Date Received 8-10-73

MECK COUNTY HEALTH DEPT. RECEIVED AUG 1 1973 ENVIRONMENTAL HEALTH DIVISION

ICAR(S) Application No 6827

T C No

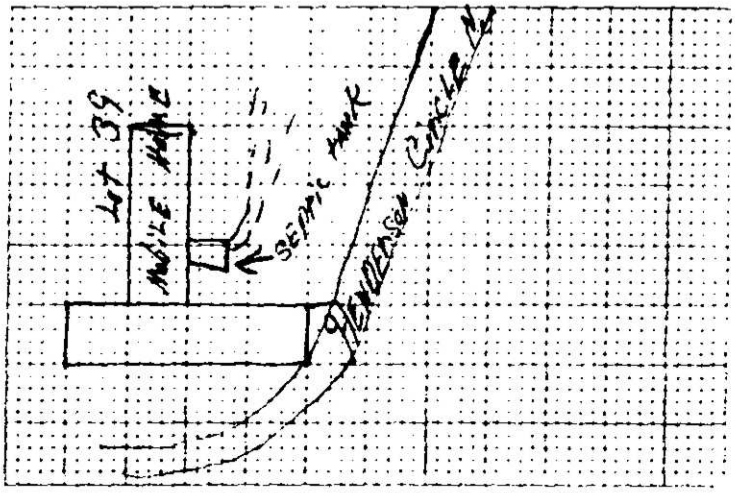
Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

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 Health Department 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



4 No of Bedrooms 2

5 Income / One Wage Earner

Employee

6 Washing Machine Yes ✓ No

7 Garbage Disp Yes ✓ No

8 Dishwasher Yes ✓ No

9 Water Supply

A Individual Well ✓

B Government

C Community

1 Well

2

Sewage System

A Public sewer Yes ✓ No

B Individual

Community sewer Yes No

11 FHA Case No

12 VA Case No

13 PLOT PLAN (ACCURATELY DIMENSIONED) (DANCY HOMES, INC.)

13 NAME OF OWNER Dancy (Last) A. (First) F (Middle)

14 ADDRESS OF OWNER 1443 S. Blvd - Charlotte, N.C.

15 PHONE NO Home 366-2085 Office 334-2706

16 LOCATION OF SYSTEM Henderson Circle (Street or County Road) N.C.

17 SUBDIVISION Lot No 39 Block No

Map Book No Page No.

18 DEED REFERENCE — DEED BOOK 2997 AT PAGE 408

19 HAS A PERCOLATION TEST 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.

8/8/73 Dancy Homes, Inc.

DATE OF APPLICATION OWNER

REV 5-1 E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 4177

ICAR (S) Permit No. 6822

P.I. T. C. No. 037 [illegible]

Map Date

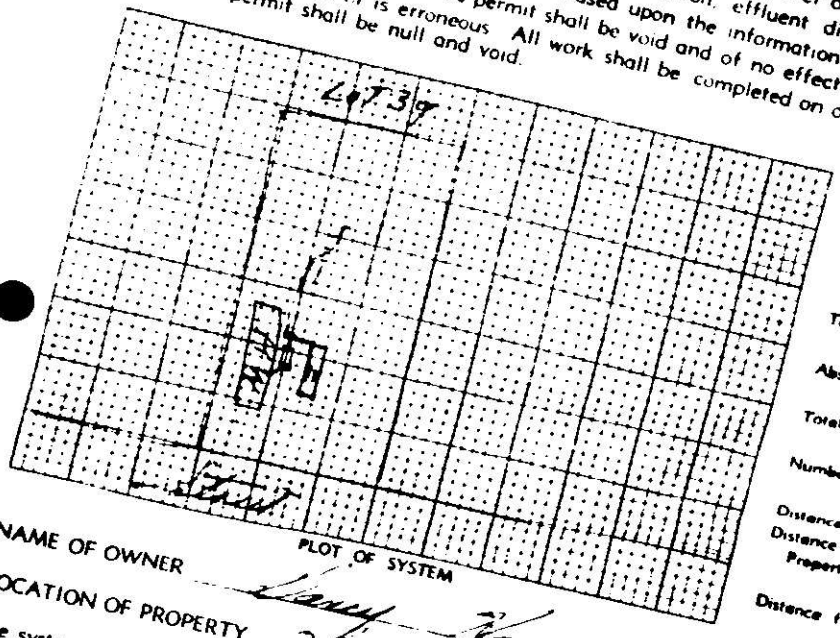
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTRUCTION, 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 waste with 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 6822 dated 12 Apr 73 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 12 Apr 73, after which date this permit shall be null and void.



Percolation Rate

Liquid Capacity of Tank

Tank Construction PC

Absorption and/or Nitrification Lines

Total Line Lenght 100'

Number of Lines 2 Cs 'x 17 'x 48")

Distance from House 10'

Distance from Property Line 10'

Distance from Well

NAME OF OWNER Larry Harris + Son

LOCATION OF PROPERTY Thurman Rd N (Lot 39)

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used

Comments: Town Code (Cat)

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 section head of the Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

FORM NO E 5 4 1 71

HEALTH DEPARTMENT'S COPY

Date Received 8-10-73

RECEIVED
AUG 1 1973

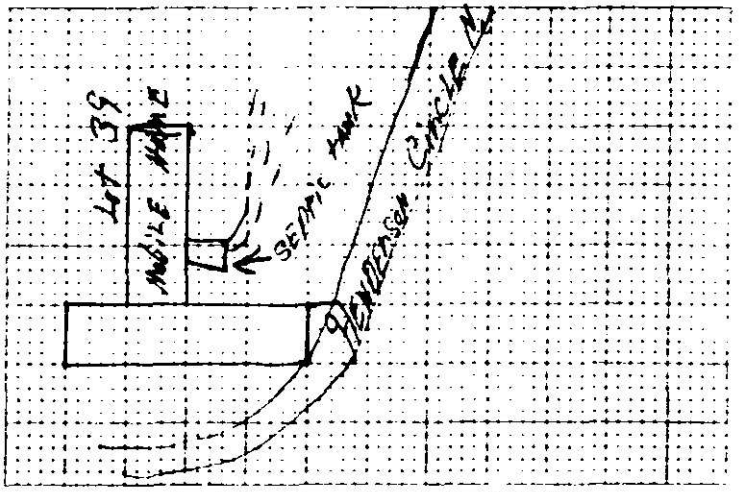
ICAR(S) Application No 6827
T C No
Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
SUBSURFACE HEALTH DIVISION

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 Health Department 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)

4) No. of Bedrooms 2
5) Business Use — No. of 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
2) Governmental
Sewage System
A) Public sewer — Yes ✓ No
B) Individual Septic Tank
C) Community sewer — Yes No
11) FHA Case No
12) VA Case No

(DANCY HOMES, INC.)

13) NAME OF OWNER Dancy (LAST) A. (FIRST) F. (MIDDLE)
14) ADDRESS OF OWNER 1443 S. Blvd - Charlotte, N.C.
15) PHONE NO Home 366-2085 Office 334-2706
16) LOCATION OF SYSTEM Henderson Circle N. (STREET OR COUNTY ROAD)
17) SUBDIVISION Lot No 39 Block No
Map Book No Page No
18) DEED REFERENCE — DEED BOOK 2997 AT PAGE 408
19) HAS A PERCOLATION TEST 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.

8/8/73
DATE OF APPLICATION

Dancy Homes, Inc.
OWNER

REV. 10 E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 4177

Date Issued 13 Aug 73

ICAR (S) Permit No. 6827

P/S T. C. No. 037-21203

Map Date

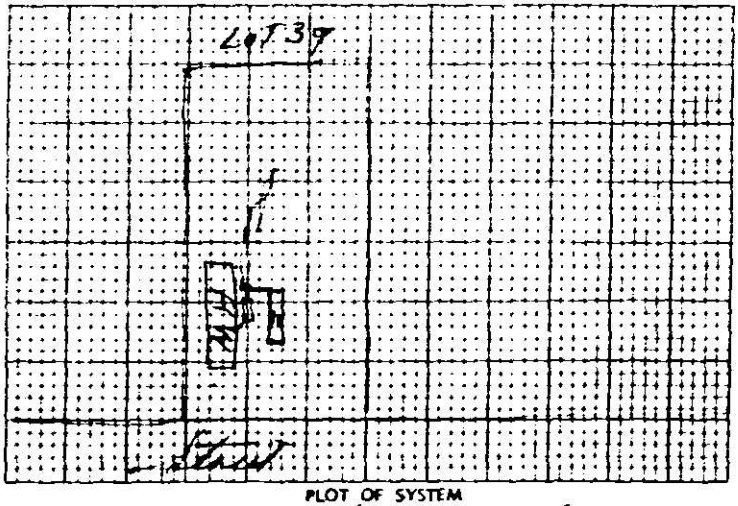
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTRUCTION, 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 6822 dated 10 Aug 73 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 13 Aug 73, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate ___

Liquid Capacity of Tank ___

Tank Construction PC

Absorption and/or Nitrification Lines

Total Line Lenght 100'

Number of Lines 2 (5' X 17' X 48")

Distance from House 10'

Distance from Property Line 10'

Distance from Well ___

NAME OF OWNER Larry Ramsey, Jr.

LOCATION OF PROPERTY Briarwood Circle N (Lot 39)

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used.

Comments: Trans Code (Cote)

Division or Section Head ___

Environmentalist Walt Sisk

* 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 Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

FORM NO. E 5-4-1 71

HEALTH DEPARTMENT'S COPY

Date Issued 16 Aug 73

Serial 3796

C of A (s) No. 6822

P.O T. C. No. 032-212-03

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Nancy Homes, Inc.
(LAST FIRST MIDDLE)

Location of Property Hedgeman Circle (Lot 39)

Application Number 6827 Permit Number 6827

Inspection Data:

Liquid Capacity of Tank _____ Tank Material Fiberglass

Total Length of Drain Tile 100' Number of Lines 2 (5 x 16' x 48")

Depth of Filter Material 48" Cover Depth 18"

Water Supply Source Community Distance from Water Source Community

Excavation Inspected 16 Aug 73 (DATE) Tank Inspected _____ (DATE)

Nitrification Field Inspected 16 Aug 73 (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 Board of Health 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: Bonnie Lake Court

Environmentalist

FORM NO. E-6-4-1-71

HEALTH DEPARTMENT'S COPY