SEE INSTRUCTIONS ON BACK

Date Received 6-21-83

ICAR (S) Application No. 19790

T. C. No. 227-229-06

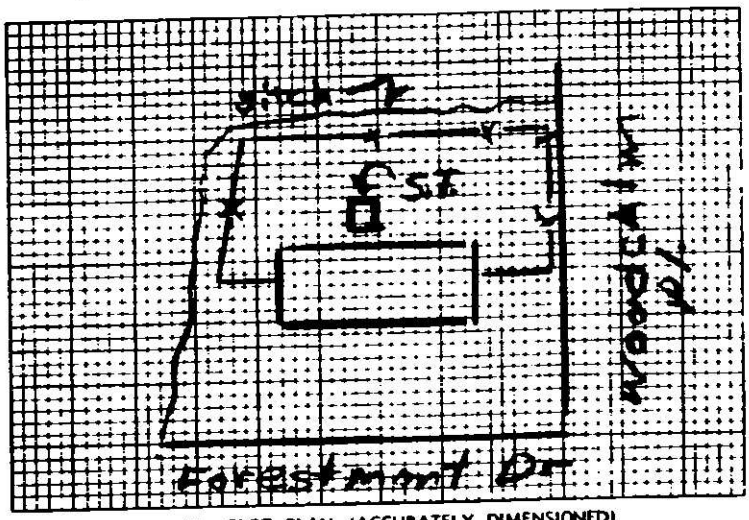
Map Date _____

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) X 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 X No
8) Dishwasher ✓ Yes ___ No
9) Water Supply
A) Individual Well ___
B) Governmental System ___
C) Community System
1 Well source X
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 ~~Mark~~ Shipes Mack A
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 6[illegible] Forestmont Dr. Matthews N.C

15) PHONE NO. Home 821-8[illegible] Office 374-2291

16) LOCATION OF SYSTEM 6[illegible] Forestmont Dr Matthews N.C
STREET OR COUNTY ROAD

17) SUBDIVISION Forest Hills Lot No. 125 Block No. _____

Map Book No. 14 Page No. 219

18) DEED REFERENCE — DEED BOOK 3762 AT PAGE 379

19) HAS A SOIL INVESTIGATION BEEN RUN? ___ YES X 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.

6-21-83
DATE OF APPLICATION

Mack Allen Shipes
OWNER

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

1979 R.

Serial No. 6362

ICAR(S) Permit No. [redacted]

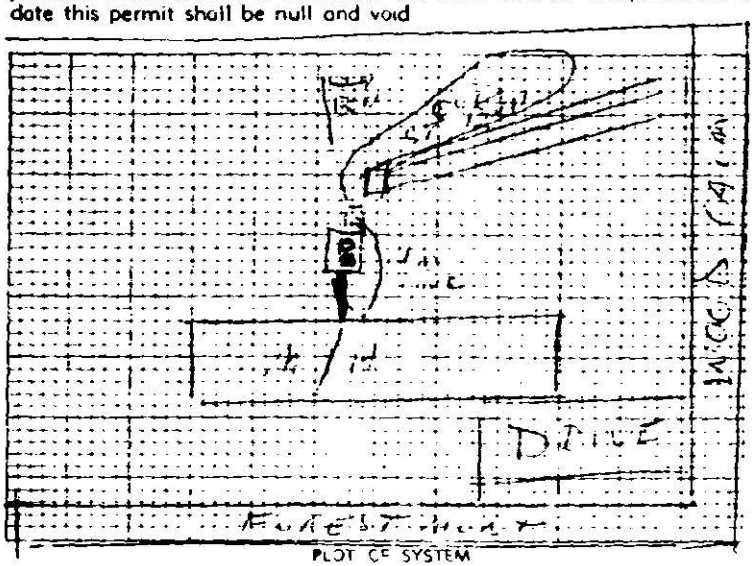
Date Issued 6-22-79

T. C. No. 227-229-06

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, Y 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 15222, dated JUNE 21st 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 July 6th 1983, after which date this permit shall be null and void



Permeability Rate II II3

Liquid Capacity of Tank 1000 gals

Tank Construction Repair

Absorption and or Nitrification Lines

Total Line Length 100 LIN FT

Number of Lines Three

Distance from House 15 FT

Distance from Property Line 20 FT.

Distance from Well 50 FT

NAME OF OWNER SHIELS DICK

LOCATION OF PROPERTY 123 EISENHOWER DRIVE

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.

Three Trench Bed 24 FT x 2 FT x Pitched shape stone cover

Comments: Tank into to Soil Use Dist Box & also plug

Into line into old Dist Box

Division or Section Head

Ralph Wilkie
Environmentalist

* 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 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

19790

C of A (s) No. [redacted]

Date Issued 7-7-83 Serial 5955 T C No. [redacted]

227-229-06

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner SHIPES, MALK (LAST, FIRST, MIDDLE)

Location of Property 633 FOREST MOUT DRIVE

Application Number 15 222 Permit Number 15222

Inspection Data:

Liquid Capacity of Tank Repair Tank Material Repair

Total Length of Drain Tile 100 lin FT Number of Lines Three

Depth of Filter Material 17 inches Cover Depth 18 inches

Water Supply Source well Distance from Water Source 80 FT

Excavation Inspected 7-7-83 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 7-7-83 (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, A 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 ONE Trench 34FT one Bed 34 x 6 FT - due to lack of space

Ralph Miller
Environmentalist

BHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Received 17 Oct 83

OCT 17 83

ICAR(S) Application No. 19290

T. C. No. 227-029-06

Map Date ________

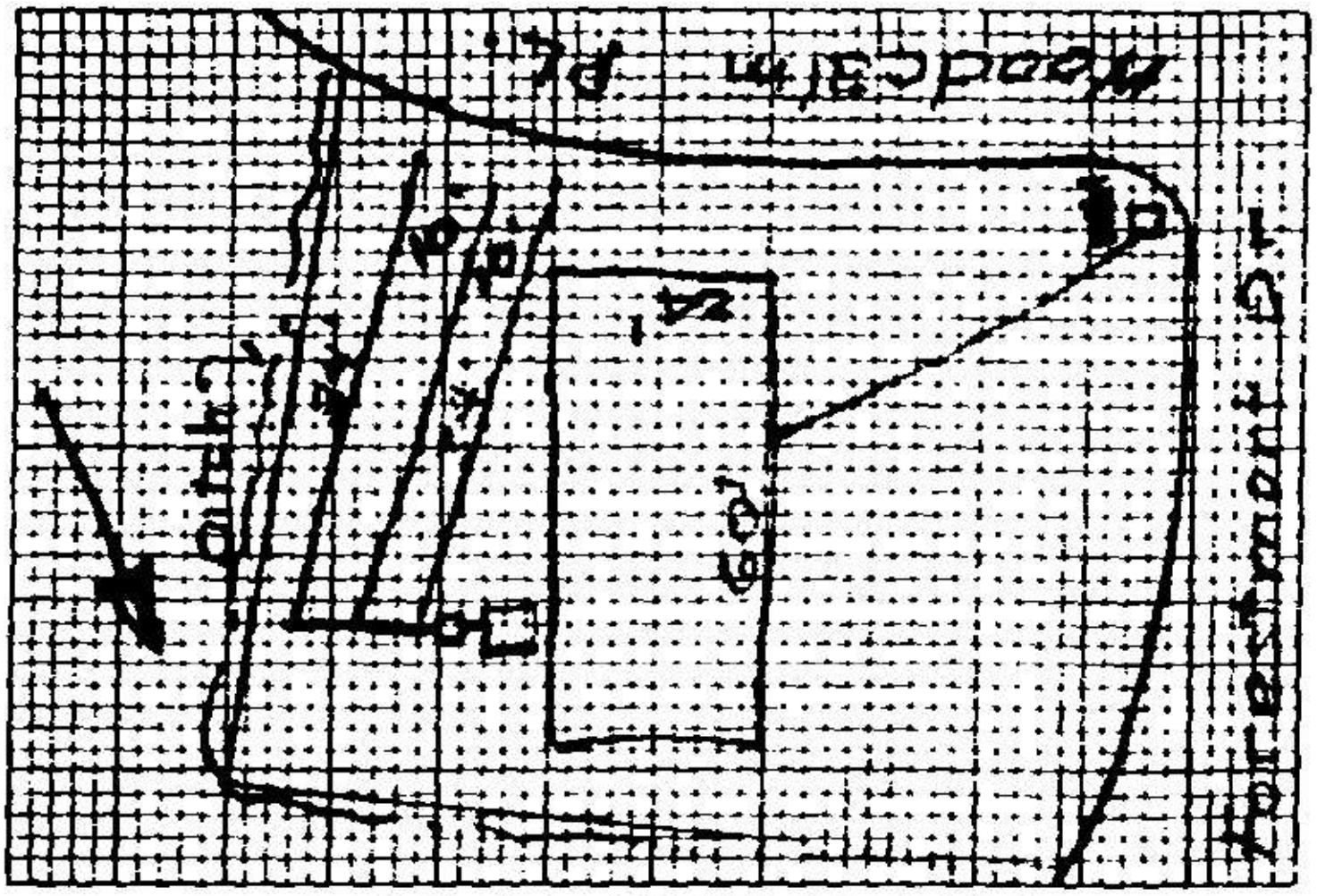
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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: *Replacing Mobile Home*

1) ___ Install or Construct 2) ✓ Alter or Repair an individual septic tank wastewater treatment system with a subsurface, soil absorption effluent discharge

Mobile Home ✓ Yes ___ No
Residence ___ Yes ___ No



3) PLOT PLAN (ACCURATELY DIMENSIONED)

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 ________

13) NAME OF OWNER [illegible] (LAST) Mack (FIRST) Allen (MIDDLE)

14) ADDRESS OF OWNER [illegible] Matthews 28105

15) PHONE NO. Home [illegible] Office 374-2291

16) LOCATION OF SYSTEM see map on top (STREET OR COUNTY ROAD)

17) SUBDIVISION [illegible] Lot No. [illegible] Block No. —

Map Book No. [illegible] Page No. 219

18) DEED REFERENCE — DEED BOOK [illegible] AT PAGE C319

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.

Oct 17 1983
DATE OF APPLICATION

Mack Shipe
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

BI 10-19-83

Serial No. 6862

SIR No. 19790

Date Issued 10-18-83

T. C. No. 227-229-06

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

IMPROVEMENT PERMIT
TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Shipes, (LAST) Mack (FIRST) Allen (MIDDLE)

ADDRESS OF OWNER 633 Forestmont Dr., Matthews, NC ZIP 28105

LOCATION OF LOT 633 Forestmont Drive (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO 125 BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. _____

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, on an on-site inspection of the said lot; and upon the information supplied in the "Application for an Installation, Construction, Alteration, and/or Repair Permit", number ~~19790~~. This approval is subject to the following terms and conditions:

1. That the nitrification field be installed, constructed, altered and/or repaired in the same area where the soil investigation was run.
2. That an "Installation, Construction, Alteration, and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altered, and/or repaired and that the system be installed in accordance with same.

This approval may be revoked and the building inspection department requested to revoke any building permit (s) which have been issued to authorize construction on the said lot if at any time it is determined that any information contained in the "Application for an Installation, Construction, Alteration, and/or Repair Permit" is not correct or is untrue or that the septic-tank system is not being installed, constructed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit.

*** USE EXISTING SYSTEM ****

Ralph Mills
Environmentalist

Sisco D. Hamilton Jr.
Environmental Health Director, or Authorized Section Head

EHD-5-76

MOBILE HOME

Environmental Health Department's Copy