SEE INSTRUCTIONS ON BACK

Date Received 9/27/82

ICAR(S) Application No. 19022

T. C. No. 105-041-03

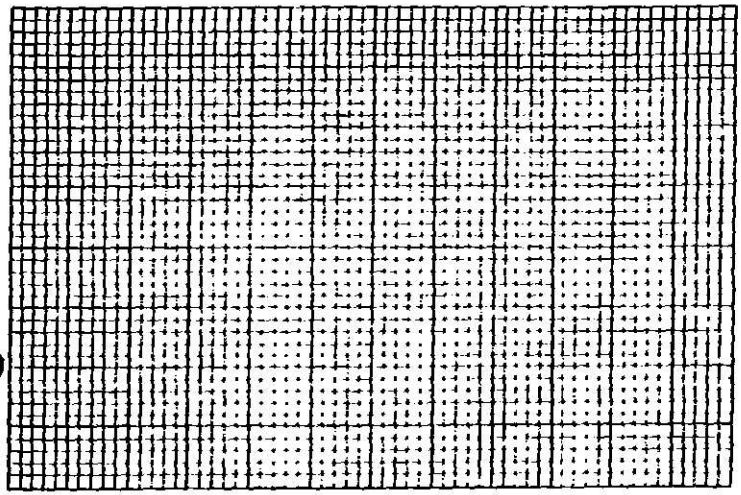
Map Date

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)

Mobile Home ___ Yes X No
Residence X Yes ___ No

4) No of Bedrooms 4

5) Business Use — Max No Employees ___

6) Washing Machine ✓ Yes ___ No

7) Garbage Disposal ___ Yes X No

8) Dishwasher X 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 X No
House located within 200 feet of community sewer ___ Yes X No

11) FHA Case No ___

12) VA Case No. ___

13) NAME OF OWNER Herron (LAST) Harvey (FIRST) E. (MIDDLE)

14) ADDRESS OF OWNER Rt. 10 Box 463 Charlotte NC 28213

15) PHONE NO. Home 596-0770 Office ___

16) LOCATION OF SYSTEM Buck Creek Church 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 May 4 82

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.

9/27/82
DATE OF APPLICATION

Ruby W. Herron
OWNER

EHD-5-76

Serial No. 5772

ICAR(S) Permit No. 19022

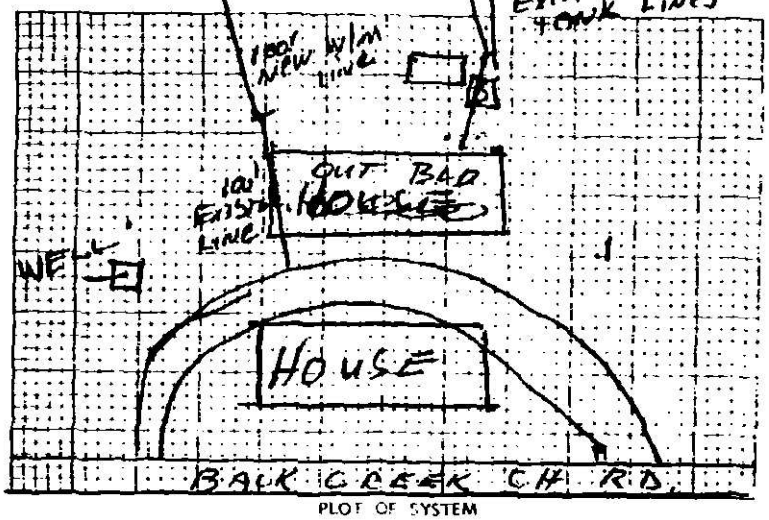
Date Issued 9-27-82

T. C. No. 105-041-03

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, V 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 19022, dated 9/27-82 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 OCT 1 82, after which date this permit shall be null and void



PLOT OF SYSTEM

Permeability Rate PS IV A

Liquid Capacity of Tank ____

Tank Construction ____

Absorption and/or Nitrification Lines

Total Line Length 100 lin ft

Number of Lines ONE

Distance from House 100 FT

Distance from Property Line 50 FT

Distance from Well 60 FT.

NAME OF OWNER HERRON HARVEY Rt #10 Box 466B

LOCATION OF PROPERTY BACK CREEK CH 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: one trench to be 100 ft long x 3 ft wide x 2 ft deep 12 inches stone & bay or straw - grade boards -

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-5-74

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

C of A (s) No. 19022

Date Issued Sept 28th 82 Serial 5424

T. C. No. 105-041-03

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner HERRON (LAST) HARVEY (FIRST) (MIDDLE)

Location of Property BACK CREEK CHURCH RD

Application Number 19022 Permit Number 19022

Inspection Data:

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile 100 lin ft Number of Lines one

Depth of Filter Material 12 inches Cover Depth 12 inches

Water Supply Source well Distance from Water Source 60 FT

Excavation Inspected 9-28-82 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected [redacted] (DATE)

Washing Machine Line Inspected, If Applicable 9-28-82 (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, X 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: _____

Ralph Mills
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY