C of A (s) No. 21367

Date Issued 12-19-84 Serial 7197 T. C. No. PO. 043-082-08 L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

OPERATION PERMIT

CERTIFICATE OF APPROVAL

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

Name of Owner TRAMMELL CROW CO (LAST FIRST)

Location of Property 5100 W.T HARRIS BLVD (MIDDLE)

Application Number 21367 Permit Number 21367

Inspection Data:

Liquid Capacity of Tank 3000 (ST) + 3000 (PT) Tank Material PCC

Total Length of Drain Tile 1800' Number of Lines 18

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

Water Supply Source city Distance from Water Source 50'+

Excavation Inspected 12-19-84 (DATE) Tank Inspected 12-18-84 (DATE)

Nitrification Field Inspected 12-19-84 (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 ____

Kelly Randall
Environmentalist

BHD-5-76

Environmental Health Department's Copy

MAY 0 9 1989

APPLICATION FOR SOIL INVESTIGATION

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

FILE: 21367 ✓

TC: 043-082-12 P.D.

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: 5610 W. W.T. Harris Bv.

② SUBDIVISION: _____ ③ LOT: _____ ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: 043 PAGE NO.: 082 PARCEL NO.: 12 P0

⑥ DEED REFERENCE: BOOK NO.: _____ PAGE NO.: _____

OWNER

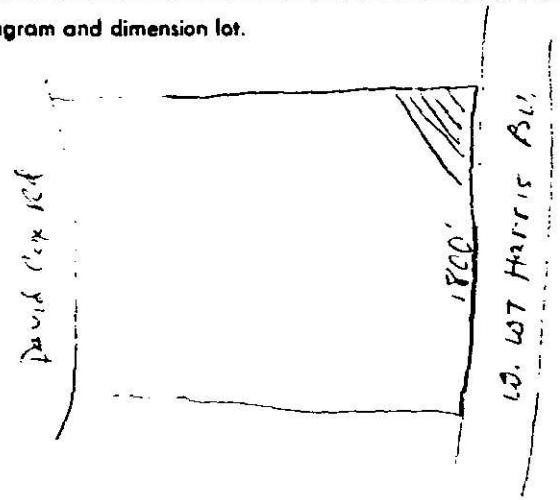
⑦ NAME: Crow Childress Klein #8(A)
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: 2800 One First Union Center

⑨ CITY: Charlotte ⑩ STATE: NC ⑪ ZIP: 28202

⑫ PHONE: (WORK) 704/342-9000 (HOME) _____

⑬ Accurately diagram and dimension lot.



Area discussed on site with Bill Martin by Sam Kleto. 377-4614

⑭ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: [signature], Partner

Date: 5/8/89

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

21367

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER'S COPY

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 5/11/84

Name/Company Patrick Lee

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Soil test
#26367

_____

_____ COUNTY
HE[illegible]RTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
MAY 11 [illegible]

Fee: $ 50.00

J. Steinhardt
Completed by

Collected by

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21369

T.C. NO. 80 043-062 04

(Ground Absorption Sewage Disposal)

- Mark E. Casey

OWNER: Farewell Corp. Co
ADDRESS: 1400 Charlotte Plaza
Charlotte, N.C.

PLAT NO: #1
LOT SIZE: Approx 36,000 Sq. Ft. 83

LOCATION OF SITE: 5.8 West off T. Wade Blvd

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 Clay 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 36 + U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S 36" PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S 24" to ground water PS U	S PS U	S PS U	S PS U
7. OTHER (Specify)	S Somewhat Limited Area PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IIA			
9. SITE CLASSIFICATION	Provisionally Suitable			
10. SOIL SERIES	Cecil-Lloyd			

S - Suitable PS - Provisionally Suitable U - Unsuitable

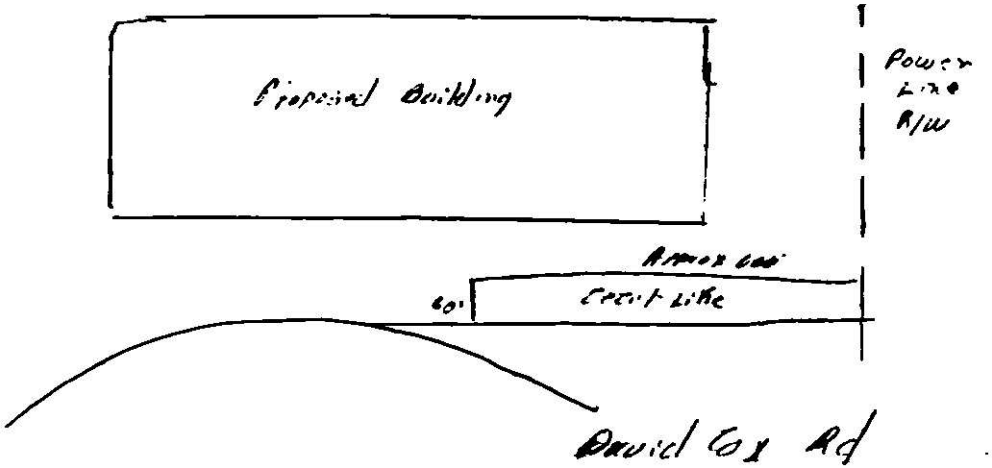
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: _____

Described by: William E. Martin
Title: Soil Scientist

Date: 8-27-84

14


Proposed Building
Power Line R/W
Approx 60'
60'
Center Line
David Fox Rd

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21367

T.C. NO. [illegible]

(Ground Absorption Sewage Disposal)

OWNER: Townsend Corp. Co.
ADDRESS: 1440 Charlotte Plaza
Charlotte, N.C. 28244

PLAT NO:
LOT SIZE: Approx. 1.2 A

LOCATION OF SITE: SEC. Harris Blvd

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 Clay 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 36"+ U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S 36"+ PS [illegible] U [illegible]	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S 36"+ PS ground U [illegible]	S PS U	S PS U	S PS U
7. OTHER (Specify)	S Limited PS Area U	S PS U	S PS U	S PS U
8. SOIL GROUP	IIA			
9. SITE CLASSIFICATION	Provisionally suitable			
10. SOIL SERIES	Cecil-Lloyd			

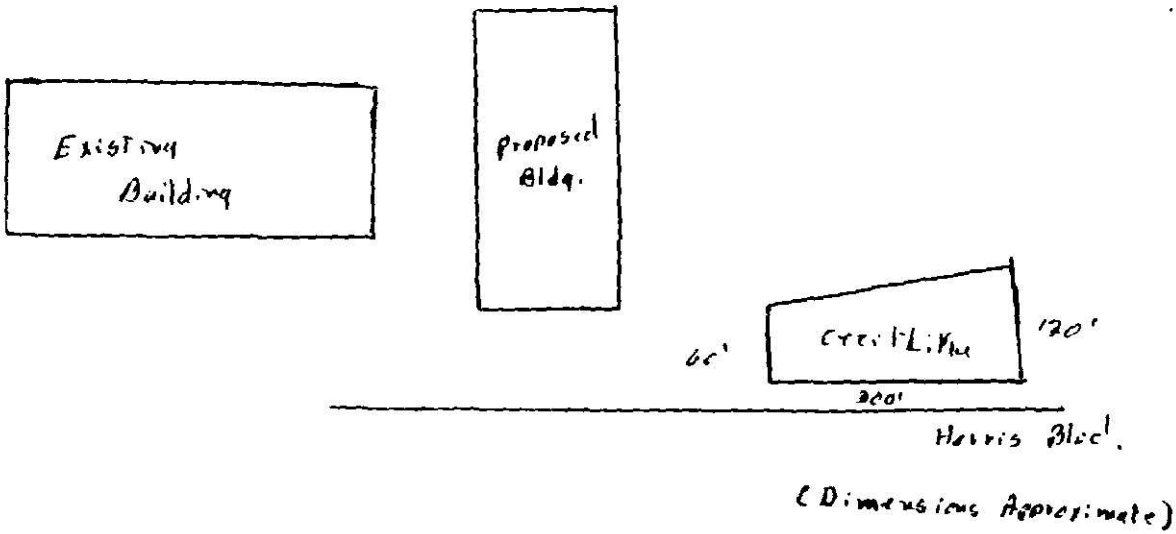
S - Suitable PS - Provisionally Suitable U - Unsuitable

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

Recommendations/Comments:

Described by: William B. Martin
Title: Soil Scientist

Date: 4-9-85



(Dimensions Approximate)

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 12099

File: 21367 Action: 1

Parcel: 00 043-082-12 ☐ PC

Location: W. T. Harris Boulevard

Subdivision:

Lot: Block: Acres: Approx. 6'1

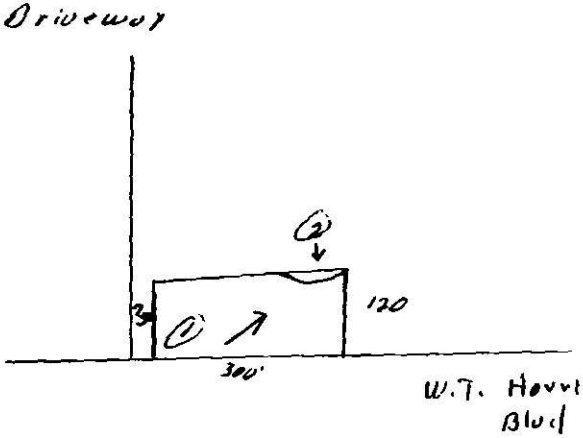
Owner: Crow Childress Klein #8(A)
Address: 2800 One First Union Center
Charlotte, N.C. 28202

Comments: _____

Described by: William A. Martin

Date: 5-30-91

Distances Approximate



*** EVALUATION KEY ***

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	(S) PS U 6-12%	(S) PS U 6-12%	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U clay	S PS (U) 2-1 clay	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S (PS) U Blocky	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U 7-36" to water	S (PS) U 7-36" to water	S PS U	S PS U	S PS U	S PS U
Depth	S (PS) U 36"+	S PS (U) 24-30"	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 7-36"	S (PS) U 7-36"	S PS U	S PS U	S PS U	S PS U
Available Space	S (PS) U Lim. Trl	S PS (U) Restrictrl	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	IVA Cecil-1.4%	IVB Mecklenburg 1.2%				
Area Classification	S (PS) U	S PS (U)	S PS U	S PS U	S PS U	S PS U

Mecklenburg County
Health Department

Basil G. Bella, M.D., M.P.H.
Health Director

May 30, 1989

Crow Childress Klein #8(A)
2800 One First Union Center
Charlotte, NC 28202

RE: Property located at W. T. Harris Boulevard
FILE: 21367
PARCEL: 045-082-12 PO

Dear Sir:

At your request, a field investigation was conducted on the property designated above for the purpose of determining site suitability for the installation of a ground absorption sewage disposal system. The property was found to contain a limited area of soils which were classified as provisionally suitable for such an installation. A copy of the site evaluation report (Serial No. 12099) is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit an Application for an Improvement Permit with an accurately dimensioned plot plan detailing the location of current and/or proposed buildings, wells and sewage disposal systems to this office. The plan will be reviewed and if it is found that the area of provisionally suitable soils is adequate for the proposed construction, an Improvement Permit will be issued by this Department.

If I may be of assistance, please do not hesitate to contact me.

Very truly yours,

Jim Ericson, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure

Daily waste flow
Septic tank size
Pumping tank size
Effluent loading rate
Absorption area
Total length of laterals
Lateral diameter
Lateral configuration
Supply line length
Supply line diameter
Manifold placement
Hole size*
Hole spacing
Number of holes
Pressure head
Flow per hole
Total flow
Elevation head
Friction head
Pressure head
Total head
Pump requirements
Storage volume in laterals
Storage volume in supply line
Total storage volume
Dosing volume
Dosing depth
Check valve needed?

IBM WAREHOUSE
REVISED ELEVATIONS
FIELD "B"
9-4-85

*Data on hole size, spacing, pressure head and flow must be listed for each line for systems where lines are different (such as sloping lots).

Line No.	Hole Size	# Holes	Head Pressure	Flow/Hole	Hole Spacing*	Flow/Line
14	(124') 5/32"	21	3.0	.50	5.7	10.5
15	(124') 5/32"	22	2.96	.497	5.4	10.9
16	(124') 5/32"	23	2.92	.494	5.2	11.4
17	(125') 5/32"	24	2.89	.491	5.0	11.8
18	(123') 5/32"	25	2.84	.486	4.7	12.2
19	(123') 5/32"	26	2.80	.485	4.5	12.6
20	(123') 5/32"	27	2.76	.482	4.4	13.0
21	(123') 5/32"	28	2.72	.479	4.2	13.4
22	(125') 5/32"	29	2.68	.476	4.1	13.8
23	(125') 5/32"	30	2.64	.473	4.0	14.2
24	(125') 5/32"	31	2.60	.470	3.9	14.6
25	(123') 5/32"	32	2.56	.467	3.7	14.9
26	(123') 5/32"	33	2.50	.464	3.5	15.3

TOTAL 168.6 GPM

Daily waste flow
Septic tank size
Pumping tank size
Effluent loading rate
Absorption area
Total length of laterals
Lateral diameter
Lateral configuration
Supply line length
Supply line diameter
Manifold placement
Hole size*
Hole spacing
Number of holes
Pressure head
Flow per hole
Total flow
Elevation head
Friction head
Pressure head
Total head
Pump requirements
Storage volume in laterals
Storage volume in supply line
Total storage volume
Dosing volume
Dosing depth
Check valve needed?

