Date Received 3-6-73

APT No 5702

T C No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

OFFICE PROPERTIES INC, 4705 PARK ROAD, CHARLOTTE

1) NAME OF OWNER ASH BAUGH (LAST) HENRY (FIRST) S (MIDDLE)

2) ADDRESS OF OWNER 7026 NORTHWOOD RD, CHARLOTTE ZIP 28211

3) PHONE NO Home 364 2549 Office

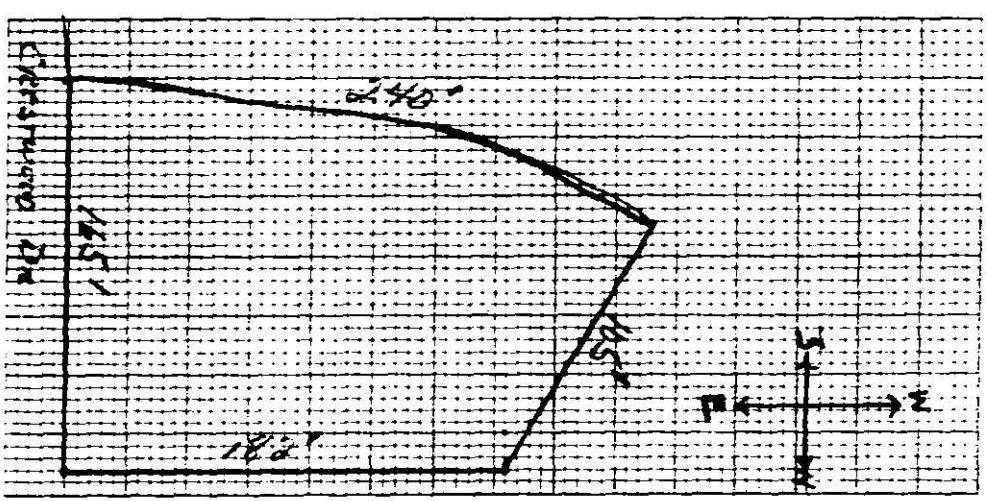
4) LOCATION OF PROPERTY CRESTWOOD DRIVE (FORMERLY WESTWOOD DR) (STREET OR COUNTY ROAD)

5) SUBDIVISION LAKE TRADEMARK ESTATES LOT NO 5 BLOCK NO 2

MAP BOOK NO - PAGE NO -

6) DEED REFERENCE DEED BOOK 3451 PAGE NO 564

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

OWNER

FORM NO. E-1-B-1-72

HEALTH DEPARTMENT'S COPY

Serial No. [illegible]

PTR No. 5702
P.O.
T C No 225-111-15

Date Issued March 29, 1973

Map Date 2-14-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

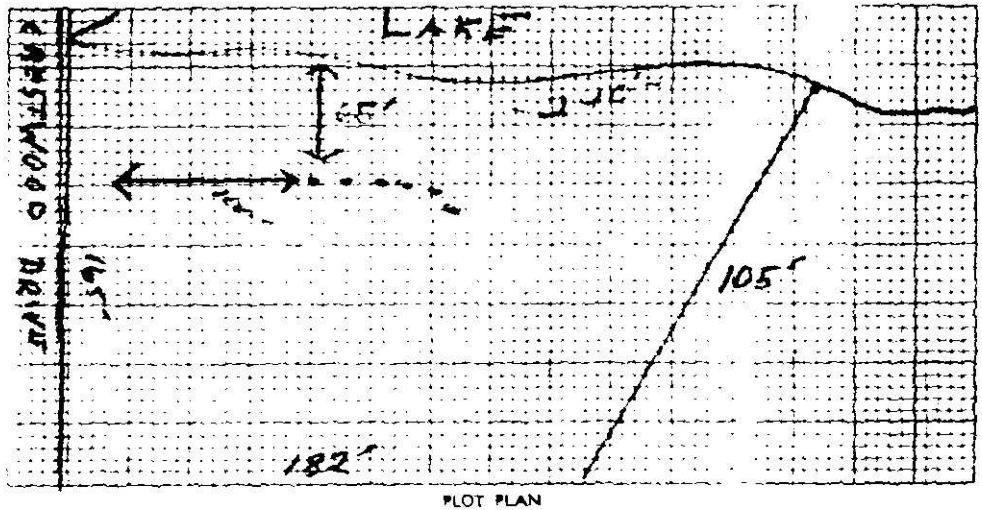
PERCOLATION TEST REPORT

NAME OF OWNER Ashbaugh (LAST) Henry (FIRST) S. (MIDDLE)

ADDRESS OF OWNER 7026 Morganford Road ZIP 28211

LOCATION OF PROPERTY Deerwood Drive (STREET OR COUNTY ROAD)

SUBDIVISION Lake Providence Estates LOT NO 5 BLOCK NO 2



PLOT PLAN

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 issue date.

John R Adkisson

Director, Environmental Health Division or
Authorized Section Head

FORM NO. E-2-4-1-71

HEALTH DEPARTMENT'S COPY

Date Received 5/24/76

APT No. [redacted]

T C No. 225-111-27

Map Date 5/25/76

Copy

J. M. Ashcroft
P.O. Box 11552
Charlotte
28209

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

Perc Test
Report 60m

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER ASHBAUGH (LAST) HENRY (FIRST) S. (MIDDLE)

2) ADDRESS OF OWNER 7919 Red Lion Rd CHARLOTTE N.C. ZIP 28211

3) PHONE NO. Home _____ Office _____

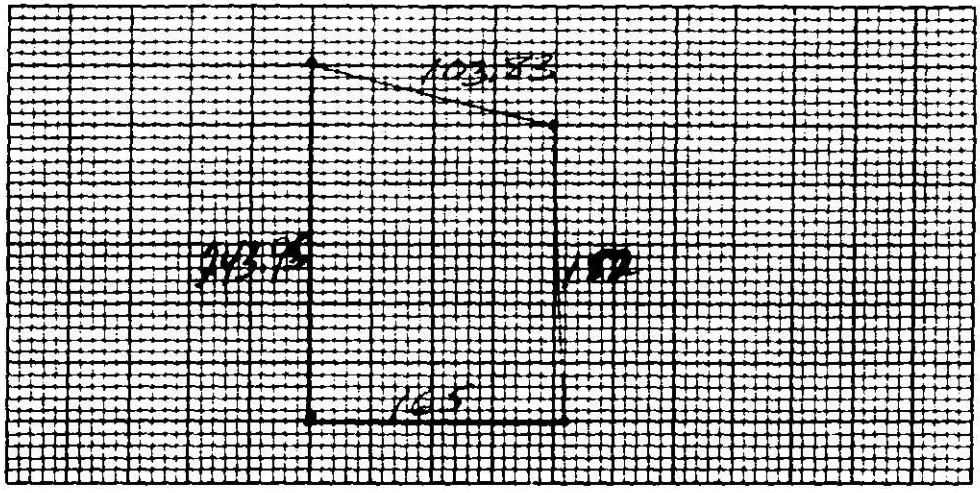
4) LOCATION OF PROPERTY Creekwood Dr (Off West Providence)
(STREET OR COUNTY ROAD)

5) SUBDIVISION Lake Providence Est. LOT NO. 5 BLOCK NO. 2

MAP BOOK NO. _____ PAGE NO. _____

6) DEED REFERENCE DEED BOOK 3558 PAGE NO. 475

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

Signature
OWNER

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

HEALTH DEPARTMENT'S COPY

5702

SOIL INVESTIGATION REPORT

Date of Investigation May 21, 1976 AFT NO. [redacted]

Owner H. S. Ashbaugh

Location of Property Crestwood Drive (off W. Providence) lot No. 5 Block

Soil Suitability Ratings Tax Code No. 225-111-27

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Cecil	Helena		
2. Soil Slope	acceptable 2-8%	acceptable 2-4%		
3. Soil Depth	acceptable 72"+	acceptable 48"+		
4. Soil Texture	acceptable clay	unacceptable 2:1 Expanding clay		
5. Soil Structure	acceptable subangular blocky	acceptable blocky		
6. Restrictive Horizons	—	—		
7. Soil Drainage	acceptable water table 36"+	unacceptable perched high water table		
8. Soil Permeability (Percolation Rate)	acceptable 60 min/in	unacceptable 72.00 min/in		
9. Other	—	—		
10. Overall Rating	acceptable	unacceptable		

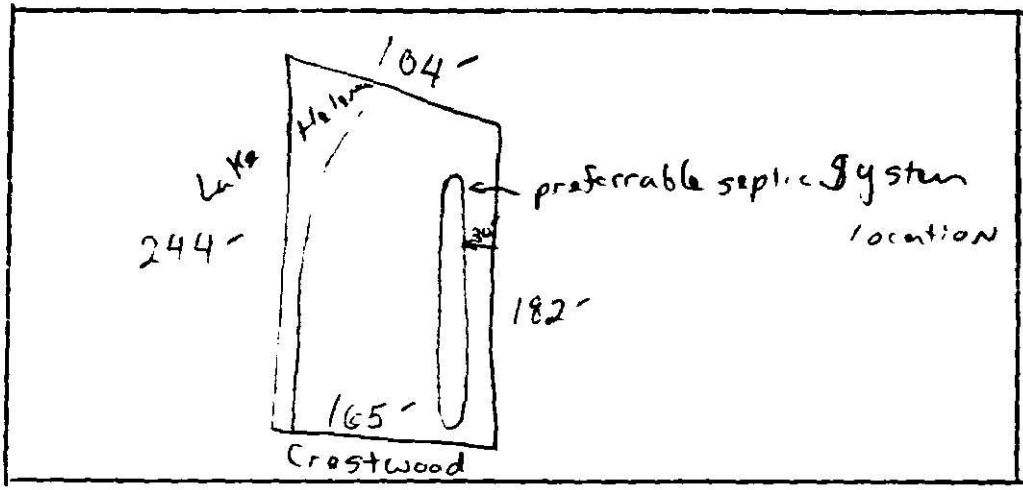
Recommendations Based on this investigation, the lot is recommended for approval for installation of a septic tank system. System design should based on a percolation rate of 60 min/in. and should be placed in the area of Cecil soils.

