C of A (s) No. 19479

Date Issued 4-12-83 **Serial** 5673 T. C. No. 059-171-01

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 Gardner (LAST), Jimmy (FIRST) (MIDDLE)

Location of Property 2810 Dalzview Drive

Application Number 19479 Permit Number 19479

Inspection Data:

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile 100' Number of Lines 2

Depth of Filter Material 34" Cover Depth 4'-7'

Water Supply Source well Distance from Water Source ~55'

Excavation Inspected — (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 4-12-83 (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

Mika Sexton
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 6156

Date Issued 3-23-83

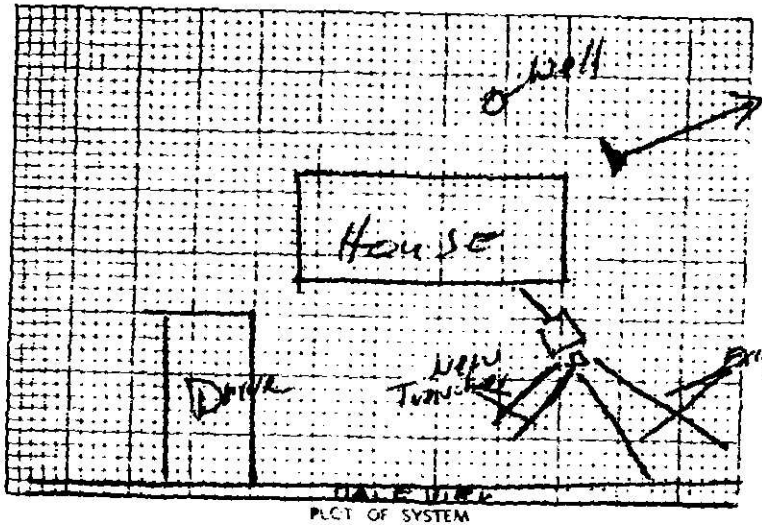
ICAR(S) Permit No. 19477

T. C. No. 059-171-01

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 _____ dated 3-23-83 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 April 8th, after which date this permit shall be null and void



PLOT OF SYSTEM

Permeability Rate PS - IVA

Liquid Capacity of Tank _____

Tank Construction Pipers

Absorption and/or Nitrification Lines:

Total Line Length 100 Lin ft.

Number of Lines Two

Distance from House 20FT

Distance from Property Line 15FT

Distance from Well 65FT

NAME OF OWNER GARDNER, Jimmy

LOCATION OF PROPERTY 2910 DALEVIEW 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.

Comments: Two Trenches Tobe 25 FT x 3FT x 34 inches Stone - Hay or Straw Cover - USE NPN DIST IF NEEDED.

_____ 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 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.

EHD-5-74

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY