


5418 CLOSEBURN RD

17125237

6/5/2007

duponbj

Groundwater and Wastewater Services File Imaging Project
May 2007
*Barcode Font = IDAutomationHC39M*

# CERTIFICATE OF COMPLETION/OPERATION PERMIT

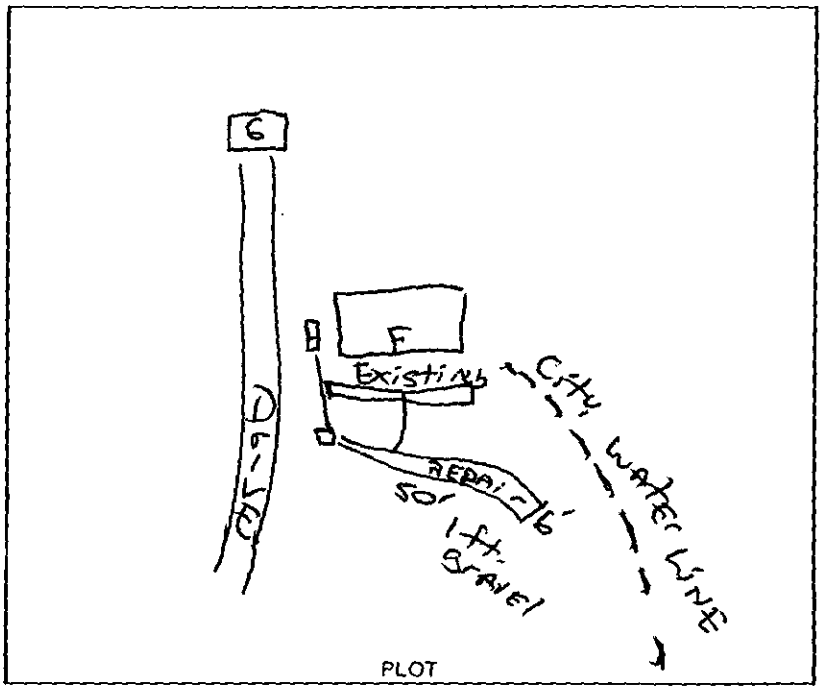
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 5776-A DATE: 7/11/89
TC: 171-252-37 ☐ L ☐ CRT
SERIAL № 12022
12825

Name of Owner Robert Furr Jr. Juris.: Char.
Address of Property 5418 Closeburne Rd.

**Inspection Data:**

Tank Material PCC
Total Length of Drainfield 50'
Number of Lines 1 @ 50'
Cover Depth 24"
Water Supply Source City
Distance to Water Source 10'+
Excavation Inspected YES
Tank(s) Inspected Y 1500 GAL.
Wash Line Inspected —
High Water Alarm Inspected —




Design: 1989, $1,500, Conv, 300 SFB, 12" G 3 Bedrom. CTR# 140
Conv. Repair

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: 1989, 1500, Conv, 300 SFB 12" G (3 bedrm.)

Tim Whittaker B.S.
Environmentalist

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

# INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

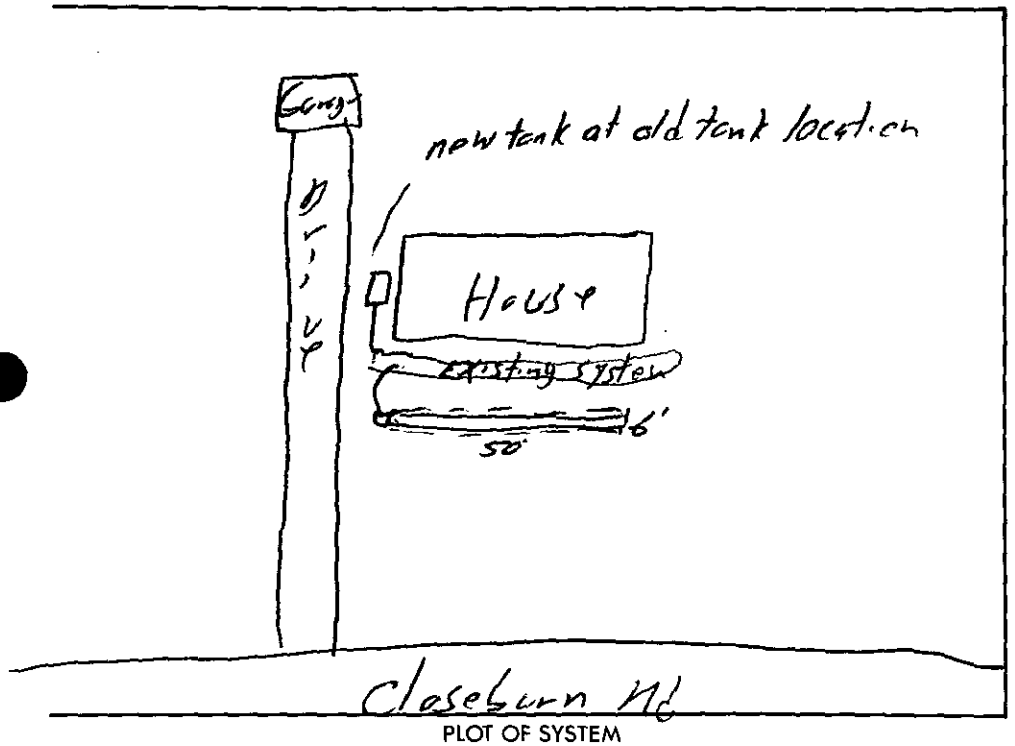
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 5776-A DATE: 6-29-89

TC: 171-252-37 ☐ L

SERIAL № 12805

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 5-26-89. All work shall be completed on or before 7-20-89, 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 — gallons

Tank Construction pcc

Absorption and/or Nitrification Lines:

Trench Width 6 feet

Total Line Length 100' feet

Number of Lines Two

Depth of Stone 12 inches

Distance from House 5' feet

Distance from Property Line 10' feet

Distance from Well c.f.l feet

NAME OF OWNER Robert Furr Jr.

LOCATION OF PROPERTY 5418 Closeburn Rd.

Comments: Bed 50'x6'x12" stone, tie into existing system
New 1500 Gal septic tank, Pump, remove old tank

Jim Ervin
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.

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

# 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: 5776A

TC: _____

SERIAL: No. 18494 ☐ LPC ☐ CRT

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.
MAY 2[illegible]
ENVIRONMENTAL HEALTH DIVISION

## JOB LOCATION

① ADDRESS: 5418 (STREET NO.) Closeburn (STREET) Rd. ② FILE: _____

③ JURISDICTION: _____ ④ TAX PARCEL NO.: 171-[illegible]2 37

⑤ SUBDIVISION: _____ ⑥ LOT: _____ ⑦ BLOCK: _____

## OWNER

⑧ NAME: Robert (FIRST) C. (MIDDLE) Furr Jr. (LAST)

⑨ MAILING ADDRESS: 5418 Closeburn Rd.

⑩ CITY: Charlotte ⑪ STATE: N.C. ⑫ ZIP: 28210

⑬ PHONE: (WORK) 525-9093 ⑭ (HOME) 553-9299

## 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 ㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 3 ㉕ Type? _____

㉓ Maximum occupancy? 6 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 on the property for the purpose of processing this request.

Signed: [signature]

Date: 5-26-89

## 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.

_____ / _____
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.

# Mecklenburg County
## Health Department

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


May 17, 1989

Robert C. Furr
5418 Closeburn Road
Charlotte, NC 28210

Dear Mr. Furr:

During a recent investigation of your property at 5418 Closeburn Road (parcel 171-252-37), Charlotte, North Carolina, it was found that the septic tank system was not functioning properly and that sewage was leaking to the surface of the ground, creating a public health hazard. This is in violation of Article 11 of Chapter 130A of the General Statutes of the State of North Carolina and the regulations adopted by the Mecklenburg County Board of County Commissioners.

You are hereby given notice to correct this situation by June 18, 1989. Failure to comply with this notice will result in legal action being taken against you.

An application to repair is enclosed for your convenience. You must fill out the application to repair and contact me to arrange an appointment immediately. I can be reached at 376-4603 between 4:00-5:00 p.m.

Sincerely,

Ralph Nilles, R.S.

Ralph Nilles, R.S.
On Premises Waste Disposal & Water Supply Section


Environmental Health Division
1200 Blythe Boulevard • Charlotte, North Carolina 28203 • (704) 376-4603

~~WELL WATER REPORT~~ Prepared by: RN

Link=alpha Shell=b:shellwat.txt Source=b:parlib.txt Fill-in=b:fidwat.txt

241 251 271 201 ___ ___ ___ ___ ___ ___

!naa! Name: MR. ROBERT C. FURR

Address: 5418 CLOSE BURN ROAD

Address:

City,State,Zip: CHARLOTTE, NORTH CAROLINA 28210

Attention: ATTN:

!salutation! Dear MR. FURR

!site! SAME.
Street No. Street City

!day! JUNE 18TH 1989.