Date Received 6-8-84

SIR No. 21133

T. C. No 023-158-26,27

Map Date

Call 1st

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Stroud (LAST) William (FIRST) Mack (MIDDLE)

2) ADDRESS OF OWNER 12027 Meadhaven Dr. Char (ZIP) 28210

3) PHONE NO. Home 588-4749 Office 373-4413

4) LOCATION OF PROPERTY [illegible] (STREET OR COUNTY ROAD)

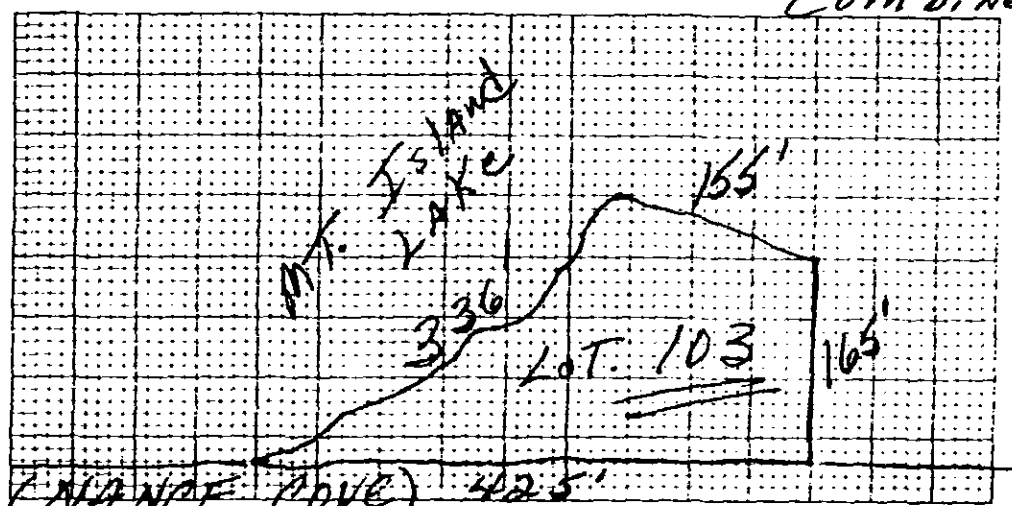
5) SUBDIVISION _____ LOT NO Lots 26 & 27 BLOCK NO. _____

MAP BOOK NO _____ PAGE NO. _____

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 on 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

LOTS 26 & 27 Combined



1) ACCURATELY DIAGRAM & DIMENSION LOT

William M. Stroud
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21133

T.C. NO. 023-151-26,29

(Ground Absorption Sewage Disposal)

OWNER: William Mack Stroud
ADDRESS: 10027 Meadhaven Dr. 28210
LOCATION OF SITE: Nance Cove Rd

PLAT NO:
LOT SIZE: 1.13A

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U — 2-6	S (PS) U — 2-6	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) U — Clayey	S (PS) U — Clayey	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) U — Blocky	S (PS) U — Blocky	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) U — 36-48	S PS (U) — 24-30	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U — None	S (PS) U — None	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S PS U — Adequate	S (PS) U — Adequate	S PS U	S PS U
7. OTHER (Specify)	S (PS) U	S PS (U)	S PS U	S PS U
8. SOIL GROUP	IV & IV			
9. SITE CLASSIFICATION	Suitable to Unsuitable			
10. SOIL SERIES	Pacolet-Madison Complex Alluvial Material			

S - Suitable PS - Provisionally Suitable U - Unsuitable

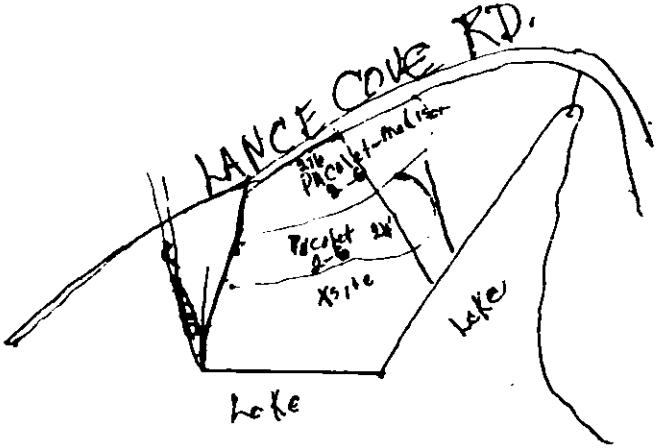
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments:

Described by: William E. Ramsey
Title: Soil Scientist

Date: 7-11-86

4


LANCE COVE RD.
Lake
Lake

Serial No. 5766

SIR No. 21133

T C No. 023-151-26,27

Date Issued 7-12-84

Map Date

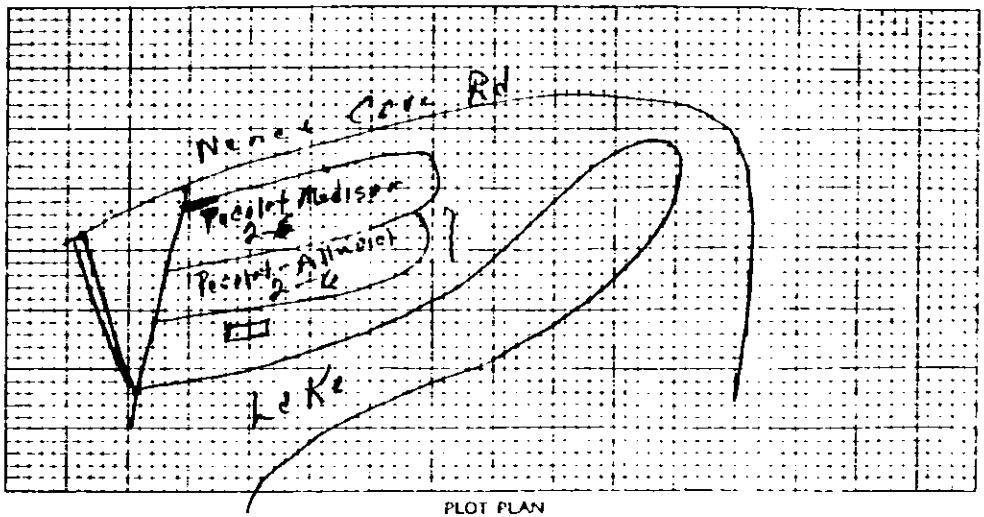
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Stroud, (LAST) William (FIRST) Mack (MIDDLE)

ADDRESS OF OWNER 12027 Meadhaven Dr., Charlotte, Nc ZIP 28210

LOCATION OF PROPERTY Nance Cove Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO



PLOT PLAN

This is to certify that a soil investigation and on-site inspection was made by the Mecklenburg County Department of Environmental Health on the lot described above. The 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 disposal subject to the following terms and conditions:

1. A permit to install the septic tank system must be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction of the wastewater treatment system on the said lot.
2. The size of the septic tank and area determined by the which must be installed will be determined by the Mecklenburg County Department of Environmental Health at the time of application for the permit. The approved design for the size and type of building is attached hereto.
3. This approval is valid only for the lot as platted. Any change in the lot lines which affects the system may void the approval.
4. The [illegible] Department of Environmental Health prior to the issuance of a permit. Approval of the system does not guarantee that a permit will be issued.

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 revised laws, rules and regulations been in effect on the issue date.

William B. Harmony
Soil Scientist

Bill D. Hardesty
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department

SEE INSTRUCTIONS ON BACK

Date Received 7-23-84

ICAR (S) Application No. 21133

T. C. No. 123-151-26, 27

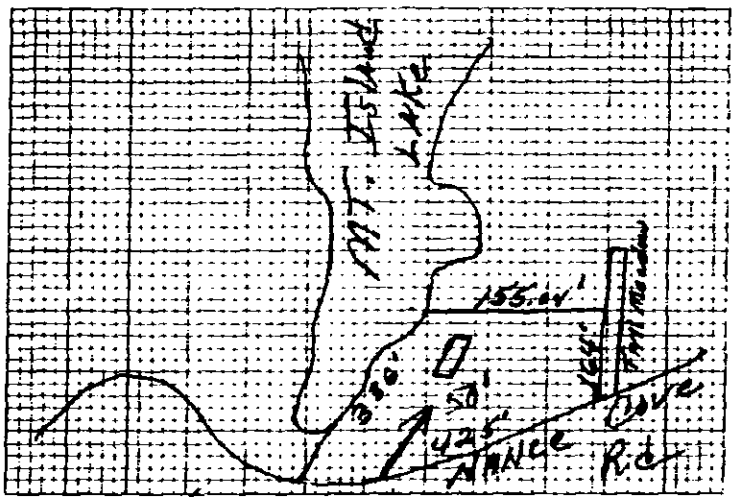
Map Date L

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)

4) Mobile Home ✓ Yes ___ No
Residence ___ Yes ✓ No
No. of Bedrooms 3
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 Stroud (LAST) William (FIRST) Mack (MIDDLE)

14) ADDRESS OF OWNER 12027 Meadhaven Dr., Charlotte, N.C. 28210

15) PHONE NO. Home 588-4749 Office 373-4413

16) LOCATION OF SYSTEM 2721 Nance Cove Rd (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 7/84 PS.

20) PTR NUMBER (See Instructions) 21133

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.

x 7/24/84
DATE OF APPLICATION

x William M. Stroud
OWNER

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 4/3/85

ICAR(S) Application No. 21153

T. C No. 023-151-26,27

Map Date ______

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

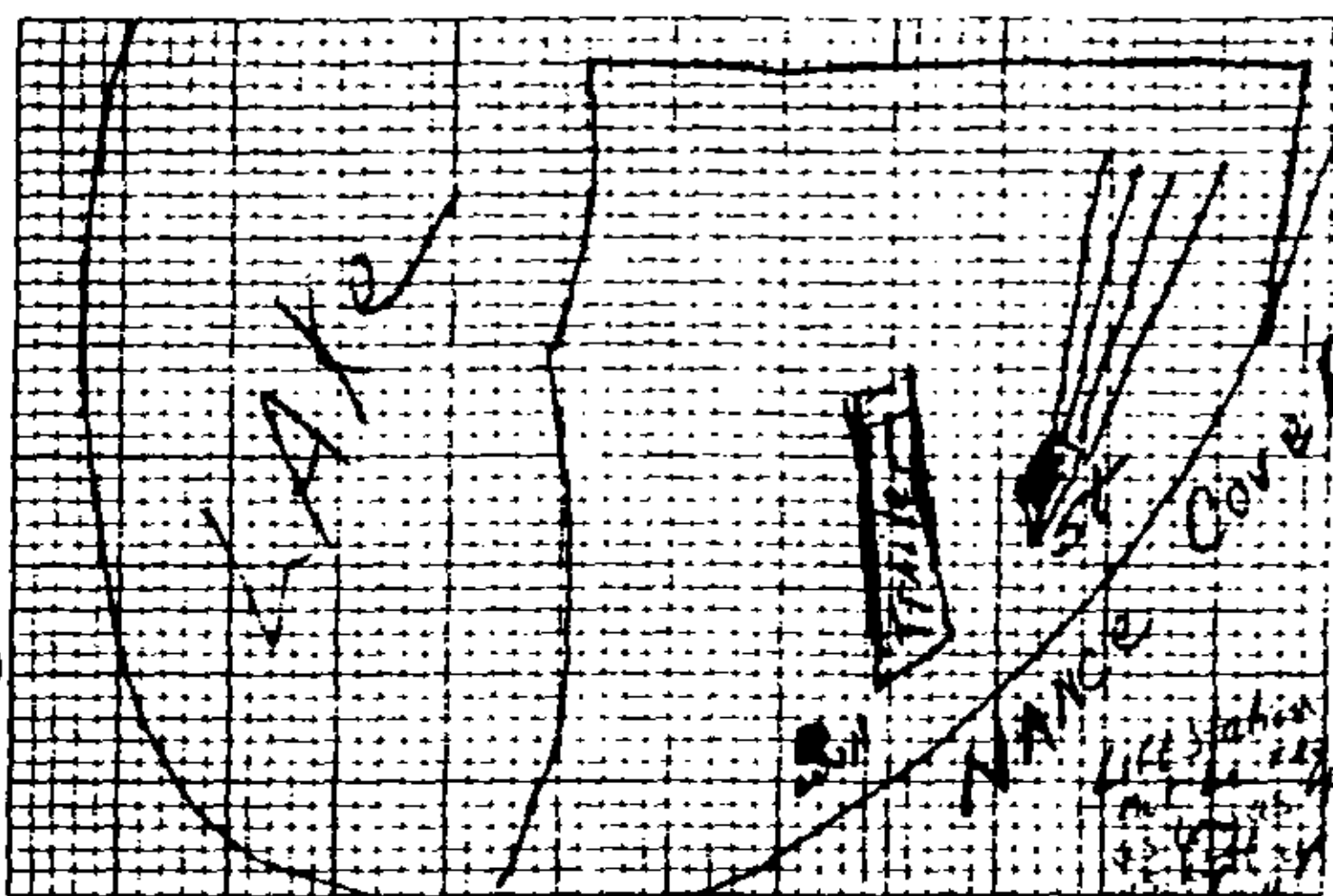
Application for an
Installation, Construction, Alteration, and/or Repair Permit
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

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

Mobile Home ✓ Yes ___ No
Residence ___ Yes ✓ No

4) No of Bedrooms 3
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 ______



3) PLOT PLAN (ACCURATELY DIMENSIONED)

CCB 4/3/85

13) NAME OF OWNER Stroud (LAST) William (FIRST) Mack (MIDDLE)

14) ADDRESS OF OWNER 12027 Meadhaven Dr., Charlotte, N.C. 28210

15) PHONE NO. Home 588-4749 Office 373-4413

16) LOCATION OF SYSTEM 2721 Nance Cove Rd. (STREET OR COUNTY ROAD)

17) SUBDIVISION ______ Lot No. 103 Block No. ______

Map Book No. ______ Page No. ______

18) DEED REFERENCE — DEED BOOK ______ AT PAGE ______

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES ___ NO DATE RUN 7/84

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.

4/3/85
DATE OF APPLICATION

William M. Stroud
OWNER

EHD-5-76

Date Issued 5-20-85

Serial No. 08155

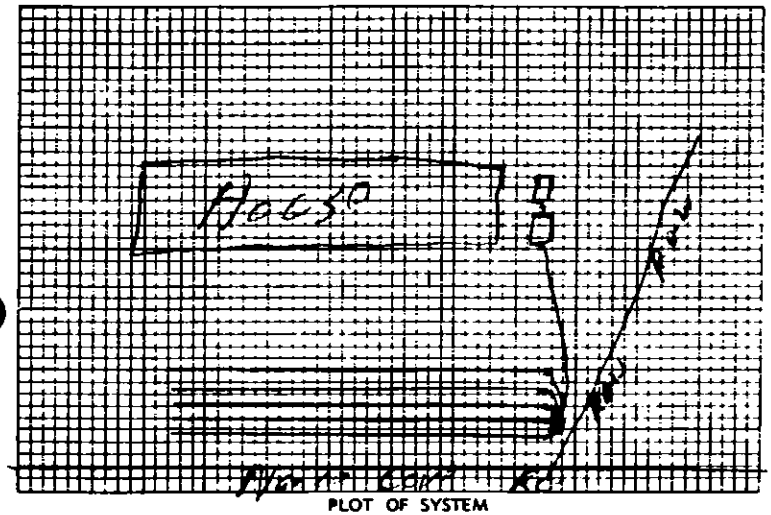
ICAR(S) Permit No. 21133

T C No 022-151-26, 27

Map Date L

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 21133, dated 7-24-85 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 6-20-86, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate IV-4

Liquid Capacity of Tank 1500 gal / 1000 gal

Tank Construction PVC

Absorption and or Nitrification Lines

Total Line Length 400'

Number of Lines Five

Distance from House 5'

Distance from Property Line 10'

Distance from Well 50'

NAME OF OWNER Stroud, William Mack

LOCATION OF PROPERTY 2721 Moore Cove Rd.

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.

Comments: Four Trenches 90'X3' 1.12" Stone; lift station required

S. Hardister
Division or Section Head

Jim Ervin
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.

EHB-5-76

Environmental Health Copy

Date Issued July 24, 1984

Serial No. 7701

SIR No. 21133

T. C. No. 023-151-26,27

Map Date L, CKT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

IMPROVEMENT PERMIT
TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Stroud (LAST) William (FIRST) Mack (MIDDLE)

ADDRESS OF OWNER 12027 Meadhaven Drive, Charlotte ZIP 28210

LOCATION OF LOT 2721 Nance Cove Road (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO _____ BLOCK NO _____

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 21133. 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 WILL BE REQUIRED ***

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

C of A (s) No. 21133

Date Issued 9-12-85 **Serial** 7841 T. C. No. 03-151-26-27

L C1C1

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
OPERATION PERMIT

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

Name of Owner STROUD (LAST) BILL (FIRST) (MIDDLE)

Location of Property 2721 NANCE COVE RD

Application Number 21133 Permit Number 21133

Inspection Data:

Liquid Capacity of Tank 1500 ST + 1000 PT Tank Material PCC

Total Length of Drain Tile 400' Number of Lines 5

Depth of Filter Material 12" Cover Depth 3-2÷1'

Water Supply Source ~~Automatic~~ well Distance from Water Source ~~Septic Tank~~ 50'+

Excavation Inspected 9-17-85 (DATE) Tank Inspected 9-17-85 (DATE)

Nitrification Field Inspected 9-17-85 (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 1485 1500ST 1000 PT 1 LN 1200 SQ FT 12 GEOTEX

Environmentalist

EHD-5-76