Date Received 6-26-73 SEE INSTRUCTIONS ON BACK

MECK COUNTY HEALTH DEPT.
RECEIVED
JUN 26 1973
ENVIRONMENTAL HEALTH DIVISION

ICAR(S) Application No 6546

T C No

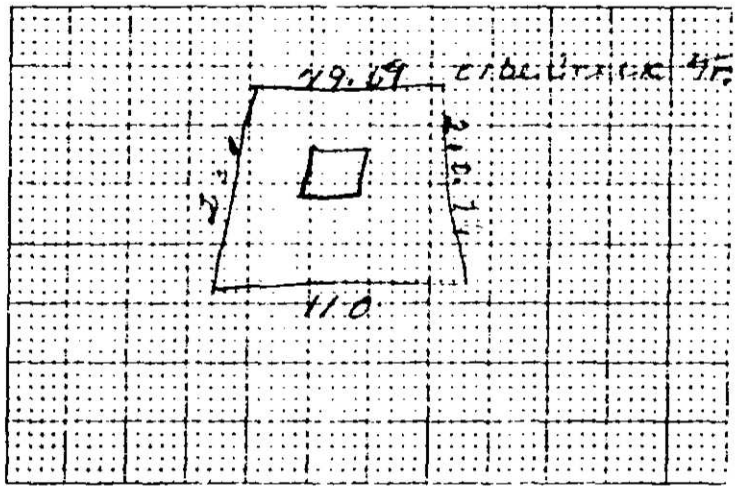
Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

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 Health Department 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) No of Bedroom 4

5) Business Use Max No Employees

6) Washing Machine X Yes No

7) Garbage Disposal X Yes No

8) Dishwasher X Yes No

9) Water Supply
A) Individual Well
B) Governmental System
C) Community System
1 Well source X
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 Julia H. Fisher (LAST / FIRST / MIDDLE)

14) ADDRESS OF OWNER 3308 Olde Creek Trail

15) PHONE NO Home 536-9225 Office 372-1850 Ext. 27

16) LOCATION OF SYSTEM 3308 Olde Creek Trail (STREET OR COUNTY ROAD)

17) SUBDIVISION Olde Creek Lot No 6 Block No F

Map Book No 11 Page No. 181

18) DEED REFERENCE — DEED BOOK 3256 AT PAGE 209

19) HAS A PERCOLATION TEST BEEN RUN? YES NO DATE RUN

I did not buy the house new, I have no way of knowing.

20) PTR NUMBER (See Instructions)

The undersigned person hereby agrees that he has read the foregoing application and that the content 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.

June 26, 1973
DATE OF APPLICATION

Julia H. Fisher
OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 10-11-73

Serial No. 4480

ICAR(S) Permit No. 6546

T. C. No. _____

Map Date _____

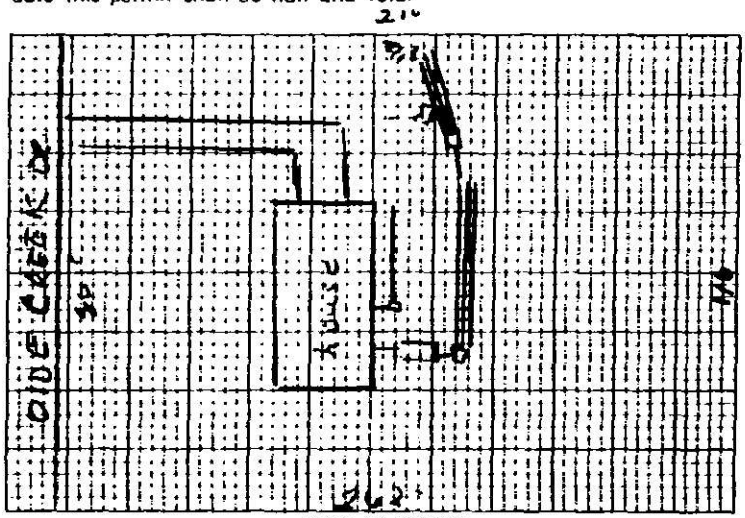
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTRUCTION, 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 6546, dated 10-11-73 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 11-11-73, after which date this permit shall be null and void.



Percolation Rate —

Liquid Capacity of Tank —

Tank Construction —

Absorption and/or Nitrification Lines:

Total Line Lenght 100'

Number of Lines 3

Distance from House 10'

Distance from Property Line 15'

Distance from Well 100'

NAME OF OWNER Julian H Fisher

LOCATION OF PROPERTY 3305 Olde Creek Trail

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used.

Comments: 7½ x 35 x 17" stone repair by Ralph Lawson

Division or Section Head _____

Environmentalist Thomas R. Ward

* 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 Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

FORM NO. E-5-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 10-11-73

Serial 4025

C of A (s) No. 6546

T. C. No. 73-68-05 06

Map Date 9-5-73

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Fisher, Julia H.
(LAST, FIRST, MIDDLE)

Location of Property 3308 Olde Creek Trail

Application Number 6546 Permit Number 6546

Inspection Data:

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile 100' Number of Lines 3

Depth of Filter Material 17" Cover Depth 24"

Water Supply Source town water Distance from Water Source NA

Excavation Inspected 10-11-73 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 10-11-73 (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 Board of Health 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: repair by Ralph Farmer

Thomas R. Ward
Environmentalist

FORM NO. E-6-4-1-71

HEALTH DEPARTMENT'S COPY