Date Received 8-13-84

MECK COUNTY DEPARTMENT OF
RECEIVED
AUG 13 1984
ENVIRONMENTAL HEALTH

SIR No. 21306

T. C. No. PO 135-391-99

Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER BOB McLEMORE CO INC

2) ADDRESS OF OWNER (LAST) PO BOX (FIRST) 25746 (MIDDLE) CHAR ZIP 28212

3) PHONE NO. Home ——— Office 545-6111

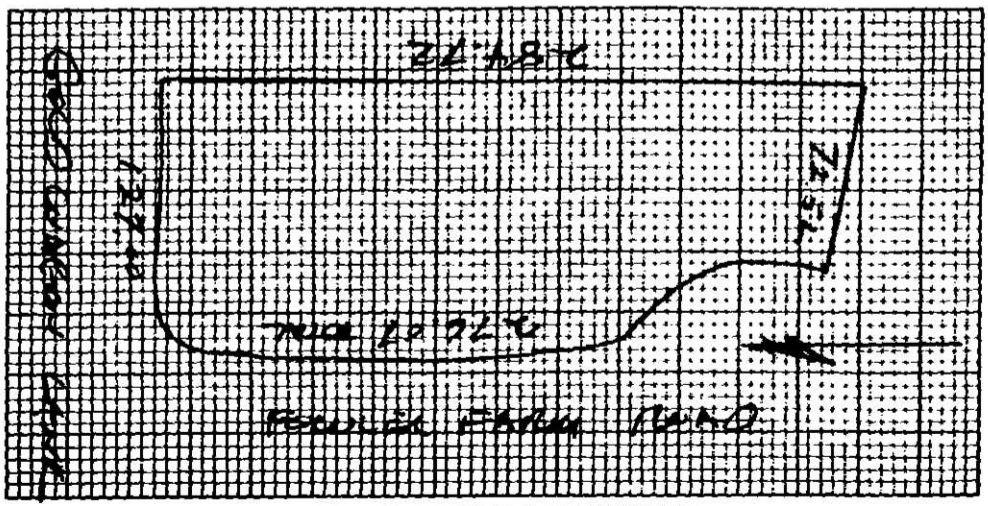
4) LOCATION OF PROPERTY 5800 COLONIAL WAGON LANE
(STREET OR COUNTY ROAD)

5) SUBDIVISION FAIRWOOD SECT 20 LOT NO. 12 BLOCK NO. W

MAP BOOK NO. 20 PAGE NO. 611

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

OWNER BOB McLEMORE CO INC

8-9-84

BHD-5-76

Environmental Health Department's Copy

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21306

T.C. NO. PO 135-39199

(Ground Absorption Sewage Disposal)

OWNER: Bob McGemore Co. Inc.
ADDRESS: PO Box 2574 Charlotte N.C. 28212
PLAT NO: 12-W
LOT SIZE: Approx 2 2000
LOCATION OF SITE: [illegible]

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS 2-8% U	S PS 2-8% U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S PS clay U	S PS clay U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S PS Blocky U	S PS Blocky U	S PS U	S PS U
4. SOIL DEPTH (inches)	S PS 36-38' U	S PS 24-36" U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S PS >30" U	S PS <36' U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S PS >36" to ground water U	S PS >36" to ground water U	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IVA	IVA		
9. SITE CLASSIFICATION	Provisionally suitable	unsuitable		
10. SOIL SERIES	Cecil Like	Pacolet Like		

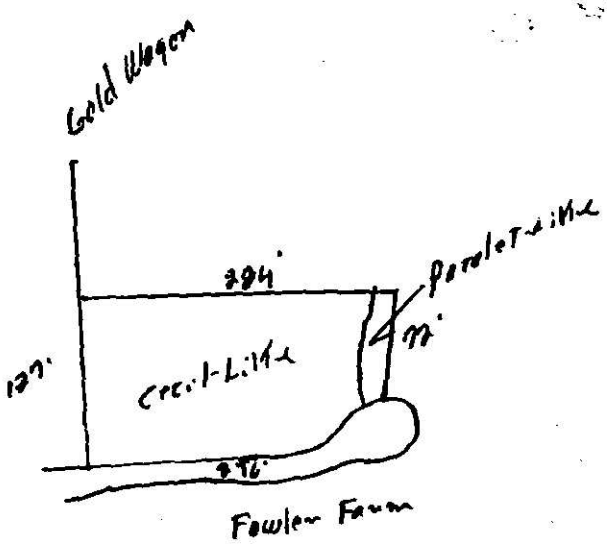
S - Suitable PS - Provisionally Suitable U - Unsuitable

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

Recommendations/Comments:

Described by: William R. Martin
Title: Soil Scientist

Date: 11-1984


Gold Wagon
284'
Parallel-Like
127'
Cecil-Like
Fowler Farm

Serial No. 5947

SIR No. 21306

Date Issued 11-19-84

T. C. No. PO 135-391-99

Map Date L

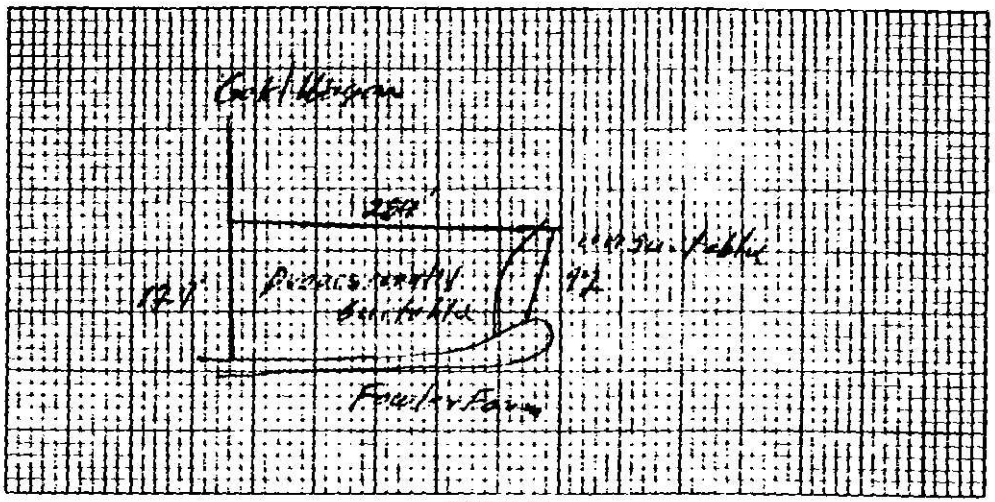
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Bob McLemore Co.
LAST FIRST MIDDLE

ADDRESS OF OWNER P.O. Box 25746, Charlotte, NC ZIP 28212

LOCATION OF PROPERTY 5800 Gold Wagon Lane
STREET OR COUNTY ROAD

SUBDIVISION _____ LOT NO. 12 BLOCK NO. W



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 PROVISIONALLY SUITABLE

The permeability rate determined by the investigation was _____ 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 plot.
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 E. Marin
Soil Scientist

Bice D. Hardister Jr.
Environmental Health Director or
Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

Date Received _____

MECK C Y DEPARTMENT OF
RECEIVED
1984
ENVIRONMENTAL HEALTH

ICAR(S) Application No. 21306

T. C. No. PO 135-391-99

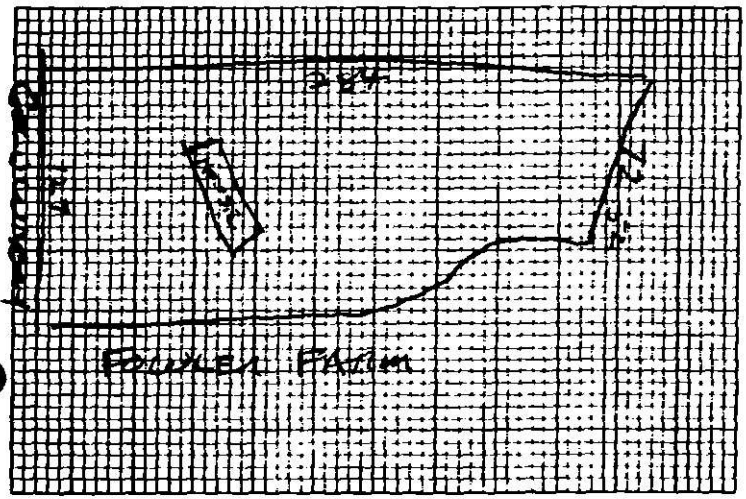
Map Date L

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) ____ 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 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 ____
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 BOB McLEMORE Co INC
LAST FIRST MIDDLE

14) ADDRESS OF OWNER PO BOX 25746 CHAR 28212

15) PHONE NO. Home ____ Office 545-6111

16) LOCATION OF SYSTEM 5800 GOLD WAGON LANE
STREET OR COUNTY ROAD

17) SUBDIVISION FARMWOOD SEC. 20 Lot No. 12 Block No. W

Map Book No. 20 Page No. 611

18) DEED REFERENCE — DEED BOOK ____ AT PAGE ____

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ____ NO DATE RUN 11-19-84

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.

11-19-84
DATE OF APPLICATION

BOB McLEMORE Co, INC.
OWNER
BY [signature]

BHB-5-76

Environmental Health Department's Copy

Date Received 1-7-85

RECEIVED
SEE INSTRUCTIONS ON BACK
JAN 7 1985
ENVIRONMENTAL HEALTH

ICAR(S) Application No. 21306

T. C. No. PO 135-391-99

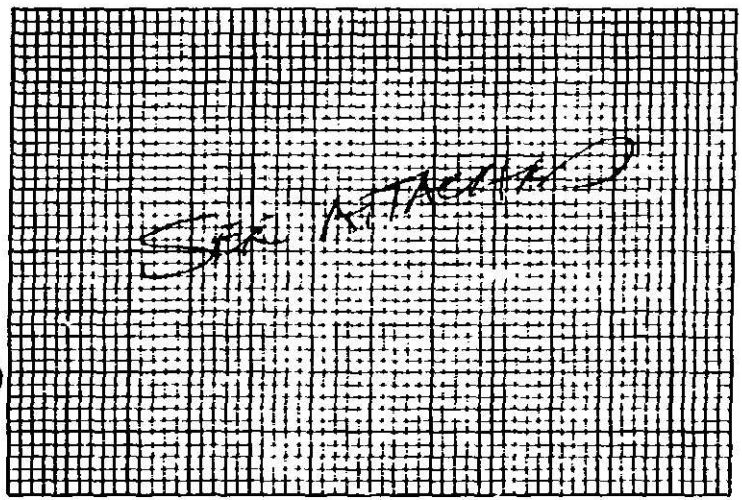
Map Date L

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) ___ 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 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 ___
   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 BOB McLEMORE Co. INC.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER PO BOX 25746 CHARLOTTE 28212

15) PHONE NO. Home ___ Office 545-6111

16) LOCATION OF SYSTEM 5800 GOLD WAGON LANE
STREET OR COUNTY ROAD

17) SUBDIVISION FARMWOOD SECT #20 Lot No. 12 Block No. W

Map Book No. 20 Page No. 611

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ___ NO DATE RUN 11-19-84

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.

1-3-85
DATE OF APPLICATION

BOB McLEMORE Co. INC
OWNER

[signature]

EHD-5-76

Environmental Health Department's Copy

Serial No. 8097

Date Issued 1-7-84

SIR No. 21306

T. C. No. PO 135-391-99

Map Date L CRT

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 Bob McLemore Co., Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P.O. Box 25746, Charlotte, NC ZIP 28212

LOCATION OF LOT 5800 Gold Wagon Lane
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. 12 BLOCK NO. W

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 21306. 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.

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 MAY BE NEEDED ***

Cynthia G. Bass
Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

C of A (s) No. 21306

Date Issued 4/25/85 Serial 7492 T. C. No. 135-391-99

L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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

Name of Owner Mclemore (LAST) Bob (FIRST) (MIDDLE)

Location of Property 5800 Gold Wagon Lane

Application Number 21306 Permit Number 21306

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material PCC

Total Length of Drain Tile 535' Number of Lines 5

Depth of Filter Material 12" Cover Depth 12"

Water Supply Source community Distance from Water Source >100'

Excavation Inspected 4/25/85 (DATE) Tank Inspected 4/25/85 (DATE)

Nitrification Field Inspected 4/25/85 (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: _____

Cynthia G. Bass
Environmentalist

BHD-5-76

Environmental Health Department's Copy

Serial No. 08024

ICAR(S) Permit No. 21306

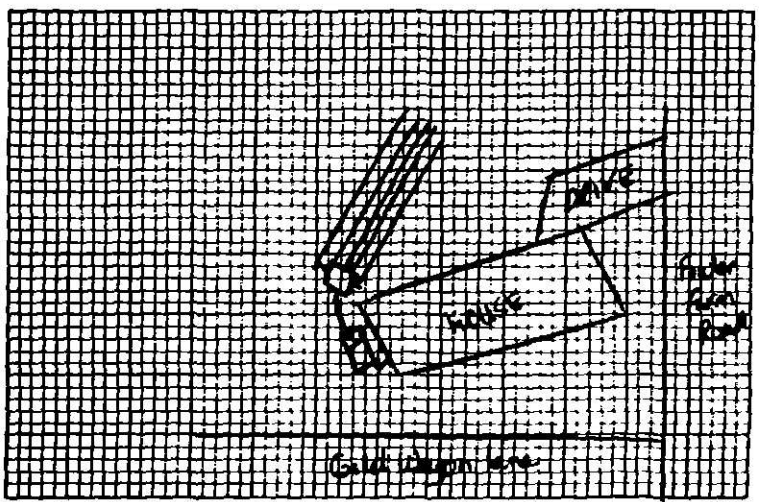
Date Issued 4/1/85

T. C. No. 135-391-99

Map Date 6

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 21306, dated 1/7/85 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 5/1/86, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate 45

Liquid Capacity of Tank 1500gal

Tank Construction PCC

Absorption and/or Nitrification Lines:

Total Line Length 535'

Number of Lines 5

Distance from House 5'

Distance from Property Line 10'

Distance from Well >100'

NAME OF OWNER Mclamore, Bob

LOCATION OF PROPERTY 5800 Gold Wagon Lane

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.

5 Trenches x 3' x 107' x 12" stone with gradeboards and straw as cover

Comments: _____

B. Hardison
Division or Section Head

Cynthia G. Boss
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