IBM WAREHOUSE
REVISED ELEVATIONS
FIELD "A"
9-4-85

*Data on hole size, spacing, pressure head and flow must be listed for each line for systems where lines are different (such as sloping lots).

Line No.		Hole Size	# Holes	Head Pressure	Flow/Hole	Hole Spacing*	Flow/Line
1	(100')	3/16"	19	3.0	.732	6.8	10.1
2	(105')	3/16"	15	2.96	.725	6.7	10.7
3	(106')	3/16"	16	2.92	.710	6.3	11.4
4	(110')	3/16"	17	2.88	.705	6.2	12.0
5	(111')	3/16"	18	2.84	.700	5.9	12.6
6	(113')	3/16"	19	2.80	.695	5.7	13.2
7	(115')	3/16"	20	2.76	.690	5.5	13.8
8	(117')	3/16"	21	2.72	.685	5.3	14.4
9	(119')	3/16"	22	2.68	.680	5.2	15.0
10	(120')	3/16"	23	2.64	.675	5.0	15.5
11	(121')	3/16"	24	2.60	.670	4.8	16.1
12	(122')	3/16"	25	2.56	.665	4.7	16.6
13	(125')	3/16"	26	2.5	.660	4.6	17.2

TOTAL 170.6 GPM

C of A (s) No. 21367

Date Issued 9/24/85 Serial 7898 T. C. No. 043-082-08 PO

L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

OPERATION PERMIT

CERTIFICATE OF APPROVAL

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

Name of Owner Trammell (LAST) Crow Company (FIRST) (MIDDLE)

Location of Property 5020 West W.T. Harris Blvd

Application Number 21367 Permit Number 21367

Inspection Data:

Liquid Capacity of Tank 3000 ST + 2(1500) GTS Tank Material PCC

Total Length of Drain Tile 3000' Number of Lines 26

Depth of Filter Material 12" Cover Depth 10"

Water Supply Source City Distance from Water Source —

Excavation Inspected 9/12/85 (DATE) Tank Inspected 9/18/85 (DATE)

Nitrification Field Inspected 9/12/85 (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 1985, 3000ST, 2@1500DT, DAP, LPP, 15000SF, 10G, Cecil

Cynthia G. Bass
Environmentalist

EHD-S-76

Environmental Health Department's Copy

Serial No. 8478

Date Issued 5-1-85

SIR No. 21367

T. C. No. PO 043-082-08

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 Trammell Crow Co.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 1400 Charlotte Plaza, Charlotte, NC ZIP 28244

LOCATION OF LOT 5020 West W. T. Harris Blvd.
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. _____ 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 21367 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.

Kelly Randall
Environmentalist

Dino D. Hadjistavropoulos
Environmental Health Director, or Authorized Section Head

BHD-5-76

Environmental Health Department's Copy

Date Received _____

MECK. [illegible] DEPARTMENT OF
RECEIVED
AUG 23 1994
ENVIRONMENTAL HEALTH

SIR No. 21367
T. C. No. PO 043-082-08
Map Date 2

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Trammell Crow Co - Mark E. Casey
(LAST, FIRST, MIDDLE)

2) ADDRESS OF OWNER 1400 Charlotte Plaza ZIP 28244

3) PHONE NO. Home _____ Office 376-5410

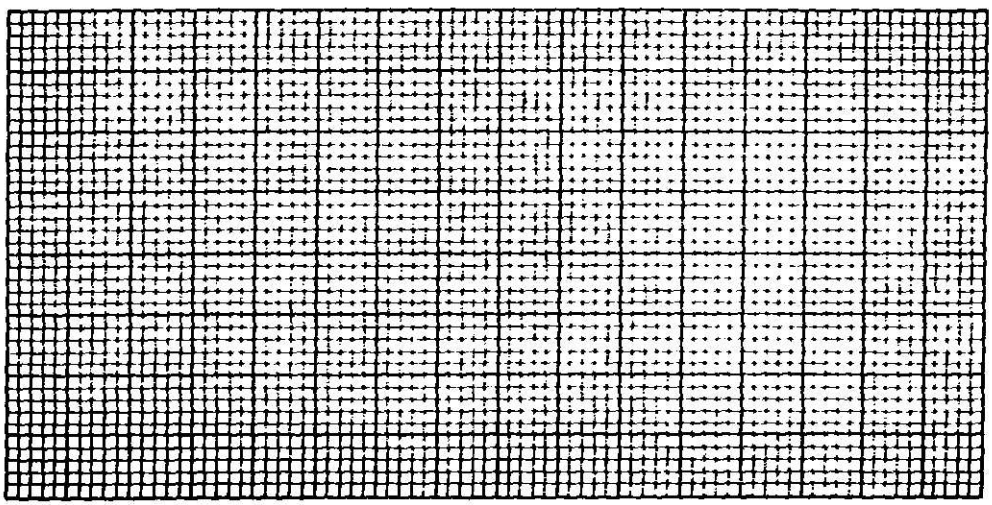
4) LOCATION OF PROPERTY 5100 West W.T. Harris Blvd.
(STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

MAP BOOK NO. 4475 PAGE NO. 035

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

Mark E. Casey
OWNER

EHB-5-76

Environmental Health Department's Copy

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

SIR. NO. 21367
T.C. NO. PO 043-082-08
DATE: 8-27-84

Mark Casey
Trammell Crow Company
1400 Charlotte Plaza
Charlotte, NC 28244

RE: Property located at 5100 West W.T. Harris Boulevard

Dear Mr. Casey:

At your request, a field investigation was conducted on the property designated above. The soils on the property were found to contain a limited area of provisionally suitable soil for the installation of a ground absorption sewage disposal system. A copy of the site evaluation report is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit plot plans for the proposed construction, well, and ground absorption sewage disposal system to this office. They will be reviewed and if it is found that there is an adequate area of provisionally suitable soil to accommodate the proposed installation, an Improvements Permit will be issued by this office.

If I may be of assistance, please feel free to call.

Sincerely,

Bill D. Hardister, Jr.

Bill D. Hardister, Jr.
Environmental Health Supervisor

BDH/kbg

Enclosure

Date Received 8-20-84

RECEIVED
AUG 20 1984

ICAR(S) Application No 21367

T. C. No. 90043-082-08

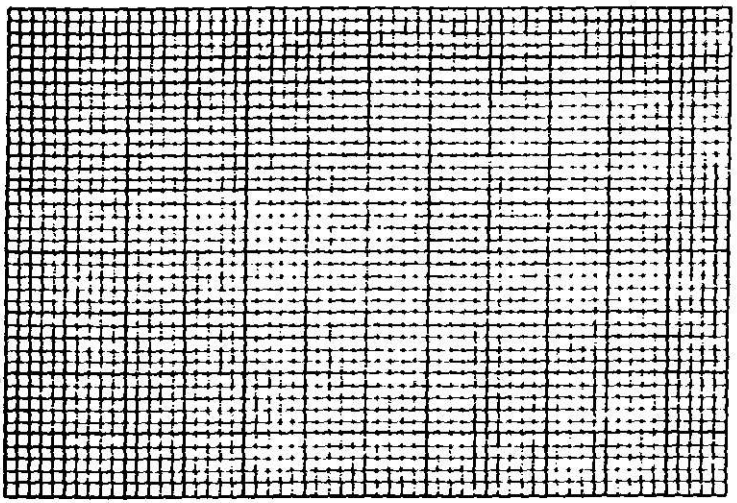
Map Date L

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 _____

5) Business Use — Max No Employees 40

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 Trammell Crow Co.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 1400 Charlotte Plaza Charlotte NC 28244

15) PHONE NO. Home _____ Office 376-5910

16) LOCATION OF SYSTEM 5100 West W. T. Harris Blvd
STREET OR COUNTY ROAD

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

Map Book No. 043 Page No. 055 052

18) DEED REFERENCE — DEED BOOK 4 73 AT PAGE 437

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.

Mark E. Casey
OWNER

DATE OF APPLICATION

BHB-5-76

Environmental Health Department's Copy

Date Issued 8-30-84 Serial No. 7810

SIR No. 21367

T. C. No. PO 043-082-08

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 Trammell Crow Company
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 1400 Charlotte Plaza, Charlotte, NC ZIP 28244

LOCATION OF LOT 5100 West W. T. Harris Boulevard
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO._____ 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 2136/. 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.

Ralph Nellis
Environmentalist

B. D. Hudson
Environmental Health Director, or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

Date Issued 11-02-84

Serial No. 07197

ICAR (S) Permit No. 21367

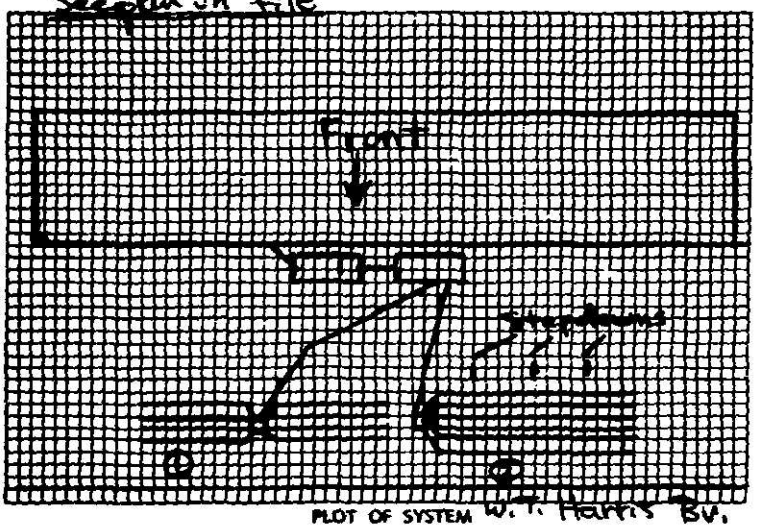
T. C. No. 20 043-082-08

Map Date L

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 dischorge as specified herein at the described location. This permit is granted based upon the information supplied in application 21367 dated 5-20-84 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 ~~12-02-84~~ 01-02-85 after which date this permit shall be null and void.

Section on file



PLOT OF SYSTEM W. T. Harris Bv.

Permeability Rate IVa

Liquid Capacity of Tank 3000 + 3000

Tank Construction PC concrete

Absorption and/or Nitrification Lines:

Total Line Length 1800

Number of Lines 8@113' & 6@150'

Distance from House >10'

Distance from Property Line >10'

Distance from Well Municipal system

NAME OF OWNER Trammell Crow Company

LOCATION OF PROPERTY 5100 W. W T Harris Bv.

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.

3000g septic tank, 3000g dosing tank, dual alt. pumps to 2 fields

Comments: #1 - 8 lines 3'x113'x12" Stone #2 - 6 lines 3'x150'x12" Stone
Hay or straw cover. High water alarm on seperate circuit.

Ryan D. Hendrickson Jr.
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-6-76

Environmental Health Department's Copy

HCF
7.28-85
IPM WAREHOUSE
REVISED

(3)

TDH: Elev. 124 + Fric. 16 + Press. 4 = 44'

USE TWO (2) PEARLESS TARGET SUB. PUMP
MODEL 4SEH302, 4.5HP, 1750 RPM
230 VOLT, 3 ϕ
W/ BAF'4 SIMPLEX INSTALLATION.
175 GPM @ 44 TDH

11) MANIFOLD DIAMETER 3"

12) PUMP

SEE ABOVE

13) TOTAL STORAGE VOLUME

FIELD "A"

2300'-6" PVC

3" = 70'
1½" = 1497'

70' x 36.7/100 = 26
1497' x 9.2/100 = 137
26+137 = 163

FIELD "B"

3" MANIFOLD = 70'
1½" = 1602'

2300' x 147/100 = 3381 GAL

70 x 36.7/100 = 26
1602 x 9.2/100 = 147
26 + 147 = 173

$\frac{163 + 173}{2}$ = 168 GAL

TOTAL STORAGE = 3381 + 168 = 3549 GALLONS

14) DOSING VOLUME = SUCTION MANIFOLD + 5 A (LATERAL NETWORK)
938/4 + 5(165) = 1234 GALLONS
840 GALLONS

$\frac{2250 \text{ GPD}}{890 \text{ GAL/DOSE}}$ = 2.67 DOSES/DAY

USE 2 2250/2 = 1125 GALLONS/DOSE

HCF
7-28-85
18m WATERLINE
REVISED

(2)

10) CONT'D

PIPE OUT OF WET WELL = 810.5
INV. OF WET WELL = 801.57
8.93'

ELEV. HEAD
FIELD "A"

UPPER PORTION 821.5
LOWER " 816
5.5'

TOTAL ELEV. HEAD 821.5 - 801.6 = 20'
HOWEVER - FOR WELL 60 BEHIND C&G
BEHIND NO. 1 BLDG ⑦ 820.5 => STILL
USE ABOVE HEAD.

FIELD "B"

UPPER PORTION 825.5
LOWER 821
4.5'

TOTAL ELEV. HEAD 825.5 - 801.6 = 24'

FRICTION HEAD
FIELD "A"

$V^2/2g = 12^2/64.4 = 0.06'$

2235' - 6" PVC 2235' x 3.1'/1000' = 7.0'
6" N (2.5 x 0.06) = .15'
6" GV (0.19 x 0.06) = .01'
6" 90° (3 x 0.30 x 0.06) = .05'
$V^2/2g = 8.2^2/64.4$ 2" GV (5.6 x 1.31) = 7.3'

15.5' => USE 16'

PRESSURE HEAD

HCF
7-28-85
IBM WAREHOUSE (BLOG 2)
SC No.'s DWG → REVISED LOCATION & CALCULATIONS

376-9359 KLATTER HUDSON FILES

(1)

LOW PRESSURE SYSTEM

1) DAILY FLOW = 90 EMPL X 25 GAL/DAY/EMPL. = 2250 GPD

2) PERM. ⇒ USE 0.15 GPD/FT² AS PER BIN HANDOUT

3) ABSORPTION AREA $\frac{2250}{0.15} = 15000$ FT²

4) LATERAL LENGTH $\frac{15000 FT^2}{5' O.C.} = 3000$ L.F.

