MECK COUNTY DEPARTMENT OF
Date RECEIVED 5-17-83
MAY 17 1983
ENVIRONMENTAL HEALTH

SEE INSTRUCTIONS ON BACK

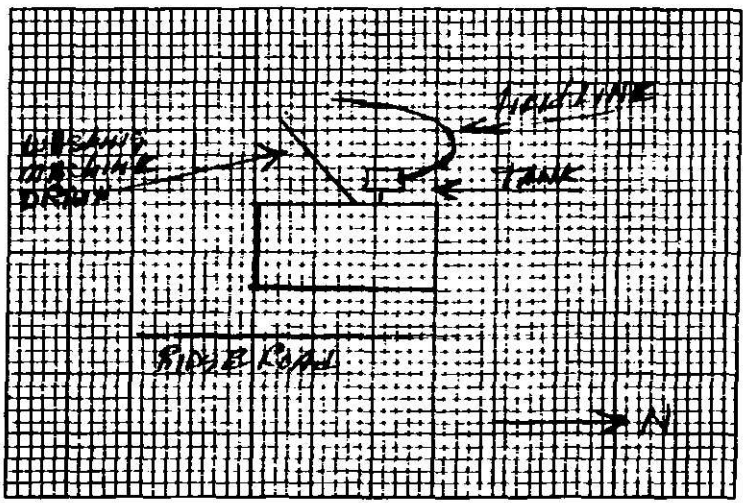
ICAR(S) Application No. 19686
? T. C. No. 215-081-01
Map Date

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) ✓ 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 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. NO
12) VA Case No. NO

13) NAME OF OWNER Gaddy (LAST) Albert (FIRST) Austin (MIDDLE)
14) ADDRESS OF OWNER 3510 Ridge Rd Matthews NC 28105
15) PHONE NO. Home 704-847-6100 Office 704-347-6911
16) LOCATION OF SYSTEM 3510 Ridge Rd (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.

5-16-83
DATE OF APPLICATION

Albert Austin Gaddy
OWNER

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 6279

Date Issued 5-17-83

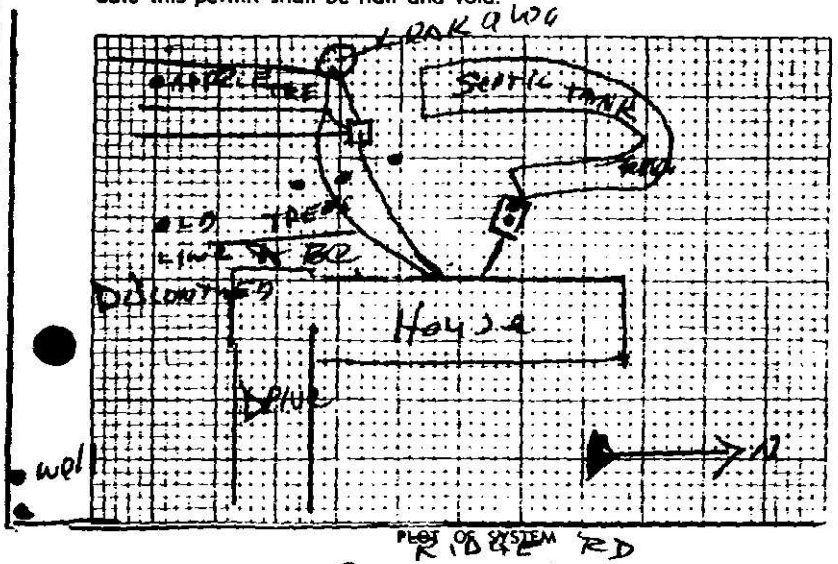
ICAR(S) Permit No. 19686

T. C. No. 215-081-01

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 19686 dated 5-18-83 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 JUNE 2nd, 1983 after which date this permit shall be null and void.



Permeability Rate U UB

Liquid Capacity of Tank Repair.

Tank Construction Repair.

Absorption and/or Nitrification Lines: W/M

Total Line Length 150 LIN FT

Number of Lines Three

Distance from House 30 FT

Distance from Property Line 20 FT

Distance from Well 105 FT.

NAME OF OWNER GADDY, ALBERT

LOCATION OF PROPERTY 2540 RIDGE Rd.

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: W/M Three Trenches & Be 50 FT x 3FT x 17 inches Stone - bayou stone COVER - 1R W Dist Box - Box & Be 35 FT from

Division or Section Head

Ralph Nelle
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. 19686 /

Date Issued 6-21-83 Serial 5930 T. C. No. 215-081-01

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner GADDY (LAST), ALBERT (FIRST) (MIDDLE)

Location of Property 2540 RIDGE RD

Application Number 19686 Permit Number 19686

Inspection Data:

Liquid Capacity of Tank Repair Tank Material Repair

Total Length of Drain Tile 150 lin FT Number of Lines Three

Depth of Filter Material 17 inches Cover Depth 12 inches

Water Supply Source well Distance from Water Source 105 FT.

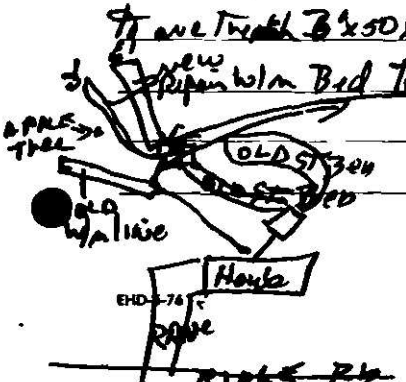
Excavation Inspected 6-21-83 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 6-21-83 (DATE)

Washing Machine Line Inspected, If Applicable 6-21-83 (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: Line location changed due to W/M & ST Bens interference
One Trench 3'x50'x17" Stone & one Bed 6'x50'x17 inches Stone
New Repair W/M Bed Tied into New S.T. DIST Box



Rebel Nelles
Environmentalist

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY