SEE INSTRUCTIONS ON BACK

Date Received 8-2-73

ICAR(S) Application No

T C No 041-192-21

Map Date 9-1-70

MECKLENBURG COUNTY HEALTH DEPARTMENT

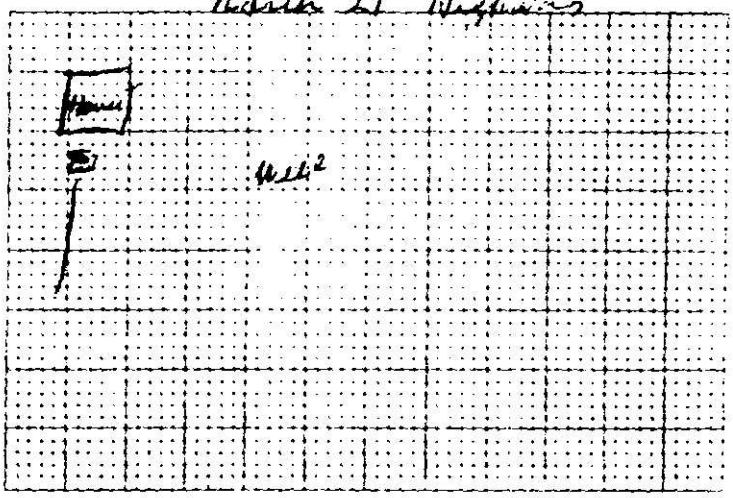
ENVIRONMENTAL HEALTH DIVISION

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

March 21 Highway



3) PLOT PLAN (ACCURATELY DIMENSIONED)

4) No. of Bedroom 3

5) Income / 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 Owner
2 Government

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 Waldrop (LAST) Lee (FIRST) O (MIDDLE)

14) ADDRESS OF OWNER Routh 13 Box 53

15) PHONE NO Home 576 4699 Office

16) LOCATION OF SYSTEM 1½ Miles North on W.S. 21
STREET OR COUNTY ROAD

17) SUBDIVISION Reparer Lot No Block No

Map Book No Page No

18) DEED REFERENCE — DEED BOOK AT PAGE

19) HAS A PERCOLATION TEST 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 statements 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

8-23-73
DATE OF APPLICATION

L O Waldrop
OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 4212

Date Issued 31 Aug 73

ICAR(S) Permit No. 6902

T. C. No. 041-192-21

Map Date 1 Aug 72

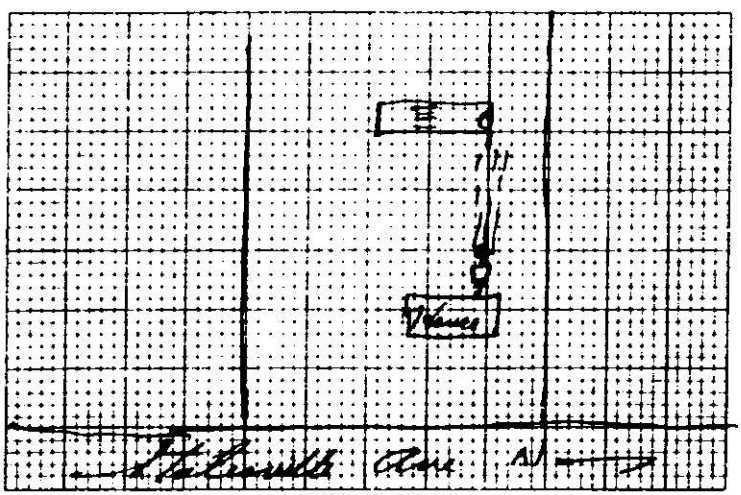
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 6902 dated 27 Aug 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 30 Sep 73, 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 Lenght 200'

Number of Lines 4 (10'X50'X12")

Distance from House 100'

Distance from Property Line 50'

Distance from Well 50'

NAME OF OWNER Walker, Lee O.

LOCATION OF PROPERTY Statesville Ave

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: Mark Septic (Cont.)

Division or Section Head

M. L. Kirby
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.

FORM NO. E 5-4 1-71

HEALTH DEPARTMENT'S COPY

Date Issued 12 Sep 73

Serial 3382

C of A (s) No. 6902

T. C. No. 041-192-21

Map Date 1 Sep 70

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Waldrop (LAST) Lee (FIRST) O. (MIDDLE)

Location of Property Statesville Ave

Application Number 6902 Permit Number 6902

Inspection Data:

Liquid Capacity of Tank _____ Tank Material 24 gal

Total Length of Drain Tile 200' Number of Lines 4 (10'x50'xD)

Depth of Filter Material 12" Cover Depth 18"

Water Supply Source Well Distance from Water Source 60'

Excavation Inspected 12 Sep 73 (DATE) Tank Inspected _____ (DATE)

Nitrification Field Inspected 12 Sep 73 (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: Tank - Septic (Conc.)

Environmentalist

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

HEALTH DEPARTMENT'S COPY