Date Received 4-26-84

RECEIVED (CAR(S) Application No. 20925

APR 26 1984

T. C. No. 109-221-29

Map Date

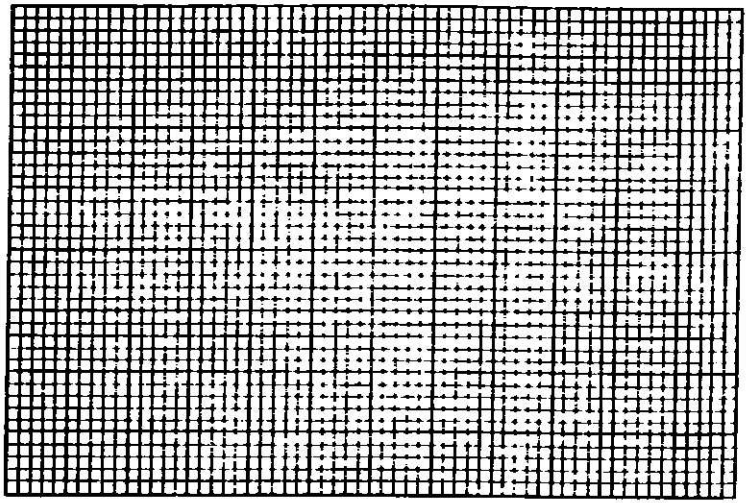
ENVIRONMENTAL HEALTH

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 4
5) Business Use Max No Employees ____
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 Hueter (LAST) Gary (FIRST) F. (MIDDLE)

14) ADDRESS OF OWNER 1916 Marlwood Circle

15) PHONE NO. Home 568-3133 Office 594-5937

16) LOCATION OF SYSTEM 1916 Marlwood Cr. (STREET OR COUNTY ROAD)

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

Map Book No. ____ Page No. ____

18) DEED REFERENCE — DEED BOOK ____ AT PAGE ____

~~How should I know?~~

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.

4-26-84
DATE OF APPLICATION

Gary F. Hueter
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 9/10/85

ICAR(S) Application No. 20925

T. C. No. 109-221-29

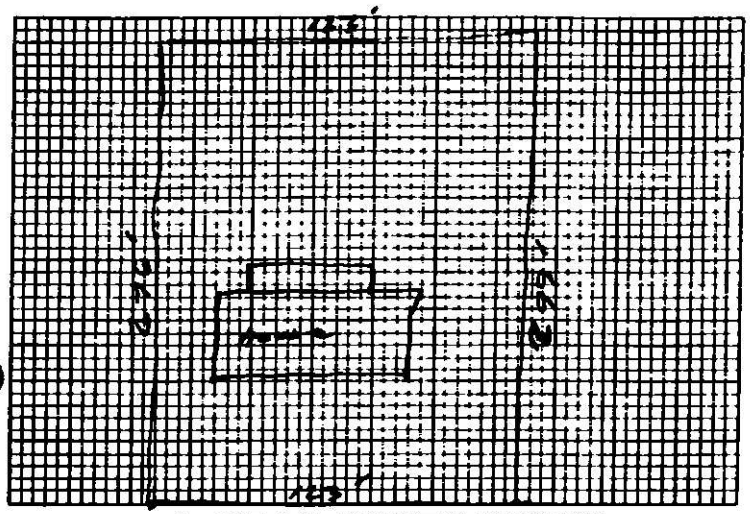
Map Date L

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 3
5) Business Use — Max No Employees ____
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 Hueltzer (LAST) Gary (FIRST) ____ (MIDDLE)

14) ADDRESS OF OWNER 1916 Marlwood Circle

15) PHONE NO. Home 537-3161 Office 537-3161

16) LOCATION OF SYSTEM 1916 Marlwood Circle (STREET OR COUNTY ROAD)

17) SUBDIVISION Marlwood Acres Lot No. 8 Block No. A

Map Book No. 7 Page No. 43

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.

9/10/85
DATE OF APPLICATION

Gary Hueltzer
OWNER

EHD-5-76

Environmental Health Department's Copy

Serial No. 08495

Date Issued 9/10/85

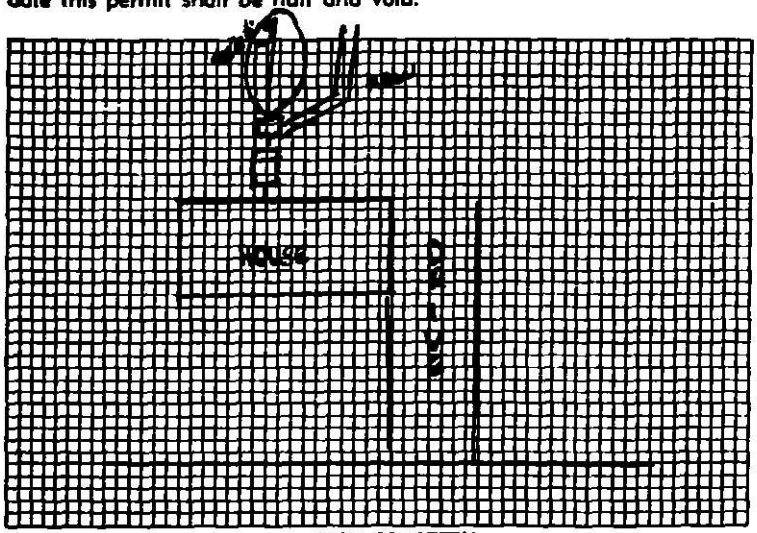
ICAR(S) Permit No. 20925

T. C. No. 109-221-29

Map Date L

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 20925, dated 9/10/85 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 10/10/85, 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 200'

Number of Lines 2

Distance from House 5'

Distance from Property Line 10'

Distance from Well City

NAME OF OWNER Huelter Gary

LOCATION OF PROPERTY 1916 Marlwood Circle

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.

Install new D-Box - hook upto old drainfield - add 2 Trenches 3'x100'x12" stone

Comments: with gradeboards, straw as cover

Division or Section Head

Cynthia G. Bass
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 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.

EHP-5-76

Environmental Health Department's Copy

C of A (s) No. 20926

Date Issued 9-11-85 Serial 7862 T. C. No. 109-221-29 L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
CERTIFICATE OF COMPLETION

CERTIFICATE OF APPROVAL

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

Name of Owner Huelter (LAST) Dary (FIRST) (MIDDLE)

Location of Property 1916 Marlwood Circle

Application Number — Permit Number —

Inspection Data:

Liquid Capacity of Tank repair Tank Material —

Total Length of Drain Tile 240' Number of Lines 2

Depth of Filter Material 12" Cover Depth 15"-24"

Water Supply Source city Distance from Water Source —

Excavation Inspected 9-11-85 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 9-11-85 (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 Health Commission 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: _____

D. R. Ferguson
Environmentalist

EHD-S-76

Environmental Health Department's Copy

Date Received 12/16/80

APT No. 17512

T. C. No. 015-191-03

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Lovell (LAST) Ann (FIRST) L (MIDDLE)

2) ADDRESS OF OWNER 2220 Roswell ZIP 28207

3) PHONE NO. Home 375-9543 Office _____

4) LOCATION OF PROPERTY McCoy Rd (STREET OR COUNTY ROAD) _____

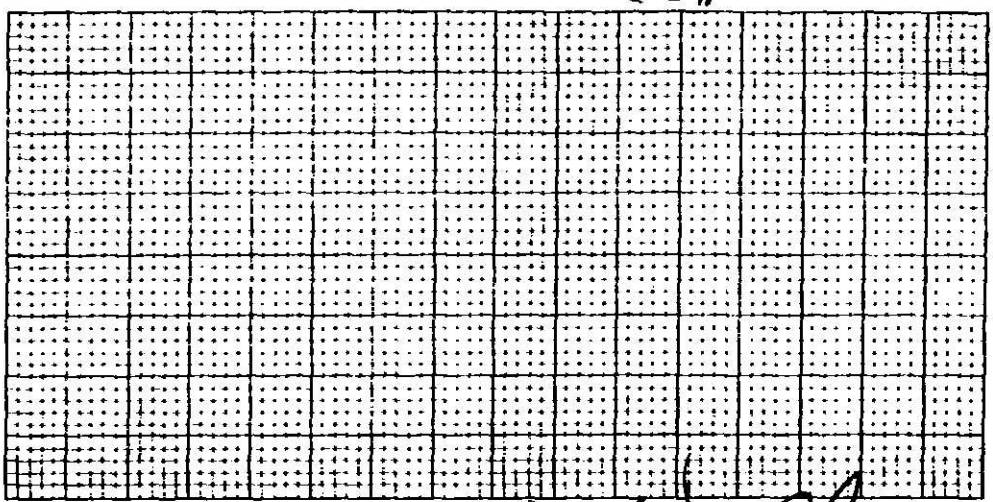
5) SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

MAP BOOK NO 15 PAGE NO. 19

6) DEED REFERENCE DEED BOOK _____ PAGE NO. _____

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation and an on site inspection of the lot hereinabove described for the purpose of determining if the lot is suitable for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge.

Lot 6 2.0Ac



7) ACCURATELY DIAGRAM & DIMENSION LOT

Ann Lovell
OWNER

EHD-5-76

Environmental Health Department's Copy