SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

☐ NEW SEPTIC ☐ REPAIR ☒ USE EXISTING ☐ MODIFIED PLOT PLAN ☐ ALTERATION

File Number: 21349/14957

Assigned Inspector: BRaeder

☐ IP $250.00: _____ Initial/Date

☐ IP Commercial $450.00: _____ Initial/Date

☐ CA & OP $400.00: _____ Initial/Date

☐ Alteration Fees $300: _____ Initial/Date

☐ Modified Plot Plan Fees $100.00: _____ Initial/Date

☒ Use Existing Fees $100.00: BR 9/13/24 Initial/Date

☐ Use Existing Approved ☐ Use Existing Denied

☐ Send IP permit for signature: _____ ☐ Signature received: _____

☐ Floor plans reviewed

☐ Generate CA ☐ Approve as Noted in Winchester

☐ This site is served by septic and well. Verify each is complete before final hold is released

☐ This septic system requires a certified operation contract before final hold is released

☐ Certified operator contract is on file: _____

☐ Septic file complete: _____

☐ Release final hold in Winchester: _____

Comments:

21349 / 14957

Rec'd 9/12/24 LW

MECKLENBURG COUNTY
HEALTH DEPARTMENT

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM / WATER SUPPLY WELL

APPLICATION TYPE: ○ SEPTIC ONLY ○ WELL ONLY ● SEPTIC & WELL
○ ADDITION OR RENOVATION WITH OCCUPANCY INCREASE ○ EXCHANGE MOBILE HOME (SAME # BEDROOMS)
○ ADDITION OR RENOVATION WITH NO OCCUPANCY INCREASE ○ COMMERCIAL OR INDUSTRIAL

PERSON FILING APPLICATION:
NAME: Luke Chapman
ADDRESS: 4123 Old Monroe Rd
CITY: Indian Trail
STATE: NC ZIP: 28079
PHONE: 704-589-9626
ALTERNATE PHONE: 704-650-6426
E-MAIL: thoneywell@carolinadecks.com

PROPERTY OWNER: ☐ SAME AS PERSON FILING APPLICATION
NAME: Philip Guenther
ADDRESS: 10500 Hadlow Ct
CITY: Charlotte
STATE: NC ZIP: 28278
PHONE: 561-596-0297
ALTERNATE PHONE:
E-MAIL: us@skotandphil.com

JOB LOCATION INFORMATION
TAX PARCEL #: 11325136
STREET ADDRESS: 10500 Hadlow Ct
CITY: Charlotte
STATE: NC ZIP: 28278

SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #:

WATER SUPPLY:
○ MUNICIPAL ● PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER

RESIDENTIAL PROPERTY TYPE: ○ N/A
● HOUSE ○ MODULAR HOME ○ MULTIPLE FAMILY
○ SINGLE MOBILE HOME ○ DOUBLE WIDE
○ OTHER

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 2

COMMERCIAL / INDUSTRIAL PROPERTY TYPE: ☐ N/A
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:
INDUSTRIAL WASTES? ○ YES ○ NO
UNDERGROUND STORAGE TANKS? ○ YES ○ NO

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:
☐ BEDROOM ☐ BATHROOM ☐ KITCHEN ☐ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☐ SUNROOM ☐ PORCH ☒ DECK ☐ OTHER

ADDITION/RENOVATION TYPE DETACHED FROM EXISTING STRUCTURE:
☐ DETACHED GARAGE ☐ DETACHED GARAGE WITH PLUMBING ☐ POOL HOUSE ☐ SHOP ☐ BARN
☐ STORAGE SHED ☐ DETACHED PORCH / DECK ☐ OTHER

*The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application, acknowledges that the contents of same are true, and authorizes the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Owner's/Agent's Signature

