Date Received 2-27-73

ICAR(S) Application No. 5660

T C No

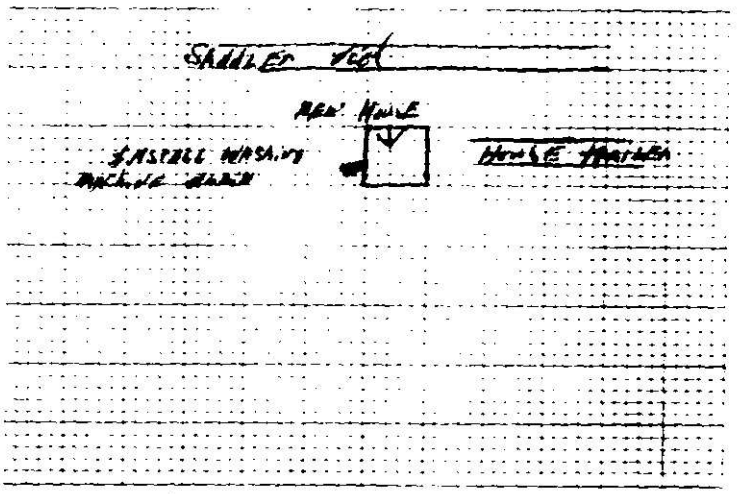
Map Date

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

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



4 No. of Bedrooms 2

5 Basement Yes No

6 Garage Disposal Yes ✓ No

7 Dishwasher Yes ✓ No

8 Water Supply
A Individual Well ✓
B Governmental System
C Community System
Well source
2 Governmental System

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 PLOT PLAN (ACCURATELY DIMENSIONED)

13 NAME OF OWNER Brown (LAST) Jr. (FIRST) C. (MIDDLE)

14 ADDRESS OF OWNER Rt #4 Box 405 Charlotte N.C.

15 PHONE NO Home Office 399-6064

16 LOCATION OF SYSTEM Saddler Rd (STREET OR COUNTY ROAD)

17 SUBDIVISION Lot No. 22 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

2-25-73
DATE OF APPLICATION

Wm C. Brown
OWNER

FORM NO. E 4A-1 (7)

HEALTH DEPARTMENT'S COPY

Date Issued 19 March 1973

Serial No. 3438

ICAR(S) Permit No. 5660

T C No

Map Date

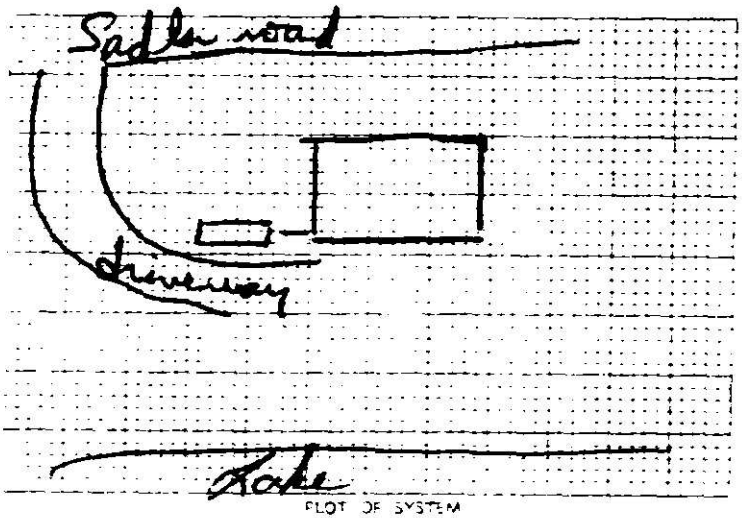
MECKLENBURG COUNTY HEALTH DEPARTMENT

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~~ wash line waste-water 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 5661, dated 2-27-73. If this permit shall be void and of no effect if the information provided in the application is incorrect or erroneous. All work shall be completed on or before 19 April 1973 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 Length 100 l/ft

Number of Lines 2 (5'X100')

Distance from House 15'

Distance from Property Line 10' T

Distance from Well 50' T

NAME OF OWNER Brown, H. C.

LOCATION OF PROPERTY Sadler Road

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 install in bed as indicated to left of driveway after enough bank has been removed to insure proper placement and cover

Division of Section Head ___ Environmentalist John R Adkinson

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. EHS-1

DEPARTMENT'S COPY

Date Issued 22 Mar 1973 Serial No. 3098 C of A (s) No. 5660

T. C. No. /

Map Date /

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Brown (LAST) Mr. (FIRST) C. (MIDDLE)

Location of Property Sadler Road

Application Number 5660 Permit Number 5600

Washing Machine Line

Liquid Capacity of Tank / Tank Material /

Total Length of Drain Tile 100 L/ft Number of Lines 2 (5 X 17)

Depth of Filter Material 4' Cover Depth 24"

Water Supply Source well Distance from Water Source 50' +

Excavation Inspected 3-20-73 (DATE) Tank Inspected / (DATE)

Nitrification Field Inspected 3-20-73 (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 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

John R Atkisson
Environmentalist

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

HEALTH DEPARTMENT'S COPY