See diagram on back

[redacted] Edward Casemont
Soil Scientist

3/16/75
HD 539

DIAGRAM OF PROPERTY



3/18/75

EHO 559

Serial No. 6331

PTR No. 1

Date Issued 6/24/76

T C No. 225-111-27

Map Date 3-25-76

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

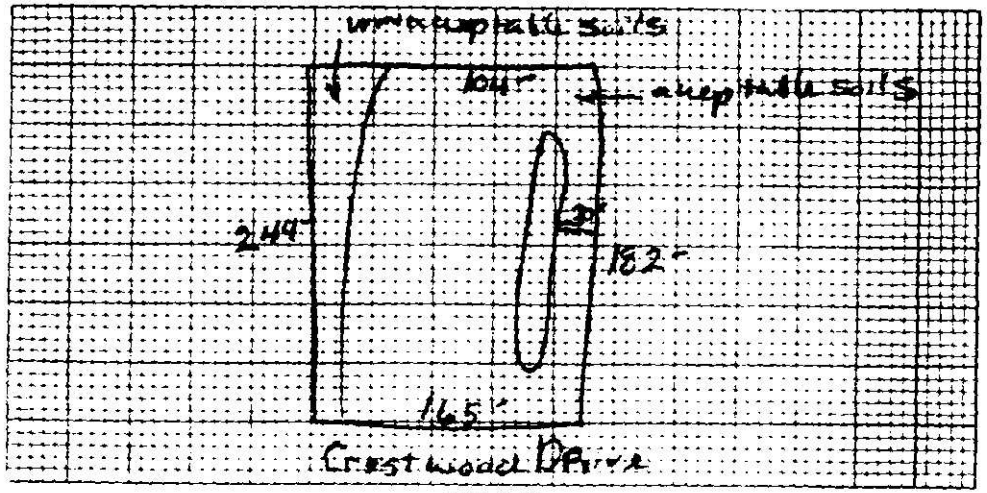
PERCOLATION TEST REPORT

NAME OF OWNER Ashbaugh (LAST) Henry (FIRST) S. (MIDDLE)

ADDRESS OF OWNER 7019 Red Lion Road, Charlotte, N. C. ZIP 28211

LOCATION OF PROPERTY Crestwood Drive (STREET OR COUNTY ROAD)

SUBDIVISION Lake Providence Estates LOT NO 5 BLOCK NO 2



PLOT PLAN

This is to certify that a percolation test has been run and an onsite 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 Count. 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 issue date.

*Results determined by soil analysis

W. Edward Lamont
Soil Scientist

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

FORM NO. E-2-4-1-71

HEALTH DEPARTMENT'S COPY

Date Received 3/1/78

ATTN: STEVE WOOD

ICAR (S) Application No. [redacted]

T. C. No. 225-111-27

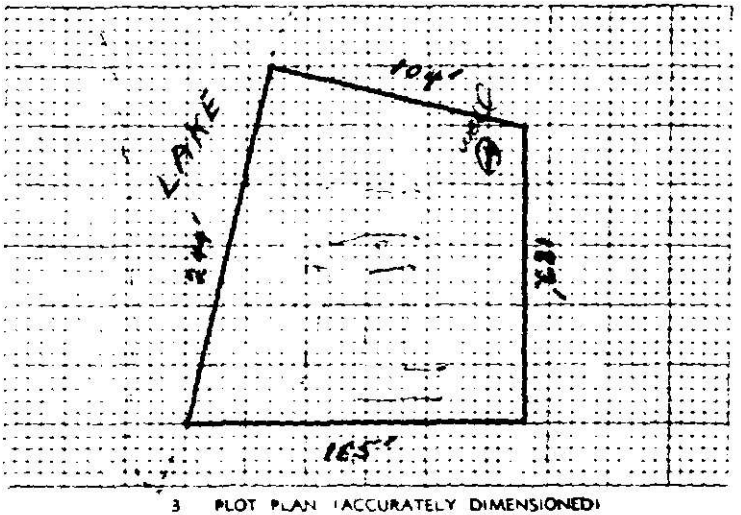
Map Date 3-1-78

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 X No
Residence X Yes ___ No
4. No. of Bedrooms 3
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 X
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 Cauthen, Robert Henry, Jr. (LAST FIRST MIDDLE)

14. ADDRESS OF OWNER 3844 Wellington Ct., Charlotte, N.C. 28211

15. PHONE NO Home 366-7727 Office 374-1311-ans. serv.

16. LOCATION OF SYSTEM [redacted] (off of West Providence Rd. at Providence Lake Estates) (STREET OR COUNTY ROAD)

17. SUBDIVISION Lake Providence Estates Lot No. #5 Block No. 2

Map Book No #2758 Page No. #343

18. DEED REFERENCE — DEED BOOK 4000 AT PAGE 0064

19. HAS A SOIL INVESTIGATION BEEN RUN? X YES NO DATE RUN 3-25-76

20. PTR NUMBER (See Instructions) 5702

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.

3-1-78
DATE OF APPLICATION

Robert H. Cauthen, Jr.
OWNER

EHD-S-76

Environmental Health Department's Copy

Date Issued 3/1/78

Serial No. 1580

LA No. 5702

T. C. No. 225-111-27

Map Date 3-1-78

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 Cauthen, (LAST) Robert (FIRST) Henry (MIDDLE) Jr.

ADDRESS OF OWNER 3844 Wellington Court, Charlotte, N. C. ZIP 28211

LOCATION OF LOT Crestwood Drive (STREET OR COUNTY ROAD)

SUBDIVISION Lake Providence Estates LOT NO 5 BLOCK NO 2

MAP BOOK NO 2758 PAGE NO 343

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 5702. 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

Environmentalist

John R Atkisson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Serial No. 1831

Date Issued _____

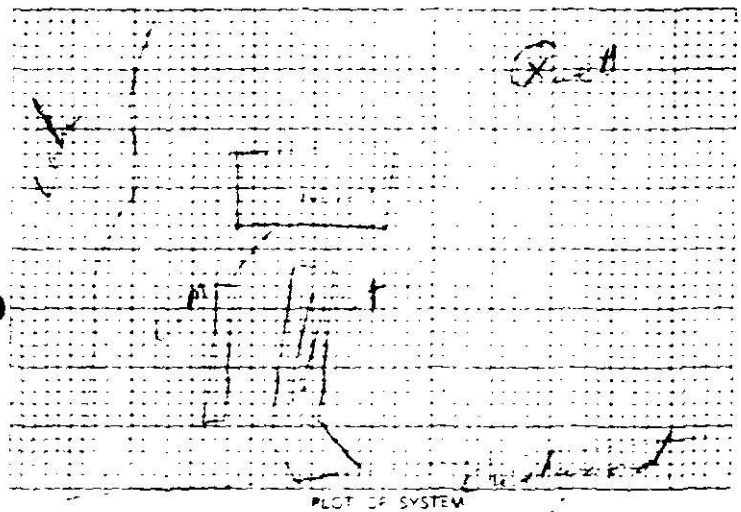
ICAR(S) Permit No. 5202

T C No 225-[illegible]-7

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 # 5202, dated 5/[illegible]/[illegible] and the permit shall be void and of no effect if the information provided in the application is not true in its entirety. All work shall be completed on or before [illegible] after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate 25

Liquid Capacity of Tank 1,500 gal

Type Construction RC Concrete

Absorption and/or Sumidcation Lines:

Total Line Length 475' [illegible]

Number of Lines 5

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER [illegible]

LOCATION OF PROPERTY [illegible]

The system will meet all the minimum 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.**

Comments

Division or Section Head

Environmentalist [signature]

* 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

Serial No. 1806

C of A (s) No. 5702

Date Issued [illegible]

T C No 225-11-27

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION

~~CERTIFICATE OF APPROVAL~~ CERTIFICATE OF COMPLETION

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

Name of Owner [illegible] Robert [illegible]
LAST FIRST MIDDLE

Location of Property [illegible]

Application Number 5202 Permit Number [illegible]

Inspection Data:

Liquid Capacity of Tank [illegible] Tank Material [illegible]

Total Length of Drain Tile 415 Number of Lines [illegible]

Depth of Filter Material [illegible] Cover Depth 24

Water Supply Source [illegible] Distance from Water Source [illegible]

Excavation Inspected [illegible] DATE Tank Inspected [illegible] DATE

Nitrification Field Inspected [illegible] DATE

Washing Machine Line Inspected, If Applicable [illegible] 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 [illegible]

Environmentalist [illegible]

BHD-5-76

Environmental Health Department's Copy