SEE INSTRUCTIONS ON BACK

Date Received 22/JUN/1977

ICAR (S) Application No. 12739

T. C. No. 193-282-22

Map Date 4-19-77

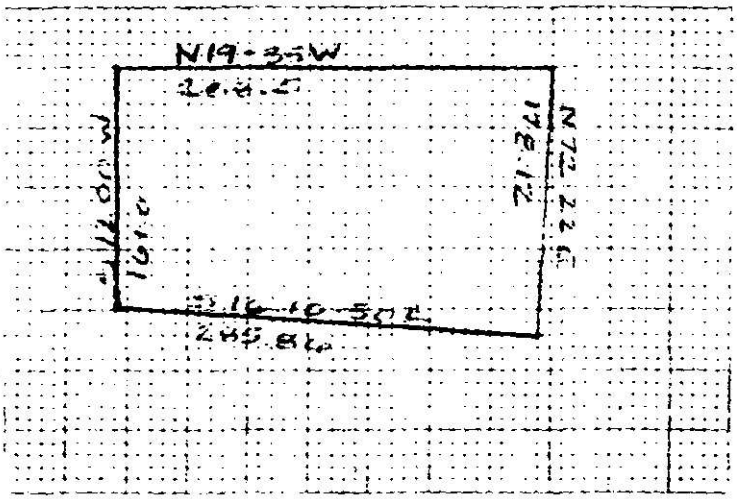
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MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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. X 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 X Max No Employees _____
6. Washing Machine ___Yes ___No
7. Garbage Disposal ___Yes ___No
8. Dishwasher ___Yes ___No
9. Water Supply
   A. Individual Well X
   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 Bancroft Realty c/o Tom Hatfield, Jack Eckerd Drugs, Inc.
(LAST, FIRST, MIDDLE)

14) ADDRESS OF OWNER 1776 Statesville Ave., P.O. Box 943, Charlotte, N.C.

15) PHONE NO Home _____ Office 371-8000

16) LOCATION OF SYSTEM Hwy 51, Matthews, N.C.
(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 X 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.

DATE OF APPLICATION _____

OWNER Clarence Lake Boyle Hatfield

EHD-5-76

Environmental Health Department's Copy

Serial No. 0942

LA No. 12739

Date Issued June 23, 1977

T. C. No. 193-282-22

Map Date 4-19-77

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Bancroft Realty, c/o Tom Hatfield, Jack Eckerd's Drugs, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 1776 Statesville Ave. P.O.BOX 943, Charlotte, NC ZIP _____

LOCATION OF LOT Highway 51
(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 12739. 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, altred, 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

John R. Gleason

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

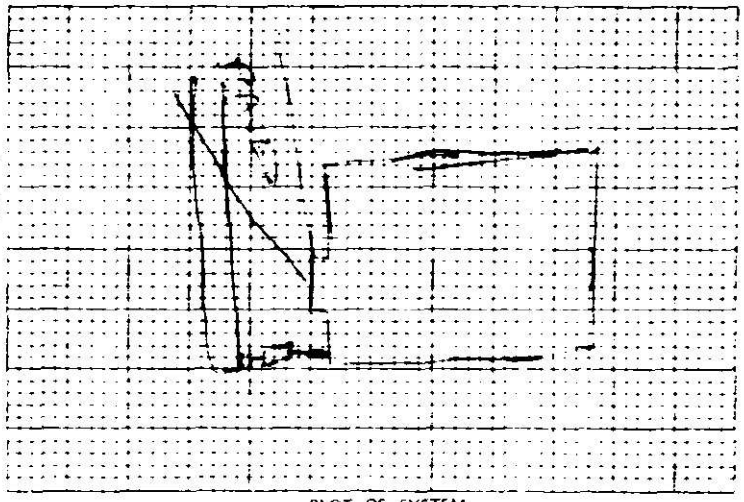
Date Issued 2/24/72 Serial No.0995 ICAR(S) Permit No 12 [illegible]

T C No 193-282 [illegible]

Map Date [illegible]

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 X 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 1271, dated [illegible] 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 9-2-72, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank [illegible] 1000 gal

Tank Construction PC

Absorption and or Nitrification Lines

Total Line Length 330'

Number of Lines 3 (9' x 110')

Distance from House 10'

Distance from Property Line [illegible] 21'

Distance from Well [illegible]

NAME OF OWNER [illegible]

LOCATION OF PROPERTY [illegible]

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.

Comments **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.**

J. Stewart

Division or Section Head

L.B. Jernigan

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 9/2/77

Serial No. 1021

C of A (s) No 12739

T C No 193-282-22

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 JACK ECKERD DRUGS INC
(LAST FIRST MIDDLE)

Location of Property MATTHEWS-MINT HILL RD.

Application Number 12739 Permit Number 12739

Inspection Data:

Liquid Capacity of Tank 1000 gal Tank Material RC

Total Length of Drain Tile 330 Number of Lines 5 (5' x 65' x

Depth of Filter Material 17" Cover Depth 39"

Water Supply Source COMM Distance from Water Source -

Excavation Inspected 9/1/77 (DATE) Tank Inspected 9/2/77 (DATE)

Nitrification Field Inspected 9/2/77 (DATE)

Washing Machine Line Inspected, If Applicable N.A. (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been X 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 CHANGED ORIGINAL PERMIT

SEAGLE & WINCHESTER

L C Bridgeman
Environmentalist

EHD-5-76

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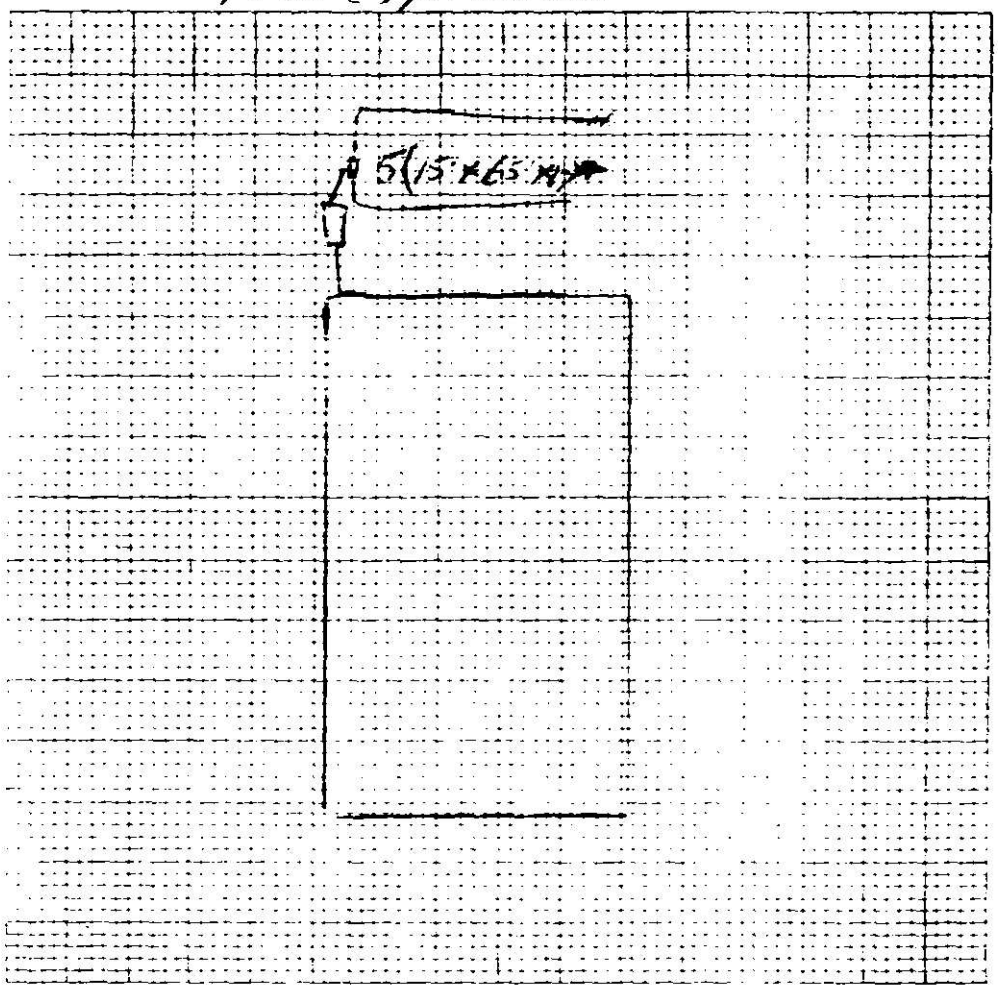
Date Issued 9-1-72

C of A (s) No. 12739

T C. No. 93-282-72

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

NC 5 PLOT PLAN SHEET



PLOT PLAN

ACCURATE DIAGRAM OF SYSTEM AS INSTALLED

L. R. Brinkley

Environmentalist

EHD-5-76

Environmental Health Department's Copy