DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20934

T.C. NO. PO 135-21-22, 25

(Ground Absorption Sewage Disposal)

OWNER: Bob McLemore Co.
ADDRESS: PO Box 25746
Charlotte, N.C.
LOCATION OF SITE: 6120 Fall Wagon

PLAT NO: 41-W
LOT SIZE: 23 ac

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS 6-12% 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 2-1 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 18-36" PS 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 >36" PS to ground water U	S PS U	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	1UB			
9. SITE CLASSIFICATION	unsuitable			
10. SOIL SERIES	Urban Lake			

S - Suitable PS - Provisionally Suitable U - Unsuitable

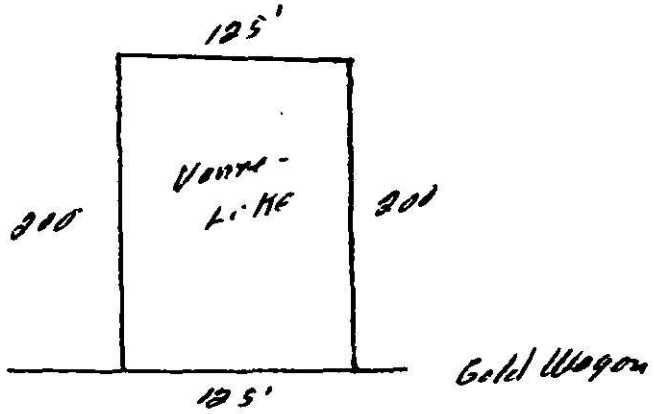
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: 2-1 Clay, but not extremely heavy

Described by: William A. Marlin
Title: Soil Scientist

Date: 5-4-84

2d


125'
Vonna-
Lake
200
200
Gold Wagon
125'

Serial No. 7679

SIR No. 20934

Date Issued 7-16-84

T. C. No. PO 135-211-22,25

Map Date L CET

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING IMPROVEMENT PERMIT DEPARTMENT

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

NAME OF OWNER Bob McLemore Company
(LAST FIRST MIDDLE)

ADDRESS OF OWNER P.O. Box 25746, Charlotte, NC ZIP 28212

LOCATION OF LOT 6120 Gold Wagon Lane
(STREET OR COUNTY ROAD)

SUBDIVISION Farmwood #20 LOT NO 41 BLOCK NO. W

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 20934. 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.

*** AGREEMENT FORM ON FILE ***

Environmentalist

Bob D. Henderson Jr.
Environmental Health Director, or Authorized Section Head

BHD-5-74

Environmental Health Department's Copy

Date Received 4-26-84

RECEIVED
APR 26 1984
ENVIRONMENTAL HEALTH

ICAR(S) Application No. 20934

T. C. No. PO 135-211-22425

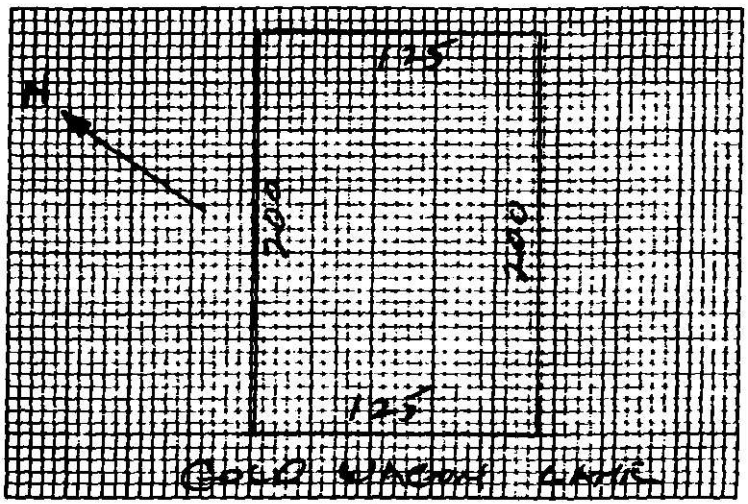
Map Date _____

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)

4) 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 BOB McLEMORE Co
(LAST FIRST MIDDLE)

14) ADDRESS OF OWNER P.O. Box 25746 CHARLOTTE NC. 28212

15) PHONE NO. Home ____ Office 545-6111

16) LOCATION OF SYSTEM 6120 GOLD WAGON LANE
(STREET OR COUNTY ROAD)

17) SUBDIVISION FARMWOOD #20 Lot No. 41 Block No. W

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.

4-25-84
DATE OF APPLICATION

OWNER Bob McLemore Co.

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

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

SIR. NO. 20934
T.C. NO. PO 135-211-22,25
DATE: 5-7-84

Bob McLemore Company
P. O. Box 25746
Charlotte, NC 28212

RE: Property located at 6120 Gold Wagon Lane

Dear Bob:

At your request, a field investigation was conducted on the property designated above and was classified unsuitable for the installation of a ground absorption sewage disposal system. A copy of the site evaluation report is enclosed for your information.

Sites classified as unsuitable may be utilized for soil absorption disposal systems provided engineering, hydrogeologic, soil and environmental studies indicate that a suitable septic tank system or a suitable alternate system can be reasonably expected to function satisfactorily.

Should you desire to file for permission to install an alternate system, plans and specifications prepared by a person with a demonstrated knowledge of ground absorption sewage treatment disposal systems, soil and rock characteristics, groundwater hydrology and drainage systems should be submitted to this office. They will be reviewed and if it is found that the system may be reasonably expected to function satisfactorily, approval will be given upon the execution by you of "Septic Tank Agreement Form" provided 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

Serial No. 07908

ICAR(S) Permit No. 20934

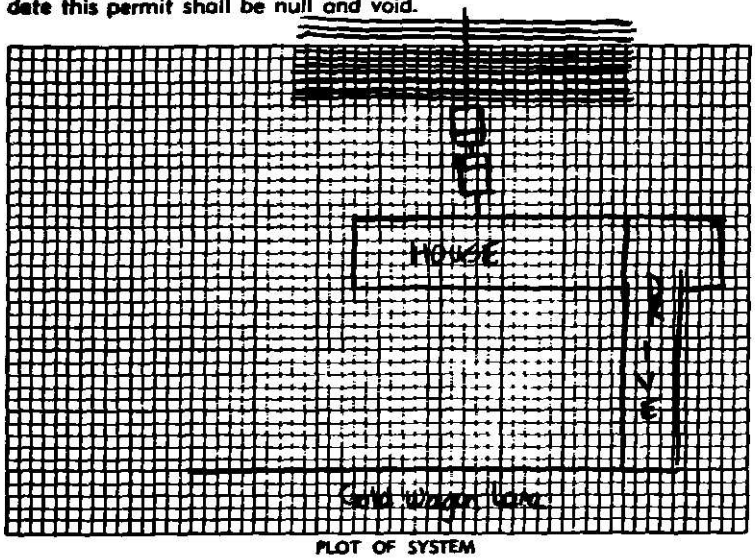
Date Issued 2/28/85

T. C. No. 135-211-22 & 25

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 20934, dated 4/26/84 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 3/28/85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500gal+1000gal

Tank Construction PCC

Absorption and/or Nitrification Lines:

Total Line Length 960'

Number of Lines 10X96'

Distance from House 5'

Distance from Property Line 10'

Distance from Well >100'

NAME OF OWNER Bob McLemore Company

LOCATION OF PROPERTY 6120 Gold Wagon Lane

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.

Install in accordance with plans on file

Comments:

[signature] Division or Section Head

Cynthia G. Bass 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

C of A (s) No. 20934 L
PO
Date Issued 4/1/85 Serial 7410 T. C. No. 135-211, 22 & 25
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 McLemore (LAST) Bob (FIRST) (MIDDLE)

Location of Property 6120 Gold Wagon Lane

Application Number 20934 Permit Number 20934

Inspection Date:

Liquid Capacity of Tank 1500 + 1000 Tank Material PCC

Total Length of Drain Tile 900' Number of Lines 20

Depth of Filter Material 8"-10" Cover Depth 18"

Water Supply Source Community Distance from Water Source >100'

Excavation Inspected 3/29/85; 4/1/85 (DATE) Tank Inspected 3/29/85; 4/1/85 (DATE)

Nitrification Field Inspected 3/29/85; 4/1/85 (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: RCS

Unable to get 960 linear feet due to limited area, therefore only 900' was installed
Area in front of home available for repair.

Cynthia G. Bass
Environmentalist

BHD-S-74

Environmental Health Department's Copy

REAL ESTATE
BOOK PAGE
4844 0133

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

SEPTIC TANK AGREEMENT 20734
197

The undersigned, Bob McLEMORE Co Inc, owner of property located at 41-W 6120 Galloway Lane ("the site") and described in instrument recorded in Book 4647 at Page 933, Mecklenburg Public Registry, hereby acknowledges that he applied to the Department of Environmental Health for a permit to install a septic tank sewage disposal system on the site; the Department evaluated the site for suitability for such a system in accord with the regulations promulgated by the North Carolina Commission for Health Services as 10 NCAC 10A .1900 et seq; that the Department classified the site as unsuitable and an appropriate permit was issued by the Department.

The undersigned further acknowledges that the proper design, construction, and maintenance of such septic tank system is his responsibility and that neither the Department nor its officials, employees or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for damages, consequential or direct, which are caused, or which may be caused by a malfunction of such system.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

And the undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department and its successors, as well as Mecklenburg County, for any damages or other claims of any person or persons whatsoever arising out of the installation operation, or failure of said septic tank system.

And the undersigned further agrees for his heirs and assigns that, in the event any septic tank system installed under authority of the aforesaid permit fails to perform adequately, in any respect, he will take whatever measures are required to correct same; or if such is impossible he will discontinue use of said system immediately.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This 23 day of MAY, 1984.

Billy E. Coggins
ASST. SECRETARY
ATTESTED BY

Prepared by Bob McLemore & Co. Inc.
(Seal)
(Seal)

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, _____, a Notary Public for said County and State, do hereby certify that _____ personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this _____ day of _____, 19__.

Notary Public
My Commission Expires: _____

STATE OF NORTH CAROLINA
COUNTY OF ~~MECKLENBURG~~ UNION

I, KRISTY McLEMORE (CARRIKER), a Notary Public for said County and State, do hereby certify that ROBERT V. McLEMORE personally came before me this day and acknowledged that he is PRESIDENT of BOB McLEMORE & CO. INC. and that by authority duly given and as the act and deed of said corporation, the foregoing instrument was signed in its name by its PRESIDENT, sealed with its corporate seal and attested by BILLY E. COGGINS, ASST. SECY.

WITNESS my hand and notarial seal, this 23rd day of MAY, 1984.

Kristy McLemore (Carriker)
Notary Public
My Commission Expires: 12/08/87

MAIL TO DEPT OF ENV. HEALTH

PRESENTED FOR REGISTRATION
'84 MAY 24 AM 10 AM
CHARLES E. COWDEN
REGISTER OF DEEDS
MECKLENBURG CO.

REAL ESTATE
BOOK PAGE
4844 0134

State of North Carolina, County of Mecklenburg
The foregoing certificate(s) of Kristy McLehore (Carriker)

a Notary(ies) Public of Union County and State of North Carolina
is/are certified to be correct. This 24 day of May 19 84
Charles E. Crowder, Register of Deeds, By: Mary A. Dixon DEPUTY

PRESENTED FOR REGISTRATION
MAY 24 8 08 AM '84
CHARLES E. CROWDER
REGISTER OF DEEDS
MECKLENBURG CO. N.C.

RECEIVED
JUN 6 1984
ENVIRONMENTAL HEALTH
MECK COUNTY DEPARTMENT OF

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5.00

FEE 5.00
<> 5.00
ORSH 5.00

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05/24/84