5

Date Received 3-22-73

APT No 5792

T C No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER DENNIS (LAST) JOHNNIE (FIRST) COMMODORE (MIDDLE)

2) ADDRESS OF OWNER 6441 DALE AVE ZIP 28212

3) PHONE NO Home 537-4760 Office —

4) LOCATION OF PROPERTY 5601 ELLIOTT DRIVE (STREET OR COUNTY ROAD)

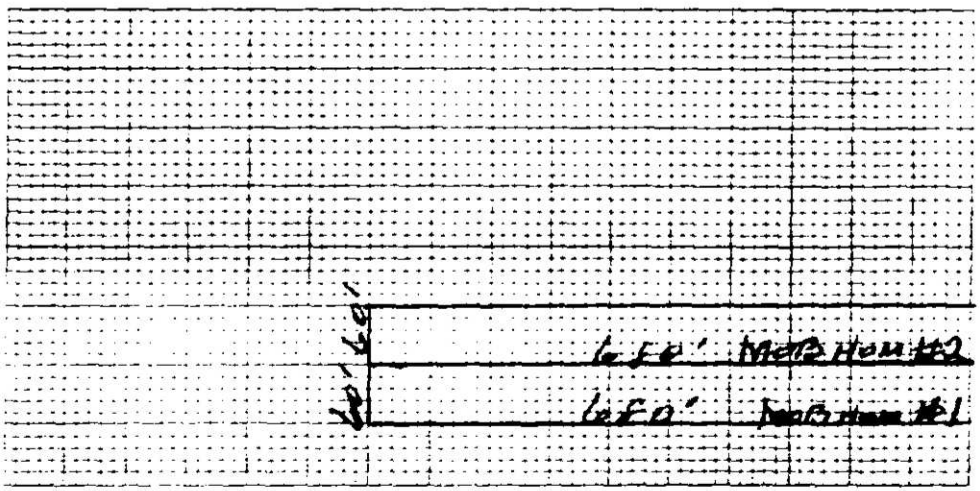
5) SUBDIVISION MARION LOT NO 75 BLOCK NO —

MAP BOOK NO 6 PAGE NO 355

6) DEED REFERENCE DEED BOOK 3387 PAGE NO 4

NOTE FOR MOBILE HOME #2

Application is hereby made to the Mecklenburg County Health Department for the conduct of a percolation test and an on site inspection of the lot here inabove described for the purpose of determining if the lot is suitable for the installation of an individual septic tank wastewater treatment system with subsurface soil absorption, effluent discharge



7) ACCURATELY DIAGRAM & DIMENSION LOT

OWNER J. C. Commodore

FORM NO E-1-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No.

PTR No 5792

Date Issued May 2, 1973

T C No 109-311-15

Map Date

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

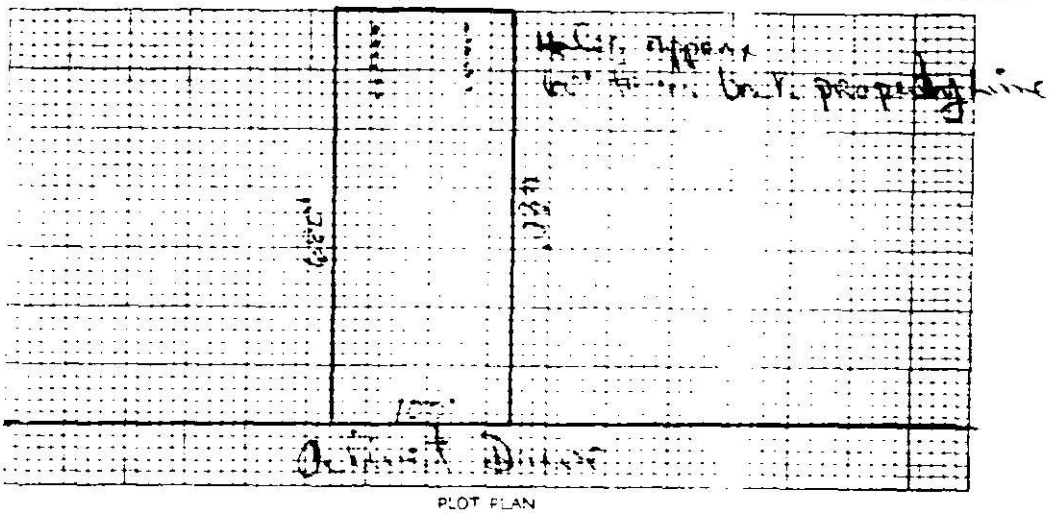
PERCOLATION TEST REPORT

NAME OF OWNER Dennis (LAST) Johnnie (FIRST) Commodore (MIDDLE)

ADDRESS OF OWNER 8441 Dale Avenue ZIP 28212

LOCATION OF PROPERTY 5601 Olivet Drive for Xxxx Trailer #? (STREET OR NEW ROAD)

SUBDIVISION LOT NO 75 BLOCK NO



PLOT PLAN

This is to certify that a percolation test has been run and an on-site inspection made by the Mecklenburg County Health Department on the lot described above. The said test was conducted on that portion of the lot as indicated on above plot

The percolation rate determined by the test was 43 min/in. The said lot is approved for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption effluent discharge subject to the following terms and conditions

1. A permit to install, construct, alter or repair the specific system shall be obtained from the Mecklenburg County Health Department prior to the beginning of any construction of buildings or of the wastewater treatment system on the said lot.
2. The size of the septic tank wastewater treatment system which must be installed will be determined by the Health Department prior to installation based on the percolation rate obtained above and on the size and type of building constructed thereon
3. This approval is valid only if the system is installed in the immediate area where the percolation test was run
4. This approval is void if any grading, filling or construction including building of roads is performed on the lot which, in the opinion of the Health Department, render the area where the percolation test was run unsuitable for the installation, construction, alteration and/or repair of such a system

This approval is granted based on the laws of the State of North Carolina and the rules and regulations of the North Carolina State Board of Health and the Mecklenburg County Board of Health which were in effect on the date of issuance and is void if at any time in the future, prior to the completion of the system, these laws, rules, and regulations are changed such that this approval would not have been granted had the new or revised laws, rules, and regulations been in effect on the issue date.

John R Adkisson

Director, Environmental Health Division or Authorized Section Head

FORM NO E-2-4-1-71

HEALTH DEPARTMENT'S COPY

Date Received FEB 26, 1975

ICAR (S) Application No 5792

PTC No 109-311-15

Map Date

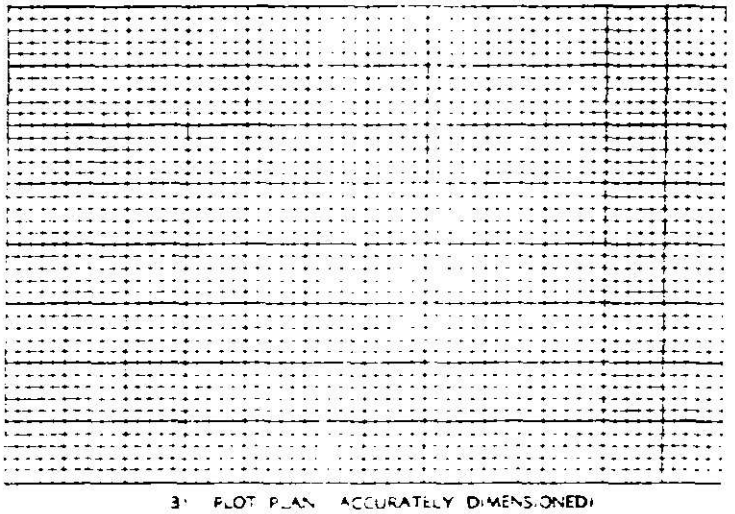
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 _____ 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 Bedrooms 2

5) Business Use N/A 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 N/A

12) VA Case No N/A

13) NAME OF OWNER DENNIS (LAST) JENN (FIRST) C (MIDDLE)

14) ADDRESS OF OWNER 6111 DALE ACRE

15) PHONE NO Home 537-8760 Office SAME

16) LOCATION OF SYSTEM Elliott Dr. Lot 61 (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No _____ Page No. _____

18) DEED REFERENCE — DEED BOOK 3609 AT PAGE 388

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ___ NO DATE RUN MAY 2, 1973

20) PTR NUMBER (See Instructions) S-791

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.

26 FEB 1975
DATE OF APPLICATION

OWNER

FORM NO E-4-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued April 15, 1975 **Serial No. 4800**
IMPROVEMENTS PERMIT

LA No 5792
T C No 109-311-15
Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Dennis (LAST) John (FIRST) C. (MIDDLE)

ADDRESS OF OWNER 6441 Dale Avenue, Charlotte, N. C. ZIP

LOCATION OF LOT 5519 Olivet Drive (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO

MAP BOOK NO PAGE NO

The above specified lot is approved by the Mecklenburg County Health Department for the installation of an individual septic tank system with subsurface, soil absorption effluent discharge based on the percolation test results which yielded a percolation rate of 43Min./In. on an on-site inspection of the said lot, and upon the information supplied in the "Application for an Installation Construction Alteration and/or Repair Permit number 5792. This approval is subject to the following terms and conditions

1. That the nitrification field be installed, constructed, altered, and/or repaired in the same area where the percolation test was run.
2. That an 'Installation, Construction, Alteration, and/or Repair Permit' be issued and in full force and effect when the system is installed, constructed, altred, and/or repaired and that the system be installed in accordance with same

This approval may be revoked and the building inspection department requested to revoke any building permit(s) which have been issued to authorize construction on the said lot if at any time it is determined that any information contained in the "Application for an Installation, Construction, Alteration, and/or Repair Permit" is not correct or is untrue or that the septic-tank system is not being installed, constructed, altered and/or repaired in accordance with a valid Installation, Construction Alteration, and/or Repair Permit

Environmentalist

John R. Robinson
Director, Environmental Health Division or Authorized Section Head

FORM NO E-3-8-1-72

HEALTH DEPARTMENT'S COPY

Date Issued FEB 26, 1975

Serial No.

ICAR(S) Permit No 5792

POT C No 109-311-15

Map Date —

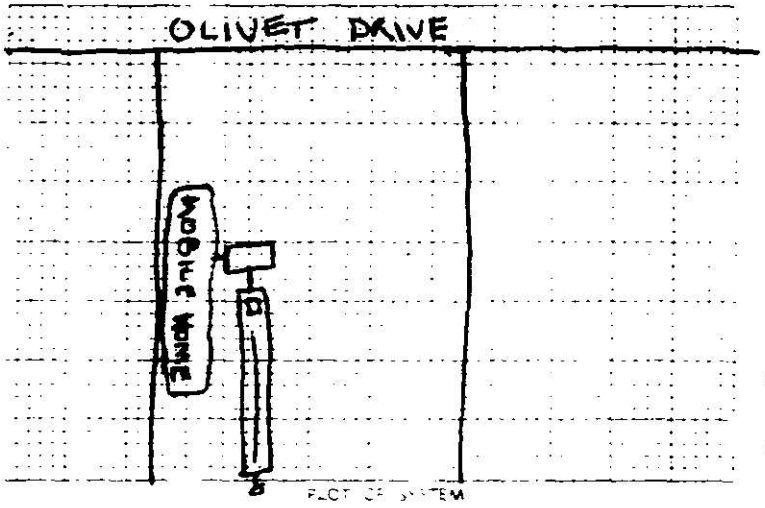
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 5792 dated FEB 26, 1975 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 MAR 26, 1975 after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 43

Liquid Capacity of Tank 1000 GAL

Tank Construction PRECAST CONCRETE

Absorption Lines

Total Line Length 300'

Number (3) 100' x 1½' - 17"

Distance from Tank 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER JOHN C DENNIS

LOCATION OF PROPERTY 5601 OLIVET DRIVE

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 AERATION PIT (2½' x 7' x 4')

Division or Section Head

Environmentalist Paul A. Kiefer

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.

E-5-9-1-72

PRINTED IN U.S.A.

Date Issued FEB 28 1975 Serial No. [illegible] C of A Ist No 5792

PC T C No 109-311-15

Map Date —

CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner DENNIS (LAST) JOHN (FIRST) (MIDDLE)

Location of Property 5601 OLIVET DRIVE

Application Number 5792 Permit Number 5792

Inspection Date:

Liquid Capacity of Tank 1000 GAL Tank Material PRECAST CONCRETE

Total Length of Drain Tile 300' Number of Lines (3) 100' x 1½ x 17"

Depth of Filter Material 17" Cover Depth 12"

Water Supply Source PRIVATE WELL Distance from Water Source 120'

Excavation Inspected — (DATE) Tank Inspected FEB 27, 1975 (DATE)

Nitrification Field Inspected FEB 28, 1975 (DATE)

Washing Machine Line Inspected, If Applicable — (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface [illegible] and it has been [illegible] constructed in accordance with the permit issued and the regulations of the Mecklenburg County Board of Health in effect at the date of issuance of the permit. The issuance of this Certificate of Approval is not a guarantee that the system will operate properly or relieve any person from liability for damages resulting from the failure of the system to operate properly. This Certificate of Approval is issued subject to these restrictions and conditions as noted on the permit and 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

Paul A. Kafer
Environmentalist

FORM NO E-6-9-1-72

[illegible] DEPARTMENT'S COPY