INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR APPROVAL

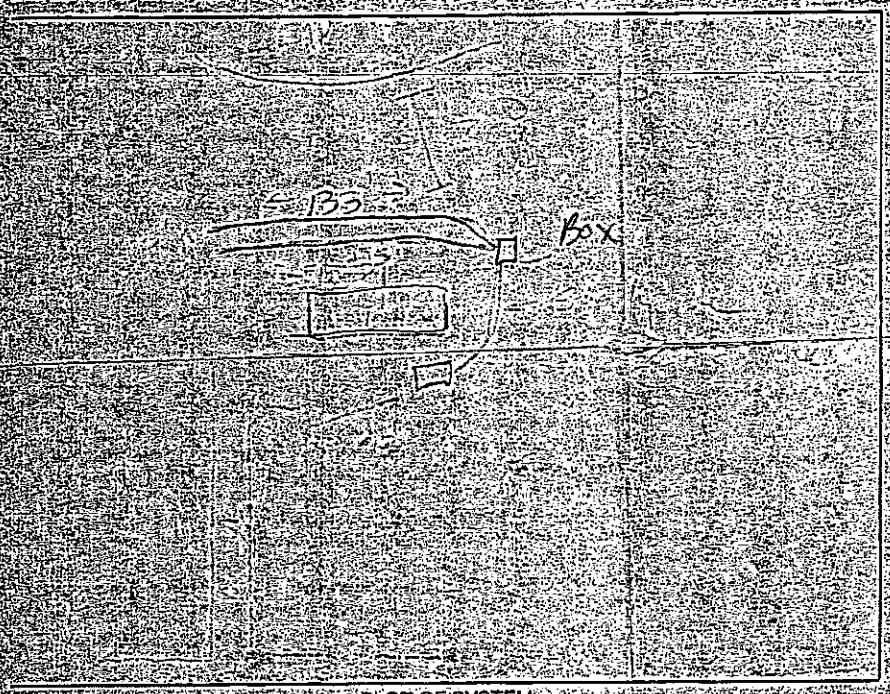
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 14D94 DATE: 3-14-97

TC: 02-053-30.A ☐ L

SERIAL #: 17130

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 ____. All work shall be completed on or before 8/10/97, after which date this permit shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A .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 Health Department 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 ____ gallons

Liquid Capacity of Dosing Tank N/A gallons

Tank Construction ____

Trench Depth 24"

Absorption and/or Nitrification Lines:

Trench Width 24" feet

Trench Walls Scored and Porous ✓

Total Line Length 240' feet

Number of Lines 2

Depth of Stone 12" inches

Distance from House 5' feet

Distance from Property Line 10' feet

Distance from Well 50' feet

NOTICE: This system shall not be installed while soils are in a wet condition.

NAME OF OWNER ____

LOCATION OF PROPERTY ____

Comments: ____

Environmental Health Specialist

WHITE: HEALTH DEPARTMENT's COPY - CANARY: E.H.S. COPY - PINK: OWNER OR AGENT's COPY