K

Date Received 7-30-73

APT No 6760

T C No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Young (LAST) Ronald (FIRST) Lee (MIDDLE)

2) ADDRESS OF OWNER Rt 2 Box 11 Huntersville NC ZIP 28078

3) PHONE NO Home 875-2738 Office Huntersville, N.C.

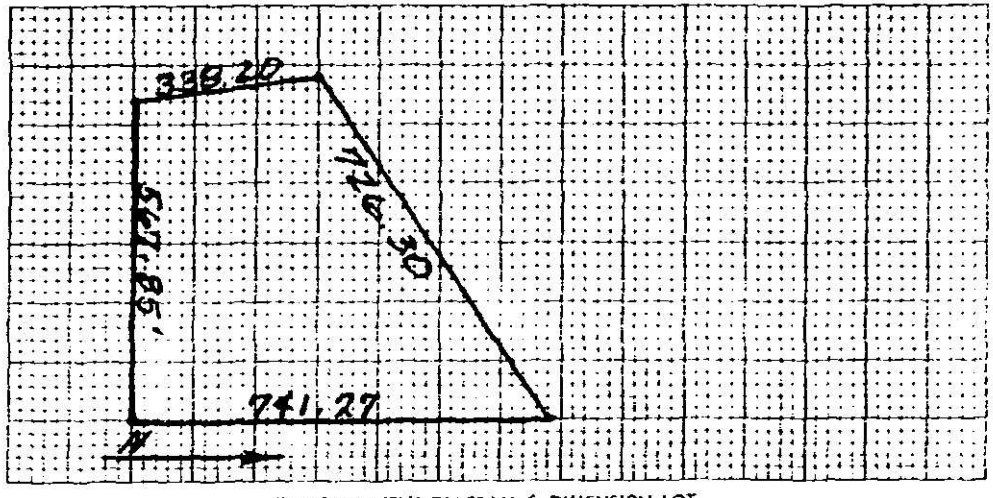
4) LOCATION OF PROPERTY Rd # 2602 (STREET OR COUNTY ROAD) e. Ewart St.

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 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

Ronald Lee Young
OWNER

FORM NO E-1-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3427

PTR No. 6760
P.O.
T C No 019-252-06 01

Date Issued August 2, 1973

Map Date 2-14-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

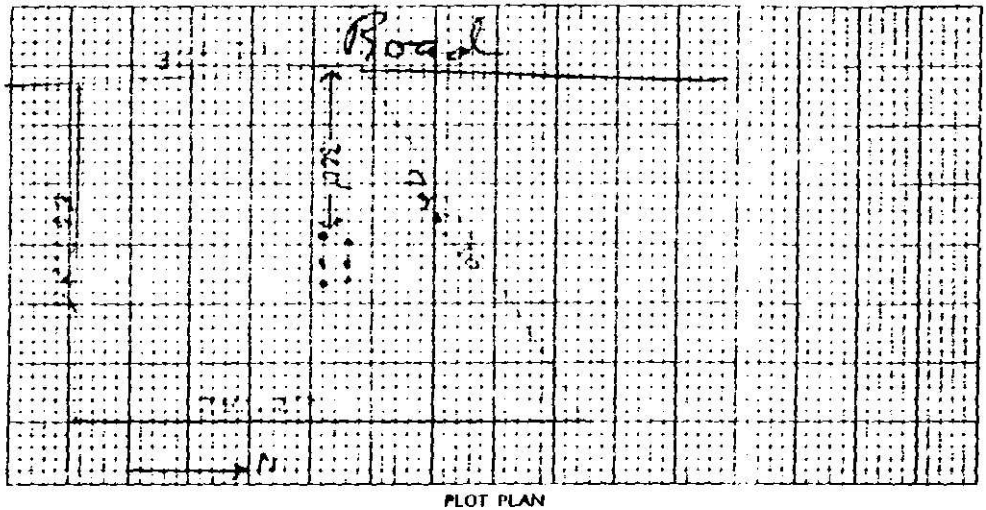
PERCOLATION TEST REPORT

NAME OF OWNER Young, (LAST) Ronald (FIRST) Lee (MIDDLE)

ADDRESS OF OWNER Route 2, Box 11, Huntersville, N.C. ZIP 28078

LOCATION OF PROPERTY Ewart Street or County Road 2602 (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO



PLOT PLAN

This is to certify that a percolation test has been run and an on-site inspection made by the Mecklenburg County Health Department on the lot described above. The said test was conducted on that portion of the lot as indicated on above plot

The percolation rate determined by the test was 52 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. A permit to install, construct, alter, or repair the specific system shall be obtained from the Mecklenburg County Health Department prior to the beginning of any construction of building, 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 Health Department prior to installation based on the percolation 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 where the percolation test was run.
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 Health Department, renders the area where the percolation test was run unsuitable for the 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 State Board of Health and the Mecklenburg County Board of Health which were in effect on the date of issuance and is void if at any time in the future, prior to the 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.

