Date Received 6/25/79

SEE INSTRUCTIONS ON BACK

ICAR (S) Application No. 5889

T.C. No. 05-011-15

Map Date

ENVIRONMENTAL HEALTH

MECK COUNTY DEPARTMENT OF
RECEIVED
JUN
ENVIRONMENTAL HEALTH

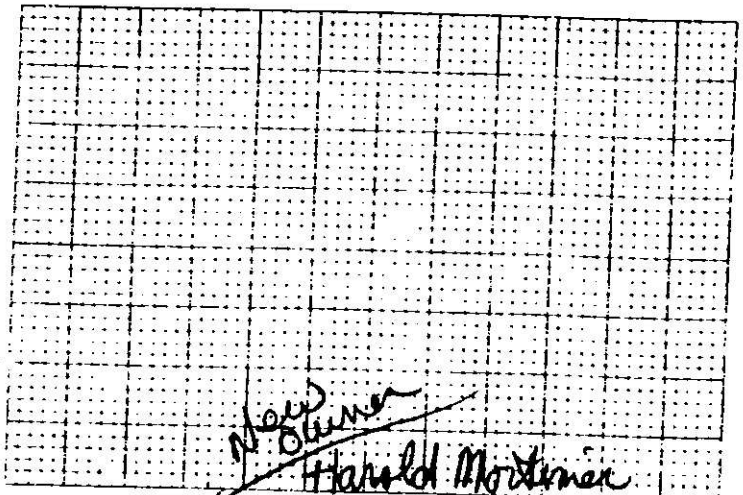
MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

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 2+

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. ___

550 Broad St, Newark, NJ 07102

13) NAME OF OWNER Thomas M. Hunter Sr DBA College Courts Apts
LAST FIRST MIDDLE

14) ADDRESS OF OWNER Drawer Q Belmont NC 28012

15) PHONE NO. Home 825-5558 Office 825-8530

16) LOCATION OF SYSTEM 1600 Marylou Dr, (Charlotte (Meck) NC
STREET OR COUNTY ROAD

Apt 9 + 10

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.

6-13-79
DATE OF APPLICATION

Thomas M. Hunter Sr.
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Received 6-21-82 SEE INSTRUCTIONS ON BACK

ICAR(S) Application No. 15839

T. C. No. 051-011-15

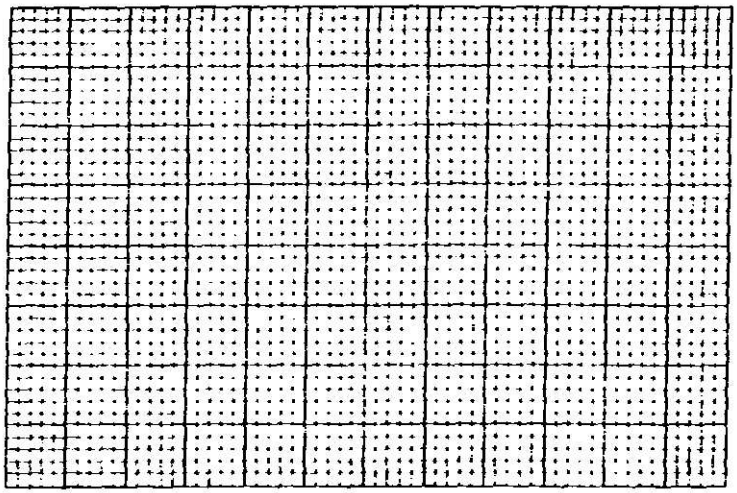
Map Date _____

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 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) 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 T. R Lawing Realty
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 500 S Tryon St.

15) PHONE NO. Home _____ Office 334-6481

16) LOCATION OF SYSTEM 1500 Mary Lynn Dr # 14 & #15
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.

6/16/82
DATE OF APPLICATION

Robert W. Lawing AGENT
OWNER

EHD-5-76 ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued 6-22-82

Serial No. 5320

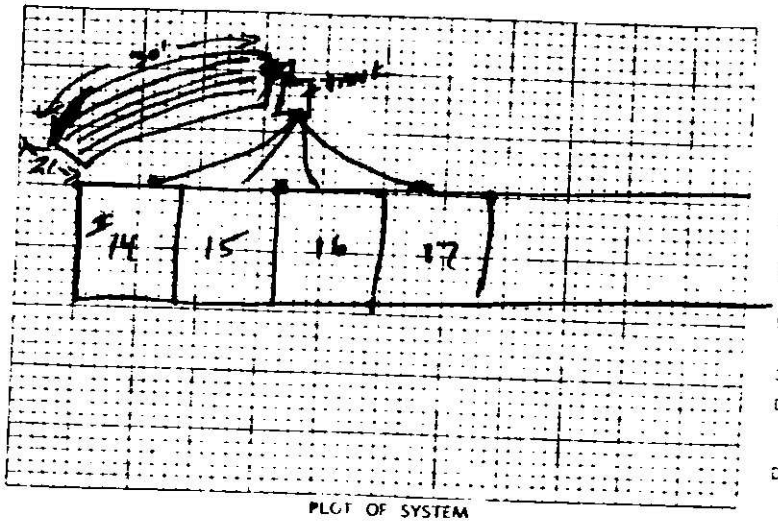
ICAR (S) Permit No. 15839

T. C. No. 051-011-15

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 waste-water 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 15839, dated 6-16-82, 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 7-2-82, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate UNSUITABLE

Liquid Capacity of Tank —

Tank Construction —

Absorption and or Nitrification Lines

Total Line Length 200'

Number of Lines 4'

Distance from House 15'

Distance from Property Line 710'

Distance from Well 175'

NAME OF OWNER T.R. LAWING REALTY

LOCATION OF PROPERTY 1500 MARY LYNN DRIVE #14 #15

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.

Comments: Bed 30'x21' - 17" Stone

Division or Section Head

Ralph Hill
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. 15839

Date Issued 7-22-82 Serial 5275 T. C. No 051-011-15

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner T.R. LAWING REALTY (LAST / FIRST / MIDDLE)

Location of Property 1500 MARY LYNN DRIVE

Application Number 15839 Permit Number 15839-

Inspection Data:

Liquid Capacity of Tank — Tank Material Pre cast - existing

Total Length of Drain Tile 110 ft Number of Lines Two

Depth of Filter Material 27" Cover Depth 2 ft

Water Supply Source Well Distance from Water Source 200 ft

Excavation Inspected 7-22-82 (DATE) Tank Inspected 7-22-82 (DATE)

Nitrification Field Inspected 7-22-82 (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, X 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 Bed changed due to space available:
50 ft long x 6 ft wide x 27 inches of Stone

Ralph Miller
Environmentalist

EHD-S-74

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY