SEE INSTRUCTIONS ON BACK

Date Received 9-4-73

ICAR(S) Application No 6936

T C No

Map Date

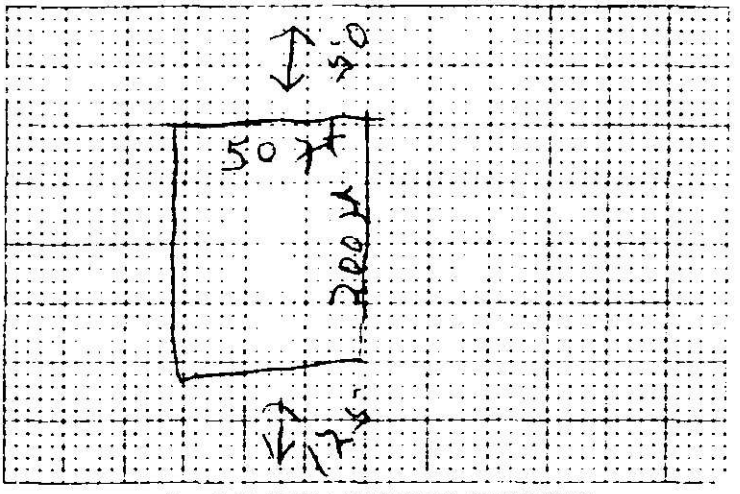
MECKLENBURG COUNTY HEALTH DEPARTMENT

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) X 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 Bedroom 2

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) Government Supply

C) Community System

1 Well Water

2 Government Supply

Sewage System

House located within 200' of public sewer Yes (No)

House located within 200' of community sewer Yes (No)

11) FHA Case No

12) VA Case No

13) NAME OF OWNER Harris (LAST) Charles (FIRST) Delbert (MIDDLE)

14) ADDRESS OF OWNER 4216 Cantey Place

15) PHONE NO Home 364-3019 Office 333-4410

16) LOCATION OF SYSTEM 4324 Carlotta Ave (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 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 content 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

C D Harris

DATE OF APPLICATION OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 7/27/73

Serial No. 4271

ICAR(S) Permit No. 69[illegible]

T. C. No.

Map Date

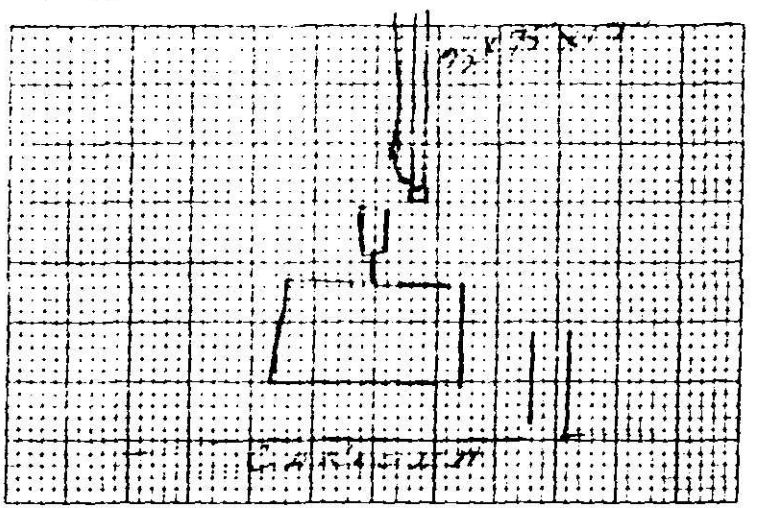
MECKLENBURG COUNTY HEALTH DEPARTMENT

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, X 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 [illegible] dated [illegible] 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 7/20/73, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate [illegible]

Liquid Capacity of Tank [illegible]

Tank Construction [illegible]

Absorption and/or Nitrification Lines:

Total Line Lenght [illegible]

Number of Lines [illegible]

Distance from House 10'

Distance from Property Line [illegible]

Distance from Well [illegible]

NAME OF OWNER [illegible]

LOCATION OF PROPERTY [illegible]

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 [illegible]

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 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 5-4-1-71

HEALTH DEPARTMENT'S COPY

Date Issued 9/10/73 Serial 3913

C of A (s) No. 6936

T C No. 115-084

Map Date 10/2/x

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner HARRIS (LAST) C (FIRST) DELBERT (MIDDLE)

Location of Property 4324 CAROLINA AVE. (RENTAL UNIT)

Application Number 6936 Permit Number 6936

Inspection Data:

Liquid Capacity of Tank RE Tank Material PR IR

Total Length of Drain Tile 225' Number of Lines 3

Depth of Filter Material 17" Cover Depth 2-3'

Water Supply Source IND WELL Distance from Water Source 50'+

Excavation Inspected 9/10/73 (DATE) Tank Inspected 9-10-73 (DATE)

Nitrification Field Inspected 9-10-73 (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, X 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 SOIL APPEARS UNSATISFACTORY

L. O. McGeman

Environmentalist

FORM NO E-6-4-1-71

HEALTH DEPARTMENT'S COPY