SEE INSTRUCTIONS ON BACK

Date Received 9/25/18

ICAR(S) Application No 145681

T C No. 075-075-03

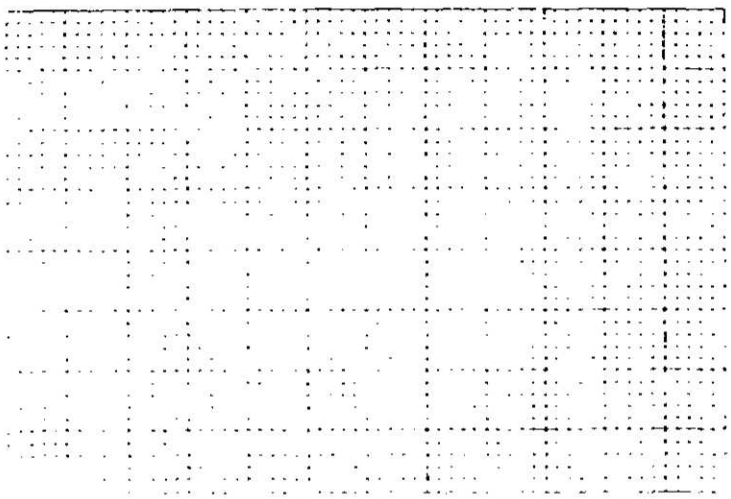
Map Date

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 Alter or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption effluent discharge.



Mobile Home	Yes ✓	No
[illegible]	✓ Yes	No
4 No. of Bedrooms	2	
5 Public Water Supply		
Existing		
6 Well(s) Existing	Yes ✓	No
Proposed	Yes	No ✓
7 Sewage Disposal	Yes	No ✓
8 Easement	Yes	No ✓
Water Supply		
Public Water Main	✓	
Proposed Well Location		
Well Depth		
Pump Capacity		
Type Pump		
Storage Tank		
Pressure Tank		
Yes ✓	No	
Yes	No ✓	

3. PLOT PLAN ACCURATELY DIMENSIONED

13. NAME OF OWNER Coleman, T (LAST, FIRST, MIDDLE)

14. ADDRESS OF OWNER 1313 MULBERRY Ave

15. PHONE NO. Home Office

16. LOCATION OF SYSTEM 1930 RENNER ST (STREET OR COUNTY ROAD)

17. SUBDIVISION Lot No. Block No.

Map Book No. Page No.

18. DEED REFERENCE: DEED BOOK AT PAGE

19. [illegible] ATE [illegible]

20. [illegible]

The undersigned property owner(s) agree(s) that he has read the foregoing application and that the contents thereof 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.

DATE OF APPLICATION

OWNER T. K. Coleman

Environmental Health Department's Copy

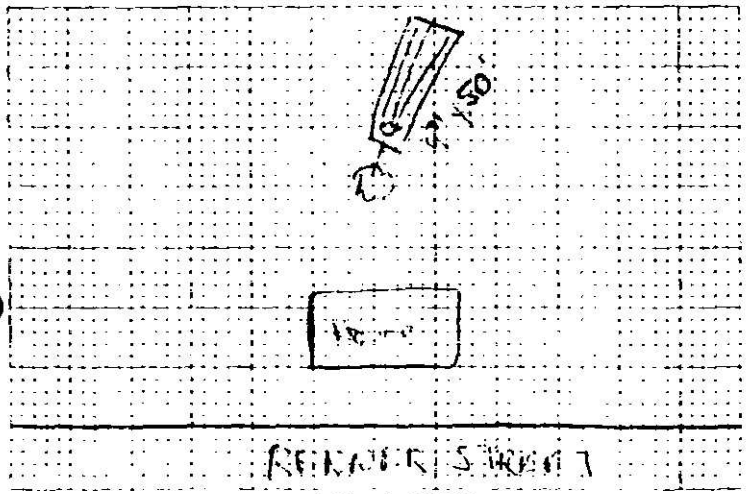
Date Issued 25 SEP 78 Serial No. 1980 ICAR(S) Permit No. 14568

T C No 075-07503

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 ____ 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 25 SEP 79, after which date this permit shall be null and void.



REPAIR

Proposed Use

Liquid Capacity of Tank

Type of Construction

Absorption Area (Square Feet)

Total Trench Length 150 ft

Number of Lines 3 (9' x 50')

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100 ft

TYPE OF SYSTEM

NAME OF OWNER Grant, T.

LOCATION OF PROPERTY 8126 RENDER STREET

This permit is issued subject to the conditions set forth in the Regulations of the Mecklenburg County Board of Health governing the granting of this permit. A certificate of occupancy will not be issued before any system constructed, moved up or otherwise changed is approved by the Health Department. **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.**

Director of Environmental Health

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 78

Applicant Health Department's Copy

Date Issued 29 Sep 1978 Serial No. 1962 C of A (s) No. 14568

T C No. 075-075-03

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 Coleman, T. (LAST, FIRST, MIDDLE)

Location of Property 1920 Renner Street

Application Number _____ Permit Number _____

Inspection Date:

Liquid Capacity of Tank Repair Tank Material _____

Total Length of Drain Tile 1502 lft Number of Lines 3

Depth of Filter Material 12" Cover Depth 15"

Water Supply Source City Distance from Water Source _____

Excavation Inspected _____ (DATE) Tank Inspected _____ (DATE)

Nitrification Field Inspected 9-29-78 (DATE)

Washing Machine Line Inspected If Applicable _____ (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge 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 effective on the date of issuance of the permit. The issuance of this Certificate of Approval is not to be construed as a guarantee that the system will operate properly or relieve any person now or hereafter owning, occupying 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 in the permit in addition to those listed below under comments. This Certificate of Approval shall be revoked 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 Installation permitted

John R. Atkisson
Environmentalist

EHD-5-76

Environmental Health Department's Copy