4624250912

131 Chestnut Tree Rou L393

Date Issued 9/3/71 **Serial No.** 1084 C of A (s) No. 1307

T C No

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

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

Name of Owner Jarc (LAST) Frank (FIRST) Ernst (MIDDLE)

Location of Property Tuskarora Trail

Application Number 1307 Permit Number 9-45

Inspection Data:

Liquid Capacity of Tank 1000 Tank Material ~~3'7½"x10'x15"~~ Pre Cast

Total Length of Drain Tile 300' Number of Lines 3(7½"x100'x17")

Depth of Filter Material 17" Cover Depth 2½'

Water Supply Source Well Distance from Water Source 75'

Excavation Inspected 9/3/71 (DATE) Tank Inspected 9/3/71 (DATE)

Nitrification Field Inspected 9/3/71 (DATE)

Washing Machine Line Inspected If Applicable (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface soil absorption effluent disposal as described above and it has been ✓ installed and constructed, all 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. This Certificate of Approval is not and may not be construed to be a guarantee that the system will operate properly or shall prevent any person now or hereafter making, constructing or using such system from any civil or criminal liability on the failure of the system to operate properly. This Certificate of Approval is issued subject to the restrictions and conditions set forth in the permit and in addition to those listed below under Comments. This Certificate of Approval shall be null and void if any information contained in the application or plans or any additions are made to the property which would increase the requirements for said system.

Comments

Charles H. Williams
Environmentalist

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

HEALTH DEPARTMENT'S COPY

Date Received March 4, 1971

ICAR(S) Application No. 1307

T. C. No.

Map Date

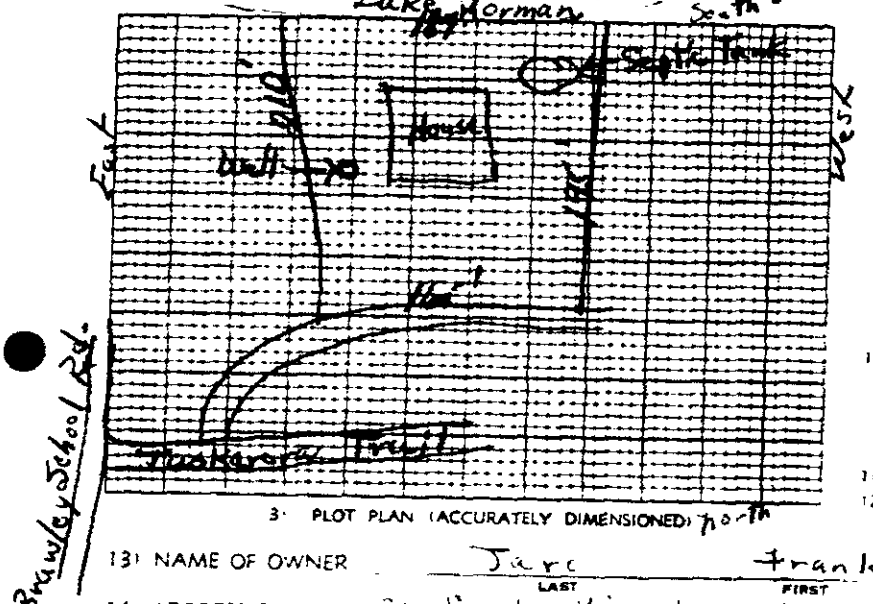
MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

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 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) 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 Jaro (LAST) Frank (FIRST) Ernst (MIDDLE)

14) ADDRESS OF OWNER 310 Sarah's View Lane Matthews N.C. 28105

15) PHONE NO Home 366-3777 Office 372 5323

16) LOCATION OF SYSTEM Tuskaroora Trail (Lake Norman) (STREET OR COUNTY ROAD)

17) SUBDIVISION Section 6 Lot No. 393 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 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.

March 4 1971
DATE OF APPLICATION

Frank E. Jaro
OWNER

FORM NO. E-4-7-1-70

HEALTH DEPARTMENT'S COPY