

20510 ISLAND FOREST DR

00172117

9/5/08

marliwr

Groundwater and Wastewater Services File Imaging Project
May 2007
Barcode Font = IDAutomationHC39M

proj #187504
FEE $100.00
DATE 6/28/06
CRT 1 pd $100.00

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM
MECKLENBURG COUNTY - GROUNDWATER & WASTEWATER SERVICES
700 N. Tryon St., Suite 211 Charlotte, NC 28202
Phone: (704) 336-5103 Fax: (704) 336-6894

GWS – UES.APP 01/05

FILE #2123

TYPE APPLCATION: #1063 Wasp

- [X] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A / M)
- [ ] ADDITION - RENOVATION OR GARAGE WITH NO MAJOR CHANGES (X)
- [ ] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
- [ ] COMMERCIAL OR INDUSTRIAL (N) JM.

PERSON FILING APPLICATION:
NAME: Kevin Creighton
ADDRESS: 20510 ISLAND FOREST DR.
CITY: CORNELIUS
STATE: NC ZIP: 28031
PHONE: 704-896-2955
ALTERNATE PHONE:

PROPERTY OWNER: LD
NAME: Same
ADDRESS:
CITY:
STATE: ZIP:
PHONE:
ALTERNATE PHONE:

JOB LOCATION INFORMATION
TAX/PARCEL #: 00117117AB
STREET ADDRESS: 20510 ISLAND FOREST DR.
CITY: CORNELIUS
STATE: NC. ZIP: 28031
SUBDIVISION OR MOBILE HOME PARK NAME:

TOWNSHIP:
- [ ] 0-MECKLENBURG
- [ ] 1-CHARLOTTE
- [ ] 2-DAVIDSON
- [X] 3-CORNELIUS
- [ ] 4-PINEVILLE
- [ ] 5-MATTHEWS
- [ ] 6-HUNTERSVILLE
- [ ] 7-MINT HILL

LOT #: 89 + 90 1985

WATER SUPPLY:
- [X] MUNICIPAL (M)
- [ ] COMMUNITY (C)
- [ ] PRIVATE WELL (P)
- [ ] SHARED WELL (S)
- [ ] OTHER 'SPRINGS' (O)

RESIDENTIAL PROPERTY TYPE:
- [X] HOUSE (H)
- [ ] MODULAR HOME (M)
- [ ] MULTIPLE FAMILY (U)
- [ ] SINGLE MOBILE HOME (S)
- [ ] DOUBLE WIDE (D)
- [ ] OTHER (O)

NUMBER OF BEDROOMS:
NUMBER OF OCCUPANTS:

COMMERCIAL / INDUSTRIAL PROPERTY TYPE:
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:
INDUSTRIAL WASTES? [ ] YES [ ] NO
UNDERGROUND STORAGE TANKS? [ ] YES [ ] NO

ADDITION TYPE ATTACHED TO EXISTING STRUCTURE:
- [ ] BEDROOM
- [ ] BATHROOM
- [ ] KITCHEN
- [ ] DINING ROOM
- [ ] LIVING ROOM
- [ ] DEN
- [ ] GARAGE
- [X] SUNROOM
- [ ] PORCH
- [X] DECK
- [ ] OTHER

ADDITION TYPE DETACHED FROM EXISTING STRUCTURE:
- [ ] DETACHED GARAGE
- [ ] DETACHED GARAGE WITH PLUMBING
- [ ] POOL HOUSE
- [ ] SHOP
- [ ] BARN
- [X] STORAGE SHED
- [ ] DETACHED PORCH / DECK
- [ ] OTHER

*The undersigned, owner, or legal agent for the 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 the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Owner's/Agent's Signature — Date: 6/26/06

*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 approval is granted y this Department.
- This permit is not transferable.

- [ ] ADDITION / RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE
- [ ] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE

O.K. to use existing system for sunroom, deck & storage shed additions

EHS Signature — Date: 7/6/06

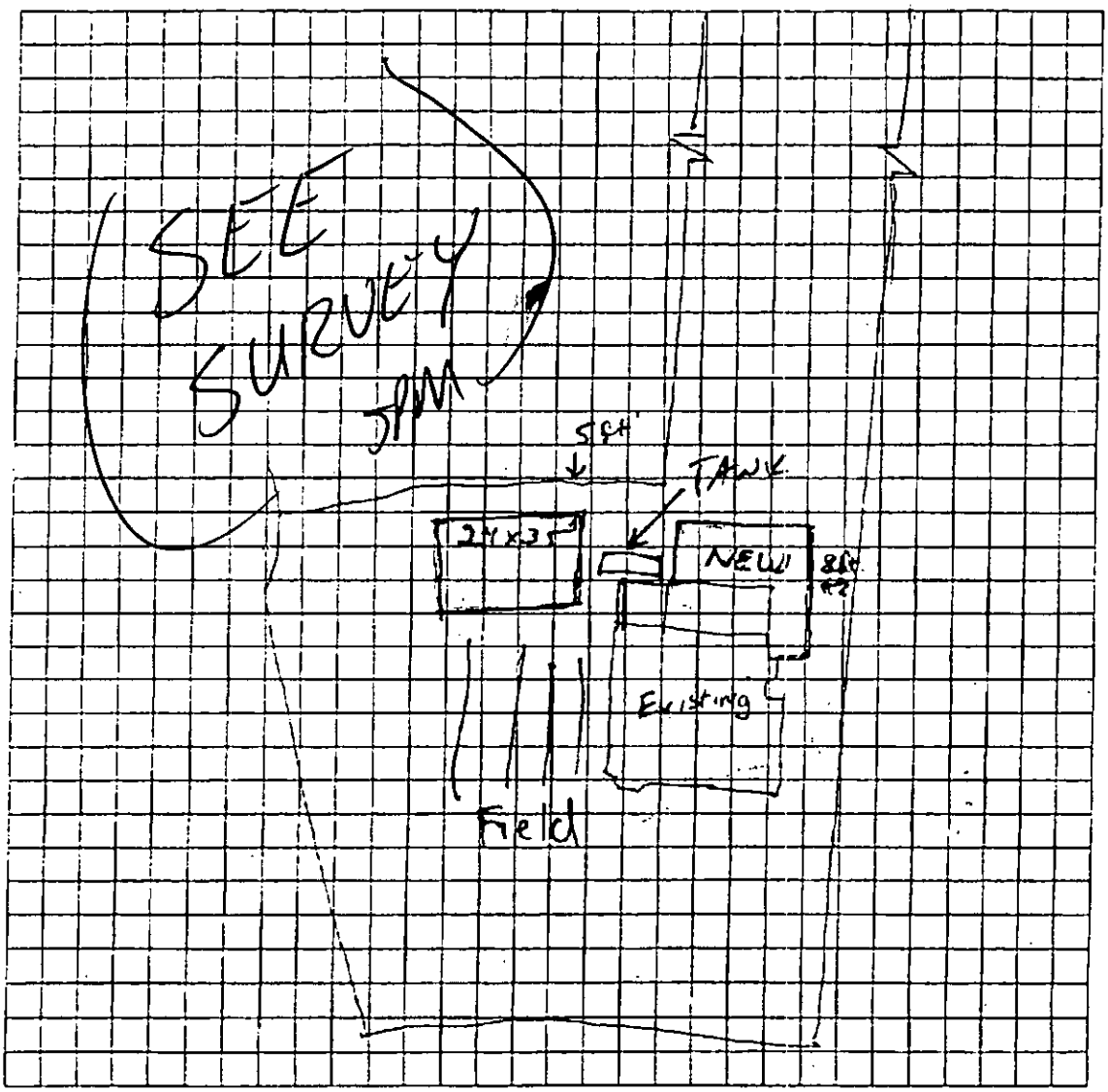
Mecklenburg County
Land Use & Environmental Service Agency
Groundwater & Wastewater Services
700 N. Tryon St., Suite 211
Charlotte, NC 28202
Phone: (704) 336-5103
Fax: (704) 336-5894

File #_____
Date_____

COPY

PROPOSED PLOT PLAN

A map showing existing and proposed property lines and easements with dimensions, the location of the single family residence, non-single family residence, or other facility, and appurtenances, the site for the proposed well, and the location of existing or proposed sewer lines and/or sewage disposal systems, surface water bodies, aboveground or underground storage tanks. Name all roads adjoining the property. If this a repair indicate the type of repair.



Owner/Agent Signature Kim Houghton

Date 6/26/06

LBC 12/15/04

Jun 28 2006 10:25AM LUESA NORTH 704 432 2523 p.2

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	06/28/06	**Amount:**	100.00
Receipt #:	44806	**Tendered:**	100.00
Check / Auth #:	MC 994706	**Returned:**	0.00
Received By:	DAUGHVB		

Account Information

Account #: 200000
Contractor: CREIGHTON KEVIN
Attn:
Address: 20510 ISLAND FOREST DR
Address:
City/State/Zip: CORNELIUS, NC 28031

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	MH Exc/Add/Repl w/c System Mod CREIGHTON, KEVIN/20510 ISLAND FOREST DR		1	100.00	100.00

MECK CTY LOUISA N SATELI
18335 OLD STATESVILLE RD
CORNELIUS, NC 28078

JUN 28, 2006 12:37PM

TERM : 1
MERCH: 000158007170

REF #: 002
ACT #: 5424180151126825
EXP : 05/09
CARD : MASTERCARD
INVOICE #: 187504

SALE: $ 100.00

RETR REF#: 617915002438
APPROVAL CODE: 994706

I AGREE TO PAY ABOVE
TOTAL AMOUNT ACCORDING
TO CARD ISSUER AGREEMENT

X _____
SIGNATURE

CREIGHTON/LISA M

MERCHANT COPY

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance

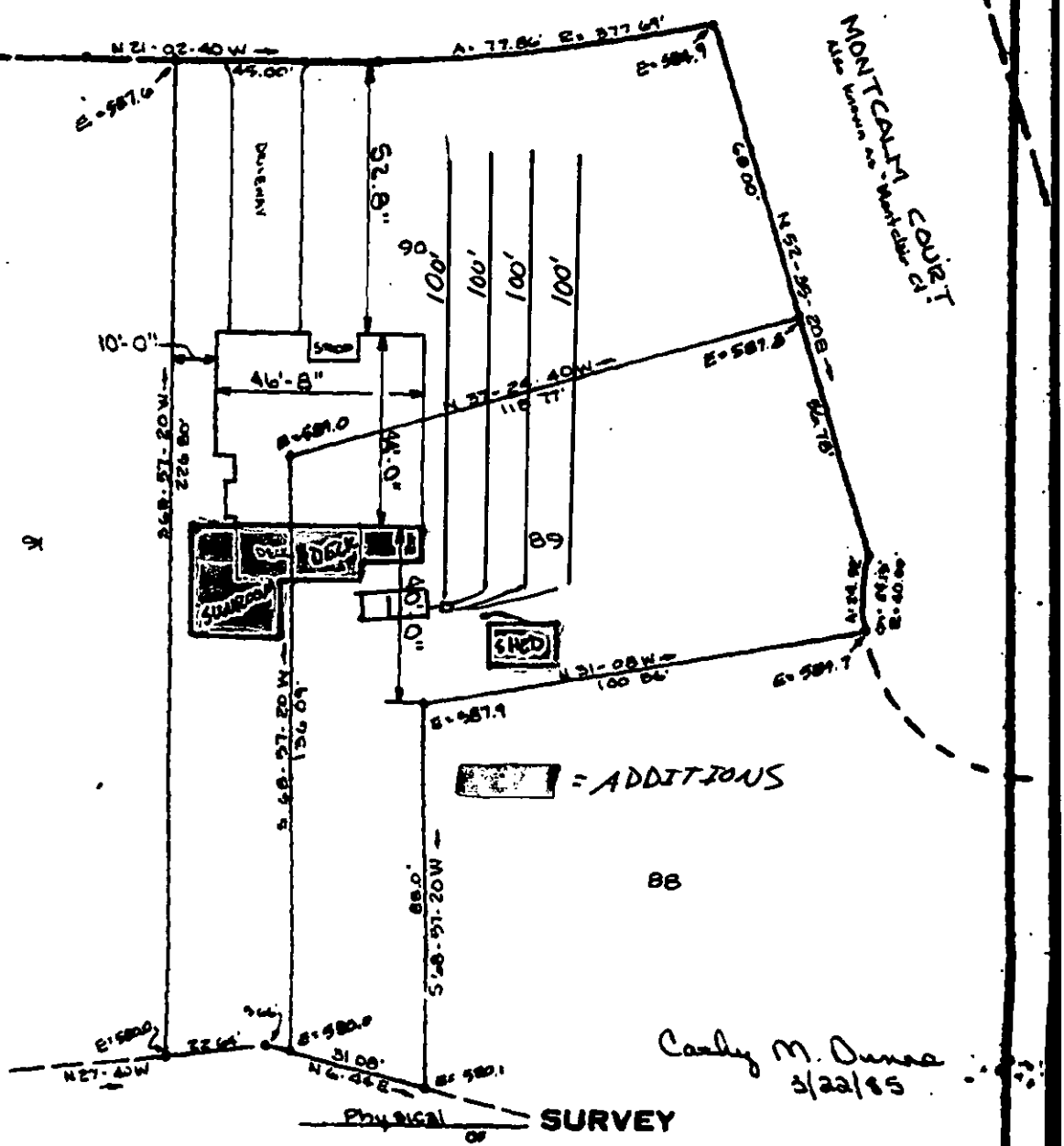
SIR # 21923

THIS IS TO CERTIFY THAT ON THE 14th DAY OF Feb 19 85 I SURVEYED THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE TITLE LINES AND THE WALLS OF THE BUILDINGS IF ANY ARE SHOWN HEREON.

SIGNED Fred Roger Webber
REGISTERED SURVEYOR

R & W ENGINEERING & SURVEYING
GASTONIA, N.C.

NORTH CAROLINA
REGISTERED
L.L.S.
L-1641
LAND SURVEYOR
FRED ROGER WEBBER



Carolyn M. Dunn
3/22/85

Physical SURVEY

Lot # 89 - 20 ~ Island Forest ~ Sheet 1 of 2
SCALE 1" = 30' Lemley Township ~ Mecklenburg Co. ~ N.C.
THIS PROPERTY OF GARY R. DUNN AND WIFE, CATHY M. DUNN

MAP RECORDED IN BOOK AT PAGE DEED RECORDED IN BOOK PAGE

SURVEY MADE USING EXISTING EVIDENCE. EXISTING IRON PINS AT ALL CORNERS UNLESS OTHERWISE INDICATED

BOSSARD-PARRELL, INC., CHARLOTTE 1984

PROPOSED PLOT PLAN

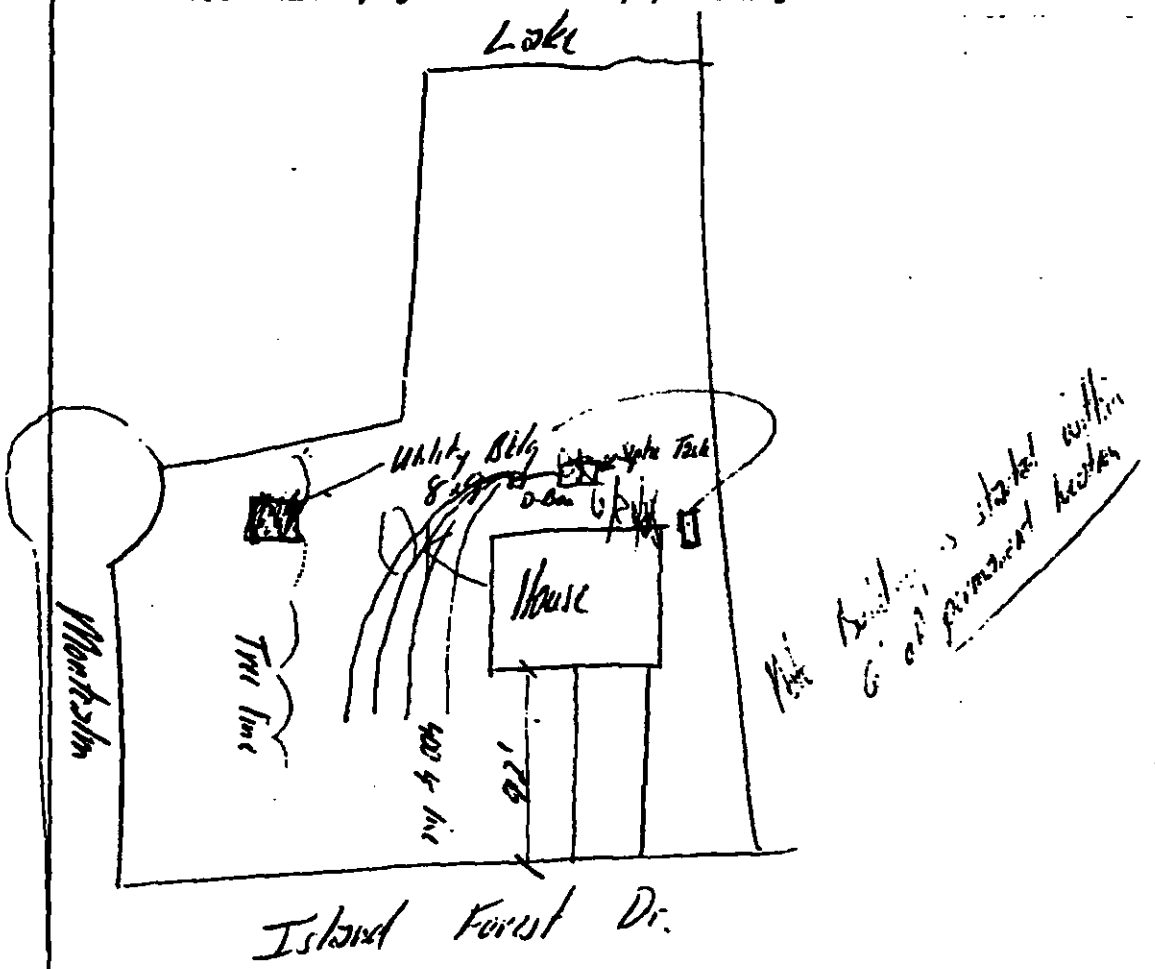
MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 21923

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: _____

Date: 5-19-88

C of A (s) No. 21923

Date Issued 9-17-85 Serial 7877 T. C. No. 001-111-5354 L CRT

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 DUNNE (LAST) GARY (FIRST) (MIDDLE)

Location of Property 20510 ISLAND FOREST DR

Application Number 21923 Permit Number 21923

Inspection Date:

Liquid Capacity of Tank 1500 Tank Material PCC

Total Length of Drain Tile 400' Number of Lines 4

Depth of Filter Material 12" Cover Depth 2'

Water Supply Source Comm well Distance from Water Source 100'+

Excavation Inspected 9-17-85 (DATE) Tank Inspected 9-17-85 (DATE)

Nitrification Field Inspected 9-17-85 (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 1935 150 GAL ST CON 12" SEP 12" SECT

Kelly Randall
Environmental Health Specialist

EHD-5-76

Environmental Health Department's Copy

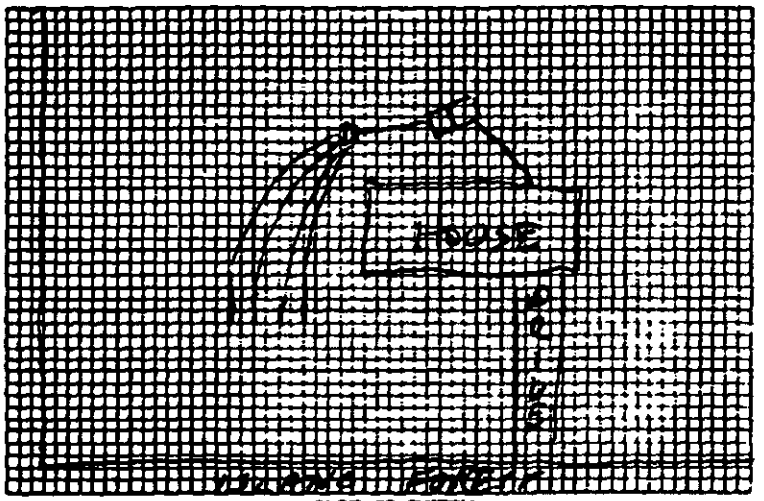
Date Issued 7-16-85 Serial No. 08329 ICAR(S) Permit No. 21923

T. C. No. 001-11153-5

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 21923, dated 3-15-85 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 8/16/85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500

Tank Construction PIC

Absorption and/or Nitrification Lines.

Total Line Length 400'

Number of Lines 4x100

Distance from House 5'

Distance from Property Line 10' comm well

Distance from Well 100'

NAME OF OWNER DUNNE, GARY

LOCATION OF PROPERTY 20510 ISLAND FOREST DR

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 line x 100' long x 3' wide x 12" stone

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 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-5-78

Environmental Health Department's Copy

Date Received 3-15-95

Please send results to:
Gary Dunne
4804 McAlpine Ln.
Charlotte, NC. 28212
568-7975

RECEIVED

Application No. 2923

T. C. No. 001-111-53.54

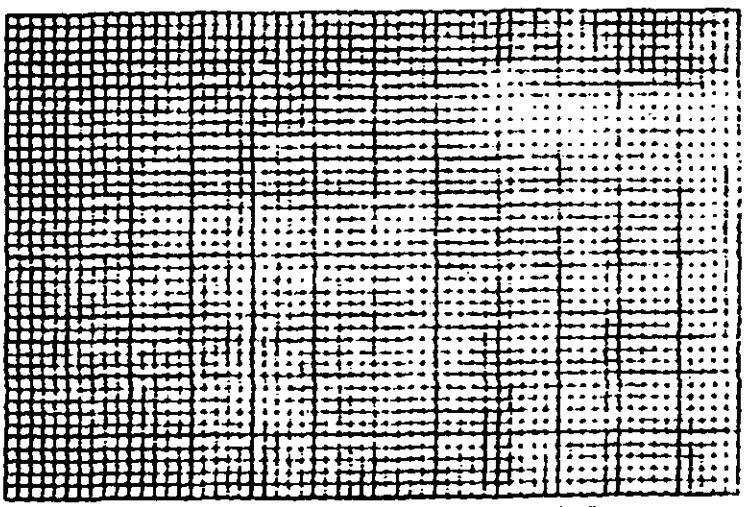
Map Date

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 3

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 Dunne Gary R
(LAST) (FIRST) (MIDDLE)

14) ADDRESS OF OWNER 4804 McAlpine Ln. Charlotte, N.C. 28210

15) PHONE NO. Home 568-7975 Office 372-8411

16) LOCATION OF SYSTEM 20510 E Island Point Dr.
(STREET OR COUNTY ROAD)

17) SUBDIVISION Island Point Lot No. 89 & 90 (Combined) Block No. ___

Map Book No. ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ___ NO DATE RUN 2-23-95

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.

3-15-95
DATE OF APPLICATION

Donald M. Thompson
By: Gary M. Dunne
OWNER
Gary Dunne

EHD-5-76

SIR # 21923

THIS IS TO CERTIFY THAT ON THE 14th DAY OF Feb 19 85 I SURVEYED THE PROPERTY SHOWN ON THIS PLAT, AND THAT THE TITLE LINES AND THE WALLS OF THE BUILDINGS IF ANY ARE SHOWN HEREON

SIGNED Fred Rogers Watson

REGISTERED SURVEYOR

R & W ENGINEERING & SURVEYING INC.
GASTONIA, N.C.

NORTH CAROLINA
L-1641
FRED ROGERS WATSON

ISLAND FOREST DRIVE

N 21-22-40W

A= 778.26' L= 312.69'

E=5867.9

E=5867.9

15.0'

ASPHALT

52.8'

90

E=5867.9

CURVE

N 37-24-40W

118.77'

10'-0"

5.0

46'-8"

E=5880

44'-0"

E=5875

N 37-24-40W

118.77'

368.57-22.24 M

91

89

DECK

40'-0"

N 68-27-20W

130.00'

E=5871

E=5871

E=5871

88.0'

N 22-33-20E

88

Date Issued 3-25-85

Serial No. 8317

SIR No. 21923

T. C. No. 001-111-53,54

Map Date L CRT

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 Thompson, (LAST) Donald (FIRST) H. (MIDDLE)

ADDRESS OF OWNER 2555 Redwood Dr., Dalzell, SC ZIP 29040

LOCATION OF LOT 20510 ~~Montcalm Court~~ Island Forest Dr. (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. 89 & 90 (Combined) 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 21923. 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.

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Received 2-7-85

RECEIVED
FEB 7 1985
ENVIRONMENTAL HEALTH

ICAR(S) Application No. 21924 3

T. C. No. 001 11154

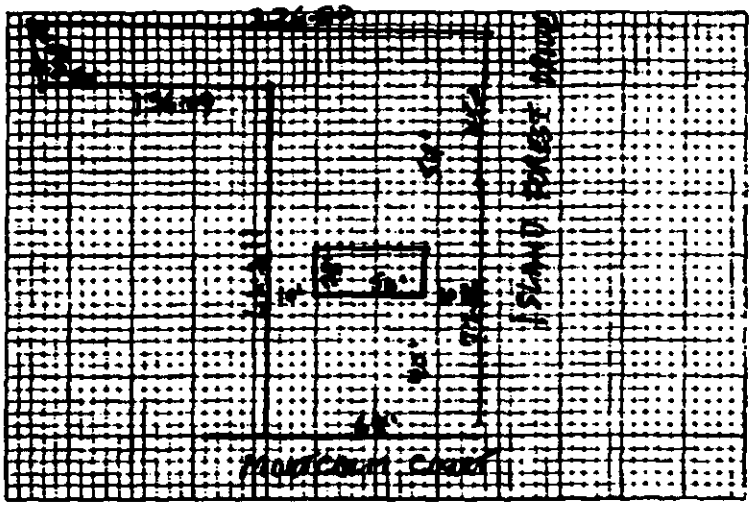
Map Date

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 3
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 THOMPSON, DONALD
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 2535 REDWOOD DR - DALLAS, N.C. 28034

15) PHONE NO. Home % P.O. BOX 497 DALLAS, N.C. 28034 Office 372-8911

16) LOCATION OF SYSTEM 20612 MONTCALM COURT
STREET OR COUNTY ROAD

17) SUBDIVISION ISLAND FOREST Lot No. 90 Block No. ___

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.

2-7-85
DATE OF APPLICATION

Donald Thompson
By: Phillip G. Helms
OWNER

END-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Received 2-7-85

RECEIVED
FEB 7 1985
ENVIRONMENTAL HEALTH

(CAR(S) Application No. 21923

T. C. No. 001-111-53

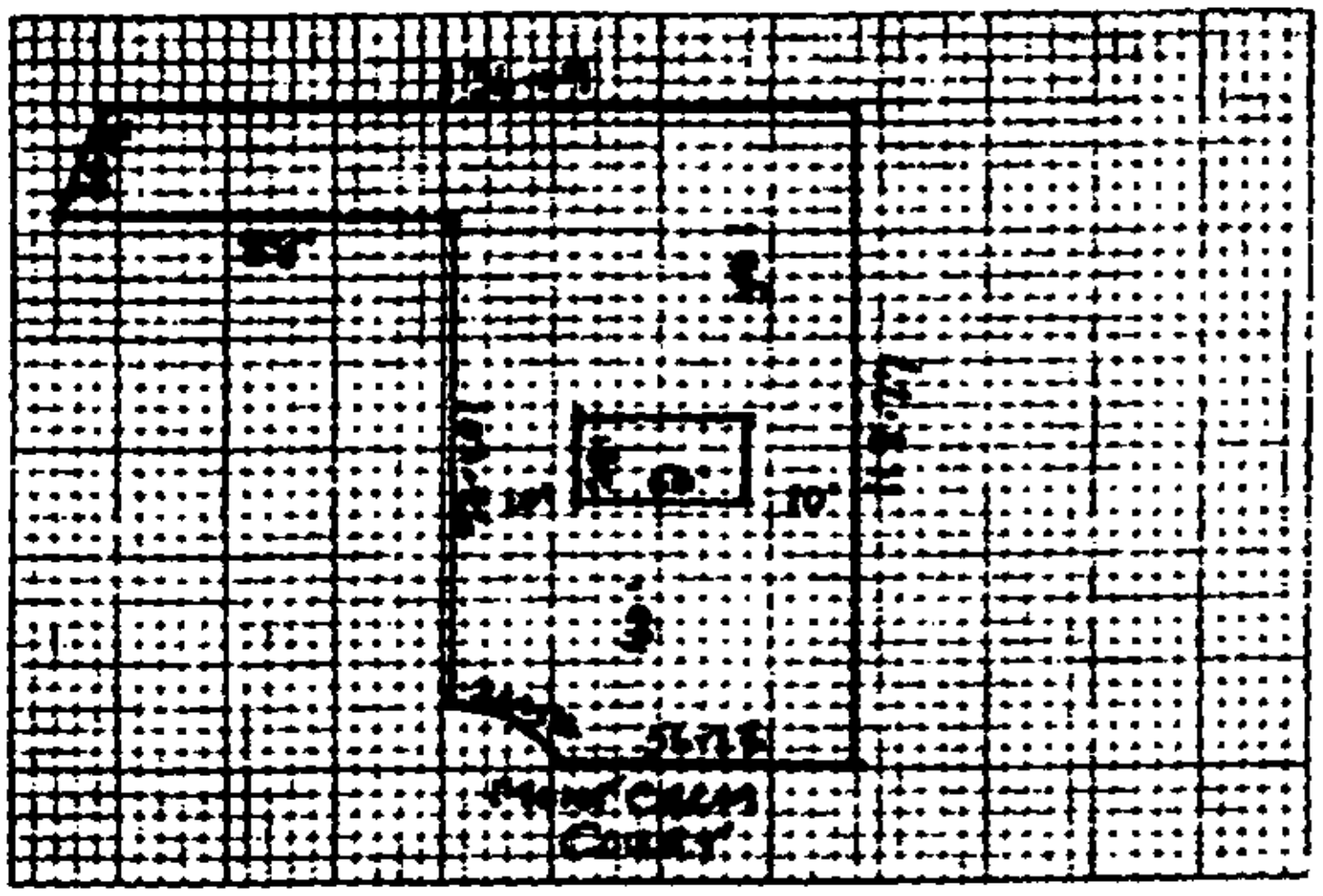
Map Date L

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)

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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 3
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 THOMPSON, DONALD
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 2555 REDWOOD DR. DALZELL, S.C. 29040
% P.O. BOX 497

15) PHONE NO. Home DALLAS, N.C. 28034 Office 372-8411

16) LOCATION OF SYSTEM 20510 MONTCALM COURT
STREET OR COUNTY ROAD

17) SUBDIVISION ISLAND FOREST Lot No 89 Block No ___

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.

2-7-85
DATE OF APPLICATION

Donald Thompson
By: Phillip G. Helms
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

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

SIR. NO. 21924 3
T.C. NO. 001-111-5 3
DATE: 3-1-85

Donald Thompson
2555 Redwood Drive
Dalzell, S. C. 29040

RE: Property located at 20612 Montcalm Court

Dear Mr. Thompson:

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

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21044 3

T.C. NO. 011-111-563

(Ground Absorption Sewage Disposal)

OWNER: Donald T. Simmons PLAT NO: Lot 16
ADDRESS: 2525 Briggs Ln LOT SIZE: Approx 2 AC
LOCATION OF SITE: Gilgal Church Rd 2 miles Mecklenburg Line

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS U	S PS U	S PS U Rolling Slopes	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Rate 2-1 Clay)	S PS U clay	S PS U clay	S PS U clay	S PS U
3. SOIL STRUCTURE (12-36 inches)	S PS U Blocky	S PS U Blocky	S PS U Blocky	S PS U
4. SOIL DEPTH (inches)	S PS U 24-36"	S PS U 24-36"	S PS U 24-36"	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S PS U	S PS U	S PS U 1-36"	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S PS U Moderate	S PS U Moderate	S PS U Eroded Areas Moderate	S PS U
7. OTHER (Specify)	S PS U Erosion	S PS U	S PS U	S PS U
8. SOIL GROUP	IIA		IIA	
9. SITE CLASSIFICATION	Suitable	Suitable	Unsuitable	
10. SOIL SERIES				

S - Suitable PS - Provisionally Suitable U - Unsuitable

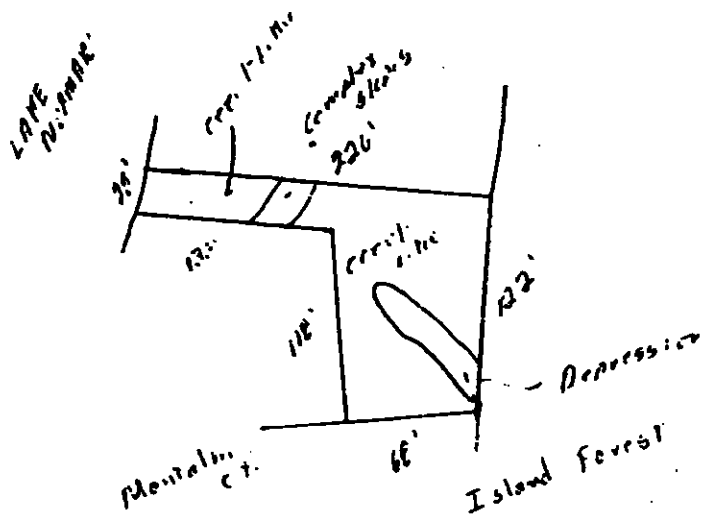
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: _____

Described by: William H. Wallace
Title: Soil Scientist

Date: 2-24-05

1-4


LANE
Mountain
Conc. P.L. Mk
Concrete slabs
326'
33'
132'
Concrete slab
118'
132'
Depression
Mountain ct.
66'
Island Forest

Date Received 2-7-85

MECK CO[illegible]Y DEPARTMENT OF
RECEIVED
1[illegible]85
ENVIRONMENTAL HEALTH

SIR No. 21923
T. C. No. 001-111-53
Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER THOMPSON, DONALD (LAST, FIRST, MIDDLE)

2) ADDRESS OF OWNER 2555 REDWOOD DR. DALLAS, NC ZIP 28040
& P.O. Box 497

3) PHONE NO. Home DALLAS, N.C. 28034 Office 372-8411

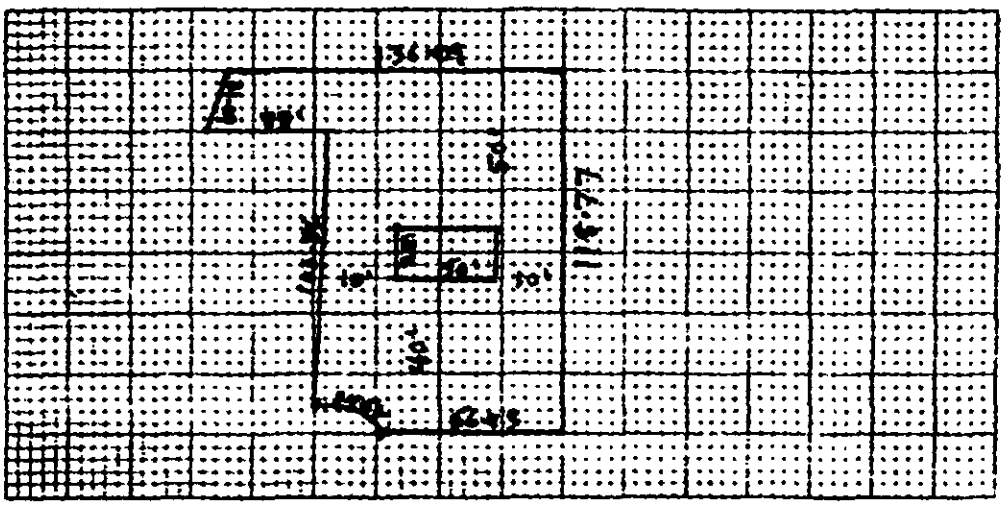
4) LOCATION OF PROPERTY 20510 MONTCALM COURT (STREET OR COUNTY ROAD)

5) SUBDIVISION ISLAND FOREST LOT NO 89 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

Donald Thompson
By: Phillip S. Nelms
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

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

SIR. NO. 21923
T.C. NO. 001-111-53
DATE: 3-1-85

Donald Thompson
2955 Redwood Drive
Dalzell, S. C. 29040

RE: Property located at 20510 Montcalm Court

Dear Mr. Thompson:

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

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21223

T.C. NO. 201-11-53

(Ground Absorption Sewage Disposal)

OWNER: Donald J. Simpson
ADDRESS: 2525 Rivercliff Dr.
Fort Mill S.C. 29715
PLAT NO: 4-159
LOT SIZE: Approx. 1 acre
LOCATION OF SITE: 2658 Mentalon Ct.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) 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) U	S (PS) U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) U	S (PS) U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) U	S PS (U)	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U	S PS (U)	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) 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				
9. SITE CLASSIFICATION				
10. SOIL SERIES				

S - Suitable PS - Provisionally Suitable U - Unsuitable

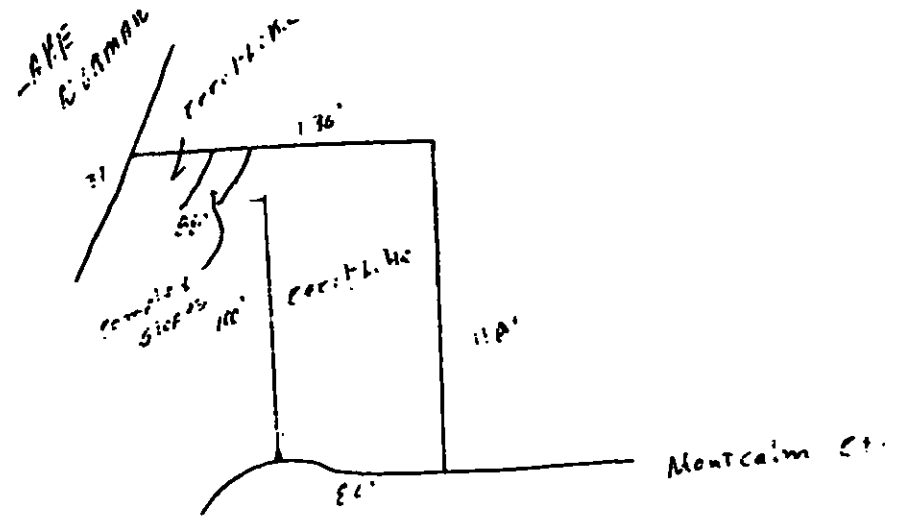
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: _____

Described by: William E. Martin
Title: Soil Scientist

Date: 7/20/83

14


A.V.F
Canada
136'
111'
Montcalm St.