Date Received 9-21-73 ~~9/19/73~~

RECEIVED
SEP 21 1973
ENVIRONMENTAL HEALTH DIVISION

ICAR's Application No. 7025

T C No 109-131-36

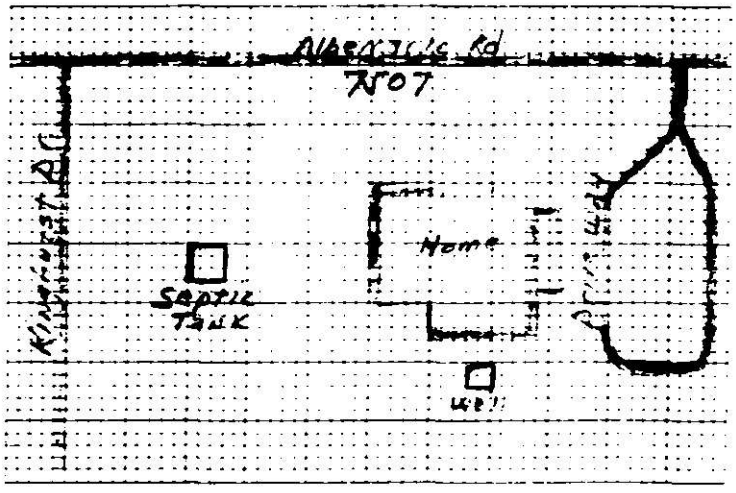
Map Date 9170

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

Install or Construct ☐ ✓ Alter or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption effluent discharge



4 No. of Bedrooms

5 Number of Employees

6 Washing Machine ✓ Yes No

7 Garbage Disposal ✓ No

8 Dishwasher ✓ No

9 Water Supply

A ✓

B

C

Well

Yes ✓ No

12 LA Soil Type

13) PLOT PLAN (ACCURATELY DIMENSIONED)

13) NAME OF OWNER [illegible] (LAST) [illegible] (FIRST) J. (MIDDLE)

14) ADDRESS OF OWNER 750 [illegible] Rd [illegible] NC 2[illegible]

15) PHONE NO Home 537 3652 Office 372 6716

16) LOCATION OF SYSTEM [illegible] (STREET OR COUNTY ROAD)

17) SUBDIVISION [illegible] Lot No 1 And 2 Block No 1

Map Book No 8 Page No. 495

18) DEED REFERENCE — DEED BOOK 2[illegible]7 AT PAGE 158

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 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.

DATE OF APPLICATION 9/19/73

OWNER Loy J Aldridge

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 31 Oct 1973

Serial No. 4475

ICAR (S) Permit No. 7025

T C. No. 109-131-36

Map Date 9-1-70

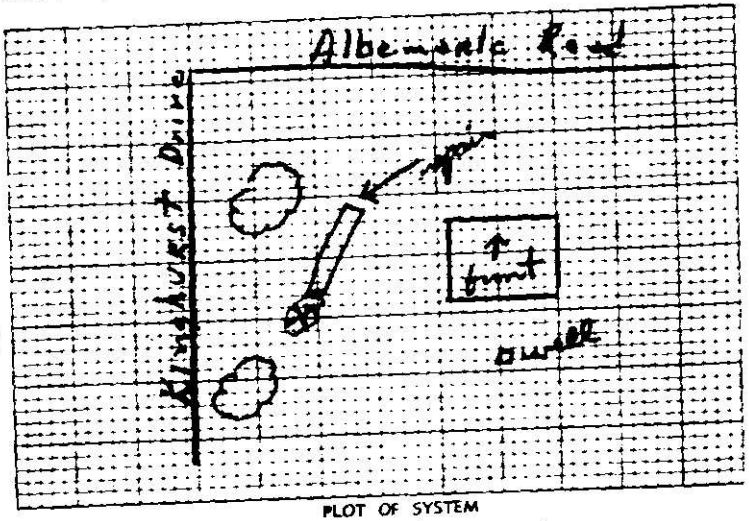
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 7025 dated 9-19-73 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 16 Nov 1973 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 e/ft

Number of Lines 4 (10 X 50)

Distance from House 10'

Distance from Property Line 10'

Distance from Well 50'

NAME OF OWNER Aldridge, Roy L.

LOCATION OF PROPERTY 7507 Albemarle Road

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:

John R Atkisson
Environmentalist

Division or Section Head

* If this permit is for the installation or construction of a new system, it must be signed by the division or 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 16 Nov 73 Serial 4235

C of A (s) No. 7025

T. C. No. 109-131-36

Map Date 9-1-70

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Aldridge, Rom L (LAST, FIRST, MIDDLE)

Location of Property 7507 Albemarle Rd

Application Number 7025 Permit Number 7025

Inspection Data:

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile 300' Number of Lines (4) 10'x50'

Depth of Filter Material 17" Cover Depth 24"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 16 Nov 73 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 16 Nov 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: —

R. M Reynolds

Environmentalist

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

HEALTH DEPARTMENT'S COPY