SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

☐ NEW SEPTIC ☐ REPAIR ☒ USE EXISTING ☐ MODIFIED PLOT PLAN ☐ ALTERATION

File Number: 1178IB

Assigned Inspector: Heather R.

☐ IP $250.00: _____ Initial/Date

☐ IP Commercial $450.00: _____ Initial/Date

☐ CA & OP $400.00: _____ Initial/Date

☐ Alteration Fees $300: _____ Initial/Date

☐ Modified Plot Plan Fees $100.00: _____ Initial/Date

☒ Use Existing Fees $100.00: HR 9120123 Initial/Date

☒ Use Existing Approved ☐ Use Existing Denied

☐ Send IP permit for signature: _____ ☐ Signature received: _____

☐ Floor plans reviewed

☐ Generate CA ☐ Approve as Noted in Winchester

☐ This site is served by septic and well. Verify each is complete before final hold is released

☐ This septic system requires a certified operation contract before final hold is released

☐ Certified operator contract is on file: _____

☐ Septic file complete: _____

☐ Release final hold in Winchester: _____

Comments:

11781B / 14144

20 SEP '23 AM 8:31

88 74 17506 9332

MECKLENBURG COUNTY
HEALTH DEPARTMENT

APPLICATION FOR APPROVAL TO USE AN EXISTING
ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM / WATER SUPPLY WELL

APPLICATION TYPE: ○ SEPTIC ONLY ○ WELL ONLY ◉ SEPTIC & WELL
○ ADDITION OR RENOVATION WITH OCCUPANCY INCREASE
◉ ADDITION OR RENOVATION WITH NO OCCUPANCY INCREASE
○ EXCHANGE MOBILE HOME (SAME # BEDROOMS)
○ COMMERCIAL OR INDUSTRIAL

PERSON FILING APPLICATION:
NAME: Jessica Wynne Vogel
ADDRESS: 3008 Oakdale Rd
CITY: Charlotte
STATE: NC ZIP: 2816
PHONE: 980-475-0725
ALTERNATE PHONE:
E-MAIL: jwvferrell@gmail.com

PROPERTY OWNER: ☑ SAME AS PERSON FILING APPLICATION
NAME:
ADDRESS:
CITY:
STATE: ZIP:
PHONE:
ALTERNATE PHONE:
E-MAIL:

JOB LOCATION INFORMATION
TAX PARCEL #: 037-032-12
STREET ADDRESS: 3008 Oakdale Rd
CITY: Charlotte
STATE: NC ZIP: 28216

SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #:

WATER SUPPLY:
○ MUNICIPAL ◉ PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER

RESIDENTIAL PROPERTY TYPE: ○ N/A
◉ HOUSE ○ MODULAR HOME ○ MULTIPLE FAMILY
○ SINGLE MOBILE HOME ○ DOUBLE WIDE
○ OTHER

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 3
NUMBER OF OCCUPANTS: 4

COMMERCIAL / INDUSTRIAL PROPERTY TYPE: ☑ N/A
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:
INDUSTRIAL WASTES? ○ YES ○ NO
UNDERGROUND STORAGE TANKS? ○ YES ○ NO

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:
☐ BEDROOM ☐ BATHROOM ☐ KITCHEN ☐ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☐ SUNROOM ☐ PORCH ☐ DECK ☒ OTHER Full renovation w/ the 200 sqFt addition. no BR being added

ADDITION/RENOVATION TYPE DETACHED FROM EXISTING STRUCTURE:
☐ DETACHED GARAGE ☐ DETACHED GARAGE WITH PLUMBING ☐ POOL HOUSE ☐ SHOP ☐ BARN
☐ STORAGE SHED ☐ DETACHED PORCH / DECK ☐ OTHER

*The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application, acknowledges that the contents of same are true, and authorizes the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Owner's/Agent's Signature

9/19/2023
Date

A PROPOSED PLOT PLAN (see page 2) is required to be submitted with each application.

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Drive, Suite 8000, Charlotte, NC 28208
OFFICE: 980-314-1680, FAX: 704-336-6894

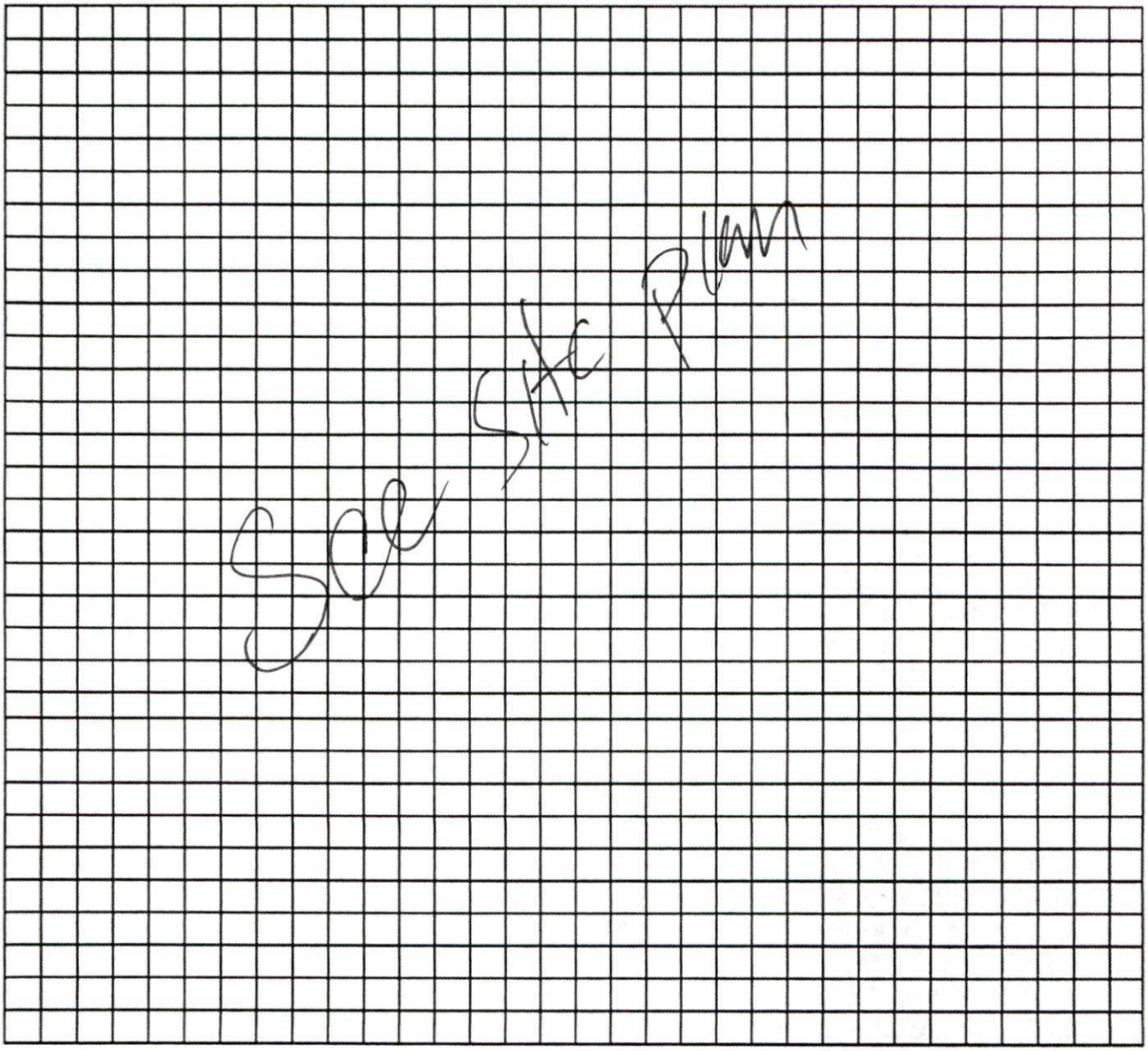
Revised on: 01/03/11

File #: 17813

PROPOSED PLOT PLAN

A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

Street Address: 3008 Oakdale Rd Tax Parcel #: 037-032-12



"The undersigned, an authorized agent of the Mecklenburg County Health Department, certifies that the Department has approved the Request for the "Job Location" contained in this document. This approval is granted in accordance with the provisions of Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal and Water Supply Wells in effect at the time of issuance of the permit and is subject to the following provisions:

- No work shall be conducted on the septic tank system until an installation, construction, alteration and/or repair approval is granted by this Department.
- This permit is not transferable.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

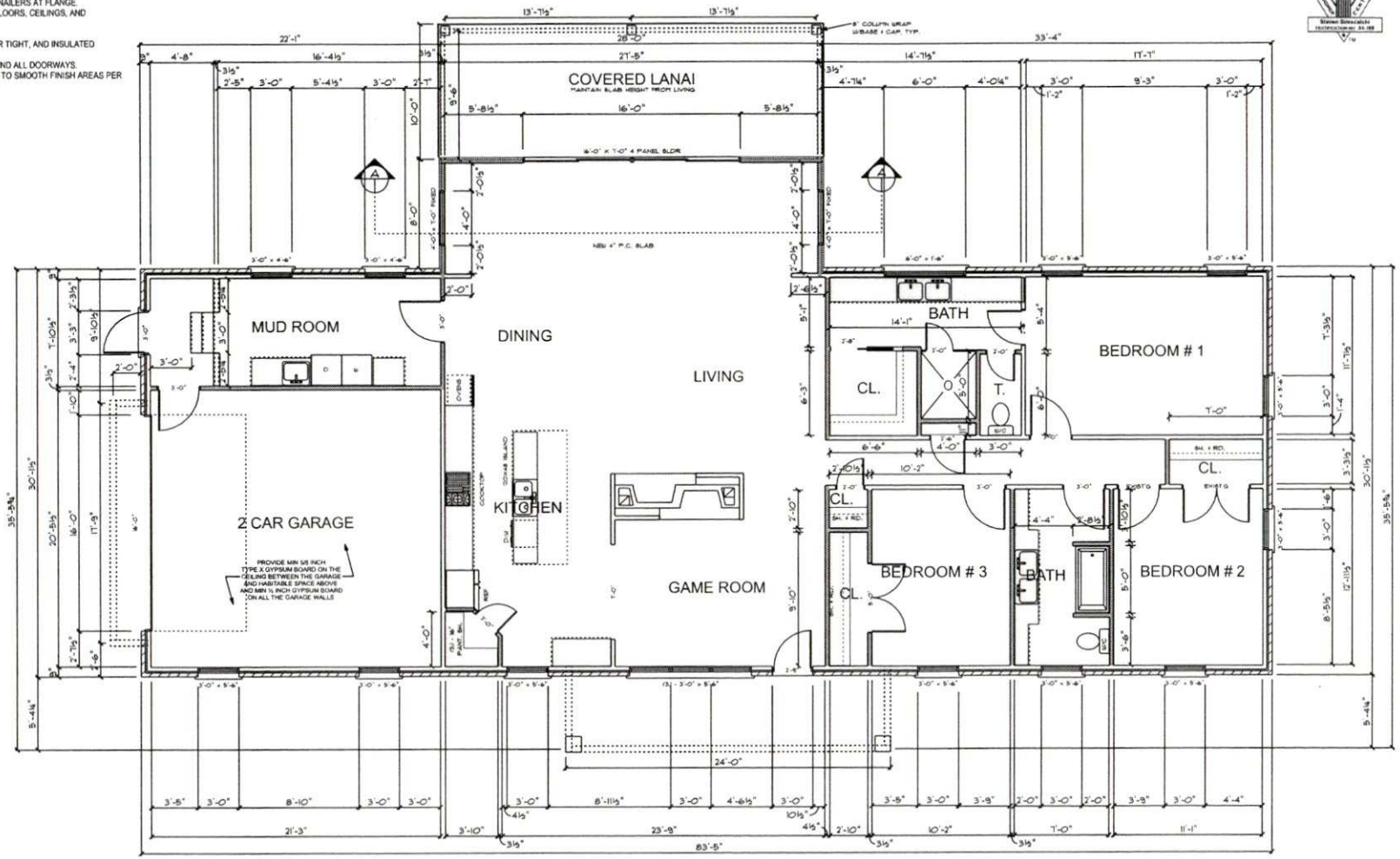
attached site plan approved
Home to remain 3 Bdroom Only!

REHS Signature 10-5-23 Date

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Drive, Suite 8000, Charlotte, NC 28208
OFFICE: 980-314-1680, FAX: 704-336-6894

Revised on: 01/03/11

GENERAL NOTES:
1. 1ST FLOOR CEILING HEIGHT TO MATCH EXIST'G
2. WINDOW & EXTERIOR DOOR HEADER HEIGHT TO BE 7'-0" U.N.O.
3. CLOSET SHELF HEIGHT ABOVE FLOOR TO BE: 65" FOR SINGLE & 42"/84" FOR DOUBLE
4. ALL TUBS/SHOWERS TO HAVE NAILERS AT FLANGE.
5. INSTALL NEW INSULATION AT FLOORS, CEILINGS, AND EXTERIOR WALLS, PER 2018 NCRC.
6. ENSURE ALL OPENINGS ARE AIR TIGHT, AND INSULATED AROUND ALL WINDOWS.
7. INSTALL WOOD MOLDING AROUND ALL DOORWAYS.
8. APPLY PAINT AND WALL PAPER TO SMOOTH FINISH AREAS PER FINISH SCHEDULE.



DEMOLITION NOTES:
1. REMOVE ALL INTERIOR WALLS & DOORS AS SHOWN.
2. REMOVE ALL EXTERIOR DOORS & WINDOWS, AS SHOWN.
3. REMOVE ALL ELECTRICAL FIXTURES, SWITCHES, OUTLETS, AND WIRING, AS SHOWN.
4. REMOVE ALL ROTTEN WOOD FLOORING, AS REQUIRED. REPLACE WITH NEW WOOD AND PREPARED AREA FOR NEW FLOOR COVERING, AS REQUIRED.
5. REPAIR ROOF AS REQUIRED.
6. REMOVE EXIST'G KITCHEN CABINETS & APPLIANCES.
7. REMOVE ALL PLUMBING FIXTURES.

1ST FLOOR PLAN PROPOSED REV 3

SCALE: 1/8" = 1'-0"

WALL TYPE LEGEND
DEMOLITION WALLS:
NEW EXTERIOR & INTERIOR WALLS:
NEW PARTIAL HEIGHT WALLS (HEIGHT OF WALL TO BE PER PLAN):

N·C·B·D·C NATIONAL COUNCIL OF BUILDING DESIGN CERTIFICATION

CONTACT INFORMATION
PHONE:
(704) 610-8070
ADDRESS:
1276 C Brawley School Rd
Mooresville, NC 28117

MEMBER AIBD AMERICAN INSTITUTE of BUILDING DESIGN

Advanced DRAFTING & DESIGN CO.

DRAWN BY:

FINAL 3(SS) 9/18/23

ROOMS

SQUARE FOOTAGES:

NEW 1ST FLOOR:	241
COVERED PORCH:	152
COVERED LANAI:	279
TOTAL:	672

ADVANCED DRAFTING & DESIGN CO. PROUDLY PRESENTS:

FERRELL
Renovation

SHEET NUMBER

4.1

Monday, September 18, 2023

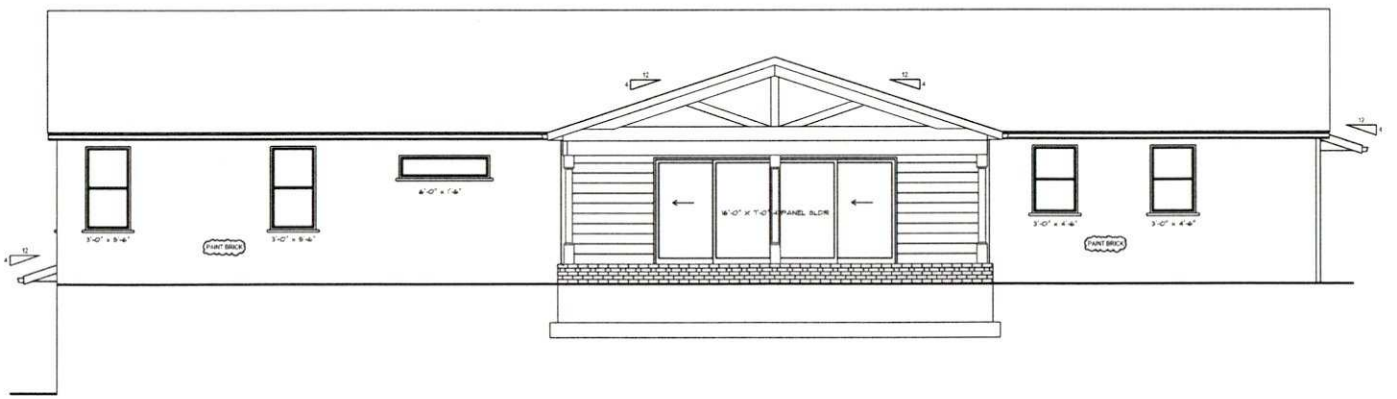
GENERAL NOTES:

1. ADJUST HEEL HEIGHTS SO FASCIA PLANES OUT EVENLY, TYP.
2. ALL GUTTER COLORS TO MATCH ADJACENT MATERIAL, TYP.
3. COLUMNS TO HAVE BASE & TOP TRIM, TYP.
4. TEMP - SEE NOTE 13 ON SHEET 1.1
5. ALL FLASHING USED SHALL BE CORROSION - RESISITIVE.
6. GUTTERS AND DOWNSPOUTS SHALL BE ALUMINUM. DOWN SPOUTS SHALL BE 3" WITH TERMINATION OVER CONCRETE SPLASH BLOCKS.
7. INSTALL RIDGE VENTS NO MORE THAN 4'-0" FROM END OF THE RIDGE AND NO LESS THAN 2'-0".
8. ROOF FLASHING SHALL BE INSTALLED AS REQUIRED.
9. INSTALL "Z" FLASHING AT PALLADIAN WINDOW PANELS, AS REQUIRED.
10. INSTALL ALUMINUM FLASHING, OR EQUIV. AT ALL LOCATIONS WHERE CONCRETE IS IN CONTACT WITH WOOD FRAMING.
11. SEE R703.1.1 AND MANUFACTURERS INSTALLATION INSTRUCTIONS FOR SIDING USED.



RIGHT ELEVATION

SCALE: 1/8" = 1'-0"



REAR ELEVATION

SCALE: 1/8" = 1'-0"

N·C·B·D·C NATIONAL COUNCIL OF BUILDING DESIGN CERTIFICATION
Steven Swiecicki
CERTIFICATION NO. 24-1868

CONTACT INFORMATION
PHONE:
(704) 610-8070
ADDRESS:
1276 C Brawley School Rd
Mooresville, NC 28117

MEMBER AIBD AMERICAN INSTITUTE of BUILDING DESIGN

Advanced DRAFTING & DESIGN CO.

DRAWN BY:	
FINAL 3(SS)	9/18/23
ROOMS	

SQUARE FOOTAGES:

NEW 1ST FLOOR:	241
COVERED PORCH:	152
COVERED LANAI:	279
TOTAL:	672

ADVANCED DRAFTING & DESIGN CO.
PROUDLY PRESENTS:

FERRELL
Renovation

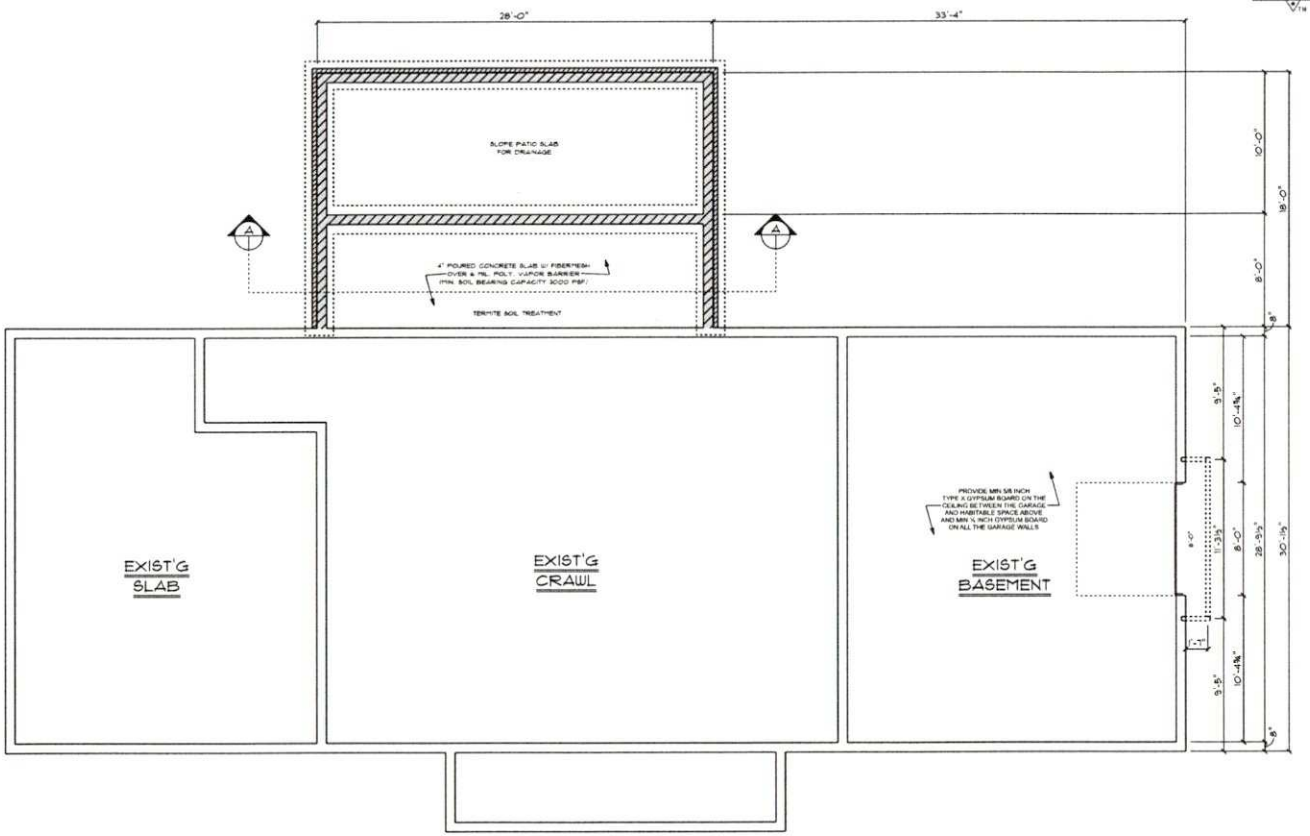
SHEET NUMBER

2.2

Monday, September 18, 2023

FOUNDATION NOTES:

1. EXIST'G 8" BLOCK WALL FOUNDATION
2. SEE STRUCTURAL PLANS FOR NEW FOUNDATION DESIGN.



FOUNDATION PLAN PROPOSED REV 2

SCALE: 0.1167" = 1'-0"

WALL TYPE LEGEND

DEMOLITION WALLS:

NEW EXTERIOR & INTERIOR WALLS:

NEW PARTIAL HEIGHT WALLS (HEIGHT OF WALL TO BE PER PLAN):

N·C·B·D·C NATIONAL COUNCIL OF BUILDING DESIGN CERTIFICATION

Steven Smeaton
CERTIFICATION NO. 24-165

CONTACT INFORMATION

PHONE:
(704) 610-8070

ADDRESS:
1276 C Brawley School Rd
Mooresville, NC 28117

MEMBER AIBD AMERICAN INSTITUTE of BUILDING DESIGN

Advanced DRAFTING & DESIGN CO.

DRAWN BY:	
FINAL 3(SS)	9/18/23
ROOMS	

SQUARE FOOTAGES:

NEW 1ST FLOOR:	241
COVERED PORCH:	152
COVERED LANAI:	279
TOTAL:	672

ADVANCED DRAFTING & DESIGN CO. PROUDLY PRESENTS:

FERRELL
Renovation

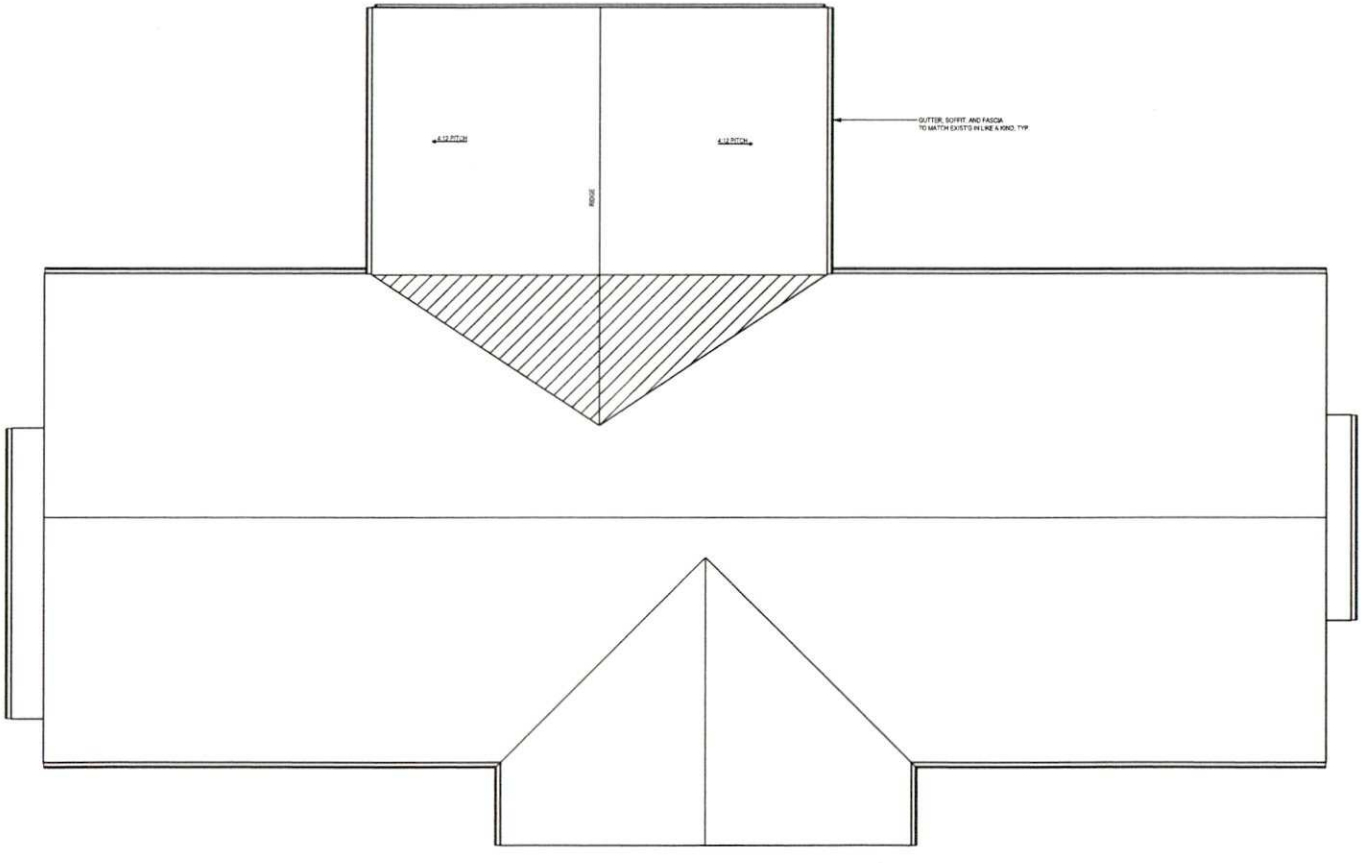
SHEET NUMBER

3.1

Monday, September 18, 2023

ROOFING FRAMING NOTES:
1. FRAMING PER STRUCTURAL PLANS
2. SEE R905.1.1 AND MANUFACTURERS INSTALLATION INSTRUCTIONS FOR UNDERLAYMENT OF ASPHALT SHINGLES.
3. OVERFRAME HATCHED AREA PER STRUCTURAL PLANS

DESIGN WIND SPEED = 115 MPH
EXPOSURE "B"
IMPORTANCE FACTOR = II



ROOF PLAN REV 2

SCALE: 1/8" = 1'-0"

N·C·B·D·C NATIONAL COUNCIL OF BUILDING DESIGN CERTIFICATION
Steven Siracusa
CERTIFICATION NO. 14-180

CONTACT INFORMATION
PHONE:
(704) 610-8070
ADDRESS:
1276 C Brawley School Rd
Mooresville, NC 28117

MEMBER AIBD AMERICAN INSTITUTE of BUILDING DESIGN

Advanced DRAFTING & DESIGN CO.

DRAWN BY:
FINAL 3(SS) 9/18/23
ROOMS
SQUARE FOOTAGES:
NEW 1ST FLOOR: 241
COVERED PORCH: 152
COVERED LANAI: 279
TOTAL: 672

ADVANCED DRAFTING & DESIGN CO. PROUDLY PRESENTS:

FERRELL
Renovation

SHEET NUMBER
6.1

Monday, September 18, 2023

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	09/20/23	**Amount:**	100.00
Receipt #:	144463	**Tendered:**	100.00
Check / Auth #:	DISCOVER 0	**Returned:**	0.00
Received By:	ORTIZMP		

Account Information

Account #: 200000
Contractor: VOGEL, JESSICA
Attn:
Address: 3008 OAKDALE RD
Address:
City/State/Zip: CHARLOTTE, NC 28216

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	Use Existing System 3008 OAKDALE RD		1	100.00	100.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
				555.00	

Date Received 9/7/76 Apt No (S) Application No (W) 8874

T C No 037 032 06

Map Date 9.9 74

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Drag (LAST) Walter (FIRST) S. (MIDDLE)

ADDRESS OF OWNER 2400 Oakdale Rd ZIP

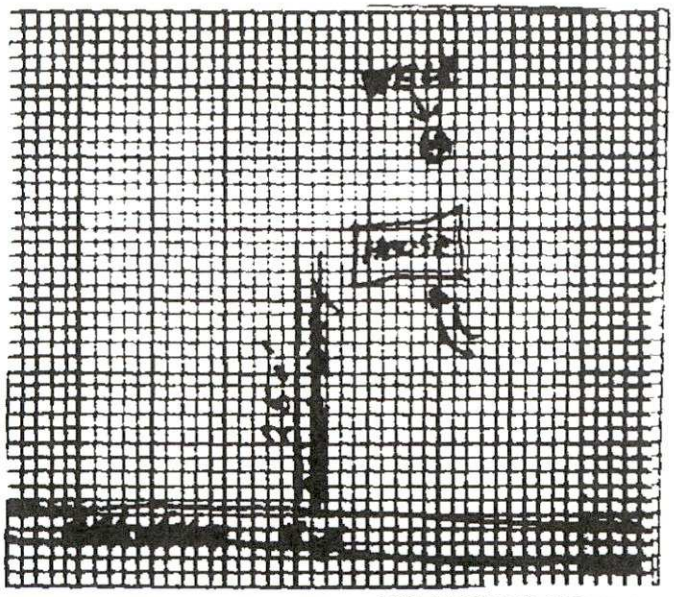
PHONE NO Home 394-3576 Office

LOCATION OF PROPERTY 2450 Oakdale Rd
STREET OR COUNTY ROAD

WELL CONTRACTOR LICENSE NO

Application is hereby made to the Mecklenburg County Department of Environmental Health for a permit to drill a water well on the hereinabove described lot to be used as a source of individual, semi public, or public water supply

DATE OF APPLICATION OWNER Walter S Drag



Remark

ACCURATELY DIAGRAM & DIMENSION LOT

Application approved and permit hereby granted

Permit No

ENVIRONMENTALIST

EHD-5-76

Environmental Health Department's Copy

Date Received 1-31-75

APT No. 8874

P.O.

T. C No. 037-032-06

Map Date 9/9/74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER DRAG (LAST) WALTER (FIRST) S. (MIDDLE)

2) ADDRESS OF OWNER 1901 LECILLIE LANE ZIP 28216

3) PHONE NO Home 394-3576 Office 525-7773

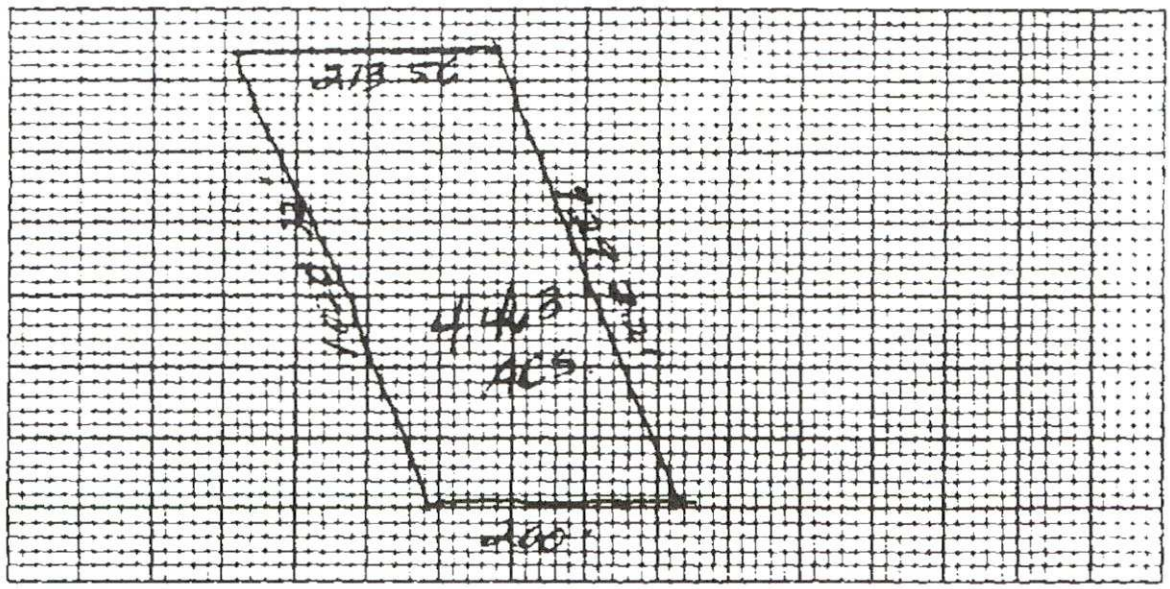
4) LOCATION OF PROPERTY CARDALE RD (STREET OR COUNTY ROAD)

5) SUBDIVISION CARDALE LOT NO _____ BLOCK NO _____

MAP BOOK NO _____ PAGE NO. _____

6) DEED REFERENCE DEED BOOK 1409 PAGE NO. 23

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 hereinabove 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

Walter S Drag
OWNER

FORM NO E-1-9-1-72

HEALTH DEPARTMENT'S COPY

MECKLENBURG COUNTY HEALTH DEPARTMENT

INTER-OFFICE COMMUNICATION

DATE: February 3, 1975

TO: John R. Adkisson

FROM: W. Everette Lynn, Jr. WEL
Soil Scientist

SUBJECT: APT. 8874 (W. S. Drag)
Oakdale Road
Date: 1/31/75

The lot consists of soils of the Wilkes and Helena series. These soils have plastic and sticky clay subsoils which contain expanding clay minerals. In addition, the Wilkes soils are shallow to weathered rock material. The Helena may also have a perched high water table during periods of high rainfall. These soil characteristics result in inadequately slow permeability and percolation rate (true mean perc. rate in excess of 200 min./in.). In the case of the Wilkes soil, potential also exists for contamination of the water table.

Based on this investigation, the lot is not recommended for installation of a septic tank system.

WEL:jjk

MECKLENBURG COUNTY
Department of Public Health
1200 Blythe Boulevard
Charlotte, North Carolina 28203

DATE ISSUED
1. 2-8-75
2. _____
3. _____

SITE INVESTIGATION REPORT
INDIVIDUAL SEPTIC TANK SYSTEM
WITH SUBSURFACE,
SOIL ABSORPTION,
EFFLUENT DISCHARGE

SIP NO. 9874
T.C. M.P.D. 037-132-16
M/P DATE 9-9-74

NAME OF OWNER [illegible]

ADDRESS OF OWNER [illegible]

LOCATION OF LOT [illegible]

The lot described above is not recommended for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge due to the following:

[illegible]

John P. Atkinson

John P. Atkinson, Environmentalist
On Premises Waste Disposal Unit
Environmental Health Division

(Stencil No.)
EHE 369
8/74

FORM NO.
EHE-8-21-74

SOIL INVESTIGATION REPORT

Re-
Date of Investigation May 23, 1975 APT NO. 8874

Owner [illegible]

Location of Property [illegible] Rd TCA P.C. 037-032-06

Soil Suitability Ratings

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	[illegible]	[illegible]		
2. Soil Slope	[illegible]	[illegible]		
3. Soil Depth	[illegible]	[illegible]		
4. Soil Texture	[illegible]	[illegible]		
5. Soil Structure	[illegible]	[illegible]		
6. Restrictive Horizons	[illegible]	[illegible]		
7. Soil Drainage	[illegible]	[illegible]		
8. Soil Permeability (Percolation Rate)	[illegible]	[illegible]		
9. Other	[illegible]	[illegible]		
10. Overall Rating	[illegible]	[illegible]		

Recommendations Based on this investigation the proposed [illegible] soil types on the site and the lot is not recommended for installation of a septic tank system.

See diagram on back

[illegible]
Soil Scientist

3/18/75
EHD 539

MECKLENBURG COUNTY
Department of Public Health
1200 Blythe Boulevard
Charlotte, North Carolina 28203

DATE ISSUED
1. May 27, 1975
2. _____
3. _____

SITE INVESTIGATION REPORT
INDIVIDUAL SEPTIC TANK SYSTEM
WITH SUBSURFACE,
SOIL ABSORPTION,
EFFLUENT DISCHARGE

SIP NO. 8874
T.C. NO. P.O. 037-032-06
MAP DATE 9-9-74

NAME OF OWNER Mr. Walter S. Drag

ADDRESS OF OWNER 1901 Leolillie Lane

LOCATION OF LOT Oakdale Road

The lot described above is not recommended for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge due to the following:

Unsuitable soil

Percolation in excess of 200 min./in.

However, a building permit may be issued upon executing the enclosed forms. The forms must then be notorized and recorded with the Register of Deeds office, which is located in the County Office building.

John R Adkisson

John R. Adkisson, Environmentalist
On Premises Waste Disposal Branch
Environmental Health Department

JRA:jjk
(Stencil No.)
EHD 388
8/74

FORM NO.
E-19-8-21-74

PRESENTED FOR REGISTRATION
1976 SEP 7 PM 2 04
REGISTER OF DEEDS MECKLENBURG CO. N.C.

MAIL TO
DRAUGS

MECK COUNTY DEPARTMENT OF
RECEIVED

MECKLENBURG COUNTY
ENVIRONMENTAL HEALTH DEPARTMENT

SEPTIC TANK AGREEMENT

DATE Sept 7 1976

3877 0563

I acknowledge that I have been informed by the Mecklenburg County Environmental Health Department that the property located at
2450 Oakdale Road

P.I. 037-032-06

is not a recommended site for the installation of a septic tank and nitrification system for the reason or reasons listed below. I agree to immediately abate any nuisance which occurs from a septic tank installed at this location for as long as I am the owner. I also agree to inform any person, firm or corporation buying or accepting transfer of this property from me of this agreement.

Unsuitable soil

Percolation rate in excess of 200 min./in.

Owner Walter S. Draug
Victoria M. Draug

State of North Carolina
County of Mecklenburg

I, Irene P. Caudle a notary public in and for the said County and State, do hereby certify that Walter S. & Victoria M. Draug personally appeared before me this day and being duly sworn signed the foregoing instrument.

Sept 7 1976 Irene P. Caudle
Notary Public

My commission expires 3-13-77

EHD 506
Revised 12/17/75

State of North Carolina, County of Mecklenburg
The foregoing certificate(s) of Irene P. Caudle,
a Notary Public of said County and State
is certified to be correct. This 7 day of September 19 76
Charles E. Crowder, Register of Deeds, By: Deputy

Date Received 8/12/75

SEE INSTRUCTIONS ON BACK

ICAR(S) Application No 8874

T C No 037-032-06

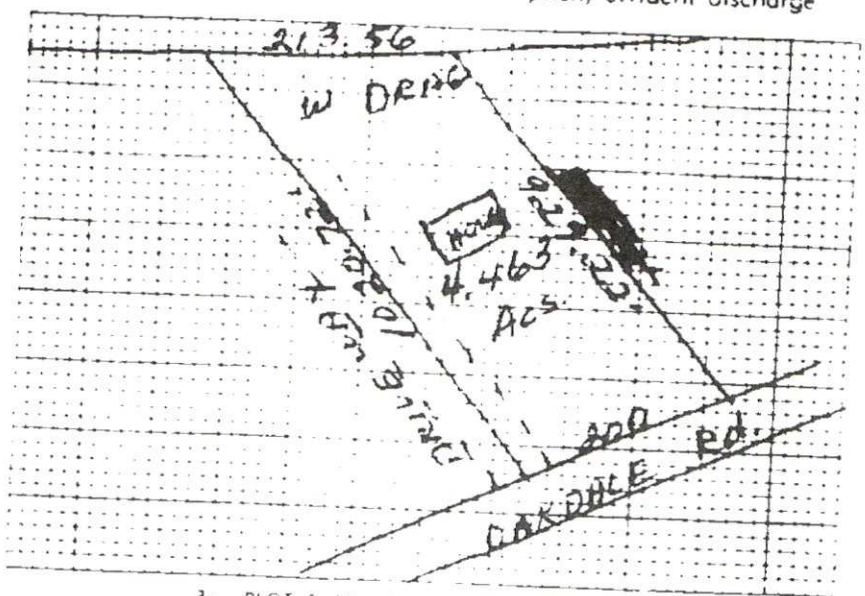
Map Date 9-9-74

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) X Install or Construct ____ 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 X Yes ____ No

9) Water Supply
A) Individual Well X
B) Governmental System ____
C) Community System ____
1) Well source ____
2) Governmental source ____

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 Drag (LAST) WALTER (FIRST) S (MIDDLE)

14) ADDRESS OF OWNER 2[illegible] Oakdale Rd

15) PHONE NO Home 394-3976 Office ____

16) LOCATION OF SYSTEM 2[illegible] Oakdale Rd. (STREET OR COUNTY ROAD)

17) SUBDIVISION Oakdale Lot No ____ Block No ____

Map Book No ____ Page No ____

18) DEED REFERENCE — DEED BOOK ____ AT PAGE ____

19) HAS A PERCOLATION TEST BEEN RUN? X YES ____ NO DATE RUN 2-4-75

20) PTR NUMBER See attached 5324

The undersigned person making application states that he has read the foregoing application and that the contents of same are true to the best of his knowledge and belief and that the permit applied for herein shall be void and of no effect if any of the above facts are not true

8/12/75
DATE OF APPLICATION

Walter S Drag
OWNER

FORM NO EHA-[illegible]

HEALTH DEPARTMENT'S COPY

Date Issued 9/7/76

Serial No. 0134

IMPROVEMENTS PERMIT

LA No. 8874

T C No. P.O. 037-032-06

Map Date 9-9-74

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Drag (LAST) Walter (FIRST) S. (MIDDLE)

ADDRESS OF OWNER 2400 Oakdale Road ZIP

LOCATION OF LOT 2450 Oakdale Road (STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO

MAP BOOK NO PAGE NO

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, 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 8874 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 soil investigation 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, altered, 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(s) 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

**Agreement card signed and presented for recording on 9/7/76

Environmentalist

John R Atkisson
Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

R

Date Issued

Serial No. 0409

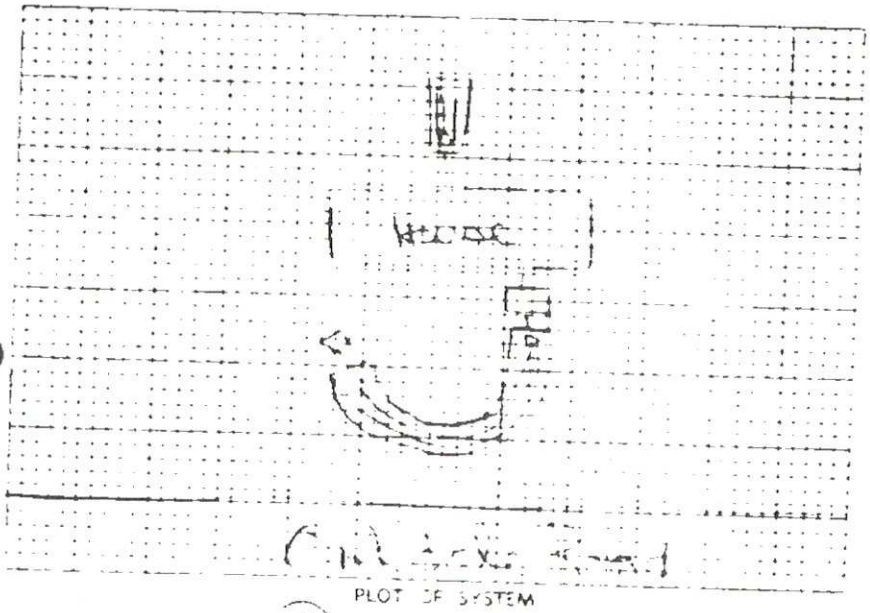
ICAR/SI Permit No.

T C No.

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 after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate

Liquid Capacity of Tank

Tank Construction

Absorption System Number of Lines

Total Length

Number of Lines

Distance between Lines

Distance from Property Lines

Distance from Wells

NAME OF OWNER

LOCATION OF PROPERTY

The system shall meet all 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.

Comments

Division or Section Head

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-S-76

Environmental Health Department's Copy

Date Issued 23 Dec 76

Serial No. 0405

C of A (s) No 8874

PO

T C No 037-032-06

CERTIFICATE OF COMPLETION

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 Long, Walter S. (LAST, FIRST, MIDDLE)

Location of Property 2450 Oakdale Road

Application Number 8874 Permit Number 8874

Inspection Date:

Liquid Capacity of Tank 1500 Gal Tank Material Precast Concrete

Total Length of Drain Tile 150' - 200' Number of Lines 6-4

Depth of Filter Material 17" Cover Depth 15"

Water Supply Source well Distance from Water Source 150'

Excavation Inspected 22 Dec 76 (DATE) Tank Inspected 22 Dec 76 (DATE)

Nitrification Field Inspected 22 Dec 76 (DATE)

Washing Machine Line Inspected If Applicable 22 Dec 76 (DATE)

The undersigned has inspected the individual Septic Tank System with subsurface soil absorption of effluent discharge as described above and it has been ~~installed~~ 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 Location OK

G. M. Reynolds
Environmentalist

EHD-5-76

Environmental Health Department's Copy