SEE INSTRUCTIONS ON BACK

Date Received 10-17-83

ICAR(S) Application No. 24128

T. C. No. 15-046-10

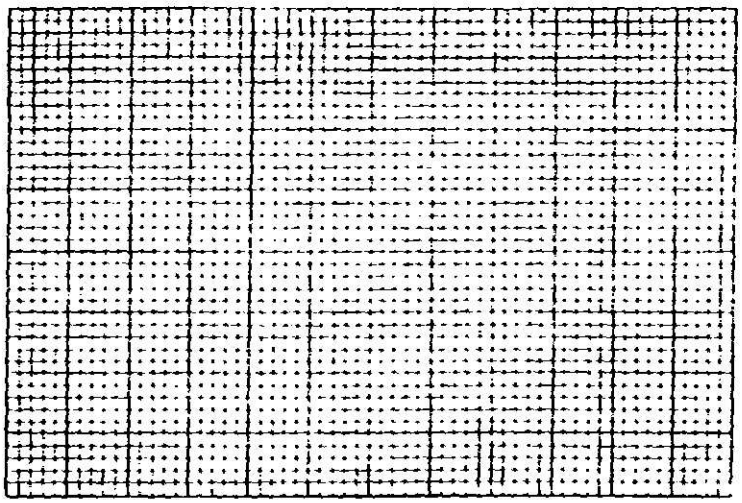
Map Date _____

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
5) Business Use — Max No Employees 10
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 Starnes (LAST), David & Lianne & Marian (FIRST, MIDDLE)

14) ADDRESS OF OWNER 3324 Helaird Ln Char. N.C. 28205

15) PHONE NO. Home 392-1214 Office SAME

16) LOCATION OF SYSTEM SAME (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.

Oct 17, 1983
DATE OF APPLICATION

Lianne B. Starnes
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 6739

Date Issued Oct 24th 1983

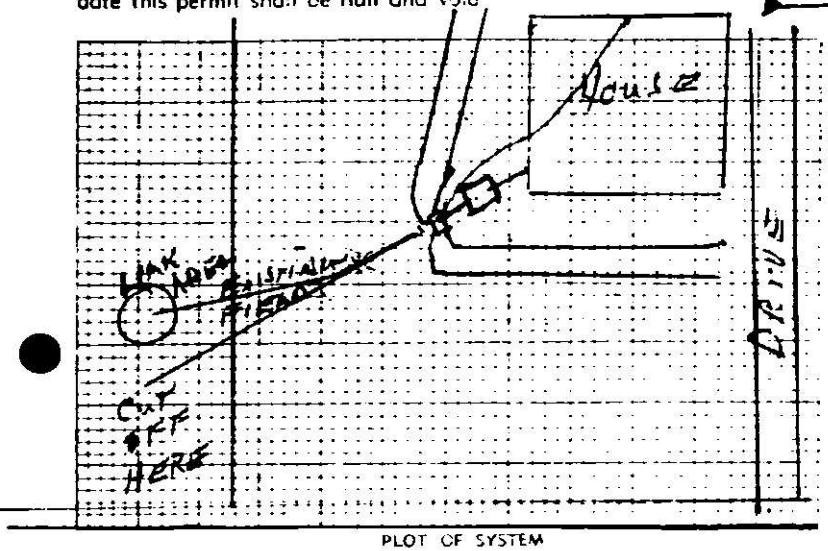
ICAR(S) Permit No. 20128

T C No 115-046-10

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, X 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 20128, dated 10-12-83 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 Nov 12 1983 after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate P S ZZZ

Liquid Capacity of Tank Repair

Tank Construction Repair

Absorption and/or Nitrification Line

Total Line Length 200 LIN FT

Number of Lines FOUR

Distance from House 10 FT

Distance from Property Line 10 FT

Distance from Well 80 FT

NAME OF OWNER STARNES, DAVID

LOCATION OF PROPERTY 3324 HOLABIRD 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: FOUR TRENCHES TO BE 50 FT X 3 FT X 12 inches STONE - May or Straw cover. grade - plumb into line into Dist Box. - use as much of existing System as possible

Division or Section Head

Rachel Willis
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.

-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

C of A (s) No. 20128

Date Issued 11/17/83 **Serial** 6230 T C No 115-046-10

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 Starnes (LAST) David (FIRST) ____ (MIDDLE)

Location of Property 3324 Holabird Ln

Application Number 20128 Permit Number 20128

Inspection Data:

Liquid Capacity of Tank Repair Tank Material Repair

Total Length of Drain Tile 203' Number of Lines 4

Depth of Filter Material 12" Cover Depth 1½'

Water Supply Source 80' well Distance from Water Source 80'

Excavation Inspected 11/17/83 (DATE) Tank Inspected ____ (DATE)

Nitrification Field Inspected 11/17/83 (DATE)

Washing Machine Line Inspected, If Applicable N/A (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 ____

Randy C Cook RS
Environmentalist

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY