7 Date Received 2 5 23 APT No 5514

T C No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Tucker (LAST) David E & Ann S. (FIRST) (MIDDLE)

2) ADDRESS OF OWNER 4000 Elmdale Ct. ZIP 28204

3) PHONE NO Home 596 4309 Office 596 9780

4) LOCATION OF PROPERTY Mineral Springs Rd + Neal Rd. (STREET OR COUNTY ROAD)

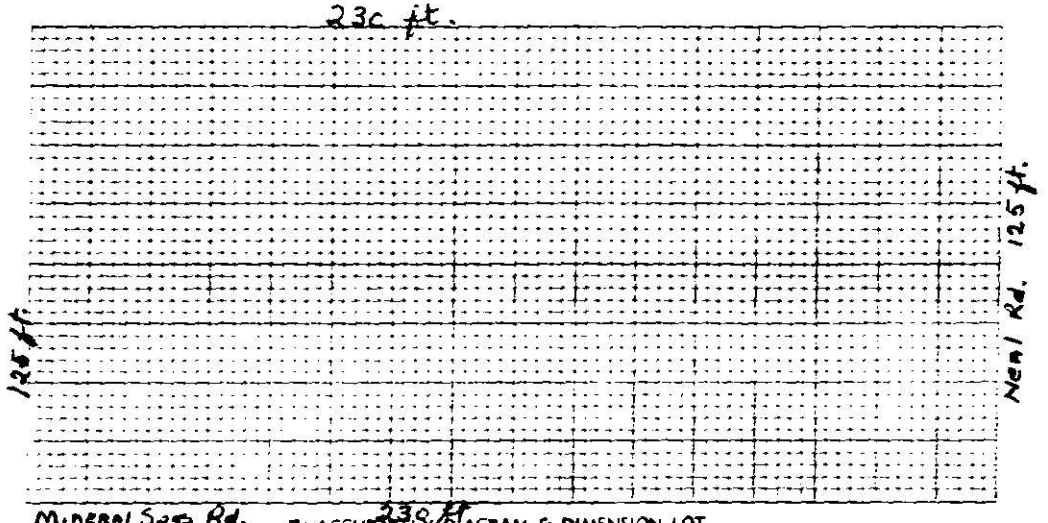
5) SUBDIVISION Mallard Creek Township LOT NO BLOCK NO

MAP BOOK NO 6 PAGE NO 168

6) DEED REFERENCE DEED BOOK 3465 PAGE NO 394

formerly owned by John W Carpenter + Mary Ann W Carpenter

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

David E + Ann S. Tucker
OWNER

FORM NO E-1-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 2975

PTR No. 5514

Date Issued February 23, 1973

T C No 047-033-02

Map Date 9-1-70

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

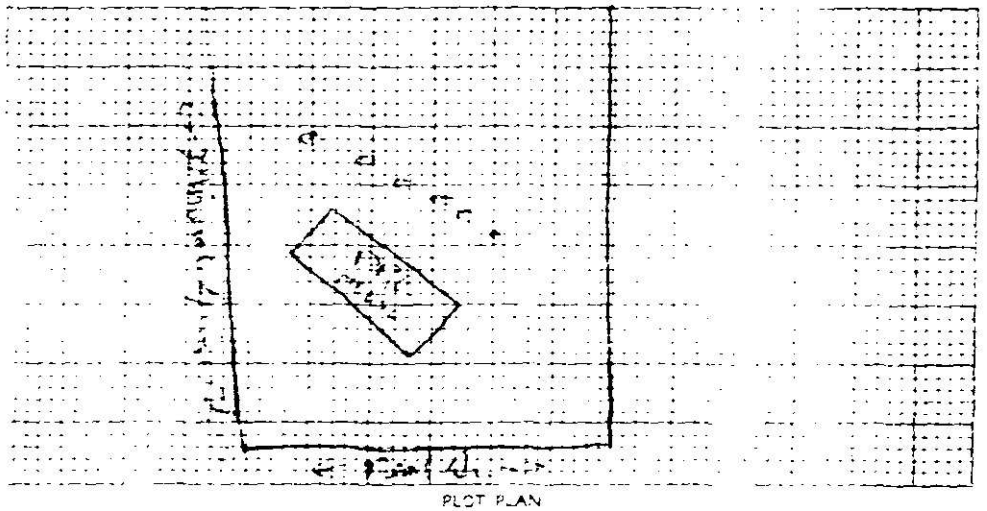
PERCOLATION TEST REPORT

NAME OF OWNER Tucker (LAST) David (FIRST) F. (MIDDLE)

ADDRESS OF OWNER 4000 Elmdale Court ZIP 28206

LOCATION OF PROPERTY Mineral Springs Road and Neal Road (STREET OR COUNTY ROAD)

SUBDIVISION Mallard Creek Township LOT NO BLOCK NO



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 in that portion of the lot as indicated on above plot.

The percolation rate determined by the test was 40 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 must be obtained prior to the beginning of any construction of buildings or 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 trenching) 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. Hobson

Director, Environmental Health Division or Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

5

Date Received 3-1-73

ICAR (S) Application No. 5514

T. C. No 047-013.02

Map Date 9/70

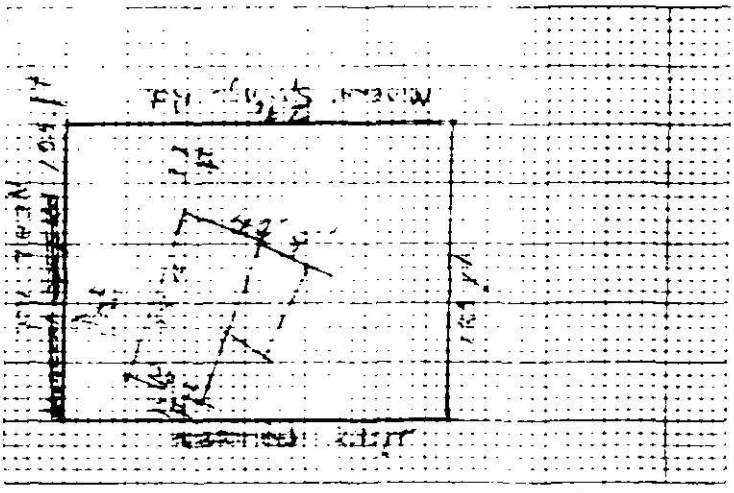
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

Application for an
Installation, Construction, Alteration, and/or Repair Permit
Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

The ... that property described hereinafter hereby applies to the Mecklenburg County Health Department for a permit to

1 ✓ ...ll or Construct 2 ___ Alter or Repair an individual septic tank wastewater treat... ... with a ... subsurface soil absorption effluent discharge



3 PLOT PLAN ACCURATELY DIMENSIONED

4 No. ... 3

5 Source of Water Supply
Employee ___

6 Washing Machine ... No

7 Garbage Disp... No

8 Dishwasher ... No

9 Water Supply
A Individual ... ✓
B Governmental system ___
C Community System ___
Well source ___
D Governmental ... ___

10 Sewage System
House located within ... feet ___
Structure located within ... feet ___
Community sewer ___ Yes 2 No

11 FHA Case No. ___

12 VA Case No. ___

13) NAME OF OWNER Tucker (LAST) David (FIRST) Franklin (MIDDLE)

14) ADDRESS OF OWNER 4ccc Elmdale Ct. Charlotte N.C. 28206

15) PHONE NO Home 596-4309 Office 596-9780

16) LOCATION OF SYSTEM Mineral Springs Rd & Neal Rd. (STREET OR COUNTY ROAD)

17) SUBDIVISION Mallard Creek Township Lot No. ___ Block No. ___

Map Book No 6 Page No. 168

18) DEED REFERENCE — DEED BOOK 3465 AT PAGE 394

19 HAS A PERCOLATION TEST BEEN RUN? ✓ YES ___ NO DATE RUN 2-22-73 ; R749

20) PTR NUMBER (See Instructions) 5514

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.

February 27, 1973
DATE OF APPLICATION

Euel F Tucker
OWNER

FORM NO. E 4-4-...

HEALTH DEPARTMENT'S COPY

Date Issued March 1, 1973

Serial No. 2585

LA No 5514

T C. No 047-033-02

Map Date 9-1-70

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Tucker (LAST) David (FIRST) Franklin (MIDDLE)

ADDRESS OF OWNER 4000 Elmdale Court ZIP 28206

LOCATION OF LOT Mineral Springs Road and Neal 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 Health Department for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the percolation test results which yielded a percolation rate of 49 min/in 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 5514. 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 percolation test 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

Director, Environmental Health Division or Authorized Section Head

FORM NO E-3-4-1-71

HEALTH DEPARTMENT'S COPY

Serial No.

ICARUS Permit No 5514

Date Issued 28 March 74

T C No 047-033-02

Map Date 9-1-70

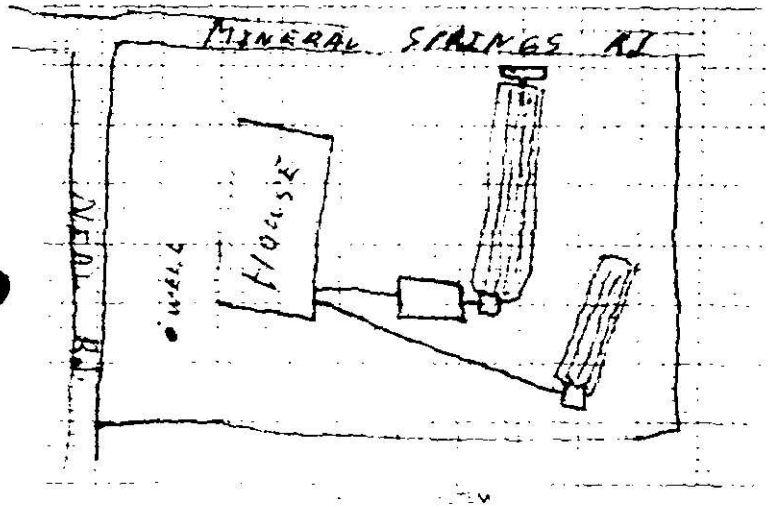
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

Permission is granted to ✓ Construct Alter or Repair the individual septic tank waste water treatment and effluent disposal system described below. This permit is issued upon the application dated 2-27-73 and bearing the number 5514. This permit is void if the work authorized is not completed by 28 April 74 after which date a new permit must be secured before work is begun.



Percolation Rate 49

Liquid Capacity of Tank 1000 gal

Type Construction PC

Total Length 370' + 150 WM

Number and Length of Lines 4 (10'x93'x17") 3 (7½'x50'x17")

Distance from Well 25'

Distance from Property Lines 15'

Distance from Creeks 80'+

NAME OF OWNER TUCKER DAVID FRANKLIN

LOCATION OF PROPERTY MINERAL SPRINGS & NEAL RD.

This permit is issued in requirements as set forth in the Regulations of the Mecklenburg [illegible] and is effective on the date of the granting of this permit. A certificate of operation will be issued upon completion of the system if all requirements have been complied with. Otherwise rendered invalid.

Comments CAMS AERATION PIT

Date of Inspection

Environmentalist Jerry Burleson

If this permit is for the installation or construction of a new system it must be signed by the division or a representative of the Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

E-5-9-1-72

Serial 4627

C of A (s) No. 5514

Date Issued 2 April 74

T C No 047-033-02

John Robinson

Map Date 9-1-70

CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Tucker (LAST) David (FIRST) Franklin (MIDDLE)

Location of Property Mineral Springs & Neal Rd.

Application Number 5514 Permit Number 5514

Inspection Data:

Liquid Capacity of Tank 1000 gal Tank Material PC

Total Length of Drain Tile 370' & 150' Number of Lines 4 (10' x 93' x 1") 3 (7½' x 56' W 4")

Depth of Filter Material 17" Cover Depth 15"

Water Supply Source Well Distance from Water Source [redacted]'

Excavation Inspected 2 April 74 (DATE) Tank Inspected 2 April 74 (DATE)

Nitrification Field Inspected 2 April 74 (DATE)

Washing Machine Line Inspected, If Applicable 2 April 74 (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 Board of Health 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: R. Oaks aeration pit 2½' x 7' x 4' deep

Richard Goodman

Environmentalist

FORM NO. E-6-4-1-71

HEALTH DEPARTMENT'S COPY