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Date Received 4 4 23

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APT No. 5914

T C No 227-173-04

Map Date 4-27-73

Hold for

J. Frank Gay
6718 Brookcrest Dr.
28210
C-4

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Humphries (LAST) B. (FIRST) MARVIN. (MIDDLE)

2) ADDRESS OF OWNER 1550 COUNTRY CLUB DR LANCASTER P.A. ZIP 17601

3) PHONE NO. Home _____ Office _____

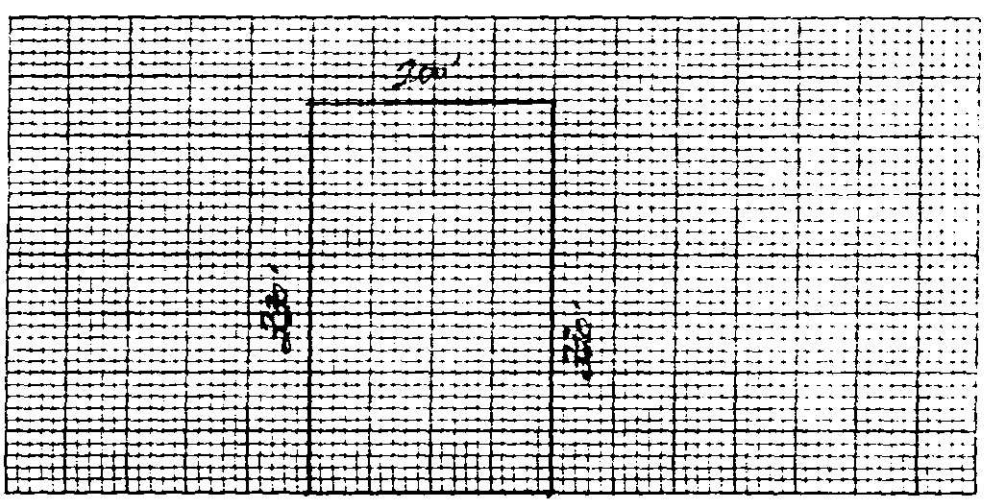
4) LOCATION OF PROPERTY Lot #17 FAIRFOREST DR (STREET OR COUNTY ROAD) MATHEWS Country Acres

5) SUBDIVISION Country Acres LOT NO 17 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

200

X _____
OWNER

FORM NO. E-1-11-1-78

HEALTH DEPARTMENT'S COPY

Serial No. [illegible]

PTR No. 5914

Date Issued June 7, 1973

T C No 227-173-04

Map Date 4-27-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

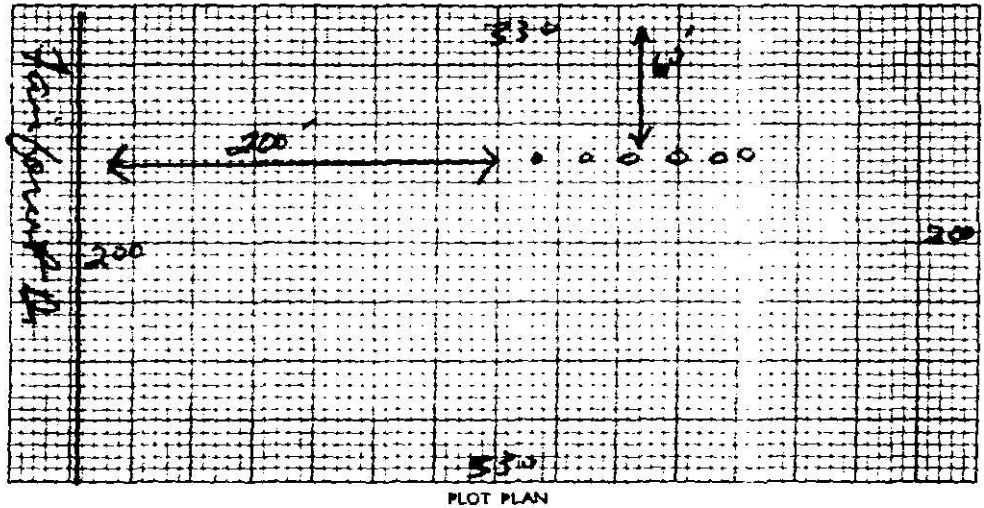
PERCOLATION TEST REPORT

NAME OF OWNER Humphries (LAST) B. (FIRST) Marvin (MIDDLE)

ADDRESS OF OWNER 1550 Country Club Dr., Lancaster, PA. ZIP 17601

LOCATION OF PROPERTY Fair Forrest Drive, Matthews, N.C. (STREET OR COUNTY ROAD)

SUBDIVISION Country Acres LOT NO 17 BLOCK NO.



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 A Adkinson

Director, Environmental Health Division or Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

J

SEE INSTRUCTIONS ON BACK

Date Received 9 14 73

MECK COUNTY HEALTH DEPT.
RECEIVED
SEP 14 1973
ENVIRONMENTAL HEALTH DIVISION

ICAR (S) Application No 5914

T C No 227-173-04

Map Date 12 73

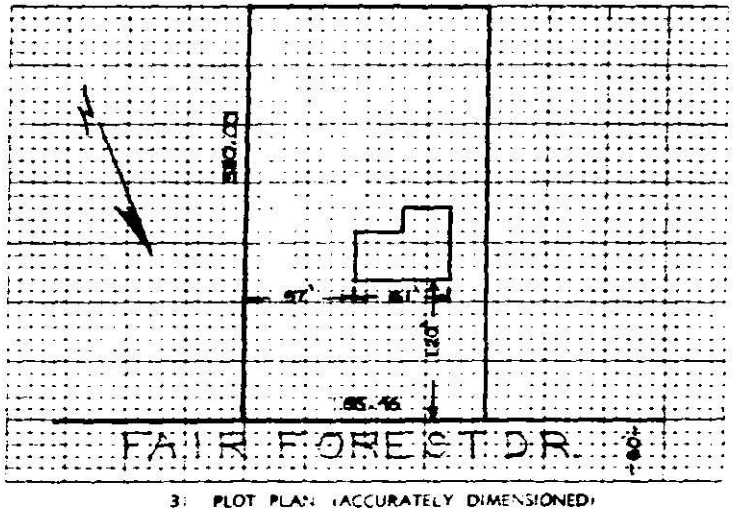
MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

Application

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 3

5) Estimated Maximum No. of Employees

6) Washing Machine X Yes No

7) Garbage Disposal X Yes No

8) Dishwasher X Yes No

9) Water supply
A. Public or Community X
B. Community well
C. Individual well
Well
D. Spring
E. Cistern
F. Other (Specify)

10) Is property subject to flooding? Yes X No

11) Is property accessible to sewer? Yes X No

12) EHA Case No. ___ ___ ___

13) NAME OF OWNER Franklin (LAST) John (FIRST) Franklin Jr. (MIDDLE)

14) ADDRESS OF OWNER 5811 Brookcrest Drive, Charlotte, North Carolina

15) PHONE NO Home 366-2871 Office 375-3345

16) LOCATION OF SYSTEM Fair Forest Drive, Matthews, North Carolina (STREET OR COUNTY ROAD)

17) SUBDIVISION Country Acres Lot No 11 Block No. ___

Map Book No unrecorded Page No. ___

18) DEED REFERENCE — DEED BOOK 3027 AT PAGE 174

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ___ NO DATE RUN 6-6-73 BR760

20) PTR NUMBER (See Instructions) 5914

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.

September 12, 1973
DATE OF APPLICATION

John Franklin Jr.
OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3432

LA No. 5914
P.O.
T. C No. 227-173-04

Date Issued September 17, 1973

Map Date 4-27-73

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 Gay (LAST) John (FIRST) Franklin, Jr. (MIDDLE)

ADDRESS OF OWNER 6718 Brookcrest Drive ZIP

LOCATION OF LOT Fair Oak Forest Drive, Matthews, N.C. (STREET OR COUNTY ROAD)

SUBDIVISION Country Acres LOT NO 17 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 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 5914. 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
Environmentalist

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

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

HEALTH DEPARTMENT'S COPY

Serial No. 4669

Date Issued 11-26-73

ICAR(S) Permit No. 5914

T C. No. 220-173-04

Map Date 4-27-73 5-9-74

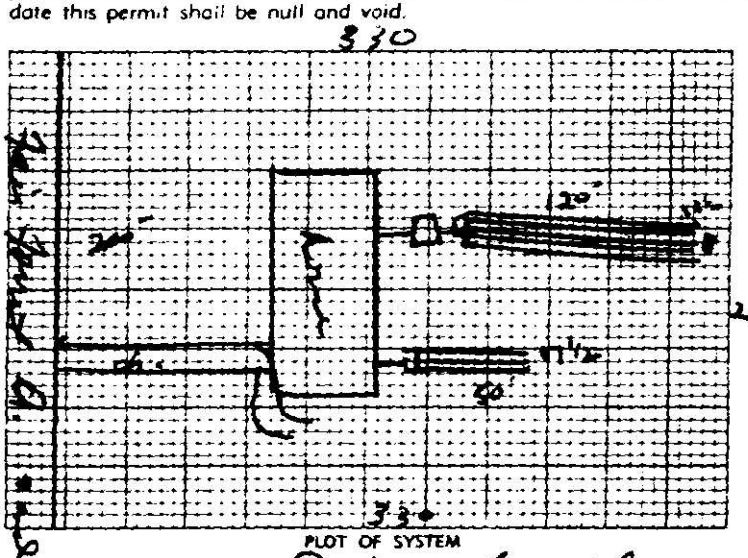
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTRUCTION, ALTERATION, AND OR REPAIR PERMIT

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

Permission 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 5914, dated 9-14-73 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 12-26-73 after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 6

Liquid Capacity of Tank 1500 gal

Tank Construction precast

Absorption and/or Nitrification Lines

Total Line Lenght 600' 200'

Number of Lines 5

Distance from House 15'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER John Franklin Gary Jr.

LOCATION OF PROPERTY Lot 17 Fair Forest Drive.

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: 12½" x 120' - aeration pipe
washer 7½" x 50'
Howard Allen, Contractor

Thomas R. Ward
Environmentalist

Division or Section Head

* 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

Serial 4253

C of A (s) No. 5914

Date Issued 11-30-73

T. C. No. 100 227-13-4

Map Date 4-27-73

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 Gary, Jr. (LAST) John (FIRST) Franklin (MIDDLE)

Location of Property Lot 13 Fair Forest Dr.

Application Number 5514 Permit Number 5514

Inspection Data:

Liquid Capacity of Tank 1500 gal. Tank Material Concrete

Total Length of Drain Tile 600' Number of Lines 5

Depth of Filter Material 12" Cover Depth 6"

Water Supply Source Well Distance from Water Source 100'

Excavation Inspected 11-30-73 (DATE) Tank Inspected 11-30-73 (DATE)

Nitrification Field Inspected 11-30-73 (DATE)

Washing Machine Line Inspected, If Applicable 11-30-73 (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(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 by Howard Allen

Thomas R. Ward
Environmentalist

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

HEALTH DEPARTMENT'S COPY