Date Received 5-9-73

APT No 6209

T. C. No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER LOVE (LAST) Dickie (FIRST) Roy (MIDDLE)

2) ADDRESS OF OWNER 2223 E. 7th ST. ZIP 28204

3) PHONE NO. Home 375-7577 Office 374-2016

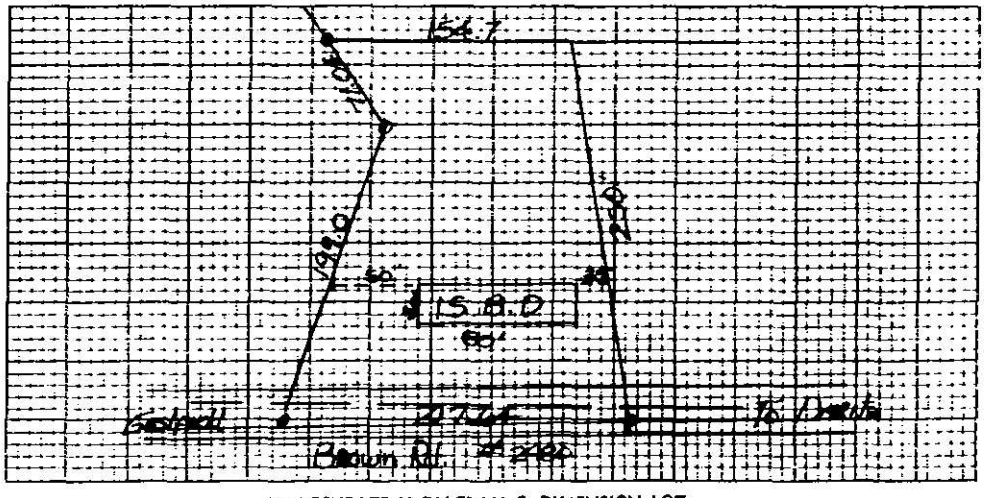
4) LOCATION OF PROPERTY Brown Rd Co. Rd. #2480 (STREET OR COUNTY ROAD)

5) SUBDIVISION LOT NO. 1 BLOCK NO.

MAP BOOK NO 8 PAGE NO. 291

6) DEED REFERENCE: DEED BOOK 3562 PAGE NO. 136

Application is hereby made to the Mecklenburg County Health Department for the conduct of a percolation test and on 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.



7) ACCURATELY DIAGRAM & DIMENSION LOT

Dickie Roy Love
OWNER

FORM NO. E-1-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3443

PTR No. 6209

Date Issued August 9, 1973

T. C. No. 027-112-01

Map Date 9-1-70

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

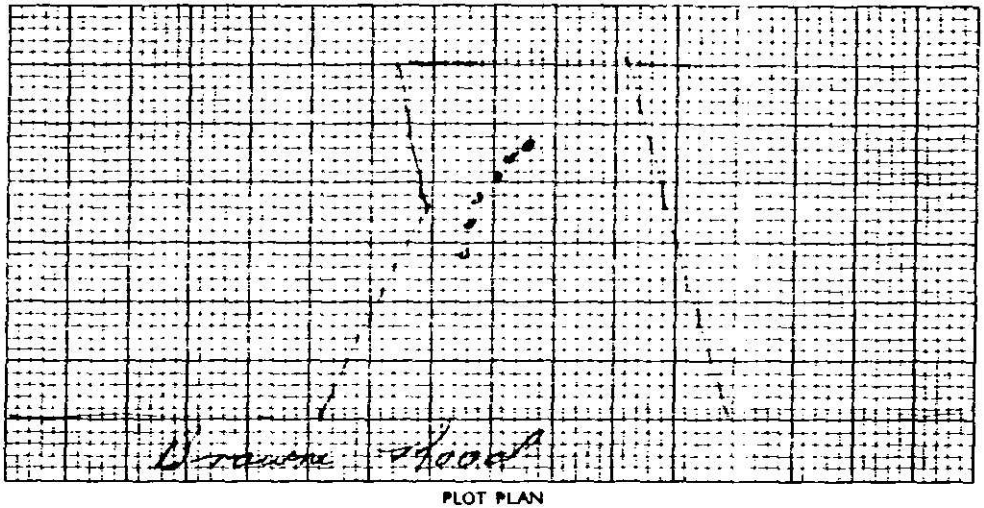
PERCOLATION TEST REPORT

NAME OF OWNER Love (LAST) Dickie (FIRST) Roy (MIDDLE)

ADDRESS OF OWNER 2223 E. 7th Street ZIP 28204

LOCATION OF PROPERTY Brown Road or County Road 2480 (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. _____ BLOCK NO _____



PLOT PLAN

This is to certify that a percolation test has been run and an on-site inspection made by the Mecklenburg County Health Department on the lot described above. The said test was conducted on that portion of the lot as indicated on above plot.

The percolation rate determined by the test was 50 min/in The said lot is approved for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption effluent discharge subject to the following terms and conditions:

1. A permit to install, construct, alter, or repair the specific system shall be obtained from the Mecklenburg County Health Department prior to the beginning of any construction of buildings, or of the wastewater treatment system on the said lot
2. The size of the septic tank wastewater teratment system which must be installed will be determined by the Health Department prior to installation based on the percolation rate obtained above, and on the size and type of building constructed thereon.
3. This approval is valid only if the system is installed in the immediate area where the percolation test was run.
4. This approval is void if any grading, filling, or construction (including the drilling of a well) is performed on the lot which, in the opinion of the Health Department, renders the area where the percolation test was run unsuitable for the installation, construction, alteration, and/or repair of such a system.

This approval is granted based on the laws of the State of North Carolina and the rules and regulations of the North Carolina State Board of Health and the Mecklenburg County Board of Health which were in effect on the date of issuance and is void if at any time in the future, prior to the completion of the system, these laws, rules, and regulations are changed such that this approval would not have been granted had the new or revised laws, rules, and regulations been in effect on the issue date.

John R Atkisson

Director, Environmental Health Division or Authorized Section Head

FORM NO. E-2-4-1-71

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

Date Received 5-9-73

ICAR(S) Application No 6209

T C No

Map Date

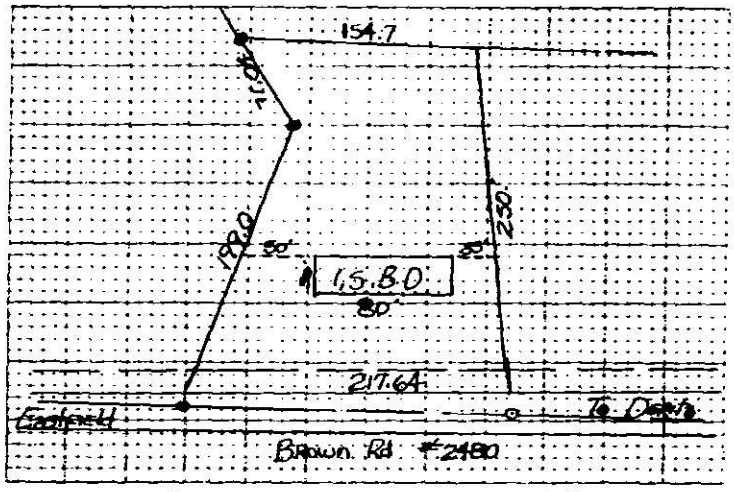
MECKLENBURG COUNTY HEALTH DEPARTMENT

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

1) X 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)

4) No of bedrooms 3

5) Business Use Yes No
Employees City of Charlotte

6) Washing Machine Yes No

7) Garbage Disp Yes No

8) Dishwasher Yes No

9) Water Supply
A) Individual Well yes
B) Government
C) Community System
1) Well
2) Government

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 LOVE (LAST) Dickie (FIRST) Roy (MIDDLE)

14) ADDRESS OF OWNER 2223 E. 7th Street

15) PHONE NO Home 375-7577 Office 374-2016

16) LOCATION OF SYSTEM Brown Rd. Co Rd. #2480 (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. 1 Block No. ___

Map Book No. 8 Page No. 291

18) DEED REFERENCE — DEED BOOK 3562 AT PAGE 136

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.

DATE OF APPLICATION ___

OWNER Dickie Ray Love

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued August 9, 1973

Serial No. 3264

LA No. 6209

T. C. No. 027-112-01

Map Date 9-1-70

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Love (LAST) Dickie (FIRST) Roy (MIDDLE)

ADDRESS OF OWNER 2223 E. 7th Street ZIP 28204

LOCATION OF LOT Brown Road or County Road 2480 (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. _____

The above specified lot is approved by the Mecklenburg County Health Department for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the percolation test results which yielded a percolation rate of 50 min/in on an on-site inspection of the said lot; and upon the information supplied in the "Application for an Installation, Construction, Alteration, and/or Repair Permit", number 6209. This approval is subject to the following terms and conditions:

1. That the nitrification field be installed, constructed, altered, and/or repaired in the same area where the percolation test was run.

2. That an "Installation, Construction, Alteration, and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altred, and/or repaired and that the system be installed in accordance with same.

This approval may be revoked and the building inspection department requested to revoke any building permit(s) which have been issued to authorize construction on the said lot if at any time it is determined that any information contained in the "Application for an Installation, Construction, Alteration, and/or Repair Permit" is not correct or is untrue or that the septic-tank system is not being installed, constructed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit.

W. C. Kirby
Environmentalist

John R Adkisson
Director, Environmental Health Division or Authorized Section Head

FORM NO. E-3-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 30 June 77 Serial No. 0894

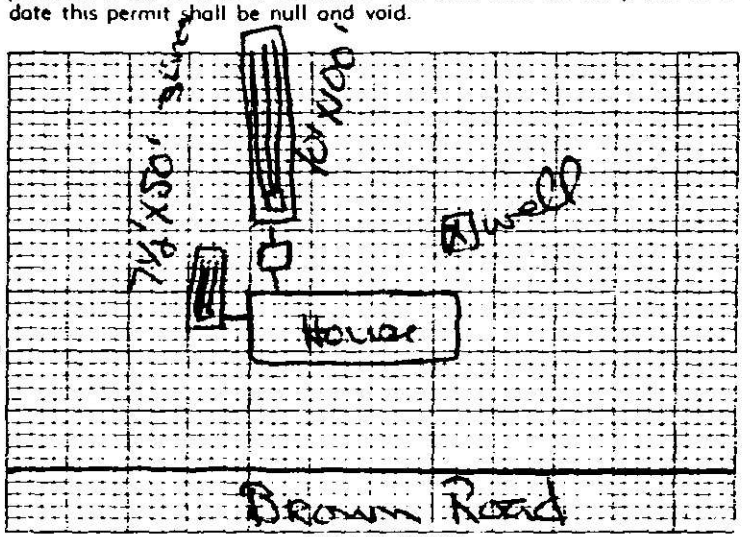
ICAR(S) Permit No. 6209

T. C. No. _____

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 6209, dated ✓ 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 30 July 77, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate 60

Liquid Capacity of Tank 1000 gal

Tank Construction Precast Concrete

Absorption and/or Nitrification Lines:

Total Line Length 400' - 150'

Number of Lines 4 - 3

Distance from House 10'

Distance from Property Line 10'

Distance from Well 50'

NAME OF OWNER Love, D. R.

LOCATION OF PROPERTY Brown Road

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 gurantee 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.**

Comments: 17" depth total

_____ Division or Section Head

R. M. Reynolds 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.

END-5-76

Environmental Health Department's Copy

Date Issued 3 Apr 78 **Serial No. 1464** C of A (s) No. 6209

T C No

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

ENVIRONMENTAL HEALTH DIVISION
CERTIFICATE OF COMPLETION
CERTIFICATE OF APPROVAL

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

Name of Owner Love, D.R. (LAST, FIRST, MIDDLE)

Location of Property 7016 Brown Road

Application Number 6209 Permit Number 6209

Inspection Data:

Liquid Capacity of Tank 1000gal Tank Material Precast Concrete

Total Length of Drain Tile 400' - 150' Number of Lines 4-4

Depth of Filter Material 17" Cover Depth 24"

Water Supply Source well Distance from Water Source 100'

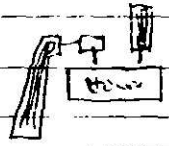
Excavation Inspected 3 Apr 78 (DATE) Tank Inspected 3 Apr 78 (DATE)

Nitrification Field Inspected 3 Apr 78 (DATE)

Washing Machine Line Inspected, If Applicable 3 Apr 78 (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 Layout changed:



Environmentalist

EHD-5-76

Environmental Health Department's Copy

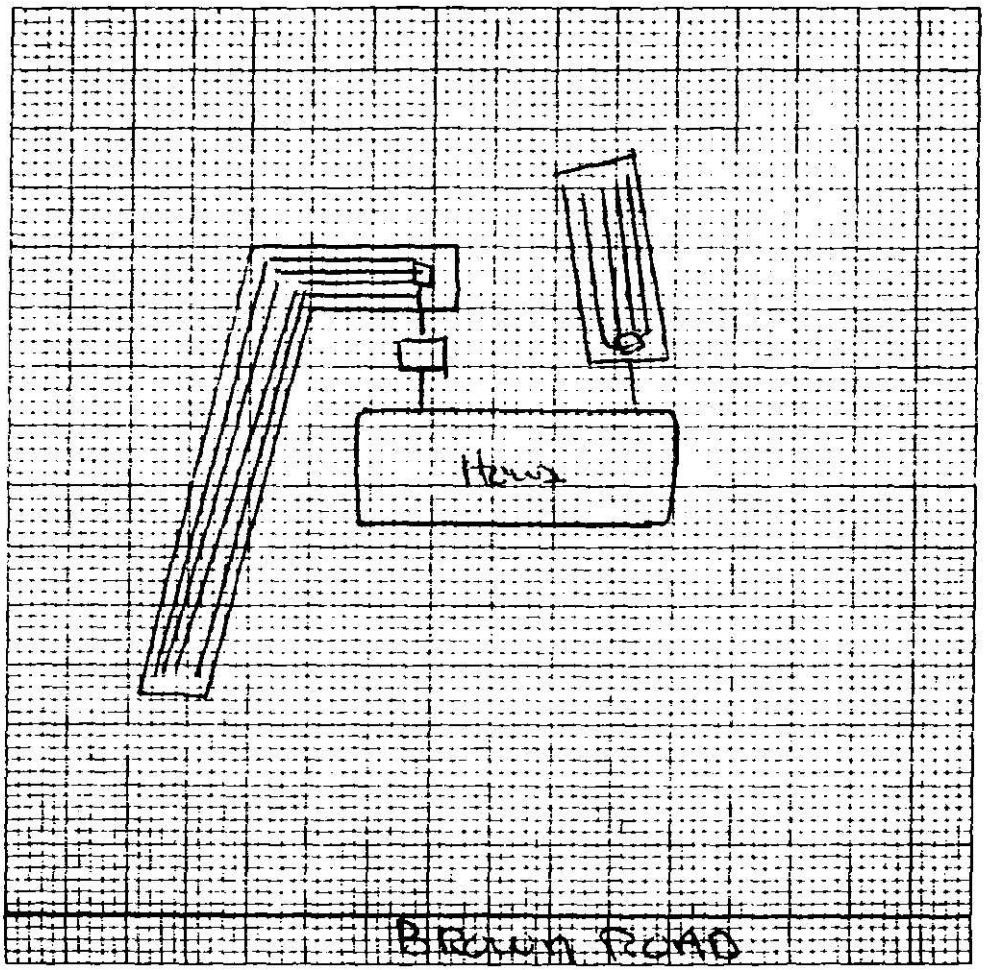
Date Issued 3 Apr 78

C of A (s) No. 6209

T. C. No. _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

PLOT PLAN SHEET



PLOT PLAN

ACCURATE DIAGRAM OF SYSTEM AS INSTALLED

J. M. Reynolds
Environmentalist

EHD-5-76

Environmental Health Department's Copy