

7401 N TRYON ST

04722131

6/14/2007

duponbj

Groundwater and Wastewater Services File Imaging Project
May 2007
Barcode Font = IDAutomationHC39M

CERTIFICATE OF COMPLETION/OPERATION PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 6455A DATE: 9/18/97

TC: 047 221 31 ☒ L ☐ CRT

SERIAL Nº 17345

Name of Owner Masco INC Juris.: _____

Address of Property 7401 N. Tryon St

Inspection Data:

Tank Material Existing

Total Length of Drainfield Bed 200'

Number of Lines Bed 4 @ 50'

Cover Depth 12"

Water Supply Source CMUD

Distance to Water Source >10'

Excavation Inspected 9/18/97

Tank(s) Inspected Tanks pumped 9/18/97

Wash Line Inspected NA

High Water Alarm Inspected _____

PLOT

Design 1997, Repair, 600SFB, 36" stone CTR# 5 (5 Entry)

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☐ installed or constructed ☒ altered or repaired

☐ in accordance with the permit issued ☐ as detailed in the plot above

and meets the provisions of 15A NCAC 18A. 1900, "Laws And Rules For Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. This issuance of this

☐ Certificate of Completion ☒ Operation Permit

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 document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 15A NCAC 18A. 1990 in addition to those listed below under "COMMENTS." This document 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.

Notice: Disturbance of the designated repair area may result in the suspension/revocation of this permit.

COMMENTS: Repair to Existing System, Sugested to Manager no parking be allowed on drainfield Areas.

Philo S. Walker R.S.
Environmental Health Specialist

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

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

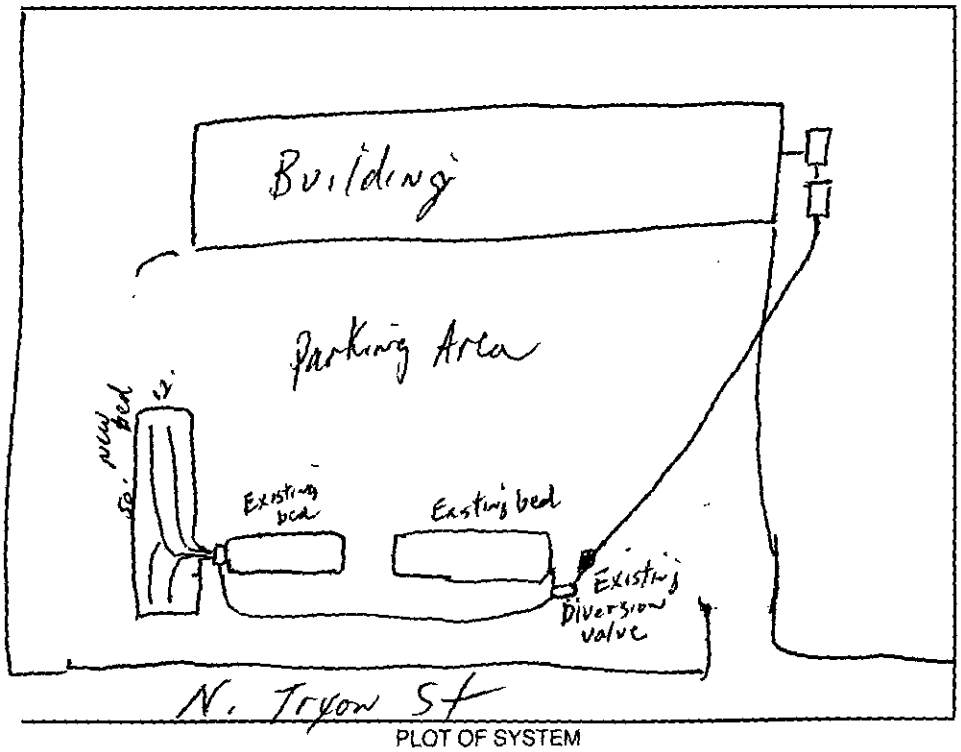
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 6455A DATE: 9/16/97

TC: 047 221 31 X L

SERIAL Nº 17362

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 the application dated 9/16/97. All work shall be completed on or before 10/16/97, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A. 1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Health Department before any system can be covered up or placed into service. 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank Existing gallons

Liquid Capacity of Dosing Tank Existing gallons

Tank Construction Existing

Trench Depth Appr 48"

Absorption and/or Nitrification Lines:

Trench Width Bed 12' feet

Trench Walls Scored and Porous Yes

Total Line Length Bed 50' feet

Number of Lines Bed 4 (50')

Depth of Stone 36" inches

Distance from House 5' feet

Distance from Property Line 10' feet

Distance from Well NA feet

NOTICE: This system shall not be installed while soils are in a wet condition.

NAME OF OWNER Masco INC

LOCATION OF PROPERTY 7401 N. Tryon St

Comments: Bed system Installation 12'wd x 50'long x 36" Stone / Drainfield Repair Area under pavement (pavement to be removed) Tanks to be pumped and lids replaced /

Phila S. Walker R.S.
Environmental Health Specialist

WHITE - HEALTH DEPARTMENT's COPY • CANARY - E.H.S. COPY • PINK - OWNER OR AGENT's COPY

FEE: ____

DATE: ____

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR IMPROVEMENT PERMIT FOR COMMERCIAL AND/OR INDUSTRIAL SITE

Repair

[ ] CRT

TYPE ACTION: [ ] NEW SYSTEM [ ] EXPANSION OF EXISTING SYSTEM [X] REPAIR OF EXISTING SYSTEM

NORTH CAROLINA
DEPARTMENT OF ENVIRONMENT, HEALTH AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

FILE # 6455A

PROJECT TRACKING #:

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION:

TAX/PARCEL NUMBER: 047 221 31

STREET ADDRESS: 7401 N. Tryon St.

[ ] INDUSTRIAL

LOT NUMBER:

TOWNSHIP (CHECK ONE):

[ ] 0 MECKLENBURG CO
[ ] 1 CHARLOTTE
[ ] 2 DAVIDSON
[ ] 3 CORNELIUS
[ ] 4 PINEVILLE
[ ] 5 MATTHEWS
[ ] 6 HUNTERSVILLE
[ ] 7 MINT HILL

30

PER SHIFT: ____

Replace tiles

POSSIBLE FIXTURES TO BE LOCATED IN THE FACILITY:

[ ] RESTAURANTS [ ] OTHER, PLEASE DESCRIBE
[ ] BAR SINK
[ ] SHOWERS
[ ] FLOOR DRAINS

TYPE OF WASTEWATER:

[ ] SANITARY
[ ] INDUSTRIAL PROCESS WASTE WATER

IF AN EXISTING SYSTEM, DESCRIBE THE PROPOSED ADDITION:

WATER SUPPLY (CHECK ONE): [ ] COMMUNITY (C) [ ] MUNICIPAL (M) [ ] PRIVATE WELL (P)
[ ] SHARED WELL (S) [ ] OTHER SPRINGS' (O)

IF ANY OF THE FOLLOWING ARE LOCATED ON THE PROPERTY, PLEASE SHOW LOCATION ON PLAT:

BURIED UTILITIES, LANDFILLS & DUMPSITES [ ] YES [X] NO
EXISTING WATER SYSTEMS [ ] YES [X] NO
EASEMENTS/RIGHT-OF-WAYS [ ] YES [X] NO
WELLS/SPRINGS OF WATERCOURSES [ ] YES [X] NO
DESIGNATED WETLANDS [ ] YES [X] NO

BUILDING PLANS TO INCLUDE ALL PLUMBING, FLOOR PLANS AND ALL SOURCES OF WASTEWATER DISCHARGE AND GRADING PLANS MAY BE REQUIRED DURING THE EVALUATION STAGE

PROPERTY OWNER:

NAME (LAST): Masco Inc (FIRST): (MI):

ADDRESS: 500 East Blvd # 201

CITY: Charlotte STATE: NC ZIP: 28203

DAYTIME PHONE: ( )

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE

NAME (LAST): Stephens (FIRST): Gary (MI): E.

DAYTIME PHONE: ( ) (704) 451-4279

370-0683 Ext 206

WHAT DATE WAS THE PROPERTY ORIGINALLY PLATTED OR RECORDED?

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 AGENTS OF THE MECKLENBURG COUNTY HEALTH DEPARTMENT TO ENTER ON TO THE PROPERTY FOR THE PURPOSE OF PROCESSING THIS REQUEST.

SIGNED: Gary E. Stephens DATE: 9/16/97

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
c/o HAL MARSHALL CTR., SUITE 211, 700 N. TRYON ST., CHARLOTTE, N.C. 28202 (704) 336-5102

Need new file. Old file not located

JSW

...R AND WASTEWATER
...STEMS PROGRAM
APPLICATION FOR IMPROVEMENT PERMIT
FOR COMMERCIAL AND ... SITE

Repair

CRT

NEW SYSTEM ... EXPANSION OF EXISTING SYSTEM ... REPAIR OF EXISTING SYSTEM

...AROLINA
... OF ENVIRONMENT
... AND NATURAL RESOURCES
... ENVIRONMENTAL HEALTH

FILL #: 6455A

PROJECT TRACKING #:

PROPERTY INFORMATION (FROM ENGINEERING FORM) FOR JOB LOCATION

TAX PARCEL NUMBER: 047 22131

STREET ADDRESS: 7401 N. Tryon St.

INDUSTRIAL

LOT NUMBER:

TOWNSHIP (CHECK ONE):

0 MECKLENBURG
1 CHARLOTTE
2 DAVIDSON
3 CORNELIUS
4 PINEVILLE
5 MATTHEWS
6 HUNTERSVILLE
7 MINT HILL

Replace tids

30
PER SHIFT

...OTHER PLEASE DESCRIBE

INDUSTRIAL PROCESS WASTE WATER

...ING SYSTEM DESCRIBE THE PROPOSED ADDITION

...TER ORIGIN: ... COUNTY (I) ... MUNICIPAL (M) ... PRIVATE WELL (P)
... SHARED WELL (S) ... OTHER SPRINGS' (O)

...LOCATED ON THE ... PLAT ... LOCATION ON PLAT

... WATER LINES ... YES ... NO
... OUT OF ... YES ... NO

... ACCEPTABLE ... STATE ... WASTEWATER DISCHARGE PERMIT ...

... CONTACT PERSON FOR PROPERTY OWNER'S APPLICATION

NAME: Masco Inc ... Sweeney Gary E.

ADDRESS: 500 East Blvd # 201 ... PHONE: (W) 451-4279

Charlotte NC 28203 ... 370-0683 Ext 206

... PERSON TO BE CONTACTED ...

... PROPERTY DESCRIBED ... AS THE "JOB LOCATION" HAS ... APPLICATION, ACKNOWLEDGES ... AUTHORIZES AGENTS OF THE ... COUNTY HEALTH DEPARTMENT TO ENTER ON TO THE PROPERTY FOR THE PURPOSE OF PROCESSING THIS REQUEST.

SIGNATURE: Gary E. Stephens ... DATE: 9/16/97

MECKLENBURG ... HEALTH DEPARTMENT
ENVIRONMENTAL ... SUBDIVISION
CORNHAL MARSHALL DR., SUITE ... CHARLOTTE, NC ... (704) 336-5102