B

SEE INSTRUCTIONS ON BACK

Date Received 12-20-73 ICAR(S) Application No 7384

T C No

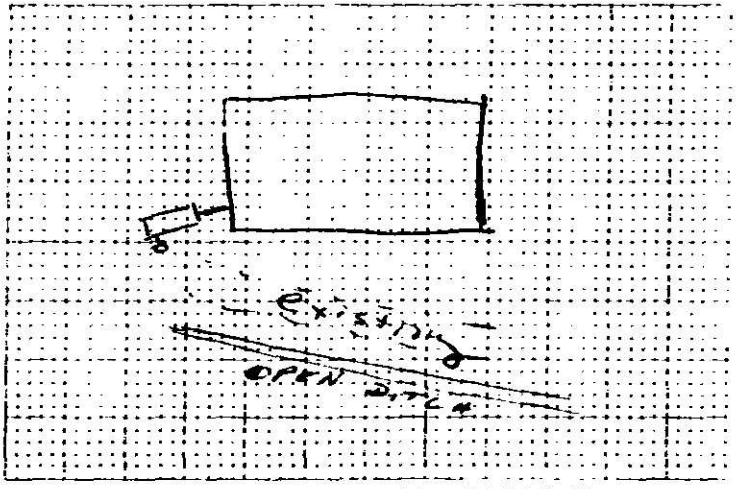
Map Date

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) X 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 Bdrms 3
5) Location Water Supply
Emp Loc
6) Water Main Sept.
7) Garbage Disp Yes No
8) Dishwasher Yes No
9) Water Softener
Auto Defrost Yes
Garbage Disposal
Well Type
Sump Pump
Water Softener Type
Yes No
10) EHA Case No
11) VA Case No

13) NAME OF OWNER SMITH (LAST) KULMAN (FIRST) (MIDDLE)

14) ADDRESS OF OWNER 1007 BELMORROW DR.

15) PHONE NO Home 392-1990 Office 596-8500

16) LOCATION OF SYSTEM AS ABOVE 1007 Belmorrow Dr. (STREET OR COUNTY ROAD)

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

12/14/73
DATE OF APPLICATION

Mrs Kulman B. Smith
OWNER

E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 12/26/23

Serial No. 4714

ICAR(S) Permit No. 7524

T. C. No. _____

Map Date _____

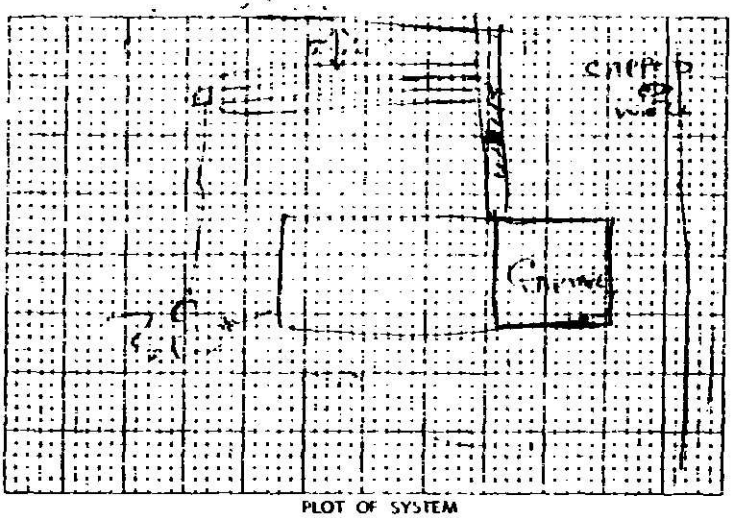
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 2231, dated 12/26/23 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 1/2/24, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate REPAIR

Liquid Capacity of Tank 1000

Tank Construction CONC

Absorption and/or Nitrification Lines:

Total Line Lenght 200 LF.

Number of Lines 4 (10' x 45' x 2")

Distance from House 10'

Distance from Property Line 10'

Distance from Well 50' CREEK

NAME OF OWNER Jennifer Smith

LOCATION OF PROPERTY 7621 Dimmocks Dr.

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: UNABLE TO LOCATE SEPTIC TANK. - SOUTH + CAN ONLY LIFT TO DRIVE 2 IN/LIFT TO TANK. NEED REPAIR W/ LEVEL SITE SURVEY (BORED FOR SOIL SUITABILITY BY H.D.

11/[illegible]
Division or Section Head

[illegible]
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 4-8-74

Serial 4594

C of A (s) No. 7384

T C No. C-51251-07

Map Date 1/1/73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner SMITH (LAST) KENNETH (FIRST) (NEAL WAYNE) (MIDDLE)

Location of Property 1007 BELMEAD DR.

Application Number 7384 Permit Number 7384

Inspection Data:

Liquid Capacity of Tank REF Tank Material

Total Length of Drain Tile 200 Number of Lines 4

Depth of Filter Material 2.0" Cover Depth 28"

Water Supply Source CITY Distance from Water Source

Excavation Inspected 3/5/74 (DATE) ~~Tank~~ Inspected 4/8/74 (DATE) PUMP PIT

Nitrification Field Inspected 3/5/74 (DATE)

Washing Machine Line Inspected, If Applicable 3/5/74 4/8/74 (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 X 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: Letter: This system was repaired when property was sold by HD for letter to really Conv. selling property Smith to Hughes

L. H. Dickerson
Environmentalist

FORM NO. E-6.4-1-71

HEALTH DEPARTMENT'S COPY