Date Received 1/17/80

APT No. 16456

T. C. No. 215.13H-E,16

Map Date JAN 79

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

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

2) ADDRESS OF OWNER P.O. Box 25178 ZIP 28212

3) PHONE NO Home _____ Office 5379553

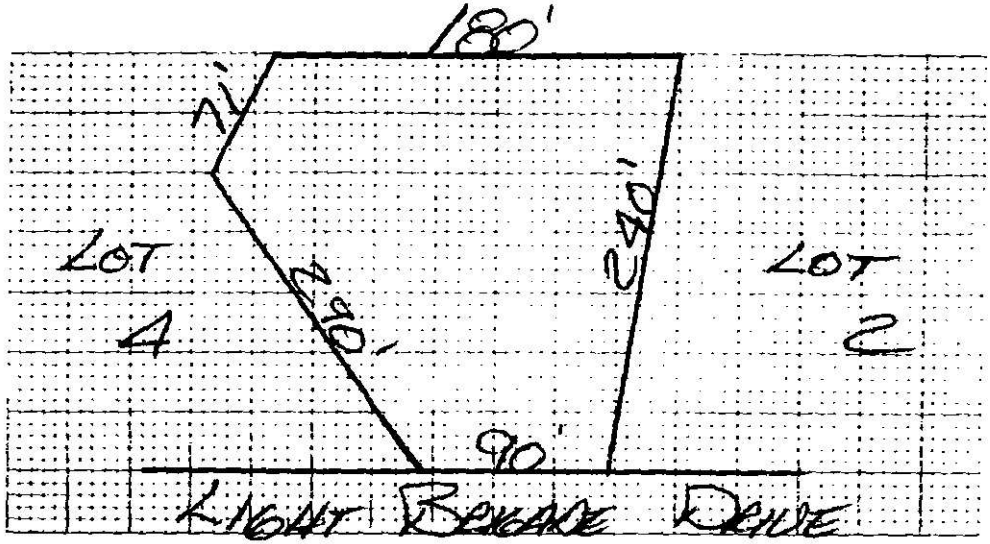
4) LOCATION OF PROPERTY Light Brigade Dr.
(STREET OR COUNTY ROAD)

5) SUBDIVISION Windrow LOT NO 3 BLOCK NO T

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 hereinafter described for the purpose of determining if the lot is suitable for the installation of a septic tank and subsurface soil absorption wastewater treatment system with subsurface soil absorption effluent disposal.



7) ACCURATELY DIAGRAM & DIMENSION LOT

OWNER

EHD-5-76

Environmental Health Department's Copy

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

APPENDIX II
SITE EVALUATION

S.I.R. No. 16456
T.C. No. PO 215-131-15,16

(Ground Absorption Sewage Disposal)

OWNER: RALPH SQUIRES CONST. CO. DATE REQUESTED: 1-17-80
ADDRESS: PO BOX 25178 PLAT NO:
COUNTY: MECK. 28212 LOT SIZE: 55,500
LOCATION OF SITE: LIGHT BRIGADE DRIVE LOT 3 BLOCK T

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS U: 2-10	S (PS) U: COMPLEX SLOPES	(S) PS U: 2-10	(S) PS U: 2-10
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2:1 Clay)	(S) PS U: CLAYEY	S (PS) U: SAPROLITE	(S) PS U: CLAYEY TO 2-1	(S) PS U: CLAYEY 2-1
3. SOIL STRUCTURE (12-36 inches)	(S) PS U: BLOCKY	S (PS) U: MASSIVE	(S) PS U: BLOCKY TO MASSIVE	(S) PS U: MASSIVE
4. SOIL DEPTH (inches)	(S) PS U: 48	S (PS) U: 48	(S) PS U: 48	(S) PS U: 48
5. RESTRICTIVE HORIZONS (inches) (Impervious strata, Rock)	(S) PS U: NONE	S (PS) U: SAPROLITE	(S) PS U: CLAYS	(S) PS U: CLAYS
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	(S) PS U: ADEQUATE	S (PS) U: SLOW	(S) PS U: SLOW	(S) PS U: SLOW
7. SOIL PERMEABILITY (percolation rate)	(S) PS U: MODERATE	S (PS) U: SLOW	(S) PS U: SLOW	(S) PS U: SLOW
8. OTHER (specify)	S (PS) U	S (PS) U	S (PS) U	S (PS) U
9. SITE CLASSIFICATION	P. SUITABLE	UNSUITABLE	UNSUITABLE	UNSUITABLE
10. SOIL SERIES	CECIL	COMPLEX SLOPES	VANCE	HELENA

S - Suitable PS - Provisionally Suitable U - Unsuitable

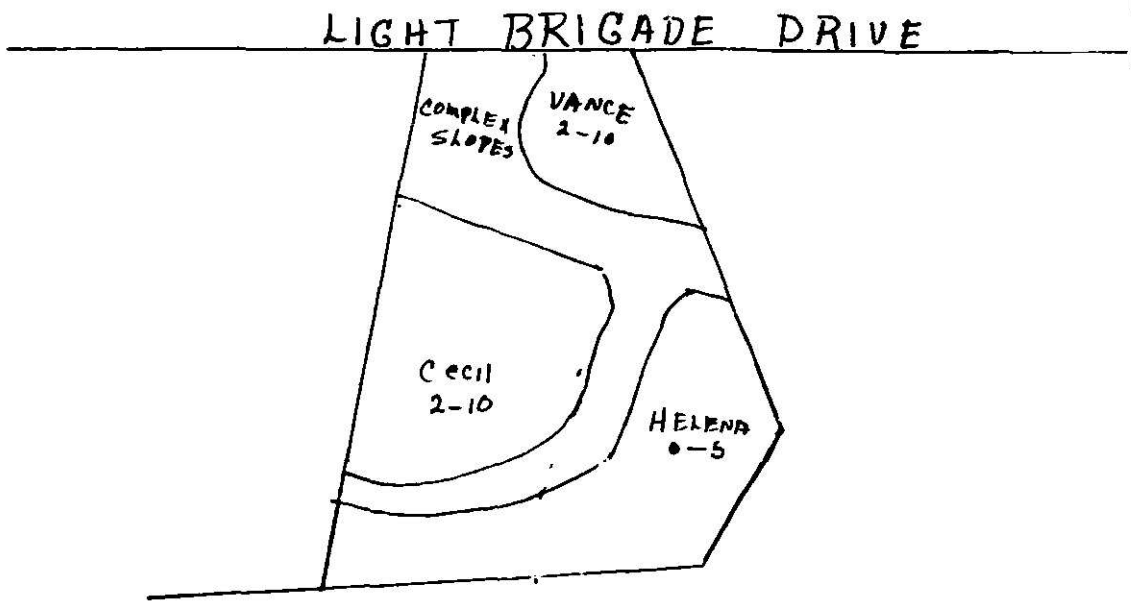
** See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope)

Recommendations/Comments:

Described By: W. B. Ramsey
Title: Soil Scientist
Date: 3-12-80

DHS Form 2601
Sanitation
EHD 539 (2/80)

16 1/5-6
21S--13I- 15-1/16



Serial No. 2438

PTR No. 16456

Date Issued March 25, 1980

T C No po 215-131-15,16

Map Date

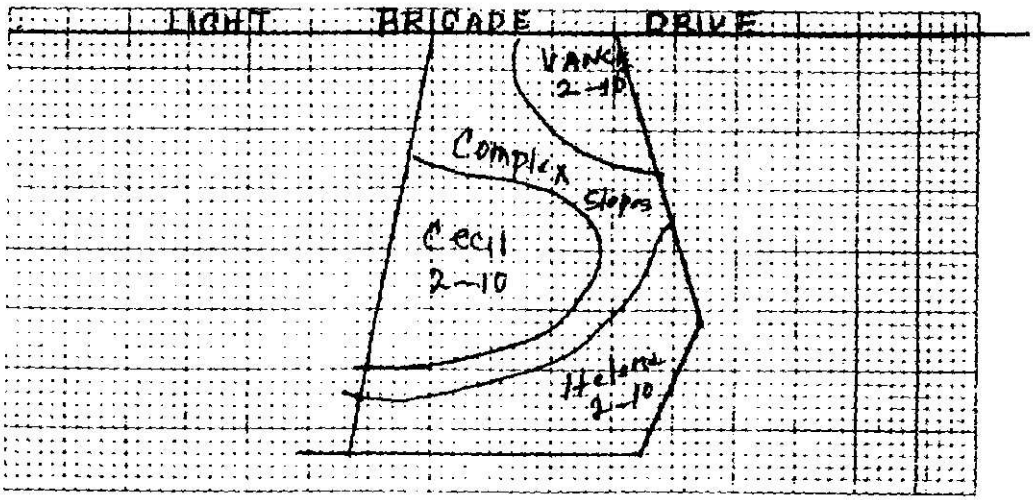
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER _ (LAST) RAlph Squires Const. Co. (FIRST) (MIDDLE)

ADDRESS OF OWNER PO Box 25178, Charlotte, NC ZIP 28212

LOCATION OF PROPERTY Light Brigade Drive (STREET OR COUNTY ROAD)

SUBDIVISION Windrow LOT NO #3 BLOCK NO "T"



PLOT PLAN

[illegible] was made by the Mecklenburg Count[illegible] investigation was conducted [illegible]

Provisionally Suitable

[illegible] The said lot is approved [illegible] with subsurface, soil ab[illegible]

[illegible] the Mecklenburg County Depart[illegible] wastewater treatm[illegible]

[illegible] determined by the Meck[illegible] obtained above [illegible]

[illegible] suitable for system [illegible]

[illegible] performed on the [illegible] indicated as acceptable [illegible] 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 Department of Human Resources Division of Health Services 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.

W. B. Ramsey
Soil Scientist

John P. Atkisson
Environmental Health Director or
Authorized Section Head

EHC 5-76

Environmental Health Department's Copy

Date Received 4-26-82

SEE INSTRUCTIONS ON BACK
MECK COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH
RECEIVED
APR 26 1982

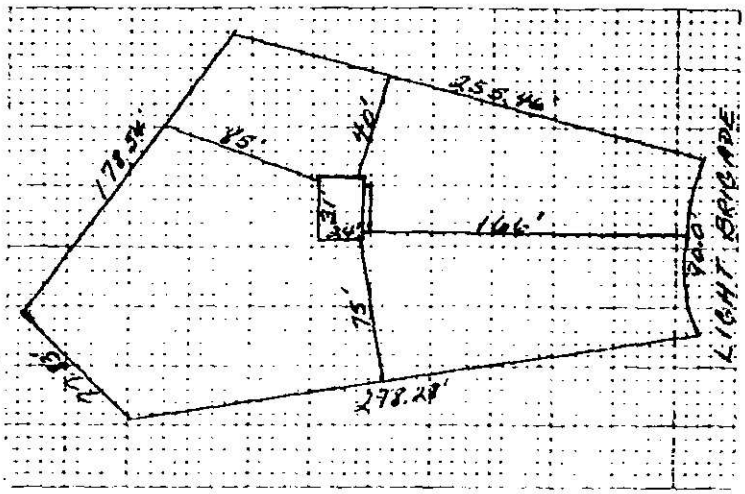
ICAR(S) Application No 16456
T C No 215-131-15-16
Map Date

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 2) ✓ Alter 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 within 200 feet of public sewer ___Yes ✓No
House existing within 200 feet of community sewer ___Yes ✓No
11 FHA Case No
12 VA Case No N/A

13) NAME OF OWNER Ralph Squires Const Co
LAST FIRST MIDDLE

14) ADDRESS OF OWNER P O Box 25178 28212

15) PHONE NO Home ___ Office 537-9553

16) LOCATION OF SYSTEM 2227 Light Brigade Dr.
STREET OR COUNTY ROAD

17) SUBDIVISION Windsor II Lot No 3 Block No. 1

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) 16456

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.

4-21-82
DATE OF APPLICATION

Larry Schuster
OWNER

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

BF 4-29-82

Serial No. 5627

LA No. 16456

Date Issued 4-26-82

T C No PO 215-131-15,15

Map Date

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 Ralph Squires Const. Co. (LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P. O. Box 25178, Charlotte, NC ZIP 28212

LOCATION OF LOT 2227 Light Brigade Dr. (STREET OR COUNTY ROAD)

SUBDIVISION Windrow II LOT NO 3 BLOCK NO. I

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 16456 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

Bob Wilson
Environmentalist

John R Atkisson
Environmental Health Director, or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

Date Issued 6-10-12

Serial No. 5511

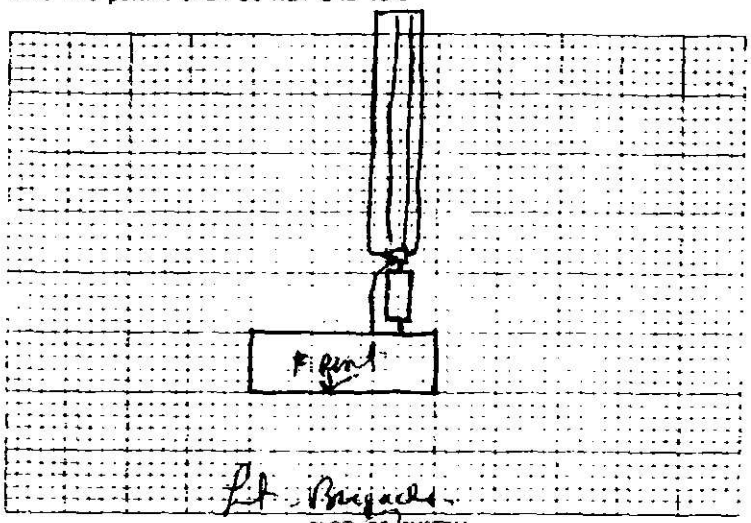
ICAR(S) Permit No. 16456

T C No 215-13-1511

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 ✓ 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 16456, dated 4-26-12 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 7/3/12, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500 gal

Tank Construction PC

Absorption and/or Nitrification Line

Trench Line Length 620

Number of Lines 5'

Distance from House 10'

Distance from Property Line 12'

Distance from Well 50'

NAME OF OWNER Ralph Agnew Const Co

LOCATION OF PROPERTY 2227 Ft Brigade

The system shall meet all 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.

15' X 124' +17" Stone Septic System

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 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

