Date Received 2/29/80 SEE INSTRUCTIONS ON BACK

ICAR(S) Application No. 16695

T. C. No. 049-055-04

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 _____
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 Riccio (LAST) Sam + Eva (FIRST, MIDDLE)

14) ADDRESS OF OWNER 1120 S.E. 12th Ave, Deerfield Bch. Fla. 33441

15) PHONE NO. Home 305-427-6903 Office 305-427-3121

16) LOCATION OF SYSTEM 6417 McGill Street (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. — Block No. —

Map Book No. 49 Page No. 5

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? ____YES N/A ____NO DATE RUN _____

20) PTR NUMBER (See Instructions) 1646 ?

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.

2/25/80
DATE OF APPLICATION

Eva Riccio
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial 3707

ICAR (S) Permit No. 16695

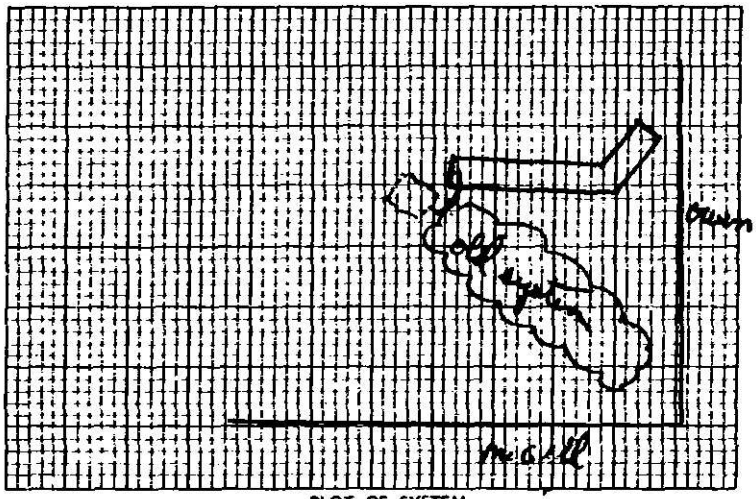
Date Issued 29 Feb 1980

T. C. No. 047-055-04

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 16695, dated 2/21/80 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 20 Mar, 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 400'

Number of Lines 4

Distance from House 10'

Distance from Property Line 10'

Distance from Well city

NAME OF OWNER Sam Rucio

LOCATION OF PROPERTY 6417 McGill 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.

12'x100'x17" stone

Division or Section Head

Environmentalist Steve Wad

* 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. 16695

Serial 3467

Date Issued 7 Mar 1980

T. C. No. 049-055-04

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL HEALTH DIVISION

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

Name of Owner Ricci (LAST) Sam (FIRST) (MIDDLE)

Location of Property 6417 McGill St.

Application Number _____ Permit Number 16695

Inspection Data:

Liquid Capacity of Tank Repair Tank Material —

Total Length of Drain Tile 400' Number of Lines 4

Depth of Filter Material 17" Cover Depth 24"

Water Supply Source → Distance from Water Source city

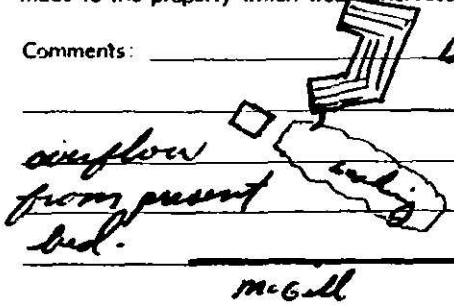
Excavation Inspected — (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 7 Mar (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: 12'x100'x17" stone



Steve Wood
Environmentalist

EHD-5-76

Environmental Health Department's Copy

Date Received 28 Jun 83

RECEIVED
JUN 29 1983
ENVIRONMENTAL HEALTH

ICAR (S) Application No. 6695

T. C. No. 244-055-04

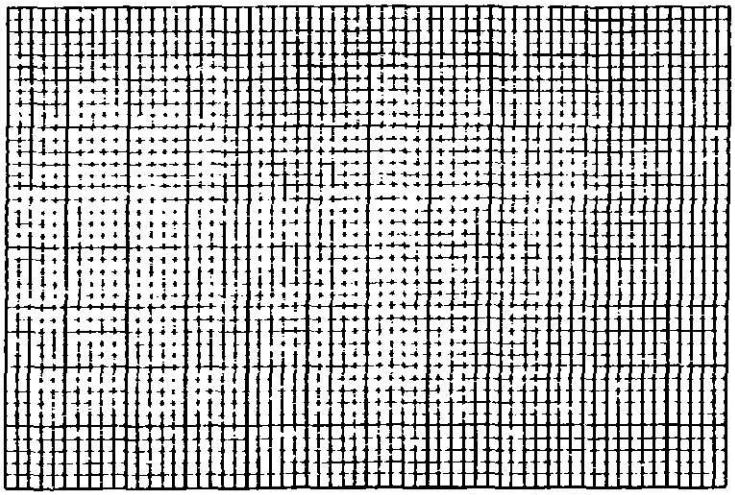
Map Date _____

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 _____
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 Young (LAST) Richard (FIRST) L. (MIDDLE)

14) ADDRESS OF OWNER 6300 N Tryon

15) PHONE NO. Home 596-1211 Office _____

16) LOCATION OF SYSTEM 6417 McGee Pl. (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.

June 27-83
DATE OF APPLICATION

Betty R. Smith
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 6377

Date Issued 28 June 83

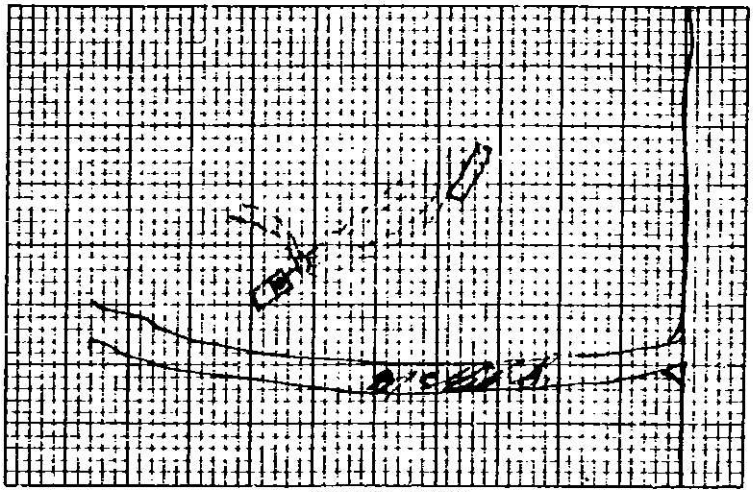
ICAR(S) Permit No. 16695

T. C. No. 049-055-04

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 16695, dated _____ 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 _____, 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 _____

Number of Lines 2

Distance from House >10'

Distance from Property Line >10'

Distance from Well >100'

NAME OF OWNER Cheung, Richard F.

LOCATION OF PROPERTY 6417 McAlpine Rd

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: Tank to be pumped; siphon will be replaced & extended an additional 150' when line put in 6/20 "ok" ek

_____ Division or Section Head

W. R. Kelly 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. 16695

Date Issued 29 Jun 83 **Serial** 5940 T. C. No. 049-055-04

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner Young, Richard T. (LAST, FIRST, MIDDLE)

Location of Property 6417 20th Hill Street (Blair MHP)

Application Number 16695 Permit Number 16695

Inspection Data:

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile 200' Number of Lines 2

Depth of Filter Material 60" Cover Depth 15-18"

Water Supply Source Well Distance from Water Source 100'

Excavation Inspected 28 Jun 83 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 28 Jun 83 (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: Inlet 6'x20'x60"
Siphon Bell was removed, and Plastic system & replaced.

Environmentalist

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Received 1-30-84

RECEIVED BACK
JAN 30 1984
ENVIRONMENTAL HEALTH

ICAR (S) Application No. 16695

T. C. No. 049-055-04

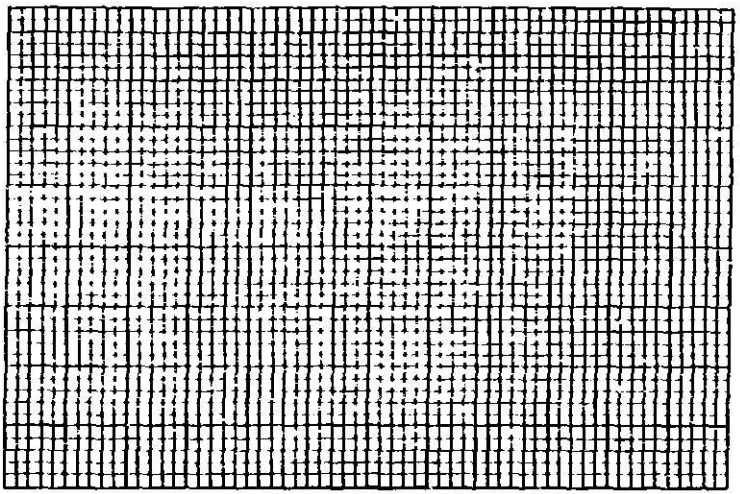
Map Date

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) X Alter or Repair an individual septic tank wastewater treatment system with a subsurface, soil absorption, effluent discharge.



3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home X Yes ___ No
Residence ___ Yes X No

4) No. of Bedrooms 3

6) Business Use — Max No Employees ___

6) Washing Machine ___ Yes X No

7) Garbage Disposal ___ Yes X No

8) Dishwasher ___ Yes X No

9) Water Supply
A) Individual Well ___
B) Governmental System X
C) Community System:
1. Well source ___
2 Governmental source ___

10) Sewage System:
House located within 200 feet of public sewer ___ Yes X No
House located within 200 feet of community sewer ___ Yes X No

11) FHA Case No. ___

12) VA Case No. ___

13) NAME OF OWNER Carolina Bel Air Corp. (LAST FIRST MIDDLE)

14) ADDRESS OF OWNER 6300 N Tryon St - Charlotte, N.C.

15) PHONE NO. Home 596-1211 Office Same

16) LOCATION OF SYSTEM 6417 McGill St - (STREET OR COUNTY ROAD)

17) SUBDIVISION Charconwright Lot No. ___ Block No. ___

Map Book No. 6 Page No. 87

18) DEED REFERENCE — DEED BOOK 4196 AT PAGE 234

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.

Jan. 26 1984
DATE OF APPLICATION

Betty R. Smith
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 6925

Date Issued 7-1-54

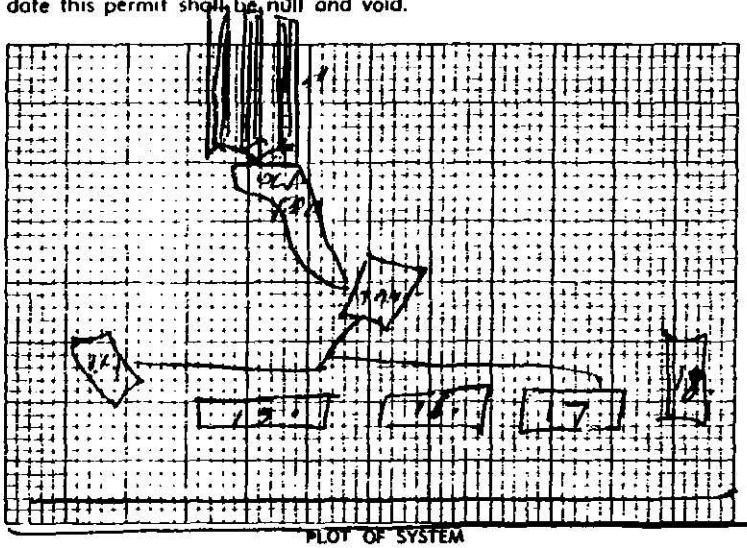
ICAR(S) Permit No. 16695

T. C. No 092-05

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, V 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 16695, dated 1-26-54 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 _____, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate 11 11-13

Liquid Capacity of Tank Repair

Tank Construction Repair

Absorption and/or Nitrification Lines:

Total Line Length 300 in Ea

Number of Lines Six

Distance from House 75 FT

Distance from Property Line 20 FT

Distance from Well City

NAME OF OWNER CAROLINA BEL-AIRE CORP

LOCATION OF PROPERTY 6417 McGILL 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.

Three Beds to be 50FT x 6FT x 18 inches Stone - Lay of Stone over -

Comments:

B. Hardwick
Division or Section Head

Ralph Wallace
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. 16695

Date Issued 2-2-84 Serial 6417 T C No 042-055-09

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

OPERATION PERMIT
CERTIFICATE OF APPROVAL
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner CAROLINA BEL-AIRE CORP
LAST FIRST MIDDLE

Location of Property 6417 McGILL ST

Application Number 16695 Permit Number 16695

Inspection Data:

Liquid Capacity of Tank Repair Tank Material Repair

Total Length of Drain Tile 300 LIN-FT Number of Lines SIX

Depth of Filter Material 18 inches Cover Depth 2 FT

Water Supply Source City Distance from Water Source City

Excavation Inspected 2-2-84 DATE Tank Inspected 2-2-84 DATE

Nitrification Field Inspected 2-2-84 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, X 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: _____

Rafael Miller
Environmentalist

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 7/18/85 RECEIVED JUL 18 1985 ENVIRONMENTAL HEALTH

ICAR (S) Application No. 16695

T. C. No. 049-055 04

Map Date L

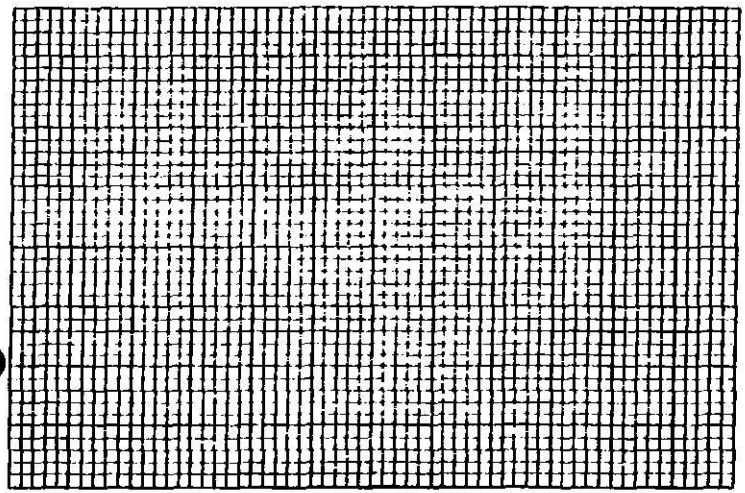
A trench for tile was installed on 7-17-85

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 ___

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 City
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 Mabry (LAST) Stephen (FIRST) Thomas (MIDDLE)

14) ADDRESS OF OWNER 5509 Airport Drive

15) PHONE NO. Home 366-9724 Office 392-5072

16) LOCATION OF SYSTEM 6329 McGill St. (STREET OR COUNTY ROAD)

17) SUBDIVISION Chuckan Heights Lot No. 1-12 36-47 Block No. B

Map Book No. 6 Page No. 87

18) DEED REFERENCE — DEED BOOK 4438 AT PAGE 502

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.

7-17-85
DATE OF APPLICATION

Steven Mabry
OWNER

EHD-S-76

Environmental Health Department's Copy