Date Received 9-3-82

SEE INSTRUCTIONS ON BACK

SEP - 1982

CAR(S) Application No. 18981

T. C. No 053-K303

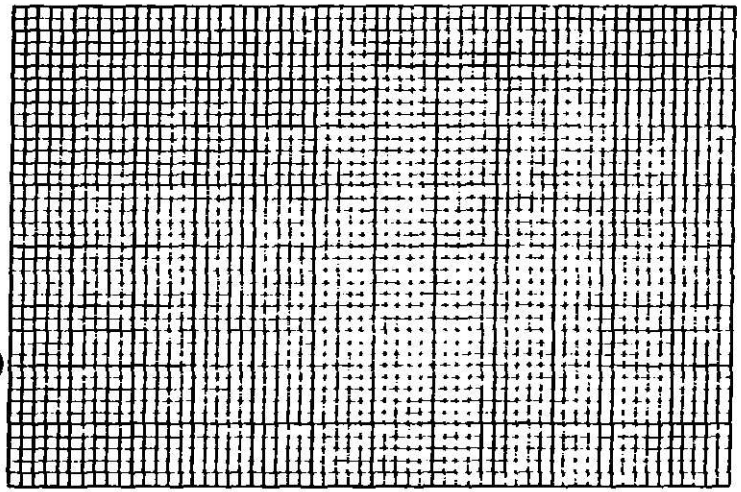
Map Date _____

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) Keith Beaty - OWNER

Mobile Home ___Yes ___No
Residence ___Yes ___No

4) No. of Bedrooms _____
5) Business Use — Max No. Employees 3
6) Washing Machine ___Yes X No
7) Garbage Disposal ___Yes X No
8) Dishwasher ___Yes X No
9) Water Supply:
A) Individual Well X
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] Philip [illegible] (Is Leased)
LAST FIRST MIDDLE

14) ADDRESS OF OWNER [illegible] Mount Holly NC

15) PHONE NO. Home [illegible] Office 399-7295

16) LOCATION OF SYSTEM [illegible] Field
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.

Sept 3 1982
DATE OF APPLICATION

Philip Everid McLaughlin
OWNER

EHD-5-74

Date Issued 9-7-82

Serial No. 5713

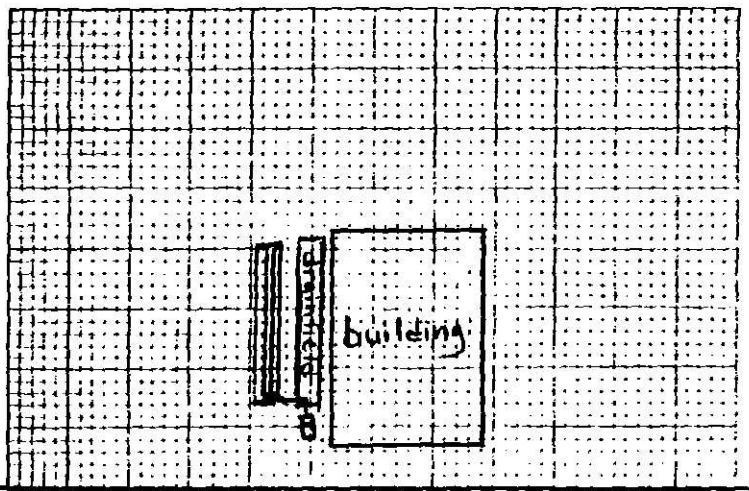
ICAR(S) Permit No. 18981 ✓

T. C. No. 053-163-03

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 18981, dated 9-3-82 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 10-7-82, after which date this permit shall be null and void.



PLOT OF SYSTEM

REPAIR

Permeability Rate _____

Liquid Capacity of Tank _____

Tank Construction _____

Absorption and or Nitrification Lines

Total Line Length 200'

Number of Lines 2

Distance from House > 5'

Distance from Property Line > 10'

Distance from Well > 100' (across the street)

NAME OF OWNER McLaughlin, Philip David

LOCATION OF PROPERTY 9512 Wilkenson Boulevard

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: check the sanitary tee and line to the drainfield — then, if needed, add a 6' wide × 34' of stone × 50' long repair

_____ / Mike Sekler

Division or Section Head / 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-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

C of A (s) No. 18981 ✓

Date Issued 9-8-82 **Serial** 5343 T. C. No. 053-163-03

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF COMPLETION

CERTIFICATE OF APPROVAL

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

Name of Owner McLaughlin (LAST), Philip (FIRST) David (MIDDLE)

Location of Property 9512 Wilkenson Boulevard

Application Number 18981 Permit Number 18981

Inspection Data:

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile 200' Number of Lines 2

Depth of Filter Material 34" Cover Depth 3'-4'

Water Supply Source well Distance from Water Source > 100'

Excavation Inspected — (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 9-8-82 (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, 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 Repair is in saprolite

Mike Sexton
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT COPY