

8311 TODD RD

1/29/08

thomatc

Groundwater and Wastewater Services File Imaging Project
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FEB 01 1984
ENVIRONMENTAL HEALTH

Date Received 1 Feb 84

ICAR(S) Application No. 20580

T. C. No. 055-3814

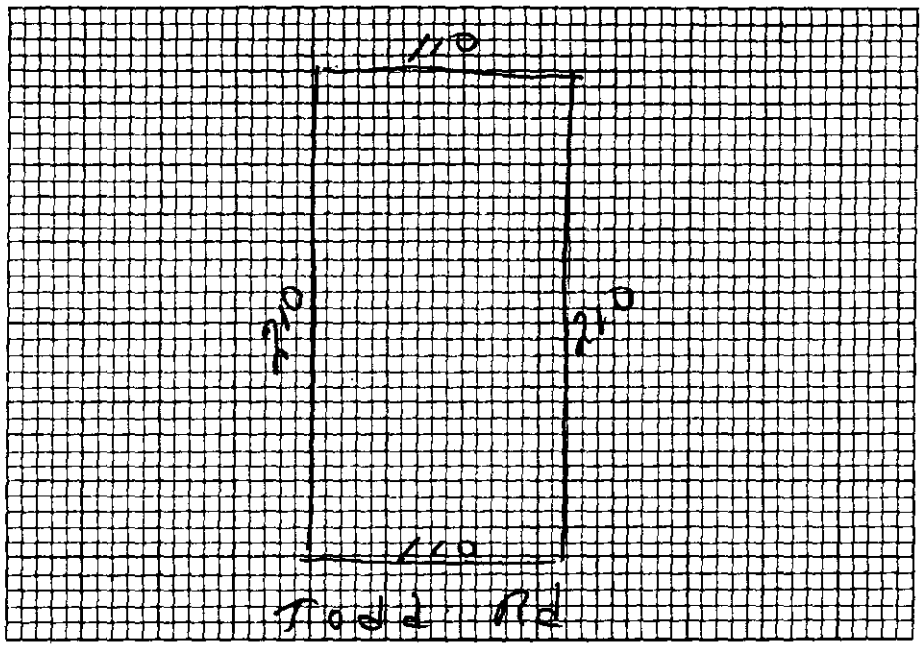
Map Date 3-7-83

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)

Mobile Home ___ Yes X No
Residence ✓ Yes ___ No

4) No. of Bedrooms 4 POSSIBLE
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 EDSELL (LAST), ROBERT (FIRST) CLARK (MIDDLE)
14) ADDRESS OF OWNER 8409 TODD ROAD, CHARLOTTE NC 28214
15) PHONE NO. Home 392-0221 Office (LYDIA) 333-6631
16) LOCATION OF SYSTEM 8409 TODD ROAD (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 _____
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.

FEB 1 - 1984
DATE OF APPLICATION

Robert C Edsell
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued 3/21/84

Serial No. 6852

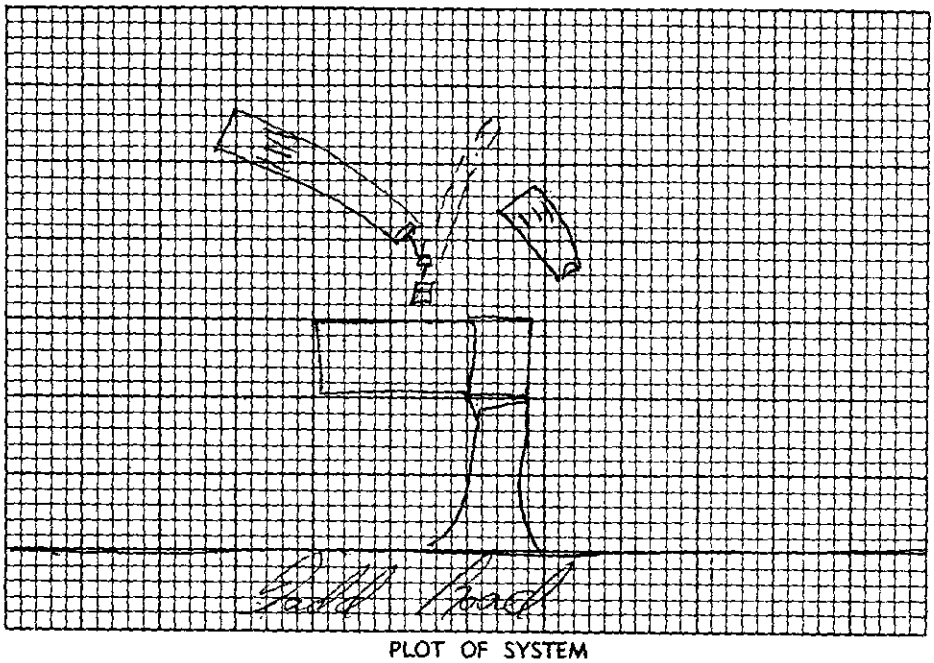
ICAR (S) Permit No. 20580

T. C. No. 055-381-14

Map Date _____

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 20581, dated 1/24/84 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 3 Mar 84, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate —

Liquid Capacity of Tank —

Tank Construction —

Absorption and/or Nitrification Lines:

Total Line Length 200' & 125' WM

Number of Lines 4 & 3

Distance from House > 10'

Distance from Property Line > 10'

Distance from Well > 50'

NAME OF OWNER Edsall, Robert C

LOCATION OF PROPERTY 8409 Todd Road

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.

5T 1 Bed 12'X50'X17"

Comments: 1 bed 9'X42'X17"

_____ Division or Section Head

M. A. Kelly 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.

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

C of A (s) No. 20580

Date Issued 4-27-84 **Serial** 6562 T. C. No. 055-381-14 L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF COMPLETION

CERTIFICATE OF APPROVAL

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

Name of Owner Edsell (LAST) Robert (FIRST) (MIDDLE)

Location of Property 8409 Todd Rd

Application Number 20581 Permit Number 20581

Inspection Data:

Liquid Capacity of Tank repair Tank Material —

Total Length of Drain Tile 200' + 125' Number of Lines 4 + 3

Depth of Filter Material 17" Cover Depth 18"

Water Supply Source well Distance from Water Source 50'

Excavation Inspected 4-27-84 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 4-27-84 (DATE)

Washing Machine Line Inspected, If Applicable 4-27-84 (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: 1 bed septic drain repair
1 bed wash machine repair

D. R. Ferguson
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY