Date Received 10-22-23

APT No. 7167

T. C. No. 135-283-12

Map Date 5-9-74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Dellinger Madison & Assoc INC
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER 411 S. Sharon Amity Rd Charlotte, NC ZIP 28211

3) PHONE NO. Home — Office 364-7155

4) LOCATION OF PROPERTY Pine Needle Trail
(STREET OR COUNTY ROAD)

5) SUBDIVISION Tarawoods LOT NO. 27 BLOCK NO. C

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

Michael L Robinson, Vice President
OWNER

FORM NO. E-1-8-1-72

HEALTH DEPARTMENT'S COPY

Date Received 9/20/76

APT No. 7167

T. C. No. 135-283-12

Map Date 5-74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER The Madison Company Inc.
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER P.O. Box 25884 Charlotte N.C. ZIP 28212

3) PHONE NO. Home _____ Office 568-3473

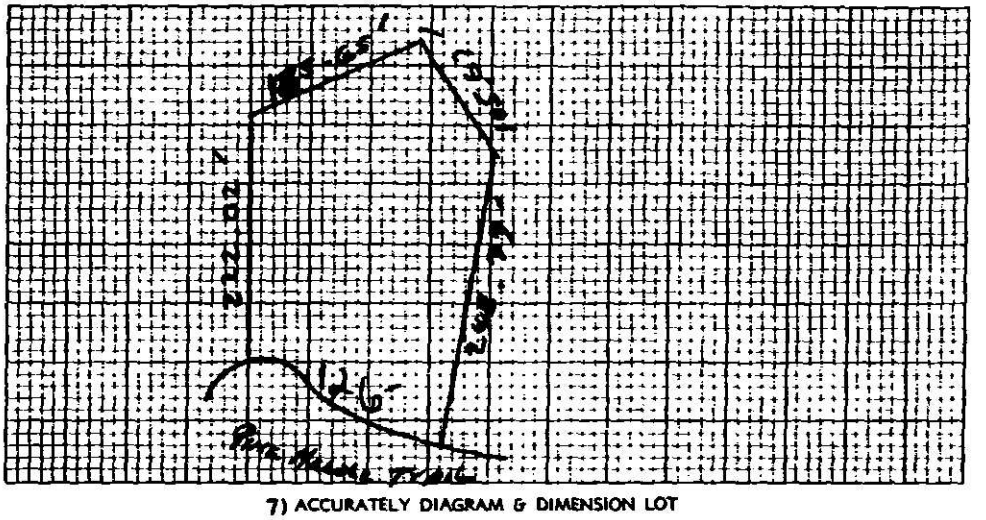
4) LOCATION OF PROPERTY 4818 Pine Needle Trail
(STREET OR COUNTY ROAD)

5) SUBDIVISION Talamoods LOT NO. 27 BLOCK NO. C

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 C. Boyd Madison Pres.

FORM NO. E1-11-3M-6-75

HEALTH DEPARTMENT'S COPY

MECKLENBURG COUNTY
Department of Public Health

1200 Blythe Boulevard
Charlotte, North Carolina 28203

Telephone 374-2113

Date Issued
1. 12/28/73
2. _____
3. _____

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

SDR No. 7167 283-12
T.C. No. ~~R-0, 135-281-09~~ 6-9-72 5-4-74

NAME OF OWNER Dellinger, Madison & Assoc., Inc.

ADDRESS OF OWNER 411 S. Sharon Amity Road ZIP 28211

LOCATION OF LOT Pine Needle Trail, Lot 27-C

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.	_____	_____ min/in
____	2.	_____	_____ min/in
____	3.	_____	_____ min/in

X ON SITE INSPECTION REVEALED LOT TO BE UNSUITABLE FOR THE FOLLOWING REASON(S) The lot was found to be composed of imperfectly drained alluvial soils and soils with steep slopes (20+ percent). The alluvial soils occur along a natural drainageway and have a seasonal high water table. This factor results in inadequately slow percolation rate and permeability. The area of steep slope imposes extreme physical limitations on the installation of a system. There also exists a potential for lateral seepage of effluent.

W. Scott Lynch Jr. — Soil Scientist
John R. Atkinson — Environmentalist

(Stencil No.)
EHD 398
8/70

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

SOIL INVESTIGATION REPORT

Date of Investigation Sept. 20, 1976 APT NO. 116

Owner The Madison Company, Inc.

Location of Property 4618 Pinspreadle Trail (Lot 7) Lot C
TCN: D.C. 135-283-1
D.C. 135-283-14

Soil Suitability Ratings

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Cecil	Helena	Chewacla	
2. Soil Slope	Suitable 2-10%	Suitable 2-10%	———	
3. Soil Depth	Suitable 24"+	Suitable 40"+	———	
4. Soil Texture	prov. suit. clay	unsuitable 2:1 Expanding	———	
5. Soil Structure	prov. suit. blocky	unsuitable massive	———	
6. Restrictive Horizons	———	———	———	
7. Soil Drainage	Suitable W.T. 36"	unsuitable Perched high W.T.	unsuitable poorly drained	
8. Soil Permeability (Percolation Rate)	prov. suit.	unsuitable Restrictive layer 120 min/in	unsuitable Seasonal high water table	
9. Other	Moderate Erodibility	———	unsuitable floods	<48" from surface
10. Overall Rating	prov. suit.	unsuitable	unsuitable	

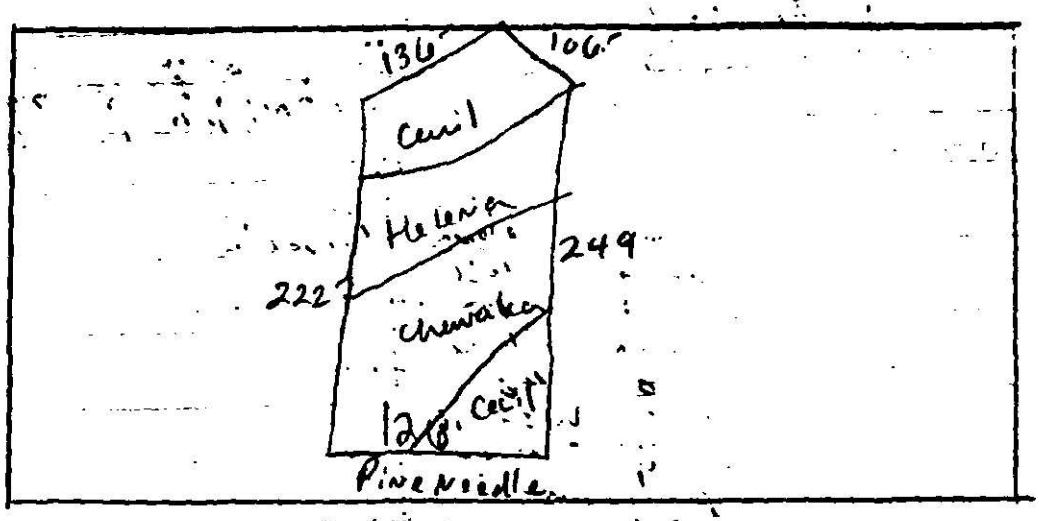
Recommendations Based on this investigation, the lot is not recommended for approval for installation of a septic tank system due to inadequate area of provisionally suitable soils. Lot is not surveyed yet.

See diagram on back

C. Edward Caverret
Soil Scientist

3/18/75
EHD 539

DIAGRAM OF PROPERTY



3/18/75

339

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203

DATE ISSUED
1. 9/21/76
2. _____
3. _____

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

SIR NO. 7167
T.C. NO. ~~136-283-12~~
MAP DATE ~~5-9-74~~

NAME OF OWNER The Madison Company, Inc.

ADDRESS OF OWNER P. O. Box 25884, Charlotte, N. C. 28212

LOCATION OF LOT 4818 Pine Needle Trail, Lot 27, Block C

The lot described above is not recommended for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge due to the following:

Inadequate Area of Suitable Soils

John R. Adkisson, Environmentalist
On Premises Waste Disposal Branch

JRA:jjk

(Stencil No.)
EHD 398
8/74

FORM NO.
E-19-8-21-74

SEE INSTRUCTIONS ON BACK

Date Received 9/24/76

ICAR (S) Application No. 7167

T. C. No. 35.283.12

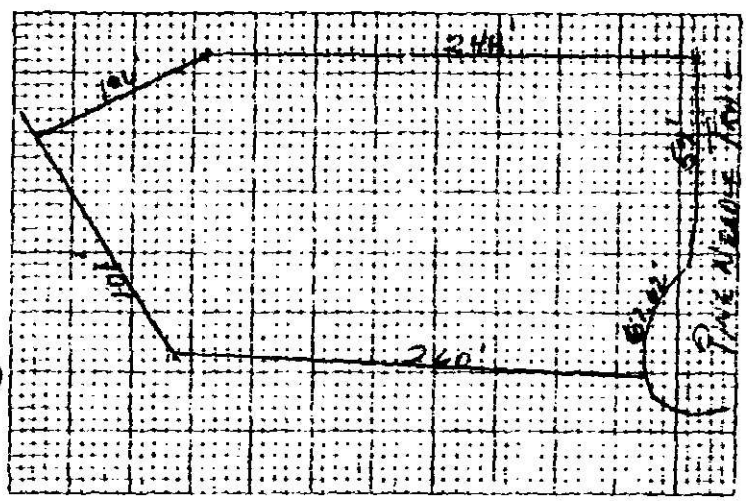
Map Date 5974

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 Tom Mauney Co.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER P.O. Box 25854, Charlotte, N.C. 28212

15) PHONE NO. Home ____ Office 568-5473

16) LOCATION OF SYSTEM Five Needle Trail Mint Hill NC
STREET OR COUNTY ROAD

17) SUBDIVISION Tamarus Lot No. 27-A Block No. C

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.

9/24/76
DATE OF APPLICATION

C. Douglas Mauney Jr. Pres.
OWNER

EHD-S-76

Environmental Health Department's Copy

Date Issued 9/27/76

Serial No. 0186

IMPROVEMENTS PERMIT

LA No. 7167

T. C. No. 135-283-12

Map Date 5-9-73

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER The Madison Company Co.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P. O. Box 25884, Charlotte, N. C. ZIP 28212

LOCATION OF LOT Pine Needle Trail
(STREET OR COUNTY ROAD)

SUBDIVISION Tarrawoods LOT NO 27 A BLOCK NO. C

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 7167. 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.

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

R.

Serial No. 0556

Date Issued 3-16-77

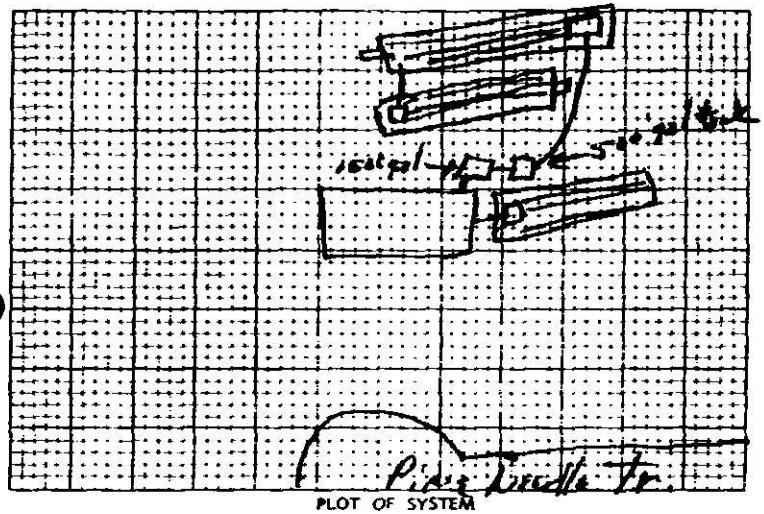
ICAR (S) Permit No. 2167

T. C. No. 135-283-12

Map Date J-9-74

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 2167, dated 9-24-76 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 4-16-77, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate 60

Liquid Capacity of Tank 1500 - 500

Tank Construction PC

Absorption and/or Nitrification Lines:

Total Line Length 600' - 150'

Number of Lines 4 - 4

Distance from House 10'

Distance from Property Line 10'

Distance from Well —

NAME OF OWNER The Madison Co.

LOCATION OF PROPERTY Pine Needle Trl

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

Comments: lift station to lift between 2lg and 220 gals. per cycle. 2 beds 10'x75'x17" washer line 10'x38'x17"

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

Serial No. 0642

C of A (s) No. 2162

Date Issued 4-20-77

T. C. No 135-285-12

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION
CERTIFICATE OF COMPLETION
CERTIFICATE OF APPROVAL

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

Name of Owner The Madison Co. (LAST / FIRST / MIDDLE)

Location of Property Pine Needle Tr.

Application Number 2162 Permit Number ____

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PC

Total Length of Drain Tile 600' 150' Number of Lines 4 - 4

Depth of Filter Material 12" Cover Depth 18"

Water Supply Source Community Distance from Water Source ____

Excavation Inspected ____ (DATE) Tank Inspected 4-20-77 (DATE)

Nitrification Field Inspected 4-20-77 (DATE)

Washing Machine Line Inspected, If Applicable 4-20-77 (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: Installed with lift station as permitted, County Septic Tank Service

Environmentalist

EHD-5-76

Environmental Health Department's Copy