SEE INSTRUCTIONS ON BACK

Date Received 11-7-83

MECK[illegible] DEPARTMENT OF [illegible]

CAR(S) Application No. 20269

T. C. No. 193-211-

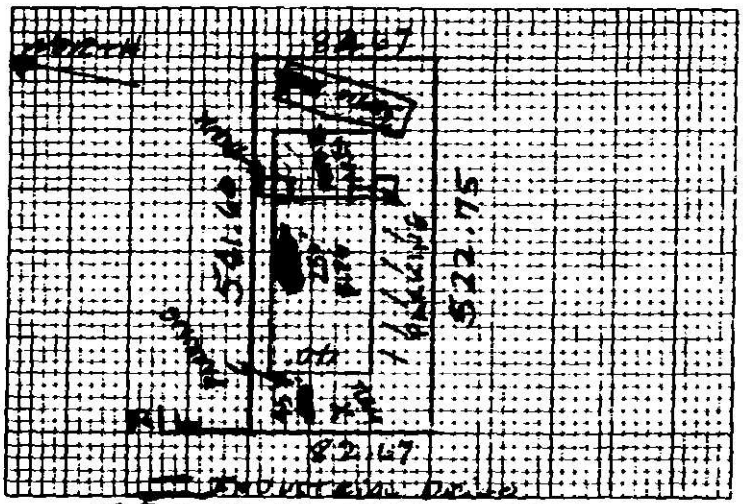
Map Date

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.



PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ____ Yes ✓ No
Residence ____ Yes ✓ No

4) No. of Bedrooms _____
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 6" DRILL
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 CARTER (LAST) ALBERT (FIRST) L (MIDDLE)

14) ADDRESS OF OWNER 2638 High Ridge Rd. Matthews N.C. 28105

15) PHONE NO. Home 847-5705 Office 847-4596

16) LOCATION OF SYSTEM 1408 INDUSTRIAL Drive (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK 4709 AT PAGE 0311

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ____ NO DATE RUN 7/83 PS

20) PTR NUMBER (See Instructions) 20269

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.

Nov. 4, 1983
DATE OF APPLICATION

Albert L. Carter
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

BE 11-15-83

SIR No. 20269

Date Issued 11-7-83 Serial No. 6933

T. C. No. PO 193-211-18

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Carter, (LAST) Albert (FIRST) L. (MIDDLE)

ADDRESS OF OWNER 2638 High Ridge Rd., Matthews, NC ZIP 28105

LOCATION OF LOT 1418 Industrial Drive (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO _____ BLOCK NO. _____

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 20269. 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

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued 6-21-84

Serial No. 07305

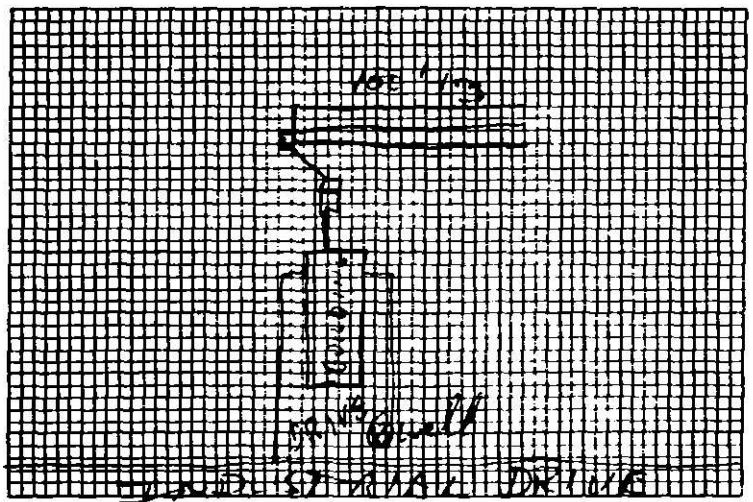
ICAR(S) Permit No 20269

T. C. No. 193 211 18

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 20269, 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 7-21-84, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500 gal

Tank Construction PRECAST

Absorption and/or Nitrification Lines:

Total Line Length 300'

Number of Lines 3 x 100'

Distance from House 5'+

Distance from Property Line 10'+

Distance from Well 50'+

NAME OF OWNER A1 CARTER

LOCATION OF PROPERTY 1416 INDUSTRIAL DRIVE

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.

3 line x 100' long, x 2' wide x 12" stone w/ straw cover w/ grd

Comments: bond-NOT TO BE INSTALLED IN FILL-DIVERT SURFACE WATER PRIOR TO FINAL APPROVAL

B. Hardesty
Division or Section Head

Kelly Randall
Environmentalist

* 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.

END-5-76

Environmental Health Department's Copy

C of A (s) No. 20269

Date Issued 7-13-84 Serial 6779 T. C. No. A3 211 18 L CRT

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 CARTER (LAST) AL (FIRST) (MIDDLE)

Location of Property 1418 INDUSTRIAL DRIVE

Application Number 20269 Permit Number 20269

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material P.V.C.

Total Length of Drain Tile 400' Number of Lines 4 100

Depth of Filter Material 12" Cover Depth 2'

Water Supply Source well Distance from Water Source 50'

Excavation Inspected 7-13-84 (DATE) Tank Inspected 7-13-84 (DATE)

Nitrification Field Inspected 7-13-84 (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 ✓ 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 300' on installation permit. 400' installed

Environmental Health

EHD-5-76

Date Received 10-15-84

CAR(S) Application No. 20269

T. C. No. 193 211 18

Map Date L

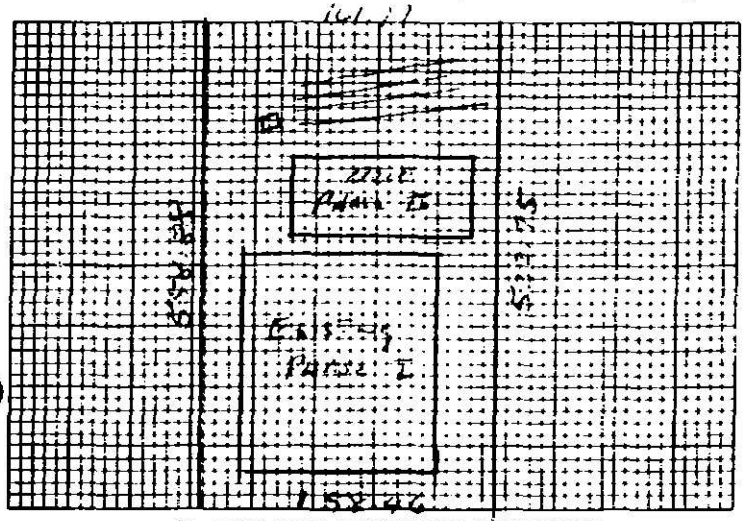
1430

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 USE EXISTING SYSTEM

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 12
6) Washing Machine ____Yes ✓No
7) Garbage Disposal ____Yes ✓No
8) Dishwasher ____Yes ✓No
9) Water Supply
A) Individual Well 6" 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 CARTER (LAST) ALBERT (FIRST) L. (MIDDLE)

14) ADDRESS OF OWNER 2038 Eight Mile Rd. Matthews N.C. 28105

15) PHONE NO. Home 847-0643 Office 847-4576

16) LOCATION OF SYSTEM 14111 E. Monroe Rd. Matthews N.C. (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK 4764 AT PAGE 0311

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.

10-15-84
DATE OF APPLICATION

Albert L. Carter
OWNER

EHD-S-76

Environmental Health Department's Copy

Date Issued 10-16-84 **Serial No. 7921**

SIR No. 20269

T. C. No. 193-211-18

Map Date L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
IMPROVEMENT 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 Carter, (LAST) Albert (FIRST) L. (MIDDLE)

ADDRESS OF OWNER 2638 High Ridge Rd., Matthews, NC ZIP 28105

LOCATION OF LOT 1418 Industrial Drive (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

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 20269 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.

*** USE EXISTING SYSTEM ***

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Received 4-16-85

RECEIVED
APR 16 1985
ENVIRONMENTAL HEALTH

ICAR(S) Application No. 20269

T. C. Map No. 193-211-18

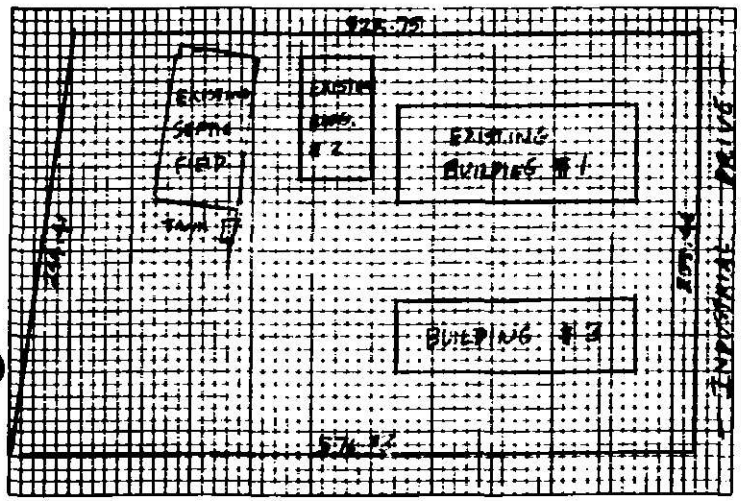
Map Date

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 Use existing system

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 X No
Residence ____Yes X No

4) No of Bedrooms ____
5) Business Use — Max No Employees 12
6) Washing Machine ____Yes X No
7) Garbage Disposal ____Yes X No
8) Dishwasher ____Yes X No
9) Water Supply
A) Individual Well Existing 6"
B) Governmental System ____
C) Community System
1 Well source ____
2 Governmental source ____
10) Sewage System Existing
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 Carter, (LAST) Albert (FIRST) L. (MIDDLE)

14) ADDRESS OF OWNER [illegible] Matthews, N. C. 28105

15) PHONE NO. Home [illegible] Office 847-4596

16) LOCATION OF SYSTEM 1430 Industrial Drive, Matthews, N. C.
(STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK [illegible] AT PAGE 0223

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.

4/15/85
DATE OF APPLICATION

Al Carter
OWNER

EHD-S-76

Date Issued 5-17-85

Serial No. 8535

SIR No. 20269

T. C. No. PO 193-211-18

Map Date L CET

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Carter, (LAST) Albert (FIRST) L. (MIDDLE)

ADDRESS OF OWNER 2638 High Ridge Rd., Matthews, NC ZIP 28105

LOCATION OF LOT 1430 Industrial Drive (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO._____ BLOCK NO._____

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 20269. 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.

*** NEW SEPTIC SYSTEM INSTALLATION WILL BE REQUIRED ***

B. M. Ferguson
Environmentalist

Eric D. Hardister, Jr.
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued 7-11-85

Serial No. 08306

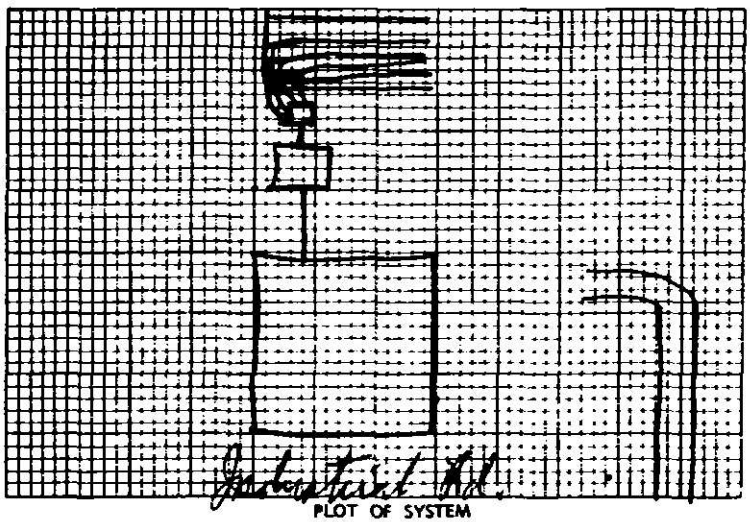
ICAR(S) Permit No. 20269

T. C. No. 193-211-16

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 20269, dated 4-15-85 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 8-11-85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate Pd

Liquid Capacity of Tank 1500

Tank Construction PCC

Absorption and/or Nitrification Lines:

Total Line Length 330'

Number of Lines 6

Distance from House 5'

Distance from Property Line 10'

Distance from Well 750'

NAME OF OWNER Albert Carter

LOCATION OF PROPERTY 1430 Industrial 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.

6 lines 3'X55'X12" stone

Comments:

B. Hardister
Division or Section Head

D. 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.

BHD-S-76

Environmental Health Department's Copy

C of A (s) No. 20269

Date Issued 7-24-85 Serial 7696 T. C. No. 193-211-18 L CRT

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 Carter (LAST) Albert (FIRST) (MIDDLE)

Location of Property 1430 Industrial Dr.

Application Number — Permit Number —

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material PCC

Total Length of Drain Tile 330' Number of Lines 6

Depth of Filter Material 12" Cover Depth 12"-18"

Water Supply Source well Distance from Water Source 750'

Excavation Inspected 7-24-85 (DATE) Tank Inspected 7-24-85 (DATE)

Nitrification Field Inspected 7-24-85 (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 1500ST, CON, 990SFT, 12G, Cecil

B. R. Ferguson
Environmentalist

EHD-5-76

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 9/19/88

Name/Company [illegible]

Sanitation ____
Vector Control ____
O.P.W.D. /

Service: [illegible]

[illegible]

[illegible]

[illegible]

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
SEP 19 1988

Fee: $ 75 - 0E19291
175

Completed by [signature]

Collected by [signature]

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: 20269
TC: 193-211-24
SERIAL: № 16915

☒ L ☐ CRT

JOB LOCATION

① ADDRESS: 1430 (STREET NO) INDUSTRIAL DR (STREET) MATTHEWS N.C. ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.:
⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: AL (FIRST) (MIDDLE) CARTER (LAST)
⑨ MAILING ADDRESS: 1418 INDUSTRIAL DR
⑩ CITY: MATTHEWS ⑪ STATE: N.C. ⑫ ZIP: 28105
⑬ PHONE: (WORK) 847-4576 ⑭ (HOME) 846-4038

REQUEST

This request is for a(n):

⑮ ☐ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☒ Other (specify) BLD ADDITION

DESIGN CRITERIA

System will serve:

⑲ ☐ Residence ⑳ ☐ Mobile home
㉑ ☑ Business or place of public assembly
㉒ Number of bedrooms?
㉓ Maximum occupancy?
㉔ Basement? ☐ yes ☐ no
㉕ Type? WAREHOUSE
㉖ Maximum number of employees? 4
㉗ Maximum number of seats? 2

WATER SUPPLY

⑳ Water supply from (present or proposed):

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

㉘ 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 on the property for the purpose of processing this request.

Signed: Al Carter
Date: 9-13-88

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved Request for the Job Location contained in this document. This approval 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 the Department.

... This permit is not transferable, and shall become null and void months from the date of issuance.

No industrial process wastewater discharges to septic system

B. R. Ferguson 9-27-88
(Environmentalist) Date

Director or Authorized Section Head Date

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

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 9/13/88

Name/Company A. L. Carter Const

Sanitation _____
Vector Control _____
O.P.W.D. V

Service: Drive Addition
#30269

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

SEP 13 1988

Fee: $20.00

Completed by

Collected by

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

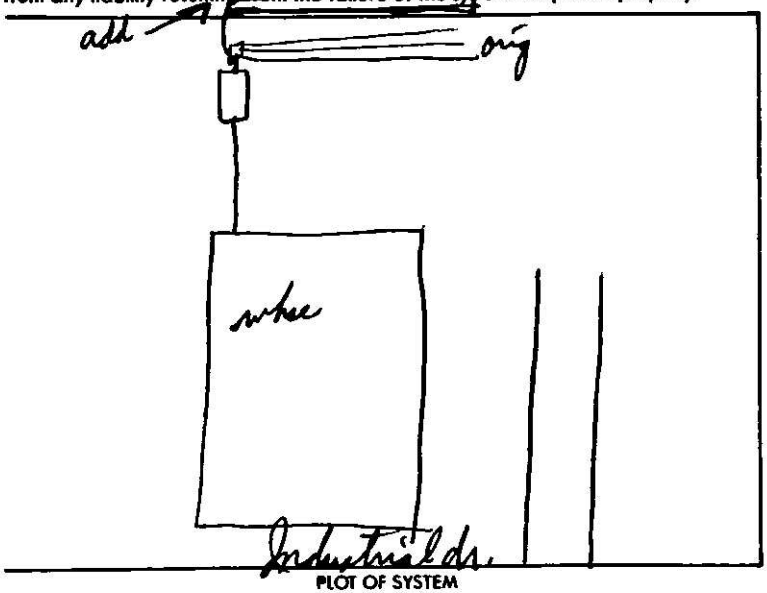
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 20269 DATE: 9-27-88

TC: 193-211-24 ✓L

SERIAL Nº 12208

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 9-13-88. All work shall be completed on or before 10-27-88, 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 existing gallons

Liquid Capacity of Dosing Tank ____ gallons

Tank Construction ____

Absorption and/or Nitrification Lines:

Trench Width 6 feet

Total Line Length 110 feet

Number of Lines 2

Depth of Stone 12 inches

Distance from House 5 feet

Distance from Property Line 10 feet

Distance from Well >50 feet

NAME OF OWNER Al Carter

LOCATION OF PROPERTY 1430 Industrial Dr.

Comments: Used 6'x55'x12" stone

Division or Section Head

B. K. 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.

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