

1813 POPLARCREST LN

05318420

6/1/2007

duponbj

Groundwater and Wastewater Services File Imaging Project
May 2007
Barcode Font = IDAutomationHC39M

APPLICATION FOR AN IMPROVEMENT PERMIT

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

(OFFICE USE ONLY)
FILE: 5455A
TC: 053-184-20
SERIAL: № 17750
☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 1813 (STREET NO.) Poplarcrest Dr. (STREET) ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.:
⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: Harold (FIRST) E. (MIDDLE) Passley (LAST)
⑨ MAILING ADDRESS: 1324 Lee St.
⑩ CITY: Charlotte ⑪ STATE: NC ⑫ ZIP: 28214
⑬ PHONE: (WORK) 334-1684 ⑭ (HOME) 704-392-5783

REQUEST

This request is for a(n):

⑮ ☐ New permit
⑯ ☐ Repair or alteration permit
⑰ ☒ Authorization for mobile home exchange
⑱ ☐ Other (specify)

DESIGN CRITERIA

System will serve:

⑲ ☐ Residence ⑳ ☒ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 2
㉕ Type?
㉓ Maximum occupancy? 2
㉖ Maximum number of employees?
㉔ Basement? ☐ yes ☒ no
㉗ Maximum number of seats?

WATER SUPPLY

㉘ Water supply from (present or proposed):

A ☐ Individual well
B ☐ Municipal system
C ☒ Community well
D ☐ Community system

㉙ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter on the property for the purpose of processing this request.

Signed: Mrs. Janette Passley
Date: 2-2-89

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

... No work shall be conducted on the septic tank system until an Installation, Construction, Alteration and/or Repair permit is issued by this Department.

... This permit is not transferable, and shall become null and void 36 months from the date of issuance. May use existing system.

Judy J. Kain RS 2/8/89
Environmentalist Date

D. W. Donnell RS 12/8/89
Director or Authorized Section Head Date

*This permit must be signed by the Director of Mecklenburg County Health Department or an authorized section head in order to be valid.

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

CHARGE SLIP

Date 2/6/89

Name/Company Harold E. Pressley

Sanitation ____

Vector Control ____

O.P.W.D. ✓

Service: Drop - N/H Exchange
#5455H

MECKLENBURG COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAID

FEB 6 1989

Fee: $20.00

Completed by

Collected by

CERTIFICATE OF COMPLETION/OPERATION PERMIT

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 5454A DATE: 6/1/89

TO: 023-023-17 ☑ L ☐ CRT

SERIAL № 11887

Name of Owner Lasher, Edward C. Juris.:

Address of Property 11212 Johnson Davis Rd

Inspection Data:

Tank Material

Total Length of Drainfield 240 SFB

Number of Lines 2 @ 40

Cover Depth 18" - 24"

Water Supply Source well

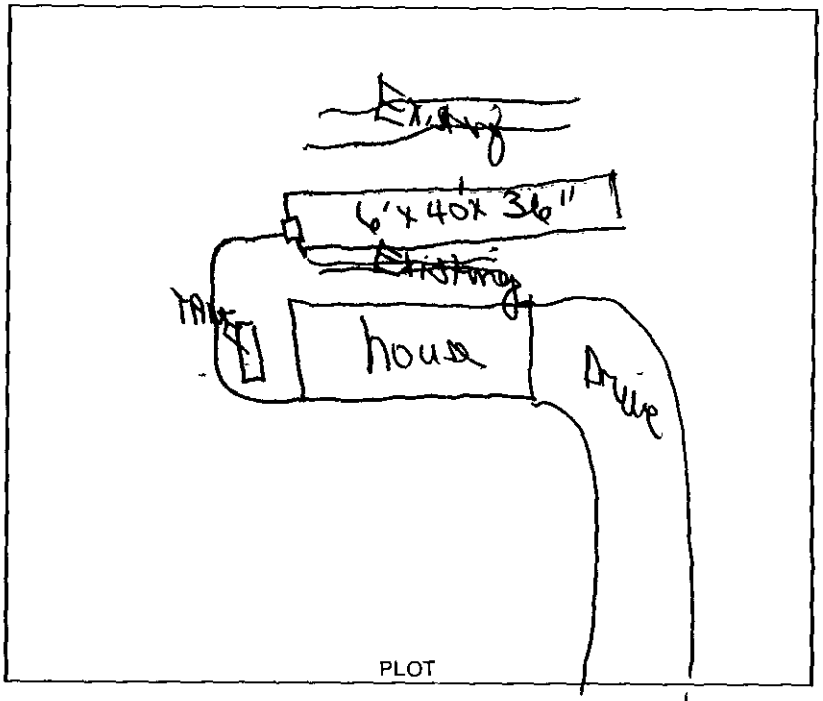
Distance to Water Source ≥ 50'

Excavation Inspected 6/1/89

Tank(s) Inspected

Wash Line Inspected

High Water Alarm Inspected



Design: 1989 Washer repair CTR# 74

The undersigned has inspected the Septic Tank System described above, and certifies it has been

☐ installed or constructed ☑ ~~altered~~ or repaired

☑ ~~in~~ accordance with the permit issued ☐ ~~as~~ detailed in the plot above

and meets the provisions of 10 NCAC 10A .1900, "Laws And Rules For Sanitary Sewage Collection, Treatment, And Disposal" in effect on the date of issuance of the permit. The issuance of this

☐ ~~Certificate~~ of Completion ☐ Operation Permit

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 document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 10 NCAC 10A .1900 in addition to those listed below under "COMMENTS." This document 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: 6' x 40' x 36" installed for washer

Recommend Spacing between WASH Cycles to allow

rest period for drainfield

Judy J. Kuin R.S.
Environmentalist

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