SEE INSTRUCTIONS ON BACK

Date Received 3-6-79

ICAR(S) Application No. 15171

T C. No. CC1-251-10

2

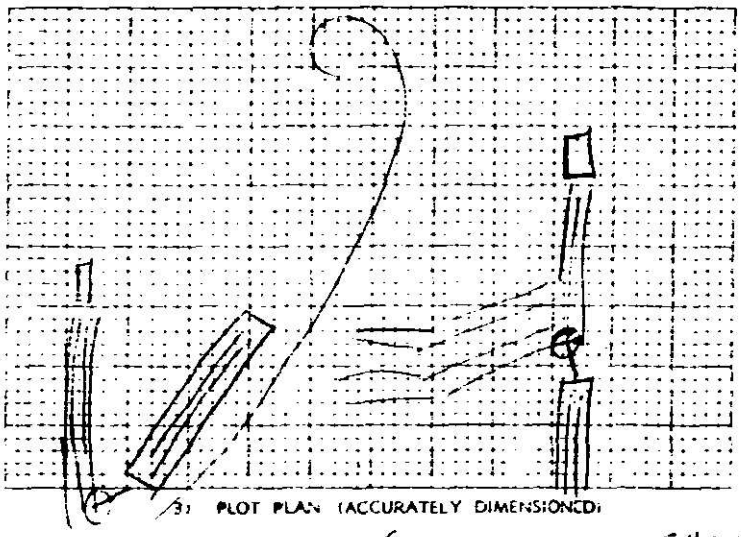
Map Date _____

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 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.



3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ____Yes ____No
Residence ____Yes ____No

4. No. of Bedrooms _____
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 GOUCH (LAST) CHARLES (FIRST) B (MIDDLE)

14) ADDRESS OF OWNER 514 S. HOSKIN ROAD

15) PHONE NO. Home _____ Office 392 5817

16) LOCATION OF SYSTEM OAKDALE MH. PARK W/T/KINSON BLVD. (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.

MARCH 5, 1979
DATE OF APPLICATION

J Russell Dobson GENERAL MANAGER
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued 3-6-79

Serial No. 2419

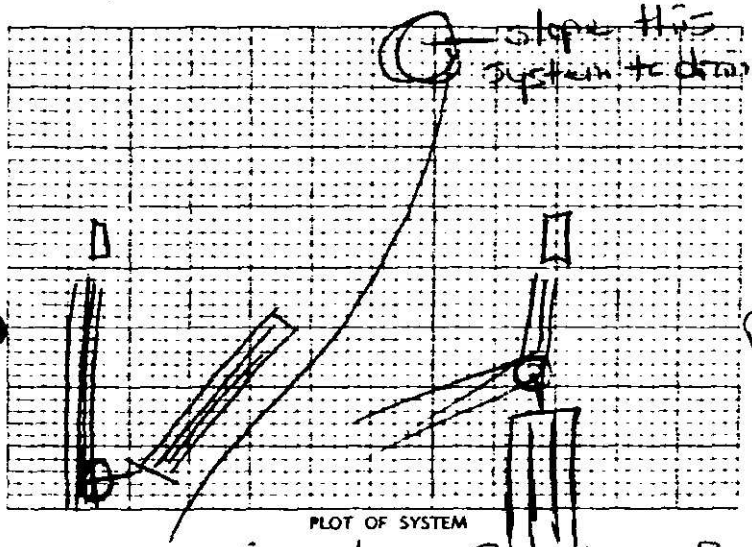
ICAR(S) Permit No. 15171

T. C No. 041-281-10

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 15171, dated 3-6-79, 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 3-10-79, after which date this permit shall be null and void.



PLOT OF SYSTEM

REPAIR

Permeability Rate

Liquid Capacity of Tank

Tank Construction

Absorption and/or Nitrification Lines

Total Line Length 350' + 100'

Number of Lines 4 + 2

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100' minimum

NAME OF OWNER Couch, Charles B.

LOCATION OF PROPERTY 5824 Wilkinson Boulevard

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.**

6 × 25' × 34" ct stone

12' × 45' × 34" ct stone

Division or Section Head

Environmentalist Michael Sexton

* 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-5-76

Environmental Health Department's Copy

Date Issued 3-1-79

Serial No. 2345

C of A (s) No 15171

T C. No CC 1-231-1C

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 Enoch, Charles B
(LAST, FIRST, MIDDLE)

Location of Property 5324 Wilkinson Blvd. (Oak Crest Mobile Home Park)

Application Number 15171 Permit Number 15171

Inspection Data:

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile 350' + 100' Number of Lines 4 + 2

Depth of Filter Material 34" Cover Depth 24"

Water Supply Source Well Distance from Water Source 100'+

Excavation Inspected — (DATE) Tank inspected — (DATE)

Nitrification Field inspected 3-9-79 (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(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

Michael C Jenkins
Environmentalist

EHD-S-76

Environmental Health Department's Copy

Date Issued 4-3-79

Serial No. 2529

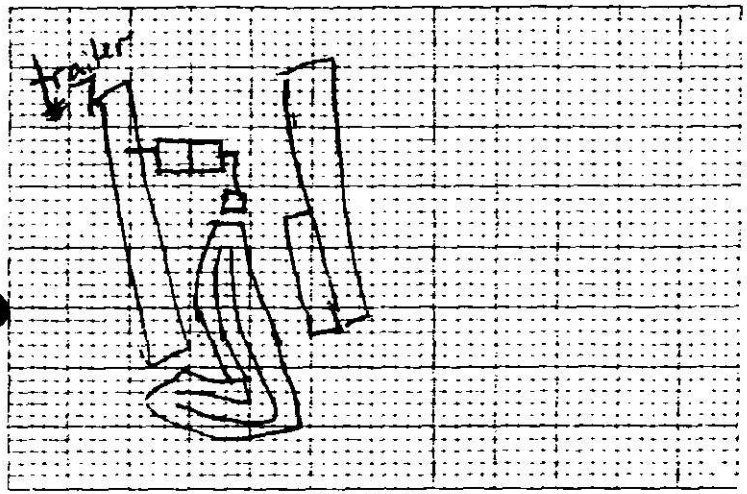
ICAR(S) Permit No. 15171

T. C. No. 061-251-10

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 15171 dated 3-6-79 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 5-3-79, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability, Rate —

Liquid Capacity of Tank 1000 gals

Tank Construction precast conc.

Absorption and or Nitrification Line:

Total Line Length 220'

Number of Lines 2

Distance from House >5'

Distance from Property Line >10'

Distance from Well >100'

NAME OF OWNER Gauch, Charles B.

LOCATION OF PROPERTY 5524 Wilkinson Blvd.

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 FROM OR HEREAFTER LIABLE CONTRACTS AND OBLIGATIONS FROM ANY INSUFFICIENCY [illegible] THE FAILURE OF THE SYSTEM TO OPERATE PROPERLY.

Comments:

add copper sulfate to the leaking system + take trailer off
6' x 40' x 53" of stone

Division or Section Head

Michael A Sexton
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-5-76

Environmental Health Department's Copy

Date Issued 5-1-79 Serial No. 2521 C of A (s) No. 15171

T C. No 061-281-10

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF COMPLETION

CERTIFICATE OF APPROVAL

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

Name of Owner Gouch (LAST), Charles (FIRST) B. (MIDDLE)

Location of Property 5324 Wilkenson Blvd.

Application Number 15171 Permit Number 15171

Inspection Data:

Liquid Capacity of Tank 1000 gallons Tank Material precast concrete

Total Length of Drain Tile 220' Number of Lines 2

Depth of Filter Material 53" Cover Depth 36"

Water Supply Source well Distance from Water Source >100'

Excavation Inspected — (DATE) Tank Inspected 5-1-79 (DATE)

Nitrification Field Inspected 5-1-79 (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(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

Michael A. Sexton
Environmentalist

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 1/9/81

ICAR(S) Application No. 15171

T. C. No. RS 061-281-10

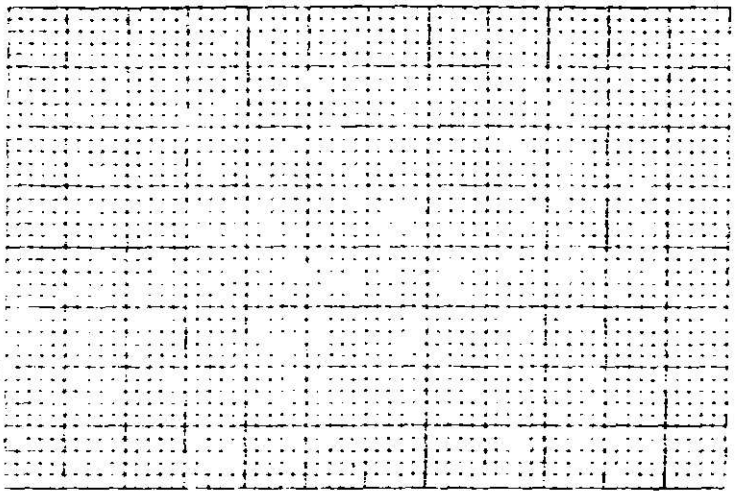
Map Date _____

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.



3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ✓ Yes ___ No
Residence ✓ Yes ___ No

4 No. of Bedrooms ___
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 VILLAGE MOBILE HOMES - GIBSON (LAST) E. (FIRST) RUSSELL (MIDDLE) GEN MGR.

14) ADDRESS OF OWNER 520 S HOSKINS RD

15) PHONE NO. Home ___ Office 392 5817

16) LOCATION OF SYSTEM 5820 WILKINSON BLVD. (STREET OR COUNTY ROAD)

17) SUBDIVISION OAKGROVE MOBILE HOME PARK 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.

1-9-81
DATE OF APPLICATION

E. Russell Gibson
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued 1/9/81

Serial No. 4456

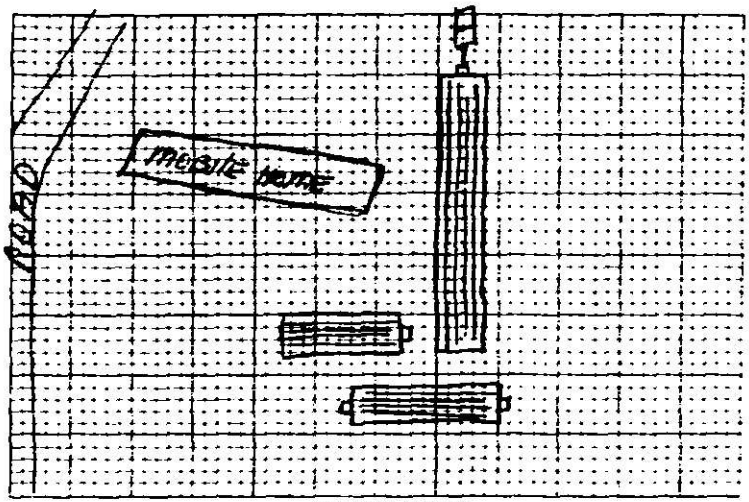
ICAR(S) Permit No. 15171

T C. No 10061-281-10

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 1-9-81 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 1/23/81, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate REPAIR

Liquid Capacity of Tank — —

Tank Construction —

Absorption and or Nitrification Lines:

Total Line Length 300'

Number of Lines 4

Distance from House >10'

Distance from Property Line >10'

Distance from Well >100'

NAME OF OWNER VILLAGE PROPERTIES - F. RUSSELL GIBSON

LOCATION OF PROPERTY 5820 WILKINSON BLVD. OAKGROVE MHP

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: PIT: 12'X25'X54" of STONE. TIE IN FROM OLD MAIN SEPTIC bed

Division or Section Head

Adam Wigfield
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-5-76

Environmental Health Department's Copy

C of A (s) No. 15171

Date Issued 1/23/81 Serial 4206 T C No PC 061-381-10

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 VILLAGE PROPERTIES (LAST / FIRST / MIDDLE)

Location of Property 5620 WILKINSON BLVD. OAKGROVE MHP

Application Number _____ Permit Number _____

Inspection Data:

Liquid Capacity of Tank REPAIR Tank Material —

Total Length of Drain Tile 450' Number of Lines 5

Depth of Filter Material 4' Cover Depth 18"

Water Supply Source Community well Distance from Water Source >100'

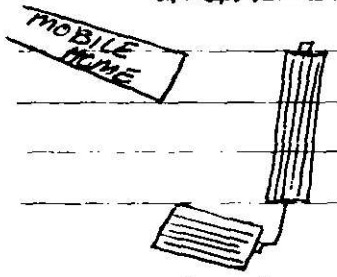
Excavation Inspected — (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 1/23/81 (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(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 AT dimentions are: 25'X30'X53" of STONE



Adam Wigfield
Environmentalist

EHD-5-76

Environmental Health Department's Copy

MECK COUNTY DEPARTMENT OF
RECEIVED
NOV 19 1981
ENVIRONMENTAL HEALTH

SEE INSTRUCTIONS ON BACK

Date Received

ICAR(S) Application No. 15171

T & C No. 061-281-10

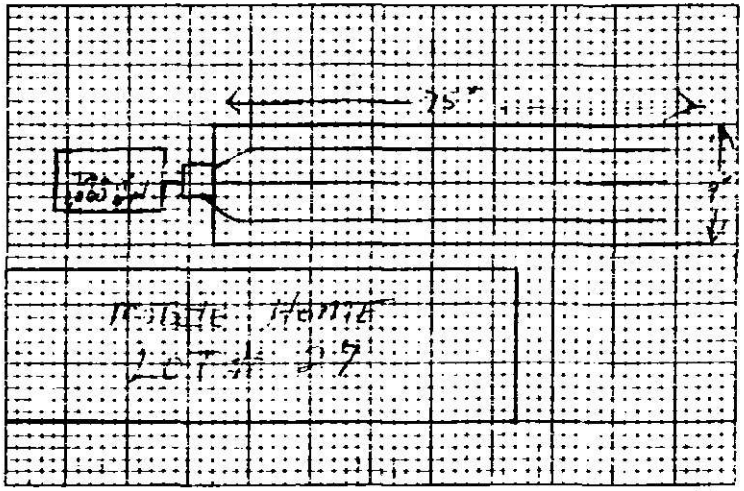
Map Date

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.



3) PLOT PLAN (ACCURATELY DIMENSIONED) WILLIAMSBURG

4) 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 ✓
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 COLE (LAST) CHARLES (FIRST) S. (MIDDLE)

14) ADDRESS OF OWNER 5214 SUSANNA LANE

15) PHONE NO. Home (RUSSELL GIBSON 535 1280) Office 392 5517

16) LOCATION OF SYSTEM 5820 WILKINSON BLVD
STREET OR COUNTY ROAD

17) SUBDIVISION ___ Lot No. 27 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.

11-2-81
DATE OF APPLICATION

J Russell Gibson GEN MGR L. PROP.
OWNER

EHD-5-76 ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued 4 Nov 1981

Serial No. 5073

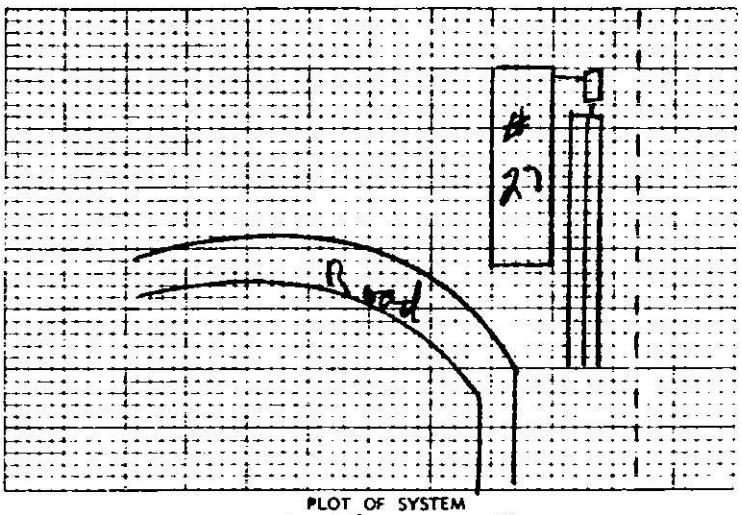
ICAR (S) Permit No. 15171

T. C No. 061-201-10

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 15171, 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 1 Dec 81, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate _____

Liquid Capacity of Tank 1000

Tank Construction pre cast

Absorption and or Nitrification Lines

Total Line Length ~~350~~ 225

Number of Lines 3

Distance from House 5

Distance from Property Line 5

Distance from Well 100' +

NAME OF OWNER Village Properties

LOCATION OF PROPERTY 5820 Wilkinson Blvd Lot 27

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.

in bed 9'X75'X17" stone

Comments: _____

_____ J. M. Atkinson

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-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

C of A (s) No. 15171

Date Issued 19 Nov 1981 Serial 4842

T C No. 061-281-10

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 Village Properties (LAST / FIRST / MIDDLE)

Location of Property 5820 Wilkinson Blvd Lot 27

Application Number _____ Permit Number 15171

Inspection Data:

Liquid Capacity of Tank 1000 gal Tank Material precast

Total Length of Drain Tile 225 Number of Lines 3

Depth of Filter Material 17" Cover Depth 18-24"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected ✓ (DATE) Tank Inspected 9 Nov 1981 (DATE)

Nitrification Field Inspected 9 Nov 1981 (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(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 installed as permitted

Environmentalist

EHD-5-76

Environmental Health Department's Copy