SEE INSTRUCTIONS ON BACK

Date Received 9/19/78

ICAR(S) Application No. 14499

T C No. 05-222-09

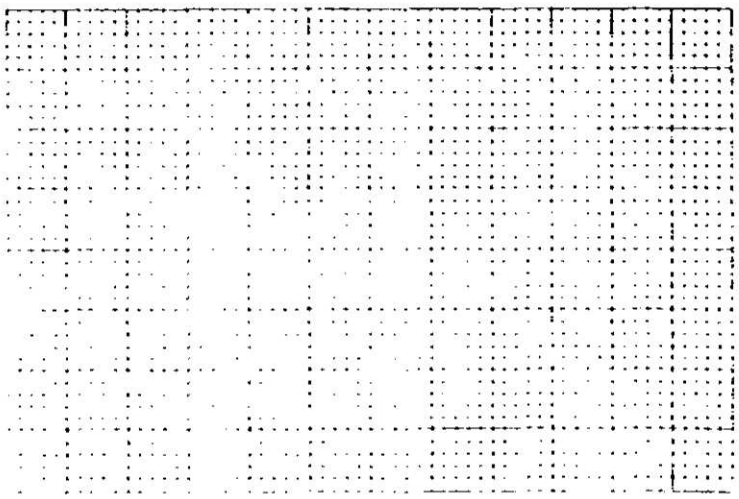
Map Date —

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.



3 PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home Yes / No

Rental Yes / No

4 No. of Bedrooms: 4

5 Basement Use: Yes / No

Remodeling: —

6 Washing Machine: Yes / No

7 Garbage Disposal: Yes / No

8 Swimming Pool: Yes / No

9 Water Supply:

A Individual Well: —

B Governmental System: —

C Community System: —

Well Source: /

Governmental Source: —

Sewage System:

Water supply within 100 feet: —

Public sewer: Yes / No

Water supply within — feet of sewage system: Yes / No

10 Tank Size: —

11 Lot Size: —

11 NAME OF OWNER Keen (LAST) J. (FIRST) Donald (MIDDLE)

14 ADDRESS OF OWNER 221 Hillside Ave, Charlotte N.C. 28209

15 PHONE NO Home 372-9292 Office 555-2287

16 LOCATION OF SYSTEM 9001 Fairview Rd. (STREET OR COUNTY ROAD)

17 SUBDIVISION: Lot No: Block No

Map Book No: Page No

18 DEED REFERENCE: DEED BOOK AT PAGE

19 PROPERTY LOCATION: TAX RECORD

20 OTHER INFORMATION:

The undersigned property owner hereby agrees that he has read the foregoing application and that the contents thereof are true. He understands 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: 9/19/78

OWNER: J. D. Keen

Environmental Health Department's Copy

Date Issued 19 Sep 1958

Serial No. 1966

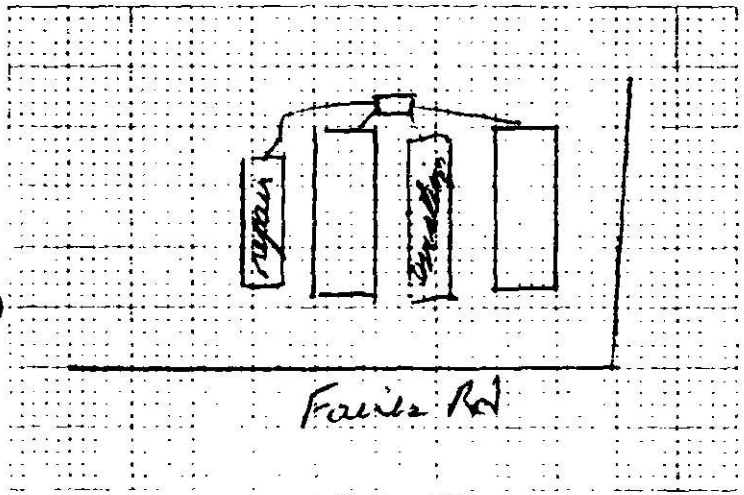
ICAR(S) Permit No. 14499

T C No. 105-922-05

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 14499 dated 9-19-58 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 9-26-58, after which date this permit shall be null and void



Proposed, Rep. ✓

Liquid Capacity of Tank ———

Tank Composition Repair

Absorption Area Computations ———

Trench Bottom Width 100 L/ft

Number of Lines 3

Distance from Nearest Water Supply 10'

Distance from Property Lines 10'

Distance from Buildings 100' +

TYPE OF SYSTEM

NAME OF OWNER Keen, J. Donald

LOCATION OF PROPERTY 9001 Faires Rd

The construction, alteration or repair covered by this permit shall conform to the requirements set forth in the regulations of the Mecklenburg County Board of Health governing the disposal of sewage and industrial wastes. This permit is valid for a period of sixty (60) days from the date of the granting of this permit. A certificate of approval for the operation of the system installed under this permit will be issued upon completion of the work authorized by this permit and after the system has been inspected by the Department of Environmental Health. Failure to obtain such certificate of approval before the system is covered up or otherwise rendered inaccessible for inspection shall be a violation of this permit. **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** Comments: **now or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.**

Signature of Sanitarian John R. Atkinson 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

EHC-5-76

Environmental Health Department's Copy

Date Issued Sept. 20, 1978 Serial No. 1861 C of A (s) No. 14499

T C No. 105-222-09

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 Kern (LAST) Donald (FIRST) J. (MIDDLE)

Location of Property 9001 Fairview Rd.

Application Number 14499 Permit Number 14499

Inspection Date:

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile 100/4/ft. Number of Lines 3

Depth of Filter Material 20" Cover Depth 18"

Water Supply Source Comm. Distance from Water Source —

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

Nitrification Field Inspected 9-20-78 (DATE)

Washing Machine Line Inspected If Applicable — (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 at 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 as 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 Repair crosses old abandoned septic pit. May be used when repair becomes full.

Eldred Reynolds
Environmentalist

EHD-5-76

Environmental Health Department's Copy