SEE INSTRUCTIONS ON BACK

Date Received 29 Oct 79

ICAR(S) Application No 16286

T C No 135-162-02

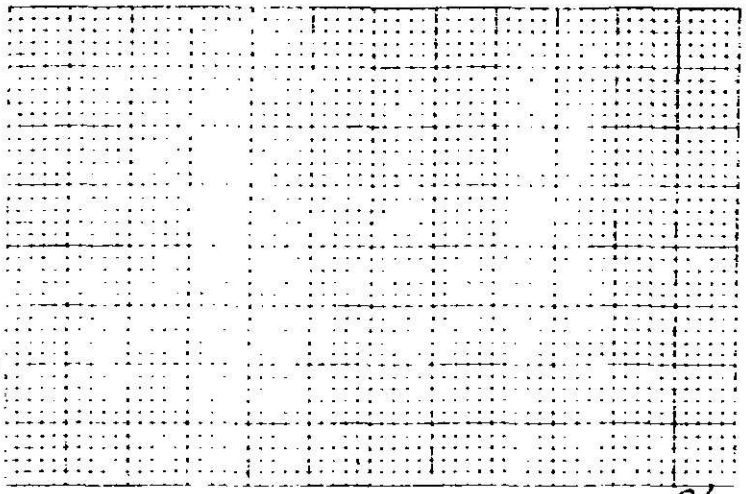
Map Date _____

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

Residence ____ Yes ____ No

4) No of Bedrooms 0

5) Business Use — Max No Employees 12

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 Parker (LAST) Sherly (FIRST) Beaton (MIDDLE)

14) ADDRESS OF OWNER 11340 Idlewild Rd.

15) PHONE NO Home _____ Office 545-4554

16) LOCATION OF SYSTEM 9607 Idlewild Rd. (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 SOIL INVESTIGATION 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.

DATE OF APPLICATION _____

OWNER Sherly B Parker

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial 3387

Date Issued 29 Oct 79

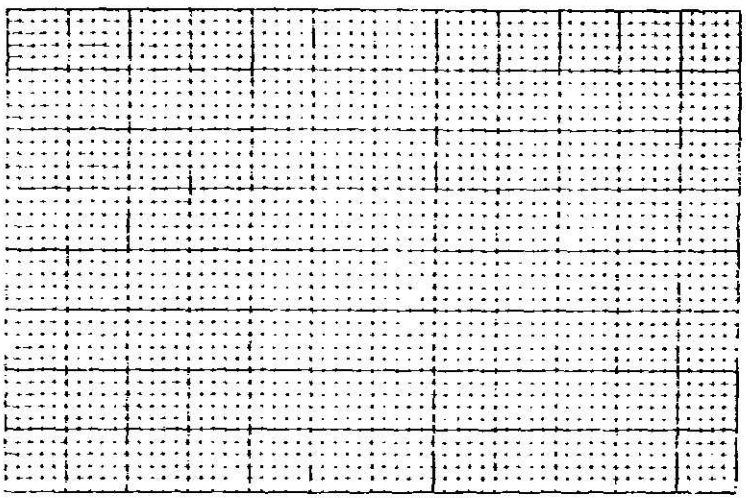
ICAR (S) Permit No. 16286

T C No 135-162-02

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 29 Oct 79 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 29 Nov., after which date this permit shall be null and void



PLOT OF SYSTEM

Permeability Rate Repair

Liquid Capacity of Tank —

Tank Construction —

Absorption and/or Nitrification Lines

Total Line Length #

Number of Lines

Distance from House 10' (5')

Distance from Property Line 10' (5')

Distance from Well 100'

NAME OF OWNER Sherly Tarlton

LOCATION OF PROPERTY 9607 Idlewild Rd.

The system shall meet all of 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. 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 now or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

Remove drainfield 15' from ditch, backfill, replace amount of drainfield removed.

Division or Section Head

Environmentalist Steve Wood

* 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-5-76

Environmental Health Department's Copy