Date Received 2/25/76

ICAR (S) Application No. 10516

T. C. No. 02-271-04

Map Date 2-21-75

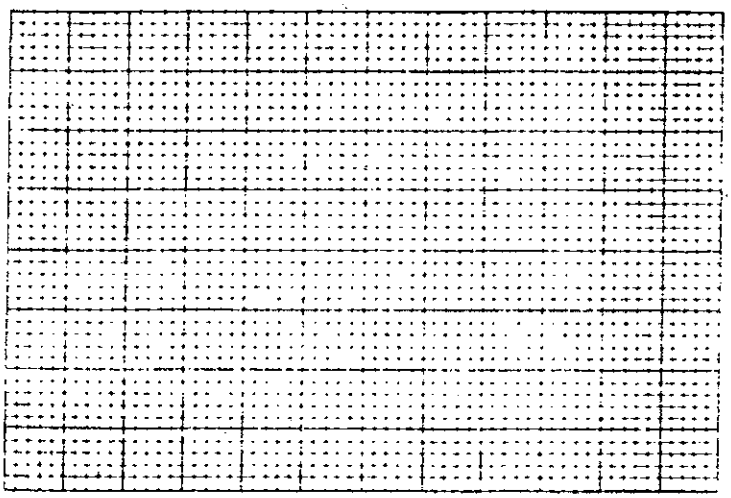
MECKLENBURG COUNTY HEALTH DEPARTMENT

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) 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 PETREE, (LAST) David (FIRST) W. (MIDDLE)

14) ADDRESS OF OWNER 3801 Table Rock Rd.

15) PHONE NO. Home 366-1201 Office 394-2381

16) LOCATION OF SYSTEM OFF- 2162 (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. 479 Block No. Sec 6

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES _____ NO DATE RUN 1-30-76

20) PTR NUMBER (See Instructions) 10516

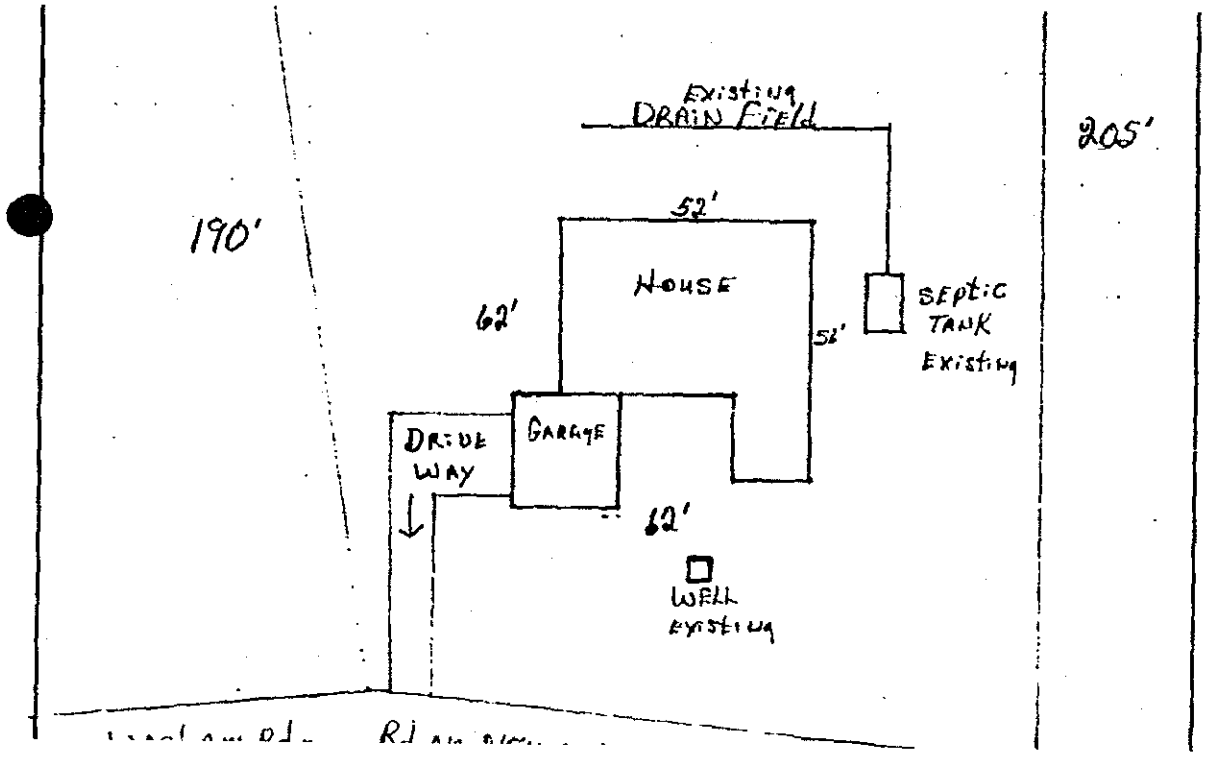
The undersigned person hereby agrees that he has read the foregoing application and that the contents of some are true. It is understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

