NAME OF OWNER

LOCATION OF PROPERTY

Serial No. 4204

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION CONSTRUCTION, ALTERATION, AND OR REPAIR PERMIT

Application Must Be Accurate, Soil Analysis, Sketch Below

Type Sewage

PLOT OF SYSTEM

NAME OF OWNER

LOCATION OF PROPERTY

The system shall meet all of the construction requirements as set forth in the Regulations of the County Board of Health which are in effect on the date of the granting of this permit. No permit must be issued by the Health Director before any system can be covered or rendered inspectable or can be used

Comments:

Owner or Agent Signature

Date:

PROPERTY INFORMATION
(FROM ENGINEER OF SURVEY)

TAX/PARCEL NUMBER:

STREET

ADDRESS: