Date Received 2-19-73

APT No. 5596

T C No. 135-255-06

Map Date 5-9-74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER (LAST) Bob McLemore (FIRST) & Co (MIDDLE) Inc

2) ADDRESS OF OWNER 6129 Lebanon Rd ZIP _____

3) PHONE NO Home _____ Office 545 4507

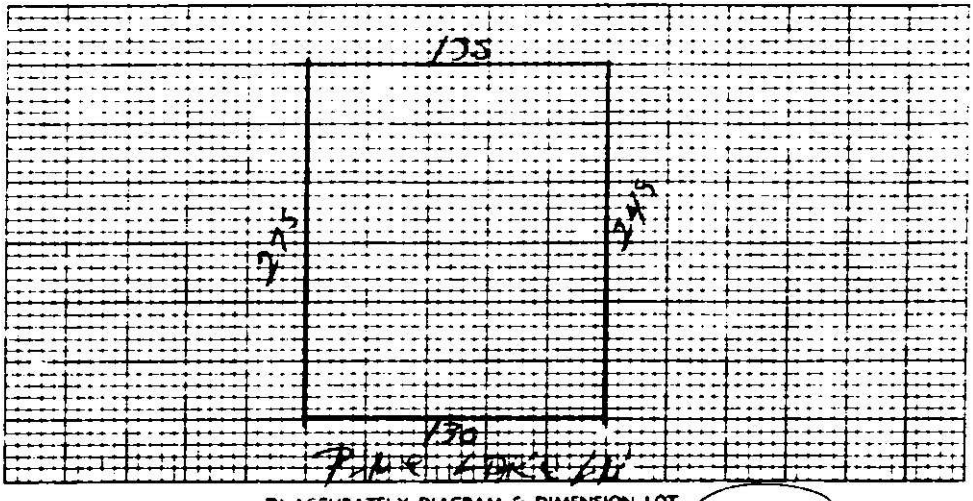
4) LOCATION OF PROPERTY Pine Lake Lane (STREET OR COUNTY ROAD)

5) SUBDIVISION Fairwood IV LOT NO 18 BLOCK NO. H

MAP BOOK NO _____ PAGE NO. _____

6) DEED REFERENCE DEED BOOK _____ PAGE NO _____

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



7) ACCURATELY DIAGRAM & DIMENSION LOT

OWNER

FORM NO. E-1-11-1-70

HEALTH DEPARTMENT'S COPY

MECKLENBURG COUNTY
Department of Public Health
1200 Blythe Boulevard
Charlotte, North Carolina 28203 Telephone 374-2113

Date Issued
1. 2-23-73
2. _____
3. _____

SDR No. 5596
T.C. No. 135-25-06

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

NAME OF OWNER Bob McLemore & Co., Inc.

ADDRESS OF OWNER 6129 Lebanon Road ZIP _____

LOCATION OF LOT Pine Lake Lane Farmwood VI 18-H

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
X	1.	2-22-73	95 min/in
_____	2.	_____	_____ min/in
_____	3.	_____	_____ min/in

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

Thomas R. Ward
Environmentalist

(Stencil No.)
MMD 398
8/70

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

Serial No. 2 - 0

PTR No. 5596

Date Issued April 9, 1973

T C No 135-255-06

Map Date 5-9-74

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

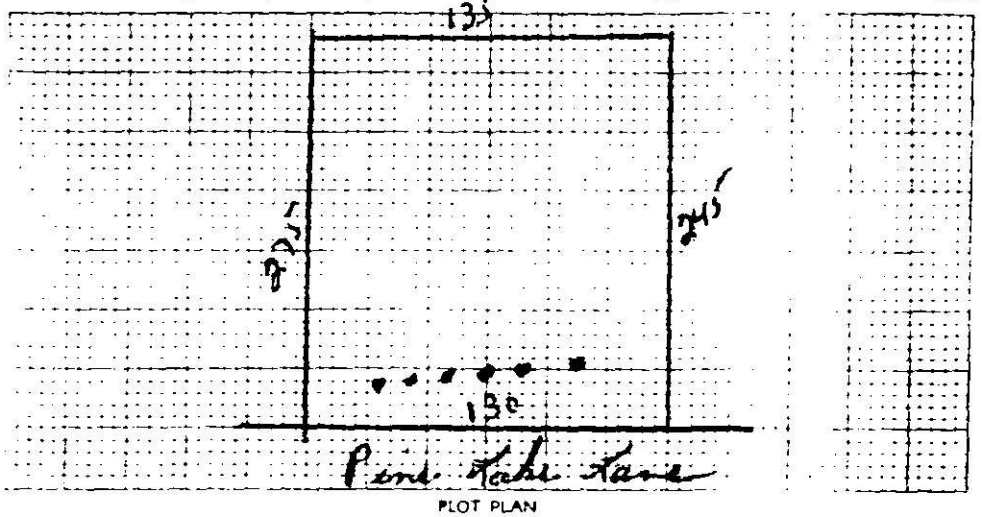
PERCOLATION TEST REPORT

NAME OF OWNER Bob McLemore & Company, Inc.
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 6129 Lebanon Road, Matthews, N.C. ZIP 28105

LOCATION OF PROPERTY Pine Lake Lane
(STREET OR CO. NAY ROAD)

SUBDIVISION Farmwood VI LOT NO 18 BLOCK NO H



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 wells) 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.

John R. Robinson

Director, Environmental Health Division or
Authorized Section Head

FORM NO. E-2-4-1-71

HEALTH DEPARTMENT'S COPY

J

SEE INSTRUCTIONS ON BACK

Date Received 10-26-73

ICAR(S) Application No 5596

T C No 175-25[illegible]6

Map Date 5-4-74

MECK COUNTY HEALTH DEPT.
RECEIVED
OCT 26 1973
ENVIRONMENTAL HEALTH DIVISION

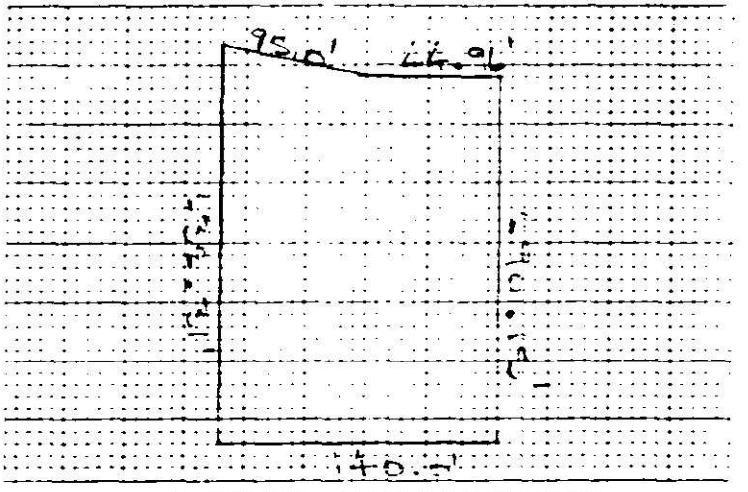
MECKLENBURG COUNTY HEALTH DEPARTMENT

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



4 No. of Bedrooms —
5 Living Units — Single Family —
Employees —
6 Washing Machine — Yes — No
7 Garbage Disposal — Yes — No
8 Dishwasher — Yes — No
9 Water Supply —
A Individual Well
B Community —
C Connected to —
Well —
D Connected to —
Private System —
Public System — Yes — No
Community Sewer — Yes — No
EMA Code No. —
10 LA Code No. —

3) PLOT PLAN (ACCURATELY DIMENSIONED)

13) NAME OF OWNER [illegible] E[illegible] E [illegible]
LAST FIRST MIDDLE

14) ADDRESS OF OWNER [illegible]

15) PHONE NO Home [illegible] Office [illegible]

16) LOCATION OF SYSTEM [illegible] RIVER LANE
STREET OR COUNTY ROAD

17) SUBDIVISION [illegible] Lot No [illegible] Block No [illegible]

Map Book No [illegible] Page No [illegible]

18) DEED REFERENCE — DEED BOOK [illegible] AT PAGE [illegible]

19 HAS A PERCOLATION TEST BEEN RUN? ✓ YES ___ NO DATE RUN 4 5 73 PR 2 60

20 PTR NUMBER (See Instructions) 5596

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.

10-24-73
DATE OF APPLICATION

[signature]
OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued October 26, 1973

Serial No. 3563

IMPROVEMENTS PERMIT

LA No. 5596

T. C. No 135-255-06

Map Date 5-9-74

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 Bob McLemore & Co., Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 6129 Lebanon Rd., Matthews, N.C. ZIP 28105

LOCATION OF LOT 7201 Pine Lake Lane
(STREET OR COUNTY ROAD)

SUBDIVISION Farmwood VI LOT NO 18 BLOCK NO H

MAP BOOK NO _____ PAGE NO _____

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 5596. 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

Thomas R. Ward
Environmentalist

John A. Dickerson
Director, Environmental Health Division or Authorized Section Head

FORM NO E-3-4-1-71

HEALTH DEPARTMENT'S COPY

Serial No. [illegible]50

ICAR(S) Permit No 5596

Date Issued 28 Mar 74

T C No 135-[illegible]-06

Map Date 5-9-74

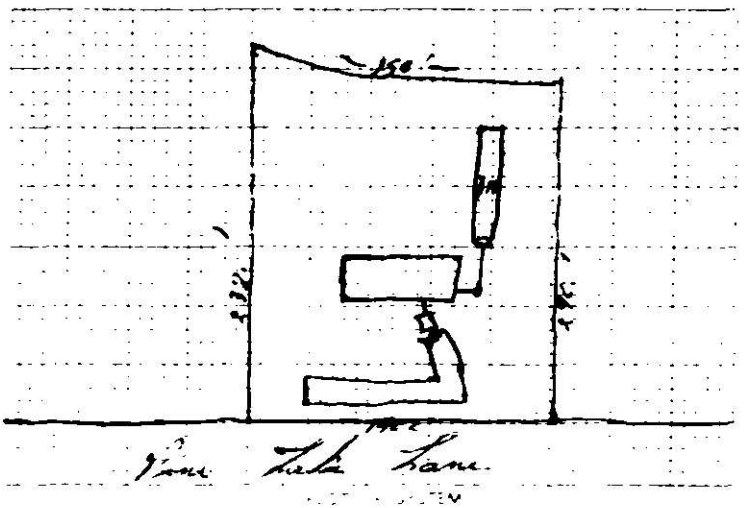
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

Permission is hereby given to ✓ Install or Construct, Alter or Repair the individual septic tank wastewater treatment system with subsurface soil absorption effluent discharge as described herein at the described location. This permit is granted based upon the information supplied in application 5596 dated 27 Mar 74 and this permit shall be void and of no effect if the work is not completed as provided in the application for this permit. A notice shall be completed and returned by 25 Apr 74 after which date this permit shall be null and void.



Proposed Use 60

Liquid Capacity of Tank 1500

Tank Construction AC

Absorption Area or Subsurface Limit

Total Linear Length 795'+150'+4M
3 CTS 450'x17"

Number of Lines 6(45'x13'x17")

Distribution Box K'

Distribution Method 12'

Distribution Box Commonly

NAME OF OWNER Robt McLemore JG Inc.

LOCATION OF PROPERTY 7201 Pine Lake Lane (Lot 18-H)

This system must meet the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health and be in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used

Comments Shrubs (Lot)

M. D. Hicks
Environmentalist

Director of Section Head

If this permit is for the installation or construction of a new system it must be signed by the division or a duly authorized Environmental Health Director in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired

Form E-5-9-1-72

Serial 4651

C of A (s) No. 5596

T C No. 135-255-06

Map Date 5-9-74

Date Issued 11 Apr 74

John R Atkisson
CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Earl McLemore Y. C. Inc
(LAST FIRST MIDDLE)

Location of Property 7201 Tom Jack Trail (A-T 15-H)

Application Number 5596 Permit Number 5596

Inspection Date:

Liquid Capacity of Tank 1500 Tank Material [illegible]

Total Length of Drain Tile 795' + 150' = 945' Number of Lines 6 (15' x 133' x 17")

Depth of Filter Material 12" Cover Depth 18"

Water Supply Source Community Distance from Water Source —

Excavation Inspected 11 Apr 74 (DATE) Tank Inspected 11 Apr 74 (DATE)

Nitrification Field Inspected 11 Apr 74 (DATE)

Washing Machine Line Inspected, If Applicable 11 Apr 74 (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 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 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: Overall (Cont.)

1) The washing machine drain field shall to be installed in an area with poor drainage.

M. A. Hinkley
Environmentalist

FORM NO. E-6-4-1-71

HEALTH DEPARTMENT'S COPY

Date Received 2-19-23

APT No.

T. C. No. 135-255-07

Map Date 5-9-74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Bob McLemore & Co. Inc
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER 6129 Lebanon Rd ZIP

3) PHONE NO Home Office 545-4507

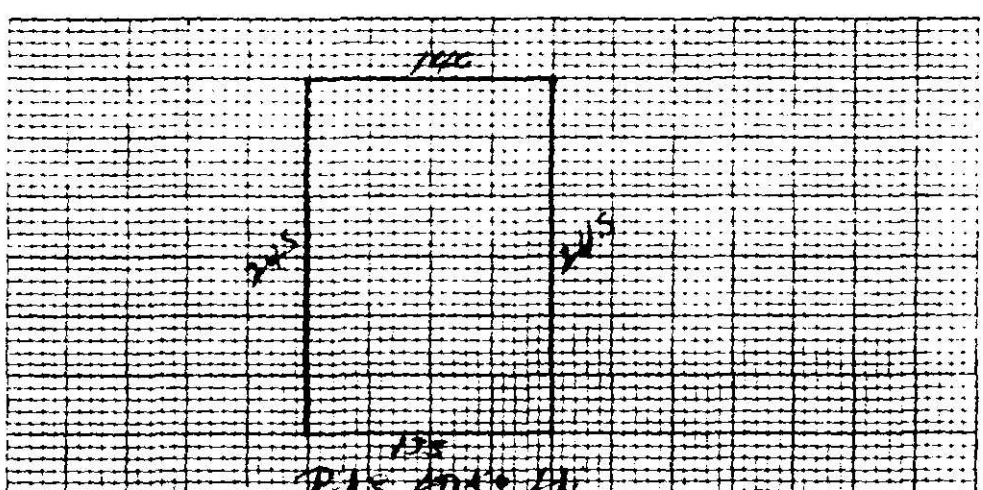
4) LOCATION OF PROPERTY Pole Cat Lane
(STREET OR COUNTY ROAD)

5) SUBDIVISION Farmwood II LOT NO. 19 BLOCK NO. H

MAP BOOK NO. PAGE NO.

6) DEED REFERENCE DEED BOOK PAGE NO.

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



7) ACCURATELY DIAGRAM & DIMENSION LOT

OWNER

FORM NO. E-1-11-1-70

HEALTH DEPARTMENT'S COPY