Date Received 20 Sept. 1982

MECK COUNTY DEPARTMENT OF
RECEIVED
SEP 20 1982
ENVIRONMENTAL HEALTH

SIR No. 1901 2'

T. C. No. 011-021-10

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER WRIGHT (LAST) Kathy (FIRST) Dean (MIDDLE)

2) ADDRESS OF OWNER 871 Asbury Chapel Rd Huntersville ZIP 28078

3) PHONE NO. Home 875-1138 Office _____

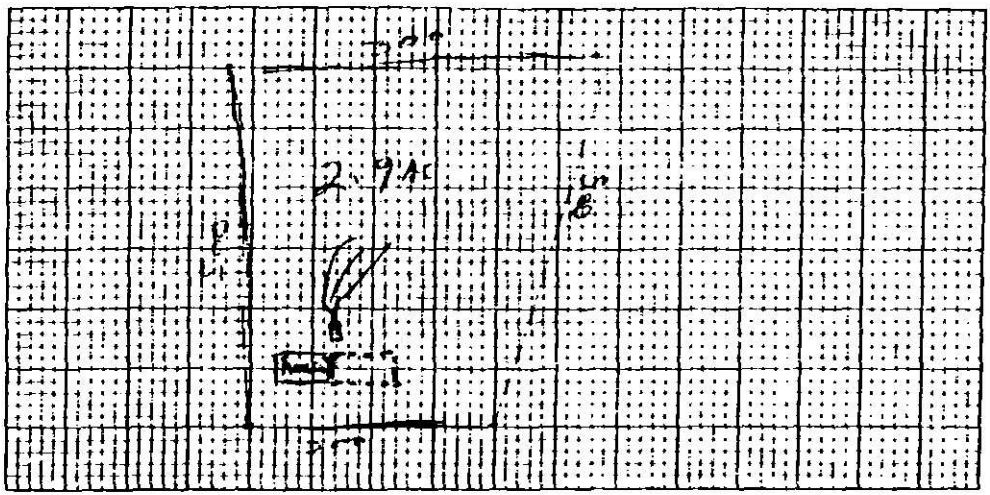
4) LOCATION OF PROPERTY 16432 old STATESVILLE Rd (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. _____ 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

Kathy Wright
OWNER

EHD-5-76

Environmental Health Department's Copy

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

SITE INVESTIGATION REPORT
INDIVIDUAL SEPTIC TANK SYSTEM
WITH SUBSURFACE,
SOIL ABSORPTION,
EFFLUENT DISCHARGE

S.I.R.# 19012

T.C.# 011-021-10

DATE: 9-23-82

NAME OF OWNER: Wright, Larry D.

ADDRESS OF OWNER: Rt. 1, Asbury Chapel Road, Huntersville, NC

LOCATION OF LOT: Old Statesville Road

As determined under the Rules and Regulations promulgated by the Commission for Health Services, Division of Health Services, North Carolina Department of Human Resources, Raleigh, North Carolina, the soils on the lot described above were found to be unsuitable for the installation of an individual septic tank - soil absorption system, due to the following reason:

SOIL TEXTURE (2-1 clay) UNSUITABLE

SOIL DRAINAGE/GROUNDWATER (seasonally perched water table at 24"-30" below the ground surface) UNSUITABLE

Mike Sexton

Michael R. Sexton
Environmentalist
On Premises Waste Disposal Section

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 19012

T.C. NO. 011-021-10

(Ground Absorption Sewage Disposal)

OWNER: Jerry D. Wright
ADDRESS: Rt. 7, Huntersville, N.C. 28078
PLAT NO:
LOT SIZE:
LOCATION OF SITE: 16432 Old Statesville Rd

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS U 2-4%	(S) PS U 2-8%	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) U 2-1 clay	S (PS) U 2-1 clay	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) U Weak Blocky	S (PS) U Weak Blocky	S PS U	S PS U
4. SOIL DEPTH (inches)	(S) PS U 40"	(S) PS U 40"	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	(S) PS U None	(S) PS U None	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S Seasonal (PS) Perched U Water Table 24-30"	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	1V B	1V B		
9. SITE CLASSIFICATION	unsuitable	unsuitable		
10. SOIL SERIES	Helena	Drainageway		

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)

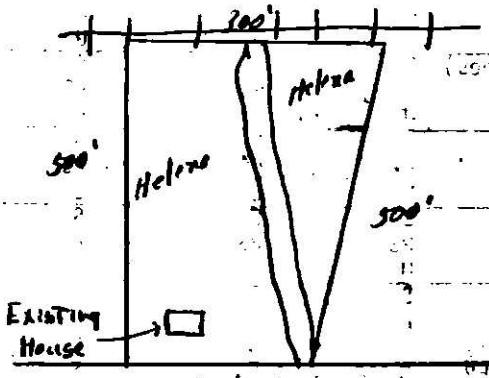
Recommendations/Comments:

Described by: William R. Martin
Title: Soil Scientist

Date: 9-22-82

EHD 539 (Revised: 6/82)

2



Old Statesville Rd.

Date Received 20 Sept 1982

MECK COUNTY DEPARTMENT OF
SEE INSTRUCTIONS ON BACK
RECEIVED
SEP 20 1982

ICAR(S) Application No. 19012

T. C. No. [illegible]

Map Date 011-02-10

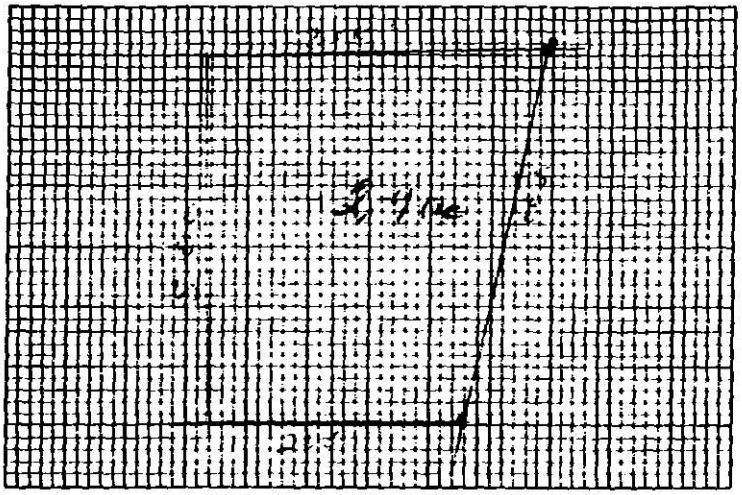
Retail Tire Sales

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 ___
5) Business Use — Max No Employees 2
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 [illegible] (LAST) (FIRST) (MIDDLE)

14) ADDRESS OF OWNER [illegible]

15) PHONE NO. Home [illegible] Office ___

16) LOCATION OF SYSTEM [illegible] 16432
(STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. ___ 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.

9-20-82
DATE OF APPLICATION

Ramsey Wright
OWNER

EHD-5-76

SEE INSTRUCTIONS ON BACK

Date Received 6-10-83

ICAR(S) Application No. 19012

T. C. No 011-021-10

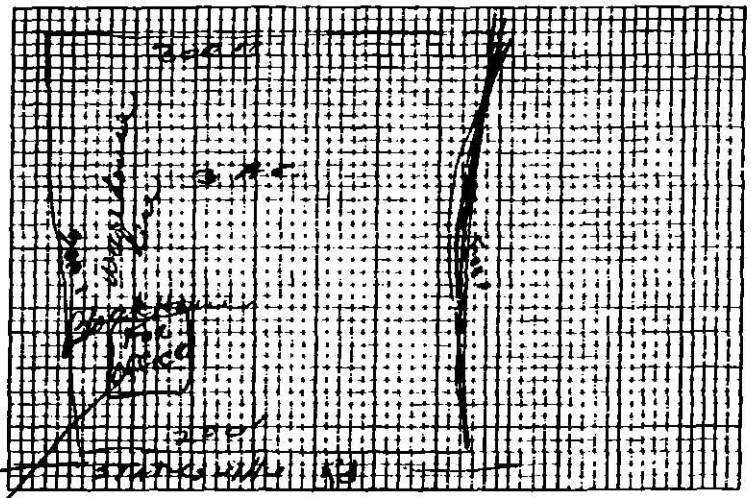
Map Date _____

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 ___
5) Business Use — Max No Employees 2
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 WRIGHT (LAST) LARRY (FIRST) DEAN (MIDDLE)

14) ADDRESS OF OWNER 207 Huntersville N.C.

15) PHONE NO. Home 875-1135 Office 596-3781

16) LOCATION OF SYSTEM 16432 old Statesville Rd. (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. ___ 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.

6-10-83
DATE OF APPLICATION

Larry D Wright
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 6564

SIR No. 19012
T. C. No. 011-021-10

Date Issued 6-30-83

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 Wright, (LAST) Larry (FIRST) D. (MIDDLE)

ADDRESS OF OWNER PO Box 207 Huntersville, NC ZIP 28078

LOCATION OF LOT 16432 Old Statesville Road (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.

** Agreement Card On File **

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

COPY

SEPTIC TANK AGREEMENT 19012

The undersigned, Lorna Dean Wright, owner of property located at 16432 Old Statesville Rd., ("the site") and described in instrument recorded in Book 4511 at Page 0137, Mecklenburg Public Registry, hereby acknowledges that he applied to the Department of Environmental Health for a permit to install a septic tank sewage disposal system on the site; the Department evaluated the site for suitability for such a system in accord with the regulations promulgated by the North Carolina Commission for Health Services as 10 NCAC 10A .1900 et seq; that the Department classified the site as unsuitable and an appropriate permit was issued by the Department.

The undersigned further acknowledges that the proper design, construction, and maintenance of such septic tank system is his responsibility and that neither the Department nor its officials, employees or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for damages, consequential or direct, which are caused, or which may be caused by a malfunction of such system.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

And the undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department and its successors, as well as Mecklenburg County, for any damages or other claims of any person or persons whatsoever arising out of the installation operation, or failure of said septic tank system.

And the undersigned further agrees for his heirs and assigns that, in the event any septic tank system installed under authority of the aforesaid permit fails to perform adequately, in any respect, he will take whatever measures are required to correct same; or if such is impossible he will discontinue use of said system immediately.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This 13th day of June, 1983.

Lorna Dean Wright (Seal)

(Seal)

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, Linda S. Wright, a Notary Public for said County and State, do hereby certify that Lorna Dean Wright personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 13th day of June, 1983.

Linda S. Wright
Notary Public
My Commission Expires: Aug 23, 1985

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

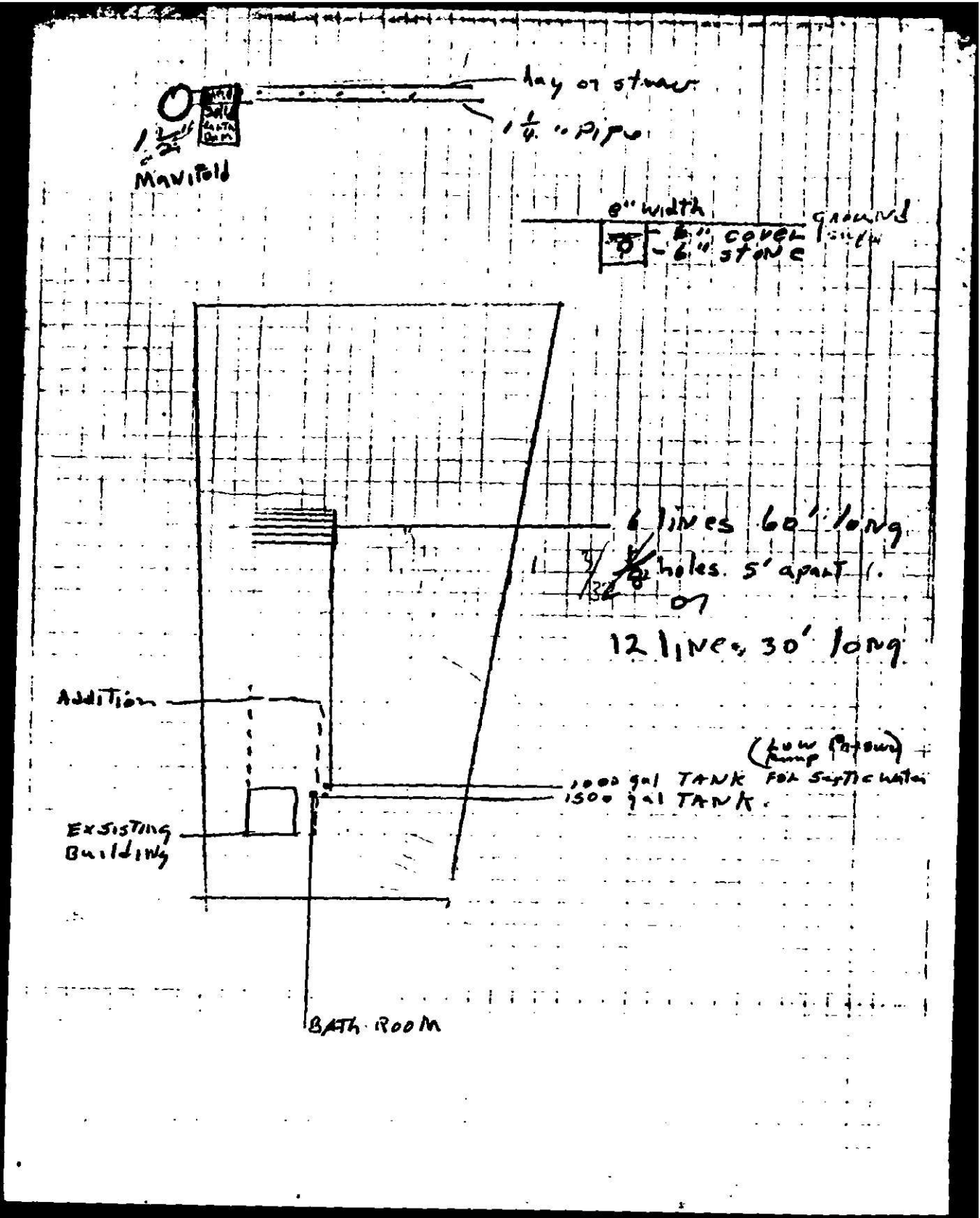
I, _____, a Notary Public for said County and State, do hereby certify that _____ personally came before me this day and acknowledged that he is _____ of _____, and that by authority duly given and as the act and deed of said corporation, the foregoing instrument was signed in its name by its _____, sealed with its corporate seal and attested by _____.

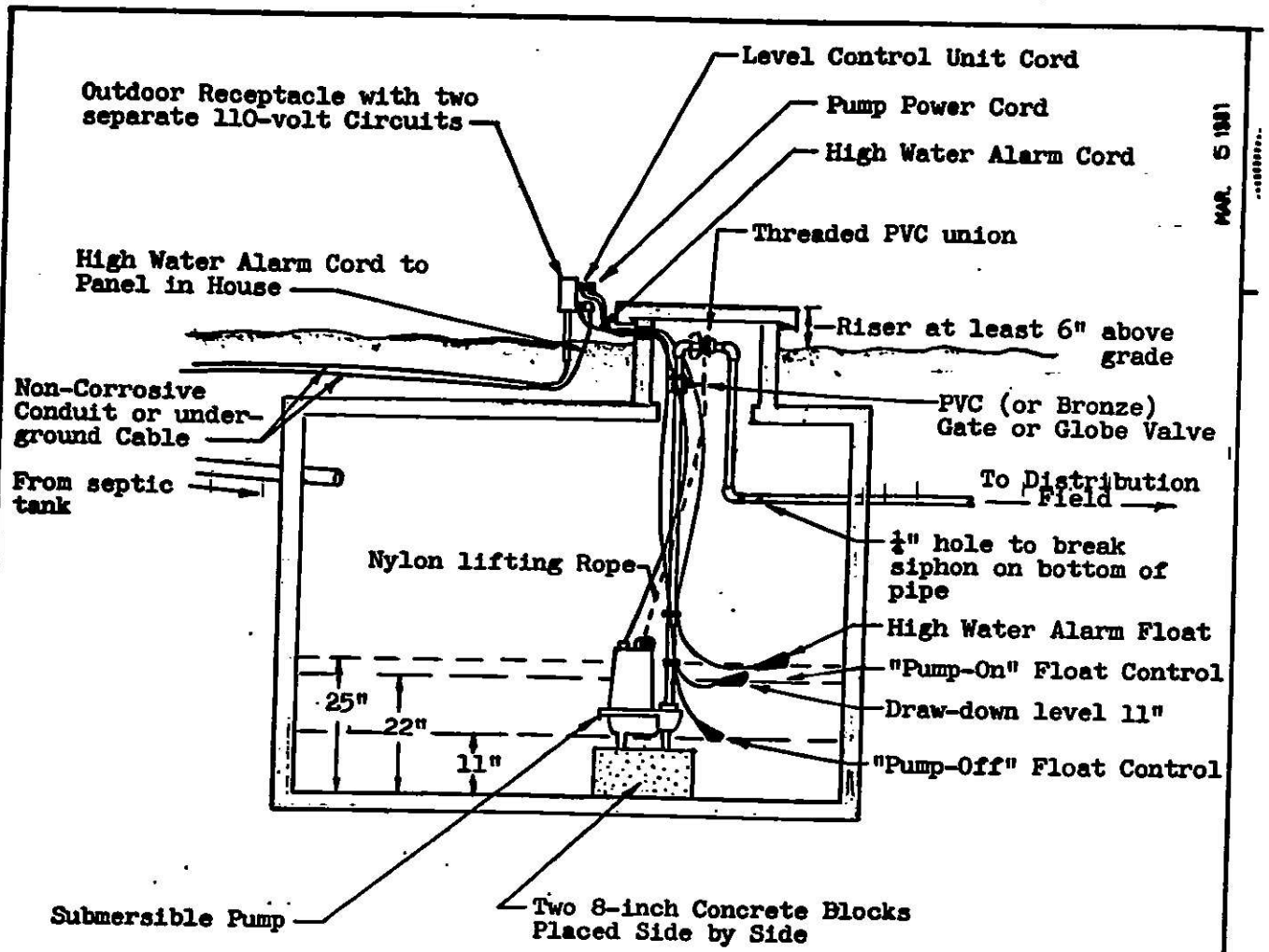
WITNESS my hand and notarial seal, this _____ day of _____, 19___.

Notary Public
My Commission Expires: _____

Daily waste flow	50 gallons
Septic tank size	1500 gallons
Pumping tank size	1000 gallons
Effluent loading rate	0.03 gpd/ft ^{2}
Absorption area	1800 ft ^{2}
Total length of laterals	360 ft
Lateral diameter	1½ in.
Lateral configuration	6 @ 60 ft each
Supply line length	140 ft.
Supply line diameter	1½ in.
Manifold placement	side
Hole size*	5/32 in.
Number of holes	55
Pressure head	3 ft.
Flow per hole	0.5 gpm
Total flow	27.5 + 2 = 29.5 gpm
Elevation head	4.5 ft,
Friction head	0.31 ft.
Pressure head	3 ft.
Total head	7.8 ft.
Pump requirements	29.5 gpm @ 7.8 ft. of head
Storage volume in laterals	22.4 gallons
Storage volume in supply line	13.6 gallons
Total storage volume	36 gallons
Dosing volume	180 gallons
Dosing depth	7½
Check valve needed?	No

*Data on hole size, spacing, pressure head and flow must be listed for each line for systems where lines are different (such as sloping lots).


