Date Received 11/14/79
(by you)
Mailed to us Oct 31, 1979

APT No. 16320
I C No. 223-191-01
Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER LAST E B FIRST Stone, Sr. MIDDLE
2) ADDRESS OF OWNER 8704 Pawleys St. ZIP
3) PHONE NO Home 542-2335 Office 377-2601
4) LOCATION OF PROPERTY 8704 Pawleys STREET OR COUNTY ROAD
5) SUBDIVISION LOT NO BLOCK NO.
MAP BOOK NO PAGE NO
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 disposal.

system will be installed on his property near his own house — will be a house + system for his help. Area will be marked on where he desires system to go.

7) ACCURATELY DIAGRAM & DIMENSION LOT

See attached

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

NOT IS 320
PO 223-191-17

(Ground Absorption Sewage Disposal)

OWNER: E B Lane, Jr.
ADDRESS: 614 Davidson Road
COUNTY: Mecklenburg Co.
LOCATION OF SITE: Off Davidson Rd

DATE REQUESTED:
PLAT NO.:
LOT SIZE: 2 Acres

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS 2-6% U	S PS 2-6% U	S PS U	S PS U
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S (PS) Clay U	S PS 2-1 Clay U	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S (PS) Blocky U	S (PS) Weak Blocky U	S PS U	S PS U
4. SOIL DEPTH (In.)	(S) PS 48 U	(S) 48 PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock)	(S) None PS U	(S) None PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) 72-120 ground water PS U	S Seasonal PS Perched U water Table	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S Moderate (PS) U	S PS Rapid 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	Provisionally Suitable	Unsuitable		
SOIL SERIES	Cecil	Helena		

S - Suitable PS - Provisionally Suitable U - Unsuitable

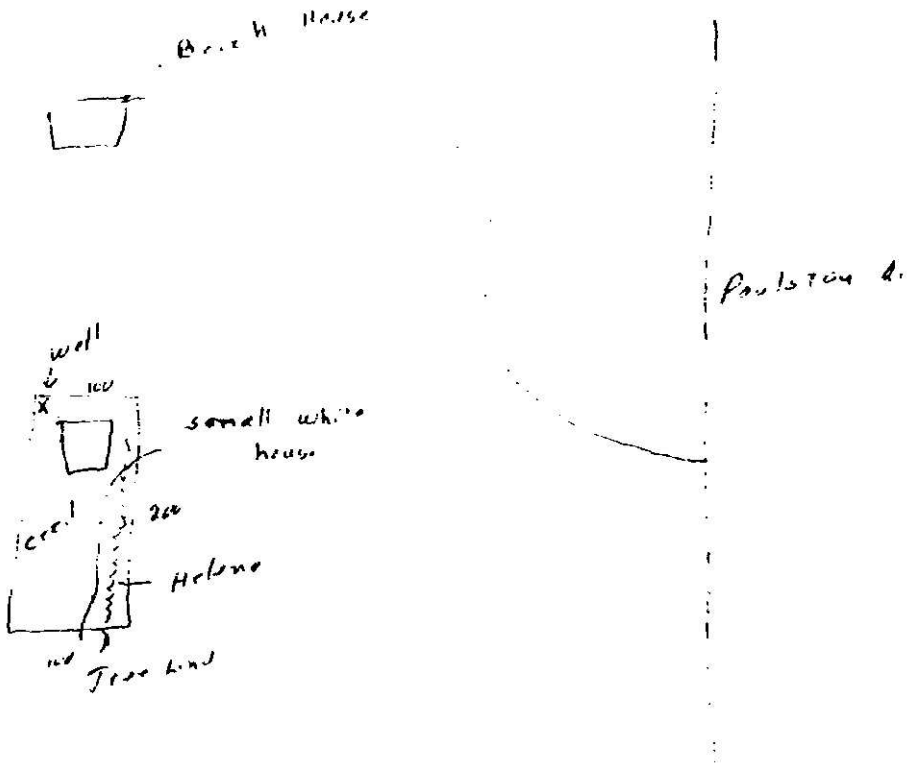
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

Recommendations/Comments:

Described By: William M. Marlin

Title: Soil Scientist Date: 11-26-79

DHS Form 2601 (2/77)
Sanitation


Brick House
Poulton Rd.
well
100
small white house
200
Helena
Tree Line

Serial No. 3217

PTR No. 16320

Date Issued Nov. 27, 1979

T C No po 223-191-17

Map Date

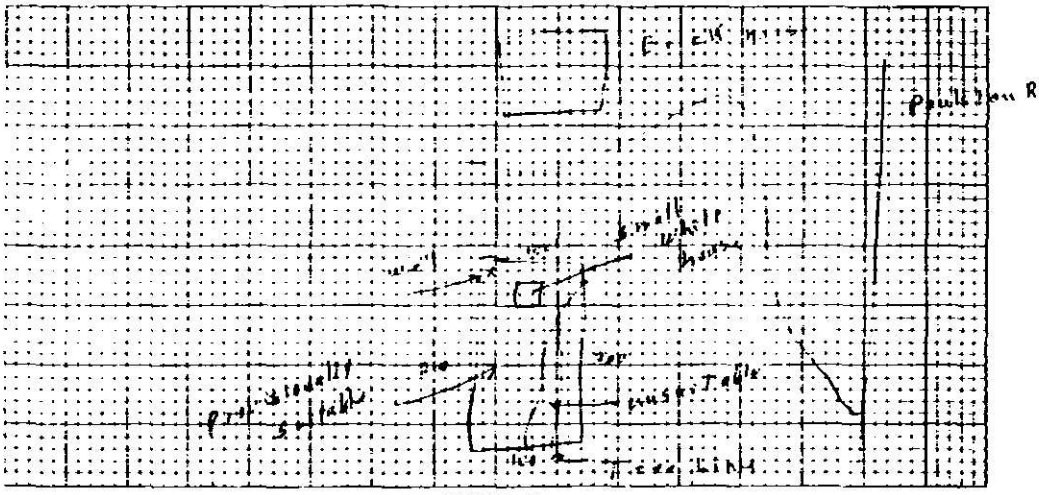
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER (LAST) Stone, (FIRST) E.B. (MIDDLE) Sr.

ADDRESS OF OWNER 8704 Paulston St. ZIP

LOCATION OF PROPERTY behind: 8704 Paulston (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO.



PLOT PLAN

This is to certify that a soil investigation and onsite 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 plat.

The recommended rate determined by the investigation was **Provisionally Suitable**. The said lot is approved for the installation of an individual subsurface wastewater treatment system with subsurface soil absorption effluent disposal subject to the following terms and conditions:

1. The proposed type wastewater treatment system shall be determined by the Mecklenburg County Department of Environmental Health and shall be installed as indicated above, and the proposed building shall be limited to three bedrooms.
2. The proposed wastewater treatment system shall be installed by a system installer approved by the Mecklenburg County Department of Environmental Health.
3. The approval is based upon soil borings and percolation tests performed on the lot which the Mecklenburg County Department of Environmental Health considers to be indicated as acceptable for the installation of a subsurface soil absorption wastewater treatment 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 newly revised laws, rules and regulations been in effect on the issue date.

William R. Martin
Soil Scientist

John R. Adkisson
Environmental Health Director or Authorized Section Head

EHD-5-74

Environmental Health Department's Copy

way.

Date Received 11/14/79

SEE INSTRUCTIONS ON BACK

OCT 31

CARS Application No 16320

pc T C No 293-191-01

Map Date 8-6-26

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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)

3 Bed Rooms
Living Room
Kitchen & Breakfast Room
Garage
1½ Baths

Mobile Home ___ Yes ___ No
Residence ✓ Yes ___ No

4) No of Bedrooms 2

5) Business Use Max No Employees ___ not yet, request

6) Washing Machine ___ Yes ✓ No

7) Garbage Disposal ✓ Yes ___ No

8) Dishwasher ___ Yes ___ No

9) Water Supply
A) Individual Use ___
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 Stone E Ivey B.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 8704 Pawleys Rd.

15) PHONE NO Home 542-2335 Office 377-2601

16) LOCATION OF SYSTEM 8704 Pawleys Rd
STREET OR COUNTY ROAD

17) SUBDIVISION ___ Lot No ___ Block No ___

Map Book No 12 Page No. 167

18) DEED REFERENCE — DEED BOOK 2883 AT PAGE 171

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.

10/30/79
DATE OF APPLICATION

OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued Nov. 27, 1979

Serial No. 3753

LA No. 16320

T. C No po 223-191-17

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 Stone, (LAST) E. (FIRST) B. (MIDDLE) Sr.

ADDRESS OF OWNER 8704 Paulston Street ZIP _____

LOCATION OF LOT behind: 8704 Paulston Street (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO _____ BLOCK NO _____

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 16320 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 permits 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.

M. Edwards
Environmentalist

John R Adkisson
Environmental Health Director, or Autherized Section Head

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 12/26/79

ICAR(S) Application No 16320

T C No 223-191-17

Map Date

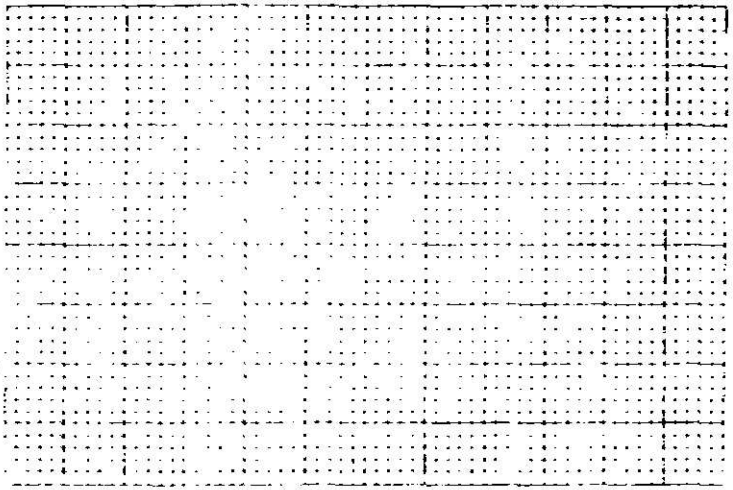
DEC 26 1979
ENVIRONMENTAL HEALTH

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 2
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 ___ E B Stowe ___ (LAST / FIRST / MIDDLE)

14) ADDRESS OF OWNER ___

15) PHONE NO Home ___ Office ___

16) LOCATION OF SYSTEM Paulston (STREET OR COUNTY ROAD)

17 SUBDIVISION ___ Lot No ___ Block No. ___

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.

12/19/79
DATE OF APPLICATION

E B Stowe
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial 3510

Date Issued 17 December 79

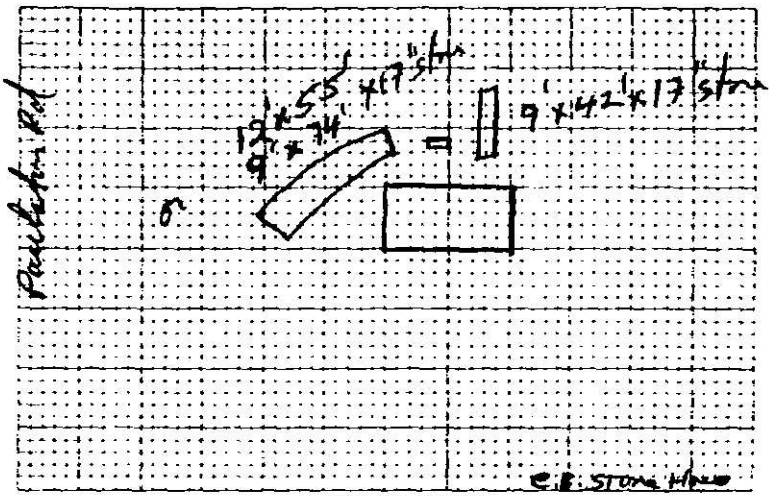
ICARIS Permit No. 16320

T C No 223-191-17

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 ✓ 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 16320, dated 14/14/79 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 17 Jan, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate P.S.

Liquid Capacity of Tank 1000

Tank Construction P.C. Conc.

Absorption and or Nitrification Lines

Total Line Length *220' & 125'

Number of Lines *4 & 3

Distance from House 10'

Distance from Property Line 10'

Distance from Well 75'

NAME OF OWNER Elmer B. Stone

LOCATION OF PROPERTY 8704 Paulkton Rd.

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.

*owner present and mistakenly filled out appl. - usual inspection w/ owner confirms W.O. and no drainage or disposal and the system is not designed to accomodate one!

Division or Section Head _____ Environmentalist Steve 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-5-76

Environmental Health Department's Copy

C of A (s) No 16320

Date Issued 19 Dec 79 Serial 3357 T C No 223-191-17

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL HEALTH DIVISION

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

Name of Owner Stone (LAST) Elmer (FIRST) B. (MIDDLE)

Location of Property 8704 Pineville Rd

Application Number _____ Permit Number 16320

Inspection Data:

Liquid Capacity of Tank 1000 gal Tank Material P.C. Conc

Total Length of Drain Tile 220' & 125' Number of Lines 3 & 3

Depth of Filter Material 17" Cover Depth 18"

Water Supply Source Well Distance from Water Source >75'

Excavation Inspected — (DATE) Tank Inspected 19 Dec (DATE)

Nitrification Field Inspected 19 Dec (DATE)

Washing Machine Line Inspected If Applicable 19 Dec (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 Slagle & Winchester

Steve Wood
Environmentalist

EHD-5-76

Environmental Health Department's Copy