SEE INSTRUCTIONS ON BACK

Date Received 4-5-84

ICAR(S) Application No. 20867

T C. No. 132-112-21

Map Date _____

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 propert, 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 3
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 JOHNSON (LAST) JOHNNIE (FIRST) BERNARD (MIDDLE)

14) ADDRESS OF OWNER 9632 MARKUS DRIVE 28212

15) PHONE NO Home 545 5256 Office SAME

16) LOCATION OF SYSTEM 9632 MARKUS DRIVE (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. 1 Block No. 1

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.

2-30-84
DATE OF APPLICATION

Johnnie Bernard Johnson
OWNER

EHD-5-76

Environmental Health Department's Copy

Date Issued 4-18-84

Serial No. 07129

ICAR (S) Permit No. 20867

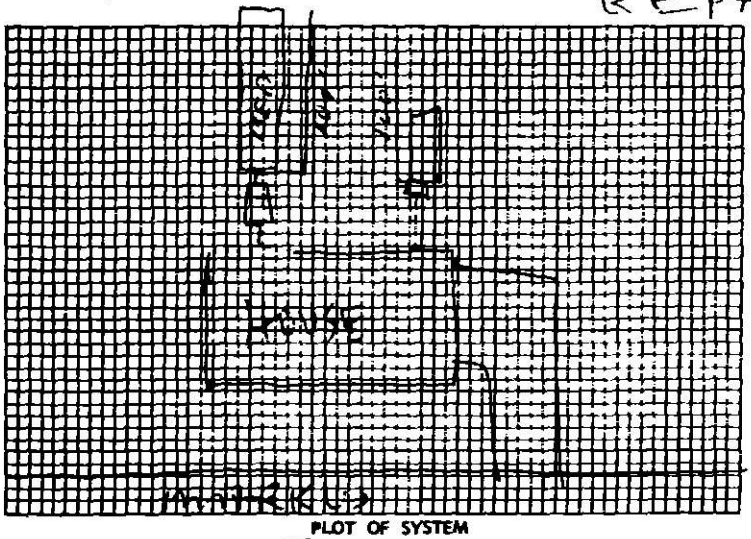
T. C. No. 137-012-21

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 20867, dated 4-5-84 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 5-18-84 after which date this permit shall be null and void.

REPAIR



PLOT OF SYSTEM

Permeability Rate RS

Liquid Capacity of Tank _____

Tank Construction _____

Absorption and/or Nitrification Lines 100' washing mach.

Total Line Length 100' septic tank

Number of Lines 2 x 100

Distance from House 5+

Distance from Property Line 10+

Distance from Well 50+

NAME OF OWNER JOHNSON, JOHNNIE BERNARD

LOCATION OF PROPERTY 9632 MARKUS 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.

2 lines x 100' | 1 washing machine x 1 septic tank

Comments: _____

Division or Section Head

Environmentalist Kelly Randall

* 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.

BHD-5-76

Environmental Health Department's Copy

C of A (s) No. 20867

Date Issued 4-25-84 **Serial** 6586 T C. No 137-012-21 L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner JOHNSON (LAST) JOHNNIE (FIRST) (MIDDLE)

Location of Property 9632 MARKUS DR.

Application Number 20867 Permit Number 20867

Inspection Data: REPAIR

Liquid Capacity of Tank ____ Tank Material ____

Total Length of Drain Tile ____ Number of Lines 4 x 50'

Depth of Filter Material ____ Cover Depth 3'-2'

Water Supply Source well Distance from Water Source 50'+

Excavation Inspected 4-25 (DATE) Tank Inspected ____ (DATE)

Nitrification Field Inspected 4-25 (DATE) OK - REPAIR ON N LINE ALSO

Washing Machine Line Inspected If Applicable 4-25-84 (DATE) REPAIR ON WASHING MACHINE LINE

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been installed reconstructed, altered or repaired in accordance with the permit issued and all the regulations of the Mecklenburg County Health Commission in effect on the date of issuance of this permit. The issuance of this Certificate of Approval does not in any way guarantee that the system will operate properly, 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 ____

Kelly Ratliff
Environmentalist

EHD-5-76