SEE INSTRUCTIONS ON BACK

R

Date Received 6-5-73

ICAR (S) Application No. 6492

T. C. No. 107-192-03

Map Date 9-1-70

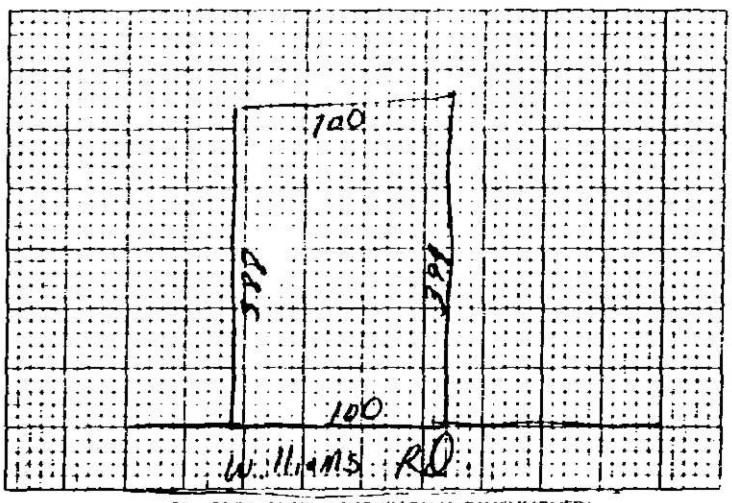
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 Health Department 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



3) PLOT PLAN (ACCURATELY DIMENSIONED)

4) No of Bedrooms 3

5) Business Use - Max No Employees 2

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 Buff (LAST) ___ (FIRST) David (MIDDLE)

14) ADDRESS OF OWNER 6400 Williams Rd.

15) PHONE NO Home 537-4852 Office 523-6382

16) LOCATION OF SYSTEM 6400 Williams Rd (Cook Orchard)
(STREET OR COUNTY ROAD)

17) SUBDIVISION Grove Park Lot No. 94 Block No. ___

Map Book No 1629 Page No. 491

18) DEED REFERENCE — DEED BOOK 2085 AT PAGE 500

19) HAS A PERCOLATION TEST 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.

6-14-73
DATE OF APPLICATION

OWNER Roy D. Buff

FORM NO. E S 4.1-7

HEALTH DEPARTMENT'S COPY

Date Issued 13 July 78 Serial No. 4005

ICAR(S) Permit No. 6498
T C. No. 107-197-03
Map Date 9-1-70

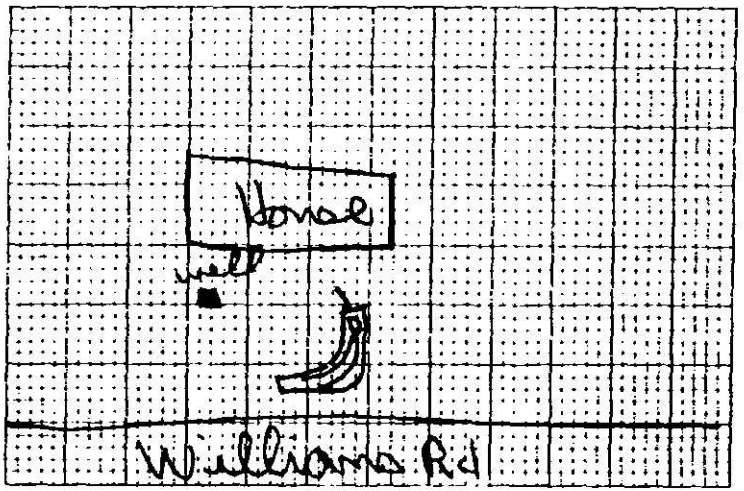
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTRUCTION, 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 waste water 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 6498, dated 6-19-78 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 13 Aug 78, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate ___

Liquid Capacity of Tank ✓

Tank Construction ✓

Absorption and/or Nitrification Lines

Total Line Lenght 150-4ft

Number of Lines (3) 7½'x 50'

Distance from House 10'+

Distance from Property Line 10'+

Distance from Well 50'

NAME OF OWNER Buff, Loy David

LOCATION OF PROPERTY 6480 Williams Rd

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used.

Comments: ___

James Stewart

Division or Section Head

R. M. Reynolds

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 Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

FORM NO. E 5-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 13 July 73 Serial No. 3598

C of A (s) No. 6492

T C. No. 107-192-03

Map Date 9-1-70

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Burt, Loy David (LAST, FIRST, MIDDLE)

Location of Property 6400 Williams Rd

Application Number 6492 Permit Number 6492

Inspection Data:

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile ~~100~~ 150 e/Ft Number of Lines (3) 7½'x50'

Depth of Filter Material 17"+ Cover Depth 24"

Water Supply Source well Distance from Water Source 50'

Excavation Inspected 13 July 73 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 13 July 73 (DATE)

Washing Machine Line Inspected, If Applicable 13 July 73 (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 Board of Health 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: Washer line repair

R. M. Reynolds
Environmentalist

FORM NO. E-6-4-1-71

SEE INSTRUCTIONS ON BACK

Date Received 12-26-23

ICARUS Application No 6492

T C No 107-192-03

Map Date 9-1-70

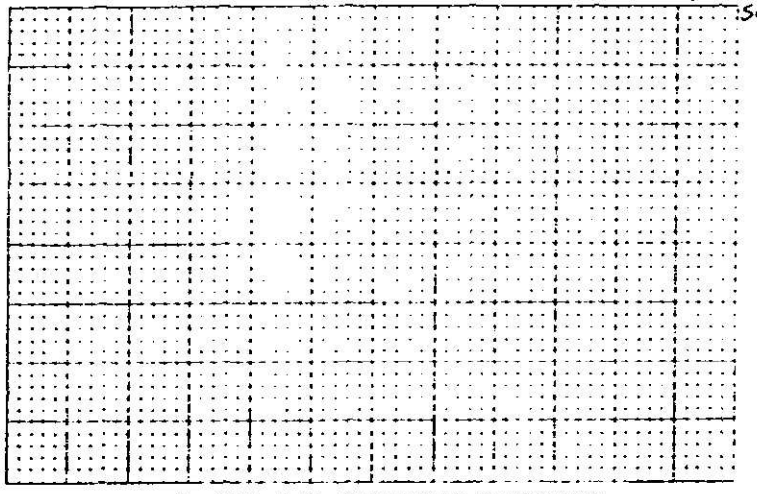
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 Health Department 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 ADDING BEDROOM + CLOSET IN FRONT CARPORT + ADDING SINGLE CAR CARPORT



3) PLOT PLAN (ACCURATELY DIMENSIONED)

4) No of Bedrooms 3

5) Business Use Max No Employees ___

6) Washing Machine Yes ✓ No ___

7) Garbage Disposal Yes ✓ No ___

8) Dishwasher Yes ✓ No ___

9) Water Supply
A) Lands to be served ✓
B) Government System ___
C) Community System ___
1 Well ___
2 Government ___

10) Sewage System
Building Sewer Length ___
Distance to public sewer ___ Yes ___ No
Building Sewer Length if not ___
Community Sewer Yes ___ No

11) FHA Case No ___

12) VA Case No ___

13) NAME OF OWNER BUFF (LAST) Ley (FIRST) DAVID (MIDDLE)

14) ADDRESS OF OWNER 6400 WILLIAMS ROAD

15) PHONE NO Home 537-4852 Office 523-6382

16) LOCATION OF SYSTEM 6400 WILLIAMS RD (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 PERCOLATION TEST 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 hereby shall be void and of no effect if any of the above facts are not true.

DATE OF APPLICATION ___ OWNER Loy D. Buff

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued December 27, 1973

Serial No. 3714

LA No. 6492

T. C. No 107-192-03

Map Date 9-1-70

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Buff (LAST) Loy (FIRST) David (MIDDLE)

ADDRESS OF OWNER 6400 Williams Road ZIP

LOCATION OF LOT 6400 Williams Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO.

MAP BOOK NO. PAGE NO

The above specified lot is approved by the Mecklenburg County Health Department for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the percolation test results which yielded a percolation rate of * , 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 6492. 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 percolation test 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, altred, 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

* May use present system.

A. M. Reynolds
Environmentalist

John R. Hobson
Director Environmental Health Division or Authorized Section Head

FORM NO E 3-4-1-71

HEALTH DEPARTMENT'S COPY