SEE INSTRUCTIONS ON BACK

Date Received 6/4/81

ICAR(S) Application No. 17974

T. C. No. 001-391-37

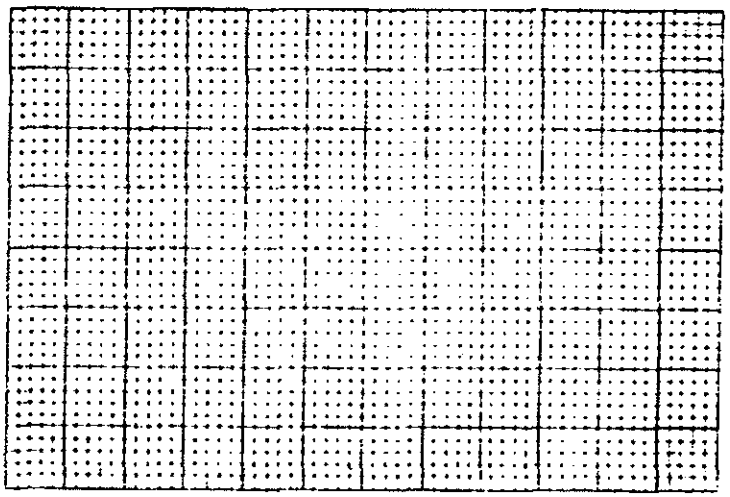
Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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 Department of Environmental Health 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.



31 PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ✓ Yes ___ No

Residence ✓ Yes ___ No

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 Reynolds (LAST) Arlie (FIRST) Gilbert (MIDDLE)

14) ADDRESS OF OWNER Rt #11 Box 473 Huntersville 28078

15) PHONE NO. Home 875-4426 Office _____

16) LOCATION OF SYSTEM Eastfield Rd (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No _____ Block No. _____

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A SOIL INVESTIGATION 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.

5-21-81
DATE OF APPLICATION

A. G. Reynolds
OWNER

EHO-5-76 ENVIRONMENTAL HEALTH DEPARTMENT'S COPY