SEE INSTRUCTIONS ON BACK

Date Received 7/18/78

ICAR(S) Application No 1433

T C No 11.182.11

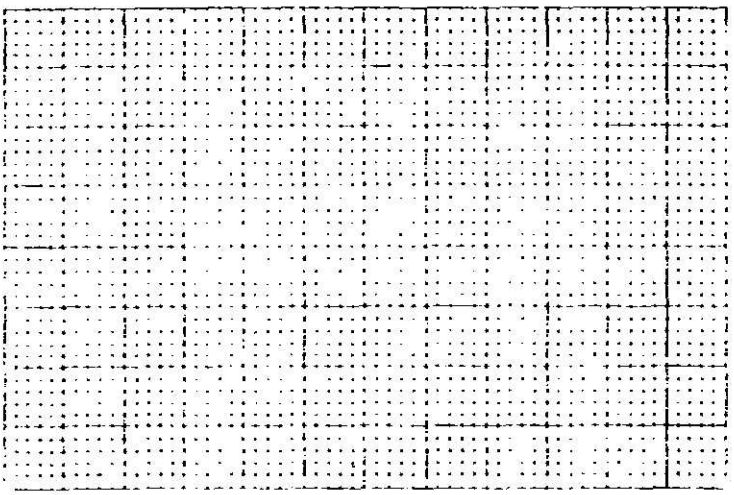
Map Date 4-20-78

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 ___ No
Residence ✓ Yes ___ No
4) No of Bedrooms 5
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 Mabel (LAST) Sylvia (FIRST) Minnick (MIDDLE)

14) ADDRESS OF OWNER 5100 Carmel Club Drive

15) PHONE NO Home 542-2420 Office ___

16) LOCATION OF SYSTEM 5100 Carmel Club Drive (STREET OR COUNTY ROAD)

17) SUBDIVISION Tuckaway Lot No 1 Block No. 4

Map Book No 25 46 Page No. 511 504

18) DEED REFERENCE — DEED BOOK 3 [illegible] AT PAGE 501

19) HAS A SOIL INVESTIGATION BEEN RUN? YES ✓ NO DATE RUN

20) PTF NUMBER (See Instructions)

The undersigned owner hereby agree 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.

July 18, 1978
DATE OF APPLICATION

Mrs. Sylvia M. Mabel
OWNER

EHD-5 76

[illegible] Department's Copy

Date Issued 19 July 78

Serial No. 1782

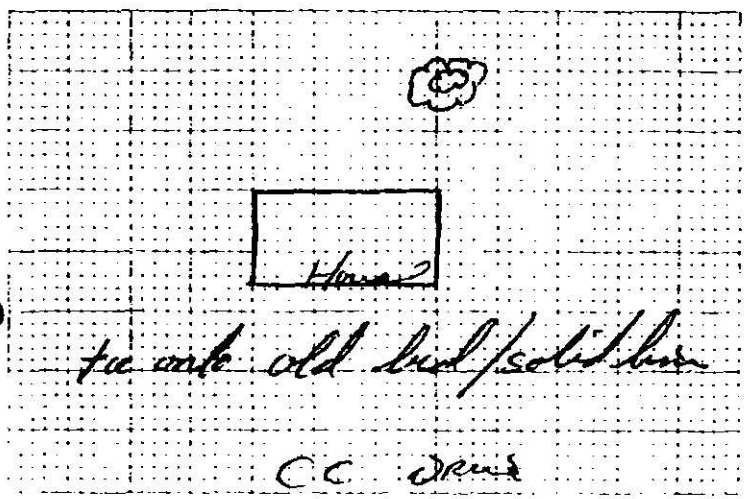
ICAR(S) Permit No 14303

T C No 211-182-11

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 14303, dated 7/18/78 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 29 Aug. after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate

Liquid Capacity of Tank: Repair

Tank Construction

Absorption Lines or Nitrification Lines

Total Line Length: 100'

Number of Lines: 3

Distance from House: 10'

Distance from Property: 10'

Distance from Well: city water

NAME OF OWNER: Sylvia M. Mabel

LOCATION OF PROPERTY: 5100 Carmel Club Dr.

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.**

Division or Section Head

Environmentalist: Stephen J Wood

* 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

Date Issued 26 July 78 Serial No. 1726 C of A (s) No 14303

T C No 211-182-11

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION
CERTIFICATE OF COMPLETION
CERTIFICATE OF APPROVAL

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

Name of Owner MABEL (LAST) Sylvia (FIRST) M (MIDDLE)

Location of Property 5100 CARMEL CLUB DR.

Application Number 14303 Permit Number 14303

Inspection Data:

Liquid Capacity of Tank Repair Tank Material ———

Total Length of Drain Tile 100' Number of Lines 3

Depth of Filter Material 12" Cover Depth 18"

Water Supply Source city Distance from Water Source ———

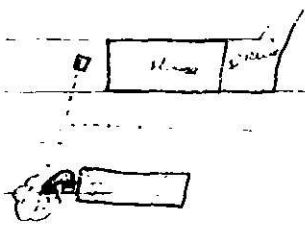
Excavation Inspected 26 July 78 (DATE) Tank Inspected 26 July (DATE)

Nitrification Field Inspected 26 July (DATE)

Washing Machine Line Inspected, If Applicable 26 July (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 repaired in accordance with the permit issued and the regulations of the Mecklenburg County Health Commission in effect at 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 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 Oak Street —



Stephen J. Underwood
Environmentalist

END-5-76

Environmental Health Department's Copy