T. C. No. _____

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

WELL RECORD

Drilling Contractor Crawford Well Drilling Reg. No 279 Well Permit No. W6491

1. Town Matthews County Mecklenburg
2. Location 13511 Lipizzan Ct. - Lot 12 - Block C Quadrangle No _____
   Show a sketch of location on back of form
3. Owner Ralph Squires Const. Co. Inc.
   Address P.O. Box 25178 - Charl. - 28212
4. Topography: draw, slope, hilltop, valley, flat
5. Use of Well Domestic Date Completed 2-24-75
6. Rig type or method Air Rotary Total Depth 100'
7. Casing: Depth From 0 to 42 ft. Diam. 6/4 in. Type .185
8. Grout: Depth From 0 to 20 ft. Material _____ in. Method Sakrete
9. Screen: Depth From _____ to _____ ft. Diam. _____ in. Type and Opening _____
10. Water Zones (depth) 95
11. Static Water Level: 15 ft. above/below top of casing
    which is 1 ft. above land surface. Elev. _____
    Date 2-24-75
12. Yield (gpm) 10 Method of testing Air
13. Pumping Water Level: 90 ft. after 8 hrs.
    at 10 gpm.
14. Water Quality _____ Temperature (°F) _____
15. Well sterilization method HTH
16. Permanent Pump: Type Deepwell Make Myers
    Installed — Date 2-24-75 By Crawford
    Capacity 10 (gpm) Hp. 2
    Intake depth _____ Airline depth _____
17. Remarks: _____

I do hereby certify that this well record is true and correct.

Carlton A. Crawford
SIGNATURE OF CONTRACTOR OR AGENT

DRILLING LOG

From	To	Formation
0	20	Red Clay
20	42	Yellow Slate
42	100	Blue Granite with Blue Rock

FORM NO. E-22-9-1-72

Received 2/25/75

MECK COUNTY HEALTH DEPT.
RECEIVED
FEB 25 1975
ENVIRONMENTAL HEALTH DIVISION

Application No. 6649
T. C. No. 215-161-01
Map Date 9-27-72

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Ralph Sowers Construction Co, Inc
(LAST FIRST MIDDLE)

ADDRESS OF OWNER P.O. Box 25178 ZIP 28212

PHONE NO. Home _____ Office 537-9553

LOCATION OF PROPERTY 13511 Lipizzan Ct
(STREET OR COUNTY ROAD)

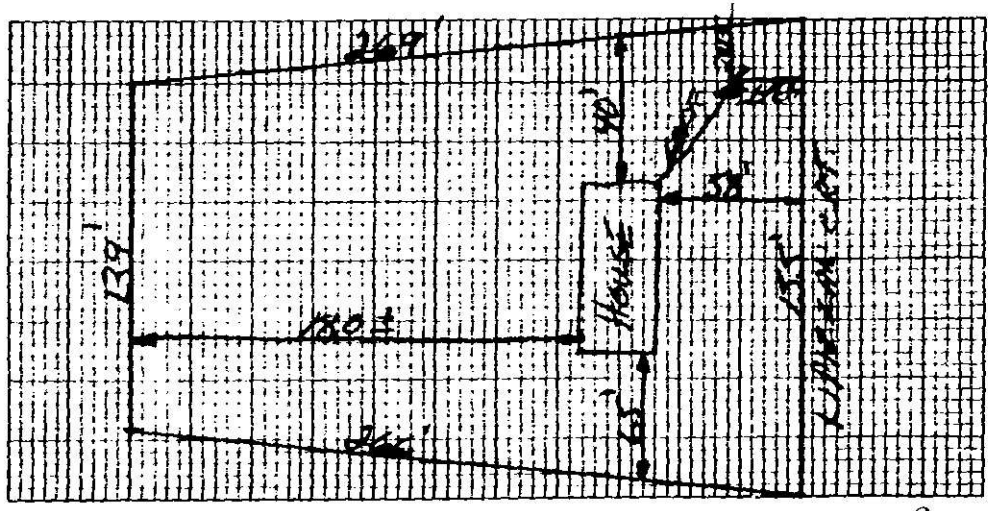
SUBDIVISION Windsor Estates LOT NO. 12 BLOCK NO. C

MAP BOOK NO. 16 PAGE NO. 131

DEED REFERENCE: DEED BOOK 3438 PAGE NO. 445

WELL CONTRACTOR Crawford Well Drilling LICENSE NO. 232

Application is hereby made to the Mecklenburg County Health Department 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:



ACCURATELY DIAGRAM & DIMENSION LOT

2-12-25
DATE OF APPLICATION

William E. Rose Jr.
OWNER

Application approved and permit hereby granted

Permit No: 6649

T. R. Brisman
ENVIRONMENTALIST

FORM NO. E-20-8-1-72

HEALTH DEPARTMENT'S COPY

W

Date Received 7-12-73

APT No 6649

T. C. No. 215-161-32

Map Date 6 10 74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER RALPH SQUIRES CONST. CO. INC.
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER 2600 MILTON ROAD P.O. BOX 25178 ZIP 28212

