Date Received 5/18/78

APT No 1457

T C No 125-133-24

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER JAMES (LAST) CLARA (FIRST) A. (MIDDLE)

2) ADDRESS OF OWNER 313 E. CHURCH ST. APT. 203 ZIP 28202

3) PHONE NO Home 333-4321 Office 333-4321

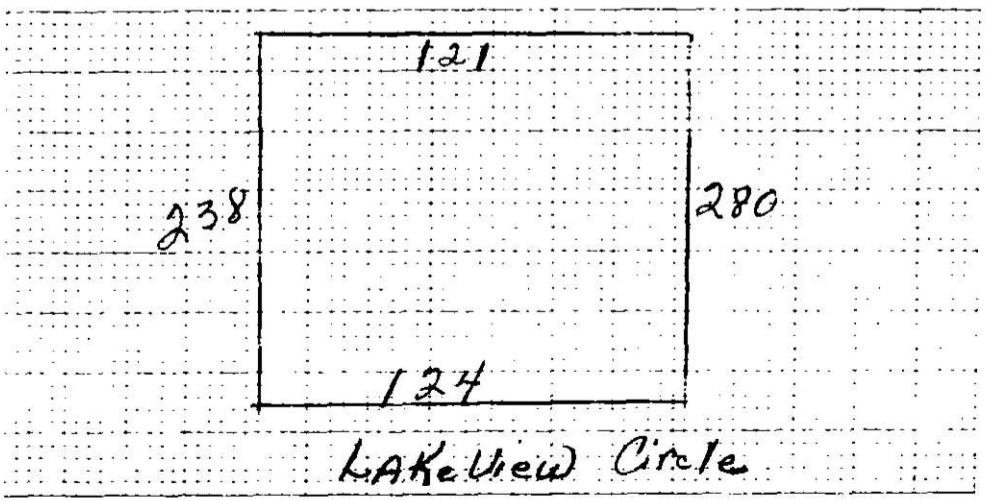
4) LOCATION OF PROPERTY LAKEVIEW CIRCLE (STREET OR COUNTY ROAD)

5) SUBDIVISION LAKEVIEW LOT NO # 4 BLOCK NO 5

MAP BOOK NO PAGE NO 333

6) DEED REFERENCE DEED BOOK PAGE NO

Application is hereby made to Mecklenburg County Department of Environmental Health for the examination of the soil on the property described above for the purpose of determining the suitability of the soil for the installation and operation of a sewage treatment system in accordance with the rules and regulations governing the same.



7) ACCURATELY DIAGRAM & DIMENSION LOT

Clara A. James
OWNER

Environmental Health Department's Copy

#14107

NORTH CAROLINA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES
RALEIGH, NORTH CAROLINA

APPENDIX H
SITE EVALUATION

(Ground Absorption Sewage Disposal)

OWNER: _____ DATE REQUESTED: _____
ADDRESS: _____ PLAT NO.: _____
COUNTY: _____ LOT SIZE: _____
LOCATION OF SITE: _____

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S PS U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, Note 2:1, Clay)	S PS U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12.36 in.) (Clayey Soils)	S PS U	S PS U	S PS U	S PS U
4. SOIL DEPTH (In.)	S PS U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (In.) (Impervious Strata, Rock)	S PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (External & Internal)	S PS U	S PS U	S PS U	S PS U
7. SOIL PERMEABILITY (Percolation Rate)	S PS U	S PS U	S PS U	S PS U
8. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
9. SITE CLASSIFICATION				
SOIL SERIES				

S - Suitable PS - Provisionally Suitable U - Unsuitable

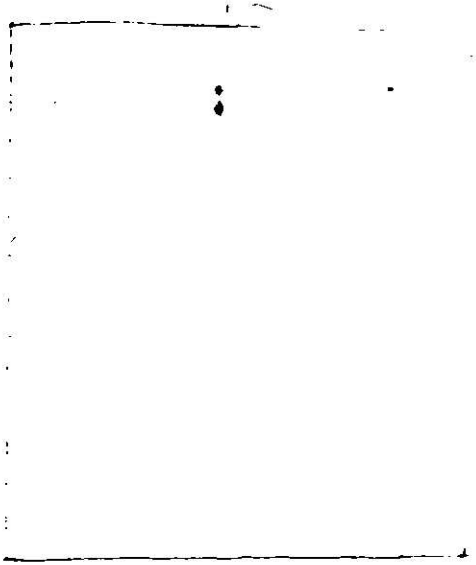
* See Diagram on Back (Include: Soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slope patterns, etc)

Recommendations/Comments: _____

Described By: _____

Title: _____ Date: _____

PHS Form 2601 (2/77)
Sanitation



MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
[illegible] BOARD
CHARLOTTE NORTH CAROLINA 28203

SITE INVESTIGATION REPORT
INDIVIDUAL SEPTIC TANK SYSTEM WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

SIR.NO. 14107
T. C.NO. 193-133-24
MAP DATE ----
DATE 6-1-78

NAME OF OWNER James, Clara G.

ADDRESS OF OWNER 515 N. Church St. Apt. 205 Charlotte, NC 28202

LOCATION OF LOT Lakeview Circle Lot 4 Block B Subdivision - Lakeview

At your request and pursuant to Section, 1900 of the North Carolina Administrative Code, Title 10, Department of Human Resources, Chapter 10, Health Services, Subchapter 10A, a site evaluation has been made for an on premises ground absorption sewage disposal system on the property designated above and the following conditions were found:

Soil Structure Massive
Soil Permeability Unsuitable
Site Classification Unsuitable

Section 10 of the North Carolina Administrative Code 10A, .1910 of these regulations states "Sites originally classified as unsuitable may be used for soil absorption disposal systems, provided engineering, hydrogeologic, and soils studies indicate to the local agency that a suitable alternate system can reasonably be expected to function satisfactorily.

Section 10, North Carolina Administrative Code 10A, .1916 states that "The design, construction, and maintenance of ground absorption sewage systems, whether septic tank systems or alternate systems shall be the responsibility of the owner, developer. installer, and user of the system as applicable in the circumstances."

We would also advise you that according to Regulation 10, North Carolina Administrative Code 10A, . 1916(b), "Actions of representatives of state or local agencies engaged in the evaluation and determination of measures required to effect compliance with the provisions of this section shall in no way be taken as a guarantee that sewage disposal systems approved and permitted will function in a satisfactory manner for any given period of tire or that such employees assume any liability for damages, consequential or direct, which are caused or which may be caused, by a malfunction of such system.

These regulations became effective July 1, 1977. Since that time the second sentence of Section .1910(c) has been found to be nugatory. For this reason, if you desire to file for permission to install an "alternate" system you should present this office with your proposals in the form of plans and specifications. These would be reviewed and if it is found that the system may reasonably be expected to function satisfactorily approval may be given on the execution by you of a "Septic Tank Agreement Form" available in this office.

John R. Adkisson, Environmentalist
On Premises Waste Disposal

EHD #584

R

SEE INSTRUCTIONS ON BACK

Date Received 10/8/92

ICARIS Application No 14107

T C No 13324

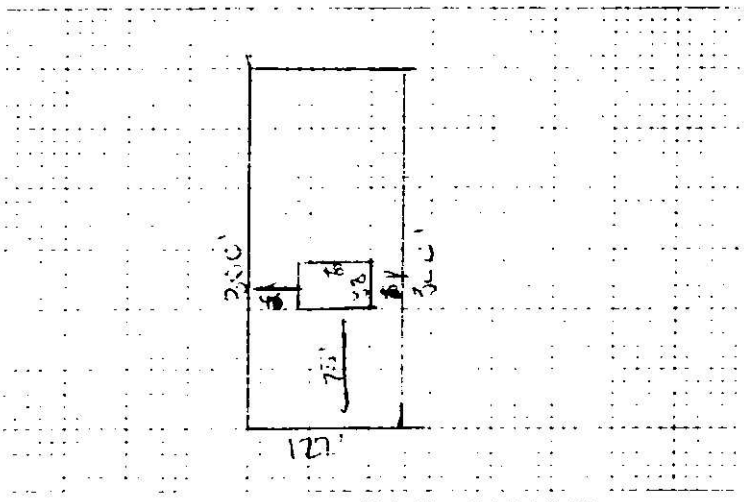
Map Date 1/11/93

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

Install a 2 Bedroom Alter or Repair an individual septic tank wastewater treatment and disposal system with subsurface discharge



3 PLOT PLAN ACCURATELY DIMENSIONED

Water Supply: Well / Public

Sewage Disposal: Septic Tank / Other

Are Soil Conditions Adequate? Yes / No

Is Property Subject to Flooding? Yes / No

Is Property Subject to Ponding? Yes / No

Is Property Subject to Rock Outcrop? Yes / No

Is Property Subject to Seepage? Yes / No

Is Property Subject to Slope? Yes / No

Is Property Subject to Wet Soil? Yes / No

Is Property Subject to Other? Yes / No

13 NAME OF OWNER E & T Construction Co, Inc. (LAST / FIRST / MIDDLE)

14 ADDRESS OF OWNER P.O. Box 357, Huntersville, N.C. 28174

15 PHONE NO Home ____ Office 233-4636

16 LOCATION OF SYSTEM Huntersville Circle (STREET OR COUNTY ROAD)
Located off of Sam Newell Rd

17 SUBDIVISION ____ Lot No 4 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 thereof are true to the best of his knowledge and that any permit applied for herein shall be void and of no effect if any of the above statements are not true

10/8/92
DATE OF APPLICATION

Thomas A Keith
OWNER

ENVIRONMENTAL HEALTH DEPARTMENT COPY

SEE INSTRUCTIONS ON BACK

Date Received [illegible]

ICAR(S) Application No [illegible]

T C No [illegible]

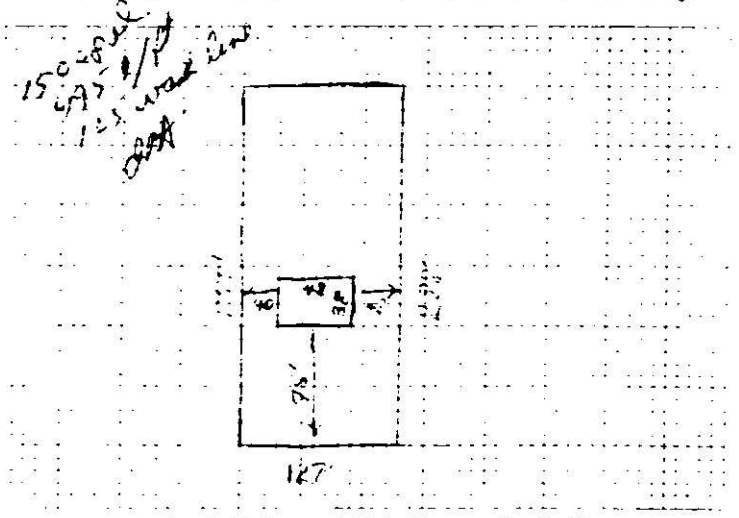
Map Date [illegible]

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)

This application is hereby described hereinafter hereby applies to the Mecklenburg County Department of Environment[illegible] permit [illegible]

[illegible] Subject 2 [illegible] Alter [illegible] Repair [illegible] wastewater treatment [illegible] [illegible] [illegible] [illegible] [illegible] of discharge



3 PLOT PLAN ACCURATELY DIMENSIONED

[illegible] Yes [illegible] No

[illegible] Yes [illegible] No

[illegible] Yes [illegible] No

[illegible] Yes [illegible] No

[illegible] Yes [illegible] No

[illegible] Yes [illegible] No

[illegible] Yes [illegible] No

[illegible] Yes [illegible] No

[illegible] Yes [illegible] No

[illegible] Yes [illegible] No

5 NAME OF OWNER [illegible] LAST [illegible] FIRST [illegible] MIDDLE

14 ADDRESS OF OWNER [illegible]

15 PHONE NO Home [illegible] Office [illegible]

16 LOCATION OF SYSTEM [illegible] STREET OR COUNTY ROAD [illegible]

17 SUBDIVISION [illegible] Lot No [illegible] Block No [illegible]

Map Book No [illegible] Page No [illegible]

18 DEED REFERENCE — DEED BOOK [illegible] AT PAGE [illegible]

19 HAS A SOIL INVESTIGATION BEEN RUN? YES [illegible] NO DATE RUN [illegible]

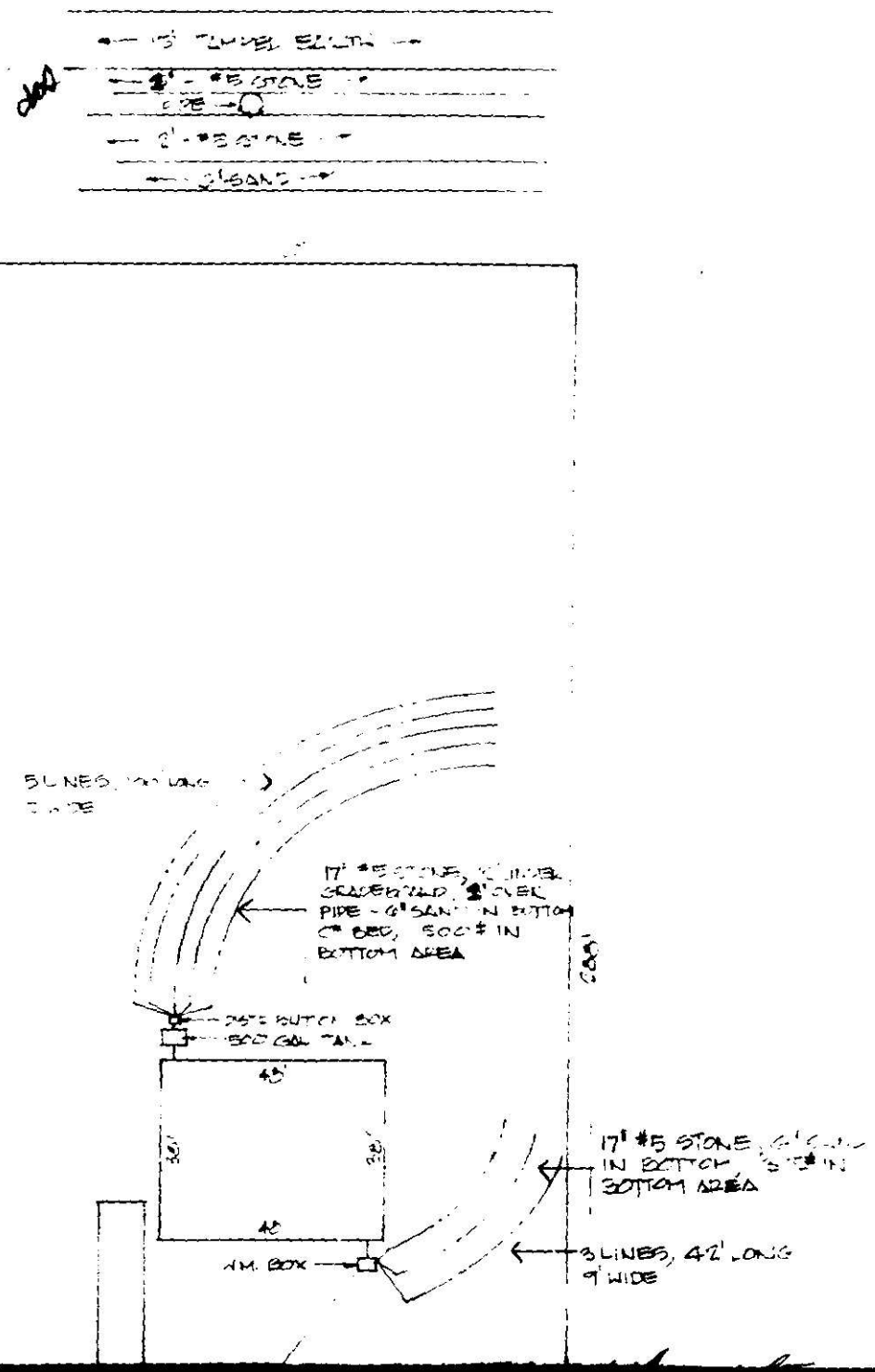
20 PTR NUMBER See Instructions

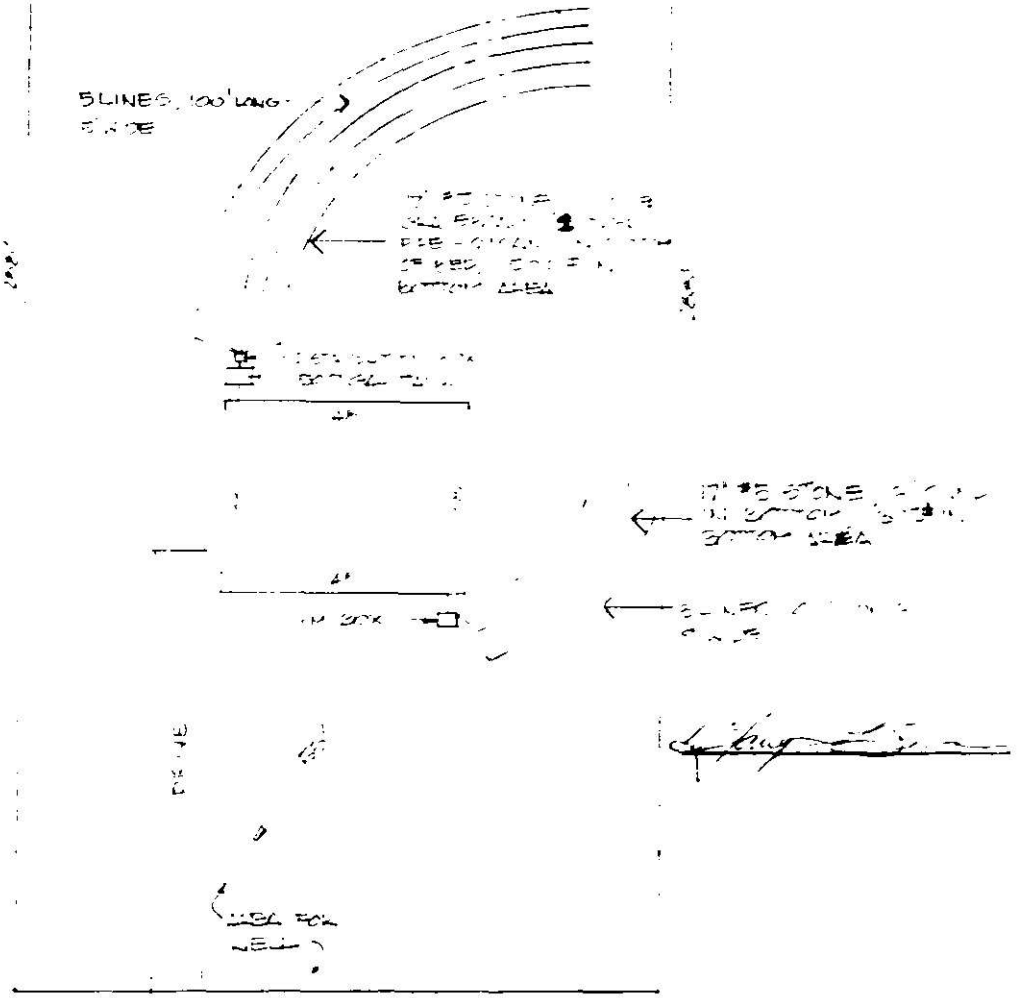
The undersigned person hereby agrees that he has read the foregoing application and that the contents [illegible] are true [illegible] understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true

DATE OF APPLICATION [illegible]

OWNER [illegible]

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY


3' TUNNEL EARTH
2'-#5 STONE
PIPE
2'-#5 STONE
2' SAND
5 LINES, 40' LONG
PIPE
17' #5 STONE, 6" TUNNEL
GRADED W/ 2" OVER
PIPE - 6" SAND IN BOTTOM
OF BED, 500# IN
BOTTOM AREA
200'
CAN'
25'# CUTOFF BOX
500 GAL TANK
45'
30'
30'
40'
AM. BOX
17' #5 STONE, 6" TUNNEL
IN BOTTOM 500# IN
BOTTOM AREA
3 LINES, 42' LONG
9' WIDE



UNEVEN CIRCLE

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

COPY

SEPTIC TANK AGREEMENT
14107

The undersigned, Gary Lynn Sease, owner of property located at Lakeview Circle, ("the site") and described in Instrument recorded in Book 6 at Page 353, Mecklenburg Public Registry, hereby acknowledges that he applied to the Department of Environmental Health for a permit to install a septic tank sewage disposal system on the site; the Department evaluated the site for suitability for such a system in accord with the regulations promulgated by the North Carolina Commission for Health Services as 10 NCAC 10A .1900 et seq; that the Department classified the site as Unsuitable and an appropriate permit was issued by the Department.

The undersigned further acknowledges that the proper design, construction, and maintenance of such septic tank system is his responsibility and that neither the Department nor its officials, employees, or agents warrant or guarantee that the said system installed pursuant to the permit issued by the Department will function in a satisfactory manner for any given period of time, or that the Department, its officials, employees, or agents assume any liability for damages, consequential or direct, which are caused, or which may be caused, by a malfunction of such system.

This document shall be placed on the public records of the Register of Deeds of Mecklenburg County and indexed therein under the Grantor Index in the name or names of the undersigned, and the foregoing acknowledgements shall henceforth be binding on all persons claiming any right, title, or interest in the site.

And the undersigned further agrees for himself, his heirs and assigns, that he shall indemnify and hold harmless the Department and its successors, as well as Mecklenburg County, for any damages or other claims of any person or persons whatsoever arising out of the installation, operation, or failure, of said septic tank system.

And the undersigned further agrees for his heirs and assigns that, in the event any septic tank system installed under authority of the aforesaid permit fails to perform adequately, in any respect, he will take whatever measures are required to correct same; or it such is impossible he will discontinue use of said system immediately.

Use of the singular masculine pronoun forms herein shall be deemed to also include the plural and feminine forms as the context may require.

This 16th day of October, 19 80.

Gary Lynn Sease (Seal)

(Seal)

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, Anne M. Goss, a Notary Public for said County and State, do hereby certify that Gary Lynn Sease, personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this 16 day of October, 1980.

Anne M. Goss
Notary Public
My Commission Expires: 4/24/83

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I, _____, a Notary Public for said County and State, do hereby certify that _____ personally came before me this day and acknowledged that he is _____ of _____, and that by authority duly given and as the act and deed of said corporation, the foregoing instrument was signed in its name by its _____, sealed with its corporate seal and attested by _____ as its _____.

WITNESS my hand and notarial seal, this _____ day of _____, 19___.

_____
Notary Public
My Commission Expires: _____

FILED
OCT 16 9 27 AM '80
REGISTER

Date Issued Oct. 16, 1980

Serial No. 4537

LA No 14107

T C No 193-133-24

Map Date 1/11/80

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 Sease, Gary Lynn (LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 3413 Crosswinds Road, Charlotte, NC 28212

LOCATION OF LOT Lakeview Circle (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO #4 BLOCK NO

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 and 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 14107
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 permits which have been issued to authorize construction on the said lot 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

**********AGREEMENTS HAVE BEEN RECORDED****

Environmentalist

John A. Adkisson
Environmental Health Director or Authorized Section Head

EHD 5-76

Environmental Health Department's Copy

Date Issued 2-22-91

Serial No. 4553

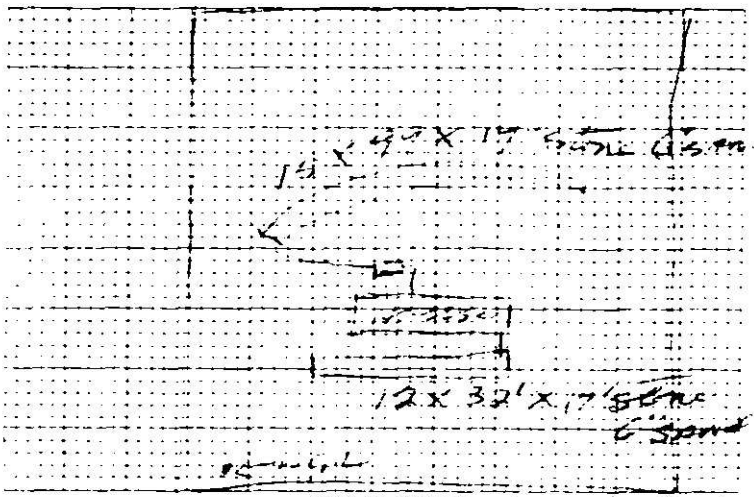
ICAR'S Permit No. 1411 I

T C No 93-133-244

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 2-19-91 and this permit shall be void and of no effect if the information provided in the application is in true or is erroneous. All work shall be completed on or before 2-23-91 after which date this permit shall be null and void.



PLOT OF SYSTEM ← Lakeview Circle

Permeability Rate 4/5

Liquid Capacity of Tank 1500

Type Construction PC

Absorption and or Nitrification Line

Total Line Length 48'-12'-

Number of Lines 3-4

Distance from House 10'-1

Distance from Property Line 26-1

Distance from Well 50'+

NAME OF OWNER Sease, Gary Lynn

LOCATION OF PROPERTY Lake View Circle

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Health Commission which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Environmental Health Director before any system can be covered up or otherwise rendered uninspectable or can be used. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed 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.

Comments: Septic Tank(s) and Field 12'X32'X17'Stone 6" Sand
Existing Machine Field 12X32'X17'Stone 6" Sand

_____ Division or Section Head

_____ 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 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-5-7a

Environmental Health Department's Copy

C of A (s) No 1407

Date Issued 2-26-81 Serial 4310

T C No 193-133-24

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 Lineberry, Ken D (LAST, FIRST, MIDDLE)

Location of Property Patterson Cir

Application Number 1402 Permit Number 1407

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material F.C.

Total Length of Drain Tile 495'+125' Number of Lines 5+4

Depth of Filter Material 12" Cover Depth 15"

Water Supply Source well Distance from Water Source 50'

Excavation Inspected 2-26-81 (DATE) Tank Inspected 2-26-81 (DATE)

Nitrification Field Inspected 2-26-81 (DATE)

Washing Machine Line Inspected If Applicable 2-26-81 (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(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

Bob Wilson
Environmentalist

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 9-22-81

ICAR(S) Application No 14107

T C No 193-133-2

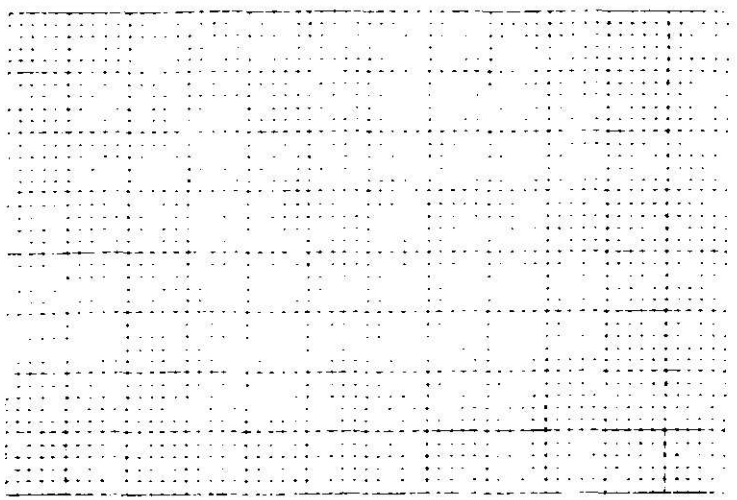
Map Date

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 the property described hereinafter hereby applies to the Mecklenburg County Department of Environmental Health 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 or effluent discharge



3 PLOT PLAN (ACCURATELY DIMENSIONED)

Water Heater Yes X No
Refrigerator X Yes No
4 No. of bedrooms 3
5 Extra use Yes No
Explain
6 Washing Machine X Yes No
7 Garbage Disposal Yes X No
8 Dishwasher X Yes No
9 Water supply
A Individual well X
B Governmental System
C Community system
1 Well source
2 Governmental source
Sewage System
Property located within 200 feet of public sewer Yes X No
Property located within 200 feet of community sewer Yes X No
11 FHA Case No
12 VA Case No

13) NAME OF OWNER Seese (LAST) Cindy (FIRST) B (MIDDLE)

14) ADDRESS OF OWNER 2100 Lakeview Circle Matt.

15) PHONE NO Home 847-7455 Office 537-1344

16) LOCATION OF SYSTEM 2100 Lakeview Circle (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.

Sept. 25, 81
DATE OF APPLICATION

Cindy B Seese
OWNER

EHD-5-76

Date Issued Oct [illegible] Serial No 5064

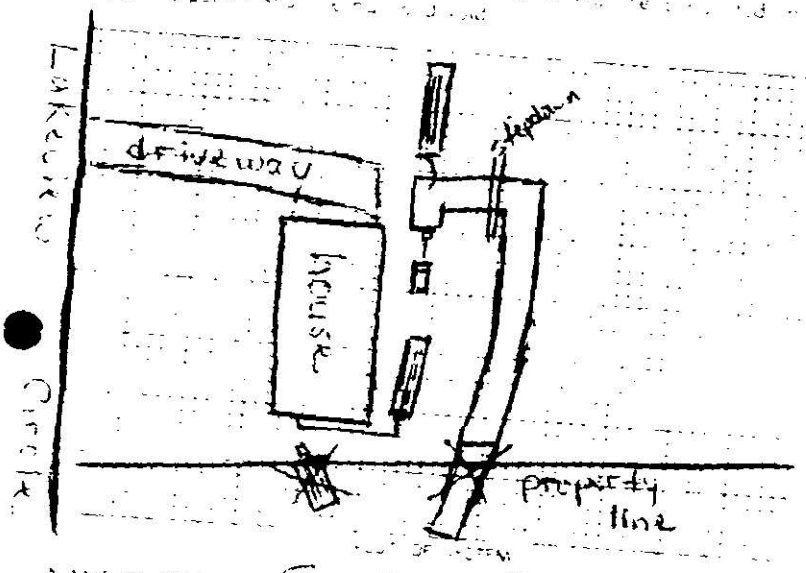
ICAR/S Permit No 1410

T C No 113-33-3

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 granted to Contractor ✓ Owner to install septic tank waste water treatment system and subsurface soil absorption system as described below and on the attached plot plan. Septic tank to be [illegible] gallons capacity. Distribution box to be [illegible] Trench bottom to be [illegible] deep. Trenches to be [illegible] wide and [illegible] long. Total length of trenches to be [illegible] feet. Trenches to be [illegible] apart. Septic tank to be installed [illegible] feet from the Existing [illegible] and [illegible] feet from the [illegible] Well. Septic tank and trenches to be located as shown on the attached plot plan. Permit is issued on the basis of [illegible] bedrooms. Any change in the number of bedrooms must be approved by the Environmental Health Director before construction is started. Any change in the system as shown on the attached plot plan must be approved by the Environmental Health Director before construction is started. Permit is issued on the basis of [illegible] gallons per day sewage flow. Any change in the sewage flow must be approved by the Environmental Health Director before construction is started. Permit is issued on the basis of [illegible] gallons per square foot per day soil absorption rate. Any change in the soil absorption rate must be approved by the Environmental Health Director before construction is started. Permit is issued on the basis of [illegible] gallons per square foot per day soil absorption rate. Any change in the soil absorption rate must be approved by the Environmental Health Director before construction is started. Permit is issued on the basis of [illegible] gallons per square foot per day soil absorption rate. Any change in the soil absorption rate must be approved by the Environmental Health Director before construction is started.



Well [illegible]

[illegible] 125' + 125'

2 + 2

> 5'

> 10'

> 50'

NAME OF OWNER Grace, Cindy B.

LOCATION OF PROPERTY 3120 Lakecrest Circle

The system shall [illegible] the construction requirements as set forth in the Regulations of the Mecklenburg County Health Comm[illegible] which are in effect on the date of the granting of this permit. A certificate of [illegible] approval must be issued by the Environmental Health Director before any system can be covered up or otherwise rendered inaccessible for inspection. No system can be used. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed will operate properly. Failure to [illegible] or new or hereafter owning, [illegible] trading or using the [illegible] shall relieve him of the duty to [illegible] the system to operate properly.

add a 6' wide x 15' long x 25" sand + 70" stone level with s[illegible] drainfield
Comments add a 6' wide x 15' long x 25" sand + 70" stone for washer
call for partial before system is added.

Division / Section Head [illegible] Environmentalist Phillip Jackson

* 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 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.

Remarks cut off drainfields to a minimum of 10' from property line + leave open for inspection before packing back

BJ 11-15-

C of A (s) No

Date Issued

Serial 4857

T C No

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
LAST FIRST MIDDLE

Location of Property

Application Number

Permit Number

Inspection Data:

Liquid Capacity of Tank

Tank Material

Total Length of Drain Tile

Number of Lines

Depth of Filter Material

Cover Depth

Water Supply Source

Distance from Water Source

Excavation Inspected
DATE

Tank Inspected
DATE

Nitrification Field Inspected
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 ✓ 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(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

Mike Dixon
Environmentalist

EHD-5-76

Environmental Health Department's Copy