Date Received 7-24-83

MECK COUNTY DEPARTMENT
RECEIVED
JUL 2 1 1983
ENVIRONMENTAL HEALTH

SIR No. 19880

T. C. No. 215-061-05

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Gardner (LAST) Clifford (FIRST) Eugene (MIDDLE)

2) ADDRESS OF OWNER 9614 Allenmarle Rd ZIP 28212

3) PHONE NO. Home 537-8157 Office 537-8157

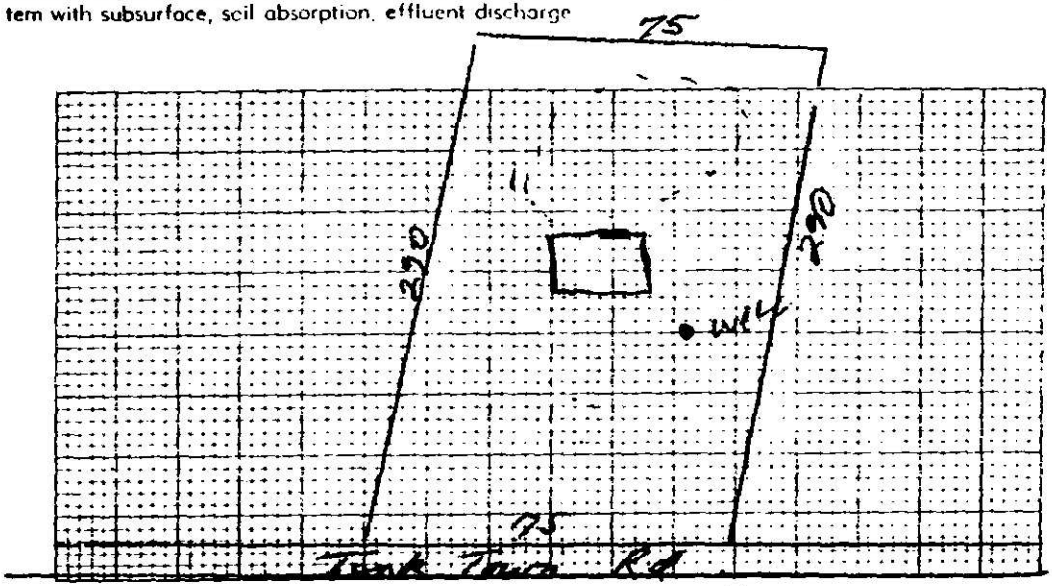
4) LOCATION OF PROPERTY 2100 Tank Town Rd (STREET OR COUNTY ROAD)

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 discharge



7) ACCURATELY DIAGRAM & DIMENSION LOT

Clifford Gardner
OWNER

EHD-5-76

Environmental Health Department's Copy

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

SIR. NO. 19880
T.C. NO. 215-061-05
DATE: 7-29-83

Mr. Clifford E. Gardner
9614 Albemarle Road
Charlotte, NC 28212

Re: Property located at 2100 Tank Town Road

Dear Mr. Gardner:

At your request, a field investigation was conducted on the property designated above. The soils on the property were found to contain a limited area of provisionally suitable soil for the installation of a ground absorption sewage disposal system. A copy of the site evaluation report is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit plot plans for the proposed construction, well, and ground absorption sewage disposal system to this office. They will be reviewed and if it is found that there is an adequate area of provisionally suitable soil to accommodate the proposed installation, an Improvements Permit will be issued by this office.

If I may be of assistance, please feel free to call.

Sincerely,

Bill D. Hardister, Jr.
Environmental Health Supervisor

BDH/kbg

Enclosure

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 19880

T.C. NO. 215-061-05

(Ground Absorption Sewage Disposal)

OWNER: Clifford Gardner PLAT NO:
ADDRESS: 9614 Alexander Rd 28212 LOT SIZE: 21,750 sq ft
LOCATION OF SITE: 2100 TANK Town Rd

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) 2-12 U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) Clayey U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) Blocky U	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) 40-48 U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) None U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) Adequate U	S PS U	S PS U	S PS U
7. OTHER (Specify) Restricted Area Location of well Narrow lot	S PS (U)	S PS U	S PS U	S PS U

8. SOIL GROUP TVa

9. SITE CLASSIFICATION Unsuitable

10. SOIL SERIES Cecil

S - Suitable PS - Provisionally Suitable U - Unsuitable

**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

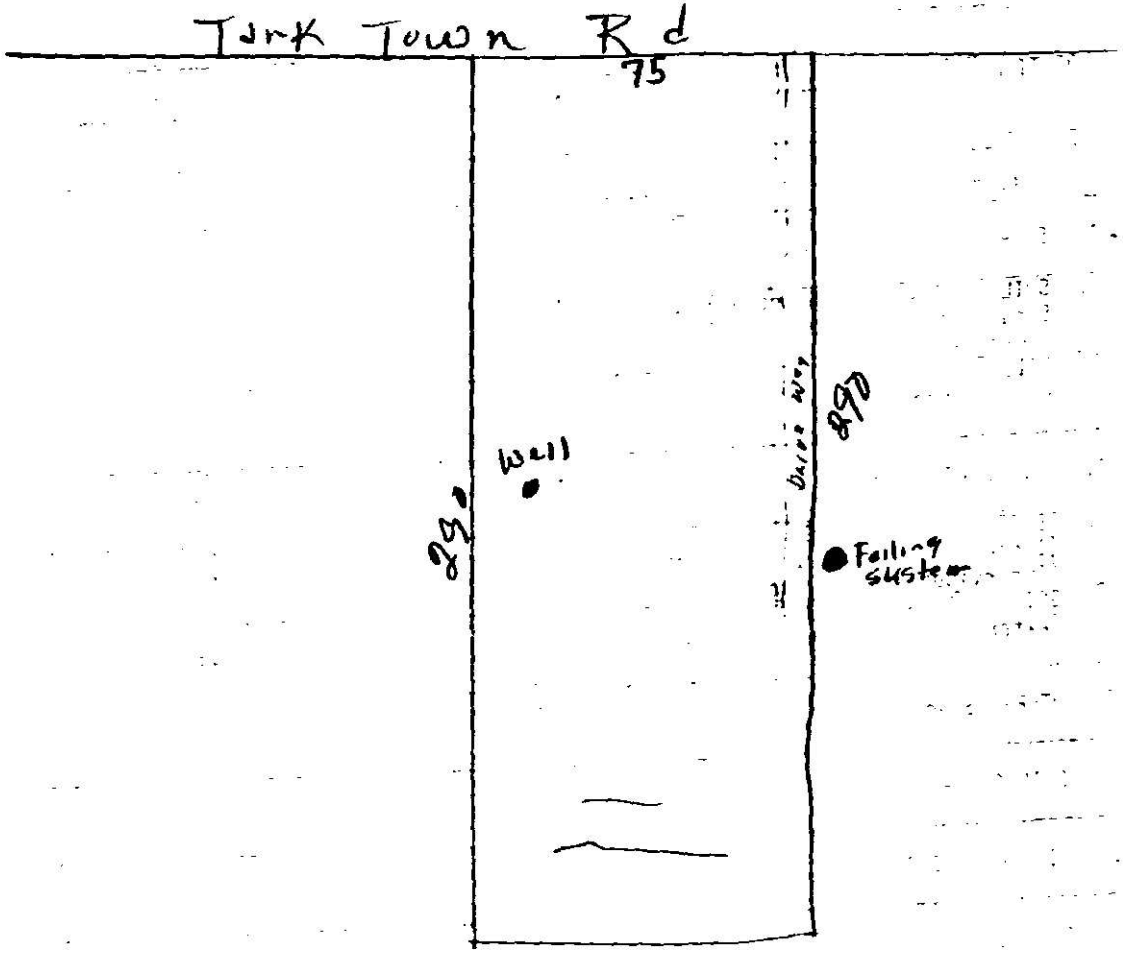
Recommendations/Comments: May be An Illegal System on Lot - Well is in middle of Lot. A Failing System At edge of Driveway.

Described by: W.B. Ramsey
Title: Sanitarian

Date: 7-27-83

EHD 539 (Revised: 6/82)

1


Jark Town Rd
75
Well
89'
89'
Failing system

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 19880

T.C. NO. 215-661-05

(Ground Absorption Sewage Disposal)

OWNER: Clifford Gardner
ADDRESS: 2080 Tank Town Rd

PLAT NO:
LOT SIZE:

LOCATION OF SITE: 2100 Tank Town Rd

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U — 2-10	S (PS) U — 2-4	S (PS) U — 2-2	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) U — Clayey	S (PS) U — Clayey	S PS (U) — Mixed Clay	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) U — Blocky	S (PS) U — Blocky	S PS (U) — Weak Blocky	S PS U
4. SOIL DEPTH (inches)	S (PS) U — 24-40	S PS (U) — 24'	S PS (U) — 20"	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U — None	S (PS) U — Clay	S PS (U) — Clay	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) U — Adequate	S (PS) U — Adequate	S PS (U) — Slow	S PS U
7. OTHER (Specify)	S PS (U)	S PS U	S PS U	S PS U
8. SOIL GROUP	IIa	IVa	IVb	
9. SITE CLASSIFICATION	Suitable	Unsuitable	Unsuitable	
10. SOIL SERIES	Cecil	24" Cecil Over Helena	Helena	

S - Suitable PS - Provisionally Suitable U - Unsuitable

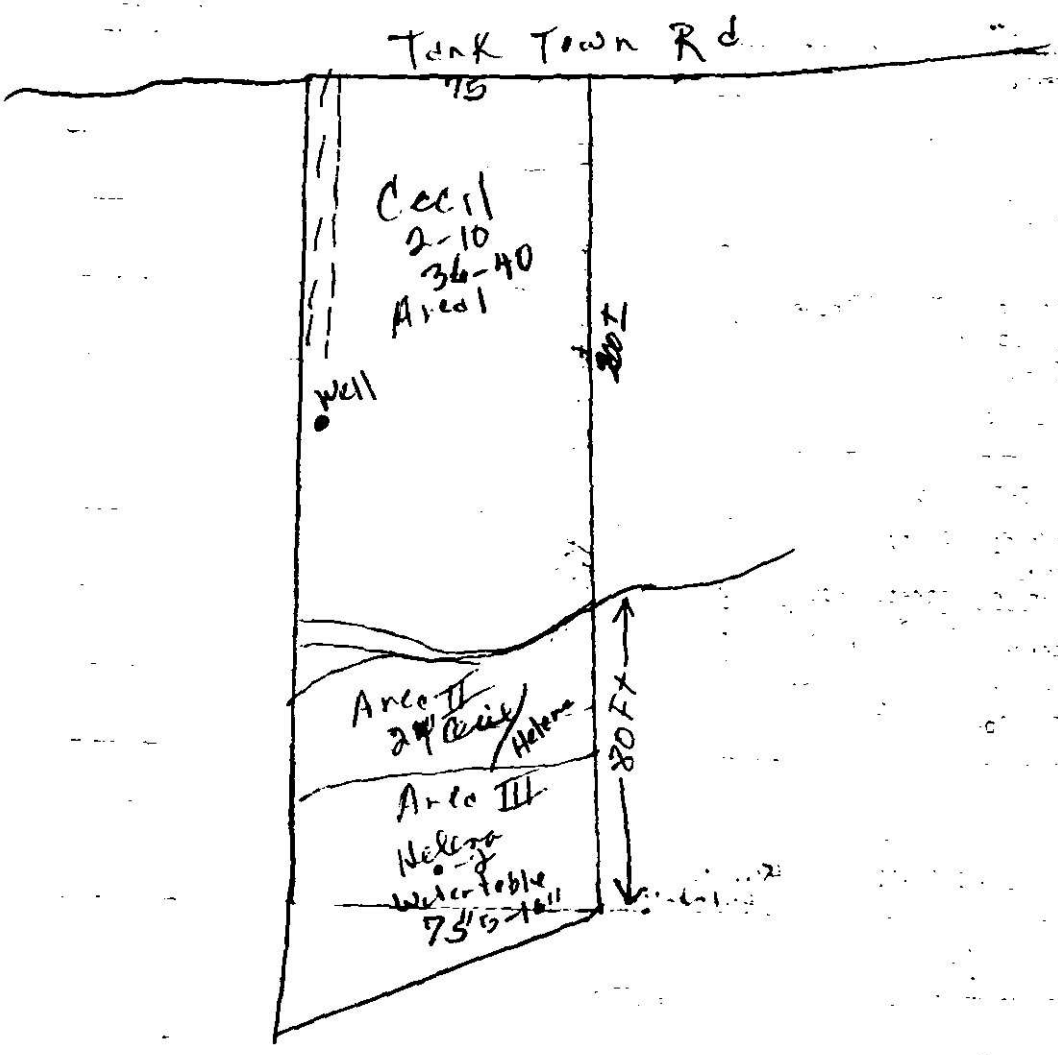
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: Revaluation After Lot Was Survey & All Lines Established.

Described by: W. B. Ramsey
Title: Sanitarian

Date: 2-3-83

EHD 539 (Revised: 6/82)


Tank Town Rd
75
Cecil
2-10
36-40
Area I
well
200 ft
Area II
Area III
Helena
water table
75" to tell
20 ft

Date Received 7-15-83

RECEIVED
JUL 15 1983
MECKLENBURG COUNTY HEALTH

ICAR (S) Application No. 19880

T. C. No. 215-061-0

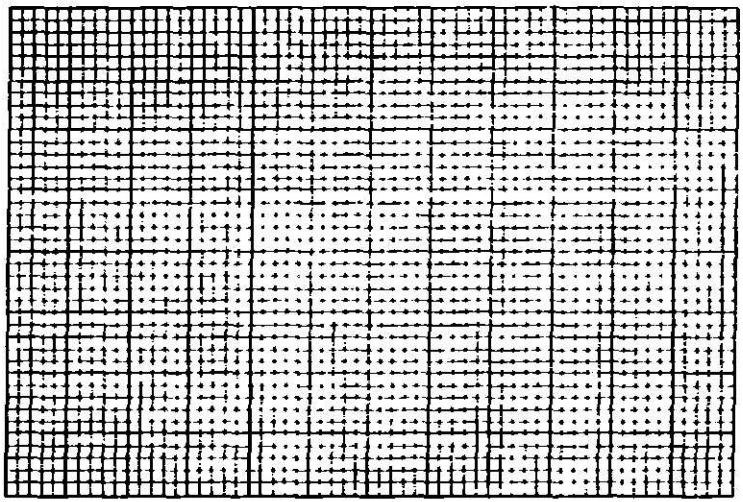
Map Date

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) X 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 3

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 Gardner (LAST) Clifford (FIRST) Eugene (MIDDLE)

14) ADDRESS OF OWNER 9614 Albemarle Rd

15) PHONE NO. Home 53-7-8157 Office 537-8157 372-2951

16) LOCATION OF SYSTEM 2600 TANK TOWN ROAD (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.

7-13-83
DATE OF APPLICATION

Clifford Gardner
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Received 7-27-83

RECEIVED ON BACK
JUL [illegible]
ENVIRONMENTAL HEALTH

ICAR(S) Application No. 19880

T. C. No. 215-061-05

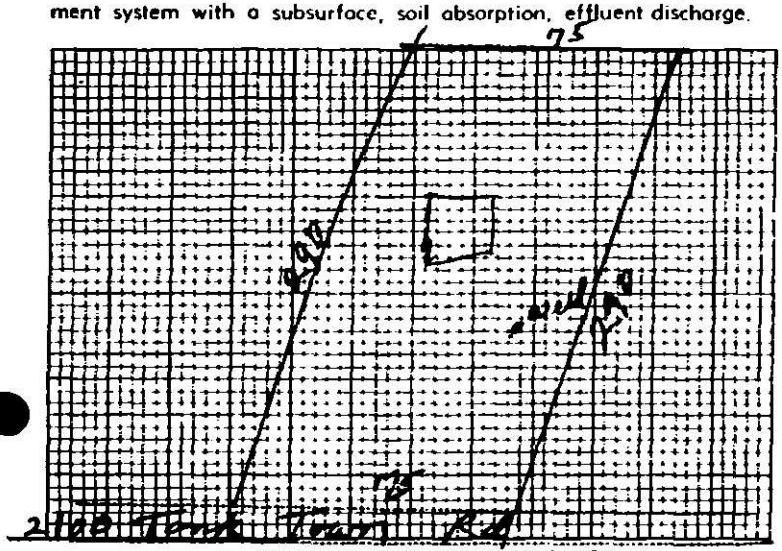
Map Date _____

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)

Mobile Home ___ Yes ✓ No
Residence ✓ Yes ___ No

4) No of Bedrooms 3
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 Gardner (LAST) Clifford (FIRST) Eugene (MIDDLE)

14) ADDRESS OF OWNER 9614 Albemarle Rd

15) PHONE NO. Home 537-8157 Office Same 372 2971

16) LOCATION OF SYSTEM 2100 Tank Town Rd (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) _____

e undersigned person hereby agrees that he has read the foregoing application and that the contents same are true. It is understood that any permit applied for herein shall be void and of no effect if any of above facts are not true.

7-22-83
OF APPLICATION

Clifford Gardner
OWNER

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

RI 8-5-83

Serial No. 6649

SIR No. 19880

Date Issued 8-4-83

T. C. No. 215-061-05

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 Gardner, (LAST) Clifford (FIRST) Eugene (MIDDLE)

ADDRESS OF OWNER 9614 Albemarle Road, Charlotte, NC ZIP 28212

LOCATION OF LOT 2100 Tank Town 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 19880. 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. LIFT STATION MAY BE REQUIRED
2. That an "Installation, Construction, Alteration, and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altered, 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.

Ralph Wells
Environmentalist

Eric D. Hamilton
Environmental Health Director, or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

Date Received 4-24-84

SEE INSTRUCTIONS ON BACK

ICAR(S) Application No. 19880

T. C. No. 215-061-05

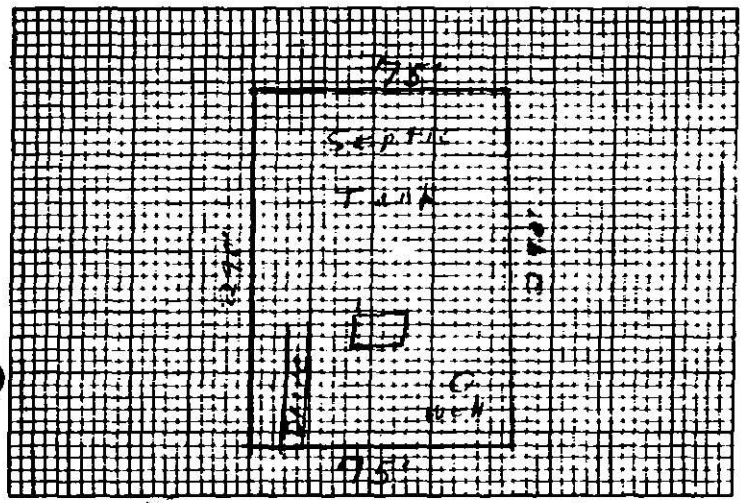
Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH - 3764603

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 3
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 Mercer (LAST) David (FIRST) L. (MIDDLE)

14) ADDRESS OF OWNER P. O. Box 355, Mineral Springs, N.C. 28108

15) PHONE NO. Home 821-7[illegible] Office 843-2182

16) LOCATION OF SYSTEM 2100 Jack Town Rd. (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No. 43 4466 1 2 Page No. 15

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

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

20) PTR NUMBER (See Instructions) 19880

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.

4-2-84
DATE OF APPLICATION

David L Mercer
OWNER

BHB-5-76

Environmental Health Department's Copy

Dan Moser Construction & Realty Co.

Post Office Box 355
MINERAL SPRINGS, NORTH CAROLINA 28108

Phone (704) 843-2182

MECK COUNTY DEPARTMENT OF
RECEIVED
JUN 7 1984
ENVIRONMENTAL HEALTH

June 6, 1984

Mr. Kelly Randall
Mecklenberg County Dept. of Environmental Health
1200 Blythe Blvd.
Charlotte, N.C. 28203

Dear Mr. Randall:

Enclosed is the survey showing the proposed house to be built 125 feet from the main street.

Please let us know as soon as possible as to when we can pick up the building permit.

Very Truly Yours,

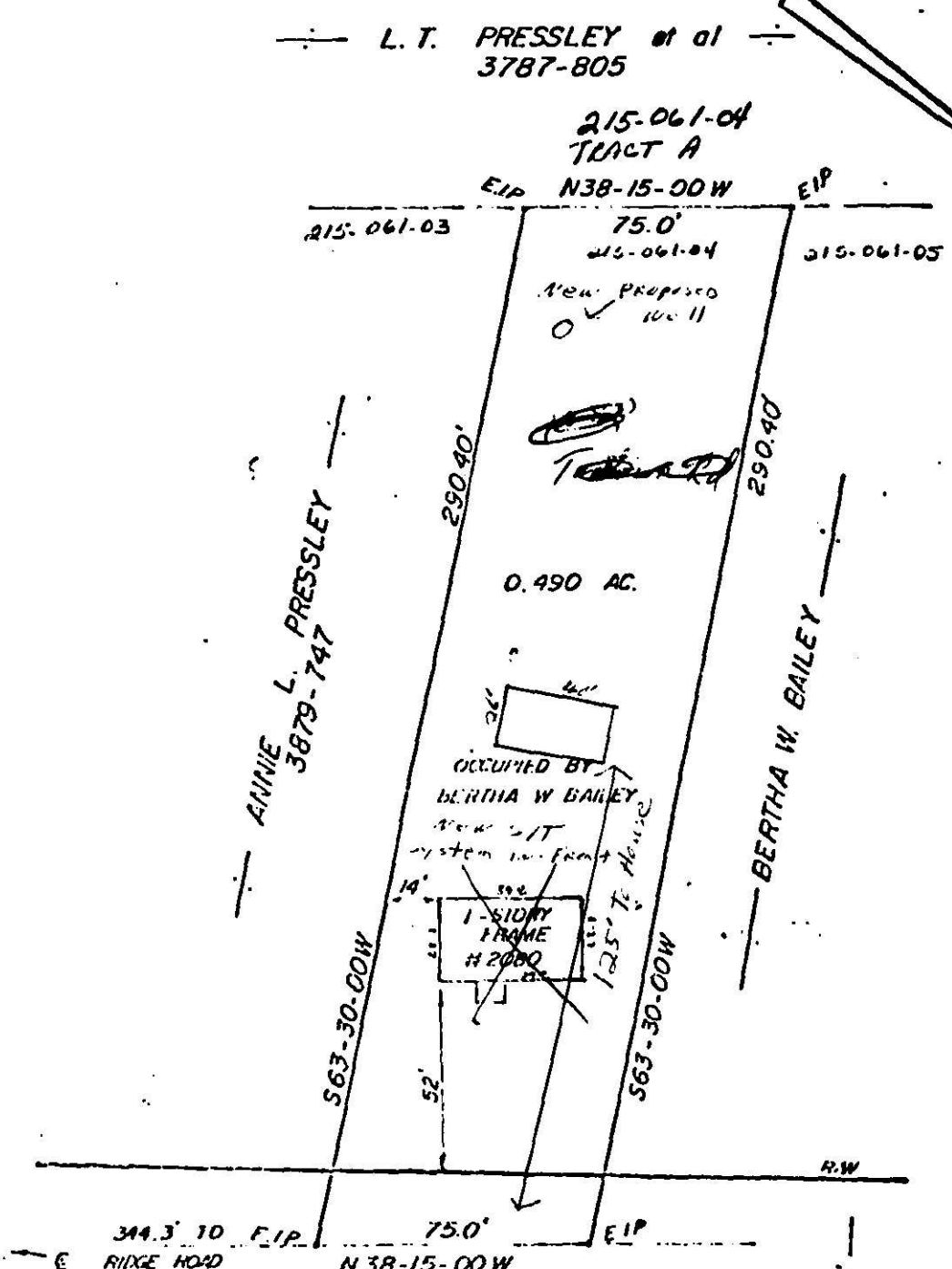
Dan L Moser

Dan L. Moser, President
Dan Moser Construction & Realty Co.

PROPERTY SHOWN ON THIS PLAT, AND THAT THE TITLE LINES AND THE WALLS OF THE BUILDINGS IF ANY ARE AS SHOWN HEREON.

SIGNED R.B. PHARR

R. B. PHARR & ASSOCIATES, REGISTERED SURVEYORS



(SR # 3453)

2100 TANK TOWN ROAD

BOUNDARY OF SURVEY

PROPERTY AS SHOWN

Serial No. 7570

Date Issued 6-11-84

SIR No. 19880

T. C. No. 215-061-05

Map Date L 6/81

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 Moser, (LAST) Dan (FIRST) L. (MIDDLE)

ADDRESS OF OWNER P. O. Box 355, Mineral Springs, NC ZIP 28108

LOCATION OF LOT 2100 Tank Town 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 ~~19880~~ 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, altered, and/or repaired and that the system be installed in accordance with same.
3. Existing well to be abandoned in accordance with 15 NCAC .0013.

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.

*** LIFT STATION REQUIRED ***

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

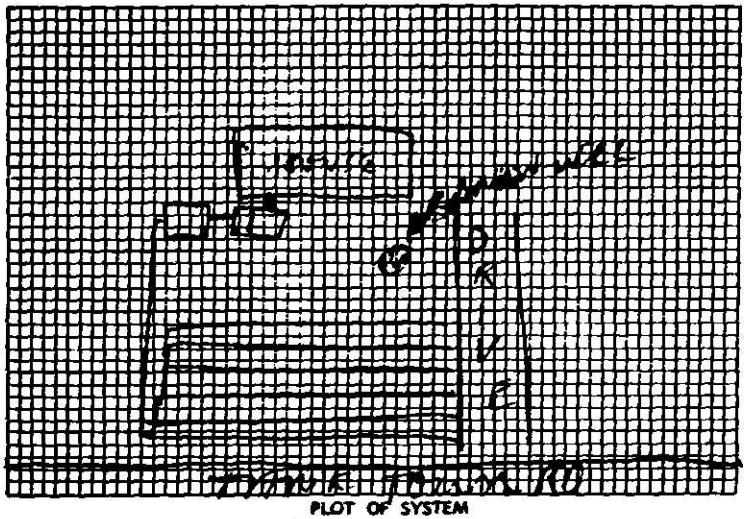
Date Issued 9-18-84 Serial No. 07557 ICAR(S) Permit No. 19880

T. C. No. 215-061-05

Map Date L

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 19880, 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 10-18-84, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500 ST + 1000 ST

Tank Construction RCC.

Absorption and/or Nitrification Lines:

Total Line Length 300'

Number of Lines 6 x 50' +

Distance from House 5' +

Distance from Property Line 10' +

Distance from Well 50' +

NAME OF OWNER DAN MOSER CONST. CO.

LOCATION OF PROPERTY 2100 TANK TOWN 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: 6 1/2" x 50' Lines x 3' wide x 12" stone w/ straw w/ geotextile on 1st & Random old well by pumping concrete down well bore

Kelly Randall

Division or Section Head — 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

C of A (s) No. 19880

Date Issued 9-20-84 Serial 6981 T. C. No. 215-061-05 L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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

Name of Owner DAN MOSER CONST. CO (LAST / FIRST / MIDDLE)

Location of Property 2100 TANK TOWN RD

Application Number 19880 Permit Number 19880

Inspection Data:

Liquid Capacity of Tank ST 1500 PT 1000 Tank Material PCC

Total Length of Drain Tile 300' Number of Lines 6 x 50'

Depth of Filter Material 12" Cover Depth 1-2'

Water Supply Source Well Distance from Water Source 50'+

Excavation Inspected 9-20-84 (DATE) Tank Inspected 9-20-84 (DATE)

Nitrification Field Inspected 9-20-84 (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 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 _____

Kelly Rowell
Environmentalist

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

WBK