Date Received 4/25/17 Apt. No. (S) _____ Application No. (W) 12254

T. C. No. 217-14321

Map Date —

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Payne (LAST) William (FIRST) J. (MIDDLE)

ADDRESS OF OWNER RFD. 2, Box 339-G Chlt. ZIP 28210

PHONE NO. Home 588-1372 Office 588 2789

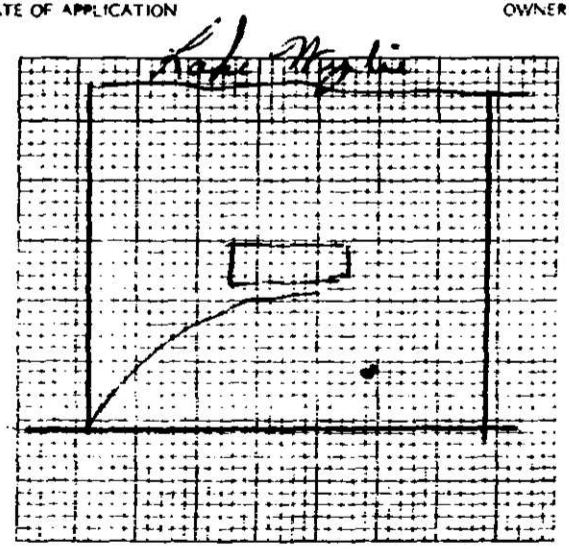
LOCATION OF PROPERTY Rosa Penny Rd. (STREET OR COUNTY ROAD)

WELL CONTRACTOR _____ LICENSE NO _____

Application is hereby made to the Mecklenburg County Department of Environmental Health for a permit to drill a water well on the hereinabove described lot to be used as a source of ___ individual, ___ semi public, or ___ public water supply.

4-25-17
DATE OF APPLICATION

x William J Payne
OWNER



ACCURATELY DIAGRAM & DIMENSION LOT

Remarks: may locate pa property owner request

Application approved and permit hereby granted

Permit No: 12356

John R Atkisson
ENVIRONMENTALIST

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 4/25/77

ICAR (S) Application No. 12256

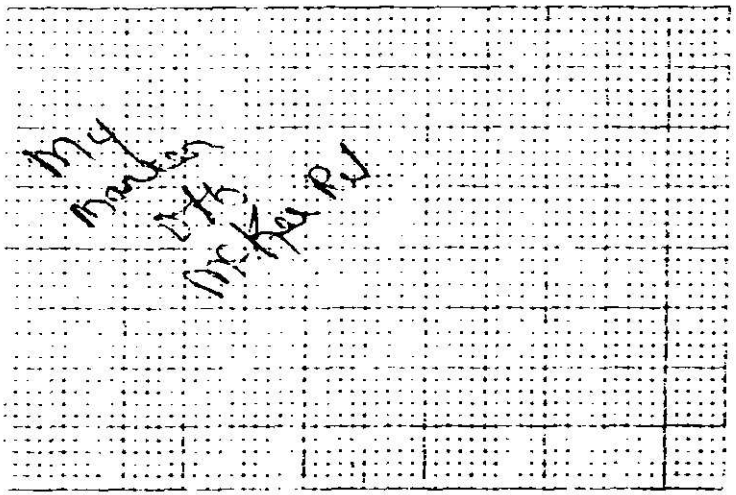
T. C. No. 217-142-21

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) N/A Build House - do away with M.H. Alter or Repair an individual septic tank wastewater treatment system with a subsurface, soil absorption, effluent discharge.



3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ___ Yes ___ No
Residence ↘ Yes ___ No
4 No. of Bedrooms 3
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 X
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 Payne (LAST) William (FIRST) ___ (MIDDLE)

14) ADDRESS OF OWNER RFD 2, Box 339 C 28212

15) PHONE NO. Home 588-1372 Office 588 2789

16) LOCATION OF SYSTEM Rosa Penny Rd (STREET OR COUNTY ROAD)

17) SUBDIVISION Lake Wylie Lot No. 68 Block No. 44

Map Book No 17 Page No. 466

18) DEED REFERENCE — DEED BOOK 3832 AT PAGE 202

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.

DATE OF APPLICATION ___

X William Payne
OWNER

EHD-5-76

Environmental Health Department's Copy

Serial No. 0697

LA No. 12256

Date Issued 4/25/77

T. C. No. 217-143-21

Map Date -

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Payne (LAST) William (FIRST) J. (MIDDLE)

ADDRESS OF OWNER RFD 2, Box 339 G, Charlotte, N. C. ZIP 28210

LOCATION OF LOT Rosapenny Road (STREET OR COUNTY ROAD)

SUBDIVISION Lake Wylie LOT NO 68 BLOCK NO. 44

MAP BOOK NO. _____ PAGE NO _____

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, 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 12256. 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 soil investigation 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, altered, 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.

* Mobile home ~~xxxxxx~~ shall be removed prior to final approval of power to house.

John R. Davisson
Environmentalist

Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

TO: RECORD SECTION — MECKLENBURG COUNTY BUILDING INSPECTION DEPARTMENT
POST OFFICE BOX 1516, CHARLOTTE, NORTH CAROLINA 28232

PROJECT Payne, William J. PARCEL NUMBER

ADDRESS Rosapenny Road, Lot 68, Section 44

Lake Wylie

HOLD — CERTIFICATE OF [redacted]/OCCUPANCY

Environmental Health Department — John A Dickerson — 4/25/77
Agency — Name — Date

ISSUE — TEMPORARY CERTIFICATE OF OCCUPANCY TO EXPIRE ON

Agency — Name — Date

RELEASE — PERMANENT CERTIFICATE OF COMPLIANCE/OCCUPANCY

Agency — Name — Date

RELEASE — PROVISIONAL PERMIT

Agency — Name — Date

INSTRUCTIONS

To withhold a Certificate Occupancy submit one form for each address and identify project.

For subdivisions and multi-family dwellings make request by development sections. Show street names followed by the house numbers of the first and last building on each street and list. If possible use one form for each development section.

A Temporary Certificate will be changed to permanent upon receipt of the duplicate white copy of this form with the release block completed.

Neither a Temporary nor Permanent Certificate can be issued if another agency is withholding it.

The agency recommending a Temporary Certificate has the responsibility of monitoring the expiration date. No action will be taken by the Building Inspection Department unless requested in writing.

Release all Provisional Permits when the provisions are fulfilled. No Certificate will be issued while Provisional Permits are pending.

All inquires will be directed to the agency and person shown above.

SUBMIT THIS COPY TO RELEASE CERTIFICATE