lay of stones
1 1/4" Pipe
1" Manifold
6" width
6" COVER
6" STONE
6 lines 60' long
holes 5' apart
or
12 lines 30' long
Addition
(Low Pressure)
1000 gal TANK FOR Septic water
1500 gal TANK.
Existing Building
BATH ROOM


Level Control Unit Cord
Outdoor Receptacle with two separate 110-volt Circuits
Pump Power Cord
High Water Alarm Cord
Threaded PVC union
High Water Alarm Cord to Panel in House
Riser at least 6" above grade
Non-Corrosive Conduit or underground Cable
PVC (or Bronze) Gate or Globe Valve
From septic tank
To Distribution Field
Nylon lifting Rope
¼" hole to break siphon on bottom of pipe
High Water Alarm Float
"Pump-On" Float Control
25"
22"
11"
Draw-down level 11"
"Pump-Off" Float Control
Submersible Pump
Two 8-inch Concrete Blocks Placed Side by Side

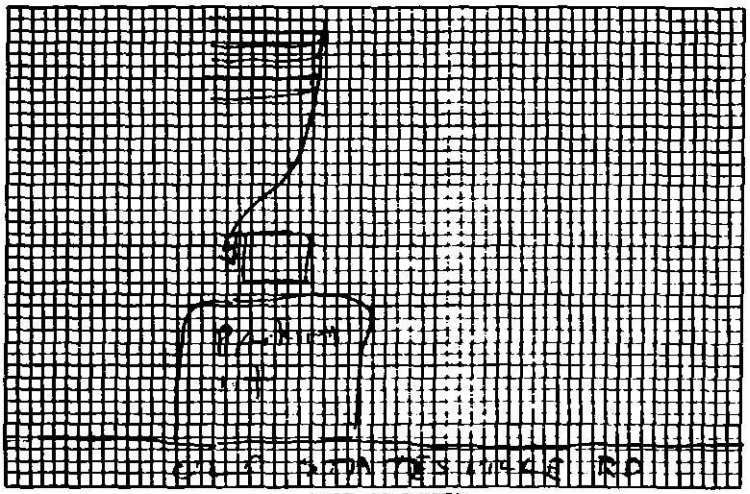
Date Issued 1-28-86 **Serial No. 08919** ICAR(S) Permit No. 19012

T. C. No. 011-021-10

Map Date C

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 19012, dated _____ 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 1-24-96, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate U.S

Liquid Capacity of Tank 1500 +1000

Tank Construction PVC

Absorption and/or Nitrification Lines:

Total Line Length 360'

Number of Lines 6

Distance from House 5'+

Distance from Property Line 10'+

Distance from Well 50' +/- uphill

NAME OF OWNER WRIGHT LARRY

LOCATION OF PROPERTY 1432 OLD STATESVILLE RD

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.

Install w/ [illegible] w/ flow in f.lp

Comments: _____

Jim Graham
Division or Section Head

Kelly Randall
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-5-76

Environmental Health Department's Copy

C of A (s) No. 19012

Date Issued 6-17-86 **Serial** 8667 T. C. No. 011-021-10

LOT 7

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
OPERATION PERMIT

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

Name of Owner WRIGHT (LAST) LARRY (FIRST) (MIDDLE)

Location of Property 16432 OLD STATESVILLE RD

Application Number 19012 Permit Number 19012

Inspection Data:

Liquid Capacity of Tank ST 1500 PT 1000 Tank Material PCC

Total Length of Drain Tile 360' Number of Lines 6

Depth of Filter Material 12" Cover Depth ± 8"

Water Supply Source ~~well~~ city H_2O Distance from Water Source city H_2O

Excavation Inspected 6-17-86 (DATE) Tank Inspected 6-17-86 (DATE)

Nitrification Field Inspected 6-17-86 (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 1996, 150 • 5T, 1000 DT, PI, LPP, 360 LFT, 12 G, HELENA

Kelly Caudill
Environmentalist

EHD-5-76

Environmental Health Department's Copy