Date Received 6-12-78

APT No. 14205

T. C. No. 193-2-124

Map Date 10-16-72

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER GRIFFIN & HOLLINGSWORTH DEVELOPMENT CORP
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER 727 FUGATE AVE - CHARLOTTE NC ZIP

3) PHONE NO. Home 375-5358 Office 847-9404 (525-3330 GEN CONTR)

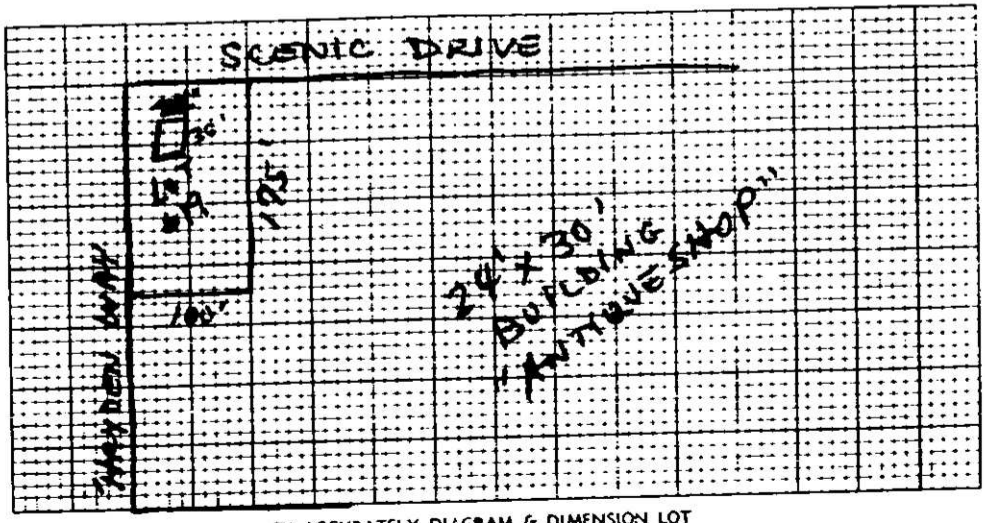
4) LOCATION OF PROPERTY CORNER HAYDEN WAY & SCENIC DRIVE
(STREET OR COUNTY ROAD)

5) SUBDIVISION BOULEVARD ACRES LOT NO 19 BLOCK NO.

MAP BOOK NO 7 PAGE NO 335

6) DEED REFERENCE DEED BOOK 2542 PAGE NO 328

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

George H. Hollingsworth
OWNER by John W. Robertson Gen Contr.

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 6/13/78

ICAR (S) Application No. 14205

T. C. No. 93-201.24

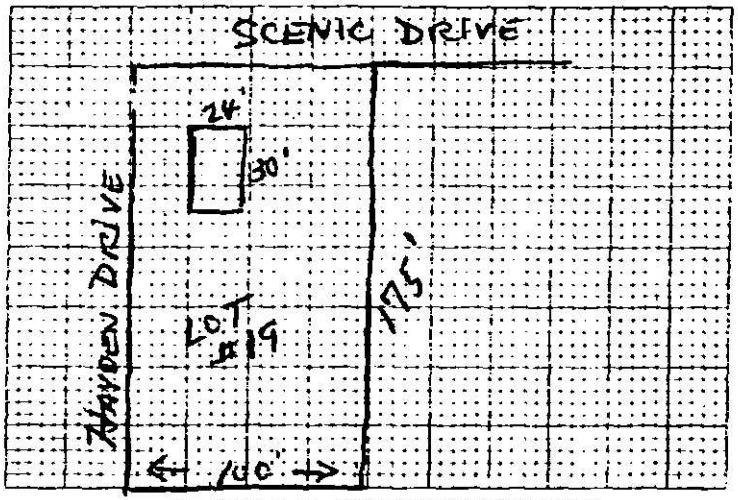
Map Date 10-16-72

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 X No
Residence ____ Yes X No

4) No of Bedrooms ____

5) Business Use — Max No Employees 2

6) Washing Machine ____ Yes X No

7) Garbage Disposal ____ Yes X No

8) Dishwasher ____ Yes X 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 X No
House located within 200 feet of community sewer ____ Yes X No

11) FHA Case No ____

12) VA Case No. ____

13) NAME OF OWNER GRIFFIN & HOLLINGSWORTH DEVELOPMENT CORP.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 727 FUQUATE AVE - CHARLOTTE, N.C.

15) PHONE NO. Home 375-5358 Office 847-9404 (525-3330 GEN. CONTR.)

16) LOCATION OF SYSTEM HAYDEN WAY & SCENIC DRIVE (#19 CORNER LOT)
STREET OR COUNTY ROAD

17) SUBDIVISION BOULEVARD ACRES Lot No. 19 Block No. ____

Map Book No. 7 Page No. 335

18) DEED REFERENCE — DEED BOOK 2542 AT PAGE 328

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.

6-12-78
DATE OF APPLICATION

George W Hollingsworth
OWNER
By John Robertson Gen Contr.

EHD-5-76

Environmental Health Department's Copy

APT 1420S

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

APPENDIX H
SITE EVALUATION

(Ground Absorption Sewage Disposal)

OWNER: Griffin & Hollingsworth Day Camp DATE REQUESTED: 6/12/78
ADDRESS: 729 Fugate Ave PLAT NO.:
COUNTY: Meck LOT SIZE: 17,500 sq ft.
LOCATION OF SITE: Corner Hayduke Dr, Scenic Dr. TC. 193-201-24

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) 4% 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 mixed clays (U)	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S Mixed PS [NONE] (U)	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	S (PS) >48" U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock) *	S None (PS) Noted U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) >6' to PS water table U	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S PS Slow (U)	S PS U	S PS U	S PS U
8. OTHER (Specify)	S PS ——— U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	UNSUITABLE			
SOIL SERIES	Fill			

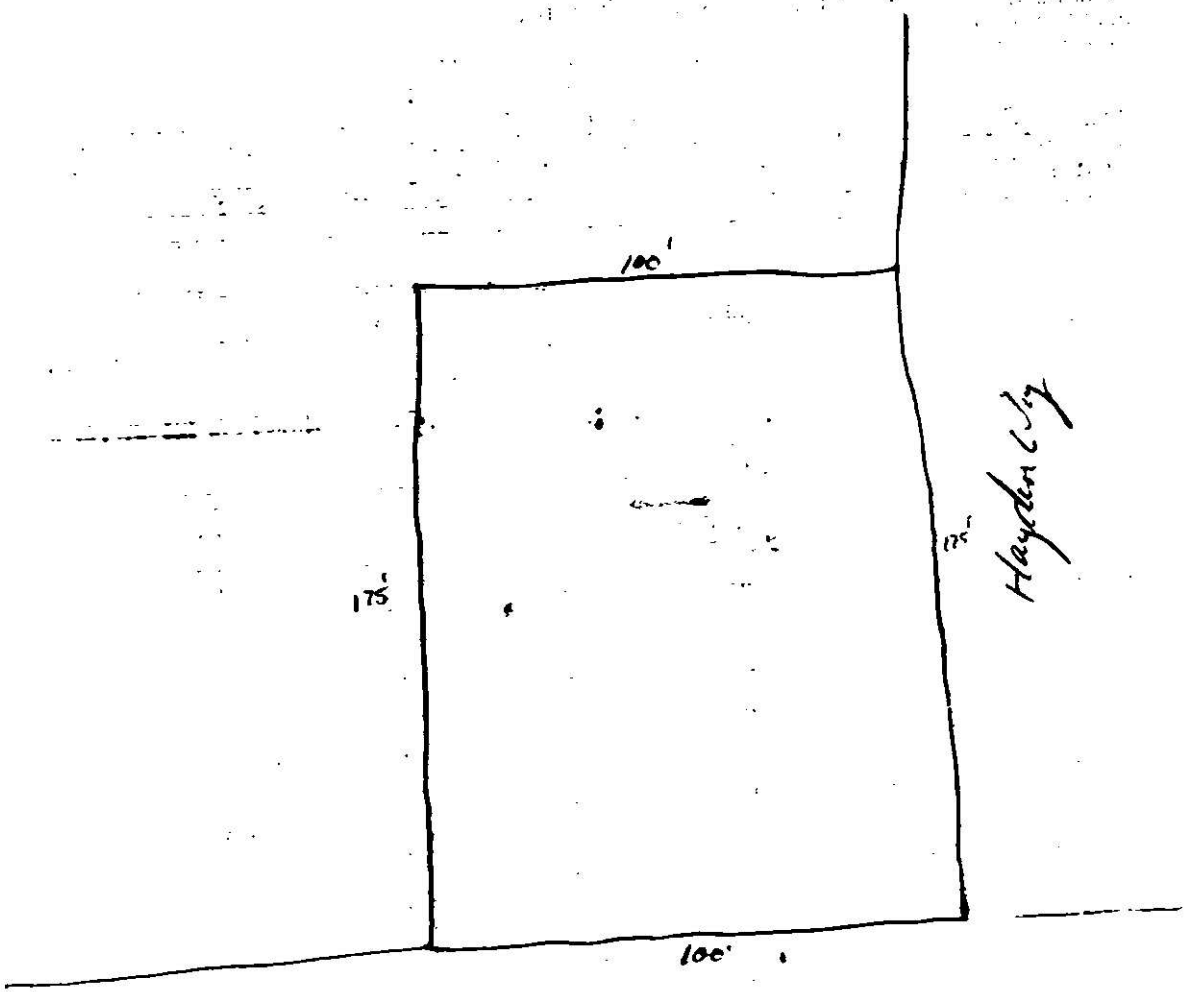
S - Suitable PS - Provisionally Suitable U - Unsuitable

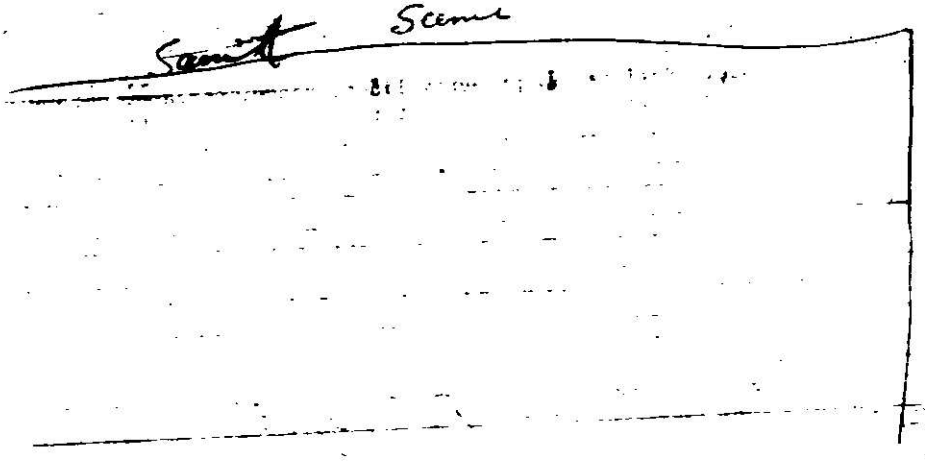
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

Recommendations/Comments: Fill overlays soil series soil area is being used as a graveled parking area

Described By: [illegible]
Title: Environmentalist Date: June 16, 1978

DHS Form 2604 (2/77)
Sanitation


100'
175'
175'
100'
Hayden Cir


Scenic
Scenic

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

SIR.NO. 14208
T: C.NO 183-201-24
MAP DATE 10-16-72
DATE 6-19-78

NAME OF OWNER Griffin & Hollingsworth Development Corp.

ADDRESS OF OWNER 727 Sugate Ave. Charlotte, N. C.

LOCATION OF LOT Corner of Hayden Way & Scenic Drive (Boulevard Acres) Lot #19.

At your request and pursuant to Section. 1900 of the North Carolina Administrative Code, Title 10, Department of Human Resources, Chapter 10, Health Services, Subchapter 10A, a site evaluation has been made for an on premises ground absorption sewage disposal system on the property designated above and the following conditions were found:

Soil Structure Mixed
Site Classification Unsuitable

Section 10 of the North Carolina Administrative Code 10A, .1910 of these regulations states "Sites originally classified as unsuitable may be used for soil absorption disposal systems, provided engineering, hydrogeologic, and soils studies indicate to the local agency that a suitable alternate system can reasonably be expected to function satisfactorily.

Section 10, North Carolina Administrative Code 10A, .1916 states that "The design, construction, and maintenance of ground absorption sewage systems, whether septic tank systems or alternate systems shall be the responsibility of the owner, developer, installer, and user of the system as applicable in the circumstances."

We would also advise you that according to Regulation 10, North Carolina Administrative Code 10A, . 1916(b), "Actions of representatives of state or local agencies engaged in the evaluation and determination of measures required to effect compliance with the provisions of this section shall in no way be taken as a guarantee that sewage disposal systems approved and permitted will function in a satisfactory manner for any given period of time or that such employees assume any liability for damages, consequential or direct, which are caused or which may be caused, by a malfunction of such system.

These regulations became effective July 1, 1977. Since that time the second sentence of Section .1910(c) has been found to be nugatory. For this reason, if you desire to file for permission to install an "alternate" system you should present this office with your proposals in the form of plans and specifications. These would be reviewed and if it is found that the system may reasonably be expected to function satisfactorily approval may be given on the execution by you of a "Septic Tank Agreement Form" available in this office.

John R Adkisson

John R. Adkisson, Environmentalist

KHD #584

R

SEE INSTRUCTIONS ON BACK

Date Received 1-26-79

ICAR(S) Application No. 14205

T. C. No. 193-201-24

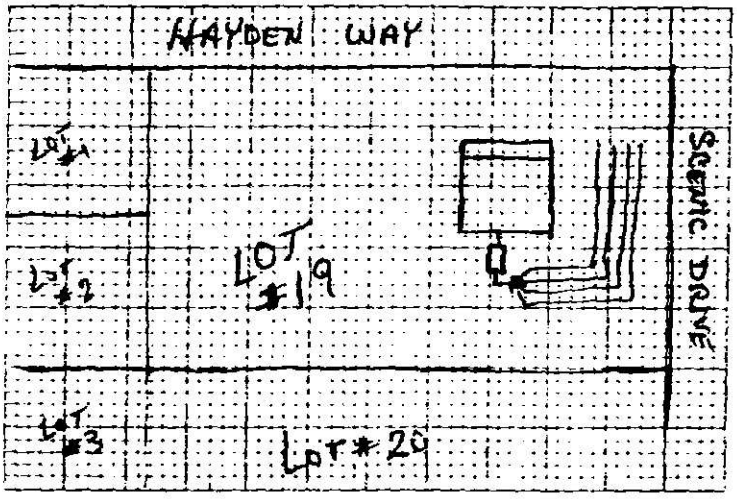
Map Date 10-16-72

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)

4) Mobile Home ____Yes X No
Residence ____Yes X No
4) No of Bedrooms ____
5) Business Use — Max No Employees 1
6) Washing Machine ____Yes X No
7) Garbage Disposal ____Yes X No
8) Dishwasher ____Yes X 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 X No
House located within 200 feet of community sewer ____Yes X No
11) FHA Case No. ____
12) VA Case No. ____

13) NAME OF OWNER Griffin-Hollingsworth Development Corp Inc.
(LAST FIRST MIDDLE)

14) ADDRESS OF OWNER 727 Fugate Ave - Charlotte, N.C.

15) PHONE NO. Home 375-5358 Office 847-9404

16) LOCATION OF SYSTEM Corner Hayden Way & Scenic Drive (off Blvd E. Ind)
STREET OR COUNTY ROAD

17) SUBDIVISION Boulevard Acres Lot No. 19 Block No. ____

Map Book No. 7 Page No. 335

18) DEED REFERENCE — DEED BOOK 2542 AT PAGE 328

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ____ NO DATE RUN ____

20) PTR NUMBER (See Instructions) ____

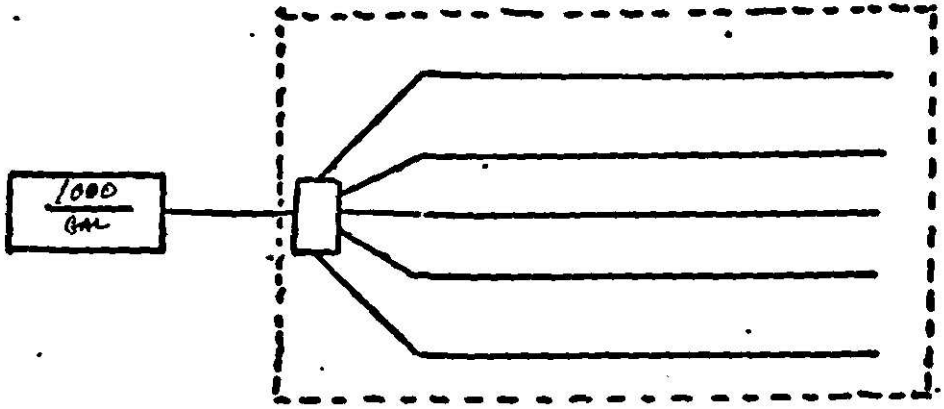
The undersigned person hereby agrees that he has read the foregoing application and that the contents of same are true. It is understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

1-25-79
DATE OF APPLICATION

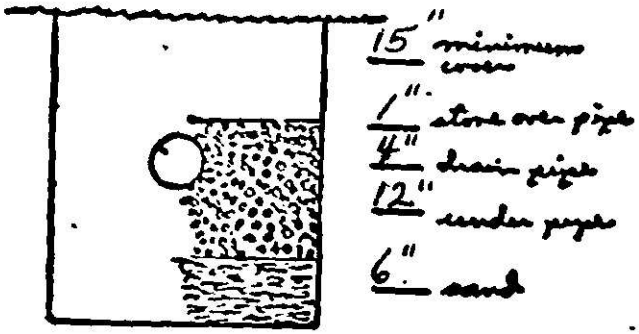
By Griffin-Hollingsworth Dev. Co. Inc.
George A. Hollingsworth, Pres.
OWNER

EHD-5-76

Environmental Health Department's Copy



4" drain pipe 220 FT long 3' on center
660 sq foot bottom area.
(4 LINES 55' LONG)



Submitted for consideration and approval:

CORNER HAYDEN WAY & SCENIC DRIVE (AT SEC. E. IND BLVD)
Property Location

Griffin & Hollingsworth D&U. Co, Inc.
by George K. Hollingsworth, P.E.S.
Owner's Signature

Bed System

Mail to: George H. Hollingsworth
709 Regata Rd.
Charlotte NC 28205

#14205

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

COPY

SEPTIC TANK AGREEMENT

The undersigned, Griffin & Hollingsworth Dev Co Inc owner of property located at 8700 Senic Drive (corner HAYDEN WAY), ("the site") and described in instrument recorded in Book 7 at Page 335, 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 idemnify 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 24th day of JAN, 1979

Griffin & Hollingsworth Development Co. Inc. (Seal)

By S. H. Hollingsworth Pres. (Seal)

Attest: Ann H. Hollingsworth Secretary

PRESENTED FOR REGISTRATION 3:37 PM '79 JAN 26 RECEIVED AND DULY RECORDED IN THE OFFICE OF REGISTER OF DEEDS MECKLENBURG CO N.C.

STATE OF NORTH CAROLINA,
COUNTY OF MECKLENBURG

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

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

_____
Notary Public

My Commission Expires: _____

STATE OF NORTH CAROLINA,
COUNTY OF MECKLENBURG

I, Eleanor N. Sloan, a Notary Public for said County and State, do hereby certify that S. H. Hollingsworth personally came before me this day and acknowledged that he is Pres of Griffin & Hollingsworth, 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 President, sealed with its corporate seal and attested by Ann H. Hollingsworth as its Secretary.

WITNESS my hand and notarial seal, this 24th day of January, 19 79.

Eleanor N. Sloan
Notary Public

My Commission Expires: My Commission Expires [illegible]

Drawn By: Kenneth Lloyd

Date Issued January 26, 1979 Serial No. 2641

LA No. 14205

T. C. No. 193-201-24

Map Date 10/16/72

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 Griffin-Hollingsworth Development Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 727 Fugate Avenue, Charlotte ZIP _____

LOCATION OF LOT corner: Hayden Way and Scenic Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Boulevard Acres LOT NO. 19 BLOCK NO. _____

MAP BOOK NO. 193 PAGE NO. 20

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 14205. 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.

John R. Atkinson

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued 25 April 79 Serial No. 2649 ICAR(S) Permit No. 14205

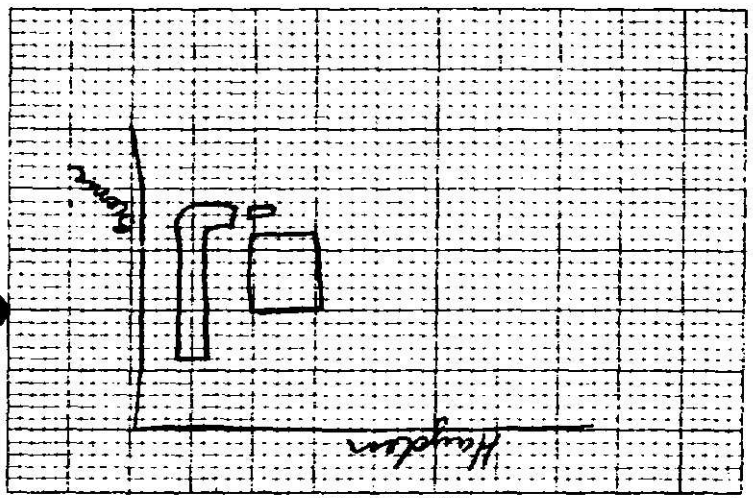
T. C. No. 193-201-24

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 14205, dated 1/26/79 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 25 May, after which date this permit shall be null and void.

Alternate system by owner



PLOT OF SYSTEM

Permeability Rate unsuitable

Liquid Capacity of Tank 1000 gal

Tank Construction P.C. Conc sealed

Absorption and or Nitrification Lines.

Total Line Length 220'

Number of Lines 4

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Griffin Hollingsworth Development Corp.

LOCATION OF PROPERTY (Corner Hayden Wy & Seema Dr) 1724 Hayden Way

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.

Comments: 12' x 55' x 12" stone over 6" sand

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 Section 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 1 May 79 Serial No. 2553 C of A (s) No. 14205

T. C. No. 193-201-24

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 Griffin Hollingsworth Development Corp.
(LAST FIRST MIDDLE)

Location of Property 1724 Hayden Way

Application Number 14205 Permit Number 14205

Inspection Data:

Liquid Capacity of Tank 1000 gal Tank Material P.C. Conc.

Total Length of Drain Tile 226 Number of Lines 4

Depth of Filter Material 17" S/me over 6" sand Cover Depth 18" - 15"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected — (DATE) Tank Inspected 1 May (DATE)

Nitrification Field Inspected 1 May (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 Slight - Good job —

Steve Wood
Environmentalist

EHD-5-76

Environmental Health Department's Copy