3) PHONE NO Home _____ Office 537-9553

4) LOCATION OF PROPERTY 13511 LIPIZZAN COURT
(STREET OR COUNTY ROAD)

5) SUBDIVISION WINDROW ESTATES LOT NO 12 BLOCK NO. C

MAP BOOK NO 16 PAGE NO. 131

6) DEED REFERENCE DEED BOOK 3438 PAGE NO 445

Application is hereby made to the Mecklenburg County Health Department for the conduct of a percolation test 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

Bill Hartes
OWNER

FORM NO E-1-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3612

PTR No. 6649

T C No 215-161-[redacted] 3A

Date Issued September 25, 1973

Map Date ~~9-27-72~~ 6-10-74

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

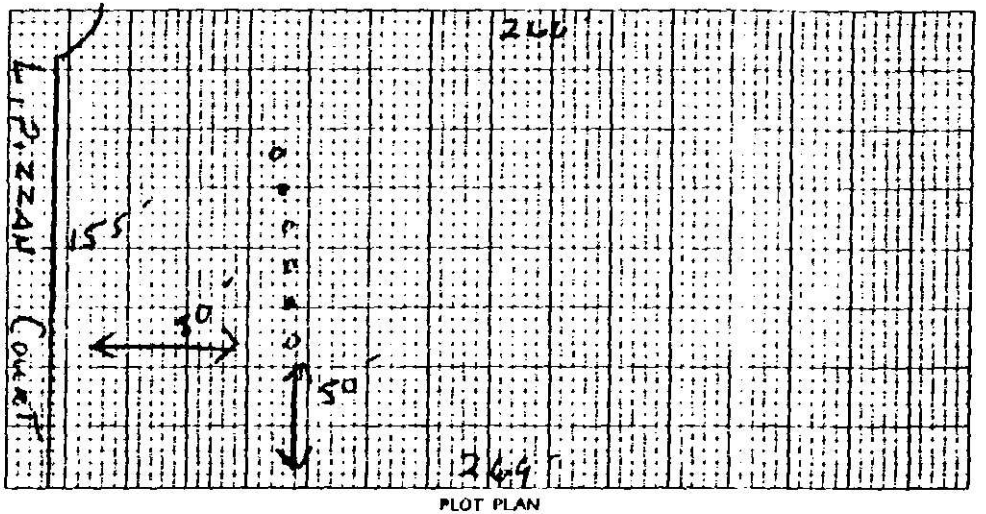
PERCOLATION TEST REPORT

NAME OF OWNER Ralph Squirds Construction Company, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P.O. Box 25178 ZIP 28212

LOCATION OF PROPERTY 13511 Lipizzan Court
(STREET OR COUNTY ROAD)

SUBDIVISION Windrow Estates LOT NO 12 BLOCK NO. C



PLOT PLAN

139-

This is to certify that a percolation test has been run and an on-site inspection made by the Mecklenburg County Health Department on the lot described above. The said test was conducted on that portion of the lot as indicated on above plot.

The percolation rate determined by the test was 60 min/in. 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 Health Department 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 Health Department prior to installation based on the percolation 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 where the percolation test was run.
4. This approval is void if any grading, filling, or construction (including the drilling of a well) is performed on the lot which, in the opinion of the Health Department, renders the area where the percolation test was run unsuitable for the 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 State Board of Health and the Mecklenburg County Board of Health which were in effect on the date of issuance and is void if at any time in the future, prior to the 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 said date.

John R. Robinson

Director, Environmental Health Division or
Authorized Section Head

FORM NO E 2-4-1-71

HEALTH DEPARTMENT'S COPY

Serial No. 3452

Date Issued September 25, 1973

LA No. 6649

T. C. No. 215-161-[redacted]

Map Date ~~9-27-72~~ 6-10-74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Ralph Squires Construction Company, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P.O. Box 25178 ZIP 28212

LOCATION OF LOT 13511 Lipizzan Court
(STREET OR COUNTY ROAD)

SUBDIVISION Windrow Estates LOT NO. 12 BLOCK NO. C

MAP BOOK NO. PAGE NO.

The above specified lot is approved by the Mecklenburg County Health Department for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the percolation test results which yielded a percolation rate of 60 min/in 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 6649. 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 percolation test 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

Thomas R. Wood
Environmentalist

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

FORM NO. E 3-4-1-71

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 9-24-73

ICAR (S) Application No 6649

T C No 215-141-~~01~~-22

Map Date ~~9-24-73~~ 9-10-74

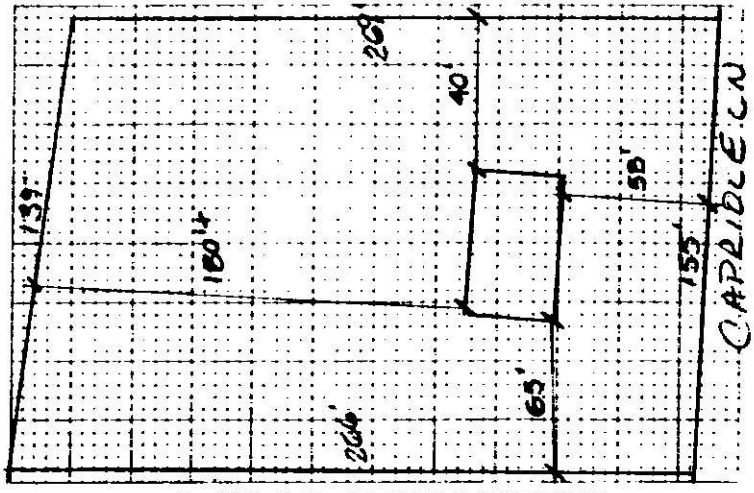
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 Health Department 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) 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 ✓ YES
B. Government ____
C. Community System
1. Well ____
2. Government ____

(10) Sewage Disposal
Private Disposal System ____ Yes ____ No
Public Sewer ____ Yes X No
Private Disposal System ____ Yes ____ No
Community Sewer ____ Yes X No

(11) FHA Case No N/A

(12) VA Case No ____

(13) NAME OF OWNER RALPH SQUIRES CONST. CO. INC.
LAST FIRST MIDDLE

(14) ADDRESS OF OWNER 2600 MILTON ROAD

(15) PHONE NO Home 537-4553 Office 537-9553

(16) LOCATION OF SYSTEM 13511 CAPRIDEAN CT.
STREET OR COUNTY ROAD

(17) SUBDIVISION WINDROW Lot No 12 Block No C

Map Book No 16 Page No. 131

(18) DEED REFERENCE — DEED BOOK 3438 AT PAGE 445

(19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ____ NO DATE RUN 9-21-73

(20) PTR NUMBER (See Instructions) 6649

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 Bill Harris

REV. NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 4-7-75 Serial No. 6233 ICAR(S) Permit No. 6649

T C No 215-161-32

Map Date 6-10-74

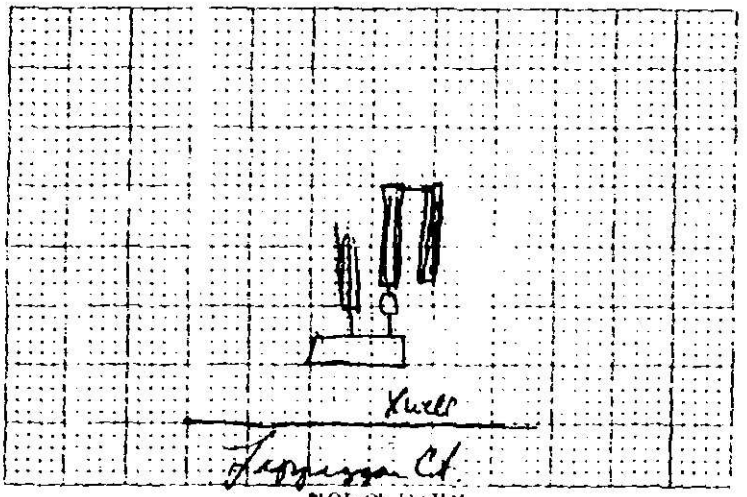
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 6649, dated 3-24-75 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 5-7-75, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 1500

Tank Construction RC

Absorption and/or Nitrification Lines

Total Line Lenght 755 & 450

Number of Lines 5 (12½ x 150' x 17") 3 (7½' x 50' x 17")

Distance from House 10'

Distance from Property Line 20'

Distance from Well 100' +

NAME OF OWNER Ralph Squires Const. Co. Inc.

LOCATION OF PROPERTY 1351 [illegible] Ct

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used.

Comments Alternate Jet 2½ x 7 x 40' Trench

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 Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

E-5-9-1-72

Date Issued 4-8-75 Serial No. 5734 C of A (s) No. 601

T C No 215-16-32

Map Date 6-10-74

John R Atkisson

CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Ralph Squires Const. Co. Inc.
(LAST, FIRST, MIDDLE)

Location of Property 13511 Lagazzon ct

Application Number 6649 Permit Number 6619

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material C

Total Length of Drain Tile 795; 150' Number of Lines 3 @ 71½' x 50' x 17"

Depth of Filter Material 12" Cover Depth 15"

Water Supply Source well Distance from Water Source 100'+

Excavation Inspected 4-8-75 (DATE) Tank Inspected 4-8-75 (DATE)

Nitrification Field Inspected 4-8-75 (DATE)

Washing Machine Line Inspected, If Applicable 4-8-75 (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 Board of Health 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 Aeration pit 2½' x 7' x 4½' Stone

Homegrown

Richard Hudson
Environmentalist

FORM NO E-6-9-1-72