Charlotte, NC 28205 3549 N. Sharon Amity, Suite 303

Date Received 3/28/78

APT No. 13784

T. C. No. 03706302

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Moore (LAST) Geraldene (FIRST) E. (MIDDLE)

2) ADDRESS OF OWNER 2100 Rebsamen Park Rd., Apt. 318, Little Rock, Arkansas ZIP 72002

3) PHONE NO Home 501/661-6300 Office

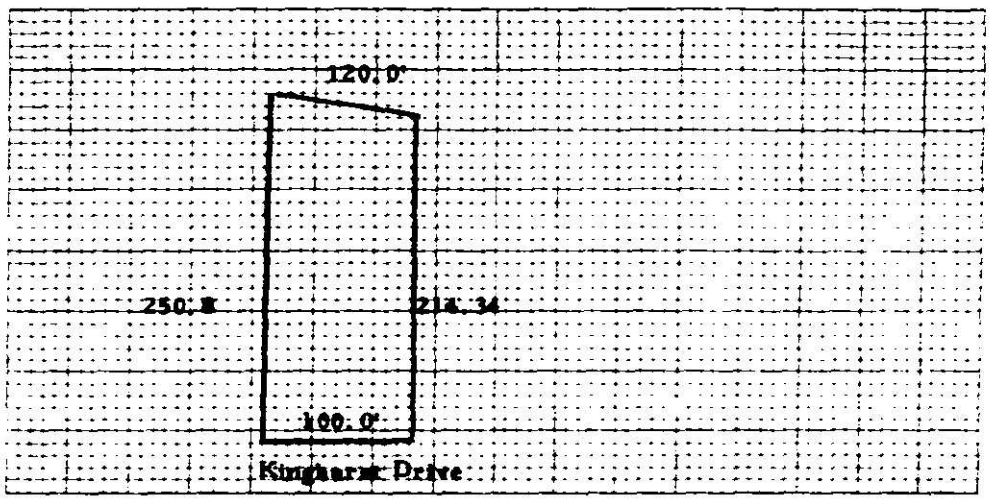
4) LOCATION OF PROPERTY Kinghurst Drive (STREET OR COUNTY ROAD)

5) SUBDIVISION Edmore Estates LOT NO 30 BLOCK NO 2

MAP BOOK NO 37 PAGE NO 6

6) DEED REFERENCE DEED BOOK 3805 PAGE NO 065

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

x Geraldene E. Moore
OWNER

EHD-5-76

Environmental Health Department's Copy

apt # 13784

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

APPENDIX H
SITE EVALUATION

(Ground Absorption Sewage Disposal)

OWNER: Moore, Gertilene E. DATE REQUESTED: —
ADDRESS: 2400 Rebsamen Blvd, Little Rock, Ark. PERC. NO.: 037-06302
COUNTY: Pulaski LOT SIZE: 25,520
LOCATION OF SITE: Kingsmark Dr. 7202

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) PS 1-8% 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) PS 48" U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Imprevious Strata, Rock)	(S) 76" to rock PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	(S) 76" to water PS U	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S (PS) MOD U	S PS U	S PS U	S PS U
8. OTHER (Specify)	(S) Subgrade are9 PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	→ PROV. SUITABLE			
SOIL SERIES	Cecil			

S - Suitable PS - Provisionally Suitable U - Unsuitable

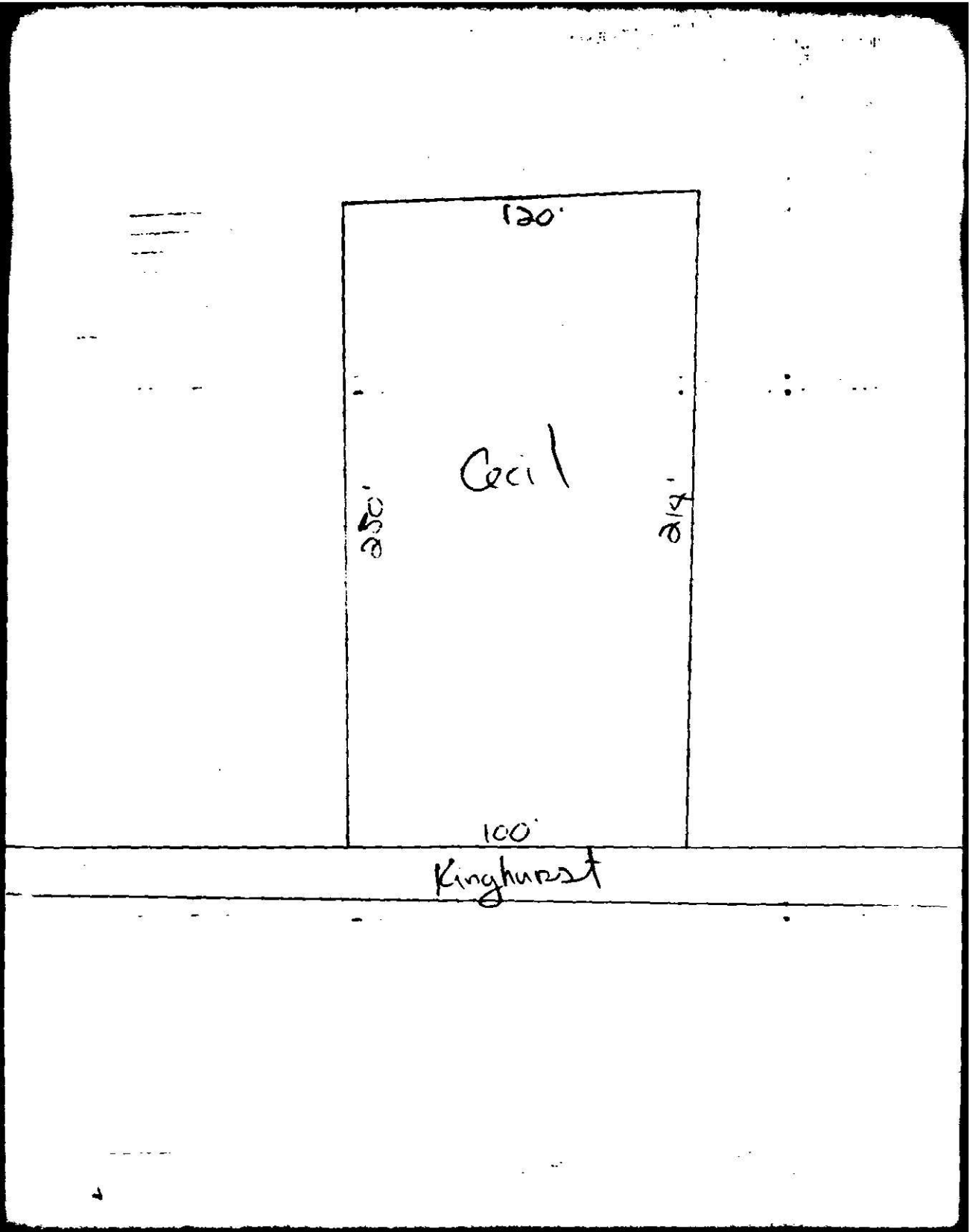
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

Recommendations/Comments: —

Described By: J.M. Reynolds
Title: Environmentalist Date: 3 Apr 78

DHS Form 2601 (2/77)
Sanitation

✓


120'
Cecil
250'
214'
100'
Kinghurst

Date Received 8/4/78

ICAR (S) Application No. 13784

T. C. No. 037-063-02

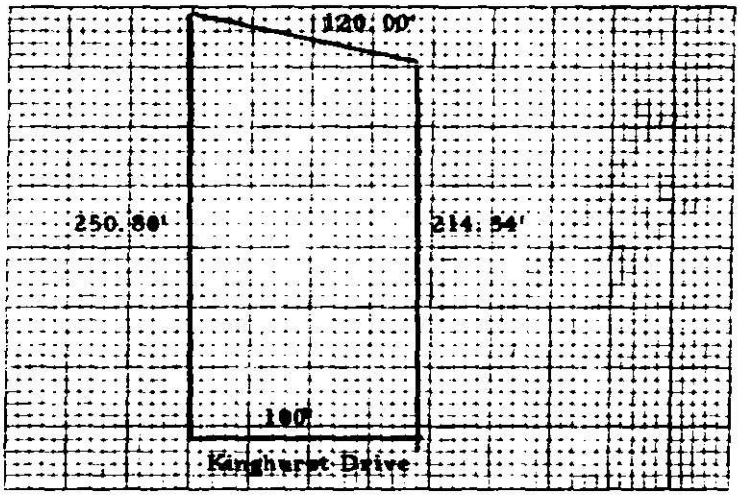
Map Date _____

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) X 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) Mobile Home ___ Yes X No
Residence X Yes ___ No

4) No of Bedrooms 3

5) Business Use — Max No Employees _____

6) Washing Machine X Yes ___ No

7) Garbage Disposal ___ Yes X No

8) Dishwasher ___ Yes X No

9) Water Supply
A) Individual Well X
B) Governmental System _____
C) Community System:
1 Well source _____
2 Governmental source _____

10) Sewage System:
House located within 200 feet of public sewer ___ Yes X No
House located within 200 feet of community sewer ___ Yes X No

11) FHA Case No _____

12) VA Case No. _____

13) NAME OF OWNER Mady Construction Company
(LAST FIRST MIDDLE)

14) ADDRESS OF OWNER 3549 N. Sharon Amity, Suite 303, Charlotte, NC 28205

15) PHONE NO. Home _____ Office 568-7740

16) LOCATION OF SYSTEM Kinghurst Road
(STREET OR COUNTY ROAD)

17) SUBDIVISION Edmore Estates Lot No. 30 Block No. 2

Map Book No 9 Page No. 239

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES ___ NO DATE RUN _____

20) PTR NUMBER (See Instructions) 137 84

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.

August 1, 1978
DATE OF APPLICATION

Mady Construction by R. Schonberg
OWNER

EHD-5-76

Environmental Health Department's Copy

Date Issued 8/8/78

Serial No. 2095

LA No. 13784

T. C. No. 037-063-02

Map Date -

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 Eady Construction Company
(LAST) (FIRST) (MIDDLE)

ADDRESS OF OWNER 3549 North Sharon Amity, Suite 303, Charlotte ZIP 28205

LOCATION OF LOT Kingburst Road
(STREET OR COUNTY ROAD)

SUBDIVISION Edmore Estates LOT NO 30 BLOCK NO. 2

MAP BOOK NO. 9 PAGE NO 239

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. 13784 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

Eddie Reynolds
Environmentalist

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

EHD-5-76

Environmental Health Department's Copy

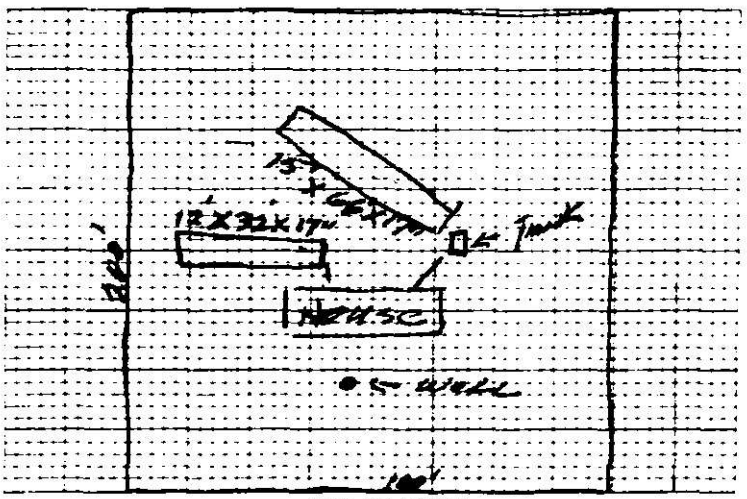
Date Issued 9-20-78 Serial No. 1998 ICAR(S) Permit No. 13784

T C 037-063-02

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 13784 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 P/S

Liquid Capacity of Tank 1000

Tank Construction PRECAST

Absorption and or Nitrification Lines

Total Line Length 330-125

Number of Lines 5-4

Distance from House 10'

Distance from Property Line 10'

Distance from Well 50'

NAME OF OWNER Macy Construction Co.

LOCATION OF PROPERTY 6224 Kingscrest DR.

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

Division or Section Head

Environmentalist Marshall Edwards

* 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 9-21-78 Serial No. 1919 C of A (s) No. 13784

T C 032-063-02

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 Macy Construction Co. (LAST / FIRST / MIDDLE)

Location of Property 6224 Knightnest Dr.

Application Number 13784 Permit Number 13784

Inspection Date:

Liquid Capacity of Tank 1000 Tank Material Precast

Total Length of Drain Tile 330-125 Number of Lines 5-4

Depth of Filter Material 17" Cover Depth 20"

Water Supply Source well Distance from Water Source 50'

Excavation Inspected 9-21-78 (DATE) Tank Inspected 9-21-78 (DATE)

Nitrification Field Inspected 9-21-78 (DATE)

Washing Machine Line Inspected, If Applicable 9-21-78 (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 _____

Marshall Edwards
Environmentalist

EHD-5-76

Environmental Health Department's Copy