Date Received 1-20-84

RECEIVED
JAN 17 1984
ENVIRONMENTAL HEALTH

SIR No. 20530
T. C. No. 195-141-04

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER TY-PAK REALTY INC.
(LAST) (FIRST) (MIDDLE)

2) ADDRESS OF OWNER P.O BOX 763 MONROE, NC ZIP 28110

3) PHONE NO. Home _____ Office 372-0884

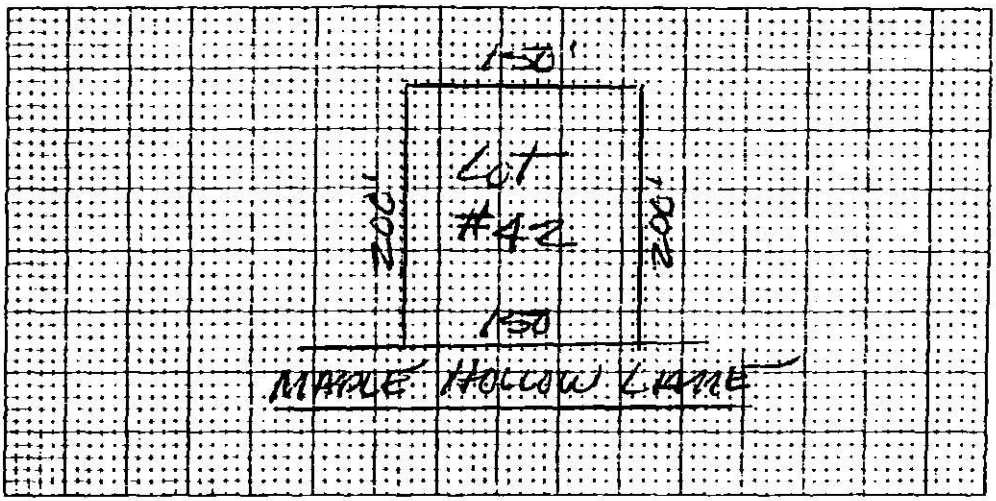
4) LOCATION OF PROPERTY 13813 MAPLE HOLLOW LANE
(STREET OR COUNTY ROAD)

5) SUBDIVISION COUNTRY WOODS LOT NO. 42 BLOCK NO. _____

MAP BOOK NO _____ PAGE NO. _____

6) DEED REFERENCE DEED BOOK 4411 PAGE NO. 46

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

SIGN FOR TY-PAK REALTY
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20537

T.C. NO. PO 196-141-04

(Ground Absorption Sewage Disposal)

OWNER: TY-PAR Realty Inc PLAT NO:
ADDRESS: Box 763 Monroe 28110 LOT SIZE: .69 30000
LOCATION OF SITE: 3213 Maple Hollow Lane
Lot 42

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U — 2-4	S (PS) U — 2-4	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) U — Clayey	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (A) U — Blocky	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) U — 36-46	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U — None	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) U — Adequate	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	IVa	IVc		
9. SITE CLASSIFICATION	P Suitable	P Suitable		
10. SOIL SERIES	Cecil	Shallow Cecil		

S - Suitable PS - Provisionally Suitable U - Unsuitable

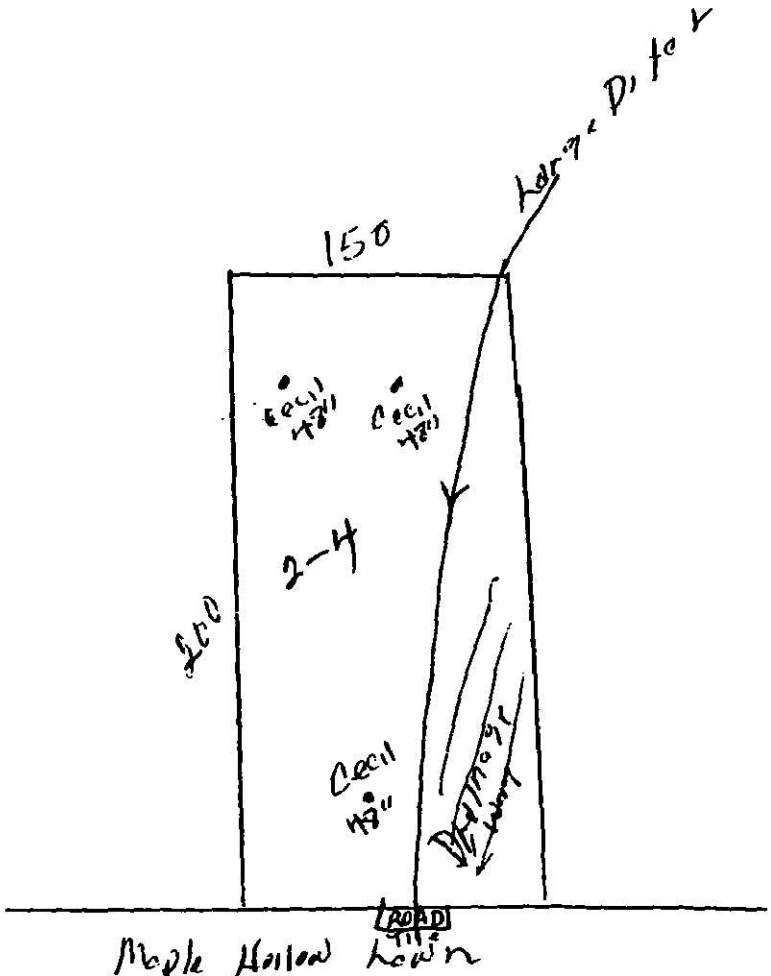
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: Willard Ramsey
Title: Soil Scientist

Date: 4-5-84

4


Large Ditch
150
Cecil 48"
Cecil 48"
2-4
200
Cecil 48"
Drainage Way
ROAD
Maple Hollow Lawn

Lot 42

Serial No. 5580

SIR No. 20530

T. C. No. PO 195-141-04

Date Issued 4-9-84

Map Date

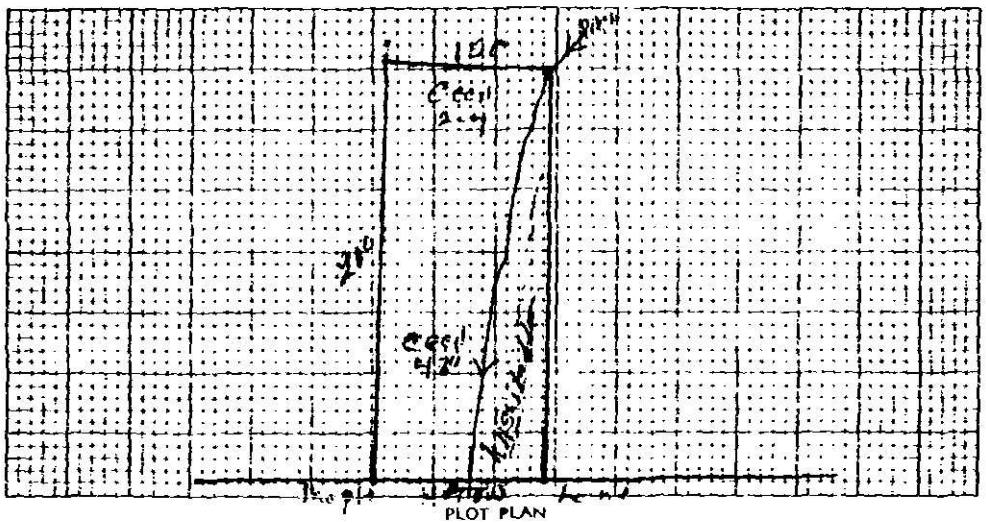
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Ty-Par Realty, Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER P. O. Box 763, Monroe, NC ZIP 28110

LOCATION OF PROPERTY 13813 Maple Hollow Lane
STREET OR COUNTY ROAD

SUBDIVISION Country Woods LOT NO 42 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 [illegible] the septic system shall be obtained from the Mecklenburg County Department of Environmental Health [illegible] 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 [illegible] permeability rate obtained above and on the size and type [illegible]
3. This approval [illegible] the system [illegible] the immediate area [illegible] for system installation on the above plot
4. This approval [illegible] 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 [illegible] 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 [illegible] 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. Kamsey
Soil Scientist

Bill D. [illegible]
Environmental Health Director or
Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Received 4-22-85

SEE INSTRUCTIONS ON BACK
MECK CO. N.Y DEPARTMENT OF
RECEIVED
APR 22 1985
ENVIRONMENTAL HEALTH

ICAR(S) Application No. 20530

T. C. No 195-141-04

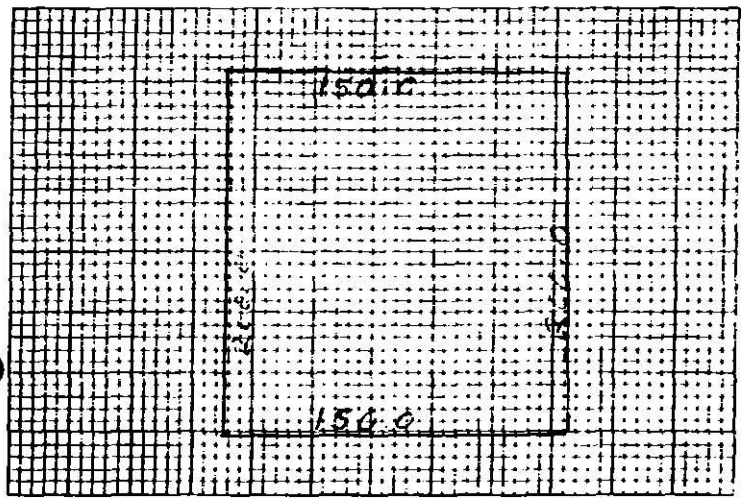
Map Date L

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) 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 X No
Residence X Yes ___ No
4. No of Bedrooms 3
5. Business Use — Max No Employees ___
6. Washing Machine X Yes ___ No
7. Garbage Disposal ___ Yes X 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 Ty-Par Realty, Inc. (LAST / FIRST / MIDDLE)

14) ADDRESS OF OWNER M P¿O¿ Box 763, Monroe, NC¿

15) PHONE NO. Home ___ Office ___

16) LOCATION OF SYSTEM XXXXXXXXXXXXXXX 13813 Maple Hollow Lane (STREET OR COUNTY ROAD)

17) SUBDIVISION Country Woods Lot No. 42 Block No. ___

Map Book No. 20 Page No. 5

18) DEED REFERENCE — DEED BOOK 4411 AT PAGE 46

19) HAS A SOIL INVESTIGATION BEEN RUN? X 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.

3-18-85
DATE OF APPLICATION

OWNER Agent

EHD-S-76

Date Issued 4-24-85

Serial No. 8456

SIR No. 20530

T. C. No. PO 195-141-04

Map Date L 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 Ty-Par Realty, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P. O. Box 763, Monroe, NC ZIP 28110

LOCATION OF LOT 13813 Maple Hollow Lane
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. 42 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 ~~20530~~. 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.

Cynthia G. Bass
Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received _____

MECK COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH
RECEIVED
JUL 1 1985

CAR (S) Application No. 20530

T. C. No. 195-141-62

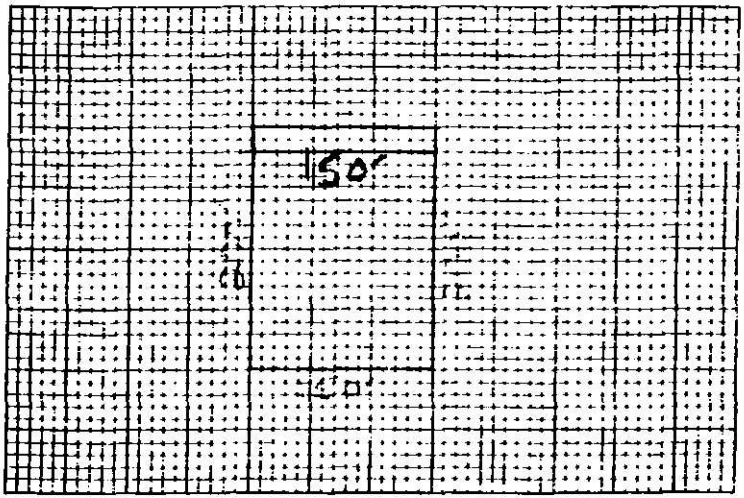
Map Date L

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 _____ (LAST) _____ (FIRST) _____ (MIDDLE)

14) ADDRESS OF OWNER _____

15) PHONE NO. Home _____ Office _____

16) LOCATION OF SYSTEM 13313 Maple Hollow Lane (STREET OR COUNTY ROAD)

17) SUBDIVISION Countryside Lot No. 42 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 _____

