12

SEE INSTRUCTIONS ON BACK

Date Received 5-22-73

ICAR-S Application No 6341

T C No 37-C91-C4

Map Date 2 Jan 72

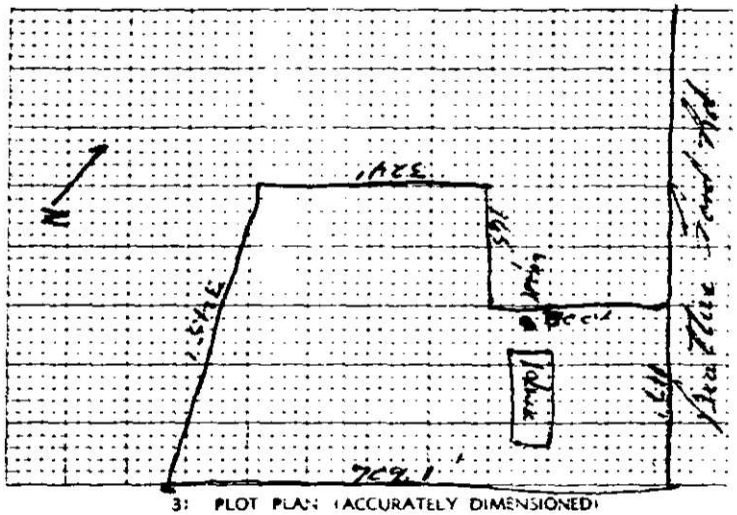
MECKLENBURG COUNTY HEALTH DEPARTMENT

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) ___ 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 ___ No ✓
Employees ___

6) Washing Machine ___ Yes ___ No

7) Garbage Disposal ___ Yes ___ No

8) Dishwasher ✓ Yes ___ No

9) Water Supply
___ Private Well ✓
___ Community System
___ Other

10) Sewage System
___ Private Individual Septic Tank
___ Community System

11) FHA Case No ___

12) VA Case No ___

13) NAME OF OWNER WATSON (LAST) ELBERT (FIRST) LEE (MIDDLE)

14) ADDRESS OF OWNER Rt 9 Box 244 CHARLOTTE, NC 28208

15) PHONE NO Home 392-1586 Office ___

16) LOCATION OF SYSTEM BEATTYS FORD RD. (STREET OR COUNTY ROAD)

17) SUBDIVISION Long Creek Lot No ___ Block No. ___

Map Book No ___ Page No. ___

18) DEED REFERENCE — DEED BOOK 2141 AT PAGE 252

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

May 22-1973
DATE OF APPLICATION

ELBERT LEE WATSON
OWNER
Elbert L. Watson

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 3716

ICAR(S) Permit No. 6341

Date Issued 22 May 73

T. C. No. 037-091-04

Map Date 10 Jan 72

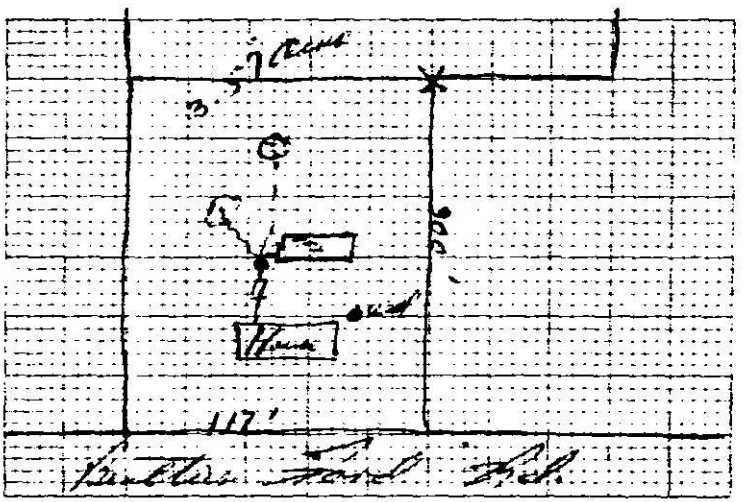
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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 6341, dated 22 May 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 22 Jun 73, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate _____

Liquid Capacity of Tank _____

Tank Construction _____

Absorption and/or Nitrification Lines:

Total Line Length 200'

Number of Lines 3 (72 1/2 X 33 X 34")

Distance from House 50'

Distance from Property Line 35'

Distance from Well 75'

NAME OF OWNER Nelson, Elbert Lee

LOCATION OF PROPERTY Biatts Ford Road

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: 1 Storm (Cont.)

Division or Section Head _____

Environmentalist M. L. Berry

* 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 5-4-1-7

[illegible] HEALTH DEPT COPY

Date Issued 24 May 73

Serial No. 3344

C of A (s) No. 6941

T C No. 037-091-04

Map Date 10 Dec 72

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Nelson, Elliot (LAST, FIRST) Lee (MIDDLE)

Location of Property Beatties Ford Area

Application Number 634 Permit Number 6341

Inspection Date:

Liquid Capacity of Tank _____ Tank Material Fiberglass

Total Length of Drain Tile 200' Number of Lines 3 (75' x 33 x 34")

Depth of Filter Material 34" Cover Depth 18"

Water Supply Source Drilled Well Distance from Water Source 75'

Excavation Inspected 22 May 73 (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected 22 May 73 (DATE)

Washing Machine Line Inspected, If Applicable 22 May 73 (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: J. Stone (Cont.)

Environmentalist

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

HEALTH DEPARTMENT'S COPY