Date Received 9-16-83

MECK COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH
SEE INSTRUCTIONS ON BACK
SEP 16 1983
ENVIRONMENTAL HEALTH

ICAR (S) Application No. 20049

Tax No. 001 051 09

Map Date

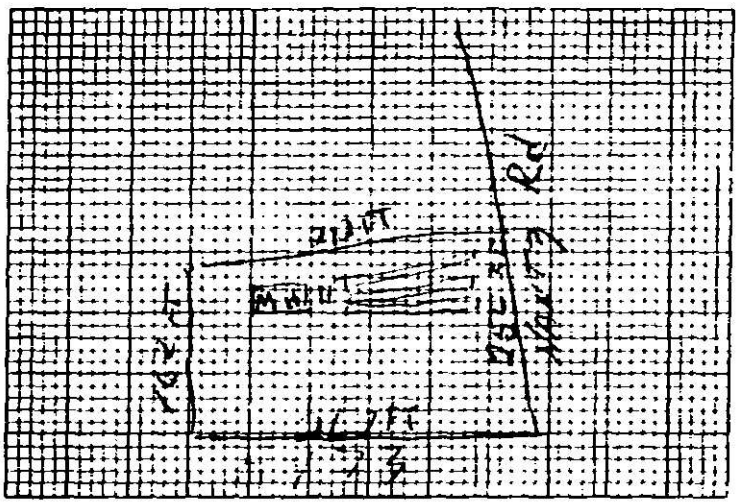
18837 14/73

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 on 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 Blackwell (LAST) Floyd (FIRST) Lewis (MIDDLE)

14) ADDRESS OF OWNER Box 94 Cornelius NC 28031

15) PHONE NO. Home 892-6536 Office 892-3223

16) LOCATION OF SYSTEM 18837 Hwy 73 ~~+ Antioch Rd~~ (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. ___ Block No. ___

Map Book No. 1 Page No. 5

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ___ NO DATE RUN 10-21-82

20) PTR NUMBER (See Instructions) 16166 soil test done on 3 lots

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.

9-16-83
DATE OF APPLICATION

Floyd Blackwell
OWNER

EHB-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Mecklenburg County

Department Of Building Standards And Code Enforcement

P. O. Box 31097

Charlotte, North Carolina 28231-1097

To: Health Dept.
Zoning Sec.
Char. N C.

Sept. 27, 1983

Reference: Zoning

Dear

The parcel of land located at 10537 NC 73 Hy
and further identified by tax parcel number 001-051-09
is zoned RA 6/16 (Rescr. Residential).

Permitted uses in this district include: Mobil Homes on individual lots

If this office can be of any further assistance, please contact us.

Very truly yours,

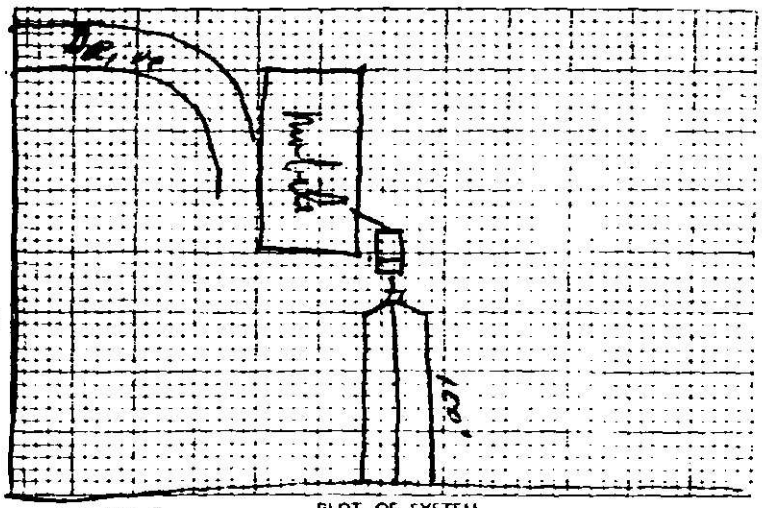
F. L. Binson 605
Zoning Inspector

Date Issued 9-29-83 Serial No. 6671 ICAR (S) Permit No. 20049
T CRA 001-051-09
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 20049, dated 9-16-83 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 10-29-83, after which date this permit shall be null and void.

Hwy 73



PLOT OF SYSTEM

Permeability Rate P.S.

Liquid Capacity of Tank 1500 gal.

Tank Construction plc concrete

Absorption and / Nutrification Lines

Total Line Length 300'

Number of Lines 3

Distance from House 5' +

Distance from Property Line 10' +

Distance from Well 50' +

NAME OF OWNER Floyd L. Blackwell

LOCATION OF PROPERTY 18837 N.C. Hwy 73

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 - 100' x 3' x 12" stone trenches on 9' centers

Comments:

B Hamlett
Division or Section Head

R O Lefler
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.

BHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

RF 10-20-83

C of A (s) No. 20049

Date Issued 10-19-83 Serial 6218 T C. No. 001-051-09

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 Blackwell (LAST) Floyd (FIRST) L. (MIDDLE)

Location of Property 18837 N.C. Hwy 73

Application Number 20049 Permit Number 20049

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material p/c Concrete

Total Length of Drain Tile 300' Number of Lines 3

Depth of Filter Material 12" Cover Depth 2'

Water Supply Source well Distance from Water Source 50'+

Excavation Inspected — (DATE) Tank Inspected not in yet (DATE)

Nitrification Field Inspected 10-19-83 (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

R P Lelgs
Environmentalist

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

APPLICATION FOR AN IMPROVEMENT PERMIT

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH

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: 20049
TC: _____
SERIAL: № 11137

MECK COUNTY DEPARTMENT
RECEIVED
JUL 7 1986
ENVIRONMENTAL HEALTH
☒ CRT

JOB LOCATION

① ADDRESS: 8837 (STREET NO) N.C. HWY 73 (STREET) ② FILE: _____
③ JURISDICTION: _____ ④ TAX PARCEL NO.: 001 051 09
⑤ SUBDIVISION: _____ ⑥ LOT: _____ ⑦ BLOCK: _____

OWNER

⑧ NAME: Floyd (FIRST) Lewis (MIDDLE) Blackwell (LAST)
⑨ MAILING ADDRESS: Box 114
⑩ CITY: Cornelius ⑪ STATE: NC ⑫ ZIP: 28031
⑬ PHONE: (WORK) _____ ⑭ (HOME) 892-6536

REQUEST

This request is for a(n):
⑮ ☐ New permit
⑯ ☐ Repair or alteration permit
⑰ ☐ Authorization for mobile home exchange (Use existing system)
⑱ ☒ Other (specify) Move house on lot

DESIGN CRITERIA

System will serve:
⑲ ☒ Residence ⑳ ☐ Mobile home
㉑ ☐ Business or place of public assembly
㉒ Number of bedrooms? 3
㉕ Type? _____
㉓ Maximum occupancy? 5
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 DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Floyd D Blackwell
Date: 7-7-86

IMPROVEMENT PERMIT

The undersigned, an authorized agent of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH, 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 the Department.

. This permit is not transferable, and shall become null and void . . . months from the date of issuance.

B. R. Ferguson — Environmentalist — 7-9-86 Date
Director or Authorized Section Head — 7-10-86 Date

This permit must be signed by the Director of Environmental Health or authorized section head in order to be valid.