John R. Atkinson

Director, Environmental Health Division or
Authorized Section Head

FORM NO E-2-4-1-71

HEALTH DEPARTMENT'S COPY

Date Received 2-30-73

ICAR(S) Application No 6960

T C No 019-252-4

Map Date

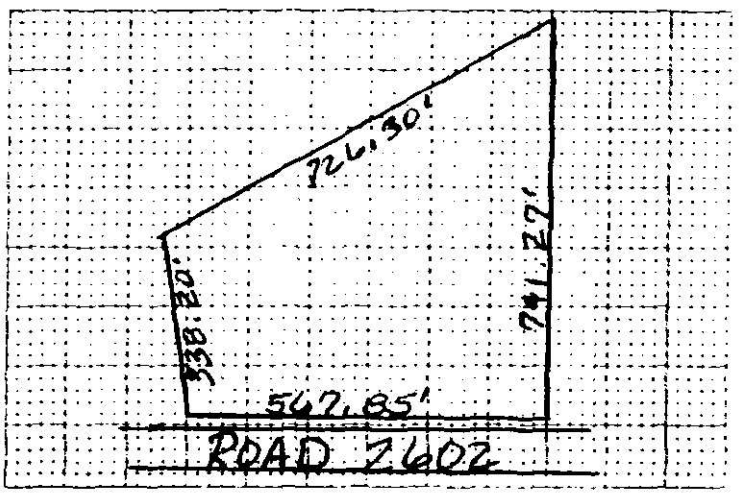
MECKLENBURG COUNTY HEALTH DEPARTMENT

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

5) Business Use: Yes No
Employees

6) Washing Machine: ✓ Yes ____ No

7) Garbage Disposal: ____ Yes ✓ No

8) Dishwasher: ✓ Yes ____ No

9) Water Supply
A) Individual Well ✓
B) Government System ____
C) Community System
1) Well ____
2) Government System ____

10) Sewage System
Home Connected to Public Sewer ____
If public sewer: ____ Yes ✓ No
Home using Septic Tank System ____
Community sewer: Yes ✓ No

11) FHA Case No ____

12) VA Case No ____

13) NAME OF OWNER Young (LAST) Ronald (FIRST) Lee (MIDDLE)

14) ADDRESS OF OWNER Rt 2 Box 11 Huntersville, N.C.

15) PHONE NO Home 875-2738 Office Huntersville N.C.

16) LOCATION OF SYSTEM Rd 2602 o. Ewart st.
(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 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 statements 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.

DATE OF APPLICATION

Ronald L Young
OWNER

E-4-5-1-72

HEALTH DEPARTMENT'S COPY

Date Issued August 2, 1973 **Serial No. 3252**

LA No. 6760
P.O.
T C. No. 019-252-0

Map Date 2-14-73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Young (LAST) Ronald (FIRST) Lee (MIDDLE)

ADDRESS OF OWNER Route 2, Box 11, Huntersville, N.C. ZIP 28078

LOCATION OF LOT Ewart Street or County Road 2602 (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

MAP BOOK NO _____ PAGE NO _____

The above specified lot is approved by the Mecklenburg County Health Department for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the percolation test results which yielded a percolation rate of 52 min/in 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 6760. 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 percolation test 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

John R Atkisson
Director, Environmental Health Division or Authorized Section Head

FORM NO. E 3 4-1-71

HEALTH DEPARTMENT'S COPY

Serial No. 5203 ICARIS Permit No 6760

Date Issued 16 May 74

P.O.T.C No 019-252-05

Map Date 14 Feb 73

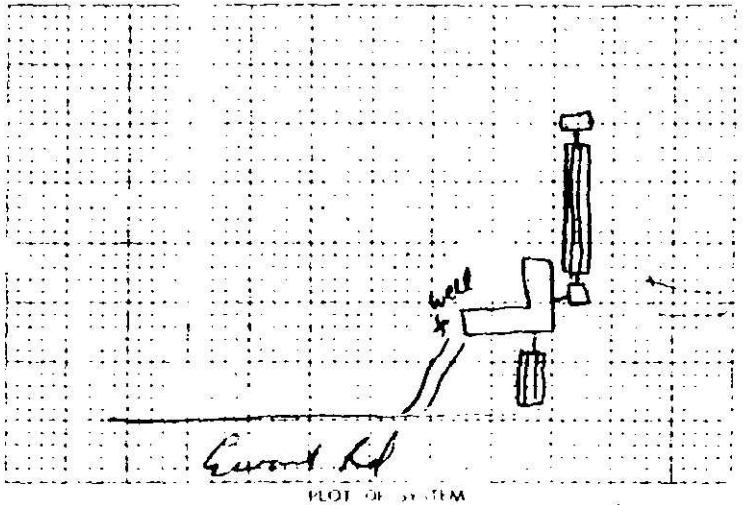
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 waste water treatment system with subsurface soil absorption effluent discharge as specified herein at the described location. This permit is granted based upon the information supplied on application 6760 dated 7-30-73 and this permit shall be void and of no effect if the information provided on the application is not true or is erroneous. All work shall be completed on or before 16 June 74, after which date this permit shall be null and void



PLOT OF SYSTEM

Percolation Rate 52

Liquid Capacity of Tank 1500 gal

Tank Construction Pc

Absorption and/or Nitrification Lines

Total Line Length 765 & 150 lin ft

Number of Lines 6(15'x12"x17") 3(7½'x15"x17")

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Young, Ronald L.

LOCATION OF PROPERTY Everett Rd

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered inspectable or can be used

Comments Aerationjet 3½ X 7 x 4' w/ Stone

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 section head of the Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired

E-5-9-1-72