Date Received 8-1-84

MECK CO DEV DEPARTMENT OF
RECEIVED

SIR No. 20703 /
PO
T. C. No 231-111-04
Map Date 8/83

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Providence Woods Inc.
(LAST FIRST MIDDLE)
2) ADDRESS OF OWNER 1740 E. Independence Blvd. Charlotte NC 28205
(ZIP)
3) PHONE NO. Home — Office 704-372-0565
4) LOCATION OF PROPERTY Oak Berry Court
(STREET OR COUNTY ROAD)
5) SUBDIVISION Providence Woods LOT NO. 29 BLOCK NO. V
MAP BOOK NO. — PAGE NO. —
6) DEED REFERENCE DEED BOOK 4571 PAGE NO 693-694

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

Please see attached map

7) ACCURATELY DIAGRAM & DIMENSION LOT

J. P. Mecimore
OWNER Agent

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 20703

T.C. NO. PC 23+11+04

(Ground Absorption Sewage Disposal)

OWNER: [illegible] PLAT NO: [illegible]
ADDRESS: [illegible] LOT SIZE: [illegible]
[illegible]
LOCATION OF SITE: Cakterry Court

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S / PS / U 2-8%	S / PS / U 2-8%	S / PS / U complex slopes	S / PS / U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S / PS clay / U	S / PS clay / U	S / PS clay / U	S / PS / U
3. SOIL STRUCTURE (12-36 inches)	S / PS Blocky / U	S / PS Blocky / U	S / PS Blocky / U	S / PS / U
4. SOIL DEPTH (inches)	S / PS 36-38" / U	S / PS 36-38" / U	S / PS <36" / U	S / PS / U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S / PS >36" / U	S / PS >36" / U	S / PS <36" to [illegible] / U	S / PS / U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S / PS >36" to ground water / U	S / PS Depression collects runoff / U	S / PS Eroded areas channel runoff / U	S / PS / U
7. OTHER (Specify)	S / PS see Note / U	S / PS / U	S / PS / U	S / PS / U
8. SOIL GROUP	[illegible]	[illegible]	[illegible]	
9. SITE CLASSIFICATION	provisionally suitable	unsuitable	unsuitable	
10. SOIL SERIES	[illegible]	[illegible]	complex slopes	

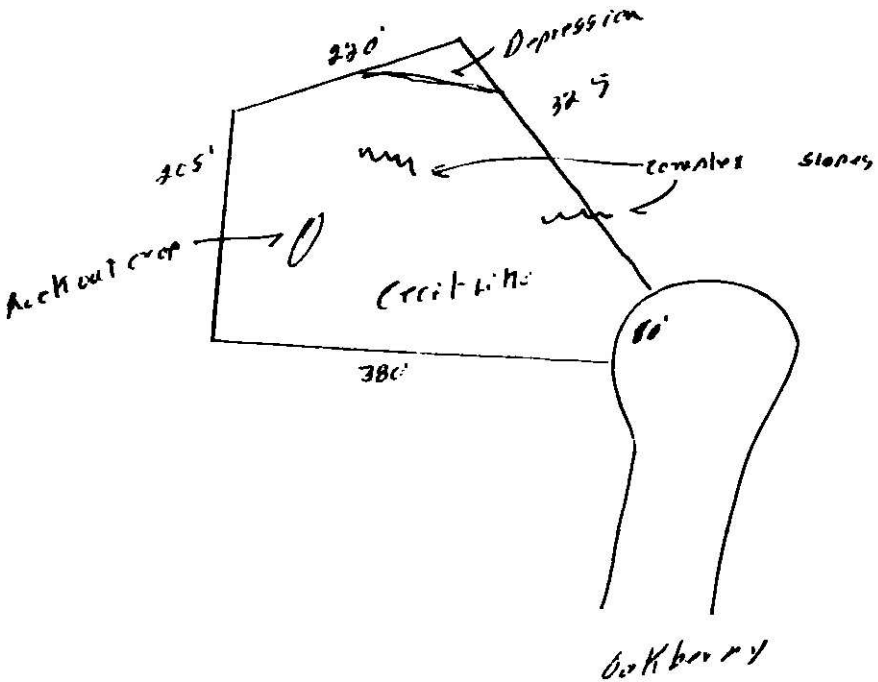
S - Suitable PS - Provisionally Suitable U - Unsuitable

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

Recommendations/Comments: Rock cut crop located in area

Described by: William [illegible]
Title: Soil Scientist

Date: 6-4-84



270'
Depression
325
205'
complex slopes
Rock out crop
Cecil Lake
80'
380'
Oakberry

Serial No. 5674

SIR No. 20703

Date Issued 6-4-84

T C. No. PO 231-111-04

Map Date

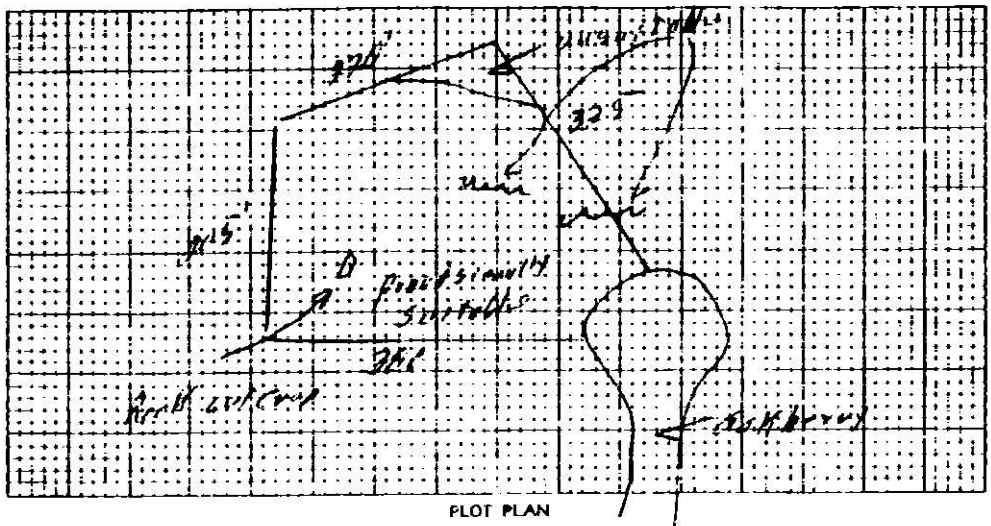
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Providence Woods, Inc.
(LAST) (FIRST) (MIDDLE)

ADDRESS OF OWNER 1740 E. Indepencence Blvd., Charlotte, NC ZIP 28205

LOCATION OF PROPERTY Oakberry Court
(STREET OR COUNTY ROAD)

SUBDIVISION Providence Woods LOT NO 29 BLOCK NO 5



PLOT PLAN

This is to certify that a soil investigation and onsite 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. PROVISIONALLY SUITABLE
The permeability rate determined by the investigation was 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 plan for the installation of the wastewater treatment system must be approved by the Mecklenburg County Department of Environmental Health prior to the installation of the wastewater treatment system on this lot.
2. The size of the septic tank and wastewater treatment system which will be required by the Mecklenburg County Department of Environmental Health is based on the percolation rate obtained above, and on the size of the [illegible] bedrooms indicated thereon.
3. This approval is void unless the [illegible] is acceptable for system installation on the above lot.
4. This approval is granted only for the proposed [illegible] which is determined in the [illegible] in the opinion of the Mecklenburg County Department of Environmental Health to be the area indicated as acceptable for system installation. Any unsuitable [illegible] or construction of [illegible] of the 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 Service 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.

William M. Martin
Soil Scientist

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

EHD-S-76

Environmental Health Department's Copy

PROPOSED PLOT PLAN

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

FILE: 20703

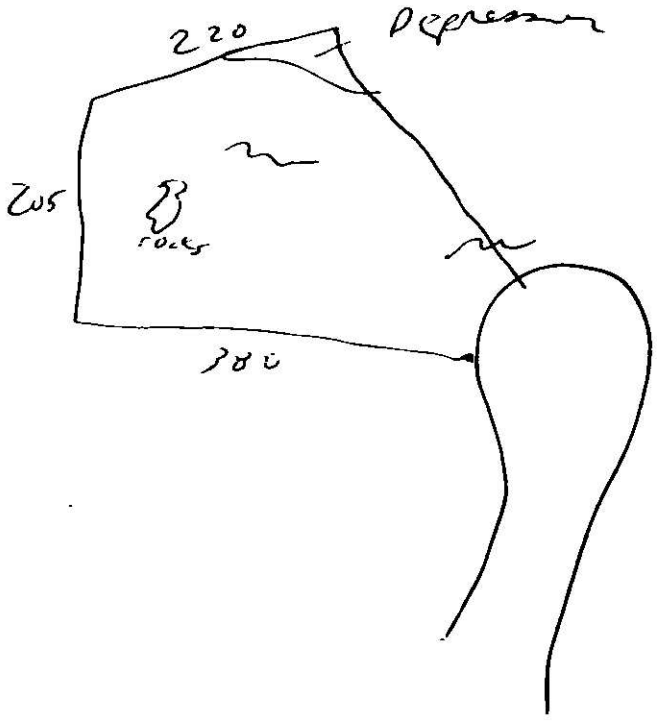
TC: _____

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: _____


220
Depression
205
rocks
380

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

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

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

MECK COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH
RECEIVED
SEP 19 1986
ENVIRONMENTAL HEALTH

(OFFICE USE ONLY)
FILE: 20703
TC:
SERIAL: № 11399

☒ L ☐ CRT

JOB LOCATION

① ADDRESS: 4517 (STREET NO) (STREET) ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.: 231-111-46
⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: (FIRST) (MIDDLE) (LAST)
⑨ MAILING ADDRESS:
⑩ CITY: ⑪ STATE: ⑫ ZIP:
⑬ PHONE: (WORK) ⑭ (HOME)

REQUEST

This request is for a(n):

⑮ ☒ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☐ Other (specify)

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? 8 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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed:

Date:

IMPROVEMENT PERMIT

The undersigned an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, 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 permit is issued by this Department

. . This permit is not transferable, and shall become null and void 36 months from the date of issuance.

Environmentalist — Date: 9-23-86

Director or Authorized Section Head — Date: 9/23/86

*This permit must be signed by the Director of Environmental Health or an authorized section head in order to be valid.

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

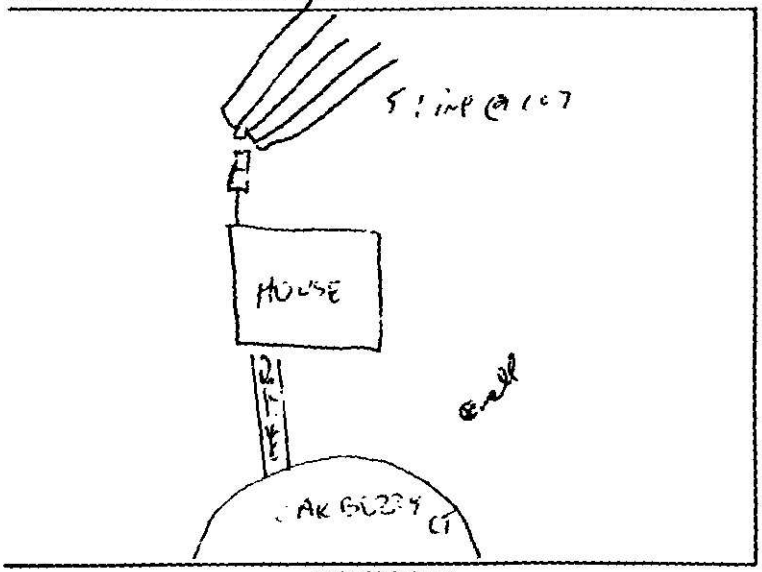
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 20703 DATE: 3-10-97

TC: 231 11146 pd

SERIAL № 10658

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 the application dated 2-18-97. All work shall be completed on or before 4-10-97, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Department of Environmental Health before any system can be covered up or placed into service. 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank _____ gallons

Tank Construction PCC

Absorption and or Nitrification Lines:

Trench Width 3 feet

Total Line Length 535 feet

Number of Lines 5

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well 50 feet

NAME OF OWNER FLYNN, AVIS GENE

LOCATION OF PROPERTY 4517 OAKGLEN CT

Comments: 5 lines @ 107 each x 3 wide x 12" rock

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.

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER OR AGENTS COPY

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 20703 DATE: 3-13 87

TC: 231-111-46 ☑ L ☑ CRT

SERIAL № 10014

Name of Owner FLYNN, AVIS GENE Juris.:

Address of Property 4517 OAKBERRY CT

Inspection Data:

Tank Material PCC

Total Length of Drainfield 535

Number of Lines 5 @ 107'

Cover Depth 1'

Water Supply Source Well

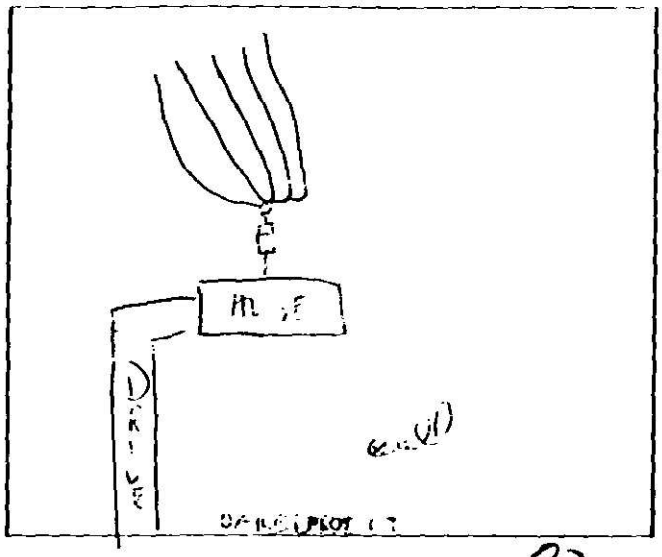
Distance to Water Source 50'

Excavation Inspected 3-13 87

Tank(s) Inspected 3-13 87

Wash Line Inspected —

High Water Alarm Inspected —



Design: [illegible] CTR# 82

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☑ installed or constructed ☐ altered or repaired

☐ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The issuance of this

☐ Certificate of Completion ☐ Operation Permit

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 document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 10 NCAC 10A .1900 in addition to those listed below under "COMMENTS." This document 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:

[signature]
Environmentalist

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