Date Received 9-20-82

SIR No. 19010

T. C. No. 031-061-05

Map Date _____

MECK COUNTY DEPARTMENT OF
RECEIVED
SEP 20 1982
ENVIRONMENTAL HEALTH

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Ferguson (LAST) Reginald (FIRST) Allen (MIDDLE)

2) ADDRESS OF OWNER Route 9 Box 378-K ZIP 28208

3) PHONE NO. Home 392-2766 Office 5270660 Jean Ferguson

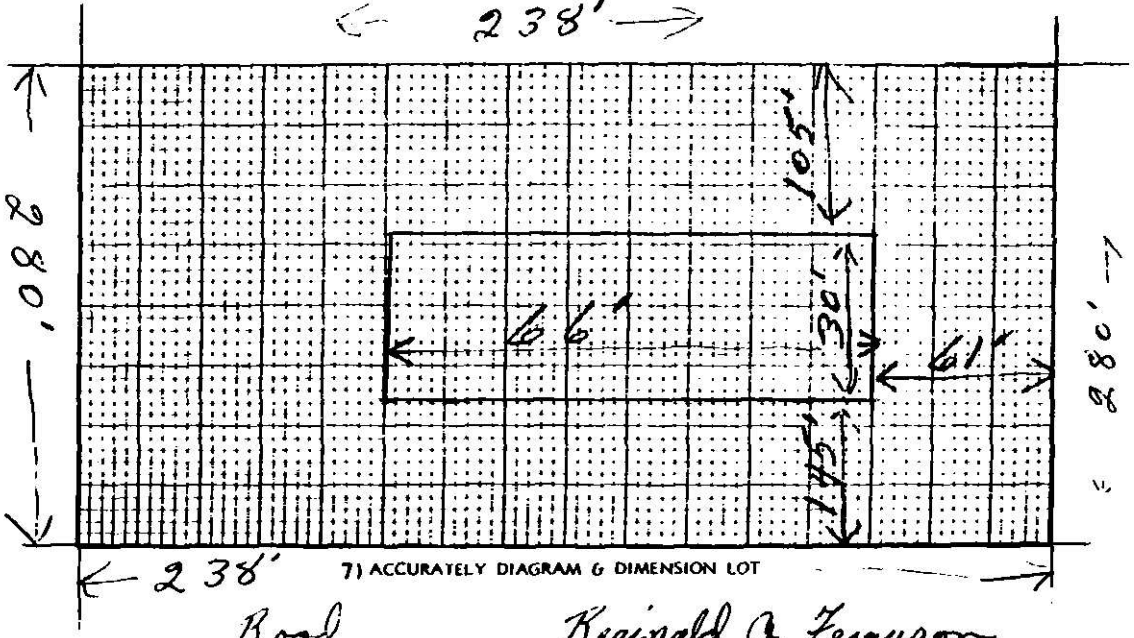
4) LOCATION OF PROPERTY 6520 Kenghurst Dr (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. E BLOCK NO _____

MAP BOOK NO 10, PAGE NO. 11, + Map Bk 9, Page 239

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 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

Road

Reginald A. Ferguson
OWNER

EHD-5-76

Environmental Health Department's Copy

Serial No. 4715

PTR No. 19010

Date Issued 9-22-82

T. C. No. 037-061-05

Map Date

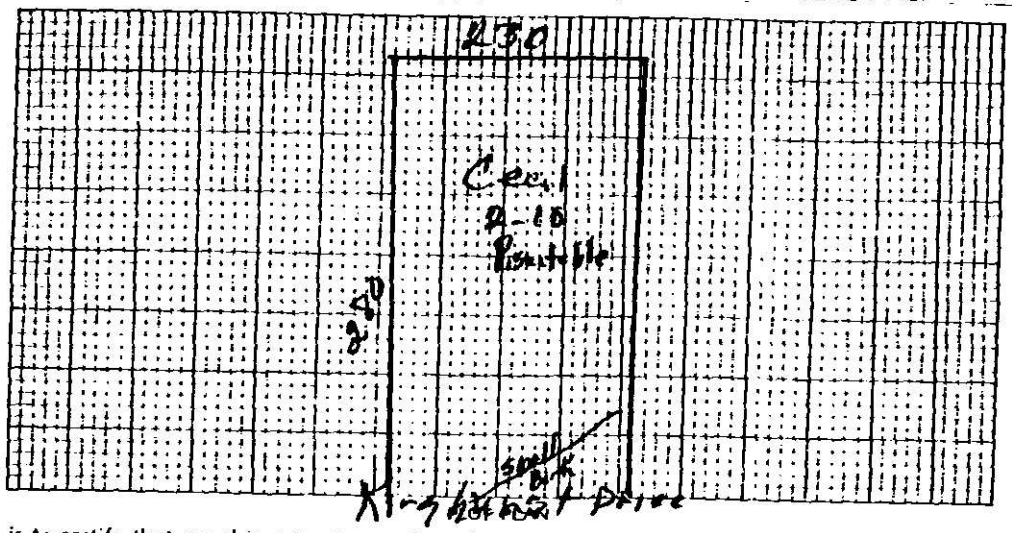
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Ferguson, (LAST) Reginald (FIRST) Allen (MIDDLE)

ADDRESS OF OWNER Rt. 9, Box 378-K, Charlotte, NC ZIP 28208

LOCATION OF PROPERTY Kinghurst Drive (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO. E BLOCK NO.



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 [illegible] construct, alter [illegible] the specific system shall be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction of buildings [illegible] of the wastewater treatment system on the said lot.
2. The size of the septic tank wastewater treatment system which may be installed will be determined by the Mecklenburg County Department of Environmental Health prior to issuance of a permit based on the permeability rate obtained above, and on the size and type of building construction there on.
3. This approval [illegible] only if the system is installed on the mineral soil area indicated as acceptable for system installation on the above plot.
4. This approval [illegible] if any grading, filling, or construction activity [illegible] the drilling of a well is performed on the lot which, in the opinion of the Mecklenburg County Department of Environmental Health renders the area located 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. Flannery
Soil Scientist

Mike Sexton
Environmental Health Director or Authorized Section Head

EHD-S-74

Environmental Health Department's Copy

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 19010

T.C. NO. 037-061-05

(Ground Absorption Sewage Disposal)

OWNER: Reginald Ferguson
ADDRESS: R-14 Box 373-K 28208
LOCATION OF SITE: Kinghurst Drive

PLAT NO:
LOT SIZE: 1.31A

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) 2-10 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) 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	IIa			
9. SITE CLASSIFICATION	P. Suitable			
10. SOIL SERIES	Cecil			

S - Suitable PS - Provisionally Suitable U - Unsuitable

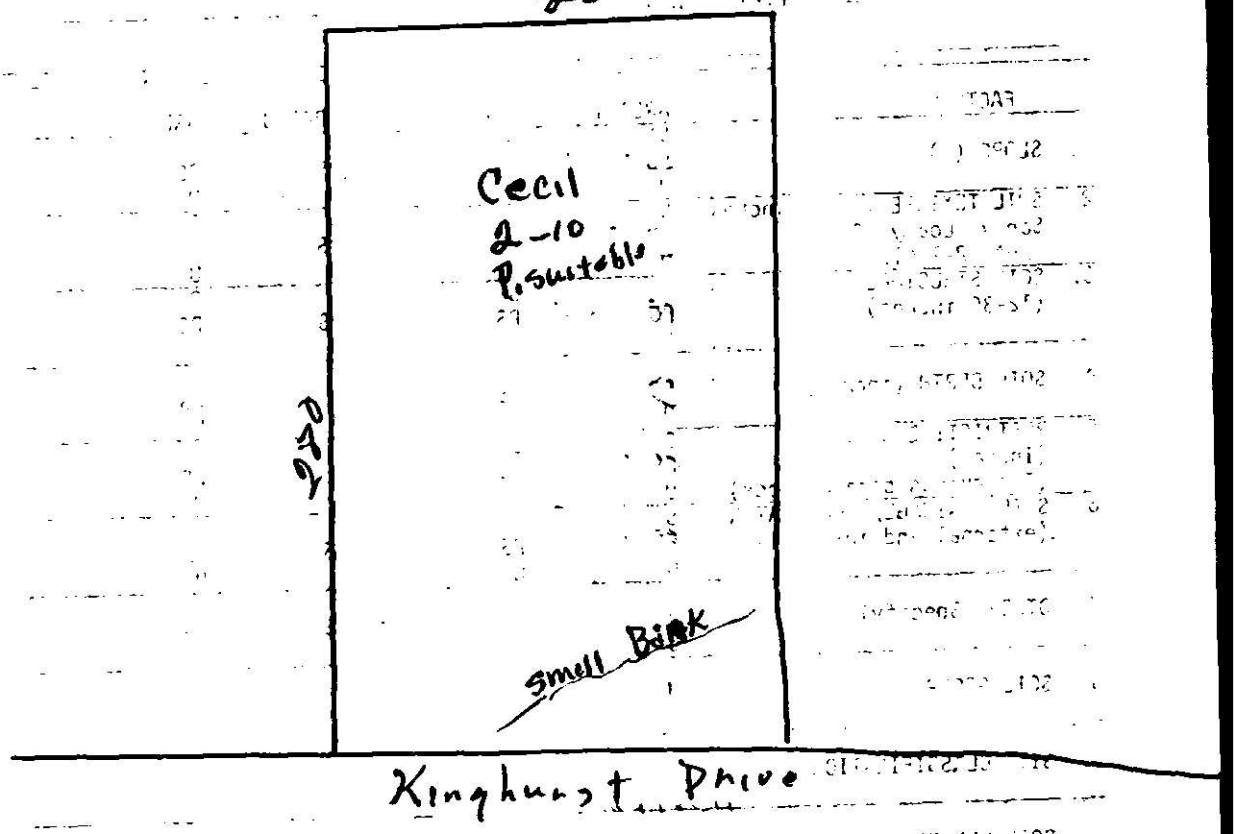
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: W. B. Ramsey
Title: Sanitarian

Date: 9-21-82

EHD 539 (Revised: 6/82)


230
Cecil
2-10
P. suitable
220
Small Bank
Kinghurst Drive

SEE INSTRUCTIONS ON BACK

Date Received 9-20-82

ICAR(S) Application No. 19010

T. C. No. 032-061-05

Map Date _____

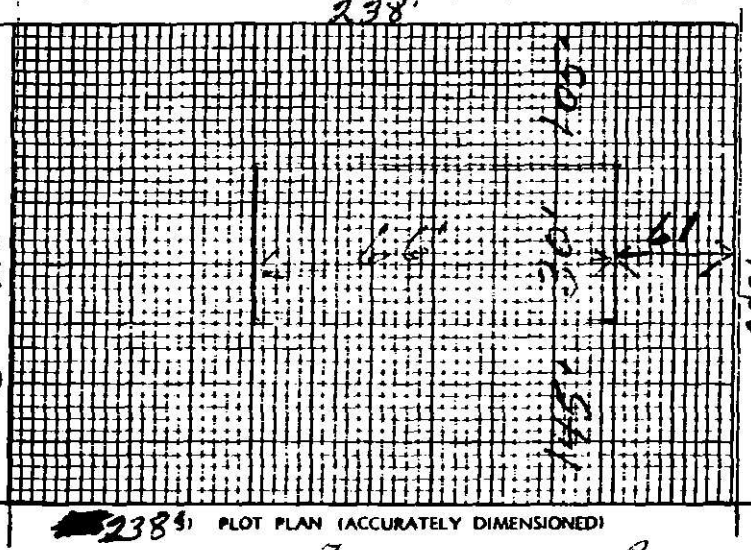
MECK COUNTY DEPARTMENT OF
RECEIVED
SEP 20 1982
ENVIRONMENTAL HEALTH

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) _____ 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
Residence ✓ Yes ___ No
5) No. of Bedrooms 3
6) Business Use — Max No Employees _____
7) Washing Machine ✓ Yes ___ No
8) Garbage Disposal ___ Yes ✓ No
9) Dishwasher ___ Yes ✓ No
10) Water Supply:
A) Individual Well Well
B) Governmental System _____
C) Community System:
1. Well source _____
2. Governmental source _____
11) 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 Ferguson (LAST) Reginald (FIRST) Allen (MIDDLE)

14) ADDRESS OF OWNER Route 9 Box 378-K

15) PHONE NO. Home 392-2766 Office 5270660 Joan Ferguson

16) LOCATION OF SYSTEM 6520 Kinghurst Dr. (STREET OR COUNTY ROAD)

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

Map Book No. 10. Page No. 11 + Map Book 9 Page 239

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.

9-17-82
DATE OF APPLICATION

Reginald Allen Ferguson
OWNER

EHD-5-76

,25. 9-27-82

Serial No. 5929

LA No. 19010

Date Issued 9-22-82

T. C. No. 037-061-05

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

[illegible] 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 Ferguson, (LAST) Reginald (FIRST) Allen (MIDDLE)

ADDRESS OF OWNER Rt. 9, Box 378-K, Charlotte, NC ZIP 28208

LOCATION OF LOT 6520 Kinghurst Drive (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. E 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 19010. 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.

M. A. Kirby
Environmentalist

Mike Sexton
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

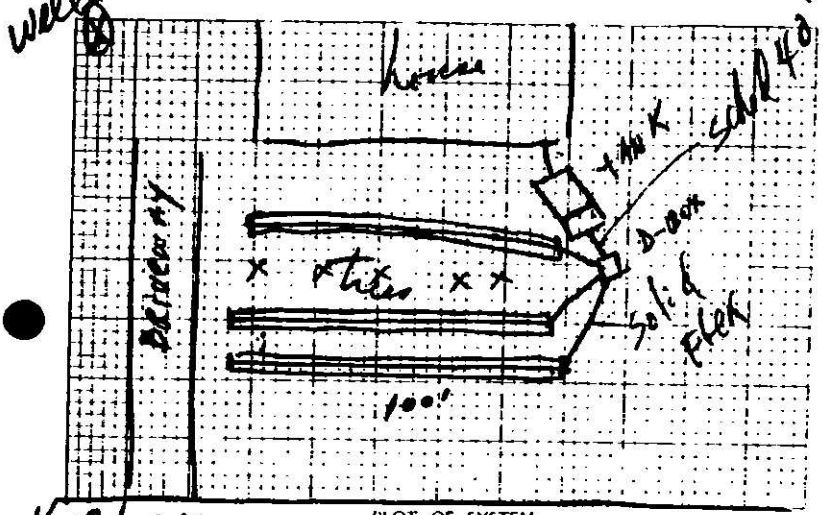
Date Issued 3-7-83 Serial No. 6074 ICAR(S) Permit No. 19010

T. C. No. 037-061-05

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 ✓ 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 19010, dated 9-17-82 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 4-7-83, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate P.S.

Liquid Capacity of Tank 1500 gal

Tank Construction p/c concrete

Absorption and/or Nitrification Lines

Total Line Length 300'

Number of Lines 3

Distance from House 75'

Distance from Property Line 710'

Distance from Well 750'

King Forest

NAME OF OWNER Reginald Allen Ferguson

LOCATION OF PROPERTY 6520 Kingforest 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 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: 3-100 ft long x 3 ft wide x 12" stone trenches - min. 9' on center with 1' to 2½' backfill

Division or Section Head

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.

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

BI-3-30-83

C of A (s) No. 19010

Date Issued 3-29-83 **Serial** 5701 T. C. No. 037-0605

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 Ferguson (LAST) Reginald (FIRST) Allen (MIDDLE)

Location of Property 6520 Kingsmont Dr

Application Number 19010 Permit Number 19010

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material p/c concrete

Total Length of Drain Tile 300' Number of Lines 3

Depth of Filter Material 12" Cover Depth 2-3'

Water Supply Source Well Distance from Water Source >50'

Excavation Inspected — (DATE) Tank Inspected 3-29-83 (DATE)

Nitrification Field Inspected 3-29-83 (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 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

R. H. Lyon
Environmentalist

EHD-5-76