Date Received 2-A-73

APT No. 5589

T C No 135-256-01

Map Date 6-10-74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Bob McEntire & Co
(LAST, FIRST, MIDDLE)

2) ADDRESS OF OWNER 6129 Lee Mint Rd ZIP

3) PHONE NO. Home Office 545 4507

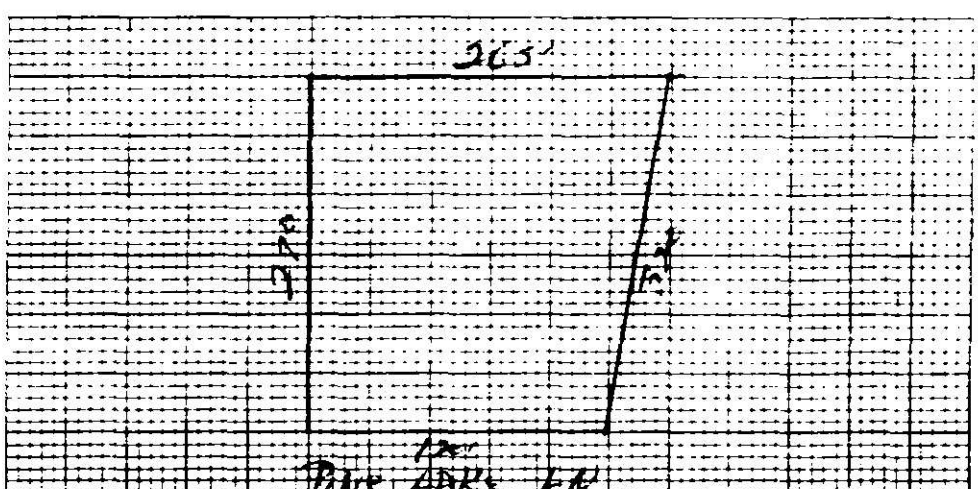
4) LOCATION OF PROPERTY Pine Lake Lane
(STREET OR COUNTY ROAD)

5) SUBDIVISION Farmwood Est LOT NO 11 BLOCK NO. H

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

OWNER

FORM NO. E-1-11-1-70

HEALTH DEPARTMENT'S COPY

Serial No.

PTR No. 5589
T. C No. 135-25b-01
Map Date 4-10-74

Date Issued April 3, 1973

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

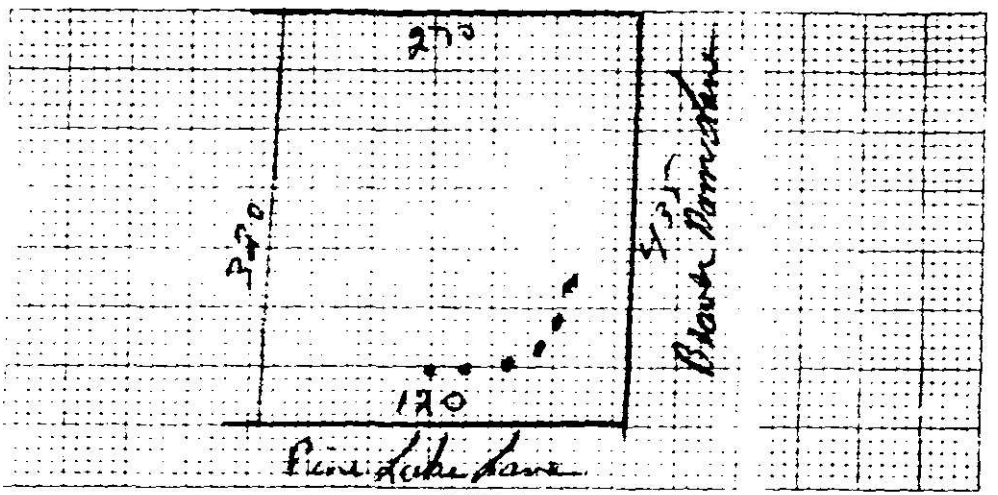
PERCOLATION TEST REPORT

NAME OF OWNER Bob McLemore & Company, Inc.
LAST FIRST MIDDLE

ADDRESS OF OWNER 8129 Lebanon Road, Matthews, N.C. ZIP 28105

LOCATION OF PROPERTY Pine Lake Lane
STREET OR COUNTY ROAD

SUBDIVISION Farmwood VI LOT NO 11 BLOCK NO H



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 60 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 buildings, or of the wastewater treatment system on the said lot.
2. The size of the septic tank wastewater teratment 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 D. Atkinson

Director, Environmental Health Division or
Authorized Section Head

FORM NO. E-2-4-1-71

HEALTH DEPARTMENT'S COPY

W

Date Received 8-29-73

MECK COUNTY HEALTH DEPT
1973

ICAR S Application No 5589

T C No 135-25-06

Map Date 6-10-74

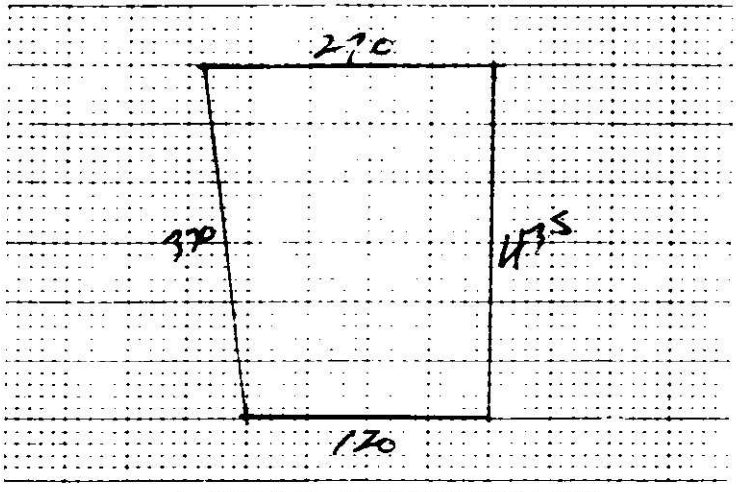
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 ✓ Install or Construct 2 ___ Alter or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption effluent discharge



4 No of Bedrooms 4

5 Estimated Maximum Number of Employees ___

6 Washing Machine ✓ Yes ___ No

7 Garbage Disposal ___ Yes ✓ No

8 Dishwasher ✓ Yes ___ No

9 Water Supply ___

A ___

B ___

C ___

D ___

E ___

F ___

G ___

H ___

I ___

J ___

K ___

L ___

M ___

N ___

O ___

P ___

Q ___

R ___

S ___

T ___

U ___

V ___

W ___

X ___

Y ___

Z ___

AA ___

BB ___

CC ___

DD ___

EE ___

FF ___

GG ___

HH ___

II ___

JJ ___

KK ___

LL ___

MM ___

NN ___

OO ___

PP ___

QQ ___

RR ___

SS ___

TT ___

UU ___

VV ___

WW ___

XX ___

YY ___

ZZ ___

Community sewer Yes ___ No ✓

Public Water No ___

VA Code No ___

3 PLOT PLAN ACCURATELY DIMENSIONED

13 NAME OF OWNER Bob McLemore & Co, Inc. (LAST FIRST MIDDLE)

14 ADDRESS OF OWNER 6109 Lebanon Rd

15 PHONE NO Home ___ Office 545 4507

16 LOCATION OF SYSTEM 7100 Pine Lake Lane (STREET OR COUNTY ROAD)

17 SUBDIVISION Farmwood II Lot No 11 Block No H

Map Book No ___ Page No ___

18 DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19 HAS A PERCOLATION TEST BEEN RUN? ✓ YES ___ NO DATE RUN 4-6-73 PR760

20 PTR NUMBER (See Instructions) 5589

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.

8-28-73
DATE OF APPLICATION

OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3361

Date Issued August 29, 1973

LA No 5589

T C No 135-25-01

Map Date 6-10-74

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 Bob McLemore & Company, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 6129 Lebanon Rd., Matthews, N.C. ZIP 28105

LOCATION OF LOT 7100 Pine Lake Lane
(STREET OR COUNTY ROAD)

SUBDIVISION Farmwood VI LOT NO 11 BLOCK NO H

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 60 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 5589. 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.

Thomas R. Ward
Environmentelist

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

FORM NO. E-3-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 12 Feb 1974 Serial No. [illegible] ICAR(S) Permit No 5589

T C No 135-256-06

Map Date 12-[illegible]-2
6-10-74

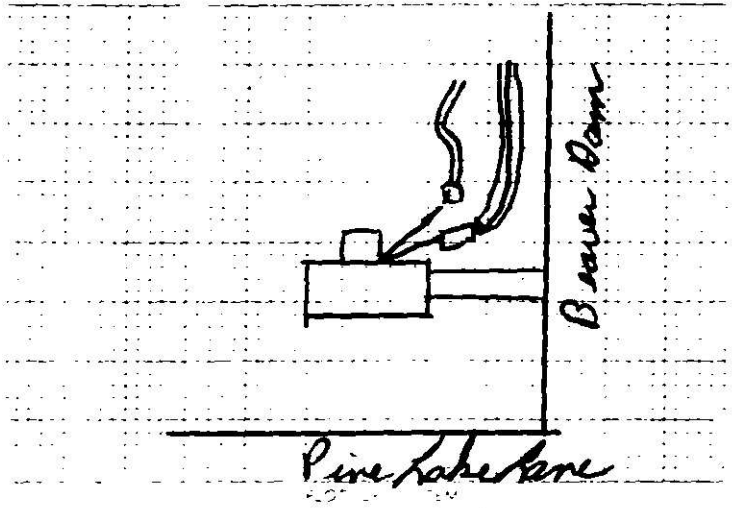
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 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 on application 5589 dated 8-28-73 and this permit shall be void and of no effect if the information provided in the application is found to be false. All work shall be completed on or before 15 May 1974 after which date this permit shall be null and void.



PLOT PLAN

Proposed Usage 60

Liquid Capacity of Tank 1500

Tank Construction concrete

Absorption area in Satisfactory Soil 795 aeration pit

Trench Width 6

Trench Length 10'

Depth from Ground Surface to Trench Bottom 15' +

Depth from Ground Surface to Absorption Area NA

NAME OF OWNER Bob McLennan & Company, Inc

LOCATION OF PROPERTY 7100 Pine Lake Lane Lot 11-H

This system shall meet all the minimum 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 unobservable or can be used.

Comments wash line in bed 7½' X 50' X 17"

✓

John R Adkisson
Environmentalist

Director of Environmental Health

If this permit is for the installation or construction of a new system it must be signed by the division or a supervisor 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.

Form E-5-9-1-72

Date Issued 19 Feb 1974 Serial 4464

C of A (s) No. 5589

PT C No 135-256-01 6-18-74

Map Date 12-18-72

CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Bob McLemore + Company, Inc (LAST, FIRST, MIDDLE)

Location of Property 7100 Pine Lake Lane Lot 11-A

Application Number 5589 Permit Number 5589

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material concrete

Total Length of Drain Tile 795 Lft Number of Lines 6 (15'x133')

Depth of Filter Material 12" Cover Depth 24"

Water Supply Source community Distance from Water Source NA

Excavation Inspected 2-18-74 (DATE) Tank Inspected 2-18-74 (DATE)

Nitrification Field Inspected 2-18-74 (DATE)

Washing Machine Line Inspected, If Applicable 2-18-74 (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 Board of Health 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 wash line in bed 7½ x 50'x17"

John R Adkinson

Sanitarian

FORM NO. E-6-4-1-71

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 4/2/77 | MECK C[illegible] | [illegible]ICAR(S) Application No 5589

T C No. [illegible]

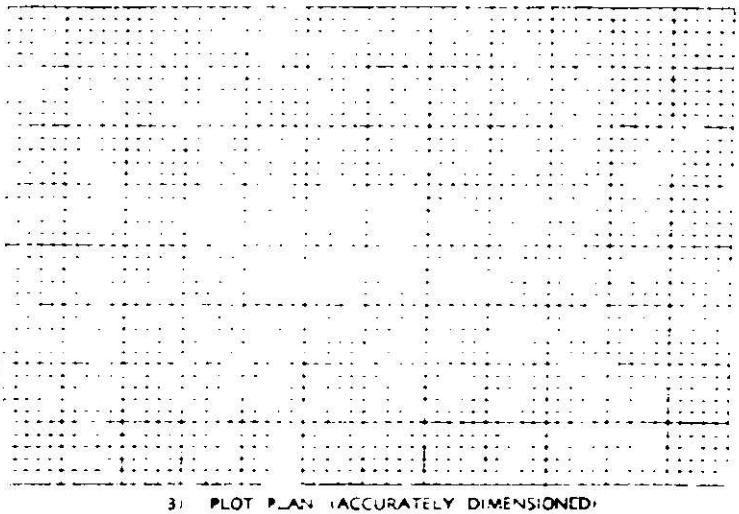
Map Date [illegible]

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)

4 [illegible] ✓ Yes ✓ No

5 [illegible] Mark N

Emp[illegible]

6 Washing Machine ___Yes ___No

7 Garbage D[illegible] ___Yes ___No

8 Dishwasher ✓ Yes ___No

9 Water Supply

A [illegible]

B Governmental System ___

C Community System

1 Well Private [illegible] ___

2 Governmental Source ___

Sewage System

[illegible] feet

of public sewer Yes ___No

Public [illegible] within 200 feet of

Community sewer ___Yes ___No

11 FHA Case No. ___

12 VA Case No. ___

13) NAME OF OWNER ___ LAST ___ FIRST ___ MIDDLE

14) ADDRESS OF OWNER ___

15) PHONE NO Home ___ Office ___

16) LOCATION OF SYSTEM ___ 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.

DATE OF APPLICATION ___ OWNER ___

EHD-S-76

Environmental Health Department's Copy