Date Received 5/4/77

APT No. 12667

T. C. No. 215131

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER Ralph Squires Construction Company, Inc.
(LAST / FIRST / MIDDLE)

2) ADDRESS OF OWNER P. O. Box 25178 Charlotte, N. C. ZIP 28212

3) PHONE NO Home _____ Office 537-9553

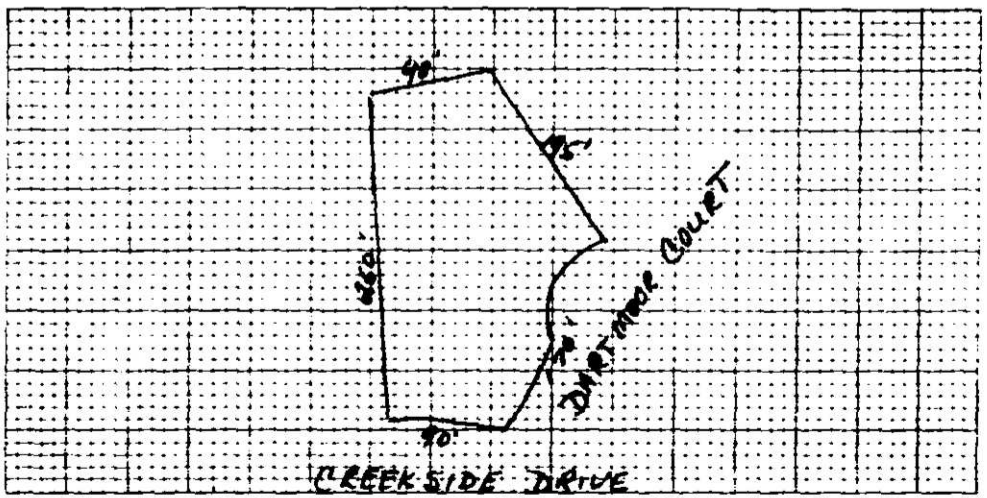
4) LOCATION OF PROPERTY 13918 Creekside Drive
(STREET OR COUNTY ROAD)

5) SUBDIVISION Windrow Estates LOT NO. 32 BLOCK NO. F

MAP BOOK NO _____ PAGE NO _____

6) DEED REFERENCE DEED BOOK _____ PAGE NO. _____

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

Jim Bazen
OWNER

EHD-5-76

Environmental Health Department's Copy

DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH SERVICES

APPENDIX H
SITE EVALUATION
(Ground Absorption Sewage Disposal)

Apt 12667

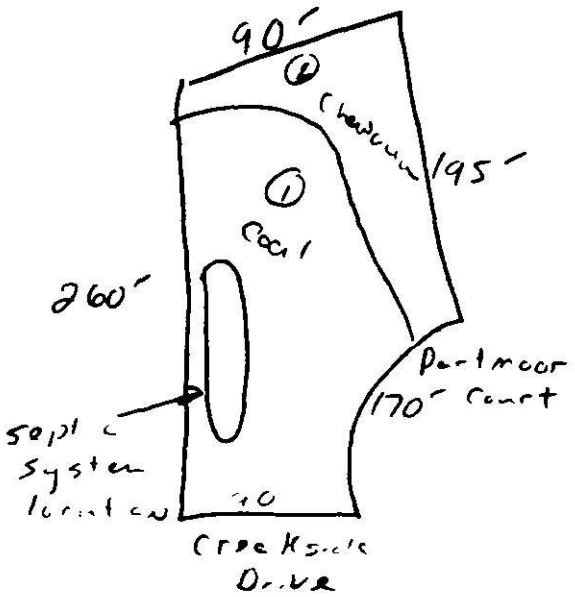
OWNER: Ralph Sanders Construction Co. DATE REQUESTED: June 14, 1977
ADDRESS: P.O. Box 25172 Charlotte PLAT NO.: ——
COUNTY: Mecklenburg LOT SIZE: 25,000 sq. ft.
LOCATION OF SITE: 7391 Crackerville Drive lot no. 32 Block F
Tax Lot No 215-121-62

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4
1. SLOPE (%)	S (PS) U 3-6%	S PS — U	S PS U	S PS U
2. SOIL TEXTURE (12-36 in.) (Sandy, loamy, clayey, [illegible] clay)	S (PS) U Clay	S PS — U	S PS U	S PS U
3. SOIL STRUCTURE (12-36 in.) (Clay soils)	S (PS) U Blocky	S PS — U	S PS U	S PS U
4. SOIL DEPTH (In.)	S PS >48"	S PS — U	S	S
[illegible] (In.)	—	—		
[illegible]	(C) suitable	C poorly drained		
[illegible]	(C) moderate 60 min/in	C seasonal high water table @ 6" from surface		
[illegible]	—	C floods		
[illegible]	provisionally suitable	C unsuitable		
[illegible]	Coastal	Chewacla		

Based on this investigation, the lot was found to have an adequate area of provisionally suitable soils for installation of a septic tank system. System design should be based on a percolation rate of 60 min/in.

W. Edward Casement
Soil Scientist

July 5, 1977


90'
2
Chestnut
195'
1
Coal
260'
Portmoor
170' Court
Septic
System
location
40
Creekside
Drive

Serial No. 1060

PTR No. 12667

Date Issued July 5, 1977

T C No. P.O.215-131-01

Map Date

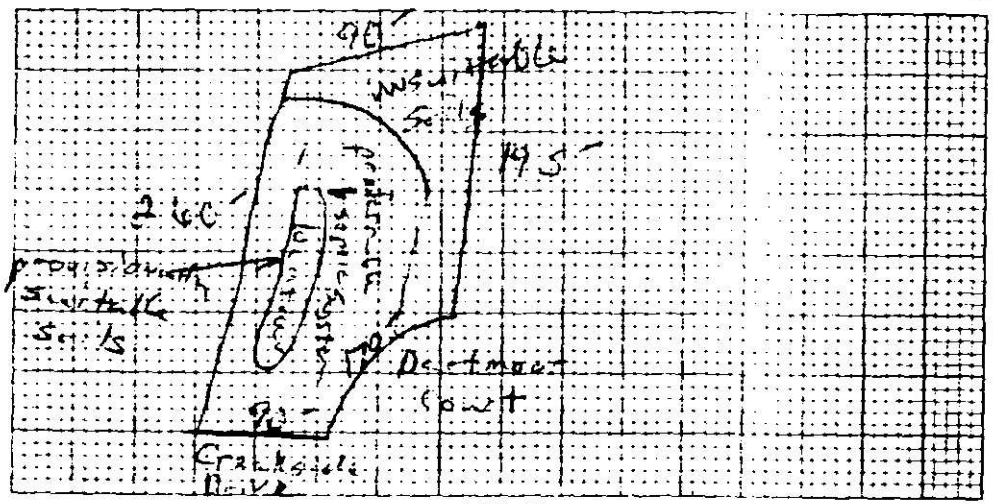
MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
SOIL INVESTIGATION REPORT

NAME OF OWNER Ralph Squires Construction Company, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P.O. Box 25178, Charlotte, NC ZIP 28212

LOCATION OF PROPERTY 13918 Creekside Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Windrow Estates LOT NO 32 BLOCK NO F



PLOT PLAN

This is to certify that a soil investigation and on-site 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 plat. **Provisionally Suitable**

The permeability rate determined by the investigation was **60 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 must be obtained before installing the proposed system shall be inspected by the Mecklenburg County Department of Environmental Health prior to the backfilling of any of the trenches of the wastewater treatment system on the above lot.
2. The size of the septic tank and the treatment system which must be installed will be determined by the Mecklenburg County Department of Environmental Health prior to the issuance of the permit. The rate obtained above, and on the size and type of building or structure thereon.
3. This approval applies only to the system as staked on the immediate area indicated as acceptable for system installation on the above plat.
4. This approval is given only for the system as instructed including the soiling, trenches performed on the lot which are shown on this Mecklenburg County Department of Environmental Health renders for areas indicated as acceptable for system installation and does not authorize installation, construction, alteration, or repair of any other system.

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 or revised laws, rules, and regulations been in effect on the issue date.

W. Edward Cesenhoft
EHD 5 74 **Soil Scientist**

John K. Adkisson
Environmental Health Director or Authorized Section Head

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 8/30/78

ICAR (S) Application No 12667

T. C. No P.O. 215-131-01

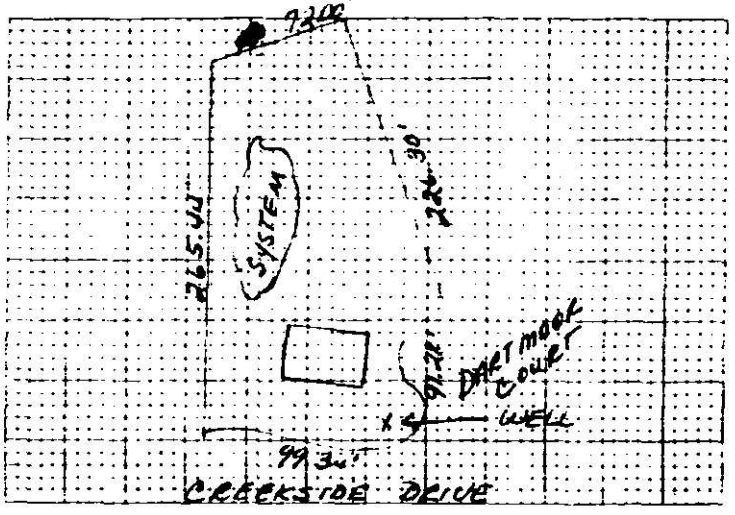
Map Date

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) 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)

Mobile Home ___ Yes X No
Residence X Yes ___ No
4) No. of Bedrooms 4
5 Business Use Max No Employees N/A
6 Washing Machine X Yes ___ No
7 Garbage Disposal ___ Yes X No
8 Dishwasher ___ Yes X No
9) Water Supply
A Individual Well Yes
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 Ralph Squires Construction Company (LAST FIRST MIDDLE)

14) ADDRESS OF OWNER P. O. Box 25178, Charlotte, N. C. 28212

15) PHONE NO Home ___ Office 537-9553

16) LOCATION OF SYSTEM 13918 Creekside Drive (STREET OR COUNTY ROAD)

17) SUBDIVISION Windrow Estates Lot No. 32 Block No. F

Map Book No ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? X YES ___ NO DATE RUN 7-5-77

20) PTR NUMBER (See Instructions) 12667

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 8-30-78

OWNER Mary Jane Eblick

EHD-5-76

Environmental Health Department's Copy

Serial No. 2178

LA No. 12667

Date Issued August 30, 1978

T C. No. P.0.215-131-01

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER Ralph Squires Construction Company, Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER P.O. Box 25178, Charlotte, NC ZIP 28212

LOCATION OF LOT 13918 Creekside Drive
(STREET OR COUNTY ROAD)

SUBDIVISION Windrow Estates LOT NO 32 BLOCK NO F

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 12667. 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, 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 permits 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

John R. Atkisson

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

Date Issued 14 Mar

Serial No. 2467

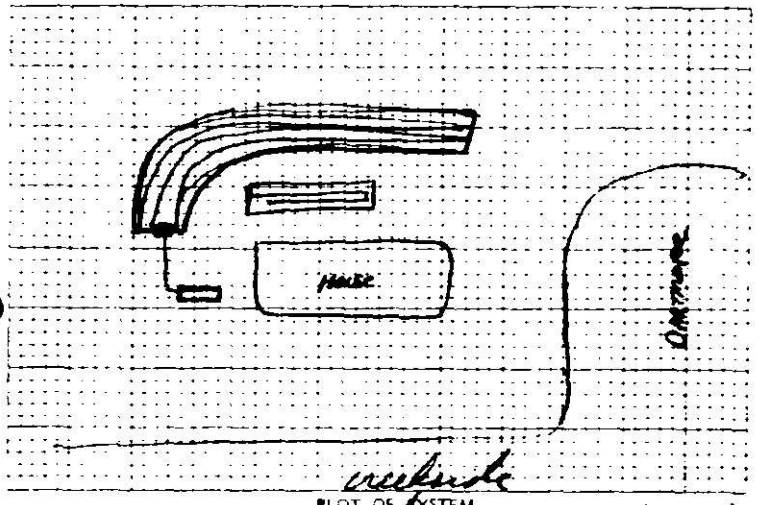
ICAR(S) Permit No. 12667

T C No. 10-215-131-01

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 _____ 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 14 April, after which date this permit shall be null and void



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500 gal

Tank Construction PC Conc

Absorption and/or Nitrification Lines

Total Line Length 440 ; 167'

Number of Lines 4 ; 4

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Ralph Squires Const. Co. Inc.

LOCATION OF PROPERTY 13918 Creekside Dr.

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: (12'x42'x17" stone) (12'x110'x17" Stone)

Steve Wood

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-S-76

Environmental Health Department's Copy

Date Issued 16 Mar 79

Serial No. 2382

C of A (s) No. 12667

T C No 215-131-01

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 Ralph Eggins Const. Co.
(LAST FIRST MIDDLE)

Location of Property 13918 Lucknow Dr

Application Number 12667 Permit Number 12667

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material F.C. Conc

Total Length of Drain Tile 440' & 167' Number of Lines 5 & 4

Depth of Filter Material 17" Cover Depth 18"

Water Supply Source well Distance from Water Source 75'

Excavation Inspected — (DATE) Tank Inspected 16 Mar (DATE)

Nitrification Field Inspected 16 Ma (DATE)

Washing Machine Line Inspected, If Applicable 16 Ma (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, 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 Honeycutt - Lowest - Soil marginal

Steve Wood
Environmentalist

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 12 June 79

ICAR(S) Application No. 12667

T. C. No. 215-151-11

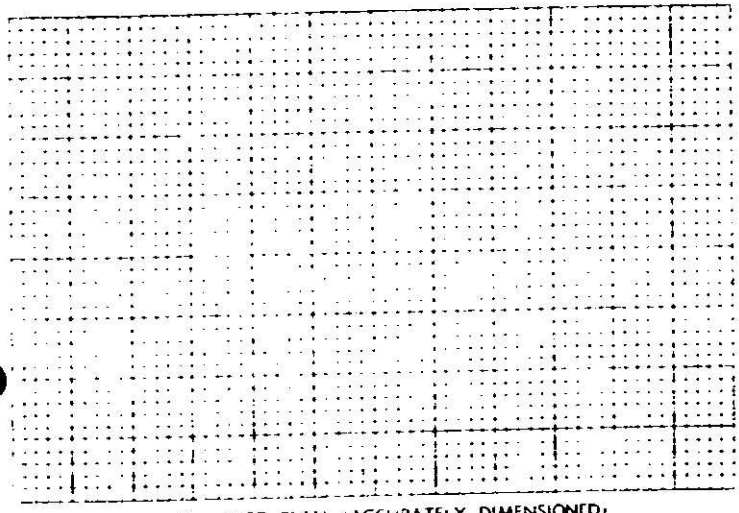
Map Date

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)

4) Mobile Home ___ Yes ___ No
Residence ✓ Yes ___ No

4) No. of Bedrooms ___

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) Governments 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 Harrison (LAST) (FIRST) (MIDDLE)

14) ADDRESS OF OWNER 13918 Lucknade

15) PHONE NO Home ___ Office ___

16) LOCATION OF SYSTEM Same (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ 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.

DATE OF APPLICATION ___

W Terry Harrison
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Date Issued 12 June 79

Serial No. 2843

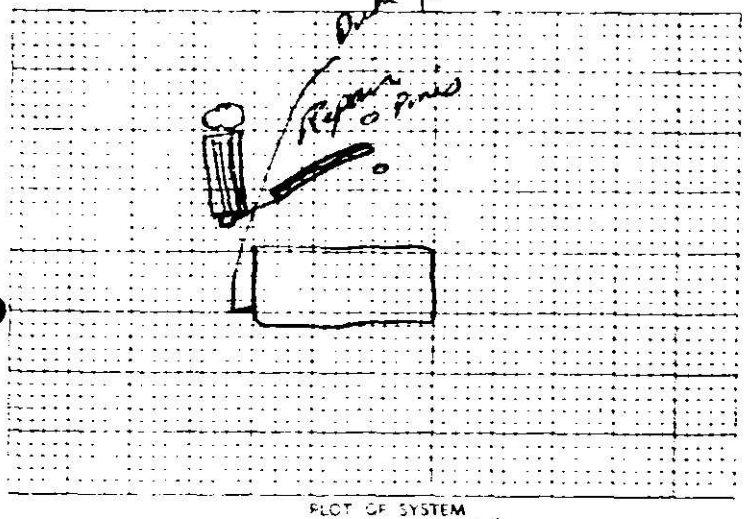
ICAR(S) Permit No. 12667

T C No. 25-13L-79

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 granted 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 12 June and this permit shall be void and of no effect if the information provided in the application is not true and complete. All work shall be completed on or before _____, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate Repair

Liquid Capacity of Tank —

Tank Construction —

Absorption and or Nitrification Line

Total Line Length 100'

Number of Lines 1

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Harrison

LOCATION OF PROPERTY 13918 Creekside DR.

The system shall meet all the construction requirements as set forth in the Regulations of the Mecklenburg County Health Commission 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 unserviceable for use.

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:

3'x35'x40" stone

note! - if soil changes at excessive depth do not install pump w/o approval

Division or Section Head

Environmentalist Stephen J Wood

* 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-5-74

Environmental Health Department's Copy

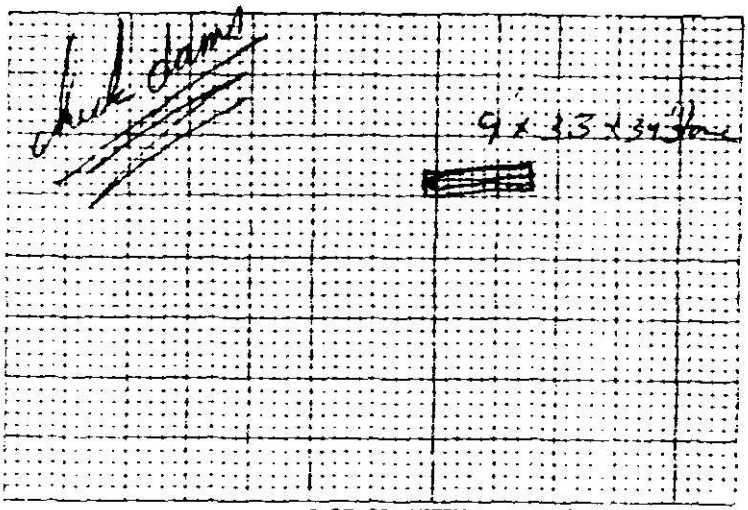
Date Issued 7/20/77 Serial 3037 ICAR(S) Permit No. 12667

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 _____, 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 _____, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate _____

Liquid Capacity of Tank —

Tank Construction —

Absorption and/or Nitrification Lines

Total Line Length 200'

Number of Lines 3

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Harrison

LOCATION OF PROPERTY 1318 Eastside DR.

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.

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.

Division or Section Head

Environmentalist Steve Wood

* 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 27 June 79 Serial No. 2795 C of A (s) No. 12667

T C No P.O. 215-431-01

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 Harrison (LAST) (FIRST) (MIDDLE)

Location of Property 13918 Creekside Dr.

Application Number _____ Permit Number 12667

Inspection Date:

Liquid Capacity of Tank Regan Tank Material _____

Total Length of Drain Tile 220' ; 100' Number of Lines 3 ; 1

Depth of Filter Material 40" + Cover Depth 18"

Water Supply Source well Distance from Water Source 100'

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

Nitrification Field Inspected 27 June (DATE)

Washing Machine Line Inspected, If Applicable 20 June (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 [redacted]

Steve Wood
Environmentalist

EHD-5-76

Environmental Health Department's Copy

SEE INSTRUCTIONS ON BACK

Date Received 8/23/79

ICAR(S) Application No 2667

T C No

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

Mobile Home ___Yes ✓No
Public ✓Yes ___No
4 No. of Bedrooms 4
5 Estimated Use - Max No Employees
6 Washing Machine ✓Yes ___No
7 Garbage Disposal ✓Yes ___No
8 Dishwasher ✓Yes ___No
9 Water Supply
A Private Individual Well ✓
B Governmental System
C Community System
Well source
Governmental source
10 Sewage System
Property within 200 feet of public sewer ___Yes ___No
Property located within 200 feet of community sewer ___Yes ✓No
11 EnvA Case No NA
12 EnvA Case No

3) PLOT PLAN (ACCURATELY DIMENSIONED)

13) NAME OF OWNER _____ (LAST) _____ (FIRST) _____ (MIDDLE)

14) ADDRESS OF OWNER 1315 Creekside

15) PHONE NO Home [illegible]-9946 Office 366-5657

16) LOCATION OF SYSTEM 1312 Creekside Dr. (STREET OR COUNTY ROAD)

17) SUBDIVISION Winthrow 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.

8-17-79
DATE OF APPLICATION

W Terry Harris
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial 3117

ICAR(S) Permit No. 12662

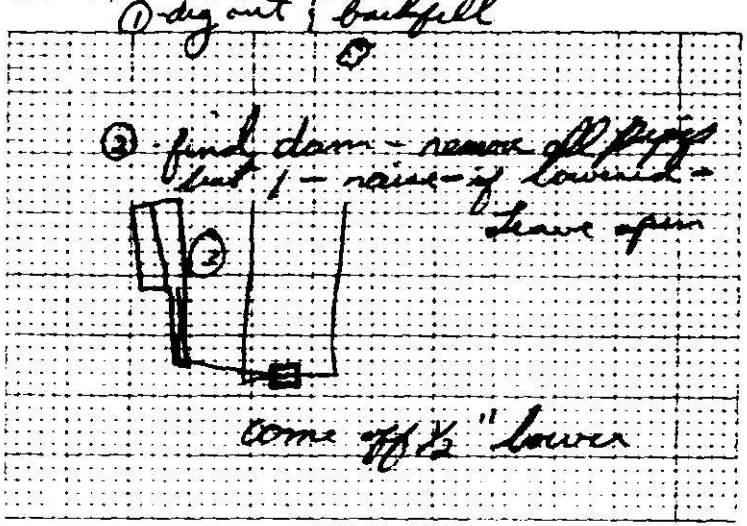
Date Issued 22 Aug 79

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 _____, 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 _____, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate Repair

Liquid Capacity of Tank _____

Tank Construction _____

Absorption and or Nitrification Lines

Total Line Length 180'

Number of Lines 1 & 2

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Harrison

LOCATION OF PROPERTY 13918 Cuckside Dr.

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.

3' wide 16' wide 39" stone
recommend sand 6" in
bottom of trench

THE [illegible] DOES NOT IN ANY WAY GUARANTEE [illegible] WILL OPERATE [illegible] AND SHALL RELIEVE [illegible] OWNING, CONTROLLING OR USING SUCH SYSTEM OF ANY LIABILITY RESULTING FROM THE FAILURE OF THE SYSTEM TO OPERATE PROPERLY.

Division or Section Head

Steve Wood
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.

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Environmental Health Department's **Copy**

Date Issued 18 Sept. 79 Serial 3020 C of A (s) No. 12667

T C No 88

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 Harrison (LAST) (FIRST) (MIDDLE)

Location of Property 13918 Creekside DR.

Application Number _____ Permit Number 12667

Inspection Data:

Liquid Capacity of Tank — Tank Material —

Total Length of Drain Tile 180' Number of Lines 1

Depth of Filter Material 34"/6" sand Cover Depth 18"

Water Supply Source well Distance from Water Source 90'

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

Nitrification Field Inspected 18 Sept (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 Repairs



Environmentalist

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