SEE INSTRUCTIONS ON BACK

Date Received 6-7-77

ICAR(S) Application No. 1255

T C No. C31-C32-18

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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 Department of Environmental Health 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

Mobile Home ___Yes___No

___Yes___No

___Yes___No

___Yes___No

A. Water Supply

A. Individual Well

B. Governmental System

C. Community System

Well Source

2. Governmental Source

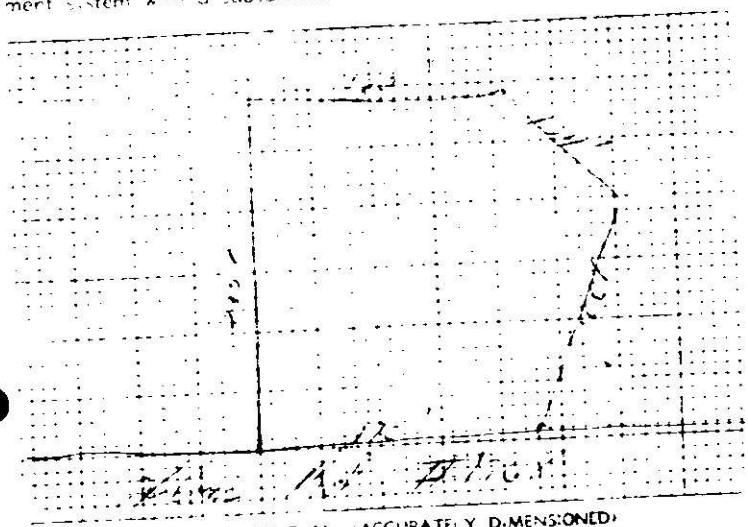
D. Sewage System

Is property within 300 feet of public sewer? ___Yes___No

Is property within 300 feet of community sewer? ___Yes___No

E. EHA Case No.

F. LA Case No.



3. PLOT PLAN (ACCURATELY DIMENSIONED)

13. NAME OF OWNER ___ LAST ___ FIRST ___ MIDDLE

14. ADDRESS OF OWNER

15. PHONE NO. Home ___ Office

16. LOCATION OF SYSTEM HELMS Rd off #27 W
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 SOIL INVESTIGATION 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.

6-7-77
DATE OF APPLICATION

OWNER

Environmental Health Department's Copy

EHD-5-76

Date Issued 7 June 77

Serial No. 0465

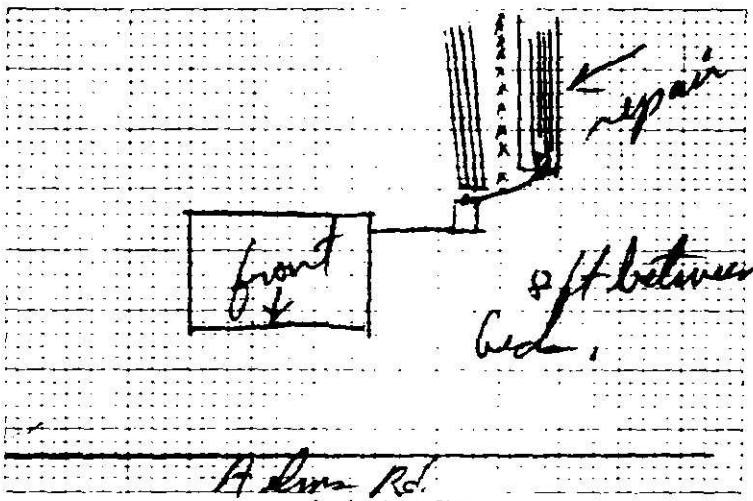
ICAR(S) Permit No. 12550

T. C. No. 031-033-A

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, ___ 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.



Permit No. ___

Liquid Capacity of Tank ___ Bypass

Tank Construction ___

Absorption and or Nitrification Line

Total Line Length 200 l/ft

Number of Lines 4

Distance from House 20' +

Distance from Property Line 10' +

Distance from Well 50' +

NAME OF OWNER Blanche Caldwell

LOCATION OF PROPERTY Helms Rd

This system is approved subject to the requirements set forth in the Regulations of the Mecklenburg County Board of Health governing the granting of this permit. A certificate of approval will be issued by the Department before any system can be covered up or otherwise rendered uninspectable.

Comments in bed 10 x 50 x 11"

John R Adkinson
Environmentalist

Division or Section Head

* Where this permit is for the installation or construction of a new system, it must be signed by the division or 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-5176 Applicant's Copy **Department's Copy**

Date Issued 9 June 77 Serial No. 0777 C of A (s) No. 12550

T. C. No 031-033-1A

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL HEALTH DIVISION

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

Name of Owner Blanche Caldwell
LAST FIRST MIDDLE

Location of Property [illegible]

Application Number _____ Permit Number 12550

~~Expiration~~ Repair Date:

Liquid Capacity of Tank _____ Tank Material _____

Total Length of Drain Tile 200 L/ft Number of Lines 4

Depth of Filter Material 17" Cover Depth 18"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected _____ DATE Tank Inspected _____ DATE

Nitrification Field Inspected 9 June 1977 DATE

Washing Machine Line Inspected If Applicable _____ DATE

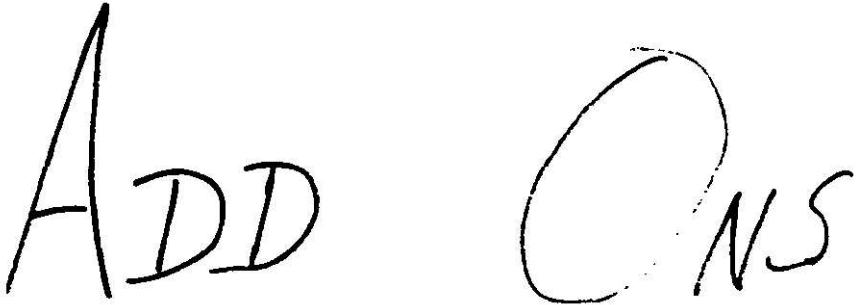
The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been installed or constructed, altered or repaired in accordance with the permit issued and the regulations of the Mecklenburg County Health Commission in 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 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 installed as permitted

John R. Adkisson
Environmentalist

EHD-5-76

Environmental Health Department's Copy


ADD ONS