SEE INSTRUCTIONS ON BACK

Date Received 12-3-73

MECK COUNTY HEALTH DEPT (S) RECEIVED DEC 3 1973 ENVIRONMENTAL HEALTH DIVISION

Application No 7285

T C No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

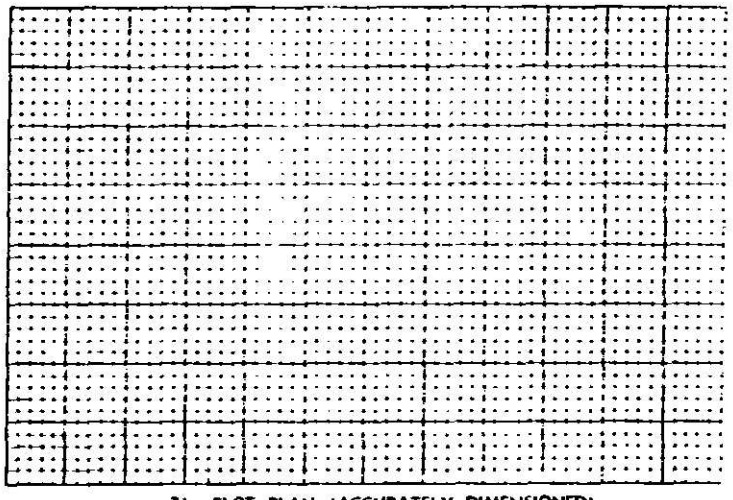
Application for an

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:

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 Bedroom 2

5 Business Use — Max No Employees ___ X

6 Washing Machine ✓ Yes ___ No

7 Garbage Disposal ___ Yes ✓ No

8 Dishwasher ___ Yes ✓ No

9 Water Supply

A Individual ___

B Government ___

C Community System

1 Well ✓

2 Government ___

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 ___

31) PLOT PLAN (ACCURATELY DIMENSIONED)

13) NAME OF OWNER Hucks (LAST) Clifford (FIRST) E. (MIDDLE)

14) ADDRESS OF OWNER Route 13 Box 247 Charlotte, N.C. 28213

15) PHONE NO. Home 596-3856 Office None

16) LOCATION OF SYSTEM Victoria Ave. (STREET OR COUNTY ROAD)

17) SUBDIVISION Victoria Park Lot No. 66 & 69 Block No. A

Map Book No. 6 Page No. 839

18) DEED REFERENCE — DEED BOOK Deed Ref 2136 AT PAGE 231

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ___ NO DATE RUN 1960

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.

11-29-73
DATE OF APPLICATION

Mr. Clifford E. Hucks
OWNER

FORM NO E-4-8-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 6 Mar 74 Serial No. 4972 ICAR(S) Permit No. 7285

T C No 037-251-03

Map Date 5 Sept 73

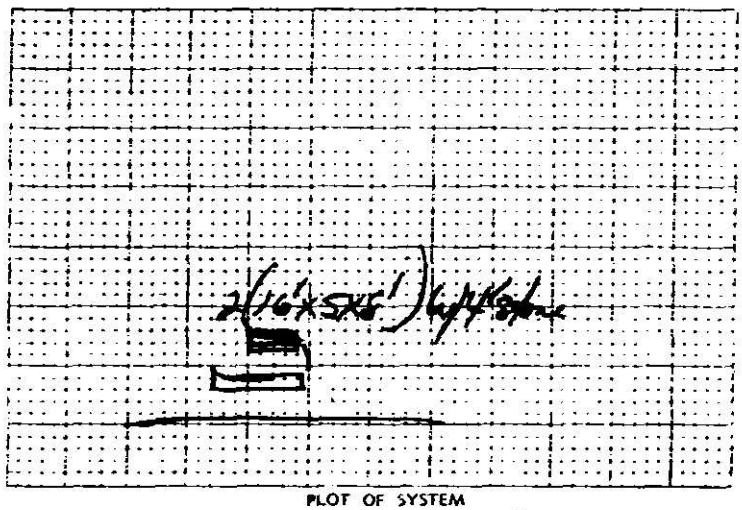
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 waste water 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 7285, dated 12-3-73, 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 6 April 74, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate _____

Liquid Capacity of Tank _____

Tank Construction _____

Absorption and/or Nitrification Lines

Total Line Length 100'

Number of Lines 2(16'x5'x8') Nitrification

Distance from House 10'+

Distance from Property Line 10'+

Distance from Well 100'+ Community

NAME OF OWNER Hucks, Clifford E.

LOCATION OF PROPERTY Rt #13 Box 297 Charlotte, N.C. (Victoria 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: W.R Floyd

Division or Section Head _____ 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 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.

E-S-8-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 28 March 74 Serial 4536

C of A (s) No. 7285

T. C. No. 037-251-03

Map Date 5 Sept 73

Repair

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner HUCKS (LAST), CLIFFORD (FIRST), E. (MIDDLE)

Location of Property VICTORIA LANE

Application Number 7285 Permit Number 7285

Inspection Data:

Liquid Capacity of Tank REPAIR Tank Material /

Total Length of Drain Tile 100' Number of Lines 2 (5'x16'x4')

Depth of Filter Material 4' Cover Depth 15"

Water Supply Source Community Distance from Water Source Community (100')

Excavation Inspected 28 March 74 (DATE) Tank Inspected / (DATE)

Nitrification Field Inspected 28 March 74 (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 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: FLOYD 4' STONE

Jerry Burleson
Environmentalist

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

HEALTH DEPARTMENT'S COPY