Date Received 7-24-84

MECK C. Y DEPARTMENT OF
RECEIVED
J. 2 4 1984
ENVIRONMENTAL HEALTH

SIR No 21254
T. C. PO 097-062-17
Map Date 1

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER McLaughlin (LAST) John (FIRST) B (MIDDLE)

2) ADDRESS OF OWNER Box 17, Newell, N.C. ZIP 28126

3) PHONE NO. Home Orr Road Office

4) LOCATION OF PROPERTY Orr Road (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 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

OWNER

EHD-5-74

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 5845

SIR No. 21254

T. C. No. PO 097-012-17

Date Issued 8-29-84

Map Date L

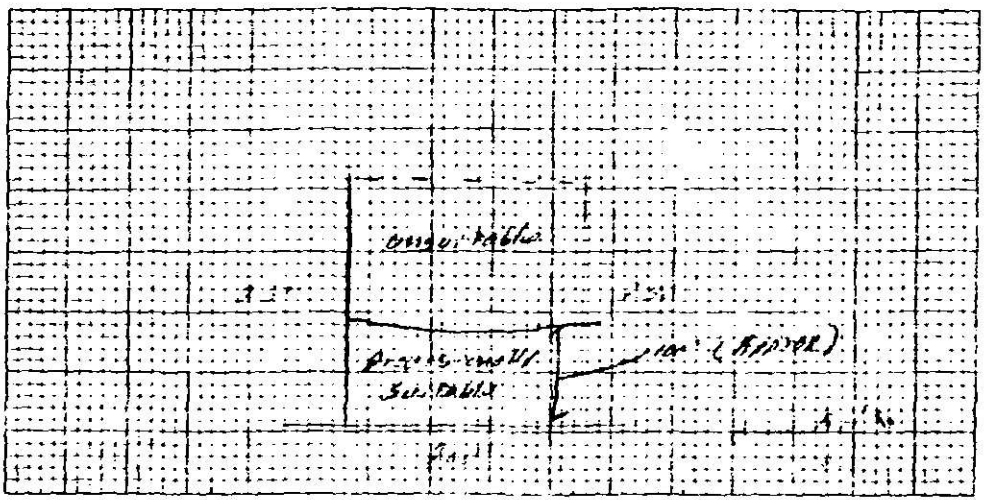
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER McLaughlin, John B.
LAST FIRST MIDDLE

ADDRESS OF OWNER P. O. Box 17, Newell, NC ZIP 28126

LOCATION OF PROPERTY Orr Road
STREET OR COUNTY ROAD

SUBDIVISION LOT NO 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 [illegible]. 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 [illegible] 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 specified [illegible] obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction of buildings [illegible] wastewater treatment system on the said lot.
2. The size of the septic tank wastewater treatment system [illegible] the Mecklenburg County Department of Environmental Health [illegible] and on the size and type of building [illegible]
3. This approval [illegible] system [illegible] on the above plot.
4. This approval [illegible] which [illegible] Mecklenburg County Department of Environmental Health [illegible] as acceptable for system installation [illegible]

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 revised laws, rules, and regulations been in effect on the issue date.

William A. Martin
Soil Scientist

Bill D. Harkstone Jr.
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. [illegible]

T.C. NO. [illegible]

(Ground Absorption Sewage Disposal)

OWNER: John B. McLaughlin
ADDRESS: Box 17
Newell, NC [illegible]
LOCATION OF SITE: [illegible]

PLAT NO:
LOT SIZE: [illegible] 1.15

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS [illegible] U	S PS [illegible] U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S PS [illegible] U	S PS [illegible] U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S PS [illegible] U	S PS [illegible] U	S PS U	S PS U
4. SOIL DEPTH (inches)	S PS 30-40" U	S PS 30-40" U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S [illegible] PS U	S [illegible] PS [illegible] U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S PS [illegible] to ground water U	S PS Perched water U [illegible]	S PS U	S PS U
7. OTHER (Specify)	S PS See Note U	S PS U	S PS U	S PS U
8. SOIL GROUP	[illegible] A	[illegible] B		
9. SITE CLASSIFICATION	Provisionally suitable	unsuitable		
10. SOIL SERIES	[illegible]	[illegible]		

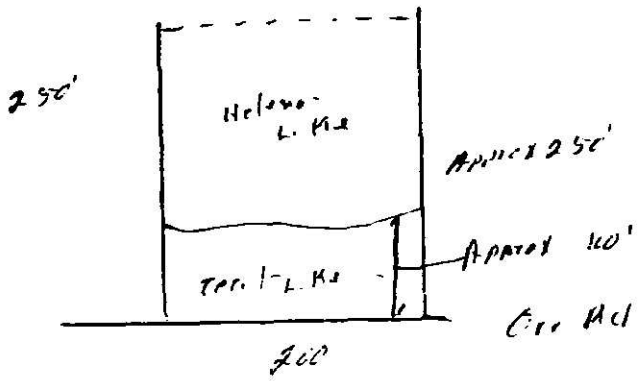
S - Suitable PS - Provisionally Suitable U - Unsuitable

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

Recommendations/Comments: [illegible] well [illegible] front of [illegible]. No cutting [illegible] filling [illegible]

Described by: [illegible]
Title: [illegible]

Date: [illegible]


250'
Helena L. Ke
Approx 250'
Approx 40'
Tecil L. Ke
Ore Rd
200

Date Received 11-28-84

RECEIVED
NOV 28 1984
ENVIRONMENTAL HEALTH

ICAR(S) Application No 21254

T. Pin 091-012-17

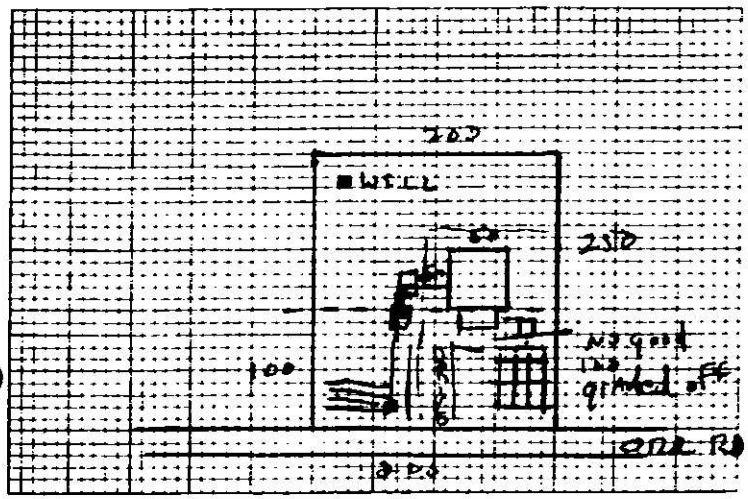
Map Date L

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)

4) Mobile Home ____Yes X No
Residence ____Yes X No
4) No of Bedrooms n/a
5) Business Use X Max No Employees 5
6) Washing Machine ____Yes X No
7) Garbage Disposal ____Yes X No
8) Dishwasher ____Yes X 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 ____

CONTRACT CORE DRILLING COMPANY

13) NAME OF OWNER [redacted] John B. (LAST, FIRST, MIDDLE)

14) ADDRESS OF OWNER [redacted] P. O. Box 18504, Charlotte, NC 28218

15) PHONE NO. Home [redacted] 7418 Office 332-2008

16) LOCATION OF SYSTEM Off Road (STREET OR COUNTY ROAD)

17) SUBDIVISION ____ Lot No. ____ Block No. ____

Map Book No ____ Page No. ____

18) DEED REFERENCE — DEED BOOK 2846 AT PAGE 475

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES ____ NO DATE RUN 8/29/84

20) PTR NUMBER (See Instructions) SIR 21254

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.

CONTRACT CORE DRILLING & SAWING COMPANY

November 20, 1984
DATE OF APPLICATION

By: Peter C. Moorefield, President
OWNER

EHD-5-76

Applicant's Copy

Serial No. 8037

SIR No. 21254

Date Issued 12-6-84

T. C. No. P0 097-012-17

Map Date 6, CCT

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 Contract Core Drilling Company
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P. O. Box 13504, Charlotte, N. C. ZIP 28218

LOCATION OF LOT 7408 Orr 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 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.
3. LIFT STATION WILL BE REQUIRED.

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

Eric D. Hudgins, Jr.
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 12-31-94

ICAR(S) Application No. 13714

T. C. No PO 105041-05

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 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 4

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] HAROLD R
LAST FIRST MIDDLE

14) ADDRESS OF OWNER [illegible] 28213

15) PHONE NO. Home [illegible] Office 597-4939

16) LOCATION OF SYSTEM ___
STREET OR COUNTY ROAD

17) SUBDIVISION ___ Lot No. ___ Block No. ___

Map Book No. ___ Page No. ___

18) DEED REFERENCE — DEED BOOK 3069 AT PAGE 2831

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.

12/31/94
DATE OF APPLICATION

Harold R Wissel
Gertrude T. Wissel
OWNER

EHD-S-76

[illegible] Department's Copy

Date Issued 12-31-84

Serial No. 07758

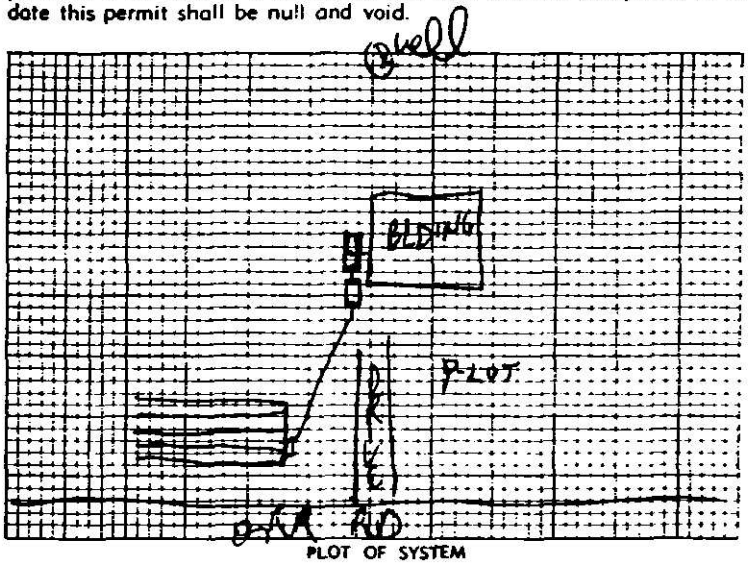
ICAR(S) Permit No. 21254

T. C No. 097-012-17

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 discharge as specified herein at the described location. This permit is granted based upon the information supplied in application 21254, dated 11-29-84 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 1-31-84, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank ST 1500 + PT 1000

Tank Construction PCC

Absorption and/or Nitrification Lines

Total Line Length 200'

Number of Lines 5 x 40

Distance from House 5'+

Distance from Property Line 10'

Distance from Well 100'+

NAME OF OWNER CONTRACT CORE DRILLING CO.

LOCATION OF PROPERTY 7468 ORR RD

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.

5 line x 40' long x 3' wide x 12" stone w/ 1000 gal pump tank

Comments:

B Hartsfield
Division or Section Head

Kelly Rankell
Environmentalist

* If this permit is for the installation or construction of a new system, it must be signed by the division or c 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-S-76

Environmental Health Department's Copy

Date Issued 1-7-85 Serial 7204 C of A (s) No. 21254

T C No 097-012-17 L CCT

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 CONTRACT (LAST) CORE (FIRST) DRILLING (MIDDLE) CO.

Location of Property 7408 ORR RD

Application Number 21254 Permit Number 21254

Inspection Data:

	ST	PT
Liquid Capacity of Tank	1500	1000

Tank Material PCC

Total Length of Drain Tile 200' Number of Lines 5 x 40

Depth of Filter Material 12" Cover Depth 2'

Water Supply Source well Distance from Water Source 100'+

Excavation Inspected 1-7-84 (DATE) Tank Inspected 1-7-84 (DATE)

Nitrification Field Inspected 1-7-84 (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 ~~X~~ 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

Environmentalist

EHD-5-76