Date Received 6-26-77

APT No. 12301

T C No 119-064-1

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Adams (LAST) John (FIRST) (N) Sr (MIDDLE)

2) ADDRESS OF OWNER Route 3 Near Matthews ZIP 28110

3) PHONE NO Home 372 4669 Office 333-7505 Darius the Jr

4) LOCATION OF PROPERTY 510 West Trenton Avenue (STREET OR COUNTY ROAD)

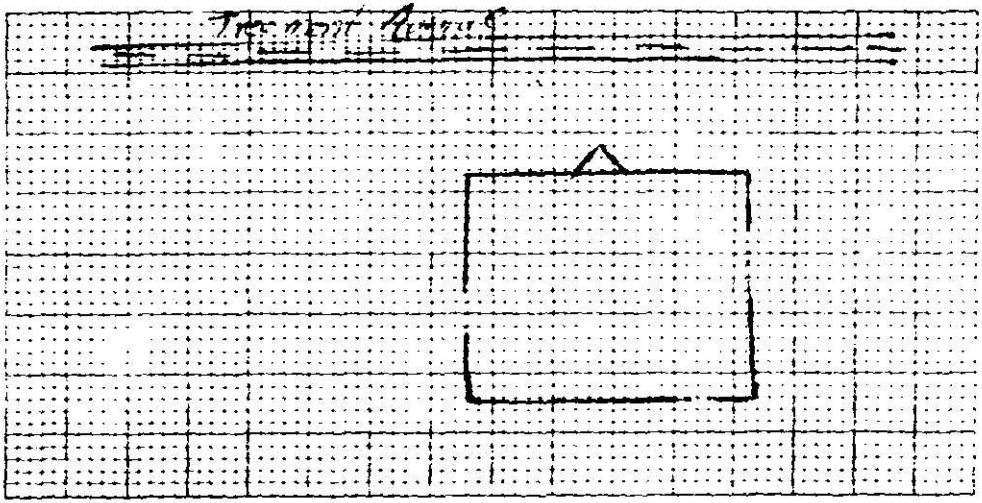
5) SUBDIVISION _____ LOT NO _____ BLOCK NO. _____

MAP BOOK NO _____ PAGE NO _____

6) DEED REFERENCE DEED BOOK 3420 PAGE NO 411

1972 Tax Code 119-064-21

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

John Adams

OWNER

EHD-5-76

Environmental Health Department's Copy

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

APPENDIX H
SITE EVALUATION

APT 12.021

(Ground Absorption Sewage Disposal) TE IM-004-21

OWNER: John N Adams
ADDRESS: A1-3, Clayton, NC. 27520
COUNTY:
LOCATION OF SITE: S/E W. Tiencourt Ave

DATE REQUESTED: 7-2-21
PLAT NO.:
LOT SIZE: 17 Acres more or less

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS — U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S Natural PS Fill (U) material	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S Massive PS (U)	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	S > 48" PS (U)	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Imprevious Strata, Rock)	S PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	S PS U	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S PS >72 (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 material			

S - Suitable PS - Provisionally Suitable U - Unsuitable

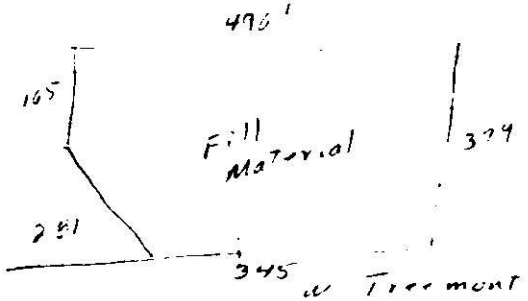
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

Recommendations/Comments: Based on the investigation the soils on the lot were found to be unsuitable for the installation of a septic tank system

Described By: William R. Mack

Title: Soil Scientist Date: July 19, 1977

DHS Form 2601 (2/77)
Sanitation


496'
165'
Fill
Material
379
291
345'
w Tree mont

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE NORTH CAROLINA 28203

DATE ISSUED
1. 7-20-77
2. _____
3. _____

SITE INVESTIGATION REPORT
INDIVIDUAL SEPTIC TANK SYSTEM
WITH SUBSURFACE,
SOIL ABSORPTION,
EFFLUENT DISCHARGE

SIR. NO. 12801
T.C. NO. 119-064-12
MAP DATE _____

NAME OF OWNER Adams, John , Jr.

ADDRESS OF OWNER Route 3, Clover, South Carolina 29710

LOCATION OF LOT 510 West Tremont Avenue

The lot described above is not recommended for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge as determined under the Rules and Regulations of the North Carolina Department of Human Resources, Division of Health Services, Raleigh, N.C. Due to the following:

Soil Structure Massive.

Soil Permeability Unsuitable.

John R. Adkisson, Environmentalist
On Premises Waste Disposal Section

JRA:glr

(Stencil No.)
EHD 398
7/77

FORM NO.
E-19-8-21-74

SEE INSTRUCTIONS ON BACK

Date Received 7/5/[illegible]

ICAR(S) Application No. 1201

T C No. [illegible]

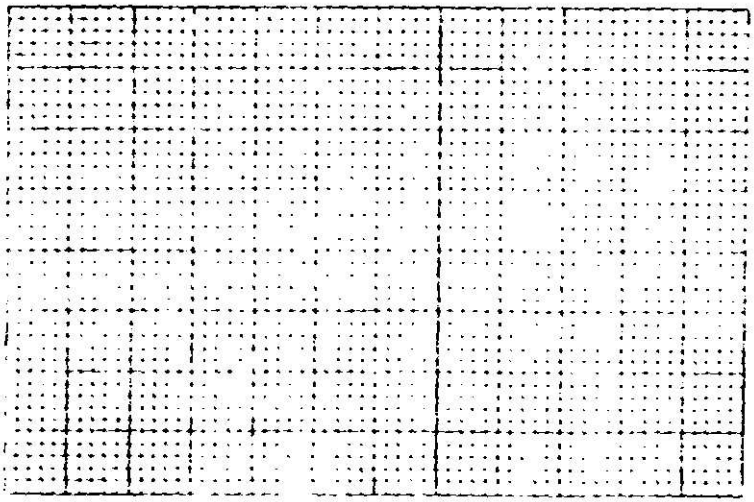
Map Date _____

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) [ ] 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
Fee Simple ____Yes ✓No
4) No. of Bedrooms _____
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 [illegible] LAST [illegible] FIRST MIDDLE

14) ADDRESS OF OWNER [illegible]

15) PHONE NO. Home [illegible] Office [illegible]

16) LOCATION OF SYSTEM [illegible] STREET OR COUNTY ROAD

17) SUBDIVISION _____ Lot No _____ Block No. _____

Map Book No _____ Page No. _____

18) DEED REFERENCE — DEED BOOK [illegible] AT PAGE [illegible]

19) HAS A SOIL INVESTIGATION BEEN RUN? YES [ ] NO DATE RUN _____

20) PTR NUMBER (See Instructions) [illegible]

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.

DATE OF APPLICATION [illegible] OWNER [signature]

EHS 5-76

Environmental Health Department's Copy