SEE INSTRUCTIONS ON BACK

Date Received 7-13-84

ICAR(S) Application No. 21228

T. C. No. 001-134-21

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) 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 ___ Yes X 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 X Yes ___ 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 ___

13) NAME OF OWNER Tobias Clinton — (LAST / FIRST / MIDDLE)

14) ADDRESS OF OWNER Rt 2 Box 425

15) PHONE NO. Home 892-4132 Office 394-7387

16) LOCATION OF SYSTEM 2000 Roman Rd Lane (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 X 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.

7/13/84
DATE OF APPLICATION

Clinton Tobias
OWNER

EHD-S-76

Environmental Health Department's Copy

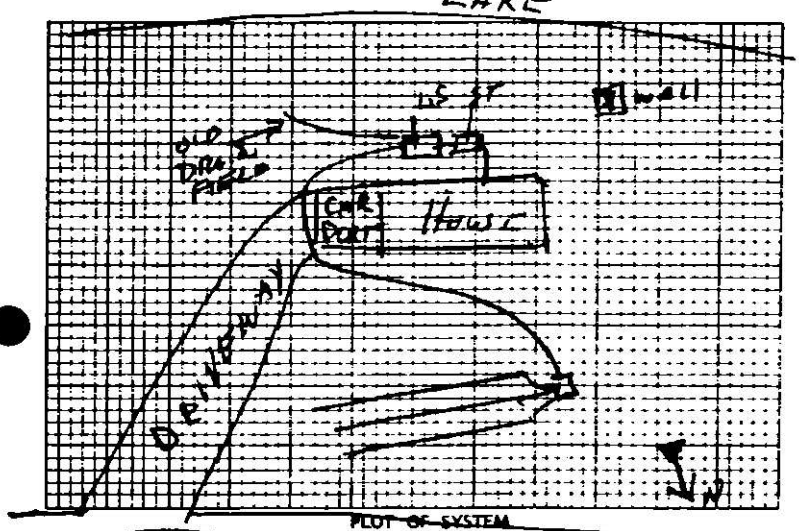
Date Issued JULY 13th 1984 Serial No. 07406 ICAR(S) Permit No. 21228

T C No 061-134-21

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, 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 21228, dated JULY 13th 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 14th 1984, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank ___

Tank Construction Repair

Absorption and or Nitrification Lines

Total Line Length 300 LIN. FT.

Number of Lines Three

Distance from House 15 FT

Distance from Property Line 50 FT

Distance from Well 150 FT.

NAME OF OWNER HOAG, ANDREW NORMAN COLONY LANE

LOCATION OF PROPERTY 20009 NORMAN COLONY 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.

THREE TRENCHES TO BE 100FT x 3FT x 12 INCHES STONE-hay or straw COVER-grade DDS- LIFT STATION WITH RISER

Comments: USE ADEQUATE PUMP FOR 25' L.I.T.

Division or Section Head

Ralph Mills

Environmentalist

* If this permit is for the installation or construction of a new system, it must be signed by the division or c 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. 21228

Date Issued Aug 24th 1984 Serial 6858 T C No 001-134-21

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

OPERATION PERMIT

CERTIFICATE OF APPROVAL

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

Name of Owner HOGUE, ANDREW (LAST, FIRST, MIDDLE)

Location of Property 20009 NORMAN COLONY LANE

Application Number 21228 Permit Number 21228

Inspection Data:

Liquid Capacity of Tank 1000 gal 2 LIFT STA Tank Material Precast Concrete

Total Length of Drain Tile 300 lin FT Number of Lines Three

Depth of Filter Material 12 inches Cover Depth 12 inches

Water Supply Source well Distance from Water Source 60 FT

Excavation Inspected 7-31-84 (DATE) Tank Inspected 8-3-84 (DATE)

Nitrification Field Inspected 7-31-84 (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 Y 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

Rebecca Miller
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT