Date Issued (17) May 73 Serial No. 3699 ICAR(S) Permit No. 6330

T C No. 137-071-39

Map Date

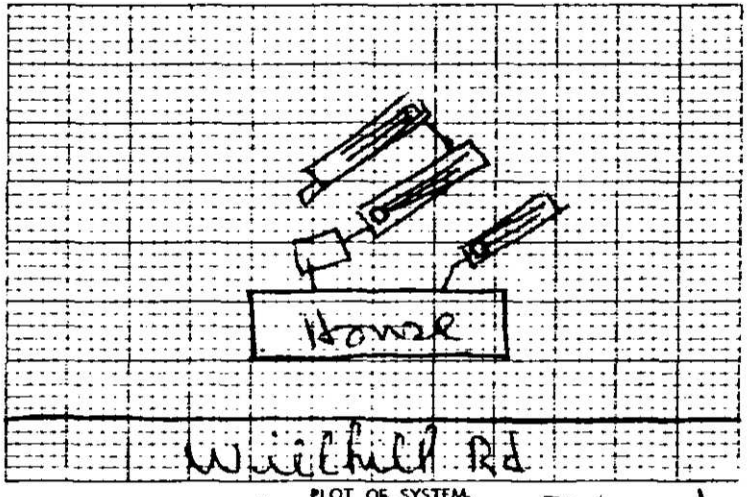
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 ___ _____, 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 _____ after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 58

Liquid Capacity of Tank 1000 gal

Tank Construction Precast Concrete

Absorption and/or Nitrification Lines

Total Line Lenght 400' & 120'

Number of Lines 5 (Two Beds 12½ + 10')

Distance from House 10'

Distance from Property Line 10'

Distance from Well 50' +

NAME OF OWNER Foreland, Robert M.

LOCATION OF PROPERTY Willhill Rd - Lot 8 / Block D

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: ① Washer line 7½'x33'x17" stone

② Aeration pit 2½'x7'x4' stone

Roger Staley

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

APPLICANT'S COPY

Date Issued 18 May 73

Serial No. 3324

C of A (s) No. 6330

T. C. No. ___

Map Date ___

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Freeland, Robert M. (LAST, FIRST, MIDDLE)

Location of Property Willhill Rd Lot 8/Bl. D

Application Number ___ Permit Number ___

Inspection Data:

Liquid Capacity of Tank 1000 gal

Tank Material Precast Concrete

Total Length of Drain Tile 400' & 100'

Number of Lines 5 TWO BEDS 12½' X 40'

Depth of Filter Material 17"

Cover Depth 24"

Water Supply Source well

Distance from Water Source 50'+

Excavation Inspected 18 May 73 (DATE)

Tank Inspected 18 May 73 (DATE)

Nitrification Field Inspected 18 May 73 (DATE)

Washing Machine Line Inspected, If Applicable 18 May 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: ___

R. M. Reynolds

Environmentalist

FORM NO E-6-4-1-71

HEALTH DEPARTMENT'S COPY