SEE INSTRUCTIONS ON BACK

Date Received 11/2/79 9[illegible] ICAR(S) Application No 7850

T. C. No 055-358-09

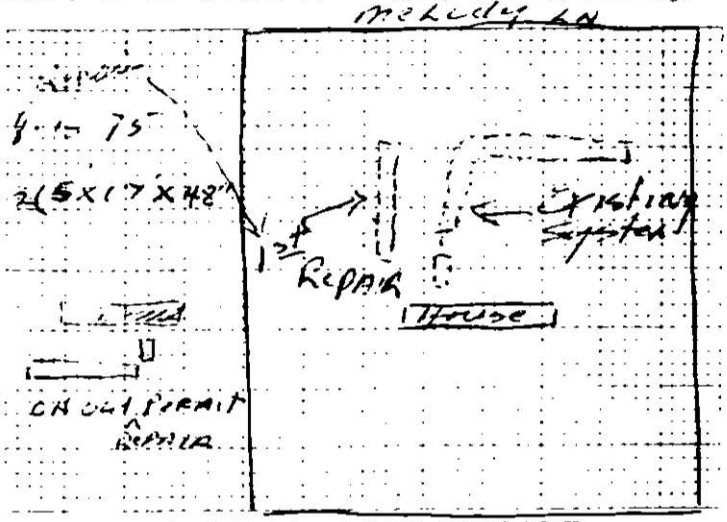
Map Date ___

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 2 ✓ Alter 3 Repair an individual septic tank wastewater treatment [illegible] with a subsurface [illegible] absorption effluent discharge



3 PLOT PLAN ACCURATELY DIMENSIONED

Mobile Home Yes ___ No
Building Yes ✓ No
4 No. of Bedrooms 3
5 Public or Community Water Yes ___ No
Employee ___
6 Well or Spring 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 ___
Package System ___
[illegible] Subdivision within 200 feet ___
[illegible] Subdivision within 200 feet ___ Yes ___ No
[illegible] within 200 feet of ___ Yes ___ No
11 FHA Case No ___
12 VA Case No ___

13 NAME OF OWNER Shackleford (LAST) Wm. (FIRST) Boyd (MIDDLE)

14 ADDRESS OF OWNER 7112 Melody LN.

15 PHONE NO Home 394-1485 Office 377-6535

16 LOCATION OF SYSTEM 7112 Melody (STREET OR COUNTY ROAD)

17 SUBDIVISION Meeks Park LOT NO #2 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 PIN NUMBER See Instructions

The undersigned property owner agrees that he has read the foregoing application and that the contents of same are true and understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true

10-31-79 ___
DATE OF APPLICATION

William B Shackleford
OWNER

EHDS 74

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial 3456

Date Issued 29 Nov 1979

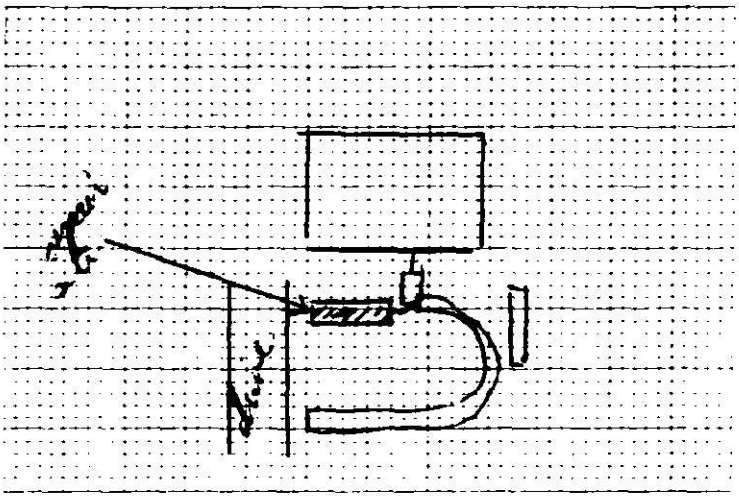
ICAR(S) Permit No. 9850

T C No. 055-351-09

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 9850, dated 30 Oct 1979 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 1 Jan 1979, after which date this permit shall be null and void



PLOT OF SYSTEM

Repair Permit

Type of Construction: Conventional

Absorption Area Application Rate: 100 sq ft

Number of Lines: 2

Distance from Tank to Line: 10'

Length of Lines: 10'

Distance from Well: 50'+

NAME OF OWNER Shackleford, Wm Boyd

LOCATION OF PROPERTY 7112 Melody Lane

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.

in bed 6'x15'x45"

Division or Section Head

John R Atkinson
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. 9850 /

Serial 3290

T C No 055-358-09

Date Issued 30 Nov 1979

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 Shalsford, Wm Boyd
LAST FIRST MIDDLE

Location of Property 7112 Melody Lane

Application Number

Permit Number 9850

Repair
Inspection Date:

Liquid Capacity of Tank

Tank Material

Total Length of Drain Tile 200 Lf

Number of Lines 2

Depth of Filter Material 48"

Cover Depth 18" to 24"

Water Supply Source well

Distance from Water Source 50'

Excavation Inspected
DATE

Tank Inspected
DATE

Final or Field Inspected 30 Nov 1979
DATE

Washing Machine Disposal 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 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

John R Adkisson
Environmentalist

EHD-5-76

Environmental Health Department's Copy