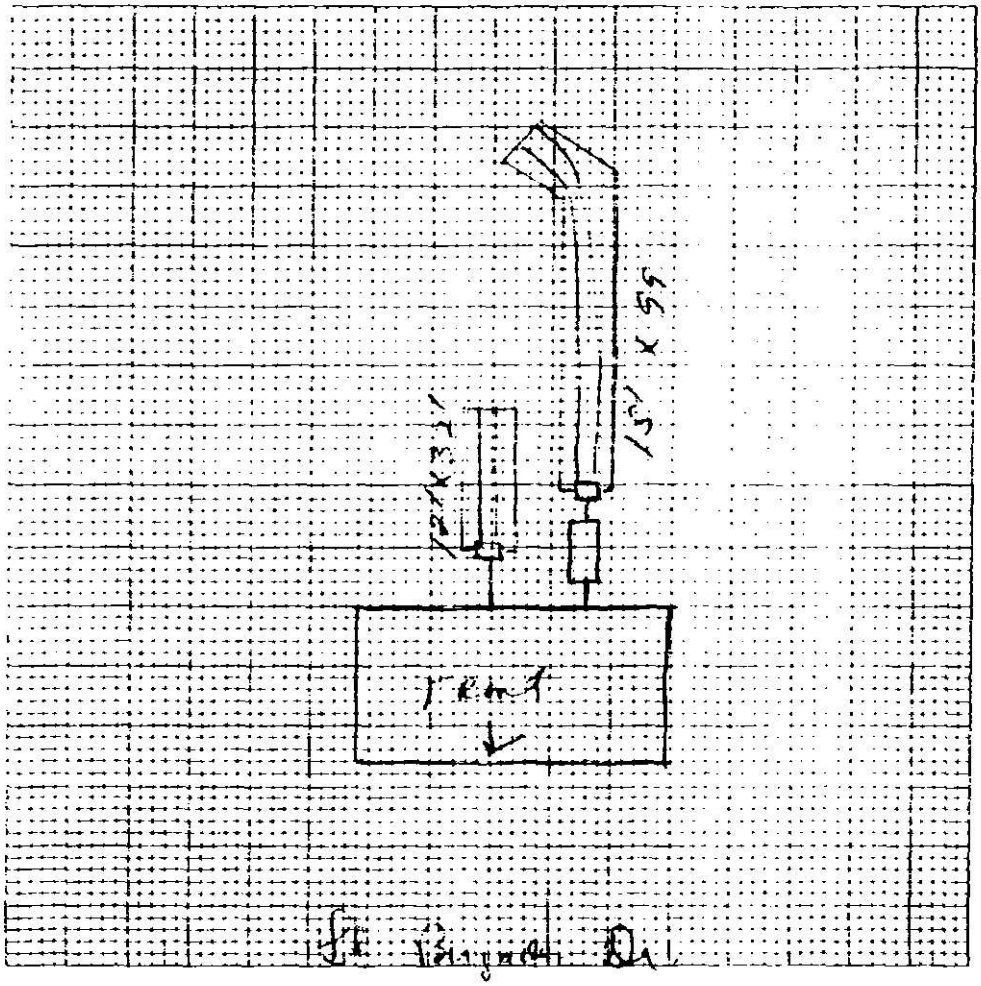
Date Issued 6-18-12

C of A (s) No 16456

T C No 21-131-15

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

PLOT PLAN SHEET



PLOT PLAN

ACCURATE DIAGRAM OF SYSTEM AS INSTALLED

Bob Wilson

Environmentalist

EHD-5-76

Environmental Health Department's Copy

BE-6-21-82

C of A (s) No 16456

Date Issued 6-18-82 **Serial** 5180 T C No 215-131-1X/C

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner Agnew (LAST) Ralph (FIRST) Court G (MIDDLE)

Location of Property 2227 Lt Brigade

Application Number 16456 Permit Number 16456

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material PC

Total Length of Drain Tile 495'+125' Number of Lines 5+4

Depth of Filter Material 12" Cover Depth 15"+

Water Supply Source Well Distance from Water Source 504

Excavation Inspected 6-18-82 (DATE) Tank Inspected 6-18-82 (DATE)

Nitrification Field Inspected 6-18-82 (DATE)

Washing Machine Line Inspected, If Applicable 6-18-82 (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 Count, 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

Bob Carlton
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 3-4-83

ICAR(S) Application No. 16456

T C No 115-131-~~[illegible]~~ 51

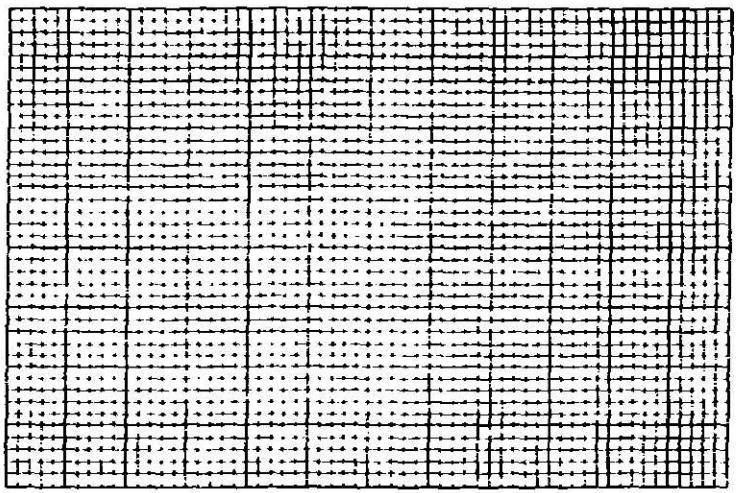
Map Date _____

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) X 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 SHANKLES (LAST) MELVIN (FIRST) DAVID (MIDDLE)

14) ADDRESS OF OWNER _____

15) PHONE NO Home 547-1705 Office 887-7611

16) LOCATION OF SYSTEM 2227 Light Brigade DR (STREET OR COUNTY ROAD)

17) SUBDIVISION Windwood II Lot No. 3 Block No. T

Map Book No _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? X 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.

3-4-83
DATE OF APPLICATION

Melvin D Shankles
OWNER

END-5-76

Serial No. 6101

Date Issued 3-11-83

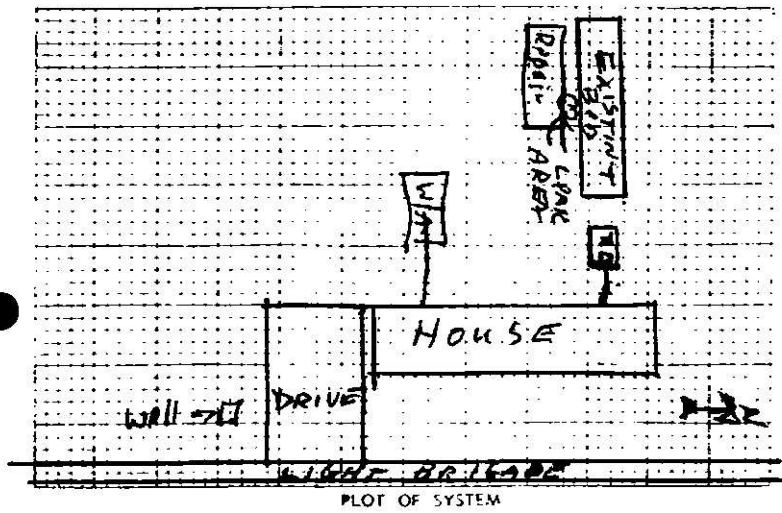
ICAR(S) Permit No 16456

T C No 216-131-[illegible]16

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 ___ Install or Construct, Y 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 16456, dated 3-9-83 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 MARCH 25TH, after which date this permit shall be null and void 1983.



PLOT OF SYSTEM

Permeability Rate PS. IRA

Liquid Capacity of Tank Repair

Tank Construction

Absorption Unit Construction

Total Line Length 100 lin FT.

Number of Lines Three

Distance from House 100 FT.

Distance from Property Line 15 FT.

Distance to Well 225 FT.

NAME OF OWNER SHANKLES, DAVID

LOCATION OF PROPERTY 2227 LIGHT BRIGADE DRIVE

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 put into use. 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.

S.T. 3 ONE BOX TO BE 34 FT x 9 FT x 17 inches STONE - bayou STONE COVER

Comments:

Division or Section Head

Environmentalist Ralph Miller

* 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. 16456

Date Issued 3-14-83 **Serial** 5658 T C No 215-131-15116

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 SHANKLES (LAST) DAVID (FIRST) _____ (MIDDLE)

Location of Property 2227 LIGHT BRIGADE

Application Number 16456 Permit Number 16456

Inspection Data:

Liquid Capacity of Tank Repair Tank Material Repair

Total Length of Drain Tile 100 Lin FT Number of Lines Three

Depth of Filter Material 17 inches Cover Depth 15 inches

Water Supply Source well Distance from Water Source 225 FT

Excavation Inspected 3-14-83 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 3-14-83 (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

Ralph Mills
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY