S

Date Received 3-19-73

APT No 5721

T C No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Burnette (LAST) Jack (FIRST) Knight (MIDDLE)

2) ADDRESS OF OWNER Route #1 Box 746-1 Chas N.C. ZIP 28212

3) PHONE NO Home 535-2517 Office

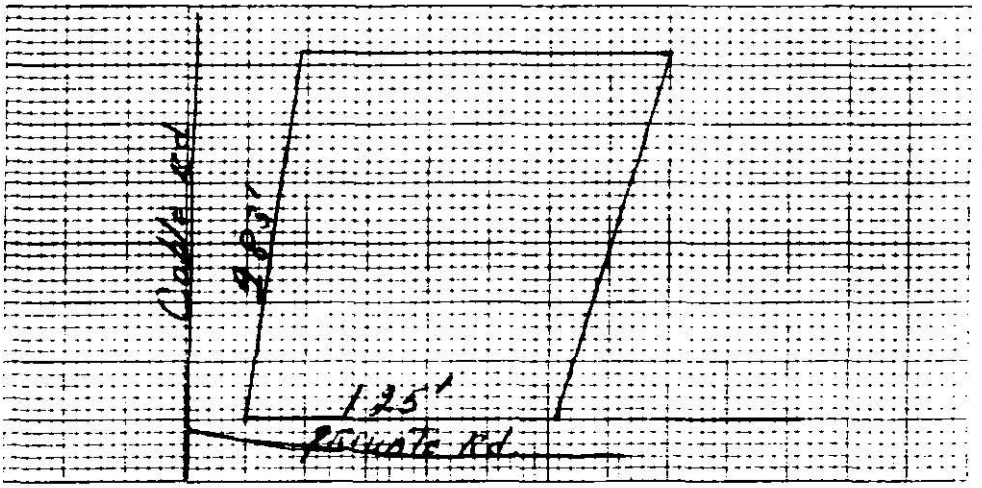
4) LOCATION OF PROPERTY Coble Rd. (STREET OR COUNTY ROAD)

5) SUBDIVISION LOT NO BLOCK NO

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

Jack Ralph Burnette
OWNER

FORM NO. E-1-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. [illegible]2

PTR No. 5771
P.O.

Date Issued March 26, 1973

T C No 139-131-02

Map Date 10-16-72

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

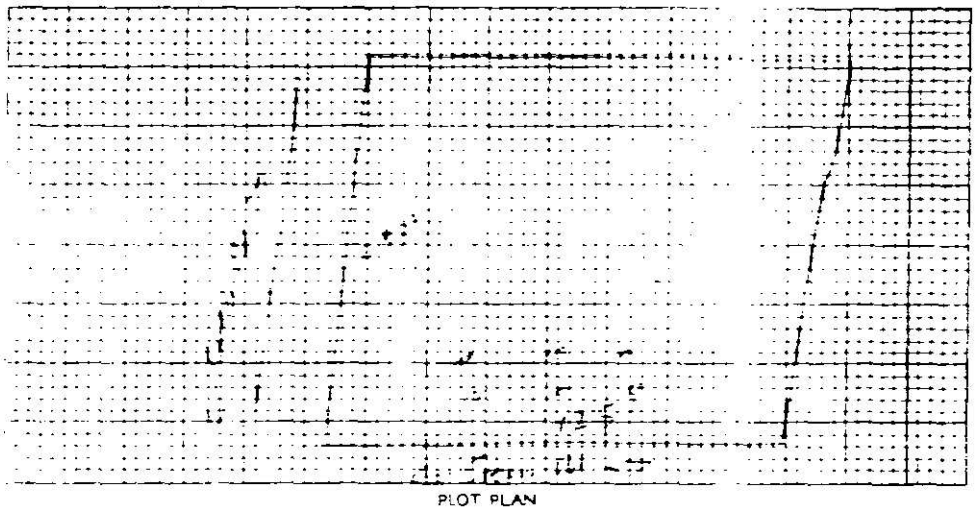
PERCOLATION TEST REPORT

NAME OF OWNER Burnette (LAST) Jack (FIRST) Ralph (MIDDLE)

ADDRESS OF OWNER Route 1, Box 746-1 ZIP 28212

LOCATION OF PROPERTY Coble Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO



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 filling in of lots, 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 D. Johnson

Director, Environmental Health Division or
Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

Date Received 32773

ICAR (S) Application No. 5711

T C No 139-131-02

Map Date 10/6/72

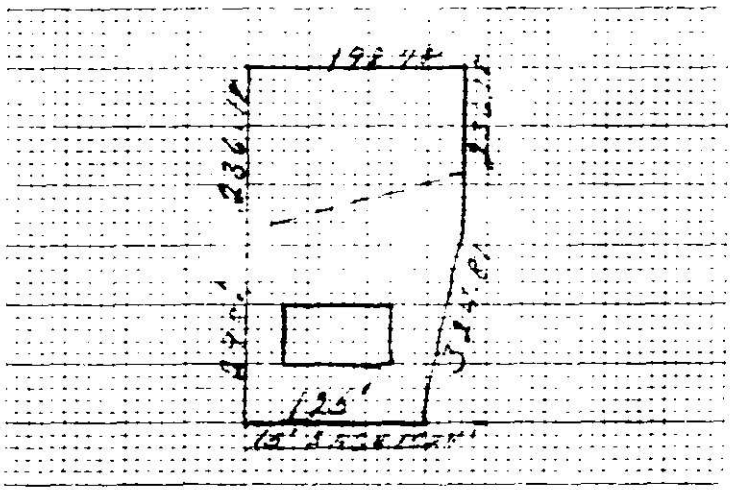
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 the property described hereafter hereby applies to the Mecklenburg County Health Department for a permit to:

[illegible] Install or Construct [illegible] Alter or Repair an individual septic tank wastewater treatment system with subsurface [illegible] effluent discharge



3) PLOT PLAN (ACCURATELY DIMENSIONED)

[illegible]
Bathroom [illegible]
Employees [illegible]
Washing Machine [illegible] No
Garbage Disposal [illegible] No
Dishwasher [illegible] No
Water Supply
A [illegible]
B Governmental System
C Drilled Well
Age [illegible]
Depth [illegible]
Sewage System
House located within 200 feet of [illegible] No
House located within 200 feet of [illegible]
[illegible] Yes No
FHA Case No. [illegible]
VA Case No. [illegible]

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

14) ADDRESS OF OWNER [illegible]

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

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

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] 3206

19) HAS A PERCOLATION TEST BEEN RUN? [illegible] YES [illegible] NO DATE RUN 3/14/72

20) PTR NUMBER See Instructions [illegible]

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.

3/7/72
DATE OF APPLICATION

Jack S. Lincoln
OWNER

FORM NO. E-4-4-[illegible]

HEALTH DEPARTMENT'S COPY

Date Issued March 27, 1973

Serial No. 2661

LA No 5771
P.O.
T C No 139-131-02

Map Date 10-16-72

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 Burnette (LAST) Jack (FIRST) Ralph (MIDDLE)

ADDRESS OF OWNER Route 1, Box 746-1 ZIP

LOCATION OF LOT Coble Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO

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 5771. 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

Environmentalist

Director, Environmental Health Division or Authorized Section Head

FORM NO E-3-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 24May73 Serial No. 2741 ICAR(S) Permit No. 5771

T C No 139-131-02

Map Date 10-16-72

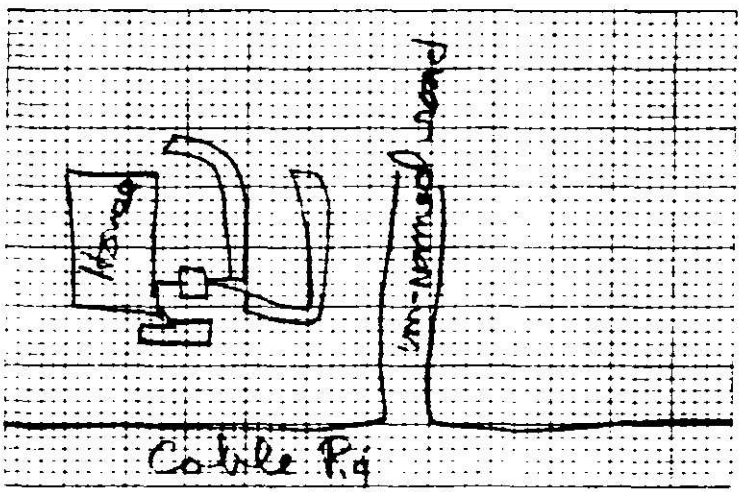
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 specified herein at the described location. This permit is granted based upon the information supplied in application # 5771, dated 23Mar73 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 31 Jan 73 after which date this permit shall be null and void.



PLOT OF SYSTEM

Permissible Rate 60

Liquid Capacity of Tank 1500gal

Tank Construction Precast Concrete

Absorption and/or Replacement Lines

Total Line Length 795 eff + 125'

Number of Lines Two Beds (7½' x 134')

Distance from Water 10'

Distance from Property Line 10'

Distance from Well 50'+

NAME OF OWNER Barnette, Jack R.

LOCATION OF PROPERTY Cable Rd

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are 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 Effluent from 5'x20'x4' tank

Division or Section Head

R.M Reynolds
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 Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired

FORM NO. E 5-4 1 71

[illegible] COPY

Date Issued 25 May 73 Serial No. 3369

C of A (s) No. 5771

T C No 139-131-02

Map Date 10-16-72

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Burnette Jack R.
LAST FIRST MIDDLE

Location of Property Cobble Rd.

Application Number 5771 Permit Number 5771

Inspection Date:

Liquid Capacity of Tank 1500 gal Tank Material Precast Concrete

Total Length of Drain Tile 795' & 100' Number of Lines Two Beds (7½' x 134')

Depth of Filter Material 17" & 4' Cover Depth 24"+

Water Supply Source well Distance from Water Source 52'+

Excavation Inspected 25 May 73 DATE Tank Inspected 25 May 73 DATE

Nitrification Field Inspected 25 May 73 DATE

Washing Machine Line Inspected, If Applicable 25 May 73 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: ① Water changed to 7½' = 100'
5' x 16' x 4' Septic

G. M. Reynolds
Environmentalist

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

HEALTH DEPARTMENT'S COPY