Date Received 1/17/80

APT No 16465

T C No 215-13-13/L

Map Date JAN, 79

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER RALPH SQUIRES CONST CO INC
LAST FIRST MIDDLE

2) ADDRESS OF OWNER PO BOX 25178 ZIP 28212

3) PHONE NO Home ____ Office 5379553

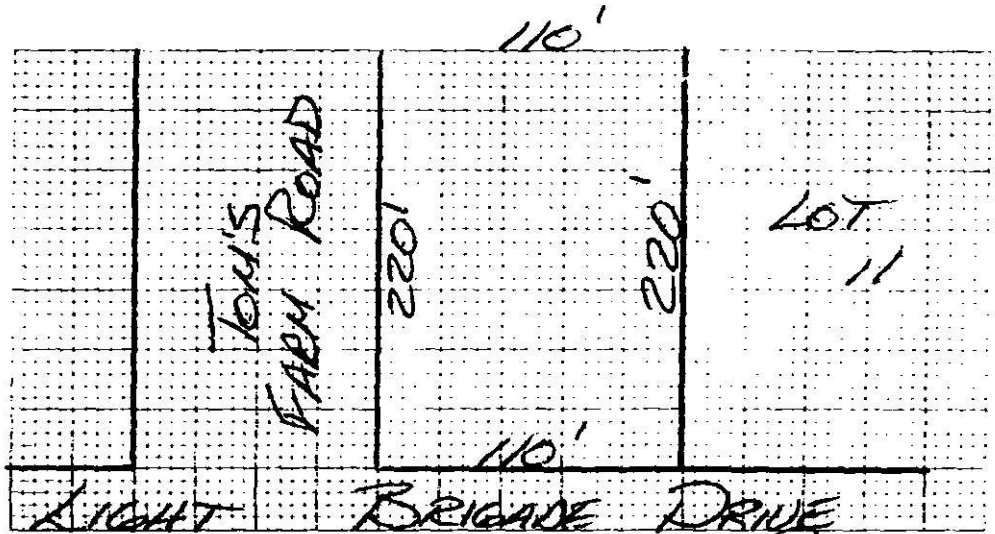
4) LOCATION OF PROPERTY LIGHT BRIGADE DRIVE
STREET OR COUNTY ROAD

5) SUBDIVISION WINDSOR LOT NO 12 BLOCK NO T

MAP BOOK NO ____ PAGE NO ____

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 on site inspection of the property described for the purpose of determining if the lot is suitable for the installation of ground absorption sewage treatment and disposal system with subsurface soil absorption effluent discharge.



7) ACCURATELY DIAGRAM & DIMENSION LOT

OWNER

EHD-5-76

Environmental Health Department's Copy

NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX II
SITE EVALUATION

S.I.R. No. 16465
T.C. No. PO 215-131-15/16

(Ground Absorption Sewage Disposal)

OWNER: RALPH SQUIRES CONST. CO. DATE REQUESTED: 1-17-80
ADDRESS: PO BOX 25178 PLAT NO:
COUNTY: MECK. 28212 LOT SIZE:
LOCATION OF SITE: LIGHT BRIGADE, DRIVE LOT 12 T.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) 2-10 U	S PS (U) Complex slopes	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2:1 Clay)	S (PS) Clayey U	S PS (U) Clayey To Saprolite	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) Blocky U	S PS (U) Mixed clays	S PS U	S PS U
4. SOIL DEPTH (inches)	S (PS) >48 U	S PS (U) <48	S PS U	S PS U
5. RESTRICTIVE HORIZONS (inches) (Impervious strata, Rock)	S (PS) NONE U	S PS (U) Saprolite	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S (PS) Adequate U	S PS (U) Slow	S PS U	S PS U
7. SOIL PERMEABILITY (percolation rate)	S (PS) Moderate U	S PS (U) Slow	S PS U	S PS U
8. OTHER (specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION	P. Suitable	Unsuitable		
10. SOIL SERIES	Cecil	Complex slopes (In Cecil & Helena)		

S - Suitable PS - Provisionally Suitable U - Unsuitable

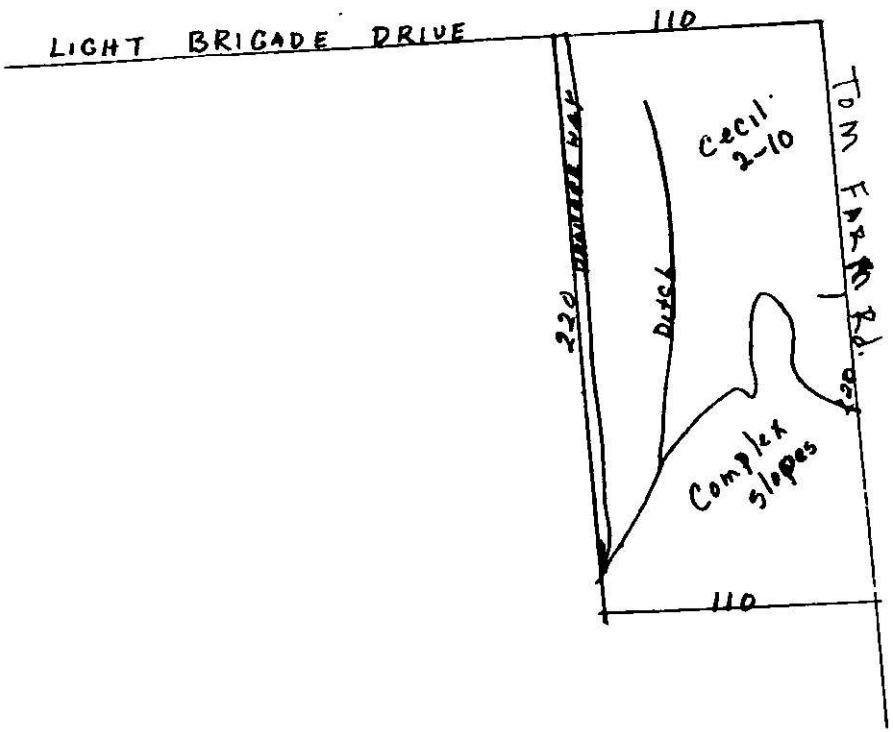
** See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope)

Recommendations/Comments: DUE TO SLOPE AND DITCH ON LOT, WILL BE DIFFICULT TO LOCATE A System By Gravity.

Described By: W. B. Ramsey
Title: Soil Scientist
Date: 3-12-80

DHS Form 2601
Sanitation
EHD 539 (2/80)

2


LIGHT BRIGADE DRIVE
110
220
Cecil
2-10
Ditch
Tom Farm Rd.
Complex
slopes
110

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NORTH CAROLINA 28203

SITE INVESTIGATION REPORT
INDIVIDUAL SEPTIC TANK SYSTEM
WITH SUBSURFACE,
SOIL ABSORPTION,
EFFLUENT DISCHARGE

S.I.R. No. 16165

T.C. No. po 215-131-15,16

DATE ISSUED March 26, 1980

NAME OF OWNER Ralph Squires Const. Co.

ADDRESS OF OWNER PO Box 25178, Charlotte, NC 28212

LOCATION OF PROPERTY Light Brigade Drive, Lot 12, Block T, Windrow

As determined under the Rules and Regulations promulgated by the Commission for Health Services, Division of Health Services, North Carolina Department of Human Resources, Raleigh, North Carolina, the soils on the lot described above were found to be unsuitable for the installation of an individual septic tank, soil absorption system, due to the following reason:

Due to complex slopes, please submit plot plan of proposed septic tank system and residence location.

John R Adkisson

John R. Adkisson, Environmentalist

EHD 8
(revised 3/25/80)

SEE INSTRUCTIONS ON BACK

Date Received 4-12-83

ICAR(S) Application No. 16465

T 215-131-31

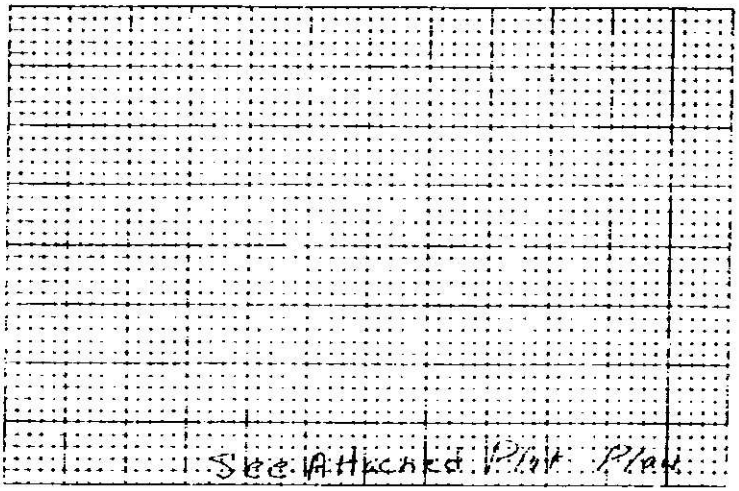
Map Date

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) X 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 X Yes ___ No
4) No of Bedrooms 3
5 Business Use — Max No Employees ___
6 Washing Machine X Yes ___ No
7 Garbage Disposal ___ Yes X No
8 Dishwasher X Yes ___ No
9 Water Supply
A) Individual Well X
B) Governmental System ___
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 N/A

13) NAME OF OWNER Ralph (LAST) Squires (FIRST) Const. Co. (MIDDLE)

14) ADDRESS OF OWNER P.O. Box 2578

15) PHONE NO Home ___ Office 537-9553

16) LOCATION OF SYSTEM 3.01 Night Brigade (STREET OR COUNTY ROAD)

17) SUBDIVISION Windsor II Lot No. 6 Block No. T
Formerly Lot 12 Block T

Map Book No ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ___ NO DATE RUN 3/26/80

20) PTR NUMBER (See Instructions) 16465

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.

4-7-83
DATE OF APPLICATION

Larry Schuster
OWNER

EHD-5-76 ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued 4-27-83

Serial No. 6390

SIR No. 16465

T C No PO 215-131-31

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

... AGEMENT PERMIT

TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Ralph Squires Construction Company
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P. O. Box 25178, Charlotte, NC ZIP 28212

LOCATION OF LOT 2101 Light Brigade Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Windrow II LOT NO. 6 BLOCK NO. T

MAP BOOK NO. PAGE NO

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, on an on-site inspection of the said lot; and upon the information supplied in the "Application for an Installation, Construction, Alteration, and/or Repair Permit", number 16465. This approval is subject to the following terms and conditions:

1. That the nitrification field be installed, constructed, altered and/or repaired in the same area where the soil investigation was run.
2. That an "Installation, Construction, Alteration, and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altered, and/or repaired and that the system be installed in accordance with same

This approval may be revoked and the building inspection department requested to revoke any building permit(s) which have been issued to authorize construction on the said lot if at any time it is determined that any information contained in the "Application for an Installation, Construction, Alteration, and/or Repair Permit" is not correct or is untrue or that the septic-tank system is not being installed, constructed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit.

Ralph Mills
Environmentalist

Mike Sexton
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Serial No. 6423

ICAR(S) Permit No 16465

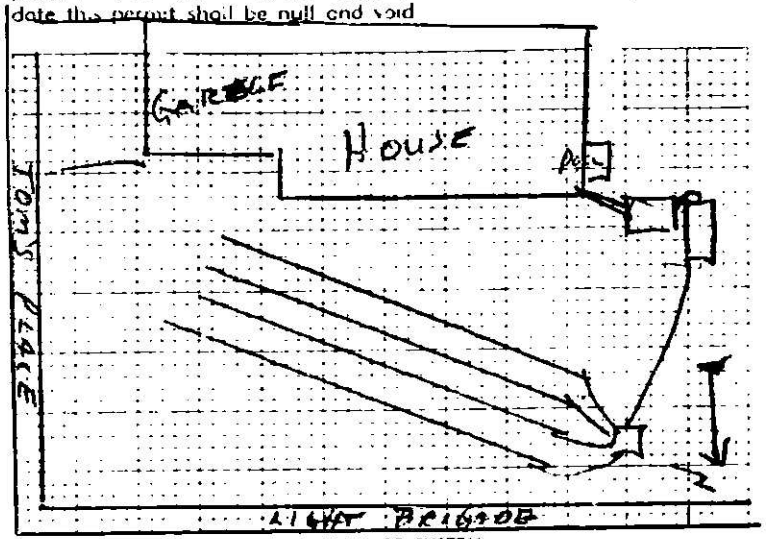
Date Issued 7-13-83

Tax Map No 215-131-

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 X 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 16465 dated 7-13-83 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 Aug 30th 1983, after which date this permit shall be null and void



PLOT OF SYSTEM

Permeability Rate PS INA

Liquid Capacity of Tank 1500 gal

Type Construction Pre Cast Concrete

Absorption System Size

Total Line Length 300 LIN FT

Number of Lines FOUR

Length of Lines 100 FT

Depth of Trench 25 FT

Distance from Property Lines KEEP 100 FT NOT IN USE

NAME OF OWNER RALPH SQUIRES INC.

LOCATION OF PROPERTY 2101 LIGHT BRIGADE DRIVE

This 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 shall be issued by the Environmental Health Director before any system can be covered up or otherwise rendered unserviceable or can be used. The issuance of this permit does not in any way guarantee that the system permitted 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.

FOUR TRENCHES TO BE 75 FT - 3 FT X 12 inches - hay or straw cover. Grade lines plumb w/a into DIST BOX. LIFT STATION

Comments

Ralph Mills
Environmentalist

Division or Section Head

* 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 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. 16465

Date Issued 8-10-83 **Serial** 6046 T C No 215-131

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner RALPH (LAST) SQUIRES (FIRST) CONST CO (MIDDLE)

Location of Property 2101 LIGHT BRIGADE DRIVE

Application Number 16465 Permit Number 16465

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material Pre Cast Concrete

Total Length of Drain Tile 400 lin Ft. Number of Lines FOUR

Depth of Filter Material 12 inches Cover Depth 18 inches

Water Supply Source well Distance from Water Source Keep 100 FT Not in Jet

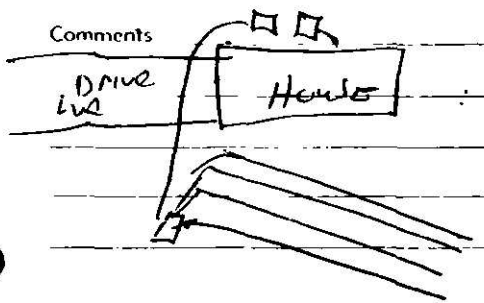
Excavation Inspected 8-10-83 (DATE) Tank Inspected 8-10-83 (DATE)

Nitrification Field Inspected 8-10-83 (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 X 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 TANK & LIFT STATION changed to Stub out over - DIST Box changed to be closer to LIFT Station



Ralph Willis
Environmentalist

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 10-16-89

ICAR(S) Application No. K965

T C No. P0215131 31

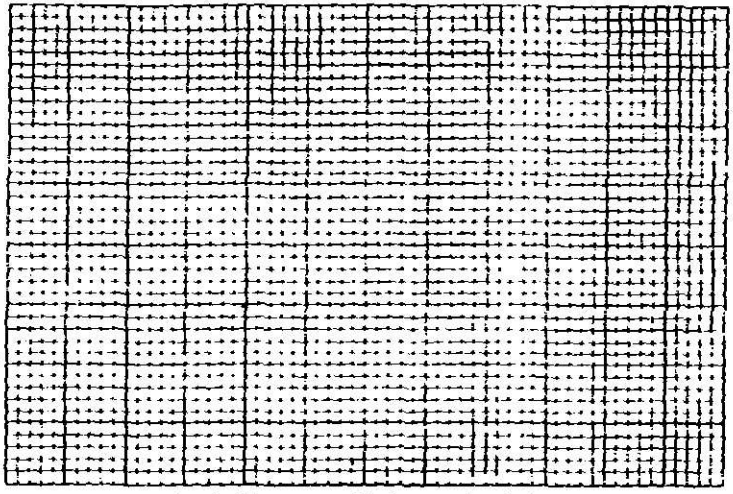
Map Date L

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 [illegible] (LAST) MICHAEL (FIRST) FLIT (MIDDLE)

14) ADDRESS OF OWNER [illegible] CAT BRIGADE DR. 7753

15) PHONE NO Home [illegible] Office 545-7745

16) LOCATION OF SYSTEM [illegible] (STREET OR COUNTY ROAD)

17) SUBDIVISION [illegible] Lot No. L Block No. T

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.

DATE OF APPLICATION

OWNER [signature]

EHD-S-76

Date Issued 10-16 04 Serial No. 07662 ICAR(S) Permit No. 16465

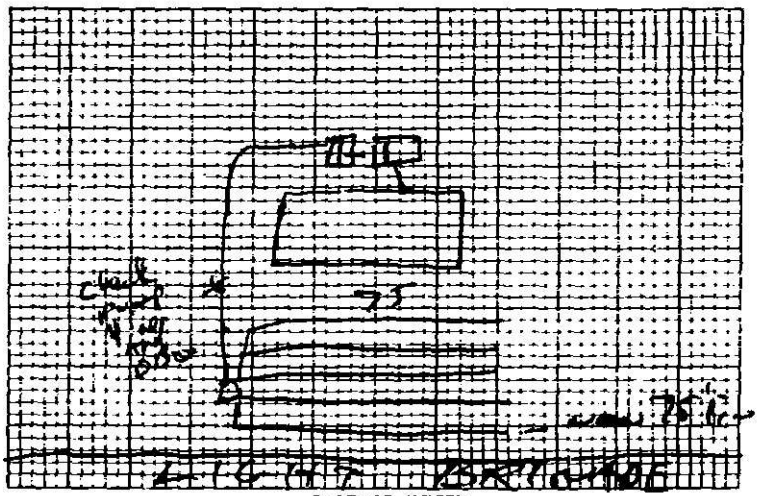
TC No 215 131 31

Map Date L

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 16465, dated 10-16-04 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 11-16-04, after which date this permit shall be null and void.

REPAIR



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank ___

Tank Construction ___

Absorption and/or Nitrification Lines

Total Line Length 75'

Number of Lines 1 x 75

Distance from House 5'

Distance from Property Line 10'

Distance from Well 50'

NAME OF OWNER DAVIS, MICHAEL F.

LOCATION OF PROPERTY 2101 LIGHT BRIGADE DR

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

1 line x 75' long x 3' wide x 12" stone

Comments: ___

Division or Section Head

Environmentalist Kelly Randall

* 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. 16465

Date Issued 3/5/85 **Serial** 7357 T C No 215-131-31 R L

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 Davis (LAST) Michael (FIRST) F (MIDDLE)

Location of Property 2101 Light Brigade Drive

Application Number 16465 Permit Number 16465

Inspection Data:

Liquid Capacity of Tank Repair Tank Material —

Total Length of Drain Tile 75' Number of Lines 1X75'

Depth of Filter Material 12" Cover Depth 2'

Water Supply Source Well Distance from Water Source 75'

Excavation Inspected 3/5/85 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 3/5/85 (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

Cynthia G. Bass
Environmentalist

EHD-S-76

Environmental Health Department's Copy

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY

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

(OFFICE USE ONLY)
FILE: 4465
TC: 215/131-31
L

JOB LOCATION

① ADDRESS: 2101 (STREET NO) Light Brigade Dr (STREET) ② FILE:
③ CITY: Matthews ④ TAX PARCEL NO.:
⑤ SUBDIVISION ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: Michael (FIRST) (MIDDLE) Davis (LAST)
⑨ MAILING ADDRESS: 2101 Light Brigade Dr.
⑩ CITY: Matthews ⑪ STATE: ⑫ ZIP: 28105
⑬ PHONE: (WORK) ⑭ (HOME)

REQUEST

This request is for a(n):

⑮ ☐ New installation permit
⑯ ☑ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
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?
㉖ Maximum number of employees?
㉔ Basement? ☐ yes ☐ no
㉗ Maximum number of seats?

WATER SUPPLY

㉙ Water supply from (present or proposed):

A ☑ Individual well
B ☐ Municipal system
C ☐ Community well
D ☐ Community system

㉚ 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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Michael Davis
Date: 1-19-85

㉘ Accurately dimensioned plot

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

Date Issued 7-19-85

Serial No. 08356

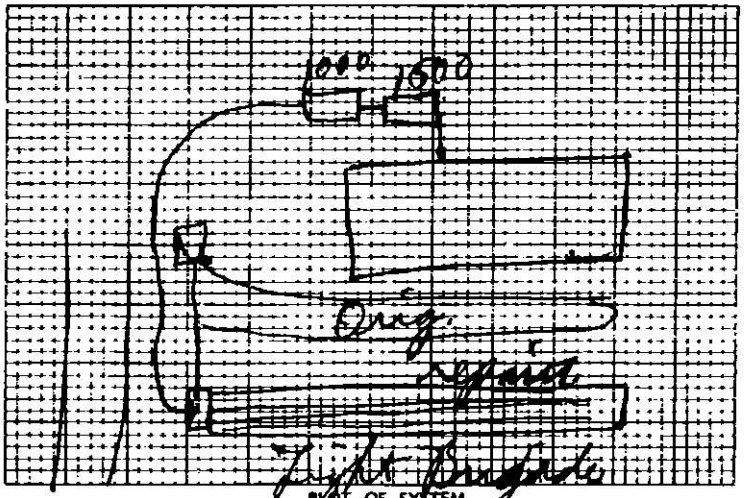
ICAR(S) Permit No. 16465

T & P No. 215-131-31

Map Date L

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 16465, 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 8-19, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate repair

Liquid Capacity of Tank _____

Tank Construction _____

Absorption and or Nitrification Lines

Total Line Length ~~180'~~ 195' 67

Number of Lines 3

Distance from House 5'

Distance from Property Line 10'

Distance from Well 150'

NAME OF OWNER Michael Davis

LOCATION OF PROPERTY 2101 Light Brigade Dr.

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: Used 9'X60'X17" stone - Install new D-box with supply line & feed back to orig. D-box

Division or Section Head

B. R. Ferguson
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. 16465

Date Issued 7-30-85 **Serial** 7742 T C No 215-131-31 PO L

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 Davis (LAST) Michael (FIRST) _____ (MIDDLE)

Location of Property 2101 Light Brigade Dr.

Application Number — Permit Number —

Inspection Data:

Liquid Capacity of Tank repair Tank Material _____

Total Length of Drain Tile 195' Number of Lines 3

Depth of Filter Material 17" Cover Depth 18"-24"

Water Supply Source well Distance from Water Source 750'

Excavation Inspected 7-30-85 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 7-30-85 (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 _____

D. R. Ferguson
Environmentalist

EHD-5-76