Date Received 6/12/78 Apt. No. (S) _____ Application No. (W) 14493

T. C. No. 111-D2-9

Map Date 4-25-78

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Carriker (LAST) Joel (FIRST) Wilburn (MIDDLE)

ADDRESS OF OWNER 9411 Twilight Ch. Rd. CITY ZIP 28212

PHONE NO. Home 545-5304 Office 545-4517

LOCATION OF PROPERTY Lawyers Rd. (STREET OR COUNTY ROAD)

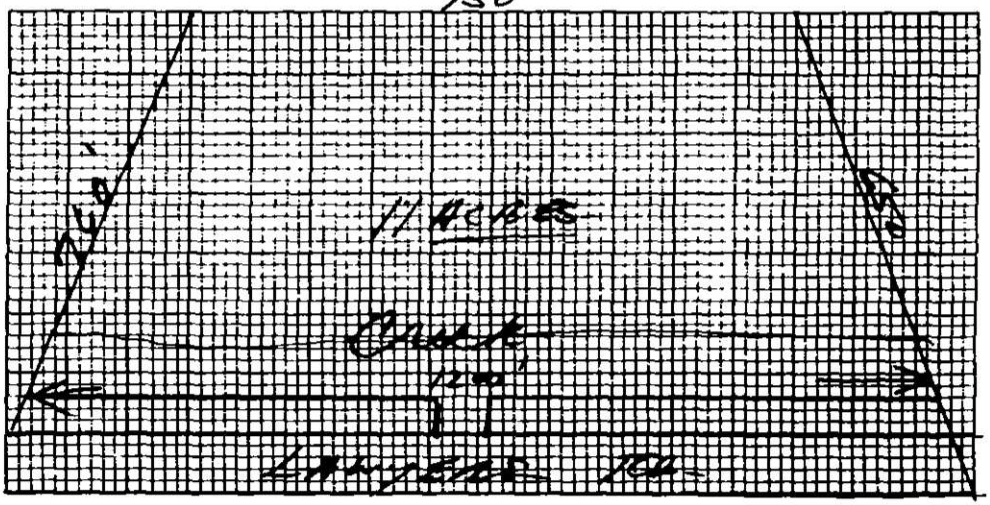
SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

MAP BOOK NO. 197 PAGE NO. 21-1 FHA LOAN

DEED REFERENCE: DEED BOOK _____ PAGE NO. _____ VA LOAN

WELL CONTRACTOR D.C. Mullis LICENSE NO. _____

Application is hereby made to the Mecklenburg County Health Department for a permit to drill a water well on the hereinabove described lot to be used as a source of ✓ individual, _____ semi public, or _____ public water supply:



ACCURATELY DIAGRAM & DIMENSION LOT

6-12-78
DATE OF APPLICATION

Joel W. Carriker
OWNER

Application approved and permit hereby granted

Permit No: _____

_____
ENVIRONMENTALIST

FORM NO. E-20-5-1-73

HEALTH DEPARTMENT'S COPY

Date Received 10/13/78

APT No. 14193
P0
T. C. No. 177.02.01

Map Date 4-20-78

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Carriker (LAST) Joel (FIRST) Wilburn (MIDDLE)

2) ADDRESS OF OWNER 5411 Twilight Cir. Rd. CITY ZIP 28212

3) PHONE NO. Home 545-5308 Office 545-0517

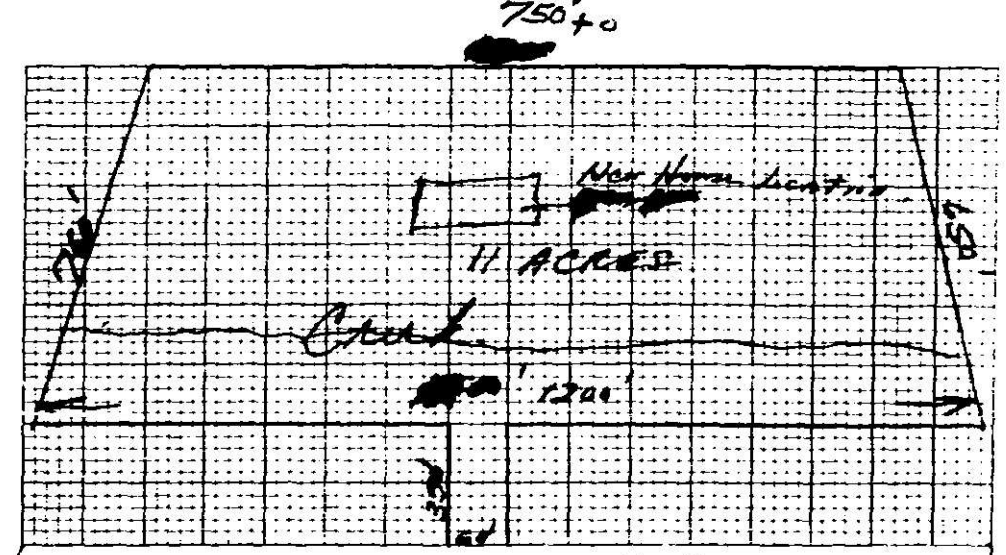
4) LOCATION OF PROPERTY Lawyers Rd. (STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

MAP BOOK NO. 157 PAGE NO. 21-1

6) DEED REFERENCE DEED BOOK [redacted] PAGE NO. [redacted]

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

[redacted]
OWNER

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

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 6/13/78

ICAR(S) Application No. 14493

T. C. No. 97 02 21

Map Date 4-25-11

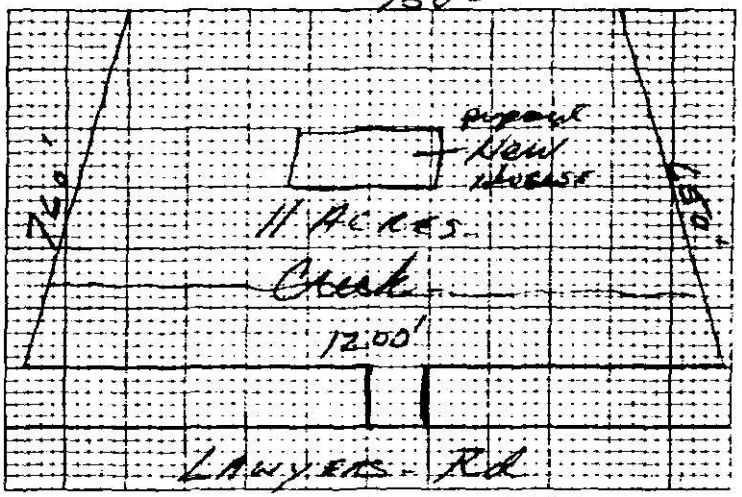
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 ✓ yes
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 Carriker (LAST) Joel (FIRST) Wilburn (MIDDLE)

14) ADDRESS OF OWNER 9411 Twilight Cir Rd - City 28212

15) PHONE NO. Home 545 5306 Office 545 4517

16) LOCATION OF SYSTEM Lawyers Rd (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. ___ Block No. ___

Map Book No. 197 Page No. 21-1

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A PERCOLATION TEST 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 some 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.

6-13-78
DATE OF APPLICATION

Joel W. Carriker
OWNER

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

HEALTH DEPARTMENT'S COPY

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

APPENDIX B
SITE EVALUATION

APT 14413
PO 197-021-01

(Ground Absorption Sewage Disposal)

OWNER: Joel W. Carpenter
ADDRESS: 9411 Tuckaseigee Church Rd
COUNTY: Charlotte, N.C.
LOCATION OF SITE: Sawyers Rd

DATE REQUESTED:
PLAT NO.:
LOT SIZE: 2 Acres Part of Matthews

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS 2-4% U	S PS 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 U	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S (PS) Blocky U	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	(S) 40" PS U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Imprevious Strata, Rock)	(S) 2 Rock PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) >6' to ground PS water U	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) Moderate U	S PS U	S PS U	S PS U
8. OTHER (Specify)	S See PS note U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	→ Provisionally suitable			
SOIL SERIES	Cecil			

S - Suitable PS - Provisionally Suitable U - Unsuitable

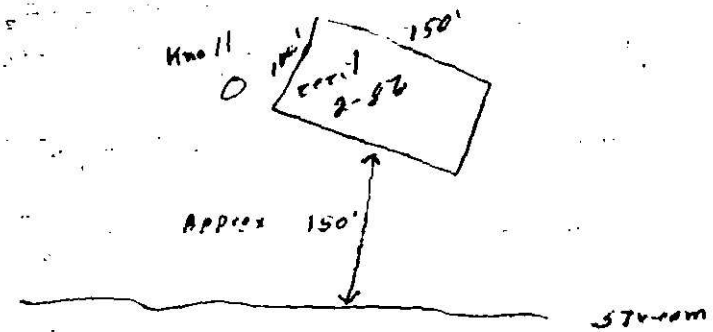
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

Recommendations/Comments: House will be located in area of boring. 15,000 foot area investigated is where owner would like to locate system

