Date Received 1/12/80

APT No 16449

T C No 215-131-11

Map Date JAN, 79

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER RALPH (FIRST) SQUIRES (MIDDLE) COAST CO. INC

2) ADDRESS OF OWNER PO BOX 25178 ZIP 28212

3) PHONE NO Home _____ Office 5379553

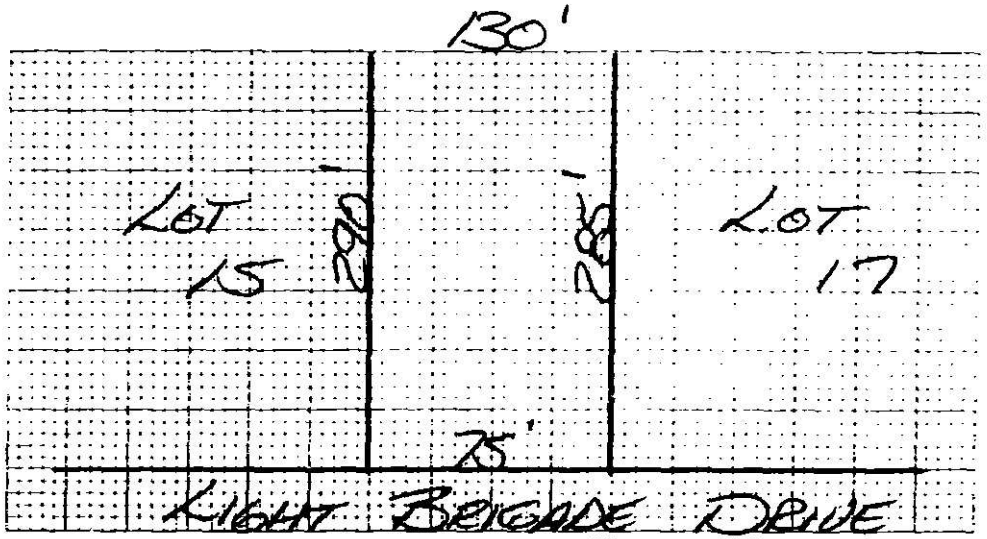
4) LOCATION OF PROPERTY LIGHT BRIGADE DR (STREET OR COUNTY ROAD)

5) SUBDIVISION WINDROW LOT NO 16 15 BLOCK NO Q

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 property listed for the purpose of determining if the lot is suitable for the installation of an individual wastewater treatment system with subsurface soil absorption effluent discharge



7) ACCURATELY DIAGRAM & DIMENSION LOT

OWNER

EHD-5-76

Environmental Health Department's Copy

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

APPENDIX II
SITE EVALUATION
(Ground Absorption Sewage Disposal)

S.I.R. No. 16449
T.C. No. PO 215-131-15,16

OWNER: RALPH SQUIRES CONST. CO. DATE REQUESTED: 3-7-80
ADDRESS: PO Box 25178 PLAT NO:
COUNTY: MECK. 28212 LOT SIZE: 28,500
LOCATION OF SITE: LIGHT BRIGADE DRIVE LOT 15 Block Q

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) 2-10 U	S (PS) 0-5 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 Clayey (U) Mixed	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) Blocky U	S Blocky PS To (U) Massive	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) 48 U	S PS <48 (U)	S PS U	S PS U
5. RESTRICTIVE HORIZONS (inches) (Impervious strata, Rock)	S (PS) NONE U	S PS clay (U)	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) Adequate U	S PS slow (U)	S PS U	S PS U
7. SOIL PERMEABILITY (percolation rate)	S (PS) Moderate 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	✓ P.Suitable	Unsuitable		
10. SOIL SERIES	Cecil	Helena (Mostly Surface water Problem)		

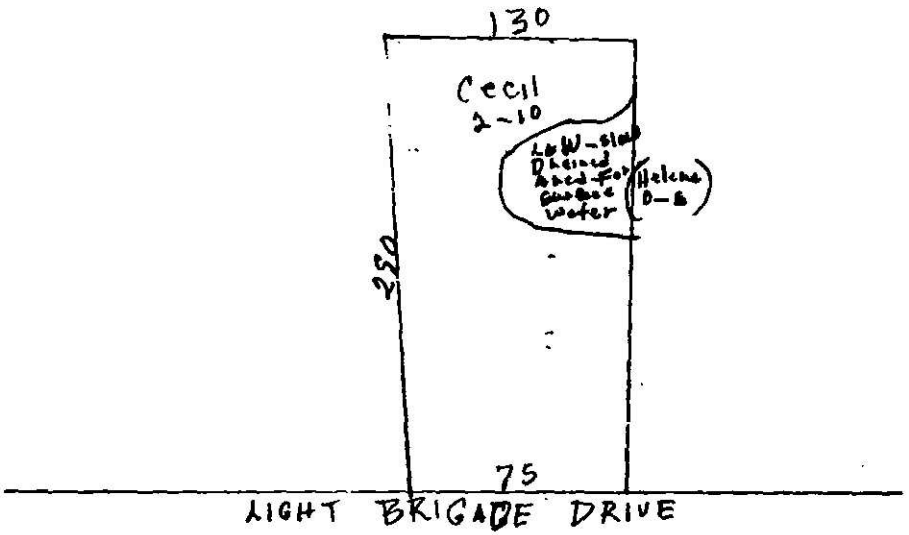
S - Suitable PS - Provisionally Suitable U - Unsuitable

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

Recommendations/Comments:

Described By: Willard B. Ramsey
Title: Soil Scientist
Date: 3-18-80

DHS Form 2601
Sanitation
EHD 539 (2/80)


130
Cecil
2-10
Low-slope
Helena
D-B
250
75
LIGHT BRIGADE DRIVE

Serial No. 3441

PTR No. 16449

Date Issued March 25, 1980

T C No po 215-131,15,16

Map Date

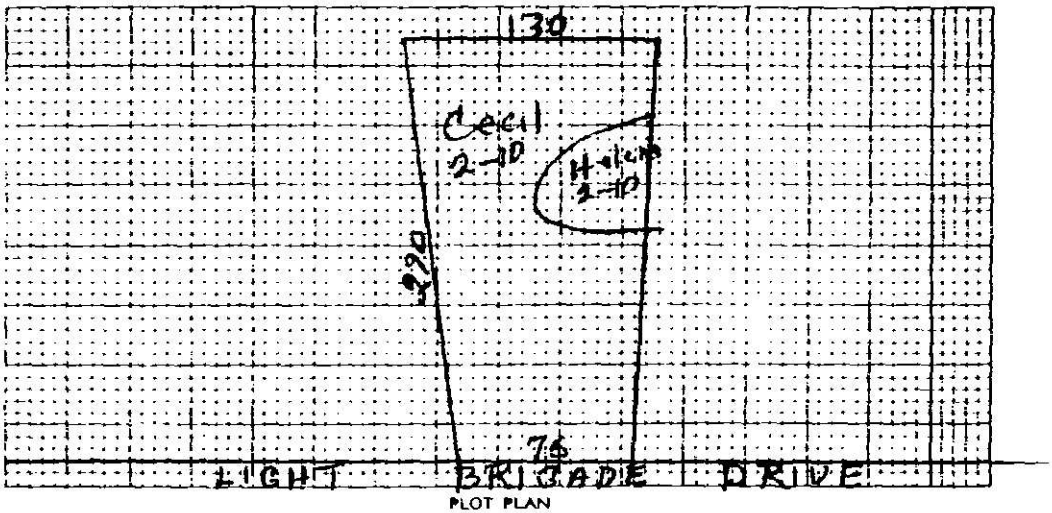
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER (LAST) Ralph Squires Const. Co., Inc. (FIRST, MIDDLE)

ADDRESS OF OWNER PO Box 25178, Charlotte, NC ZIP 28212

LOCATION OF PROPERTY Light Brigade Drive (STREET OR COUNTY ROAD)

SUBDIVISION Windrow LOT NO ~~#16~~ 15 BLOCK NO. "O"



PLOT PLAN

This is to certify that a soil investigation and 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 subsurface wastewater treatment system with subsurface soil absorption effluent disposal subject to the following terms and conditions:

1. [illegible] from the Mecklenburg County Department of Environmental Health on the installation of the wastewater treatment system on this lot.
2. [illegible] by the Mecklenburg County Department of Environmental Health as outlined above and in the [illegible]
3. The [illegible] the system installed on this property [illegible]
4. The [illegible] performed on the [illegible] by the Mecklenburg County Department of Environmental Health under the area indicated as acceptable for 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.

W. B. Ramsey
Soil Scientist

John R. Thomson
Environmental Health Director or Authorized Section Head

EHD-5 76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 10-11-82 — CAR (S) Application No 16449

T/C No 215-131-15,16

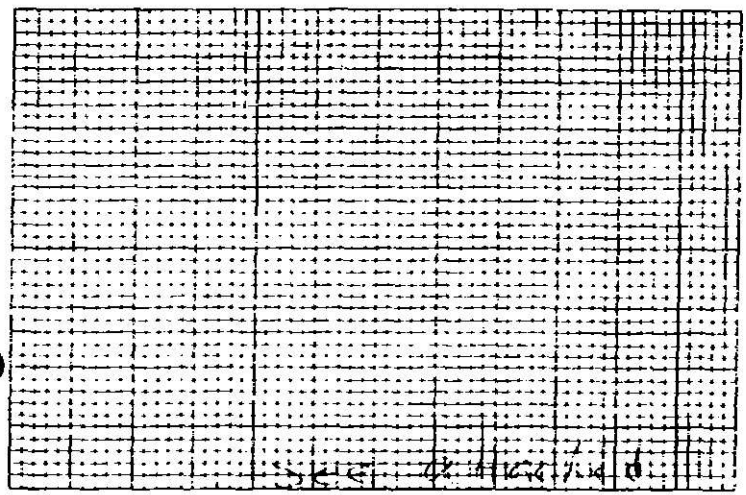
Map Date _____

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) 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)

Mobile Home ____ Yes ____ No
Residence X Yes ____ No

4) No of Bedrooms 4
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 _____

13) NAME OF OWNER Ralph Squires Const Co (LAST / FIRST / MIDDLE)

14) ADDRESS OF OWNER P O Box 25178

15) PHONE NO Home _____ Office 537-9553

16) LOCATION OF SYSTEM 7? Eight Brigade Dr (STREET OR COUNTY ROAD)

17) SUBDIVISION [illegible] Lot No. 15 Block No. Q

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.

9-22-82
DATE OF APPLICATION

Larry Schuster
OWNER

EHD-5-76

BL-10-13-82

LA No 16449

Serial No. 5965

Date Issued 10-11-82

T C No PO 215-131-15,16

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

... MENT 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 Ralph Squires Const. Co. (LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P. O. Box 25178, Charlotte, NC ZIP 28212

LOCATION OF LOT 1914 Light Brigade Dr. (STREET OR COUNTY ROAD)

SUBDIVISION Windrow II LOT NO 15 BLOCK NO Q

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 16449. 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.

Ron Phelps
Environmentalist

Mike Sexton
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

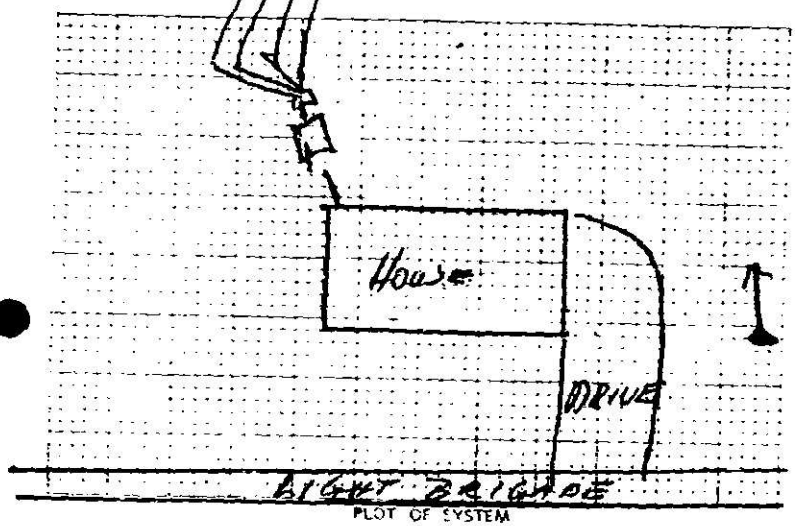
Date Issued SEPT 16th 1983 Serial No. 6630 ICAR(S) Permit No. 16449

T C No 215-131-13/16

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 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 16449 dated 9-20-83 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 OCT 30th 1983, after which date this permit shall be null and void



PLOT OF SYSTEM

Permeability Rate PS TVA

Liquid Capacity of Tank 1500 gal

Type Construction Pre Cast Concrete

Absorption Unit or Nitrification Line

Total Line Length 400 Lin FT

Number of Lines FOUR

Distance from Water 20 FT

Distance from Property Line 20 FT. NOT IN YET

Distance from Well KEEP 100 FT

NAME OF OWNER RALPH SQUIRES CONSTRUCTION CO

LOCATION OF PROPERTY 1914 LIGHT BRIGADE DR

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 inspectable or can be used. The issuance of this permit does not in any way guarantee that system anticipated to be constructed will operate properly, or relieve any person now or hereafter owning, installing or using such system from any liability resulting from the failure of the system to operate properly.

FOUR Trenches @ 100 FT x 3 FT x 12 inches - bay or stone cover grade B's - plumb w/a line into D' Box

Comments

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 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 16449

Date Issued 10-26-83 **Serial** 6270 T C No 215-131-

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

IMPROVEMENT PERMIT

CERTIFICATE OF APPROVAL

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

Name of Owner RALPH SQUIRES (LAST) (FIRST) CO. (MIDDLE)

Location of Property 1914 LIGHT BRIGADE DR.

Application Number 16449 Permit Number 16449

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material Pre Cast Concrete

Total Length of Drain Tile 300 lin FT Number of Lines THREE

Depth of Filter Material 12 inches Cover Depth 12 inches

Water Supply Source well Distance from Water Source 125 FT

Excavation Inspected 10-26-83 (DATE) Tank Inspected 10-26-83 (DATE)

Nitrification Field Inspected 10-26-83 (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 V 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 Changed from FOUR Bedroom to three Bedroom by letter from LARRY SCHUSTER of RALPH SQUIRES CO.

Ralph Miller
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY