Date Received 3/3/77

RECEIVED
MAR 3 1977
ENVIRONMENTAL HEALTH

APT No. 12176

T. C. No. P.O. 231-101-01

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER BOB McLEMORE & CO., INC.
(LAST FIRST MIDDLE)

2) ADDRESS OF OWNER P.O. Box 25746 CHAR. ZIP 28212

3) PHONE NO. Home _____ Office 545-6111

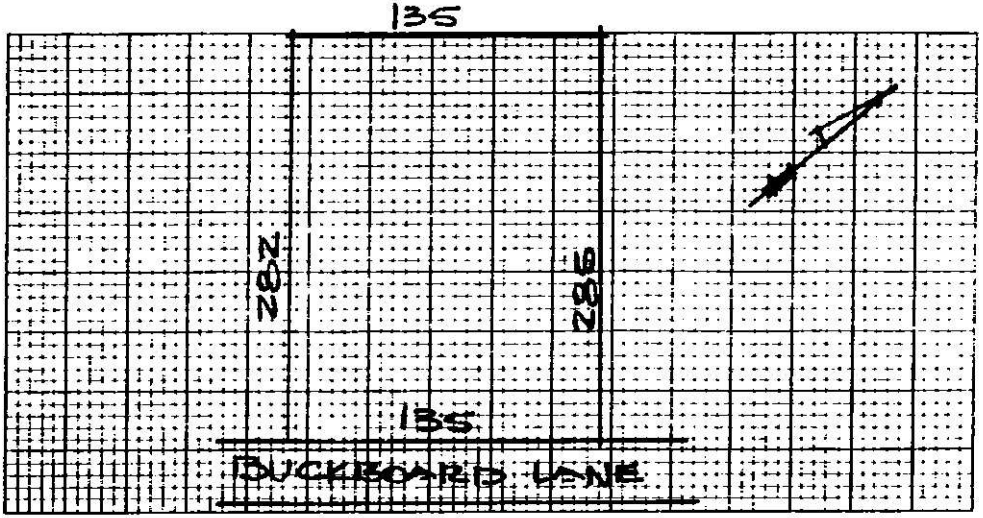
4) LOCATION OF PROPERTY BUCKBOARD LANE
(STREET OR COUNTY ROAD)

5) SUBDIVISION PROVIDENCE RIDGE LOT NO. 8 BLOCK NO. A

MAP BOOK NO _____ PAGE NO. _____

6) DEED REFERENCE: DEED BOOK _____ PAGE NO. _____

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

Peter L. Bodnek
OWNER

FORM NO. E1-11-3M-6-75

HEALTH DEPARTMENT'S COPY

SOIL INVESTIGATION REPORT

Date of Investigation March 31, 1977 APT NO. 12176

Owner Bob McLenore & Co, Inc.

Location of Property Buck board Lane lot No. 8 Block A

Soil Suitability Ratings Tax Code No. P.O. 231 -101-01

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Cecil			
2. Soil Slope	suitable 3-8a°			
3. Soil Depth	suitable >46=			
4. Soil Texture	provisionally suitable clay			
5. Soil Structure	provisionally suitable blocky			
6. Restrictive Horizons	—			
7. Soil Drainage	suitable water table >6-			
8. Soil Permeability (Percolation Rate)	provisionally suitable moderate			
9. Other	60 min/in			
10. Overall Rating	provisionally suitable			

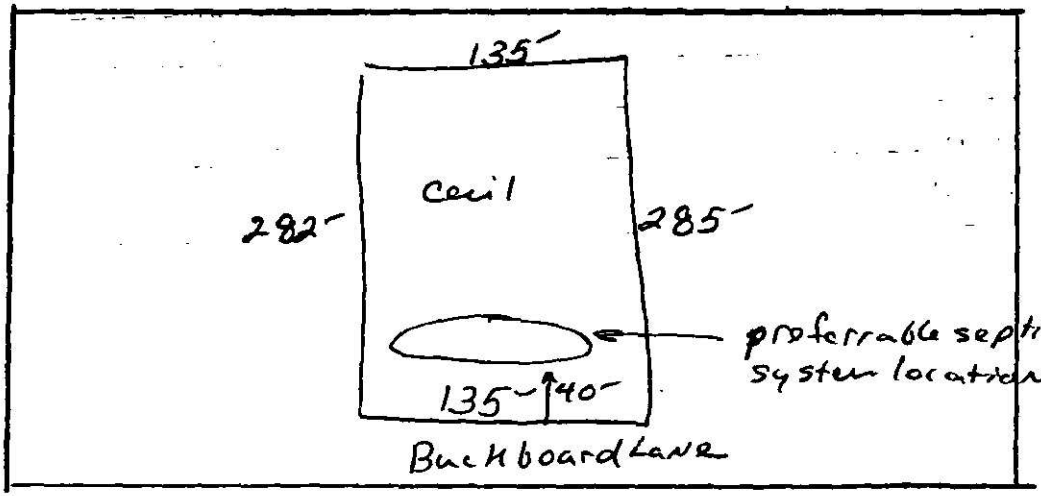
Remarks Recommendations Based on this investigation, the lot have soils was found to dominantly suitable for installation of septic tank systems. System design should be based on a percolation rate of 60 min/in.

See diagram on back

W. Edward Casavant
Soil Scientist

3/18/75
END 539

DIAGRAM OF PROPERTY



3/18/75

339

Serial No. 0634

PTR No. 12176

Date Issued 7 April 1977

T. C. No. P.O. 231-101-01

Map Date

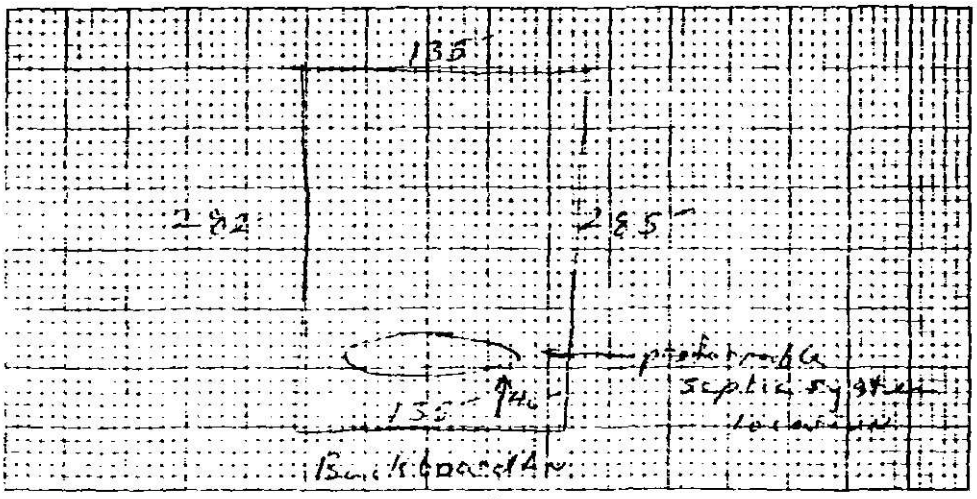
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Bob McLemore and Co., Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER P.O. Box 25746 Char., N.C. ZIP 28212

LOCATION OF PROPERTY Buckboard Lane
STREET OR COUNTY ROAD

SUBDIVISION Providence Ridge LOT NO 8 BLOCK NO. A



PLOT PLAN

The purpose of this soil investigation and report was made by the Mecklenburg County Department of Environmental Health on the lot described above. The soil investigation was conducted on that lot as indicated on the above plot. Provisionally Suitable

The permeability rate determined by the investigation 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. Approval is conditional upon the permit for the system to be obtained from the Mecklenburg County Department of Environmental Health prior to the construction of the wastewater treatment system on the said lot.
2. The size of the septic tank and 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 proposed thereon.
3. This approval is valid only for the system installed in the immediate area indicated as acceptable for system installation on the above plot.
4. The 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, operation 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.

W. Edward Casavant
Soil Scientist

John McAdams
Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

Serial No. 0970

LA No. 12176

Date Issued June 30, 1977

T. C. No. P.O.231-101-01

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

IMPROVEMENT PERMIT
TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Bob McLemore & Company, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P.O. Box 25746, Charlotte, NC ZIP 28212

LOCATION OF LOT 10322 Stonemede Lane
(STREET OR COUNTY ROAD)

SUBDIVISION Providence Ridge LOT NO 8 BLOCK NO. A

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 12176. 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.

S. P. Bridgman
Environmentalist

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

EHD-5-76

Environmental Health Department's Copy

Date Received 6/30/77

MECK COUNTY DEPARTMENT OF
RECEIVED
JUN 30 1977

ICAR (S) Application No. 12176

T. C. No. 20-231-101-01

Map Date

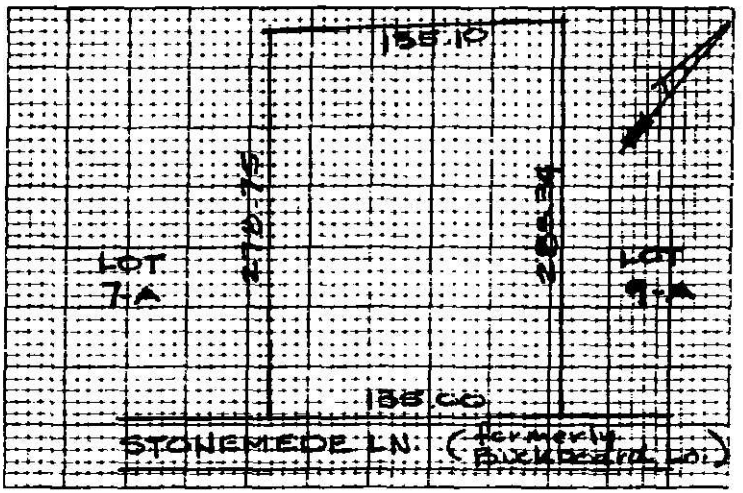
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

The owner of that property described hereinafter hereby applies to the Mecklenburg County Health Department 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) No. of Bedrooms 4

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 BOB McLEMORE & CO, INC.
(LAST / FIRST / MIDDLE)

14) ADDRESS OF OWNER P.O. Box 25796 CHARLOTTE 28212

15) PHONE NO. Home ____ Office 545-6111

16) LOCATION OF SYSTEM 10322 STONEMEDE LN. (formerly Buckboard)
(STREET OR COUNTY ROAD)

17) SUBDIVISION PROVIDENCE RIDGE Lot No. 8 Block No. A

Map Book No. ____ Page No. ____

18) DEED REFERENCE — DEED BOOK ____ AT PAGE ____

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ____ NO DATE RUN 4/07/77
→ 60 min/in.

20) PTR NUMBER (See Instructions) 12176

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.

JUNE 29 1977
DATE OF APPLICATION

Peter L. Gobel Asst. V.P.
OWNER

FORM NO E-4-4-1-71

HEALTH DEPARTMENT'S COPY

Serial No. 1261

ICAR(S) Permit No. 12176

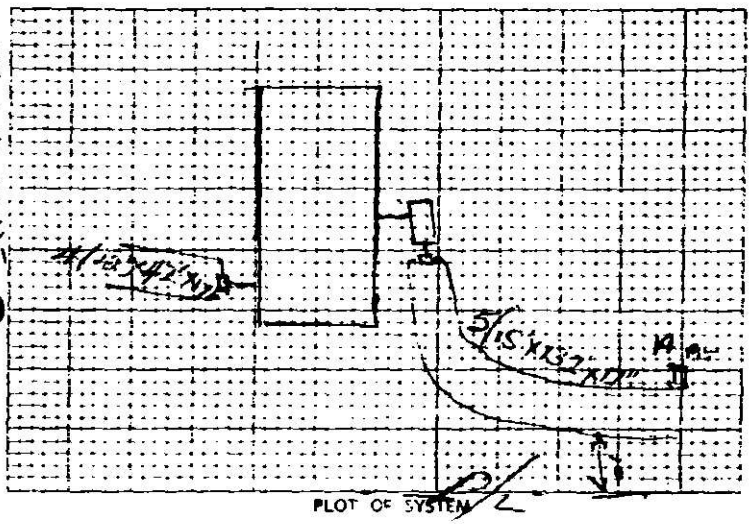
Date Issued 11-21-77

T. C. No. 231-101-01

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 12176, dated 5-30-77, 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 12/15/77, after which date this permit shall be null and void.



Permeability Rate 60

Liquid Capacity of Tank 1500 gal

Tank Construction PC

Absorption and/or Nitrification Lines.

Total Line Length 660' 165'

Number of Lines 5 4

Distance from House 10'

Distance from Property Line 10'

Distance from Well Comm

NAME OF OWNER Bob McClemore & Co. Inc.

LOCATION OF PROPERTY 10322 (Lot 5-A) STONE MEADE N.

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.**

Comments:

Sherrill

Division or Section Head

L P Bridgeman

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.

EHD-S-76

Environmental Health Department's Copy

Date Issued 12/16/77

Serial No. 1242

C of A (s) No. 12176 PO

T. C. No. 231-101-01

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 BOB McLEMORE & Co. INC.
LAST FIRST MIDDLE

Location of Property 10322 STONEMEADE LN.

Application Number 12176 Permit Number 12176

Inspection Data:

Liquid Capacity of Tank 1500gal ST WM Tank Material PC

Total Length of Drain Tile 660 167 Number of Lines 5 4

Depth of Filter Material 17" Cover Depth 18"-24"

Water Supply Source COMM. Distance from Water Source —

Excavation Inspected 12/16/77 DATE Tank Inspected 12/16/77 DATE

Nitrification Field Inspected 12/16/77 DATE

Washing Machine Line Inspected, If Applicable 12/16/77 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

L P Richardson
Environmentalist

EHD-S-76

Environmental Health Department's Copy

Date Received 8/30/78

ICAR(S) Application No. 12176

T. C. No. P.O. 23/70101

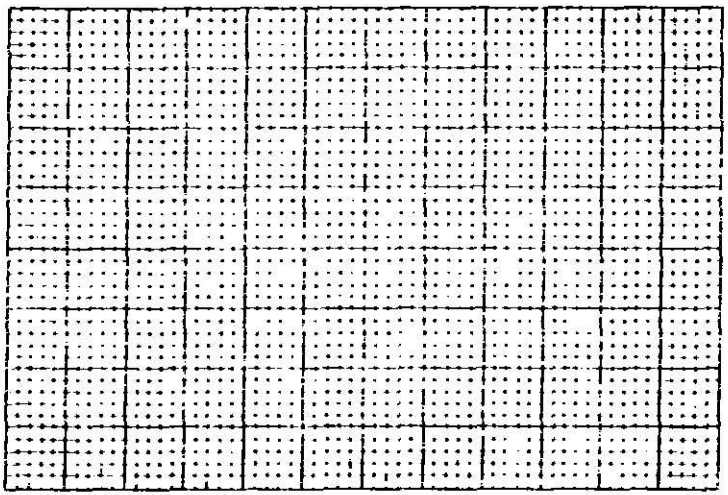
Map Date _____

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
Residence ✓ Yes ___ No

4) No of Bedrooms 4

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 Curtis, Arthur T.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 10322 Stonemede Ln.

15) PHONE NO. Home _____ Office 377-5471

16) LOCATION OF SYSTEM 10322 Stonemede Ln.
STREET OR COUNTY ROAD

17) SUBDIVISION Providence Park Lot No. 8 Block No. A

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

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.

8/28/78
DATE OF APPLICATION

G. T. Curtis
OWNER

EHD-5-76

Environmental Health Department's Copy

Date Issued 23 Aug.

Serial No. 1867

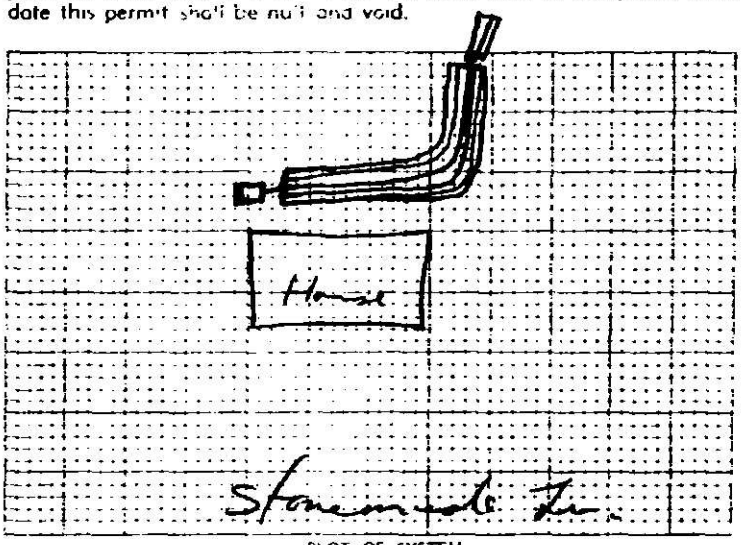
ICAR(S) Permit No. 12176

T. C. No. 231-101-01

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 _____, dated _____ 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 _____, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate _____

Liquid Capacity of Tank Repair

Tank Construction _____

Absorption and/or Nitrification Lines

Total Line Length 100'

Number of Lines 2

Distance from House 10'

Distance from Property Line 10'

Distance from Well N/A

NAME OF OWNER Art Curtis

LOCATION OF PROPERTY 10322 Stonemede Ln

The system shall meet all 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** Comments: **now or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.**

(6'x20'x42" stone)

Division or Section Head

Environmentalist Stephen J. 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-S-74

Environmental Health Department's Copy

Serial No. 1851

C of A (s) No. 12176

Date Issued 30 Aug 78

T. C. No. 80-231-101-01

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 Curtis (LAST) Art (FIRST) (MIDDLE)

Location of Property 10322 Stonemede Ln

Application Number 12176 Permit Number 12176

Inspection Data:

Liquid Capacity of Tank Repair Tank Material

Total Length of Drain Tile 100' Number of Lines 2

Depth of Filter Material 42" Cover Depth 18"

Water Supply Source Community Distance from Water Source 100'

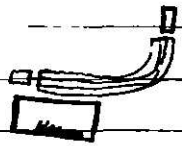
Excavation Inspected (DATE) Tank Inspected 30 (DATE)

Nitrification Field Inspected 30 Aug (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 permits 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: Repair field



Environmentalist Stephen J. Wood

EHD-5-76

Environmental Health Department's Copy