Date Received [illegible] INSTRUCTIONS ON BACK

MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH RECEIVED JUL 18 1979

ICAR(S) Application No. 15953

T. C. No. 137 075 04

Map Date _____

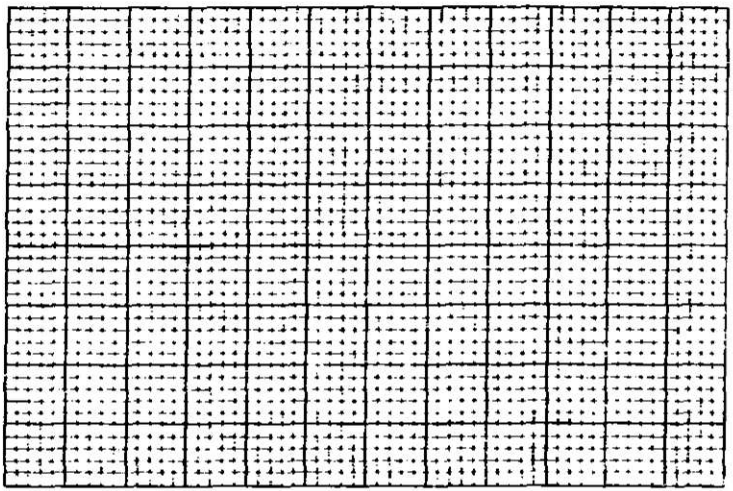
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 Bedrooms 3

5) Business Use — Max No Employees _____

6) Washing Machine X Yes _____ No

7) Garbage Disposal _____ Yes X No

8) Dishwasher _____ Yes X No

9) Water Supply:
A) Individual Well X
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 NELSON (LAST) PAUL (FIRST) M. (MIDDLE)

14) ADDRESS OF OWNER 4101 Mintwood Drive, Charlotte, N?. C. 28212
Tenant: Harland Blue Ph 545-3084

15) PHONE NO. Home 545-6588 Office 545-6181

16) LOCATION OF SYSTEM 10718 Albemarle Rd., Charlotte, N. C. 28212
(STREET OR COUNTY ROAD)

17) SUBDIVISION None Lot No. 1.865 Acres Block No. _____
SS Albemarle Road

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK 3708 AT PAGE 600

19) HAS A PERCOLATION TEST 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.

July 13th, 1979
DATE OF APPLICATION

Paul M. Nelson
OWNER

FORM NO E-4-4-1-71

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 4-16-82

ICAR(S) Application No. 15953

T. C. No. 137-075-04

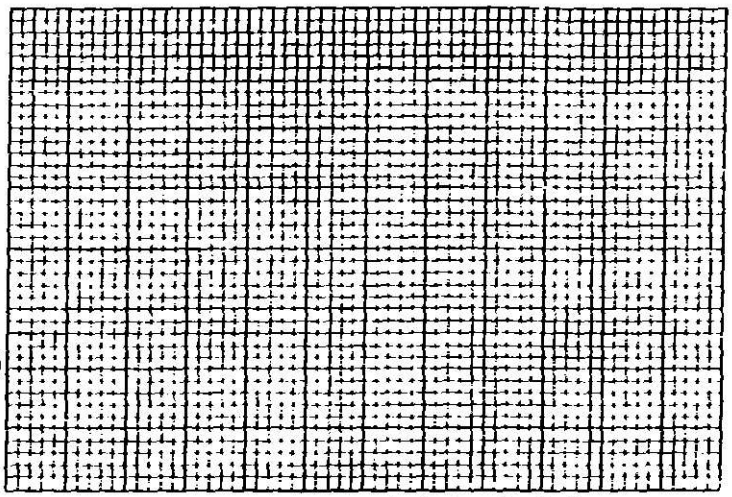
Map Date _____

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)

4) Mobile Home X Yes ___ No
Residence X Yes ___ No

5) No of Bedrooms 3

6) Business Use — Max No Employees _____

7) Washing Machine X Yes ___ No

8) Garbage Disposal " Yes ___ No

9) Dishwasher " Yes ___ No

10) Water Supply
A) Individual Well X
B) Governmental System _____
C) Community System:
1. Well source _____
2 Governmental source _____

11) Sewage System
House located within 200 feet of public sewer ___ Yes X No
House located within 200 feet of community sewer ___ Yes X No

12) FHA Case No _____

13) VA Case No. _____

13) NAME OF OWNER Paul M & Juanita M. Nelson: & Harlan Blue & wife
LAST FIRST MIDDLE

14) ADDRESS OF OWNER P.O.Box 23039,Mint Hill,NC28212, Charlotte, N. C.28212

15) PHONE NO. Home 545-3084 Office 545-6181

16) LOCATION OF SYSTEM 10718 Albemarle Road, Charlotte, N. C. 28212
STREET OR COUNTY ROAD

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

Map Book No. _____ Page No. _____ TC 137-075-04

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.

April 15th, 1982
DATE OF APPLICATION

Paul M. Nilson
OWNER

EHD-5-76

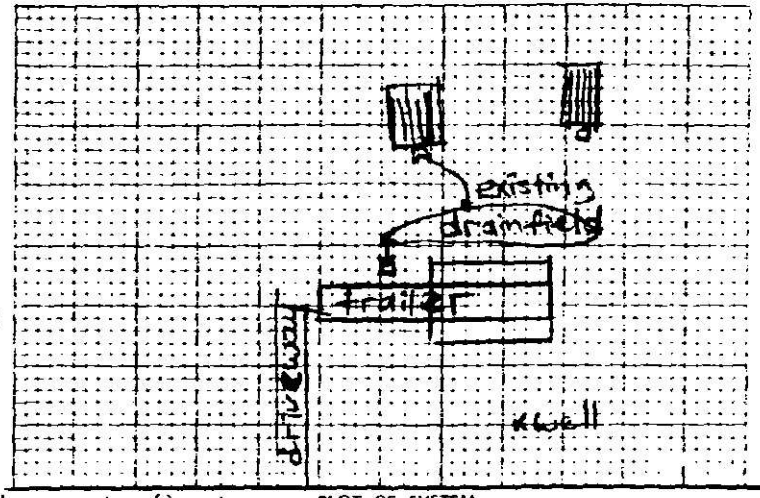
Date Issued 4-16-82 **Serial No.** 5377 ICAR(S) Permit No. 15953

T. C No. 137-075-04

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 15953, dated 4-15-82 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 5-1-82, after which date this permit shall be null and void.



PLOT OF SYSTEM

Albemarle Road

Permeability Rate —

Liquid Capacity of Tank existing

Tank Construction —

Absorption and or Nitrification Lines

Total Line Length 200' + 125'

Number of Lines 4 + 4

Distance from House > 10'

Distance from Property Line > 10

Distance from Well > 100'

NAME OF OWNER Nelson Paul M. + Juanita M.

LOCATION OF PROPERTY 10718 Albemarle 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.

Overflow to a 12'wide * 25' long * 34" of stone s.t. repair

Comments: install a washing machine drainfield 12'wide * 32'long * 17"stone replumb sink into septic tank system

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-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

C of A (s) No. 15953

Date Issued 5-4-82 **Serial** 5105 T C No. 137-079-04

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner Nelson, Paul M. (LAST, FIRST, MIDDLE)

Location of Property 10718 Albemarle Road

Application Number 15953 Permit Number 15953

Inspection Data:

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile 200' + 120' Number of Lines 4 + 4

Depth of Filter Material 34" + 17" Cover Depth 15"

Water Supply Source well Distance from Water Source >50'

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

Nitrification Field Inspected 5-4-82 (DATE)

Washing Machine Line Inspected, If Applicable 5-4-82 (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, 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

Mike Sexton
Environmentalist

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY