Date Received 6-1-73 APT No. 6402

T. C. No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Lane (LAST) D. (FIRST) R. (MIDDLE)

2) ADDRESS OF OWNER 2121 Linalda Court, Charlotte, N. C. ZIP 28214

3) PHONE NO. Home 399-6142 Office 889-7600

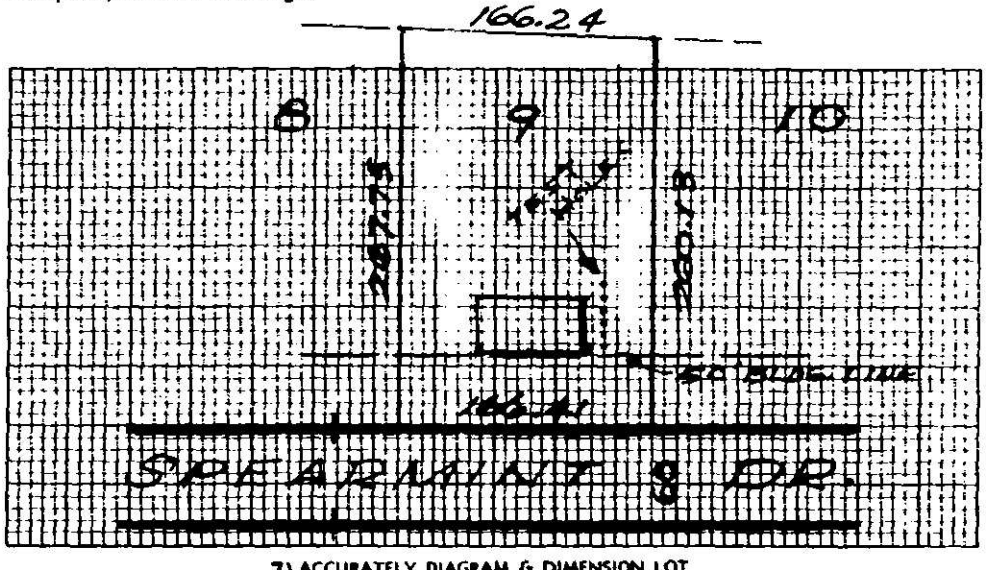
4) LOCATION OF PROPERTY Spearmint Drive (STREET OR COUNTY ROAD)

5) SUBDIVISION Mintwood Estates LOT NO. 9 BLOCK NO. --

MAP BOOK NO. 15 PAGE NO. 593

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 D. R. Lane

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

HEALTH DEPARTMENT'S COPY

Serial No. 3509

PTR No. 6402

Date Issued August 22, 1973

T C No. 195-041-53

Map Date 2-14-73

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

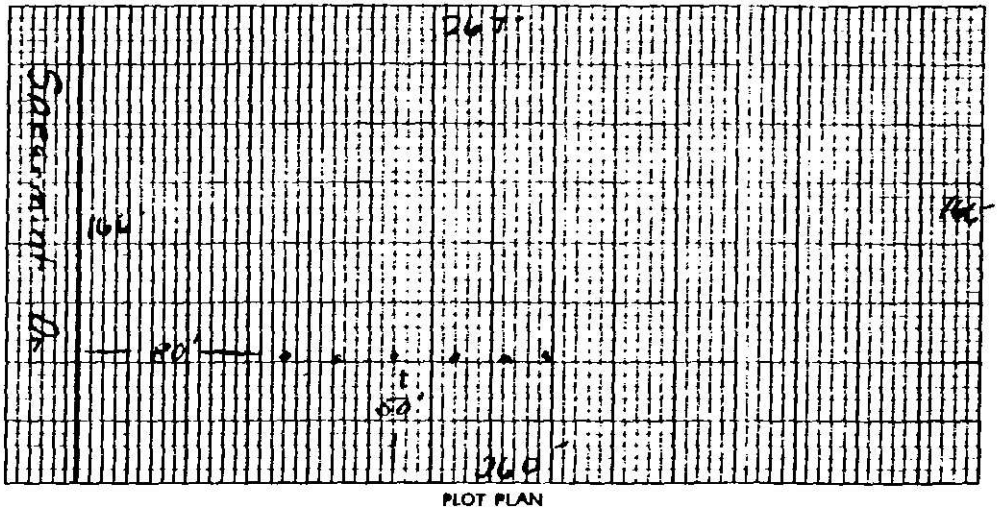
PERCOLATION TEST REPORT

NAME OF OWNER Lane (LAST) D. (FIRST) R. (MIDDLE)

ADDRESS OF OWNER 2121 Linalda Court ZIP 28214

LOCATION OF PROPERTY Spearmint Drive (STREET OR COUNTY ROAD)

SUBDIVISION Mintwood Estates LOT NO 9 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 55 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 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 R. Hickman

Director, Environmental Health Division or Authorized Section Head

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

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 8/21/78

ICAR (S) Application No 6402

T C No 195-04153

Map Date 2-1473

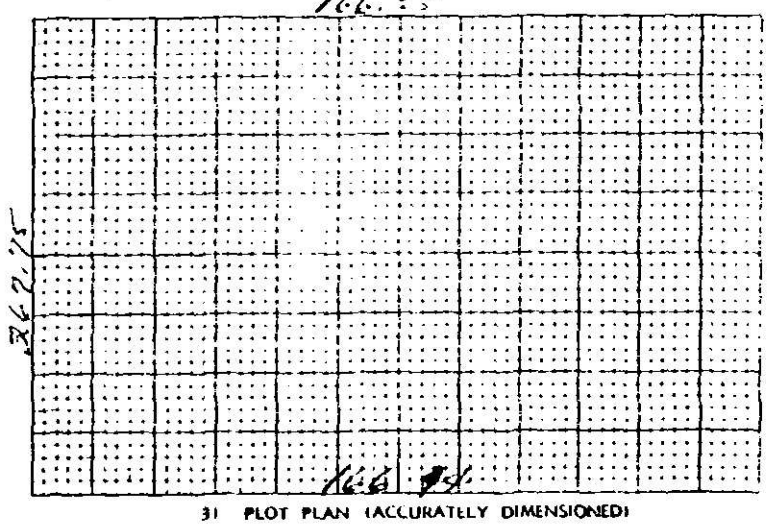
MECKLENBURG COUNTY HEALTH DEPARTMENT

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



3) PLOT PLAN (ACCURATELY DIMENSIONED)

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

13) NAME OF OWNER McLendon (LAST) Eugene (FIRST) L (MIDDLE)

14) ADDRESS OF OWNER 2735 Shadow Rd

15) PHONE NO Home 366-2571 Office

16) LOCATION OF SYSTEM Spectrum Drive (STREET OR COUNTY ROAD)

17) SUBDIVISION Maywood Estates Lot No. 9 Block No.

Map Book No. 45 Page No. 595

18) DEED REFERENCE — DEED BOOK AT PAGE

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES NO DATE RUN 8-14-23 1R=55

20) PTR NUMBER (See Instructions) 6402

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.

8-21-78
DATE OF APPLICATION

Eugene L McLendon
OWNER

FORM NO E-4-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 2150

LA No. 6402

Date Issued August 21, 1978

T. C. No. 195-041-53

Map Date 2-14-73

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

IMPROVEMENT PERMIT

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

NAME OF OWNER McLendon (LAST) Eugene (FIRST) B. (MIDDLE)

ADDRESS OF OWNER 2735 Sharon Road, Charlotte, NC ZIP _____

LOCATION OF LOT Spearmint Dirve (STREET OR COUNTY ROAD)

SUBDIVISION Mintwood LOT NO 9 BLOCK NO. _____

MAP BOOK NO. 15 PAGE NO. 593

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 6402. 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, 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

Stephen J. Wood
Environmentalist

John R. Robinson
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy