Date Received 6-23-83

RECEIVED
JUN 23 1983
ENVIRONMENTAL HEALTH

Job # 928

SIR No. 19797

T. C. No. RO 223-201-17

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER William Trotter Company
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER P. O. Box 35269 Charlotte, N. C. ZIP 28235

3) PHONE NO. Home _____ Office 333-8804

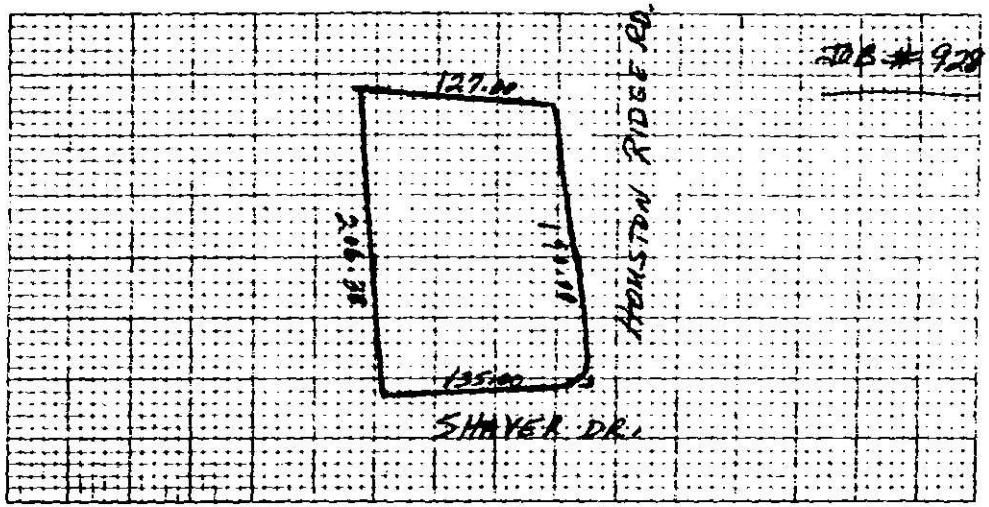
4) LOCATION OF PROPERTY Off Providence Road West
(STREET OR COUNTY ROAD)

5) SUBDIVISION Providence West LOT NO. 4 BLOCK NO. 2

MAP BOOK NO _____ PAGE NO _____ Address: 8845 Shaver Drive

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

By: Robert R. Lynch
OWNER William Trotter Company

EHD-5-76

Environmental Health Department's Copy

Serial No. 5108

SIR No. 19797

T C No. 223-201-17

Date Issued 7-14-83

Map Date

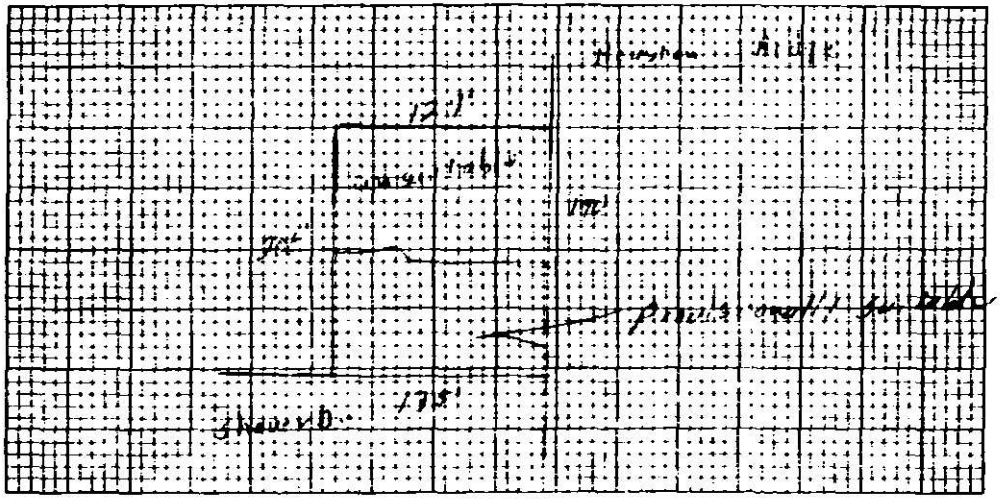
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER William Trotter Company
LAST FIRST MIDDLE

ADDRESS OF OWNER P.O. Box 35269 Charlotte, NC ZIP 28235

LOCATION OF PROPERTY 8845 Shaver Drive
STREET OR COUNTY ROAD

SUBDIVISION Providence West LOT NO 4 BLOCK NO. 3



PLOT PLAN

This is to certify that a soil investigation and on-site 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 permit to install, construct, alter or repair the specific system shall be obtained from the Mecklenburg County Department of Environmental Health 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 Mecklenburg County Department of Environmental Health prior to installation based on the permeability 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 indicated as acceptable for system installation on the above plot.
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 Mecklenburg County Department of Environmental Health renders the area indicated as acceptable for system installation unsuitable for 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 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.

Environmental Health Director or Authorized Section Head

FHD-5-76 William A. Marlin
Soil Scientist

Environmental Health Department's Copy

Job # 928

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 19797

T.C. NO. PO 223-201-17

(Ground Absorption Sewage Disposal)

OWNER: William Trotter Co.
ADDRESS: PO Box 35269
Charlotte, N.C. 28235
LOCATION OF SITE: 8844 Shaver Dr.

PLAT NO: 14 B2
LOT SIZE: Approx 26,000

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S / PS 2-15% / U	S / PS Complex slopes / U	S / PS — / U	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 — / U	S / PS / U
3. SOIL STRUCTURE (12-36 inches)	S / PS Blocky / U	S / PS Blocky / U	S / PS — / U	S / PS / U
4. SOIL DEPTH (inches)	S / PS 36-40" / U	S / PS Depth Variable / U	S / PS — / U	S / PS / U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S / PS >36" / U	S / PS Depth Variable / U	S / PS — / U	S / PS / U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S / PS >36" Top groundwater / U	S / PS Eroded Areas / U Collect water	S / PS Drainage way / U	S / PS / U
7. OTHER (Specify)	S / PS see Note / U	S / PS / U	S / PS / U	S / PS / U
8. SOIL GROUP	10A	10A	10A	
9. SITE CLASSIFICATION	Provisionally suitable	unsuitable	unsuitable	
10. SOIL SERIES	Cecil Life	Complex slopes	Drainage way	

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)

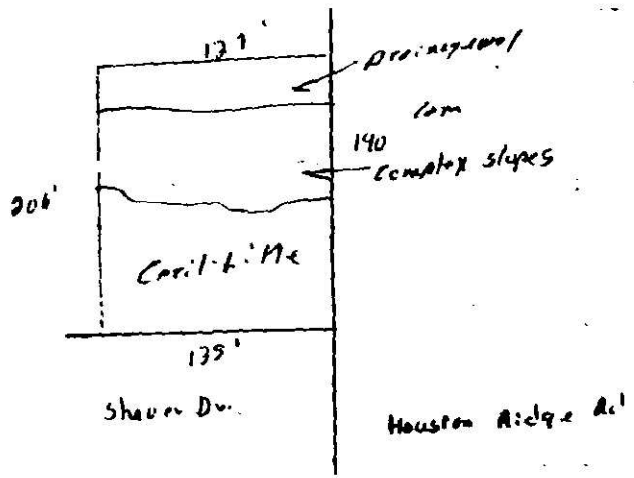
Recommendations/Comments: system may require lift station - somewhat limited Area

Described by: William A. Marlin
Title: Soil Scientist

Date: 7-13-83

EHD 539 (Revised: 6/82)

EH


137'
Drainage wall
Com
140
Complex slopes
206'
Cerit-Lime
135'
Shaver Dr.
Houston Ridge Rd

Job # 928

Date Received 7-22-83

RECEIVED
JUL 22 1983
ENVIRONMENTAL HEALTH

CAR(S) Application No. 19797

T. C. No. 223-201-17

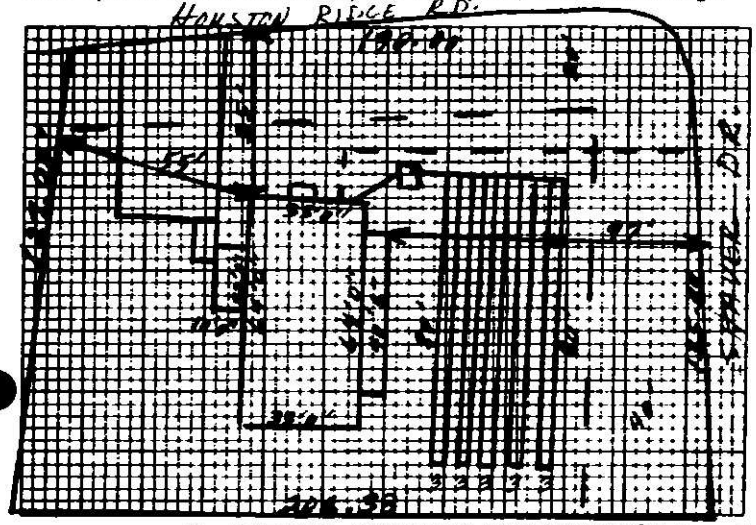
Map Date

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) X 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 X Yes ___ No

4) No. of Bedrooms 4
5) Business Use — Max No Employees
6) Washing Machine X Yes ___ No
7) Garbage Disposal X Yes ___ No
8) Dishwasher X Yes ___ No
9) Water Supply:
A) Individual Well
B) Governmental System
C) Community System:
1. Well source X
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 William Trotter Company
LAST FIRST MIDDLE

14) ADDRESS OF OWNER P. O. Box 35369 Charlotte, N. C. 28235

15) PHONE NO. Home ___ Office 333-8814

16) LOCATION OF SYSTEM 8865 Shaver Drive
STREET OR COUNTY ROAD

17) SUBDIVISION Providence West Lot No. 3 Block No. 3

Map Book No. ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES ___ NO DATE RUN 7/13/83

20) PTR NUMBER (See Instructions) 1-7-7

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.

July 19, 1983
DATE OF APPLICATION

OWNER William Trotter Company

EHD-S-76

DEPARTMENT'S COPY

Serial No. 6776

Date Issued 11-21 1983

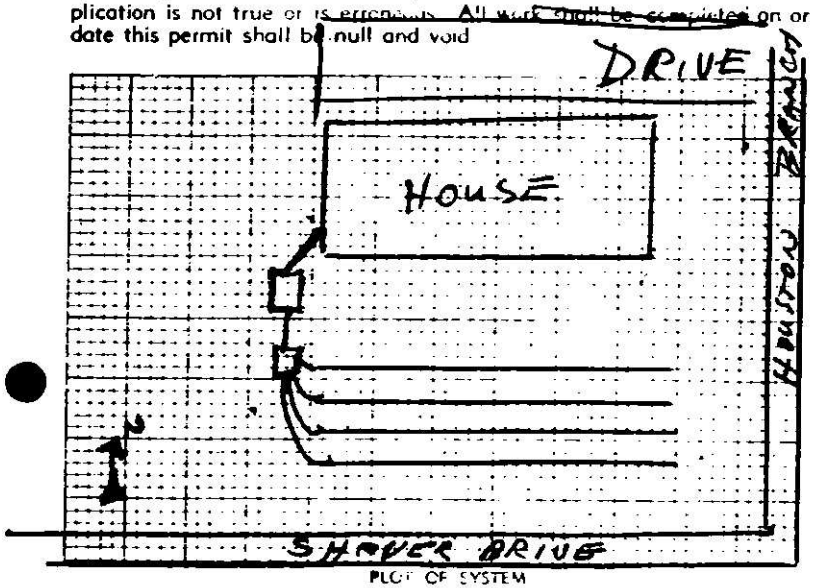
ICAR(S) Permit No. 19797

T. C. No. 223-201-17

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 X 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 19797 dated 7-19-83 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 Dec 20th 1983, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS IVA

Liquid Capacity of Tank 1500 gal.

Tank Construction Pre Cast Con...

Absorption and or Nitrification Lines

Total Line Length 400 lin. FT

Number of Lines FOUR

Distance from House 10 FT.

Distance from Property Line 20 FT

Distance from Well 300 FT COMMUNITY SOURCE

NAME OF OWNER William TROTTER Co

LOCATION OF PROPERTY 8845 SHAVER 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 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.

FOUR TRENCHES Tube 100FT X 3FT X 12 inches stone layout
COVER - grade bds - plumb w/m line into DIST Box

Comments:

B. [signature]
Division or Section Head

Ralph Miller
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.

BHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

AT 7-29-83

Date Issued 7-26-83

Serial No. 6626

SIR No. 19797

P0
T. C. No. 223-201-17

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 William Trotter Company
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P.O. Box 35269, Charlotte, NC ZIP 28235

LOCATION OF LOT 8845 Shaver Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Providence West LOT NO 4 BLOCK NO. 3

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 19797. 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. LIFT STATION MAY BE REQUIRED
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.

Ralph Mills
Environmentalist

John R. Atkinson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

C of A (s) No 19797

Date Issued 12/2/83 Serial 6321 T. C. No. 223-201-17

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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

Name of Owner Trotter, William C.
LAST FIRST MIDDLE

Location of Property 8345 Shaver Dr.

Application Number 19797 Permit Number 19797

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material PC concrete

Total Length of Drain Tile 900' Number of Lines 4

Depth of Filter Material 12' Cover Depth 1½-2'

Water Supply Source Comm water Distance from Water Source >500'

Excavation Inspected 12/12/83 DATE Tank Inspected 12/2/83 DATE

Nitrification Field Inspected 12/12/83 DATE

Washing Machine Line Inspected, If Applicable N/A 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 _____

Randy C Poole RS
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

APPLICATION FOR AN IMPROVEMENT PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

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

(OFFICE USE ONLY)
FILE: 19797
TC:
SERIAL: No 18027

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.

ENVIRONMENTAL HEALTH DIVISION ☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 8845 (STREET NO) SHAVER DR. (STREET) ② FILE: 19797

③ JURISDICTION: MECKLENBURG COUNTY ④ TAX PARCEL NO.: 223-201-17

⑤ SUBDIVISION: PROVIDENCE WEST ⑥ LOT: 4 ⑦ BLOCK: 2

OWNER

⑧ NAME: LEON (FIRST) E. (MIDDLE) TITLER (LAST)

⑨ MAILING ADDRESS: 8845 SHAVER DR.

⑩ CITY: CHARLOTTE ⑪ STATE: NC ⑫ ZIP: 28226

⑬ PHONE: (WORK) 554-1100 ⑭ (HOME) 541-9196

REQUEST

This request is for a(n):

⑮ ☐ New permit ⑰ ☐ Authorization for mobile home exchange

⑯ ☒ Repair or alteration permit ⑱ ☐ Other (specify) _____

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 4 ㉕ Type? _____

㉓ Maximum occupancy? 4 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 HEALTH DEPARTMENT to enter on the property for the purpose of processing this request.

Signed: Leon E. Titler

Date: 3/30/89

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, 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

_____ / _____
Director or Authorized Section Head Date

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

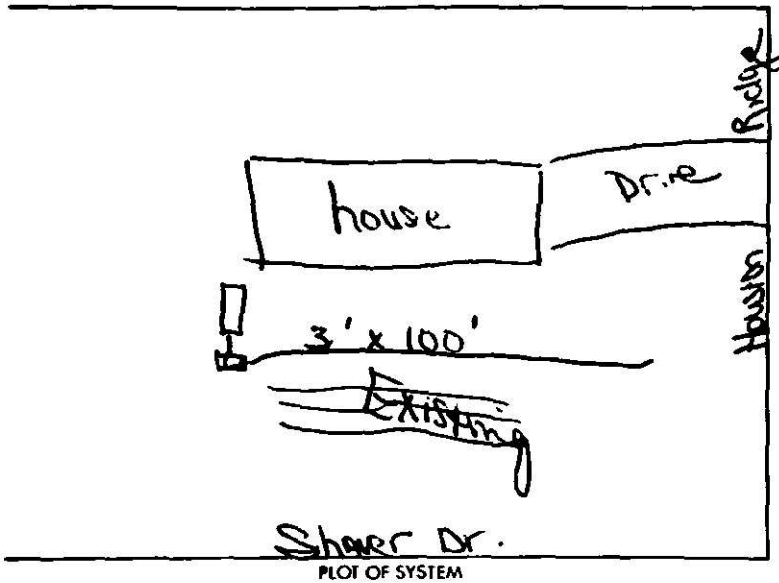
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 19797 DATE: 4/5/89

TC: 223-201-17 ☐ L

SERIAL № 12545

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 3/30/89. All work shall be completed on or before 5/5/89, 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 ____ gallons

Liquid Capacity of Dosing Tank ____ gallons

Tank Construction ____

Repair

~~Absorption and/or~~ Nitrification Lines:

Trench Width 3 feet

Total Line Length 100' feet

Number of Lines 1

Depth of Stone 12 inches

Distance from House 15 feet

Distance from Property Line 10 feet

Distance from Well Community feet
>10' from Water Line

NAME OF OWNER Titler Leon E

LOCATION OF PROPERTY 8845 Shaver Dr.

Comments: INSTALL one (1) 3'x 100' trench 12" Stone
Straw Cover. Tie in to existing D. Box

Division or Section Head

Jackie J. Kiser, R.S.
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