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SEE INSTRUCTIONS ON BACK

Date Received 5-11-73

ICAR (S) Application No 6225

T C No

Map Date

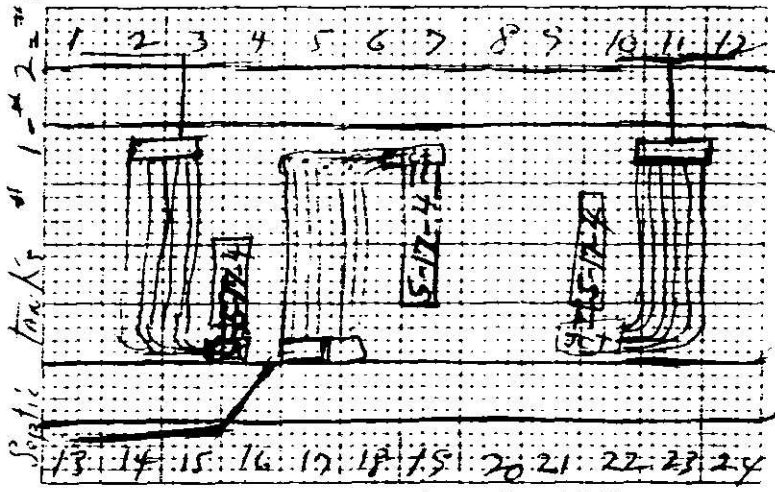
MECKLENBURG COUNTY HEALTH DEPARTMENT

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



4) No of Bedroom 3/2 Bed Room Trailer

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

9) 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 None

31) PLOT PLAN (ACCURATELY DIMENSIONED)

13) NAME OF OWNER Malphurs (LAST), David (FIRST), Dempsey (MIDDLE)

14) ADDRESS OF OWNER 2728 Park Road

15) PHONE NO. Home 377-1887 - 334-0292 Office 333-5265 - 399 1340

16) LOCATION OF SYSTEM Hwy 16 AT River (Riverside Park)
STREET OR COUNTY ROAD

17) SUBDIVISION _____ Lot No. 01 Block No. _____

Map Book No. 023 Page No. 131

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 herein shall be void and of no effect if any of the above facts are not true.

5-9-73
DATE OF APPLICATION

David D Malphurs
OWNER

FORM NO E-4-8-1-72

HEALTH DEPARTMENT'S COPY

G 225

Date Issued 6 July 73

Serial No. 3936

ICAR (S) Permit No. [illegible]

T. C No. [illegible]

Map Date 1 July 26

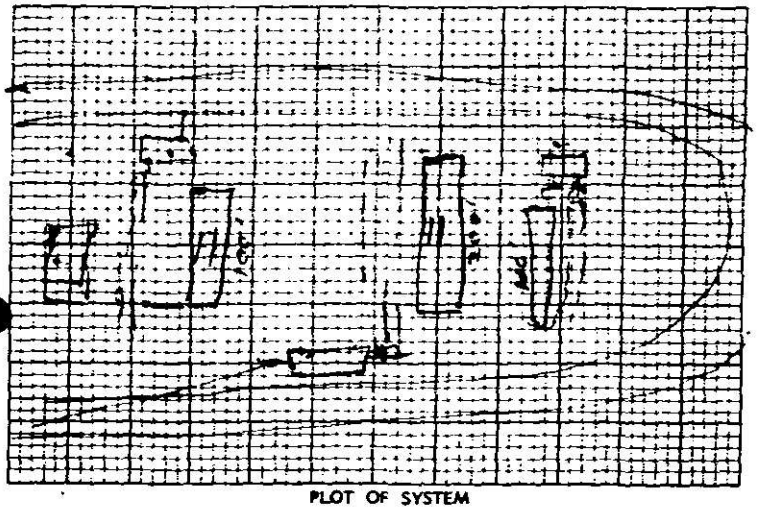
MECKLENBURG COUNTY HEALTH DEPARTMENT

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, 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 G 225 dated 3 July 73 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 6 Aug 73, 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 100' + 20C' + 100'

Number of Lines 2 + 2 + 2

Distance from House 20'

Distance from Property Line 25'

Distance from Well 150'

NAME OF OWNER [illegible]

LOCATION OF PROPERTY [illegible]

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: Sewer (Cont.)

_____ Division or Section Head

M. L. Beaty 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

Serial 4418

C of A (s) No. 6225

Date Issued 4 March 74

T. C. No. 023-131-01

Map Date 1 Sept 70

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

Jeffers

CERTIFICATE OF APPROVAL

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

Name of Owner MALPHURS (LAST) DAVID (FIRST) DEMPSEY (MIDDLE)

Location of Property HIGHWAY 16 AT RIVER BRIDGE

Application Number 6225 Permit Number 6225

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material PC

Total Length of Drain Tile 400' Number of Lines 4 (10' x 50' x 36")

Depth of Filter Material 36" Cover Depth 15"

Water Supply Source Community Well Distance from Water Source 100'

Excavation Inspected 1 March 74 (DATE) Tank Inspected 1 March 74 (DATE)

Nitrification Field Inspected 1 March 74 (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 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: Septic

Jerry Bruton

Environmentalist

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