Date Received 3/8/82

MECK COUNTY DEPARTMENT OF
RECEIVED
MAR - 8 1982
ENVIRONMENTAL HEALTH

SIR No. 19413
T.C. No. 053-093-01

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Loach (LAST) Ron (FIRST) A (MIDDLE)

2) ADDRESS OF OWNER 2220 Roswell Ave ZIP 28207

3) PHONE NO. Home 375-9543 Office _____

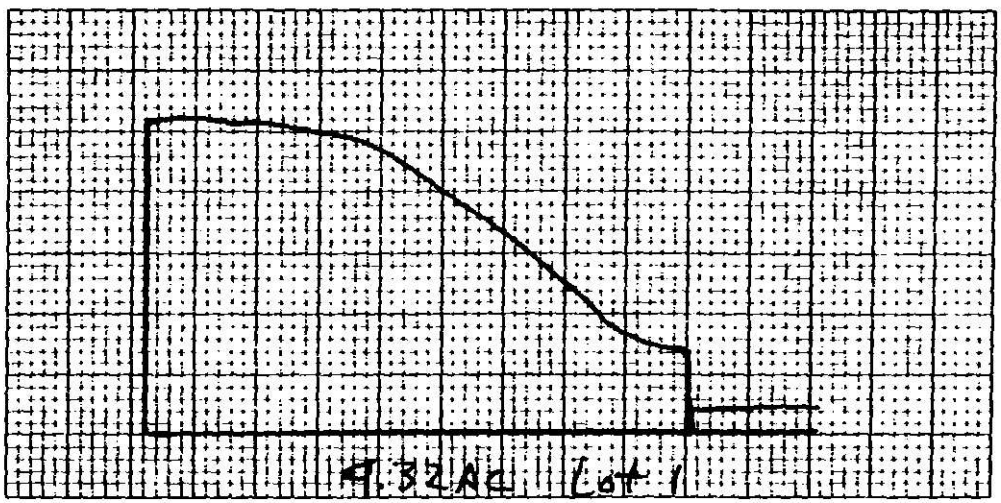
4) LOCATION OF PROPERTY Hanfield Road SR 1604
(STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. 1 BLOCK NO. _____

MAP BOOK NO. 053- PAGE NO. 09

6) DEED REFERENCE: DEED BOOK _____ PAGE NO. _____

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation and an on site inspection of the lot hereinabove described for the purpose of determining if the lot is suitable for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge.



7) ACCURATELY DIAGRAM & DIMENSION LOT

A Loach
OWNER

EHD-5-76

Environmental Health Department's Copy

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1200 Blythe Boulevard
Charlotte, North Carolina 28203

SIR. NO. 19413
T. C. NO. PO 053-093-01
DATE: 4-18-83

Mr. Ron R. Locatis
2220 Roswell Avenue
Charlotte, NC 28207

Re: Property located at Hawfield Road, Lot 1

Dear Mr. Locatis:

At your request, a field investigation was conducted on the property designated above and was classified unsuitable for the installation of a ground absorption sewage disposal system. A copy of the site evaluation report is enclosed for your information.

Sites classified as unsuitable may be utilized for soil absorption disposal systems provided engineering, hydrogeologic, soil and environmental studies indicate that a suitable septic tank system or a suitable alternate system can be reasonably expected to function satisfactorily.

Should you desire to file for permission to install an alternate system, please submit your proposals, in the form of plans and specifications, to this office. They will be reviewed and if it is found that the system may be reasonably expected to function satisfactorily, approval will be given upon the execution by you of a "Septic Tank Agreement Form" provided by this office.

If I may be of assistance, please feel free to call at any time.

Sincerely,

Mike Sexton

Michael A. Sexton
Environmentalist
On Premises Waste Disposal Section

Enclosure

EHD #37 (11-82)

DEPARTMENT OF ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY, NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 1943

T.C. NO. P0053-04141-82
P0053-04141

(Ground Absorption Sewage Disposal)

OWNER: Ron R. Justice
ADDRESS: 222 Roswell Ave Charlotte, N.C. 28207

PLAT NO: Lot #1
LOT SIZE: Approx 18,100

LOCATION OF SITE: Hemfield Road

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	(S) 6-15% (PS) 15-30% U	(S) 6-15% PS U	(S) 2-6% PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S PS (U) 2-1 clay	S PS (U) 2-1 clay	S PS (U) 2-1 clay	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) Blocky U	S (PS) Blocky U	S (PS) Blocky U	S PS U
4. SOIL DEPTH (inches)	S PS (U) 18-24"	S PS (U) 24-36"	S PS (U) 18-36"	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S PS (U) Saprolite 18-24"	S PS (U) 24-36"	S PS (U) saprolite 36 inches	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S PS (U) slowly permeable subsoil	S PS (U) slowly permeable subsoil	S PS (U) Drainage way	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	IVB	IVB	IVB	
9. SITE CLASSIFICATION	unsuitable	unsuitable	unsuitable	
10. SOIL SERIES	Wilkes Like	Enon Like	Drainageway	

S - Suitable PS - Provisionally Suitable U - Unsuitable

**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

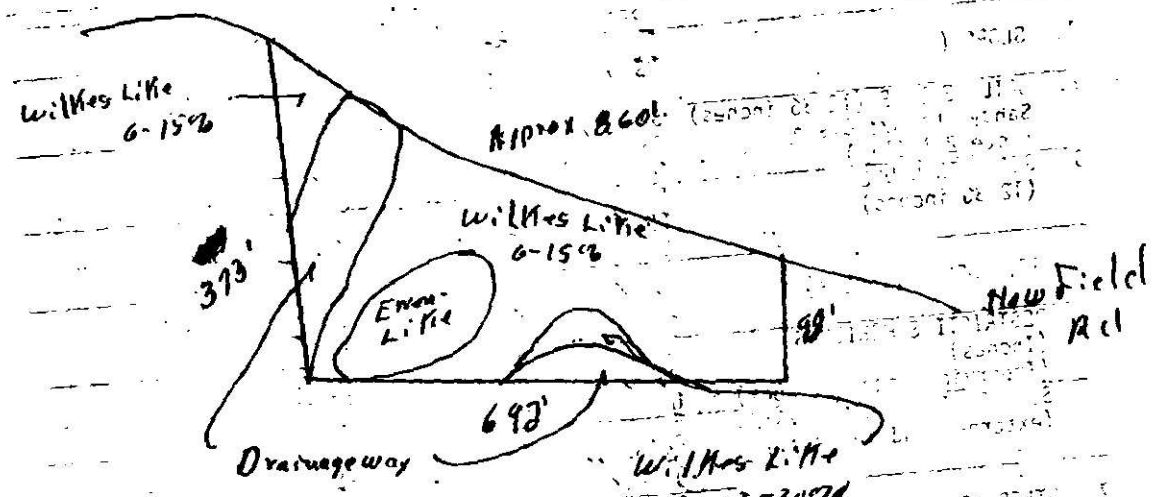
Recommendations/Comments: _____

Described by: William R. Mayhew
Title: Soil Scientist

Date: 4-15-83

EHD 539 (Revised: 6/82)

2


Wilkes Like
6-15%
Approx 8 Col
Wilkes Like
6-15%
373'
Emmi
Like
98'
New Field
Rd
693'
Drainageway
Wilkes Like
13-30%

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)
FILE: 19413
TC: _____
SERIAL: № 18883 ☐ I ☐ CRT

JOB LOCATION

① ADDRESS: 1114 Hawfield Rd (STREET NO. / STREET) ② FILE: # 19413
③ JURISDICTION: Mecklenburg County ④ TAX PARCEL NO.: PO 053-093-29
⑤ SUBDIVISION: _____ ⑥ LOT: 29 ⑦ BLOCK: 1100

OWNER

⑧ NAME: Ronald + Roxanne (FIRST) Gibson (MIDDLE) McLeod (LAST)
⑨ MAILING ADDRESS: PO Box 561053
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28256
⑬ PHONE: (WORK) 525 6916 ⇔ ⑭ (HOME) 598-8646

REQUEST

This request is for a(n):
⑮ ☑ New permit ⑰ ☐ Authorization for mobile home exchange
⑯ ☐ Repair or alteration permit ⑱ ☐ Other (specify) _____

DESIGN CRITERIA

System will serve:
⑲ ☐ Residence ⑳ ☑ Mobile home (modular) ㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 3 ㉕ Type? _____
㉓ Maximum occupancy? 2 ㉖ Maximum number of employees? _____
㉔ Basement? ☐ yes ☑ no ㉗ Maximum number of seats? _____

WATER SUPPLY

⑳ Water supply from (present or proposed):
A ☑ Individual well
B ☐ Municipal system
C ☐ Community well
D ☐ Community system

㉘ 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: Roxanne McLeod
Date: 7-24-89

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.

Agreement Form on File

Environmentalist — Date

Director or Authorized Section Head — 8-9-89 — Date

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

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

DATE: 7-24-89

NAME/COMPANY: Roxanne + Ronald McLeod

Sanitation _____

Vector Control _____

OPWD ✓

SERVICE: D.P. New

1114 Harwood Rd.

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
JUL 24 1989

File #19413

FEE: $ 200.00

Jackie Abernethy
Completed By

Collected By

700 N. Tryon St

DATE: 7-24-89

TO: HEALTH DEPARTMENT - ENVIRONMENTAL HEALTH

FROM: COUNTY ENGINEERING

EHD FILE _____ JURISDICTION CODE Meck

PARCEL NUMBER 053-093-29

ASSIGNED ADDRESS 1114 Hawfield Rd

EXISTING ADDRESS _____

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	NOT APPROVED
1. SUBDIVISION REGULATIONS	☐	☐ *
2. FLOODWAY REGULATIONS	☐	☐ *
3. EROSION CONTROL REGULATIONS	☐	☐ *
4. COMMERCIAL DRAINAGE PLAN	☐	☐ *

	PRESENT	NOT PRESENT
5. PUBLIC UTILITY EASEMENT	☐ *	☐
	YES	NO
6. PROPERTY FRONTS ON THOROUGHFARE	☐ *	☐
	YES	NO
7. DRIVEWAY PERMIT REQUIRED	☐ *	☐

* If checked, further investigation will be required to determine whether a building permit may be issued by Building Standards for the site.

REMARKS: well / septic tank

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE AT BUILDING STANDARDS WHEN PAYING PERMIT FEES.
A CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL THE TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

SIGNED: _____

OPWEAR 02/86

PROPOSED PLOT PLAN

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

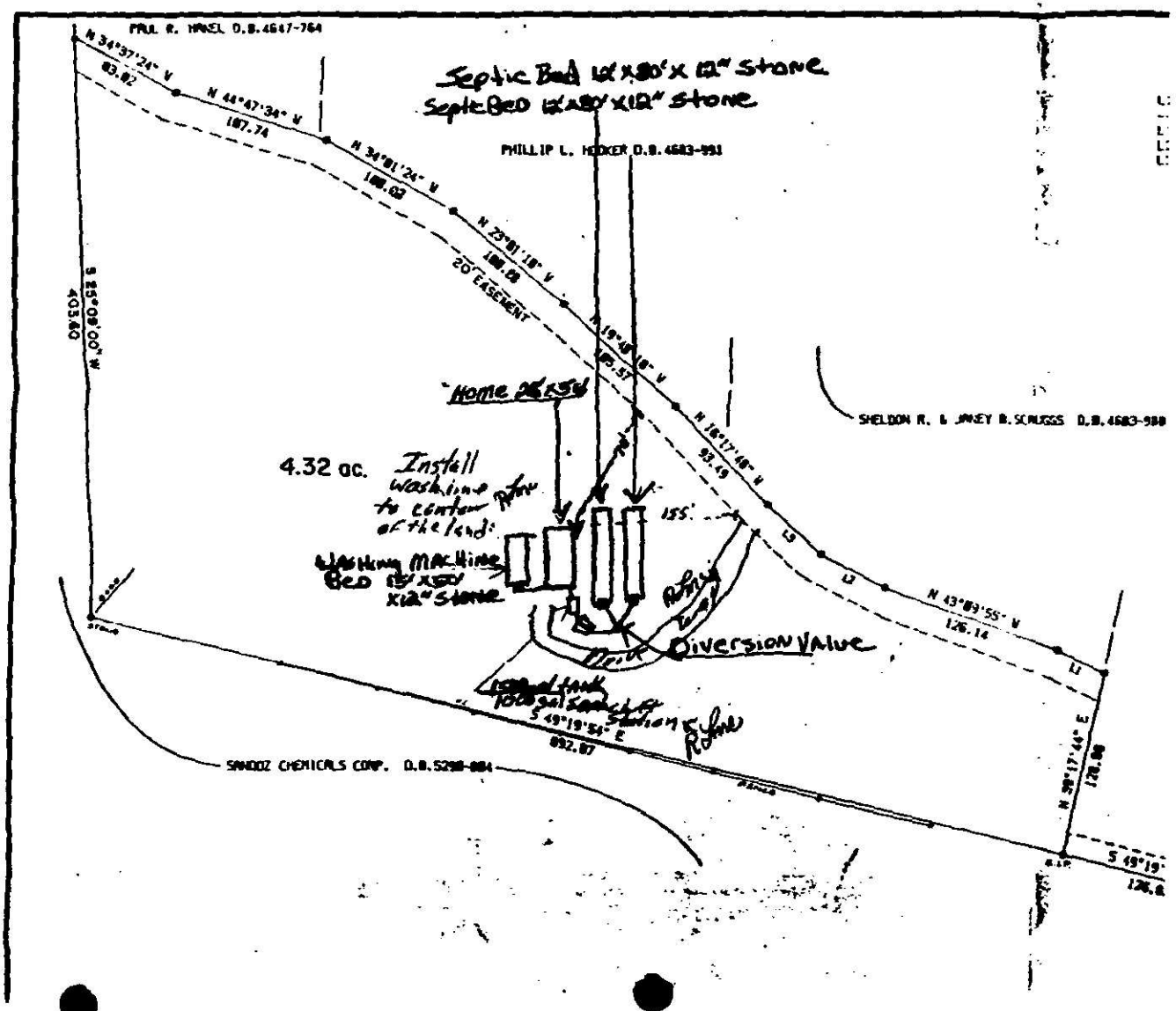
FILE: 19413

TC: P.O 053-093-29

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or dreinfield.

Signed: Ronny McLeod

Date: 7-24-89


PAUL R. HANEL D.B. 4647-764
Septic Bed 12'x80'x 12" stone
Septic Bed 12'x80'x12" stone
PHILLIP L. HOOKER D.B. 4683-951
N 34°37'24" W
83.82
N 44°47'34" W
187.74
N 34°01'24" W
N 25°01'18" W
20' EASEMENT
N 19°45'16" W
N 18°17'46" W
93.49
N 43°03'55" W
126.14
S 85°08'00" W
403.40
"Home Site"
4.32 ac.
Install
washline
to center
of the land.
155'
Washing Machine
Bed 15'x80'
x12" Stone
Diversion Valve
S 49°19'54" E
892.87
SANDOZ CHEMICALS CORP. D.B. 5298-884
N 39°17'46" E
178.88
SHELDON R. & JANEY B. SCRUGGS D.B. 4683-988

Mecklenburg County
Health Department

Basil G. Deltas, M.D., M.P.H.
Health Director

August 7, 1989

Ronald & Roxanne Gibson McLeod
P. O. Box 561053
Charlotte, NC 28256

Dear Mr. & Mrs. McLeod:

RE: Property located at 1114 Hawfield Road
FILE: 19413
PARCEL: 053-093-29 PO

Receipt of your plans for a modified waste disposal system for the property referenced above is acknowledged.

Your plans for the modified system for the above property as submitted are approved with the following comments:

- The well should be located 100 feet or no less than 50 feet away from any part of the sewage disposal system and repair area.

- Water saving plumbing devices and low flush or microflush toilets must be installed when constructing the residence.

Upon execution and recording with the Register of Deeds Office, Mecklenburg County, of the enclosed "Septic Tank Agreement Form", an Improvements Permit may be issued by this office.

Sincerely,

Jim Ericson, R.S., Supervisor
On Premises Waste Disposal & Water Supply

JE/ir

Enclosures - 3 Septic Tank Agreement Forms

PRESENTED FOR REGISTRATION

89 AUG -9 AM 10:07

REAL ESTATE
BOOK PAGE
5086 0769

000042

FILE NO. 19413

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

REGISTER OF DEEDS
MECKLENBURG CO., N.C.

ACKNOWLEDGEMENT OF REQUEST BY OWNER FOR RECLASSIFICATION OF SITE FROM "UNSUITABLE" TO "PROVISIONALLY SUITABLE" UNDER 10 NCAC 10A .1948(c)

The undersigned, Roxanne McLeod and Ronald Lee McLeod

owner of property located at 1114 Hawfield Rd., Charlotte, N.C. 28214

("the site") and described in an instrument recorded in Book 6074 at Page 0539, Mecklenburg Public Registry, hereby acknowledges that he applied to the Mecklenburg County Department of Environmental Health ("the Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 10 NCAC 10A .1934 et seq; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested pursuant to 10 NCAC 10A .1948(c) that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data and other information which indicate to the Department that the septic tank system proposed by the undersigned can reasonably be expected to function satisfactorily and thus that the findings specified in 10 NCAC 10A .1948(c)(1), (2), and (3) can be made; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is his responsibility and that neither the Department nor its officials, employees or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

The undersigned further agrees for his heirs and assigns that, in the event any septic tank system installed under authority of the aforesaid permit fails to perform adequately in any respect, he will take whatever measures are required to correct same; or if such is impossible he will discontinue use of said system immediately.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

This 9th day of August, 19 89.

Roxanne McLeod (SEAL)
Roxanne McLeod

Ronald Lee McLeod (SEAL)
Ronald Lee McLeod

By & Mail: Dept of Environmental Health

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, Carol E. McKissick, a Notary Public for said County and State, do hereby certify that

McLeod & Ronald Lee McLeod personally appeared before me this date and acknowledged the

the foregoing instrument.

and notarial seal, this 9th day of August, 19 9 .

Notary Public

6.00
6.00
CASH 6.00

My Commission Expires 3-15-93

#5847 000
08/09/89

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

State of North Carolina, County of Mecklenburg

I, _____

The foregoing Certificate(s) of Carol E McKissick

by certify that

_____

Is _____

of _____

Notary(ies) Public is/are certified to be correct. This instrument and this certificate are duly registered at the date and time and in the Book and Page shown on the first page hereof.

anation, the foregoing

Instrument was signed in its name

aled with its corporate

seal and attested by _____

ANNE A. POWERS, REGISTER OF DEEDS

WITNESS my hand and notar

By Charlotte W. Pettet Deputy - Register of Deeds

_____
Notary Public

My Commission Expires _____

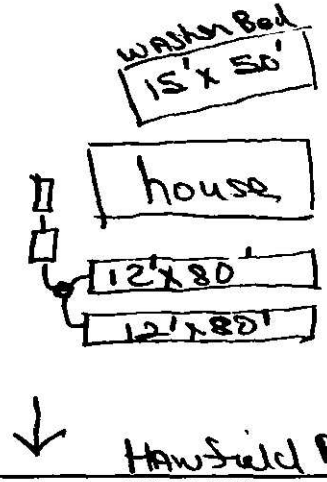
CO. 7
C.S.
121

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

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

FILE: 19413 DATE: 8/28/89
PC: 055-093.29 ☐ L
SERIAL № 12924

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 7/24/89. All work shall be completed on or before 9/28/89, 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 Department of Environmental Health 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 1500 gallons
Liquid Capacity of Dosing Tank 1000 gallons
Tank Construction PCC
Absorption and/or Nitrification Lines:
Trench (Width) 15'x50'- WASHER 12'x80'- Septic feet
Total Line Length 890' feet
Number of Lines 3
Depth of Stone 12 6" SAND inches
Distance from House 5 feet
Distance from Property Line 10 feet
Distance from Well Not IN feet

NAME OF OWNER McLeod Ronald
LOCATION OF PROPERTY 1114 Hawfield Rd
Comments: INSTALL one 15'x 50' bed for Washer, 12" Stone, 6" SAND - INSTALL (2) 12'x80' for Septic Bull Run diversion valve., 6" SAND

Division or Section Head ____ Environmentalist Judy J. Kaiser R.S.

* 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.

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER OR AGENTS COPY

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 19413 DATE:

TC: PO 653-093-29 ☐ L ☐ CRT

SERIAL № 12199

Name of Owner RONALD McLeod Juris.:

Address of Property 1114 HANFIELD RD

Inspection Data:

Tank Material Concrete

Total Length of Drainfield 2-12 x 30 / 5-50'

Number of Lines 13 @ 30 50FT

Cover Depth 12-20

Water Supply Source Well

Distance to Water Source 30

Excavation Inspected 9-12-89

Tank(s) Inspected 9-12-89

Wash Line Inspected 9-12-89

High Water Alarm Inspected

PLOT

Design: CTR#

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: Cover up Tank, 4 Beds - 9-12-89 - Washing Machine Line in Fair Soil - Other beds in Extra.

Willard B. Ramsey
Environmentalist

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

PRESENTED FOR REGISTRATION

89 AUG -9 AM 10:07

ALICE A. POWERS
REGISTER OF DEEDS
MECKLENBURG CO., N.C.

COPY

FILE NO. 19413

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

ACKNOWLEDGEMENT OF REQUEST BY OWNER FOR RECLASSIFICATION OF SITE FROM "UNSUITABLE" TO "PROVISIONALLY SUITABLE" UNDER 10 NCAC 10A .1948(c)

The undersigned, ROXANNE MCLEOD AND RONALD LEE MCLEOD

owner of property located at 1114 HAWFIELD RD., CHARLOTTE, N.C. 28214

("the site") and described in an instrument recorded in Book 6074 at Page 0539, Mecklenburg Public Registry, hereby acknowledges that he applied to the Mecklenburg County Department of Environmental Health ("the Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 10 NCAC 10A .1934 et seq; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested pursuant to 10 NCAC 10A .1948(c) that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data and other information which indicate to the Department that the septic tank system proposed by the undersigned can reasonably be expected to function satisfactorily and thus that the findings specified in 10 NCAC 10A .1948(c)(1), (2), and (3) can be made; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is his responsibility and that neither the Department nor its officials, employees or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

The undersigned further agrees for his heirs and assigns that, in the event any septic tank system installed under authority of the aforesaid permit fails to perform adequately in any respect, he will take whatever measures are required to correct same; or if such is impossible he will discontinue use of said system immediately.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

This 9th day of AUGUST, 19 89.

Roxanne McLeod (SEAL)
ROXANNE MCLEOD

(SEAL)
RONALD LEE MCLEOD

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, Carol E. McKissick, a Notary Public for said County and State, do hereby certify that Roxanne McLeod & Ronald Lee McLeod personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 9th day of August, 19 89.

Carol E. McKissick
Notary Public

My Commission Expires: 3-15-93

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 19413 DATE: 9/15/89
P.I.N. TC: 053-053-093 ☐ L ☒ CRT
SERIAL № 12195

Name of Owner McLeod, Ronald Juris.:
Address of Property 1114 Hawfield Rd

Inspection Data:

Tank Material PCC
Total Length of Drainfield 480
Number of Lines 2-12x80 Beds @ 80
Cover Depth 10"
Water Supply Source well
Distance to Water Source >50
Excavation Inspected 9/15/89
Tank(s) Inspected 9/15/89
Wash Line Inspected 9/15/89 (15x50') 250' line
High Water Alarm Inspected 9/15/89

PLOT

Design: 1989, 1500 ST, 1000 DT, MD, 1440SFB, 12"G.6"S CTR# 68
750 WL 2190 Total with master line

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: System designed for 3 bedroom house ~~house~~

Phillip S. Walker
Environmentalist

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