Date Received 8-28-84

RECEIVED
1984
ENVIRONMENTAL HEALTH

SIR No. 21278
T. C. No. 215-1/2 68, 69
Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Farabee (LAST) John (FIRST) C. (MIDDLE)

2) ADDRESS OF OWNER 5706 Kildare Dr ZIP 28215

3) PHONE NO. Home 537-2468 Office N/A

4) LOCATION OF PROPERTY CORNER OF: Hwy. 51 & Kimway Dr. (STREET OR COUNTY ROAD)

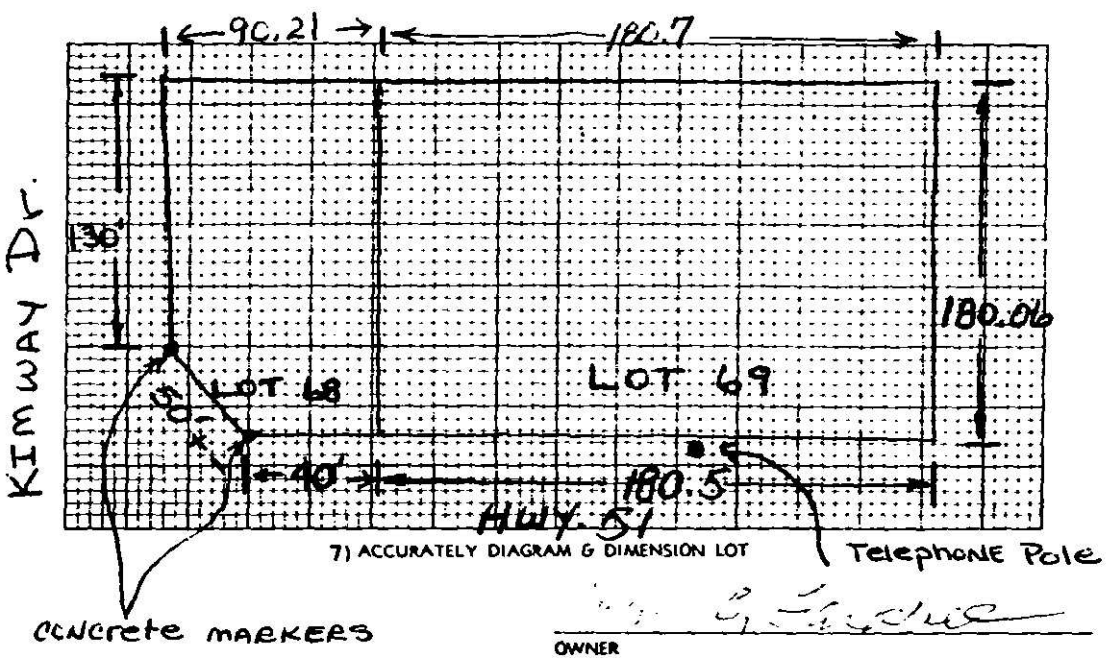
5) SUBDIVISION UNKNOWN LOT NO 68 & 69 BLOCK NO

MAP BOOK NO ~~193~~ 215 PAGE NO. 11

6) DEED REFERENCE DEED BOOK PAGE NO

PLEASE SEND TO: TEDD A. Smith 10205 Beckley Pl. Char. N.C. 28212 Ph-841-9861 W

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



7) ACCURATELY DIAGRAM & DIMENSION LOT

OWNER

EHD-5-76

Environmental Health Department's Copy

DEPARTMENT OF
ENVIRONMENTAL HEALTH
MECKLENBURG COUNTY,
NORTH CAROLINA

SITE EVALUATION

S.I.R. NO. [illegible]

T.C. NO. [illegible]

(Ground Absorption Sewage Disposal)

OWNER: [illegible]
ADDRESS: [illegible]
[illegible]
LOCATION OF SITE: [illegible] Highway

PLAT NO: [illegible]
LOT SIZE: [illegible] 1.10

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S [illegible] PS U	S PS U	S PS U	S PS U
2. SOIL TEXTURE (12-36 inches) Sandy, Loamy, Clayey (Note 2-1 Clay)	S [illegible] PS U	S PS U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 inches)	S [illegible] PS U	S PS U	S PS U	S PS U
4. SOIL DEPTH (inches)	S [illegible] PS U	S PS U	S PS U	S PS U
5. RESTRICTIVE HORIZONS (Inches) (Impervious strata, Rock)	S [illegible] PS U	S PS U	S PS U	S PS U
6. SOIL DRAINAGE/GROUNDWATER (external and internal)	S [illegible] PS [illegible] U [illegible]	S PS U	S PS U	S PS U
7. OTHER (Specify)	S PS U	S PS U	S PS U	S PS U
8. SOIL GROUP	[illegible]			
9. SITE CLASSIFICATION	[illegible]			
10. SOIL SERIES	[illegible]			

S - Suitable PS - Provisionally Suitable U - Unsuitable

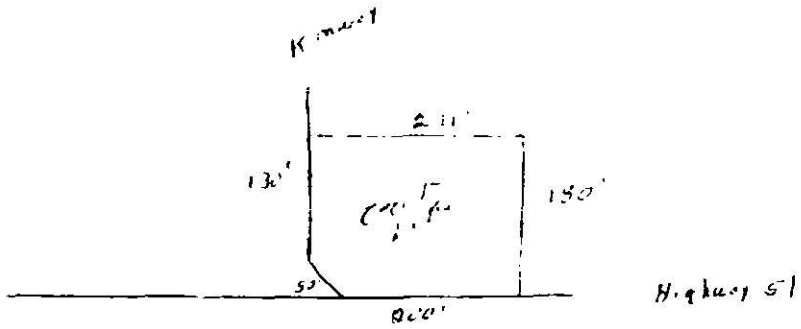
**See Diagram on Back (includes: soil areas, property lines, roads, streams, gullies, wet areas, fill areas, wells, water bodies, slopes)

Recommendations/Comments: _____

Described by: [illegible]
Title: [illegible]

Date: [illegible]

#


Highway 51

Serial No. 5865

SIR No. 21278

T. C. No. 215-112-68,69

Date Issued 9-12-84

Map Date L

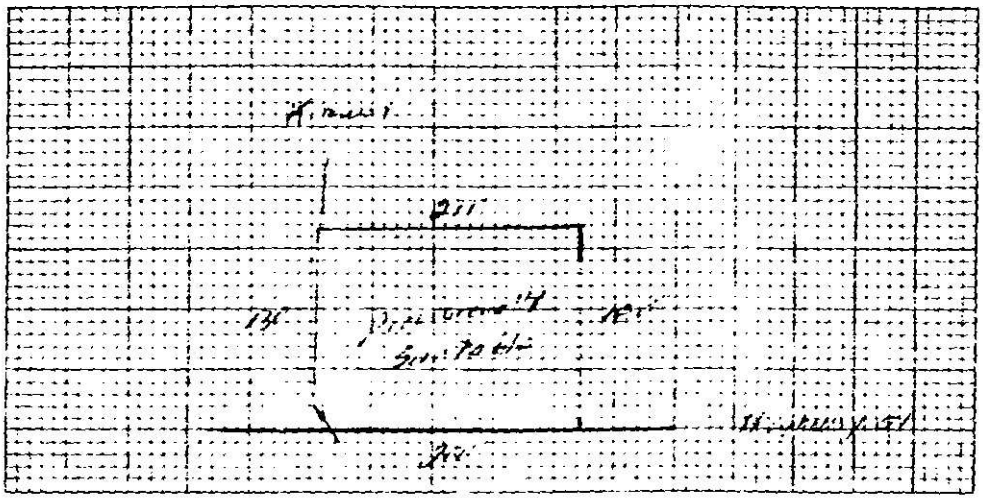
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Farabee, John C.
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 5706 Kildare Dr., Charlotte, NC ZIP 28215
2124 Highway 51

LOCATION OF PROPERTY 1300 Kimway Drive (Duplex)
(STREET OR COUNTY ROAD)

SUBDIVISION LOT NO BLOCK NO.



PLOT PLAN

This is to certify that a soil investigation and onsite investigation was made by the Mecklenburg County Department of Environmental Health on the lot described above. The said investigation was conducted on that portion of the lot as indicated on the above plot. **PROVISIONALLY SUITABLE**

The permeability rate determined by the investigation was 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 requirements and conditions:

1. A properly installed system consisting of a septic tank and subsurface soil absorption system may be obtained from the Mecklenburg County Department of Environmental Health provided the design of the system and the wastewater treatment system on the said lot
2. The size of the septic tank and the permissible rate at which sewage may be applied to the soil absorption system shall be determined by the Mecklenburg County Department of Environmental Health on the basis of the permeability rate obtained above and on the size and type of building proposed to be served.
3. This approval is valid only for the specific lot as shown on the plot plan and is not acceptable for system installation on any other lot.
4. This approval is valid for a period of five years from the date of issuance unless prior changes occur in the soil conditions, the Mecklenburg County Department of Environmental Health rules and regulations governing the approval of septic tank systems or in the criteria governing the location and design of such systems and components.

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

William R. Marsden
Soil Scientist

Dixie D. Hardesty, Jr.
Environmental Health Director or
Authorized Section Head

EHD-5-76

Serial No. 7837

SIR No. 21278

Date Issued 9-12-84

T. C. No. 215-112-68,69

Map Date [illegible]

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
IMPROVEMENT PERMIT
TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Farabee, (LAST) John (FIRST) C. (MIDDLE)

ADDRESS OF OWNER 5706 Kildare Dr., Charlotte, NC ZIP 28215

LOCATION OF LOT 2124 Highway 51 1800 Kimway Drive (Duplex) (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO _____ BLOCK NO _____

MAP BOOK NO. _____ PAGE NO. _____

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, 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 21278. 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 soil investigation 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, altered, 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.

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 9-4-84

RECEIVED

ICAR (S) Application No 21278

T C No 215-112-68,69

Map Date _____

Call 1st

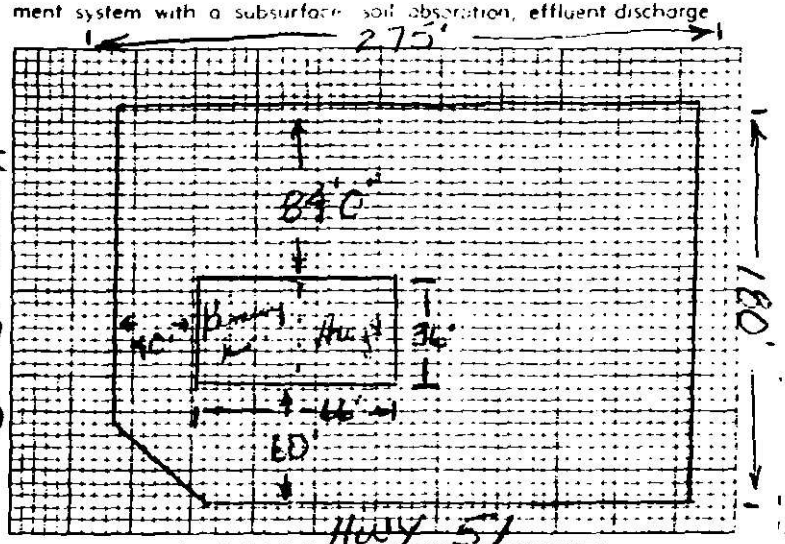
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

Application for an
Installation, Construction, Alteration, and/or Repair Permit
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

(2 SYSTEMS, Duplex)

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 2 & side duplex.
5) Business Use — Max No Employees N/A
6) Washing Machine ✓ Yes ____ No
7) Garbage Disposal ____ Yes ✓ No
8) Dishwasher ____ Yes ✓ No
9) Water Supply
   A) Individual Well yes
   B) Governmental System N/A
   C) Community System
      1) Well source N/A
      2) Governmental source N/A
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 N/A
12) VA Case No N/A

13) NAME OF OWNER Smith (LAST) Tedd (FIRST) Austin (MIDDLE)

14) ADDRESS OF OWNER 10205 Beckley Place

15) PHONE NO Home 545-5878 Office 847-9861

16) LOCATION OF SYSTEM CORNER OF: 2700 Hwy 51 & 1500 KIMWAY DR (STREET OR COUNTY ROAD)

17) SUBDIVISION ? Lot No ~~[illegible]~~ Block No. B.

Map Book No. _____ Page No. 1, 2 + 3

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ____ NO DATE RUN Aug '84

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.

9-4-84
DATE OF APPLICATION

Tedd A. Smith
OWNER

EHD-5-76

Environmental Health Department's Copy

Serial No. 8093

SIR No. 21278

Date Issued 1-4-84

T. C. No. 215-112-68,69

Map Date L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

[illegible] PERMIT

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Smith, (LAST) Tedd (FIRST) Austin (MIDDLE)

ADDRESS OF OWNER 10205 Beckley Pl., Charlotte, NC ZIP 28212

LOCATION OF LOT 2124 Matthews-Mint Hill Road
1800 Kimway Drive (Duplex)
(STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO _____ BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO _____

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, 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 21278. 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 soil investigation 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, altered, 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.

Cynthia G. Bass
Environmentalist

Brie D. Hardesty
Environmental Health Director, or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

Serial No. 07841

Date Issued 1/8/86

ICAR(S) Permit No 21278

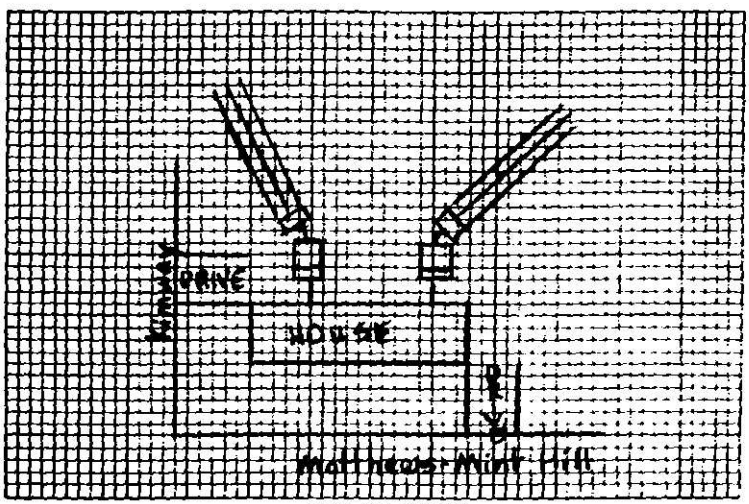
T. C. No. 215-112-68,69

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 21278, dated 9/4/84 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 2/8/86, after which date this permit shall be null and void.

Duplex



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500gal (2)

Tank Construction PCC

Absorption and/or Nitrification Lines

Total Line Length 200' (2)

Number of Lines 3X67' (2)

Distance from House 5'

Distance from Property Line 10'

Distance from Well 80'

NAME OF OWNER Smith Tedd Austin
1800 Kimway Drive

LOCATION OF PROPERTY 2124 Matthews-Mint Hill Road } Duplex

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.

(2) 3 Trenches x 3' x 67' x 12" stone with gradeboards and straw as cover

Comments:

B. Hawkins
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.

END-5-74

Environmental Health Department's Copy

C of A (s) No. 21278

Date Issued 2/8/85 Serial 7288 T C No. 215-112-60,69 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 Smith (LAST) Tedd (FIRST) Austin (MIDDLE)

Location of Property 1800 Kimway Drive 2124 Matthews-Mint Hill Road (Duplex)

Application Number 21278 Permit Number 21278

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material PCC

Total Length of Drain Tile 200' (2) Number of Lines 3X67' (2)

Depth of Filter Material 12" Cover Depth 18"

Water Supply Source well Distance from Water Source 80'

Excavation Inspected 2/8/85 (DATE) Tank Inspected 2/8/85 (DATE)

Nitrification Field Inspected 2/8/85 (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 2 systems installed per permit, Each consists of 3-67' lines.

Cynthia G. Bass
Environmentalist

EHD-5-76

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: 21274
TC: 215/1268
SERIAL: № 18978 ☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 1800 (STREET NO) KIMWAY (STREET) DR. ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.:
⑤ SUBDIVISION: KIMBERLY ACRES ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: Tedd (FIRST) Austin (MIDDLE) Smith (LAST)
⑨ MAILING ADDRESS: 2323 McMANUS ROAD
⑩ CITY: MIDLAND ⑪ STATE: NC ⑫ ZIP: 28107
⑬ PHONE: (WORK) 847-9861 ⑭ (HOME) 545-5878

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? 3 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: Tedd Austin Smith
Date: 8-7-89

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.

T. L. Whitaker 8/9/89
Environmentalist Date

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

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: 21278
TC: 215182-21
SERIAL: № 18979
☐ L ☐ CRT

JOB LOCATION

① ADDRESS: 2124 (STREET NO) MATTHEWS-MINT HILL ROAD (STREET) ② FILE:
③ JURISDICTION: ④ TAX PARCEL NO.:
⑤ SUBDIVISION: KIMBERLY ACRES ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: TODD (FIRST) AUSTIN (MIDDLE) SMITH (LAST)
⑨ MAILING ADDRESS: 2323 McMANUS ROAD
⑩ CITY: MIDLAND ⑪ STATE: NC ⑫ ZIP: 28107
⑬ PHONE: (WORK 847-9861 ⑭ (HOME) 545-5878

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? 3 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: Todd A. Smith
Date: 8-7-89

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.

Tim Wilkinson — 8/9/89
Environmentalist — Date

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.

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

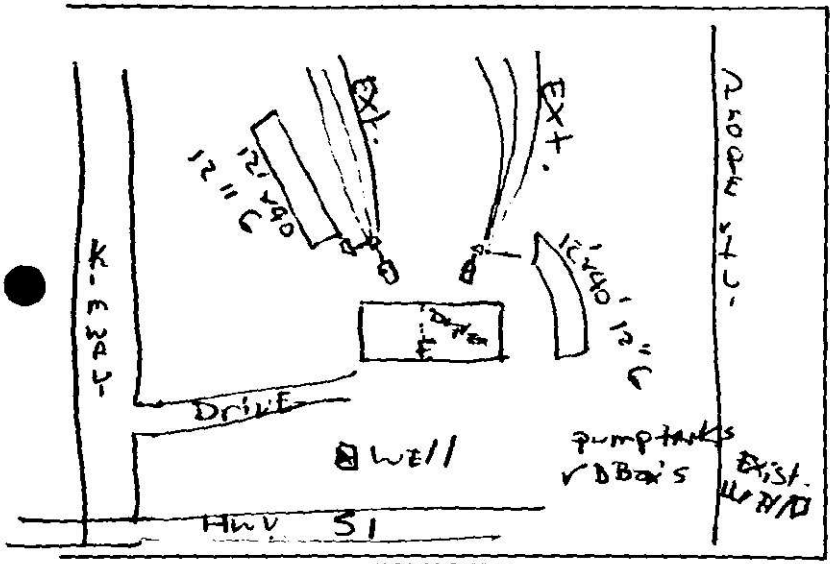
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 21278 DATE: 8/8/89

TC: 215 11268 ☑ L

SERIAL № 12883 & 215 182 21

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 the application dated 8/7/89. All work shall be completed on or before 9/7/89, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Department of Environmental Health before any system can be covered up or placed into service. 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank ____ gallons

Liquid Capacity of Dosing Tank ____ gallons

Tank Construction ____

Absorption and/or Nitrification Lines:

Trench Width 12'/12' feet

Total Line Length 2/40' feet

Number of Lines 2/40'

Depth of Stone 12"-14" inches

Distance from House 10 feet

Distance from Property Line 10 feet

Distance from Well >50 feet

NAME OF OWNER Tedd Smith

LOCATION OF PROPERTY 1800 Kimway & 2124 Mathews Mint Hill

Comments: 1989. (2) 12'x40' 12-14" 6 beds (duplex)

Division or Section Head

Tim Whittaker, RS
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.

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST S COPY ● PINK - OWNER OR AGENTS COPY

CERTIFICATE OF COMPLETION/OPERATION PERMIT

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

FILE: 21278 DATE: 8/9/89

TC: 21511268 ☐ L ☐ CRT

SERIAL № 12049 & 21518221 Duplex

Name of Owner Tedd Smith Juris.:

Address of Property 1800 Kimway & 2124 Matthews Mint Hill Rd.

Inspection Data:

Tank Material —

Total Length of Drainfield 80'

Number of Lines 2/2 ~~2~~ (4) @ 40' per bed

Cover Depth 12" +

Water Supply Source Well

Distance to Water Source >50

Excavation Inspected Y

Tank(s) Inspected —

Wash Line Inspected —

High Water Alarm Inspected —

PLOT

Design: 1989, Repair CTR# 143

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: 2 beds 40'x12'x 12" G, work out of Existing D-boxes

Tim Whittaker, R.S.
Environmentalist

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