Date Received July 24 1978 Apt. No. (S) _____ Application No. (W) 14364

T. C. No. 227-084-11

Map Date 6/6/78

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Lookabill, Charles A. Jr.
LAST FIRST MIDDLE

ADDRESS OF OWNER PO Box 1247 Charlotte, N. C. ZIP 28201

PHONE NO. Home _____ Office 333-3781

LOCATION OF PROPERTY High Ridge Rd.
STREET OR COUNTY ROAD

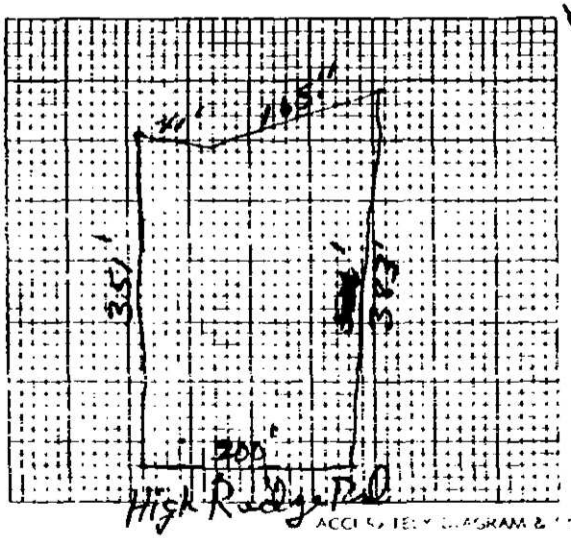
WELL CONTRACTOR _____ LICENSE NO _____

Application is hereby made to the Mecklenburg County Department of Environmental Health for a permit to drill a water well on the hereinabove described lot to be used as a source of individual, semi public, or public water supply.

July 24, 1978
DATE OF APPLICATION

OWNER

Remark



ACCURATELY DIAGRAM & DIMENSION LOT

Application approved and permit hereby granted

Permit No: _____

ENVIRONMENTALIST

EHD 5 76

Environmental Health Department Copy

Date Received July 24, 1978

APT No. 14364

T. C. No. 227-084-11

Map Date 6/6/78

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Lookabill (LAST) Charles (FIRST) A Jr. (MIDDLE)

2) ADDRESS OF OWNER P.O. Box 1247 Charlotte, N. C. ZIP 28201

3) PHONE NO. Home Office 333-3781

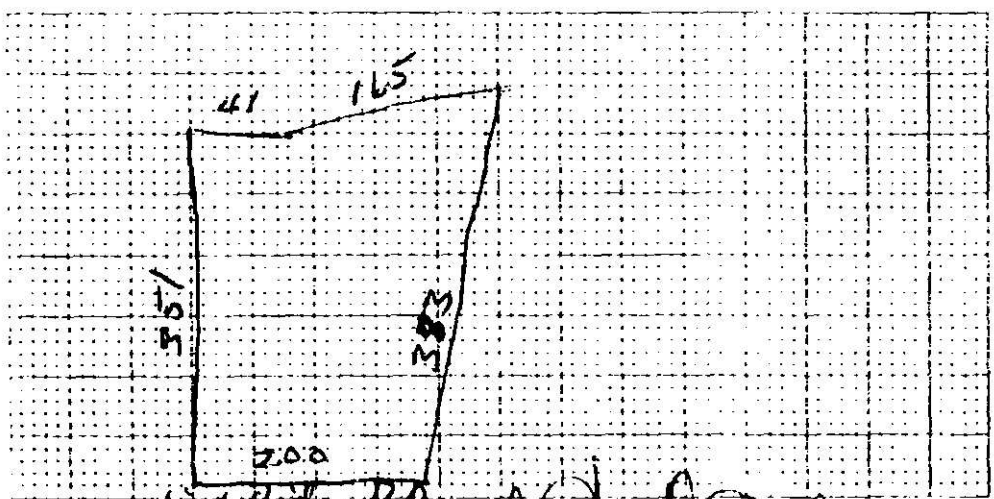
4) LOCATION OF PROPERTY High Ridge Rd. (STREET OR COUNTY ROAD)

5) SUBDIVISION Providence Plantations LOT NO 2 BLOCK NO 5

MAP BOOK NO 13 PAGE NO 251

6) DEED REFERENCE DEED BOOK 3247 PAGE NO 327

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation and observation of the property hereinafter described for the purpose of determining if it is suitable for the installation of an individual septic tank, a subsurface sewage treatment system with subsurface soil absorption, or spray discharge.



7) ACCURATELY DIAGRAM & DIMENSION LOT

OWNER

ENG. 2-76

Environmental Health Department's Copy

Apl. 14364

NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX H
SITE EVALUATION

(Ground Absorption Sewage Disposal)

OWNER: [illegible] DATE REQUESTED: 24 July 75
ADDRESS: [illegible] PLAT NO.:
COUNTY: [illegible] LOT SIZE: [illegible]
LOCATION OF SITE: [illegible] 221 C84-4

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS 5-8% U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S (PS) clay U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S (PS) blocky U	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	S (PS) 24" U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Imprevious Strata, Rock)	(S) none noted PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) Fair surface PS [illegible] U	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) moderate U	S PS U	S PS U	S PS U
8. OTHER (Specify)	(S) area PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	✓ provisionally suitable			
SOIL SERIES	Cecil			

S - Suitable PS - Provisionally Suitable U - Unsuitable

* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

Recommendations/Comments: _____

Described By: [illegible]

Title: Environmentalist Date: 25 July 75

DHS Form 2601 (2/77)
Sanitation

✓

Serial No. 2092

PTR No. 14364

Date Issued July 27, 1978

T C. No. 227-084-11

Map Date 6/6/78

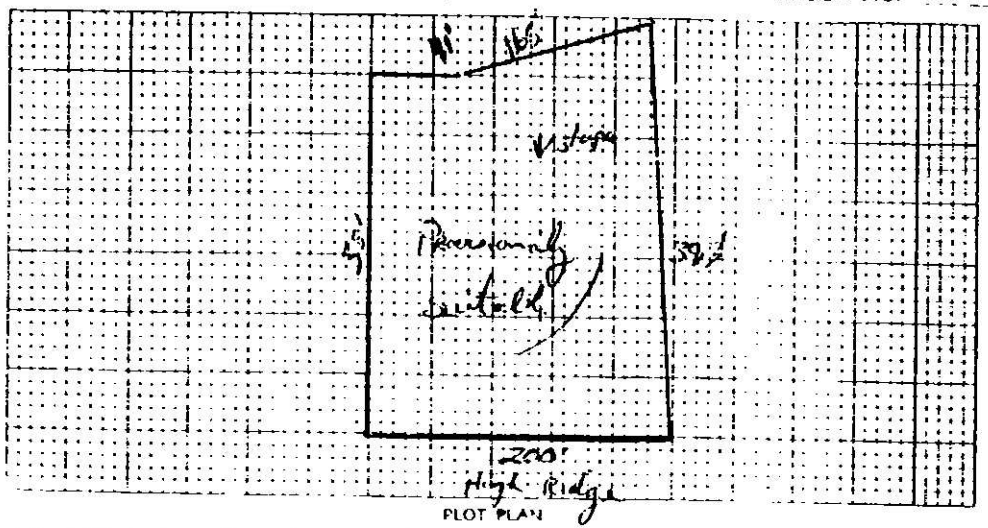
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Lookabill, (LAST) Charles (FIRST) A. (MIDDLE) Jr.

ADDRESS OF OWNER P.O. Box 1247, Charlotte, N.C. ZIP 28201

LOCATION OF PROPERTY High Ridge Road (STREET OR COUNTY ROAD)

SUBDIVISION Providence Plantations LOT NO 2 BLOCK NO. 5



PLOT PLAN

The [illegible] Mecklenburg County Department of Environmental Health. The said soil profile was conducted on the date noted. The results indicate the following:

The general soil rate determined by the investigator is **provisionally suitable** for the said lot is approved for the installation of an individual septic tank sewage treatment system with subsurface, soil absorption effluent discharge subject to the following terms and conditions:

1. [illegible] Mecklenburg County Department [illegible] wastewater treatment system [illegible]
2. [illegible] the Mecklenburg [illegible] above, and on [illegible]
3. [illegible] system installation [illegible]
4. [illegible] on the lot which, [illegible] acceptable for [illegible]

The [illegible] and regulations of the Mecklenburg County Board of Health, the Health Department of Mecklenburg County, the North Carolina Department of Human Resources, Division of Health Services and the Mecklenburg County Board of Health. This approval 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.

DATE 7/26/78 Environmentalist

[illegible] to Health Director or Authorized Section Head

Environmental Health Department Copy

✓ Date Received July 24, 1978 SEE INSTRUCTIONS ON BACK

ICAR(S) Application No. 14364

T. C. No. 227-084-11

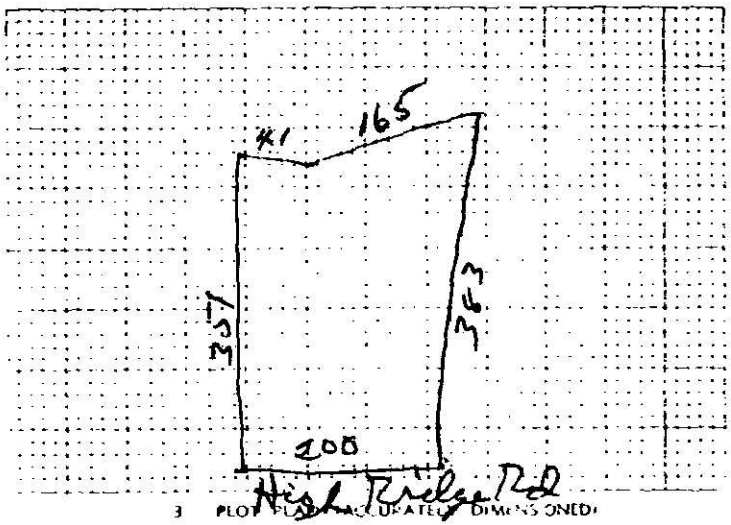
Map Date 6/6/78

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 ___ No
Employees ___
6) Well or Public Water ✓ Yes ___ No
7) Septic Tank ✓ Yes ___ No
8) Distribution Box ✓ Yes ___ No
9) Water Supply
A) Individual Well ✓
B) Community System ___
C) Community System
1) Well Source ___
2) Governmental Source ___
Sewage System
A) Public Sewer within 200 feet ___ Yes ✓ No
B) House connection within 200 feet of sewer ___ Yes ✓ No
C) EHA Septic Tank No. ___
D) EHA Soil Test No. ___

13) NAME OF OWNER Lookabill, Charles A. Jr. (LAST, FIRST, MIDDLE)

14) ADDRESS OF OWNER P.O.Box 1247 Charlotte, N. C.

15) PHONE NO Home ___ Office 333-3731

16) LOCATION OF SYSTEM High Ridge Rd (STREET OR COUNTY ROAD)

17) SUBDIVISION Providence Plantations Unit No 2 Block No 5

Map Book No 13 Page No 253

18) DEED REFERENCE - DEED BOOK 3292 AT PAGE 322

19) HAS A SOIL TEST BEEN MADE ___ YES ___ NO LATE RUN

20) PERMIT MEETS ___ Instruction

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 ___

6/6/78

Environmental Health Department's Copy

Date Issued October 31, 1978 **Serial No. 2377**

LA No. 14364

T. C. No. 227-084-11

Map Date 6-6-78

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

IMPROVEMENT PERMIT

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

NAME OF OWNER Lookabill (LAST) Charles (FIRST) A., Jr. (MIDDLE)

ADDRESS OF OWNER P.O. Box 1247, Charlotte, NC ZIP

LOCATION OF LOT High Ridge Road (STREET OR COUNTY ROAD)

SUBDIVISION Providence Plantation LOT NO. 2 BLOCK NO. 5

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 14364. 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

Stephen J. Wood
Environmentalist

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

EHC-5-76

Environmental Health Department's Copy

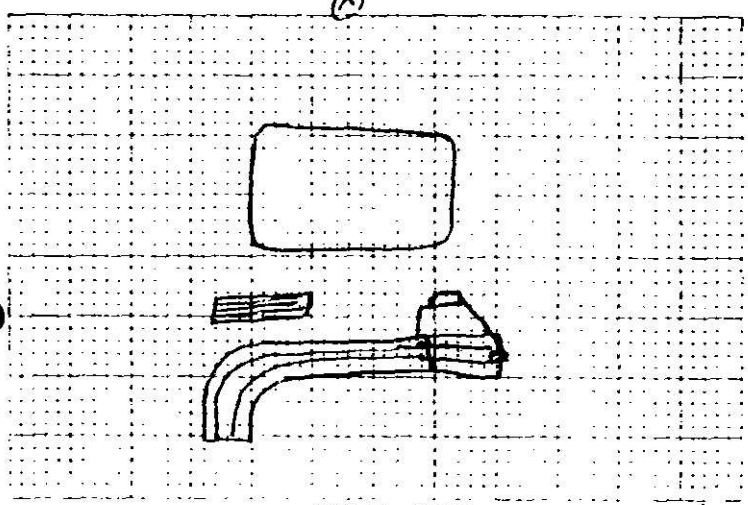
Date Issued 19 Apr. 79 **Serial No. 2605** ICAR(S) Permit No. 14364

T C No. 227-084-11

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 14364, dated July 24, 78 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 19 May 79, after which date this permit shall be null and void.



PLOT PLAN SYSTEM

Permitted Use, Type P.S.

Liquid Capacity of Tank 1500 gal

Type Construction P.C. Conc.

Absorption Area - Number of Lines in Satisfaction Line

Total Line Length 660' & 167'

Number of Lines 5 & 4

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100' +

NAME OF OWNER Charles A. Goodbaffill

LOCATION OF PROPERTY High Ridge Rd. lot 2

The system shown on the plot plan is a requirement as set forth in the Regulations of the Mecklenburg County Health Department and is effective for a period of two years from the date of the granting of this permit. A certificate of approval must be obtained from the Environmental Health Division before any system can be covered up or otherwise rendered inspectable. It may be used

Comments

(1.5' x 132' x 17" stone)
(12' x 42' x 17" stone)

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.

Division or Unit Head

Environmentalist Steve Wood

* 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

Date Issued 24 April 79 Serial No. 2531 C of A (s) No. 14364 /

T C No. 222-084-11

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 Lookabill (LAST) Charles (FIRST) A. (MIDDLE)

Location of Property 3832 High Ridge Rd lot 2

Application Number 14364 Permit Number 14364

Inspection Date:

Liquid Capacity of Tank 1500 gal Tank Material P.C. Conc.

Total Length of Drain Tile 660' & 167' Number of Lines 5 & 4

Depth of Filter Material 17" Cover Depth 15"

Water Supply Source well Distance from Water Source 100'

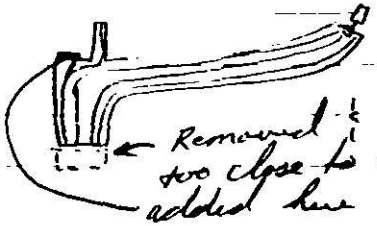
Excavation Inspected — Tank Inspected 19 Apr. (DATE)

Nitrification Field Inspected 24 Apr. (DATE)

Washing Machine Line Inspected, If Applicable 24 Apr (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 at 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 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 Steve Wood

EHO-5-76

Environmental Health Department's Copy