Date Received 4-12-83

SEE INSTRUCTIONS ON BACK

ICAR(S) Application No. 19538 ✓

T. C. No. 001-052-19

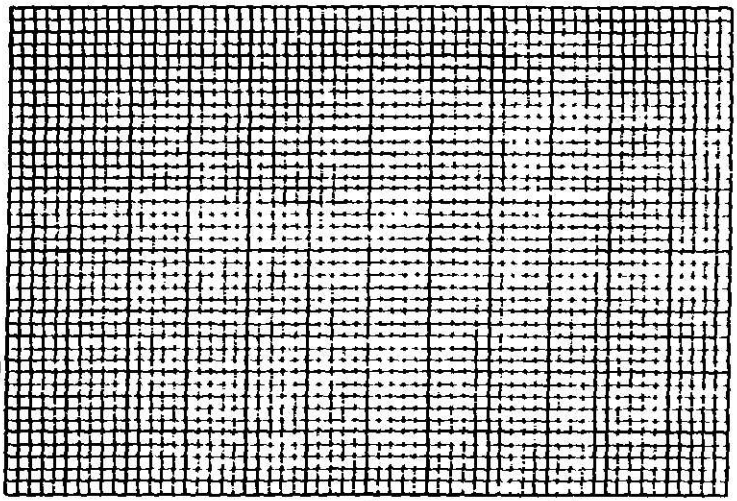
Map Date _____

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 Statupe (LAST) Yates (FIRST) A (MIDDLE)

14) ADDRESS OF OWNER 412 Box 578 Huntersville 28078

15) PHONE NO. Home 892-1655 Office ____

16) LOCATION OF SYSTEM Arbor Place Mintz Rd. (STREET OR COUNTY ROAD)

17) SUBDIVISION Point Circle Lot No. _____ Block No. _____

Map Book No. _____ Page No. _____

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.

4-12-83
DATE OF APPLICATION

Yates A. Stroupe
OWNER

EHD-5-76

Date Issued 4-12-83

Serial No. 6136

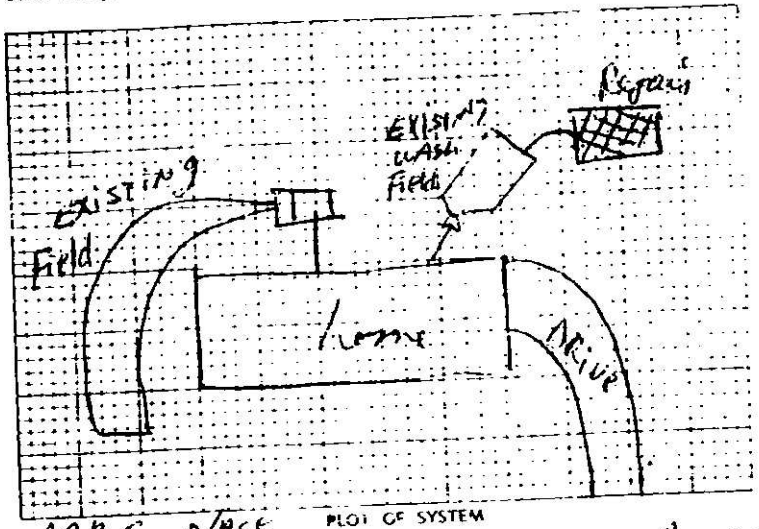
ICAR(S) Permit No. 19538

T C No 001-0529

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 _____, dated 4-12-83 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 5-12-83, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate Repair

Liquid Capacity of Tank _____

Type Construction _____

Area or Trenches or Length of Absorption Line Wash line

Total Line Length 100

Number of Lines _____

Distance from Structure >5'

Distance from Property Line 71'

Distance from Well >5'

NAME OF OWNER ARBOR PLACE Yates A Stroupe

LOCATION OF PROPERTY Arbor Place & Nantz Rd.

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.

Comments: wash bed repair - 6 ft wide x 15 ft long x 5 ft stone over flow to repair from existing bed

R K Hope
Environmentalist

_____
Division or Section Head

* 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.

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

C of A (s) No. 19538

Date Issued 6-2-83 Serial 5890 T C. No 001-052-19

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

CERTIFICATE OF APPROVAL

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

Name of Owner Strouse (LAST) Yates (FIRST) A. (MIDDLE)

Location of Property Arbor Place + Mentz Rd

Application Number 19538 Permit Number 19538

Inspection Data: Repair

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile 100' Number of Lines 2

Depth of Filter Material 5' Cover Depth 1½'

Water Supply Source well Distance from Water Source >50'

Excavation Inspected — (DATE) Tank Inspected — (DATE)

Nitrification Field Inspected ~~6-2-83~~ (DATE)

Washing Machine Line Inspected, If Applicable 6-2-83 (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

Environmentalist R. Phelps

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT COPY