SEE INSTRUCTIONS ON BACK

Date Received 7-25-73

ICAR (S) Application No. 6935

T. C. No. 04A-124-03
11-1072

Map Check

JUL 25 1973

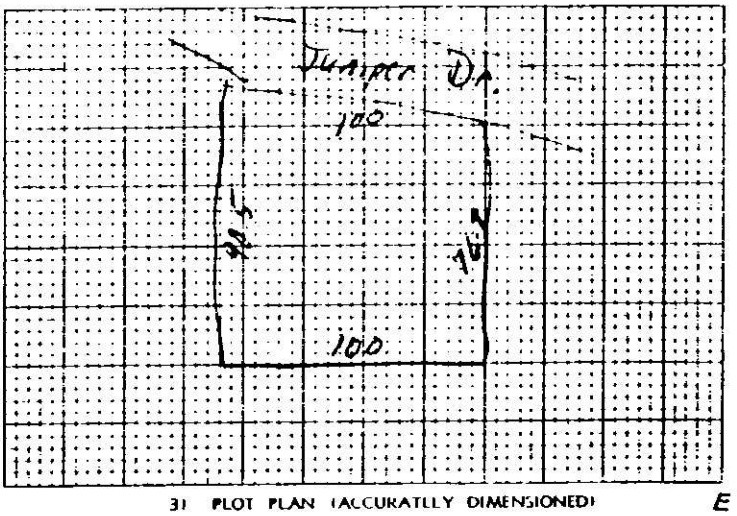
# MECKLENBURG COUNTY HEALTH DEPARTMENT

## 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 3

5) Business Use -- Max 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

12) VA Case No.

13) NAME OF OWNER [redacted] DALTON (LAST) JACK (FIRST) KENNETH (MIDDLE) EVELYN MAE

14) ADDRESS OF OWNER RT. 11 - BOX 600 -J

15) PHONE NO Home 596-7429 after 4 P.M. Office

16) LOCATION OF SYSTEM Juniper Drive (STREET OR COUNTY ROAD) OFF CINDY LANE NORTH

17) SUBDIVISION SUNSET PARK Lot No 263 + 264 Block No.

Map Book No 6 Page No. 675 + 677

18) DEED REFERENCE — DEED BOOK AT PAGE

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ___ NO DATE RUN 1961

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.

7-24-73
DATE OF APPLICATION

Evelyn M. Dalton
OWNER

FORM NO. E 4 4-[illegible]

HEALTH DEPARTMENT'S COPY

Serial No. 4176

Date Issued 13 Aug 73

ICAR (S) Permit No. 6735

T. C. No 041-124-03

Map Date 10 Nov 72

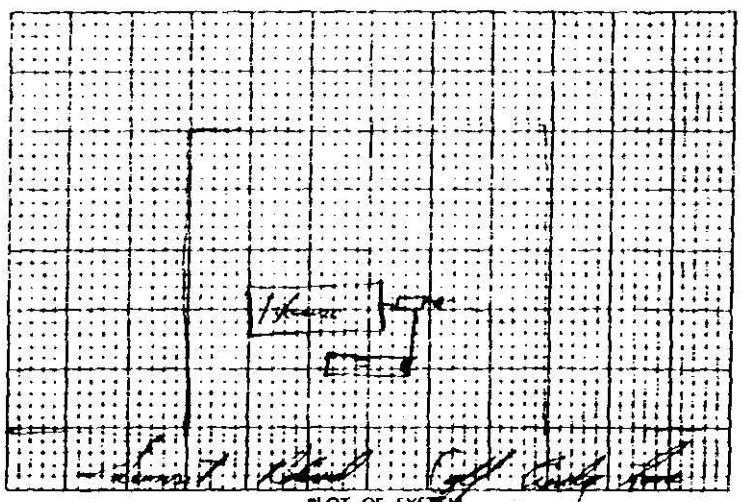
# MECKLENBURG COUNTY HEALTH DEPARTMENT

## ENVIRONMENTAL HEALTH DIVISION

## INSTALLATION, CONSTRUCTION, 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 6735, dated 25 July 73 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 13 Aug 73, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate _____

Liquid Capacity of Tank _____

Tank Construction _____

Absorption and/or Nitrification Lines

Total Line Lenght 100'

Number of Lines 2 (5 X 17" X 48")

Distance from House 20'

Distance from Property Line 20'

Distance from Well 75'

NAME OF OWNER Lindsay Jack Linnell

LOCATION OF PROPERTY West side Cold Lady Lane

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: Town Creek (Co-op)

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 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.

FORM NO E 5-4-1 71

HEALTH DEPARTMENT'S COPY

Date Issued 13 Aug 76

Serial No. 3743

C of A (s) No. 6735

T. C. No 041-124-03

Map Date 10 Jan 72

# MECKLENBURG COUNTY HEALTH DEPARTMENT

## ENVIRONMENTAL HEALTH DIVISION

### CERTIFICATE OF APPROVAL

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

Name of Owner Dalton, Jack (LAST, FIRST) Kenneth (MIDDLE)

Location of Property Sweet Bird (off Tuckaseegee)

Application Number 6735 Permit Number 6735

**Inspection Date:**

Liquid Capacity of Tank _____ Tank Material Hybrid

Total Length of Drain Tile 100' Number of Lines 2 (5 x 12 x 48")

Depth of Filter Material 48" Cover Depth 18"

Water Supply Source Ind. Well Distance from Water Source 75'

Excavation Inspected 13 Aug 76 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 13 Aug 76 (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 Board of Health 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: Donnie Cable (Cont.)

W. L. Dilly
Environmentalist

FORM NO. E-6-4-1-71

HEALTH DEPARTMENTS COPY