Described By: William A. Mullen

Title: Soil Scientist Date: 6-15-77

DHS Form 2601 (2/77)
Sanitation



Lawyers Rd

Serial No. 1986

PTR No. 14193

Date Issued 6-16-78

T C. No. P.O. 197-021-01

Map Date 4-20-78

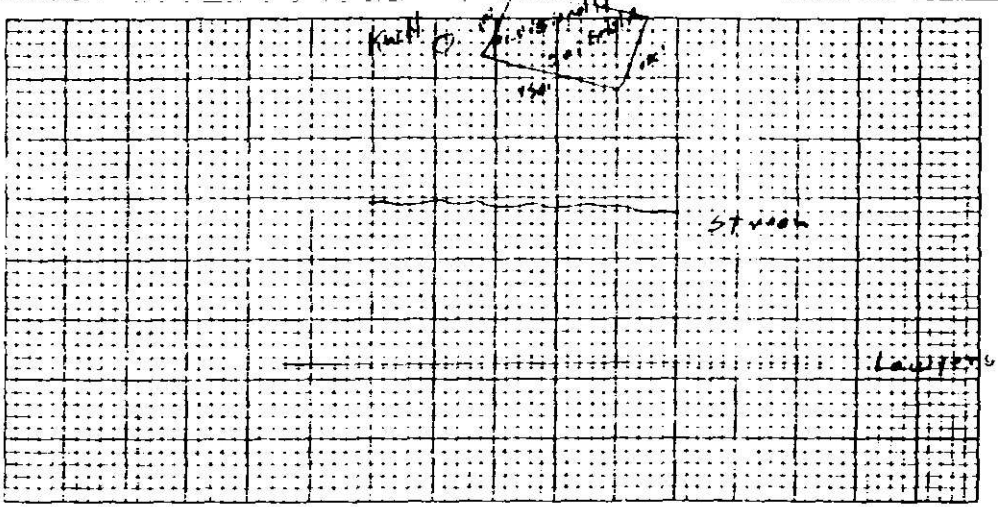
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Carriker (LAST) Joel (FIRST) Wilburn (MIDDLE)

ADDRESS OF OWNER 9411 Truelight Church Rd. Charlotte, NC ZIP 28212

LOCATION OF PROPERTY Lawyers Road (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO _____ BLOCK NO _____



PLOT PLAN

This is to certify that a soil investigation and on-site 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 plot. The permeability rate determined by the investigation was **PROVISIONALLY SUITABLE**. 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 Department of Environmental Health 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 Mecklenburg County Department of Environmental Health prior to installation based on the permeability 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 indicated as acceptable for system installation on the above plat.
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 Mecklenburg County Department of Environmental Health renders the area indicated as acceptable for system installation unsuitable for 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 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.

William A. Martin
Soil Scientist

John R. Adkinson
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Serial No. 1957

LA No. 14193

Date Issued 6-16-78

T. C. No. P.O. 197-021-01

Map Date 4-20-78

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 Carriker (LAST) Joel (FIRST) Wilburn (MIDDLE)

ADDRESS OF OWNER 9411 Truelight Church Rd. Charlotte, NC ZIP 28212

LOCATION OF LOT Lawyers 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 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 14193. 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

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

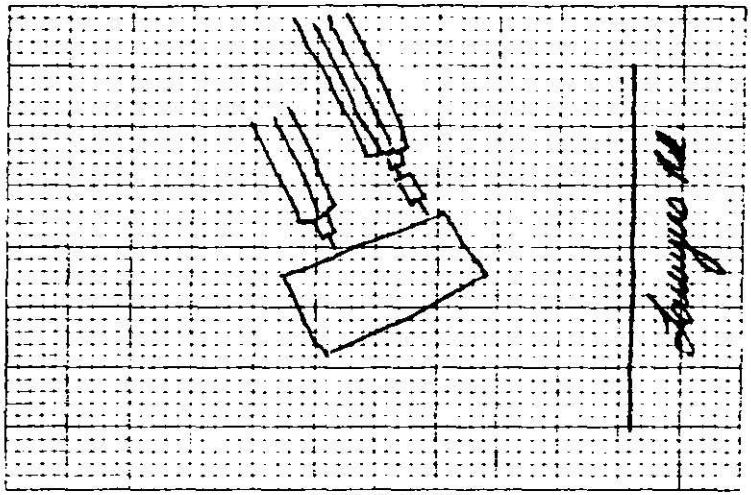
Date Issued Jt. 2, 1978 Serial No. 1988 ICAR(S) Permit No. 14193

T C No 197-021-01

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 14193, 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 1500/gal.

Tank Construction PC

Absorption and or Nitrification Lines

Total Line Length 660'; 167

Number of Lines 5 & 4

Distance from House 10'+

Distance from Property Line 10'+

Distance from Well 100'

NAME OF OWNER Joel William Cauble

LOCATION OF PROPERTY Sawyers 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.**

Comments

15' x 132' x 17" stone

12' x 42' x 17" stone

Division or Section Head

Eddie Reynolds
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-5-76

Environmental Health Department's Copy

Date Issued Oct 11, 1978 Serial No. 2000

C of A (s) No. 14193

T. C. No. 197-021-01

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 Carriker (LAST) Joel (FIRST) William (MIDDLE)

Location of Property Lawyers Rd.

Application Number 14193 Permit Number 14193

Inspection Data:

Liquid Capacity of Tank 1500/gal. Tank Material PC

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

Depth of Filter Material 17" Cover Depth 18"

Water Supply Source Well Distance from Water Source 100'

Excavation Inspected — (DATE) Tank Inspected 10-11-78 (DATE)

Nitrification Field Inspected 10-11-78 (DATE)

Washing Machine Line Inspected, If Applicable 10-11-78 (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

Eddie Reynolds
Environmentalist

EHD-5-76

Environmental Health Department's Copy