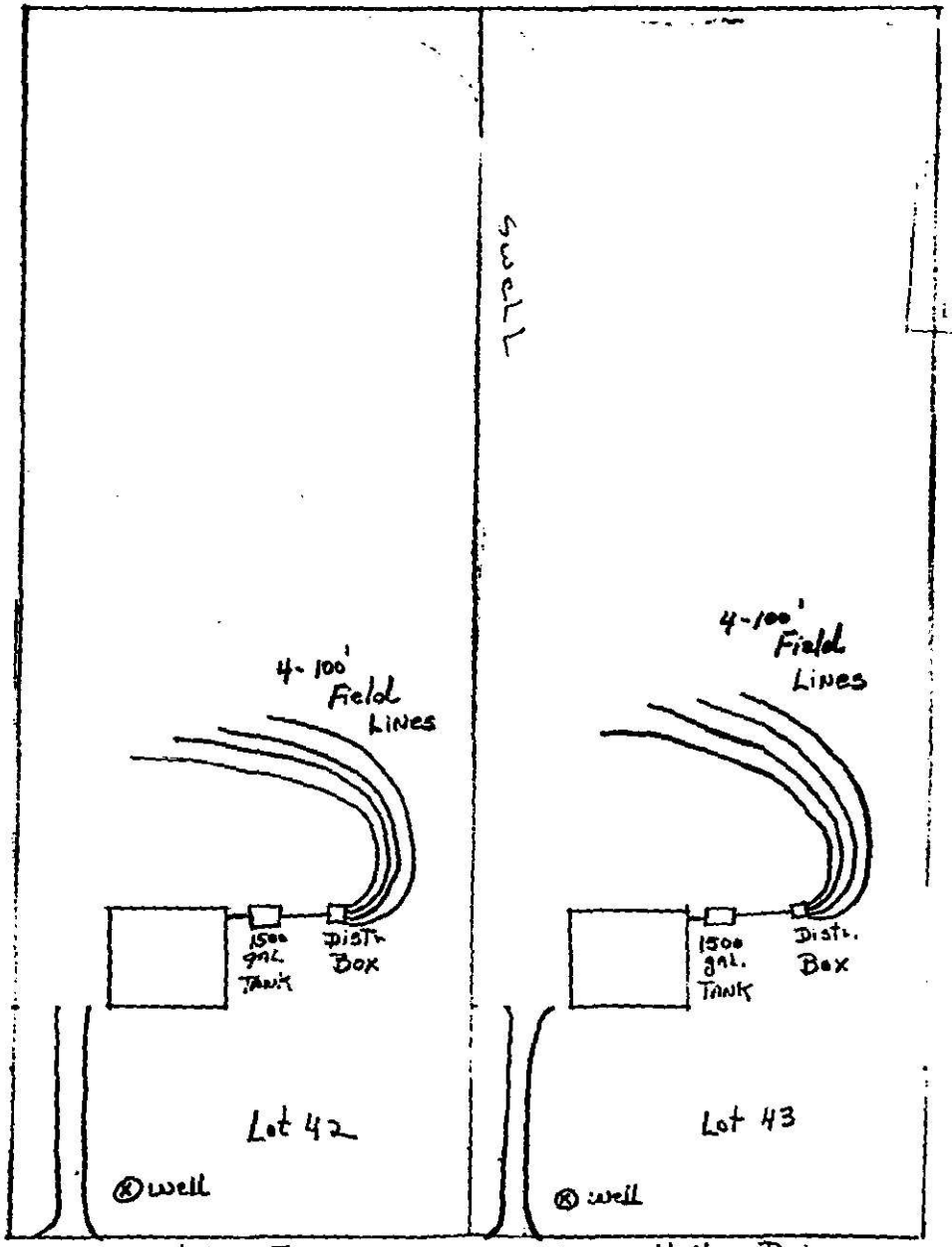
20) PTR NUMBER (See Instructions) _____

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.

6-27-85
DATE OF APPLICATION

_____
OWNER

EHD-5-74


swell
4-100' Field Lines
1500 gal. Tank
Distr. Box
Lot 42
well
Maple Hollow Drive
4-100' Field Lines
1500 gal. Tank
Distr. Box
Lot 43
well
Maple Hollow Drive

JUN 14 1985

Serial No. 8601

SIR No. 20530

Date Issued June 5, 1985

T. C. No. 195-141-62

Map Date L 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 Osborne (LAST) David (FIRST) T. (MIDDLE)

ADDRESS OF OWNER P.O. Box 23169 Charlotte, NC ZIP 28212

LOCATION OF LOT 13813 Maple Hollow Lane (STREET OR COUNTY ROAD)

SUBDIVISION Country Woods LOT NO 42 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.

Cynthia C. Bass
Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

SIR# 20530

Date Received _____

RECEIVED
MAY 1 [illegible]
ENVIRONMENTAL HEALTH

ICAR(S) Application No. _____

T C. No. 19514162

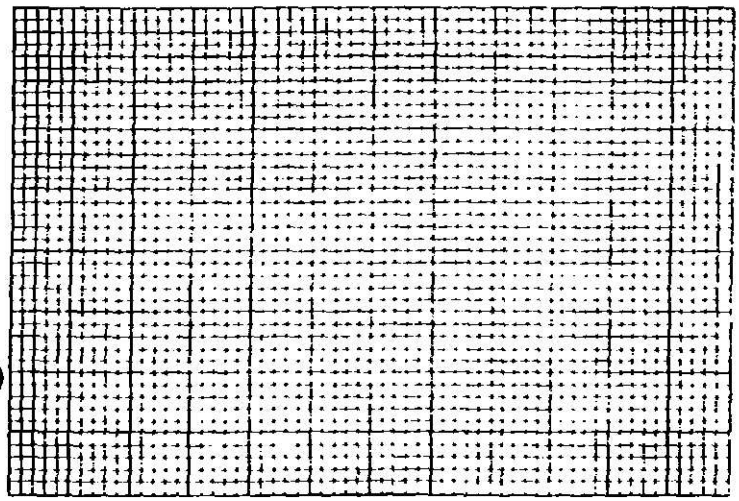
Map Date L

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 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 [illegible] (LAST) [illegible] (FIRST) T. (MIDDLE)

14) ADDRESS OF OWNER [illegible]

15) PHONE NO. Home [illegible] Office _____

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

17) SUBDIVISION [illegible] Lot No. [illegible] 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 1955

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.

[illegible]
DATE OF APPLICATION

[illegible]
OWNER

EHD-5-76

Environmental Health Department's Copy

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

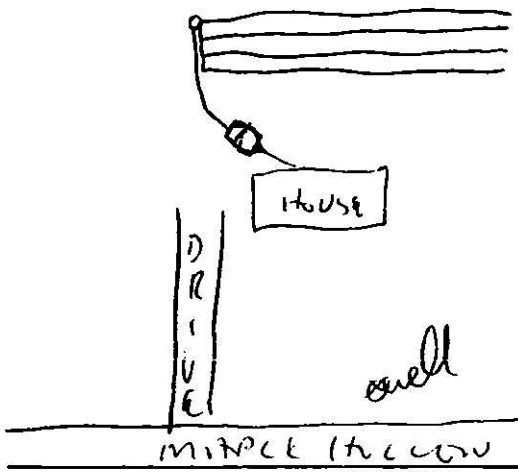
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 20530 DATE: 9-9-96

TC: 195-141-02 PL

SERIAL № 10251

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 the application dated 5-14 96. All work shall be completed on or before _____, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Department of Environmental Health before any system can be covered up or placed into service. 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank _____ gallons

Tank Construction PLC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 400 feet

Number of Lines 4

Depth of Stone 12 inches

Distance from House 5' feet

Distance from Property Line 10 feet

Distance from Well 50 feet

NAME OF OWNER OSBURNE, DAVID T

LOCATION OF PROPERTY 13313 MAPLE HOLLOW LN

Comments: 4 1/2 x 100' long x 3' wide x 12" stone

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.

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

C of A (s) No. 20530

Date Issued 9-17-86 **Serial** 8893 T. C. No. 195-141-62

U CR7

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner OSBOURNE DAVID
LAST FIRST MIDDLE

Location of Property 13813 MAPLE HOLLOW LN

Application Number 20530 Permit Number 20530

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PCC

Total Length of Drain Tile 400' Number of Lines 4

Depth of Filter Material 12" Cover Depth 1-2'

Water Supply Source well Distance from Water Source 50'+

Excavation Inspected 9-17-86 DATE Tank Inspected 9-17-86 DATE

Nitrification Field Inspected 9-17-86 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 1986, 1500 ST, CON, 1200 SFT, 126, CECIL

Kelly Randall
Environmentalist

EHD-S-76

Environmental Health Department