09/12/2024
Date

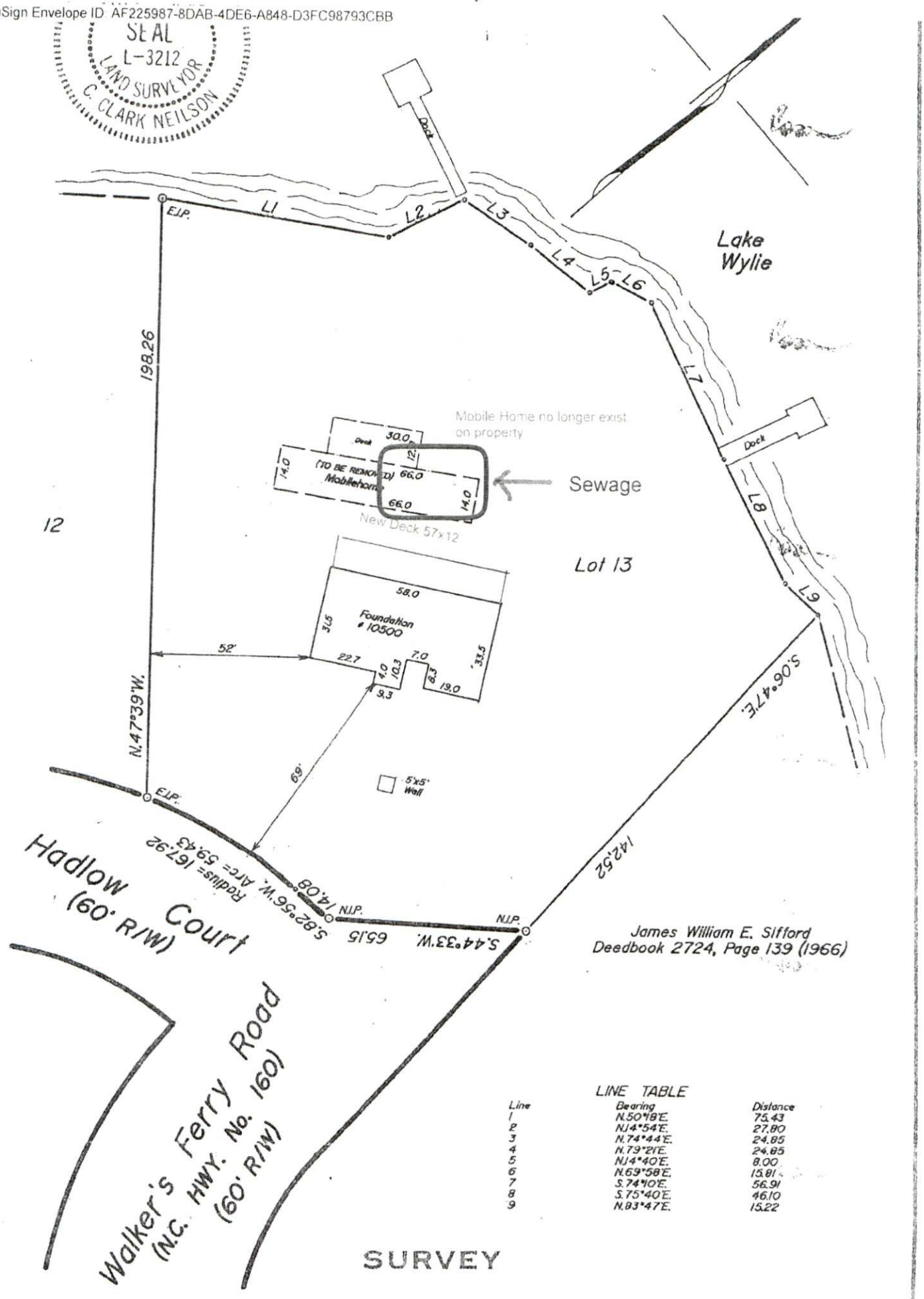
A PROPOSED PLOT PLAN (see page 2) is required to be submitted with each application.

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Drive, Suite 8000, Charlotte, NC 28208
OFFICE: 980-314-1680, FAX: 704-336-6894

Revised on: 01/03/11

DocuSign Envelope ID: AF225987-8DAB-4DE6-A848-D3FC98793CBB

SEAL
L-3212
LAND SURVEYOR
C. CLARK NEILSON



James William E. Sifford
Deedbook 2724, Page 139 (1966)

LINE TABLE

Line	Bearing	Distance
1	N.50°18'E.	75.43
2	N.14°54'E.	27.80
3	N.74°44'E.	24.85
4	N.79°21'E.	24.85
5	N.14°40'E.	8.00
6	N.69°58'E.	15.81
7	S.74°10'E.	56.91
8	S.75°40'E.	46.10
9	N.83°47'E.	15.22

SURVEY

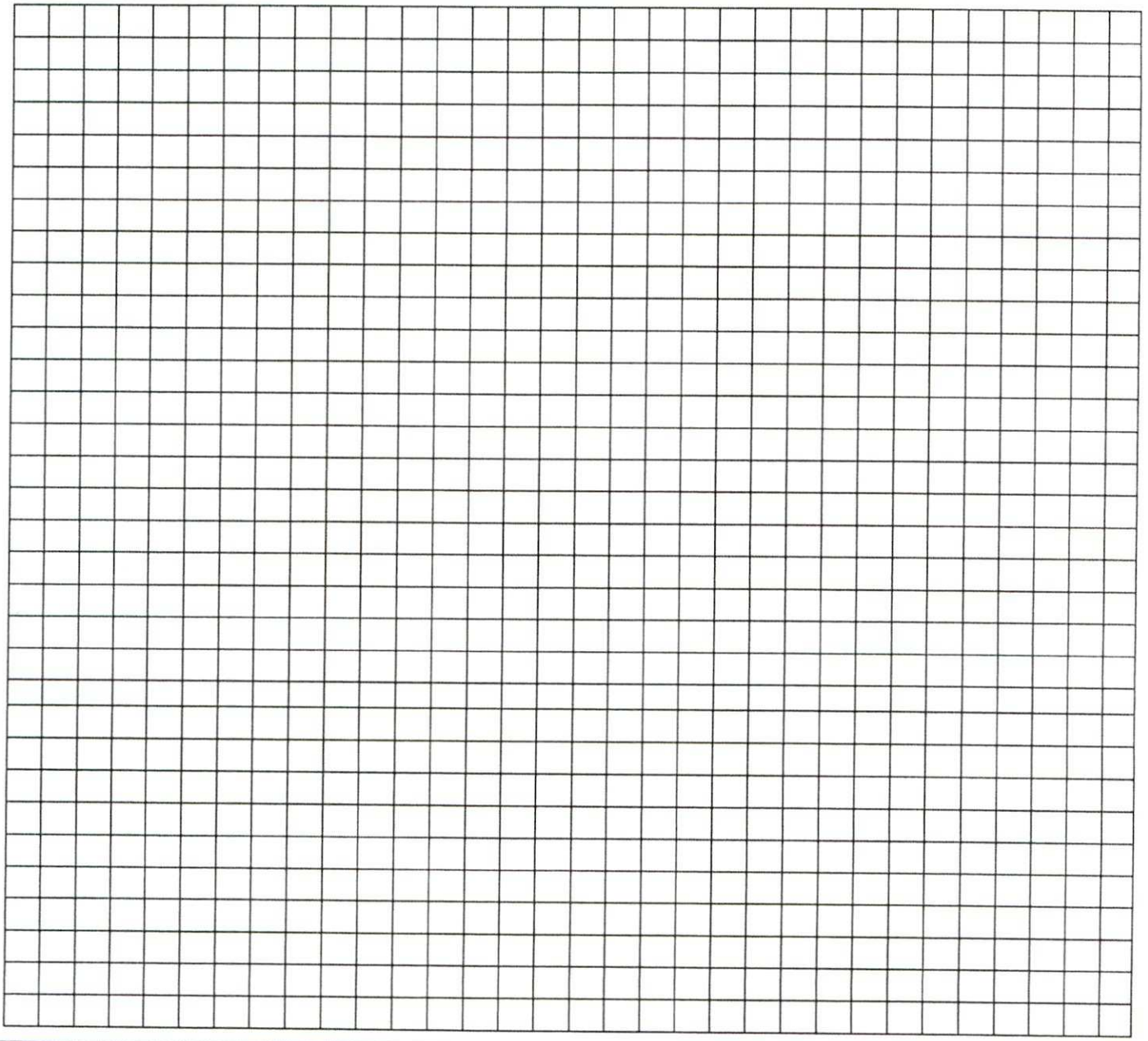
File #: 21349

PROPOSED PLOT PLAN

A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

survey included

Street Address: 10500 Hadlow Ct Tax Parcel #: 11325136



*The undersigned, an authorized agent of the Mecklenburg County Health Department, certifies that the Department has approved the Request for the "Job Location" contained in this document. This approval is granted in accordance with the provisions of Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal and Water Supply Wells in effect at the time of issuance of the permit and is subject to the following provisions:

- No work shall be conducted on the septic tank system until an installation, construction, alteration and/or repair approval is granted by this Department.
- This permit is not transferable.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

Approved*

REHS Signature

9/18/24
Date

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Drive, Suite 8000, Charlotte, NC 28208
OFFICE: 980-314-1680, FAX: 704-336-6894

Revised on: 01/03/11

MECKLENBURG COUNTY
Health Department

Gibbie Harris, MSPH, BSN
Director

(980) 314-9020

Addendum to Application for
New Well or Septic System Installation
Abandonment or Repair of Existing Well or Septic System

Your signature below confirms the following:

1. The information on the application is true, complete and accurate.
2. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliances with applicable laws and rules.
3. I acknowledge that Carolina Decks is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at

10500 Hadlow Ct (Number) Street Charlotte, NC 28278 (Town).
(Or Parcel Number)

Philip Guenther
Property Owner (print name)

Philip Guenther
Property Owner (signature)

09/12/24
Date

* please note that the septic has been clearly marked using flags.

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	09/12/24	**Amount:**	100.00
Receipt #:	150875	**Tendered:**	100.00
Check / Auth #:	VISA 07781G	**Returned:**	0.00
Received By:	ORTIZMP		

Account Information

Account #: 200000
Contractor: LUKE CHAPMAN
Attn: PHILIP GUENTHER
Address: 4123 OLD MONROE RD
Address:
City/State/Zip: INDIAN TRAIL, NC 28079

Item	Description	Quantity	Unit Price	Total Price
0705	Use Existing System 10500 HADLOW CT	1	100.00	100.00

Permit#

----------Outstanding Balances----------

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
			2,737.50		

SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

☐ NEW SEPTIC ☐ REPAIR ☒ USE EXISTING ☐ MODIFIED PLOT PLAN ☐ ALTERATION

File Number: _____

Assigned Inspector: Matt Hall

☐ IP $250.00: _____ Initial/Date

☐ IP Commercial $450.00: _____ Initial/Date

☐ CA & OP $400.00: _____ Initial/Date

☐ Alteration Fees $300: _____ Initial/Date

☐ Modified Plot Plan Fees $100.00: _____ Initial/Date

☒ Use Existing Fees $100.00: MON 9/12/24 Initial/Date

☐ Use Existing Approved ☐ Use Existing Denied

☐ Send IP permit for signature: _____ ☐ Signature received: _____

☐ Floor plans reviewed

☐ Generate CA ☐ Approve as Noted in Winchester

☐ This site is served by septic and well. Verify each is complete before final hold is released

☐ This septic system requires a certified operation contract before final hold is released

☐ Certified operator contract is on file: _____

☐ Septic file complete: _____

☐ Release final hold in Winchester: _____

Comments:

Date Received 8-15-84

RECEIVED
AUG 16 1984
ENVIRONMENTAL HEALTH

SIR No. 21349

T. C. No. [redacted]
113-251-36

Map Date L

Call 1st by 9:00 AM 4 Possible

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER CRAIG (LAST) WILLIAM (FIRST) ROGER (MIDDLE)

2) ADDRESS OF OWNER 9511 Brenda Ann Road, Charlotte, N. C. ZIP 28214

3) PHONE NO. Home 392-9081 10500 Hatton Ct Office 598-0592 Call Lee

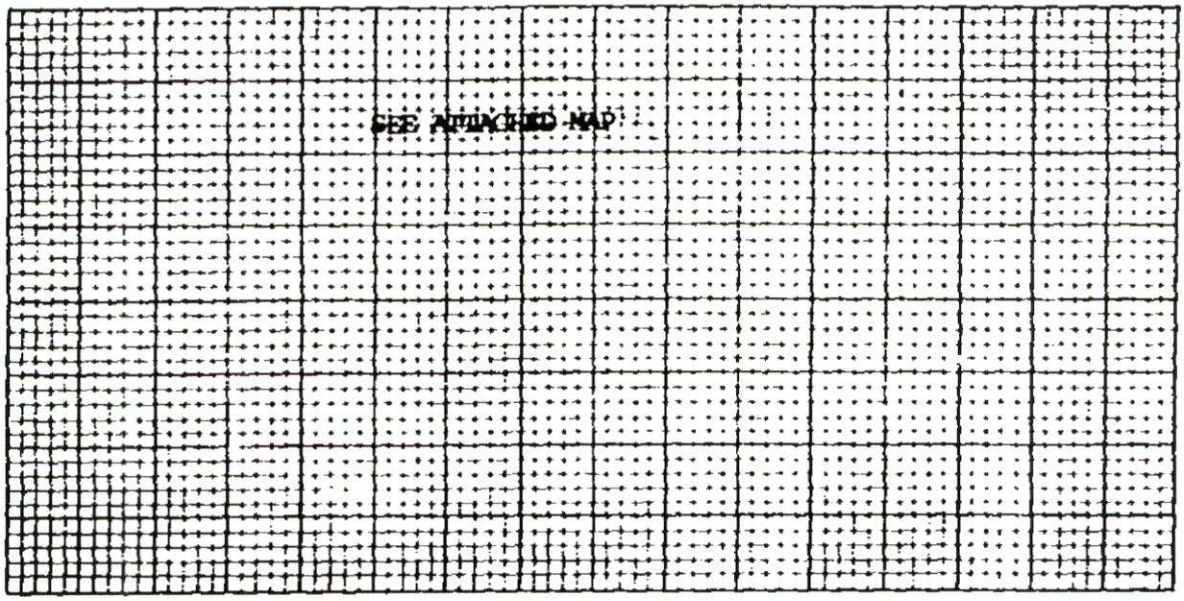
4) LOCATION OF PROPERTY Walkers Ferry Road - Lake [redacted] Wylie
(STREET OR COUNTY ROAD)

5) SUBDIVISION _____ LOT NO. 36 BLOCK NO. 251

MAP BOOK NO 113 PAGE NO. 25

6) DEED REFERENCE DEED BOOK _____ PAGE NO _____

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation and an on site inspection of the lot hereinabove described for the purpose of determining if the lot is suitable for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge



7) ACCURATELY DIAGRAM & DIMENSION LOT

William Roger Craig
OWNER

EHD-5-76

Environmental Health Department's Copy

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. 21341

T.C. NO. 113-251-36

(Ground Absorption Sewage Disposal)

OWNER: William Roger Craig
ADDRESS: 5511 Brooke Lynn Road
Charlotte N.C. 28214

PLAT NO: Lot 13
LOT SIZE: 3/4 134 .51

LOCATION OF SITE: Walker Ferry Road

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U — 10-20%	S PS U — complex slopes	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S (PS) U — clay	S (PS) U — clay	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S (PS) U — blocky	S (PS) U — blocky	S PS U	S PS U
4. SOIL DEPTH (inches)	S PS U — 30-48"	S PS U — 130"	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S (PS) U — >36"	S PS U — >36"	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S — Tend to ground water PS U	S — Erodes, forms runoff PS U	S PS U	S PS U
7. OTHER (Specify)	S PS — see Note U	S PS U	S PS U	S PS U
8. SOIL GROUP	IIA	IIA		
9. SITE CLASSIFICATION	Provisionally Suitable	unsuitable		
10. SOIL SERIES	Cecil-like	complex slopes		

S - Suitable PS - Provisionally Suitable U - Unsuitable

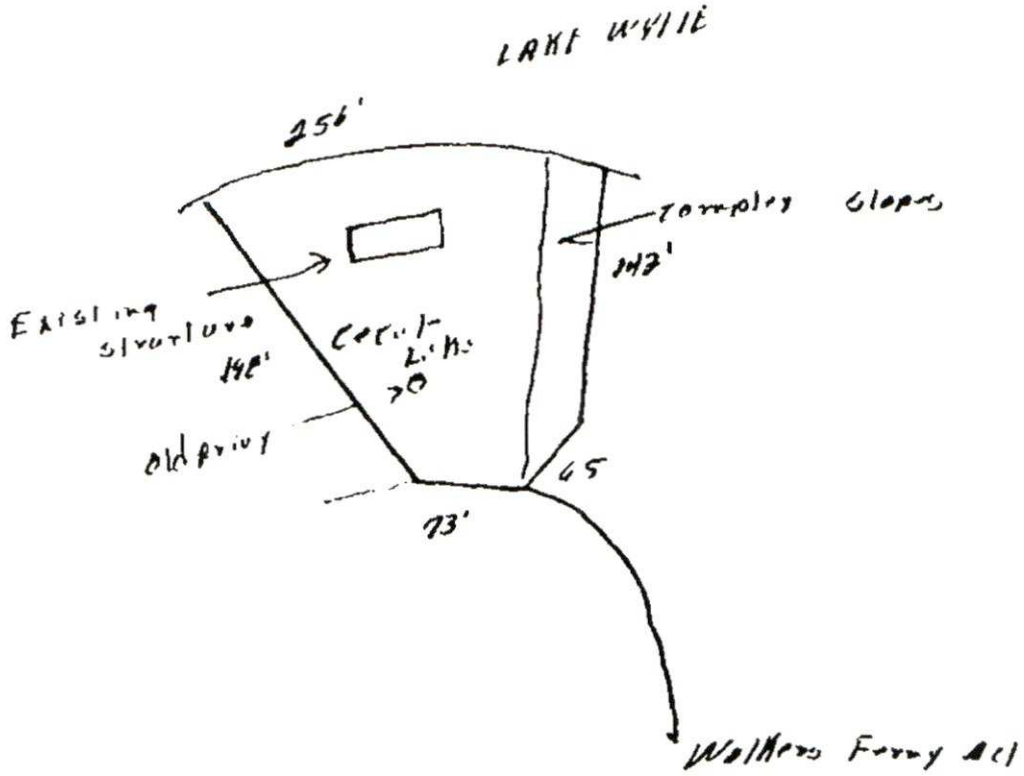
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: Lagoon only - recommend 1000 gal pump. Recommend plans for

Described by: William R. Martin
Title: Soil Scientist

Date: 2-9-84

4


LAKE WYLIE
256'
Tompkins Slopes
143'
Existing structure
148'
Contour Lines
>0
old privy
65
73'
Walkers Ferry Rd

Contract Agreement

THIS AGREEMENT made this 24 day of October A.D. 19 89,
by and between William Roger & Doris J Craig hereinafter called the
Owner, and Michael L Ryon DBA MR Builders, Inc hereinafter called
the Contractor.

For the consideration hereinafter named, the said Contractor covenants and agrees with said Owner, as follows:

FIRST. The Contractor agrees to furnish all material and perform all work necessary to complete the
Construction of a single family dwelling to be located
at 10500 Hadlow court Charlotte NC 28208.

Basement to be completely unfinished.

for the above named structure, according to the plans and specifications (details thereof to be furnished ~~as required~~) by
MR Builders & Gary Mills Architect, and to the full satisfaction of said ~~Architect or~~ Owner.

SECOND. The Contractor agrees to promptly begin said work as soon as notified by said ~~Architect or~~ Owner, and to complete the work as follows:
Construction to begin 30 days upon excution of thes contract.
Estimated completion date shall be no later than 120 days from
construction start date.

All agreements contingent upon strikes, accidents or delays
beyond our controll.

THIRD. The Contractor shall take out and pay for Workmen's Compensation and Public Liability Insurance, also Property Damage and all other necessary insurance, as required by the Owner, ~~Architect~~ or by the State in which this work is performed.

FOURTH. The Contractor shall pay all Sales Taxes, Old Age Benefit and Unemployment Compensation Taxes upon the material and labor furnished under this contract, as required by the United States Government and the State in which this work is performed.

FIFTH. No extra work or changes under this contract will be recognized or paid for, unless agreed to in writing before the work is done or the changes made.

SIXTH. This contract shall not be assigned by the Contractor without first obtaining permission in writing from the Architect or Owner. ~~XXXX

Date Received 8-15-84

RECEIVED
AUG 15 1984
ENVIRONMENTAL HEALTH

CAR(S) Application No. 21349

T. C. No. [redacted]

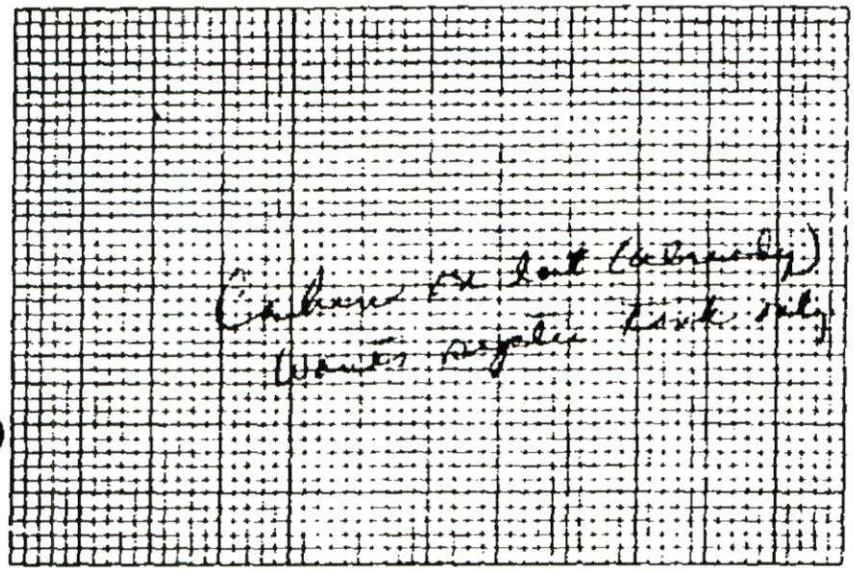
Map Date 113-251-36 L

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) XX 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 2
5) Business Use — Max No Employees ___
6) Washing Machine ___ Yes X No
7) Garbage Disposal ___ Yes X No
8) Dishwasher ___ Yes X 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 CRAIG (LAST) WILLIAM (FIRST) ROGER (MIDDLE)

14) ADDRESS OF OWNER 9511 Brenda Ann Road, Charlotte, North Carolina 28214

15) PHONE NO. Home 392-9081 Office 598-0592 ext 1500

16) LOCATION OF SYSTEM ~~Corner lot - Walkers Ferry Road~~ & Hadlow Court (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. 36 Block No. 251

Map Book No. 113 Page No. 25

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.

8-15-84
DATE OF APPLICATION

William Roger Craig
OWNER

BHD-5-76

Environmental Health Department's Copy

Date Issued 9-4-84

Serial No. 7825

SIR No. 21349

T. C. No. 113-251-36

Map Date L CET

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPROVED 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 Craig, (LAST) William (FIRST) Roger (MIDDLE)

ADDRESS OF OWNER 9511 Brenda Ann Rd., Charlotte, NC ZIP 28214

LOCATION OF LOT 10500 Hadlow Court (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 21349. 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.

*** PUMP STATION WILL BE REQUIRED ***

B. K. Ferguson
Environmentalist

Bill D. Henderson Jr.
Environmental Health Director, or Authorized Section Head

EHD-5-74

Environmental Health Department's Copy

Serial No. 5853

SIR No. 21349

Date Issued 9-4-84

T. C No. 113-251-36

Map Date L

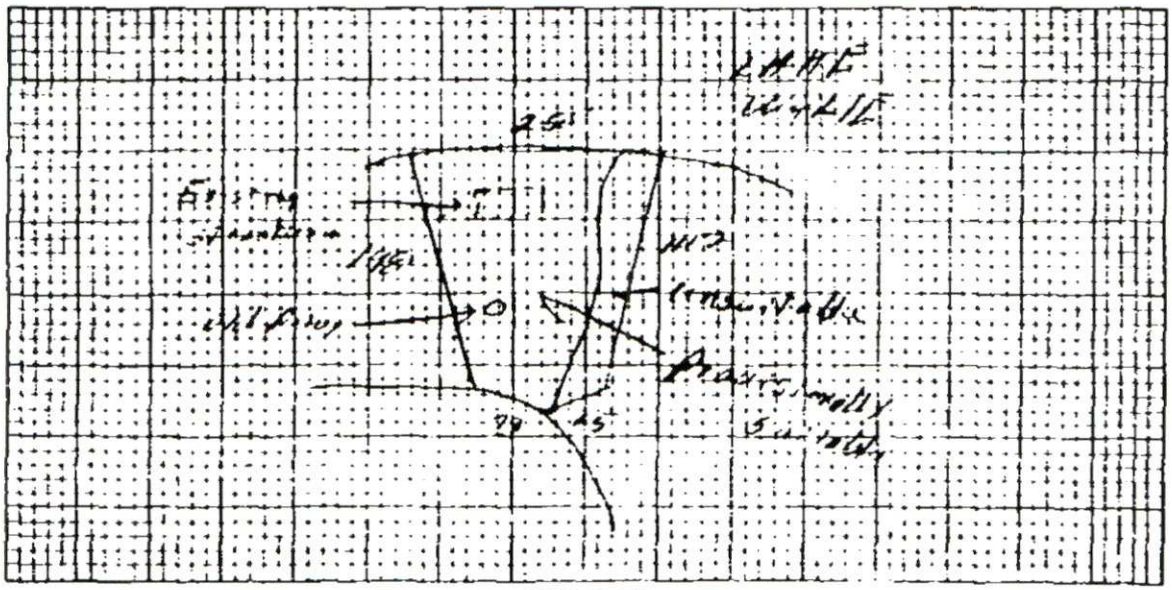
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Craig, (LAST) William (FIRST) Roger (MIDDLE)

ADDRESS OF OWNER 9511 Brenda Ann Rd., Charlotte, NC ZIP 28214

LOCATION OF PROPERTY 10500 Hadlow Court (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO.



PLOT PLAN

This is to certify that a soil investigation and on-site investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The said investigation was conducted on that portion of the lot as indicated on the above plot. PROVISIONALLY SUITABLE
The permeability rate determined by the investigation was . The said lot is approved for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption effluent discharge subject to the following terms and conditions:

1. A permit to install, construct, alter or repair the septic system shall be obtained from the Mecklenburg County Department of Environmental Health prior to the beginning of any construction on the buildings or the wastewater treatment system on the said lot.
2. The size of the septic tank, wastewater treatment system which must be installed will be determined by the Mecklenburg County Department of Environmental Health prior to installation based on the permeability rate obtained above and on the size and type of building constructed thereon.
3. This approval is valid only for the system, lay-out and area designated as acceptable for system installation on the above plot.
4. This approval is based on the grading plan existing at the time of the investigation. Any changes in the grade which in the opinion of the Mecklenburg County Department of Environmental Health may render the area designated as acceptable for system installation unsuitable must be approved prior to installation of the system.

This approval is granted based on the laws of the State of North Carolina and the rules and regulations of the North Carolina Department of Human Resources, Division of Health Services and the Mecklenburg County Health Commission which were in effect on the date of issuance and is void if at any time in the future, prior to completion of the system, these laws, rules and regulations are changed such that this approval would not have been granted had the new or revised laws, rules, and regulations been in effect on the issue date.

William R. Martin
Soil Scientist

Brice D. Hardison Jr.
Environmental Health Director or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

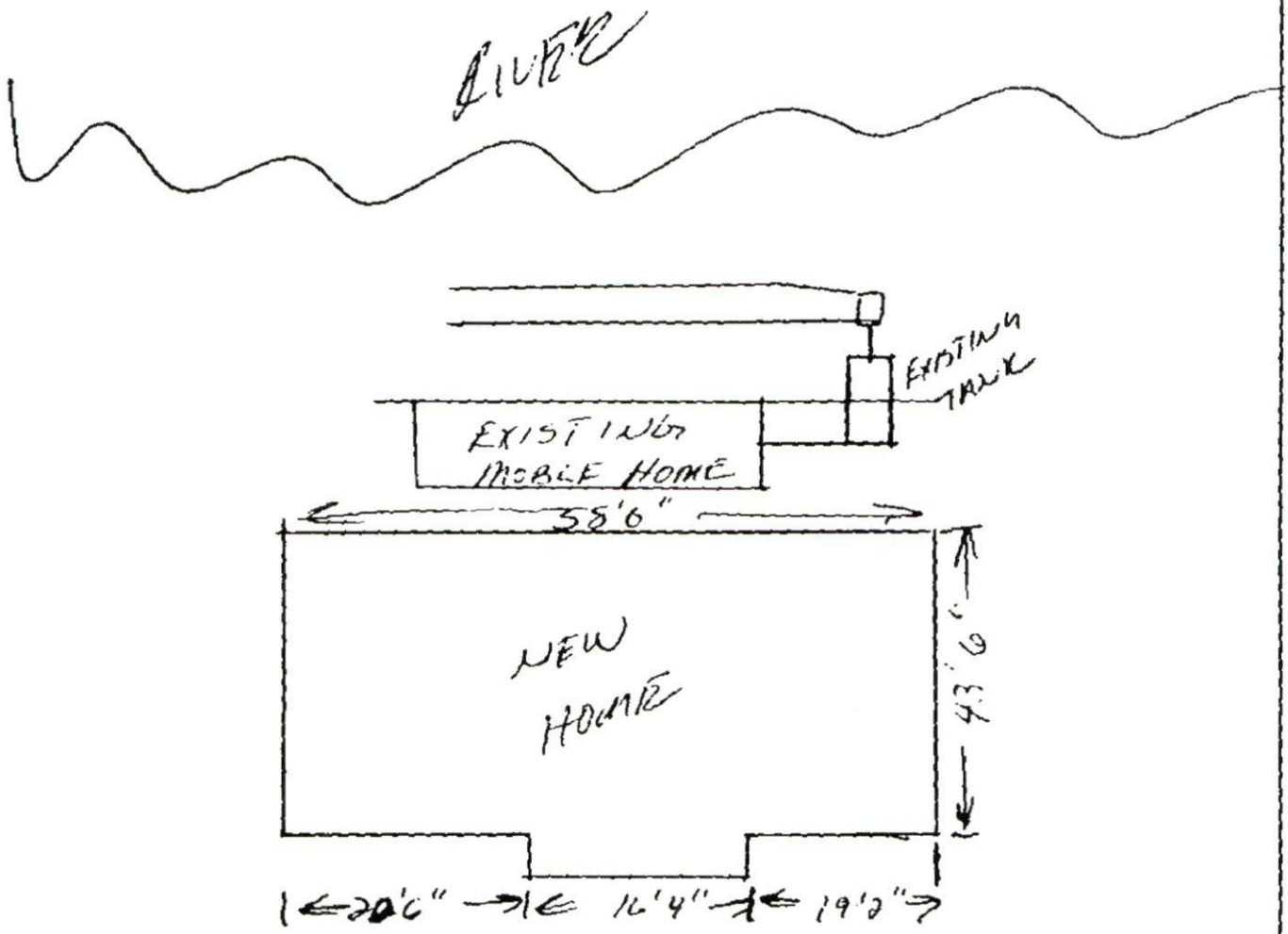
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 21349

TC: 113-251-36

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



HOOLOW COURT

Signed: [signature]

Date: 12/7/89

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date: 12-7-89

Name/Company: Mr. Builders

Sanitation

Vector Control

O.P.W.D. /

Service: Appeal for Improvement

Fee: 200.00

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID
DEC 7 1989

CK #2095
$ 200.00

NOTICE:

A processing fee of $15.00 will be charged for all returned checks in accordance with N.C. General Statute 25-3-512.

Completed by

Collected by

APPLICATION FOR IMPROVEMENT PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

(OFFICE USE ONLY)
FILE: 21349
TC: 113 251 36
SERIAL: № 19556
☐ L ☑ CRT

JOB LOCATION

① ADDRESS: 10500 (STREET NO) HADLOW (STREET) Court ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.: 113-251-36
⑤ SUBDIVISION: ⑥ LOT: 13 ⑦ BLOCK:

OWNER

⑧ NAME: ~~Craig~~ William (FIRST) (MIDDLE) CRAIG (LAST)
⑨ MAILING ADDRESS: 10500 HADLOW COURT
⑩ CITY: CHARLOTTE ⑪ STATE: N/C ⑫ ZIP: 28208
⑬ PHONE: (WORK) 376 3654 ⑭ (HOME) 714-7154

REQUEST

This request is for a(n):

⑮ ☐ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange
⑱ ☒ Other (specify) Imp ADD

DESIGN CRITERIA

System will serve:

⑲ ☒ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 1
㉕ Type?
㉓ Maximum occupancy? 2
㉖ Maximum number of employees?
㉔ Basement? ☒ yes ☐ no
㉗ Maximum number of seats?

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☒ Individual well
B ☐ Municipal system
C ☐ Community well
D ☐ Community system

㉙ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Craig William
Date: 12/7/89

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

... No work shall be conducted on the septic tank system until an installation, Construction, Alteration and/or Repair permit is issued by this Department.

... This permit is not transferable, and shall become null and void 36 months from the date of issuance. Max Inc System for 2 Bedroom Home

Environmentalist — Date 12/14/89

Director or Authorized Section Head — Date 12-18-89

* This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.