SEE INSTRUCTIONS ON BACK

Date Received 6-19-73

ICARIS Application No 6504

T C No

Map Date

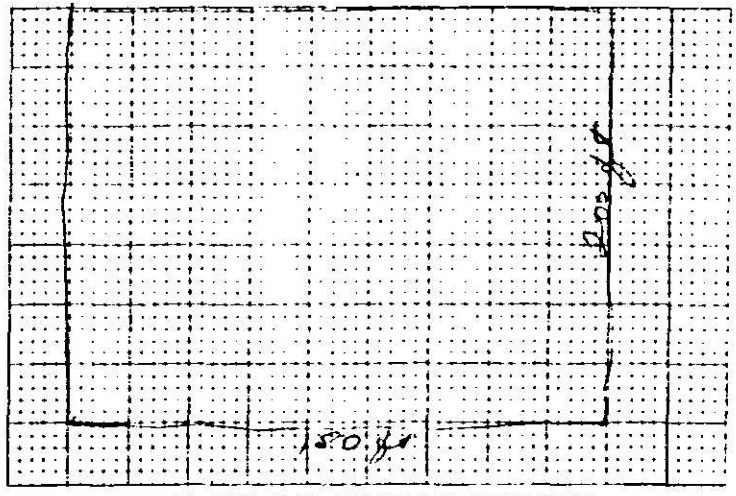
MECKLENBURG COUNTY HEALTH DEPARTMENT

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) 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 Income Use No. No. Employees

6 Washing Machine ✓ Yes

7 Garbage Disposal Yes ✓ No

8 Dishwasher Yes ✓ No

9 Water supply

A) Individual Well ✓

B) Government

C) Community System

1 Well Source

2 Government

Sewage System

House to be Piped to Community Sewer

of public sewer Does Yes No

House to be Piped to Community Sewer Does Yes No

11 FHA Case No.

12 VA Case No. 6400

13) NAME OF OWNER Courtney Thomas J.
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 3717 Rankin Rd Matthews N C 28105

15) PHONE NO Home 364-6233 Office 333-1523

16) LOCATION OF SYSTEM Front yard Septic 3717 Rankin Rd
STREET OR COUNTY ROAD

17) SUBDIVISION Providence Commons Lot No 14 & 15 Block No

Map Book No 21 Page No. 203

18) DEED REFERENCE — DEED BOOK 3111 AT PAGE 426
(Which house was built, new tank)

19) HAS A PERCOLATION TEST BEEN RUN? YES NO DATE RUN
about 8yrs ago

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

6-15-73
DATE OF APPLICATION

OWNER Thomas J Courtney

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 7-3-73

Serial No. 3947

ICAR(S) Permit No. 6504

T. C. No. _____

Map Date _____

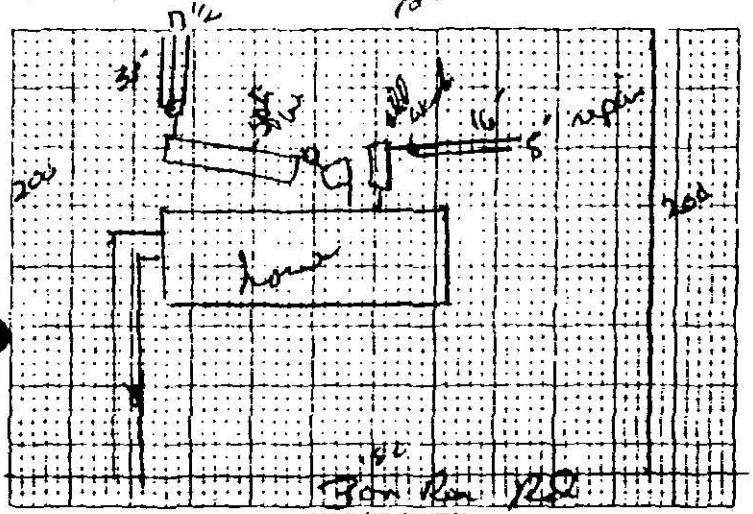
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTRUCTION, 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 6504, dated 6-14-73 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 8-3-73, 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 Lenght 100'/100'

Number of Lines 3/2

Distance from House 10' ±

Distance from Property Line 10' ±

Distance from Well 100

NAME OF OWNER Thomas J. Courtney

LOCATION OF PROPERTY 3717 Bon Ron Rd

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: washer repair 5' X 16' X 4' dia

septic repair 7½' X 33' X 17" dia

Ralph Turner, Contractor

Division or Section Head

Thomas R. Ward
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 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 S-4-1-71

HEALTH DEPARTMENT'S COPY

Serial No. 3578

C of A (s) No. 6504

Date Issued 7-3-73

T C. No. 211-263-11

Map Date 9-(-)0

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Courtney, Thomas (LAST, FIRST) Q. (MIDDLE)

Location of Property 3717 Bon Rea Rd

Application Number 6504 Permit Number 6504

Inspection Data:

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile 100'/100' Number of Lines 3/2

Depth of Filter Material 17"/4' Cover Depth 18"

Water Supply Source Well Distance from Water Source 100'

Excavation Inspected 7-3-73 (DATE) Tank Inspected 7-3-73 (DATE)

Nitrification Field Inspected 7-3-73 (DATE)

Washing Machine Line Inspected, If Applicable 7-3-73 (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: Repair by Ralph Farmer

Thomas R. Ward

Environmentalist

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

HEALTH DEPT., MECKLENBURG CO., N.C.

SEE INSTRUCTIONS ON BACK

Date Received _____ ICAR(S) Application No 6504

T. C. No 21-263-11

Map Date 11-28-25

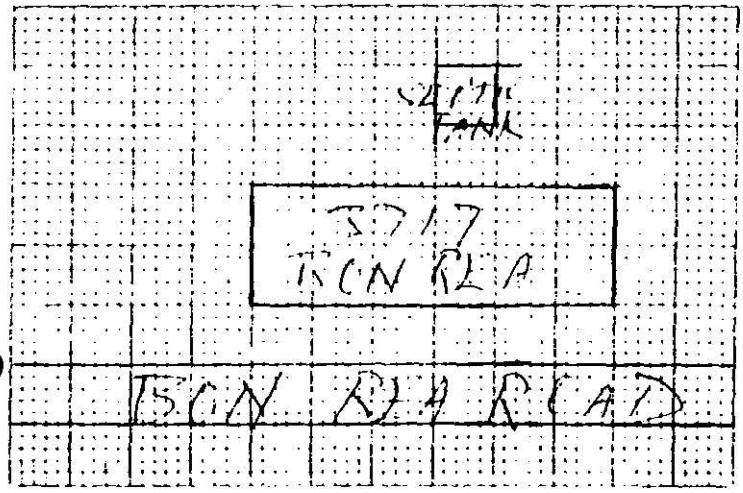
MECK COUNTY DEPARTMENT OF
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MAR 3
ENVIRONMENTAL HEALTH

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) X 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 X Yes ___ No
4) No of Bedrooms 3
5) Business Use - Max No Employees ___
6) Washing Machine X Yes ___ No
7) Garbage Disposal X Yes ___ No
8) Dishwasher X Yes ___ No
9) Water Supply
A) Individual Well X
B) Governmental System ___
C) Community System
1 Well source ___
2 Governmental source ___
10) Sewage System
House located within 200 feet of public sewer Yes X No
House located within 200 feet of community sewer Yes X No
11) FHA Case No N/A
12) VA Case No N/A

13) NAME OF OWNER Vinson (LAST) Realty (FIRST) Co., Inc. (MIDDLE)

14) ADDRESS OF OWNER 221 S. Church St.

15) PHONE NO Home ___ Office 375-7711

16) LOCATION OF SYSTEM 3717 Bon Rea Road (STREET OR COUNTY ROAD)

17) SUBDIVISION Annex #2 Providence Forest Park Lot No. 14 & 15 Block No. 1

Map Book No 6 Page No. 931 & 933

18) DEED REFERENCE — DEED BOOK 3837 AT PAGE 0513

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.

DATE OF APPLICATION ___

Vinson Realty Co Inc
OWNER
C Vinson Pres.

EHD-5-76

Environmental Health Department's Copy

Date Issued 6-2-77

Serial No. 0841

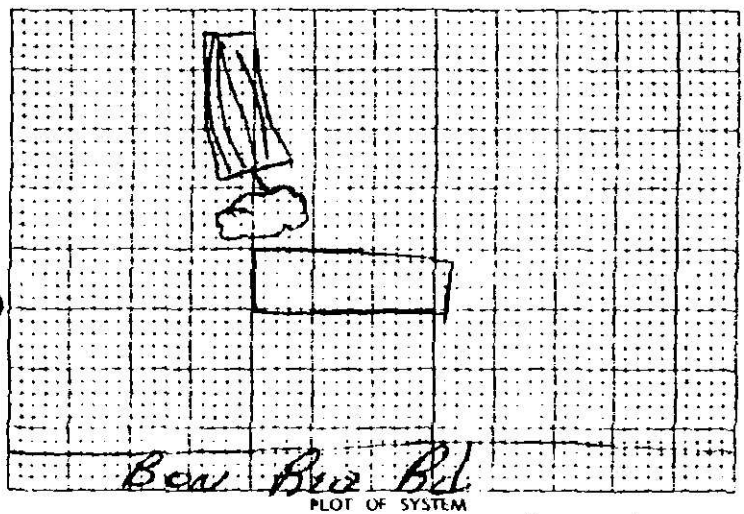
ICAR (S) Permit No. 6504

T C No. 211-263-11

Map Date 11-28-25

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 6504, 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 6-15-77, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate ———

Liquid Capacity of Tank ——— Repair

Tank Construction ———

Absorption and/or Nitrification Lines:

Total Line Length 200'

Number of Lines 4

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Vinson Realty Co. Inc.

LOCATION OF PROPERTY 3717 Bon Bea Bl

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 unobservable 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 10'x50'x17"

Division or Section Head

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.

EHD-5-76

Environmental Health Department's Copy

Date Issued 6-15-77 Serial No. 0793 C of A (s) No. 6504

T C. No. 21-263-11

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL HEALTH DIVISION

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

Name of Owner Vinson Realty Co. Inc. (LAST / FIRST / MIDDLE)

Location of Property 3717 Bowden Rd

Application Number 6504 Permit Number

Inspection Data:

Liquid Capacity of Tank Tank Material

Total Length of Drain Tile 200' Number of Lines 4 - 4

Depth of Filter Material 12" Cover Depth 18"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected (DATE) Tank Inspected (DATE)

Nitrification Field Inspected 6-15-77 (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, REPAIRED 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 Two bed used rather than one

Kenneth Godwin

Environmentalist

EHD-S-76

Environmental Health Department's Copy

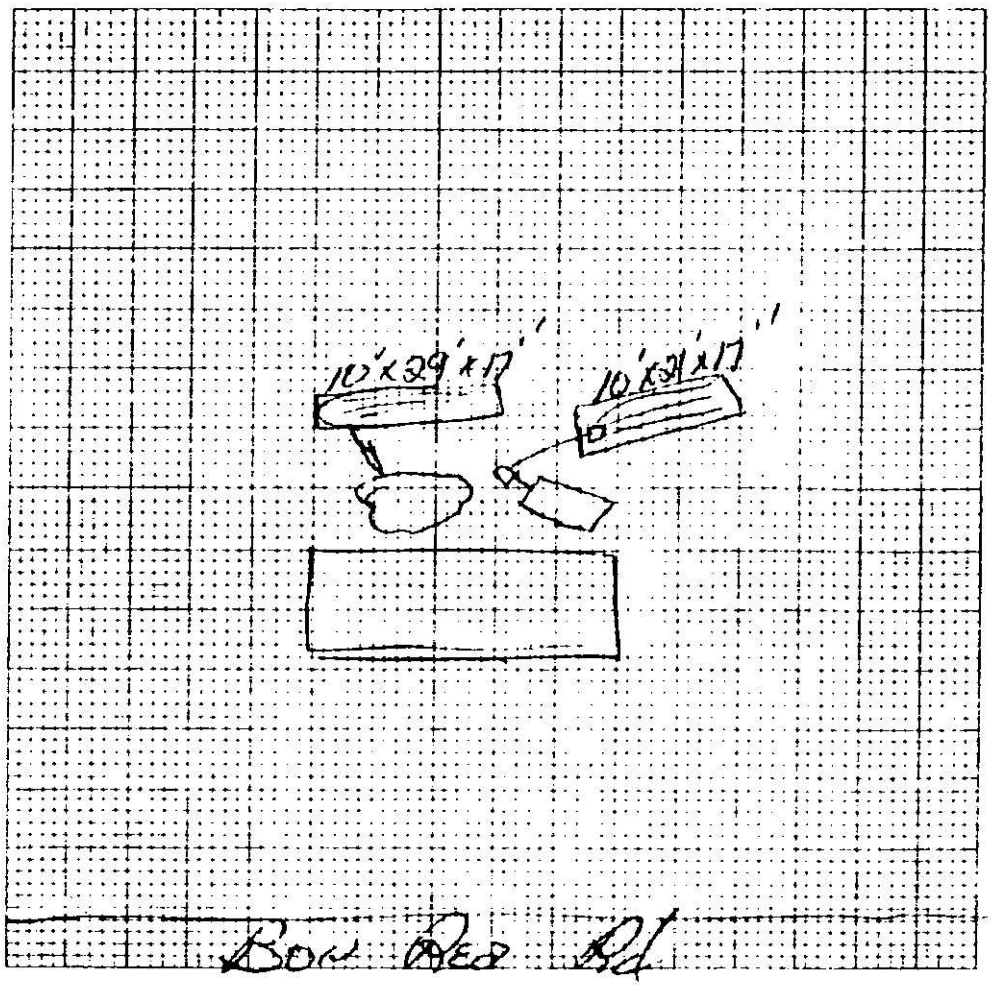
Date Issued 6-15-77

C of A (s) No. 6504

T C No. 11-263-11

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

PLOT PLAN SHEET



PLOT PLAN

ACCURATE DIAGRAM OF SYSTEM AS INSTALLED

Environmentalist

EHD 5-76

Environmental Health Department's Copy