SEE INSTRUCTIONS ON BACK

Date Received 6-13-73

ICAR(S) Application No. 6481

T. C No. 107-2031 1 S-972

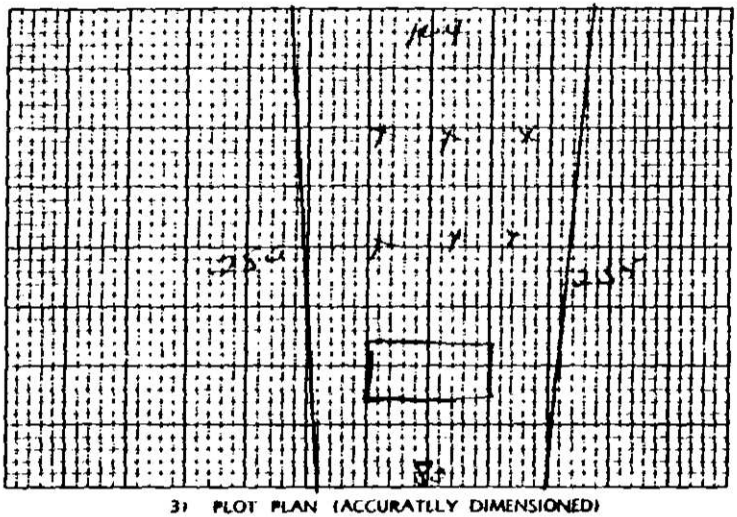
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 4

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 Gilley Const. Co. Inc (LAST, FIRST, MIDDLE)

14) ADDRESS OF OWNER 1516 Commonwealth Ave

15) PHONE NO Home ___ Office 375-7112

16) LOCATION OF SYSTEM Haverlock Pl. (STREET OR COUNTY ROAD)

17) SUBDIVISION Commonwealth Lot No. 7 Block No. 8

Map Book No. 14 Page No. 161

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___ PR>48

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ___ NO DATE RUN 10-18-67

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.

DATE OF APPLICATION 6-12-73

OWNER Gilley Const. Co. Inc

FORM NO. E-4-7-1-70

HEALTH DEPARTMENT'S COPY

City Hall
11/6/67

CHARLOTTE - MECKLENBURG HEALTH DEPARTMENT
PERCOLATION TEST RESULTS

Location (St., Rd., Hwy.) Havenlock
Subdivision Ravenwood
Lot & Block No. Block 8, Lot 7
FHA Case No. _____

Owner Bruce Getty
Builder Bruce Getty
No. Perc. Holes 6

6 Hole Average

1st. Perc. Rate 48 Min./In. Date 10/18/67
2nd Perc. Rate _____ Min./In. Date _____
3rd. Perc. Rate _____ Min./In. Date _____
4th. Perc. Rate _____ Min./In. Date _____

Lowest Rate Above = Average Perc. Rate 48

No. Bedrooms 3 Baths 2
Washing Machine ✓ (Yes / No) Disposal ✓ (Yes / No)

Separate 1 (Yes / No) Separate ✓ (Yes / No)

Tank Capacity 1200 Gallons
Nitrification Line 300 Lin. Ft. _____ Sq. Ft.

BUSINESS OR INDUSTRIAL BUILDINGS

W. C. _____ Urinals _____ Lavatories _____
Showers _____ Sinks _____ Other _____
No. of Employees _____

Check:
Approved ✓
Disapproved _____
Conditional _____ Agreement Card Signed _____

D. Walters
Sanitarian - Engineer

Date Issued June 14, 1973

Serial No. 3047

LA No. 6481
P.O.
T. C No. 107-263-11

Map Date 8-9-72

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 Gettys Construction Company, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 1319 Commerical Avenue ZIP

LOCATION OF LOT Havenlock Place
(STREET OR COUNTY ROAD)

SUBDIVISION Ravenwood LOT NO 7 BLOCK NO. 8

MAP BOOK NO 14 PAGE NO. 161

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 48 min/in 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 6481. 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.

G.M. Reynolds
Environmentalist

John R Atkinson
Director, Environmental Health Division or Authorized Section Head

FORM NO. E-3-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 16 Oct 73

Serial No. 4506

ICAR (S) Permit No. 6481

T. C. No. 107-263-11

Map Date 8-9-72

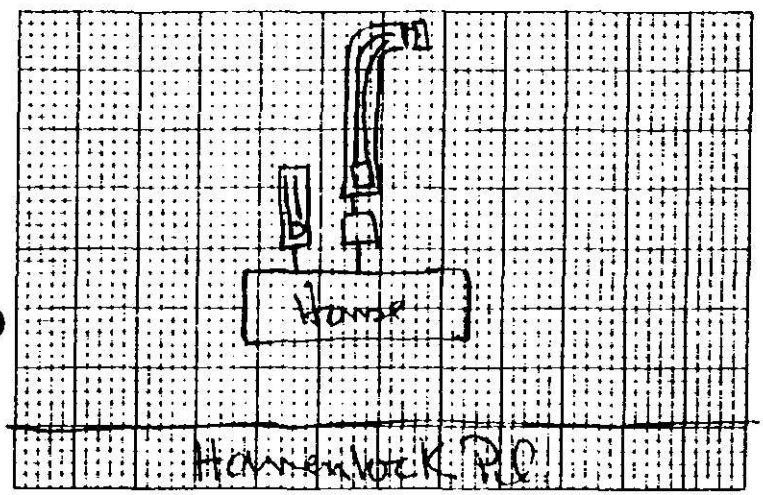
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 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 6481, dated 6-12-73 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 16 NOV 73, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 48

Liquid Capacity of Tank 1500 gal

Tank Construction Precast Concrete

Absorption and/or Nitrification Lines:

Total Line Lenght 480 & 150'

Number of Lines (5) 12½' x 96'

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Gethys Const Co. Inc.

LOCATION OF PROPERTY Havenlock Pl.

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: washer line 7½' x 50'
aeration pit 2½' x 7' x 4' stone

Division or Section Head

C. 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

Serial 4097

C of A (s) No. 6481

Date Issued 17 Oct 1973.

T C No. 107-263-11

John R Adkisson

Map Date 8-9-22

CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Gettys Const Co. Inc. (LAST / FIRST / MIDDLE)

Location of Property Haverlock Pl

Application Number 6481 Permit Number 6481

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material concrete

Total Length of Drain Tile 480 l/ft Number of Lines 5

Depth of Filter Material 17" Cover Depth 24"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 10-16-73 (DATE) Tank Inspected 10-16-73 (DATE)

Nitrification Field Inspected 10-16-73 (DATE)

Washing Machine Line Inspected, If Applicable 10-16-73 (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: wash line in bed 7½' x 5-0' x 17"

John R Adkisson

Environmentalist

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

HEALTH DEPARTMENT'S COPY