SEE INSTRUCTIONS ON BACK

Date Received 10-29-82

ICAR(S) Application No. 19080

? T. C. No. 031-013-11

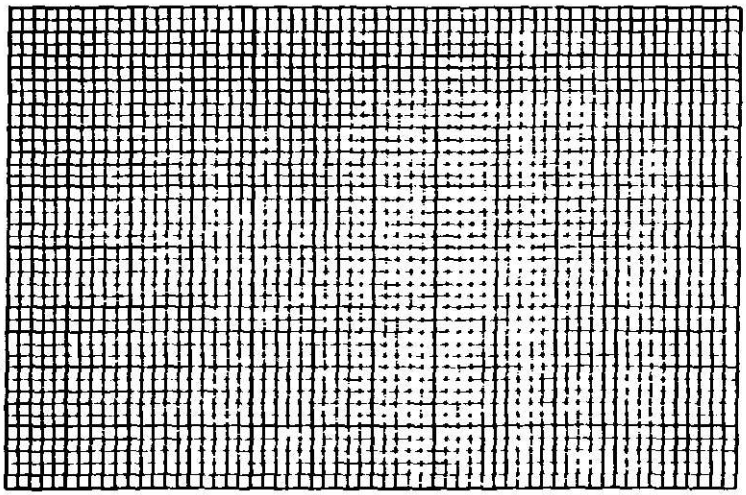
Map Date _____

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 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 Simms (LAST) Helen (FIRST) H (MIDDLE)

14) ADDRESS OF OWNER 405 Interurban Ave 28208

15) PHONE NO. Home 394-3122 Office ___

16) LOCATION OF SYSTEM 7717 Mack St (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. 87 & 88 Block No. ___

Map Book No. 5 Page No. 161

18) DEED REFERENCE — DEED BOOK 2731 AT PAGE 244

19) HAS A SOIL INVESTIGATION BEEN RUN? ___ YES ___ NO DATE RUN ___

20) PTR NUMBER (See Instructions) 116

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 28 82
DATE OF APPLICATION

Helen H. Simms
OWNER

EHD-S-76

Serial No. 5841

Date Issued 2/16/82

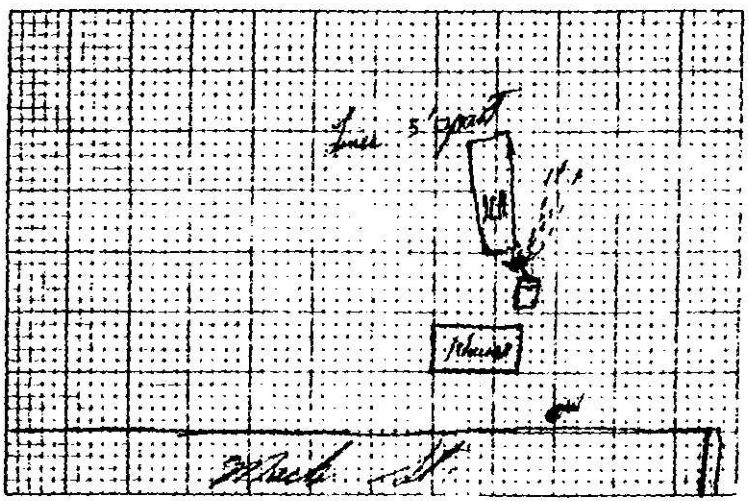
ICAR(S) Permit No 19080

T. C. No 031-013-111

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 19080, dated 2/16/82 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 8/16/82, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate

Liquid Capacity of Tank

Tank Construction

Absorption and or Nitrification Lines:

Total Line Length 200'

Number of Lines 4 (4 @ 50' x 17')

Distance from House 20'

Distance from Property Line 20'

Distance from Well >50'

NAME OF OWNER Lipman, Ellen H.

LOCATION OF PROPERTY 7317 Mack St

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:

Division or Section Head

Environmentalist R. H. Kirby

* 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

Date Received 8/9/83

MECK COUNTY DEPARTMENT OF ... ON BACK
RECEIVED
AUG 09 '83
MECKLENBURG COUNTY

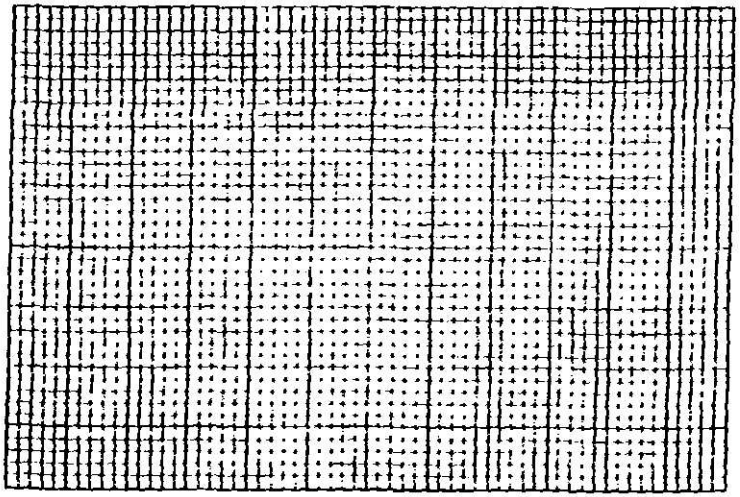
19080
ICAR(S) Application No. 031-013-11
T. C. No. 031-013-11
Map Date 1980

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 3
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 Sigmon (LAST) Helen (FIRST) H (MIDDLE)
14) ADDRESS OF OWNER 908 Interurban Ave. 28208
15) PHONE NO. Home 394-3428 Office ___
16) LOCATION OF SYSTEM Mack Street (STREET OR COUNTY ROAD) 7217
17) SUBDIVISION ___ Lot No. ___ Block No. ___
Map Book No. 5 Page No. 101
18) DEED REFERENCE — DEED BOOK 2231 AT PAGE 244
19) HAS A SOIL INVESTIGATION BEEN RUN? ___ YES ___ NO DATE RUN ___
20) PTR NUMBER (See Instructions) NO

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.

8-9-'83
DATE OF APPLICATION

Helen H Sigmon
OWNER
by Wm B Sigmon (Husband)

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued 8/9/83

Serial No. 6522

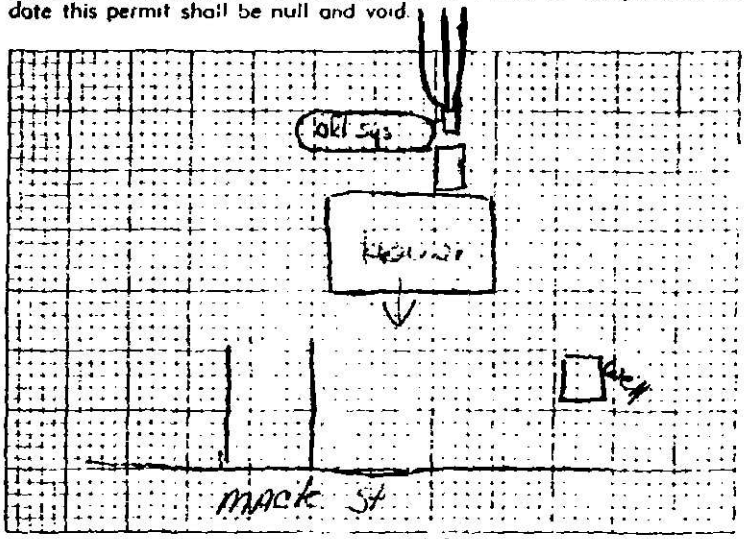
ICAR(S) Permit No. 19080

T. C. No. 031-013-11

Map Date 19080

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 19080, dated 8/2/83 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 8/23/83, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate Repair

Liquid Capacity of Tank ___

Trench Construction ___

Absorption and/or Nitrification Lines

Total Line Length 90' 2X stone depth 180'

Number of Lines 3@30'

Distance from House >10'

Distance from Property Line >10'

Distance from Well >75'

NAME OF OWNER Sigmon Helen H.

LOCATION OF PROPERTY 7217 Mack St

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: 3 - 30' long / 3' wide / 24" stone Straw Cover
Set new "D" box if necess. / do not disconnect old field
All three lines off existing box otherwise // if come off tank place Tee tank

Randy C Poole RS

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-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

C of A (s) No. 19080

Date Issued 8/11/83 Serial 6057 T. C. No. 031-013-11

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner Sigmon (LAST) Helen (FIRST) H (MIDDLE)

Location of Property 217 mack St

Application Number 19080 Permit Number 19080

Inspection Data:

Liquid Capacity of Tank Repair Tank Material —

Total Length of Drain Tile 90' 2x12" stone (180') Number of Lines 3

Depth of Filter Material 24" Cover Depth 1½'

Water Supply Source well Distance from Water Source >75'

Excavation Inspected 8/11/83 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 8/11/83 (DATE)

Washing Machine Line Inspected, If Applicable N/A (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: _____

Randy C Pool RS
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY