

13731 S TRYON ST

6/5/2007

duponbj

Groundwater and Wastewater Services File Imaging Project
May 2007
Barcode Font = IDAutomationHC39M

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 5699A DATE: 9/8/89

TC: 219-124.03 ☐ L ☑ CRT

SERIAL № 11919

Name of Owner Creighton Mattie & G.L. Juris.:

Address of Property 13639 York Rd

Inspection Data:

Tank Material PCC

Total Length of Drainfield 480'

Number of Lines 5 @ 96'

Cover Depth 12"

Water Supply Source Well

Distance to Water Source 100 FT.

Excavation Inspected 9/8/89

Tank(s) Inspected 9/8/89

Wash Line Inspected

High Water Alarm Inspected

PLOT

Design: 1989 / 500 ST, 1440 SFT, 12"S, Am, Cecil CTR# 90

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☑ installed or constructed ☐ altered or repaired

☐ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The issuance of this

☐ Certificate of Completion ☐ Operation Permit

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 document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 10 NCAC 10A .1900 in addition to those listed below under "COMMENTS." This document 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: System designed for 3 bedroom home

Judy J. Kiser
Environmentalist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

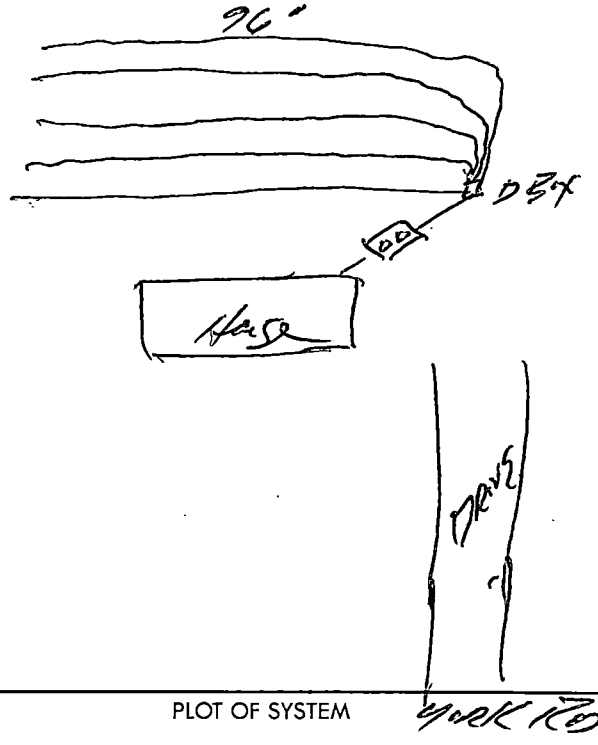
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 5679-A DATE: 8-22-89

TC: 21912403 ☐ L

SERIAL № 12950

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 the application dated 5-31-89. All work shall be completed on or before 9-22-89, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Department of Environmental Health before any system can be covered up or placed into service. 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank ——— gallons

Tank Construction RC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 480 feet

Number of Lines 5

Depth of Stone 12 inches

Distance from House >5 feet

Distance from Property Line >10 feet

Distance from Well >50 feet

NAME OF OWNER Matthew and James L Creighton

LOCATION OF PROPERTY 13639 York Road

Comments: 5 TRENCHES 96'x3'x12" STONE
MAXIMUM TRENCH DEPTH 24"

Division or Section Head

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.

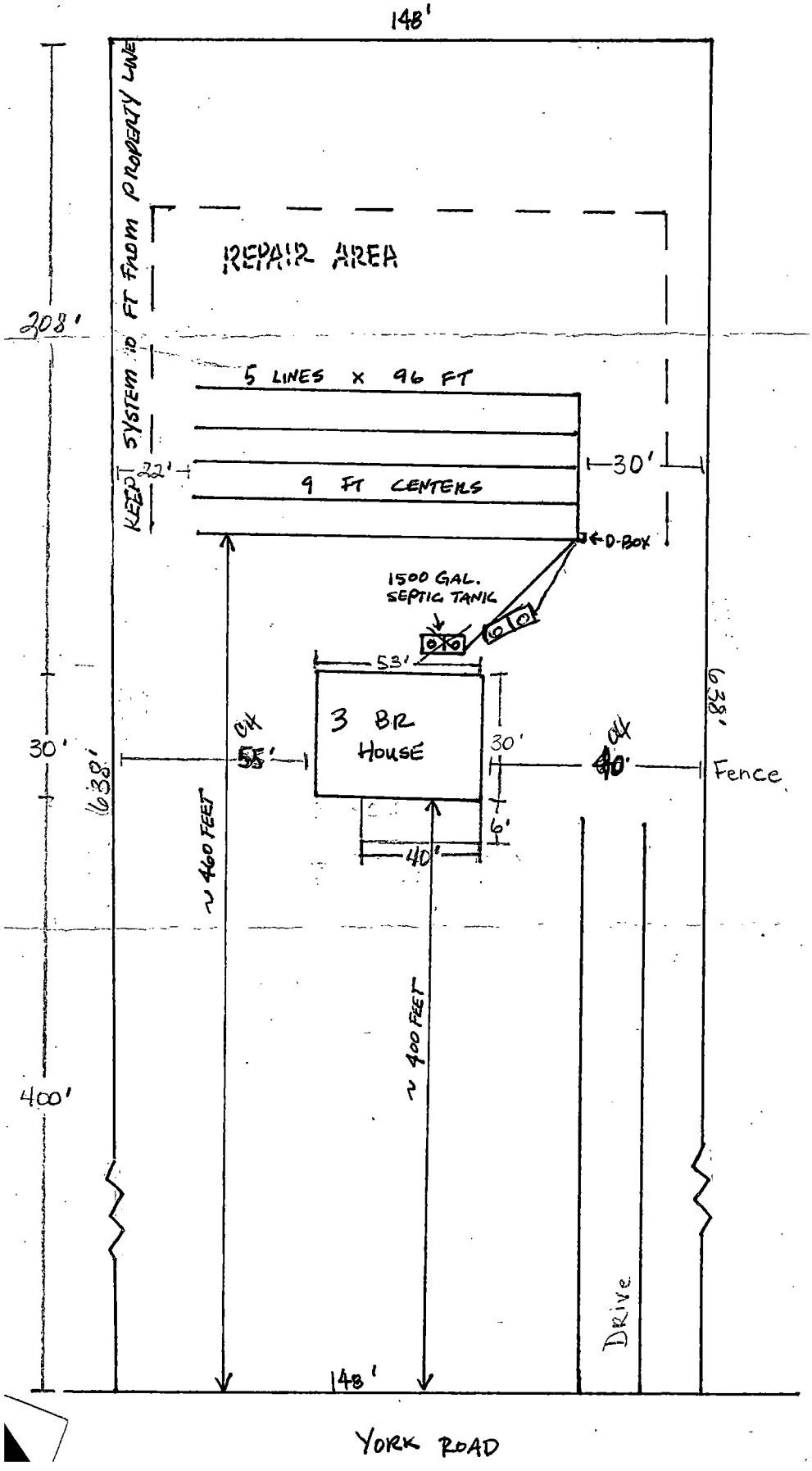
WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER OR AGENTS COPY

R. C. S., Inc.

Septic Tank Installation & Service

Stafford Street
Post Office Box 708
Monroe, North Carolina 28110
Phones: 704-283-7539 or 376-9359

FILE 5679 A



* KEEP LINES SHALLOW; MAXIMUM TRENCH DEPTH 24 INCHES

Mecklenburg County
Health Department

Basil G. Delta, M.D., M.P.H.
Health Director

July 26th, 1989

Mattie M. & James L. Creighton
18731 York Road
Charlotte, NC 28217

RE: Property located at 13639 York Road
FILE: 5679A
PARCEL: 21912403

Dear Sir:

At your request, a field investigation was conducted on the property designated above for the purpose of determining site suitability for the installation of a ground absorption sewage disposal system. The results of this investigation showed the property to be classified UNSUITABLE for the installation of such a system. A copy of the Site Evaluation Report (Serial Number 12144) is enclosed.

State regulations provide that sites originally classified unsuitable may be utilized for the installation of alternate or modified sewage disposal systems provided the requirements of 10 NCAC 10A .1948 (c) are met. A reprint of this section is enclosed for your information.

Should you desire to file for permission to install an alternate or modified sewage treatment system on the property, please submit an Application For An Improvement Permit with an ACCURATELY dimensioned plot plan detailing the location of current and/or proposed buildings, wells and sewage disposal systems to this office. They will be reviewed, and if it is determined that the proposed system may reasonably be expected to function satisfactorily, an Improvement Permit will be issued by the Department upon completion by you, of a formal request for lot reclassification.

If I may be of any assistance, please feel free to call.

Very truly yours,

Jim Ericson, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure (2)

Environmental Health Division
1200 Blythe Boulevard • Charlotte, North Carolina 28203 • (704) 376-4603

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 12144

File: 36 79 A Action 2

Parcel: 00 219-124-03 ☐ PC

Location: York Rd.

Subdivision:

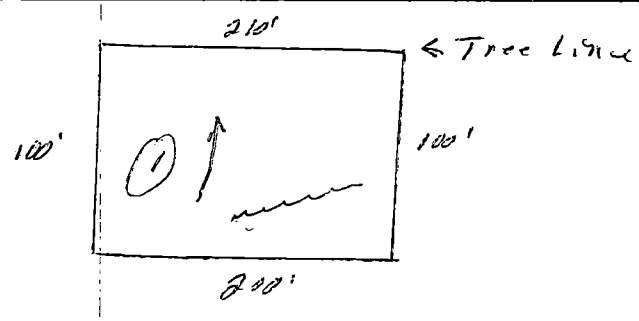
Lot: Block: Acres: Approx .5 ac.

Owner: Mattie Creithton
Address: 13731 York Rd.
Charlotte, NC 28217

Comments: _____

Described by: William R. Mauldin

Date: 7-25-89



***** EVALUATION KEY *****

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	(S) PS U 6-15%	S PS (U) Complex Slopes	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U Some clay	S PS U —	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U Blocky	S PS U —	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U 7-36" To water	S PS U —	S PS U	S PS U	S PS U	S PS U
Depth	S PS (U) 25-36"	S PS U —	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 7-36"	S PS U —	S PS U	S PS U	S PS U	S PS U
Available Space	S (PS) U limited	S PS U —	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	IVA Cecil-Mecklenburg	Complex Slopes				
Area Classification	S PS (U)	S PS (U)	S PS U	S PS U	S PS U	S PS U

APPLICATION FOR SOIL INVESTIGATION

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

FILE: 5679A

TC: _____

☐ PC ☐ REPT

JOB LOCATION

① ADDRESS: 13639 York Road

② SUBDIVISION: _____ ③ LOT: _____ ④ BLOCK: _____

⑤ PARCEL REFERENCE: BOOK NO.: 219 PAGE NO.: 124 PARCEL NO.: 21917403

⑥ DEED REFERENCE: BOOK NO.: 3700 PAGE NO.: 048

OWNER

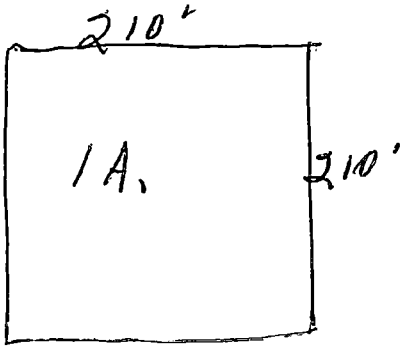
⑦ NAME: ~~Creighton~~ Mattie M. Creighton (FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: 13731 York Road

⑨ CITY: Charlotte ⑩ STATE: N.C. ⑪ ZIP: 28217

⑫ PHONE: (WORK) _____ (HOME) 588-1097

⑬ Accurately diagram and dimension lot.



⑭ 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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Mattie M. + J. L. Creighton

Date: 7-13-89

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER'S COPY

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

DATE: July 13, 1989

NAME/COMPANY: Lucille P. Collins

Sanitation _____

Vector Control _____

OPWD ✓

SERVICE: Soil Test
#5679A

FEE: 40 —

cash 40 00
11LD 02

Completed By

Collected By

COPY

PRESENTED FOR REGISTRATION
89 JUN 29 AM 10:48
ANNE A. POWERS
REGISTER OF DEEDS
MECKLENBURG CO., N.C.

FILE NO. 5679A

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

ACKNOWLEDGEMENT OF REQUEST BY OWNER FOR RECLASSIFICATION OF SITE FROM "UNSUITABLE" TO "PROVISIONALLY SUITABLE" UNDER 10 NCAC 10A .1948(c)

The undersigned, Mattie M. and James L. Creighton

owner of property located at 13639 Cook Rd.

("the site") and described in an instrument recorded in Book _____ at Page _____, Mecklenburg Public Registry, hereby acknowledges that he applied to the Mecklenburg County Department of Environmental Health ("the Department") for a permit to install a septic tank sewage disposal system on the site; that the Department evaluated the site for suitability for such a system in accordance with the regulations promulgated by the North Carolina Commission for Health Services as 10 NCAC 10A .1934 et seq; that the Department originally classified the site as "unsuitable" pursuant to the standards set forth in the regulations; that the undersigned requested pursuant to 10 NCAC 10A .1948(c) that the Department reclassify the site as "provisionally suitable" in light of the particular septic tank system proposed by the undersigned; that the Department considered various studies, data and other information which indicate to the Department that the septic tank system proposed by the undersigned can reasonably be expected to function satisfactorily and thus that the findings specified in 10 NCAC 10A .1948(c)(1), (2), and (3) can be made; and that the Department therefore reclassified the site as "provisionally suitable" and issued an appropriate permit for such proposed septic tank system.

The undersigned further acknowledges that the proper design, construction, operation and maintenance of such septic tank system is his responsibility and that neither the Department nor its officials, employees or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time or that the Department, its officials, employees or agents assume any liability for any damages of any kind which are caused, or which may be caused, by a malfunction of such system.

The undersigned further agrees for himself, his heirs and assigns that he shall indemnify and hold harmless the Department, its employees and officials, as well as Mecklenburg County and its employees and officials, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure of said septic tank system.

The undersigned further agrees for his heirs and assigns that, in the event any septic tank system installed under authority of the aforesaid permit fails to perform adequately in any respect, he will take whatever measures are required to correct same; or if such is impossible he will discontinue use of said system immediately.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

This 29th day of June, 1989.

Mattie M. Creighton (SEAL)

James L Creighton (SEAL)

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, Georgia A. McLean, a Notary Public for said County and State, do hereby certify that Mattie M. Creighton and James L. Creighton personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 29th day of June, 1989.

Georgia A McLean
Notary Public

My Commission Expires September 22, 1993

My Commission Expires: _____

Mecklenburg County
Health Department

Basil G. Belta, M.D., M.P.H.
Health Director

June 27, 1989

Mattie M. and James L. Creighton
13731 York Road
Charlotte, NC 28217

Dear Mr. & Mrs. Creighton:

RE: Property located at 13639 York Road
FILE: 5679A
PARCEL: 219-124-03

Receipt of your plans for a modified waste disposal system for the property referenced above is acknowledged.

Your plans for the modified system for the above property as submitted are approved with the following comments:

- The well should be located 100 feet or no less than 50 feet away from any part of the sewage disposal system and repair area.
- Water saving plumbing devices and low flush or microflush toilets must be installed when constructing the residence.

Upon execution and recording with the Register of Deeds Office, Mecklenburg County, of the enclosed "Septic Tank Agreement Form", an Improvements Permit may be issued by this office.

Sincerely,

Jim Ericson, R.S., Supervisor
On Premises Waste Disposal & Water Supply

JE/ir

Enclosures - 3 Septic Tank Agreement Forms

Environmental Health Division
1200 Blythe Boulevard • Charlotte, North Carolina 28203 • (704) 376-4603

This sail and elevation is not too bad. The first seat will have to have a step down. There will be room for repair, but the sails become more shallow away from the hull line.

MBR

Sears Building

DATE 5/31/89

TO: HEALTH DEPARTMENT - ENVIRONMENTAL HEALTH

FROM: COUNTY ENGINEERING

EHD FILE _____ JURISDICTION CODE Meck

PARCEL NUMBER 21912403 pp

ASSIGNED ADDRESS 13639 York Rd

EXISTING ADDRESS ~~13639~~ York Rd.

PROJECT NAME N/A

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

	APPROVED	NOT APPROVED
1. SUBDIVISION REGULATIONS	☐	☐ *
2. FLOODWAY REGULATIONS	☐	☐ *
3. EROSION CONTROL REGULATIONS	☐	☐ *
4. COMMERCIAL DRAINAGE PLAN	☐	☐ *
	PRESENT	**NOT PRESENT**
5. PUBLIC UTILITY EASEMENT	☐ *	☐
	YES	**NO**
6. PROPERTY FRONTS ON THOROUGHFARE	☐ *	☐
	YES	**NO**
7. DRIVEWAY PERMIT REQUIRED	☐ *	☐

*** If checked, further investigation will be required to determine whether a building permit may be issued by Building Standards for the site.**

REMARKS: Septic Tank - SF House

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIERS OFFICE AT BUILDING STANDARDS WHEN PAYING PERMIT FEES.
A CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL THE TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAY(S).

SIGNED: _____

OPWEAR 02/86

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 5/31/89

Name/Company Mattie + Cora Creighton

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: CAP - New
S679A

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

MAY 31 1989

Check 4023
Tk 150.00

Fee: $ 150.00

Collected by _____

81
150

APPLICATION FOR AN IMPROVEMENT PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

(OFFICE USE ONLY)
FILE: 5679A
TC: _____
SERIAL: № 18398
☒ L ☐ CRT

JOB LOCATION

① ADDRESS: 13639 (STREET NO.) York Road (STREET) ② FILE: _____
③ JURISDICTION: _____ ④ TAX PARCEL NO.: 219 124 03
⑤ SUBDIVISION: _____ ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: Mattie M. (FIRST) and James L. (MIDDLE) Creighton (LAST)
⑨ MAILING ADDRESS: 13731 York Road
⑩ CITY: Charlotte ⑪ STATE: N.C. ⑫ ZIP: 28217
⑬ PHONE: (WORK) _____ ⑭ (HOME) 588-1097

REQUEST

This request is for a(n):
⑮ ☒ New permit ⑰ ☐ Authorization for mobile home exchange
⑯ ☐ Repair or alteration permit 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

㉘ Water supply from (present or proposed):
A ☒ Individual well
B ☐ Municipal system
C ☐ Community well
D ☐ Community system

㉙ 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 ECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Mattie M. & James L. Creighton
Date: 5-31-89

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:
... No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by this Department.
... This permit is not transferable, and shall become null and void 36 months from the date of issuance.
Aggreement Form on file

Environmentalist _____ Date _____
Director or Authorized Section Head [signature] Date 6-29-89

*This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.

Mecklenburg County
Health Department

Basil G. Delta, M.D., M.P.H.
Health Director

May 5th, 1989

Mattie M. & James L. Creighton
18731 York Road
Charlotte, NC 28217

RE: Property located at York Road
FILE: 5679A
PARCEL: 21912403

Dear Sir:

At your request, a field investigation was conducted on the property designated above for the purpose of determining site suitability for the installation of a ground absorption sewage disposal system. The results of this investigation showed the property to be classified UNSUITABLE for the installation of such a system. A copy of the Site Evaluation Report (Serial Number 16139) is enclosed.

State regulations provide that sites originally classified unsuitable may be utilized for the installation of alternate or modified sewage disposal systems provided the requirements of 10 NCAC 10A .1948 (c) are met. A reprint of this section is enclosed for your information.

Should you desire to file for permission to install an alternate or modified sewage treatment system on the property, please submit an Application For An Improvement Permit with an ACCURATELY dimensioned plot plan detailing the location of current and/or proposed buildings, wells and sewage disposal systems to this office. They will be reviewed, and if it is determined that the proposed system may reasonably be expected to function satisfactorily, an Improvement Permit will be issued by the Department upon completion by you, of a formal request for lot reclassification.

If I may be of any assistance, please feel free to call.

Very truly yours,

Sylvia D. Daniel

Sylvia D. Daniel, R.S., Supervisor
On Premises Waste Disposal & Water Supply

Enclosure (2)

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 16139

File: 5679A

Action 2

Parcel: 21912403

☐ PC

Location: York Road

Subdivision:

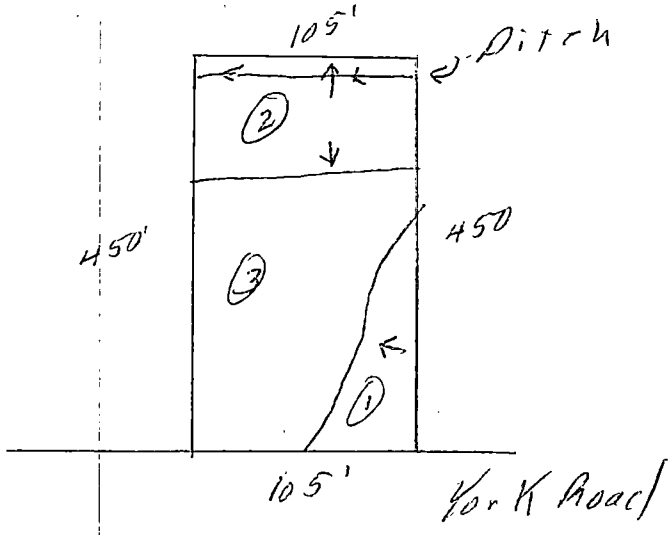
Lot: Block: Acres: Approx 1.0

Owner: Mattie M. & James L. Creighton
Address: 18731 York Road
Charlotte, NC 28217

Comments: _____

Described by: _____

Date: _____



***** EVALUATION KEY *****

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

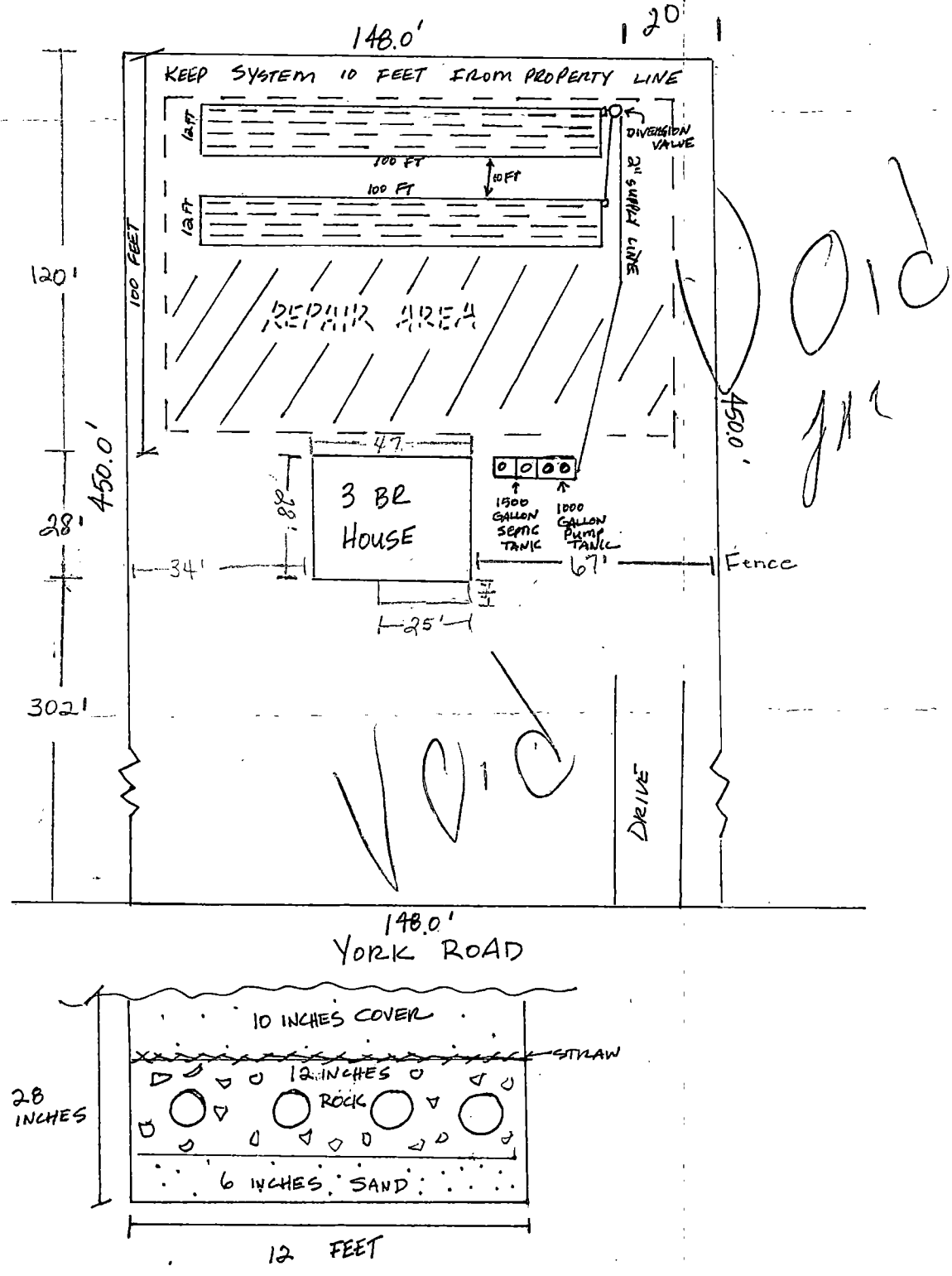
FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	S PS U —	(S) PS U 6-15%	(S) PS U 2-8%	S PS U	S PS U	S PS U
Texture	S PS U	S PS (U) 2-1C loy	S PS (U) 2-1C loy	S PS U	S PS U	S PS U
Structure	S PS U	S (PS) U Blocky	S (PS) U Blocky	S PS U	S PS U	S PS U
Drainage	S PS U —	S (PS) U 736" to water	S PS (U) Perched water 18-24"	S PS U	S PS U	S PS U
Depth	S PS U	S PS (U) 14-28"	S (PS) U 36"+	S PS U	S PS U	S PS U
Restrictive Horizons	S PS U	S (PS) U 736"	S (PS) U 736"	S PS U	S PS U	S PS U
Available Space	S PS U	S (PS) U limited	S (PS) U	S PS U	S PS U	S PS U
Other (specify)	S PS (U) Mixed compacted Fill	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	Fill	IUB Mecklenburg-Lilac	IUB Helena-Depression			
Area Classification	S PS (U)	S PS (U)	S PS (U)	S PS U	S PS U	S PS U

R. C. S., Inc.

Septic Tank Installation & Service

Stafford Street
Post Office Box 708
Monroe, North Carolina 28110
Phones: 704-283-7539 or 376-9359

MATTIE CREIGHTON
FILE 5679A
parcel# 21912403



APPLICATION FOR SOIL INVESTIGATION

30 01

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

RECEIVED
MECKLENBURG COUNTY
HEALTH DEPT.

FILE: 5679A APR 2[illegible]

TC: ENVIRONMENTAL HEALTH

☐ PC ☐ REPT DIVISION

JOB LOCATION

① ADDRESS: York Road South Highway #49

② SUBDIVISION: ③ LOT: ④ BLOCK:

⑤ PARCEL REFERENCE: BOOK NO.: 219 PAGE NO.: 124 PARCEL NO.: 21912403

⑥ DEED REFERENCE: BOOK NO.: 3700 PAGE NO.: 048

OWNER

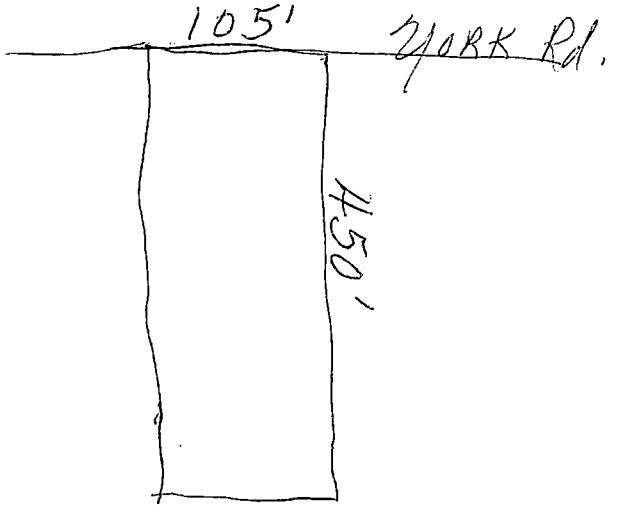
⑦ NAME: Mattie M. & James L. Creighton
(FIRST) (MIDDLE) (LAST)

⑧ MAILING ADDRESS: 18731 York Road

⑨ CITY: Charlotte ⑩ STATE: N.C. ⑪ ZIP: 28217

⑫ PHONE: (WORK) (HOME) 588-1097

⑬ Accurately diagram and dimension lot.



⑭ 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 HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Mattie M. Creighton & James L Creighton

Date: Apr. 21, 1989

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER'S COPY

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 4/24/89

Name/Company Traffic Creighton

Sanitation _____

Vector Control _____

O.P.W.D. ✓

Service: Insp/investigation
5679A

MECK COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

APR 24 1989

ck# 3446
$30.00

Fee: $ 30.00