Date Received 5/6/76

APT No 10936

T C No 157-[illegible]

Map Date

MAY 6 - 1976

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Mance (LAST) Claude (FIRST) D. (MIDDLE)

2) ADDRESS OF OWNER [illegible] ZIP [illegible]

3) PHONE NO Home 694-5563 Office

4) LOCATION OF PROPERTY Lot 12 [illegible] (STREET OR COUNTY ROAD)

5) SUBDIVISION [illegible] LOT NO 12 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

Claude D. Mance
OWNER

FORM NO. E-1-11-1-70

HEALTH DEPARTMENT'S COPY

SOIL INVESTIGATION REPORT

Date of Investigation May 1, 1976 APP NO. 10936

Owner C. D Mares

Location of Property W. 11th Rd. Lot No 12 Block No. C

Soil Suitability Ratings Tax Lot No. 137-074-06

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Cecil	Enon		
2. Soil Slope	acceptable 2-6%	acceptable 2-4%		
3. Soil Depth	acceptable >48"	acceptable 48"		
4. Soil Texture	acceptable clay	unacceptable 2:1 Expanding clay		
5. Soil Structure	acceptable subangular blocky	unacceptable massive		
6. Restrictive Horizons	—	—		
7. Soil Drainage	acceptable well drained	unacceptable perched high water table		
8. Soil Permeability (Percolation Rate)	76- acceptable 60 min/in	unacceptable >200 min/in		
9. Other	—	—		
10. Overall Rating	acceptable	unacceptable		

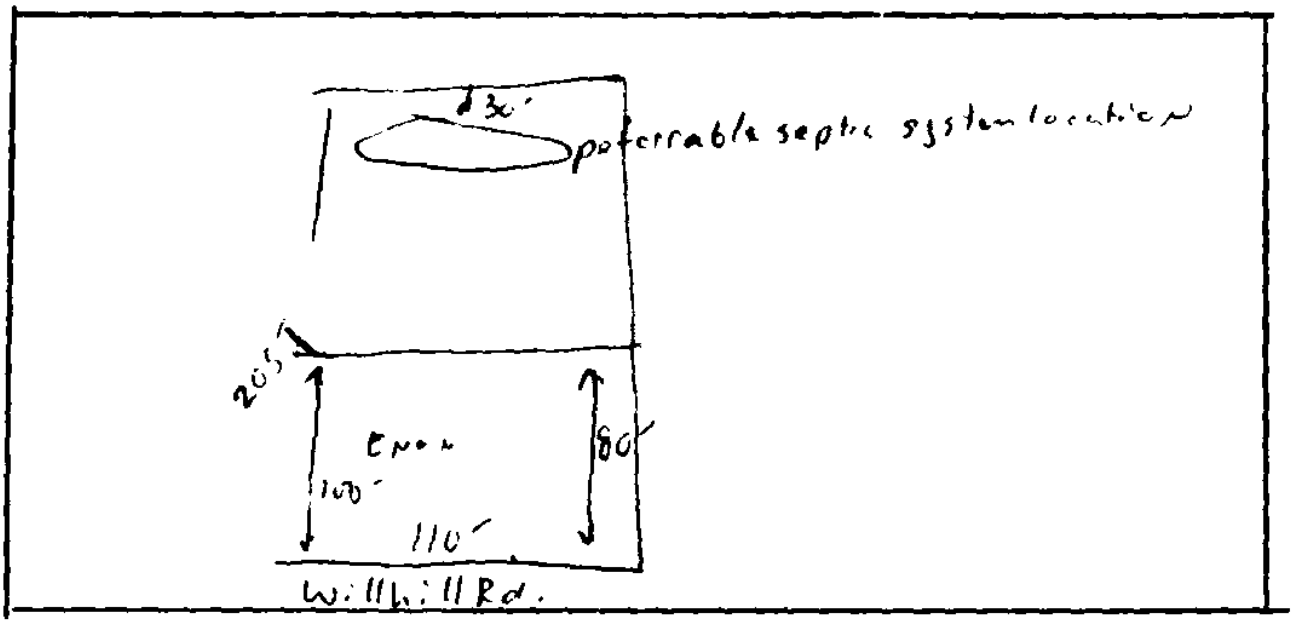
Recommendations Based on this investigation, the lot is conditionally recommended for approval for installation of a septic tank system. System design should be based on a percolation rate of 60 min/in and should be placed in the area of Cecil soils.

See diagram on back

/s/ Edward Casavant
Soil Scientist

3/18/75
EHD 539

DIAGRAM OF PROPERTY



3/18/75

339

Serial No. 6239

PTR No. 10936

T C No 137-074-06

Date Issued May 12, 1976

Map Date --

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

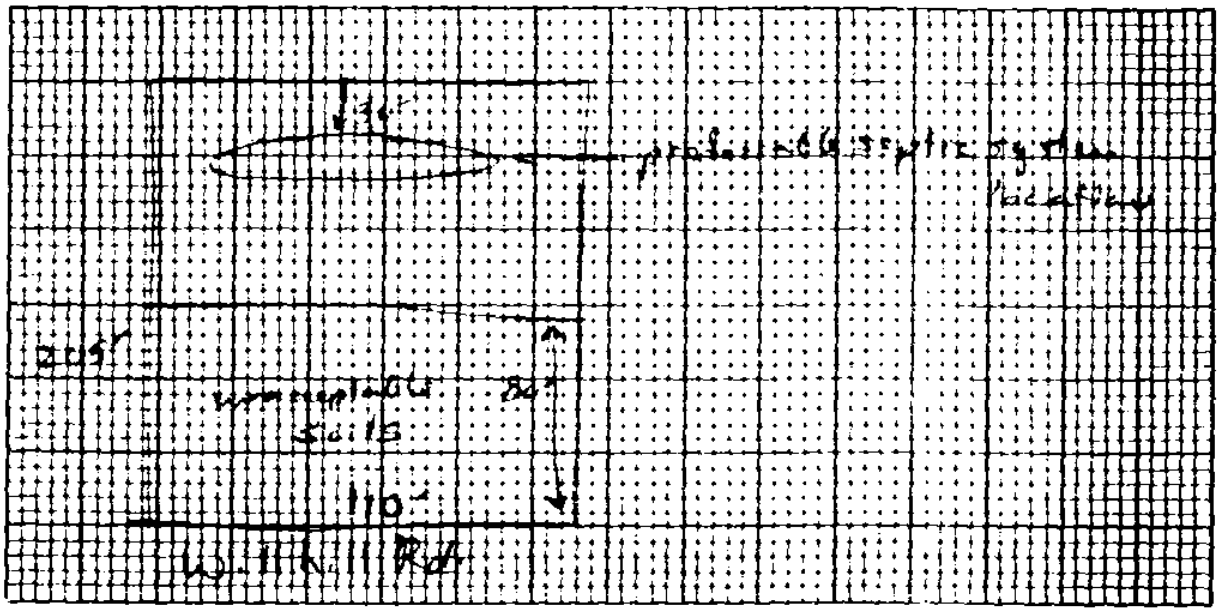
PERCOLATION TEST REPORT

NAME OF OWNER MAREE (LAST) CLAUDE (FIRST) D. (MIDDLE)

ADDRESS OF OWNER 19 Cherry Street, Wadesboro, N. C. ZIP 28170

LOCATION OF PROPERTY Lot 12, Block C Willhill Road (STREET OR COUNTY ROAD)

SUBDIVISION Wilson Woods LOT NO 12 BLOCK NO. C



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 60min./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 teratment 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 drilling of a well) 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.

***Results determined by soil scientist.**

W Edward Casavant

W. Edward Casavant
Soil Scientist

John A Johnson

Director, Environmental Health Division or
Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

Date Received 8/24/06

ICAR(S) Application No. 19936

T. C. No. 137-574-06

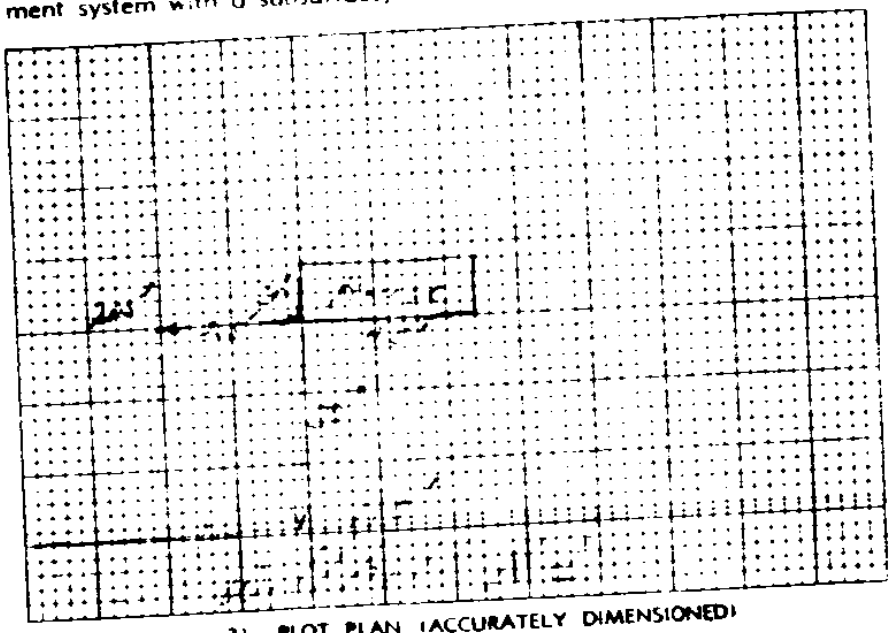
Map Date _____

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 that property described hereinafter hereby applies to the Mecklenburg County Health Department 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) No of Bedrooms 3

5) Business Use Max No Employees ___

6) Washing Machine X Yes ___ No

7) Garbage Disposal ___ Yes X No

8) Dishwasher ___ Yes X 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 X 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 _____ STREET OR COUNTY ROAD

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

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A PERCOLATION TEST BEEN RUN? X YES ___ NO DATE RUN 8/22/06

20) PTR NUMBER (See Instructions) 19936

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.

_____ DATE OF APPLICATION

_____ OWNER

FORM NO. E-4-4-2M-6-785

HEALTH DEPARTMENT'S COPY

Serial No. 0090

LA No. 10936

Date Issued 24 August 1976

T. C. No. 137-074-06

Map Date

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 Freeland, (LAST) Robert (FIRST) N. (MIDDLE)

ADDRESS OF OWNER 701 Old Bell Road Matthews ZIP

LOCATION OF LOT Willhill Road (STREET OR COUNTY ROAD)

SUBDIVISION Wilson Woods LOT NO 12 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 10936. 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

L. P. Brieaman
Environmentalist

John R. Atkinson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

R

Date Issued 5/24/77

Serial No. 0744

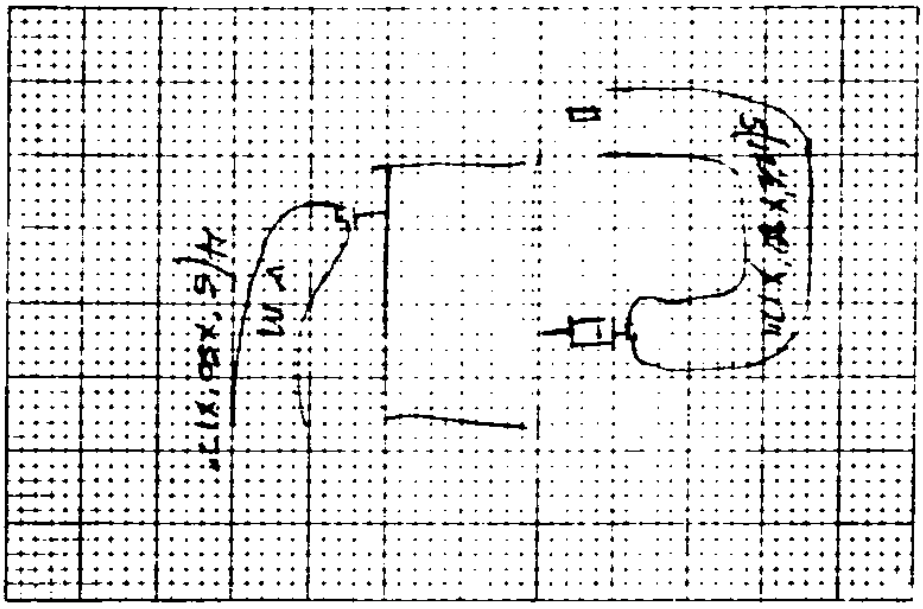
ICAR(S) Permit No. 10936

T C No 137-074-06

Map Date

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 X 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 10936, dated 8-24-76 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 6/10/77, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate 60

Liquid Capacity of Tank 1000gal

Tank Construction PC

Absorption or Nitrification Lines	ST	WM A
Total Line Length	400	200
Number of Lines	5	4

Distance from House 10'

Distance from Property Line 10'

Distance from Well comm.

NAME OF OWNER ROBERT M. FREELAND

LOCATION OF PROPERTY LOT 12C WILL HILL 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 gaurantee 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.**

Comments: *W.M. IN FRONT OF HOUSE

___ Division or Section Head

R. P. Pressman 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. 0733

C of A (s) No. 10936

Date Issued 5-31-77

T C No 137-074-06

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 FREELAND (LAST) ROBERT (FIRST) M. (MIDDLE) (FOR SALE)

Location of Property LOT 12 C WILLHILL RD.

Application Number 10936 Permit Number 10936

Inspection Data:

Liquid Capacity of Tank 1000 gal Tank Material PC

Total Length of Drain Tile 400 ~~150~~ 200 Number of Lines 5 4

Depth of Filter Material 17" Cover Depth 30"

Water Supply Source COMM Distance from Water Source -

Excavation Inspected 5/31/77 (DATE) Tank Inspected 5/31/77 (DATE)

Nitrification Field Inspected 5/31/77 (DATE)

Washing Machine Line Inspected, If Applicable 5/31/77 (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 THIS SYSTEM NOT DESIGNED FOR DISH-WASHER &/OR GARBAGE DISPOSALL

LOCUST CONST CO.

L. P. Brigman

Environmentalist

EHD-5-76

Environmental Health Department's Copy