Date Received 3-17-83

SEE INSTRUCTIONS ON BACK
MAR 21 1983
ENVIRONMENTAL HEALTH

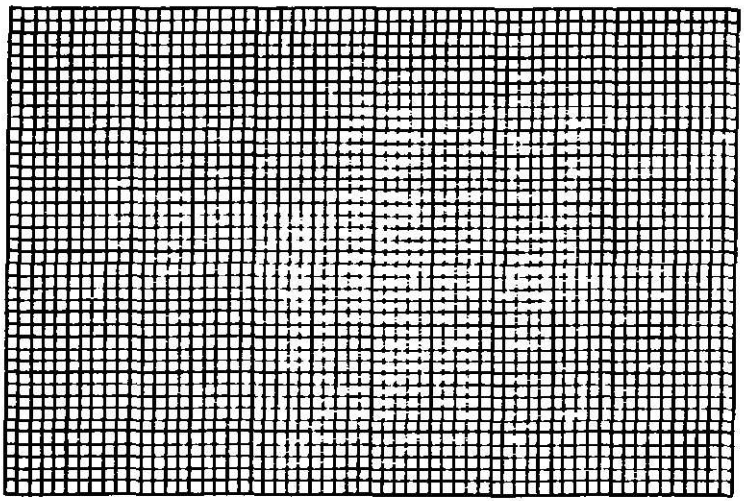
ICAR (S) Application No. 19466
T. C. No. 041-153-01
Map Date

# 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 4
5) Business Use — Max No Employees NA
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 O'Dillon (LAST) Myrtle (FIRST) S. (MIDDLE)
14) ADDRESS OF OWNER 2837 Cindy La. Charlotte, N.C. 28213
15) PHONE NO. Home 596-3151 Office 376-7551
16) LOCATION OF SYSTEM 2837 Cindy Lane (STREET OR COUNTY ROAD)
17) SUBDIVISION NA. Lot No. 58 Block No. F
Map Book No. 5 Page No. 382
18) DEED REFERENCE — DEED BOOK 1967 AT PAGE 640
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.

3-18-83
DATE OF APPLICATION

Myrtle S. O'Dillon
OWNER

EHD-5-76

Date Issued 3-22-83

Serial No. 6114

ICAR(S) Permit No. 19466

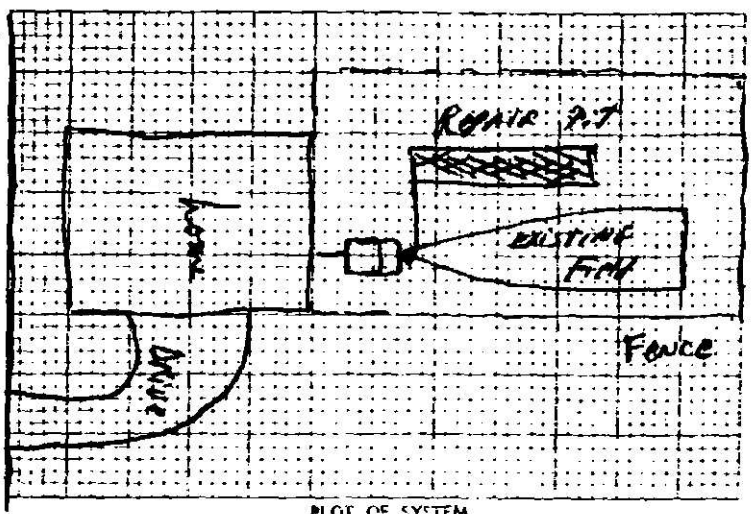
T. C. No. 041-153-01

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 19466 dated 3-18-83 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 4-15-83, after which date this permit shall be null and void.

Cindy Lane




PLOT OF SYSTEM

Permeability Rate Poor

Liquid Capacity of Tank _____

Tank Construction _____

Absorption and/or Nitrification Lines.

Total Line Length 150'

Number of Lines 2

Distance from House >5'

Distance from Property Line >10'

Distance from Well >50'

NAME OF OWNER ~~Mary~~ Myrtle S. O'Dillon

LOCATION OF PROPERTY 2837 Cindy Lane

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: Check connections from house to tank to D-box - solid pipe off D-box to repair pit 6 ft wide x 22½ ft long x 5 ft deep

Division or Section Head _____

Environmentalist R P Phelps

* 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. 19466

Date Issued 4-28-83 Serial 5791 T. C. No. 041-153-01

# MECKLENBURG COUNTY
# DEPARTMENT OF ENVIRONMENTAL HEALTH

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

Name of Owner O'Dillon (LAST) Myrtle (FIRST) S. (MIDDLE)

Location of Property 2837 Cindy ~~Pete~~ Lane

Application Number 19466 Permit Number 19466

**Inspection Date:** Repair

Liquid Capacity of Tank ____ Tank Material ____

Total Length of Drain Tile ~~200~~ 150' Number of Lines 2

Depth of Filter Material 5' Cover Depth 2'

Water Supply Source well Distance from Water Source >50'

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

Nitrification Field Inspected 4-28-83 (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 ____

B B Kelly
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY