Date Received 9-14-83

MECK COUNTY DEPARTMENT OF
RECEIVED
SEP 1 / 1983
ENVIRONMENTAL HEALTH

SIR No. 20042

T. C. No. 001-025-01

Map Date _____

# MECKLENBURG COUNTY
# DEPARTMENT OF ENVIRONMENTAL HEALTH

## APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER HYDER (LAST) CHARLES (FIRST) MONROE (MIDDLE)

2) ADDRESS OF OWNER 4200 ROGERS ROAD CHATTANOOGA ZIP TN 37411

3) PHONE NO. Home (615) 698-7482 Office (615) 755-4478

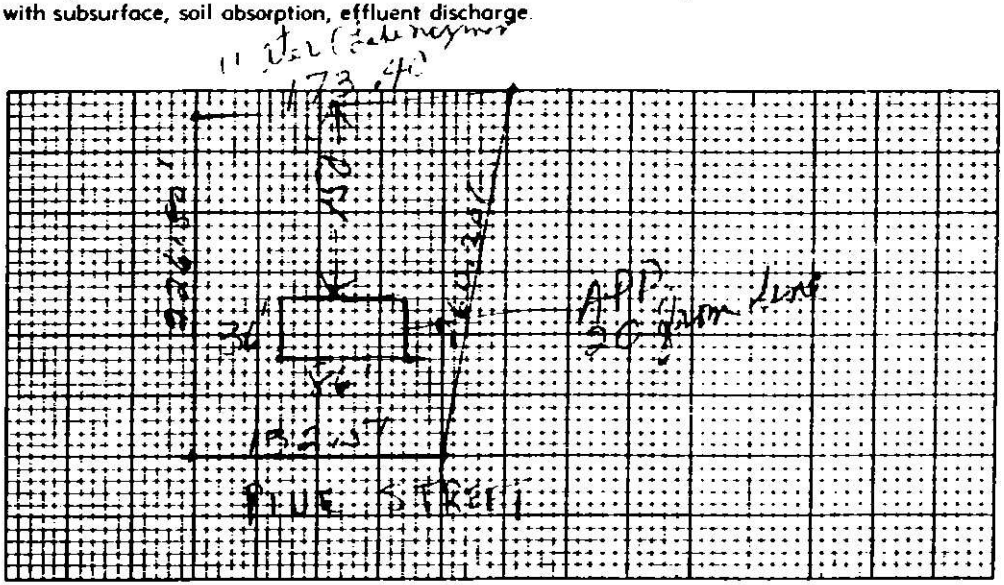
4) LOCATION OF PROPERTY 15701 PINE STREET (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. 4 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

Charles M Hyder
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 5215

SIR No. 20042

T. C. No. 001-025-01

Date Issued 9-26-83

Map Date

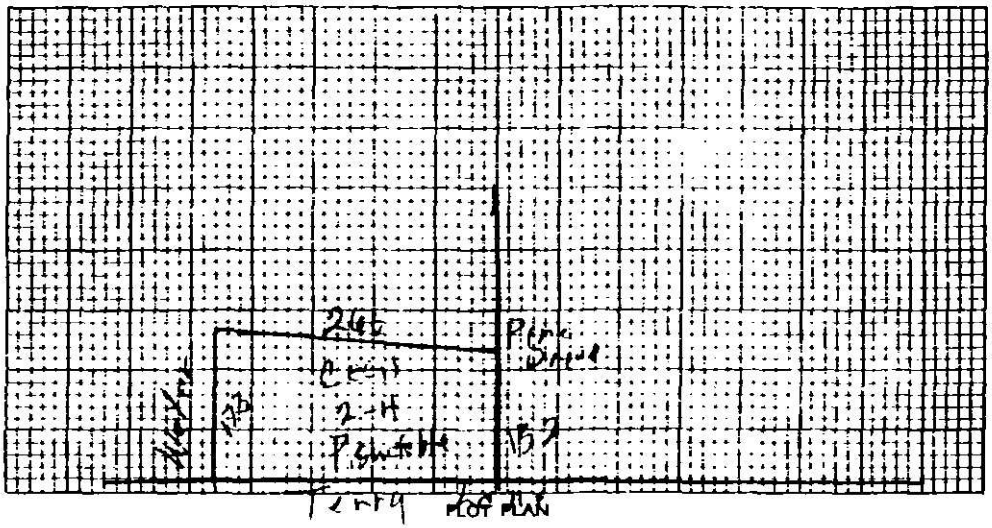
# MECKLENBURG COUNTY
# DEPARTMENT OF ENVIRONMENTAL HEALTH
## SOIL INVESTIGATION REPORT

NAME OF OWNER Hyder (LAST) Charles (FIRST) (MIDDLE)

ADDRESS OF OWNER 4200 Rogers Road ZIP

LOCATION OF PROPERTY Pine Street & Terry Lane (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 described above. The said investigation was conducted on that portion of the lot as indicated on the above plot.

The permeability rate determined by the investigation was **Prov. suitable**. 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 Department of Environmental Health 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 treatment system which must be installed will be determined by the Mecklenburg County Department of Environmental Health prior to installation based on the permeability 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 indicated as acceptable for system installation on the above plot.
4. This approval is void if any grading, filling or construction (including the drilling of wells) is performed on the lot which, in the opinion of the Mecklenburg County Department of Environmental Health renders the area indicated as acceptable for system installation unsuitable for 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 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 or revised laws, rules, and regulations been in effect on the issue date.

W. B. Ramsey
W. B. Ramsey
Soil Scientist

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. 20042

T.C. NO. 001-025-01

(Ground Absorption Sewage Disposal)

OWNER: Charles Hyder
ADDRESS: 4200 Rogers Rd

PLAT NO:
LOT SIZE: 33,000

LOCATION OF SITE: Pine Street + Terry Lane

| FACTORS | AREA 1 | AREA 2 | AREA 3 | AREA 4 |
|---|---|---|---|---|
| 1. SLOPE (%) | S (PS) 2-5 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) Clayey 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) 40-45" U | S PS U | S PS U | S PS U |
| 5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock) | S (PS) None U | S PS U | S PS U | S PS U |
| 6. SOIL DRAINAGE/GROUNDWATER (external and internal) | S (PS) Adequate 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 | IIa | | | |
| 9. SITE CLASSIFICATION | Suitable | | | |
| 10. SOIL SERIES | Cecil | | | |

S - Suitable PS - Provisionally Suitable U - Unsuitable

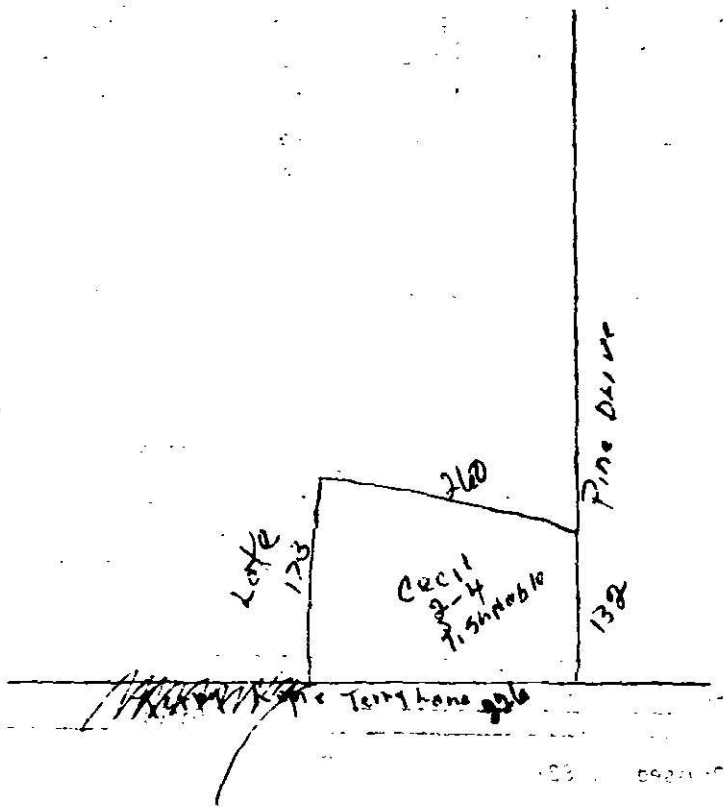
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: _____

Described by: W. B. Ramsey
Title: Sanitarian, Int

Date: 2-23-83

EHD 539 (Revised: 6/82)


Pine Drive
260
Lake
173
Cecil
2-4
Fishdable
132
Terry Lane
226

MECK COUNTY DEPARTMENT OF HEALTH RECEIVED SEP 1 '83 ENVIRONMENTAL HEALTH

Date Received 9-14-83

ICAR(S) Application No. 20042

T. C. No. 001-025-01

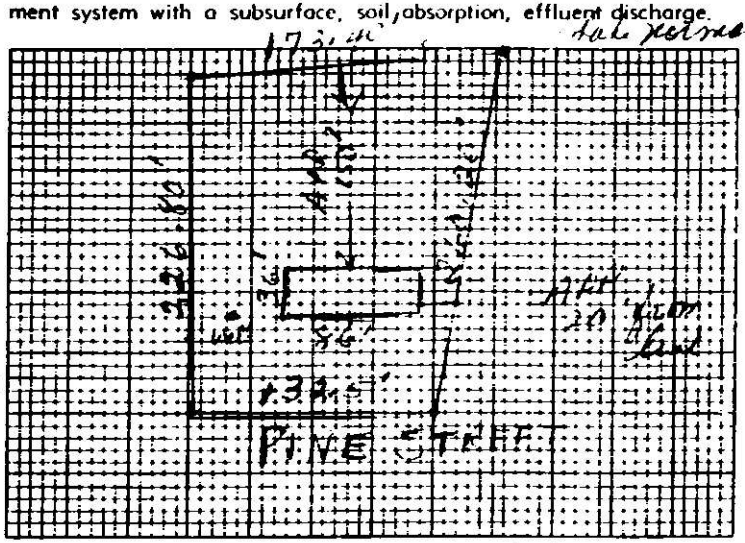
Map Date _____

# 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) 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)

Mobile Home ____Yes ____No
Residence X Yes ____No

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 X Yes ____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. ____

13) NAME OF OWNER [illegible] CHARLES DOUGLAS
LAST FIRST MIDDLE

14) ADDRESS OF OWNER [illegible] CHATTANOOGA, TN 3741[illegible]

15) PHONE NO. Home [illegible] Office [illegible]

16) LOCATION OF SYSTEM [illegible]
STREET OR COUNTY ROAD

17) SUBDIVISION _____ Lot No. 4 Block No. _____

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? ____ YES X 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.

9/14/83
DATE OF APPLICATION

[signature] [illegible]
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 6790

SIR No. 20042

Date Issued 9-27-83

T. C. No. 001-025-01

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 Hyder (LAST) Charles (FIRST) Monroe (MIDDLE)

ADDRESS OF OWNER 4200 Rogers Road, Chattancoga, TN ZIP 37411

LOCATION OF LOT 15701 Pine Street (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.

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.

R Phelps.
Environmentalist

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

EHD-5-76

Environmental Health Department's Copy

Serial No. 6789

Date Issued 17 Jun 83

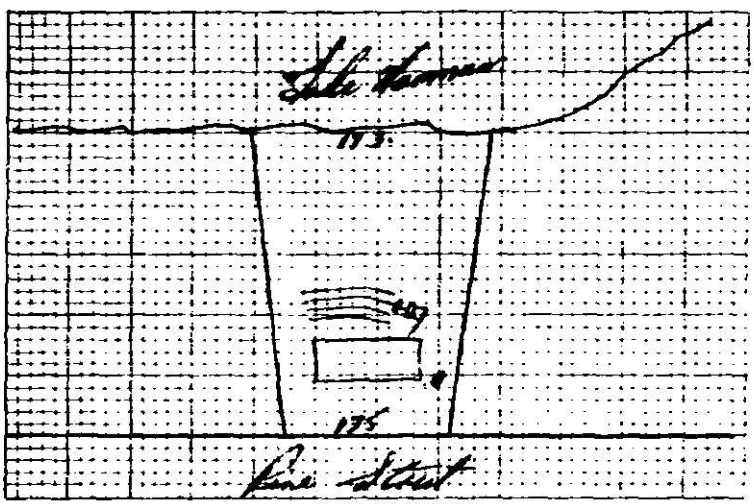
ICAR(S) Permit No. 20042

T C No. 001-025-01

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 ✓ 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 20042, dated 14 Jun 83 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 17 Jun 83, after which date this permit shall be null and void.




PLOT OF SYSTEM

Permeability Rate P3

Liquid Capacity of Tank 1500

Tank Construction PC

Absorption and/or Nitrification Lines

Total Line Length 330'

Number of Lines 4

Distance from House >5'

Distance from Property Line >10'

Distance from Well >50'

NAME OF OWNER Hyder, Charles Monroe

LOCATION OF PROPERTY 15701 Line Street (Lake Norman)

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.

4 Trench 3'x83'x12" 9' Centers

Comments:

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 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

12-21-83

C of A (s) No. 20042

Date Issued 15 Nov 83 Serial 6302 T. C No. 001-085-01

# MECKLENBURG COUNTY
# DEPARTMENT OF ENVIRONMENTAL HEALTH

## CERTIFICATE OF APPROVAL

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

Name of Owner Hughey (LAST) Charlie (FIRST) Monroe (MIDDLE)

Location of Property 15701 Lemley Trail (Lake Norman)

Application Number 20042 Permit Number 20042

**Inspection Data:**

Liquid Capacity of Tank 1500 Tank Material PC

Total Length of Drain Tile 330 Number of Lines 4

Depth of Filter Material 12" Cover Depth 12-18"

Water Supply Source Well Distance from Water Source 75c'

Excavation Inspected 15 Nov 83 (DATE) Tank Inspected 15 Nov 83 (DATE)

Nitrification Field Inspected 15 Nov 83 (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 _____

M. L. Kelly
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

2500

# APPLICATION FOR AN IMPROVEMENT PERMIT

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

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

(OFFICE USE ONLY)

FILE: 70042

TC:

SERIAL: № 18825 ☐ L ☑ CR

**JOB LOCATION**

① ADDRESS: 15701 (STREET NO) Pine ST (STREET) (LAKE NORMAN) ② FILE:

③ JURISDICTION: ④ TAX PARCEL NO.: 001-025-01

⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

**OWNER**

⑧ NAME: CHARLES (FIRST) MONROE (MIDDLE) HYDER (LAST)

⑨ MAILING ADDRESS: 15701 PINE ST.

⑩ CITY: Huntersville ⑪ STATE: NC ⑫ ZIP: 28078

⑬ PHONE: (WORK) 875 3358 Retiring ⑭ (HOME) 875-3358

**REQUEST**

This request is for a(n):

⑮ ☐ New permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☐ Repair or alteration permit ⑱ ☑ Other (specify) CAR PORT (UNATTACHED

**DESIGN CRITERIA**

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? ㉕ Type?

㉓ Maximum occupancy? ㉖ Maximum number of employees?

㉔ Basement? ☐ yes ☐ no 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 onto the property for the purpose of processing this request.

Signed: Charles M Hyder

Date: 7/11/89

## IMPROVEMENT PERMIT

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

... No work shall be conducted on the septic tank system unt... stallation, Construction, Alteration and/or Repair permit is issued ... Department.

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

Use existing system

Philip S. Walker, 7/18/8...
Environmentalist Date

[signature], 7-19-...
Director or Authorized Section Head Date

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

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

DATE: 7/11/89

NAME/COMPANY: Charles Hyder

Sanitation _____

Vector Control _____

OPWD ✓

SERVICE: inp - add.

2C42

[illegible]

ENVIRONMENTAL HEALTH DIVISION

PAID

JUL 11 1989

FEE: 25.00

Ck# 219

$1.25.00

Completed By

Collected By

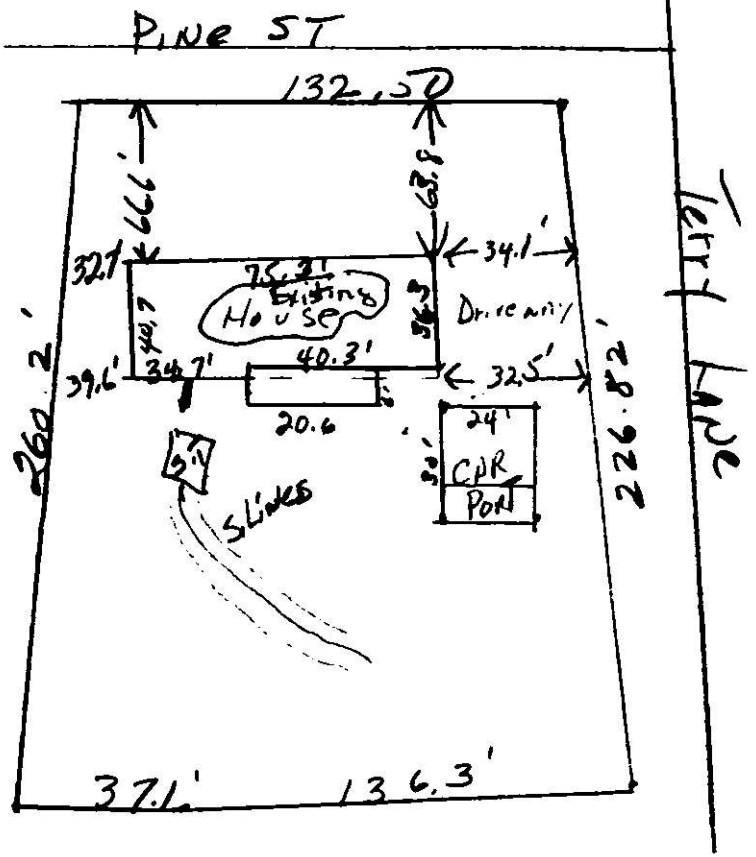
# PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4803

FILE: 20042

TC: _____

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.




Signed: Charles M Hyder

Date: 7/11/89