Date Issued JULY 21, 1978 Serial No. 1755 C of A (s) No. 14365

T C. No. 053-013-10

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 BROWN, W. L. (LAST, FIRST, MIDDLE)

Location of Property MOORES CHAPEL ROAD

Application Number _____ Permit Number _____

Inspection Date:

Liquid Capacity of Tank _____ Tank Material _____

Total Length of Drain Tile 100' Number of Lines 4

Depth of Filter Material 17" Cover Depth 20"

Water Supply Source _____ Distance from Water Source _____

Excavation Inspected _____ (DATE) Tank Inspected _____ (DATE)

Nitrification Field Inspected 7/21/78 (DATE)

Washing Machine Line Inspected, If Applicable _____ (DATE)

REPAIR

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 _____

Environmentalist

EHD-5-76

Environmental Health Department's Copy

Serial No. 1806

ICAR (S) Permit No. H1365

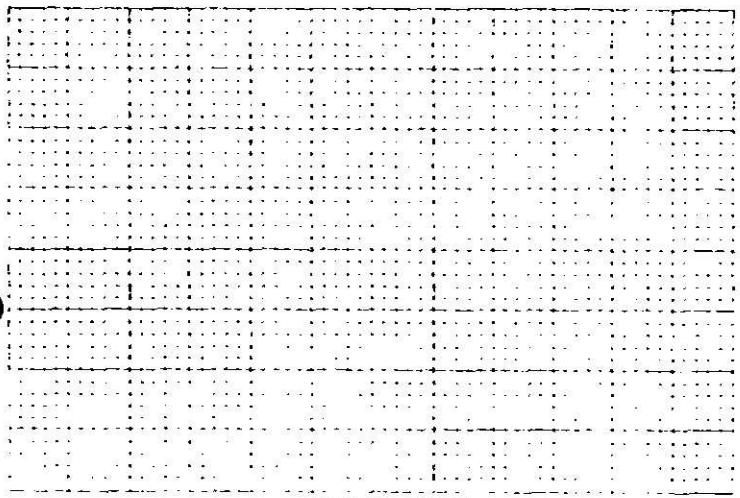
Date Issued JULY 21, 1978

T. C. No. 053-013-10

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 7/21/78 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 _____, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate _____

Liquid Capacity of Tank _____

Tank Connecting REPAIR

Absorption and/or Nitrification Line _____

Total Line Length _____

Number of Lines _____

Distance from House _____

Distance from Property Line _____

Distance from Well _____

NAME OF OWNER BROWN, W. A.

LOCATION OF PROPERTY 4400 BLK CHAPEL RD.

The system shall meet all the construction requirements 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 County Health Director before any system can be covered up or otherwise rendered incompletely accessible. **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 Commission, now or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.**

Division 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