Date Received 6-23-83

RECEIVED
JUN 23 1983
ENVIRONMENTAL HEALTH

ICAR (S) Application No. 19829 1

T. C. No. 139-14142

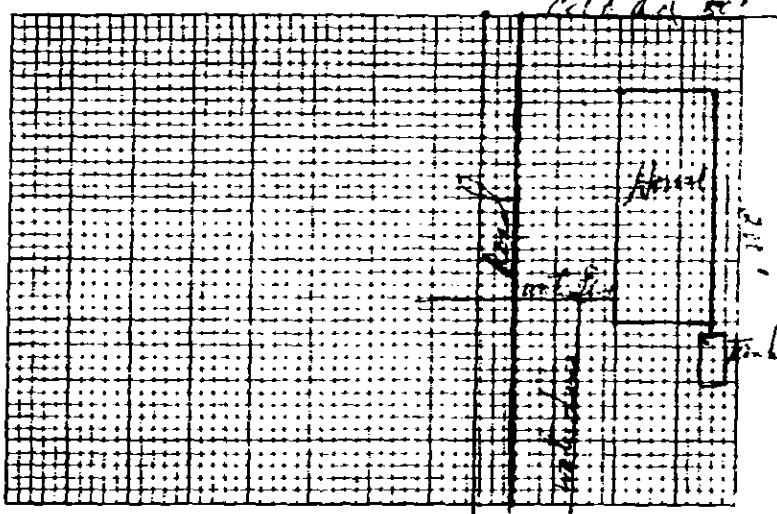
Map Date _____

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)

4) Mobile Home ___ Yes ✓ No
Residence ✓ Yes ___ No
No. of Bedrooms 3
5) Business Use ___ Max. No. Employees None
6) Washing Machine ___ Yes ___ No
7) Garbage Disposal ___ Yes ✓ No
8) Dishwasher ___ Yes ✓ No
9) Water Supply
A) Individual Well Own
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 None
12) VA Case No None

13) NAME OF OWNER Hill (LAST) Lucille (FIRST) Helms (MIDDLE)

14) ADDRESS OF OWNER Rt. #1 Stanfield NC. 28163

15) PHONE NO. Home 704-888-2621 Office 704-888-5116

16) LOCATION OF SYSTEM Cotton Rd. 1051 (STREET OR COUNTY ROAD)

17) SUBDIVISION None Lot No. _____ Block No. _____

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK 3058 AT PAGE 582

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.

6-23-83
DATE OF APPLICATION

Lucille Helms Hill
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued 11-July-88

Serial No. 6436

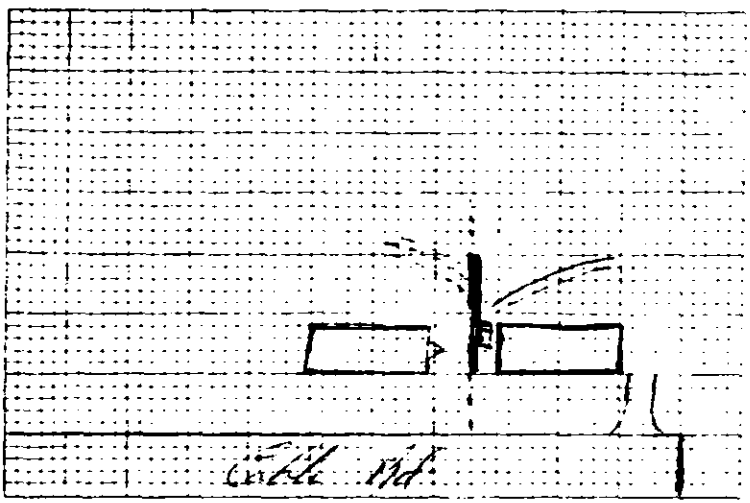
ICAR(S) Permit No. 14829

T C No. 139-141-12

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 19329, dated 27 June 88, 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 11 July 88, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate _____

Liquid Capacity of Tank _____

Tank Construction _____

Absorption and or Nitrification Lines

Total Line Length 220'

Number of Lines 2

Distance from House 210'

Distance from Property Line 210'

Distance from Well 210'

NAME OF OWNER Mrs. Lucille Tillman

LOCATION OF PROPERTY 1051C Cecil Rd.

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.

2 Trench 3' X 110' X 12"

Comments: _____

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