SEE INSTRUCTIONS ON BACK

Date Received 9-25-73

MECK COUNTY HEALTH DEPARTMENT RECEIVED SEP 25 1973 ENVIRONMENTAL HEALTH DIVISION

Application No

T C No

Map Date

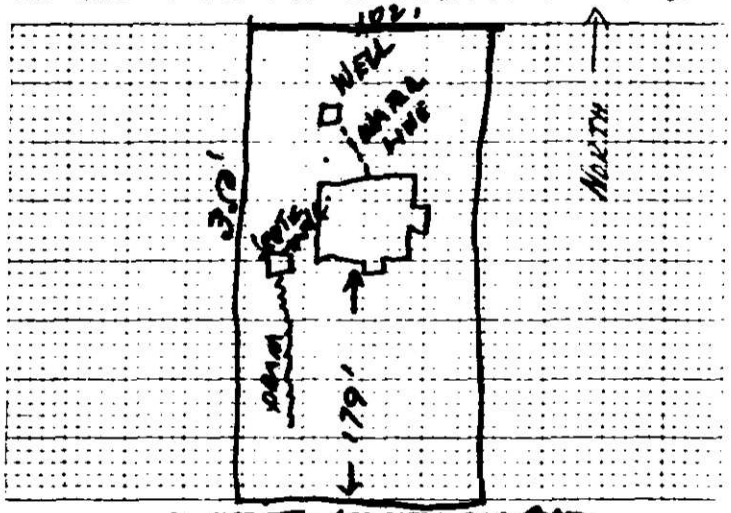
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 ACCURATELY DIMENSIONED TOO CASEYEER

4) No. of Bedrooms ✓

5) Estimated Maximum Number of Employees

6) Washing Machine Connections

7) Garbage Disposal

8) Dishwasher

9) Automatic Soft Water Softener ✓

10) Automatic Water Softener

11) Swimming Pool

12) Water Softener

13) Garbage Disposal

14) Water Softener

15) Automatic Water Softener

16) Automatic Water Softener

17) Automatic Water Softener

18) FHA Case No

19) VA Case No

13) NAME OF OWNER Wilson (LAST) Margaret (FIRST) Evelyn (MIDDLE)

14) ADDRESS OF OWNER 6516 Tuckaseegee Rd

15) PHONE NO Home 399-6434 Office 333 3161

16) LOCATION OF SYSTEM 6516 Tuckaseegee Rd (County) (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No _____ Block No _____

Map Book No _____ Page No. _____

18) DEED REFERENCE -- DEED BOOK 955 AT PAGE 344

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

9-24-73
DATE OF APPLICATION

Margaret E Wilson
OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 9/27/73 **Serial No. 4326** ICAR(S) Permit No. 7040

T. C. No. _____

Map Date _____

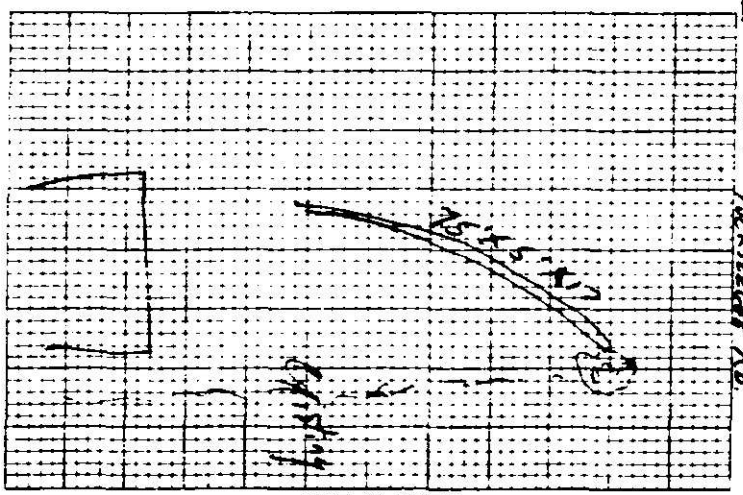
MECKLENBURG COUNTY HEALTH DEPARTMENT

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, X 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 7040 dated 9/25/73 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 10/16/73, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate REPAIR

Liquid Capacity of Tank _____

Tank Construction _____

Absorption and/or Nitrification Lines

Total Line Lenght 150

Number of Lines 2

Distance from House 25'±

Distance from Property Line 20'±

Distance from Well 60'+

NAME OF OWNER MARGARET F WILSON

LOCATION OF PROPERTY 6316 TUCKASEEGEE RD

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: CONNECT TO EXISTING SYSTEM AT TROUBLE AREA
6"-12" ABOVE W/ STONE POCKET

JA/LRB

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 10/24/73

Serial No. 4496

ICAR(S) Permit No. 7040

T. C. No _____

Map Date _____

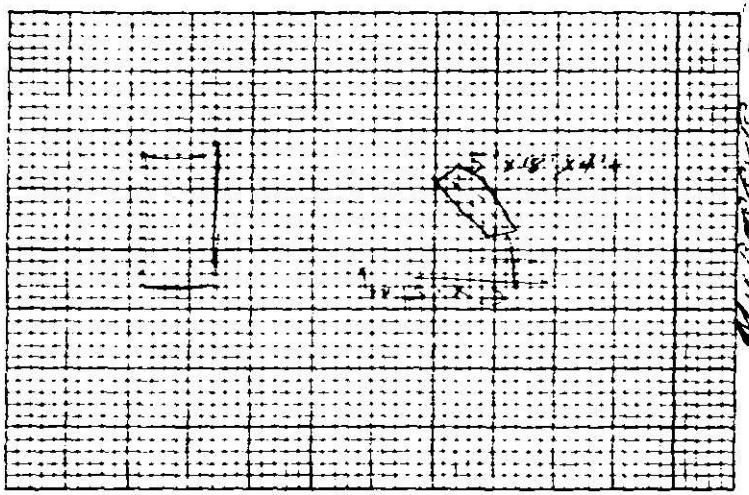
MECKLENBURG COUNTY HEALTH DEPARTMENT

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, X 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 7040, dated 10/24/73 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 12/24/73, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate K-PALK

Liquid Capacity of Tank "

Tank Construction "

Absorption and/or Nitrification Lines:

Total Line Lenght 100 Ft.

Number of Lines 2(5' x 18" x 4')

Distance from House 75'±

Distance from Property Line 20'±

Distance from Well 50'±

NAME OF OWNER Ernest L. Wilson

LOCATION OF PROPERTY 6810 Tuckseegee Rd.

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: _____

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

Serial 4069

C of A (s) No. 7040

Date Issued 10/24/73

T. C. No. 055-341-07

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 WILSON (LAST) MARGARET (FIRST) E (MIDDLE)

Location of Property 6816 TUCKSEEGEE RD.

Application Number 7040 Permit Number 7040

Inspection Data:

Liquid Capacity of Tank RF Tank Material IR

Total Length of Drain Tile 100 eq. Number of Lines 2 (5'x15'x4")

Depth of Filter Material 4'+ Cover Depth 24"

Water Supply Source IND WELL Distance from Water Source 50'+

Excavation Inspected 10/24/73 (DATE) Tank Inspected (DATE)

Nitrification Field Inspected 10/24/73 (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(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: Loop

R. B. Bridgman

(Sanitarian)

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

HEALTH DEPARTMENT'S COPY