4

SEE INSTRUCTIONS ON BACK

Date Received 3-28-73

ICAR (S) Application No. 5851

T. C. No.

Map Date

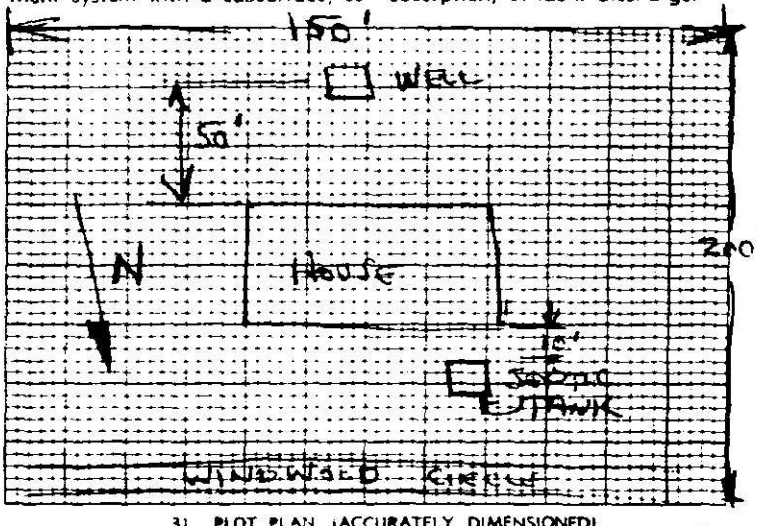
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 4

5) Business Use — Max No. Employees ____ 0

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 MacCallum (LAST) Robert (FIRST) William (MIDDLE)

14) ADDRESS OF OWNER 3825 Windwood Circle Clt 28211

15) PHONE NO. Home 364-2680 Office 803-834-7272

16) LOCATION OF SYSTEM Windwood Circle (off Carmel Road) (STREET OR COUNTY ROAD)

17) SUBDIVISION ____ Lot No. ____ Block No. ____

Map Book No. ____ Page No. ____

18) DEED REFERENCE — DEED BOOK ____ AT PAGE ____

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.

3/23/73
DATE OF APPLICATION

Robert W. MacCallum
OWNER

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

HEALTH DEPARTMENT'S COPY

Date Received 4-25-74

RECEIVED APR 25 1974

Application No 5851

T C No

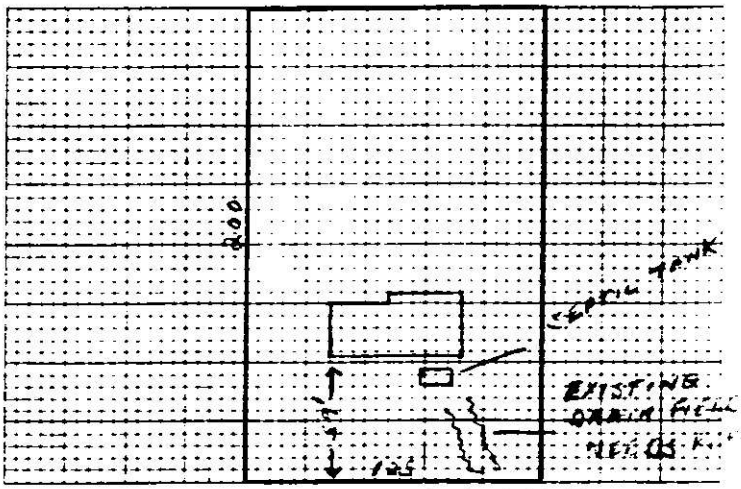
Map Date

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) Primary 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) Government System ___
C) Community System
1) Well ___
2) Government ___

10) Sewage System
House located within 200' of ___ Yes X No
House located within 200' of ___ Yes ___ No

11) Community sewer Yes X No

12) FHA Case No ___

13) VA Case No ___

13) NAME OF OWNER LATNAM (LAST) JAMES (FIRST) RICHARD (MIDDLE)

14) ADDRESS OF OWNER 3525 NINOWOOD CIRCLE, CHARLOTTE, NC 28211

15) PHONE NO Home 365-6408 Office 372-5030

16) LOCATION OF SYSTEM 3525 NINOWOOD CIRCLE (STREET OR COUNTY ROAD)

17) SUBDIVISION NINOWOOD CIRCLE Lot No. 4 Block No. ___

Map Book No 1698 Page No. 511

18) DEED REFERENCE — DEED BOOK 3057 AT PAGE 637

19) HAS A PERCOLATION TEST BEEN RUN? X 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.

4/23/74
DATE OF APPLICATION

R. James Latnam
OWNER

FORM NO E-4-8-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 938 ICAR(S) Permit No. 5851

Date Issued 3 Dec 74

T C No. 209-25-3-5-8

Map Date 7 Oct 74

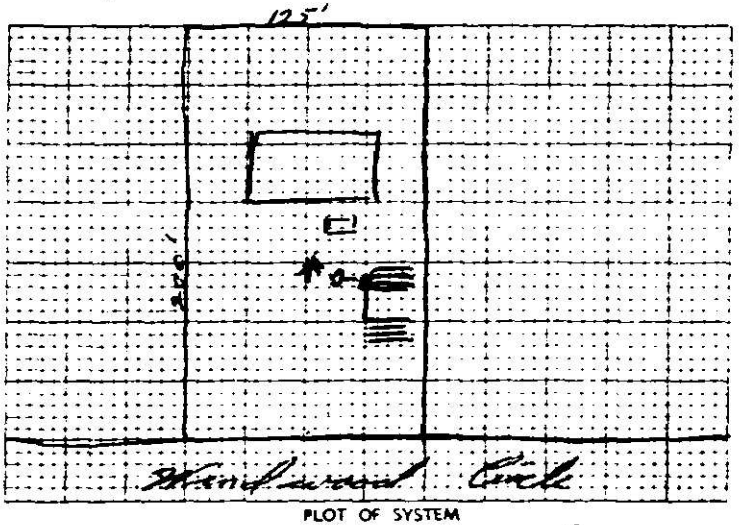
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 5851, dated 25 Apr 74 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 3 Jan 75 after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate REPAIR

Liquid Capacity of Tank 1/

Tank Construction 1/

Absorption and/or Nitrification Lines

Total Line Length 160 ~~BEDS~~ ft. 1/

Number of Lines 2 Beds 4 (10x20 ft-) Each

Distance from House 10'

Distance from Property Line 10'

Distance from Well City

NAME OF OWNER Latham, James Richard

LOCATION OF PROPERTY 3825 Woodwood Circle

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: * Pocket 8" Rock 2' DIA. ABOVE SEEPAGE AREA THENCE TO UPPER BED DIST BOX WITH 2 LINES FROM BOX 1" ABOVE TO LOWER BED

Division or Section Head J M Smith

Environmentalist [redacted] R L Gladson

* 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.

Rev. 11-E-5-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 4-15-75 Serial No. 3269 ICAR(S) Permit No. 5851

T C No. 209-253-58

Map Date 20ct74

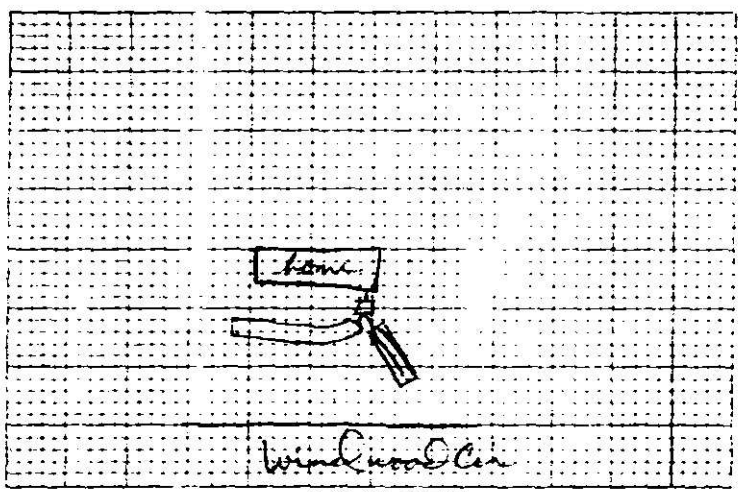
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 5851, 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 5-15-75, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate ___

Liquid Capacity of Tank Ref

Tank Construction ___

Absorption and/or Nitrification Lines

Total Line Lenght 200'

Number of Lines 5 (12'x40'x1')

Distance from House 15'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Lathon, James R.

LOCATION OF PROPERTY 3825 Windwood Cir

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 Cohp

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.

COPY NO. E-S-8-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 4-29-75 Serial No. 5826 C of A (s) No. 5851

T C No 209-253-58

Map Date 9 of 74

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Luthon (LAST) Jones (FIRST) R. (MIDDLE)

Location of Property 3825 Windwood Cir

Application Number 5851 Permit Number 5851

Inspection Data:

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile 200' Number of Lines 3 (12½' x 10' x 17")

Depth of Filter Material 17 Cover Depth 15"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 4-29-75 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 4-29-75 (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 Ronnie Oak

Richard Hartsoe

Environmentalist

FORM NO E-6-8-1-72

HEALTH DEPARTMENT'S COPY