APPLICATION FOR AN IMPROVEMENT PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

(OFFICE USE ONLY) RECEIVED MECKLENBURG COUNTY HEALTH DEPT.
FILE: 6335
TC:
SERIAL: No 19436 ENVIRONMENTAL HEALTH ☐ CRT

JOB LOCATION

① ADDRESS: 21600 (STREET NO) Rio Oro (STREET) Drive ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.: 001-292-11
⑤ SUBDIVISION: Bahia Bay ⑥ LOT: 45 ⑦ BLOCK:

OWNER

⑧ NAME: Donald E + Linda N. Owens (FIRST) (MIDDLE) (LAST)
⑨ MAILING ADDRESS: 21600 Rio Oro Dr.
⑩ CITY: Davidson ⑪ STATE: N.C ⑫ ZIP: 28036
⑬ PHONE: (WORK) 596-8283 ⑭ (HOME) 892-5469

REQUEST

This request is for a(n):

⑮ ☐ New permit
⑯ ☒ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☐ Other (specify)

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home ㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 3 ㉕ Type?
㉓ Maximum occupancy? 5 ㉖ Maximum number of employees?
㉔ Basement? ☒ yes ☐ no ㉗ Maximum number of seats?

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☐ Individual well
B ☐ Municipal system
C ☒ Community well
D ☐ Community system

㉙ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Donald E Owens
Date: 11-6-89

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

... No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by this Department.

... This permit is not transferable, and shall become null and void 36 months from the date of issuance.

PJW 11/14/89
Environmentalist Date

Director or Authorized Section Head Date

*This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

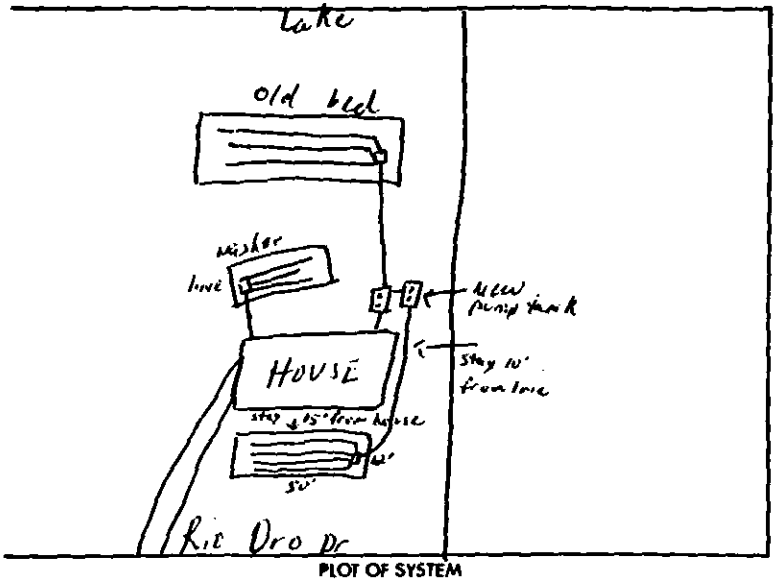
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 6335 DATE: 11/14/89

TC: 001 297 11 ☐ L

SERIAL Nº 13048

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 the application dated 11/6/89. All work shall be completed on or before 12/14/89, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Health Department before any system can be covered up or placed into service. 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank — gallons
Liquid Capacity of Dosing Tank 1,000 gallons
Tank Construction PCC
Absorption and/or Nitrification ~~Line~~ Bed
Trench Width 12' feet
Total Line Length 50' feet
Number of Lines 4
Depth of Stone 24" inches
Distance from House 5' feet
Distance from Property Line 10' feet
Distance from Well > 100 feet

NAME OF OWNER Donald Owens

LOCATION OF PROPERTY 2160 Rio Oro Dr

Comments: 12' wide x 50' long x 24" stone
Stay 15' from foundation, stay 10' from prop line
make pump outlet lower than old field outlet

Division or Section Head

Philo S. Walker
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 Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER OR AGENT'S COPY

CERTIFICATE OF COMPLETION/OPERATION PERMIT

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 6335 DATE: 12/6/89

TC: 001 292 11 ☐ L ☐ CRT

SERIAL № 12249

Name of Owner Donald Owens Juris.:

Address of Property 21600 Rio Oro Dr

Inspection Data:

Tank Material PCC

Total Length of Drainfield Bed 12x45

Number of Lines 4 @ 45

Cover Depth 10"

Water Supply Source Com well

Distance to Water Source 7100

Excavation Inspected 12/6/89

Tank(s) Inspected 12/6/89

Wash Line Inspected NA

High Water Alarm Inspected 12/6/89

PLOT

Bed 12'x45'x 28" stone

Lake Norman Back Roc

Design: 1989 Repair CTR# Rodney Ellis

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☒ installed or constructed ☐ altered or repaired

☒ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The issuance of this

☐ Certificate of Completion ☒ Operation Permit

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 document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 10 NCAC 10A .1900 in addition to those listed below under "COMMENTS." This document 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: 1 Bed 12' x 45' x 28" stone

Diversion valve added to utilize old drainfield also

Gould EPO 411A

Philip A. Walker

Environmentalist

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