Date Received 6/27/75

APT No. 9620

T. C. No. _____

Map Date _____

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER (LAST) SOUTHMINISTER (FIRST) CO. (MIDDLE)

2) ADDRESS OF OWNER P.O. Box 23057 CHARLOTTE ZIP 28212

3) PHONE NO Home 535 5900 Office 372 3885

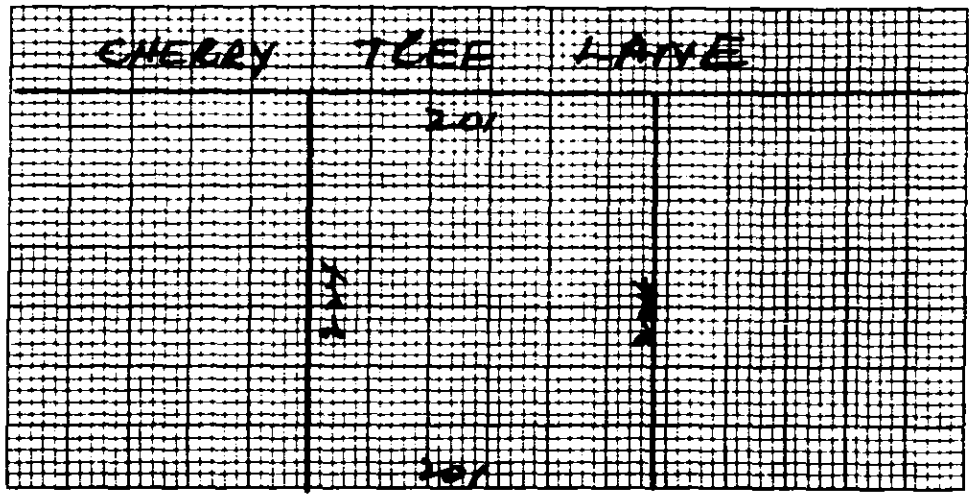
4) LOCATION OF PROPERTY CHERRY TREE LANE (STREET OR COUNTY ROAD)

5) SUBDIVISION ROUENCE PLANTATION LOT NO 5 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

Southminister Co.
OWNER
Arthur L Moore

FORM NO. E-1-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 5417

PTR No. 9620
Pro: 227-062-22
T C No 227-062-01
11-9-77
Map Date 8-19-74

Date Issued June 30, 1975

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

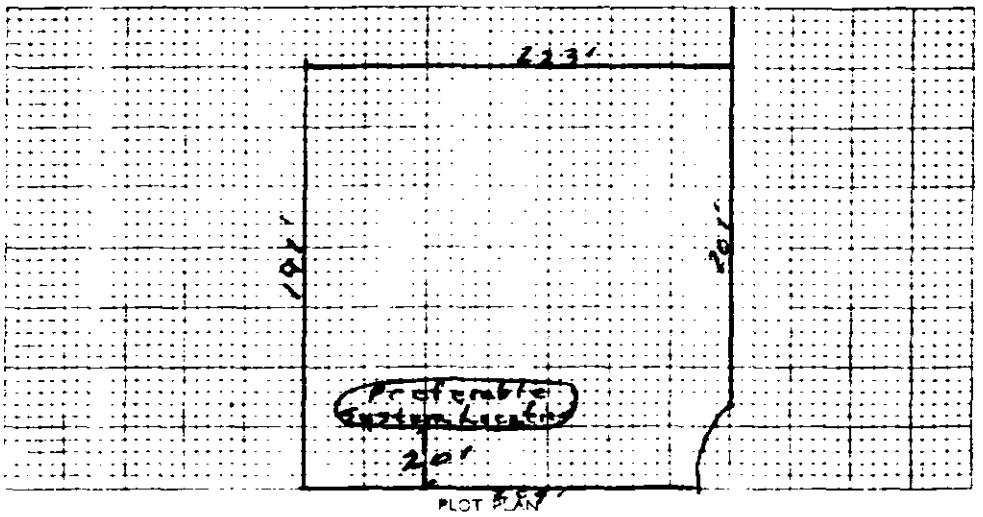
PERCOLATION TEST REPORT

NAME OF OWNER Southminister Company
(LAST) (FIRST) (MIDDLE)

ADDRESS OF OWNER P. O. Box 23057, Charlotte, N. C. ZIP 28212

LOCATION OF PROPERTY Cherry Tree Lane
(STREET OR COUNTY ROAD)

SUBDIVISION Providence Plantation LOT NO 5 BLOCK NO



PLOT PLAN

This is to certify that a percolation test has been run and an 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 *60Min./In. The lot was 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, alter or repair the specified system shall be obtained from the Mecklenburg County Health Department prior to the beginning of any construction of the building or of the wastewater treatment system on the lot.
2. The size of the septic tank wastewater treatment system which must be installed is 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 where 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 placement of wells 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.

*Results determined by soil Anlaysis

W. Everette Crumpler
Soil Scientist

Director, Environmental Health Division or
Authorized Section Head

FORM NO. E-2-9-1-72

HEALTH DEPARTMENT'S COPY

Date Received 6/16/76

ICAR (S) Application No. 1320

T C. No. 209-062-22

Map Date _____

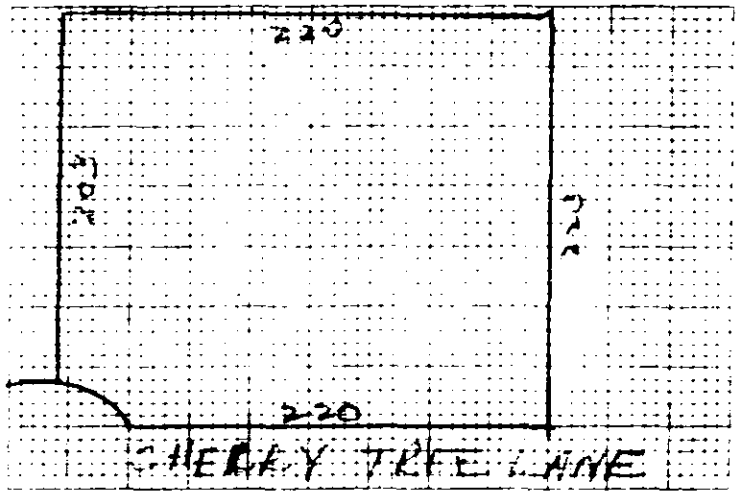
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 that 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 Max No Employees _____

6 Washing Machine X Yes ___ No

7 Garbage Disposal ___ Yes X No

8 Dishwasher X Yes ___ 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 South Minster Co. (LAST, FIRST, MIDDLE)

14 ADDRESS OF OWNER P.O. Box 23007 Charlotte N.C. 28211

15 PHONE NO Home 537-[illegible] Office 537-3285

16 LOCATION OF SYSTEM ___ Henry Tree (STREET OR COUNTY ROAD) LANE

17 SUBDIVISION Ferncliff Lot No 5 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 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.

6-16-76
DATE OF APPLICATION

South Minster Co.
OWNER

John M. Poole

FORM NC E-4-4-2M-6-75

HEALTH DEPARTMENT'S COPY

Date Issued 6/16/76

Serial No. 6016
IMPROVEMENTS PERMIT

LA No. 9620

T. C. No. ~~P-0. 227-082-01~~ 227-052-38

Map Date _____

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 Southminister Company
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P. O. Box 23057, Charlotte, N. C. ZIP 28212

LOCATION OF LOT Cherry Tree Lane
(STREET OR COUNTY ROAD)

SUBDIVISION Providence Plantation LOT NO. 5 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 _____, 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 9620. 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.

A. M. Reynolds
Environmentalist

John A. Atkinson
Director, Environmental Health Division or Authorized Section Head

FORM NO E-3-9-2M-6-75

HEALTH DEPARTMENT COPY

Date Issued 9-24-76

Serial No. 0225

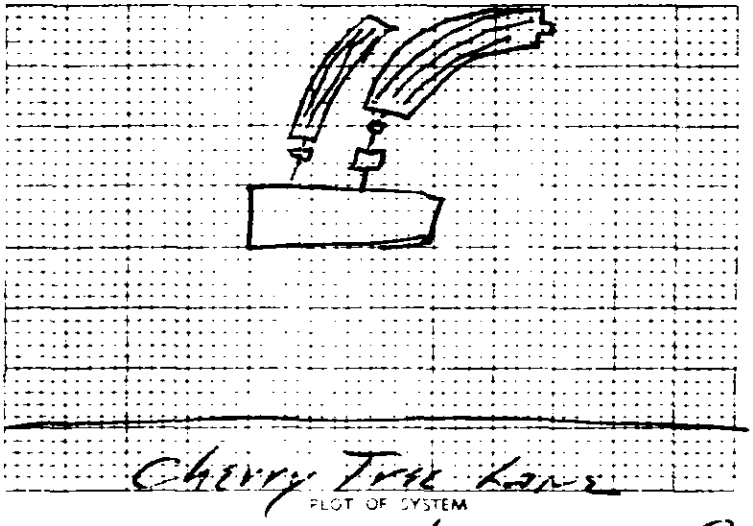
ICAR (S) Permit No. 9620

T C No. ~~227-082-01~~ 20

Map Date 227-082-20

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 9620, dated 6-16-76 and this permit shall be void and of no effect if the information provided in the application is not true or correct. All work shall be completed on or before 10-25-76 after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate 60

Liquid Capacity of Tank 1500

Tank Constructed RC

Absorption area Distribution Lines

Total Line Length 795 - 200'

Number of Lines 6 - 4

Distance from House 10

Distance from Property Line 10

Distance from Well 100'

NAME OF OWNER Southminster Co

LOCATION OF PROPERTY Cherry Tree Lane

The system shall meet all 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.

Comments 15' X 133' X 12"

10' X 50' X 12"

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-S-76

Environmental Health Department's Copy

Serial No. 0278

C of A (s) No. 9620

Date Issued 10-13-76

P O

T C No 227-082-01

227-082-02

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF COMPLETION 10-13-76

CERTIFICATE OF APPROVAL

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

Name of Owner Southminster Co (LAST / FIRST / MIDDLE)

Location of Property Cherry Tree Lane

Application Number 9620 Permit Number

Inspection Data:

Liquid Capacity of Tank 500 Tank Material PC

Total Length of Drain Tile 215'-200' Number of Lines 6-4

Depth of Filter Material 12" Cover Depth 18"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected — (DATE) Tank Inspected 10-13-76 (DATE)

Nitrification Field Inspected 10-13-76 (DATE)

Washing Machine Line Inspected, If Applicable 10-13-76 (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 Installed as permitted

Environmentalist

EHD-5-76

Environmental Health Department's Copy

K