2-25-76
DATE OF APPLICATION

David W Petree
OWNER

FORM NO. E-4-4-2M-6-785

HEALTH DEPARTMENT'S COPY

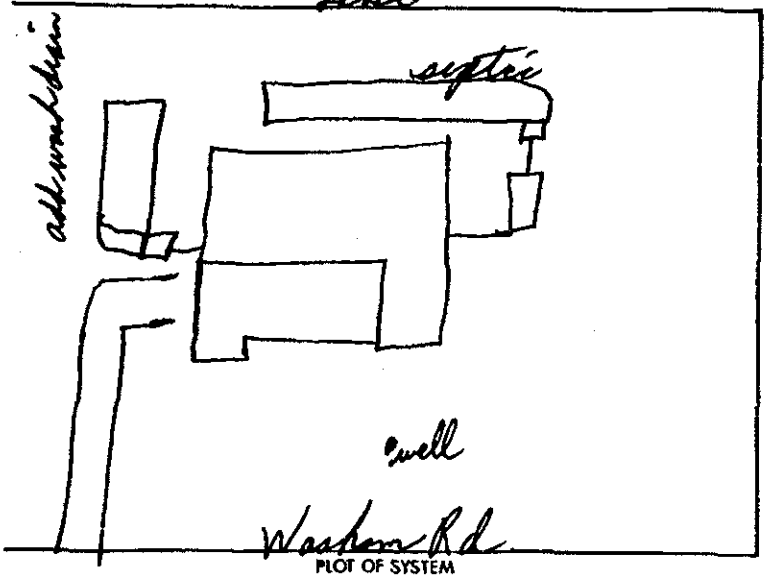

Existing
DRAIN FIELD
205'
190'
52'
HOUSE
62'
52'
SEPTIC
TANK
Existing
DRIVE
WAY
GARAGE
62'
WELL
existing

INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR PERMIT

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 10516 DATE: 6-5-87
TC: 001-361-55 ✓
SERIAL № 10980

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 the application dated 5-8-87. All work shall be completed on or before 11-5-87, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 10 NCAC 10A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Department of Environmental Health before any system can be covered up or placed into service. 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.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank wash drain gallons
Liquid Capacity of Dosing Tank ____ gallons
Tank Construction ____

Absorption and/or Nitrification Lines:
Trench Width 9 feet
Total Line Length 126 feet
Number of Lines 3
Depth of Stone 17 inches
Distance from House 5 feet
Distance from Property Line 10 feet
Distance from Well >50 feet

NAME OF OWNER David Petree
LOCATION OF PROPERTY 16719 Washam Rd.
Comments: Used 9'X42'X17" stone, install D-box for wash drain field

Division or Section Head

B. R. Ferguson
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.

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER OR AGENTS COPY