



Summit County Public Health

1867 West Market Street ♦ Akron, Ohio 44313-6901
Phone: (330) 926-5600 ♦ Toll-free: 1 (877) 687-0002 ♦ Fax: (330) 923-6436
www.scph.org

BUILDING AND ZONING INSPECTION REPORT

Property Address: 4919 Mayfair Rd

City: North Canton, OH

Zip: 44720

Parcel ID: 2811572

Applicant's Information:

Name: Jack Runner

Phone #: 330-472-7555

Email: jack@richardsfence.com

Address (if different): N/A

City

State

ZipCode

Site visit date(s): 5/29/25

Based on the inspection listed above, the project is:

- ☒ **Approved** for the project as it has been proposed. Please see attached stamped plan.
- ☐ **Disapproved.** The proposed project is not capable of meeting the minimum code requirements without adversely affecting the sewage treatment system (STS), private water system (PWS), or future replacement area(s).

The conclusions rendered may be without the knowledge of some of the individual parts of the STS/PWS and applies only to the date and time the conclusion was made. Therefore, this evaluation does NOT guarantee the future performance of the system(s).

Comments:

Proposed project of a detached garage is approved. The project appears to meet the minimum required distances to the well and septic. Owner is same owner from when system was installed, and stated the leach lines do not meet existing driveway. Garage will not have any plumbing. Tank levels appeared normal, no distribution boxes to grade, but no issue noted in leaching area. No nuisance observed at time of inspection.

When building garage, please remain at least 10ft from all septic components (including leach lines), and 5ft from the well.

Inspector's Signature: Ellie Miller Date: 5/29/25

250'

Proposed Garage

50'

Existing House

2 1,000 Gallon TANKS

103'
169' - 0"
well

337

379

SUMMIT COUNTY PUBLIC HEALTH
1867 W. Market Street Akron, OH 44313-6901
BUILDING AND ZONING APPROVAL

Ellie Miller
Inspector

May 29 2025
Date

330-812-3974

Phone Number:

4919 MAY Fair
2.72 Acres

Driveway

Shared Lane

733'

RECEIVED

MAY 23 2025

SUMMIT COUNTY PUBLIC HEALTH
ENVIRONMENTAL DIVISION

SUMMIT COUNTY HEALTH DEPARTMENT
1100 Graham Road Cir Stow Ohio 44224-2992 (330) 923-4891

HOME SEWAGE SYSTEM INSPECTION REPORT

POL SUB-DIVISION: GREEN

DATE PERMIT ISSUED: 05/29/02

OWNER: JACK & STEFANIE RUNNER
ADDRESS: 4919 MAYFAIR RD, AKRON 44720

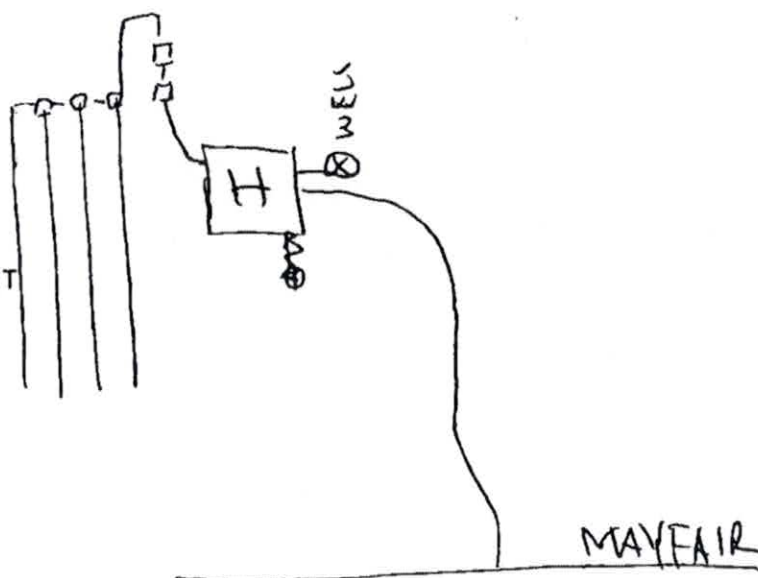
INSTALLER: HARBAUGH EARTHMOVING CO (854-2643)

SPECIFICATIONS:

=====

NEW

- ___ NO FAMILIES: 1
- ___ SOIL TYPE:
- ___ VARIANCE: NO
- ___ EFFLUENT: ONSITE
- ___ NO TANKS: 2
- ___ SIZE (EA): 1000
- ___ AER. TANK: NO
- ___ TILE FIELD
- ___ SIZE: 400 LINEAL FEET
- ___ EVAP TRENCH: NO
- ___ SIZE: 0 SQ FEET
- ___ CHLORINATOR: NO
- ___ LIFT PUMP:



APPROVED: ☒
PERMIT NO: 023739

DISAPPROVED: ☐

INSPECTOR'S SIGNATURE

DATE: 5, 30, 2
WOSTZ

THE INSPECTION OF THIS PROPERTY IS TO ASSURE THAT THE HOME SEWAGE SYSTEM COMPLIES WITH THE SUMMIT COUNTY HEALTH DEPT'S ENVIRONMENTAL HEALTH CODE. THE INSPECTION OF THIS PROPERTY BY THE SUMMIT COUNTY HEALTH DEPT. IN NO WAY GUARANTEES THE PERFORMANCE OF THE HOME SEWAGE SYSTEM.

4919MAYFA



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BUILDING AND ZONING EVALUATION APPLICATION

Parcel Information:

Property Address: 4919 Mayfair road

City: North Canton

Zip: 44720

Parcel ID: 2811572

Applicant's Information:

Name: Jack Runner

Phone #: 330-472-7555

Email: jack@richardsfence.com

Address (if different): _____

City

State

ZipCode

RECEIVED

MAY 23 2025

Property Information and Project Details:

Sewage Disposal

- ☐ Sanitary Sewer
☒ Septic System

Water Source

- ☐ Municipal Water
☒ Private Water (well, cistern, etc.)

Please select the reason for submitting the application:

Proposed Project Type	Fee
<input type="checkbox"/> Home Addition/Remodel Addition to existing house that increases square footage, but not the number of potential bedrooms	\$125
<input checked="" type="checkbox"/> Additional Property Features Garage, shed, accessory buildings, pond, swimming pool, deck, etc.	
<input type="checkbox"/> One Bedroom Addition This is defined as the addition of habitable space which includes, but is not limited to: a bedroom, office, den, etc.	

Brief Project Description

The Addition of a 40x60 detached garage.

- ☒ The attached drawing includes the location of all septic system components and private water systems and distances, in feet, to the proposed project.

I understand that any approval or disapproval is based on the information I have provided and any change in this information may result in a voided approval. This evaluation may not be used as an assessment of the septic or private water system.

Signature of Applicant

5-23-25
 Date

Received by: KW
 Amount: \$ 125.00

- ☐ Cash
☒ Credit card 023656
☐ Check #:
 Invoice No: 5-19272

5-23 EJR