5) SIL. EQUALIZATION —

6) ST LOCATION —

7) STAKE OUT —

8) S.T. SIZE
IF UNDER 1500 GPD FLOW, TANK SIZE (0.75 X DAILY FLOW) + 1125 = —

TANK = (0.75 X 2250) + 1125
= 2812.5 GALLONS.

9) HOLE SIZE

ROUGH ⇒ $\frac{3000 LF}{5' SPACING} = 600$ HOLES

5/32" ⇒ 0.58 GPM @ 4'
∴ 600 X 0.58 GPM/HOLE = 348 GPM

10) TOTAL HEAD
SPLIT FLOW ⇒ USE 2 ALTERNATING PUMPS
350 / 2 = 175 GPM/PUMP

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

SIR. NO. 21367
T.C. NO. PO 043-082-08
DATE: 4-11-85

Trammell Crow Company
1400 Charlotte Plaza
Charlotte, NC 28244

RE: Property located at 5100 West W. T. Harris Blvd.

Dear Sirs:

At your request, a field investigation was conducted on the property designated above. The soils on the property were found to contain a limited area of provisionally suitable soil for the installation of a ground absorption sewage disposal system. A copy of the site evaluation report is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit plot plans for the proposed construction, well, and ground absorption sewage disposal system to this office. They will be reviewed and if it is found that there is an adequate area of provisionally suitable soil to accommodate the proposed installation, an Improvements Permit will be issued by this office.

If I may be of assistance, please feel free to call.

Sincerely,

Bill D. Hardister, Jr.
Environmental Health Supervisor

BDH/kbg

Enclosure

Date Received 3-22-85

RECEIVED
ENVIRONMENTAL HEALTH

ICAR(S) Application No. 21367 1384

T. C. No. PO. 043-082-00

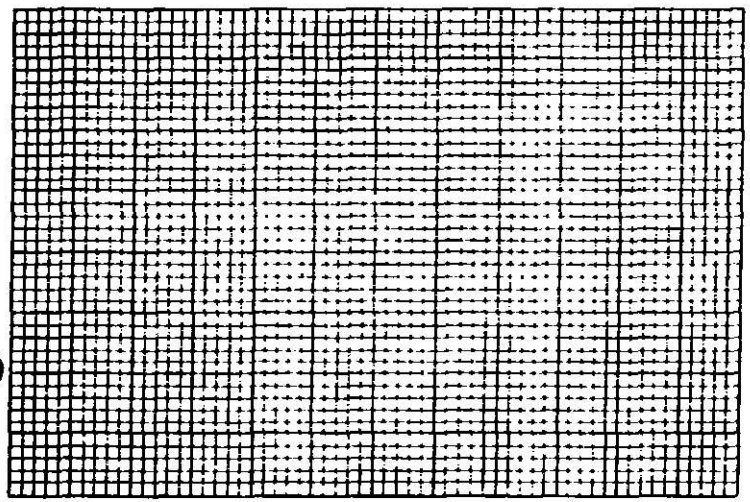
Map Date

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 on 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 NA
5) Business Use — Max No Employees 90
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 Trammell Crow Co
LAST FIRST MIDDLE
14) ADDRESS OF OWNER 140 Charlotte Plaza Charlotte NC 28244
15) PHONE NO. Home ____ Office 376-5710
16) LOCATION OF SYSTEM ~~5620~~ West W. T. Harris Blvd.
STREET OR COUNTY ROAD
17) SUBDIVISION ____ Lot No. ____ Block No. ____
Map Book No. 043 Page No. 052
18) DEED REFERENCE — DEED BOOK 473 AT PAGE 437
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.

Trammell Crow Co.
By Jan M. Kleto, Agent
OWNER

DATE OF APPLICATION

EHB-5-76

Environmental Health Department's Copy

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

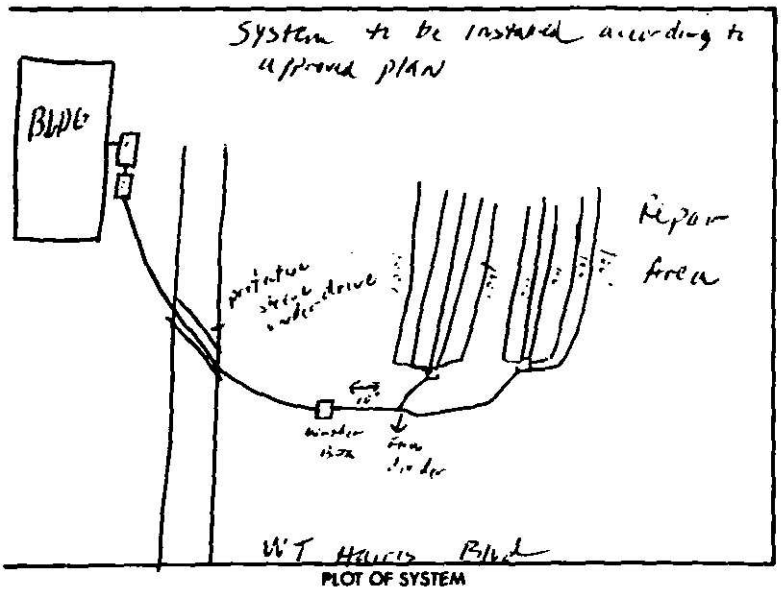
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 21367 DATE: 12/11/89

TC: 043-082-12 ☐ L

SERIAL Nº 13124

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 11/14/89. All work shall be completed on or before 11/11/90, 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 Health Department 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 1000 gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Total Line Length 1000 feet

Number of Lines 10

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well > 50' feet

NAME OF OWNER Piedmont Plastics Inc

LOCATION OF PROPERTY 5010 W T. Harris Blvd

Comments: System to be installed according to approved plott plan. Wisher box, (Flow divider)

Division or Section Head

Philip S. Walker
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 Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER OR AGENT'S COPY

JUL 14 1989

APPLICATION FOR AN IMPROVEMENT PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4403

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

(OFFICE USE ONLY)
FILE: 21367
TC: _____
SERIAL: № 18839
☐ L ☑ CRT

JOB LOCATION

① ADDRESS: 5010 W T Harris Blvd (STREET NO / STREET) ② FILE: 21367
③ JURISDICTION: _____ ④ TAX PARCEL NO.: 043-082-12
⑤ SUBDIVISION: _____ ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: Piedmont Plastics Inc (FIRST / MIDDLE / LAST)
⑨ MAILING ADDRESS: 3653 North I-85
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28213
⑬ PHONE: (WORK) 597-8200 ⑭ (HOME) _____

REQUEST

This request is for a(n):

⑮ ☑ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☐ Other (specify) _____

DESIGN CRITERIA

System will serve:

⑲ ☐ Residence ⑳ ☐ Mobile home
㉑ ☒ Business or place of public assembly
㉒ Number of bedrooms? N/A
㉓ Maximum occupancy? _____
㉔ Basement? ☐ yes ☒ no
㉕ Type? Office/whse
㉖ Maximum number of employees? 35
㉗ Maximum number of seats? _____

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☐ Individual well
B ☒ Municipal system
C ☐ Community well
D ☐ Community system

㉙ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter on the property for the purpose of processing this request.

Signed: _____
Date: 11/14/89

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

... No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by this Department.

... This permit is not transferable, and shall become null and void 36 months from the date of issuance.

_____ / _____
Environmentalist Date

_____ / _____
Director or Authorized Section Head Date

*This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

DATE: 11-20-89

NAME/COMPANY: D. C. Thomas

Sanitation _____

Vector Control _____

OPMD ✓

SERVICE: Subj Plat - New Septic Tank Permit

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
NOV 20 1989
John 2.00

FEE: 2.00

Completed By

Collected By

CERTIFICATE OF COMPLETION/OPERATION PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 21367 DATE: 1/19/90

TC: 043-082-12 ☐ L ☑ CRT

SERIAL Nº 13070

Name of Owner Piedmont Plastics INC Juris.:

Address of Property 5010 W T Harris Blvd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 1000

Number of Lines 10 @ 100

Cover Depth 10"

Water Supply Source CMUD

Distance to Water Source 750

Excavation Inspected 1/4/90

Tank(s) Inspected 1/19/90

Wash Line Inspected NA

High Water Alarm Inspected 1/19/90

PLOT

Design: 1990, 1500 ST, 1000 OT, MOD, flow divider, washer box CTR# 90
3000 SFT, 12"ø, PI Ceil

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☑ installed or constructed ☐ altered or repaired

☑ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The issuance of this

☐ Certificate of Completion ☑ Operation Permit

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 document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 10 NCAC 10A .1900 in addition to those listed below under "COMMENTS." This document 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: System designed for 35 employee factory

Phillip A. Walker

Environmentalist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.