Date Received 1-9-84

MECK COUNTY HEALTH DEPARTMENT RECEIVED JAN 9 1984 ENVIRONMENTAL HEALTH

ICAR(S) Application No. 20488

T. C. No. 001-164-45

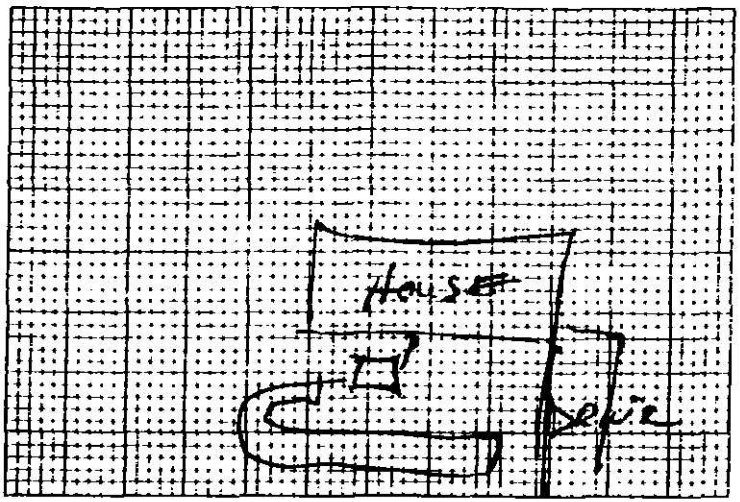
Map Date _____

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) X 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 ___ ___ ___
6) Washing Machine ✓ Yes ___ No
7) Garbage Disposal ___ Yes ✓ No
8) Dishwasher ✓ Yes ___ 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 Royster (LAST) George (FIRST) A. (MIDDLE)

14) ADDRESS OF OWNER Rt 2, Box 193 - Davidson, NC

15) PHONE NO. Home 892-1600 Office _____

16) LOCATION OF SYSTEM 21317 County Club Dr (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 ___ 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.

1-9-84
DATE OF APPLICATION

Mrs. George Royster
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

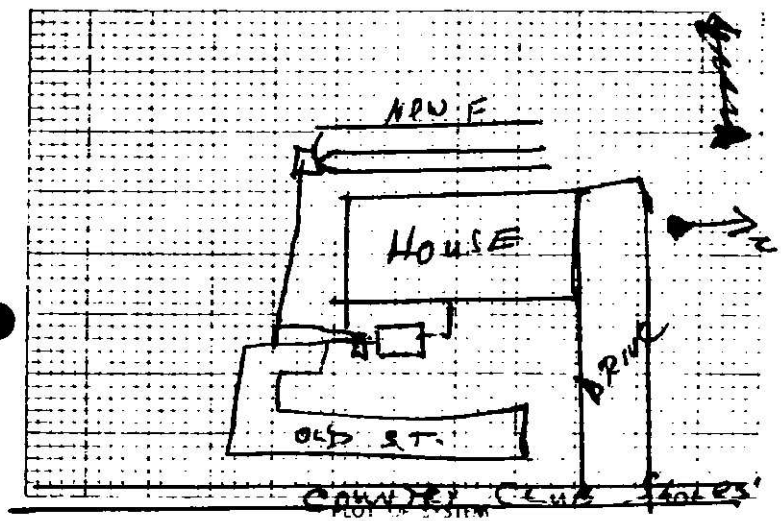
Date Issued 1-9-84 Serial No. 6879 ICAR (S) Permit No. 20488

T. C No. 001-164-15

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 1 ___ 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 1-9-84 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 JAN 30 1984, after which date this permit shall be null and void



Permeability Rate PS IVA

Liquid Capacity of Tank ___ Repair

Tank Construction Repair

Absorption and Disposal Area

Total Line Length 150 LIN FT.

Number of Lines Three

Distance from House 8 FT.

Distance from Property Line 20 FT.

Distance from Well 200 FT. Community

NAME OF OWNER ROYSTER GEORGE

LOCATION OF PROPERTY 21317 Country Club Drive

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.

Comments: Three trenches to be 50 FT x 3 FT x 18 inches Stone — hay or straw Cover - grade Bds - New Dist. Box — schedule 40 pipe from Tank to Dist Box

Division or Section Head

Environmentalist Ralph Miller

* 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

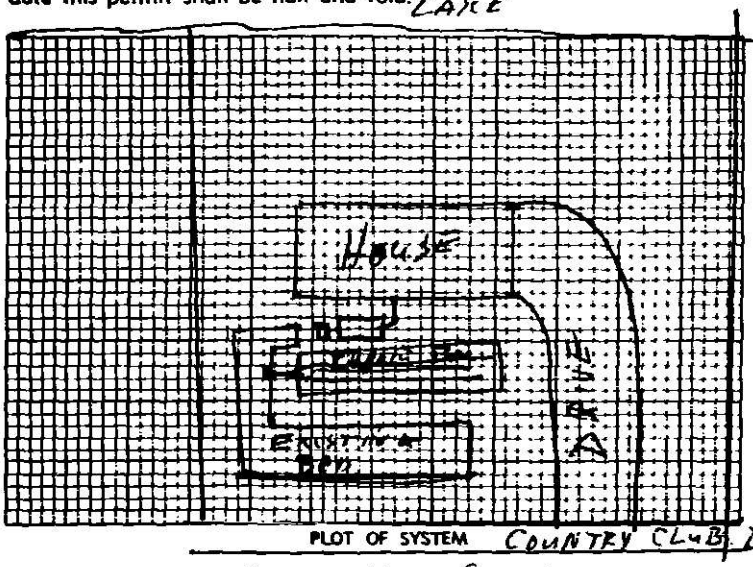
Date Issued March 5th 1984 Serial No. 07014 ICAR(S) Permit No. 20488

T. C. No. 001-164-15

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, X 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 20488, dated 1-9-84 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 April 5th 1984, after which date this permit shall be null and void. LAKE



PLOT OF SYSTEM COUNTRY CLUB DR

Permeability Rate PS CW

Liquid Capacity of Tank

Tank Construction Repair

Absorption and/or Nitrification Lines:

Total Line Length 150 1/2 FT

Number of Lines Three

Distance from House 10 FT

Distance from Property Line 20 FT.

Distance from Well 200 F Community

NAME OF OWNER ROYSTER, GEORGE

LOCATION OF PROPERTY 21317 COUNTRY CLUB DRIVE

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.

Comments: One Bed Tobe 50 FT x 9 FT x 18 inches Stone hay or straw cover tie in to existing bed at "A"

Division or Section Head

Ralph Nillis
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

C of A (s) No. 20488

Date Issued 4-16-84 **Serial** 6496 T C. No. 001-164-15 L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
CERTIFICATE OF COMPLETION
CERTIFICATE OF APPROVAL
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner Royster (LAST) George (FIRST) ____ (MIDDLE)

Location of Property 21317 Country Club Dr.

Application Number 20488 Permit Number 20488

Inspection Data:

Liquid Capacity of Tank 1500 Tank Material Repair

Total Length of Drain Tile 180 Number of Lines 3

Depth of Filter Material 72" Cover Depth 24"

Water Supply Source Comm Distance from Water Source 500'

Excavation Inspected 4-16-84 (DATE) Tank Inspected ____ (DATE)

Nitrification Field Inspected 4-16-84 (DATE)

Washing Machine Line Inspected, If Applicable ____ (DATE)

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

D. R. Ferguson
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH