SEE INSTRUCTIONS ON BACK

Date Received 7/3/80

(CAR(S) Application No. 16627

T C. No. 033-112-13

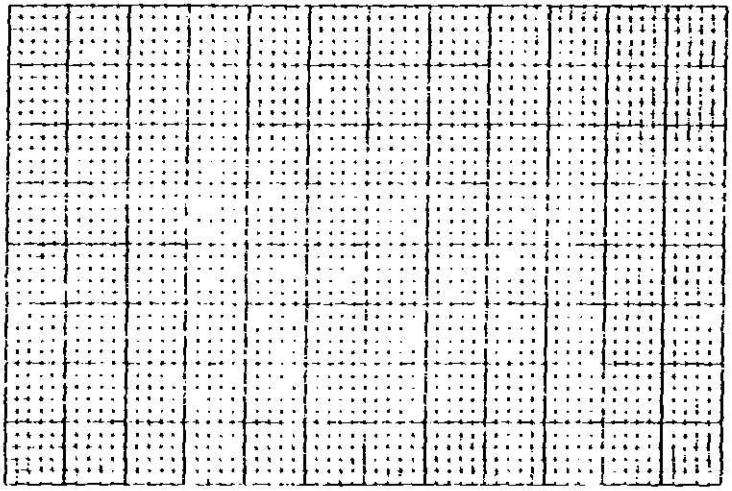
Map Date _____

# 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.



2) 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 ____
12) VA Case No ____

13) NAME OF OWNER Marrow (LAST), Sarah (FIRST) L. (MIDDLE)

14) ADDRESS OF OWNER Route 9 Box 208 28208

15) PHONE NO Home ____ Office ____

16) LOCATION OF SYSTEM Oakdale Road (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.

7/1/3
DATE OF APPLICATION

Sarah L. Marrow
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued 2-13-80

Serial 3614

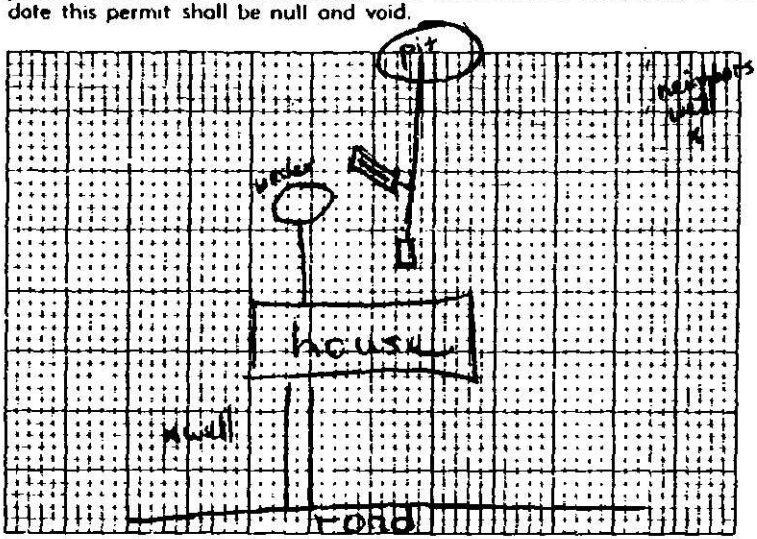
ICAR(S) Permit No. 16627

T C No 033-112-13

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 _____, dated 2-13-80 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 2-23-80, after which date this permit shall be null and void.




PLOT OF SYSTEM

Permeability Rate ———

Liquid Capacity of Tank ———

Tank Construction ———

Absorption and/or Nitrification Lines:

Total Line Length 100'

Number of Lines 1

Distance from House 10'

Distance from Property Line 10'

Distance from Well >50'

NAME OF OWNER Marrow, Sarah L.

LOCATION OF PROPERTY Oakdale Road

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.

3' wide * 12' long * 6' of stone
install overflow pit as deep as possible

Division or Section Head

Mike Sexton
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-S-74

Environmental Health Department's Copy

Date Issued 4-30-80 Serial 3639

C of A (s) No. 16627

T C No 033-112-13

# 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 Marrow (LAST), Sarah (FIRST) L. (MIDDLE)

Location of Property Oakdale Road

Application Number 16627 Permit Number 16627

**Inspection Data:**

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile 100' Number of Lines 1

Depth of Filter Material 6' Cover Depth 15"

Water Supply Source well Distance from Water Source >50'

Excavation Inspected — (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 4-30-80 (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:

Extremely poor soils.

Mike Sexton
Environmentalist

EHD-S-76

**Environmental Health Department's Copy**

SEE INSTRUCTIONS ON BACK

Date Received 1-15-83

ICAR (S) Application No. 16627

T. C. No. 033-112-13

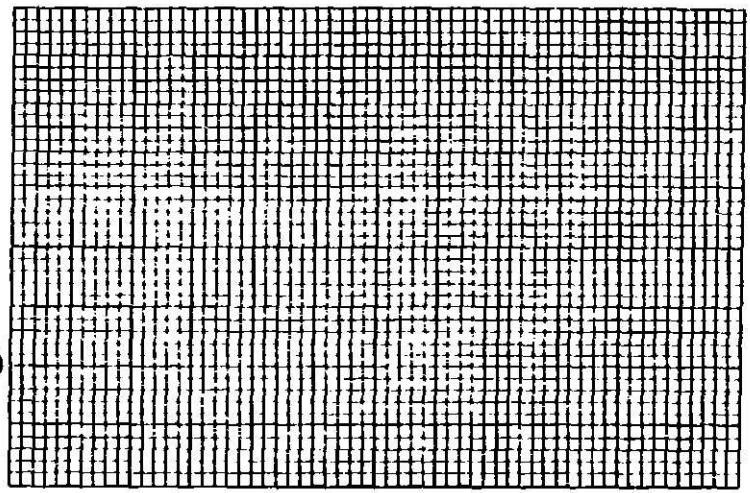
Map Date

# 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. ___
12) VA Case No. ___

13) NAME OF OWNER Buck (LAST) Allan (FIRST) C. (MIDDLE)

14) ADDRESS OF OWNER Rt. 4, Box 200A, Charlotte, N.C. 28216

15) PHONE NO. Home 393-3103 Office 332-5002

16) LOCATION OF SYSTEM Oakdale Rd. (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. ___ Block No. ___

Map Book No. ___ Page No. ___

18) DEED REFERENCE — DEED BOOK 4281 AT PAGE 0572

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.

1-13-83
DATE OF APPLICATION

Allan C. Buck
OWNER

EHD-5-76

DEPARTMENT'S COPY

A

Serial No. 5955

ICAR(S) Permit No. 16627

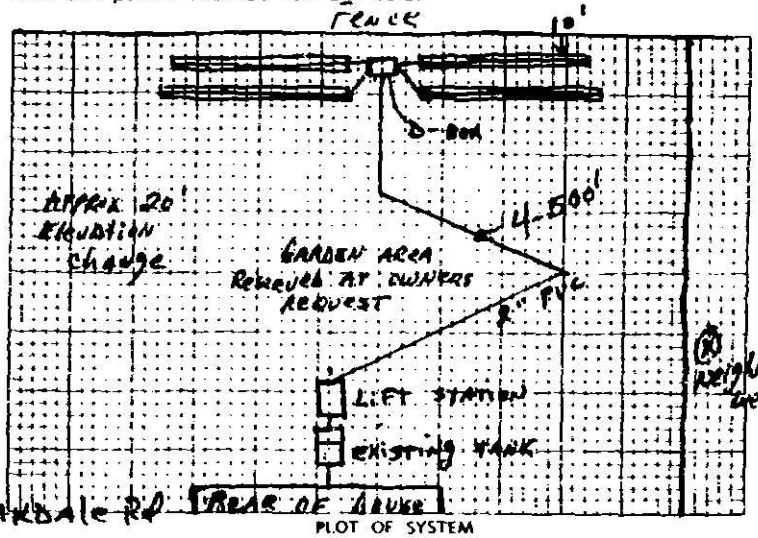
Date Issued 2-2-83

T C No 033-112-13

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 16627, dated 1-13-83, 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 3-2-83, after which date this permit shall be null and void.




Permeability Rate Repair

Liquid Capacity of Tank existing

Tank Construction —

Absorption and/or Nitrification Lines

Total Line Length 200'

Number of Lines 4

Distance from House 710'

Distance from Property Line 710'

Distance from Well 750'

NAME OF OWNER Allan C. Buck

LOCATION OF PROPERTY Oakdale Road

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: Install 800 gal lift station with 2 hp pump, 4" sch. 40 PVC pipe to D-Box at end of property, Then 4-50' long x 3' wide x 12" stone trenches. Hook washing machine line to Lift Station

Division or Section Head

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. 16627

Date Issued 3-16-83 Serial 5660 T C No 033-112-13

# 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 Buck (LAST) Allan (FIRST) C (MIDDLE)

Location of Property Rt 9, Bx. 208-A, Oakdale Road, Charlotte

Application Number 16627 Permit Number 16627

**Inspection Data:** Repair

Liquid Capacity of Tank 1000 gal liftt Tank Material p/c concrete

Total Length of Drain Tile 180 ft Number of Lines 4

Depth of Filter Material 12" Cover Depth 2 ft

Water Supply Source well Distance from Water Source 750'

Excavation Inspected 3-16-83 (DATE) Tank Inspected 3-16-83 (DATE)

Nitrification Field Inspected 3-16-83 (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:

Environmentalist

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY