

10221 COUNTRY LN

03118257

1/4/2008

duponbj

Groundwater and Wastewater Services File Imaging Project
May 2007
Barcode Font = IDAutomationHC39M

CERTIFICATE OF COMPLETION/OPERATION PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 45008 DATE: 12/8/00

TC: 031-182-57 ☒ L ☐ CRT

SERIAL Nº 18485

Name of Owner Leslie Mace Juris.: _____

Address of Property 10221 Country Lane

Inspection Data:

Tank Material existing

Total Length of Drainfield 100'

Number of Lines 2 @ 50'

Cover Depth 6"

Water Supply Source Municipal

Distance to Water Source NA

Excavation Inspected 12/8/00

Tank(s) Inspected NA

Wash Line Inspected NA

High Water Alarm Inspected NA

see installation approval

PLOT

Design 2000, Repair, 300 SFT, CAV, 12" Stone CTR# Homeowner

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☐ installed or constructed ☒ altered or repaired

☒ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 15A NCAC 18A. 1900, "Laws And Rules For Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. This issuance of this

☐ Certificate of Completion ☒ Operation Permit

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 document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 15A NCAC 18A. 1990 in addition to those listed below under "COMMENTS." This document 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.

Notice: Disturbance of the designated repair area may result in the suspension/revocation of this permit.

COMMENTS: 5 Bedroom House
Drainfield added for french drain discharge
Type II Conventional System
Built 1977

Jenny P. Mickelson
Environmental Health Specialist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

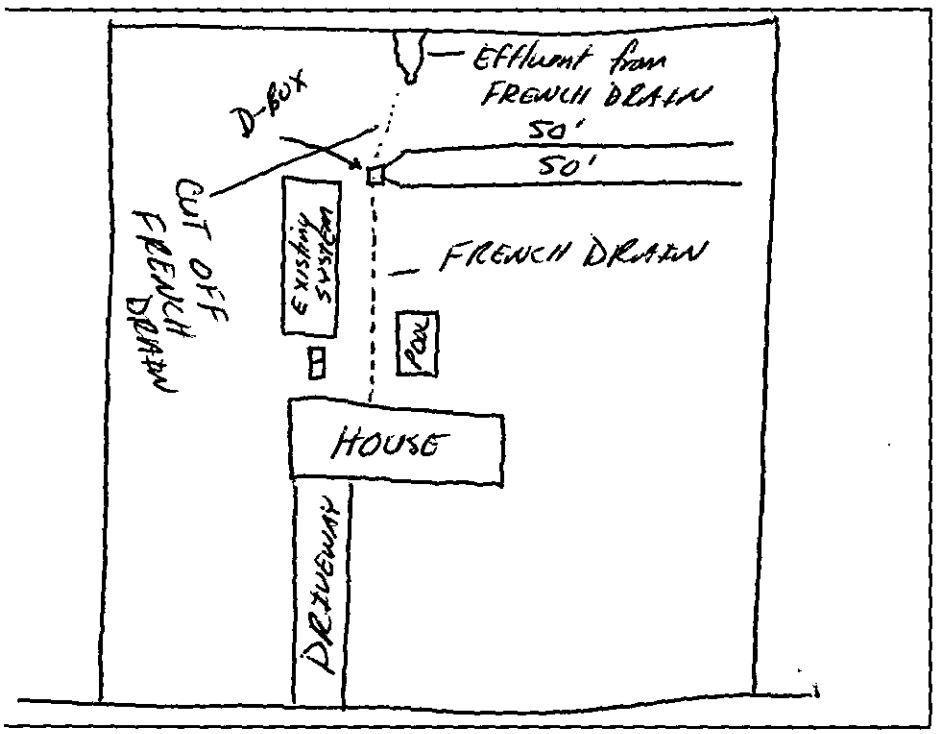
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 4500B DATE: 10/11/00

TC: 031-182-57 ☒ L

SERIAL Nº 18623

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 the application dated 10/11/00. All work shall be completed on or before 11/11/00, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A. 1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Health Department before any system can be covered up or placed into service. 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.



PLOT OF SYSTEM

Country Lane

Liquid Capacity of Septic Tank existing gallons

Liquid Capacity of Dosing Tank NA gallons

Tank Construction PCC

Trench Depth 24"

Absorption and/or Nitrification Lines:

Trench Width 3' feet

Trench Walls Scored and Porous yes

Total Line Length 100' feet

Number of Lines 2 x 50' x 3'

Depth of Stone 12" inches

Distance from House >5' feet

Distance from Property Line >10' feet

Distance from Well NA feet

NOTICE: This system shall not be installed while soils are in a wet condition.

NAME OF OWNER Leslie MACE

LOCATION OF PROPERTY 10221 Country Lane

Comments: 5 Bedroom Residence

Repair to System / Complaint

Traces of effluent found in french drain discharge

Install 2 lines x 50' x 3' x 12" stone

Tommy P. Nichols
Environmental Health Specialist

SERVICE REQUEST/WORK ORDER

Log No.:_____ Section: LWWS Hazard? ( ) yes ( ) no

Date: 9/12/00 Parcel: 031-1857

REQUESTING PERSON: Anonymous Phone_____

Address_____ City_____ Zip_____

PROPERTY CONCERNED: Facility Name Morton + Leslie Mace

Address 10221 Country Lane City_____ Zip 28214

977 SERVICE REQUESTED: stagnant water coming out of pipe running into property @ 2155 Mt Holly Huntersville Rd

ASSIGNED TO: Jeremy TAKEN BY: JC

DATE	ACTIVITY REPORT
9/13/00	O.S.V. A french drain was put in back yard. Water could possibly be coming from the septic system and ponding in the back yard
9/25/00	O.S.V. Spoke w/ ~~Daniel~~ business partner left my card for homeowner to call me A.S.A.P.
9/25/00	Phone Conversation with Leslie Mace
	Cell Phone 968-6505 Leslie Mace
10/4/00	Surface Sample was taken from french drain
10/10/00	Got Surface Sample Results Back → BAD
	→ Called Leslie Mace → answering machine / left Message about what needs to be done + call me back
10/10/00	Talked with Dell Mace - Meeting tomorrow at site for Repair.
10/11/00	+ Called Tom Wyke about the results and update

NOTIFICATION OF FINAL DISPOSITION TO REQUESTING PERSON:

Jeremy F. Medlin 12/8/00 WRITTEN___ VERBAL___

Environmentalist's Signature Date

REVIEWED BY:_____ RECALL DATE:_____

Section Head's Signature Date

SERVICE REQUEST/WORK ORDER

Log No.:_____ Section:_____ Hazard? ( ) yes ( ) no

Date: 10-3-00 Parcel: 031-182-57

REQUESTING PERSON: Tom Wyke Phone 392-0923

Address 2155 Mt. Holly-Huntersville Road City_____ Zip_____

PROPERTY CONCERNED: Facility Name The Maces

Address 10221 Country Lane City_____ Zip_____

SERVICE REQUESTED: Neighbors Septic is draining on to his property. It has a bad smell.

ASSIGNED TO: Jeremy Nicholson TAKEN BY: Kathy

DATE	ACTIVITY REPORT
10/04/00	Surface sample taken from french drain to determine surface or waste water.
10/20/00	Meeting Marty Mace on-site to explain exactly what needs to be done (ATP).
12/8/00	Repairs completed as detailed in the repair approval and finaled out.

NOTIFICATION OF FINAL DISPOSITION TO REQUESTING PERSON:

Jeremy P. Nicholson 12/8/00 WRITTEN ___ VERBAL ___

Environmentalist's Signature Date

REVIEWED BY: _____ / _____ RECALL DATE: _____

Section Head's Signature Date