Date Received 5-12-83

RECEIVED
MAY 12 1983
MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

ICAR(S) Application No. 19662

T. C. No. 045-353-10

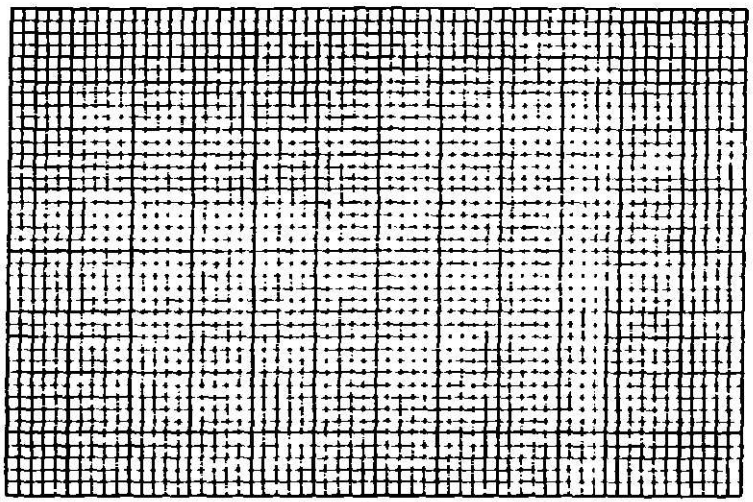
Map Date _____

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: adding bedroom & bath.

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 4 (3+1)
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 Shields (LAST) Jerry (FIRST) E. (MIDDLE)

14) ADDRESS OF OWNER 4010 TREXLER Ave

15) PHONE NO. Home 596-8475 Office 956-0313

16) LOCATION OF SYSTEM 4010 Trexler Ave (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.

5-11-83
DATE OF APPLICATION

Jerry E Shields
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

SF-5-17-83

Serial No. 6435

SIR No. 19662

Date Issued 5-16-83

T. C. No. 045-353-10

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

IMPROVEMENT PERMIT

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

NAME OF OWNER Shields, (LAST) Jerry (FIRST) E. (MIDDLE)

ADDRESS OF OWNER 4010 Trexler Ave., Charlotte, NC ZIP 28213

LOCATION OF LOT 4010 Trexler Avenue (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 19662. 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

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

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

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

MECK COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH
RECEIVED
AUG 12 1987

(OFFICE USE ONLY)
FILE: 19662
TC:
SERIAL: № 14232
☒ L ☐ CRT

JOB LOCATION

① ADDRESS: 4010 (STREET NO.) TREXLER AVE (STREET) ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.: 045-353-10
⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: JERRY (FIRST) SHIELDS (LAST) (MIDDLE)
⑨ MAILING ADDRESS: 4010 TREXLER AVE
⑩ CITY: CHARLOTTE ⑪ STATE: N.C. ⑫ ZIP:
⑬ PHONE: (WORK) 596-0313 ⑭ (HOME) 596-8475

REQUEST

This request is for a(n):

⑮ ☑ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☑ Other (specify) ADD STORAGE BLDG

DESIGN CRITERIA

System will serve:

⑲ ☑ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 3
㉓ Type?
㉔ Maximum occupancy? 3
㉕ Maximum number of employees?
㉖ 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 MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: C.L.T.J. agent for owner
Date: 8-12-87

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, 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. Use existing system

B.R. Ferguson (Environmentalist) 8-13-87 (Date)
(Director or Authorized Section Head) 8-13-87 (Date)

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

PROPOSED PLOT PLAN

045-353-10

MECKLENBURG COUNTY · ENVIRONMENTAL HEALTH ·

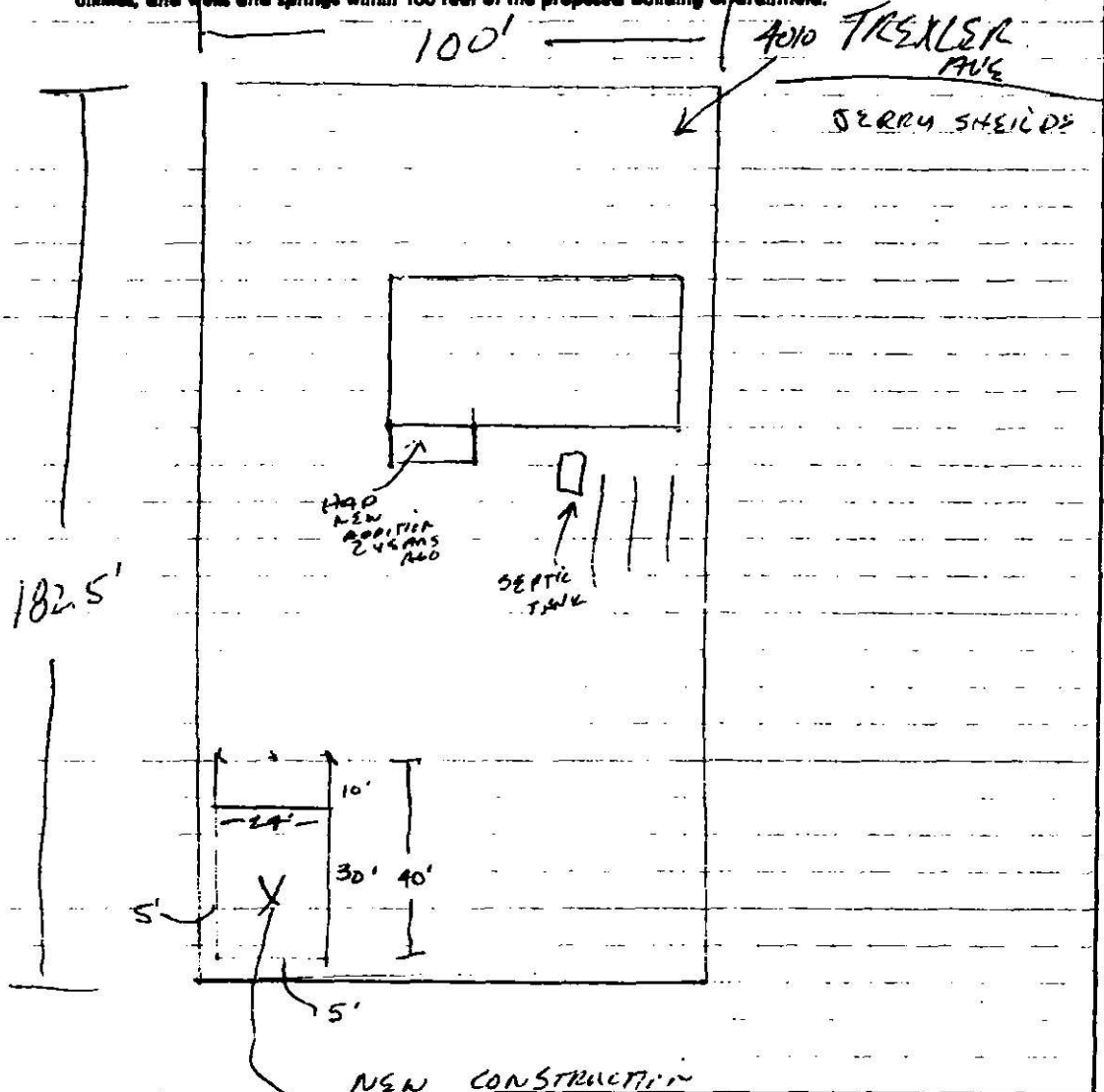
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: _____

TC: _____

MECK COUNTY DEPARTMENT OF
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ENVIRONMENTAL

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



Signed: C K T

Date: 8-12-87