SEE INSTRUCTIONS ON BACK

Date Received 5/14/80

ICAR (S) Application No 16879

T. C No 001-383-16 1

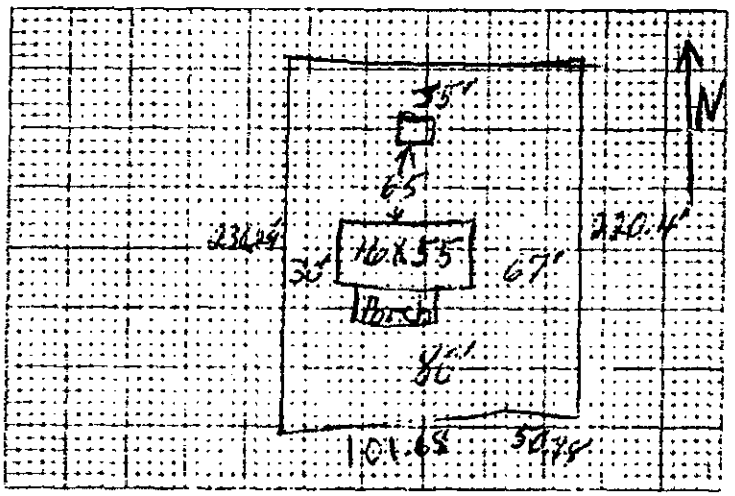
Map Date _____

# 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) X Alter or Repair an individual septic tank wastewater treatment system with a subsurface, soil absorption, effluent discharge.




3) PLOT PLAN (ACCURATELY DIMENSIONED)

4) Mobile Home ____Yes ____No
Residence X Yes ___ No

4) No of Bedrooms 2

5) Business Use — Max No Employees _____

6) Washing Machine ____Yes X No

7) Garbage Disposal ____Yes X No

8) Dishwasher ____Yes X No

9) Water Supply:
A) Individual Well X
B) Governmental System _____
C) Community System
1 Well source _____
2 Governmental source _____

10) Sewage System
House located within 200 feet of public sewer ____Yes X No
House located within 200 feet of community sewer ____Yes X No

11) FHA Case No _____

12) VA Case No _____

13) NAME OF OWNER Davis (LAST) Fred (FIRST) H (MIDDLE)

14) ADDRESS OF OWNER 21 May St Concord N.C. 28025

15) PHONE NO Home 786-4253 Office 394-4161

16) LOCATION OF SYSTEM West Side Dr (STREET OR COUNTY ROAD)

17) SUBDIVISION Lake Norman Lot No. 194 Block No. Sec 6

Map Book No _____ Page No. _____

18) DEED REFERENCE — DEED BOOK 4105 AT PAGE 0407

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.

DATE OF APPLICATION

Fred H Davis
OWNER

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY