Date Received 8-31-84

MECK[illegible] DEPARTMENT OF
RECEIVED
A[illegible] 1984
ENVIRONMENTAL HEALTH

SIR No. 21396
T. C. No. [illegible]. 005-221-01
Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Barton (LAST) Walter (FIRST) S. (MIDDLE)

2) ADDRESS OF OWNER c/oWellworth Realty Co.,Rt.2,Box 390,Davidson,N.C ZIP 28036

3) PHONE NO. Home _____ Office 892-6606

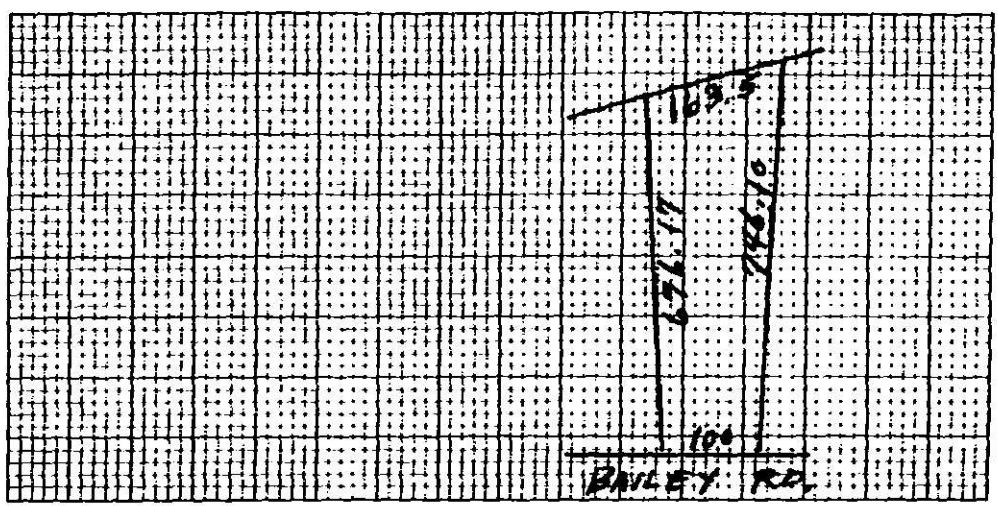
4) LOCATION OF PROPERTY Bailey Rd. Between Hwy. 21 and Hwy. 115 (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. 2 BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. As per attached map.

6) DEED REFERENCE: DEED BOOK 4854 PAGE NO. 303

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

Walter S. Barton
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21376

T.C. NO. PO 006-321-01

(Ground Absorption Sewage Disposal)

OWNER: WALTER BARTON
ADDRESS: Tidewater Realty
R-2 Box 350 DAVIDSON 28036
PLAT NO:
LOT SIZE: 30 +/-
LOCATION OF SITE: Bailey Rd Between Hwy 21 & Hwy 115
LOT #2

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	IIe			
9. SITE CLASSIFICATION	P. Suitable			
10. SOIL SERIES	Cecil			

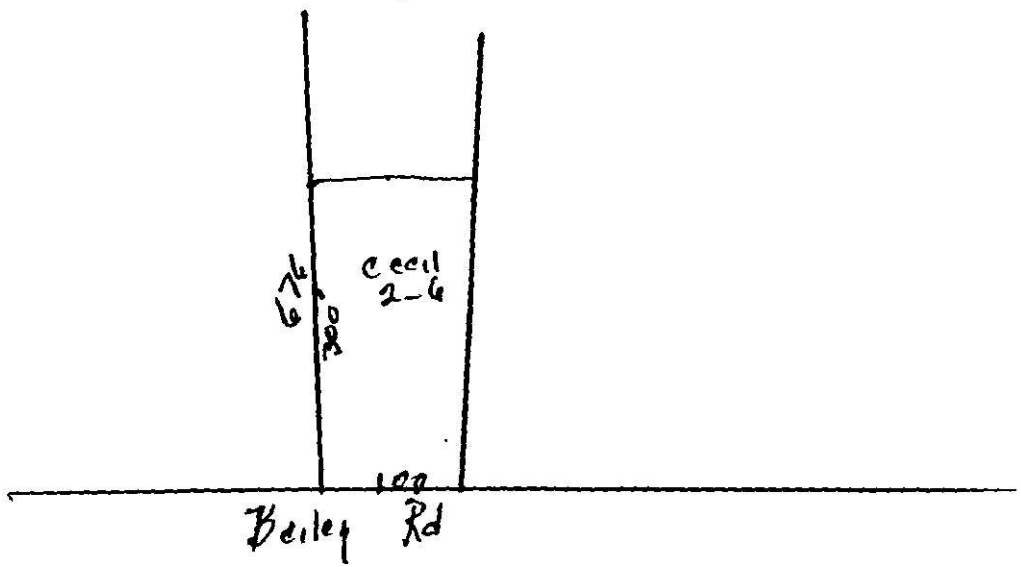
S - Suitable PS - Provisionally Suitable, U - Unsuitable

**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: 9-14-84


Cecil
2-6
Bailey Rd

Serial No. 5873

SIR No. 21396

T. C. No. PC 005-221-01

Date Issued 9-17-84

Map Date /

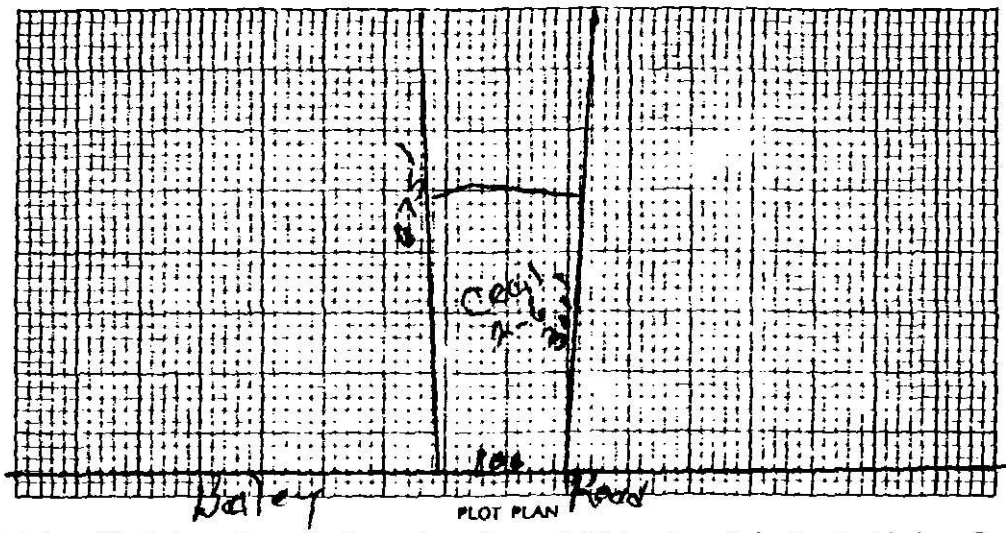
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Barton (LAST) Walter (FIRST) S. (MIDDLE)

ADDRESS OF OWNER % Wellworth Realty Route 2, Box 390, Davidson, NC ZIP 28036

LOCATION OF PROPERTY Bailey Road (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. 2 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, construct, alter or repair the specific system shall be obtained from the Mecklenburg County Department of Environmental Health 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 Mecklenburg County Department of Environmental Health prior to installation based on the permeability 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 indicated as acceptable for system installation on the above plot.
4. This approval is void if any grading, filling or construction, including the planting of shrubs, is performed on the lot which in the opinion of the Mecklenburg County Department of Environmental Health renders the area indicated as acceptable for system installation unsuitable for 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 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

Environmental Health Director or
Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

FILE: 21396

TC: PO 005-221-01 L

L

JOB LOCATION

① ADDRESS: 10631 (STREET NO) BAILEY ROAD (STREET) ② FILE: 21396

③ CITY: HUNTERSVILLE ④ TAX PARCEL NO.: PO 005-221-01

⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: JEFFREY (FIRST) WADE (MIDDLE) JACKSON (LAST)

⑨ MAILING ADDRESS: 1230 AUTEN ROAD

⑩ CITY: CHARLOTTE ⑪ STATE: NC ⑫ ZIP: 28216

⑬ PHONE: (WORK) 334 8604 ⑭ (HOME) 3991296

REQUEST

This request is for a(n):

⑮ ☑ New installation permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify)

DESIGN CRITERIA

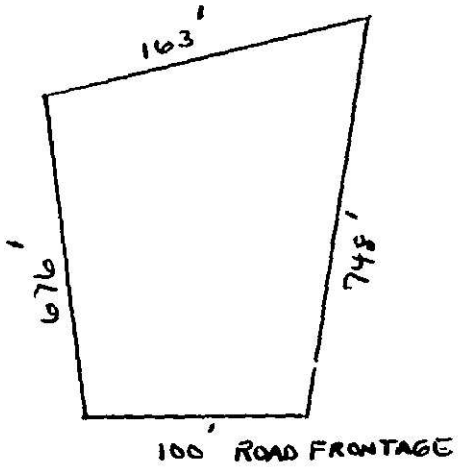
System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 3 ㉕ Type?

㉓ Maximum occupancy? 2 ㉖ Maximum number of employees?

㉔ Basement? ☑ yes ☐ no ㉗ Maximum number of seats?



㉘ Accurately dimensioned plot

WATER SUPPLY

㉙ Water supply from (present or proposed):

A ☑ Individual well

B ☐ Municipal system

C ☐ Community well

D ☐ Community system

㉚ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Jeffrey Wade Jackson

Date: 8-22-85

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY

Date Issued 4-2-85

Serial No. 8354

SIR No. 21396

T. C. No. PO 005-221-01

Map Date L CBL

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

[illegible]

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Jackson, (LAST) Jeffrey (FIRST) Wade (MIDDLE)

ADDRESS OF OWNER 1230 Auten Rd., Charlotte, NC ZIP 28216

LOCATION OF LOT 10631 Bailey Road (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO 2 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 21396. 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.

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

Date Received 4-2-85

RECEIVED (illegible) Application No. 21396

T. C. No. P0005-221-01

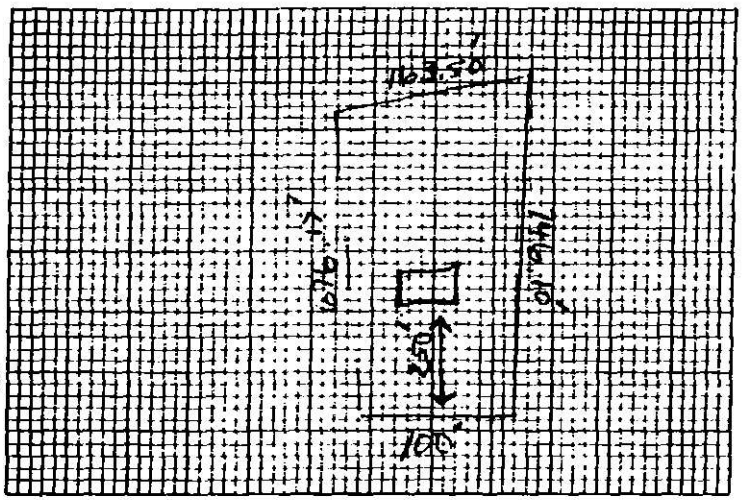
Map Date L

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) ✓ 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 3

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 JACKSON (LAST) JEFFREY (FIRST) WADE (MIDDLE)

14) ADDRESS OF OWNER 1230 ALTEN ROAD CHARLOTTE, NC 16

15) PHONE NO. Home 399 1296 Office 334 8604

16) LOCATION OF SYSTEM 10631 BAILEY ROAD (STREET OR COUNTY ROAD)

17) SUBDIVISION ____ Lot No. ____ Block No. ____

Map Book No. ____ Page No. ____

18) DEED REFERENCE — DEED BOOK 4925 AT PAGE 0126

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ____ NO DATE RUN 9-17-84

20) PTR NUMBER (See Instructions) 21396

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.

4-2-85
DATE OF APPLICATION

Jeffrey Wade Jackson
OWNER

EHD-S-76

Environmental Health Department's Copy

Serial No. 08645

Date Issued 10-25-95

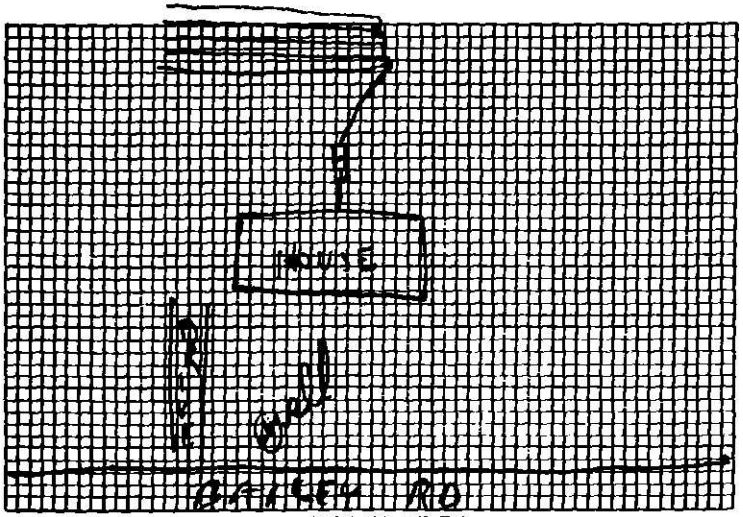
ICAR(S) Permit No. 21396

T. C. No. PO 005-221-01

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 ✓ 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 21396, dated 8-22-95 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 11-25-95, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500

Tank Construction PC

Absorption and/or Nitrification Lines:

Total Line Length 400'

Number of Lines 5 x 90'

Distance from House 5'+

Distance from Property Line 10'+

Distance from Well 50'+

NAME OF OWNER JACKSON JEFFREY WADE

LOCATION OF PROPERTY 10631 BAICEY 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.

5 lines x 90' long - 3' wide x 12" stone

Comments:

B. Henderson
Division or Section Head

Kelly Rankin
Environmentalist

* 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-5-76

Environmental Health Department's Copy

C of A (s) No. 21396

Date Issued 11-20-85 **Serial** 8069 T. C. No. PO 005-221-01 L CLT

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 JACKSON (LAST) JEFFREY (FIRST) W. (MIDDLE)

Location of Property 10631 BAILEY RD

Application Number 21396 Permit Number 21396

Inspection Data:

Liquid Capacity of Tank 1500 gal. Tank Material PCC

Total Length of Drain Tile 400' Number of Lines 5

Depth of Filter Material 5 x 80' Cover Depth 3'

Water Supply Source well Distance from Water Source 50' (+)

Excavation Inspected 11-19 - 11-20-85 (DATE) Tank Inspected 11-20-85 (DATE)

Nitrification Field Inspected 11-19-11-20-85 (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: 1985, 1500 ST, CON, 1200 SFT, 12G, CECIL

Kelly Randall
Environmentalist

EHD-5-76

Environmental Health Department's Copy