Date Received 1-24-73 APT No. 5464

T C No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Ridenhour (LAST) Carl (FIRST) Barringer (MIDDLE)

2) ADDRESS OF OWNER Woodlawn Dr. ZIP 28212

3) PHONE NO Home 596-0743 Office

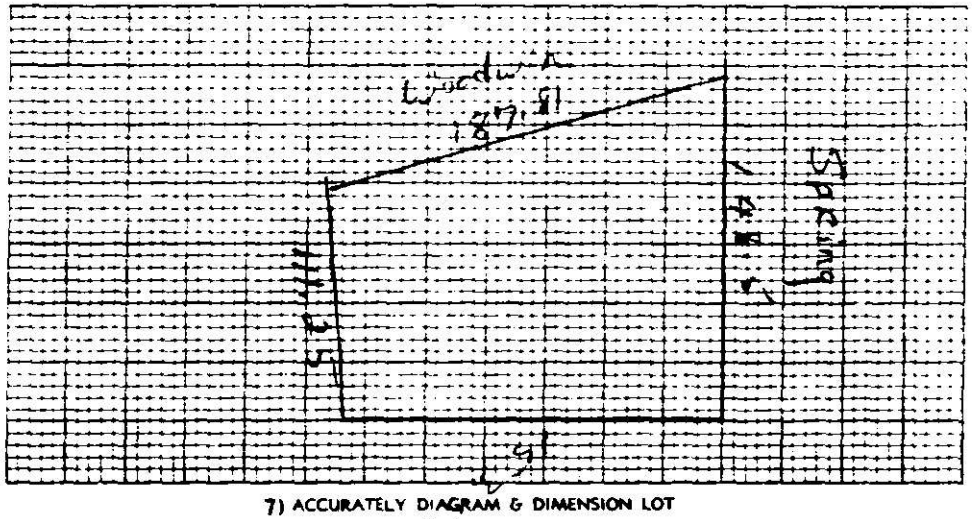
4) LOCATION OF PROPERTY Corner Woodlawn & Sharon Lane (STREET OR COUNTY ROAD)

5) SUBDIVISION Whispering Oaks LOT NO. 31 BLOCK NO. 6

MAP BOOK NO. 9 PAGE NO. 183

6) DEED REFERENCE DEED BOOK 2141 + 2255 PAGE NO. 57 + 61

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

Carl B. Ridenhour
OWNER

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

HEALTH DEPARTMENT'S COPY

Serial No. 7421

PTR No. 5464

T C No 105-162-17

Date Issued 2-9-73

Map Date 10-16-72

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

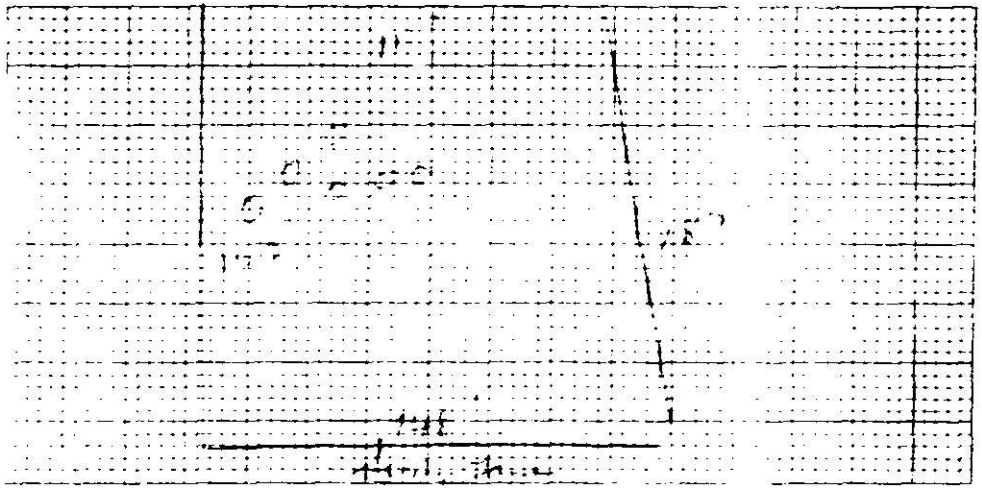
PERCOLATION TEST REPORT

NAME OF OWNER Fidenhour (LAST) Carl (FIRST) Barringer (MIDDLE)

ADDRESS OF OWNER Woodwin Drive ZIP 28212

LOCATION OF PROPERTY Corner Woodwin Dr. and Spring Lane (STREET OR COUNTY ROAD)

SUBDIVISION Whispering Oaks LOT NO 1 BLOCK NO 6



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 50 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 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 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.

John R. Atkinson

Director, Environmental Health Division or Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

Date Received 1-24-73

ICAR(S) Application No. 5464

T. C. No. _____

Map Date _____

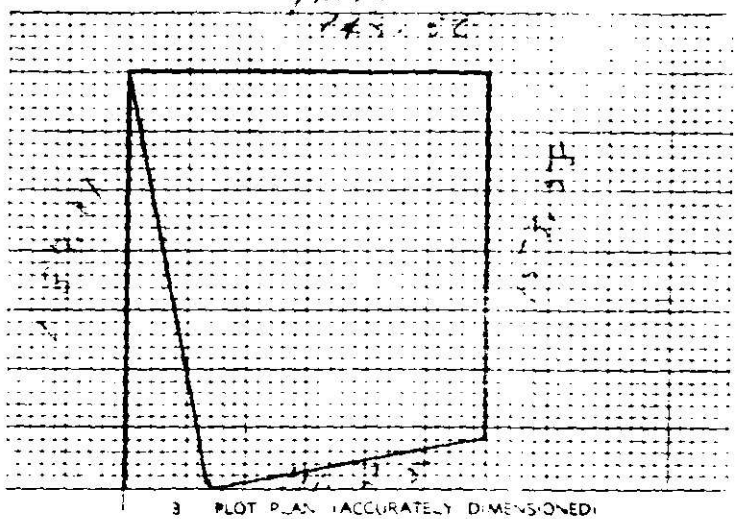
MECKLENBURG COUNTY HEALTH DEPARTMENT

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

( ) Install or Construct ( ) Alter or Repair an individual septic tank wastewater treatment system with a subsurface, soil absorption, effluent discharge



3 PLOT PLAN (ACCURATELY DIMENSIONED)

4 No. Bedrooms 3

5 Home 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

Well source _____

2 Governmental System _____

10 Sewage System

House located within 200 feet of sewer _____ Yes _____ No

House located within 200 feet of community sewer _____ Yes _____ No

FHA Case No _____

VA Case No _____

13) NAME OF OWNER Richardson (LAST) Carl (FIRST) Bakkenger (MIDDLE)

14) ADDRESS OF OWNER Reid Land Dairy, Charlotte, N C

15) PHONE NO Home 596-0343 Office _____

16) LOCATION OF SYSTEM Carmichael & Spring Lane (STREET OR COUNTY ROAD)

17) SUBDIVISION Whispering Oaks Lot No. 31 Block No. C

Map Book No 2 Page No. 163

18) DEED REFERENCE — DEED BOOK 2141 (4 2295) AT PAGE 57 (1 61)

19) HAS A PERCOLATION TEST BEEN RUN? ____ YES _X_ 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.

Jan. 23 1973
DATE OF APPLICATION

Carl B. Richardson
OWNER

FORM NO. E-4A-1-7

HEALTH DEPARTMENT'S COPY

Date Issued 2-9-73

Serial No. 2513

LA No. 5464

T C No 105-162-17

Map Date 10-16-72

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 Ridenhour (LAST) Carl (FIRST) Barringer (MIDDLE)

ADDRESS OF OWNER Woodwin Drive ZIP 28212

LOCATION OF LOT Corner of Woodwin and Spring Lane (STREET OR COUNTY ROAD)

SUBDIVISION Whispering Oaks LOT NO 1 BLOCK NO 6

MAP BOOK NO 9 PAGE NO 183

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 inspection of the said lot, and upon the information supplied in the "Application for an Installation, Construction, Alteration and/or Repair Permit" number 5464. 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

Director, Environmental Health Division or Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

Date Issued 11 July 73 Serial No. 4001 ICAR(S) Permit No. 5464

T C No

Map Date

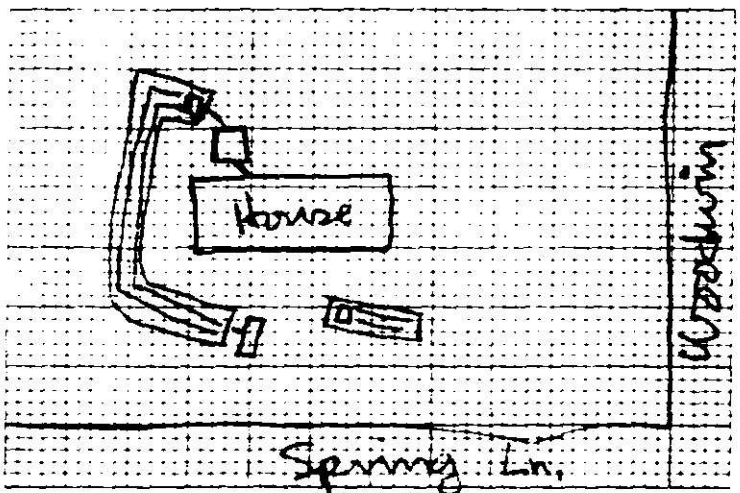
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTRUCTION, ALTERATION, AND OR REPAIR PERMIT

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

Permission 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 5464 dated 23 JAN 73 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 11 July 73 after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 1500 gal

Tank Construction Precast Concrete

Absorption and/or Distribution Lines

Total Line Length 600' & 150'

Number of Lines (4) 10' x 150'

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Ridenhour, Carl B.

LOCATION OF PROPERTY Corner Woodburn & Spring Ln.

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 uninspectable or can be used.

Comments: Aeration pit 2½' x 7' x 4' stone
Washer - 7½' x 50'
Level Lot

Division or Section Head

Environmentalist G.M. Reynolds

* 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 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 NO. E 5-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 11 July 73 **Serial No.** 3540

C of A (s) No. 5464

T C No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Rickenhour (LAST) Carl (FIRST) B. (MIDDLE)

Location of Property Corner of Woodlawn & Summit Ln.

Application Number 5464 Permit Number 5464

Inspection Date:

Liquid Capacity of Tank 1500 gal Tank Material Precast Concrete

Total Length of Drain Tile 600' & 150' Number of Lines (4) 10' x 150'

Depth of Filter Material 17" Cover Depth 24'

Water Supply Source well Distance from Water Source 150'

Excavation Inspected 11 July 73 (DATE) Tank Inspected 11 July 73 (DATE)

Nitrification Field Inspected 11 July 73 (DATE)

Washing Machine Line Inspected, If Applicable 11 July 73 (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 as 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: Aeration pit 26'x7'x4' stone

11 July 1973

House now owned by Robt McMillan

J. R. Adkins

R. M. Reynolds
Environmentalist

FORM NO E-6-4-1-71

HEALTH DEPARTMENT'S COPY