SEE INSTRUCTIONS ON BACK

Date Received _____

ICAR (S) Application No. 19440

T. C. No. 053-189-19

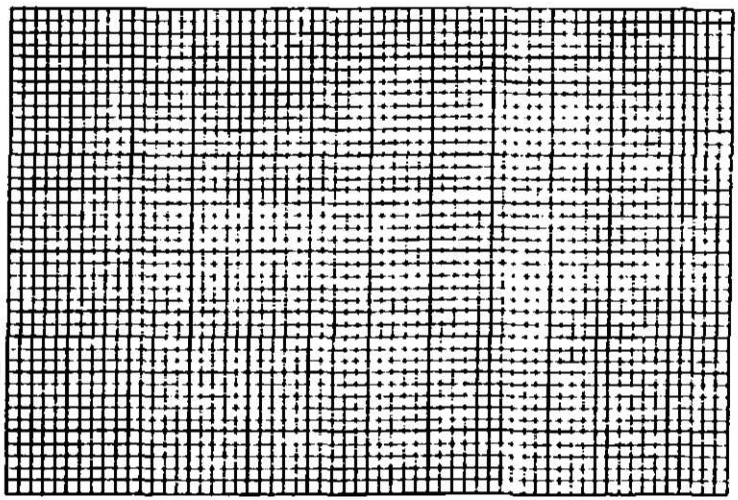
Map Date IP in CRT

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: use existing system

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) Mobile Home ___ Yes X No
5) Residence X Yes ___ No
6) No of Bedrooms 4
7) Business Use — Max No Employees ___
8) Washing Machine X Yes ___ No
9) Garbage Disposal ___ Yes X No
10) Dishwasher ___ Yes X No
11) Water Supply:
A) Individual Well ___
B) Governmental System ___
C) Community System:
1. Well source X
2. Governmental source ___
12) Sewage System:
House located within 200 feet of public sewer ___ Yes X No
House located within 200 feet of community sewer ___ Yes ___ No
13) FHA Case No. ___
14) VA Case No. ___

13) NAME OF OWNER ~~CRAFT~~ HARRIS CHARLENE
LAST FIRST MIDDLE

14) ADDRESS OF OWNER RT 5 BOX 1030 MOORES CHAPEL RD.

15) PHONE NO. Home ___ Office 814-3898

16) LOCATION OF SYSTEM 1115 MOORES CHAPEL RD.
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.

5/3/85
DATE OF APPLICATION

Charlene Harris
OWNER

AGENT Tillman Bowen of Gastonia

EHD-S-76

Health Department's Copy

MAR - 9 ... SEE INSTRUCTIONS ON BACK

Date Received 3-9-83

ENVIRONMENTAL HEALTH

ICAR(S) Application No. 19440

T. C. No. [redacted]

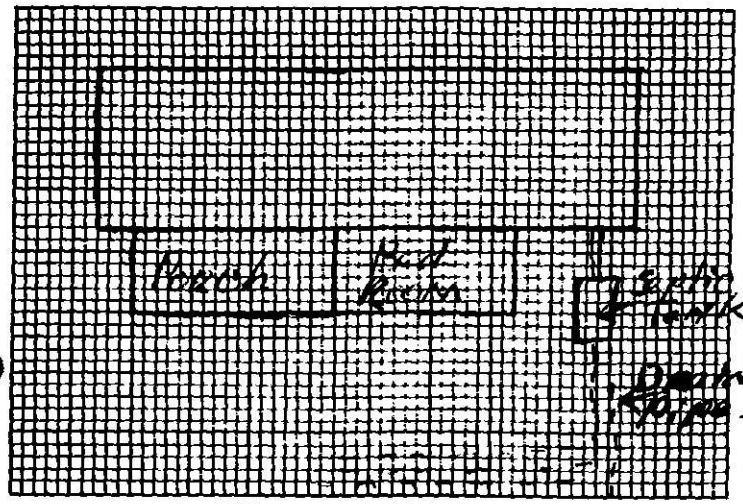
Map Date 053-189-19

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: Build additional trench onto Existing

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)

Mobile Home ____Yes ____No
Residence ____Yes ____No
4) No. of Bedrooms 3 + Added Trench (1)
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 Harris (LAST) Clarence (FIRST) Vernon (MIDDLE)

14) ADDRESS OF OWNER Rt. 5, Box 30, Moores Chapel Rd. 28208

15) PHONE NO. Home 394-4615 Office 864-9941 Gastonia

16) LOCATION OF SYSTEM 11-314 Moores Chapel Rd. & Cedarvale Rd. (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No. 3224 Page No. 061

18) DEED REFERENCE — DEED BOOK 3121 AT PAGE 0099 July or

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES _____ NO DATE RUN Aug 1975

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 hergin shall be void and of no effect if any of the above facts are not true.

3-4-83
DATE OF APPLICATION

Clarence V Harris
OWNER

EHD-5-76

ST. 3-15-83

Serial No. 6280

SIR No. 19440

Date Issued 3-14-83

T. C. No. 053-189-19

Map Date

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
IMPROVEMENT PERMIT
TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Hartis, (LAST) Clarence (FIRST) Vernon (MIDDLE)

ADDRESS OF OWNER Rt. 5, Box 1030, Moores Chapel Rd., Charlotte, NC 28208

LOCATION OF LOT 11215 Moores Chapel Road (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. _____ 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, 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 19440 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.

Use existing system.

Mike Dexter

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy