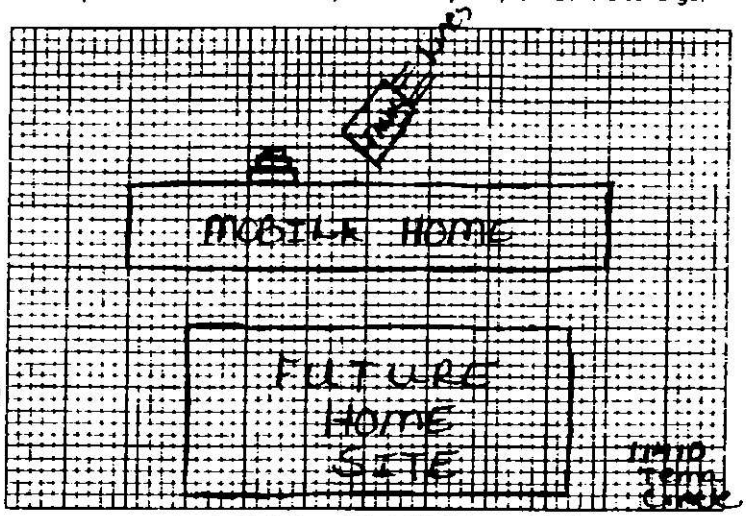
MECK CO. HEALTH DEPARTMENT OF
RECEIVED
JUL 16 1984
ENVIRONMENTAL HEALTH

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) X 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 ✓ No
5) Residence ✓ Yes ___ No
6) No of Bedrooms 3
7) Business Use — Max No Employees N/A
8) Washing Machine ✓ Yes ___ No
9) Garbage Disposal ___ Yes ✓ No
10) Dishwasher ___ Yes ✓ No
11) Water Supply
A) Individual Well YES
B) Governmental System N/A
C) Community System
1 Well source N/A
2 Governmental source N/A
12) Sewage System
House located within 200 feet of public sewer ___ Yes ✓ No
House located within 200 feet of community sewer ___ Yes ✓ No
13) FHA Case No N/A
14) VA Case No N/A

13) NAME OF OWNER Ridenhour, Teena Henline
LAST FIRST MIDDLE
& Ridenhour, Jimmy Wayne

14) ADDRESS OF OWNER Rt. 14, 11410 Tema Circle,

15) PHONE NO. Home 393-0568 Office Teena 392-8141 ext #237

16) LOCATION OF SYSTEM 11410 Tema Circle
STREET OR COUNTY ROAD

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

Map Book No. _____ 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.

July 11, 1984
DATE OF APPLICATION

Teena Ridenhour
OWNER

EHD-5-76

Environmental Health Department's Copy

Date Issued 10-8-84

Serial No. 7905

SIR No. 15246

T. C. No. 023-122-23

Map Date 1 CRT

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 Ridenhour, (LAST) Jimmy (FIRST) Wayne (MIDDLE)

ADDRESS OF OWNER 11410 Tema Circle, Charlotte, NC ZIP 28208

LOCATION OF LOT 11410 Tema Circle (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 _____. 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.

*** SYSTEM REPAIR MUST BE COMPLETED AND MOBILE HOME REMOVED FROM LOT PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLETION ***

Ralph Miller
Environmentalist

Bill D. Henderson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Serial No. 07409

ICAR(S) Permit No. 15246

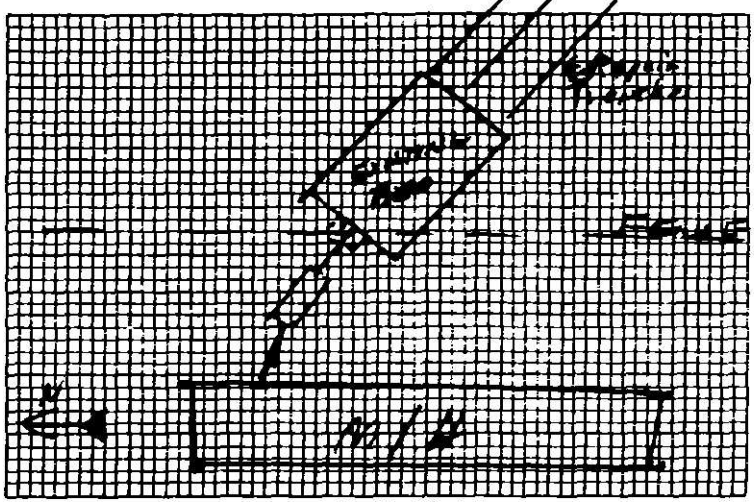
Date Issued 7-17-84

T C. No. 023-122-23

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 herebv given to ____Install or Construct, X Alter or Repair the individual septic tank wastewater treatment system with subsurfoce, soil absorption, effluent discharge as specified herein at the described location. This permit is granted based upon the information supplied in application 15246, dated 7-11-84 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 Aug 1984, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate 4 ILB

Liquid Capacity of Tank

Tank Construction Replace

Absorption and/or Nitrification Lines:

Total Line Length 100 Lin. FT

Number of Lines THREE

Distance from House 60 FT

Distance from Property Line > 200 FT

Distance from Well 100 FT

NAME OF OWNER RIDENHOUR, JIMMY

LOCATION OF PROPERTY 11410 TERRA CIRCLE

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: Three Trenches @ 36 FT x 3FT x 18 Inches Stone - Lay on Stone - COVER- Grade Beds - To Be Taken from existing Bed

B. Henderson
Division or Section Head

Ralph Mills
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.

EHP-5-76

Environmental Health Department's Copy